

**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): November 4, 2022**

**BIOATLA, INC.**  
(Exact Name of Registrant as Specified in Its Charter)

**Delaware**  
(State or other jurisdiction  
of incorporation)

**001-39787**  
(Commission  
File Number)

**85-1922320**  
(IRS Employer  
Identification No.)

**11085 Torreyana Road**  
**San Diego, California**  
(Address of Principal Executive Offices)

**92121**  
(Zip Code)

**Registrant's Telephone Number, Including Area Code: 858 558-0708**

(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 (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))

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

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
<b>Common Stock, par value \$0.0001 per share</b>	<b>BCAB</b>	<b>NASDAQ Global Market</b>

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (17 CFR 230.405) or Rule 12b-2 of the Securities Exchange Act of 1934 (17 CFR 240.12b-2).

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.

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**Item 8.01 – Other Events**

BioAtla, Inc. (the “Company”) provided supplemental clinical program updates for mecbotamab vedotin (BA3011) in non-small cell lung cancer (NSCLC) and sarcoma in a corporate presentation, which presentation is attached as Exhibit 99.1 to this Current Report on Form 8-K. The Company may use such presentation from time to time in conversations with investors and analysts.

**Item 9.01 - Financial Statements and Exhibits.**

(d) Exhibits.

<b>Exhibit</b>	<b>Description</b>
99.1	<a href="#">Corporate Presentation</a>
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 hereunto duly authorized.

Dated: November 4, 2022

BIOATLA, INC.

By: /s/ Jay M. Short

Name: Jay M. Short

Title: Chief Executive Officer



**BA3011 Supplemental  
NSCLC and Sarcoma Data**

10/2022

Preliminary Data

24 patients enrolled

6 patients on-going with 0 scan (3 combo)  
 2 patients not dosed yet  
 2 withdrawal of consent early, before the first scan

14 efficacy-evaluable patients\*

ORR: 5/14 (36%)

12 Non-Sq patients

2 Sq patients

ORR: 5/12 (42%)

ORR: 0/2 (0%)

ORR: 4/8 (50%)

ORR: 1/4 (25%)

8 monotherapy

4 combo

1 Mono  
PD

1 Combo  
SD

4 PRs  
2 SD  
2 PD

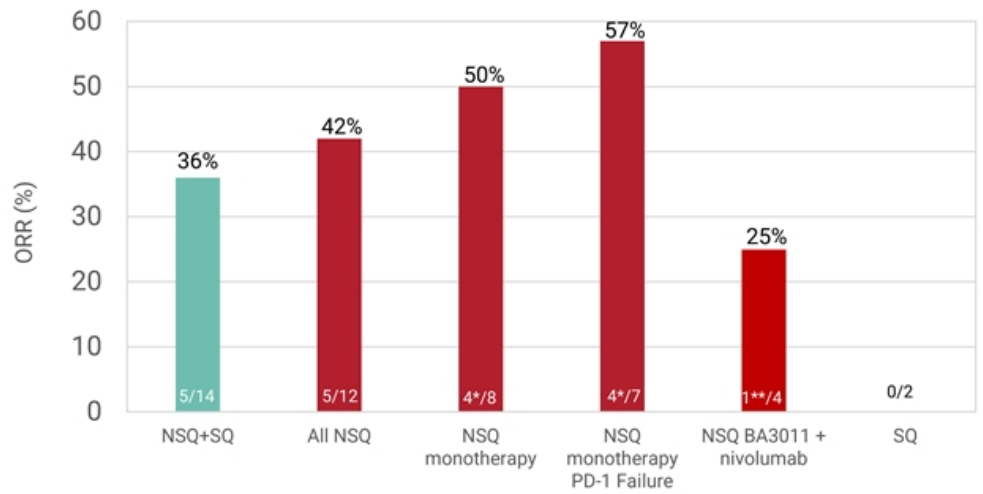
1 CR  
2 SD  
1 PD

\*Average prior lines of therapy = 3

All patients were PD-1 failure with the exception of 1 NSQ patient who failed EGFR treatment

