## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 OF SECURITIES

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

(Print or Ty	pe Response	s)										•				
1. Name and Address of Reporting Person * Shealy Jeffrey B.				2. Issuer Name and Ticker or Trading Symbol Akoustis Technologies, Inc. [AKTS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X_Director  X_10% Owner					
9805 NORTHCROSS CENTER CT,, SUITE				3. Date of Earliest Transaction (Month/Day/Year) 06/27/2019							X Officer (give title below) Other (specify below)  Chief Executive Officer					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
HUNIEI (City	•	NC 28078	(Zip)													
` •		(State)	T			1			1			<del></del>	osed of, or I			
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)			(Instr. 8)		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Reported Transaction(s)		ollowing	Form:	7. Nature of Indirect Beneficial	
				(Month	n/Day/Year		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock		06/27/2019			S	(1)		7,500	D	\$ 5.85 (2)	3,211,0	211,062		D		
Common Stock											13,952	13,952		I	By Wife	
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Keilinder.	Report on a s	separate fille fo	of each class of secui	illes bei	пенскану о	wiieu		Pers	ons wh	o resp	orm aı	re not requ	ction of inf uired to res OMB cont	spond unle	ess	1474 (9-02)
					tive Securit							ally Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Year) Execution Da	tte, if Transaction Code Year) (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. An Un Sec	Title and nount of derlying curities str. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form o Derivat Security Direct ( or Indir	Benefici Ownersh (Instr. 4)	
					Code V	(A)	(D)	Date Exe		Expirati Date	ion Tit	Amount or Number of Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Shealy Jeffrey B. 9805 NORTHCROSS CENTER CT, SUITE A HUNTERSVILLE, NC 28078	X	X	Chief Executive Officer					

#### **Signatures**

/-/ I-CC D Ch I- b A d Whit- 14 44 in C4	06/29/2010
/s/ Jeffrey B. Shealy by Andrew Wright, attorney-in-fact	06/28/2019
**Signature of Reporting Person	Date

#### **Explanation of Responses:**

- \* 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).
- (1) These transactions were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 20, 2019.
  - The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$5.73 to \$6.05, inclusive. The reporting
- (2) person undertakes to provide to 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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.