Determined to realize a future in which people with cancer live longer and better than ever before

Syndax

1Q19 EARNINGS PRESENTATION | MAY 2019

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2019: Portfolio prioritization to drive value

Entinostat - exemestane

FDA BTD

Oral, Class I HDAC in HR+ mBC

- Potential positive OS data in 2019
- Efficacy post-CDK4,6 Tx
- Potential NDA filing in 2020
- Blockbuster potential

Potential first combo to demonstrate survival benefit

SNDX-5613

Oral, Menin inhibitor

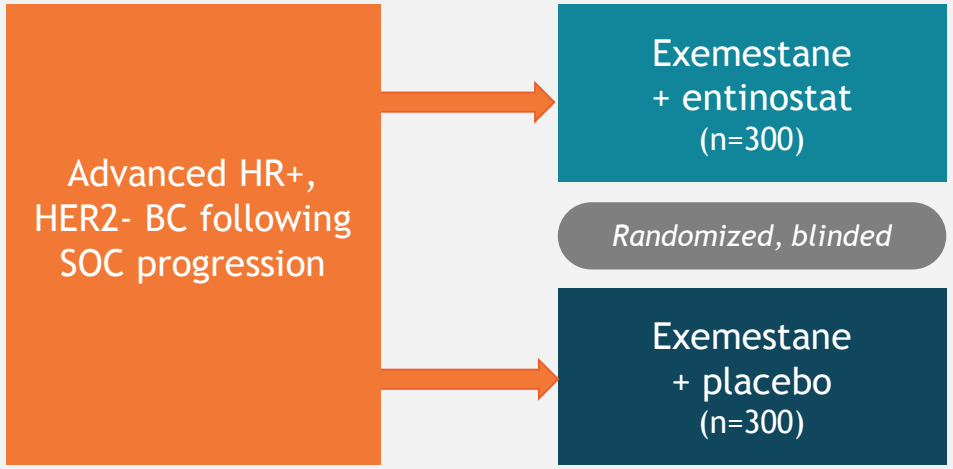
- Blocks activity of MLL-fusion proteins
- IND filing est. 2Q, clinical data '19/'20
- Benefit expected in high need AML, ALL populations
- Blockbuster potential

Targeted therapy provides fast to market opportunity

HR+ mBC – hormone receptor positive metastatic breast cancer; MLL – mixed lineage leukemia; AML – acute myeloid leukemia; ALL – acute lymphoblastic leukemia

Phase 3 E2112: Focused on overall survival

E2112: Exemestane +/- entinostat



Primary endpoint: OS

FDA BTD

National Cancer Institute

ECOG-ACRIN cancer research group
Reshaping the future of patient care

Syndax

E2112 Trial Milestones

- ✓ **4Q18:** Accrual completed (n=608), PFS and interim OS analyses shared
- ✓ **2Q19:** Passed interim OS futility
- **4Q19:** Next interim OS analysis
- **2Q20:** Final OS analysis (if needed)

Expect to file NDA ~6 months after positive OS data

A positive OS result allows filing for full regulatory approval

Blockbuster potential as 2nd/3rd line agent

Leading treatment options - HR+, HER2- advanced breast cancer

1st line hormone Tx	2nd/3rd/4th line hormone Tx	Chemo-Tx
Anastrozole or letrazole +/- CDK4,6 inhibitor	Anastrazole, Faslodex +/- CDK4,6 inhibitor or Afinitor-exemestane	Capecitabine, gemcitabine, eribulin

34,000 pts

Entinostat-exemestane target population

Source: DataMonitor 2017 Breast cancer: HR+/HER2- Disease Coverage Report; IQVIA Monthly treatment report (2018)

SNDX-5613 targets novel fusion protein: Fusion proteins proven to be good candidates for targeted therapies

Advantages

- Strong target validation
- Precise patient selection
- Big effect in small studies
- Molecular markers of disease status
- Rapid regulatory path

Therapies targeting fusion proteins

BCR-ABL

Tasigna (nilotinib)
SPRYCEL dasatinib 100 mg tablets
ICLUSIG (ponatinib) tablets
gleevec (imatinib mesylate) tablets 100mg, 400mg

