CIDARA THERAPEUTICS

CORPORATE PRESENTATION

LEADING THE SCIENCE OF PROTECTION

FORWARD-LOOKING STATEMENTS

These slides contain forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995.

The words “may,” “will,” “estimate,” “plan”, “anticipate,” “expect,” “potential,” “could,” “project,” and similar expressions (including the negative thereof), are intended to identify forward-looking statements. Because such statements are subject to risks and uncertainties, actual results may differ materially from those expressed or implied by such forward-looking statements. Such statements include, but are not limited to, statements regarding Cidara’s research and development efforts; preclinical and clinical development activities; plans, projections and expectations for and the potential effectiveness, safety and benefits of, its product candidates, including rezafungin, CD388, and other antiviral and oncology product candidates from the Cloudbreak platform; Cidara’s potential ability to achieve milestones under its respective collaborations with Melinta, Mundipharma and Janssen, and receipt of the related milestone payments; and advancement of its strategic plans.

Projections, assumptions and estimates of the future performance of the markets in which Cidara operates are necessarily subject to a high degree of uncertainty and risk, including, Cidara's ability to obtain additional financing; the success and timing of Cidara’s preclinical studies, clinical trials and other research and development activities; receipt of necessary regulatory approvals for development, as well as changes to applicable regulatory laws in the United States and foreign countries; changes in Cidara's plans to develop its product candidates; Cidara's ability to obtain and maintain intellectual property protection for its product candidates; and the loss of key scientific or management personnel. These and other risks and uncertainties are described more fully in Cidara's Form 10-Q as most recently filed with the United States Securities and Exchange Commission ("SEC“') under the heading “Risk Factors.”

Additional risks and uncertainties may emerge from time to time, and it is not possible for Cidara’s management to predict all risk factors and uncertainties.

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CIDARA THERAPEUTICS

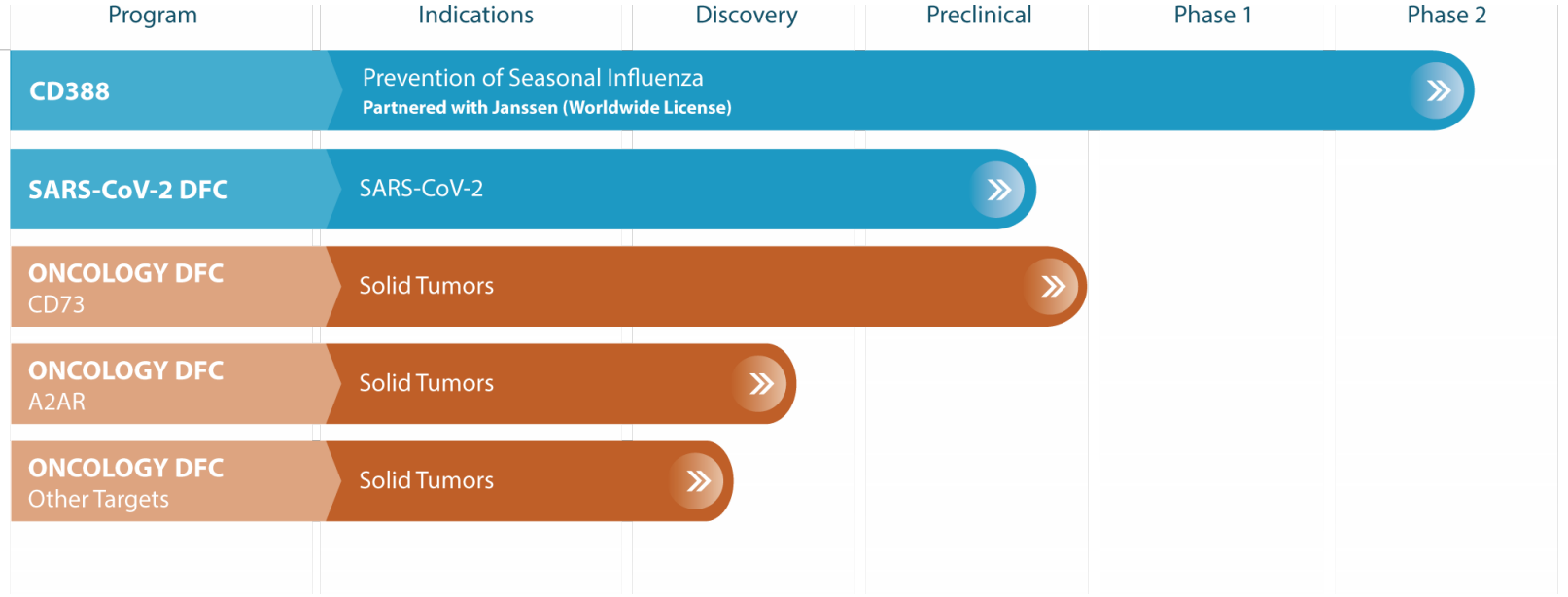
REZAFUNGIN AND CLOUDBREAK PROGRAMS

REZAFUNGIN

- Echinocandin antifungal treatment & prevention
- Positive Phase 3 data
- NDA submitted, July 2022
- Expected PDUFA Q1 2023

CLOUDBREAK

- Novel immunotherapy platform: antiviral & oncology
- Clinical stage (influenza) – CD388; Phase 2a initiated Q3 2022
- Preclinical (oncology) – CD73; IND-enabling studies underway
- Opportunity to drive future value



A TRACK RECORD OF FORGING PARTNERSHIPS

Over $1.8 Billion in Potential Value from Existing Licenses*

Rezafungin

mundipharma 2019

Rights: ex-US/Japan

~$568M

Phase 2 data

- $30M upfront
- $9M equity investment
- $42M in development support
- $487M clin/reg/comm milestones
- Double-digit royalties in the teens

melinta therapeutics 2022

Rights: US

~$470M

Phase 3 data/ NDA Filed

- $30M upfront
- $60M regulatory milestones
- $360M clinical milestones
- Low double-digit to mid-teens royalties

Cloudbreak (CD388)

Janssen 2021

Program: Influenza--CD388 | **Rights:** Global

~$780M

Preclinical data

- $27M upfront
- $58M in R&D support
- $695M clin/reg/comm milestones
- Mid to high single digit royalties

* Does not include royalties.

CIDARA THERAPEUTICS

CIDARA'S NEW STRATEGIC FOCUS: CLOUDBREAK DFC PROGRAM

REZAFUNGIN

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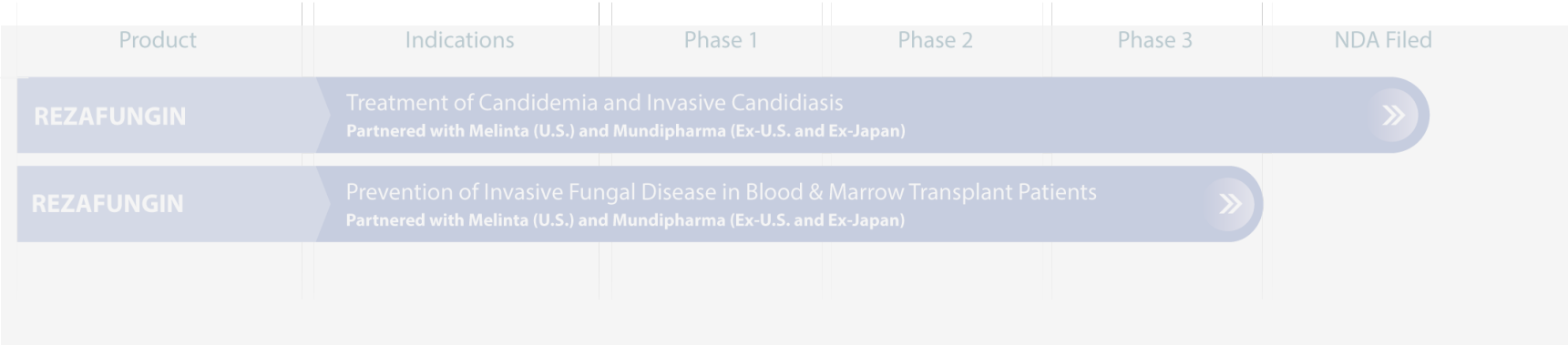

