

Oscotec R&D Day

April 15, 2024

Taeyoung Yoon, Ph.D.

CEO

Disclaimer

This presentation has been prepared by Oscotec Inc.(the “Company”) solely for its own use at its presentation to company investors.

Information contained herein is strictly confidential, and is given only for your information and for your use and may not be copied, reproduced, distributed, redistributed or passed on, directly or indirectly, to any other person in any manner, or published, in whole or in part, for any purpose. Certain statements contained herein constitute forward-looking statements that are based on management’s expectations, estimates, projections and assumptions. Words such as “anticipates,” “plans,” “estimates,” “expects” and variations of these words and similar expressions are intended to identify forward-looking statements. Such statements address future financial results and business standings.

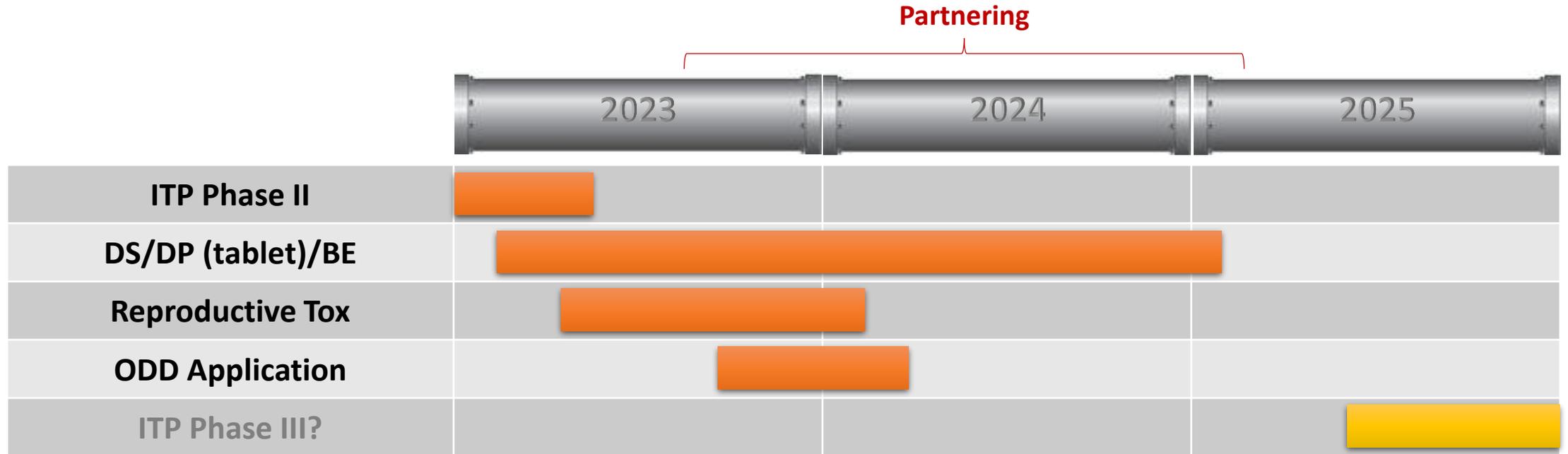
Forward-looking statements are not guarantees of future performance and involve certain uncertainties and risks, which are affected by further changes in business environment. Therefore, actual future results and trends may differ materially from the forecasts reflected in the forward-looking statements herein due to a variety of factors including but not limited to the changes in market conditions and strategy revisions.

The Company is not liable for any investment decisions by its readers or subscribers and does not undertake any legal obligation to present any supporting evidence against investment results of investors under any circumstances.

Agenda

- Oscotec Pipeline Update
 - Cevidoplenib (SKI-O-703) in partnering discussions
 - Denfivontinib (SKI-G-801) wrapping up P1a study in solid tumors
 - ADEL-Y01 P1a study underway (Cohort 2)
 - OCT-598 completes GLP tox studies; CMC development ongoing
- Spotlight on ADEL-Y01
 - Alzheimer drug development landscape
 - The promises and pitfalls of tau immunotherapy
 - ADEL-Y01, the best-in-class anti-tau antibody
- Under the Hood
- Q&A

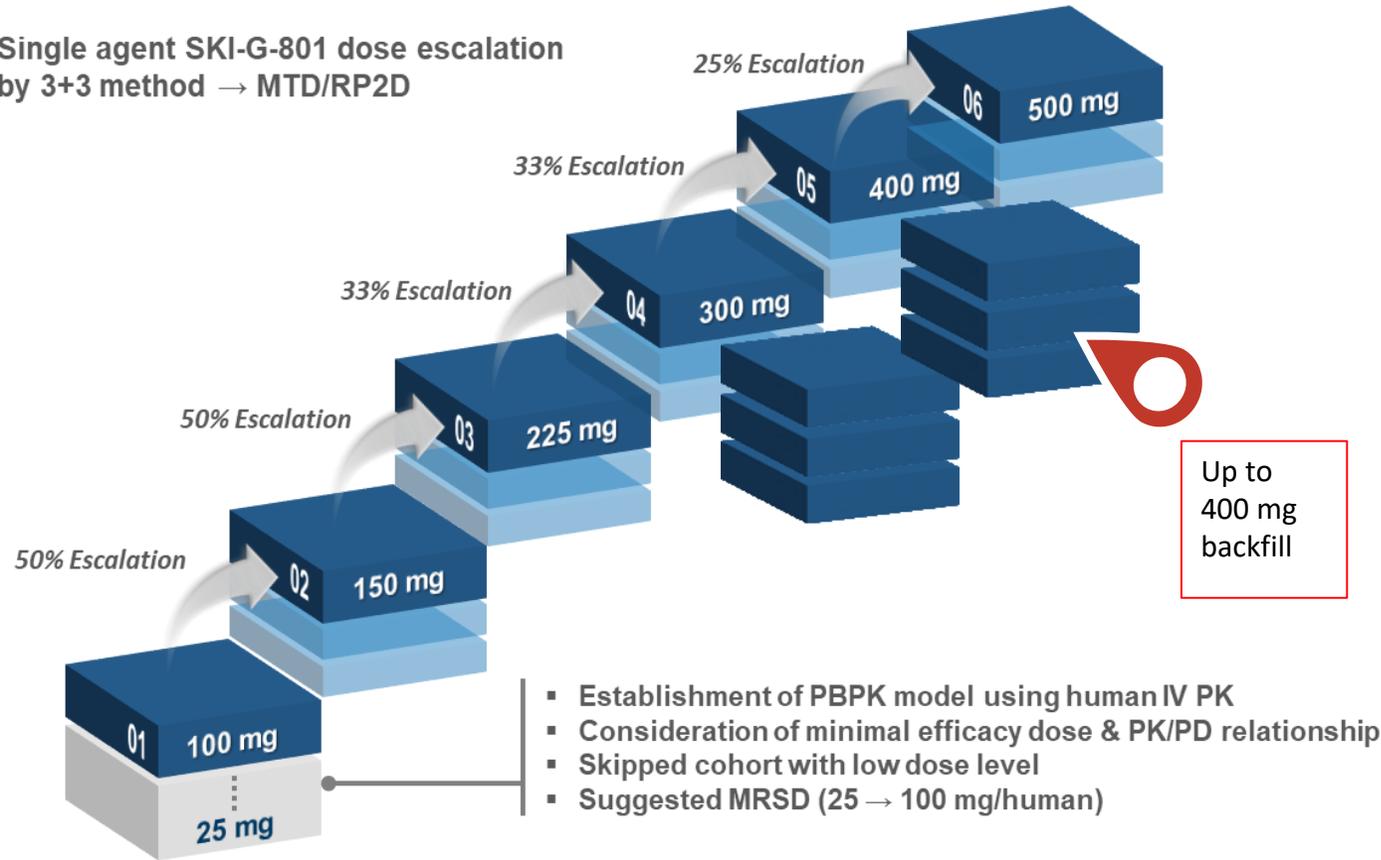
Cevidoplenib; Immune Thrombocytopenia and Beyond



- Successful completion of Phase 2 study in patients with chronic ITP
- Completed reproductive toxicology
- **Orphan drug designation by FDA**
- **Large potential for indication expansion**
- **Partnering discussions ongoing**

