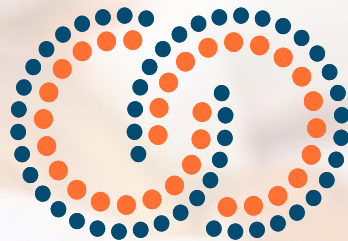


Acrivon

Therapeutics



*ACRIVON PREDICTIVE PRECISION PROTEOMICS (AP3):
DRUG-TAILORED PATIENT SELECTION FOR CLINICAL SUCCESS*

INVESTOR EVENT

MAY 01, 2023

FORWARD-LOOKING STATEMENTS

Certain information contained in this presentation includes forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995 regarding our future results of operations or financial condition, business strategy and plans and objectives of management for future operations. In some cases, you can identify forward-looking statements because they contain words such as “anticipate,” “believe,” “contemplate,” “continue,” “could,” “estimate,” “expect,” “intend,” “may,” “plan,” “potential,” “predict,” “project,” “should,” “target,” “will,” or “would” or the negative of these words or other similar terms or expressions. Our forward-looking statements are based primarily on our current expectations and projections about future events and trends that we believe may affect our business, financial condition and results of operations. The outcome of the events described in the forward-looking statements is subject to risks and uncertainties, including the factors described in our filings with the U.S. Securities and Exchange Commission. New risks and uncertainties emerge from time to time, and it is not possible for us to predict all risks and uncertainties that could have an impact on the forward-looking statements contained in this presentation. The results, events, and circumstances reflected in the forward-looking statements may not be achieved or occur, and actual results, events, or circumstances could differ materially from those described in the forward-looking statements.

You are cautioned not to place undue reliance on these forward-looking statements, which are made only as of the date of this presentation. We undertake no obligation to update any forward-looking statements or to reflect new information or the occurrence of unanticipated events, except as required by law.

OUTLINE

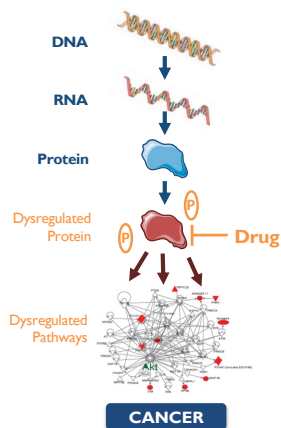
- Company overview
- Acrivon Predictive Precision Proteomics (AP3) platform update
- Preclinical pipeline update
- Clinical trial enrollment progress
- Corporate updates
- Q & A

ACRIVON THERAPEUTICS: DRUG-TAILORED PATIENT SELECTION

AIMING TO OVERCOME THE KEY ATTRITION FACTOR PREVENTING CLINICALLY ACTIVE DRUGS FROM REACHING MARKET

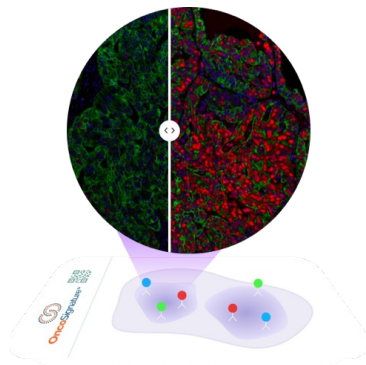
AP3 Platform

- Acrivon's proprietary proteomics-based predictive precision medicine platform
- Applied where NGS/genetics is insufficient and for our internal pipeline



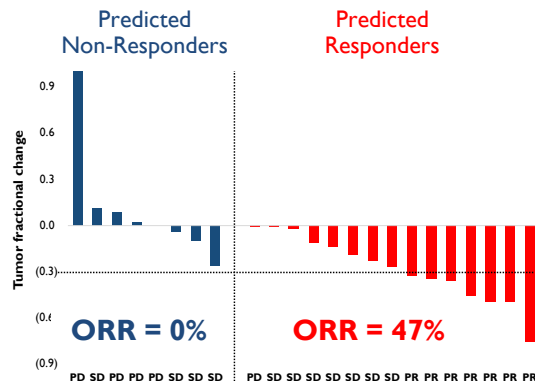
OncoSignature®

- Our proprietary predictive drug-tailored biopsy test
- Extensively evaluated in prospective preclinical studies, including prediction on blinded pretreatment tumor biopsies from past trials resulting in ORR 47% and 58%



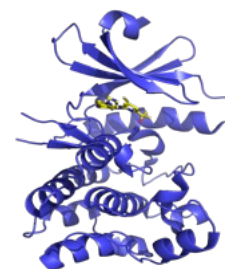
ACR-368 (Prexasertib)

- Clinically active (15-20% ORR) Phase 2 DNA Damage Response (DDR) inhibitor licensed from Eli Lilly & Co.
- Now being developed with OncoSignature patient selection for increased ORR with registrational intent

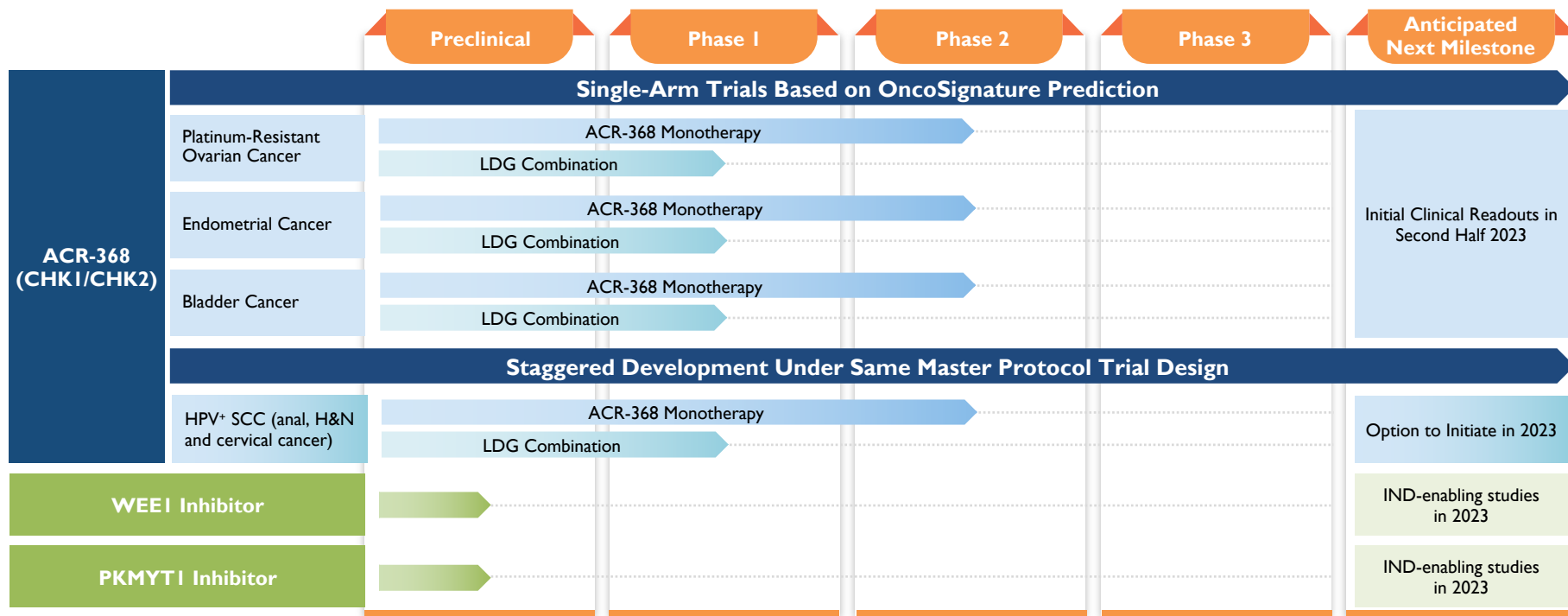


Pipeline

- Two co-crystallography- and AP3-driven preclinical programs targeting WEE1 and PKMYT1, proximal and redundant DDR nodes
- Single digit nM inhibitors, wholly-owned, opportunity for AP3 patient selection and pipeline combinations



ACRIVON PIPELINE



Notes

ACR-368 Monotherapy

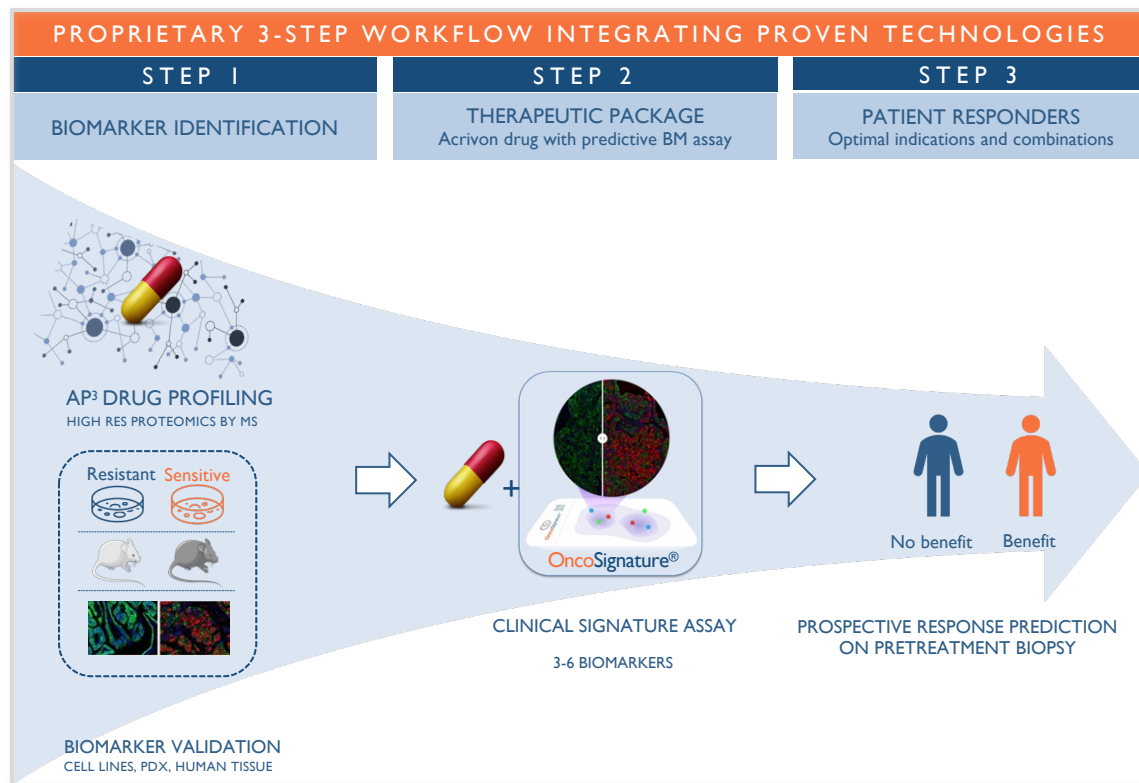
Registrational intent Phase 2 single arm trials based on predicted sensitivity to ACR-368 monotherapy in OncoSignature-positive patients

LDG Combination

Exploratory Phase 1b/2 single arm trials of ACR-368 in combination with low dose gemcitabine, or LDG, in OncoSignature-negative patients



AP3 PLATFORM: DRUG RESPONSE PREDICTION IN INDIVIDUAL PATIENTS

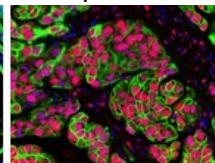
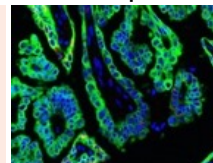


Drug OncoSignature®

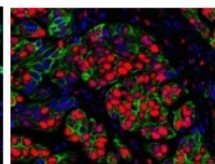
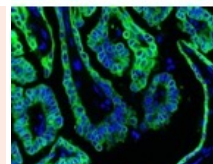
Predicted
Non-responder

