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BridgeBio Oncology

Fourth quarter 2022

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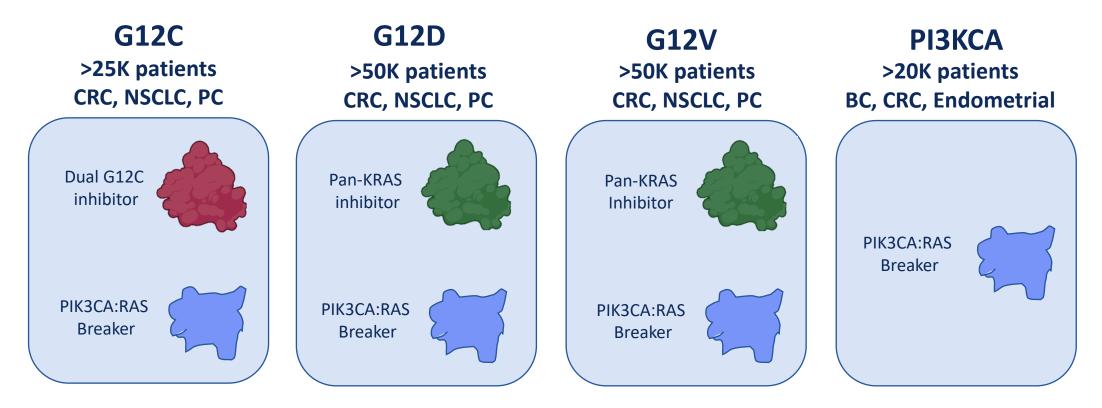
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BridgeBio Executive Summary

- BridgeBio Oncology is advancing 3 lead programs targeting the two most prominent oncogenes in human cancer (KRAS & PIK3CA): 1)
 Dual KRAS^{G12C}, 2) PI3Kα:RAS breaker, and 3) pan-KRAS.
- **Dual KRAS^{G12C}** inhibitor program has selected a Development Candidate (BBO-8520).
- BBO-8520 is a highly potent dual inhibitor of KRAS^{G12C} with 30-300x higher potency than sotorasib *in vitro* and *in vivo* including differentiated activity in a PDX model.
- Complete inhibition of the active and most prominent KRAS^{G12C} form should lead to deeper and longer lasting responses in patients.
- BBO-8520's IND-filling is projected for 2023.
- <u>PI3Kα:RAS breaker</u> is highly differentiated in that it is a) tumor selective, b) targets both mutant and wild-type PIK3CA, and c) does not induce hyperglycemia
- Our compounds demonstrate robust efficacy in multiple mouse xenograft models including those with HER2/HER3 dependency, KRAS mutation and PIK3CA helical mutation
- Our latest molecules produce dose-responsive pharmacodynamic data and display promising drug-like properties.
- Biomarker data shows that Her2/Her3 dependency, PIK3CA helical mutations and KRAS^{G12X} mutations may be sensitive tumor types.
- Development Candidate selection in 2023, and IND-filling in 2024
- pan-KRAS program targets KRAS^{G12D} and KRAS^{G12V} mutations present in a large percentage of colorectal, pancreatic and NSCLC tumors.
- The Team has achieved *in vivo* target engagement and has identified leads with promising oral bioavailability.
- The Team projects Development Candidate selection in the 2023.

BBIO pipeline attacks Ras mutant tumors from multiple angles

BBIO oncology programs address the 2 most mutated oncogenes in human cancer and potentially enable tolerable and simultaneous inhibition of the MAPK and PI3K signaling pathways



Novel First-In-Class PI3K α breaker has the potential to address PI3KCA helical mutations, half of KRAS^{G12X} mutations and nearly all HER family driven cancers

We have a world class oncology team and strategic partners driving forward our targeted pipeline

NATIONAL

INSTITUTE

CANCER



Frank McCormick Chairman of Oncology







Richard Scheller Chairman of R&D Genentech







Pedro Beltran SVP, Oncology AMGEN UNITY



- Partnership with the National RAS Initiative, including 60 of the world's foremost academic **RAS researchers**
- Cutting edge RAS structural biology expertise





- Home to Sierra: the world's 3rd fastest computing system
- Enables multi-microsecond molecular dynamics simulations of protein complexes, and highly efficient in silico docking simulations

BridgeBio is progressing multiple approaches against KRAS

- Dual KRAS^{G12C} inhibitor program has selected a Development Candidate (BBO-8520) with projected INDfiling 2023
 - Inhibits both KRASG12C GTP (active) and GDP (inactive) states; directly binds KRAS
 - Differentiates from KRASG12C GDP (inactive)-only inhibitors
- **PI3Kα:RAS breaker** is highly differentiated in that it is a) tumor selective, b) targets both mutant and wildtype PIK3CA, and c) does not induce hyperglycemia
- Projected Development Candidate selection in 2023
 - Blocks specific interaction between RAS and PI3Ka
 - RAS driver agnostic
 - Blocks PI3Ka / AKT effector signaling
- pan-KRAS program targets multiple KRAS mutants including KRAS^{G12D} and KRAS^{G12V}
- Projected Development Candidate selection in the 2023
 - Potent pan-KRAS inhibitor
 - Directly binds KRAS

