SEC For					_	_				_										
	FORM	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549													OMB APPROVAL					
Section 16. Form 4 or Form 5 obligations may continue. See					ed pur	NT OF CHANGES IN BENEFICIAL OWNERSHIP d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940											OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person* <u>Mallick Parag</u> (Last) (First) (Middle)				2. Issuer Name and Ticker or Trading Symbol Nautilus Biotechnology, Inc. [NAUT] 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner X Officer (give title Other (specify below)				wner			
C/O NAUTILUS BIOTECHNOLOGY, INC. 2701 EASTLAKE AVENUE EAST						4. If Amendment, Date of Original Filed (Month/Day/Year)								Chief Scientist 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) SEATTL	.E W	/A	98102												by More than One Reporting					
(City)	(S	State)	(Zip)	-Deriv		Che the a	ck this box affirmative c	to indi defens	e conditions	ansa of Ru	ction was m ule 10b5-1(c	nade pursua c). See Instru	uction 10.	ct, instruction o	or written p	olan that	: is intended	to satisfy		
Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Transa Date (Month/E)				action	ction 2A. Deemed Execution Date,			a, 3. 4. Secu Transaction Code (Instr.		4. Securi	rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		5. Amoun Securities Beneficial Owned Fo	s Ily	Form (D) or	nership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o (D)	r Price	Price Reported Transaction (Instr. 3 and			((Instr. 4)				
			Table II -						uired, Di s, option					Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	Co	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)			nd 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Co	ode	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)					
Stock Option (Right to Buy)	\$2.72	03/01/2024			A		280,000		(1)	C	3/01/2034	Common Stock	280,000	\$0	280,0	000	D			

Explanation of Responses:

1. Subject to reporting person's continuous status as a "Service Provider" (as defined in the Insuer's 2021 Equity Incentive Plan) through each vesting date, twenty-five percent (25%) of the shares subject to the Option shall vest on the one (1) year anniversary of the Vesting Commencement Date (as defined below), and one thirty-sixth (1/36th) of the remaining shares subject to the Option shall vest each month thereafter on the same day of the month as the Vesting Commencement Date (and if there is no corresponding day, on the last day of the month). The Vesting Commencement Date is January 1, 2024.

Remarks:

/s/ Mathew B. Murphy, as								
Attorney-in-Fact								

Date

03/05/2024

** Signature of Reporting Person

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.