EML4-ALK

ZYKADIA ceritinib 150 mg capsules
ALUNBRIG BRIGATINIB 30 mg TABLETS
ALECENSA alectinib 150 mg capsules
XALKORI CRIZOTINIB

NTRK Fusions

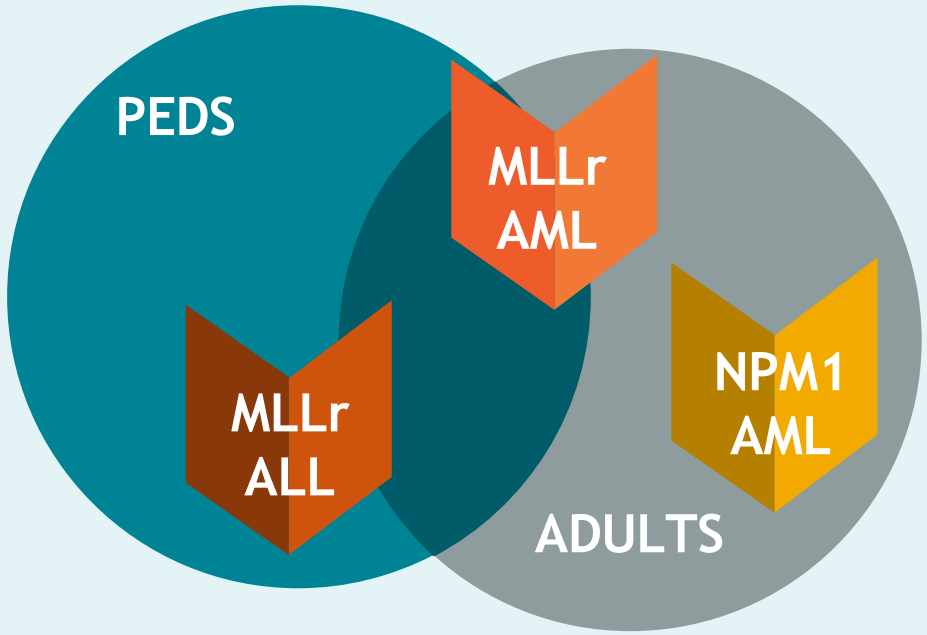
VITRAKVI (larotrectinib) 25-mg/100-mg CAPSULES 20-mg/mL ORAL SOLUTION
entrectinib (Ignyta/Roche)

RET Fusions

LOXO-292 (Loxo/Lilly)
ALECENSA alectinib 150 mg capsules
BLU-667 (Blueprint)

SNDX-5613: potential best-in-class, targeted, oral agent with single agent activity and fast to market potential

Phase 1/2 trial population:
MLLr adult, MLLr peds, NPM1 mut AML



Defined fast to market pathway

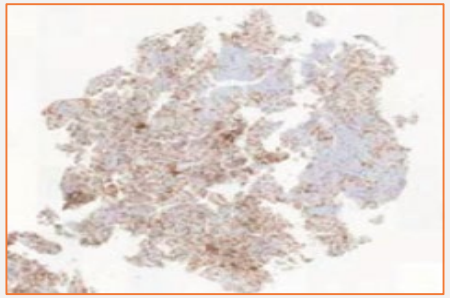
- **IND filing est. 2Q19; Phase 1 to follow**
  - Early efficacy possible as early as year-end 2019
- **MLLr and NPM1 identified today with standard screening protocols**
- **No approved therapies targeting MLLr or NPM1 acute leukemias**
  - $$B commercial opportunity

Entinostat ENCORE program tested PD-(L)1 combos across immune phenotypes

Responds to PD-(L)1

Convert to "inflamed" with combinations

Inflamed



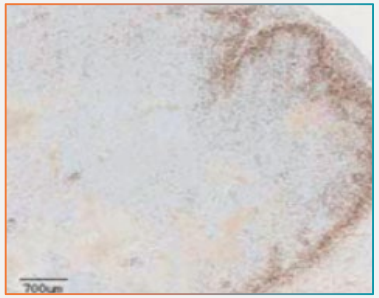
- *Abundance of TILs*
- *CD8+ Tcells, INFγ*
- *PD-(L)1 expression*

