

Developing a Portfolio of CNS-Penetrant Degraders

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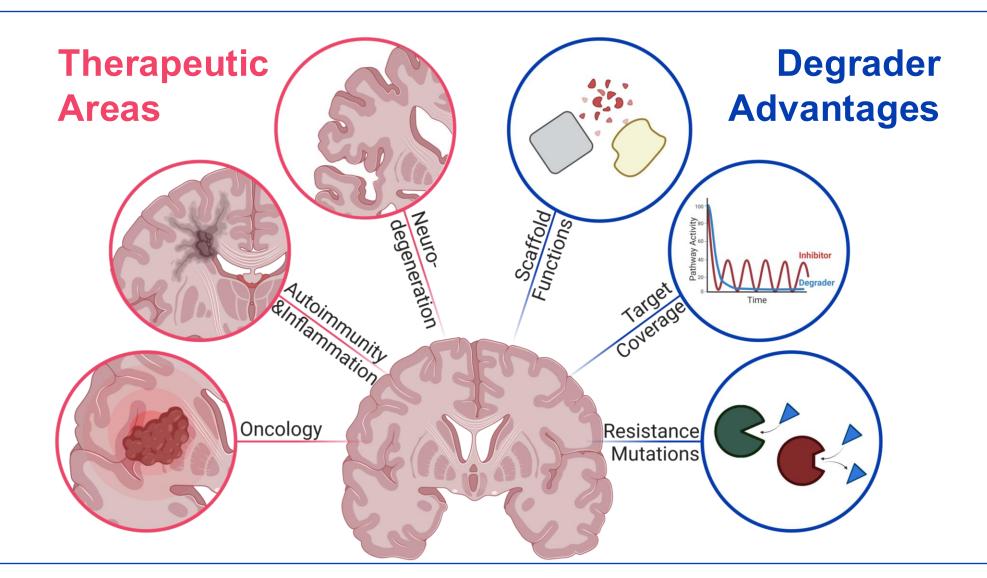
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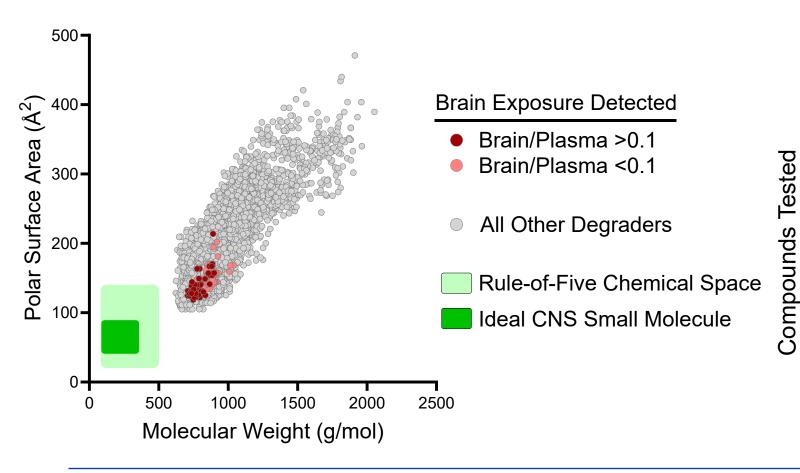
Why Create CNS-Penetrant Degraders?





Nurix Targeted Protein Degraders have Achieved Brain Exposure at Meaningful Frequencies Across Diverse Programs

Targeted protein degraders occupy chemical space far outside the parameter space of typical CNS small molecules

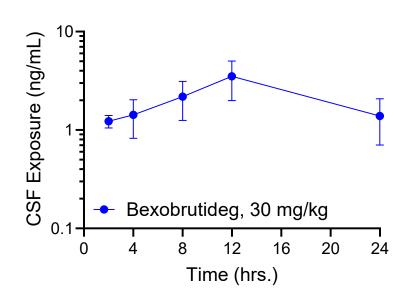


64% of compounds screened have achieved brain exposure

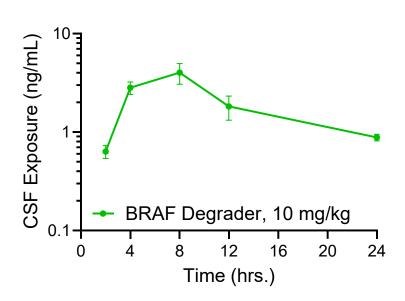
	Percent w/ Exposure	Highest Exposure (ng/g)
Program 1	80%	663
Program 2	49%	377
Program 3	63%	1280
Program 4	15%	1570
Program 5	60%	247
Program 6	50%	64
Program 7	100%	216

