SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION Washington, D.C. 20549

OMB APPROVAL

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## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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 <sup>*</sup> <u>Doyle Ramona</u> | 2. Date of Eve<br>Requiring Sta<br>(Month/Day/Y<br>04/15/2021                        | atement<br>Year)                   | 3. Issuer Name <b>and</b> Ticker or Trading Symbol<br><u>RECURSION PHARMACEUTICALS, INC.</u> [ RXRX ]   |   |  |  |  |  |
|--|--|------------------------------------|---|---|--|--|--|--|
| (Last) (First) (Middle)<br>C/O RECURSION<br>PHARMACEUTICALS              |  |                                    | 4. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)<br>Director 10% Owner   |   | wner   |  |  |  |
| 41 S. RIO GRANDE STREET  |  |                                    | X Officer (give title below)  | Other (<br>below)   |  | <ol> <li>Individual or Joi<br/>Check Applicable</li> </ol> |  |  |
| (Street)<br>SALT<br>LAKE UT 84101<br>CITY                                | _  |                                    | Chief Medical   | Officer   |  | X Form filed t<br>Person                                   | by One Reporting   |  |
| (City) (State) (Zip)   |  |                                    |   |   |  |  |  |  |
| Table I - Non-Derivative Securities Beneficially Owned                   |  |                                    |   |   |  |  |  |  |
| 1. Title of Security (Instr. 4)  |  |                                    |   |   |  |  | ture of Indirect Beneficial<br>rrship (Instr. 5)               |  |
| 1. Title of Security (Instr. 4)  |  |                                    | 2. Amount of Securities<br>Beneficially Owned (Instr.<br>4)   | 3. Owne<br>Form: D<br>(D) or In<br>(I) (Instr               | irect O<br>direct  | Nature of Indired<br>wnership (Instr. !                    |  |  |
|  |  | erivative                          | Beneficially Owned (Instr.  | Form: D<br>(D) or In<br>(I) (Instr                          | irect O<br>direct<br>. 5)<br>ed  |  |  |  |
|  |  | erivative<br>S, warrai<br>able and | Beneficially Owned (Instr.<br>4)<br>• Securities Beneficia  | Form: D<br>(D) or In<br>(I) (Instr<br>Illy Own<br>ible sect | irect<br>direct<br>. 5)<br>ed<br>urities)<br>4.<br>Conversio<br>or Exercis | 5.<br>Ownership<br>Se Form:                                | 5)<br>6. Nature of<br>Indirect Beneficial<br>Ownership (Instr. |  |
| (e.  | J., puts, calls<br>2. Date Exercisa<br>Expiration Date<br>(Month/Day/Year<br>Date Ex | erivative<br>S, warrai<br>able and | Beneficially Owned (Instr.<br>4)<br>e Securities Beneficia<br>nts, options, converti<br>3. Title and Amount of Sec<br>Underlying Derivative Sec<br>(Instr. 4) | Form: D<br>(D) or In<br>(I) (Instr<br>Illy Own<br>ible sect | irect<br>direct<br>. 5)<br>ed<br>urities)<br>4.<br>Conversio               | 5.<br>5.<br>Om Form:<br>Direct (D)                         | 5)<br>6. Nature of<br>Indirect Beneficial                      |  |

**Explanation of Responses:** 

1. Twenty-Five percent (25%) of the shares subject to the award shall vest one year after December 31, 2020, or the Annual Vesting Commencement Date, and one-forty-eighth

(1/48th) of the shares subject to the award shall vest each month thereafter on the same day of the month as the Annual Vesting Commencement Date.

2. Immediately prior to the completion of the Issuer's initial public offering of Class A Common Stock, each share of Common Stock shall be reclassified into one share of Class A Common Stock

**Remarks:** 

/s/ Ramona Doyle, MD

\*\* Signature of Reporting Person

04/14/2021

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.