

Transforming Cancer Care

Q4 2023 & FY 2023 Earnings Call

February 22, 2024

Safe harbor and non-GAAP disclosures

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This presentation includes references to certain financial measures that are not calculated in accordance with GAAP. Reconciliation to the most directly comparable GAAP financial measure may be found in the earnings release furnished to the SEC.



Demonstrated execution in 2023

Therapy Selection

Advanced Cancer Care

- Achieved **cash flow breakeven** in Therapy Selection at year end
- Received coverage from all major US commercial health insurers for Guardant360
- Surpassed **300M covered lives** for Guardant360 and **200M covered lives** for TissueNext
- Exceeded 475 EMR integrated accounts as of year end
- Received national reimbursement in Japan for Guardant360
- Received CMS reimbursement for Guardant Response

Minimal Residual Disease

Recurrence Detection & Surveillance

- Upgraded to Smart Liquid Biopsy platform
- Received additional commercial coverage for Reveal in CRC
- Produced data in CRC and breast cancer for Reveal demonstrating high clinical performance

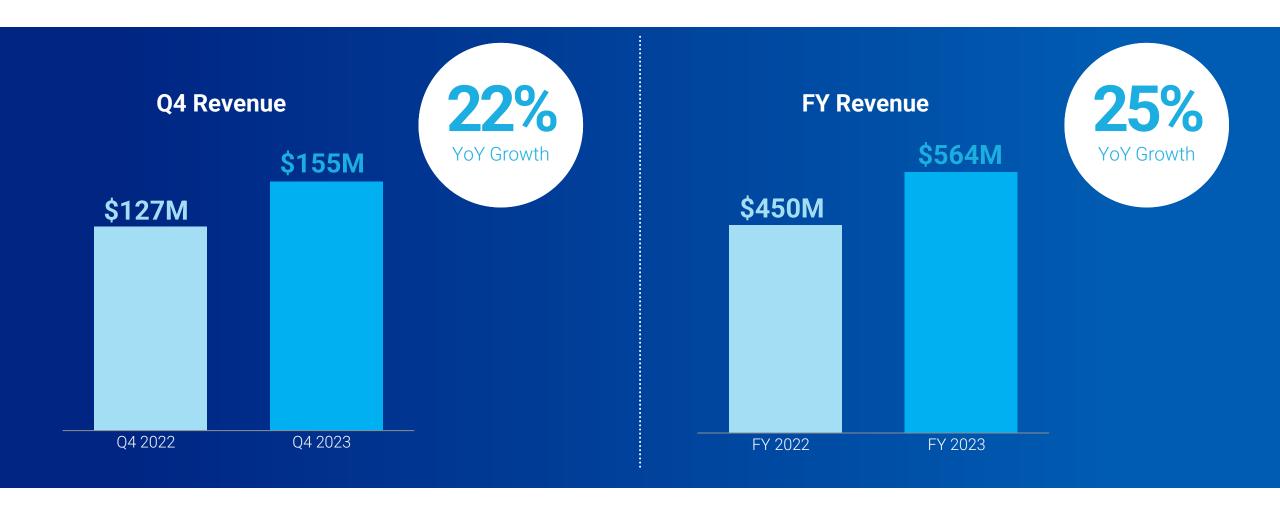
Screening

Early Disease Detection

- Completed PMA submission for Shield CRC and made steady progress with FDA
- Published first paper for Shield demonstrating improved adherence with blood-based CRC screening
- Demonstrated improved clinical sensitivity with Shield V2 relative to Shield V1

