

Leader in Targeted Protein Modulation

Targeting a Novel E3 Ligase with a Small Molecule Inhibitor

NX-1607: A first-in-class CBL-B inhibitor in the clinic

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Discovery on Target

Boston

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Nurix Drugs Engage Ligases for the Treatment of CancerTargeted Protein Modulation:TPM = TPD + TPECBL-B Inhibitor

A Powerful Cellular_System

Harness ligases to decrease specific protein levels

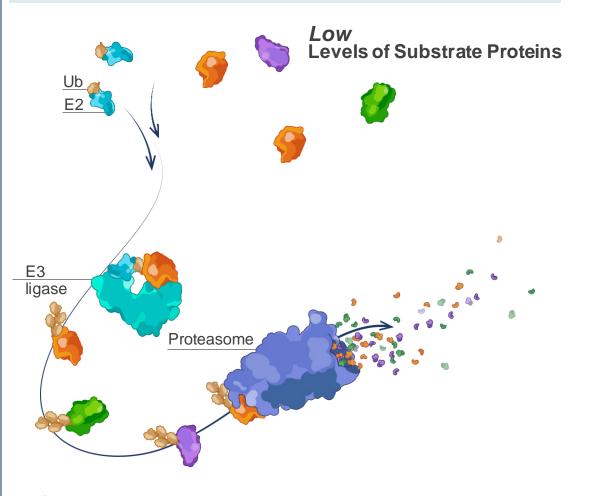
Targeted Protein Degradation (TPD) BTK degraders

Ubiquitin is ligated to target proteins to tag them for degradation by the proteasome CBL-B Inhibitor NX-1607 Targeted Protein Elevation (TPE)

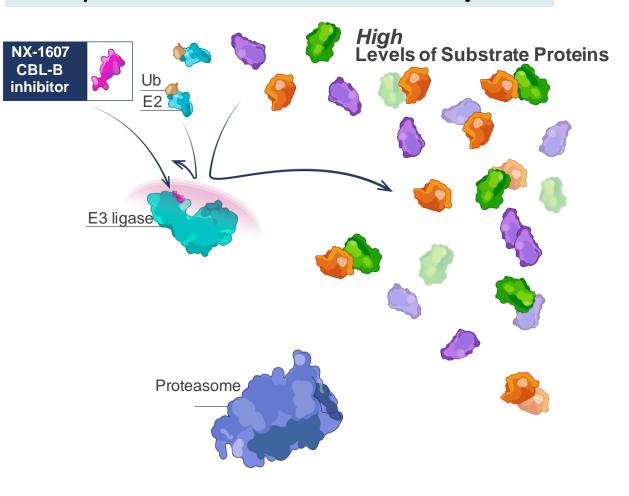
Inhibit ligases to increase specific protein levels

Targeted Protein Elevation The Journey of CBL-B Inhibitor Discovery

CBL-B is an E3 ligase that restrains the levels of substrate proteins necessary for optimal anticancer response



CBL-B inhibition leads to elevated levels of substrate proteins which can restore cancer immunity



E2, ubiquitin-conjugating enzyme; E3, ubiquitin ligase; Ub, ubiquitin

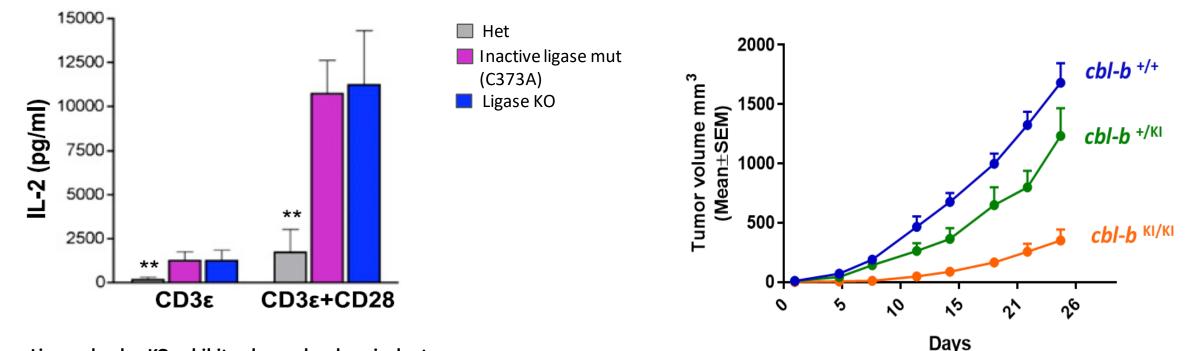
A CBL-B Inhibitor Could Revolutionize Cancer Treatment

- The ultimate goal of cancer immunotherapy is to generate a coordinated immune system response against cancer associated antigens
- Immune checkpoint agents such as anti-PD-1/PD-L1 have demonstrated impressive long-lasting responses in only a subset of patients
- Resistance mechanisms prevent most patients from responding:
 - ---> Low antigen presenting cells and NK cells within the tumor
 - ---> Tumor microenvironment not permissive to T cell trafficking in the tumor
 - ---> Excessive T cell exhaustion from chronic antigen stimulation
 - ---> Downregulation of MHC Class I
- CBL-B inhibitors are optimal next generation IO agents: act on multiple immune cells, addressing multiple resistance mechanisms

