



Precision-Engineered Cell Therapy Orca-T Demonstrates High Relapse-Free Survival at 1 Year While Reducing Graft-Versus-Host Disease and Toxicity

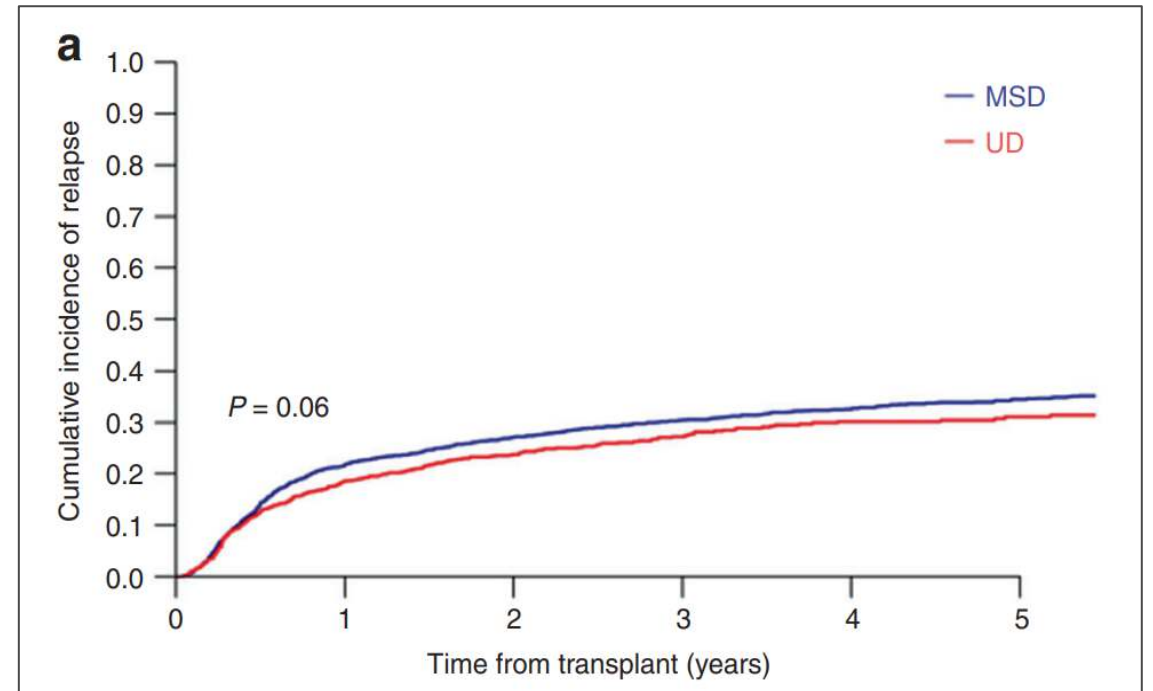
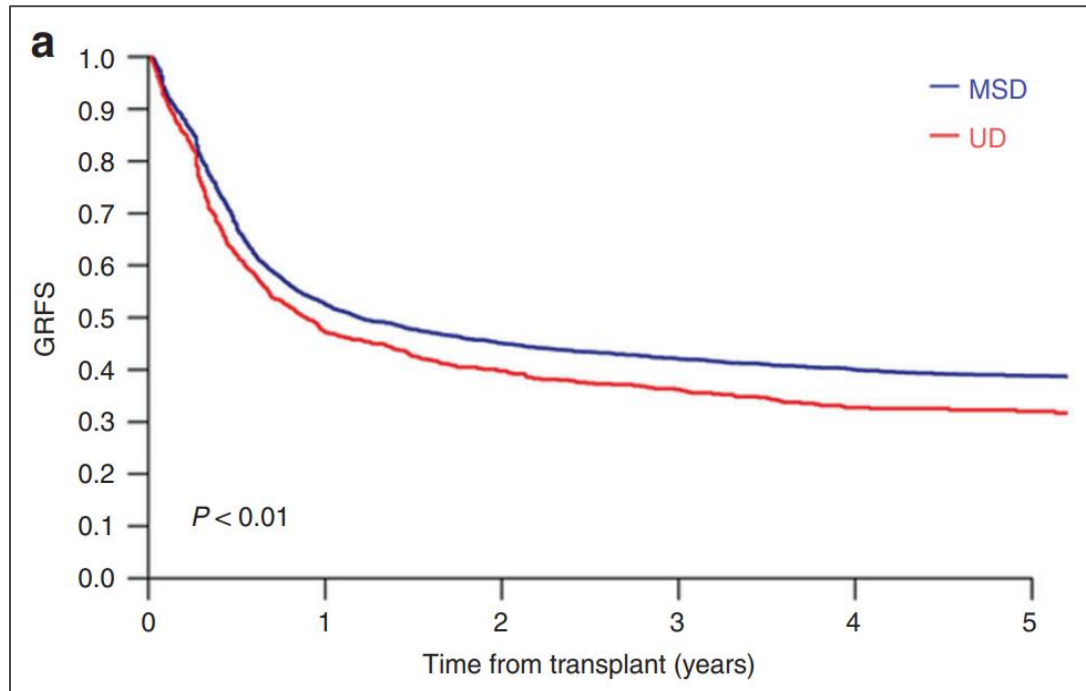
