UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 8-K

CURRENT REPORT Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): August 21, 2023

SAGIMET BIOSCIENCES INC.

(Exact name of registrant as specified in its charter)

	Delaware (State or other jurisdiction	001-41742 (Commission	20-5991472 (I.R.S. Employer
	of incorporation)	File Number) Sagimet Biosciences Inc. 155 Bovet Road, Suite 303, San Mateo, California 94402 (Address of principal executive offices, including zip code (650) 561-8600 (Registrant's telephone number, including area code) Not Applicable ormer Name or Former Address, if Changed Since Last Re	
Check	the appropriate box below if the Form 8-K filing is intended to simultaneously	satisfy the filing obligation of the registrant under any of the	following provisions:
	Written communications pursuant to Rule 425 under the Securities Act (17 C		
	Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFF	R 240.14a-12)	
	Pre-commencement communications pursuant to Rule 14d-2(b) under the Ex	xchange Act (17 CFR 240.14d-2(b))	
	Pre-commencement communications pursuant to Rule 13e-4(c) under the Ex	schange Act (17 CFR 240.13e-4(c))	
Securi	ties registered pursuant to Section 12(b) of the Act:		
Indica	Title of each class Series A Common Stock, \$0.0001 par value per share te by check mark whether the registrant is an emerging growth company as defi	Trade Symbol(\$) SGMT ined in Rule 405 of the Securities Act of 1933 (\$ 230.405 of the	Name of each exchange on which registered The Nasdaq Global Market ais chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this
chapte	r).		
Emerg	ing growth company ⊠		
	merging growth company, indicate by check mark if the registrant has elected n change $\operatorname{Act}.$	ot to use the extended transition period for complying with an	y new or revised financial accounting standards provided pursuant to Section 13(a) of

Item 2.02 **Results of Operations and Financial Condition**

On August 21, 2023, Sagimet Biosciences Inc. (the "Company") issued a press release announcing its financial results for the second quarter ended June 30, 2023. A copy of the press release is attached as Exhibit 99.1 to this Current Report on Form 8-K and is incorporated herein by reference.

On August 21, 2023, the Company updated information reflected in a slide presentation, which is attached as Exhibit 99.2 to this Current Report on Form 8-K and is incorporated herein by reference. Representatives of the Company will use the updated presentation in various meetings with investors from time to time.

The information in Items 2.02 and 7.01 of this Current Report on Form 8-K, including the information set forth in Exhibits 99.1 and 99.2, is being furnished and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), nor shall Exhibits 99.1 and 99.2 filed herewith be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as shall be expressly set forth by specific reference in such a filing.

Item 9.01 Financial Statements and Exhibits

(d) Exhibits

Exhibit No. Document

99.1 99.2 104 Press Release of Sagimet Biosciences Inc., dated August 21, 2023.

Investor Presentation of Sagimet Biosciences Inc., dated August 21, 2023.

Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Sagimet Biosciences Inc.

Date: August 21, 2023

By: /s/ David Happel
David Happel
President and Chief Executive Officer



Sagimet Biosciences Reports Second Quarter 2023 Financial Results and Provides Corporate Updates

Completed upsized initial public offering raising \$96.4 million in gross proceeds

Presented positive data at EASL Congress 2023 from the planned interim readout of the Phase 2b FASCINATE-2 trial in NASH showing denifanstat was well-tolerated and met week 26 liver fat response endpoint

On track to report topline week 52 liver biopsy results from Phase 2b FASCINATE-2 trial in the first quarter of 2024

Implemented leadership changes with Tony Rimac assuming the position of Chief Financial Officer and Liz Rozek joining as General Counsel & Chief Compliance Officer

San Mateo, Calif., August 21, 2023 – Sagimet Biosciences Inc. (Nasdaq: SGMT), a clinical-stage biopharmaceutical company developing novel therapeutics targeting dysfunctional metabolic pathways, today reported financial results for the second quarter ended June 30, 2023, and provided recent corporate updates.

"Sagimet has entered a new era as a public company, and I am proud of our team for the successful completion of our IPO and the continued advancement of denifanstat through clinical development in NASH," said David Happel, Chief Executive Officer of Sagimet. "At EASL, we presented statistically significant results from the planned interim readout of the Phase 2b FASCINATE-2 trial of denifanstat in NASH, and we look forward to announcing the week 52 biopsy results in the first quarter of next year."

Recent Corporate Highlights

- · On July 18, 2023, Sagimet closed an upsized IPO of Series A common stock, at a public offering price of \$16.00 per share. Including shares issued pursuant to the exercise of the underwriters' option, the Company issued 6,026,772 shares of Series A common stock, and received gross proceeds of approximately \$96.4 million before deducting underwriting discounts and commissions and other offering expenses payable by Sagimet.
- · In June, Sagimet presented planned interim data at the EASL Congress showing that denifanstat was well-tolerated and met the liver fat response endpoint in the Phase 2b FASCINATE-2 trial in biopsy confirmed F2-F3 NASH patients. 67% of treated patients achieved ≥30% reductions in liver fat at week 26 compared to 18% for placebo (p<0.001) as assessed by MRI-PDFF.

