

# Genexine

MAKE  
INCURABLE  
CURABLE



INNOVATE  
GENOME

## Company Information

July 2019

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**Overview**

**Genexine Clinical Development**

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# Why & Why Now

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*The Age of Gene Therapy is here.*

“Gene therapy, cell & gene therapy, forecasted to go through ‘inflection point’ to grow into mainstream therapeutic modalities in 5 years time” (expected CAGR 58% to 2024)

April 2019, McKinsey & Company

# ToolGenexine Outlook

**Lymphopenia Drug**  
( Hyleukin-7 )

**HPV+ Cancer**  
(GX-188, 140, 200 )

**Bi- & Tri-specific Ab**

- Cancer,
- autoimmune disease
- Metabolic disease

**Genome editing**

**hFc platform & Ab  
Engineering**

**Know-how in CMC &  
clinical development**

**Cell & gene  
therapeutics**

- allogeneic CAR-T
- eDC vaccine
- AIDS etc.

**In Vivo Gene  
therapeutics**

- Wet AMD, CMT1A  
Hemophilia B

**Turning incurable CURABLE**  
with innovative and diversified therapeutic Platforms

# Genexine Clinical Development

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*Maximize the Value of New Drugs and  
Secure the Cash cow through Bio-Better Drugs*

# GX Pipelines in Development

## Best-in-Class

### Late Stage ( Phase 2b-3 )

**GX-E2** (EPO-hyFc)

**GX-G3** (G-CSF-hyFc)

**GX-H9** (hGH-hyFc)

### Early Stage ( Phase 1- 2a )

**GX-G6** (GLP-1-hyFc)

**GX-G8** (GLP-2-hyFc)

## First-in-Class

### Early Stage ( Phase 1- 2a )

**HyLeukin-7** (IL-7-hyFc)  
(Immuno-Oncology)

**GX-188 ( GX-200, -140 )\***  
(Cervical Pre-Cancer/Cancer DNA Vaccine)

\* 2<sup>nd</sup> Generation Pipeline

### Preclinical Stage

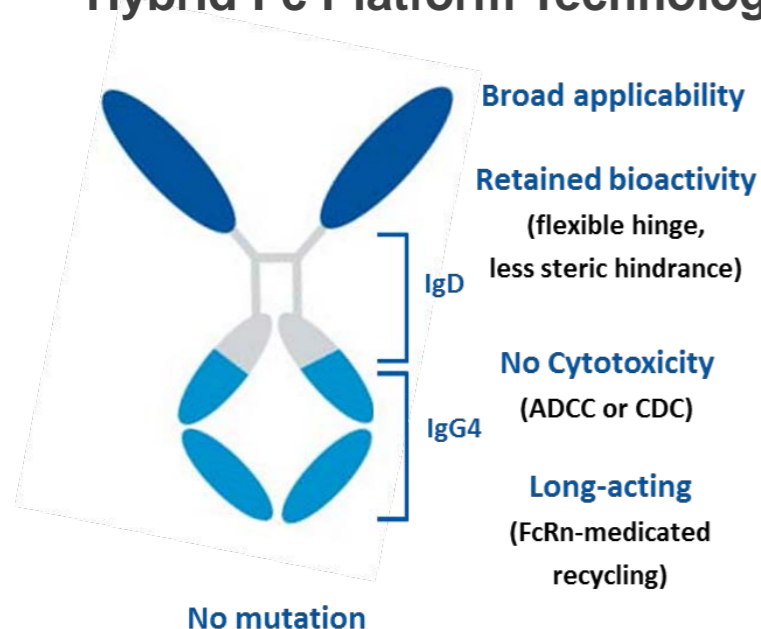
**Multi-Target Antibody Drugs**  
(Immuno-Oncology)

**GX-P1** (PD-L1-hyFc)  
(Autoimmune Diseases)

# GX Pipelines in Clinical Stage

| Phase 1   | Phase 1b   | Phase 1b/2a   | Phase 2  | Phase 3 |
|---|--|---|--|---------|
| <b>GX-G6 (GLP-1-hyFc)</b><br>Type 2 Diabetes<br>Mono (EU)<br><b>Completed</b> | <b>GX-I7 (IL-7-hyFc)</b><br>Solid Tumor<br>Mono (KR)<br>Ongoing 1b | <b>GX-I7 (IL-7-hyFc)</b><br>Solid Tumor<br>CPA Pre-conditioning (KR)<br>Ongoing 1b/2a | <b>GX-188E</b><br>Cervical Cancer<br>Keytruda Combo (KR)<br>Ongoing 1b/2       |         |
|   |  | <b>GX-I7 (IL-7-hyFc)</b><br>Glioblastoma<br>Mono (KR)<br>Ongoing 1b/2a                | <b>GX-H9 (hGH-hyFc)</b><br>AGHD<br>Mono (EU/KR)<br><b>Completed</b>            |         |
|   |  | <b>GX-I7 (IL-7-hyFc)</b><br>Glioblastoma<br>TMZ Combo (US)<br>Ongoing 1b/2a           | <b>GX-H9 (hGH-hyFc)</b><br>PGHD<br>Mono (EU/KR)<br><b>Completed</b>            |         |
|   |  | <b>GX-I7 (IL-7-hyFc)</b><br>Skin Cancer<br>Tecentriq Combo (US)<br>Ongoing 1b/2a      | <b>GX-E2 (EPO-hyFc)</b><br>CKD-induced Anemia<br>Mono (KR)<br><b>Completed</b> |         |
|   |  | <b>GX-I7 (IL-7-hyFc)</b><br>TNBC<br>Keytruda Combo (KR)<br>Ongoing 1b/2a              | <b>GX-G3 (G-CSF-hyFc)</b><br>Neutropenia<br>Mono (EU)<br><b>Completed</b>      |         |

## Hybrid Fc Platform Technology



|  |                 |
|--|-----------------|
|  | Immuno-Oncology |
|  | DNA vaccine     |
|  | Bio-better drug |

# Key Summaries of major GX Pipelines

## GX-H9

### Long-acting Growth Hormone

- Ph2 Completed in AGHD and PGHD
  - Effective in both weekly & twice-monthly
  - Showing good annual HV even in 2<sup>nd</sup> year
  - Pediatric patients grew better in 2<sup>nd</sup> year when switched from daily to GX-H9 weekly
- L/O to Tasgen, China (I-Mab)
- PGHD Ph3 in preparation
  - China Ph3 IND by IMAB
  - Global Ph3 IND by REZOLUTE





## GX-188E+Keytruda Combo for Cervical Cancer

- Keynote-158 (Keytruda mono trial)
  - ORR 12.2% (12/98 advanced cervical ca.)
  - Accelerated approval by FDA as 2L
- 188E+Keytruda Combo in similar setting
  - 1 CR, 3 PR (4/10 advanced cervical ca.)
  - Recruitment for Ph2 stage 2 initiated
- L/O to National Onco Venture
  - In collaboration for Global L/O
- Other HPV 16/18 type-induced cancers
  - GX-188E\*(200) in Ph1b in cervical cancer
  - HPV 16-positive HNSCC IND in prep



