FORM 3

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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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 Type Responses)								
1. Name and Address of Reporting Person * Boomgarden Mark	Statement (Month/Day/Y	•		3. Issuer Name and Ticker or Trading Symbol Akoustis Technologies, Inc. [AKTS]				
(Last) (First) (Middle) 9805 NORTHCROSS CENTER CT, SUITE H	-03/10/2017 -		Person(s) to (Chec	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) HUNTERSVILLE, NC 28078			X Officer (X Officer (give Other (specify		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person		
(City) (State) (Zip)	,	Table l	I - Non-Derivat	tive Securiti	es Ben	eficially	Owned	
1.Title of Security (Instr. 4)	2. Amount of S Beneficially O (Instr. 4)		•	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Owner	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock, par value \$0.001	per share	245,44	1	D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. T Sec Der	Title and Amount of urities Underlying ivative Security str. 4)	of 4.	5. Ownerse Form	nership m of ivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Da Ex	e Expirat Percisable Date	tion Titl	Amount or Nun of Shares	Derivativ Security	Dire or I (I)	urity: ect (D) ndirect etr. 5)		
Reporting Owners								

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Boomgarden Mark 9805 NORTHCROSS CENTER CT SUITE H HUNTERSVILLE, NC 28078			Vice President of Operations		

Signatures

/s/ Mark Boomgarden	03/10/2017
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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.