Interim data- Data cut-off of Oct 28, 2022

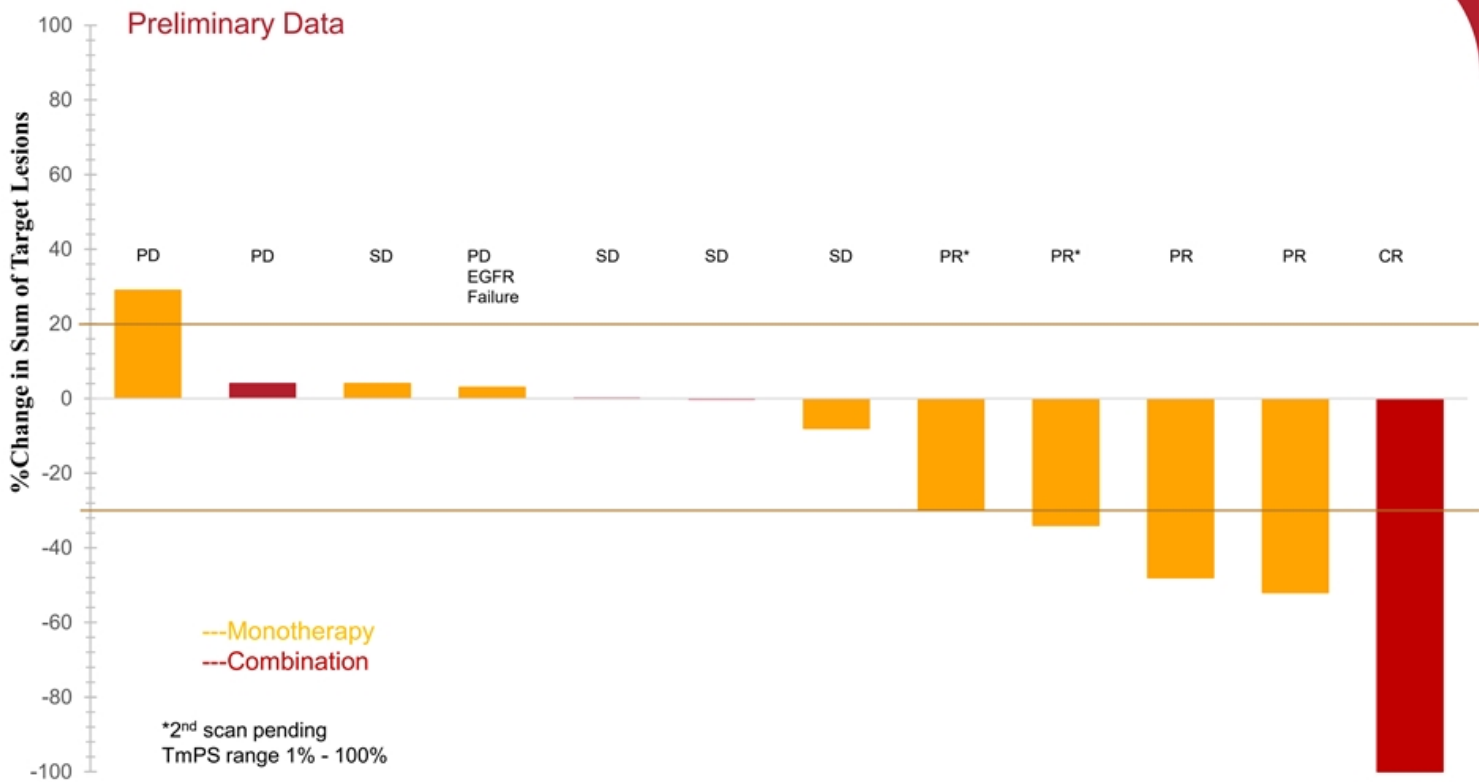
	# Patients
Enrolled	24
Dosed / 0 scan	6 (3 combo)
Not yet dosed	2
W/D consent	2
Efficacy evaluable	14