CLOUDBREAK

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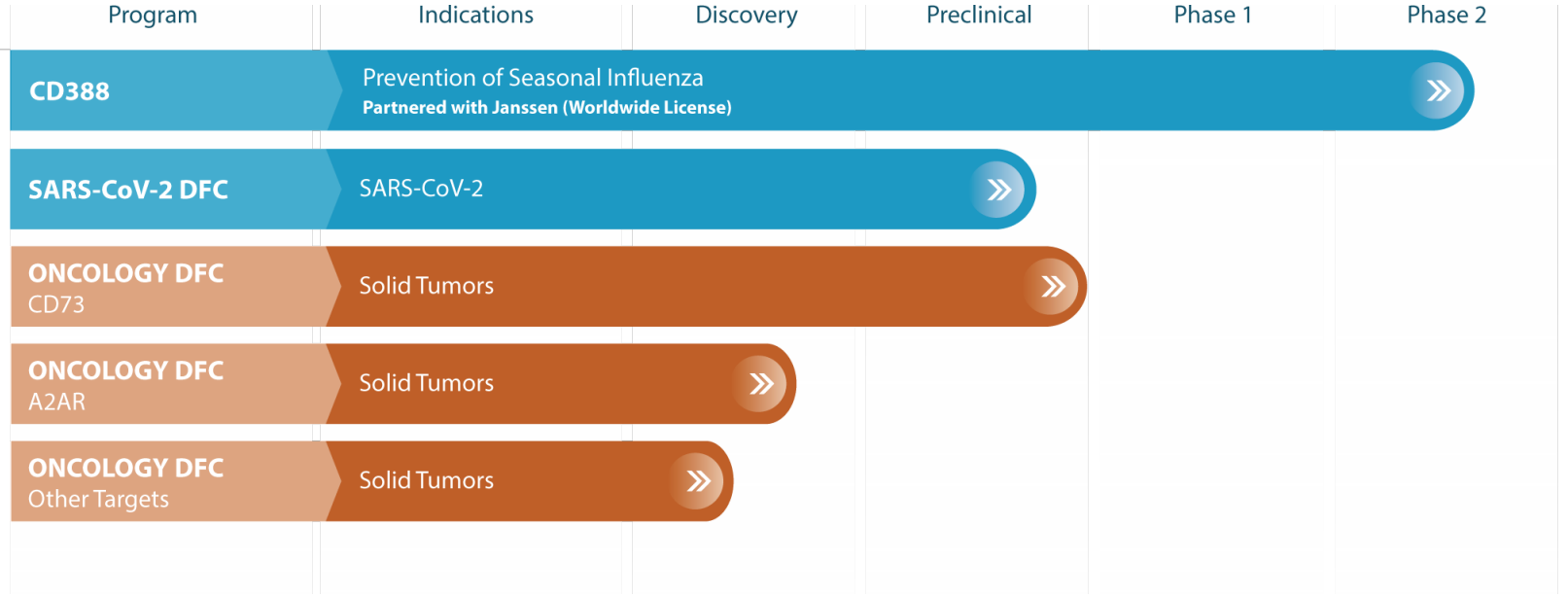
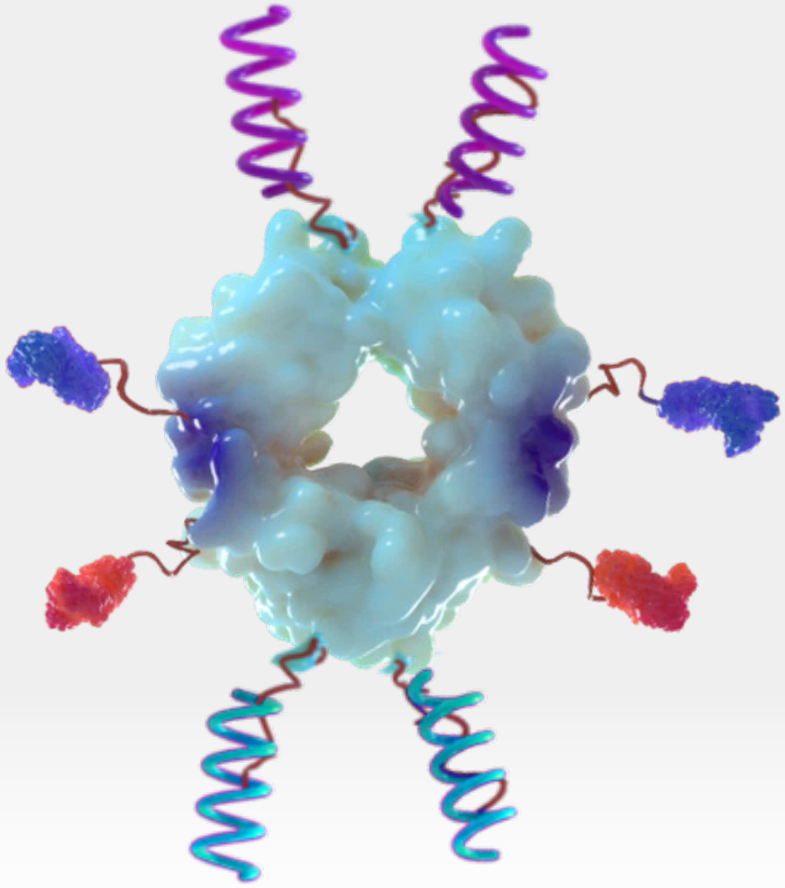


CLOUDBREAK® CREATES A NEW CLASS OF DRUG CONJUGATES: "DFCs"

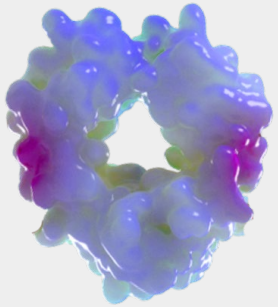
DFC

Drug Fc Conjugate



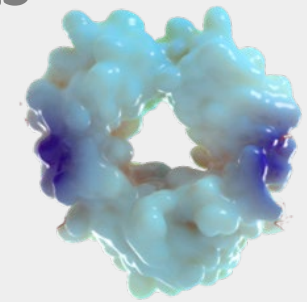
Fc MOIETY IS TAILORED TO SPECIFIC INDICATIONS

Fc MOIETY



Wild type

ANTIVIRALS



PK extended Fc

- IgG1
- Enhanced FcRn binding
- Increased half-life compared to wild-type

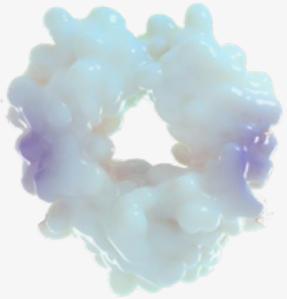
CANCER

Immune silent Fc

- IgG1 and IgG4
- IgG1 with reduced immune effector function
- IgG4 lacks effector function

DIFFERENT TYPES OF TARGETING MOIETIES (TMs) ATTACH TO THE Fc MOIETY

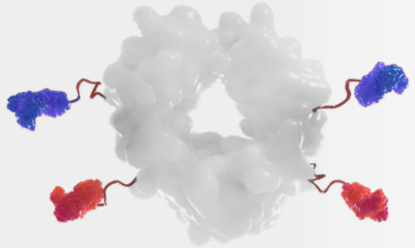
Fc MOIETY



ANTIVIRALS

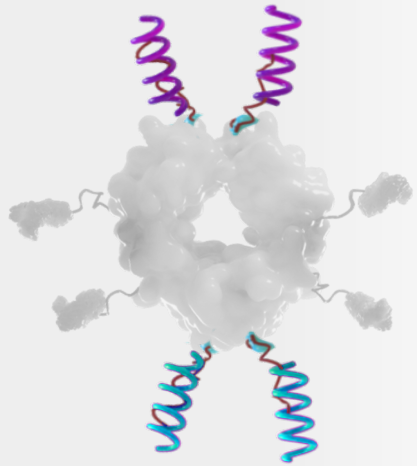
SMALL MOLECULES (SM)

Directed against surface targets
Example: Neuraminidase in CD388.



PEPTIDE FUSIONS

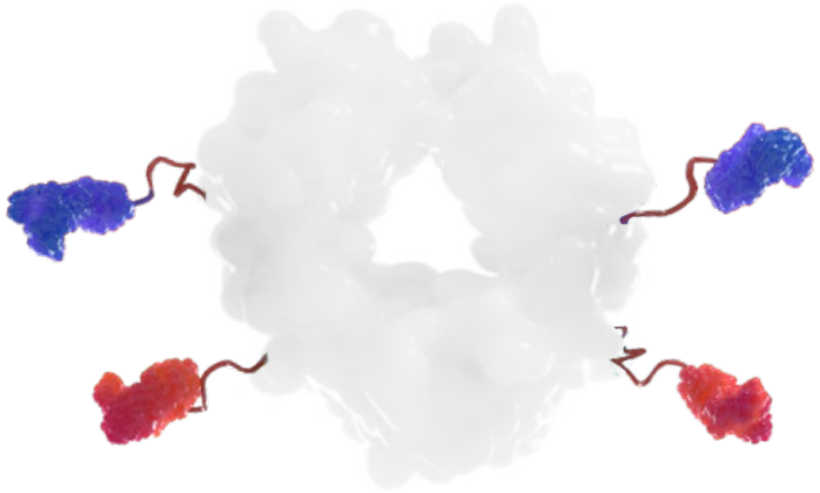
Inhibit protein-protein interactions.
Example: SARS spike-binding/ACE-2



