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

Syndax 

Forward-looking statements disclosure

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. Words such as "may," "will," "expect," "plan," "anticipate" and similar expressions (as well as other words or expressions referencing future events or circumstances) are intended to identify forward-looking statements. All statements other than statements of historical facts contained in this presentation, including statements regarding future operations, financial results and the financial condition of Syndax Pharmaceuticals, Inc. ("Syndax" or the "Company"), including financial position, strategy and plans, the progress, timing, clinical development and scope of clinical trials and the reporting of clinical data for Syndax's product candidates, and Syndax's expectations for liquidity and future operations, are forward-looking statements. Many factors may cause differences between current expectations and actual results, including unexpected safety or efficacy data observed during preclinical or clinical studies, clinical site activation rates or clinical trial enrollment rates that are lower than expected, changes in expected or existing competition, failure of our collaborators to support or advance collaborations or product candidates and unexpected litigation or other disputes. Moreover, Syndax operates in a very competitive and rapidly changing environment. Other factors that may cause our actual results to differ from current expectations are discussed in Syndax's filings with the U.S. Securities and Exchange Commission, including the "Risk Factors" sections contained therein. New risks emerge from time to time. It is not possible for Syndax's management to predict all risks, nor can Syndax assess the impact of all factors on its business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in any forward-looking statement. In light of these risks, uncertainties and assumptions, the forward-looking events and circumstances discussed in this presentation may not occur and actual results could differ materially and adversely from those anticipated or implied. Except as required by law, neither Syndax nor any other person assumes responsibility for the accuracy and completeness of the forward-looking statements. Syndax undertakes no obligation to update publicly any forward-looking statements for any reason after the date of this presentation to conform these statements to actual results or to changes in Syndax's expectations.

Syndax investment highlights

Entinostat

Combo with exemestane: FDA BTD

- Phase 3 PFS data 3Q18
- $$B US opportunity

Combo with anti-PD-(L)1:

- Positive data in Mel, NSCLC
- Results expected near term for NSCLC, Mel, CRC, TNBC, Ovar trials
- $$$$B US opportunity

SNDX-6352

CSF1R antibody:

- Phase 1 multiple dose, and combination with IMFINZI® ongoing
- Phase 1 cGVHD initiating by the end of 2018
- Broad clinical dev potential

Menin-MLLr inh

Onc driver specific:

- MLLr leukemias
- IND in 2019

CRC - colorectal cancer; NSCLC - non-small cell lung cancer; Mel - melanoma; TNBC - triple negative breast cancer; Ovar - ovarian cancer; cGVHD - chronic graft versus host disease; MLLr - rearrangements of the Mixed Lineage Leukemia (MLL) gene

Previous milestones

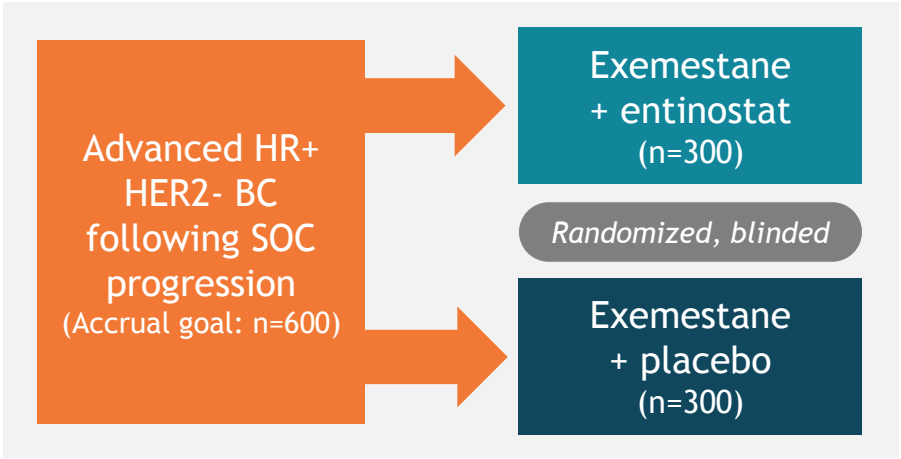
ENTINOSTAT (Class 1 specific HDAC inhibitor)	2Q18	3Q18	4Q18	1H19
E2112 - Complete Phase 3 enrollment; release PFS		●		
ENCORE 601 – Final data for PD-(L)1 preTx NSCLC, MEL cohorts			●	
ENCORE 601 – Registration trial decision for melanoma			●	
ENCORE 601 – Go / No go decision, Stage 1 of MSS-CRC cohort				●
ENCORE 602 – Report topline TNBC results				●
ENCORE 603 – Report topline ovarian results				●

