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): January 8, 2018

CYTOMX THERAPEUTICS, INC.
(Exact name of Registrant as Specified in Its Charter)

Delaware	**001-37587**	**27-3521219**
(State or Other Jurisdiction of Incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**

151 Oyster Point Blvd.
Suite 400
South San Francisco, CA 94080
(Address of principal executive offices, including Zip Code)

Registrant's telephone number, including area code: (650) 515-3185

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 (see General Instructions A.2. below):

☐ 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))

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 7.01 Regulation FD Disclosure

Spokespersons of CytomX Therapeutics, Inc. plan to present the information in the presentation slides attached hereto as Exhibit 99.1 at various investor meetings scheduled during the week of January 8, 2018. A copy of the presentation, including a slide setting forth certain cautionary language intended to qualify the forward-looking statements included in the presentation, is furnished as Exhibit 99.1 to this Current Report and is incorporated herein by reference.

The information in this Item 7.01, including Exhibit 99.1, shall not be deemed "filed" for purposes of Section 18 of the Security Exchange Act of 1934, as amended (the "Exchange Act") or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such filing.

Item 9.01. Financial Information and Exhibits

(d) Exhibits

Exhibit No.	Description
99.1	Corporate presentation dated January 8, 2018

SIGNATURES

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

Date: January 8, 2018

CYTOMX THERAPEUTICS, INC.

By: /s/ Debanjan Ray
Debanjan Ray
Chief Financial Officer

CytomX Therapeutics

CORPORATE OVERVIEW:

REINVENTING THERAPEUTIC ANTIBODIES FOR THE TREATMENT OF CANCER

January 2018

Forward Looking Statements

Special Note Regarding Forward-Looking Statements

This presentation may contain projections and other forward-looking statements regarding future events. All statements other than statements of historical facts contained in this presentation, including statements regarding our future financial condition, technology platform, development strategy, prospective products, preclinical and clinical pipeline and milestones, regulatory objectives, expected payments from and outcomes of collaborations, and likelihood of success, are forward-looking statements. Such statements are predictions only and involve known and unknown risks, uncertainties and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. These risks and uncertainties include, among others, the costs, timing and results of preclinical studies and clinical trials and other development activities; the uncertainties inherent in the initiation and enrollment of clinical trials; expectations of expanding on-going clinical trials; availability and timing of data from clinical trials; the unpredictability of the duration and results of regulatory review; market acceptance for approved products and innovative therapeutic treatments; competition; the potential not to receive partnership milestone, profit sharing or royalty payments; the possible impairment of, inability to obtain and costs of obtaining intellectual property rights; and possible safety or efficacy concerns, general business, financial and accounting risks and litigation. Because forward-looking statements are inherently subject to risks and uncertainties, some of which cannot be predicted or quantified and some of which are beyond our control, you should not rely on these forward-looking statements as predictions of future events. More information concerning us and such risks and uncertainties is available on our website and in our press releases and in our public filings with the U.S. Securities and Exchange Commission. We are providing this information as of its date and do not undertake any obligation to update or revise it, whether as a result of new information, future events or circumstances or otherwise. Additional information may be available in press releases or other public announcements and public filings made after the date of this presentation.

This presentation concerns products that have not yet been approved for marketing by the U.S. Food and Drug Administration (FDA). No representation is made as to their safety or effectiveness for the purposes for which they are being investigated.

Leveraging Our Innovative Probody Platform to Build a Pipeline of Differentiated Cancer Therapies

Milestones Anticipated in 2018

- Five programs in the clinic by year end
- Furthest advanced programs remain wholly owned
  - CX-072 (anti-PD-L1): Initial clinical data mid-year
  - CX-2009 (anti-CD166): Initial clinical data 2H'18
- Strong partnered programs progressing well
  - BMS-986249 (anti-CTLA-4): Phase 1 initiated
  - CX-2029 (anti-CD71 in co-development with AbbVie): IND filing 1H'18

Innovative Probody™ Platform

- Designed to enhance tumor targeting and create/widen therapeutic window
- Potential best-in-class immunotherapies against clinically-validated targets
- Potential first-in-class therapeutics against novel, difficult-to-drug targets
- Preclinical proof of concept achieved across ~15 targets in multiple modalities

Validating Partnerships

- Partnerships with leading oncology players such as AbbVie, Amgen, BMS
- ~$400 million in upfront and milestone payments received to date
- Retained co-development rights and profit splits on certain products

Well-Funded

- 2017 ending cash expected to be $355-365 million; funding into 2020

Strong Execution Throughout 2017

CX-072 (PD-L1)

PROCLAIM-CX-072

- ✓ Completed monotherapy dose escalation enrollment (Part A1)
- ✓ All combinations arms recruiting
- ✓ First monotherapy cohort expansion recruiting

CX-2009 (CD166)

PROCLAIM-CX-2009

- ✓ Monotherapy dose escalation recruiting

CX-2029 (CD71)

- ✓ Completed GLP toxicology studies
- ✓ $15M milestone received from AbbVie
- ✓ IND on track for 1H'18

CX-188 (PD-1)

- ✓ IND enabling studies initiated for 2H'18 filing

BMS-986249 (CTLA-4)