CBL-B is a Master Orchestrator of Immune Cell Activation Loss of CBL-B ligase activity results in hyperactive T cells that can reject tumors

IL-2 secretion in KO and ligase inactive T cells *ex vivo*

Ligase-inactive *cbl-b* knock-in mice inhibit tumor growth (TC-1 syngeneic model)



Ligase-dead or KO exhibit enhanced and equivalent response to either single- or double stimulation

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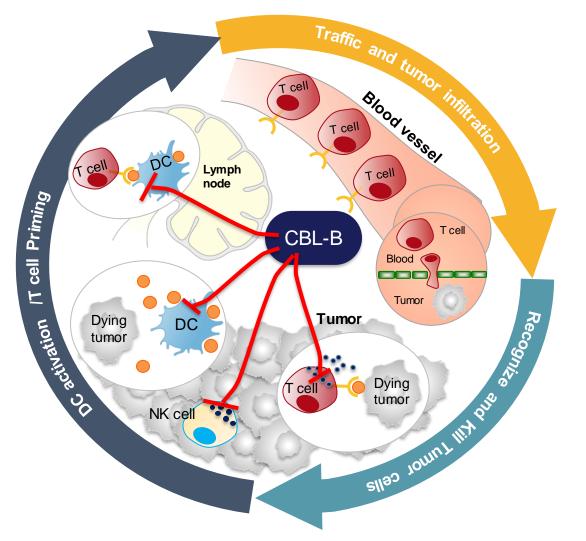
Targeting CBL-B Enhances Antitumor Response

A Master Orchestrator of the Immune System

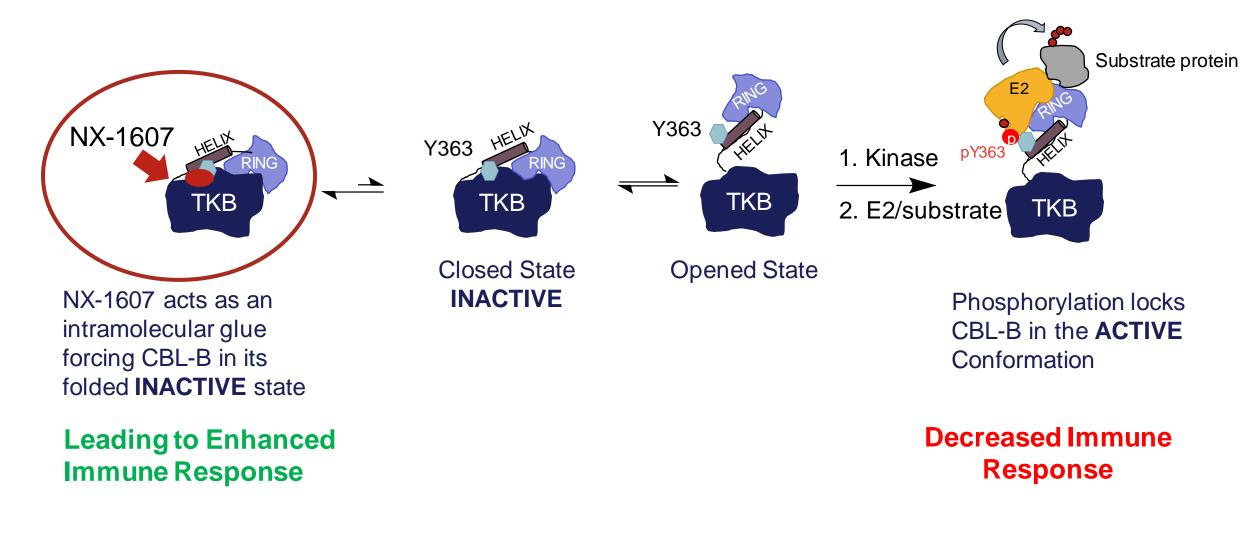
CBL-B is an E3 ubiquitin ligase that strongly restrains a productive anti-tumor response

NX-1607, a CBL-B inhibitor, acts as an intramolecular glue & increases:

