Q3 2024 Financial Results and Business Update

November 12, 2024

SpringWorks® THERAPEUTICS

Today's Agenda

Sections	Presenter(s)
Opening Remarks	**Saqib Islam** *Chief Executive Officer*
OGSIVEO for Desmoid Tumors	**Bhavesh Ashar** *Chief Commercial Officer*
Mirdametinib for NF1-PN	
Recent Data Highlights and Emerging Pipeline Update	**Jim Cassidy, MD, PhD** *Chief Medical Officer*
Financial Results	**Frank Perier, Jr.** *Chief Financial Officer*
Looking Ahead	**Saqib Islam** *Chief Executive Officer*
Q&A	**All**

Forward-Looking Statements

Note: Unless otherwise indicated, the information presented herein is as of November 2024 and made publicly available on November 12, 2024.

This presentation contains “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995, as amended, relating to our business, operations, and financial conditions, including but not limited to current beliefs, expectations and assumptions regarding the future of our business, future plans and strategies, our development and commercialization plans, our preclinical and clinical results, the market potential of OGSIVEO for adult patients with desmoid tumors, expectations to transition to blister packaging for OGSIVEO by the end of the year, expectations regarding the adequacy of the data contained in the nirogacestat MAA to serve as the basis for marketing approval of nirogacestat for the treatment of desmoid tumors in the European Union, the potential for mirdametinib to become an important new treatment for adult and pediatric NF1-PN patients, expectations regarding the timing and results of the reviews by the FDA and the EMA, as applicable, of each of the NDA and the MAA for mirdametinib for the treatment of adult and pediatric NF1-PN patients, including the FDA's PDUFA target action date for the NDA, our plans to report additional data from the Phase 2b ReNeu clinical trial at an upcoming medical conference in 4Q 2024, our plans to present additional data from the Phase 3 DeFi trial of nirogacestat at upcoming conferences, our plans for seeking regulatory approval for and making mirdametinib available for NF1-PN patients, if approved, expectations regarding the timing and initial data from the Phase 2 trial evaluating nirogacestat in patients with recurrent ovarian granulosa cell tumors, our expectations and the timing of the Phase 1a trial of SW-682, our plans to report additional clinical data of nirogacestat in combination with BCMA-directed therapies and initiate additional planned Phase 1 collaborator studies, our expectations and the timing of the Phase 1b dose expansion phase of brimarafenib, our expectations regarding the timing of enrollment in our combination therapy oncology programs, expectations about whether our patents for our lead assets will adequately protect SpringWorks against competition, as well as relating to other future conditions. Words such as, but not limited to, “look forward to,” “believe,” “expect,” “anticipate,” “estimate,” “intend,” “plan,” “would,” “should” and “could,” and similar expressions or words, identify forward-looking statements. New risks and uncertainties may emerge from time to time, and it is not possible to predict all risks and uncertainties. Any forward-looking statements in this press release are based on management’s current expectations and beliefs and are subject to a number of risks, uncertainties and important factors that may cause actual events or results to differ materially from those expressed or implied by any forward-looking statements contained in this press release, including, without limitation, risks relating to: (i) the success of our commercialization efforts with respect to OGSIVEO, (ii) our limited experience as a commercial company, (iii) our ability to obtain or maintain adequate coverage and reimbursement for OGSIVEO, (iv) the success and timing of our product development activities, including the initiation and completion of our clinical trials, (v) our expectations regarding the potential clinical benefit of OGSIVEO for adult patients with desmoid tumors who require systemic treatment, (vi) the potential for OGSIVEO to become the new standard of care for adult patients with desmoid tumors, (vii) estimates regarding the number of adult patients who are diagnosed with desmoid tumors annually per year in the U.S. and the potential market for OGSIVEO, (viii) estimates regarding the number of adult and pediatric NF1-PN patients and the potential market for mirdametinib, if approved, (ix) the fact that topline or interim data from clinical studies may not be predictive of the final or more detailed results of such study or the results of other ongoing or future studies, (x) the success and timing of our collaboration partners’ ongoing and planned clinical trials, (xi) the timing of our planned regulatory submissions and interactions, including the timing and outcome of decisions made by the FDA, EMA, and other regulatory authorities, investigational review boards at clinical trial sites and publication review bodies, (xii) whether FDA, EMA, or other regulatory authorities will require additional information or further studies, or may fail or refuse to approve or may delay approval of our product candidates, including nirogacestat and mirdametinib, (xiii) our ability to obtain regulatory approval of any of our product candidates or maintain regulatory approvals granted for our products, (xiv) our plans to research, discover and develop additional product candidates, (xv) our ability to enter into collaborations for the development of new product candidates and our ability to realize the benefits expected from such collaborations, (xvi) our ability to maintain adequate patent protection and successfully enforce patent claims against third parties, (xvii) the adequacy of our cash position to fund our operations through any time period indicated herein, (xviii) our ability to establish manufacturing capabilities, and our and our collaboration partners’ abilities to manufacture our product candidates and scale production, and (xix) our ability to meet any specific milestones set forth herein.

Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise. Although we believe the expectations reflected in such forward-looking statements are reasonable, we can give no assurance that such expectations will prove to be correct. Accordingly, readers are cautioned not to place undue reliance on these forward-looking statements.

For further information regarding the risks, uncertainties and other factors that may cause differences between SpringWorks’ expectations and actual results, you should review the “Risk Factors” in Item 1A of Part II of SpringWorks’ Quarterly Report on Form 10-Q for the quarter ended September 30, 2024, as well as discussions of potential risks, uncertainties and other important factors in SpringWorks’ subsequent filings.

Certain information contained in this presentation relates to or is based on studies, publications, surveys and other data obtained from third-party sources and our own internal estimates and research. While SpringWorks believes these third-party sources to be reliable as of the date of this presentation, we have not independently verified, and make no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third-party sources. In addition, all of the market data included in this presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while we believe our own internal research is reliable, such research has not been verified by any independent source.

Opening Remarks

Saqib Islam

Chief Executive Officer

SpringWorks Therapeutics Is Executing as a Commercial-Stage Targeted Oncology Company

OGSIVEO continues to reinforce its position as the systemic standard of care for desmoid tumors, with $49.3M of net product revenue in 3Q 2024

Opportunity for second product approval with mirdametinib NDA in adult and pediatric NF1-PN accepted with Priority Review (PDUFA: February 28, 2025)

Expanding geographic reach with potential regulatory approvals in Europe for nirogacestat in desmoid tumors and mirdametinib in NF1-PN in 2025

Robust intellectual property portfolio providing durable patent protection into 2043 for both lead assets

Advancing diversified pipeline of late- and early-stage oncology programs in patient populations with high unmet need

Capital efficient operating model and strong financial position with $498.1M in cash(1) expected to fully fund operations through profitability in 1H 2026

Note: NDA: New Drug Application; NF1-PN: Neurofibromatosis Type 1, Plexiform Neurofibromas; PDUFA: Prescription Drug User Fee Act.
(1) Represents cash, cash equivalents, and marketable securities as of September 30, 2024.

OGSIVEO for Desmoid Tumors

Bhavesh Ashar

Chief Commercial Officer

SpringWorks® THERAPEUTICS

OGSIVEO Continues to Solidify Position as the Systemic Standard of Care for Desmoid Tumors[1]

Ogsiveo® (nirogacestat)

$49.3M in net product revenue for 3Q 2024

+23% QoQ growth

Continued growth in underlying demand and new patient starts

Most prescribed systemic therapy for adults with desmoid tumors

On track to complete blister pack transition by year-end

Durable clinical benefit with new data supporting long-term use

Evolving treatment dynamics support increased OGSIVEO use

(1) OGSIVEO is indicated for adult patients with progressing desmoid tumors who require systemic treatment.

Key Commercial Metrics After Nearly One Full Year on the Market

Patients

>800 unique patients filled an OGSIVEO script in September

~65% of patients on blister packs by end of September

~10K patients with DT ICD-10 claims between October 2023 and August 2024(1)

Prescribing Community

~420 treatment centers have prescribed OGSIVEO

~90% of sarcoma CoEs have prescribed OGSIVEO

~57% of ordering treatment centers represent community practices

Payor Coverage(2)