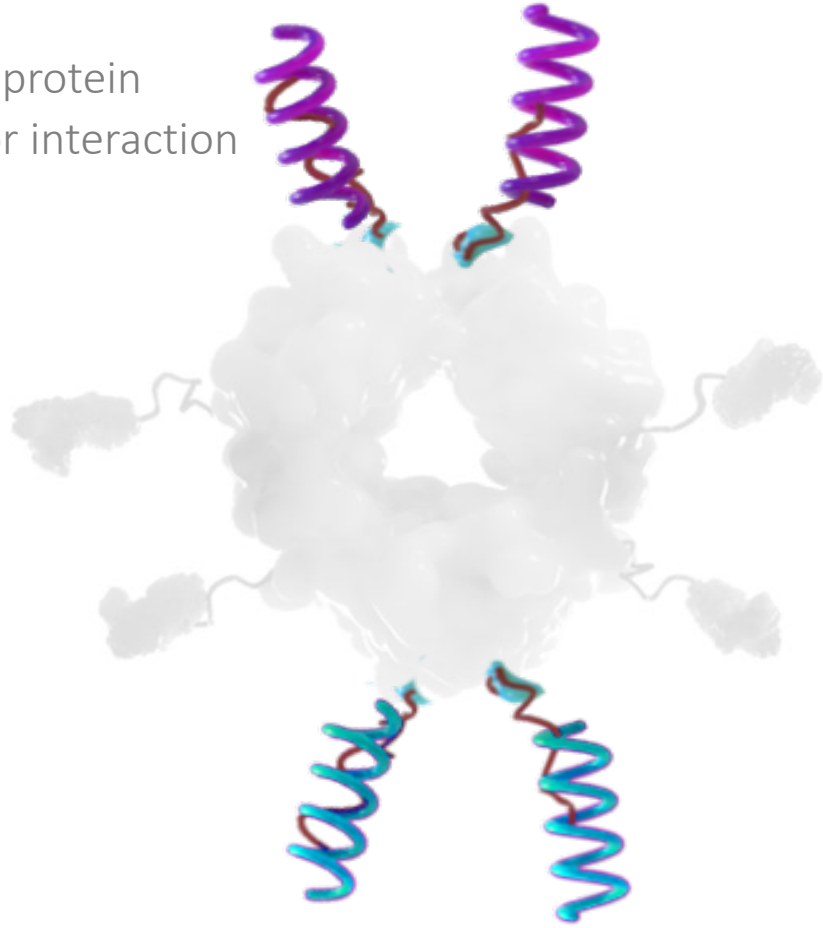
TARGETING MOIETIES ARE DIRECTED AGAINST VALIDATED TARGETS

INFLUENZA: neuraminidase

CANCER: adenosine-signaling pathway

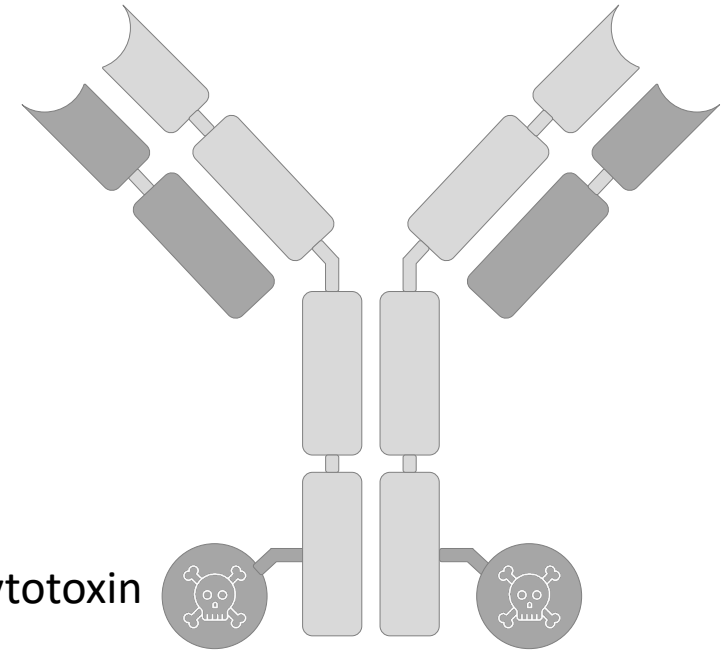


SARS: spike protein
ACE-2 receptor interaction



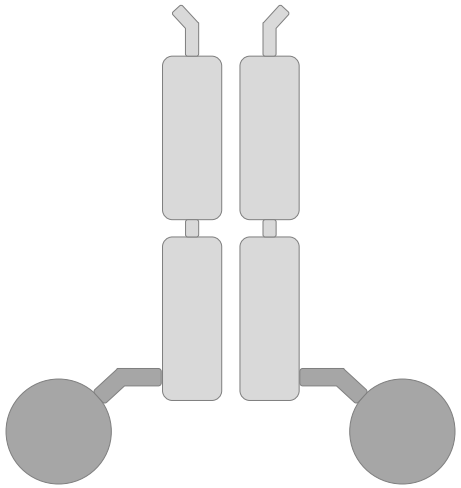
DFCs ARE MORE VERSATILE AND LESS TOXIC THAN ADCs

ADC



SM Cytotoxin

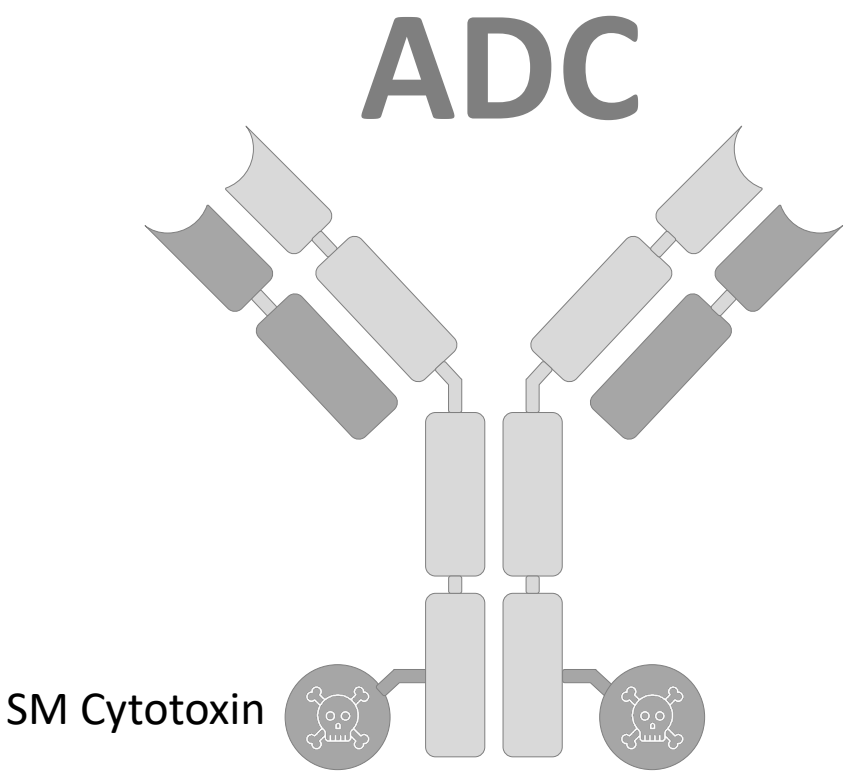
DFC

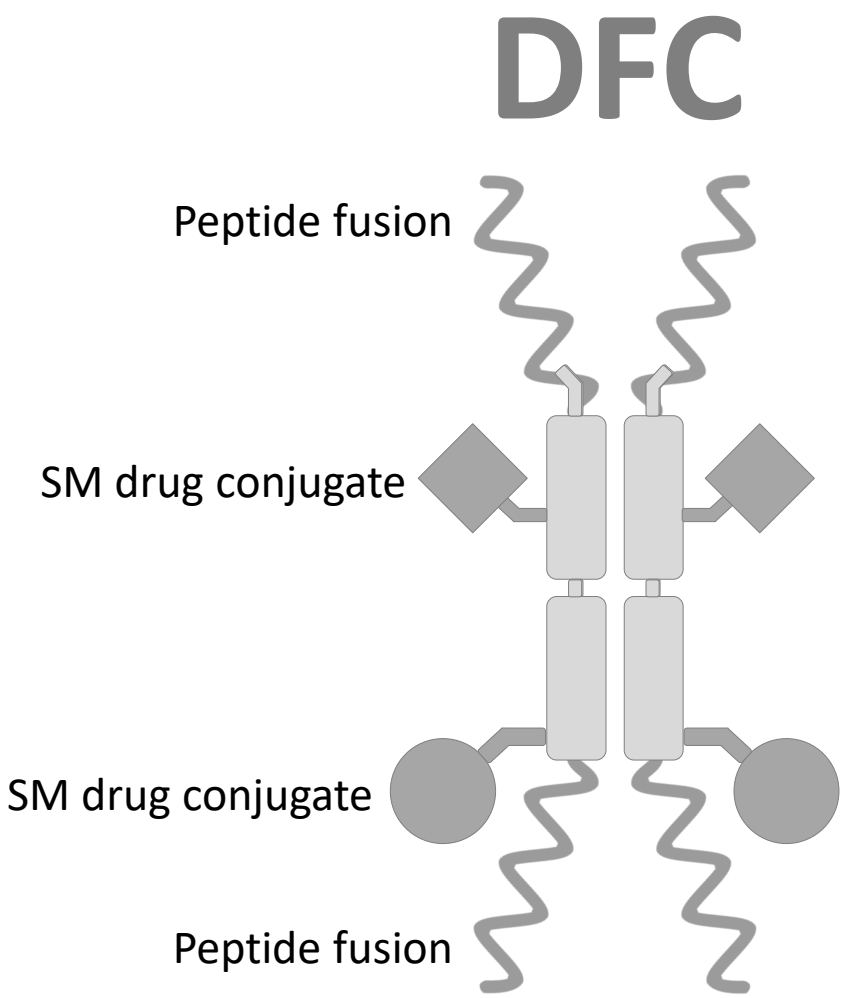


SM drug conjugate

10

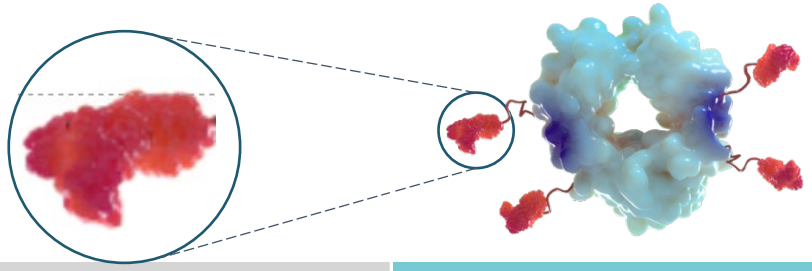
DFCs ARE MORE VERSATILE AND LESS TOXIC THAN ADCs





11

DFCs HAVE ADVANTAGES OVER SMALL MOLECULE THERAPEUTICS

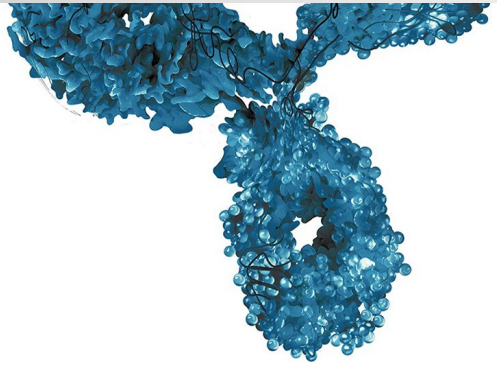


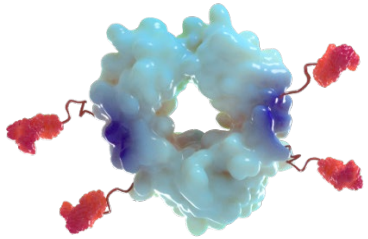
	SM Inhibitors	DFCs[1]
Potency	Single binding pocket, single target	Multivalent binding Multiple targets
Toxicity, Drug-Drug-Interactions (DDIs)	Extra- and intra-cellular compartments	Only in extra-cellular compartment
Oral bioavailability, cell penetration	Lipinski's rules	Fewer constraints, not required for activity
Distribution to compartments outside plasma (e.g., lung)	Potentially limited by cell penetration, properties	Good—dictated by Fc domain

Unlike SMs, DFC optimization can be focused primarily on potency.