- ✓ Phase 1/2 recruiting
- ✓ Earned $10M milestone from BMS upon IND clearance

Partnerships

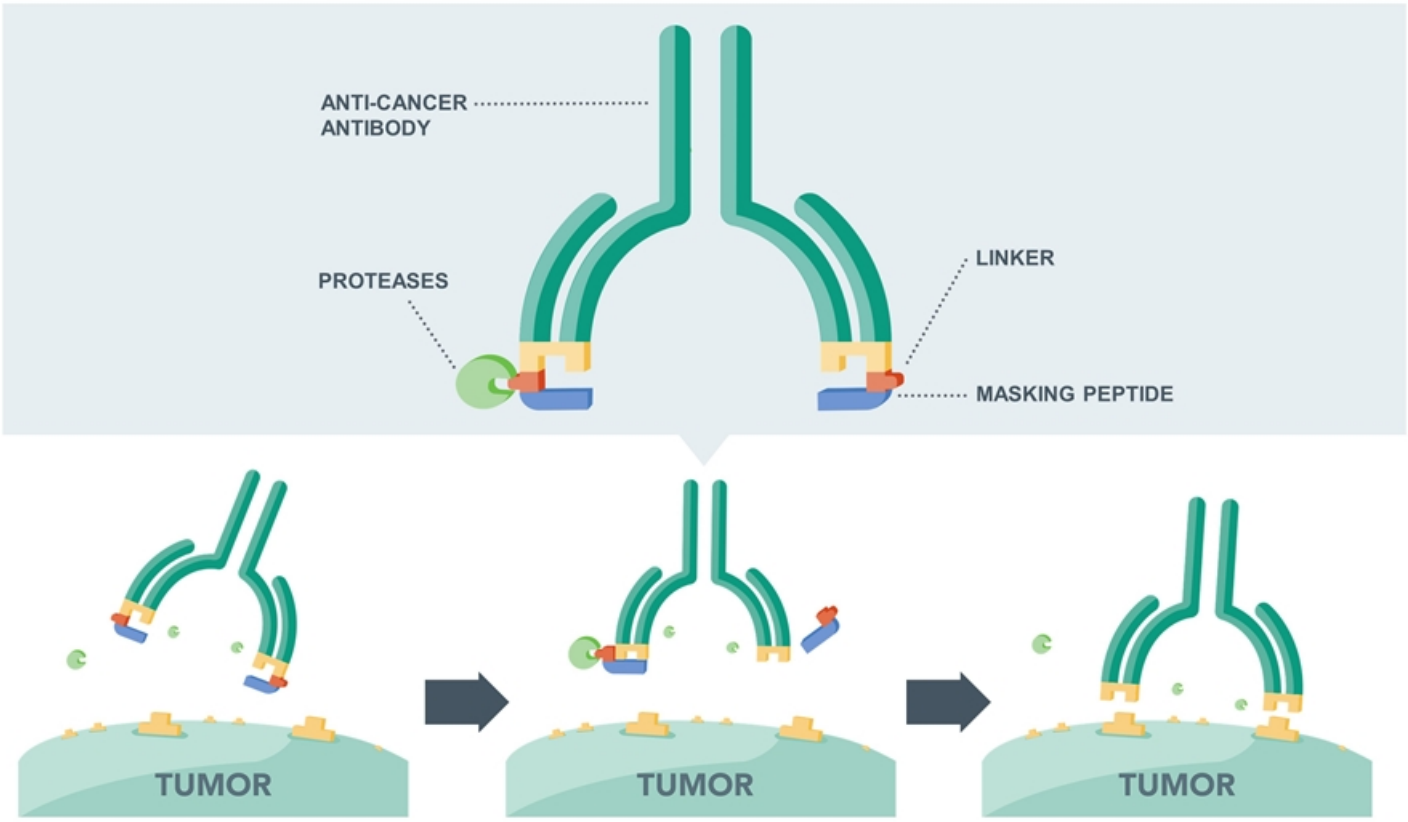
- ✓ BMS alliance expansion: $200M upfront
- ✓ Amgen co-development deal for T cell engaging Probody bispecifics: $40M cash, $20M equity purchase

Deep and Differentiated Probody Pipeline with Initial Data Read Outs Anticipated in 2018

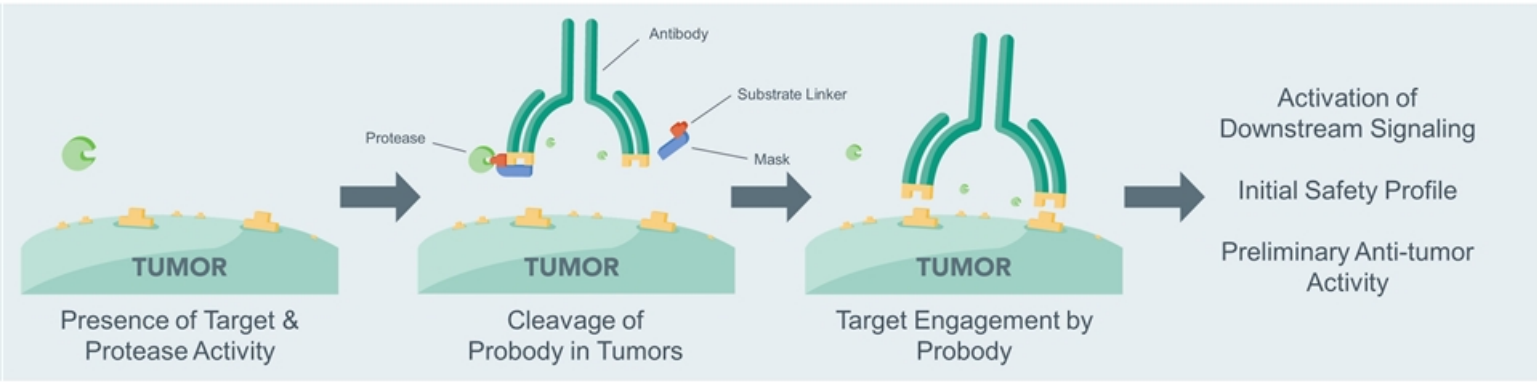
PRODUCT CANDIDATE	LEAD OPTIMIZATION	IND-ENABLING	PHASE 1/2	PARTNER
CX-072	PD-L1			
CX-2009	CD166 PDC			
BMS-986249	CTLA-4			Bristol-Myers Squibb
CX-2029	CD71 PDC		IND Anticipated in 1H'18	abbvie
CX-188	PD-1		IND Anticipated in 2H'18	
T Cell Bispecific	EGFR-CD3			AMGEN
Additional PDCs, IO, TCBs				

Immunotherapies | Probody Drug Conjugates | T Cell Engaging Bispecifics | Multiple Programs

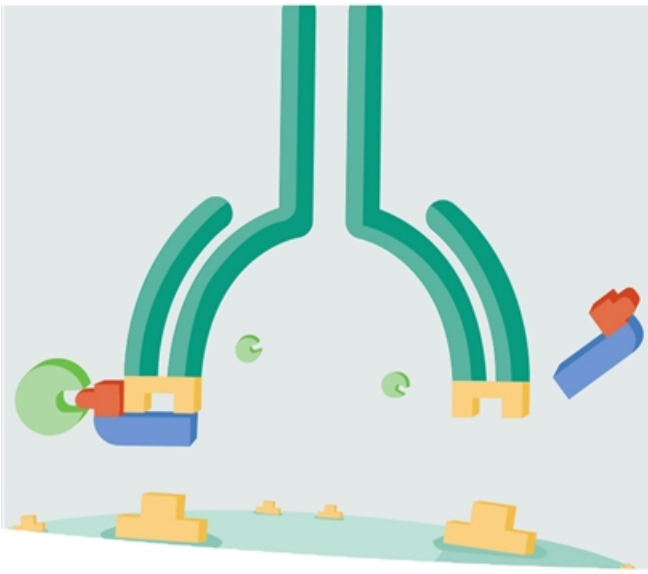
Probody Therapeutics are Designed to be Activated in the Tumor Microenvironment