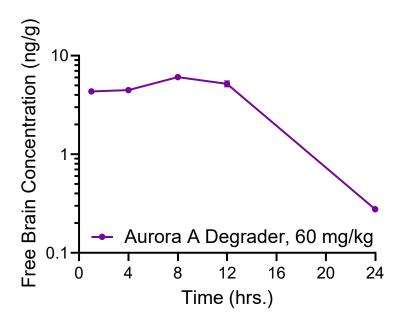


Kinetics of CNS Exposure Differ Between Degraders from Different Chemical Series



5





Nurix performs detailed characterization of CNS exposure to identify degrader pharmacokinetic profiles that best fit disease biology

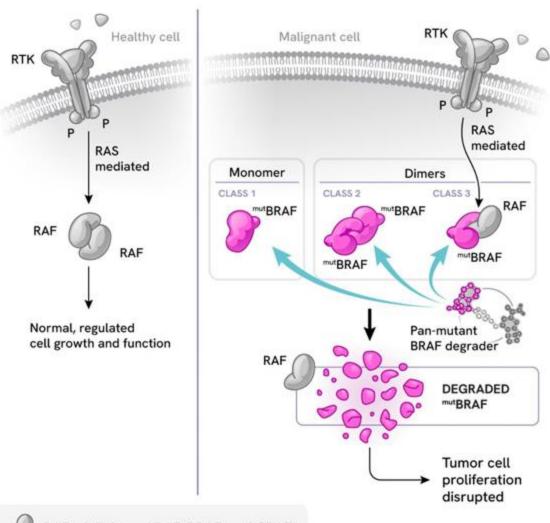


BRAF Mutations Activate the MAPK Pathway and Are Associated with Cancer

A crucial node in the MAPK oncogenic pathway

- Mutations in BRAF drive constitutive pathway activation and oncogenic transformation
- BRAF mutations are categorized into three classes:
 Class 1, Class 2, and Class 3
- Current approved BRAFi can only benefit patients with Class 1 BRAF mutations
- ~30-40% of patients on BRAFi present with CNS metastasis;
 BRAF mutations also drive primary CNS tumors (e.g. gliomas)

Nurix has designed a brain-penetrant, pan-mutant BRAF degrader that addresses these liabilities

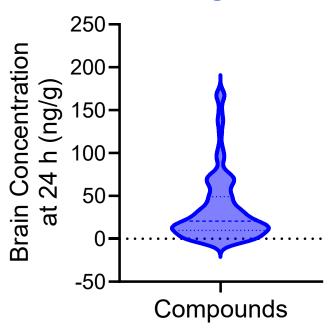






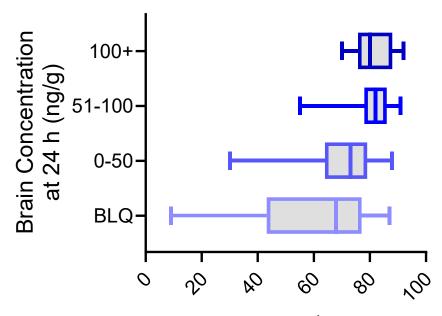
Nurix Has Optimized BRAF Degraders for High CNS Exposure and Deep BRAF Degradation in Tumors

Brain Exposure of BRAF Degraders



The majority of *in vivo* screened compounds have measurable brain exposure

Higher Brain Exposure Correlates with Peripheral Target Coverage



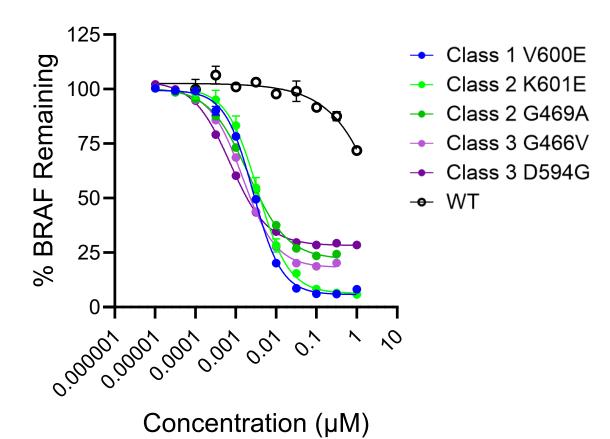
Peripheral BRAF^{mut} Degradation

Compounds that induce potent mutant BRAF degradation in subcutaneous tumors also exhibit high brain exposure

