UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 8-K

CURRENT REPORT Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of Earliest Event Reported): January 10, 2022

NURIX THERAPEUTICS, INC.

(Exact Name of Registrant as Specified in its Charter)

Delaware (State or Other Jurisdiction of Incorporation or Organization)

001-39398 (Commission File Number)

27-0838048 (IRS Employer Identification No.)

1700 Owens Street, Suite 205 San Francisco, California (Address of Principal Executive Offices)

94158 (Zip Code)

(415) 660-5320 (Registrant's Telephone Number, Including Area Code)

(Former	N/A Name or Former Address, if Changed Since Last Re	eport)
Check the appropriate box below if the Form 8-K filing ollowing provisions:	is intended to simultaneously satisfy the filin	ng obligation of the registrant under any of the
Written communications pursuant to Rule 425 und	der the Securities Act (17 CFR 230.425)	
Soliciting material pursuant to Rule 14a-12 under	the Exchange Act (17 CFR 240.14a-12)	
Pre-commencement communications pursuant to	Rule 14d-2(b) under the Exchange Act (17 C	CFR 240.14d-2(b))
Pre-commencement communications pursuant to	Rule 13e-4(c) under the Exchange Act (17 C	CFR 240.13e-4(c))
ecurities registered pursuant to Section 12(b) of the Ac	ct:	
Title of each class	Trading symbol(s)	Name of each exchange on which registered
Common Stock, \$0.001 par value per share	NRIX	Nasdaq Global Market
ndicate by check mark whether the registrant is an eme hapter) or Rule 12b-2 of the Securities Exchange Act o		05 of the Securities Act of 1933 (§230.405 of this
Emerging growth company \square		
f an emerging growth company, indicate by check mark	0	1 1 0 0

Item 8.01 Other Events.

As previously announced, on January 10, 2022, Nurix Therapeutics, Inc. (the "Company"), will present an overview of the Company's performance in 2021 and its major goals for 2022 at the 40th Annual J.P. Morgan Healthcare Conference (the "JPM Conference"). A copy of the Company's presentation materials for the JPM Conference is attached as Exhibit 99.1 hereto and is incorporated herein by reference. Also on January 10, 2022, the Company issued the press release attached as Exhibit 99.2 hereto, which is incorporated herein by reference.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

The following exhibits are filed herewith and this list is intended to constitute the exhibit index:

- 99.1 <u>Nurix Therapeutics, Inc. presentation dated January 10, 2022.</u>
- 99.2 Nurix Therapeutics, Inc. press release dated January 10, 2022.
- 104 Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, as amended, the Registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

NURIX THERAPEUTICS, INC.

Date: January 10, 2022

By: /s/ Arthur T. Sands
Arthur T. Sands, M.D., Ph.D.
President and Chief Executive Officer



Investor Presentation

Important Notice and Disclaimers

This presentation contains information relating to Nurix Therapeutics, Inc. (the "Company," "we," "us" or "our") and forward-looking statements within the meaning of the "safe harbor" provisions of the Private Securities Litigation Reform Act of 1995. Forward-looking statements are neither historical facts nor assurances of future performance. Instead, they are based on our current beliefs, expectations and assumptions regarding the future of our business, future plans and strategies, our development plans, our preclinical results and other future conditions. All statements, other than statements of historical fact, contained in this presentation are forward-looking statements, including statements regarding our future financial or business performance, conditions, plans, prospects, trends or strategies and other financial and business matters; our current and prospective drug candidates; the timing of our planned IND submissions for our drug candidates; the planned timing and conduct of our clinical trial programs for our drug candidates, preclinical activities, research and development costs, current and prospective collaborations; the potential advantages of our DELigase™ platform and drug candidates; the extent to which our scientific approach and DELigase™ platform may potentially address a broad range of diseases; the extent animal model data predicts human efficacy; and the timing and success of the development and commercialization of our anticipated drug candidates, including our DeTIL and DeCART opportunities. In addition, when or if used in this presentation, the words "may," "could," "should," "anticipate," "estimate," "expect," "intend," "plan," "predict" and similar expressions and their variants, as they relate to the Company may identify forward-looking statements. Although we believe the expectations reflected in such forward-looking statements are reasonable, we can give no assurance that such expectations will prove to be correct. Readers are cautioned that actual results, levels of activity, performance or events and circumstances could differ materially from those expressed or implied in our forward-looking statements due to a variety of factors, including risks and uncertainties related to our ability to advance our drug candidates; obtain regulatory approval of and ultimately commercialize our product candidates; the timing and results of preclinical and clinical trials; our ability to fund development activities and achieve development goals; the impact of the COVID-19 pandemic on our business; our ability to protect intellectual property; and other risks and uncertainties described under the heading "Risk Factors" in our Annual Report on Form 10-K for the fiscal year ended November 30, 2020 filed with the Securities and Exchange Commission (the "SEC") on February 16, 2021, our Quarterly Report on Form 10-Q for the fiscal quarter ended August 31, 2021 filed with the SEC on October 14, 2021, and other filings we make from time to time with the SEC. Accordingly, readers are cautioned not to place undue reliance on these forward-looking statements. Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained

Certain information contained in this presentation relates to or is based on studies, publications, surveys and other data obtained from third-party sources and the Company's own internal estimates and research. While the Company believes these third-party sources to be reliable as of the date of this presentation, it has not independently verified, and makes no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third-party sources. In addition, all of the market data included in this presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while we believe our own internal estimates and research are reliable, such estimates and research have not been verified by any independent source.



