FARNESYL TRANSFERASE PROGRAM REVIEW

Our goal is to develop transformative therapies to extend and improve the lives of patients with cancer

September 16, 2025

FORWARD-LOOKING STATEMENTS

This presentation contains forward-looking statements. Such statements include, but are not limited to, statements regarding our research, preclinical and clinical development activities, plans and projected timelines for ziftomenib, darlifarnib (KO-2806) and tipifarnib, development plans and timelines for our menin inhibitor candidate in diabetes, expectations regarding the relative benefits of our product candidates versus competitive therapies, expectations regarding the therapeutic and commercial potential of our product candidates, anticipated significant near-term milestones, market opportunities and expectations regarding our collaboration with Kyowa Kirin. The words "believe," "may," "should," "will," "estimate," "promise," "plan", "continue," "anticipate," "intend," "expect," "potential" and similar expressions (including the negative thereof) are intended to identify forward-looking statements. Because such statements are subject to risks and uncertainties, actual results may differ materially from those expressed or implied by such forward-looking statements. Risks that contribute to the uncertain nature of the forward-looking statements include: our preclinical studies and clinical trials may not be successful; the U.S. Food and Drug Administration (FDA) may not agree with our interpretation of the data from clinical trials of our product candidates; we may decide, or the FDA may require us, to conduct additional clinical trials or to modify our ongoing clinical trials; we may experience delays in the commencement, enrollment, completion or analysis of clinical testing for our product candidates, or in the reporting of data from such clinical testing, or significant issues regarding the adequacy of our clinical trial designs or the execution of our clinical trials may arise, which could result in increased costs and delays, or limit our ability to obtain regulatory approval; our product candidates may not receive regulatory approval or be successfully commercialized; unexpected adverse side effects or inadequate therapeutic efficacy of our product candidates could delay or prevent regulatory approval or commercialization; we may not be able to obtain additional financing; and our collaboration with Kyowa Kirin may not be successful. Additional risks and uncertainties may emerge from time to time, and it is not possible for Kura's management to predict all risk factors and uncertainties.

All forward-looking statements contained in this presentation speak only as of the date on which they were made. Other risks and uncertainties affecting us are described more fully in our filings with the Securities and Exchange Commission. We undertake no obligation to update such statements to reflect events that occur or circumstances that exist after the date on which they were made.

This presentation may also contain statistical, preclinical and clinical data obtained from and prepared by third parties. The recipient is cautioned not to give undue weight to such disclosures. Neither the Company nor any other person makes any representation as to the accuracy or completeness of such data or undertakes any obligation to update such data after the date of this presentation.

TODAY'S SPEAKERS

Troy Wilson, Ph.D., J.D.
President & Chief Executive Officer

Francis Burrows, Ph.D.
Chief Scientific Officer

Mollie Leoni, M.D.
Chief Medical Officer

KURA IS ADVANCING A ROBUST PIPELINE OF THERAPEUTIC PRODUCT CANDIDATES

Ziftomenib: Potentially Best-in-Class Menin Inhibitor for AML

Relapsed/refractory (R/R) and frontline acute myeloid leukemia (AML) U.S. market opportunity could exceed $7B per year

NDA in R/R NPM1-m AML under FDA Priority Review with PDUFA target date of 30-Nov-2025; registration-enabling trials in 1L AML on track for 2H 2025

Kyowa Kirin collaboration funds expansive AML development program through 1L U.S. commercialization

Farnesyl Transferase Inhibitors (FTIs) in Large Solid Tumor Indications

FTIs may overcome innate and adaptive resistance to PI3Kα inhibitors, KRAS inhibitors and tyrosine kinase inhibitors (TKIs) in certain indications

Target indications include renal cell carcinomas, HNSCC, lung, colorectal, breast, endometrial and NETs

Presentations of clinical data planned for ESMO Congress in October 2025

Additional Therapeutic Opportunities for Menin Inhibitors

Ziftomenib + imatinib currently in Phase 1 dose escalation in gastrointestinal stromal tumors (GIST); additional potential $1B opportunity

Next-generation menin inhibitor candidate nominated for IND-enabling studies for diabetes; development plans and timelines to be shared in future update

RATIONALE FOR FTIs: OVERCOMING RESISTANCE TO TARGETED THERAPIES

Combination therapy using FTIs has potential to address drug resistance and provide deeper and more durable anti-tumor activity

THERE IS A NEED TO IMPROVE STANDARDS OF CARE FOR PATIENTS TREATED WITH TARGETED THERAPIES

Despite impressive progress with small molecule targeted therapies, resistance limits the potential of many agents

- Targeted therapies are often effective but insufficient as monotherapies
- Combinations (*e.g.*, KRAS/EGFR inhibitors in CRC) have demonstrated enhanced response

There is a significant need to identify combination therapeutics, which address mechanisms of innate and adaptive resistance

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There is a significant need to identify combination therapeutics, which address mechanisms of innate and adaptive resistance

Kura Oncology is pioneering FTIs to enhance the therapeutic potential of targeted therapies

- mTOR is a clinically validated target, and FTIs reduce mTOR activation by blocking RHEB farnesylation
- RHEB/mTOR inhibition is relevant to anti-VEGF TKIs, KRAS inhibitors and PI3Kα inhibitors

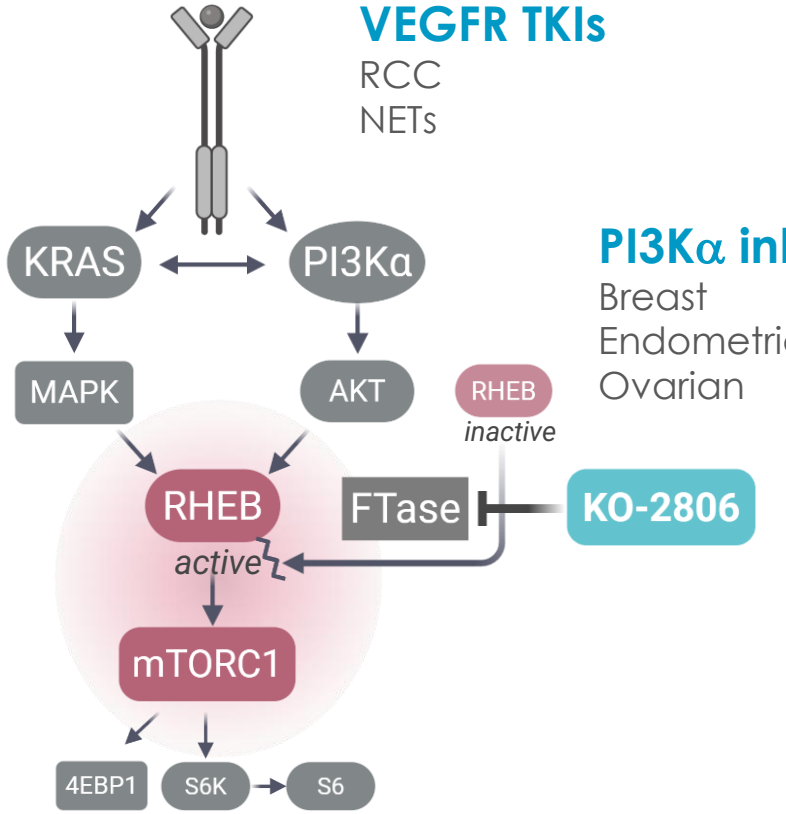
Simultaneous inhibition of RHEB/mTOR using FTIs has the potential to address resistance and provide deeper and more durable anti-tumor activity

OPPORTUNITY IN LARGE SOLID TUMOR MARKETS

RAS/MAPK and PI3K/AKT pathways are central to many precision medicine approaches to solid tumors

VEGFR TKIs
RCC
NETs

RAS inhibitors
NSCLC
CRC



PI3Kα inhibitors
Breast
Endometrial
Ovarian
Cervical
Urothelial
Lung

> 200K ANNUAL INCIDENT PATIENTS IN THE U.S. ACROSS INDICATIONS

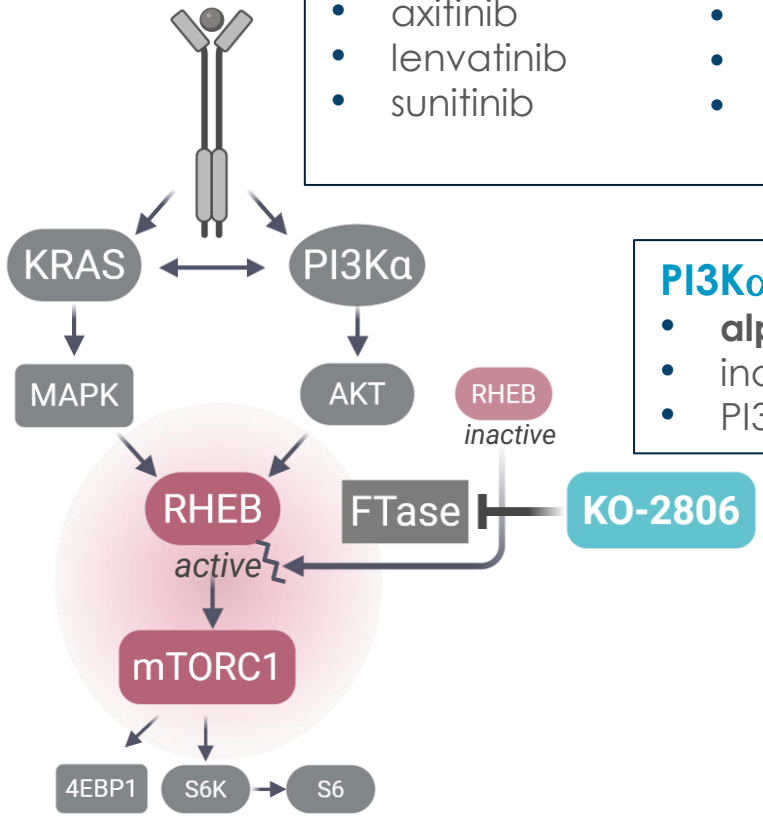
CLINICAL ACTIVITY HAS POTENTIAL TO READ THROUGH TO ENTIRE CLASS

VEGFR TKIs and multi kinase inhibitors

- **cabozantinib**
- axitinib
- lenvatinib
- sunitinib
- sorafenib
- pazopanib
- zanzalitinib
- combinations with immunotherapies

RAS inhibitors

- **adagrasib**
- sotorasib
- divarasib
- daraxonrasib
- elironrasib
- KRAS G12X and pan-RAS inhibitors in development



PI3Kα inhibitors

- **alpelisib**
- inavolisib
- PI3Kα inhibitors in development
- RLY-2608
- STX-478

> 200K ANNUAL INCIDENT PATIENTS IN THE U.S. ACROSS INDICATIONS

KO-2806

Class-leading FTI drug candidate aims to address innate and adaptive resistance to various classes of targeted therapies

Tipifarnib

TIPIFARNIB – FIRST-GEN FTI VALIDATES THERAPEUTIC APPROACH OF RHEB/mTORC1 INHIBITION

First generation FTI with 5,000 patient safety database

Manageable tolerability profile

Compelling clinical activity in *HRAS*-mutant HNSCC

Demonstrated combinability (*e.g.*, erlotinib, alpelisib)

RP2D: **600 mg BID**

Twice-daily dosing

Extensive first-pass metabolism

Limited IP

Darlifarnib

DARLIFARNIB (KO-2806) REPRESENTS A CLASS LEADING FTI

Next Gen FTI optimized for combination drug development. Preclinical data demonstrates improvements over prior FTIs :

Enhanced potency and selectivity

Manageable tolerability and combinability (with adagrasib, cabozantinib, and other agents) in long-term *in vivo* studies

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Pharmacokinetic and metabolic profiles support projected efficacious dose of **<< 1200 mg QD**

