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): September 6, 2022

RAPT Therapeutics, Inc.
(Exact name of Registrant as Specified in Its Charter)

Delaware	**001-38997**	**47-3313701**
(State or Other Jurisdiction of Incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**

561 Eccles Avenue **South San Francisco, California** **(Address of Principal Executive Offices)**	**94080** **(Zip Code)**

Registrant's Telephone Number, Including Area Code: (650) 489-9000

(Former Name or Former Address, if Changed Since Last Report)

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 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common Stock, $0.0001 par value per share	**RAPT**	**The NASDAQ Stock Market LLC**

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).

Emerging growth company ☒

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 8.01 Other Events.

RAPT Therapeutics, Inc. (the "Company") is filing the investor presentation slides (the "Corporate Presentation") attached as Exhibit 99.1 to this Current Report on Form 8-K, which the Company may use from time to time in conversations with investors and analysts.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

Exhibit Number	Exhibit Description
99.1	Corporate Presentation.
104	Cover Page Interactive Data File (embedded within the Inline XBRL document)

SIGNATURES

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 thereunto duly authorized.

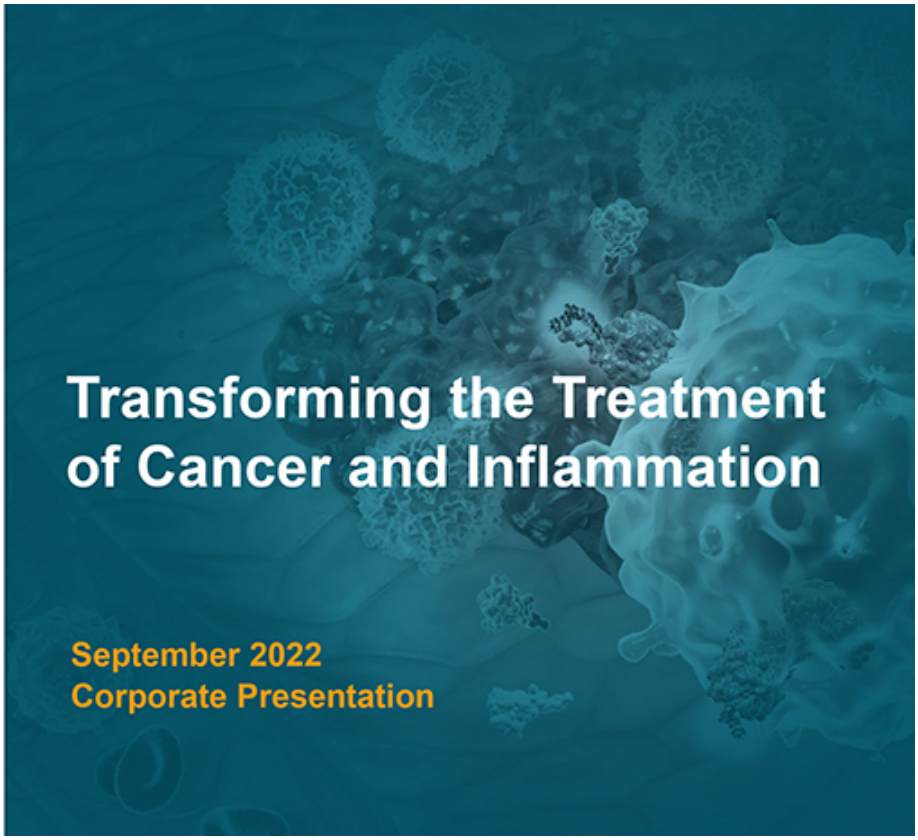
RAPT Therapeutics, Inc.

Date: September 6, 2022

By: /s/ Rodney Young
Rodney Young
Chief Financial Officer

Exhibit 99.1

RAPT THERAPEUTICS



Legal Disclaimers

Statements in this Presentation that are not statements of historical fact are forward-looking statements. Such forward-looking statements include, without limitation, statements regarding RAPT Therapeutics, Inc.'s (the "Company," "we," or "us") research and clinical development plans; current and future drug candidates; business strategy and plans; regulatory pathways; and our ability to complete certain milestones. Words such as "believe," "anticipate," "plan," "expect," "will," "may," "upcoming," "milestone," "potential," "target" or the negative of these terms or similar expressions are intended to identify forward-looking statements, though not all forward-looking statements necessarily contain these identifying words. These forward-looking statements are based on the current beliefs of the Company's management with respect to future events and trends and are subject to known and unknown risks and uncertainties, including those described in the "Risk Factors" section of our most recent Form 10-Q filed with the Securities and Exchange Commission, and any current and periodic reports filed thereafter, that may cause our actual performance or achievements to be materially different from any future performance or achievements expressed or implied by the forward-looking statements in this Presentation. These forward-looking statements should not be taken as forecasts or promises nor should they be taken as implying any indication, assurance or guarantee that any assumptions on which such forward-looking statements have been made are correct or exhaustive or, in the case of such assumptions, fully stated in the Presentation. You are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date this Presentation is given. Although we believe that the beliefs and assumptions reflected in the forward-looking statements are reasonable, we cannot guarantee future performance or achievements. Except as required by law, we undertake no obligation to update publicly any forward-looking statements for any reason after the date of this Presentation.

This Presentation discusses drug candidates that are under clinical study and which have not yet been approved for marketing by the U.S. Food and Drug Administration. No representation is made as to the safety or effectiveness of any drug candidates for any use for which such drug candidates are being studied.

