FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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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1. Name and Address of Reporting Person* <u>Talluri Rajendra K</u>						2. Issuer Name and Ticker or Trading Symbol Enovix Corp ENVX									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
														X	X Director			10% Ov	wner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/15/2023							X	Office belov	er (give title v)		Other (s	specify		
C/O ENOVIX CORPORATION						00/13/2023									President and CEO					
3501 W. WARREN AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X	X Form filed by One Reporting Person					
FREMONT CA 94538														Form filed by More than One Reporting Person						
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	ecui	ities	Acc	uired,	Dis	posed of	, or E	Bene	ficial	ly Owr	ned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Year) Execution		eemed ition Date, h/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 35)		, 4 and Secur Benef Owne Follov		cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or P	rice		ted action(s) 3 and 4)					
Common	Stock	023			A		8,712(1)	A	1	\$ <mark>0</mark>	2,018,712(2)			D						
Common Stock 06/15/20						023			F		3,013(3)	Г) {	\$13.63	2,01	15,699 ⁽²⁾		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)	Execu	eemed ution Date, h/Day/Year)	Date, Transac					6. Date Exercis Expiration Dat (Month/Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V ((A)	(D)	Date Exercisable		Expiration Date	Title	Amor or Numl of Share	ber						

Explanation of Responses:

- Reflects shares of the Issuer's common stock issued to the Reporting Person upon the receipt of a fully vested award of restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of Issuer's common stock.
- 2. Includes 2,000,000 shares issuable upon the settlement of RSUs granted to the Reporting Person.
- 3. Reflects the withholding of shares of the Issuer's common stock to satisfy tax withholding obligations in connection with the receipt of a fully vested award of RSUs on June 15, 2023.

Remarks:

/s/ Steffen Pietzke, Attorneyin-Fact for Rajendra K. 06/16/2023

Talluri

** 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.