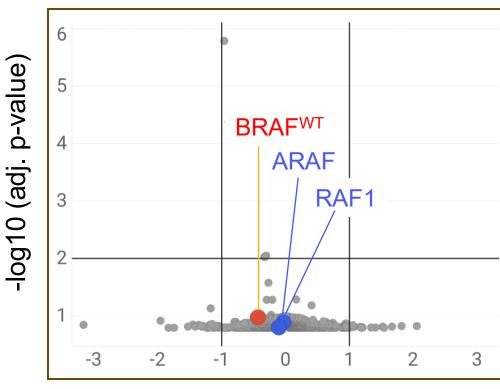


NRX-0305 Is a Potent and Selective Pan-Mutant BRAF Degrader

Pan-Mutant BRAF Degradation



Global Proteomics in IMR-90



log2 (Fold Change)

Assessment at 50x BRAF V600E DC50, calculated in A375 cells

24 hrs drug treatment in IMR-90 cells, >6400 unique protein IDs in experiment Differential expression > 2-fold change / DMSO & adjusted p-value < 0.01

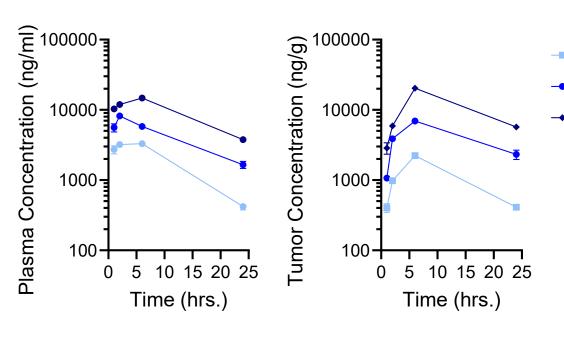
NRX-0305 Exhibits Dose-Proportional Pharmacokinetics and Pharmacodynamics Following a Single Oral Dose *In Vivo*