- · In May 2023, Sagimet's license partner for China, Ascletis Bioscience (Ascletis), announced Phase 2 topline results for denifanstat in acne vulgaris, reporting a statistically significant 61.3% reduction in total lesion count in patients treated with once daily, 50mg of denifanstat for 12 weeks, compared to a 34.2% reduction with placebo. Ascletis reported a statistically significant 65.0% reduction in inflammatory lesion count at 50 mg denifanstat compared to a 31.4% reduction with placebo.
- · In April, Sagimet appointed Tony Rimac as Chief Operating Officer and Liz Rozek as General Counsel & Chief Compliance Officer. In August, following the departure of Dennis Hom, Mr. Rimac was appointed as Chief Financial Officer.

Anticipated Upcoming Milestones

- The FASCINATE-2 Phase 2b clinical trial for denifanstat in liver biopsy-confirmed F2-F3 NASH patients is fully enrolled with biopsy results expected in the first quarter of 2024.
- · Sagimet expects to report Phase 1 clinical trial results that characterize the pharmacokinetic profile of denifanstat in patients with impaired hepatic function in the first quarter of 2024.

Financial Results for the Three Months Ended June 30, 2023

- Cash and cash equivalents for the second quarter ended June 30, 2023 were \$18.5 million as of June 30, 2023. The subsequent IPO raised \$86.2 million in net proceeds. Based on its operating plan, management expects the combined cash balance to fund operations into the first quarter of 2025.
- Research and development (R&D) expense for the second quarter ended June 30, 2023 was \$4.7 million compared to \$6.4 million for the second quarter of 2022. For the six months ended June 30, 2023, R&D expense was \$9.2 million compared to \$12.2 million for the same period in the prior year. The decrease for both periods was primarily due to a decrease in clinical trial costs for the FASCINATE-2 Phase 2b trial as patients progressed through the trial.
- General and administrative (G&A) expense for the second quarter ended June 30, 2023 was \$2.4 million compared to \$0.9 million for the same period in 2022. G&A expense for the six months ended June 30, 2023 was \$4.7 million compared to \$3.7 million for the same period in the prior year. The increase for both periods was primarily due to an increase in stock-based compensation expense and professional services related to Sagimet's initial public offering.
- Net loss for the second quarter ended June 30, 2023 was \$6.8 million compared to a net loss of \$7.1 million for the second quarter of 2022. The net loss for the six months ended June 30, 2023 totaled \$13.4 million compared to \$15.8 million for the same period in 2022.

About Sagimet Biosciences

Sagimet is a clinical-stage biopharmaceutical company developing novel therapeutics called fatty acid synthase (FASN) inhibitors that target dysfunctional metabolic pathways in diseases resulting from the overproduction of the fatty acid, palmitate. Sagimet's lead drug candidate, denifanstat, is an oral, once-daily pill and selective FASN inhibitor in development for the treatment of NASH, for which there are no treatments currently approved in the United States or Europe. Denifanstat is currently being tested in FASCINATE-2, a Phase 2b clinical trial in NASH with liver biopsy as the primary endpoint. For additional information about Sagimet, please visit www.sagimet.com.

Forward-Looking Statements

This press release contains forward-looking statements within the meaning of, and made pursuant to the safe harbor provisions of, The Private Securities Litigation Reform Act of 1995. All statements contained in this press release, other than statements of historical facts or statements that relate to present facts or current conditions, including but not limited to, statements regarding; the expected timing of the presentation of data from ongoing clinical trials, Sagimet's clinical development plans and related anticipated development milestones, Sagimet's cash and financial resources and expected cash runway. These statements involve known and unknown risks, uncertainties and other important factors that may cause Sagimet's actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. In some cases, these statements can be identified by terms such as "may," "might," "will," "should," "expect," "plan," "aim," "seek," "anticipate," "could," "intend," "target," "project," "continue" or "continue" or the negative of these terms or other similar expressions.

The forward-looking statements in this press release are only predictions. Sagimet has based these forward-looking statements largely on its current expectations and projections about future events and financial trends that Sagimet believes may affect its business, financial condition and results of operations. These forward-looking statements speak only as of the date of this press release and are subject to a number of risks, uncertainties and assumptions, some of which are beyond Sagimet's control, including, among others: the clinical development and therapeutic potential of denifanstat or any other drug candidates Sagimet may develop; Sagimet's ability to advance drug candidates into and successfully complete clinical trials, including its FASCINATE-2 Phase 2b clinical trial; Sagimet's relationship with Ascletis, and the success of its development efforts for denifanstat; the accuracy of Sagimet's estimates regarding its capital requirements; and Sagimet's ability to maintain and successfully enforce adequate intellectual property protection. These and other risks and uncertainties are described more fully in the "Risk Factors" section of Sagimet's most recent filings with the Securities and Exchange Commission and available at www.sec.gov. You should not rely on these forward-looking statements as predictions of future events. The events and circumstances reflected in these forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Moreover, Sagimet operates in a dynamic industry and economy. New risk factors and uncertainties may emerge from time to time, and it is not possible for management to predict all risk factors and uncertainties that Sagimet may face. Except as required by applicable law, Sagimet does 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.