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Leading the Field of Targeted Protein Modulation

Key Accomplishments in 2021

- Industry leading targeted protein modulation platform over 5 billion DEL compounds
- 15 targeted protein degradation drug discovery programs advancing from DELigase platform
- Regulatory clearance to initiate four wholly owned clinical programs (two INDs, two CTAs)

Goals for 2022

- Advance four programs through Phase 1a and initiate Nurix's first Phase 1b/2 clinical trial
- Advance Nurix's drug discovery pipeline with a new development candidate entering INDenabling studies
- Continue to lead the targeted protein modulation field supported by premier partners, investors, and employees

nurix

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Nurix Delivered on Key Milestones in 2021, a Year of Significant Execution

H2 2021* H1 2021* NX-2127 **Initiate Phase 1 trial** Present initial dose escalation data (oral BTK IND accepted by FDA Positive proof of mechanism degrader / **Enrollment ongoing** IMiD) Define differentiated profile **Initiate Phase 1 trial** NX-5948 Crosses blood brain barrier in animals CTA accepted by MHRA (oral BTK Active in autoimmune animal models Enrollment anticipated in H1 2022 degrader) ✓ Present additional preclinical data **Initiate Phase 1 trial** NX-1607 CTA accepted by MHRA Poster presented at 2021 AACR (oral CBL-B **Enrollment ongoing Annual Meeting** inhibitor) Complete engineering manufacturing **Initiate Phase 1 trial** DeTIL-0255 IND accepted by FDA (drug-Enrollment anticipated in H1 2022 enhanced TIL)



^{*} All anticipated timing was based on calendar-year periods

Advancing Four Wholly Owned Clinical Programs with a Deep Pipeline of Proprietary and Partnered Novel Targets

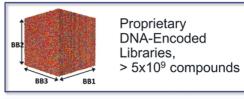
Drug Program	Target / Delivery	Therapeutic Area	Discovery	IND enabling	Phase 1	Phase 2	Phase 3
NX-2127 Degrader	BTK + IMiD activity Oral	B-cell Malignancies					
NX-5948 Degrader	BTK Oral	B-cell Malignancies and Autoimmune Diseases					
NX-1607 Inhibitor	CBL-B Oral	Immuno-oncology					
DeTIL-0255 Cell therapy	Adopted cell therapy with Ex vivo CBL-B inhibition	Gynecologic malignancies					
Discovery pipeline	Discovery pipeline						
Wholly owned	Degraders and inhibitors of E3 ligases, T cell kinase, drivers, and v						
Gilead Sciences	5 tar						
Sanofi	5 tar						



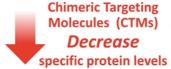
Nurix's DELigase Platform: Leading the Industry in DNA-Encoded Libraries for Targeted Protein Modulation

- DELigase[™] is a versatile drug discovery platform comprised of massive DNA-encoded libraries (DEL) now containing over 5 billion compounds
- Nurix can rapidly screen an expanded universe of E3 ligases and proteins previously thought to be undruggable
- Nurix can modulate specific protein levels up or down with its drug discovery platform

DELigase Protein Modulation Platform



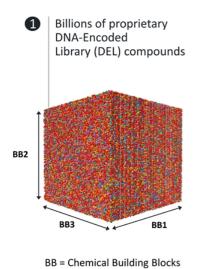


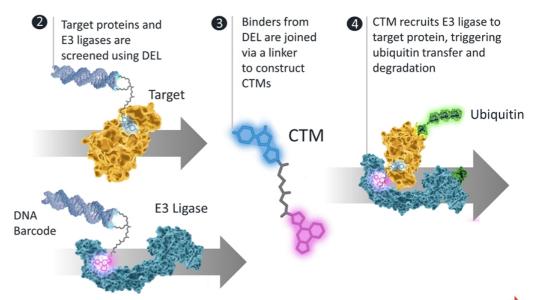






DELigase[®] Enables Efficient Chimeric Targeting Molecule Discovery and Design





nurix

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Nurix's BTK Degrader Portfolio: A Differentiated Approach to B-Cell Malignancies

- BTK is standard of care target however mutational escape represents a major unmet need
 - BTK inhibitors are approved for CLL/SLL, mantle cell lymphoma, Waldenstrom's macroglobulinemia, marginal zone lymphoma, with estimated 2021 sales ~ \$8.5 billion
 - Next generation BTK inhibitors continue to be susceptible to mutational escape
- Opportunities to meet unmet need with BTK degraders differentiated action
 - Catalytic nature of targeted protein degraders provide a new MOA with fundamentally different PK/PD from inhibitors
 - Unique dual activity: NX-2127 combines the activities of BTK degradation and IMiDs which may be beneficial across a range of hematologic malignancies, particularly in NHL / DLBCL

NX-2127: BTK degrader with IMiD activity. Developing across multiple B-cell malignancies (CLL, MCL, WM, MZL, DLBCL, FL)

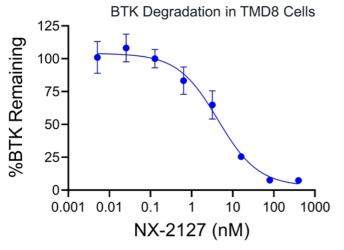
NX-5948: BTK degrader without IMiD activity. Developing for targeted B-cell malignancies and autoimmune diseases

BTK Inhibitors Validation **CLL and MCL** Durability **Patients** Can Be Respond to **Years Targeted** Agents None Resistance Approved for Mutations **Certain Forms** of NHL **Opportunities**

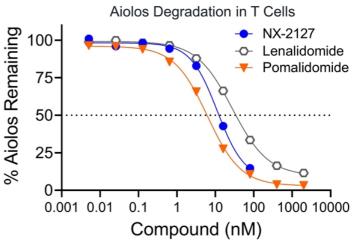
BTK, Bruton tyrosine kinase; IMiD, Immunomodulatory imide drugs; DLBCL, Diffuse large B cell lymphoma; CLL, Chronic lymphocytic leukemia, SLL, small lymphocytic lymphoma; MCL, Mantle cell lymphoma; WM, Waldenstrom's macroglobulinemia; MZL, Marginal zone lymphoma; FL, Follicular lymphoma; NHL, non-Hodgkin lymphoma



