#### **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

#### FORM 8-K

#### CURRENT REPORT Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): September 29, 2020

## BridgeBio Pharma, Inc. (Exact name of registrant as specified in its charter)

Delaware (State or other jurisdiction of incorporation)

001-38959 (Commission File Number)

84-1850815 (IRS Employer Identification No.)

421 Kipling Street Palo Alto, CA (Address of principal executive offices)

94301 (Zip Code)

(650) 391-9740 er, including area code) (Registrant's telepl

Not Applicable

(Former name or former add ess, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

 $\hfill\square$   $\hfill$  Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

Dere-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

□ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

	Trading	Name of each exchange
Title of each class	Symbol(s)	on which registered
Common stock	BBIO	The Nasdaq Global Select Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. 🗆

#### Item 7.01. Regulation FD Disclosure.

On September 29, 2020, BridgeBio Pharma, Inc. will present at its Research and Development Day. The slide presentation to be presented at the Research and Development Day is furnished as Exhibit 99.1 to this Form 8-K and is incorporated by reference herein.

The information responsive to Item 7.01 of the Form 8-K, including Exhibit 99.1 attached hereto, is intended to be furnished and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such filing.

Item 9.01. Financial Statements and Exhibits.

(d) Exhibits.

Exhibit <u>Number</u> <u>Description</u>

99.1 Presentation of BridgeBio Pharma, Inc., dated September 29, 2020

#### SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

BridgeBio Pharma, Inc.

Date: September 29, 2020

/s/ Brian C. Stephenson Brian C. Stephenson Chief Financial Officer



hope through rigorous science

## **R&D** Day

September 29, 2020



Exhibit 99.1

#### Forward-Looking Statements and Disclaimer

Statements in this Presentation that are not statements of historical fact are forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended. Such forward-looking statements include, without limitation, statements regarding BridgeBio Pharma, Inc.'s (the "Company's") resent and clinical development plans, expected manufacturing capabilities, strategy, regulatory matters, market size and opportunity, future financial position, future revenue, projected oxts, prospects, plans, objectives of management, and the Company's ability to complete certain milestones. Words such as "believe," "anticipate," "plan," "expect," "intend," "will," "may," "goal," "potential," "should," "could," "aim," "estimate," "predict," "continue" and similar expressions or the negative of these terms or other comparable terminology are intended to identify forward-looking statements, though not all forward-looking statements are neither forecasts, promises nor guarantees, and are based on the beliefs of the Company's management as well as assumptions made by and information currently available to the Company. Such statements reflect the current views of the Company, including, without limitation, risks inherent in developing therapeutic products, the success, cost, and timing of the Company's product candidate development activities and ongoing and planned preclinical studies and clinical trials, trends in the industry, the legal and regulatory framework for the industry, the development candidates, the success, cost, the development company's product candidates, the success, the size and growth potential of the market for the Company's product candidates, the success, cost, the development or commercialization of the Company's product candidates, the success, cost, the development or commercialization of the Company's product candidates, the size and growthey the thet are to the third parties in connection with the development or com

Certain information contained in this Presentation relates to or is based on studies, publications, surveys and other data obtained from third-party sources and the Company's own internal estimates and research. While the Company believes these third-party sources to be reliable as of the date of this Presentation, it has not independently verified, and makes no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third-party sources. In addition, all of the market data included in this Presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while the Company believes its own internal research is reliable, such research has not been verified by any independent source.