RAPT THERAPEUTICS

Oral Drugs Targeting Critical Immune Drivers of Disease

- Proprietary discovery engine
- Diversified pipeline
- Large market opportunities
- Clinically de-risked assets
- Strategic collaborations

CLINICAL

RPT193 (Inflammation):

- Oral agent targets inflammatory Th2 cells
- Phase 1b in AD: efficacy on all key exploratory endpoints with excellent safety and tolerability
- Phase 2b in AD ongoing
- Plan to initiate Phase 2a in Asthma Q1 2023

FLX475 (Oncology): MERCK Hanmi

- Selectively targets immunosuppressive tumor T_{reg}
- PoC in Phase 2 with monotherapy and combo activity observed

DISCOVERY

HPK1 (Oncology)

Other Targets

RAPT THERAPEUTICS

Proprietary Drug Discovery and Development Engine

R **Rapid**
- Drug discovery
- Clinical development to POC

A **Analytics**
- Interrogating clinically-relevant big datasets to identify targets and biomarkers

P **Patient selection**
- Driven by data to improve chances of clinical success

T **Targeting**
- Critical immune drivers of cancer and inflammation

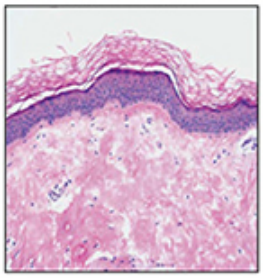
RAPT THERAPEUTICS


RPT193: CCR4 Antagonist
for Inflammatory Diseases

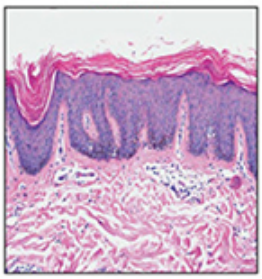
RPT193: Oral CCR4 Antagonist for Inflammatory Diseases

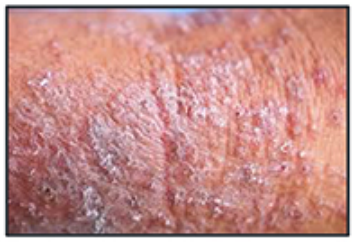
- Highly potent and selective once-daily oral CCR4 antagonist designed to safely reduce inflammation in broad range of allergic disorders
- Phase 1b trial demonstrated clear benefit in moderate-to-severe AD with favorable safety and tolerability - no laboratory safety monitoring or black box warning expected
- Issued U.S. composition of matter patent with coverage through 2039
- Phase 2b trial in AD ongoing and plan to initiate Phase 2a trial in asthma in Q1 2023

Normal Human Skin

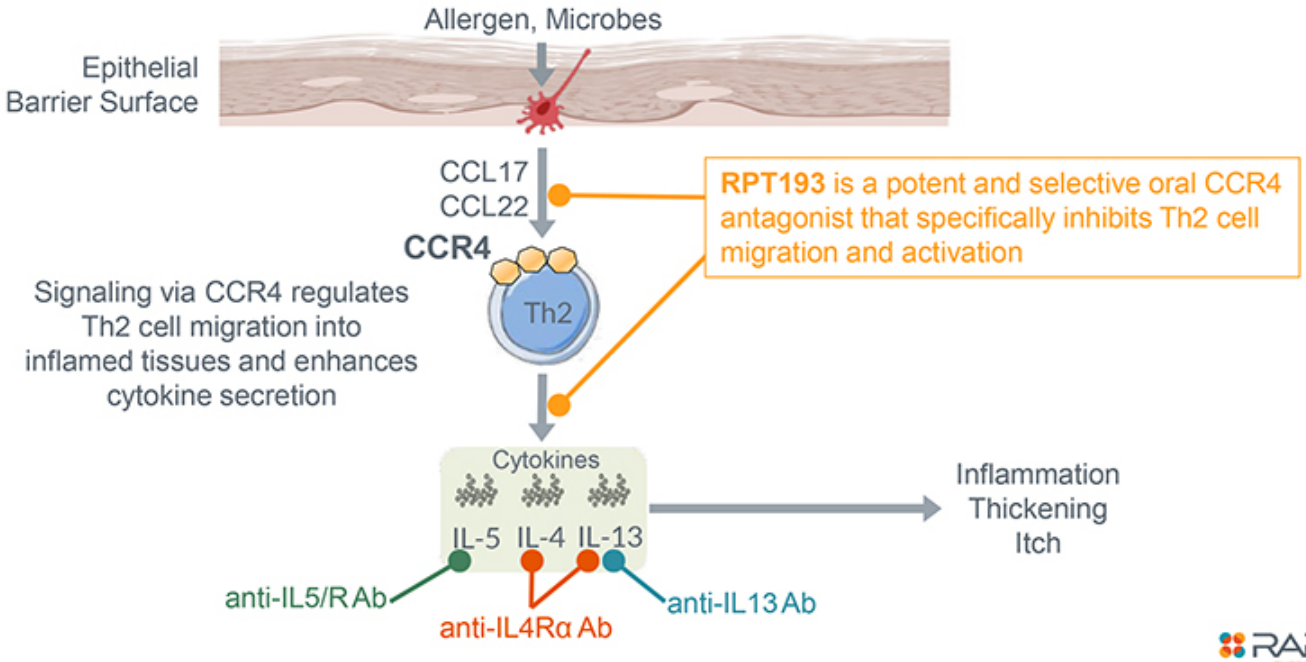


AD Lesional Skin





RPT193 Targets Th2 Cells: Key Drivers of Inflammation in Atopic Dermatitis, Asthma and Other Diseases