NX-2127 Degrades Both BTK and IMiD Neosubstrate Aiolos



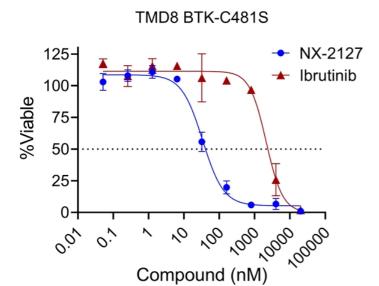
NX-2127 shows potent BTK degradation in TMD8 cells (human DLBCL cell line)



NX-2127 degradation of Aiolos in human T cells occurs at a similar potency to lenalidomide and pomalidomide



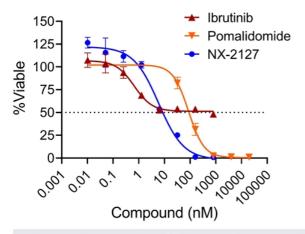
NX-2127 Potently Inhibits Growth of Ibrutinib-Resistant Tumor Cell Lines



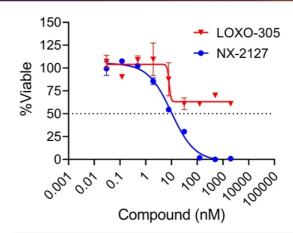
- NX-2127 retains potent growth inhibition relative to BTK inhibitors in a tumor cell line carrying the C481S mutation
- Degradation of BTK with NX-2127 may offer a therapeutic option for patients who develop resistance to BTK inhibitors
- NX-2127 also shows superior activity to BTK inhibitors in wild-type TMD8 cells



The Advantage of IMiD Activity Plus BTK Degradation in REC-1 Mantle Cell Lymphoma Cells: Complete Cell Killing by NX-2127



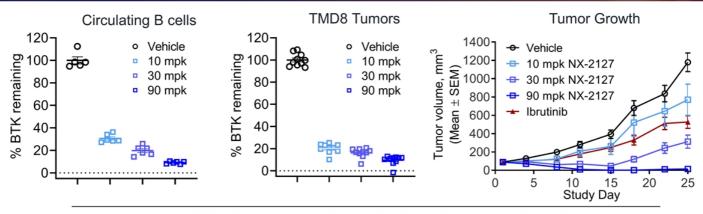
- Compounds active against BTK reduce cell viability at low doses, but this effect plateaus
- IMiDs promote more complete killing but require higher doses to reduce cell viability
- The combined BTK and IMiD activities of NX-2127 allow it to potently and completely kill REC-1 cells



- The next generation non-covalent BTK inhibitor, pirtobrutinib, has an activity curve similar to other BTK inhibitors
- NX-2127 shows similar potency and greater depth of cell killing compared to pirtobrutinib



Increasing BTK Degradation Correlates with Significant Tumor Growth Inhibition



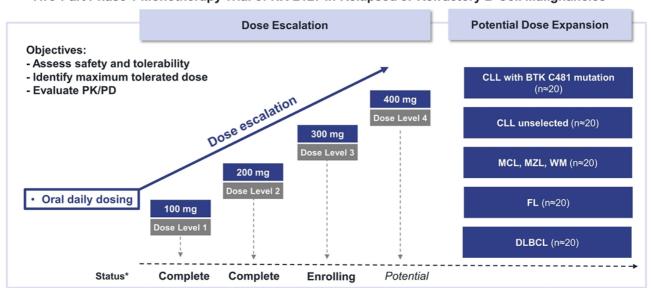
Treatment	Oral gavage dose (mg/kg)	% BTK degradation in circulating B cells	% BTK degradation in TMD8 tumor tissue	% TGI vs Vehicle (Day 24)	P value vs Vehicle
Vehicle	0	0.0±3.2	0.0±1.8	N/A	0
	10	69.3±1.5	79.8±1.4	58%	0.0492
NX-2127	30	80.2±1.8	83.7±1.3	74%	< 0.0001
	90	90.8±0.4	90.4±1.4	100%	< 0.0001
Ibrutinib	30	N/A	N/A	62%	0.0004

N/A: Not applicable; TGI: tumor growth inhibitio



NX-2127-001: Phase 1 First-in-Human Clinical Trial Design

Two-Part Phase 1 Monotherapy Trial of NX-2127 in Relapsed or Refractory B-Cell Malignancies



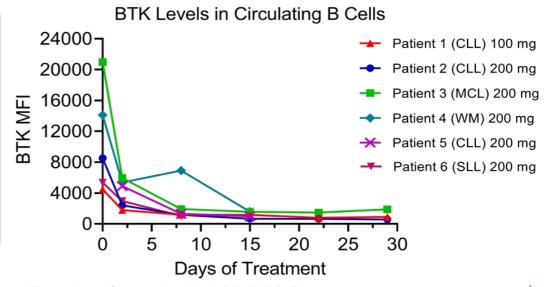
CLL, chronic lymphocytic leukemia; FL, follicular lymphoma; MCL, mantle cell lymphoma; MZL, marginal zone lymphoma; WM, Waldenstrom's macroglobulinemia

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* Status as of October 2021 data presentation

Robust BTK Degradation Observed in All Patients Dosed Regardless of Baseline BTK Protein Levels

- Oral daily treatment of NX-2127 induced a rapid and significant decrease in BTK levels that was sustained throughout dosing
- Patients have varying levels of BTK in B cells at the start of treatment



MFI: geometric mean fluorescence intensity in circulating CD19+ B cells.



