FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
l	hours per response	: 0.5								

	Check this box if no longer subject
\neg	to Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

					_		.,				iipaiiy Act c			_							
1. Name and Address of Reporting Person* Amoo-Gottfried Kofi Owusu						2. Issuer Name and Ticker or Trading Symbol Vital Farms, Inc. [VITL]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Timoo-Gomilled Roll Ownsu														┩ :	X Direc	tor 10%		10% Ov	vner		
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/07/2023									Office below	icer (give title ow)		Other (s	specify		
C/O VITAL FARMS, INC.					/ If Δι	4. If Amendment, Date of Original Filed (Month/Day/Year)								6 1	6. Individual or Joint/Group Filing (Check Applicable						
3601 SOUTH CONGRESS AVENUE, SUITE					4. II Amendment, Date of Original Flied (Month/Day/Teal)									Line)							
C100	o i ii coi i	GRESS IIV EIVE	ъ, оо	112										X Form filed by One Reporting Person							
G100					1										Form filed by More than One Reporting						
(Street)															Person						
AUSTIN	I TX	7	8704		Duk	. 10)hE 1/	٠/ -	Trong		tion Ind	lioo	tion								
7105111	12	,	0704		Rule 10b5-1(c) Transaction Indication																
(City)	(St	ate) (Z	'ip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																
		Table	l - No	n-Deriva	tive S	ecur	ities A	cqu	uired,	Dis	posed of	f, or	Ben	eficia	lly Owr	ned					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				Execution Date,			·				es Acquired (A) Of (D) (Instr. 3, 4				icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(<i>A</i>	A) or D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 06/07/20						2023			A		6,086(1)		A \$0.00		00 23,127		I)			
		Tab		Derivativ												ed	,				
				(e.g., pu	ts, cal	ls, v	varrant	s, c	option	s, c	onvertib	le s	ecui	rities)							
1. Title of Derivative Security (Instr. 3)	tive Conversion Date ty or Exercise (Month/Day/Year) Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)		e Amount		ount of urities erlying vative urity	f [3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y Di or (I)). wnership orm: rect (D) Indirect (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A) (D)		Date Expiration Date Title		or Nur of	mber ares									

Explanation of Responses:

1. Represents a restricted stock unit ("RSU") award. The RSUs will vest on the earlier of (1) June 7, 2024 and (2) the day before the Issuer's next annual meeting of stockholders, subject to the Reporting Person's continuous service with the Issuer as of the applicable vesting date.

Remarks:

/s/ Jason Minio, Attorney-in-06/09/2023

Fact

** 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.