SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** SECURITIES

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

	Address of Repo	0	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 01/07/2021 3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Mountain Crest Acquisition Corp II</u> [ MCADU ]							
(Last) 311 WEST ( FLOOR (Street) NEW YORK (City)	(First) 43RD STRE NY (State)	(Middle) ET, 12TH 10036 (Zip)			4. Relationship of Reporting Issuer (Check all applicable) Director Officer (give title below)	X 10% (	) Owner (specify	File 6. I	d (Month/Day ndividual or Jo leck Applicable Form filed Person	int/Group Filing Line) by One Reporting by More than One	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)	Form: (D) or I			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock					1,431,500		D				
Table II - Derivative Securities Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)											
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of S Underlying Derivative S (Instr. 4)				5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr.	
			Date Exercisable	Expiratior Date	Title	Amount or Number of Shares		ive	or Indirect (I) (Instr. 5)	5)	

**Explanation of Responses:** 

## By: /s/ Suying Liu Name: Suying Liu Title: Member

01/07/2021

\*\* 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 5 (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.