



American Society of Hematology

Helping hematologists conquer blood diseases worldwide

NTLA-5001, a T Cell Product Candidate with CRISPR-Based Targeted Insertion of a High-Avidity, Natural, WT1-Specific TCR, Shows Efficacy in *In Vivo* Models of AML and ALL

Ruggiero E.¹, Liu D.², Prodeus A.², Becker A.², Foisey M.², Balwani I.², Dutta I.², Zhang, Q.², Arredouani M.S.², McKee M.³, Ciceri F.^{4,5}, Sepp-Lorenzino L.⁶, Bonini C.^{1,7}, Schultes B.C.²

¹ Experimental Hematology Unit, Division of Immunology, Transplantation and Infectious Diseases, San Raffaele Scientific Institute, Milan, Italy;

² Cell Therapy, ³ Clinical Development, ⁶ Research, Intellia Therapeutics, Cambridge, MA;

⁴ Hematology and Bone Marrow Transplantation Unit; ⁵ Pathology Unit, San Raffaele Scientific Institute, Milan, Italy;

⁷ Vita-Salute San Raffaele University, Milan, Italy

Conflict of Interest Disclosure and Legal Disclaimer

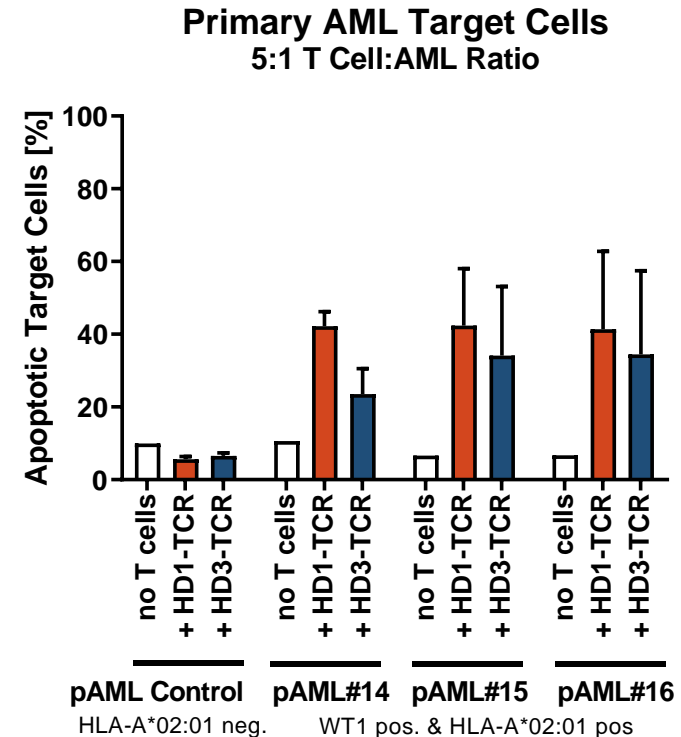
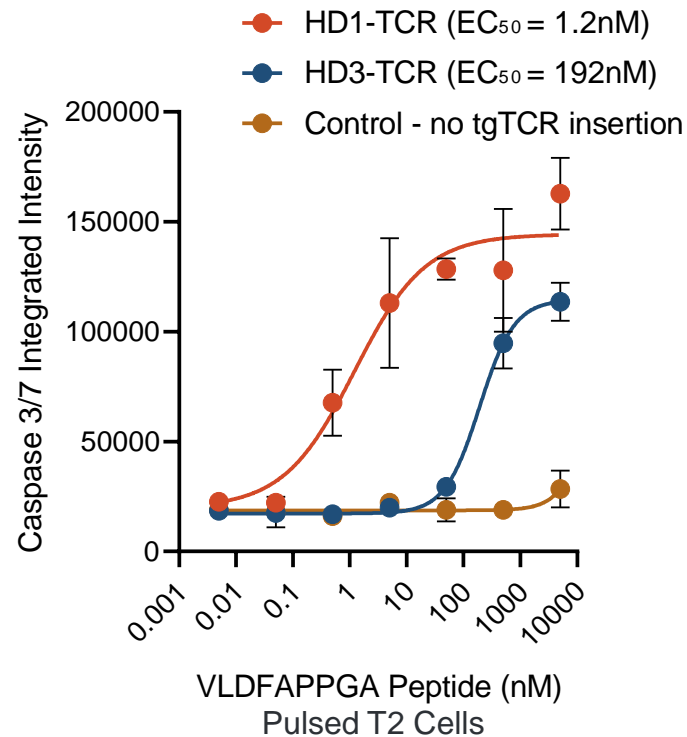
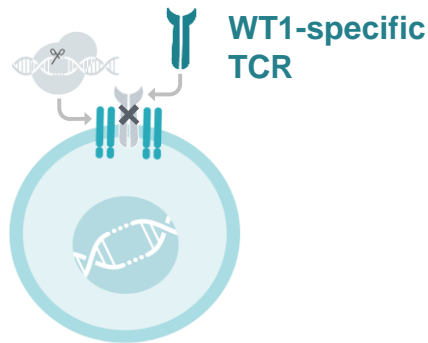
- D. Liu, A. Prodeus, A. Becker, M. Foisey, I. Balwani, I. Dutta, Q. Zhang, M.S. Arredouani, M. McKee, L. Sepp-Lorenzino, and B.C. Schultes are employees of Intellia Therapeutics, Inc.
- F. Ciceri and C. Bonini are consultants for Intellia Therapeutics, Inc.
- C. Bonini received research funding from Intellia Therapeutics, Inc.