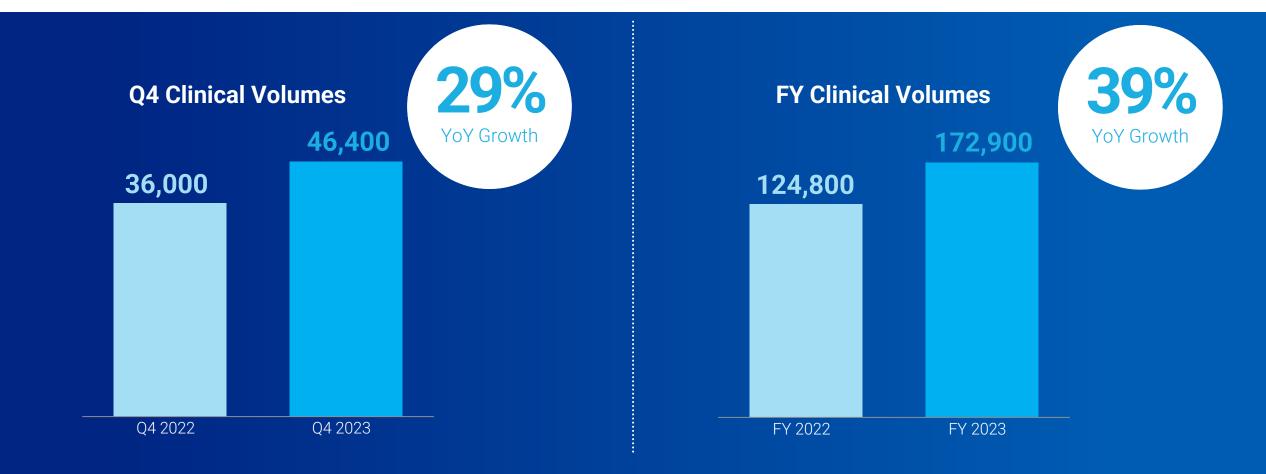


Strong revenue growth in Q4 and FY 2023



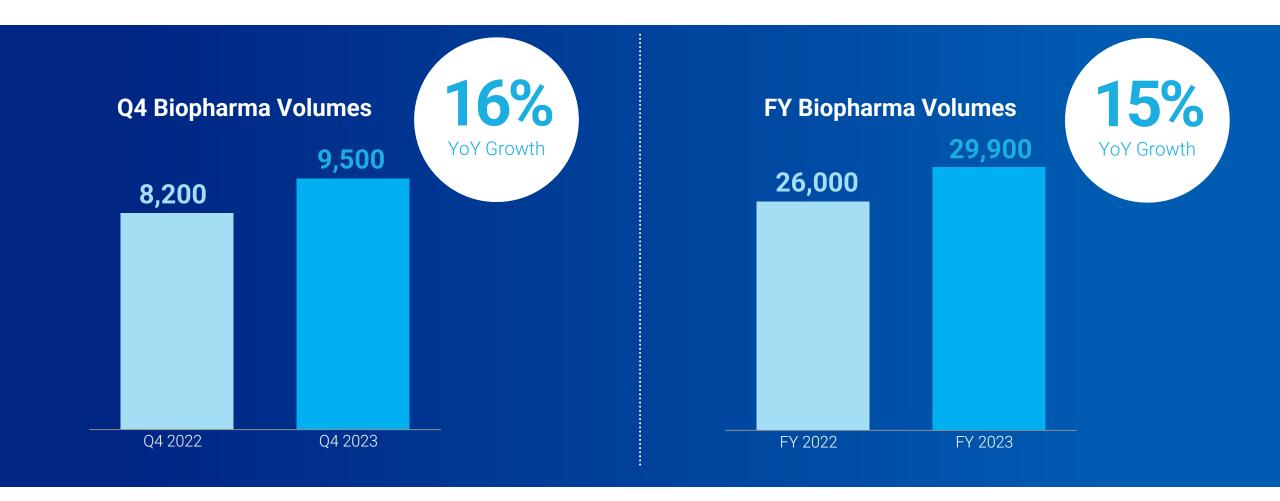


Strong clinical volume growth primarily driven by Guardant360





Robust growth in biopharma volumes





Guardant360 ASP benefiting from multiple tailwinds



- ✓ Guardant360 LDT crosswalked to CDx rate for CMS reimbursement
 - From \$3,500 to \$5,000
 - Effective January 1, 2024
 - Additional ASP tailwinds from further commercial payer wins