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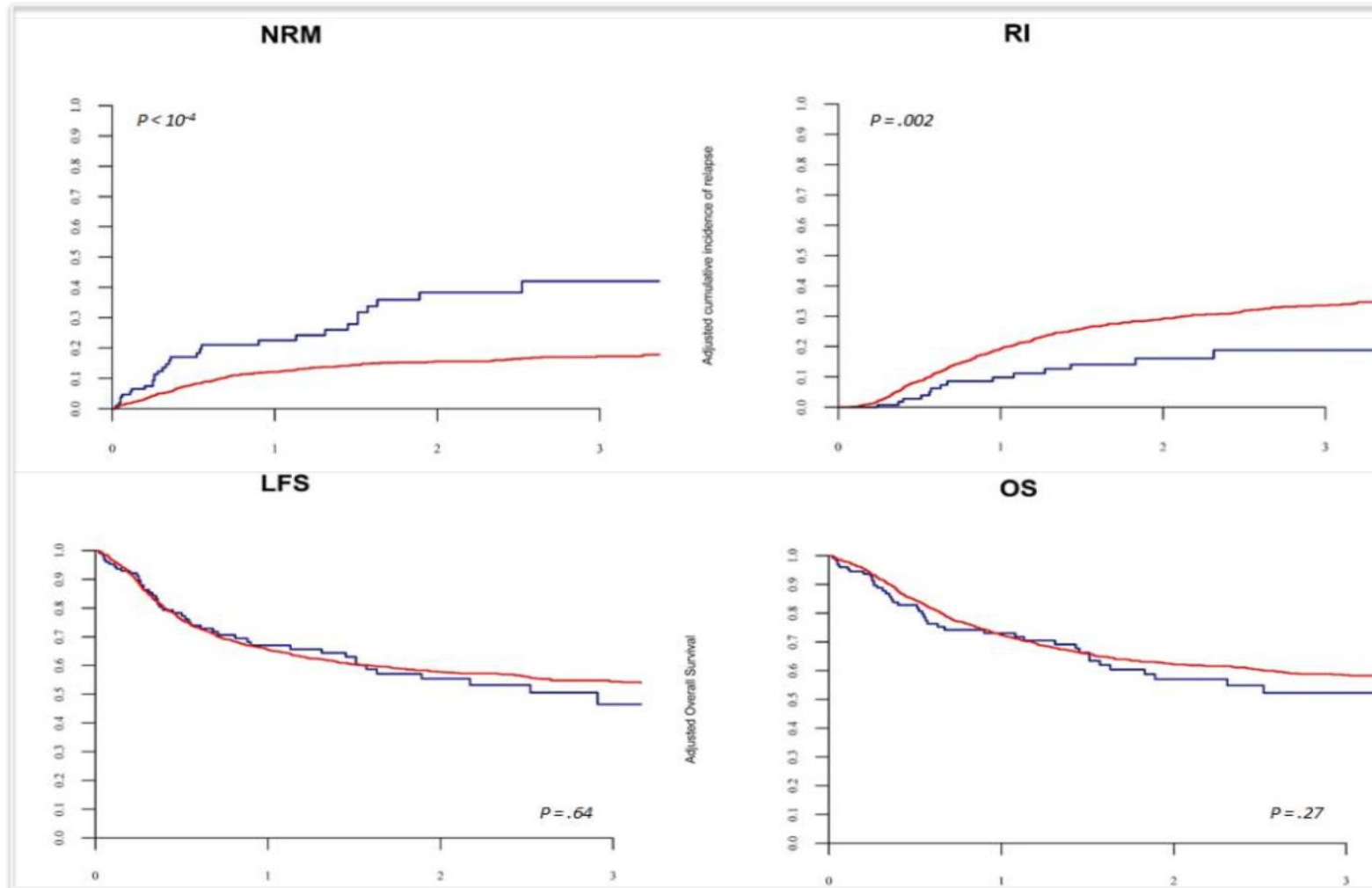
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HLA Matched Donor Hematopoietic Stem Cell Transplantation Remains Challenging