1. DFC assessments are based on pre-clinical study results and estimates

DFCs HAVE ADVANTAGES OVER ANTIBODIES





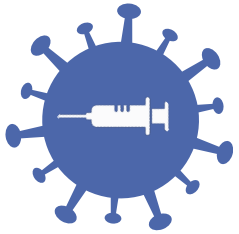
	Monoclonal Antibodies	DFCs
Able to target cryptic sites, small molecule binding pockets	No	Yes
Able to modulate drug-Fc-ratio to increase potency	No	Yes
Able to install 2 or more discrete targeting moieties	Challenging	Multiple Options
Distribution to compartments outside plasma (e.g., lung)	Limited, slow kinetics	High, rapid kinetics

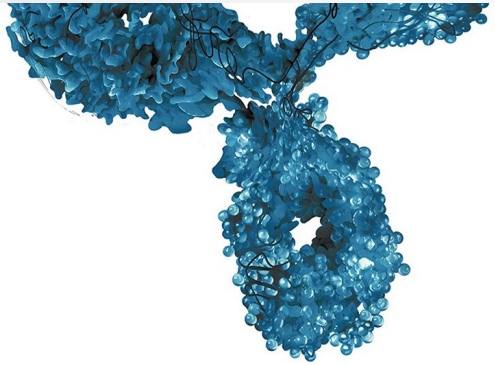
DFCs advantages over mAbs: they're smaller and can target multiple sites

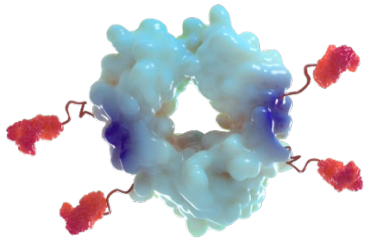
CIDARA'S PIPELINE TARGETS MULTIPLE UNMET MEDICAL NEEDS

CIDARA THERAPEUTICS

JANSSEN RECOGNIZED THE SHORTCOMINGS OF THE FLU VACCINE AND ANTIBODIES







	Vaccines	Monoclonal Antibodies	DFCs
Universal protection: multiple viruses	No	No	Yes
Potential to protect all high risk groups	Low	High	High
Potential for prevention and treatment	No	Limited	Yes
Scale and cost	Attractive	Expensive	Attractive

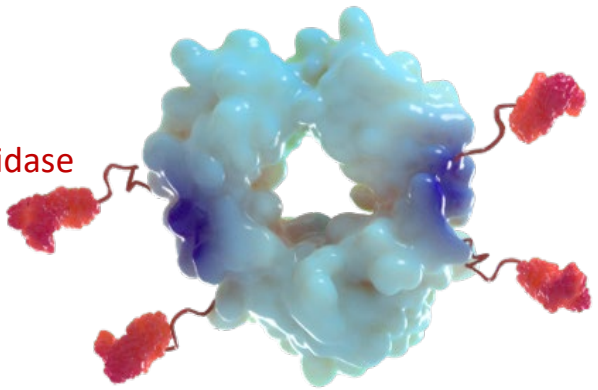
CD388 IS IN PHASE 2a FOR UNIVERSAL INFLUENZA PREVENTION

INFLUENZA

	DFCs
Universal protection: all strains	Yes
Potential to protect all high risk groups	High
Potential for prevention and treatment	Yes
Scale and cost	Attractive

CIDARA THERAPEUTICS | janssen

CD388 is being developed for universal, season-long flu protection in all patient populations.



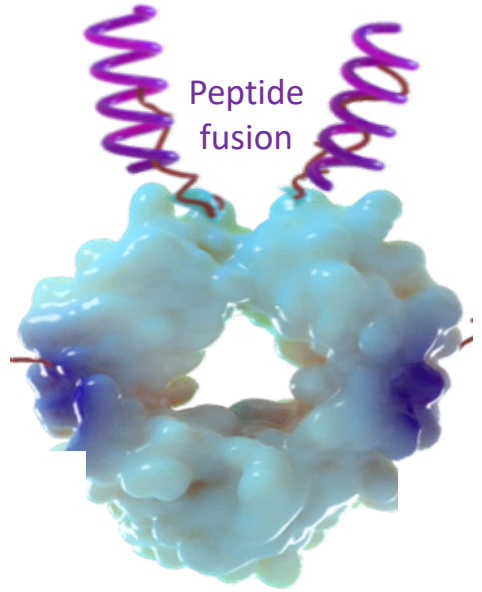
- Single dose /~4-6 months
- Phase 2a data expected 1H 2023

Data available at https://www.cidara.com/cloudbreak/influenza/ and at https://clinicaltrials.gov/ct2/show/NCT05285137

BIVALENT DFCs FOR ”UNIVERSAL” SARS-2 PREVENTION

SARS-2

	DFCs
Universal protection: multiple viruses	Yes
Potential to protect all high risk groups	High
Potential for prevention and treatment	Yes
Scale and cost	Attractive



- Peptide engineered to maximize antiviral spectrum
- Fc optimized for inhaled delivery

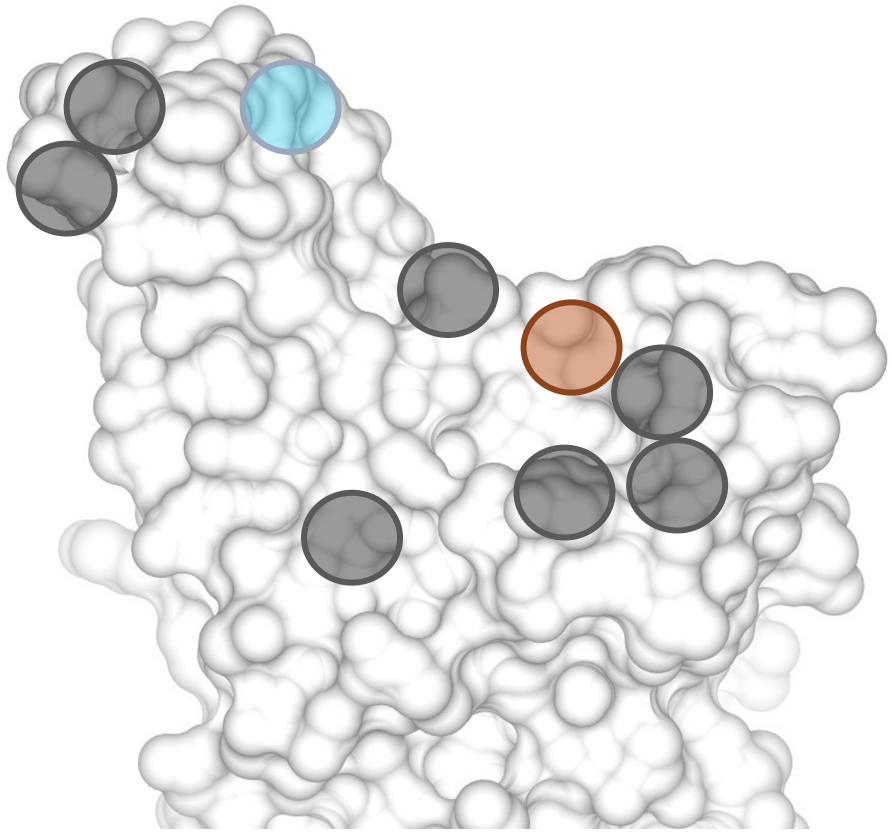
BIVALENT DFCs COVER ALL SARS STRAINS AND SUBVARIANTS

Mutations in ACE-2 binding site mapped on the delta variant spike

observed in all omicron sub-lineages

observed only in BA.1

observed only in BA.4 and BA.5



Delta variant spike protein
(PDB code 7WBQ)

	IC_{50} (nM) Spike binding		
Spike/Strain	1st generation monovalent	2nd generation monovalent	3rd generation bivalent
D614G Early variant	0.13		
Delta/B.1.617.2	0.12		
Omicron BA.1/B.1.1.529	0.12		
Omicron BA.2	0.13		
Omicron BA.4	***4.57***		
Omicron BA.5	***8.43***		

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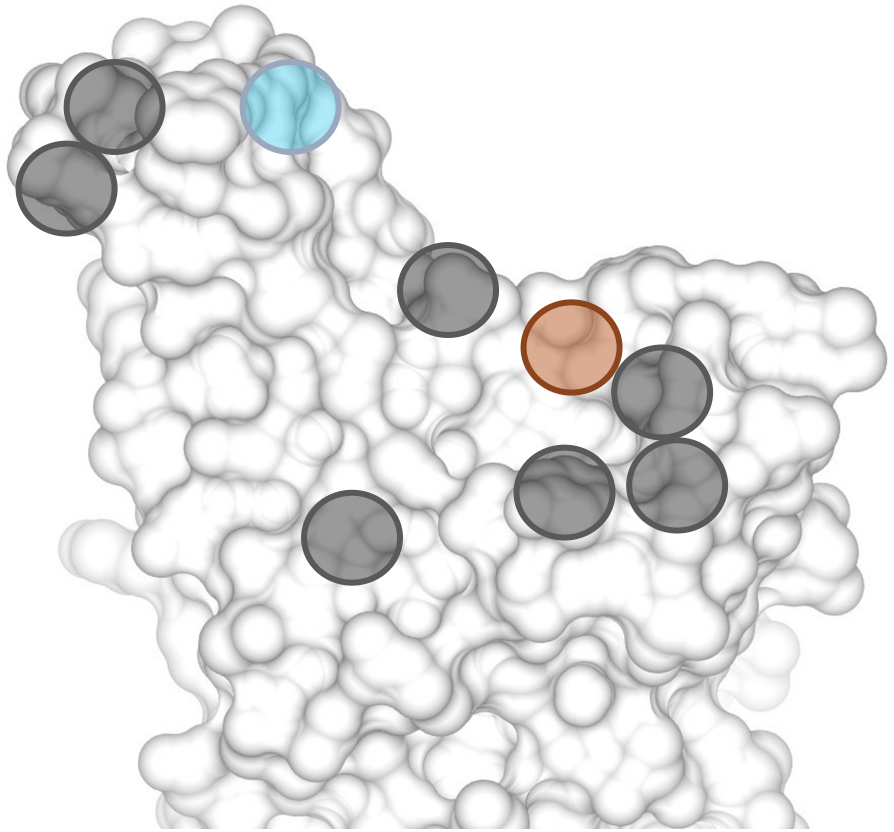

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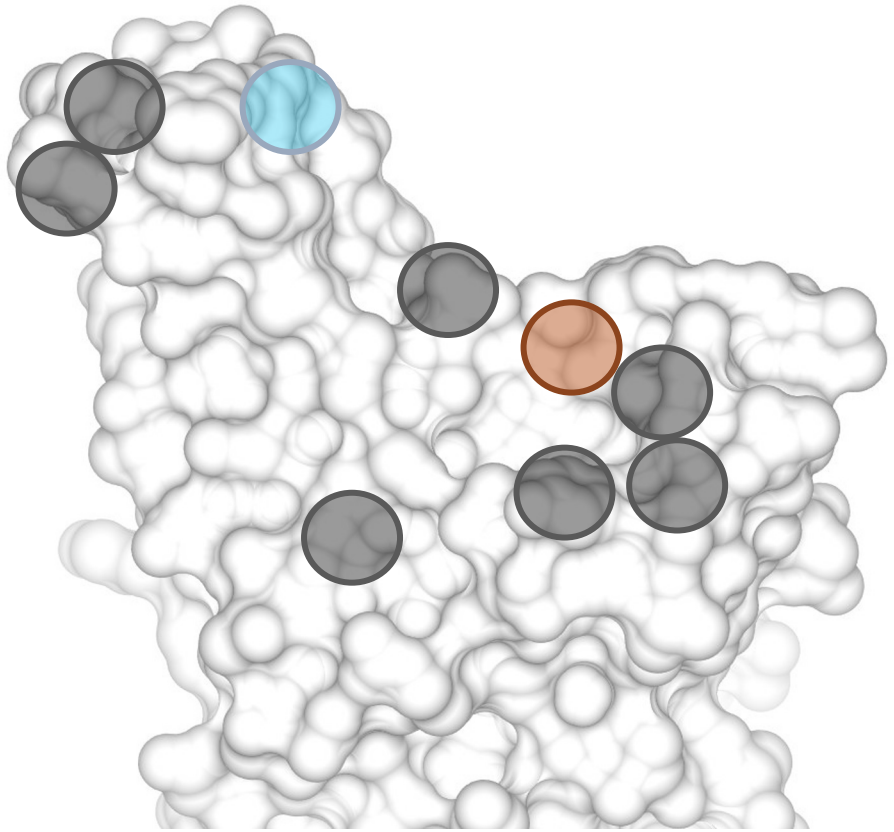