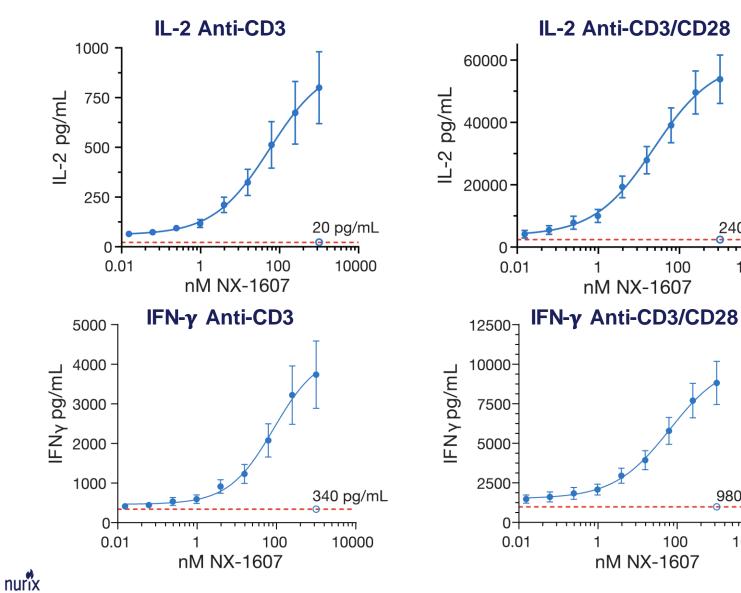
- DC and NK infiltration and function
- T cell priming
- Cytotoxic T cells function
- Ability of T cells to resist tumor immunosuppressive mechanisms: Treg, MDSC, and TGF-β



NX-1607 Mechanism of Action: Intramolecular Glue



NX-1607 Increases IL-2 and IFN- γ Secretion in TCR Stimulated Primary Human T cells



NX-1607 increases TCR stimulation-dependent production of IL-2 and IFN- γ in primary human T cells

NX-1607 has no impact in the absence of T cell stimulation as measured by proliferation, activation, or cytokine release

Cytokine Response Ο **Baseline Response**

2400 pg/mL

10000

980 pg/mL

10000

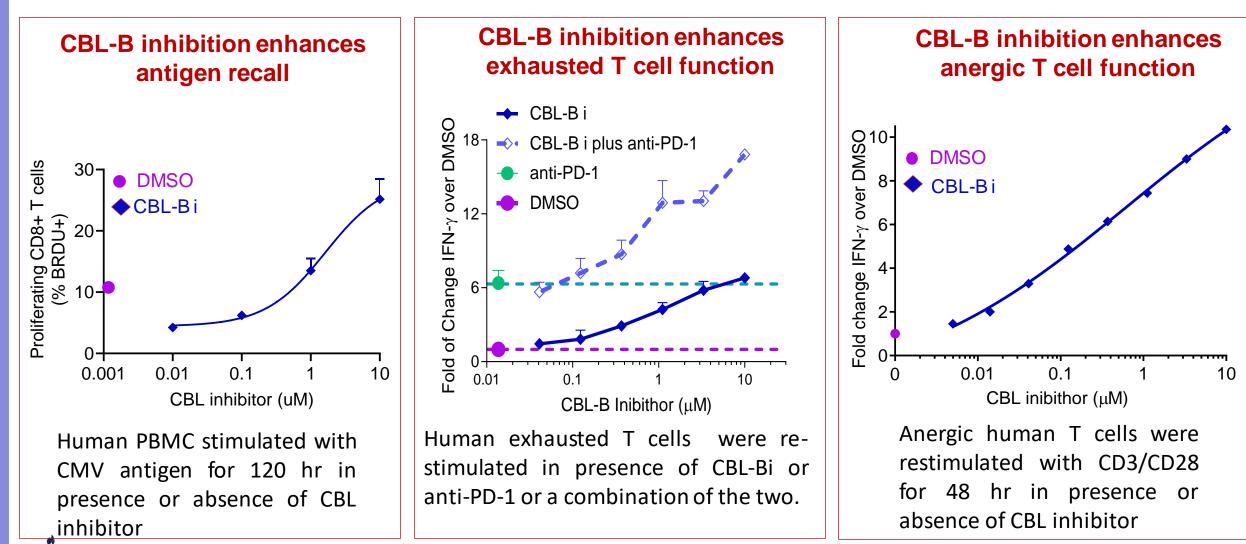
100

100

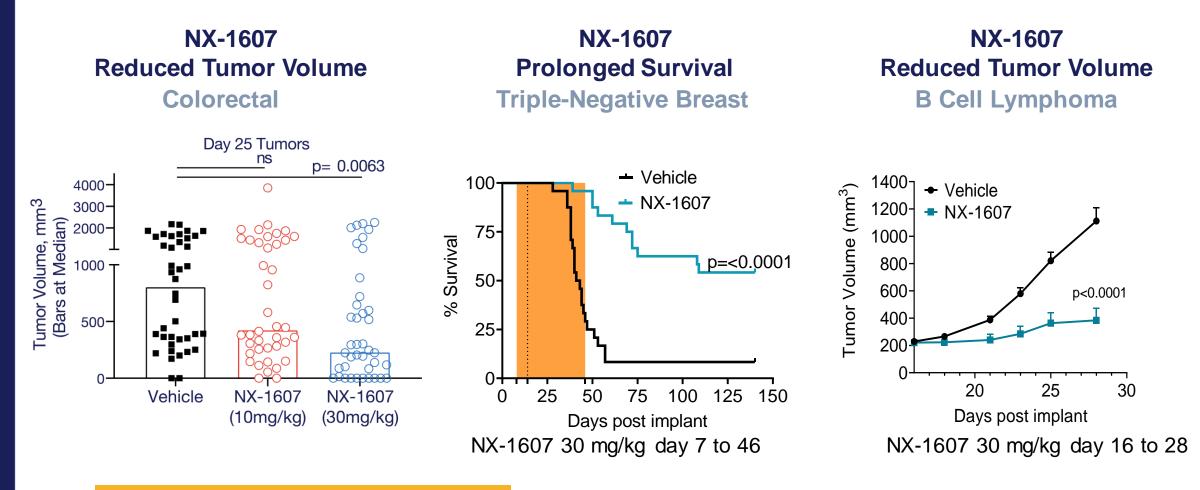
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CBL-B Inhibition Enhances T Cell Proliferation and Function

