FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

|             |      |       | _ | _ |
|-------------|------|-------|---|---|
| /ashington. | D.C. | 20549 |   |   |

| -  | OMB AP      |
|--|-------------|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: |
| 0.7.1.2.11.2.1.1.0.1.0.1.1.0.1.1.2.1.1.1.1.  |             |

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

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

| 1. Name and Address of Reporting Person*  KOENIG THEODORE L |  |  |   | 2. Issuer Name and Ticker or Trading Symbol MCAP Acquisition Corp [ MACQ ] |   |  |       |  |                   |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |   |  |                             |  |                                       |                                |
|---|--|--|---|--|---|--|-------|--|-------------------|--|---|---|---|--|-----------------------------|--|---------------------------------------|--------------------------------|
| ICOLIV  | IO TITLO   | DOKE E                                     |   |  |   | _  |       |  | _                 |  |   |   | X   | Director   |                             | X  | 10% Ov                                | ner                            |
| (Last)  | (F   | First)                                     | (Middle)  | _  | 2 Doto  | of Farliagt  | Trana | action (Ma   | nth/D             | 01//005  |   |   | _ x   | Officer (g<br>below)   | give title                  |  | Other (s<br>below)                    | pecify                         |
| C/O MCAP ACQUISITION CORPORATION                            |  |  |   |  | 3. Date of Earliest Transaction (Month/Day/Year) 03/02/2021 |  |       |  |                   | Chief Executive Officer  |   |   |   |  |                             |  |                                       |                                |
| 311 SOUTH WACKER DRIVE, SUITE 6400                          |  |  |   |  |   |  |       |  |                   |  |   |   |   |  |                             |  |                                       |                                |
| (Street)  |  |  |   | — <u> </u>   | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |  |       |  |                   |  | 6. Individual or Joint/Group Filing (Check Applicable Line)             |   |   |  |                             |  |                                       |                                |
| CHICAC  | GO II  |  | 60606   |  |   |  |       |  |                   |  |   |   | X   | Form file  | ed by One                   | Repor  | ting Person                           |                                |
| ,   |  |  |   |  | Form filed by More than One Reporting Person                |  |       |  |                   |  |   | ng Person   |   |  |                             |  |                                       |                                |
| (City)  | (5   | State)                                     | (Zip)   |  |   |  |       |  |                   |  |   |   |   |  |                             |  |                                       |                                |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |   |  |   |  |       |  |                   |  |   |   |   |  |                             |  |                                       |                                |
| 1. Title of Security (Instr. 3)  2. TransDate (Month/I      |  |  | te  | action 2A. Deemed Execution Date, if any (Month/Day/Year)                  |   | Code (Instr.   |       |  |                   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported      |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature of Indirect Beneficial Ownership   |                             |  |                                       |                                |
|   |  |  |   |  |   |  | Code  | v  | Amount (A) or (D) |  | Price   | Transactio  | ransaction(s)<br>nstr. 3 and 4)                     |  |                             | Instr. 4)  |                                       |                                |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned    |  |   |  |   |  |       |  |                   |  |   |   |   |  |                             |  |                                       |                                |
|   |  |  | (e.   | g., pu   | ts, ca  | lls, warr  | ants  | s, optio   | ıs, c             | onverti  | ble sec   | uritie  | es)   |  |                             |  |                                       |                                |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)         | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security            | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code (Instr.<br>8)                                    |   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D) (Instr. 3, 4<br>and 5) |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                   | 7. Title and Amou<br>Securities Under<br>Derivative Securi<br>(Instr. 3 and 4) |   | rlying  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction | re<br>es<br>ally<br>ig<br>d | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |                                |
|   |  |  |   | Code   | v   | (A)  | (D)   | Date<br>Exercisal  |                   | xpiration<br>ate   | Title   |   | unt or<br>ber of<br>es                              |  | (Instr. 4)                  |  |                                       |                                |
| Warrants  | \$11.5   | 03/02/2021                                 |   | A  |   | 5,983,333  |       | (1)  |                   | (1)  | Class A<br>Common<br>Stock  | 5,98  | 33,333  | \$1.5  | 5,983,                      | .333   | I                                     | See<br>footnote <sup>(2)</sup> |

## **Explanation of Responses:**

- 1. Each warrant will become exercisable on the later of 12 months from the closing of the Issuer's initial public offering and 30 days after the completion of the Issuer's initial business combination. Each warrant will expire five years after the completion of the Issuer's initial business combination or earlier upon redemption or liquidation.
- 2. The securities are held directly by MCAP Acquisition, LLC, the sponsor of the Issuer (the "Sponsor"). The manager of the Sponsor is Monroe Capital Management Advisors, LLC ("MCMA"). Theodore L. Koenig, the Issuer's Chief Executive Officer, may be deemed to beneficially own shares held by the Sponsor by virtue of his control over MCMA. Mr. Koenig disclaims beneficial ownership of the Issuer's securities held by the Sponsor other than to the extent of his pecuniary interest in such securities.

/s/ Theodore L. Koenig, by Nelson Mullins Riley & Scarborough LLP with Power of

03/03/2021

<u>Attorney</u>

\*\* 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.