SNDX-6352 (anti-CSF-1R mAB)	2Q18	3Q18	4Q18	1H19
MAD trial data presentation (cancer patients)			●	

Menin MLLr inhibitor	2Q18	3Q18	4Q18	1H19
File IND and initiate clinical studies				●

Phase 3 E2112 PFS data anticipated 3Q18

E2112: Exemestane +/- entinostat



Two primary endpoints: PFS and OS

FDA BTD

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

Syndax

E2112 Trial Milestones

- ✓ **4Q17:** Final PFS analysis, 1st interim OS analysis complete
- ✓ **2Q18:** 2nd interim OS analysis complete
- ➢ **3Q18:** Expect to achieve full accrual, share result of PFS analysis
- ➢ **4Q18:** If PFS positive, initiate NDA filing
- ➢ **2018-20:** Early trial completion possible w/May & Nov interim OS analyses

Blockbuster potential as 2nd/3rd line agent

First novel agent with Phase 3 data following treatment on a CDK4/6i

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

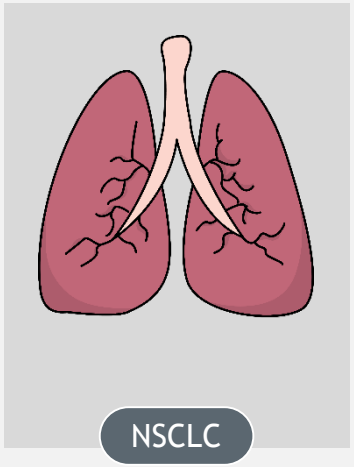
34,000 pts

Entinostat-exemestane target population

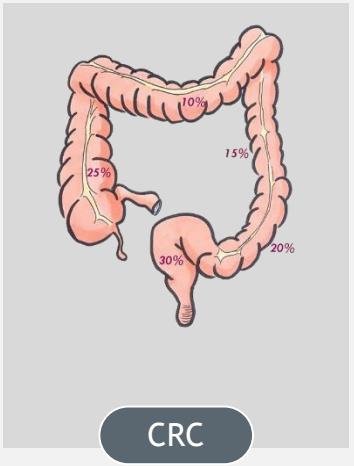
Source: DataMonitor 2016 Breast cancer: HR+/HER2- Disease Coverage Report

ENCORE Clinical Trial Program: Evaluating entinostat's potential to enhance anti-PD-(L)1 efficacy

