

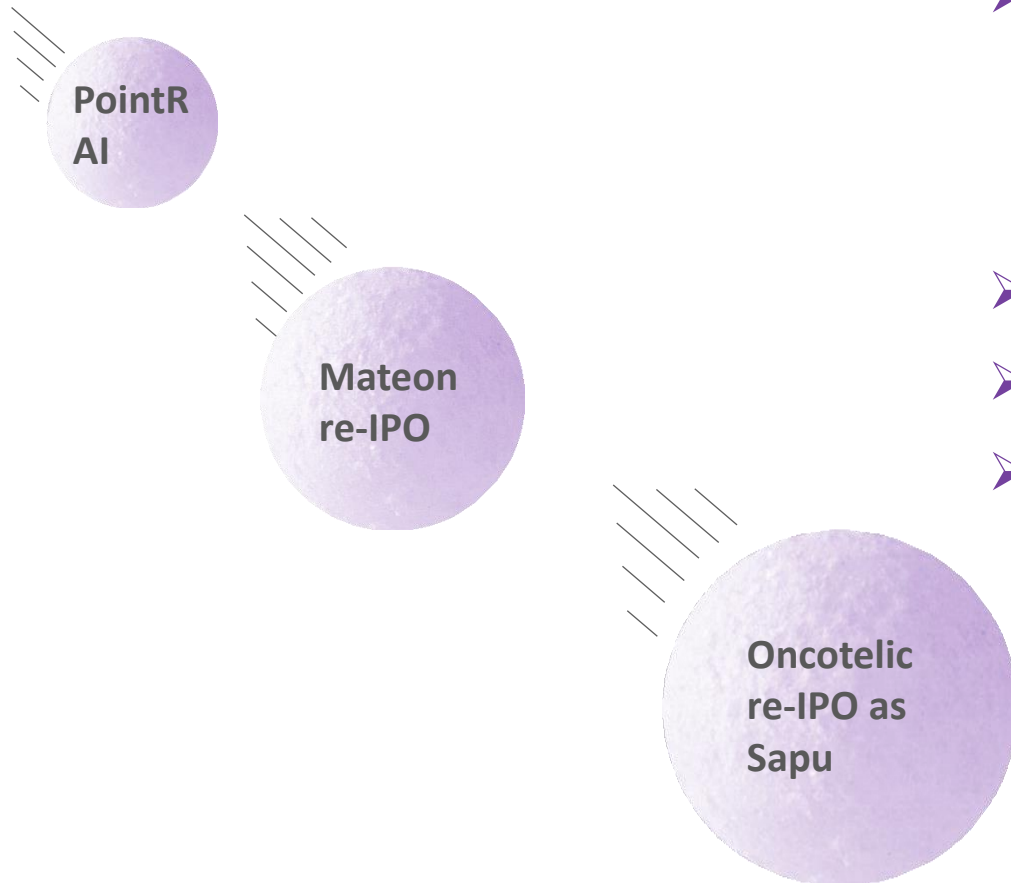


# Transformative Growth Focus

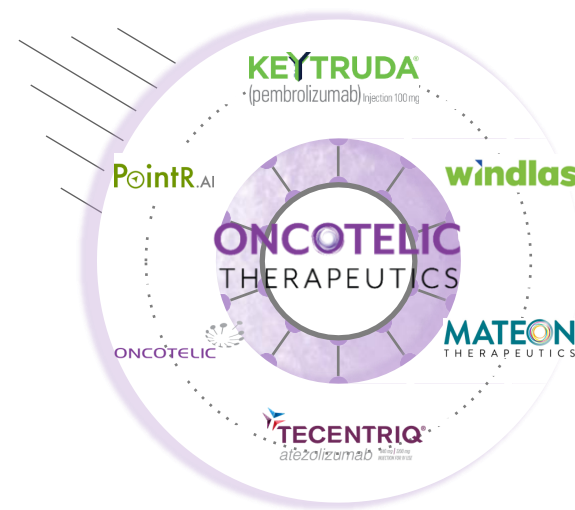
June 2022

[WWW.ONCOTELIC.COM](http://WWW.ONCOTELIC.COM)