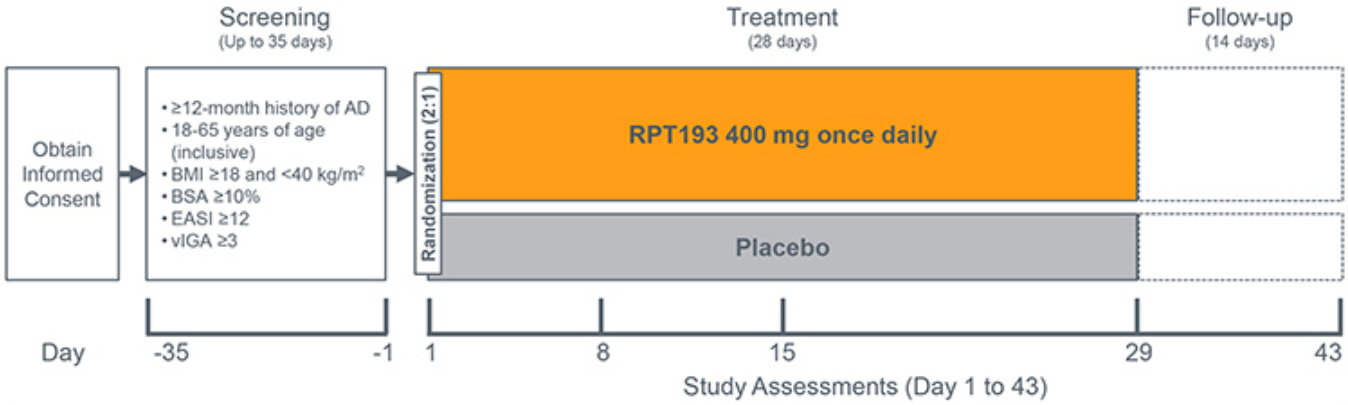
Atopic Dermatitis and Asthma Represent Major Markets

- **Atopic Dermatitis (AD)**
  - Common disease affecting ~19M adults and ~10M children in the US
  - $24B projected market by 2029*
- **Asthma**
  - Asthma affects ~15M adults and children in the US
  - $21B projected market by 2029*
- **High unmet need**: a well-tolerated, safe and effective oral drug that does not require laboratory safety monitoring
- **RPT193 has the potential to address this unmet need**

* Decision Resources Guide; EU, US, and Japan market

RAPT THERAPEUTICS

Phase 1b Trial Explored RPT193 Activity in Patients with Moderate-to-Severe Atopic Dermatitis



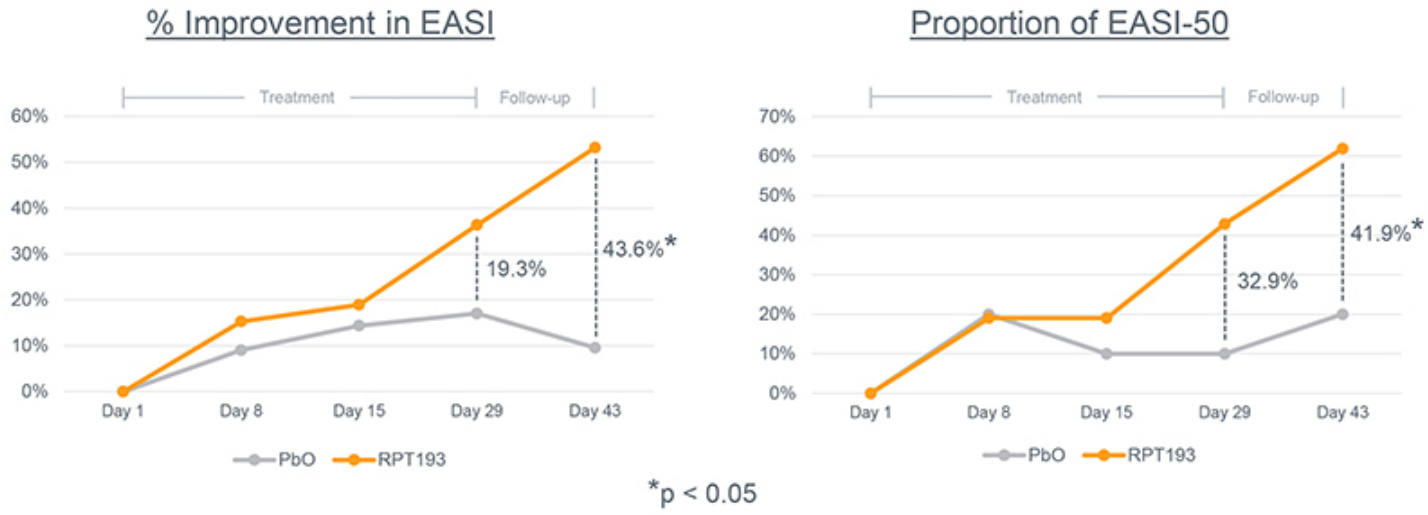
- Enrolled 31 patients into a double-blind, randomized trial with 2:1 allocation of RPT193 to placebo
- Monotherapy study: steroid and immunosuppressant washout period; rescue steroids not permitted through Day 43
- Trial was not powered for any specific endpoint
- Exploratory endpoints include: EASI, Pruritis Numerical Rating Scale (NRS), SCORAD and vIGA
- Data presented are from the Intent to Treat dataset

Phase 1b Baseline Demographics and Disease Characteristics

	Placebo	RPT193
N	10	21
Age, Mean (Range)	35.8 (22-64)	41.0 (19-63)
Female, n (%)	4 (40.0%)	12 (57.1%)
Baseline Characteristics		
EASI, Mean (Range)	21.07 (13.6-45.5)	18.49 (12-30)
BSA, Mean (Range)	24.5 (10-61)	23.3 (11-55)
vIGA 3, n (%)	8 (80.0%)	18 (85.7%)
Peak NRS, Mean (Range)	7.3 (3-10)	6.9 (3-10)
Peak NRS ≥4, n (%)	9 (90.0%)	20 (95.2%)