2018 Clinical Goal: Preliminary Proof of Concept



- Initial assessment to include:
  - Probody PK, stability of mask in circulation
  - Probody activation in tumor tissue
  - Initial safety profile and anti-tumor activity as monotherapy and in combination
  - Downstream biomarkers of activity



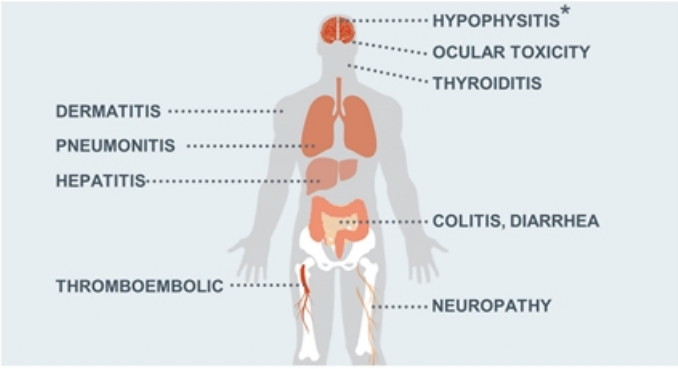
IMMUNO-ONCOLOGY PROGRAMS

CX-072 (PD-L1)

BMS-986249 (CTLA-4)

CytomX THERAPEUTICS

Full Potential for Combination Immunotherapy is Limited by Immune-Related Toxicities



Decreased Therapeutic Window with PD-(L)1/CTLA-4 Combination

Melanoma	Nivolumab Mono	Ipilimumab Mono	Nivo + Ipi Combo
ORR	44%	19%	58%
Grade 3 and 4 AEs*	16%	27%	55%
Discontinued Drug	8%	15%	36%

- Synergistic toxicity limits combo dosing
- More than 1/3 of patients unable to tolerate drug

Absence of Therapeutic Window with PD-(L)1/BRAF Combination

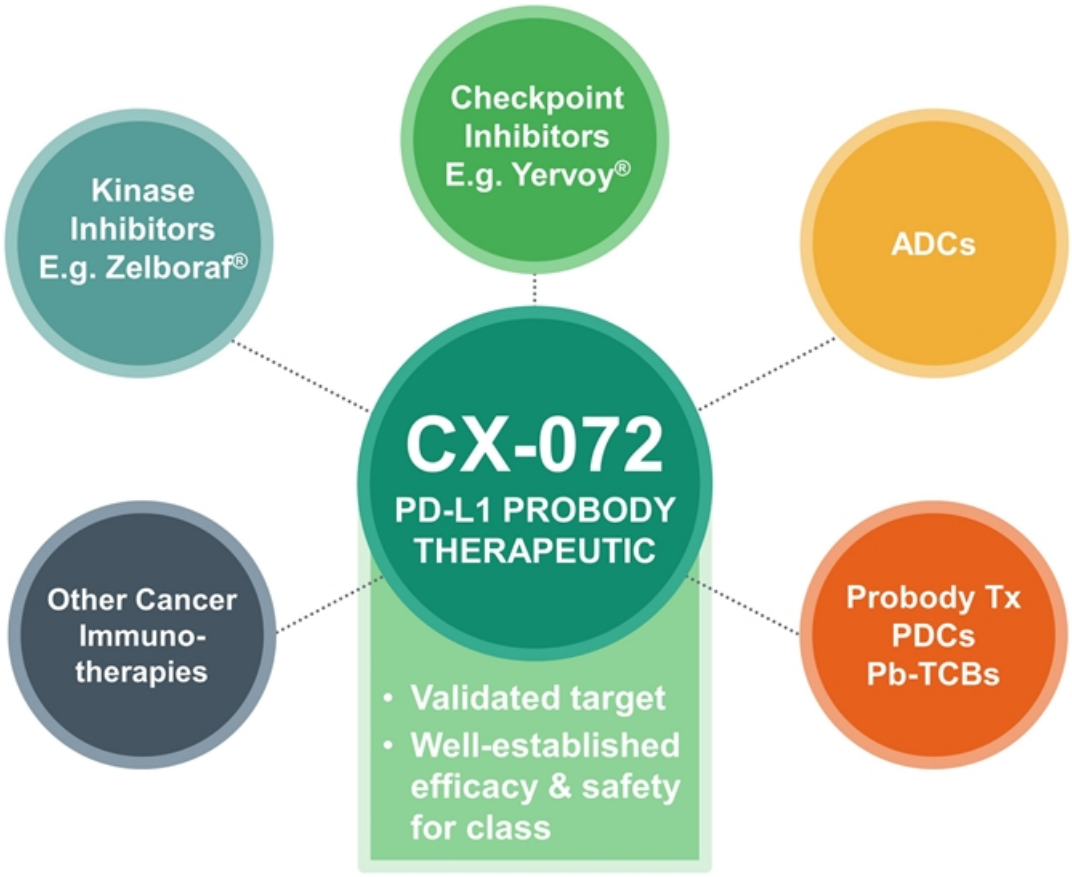
Melanoma	Vemurafenib Mono	Atezo + Vem Combo
ORR (CR)	48% (1%)	67% (33%)
Grade 3 and 4 AEs*	38%	67%
Discontinued Drug	NR**	100%

- Compelling efficacy observed with PD-(L)1/BRAF combo
- 100% of patients unable to tolerate combination

