FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Wash

nington,	DC	20549	
migion,	D.C.	20349	

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burde	n								
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

							J					. 10 .0									
Name and Address of Reporting Person* Rawlinson Peter Dore						2. Issuer Name and Ticker or Trading Symbol Lucid Group, Inc. [LCID]								Relationship of Reporting Person(s) to Issuer (Check all applicable) V Director 10% Owner							
					_									X	Director			10% Owner			
(Last)	(F	First)	(Middle)		3.	Date of Earliest Transaction (Month/Day/Year)								X	Officer (below)	give title		Other (s below)	респу		
` '	O LUCID GROUP, INC.					12/14/2021								CEO & Chief Technology Officer							
		OULEVARD																			
,					_ 4	. If Am	endm	ent. Date of	Original	Filed	(Month/Dav	/Year)	- 6	6. Indiv	idual or Jo	int/Group	Filina (Check Appl	icable		
(Street)					"	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
NEWARK CA 94560															X Form filed by One Reporting Person Form filed by More than One Reporting						
					-										Form file Person	ed by More	e than	One Reporti	ng		
(City)	(9	State)	(Zip)																		
		Ta	able I - No	n-Der	ivati	ive S	ecui	rities Acc	uired	, Dis	posed of	, or Be	neficia	ally (Owned						
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				ies Acquired (A) or Of (D) (Instr. 3, 4 and !			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount (A) or (D)		r Pric	Reported Transaction (Instr. 3 and				[Instr. 4)			
Class A Common Stock				12/1	12/14/2021				M		261,756	(1) A	\$0).18	30,013,289		D				
Class A Common Stock				12/1	2/14/2021				М		125,000	(1) A	\$0).37	30,138,289		D				
Class A Common Stock				12/1	15/2021				М		21,000(1) A	\$0).37	30,159,289			D			
			Table II -					ties Acqu							wned			•			
	1				put	s, ca	_	varrants,		_											
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D if any (Month/Day/	ate, 1	Code (6. Date Exerci Expiration Dat (Month/Day/Ye		te of Securities		ities ing /e Securi		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti	re es ally eg d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Γ									Amou	nt		(Instr. 4)	1011(5)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Numb of Sha								
Stock Options (Right to Buy)	\$0.18	12/14/2021			M			261,756 ⁽¹⁾	07/23/2	2021	05/02/2023	Class A common stock	261,7	756	\$0	0		D			
Stock Options (Right to Buy)	\$0.37	12/14/2021			M			125,000 ⁽¹⁾	07/23/2	2021	04/16/2025	Class A common stock	125,0	000	\$0	4,270,4	416	D			
Stock Options (Right to	\$0.37	12/15/2021			M			21,000 ⁽¹⁾	07/23/2	2021	04/16/2025	Class A	21,0	00	\$0	4,249,4	416	D			

Explanation of Responses:

1. Represents the reporting person's cash exercise of a stock option.

/s/ Jonathan Butler, as attorney-12/16/2021 in-fact for Peter Rawlinson

** 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.