Other recent highlights

- Continued to make excellent progress integrating with the three largest oncology EMR systems with rapid growth of digital adoption
- Collaboration with US Oncology Network and leading community oncology practices to increase the use of biomarker testing to identify patients who would benefit from therapies
- The Royal Marsden's Guardant-powered laboratory awarded **expression of interest by the NHS** to test advanced NSCLC patients in England
- ✓ Launched Guardant360 in China for biopharma use with a strong pipeline of >30 partnerships, with lifetime global biopharma partnerships exceeding 165

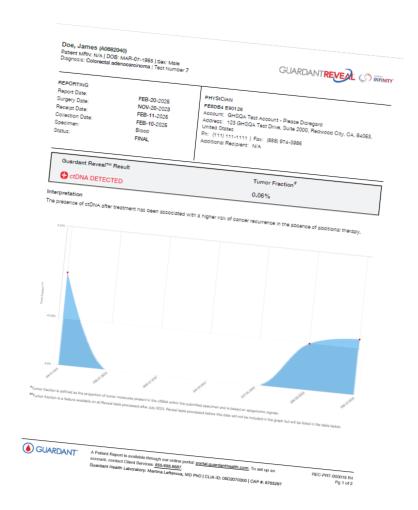


GUARDANTREVE

The only tissue-free MRD test available clinically

- Methylome-wide panel enables hypersensitive MRD detection across 100s of features per patient, without tissue
- Precise epigenomic-based tumor fraction quantification for disease monitoring
- Currently available for CRC, breast and lung

Launched Smart Liquid Biopsy to achieve even **higher performance for MRD**





Smart Liquid Biopsy MRD data

COSMOS-Colon surveillance

Stage II/III colon cancer

80%

Surveillance Sensitivity

801 samples from 136 patients

99%

Specificity

Sample-level

Data to be included in Medicare CRC surveillance submission

3 breast cancer publications in preparation

Pooled analysis across cohorts:

82%

Surveillance Sensitivity

Distant recurrence

97%

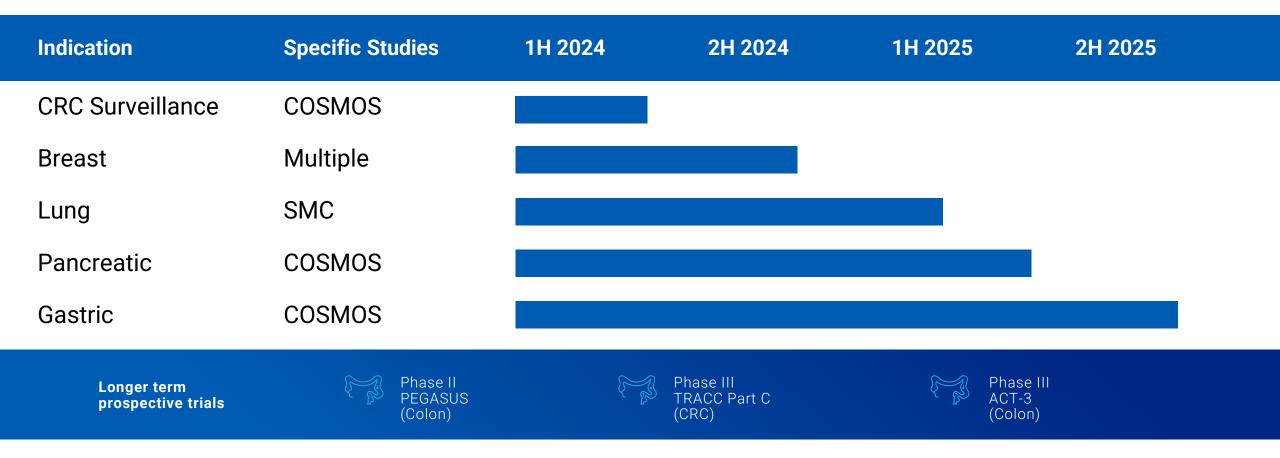
Specificity

Sample-level

Data to be included in Medicare breast submission



Deep Reveal clinical data pipeline: **80K samples** from 20K patients across solid tumors