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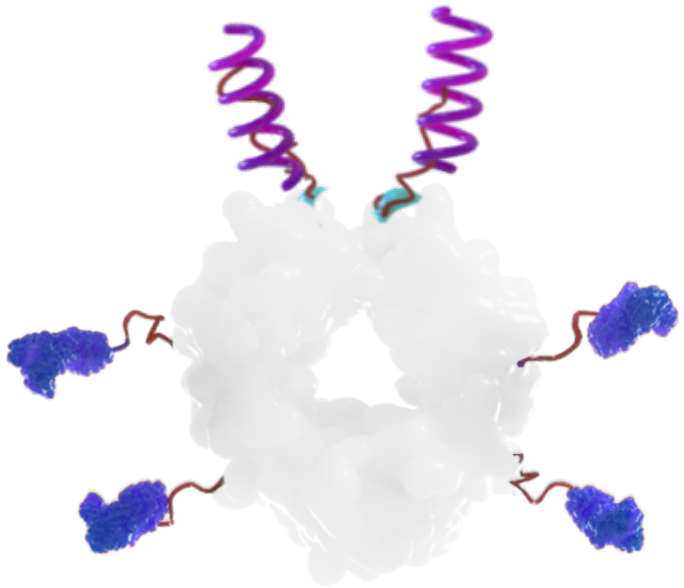
Omicron BA.5	***8.43***	***0.71***	***0.12***

SARS-’FLU

	DFCs
Universal protection: multiple viruses	Yes
Potential to protect all high risk groups	High
Potential for prevention and treatment	Yes
Scale and cost	Attractive

Flu and SARS have similar early clinical presentation. Prevention or early treatment with DFCs could dramatically reduce the incidence of severe disease.



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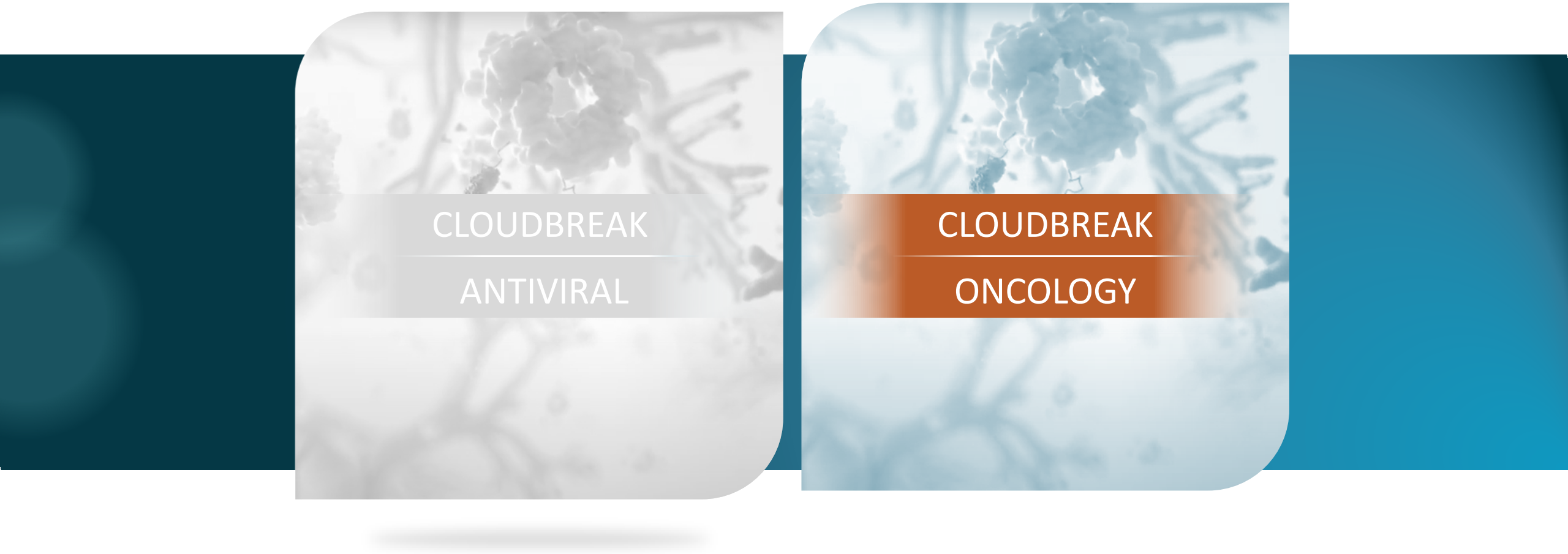
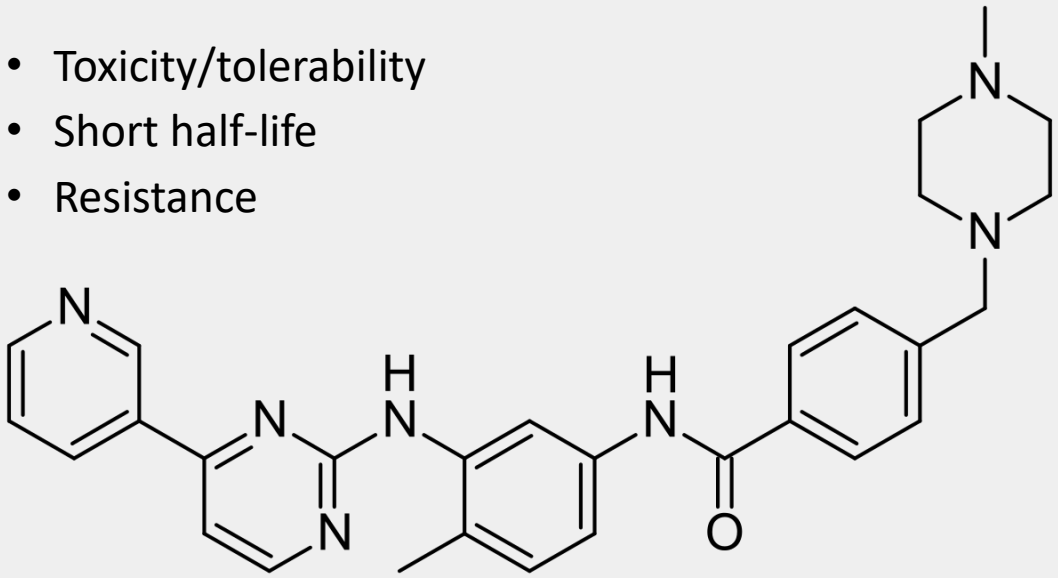


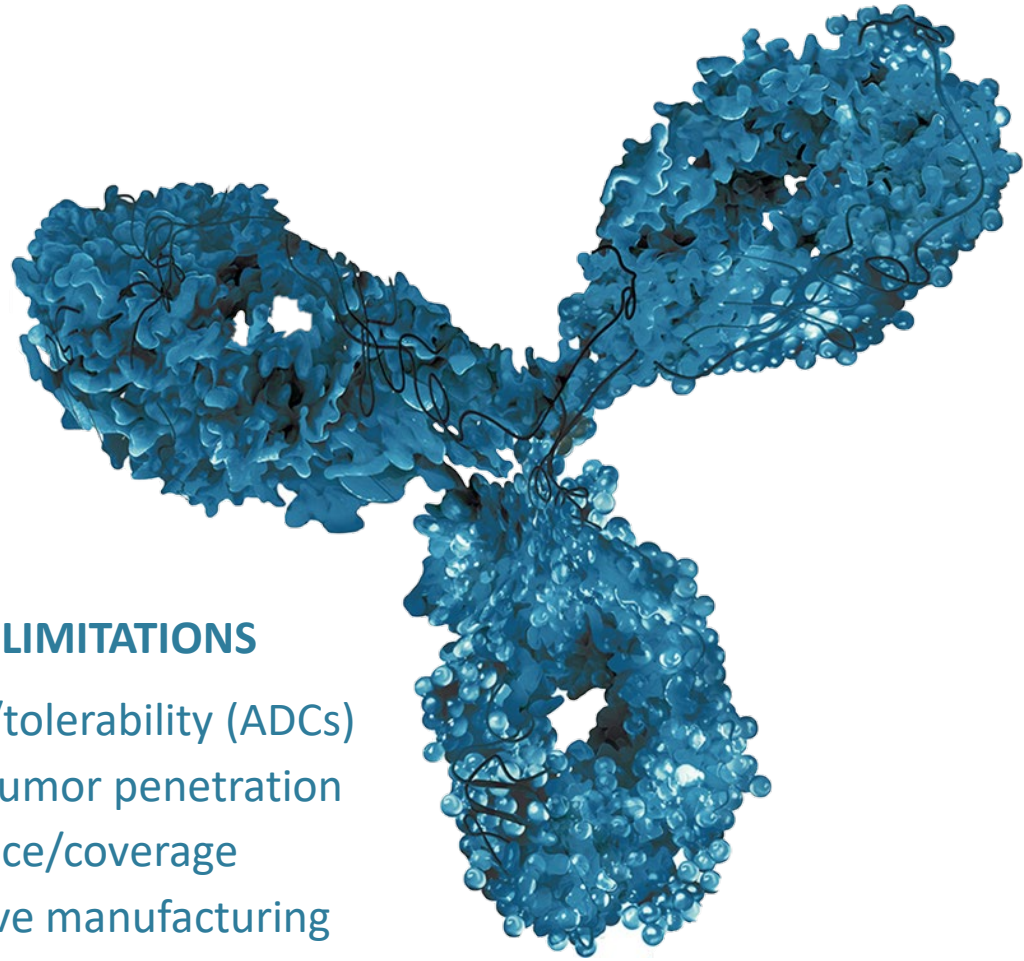
CIDARA THERAPEUTICS

ONCOLOGY FACES SIMILAR CHALLENGES TO VIRAL DISEASE

SM LIMITATIONS

- Toxicity/tolerability
- Short half-life
- Resistance



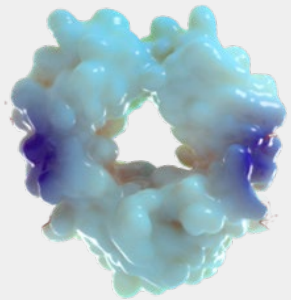


mAb/ADC LIMITATIONS

- Toxicity/tolerability (ADCs)
- Tissue/tumor penetration
- Resistance/coverage
- Expensive manufacturing

