

Tumor Targeted Immunostimulants; A Promising Approach to *In Situ* Immunization

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Sutro Clinical Pipeline

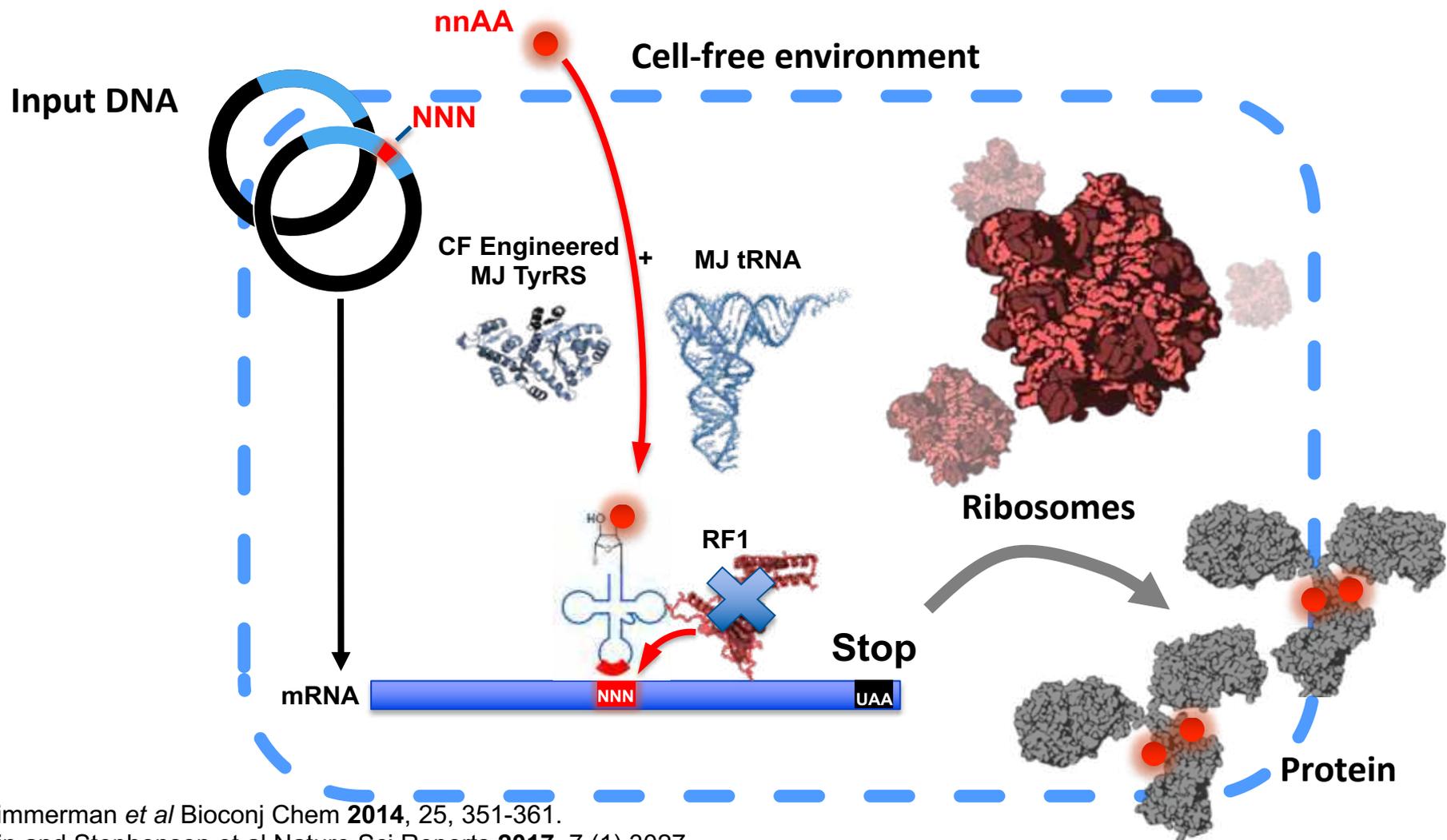
Owned and Partnered Programs

PROGRAM	DISCOVERY	PRECLINICAL	PHASE 1	PHASE 2/3	MILESTONE	COMMERCIAL RIGHTS
FolRα - targeting ADC STRO-002	Ovarian and Endometrial Cancer				Additional Clinical Data Expected in 1H20	 Worldwide Rights
CD74 – targeting ADC STRO-001	Multiple Myeloma (Orphan Drug Designation); Lymphomas: DLBCL, Mantle Cell, Follicular				Additional Clinical Data Expected in 1H20	
Multiple Oncology & I/O Programs	Oncology					
BCMA – targeting ADC CC-99712	Multiple Myeloma				Trial Enrolling BMS Worldwide Rights	 (a)
Bispecific ADC	Oncology				GMP supply in process	 (b)
Cytokine Derivatives	Oncology & Autoimmune					
	Oncology					
PD1-LAG3	ImmunoOncology					  (a)
BCMA-CD3	Multiple Myeloma					
PD1-TIM3	ImmunoOncology					

(a) BMS automatically obtained worldwide rights to the BCMA - targeting ADC—the first collaboration product candidate to achieve IND clearance in the United States. Additionally, there are three programs to which BMS currently has ex-U.S. rights and Sutro currently has U.S. rights. Sutro is eligible for milestones and royalties on each of the four product candidates.

(b) EMD Serono is the U.S. healthcare business of Merck KGaA, Darmstadt, Germany.

Sutro's XpressCF+™ Platform: Incorporation of Non-natural Amino Acids



Zimmerman *et al* Bioconj Chem **2014**, 25, 351-361.

Yin and Stephenson *et al* Nature Sci Reports **2017**, 7 (1) 3027.

Wholly Owned Manufacturing Advantage – XpressCF™

Accelerating the development of potential best-in-class protein therapeutics

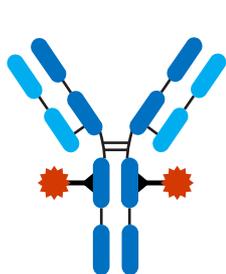
Potential Best-in-Class Protein Therapeutics

- Rapid generation of diverse protein structures enables empirical assessment and **selection of optimal candidates**
- Can **accelerate time to IND by 9 - 15 months** compared to conventional technologies
- **Homogeneous drug products** generated precisely according to specifications

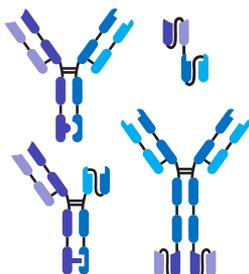


Differentiated Attributes of XpressCF™

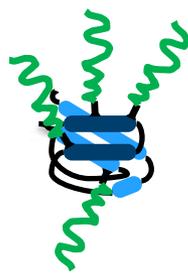
- **Cell-free** protein production process generates homogenous products from DNA sequences **in <24 hours**
- **Consistent production method used** across scale-up — from discovery to commercial manufacturing
- Enables **site-specific, efficient and complete** conjugation to non-natural amino acids