Predicted
Responder

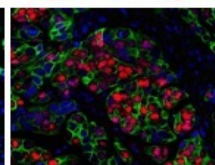
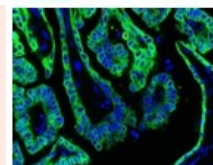
**CLASS 1
BM**



**CLASS 2
BM**



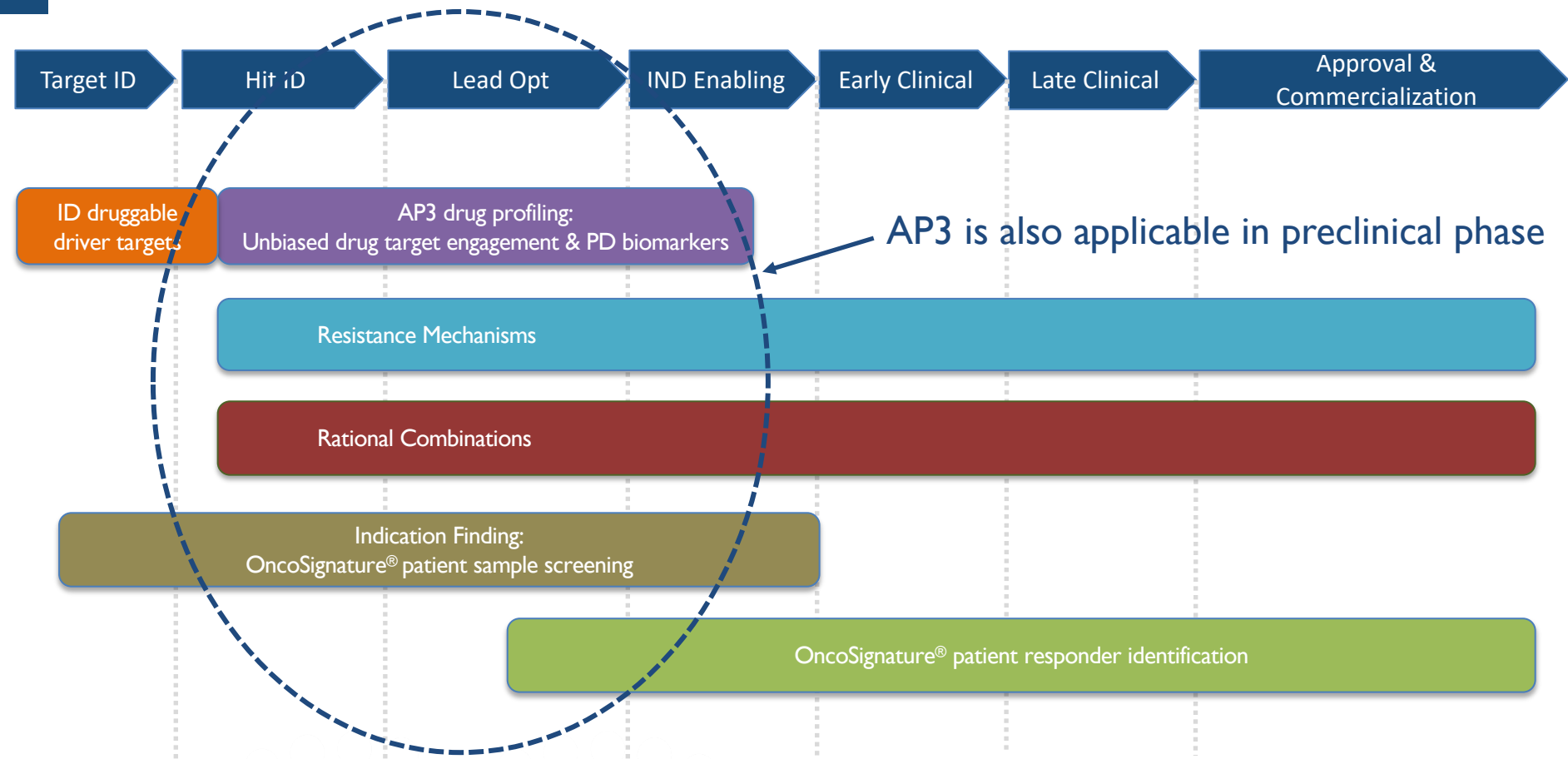
**CLASS 3
BM**



**Patients without biomarkers critical
for drug sensitivity efficiently excluded**

"Disease Pathway-Based Method to Generate Biomarker Panels Tailored to Specific Therapeutics for Individualized Treatments": EP 2 229 589, issued June 10, 2015;
US2017/0067877A9, pending. OncoSignature® is a Registered Trademark: US Reg. No. 5,718,472; Int. Cl. 5, 42. Intl. Reg. 1382289

AP3 IS APPLICABLE ACROSS DRUG DEVELOPMENT STAGES

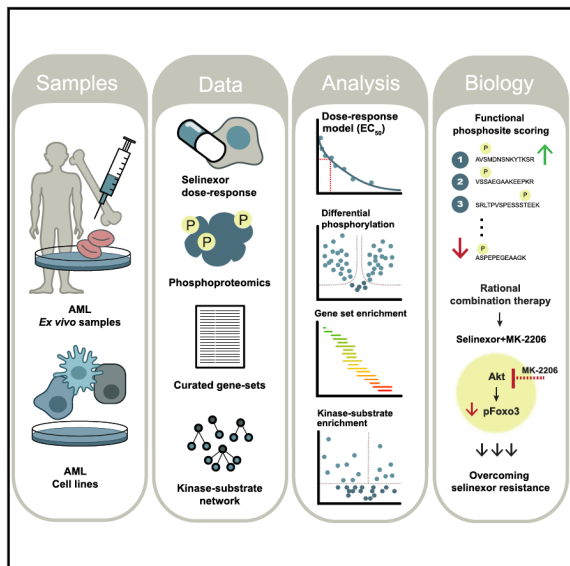


Cell Reports

Article

Phosphoproteomics of primary AML patient samples reveals rationale for AKT combination therapy and p53 context to overcome selinexor resistance

Graphical abstract



Authors

Kristina B. Emdal, Nicolàs Palacio-Escat, Caroline Wigerup, ..., Kristina Masson, Peter Blume-Jensen, Jesper V. Olsen

Correspondence

pub.saez@uni-heidelberg.de (J.S.-R.), kmasson@acrivon.com (K.M.), pblumejensen@acrivon.com (P.B.-J.), jesper.olsen@cpr.ku.dk (J.V.O.)

In brief

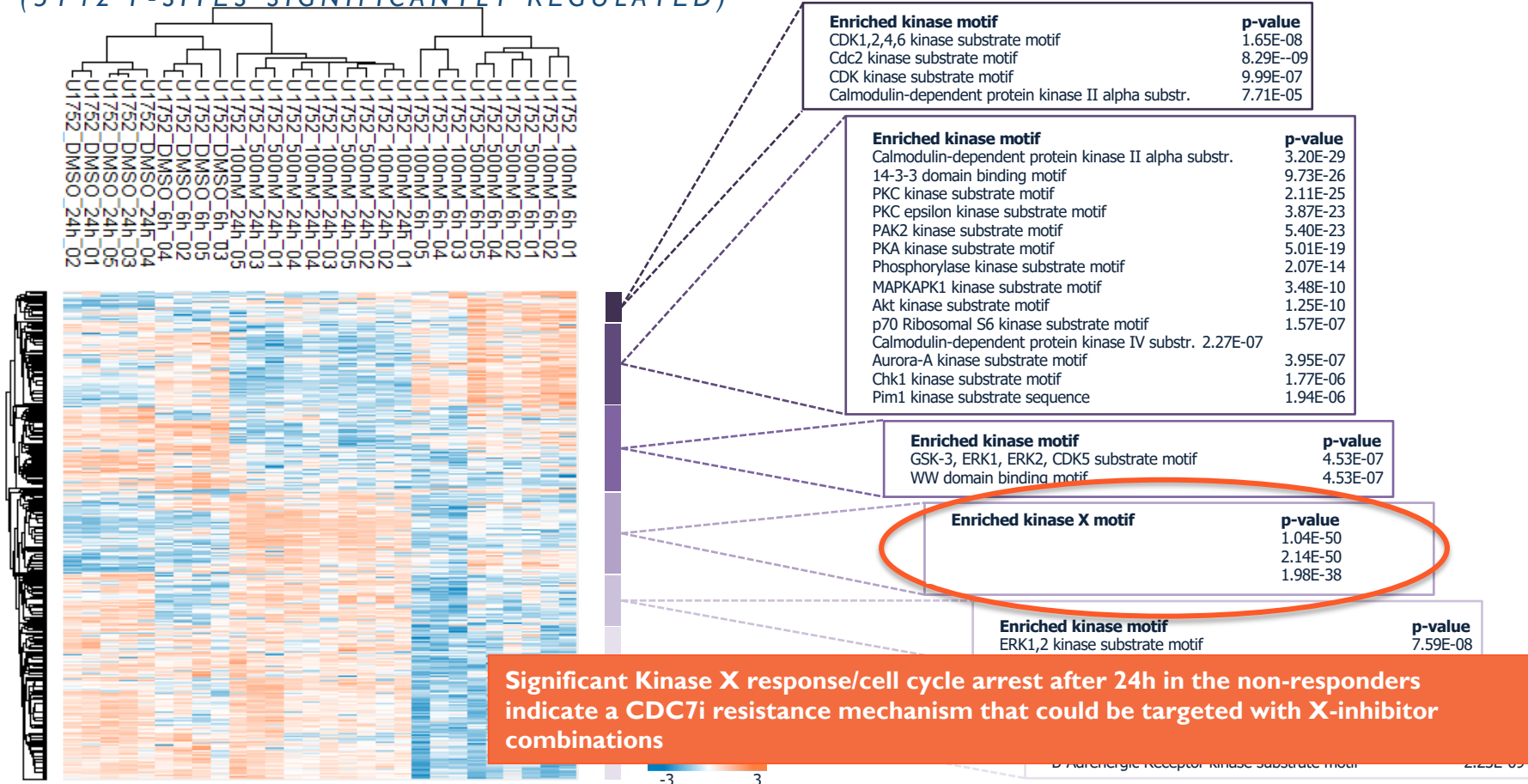
Emdal et al. combine phosphoproteomics of samples from patients with AML and functional phosphosite scoring to uncover clinically actionable molecular context for selinexor efficacy. Sensitivity to selinexor correlates with functional p53 and is enhanced with nutlin-3a, while resistance is associated with dysregulated AKT-FOXO3 signaling and overcome by combining with MK-2206.

