FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

	Check this box if no longer subject
\neg	to Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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		, .				iipaiiy Act c		-	_						
Name and Address of Reporting Person* Malchow Joseph Ian						2. Issuer Name and Ticker or Trading Symbol Enphase Energy, Inc. [ENPH]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
iviaiciic	viv oosep.	<u> </u>			- 55							-	Direc	tor		10% Ov	vner			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/17/2023									Office below	er (give title v)		Other (s	specify	
C/O ENPHASE ENERGY						4. If Amendment, Date of Original Filed (Month/Day/Year)								6 Inc	6. Individual or Joint/Group Filing (Check Applicable					
47281 BAYSIDE PARKWAY					4. II Americani, Date of Original Fried (Month/Day/Tear)								Line)							
									X	X Form filed by One Reporting Person										
(Street) FREMONT CA 94538														Form filed by More than One Reporting Person						
l				Rule	Rule 10b5-1(c) Transaction Indication															
(City)	(S	tate) (7	7in)		' '	Tuic 1000-1(c) Halisaction mulcation														
(City) (State) (Zip)					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 - No	n-Deriva	tive S	ecui	rities	Acq	uired,	Dis	oosed of	f, or l	Bene	eficial	ly Owr	ned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				Execu y/Year) if any		Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securiti Disposed and 5)						5. Amo Securi Benefi Owned Follow	ties cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A)) or)	Price		rted action(s) 3 and 4)				
Common Stock 05/17/2					2023				A		1,526	A	(1)	\$0	5	56,616		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				(e.g., pu	ts, cai	IS, V	varra	ants,	option	s, c	onvertib	le se	ecuri	ties)						
1. Title of Derivative Security (Instr. 3)	titve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)				6. Date Exercisabl Expiration Date (Month/Day/Year)		te	Amount of		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)			
					Code V		(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

1. Restricted stock units ("RSUs") issued pursuant to the 2021 Equity Incentive Plan (the "2021 Plan"). RSUs vest in four equal quarterly installments from the grant date, such that the total RSUs are fully vested on the earlier of (i) the one-year anniversary of the date of grant or (ii) the date of the Issuer's next annual meeting of stockholders, subject to the Reporting Person's Continuous Service (as defined in the 2021 Plan) through each applicable vesting date.

Remarks:

/s/ Lisan Hung by power of attorney

** Signature of Reporting Person

05/19/2023

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.