## FORM 4

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

OMB APPROVAL
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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

	pe Response		*							5 D 1 d	1: 00	.: D	( ) . T	
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 A				3. Date of Earliest Transaction (Month/Day/Year) 03/25/2020						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)  Form filed by One Reporting Person Form filed by More than One Reporting Person				
HUNTERSVILLE, NC 28078 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			(Instr. 8)				of (D)	Reported Transaction(s)			6. Ownership Form:	Beneficial		
				(Month/Day/Year)	Code	e V	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)			Ownership (Instr. 4)
Common Stock		03/25/2020		S(1)	!	25,000	D	\$ 4.64 (2)	3,153,562			D		
Common Stock		03/26/2020		S(1)	!	7,500	D	\$ 4.74 (3)	3,146,062		D			
Reminder:	Report on a s	separate line fo	or each class of secur	,		Per con the	sons wh tained ir form dis	o respo this fo plays a	orm are	not requesting ntly valid	OMB con	ormation spond unle trol numbe	ss	1474 (9-02
				Derivative Securi e.g., puts, calls, v						lly Owned				
Security	2. Conversion or Exercise Price of Derivative Security		Execution Day (Year) any	te, if Transaction Code (Instr. 8)	Number and		Date Exercisable Expiration Date onth/Day/Year)		Am Und Sec		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Benefici Ownersh (Instr. 4)
				Code V	(A) (I		-	Expirati Date	on Title	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**

/s/Jeffrey B. Shealy by Andrew Wright, attorney-in-fact

03/27/2020

**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 December 19, 2019, as amended.
- The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$4.47 to \$4.80, 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.
- The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$4.46 to \$5.04, inclusive. The reporting
- (3) 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.