ENCORE 601

NSCLC and Melanoma

MERCK

Excluded



- *Angiogenesis*
- *MDSCs*
- *Reactive stroma*

ENCORE 601	ENCORE 602
CRC	TNBC
MERCK	Genentech

Non-Inflamed

- *Highly proliferating tumor cells*
- *Low Tcell infiltrate*

ENCORE 603

Ovarian

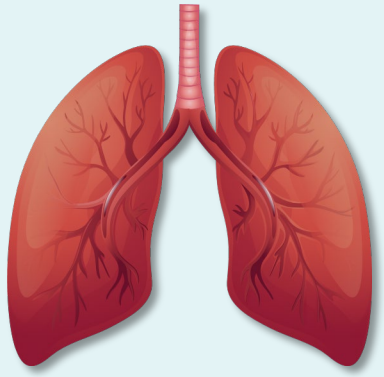
MERCK Pfizer

Source: Hedge, et al. *Clin Cancer Res*; 22.8 (2016): 1865-1874.

ENT-Keytruda shown to reverse resistance to anti-PD-1 Tx in NSCLC and MEL

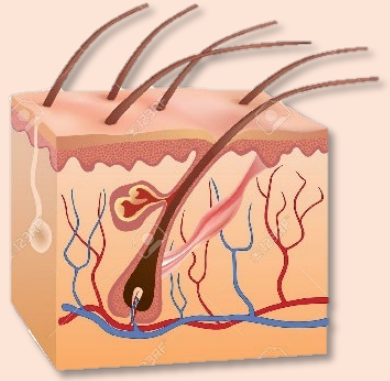
Trial cohorts enrolled patients whose disease had progressed on/after anti-PD-1 therapy

Biomarker selected NSCLC



ENT shown to down regulate myc activity; re-sensitizing pts to PD1 w/8 months mDoR

Melanoma



19% ORR, 36% CBR*; 13mo mDOR, 4.2mo mPFS similar results in pts who had prior CTLA4

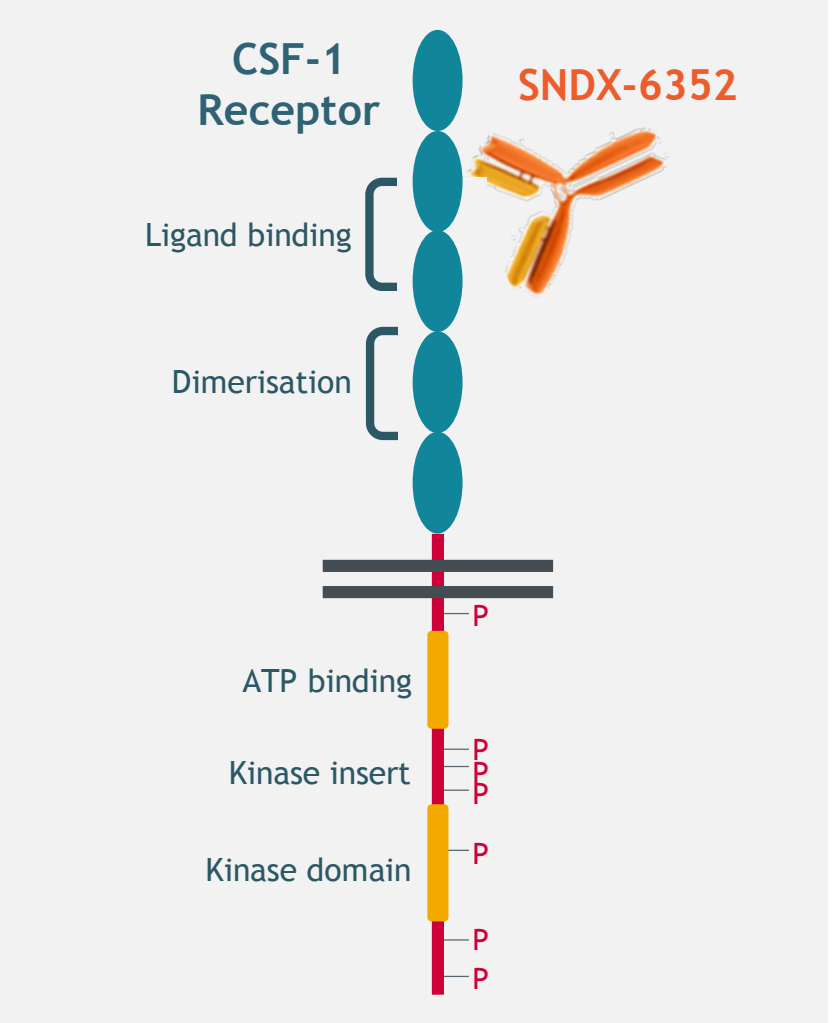
"The overall medical benefit is impressive, the study is very positive for seeing the potential role for epigenetic therapy in the setting of immunotherapy." – Dr. S. Baylin (AACR 2019 oral presentation discussant)