This presentation contains “forward-looking statements” of Intellia Therapeutics, Inc. (“Intellia”, “we” or “our”) within the meaning of the Private Securities Litigation Reform Act of 1995. These forward-looking statements include, but are not limited to, express or implied statements regarding Intellia’s beliefs and expectations regarding its: plans to submit an investigational new drug (“IND”) application or similar clinical trial application for NTLA-5001, its first T cell receptor (“TCR”)-directed engineered cell therapy development candidate for its acute myeloid leukemia (“AML”) program in the first half of 2021; plans to advance and complete preclinical studies and other animal studies supporting other in vivo and ex vivo programs, including its AML program; development of a modular platform to advance its complex genome editing capabilities, such as gene insertion; further development of its proprietary cell engineering process for multiple sequential editing; presentation of additional data at upcoming scientific conferences, and other preclinical data in 2020; advancement and expansion of its CRISPR/Cas9 technology to develop human therapeutic products, as well as its ability to maintain and expand its related intellectual property portfolio; ability to demonstrate its platform’s modularity and replicate or apply results achieved in preclinical studies, including those in its AML program, in any future studies, including human clinical trials; ability to develop other in vivo or ex vivo cell therapeutics of all types, and those targeting WT1 in AML in particular, using CRISPR/Cas9 technology; and statements regarding the timing of regulatory filings and clinical trial execution, including dosing of patients, regarding its development programs; and the potential commercial opportunities, including value and market, for our product candidates.

Any forward-looking statements in this presentation are based on management’s current expectations and beliefs of future events, and are subject to a number of risks and uncertainties that could cause actual results to differ materially and adversely from those set forth in or implied by such forward-looking statements. These risks and uncertainties include, but are not limited to: risks related to Intellia’s ability to protect and maintain its intellectual property position; risks related to Intellia’s relationship with third parties, including its licensors and licensees; risks related to the ability of its licensors to protect and maintain their intellectual property position; uncertainties related to regulatory agencies’ evaluation of regulatory filings and other information related to its product candidates; uncertainties related to the authorization, initiation and conduct of studies and other development requirements for its product candidates; the risk that any one or more of Intellia’s product candidates, including those that are co-developed, will not be successfully developed and commercialized; the risk that the results of preclinical studies or clinical studies will not be predictive of future results in connection with future studies; and the risk that Intellia’s collaborations with Novartis or Regeneron or its other ex vivo collaborations will not continue or will not be successful. For a discussion of these and other risks and uncertainties, and other important factors, any of which could cause Intellia’s actual results to differ from those contained in the forward-looking statements, see the section entitled “Risk Factors” in Intellia’s most recent annual report on Form 10-K as well as discussions of potential risks, uncertainties, and other important factors in Intellia’s other filings with the Securities and Exchange Commission (“SEC”). All information in this presentation is as of the date of the presentation, and Intellia undertakes no duty to update this information unless required by law.