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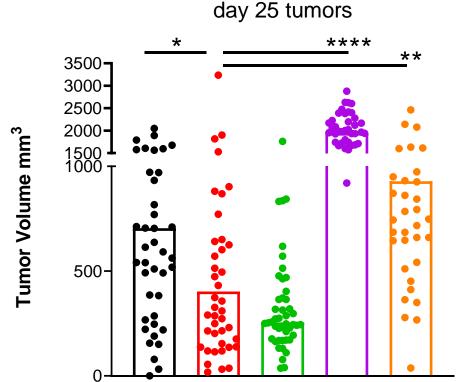


Single-Agent NX-1607 Induces Antitumor Response in Multiple Models



Shaded area indicates dosing period

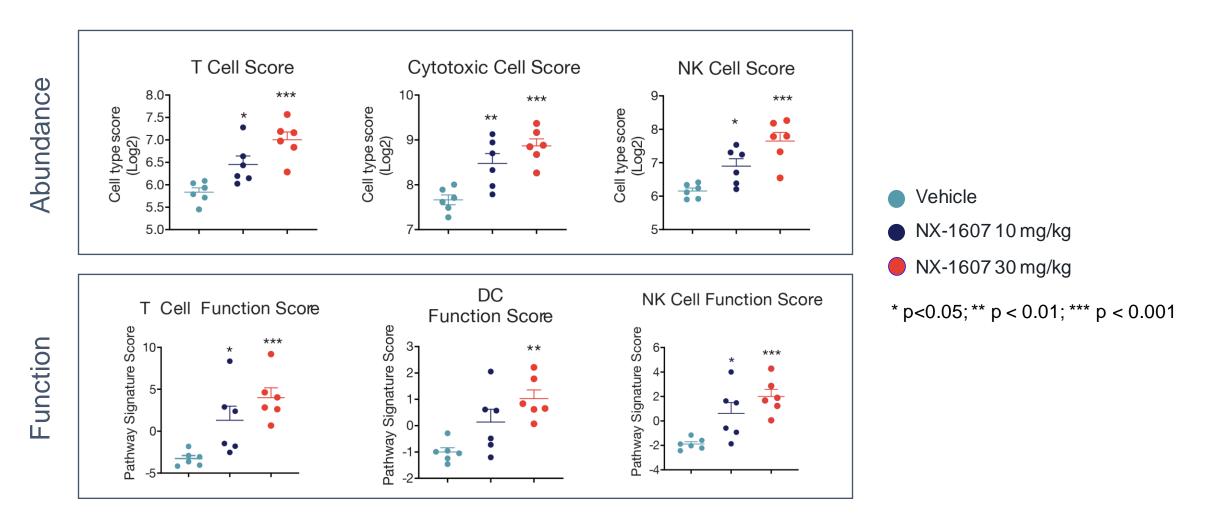
NX-1607 Antitumor Efficacy is Abrogated by CD8+ T or NK Cell Depletion



- Isotype Control + Vehicle
 Isotype Control + NX-1607
 anti-CD4 + NX-1607
 anti-CD8 + NX-1607
- anti-asialo-GM1 + NX-1607

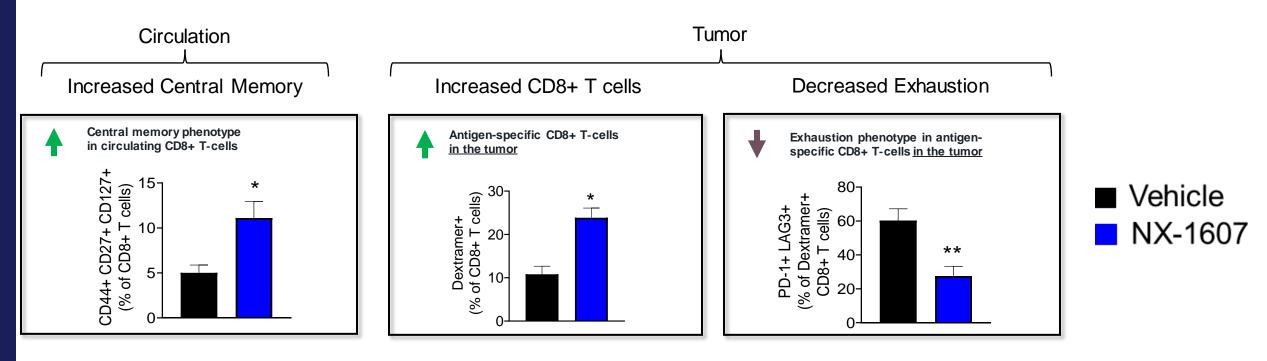
- Mice bearing CT26 tumors were treated from Day 9 to Day 25 with oral NX-1607 at 30 mg/kg in presence of depleting antibodies for CD4+ cells, CD8+ cells, or NK cells (anti-asialo-GM1). Tumor volume at Day 25 is indicated.
- CD8⁺ T cell or NK cell depletion abrogates NX-1607 activity.