Denfivontinib Clears the Safety Bar in P1a

Single agent SKI-G-801 dose escalation by 3+3 method → MTD/RP2D



Aims

Dose finding
Safety, PK

Main Eligibility

Refractory
Solid Tumor

Safety Review

SRC review prior to
dose escalation

Safety profile

- MTD not reached (400 mg)
- 2 DLTs reported
- 3 SAEs reported
- No new safety signals

Efficacy signal

- Little antitumor activity observed as a single agent

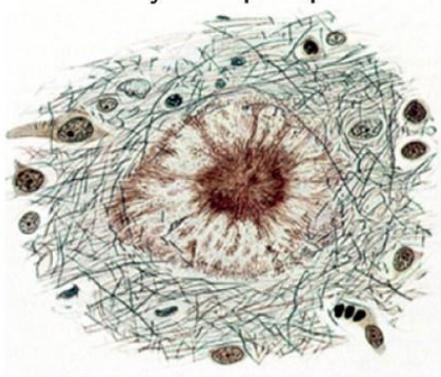


ADEL-Y01

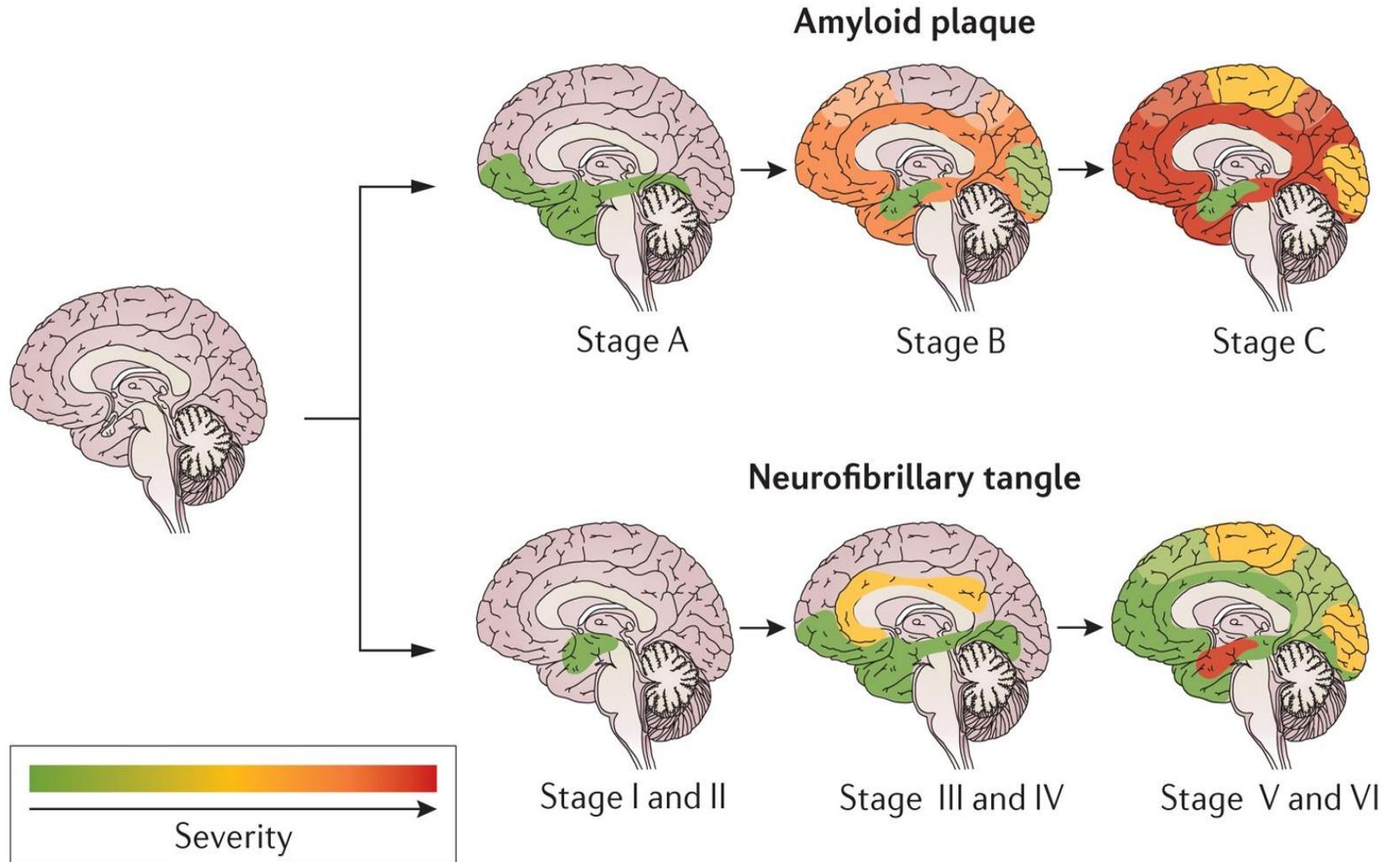
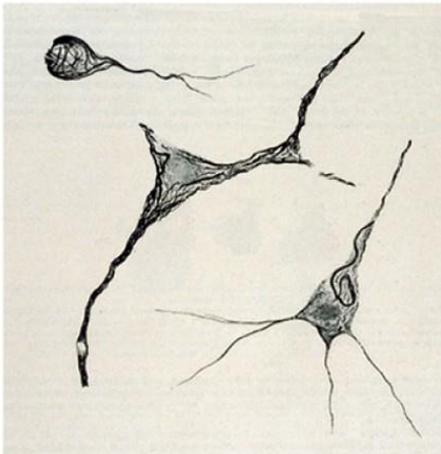
for Alzheimer's Disease