RAPT THERAPEUTICS

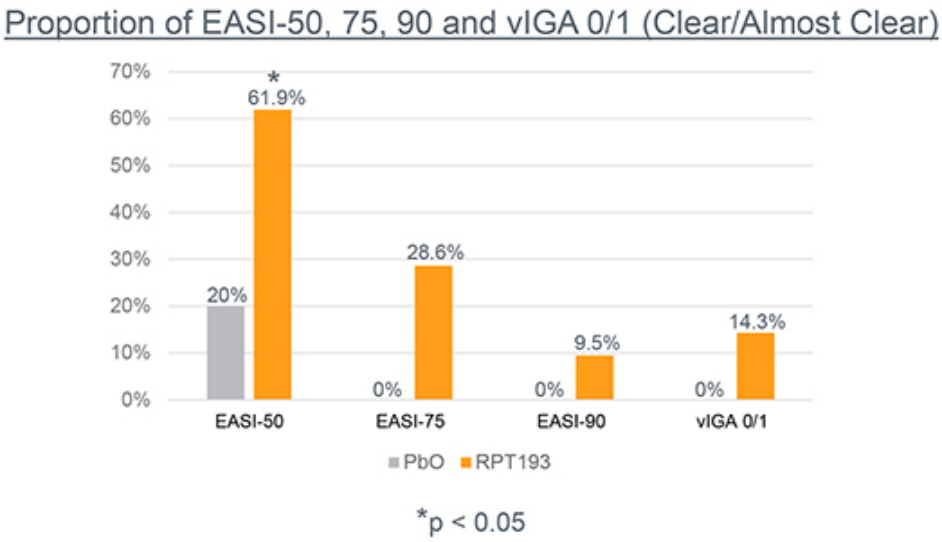
RPT193 Differentiated from Placebo for EASI and EASI-50 at Day 29 with Further Improvement at Day 43



*p < 0.05

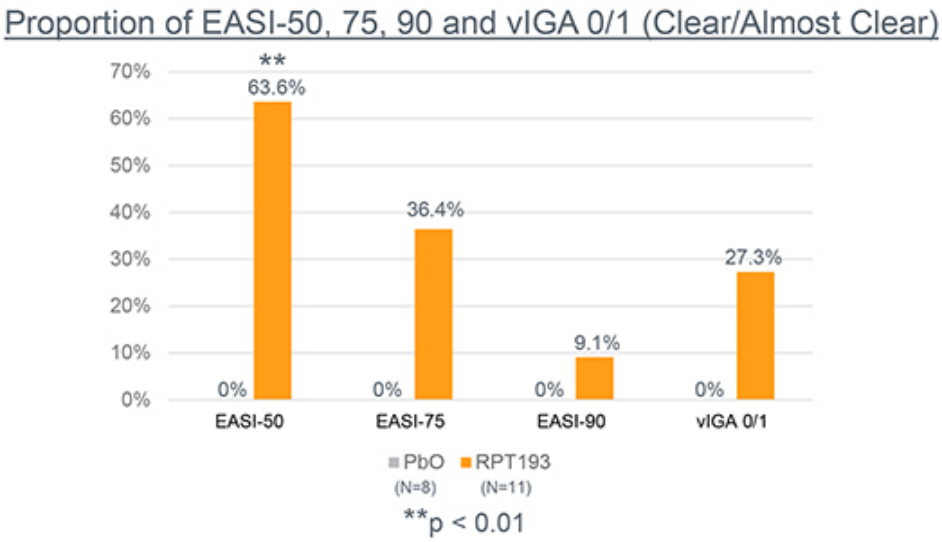
RAPT THERAPEUTICS

RPT193 Differentiated from Placebo on EASI-75, 90 and vIGA 0/1 at Day 43

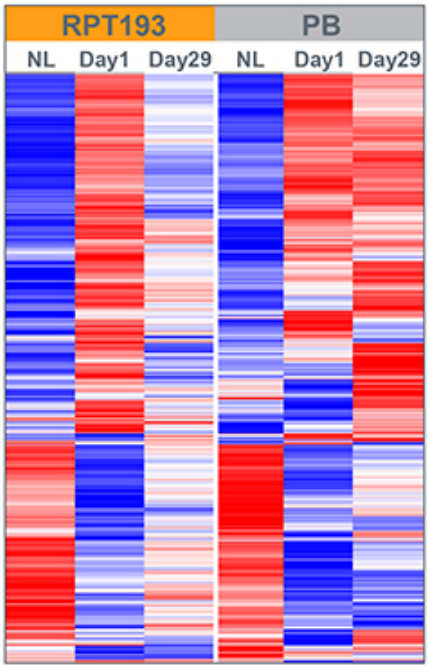


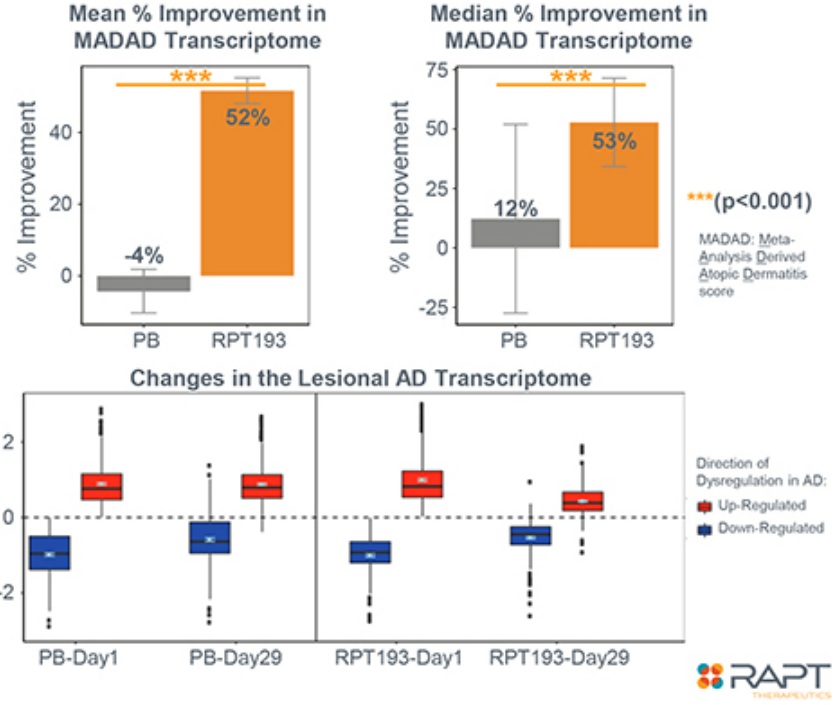
*p < 0.05

RPT193 Differentiated from Placebo on EASI-75, 90 and vIGA 0/1 at Day 43 in Patients with Baseline EASI ≥16