Excellent drug-like properties

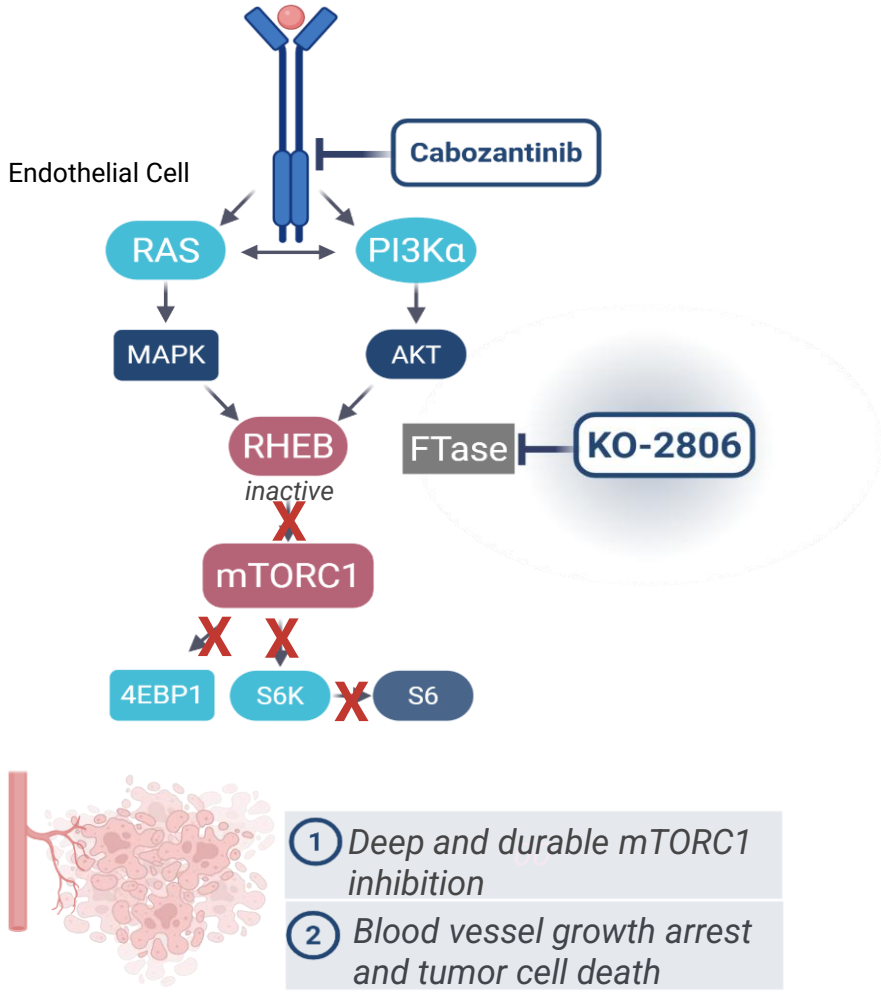
Extended IP protection as an NCE

FTI + TYROSINE KINASE INHIBITOR (TKI) COMBINATIONS IN RENAL CELL CARCINOMA

FTIs ENHANCE ACTIVITY OF VEGF INHIBITORS BY TARGETING THE MTOR NODE

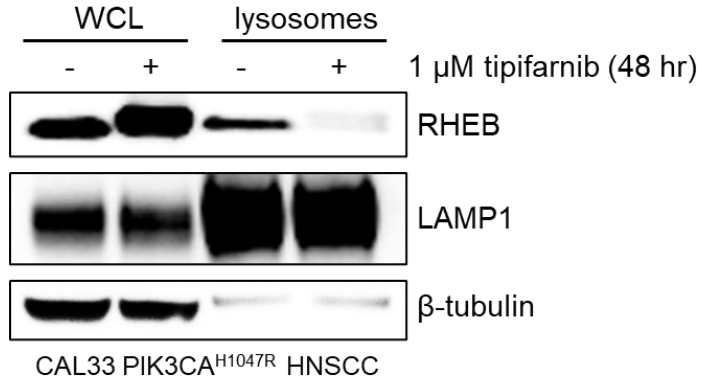
Hyperactivated mTORC1 pathway
is often observed with advanced RCC and is associated with poor prognosis.

Rapalogs, including everolimus and temsirolimus, have been approved in RCC. However, they have had limited uptake in the clinic due to tolerability issues.

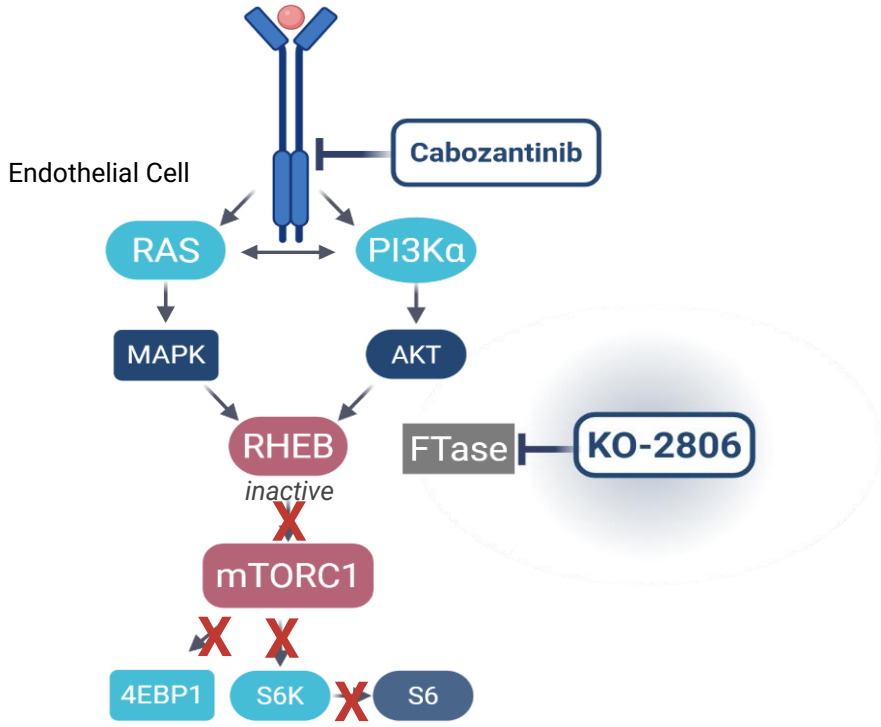


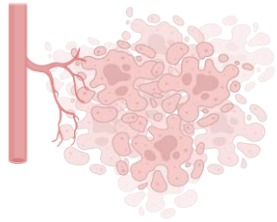
FTIs ENHANCE ACTIVITY OF VEGF INHIBITORS BY TARGETING THE MTOR NODE

Farnesyl transferase inhibitors (FTIs)
inhibit mTORC1 signaling by blocking the farnesylation of RHEB, which can no longer properly localize to activate mTORC1.[1,2,3]



FTI (tipifarnib) markedly reduces the localization of RHEB to lysosomes, which underlies its loss of activity upon defarnesylation



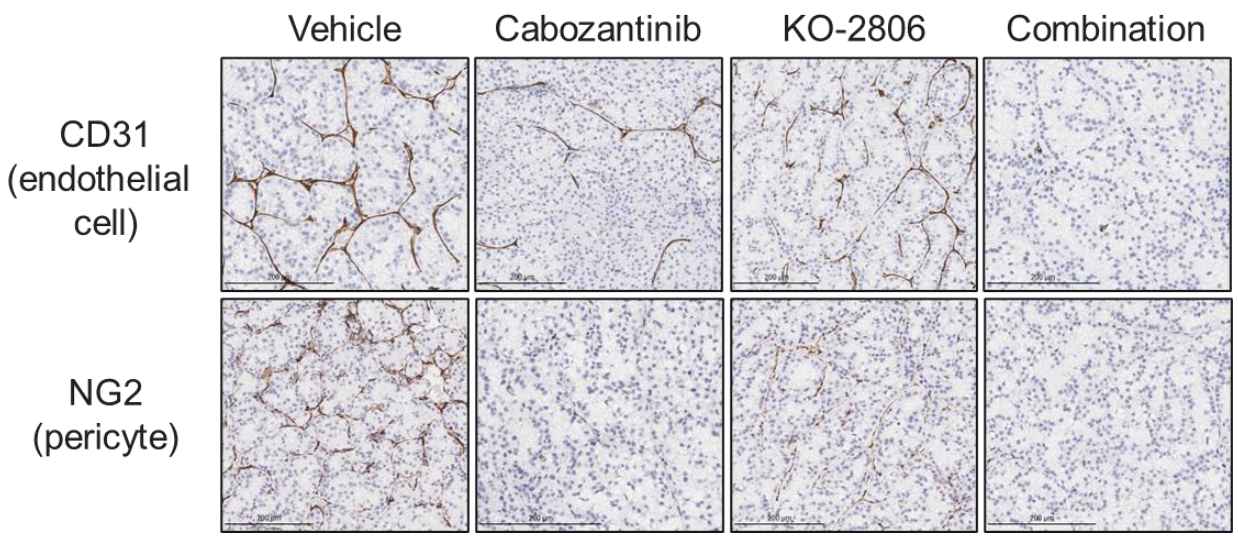


1. *Deep and durable mTORC1 inhibition*
2. *Blood vessel growth arrest and tumor cell death*

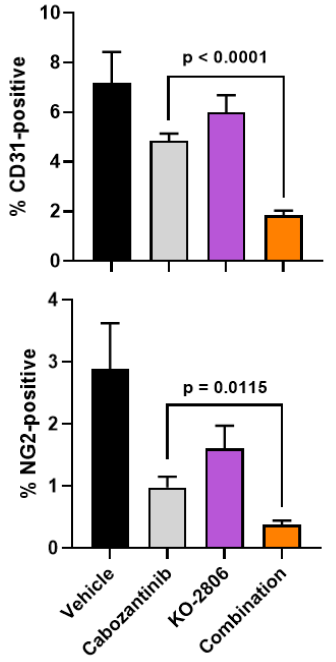
[1]Smith, AE. *et al. Cancer Res* 2023. 83(19):3252-63.
[2]Patel, HV. Smith, AE. *et al. bioRxiv* 2024.12.20.629824.
[3]Gasendo, JG. *et al. Cancer Res* 2025. 85(8_Supplement_1):6370

KO-2806 ENHANCES ANTI-ANGIOGENIC ACTIVITY OF CABOZANTINIB

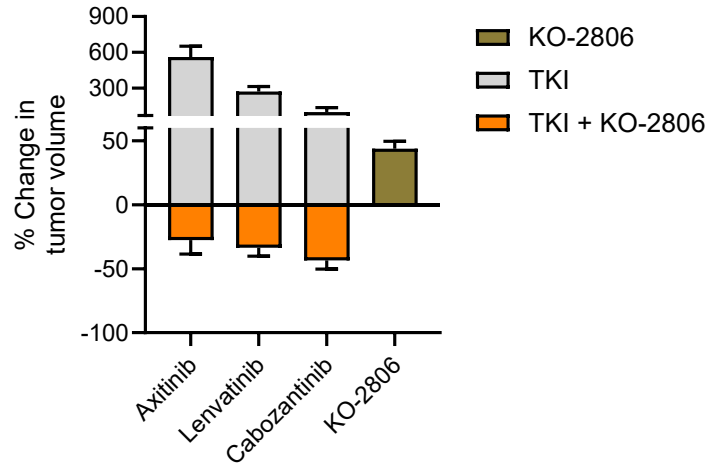
- Cabozantinib **partially inhibits mTOR signaling** in its target cell type – tumor endothelial cells
- Addition of KO-2806 fully inhibits mTOR signaling, leading to **enhanced anti-angiogenic activity**
- Similar observations when KO-2806 is combined with **axitinib or lenvatinib**