NRX-0305, 10mg/kg

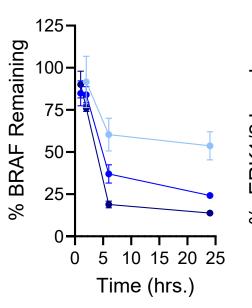
NRX-0305, 30mg/kg

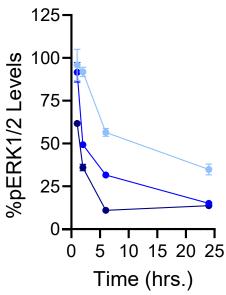
NRX-0305, 90mg/kg

Plasma and Tumor PK



Tumor PD

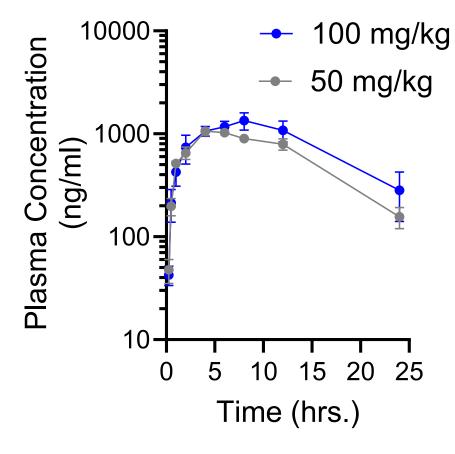






NRX-0305 Is CNS Penetrant with Favorable Cross-Species Bioavailability

Rat Plasma PK and Brain/Plasma Ratios



NRX-0305	B/P at C _{min}
50 mg/kg	0.22
100 mg/kg	0.62

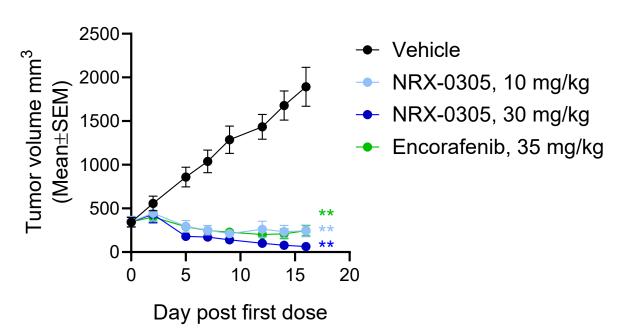
Bioavailability

NRX-0305	%F
Mouse	71
Rat	47
Dog	28
Cyno	28

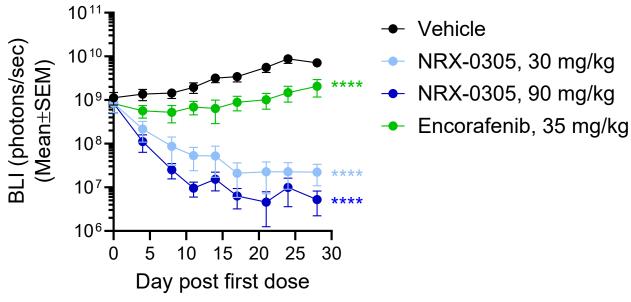


NRX-0305 is Efficacious in Subcutaneous and Intracranial Tumor Models

Subcutaneous CDX Model

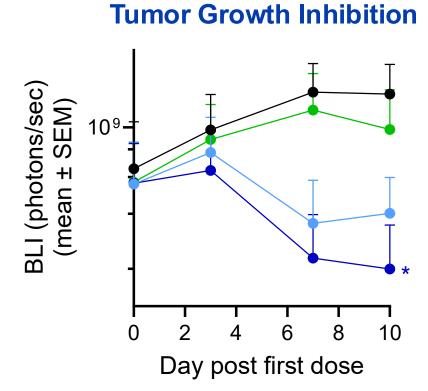


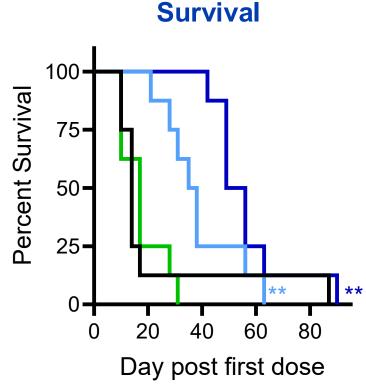
Intracranial CDX Model

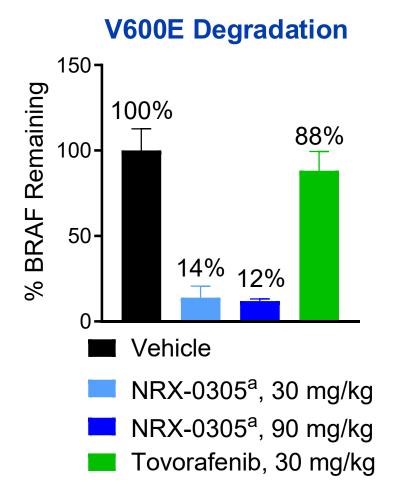




NRX-0305 is Efficacious in Intracranial V600E Glioma Model

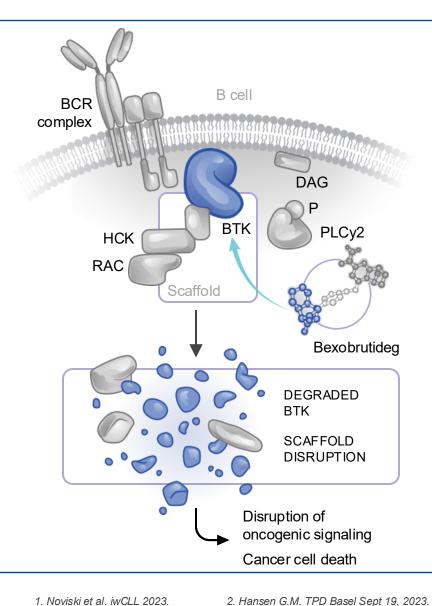








BTK Degradation as a Strategy for the Treatment of B Cell Malignancies



5. Lewis et al. ICML 2025.

- The BCR signaling pathway mediated by BTK is a key driver in oncogenesis and a validated therapeutic target in multiple lymphoid malignancies
- BTK degraders:
 - Can overcome treatment-emergent BTK inhibitor resistance mutations^{1,2}
 - Address BTK scaffolding function the transduction of BCR signal downstream from BTK in the absence of BTK enzymatic activity³
 - Demonstrate emerging activity in various B-cell malignancies including CLL and Waldenstrom's Macroglobulinemia^{4,5}