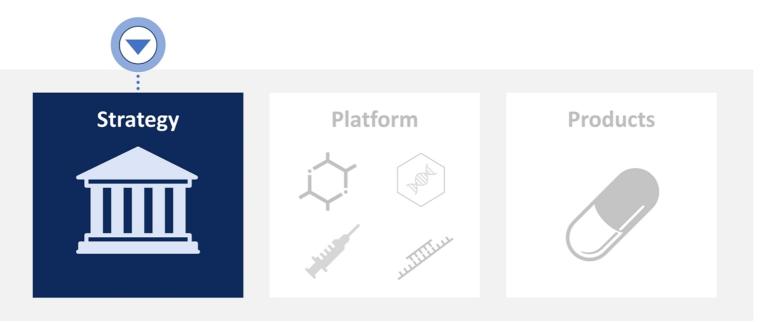
The Company is the owner of various trademarks, trade names and service marks. Certain other trademarks, trade names and service marks appearing in this Presentation are the property of third parties. Solely for convenience, the trademarks and trade names in this Presentation are referred to without the \* and TM symbols, but such references should not be construed as any indicator that their respective owners will not assert, to the fullest extent under applicable law, their rights thereto.

## **BridgeBio Pharma: Hope through rigorous science**

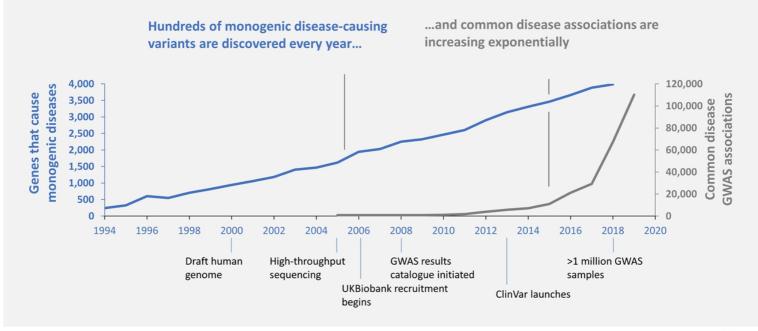
**Our mission:** To **discover, create, test** and **deliver** transformative medicines to treat patients who suffer from genetic diseases and cancers with clear genetic drivers



# BridgeBio corporate overview

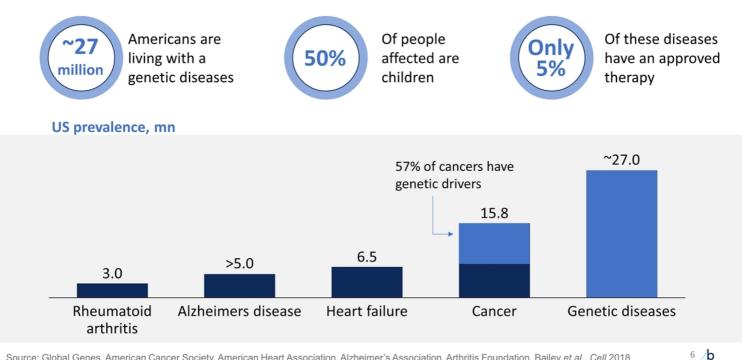


## We are at Day 1 in the era of genetic medicine



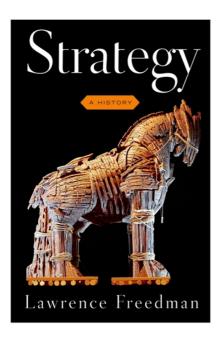
Source: Claussnitzer et al., Nature 2020

## A vast opportunity to help patients



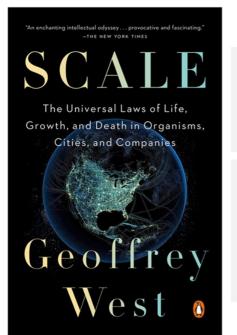
Source: Global Genes, American Cancer Society, American Heart Association, Alzheimer's Association, Arthritis Foundation, Bailey et al., Cell 2018

# Our strategy is simple



History teaches us about strategy:		BBIO applications:
1. Right playing field	$\bigotimes$	1. Genetic disease
2. Right tenets	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	2. Beautiful science, NPV positive
3. Stay adaptive	۸	<ol> <li>No initial focus on TA, disease, or modality. Repeated application</li> </ol>