KI-12-0073 RCC PDX, Day 14

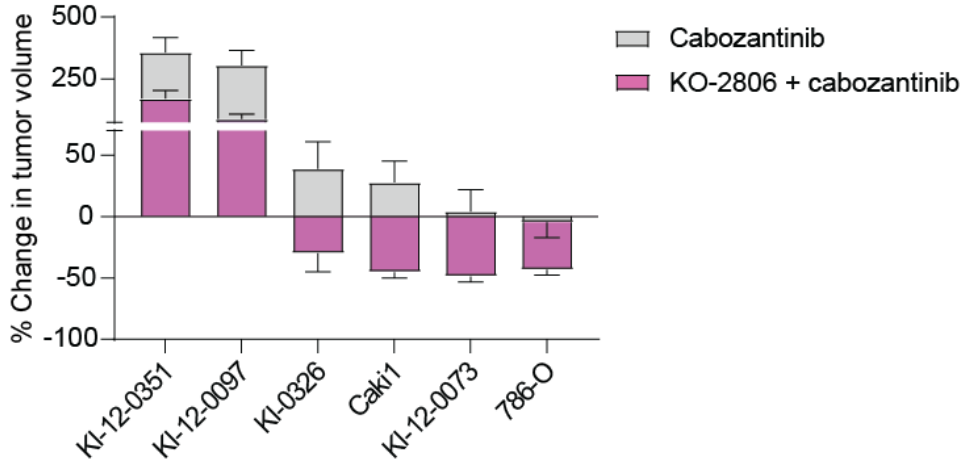


KO-2806 CONSISTENTLY IMPROVES RESPONSES TO TKIs IN RCC XENOGRAFTS



*VHL WT

KO-2806 **consistently improves responses to TKIs** (axitinib, lenvatinib, cabozantinib) in an RCC CDX model

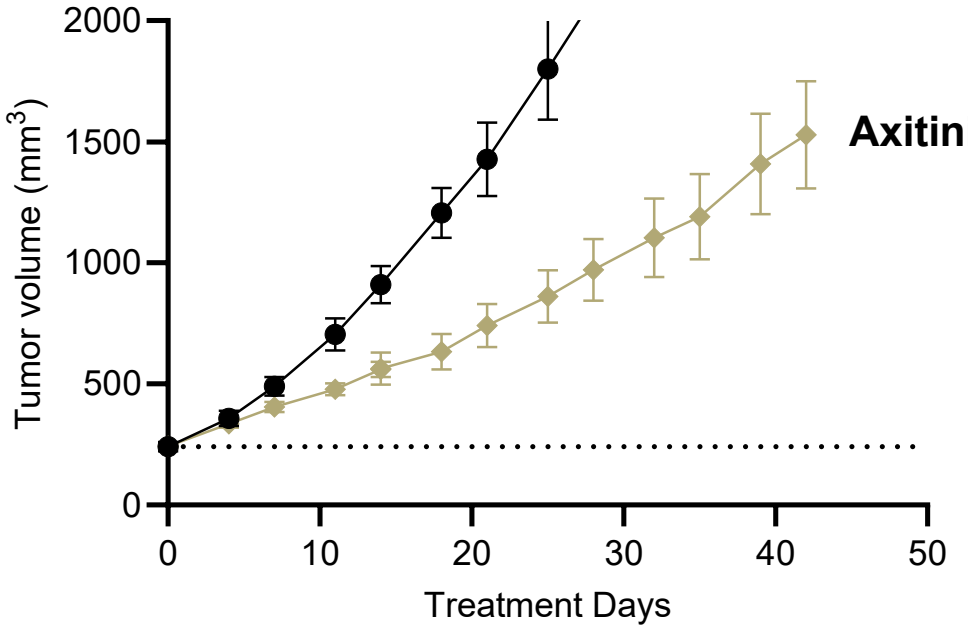


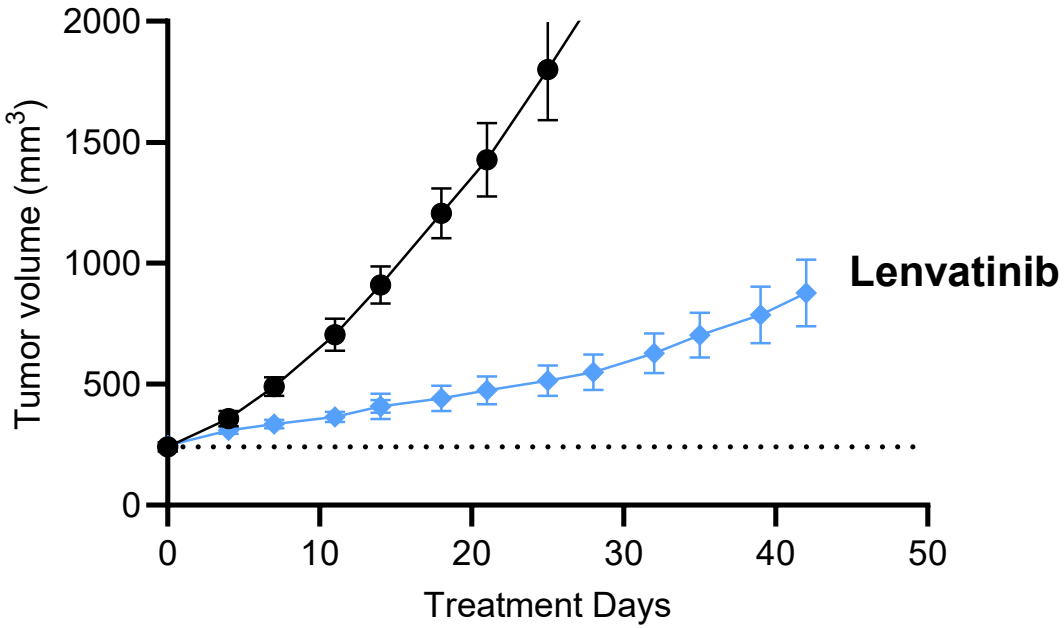
*VHL mutant and WT models tested

KO-2806 **consistently improves responses to cabozantinib** in various TKI naïve RCC CDX and PDX models

RCC XENOGRAFTS PROGRESSING ON ANTI-VEGFR TKIs RESPOND TO KO-2806 / CABOZANTINIB COMBINATION

Caki1
(RCC)





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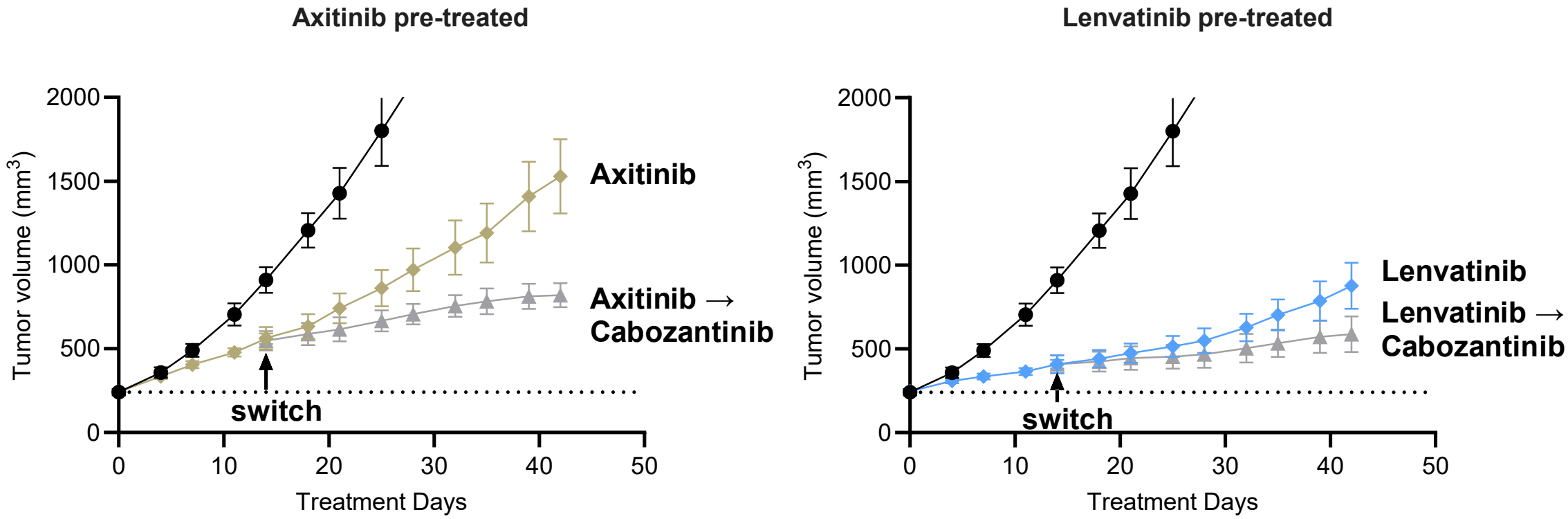

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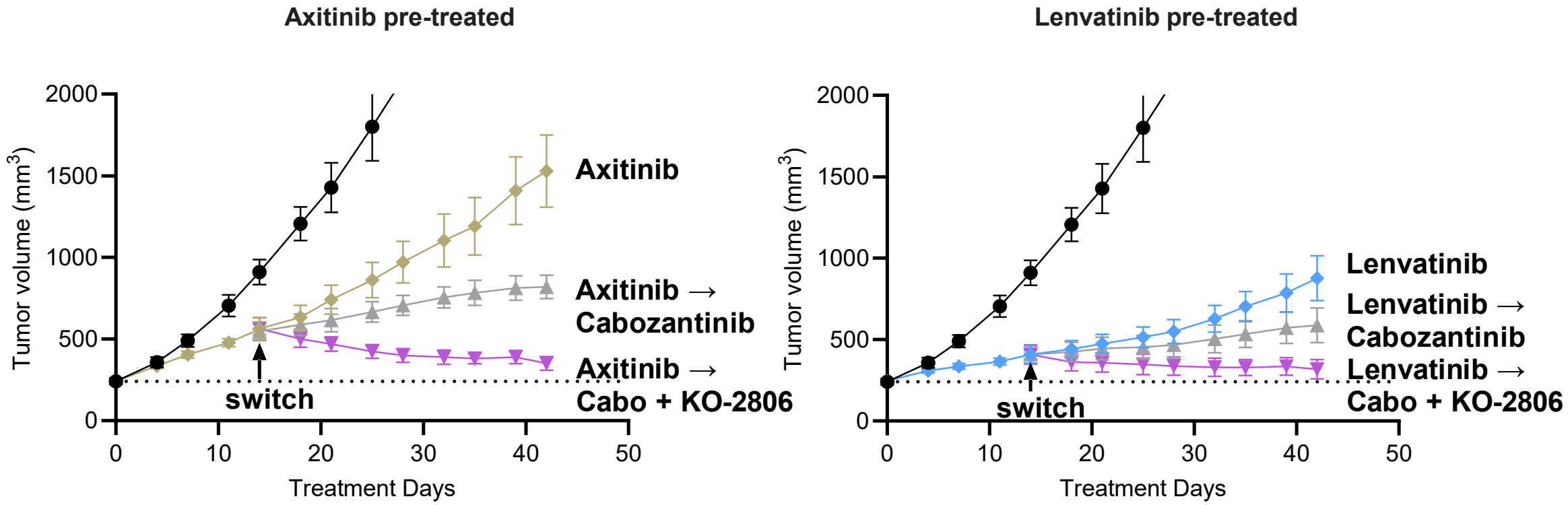
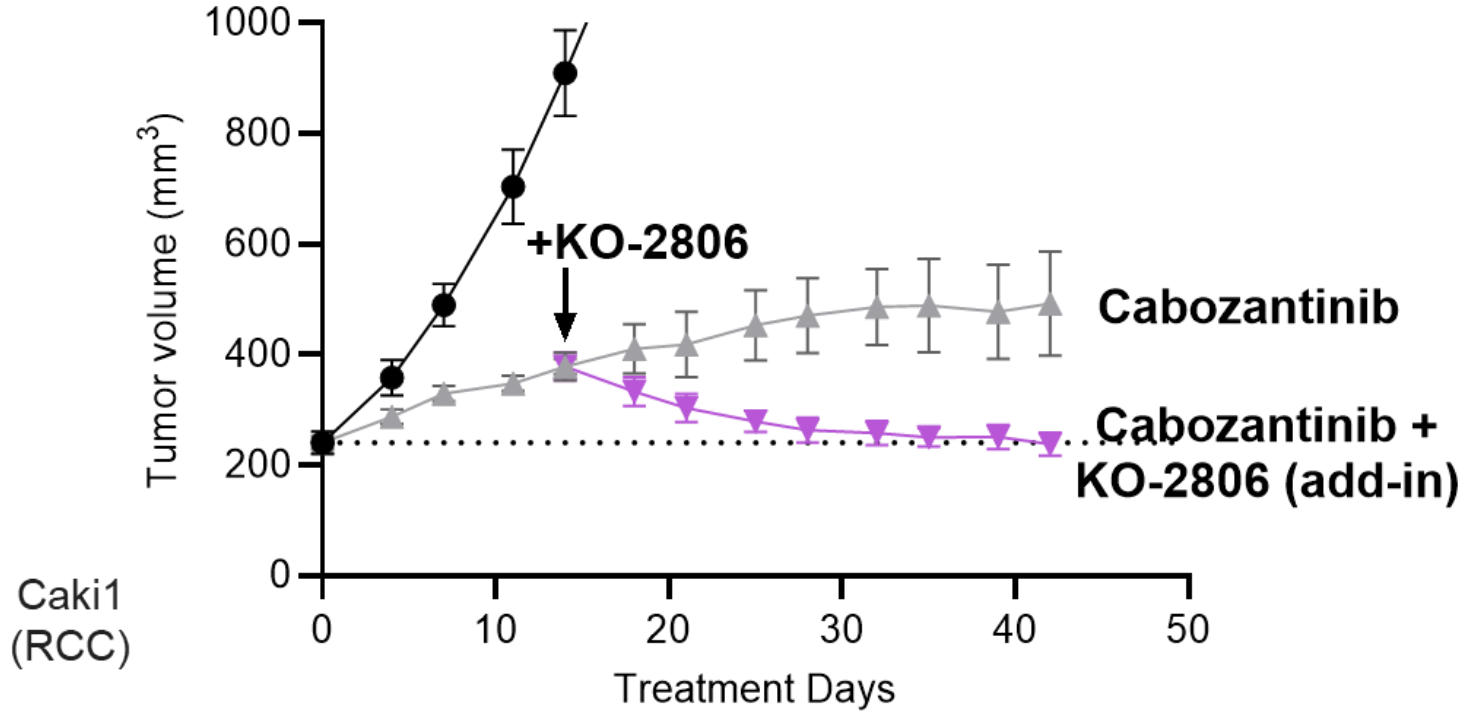