CBR - Clinical Benefit Rate includes patients with CR, PR or SD >6 months; Source: Ramalingam, S, et al; AACR Annual meeting 2019; Sullivan, R, et al; AACR Annual meeting 2019

SNDX-6352: Pursuing a novel indication

High affinity, IgG4 (K_D = 4-8 pM)

- ✓ Chronic graft versus host disease (cGVHD)
  - Study initiated in 4Q18
- ✓ Multiple ascending dose (MAD, solid tumors) ongoing
  - RP2D expected in 2Q19
- ✓ Combination study with IMFINZI (durvalumab, AZ) ongoing
  - RP2D expected in 2Q19



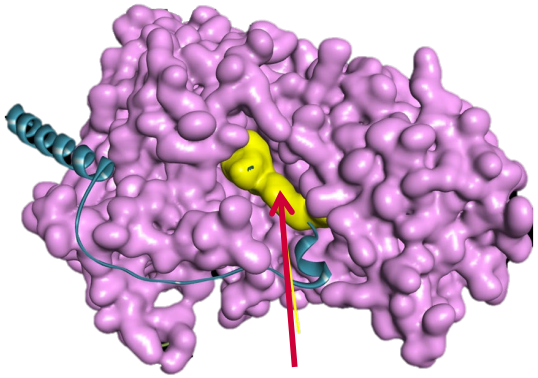
CSF-1R – colony stimulating factor-1 receptor; RP2D - recommended Phase 2 dose.
Source: Ordentlich, P. et al SITC 2016.

Proven ability to build the pipeline

3Q16: UCB

SNDX-6352

4Q17: Allergan/Vitae



Menin-MLLr inhibitors

- Established relationships enhance identification and access to quality assets
- Clinical development leadership enables competitive advantage
- Business development continues to be a core strength of our business

March 2019 financing: $27.4 million net proceeds extends cash runway

- **Completed deal with key investors, led by BVF**
- **Issued 4.6M shares and prefunded warrants @ $6.00 (premium to market) and 4.6 M series warrants priced at $12 and $18**
  - Warrants expire on the earlier of E2112 positive OS data + 3 months or Dec 31, 2020
- **31.6 million total shares outstanding post financing**

Q1 2019 financial highlights and 2Q, full-year 2019 guidance

Ticker	SNDX (NASDAQ)	
As of March 31, 2019		
Cash and short-term investments	$92.7 million	
Shares Outstanding*	31.6 million	
2019 2Q and full year Operating Expense Guidance		
	2Q 2019	**2019**
Research and Development	$9 – 10 M	$46 - 50 M
Total Operating Expenses^	$13 – 14 M	$60 – 64 M

** Includes 27.1 million common shares and pre-funded warrants to purchase 4.5 million common shares*

^ Includes $1.5 and $6 million non-cash stock compensation expense for 2Q 2019 and for 2019, respectively

Upcoming milestones

ENTINOSTAT (Class 1 specific HDAC inhibitor)	2Q19	3Q19	4Q19	1H20
E2112 – upcoming OS analyses*			●	●

* Final 1H20 OS analysis will only be conducted if needed

SNDX-5613 (Menin inhibitor)	2Q19	3Q19	4Q19	1H20
Investigational New Drug (IND) application	●			
Potential for early efficacy in relapsed refractory AML			▬	▬

SNDX-6352 (anti-CSF-1R mAB)	2Q19	3Q19	4Q19	1H20
Identify recommended Phase 2 dose and schedule	●			
Preliminary efficacy in chronic GVHD		●		

Thank you. Questions?

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