

Black Diamond Therapeutics, Inc.

Pioneering the Development of MasterKey Therapies



November 2022

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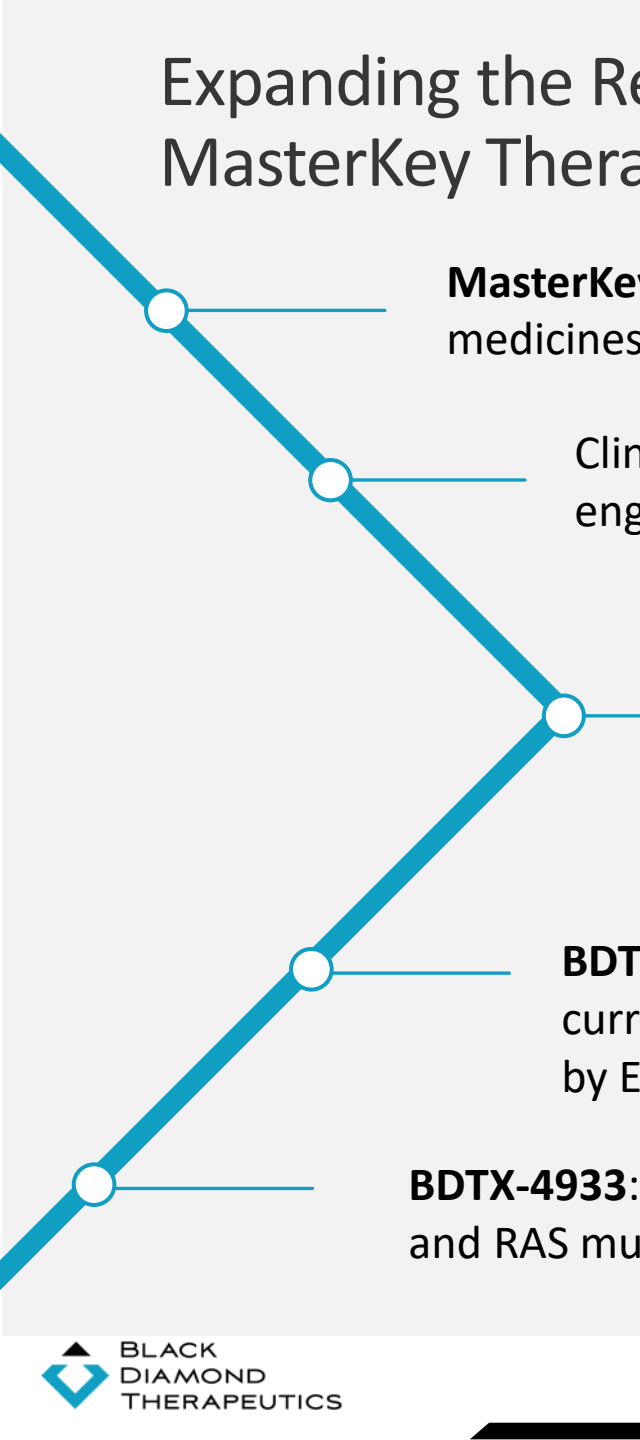
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Black Diamond Therapeutics Overview

Expanding the Reach of Precision Medicine Through the Development of MasterKey Therapies



MasterKey therapies address oncogene mutation families; providing precision oncology medicines to greater numbers of patients with genetically defined tumors

Clinical and late-preclinical pipeline of MasterKey inhibitors derived from our MAP drug discovery engine targeting oncogenic EGFR, RAF, FGFR2/3 and additional undisclosed targets

Our proprietary **MAP drug discovery engine** is designed to:

- Predict and validate novel oncogenic mutant families from population level tumor genomics
- Pioneer mutant family conformation-based MasterKey drug design
- Provide opportunities beyond oncology and small molecules

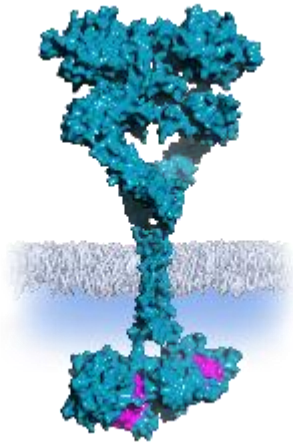
BDTX-1535: a brain-penetrant, mutant selective, irreversible EGFR MasterKey inhibitor, currently in Phase 1 development for treatment of patients with GBM and NSCLC driven by EGFR intrinsic & acquired resistance mutations

BDTX-4933: a brain-penetrant RAF MasterKey inhibitor targeting oncogenic BRAF Class I, II, III and RAS mutations, currently in IND-enabling studies

Black Diamond's MasterKey Approach Designed to Address Overlooked Mutation Families

Classic/Current Approach:

Targeting active site kinase domain mutations



Targeting single mutations in individual tumor types

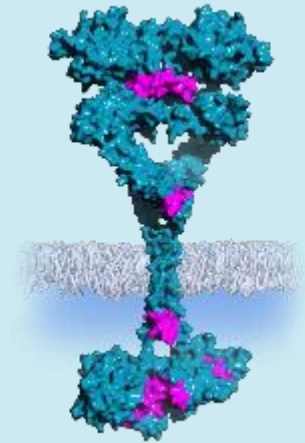


With expanding genetic profiling of cancer patients via Next Generation Sequencing (NGS)

Less than 15% patients¹ with metastatic cancer eligible for approved precision oncology medicines

Black Diamond Approach:

Targeting mutation families to expand the opportunity for precision oncology




Mutation families yield significant market opportunities for populations lacking suitable precision therapies



Wholly-Owned Novel MasterKey Precision Medicines

Target	Drug Candidate	Indication	Discovery	Optimization	IND-Enabling	Phase 1	Phase 2/3
EGFR	BDTX-1535	EGFR-driven GBM & NSCLC ± CNS mets					
BRAF	BDTX-4933	BRAF-driven solid tumors ± CNS mets					
FGFR	Undisclosed	FGFR3-driven solid tumors					
Un-disclosed	Undisclosed	Solid tumors					



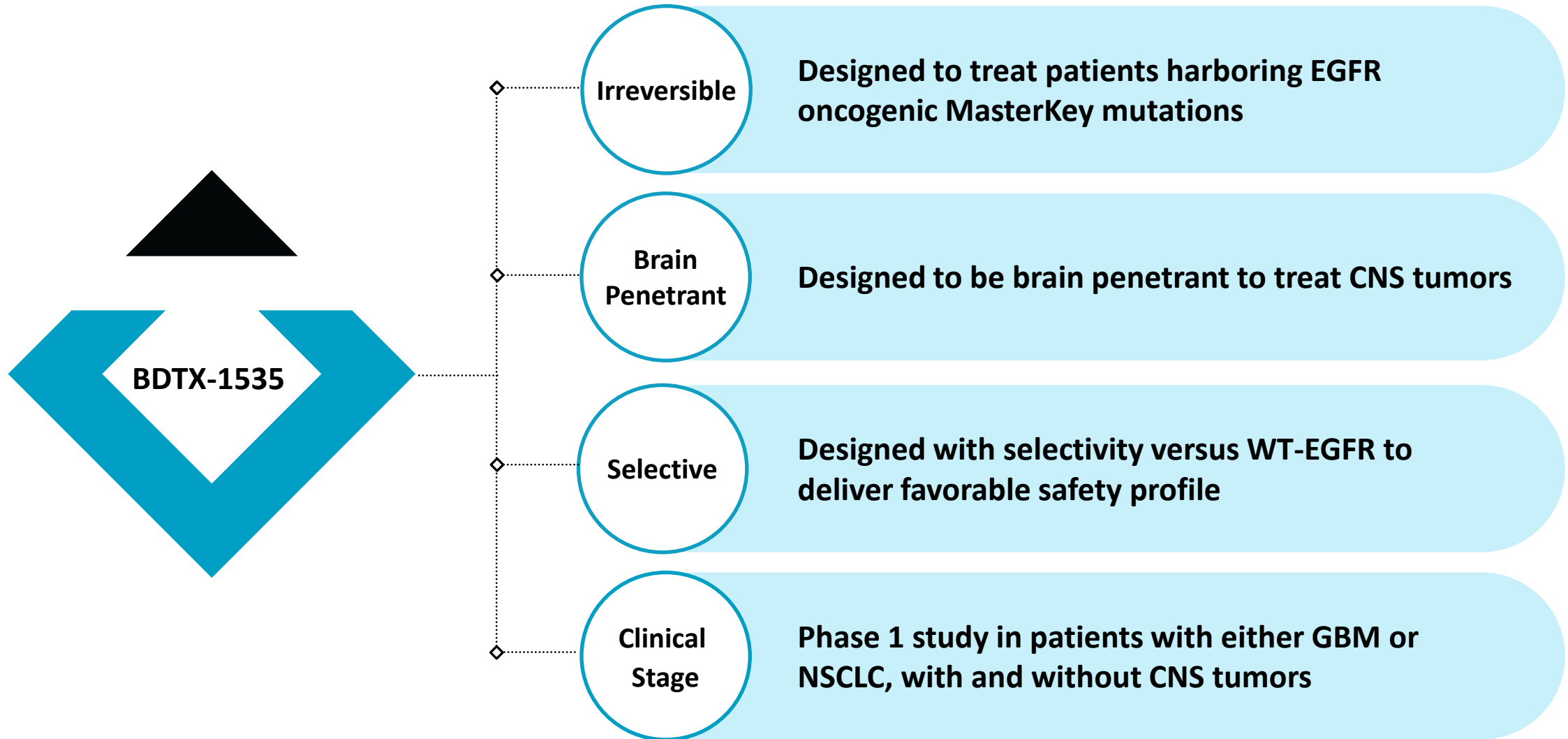
BDTX-1535

Brain-Penetrant Inhibitor of GBM and NSCLC MasterKey EGFR Mutations



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BDTX-1535: Oral, Brain Penetrant, Selective Inhibitor of Oncogenic EGFR MasterKey Mutations



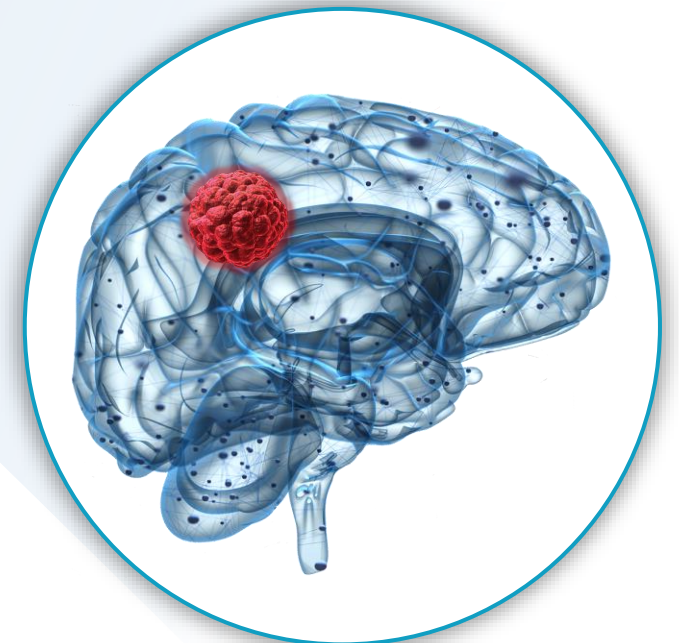
BDTX-1535 is a Novel 4th Generation EGFR MasterKey Inhibitor Positioned to Address Unmet Needs in NSCLC and GBM

EGFR Mutant Non-Small Cell Lung Cancer



- Potent across 3rd gen resistance mutations
- Covalent inhibition mechanism
- Wild type EGFR (WT-EGFR) sparing

EGFR Altered Glioblastoma

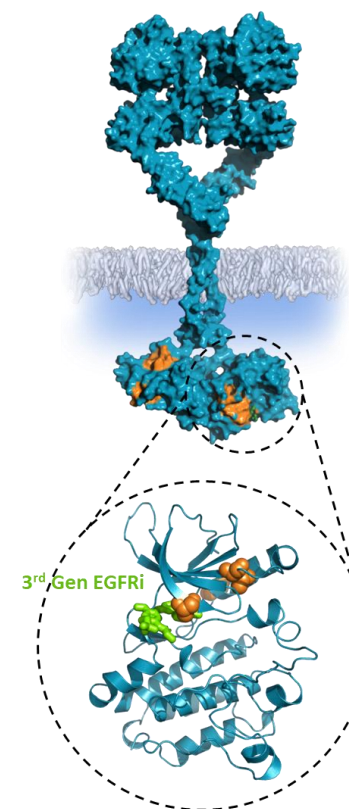
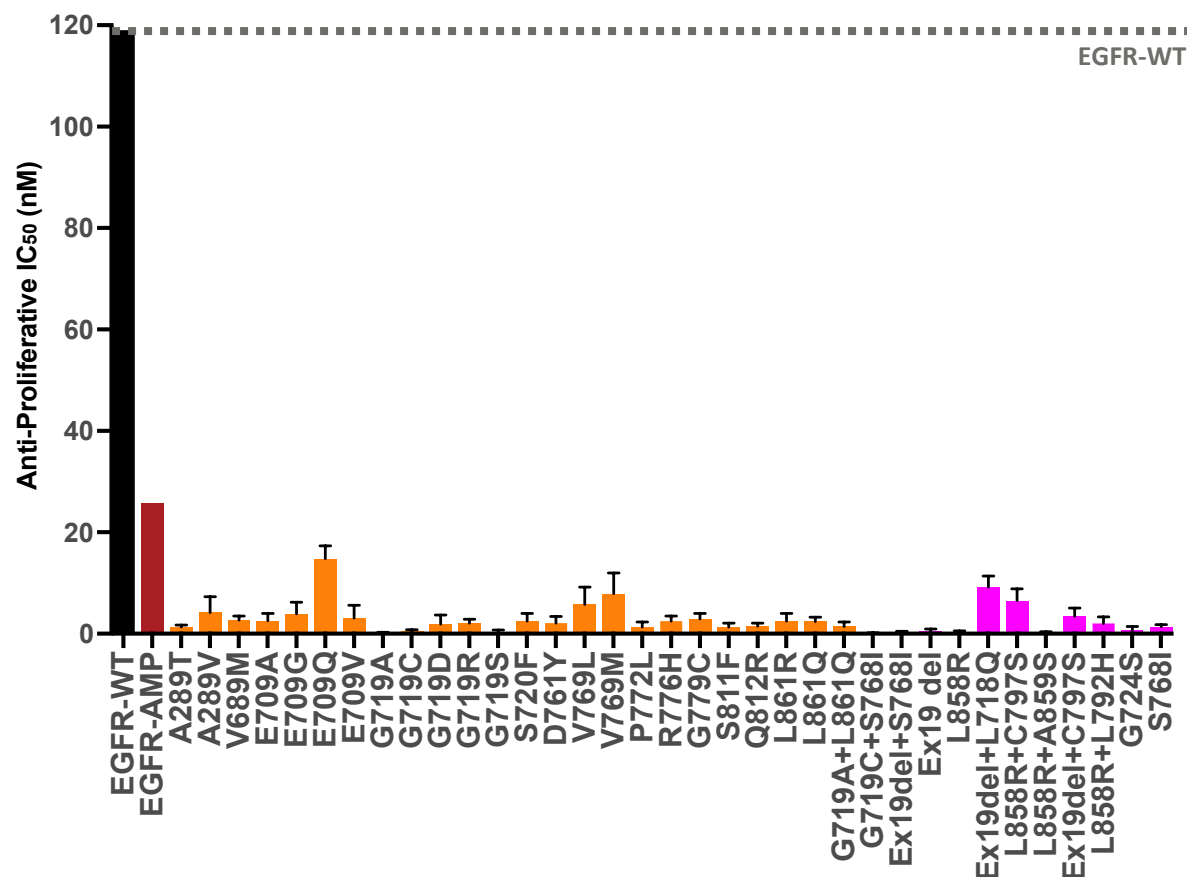