# Focus on Transformative Growth

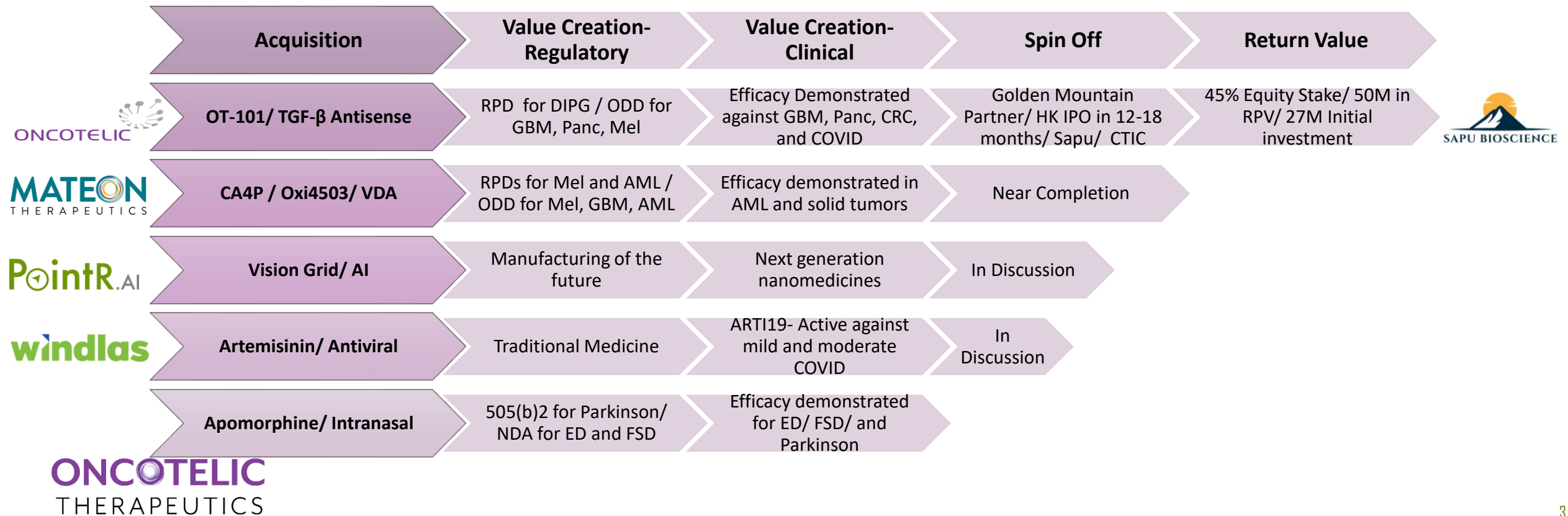


- Building shareholder value through transformative growth
  - Asset acquisition => Asset repositioning for success => Spin off
- Multiple shots on goal
- Equity Holding
- Accelerated Growth



# Building Shareholder Value

- Oncotelic is building value by acquiring asset, strengthening the asset, and spinning off the asset.
- Oncotelic shareholder value increases as our subsidiary/partner companies grow in value
  - OTLC is now the proxy for coming IPO of Sapu in HK
  - 45% ownership / 50M in RPV/ 27M in initial investment



## ➤ Sapu Bioscience IPO



HKEX  
香港交易所

# SEHK Listing Rules / 18A Listings



## Traditional Listings

- Listing applicant must satisfy one of the three financial requirement tests regarding the revenue/profit of the listing applicant



## Chapter 18A Listings

- Listing applicant does not need to satisfy any of the three financial requirement tests



# Chapter 18A key requirements

- ✓ Applicant must be "eligible and suitable" for biotech listing, meaning that:
- ✓ It must have developed at least one core product beyond the concept stage
  - ✓ Core Product: A biotech product that is required by applicable laws to be evaluated and approved by a competent authority based on clinical data before it could be marketed and sold in the market, forming the basis of a Chapter 18A listing application
- ✓ It must have been primarily engaged in R&D for the core product (for a minimum of 12 months prior to listing)
- ✓ The primary reason for the listing must be to raise funds for R&D to bring the core product to commercialisation
- ✓ It must have registered patents, patent applications and IP in relation to its core product
- ✓ It must have a pipeline of the core product
- ✓ It must have previously received "meaningful third party investments" from at least one "Sophisticated Investor" at least six months before the date of proposed listing
- ✓ Anticipated minimum valuation of 200M / Range 1-5B
- ✓ IPO is on track for 2023

# Past Pre-Revenue Biotech IPOs

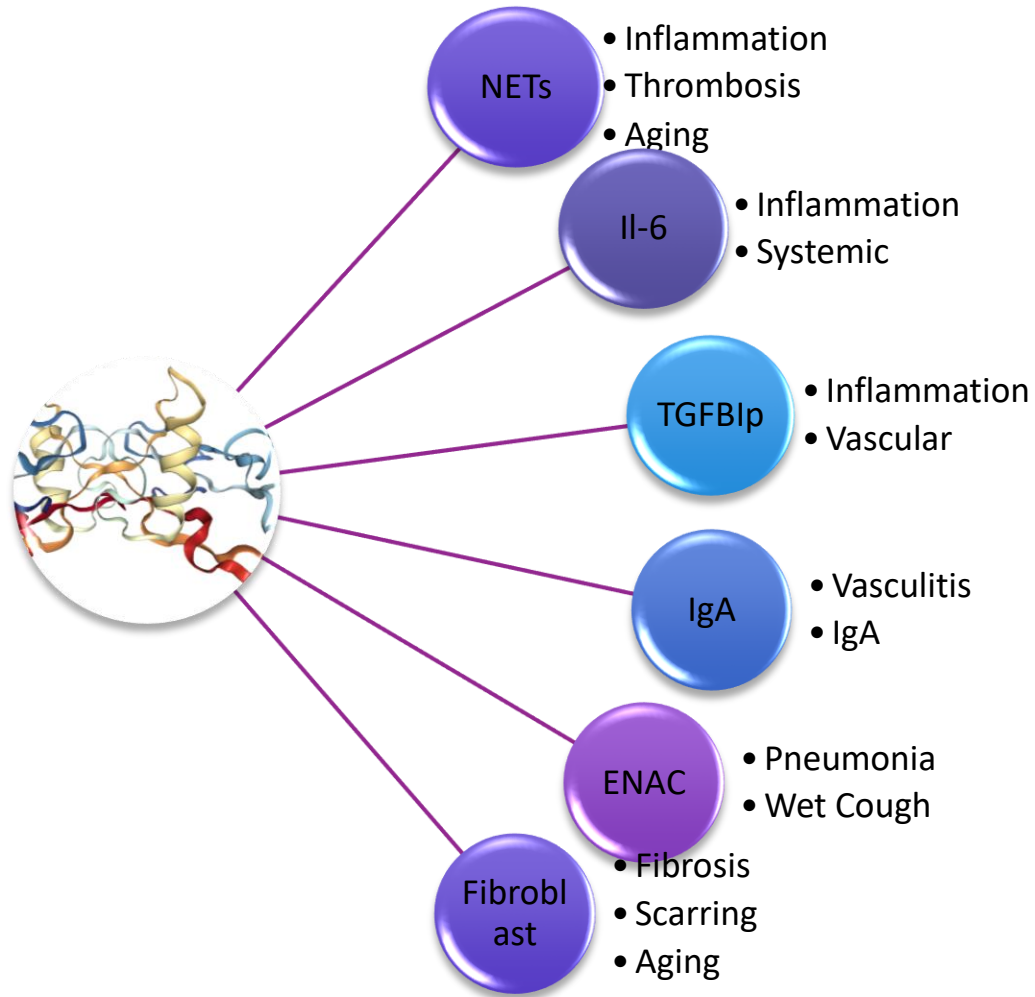
Listing Date	Company	Amount Raised (HK\$)	Therapeutic Area
03/11/2020	JW (Cayman) Therapeutics 药明巨诺 (开曼) (2126)	1,162.5M	Oncology (hematologic cancer)
09/11/2020	RemeGen 荣昌生物制药(9995)	1,595M	Autoimmune Oncology (lung and urothelial) Ophthalmic
20/11/2020	Antengene 德琪医药 (6996)	1,393.5M	Autoimmune Oncology
10/12/2020	HBM 和铂医药 (2142)	684.5M	Autoimmune Oncology
21/12/2020	Jacobio Pharmaceuticals 加科思药业 (1167)	675.4M	Oncology
04/02/2021	MicroPort CardioFlow Medtech 微创心通医疗科技 (2160)	1,254.2M	Valvular heart disease
08/02/2021	Suzhou Basecare Medical 苏州贝康医疗 (2170)	912M	Assisted reproduction
18/02/2021	New Horizon Health 诺辉健康 (6606)	1,900M	Oncology (colorectal cancer)
29/04/2021	Zhaoke Ophthalmology 兆科眼科 (6622)	830M	Ophthalmic
18/06/2021	CARsgen Therapeutics 科济药业 (2171)	1,553.8M	Oncology (hematologic cancer)

