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

## 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

affirmative defense 10b5-1(c). See Inst								
1. Name and Address  DeHoff Kate	s of Reporting Person *		2. Issuer Name and Ticker or Trading Symbol  Joby Aviation, Inc. [ JOBY ]	Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) C/O JOBY AVIA	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/07/2025	X Officer (give title Other (specify below) See Remarks				
333 ENCINAL S			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) SANTA CRUZ	CA	95060		X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(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)	Beneficial Ownership
			Code	v	Amount	Amount (A) or Price		Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	04/07/2025		M		3,090	A	\$0	222,456	D	
Common Stock	04/08/2025		S <sup>(1)</sup>		1,122	D	\$5.79	221,334	D	

# 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of 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)		
Restricted Stock Units (RSUs)	\$0	04/07/2025		M			3,090	(2)	(2)	Common Stock	3,090	\$0	0	D	

### **Explanation of Responses:**

- 1. Represents the aggregate number of shares sold by the Reporting Person to cover taxes due upon the release and settlement of the RSUs, as required by the terms of the RSU award.
- 2. Represents an award of restricted stock units ("RSUs"). Between 0% and 125% of the award will vest in equal installments on each of on January 14, 2025, February 10, 2025, March 4, 2025 and April 7, 2025, based on the achievement of specified goals under the Joby Aviation, Inc. 2024 Performance Award Program and subject to the Reporting Person's continued service through the applicable vesting date. Each RSU represents the contingent right to receive one share of Common Stock upon vesting.

General Counsel and Corporate Secretary

/s/ Sarah Slayen, Attorney-in-Fact 04/09/2025 for Kate Dehoff

\*\* Signature of Reporting Person

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.