FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasilington,	D.O.	20070

	Washington,	D.C. 20549	
STATEMENT	OF CHANGES I	N BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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).

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

1. Name and Address of Reporting Person* <u>COHEN RAYMOND W</u>					2. Issuer Name and Ticker or Trading Symbol Axonics, Inc. [AXNX]										all app	ionship of Reportin all applicable) Director Officer (give title below) Chief Execu		rson(s) to Is		
(Last) (First) (Middle) 26 TECHNOLOGY DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 01/13/2023								X	belov			Other (below)	specify	
(Street) IRVINE	CA		261	8	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Indiv ne) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				on		
(City)	(St		Zip)																	
		Table	<u> - </u>	Non-Deriva	tive	Secu	rities	Ac	quir	ed, D	isposed	of,	, or I	Benefici	ally	Own	ed			
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date if any (Month/Day/Ye		ate, Tran		action (Instr.			Acquired (A) or D) (Instr. 3, 4 ar		Securit Benefic Owned Reporte Transac		5. Amount of Securities Beneficially Owned Following		wnership m: Direct or rect (I) tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								[Code V		Amount						action(s) 3 and 4)	(11151	u. 4)	(111341. 4)
Common Stock 01/13			01/13/202	3			S		18,684		D	\$65.540)9 ⁽¹⁾	130,951			D			
Common	ommon Stock 01/13/202			01/13/202	3			S		22,052		D	\$66.2722 ⁽²⁾		2(2) 108,899			D		
		Tal	ble	II - Derivati (e.g., ρι												Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if a	Deemed scution Date, ny nnth/Day/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instrand 5	rative rities ired r osed) : 3, 4	Expirat (Month es d		Exercisable and on Date Day/Year)		Amo Secu Unde Deriv	le and unt of rities rlying rative rity (Instr. i 4)	Deri Sec	vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$65.00 to \$65.99. 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
- 2. This transaction was executed in multiple trades at prices ranging from \$66.00 to \$66.73. 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.

Remarks:

/s/ Dan Dearen, as Attorneyin-Fact for Raymond W.

01/18/2023

Cohen

** 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.