~98% with confirmed reimbursement of OGSIVEO

~90% have published formal policies for OGSIVEO

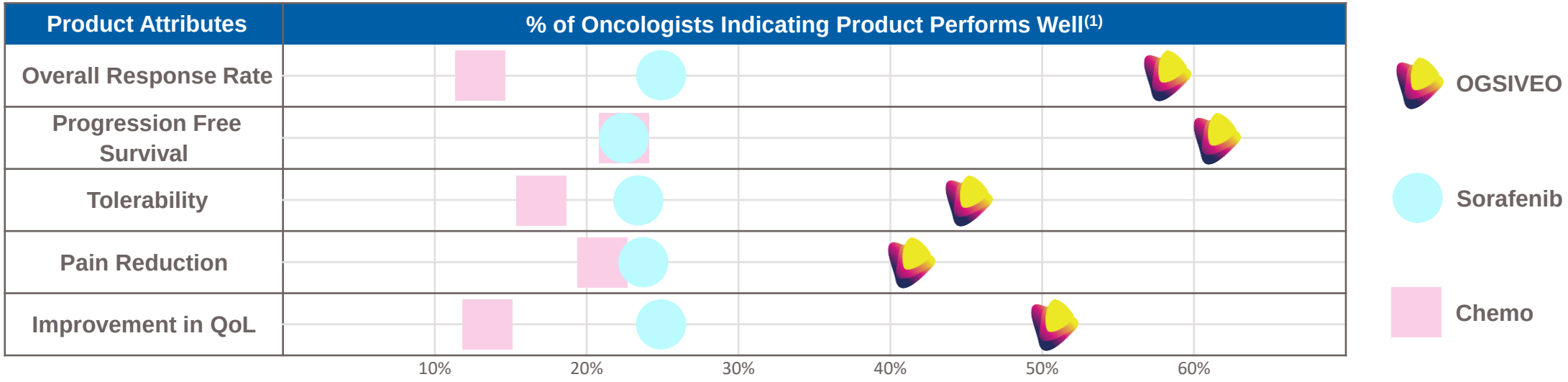
~95% with confirmed reimbursement of OGSIVEO blister packs

Note: all data as of September 30, 2024 unless otherwise stated; DT: desmoid tumor; ICD-10: International Classification of Diseases, Tenth Edition; CoE: Center of Excellence.
(1) Desmoid tumor-specific ICD-10 codes were introduced in October 2023. Data through September 2024 not yet available.
(2) Percentages represent proportion of aggregate commercial PBM covered lives.

SpringWorks THERAPEUTICS

Impressive Brand Growth Driven by Strong Physician Preference for OGSIVEO

OGSIVEO Outperforms Alternative Systemic Treatment Options Across All Product Attributes



~90% of OGSIVEO prescribers are likely to use as a front-line treatment

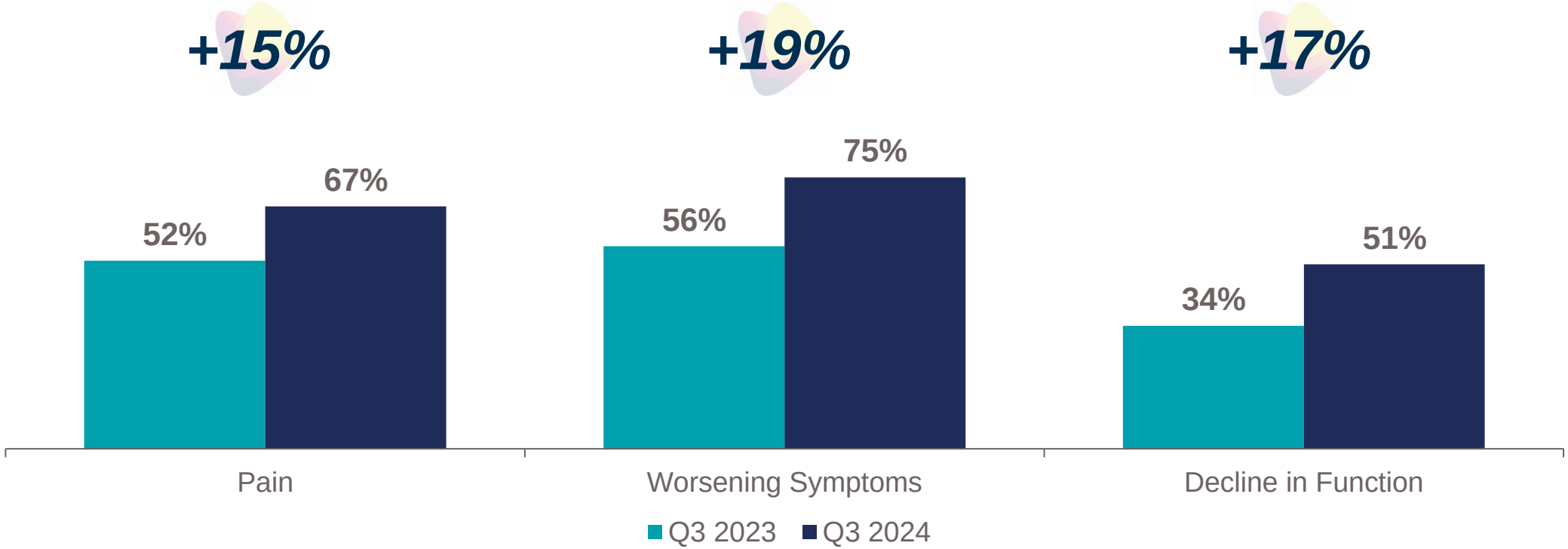
~60% of physicians expect to increase their usage of OGSIVEO in the next year(2)