## Our organizational principles enable scale



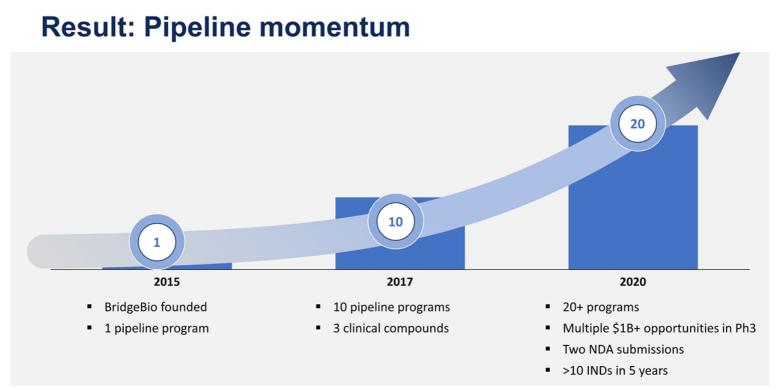
## History teaches us about growth:

 Simple rules repeated at many levels BBIO applications:

- Simple rules put patients first, think independently and let science speak, be efficient
- 2. De-centralized cities grow with returns to scale, centralized companies slow with economies of scale



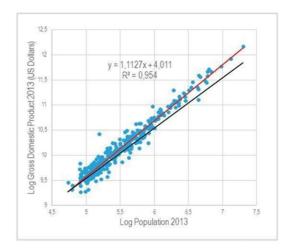
 De-centralized approach – small teams that focus and are incented at the level of each asset, scale that allows for rapid failure, learning



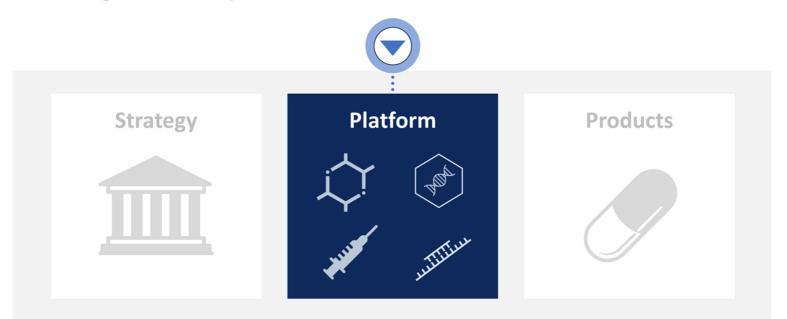
## Increasing returns to scale – BridgeBio since IPO

## Achievement:

- NDA for MoCD Type A accepted, ODD & Fast Track received for 2L CCA program
- 7 INDs filed
- Six new clinical trials initiated (16 total), >350 trial sites across 25 countries
- 8 new programs, including LGMD2i and ADH1, both in the clinic
- TTR clinical data, DEB clinical data, CAH and Canavan pre-clinical data, achon pre-clinical data, TIO data



# BridgeBio corporate overview



## BridgeBio drug engineering basics: our platform

Discover Novel genetic disease targets



Well described diseases than can be targeted at their source Create Medicines with industryleading research capabilities



Tailored therapeutic technologies to create first or best-in-class medicines Test Our drugs through global development footprint



Broad clinical development capabilities across therapeutic areas and geographies

Deliver Our products to patients through commercial infrastructure



Building the capabilities to deliver genetic medicines to patients globally

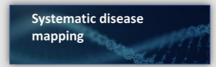
# Capabilities to identify new genetic disease targets at scale

### Our target identification engine is driven by three core areas of strength:

Computational genomics / statistical genetics

Discover

- Mining of large genotypephenotype databases
- De novo target discovery
- Target validation
- Indication expansion



 Manual annotation and prioritization of the 7K known genetic diseases



Scientific insight and judgment from industry leaders with a proven track record











Frank McCormick, PhD Founder and Chairman of Oncology

UCSF



Richard Scheller, PhD Chairman of R&D







Len Post, PhD Advisor

### BOMARIN







## We select the optimal therapeutic modality to target each disease at its source

## Industry-leading capabilities across 4 modalities:

### **Medicinal chemistry**

- Molecular dynamics
- Reversible and irreversible chemistry
- Topical formulations