W/D – withdrew; NSQ – non-squamous; SQ – squamous  
 Responses include 4 partial responses (\*) and one complete response (\*\*)

Interim data- Data cut-off of Oct 28, 2022

Non-Squamous patients - Phase 2 only 1.8mg/kg Q2W



Average prior lines of therapy = 3  
 All patients were PD-1 failure with the exception of 1 NSQ patient who failed EGFR treatment  
 Interim data- Data cut-off of Oct 28, 2022

## Phase 2 at the RP2D 1.8 mg/kg Q2W

Characteristic	BA3011 (N=13)	BA3011 + Opdivo (N=9)
Any Adverse Events (AEs)	11 (85%)	6 (67%)
Related AEs with CTCAE <sup>1</sup> Grade 3 or 4 <sup>2</sup>	4 (31%)	2 (22%)
Any related serious AEs <sup>2</sup>	2 (15%)*	2 (22%) <sup>^</sup>
Related AEs leading to death <sup>2</sup>	0	0
Related AEs leading to treatment discontinuation <sup>2</sup>	1 (8%) <sup>§</sup>	0

Constipation	Grade 1-2 (9%)
	Grade 3-4 (0%)
Peripheral Neuropathy	All Grade 1-2 (4.5%)
	Grade 3-4 (0%)
Diarrhea	Grade 1-2 (14%)
	Grade 3-4 (0%)

Low-grade constipation observed is consistent with baseline levels seen in advanced cancer patients

- No treatment-related deaths
- Few treatment-related SAEs
- Few AEs leading to treatment discontinuation
- No clinically meaningful on-target toxicity observed over background
- Differentiated profile due to avoiding on-target off-tumor toxicity



