FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	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* Bienstock Lee				2. Issuer Name and Ticker or Trading Symbol DocGo Inc. [DCGO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last)	(Fi	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/16/2023								X	Officer (give titl below) Chief Exe			Other (s below) Officer	specify	
35 WEST 35TH STREET, FLOOR 6					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW Y	ORK N	Y 1	0001										X	Form	Form filed by One Reporting Person Form filed by More than One Reportin Person				
(City)	(Si	ate) (Z	Zip)		Rule 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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											ended to			
		Table	I - Noi	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	osed of	or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execut ay/Year) if any		Deemed ecution Date, ny nth/Day/Year)				ies Acquired (A Of (D) (Instr. 3,			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)		e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			10/16/2	2023				S ⁽¹⁾		1,667	D	\$	\$5.89 299,037 ⁽²⁾ D					
		Tal									osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, (Day/Year)	Date, Transa Code (I				6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of		nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- $1. \ Sale \ of \ shares \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ adopted \ by \ the \ Reporting \ Person \ on \ May \ 17, 2023.$
- 2. Reflects (i) 110,140 restricted stock units ("RSUs") granted pursuant to the Issuer's 2021 Stock Incentive Plan (the "Plan"), vesting in three equal installments on each of March 28, 2024, March 28, 2025 and March 28, 2026, and (ii) 121,951 RSUs granted pursuant to the Plan, vesting in four equal annual installments on each of the first four anniversaries of May 12, 2023, in each case subject to the terms of the Plan. Each RSU represents the right to receive, upon vesting, one share of Common Stock.

Remarks:

/s/ Ely Tendler, as Attorneyin-fact for Lee Bienstock

10/17/2023

Date

** Signature of Reporting Person

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.