MEL

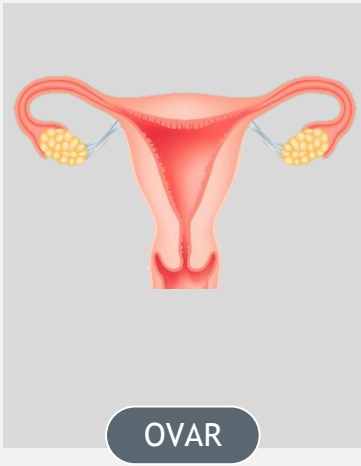


NSCLC



CRC

TNBC
HR+ BC



OVAR

PD-(L)1	Immune cells	Tumor mutational burden (TMB)	Nanostring

Focused on early signs of efficacy and biomarkers that predict clinical benefit

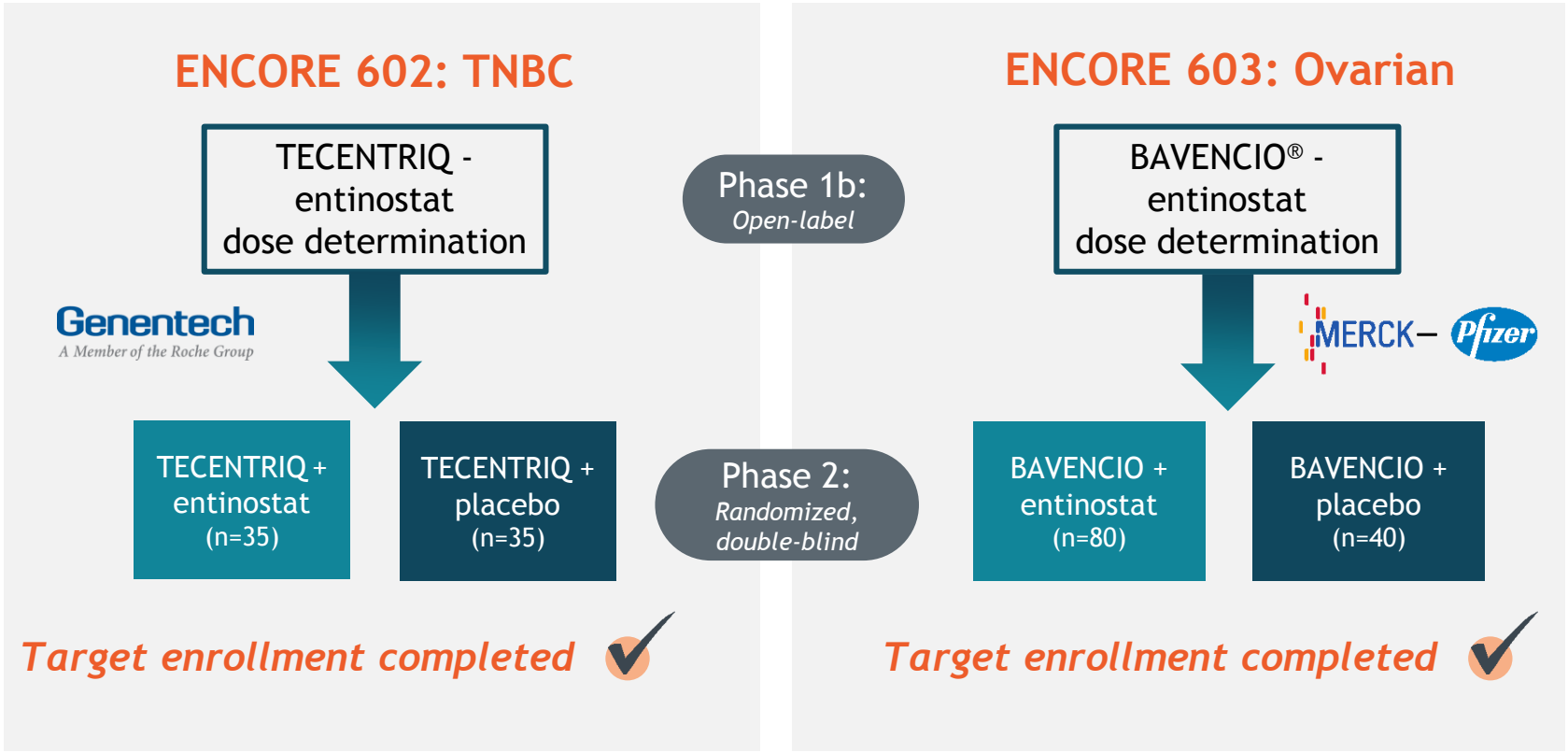
ENCORE 601 / KEYNOTE 142 ongoing cohorts

Entinostat + KEYTRUDA®

MERCK

NSCLC Progressed on PD-1/PD-(L)1	→	Data on full cohort (n = 76) to be presented at World Lung (Sept)
Melanoma Progressed on PD-1	→	Registration decision expected 4Q18
MSS CRC PD-1/PD-(L)1 – naïve	→	Stage 1 enrollment completion expected 3Q18 (n = 37); Go/no go expected 1H19

