

Nasdaq: BCTX, BCTXW
TSX: BCT

# BriaCell

*Developing Novel Therapeutics to Destroy Cancer*

**Investor Presentation**
**September 2022**

# Forward-Looking Statements

BriaCell Therapeutics Corp. ("**BriaCell**")

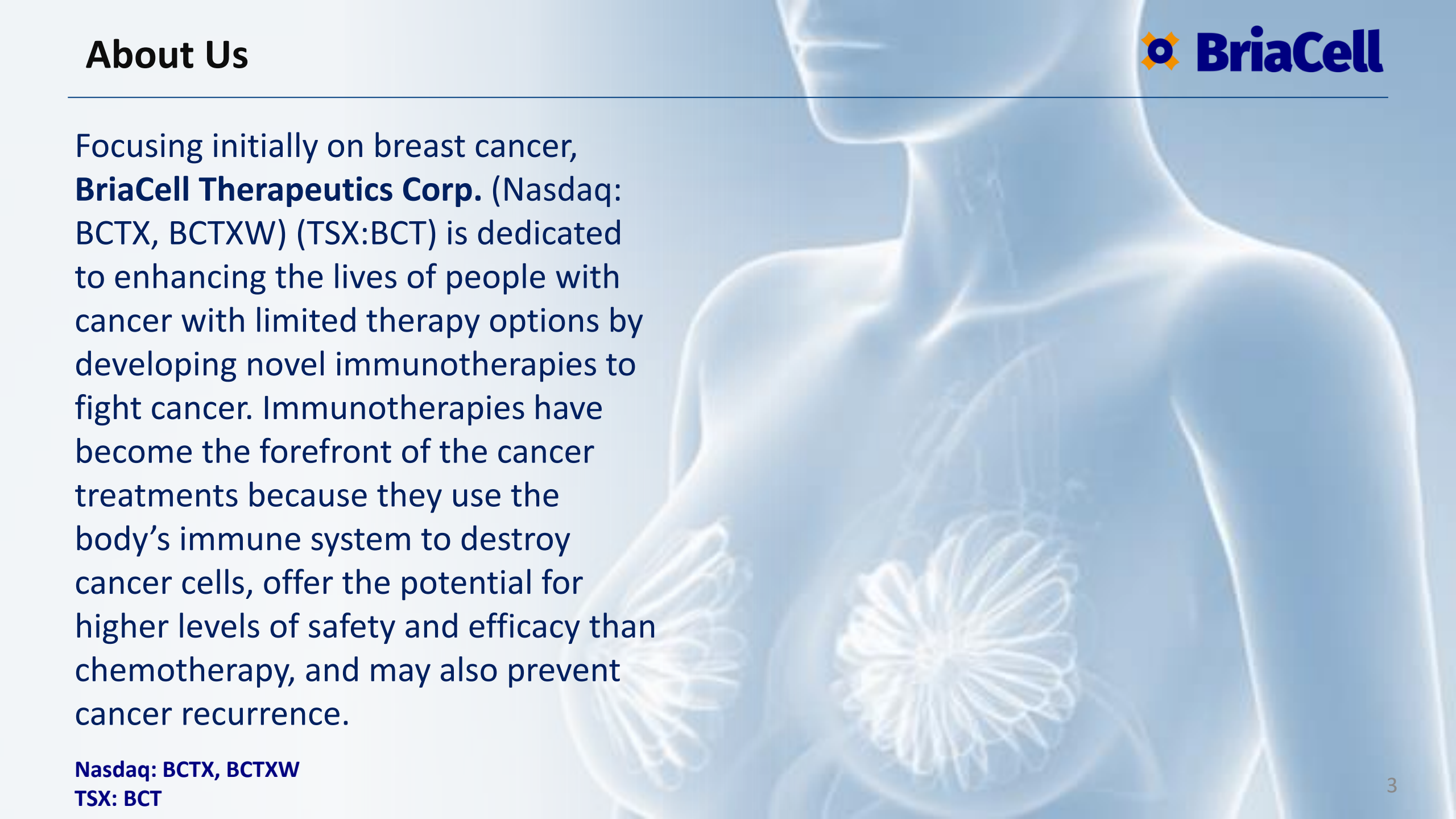
This presentation is for informational purposes only and shall not constitute an offer to sell or the solicitation of an offer to sell or the solicitation of an offer to buy any securities of BriaCell Therapeutics Corp. (the "Company") nor shall there be any sale of securities in any jurisdiction in which such offer, solicitation or sale would be unlawful prior to the registration or qualification under the securities laws of any such jurisdiction. The Company makes certain filings with the Canadian securities regulatory authorities and the U.S. Securities and Exchange Commission (the "SEC"), all of which are available under our profiles on SEDAR at www.sedar.com and on EDGAR at www.sec.gov. For a more complete discussion of the risk factors affecting our business, please refer to these filings.

Our public communications, including this presentation, and SEDAR and SEC filings, may contain statements related to future, not past, events. These forward-looking statements are based upon current beliefs and expectations of the Company's management and are subject to significant risks and uncertainties. These forward-looking statements often, but not always, may be identified by the use of words such as "believes," "estimates," "anticipates," "targets," "expects," "plans," "projects," "intends," "predicts," "may," "could," "might," "will," "should," "approximately," "potential" or, in each case, their negative or other variations thereon or comparable terminology, although not all forward-looking statements contain these words. If underlying assumptions prove inaccurate or risks or uncertainties materialize, actual results may differ materially from those set forth in the forward-looking statements.