Using spatial phosphoproteomics (Nat. Commun., 2021) Acrivon's AP3 platform can uncover single agent sensitivity and rational drug combinations for targets with complicated mechanism of action

Cell Reports, August 9, 2022

EXAMPLE: DRUGGABLE CDC7 INHIBITOR RESISTANCE MECHANISM

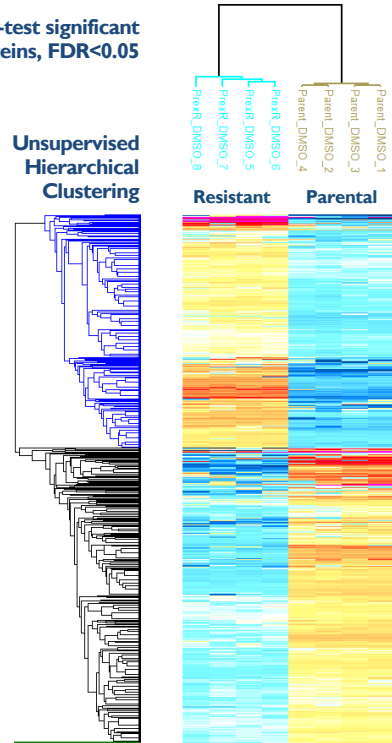
(5142 P-SITES SIGNIFICANTLY REGULATED)



AP3 UNCOVERS ACTIONABLE ACR-368 RESISTANCE MECHANISMS UNBIASED AND INDEPENDENT OF GENETIC INFORMATION

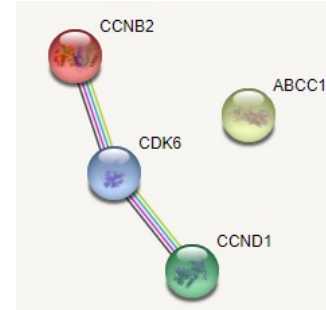
T-test significant
Proteins, FDR<0.05

Unsupervised
Hierarchical
Clustering

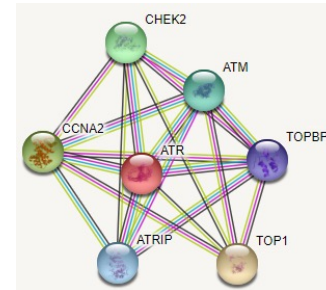


Upregulated in
ACR-368 Resistant Cells

Downregulated in ACR-
368 Resistant Cells



G1/S CELL CYCLE

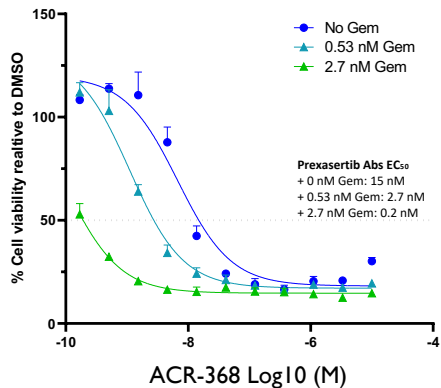


DNA DAMAGE REPAIR

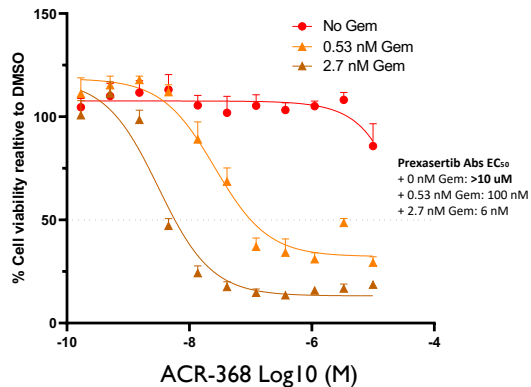
Data suggest that gemcitabine might be a rational combination to overcome DDR suppression

ULTRA-LOW DOSE GEMCITABINE SENSITIZES OVARIAN CANCER CELL LINES TO ACR-368

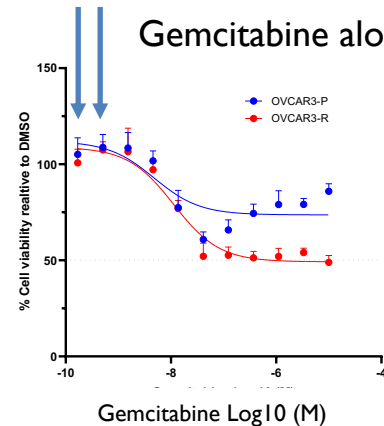
Ovarian-Parental



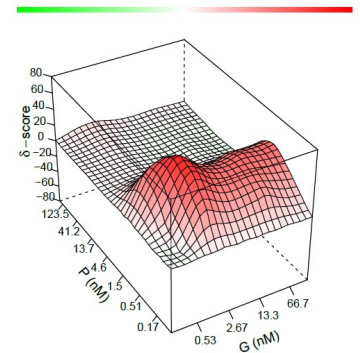
Ovarian-Resistant



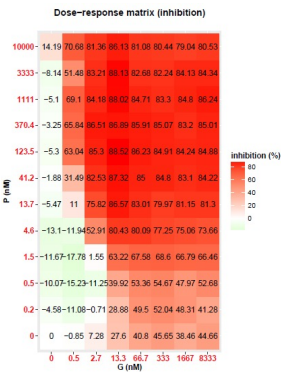
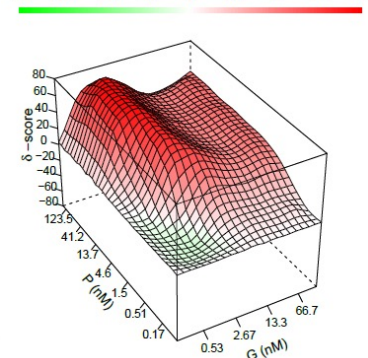
Gemcitabine alone



Bliss synergy score: 14.82



Bliss synergy score: 36.125



Bliss Synergy score:

- <-10: Drug interaction is likely antagonistic
- -10 to 10: Drug interaction is likely additive
- >10: Drug interaction is likely synergistic

INTERNAL PIPELINE: WEE1 AND PKMYT1 - LEVERAGING AP3

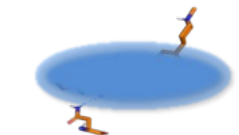
Rationale

- Complement to in-licensing, leveraging our AP3 patient selection platform for high clinical POS
- Potential within DDR drug target class to pursue combinations (ACR-368, WEE1, and PKMYT1 inhibitors)

WEE1 and PKMYT1 programs

Lead optimization ongoing in several prioritized series based on high resolution co-crystals (WEE1: 1.5-2.6 Å; PKMYT1: 1.65-2.1 Å)

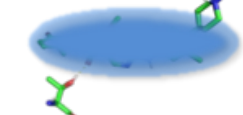
- Potent target inhibition ($IC_{50} < 10$ nM)
- Confirmed target engagement in cells
- Multiple novel structural series
- Kinase selectivity (IVKA and AP3 profiling)
- PK studies ongoing



WEE1 IC_{50} = 4.6 nM



PKMYT1 IC_{50} = 2.4 nM

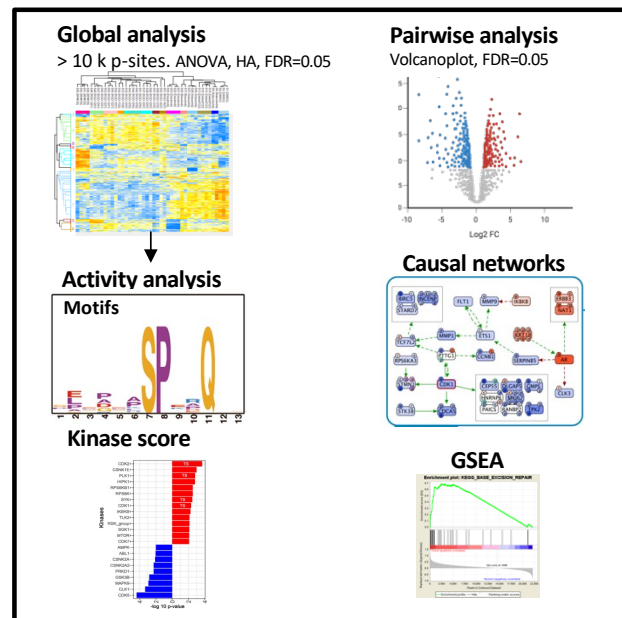


PKMYT1 IC_{50} = 10 nM



PKMYT1 co-crystallized with a candidate compound

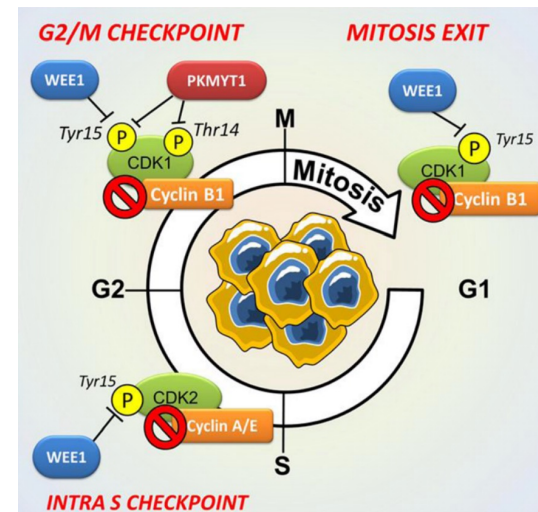
High throughput AP3 profiling



AP3 used for biologically relevant selectivity profiling

WEE1 AND PKMYT1 PROGRAMS: IDEAL FOR AP3 APPROACH

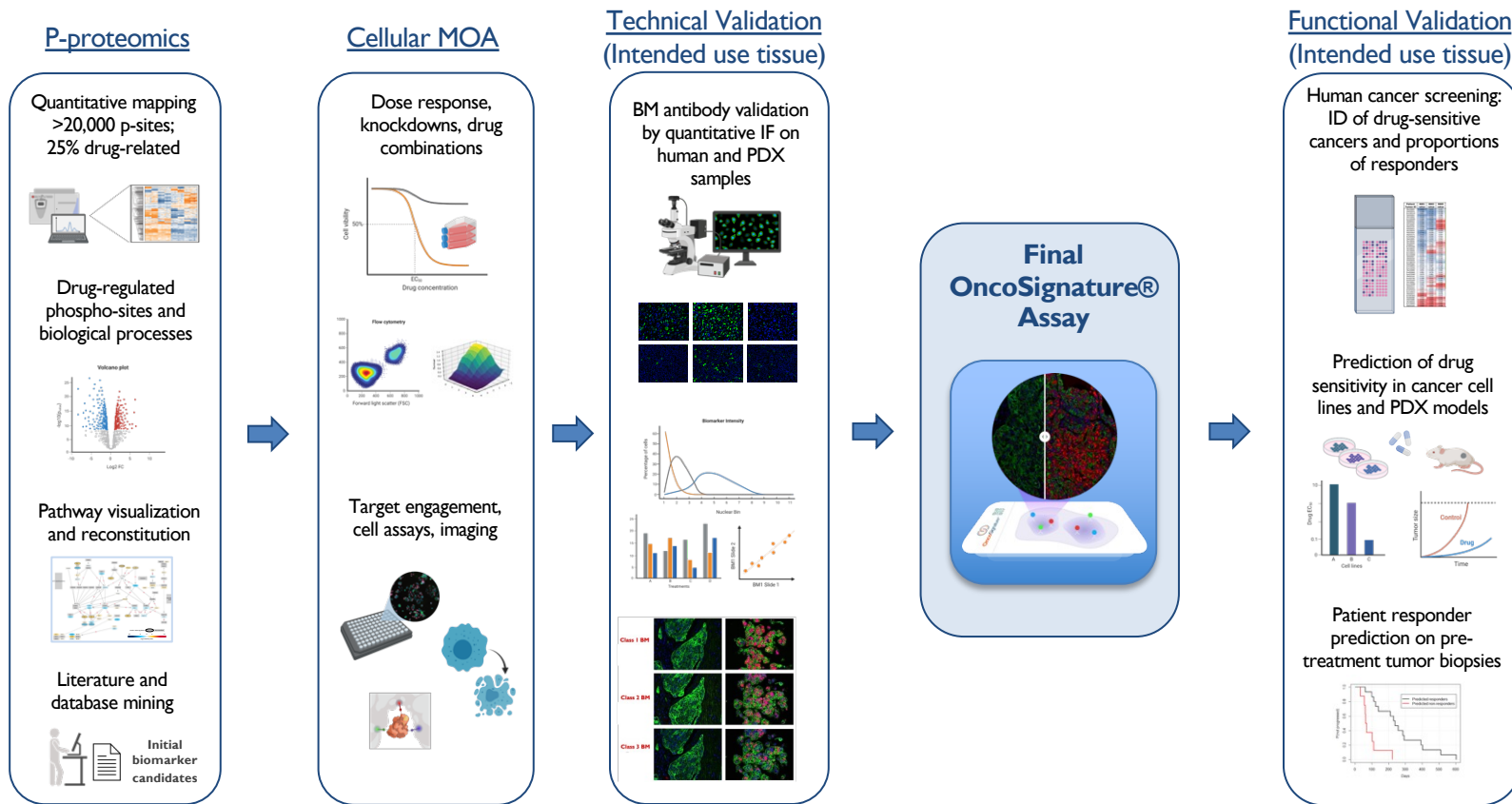
- WEE1 and PKMYT1 regulate S and G2-M cell cycle checkpoints to ensure proper DNA replication and mitotic completion through phosphorylation and inhibition of CDK2 and CDK1 and CDK1, respectively
- WEE1 inhibition propagates genomic instability by premature DNA replication and cell cycle progression, resulting in mitotic catastrophe
- PKMYT1 inhibition results in premature mitotic entry and cell death
- Strong preclinical data and emerging clinical data:
 - AZD1775/MK1775/adavosertib (AstraZeneca)
 - Debio0123 (Debiopharm)
 - ZN-c3 (Zentalis Pharmaceuticals)
 - SGR-XXX (preclinical, Schrödinger)
 - RP-6306 (Repare Therapeutics)