- Potent inhibition across GBM alterations
- Overcomes EGFR tumor heterogeneity
- Prevents paradoxical activation of EGFR
- Brain penetration by design

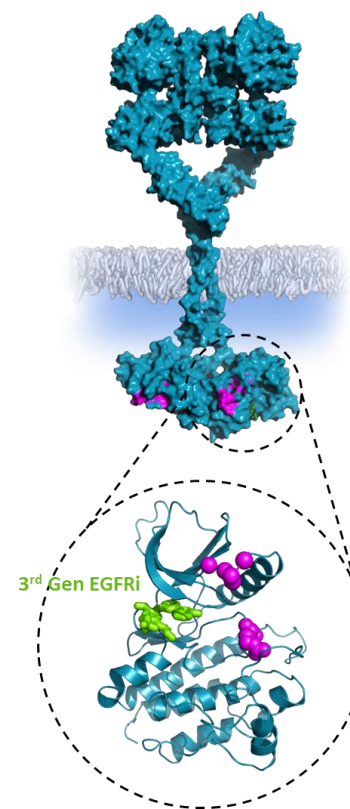
MasterKey Profile Potently Inhibits Broad Family of Oncogenic Mutations in NSCLC While Sparing Wild-Type EGFR (EGFR-WT)



Preclinically BDTX-1535 is highly potent against classical, intrinsic and acquired resistance EGFR mutations



Intrinsic Resistance
EGFR Mutations

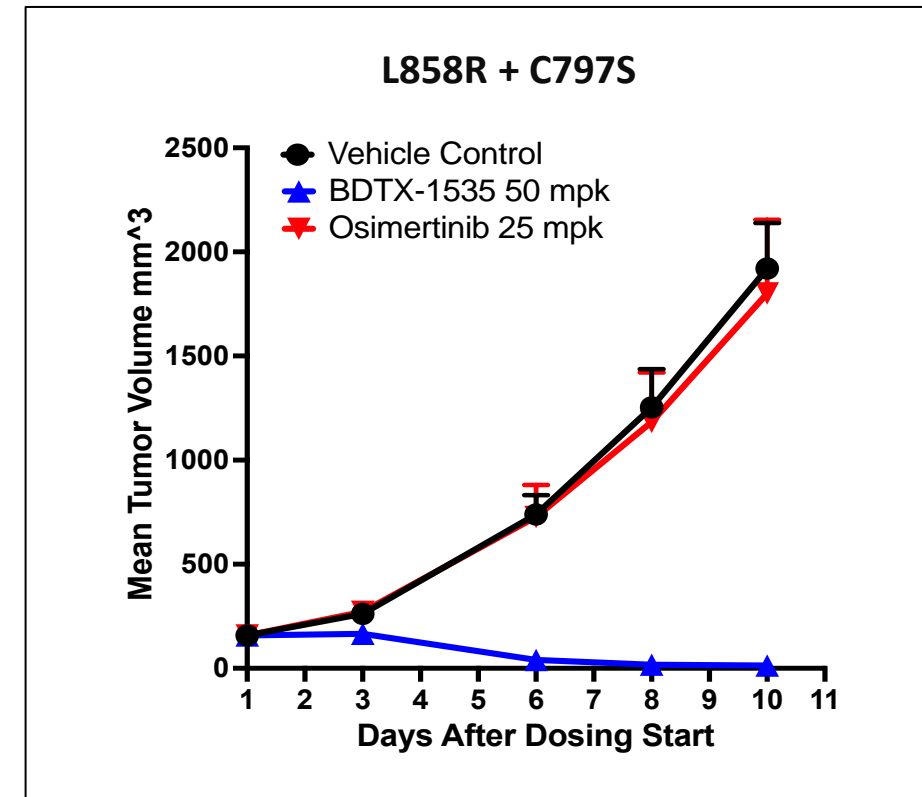
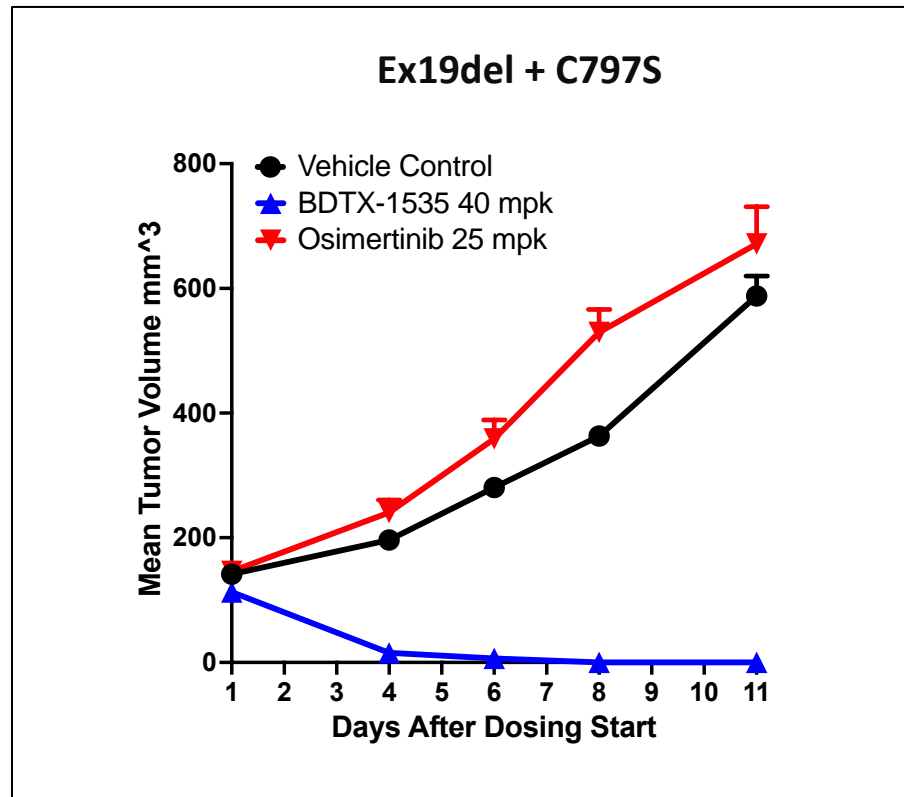


Classical & Acquired
Resistance EGFR Mutations

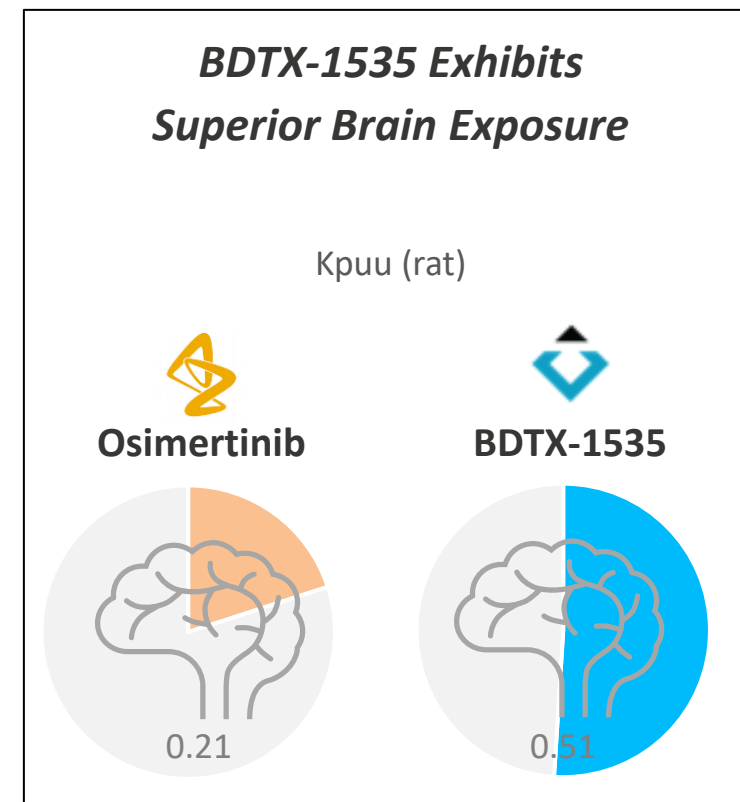
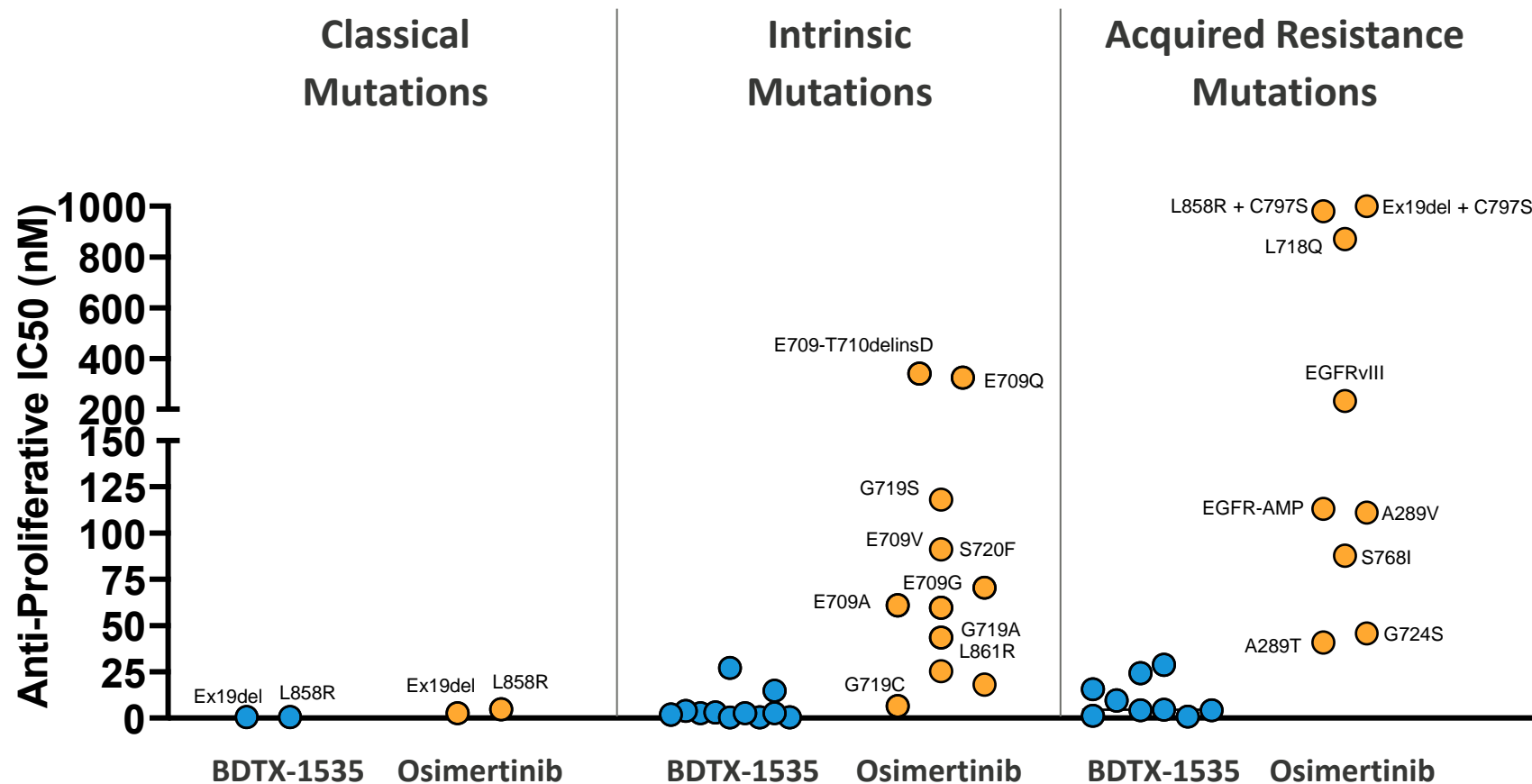


BDTX-1535 Achieves Tumor Regression in Osimertinib Resistant Models

Potent, Irreversible Activity Across Exon19 deletion and L858R Primary and C797S Resistance Mutations