NX-1607 Treatment Induces Dose Dependent T and NK Cell Intratumoral Infiltration and Enhanced Function



Tumor-bearing mice treated for 18 days with NX-1607 at 10 or 30 mg/kg. Tumor microenvironment profiled using NanoString technology.

NX-1607 Treatment Results in Immune Cell Phenotypic Changes, Both in the Tumor Microenvironment (TME) and in Peripheral Blood in Animal Models

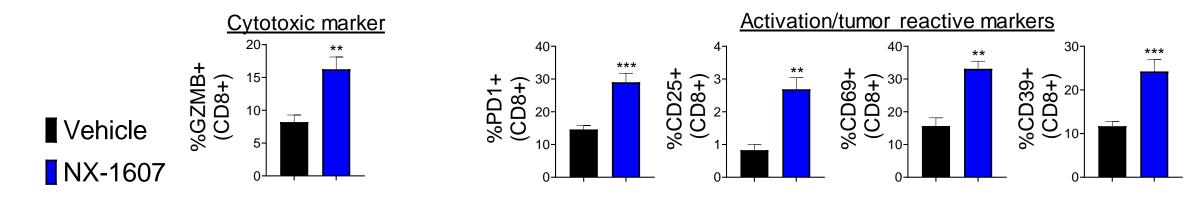


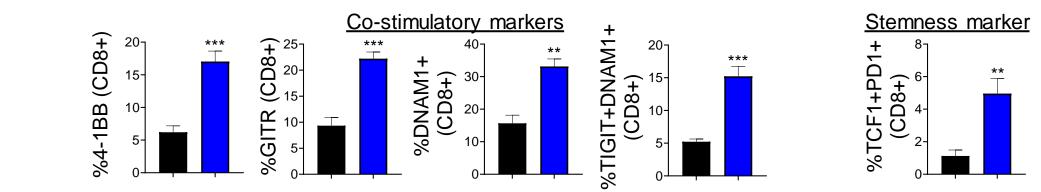
4T1 breast cancer model. ANOVA test with post-hoc Dunn's multiple comparisons test * p<0.05; **p<0.01



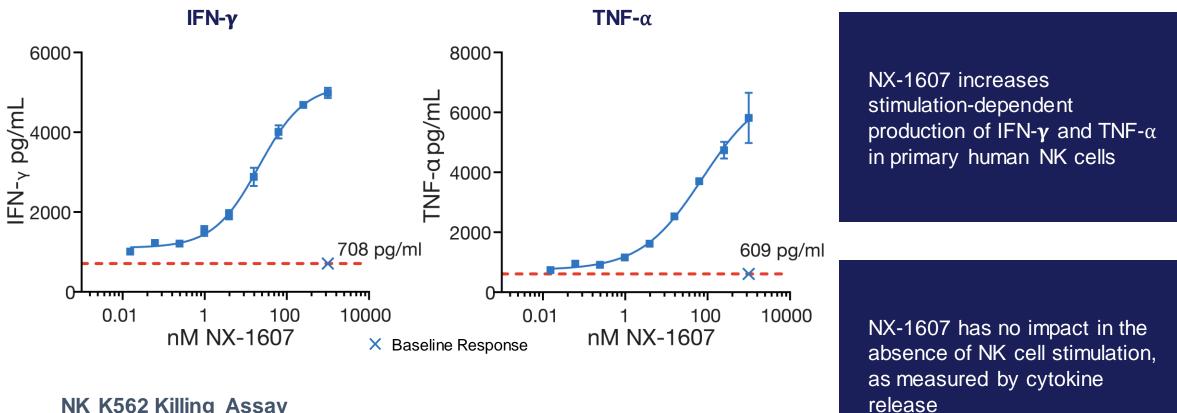
Response to NX-1607 is Associated with Tumor CD8+ T Cell Subsets Characterized by High Expression of Cytotoxic, Activation and Co-Stimulatory Markers

Tumor Infiltrating Lymphocyte phenotype:





NX-1607 Increases Secretion of Pro-Inflammatory Cytokines in Human NK cells



NK K562 Killing Assay

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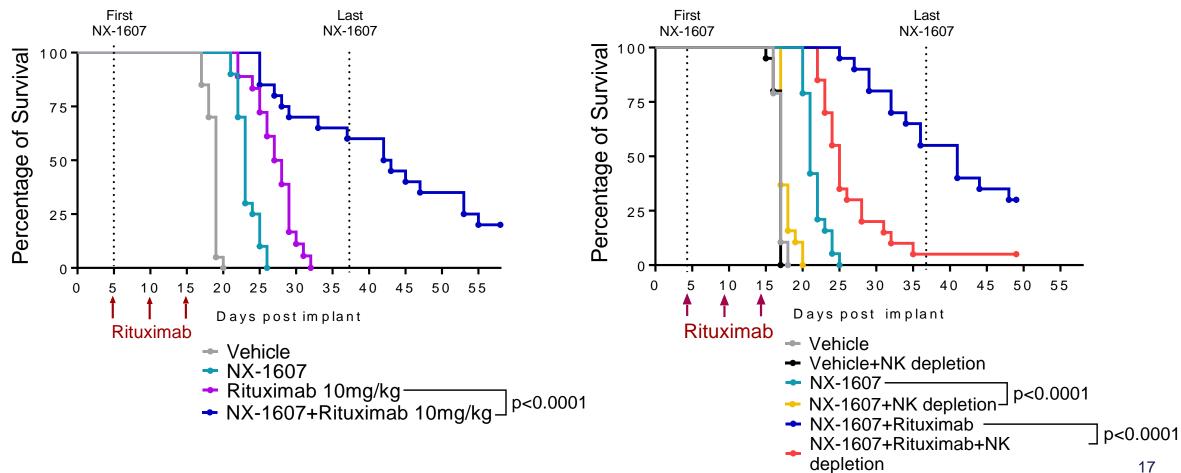
- 1 hour compound pre-treatment prior to addition of K562s target cells
- 6 hour NK/K562 coculture

Combination of NX-1607 and Rituximab Enhances Anti-tumor Activity in a Human NHL Animal Model

NX-1607 Strongly Potentiates Rituximab-Directed NK Cell ADCC Against Tumor Cells

NX-1607-mediated NK activation potentiates rituximab antitumor activity

NK depletion abrogates NX-1607 and NX-1607 + Rituximab antitumor activity

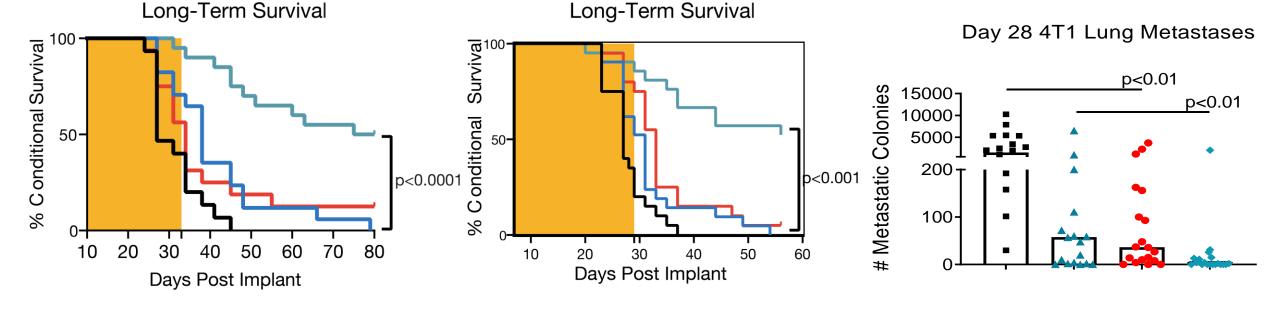


NX-1607 and Anti-PD-1 Synergize to Enhance Anti-tumor Effects and Survival of Mice in Multiple Tumor Models

Colorectal (CT26)

Colorectal (MC38)

Triple-Negative Breast (4T1)

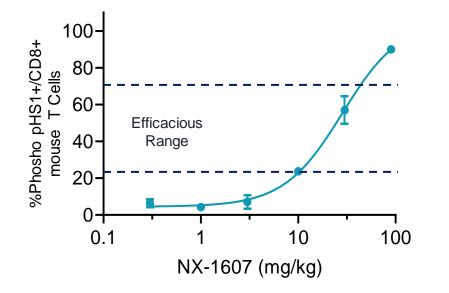


Vehicle * NX-1607 + anti-PD-1 NX-1607+anti-PD-1

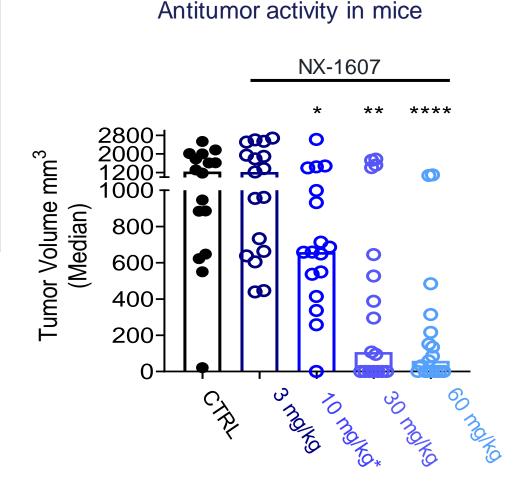
Shaded area indicates dosing period: NX-1607 (30 mg/kg, PO daily) and anti-PD-1 twice a week at 10 mg/kg dosing period