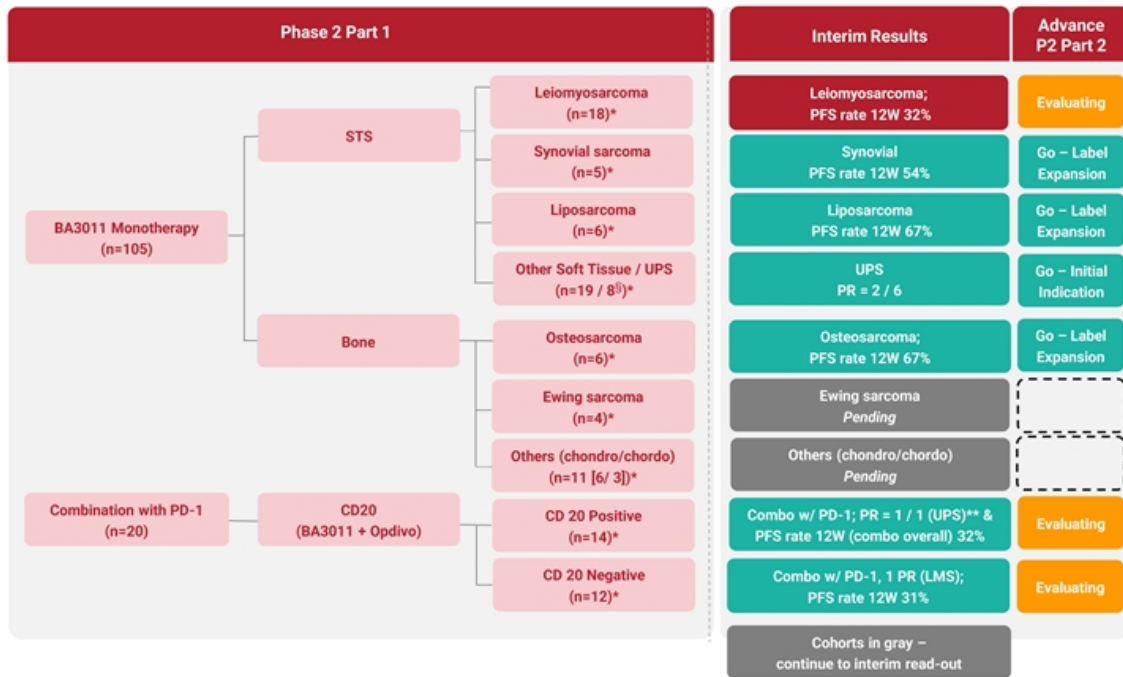
Company material - confidential

Interim data- Data cut-off of Oct 25, 2022

Note: <sup>1</sup>CTCAE: Common Terminology Criteria for Adverse Events. The NCI Common Terminology Criteria for Adverse Events is a descriptive terminology which is utilized for Adverse Event (AE) reporting. A grading (severity) scale is provided for each AE term. <sup>2</sup>As assessed by the investigator. Missing responses are counted as related. <sup>\*</sup>Hyperglycemia & infusion reaction <sup>^</sup>creatinine increase & Acute kidney injury, <sup>§</sup>infusion reaction



## following BA3011 in refractory sarcoma subtypes

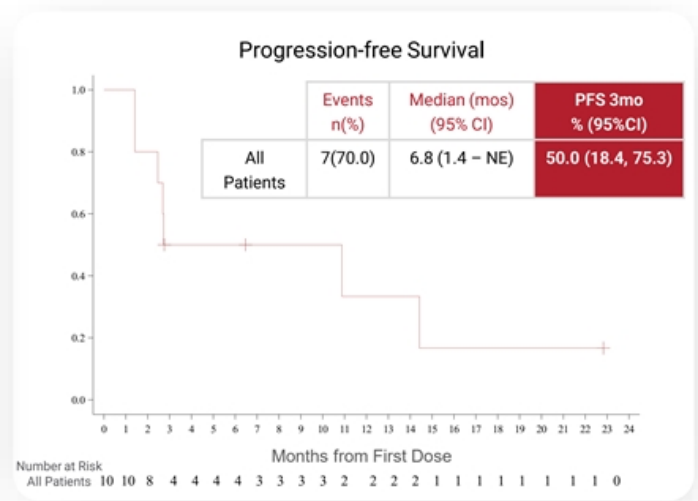
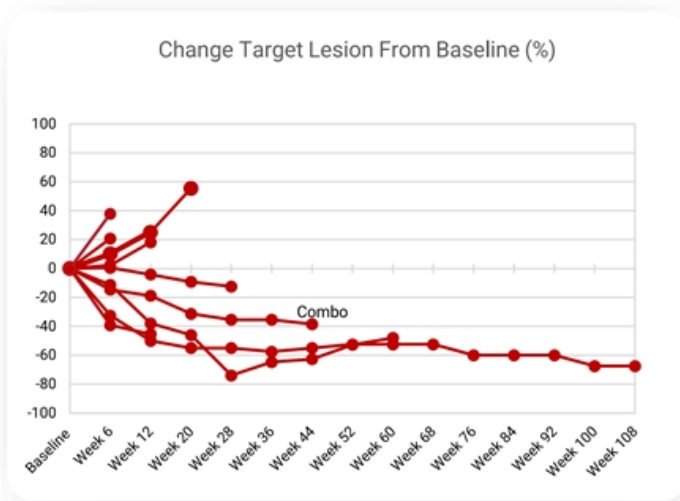


Interim results satisfied pre-defined 'Go' criteria into part 2 of the Phase 2 BA3011 study in multiple sarcoma subtypes:

- UPS – clear guidance from FDA, moving in phase 2, part 2 as initial indication
- Osteosarcoma, liposarcoma and synovial – pursue registration post UPS approval

Pre-defined criteria for each subgroup up to 10 patients: 'No Go' if 0 CR/PR and PFS rate at 3 months <40%; 'Go' if ≥1 CR/PR or PFS rate at 3 months ≥40%. \* As of data cut-off Oct 17, 2022; Cohorts in gray continuing enrollment until sufficient sample size is achieved. \*\*Included in UPS cohort. BA3011 dose 1.8 mg/kg Q2W. PFS, progression-free survival; PR, partial response; UPS, undifferentiated pleomorphic sarcoma. <sup>§</sup>Of 8 enrolled, 6 efficacy evaluable; 2 on-going with 1 scan.