GRFS and RFS after AlloHSCT from a Matched Donor
(Adults with AML with intermediate or unfavorable karyotype in first complete remission)



Enabling Higher Intensity Conditioning to Reduce Relapse and Improve Survival Would Be Ideal



BFT compared to BF for MRD/URD transplant in acute myeloid leukemia in first remission

— Bu/Flu/Thio (BFT)
— Bu/Flu (BF)

- Better Disease Control
- Worse NRM
- Equivalent RFS/OS

Opportunity to Improve Clinical Outcomes from AlloHSCT with Precision Engineering

Current Transplants

Uncontrolled mix of over 50 cell types
10e8 – 10e9 cells/kg



- Hematopoietic stem cells
- Progenitor cells
- Conventional T cells
- T regulatory cells
- NK cells
- Invariant NKT cells
- Dendritic cells
- Myeloid derived suppressor cells



Orca Bio's Precision Engineered Cell Therapy

Defined Cell Population of Tregs and Tcons



Long term blood and immune reconstitution

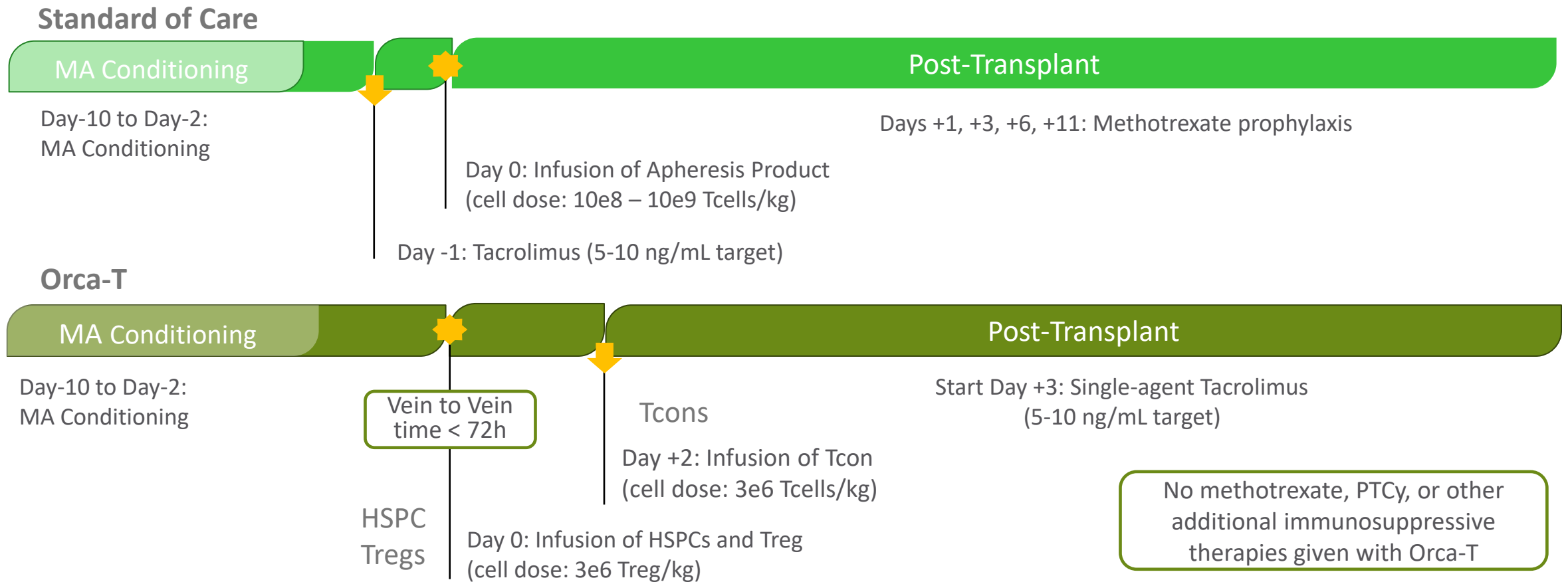


High purity to Prevent GvHD



Bridge immune reconstitution
Disease control
Infection control

Orca-T Treatment Consists of MAC with Single-Agent Tacrolimus



Study Key Eligibility Criteria

Single Center Phase 2 Trial (NCT01660607)* Multicenter Phase 1b Trial (NCT04013685)

- Acute leukemia (AML, ALL, mixed phenotype), in CR
- Acute leukemia (AML, ALL, mixed phenotype), with active disease at time of transplant (\leq 10% BM blast burden)
- Myelodysplastic syndrome
- Myelofibrosis
- BPDCN
- CML in accelerated phase or blast crisis
- Non-Hodgkin Lymphoma*

8/8 matched related or unrelated donor

HCT-CI \leq 4

KPS \geq 70

Age 18-65 (or 18 –72)*

Adequate organ function

Baseline Characteristics

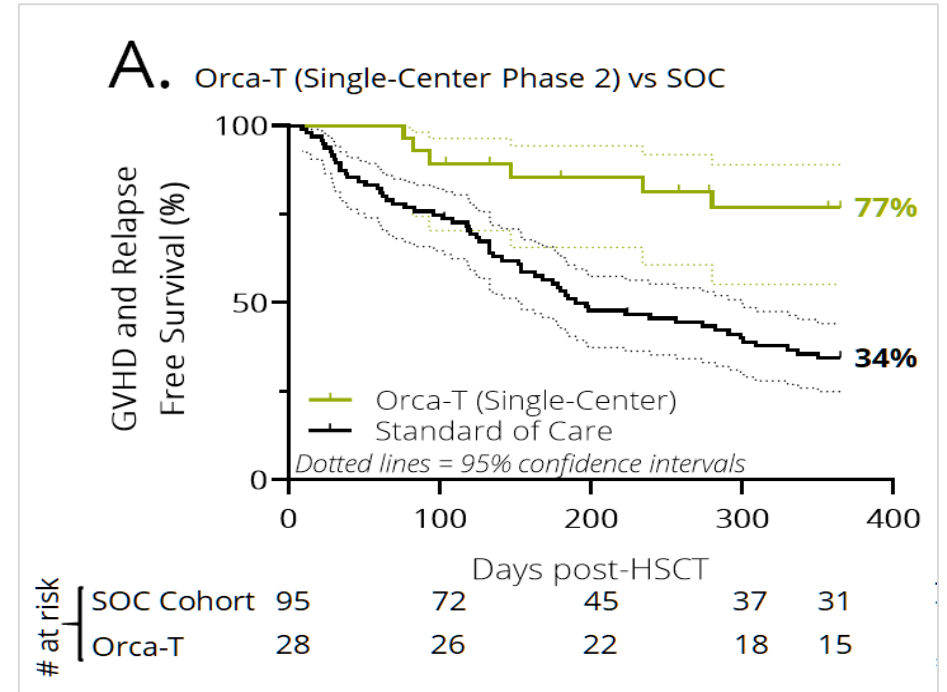
Single Center Phase 2 (NCT01660607, n=34) Multicenter Phase 1b (NCT04013685, n=117)		CIBMTR Control (n = 375)	Orca-T (n = 151)
Median age (range), years		52 (18 – 65)	48 (19-71)
Median follow-up in months (range)		30 (4 – 50)	15 (3-43)
Primary Disease	AML	47%	44%
	ALL	20%	31%
	MDS	33%	15%
	Other	n/a	9%
Male		57%	57%
Donor (HLA matched)	Related	45%	52%
	Unrelated	55%	48%
Cond. Regimen	Busulfan-based	77%	77%
	TBI-based	20%	23%

As of 25 Oct 2022, 151 patients had received Orca-T and had \geq 100 days of follow-up

Overall Orca-T Study Population Outperforms Standard of Care AlloHSCT

Phase 2 trial has reached endpoint of improved GVHD-free relapse-free survival with Orca-T