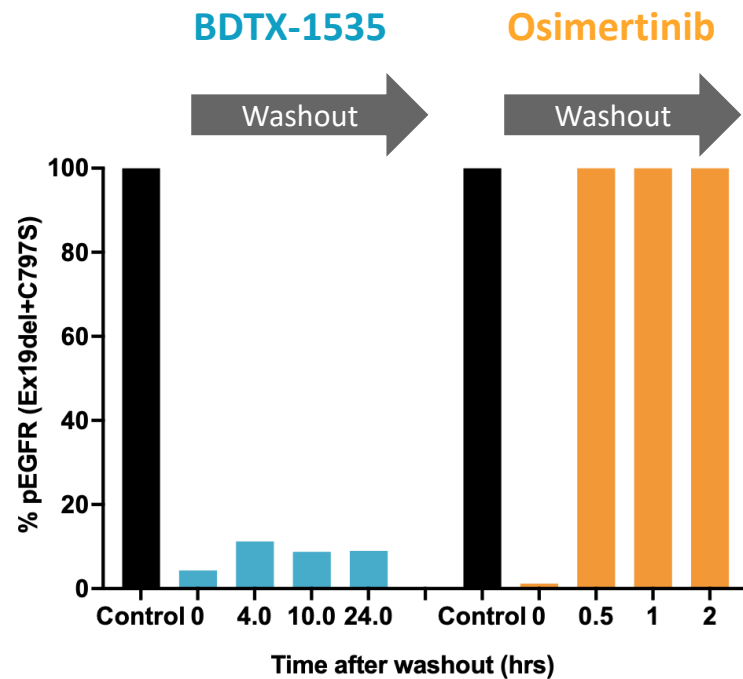
BDTX-1535 Potently Inhibits Classical and Resistance Mutations Preclinically Compared to Osimertinib



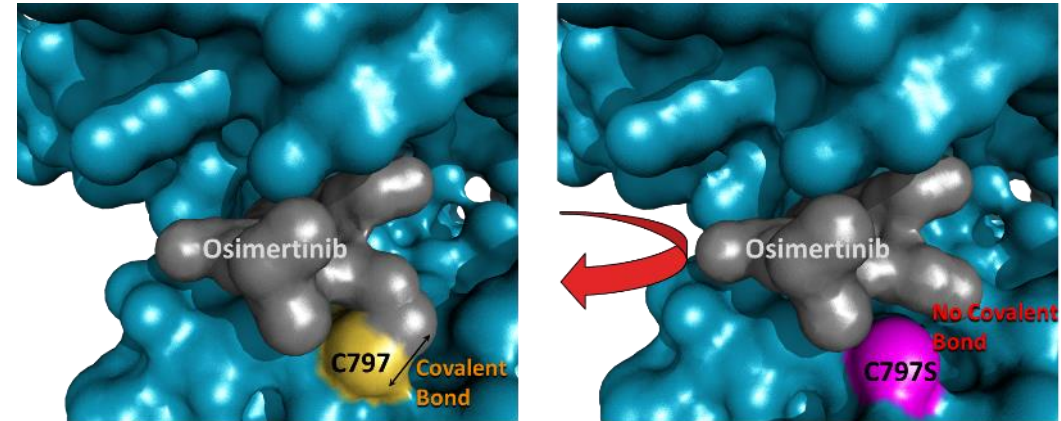


BDTX-1535 Is a Covalent Inhibitor of EGFR Resistance Mutations

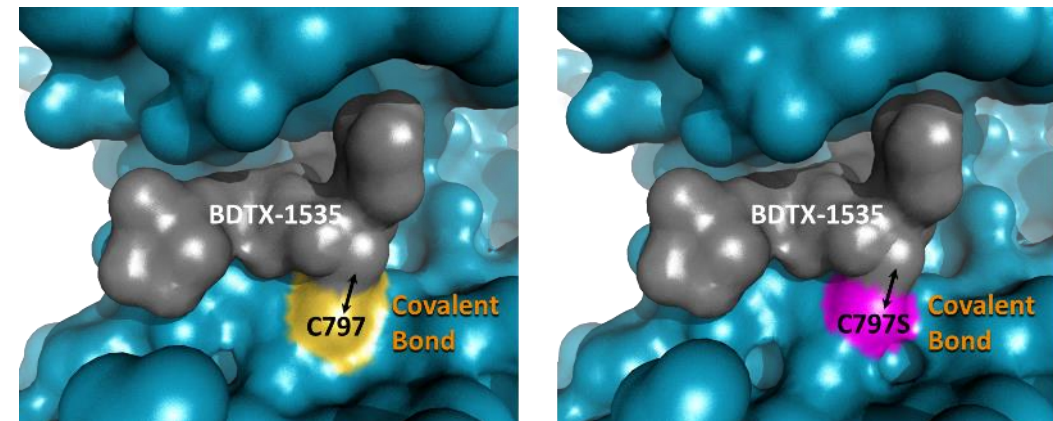
BDTX-1535 retains pEGFR shutdown after washout in preclinical C797S mutant study



Osimertinib Covalently Binds to C797 but not C797S



BDTX-1535 Covalently Binds to both C797 and C797S



Next Generation In Wild Type Sparing, Irreversible EGFR TKIs

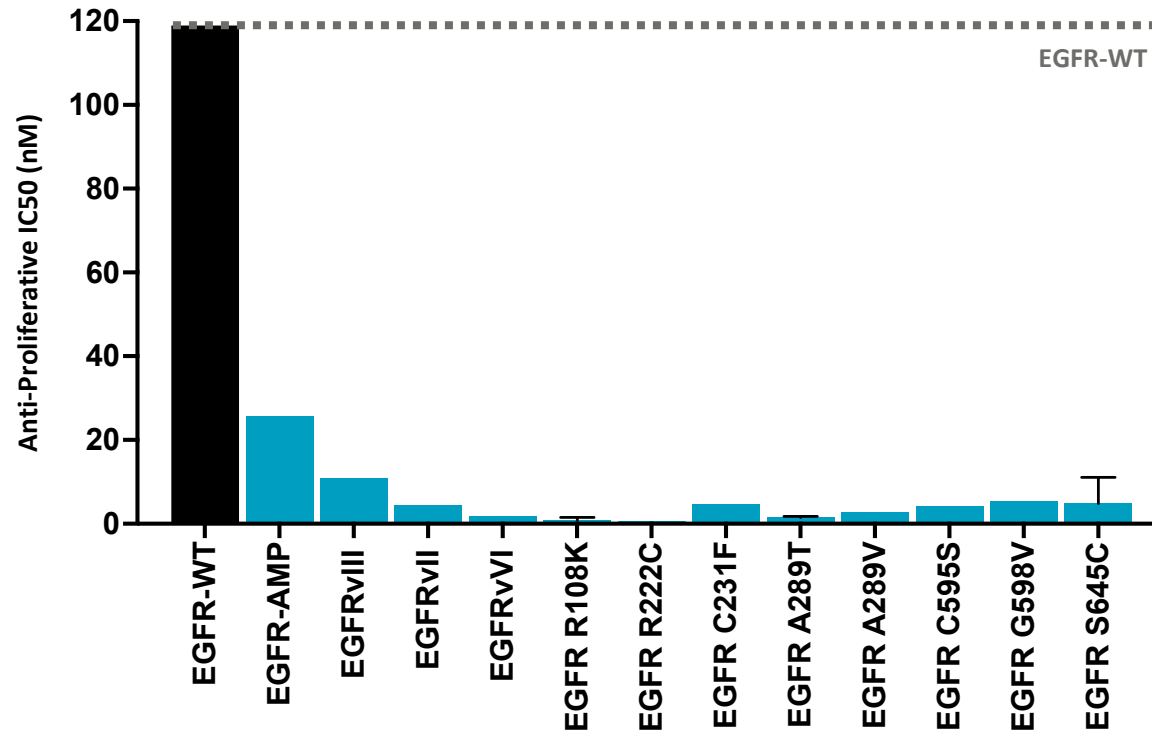
BDTX-1535 Is a Novel 4th-Generation Covalent EGFR MasterKey Inhibitor



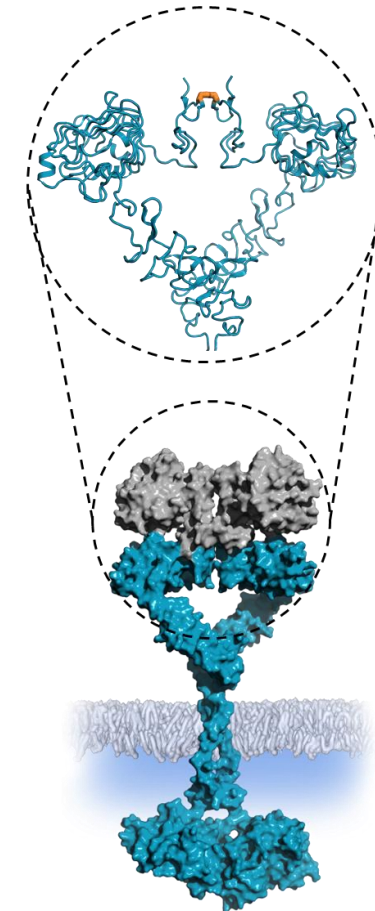
MasterKey Profile Potently Inhibits Broad Family of Oncogenic Alterations in GBM While Sparing EGFR-WT



BDTX-1535 potentially inhibits extra-cellular domain oncogenic EGFR alterations and amplification in preclinical studies



Extracellular Domain Mutations and Alterations in Glioblastoma

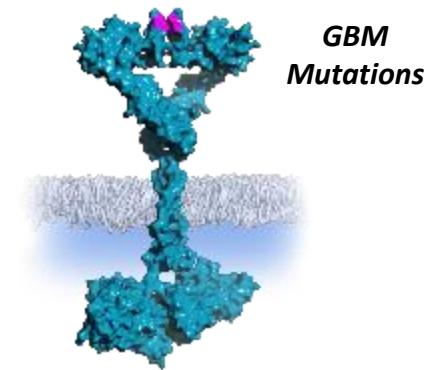
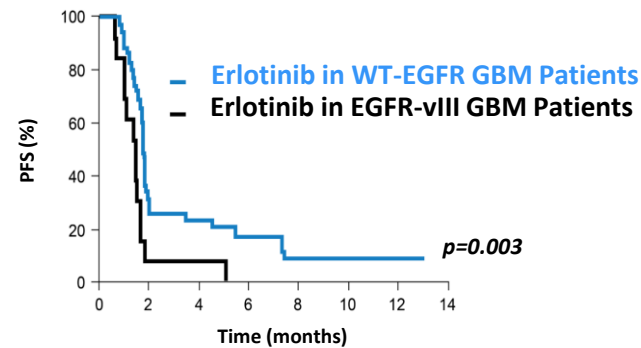


Reversible EGFR Inhibitors Show Potentially Detrimental Pharmacology in EGFR Driven GBM



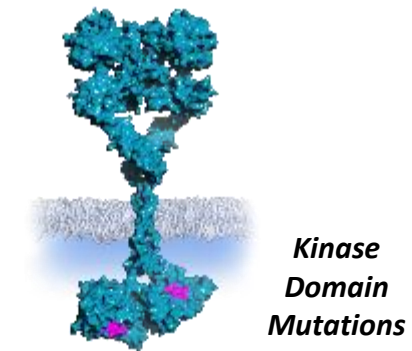
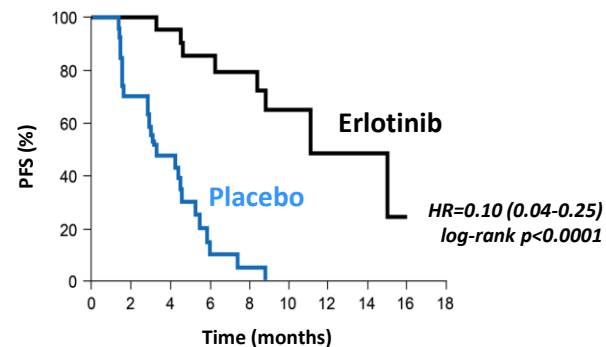
Current EGFR TKIs Do Not
Extend PFS in Patients
with GBM Mutations

