



Day One Biopharmaceuticals

Targeted Therapies for People of All Ages

42nd Annual J.P. Morgan Healthcare Conference

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Disclaimer

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Cancer Therapies for People of All Ages



Our Approach

- Develop medicines for genomically-defined cancers
- Establish first-in-class position through rapid registration pathways
- Expand to adolescent and adult populations in parallel and pursue those opportunities with the same commitment we do for children



2023 Key Accomplishments



FIREFLY-1: Relapsed or Progressive pLGG

- NDA initiated in May 2023
- Clinical data presented in oral presentation at ASCO in June 2023
- FDA acceptance of NDA and priority review granted in October 2023
- Data published in *Nature Medicine* and oral presentation at SNO in November 2023
- PDUFA target action date of April 30, 2024

FIREFLY-2: Frontline pLGG

- Dosed the first patient in March 2023

Business Development

- Research collaboration and license agreement for preclinical program targeting VRK1 in August 2023

Financials

- \$405.5 million in cash, cash equivalents and short-term investments as of September 30, 2023
- Cash runway into 2026

Priorities as we Expand into a Commercial-Stage Company

Launch Tovorafenib

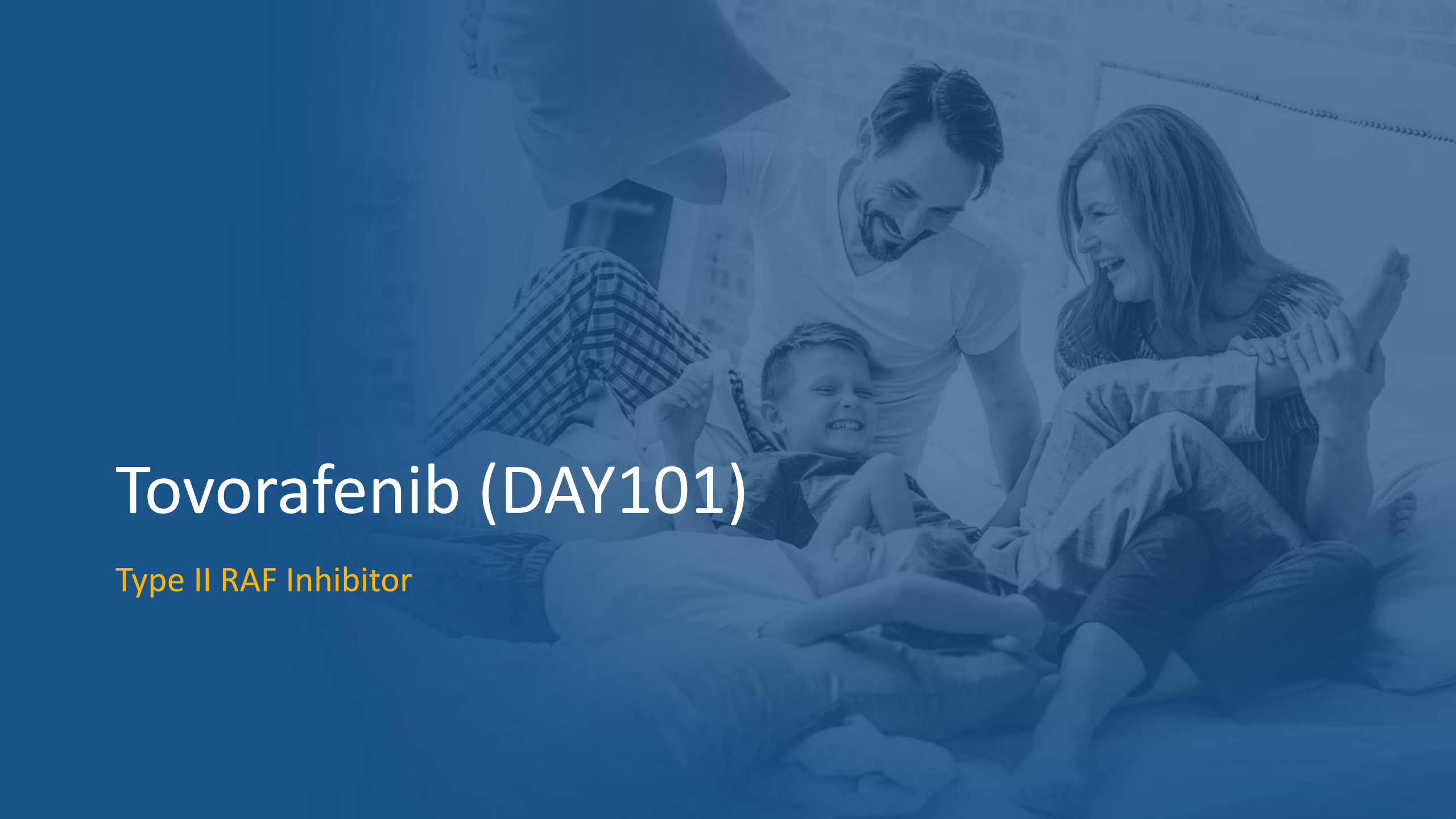
- Secure the first FDA-approved targeted therapy for pLGG with *BRAF* fusions and point mutations that have relapsed or progressed
- Expand awareness amongst physicians and establish broad coverage to enable patient access
- Following approval, establish tovorafenib as the standard of care for relapsed or progressive pLGG

