SEC I	Form 4
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

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

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issuer that is intend	e conditions of Rule	3							
1. Name and Address		٦ [*]	2. Issuer Name and Ticker or Trading Symbol Joby Aviation, Inc. [JOBY]		ionship of Reporting Perso all applicable) Director	on(s) to Issuer 10% Owner			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/05/2025		Officer (give title below)	Other (specify below)			
C/O JOBY AVIA 333 ENCINAL S	· · · · · · · · · · · · · · · · · · ·		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi X	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street) SANTA CRUZ	СА	95060			Form filed by More thar	o 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)	Transaction Code (Instr.		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
			Code	v	Amount	(A) or (D)	Price	 Transaction(s) (Instr. 3 and 4) 		(Instr. 4)
Common Stock	07/05/2025		А		1,341(1)(2)	Α	\$0	139,878	D	
Common Stock								57,828,060	Ι	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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		5. Num Derivat Securit Acquir or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		Securities Underlying Derivative Security		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D)	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 07/08/2025 for Paul Sciarra

** 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.