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

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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

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1. Name and Address of Reporting Person* <u>Taylor Bruce C.</u>				2. Issuer Name and Ticker or Trading Symbol Mission Produce, Inc. [AVO]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
C/O MISSION PRODUCE, INC. 2710 CAMINO DEL SOL				09	3. Date of Earliest Transaction (Month/Day/Year) 09/21/2022							belov			bel	ner (sp ow)			
(Street) OXNAR	D CA	93030			4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(St	ate) (2	Zip)																
		Table	I - Non-Deriv	ative	Se	curitie	s Ac	quire	d, D	isposed of	f, or B	enefi	icially Own	ed					
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/\text{\text{Month/Day/\text{\text{Month/Day/\text{\text{Normal}}}}}				Execution Date		ate,	Code (Inst		5)			nd Securities Beneficial Owned Fo	Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	٧	Amount	(A) or (D)	Price	Transaction (Instr. 3 and						
Common Stock 09/21/20				.022	22			J		222,717	D	(1)	9,302	9,302,631		I		By Taylor Family Investments LLC ⁽²⁾	
Common Stock												430,3	91(3)	Ι)				
		Та	ble II - Deriva							posed of, , convertib				d	•	<u> </u>			
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/Year	4. Tran Cod	4. Transaction Code (Instr.		5. Number		ate Exe	ercisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5)			10. Owners Form: Direct (or Indii (I) (Inst	ship (D) rect	Beneficial Ownership ect (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amour or Number of Shares	er						
	nd Address of Bruce C.	Reporting Person*																	
		(First) DDUCE, INC. L SOL	(Middle)		_														
(Street)	D	CA	93030		_														
(City)		(State)	(Zip)	(Zip)															
		Reporting Person*																	
		(First) DDUCE, INC. L SOL	(Middle)																
(Street)	D	CA	93030		_														

Explanation of Responses:

(State)

(Zip)

(City)

^{1.} Represents the pro-rata distribution of shares held by Taylor Family Investments, LLC ("TFI") to its members in accordance with their respective interests in TFI, without any consideration (the "Distribution").

- 2. The shares are held by TFI, a 10% owner, and as to which Mr. Taylor has sole voting and dispositive power, but as to which he disclaims beneficial ownership, except to the extent of his pecuniary interest therein. TFI is not deemed to own the shares held by Mr. Taylor.
- 3. Includes shares acquired directly by Mr. Taylor in the Distribution, which shares he previously owned indirectly through TFI.

/s/ Joanne Wu, Attorney-in-

<u>Fact for Taylor Family</u> <u>09/22/2022</u>

Investments, LLC

/s/ Joanne Wu, Attorney-in-

Fact for Bruce C. Taylor

** 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.