Contact:

Robert Uhl Managing Director, ICR Westwicke 858.356.5932 robert.uhl@westwicke.com

SAGIMET BIOSCIENCES INC.

CONDENSED STATEMENTS OF OPERATIONS AND COMPREHENSIVE LOSS

(Unaudited)

(in thousands, except for share and per share amounts) $\,$

	Three Months Ended June 30,			Six Months Ended June 30,				
	2023 2022		2022	2023			2022	
Operating expenses:								
Research and development	\$	4,676	\$	6,371	\$	9,163	\$	12,234
General and administrative		2,381		867		4,659		3,747
Total operating expenses		7,057		7,238		13,822		15,981
Loss from operations		(7,057)		(7,238)		(13,822)		(15,981)
Other income (expense), net:								
Change in fair value of redeemable convertible preferred stock warrants		1		-		(1)		2
Interest income and other		271		136		451		142
Total other income, net		272		136		450		144
Net loss	\$	(6,785)	\$	(7,102)	\$	(13,372)	\$	(15,837)
Comprehensive loss	\$	(6,772)	\$	(7,208)	\$	(13,288)	\$	(15,943)
Net loss per share attributable to common stockholders, basic and diluted	\$	(35.80)	\$	(38.37)	\$	(71.39)	\$	(85.80)
Weighted-average shares outstanding used in computing net loss per share attributable to common stockholders, basic and diluted		189,520		185,084		187,314		184,589

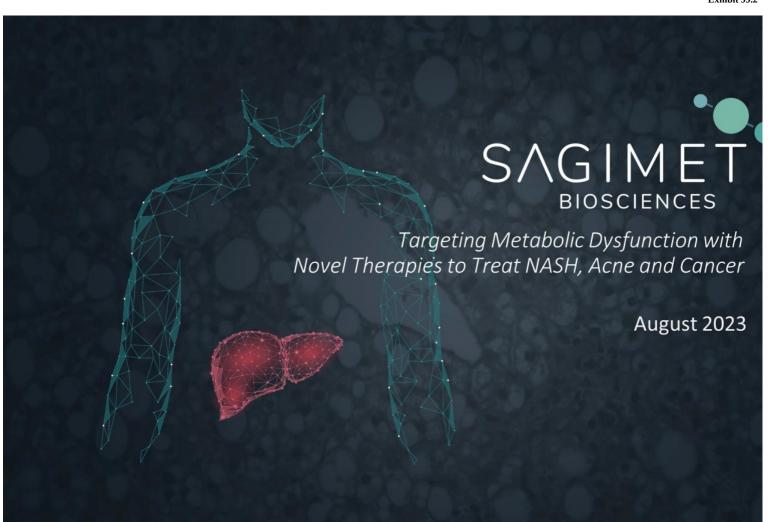
SAGIMET BIOSCIENCES INC.

CONDENSED BALANCE SHEETS

(Unaudited)

(in thousands, except for share and per share amounts)

	As of	As of	
	June 30,	December 31,	
	2023	2022	
Cash, cash equivalents and short-term investments	\$ 18,508	\$ 32,345	
Total assets	21,498	33,031	
Current liabilities	5,287	5,279	
Noncurrent liabilities	5	82	
Redeemable convertible preferred stock	214,620	214,620	
Stockholders' deficit	(198,414	(186,950)	
Total liabilities, redeemable preferred stock and stockholders' deficit	\$ 21,498	\$ 33,031	



Forward Looking Statements

This presentation contains forward-looking statements within the meaning of, and made pursuant to the safe ha of, The Private Securities Litigation Reform Act of 1995. All statements contained in this document, other than st historical facts or statements that relate to present facts or current conditions, including but not limited to, state possible or assumed future results of operations, business strategies, research and development plans, regulatoo market opportunity, competitive position and potential growth opportunities are forward-looking statements. To involve known and unknown risks, uncertainties and other important factors that may cause our actual results, pachievements to be materially different from any future results, performance or achievements expressed or important forward-looking statements. In some cases, you can identify forward-looking statements by terms such as "may," "would," "expect," "plan," "anticipate," "could," "intend," "target," "project," "believe," "estimate," "predict," "po "continue" or the negative of these terms or other similar expressions. The forward-looking statements in this pronly predictions. These forward-looking statements speak only as of the date of this presentation and are subject risks, uncertainties and assumptions, some of which cannot be predicted or quantified and some of which are becontrol, including, among others: the clinical development and therapeutic potential of denifanstat or any other we may develop; our ability to advance drug candidates into and successfully complete clinical trials, including on Phase 2b clinical trials, our relationship with Ascletis, and the success of its development efforts for denifanstat; to our estimates regarding our capital requirements; and our ability to maintain and successfully enforce adequate property protection. These and other risks and uncertainties are described more fully in the "Risk Factors" section recent filings with the Securities and Exchange Commission and available at

Proven Team with Development and Commercialization Experience Hepatology, Metabolic Disease and Oncology