ADCs



Bispecifics

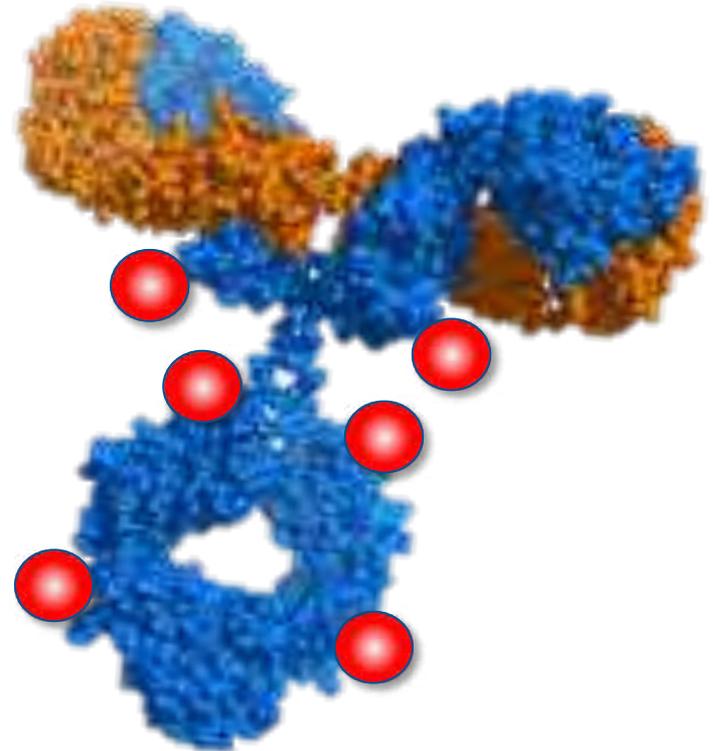


Cytokine-based
I/O Therapeutics

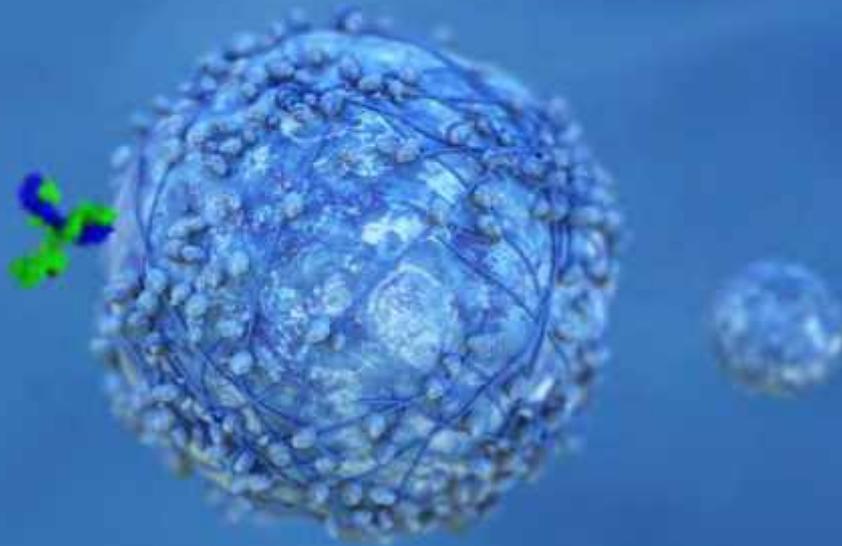


Sutro Platform Enables Rapid & Precise Optimization of single species ADCs

- ADCs produced in a few days
- **Structure-Activity optimization allows screening for**
 - Optimal Antibody discovery
 - Sites of drug-linker attachment
 - Optimal combination of sites
 - Precise Drug/Antibody Ratio
 - Refinement of linker and warhead attributes
- **Good product stability**



Specific Conjugation-Optimized Sites Drives Superior Therapeutic Index with First and Best-in Class potential



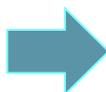
STRO-002: FoIR α ADC

Potential Best-in-Class ADC
for Ovarian and Endometrial Cancers

STRO-002: Overcoming Therapeutic Window Limitations of 1st Generation ADCs

STRO-002 Properties

- Homogeneous ADC product generated from Sutro's XpressCF™ platform.
- Optimized cytotoxin positioning and consistent drug-antibody ratio (DAR = 4)
- Potent and Sutro proprietary hemiasterlin-derivative warhead
- Cleavable linker warhead designed for optimized pharmacology



Implications for Best-in-Class Potential

- Potential for improved therapeutic index through homogeneous delivery of cytotoxin to tumor.
- Many designs tested to identify STRO-002, the candidate with potential for best potency and safety
- Efficacious, potent killing of tumor cells
- Rapid clearance of toxic catabolite **after** release & cell killing in tumor; potential for improved safety

No ocular toxicity observed in NHP study

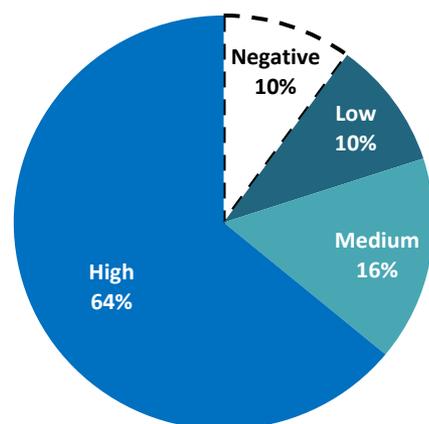
STRO-002: Targeting FolR α in Ovarian and Endometrial Cancers

FolR α

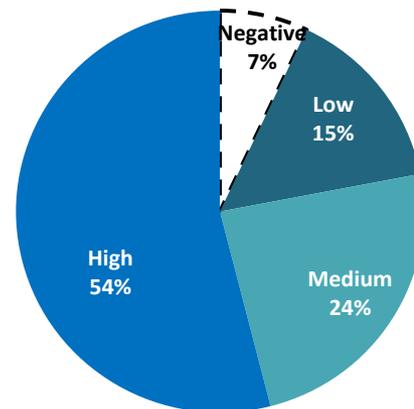
- ✓ Clinically validated target + site directed conjugation resulting in homogeneous ADC
- ✓ Expressed on a variety of tumor types
- ✓ Limited expression in normal tissue

FolR α expressed in more than 90% of evaluated ovarian and endometrial cancer tissue samples^(a)