Advance Portfolio

- FIREFLY-2: Study tovorafenib as a frontline therapy for treatment-naive patients with pLGG
- FIRELIGHT-1: Evaluate tovorafenib in combination with pimasertib in adolescent and adult populations
- Advance early stage VRK1 program to clinical development

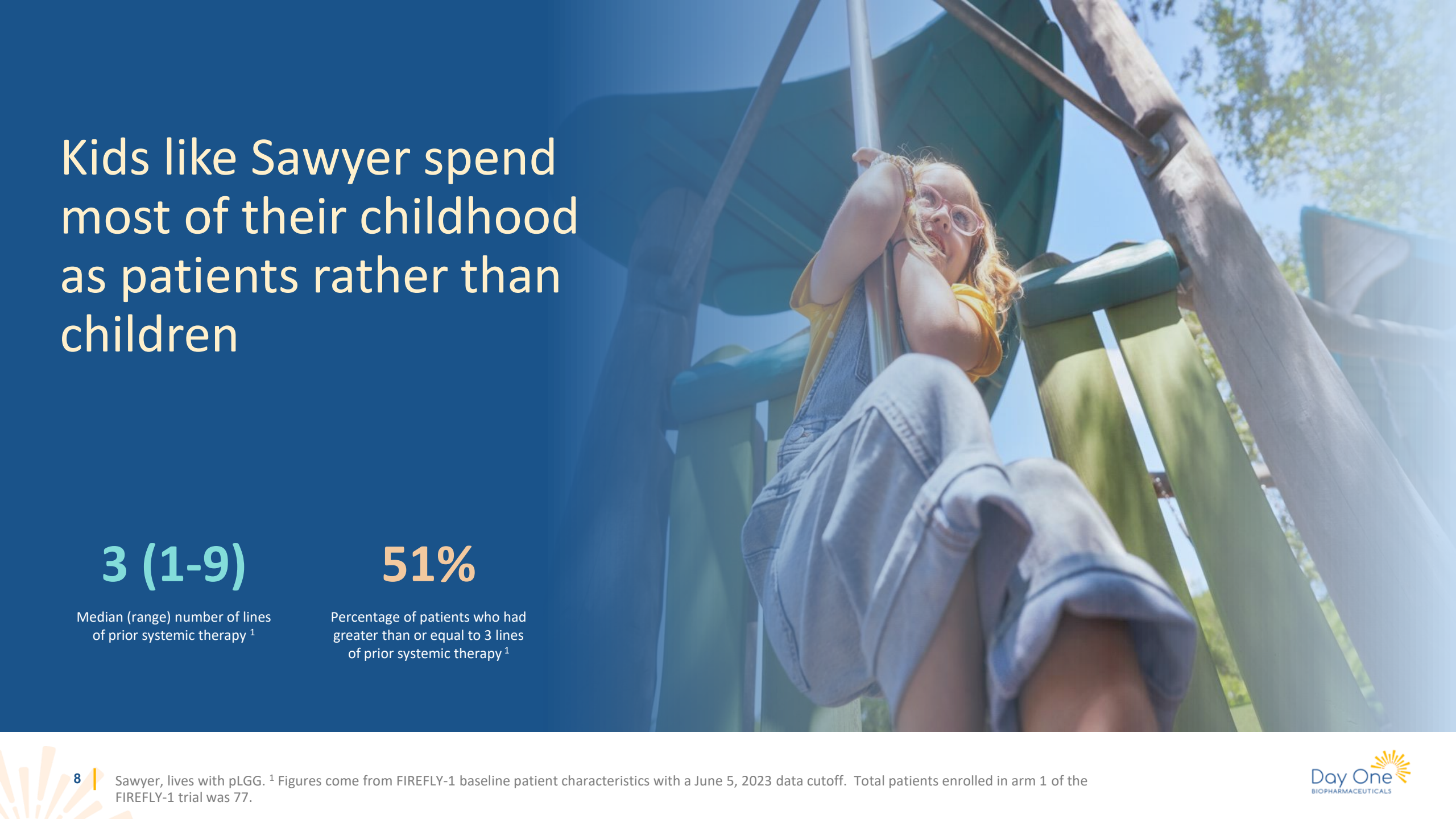
Expand Pipeline

- Grow Day One into a leading, biopharmaceutical company that is the partner of choice for oncology drug development
- Explore selective partnerships as a source of capital and risk sharing
- Further invest in business development activities to expand our multiple asset portfolio for both children and adults

A photograph of a family of four (father, mother, and two children) playing on a bed. The father is leaning over the children, and the mother is sitting on the bed. The children are laughing and playing. The image is overlaid with a semi-transparent blue filter.

Tovorafenib (DAY101)

Type II RAF Inhibitor



Kids like Sawyer spend most of their childhood as patients rather than children

3 (1-9)

Median (range) number of lines of prior systemic therapy ¹

51%

Percentage of patients who had greater than or equal to 3 lines of prior systemic therapy ¹

Pediatric Low-Grade Glioma (pLGG): The Most Common Type Of Brain Tumor In Children

pLGGs are chronic and relentless, with patients suffering profound tumor and treatment-associated morbidity that can impact their life trajectory over the long term⁶

A Serious and Life-Threatening Disease

- An estimated 26,000 children/young adults are living with *BRAF*-altered pLGGs in the U.S. today ^{1,2}
- For the majority of patients in the relapsed setting, there is no standard of care and no approved therapies
- Surgery plays a significant role in treatment, but vast majority of patients require systemic therapy ^{3,4}
- ~70% of pLGGs have *BRAF* alterations, which means ~60% of pLGGs are *BRAF* fusions and ~10% are *BRAF* V600E mutations⁵

Disease Symptoms⁷

Cerebral gliomas:

Seizures, muscle weakness, behavioral changes

Hypothalamic gliomas:

Endocrine dysfunction and visual deficits

Optic pathway gliomas:

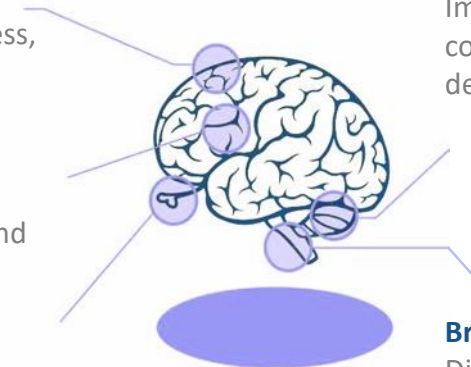
Decreased vision (acuity and/or fields), bulging or misalignment of eyes

Cerebellar gliomas:

Impaired balance, coordination or depth perception

Brain stem gliomas:

Difficulty swallowing or with speech, abnormal breathing



Tumor Response To Tovorafenib (DAY101) in FIREFLY-1 is Well Aligned with pLGG Treatment Goals



Overall Response Rate

Clinically meaningful responses observed across all three assessment criteria, 67% ORR by RANO-HGG, 53% ORR by RANO-LGG, 51% ORR by RAPNO-LGG.

Clinical Benefit Rate

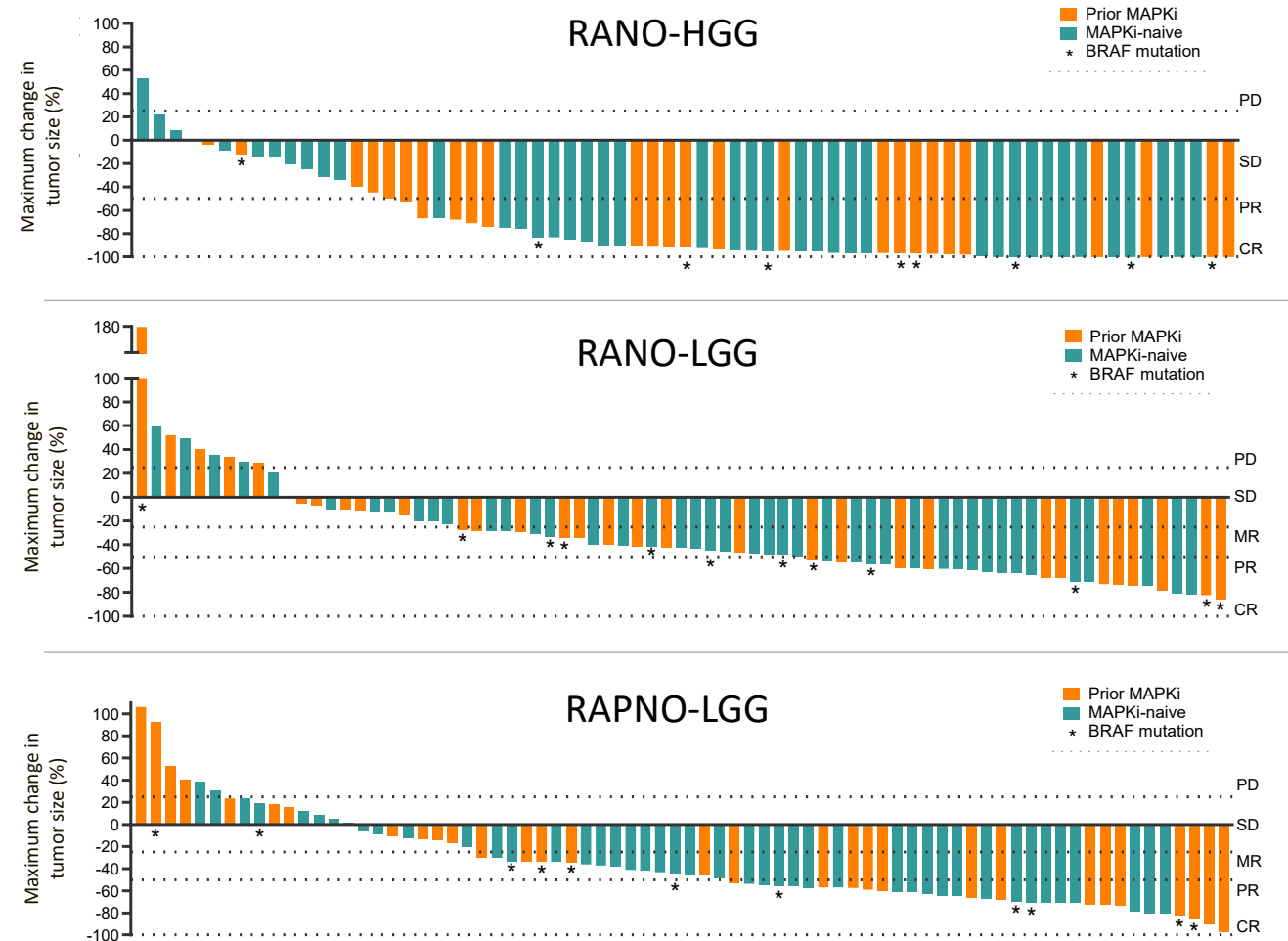
Responses seen in a heavily-pretreated population, 93% CBR by RANO-HGG, 83% ORR by RANO-LGG, 82% ORR by RAPNO-LGG.

