Oscotec R&D Day

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Agenda

- > 2023 Milestones
 - Lazertinib on the cusp of global approval
 - Cevidoplenib (SKI-O-703) completes Phase 2 study in ITP
 - Denfivontinib (SKI-G-801) wrapping up Phase 1a in solid tumors
 - ADEL-Y01 files IND to FDA
- Oscotec oncology strategy
 - Addressing therapy resistance, tumor relapse, and metastasis
 - Denfivontinib (SKI-G-801) cohort expansion plan
 - OCT-598 to enter the clinic in 2024
- Upcoming catalysts
- ► Q&A

2023 Milestones



Milestone 1; Lazertinib Coming Through

- Lazertinib Clinical Trials
 - CHRYSALIS1/2; exploratory trials for amivantamab that includes lazertinib combination in EGFR-mut NSCLC patients who exhausted SoC options
 - Laser301; lazertinib monotherapy vs 1st generation EGFR-TKIs
 - MARIPOSA; 1st line lazertinib/amivantamab combination head-to-head vs osimertinib
- Approved as 1st line treatment by MFDS in June 2023
 - Passed Drug Reimbursement Evaluation Committee in October 2023
- > Janssen presents MARIPOSA1/2 results at ESMO 2023
 - MARIPOSA-1, the first pivotal study to show a clinically meaningful benefit in a chemotherapy-free regimen vs osimertinib
 - MARIPOSA-2, the first P3 study to show statistically significant and clinically meaningful improvement in PFS in the post-osimertinib setting



Milestone 2; Cevidoplenib Completes Phase 2 in ITP

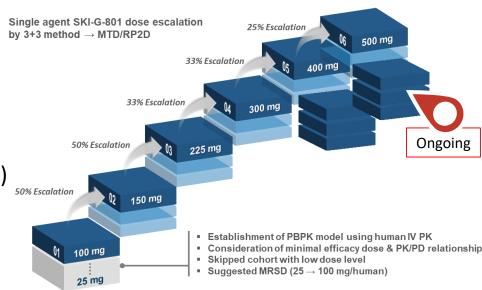


- Successful completion of Phase 2 study in patients with chronic ITP
 - Fast-onset, durable efficacy in many patients who are refractory to current therapies
 - Proven safety with, especially, superior GI tolerability
- > Development ongoing for 'Phase 3 readiness' (CMC, reproductive toxicology, etc)
- Partnering discussions ongoing
- Indication expansion on hold until partnering



Milestone 3; Denfivontinib (SKI-G-801) Ready for Primetime

- Denfivontinib (SKI-G-801) is a FLT3/AXL dual inhibitor
- Phase 1 monotherapy dose escalation study in patients with solid tumors
 - As expected, negligible monotherapy efficacy so far; 3/18 stable disease
 - Very well tolerated up to 400 mg; 1 DLT (cholangiohepatitis) at 300 mg and 1 SAE (diarrhea) at 400 mg
 - Pharmacokinetics; long half-life, dose-dependent (yet not dose-proportional) increase of exposure
- > Phase 1b/2a 'proof-of-concept' cohort expansion plan
 - 'Concept'; AXL inhibition will cut off an adaptive response of tumors to stress and thereby prevent the development of therapy-resistance
 - Denfivontinib to be tested as an add-on to the platinum-based standard-of-care chemotherapy in nonsmall cell lung cancer patients
 - Phase 1b combination dose-ranging study followed by randomized, placebo-controlled P2a study vs standard-of-care chemotherapy
 - Discussion ongoing with MFDS on the trial design