# Key Summaries of major GX Pipelines

## HyLeukin-7 Immuno-Oncology Blockbuster

- Patients with Lymphopenia show poor treatment outcome (shorter OS)  
*[Delyon J. et. al. Annals of Oncology. 24: 1697-1703. 2013]*
- Hyleukin-7 increases T cell subsets dose-dependently but not Treg in end-stage cancer patients
- Hyleukin-7 is safe and well-tolerated
- Combo with immune checkpoint blockade
  - TNBC with pembrolizumab  **MERCK**
  - Skin cancers with atezolizumab 
- L/O to IMAB (China)

| Anemia  | Thrombocytopenia                                       | Neutropenia   | Lymphopenia/<br>Immuno-Oncology |
|---|--|---|---------------------------------|
| EPO   | TPO  | G-CSF   | IL-7-hyFc                       |
| Amgen<br>J&J<br>Roche                                   | Genentech<br>Kirin<br>Amgen                            | Amgen   | Genexine/<br>NeoImmuneTech      |
| Global Market<br>\$7.4B<br>(2016)<br>\$17.4B*<br>(2025) | Global Market<br>\$1.3B<br>(2016)<br>\$2.5B*<br>(2025) | Global Market<br>\$7.7B<br>(2016)<br>\$12.6B*<br>(2025) | Global Market<br><br>?          |

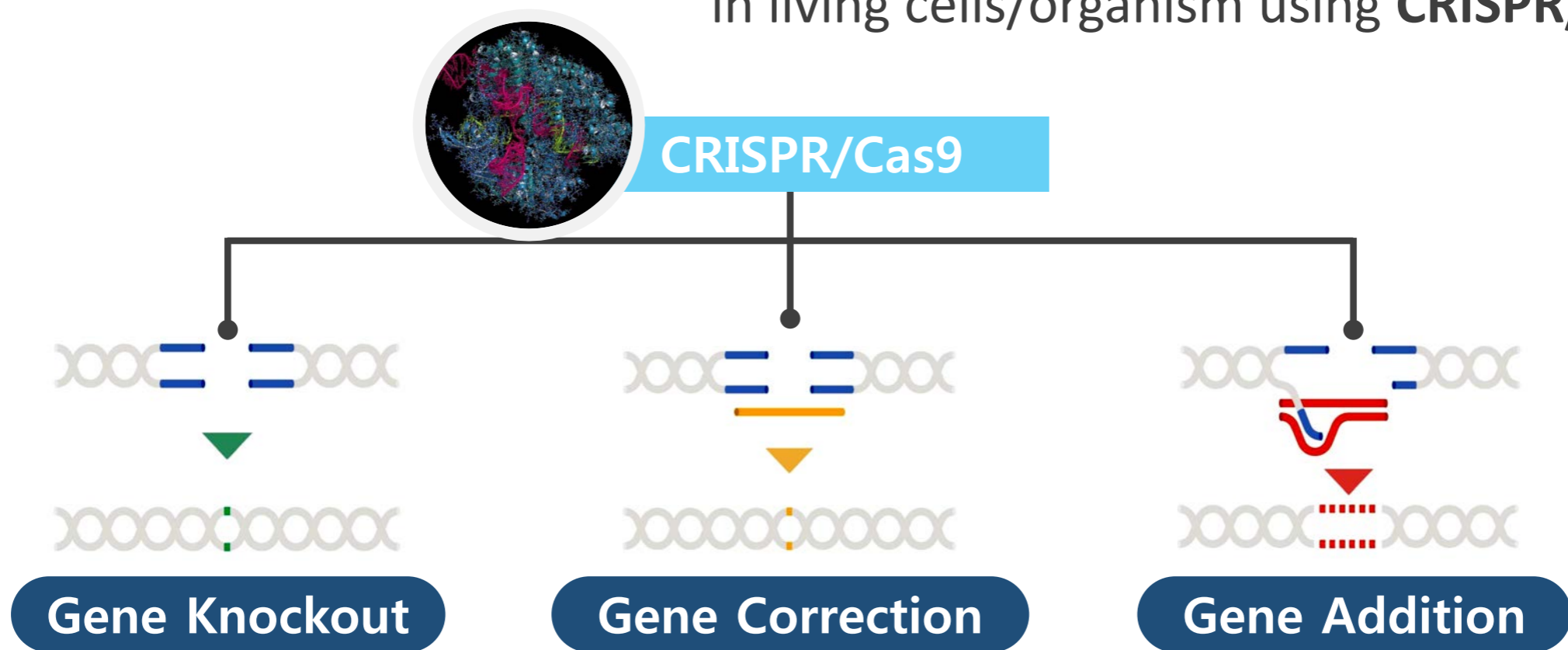
## ToolGen's Technology & IP

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*CRISPR/Cas9 is an innovative genome editing technology transforming various bio-industries ranging from therapeutics to agrisciences.*

# Genome Editing Technology

Efficient and precise genome editing  
in living cells/organism using **CRISPR/Cas9**