- The combination of cabozantinib and KO-2806 reverses progression on first-line TKI therapy
- Switching to cabo slows tumor growth, but the FTI combo drives consistent tumor regression

RCC XENOGRAFTS PROGRESSING ON ANTI-VEGFR TKIs RESPOND TO KO-2806 / CABOZANTINIB COMBINATION

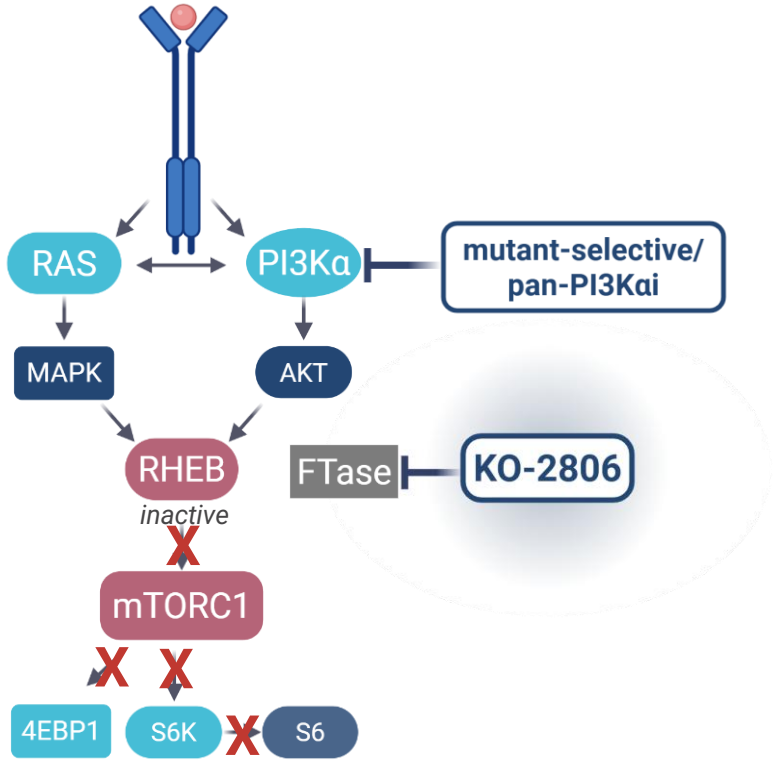
KO-2806 combination therapy induces regressions in tumors previously exposed to cabozantinib



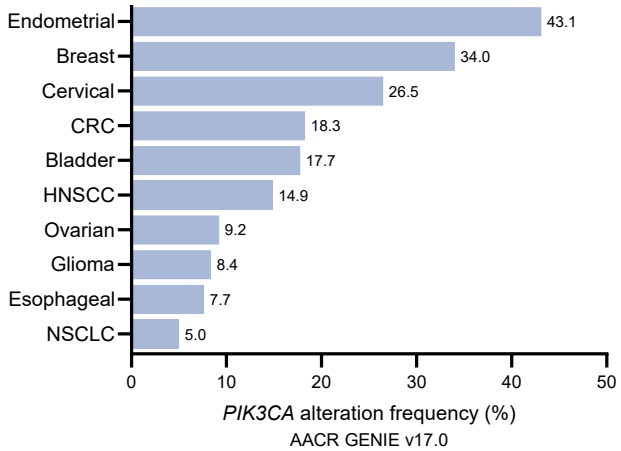
- KO-2806 enhances activity of cabo and other TKIs across their full activity range in ccRCC models
- Enhancement of antiangiogenic TKI activity by FTI-mediated RHEB/mTOR inhibition is effective in tumors progressing on first- or second-line TKI monotherapy

FTI COMBINATIONS IN PIK3CA-DRIVEN TUMORS

FTIs ENHANCE PRECLINICAL ACTIVITY OF PI3Kα INHIBITORS ACROSS TUMOR TYPES BY INHIBITING THE mTORC1 NODE

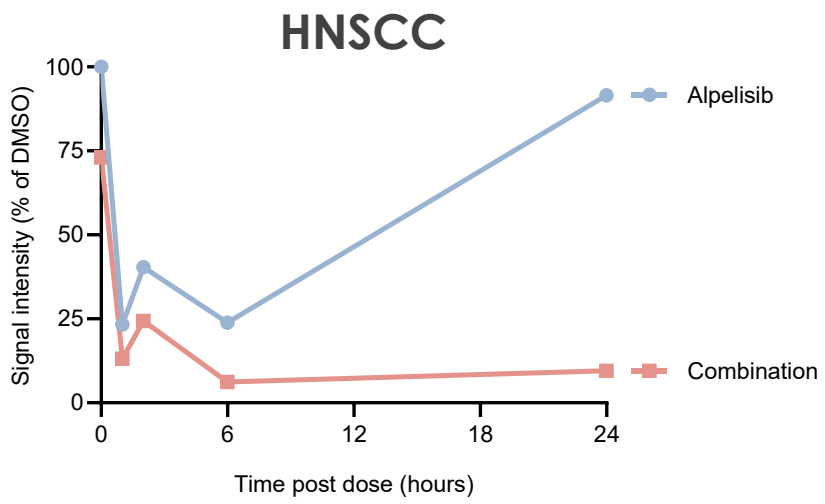


Deep and durable mTORC1 inhibition

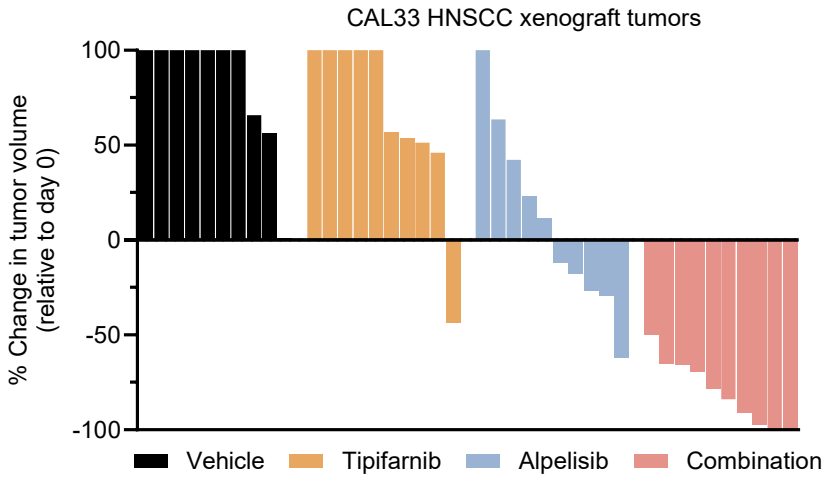


- *PIK3CA* is one of the **most commonly mutated genes** in solid cancers
- Feedback reactivation of PI3K–mTOR signaling limits benefit of PI3K inhibitors, **necessitating development of rational combination strategies**
- FTIs blunt mTORC1 effects by blocking farnesylation of RHEB, leading to more effective reduction of mTOR signaling, while sparing mTORC2