These forward-looking statements appear in a number of places throughout this presentation and include statements regarding our intentions, beliefs, projections, outlook, analyses or current expectations concerning, among other things, our reliance on third parties to carry out a large portion of our business; the possibility that pre-clinical and initial clinical trials will not necessarily be predictive of future results; our ability to obtain additional capital to continue our operations; our reliance on key personal; our success in completing the development of our products, commercializing our products or generating significant revenues; our ability to successfully develop, maintain and protect our proprietary products and technologies; and potential difficulties recruiting or retaining patients in our ongoing and planned clinical trials if patients are affected by the virus or are fearful of visiting or traveling to our clinical trial sites because of the outbreak of COVID-19.

By their nature, forward-looking statements involve risks and uncertainties because they relate to events, competitive dynamics, and healthcare, regulatory and scientific developments and depend on the economic circumstances that may or may not occur in the future or may occur on longer or shorter timelines than anticipated or not at all. Although we believe that we have a reasonable basis for each forward-looking statement contained in this presentation, we caution you that forward-looking statements are not guarantees of future performance and that our actual results of operations, financial condition and liquidity, and the development of the industry in which we operate may differ materially from the forward looking statements contained in this presentation.

# About Us



Focusing initially on breast cancer, **BriaCell Therapeutics Corp.** (Nasdaq: BCTX, BCTXW) (TSX:BCT) is dedicated to enhancing the lives of people with cancer with limited therapy options by developing novel immunotherapies to fight cancer. Immunotherapies have become the forefront of the cancer treatments because they use the body's immune system to destroy cancer cells, offer the potential for higher levels of safety and efficacy than chemotherapy, and may also prevent cancer recurrence.

**Nasdaq: BCTX, BCTXW**
**TSX: BCT**

# Capitalization Structure*

| Stock Symbols: | Nasdaq: BCTX, BCTXW<br>TSX: BCT |
|---|---|
| Share Price: | US$8.31 |
| Shares Outstanding: | 15.5M |
| Market Cap: | US$129M |
| Options (US$6.20 WAEP): | 1,490,300 |
| Warrants (US$5.76 WAEP): | 8,204,679 |
| Cash: (at April 30, 2022) | US$44.5M |
| Website: | BriaCell.com |

(*) as of September 8, 2022



# BriaCell Corporate Highlights

- BriaCell Therapeutics Corp. (**Nasdaq: BCTX, BCTXW; TSX: BCT**) is a clinical stage immunotherapy company developing treatments that boost the ability of the body's own cancer-fighting cells to destroy cancerous tumors
- **Lead drug candidate Bria-IMT™ (Awarded Fast Track designation by FDA)** is targeting **third-line advanced breast cancer** (the cause of over 40,000 deaths per year in the U.S.) and its associated U.S. patient population of ~70,000 patients
  - 35 patients dosed to-date show robust response → Our Phase I/II safety & efficacy show similar or superior results to those of other advanced or approved drugs for breast cancer at similar stages of clinical development
- **Incyte Corporation (Nasdaq: INCY)** → Corporate collaboration and supply agreement
  - Non-exclusive clinical trial collaboration to evaluate the effects of combination therapies
  - Bria-IMT™ + immune checkpoint inhibitors (Phase I/II)
    1. Bria-IMT™ + pembrolizumab (KEYTRUDA®); dosed 11 patients → transitioned to Incyte combination
    2. Bria-IMT™ + **Incyte's retifanlimab under corporate collaboration**
- **Registration Study** initiation expected in 2H2022 → Bria-IMT™ combined with immune checkpoint inhibitor
- **Bria-OTS™** "*Off-The-Shelf Personalized*" immunotherapy based on patient's HLA-type that would address ~140,000 third-line breast cancer patients (99% of all third-line patients)
  - R&D Agreement with the National Cancer Institute (part of NIH)
- **Bria-PROS™** "*Off-The-Shelf Personalized*" immunotherapy for prostate cancer patients (34,500 deaths in the U.S.)
- **Clinical Strategy Team involved in 19 drug approvals**

**Rapidly advancing towards pivotal registration study commencement in 2022**

# BriaCell's Expert Drug Development & Financial Team



**William V. Williams, MD, FACP, President & CEO, Director**

- Former VP, Exploratory Development, Incyte Corporation
- Former VP, Experimental Medicine, GlaxoSmithKline
- Former Head, Rheumatology Research, University of Pennsylvania
- Extensive drug development experience



**Gadi Levin, CA, MBA, CFO & Corporate Secretary**

- Former CFO, Labstyle Innovations Ltd.
- Former VP of Finance & CFO for two investment houses; Various roles at Arthur Andersen
- BCom in Accounting & Information Systems, the University of the Cape Town; CA designation, the University of South Africa; MBA, Bar Ilan University



**Farrah Dean, MSc, MBA, VP Corporate Development**

- Former IR, CytRx Corporation, and CCG Investor Relations
- Former Sr. Associate Analyst in Equity Research at Oppenheimer & Co., Rodman & Renshaw, and ThinkEquity LLC



**Giuseppe Del Priore, MD, MPH, CMO**

- Former biotech CMO; National Director at the CTCA
- Faculty at Indiana University School of Medicine, Weill Cornell Medicine, & NYU School of Medicine.
- MPH, UIC; MD, The SUNY; BA, The CUNY; MSKCC, The University of Chicago, Northwestern University, & the University of Rochester



**Miguel A. Lopez-Lago, PhD, Chief Scientific Officer**

- Cancer scientist, Memorial Sloan-Kettering Cancer Center, New York (MSKCC) specializing in chimeric antigen receptor (CAR) T cell technologies.