GBM Trial¹



EGFR TKIs Extend PFS in
Patients with Kinase
Domain Mutations

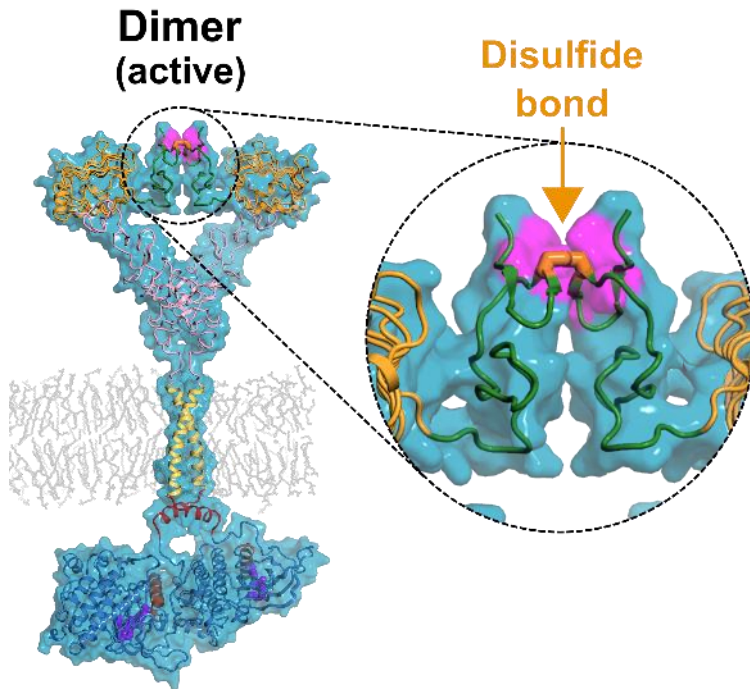
NSCLC Trial²



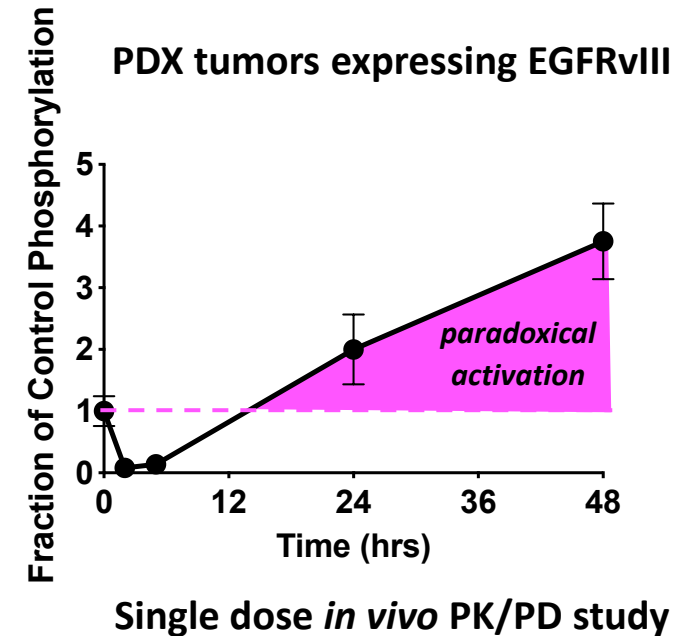
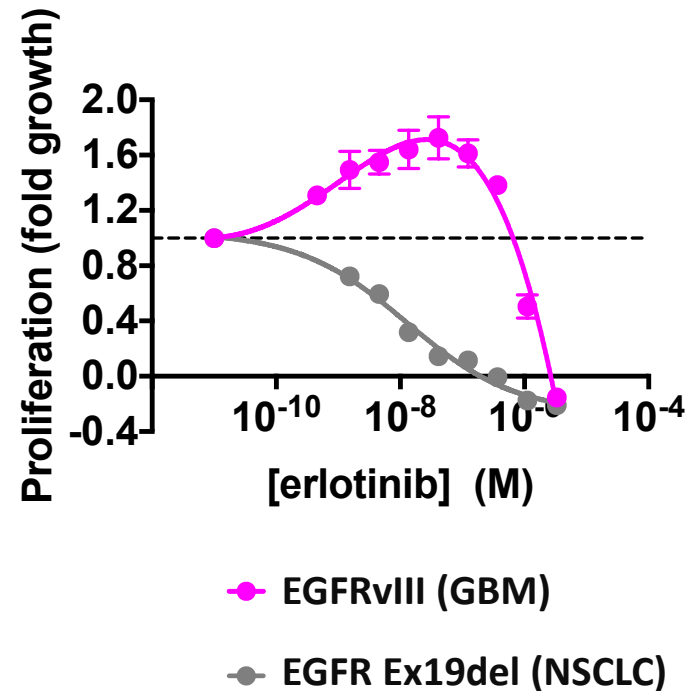
Black Diamond Revealed the Potential for Unwanted Paradoxical Activation of GBM Mutations by Reversible EGFR TKIs



The oncogenic conformation of mutant EGFR in GBM is a locked dimer



Reversible TKIs can stimulate the activity of mutant EGFR in GBM in preclinical models

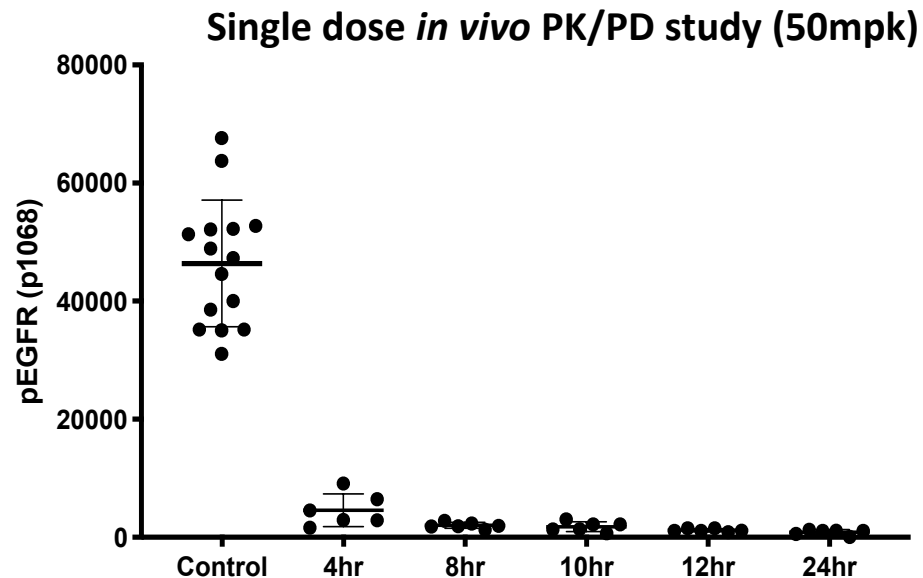


Inhibitors against EGFR mutants in GBM should be potent, selective & *irreversible* to avoid paradoxical activation

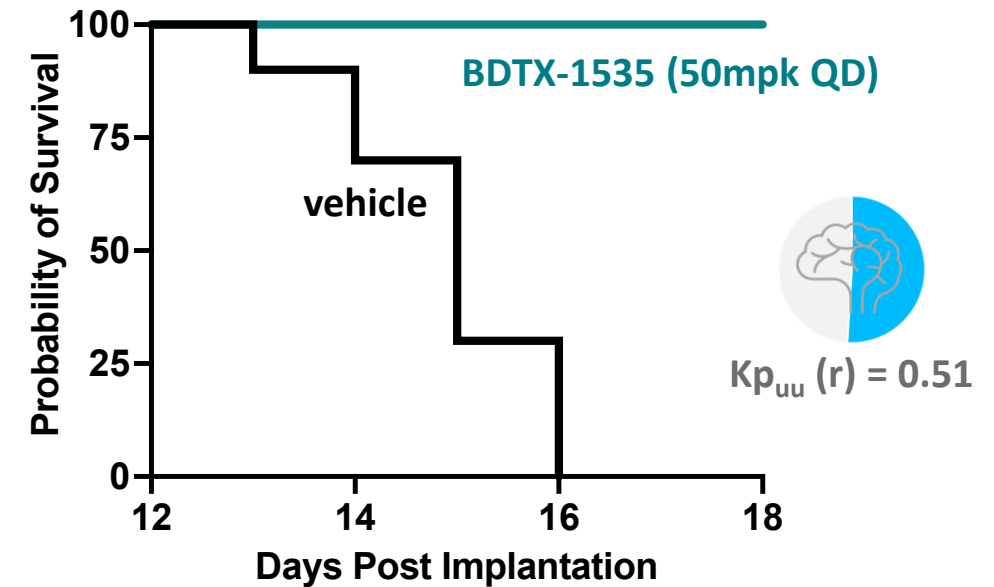
BDTX-1535 Addresses Unique Pharmacology of EGFR Mutations in GBM to Achieve Sustained Inhibition and Activity in Preclinical Models



Complete & sustained inhibition of pEGFR/pERK



Increased survival of intracranial GBM PDX tumors



BDTX-1535 Can Potentially Fill A Critical Need For a Brain-Penetrant Inhibitor That Addresses The Limitations Of Other GBM Therapies



Lessons From Past Failures



1

Heterogeneous expression of different EGFR oncogenic alterations within individual patients

Potent MasterKey inhibition of co-occurring EGFR alterations and amplification

2

Paradoxical activation of EGFR GBM oncogenes induced by reversible inhibitors

Overcomes paradoxical activation commonly found in GBM by reversible EGFR-TKIs

3

Poor tolerability driven by on target WT-EGFR activity

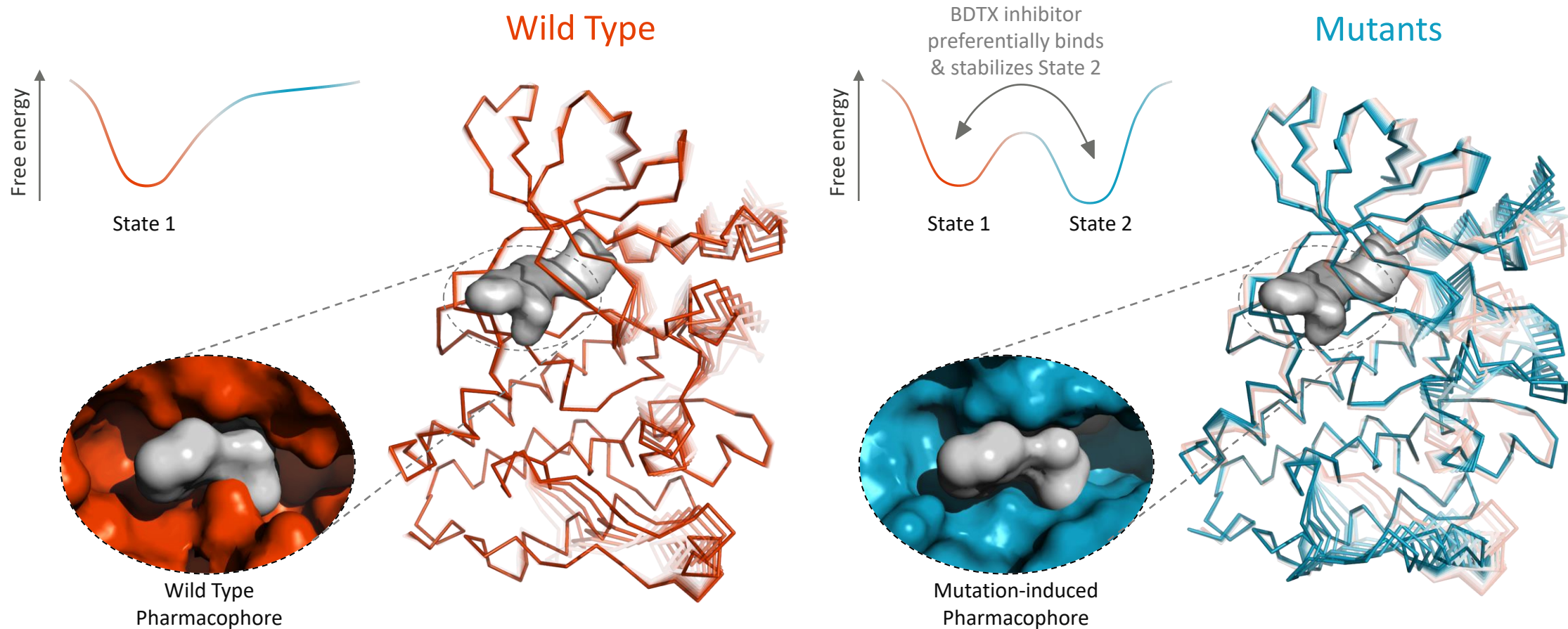
Spares WT-EGFR in normal cells while retaining potent activity against EGFR Alterations

4

Low brain exposure due to a lack of CNS penetrance

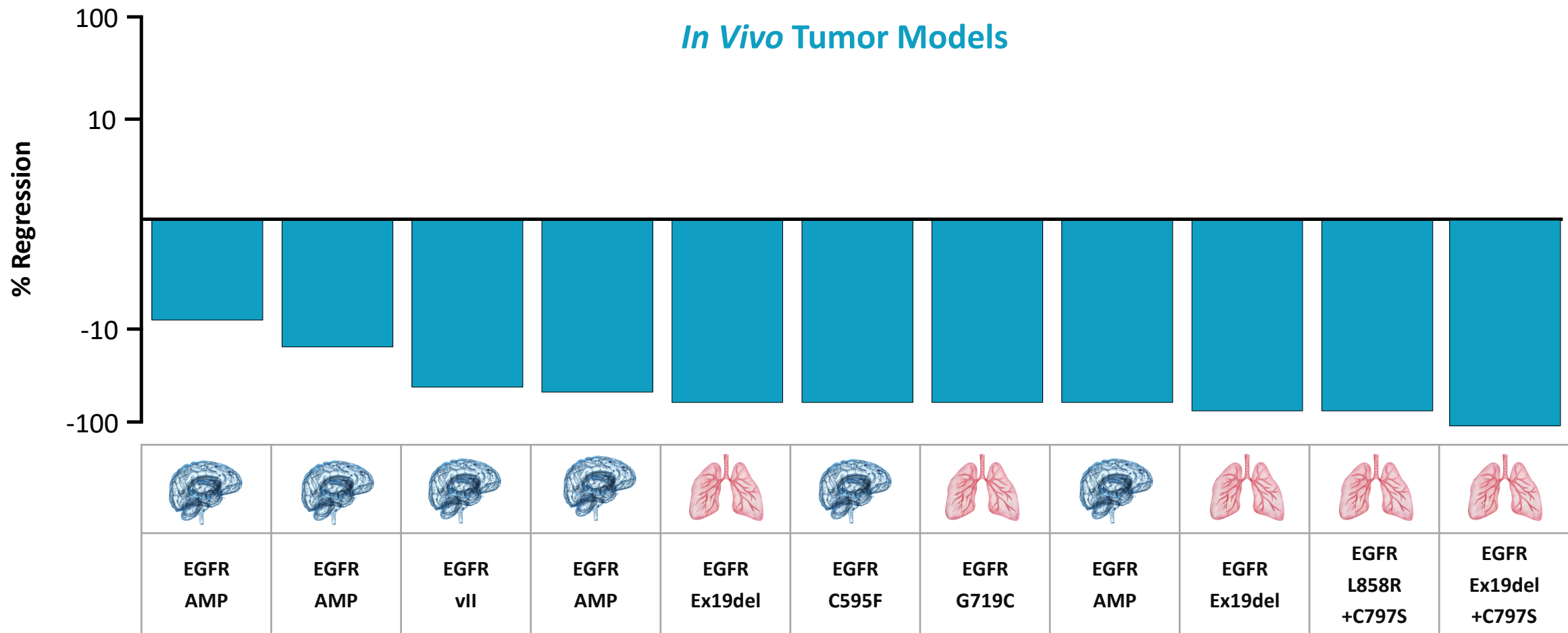
Designed to be brain penetrant to treat CNS tumors

MAP Discovery Engine Reveals Actionable Differences in Mutant Active Site Conformations