Ghelli Luserna di Rorà et al. J. Hematol Oncol, 2020

- ✓ Clinical activity (WEE1 single agent)
- ✓ Correlation with genetic alterations challenging, CCNE1 association being explored
- ✓ Acrivon intends to leverage OncoSignature® for optimal patient selection

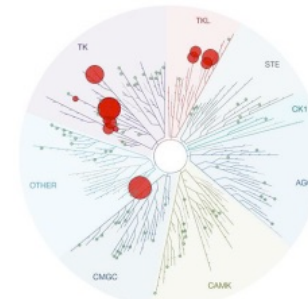
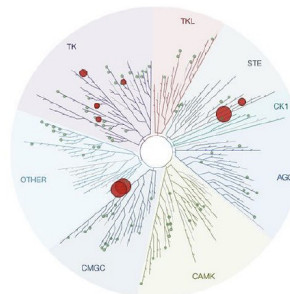
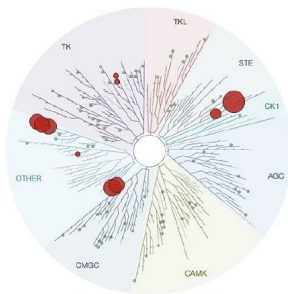
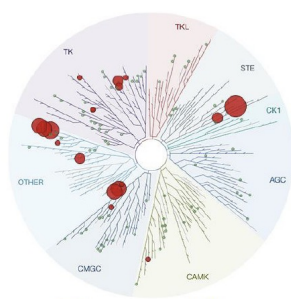
DEVELOPMENT OF AP3-BASED PATIENT SELECTION ONCOSIGNATURE® TESTS



PROFILES OF BENCHMARK WEE1 AND PKMYT1 INHIBITORS

Assays	WEE1 inhibitor A	WEE1 inhibitor B	WEE1 inhibitor C	PKMYT1 inhibitor
Target IC50	1.2 nM	2.0 nM	1.0 nM	9.8 nM
Target Engagement IC50	18.6 nM	15.9 nM	109.0 nM	10 nM
Cell Viability IC50	31.9 nM	49.2 nM	318.0 nM	87 nM
Kinome Selectivity Score @ 1uM	0.172	0.101	0.082	0.121

Eurofins Discovery panel
(106 kinases)

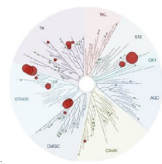


Traditional drug discovery profiling methods yield limited information

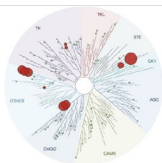
IN VITRO KINASE PROFILING DOES NOT NOT PREDICT DRUG-REGULATED KINASE ACTIVITY IN INTACT CELLS

% Remaining
100
50
0
Not Active
Active

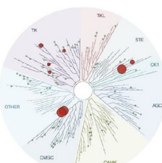
KinomeScan @ 1uM



Compound 1



Compound 2



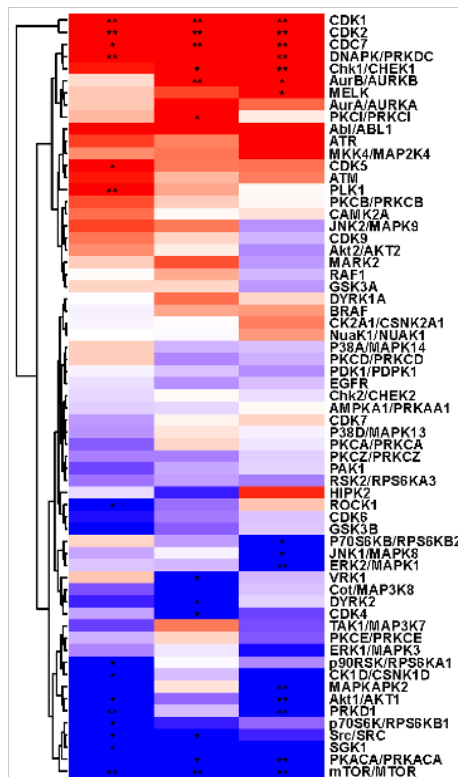
Compound 3

KinomeScan

Eurofins Discovery KinomeScan

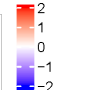
CMP 1 CMP 2 CMP 3

PTM-SEA – 60min & 200nM



CMP 1 CMP 2 CMP 3

Activity (NES)

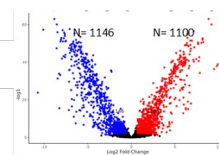


** p-value < 0.01

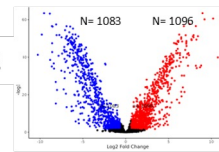
* p-value < 0.05

Kinase Activity*

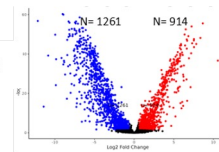
Compound 1



Compound 2



Compound 3



Time : 60 minutes
Dose : 200 nM

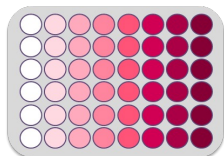
PROPRIETARY PIPE FOR AUTOMATED AP3 DATA ANALYSES

Proprietary machine learning algorithms applied to state-of-the-art AP3 MS-based phosphoproteomics for all compound projects

High throughput MS

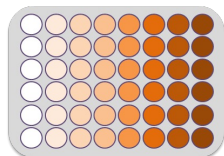
- deep, multi-parameter analyses (time, dose, cell type)

Plate 1 – Compound 1



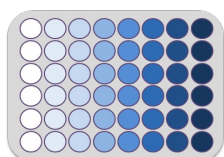
0 0.32 1.6 8 40 200 1000 5000 nM

Plate 2 – Compound 2



0 0.32 1.6 8 40 200 1000 5000 nM

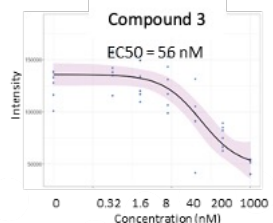
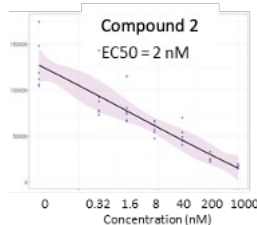
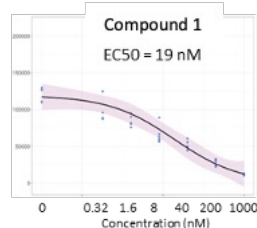
Plate 3 – Compound 3



0 0.32 1.6 8 40 200 1000 5000 nM

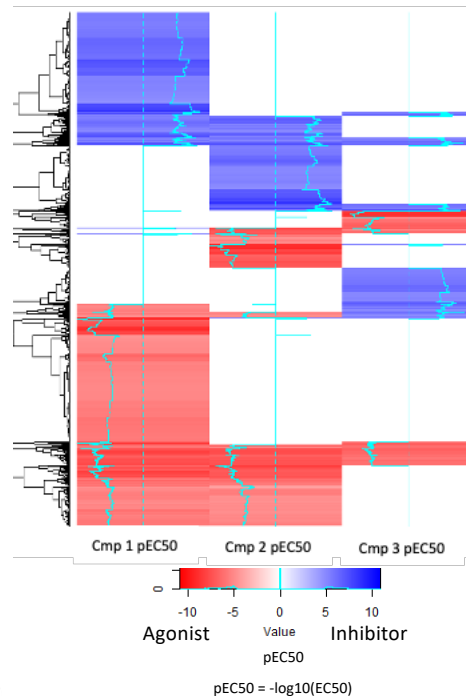
Dose-response of target engagement

- Ex: Phosphorylation of CDK1 Y15



AP3 profiles of WEE1 inhibitors

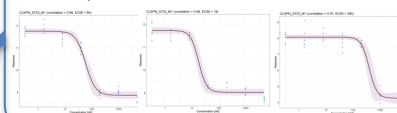
- WEE1 inhibitors are very differentiated



Phosphoproteins

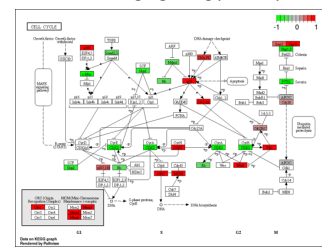
Unbiased PD marker identification

- Automated quantitation of EC50s for 5-6,000 PD markers in each MS run



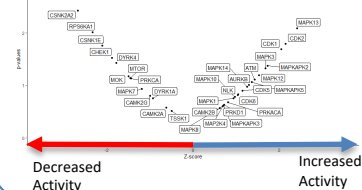
Pathway mapping

- Unbiased compound-specific effects on disease-driving signaling pathways



Mechanism of action

- Pathway activity modulation by WEE1 inhibitors



TIGHT, HIGH-RESOLUTION DATA WITH DEEP COVERAGE

25,800 p-sites

16,456 p-sites

QC MS Data

Data Clean
Up

QC
Processed
Data

Volcano
Plots

Hierarchical
Clustering

Consensus
Sequence
Motif

Kinase
Inference

Pathway
Enrichment

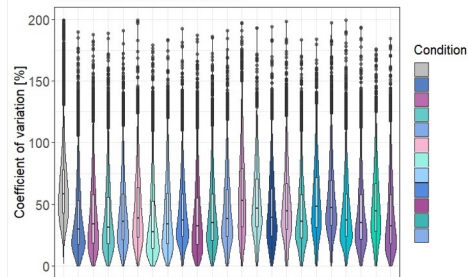
Functional
Annotation

Network
Mapping

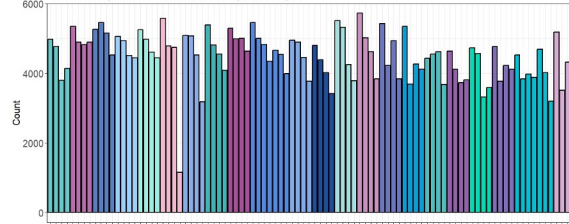
Biomarkers

- Filter >60% in at least on condition
- Normalization: LOESS
- Imputation: SLISA

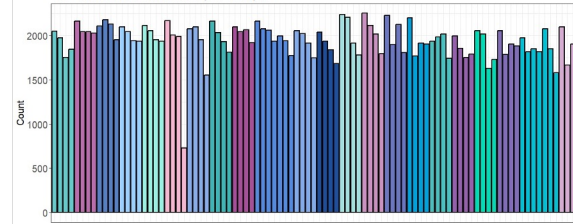
Coefficients of variation



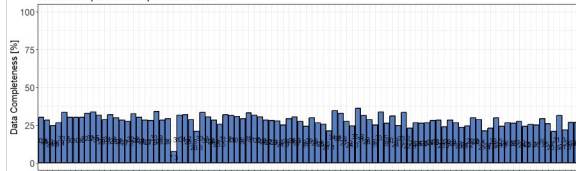
QC - Phosphosites Identification per Sample