**Charles Wiseman, MD, Founder & Principal Research Advisor**

- Former Asst Prof, The University of Texas MD Anderson Cancer Center
- Former Dir., Immunotherapy Lab, St. Vincent Medical Center
- Clinical Professor of Medicine (retired), Keck-USC School of Medicine
- Former Acting Chief of Oncology/Hematology, White Memorial

**Clinical Strategy Team involved in 19 drug approvals**

# BriaCell's Board of Directors



**Jamieson Bondarenko, CFA, CMT, Chairman of the Board**

- Previously Principal and Managing Director of the Equity Capital Markets group of Eight Capital
- Previously several positions at Dundee Securities Ltd., including Managing Director, Director, Vice President and Associate



**Marc Lustig, MSc, MBA, Director**

- Current: Director, L5 Capital Inc.
- Scientific roles at Merck & Co., and capital markets roles in biotech equity research, corporate finance, and as Head of Capital Markets
- Founder & CEO, Origin House (now Cresco Labs Inc.)



**Vaughn Embro-Pantalony, MBA, FCPA, FCMA, CDir, ACC, Director**

- Current: Chair, Board of Directors, Soricimed Biopharma Inc.
- Board and Audit Committee Member, Microbix Biosystems Inc.
- VP, Finance & CFO, Teva Novopharm Limited
- VP, Finance & Administration, Bayer Healthcare
- Director, Finance & Administration & CFO, Zeneca Pharma Inc.



**Martin Schmieg, CPA, Director**

- Current: CEO, ClearIT, LLC
- CFO: Sirna Therapeutics, Inc., & Isolagen, Inc.
- CEO, Freedom-2, Inc. (now PharmaCyte, Inc.); Advisor, Caladrius Biosciences, Inc., Beckman Coulter Genomics, Calimmune, Inc., Cryoport, Inc., Vetbiologics, a division of U.S. Stem Cell, Inc., Sapientia Pharmaceuticals, Inc., Rokk3r Labs, LLC



**William V. Williams, MD, FACP, President & CEO, Director**

- Former VP, Exploratory Development, Incyte Corporation
- Former VP, Experimental Medicine, GlaxoSmithKline
- Former Head, Rheumatology Research, University of Pennsylvania
- Extensive drug development experience



**Jane Gross, PhD, Director**

- Current: Director, aTyr Pharma Inc.
- Formerly CSO&SVP, Aptevo Therapeutics; VP Research, Emergent BioSolutions Inc. & ZymoGenetics Inc. (acq. by Bristol Myers Squibb)
- PhD (Immunology) UC, Berkeley under James P. Allison, PhD



**Rebecca A. Taub, MD, Director**

- Current: CMO & EVP, Dir., Founder, Madrigal Pharmaceuticals
- SVP, VIA Pharmaceuticals; VP, Hoffmann-La Roche Company
- Exec. Director, Bristol-Myers Squibb; Dupont Pharmaceuticals
- Professor of Genetics & Medicine, University of Pennsylvania

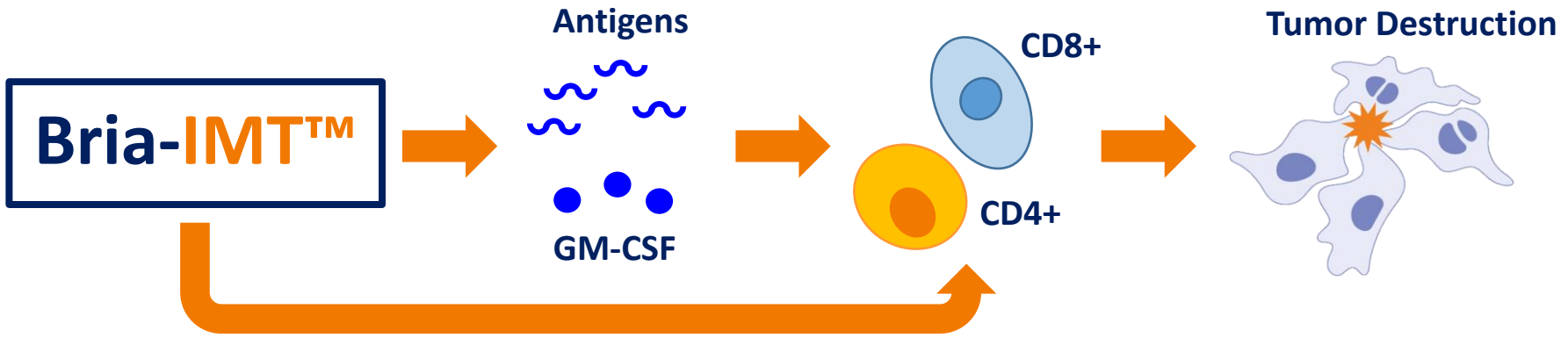
# BriaCell Pipeline

| Therapeutic | Indication | Preclinical | Phase I | Phase II | Phase III | Anticipated Milestones |
|---|---|---|---|---|---|---|
| Bria-IMT™ combined with Incyte's retifanlimab | Advanced Breast Cancer (3rd+ line) | Ph I/II (Fast Track) | | | | Safety & Efficacy Data 2H2022<br>Registration Study 2H2022 |
| Bria-OTS™ | Breast Cancer | | | | | IND Filing 2H2022 |
| Bria-Pros™ | Prostate Cancer | | | | | IND Preparation 2H2022 |
| Bria-Lung™ | Non-Small Cell Lung Cancer | | | | | IND Preparation 2H2022 |
| Bria-Mel™ | Melanoma | | | | | IND Preparation 2H2022 |
| sCD80 | Solid Tumors | | | | | IND Filing 2024 |
| Bria-TILsRx™ | Prostate Cancer | | | | | IND Filing 2024 |
| Bria-TILsRx™ | Epithelial and Glandular | | | | | IND Filing 2024 |
| PKCδi* | RAS Transformed Cancers | | | | | Candidate Selection 2022 |