TIPIFARNIB ENHANCES THE ACTIVITY OF ALPELISIB IN PRECLINICAL MODELS OF PIK3CA-MUTANT HNSCC

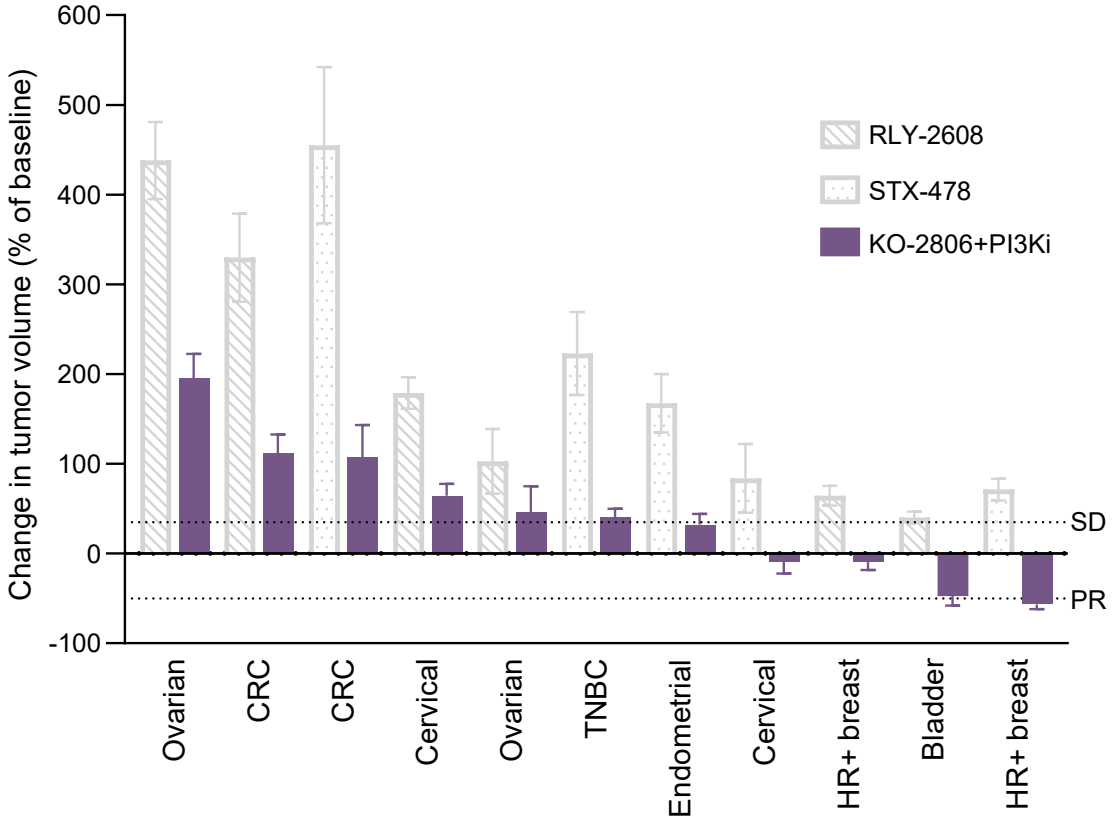


Tipifarnib inhibits mTOR signaling rebound observed with alpelisib alone

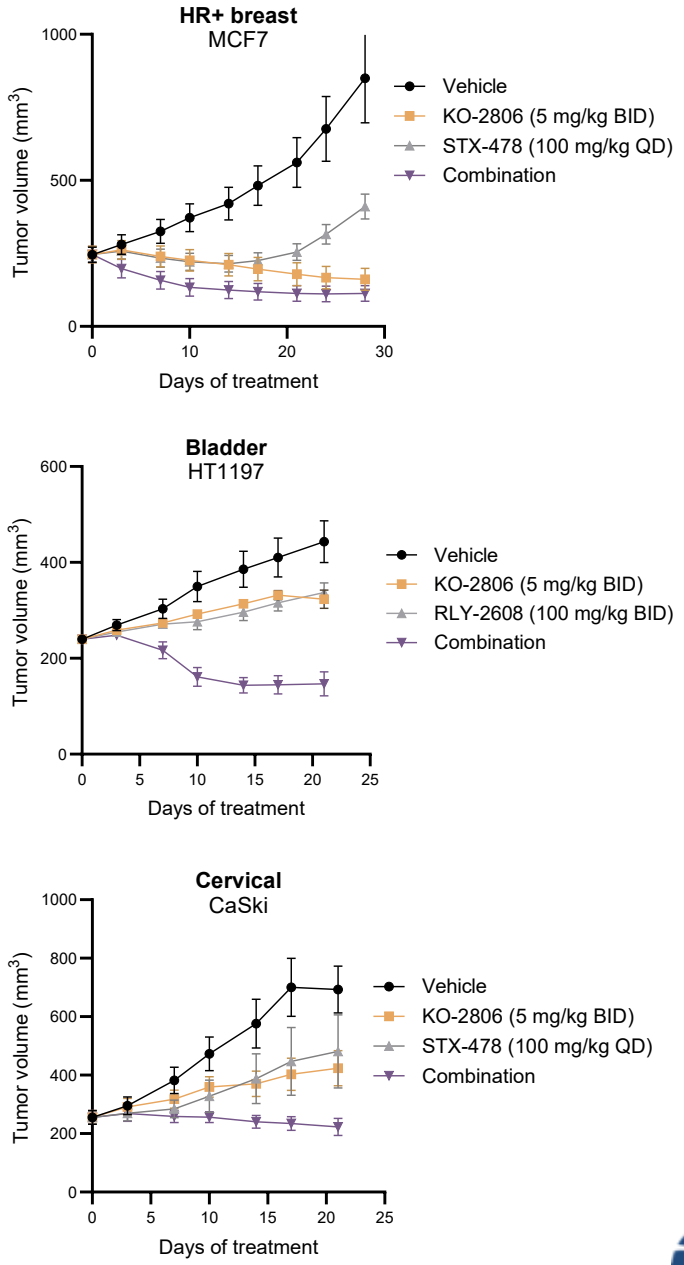


Combination of tipifarnib and alpelisib results in deep regression in a PIK3CA-mutant HNSCC CDX model

KO-2806 ENHANCES ANTI-TUMOR ACTIVITY OF PI3Kα INHIBITORS ACROSS DIFFERENT INDICATIONS

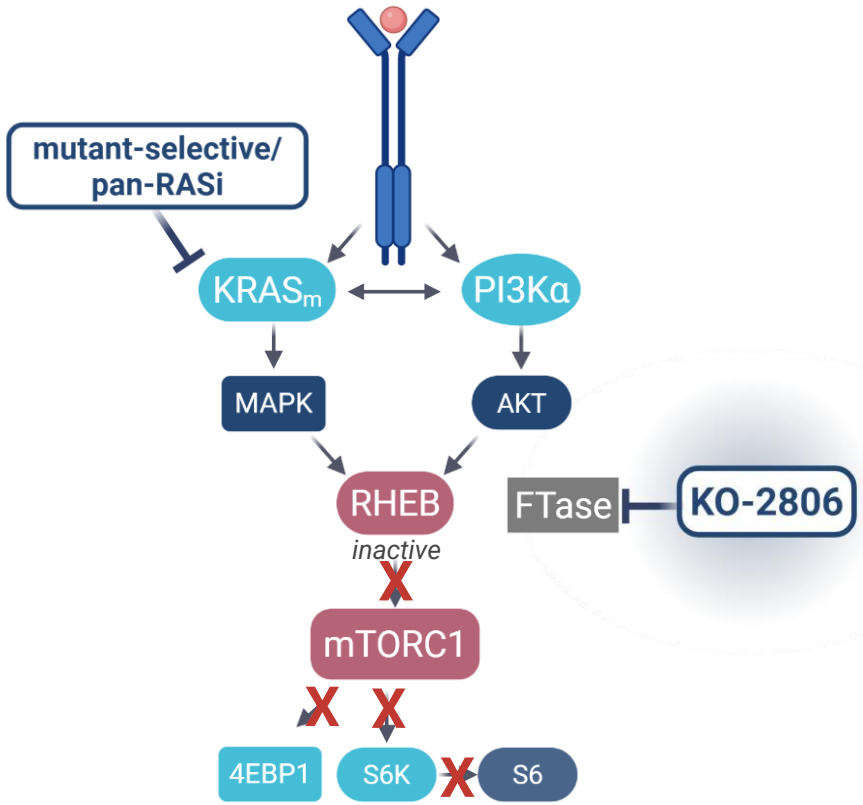


Addition of KO-2806 consistently enhances the activity of both mutant-selective PI3Kα inhibitors in preclinical models



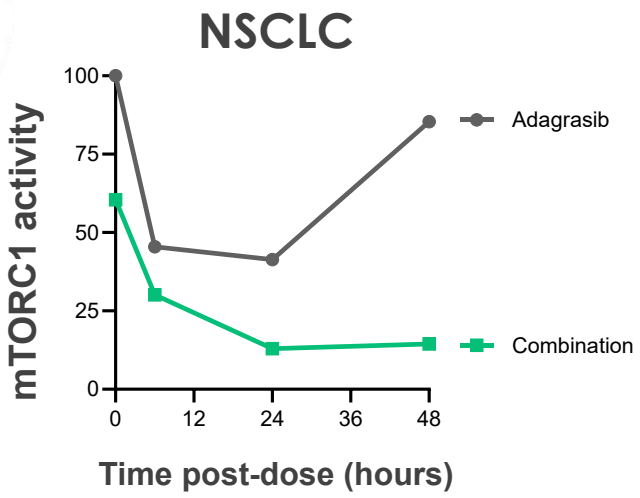
FTI COMBINATIONS IN KRAS-DRIVEN TUMORS

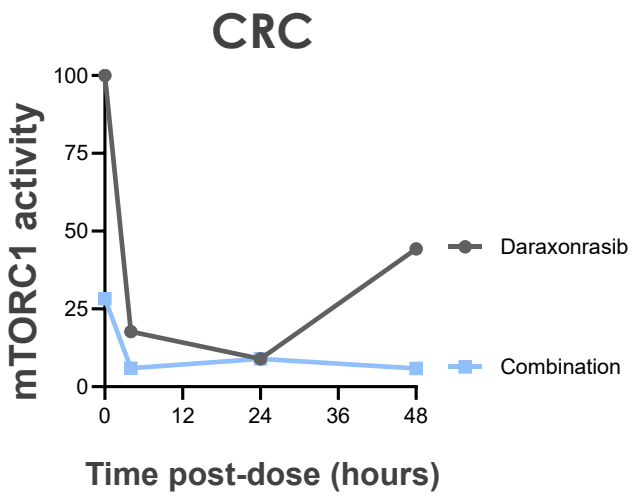
FTIs ENHANCE ACTIVITY OF RAS INHIBITORS BY TARGETING THE mTORC1 NODE



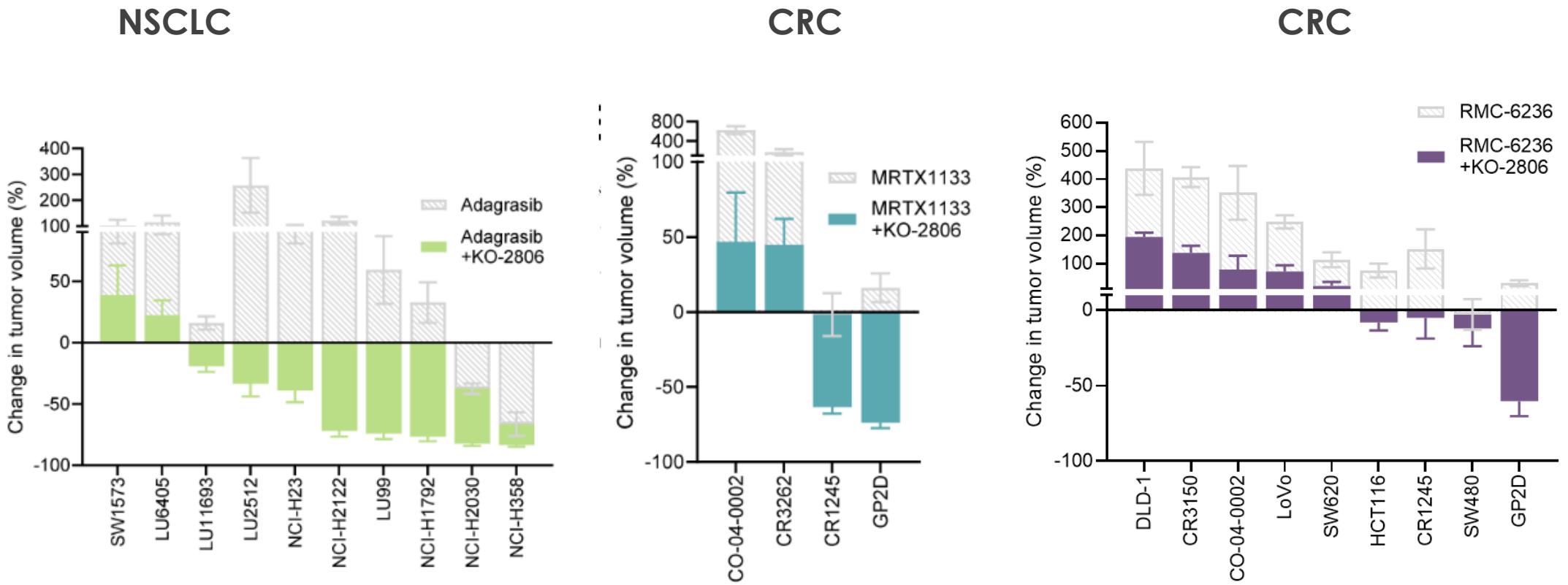
Deep and durable mTORC1 inhibition

- **Partial inhibition and/or rebound of mTOR signaling limits single agent efficacy of (K)RAS inhibitors**
- KO-2806 inhibits RHEB farnesylation leading to a **sustained blockade of mTORC1 signaling** and enhancing the anti-tumor activity of RAS inhibitors across the class





