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8ž@†J¬6ùK± ŸGöCë- !S1á%aRo$w%•3ˆ%aRo8ö3,hÐ$ø%d ý- Gö#¿I-1™gºab ¾#¿I-1™gºab%aaŒa9 ñFš*ô }"é8{#¿I-1™Gö]?=¹a]8 l ý*ô ±iö] ² » ±Hj!S ² » ±] #„ ² » ±iö ¢ ² » ±8‘8• ² » ±-x ² » ±%aRo ² » ±0 ²%þ"è H"é8{Mí ®%• »Gö]?=¹ ¾

#¿I-1™gºabYÚa0 ø$$7+$-Tá-k8œ8×Gö!S1g »] #„ »iö ¢ W%<2o ²þÃz –Ö³‰Â Ô²%þ ,hÐ7K»iö7rKÐ±ÀJK µ&òGtË²T¢H.,t‡{ K°#¿I-1™g%{#¿%ºa #„(¹ » ±8

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2024	2025	2026
2024.7 FPI (o"÷I 8‘]Gkþk ý2 Qw"×P6 Start Point of Clinical Development	2025.6 ASCO Oral - ÅG–I†KèP%"×66%•2 Qw6â4à 2025.9 WCLC Oral - ÅG–I†KèP%"×142%•2 Qw6â4à 2025.10 ESMO Oral II8‘ PDAC6â4à"×a{LBA%þ%U*¦4 %¼ 2025.11 PDAC III 8‘%¡$ "ÚEuk œ%U8•KRAS G12D4#¨#´ III8‘ I†Kè	2026.2 NSCLC BTD (o"÷Dù"ºU)1 %U8•KRAS G12D4 #¨#´BTD 2026.4 PDAC BTD %U8•KRAS G12D4 #¨#´>-G RbRìG¾BTD 2026.7 NSCLC III8‘%¡$ GFH375Lž þië >Z"þ1™III8‘]Gkþ 2026.9 WCLC Oral II8‘ NSCLC6â4à"×a{%U*¦4 %¼

D+11Months

D+16M

D+24M

We see a truly impressive response rate , with response rates presented at the same dose 600 mg QD as clearly an active agent .

By commentator Kathryn Arbor, M.D., Memorial Sloan Kettering Cancer Center

02

Objective Response

- Among the 71 patients with at least one post-treatment efficacy evaluation, ORR was 59.2% (42/71), confirmed ORR was 52.1% (37/71).
- Among the 9 patients with brain metastases and at least one post-treatment evaluation, ORR was 55.6% (5/9)[&].

	NSCLC at 600 mg (n=71)*
Confirmed ORR (95% CI)	52.1% (39.9%, 64.1%)
Unconfirmed ORR (95% CI)	59.2% (46.8%, 70.7%)[#]
DCR (95% CI)	93.0% (84.3%, 97.7%)

- Median (range) time to response: 1.4 months (1.4-8.3 months)
- Median duration of response: 8.3 months (95% CI: 6.3, NA)

Data cut-off date: 04 Sep 2026.

* Four patient dropped out early without post-baseline tumor assessment (2 due to death, 1 due to patient's global deterioration of health, and 1 due to physician's decision), 3 among whom had baseline brain metastases.

[#] One was ongoing and pending for confirmed PR. Four patients achieved PR but discontinued before response confirmation: 1 died, 1 dropped out due to AE (G4 hepatic function abnormal and recovered after discontinuation), 2 had disease progression at the second assessment, and 1 had stable disease at the later assessments.

[&] No cerebral metastatic lesions were chosen as target lesions among the patients.

Abbreviation: BM, brain metastases; CI, confidence interval; CPR, confirmed partial response; DCR, disease control rate; NE, not evaluable; ORR, objective response rate; PD, progressive disease; PR, partial response; SD, stable disease.

PFS and OS

- Median PFS was 8.3 months (95% CI: 6.8, NA) with median follow-up time 11.0 months.
  - Among taxanenaïve patients, median PFS was 9.6 months (95% CI: 6.7, NA)
  - Among taxanepretreated patients, median PFS was 8.1 months (95% CI: 5.5, NA)
- Median OS was not reached (95% CI: 15.4 m, NA) with median follow-up time 11.2 months. 12-months OS rate was 77.0% (95% CI: 66.9%, 88.7%).

	600mg QD (N=75)
Event, n(%)	40 (53.3)
Disease Progression	35 (46.7)
Death	5 (6.7)
Censor, n(%)	35 (46.7)
On study, no event	30 (40.0)
Off study, no event	5 (6.7)

Data cut-off date: 04 Sep 2026.

{<°KRAS G12D 4 #¨#´aM"×III8‘ ¦/üI†Kè>-G NSCLC

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KRAS G12D4 #¨#´$ÇTá>-G 2L+ NSCLCI†Kè)lP1Cë0ó-k=F

[redacted]

KRAS G12D4 #¨#´$ÇTá>-G 2L+ NSCLCI†KèG 6º-k=F

	GFH375 600 mg QD	RMC-9805 1200 mg QD
Confirmed ORR	52.1% (95%CI: 39.9%, 64.1%)	52% (95%CI: 32%, 71%)
DCR	93% (95% CI: 84.3%, 97.7%)	93% (95%CI: 76%, 99%)
Ÿ ¿h]17hgf	11m	13.1m
PFS	• 9.6m (95% CI: 6.7, NA) - 7T0ò8œ8p ñFš*ŒZücÝ,‰p‡ à´é8 MíTáãÛ	•-

KRAS G12D4 #¨#´$ÇTáG >G,û"Ú1™-k=F Ÿ%• ŸQ 2 Qw

		GFH375 600 mg QD ŸN=75 j Ÿ(oNSCLC 2 Qw	GFH375/VS-7375 600- 900 mg QD ŸQ (o*ŒK?- ÅG–2 Qw jPKTáde%Ú8‘ W | ¹ r29*›		RMC-9805 1200 mg QD (N=40)
			600 mg QD ŸN=51)	900 mg QD (N=22	
TRAEs (Any grade)	Rë>m	78.7%	24%	18%	30%
	%Ç%,	64%	20%	9%	33%
	1è15	49.3%	18%	14%	43%
	^•Y²	46.7%	6%	5%	10%
	AST$¹lJ	46.7%	7R ¦/ü2• »GöTáCÛHj"åR R•=D1™		10%
	H G+	8œa0#¢PQ] gz!®	8œa0#¢PQ] gz!®		18%
TRAE r3P		41.3%	Rë>m4%	1è155%	13%
PKTáP:<Ô		4%	NE		5%
3œ<Ô7W8‘%<6â4à8×@		Jun. 17, 2026 ¡ 2026 WCLC¢	Jun.12, 2026 (VSTM- PÃ)		Dec. 1, 2025 (2026 AACR)

GFH3757[8‘ ŸPhase I ¦/ü6â4à(Pið h$å-x%CYÚ (og·ièP 8‘#|

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