(3)	Dave Happel President & CEO	 Cognoa: President & CEO Chrono Therapeutics: President & CEO Senior executive and commercial roles at Horizon, Raptor, Dynavax, Chiron M.B.A. – Indiana State University; B.A. chemistry – Indiana University 	HOR
	George Kemble Executive Chairman	 AstraZeneca (formerly MedImmune, Aviron): SVP research for biologics and general manager of California operations, VP vaccine research & development for vaccines Ph.D. – Stanford University, dept of microbiology & immunology 	AstraZene
	Eduardo Martins CMO	 Abbvie (formerly Allergan), Eiger BioPharmaceuticals, Gilead, Genentech, Dynavax, Intermune, SciClone D.Phil. – University of Oxford M.D. – Federal University of Rio de Janeiro, Brazil 	abbv Genen
	Anthony Rimac CFO	 Cognoa, ESCAPE Bio, Chrono Therapeutics, Aldea Pharmaceuticals, Adamas Pharmaceuticals, Aerovance M.B.A. – Santa Clara University; B.A. – University of California Santa Barbara 	cogn
	Elizabeth Rozek General Counsel and CCO	 Cognoa, Basilea Pharmaceutica, US Department of Justice J.D. – University of California Berkeley M.A. – University of California San Diego B.A. – Brown University 	cogn © Jus

Sagimet Investment Highlights

Critical role of FASN enzyme in NASH

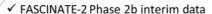
- ✓ Key enzyme in de novo lipogenesis responsible for excess liver fat in NASH
- ✓ FASN inhibition directly improves the 3 key drivers of NASH – liver fat, inflammation, fibrosis
- ✓ Differentiated MOA to treat growing underserved patient population

Precision medicine is key differentiator

- ✓ Blood test confirms drug
- Predictive biomarkers identified responders
- Opportunity to personali optimize outcomes







- Statistically significant improvements in key biomarkers of NASH: liver fat, inflammation, fibrosis
- Results consistent with Phase 2a study
- Strengthen belief in Phase 2b liver biopsy results expected in 1Q 2024

Strong rationale for FASN in acne and cancer

Acne

- ✓ Clinical proof of concept esta
- Positive Phase 2 topline re May 2023 by Ascletis

Cancer

- ✓ Clinical proof of concept esta
- Phase 3 rGBM trial enrollne
 expected 3Q23 (Ascletis)

Strong financial position

- ✓ Upsized IPO completed in Jul million of gross proceeds
- Cash and equivalents expected operations through into the fill

Denifanstat: FASN inhibitor with compelling clinical data



Denifanstat Pipeline of Multiple Indications and Clinical Miles⁻



^{*} Trials conducted in China by Ascletis, who has licensed development and commercialization rights to all indications in Greater China

NASH: A Burgeoning Epidemic

Patients in 20161

United States

85.3 million

17.3 million



1.4 million compensated and decompensated

11 thousand annual cases among NAFLD population







NAFL non-alcoholic fatty liver

NASH non-alcoholic steatohepatitis

NASH mod-adv fibrosis

Cirrhosis F4

Hepatocellular carcinoma

Disease challenges

- No approved drugs in U.S. or Europe
- Complex disease, heterogeneous patient population
- Improving regulatory clarity, but liver biopsy still required

Drug development challenges

- Many molecules moved forward on weak mechanism and data
- Inappropriate biomarkers for mechanism that did not translate to clinical benefit
- Safety: triglyceride elevations, LDL elevations, liver injury

Denifans

- Designed for on dosing
- Rigorous and de development sti
- ✓ Direct DNL inhib demonstrated ir
- ✓ Improvements c across biomarke
- ✓ Phase 2b fully-e biopsy results ex
- ✓ Precision medici to improve patie

DNL = de novo lipoge

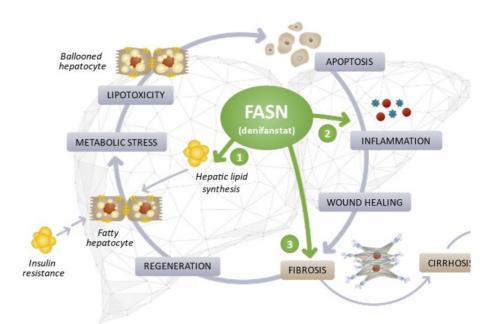
¹ Estes, et al. 2018; http://dx.doi.org/10.1016/j.jhep.2018.05.036



Denifanstat: Differentiated Mechanism Believed to Target Key Driver

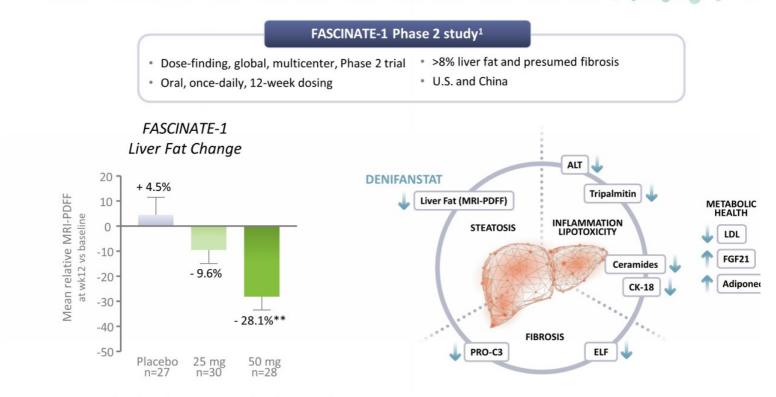
Denifanstat has independent mechanisms designed to:

- Block steatosis via inhibiting de novo lipogenesis in hepatocytes
- Reduce inflammation via preventing immune cell activation
- Blunt fibrosis via inhibiting stellate cell activation



Adapted from Wegermann et al, Clinical Liver Disease, Vol 11, No 4, April 2018, DOI: 10.1002/cld.709

Denifanstat Showed Dose-Dependent Reduction of Liver Fat in FASCINA Improved Key Drivers of NASH and Metabolic Health



¹Loomba et al, 2021 Gastroenterology. doi: 10.1053/j.gastro.2021.07.025

**p<0.005, Mean ±SEM. LSM difference versus placebo for liver fat.

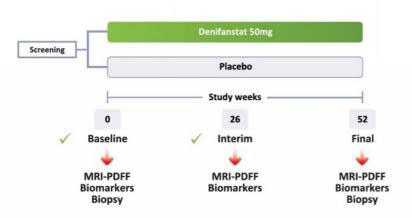
Denifanstat: Well Tolerated at 25/50mg Doses in FASCINATE-1

- No dose-related significant adverse events relative to placebo
- No serious AEs
- Majority of AEs were Grade 1; no Grade ≥3 drug-related AEs

		Cohort 1		Coho	Coho	
Treatment Emergent Adverse Event (TEAE) Classification	US Placebo N=31	US 25mg N=33	US 50 mg N=35	China Placebo N=9	China 50 mg N=21	US 75m N=1
Any TEAE	Gr 1: 12 (38.7%) Gr 2: 7 (22.6%)	Gr 1: 18 (54.5%) Gr 2: 7 (21.2%)	Gr 1: 12 (34.3%) Gr 2: 6 (17.1%)	Gr 1: 3 (33%) Gr 2: 2 (22%)	Gr 1: 11 (52%) Gr 2: 4 (19%) Gr 3: 2 (10%)	Gr 1: 3 (Gr 2: 6 (
TEAE leading to drug withdrawal	0	2 (6.1%)	0	0	0	4 (319
Treatment Emergent Serious Adverse Event (SAE)	0	0	0	0	0	0
Drug related TEAE	Gr 1: 3 (9.7%) Gr 2: 1 (3.2%)	Gr 1: 10 (30.3%) Gr 2: 2 (6.1%)	Gr 1: 9 (25.7%) Gr 2: 1 (2.9%)	0	Gr 1: 9 (43%) Gr 2: 4 (19%)	Gr 1: 1 (Gr 2: 6 (

Phase 2b Biopsy Trial: Measuring Histological Improvement

FASCINATE-2 Phase 2b trial design



- Biopsy confirmed F2-F3 NASH patients
- 52 weeks, 2:1 50mg or placebo, double-blind
- Fully enrolled: 168 patients in U.S., Canada, and Europe
- Prespecified interim analysis of the first 52 patients with MRI-PDFF >8%

Primary endpoints (biopsy)

- NAS ≥2 points improvement w/o worsenin OR resolution of NASH w/o worsening of fibro
 - Lead reader of liver biopsies: pa Pierre Bedossa MD. PhD.
- Safety

Secondary endpoints

- Improvement in liver fibrosis ≥1 stage wi worsening of NASH (Bx)
- Digital AI pathology
- Interim MRI-PDFF: absolute decrease, % from baseline, % pts ≥30% (responders)

Interim Analysis Cohort Represents Target Patient Population

FASCINATE-2 Phase 2b Interim Analysis Demographics							
Mean (SD)	Placebo (22)	Denifanstat (30)	Combined				
Age (years)	56.8 (9.4)	56.1 (12.4)	56.4 (11.1)				
Female/Male (%)	14 (63.6%) / 8 (36.4%)	17 (56.7%) / 13 (43.3%)	31 (59.6%) / 21 (40.4%)				
Not Hispanic or Latino	16 (72.7%)	24 (80.0%)	40 (76.9%)				
Weight (kg)	97.8 (21.9)	100.9 (21.2)	99.6 (21.4)				
Diabetes (% T2DM)	13 (59.1%)	21 (70.0%)	34 (65.4%)				
F2/F3 (%)	12 (54.5%) / 10 (45.5%)	12 (40.0%) / 18 (60.0%)	24 (46.2%) / 28 (53.8%)				
MRI-PDFF (%)	21.78 (5.46)	17.46 (6.36)	19.29 (6.32)				
Fibroscan (kPa)	10.67 (4.07)	12.29 (7.33)	11.56 (6.04)				
ALT (U/L)	69.77 (42.50)	57.14 (27.55)	62.70 (35.11)				
AST (U/L)	51.00 (29.87)	44.43 (22.65)	47.32 (26.00)				
LDL (mg/dL)	111.37 (40.6)	96.29 (50.27)	102.86 (46.4)				
ELF	9.70 (0.76)	9.73 (0.76)	9.72 (0.75)				
PRO-C3 cobas® (ng/mL)	35.72 (15.71)	32.54 (11.19)	33.91 (13.28)				

