FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Sciarra Paul Cahill						2. Issuer Name and Ticker or Trading Symbol Joby Aviation, Inc. [JOBY]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First)	,	ddle)			3. Date of Earliest Transaction (Month/Day/Year) 01/05/2023								Officer (g below)	ive title	e Othe belo		(specify	
C/O JOBY AVIATION, INC. 2155 DELAWARE AVENUE, SUITE #225					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) SANTA CRUZ	CA	95	060											Form file	d by Mo	ore than C	one Report	ting Person	
(City)	(State)	(Zi _l	o)																
		Та	ble I - N	on-Dei	rivativ	e Se	curitie	s Ac	quired	l, Dis	posed of,	or Benef	ficially C	wned					
Date				Date	ate //onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Transaction(s (Instr. 3 and 4			(Instr. 4)	
Common Stock 01/0				01/05	5/2023						3,581(1)(2)	A	\$ <mark>0</mark>	39,215	5	D			
Common Stock														60,196,8	305	I	[]	By Sciarra Management Trust ⁽³⁾	
Common Stock													50,000		I		By Sciarra Foundation ⁽⁴⁾		
	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)	3. Transaction Date (Month/Day/Year)	Execution		4. Transact Code (In 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Securities U Derivative S (Instr. 3 and	Inderlying Security	8. Price of Derivative Security (Instr. 5)	derivat Securi Benefi Owned Follow Report	tive ties cially I ing ted	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
					Code	ode V		(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares	3	(Instr.	action(s) 4)			

Explanation of Responses

- 1. Represents Restricted Stock Units ("RSUs"). Each RSU represents a contingent right to receive one share of common stock of the Issuer.
- 2. The RSUs are fully vested on the grant date.
- 3. The shares of common stock are held of record by Sciarra Management Trust. The Reporting Person has voting and dispositive power of the shares held by Sciarra Management Trust therefore may be deemed to be the beneficial owner of such shares.
- 4. The shares of common stock are held of record by the Sciarra Foundation. The Reporting Person has voting and dispositive power of the shares held by the Sciarra Foundation therefore may be deemed to be the beneficial owner of such shares.

Remarks:

/s/ Kate DeHoff, Attorney-in-Fact for Paul Sciarra 01/09/2023

** Signature of Reporting Person

on 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.