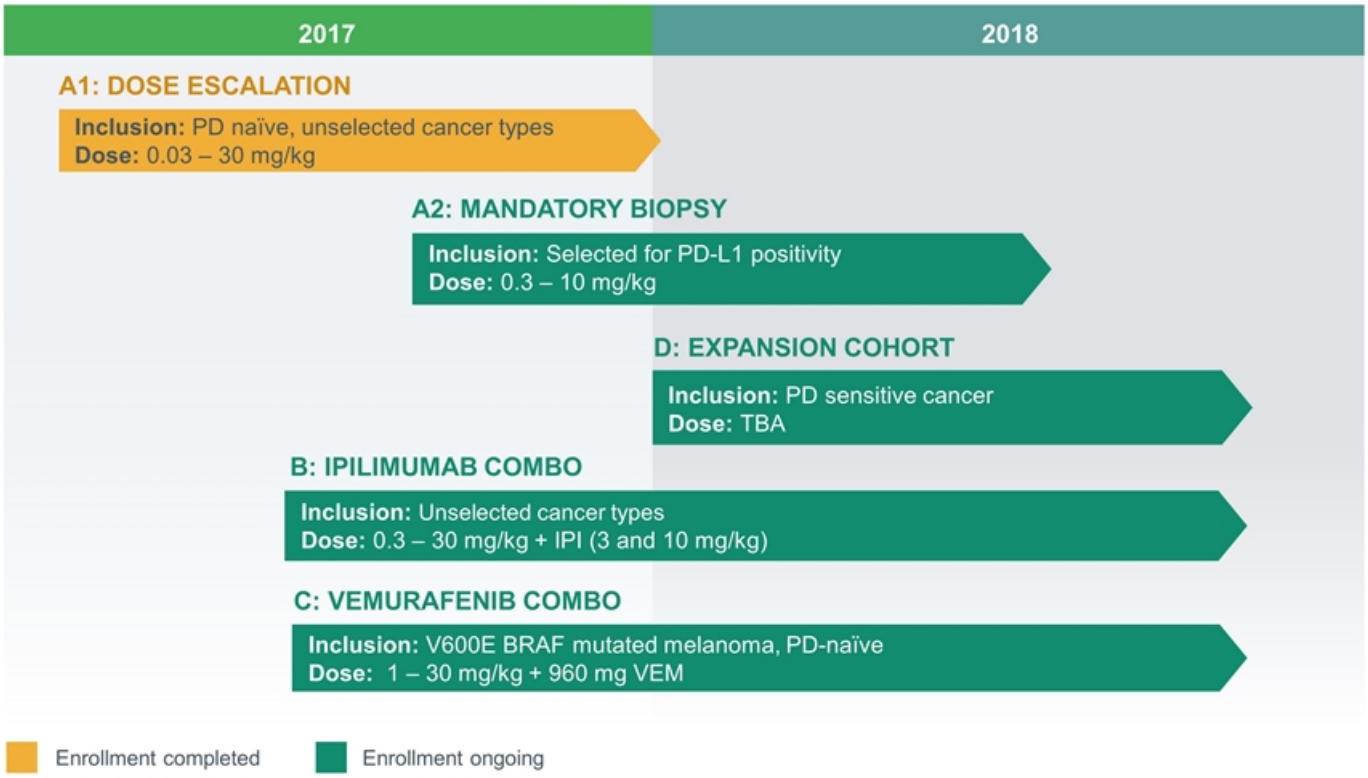
*Treatment-related **Not reported

1. Larkin et al., NEJM, July 2015. 2. Chapman et, al. NEJM, 2011. 3. Hamid, Society for Melanoma Research 2015

CX-072 as a Potential Centerpiece of Combination Cancer Therapy

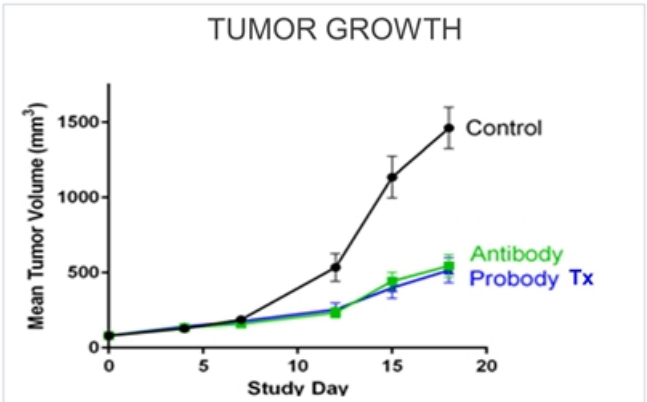


PROCLAIM-072: Phase 1/2 CX-072 Assessment as Monotherapy and in Combination

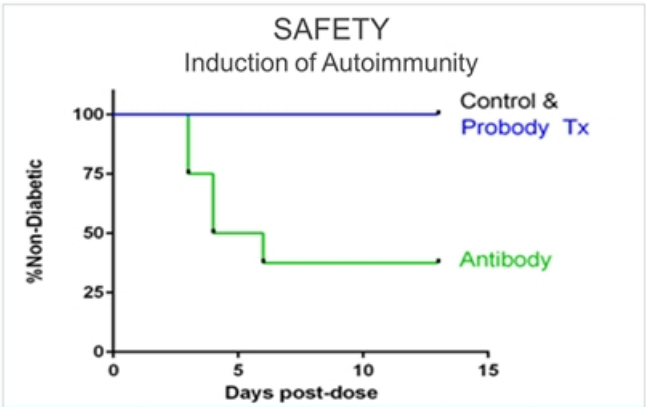


Initial Clinical Data Expected Mid-2018

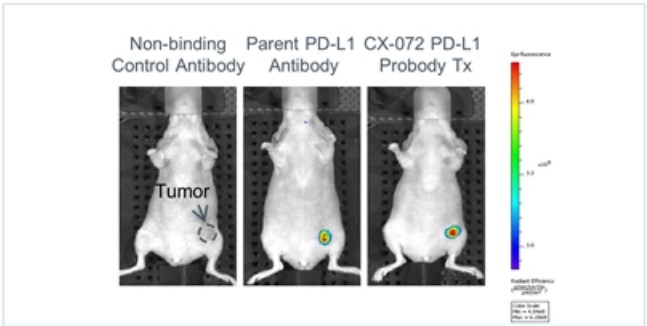
CX-072 Preclinical Proof of Concept



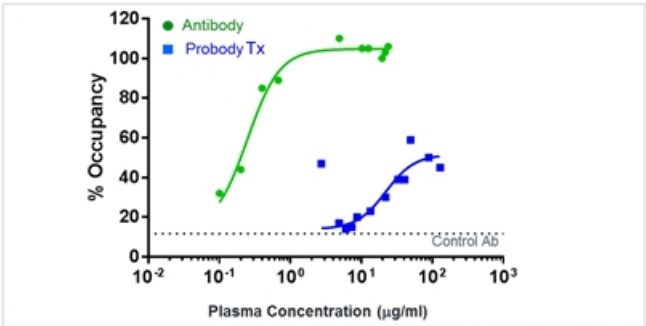
Similar Efficacy



Autoimmunity Reduced

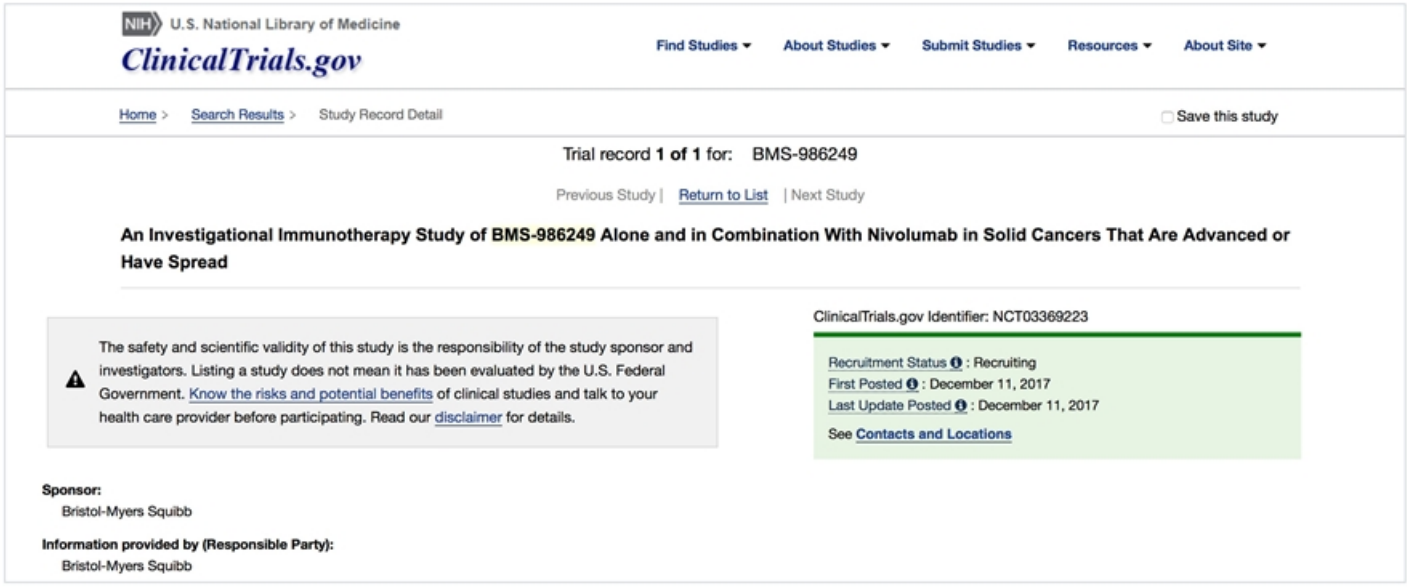


Localizes to Tumor



Prevents Binding in Periphery

Phase 1/2 Study of BMS-986249 (anti-CTLA-4 Probody Therapeutic)



NIH U.S. National Library of Medicine
ClinicalTrials.gov

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Home > Search Results > Study Record Detail

Save this study

Trial record **1 of 1** for: BMS-986249

Previous Study | Return to List | Next Study