Dose Dependent Increases of CBL-B Proximal Biomarker Correlates with Antitumor Effects of NX-1607

Pharmacodynamic relationship in mice following NX-1607 dosing



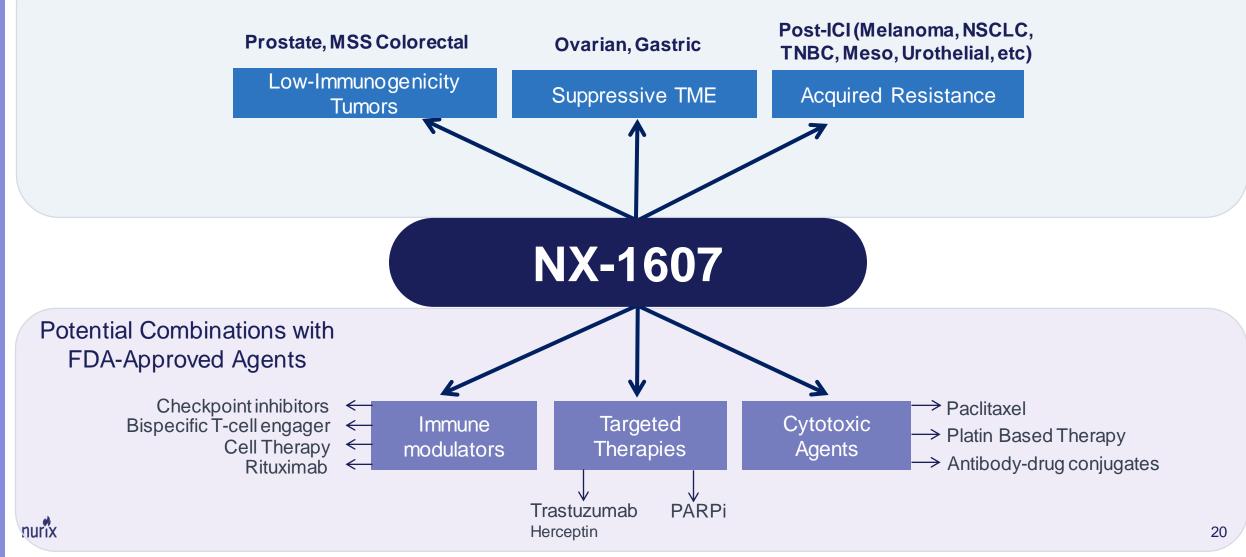
In vivo efficacy observed between 10-60 mpk which corresponds to ~20-60% pHS1+CD8+ T Cells