Source: SpringWorks market research; survey of 150 oncologists treating desmoid tumor patients, August 2024. Note: QoL: quality of life.

(1) Represents proportion of oncologists aware of OGSIVEO who indicated a score of 6 out of 7 or 7 out of 7 in response to the question: "Considering your experience and what you may know about these products, how well do the following treatments perform on the following attributes for your patients?"

(2) Represents proportion of respondents who indicated increased usage in response to the question: "In the next year, how do you expect your usage of OGSIVEO for progressing/symptomatic adult (18+) patients to change, if at all?" Approximately 40% of respondents indicated usage would stay the same.

Growing Emphasis on Clinical Symptoms as Reason to Initiate Active Treatment



87% of surveyed physicians indicated a likelihood to use OGSIVEO for symptomatic patients without radiographic progression, consistent with FDA-approved label

Source: SpringWorks market research; survey of 150 oncologists treating desmoid tumor patients, August 2024.

Preparing to Bring OGSIVEO to Patients Outside the U.S. Beginning in 1H 2025

Europe and UK

- MAA review ongoing with anticipated approval and first launch in Germany in 1H 2025; additional European geographies to follow
- European HQ established in Switzerland; key Commercial and Medical personnel onboarded
- Significant commercial opportunity with proportionate number of DT patients to that in the U.S.
- Positive KOL experiences with OGSIVEO through DeFi
- Physicians indicate high unmet need to be addressed, and >90% are likely to prescribe OGSIVEO and believe it offers clinical benefits not offered by other therapies(1)
- >250 patients in compassionate use program validates unmet need

Japan

- Several successful PMDA interactions completed in 2024
- Single-arm ethno-bridging study initiating in 2025 that, together with DeFi, will form the basis for a potential approval

Note: MAA: Marketing Authorization Application; HQ: headquarters; DT: desmoid tumor; KOL: key opinion leader; PMDA: Pharmaceuticals and Medical Devices Agency.

(1) SpringWorks market research; survey of 214 oncologists treating desmoid tumor patients in Germany, France, and the UK, July 2024.

Factors Underpinning Confidence in OGSIVEO's Blockbuster Potential

Addressable Patient Population

- ✓ Large and growing desmoid tumor patient pool
- ✓ KOL advocacy at sarcoma centers of excellence
- ✓ Geographic expansion outside the U.S.

OGSIVEO Brand Growth

- ✓ Experience-based belief in OGSIVEO
- ✓ Long-term data supports durable treatment
- ✓ Broad payer coverage enabling access

Evolving Treatment Dynamics

- ✓ Systemic-first treatment guidelines
- ✓ Clinically-driven urgency to treat
- ✓ Physician behavior aligned with label

Note: KOL: key opinion leader.