- Typical F2/F3 NAS
- Middle-aged
- · High % of diabete
- High liver fat by N
- Elevated liver enzinflammation
- Non-invasive marl consistent with F2

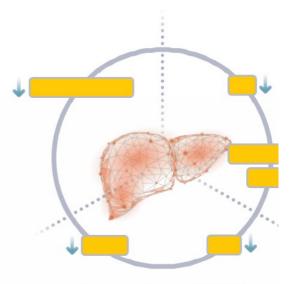
FASCINATE-2 Interim Results Consistent with Comprehensive Positiv Readouts from FASCINATE-1

 FASCINATE-2 interim analysis showed consistent improvements in key drivers of NASH as observed in FASCINATE-1

Mechanism	Biomarker
Steatosis	Liver fat (MRI-PDFF)
2 Inflammation/lipotoxicity	ALT, CK-18, ceramides
3 Fibrosis	PRO-C3, ELF

- Improvements observed in multiple biomarkers of
 metabolic health
 - LDL-cholesterol

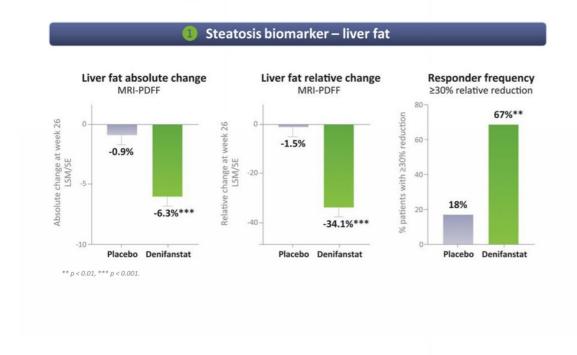
 - FGF-21



Biomarkers replicated in FASCINATE-2

Denifanstat Decreased Liver Fat

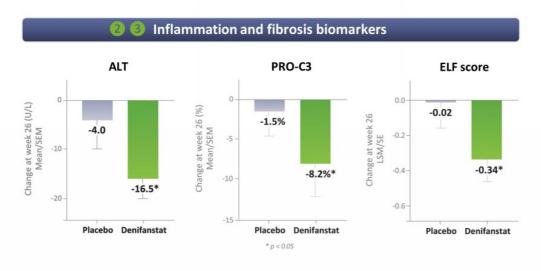
Responders Correlate with Liver Biopsy Improvement



Findings to

- Denifanstat industatistically signif reduction of liver
- 67% (p<0.001) N response rate
- About half of res decreased liver fa
- A relative reduct ≥30% by MRI-PD shown to correla biopsy response

Denifastat Decreased PRO-C3 and ELF – Suggests Fibrosis Red

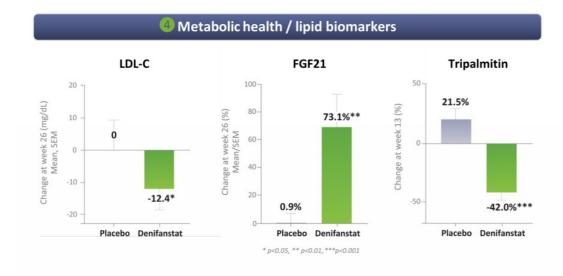


Other liver biomarkers consistent

Findings to

- ALT decrease sug decrease in inflat denifanstat
- PRO-C3 decrease decrease of liver denifanstat
- ELF score decrea decrease of liver denifanstat. ELF s prognostic value

Denifanstat Improved Markers of Cardiometabolic Health



Findings to

- LDL-cholesterol denifanstat may cardiovascular b
- FGF21 increase: may induce imp insulin sensitivit
- Tripalmitin decre denifanstat inhil and reduced pal synthesis

Denifanstat Passed Planned IDMC Safety Review in FASCINATE

Sagimet is blinded to data

- All randomized subjects: blinded data set including active and placebo
- Majority of AEs to date were Grade 1 or 2; no Grade ≥3 drug-related AEs
- A planned safety review of unblinded data from all 168 patients conducted by Independent Data Monitor

 no concerns

FASCINATE-2 Phase 2b - Blinded data set				
Treatment Emergent Adverse Event (TEAE) Classification	N=168 Number of Patients with Event at Stated Grade			
Any TEAE	Gr 1: 115 (68.5%) Gr 2: 69 (41.1%) Gr 3: 10 (6.0%) Gr 4: 1 (0.6%)			
TEAE leading to drug/placebo discontinuation	21			
Treatment Emergent Serious Adverse Event (SAE)	11 (all unrelated to study treatment)			
Drug/placebo-related TEAE	Gr 1: 52 (30.1%) Gr 2: 25 (14.9%)			

AE data as of 3 April 2023



Progression from Phase 2b to Phase 3

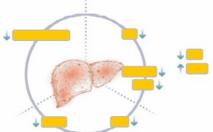
Phase 2b – baseline Fibrosis stage Phase 2b – 26 weeks Non-invasive interim Phase 2b – 52 weeks Histology