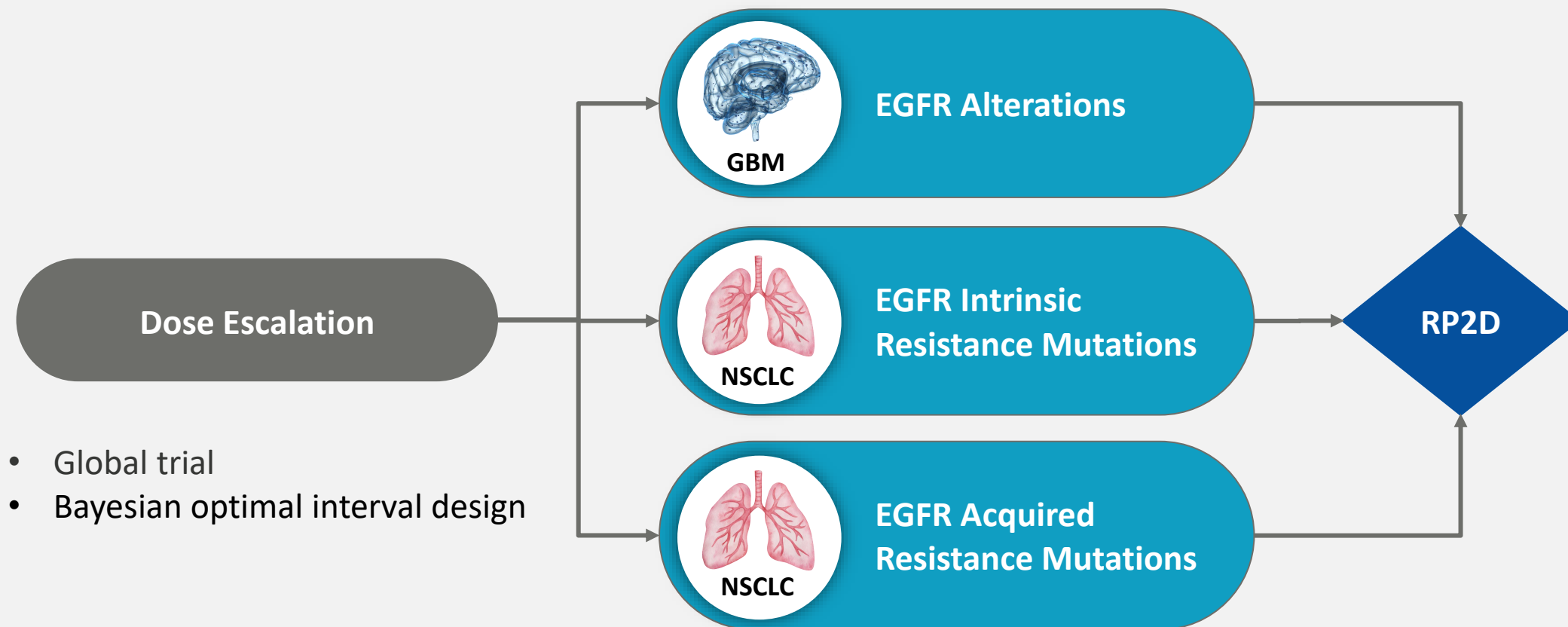


Clustered oncogenic variants with a common mutation-induced pharmacophore can be targeted by a BDTX inhibitor

BDTX-1535 Promotes Regression Across Range of Preclinical GBM & NSCLC Models Expressing MasterKey EGFR Mutations & EGFR Amplification

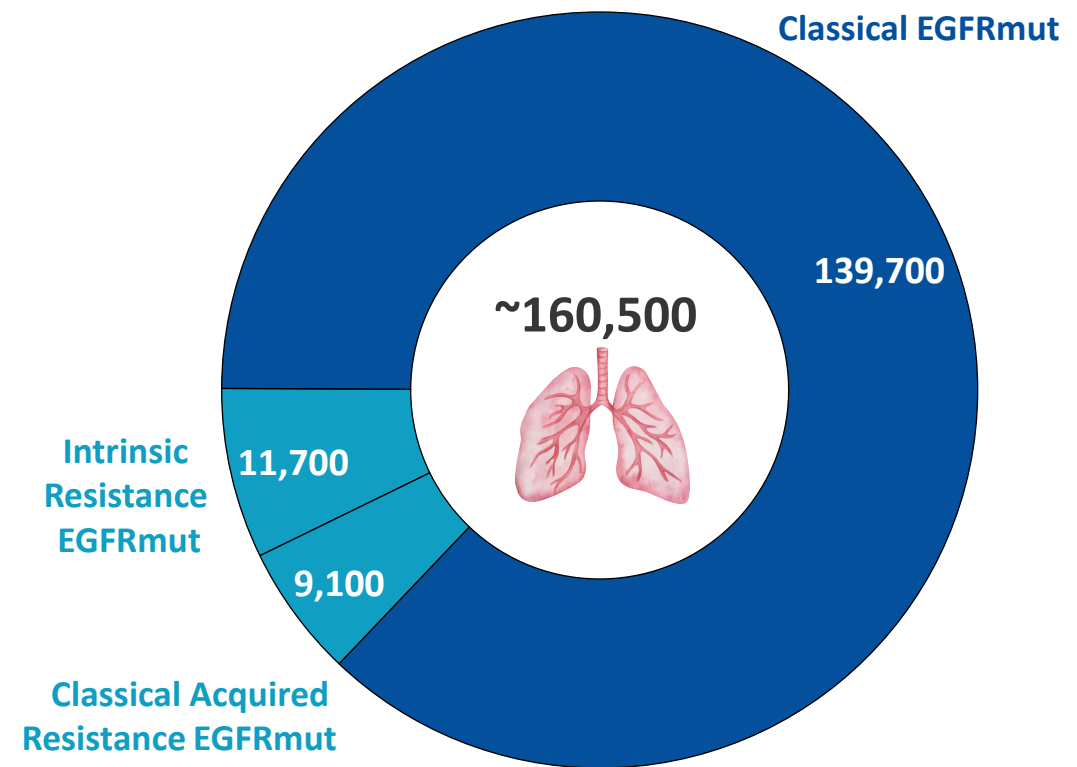
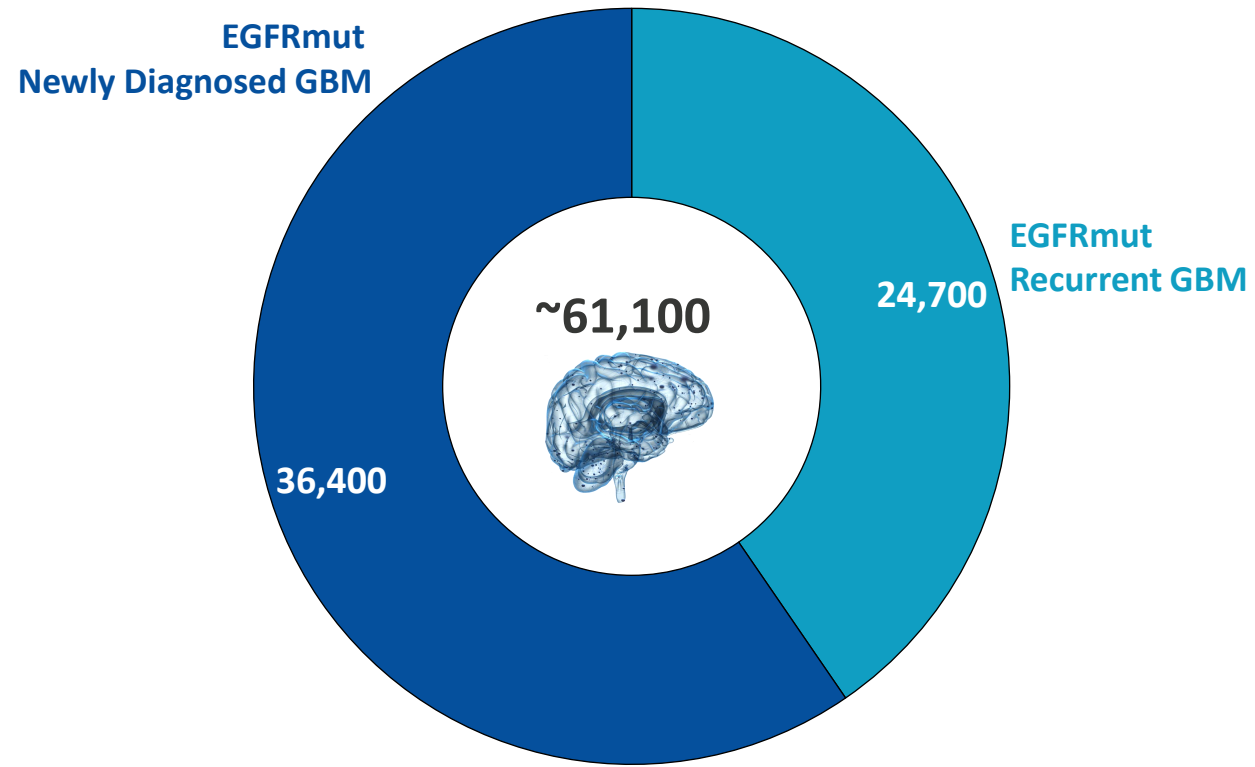


BDTX-1535: Focused, Biomarker-Driven First-in-Human Phase 1 Study Design



BDTX-1535: Large Addressable Patient Population Harboring MasterKey Mutations Across GBM and NSCLC

Addressable Patient Population (US / EU / Japan / China)



Sources: Epidemiology data from EvaluatePharma

BDTX-1535 is a Novel 4th Generation EGFR MasterKey Inhibitor Positioned to Address Unmet Needs in NSCLC and GBM



Potent & selective inhibition of EGFR mutations (Avg IC₅₀ ~3nM) that drive intrinsic and acquired resistance to current generation TKIs

- Irreversible inhibition of family of resistance mutations to 3rd-gen EGFR inhibitors in NSCLC
- Irreversible inhibitor of EGFR mutation family to address heterogeneity & avoid paradoxical activation of EGFR in GBM
- Regression across panel of in vivo tumor models harboring EGFR mutations in NSCLC and GBM



Robust brain penetration to treat patients with EGFR mutations and CNS tumors

- Unbound brain fraction (Kp_{uu}) = 0.51 in rat; activity demonstrated in intracranial GBM model



Favorable drug like properties

- Prolonged blood stability
- Projected t_{1/2} of 15 hours for QD dosing



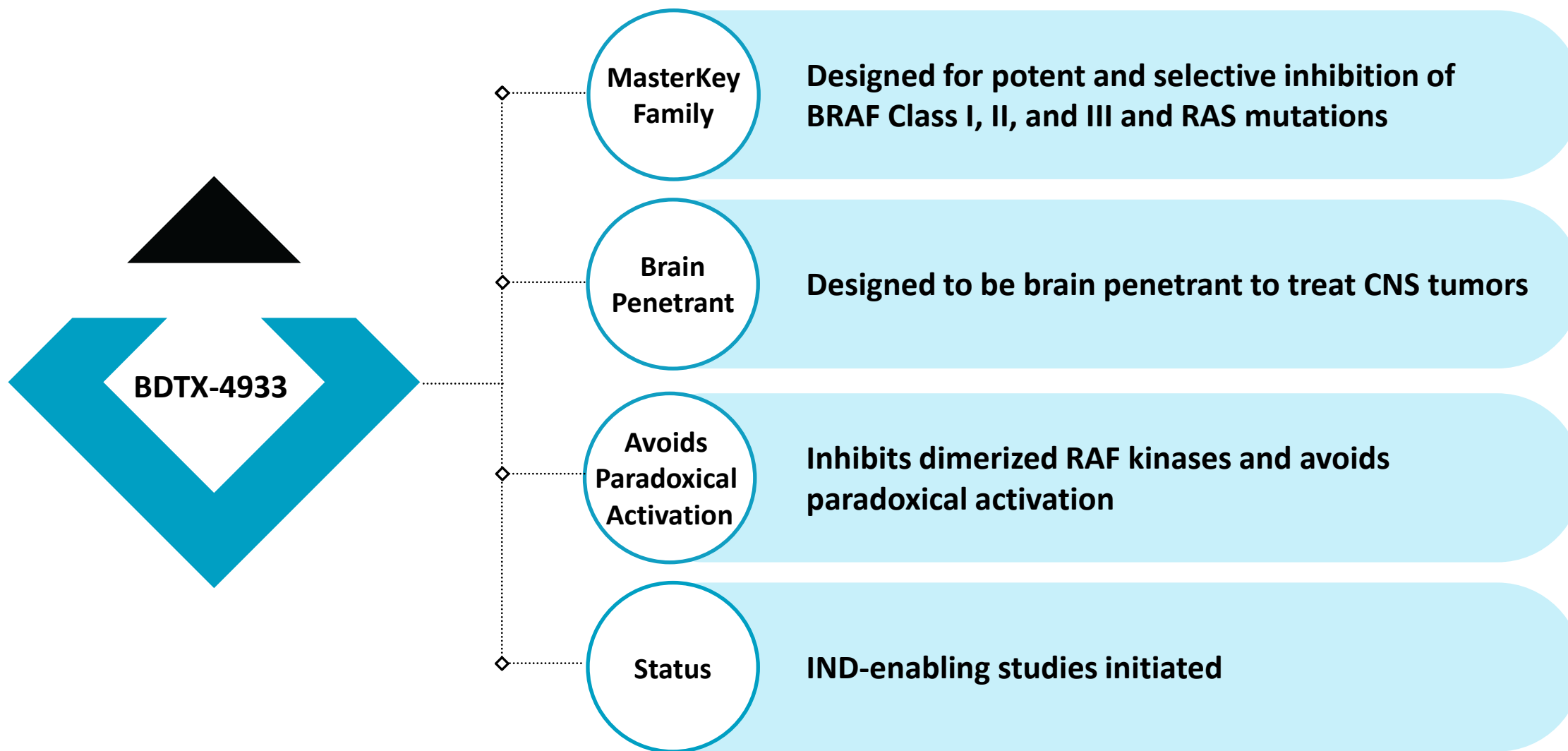
BDTX-4933

Brain-Penetrant RAF MasterKey Inhibitor of Oncogenic BRAF Class I, II, & III
and RAS Mutations



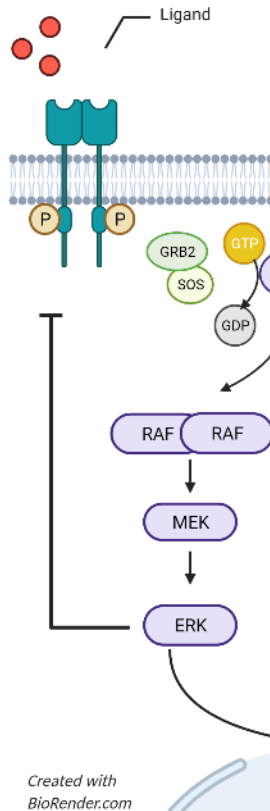
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BDTX-4933: Oral, Brain Penetrant RAF MasterKey Inhibitor