Mirdametinib for NF1-PN

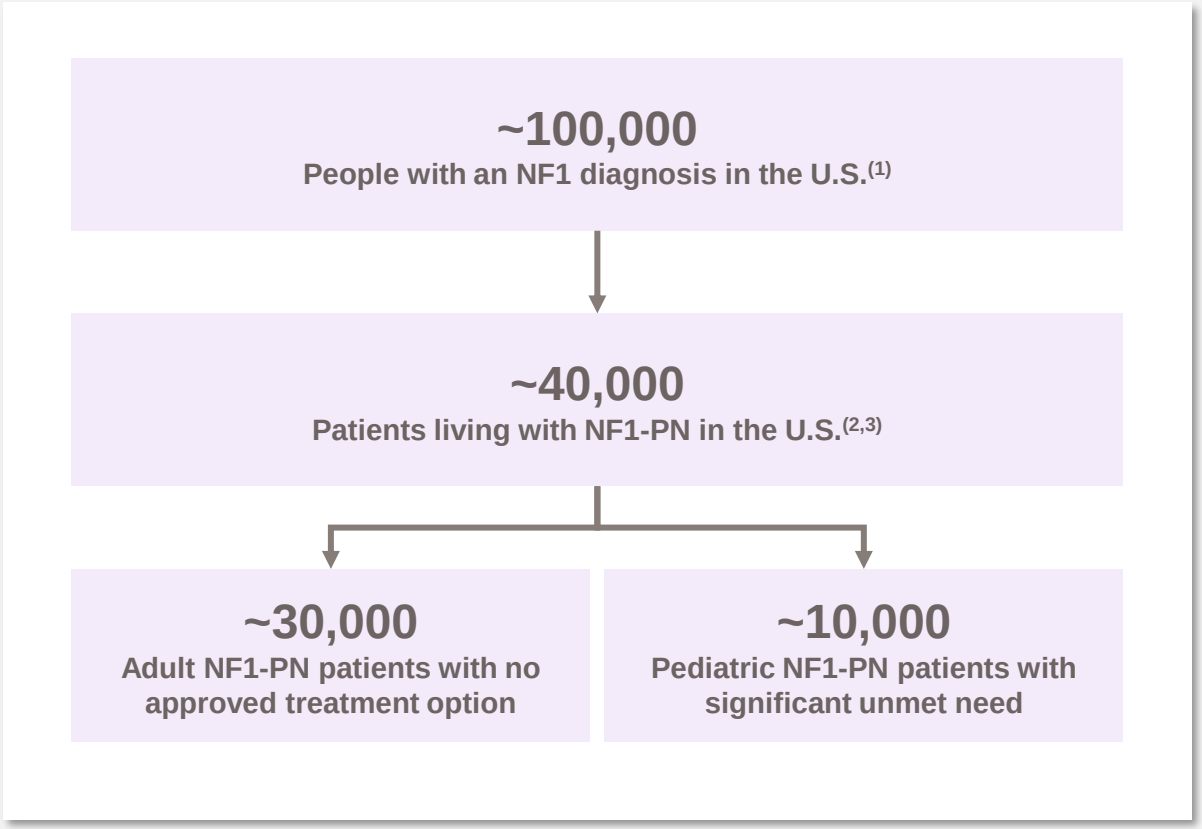
Bhavesh Ashar

Chief Commercial Officer

SpringWorks® THERAPEUTICS

Mirdametinib Has the Potential to Address the Substantial Unmet Needs for NF1-PN Patients

U.S. NF1-PN Patient Population



NF1-PN is a disfiguring and highly morbid growth along nerves, often causing chronic, disabling pain

Currently no standard of care; highly fragmented treatment landscape with significant use of off-label systemic options

No approved options for adult patients; challenges with administration and tolerability limit use of currently available options for pediatric patients

Phase 2b ReNeu data support mirdametinib's potential to be first-in-class therapy for adult NF1-PN patients and best-in-class option for pediatric patients

Note: NF1-PN: Neurofibromatosis Type 1, Plexiform Neurofibromas.
Sources: (1) Lammert et al., Arch Dermat, 2005. U.S. Census Data; (2) Fisher et al., Neuro-Oncology, 2022. (3) SpringWorks market research.

Global Regulatory Progress to Bring Mirdametinib's Differentiated Profile to Patients

NDA Accepted With Priority Review

PDUFA: February 28, 2025

Orphan Drug and Fast Track designations

Rare Pediatric Disease designation with eligibility for priority review voucher upon approval

MAA Validated by EMA

Regulatory review is ongoing

Orphan Drug designation

Progressing towards potential European regulatory approval in 2025

Meaningful antitumor activity with robust ORRs confirmed by BICR and majority of responders experiencing deep responses(1)

Enhanced quality of life with significant improvements in PROs and early, sustained, and clinically meaningful reductions in pain

Manageable safety profile with low rates of Grade 3+ toxicities and extended treatment durations