CLL and NHL with CNS Involvement Remain an Area of High Unmet Need

CNS involvement of B cell malignancies spans various conditions including:

Primary CNS Lymphoma (PCNSL)

Comprises ~4% of all primary CNS tumors and 4-6% of all extranodal lymphomas¹

Secondary CNS Lymphoma (SCNSL)

Affects ~5% of patients with DLBCL²

CNS involvement with CLL

Rare complication of CLL with poor prognosis in patients with clinically significant disease³

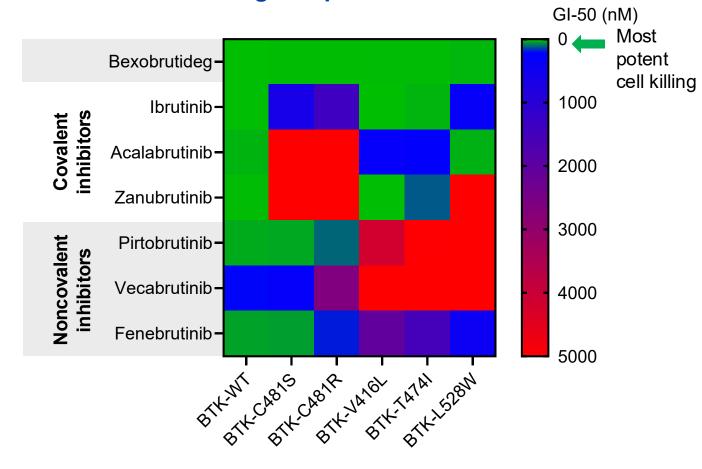
- First-line standard of care typically involves high-dose methotrexate-based chemotherapy regimens with limited option in the relapse / refractory setting
- Investigational drugs (BTKi, CAR-T, immune check point inhibitors) have been used in the relapse/refractory setting with some limitation, including short duration of response and challenging safety profile
- Point mutations in BTK can confer resistance to BTK inhibitors



Bexobrutideg Degrades Wild-Type and Mutated BTK with Superior Coverage Compared to All BTK Inhibitors

- All inhibitors have resistance mutation liabilities
- Bexobrutideg displays potent cell killing in the context of key resistance mutations
- We have shown that BTK degradation translates into clinical responses across key mutation classes

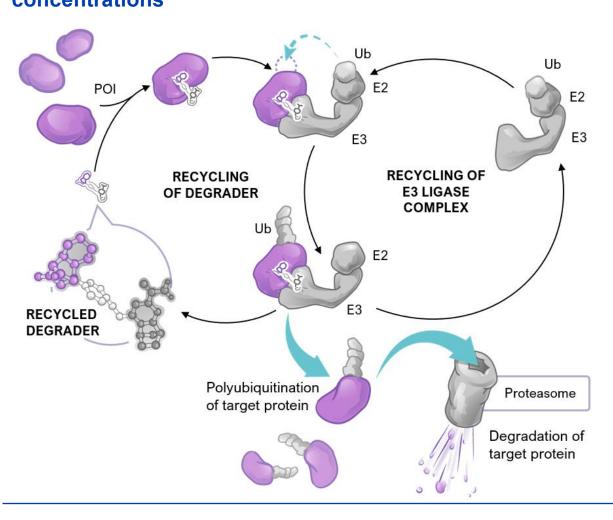
Bexobrutideg shows superior mutational coverage and cell killing compared to BTK inhibitors

