FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN DENEFICIAL OWNERSHIP	OMB Number:
	Estimated average

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

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per respons	e: 0.5								

Check this box to indicate that a
transaction was made pursuant to
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-
4(-) 0 1 + + 10

Instruction 1(b).

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol Enovix Corp [ENVX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Marath</u>	<u>е Ајау</u>				LIK) VIA	<u>C01</u>	2 [ISI	WA J						Direc			10% Ov	
	.=.				0.00	465		T		4 41-	/D 0/)			V	Office below	er (give title v)		Other (s below)	specify
(Last) (First) (Middle) C/O ENOVIX CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 01/14/2025								Chief Operating Officer						
3501 W. WARREN AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc	6. Individual or Joint/Group Filing (Check Applicable							
(Street)							,		Ü		`		,	Line)					
FREMO	NT CA	A 9	94538											V	_	filed by One filed by Mo		•	
															Perso		ic tilai	TOTIC TROPE	or unig
(City)	(St	ate) (2	Zip)																
		Table	l - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficial	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution y/Year) if any		ution [eemed ition Date, h/Day/Year)					es Acquired (A) Of (D) (Instr. 3, 4		Securi Benefi Owned	cially I Following	Form (D) or	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or I	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(111511.4)
Common	Stock			01/14/2	.025		F		7,509 ⁽¹⁾ D)	\$10.56	1,052,397(2)			D			
		Tal									osed of, onvertib				Owne	d		,	
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if an		if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow Fo Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

- 1. Reflects the withholding of shares of the Issuer's common stock to satisfy tax withholding obligations in connection with the vesting of restricted stock units ("RSUs") on January 14, 2025. Each RSU represents a contingent right to receive one share of the Issuer's common stock.
- 2. Includes 818,608 shares issuable upon the settlement of RSUs granted to the Reporting Person.

Remarks:

/s/ Arthi Chakravarthy,

01/15/2025 Attorney-in-Fact for Ajay

Marathe

** 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.