Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Washington,	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.							

					or Sec	cuon 3	0(11) 01 11	ne in	ivesime	III COI	npany Act o	1 1940							
Name and Address of Reporting Person* Dar Zavain					2. Issuer Name and Ticker or Trading Symbol RECURSION PHARMACEUTICALS,							,.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle)					INC. [RXRX] 3. Date of Earliest Transaction (Month/Day/Year) 10/02/2023									Officer (give title below)		Other (s below)		specify	
C/O RECURSION PHARMACEUTICALS 41 S. RIO GRANDE STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	,							
(Street) SALT LAKE CITY UT 84101											X	Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	tate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	ecur	ities A	cq	uired,	Dis	posed of	, or B	Benefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)				Execution I		ution Dat		3. Transa Code (8)			es Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	5. Amount of Securities Beneficially Dwned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)		ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A Common Stock 10/02/2					2023		A		1,920(1)	A	\$	0.00	73,964			D			
		Tal									osed of, o				Owne	d			
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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Dei Sec (Ins	ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)
						Date		Expiration		or Number									

(D)

Explanation of Responses:

1. The shares were issued pursuant to the Issuer's Outside Director Compensation Policy

Remarks:

/s/Jonathan Golightly, attorney-in-fact

10/04/2023

** 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 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.