Inclusion

- Male or female patients aged ≥18 years (follow local regulatory requirement if legal age of consent >18 years)
- Histologically or cytologically documented locally advanced or metastatic nonsquamous NSCLC not amenable to curative surgery or radiation
- Documentation of radiographic disease progression while on/after receiving a third-generation EGFR TKI for metastatic or locally advanced disease
- Documentation of an EGFR-activating mutation detected from tumor tissue or blood sample: exon 19 deletion or L858R
- ≥1 measurable lesion confirmed by investigator assessment as per RECIST v1.1
- 1 or 2 prior line(s) of an approved EGFR TKI treatment in the metastatic or locally advanced setting, which must include a third-generation EGFR TKI (eg, osimertinib, lazertinib, aumolertinib, alflutinib, and others in consultation with Medical Monitor)
    - i) If a patient has received 2 prior lines of EGRF TKI therapy, administration of the third-generation EGRF TKI must have been in the most recent line and in the setting of NSCLC with a demonstrated T790M substitution
    - ii) Enrollment of patients receiving third-generation EGFR TKIs other than osimertinib will be a maximum of ≈20% of the enrolled population in each treatment arm
- Has adequate bone marrow reserve and organ function, within 14 days prior to randomization:
- Platelet count: ≥100 000/mm3 or ≥100×109/L (platelet transfusions are not allowed within 14 days
- prior to randomization to meet eligibility)
- Hemoglobin: ≥9.0 g/dL (transfusion and/or CSF support not allowed within 14 days prior to randomization)
- Absolute neutrophil count: ≥1500/mm3 or ≥1.5×109/L (CSF stimulating support not allowed within 14 days prior to randomization)
- Creatinine Clerance: CrCl ≥45 ml/min calculated by using the Cockcroft-Gault equation or measured CrCl.
- AST/ALT: ≤3×ULN (if liver metastases are present, ≤5.0×ULN)

- TBL: ≤1.5×ULN if no liver metastases (<3.0×ULN in the presence of documented Gilbert syndrome [unconjugated hyperbilirubinemia] or liver metastases)
- Serum albumin :≥2.5 g/dL
- PT or PT-INR and aPTT/PTT: ≤1.5×ULN, except for subjects on coumarin-derivative anticoagulants or other similar anticoagulant therapy, who must have PT-INR within therapeutic range as deemed appropriate by the investigator