FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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) Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

								(11) 01 1110			inparty Act									
Name and Address of Reporting Person* Muth Charles						2. Issuer Name and Ticker or Trading Symbol BEYOND MEAT, INC. [BYND]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
															Directo	r (give title		10% Ov Other (s	· ·	
(Last)	(First)	(Middle)		3. [Date of Earliest Transaction (Month/Day/Year)									below)			below)	Specify	
C/O BEYOND MEAT, INC.							09/08/2020								Chief Growth Officer					
,																				
119 STANDARD STREET 4. If Amendment, Date of Original Filed (Month/Day/Year)												6. In	6. Individual or Joint/Group Filing (Check Applicable							
(Street)					- ····			, Date	o. og		. (Line	Line)							
	UNDO (CA	90245													Form filed by One Reporting Person				
					-								Form f Persor		re than	One Repo	rting			
(City)	(State)	(Zip)												. 0.00.					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of S	Security (In:	str. 3)		2. Trans	saction	2A. Deemed Execution Date,				actio	4. Securi				5. Amou Securitie			Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership	
					/Day/Ye	ay/Year) if any		n/Day/Yea	Code	Code (Instr. 5)		ed Of (D) (Instr. 3, 4			Beneficia Owned F	ally ((D) or			
						(Month/Day		1/Day/ fea	r) 8)	_	-				Reported	· "	(i) (in	(Instr. 4)	(Instr. 4)	
									Code	v	Amount	(A)	or	Price	Transact (Instr. 3					
Common Stock 09				09/0	8/202	/2020			M		10,00	00 .	4	\$3	211,595			D		
Common Stock 09/08.				8/202	3/2020		S ⁽¹⁾		10,00	10,000 D		\$125	201,595			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				(e.g., p	outs,	call	S, Wa	arrants	, optic	ns,	converti	DIE SE	curit	ties)						
1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3)				Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		ecurity 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	Ownershi Form: ly Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
													A	mount r						
									Date		Expiration		Ni of	umber f						
					Code	v	(A)	(D)	Exercis	able	Date	Title		hares						
Stock Option (right to buy)	\$3	09/08/2020			M			10,000	(2)		02/14/2028	Commo		0,000	\$0	95,00	4	D		

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- 2. Exercise of stock option granted under the 2011 Equity Incentive Plan on February 15, 2018; the option vested and became exercisable as to 25% of the total shares on May 30, 2018, and 1/48th of the total shares vests and becomes exercisable monthly thereafter such that the option is fully vested and exercisable on May 30, 2021, subject to an Executive Change in Control Severance Agreement by and between the Reporting Person and the Issuer.

Remarks:

/s/ Teri L. Witteman, as

Attorney-In-fact for Charles

Muth

** Signature of Reporting Person Date

09/09/2020

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.