Alzheimer Disease

Amyloid plaque



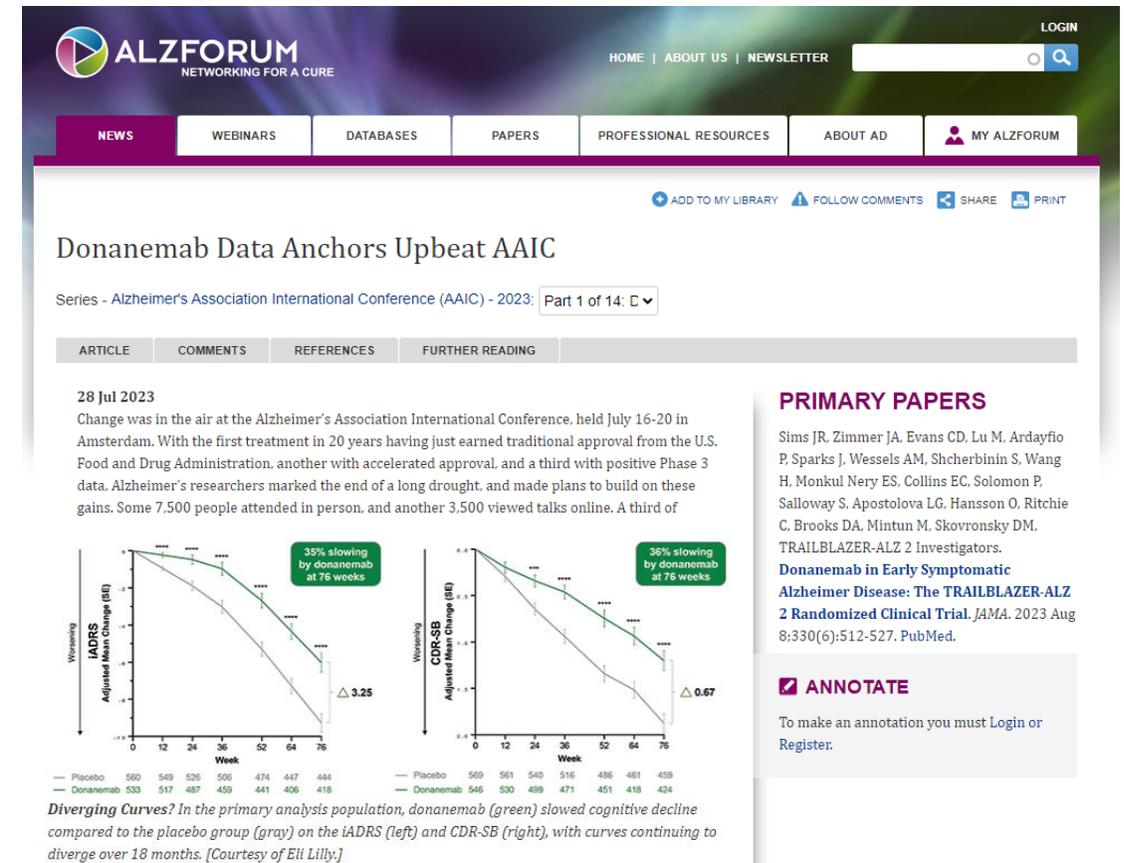
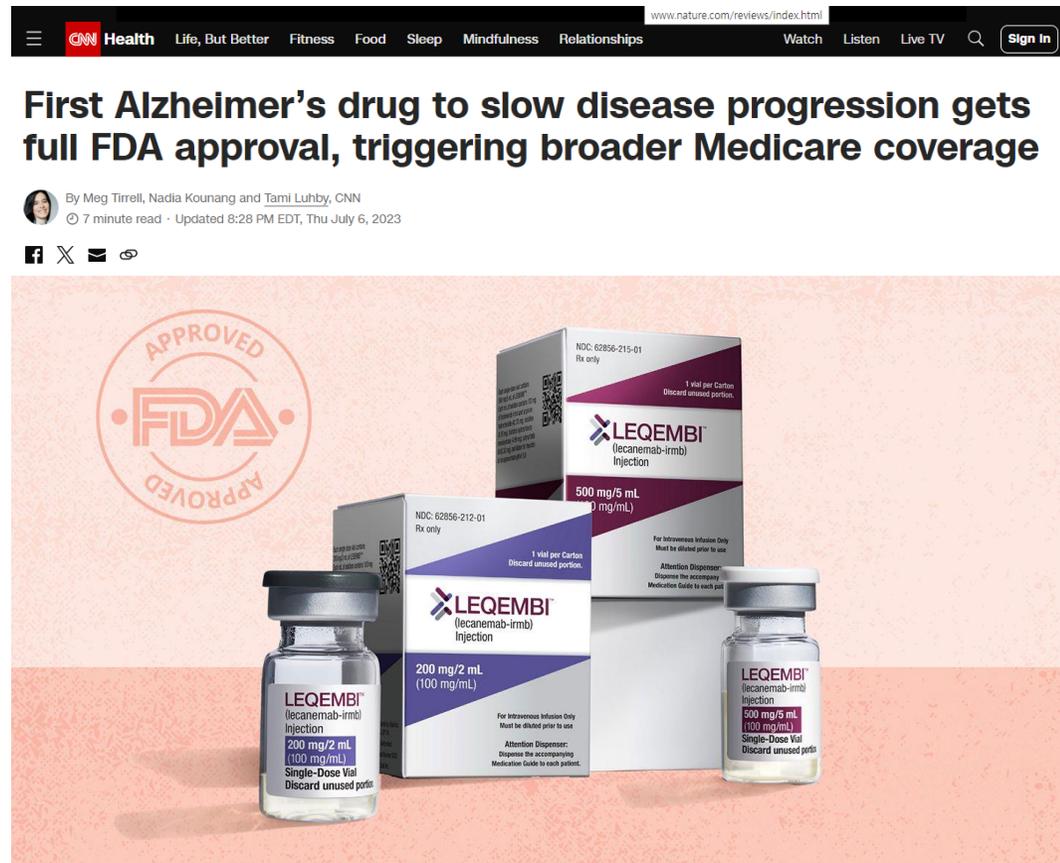
Neurofibrillary tangle



Nature Reviews | **Disease Primers**

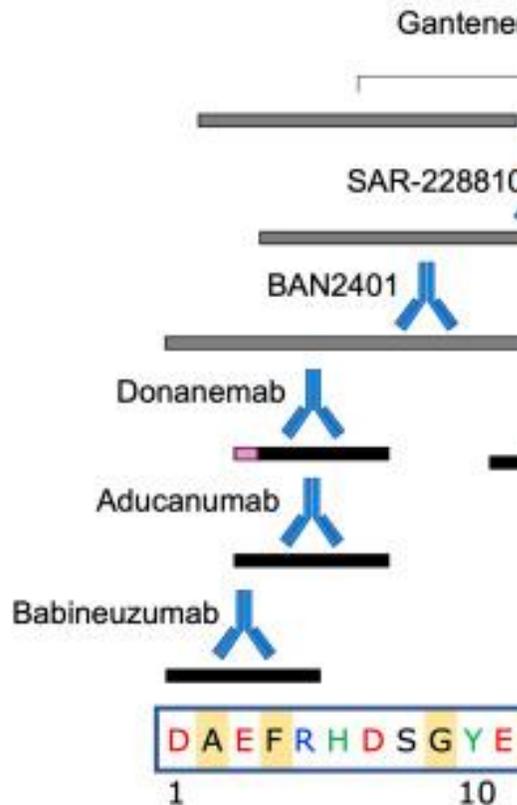
After Decades of Failures, Anti-A β Drugs Coming Through

- Lecanemab (Leqembi[®], Eisai/Biogen) fully approved
- Donanemab (Eli Lilly) has shown good efficacy in P3 (esp. in low-tau patients)