## ➤ Treatments for Aging and Age-related Diseases



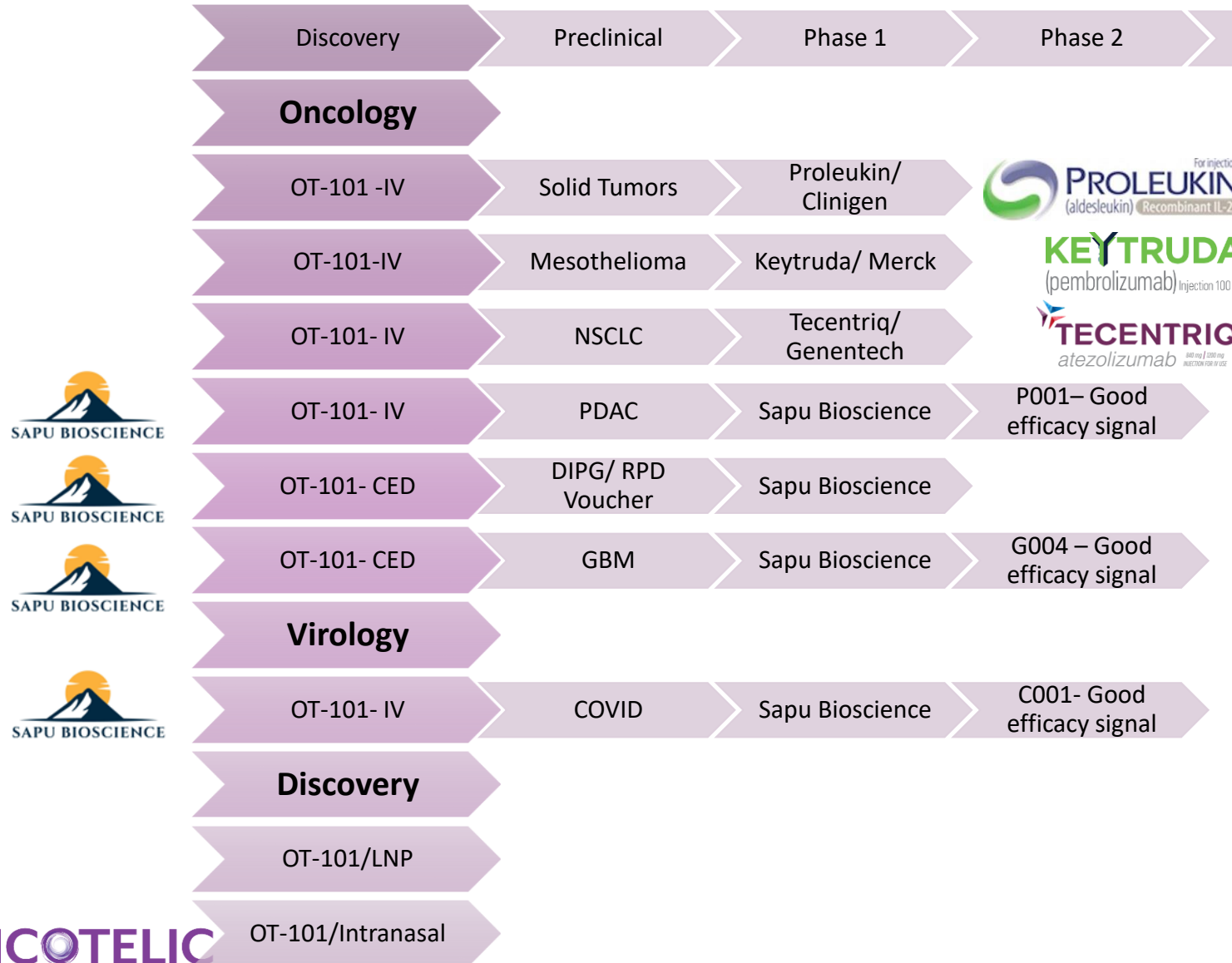


# Sapu Bioscience TGF- $\beta$ Platform



- Sapu has IP coverage for TGF- $\beta$  antisense (OT-101) as platform technology for treatment of cancers, viral diseases, and aging.
- OT-101 is active singly or in combination with other agents
  - TGF- $\beta$  recruits neutrophils into the site of inflammation laying down neutrophil extracellular traps (NET's) responsible for capillaritis, fibrin deposition, mucositis in COVID-19 [Barnes BJ et al. J Exp Med. 2020;217(6):e20200652.].
  - TGF- $\beta$  inhibits ENaC and causes fluid accumulation in the lung and ARDS/pneumonia. [Pittet JF et al. J Clin Invest. 2001;107(12):1537-1544.].
  - TGF- $\beta$  induces late stage fibrosis compromising lung capacity even after recovery [Wang L et al. Int J Clin Exp Pathol. 2019;12(7):2604-2612. Published 2019 Jul 1].
  - TGF- $\beta$  induces IL-6 leading to systemic inflammation and "cytokine storm". [Turner M et al. Cytokine. 1990;2(3):211-216.].
  - TGF- $\beta$  induces TGF $\beta$ 1p leading to vascular inflammation. Park et al. found that TGF $\beta$ 1p and its derivative TGF $\beta$ 1p K676Ac, acetylated 676th lysine TGF $\beta$ 1p, are elevated in the blood of SARS-CoV-2 pneumonia patients (n=113); especially in intensive care unit (ICU) patients than non-ICU patients [Park HH et al. Sci. Adv. 2020; DOI: 10.1126/sciadv.abc1564.].