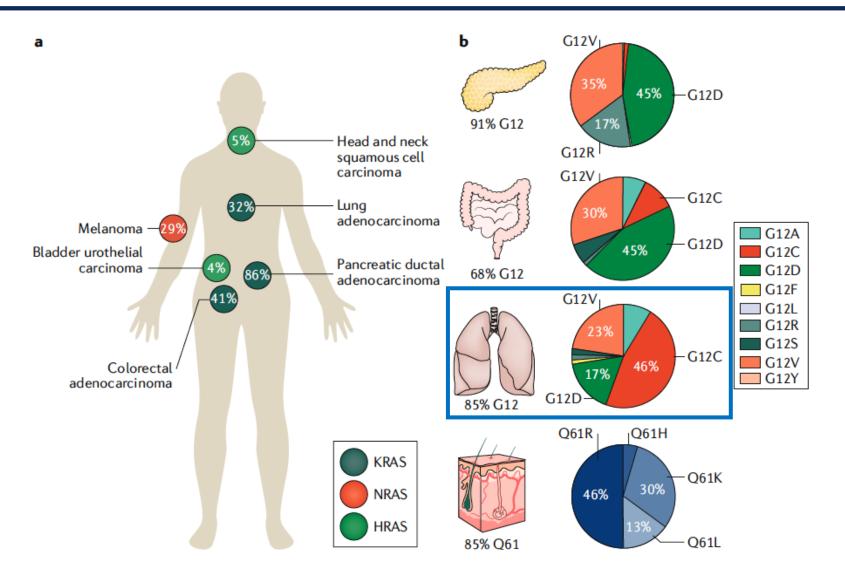
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BBO-8520: A KRAS^{G12C} Dual Inhibitor

PI3K α :RAS Breaker

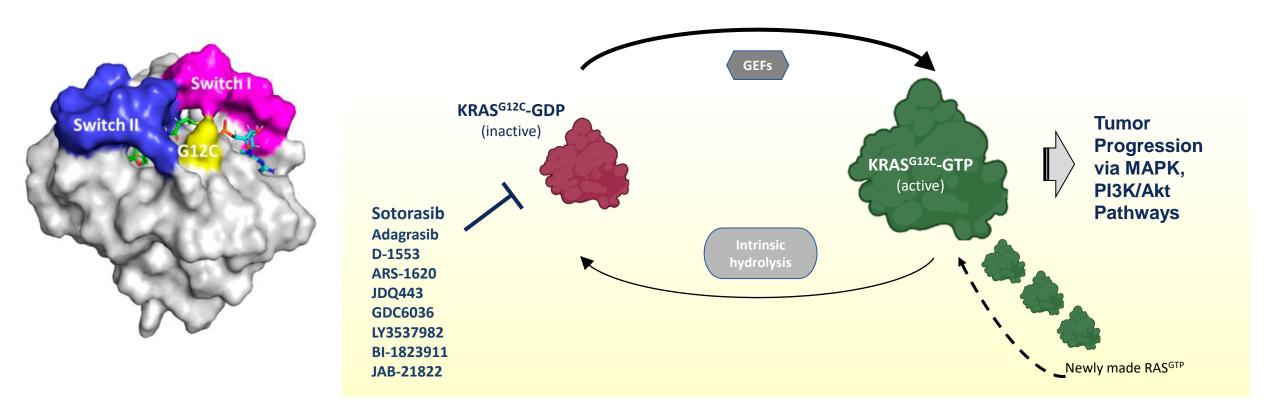
Pan-KRAS program

Mutant KRAS is the most common oncogene in cancer – KRAS^{G12C}



- Lung cancer is the second most common cancer in the US with greater than 235K new cases and 130K deaths a year
- KRAS^{G12C} mutant found in ~15% of all NSCLC (~35K pts/yr)
- Other common human cancers with KRAS mutations are colorectal and pancreatic adenocarcinomas with a combined 168K new cases a year in the US
- KRAS^{G12D/G12V} mutant found in 70% of pancreatic cancers (~43K pts/yr) and 25% of colorectal cancers (~53K pts/yr)

KRAS^{G12C}-GDP inhibitors do not directly inhibit the active form of KRAS^{G12C} allowing for the emergence of resistance



Shokat's discovery led to an explosion of KRAS^{G12C}-GDP inhibitors; led by sotorasib, these will change the treatment paradigm for people with KRAS^{G12C}-driven cancers

Efficacy of KRAS^{G12C}-GDP inhibitors in the clinic is clearly suboptimal when compared to other driver-targeted therapies in the pathway