BTK Degradation Table of Enrolled Patients

		% BTK Degraded							
Dose	Patient	Baseline	Day 2	Day 8	Day 15	Day 22	Day 29	Average Steady State*	Day 56
100 mg	Patient 1 (CLL)	0	62.8	76.9	78.0	85.5	82.0	81.8	81.4
	Patient 2 (CLL)	0	75.1	90.5	96.1	95.4	96.1	95.9	96.0
	Patient 3 (MCL)	0	74.0	92.7	94.6	95.4	92.3	94.1	94.7
200 mg	Patient 4 (WM)	0	63.6	56.8	91.5			91.5	
	Patient 5 (CLL)	N/A	\checkmark	✓	✓				
	Patient 6 (SLL)	0	6.9	85.1					



Cohort 2, Patient 4: Last dose given on Cycle 1 Day 15, discontinued due to disease progression
Cohort 2, Patient 5: Baseline sample was not collected due to inclement weather (Hurricane Ida), thus % degradation could not be calculated.
*Average steady state is calculated with available % BTK degraded values from Day 15, Day 22 and Day 29

Clinical Response Observed in Patient 1

Patient History: 78-year-old male with stage IV CLL

Prior Treatments:

1. Rituximab, 2015

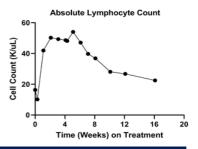
Disease at Study Entry: Bone Marrow Involvement: 85.4% Spleen: Enlarged (15.7 cm) Nodal Lesions: Several, largest

Multiple resistance mutations

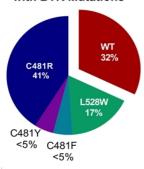
4.2 cm

2. Ibrutinib, 2015-2021

Safety	
Exposure	No dose interruptions or modifications
DLT's	None
SAE's	None
Grade 3 or > AE	Neutropenia (ANC = 860), resolved without intervention



Up to 68% of Leukemia Cells with BTK Mutations



Disease Assessment								
Time Point	Hgb (g/dL)	PIt (K/uL)	ALC (K/uL)	Spleen (cm)	Spleen % change ^a	Lymph Node SPD (cm²)	Nodal SPD % Change	Response ^b
Baseline	14.3	112	16.4	15.7		27.1		
Week 8	13.2	133	36.9	14.8	-33%	13.4	-51%	Stable Disease ^c
Week 16	14.1	114	22.5	14.2	-56%	10.8	-60%	Partial remission with lymphocytosis

a Spleen % change is the percent change to a reference "normal" of 13 cm.
b Response for this patient as per International working group on chronic lymphocytic leukemia (iwCLL)
c Listed as partial remission in database.
DLT: dose limiting toxicity; SAE: serious adverse event; AE: adverse event; ANC: absolute neutrophil count; Hgb: hemoglobin, Plt: platelet count, ALC: absolut lymphocyte count, SPD: sum of product diameters



NX-5948 is a Differentiated BTK Degrader Being Developed for CLL/NHL and Autoimmune Diseases

Differentiated profile

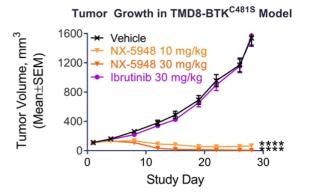
- NX-5948 retains potent activity against both wild type and mutant BTK
- NX-5948 spares IMiD activity, unlike NX-2127
- NX-5948 crosses the blood brain barrier in animal models and degrades BTK in both brain-resident lymphoma cells and microglia

Strategy and Implications

- · Establish safety and preliminary clinical activity in B-cell malignancies
- · Explore the treatment of patients with CNS+ B-cell malignancies
- · Further explore potential for autoimmune indications

Next Steps

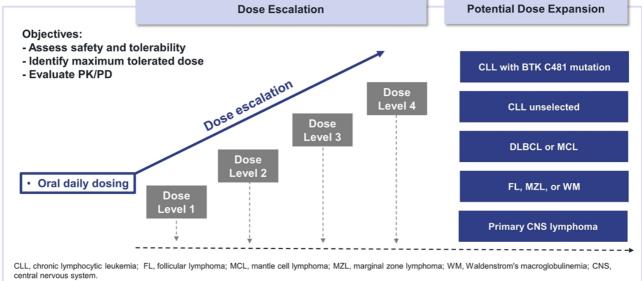
- Anticipate dosing first patient in Phase 1a trial in H1 2022
- Initial proof of mechanism PK/PD data anticipated in H2 2022





NX-5948-301: Phase 1 First-in-Human Clinical Trial Design

Two-Part Phase 1 Monotherapy Trial of NX-5948 in Relapsed or Refractory B-Cell Malignancies





CBL-B: A Modulator of T Cell Activation and a Novel Target for Immuno-oncology

 CBL-B is an E3 ligase that regulates the immune system by specifically ubiquitinating proteins involved in signaling through the T cell antigen receptor • Blocking CBL-B removes a brake on the immune system **CBL-B** inhibition CBL-B function is supported by mouse and human IL-2 production genetics Proliferation Signal 1 NX-1607: Optimized CBL-B inhibitor for oral Central memory phenotype delivery. Developing as an oral intracellular Anti-tumor activity checkpoint inhibitor for treating solid tumors. CBL-B Threshold of activation NX-0255: Optimized CBL-B inhibitor for ex vivo use. Developing in conjunction with autologous T cell T cell T cell exhaustion therapies including TIL and CAR T.