*PKCδi = Protein kinase C delta inhibitor

# BriaCell's Patented Immunotherapy: Bria-IMT™

**Bria-IMT™ (developed from a breast cancer cell line) is a patented (USPTO) immunotherapy approach that directly stimulates the body's own cancer-fighting cells to attack and destroy breast cancer tumors.**




We believe that Bria-IMT™:

1. Produces ***antigens*** (proteins made by breast cancer cells).
2. Further boosts the immune response through secretion of a protein called ***GM-CSF.***
3. The antigens are 'presented' to ***CD4+ and CD8+ T-cells***, cells known for tumor destruction.
4. Also ***directly stimulates cancer-fighting T-cells***, further boosting the response.

**Mechanism of Action: Specific Immune Activation directly stimulates cancer-fighting cells in advanced breast cancer**

# Bria-IMT™ – Phase I/II Efficacy in Breast Cancer

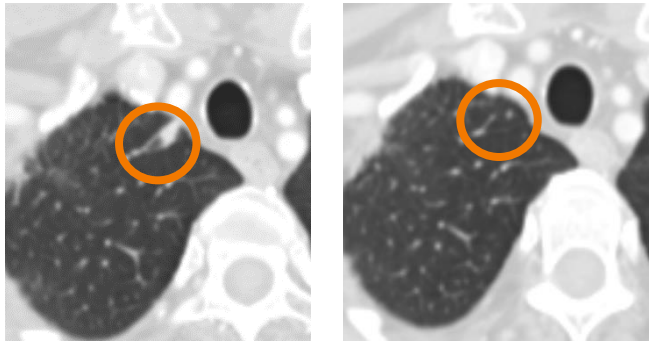
## Mechanism of Action & Proof-of-Concept

- 4 patients treated by Dr. Wiseman in 2004-2005 (original patients), including one remarkable responder.
- 23 patients were dosed in 2017-2018 (Phase I/II), all very heavily pre-treated (with chemotherapy).
- **Safety & Efficacy Data**: We believe the data was similar or superior to those of other advanced or approved drugs for breast cancer at similar stages of clinical development.

## HLA-Type Matching and Biological Activity (original patients + Phase I/II data)

| Patients | HLA Match | Disease Control* | Disease Control in Immune Responders** |
|---|---|---|---|
| N=6 | ≥ 2 | 50% | 75% |
| N=20 | ≥ 1 | 25% | 33% |
| N=7 | 0 | 29% | 29% |

*Includes 1 PR and 7 SD
**Immune response measured by delayed-type hypersensitivity.



Pre-Treatment



Post-Treatment

**Patient 01-002 – Two HLA Matches**

Patient 01-002 was treated with the Bria-IMT™ regimen and had what we conclude was a robust response, specifically substantial tumor regression in 20 lung metastases that all either disappeared or shrunk to tiny scars.

**HLA Matching Hypothesis: Tumor regression appears to be most pronounced in patients who match Bria-IMT™ at specific HLA-types & develop an immune response**

# Bria-IMT™ in Combination with Immune Checkpoint Inhibitors

## How Do Checkpoint Inhibitors Work?

- PD-L1 molecules block immune cells from attacking cancer cells
- Immune checkpoint inhibitors are designed to neutralize this immune suppression in cancer patients

## Why did we combine Bria-IMT™ with immune checkpoint inhibitors?

- BriaCell has observed PD-L1 expression on circulating cancer cells & cancer-associated cells in >90% of our patients
- Bria-IMT™ ***increases the immune response,*** while checkpoint inhibitors ***decrease immune suppression***
- Bria-IMT™ appears to have exerted additive or synergistic tumor-directed effects with checkpoint inhibitors
- **BriaCell's hypothesis**: Checkpoint inhibitors act by "awakening" a component of the immune system, while Bria-IMT™ "puts the foot on the gas" of the immune system, which may lead to more powerful anti-tumor activity

**BriaCell is currently dosing Bria-IMT™ (Fast Track Designation by FDA) with Incyte's retifanlimab under a corporate collaboration**