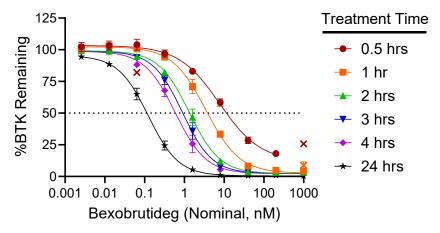


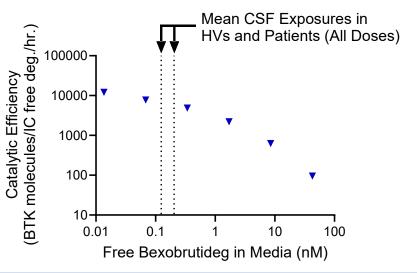


Degraders Are PK Advantaged Due to Their Catalytic Mechanism of Action

One molecule of bexobrutideg degrades thousands of BTK proteins per hour at clinically-relevant concentrations



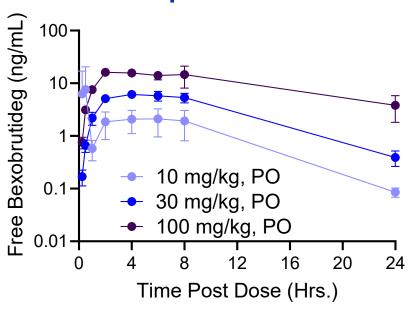




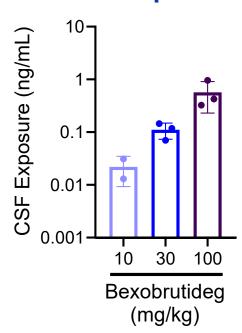


Bexobrutideg Degrades BTK in Rat Brain Microglia, Achieving >90% BTK Degradation After a Single Oral Dose

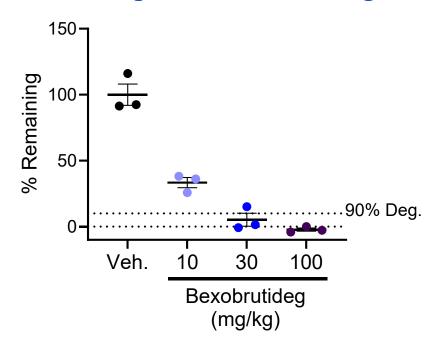
Free Exposure in Plasma



CSF Exposure



BTK Degradation in Microglia

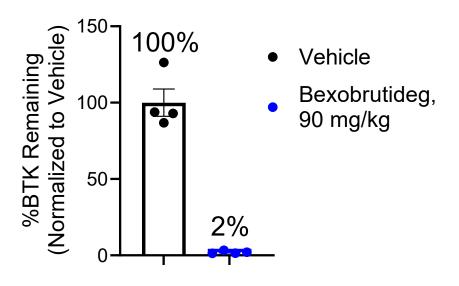


Bexobrutideg demonstrates dose-dependent exposure in CSF and BTK degradation in the brain

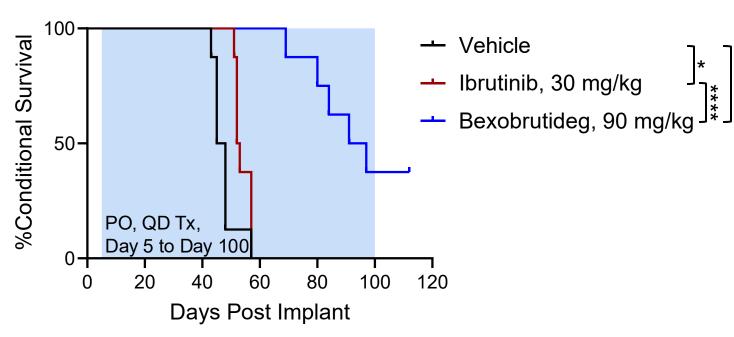


Daily Oral Administration of Bexobrutideg to Mice with Intracranial DLBCL PDX Cells Drives Potent BTK Degradation and Prolongs Survival

BTK Degradation in Tumors



Long-Term Survival



Bexobrutideg significantly prolongs survival compared to ibrutinib in mice with intracranial PDX tumors



Case Study: Patient with CLL and CNS Involvement

Relevant Medical History

- Anxiety: 2015-ongoing

- Depression: 2015-ongoing

- Previous Hep B infection: 2015 (on anti-viral prophylaxis, no evidence of recurrent disease)