KO-2806 ENHANCES ANTI-TUMOR ACTIVITY OF RAS INHIBITORS IN NSCLC AND CRC PRECLINICAL MODELS

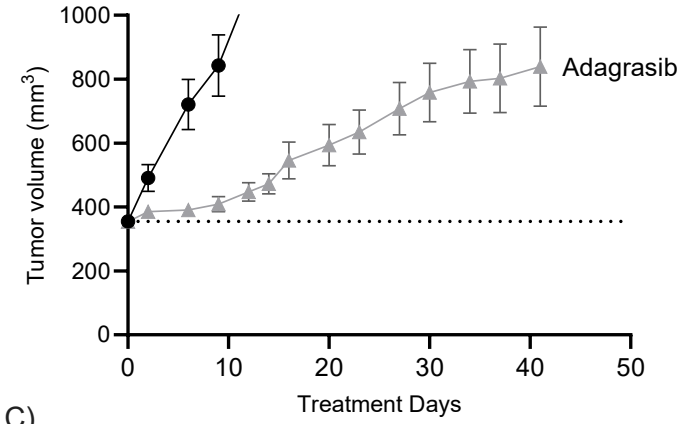


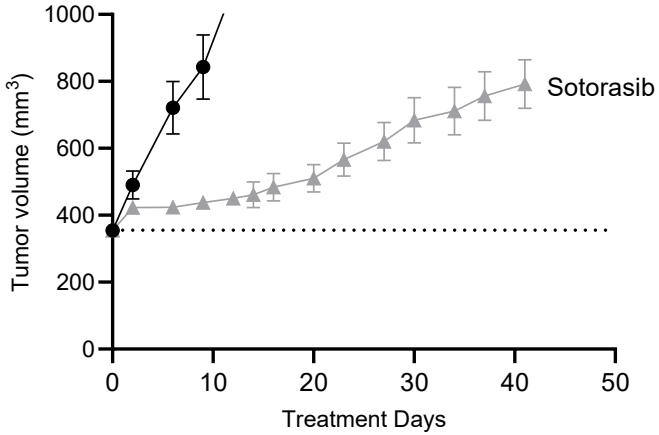
KO-2806 enhances activity of **all classes of RAS inhibitors across their full activity range** in both NSCLC and CRC CDX and PDX models

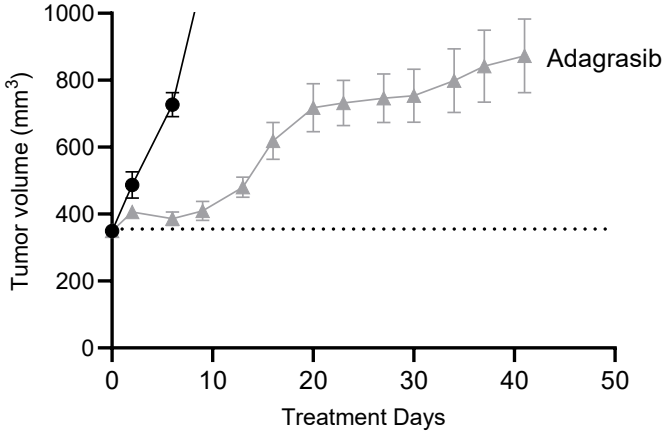
Patel, HV. Smith, AE. *et al. Biorxiv* 2024.12.20.629824.

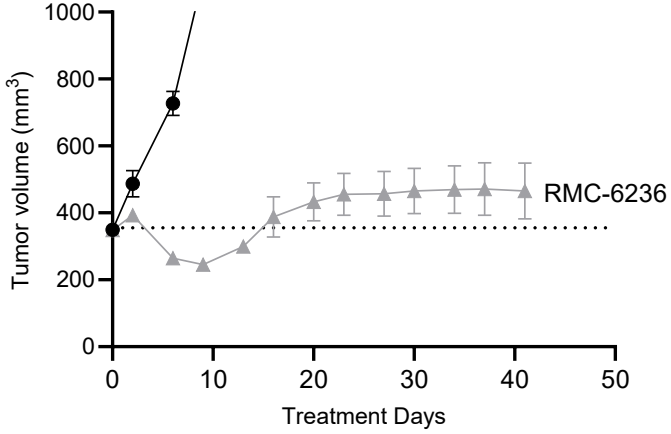
KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN NSCLC MODEL

NCI-H2122
(KRAS^{G12C} NSCLC)









KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN NSCLC MODEL

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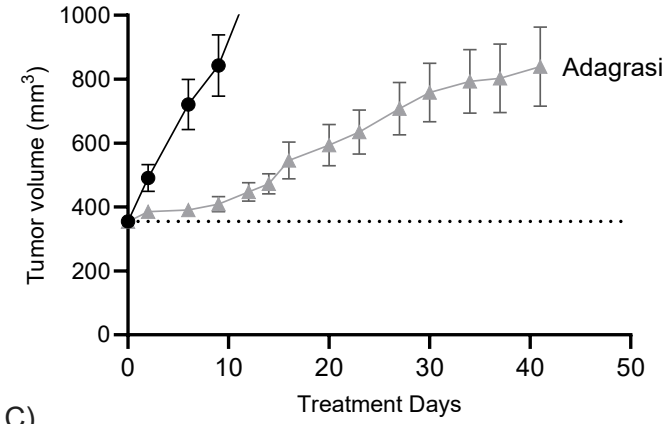
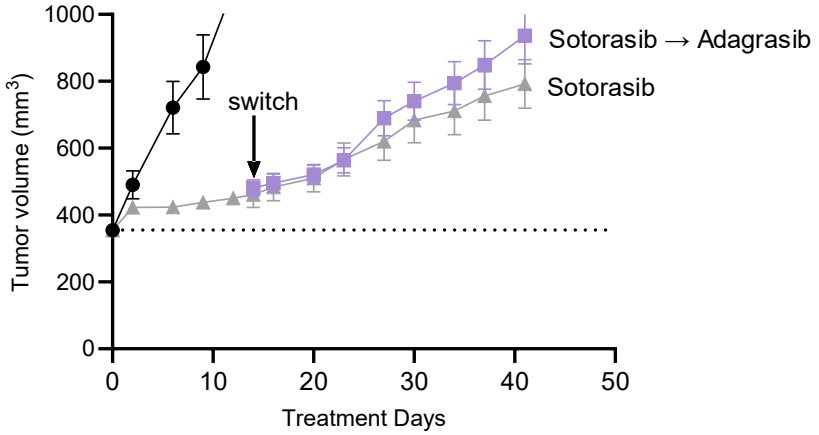
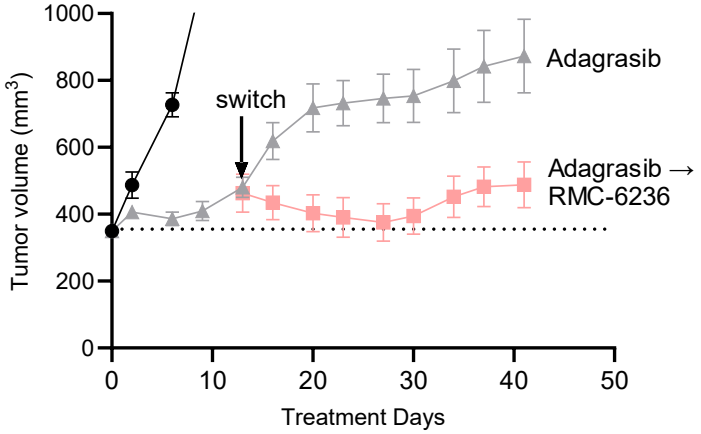
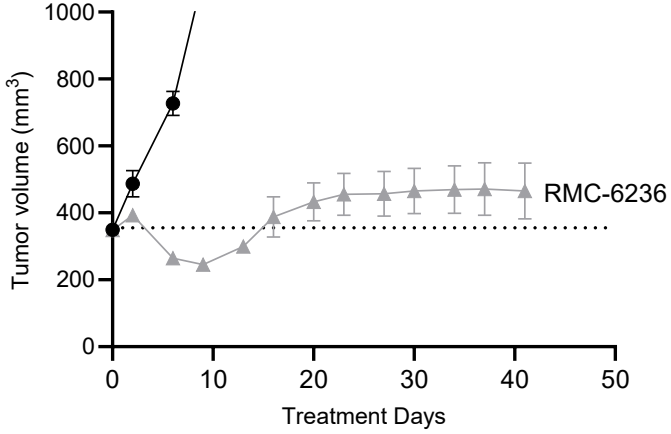
(KRAS^{G12C} NSCLC)









KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN NSCLC MODEL

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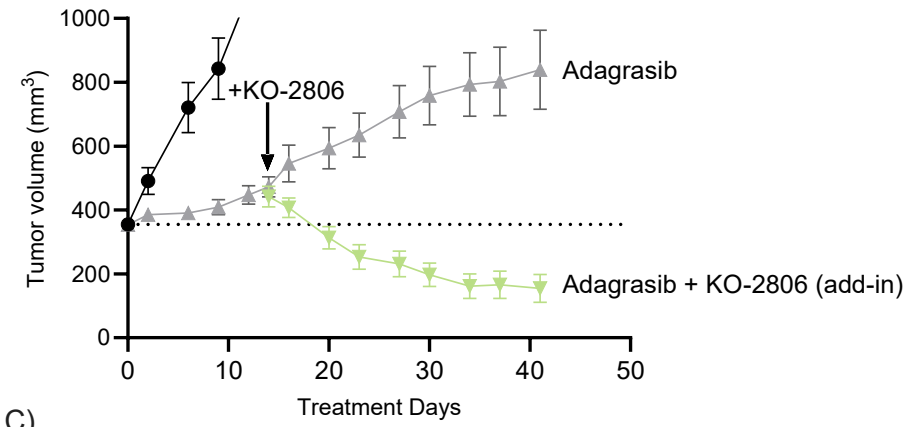
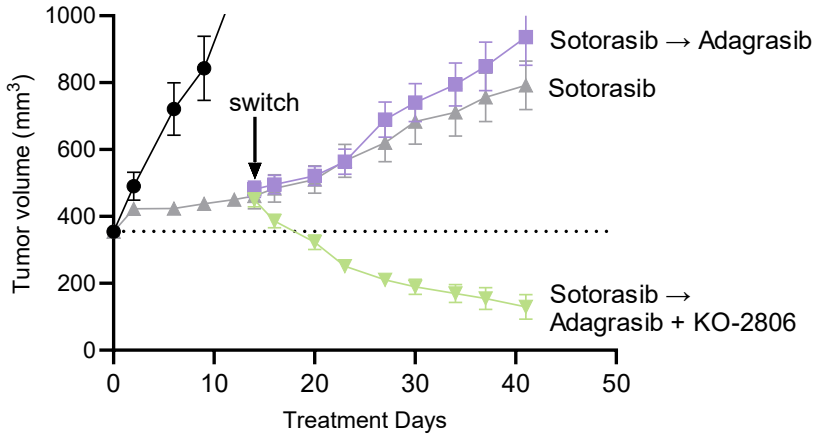
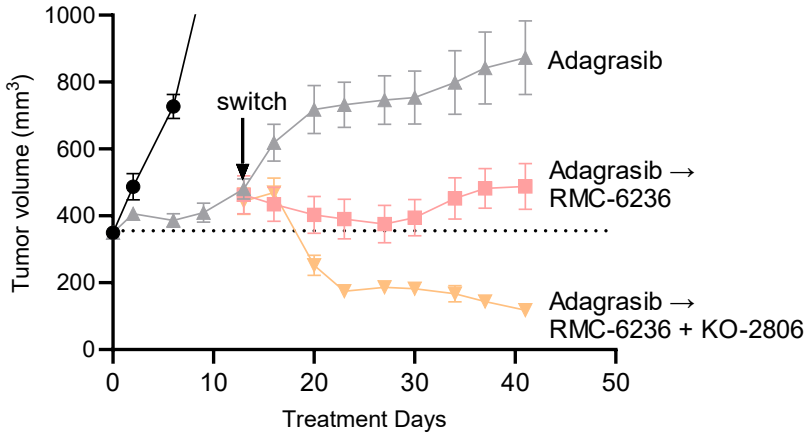
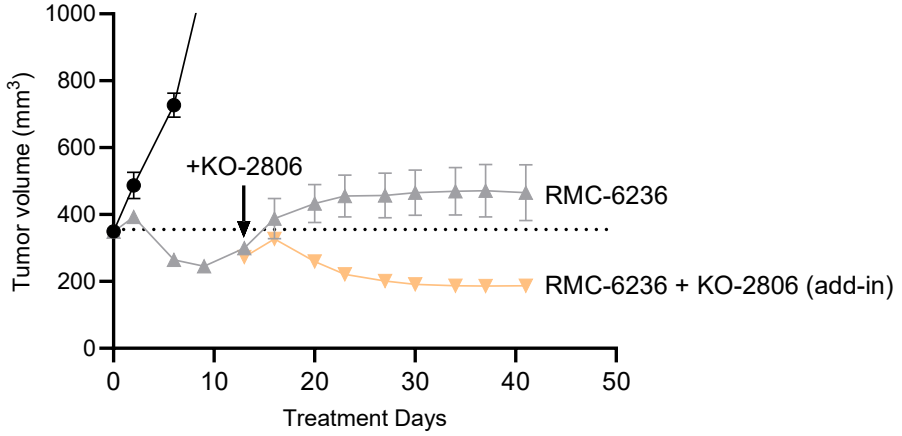
(KRAS^{G12C} NSCLC)



