SEC Form 4
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## FORM 4

Check this box if no longer subject to

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable) Director

1									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

10% Owner

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 <sup>*</sup> Ring Christine	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Nurix Therapeutics, Inc.</u> [ NRIX ]
(Last) (First) (Middle)	3 Date of Earliest Transaction (Month/Day/Year)

(Last) C/O NURIX TH 1700 OWENS S	(First) IERAPEUTICS, STREET, SUITE		3. Date of Earliest Transaction (Month/Day/Year) 04/28/2021	X Oncer (give the Other (specify below) below) General Counsel
(Street) SAN FRANCISCO	СА	94158	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)		

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	04/28/2021		<b>M</b> <sup>(1)</sup>		800	Α	\$1.86	1,605	D	
Common Stock	04/28/2021		<b>S</b> <sup>(1)</sup>		800	D	\$35.25	805	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transa Code ( 8)		of Deriv Secu Acqu (A) o Dispo of (D (Insti	5. Number of Expiration Da Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ate Amount of Year) Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$1.86	04/28/2021		<b>M</b> <sup>(1)</sup>			800	(2)	09/30/2029	Common Stock	800	\$0.00	115,666	D	

#### Explanation of Responses:

1. This transaction was effected pursuant to a Rule 10b5-1 trading plan previously adopted by the Reporting Person.

2. The option vests as to 1/4 of the total shares on September 9, 2020, and then 1/48 of the total shares will vest monthly thereafter until the option is fully vested on August 9, 2023, subject to the Reporting Person's provision of service to the Issuer on each vesting date. The option contains an early-exercise provision and is exercisable as to unvested shares, subject to the Issuer's right of repurchase.

### Remarks:

<u>/s/ Christine Ring</u>

04/29/2021

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.