Kinnate Biopharma Inc. Presents Data from its Real-World Clinico-Genomic Study Collaboration with Tempus at the Virtual ESMO Targeted Anticancer Therapies Congress

March 7, 2022

Findings highlight the unmet medical need among cancer patients with BRAF Class II and Class III alterations who may not have access to approved targeted therapies

SAN FRANCISCO and SAN DIEGO, March 07, 2022 (GLOBE NEWSWIRE) -- Kinnate Biopharma Inc. (Nasdaq: KNTE) ("Kinnate"), a biopharmaceutical company focused on the discovery and development of small molecule kinase inhibitors for difficult-to-treat, genomically defined cancers, today announced the presentation of findings from a collaborative study with Tempus investigating the prevalence of Class II and Class III alterations among patients with BRAF-mutated solid tumors. These findings were presented as an e-Poster at the virtual European Society for Medical Oncology (ESMO) Targeted Anticancer Therapies Congress (TAT), taking place March 7-9, 2022.

"Advances in genomic profiling have significantly increased our ability to define emerging patient populations, and enable the development of effective targeted therapies for patients who do not currently benefit from precision medicine approaches," said Richard Williams, MBBS, Ph.D., Chief Medical Officer at Kinnate. "Through our collaboration with Tempus, and other leading precision medicine companies, we have found that there is a substantial number of cancer patients with BRAF Class II or Class III alterations, none of whom have access to approved targeted cancer therapies. We appreciate the opportunity to share insights on this urgent unmet need with the clinical research community gathered for the ESMO TAT 2022 conference."

This study utilized a de-identified clinico-genomic database of more than 55,000 cancer patients whose tumors were profiled using the Tempus xT next generation sequencing assay, a 648-gene DNA panel coupled with transcriptome RNA sequencing. A cohort of more than 1,100 patients was identified with BRAF Class II or Class III oncogenic alterations representing approximately 2% of patients. Among the patients with BRAF Class II or Class III alterations, those diagnosed with melanoma or non-small cell lung cancer (NSCLC) were most commonly treated with immunotherapy or chemotherapy +/- immunotherapy, respectively. At least 70% of patients with BRAF alterations had stage IV (metastatic) disease, and the distribution of cancer stages was similar across BRAF classes. Compared to BRAF Class I alterations, BRAF Class II and Class III alterations were more likely to co-occur with other gene alterations in the MAPK pathway such as NRAS, KRAS and NF1. Within the NSCLC and melanoma cohort, tumors with BRAF Class II or Class III alterations had a higher tumor mutation burden (TMB) than BRAF wild-type tumors. Additionally, patients with NSCLC and Class II or Class III alterations experienced shorter time to treatment discontinuation in first line and second line of therapy compared to patients with NSCLC and BRAF Class I alterations which is suggestive of inferior treatment outcomes.

"These findings are of particular interest given that BRAF Class II and Class III alterations are prevalent oncogenic drivers with no approved targeted therapy. Tumors with BRAF Class II or Class III alterations have been shown to be associated with unique tumor characteristics, including higher TMB and more frequent co-occurrence with other MAPK pathway alterations. Our real-world data study indicates that patients with NSCLC and BRAF Class II or Class III alterations experience shorter time to treatment discontinuation relative to patients with NSCLC and BRAF Class I alterations," said Paul Severson, Ph.D., Senior Director of Translational Medicine and Bioinformatics at Kinnate.

The e-Poster (Presentation #40P), titled "*Real-World Clinical Genomic Analysis of Patients with BRAF Mutated Cancers Identifies BRAF Class II and III as a Population of Unmet Medical Need*," will be presented by Dr. Severson and is available to registered attendees for on-demand viewing at: www.esmo.org/meetings/esmo-tat-2022.

About Kinnate
Kinnate is focused on the discovery and development of small molecule kinase inhibitors for difficult-to-treat, genomically defined cancers. Kinnate's mission is to expand the reach of targeted therapeutics by developing products that are designed to address significant unmet need. Kinnate utilizes its deep expertise in structure-based drug discovery, translational research, and patient-driven precision medicine, which it refers to as the Kinnate Discovery Engine, to develop targeted therapies. Based in San Francisco and San Diego, California, the Kinnate team is composed of drug discovery experts supported by a distinguished group of scientific advisors. For more information, please visit www.kinnate.com.

Forward Looking Statements
This press release contains forward-looking statements that involve substantial risks and uncertainties. These forward-looking statements include, without limitation, statements regarding the potential benefits of our product candidates and statements by our employees. Words such as "believes," "anticipates," "plans," "expects," "intends," "will," "goal," "potential" and similar expressions are also intended to identify forward-looking statements. We have based these forward-looking statements largely on our current expectations and projections about future events and trends. Such expectations and projections may never materialize or may prove to be incorrect. These forward-looking statements are subject to a number of risks, uncertainties, assumptions and other factors, including risks related to recently transitioning to operating as a clinical-stage biopharmaceutical company with a limited operating history; our ability to raise additional capital to finance our operations; our ability to discover, advance through the preclinical and clinical development of, obtain regulatory approval for and commercialize our product candidates; the novel approach we are taking to discover and develop drugs; our ability to timely file and obtain approval of investigational new drug applications for our planned clinical trials; the potential for any clinical trial results to differ from our preclinical study results; negative impacts of the COVID-19 pandemic on our business, including ongoing and planned clinical trials and ongoing and planned preclinical studies; competition in our industry; regulatory developments in the United States and other countries; our ability to attract, hire and retain highly skilled executive officers and employees; difficulties in managing our growth; our ability to protect our intellectual property; reliance on third parties to conduct our preclinical studies and any ongoing or planned future clinical trials, and to manufacture our product candidates; general economic and market conditions; and other risks. These and other risks, uncertainties, assumptions and other factors are further described under the heading "Risk Factors" in our Quarterly Report on Form 10-Q for the quarterly period ended September 30, 2021 that we have filed with the Securities and Exchange Commission (the "SEC"), as well as in our subsequent filings we make with the SEC. New risk factors emerge from time to time and it is not possible for our management to predict all risk factors, nor can we assess the impact of all factors on our

business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in, or implied by, any forward-looking statements. Investors should not rely upon forward-looking statements as predictions of future events. Although we believe that the expectations reflected in the forward-looking statements are reasonable, we cannot guarantee future results, levels of activity, performance or achievements. Our forward-looking statements speak only as of the date of this release, and except as required by law, we undertake no obligation to update publicly any forward-looking statements for any reason in the future.

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