Launching Shield IVD following FDA approval

Growth is stage-gated by market conditions allowing for steady growth while ring-fencing expenses

2024	2025	2026
 ECLIPSE Journal Publication Advisory Panel FDA Approval Shield IVD Launch Medicare Coverage at Gapfill Rate 	 ADLT Status Improved Medicare Pricing ACS Guidelines Positive Gross Margin 	 USPSTF Guidelines Expanded Market Opportunity
100 Reps targeting PCPs	100-150 Reps targeting PCPs	300 Reps targeting PCPs



Unprecedented compliance for Shield experienced by PCPs and health systems

Patient preferred blood test modality drives higher compliance

Adherence rate for first 20K patients tested with Shield LDT1

Compared to 38% – 65% compliance for standard of care^{1,2}

Prospective Study with Kaiser Permanente³

Participants were

to complete CRC screening when offered a bloodbased test as an option⁴

PLOS ONE

RESEARCH ARTICLE

"I was screaming hallelujah": Patient and

BM Journals

Gut

GI cancer Original research

Blood-based colorectal cancer screening in an integrated health system: a randomised trial of patient adherence

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Objective We evaluated whether people who had not completed a faecal immunochemical test (FIT) for colorectal cancer (CRC) screening would complete a blood-based testing option if offered one during health encounters. Blood-based screening tests for CRC could add to the total number of people screened for CRC by providing another testing alternative

Design Study participants were patients aged 45–75 years at a large, integrated health system who were offered but did not complete an FIT in the prior 3–9 months and were scheduled for a clinical encounter. Individuals were randomised (1:1) to be offered a commercially available CRC blood test (Shield, Guardant Health) versus usual care. We compared 3-month CRC screening

Results We randomised 2026 patients; 2004 remained eligible following postrandomisation exclusions (1003 to usual care and 1001 to blood draw offer; mean age: 60, 62% female, 80% non-Hispanic white). Of the 1001 allocated to the blood test group, 924 were recruited following chart-review exclusions; 548 (59.3%) were reached via phone, of which 280 (51.1%) scheduled an appointment with the research team. CRC screening proportions were 17.5 percentage points higher in the blood test group

Conclusion Among adults who had declined prior CRC screening, the offer of a blood-based screening test boosted CRC screening tes by 17.5 percentage points over usual care. Further research is needed on hour to be



Q4 and full year 2023 financial overview

	Q4′23	Q4′22	FY'23	FY22
Total Revenue	\$155.1M	\$126.9M	\$563.9M	\$449.5M
Precision Oncology	\$142.2M	\$113.8M	\$514.2M	\$392.0M
Development Services & Other	\$12.9M	\$13.1M	\$49.7M	\$57.5M
Gross Margin	60%	63%	60%	65%
Precision Oncology	60%	62%	60%	62%
Development Services & Other	60%	74%	57%	86%
Operating Expenses (R&D, S&M and G&A)	\$206.6M	\$225.9M	\$818.2M	\$837.6M
Other Operating Expense	\$83.4M		\$83.4M	
Loss from Operations	\$(197.5M)	\$(146.1M)	\$(564.7M)	\$(544.4M)
Net Loss	\$(187.0M)	\$(139.9M)	\$(479.4M)	\$(654.6M)
EPS	\$(1.58)	\$(1.36)	\$(4.28)	\$(6.41)