NTLA-5001: Engineered T Cell Product Candidate with Site-Specific Insertion of a High-Avidity, Natural TCR to WT1₃₇₋₄₅

- Initial clinical indication: **AML**, the most common type of acute leukemia in adults with limited treatment options¹
- HD1-TCR selected for NTLA-5001 based on high avidity and ability to specifically kill AML blasts



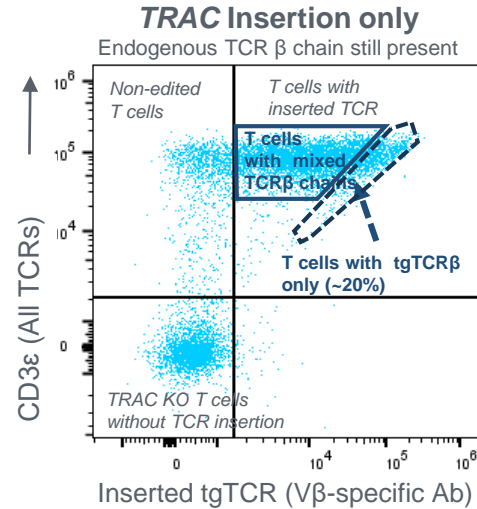
CRISPR Editing Overcomes Key Challenges in TCR T Cell Engineering

Traditional tgTCR addition

Heterogenous Cell Product



Mixed TCRs
(tgTCR, endogenous and misspaired TCRs)



Key Challenges

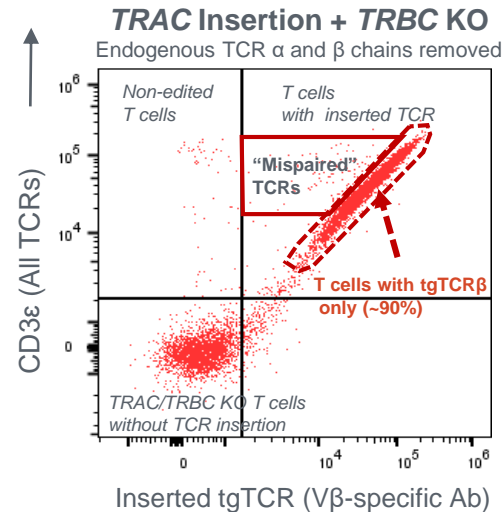
- Mutagenesis risk from random lentiviral insertion
- Mixed expression of endogenous, tg and misspaired TCRs
- Unpredictable specificities of misspaired TCRs and GvHD risk
- Lower tgTCR expression per T cell leads to reduced efficacy

CRISPR/Cas9 tgTCR replacement

Homogenous Cell Product



tgTCRs only

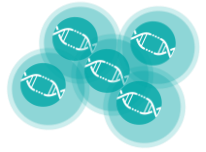
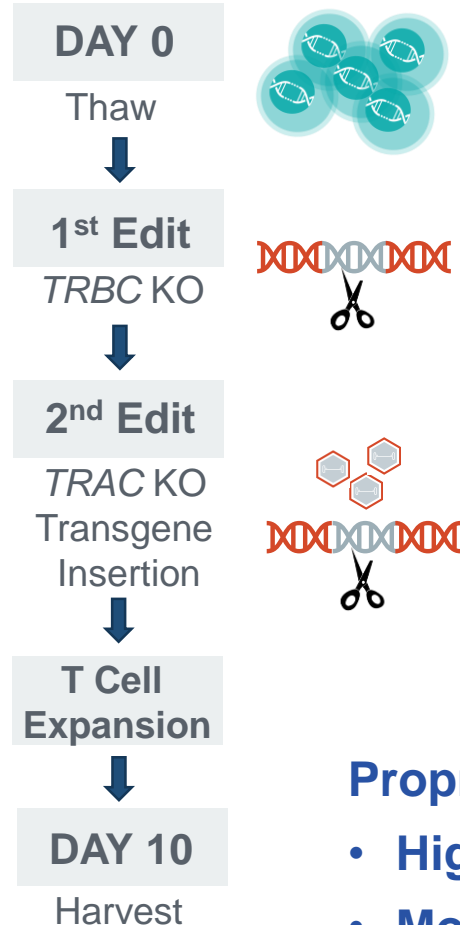


