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

Washington, D	D.C. 20549
---------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL		
OMB Number:	3235-0287	
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 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer 1. Name and Address of Reporting Person (Check all applicable) RECURSION PHARMACEUTICALS, **Borgeson Blake** X Director 10% Owner INC. [RXRX] Officer (give title Other (specify (Middle) 3. Date of Earliest Transaction (Month/Day/Year) below) below) (Last) (First) 04/30/2024 C/O RECURSION PHARMACEUTICALS 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable 41 S. RIO GRANDE STREET Line) Form filed by One Reporting Person (Street) Form filed by More than One Reporting SALT LAKE Person UT 84101 CITY Rule 10b5-1(c) Transaction Indication (City) (State) (Zip) 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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 1. Title of Security (Instr. 3) 2. Transaction Date 2A. Deemed Execution Date. 5. Amount of Securities 6. Ownership 7. Nature Transaction Form: Direct of Indirect (Month/Day/Year if any (Month/Day/Year) Beneficially Owned Following (D) or Indirect Beneficial Code (Instr. 8) (I) (Instr. 4) Ownership Reported Transaction(s) (Instr. 4) (A) or (D) Code Price Amount (Instr. 3 and 4) 04/30/2024 $S^{(1)}$ Class A Common Stock 11,447 D \$7.9465(2) 7,218,414 D Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 6. Date Exercisable and 7. Title and 9. Number of 11. Nature 1. Title of 3. Transaction 3A. Deemed 5. Number 8. Price of 10 Expiration Date (Month/Day/Year) Derivative Derivative Conversion **Execution Date** Transaction Amount of derivative Ownership of Indirect Security (Instr. 3) or Exercise Price of (Month/Day/Year) Derivative Securities Form: Direct (D) Code (Instr. Security Securities Beneficial if any (Month/Day/Year) Beneficially 8) Securities Underlying (Instr. 5) Ownership Acquired (A) or Disposed Derivative Security Derivativ Owned Following or Indirect (I) (Instr. 4) (Instr. 4) Security (Instr. 3 and 4) Reported of (D) Transaction(s) (Instr. 3, 4

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 \$7.81 to \$8.26. 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

Date

Exercisable

Expiration

and 5)

(A) (D)

ν

Code

Remarks:

/s/Jonathan Golightly, attorney-in-fact

Title

05/02/2024

** Signature of Reporting Person

Amount Number

Shares

Date

(Instr. 4)

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.