Ovarian



Endometrial

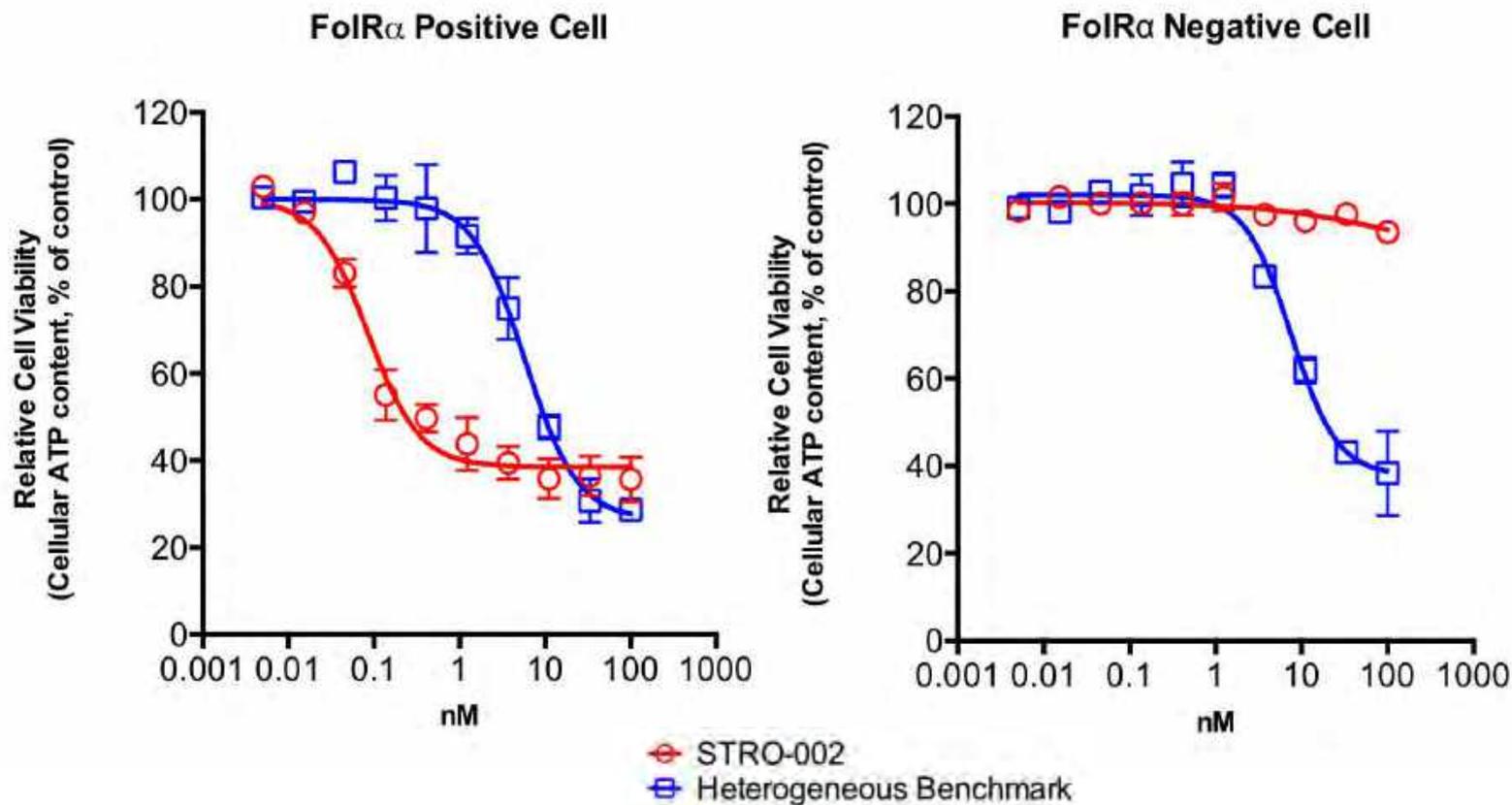


FolR α Expression Appears to Correlate with Disease Progression in Ovarian Cancer

(a) Source: Sutro Biopharma report, Expression Of Folate Receptor Alpha In Ovarian And Endometrial Cancer Samples, TR-TPPD-0039-V1.0, dated March 12, 2018.

STRO-002 in Ovarian Cancer

Design features facilitate improved potency and specificity

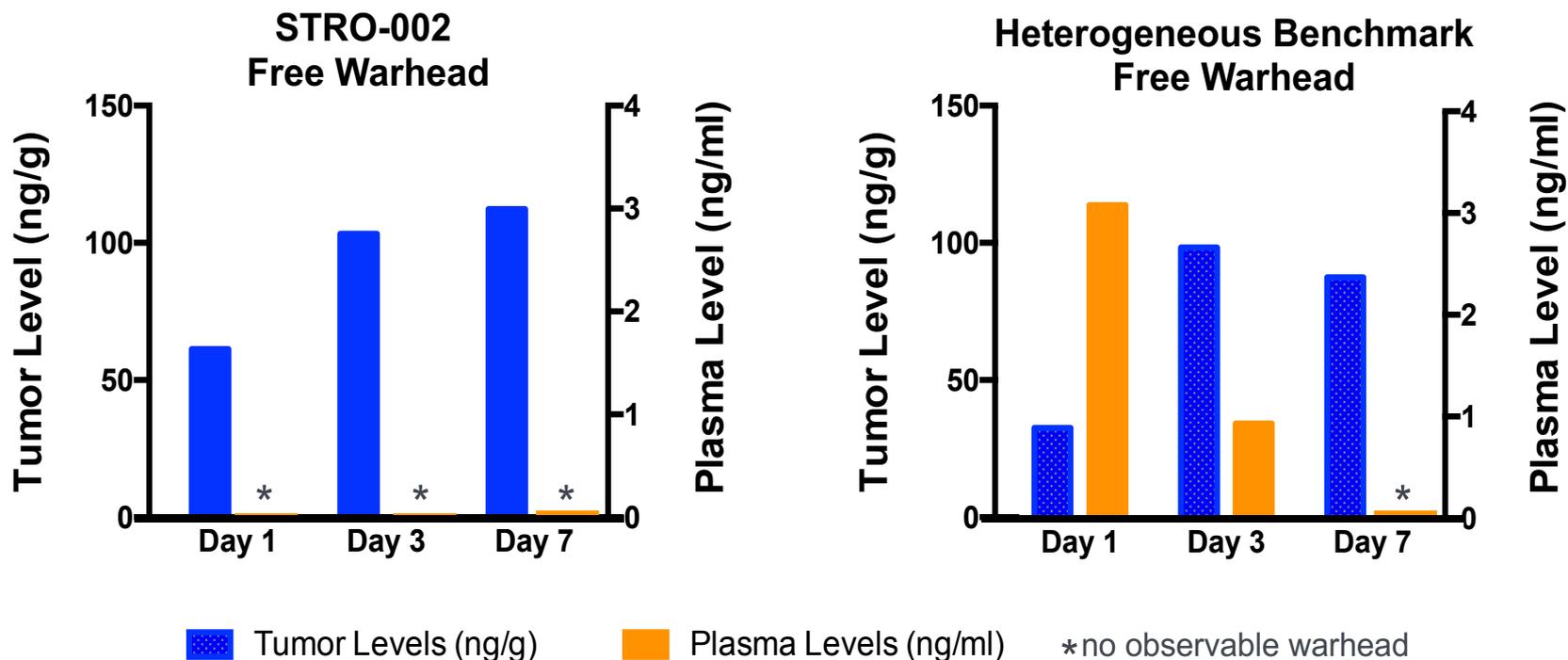


STRO-002 Demonstrates More Potent Cell Killing Compared to the Benchmark and Has Minimal Off-Target Activity