An Investigational Immunotherapy Study of BMS-986249 Alone and in Combination With Nivolumab in Solid Cancers That Are Advanced or Have Spread

The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Know the risks and potential benefits of clinical studies and talk to your health care provider before participating. Read our disclaimer for details.

ClinicalTrials.gov Identifier: NCT03369223

Recruitment Status : Recruiting
First Posted : December 11, 2017
Last Update Posted : December 11, 2017

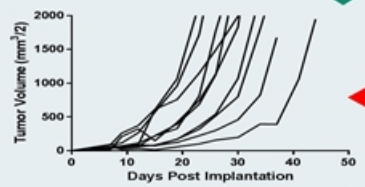
See Contacts and Locations

Sponsor:
Bristol-Myers Squibb

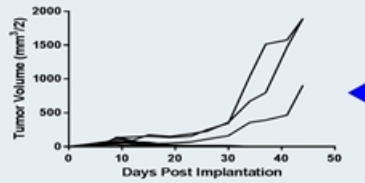
Information provided by (Responsible Party):
Bristol-Myers Squibb

CTLA-4 Probody Tx Demonstrates Similar Efficacy with Improved Safety in Preclinical Studies

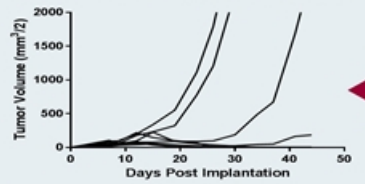
Similar Anti-Tumor Efficacy



Control
0/10 Tumor Free

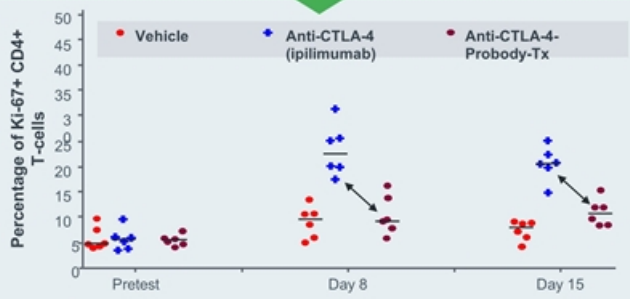


Ipilimumab
7/10 Tumor Free



Ipilimumab Pb Tx
6/10 Tumor Free

Less Peripheral T-Cell Activation



Wider Safety Margin

HNSTD* in cynos

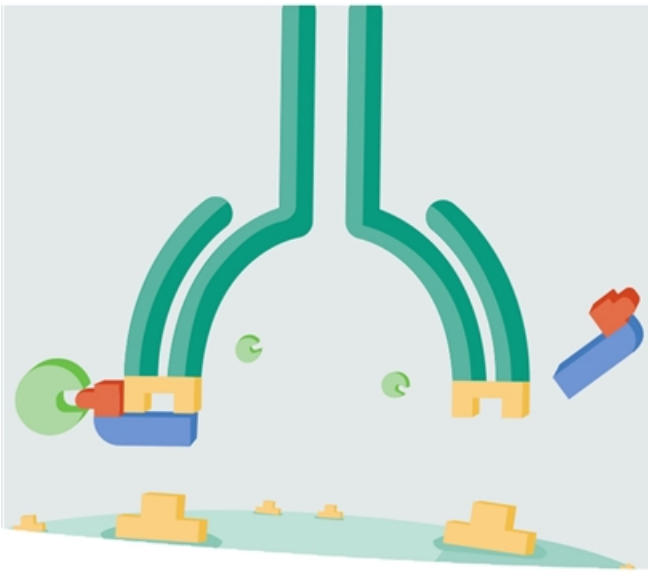
- 10 mg/kg ipilimumab
- 50 mg/kg ipilimumab Pb Tx