Our Solution

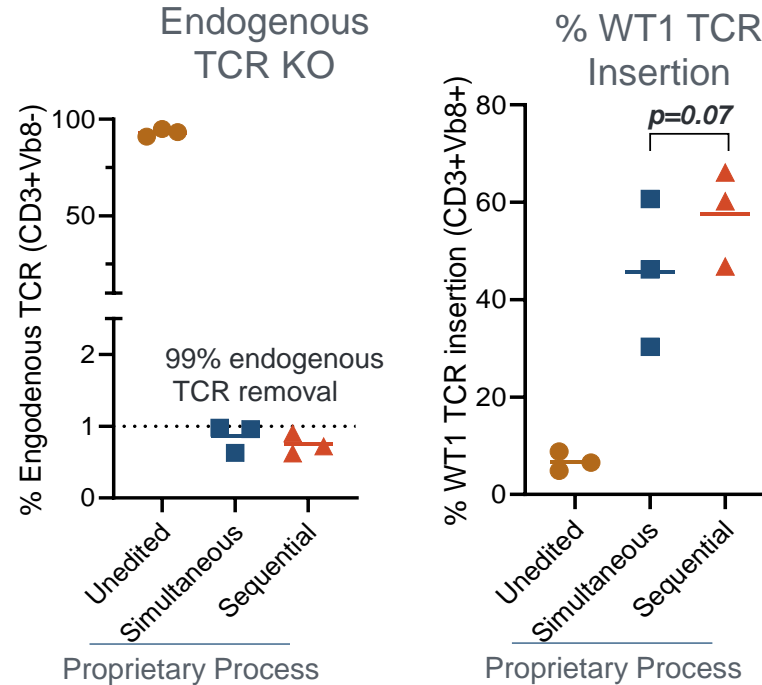
- Precise replacement of endogenous TCR with tgTCR
- No insertional mutagenesis risk
- Reduced risk of normal tissue reactivity
- High tgTCR expression per T cell leads to higher efficacy

Proprietary Sequential Editing Process Enables Multiple Edits with High Efficiency and Cell Viability

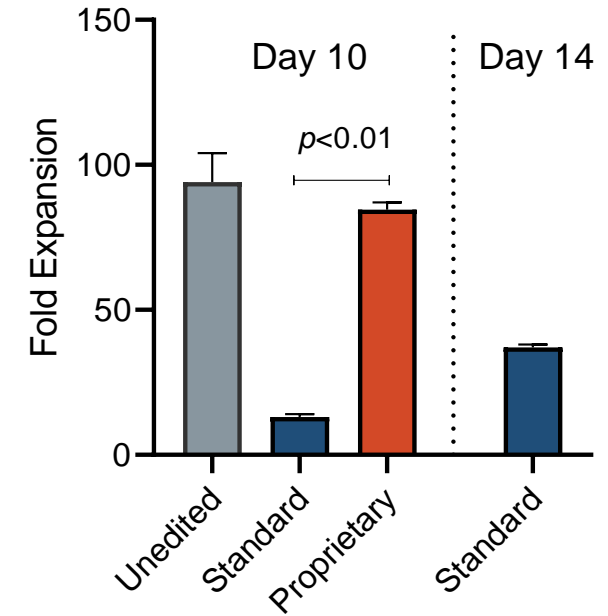
Cell Engineering Workflow



T Cell Editing



T Cell Expansion

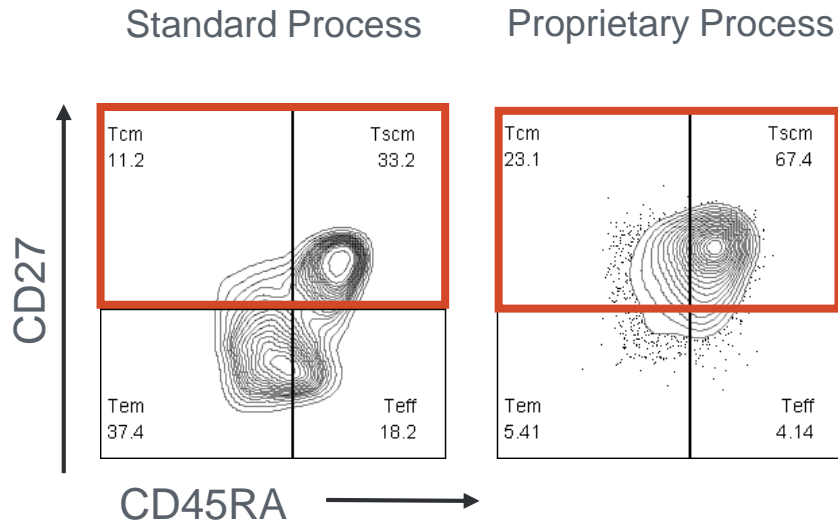


Proprietary process can overcome limitations of standard electroporation methods:

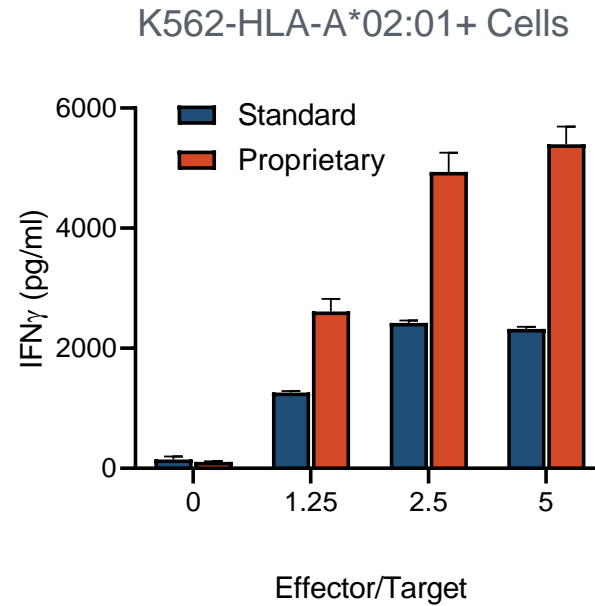
- High endogenous TCR KO (~99%) and TCR insertion rates (>50%)
- More rapid expansion post-editing (80-200x in 10 days)

WT1-TCR T Cells Engineered with Proprietary Process Have Enhanced Potency vs. Standard Methods