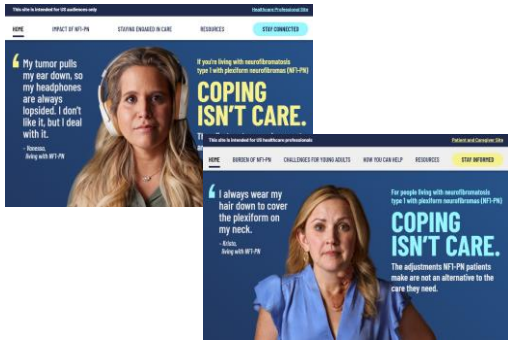
Significant patient convenience with intermittent dosing schedule and dispersible tablet for oral suspension highlighted by physicians as a key differentiator

Note: NDA: New Drug Application; PDUFA: Prescription Drug User Fee Act; MAA: Marketing Authorization Application; EMA: European Medicines Agency; ORR: Objective Response Rate; BICR: Blinded Independent Central Review; PRO: Patient-Reported Outcome.

(1) Defined as reduction in tumor volume >50%.

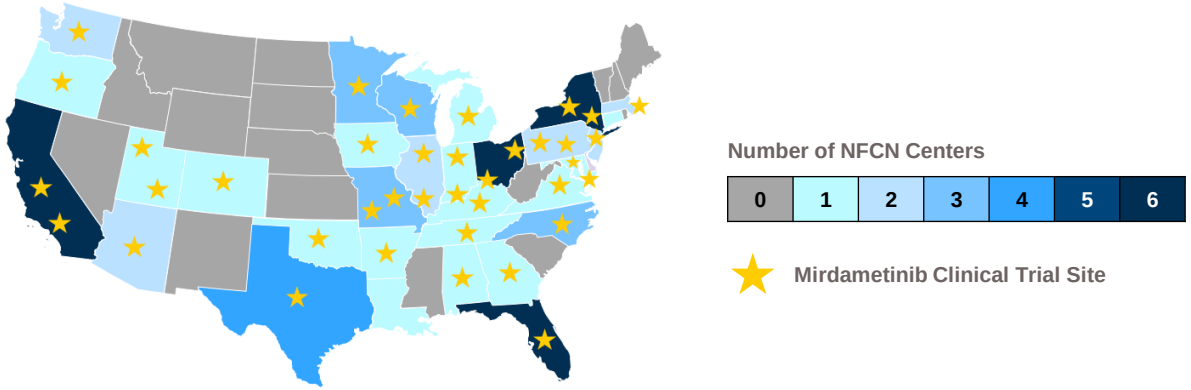
Pre-Launch Activities Underway Ahead of Upcoming PDUFA Date

Disease State Education



- High engagement from physicians and patients
- Raising awareness of the unmet needs of NF1-PN patients
- Educating physicians and increasing comfort treating patients with NF1-PN

Brand Launch Preparation and Targeted Sales Force Scale-Up



- Focus on mirdametinib's potential to be first and only approved for adult patients and differentiation vs. existing options in pediatric patients
- Robust patient service offerings designed to enhance treatment experience and support rapid access to mirdametinib
- Completed sales force hiring (35 TBMs); initial focus on ~70 NFCN centers and other key academic / community sites across the U.S.
- Multiple resources to enable efficient patient finding within well-defined patient pool

Note: NFCN: Neurofibromatosis Clinical Network; TBM: Territory Business Manager.

Recent Data Highlights and Emerging Pipeline Update

Jim Cassidy, MD, PhD

Chief Medical Officer

SpringWorks® THERAPEUTICS

Long-Term Follow-Up Data From DeFi Illustrate Benefit of Extended Treatment With OGSIVEO

ctos®

Long-Term Efficacy and Safety From DeFi[(1)]

- Median (range) duration of nirogacestat exposure was 33.6 (0.3–60.0) months
- Objective response rate (ORR) increased from 34.3% with up to 1 year of treatment to 45.7% with up to 4 years of treatment (3 new partial responses and 3 new complete responses)
- The median best percent reduction from baseline in target tumor size with continuous nirogacestat treatment was −32.3% at year 1 (n=46) and −75.8% for those patients completing at least 4 years (n=15) of treatment
- Improvement in PROs of pain, DT-specific symptom severity, and DT-specific physical functioning occurred early and were sustained with up to 45 months of treatment with nirogacestat
- Incidence and severity of frequently reported TEAEs decreased through treatment

"Female patient in her twenties with a desmoid tumor… has been on nirogacestat for over 4 years and declined discontinuing because it's working so well for her."