  - TGF- $\beta$  induces IgA class switching leading to IgA vasculitis/ Kawasaki Disease syndrome. A significant positive association was found between SARS-CoV-2 specific IgA level and the APACHE II score in critically ill patients with COVID 19 (r=0.72, P=0.01) [Yu HQ et al. Eur Respir J. 2020;2001526.].

# Sapu Bioscience Pipeline



- Immunotherapy is transforming oncology especially for those who are tumor mutational burden-high (TMB-H) [ $\geq 10$  mutations/megabase (mut/Mb)]- especially in Mismatch Repair-Deficient tumors. [PD-1 Blockade in Mismatch Repair-Deficient, Locally Advanced Rectal Cancer. A. Cercek].
- Cancers evade innate immunity by expressing high level of TGF- $\beta$
- OT-101- a TGF- $\beta$  antisense- restore innate immunity and allow immunotherapy to be effective.
- At Sapu, OT-101 is being combined with most known immunotherapies including Keytruda/ Merck and Tecentriq/Genentech and Proleukin/Clinigen. MPM and NSCLC are shown here. Others are in various stages of initiation
- Additional programs are being added including the anti-aging program

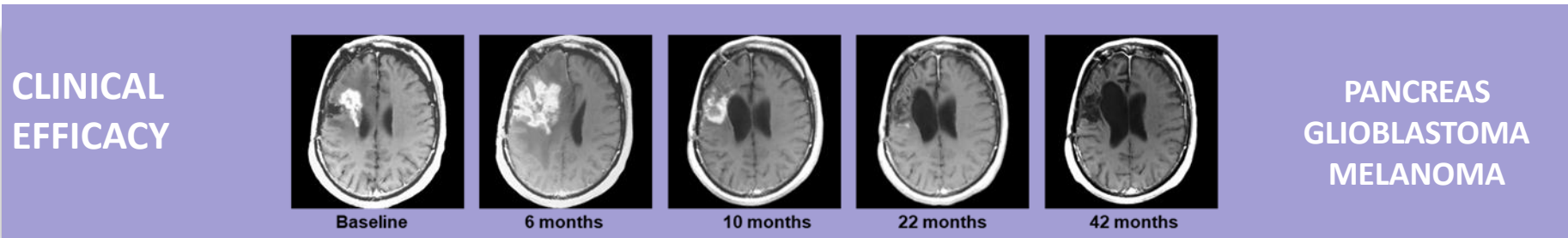


# Targeted Revenue > 1B

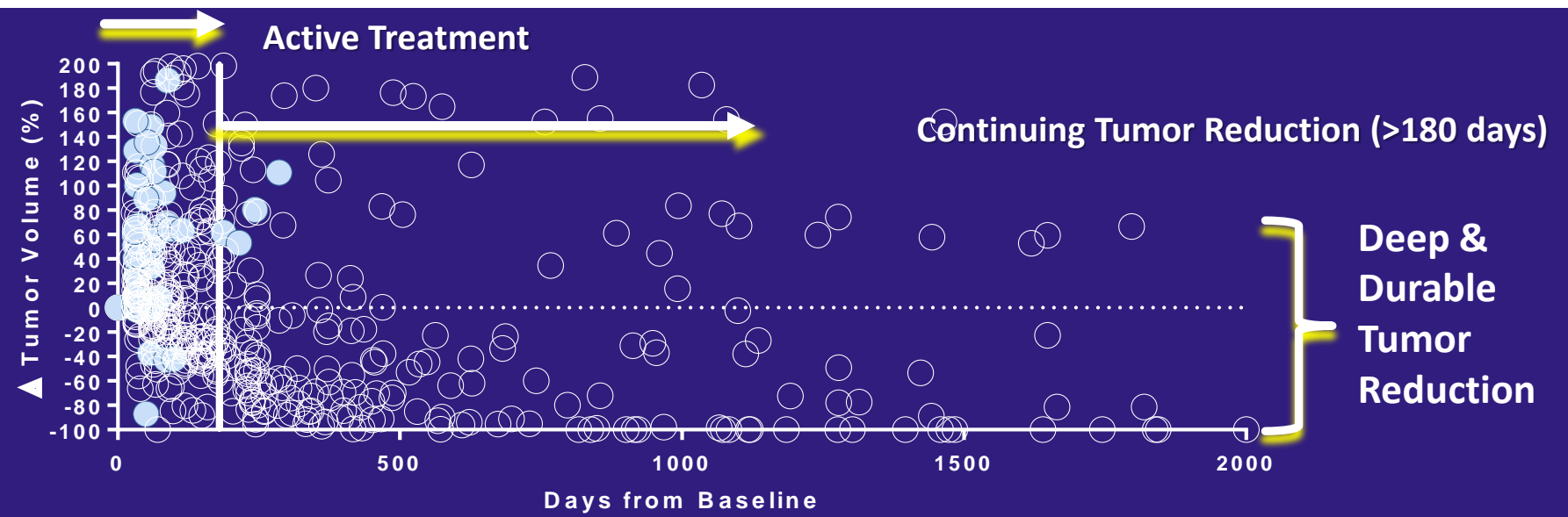
- Of the top 7 cancer drugs- Keytruda, Opdivo, and Tecentriq belong to the checkpoint inhibitor class. By potentiating these drugs, OT-101 is expected to match their revenue