ENCORE 602, 603: Data available 1H19



Phase 2 ENDPOINTS:

- Primary endpoint - PFS
- Secondary endpoint - Overall response rate (ORR)
- Secondary endpoint - Overall survival (OS)

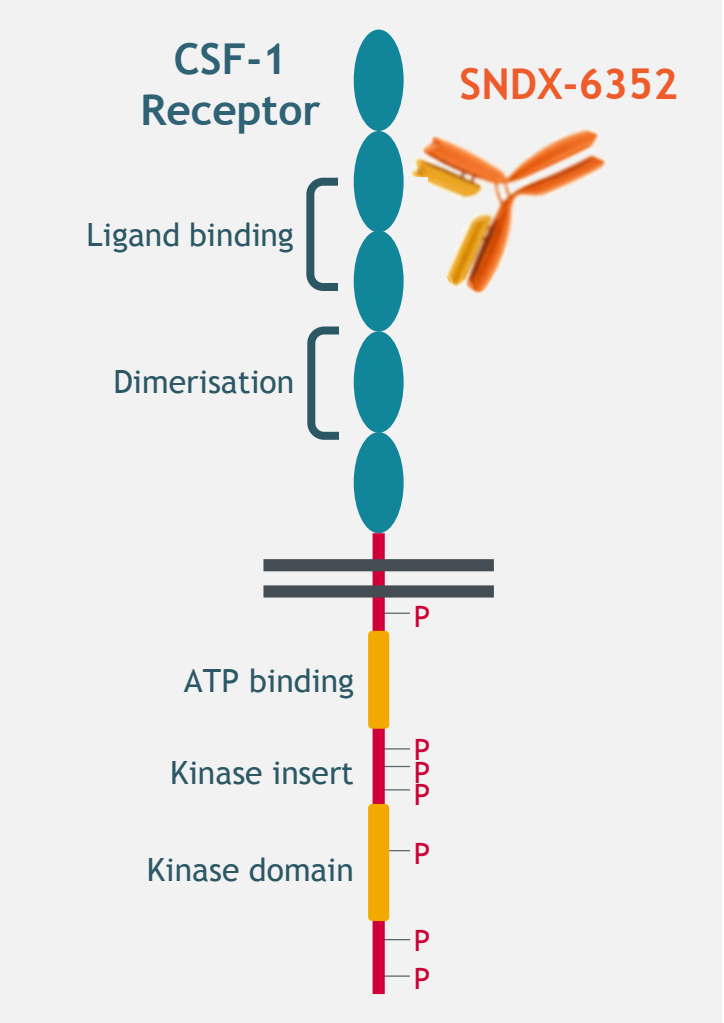
Update on SNDX-6352: pursuing novel indication

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

✓ Multiple ascending dose (MAD, solid tumors) ongoing

✓ Combination study with IMFINZI (durvalumab, AZ) commenced
  - RP2D expected in 1H19

new Initiation of chronic graft versus host disease (cGVHD) study by end of 2018
  - RP2D expected in 2H19