KRAS^{G12C}-GDP inhibitors

RTK targeted agents

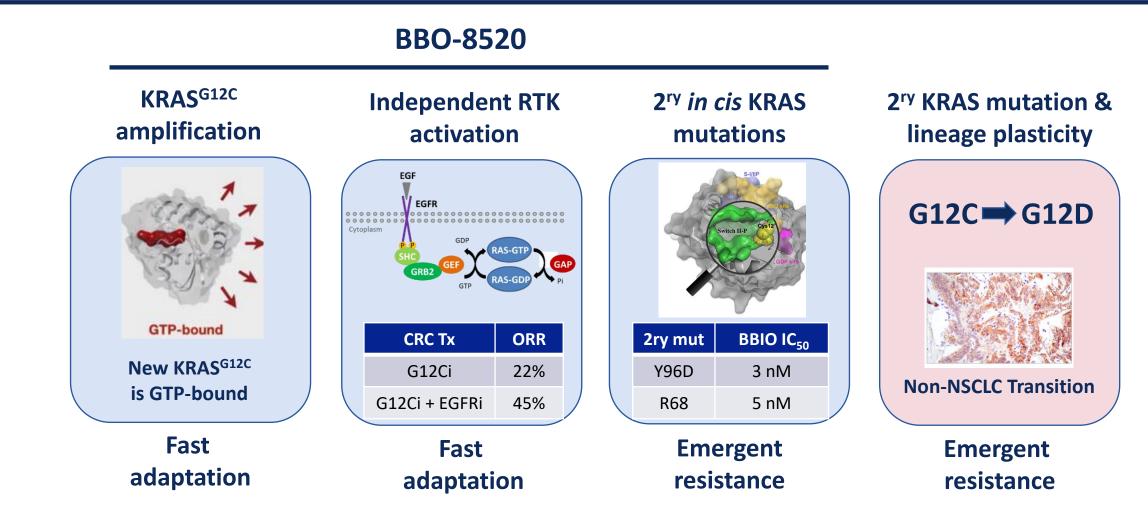
	Sotorasib	Adagrasib	GDC-6036	Selpercatinib	Alectinib	Osimertinib	Capmatinib
	2L+ KRAS G12C NSCLC			2L+ RET Fusion+ NSCLC	1L ALK+ NSCLC	1L EGFR mutant NSCLC	1L cMET exon14 NSCLC
ORR	41%	43%	46%	64%	79%	77%	68%
mPFS (mo.)	6.3	6.5	tbd	tbd	25.7	18.9	12.4

Phase 3 CODEBREAK 200 – PFS 5.6 months; ORR 28%

ORR, objective response rate; PFS, progression-free survival

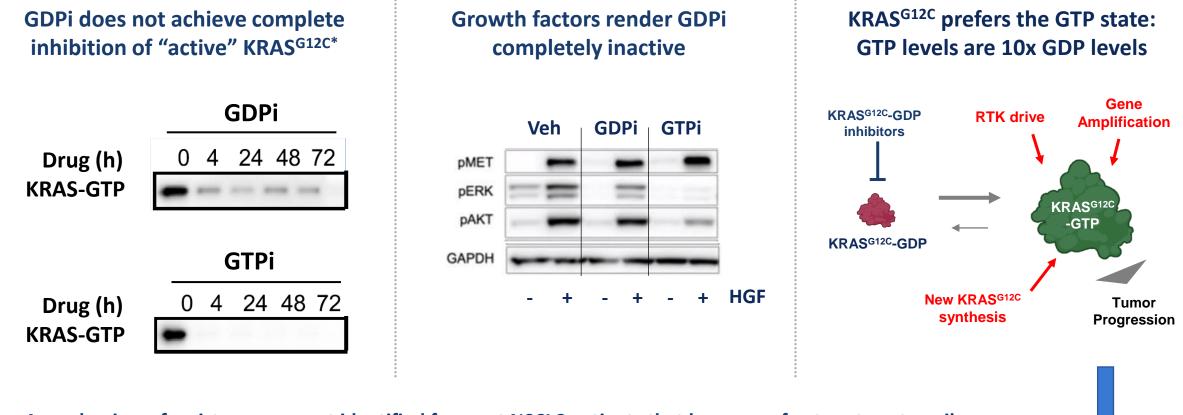
Sources: Sotorasib data from registrational Ph2 CODEBREAK 100 & Ph3 CODEBREAK 200 results presented at 2022 EMSO meeting; Adagrasib data from KRYSTAL-1 results presented at 2022 ASCO Meeting; GDC-6036 data from 2022 WCLC meeting; Analog data taken from product labels

Alterations associated with clinical resistance to KRAS^{G12C}-GDP inhibitors



BBIO's dual KRAS^{G12C} inhibitor can address 3 of the 4 most prevalent mechanisms of resistance to current clinical KRAS^{G12C} inactive inhibitors

A compound that inhibits both GTP (active) and GDP (inactive) forms of KRAS^{G12C} will be superior to one that only inhibits the latter



- A mechanism of resistance was not identified for most NSCLC patients that became refractory to sotorasib**
- Among patients with identified resistance mechanisms to sotorasib, the majority were driven by RTK re-activation**

We believe efficacy of targeting of KRAS^{G12C} can be improved by targeting the oncogenic active GTP form

BBO-8520 completely modifies both GTP (active) and GDP (inactive) forms of KRAS^{G12C} and is exceptionally potent

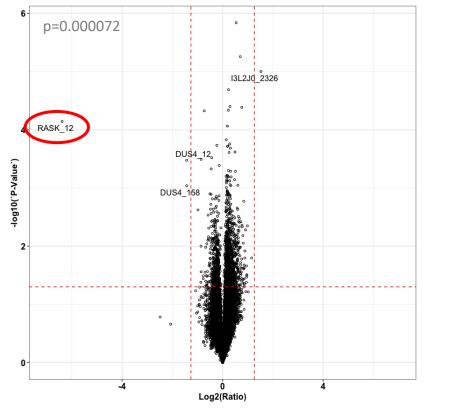
			bridgebio BBO-8520	AMGEN Sotorasib	MIRATI THERAPPEUTICS Adagrasib	Roche GDC-6036
% modified	KRAS ^{G12C} GTP (active)	15'	100	0	0	0
		60'	100	0	0	0
	KRAS ^{G12C} GDP (inactive)	15'	91	80	73	77
		60'	100	82	84	84
KRAS ^{G12C} : RAF1 Effector Binding IC ₅₀ (nM)		33	>100,000	20,000	4,200	
H358 pERK IC ₅₀ @ 30' (nM)			4	50	310	8
H358 kinact/Ki (M*s)-1			43,000	776	1064	27,000