Drug	Company	FDA Approval	Indication	2021 Sales
Keytruda	Merck	2014	melanoma, NSCLC, HNSCC, classical HL, primary mediastinal large B-cell lymphoma, urothelial carcinoma, CRC, gastric cancer, esophageal cancer, cervical cancer, hepatocellular carcinoma, Merkel cell carcinoma, renal cell carcinoma, endometrial carcinoma, tumor mutational burden-high (TMB-H) cancer, cutaneous squamous cell carcinoma, and TNBC.	US\$ 17.18 Billion
Revlimid	Bristol Myers Squibb	2005	Multiple myeloma, Follicular Lymphoma, myelodysplastic syndromes, mantle cell lymphoma, marginal zonal lymphoma	US\$ 12.8 Billion
Opdivo	Bristol Myers Squibb	2014	NSCLC, malignant pleural mesothelioma, renal cell carcinoma, classical Hodgkin lymphoma, HNSCC, urothelial carcinoma, CRC, hepatocellular carcinoma, esophageal cancer, gastric cancer, and gastroesophageal junction cancer.	US\$ 7.52 Billion
Imbruvica	AbbVie	2015	Mantle Cell Lymphoma; Chronic Lymphocytic Leukemia; Waldenström's Macroglobulinemia; Small Lymphocytic Lymphoma; Marginal Zone Lymphoma	US\$ 5.4 Billion
Ibrance	Pfizer	2015	Breast Cancer	US\$ 5.43 Billion
Perjeta	Genentech	2012	Breast Cancer	US\$ 4.28 Billion
Tecentriq	Genentech	2016	Bladder Cancer, NSCLC, Breast Cancer, Small Cell Lung Cancer, Hepatocellular Carcinoma, Melanoma	US\$ 3.58 Billion

# Clinical Efficacy and Safety In Oncology



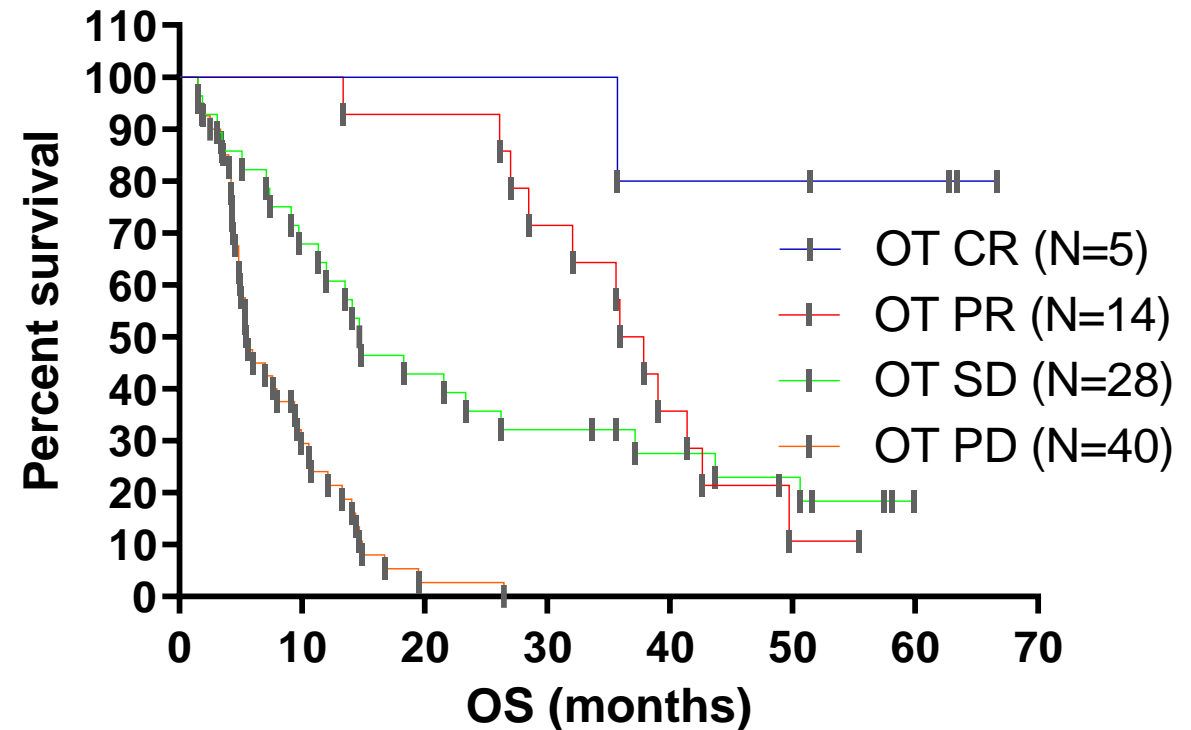
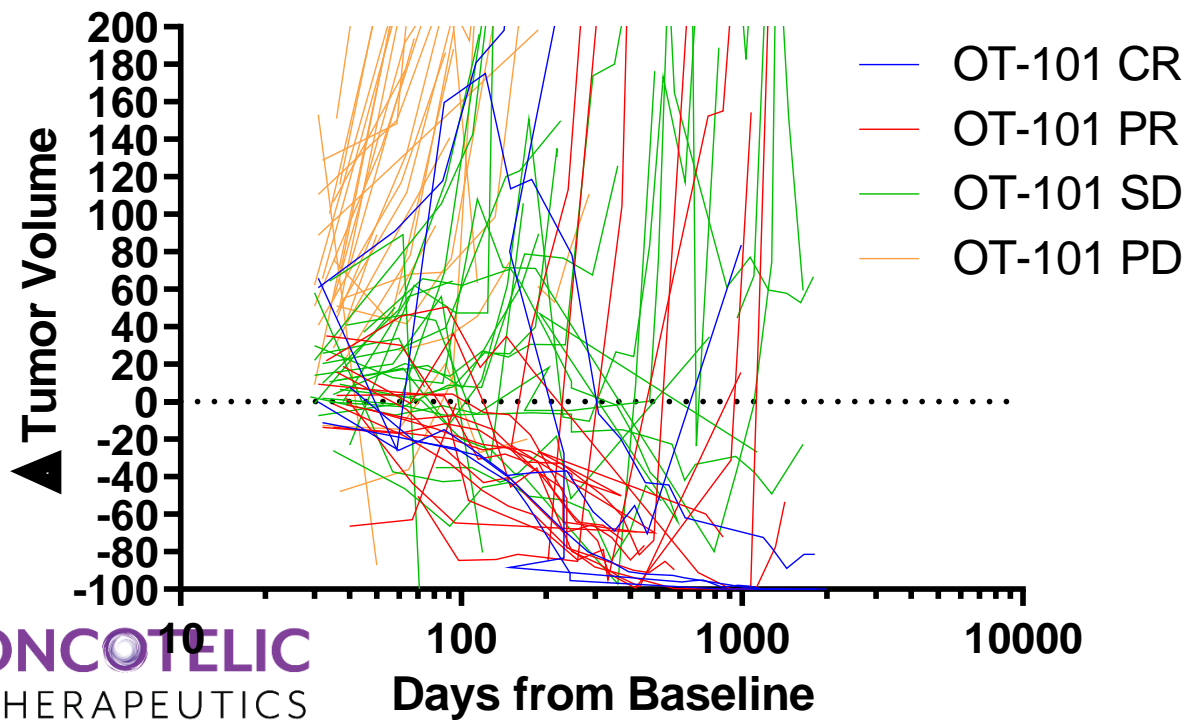
- TGF- $\beta$  Antisense platform for solid tumors deep and durable tumor control
- Efficacy and Safety demonstrated in >200 pts across more than 6 company sponsored trials



