FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

<i>N</i> ashington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

to Section 16. obligations ma	Form 4 or Form 5 y continue. See	0.71			0117111020					ll l	stimated average ours per response	ll.		
Instruction 1(b)).				t to Section 16(a) of tion 30(h) of the Inv)34	<u>L</u>			
Name and Address of Reporting Person* Webster Craig				2. Issuer Name and Ticker or Trading Symbol Microvast Holdings, Inc. [MVST]							ationship of Rep k all applicable) Director	oorting Person(s)	to Issuer % Owner	
(Last) 12603 SOUTH	(First) IWEST FREEV	(Middle)		3. Date 07/30	e of Earliest Transa /2021	ction (M	fonth/	Day/Year)		Officer (give t below)		ner (specify ow)		
SUITE 210					nendment, Date of	Origina	l Filed	(Month/Day/	6. Indi	6. Individual or Joint/Group Filing (Check Applicable				
(Street) STAFFORD	TX	77477								X	,	One Reporting More than One		
(City)	(State)	(Zip)												
	ı	Table I - Noi	n-Derivati	ive S	ecurities Acqu	uired,	Disp	osed of,	or Ben	eficially	/ Owned			
Date			2. Transacti Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Followi	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect ct Beneficial Ownership	
					Code	v	Amount	nt (A) or (D)		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Class A Common Stock 07/30			07/30/20	021		A		9,756	A	\$0	9,756	D		
		Table II	Dorivativ	0 500	ourities Asqui	rod D	icno	scod of o	Popo	ficially	Owned			

	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)	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)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D (Instrand 5	vative prities priced r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/\)	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) (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:

/s/ Sarah Alexander, Attorney-08/03/2021 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.