- Medical Oncologist

"Duration of therapy will be more indefinite vs other systemic options due to better tolerability and efficacy."

- Medical Oncologist

Note: PRO: patient-reported outcome; ORR: objective response rate; DT: desmoid tumors.

(1) Ratan et al. Nirogacestat treatment in adult patients with desmoid tumors: long-term efficacy and safety from the phase 3 defi trial

SpringWorks® THERAPEUTICS

Growing Body of Evidence Demonstrating Mirdametinib's Differentiated Benefit

SNO Society for NeuroOncology

Depth of Response[1]

- Deeper median best reduction in target PN volume by BICR than previously seen in trials of other agents in NF1-PN
- 62% of adults and 52% of children with objective response had deep responses
- 35% of adults and 72% of children with deep response defined as having progressing PN
- Median time to best percent change for deep responders was 25.4 months for adults and 21.8 months for children

Health-Related Quality of Life[2]

- Clinically meaningful, early, and sustained improvements in HRQoL
- PedsQL-TS improvements observed early and sustained through cycle 24
- Nearly half of patients achieved clinically meaningful improvements in PedsQL-TS at cycle 13
- Significant improvement in physical, emotional, and social sub-scales

"I have never seen these deep responses in practice... The best response I can hope for in my adult NF1 patients is stable disease."

- Neuro-Oncologist

"We see effects on quality of life within 6 months…some did happen later, but yes sustained, because they are still benefiting."

- Medical Oncologist

Note: PN: plexiform neurofibroma; BICR: blinded independent central review; HRQoL: health-related quality of life; PedsQL-TS: Pediatric Quality of Life Inventory, Total Score.

(1) Gershon et al., Pivotal, phase 2b ReNeu trial of mirdametinib in children and adults with neurofibromatosis type 1-associated plexiform neurofibroma (NF1-PN): a spotlight on patients achieving deep response.

(2) Babovic-Vuksanovic et al., Health-related quality-of-life (HRQoL) in adults and children with neurofibromatosis type 1-associated plexiform neurofibroma (NF1-PN) treated with mirdametinib: Pivotal, phase 2b ReNeu trial.

SpringWorks THERAPEUTICS

Expanding Our Opportunity Set Across the Pipeline

Nirogacestat

Gamma Secretase Inhibitor

Advancing expansion opportunities in rare oncology, including ovarian granulosa cell tumors (OvGCT) and BCMA combinations in multiple myeloma

Mirdametinib

MEK Inhibitor

Pursuing monotherapy and combination therapy applications in pediatric low-grade glioma and MAPK mutant solid tumors, including melanoma and non-small cell lung cancer

Brimarafenib(1)

RAF Fusion & Dimer Inhibitor

Encouraging antitumor activity demonstrated across multiple MAPK mutations and tumor types supports development as monotherapy and in combination approaches

SW-682

TEAD Inhibitor

Dosing patients in Phase 1 trial enrolling patients with Hippo-mutant solid tumors

(1) Being developed by MapKure, a joint venture owned by SpringWorks and BeiGene.

Financial Results

Frank Perier, Jr.

Chief Financial Officer

Third Quarter 2024 Financial Highlights

Key Third Quarter 2024 Financial Results (Unaudited)	Three Months Ended September 30,		Nine Months Ended September 30,	
($ in millions)	2024	2023	2024	2023
OGSIVEO revenue, net	$49.3	--	$110.5	--
Other revenue[(1)]	--	--	19.5	--
Total revenue	**$49.3**	**--**	**$130.0**	**--**
Cost of product revenue	3.3	--	7.0	--
Selling, general and administrative expense	61.6	46.5	179.5	137.7
Research and development expense	42.3	37.5	140.3	106.8
Total operating costs and expenses	**$107.2**	**$84.0**	**$326.8**	**$244.6**
Interest and other income (expense)	6.2	5.6	20.6	17.0
Equity method investment loss	(1.8)	(1.0)	(4.6)	(3.2)
Net loss	**($53.5)**	**($79.4)**	**($180.8)**	**($230.8)**

- Cash, cash equivalents, and marketable securities of $498.1 million as of September 30, 2024
  - No debt
  - Cash on hand expected to fully fund operations through profitability in 1H 2026
- 74.4M common shares outstanding as of November 5, 2024

(1) Related to recognition of all previously deferred revenue associated with the GSK License Agreement following notice of termination of the agreement received from GSK, as announced in June 2024.