# Clinical Efficacy: Glioblastoma

Treatment failure patients (recalcitrant to radiation, surgery, and chemo)

- Objective responses were observed among the 87 evaluable patients treated with OT-101:
- Best Objective Responses were: 5 CR (5.9%), 14 PR (16.5%), 28 SD (31.8%), and 40 PD (45.9%)
- Confirmed Best Objective Responses were: 4 CR (4.7%), 12 PR (12.9%), 31 SD (36.5%), and 40 PD (45.9%)
- Best Objective Responses were confirmed with deeper tumor reduction.
- Best Objective Responses were confirmed with improved OS: CR: >66mos, PR: 36.9 mos, SD: 14.7 mos, and PD: 5.5mos.



# Clinical Efficacy: Pancreatic Cancer

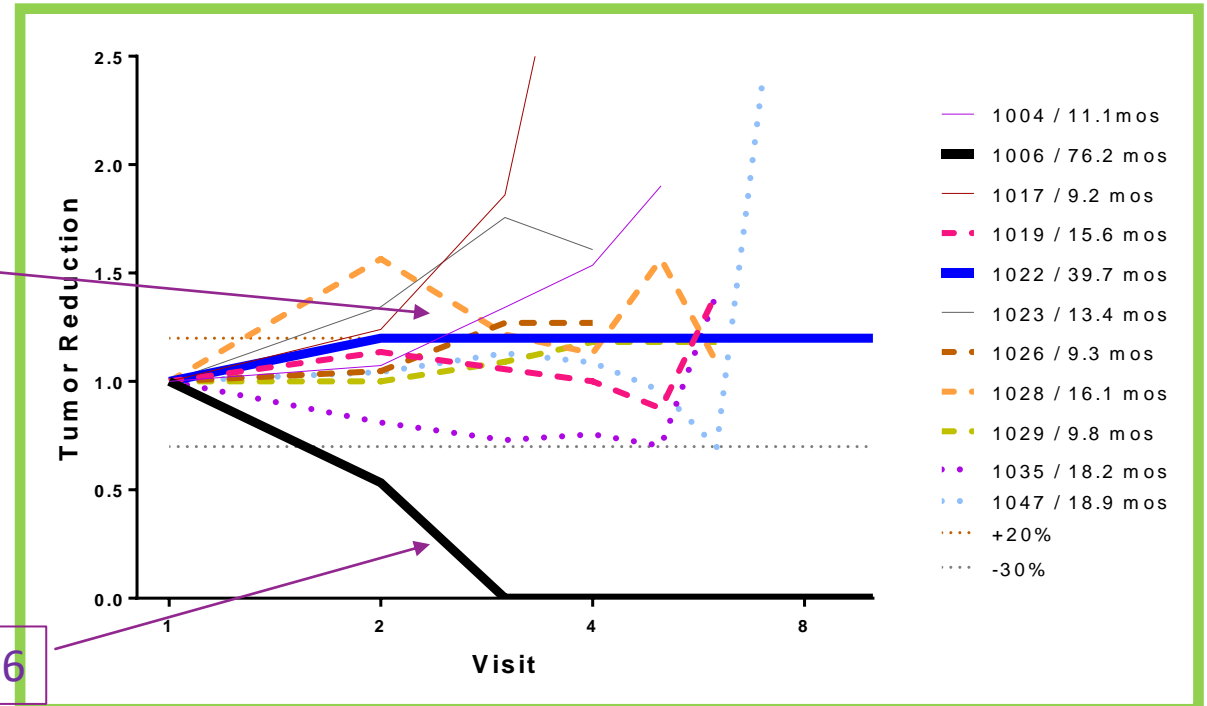
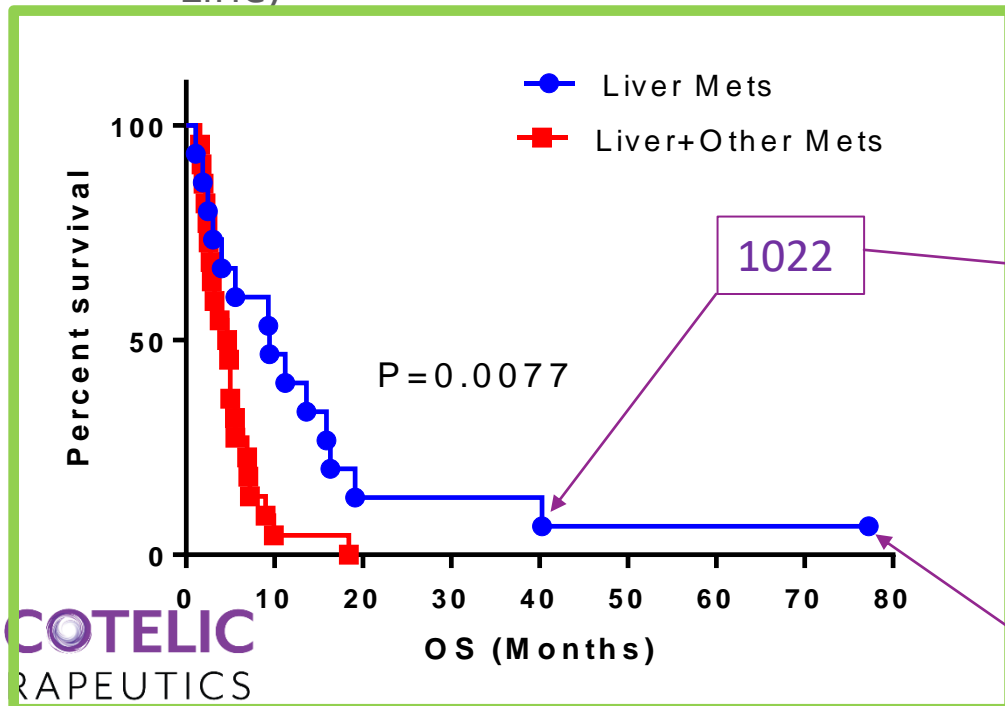
Phase 2- treatment failure pts/ recalcitrant to Whipple and chemo

