FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|---------------|------------------|

| OMB APPROVAL | | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average b | urden | | | | | | | | | |
| 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* RAKIN KEVIN | | | | | 2. Issuer Name and Ticker or Trading Symbol Quantum-Si Inc [QSI] | | | | | | | (Che | elationship ceck all applic | , | | on(s) to Issu 10% Ow | | |
|--|---|------------|-------------|---|--|---|--|---------------------|--|---|----------------------|---|--|----------------------------|--|--|---------------------|--------|
| (Last) | ` | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2023 | | | | | | | | Officer below) | (give title | | Other (sp below) | pecify |
| C/O QUANTUM-SI INCORPORATED 530 OLD WHITFIELD STREET | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| (Street) | RD C | Γ | 06437 | | | | | | | | | | | | led by More | | One Report | |
| (City) | (S | tate) | (Zip) | | $ $ _ | Rule 10b5-1(c) Transaction Indication 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. | | | | | | | to | | | | | |
| | | Tak | ole I - Non | ı-Deriv | vative | Se | curities | s Ac | quired, D | isposed | l of, c | or Be | neficiall | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | Execution Date, | | Transaction Dispose Code (Instr. 5) | | curities osed Of | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | Beneficia Owned F | s ally ollowing | Form | Direct of Endirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | V Amo | ınt | (A) ((D) | Price | Transact (Instr. 3 a | ion(s) | | | Instr. 4) | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | tive Conversion Date Execution Date, 1 ty or Exercise (Month/Day/Year) if any | | | 5. Number of Derivative Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5) | | e s (A) sed str. | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | of S Und Der | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiratio Date | n Titl | e | Amount or Number of Shares | er (Instr. 4) | | ,,,(3) | | |
| Stock Option (right to buy) | \$1.41 | 05/12/2023 | | | A | | 120,481 | | (1) | 05/12/203 | 3 Cor | ass A mmon tock | 120,481 | \$0 | 120,48 | 1 | D | |

Explanation of Responses:

1. The shares underlying this option vest on the date of the Issuer's next regular annual stockholders meeting, subject to Mr. Rakin's continued service through the applicable vesting date.

/s/ Christian LaPointe, Ph.D., 05/16/2023 Attorney-in-Fact

** 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.