Milestone 4; ADEL-Y01 Enters the Clinical Phase

- ➤ ADEL-Y01 is a monoclonal antibody targeting a pathological form of tau protein (AcK280) to treat tauopathies including Alzheimer Disease
 - Highly effective in various preclinical in vitro/in vivo models (Journal of Clinical Investigation 2023)
 - Superior efficacies vs competitors' 2nd Generation anti-tau mAbs
- \blacktriangleright After (pending) approvals of anti-A β antibodies with limited efficacy, all eyes on anti-tau therapy
 - First generation anti-tau antibodies targeting N-terminal region predictably failed in P2s
 - Second generation antibodies targeting mid region in development; P2 data expected in 2025
 - High expectations on anti-Aβ/anti-tau combination therapy
- > IND approved by FDA; first-in-human dosing to start in early 2024
 - P1a single ascending dose study in healthy volunteers
 - P1b multiple ascending dose study in AD patients



Oscotec Oncology Strategy

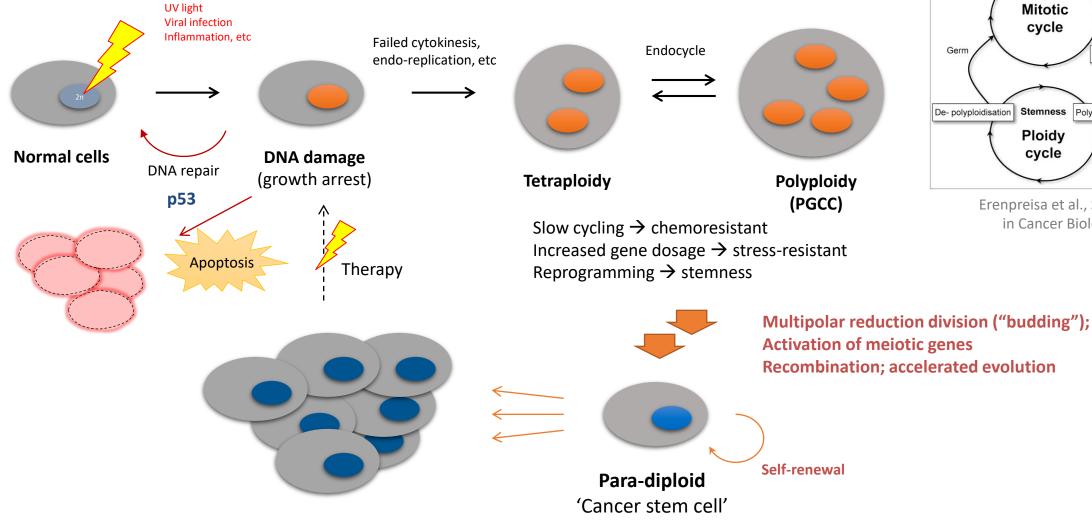


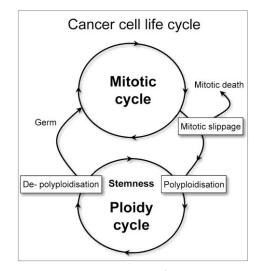
Cancer Therapy Failures; Resistance, Relapse, and Metastasis

- > Most cancers come back after therapy, stronger than before
 - Line after line after lines of therapies
 - Drug treatment may even accelerate malignancy progression and death
- > Current treatment paradigm is based on maximal tumor cell killing
 - Focus on selective killing of cancer cells vs normal cells
 - Tumor size is the primary measure of efficacy (ORR or PFS)
 - Yet, overall survival (OS) is frequently NOT correlated with PFS
- Mechanisms of therapy resistance
 - Intratumor heterogeneity
 - Cancer stem cells, drug-tolerant persisters, dormancy
 - Accelerated evolvability of tumors via whole genome doubling (WGD) and chromosome instability (CIN); therapy spurs its own resistance



Cancer Reproductive Life Cycle and Evolution





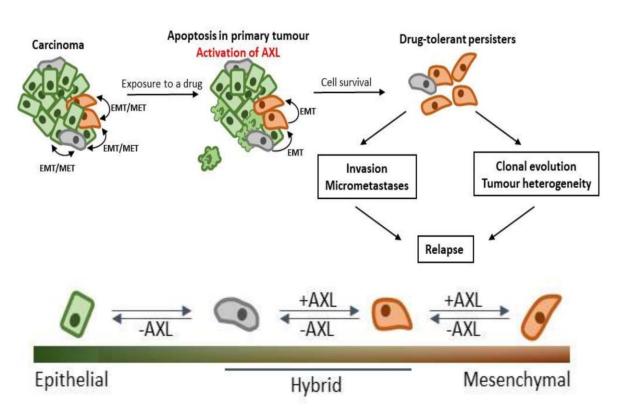
Erenpreisa et al., Seminars in Cancer Biology 2022

