FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

| OMB APPRO | OVAL |
|-----------------------|-----------|
| OMB Number: | 3235-0287 |
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| 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>DEKKERS MARIJN E</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Quantum-Si Inc [QSI] | | | | | | | | porting Person(s) to Is:) 10% Ov | | |
|--|---|--|---|---|--|---|--|----------------------------|--|--|----------------------------|--|---|---|------------|
| (Last) | (Fi | rst) (I I INCORPORAT | Middle) | 3. Date of 06/10/20 | onth/Day/Year) | | Officer (give title below) Other (specification) below) | | | | | | | | |
| 530 OLI |) WHITFIE | 4. If Amen | Filed (Month/Da | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | | | | |
| (Street) GUILFO | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | |
| | | Table | I - Non-Deriva | ative Secu | ırities A | cquir | ed, [| Disposed o | f, or B | enefici | ally Own | ed | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Ye | Executi ear) if any | 2A. Deemed Execution Date, if any (Month/Day/Year) | | action (Instr. | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5) | | | | | | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | v | Amount | (A) or (D) | Price | Transactio (Instr. 3 an | | | | (111501.4) |
| Class A Common Stock | | 06/10/202 | 1 | | | | 500,000(1) | A | \$10 | 500,0 | 000 | I | L In | y Novalis ifesciences ivestments LP ⁽²⁾ | |
| Class A Common Stock | | 06/10/202 | 1 | | A | | 150,000 ⁽³⁾ | A | (4) | 150,0 | 000 | D | | | |
| Class A Common Stock 06/11/2021 | | | | 1 | | A | | 20,512 ⁽⁵⁾ | A | \$0.00 | 170,5 | 512 | D | | |
| | | Tal | ble II - Derivat (e.g., pı | | | | | sposed of, s, convertil | | | | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | Ex | er 6. Date Exercisable and Expiration Date Ammore (Month/Day/Year) Secund | | | e and nt of ities lying ative ity (Instr. | 8. Price of Derivative Security (Instr. 5) Benefic Owned | | tive Ownersh ties Form: cially Direct (D or Indirec | | Beneficial Ownership ct (Instr. 4) | |

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) of Dispo of (D) | 5. Number of Expericable Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ate | 7. Titl Amou Secur Under Derive Secur 3 and | int of ities rlying ative ity (Instr. | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|--|---------------------|--------------------|---|---|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

- I. In connection with the closing of the transactions contemplated by the Business Combination Agreement, dated as of February 18, 2021, by and among HighCape Capital Acquisition Corp. ("HighCape"), Tenet Merger Sub, Inc., a Delaware corporation and wholly owned subsidiary of HighCape ("Merger Sub"), and Quantum-Si Incorporated, a Delaware corporation ("Quantum-Si"), pursuant to which Merger Sub merged with and into Quantum-Si (the "Merger"), with Quantum-Si surviving as a wholly-owned subsidiary of HighCape (which changed its name to "Quantum-Si Incorporated", the "Issuer"), Novalis Lifesciences Investments I, LP ("Novalis") purchased 500,000 shares of Class A common stock from the Issuer, at a price of \$10.00 per share, in a private placement immediately prior to the closing of the Merger.
- 2. Dr. Dekkers has sole voting and investment control over the shares held by Novalis.
- 3. Consists of restricted stock units ("RSUs"). Each RSU represents the right to receive one share of common stock upon vesting. The RSUs vest in 12 equal quarterly installments beginning on June 30, 2021, which vesting will be delayed to the extent the Issuer has not filed a Form S-8 registering such shares by the applicable vesting date, subject to Dr. Dekkers's continued service through the applicable vesting date.
- 4. Received in connection with the Merger in exchange for 188,089 RSUs of Qunatum-Si.
- 5. Consists of RSUs. Each RSU represents the right to receive one share of common stock upon vesting. The RSUs vest in equal annual installments over three years beginning on June 11, 2022, subject to Dr. Dekkers's continued service through the applicable vesting date.

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

06/14/2021

** 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.