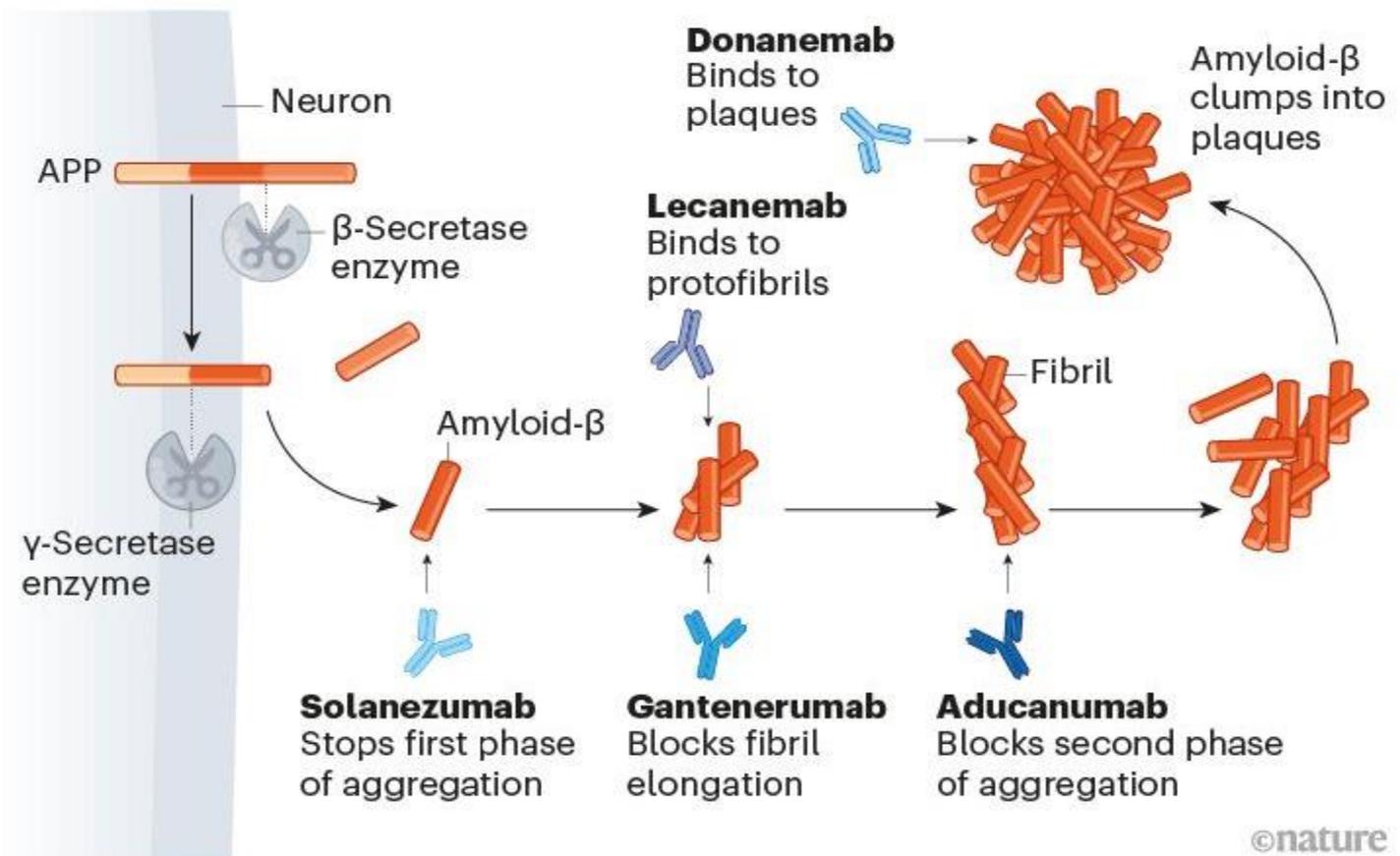


The Secrets of Success

Antibodies binding to different regions of amyloid beta peptide

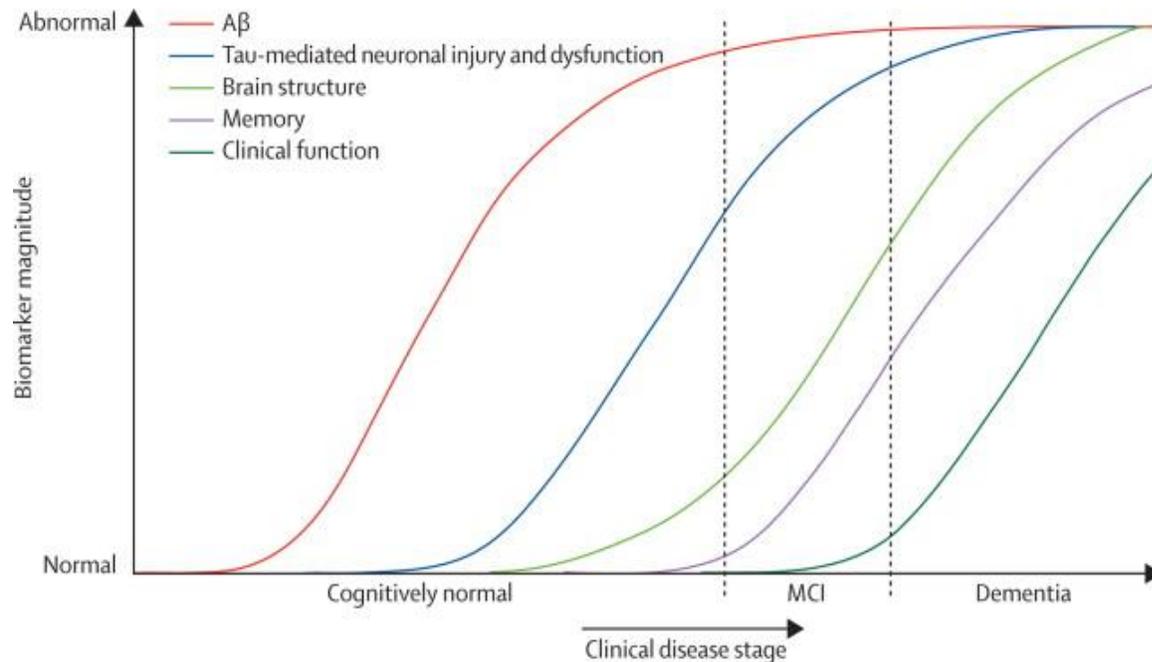


Antibodies clearing different 'species' of amyloid beta

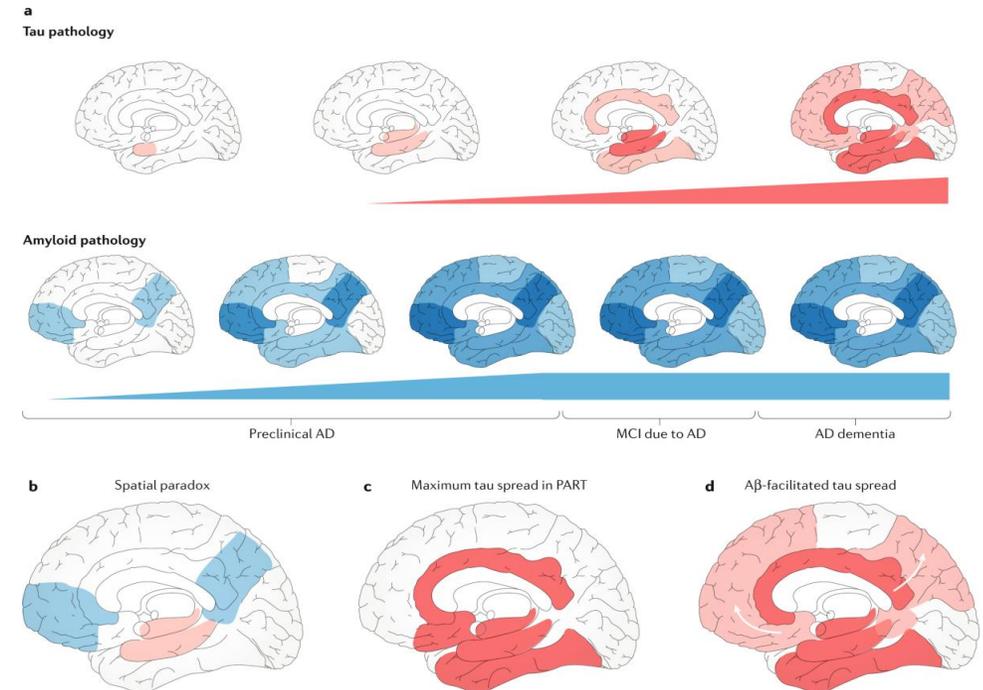


Next in Line; Anti-Tau Therapy

- What we learned from anti-A β therapies
 - Not all anti-A β antibodies are created equal; targeting the right epitope matters
 - Lowering A β is more effective in earlier AD patients, “before it bothers tau”
 - Tau deposits are the best indicator of cognitive decline
- Targeting tau is the logical next step toward improved outcomes



