FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

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

10b5-1(c). See Inst	ruction 10.						
Name and Address of Reporting Person* Sciarra Paul Cahill			2. Issuer Name and Ticker or Trading Symbol Joby Aviation, Inc. [JOBY]	(Check a	ionship of Reporting Person(sall applicable)	. ,	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/05/2025	X	Director Officer (give title below)	10% Owner Other (specify below)	
C/O JOBY AVIATION, INC. 333 ENCINAL STREET (Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individ	dual or Joint/Group Filing (Ch Form filed by One Reportin Form filed by More than Or	g Person	
SANTA CRUZ	CA	95060					
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/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)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
					Amount	(A) or (D)		Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	01/05/2025		A		1,509(1)(2)	A	\$0	106,327	D	
Common Stock								59,328,061	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)	2. Conversion or Exercise Price of Derivative Security	 3A. Deemed Execution Date, if any (Month/Day/Year)	Code (In	nsaction Derivative E		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 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

** Signature of Reporting Person

01/07/2025

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.