Fibrosis end

Interim cohort

F2 - 46.2%

F3 - 53.8%



Enrollment completed Sep 2022 Interim results released Nov 2022

Primary endpoints

- NAS ≥2 improvement w/o worsening of fibrosis; or NASH resolution w/o worsening of fibrosis
- Safety

Secondary endpoints

- Fibrosis ≥1 stage improvement w/o worsening of NASH
- Digital AI pathology

Biopsy results expected 1Q 2024

Expect to results in pathologidesign an Phase 3

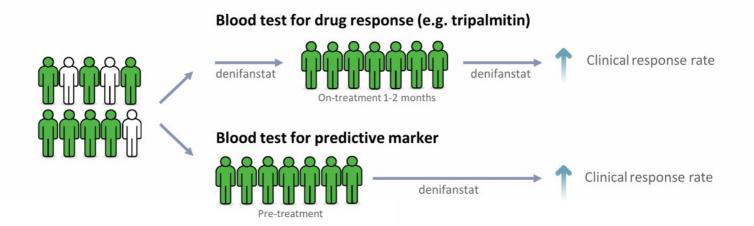
Startup ac

We Believe Denifanstat is Differentiated in the Evolving NASH Landso

Mechanism	FASN inhibitors	THRß agonists	FGF-21	GLP-1 agonists	PPAR agonists	ACC inhibitors	
Category	DNL pathway	Nuclear receptor	Growth factor	GLP-1	Nuclear receptor	DNL pathway	I
Route	Oral	Oral	Injectable	Injectable /	Oral	Oral	(
Status	Phase 2 ongoing	Phase 3 complete	Phase 2 complete	Phase 2 complete	Phase 3 ongoing	Phase 2 complete	1
Challenges	• Pending biopsy results	Selectivity for beta isoform critical to avoid potential heart and bone safety issues	 Injectable Nausea and diarrhea Potential neutralizing antibodies COGS 	 GI side effects including nausea Lack of fibrosis improvement to date 	Weight gain, edema, GI side effects, anemia	 Combinations only MOA causes triglyceride increases Lack of fibrosis improvement as monotherapy 	

Precision Medicine: Blood Tests May Lead to Improved Patient Outcome

- NASH is a multi-faceted disease and patients may benefit from being matched with optimal tre
- Two approaches using blood tests are undergoing further evaluation
 - Drug response: 1-2 months after taking drug, tripalmitin identifies patients responding to drug treatment
 - Predictive marker: before taking drug, signature of 6 blood metabolites enriches for responders¹



¹Signature has 6 metabolites: ursodeoxycholic acid, DL-2-aminocaprylic acid, sarcosine, glycoursodeoxycholic acid, D(-)-2-aminobutyric acid, PC(0-18:0/22:4). Accuracy 79%, PPV 88%, NPV 63%.

Strong Monotherapy Opportunity for Denifanstat in NASH

Expansion as backbone of combinations

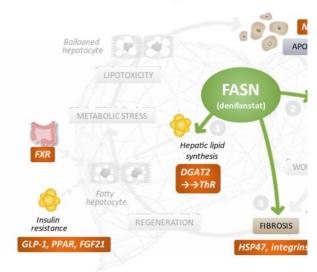
Denifanstat data support success as first line monotherapy

- ✓ Oral, once-daily tablet ideal for chronic administration
 - Tablets generally more affordable than complex biologics
- ✓ Potential to treat broad patient population
 - · Including those with thyroid challenges
- Novel mechanism that acts directly upon liver
- ✓ Encouraging safety profile to date

Broaden market opportunity through combinations with denifanstat as backbone

- Denifanstat's potential
 - ✓ Complementary to other mechanisms
 - ✓ Potential for fixed dose combinations with other oral medications
- Preclinical combination studies ongoing
 - NASH agents: anti-fibrotic, other metabolic agents
 - · Co-morbidities: diabetes and other cardiovascular agents

Illustrative potential combo mec



Additional Expansion Opportunities in NASH

Compensated cirrhotic patients (NASH F4)

- Denifanstat directly targets stellate cells
- · Hepatocytes continue to be functional, and patients frequently have increased liver fat
- Next steps
 - Characterize PK profile in patients with impaired hepatic function Phase 1 results in 1Q 24
 - Positive impact on fibrosis in FASCINATE-2
 - Phase 2b/3 trial in NASH-F4

Pediatric NASH

- 23% of children with NAFLD have NASH at the time of diagnosis
- Next steps
 - Compile safety data across all denifanstat studies in young adults including FASCINATE-2
 - Nonclinical toxicology study in juvenile animals plan to initiate in 2024
 - Phase 2 trial in pediatric NASH