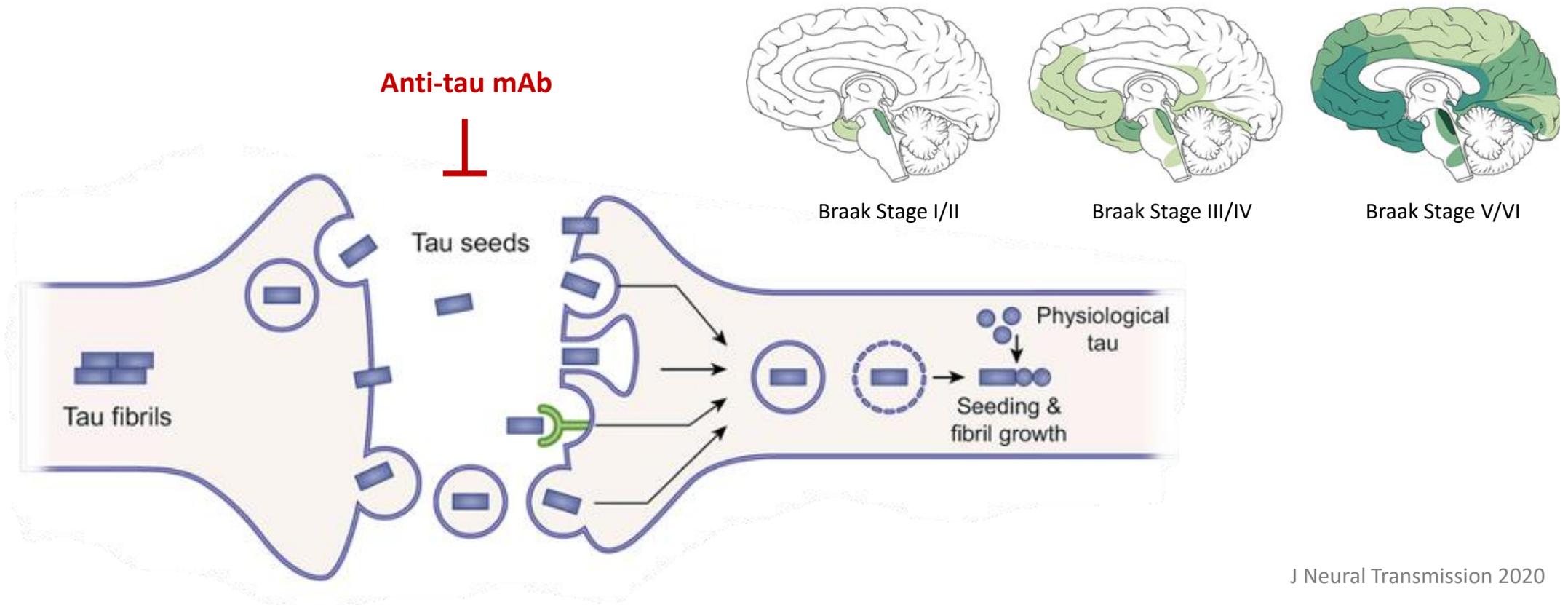
Lancet Neurol 2013



Nat Rev Neurosci 2019

Tau Immunotherapy; Blocking Tau Spreading

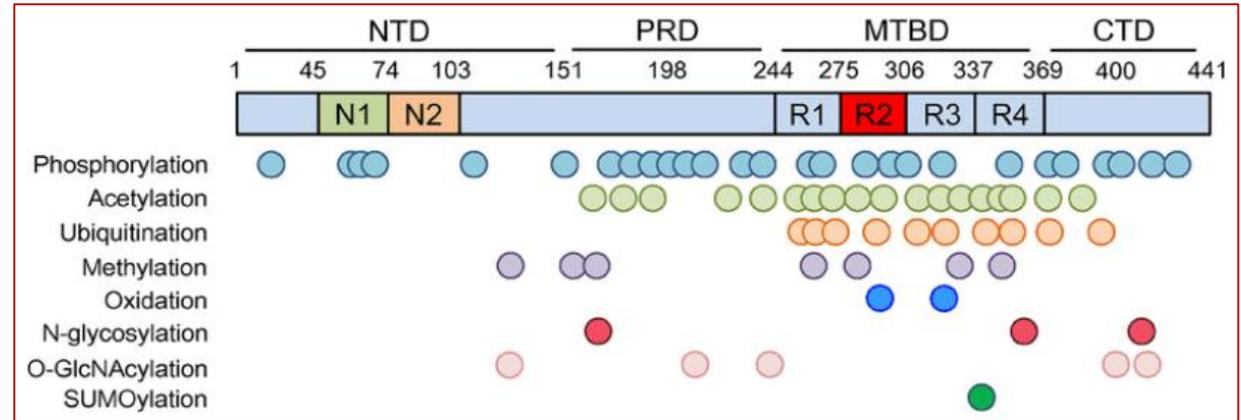
- Tau tangles spread from entorhinal to limbic to cortical regions as AD progresses
- Cell to cell transmission through specific neuronal networks
- Presynaptic release and postsynaptic uptake followed by prion-like seeding



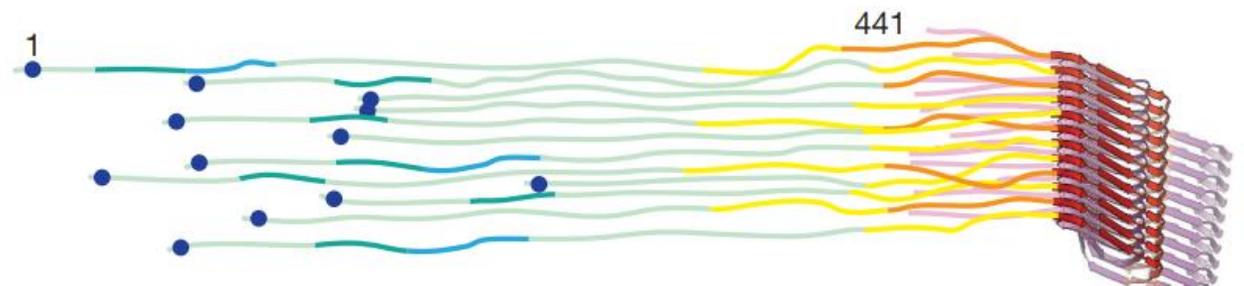
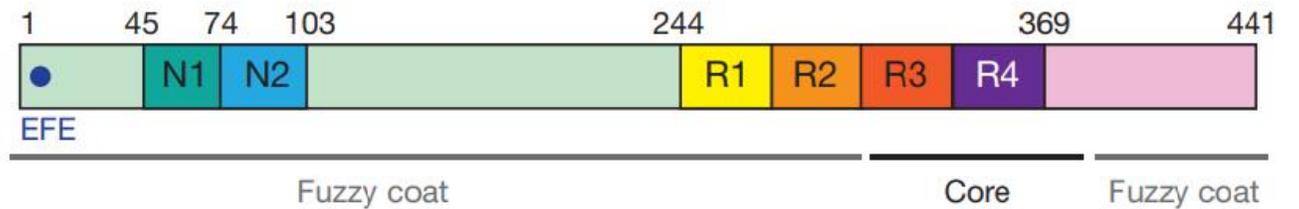
J Neural Transmission 2020

Targeting Tau Protein

- Tau is a 441-aa-long, intrinsically disordered protein (IDP)
- Infinite number of possible combination of post-translational modifications (PTMs)
- Certain mutations/PTMs can stabilize certain aggregation-prone conformations
- R3/R4 domains of MTBR (microtubule-binding region) form the fibrillar core
- Extensive hydrolysis of fuzzy coat
- Diverse core structures (“tau strains”)

