FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Kirban M  | porting Person*             | 2. Date of E<br>Requiring S<br>(Month/Day<br>10/21/202 | statement<br>/Year) | 3. Issuer Name and Ticker or Trading Symbol Vita Coco Company, Inc. [ COCO ] |  |  |                                       |  |  |   |  |
|---|-----------------------------|--|---------------------|--|--|--|---------------------------------------|--|--|---|--|
| (Last) 250 PARK FLOOR  (Street) NEW YORK  (City)  | (First) AVENUE S NY (State) | (Middle) SOUTH, 7TH  10003                             |                     |  | 4. Relationship of Reporting Issuer (Check all applicable)  X Director  X Officer (give title below)  See Remain | 10% C<br>Other<br>below)               | )<br>wner<br>(specify                 | File<br>10/                            | d (Month/Day/<br>/25/2021<br>ndividual or Joeck Applicable<br>Form filed<br>Person | int/Group Filing<br>e Line)<br>by One Reporting<br>by More than One |  |
| Table I - Non-Derivative Securities Beneficially Owned  |                             |  |                     |  |  |  |                                       |  |  |   |  |
| 1. Title of Security (Instr. 4)   |                             |  |                     |  | 2. Amount of Securities<br>Beneficially Owned (Instr.<br>4)  | Form: I<br>(D) or I                    |                                       |  | 4. Nature of Indirect Beneficial<br>Ownership (Instr. 5)                           |   |  |
| Common Stock  |                             |  |                     |  | 2,026,229(1)   |  | I                                     |  | By: Michael Kirban 2010 Trust  |   |  |
| Common Stock  |                             |  |                     |  | 795,681 <sup>(2)</sup>   |  |                                       |  | By: Michael Kirban Revocable<br>Trust  |   |  |
| Table II - Derivative Securities Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |                             |  |                     |  |  |  |                                       |  |  |   |  |
| 1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)                    |                             |  | ate                 | Underlying Derivative Security (Instr. 4)                                    |  | 4.<br>Convers<br>or Exerc              | cise                                  | 5.<br>Ownership<br>Form:<br>Direct (D) | 6. Nature of<br>Indirect Beneficial<br>Ownership (Instr.                           |   |  |
|   |                             |  | Date<br>Exercisable | Expiration<br>Date   | Title  | Amount<br>or<br>Number<br>of<br>Shares | Derivative or Indirect (I) (Instr. 5) |  | 5)   |   |  |

#### **Explanation of Responses:**

- 1. The number of Common Stock held directly was overstated on the Reporting Person's original Form 3.
- $2. \ The \ number \ of \ Common \ Stock \ held \ indirectly \ was \ understated \ on \ the \ Reporting \ Person's \ original \ Form \ 3.$

#### Remarks

Co-Founder, Co-Chief Executive Officer, Chairman, Director

<u>/s/ Yolanda Goettsch,</u> Attorney-in-fact <u>12/09/2021</u>

\*\* Signature of Reporting

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.