FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB Number:	3235-0287								
	Estimated average	burden								
	hours ner resnonse	. 0.5								

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). S	ee Instruction	10.																
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol DocGo Inc. [DCGO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Smedra Smedra	<u>a Ira</u>			<u> </u>) IIIC	<u>. [DC</u>	do j						✓ Direct	tor		10% O	wner
(Last)	(F CGO INC.	irst) (I	Middle)		. Date of Earliest Transaction (Month/Day/Year) 2/13/2024						Office below	er (give title v)		Other (below)	specify			
35 WEST 35TH STREET, FLOOR 6			\perp															
Jos WEST STILLSTREET, LEOOK 0			_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)															filed by On	ie Rep	orting Pers	on
NEW YO	ORK N	Y 1	0001											Form Perso		re tha	n One Rep	orting
(City)	(S	tate) (Z	Zip)															
		Table	I - Non-Der	ivative	Sec	uritie	es Acc	uired	, Dis	posed of	, or E	Bene	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 8)				Benefic Owned	es Forn ially (D) o Following (I) (Ir		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A)) or)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 12/13.			13/2024	/2024		A		34,965(1) _	A	\$ <mark>0</mark>	90,999			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yes	Cod	Transaction Code (Instr. 8) of Deriva Securion Acquir (A) or Dispo of (D)		sposed (D) str. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Shar	nber					

Explanation of Responses:

1. Represents restricted stock units ("RSUs") granted pursuant to the Issuer's 2021 Stock Incentive Plan (the "Plan") that will vest on December 13, 2025, subject to the terms of the Plan. Each RSU represents the right to receive, upon vesting, one share of Common Stock, subject to the terms of the Plan.

Remarks:

/s/ Jerilyn Laskie, as Attorney-12/16/2024 in-Fact for Ira Smedra

** 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.