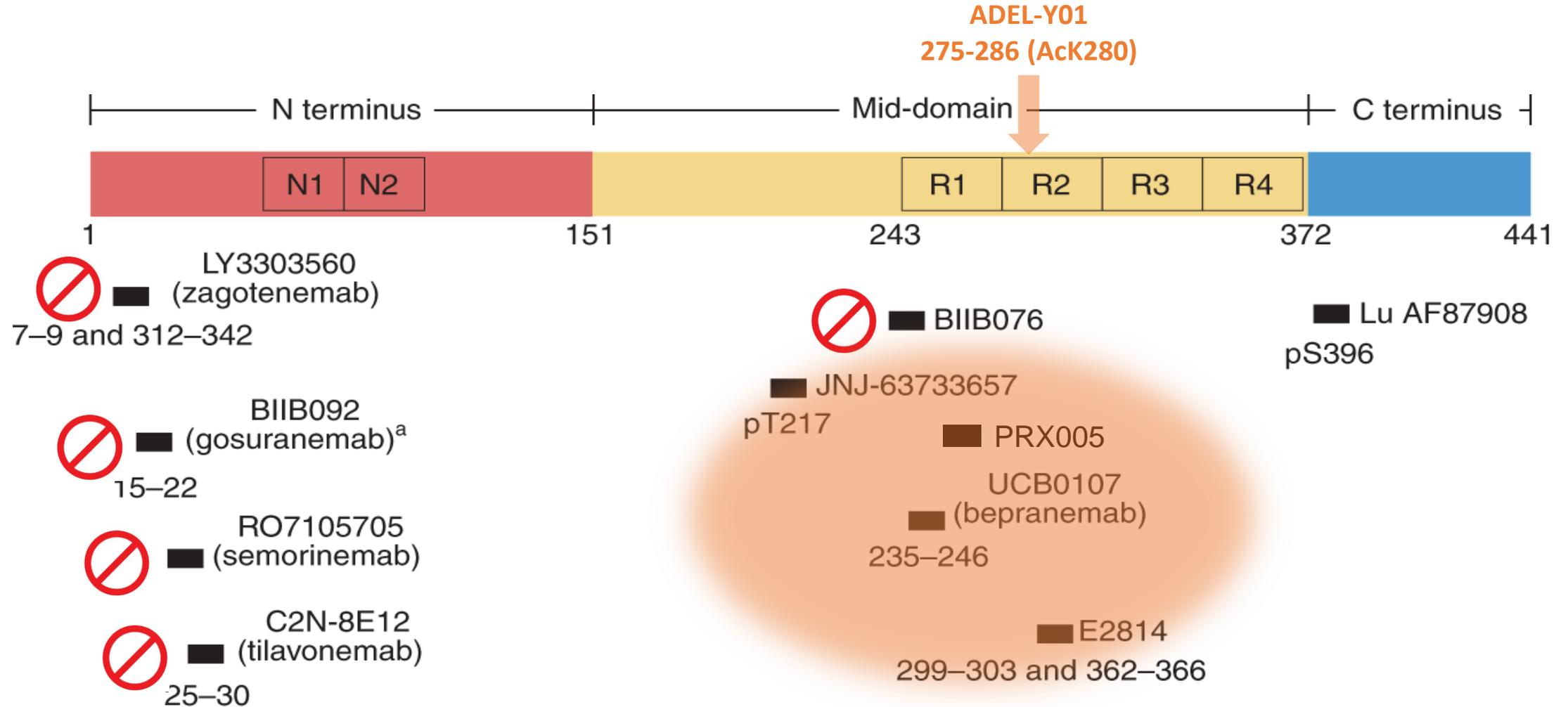


J Mol Neurosci 2022



Nature 2017

Anti-Tau Antibodies in the Clinic

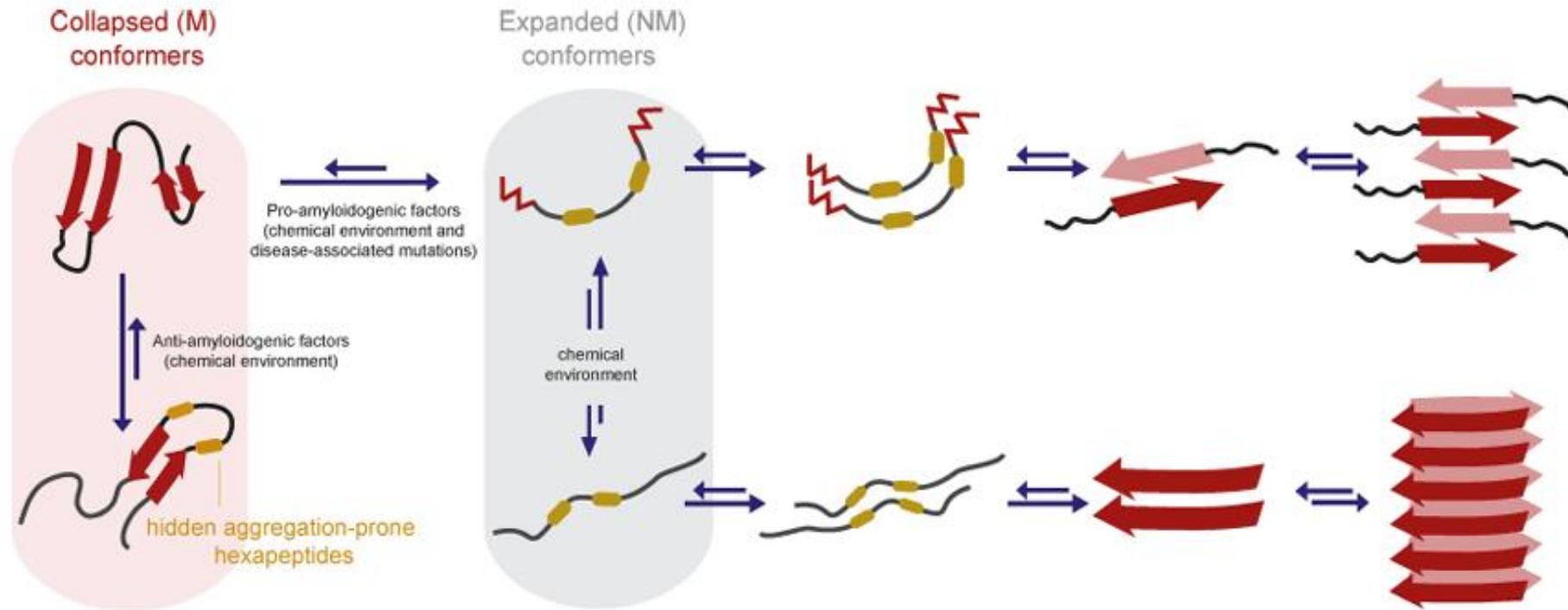


MTBR tau antibodies awaiting clinical proof-of-concept

Modified from Nat. Med. 2021

VQIINK²⁸⁰ is Critical for Tau Aggregation

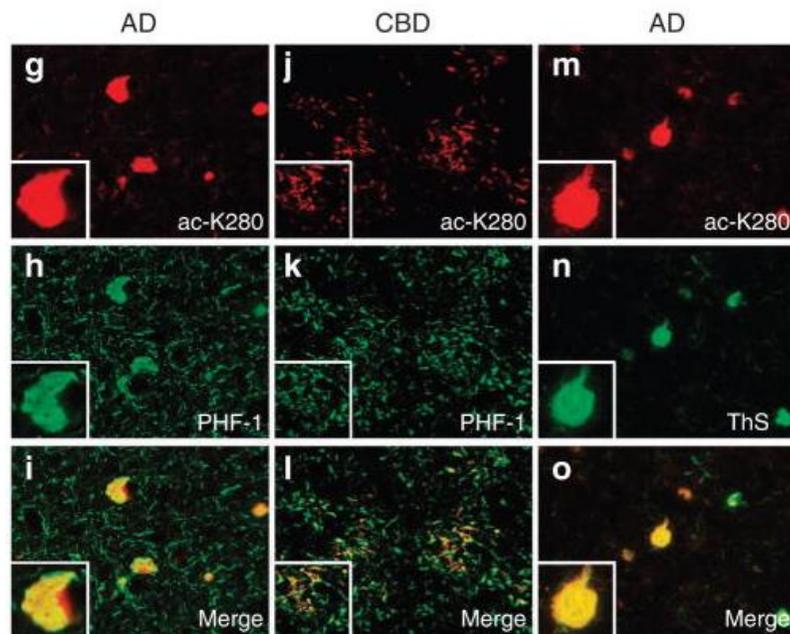
- VQIINK²⁸⁰-VQIVYK³¹¹ (R2/R3) hexapeptide controls aggregation propensity
- Extended conformation of the hexapeptide drives aggregation
- Disease-associated acetylation stabilizes tau fibrils (Li et al., Structure 2023)



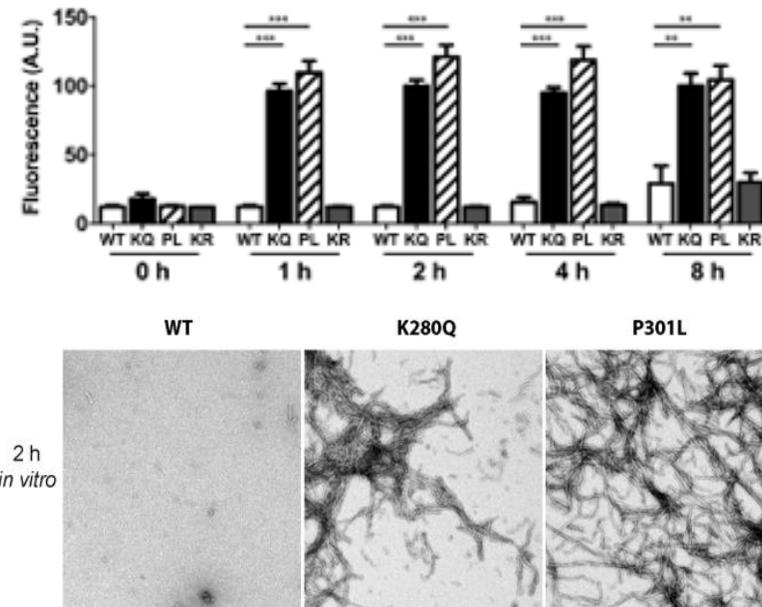
Angew Chem Int Ed Eng 2022

Rationale for Targeting K280-Acetylated Tau (AcK280)