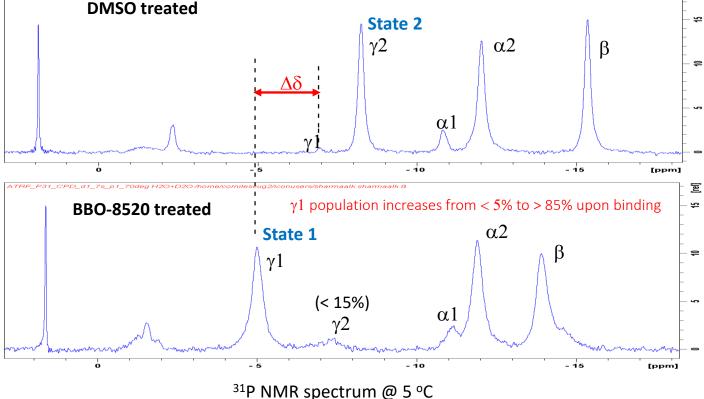
- > High degree of protein modification supports high affinity binding to GTP state
- Potent inhibition of effector binding and oncogenic signaling
- Superior kinact/Ki

Cysteine proteome selectivity and mechanism of action

Global cysteine proteomics shows high degree of selectivity for G12C

³¹P NMR peak shifts suggest that BBO-8520 stabilizes State 1 of active GTPbound KRAS, which disrupts effector protein binding

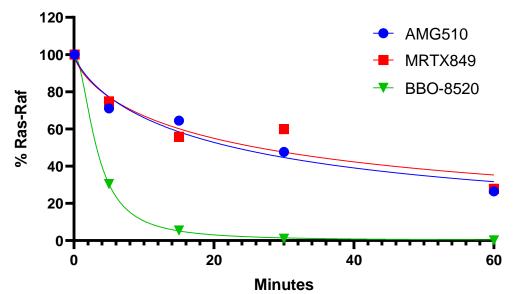




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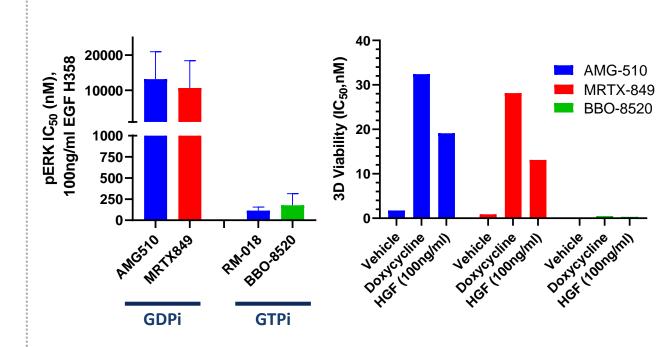
Targeting KRAS^{G12C}-GTP activity allows for rapid signal inhibition and overcomes RTK drive

Rapid and complete inhibition of KRAS^{G12C}-GTP



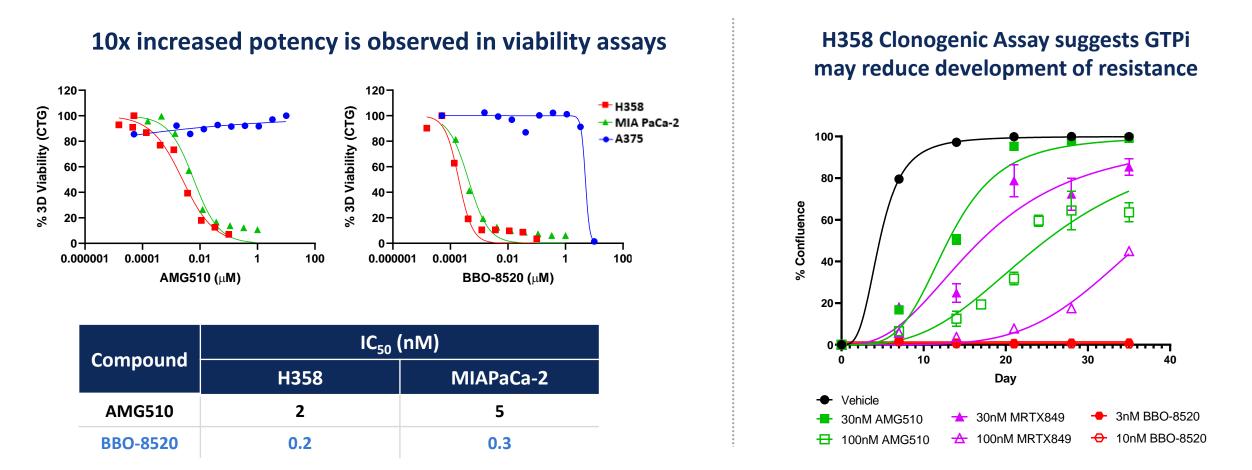
Compound	MALDI-TOF% GTP, 5min	Time (min) to IC ₅₀	% of AMG510 Time to IC ₅₀
AMG510	0	22	100
MRTX849	0	26	118
BBO-8520	94	3.0	14

