OUR MISSION AND FOCUS
Syros is a biopharmaceutical company committed to developing new standards of care for the frontline treatment of hematologic malignancies. Driven by the motivation to help patients with blood disorders that have largely eluded other targeted approaches, Syros is advancing our clinical-stage drug candidate, tamibarotene, across two genomically defined patient populations in higher-risk myelodysplastic syndrome (HR-MDS) and acute myeloid leukemia (AML).

HEMATOLOGY FOCUSED LATE-STAGE CLINICAL PIPELINE

<table>
<thead>
<tr>
<th>Program</th>
<th>Indication</th>
<th>Early Clinical</th>
<th>Mid-clinical</th>
<th>Pivotal</th>
<th>Commercial Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamibarotene</td>
<td>(oral RARα agonist)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Newly diagnosed HR-MDS (w/aza))</td>
<td>Phase 3 SELECT-MDS-1</td>
<td></td>
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<tr>
<td></td>
<td>(Newly diagnosed unfit AML (w/ven+aza))</td>
<td>Phase 2 SELECT-AML-1</td>
<td></td>
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</tbody>
</table>

MARKET OPPORTUNITY

MYELODYSPLASTIC SYNDROME (MDS)

~21,000 Newly diagnosed HR-MDS patients in the US and EU annually.

PROJECTED MDS MARKET BY 2026:

~$3.3B

ACUTE MYELOID LEUKEMIA (AML)

~25,000 Newly diagnosed Unfit AML patients in the US and EU annually

PROJECTED NEWLY DIAGNOSED AML MARKET BY 2025:

~$6.6B

MULTIPLE VALUE-DRIVING MILESTONES

<table>
<thead>
<tr>
<th>Program in HR-MDS</th>
<th>Milestone</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamibarotene</td>
<td>Last patient enrolled for the primary endpoint analysis from SELECT-MDS-1 Phase 3 trial</td>
<td>1Q 24</td>
</tr>
<tr>
<td></td>
<td>Pivotal data for complete response (CR) from SELECT-MDS-1 Phase 3 trial by</td>
<td>mid 4Q 24</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program in AML</th>
<th>Milestone</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamibarotene</td>
<td>Initial data from randomized SELECT-AML-1 trial</td>
<td>4Q 23</td>
</tr>
<tr>
<td></td>
<td>Additional data from randomized SELECT-AML-1 trial</td>
<td>2024</td>
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</tbody>
</table>

1 Epidemiology projections from DRG Myelodysplastic Syndromes-Landscape & Forecast-Report 2020 and from DRG Acute Myelogenous Leukemia-Landscape & Forecast-Report 2020; 2 Evaluate Pharma market estimate includes all risk groups for MDS; 3 Market estimate includes all AML (fit and unfit)
**OUR PROGRAMS**

**MYELODYSPLASTIC SYNDROME (MDS)**
is a bone marrow disorder in which the bone marrow does not produce enough healthy blood cells. MDS is progressive in nature with a poor prognosis. Approved therapies for higher-risk MDS offer limited efficacy, underscoring the need for better treatment options.

**ACUTE MYELOID LEUKEMIA (AML)**
is very similar to MDS. AML is a cancer of the blood forming cells in the bone marrow. Approximately 1/3 of patients do not respond to the current standard of care, and nearly all relapse with poor prognosis for survival.

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**TAMIBAROTENE** (formerly SY-1425) is an oral selective retinoic acid receptor alpha (RARα) agonist that we are developing for genomically defined subsets of patients whose disease is characterized by the overexpression of the RARA gene. Approximately 30% of AML patients and 50% of MDS patients have RARA overexpression.

50% of MDS patients are positive for RARA overexpression¹

30% of AML patients are positive for RARA overexpression²

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**OUR CLINICAL TRIALS**

**SELECT-MDS-1 (Phase 3)**
Investigating tamibarotene in newly diagnosed HR-MDS patients with RARA overexpression
- Phase 3, randomized, double-blind, placebo-controlled study
- Evaluating tamibarotene in combination with azacitidine, compared with azacitidine alone
- Primary endpoint for potential approval: Complete response (CR) rate - 190 patients
- Key secondary endpoint of Overall Survival (OS) - approximately 550 patients
- Fast Track designation from the FDA

**SELECT-AML-1 (Phase 2)**
Investigating tamibarotene in newly diagnosed unfit AML patients with RARA overexpression
- Phase 2, randomized study in approximately 80 patients
- Evaluating tamibarotene in combination with venetoclax/azacitidine compared to venetoclax/azacitidine alone
- Primary endpoint for potential approval: Complete response (CR) rate
- Translational data support the potential of our RARA biomarker to enrich not only for patients likely to respond to tamibarotene, but to those potentially resistant to ven/aza

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**OTHER PROGRAMS**

**ACUTE PROMYELOCYTIC LEUKEMIA (APL)**
SY-2101 is a novel oral form of arsenic trioxide (ATO) previously in development for acute promyelocytic leukemia (APL), a subtype of acute myeloid leukemia (AML) that is caused by a fusion of the RARα and PML genes. We are currently investing our resources solely on advancing tamibarotene through late-stage clinical development to market, and therefore we are not investing in this program at this time.

**SY-5609**
SY-5609 is a highly selective and potent oral CDK7 inhibitor previously in clinical development for pancreatic cancer. We are currently seeking out-license opportunities for this program.

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**FORWARD LOOKING STATEMENTS**

This fact sheet contains forward-looking statements within the meaning of The Private Securities Litigation Reform Act of 1995 concerning Syros and other matters, such as Syros’ clinical development plans, the timing and impact of upcoming clinical data readouts, and the sufficiency of Syros’ capital resources to fund its operating expenses and capital expenditure requirements into 2025. These statements may discuss goals, intentions and expectations as to future plans, trends, events, results of operations or financial condition, or otherwise, based on management’s current beliefs, as well as assumptions made by, and information currently available to, management. Forward-looking statements generally include statements that are predictive in nature and depend upon or refer to future events or conditions, and include words such as “may,” “will,” “should,” “would,” “expect,” “anticipate,” “plan,” “likely,” “believe,” “estimate,” “project,” “intend,” and other similar expressions. Statements that are not historical facts are forward-looking statements. Forward-looking statements are based on current beliefs and assumptions that are subject to risks and uncertainties and are not guarantees of future performance. Actual results could differ materially from those contained in any forward-looking statement as a result of various factors, including, without limitation, Syros’ ability to: advance the development of its programs, including tamibarotene, under the timelines it projects in current and future clinical trials; demonstrate in any current and future clinical trials the requisite safety, efficacy and combinability of its drug candidates; sustain the response rates and durability of response seen to date with its drug candidates; successfully develop a companion diagnostic test to identify patients with the RARA biomarker; obtain and maintain patent protection for its drug candidates and the freedom to operate under third party intellectual property; obtain and maintain necessary regulatory approvals; identify, enter into and maintain collaboration agreements with third parties; manage competition; manage expenses; raise the substantial additional capital needed to achieve its business objectives; attract and retain qualified personnel; and successfully execute on its business strategies. The foregoing review of important factors that could cause actual events to differ from expectations should not be construed as exhaustive and should be read in conjunction with statements that are included herein and elsewhere, including the risk factors included in Syros’ public filings with the U.S. Securities and Exchange Commission. Except as required by applicable law, Syros undertakes no obligation to revise or update any forward-looking statement, or to make any other forward-looking statements, whether as a result of new information, future events or otherwise.

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¹Approximately 30% of AML patients and 50% of MDS patients have RARA overexpression.

²Approximately 30% of AML patients and 50% of MDS patients have RARA overexpression.