STRO-002: A Potentially Superior FoIR α ADC

Improved stability can widen therapeutic index

Mouse Tumor Model – Free Warhead in Tumor vs. Blood After Dosing



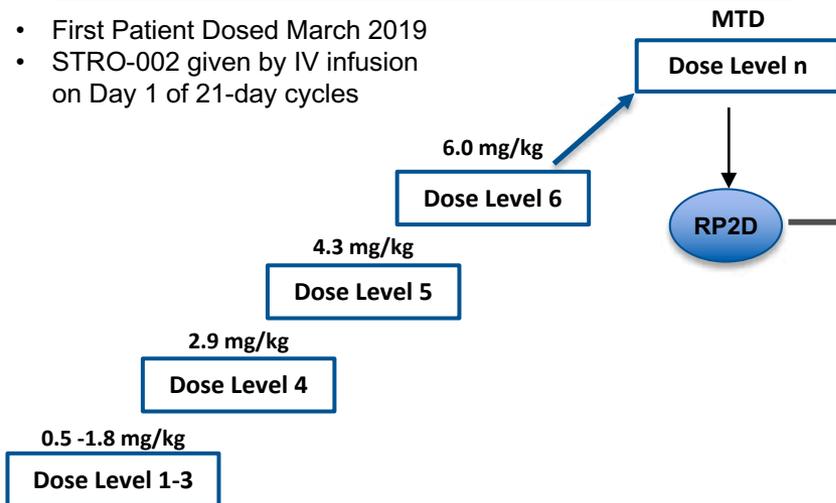
No Evidence of STRO-002 Free Warhead Circulating in the Blood Post Dosing
No evidence of Free Warhead Accumulation in FoIR α Negative Tumors

Source: Sutro Biopharma report, In Vivo Catabolite Profiling for SP8193 and SP8435 in Tumor and Plasma, TR-PHRM-0036-V1.1, dated January 8, 2018.

STRO-002 Phase 1 Clinical Trial Design

Part 1 — Dose Escalation (1 Cohort: Ovarian)

- First Patient Dosed March 2019
- STRO-002 given by IV infusion on Day 1 of 21-day cycles



Part 2 — Dose Expansion (2 Cohorts)

Up to:

n = 40



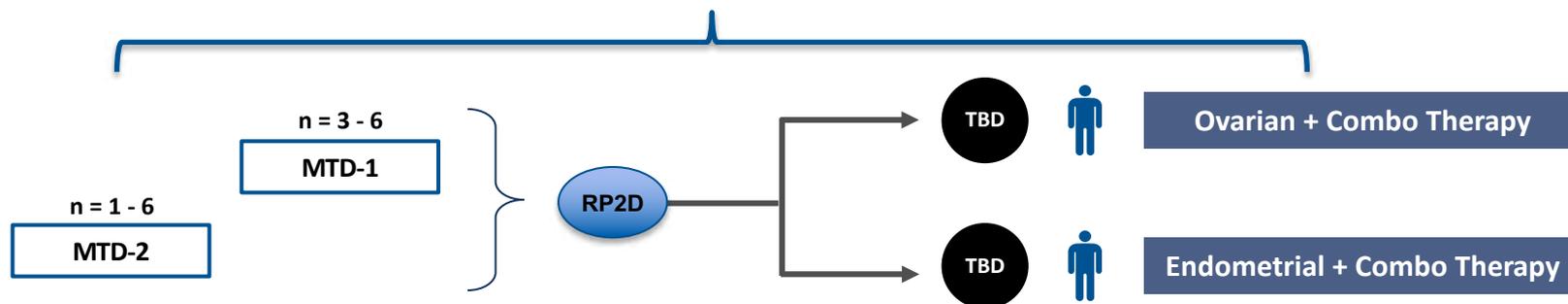
Ovarian

n = 40



Endometrial

Anticipated combination study



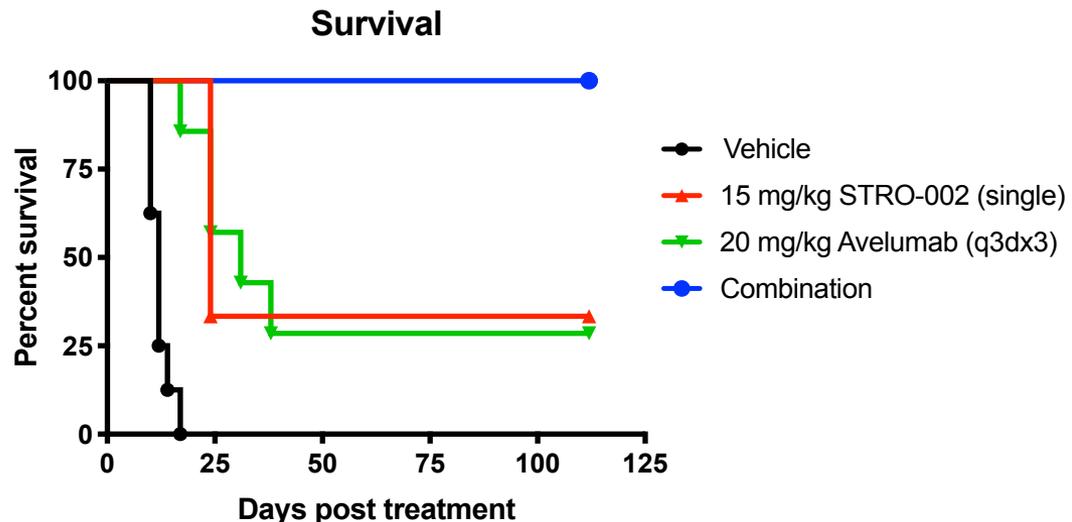
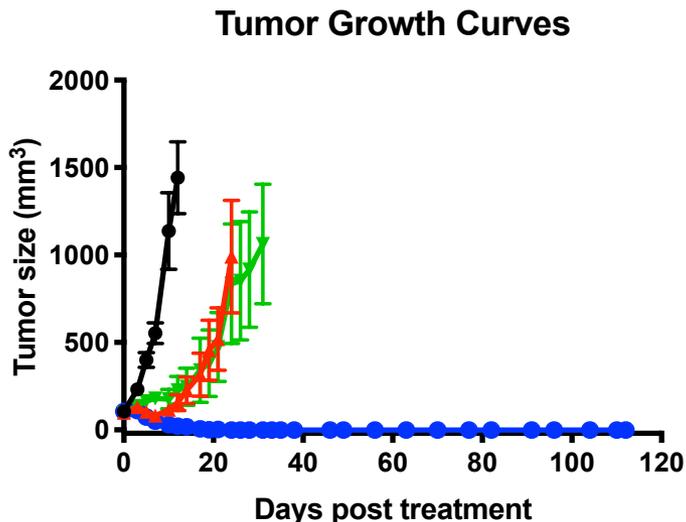
FPD in 1Q19

STRO-002 Phase 1 Emerging Clinical Data in Ovarian Cancer (All Comers)