GFs abundantly present in human tissues render GDP inhibitors inactive



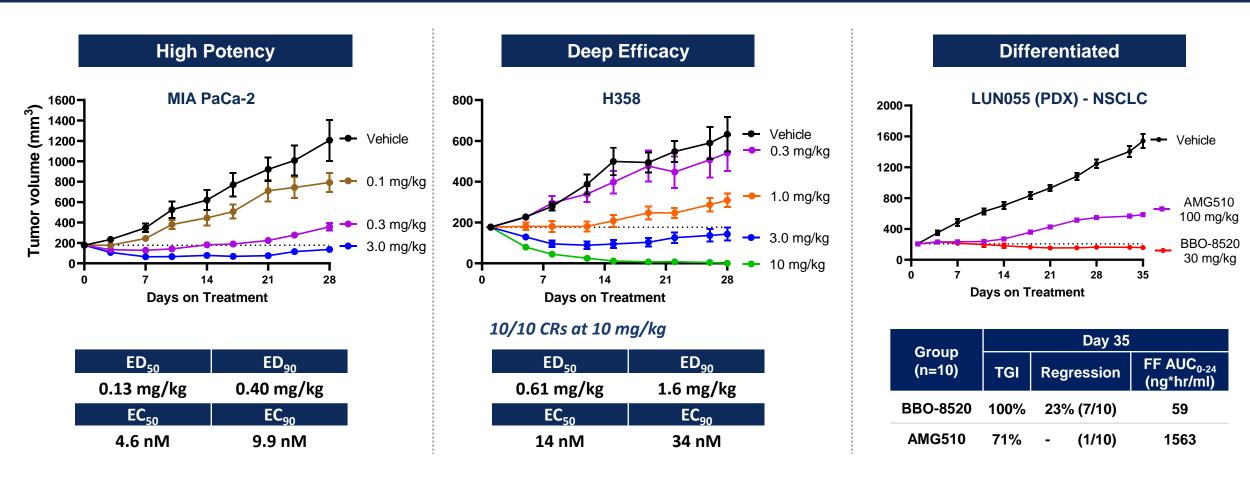
15 **b**

Cellular data support hypothesis that targeting the GTP form yields greater potency and deeper responses



BBO-8520 retains single-digit nM activity against reported GDP-inhibitor active-site mutants, including G12C/R68S, G12C/Y96D, G12C/G13D, G12C/Q61H, and G12C/A59G

BBO-8520 exhibits strong efficacy in KRAS^{G12C} models



BBO-8520 is efficacious in cell line and PDX models with high potency, deep efficacy, and differentiated activity

BBO-8520: G12C Dual Inhibitor Development Candidate

- BBO-8520 is a potential "first-in-class" direct KRAS^{G12C} dual inhibitor
 - Completely modifies both GTP (active) and GDP (inactive) forms of KRAS^{G12C}
 - Exceptionally potent and selective with superior kinact/Ki
 - Binding stabilizes GTP-bound KRAS^{G12C} in state 1 which cannot bind effectors
 - Overcomes RTK drive
 - Strong efficacy in KRAS^{G12C} models
- IND projected 2023
- Therapeutic opportunity in KRAS^{G12C} mutant NSCLC, CRC and other GI tumors in both GDP-KRAS^{G12C} inhibitor naïve and experienced patients

Agenda

BBO-8520: A KRASG12C Dual Inhibitor

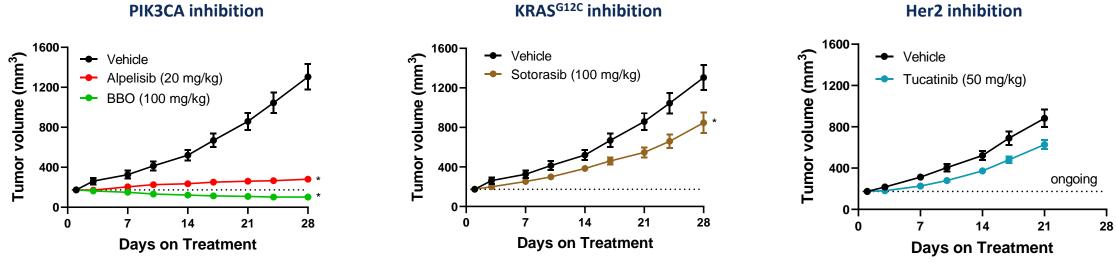
PI3Kα:RAS Breaker

Pan-KRAS program

PI3Kα:RAS Breaker is a novel, potent and differentiated therapeutic approach that can deliver efficacy in multiple common tumor genotypes as monotherapy or in combination