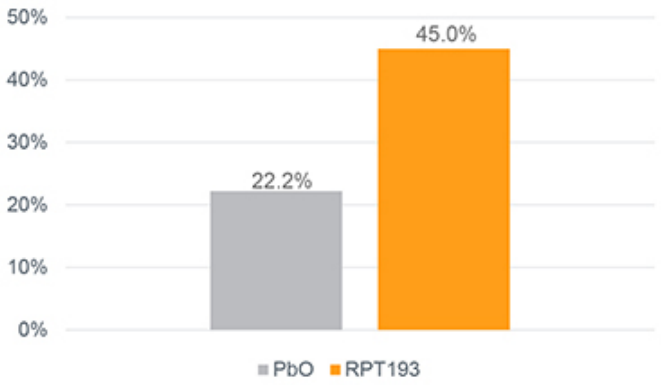
RPT193 Demonstrated Significant Improvement in AD-Associated Gene Signatures in the Skin





RPT193 Demonstrated Improvement in Itch and Sleep

Proportion of NRS-4†



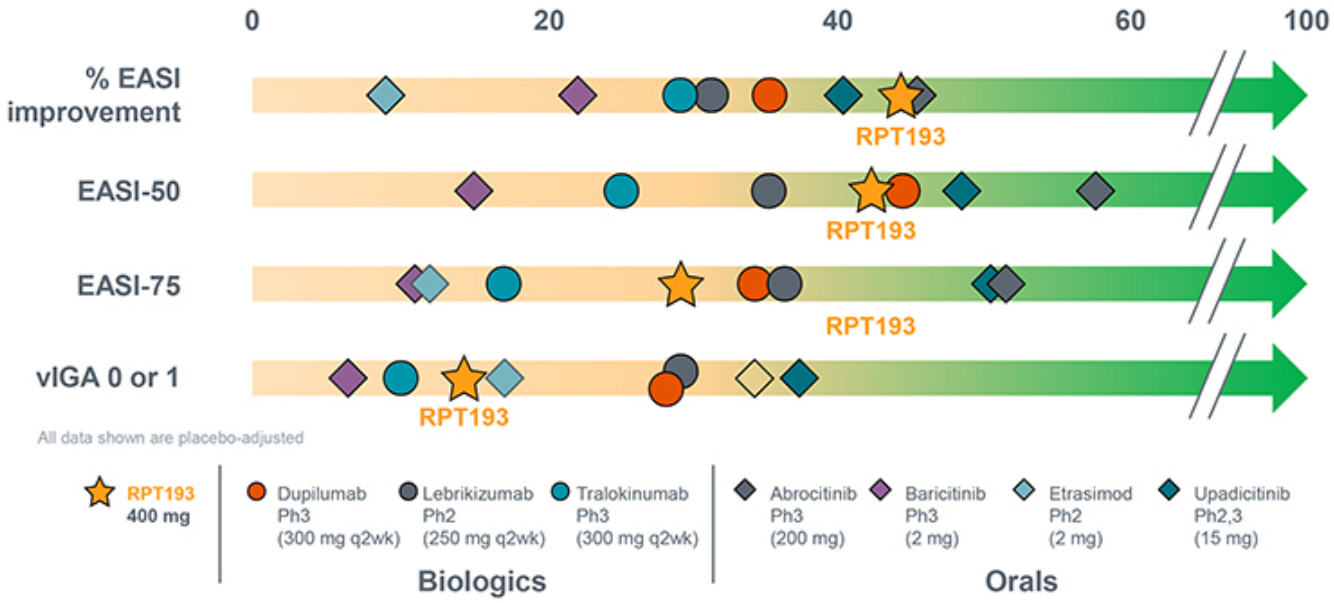
†At least a 4-point improvement among patients with a baseline pruritus NRS ≥4

% Change in Subjective SCORAD (Sleep Loss + Pruritus)

*p < 0.05

RAPT THERAPEUTICS

RPT193 6-Week Efficacy Compared to Other Drugs at 12-16 Weeks*



All data shown are placebo-adjusted

RPT193 400 mg

Biologics:
- Dupilumab Ph3 (300 mg q2wk)
- Lebrikizumab Ph2 (250 mg q2wk)
- Tralokinumab Ph3 (300 mg q2wk)

Orals:
- Abrocitinib Ph3 (200 mg)
- Baricitinib Ph3 (2 mg)
- Etrasimod Ph2 (2 mg)
- Upadicitinib Ph2,3 (15 mg)

* Comparisons are based on published data and relative properties of other agents and do not reflect a head-to-head comparative study or clinical trial