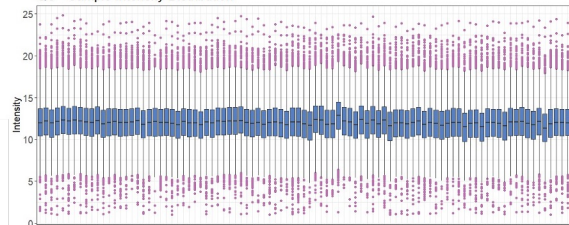
QC - Protein Identification per Sample



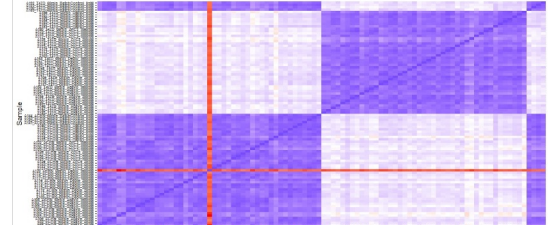
Data completeness per .raw file



QC - Sample Intensity Distribution

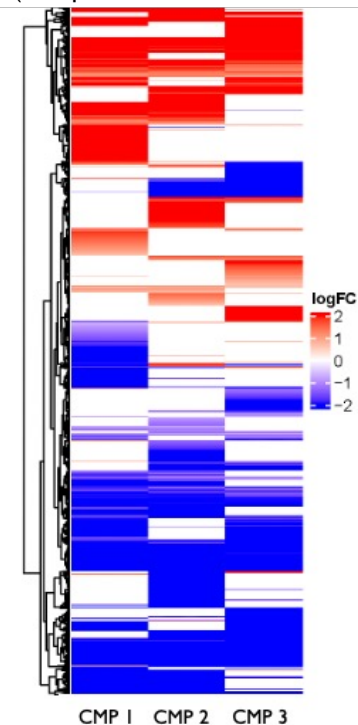


QC - Sample Correlation Matrix

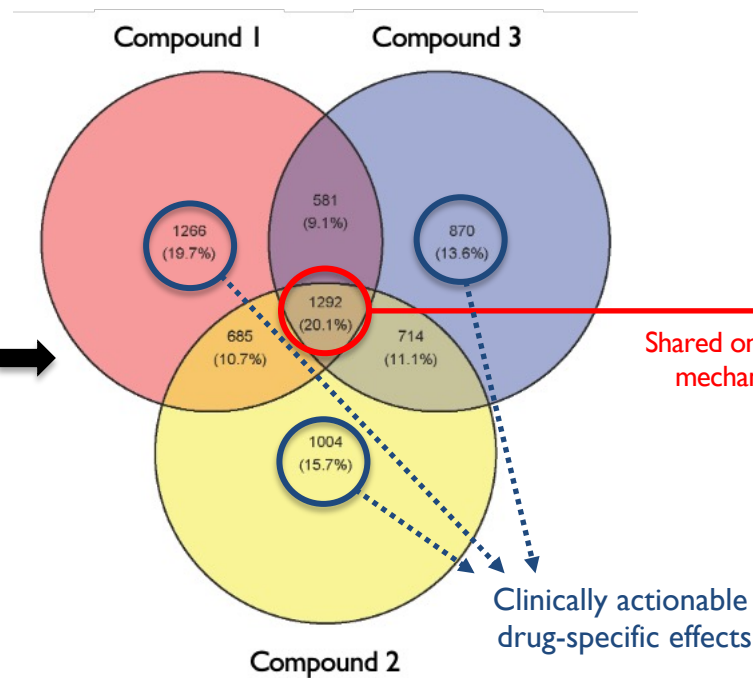


WEE1 INHIBITORS ARE MORE DIFFERENT THAN SIMILAR

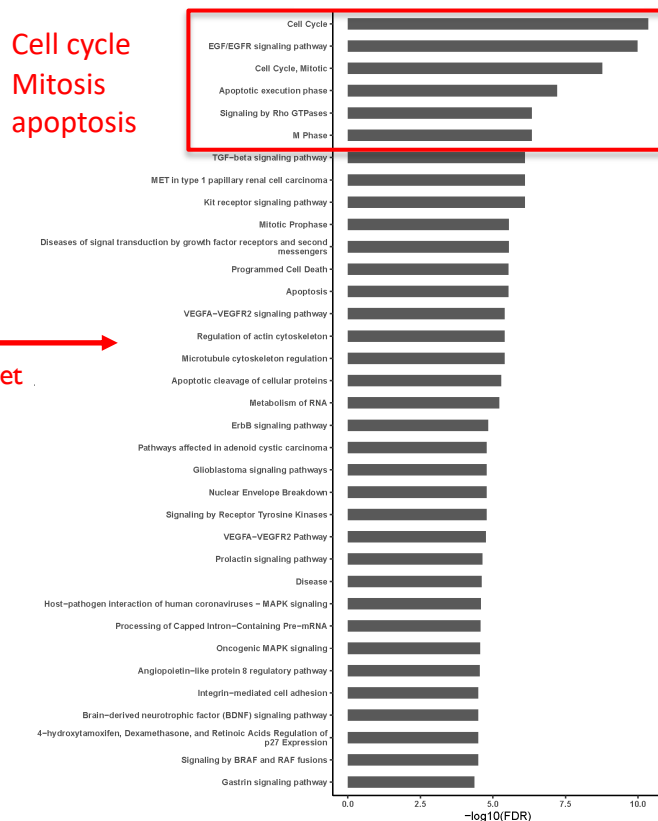
Drug-regulated phosphorylation sites
(unsupervised hierarchical cluster)



Unique and shared drug-regulated sites



Pathway enrichment analysis

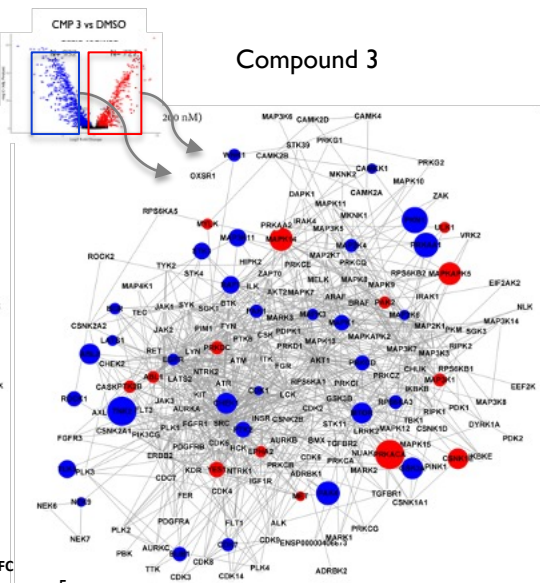
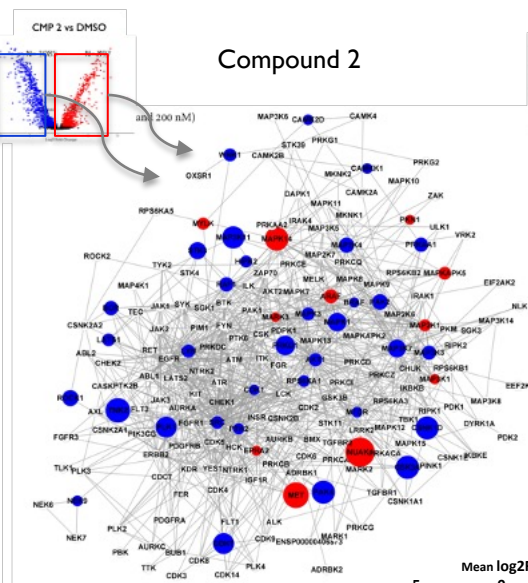
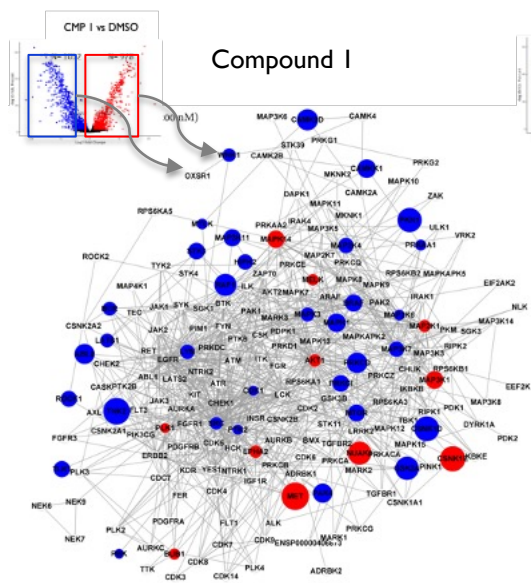
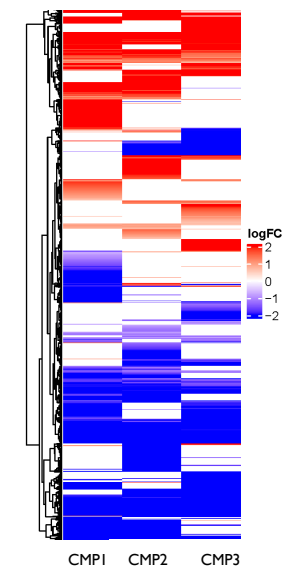


FDR < 0.5 & abs(Fold Change) > 1.5; Time : 60 minutes; Dose : 200 nM

Pathway over-representation analysis: Wikipathway and Reactome; FDR < 0.00005; Significance = -log10(FDR)

WEE1 INHIBITOR-REGULATED GLOBAL PHOSPHOPROTEOME REVEAL HIGHLY DIFFERENTIATED EFFECTS

Drug-regulated phosphosites

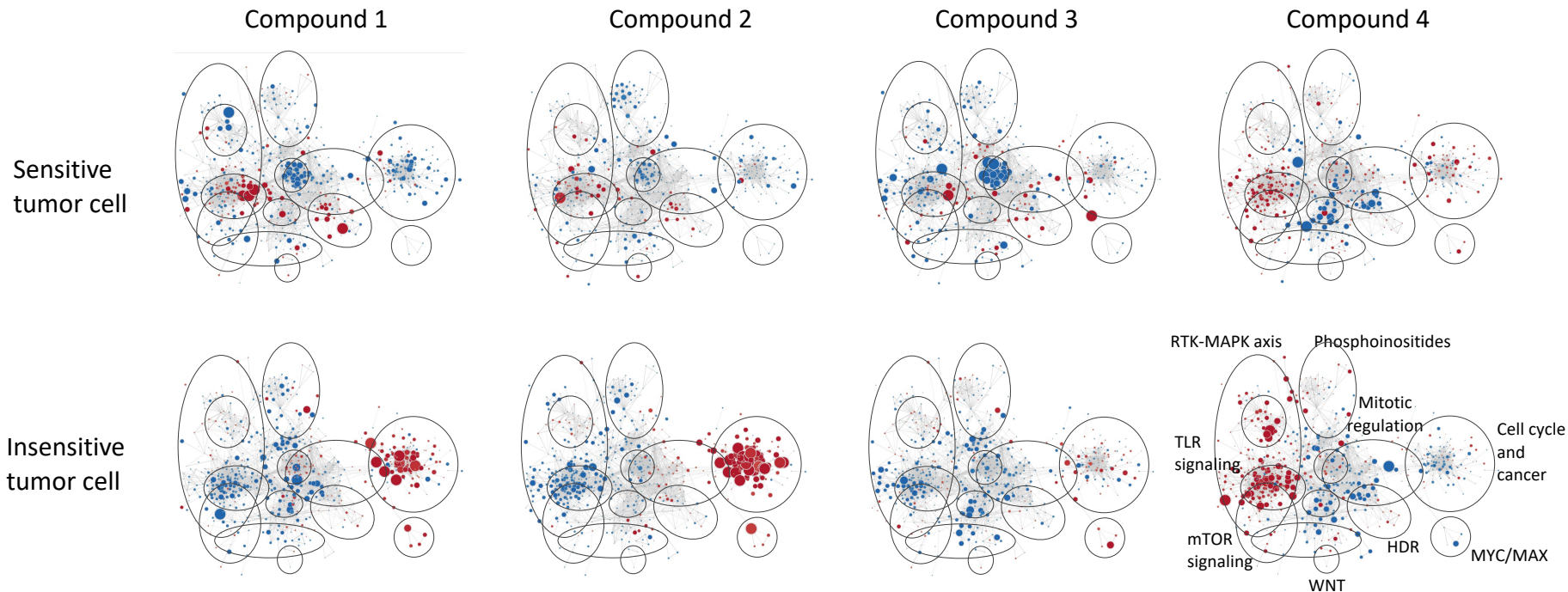


FDR < 0.5 & abs(Fold Change) > 1.5

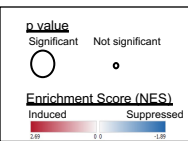
Differentiated WEE1 inhibitor-specific effects provide opportunity for tailored patient responder identification