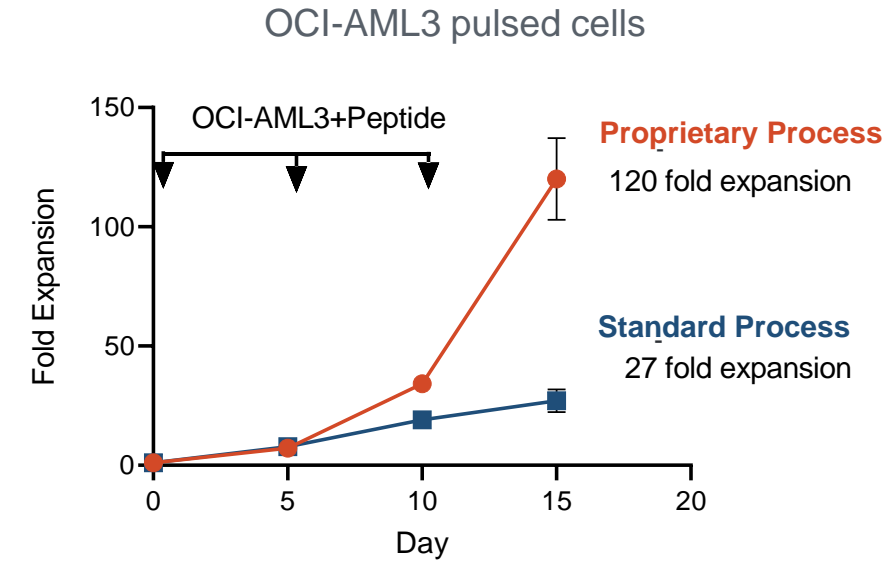
T Cell Memory Phenotype



IFN- γ Secretion



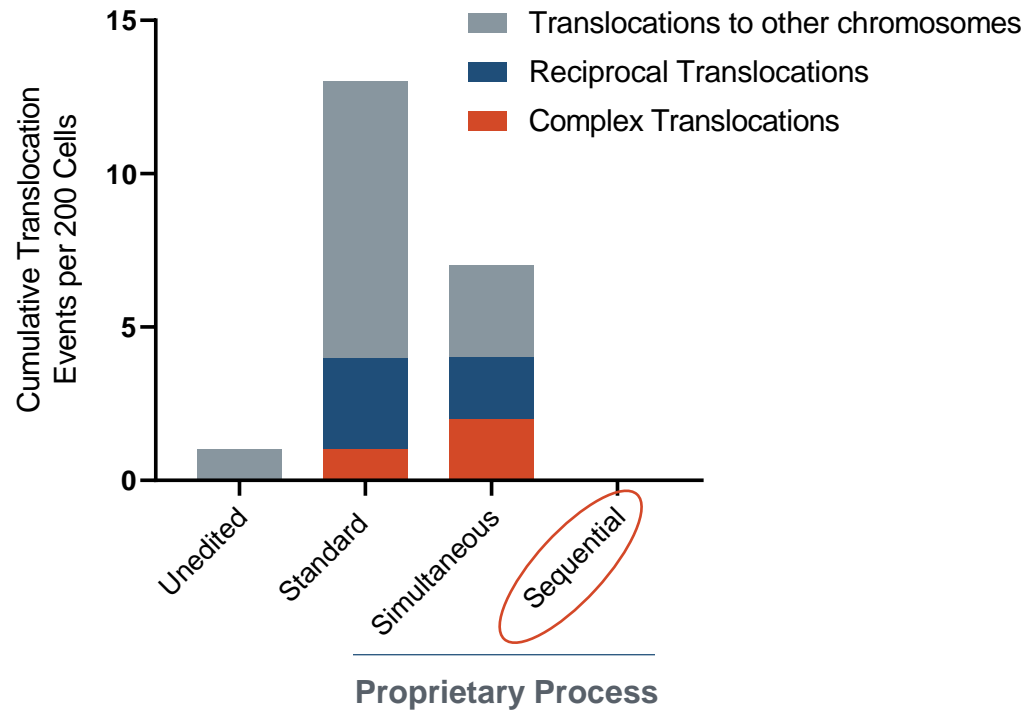
Re-stimulation Stress Test



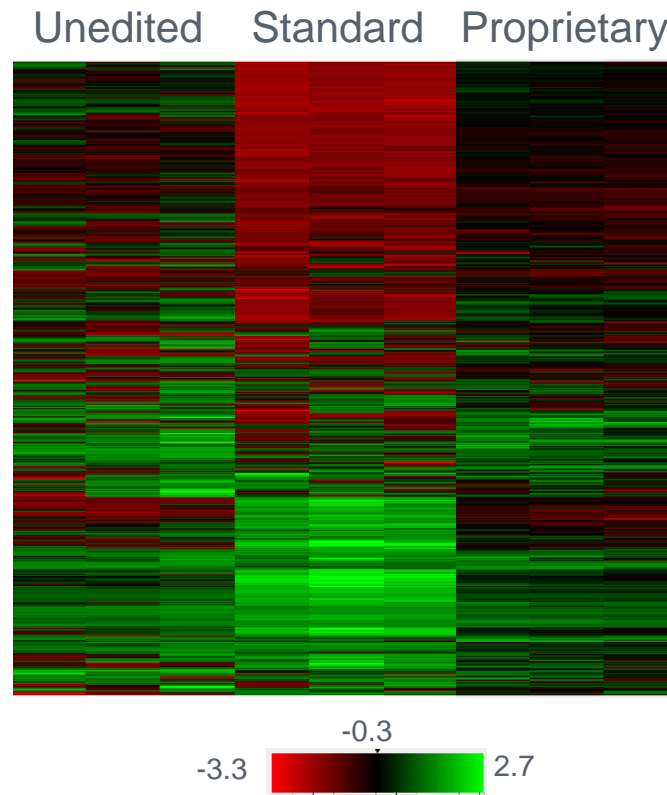
- ~90% of T cells carry desirable central and stem cell memory phenotype
- Higher cytokine secretion in response to WT1-presenting tumor cell lines *in vitro*
- Long-term proliferative capacity in a repeat-stimulation assay with tumor cells *in vitro*

Proprietary Process Minimizes Translocations and Gene Expression Changes vs. Standard Electroporation Process

KromaTiD dGH™ Assay Shows
No Detectable Translocations With Sequential Editing



Gene Expression Profiling¹
(780 genes)