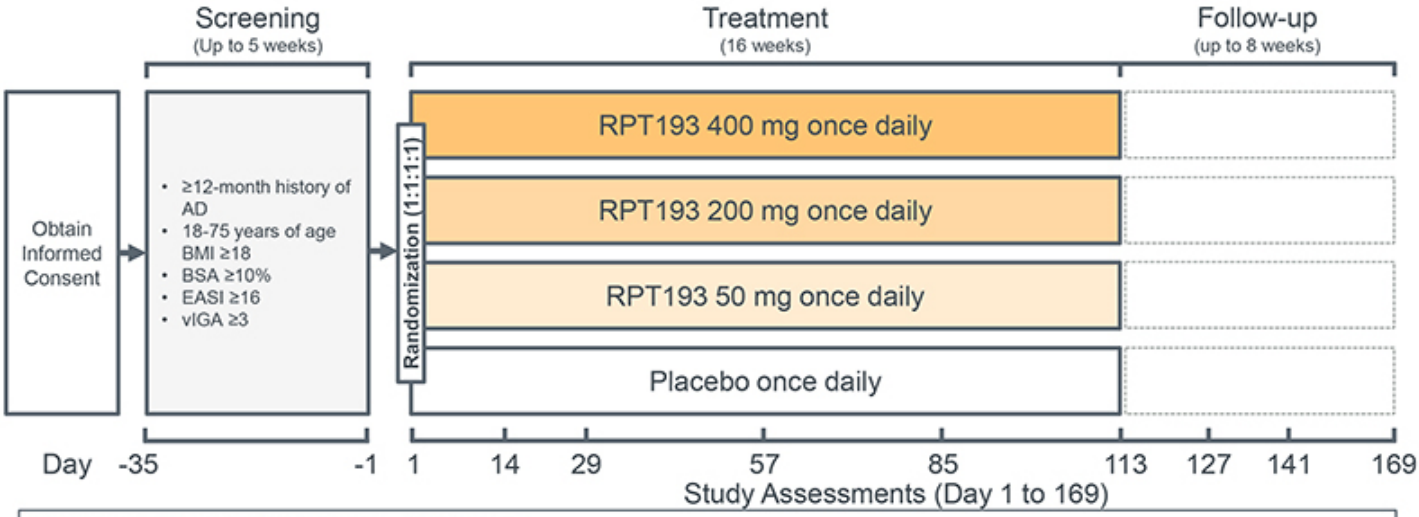
RAPT THERAPEUTICS

Phase 1b Safety

- No SAEs reported
- All AEs reported were mild or moderate in intensity
- No clinically significant safety laboratory abnormalities observed
- Overall safety profile to date suggests a well-tolerated oral drug that should not require laboratory safety monitoring

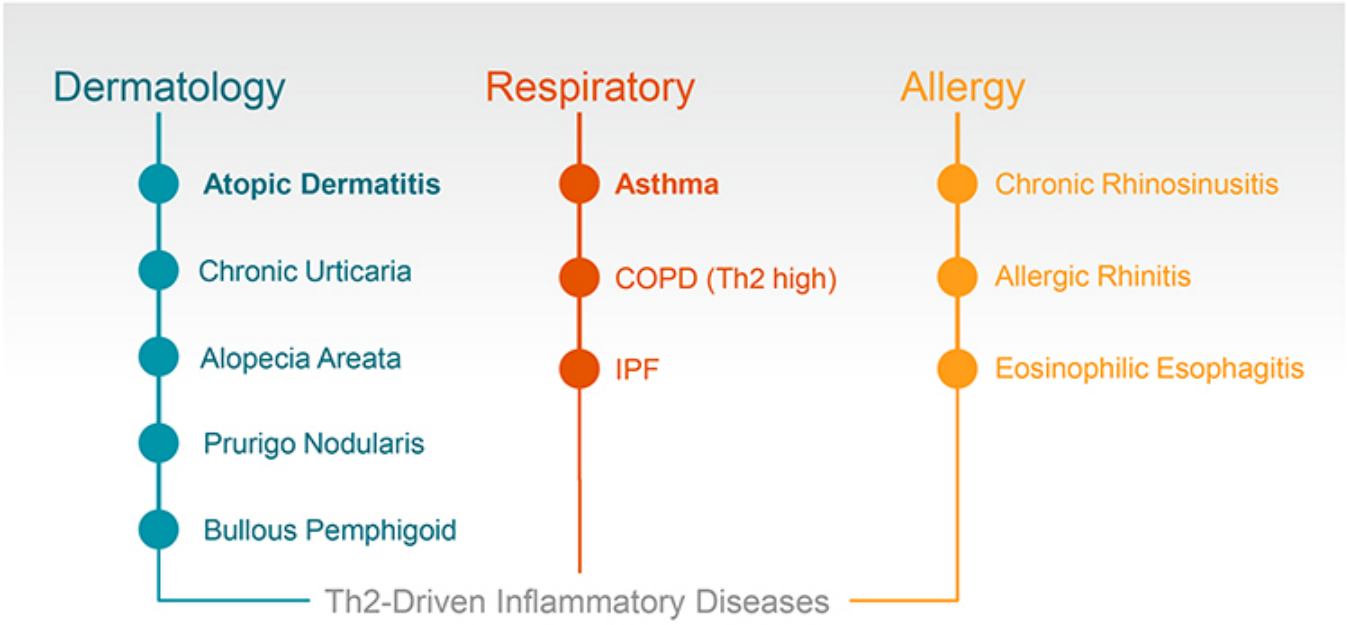
RAPT THERAPEUTICS

Dose Range-Finding Phase 2b Monotherapy Trial in Patients with Moderate-to-Severe Atopic Dermatitis



- Goal enrollment: 268 patients, ~67 per arm
- Monotherapy study: standard protocol to washout steroids/immunosuppressants and restrict rescue medications
- Primary endpoint: EASI
- Secondary endpoints: EASI-50/75/90, vIGA, Pruritis NRS

Potential “Pipeline in a Product”