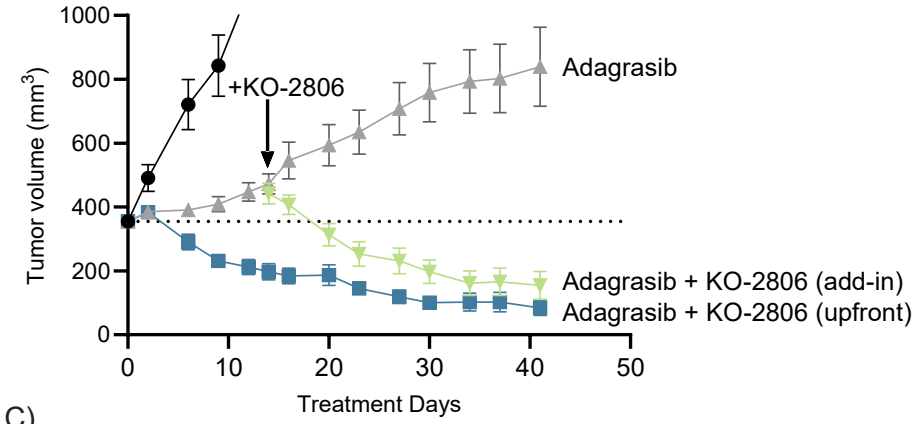


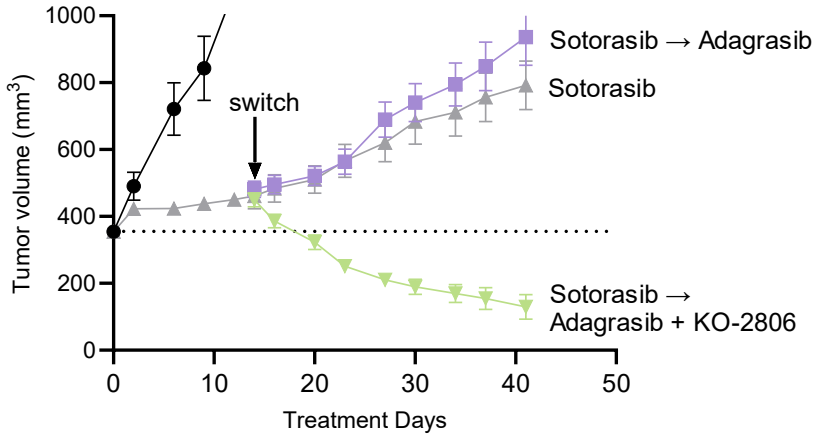


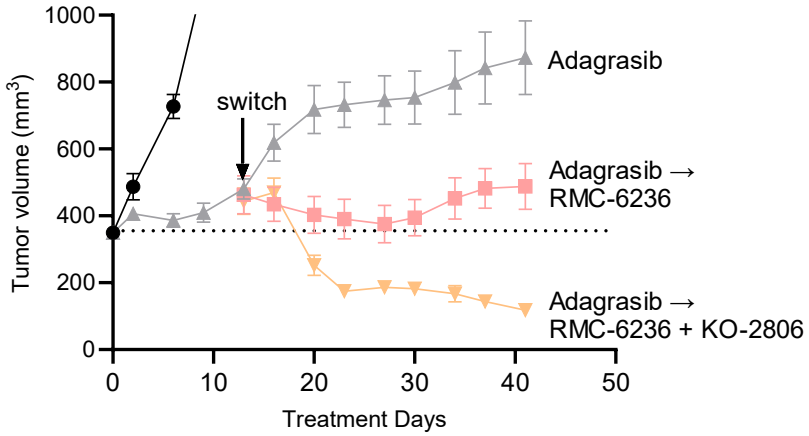


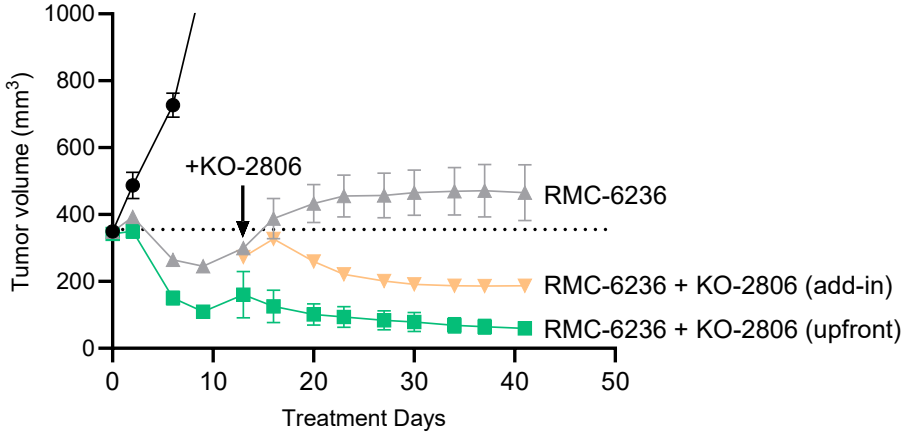
KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN NSCLC MODEL

NCI-H2122
(KRAS^{G12C} NSCLC)



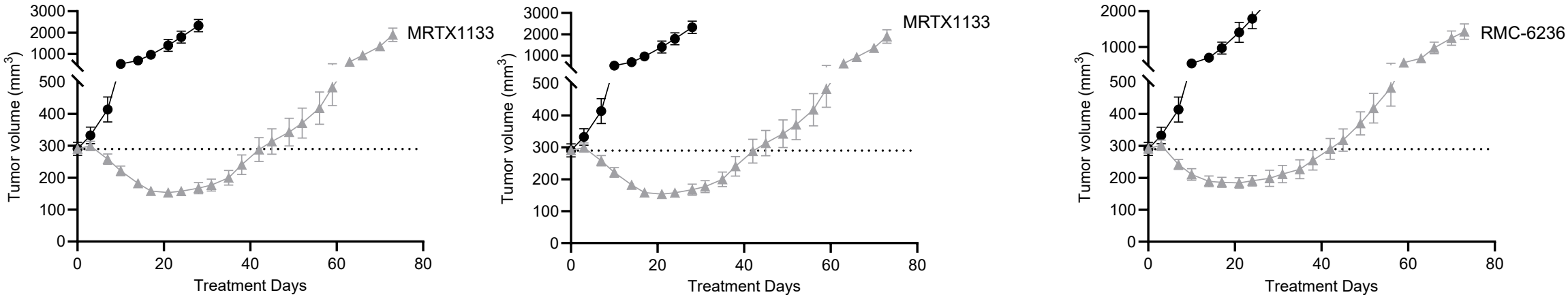






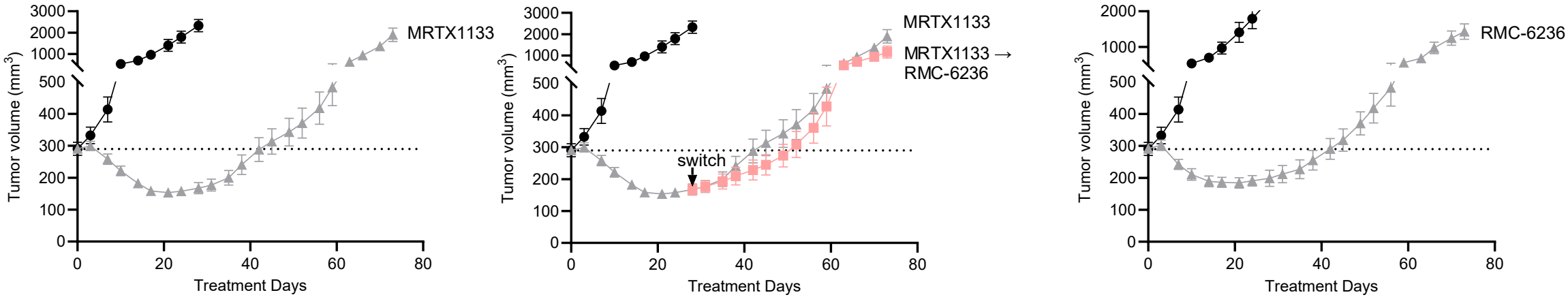
KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN CRC MODEL

GP2D
(KRAS^{G12D} CRC)

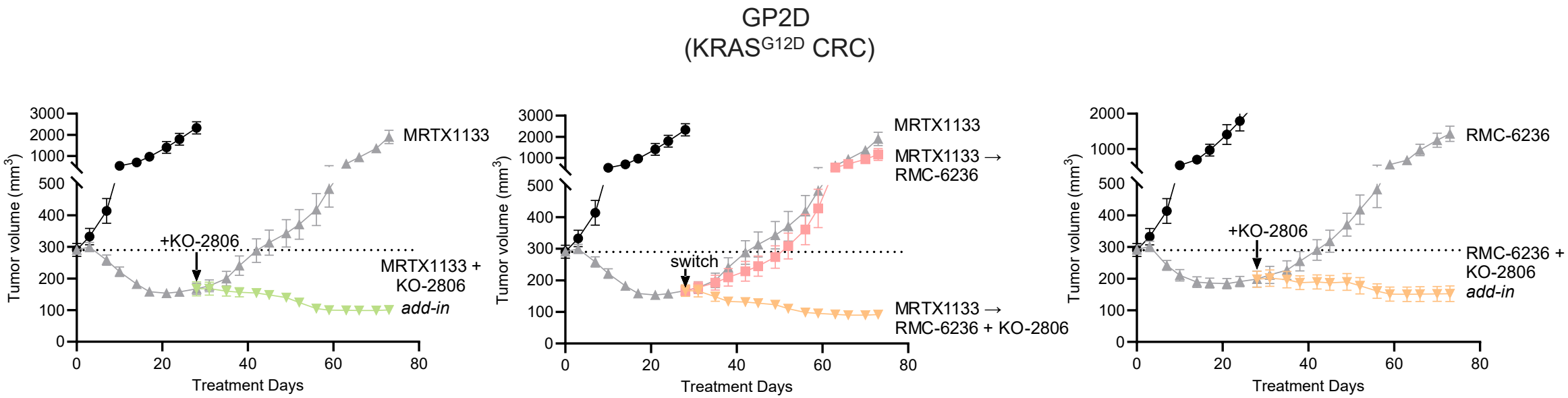


KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN CRC MODEL

GP2D
(KRAS^{G12D} CRC)

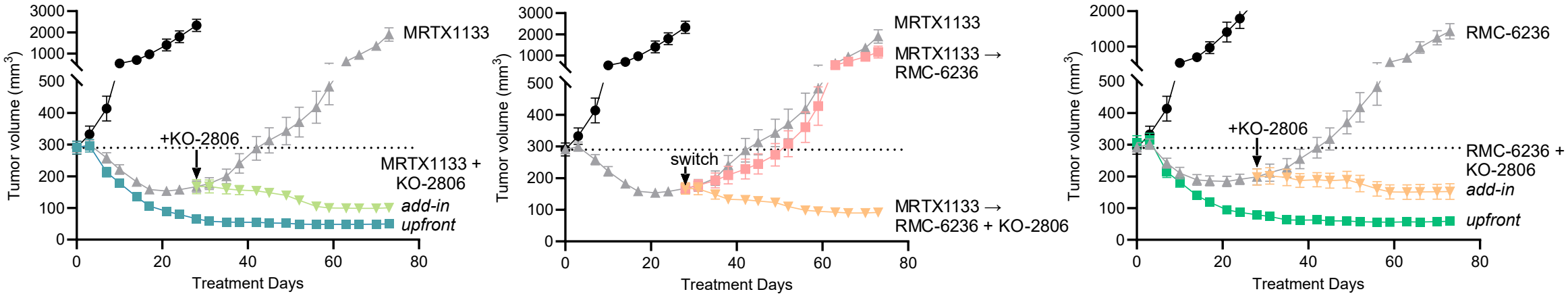


KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN CRC MODEL



KO-2806 RE-SENSITIZES RELAPSING TUMORS TO MUTANT SELECTIVE OR PAN-RAS INHIBITION IN CRC MODEL

GP2D
(KRAS^{G12D} CRC)



