FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Name and Address of Reporting Person* Coon Stephanie						2. Issuer Name and Ticker or Trading Symbol Vital Farms, Inc. [VITL]									k all app Direc	tor	ng Pei	rson(s) to Is 10% Ov Other (s	vner		
(Last)	(Last) (First) (Middle) C/O VITAL FARMS, INC.							3. Date of Earliest Transaction (Month/Day/Year) 03/10/2023								Officer (give title below) SVP of People a		below)	` ´		
3601 SOUTH CONGRESS AVENUE, SUITE C100						4. If Amendment, Date of Original Filed (Month/Day/Year) 03/14/2023								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(Street)																Person					
AUSTIN	AUSTIN TX 78704				Rule 10b5-1(c) Transaction Indication																
(City)	$ _{\Box}$	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	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or E	Benefi	cially	/ Own	ed					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution		ution D	ate,				s Acquired (A) If (D) (Instr. 3, 4		4 and Sec Ben Owr		Amount of curities neficially ned Following ported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A) or (D) P		се	Transa	ction(s) 3 and 4)			(iiisti. 4)		
Common	2023				F ⁽¹⁾		1,892(2)	D \$		15.48	48 29,170 ⁽²⁾⁽³⁾			D							
Common Stock 03/13/2						2023			A		11,430(4)	A	\$	0.00	40),600 ⁽²⁾		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any			emed fion Date, Transac Code (III					6. Date Expirat (Month	tion Da		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Sei (In:	3. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	V (A) (D)		(D)	Date Exercisable		Expiration Date	Title	of								

Explanation of Responses:

- 1. Shares withheld by the Issuer to satisfy withholding tax obligation.
- 2. The number of shares withheld to satisfy the withholding tax obligation was inadvertently misreported. This amendment corrects the number of shares withheld and the number of shares beneficially owned following the reported transactions.
- 3. Includes 500 shares acquired under the Issuer's Employee Stock Purchase Plan on November 15, 2022.
- 4. Represents a restricted stock unit ("RSU") award. The RSUs vest in three equal annual installments commencing on March 13, 2024, subject to the Reporting Person's continuous service with the Issuer as of the applicable vesting date

Remarks:

/s/ Jason Minio, Attorney-in-

04/17/2023

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.