FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

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*  Ring Christine  (Last) (First) (Middle)  C/O NURIX THERAPEUTICS, INC.  1700 OWENS STREET, SUITE 205							2. Issuer Name and Ticker or Trading Symbol Nurix Therapeutics, Inc. [ NRIX ]  3. Date of Earliest Transaction (Month/Day/Year) 01/10/2022										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  General Counsel				
(Street) SAN FRANCI	sco C	A !	94158		,	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 Form filed by More than One Reporting Person					
(City)	(Si	tate)	(Zip)																		
		Tab	le I - Nor	n-Deriv	ative	Se	curit	ies Ac	qu	ired, C	isp	osed o	of, o	r Ber	neficial	ly Owned	t l				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			Benefic	es ally Following	Form (D) o	n: Direct or Indirect onstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	/	Amount		(A) or (D)	Price	Transac (Instr. 3	ction(s)			(11341.4)					
Common Stock 01/10/2						2022			M <sup>(1)</sup>		1,200		A	\$1.8	5 2,	2,486		D			
Common	Stock			01/10	)/2022	2				S <sup>(1)</sup>		1,200	0 D \$27.14 1,286 D								
	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. Deeme Execution if any (Month/Da	Date,		ansaction ode (Instr.		n of		6. Date Exercisable : Expiration Date (Month/Day/Year)			e and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e C s F lly C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title		Amount or Number of Shares						
Employee Stock Option (right to	\$1.86	01/10/2022			M <sup>(1)</sup>			1,200		(2)	09	9/30/2029		nmon ock	1,200	\$0.00	100,060	6	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:

/s/ Christine Ring

01/11/2022

\*\* 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.