- **Patient 1006: CR as far out as 77 mos**

- Surgery: Whipple's procedure
- 1<sup>st</sup> line: 5-FU/LV, Dose 425 mg/m<sup>2</sup>
- 2<sup>nd</sup> line: 5-FU/LV, Dose 2600 mg/m<sup>2</sup>/24hr
- 3<sup>rd</sup> line: Gemcitabine, Dose 1000 mg/m<sup>2</sup>/week
- OT-101- Liver mets/ Complete Response (Black Line)

- **Patient 1022: OS of 40 months**

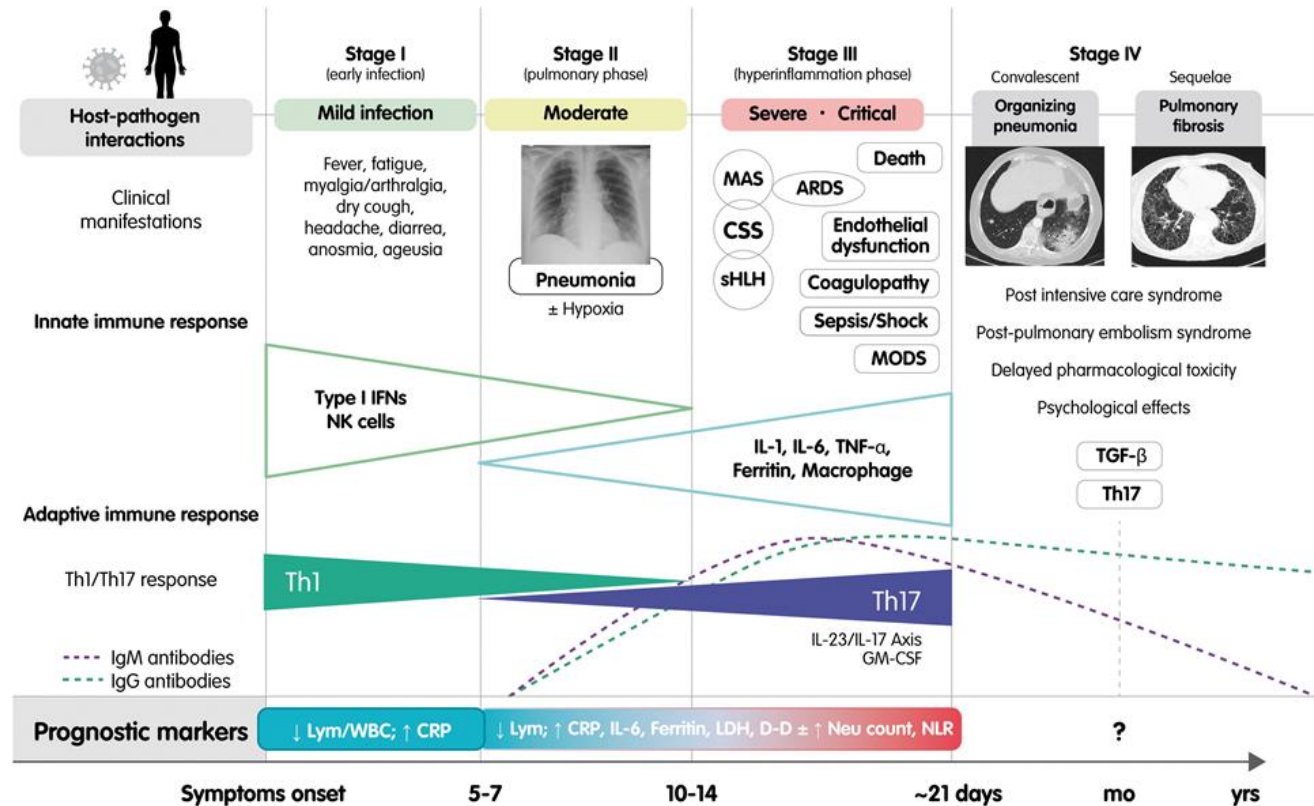
- Surgery: Whipple's procedure
- 1<sup>st</sup> line: Radiation therapy (50 Gy)
- 2<sup>nd</sup> line: 5FU
- OT-101- Liver Mets/ Stable Disease (Blue Line)