Single Center Phase 2 Trial (NCT01660607)* Multicenter Phase 1b Trial (NCT04013685)	CIBMTR Control (n = 375)		Orca-T (n = 151)	
	1 year	18 months	1 year	18 months
GVHD and Relapse-Free Survival	21%	19%	70%	65%
Non-relapse mortality	10%	10%	4%	4%
Overall survival	68%	64%	88%	84%



Outcomes with Orca-T appeared to be enhanced further with conditioning regimen consisting of busulfan, fludarabine, and thiotepa (BFT)

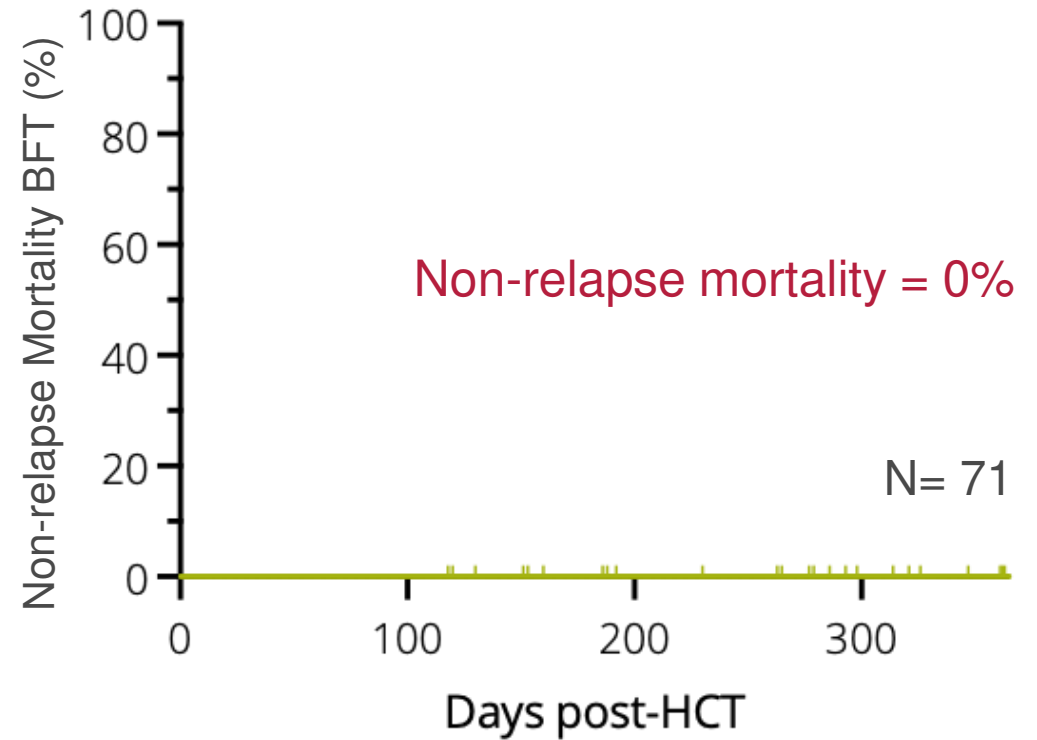
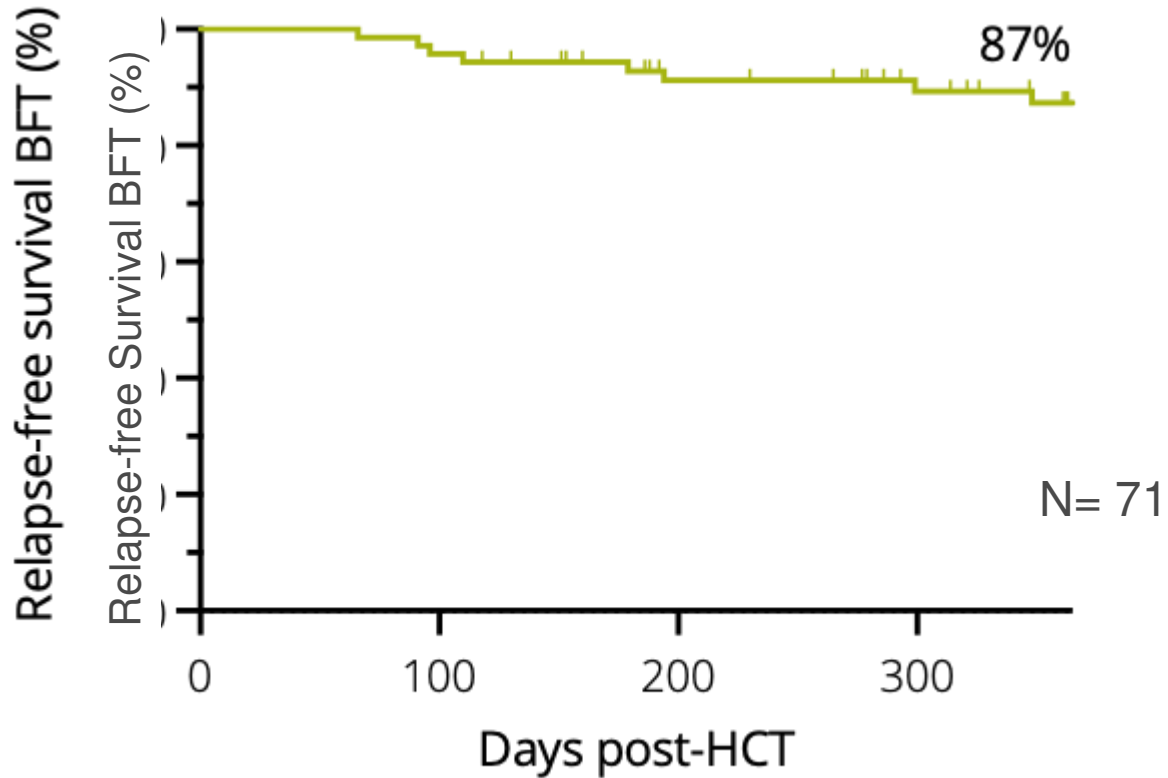
Baseline Characteristics