Time : 60 minutes; Dose : 200 nM

FUNCTIONAL PATHWAY NETWORK EFFECTS BY WEE1 AND PKMYTI INHIBITORS ARE HIGHLY DISTINCT

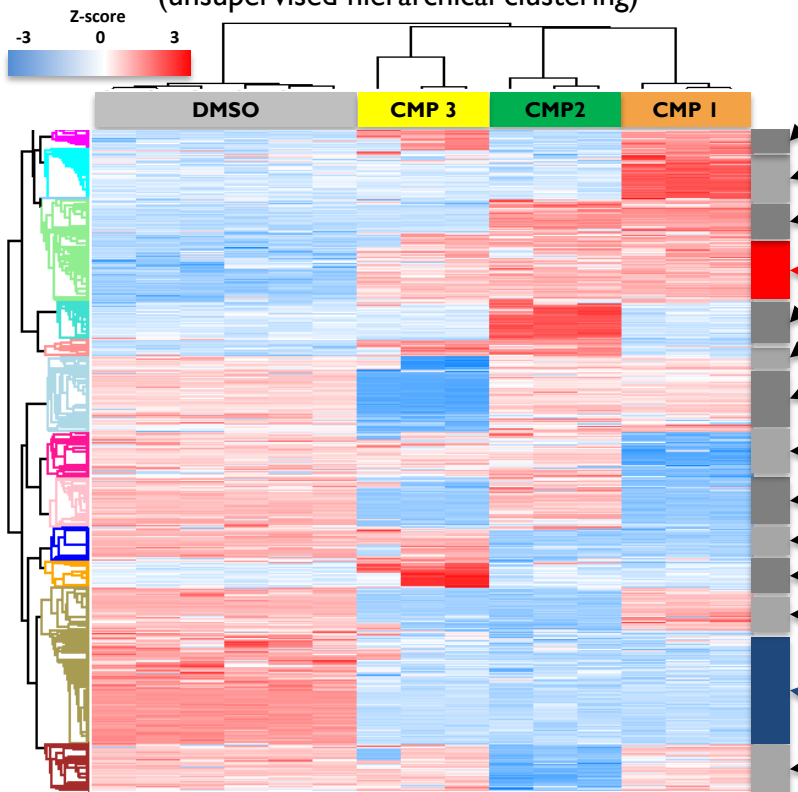


Compounds 1 and 4 demonstrate opposite effects on HDR in sensitive cells



BENCHMARK WEE1 INHIBITORS HAVE DIFFERENTIATED COMPOUND-SPECIFIC DISEASE PATHWAY MODULATION

Drug-regulated phosphorylation sites
(unsupervised hierarchical clustering)



Drug regulation of **pathway activity states**
(substrate consensus motif enrichment analysis)

Pathway	Pvalue
Cdc2 kinase substrate motif	3.3E-10
CDK kinase substrate motif	6.7E-10
CDK1,2,4,6 kinase substrate motif	3.3E-09
positive regulation of sequestering of triglyceride	2.4E-11
RNA splicing, via transesterification reactions with bulged adenosine as nucleophile	9.8E-11
nuclear mRNA splicing, via spliceosome	9.8E-11
Cell Cycle	1.8E-11
Cell Cycle, Mitotic	3.2E-09
Regulation of TP53 Activity	8.5E-09
RIG-I-like receptor signaling pathway	1.1E-09
Signaling by Rho GTPases	1.2E-13
Cell Cycle	1.2E-11
SUMO E3 ligases SUMOylate target proteins	1.2E-11
TGF-beta signaling pathway	2.4E-11
Cell Cycle, Mitotic	1.4E-10
Apoptotic cleavage of cellular proteins	1.0E-09
Apoptotic execution phase	1.0E-09
MAPKAPK1 kinase substrate motif	1.9E-08
Nuclear Envelope Breakdown	2.7E-08
SUMO E3 ligases SUMOylate target proteins	2.7E-08
Mitotic Prophase	2.7E-08
Signaling by Rho GTPases	5.3E-10
Cell Cycle	1.1E-08
Membrane Trafficking	2.6E-08
Androgen receptor signaling pathway	4.7E-08
Brain-derived neurotrophic factor (BDNF) signaling pathway	4.7E-08

Cell Cycle, Mitotic	1.9E-09
Mitotic Prometaphase	2.3E-08
GSK-3, ERK1, ERK2, CDK5 substrate motif	3.1E-05
Mitotic Anaphase	2.3E-05
Resolution of Sister Chromatid Cohesion	1.1E-04
SUMOylation of DNA replication proteins	1.4E-04

Shared upregulated

WW domain binding motif	3.1E-45
GSK-3, ERK1, ERK2, CDK5 substrate motif	3.1E-45
Cdc2 kinase substrate motif	1.6E-28
CDK1,2,4,6 kinase substrate motif	1.6E-28
ERK1,2 kinase substrate motif	1.3E-22
CDK kinase substrate motif	2.0E-16
CDK5 kinase substrate motif	1.2E-13
Cell Cycle	2.3E-12
Cell Cycle, Mitotic	3.6E-11
M Phase	3.5E-07

Angiotensin-like protein 8 regulatory pathway	3.1E-09
ATM signaling in development and disease	1.9E-08
Integrated breast cancer pathway	2.0E-08
4-hydroxytamoxifen, Dexamethasone, and Retinoic Acids	2.0E-08
Regulation of p27 Expression	2.0E-08
Target of rapamycin (TOR) signaling	2.2E-08

Pathways affected in adenoid cystic carcinoma	4.1E-07
Cell Cycle	4.3E-07
Signaling by Rho GTPases	4.3E-07
Chromatin modifying enzymes	4.3E-07
Apoptotic execution phase	4.8E-07

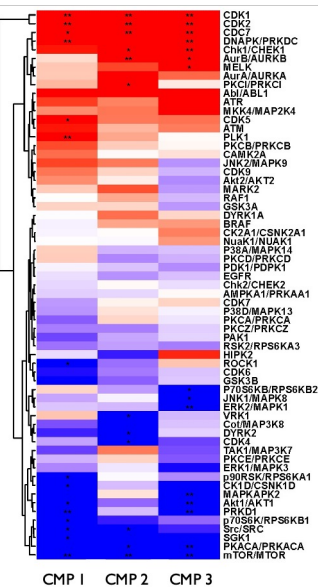
Shared downregulated

EGF/EGFR signaling pathway	3.5E-10
VEGFA-VEGFR2 signaling pathway	1.2E-07
MET in type 1 papillary renal cell carcinoma	2.2E-07
ErbB signaling pathway	2.9E-07
Signaling by Rho GTPases	3.0E-07

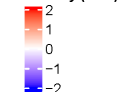
DIFFERENTIAL WEE1 INHIBITOR-REGULATED PATHWAY ACTIVITY

Shared on target CDK1/2 activation and compensatory activation of CHK1 and ATR

Substrate motif-inferred
kinase activities



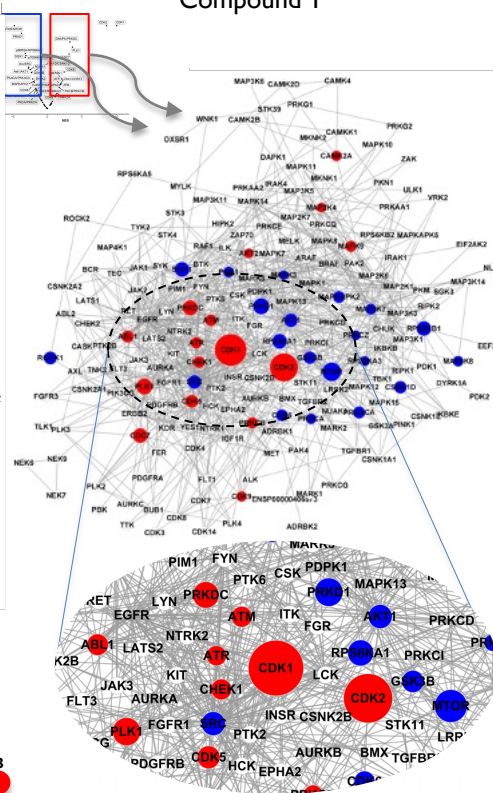
Activity (NES)



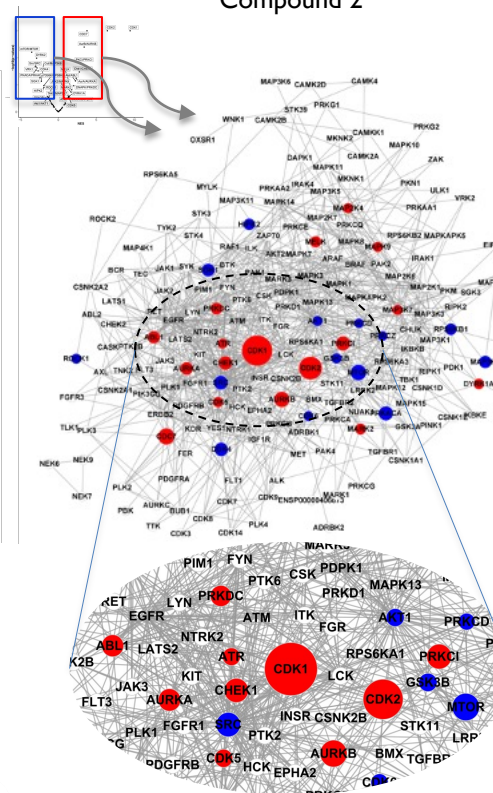
Activity (NES)