RPT193 Program Summary

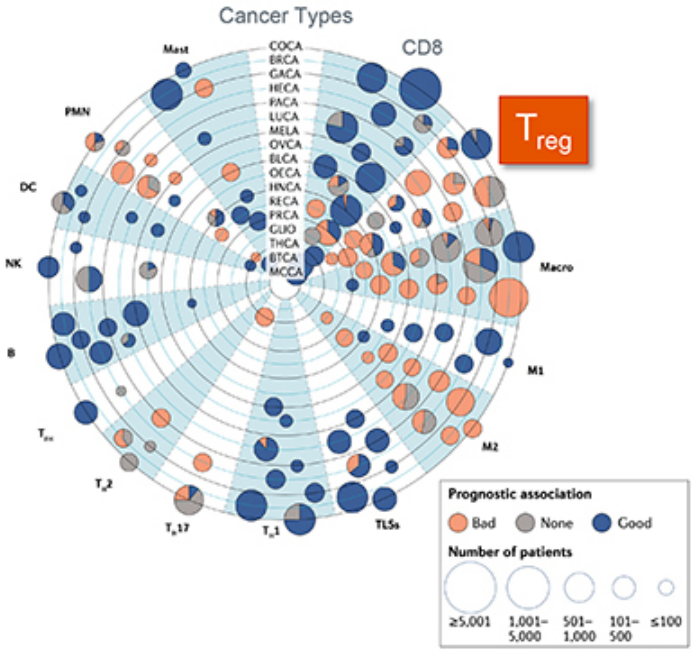
- Data from Phase 1b study in patients with atopic dermatitis demonstrated clear benefit on all key exploratory clinical endpoints, including EASI and vIGA
- Continued deepening of responses through 2-week follow-up period suggests higher levels of efficacy could be achieved in longer studies
- Profile suggests an effective, well-tolerated oral molecule that would not need laboratory safety monitoring, allowing positioning ahead of injectables and JAK inhibitors
- 16-week Phase 2b study in patients with moderate-to-severe AD ongoing
- Plan to initiate a Phase 2a study in patients with moderate-to-severe asthma in Q1 2023

RAPT THERAPEUTICS


FLX475: CCR4 Antagonist
for Oncology

T_{reg} Are Key Targets in the Tumor Microenvironment (TME)

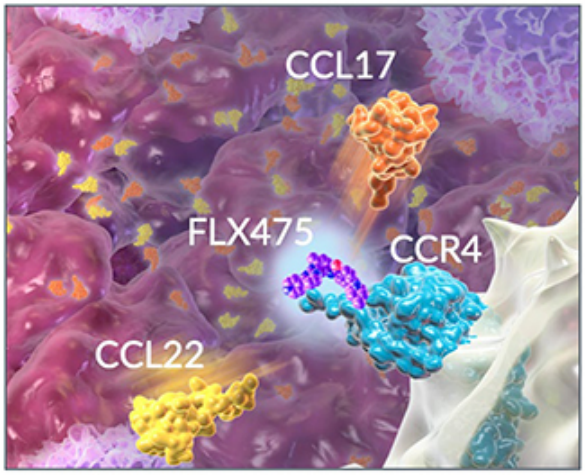
- Correlate with poor prognosis across most cancers
- Mechanism for immune evasion by viruses and tumors
- Barrier to checkpoint inhibitor efficacy
- Challenge: selective inhibition of T_{reg} in the TME
  - Depleting antibodies targeting CD25, CCR4, etc. do not appear to have adequate selectivity



Bruni D et al. *Nat Rev Cancer* 2020

FLX475: Oral CCR4 Antagonist in Phase 2

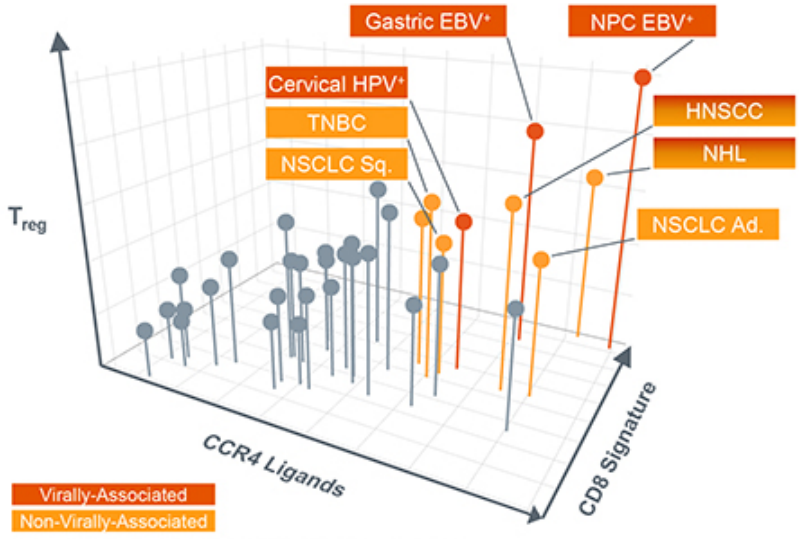
- Highly potent and selective CCR4 small molecule antagonist
- Selectively blocks tumor T_{reg} while sparing normal tissues and beneficial cells
- Potential for superior safety and efficacy compared to depleting antibodies
- Issued U.S. composition of matter patent with coverage through 2037
- Monotherapy and combination antitumor activity in charged cancers



