

## Syndax Pharmaceuticals to Present at the SITC 31st Annual Scientific Meeting

WALTHAM, Mass., Nov. 08, 2016 (GLOBE NEWSWIRE) -- Syndax Pharmaceuticals, Inc. ("Syndax," the "Company" or "we") (Nasdaq:SNDX), a clinical stage biopharmaceutical company focused on developing entinostat and SNDX-6352 in multiple cancer indications, today announced six poster presentations at the upcoming Society for Immunotherapy in Cancer (SITC) 31<sup>st</sup> Annual Scientific Meeting being held November 9—13, 2016 in National Harbor, Maryland.

The following Syndax-sponsored posters to be presented include:

Title: Dose escalation/confirmation results of ENCORE 601, a phase 1b/2 open-label study of entinostat (ENT) in

combination with pembrolizumab (PEMBRO) in patients with non-small cell lung cancer (NSCLC)

Poster Number: 221

Date and Time: Friday, November 11 from 12:15—1:30 PM ET

Track: Combinations: Immunotherapy/Immunotherapy

Presenter: Melissa L. Johnson, MD

Title: Targeting colony stimulating factor-1 receptor (CSF-1R) with SNDX-6352, a novel anti-CSF-1R targeted antibody

Poster Number: 421

Date and Time: Friday, November 11 from 12:15—1:30 PM ET

**Track:** Tumor Microenvironment **Presenter:** Peter Ordentlich, Ph.D

Additional poster presentations highlighting entinostat include:

Title: Effect of the class I-HDAC inhibitor entinostat and the pan-HDAC inhibitor vorinostat on peripheral immune cell

subsets

Poster Number: 207

Date and Time: Friday, November 11 from 12:15—1:30 PM ET

Track: Combinations: Immunotherapy/Immunotherapy

Presenter: Lauren Lepone, Ph.D

Title: Modulation of antibody-dependent cell-mediated cytotoxicity (ADCC) mediated by the anti-PD-L1 antibody avelumab

on human lung and prostate carcinoma cell lines using the HDAC inhibitors vorinostat and entinostat

Poster Number: 212

Date and Time: Saturday, November 12 from 11:45 AM—1:00 PM ET

Track: Combinations: Immunotherapy/Immunotherapy

Presenter: Sofia R. Gameiro, Ph.D

Title: Entinostat sensitized osteosarcoma cells for cytotoxic effect of natural killer cells

Poster Number: 198

Date and Time: Saturday, November 12 from 11:45 AM—1:00 PM ET

Track: Adoptive Cellular Therapy

Presenter: Simin Kiany

Title: A randomized phase II study of epigenetic therapy with azacitidine and entinostat with concurrent nivolumab versus

nivolumab alone in recurrent metastatic non-small cell lung cancer

Poster Number: 151

Date and Time: Friday, November 11 from 12:15—1:30 PM ET

**Track:** Clinical Trials in Progress **Presenter:** Kristen A. Marrone, MD

The posters will be on display starting at 12:00 PM ET on Friday, November 11 and will remain accessible through 8:00 PM ET on Saturday, November 12. All accepted abstracts will be accessible via a special supplement published in SITC's official journal, the <u>Journal for ImmunoTherapy of Cancer (JITC)</u>.

About Syndax Pharmaceuticals, Inc.

Syndax is a clinical stage biopharmaceutical company focused on developing an innovative pipeline of combination therapies in multiple cancer indications. Our lead product candidate, entinostat, which was granted Breakthrough Therapy designation by the FDA following positive results from our Phase 2b clinical trial, ENCORE 301, is currently being evaluated in a Phase 3 registration clinical trial for advanced hormone receptor positive, human epidermal growth factor receptor 2 negative breast cancer. Syndax is developing entinostat, which has direct effects on both cancer cells and immune regulatory cells, and SNDX-6352, an anti-CSF-1R monoclonal antibody, to potentially enhance the body's immune response on tumors that have shown sensitivity to immunotherapy. Entinostat is being evaluated as a combination therapeutic in Phase 1b/2 clinical trials with Merck & Co., Inc. for non-small cell lung cancer and melanoma, with Genentech, Inc. for TNBC, and with Pfizer Inc. and Merck KGaA, Darmstadt, Germany, for ovarian cancer. SNDX-6352 is expected to begin clinical trials during the fourth quarter of 2016 and to be developed to treat a variety of cancers. For more information on Syndax, please visit <a href="https://www.syndax.com">www.syndax.com</a>.

## Syndax's Cautionary Note on Forward-Looking Statements.

This press release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. Words such as "may," "will," "expect," "plan," "anticipate," "estimate," "intend," "believe" and similar expressions (as well as other words or expressions referencing future events, conditions or circumstances) are intended to identify forwardlooking statements. These forward-looking statements are based on Syndax's expectations and assumptions as of the date of this press release. Each of these forward-looking statements involves risks and uncertainties. Actual results may differ materially from these forward-looking statements. Forward-looking statements contained in this press release include, but are not limited to, statements about the progress, timing, clinical development and scope of clinical trials and the reporting of clinical data for Syndax's product candidates and the potential use of SNDX-6352 to treat various cancer indications. Many factors may cause differences between current expectations and actual results including unexpected safety or efficacy data observed during preclinical or clinical studies, clinical trial site activation or enrollment rates that are lower than expected, changes in expected or existing competition, changes in the regulatory environment, failure of Syndax's collaborators to support or advance collaborations or product candidates and unexpected litigation or other disputes. Other factors that may cause Synday's actual results to differ from those expressed or implied in the forward-looking statements in this press release are discussed in Syndax's filings with the U.S. Securities and Exchange Commission, including the "Risk Factors" sections contained therein. Except as required by law, Syndax assumes no obligation to update any forwardlooking statements contained herein to reflect any change in expectations, even as new information becomes available.

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