BRAF Alterations Drive Oncogenesis Through Hyperactivation of the MAP Kinase Pathway

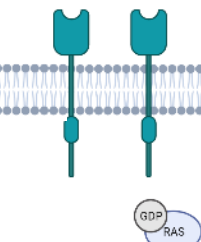
NORMAL RAS/BRAF SIGNALING



ABERRANT BRAF SIGNALING

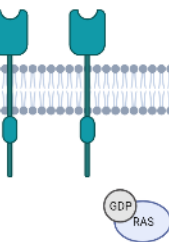
Class I Mutants

RAS INDEPENDENT
BRAF MONOMER
KINASE ACTIVITY



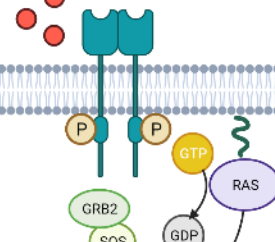
Class II Mutants

RAS INDEPENDENT
BRAF MUTANT HOMODIMERS
KINASE ACTIVITY



Class III Mutants

RAS DEPENDENT
BRAF MUTANT HETERODIMERS
IMPAIRED KINASE ACTIVITY



Survival
Proliferation
Cell-cycle progression

No approved drugs

BRAFTOVI
(encorafenib) 75 mg capsules

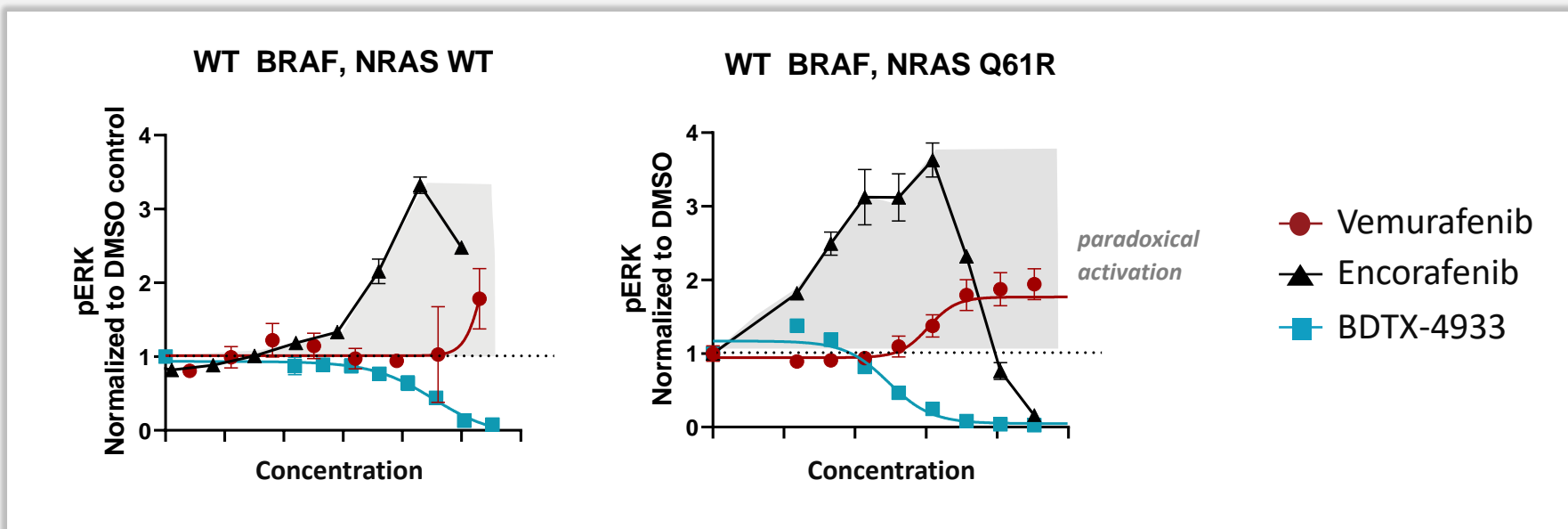
Zelboraf
vemurafenib

Tafinlar
(dabrafenib)

- MAPK signaling is a central pathway regulating cellular proliferation, cell-cycle progression, and survival
- Hyperactivation responsible for >40% of human cancer cases
- Activating BRAF alterations are associated with various cancers including melanoma and NSCLC
- Currently approved BRAF inhibitors only address Class I V600 mutations and lack CNS activity

BDTX-4933 Designed to Deliver Superior Activity by Avoiding Paradoxical Activation Independent of Context

Avoidance of Paradoxical Activation

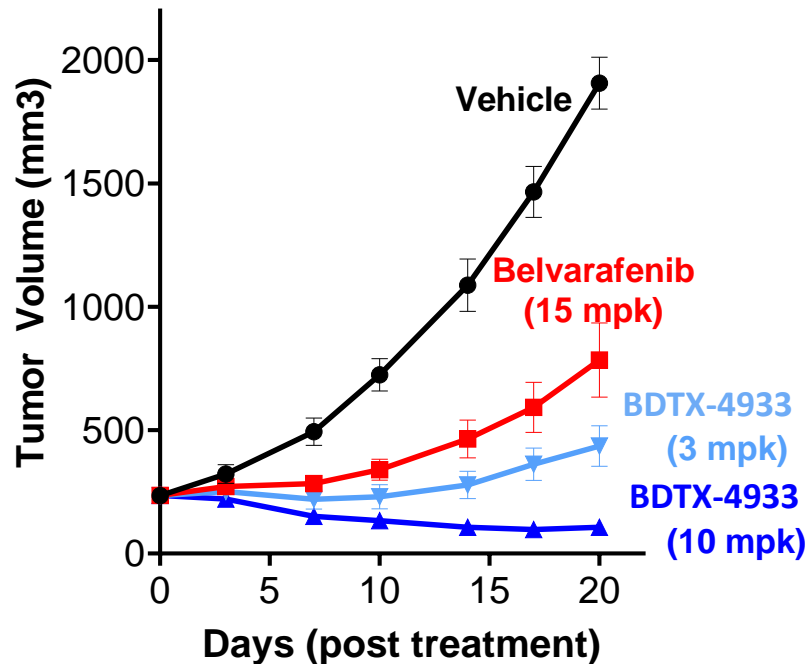


- Paradoxical activation occurs through activation of the non-inhibited RAF molecule in dimer
 - Limits efficacy through secondary malignancies and/or cutaneous toxicities
- Approved BRAF inhibitors demonstrate paradoxical activation
- Some investigational “paradox breaker” agents demonstrate context-dependent paradoxical activation

BDTX-4933 Exhibits Strong Anti-Tumor Activity Across All BRAF Mutation Classes in *In Vivo* Models

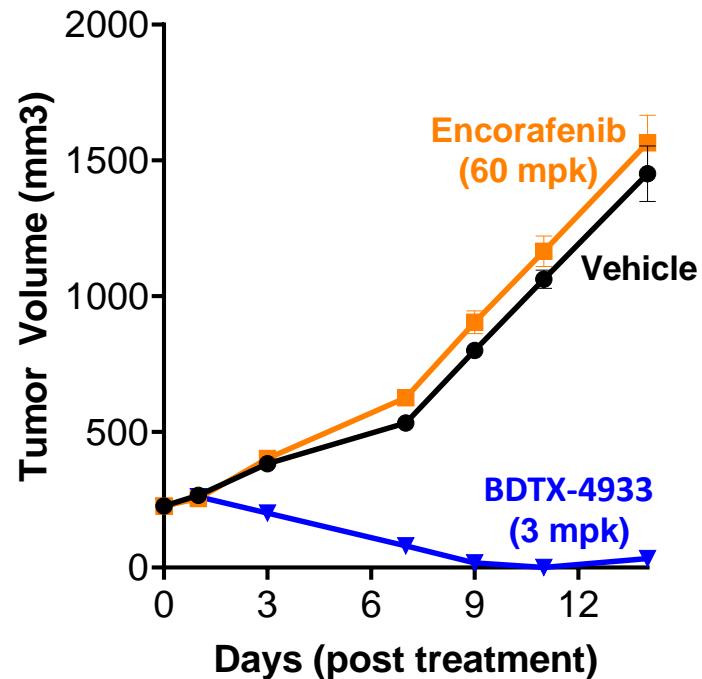
BRAF Class I

Mutant Tumor Model



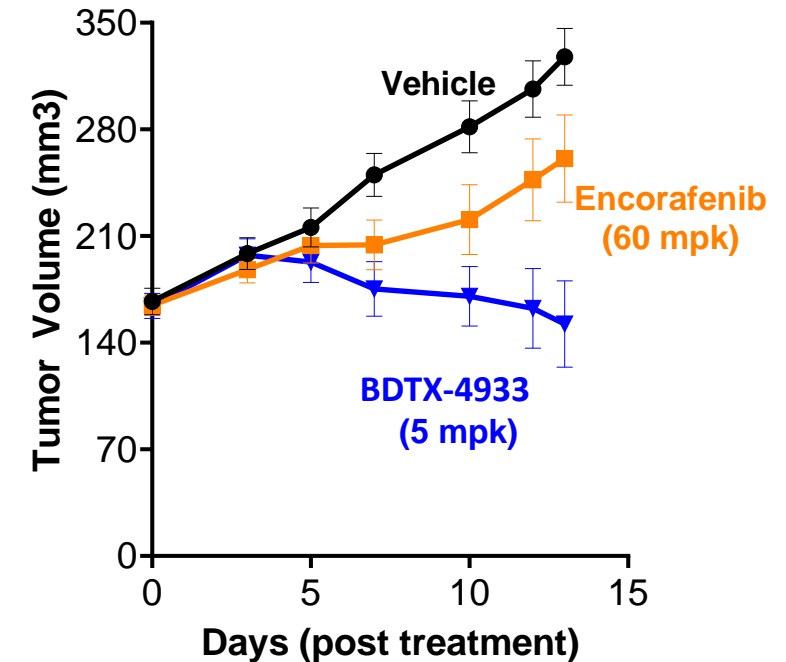
BRAF Class II

Mutant Tumor Model



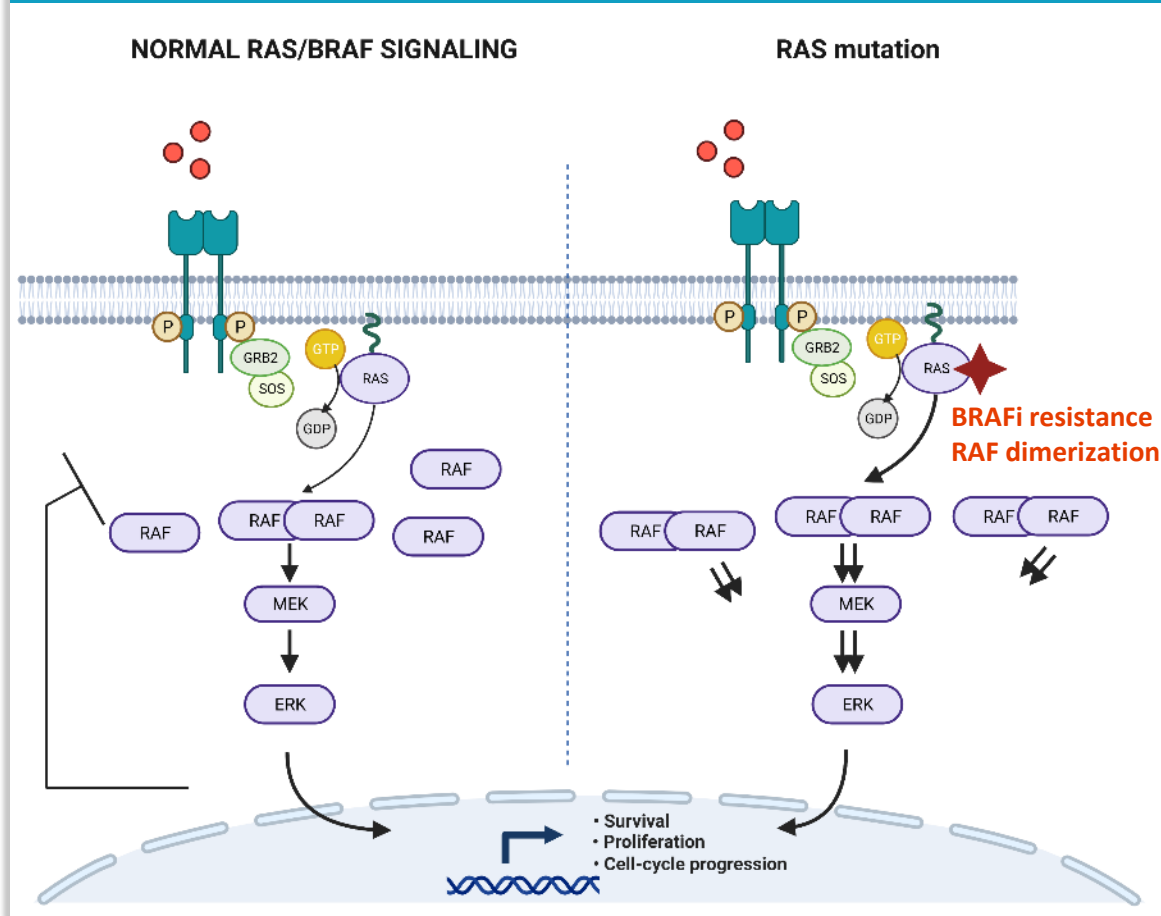
BRAF Class III

Mutant Tumor Model



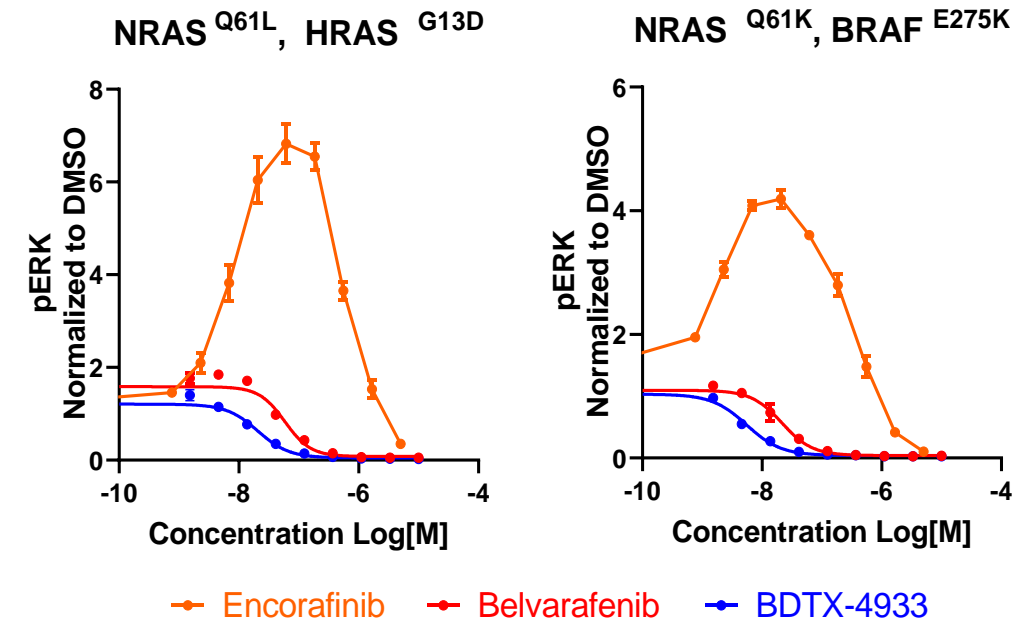
NRAS-mutant Driven Cancers: Additional Clinical Opportunity for BDTX-4933

