Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
|-------------|------------|
|-------------|------------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

| OMB APPROVAL             |      |  |  |  |  |  |  |  |  |  |
|--------------------------|------|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-        |      |  |  |  |  |  |  |  |  |  |
| Estimated average burden |      |  |  |  |  |  |  |  |  |  |
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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*     SEGRE LINDA B       |                                                                                                                                              |                  |         |                         |                                                             | 2. Issuer Name and Ticker or Trading Symbol  Mission Produce, Inc. [ AVO ] |        |                      |                                  |       |                    |                                                                                                  |                                                             |        | ck all app                                   | tor                                                                                                                | ng Pei | 10% O                                                                    | wner                                                               |
|---------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------|-------------------------|-------------------------------------------------------------|----------------------------------------------------------------------------|--------|----------------------|----------------------------------|-------|--------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------|----------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------|--------------------------------------------------------------------------|--------------------------------------------------------------------|
| (Last)                                                        | (Fir                                                                                                                                         | st) (NDUCE, INC. | Middle) |                         | 3. Date of Earliest Transaction (Month/Day/Year) 04/13/2021 |                                                                            |        |                      |                                  |       |                    |                                                                                                  |                                                             |        | Office<br>belov                              | er (give title<br>/)                                                                                               |        | Other (<br>below)                                                        | specify                                                            |
| 2710 CAMINO DEL SOL                                           |                                                                                                                                              |                  |         |                         | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |                                                                            |        |                      |                                  |       |                    |                                                                                                  | 6. Individual or Joint/Group Filing (Check Applicable Line) |        |                                              |                                                                                                                    |        |                                                                          |                                                                    |
| (Street)<br>OXNAR                                             | D CA                                                                                                                                         | Λ 9              | 3030    |                         |                                                             |                                                                            |        |                      |                                  |       |                    |                                                                                                  |                                                             | X      | Form                                         | filed by On<br>filed by Mo<br>on                                                                                   |        | •                                                                        |                                                                    |
| (City)                                                        | (Sta                                                                                                                                         | ate) (Z          | Zip)    |                         |                                                             |                                                                            |        |                      |                                  |       |                    |                                                                                                  |                                                             |        |                                              |                                                                                                                    |        |                                                                          |                                                                    |
|                                                               |                                                                                                                                              | Table            | I - Non | -Deriva                 | tive S                                                      | Secu                                                                       | rities | Acq                  | uired,                           | Dis   | posed of           | , or E                                                                                           | 3ene                                                        | ficial | y Own                                        | ed                                                                                                                 |        |                                                                          |                                                                    |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Date |                                                                                                                                              |                  |         | Executions/Year) if any |                                                             | Deemed<br>cution Date,<br>ny<br>nth/Day/Year)                              |        |                      |                                  |       |                    |                                                                                                  | , 4 and Secur<br>Benef                                      |        | cially<br>Following                          | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                                                  |        | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |                                                                    |
|                                                               |                                                                                                                                              |                  |         |                         |                                                             |                                                                            |        |                      | Code                             | v     | Amount             | (A)<br>(D)                                                                                       | or F                                                        | Price  | Transa                                       | action(s)<br>3 and 4)                                                                                              |        |                                                                          | (111341.4)                                                         |
| COMMON STOCK 04/13/2                                          |                                                                                                                                              |                  |         |                         | /2021                                                       |                                                                            | A      |                      | 5,028 <sup>(1)</sup> A           |       | A                  | \$ <mark>0</mark>                                                                                | 20,322                                                      |        |                                              | D                                                                                                                  |        |                                                                          |                                                                    |
|                                                               | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                  |         |                         |                                                             |                                                                            |        |                      |                                  |       |                    |                                                                                                  |                                                             |        |                                              |                                                                                                                    |        |                                                                          |                                                                    |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any                                                      |                  |         |                         | 4.<br>Transaction<br>Code (Instr.<br>8)                     |                                                                            | of     | r<br>osed<br>(. 3, 4 | 6. Date  <br>Expirati<br>(Month/ | on Da |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |                                                             | Str.   | Price of<br>erivative<br>ecurity<br>1str. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у      | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|                                                               |                                                                                                                                              |                  |         |                         | Code V                                                      |                                                                            | (A)    | (D)                  | Date<br>Exercisa                 | able  | Expiration<br>Date | Title                                                                                            | Amour<br>or<br>Number<br>of<br>Title Shares                 |        |                                              |                                                                                                                    |        |                                                                          |                                                                    |

## **Explanation of Responses:**

1. Represents restricted stock units (RSUs) granted pursuant to the Non-Employee Director Compensation Program. Each RSU represents a contingent right to receive one share of Common Stock. The RSUs vest in full on the earlier to occur of (i) the one-year anniversary of the applicable grant date and (ii) the date of the next Annual Meeting following the grant date, subject to the Reporting Person's continued service through the vesting date. The Reporting Person has elected to defer the distribution of these RSUs to the earliest to occur of: (1) April 14, 2023; (2) separation from service; (3) separation from service up on a change in control of Issuer; and (4) death, with the distribution to be made in one lump sum upon such occurrence.

## Remarks:

/s/ Jeremy B. Warren, 04/14/2021 Attorney-in-Fact for Linda B. <u>Segre</u>

\*\* 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.