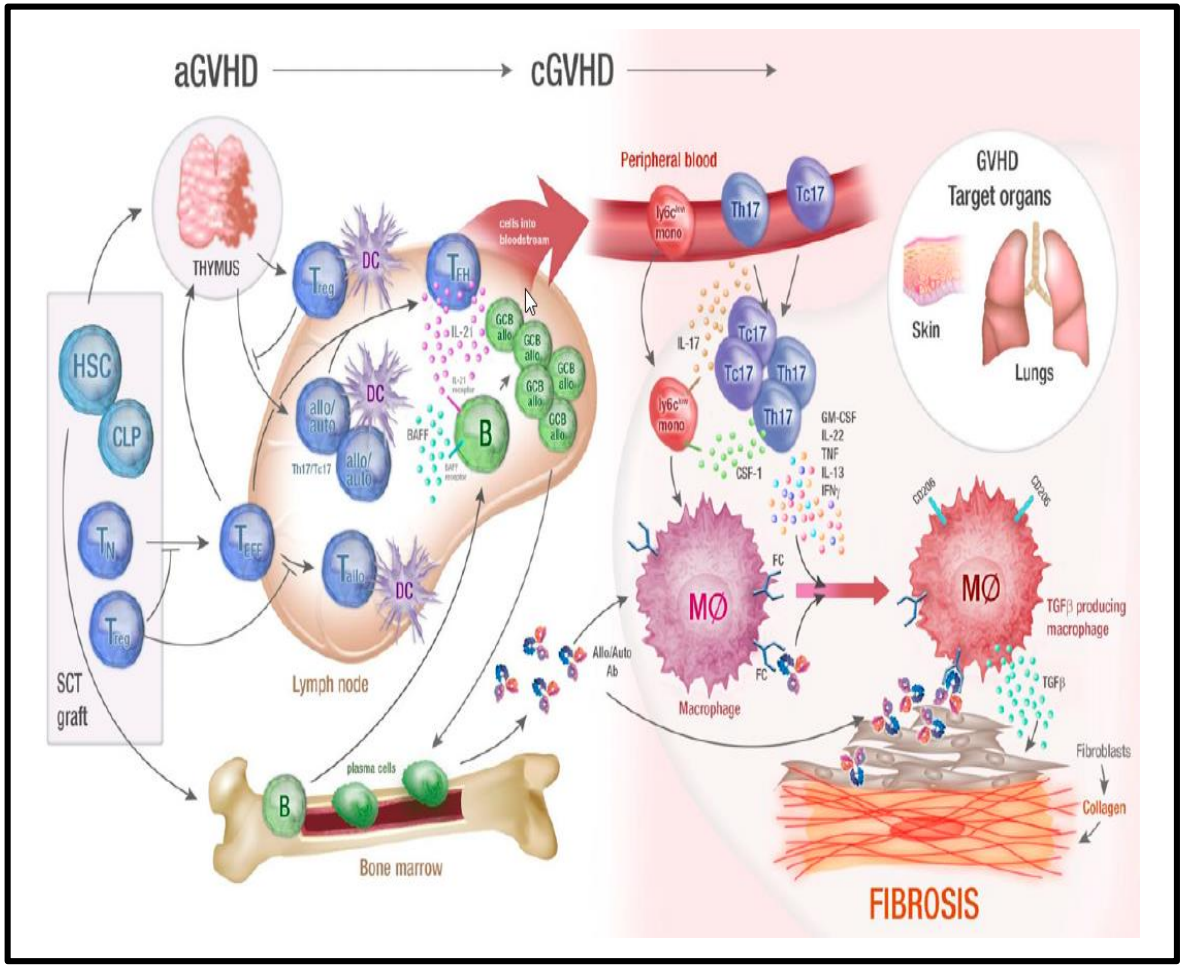
CSF-1R - colony stimulating factor -1 receptor;
RP2D - recommended Phase 2 dose

Source : Ordentlich, P. et al SITC 2016

CSF-1 pathway may play a meaningful role in cGVHD

- Preclinical data implicates CSF-1 in cGVHD
- cGVHD develops in 30-70% of HSCT[1]
  - US 5,000
  - Global 12,500
- Phase 1 trial start by the end of 2018; data 2H19

Cellular and molecular mediators of GVHD pathology[2]



HSCT - Hematopoietic stem cell transplantation

1. https://www.fda.gov/newsevents/newsroom/pressannouncements/ucm569710.htm;
2. MacDonald, K.P.A. et al., BLOOD, 5 (129) 13-21

Menin-MLLr program on track for IND Filing 1H19

MLL-r known cause of leukemias (AML, ALL, MLL)