Single Center Phase 2 Trial (NCT01660607, n=34) Multicenter Phase 1b Trial (NCT04013685, n=117)	Orca-T (Total n=151)	Orca-T + Bu/Flu/Thiotepa (n=71)
Median age (range), years	48 (19-71)	53 (19-71)
Median follow-up in months (range)	15 (3-43)	14 (4-35)
Male, %	57%	55%
Donor (HLA-matched) (%)		
Related	52%	51%
Unrelated	48%	49%
Conditioning regimen (%)		
Busulfan-based	77%	100%
TBI-based	23%	0%

Baseline Characteristics: Indication for Transplant

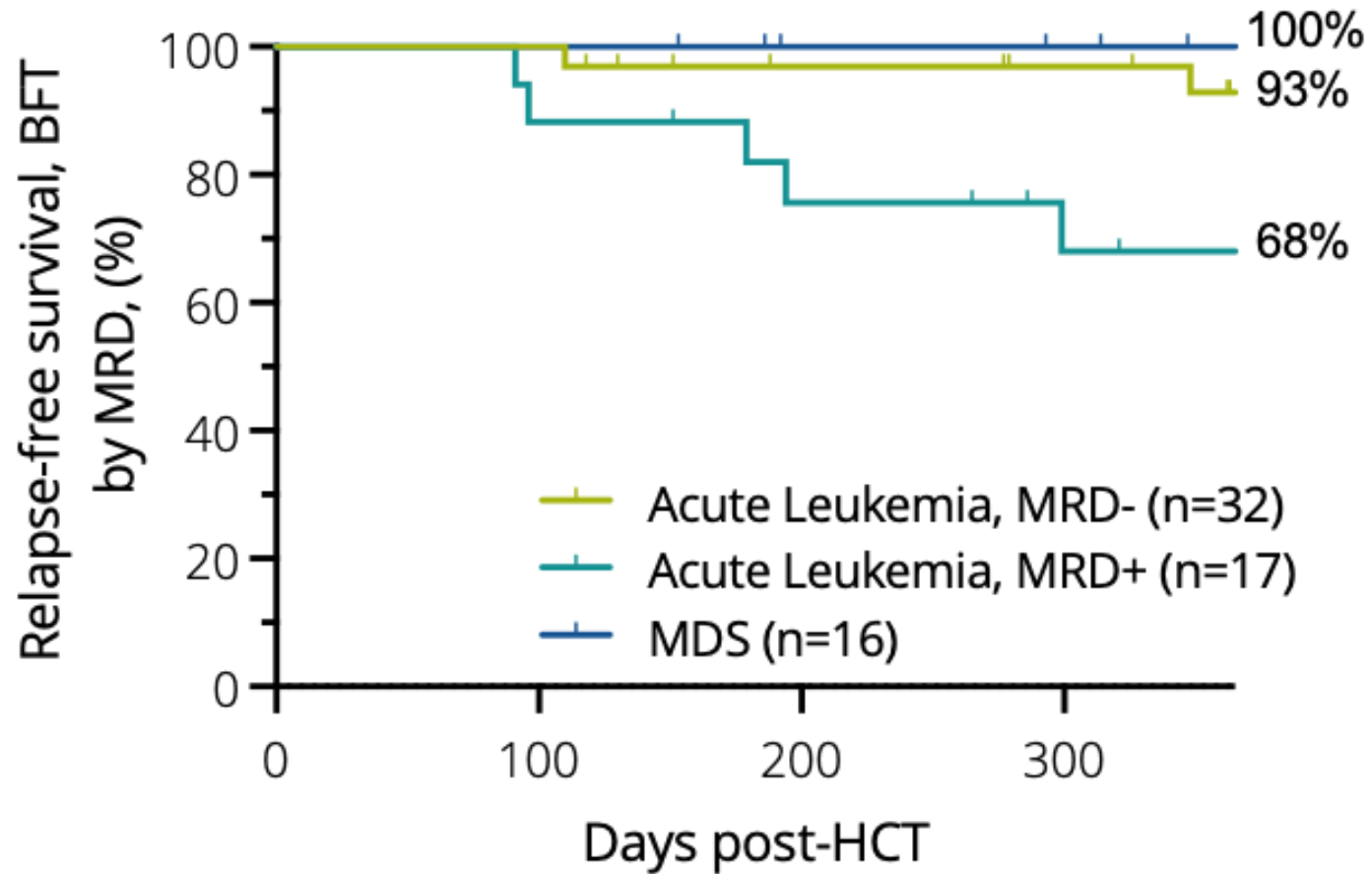
Single Center Phase 2 Trial (NCT01660607, n=34) Multicenter Phase 1b Trial (NCT04013685, n=117)	Orca-T (Total n=151)	Orca-T + Bu/Flu/Thiotepa (n=71)
DISEASE		
AML	44%	59%
ALL	31%	11%
Mixed phenotype acute leukemia	3%	1%
MDS	15%	23%
CML	5%	6%
NHL	1%	0%
MRD STATUS (LEUKEMIA ONLY)		
MRD+	19%	27%
MRD-	54%	42%
Unknown MRD status	27%	31%
Active disease	3%	5%

