FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|---------------|--|--|--|--|--|--|
| OMB Number: | 3235- 0104 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

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* Ponzellini Massimo 2. Date of Ever Requiring Sta (Month/Day/Y) 12/19/2022 | | | | statement /Year) | 3. Issuer Name and Ticker or Trading Symbol micromobility.com Inc. [MCOM] | | | | | | |
|---|---------------------------------|-----------------------------------|---|---------------------|--|--------|--|---|------------|--|----|
| (Last) C/O MICRO 32 OLD SL (Street) NEW YORK (City) | (First) OMOBILITY IP NY (State) | (Middle) Z.COM INC. 10005 (Zip) | | | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title below) Other (specify below) | | wner (specify | 5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | ount of Securities cially Owned (Instr. | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Common Stock | | | | | | 59,524 | D | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | |
| Expirat | | Expiration Da | Date Exercisable and piration Date onth/Day/Year) | | 3. Title and Amount of Secur Underlying Derivative Secur (Instr. 4) | | curity Convers | | cise Form: | 6. Nature of Indirect Beneficial Ownership (Instr. | |
| | | | Date Exercisable | Expiration Date | Title | 3 | Amount or Number of Shares | Price of Derivative Security | | Direct (D) or Indirect (I) (Instr. 5) | 5) |

Explanation of Responses:

/s/ Massimo Ponzellini

05/04/2023

** 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.