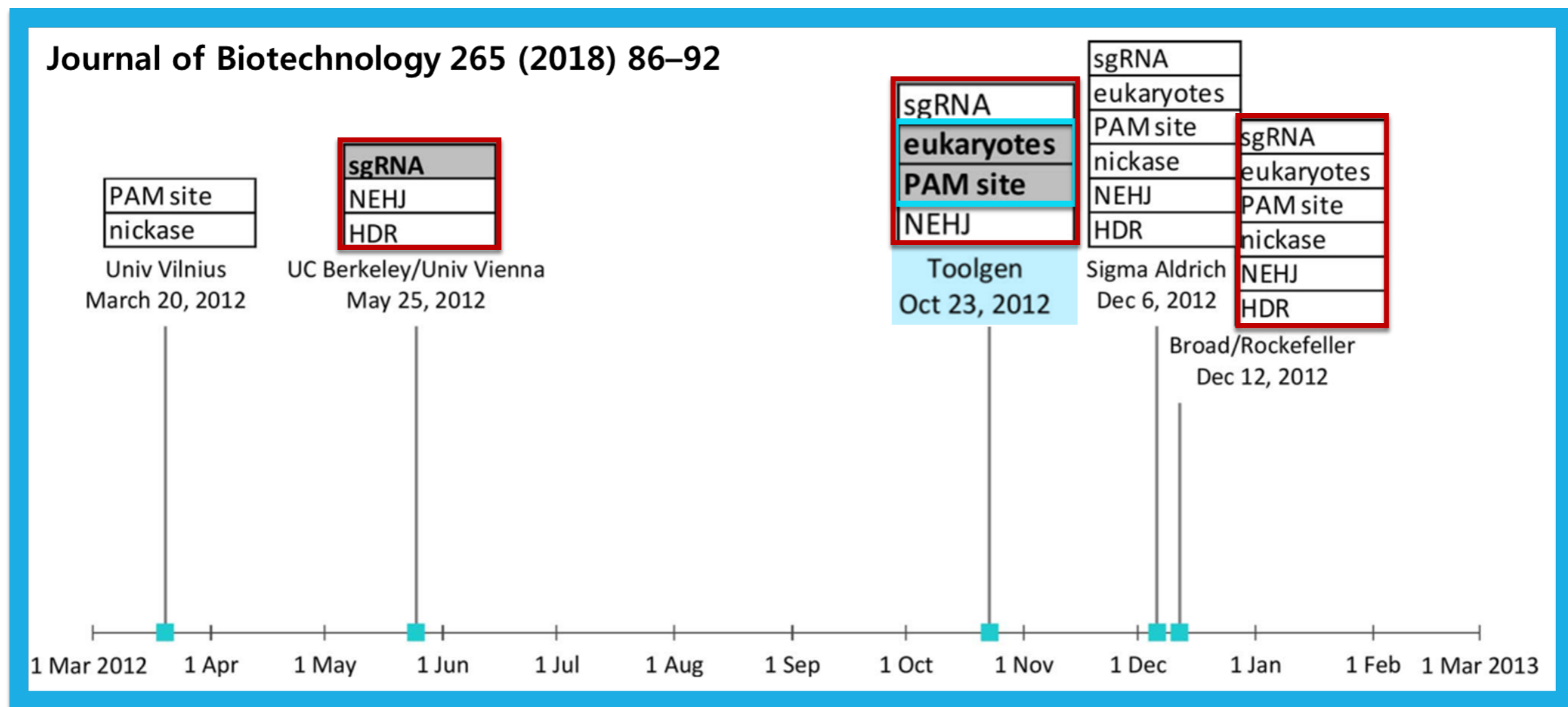
FIELDS



# Patent Landscape of CRISPR Gene Editing Technology

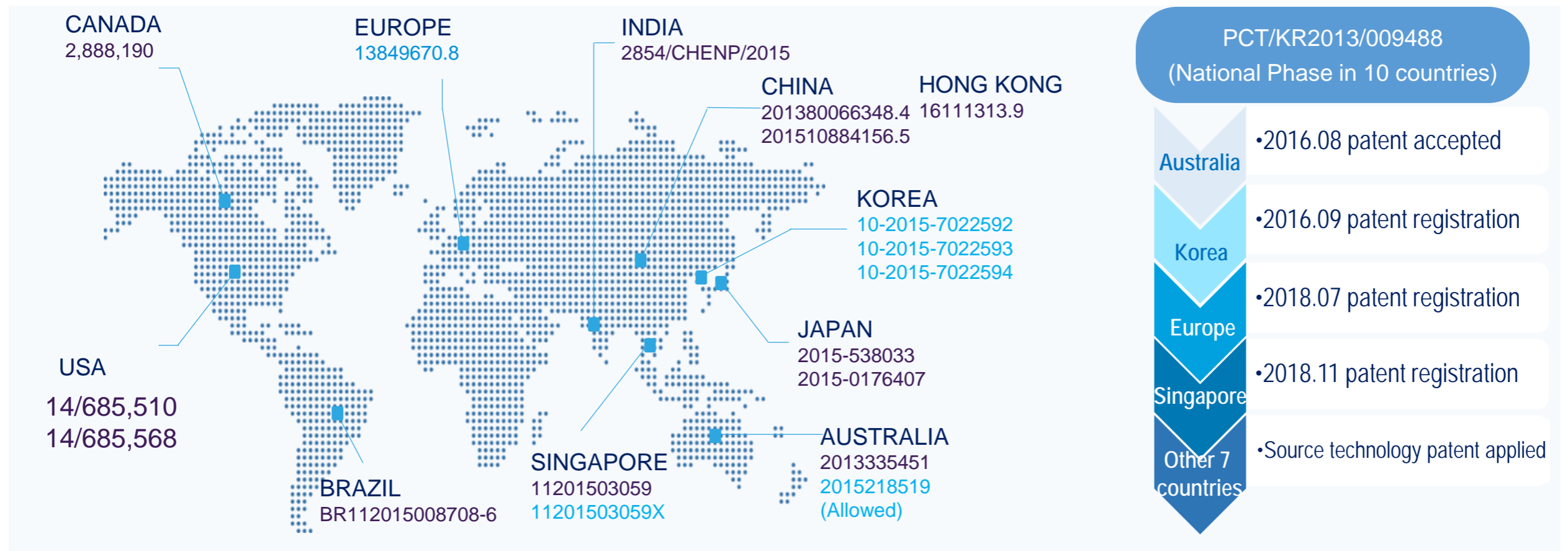
First patent filing on genome editing in eukaryotic cells by CRISPR/Cas9

Early Priority Date + Disclosure of Crucial **Enablement**



# Status and Strategy of ToolGen CRISPR IP Portfolio

## Expanding Territory of Blocking Claims



**Expand territory:** Broadening genome editing IP portfolio



**Refining technology:** Improving CRISPR/Cas9 for therapeutic applications



**Establishing therapeutic programs:** Moving to IND-enabling stages

# Valuation of BIOTECHs in CRISPR fields

## CRISPR THERAPEUTICS



- NASDAQ (CRSP)
- Market Cap: \$ 2.55B
- 2 *ex vivo* assets (CAR-T and HSC) in clinic

## Editas MEDICINE

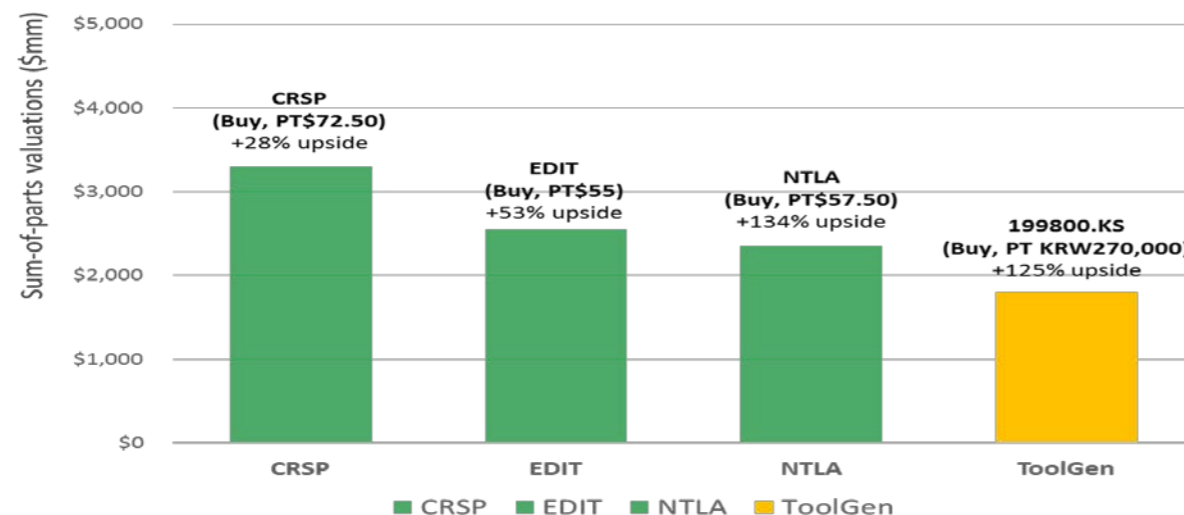


- NASDAQ (EDIT)
- Market Cap: \$ 1.13B
- 1 in vivo asset (AAV, inherited eye disease) in clinic