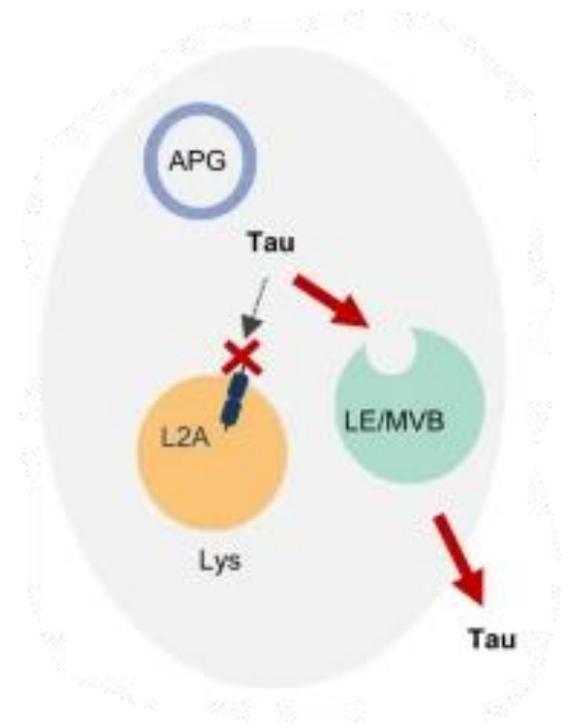
- Tau K280 acetylation is a pathological PTM (undetectable in normal brain)
- AcK280 (or K280Q) dramatically accelerates tau aggregation
- Tau acetylation impairs autophagic flux and promotes tau secretion



Nat Commun 2011



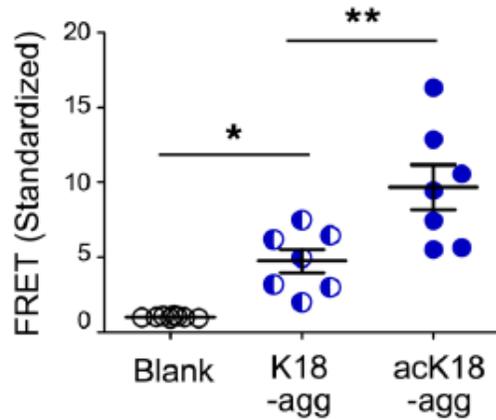
Sci Rep 2017



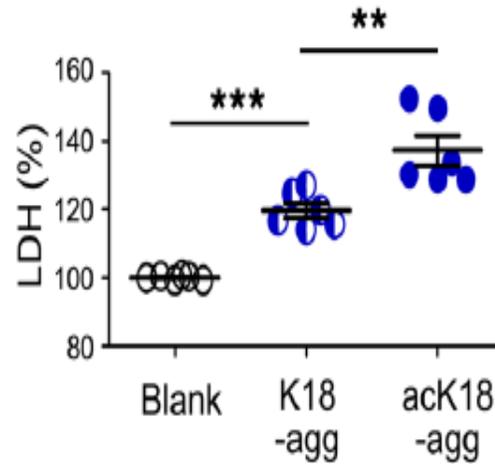
Nat Commun 2021

Tau Acetylation Enhances Pathogenicity

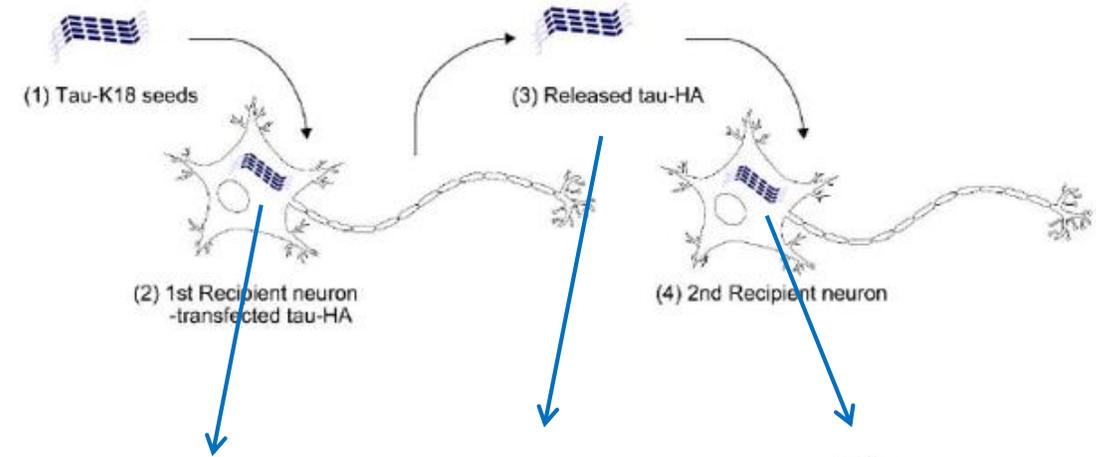
Seeding



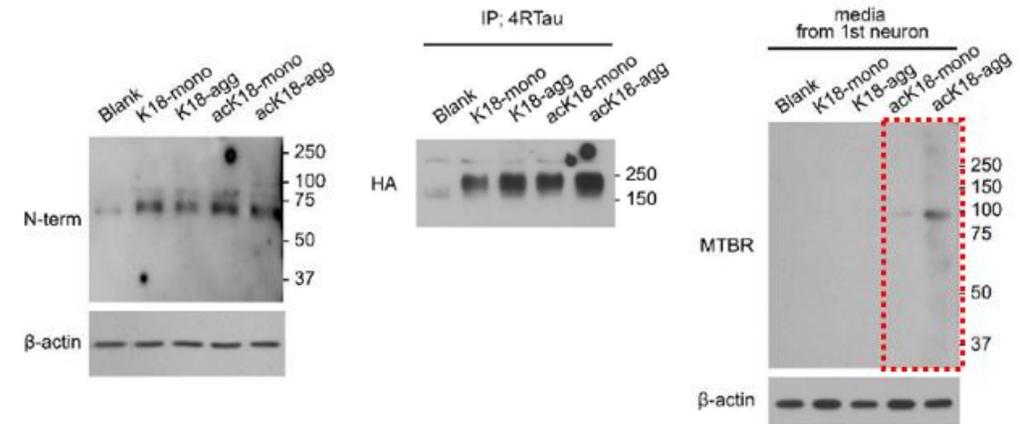
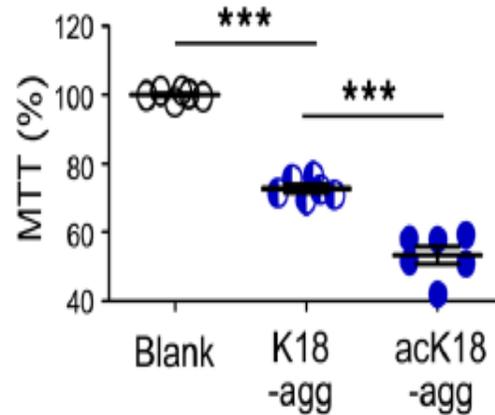
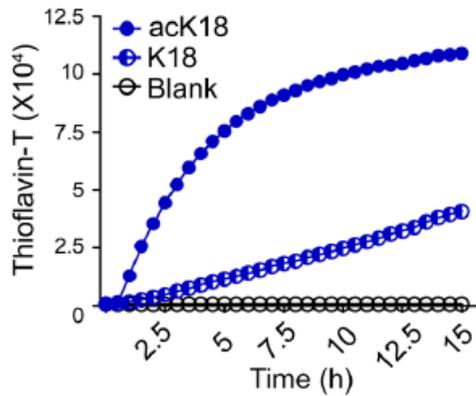
Neurotoxicity