# Bria-IMT™ + Immune Checkpoint Inhibitor Combination Study Data

## Phase I/II Combination Study in Advanced Breast Cancer

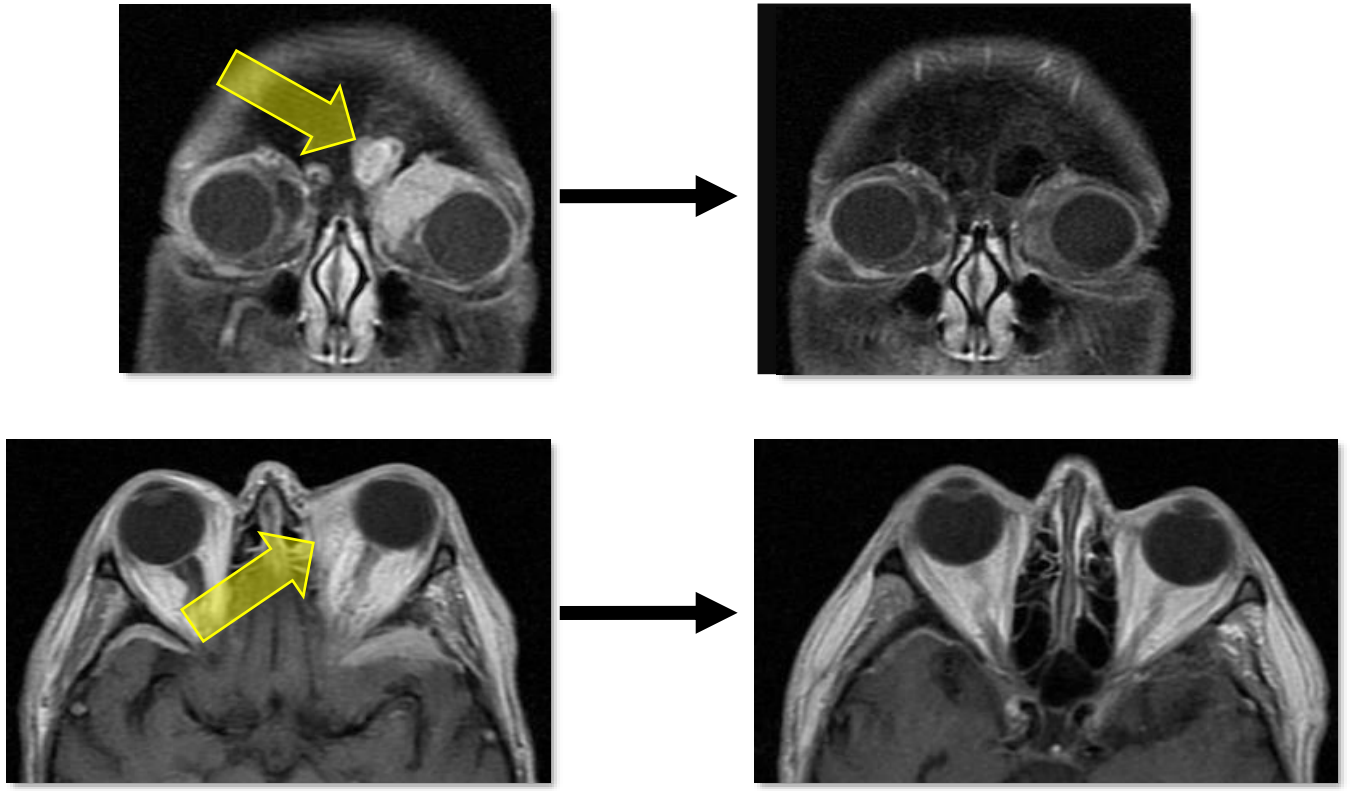
- Patients were treated with the combination of Bria-IMT™ and anti-PD-1 antibody KEYTRUDA®.
- **An excellent safety and tolerability profile** (no dose-limiting toxicities) on the first 11 patients was observed.
- All 11 patients were very heavily pre-treated with a median of 5 prior systemic therapy regimens (such as chemotherapy).
  - Most had very weak immune systems, further emphasizing the importance of the positive results observed.
  - As BriaCell had been purchasing the KEYTRUDA® for the study from Merck without a supply agreement, the study was switched to evaluating combination therapy with Incyte drugs and the combination with KEYTRUDA® was discontinued.

| | Patient | HLA Match | Observations | Notes |
|---|---|---|---|---|
| **Rolled-over from Bria-IMT™ study** | 1 | 0 | 25% reduction in sum of diameters of target liver metastases (breast cancer tumors in the liver). | ▪ 8 prior chemotherapy or biological therapy regimens with extensive tumor growth in her liver.<br>▪ Not an HLA match with Bria-IMT™ suggesting that—in combination with KEYTRUDA®—tumor reduction may occur without a match. |
| **Remarkable Responder announced Sept. 2019 Did not roll over** | 5 | 2 | 70% reduction in sum of diameters of target adrenal metastasis and complete resolution of orbital (behind the eye) metastasis. | ▪ Failed 12 prior regimens with 16 agents (13 chemotherapy and 3 hormonal).<br>▪ Match at HLA-C and HLA-DRB3 loci. |

# Bria-IMT™ + Immune Checkpoint Inhibitor: Remarkable Responder

## Tumor behind the left eye causing proptosis completely resolves

Baseline Scans



Six months On Treatment Scans

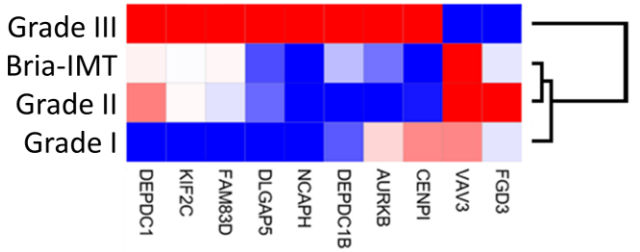
**Complete resolution of orbital tumor in a heavily pre-treated patient with 2 HLA matches and a grade II tumor supports remarkable activity of the Bria-IMT™ combination regimen, and it is worth noting that checkpoint inhibitors have not proven effective as monotherapy in advanced breast cancer**

# Bria-IMT™ in Grade I/II Tumors

## Breast Cancer Grade Correlates with Response

- Bria-IMT™ is derived from a grade II (moderately differentiated) breast cancer.
- Genes expressed by Bria-IMT™ match best with grade I/II-derived Breast Cancer Cell Lines
  - ~40% of recurrent breast cancers are grade I/II

**Cell Lines**




**5 / 7**

### Monotherapy Study

Grade I/II patients with immune responses had clinical benefit (5/7 = 71%)

