FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
vasilington,	D.C.	20343

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 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

Name and Address of Reporting Person*     Capone Anthony						2. Issuer Name and Ticker or Trading Symbol DocGo Inc. [ DCGO ]									ck all applic Directo	able) r	10% Owner		ner	
(Last)	(F CGO INC	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/12/2023									Officer below)	респу				
35 WEST 35TH STREET, FLOOR 6					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW Y	ORK N	ΙΥ	10007											X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State) (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.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution ay/Year) if any		Deemed ecution Date, ny onth/Day/Year)				ties Acquired (A) o I Of (D) (Instr. 3, 4 a				es Formally (D) (Following (I) (I		rm: Direct ( ) or Indirect ( (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3 a				(Instr. 4)	
Common Stock 05/12/					:/2023				A		2,272 <sup>(1)</sup> A		\$0.00	426,675			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 I if any (Month/Day	Date, T	I. Fransact Code (In		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		е	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	OI No of	umber		(Instr. 4)	on(s)			
Options to purchase Common Stock	\$8.61	05/12/2023			A		73,494 <sup>(2)</sup>		(3)		05/12/2033	Commo		3,494	\$0.00	73,49	4	D		

## **Explanation of Responses:**

- 1. These shares reflect fully vested shares of common stock of the Issuer granted in lieu of making Mr. Capone's 2023 base salary increase retroactive to January 1, 2023, net of shares withheld for taxes and
- 2. Represents stock options granted pursuant to the Issuer's 2021 Stock Incentive Plan (the "Plan"). Each option represents the right to acquire one share of Common Stock.
- 3. The shares subject to the stock options vest and become exercisable 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.

/s/ Andre Oberholzer, Attorney-05/16/2023 in-Fact for Anthony Capone

\*\* 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.