Propagation



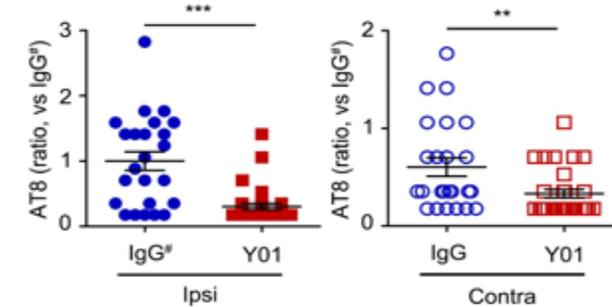
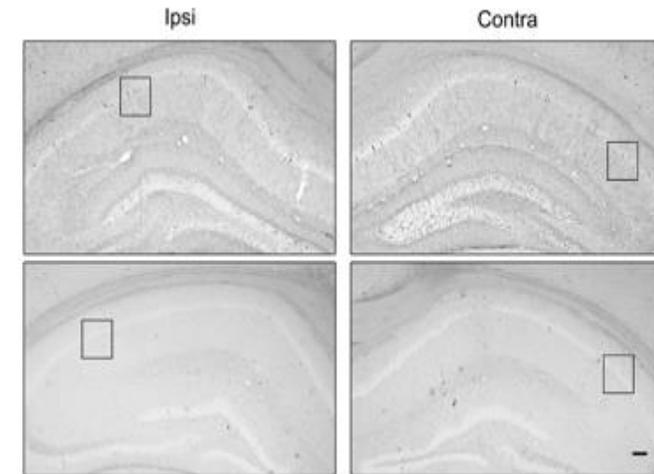
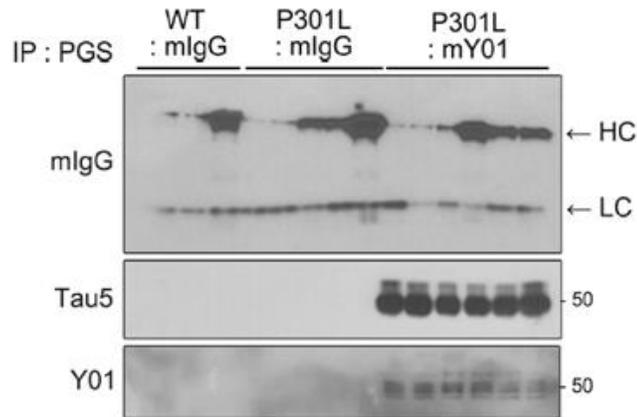
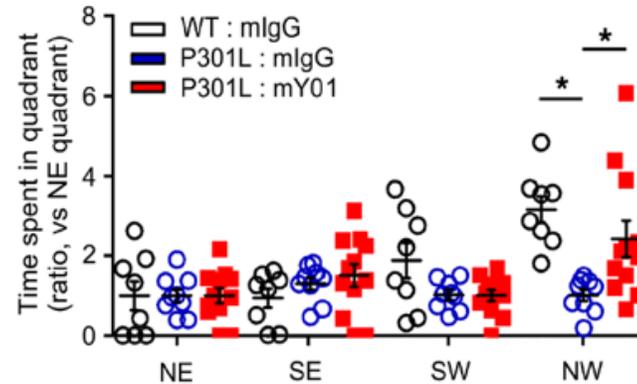
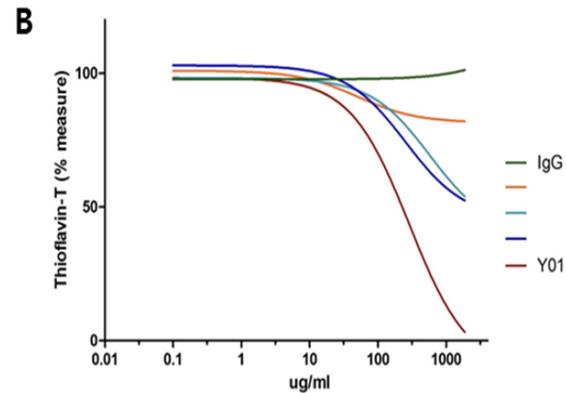
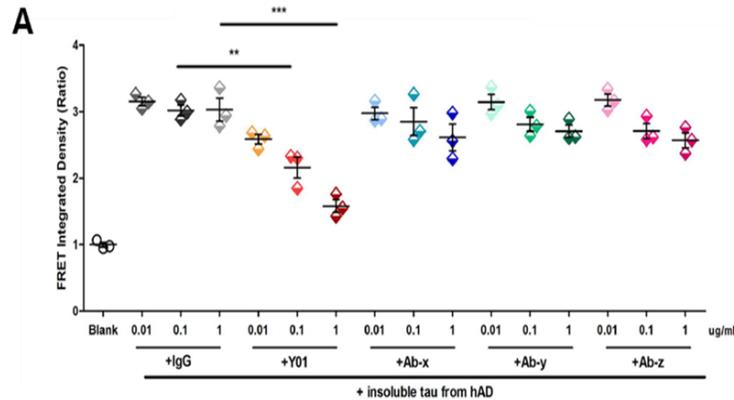
Aggregation



J Clin Investigation 2023

ADEL-Y01; Best-in-Class Anti-Tau Antibody

- Superior in vitro activities (seeding, aggregation) to competitors'
- Improved behaviors and brain tau pathology in mouse tauopathy models (P301L)
- Inhibited propagation of human tau tangle in P301S mice



J Clin Investigation 2023

ADEL-Y01; First-in-Human Clinical Trial Commenced

➤ First in Human, Phase Ia/Ib study for safety, tolerability, pharmacokinetics, and clinical activity evaluation of ADEL-Y01 in healthy participants and in participants with Mild Cognitive Impairment due to Alzheimer’s disease or mild Alzheimer’s disease

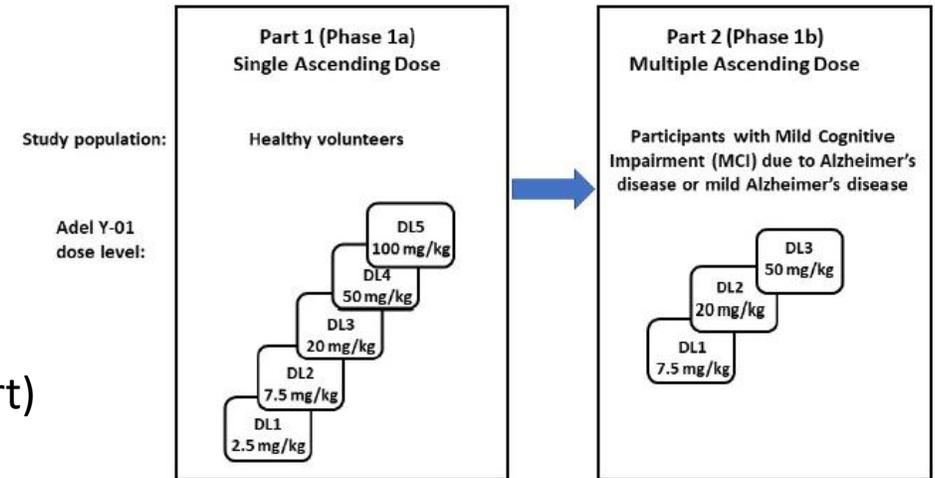
➤ Objectives

- Primary; safety, tolerability and pharmacokinetics
- Secondary; PD effects in patients (CSF/plasma biomarkers)

➤ Study design

- Part I; SAD in HV (5 dose levels, 8 subjects per cohort)
- Part II; MAD in MCI/AD (3 dose levels, 11 subjects per cohort)

➤ Timeline



Phase 1		2023				2024				2025			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
IND (US FDA)													
Part I (SAD)	Healthy volunteers (n = 40)												
Part II (MAD)	MCI from AD or mild AD (n = 33)												

The Best is Yet to Come

➤ Clinical Pipeline

- Cevidoplenib for ITP and others
- SKI-G-801 for solid tumors
- ADEL-Y01 for Alzheimer disease

➤ Preclinical Pipeline

- OCT-598 for solid tumors (IND in 2024/5)

➤ Discovery Pipeline

- A novel cancer/fibrosis program (candidate selection in 2024)
- A novel cancer therapy resistance target (lead in 2024; Galux collaboration)
- First-in-class targets from BioRevert collaboration

➤ Platform Technologies

- Undruggable targets
- Transformative screening technology

Q & A