- Patients very heavily pre-treated, median of 7 prior regimens

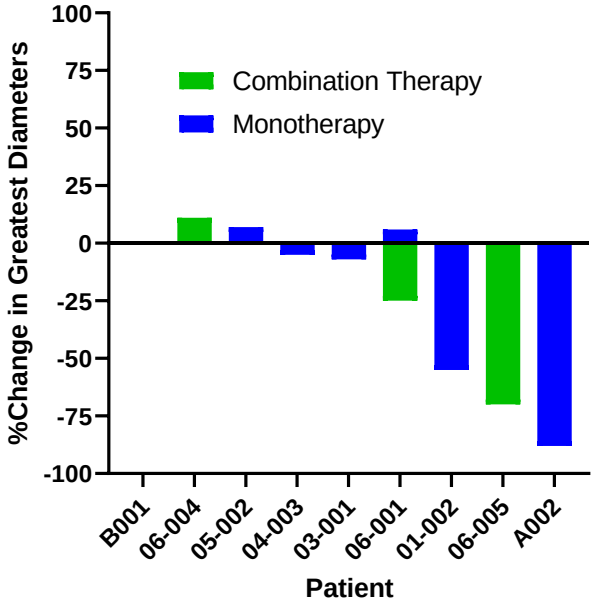
**3 / 3**

### Keytruda Combination Study

Grade I/II patients with immune responses had clinical benefit (3/3 = 100%)

- Patients very heavily pre-treated with 14-15 prior regimens

**Grade I/II Patients**
**% Change Lesions**




- **Median Overall Survival of 12.5 months**
  - Recent publication in 3rd line patients (Kazmi S et al Breast Cancer Res Treat. 2020 Aug 17) showed a median overall survival of 7.2 - 9.8 months

**We believe these findings identify a patient population with higher clinical benefit rates**

# Summary: Bria-IMT™ in Advanced Breast Cancer Trials

## 1 Proof-of-concept trial

| | POC trial (2004-2006) |
|---|---|
| **Patients** | N=4 (stage IV) |
| **Safety Profile** | Well tolerated; no severe AEs |
| **Median Survival** | 35 months |

*Median **survival was in line or above expected survival** for salvage therapies (6-12 months)*

*One patient with 2 HLA matches to Bria-IMT™ developed **prompt objective complete remission** of a lung lesion on CT scans and near-complete regression of multiple breast lesions on MRI*

## 2 Phase I/II monotherapy

| Patients | HLA match | *Disease Control | **Disease Control in immune responders |
|---|---|---|---|
| **N=6** | ≥2 | 50% | 75% |
| **N=20** | ≥1 | 25% | 33% |
| **N=7** | 0 | 29% | 29% |

*Includes 1 PR and 7 SD
**Immune response measured by delayed-type hypersensitivity.
Note that this includes the 4 patients from the second trial

*Bria-IMT™'s data in monotherapy showed **significant disease control** in patients with increasing number of **HLA matches***

***PD-L1** expression was seen on Cancer-Associated Macrophage-Like Cells (CAMLs) in 21/23 patients*

## 3 Phase I/II combination w/Keytruda®

| Patients | HLA match | *Disease Control | **Disease Control in immune responders |
|---|---|---|---|
| **N=5** | ≥2 | 40% | 100% |
| **N=7** | ≥1 | 43% | 75% |
| **N=4** | 0 | 25% | 25% |

*Includes 1 PR and 3 SD
**Immune response measured by delayed-type hypersensitivity.
Note that this includes the 4 patients from the monotherapy trial

***All 3 patients with grade I/II tumors had disease control (100%)***

*Patients **with grade I or II** tumors and those able to **generate a robust immune response appear more likely to respond** regardless of HLA match, suggesting PD1 inhibitor can compensate for lack of HLA match*

**Bria-IMT™ shows significant disease control in immune responders with increasing numbers of HLA matches both in monotherapy and in combination with Keytruda®**

Sources: 1- Wiseman CL, Kharazi A. The Open Breast Cancer Journal, 2010, 2, 4-11; 2- Lacher et al. Front. Immunol. 9:776; 3- Williams et al. San Antonio Breast Cancer Symposium (SABCS), December 2019

# Bria-IMT™ Survival in Advanced Breast Cancer Trials

| BriaCell Treatment [1] | | | | | Leading Treatment Comparison[2] | |
|---|---|---|---|---|---|---|
| N = | Filter | Prior Regimens | Overall Survival | vs. | Prior Regimens | Overall Survival |
| 7 | Combination Therapy | 9 | 12.0 months | | 2 | 7.2 - 9.8 months |
| 9 | 1+ HLA | 8 | 12.1 months | | | |
| 5 | 2+ HLA | 5 | 13.4 months | | | |
| 6 | Tumor Grade I/II | 12 | 12.5 months | | | |
| Patient 06-005 [3] | 2 HLA; Grade II | 13 | 21.4 months | | | |

1) BriaCell treats severely sick patients, as indicated by the "Prior Regimens" column – to more accurately present survival data, BriaCell has included only those patients able to mount an immune response. Patients from both the monotherapy and combination therapy are included unless otherwise indicated.
2) Overall survival of 7.2-9.8 months in similar patients with metastatic breast cancer who have failed 2 prior therapy attempts (third line setting); Kazmi S, et al. Breast Cancer Res Treat. 2020 Aug 17.
3) Remarkable Responder highlighted; included within subsets "Tumor Grade I/II" and "2+ HLA".