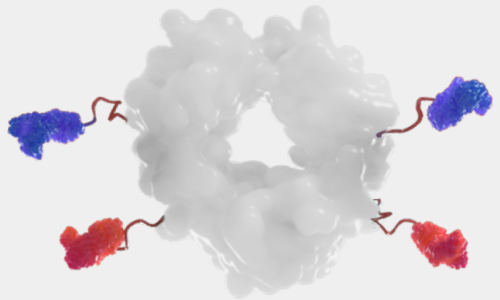
DFCs ARE UNIQUELY POSITIONED TO ADDRESS THESE LIMITATIONS

PENETRATION



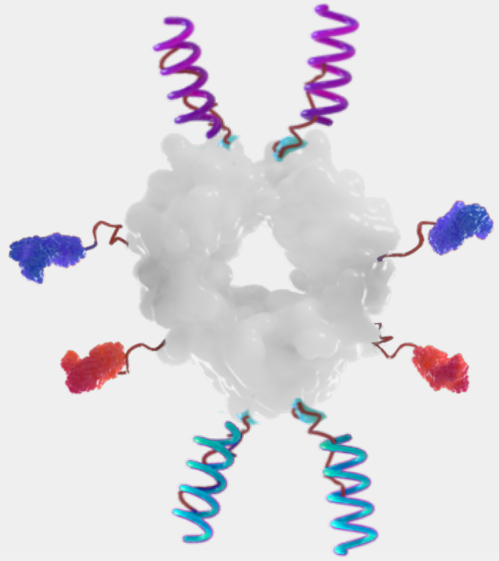
Fc prolongs PK and improves tumor penetration over mAbs

TOLERABILITY



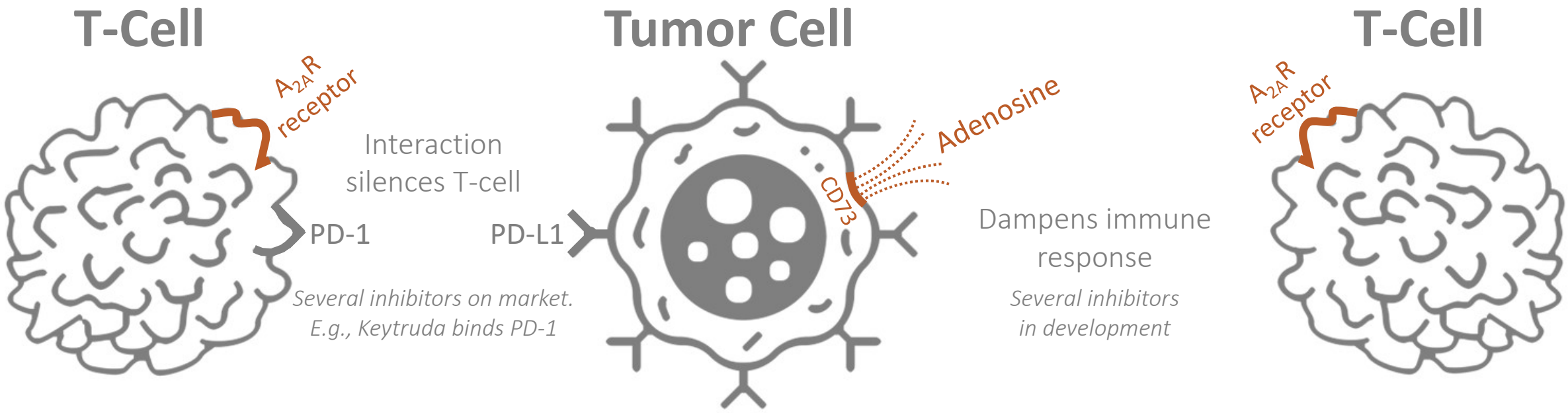
Small molecules fused to the Fc limit toxicity