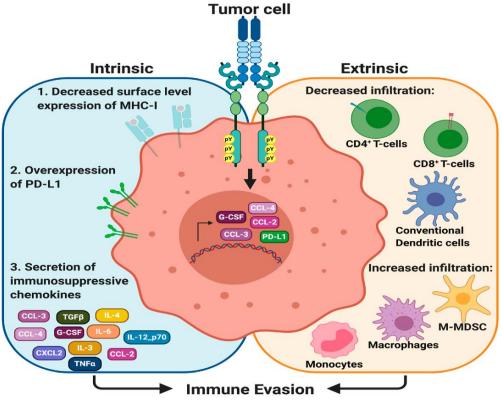
Differentiation into proliferative progeny cells



AXL Mediates Drug-Tolerance and Immune Evasion

- > AXL senses the stressful conditions by recognizing apoptotic cell deaths
- \triangleright Activation of AXL promotes cancer cell survival by inducing stress-resistance (EMT, DDR, etc) and immune evasion (IL-10, TGF β , etc)





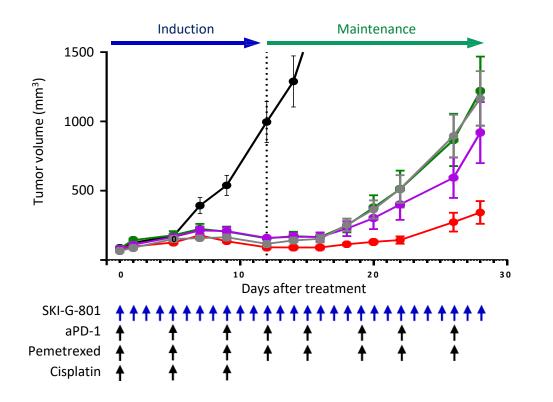
Auyez et al., Cancers 2021

Tanaka and Siemann, Cancers 2020



Denfivontinib (SKI-G-801) Significantly Delays Tumor Regrowth

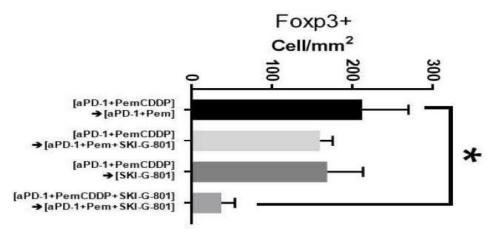
TC-1 syngeneic mouse adenocarcinoma model



Vehicle control
 [aPD-1 + PemCDDP] → [aPD-1 + Pem]
 [aPD-1 + PemCDDP] → [SKI-G-801]

 $[aPD-1 + PemCDDP] \rightarrow [aPD-1 + Pem + SKI-G-801]$

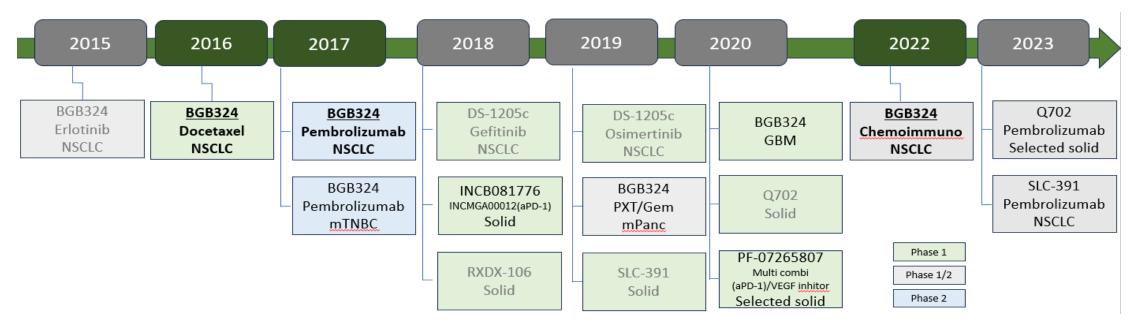
→ [aPD-1 + PemCDDP + **SKI-G-801**] → [aPD-1 + Pem + **SKI-G-801**]