- **STRO-002 has been well tolerated**
 - No DLTs or infusion reactions have been observed
 - No ocular toxicity observed; No prophylactic corticosteroid eye drops being utilized
- **MTD not yet determined**
 - Dose escalation continuing at 6.0 mg/kg
- **Preliminary evidence of clinical benefit and anti-tumor activity**
 - One confirmed PR by RECIST 1.1 (Cycle 5) with a confirmed CA-125 response
 - Five patients have stable disease per RECIST 1.1 (confirmed & unconfirmed) in first 13 patients

Data as of Oct 15, 2019
Presented at AACR-NCI-EORTC 2019

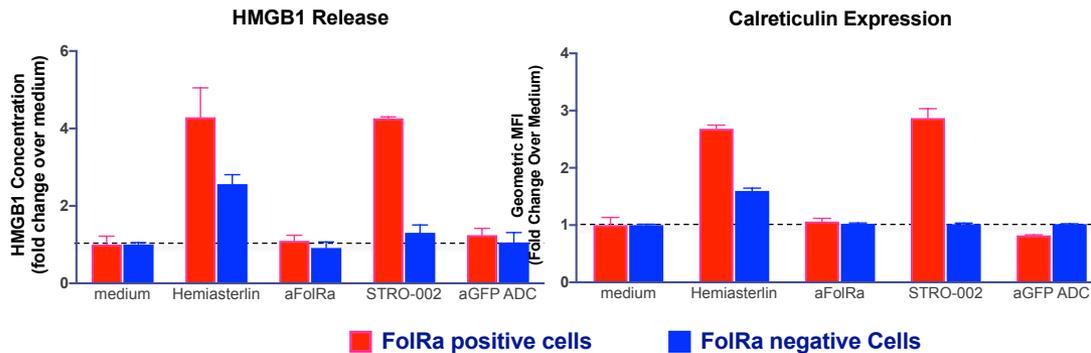
STRO-002 in combination with Avelumab resulted in complete remission of animals bearing MC38-FoIR α tumors



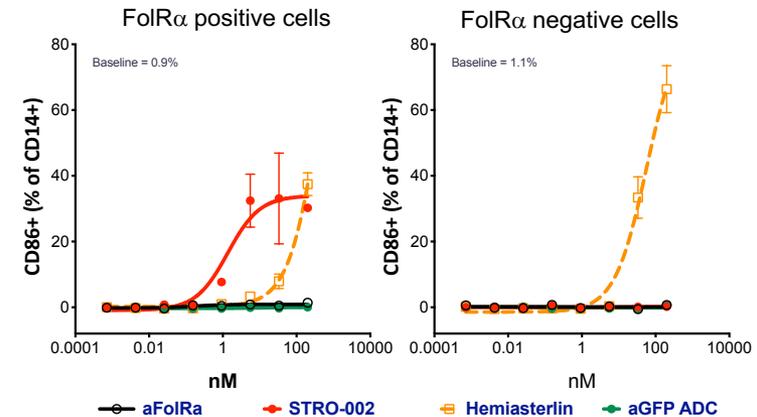
- Markedly enhanced anti-tumor activity observed with combination treatments compared to either single agent alone
- Combination treatment extended median survival compared to single agent therapy
- Combination treatment significantly increased infiltration of CD8+ T Cells into tumor; T cell infiltration not seen with either single agent therapy

STRO-002 Stimulation of The Immune System is Mediated by Hemiasterlin and is FolR α Dependent

STRO-002 Induces Immunogenic Cell Death



STRO-002 Activates Monocytes

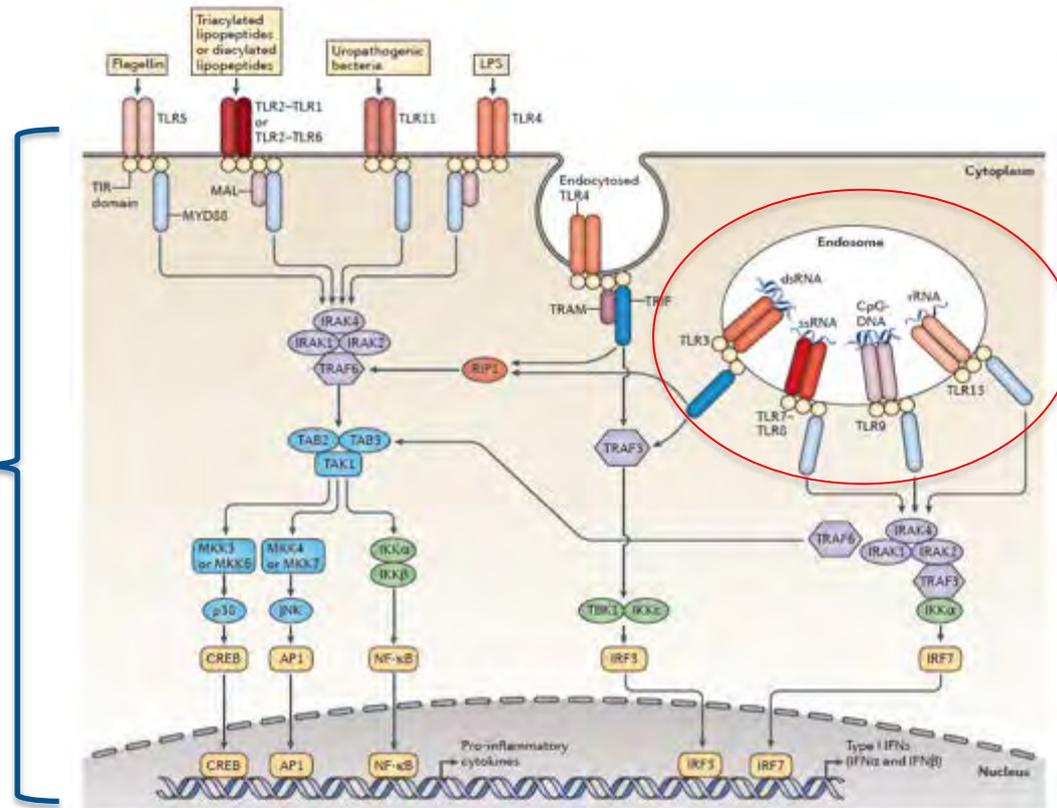


- Tumor targeted immunogenic cell death (ICD) induces activation of monocytes in the tumor microenvironment
- Calreticulin and HMGB1 are markers of ICD and can enhance APC activation, recruitment and tumor antigen uptake
- Tumor ICD promotes innate immune activation and synergy with PD1 checkpoints

STRO-002 Induces ICD Markers only in FolR α Positive Cells

Intratumoral (IT) dosing of synthetic Toll-like Receptor agonists (TLRs) under evaluation as potential new cancer therapies