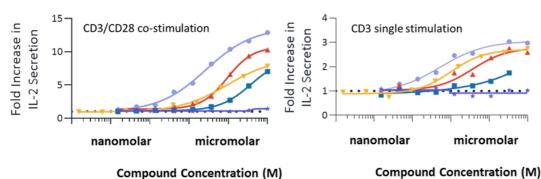
Activation

Synergy with anti-PD-1

CBL-B Inhibitor NX-1607 Elevates Cytokines Including IL-2 in Human Donor T Cells

- NX-1607 increases stimulation-dependent production of key activation cytokines
- NX-1607 has no impact in the absence of T cell stimulation
- Oral NX-1607 is expected to produce key cytokines locally in tumors, driving a more robust antitumor response

IL-2 secretion increases with concentration and potency of CBL-B inhibition



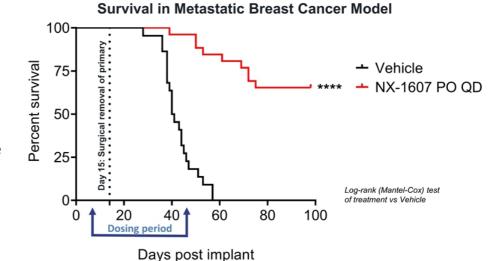
Biochemical Activity					
Compound	IC ₅₀ nM				
NRX-5	5				
NRX-4	15				
NRX-3	26				
NRX-2	112				
NRX-1 (inactive enantiomer	1,191				

T cell activity ranks orders with biochemical activity



Single-Agent NX-1607 Induces Long Term Survival in Metastatic, Triple Negative, Breast Cancer Model

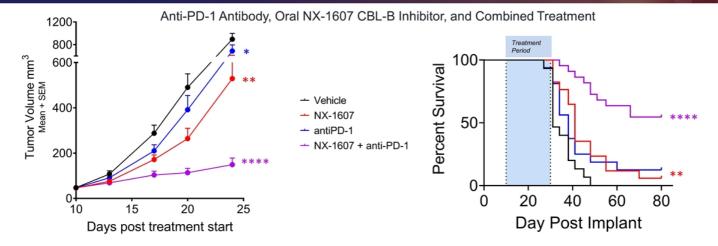
- Once daily oral dosing of NX-1607
- Tumors implanted at Day 0
- Surgical removal of primary tumor at Day 15
- NX-1607 was given before the surgery from day 7 to day 15 (neo-adjuvant phase) and continued after surgery (adjuvant phase) until day 46



4T1 breast carcinoma cells metastasize from subcutaneous space to distant sites



Combination of NX-1607 and Anti-PD-1 Synergize to Enhance Anti-Tumor Effects and Survival of Tumor-bearing Mice



Combination of NX-1607 and anti-PD-1 treatment significantly improves anti-tumor response and survival in mice bearing two tumors relative to vehicle or anti-PD-1 alone

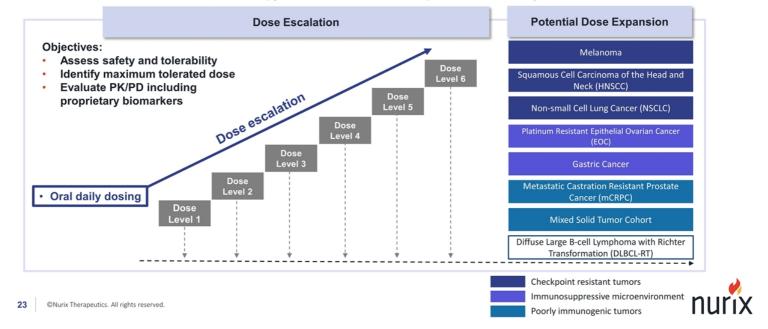
Tumors from both flanks plotted Two-way ANOVA of treatment group vs vehicle control

Log-rank (Mantel-Cox) test of vehicle vs treatment



NX-1607-101: Phase 1 First-in-Human Clinical Trial Design

Two-Part Phase 1 Monotherapy Trial of NX-1607 in Relapsed or Refractory Tumors



Drug Enhanced Tumor Infiltrating Lymphocytes (DeTIL-0255)

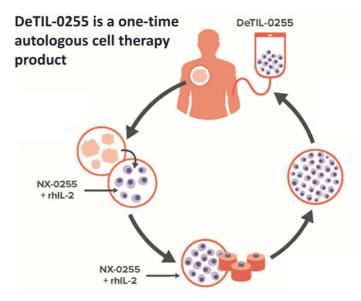


Tumor Infiltrating Lymphocytes

DeTIL-0255 is created by *ex vivo* CBL-B inhibition with small-molecule NX-0255, producing a TIL cell therapy product with enhanced characteristics that overcomes the major limitations of current TIL therapy

Major limitations of TIL:

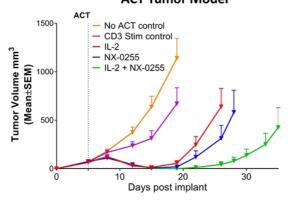
- 1. Suboptimal manufacture success rate
- 2. Exhausted phenotype after in vitro expansion
- 3. Unpredictable efficacy and durability



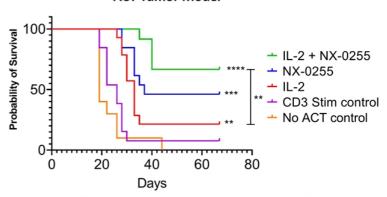


NX-0255 *ex vivo* Treatment Provides Robust Anti-Tumor Activity in Mouse Model of Adoptive T Cell Therapy

Reduction in Tumor Growth in Mouse ACT Tumor Model



Improvement in Conditional Survival in Mouse ACT Tumor Model



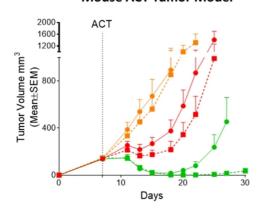
- CD8+ cells exposed to NX-0255 alone ex vivo resulted in superior conditional survival compared to using IL-2 alone
- CD8+ cells exposed to NX-0255 and IL-2 combined ex vivo exert a deeper anti-tumor response
- NX-0255 ex vivo exposure period is only three days, anti-tumor effects persist for over a month after engraftment
- · Animals that rejected tumor were rechallenged 80 days post ACT, and all animals rejected tumor
- One-year post infusion, tumor-specific T cells in recipient mice remained enhanced