In addition, ongoing collaboration on non-fucosylated version of CTLA-4 Probody Therapeutic

* Highest non-severely toxic dose

Bristol-Myers Squibb

CytomX Therapeutics



PROBODY DRUG CONJUGATE PROGRAMS

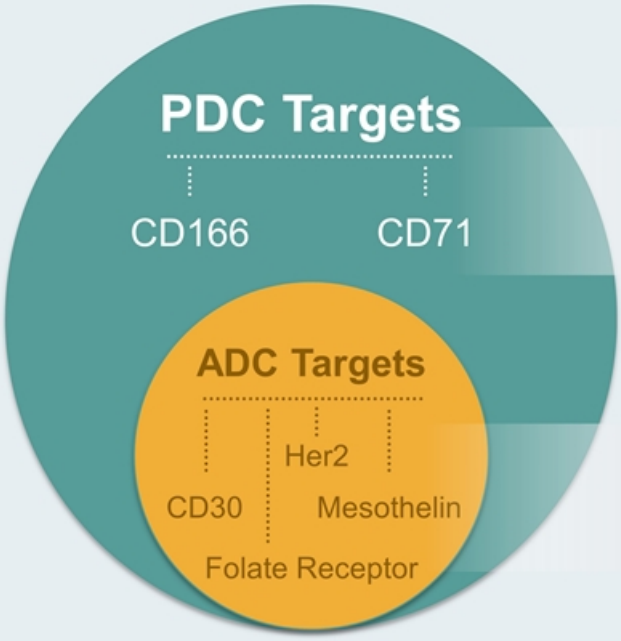
CX-2009 (ANTI-CD166)

CX-2029 (ANTI-CD71)

CytomX THERAPEUTICS

Probody Technology Enables Selection of Better Antibody Drug Conjugate Targets

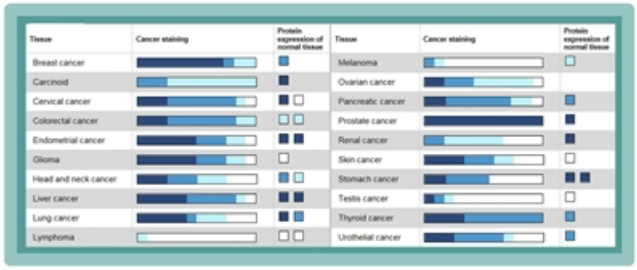
ADC Targets are Limited Based on Healthy Tissue Expression:



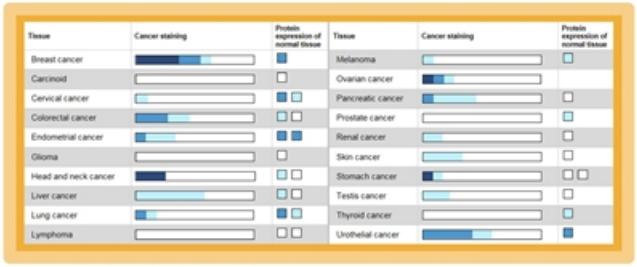
PDC Targets May Have More Attractive Attributes:

- Higher Expression
- Uniform Expression
- More patients
- More indications

CD166

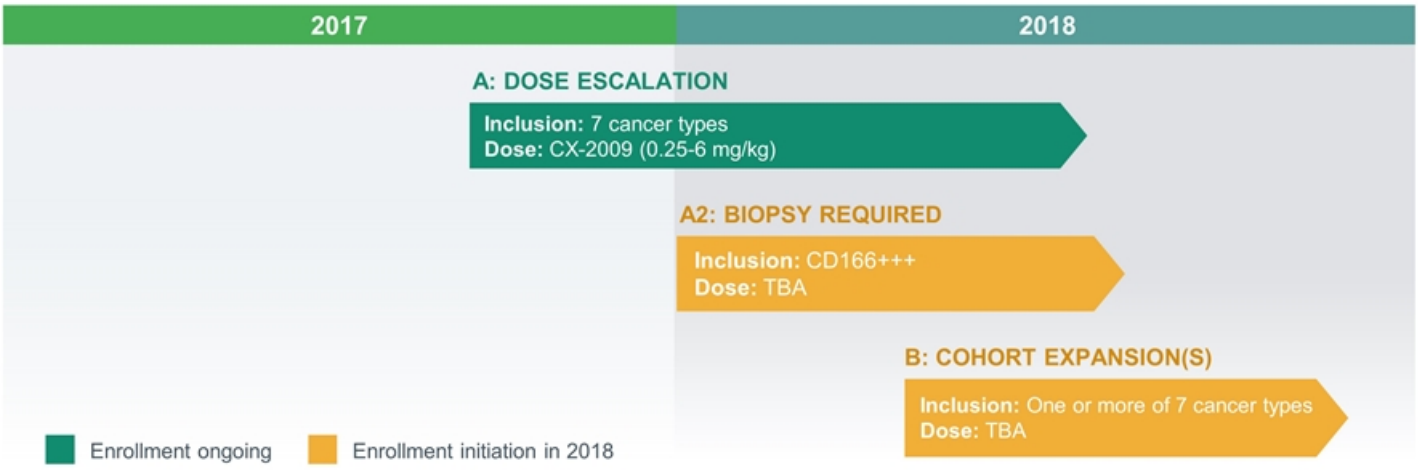


Her2



Source: Human Protein Atlas

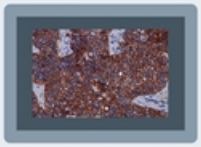
PROCLAIM-CX-2009: Anti-CD166 PDC Phase 1/2 Clinical Trial Design



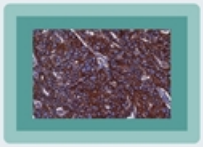
Seven CD166+ tumor types in monotherapy dose escalation arm:

- Breast cancer
- Castration-resistant prostate cancer
- Cholangiocarcinoma
- Endometrial cancer
- Head and neck cancer
- Non-small cell lung cancer
- Ovarian cancer