Immune cell



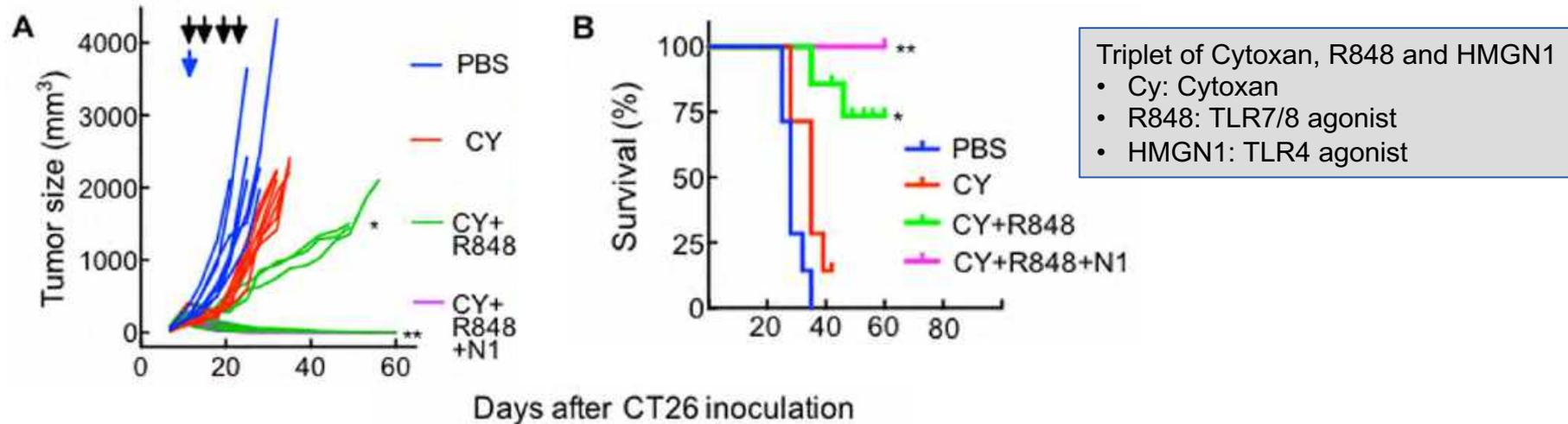
Several Clinical trials with TLR agonists have shown promise with tumor regression and abscopal effects; however limited by I.T. administration

• Challenges:

- Despite localized (IT) injection, cytokine storm is a dose limiting toxicity.
- IT administration is limited to external or cutaneous tumor indications.

TLR4 and TLR7/8 Agonists Synergistically Activate Dendritic Cells

Further enhancement seen with CPIs or ICD Inducers

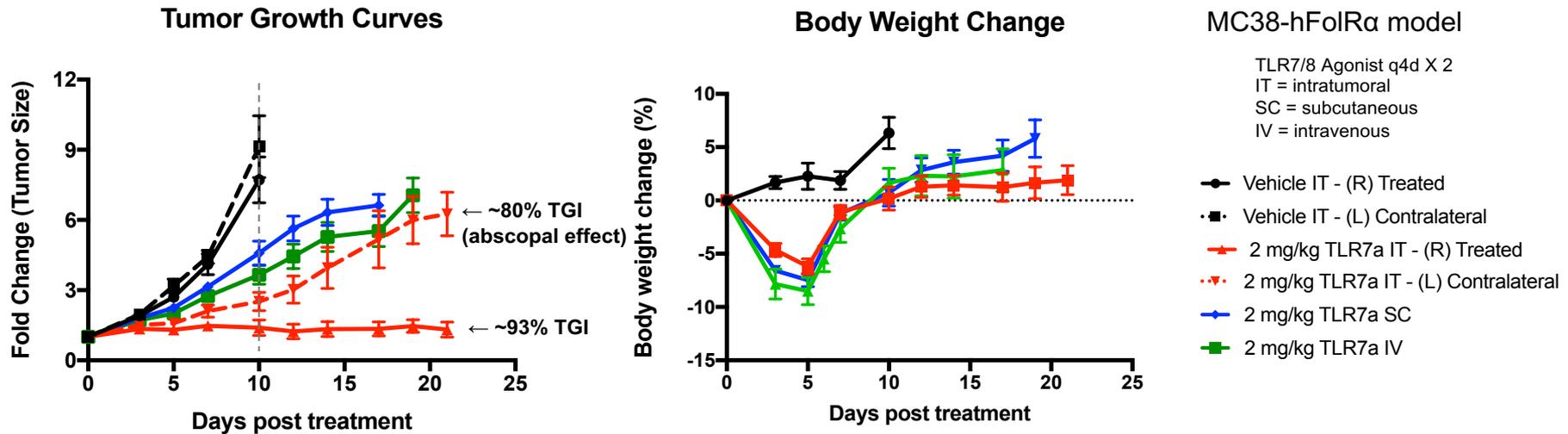


- Cytoxan (cyclophosphamide) induces ICD which promotes DC proliferation.
- HMGN1 and R848 synergistically activate DCs through TLR4 and TLR7/8, respectively
- Triplet treatment enhanced tumor infiltrating DC activation and increased infiltration of CD4+ and CD8+ T cells.
- Tumor-free mice treated were resistant to subsequent challenge with CT26, indicating protective immunity

Nie et al (2017)

Would a Dual Conjugate of A Tumor Targeting Antibody and TLR4 and TLR7/8 Agonists Act As an *In Situ Vaccine*?

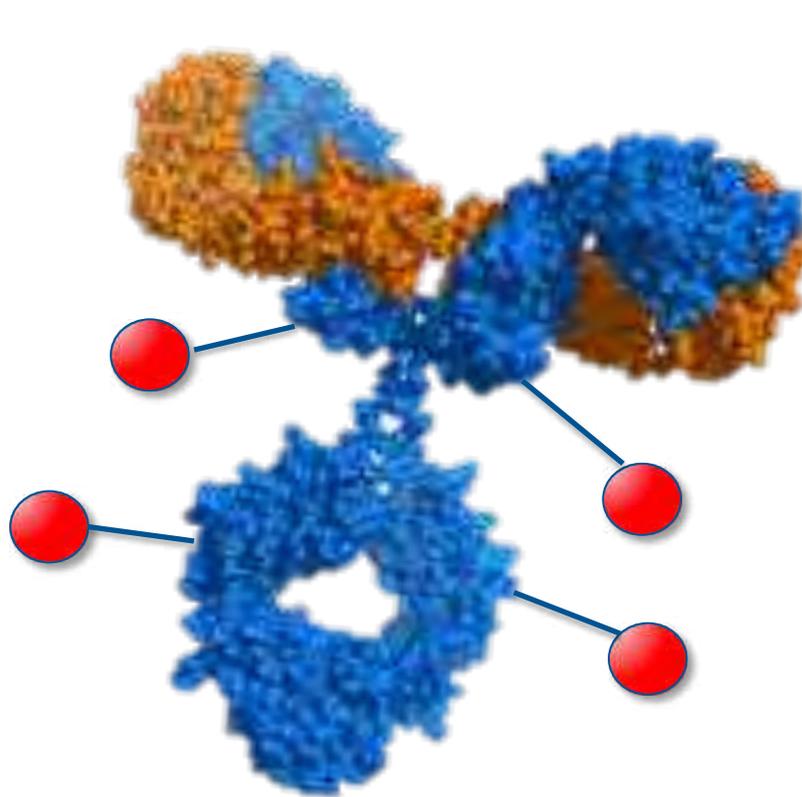
Systemic Administration of TLR7/8-agonist Resulted in Tumor Growth Inhibition but with Transient BW loss



- Anti-tumor activity of TLR7/8 agonist : IT dosing > IV or SC (systemic) dosing.
- Transient BW loss during 1st week in all treated groups (IT, IV, and SC dosing).