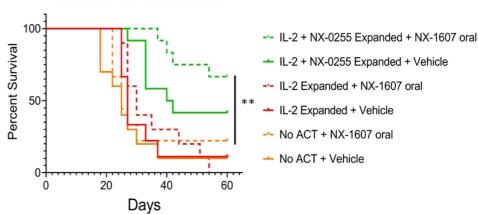


Oral NX-1607 Augments Anti-Tumor Activity Observed with ex vivo NX-0255 Combination in ACT Mouse Model

Reduction in Tumor Growth in Mouse ACT Tumor Model

Improvement in Conditional Survival in Mouse ACT Tumor Model



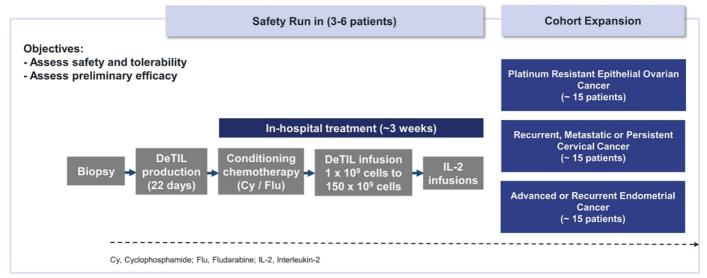


- Oral NX-1607 treatment once daily further enhances conditional survival and anti-tumor activity of T cells expanded for three days with recombinant IL-2 plus NX-0255 ex vivo in adoptive cell therapy mouse model
- The combination of oral CBL-B inhibition with DeTIL-0255 will be explored as a means to improve outcomes and potentially reduce the need for systemic IL-2 nurix

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DeTIL-0255-201: Phase 1 First-in-Human Clinical Trial Design

Two-Part Phase 1 Monotherapy Trial of DeTIL-0255 in Relapsed or Refractory Gynecological Cancers





Advancing Our Proprietary and Partnered Pipelines with Financial Strength

Financial Highlights

- \$465 million in cash as of August 31, 2021
- \$518 million raised in equity financings in 2020-2021
- \$276 million to date from partnership upfront payments
- \$19.5 million to date in partnership progress milestones
- Two premier partnerships, each with five targeted protein degradation discovery programs
- Nurix has option for 50/50 U.S. co-development for two drug candidates from each partner
- · Nurix internal programs excluded

Gilead Sciences

June 2019

 Upfront payment of \$45M and up to \$2.3B in additional payments, including early discovery milestones

Sanofi

December 2019

 Upfront payment of \$55M, expansion option payment of \$22M in January 2021, and up to \$2.5B in additional payments, including early discovery milestones



Advancing Our Pipeline to Multiple Clinical Milestones in 2022

NX-2127

- Initiate Phase 1b trial in mid-2022
- Present additional Phase 1a clinical results in H2 2022

NX-5948

- Dose first patient in Phase 1a trial in H1 2022
- Establish Phase 1a PK/PD in H2 2022

Note: All anticipated timing is based on calendar-year periods

NX-1607

Establish Phase 1a PK/PD in mid-2022

DeTIL-0255

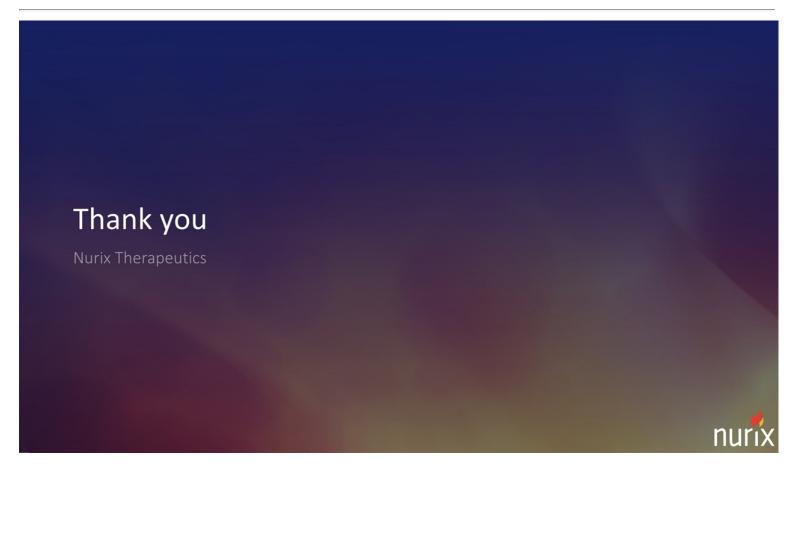
- Dose first patient in Phase 1 trial in H1 2022
- Phase clinical update from safety run in H2 2022

Investor R&D day

Planned for Q2 2022



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Nurix Therapeutics Advances Clinical and Preclinical Pipeline and Outlines 2022 Catalysts

Nurix leads protein modulation field with four active clinical stage programs

Anticipates data-rich 2022 with clinical-stage programs and a pipeline fueled by proprietary DELigase platform

San Francisco, CA, January 10, 2022 (GLOBE NEWSWIRE) — <u>Nurix Therapeutics</u>, <u>Inc.</u> (Nasdaq: NRIX), a biopharmaceutical company developing targeted protein modulation drugs, today outlined key objectives and anticipated milestones for 2022 and provided an overview of recent progress.

"2021 was a significant and highly productive year for Nurix as we advanced four wholly owned programs from our proprietary DELigase platform into clinical development and demonstrated the first proof of mechanism of targeted protein degradation in patients with hematologic malignancies," said Arthur T. Sands, M.D., Ph.D., president and chief executive officer of Nurix. "As we enter 2022, we are well-positioned to maintain the momentum of the past year and look forward to sharing clinical data from all four programs as we continue to advance our internal pipeline and make progress in our strategic collaborations with Sanofi and Gilead."