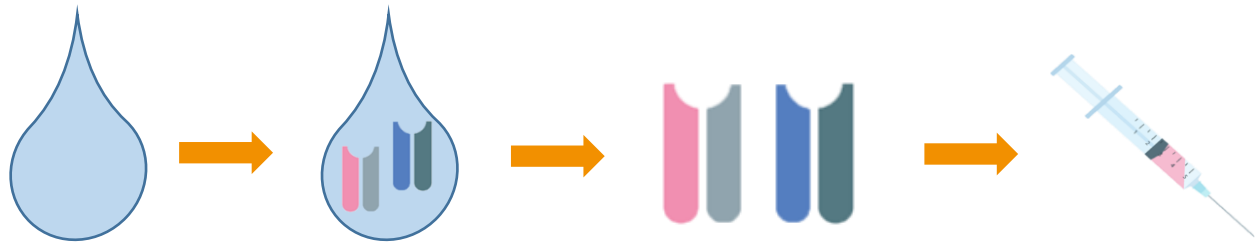
**BriaCell's patients had failed multiple prior systemic regimens versus published data on 3rd line patients (2 prior regimens)**

Sources: 1 - Lacher et al. Front. Immunol. 9:776; 2 - Williams et al. San Antonio Breast Cancer Symposium (SABCS), December 2019

# Bria-OTS™: *Off-The-Shelf* Personalized Immunotherapy

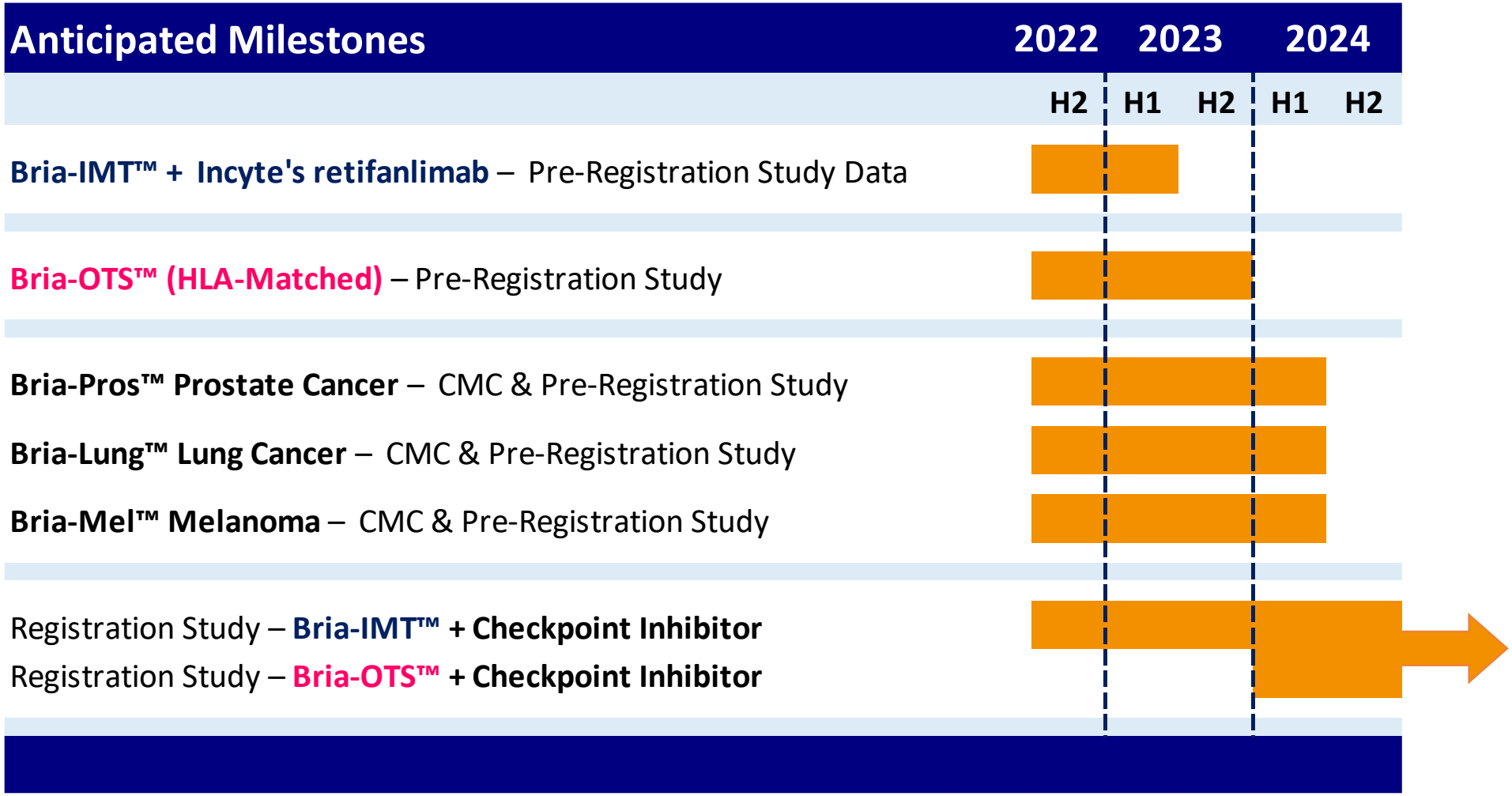
## *Confirmation of "Matching Hypothesis" resulted in BriaCell's "OTS" strategy*

