Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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 10b5-

1(c). Se	ee Instruction 1	0.															
1. Name and Address of Reporting Person* <u>Chakravarthy Arthi</u>				2. Issuer Name and Ticker or Trading Symbol Enovix Corp [ENVX]							neck all app Direc	ionship of Reporting Person(s) to Iss all applicable) Director 10% Ow					
	C/O ENOVIX CORPORATION 3501 W. WARREN AVENUE Street) FREMONT CA 94538					3. Date of Earliest Transaction (Month/Day/Year) 10/14/2024								Officer (give title Other (specify below) Chief Legal Officer			
(Street) FREMO						4. If Amendment, Date of Original Filed (Month/Day/Year)					Lin	Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(- 3)	(n-Deriva	tive S	ecur	ities Acq	uired.	Dis	posed of,	or Ber	neficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			tion 2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		d (A) or	5. Amo Securi Benefi Owned	ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price		ed ction(s) 3 and 4)		(Instr. 4)			
Common Stock 10/14/					2024		S		35,000(1)	D	\$13	(2) 343	3,305(3)	D			
		Та								osed of, o				d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any		Transaction Of Derivative Securities		5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of Securities Se		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially	Ownershi Form:	Beneficial Ownership				

Explanation of Responses:

Price of Derivative

Security

1. The sales reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on June 17, 2024.

Code

2. The price reported in Column 4 is a weighted-average price. The shares were sold in multiple transactions ranging from \$13.00 to \$13.01, inclusive. The Reporting Person undertakes to provide the Issuer, any security holder of the Issuer, or the Staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Exercisable

Acquired

Disposed of (D) (Instr. 3, 4

(D)

(A) or

and 5)

(A)

3. Includes 322,117 shares issuable upon the settlement of RSUs granted to the Reporting Person.

Remarks:

/s/ Arthi Chakravarthy ** Signature of Reporting Person

Security (Instr. 3 and 4)

Amount Number

Shares

Derivative

Title

Expiration

Date

10/15/2024 Date

Following

Reported Transaction(s) (Instr. 4)

Owned

or Indirect (I) (Instr. 4)

(Instr. 4)

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.