SEC Form 4							
FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						
Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMEN	IT OF CHANGES IN BENEFICIAL OV	VNERSHIP				
obligations may continue. See Instruction 1(b).	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 Address of Reporting Perso	n*	2. Issuer Name and Ticker or Trading Symbol	5. Relationship				

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	C
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1. Name and Address of Reporting Person [*] Zupo John					2. Issuer Name and Ticker or Trading Symbol <u>Vita Coco Company, Inc.</u> [COCO]									(Cł	5. Relationship of Reporting Person(s (Check all applicable) X Director 10			rson(s) to Is 10% Ov			
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) Officer (give title Ot										Other (s below)						
	50 PARK AVE SOUTH EVENTH FLOOR				4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)									Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) NEW Y	ORK N	NY 10003														Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)			le 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intend satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								ded to							
		Tabl	e I - No	n-Deriv	ative	Sec	uriti	es A	cqu	ired, I	Disp	oosed	of, or	Ben	eficia	lly Owne	d				
1. Title of	Security (Ins	tr. 3)		2. Trans Date (Month/I	action Day/Year) E)) if	A. Deer xecutio any lonth/E	n Date	e, ·	3. Transac Code (In 8)			rities Ac ed Of (D		d (A) or r. 3, 4 an	Benefic Owned	es ially Following	Form (D) c	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									_	Code	v	Amoun	t (A) or D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	n Stock			06/07	06/07/2023					А		2,684 ⁽¹⁾		Α	\$0.	0 5,	5,017		D		
		Т		Deriva (e.g., p												y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,		Transaction Number Ex Code (Instr. of (M		Exp	6. Date Exercisable and Expiration Date (Month/Day/Year) Derivative Securities Underlying Derivative Secu (Instr. 3 and 4)					8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Benefici Ownersh (Instr. 4)			
					Code	v			Date	e ercisable		piration	or Ni Ni		lumber						
Deferred Restricted Stock Units	(2)									(2)		(2)	Comm Stocl		5,757		5,757	,	D		
Non- Qualified Stock Option (right to buy)	\$10.178									(3)	12	/16/2029	Comm Stocl		8,675		38,675	5	D		

Explanation of Responses:

1. Represents RSUs granted under the company's 2021 Incentive Award Plan which vest in full the earlier of (i) the day immediately preceding the Annual Stockholders Meeting after the grant date or (ii) the first anniversary of the grant date provided that the Reporting Person remains in continuous service on the applicable vesting date.

2. Each deferred RSU represents the right to receive one share of common stock of the company. The deferred RSUs granted under the company's 2021 Incentive Award Plan are vested and will settle on June 1, 2027.

3. The stock option is fully vested and currently exercisable.

By: Yolanda Goettsch,
Attorney-in-Fact For: John

<u>Zupo</u>

06/09/2023

** Signature of Reporting Person 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 4 (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.