Limitations of IT dosing – leakage and systemic exposure - drive, at least in part, efficacy but also toxicity.

Sutro's FoIR α ISAC product concept promises to preserve efficacy and improve tolerability



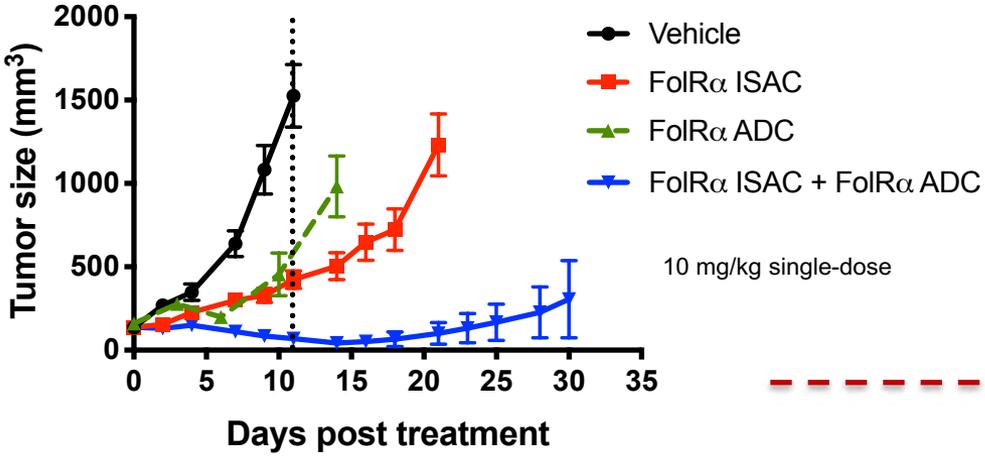
FoIR α ISAC
(Immune Stimulator Antibody Conjugate)

FoIR α Ab conjugated to TLR7/8
agonist via cleavable linker

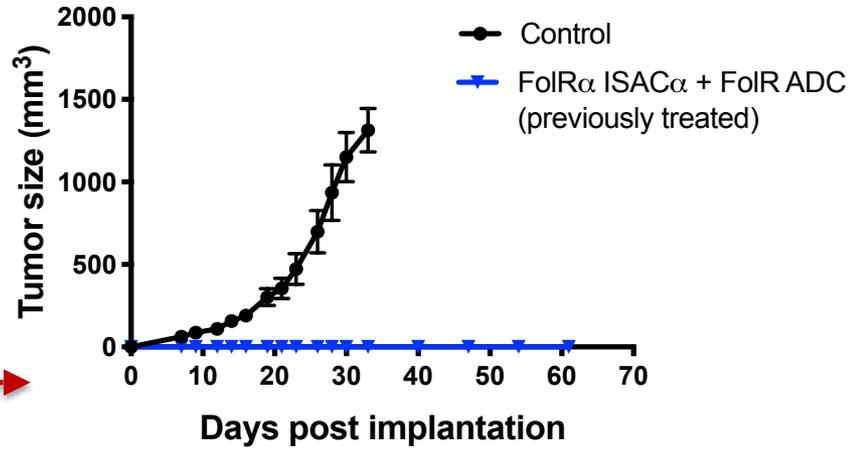
Site-Specific Conjugation Technology Allows For Optimization of Pharmacological Properties

Combination of FoIR α ISAC and FoIR α ADC Results in Tumor Regressions and No Tumor Growth Upon Re-challenge

Part 1: Evaluation of ISAC/ADC combination

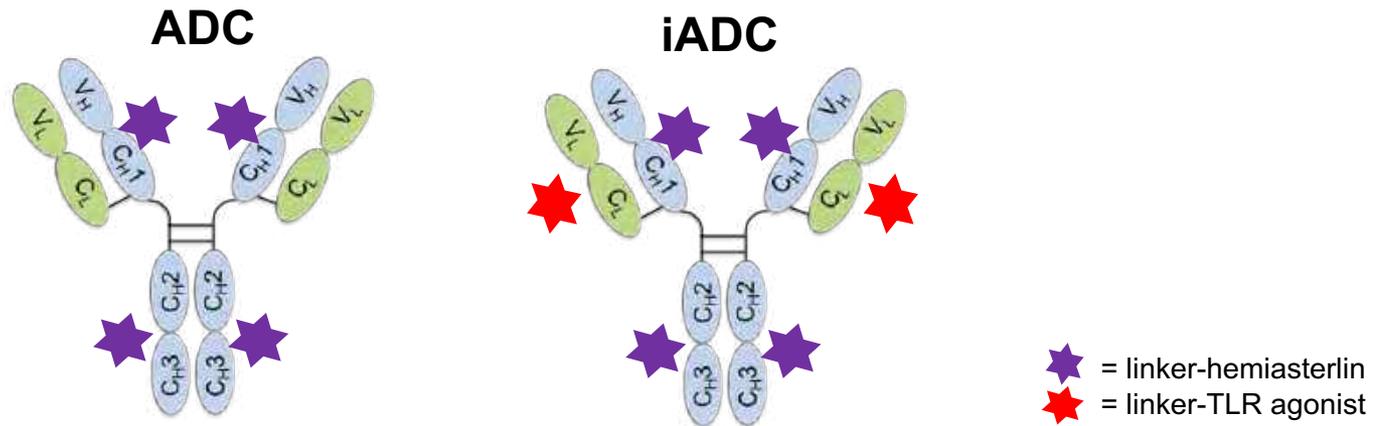


Part 2: Tumor re-challenge in ISAC/ADC tumor-free mice (no additional treatment administered)



- FoIR α ISAC (immune stimulator antibody conjugate) product concept supported by impressive *in vivo* anti-tumor activity and good tolerability with 1/40th dose of free TLR agonist
- Combination of ADC and ISAC gave greater anti-tumor response with evidence of regressions.
- No tumor re-growth in survivors upon tumor re-implantation, suggest FoIR α ISAC/ADC-related innate and adaptive immune mechanisms drive anti-tumor response.