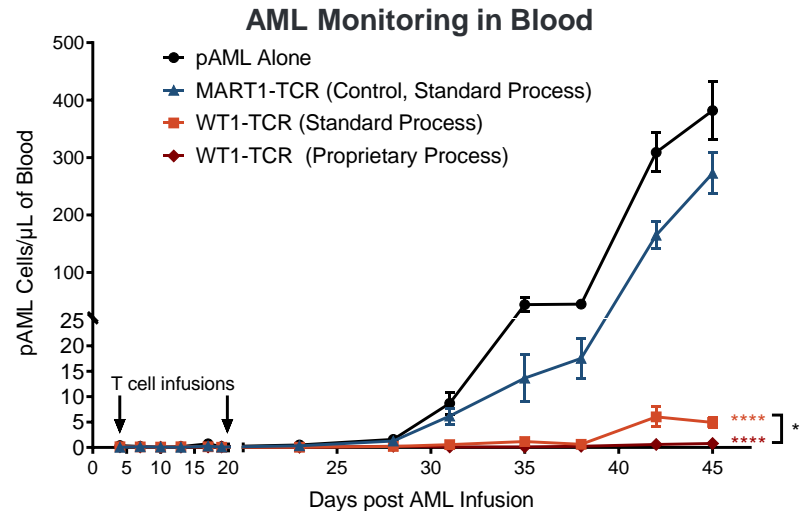
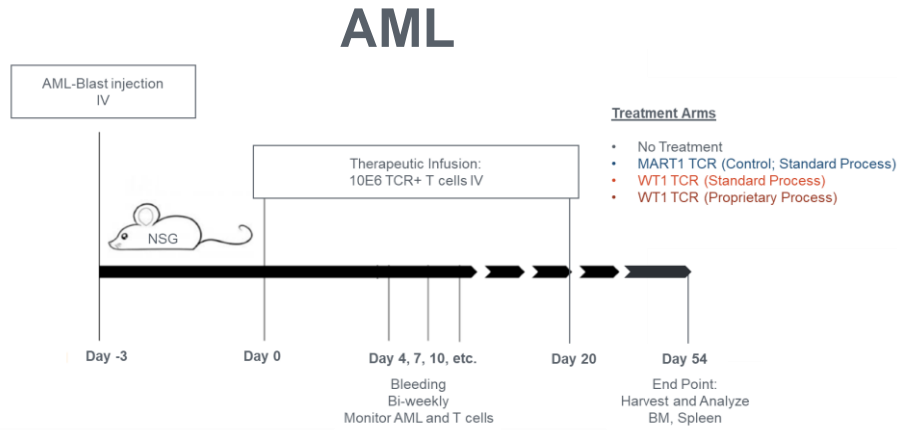
Genes Differentially Regulated

6h	Std	Proprietary
P<0.05	195	75
>2 FC & P<0.05	34	4

- Standard process leads to gene expression changes in pathways of metabolism, memory and exhaustion
- Proprietary process results in minimal gene expression changes

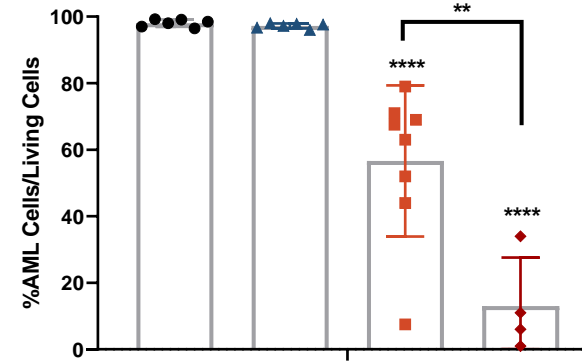
¹NanoString nCounter® CAR-T characterization panel; EP: Electroporation

WT1-Specific TCR T Cells Are Efficacious *In Vivo* in Mice; Proprietary Process Enhances Anti-Tumor Activity

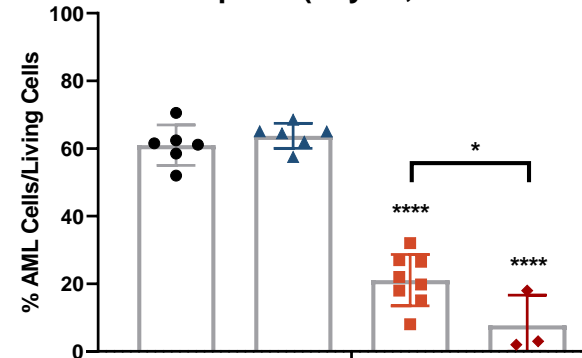


**** $p < 0.0001$, WT1 TCR vs. MART1 Control TCR (2-way ANOVA)
* or ** $p < 0.05$ or $p < 0.01$, Standard vs. Proprietary Process (2-way ANOVA)

AML in Bone Marrow (Day 54, End of Study)