Q4 and full year 2023 non-GAAP financial measures & free cash flow

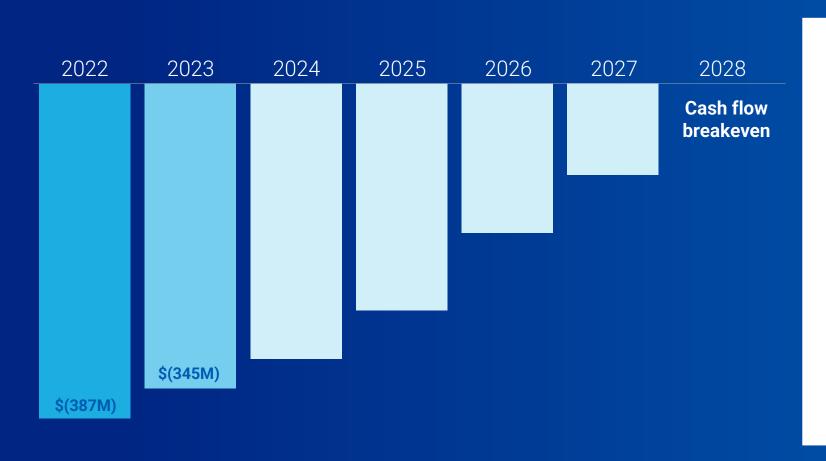
Non-GAAP Measure	Q4'23	Q4'22	FY'23	FY'22
Gross Margin	61%	65%	61%	67%
Gross Margin excluding Screening	63%	66%	63%	67%
Operating Expenses	\$183.1M	\$201.2M	\$729.2M	\$736.6M
Net Loss	\$(75.9)M	\$(119.6M)	\$(352.3M)	\$(435.4M)
EPS	\$(0.64)	\$(1.17)	\$(3.15)	\$(4.26)
Adjusted EBITDA	\$(78.4M)	\$(109.8M)	\$(344.2M)	\$(403.4M)

	Q4'23	Q4'22	FY'23	FY'22
Free Cash Flow	\$(82.8M)	\$(100.8M)	\$(345.5M)	\$(386.9M)



Non-GAAP gross margin, non-GAAP gross margin excluding screening, and non-GAAP operating expenses exclude stock-based compensation and related employer payroll tax payments, amortization of intangible assets, contingent consideration, and non-recurring other operating expense. Free cash flow is defined as net cash used in operating activities in the period less purchase of property and equipment in the period. Please refer to the tables in the associated press release labeled Reconciliation of Selected GAAP Measures to Non-GAAP Measures, Reconciliation of GAAP Net Loss to Adjusted EBITDA, and Reconciliation of Free Cash Flow to Net Cash Used in Operating Activities.

Current cash provides runway to reach cash flow breakeven



- \$1.2B cash at YE
- Reached Therapy Selection breakeven end of 2023
- Systematically reducing cash burn in 2024 and beyond
- Combined Therapy Selection + MRD generates positive cash flow over cumulative 5-year period
- Screening ~\$200M annual cash burn



Initiating full year 2024 guidance

Revenue excluding Screening

\$655M - \$670M

16% - 19% y/y growth

Excludes revenue contribution from Shield

excluding Screening

Non-GAAP
Gross Margin
excluding Screening

60% - 62%

Excludes Shield COGS currently recorded in Development Services & Other cost of revenue

Non-GAAP
Operating Expenses

\$740M - \$750M

1% - 3% y/y increase

Includes Screening operating expenses

Free Cash Flow

\$(320M) - \$(330M)

Includes ~\$(200M) Screening net cash burn



Transforming patient lives across the continuum of cancer care

Therapy Selection Screening MRD Shield FDA approval Profitable core business Data publications for **CRC** and Breast Increased G360 ASP Shield Medicare MoIDX submissions reimbursement Launch of Smart Liquid Biopsy for G360 Volume growth Shield IVD launch Volume growth in U.S. International expansion



GUARDANT[™]