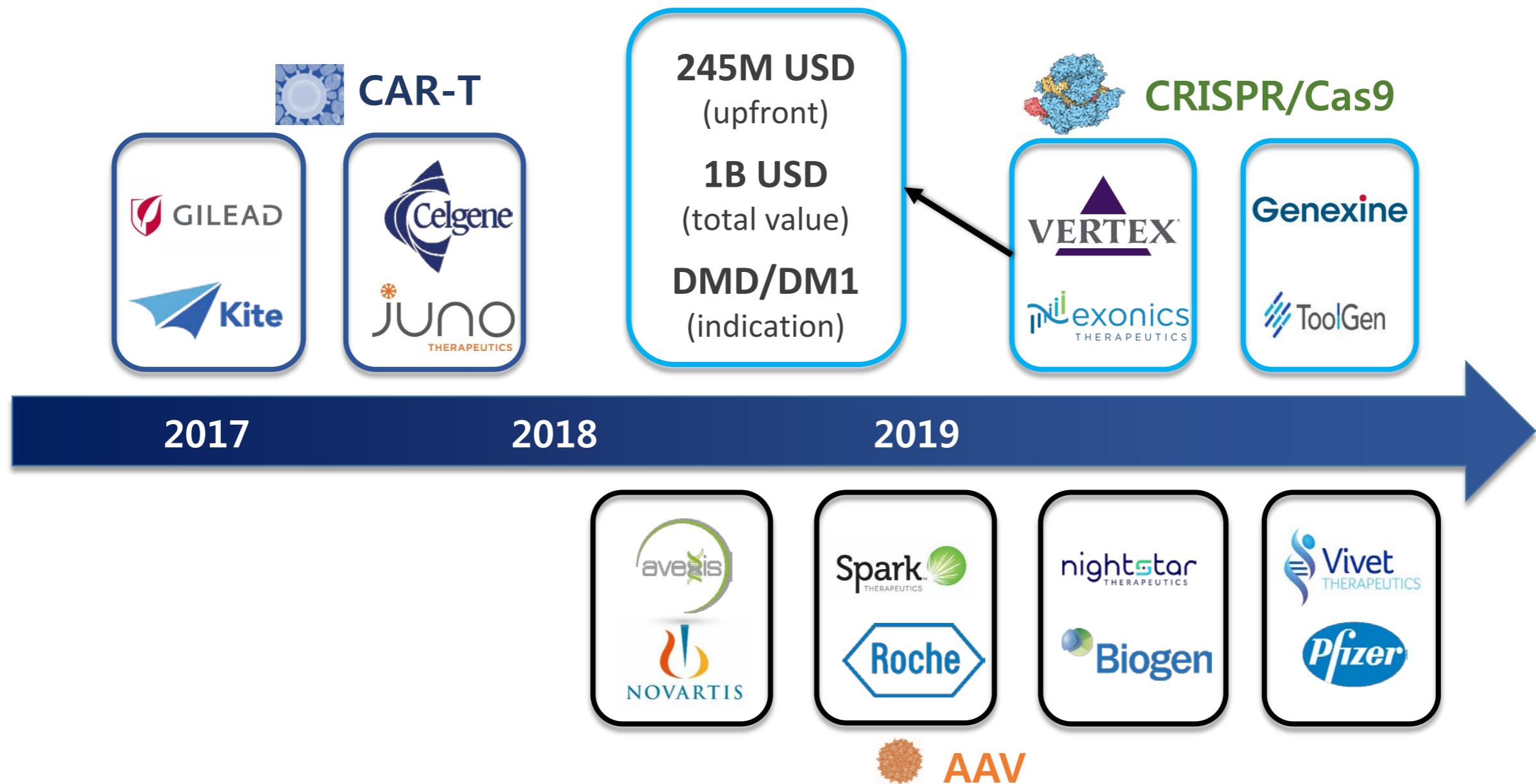
## Intellia THERAPEUTICS



- NASDAQ (INTL)
- Market Cap: \$ 687.49M
- Lead program (LNP, ATTR) in preclinical stage



# Global Trends of M&A in Gene and Cell Therapy

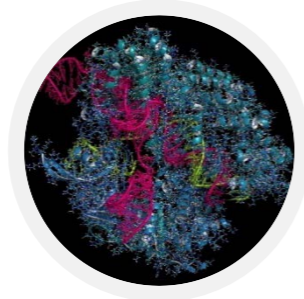


# ToolGen: Innovating Genome for Healthier Life

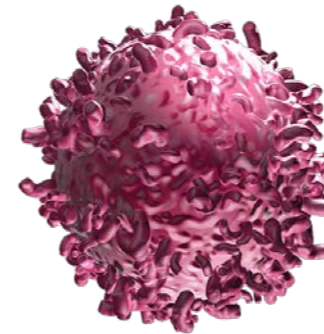


## Platform technology

- Foundational IP on **CRISPR/Cas9**
- **Improved Cas9 for therapeutic applications**
- **Highly specific guide RNA**

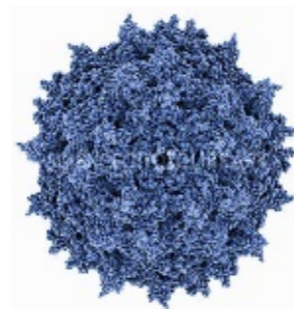


## *Ex Vivo* Programs Genome-edited therapeutic cells

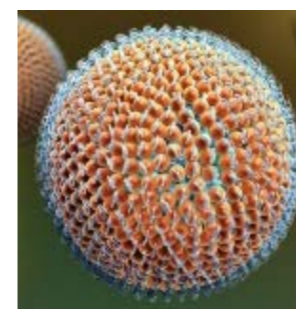


- ✓ **Use in CAR-T**  
Next-generation Platform
- ✓ **Use in Stem Cells**  
Enhanced therapeutic Effects

## *In Vivo* Programs CRISPR-based gene therapeutics



Virus



Nanoparticle

- ✓ **Eye**  
wet AMD  
Diabetic Retinopathy
- ✓ **Liver**  
Hemophilia
- ✓ **PNS**  
Charcot-Marie-Tooth 1A