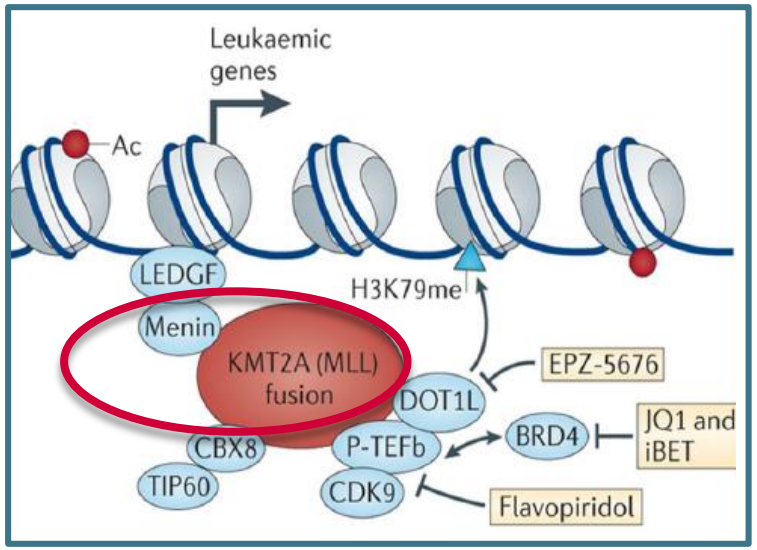
- Major market incidence: 4,000/yr

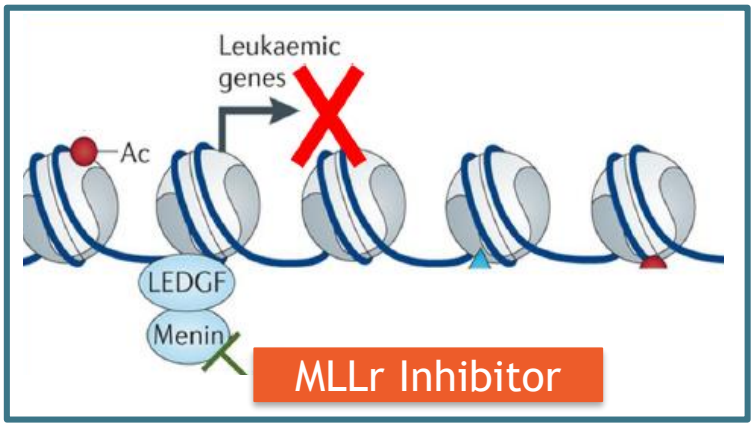
NPM1^{mut} also targeted by MLLr inhibitor

- US incidence (25-30% of adult AML): ~5,000/yr

Other potential indications:

- MDS, ALL, AML (incl. MLL-PTD AML)
- CMML and CML
- Pancreatic Cancer
- Gain-of-function p53 mutation tumors





2Q18 financial highlights and 2018 guidance

Ticker	SNDX (NASDAQ)
As of June 30, 2018	
Cash and short-term investments	$98.4 million
Shares Outstanding*	24.7 million
2018 Operating Expense Guidance	
	Q3 / **2018**
Research and Development	$14-16 M / $59-62 M
Total Operating Expenses^	$18-20 M / $77-81 M

** Includes 22.7 million common shares and pre-funded warrants to purchase 2.0 million common shares*

^ Includes $1.5 and $6 million non-cash stock compensation expense for Q3 and 2018, respectively

Upcoming milestones

ENTINOSTAT (Class 1 specific HDAC inhibitor)	3Q18	4Q18	1H19
E2112 - Complete Phase 3 enrollment; release PFS	●		
ENCORE 601 – PD-(L)1 relapsed/refractory NSCLC data (n = 76) World Lung	●		
ENCORE 601 – Registration trial decision for melanoma, NSCLC		●	
ENCORE 601 – Go / No go decision, Stage 1 of MSS CRC cohort			●
ENCORE 602 – Report topline TNBC results			●
ENCORE 603 – Report topline ovarian results			●

SNDX-6352 (anti-CSF-1R mAB)	3Q18	4Q18	1H19
Identify recommended Phase 2 dose and schedule			●

Menin MLLr inhibitor	3Q18	4Q18	1H19
File IND and initiate clinical studies			●

Thank you. Questions?

Syndax