A20 - B cell lymphoma model

CBL-B Inhibition: Multiple Hypotheses to Be Tested in the Clinic

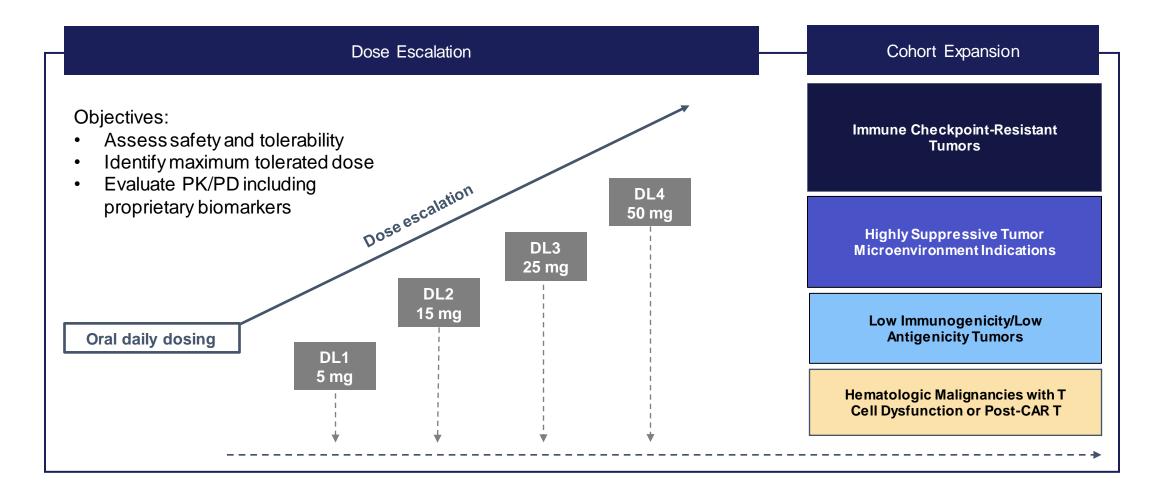
Single-Agent Monotherapy



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

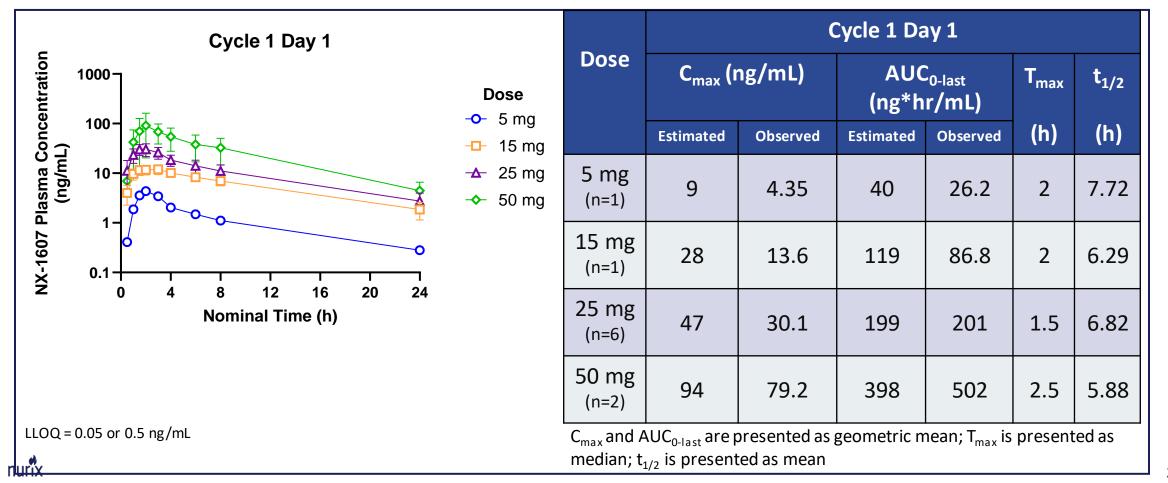
NX-1607-101: Phase 1 first-in-human clinical trial design

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

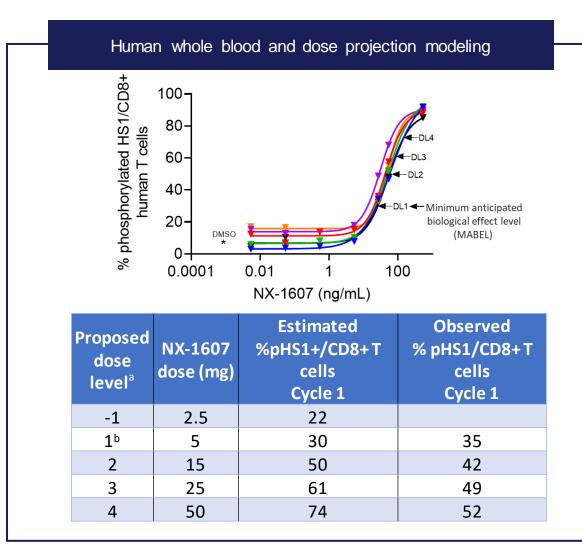


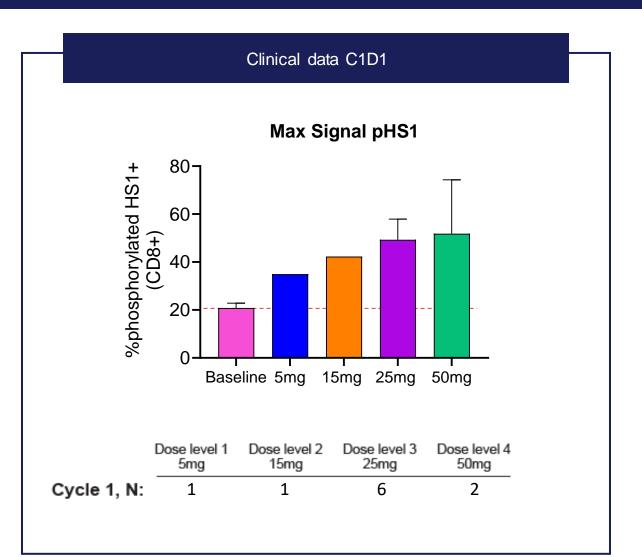
NX-1607-101 Interim PK Results Suggest Linear PK

• Preliminary PK data suggest NX-1607 has linear PK and a mean half-life of 6 to 8 hours at doses ranging from 5 to 50 mg, with little to no accumulation.



Interim Proximal PD Evaluation Demonstrates Dose-proportional Increases of pHS1 Consistent with Potent Anti-tumor Activity in Mouse Models





Summary and Conclusions

- The E3 ligase CBL-B acts as a major gate-keeper of immune signaling pathways, making it a powerful target for cancer immunotherapy.
- Nurix's CBL-B inhibitor, NX-1607, acts as an intra-molecular glue, locking CBL-B in an inactive conformation preventing the phosphorylation and activation of this E3 Ligase.
- Inhibition of CBL-B shows single agent anti-tumor activity and synergizes with anti-PD-1 to enhance antitumor effects and survival of mice in multiple tumor models.
- Tumors in NX-1607-treated mice displayed increased CD8+ T cell infiltration with enhanced cytotoxicity and stemness marker expression.
- A first-in-human phase 1 clinical trial was initiated for NX-1607. Early results show linear PK and evidence of proximal biomarkers increase

Thank You!