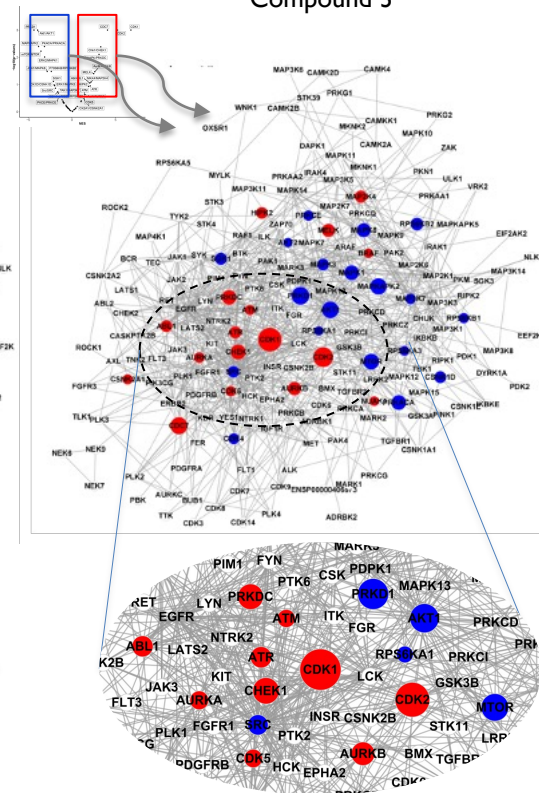
Compound 1



Compound 2



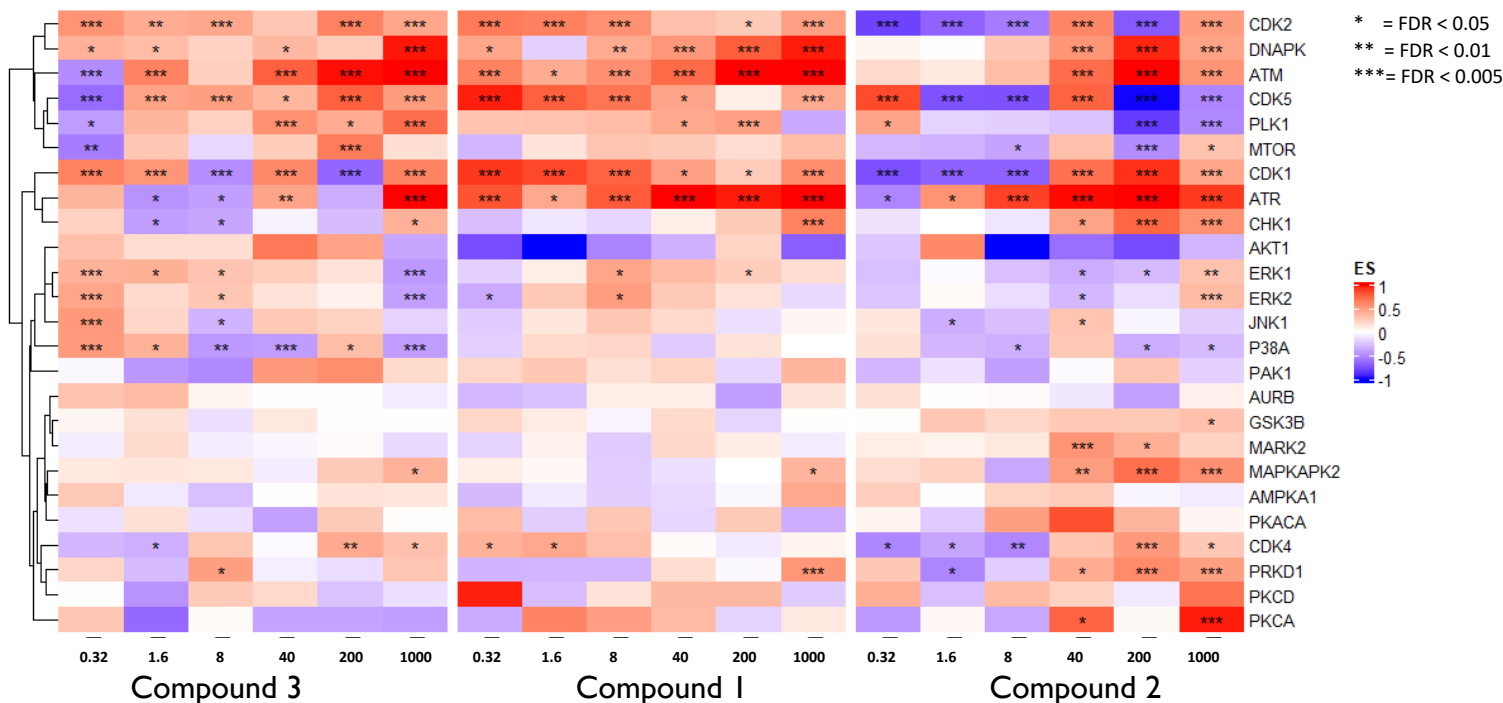
Compound 3



Time : 60 minutes
Dose : 200 nM

WEE1 INHIBITOR REGULATION OF PATHWAY ACTIVITY (4H)

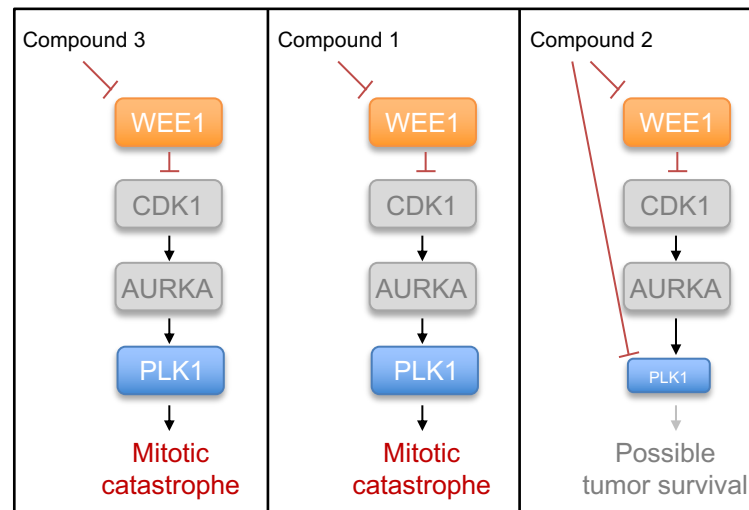
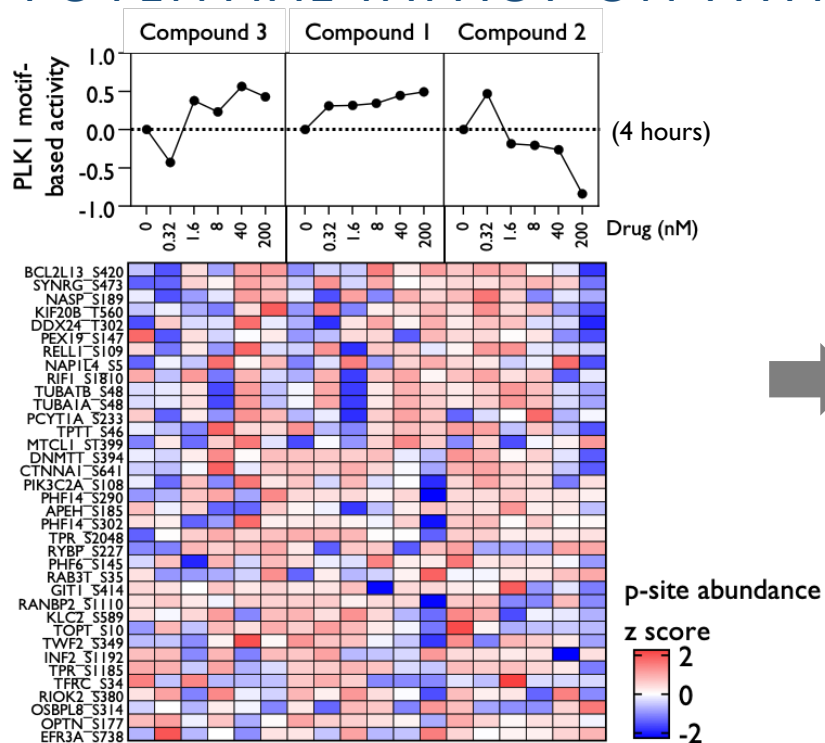
Drug-regulated kinase activities calculated based on consensus motif enrichment analysis



Compound 2 shows possible PLK1 inhibition and less pronounced CDK activation: Could counteract mitotic catastrophe
Compound 3 shows upregulation of MAPK and PI3K: Could be single agent resistance mechanisms

Upregulated kinase activities are color-coded in red with the corresponding false discovery rate (FDR) denoted with "*"

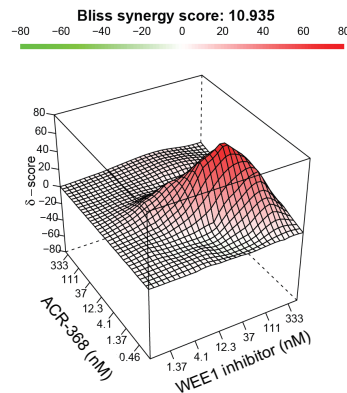
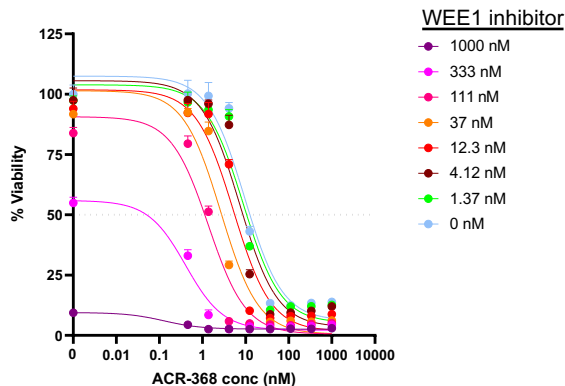
DIFFERENTIAL REGULATION OF PLK1 ACTIVITY – POTENTIAL IMPACT ON PATIENT TREATMENT OUTCOME



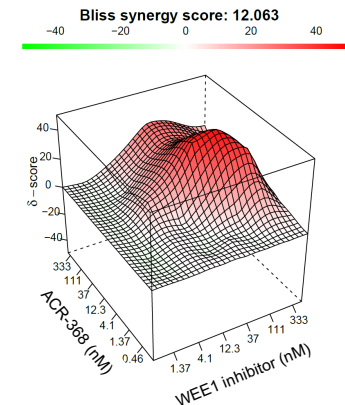
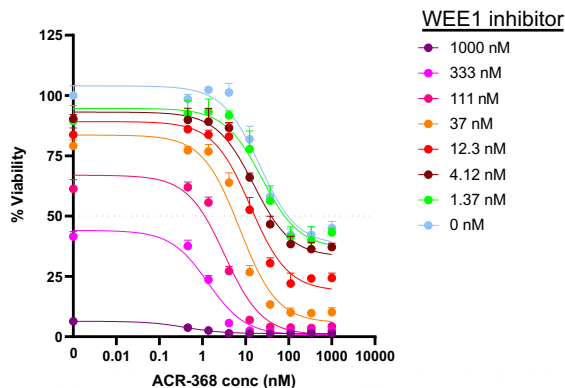
PLK1 inhibition might counteract mitotic catastrophe and has been associated with adverse events

ACR-368 IS SYNERGISTIC WITH AND OVERCOMES RESISTANCE TO WEE1 INHIBITOR

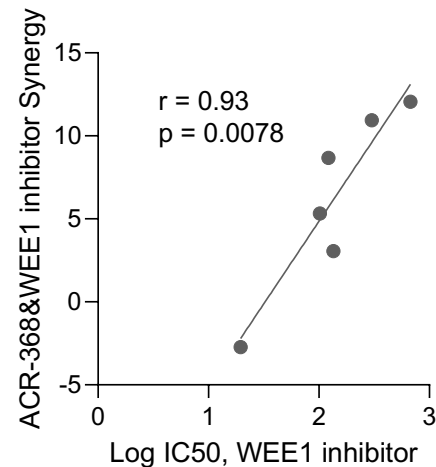
Human
endometrial
tumor cell
line



Human
ovarian
tumor
cell line



Combo synergy correlates to
WEE1 inhibitor resistance

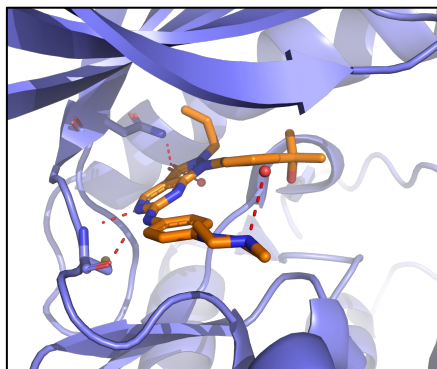


ACTIONABLE FINDINGS AND CONCLUSIONS

- AP3 enables unbiased measurement of compound-specific on- and off-target effects
- WEE1 inhibitors all demonstrate activation of CDK1/2 and cell cycle machinery
- Benchmark WEE1 inhibitor AP3 profiles can be leveraged for rational drug design and SAR ('dialing' in and out wanted and unwanted pathway effects)
- Differential actionable resistance mechanisms, e.g. WEE1 and CHK combination
- WEE1 inhibitor-treated patients predicted to still be sensitive to ACR-368