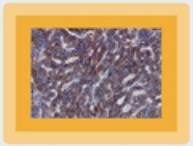
Lung cancer



Breast cancer

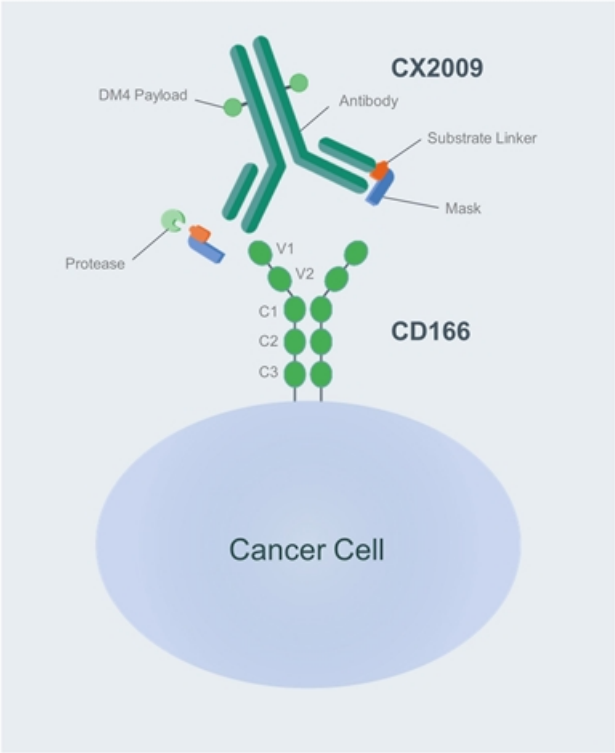


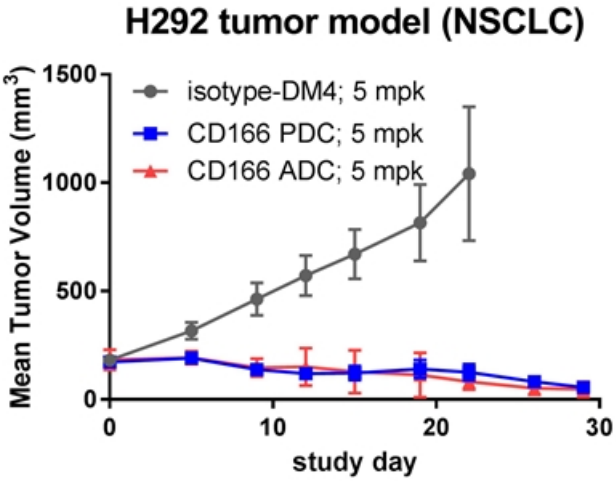
Ovarian cancer



Initial Clinical Data Expected 2H 2018

CX-2009: A Probody Drug Conjugate Targeting CD166 Preclinical Proof of Concept

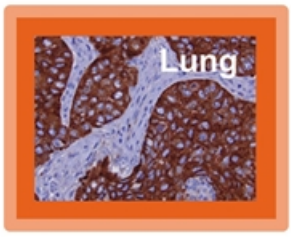


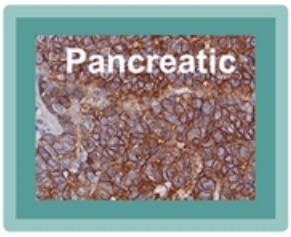


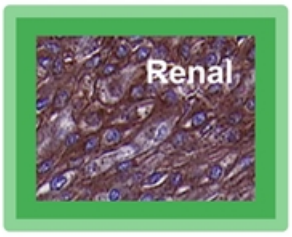
GLP Toxicity Study Results:

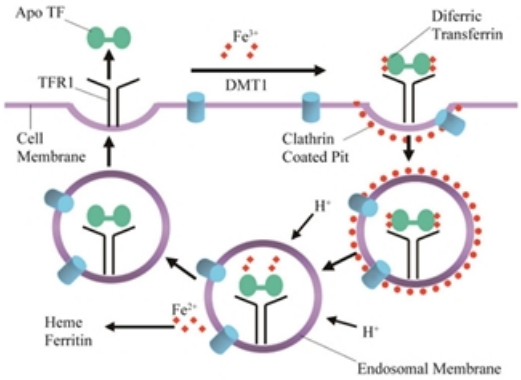
- Dosed up to 15 mg/kg in cynos
- Observed toxicity consistent with typical DM4 payload toxicity

CD71 is a High Potential Target for a Probody Drug Conjugate









- Ubiquitously expressed on dividing, normal and malignant cells
- Mediates iron uptake required for cell division
- A professional internalizing protein: often used as a positive control in ADC experiments
- Expression in normal dividing cells prohibits development of a traditional ADC

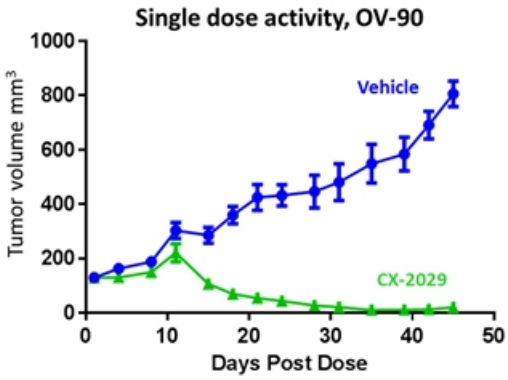
J. Cancer Ther. (2012)

abbvie

CytomX Therapeutics

Probody Platform Has the Potential to Enable CD71 as a Drug Conjugate Target

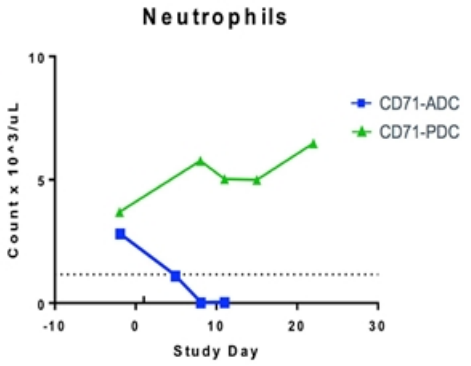
PDC regresses tumors after a single dose



