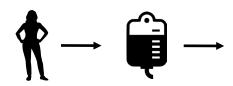




CHALLENGES IN AUTOLOGOUS CELL THERAPY ACCESS

APHERESIS

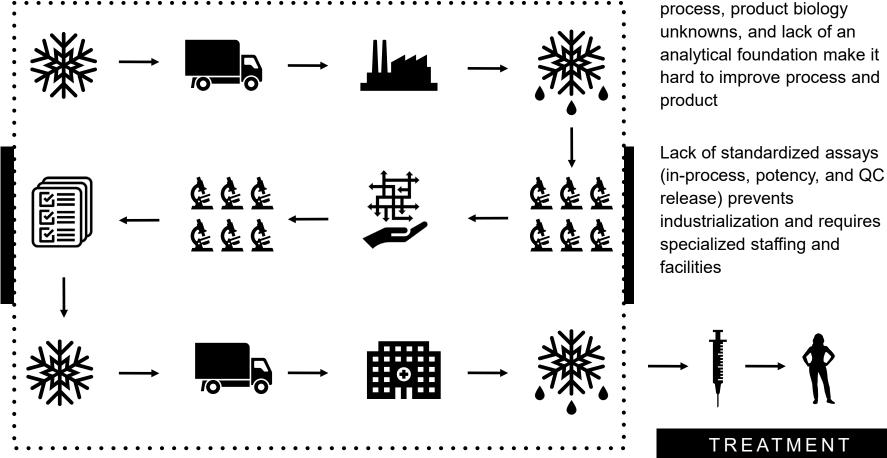
CENTRALIZED AUTOLOGOUS CELL THERAPY PROCESS



Patient material collected at point of care, frozen, and transported across country for manufacture

Cold chain transport, clinical logistics, and QC release of product directly impact quality of patient care

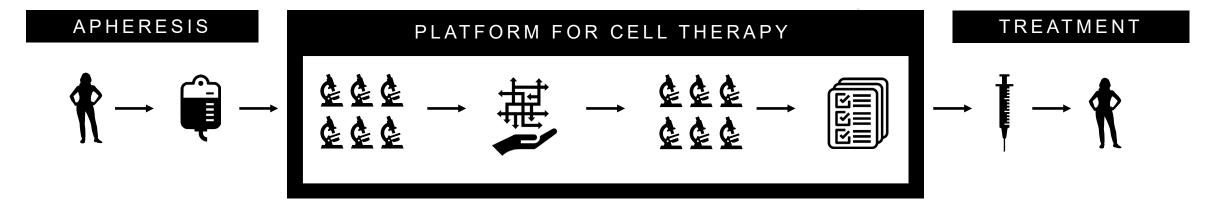
Logistics, labor, and dedicated facility needs drive per-dose costs to >\$100k-400k per dose (e.g., \$373K per Yescarta treatment*)



End-to-end cell manufacturing and QC process can take 30+ days per dose.

Complexity of manufacturing

NEXTGEN DISTRIBUTED END-TO-END SOLUTION FOR AUTOLOGOUS CELL MANUFACTURING



Industrializing cell processing and QC to enable point-of-care manufacturing

We are developing an end-to-end cell manufacturing solution that starts after apheresis and automates all steps in autologous cell therapy manufacturing

Our goal is to set an <u>analytical</u> <u>foundation</u> for process development and optimization by deeply characterizing starting material and final product

We focus on patient safety, cell characterization, and potency with multi-omics for best-in-class product characterization at QC release

We will discover, through development and manufacturing, new CQAs to improve clinical outcomes with shorten learning cycles that drive therapeutic improvements through design

Digitalization



Example of Resilience Digitalization

- High costs & scaling Issues due to existing practices centered around paper-based records in personalized therapies
- Resilience model focuses on using integrated, cloud-based, digital platforms, which:
 - Allows better management of US/DS resources;
 - Reduces manufacturing time-scales and cost and human error; and
 - Provides a common digital foundation toward scaling out to a more distributed model.

RESILIENCE

THANK YOU