In Part 1D (single agent PF-07220060, 400 mg BID food cohort), a total of 4 (66.7%) of the 6 participants reported treatment-related TEAEs. Most frequently reported (≥20%) treatment-related TEAEs were diarrhoea, leukopenia, and neutropenia (50.0% each). No Grade 3, 4 nor 5 treatment-related TEAEs were reported.

Safety Conclusion:

The available safety results support the ongoing clinical development of PF-07220060 for treatment of HR+, HER2- advanced or mBC and potentially other tumors that thrive in a CDK4-dependent fashion, including adenocarcinoma of NSCLC, prostate cancer, CRC, liposarcoma, and tumors with previously confirmed CDK4 or CCND1 amplification according to local standard tests.

III. Efficacy

The efficacy data was obtained from the 70 evaluable patients. As of October 15, 2022, PF-07220060 demonstrated a disease control rate of 65.7% (n=65.7/100) in evaluable patients across all cohorts. This included one participant with confirmed complete response, and six participants with confirmed partial responses. Among the evaluable patients who assessed as per RECIST version 1.1 (**Table 5**), the disease control rate was 57.9% (n=22/38) in the single agent PF-07220060 group (Total Part 1A), 80.8% (n=21/26) in the combination group PF-07220060 + endocrine therapy (Part 1B + Part 1C).

Table 5: Best Overall Response

	PF-07220060 Single Agent	**PF-07220060 + letrozole**	**PF-07220060 + fulvestrant**	**PF-07220060 in Combination with Endocrine Therapy**	**Food effect on PK of PF-07220060 at or below monotherapy MTD**	**Total**
	Total Part 1A (n=38)	**Total Part 1B (n=13)**	**Total Part 1C (n=13)**	**Total Part 1B + Part 1C (n=26)**	**Part 1D (n=6)**	**(n=70)**
Confirmed Best Overall Response, n (%)						
Complete response (CR)	0	1 (7.7)	0	1 (3.8)	0	1 (1.4)