EFFICACY



Multiple TMs enable a drug cocktail in a single molecule

DFCs HAVE THE POTENTIAL TO AUGMENT PD-1/PD-L1 THERAPIES



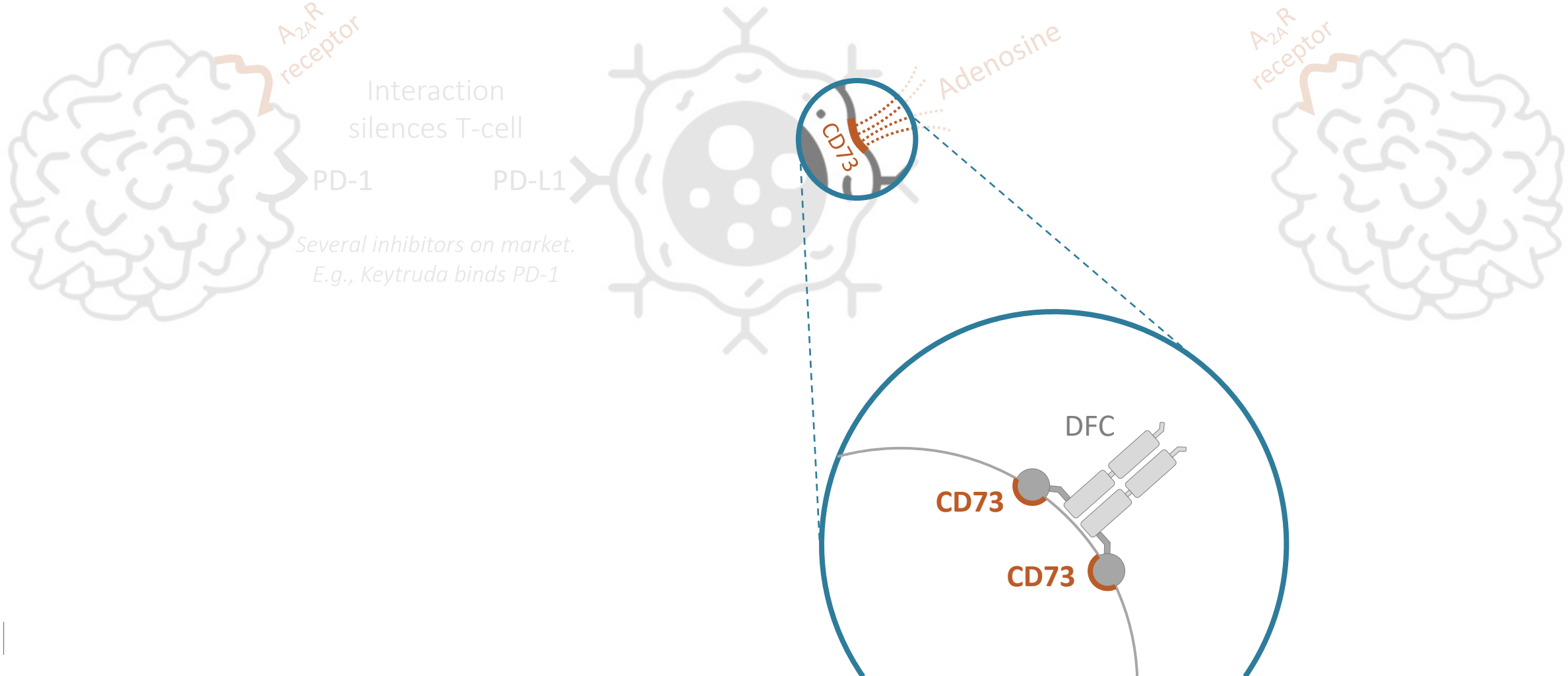
25

DFCs HAVE THE POTENTIAL TO AUGMENT PD-1/PD-L1 THERAPIES

T-Cell

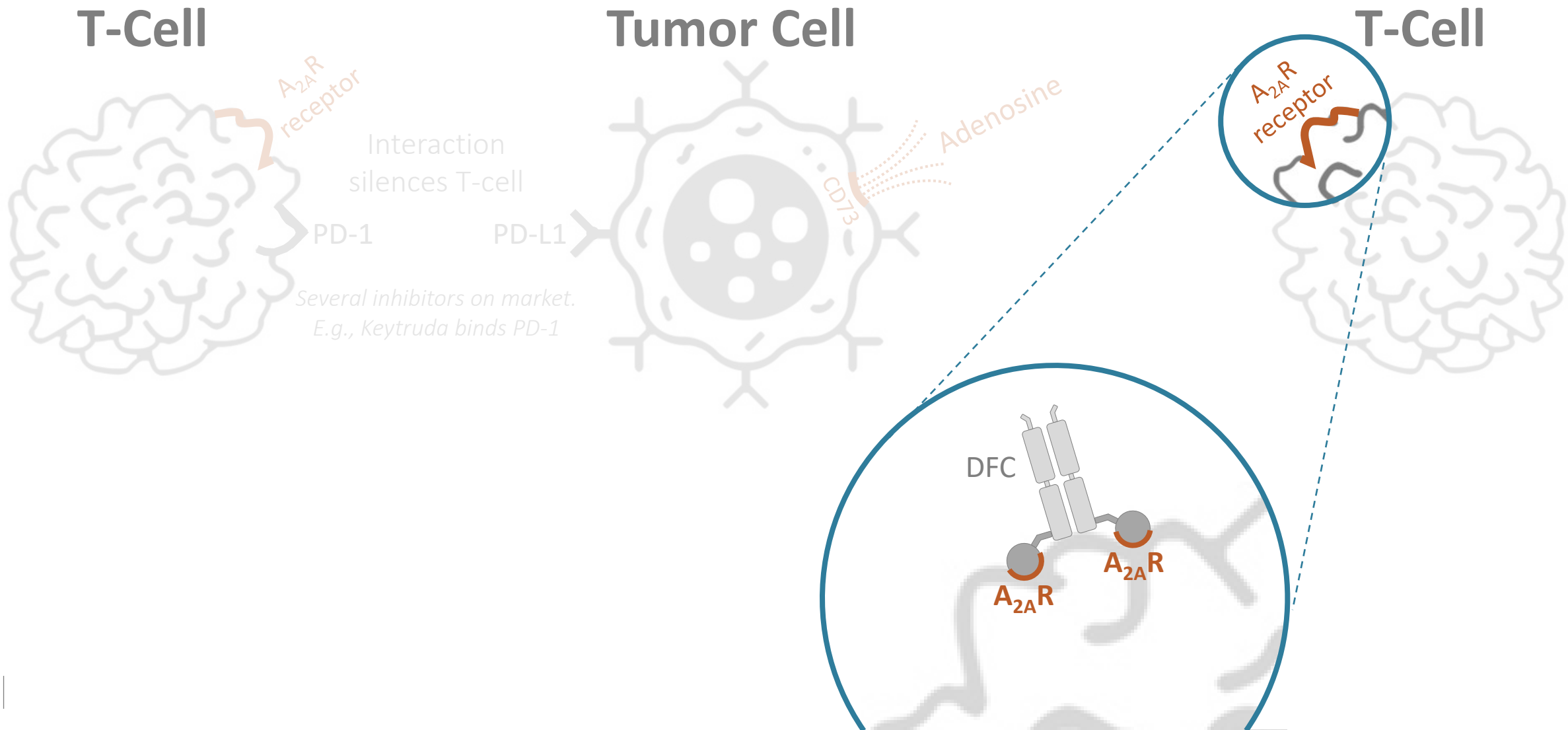
Tumor Cell

T-Cell



26

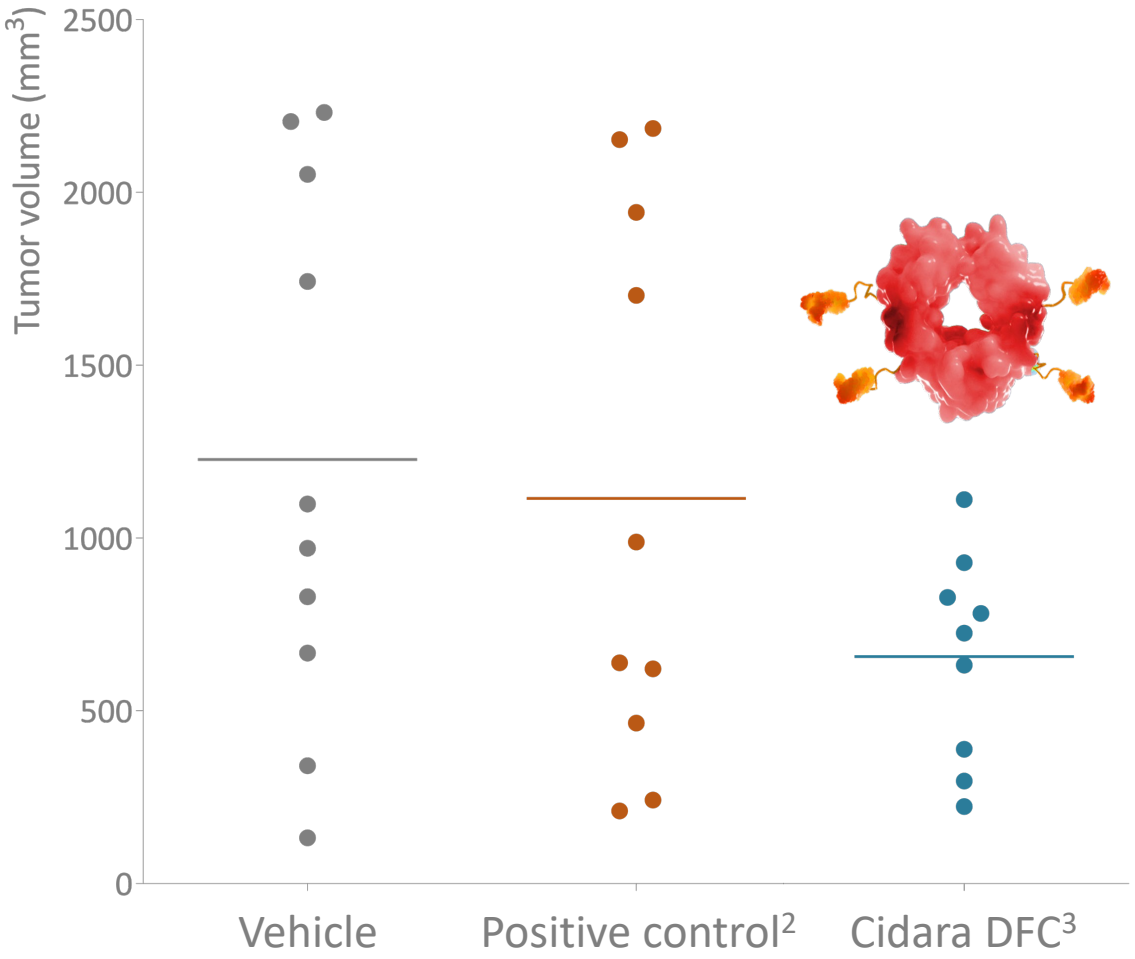
DFCs HAVE THE POTENTIAL TO AUGMENT PD-1/PD-L1 THERAPIES



27

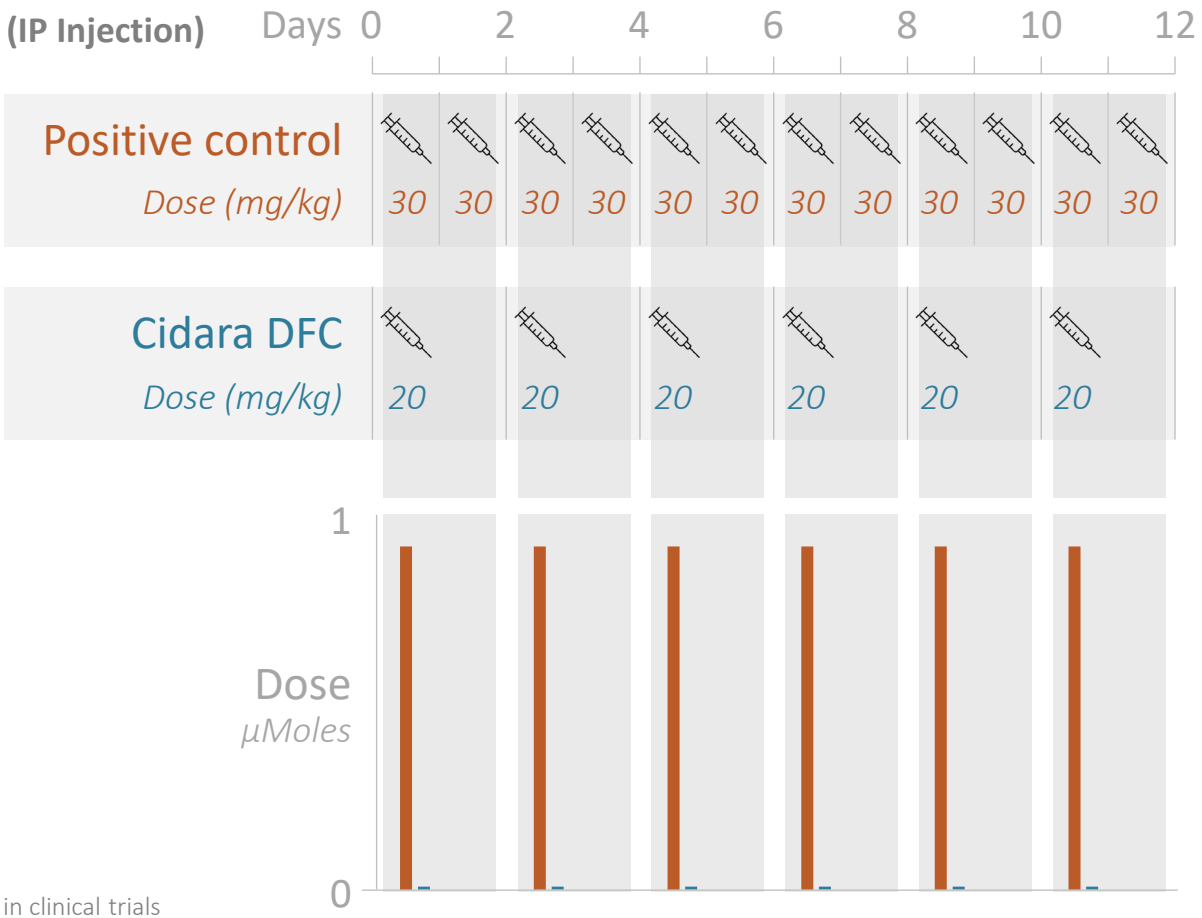
CD73 DFCs DEMONSTRATE ROBUST ANTI-TUMOR ACTIVITY IN MOUSE MODELS

Tumor Volume, Day 12[1]