**Optimal use:** Inhibition of GOF or allosteric activation of LOF mutations

### **Therapeutic proteins**

- Large protein manufacturing
- Formulation expertise
- Comparability assay development

**Optimal use:** Replacement of extracellular protein in LOF diseases

GOF = gain-of-function, LOF = loss-of-function, WT = wild type

#### Gene therapy

- Vector optimization
- Novel capsid engineering
- Analytical assay development

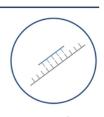
Optimal use: Replacement of intracellular protein in LOF diseases



#### Antisense oligonucleotides

- Target mapping with functional genomics
- Activity screening assay development
- Novel backbone and base chemistry

**Optimal use:** Inhibition of GOF or activation of WT allele in LOF diseases







## **Research leaders with a productive history developing novel therapeutics**

Create





Uma Sinha, PhD Chief Scientific Officer





Robert Zamboni, PhD Chemistry





Oncology

Eli Wallace, PhD Chief Scientific Officer, Oncology

14.





Pedro Beltran, PhD SVP, Biology







Clayton Beard, PhD SVP, Research and Development



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# Our global clinical development footprint

- 16 ongoing trials across 5 different therapeutic areas,
   >350 trial sites, and 25 countries
- Creative clinical and regulatory strategy, e.g., unique, nested Phase 3 trial design for acoramadis in ATTR
- Central operations toolkit for enrollment, protocol quality, site activation, CRO quality, regional performance
- Expert, dedicated R&D teams in each therapeutic area
  - Cardio/renal: Jonathan Fox, MD, PhD 🚿 MyoKardia AstraZeneca
  - Oncology: Susan Moran, MD

Test

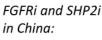
- Gene Therapy: Adam Shaywitz, MD, PhD BIOMARIN AMGEN

**Countries with BridgeBio trial sites** 



# Building capabilities to deliver our products to patients across the globe

- Global commercial infrastructure to leverage our drug and disease expertise
- Diagnostic partnerships to identify patients in need of our medicines
- Disease awareness strategies including close partnerships with patient advocacy groups
- Country-specific Early Access Programs (EAP) and patient assistance programs
- Commercial partners in strategic geographies:











Key people: Matt Outten (CCO), Jennifer Cook (BOD), Brent Saunders (BOD)

## The platform is delivering



**Discover** Novel genetic disease targets



Create Medicines with industry-leading research capabilities



Test Our drugs through global development footprint



**Deliver** Our products to patients through commercial infrastructure 20+ Disclosed programs in the pipeline

>10 INDs since 2015

**16** Clinical trials across the globe

**2** Product launches expected in 2021

# BridgeBio corporate overview



# Our pipeline of 20+ development programs spans multiple therapeutic areas and drug modalities

Small molecule 🗍 Topical small molecule 💉 Biologics 🕅 Gene therapy

				Patient pop.		Pre	clinical	Clinical	
Portfolio segment	Program	Drug mechanism	Diseases	(US+EU)	Modality	Discovery	IND-enabling		
	Acoramidis	TTR stabilizer	ATTR-CM	>400K	\$				
	Fosdenopterin	cPMP replacement	MoCD type A	100	*				NDA
	Infigratinib	Low-dose FGFR1-3i	Achondroplasia	55K	$\phi$				
	Encaleret	CaSR antagonist	ADH1 / HP	12K <sup>1</sup> / 200K	<b>\$</b>				
Mendelian	Zuretinol	Synthetic retinoid	IRD (RPE65 or LRAT)	ЗК	\$				
56.OP	BBP-418	Glycosylation substrate	LGMD2i	7K	$\phi$				
	BBP-711	GO1 inhibitor	PH1 / FSF	5K / 1.5M	$\phi$				
	BBP-671	PanK activator	PKAN / OA	7K	<b>\$</b>				1
	BBP-761	Succinate prodrug	LHON	20K	<b>\$</b>				
	BBP-472	ΡΙ3Κβί	PTEN autism	120K	$\phi$				
Genetic	Patidegib <sup>2</sup>	Topical SMOi	Gorlin / BCC	120K	$\Box$			1	
Dermatology	BBP-589	Recombinant COL7	RDEB	1.5K	-				
<b>#6</b> #	BBP-681	Topical PI3Kai	VM / LM	117K	$\Box$				
:: <b>@</b> :::	BBP-561	Topical KLK 5/7i	Netherton	11K	$\nabla$				
Targeted	Infigratinib	FGFR1-3i	FGFR+ tumors	37K	众				
Oncology	BBP-398	SHP2i	Multiple tumors	>500K	<b>\$</b>				
	BBP-454	Pan-mutant KRASi	KRAS+ tumors	>500K	\$				1
	BBP-954	GPX4i	Multiple tumors	>500K	\$				8
Gene Therapy	BBP-631	21-OH gene therapy	САН	>75K	DODA				
	BBP-812	ASPA gene therapy	Canavan	1K	DODA				
	BBP-815	TMC1 gene therapy	Genetic hearing loss	10K	DODO				

