FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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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

Name and Address of Reporting Person*     Patel Sujal M					2. Issuer Name and Ticker or Trading Symbol Nautilus Biotechnology, Inc. [ NAUT ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner					
(Last) (First) (Middle) C/O NAUTILUS BIOTECHNOLOGY, INC. 2701 EASTLAKE AVENUE EAST					3. Date of Earliest Transaction (Month/Day/Year) 02/27/2023							helow)	Officer (give title Other (specify below)  CEO, President, and Secretary				
(Street) SEATTL (City)			98102 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. I Lin	e) <mark>X</mark> Form f	or Joint/Group Filing (Check Applicable  m filed by One Reporting Person  m filed by More than One Reporting  son				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				te	Execution Date		Date,	e, Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		5. Amour Securitie Beneficia Owned F Reported	s Form Illy (D) o ollowing (I) (In		: Direct   I Indirect   E str. 4)   C	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) o (D)	r Price	Transact (Instr. 3 a	ion(s)			Instr. 4)
	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. 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 (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		cpiration ate	Title	Amount or Number of Shares		(Instr. 4)	011(3)		
Stock Option (Right to Buy)	\$2	02/27/2023		A		650,000		(1)	02	2/27/2033	Common Stock	650,000	\$0	650,00	00	D	

## **Explanation of Responses:**

1. Subject to reporting person's continuous status as a "Service Provider" (as defined in the the Issuer'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, 2023.

## Remarks:

/s/ Matthew B. Murphy, as Attorney in Fact

03/01/2023

\*\* 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.