Relapse Free Survival, Orca-T & BFT Cohort @ 1 Year



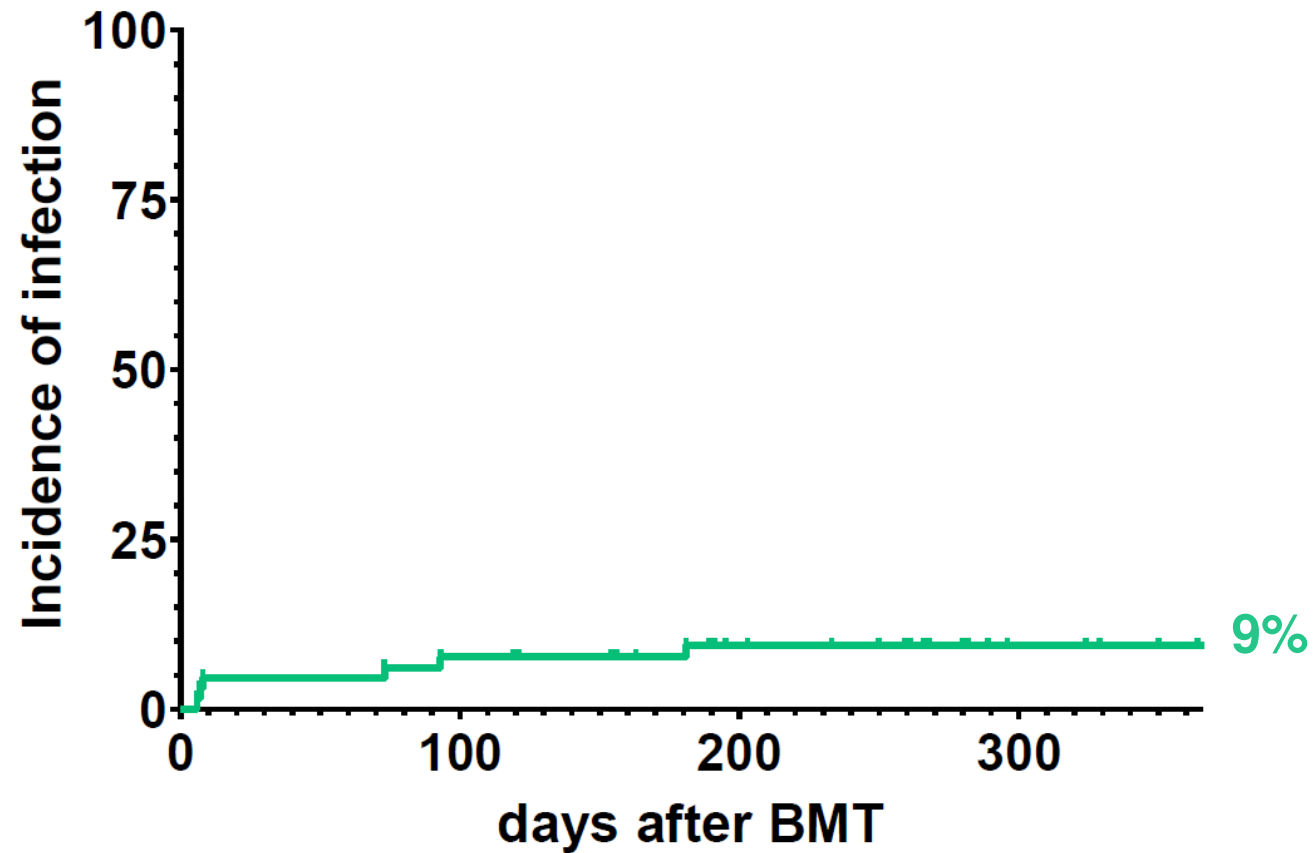
Median follow-up 413 days

