FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
Washington, D.C. 20049	

this box if no longer subject to	STA
16. Form 4 or Form 5	
ons may continue. See	

TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check Section obligation Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

.(-)	ee mstruction				,														
Name and Address of Reporting Person* Borgeson Blake						2. Issuer Name and Ticker or Trading Symbol RECURSION PHARMACEUTICALS, INC. [RXRX]									tionship all app Direc	licable)	ng Pe	rson(s) to Is	
(Last) (First) (Middle)														Office belov	er (give title v)		Other (s below)	specify	
C/O RECURSION PHARMACEUTICALS 41 S. RIO GRANDE STREET					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024														
(Street) SALT LA	SALT LAKE UT 84101					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	tate) (2	Zip)																
		Table	I - No	on-Deriva	tive S	Secui	rities	Ac	quire	d, Di	sposed of	, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo					ear) Execution				3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (nd 5) Securi Benefi Owned		cially I Following	Forn (D) c	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Class A Common Stock 10/01/202)24				S ⁽¹⁾		11,447	D	\$6.215	£156 ⁽²⁾		7,098,428		D	
	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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ition Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		Der Sec	vative curity Str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O Fo O (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. This transaction is pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on August 18, 2023.
- 2. This transaction was executed in multiple trades at prices ranging from \$6.09 to \$6.56. The price reported above reflects the weighted average sale price. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate sale price.

Remarks:

/s/Jonathan Golightly, attorney-in-fact

10/03/2024

** 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.