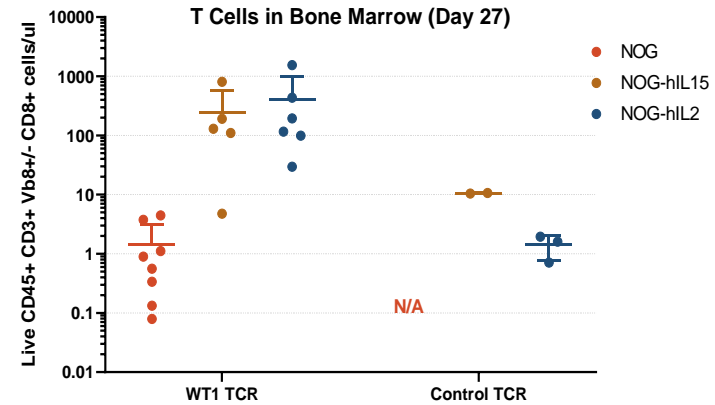
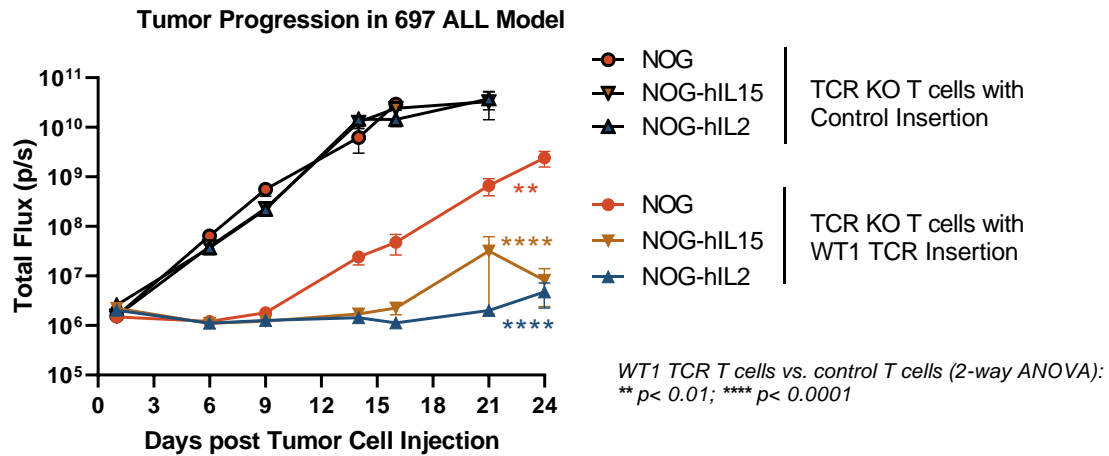
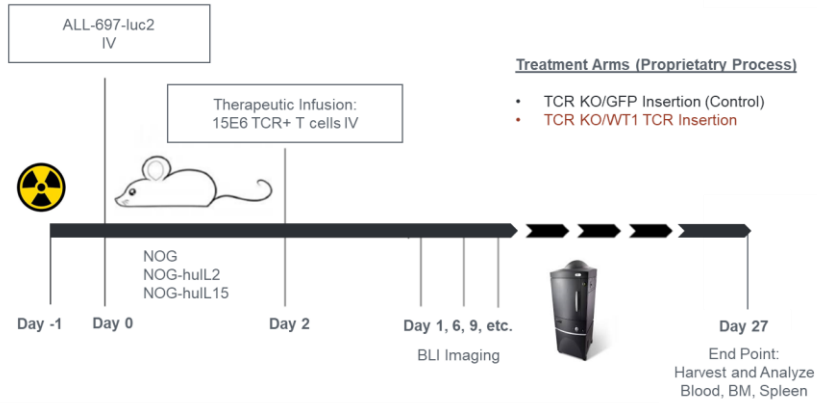
AML in Spleen (Day 54, End of Study)



Better tumor control with WT1 T cells manufactured using the proprietary process

WT1-Specific TCR T Cells Are Efficacious *In Vivo* in Mice; Human IL2/IL15 Enhances Anti-Tumor Activity

ALL



In NOG mice producing human IL2 or IL15* WT1 T cells

- Persist longer
- Control tumor burden more effectively

*IL2 or IL15 levels comparable to levels in patients post lymphodepletion

Conclusions and Next Steps for NTLA-5001

- Proprietary process enables efficient, scalable genome editing
 - ~99% KO efficiency of target genes; 50-70% in locus insertion of tgTCRs
 - Sequential editing with high viability and potential for safer products
 - Faster T cell expansion with favorable T cell memory phenotype leading to potentially reduced vein-to-vein time
 - Enhanced *in vitro* function and *in vivo* anti-tumor efficacy in mouse models
- Intellia is continuing to advance NTLA-5001 toward the clinic in 2021
 - Scale-up for clinical process completed

NTLA-5001: Proposed first-in-human trial evaluating safety and activity in AML

Subjects:

Patients with persistent or recurrent AML after receiving first-line therapy

PART I Ascending Dose

Several
dose-escalation
cohorts

PART II Target Dose Expansion Cohort

Administer optimal dose
selected from Part I

Characterize safety,
pharmacodynamics,
and activity of
NTLA-5001 for
further study in AML

Intellia

THERAPEUTICS