Duration of Treatment

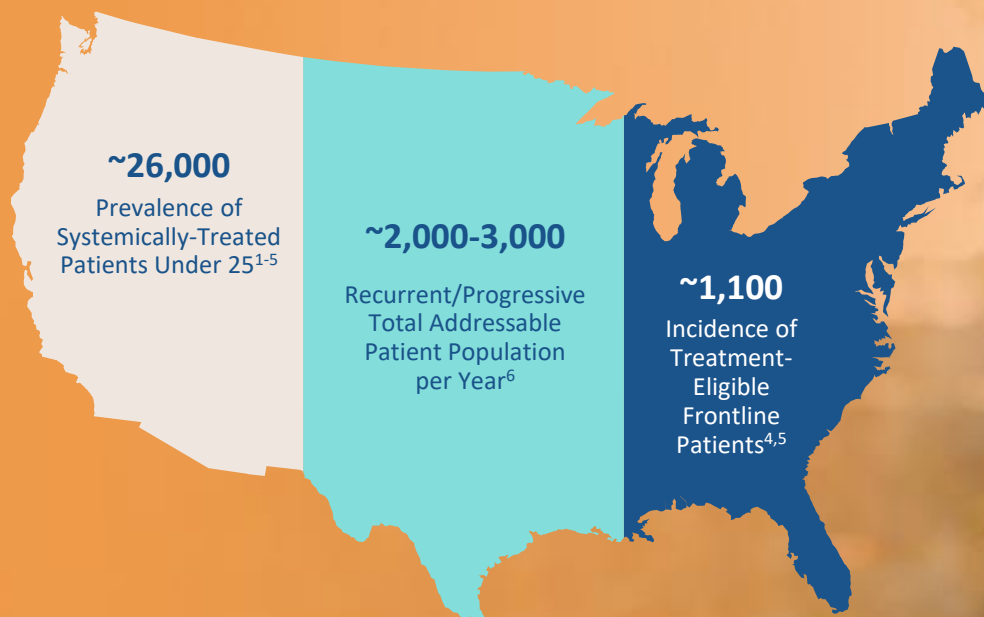
Median duration of tovorafenib treatment of 15.8 months as of June 5, 2023, with 66% of patients remaining on treatment.

Safety

Safety and tolerability profile indicating monotherapy tovorafenib to be generally well-tolerated



Estimated *BRAF*-Altered pLGG Patient Population In The U.S.