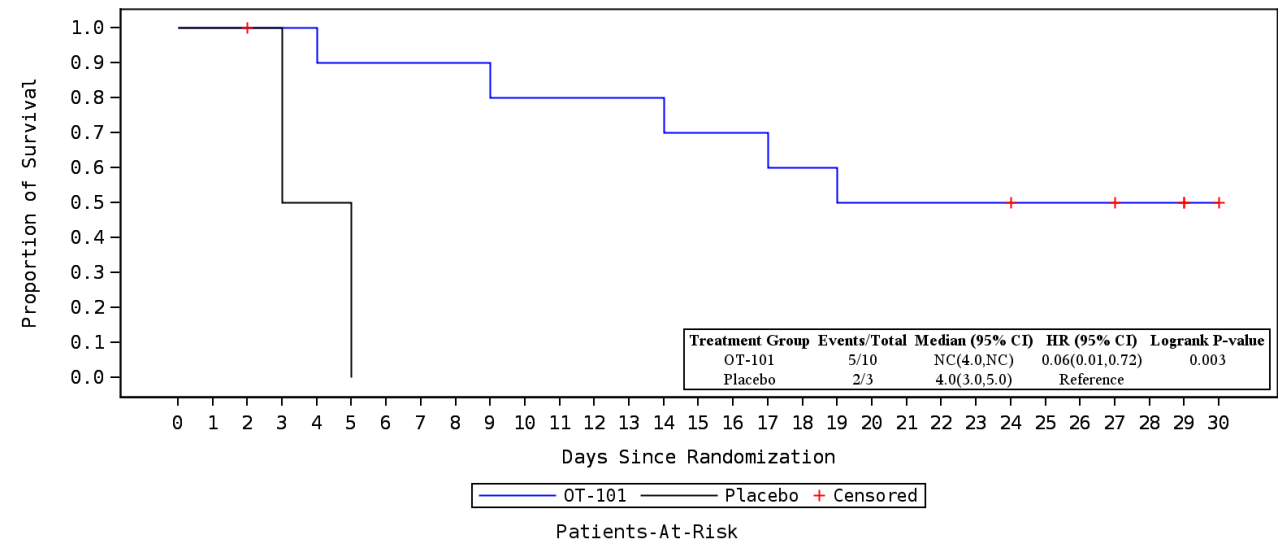
# Clinical Efficacy: COVID

- Large surge in TGF-beta during active COVID infection
- An established role of TGF-beta in scarring and late stage post-COVID symptoms
- Strong in vitro activity against SARS-COV-2 on Vero cells
- Positive outcome for OT-101 in phase 2 clinical trial against COVID



# Efficacy – Improved Survival

- OT-101 is well tolerated in COVID-19 pts with no observed aggravation of cytokine storm ie. increase in IL-6 or CRP.
- OT-101 treatment was effective in reducing the viral load of all treated patients. Viral load reduction greater than 96% on Day 7 occurred in 17 of 19 patients (89%) for OT-101 group versus 6 of 9 patients (67%) for placebo group.
- Day 7 mortality rate of 4.5% for OT-101 vs 20% for placebo for entire population in the study.
- In high- risk patients (PaO2 equal or less than 76 mmHg and age above 35 years), overall mortality was 50% in OT-101 group (5 of 10) vs 66% in placebo group (2 of 3) and median overall survival increased from 4 days for Placebo (N=3) to greater than 30 days for OT-101 (N=10, p=0.003).



	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
OT-101	10	10	10	10	10	9	9	9	9	9	8	8	8	8	8	7	7	7	6	6	5	5	5	5	5	5	4	4	4	3	3	1
Placebo	3	3	3	2	1	1																										



# Clinical Team

- **Fatih Uckun MD PhD (CMO):** Dr. Uckun is an elected Member of the American Society for Clinical Investigation (ASCI), an honor society for physician-scientists. He received numerous awards including the Stohlman Memorial Award of the Leukemia Society of America, the highest honor given to a Leukemia Society Scholar. Dr. Uckun has more than thirty years of professional experience in developmental therapeutics with a special emphasis on targeted therapeutics/precision medicines and biopharmaceuticals. He has published more than 500 peer-reviewed papers.
- **Seymour Fein MD (CRO):** 35-years in drug development. Involved in FDA approvals for over 20 drugs and devices. Dr. Fein began his career at Hoffmann-La Roche Ltd. as a senior research physician and was responsible for a clinical development program that led to U.S. Food and Drug Administration (FDA) approval of recombinant interferon-alpha for cancer treatment. Dr. Fein was also the medical director of Bayer Healthcare Pharmaceuticals (U.S.) where he was responsible for therapeutic areas including gastroenterology, oncology, and cardiology.
- **Anthony Maida PhD (CCO):** Dr. Maida serves or has served on the advisory board of EndPoint BioCapital, Sdn Bhd (Kuala Lumpur, Malaysia), and as an advisor, consultant Toucan Capital, North Sound Capital, The Bonnie J. Addario Lung Cancer Foundation and Pediatric BioScience, Inc. Dr. Maida sat as a board member and Audit Chair of Vitality BioPharma, Inc. (NASDAQ:VBIO), Inc., Innovate Pharma (NASDAQ:INNT), OncosSec Medical, Spectrum Pharmaceuticals, Inc. (NASDAQ:SPPI) for 14 years, Sirion Therapeutics, Inc., and GlycoMetrix, Inc.

# Thank You

Dr. Vuong Trieu

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