1 US carriers; 2 We are party to an option agreement pursuant to which LEO Pharma A/S has been granted an exclusive, irrevocable option to acquire PellePharm, including the BBP-009 program. If the option is exercised by LEO Pharma A/S, we will no longer have rights to develop and commercialize BBP-009.

## Four core value drivers over the next 12-24 months

Program	Opportunity size	Status	Upcoming event(s)
Acoramidis: TTR stabilizer for ATTR	>400K	ATTR-CM Ph3 ongoing	<ul> <li>Topline Ph3 part A data late-2021 / early-2022</li> <li>Topline Ph3 part B data 2023</li> </ul>
Low-dose infigratinib (FGFRi) for achondroplasia	55K	Enrolling Ph2 study	<ul><li>✓ Dose first child</li><li>□ Phase 2 data 2021</li></ul>
Gene therapy for congenital adrenal hyperplasia (BBP-631)	>75K	GLP tox ongoing	<ul><li>File IND</li><li>Phase 1/2 data 2021</li></ul>
Encaleret: CaSR inhibitor for autosomal dominant hypocalcemia type 1 (ADH1)	12K	Ph2 ongoing	<ul><li>FPI in Ph2 study</li><li>Phase 2 data 2021</li></ul>
			22 / <b>b</b>

## A pipeline with multi-blockbuster potential



**\$1B+** opportunities in the pipeline

- 1) Acoramidis for ATTR CM and PN
- 2) Low-dose infigratinib for achondroplasia
- 3) AAV5 gene therapy for congenital adrenal hyperplasia
- 4) High-dose infigratinib for adjuvant urothelial carcinoma
- 5) Pan-mutant KRAS inhibitor for KRAS+ cancer
- 6) SHP2 inhibitor for RAS and kinase mutant cancer
- 7) GPX4 inhibitor for multiple tumor types
- 8) GO1 inhibitor for frequent kidney stone formers

## Thank you to our speakers

#### Speaker **Related program** Ravi Saravirayan, MD, PhD Low-dose infigratinib (FGFRi) for Professor and Group Leader, Murdoch Children's Research Institute achondroplasia Head of Clinical Genetics Services at the Victorian Clinical Genetic Services Julian Gillmore, MD, PhD Acoramidis: TTR stabilizer for ATTR Head, Centre for Amyloidosis & Acute Phase Proteins, cardiomyopathy University College London Kyriakie (Kiki) Sarafoglou, MD Gene therapy for congenital adrenal Associate Professor, hyperplasia (BBP-631) University of Minnesota Medical School and College of Pharmacy **Michael Collins, MD** Encaleret: CaSR inhibitor for autosomal Chief of the Skeletal Disorders and Mineral Homeostasis Section, dominant hypocalcemia type 1 (ADH1) National Institutes of Health Frank McCormick, PhD Oncology research, KRAS BridgeBio Chairman of Oncology

Professor, Helen Diller Family Comprehensive Cancer Center University of California San Francisco