Relapse Free Survival by MRD Status @1 Year

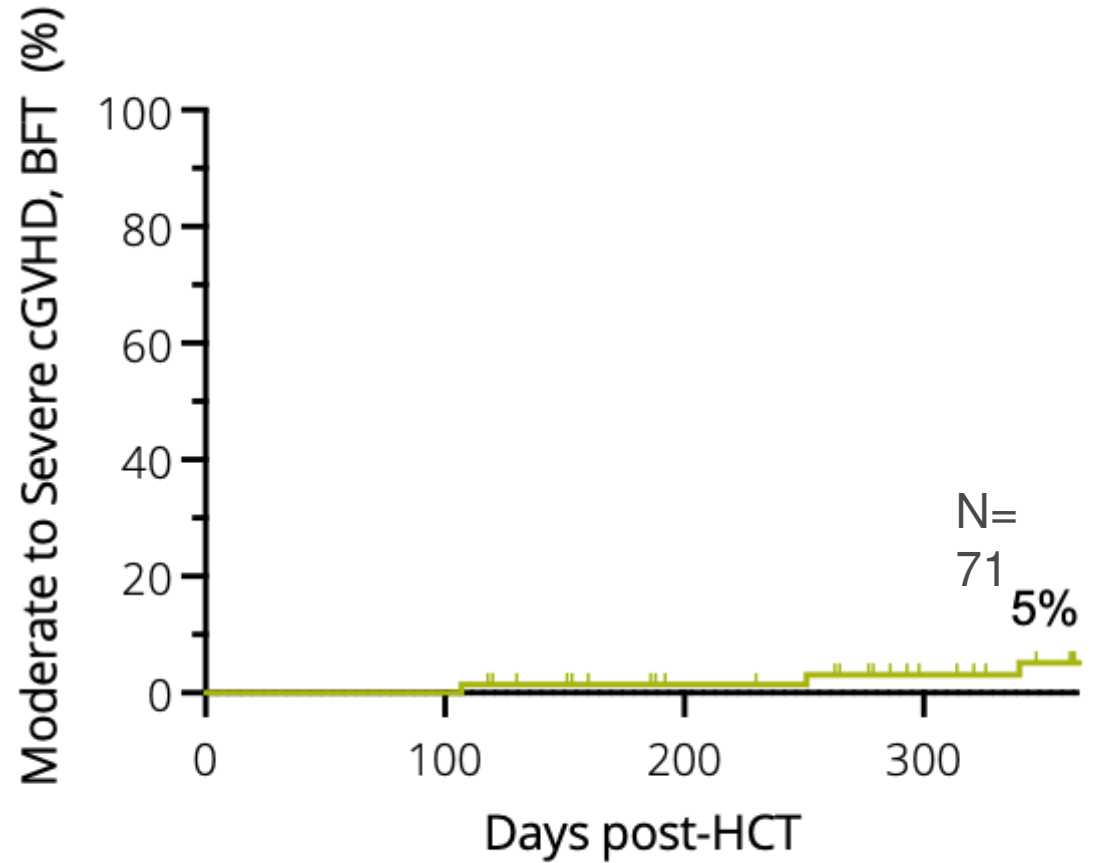
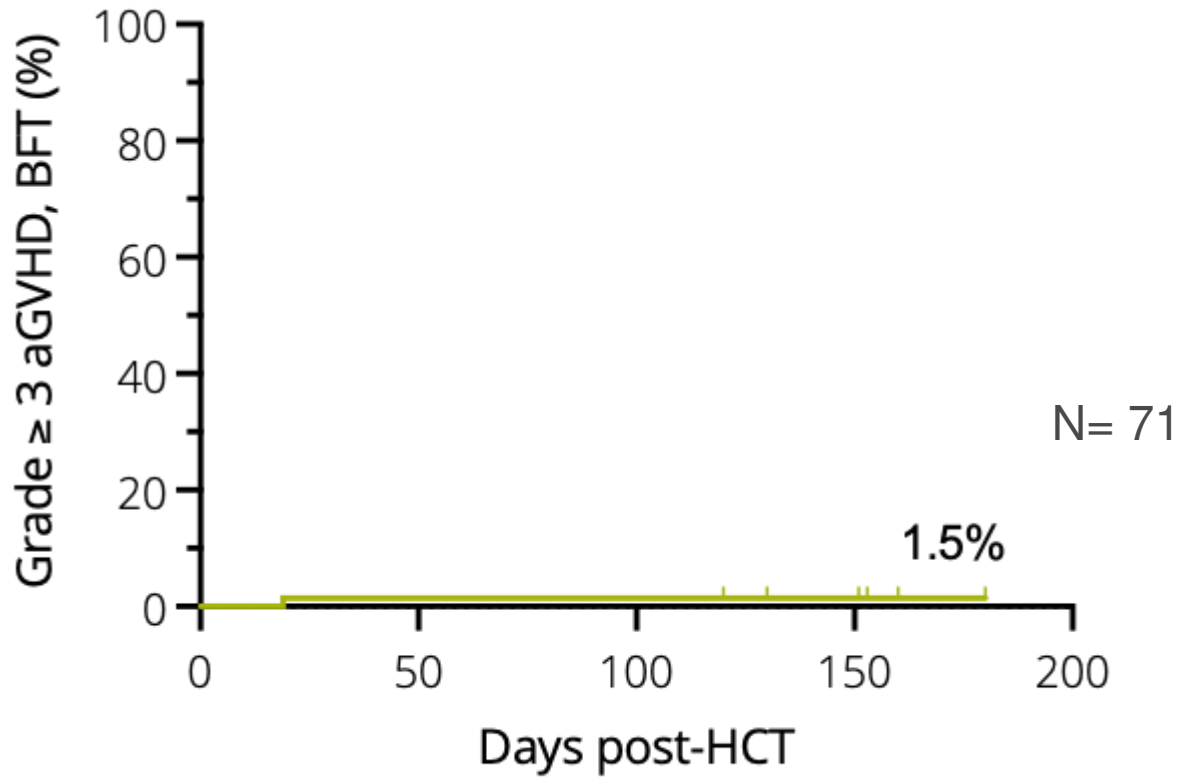