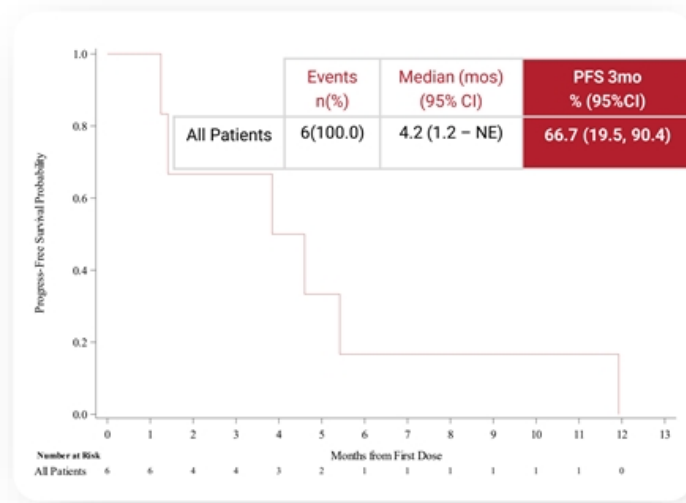
## Phase 1 & 2 (1.8mg/kg; n=10)



- Combined Phase 1 & 2: enrolled = 10; efficacy evaluable = 8; on-going with 1 scan = 2
  - 4 / 8 patients achieved PRs, with an ORR of 50% and PFS rate at 3 months of 50%
  - Responses to BA3011 treatment are durable, with partial responders remaining on treatment for extended periods of time
- Interim results satisfied the pre-defined Go criteria of UPS cohort into part 2 of the Phase 2 study

Interim data- Data cut-off of Oct 17, 2022

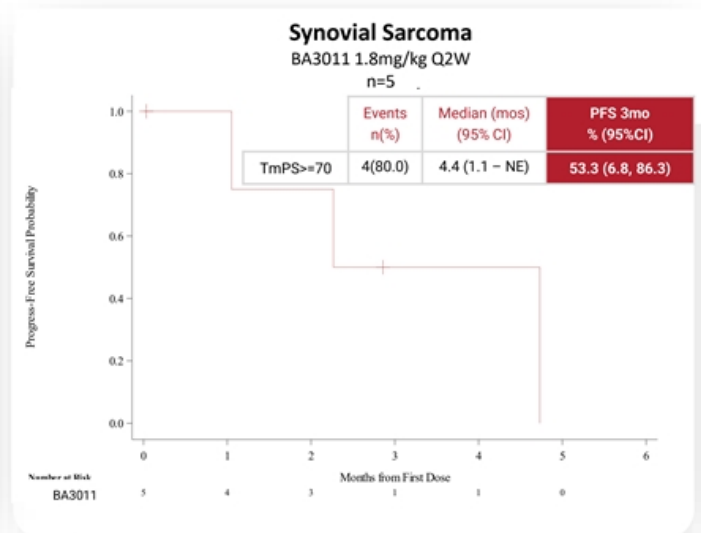
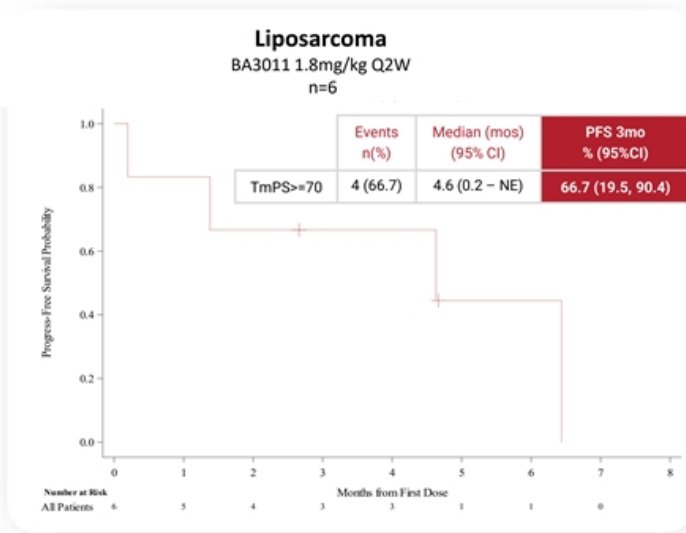
## Phase 2 Change in Target Lesion and Progression Free Survival (1.8mg/kg; n=6)