Oncogenic NRAS mutations induce RAF dimerization and pathway activation

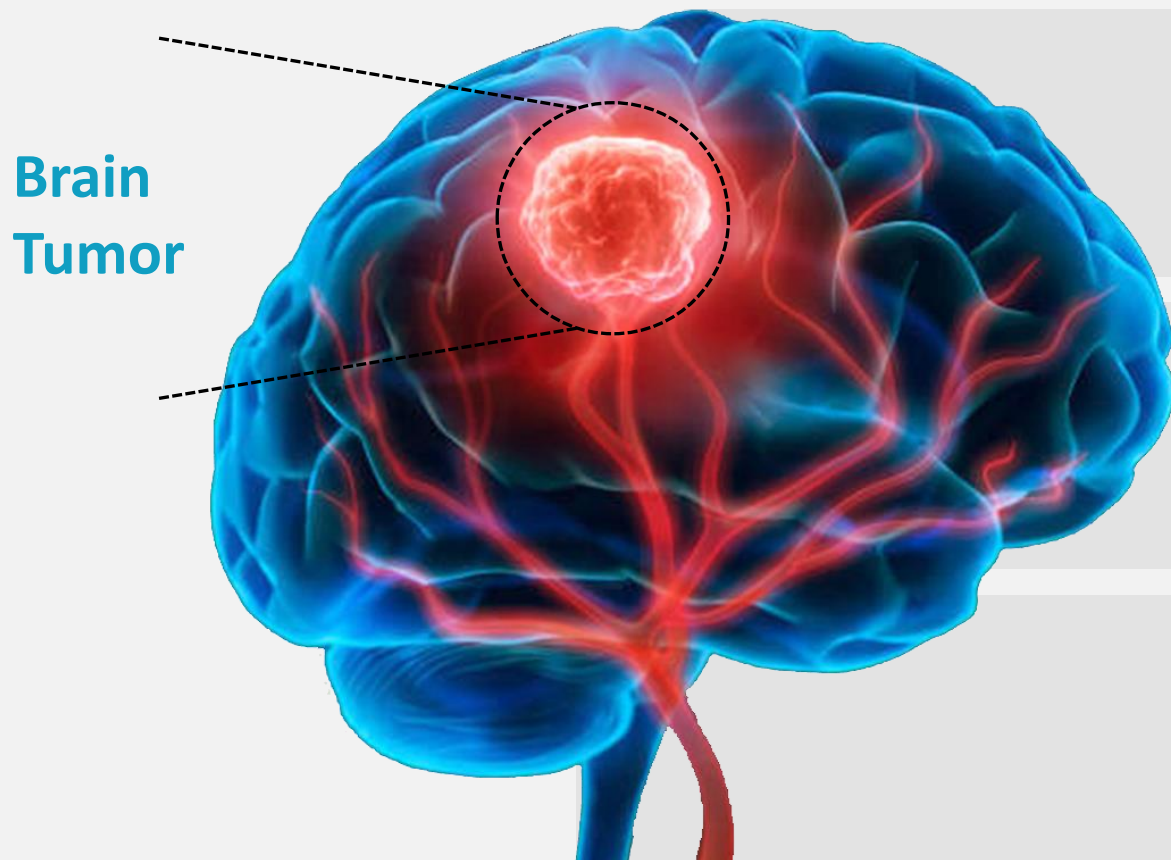


Created by BioRender

- NRAS-mutant melanoma represent ~20% of melanomas
- Acquired NRAS mutations associated with BRAF inhibitor use and brain metastases
- Clinical proof of concept: Belvarafenib in NRAS-mutant melanoma trial



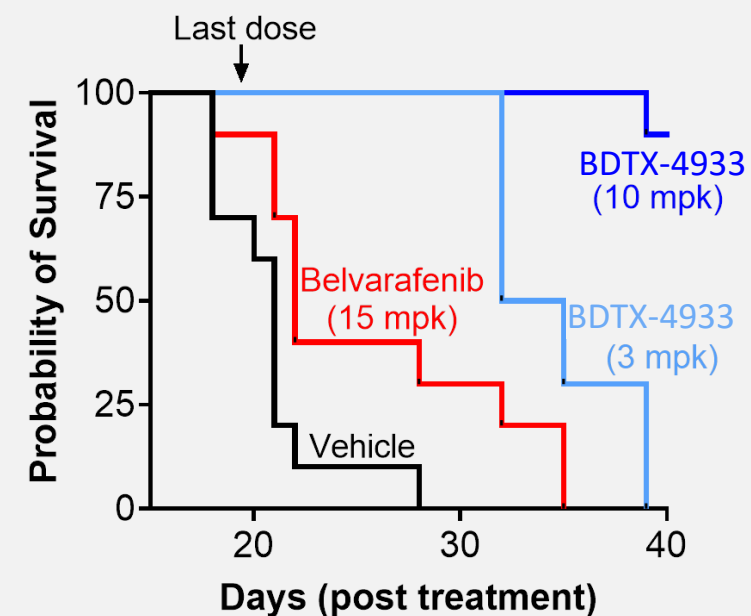
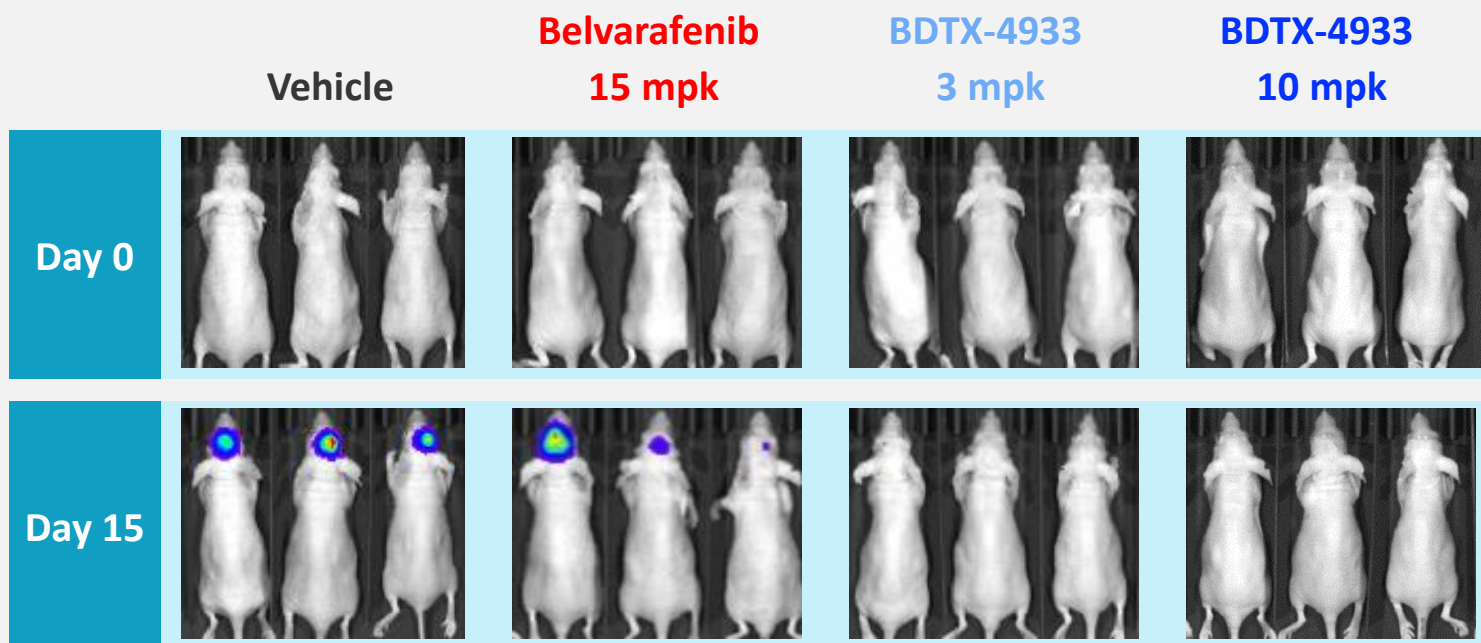
BDTX-4933 Designed to be Brain Penetrant to Treat CNS Disease



- CNS metastasis occurs in ~30-40%¹ of BRAF driven cancers
 - ~17,000² patients/year in the US
- BRAF and RAS mutations drive primary CNS tumors (e.g., glioma) in ~1,500² patients/year in the US
- Currently approved therapies are not brain penetrant

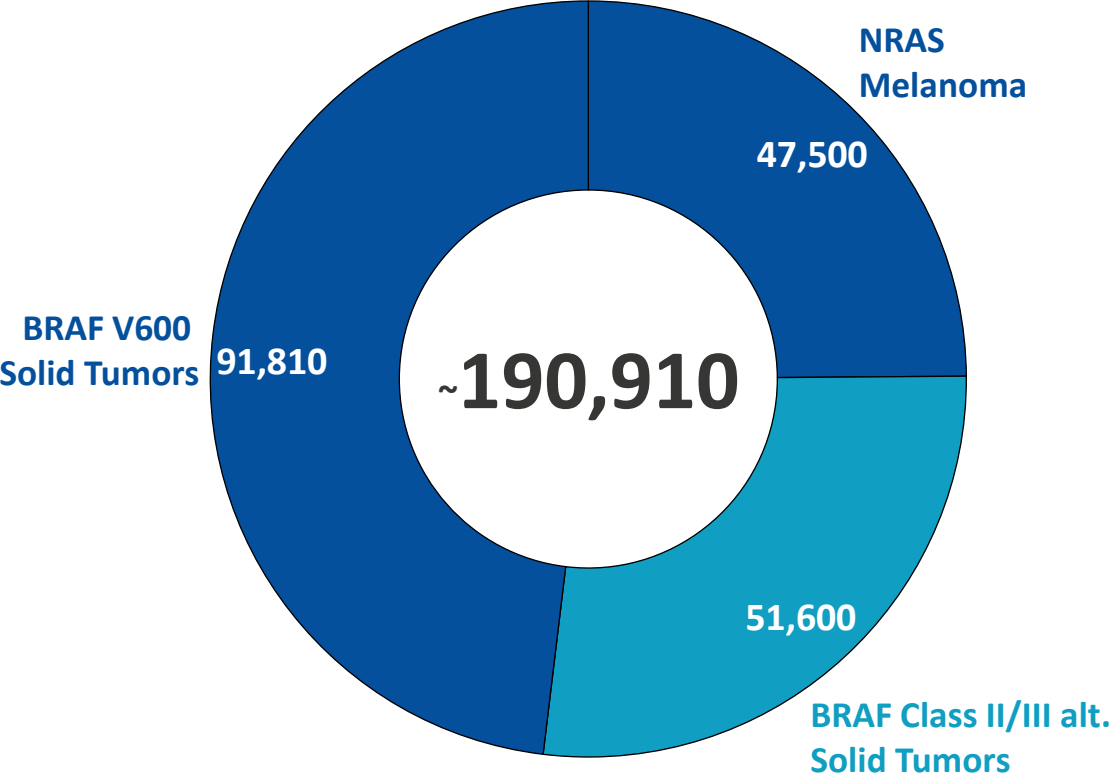
BDTX-4933 Is Brain Penetrant and Exhibits Robust Activity in Treating CNS Disease in *in vivo* models