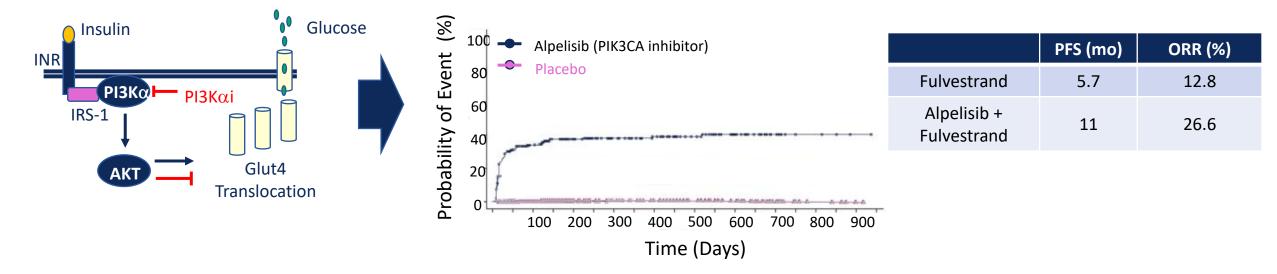
- First-in-class molecular mechanism targeting the second most mutated oncogene in human cancer
- Molecular mechanism provides tumor selectivity and prevents well-known target liability (hyperglycemia)
- Proven activity in common tumor genotypes (KRAS^{G12x}, PIK3CA helical and HER2/HER3)
- Differentiated activity from Her2 and KRAS approved inhibitors (tucatinib, sotorasib, etc)

KYSE-410 CDX esophageal carcinoma - HER2^{amp} KRAS^{G12C}



Tucatinib is a HER2 inhibitor, sotorasib is a KRAS-G12C inhibitor, alpelisib is a PI3Kα inhibitor. All groups dosed PO, QD, *p<0.05 RM ANOVA vs vehicle

Inhibiting the 2nd most mutated oncogene (PIK3CA) in human cancer has been limited by side effects of glucose metabolism



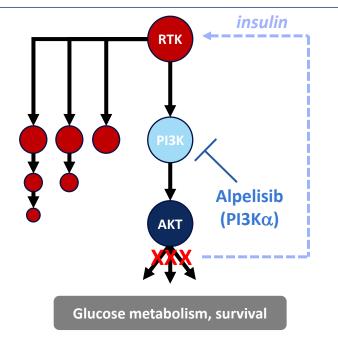
Solar-1 study – Hyperglycemia & Efficacy*

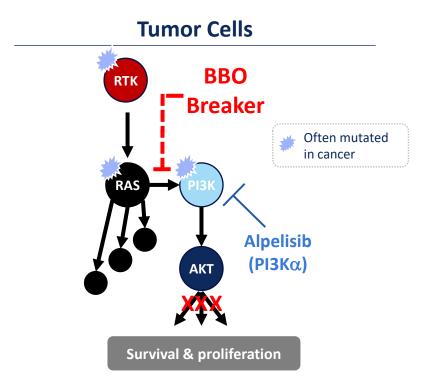
- High rate of dose modifications and interruptions (>30%) does not allow effective target coverage
- Adverse events are not conducive to combination studies
- Increased insulin secretion leads to increased pathway signaling and resistance

- Dose interruptions occurred in 66% versus 21% in placebo
- Dose reductions due to adverse events occurred in 55% versus 4.5% in placebo
- The most common adverse reactions were hyperglycemia (65%), diarrhea (58%), and rash (52%)

Inhibiting PI3K α activity by preventing its interaction with RAS provides a "tumor selective" mechanism that spares glucose metabolism

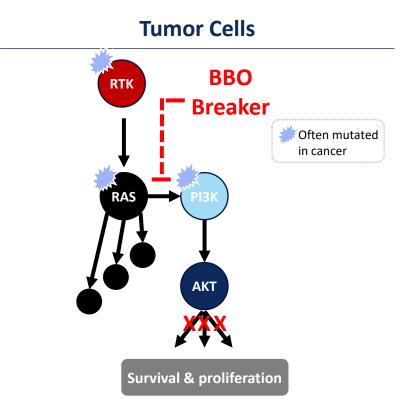
- PI3Kα kinase inhibitors *block normal cell signaling* resulting in *dose-limiting hyperglycemia and insulin-driven resistance*
- Inhibiting PI3Kα:RAS PPI with a "PI3Kα Breaker" should avoid hyperglycemia and insulin-driven resistance by specifically targeting tumor cells and may provide multiple therapeutic opportunities
- Mice with mutations in the RBD that impair the PI3Kα:RAS interaction block oncogene-driven NSCLC tumor growth *in vivo* and have no effect on glucose metabolism*





Normal Cells

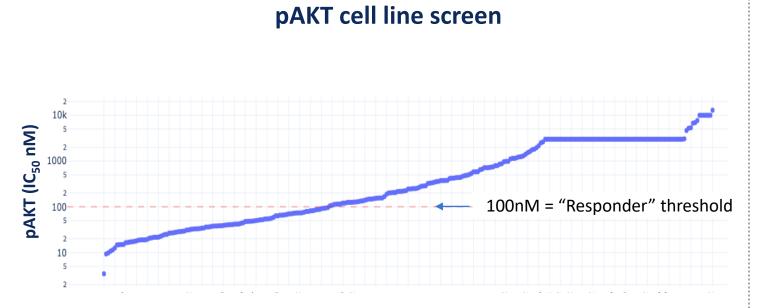
BridgeBio has designed potent and selective PI3K α :RAS breakers