# ToolGen Therapeutic Programs (*in vivo*)

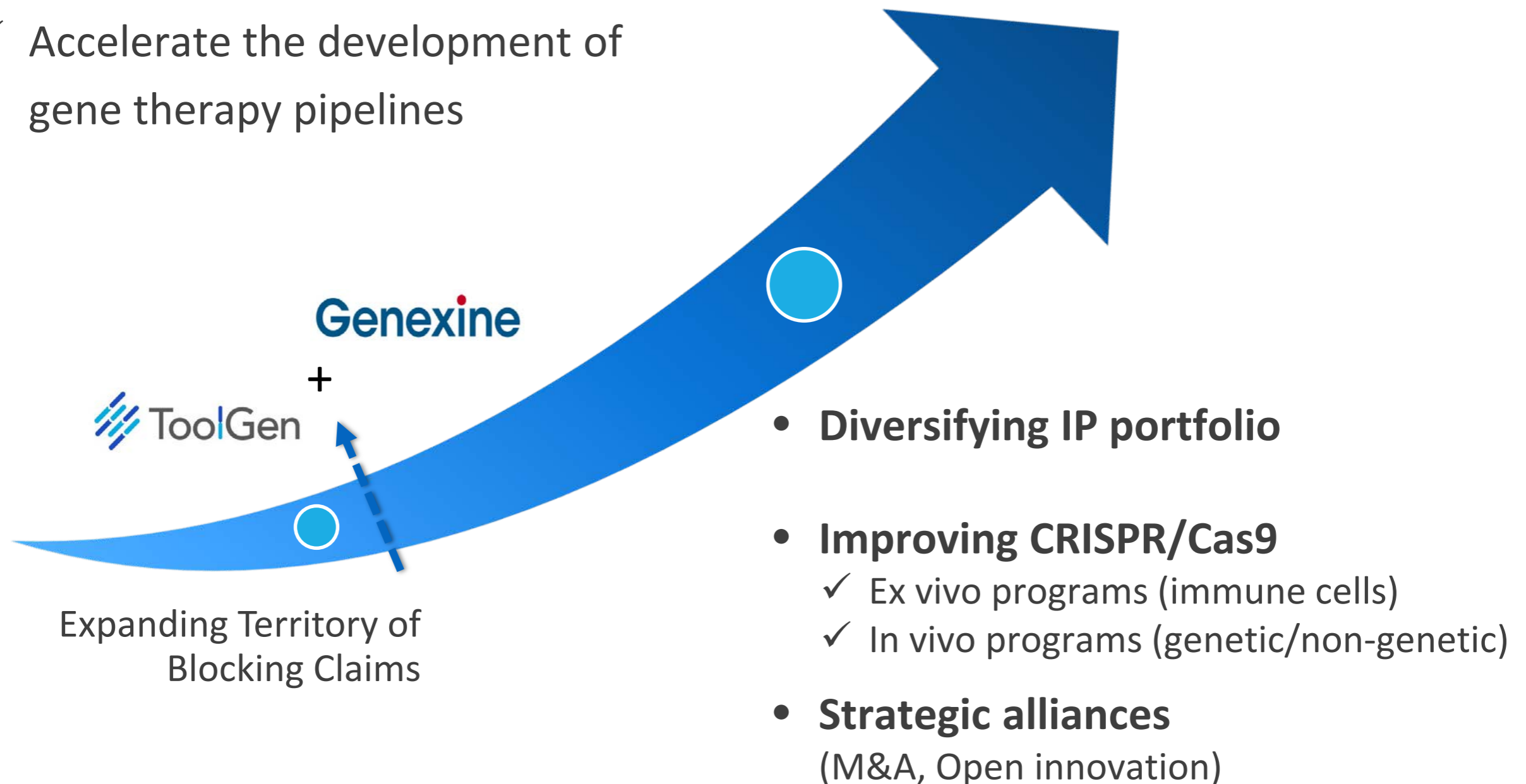
| Program                                  | Editing Type     | Route of Administration | Major Target population            | Target gene            |
|--|------------------|-------------------------|------------------------------------|------------------------|
| <b>In vivo: Liver</b>                    |                  |                         |                                    |                        |
| Liver Biofactory Platform (Hemophilia B) | Insertion (HDR)  | Intravenous             | Hepatocytes                        | Hepatocyte safe harbor |
| Hemophilia A                             | Inversion (NHEJ) | Intravenous             | Liver sinusoidal endothelial cells | <i>F8</i>              |
| <b>In vivo: Eye</b>                      |                  |                         |                                    |                        |
| Age-related Macular Degeneration         | Knockout (NHEJ)  | Subretinal/intravitreal | Retinal pigment epithelial cells   | <i>VEGF</i>            |
| Diabetic Retinopathy                     | Knockout (NHEJ)  | Subretinal/intravitreal | Undisclosed                        | Undisclosed            |
| <b>In vivo: CNS/PNS</b>                  |                  |                         |                                    |                        |
| Charcot-Marie-Tooth Disease              | Knockout (NHEJ)  | Intrathecal             | Schwann cells                      | <i>PMP22</i>           |
| Huntington Disease                       | Knockout (NHEJ)  | Intrathecal/ICV         | Striatal neurons                   | Undisclosed            |

- Currently applying AAVs for most indications
- Open to expand delivery options
- Open to collaborate on new projects

# ToolGenexine: Translating CRISPR/Cas9

## *Asset Value Driver*

- ✓ Expand Patent Portfolio
- ✓ Accelerate the development of gene therapy pipelines

