FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
|---------------|------|-------|
|---------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-------|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response | : 0.5 | | | | | | | |

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

| 1. Name and Address of Reporting Person* Ford Alfred J Jr | | | | | Axonics, Inc. [AXNX] | | | | | | | | | | all applicable) Director | | | 10% O | wner | |
|---|---|---------|---|----------------------------|---|--|--|---|------|--|---|---------------|-----------------------------------|--|---|--|--|---|------------|--|
| (Last) | (Fii HNOLOGY | , | Middl | e) | 3. Date of Earliest Transaction (Month/Day/Year) 08/15/2023 | | | | | | | | | X | | | | below) | · · / | |
| | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) IRVINE | CA | A 9 | 261 | 8 | | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (Z | 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 - I | Non-Deriva | tive | Secui | rities A | cqı | uire | d, D | isposed o | f, or | Benefic | ially | Own | ed | | | | |
| Date | | | 2. Transaction Date (Month/Day/Ye | Execution | | tion Date, T | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | nd 5) Sec Ben Owi | | Amount of curities eneficially when Following | | n: Direct or rect (I) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Co | de | v | Amount | (A) or (D) | Price | rice Reported Transaction(s) (Instr. 3 and 4) | | | | tr. 4) | (Instr. 4) | |
| Common | Stock | | | 08/15/202 | 3 | | | S ⁽ | [1) | | 14,769 | D | \$62.338 | 31 ⁽²⁾ | 34,565 | | | D | | |
| | | Tal | ble | II - Derivati (e.g., pu | | | | | | | sposed of, , converti | | | | wne | t | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any | | | nsaction le (Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, and 5) | re es d | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | Amo Secu Undo Deriv Secu | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | ice of vative rity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. This sale was effected pursuant to the Reporting Person's Rule 10b5-1 trading plan entered into on March 17, 2023.
- 2. This transaction was executed in multiple trades at prices ranging from \$62.00 to \$62.68. The price reported above reflects the weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

(A) (D) Date

Exercisable

Expiration Date

Title

Remarks:

/s/ Dan Dearen, as Attorneyin-Fact for Alfred J. Ford, Jr.

Amount Number

Shares

08/17/2023

** 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).

Code

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.