The estimated addressable pool of recurrent or progressive pLGG patients is ~2,000-3,000⁶ per year at steady state*



Preparing for a Successful Launch*

Key Factors

- Communicate strong clinical profile for tovorafenib without significant disruption to childhood
- Enable patient access through establishing broad coverage and patient support programs
- Experienced, fully dedicated field sales force (18 U.S. Account Managers)
- Positive patient experience, drug profile consisting of once-weekly dosing (oral tablet or liquid formulation)

Priorities

Drive FIREFLY-1 Trial and Physician Awareness

Build momentum with pediatric oncologists at the ~200 U.S. Centers of Excellence

Enable unrestricted patient access

FIREFLY-2

Pivotal Phase 3 Trial of Tovorafenib
(DAY101) in Frontline pLGG



Expansion into Frontline Treatment Represents a Meaningful Expansion Opportunity for Tovorafenib in pLGG



Disease Overview

- pLGG is the most common brain tumor diagnosed in children
- pLGG can be diagnosed at any age in pediatric patients from infancy to young adults
- Estimated U.S. treatment eligible incidence of ~1,100 annually
- Conventional treatment options are surgery, chemotherapy, radiation or targeted therapy
- High unmet need for an effective therapy for the majority of pLGG patients that is minimally disruptive to their lives

Phase 3 Trial Summary

- Randomized, global, registrational Phase 3 trial of monotherapy tovorafenib (DAY101) vs SoC chemotherapy
- Eligibility: Patients aged 6 months to <25 years with LGG harboring a RAF alteration and requiring first-line systemic therapy
- Primary endpoint: ORR based on RANO-LGG criteria, assessed by blinded independent central review
- Key secondary endpoints: PFS and DoR by RANO criteria, ORR by RAPNO criteria

~80 sites activated globally



FIRELIGHT-1

Phase 1b/2 Trials Evaluating Tovorafenib (DAY101)
as a Combination with Pimasertib

Tovorafenib (DAY101) / Pimasertib Combination In Solid Tumors (FIRELIGHT-1)



Combination with tovorafenib (DAY101) and other targeted therapies may unlock the full value of pimasertib in advanced solid tumors

Pimasertib Overview

- Pimasertib is an investigational orally-bioavailable, selective, non-competitive MEK1/2 inhibitor in-licensed from Merck KGaA in February 2021
- Nearly three-fold higher CNS penetration than other MEKi inhibitors (trametinib or selumetinib)
- Pimasertib showed monotherapy clinical activity, including an improvement in median PFS versus dacarbazine in NRAS mutant melanoma
- Patient populations targeted in expansion phase will include NRAS mutant melanoma including BRAF-altered tumors of class 1 non-EK, class 2 BRAF alternations and fusion patients

Phase 1b/2 Trial Summary

- Combination dose escalation, global phase 1b/2 trial, Phase 1b, BOIN (adaptive), n = ~10/cohort, Phase 2, Simon 2-stage, n = ~25/cohort
- Eligibility: Patients aged 12 years and older, dose escalation will be performed in advanced solid tumor patients with any MAPK alteration. Expansion cohorts will focus on indications with a potential path to accelerated approval
- Endpoints: Phase 1b: PK, PD and Safety, MTD/RP2D, Phase 2: Efficacy (ORR, DOR)

Anticipate recommended Phase 2 dose and schedule in 2H 2024

Pillars for Sustainable Growth to Drive Long-Term Success

Tovorafenib Launch

- Secure FDA approval; PDUFA target action date of April 30, 2024
- Institute broad coverage to drive patient access
- Following approval, establish tovorafenib as the standard of care in relapsed or progressive pLGG

Pipeline

- Continue enrollment into frontline pLGG trial (FIREFLY-2) driving meaningful expansion and growth opportunity
- Initiate combination cohorts with pimasertib in adolescent and adult populations
- Advance early stage VRK1 program to clinical development

Capital

- Thoughtful, data-driven approach to capital allocation driving disciplined investment in clinical development and pipeline expansion
- PRV eligible with approval of tovorafenib in relapsed or progressive pLGG
- Cash runway into 2026

People

- Deeply experienced in oncology, pediatric, and rare disease development, registration and commercialization

Q&A