Looking Ahead

Saqib Islam

Chief Executive Officer

SpringWorks® THERAPEUTICS

Unlocking Value Across Portfolio in 2024 and Beyond

2024 Accomplishments

- ✓ Completed MAA submission for nirogacestat to EMA in 1Q 2024
- ✓ Presented additional DeFi analyses with nirogacestat at ASCO in 2Q 2024
- ✓ NDA submission for mirdametinib for children and adults with NF1-PN accepted and granted Priority Review in 3Q 2024
- ✓ Received validation for mirdametinib MAA in 3Q 2024
- ✓ Presented ReNeu trial data for mirdametinib at ASCO, Global NF Conference, and ISPNO in 2Q 2024
- ✓ Published manuscript of ReNeu trial data in *Journal of Clinical Oncology* in 4Q 2024
- ✓ Presented Phase 1/2 data for mirdametinib in pLGG through collaboration with St. Jude Children's Research Hospital at ISPNO in 2Q 2024
- ✓ Initiated Phase 1 trial of SW-682 (TEAD inhibitor) in Hippo-mutant solid tumors in 2Q 2024
- ✓ Initiated Phase 1b trial of brimarafenib(1) with panitumumab in CRC and pancreatic cancer patients in 1Q 2024

Anticipated Milestones

- ❑ Present nirogacestat long-term follow-up data from DeFi at CTOS Annual Meeting on November 16, 2024
- ❑ Present additional data analyses at Society of Neuro-Oncology conference on November 22-24, 2024
- ❑ Secure FDA approval for mirdametinib in adults and children with NF1-PN (PDUFA: February 28, 2025)
- ❑ Continue to expand opportunity set for nirogacestat across indications, with initial Phase 2 OvGCT data in 1H 2025
- ❑ Potential regulatory approvals in the EU for nirogacestat in desmoid tumors and mirdametinib in NF1-PN in 2025
- ❑ Present additional data for brimarafenib(1) monotherapy in MAPK-mutant solid tumors in 2H 2025
- ❑ Advance early-stage assets and discovery work, while seeking to expand portfolio through investment in internal programs and opportunistic business development

Note: MAA: Marketing Authorization Application; EMA: European Medicines Agency; NDA: New Drug Application; ASCO: American Society of Clinical Oncology; OvGCT: ovarian granulosa cell tumors; NDA: New Drug Application; NF1-PN: neurofibromatosis type 1, plexiform neurofibromas; ISPNO: International Symposium on Pediatric Neuro-Oncology; pLGG: pediatric low-grade glioma; CRC: colorectal cancer; CTOS: Connective Tissue Oncology Society; PDUFA: Prescription Drug User Fee Act.
(1) Being developed by MapKure, a joint venture owned by SpringWorks and BeiGene. Listed milestones to be achieved through MapKure.

Strong Foundation and Drivers in Place to Realize Long-Term Benefits for Patients

ROBUST OGSIVEO DEMAND	NEAR-TERM SECOND APPROVAL	GEOGRAPHIC EXPANSION	DIVERSE PIPELINE AND CAPABILITIES	STRONG FINANCIAL POSITION
OGSIVEO established as systemic standard of care	Mirdametinib PDUFA date set for February 28, 2025	MAA reviews for nirogacestat and mirdametinib ongoing	Deep pipeline of late- and early-stage programs	Strong balance sheet with $498.1M in cash(1)
Real-world evidence of significant patient benefit	Differentiated clinical data and product profile in NF1-PN	Potential approvals for both programs in 2025	Robust platform of discovery, clinical, and regulatory capabilities	Fully funded through profitability in 1H 2026
Over $115M in net product revenue since launch driven by patient demand	Potential first-in-class option for adult patients	European launch readiness is on track	Focus on underserved patient populations	Able to support disciplined portfolio expansion with capital efficient approach

(1) Cash, cash equivalents, and marketable securities as of September 30, 2024.

SpringWorks THERAPEUTICS

THANK YOU

DANA

LIVING WITH A DESMOID TUMOR

SAVANNA

LIVING WITH NF1-PN

ALEX

LIVING WITH NF1-PN

Q&A Session

SpringWorks THERAPEUTICS