2022 Goals and Catalysts

Pipeline

- · Planned data presentations from all four clinical programs in 2022 as described below:
 - NX-2127: Nurix's lead drug candidate from its protein degradation portfolio, NX-2127, is an orally bioavailable degrader of Bruton's
 tyrosine kinase (BTK) with immunomodulatory drug (IMiD) activity. Nurix plans to initiate the Phase 1b expansion phase of its ongoing
 Phase 1a/1b clinical trial of NX-2127 in adults with relapsed or refractory B cell malignancies in mid-2022 and to present additional data
 from the Phase 1a trial in the second half of 2022. Additional information on the clinical trial can be accessed at www.clinicaltrials.gov
 (NCT04830137).
 - NX-5948: Nurix's second drug candidate from its protein degradation portfolio, NX-5948, is an orally bioavailable BTK degrader
 designed without IMiD activity for certain B-cell malignancies and autoimmune diseases. Nurix is evaluating NX-5948 in a Phase 1
 clinical trial in adults with relapsed or refractory B cell malignancies and expects to begin dosing at multiple clinical centers in the United
 Kingdom in the first half of 2022 and to have initial safety and pharmacokinetic (PK) and pharmacodynamic (PD) data from the Phase 1a
 portion of the study in the second half of 2022. Additional information on the clinical trial can be accessed at www.clinicaltrials.gov
 (NCT05131022).

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- NX-1607: Nurix's lead drug candidate from its E3 ligase inhibitor portfolio, NX-1607, is an orally bioavailable inhibitor of Casitas
 B-lineage lymphoma proto-oncogene (CBL-B) for immuno-oncology indications including a range of solid tumor types. Nurix is
 evaluating NX-1607 in an ongoing, Phase 1 dose escalation and expansion trial in adults with a variety of oncology indications at multiple
 clinical sites in the United Kingdom and expects to have initial PK/PD data from the Phase 1a stage of the study, including biomarker and
 safety data, in mid-2022. Additional information on the clinical trial can be accessed at www.clinicaltrials.gov (NCT05107674).
- DeTIL-0255: Nurix's lead candidate in its cellular therapy portfolio, DeTIL-0255, is a drug-enhanced adoptive cellular therapy. Nurix is
 evaluating DeTIL-0255 in a Phase 1 trial in adults with gynecological malignancies including ovarian cancer, cervical cancer, and
 endometrial cancer. Nurix anticipates dosing the first patient in the first half of 2022 and providing a clinical update from the run-in portion
 of the study in the second half of 2022. Additional information on the clinical trial can be accessed at www.clinicaltrials.gov
 (NCTD5107739)
- Nurix plans to host an investor event in the first half of 2022 to provide a comprehensive update on its lead programs and DELigase discovery
 platform.

2021 Accomplishments and Business Highlights

Pipeline

Advanced four wholly owned programs generated by its proprietary DELigase platform into clinical stage development. The first programs from its protein degradation chimeric targeting molecule (CTM) portfolio, orally administered BTK-degraders NX-2127 and NX-5948, are both being evaluated in adults with B-cell malignancies, and the first two programs in its ligase inhibitor portfolio, NX-1607, an oral CBL-B inhibitor, and DeTIL-0255, a drug-enhanced TIL therapy, are being evaluated in adults with a range of solid tumors.



- Presented initial data from its first-in-human, Phase 1 dose-escalation trial of NX-2127 in adults with relapsed or refractory B-cell malignancies at the 4th Annual Targeted Protein Degradation Summit in October. Initial PK and PD data were reported for the first six patients in the trial including completed cohorts 1 and 2 treated at 100 mg and 200 mg once daily. The data showed BTK levels in peripheral blood significantly decreased in all patients in the trial starting on day 1 and remained suppressed throughout the dosing period. BTK degradation exceeded 80% at steady state in the first dose cohort and exceeded 90% in the second dose cohort. Such levels of BTK degradation have been associated with anti-tumor effects in preclinical animal models. Clinical observations were presented for the one patient in cohort 1, a 78-year-old man with chronic lymphocytic leukemia (CLL) and significant mutations in the BTK gene associated with resistance to standard of care BTK inhibitors, who achieved a partial remission with lymphocytosis.
- Presented preclinical data supporting pipeline programs at major scientific and medical meetings throughout the year. In April, Nurix presented data from its NX-1607 program at the American Association for Cancer Research (AACR) 2021 annual meeting demonstrating significant anti-tumor efficacy of NX-1607 treatment in animal models of both colorectal cancer and triple negative breast cancer. Importantly, the combination of NX-1607 and an anti-PD-1 antibody substantially increased the median overall survival and the frequency of long-lasting tumor rejection in these models compared to either single agent alone. In November, at the Society for Immunotherapy of Cancer (SITC) conference, Nurix presented preclinical studies on human tumor samples demonstrating that its CBL-B inhibitor, NX-0255, enhances the number and quality of T cells expanded from tumors for use in tumor infiltrating lymphocyte (TIL) therapy and supporting the advancement of its DeTIL-0255 autologous cell therapy into clinical studies in adults with gynecological malignancies. In December, at the American Society of Hematology (ASH) Annual Meeting, Nurix presented preclinical data demonstrating the ability of NX-5948 to cross the blood brain barrier, degrade BTK in both intracranial lymphoma cells and microglia, and exert anti-tumor activity in a mouse model of central nervous system lymphoma.

Corporate

Completed a Public Follow-on Offering: In March, Nurix announced the closing of its underwritten public offering of 5,175,000 shares of
common stock, at a public offering price of \$31.00 per share, which included 675,000 shares issued upon the exercise in full by the underwriters
of their option to purchase additional shares of common stock. The net proceeds to Nurix from the offering were approximately \$150 million, after
deducting underwriting discounts, commissions and offering expenses.