ADC to iADC: Combining Synergistic Mechanisms in a Single Molecule

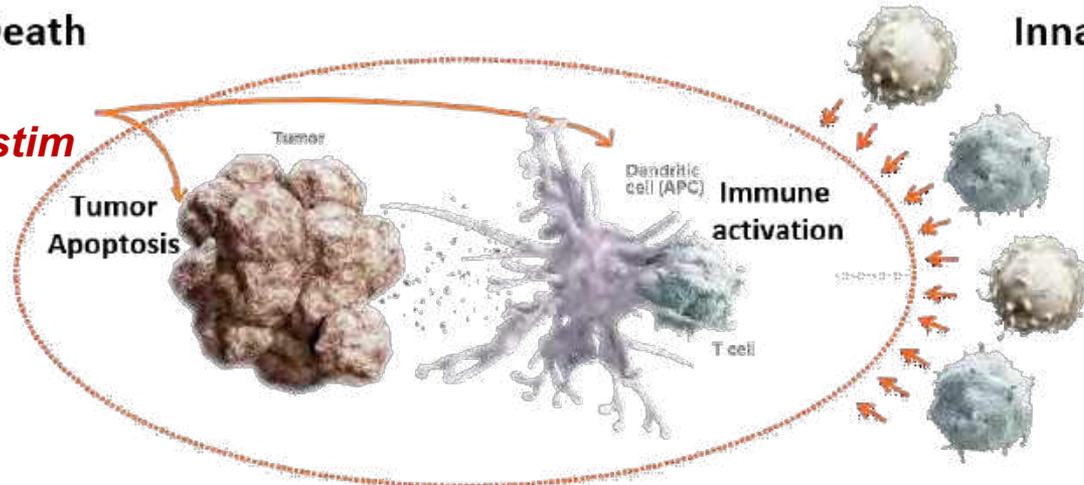


- **Specific conjugations to specifically positioned sites**
 - Optimal stoichiometry (absolute DAR and ratio of each payload)
- **Enables optimal efficacy and tolerability**
- **Process options enabled allowing use of single nnAA or two different nnAAs**
 - Both process paths result in a single molecular species iADC

Combining ADC and Immune Agonists Can Break Tumor Tolerance and Elicit Protective Immunity in a single therapy

Immunogenic Cell Death

ADC + immune stim



Innate Immune Activation

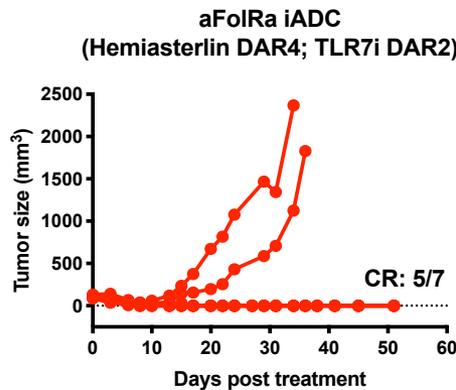
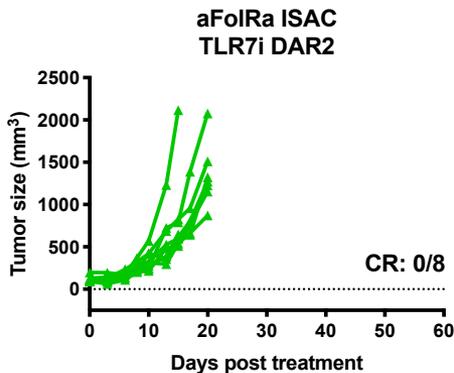
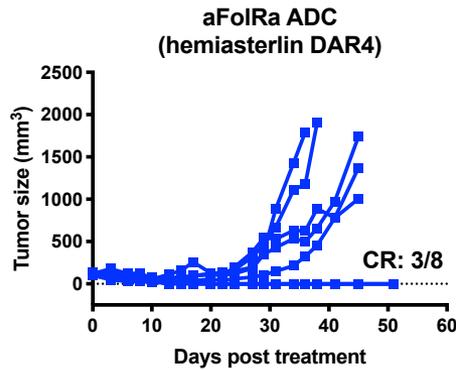
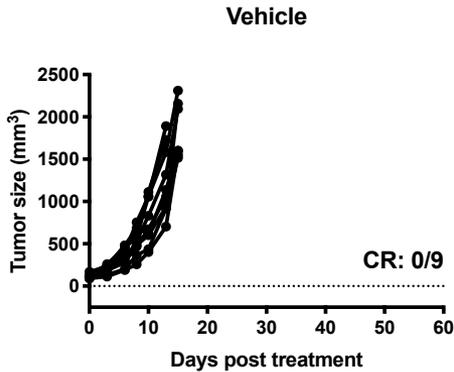
Break Tumor Tolerance

iADC approach can elicit protective tumor immunity by two mechanisms:

1. Tumor targeted **immunogenic cell death**
 - Induce tumor killing that alerts immune response
2. Directly **activate immune cells** (i.e. dendritic cells)
 - Demonstrates tumor immunity in vivo

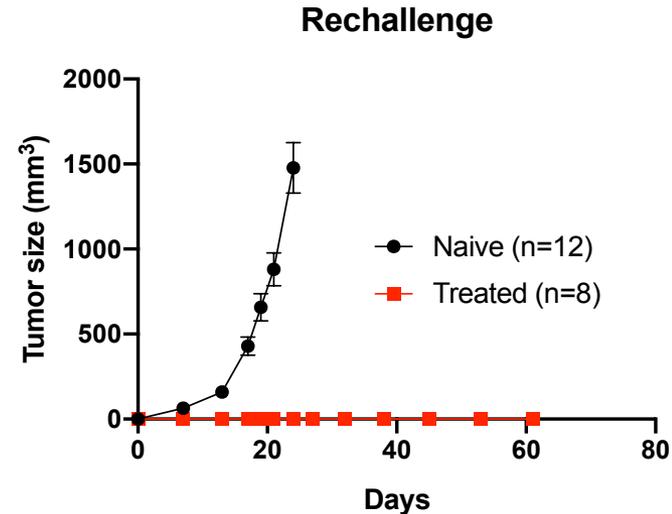
Some patients will require multiple therapies to enable cancer immunity, an iADC combines multiple MOAs into a single tumor targeted therapy

Superior Anti-Tumor Memory Response with Single Dose of a Prototype 4+2 FoIR α iADC



→

All treated animals that achieved CR were re-challenged with MC38-hFoIR α cells

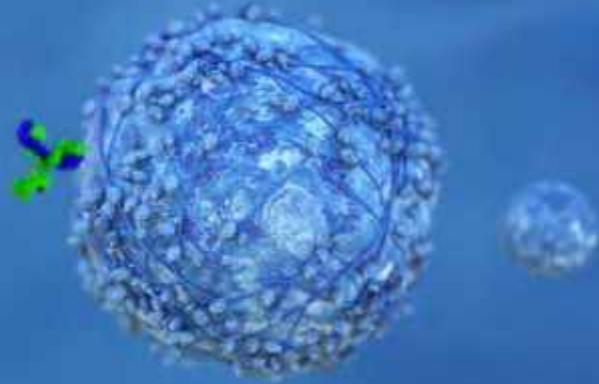


FoIR α iADC showed enhanced activity vs. ADC alone based on higher number of animals with complete responses and durable anti-tumor immunity

A new precedent

Turning a tumour into a vaccine *in situ*.....

- This program is one of a number of approaches at Sutro exploring whether systemically administered TME-targeting of conjugated combination payloads can set up a sustained and robust anti-tumor immune response
- In our illustrated case a targeted cytotoxin, our proprietary hemiasterlin, that stimulates immunogenic cell death, provides a synergistic stimulation of memory responses when paired together with TLR agonists.
- This systemically delivered trigger for the immune system induces an adaptive and protective response
.....”an immunization triggered *in situ* ”



Thanks!

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