85.3 million 17.3 million 5.7 million



Patients in 2016





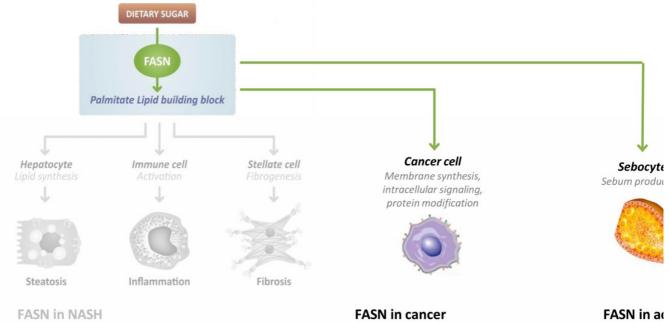




¹ Estes, et al. 2018; http://dx.doi.org/10.1016/j.jhep.2018.05.036



FASN Hyper-Activity Plays a Key Role in Multiple Diseases Beyond NA



- 1. Drives steatosis
- 2. Activates pro-inflammatory cells
- 3. Activates stellate cells leading to fibrosis
- 1. Supports tumor survival
- 2. Enables tumor proliferation
- 3. Establishes resistance to drugs
- 1. Sebum
- Sebum

DNL Pathway Plays a Role in the Pathogenesis of Acne

- Acne is associated with excess sebum production by sebocyte cells in the skin
- Acne resolution is associated with reduced sebum production
- Sebocytes upregulate and rely on DNL/FASN to make sebum
 - >80% of key sebum lipids such as palmitate and sapienic acid produced by DNL/FASN
- => FASN inhibition has potential therapeutic application

Phase 1 - sebum analysis by Sagimet

- Denifanstat inhibited lipogenesis in skin
- Dose-dependent
- Proof of mechanism

Phase 2 – acne



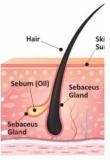
- · 12-week trial in moderate to severe acne
- 179 pts randomized to 25/50/75 mg denifanstat and placebo
- Endpoints: % change from baseline in lesion count and/or IGA score decreased by ≥ 2

Positive topline results announced May 2023

- Met primary and secondary endpoints
- Well-tolerated
- Sagimet evaluating clinical development plans for U.S./EU and other major markets



Lipid



Skin Without Acne

Esler et al., Sci. Transl. Med.11, eaau8465 (2019). Figure adapted from kidshealth.org

FASN is Integral to Tumor Cell Proliferation and Survival

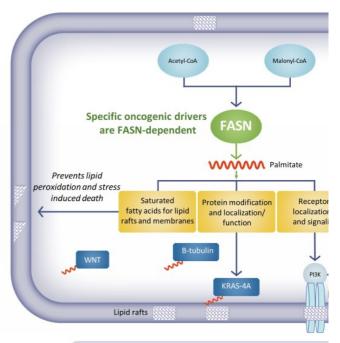
Reprogramed metabolism is one of the hallmarks of cancer

FASN-dependence

- Certain cancers are dependent on DNL/FASN for proliferation especially downstream of driver oncogenes
 - eg. KRASM in non-small cell lung cancer (NSCLC)
- Strategy -> exploit this vulnerability using FASN inhibition in the combination setting to cause death

Completed Phase 1 provides foundation

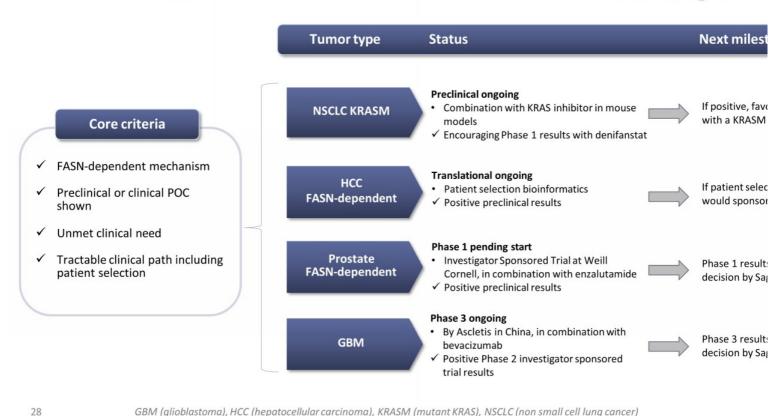
- 136 patients received denifanstat
- Heavily pretreated Phase 1 population
- Recommended Phase 2 dose defined
- Promising clinical activity consistent with proposed mechanism
 - KRASM NSCLC patients had significantly longer duration on study with denifanstat than KRASWT (p<0.02), and 91% KRASM had stable disease



Dietary fatty acids cannot compensa de novo synthesized palmitate

FASN-Dependent Tumor Types Identified that Meet Core Crite

Program focused on 4 selected tumor types



GBM (glioblastoma), HCC (hepatocellular carcinoma), KRASM (mutant KRAS), NSCLC (non small cell lung cancer)

Strong Financial Position and Intellectual Property Portfolio

Financial highlights Nasdaq: SGMT

- ✓ Upsized IPO completed in July 2023 raised \$96.4 million of gross proceeds
- ✓ Cash and equivalents expected to fund current operations into the first quarter of 2025

Strong patent estate

- ✓ Composition of matter for denifanstat: 2032
- √ Issued in all key commercial territories
- ✓ Opportunities to lengthen exclusivity via Hatch-Waxman and synthesis/formulation applications

Denifanstat Pipeline of Multiple Indications and Clinical Miles⁻



^{*} Trials conducted in China by Ascletis, who has licensed development and commercialization rights to all indications in Greater China