- Expanded Sanofi collaboration: In January 2021, Nurix announced that Sanofi exercised its option to increase the number of targets to a total of five, up from the original three targets, in the strategic collaboration signed in December 2019. The option exercise triggered a one-time \$22 million payment to Nurix, adding to the previously received \$55 million upfront payment. As part of the multi-year collaboration, Nurix is using its proprietary drug discovery platform, DELigase, that integrates its DNA-encoded libraries (DEL) and its portfolio of E3 ligases to create small molecules designed to induce degradation of specified drug targets. Sanofi will have exclusive rights and be responsible for clinical development and commercialization of drug candidates resulting from the work while Nurix will retain the option to co-develop and co-promote up to two products in the United States under certain conditions.
- Announced Collaboration for the Discovery of Novel Drugs to Treat Pediatric Cancers: In March, Nurix announced that it is part of a collaboration sponsored by Alex's Lemonade Stand Foundation (ALSF), a leading funder of pediatric cancer research, to develop a drug to potentially treat aggressive childhood cancers including neuroblastoma and medulloblastoma. Nurix will provide its extensive expertise in E3 ligases and use its proprietary DNA-encoded libraries to identify small-molecule degraders of MYCN, a target previously considered undruggable. The program is one of four that are being supported by ALSF's Crazy 8 initiative, which is designed to bring together world-class research talent to accelerate the pace of new cure discovery in childhood cancer.
- Strengthened Leadership Team and Expanded the Board of Directors with Experienced Business Leaders. In June, Nurix appointed Stefani A. Wolff as chief operating officer and executive vice president of product development. Ms. Wolff has over 30 years of leadership experience in oncology and immunology most recently from Principia Biopharma Inc., where she served as chief development officer and formerly senior vice president of strategy and operations overseeing Principia's portfolio including BTK targeted agents. Nurix also announced the appointments of Clay Siegall, Ph.D., Judith A. Reinsdorf, J.D., and Paul M. Silva to its board of directors. Each new appointee brings significant strategic and operational experience. Dr. Siegall is the co-founder of Seagen Inc. (formerly Seattle Genetics, Inc.) and serves as its president, chief executive officer and chairman of the board. Ms. Reinsdorf is the former executive vice president and general counsel of Johnson Controls International, and Mr. Silva is the former senior vice president, chief accounting officer at Vertex Pharmaceuticals Incorporated.

About Nurix Therapeutics, Inc.

Nurix Therapeutics is a biopharmaceutical company focused on the discovery, development, and commercialization of small molecule therapies designed to modulate cellular protein levels as a novel treatment approach for cancer and other challenging diseases. Leveraging Nurix's extensive expertise in E3 ligases together with its proprietary DNA-encoded libraries, Nurix has built DELigase, an integrated discovery platform to identify and advance novel drug candidates targeting E3 ligases, a broad class of enzymes that can modulate proteins within the cell. Nurix's drug discovery approach is to either harness or inhibit the natural function of E3 ligases within the ubiquitin proteasome system to selectively decrease or increase cellular protein levels. Nurix's wholly owned pipeline includes targeted protein degraders of Bruton's tyrosine kinase, a B-cell signaling protein, and inhibitors of Casitas B-lineage lymphoma prote-oncogene B, an E3 ligase that regulates T cell activation. Nurix is headquartered in San Francisco, Califomia. For more information, please visit http://www.nurixtx.com/.



Forward Looking Statement

This press release contains statements that relate to future events and expectations and as such constitute forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. When or if used in this press release, the words "anticipate," "believe," "could," "estimate," "expect," "intend," "may," "outlook," "plan," "predict," "should," "will," and similar expressions and their variants, as they relate to Nurix, may identify forward-looking statements. All statements that reflect Nurix's expectations, assumptions or projections about the future, other than statements of historical fact, are forward-looking statements, including, without limitation, statements regarding our future financial or business performance, conditions, plans, prospects, trends or strategies and other financial and business matters; our current and prospective drug candidates; the planned timing and conduct of our clinical trial programs for our drug candidates, preclinical activities, research and development costs, current and prospective collaborations; the planned timing for the provision of clinical updates and initial findings from our clinical studies; the potential advantages of our DELigase™ platform and drug candidates; the extent to which our scientific approach and DELigase™ platform may potentially address a broad range of diseases; the estimated size of the market for our drug candidates; and the timing and success of the development and commercialization of our anticipated drug candidates. Forward-looking statements reflect Nurix's current beliefs, expectations, and assumptions regarding the future of Nurix's business, future plans and strategies, its development plans, its preclinical results, future conditions and other factors Nurix believes are appropriate in the circumstances. Although Nurix believes the expectations and assumptions reflected in such forward-looking statements are reasonable, Nurix can give no assurance that they will prove to be correct. Forward-looking statements are not guarantees of future performance and are subject to risks, uncertainties and changes in circumstances that are difficult to predict, which could cause Nurix's actual activities and results to differ materially from those expressed in any forward-looking statement. Such risks and uncertainties include, but are not limited to: (i) risks and uncertainties related to Nurix's ability to advance its drug candidates, obtain regulatory approval of and ultimately commercialize its drug candidates; (ii) the timing and results of preclinical and clinical trials; (iii) Nurix's ability to fund development activities and achieve development goals; (iv) the impact of the COVID-19 pandemic on Nurix's business, clinical trials, financial condition, liquidity and results of operations; (v) Nurix's ability to protect intellectual property and (vi) other risks and uncertainties described under the heading "Risk Factors" in Nurix's Annual Report on Form 10-K filed with the Securities and Exchange Commission (SEC) on February 16, 2021, Nurix's Quarterly Report on Form 10-Q filed with the SEC on October 14, 2021, and other SEC filings. Accordingly, readers are cautioned not to place undue reliance on these forward-looking statements. The statements in this press release speak only as of the date of this press release, even if subsequently made available by Nurix on its website or otherwise. Nurix disclaims any intention or obligation to update publicly any forward-looking statements, whether in response to new information, future events, or otherwise, except as required by applicable law



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