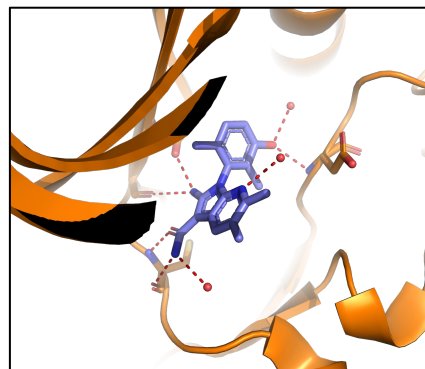
WEEI AND PKMYT PROGRAM STATUS

- Hundreds of compounds designed and synthesized across multiple lead series
- High resolution co-crystal structures generated for >30 compounds in complex with WeeI or PKMYT1 (resolution from about 1.5Å to <3Å)



Crystal structure of adavosertib:WeeI

Zhu et al, J. Med. Chem. 2017 60:7863–7875 (PDP: 5V5Y)



Crystal structure of RP-6306:PKMYT1

Szychowski et al, J. Med. Chem. 2022; 65:10251–10284 (PDP 8D6E)

EXEMPLARY PKMYT1 AND WEE1 AND DUAL-SELECTIVE LEAD COMPOUND PROFILES

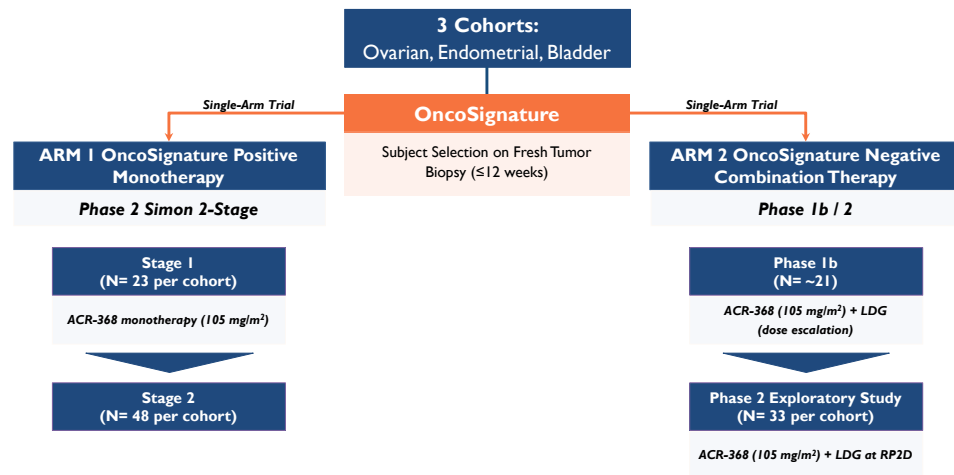
Compound	CMPD-2655	CMPD-2714	CMPD-2707	CMPD-2743 (A)
Wee1 IC ₅₀	451 nM	251 nM	410 nM	1.3 nM
PKMYT1 IC ₅₀	6.5 nM	2.9 nM	1.8 nM	20.6 nM
TE EC ₅₀	118 nM (PKMYT1)	47.1 nM (PKMYT1)	56 nM (PKMYT11)	17 nM (Wee1) 233 nM (PKMYT1)
hERG IC ₅₀ (in vitro)	TBD	>100 µM	760 µM	1.4 µM
Hu microsomal Clint (µl/min/mg)	17	13	<10	102
Rat microsomal Clint (µl/min/mg)	17	16	<10	TBD
Mu t _½ (IV); Vdss (L/kg); %F	0.9 hr; 2.71; 50%	1.8 hr; 3.19; 75%	0.9; 1.43; 64%	1.5 hr; 4.4; 25.3%

Compound	CMPD-2743	CMPD-2736	CMPD-2804	CMPD-2858
Wee1 IC ₅₀	1.3 nM	1.25 nM	2.5 nM	2.1 nM
PKMYT1 IC ₅₀	20.6 nM	45.8 nM	91% @ 10 µM	84% @ 10 µM
TE EC ₅₀	17 nM (Wee1)	15 nM (Wee1)	9.9 nM (Wee1)	47.9 (Wee1)
Cell viability IC ₅₀	25 nM	33 nM	N.D.	N.D.
hERG IC ₅₀ (in vitro)	1.4 µM	>100 µM	3.0 µM	4.0 µM
Rat microsomal Clint (µl/min/mg)	TBD	<10	-	TBD
Rat PO AUC/dose (h/L*kg)	0.185	0.05	0.09	0.21
Mu t _½ (IV); Vdss (L/kg); %F	1.5 hr; 4.4; 25.3	N.D.	N.D.	N.D.

ACR-368 CLINICAL TRIAL

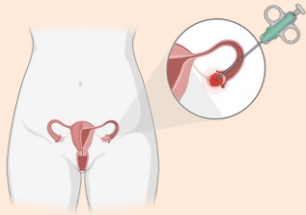
- We reconfirm our guidance and timeline of initial clinical readouts of our Phase 2 and Phase 1b/2 clinical trial in H2 2023
- Enrolling and dosing patients at the RP2D of ACR-368 based on predicted sensitivity using our ACR-368 OncoSignature Assay run by our CDx partner
- 19 sites currently activated¹
- Key opinion leaders with extensive experience using ACR-368 from previous trials are actively participating

¹<https://clinicaltrials.gov/ct2/show/NCT05548296>

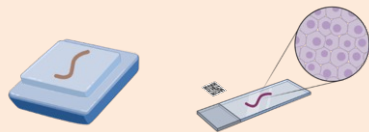


ONCOSIGNATURE® TESTS: USAGE IN THE CLINIC

Pretreatment tumor biopsy

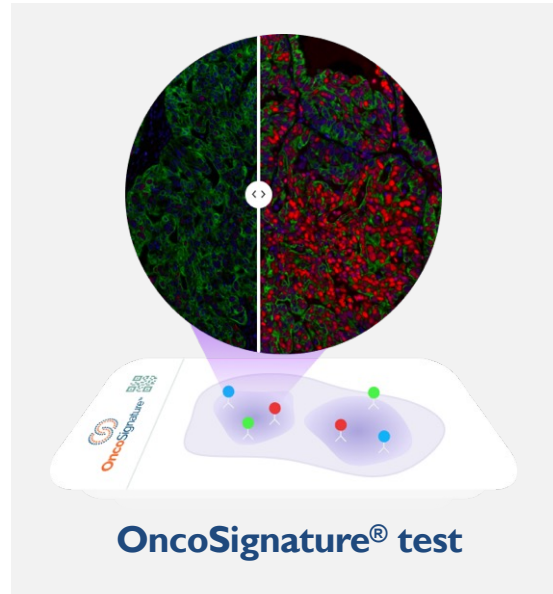


Sample processing



Biopsy in
FFPE
block

Automated tumor
Region-of-Interest
biomarker scoring



- Pretreatment tumor biopsy test
- Compatible with 5 business days turn-around
- Offered by CDx partner under exclusive license from Acrivon

Treatment decision based on patient stratification



Predicted
Responder



Predicted
Non-responder



FINANCIAL HIGHLIGHTS

Cash and marketable securities

\$159.5M

Balance sheet
31-March-2023

Projected runway at least into

Q4'24

Current operating plan, assuming
no additional financing

Fully Diluted Shares Outstanding

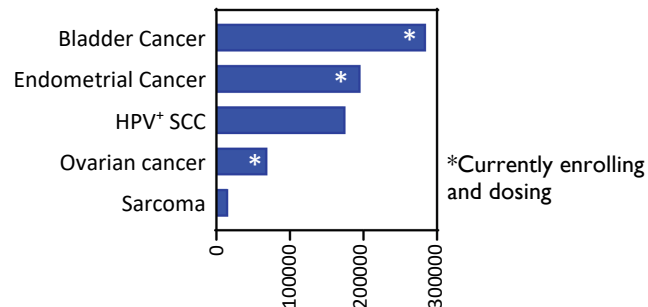
27.0M

Shares and equity grants
outstanding 31-March-2023

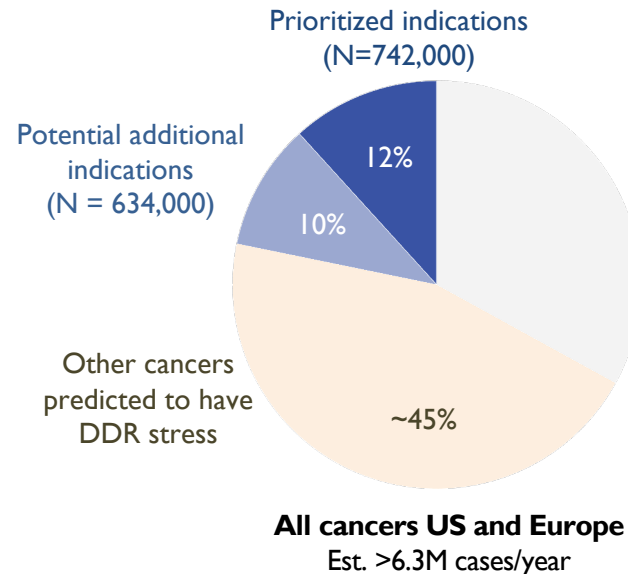
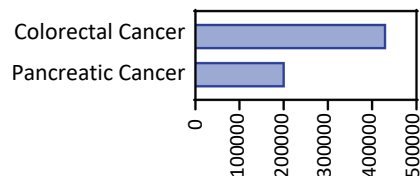
Unaudited.

ACRIVON ADDRESSABLE MARKETS (US & EU INCIDENCE)

Prioritized indications for single agent ACR-368



Potential additional indications for single agent ACR-368

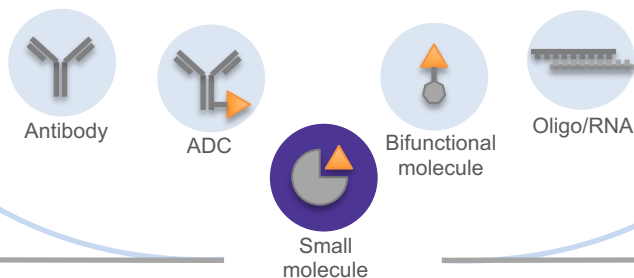


- ~30% (N = 223,000) of prioritized indications predicted sensitive to single agent ACR-368
- WEEI and/or PKMYTI inhibitor combinations with ACR-368 might further expand addressable fraction within sensitive tumor types

US cancer stats are based on ACS 2022 publication and subtype estimation from literature; EU cancer stats are based on IARC 2020 publication and subtype estimation from literature. Cancers with DDR stress are estimated to be 67% which is calculated from MSK-IMPACT patient samples with DDR relevant mutations and CNVs, such as TP53, KRAS, CCNE1, etc.

THE AP3 APPROACH IS MODALITY AND DISEASE AGNOSTIC

Therapeutic modalities



Therapeutic areas