- Of 6 patients enrolled, PFS rate at 3 months was 66.7%
- Interim results satisfied the pre-defined Go criteria of osteosarcoma cohort into part 2 of the Phase 2 study

Interim data- Data cut-off of Oct 17, 2022  
 Recent independent phase 2 study demonstrated placebo PFS rate at 2 months for 1st and 2nd line metastatic osteosarcoma of ~0% ([www.thelancet.com/oncology Vol 20 January 2019](http://www.thelancet.com/oncology Vol 20 January 2019))

## Phase 2 Progression Free Survival



- Interim results satisfied the pre-defined Go criteria of liposarcoma and synovial sarcoma cohorts into part 2 of the Phase 2 study.

Interim data- Data cut-off of Oct 17, 2022

## Phase 2 at the RP2D 1.8 mg/kg Q2W

### Overview

- AEs consistent with MMAE-based toxicity, including:
  - Reversible myelosuppression
  - Transient liver enzyme elevation
  - Metabolic disturbances
- Few related SAEs
- Few related AEs leading to treatment discontinuation



Characteristic	BA3011 (N=63)	BA3011 + Nivo (n=26)
Any Adverse Events (AEs)	60 (95%)	24 (92%)
Related AEs with CTCAE <sup>1</sup> Grade 3 or 4 <sup>2</sup>	17 (27%)	8 (30%)
Any related serious AEs <sup>2</sup>	5 (8%)	4 (15%)
Related AEs leading to death <sup>2</sup>	0	0
Related AEs leading to treatment discontinuation <sup>2</sup>	3 (5%) <sup>§</sup>	1 (3.8%) <sup>^</sup>

Note: <sup>1</sup>CTCAE: Common Terminology Criteria for Adverse Events. The NCI Common Terminology Criteria for Adverse Events is a descriptive terminology which is utilized for Adverse Event (AE) reporting. A grading (severity) scale is provided for each AE term. <sup>2</sup>As assessed by the investigator. Missing responses are counted as related. <sup>§</sup>Grade 2 peripheral neuropathy; pancreatitis; <sup>^</sup>grade 2 ileus

Data cut-off of Oct 17 2022

### Mecbo – BA3011

Constipation	Grade 1-2 (19%)
	Grade 3-4 (1%)
Peripheral Neuropathy	All Grade 1-2 (19%)
Diarrhea	Grade 1-2 (19%)
	Grade 3-4 (0%)

Constipation is believed to be an on-target mediated effect  
Low-grade constipation observed is consistent with baseline levels seen in advanced cancer patients

- No clinically meaningful on-target toxicity observed
- Differentiated profile due to advantageous pharmacokinetic characteristics of CAB ADCs

- Written feedback received from the FDA to the proposed part 2 of the Phase 2 study design, including selection of primary endpoint (ORR) and size of the study (n=80)
- FDA supportive of including a more intensive dosing arm
- Protocol being finalized post FDA written feedback
- Anticipate study enrollment commencement by year-end