- PI3Kα:RAS breakers selectively bind to PI3Kα
- By ITC and SPR we observe
 - RAS binds to PI3K α with ~10 μ M affinity
 - Breakers binding to PI3K α blocks its interaction with RAS
 - No binding affinity to RAS
- PI3Kα:RAS breakers do not affect kinase activity of PI3Kα

		BBO	Alpelisib
BT474	pAKT (IC ₅₀ , nM)	34	169
	Cell Viability (nM)	67	744

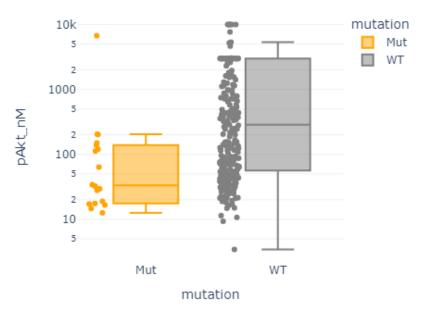
One third of all cancer cell lines depend on PI3K α :RAS interaction for activation of AKT signaling



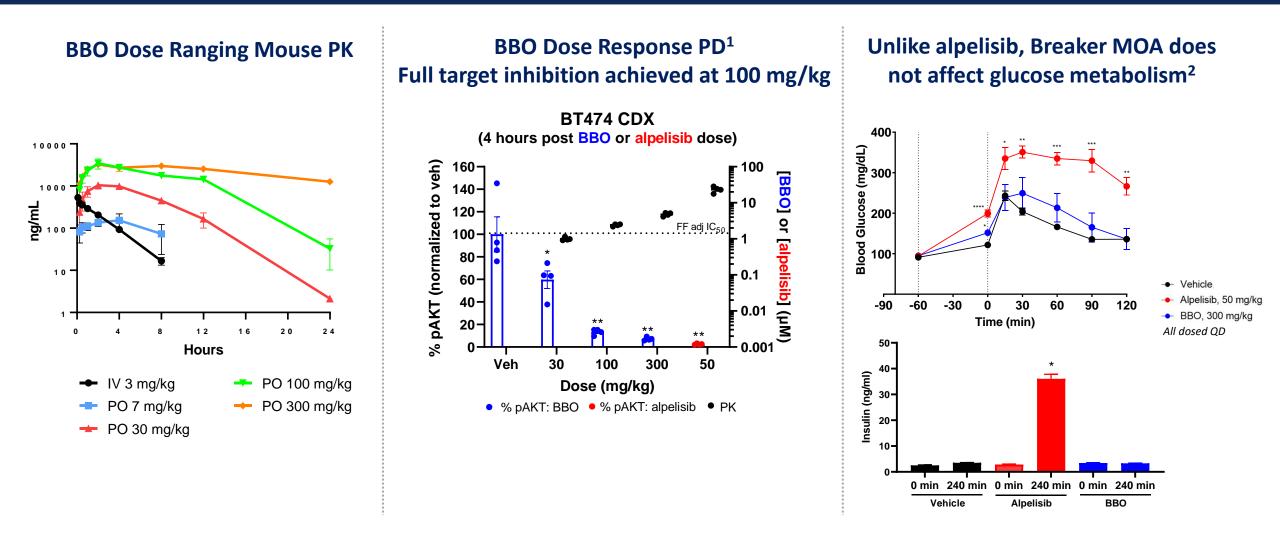
- > 105/282 (37%) of screened cell lines are responders
- Responders include
 - > 29/50 (58%) KRAS^{G12X} mutant
 - > 18/19 (94%) PIKCA helical mutant
 - 16/21 (76%) HER2 amp

PIK3CA helical mutants are highly sensitive

Mutations Responders vs Non-Responders



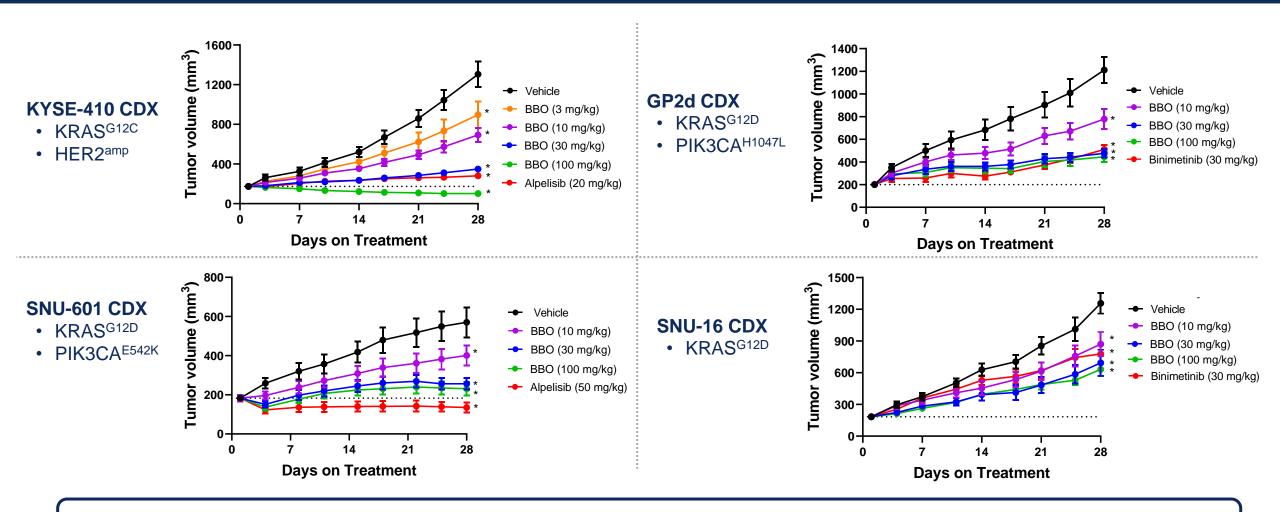
BBO is orally bioavailable and achieves near complete inhibition of signaling in tumors at 100 mg/kg without risk of hyperglycemia