Blocks interaction with CCR4 ligands CCL22 and CCL17 on T_{reg}

RAPT THERAPEUTICS

Identification and Characterization of Charged Tumors



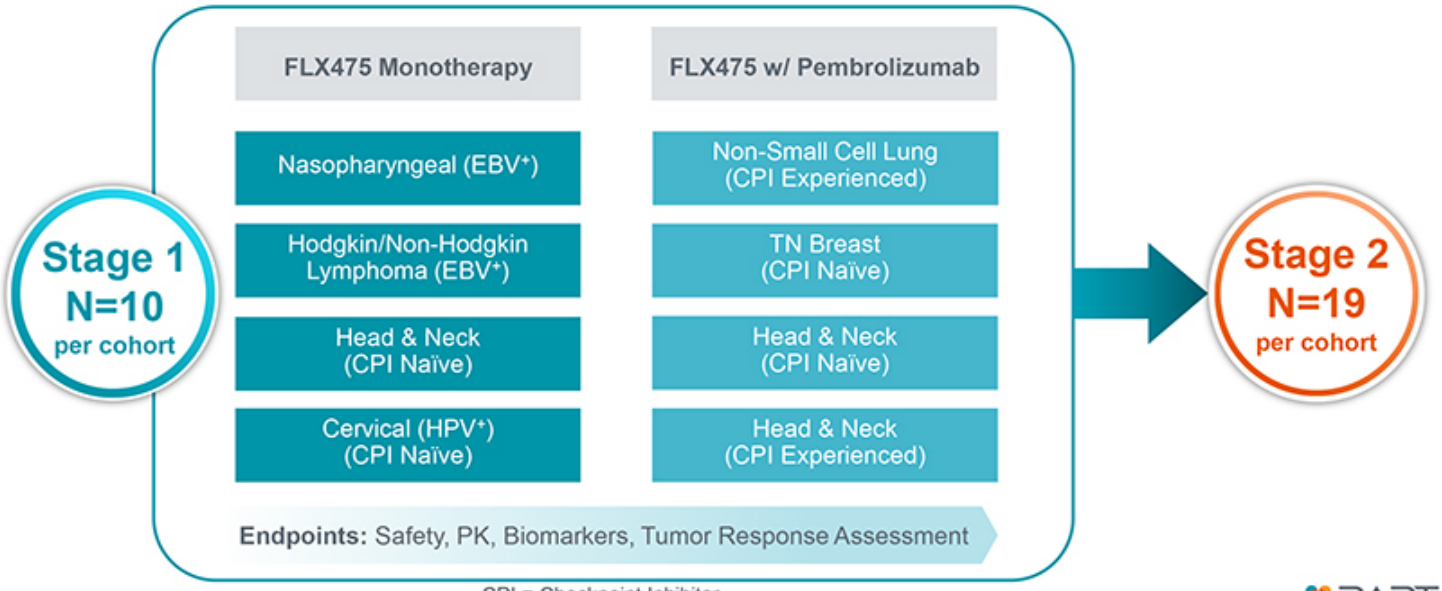
Data from in-house analysis of TCGA database combined with other data sets; Confirmed in > 400 tumor microarrays
The graph above reflects a logarithmic scale on each axis
NPC Nasopharyngeal; HNSCC Head & Neck Squamous Cell Carcinoma; NHL Non-Hodgkin Lymphoma; NSCLC Non-Small Cell Lung Cancer; TNBC Triple Negative Breast Cancer

- "Charged" tumors: high levels of CCR4 ligands, T_{reg} and CD8 T cells
- Potential for both monotherapy and combination activity
- Represent cancers with high unmet need and large markets
- Potential for tissue-agnostic accelerated approval in virally-associated tumors

RAPT THERAPEUTICS

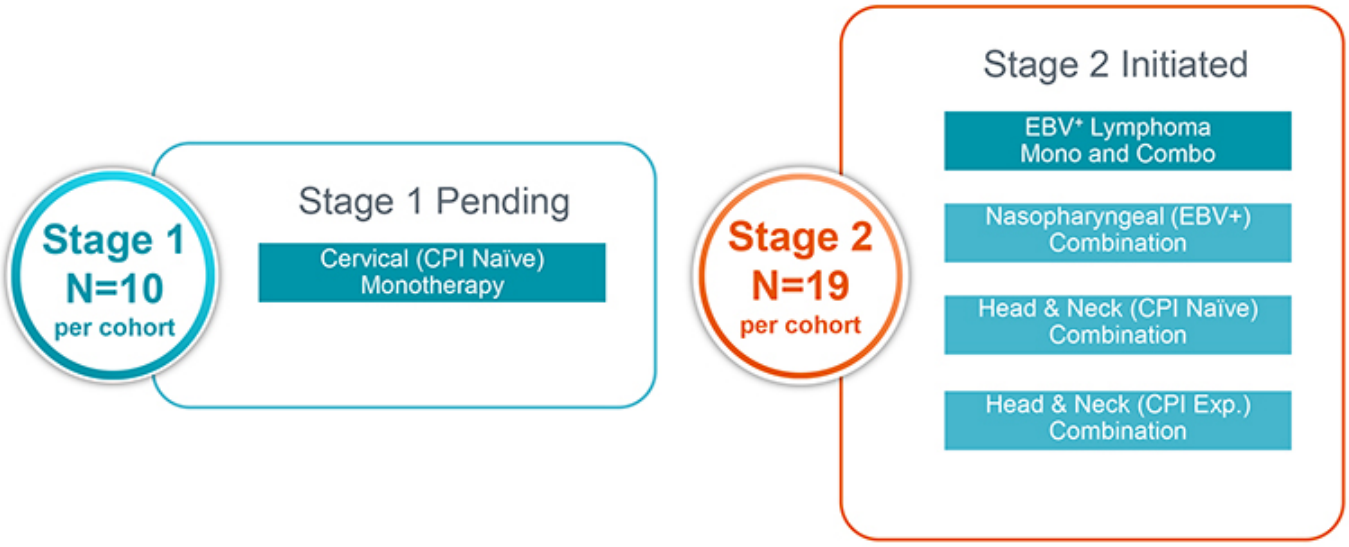
Phase 2: Gated Simon 2-Stage Design

- To evaluate the antitumor activity of FLX475 as monotherapy and in combination with pembrolizumab in charged cancers that progressed after ≥ 1 line of therapy



CPI = Checkpoint Inhibitor

Phase 2: Status and Stage 2 Decisions



RAPT THERAPEUTICS

FLX475 Program Summary

- FLX475, a highly selective tumor T_{reg} inhibitor, appears to be an active agent in charged cancers as monotherapy and in combination with pembrolizumab
- Ungated Stage 2 expansions in 4 indications
- Favorable safety supportive of broad combinability
- Targeting a medical conference in 2022 for data presentation

Key Takeaways and Upcoming Milestones

- **RPT193**: safe oral agent designed for a broad range of inflammatory diseases, in Phase 2b in AD
- **FLX475**: highly selective tumor T_{reg} inhibitor in multiple Phase 2 expansions as monotherapy and in combination with pembrolizumab
- **Planned Key Milestones**
  - **2H 2023**: RPT193 Phase 2b in AD topline data
  - **Q1 2023**: Initiate RPT193 Phase 2a trial in asthma
  - **2022**: FLX475 Phase 2 data update


Thank You