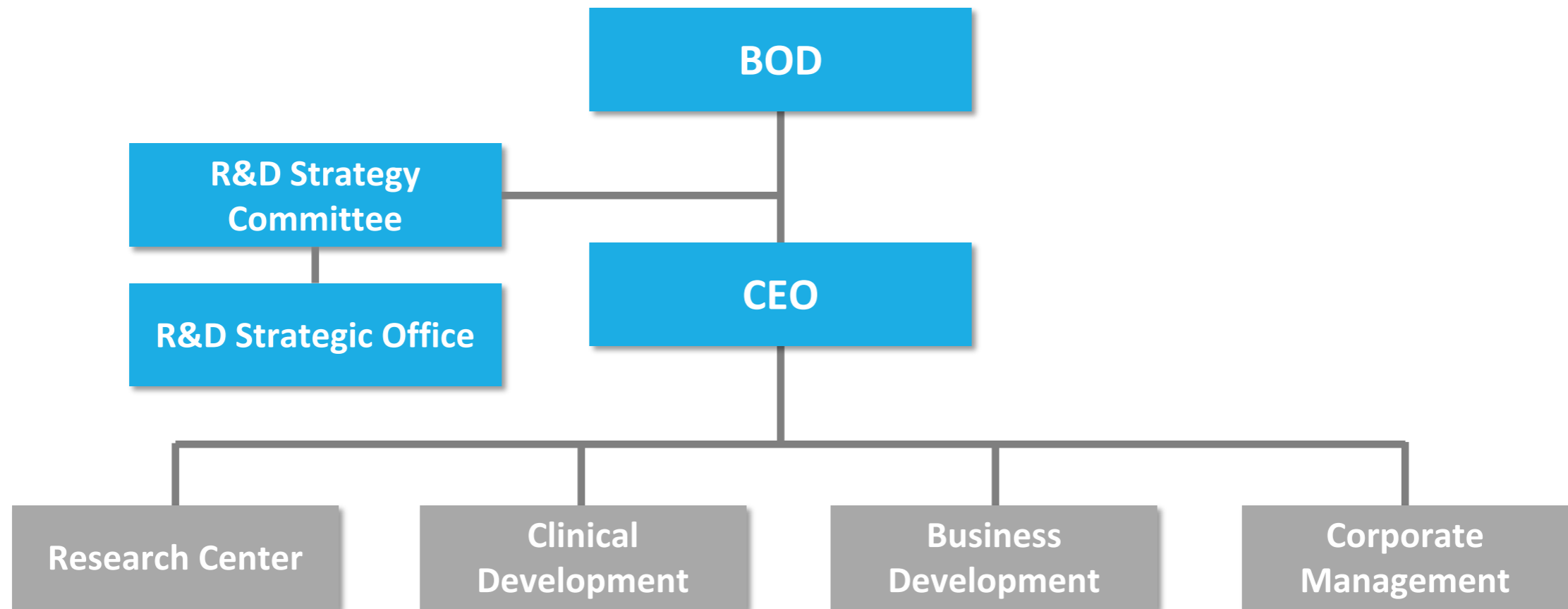


# ToolGenexine Development Strategy

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*Continuously develop and provide innovative therapeutics using proprietary platform technologies and experiences in drug development from Genexine and ToolGen*

# ToolGenexine Organizational Plan

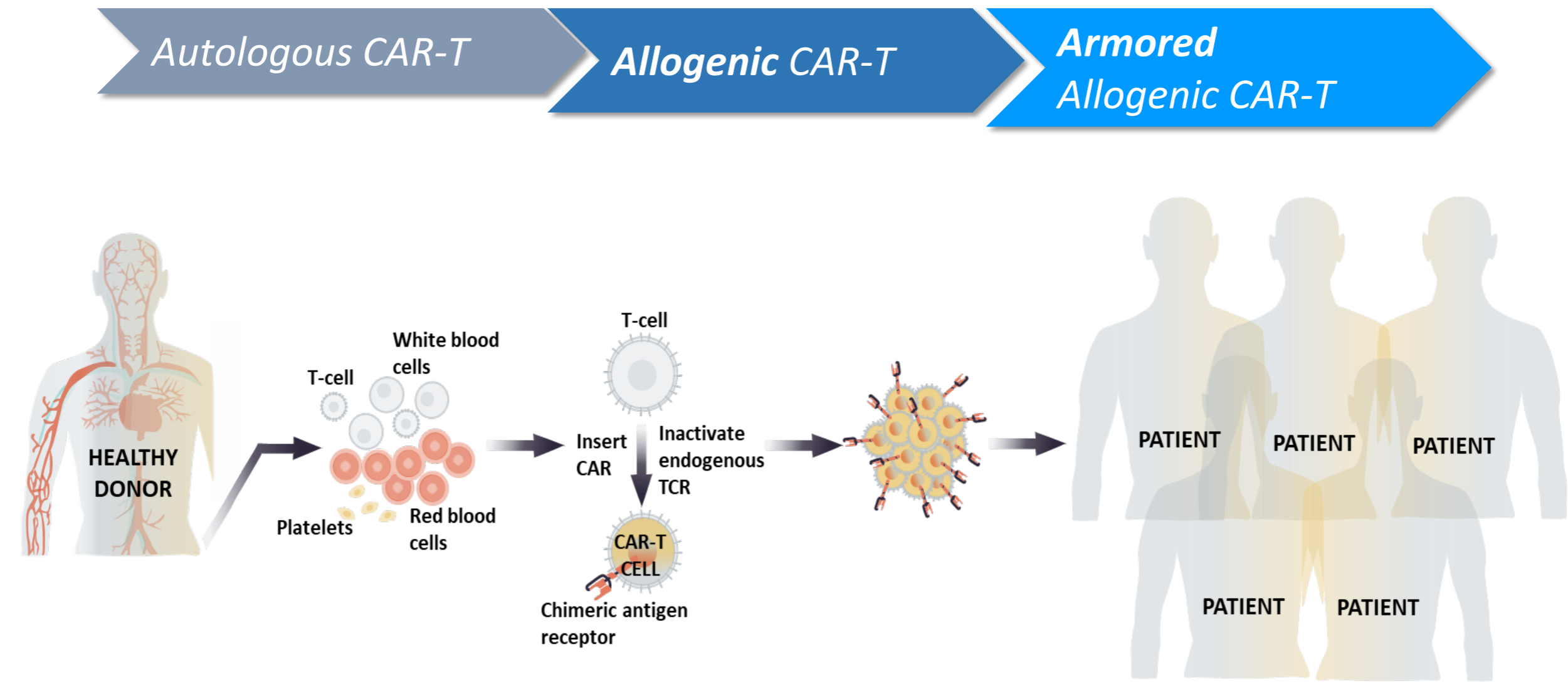


## ▪ R&D Joint Committee

- Scientific founders, CTO, CEO and R&D directors
- Establish R&D strategies and new asset development plans, Strategic alliances (M&A, license-in)
- First job will be to preparing and executing strategies for **jump-starting next-gen CAR-T programs**.

## ▪ Gradual organizational integration until the opening of new facility in 2021

# Cell Therapy: Personalized to Industrialized



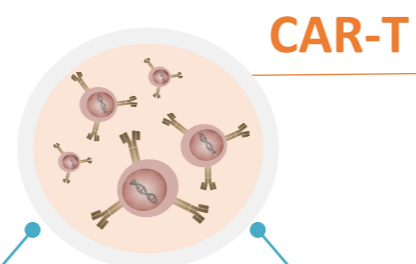
| Key Features     | Cell Therapy 1.0 | Cell Therapy 2.0 |
|------------------|------------------|------------------|
| Cell Source      | Patient Cells    | Master Cell Line |
| Manufacturing    | Personalized     | Off-the-Shelf    |
| Overall Paradigm | Patient-centric  | Product-centric  |