- AXL inhibition by denfivontinib during the <u>chemotherapy induction phase</u>, when the tumor cell apoptosis is at the highest, significantly delays tumor regrowth
- FoxP3+ regulatory T cells are dramatically reduced



AXL Inhibitors in the Clinical Trials

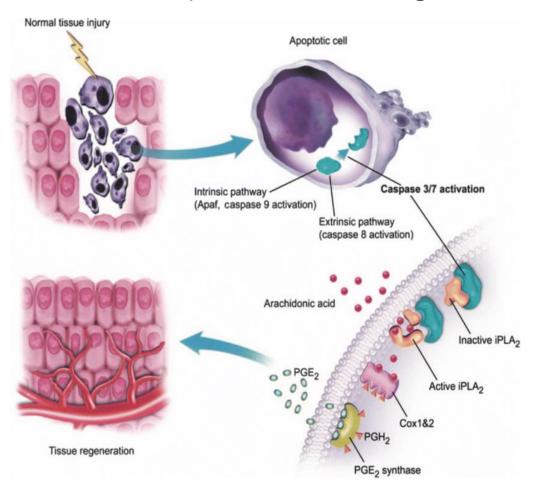


- No meaningful efficacies observed as a single agent
- > Combination with an EGFRi in patients who progressed after targeted therapy
- Combination with an ICB in patients who progressed after ICB monotherapy
- Ongoing Phase 2a, first-line treatment with bemcentinib (BGB324) combination with pembrolizumab/carboplatin/pemetrexed in NSCLC patients with STK11 mutation

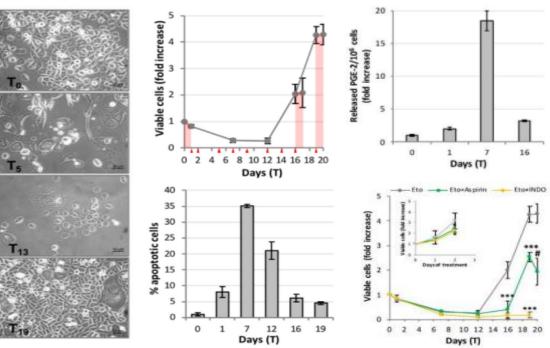


Cancer Repopulation via Phoenix-Rising (PGE2)