DOSING

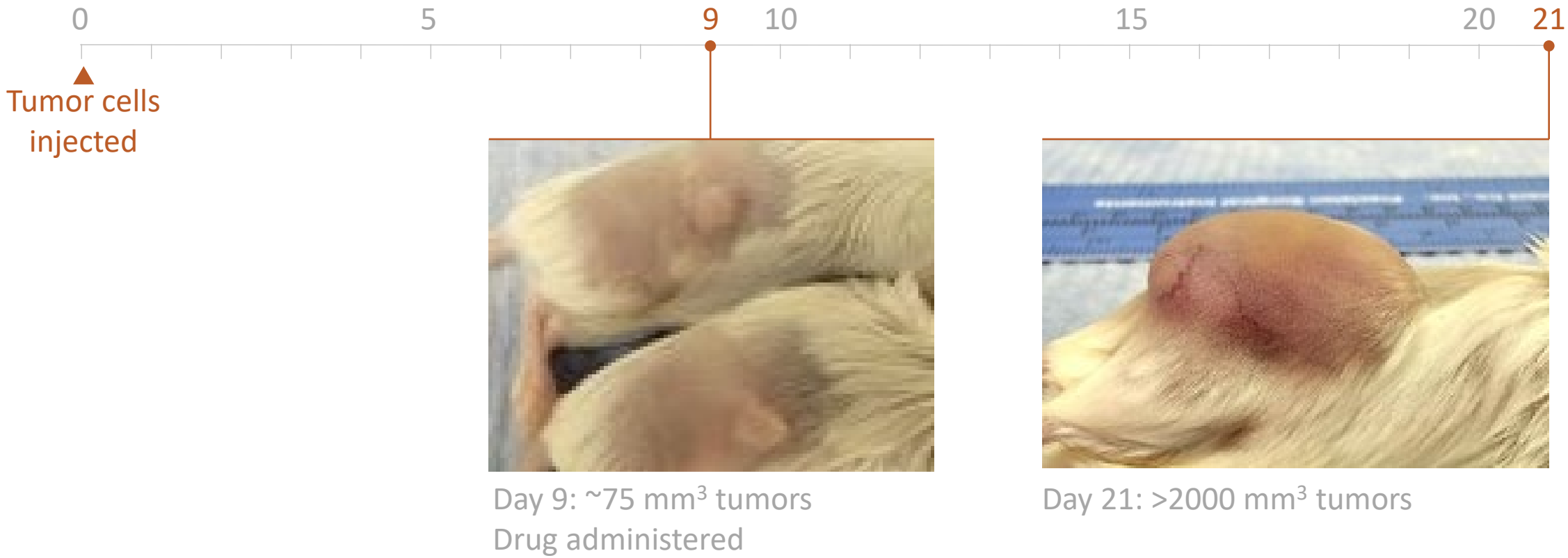
(IP Injection)



1. Mouse syngeneic model with a colon tumor cell line (CT26). Scatter plot of individual animals on Day 12 post-treatment (N=9-10).
2. Small molecule AB680 in clinical trials
3. Molecule CBO-A

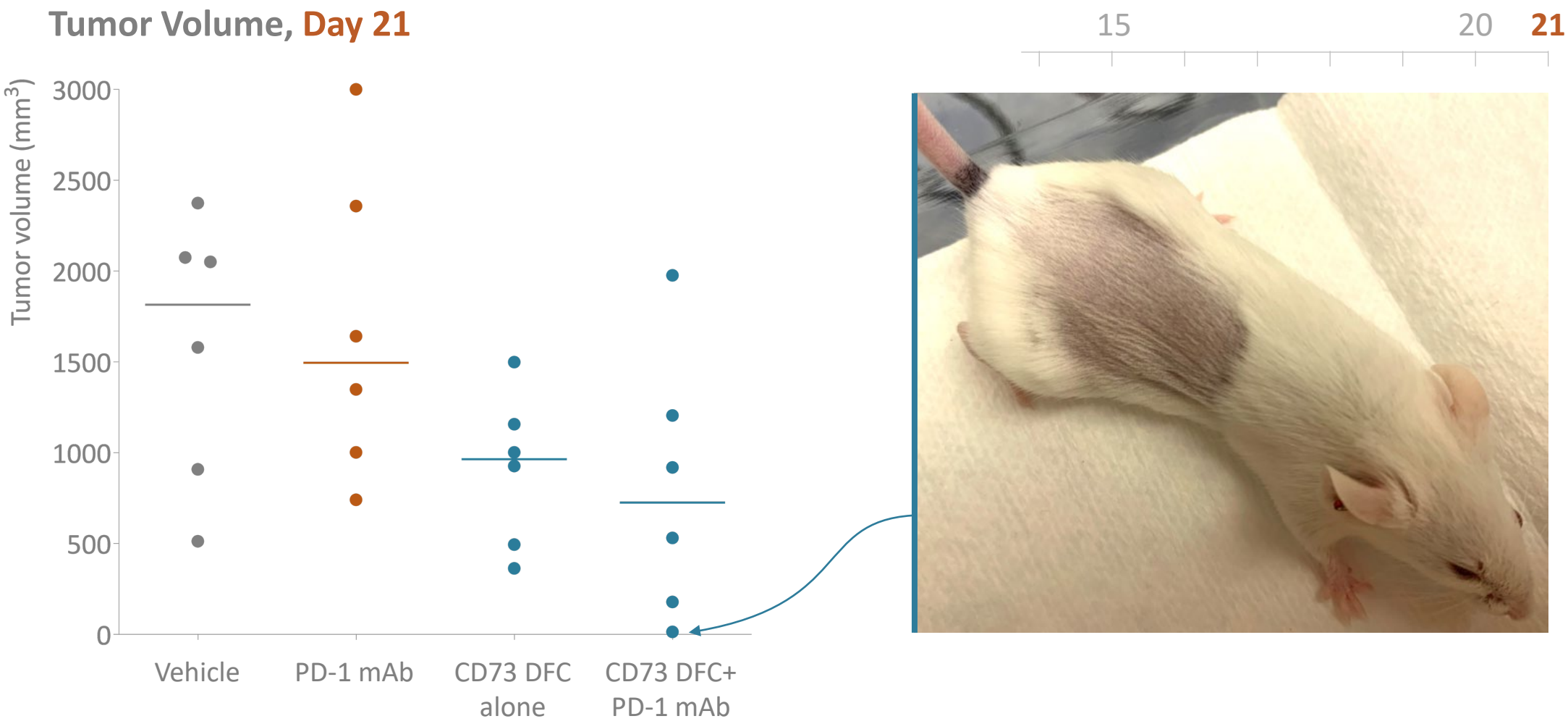
28

CD73 INHIBITORS AUGMENT PD-1 INHIBITOR ACTIVITY



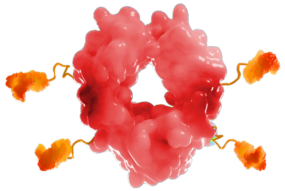
29

CD73 INHIBITORS AUGMENT PD-1 INHIBITOR ACTIVITY

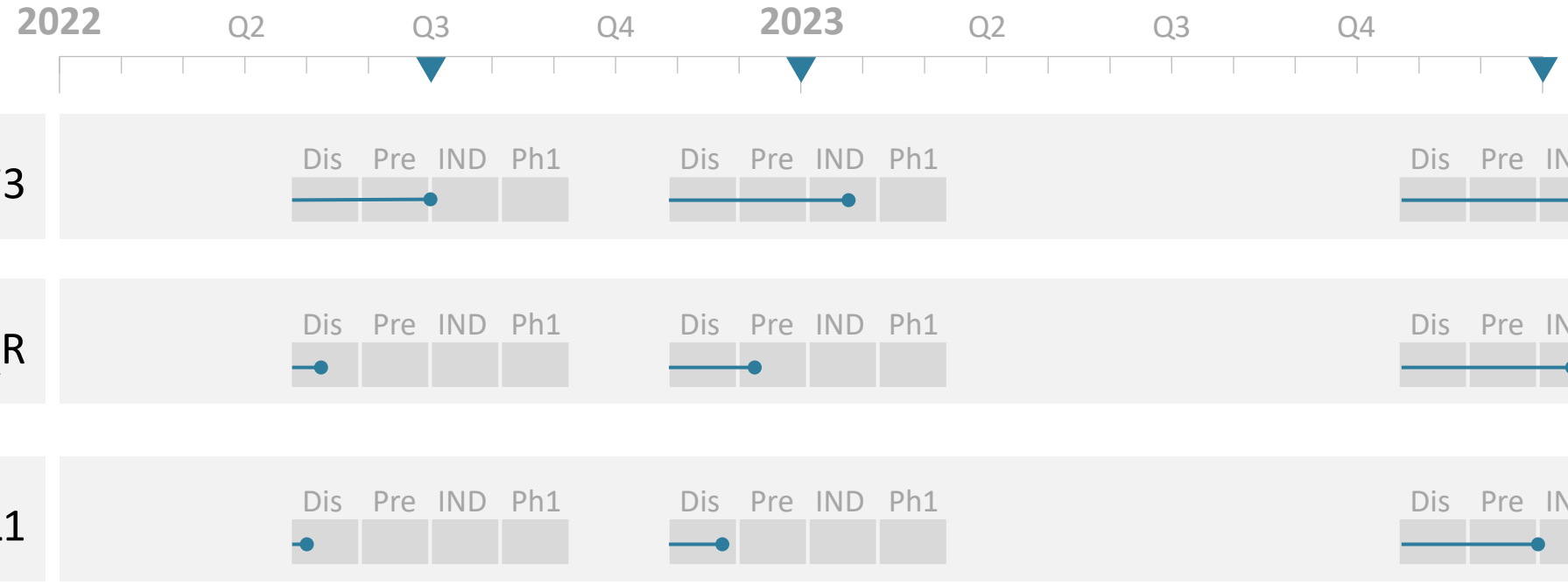


30

ONCOLOGY DFC PROGRAMS ARE ADVANCING RAPIDLY



SOLID TUMOR PROGRAMS



Combination DFCs will be evaluated and added to the pipeline in 2022 as guided by data

Dis: Discovery
Pre: Preclinical
IND: IND enabling
Ph1: Phase one

FINANCIAL OVERVIEW

Important Information	September 30, 2022[1]
Cash and Cash Equivalents	$53.1M
PacWest Term Loan – principal paid in full[2]	$0.0M
Common Stock Outstanding	71,181,197
Common Equivalent Shares Outstanding[3]	89,365,917

Summary Consolidated *Cash Flow Information*	Rolling two-quarter period ended September 30, 2022[4]
Operating Cash Burn	$(42.8)M
Mundipharma Reimbursement & Milestone Payments	$15.5M
Janssen Reimbursement & Milestone Payments	$13.4M
Melinta Upfront Payment	$30.0M
Net Cash Provided by Operations[5]	$16.1M
ATM Proceeds Less Term Loan Payments & Offering Costs	$(1.0)M
Net Cash Inflow	$15.1M

1. Information listed here is as of September 30, 2022 (as disclosed in our Form 10-Q).
2. Cidara has no outstanding debt.
3. Includes (i) 71,181,197 shares of common stock and (ii) 18,184,720 shares of common stock issuable upon the conversion of Series X Convertible Preferred stock, both as of September 30, 2022. Each share of Series X Convertible Preferred is convertible into 10 shares of common stock.
4. Amounts reflect a rolling two-quarter period ending on the date noted. Amounts shown are historical and may not be indicative of future results.
5. Represents net cash provided by operations and investing of $16.1M

CIDARA THERAPEUTICS

CORPORATE PRESENTATION

LEADING THE SCIENCE OF PROTECTION