# Use of Genome Editing in CAR-T by ToolGen

## Next-generation CAR-T

### Improved Productivity

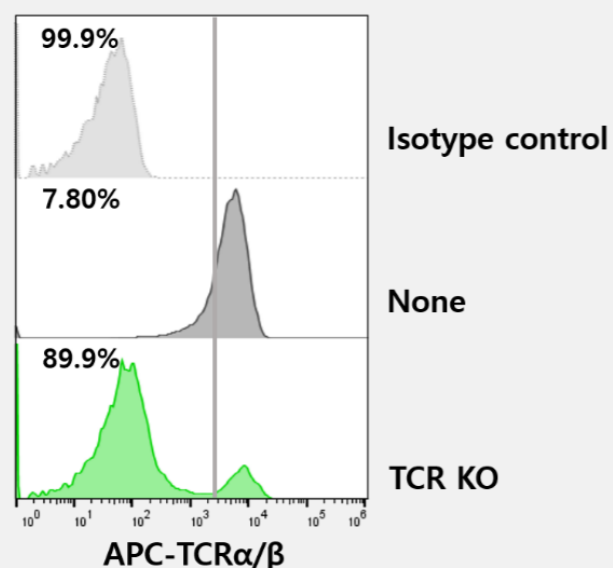
### Improved Efficacy



#### Allogeneic Platform

- Production from a healthy donor (lower production cost)
- Off-the-shelf

#### Removing TCR efficiently from T cell

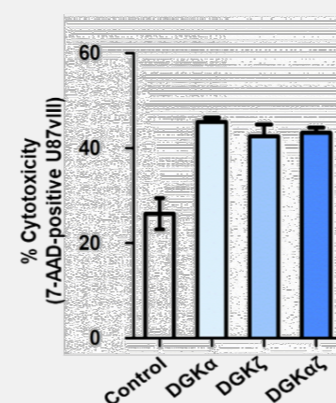


#### Functional Enhancement

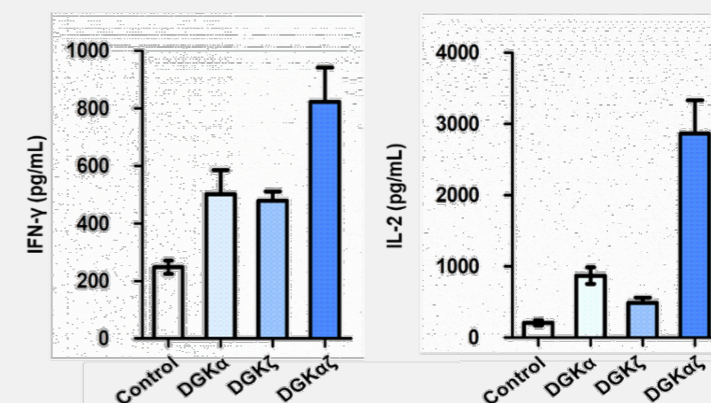
- Higher effector function for better efficacy
- Resistance to negative signals in TME

#### Invigorated Effector Function by DGK knockout in CAR-T

##### Cytotoxicity @Cancer cells

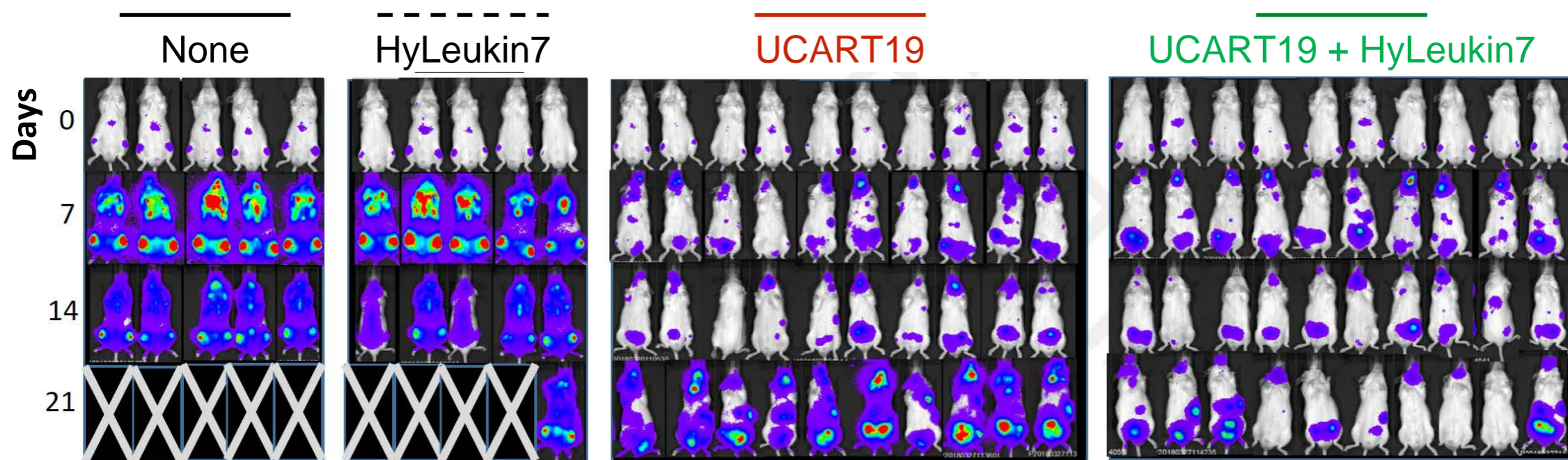
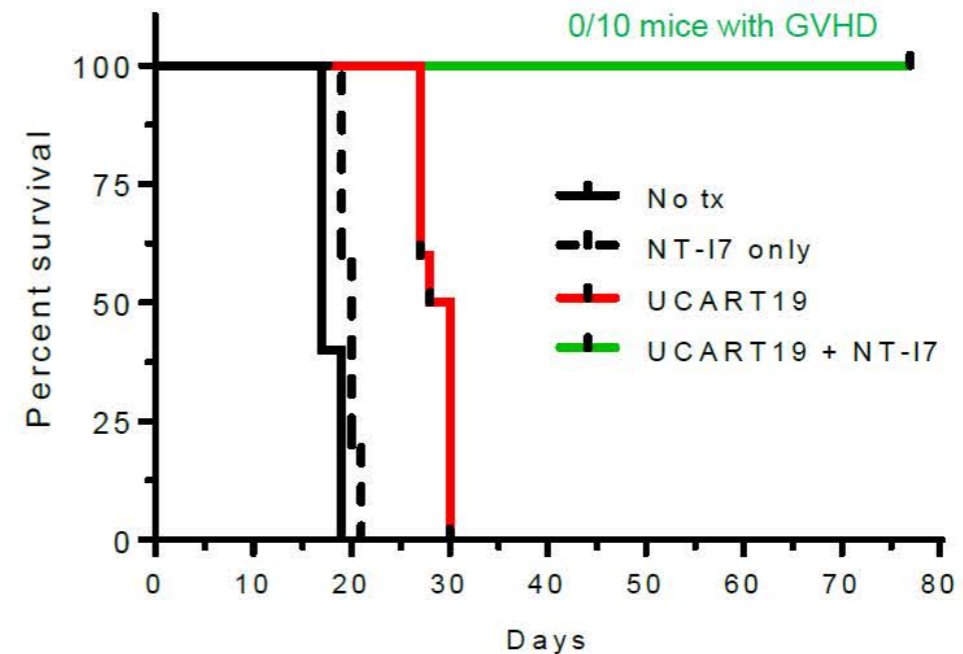


