FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DC	20549	
vasiliigion,	D.C.	20349	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burden hours per response: 0.										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  NAZEM FARZAD				3. Da	Issuer Name and Ticker or Trading Symbol     Nautilus Biotechnology, Inc. [ NAUT ]     Jate of Earliest Transaction (Month/Day/Year)							(Ch	eck all appli X Directo Officer	cable)	g Pers	son(s) to Iss 10% Ow Other (s	ner	
(Last)	(Fi	rst)	(Middle)		06/1	06/15/2023							below)			below)		
C/O NAUTILUS BIOTECHNOLOGY, INC. 2701 EASTLAKE AVE. E.				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person						
(Street)	E W	Α	98102		-										iled by Mor		orung Persoi n One Repor	
							Rule 10b5-1(c) Transaction Indication											
(City)	(Si	cate)	(Zip)			Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				action	tion 2A. Deemed Execution Date,		3. Transacti Code (Ins	3. 4. Securities A Disposed Of ( 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amou Securitie Benefici Owned I	nt of es ally Following	Form (D) o	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	ount (A) or (D)		Reporte Transac (Instr. 3	ction(s)					
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	4. Transact Code (In 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 Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$3.97	06/15/2023			A		45,000		(1)	06	/15/2033	Common Stock	45,000	\$0	45,000	)	D	

## **Explanation of Responses:**

1. Subject to reporting person's continuous status as a "Service Provider" (as defined in the Issuer's 2021 Equity Incentive Plan) through each applicable vesting date, one-twelfth (1/12th) of the shares subject to the Option shall vest on a monthly basis following the date of grant on the same day of the month as such grant date (or on the last day of the month, if there is no corresponding day in such month).

## Remarks:

/s/ Anna Mowry, as Attorneyin-Fact \*\* Signature of Reporting Person

06/16/2023

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.