PDC has efficacy across almost all preclinical models

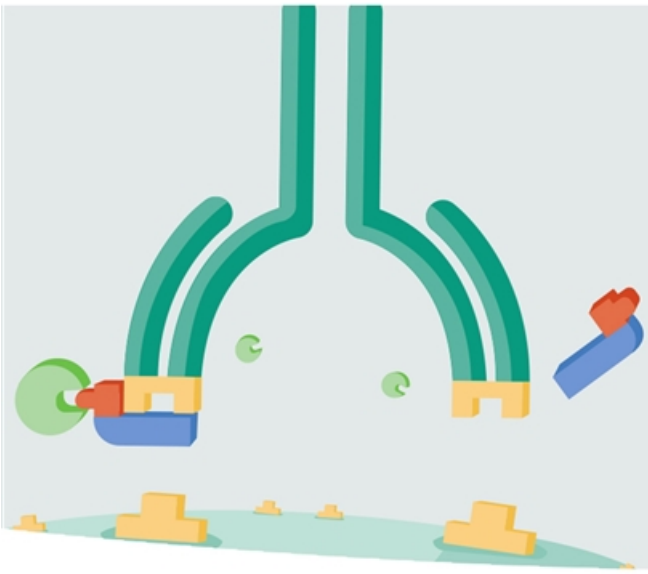
Models tested	42
Regression or stasis	30 (71%)
Growth inhibition	10 (24%)
No response	2 (5%)

PDC opens therapeutic window where none previously existed



Partnered with AbbVie: Co-development rights and profit split
IND anticipated in 1H 2018

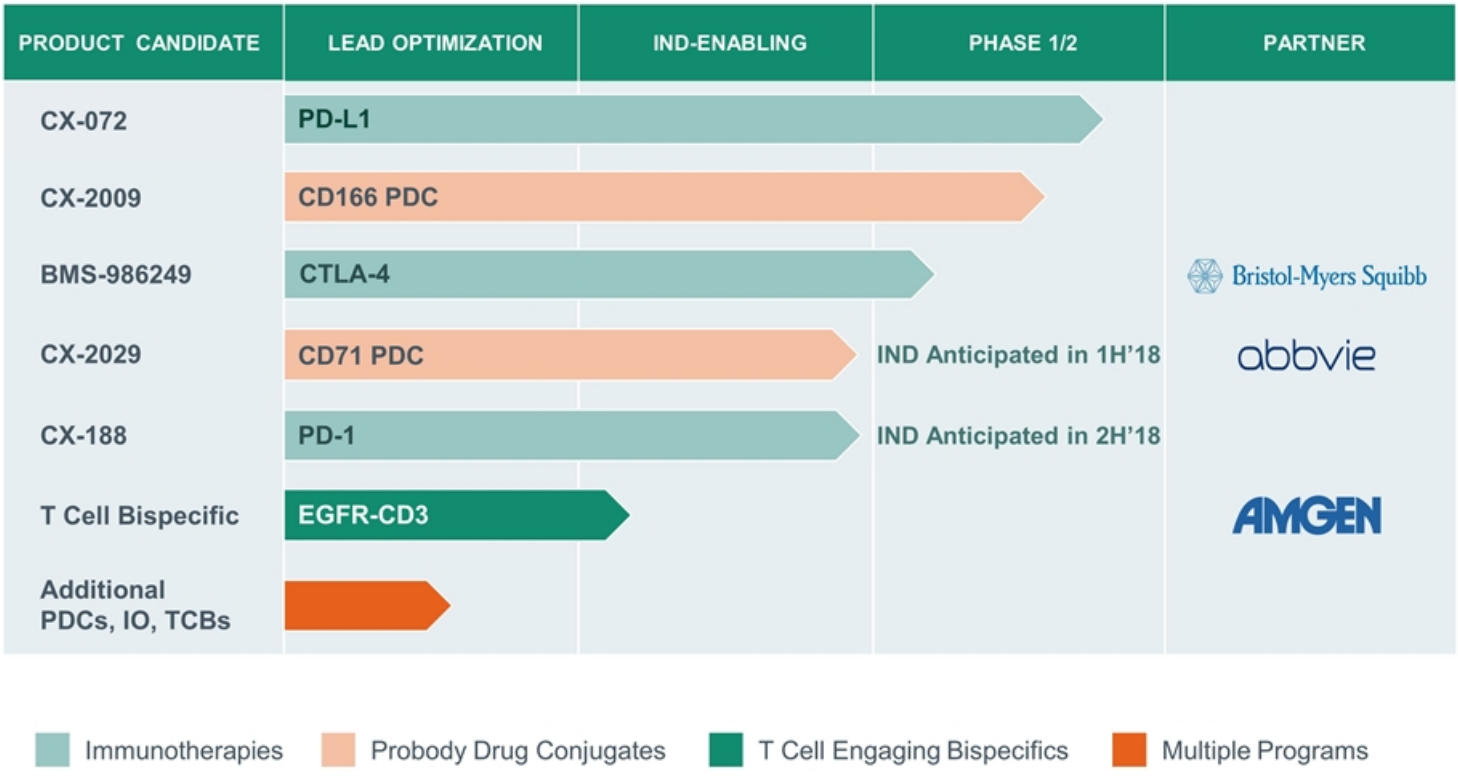
abbvie



SUMMARY

CytomX THERAPEUTICS

Deep and Differentiated Probody Pipeline with Initial Data Read Outs Anticipated in 2018



Alliances Have Brought Significant Capital into CytomX and Broadened Our Pipeline of Probody Therapeutics

Bristol-Myers Squibb

- 10 oncology, 2 non-oncology targets
- CTLA-4 Probody Tx in Ph. 1
- $287 million earned to date
- $4.8 billion in potential milestones, tiered royalties up to low-double digits

abbvie

- CD71 (CX-2029) + 2 additional targets
- Co-development, co-commercialization, and profit split on CX-2029
- IND on CX-2029 expected in 1H 2018
- $45 million earned to date
- Up to $1B in potential milestones

AMGEN

- EGFR-TCB + 3 additional targets
- Co-development, profit split on EGFR-TCB
- $1.4B aggregated in potential development, regulatory & commercial milestones
- $60M earned to date
- CytomX receives rights to one Amgen preclinical TCB

- ~$400 million to date from pharma partnering
- Greater than $7 billion in potential milestones
- Two partnered assets in the clinic in 2018

Five Programs Anticipated in the Clinic by End of 2018

Milestones Expected in 2018

- CX-072 initial clinical readout mid-year (wholly owned)
- CX-2009 initial clinical readout in 2H'18 (wholly owned)
- CX-2029 and CX-188 clinical initiation

Well-Funded

- Strong cash position to advance pipeline
- Funding into 2020

Validating Pharma Partners

Bristol-Myers Squibb · abbvie · Pfizer · AMGEN

Broad Probody Therapeutic Pipeline Poised for Proof of Concept and Value Creation