Phoenix-rising pathway (Casp3iPLA2-COX2) in wound healing



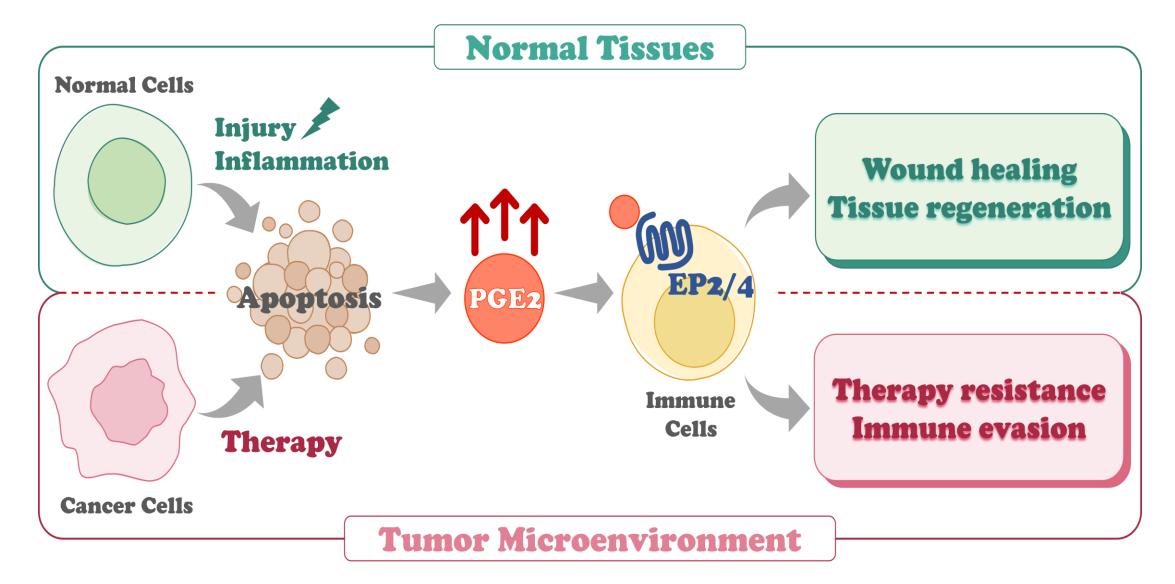
- Emergence of chemo-resistance in cancer
 - Prostate cancer cells (PC3) treated with etoposide for 24h followed by recovery
 - Apoptosis > quiescence > repopulation
 - PGE2 level highest at the peak of apoptosis
 - COX2 inhibitor abolishes repopulation







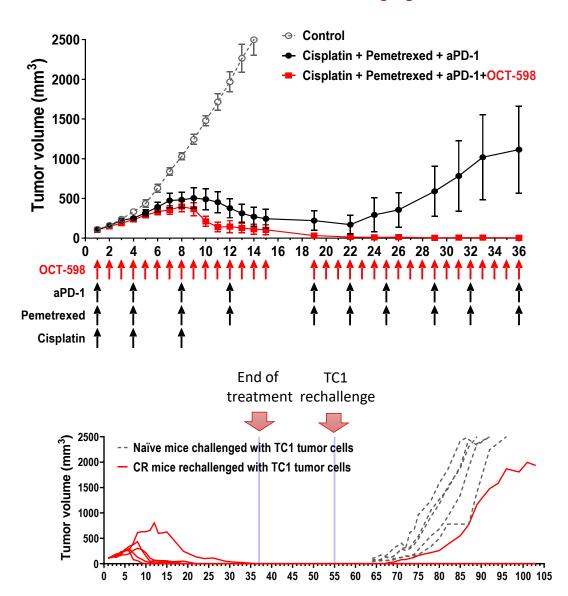
PGE2-EP2/4 Axis at the Center of Tumor Resurrection





OCT-598 Abrogates Tumor Regrowth After SoC Therapy

- OCT-598 is a potent and selective EP2/EP4 dual antagonist
- TC-1 mouse syngeneic lung adenocarcinoma model
 - OCT-598 add-on to standard-of-care regimen (cisplatin/pemetrexed/αPD-1) gave rise to 100% tumor regression
 - Upon TC1 rechallenge in the CR mice,
 4 out of 5 mice remained tumor-free
 - Presented in AACR 2023
- Other translational studies ongoing (SoC combination and radiocombination in GC, mCRPC, etc)
- > IND to be submitted in 3Q2024





Oscotec R&D Pipeline

	MoA	Indication	Discovery	Lead Opt	Preclinical	Phase I	Phase II	Partner
Cevidoplenib (SKI-O-703)	SYK Inhibitor	RA						
		ITP						
Denfivontinib SKI-G-801	FLT3/AXL Dual Inhibitor	AML						
		Solid tumors						
ADEL-Y01	Anti-TAU mAb	Alzheimer						We dream of a world without dementia.
OCT-598	EP2/4	Cancer						KANAPH Therapeutics Inc.
ONC1	(Undisclosed)	Cancer/Fibrosis						
ONC2	(Undisclosed)	Cancer						
ONC3	(Undisclosed)	Cancer						biorevert
ONC4	(Undisclosed)	Cancer						biorevert



Upcoming Catalysts





Q&A