BDTX-4933 prolongs survival in BRAF-V600E intracranial tumor model

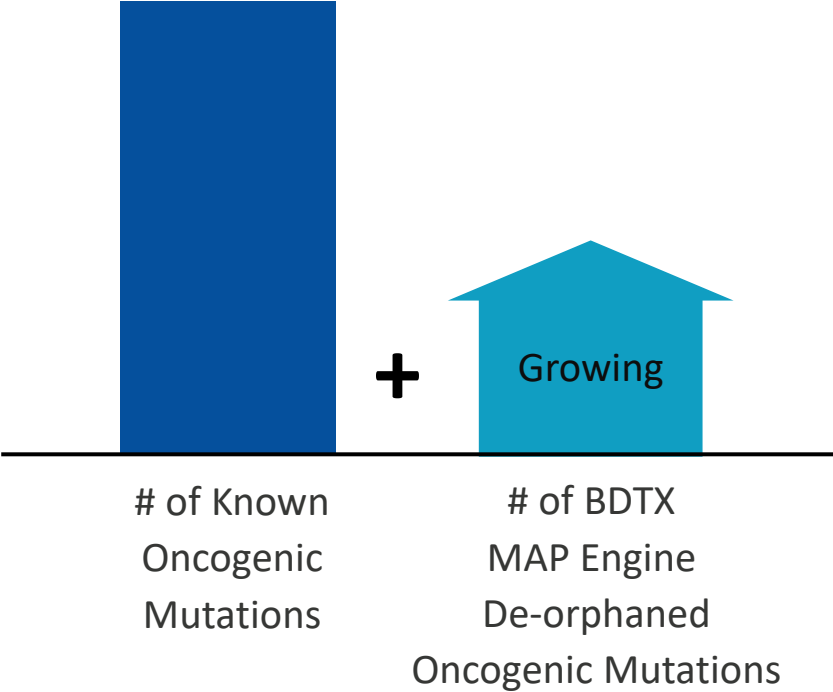


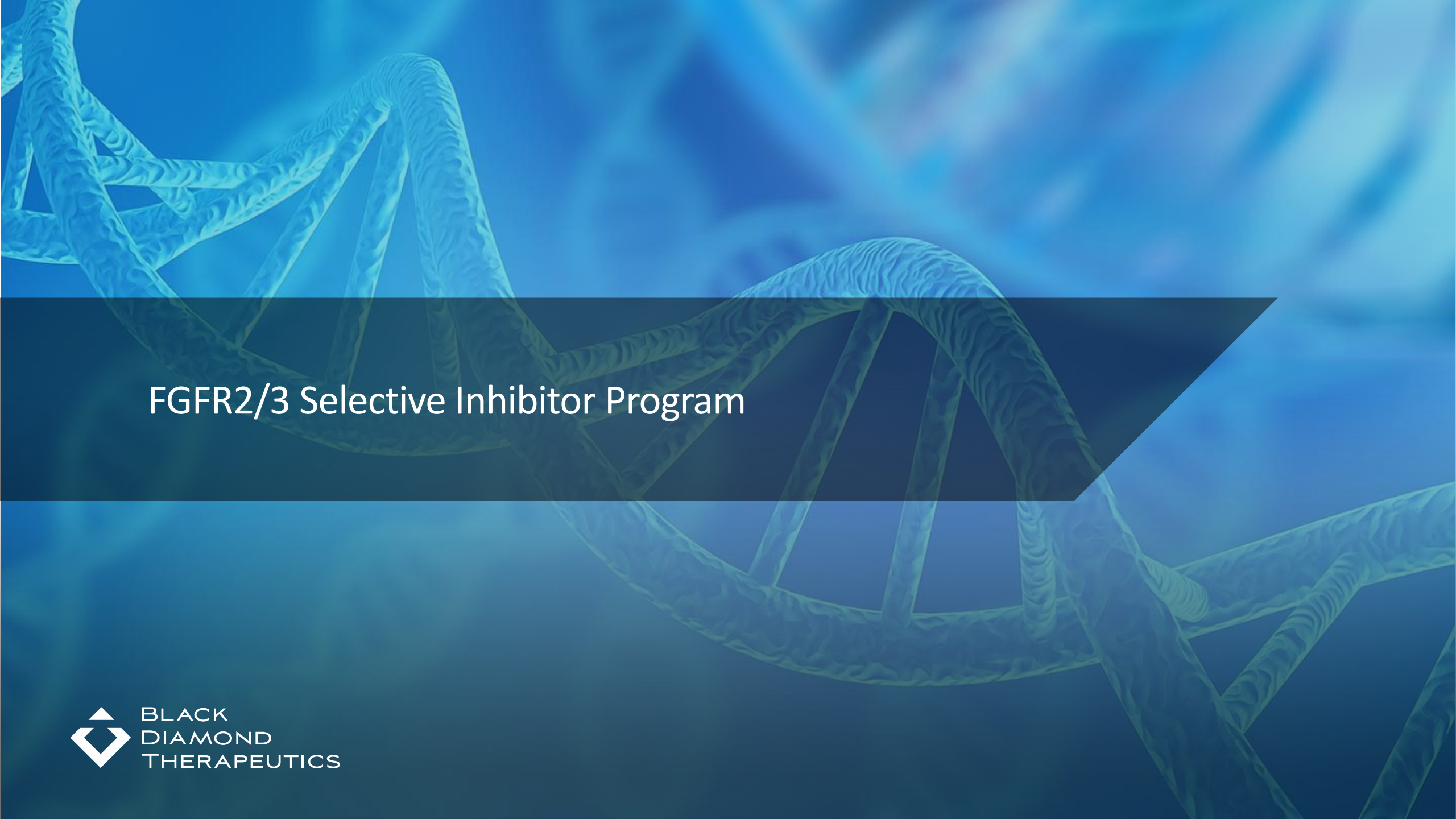
BDTX-4933: Potential *Best-in-Class*, RAF Masterkey Inhibitor For A Greater Number Of Patients With Overlooked Oncogenic Mutations

Addressable US / EU / JP Patient Population



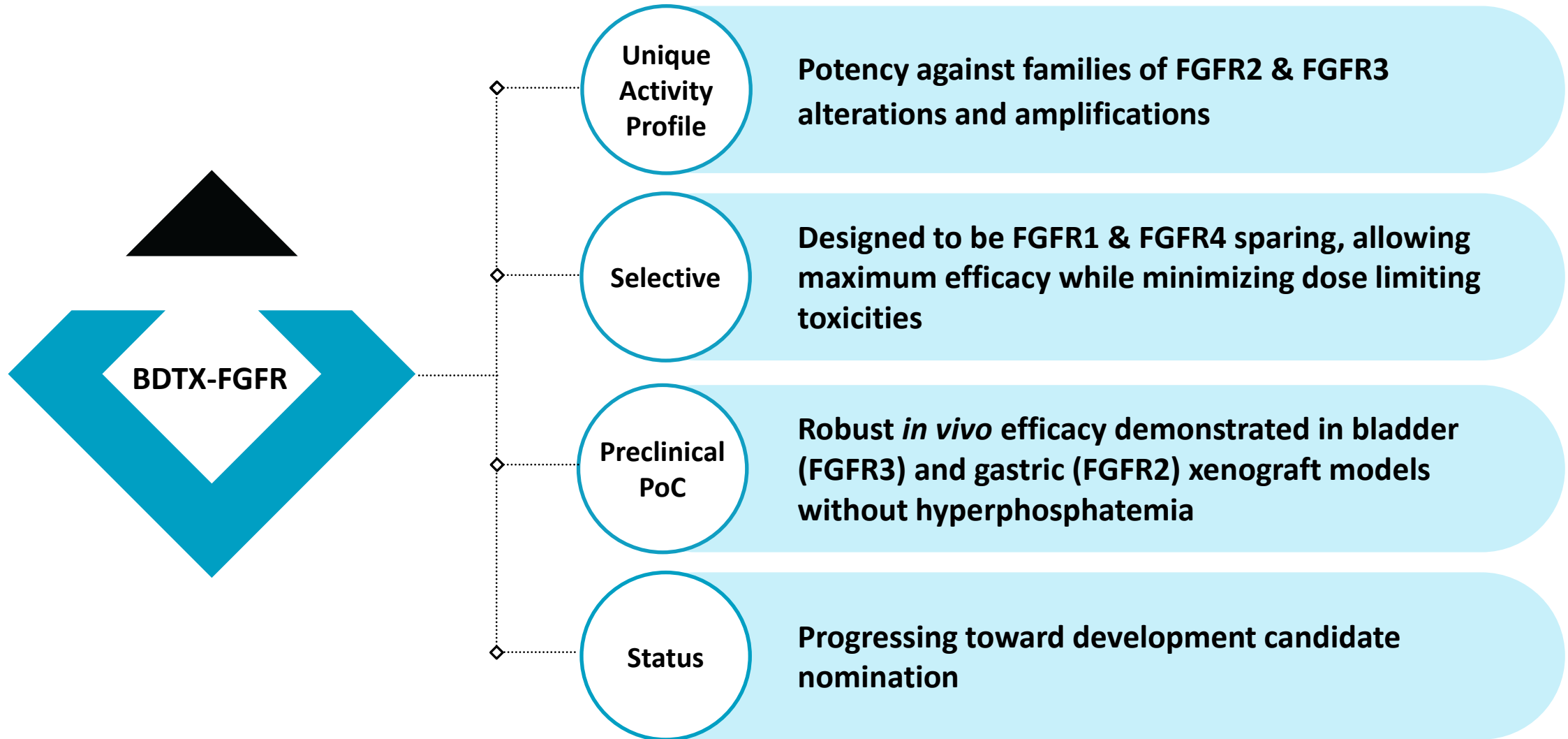
BDTX Is Growing The Addressable Patient Population By De-Orphaning Of Overlooked Mutations





FGFR2/3 Selective Inhibitor Program

BDTX-FGFR: Oral, Selective Small-Molecule FGFR2 & FGFR3 Inhibitor





MAP Drug Discovery Engine

MAP Drug Discovery Engine Unlocks Precision Medicine with a “MasterKey”

Proprietary MAP scoring *in silico*

Genomics



Proteomics



Develop MasterKey inhibitors against mutation families



Oncogenicity Prediction

Biological Validation

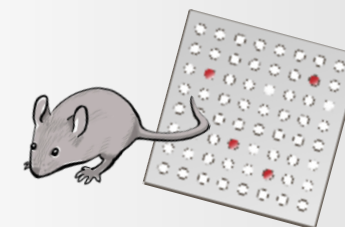
Masterkey
Therapy



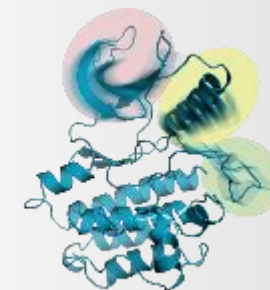
Drug
Discovery

Conformation-
based drug
design

Validate novel oncogenic driver mutations and targets



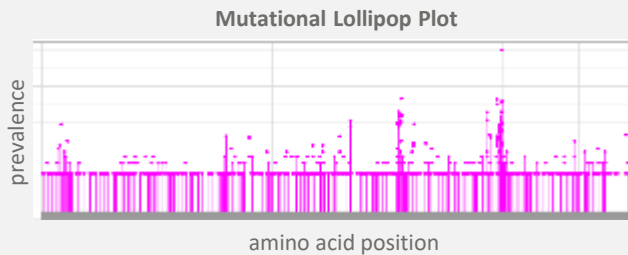
Employ structural and dynamic methods to identify oncogenic mutation families



MAP Drug Discovery Engine: A Scaled Approach to Extract Oncogenic MasterKey Mutation Families

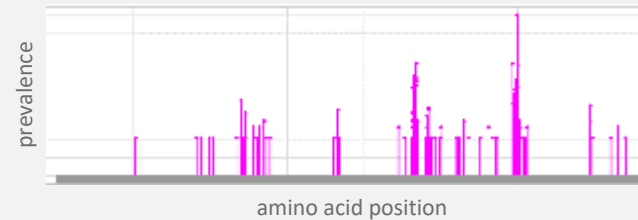
Population level clinical
mutation landscape

Thousands



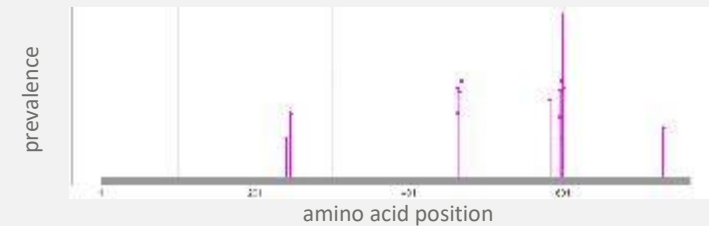
Computational *in-silico*
oncogenicity prediction

Hundreds

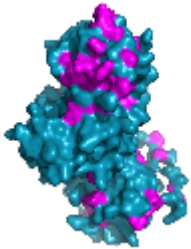


Experimentally validated
oncogenic MasterKey mutations

Tens



Oncogene





Corporate Overview

Deep Oncology and Small Molecule Drug Discovery and Development Experience

Leadership Team



David M. Epstein, Ph.D.
President & CEO



Liz Buck, Ph.D.
Chief Scientific Officer



Fang Ni, Pharm.D.
Chief Business Officer and
Chief Financial Officer



Sergey Yurasov
Chief Medical Officer



Brent Hatzis-Schoch, J.D.
COO and General Counsel



Elizabeth L. Montgomery
Chief People Officer



Board of Directors

Ali Behbahani, M.D.

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Kapil Dhingra, M.D.

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Wendy Dixon, Ph.D.

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CEO, Black Diamond Therapeutics, Inc.

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General Partner, Hatteras Ventures

Sam Kulkarni, Ph.D.

CEO, CRISPR Therapeutics AG

Alex Mayweg, Ph.D.

Managing Director, Versant Ventures

Garry Menzel

CEO, TCR2

Rajeev Shah

Managing Director, RA Capital

Mark Velleca, M.D., Ph.D.

CEO, StrideBio, Inc.

Cash Runway Expected to Enable Multiple Upcoming Milestones

Upcoming program milestones

- BDTX-1535 clinical data update in 2023
- BDTX-4933 IND filing in 1H 2023
- FGFR program progressing toward development candidate nomination
- Undisclosed program development candidate nomination in 2023

Strong balance sheet

- Approximately \$144.2 mm in cash, cash equivalents and investments as of September 30, 2022
- Cash runway into 3Q 2024

Expanding the Reach of Precision Medicine Through the Development of MasterKey Therapies

MasterKey therapies address oncogene mutation families; providing precision oncology medicines to greater numbers of patients with genetically defined tumors

Clinical and late-preclinical pipeline of MasterKey inhibitors derived from our MAP drug discovery engine targeting oncogenic EGFR, RAF, FGFR2/3 and additional undisclosed targets

Our proprietary **MAP drug discovery engine** is designed to:

- Predict and validate novel oncogenic mutant families from population level tumor genomics
- Pioneer mutant family conformation-based MasterKey drug design
- Provide opportunities beyond oncology and small molecules

BDTX-1535: a brain-penetrant, mutant selective, irreversible EGFR MasterKey inhibitor, currently in Phase 1 development for treatment of patients with GBM and NSCLC driven by EGFR intrinsic & acquired resistance mutations

BDTX-4933: a brain-penetrant RAF MasterKey inhibitor targeting oncogenic BRAF Class I, II, III and RAS mutations, currently in IND-enabling studies



Thank You

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