1. One-way ANOVA with Dunnett's test vs vehicle; *p<0.01, **p<0.0001

2. Top: One-way ANOVA with Dunnett's test vs vehicle, *p<0.05, **p<0.001, ***p<0.0001, Bottom: One-way ANOVA with Tukey's multiple comparisons test vs all other groups : *p<0.0001

PI3Kα breakers are efficacious in xenograft models



Efficacy is observed in models with KRAS^{G12X} mutations, with or without PIK3CA mutation

BridgeBio has designed potent and selective PI3K α :RAS breakers

- Potential first-in-class opportunity
 - Novel mechanism of action: PI3K α breakers selectively block RAS activation of PI3K α
 - Exhibits potent inhibition of AKT activation in KRAS^{G12x}, PIK3CA helical mutations and HER family driven populations
 - Potent efficacy in multiple models without hyperglycemia
- Development candidate projected 2023
- Multiple opportunities as monotherapy and in combination in large patient populations

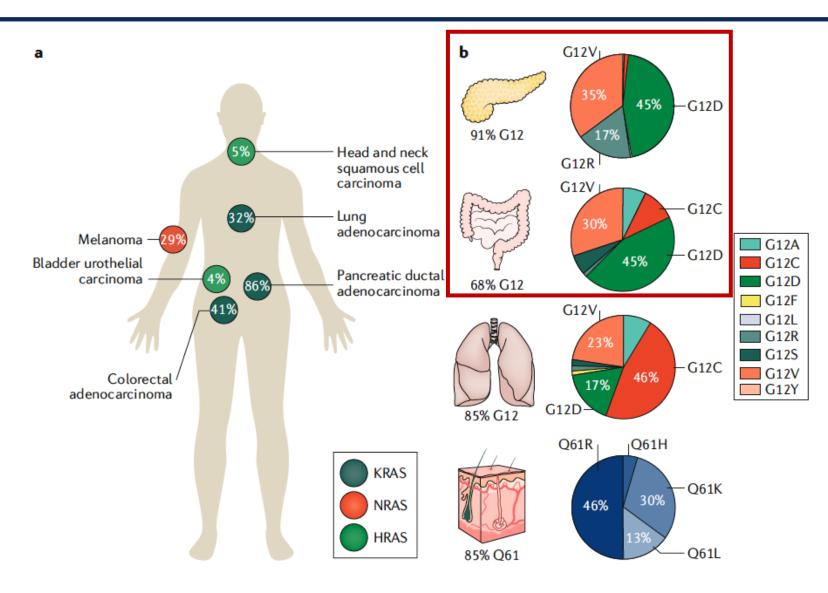
Agenda

BBO-8520: A KRASG12C Dual Inhibitor

PI3K α :RAS Breaker

Pan-KRAS program

Mutant KRAS is the most common oncogene in cancer – pan KRAS



- Lung cancer is the second most common cancer in the US with greater than 235K new cases and 130K deaths a year
- KRAS^{G12C} mutant found in ~15% of all NSCLC (~35K pts/yr)
- Other common human cancers with KRAS mutations are colorectal and pancreatic adenocarcinomas with a combined 168K new cases a year in the US
- KRAS^{G12D/G12V} mutant found in 70% of pancreatic cancers (²⁹43K pts/yr) and 25% of colorectal cancers (~53K pts/yr)

• Recent progress has identified molecules with the right potency and bioavailability

		BBO-a	BBO-b
PPI: KRAS/RAF1 effector IC ₅₀ (nM)	G12D	110	100
	G12V	430	270
pERK: HTRF	GP2D (G12D) @ 1h	4	7
IC ₅₀ (nM)	SW620 (G12V) @ 4 h	10	13
Mouse PK (IV ER % / PO %F)		64 / 6.9 (10 mpk)	44 / 34 (10 mpk)

Potent inhibitory activity against multiple KRAS-mutant models in vitro

	BBO-b EC ₅₀ (nM)		
KRAS variant	pERK	Viability	
G12D	6.7	10.3	
G12V	2.7	165	
G12C	11.0	11.2	
G12S	126	203	
G13D	37.1	326	
G12A	406	86.1	
BRAF ^{V600E}	>10 uM	>3.5 uM	

We have identified leads with strong *in vivo* target engagement which are progressing into efficacy studies

Pan-KRAS: Lead optimization progressing towards a development candidate

- Potent activity against multiple KRAS mutants
- Selective for KRAS over H- and NRAS
- Potent PD and good mouse oral bioavailability
- Development candidate projected 2023

BridgeBio is progressing multiple approaches against KRAS

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