##### Cytokine Release @Cancer cells



# Allogeneic CAR-T & Hyleukin-7

- Hyleukin-7 can boost CAR-T persistence in mouse model
- Naïve and Memory T cells are linked with CAR-T persistence/engraftment and clinical outcomes



Washington University CONFIDENTIAL

# We are Prepared for the Next Generation CAR-T

## Genome Editing



Changing T cell nature  
**Genome-edited T**

+

## ColImmune (US)



Phase III (dendritic cell/RNA)  
**CMC/Manufacturing**

+

## Hyleukin-7



Persistence and Efficacy  
**Killing Combination**

**Off-the-Shelf  
Immune Cell Therapeutics  
for Solid Cancer**

# Estimate of Cash Inflow

**Genexine**

 **ToolGen**

*Available cash inflow up to yr 2022*

**KRW 500B**

**KRW 30B**

**KRW  
180B**

Cash & Cash  
Equivalent  
holding

**KRW  
135B**

Expected cash  
flow from  
long-term  
Investment

**KRW  
175B**

Expected  
cash flow  
from L/O

+

**KRW  
30B**

Cash & Cash  
Equivalent

- Possible to generate sufficient cash internally
- Necessity of a strategic convergence to secure global competitiveness



***Genexine  
ToolGen  
Merger***

- Sufficient cash for the R&D cost of the merged entity over the next three years
- Capable for active investment and R&D spending for new technologies
- No need of additional funding from FI (avoiding possible dilution of existing share value)
- Available for strategic partnership with SI

# Estimate of Cash Outflow

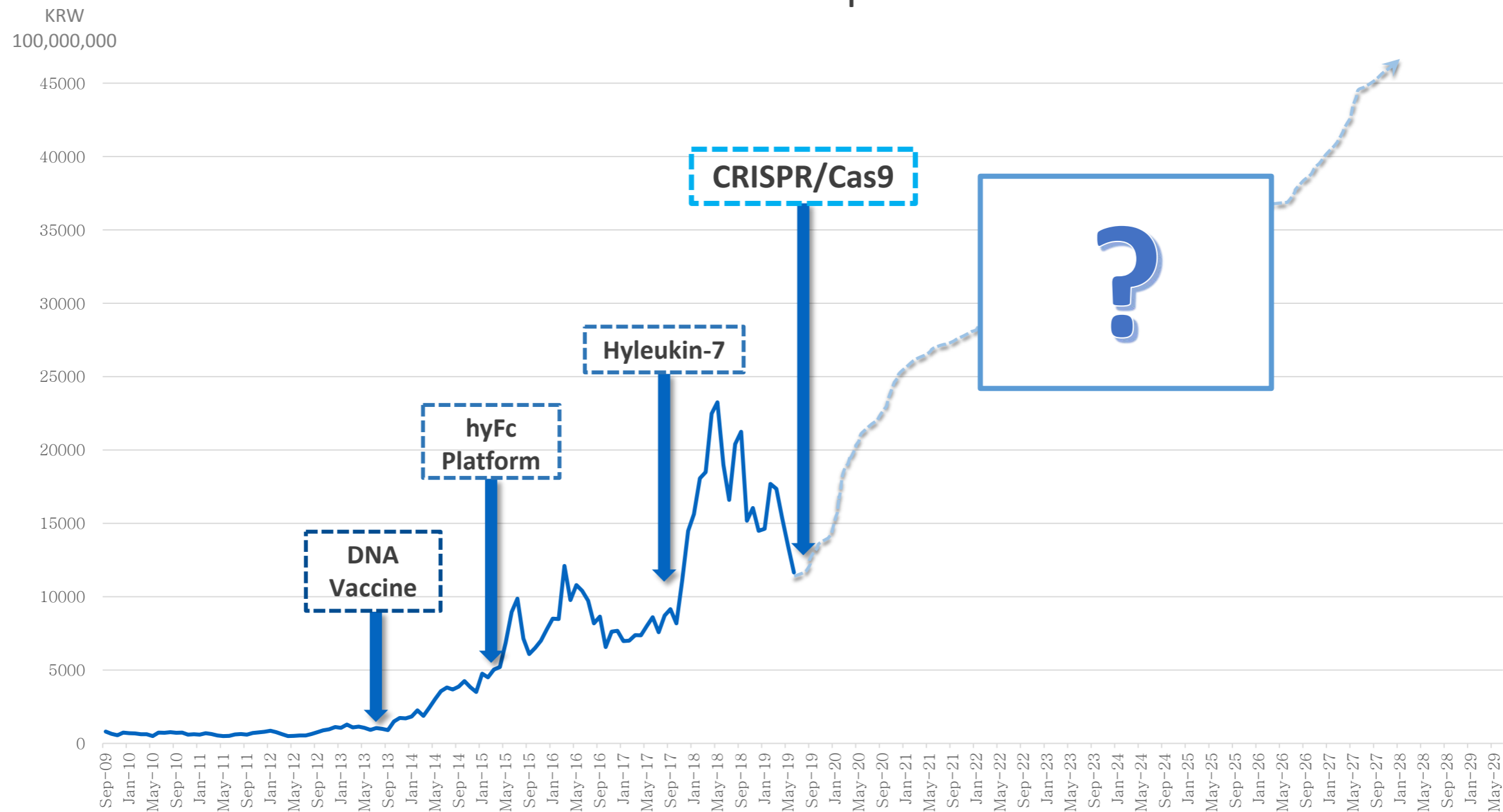
(KRW 1B)

| Fund Execution Plan in 2020~2022 |   |
|----------------------------------|---|
| Cash Outflow                     | Investment in new technology 100            |
|                                  | R&D Cost 153.5                              |
|                                  | - New Tech (CAR-T, Cell/Gene Therapy) 62    |
|                                  | - First in class drugs (Early Stage) 30     |
|                                  | - First in class drugs (Preclinical) 15     |
|                                  | - Bio-better drugs (Late/Early Stage) 15    |
|                                  | - Research payroll cost 31.5                |
|                                  | Payroll cost 13.5                           |
|                                  | General expense (ex. salary) 61             |
|                                  | Establishment of research infrastructure 59 |
| Total Cash Outflow (-) 387       |   |

- **R&D Strategy Committee : To invest KRW 100~400B for Long-Term Growth**
  - KRW 100B could be allocated from the cash generated internally
  - Further KRW 300B could be available through strategic partnership with SI
  - Responsibilities
    - Next-generation technology development
    - M&A, Strategic equity investment
    - Global License-Out
- **R&D Cost KRW 154B**
  - Priority of next generation pipelines
    - Bi-Specific Anti-body
    - In Vivo Gene Therapy
    - Ex-Vivo (CAR-T, DC Vaccine)
- **Payroll cost/G&A expense KRW 74.5B**
  - Including KRW 35B in IP protection costs of CRISPR/Cas9 (expected to be fluctuated in the future depending on IP interferences, Oppositions)

# Market Cap Forecast of ToolGenexine

## New Wave of Corporate Value



# End of Presentation

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*Thank you!*

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