Severe Infection Was Uncommon with Orca-T

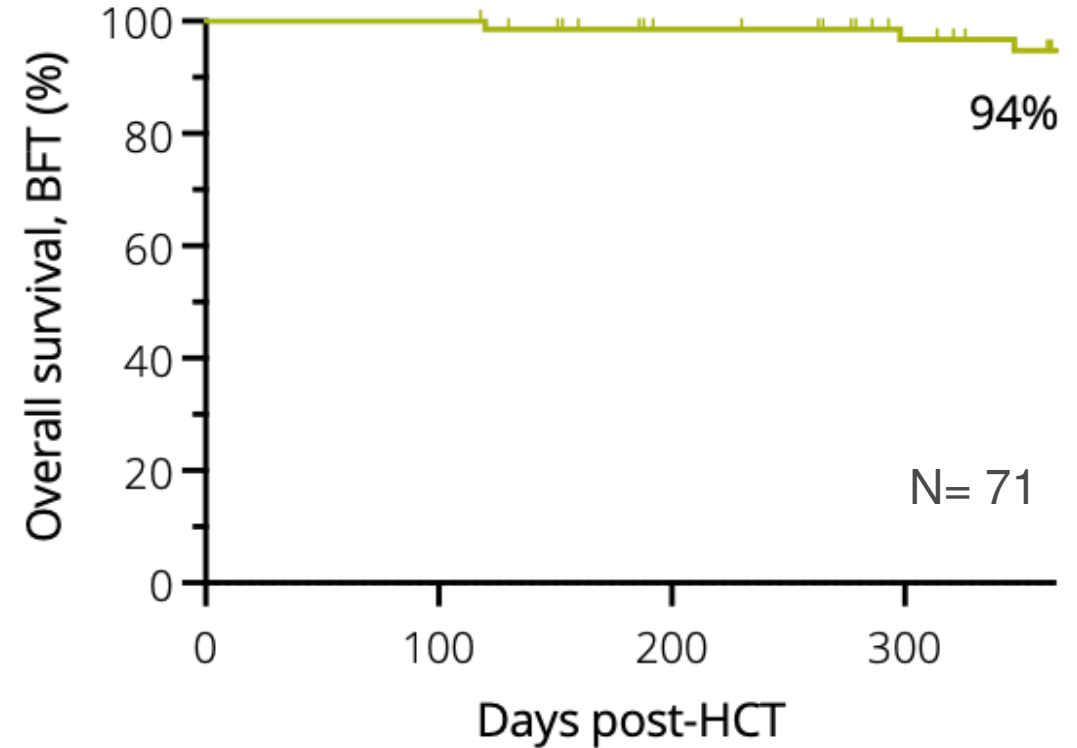
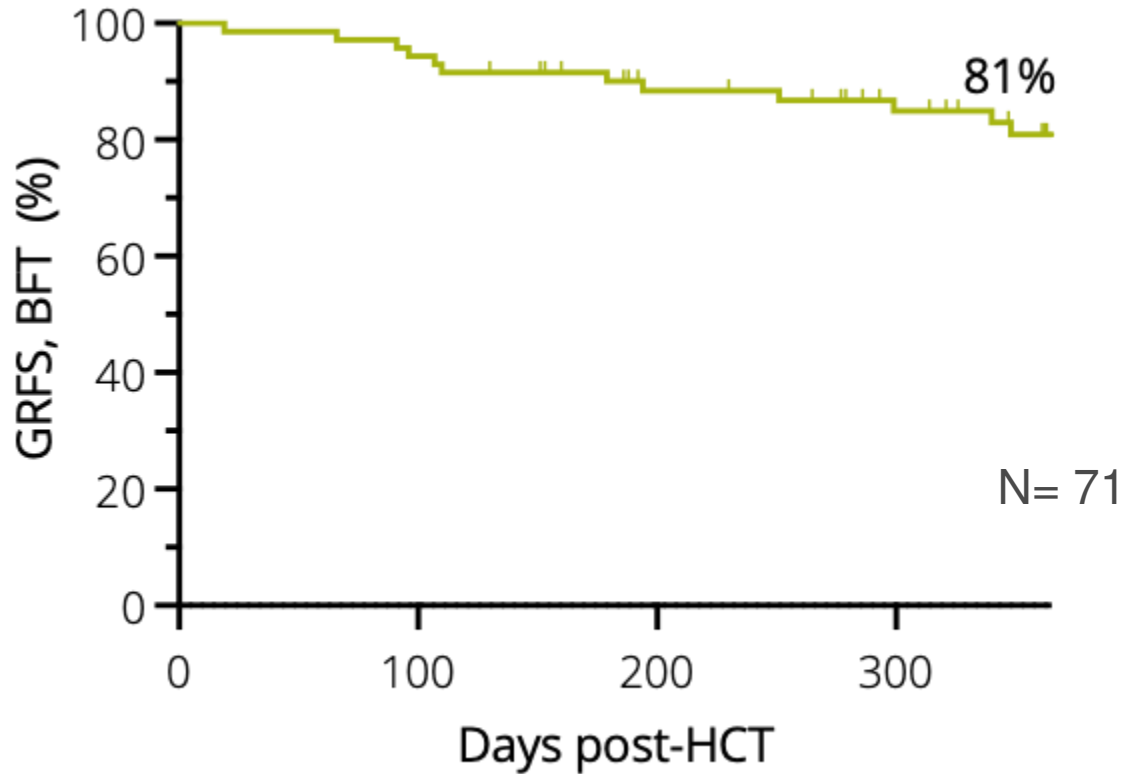
Gr 3+ MOP infections (BFT patients)



Acute and Chronic GVHD Incidence



GVHD and Relapse Free Survival and Overall Survival @1 Year



Phase 3 Randomized Precision-T Study is Currently Enrolling

Orca Precision-T (NCT05316701)

- AML, ALL, MPAL, undifferentiated, in CR or CRi
- Myelodysplastic syndrome (high-risk, therapy-related), including patients with active disease at time of transplant ($\leq 10\%$ BM blast burden)

Planned to undergo MA-alloHSCT including one of the following myeloablative conditioning regimens:

- BFT
- TBI/Etoposide
- TBI/Cy

8/8 matched related or unrelated donor

HCT-CI ≤ 4

KPS ≥ 70

Age 18-65

Adequate organ function

Study arms

Experimental (n = 87)

Orca-T + single-agent Tac PPX

Active comparator (n = 87)

SOC (unmanipulated allograft) + dual-agent Tac/Mtx prophylaxis

Endpoints

Primary Endpoint

Chronic GVHD-free survival

Secondary Endpoint

RFS, GRFS, moderate-severe cGVHD

Summary

- In patients with acute leukemia and high risk MDS, >1-year outcomes with Orca-T, a high-precision cell-therapy, demonstrated:
 - Robust graft-vs-leukemia and graft-vs-infection effects
 - Very low incidence of GvHD
 - Markedly reduced treatment related mortality despite myeloablative conditioning
- These outcomes were accomplished with consistent and reliable cell manufacturing and distribution of Orca-T at a national scale
- A multi-center randomized controlled phase 3 trial comparing Orca-T to SOC, utilizing BFT or TBI-based conditioning, is currently enrolling across the U.S. (NCT05316701)

Participating Centers & Acknowledgements

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University of Kansas

Emory University

Vanderbilt University

University of Utah Health

**Oregon Health Sciences
University**

Medical College of Wisconsin

**TriStar Centennial Medical
Center**

Be The Match Biotherapies