- Face numbness: Unknown-ongoing

Constipation: 21Jun23-ongoing

Prior Systemic Therapies

Idelalisib: 2015-2018

Venetoclax+Rituximab: 2018-2022

Acalabrutinib: Oct 2022-June 2023

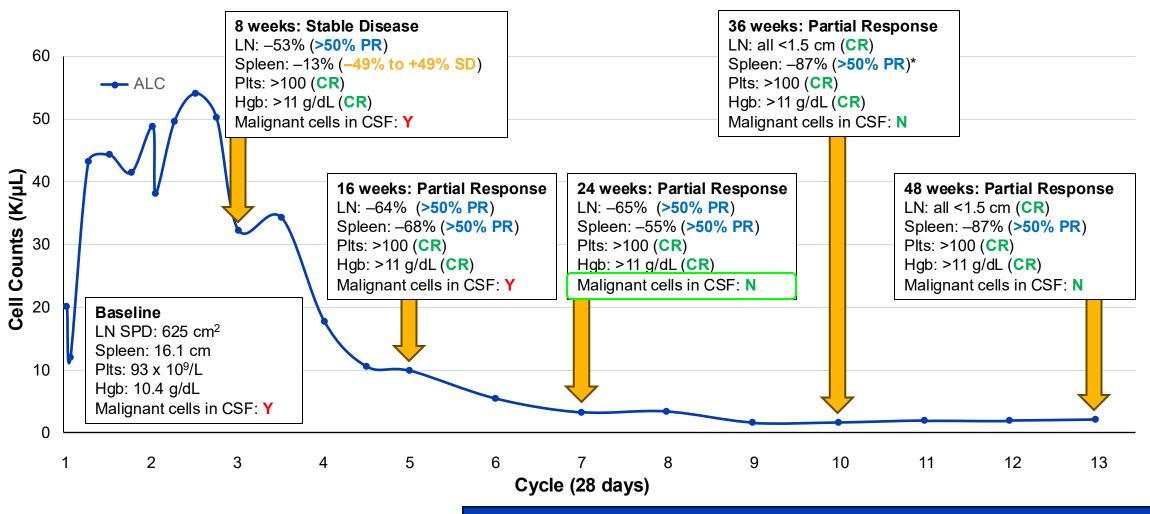
Age, Race, M/F	59, White M
Diagnosis	CLL, High Risk, Stage C
Initial Diagnosis	May 2015
Recent Progressions	03 Oct 2022 (with CNS relapse) 25 Jun 2023
Dose	100 mg -> 300 mg
C1D1	27-Jun-23
Status	On Treatment

Prior Radiotherapy

None



Patient with CLL with CNS Involvement Treated with Bexobrutideg Showed Deepening Response over Time Approaching Complete Response



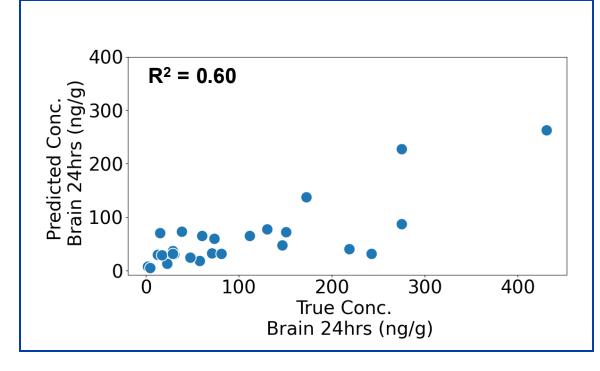
Dose escalated to 600 mg, patient remains on study as of October 14, 2025



The Rules for Designing Brain-Penetrant Degraders Are Still Undefined

- Targeted protein degraders have the potential to address CNS malignancies by providing superior target coverage, addressing scaffolding functions, and targeting inhibitor-resistant mutants
- By optimizing for degrader potency and leveraging the catalytic MOA, degraders can achieve efficacy in the CNS at concentrations lower than required for inhibitors
- Traditional small molecule metrics are inadequate for bifunctional degrader optimization, necessitating efficient screening approaches and potentially machine learning models to aid identification of brain-penetrant degraders

Machine learning models may accelerate discovery of brain-penetrant degraders





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