- **KO-2806 enhances activity of all classes of RAS inhibitors across their full activity range** in both NSCLC and CRC models
- KRAS inhibitor/KO-2806 combination therapy **induces regressions** in NSCLC and CRC tumors previously exposed to mutant-selective or pan-RAS inhibitor monotherapy

CONCLUSIONS FROM PRECLINICAL EXPERIENCE WITH FARNESYL TRANSFERASE INHIBITORS

FTIs address a resistance pathway common to many targeted therapies across a range of large indications

The targeting of innate and adaptive resistance via FTIs in combination with targeted therapies has demonstrated the potential to drive deep responses in preclinical models

FTIs have been successfully combined in preclinical models with multiple drug classes, including PI3Kα inhibitors, KRAS inhibitors and antiangiogenic tyrosine kinase inhibitors

KO-2806 (darlifarnib) is a next-generation FTI, optimized for combination approaches with improved pharmaceutical properties

Preclinical data support combination therapy using darlifarnib to address resistance and provide more durable activity

CLINICAL DEVELOPMENT OF KO-2806

CLINICAL DEVELOPMENT OF KO-2806 – AREAS OF FOCUS

Monotherapy

Safety, tolerability, clinically active dose and therapeutic window

Tipifarnib is very well understood and an excellent “tool compound”

KO-2806 is an improved FTI with potential broad application

Combinations

Safety, tolerability and ability to combine with approved standards of care

Evidence of ability to drive deeper and more durable responses

Evidence of ability to resensitize patients to standards of care

Later stage development

Clinical data to support later stage development in combinations with additional PI3Kα inhibitor, KRAS inhibitor and TKI drug candidates across multiple solid tumors

PHASE 1 STUDY OF KO-2806 AS MONOTHERAPY IN ADVANCED SOLID TUMORS

A phase 1 study of the next-generation farnesyltransferase inhibitor (FTI) KO-2806 as monotherapy in advanced solid tumors

G. Hanna, Dana-Farber Cancer Institute

Sunday, October 19, 2025; 12:00 PM CEST
Publication Number 981P

TRIAL OBJECTIVES[1]

- Evaluate the safety and tolerability of KO-2806
- Characterize the PK of KO-2806 when administered as monotherapy
- Inform the selection of RP2D of KO-2806
- Evaluate the antitumor activity of KO-2806

KEY POINTS

- Conducted in patients with *HRAS*-, *KRAS*- and *NRAS*-mutant tumors
- Clinical activity expected in *HRAS*-mutant patients only
- Efficient means to determine MTD and RP2D

PK – pharmacokinetics; RP2D – recommended Phase 2 dose; MTD – maximum tolerated dose

1. Ongoing study – Clinicaltrials.gov identifier NCT06026410 https://clinicaltrials.gov/study/NCT06026410

PHASE 1 STUDY OF KO-2806 IN COMBINATION WITH CABOZANTINIB IN RENAL CELL CARCINOMAS

Farnesyltransferase inhibitor (FTI) KO-2806 in combination with cabozantinib (cabo) in renal cell carcinoma (RCC): Preliminary results from FIT-001 phase 1 trial

A. Ayanambakkam, University of Oklahoma Health Sciences Center

Saturday, October 18, 2025; 12:00 PM CEST
Publication Number 2604P

TRIAL OBJECTIVES[1]

- Characterize PK of the combination agents when administered in combination therapy
- Inform the selection of RP2D of the combination
- Evaluate the antitumor activity of the combination

KEY POINTS

- Conducted in 2L+ RCC patients
- Preliminary clinical activity in combination

PK – pharmacokinetics; RP2D – recommended Phase 2 dose

1. Ongoing study – Clinicaltrials.gov identifier NCT06026410 https://clinicaltrials.gov/study/NCT06026410

PHASE 1 STUDY OF TIPIFARNIB AND ALPELISIB IN R/M *PIK3CA*-M HNSCC

Tipifarnib (TIP) and alpelisib (ALP) in recurrent/metastatic head and neck squamous cell carcinoma (R/M HNSCC): Phase 1 results from KURRENT-HN

G. Hanna, Dana-Farber Cancer Institute

Monday, October 20, 2025; 12:00 PM CEST
Publication Number 1349P

TRIAL OBJECTIVES[1]

- Evaluate safety and tolerability of tipifarnib in combination with alpelisib
- Characterize PK of tipifarnib and alpelisib when administered in combination therapy
- Determine the MTD and OBAD of the combination
- Evaluate the antitumor activity of tipifarnib in combination with alpelisib

KEY POINTS

- Conducted in patients with R/M *PIK3CA*-m HNSCC
- Neither agent alone expected to demonstrate meaningful clinical responses in this population

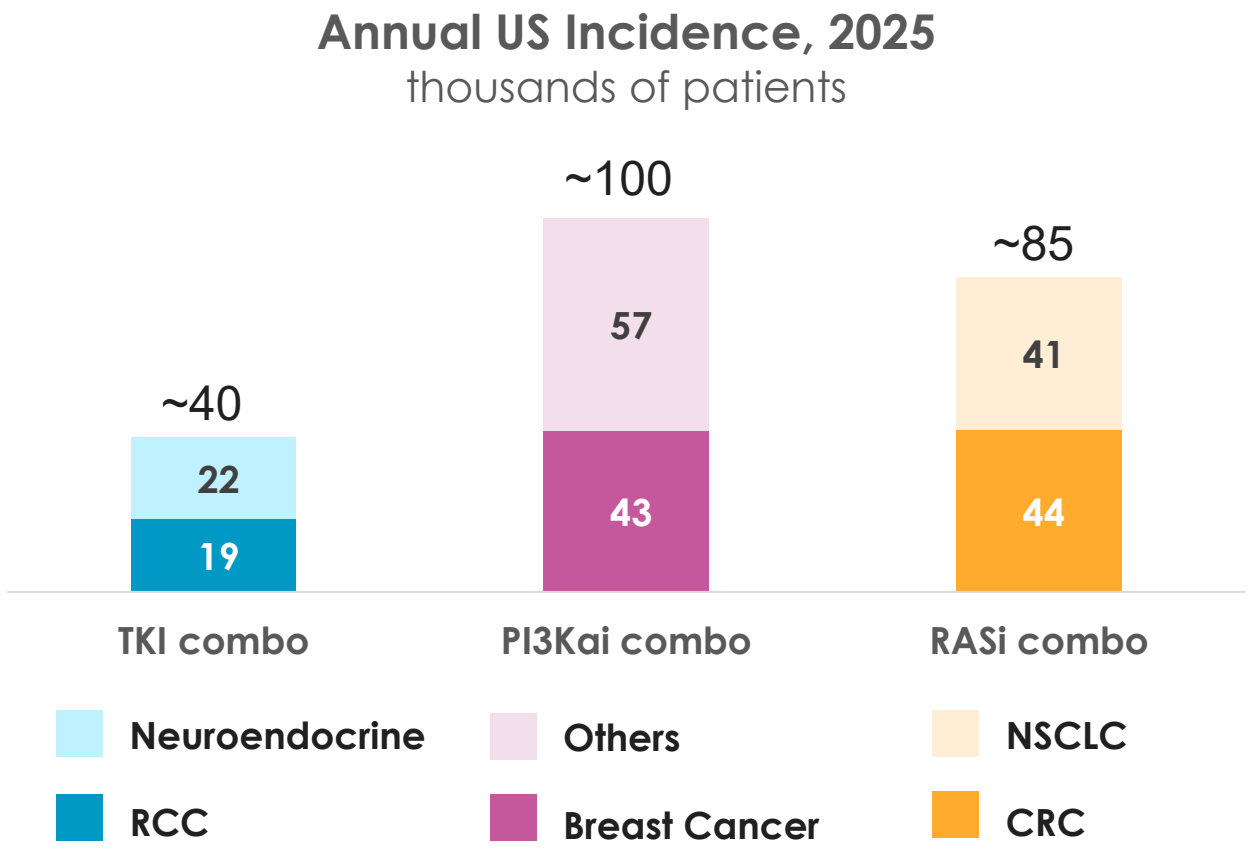
R/M HNSCC – recurrent / metastatic head and neck squamous cell carcinoma; PK – pharmacokinetics; MTD – maximum tolerated dose; OBAD – optimal biologically active dose

1. Ongoing study – Clinicaltrials.gov identifier NCT04997902 https://clinicaltrials.gov/study/NCT04997902

OPPORTUNITY

Large Market and Multiple Anticipated Catalysts

LARGE POTENTIAL OPPORTUNITY IN KO-2806 WITH > 200K ANNUAL INCIDENT PATIENTS IN THE U.S.



VEGFR TKI Opportunities

- Potential to combine with cabozantinib and other TKIs in RCC and potentially in NET
- Potential to combine with TKI and I/O in 1L RCC

KRAS and PI3Kα Opportunities

- Potential to combine with multiple agents in KRAS- and PI3Kα-driven cancers across major solid tumors
- Potential for synergistic efficacy, lifecycle management and multi-drug revenues

ANTICIPATED MILESTONES: STEADY CADENCE OF DATA READ-OUTS ACROSS MULTIPLE PROGRAMS EXPECTED

Ziftomenib	Present full data from KOMET-001 Phase 2 registration-directed trial in R/R *NPM1*-m AML	✓
	Present preliminary clinical data from KOMET-007 Phase 1b trial in 1L intensive AML	✓
	PDUFA target action date of Nov 30, 2025 for ziftomenib NDA in R/R *NPM1-m* AML	4Q 2025
	Initiate KOMET-017 Phase 3 registration-enabling trials in 1L *NPM1*-m and *KMT2A*-r intensive and non-intensive AML	2H 2025
	Commercial launch of ziftomenib in R/R *NPM1*-m AML	2H 2025
	Present preliminary clinical data from Phase 1b expansion of KOMET-007 in 1L non-intensive AML	2H 2025
KO-2806 / tipifarnib	Initiate one or more expansion cohorts in combination with cabozantinib in RCC	1H 2026
	Present preliminary clinical data from FIT-001 trial for KO-2806 as monotherapy and combo with cabozantinib in RCC[1]	4Q 2025
	Present clinical data from the KURRENT-HN trial of tipifarnib in combo with alpelisib in *PIK3CA*-dependent HNSCC[1]	4Q 2025
Next-gen Menin	Nominate a development candidate for next-generation menin inhibitor program for diabetes	✓

[1]Abstracts accepted for presentation at 2025 European Society for Medical Oncology (ESMO) Congress in October 2025. Posters #2604P, #981P, #1349P.

FINANCIAL HIGHLIGHTS (NASDAQ: KURA)

Cash, Cash Equivalents and Marketable Securities

$630.7M

in cash, cash equivalents and short-term investments as of June 30, 2025

Anticipated Significant Near-Term Milestones

$375M

in potential near-term milestones, including launch of ziftomenib in the monotherapy R/R setting

Shares Outstanding

86.8M
COMMON STOCK

19.1M options, RSUs, PSUs, warrants & pre-funded warrants as of June 30, 2025

Kura anticipates collaboration plus cash balance as of June 30, 2025 to fund ziftomenib AML program to potential commercialization in frontline combinations

Up Next:

FTI Clinical Update from ESMO 2025

Please join us for a virtual investor event to discuss the preliminary clinical data presented at the ESMO Congress 2025 and KO-2806 development plans

Saturday, October 18, 2025

10:30 a.m. PT / 1:30 p.m. ET

A live webcast and archived replay of each event will be available on the Events page in the Investors section of Kura's website.

QUESTIONS & ANSWERS

THANK YOU

Our goal is to develop transformative therapies to extend and improve the lives of patients with cancer