- Cooperative Research and Development Agreement with the ***National Cancer Institute***, part of the ***National Institutes of Health***
- We believe our treatment is most effective when the patient's ***HLA-type*** matches the Bria-IMT™ ***HLA-type***
- We are engineering ***15 unique HLA types (molecules)***, collectively referred to as **Bria-OTS™**, allowing for what we believe will be matching and treatment of over 99% of patients with advanced breast cancer
- **Bria-OTS™** involves a simple saliva test to determine the ***HLA-type*** of each patient
  - Each patient will then be treated with the appropriate pre-manufactured **Bria-OTS™** formulation
- Similar cell lines in development for prostate cancer (Bria-Pros™), lung cancer (Bria-Lung™), and melanoma (Bria-Mel™)




**We anticipate each patient will be treated with a pre-manufactured formulation based on HLA-type**

# Development Timeline & Catalysts




**Fast Track Designation for Bria-IMT™; Clinical data at key scientific meetings (AACR, ASCO, SITC and the San Antonio Breast Cancer Symposium)**

# Comparable Valuations

## BriaCell Has Significantly Lower Enterprise Value* vs Peers

| Company | Therapeutic Area | Technology | Trial Stage (Breast Cancer) | Development Stage | Market Cap (In Mil $US) | Enterprise Value (In Mil $US) | BriaCell EV Discount |
|---|---|---|---|---|---|---|---|
| Adicet Bio, Inc. (ACET) | IO | Off-the-shelf T-cell therapy | | Ph I | 609.1 | 341.4 | 75% |
| Allogene Therapeutics, Inc. (ALLO) | IO | Allogeneic CAR T-cell | | Ph I/II | 2244.6 | 1704.3 | 95% |
| Arcellx, Inc. (ACLX) | IO | CART-ddBCMA | | Ph I | 876.4 | 628.8 | 86% |
| Bicycle Therapeutics plc (BCYC) | IO | Bicyclic peptides | | Ph IIa | 744.9 | 506.2 | 83% |
| Century Therapeutics, Inc. (IPSC) | IO | Allogeneic, iPSC-derived NK & T-cell | | Pre-Clin | 674.2 | 419.5 | 80% |
| Fate Therapeutics, Inc. (FATE) | IO | Off-the-shelf cellular immunotherapies | | Ph I | 2678.4 | 2324.2 | 96% |
| IGM Biosciences, Inc. (IGMS) | IO & others | IgM antibodies | | Ph I/II | 918.4 | 580.7 | 85% |
| Janux Therapeutics, Inc. (JANX) | IO | TRACTr (tumor activated T-cell engager) platform | Pre-Clin | Pre-Clin | 585.6 | 272.9 | 69% |
| Kymera Therapeutics, Inc. (KYMR) | IO & others | Targeted protein degradation | | Ph I | 1519.8 | 1012.8 | 92% |
| Lyell Immunopharma, Inc. (LYEL) | IO | Autologous T-cell therapies | Ph I | Ph I | 1914.1 | 1280.7 | 93% |
| Merus N.V. (MRUS) | IO | Full length human IgG antibodies | | Ph I/II | 1086.4 | 807.8 | 89% |
| NGM Biopharmaceuticals, Inc. (NGM) | IO & others | T-cell engager | Ph I/Ib | Ph II | 1311.0 | 1058.5 | 92% |
| Nurix Therapeutics, Inc. (NRIX) | IO | Degraders & inhibitors of multiple targets | | Ph I | 776.4 | 469.7 | 82% |
| Nuvalent, Inc. (NUVL) | IO | Targeted kinase inhibitors | | Ph I/II | 830.8 | 583.8 | 85% |
| PMV Pharmaceuticals, Inc. (PMVP) | IO | Tumor suppressor p53 | | Ph I/II | 675.9 | 422.1 | 80% |
| RAPT Therapeutics, Inc. (RAPT) | IO & others | CCR4 Inhibitors | | Ph II | 767.2 | 579.8 | 85% |
| Relay Therapeutics, Inc. (RLAY) | IO | Allosteric mutant-& isoform-selective inhibitor of PI3Kα | Ph I/II | Ph I/II | 3362.4 | 2634.2 | 97% |
| Revolution Medicines, Inc. (RVMD) | IO | RAS pathway inhibitors | | Ph II | 1902.0 | 1574.6 | 95% |
| Xencor, Inc. (XNCR) | IO | XmAb antibodies and cytokines | | Ph II | 1511.6 | 940.9 | 91% |
| Average | | | | | 1315.2 | 954.9 | 87% |
| | | | | | | | |
| BriaCell (Nasdaq: BCTX, BCTXW) (TSX: BCT) | IO | Immunotherapy Personalized off-the-shelf targeted immunotherapy | Ph I/II | Ph I/II | 129.0 | 85.1 | |

**IO: Immuno-Oncology**

Data as of September 8, 2022

* Enterprise value is based on the Company's calculations from the SEC filings

# BriaCell Corporate Summary

- BriaCell Therapeutics Corp. (**Nasdaq: BCTX, BCTXW; TSX: BCT**) is a clinical stage immunotherapy company developing treatments that boost the ability of the body's own cancer-fighting cells to destroy cancerous tumors
- **Lead drug candidate Bria-IMT™ (Fast Track Designation by FDA)** is targeting **third-line advanced breast cancer** (the cause of over 40,000 deaths per year in the U.S.) and its associated U.S. patient population of ~70,000 patients
- **Incyte Corporation (Nasdaq: INCY)** → Corporate collaboration and supply agreement
- **Bria-IMT™ Registration Study:** initiation expected in 2H2022 → Bria-IMT™ combined with immune checkpoint inhibitor/s
- **Bria-OTS™** "*Off-The-Shelf Personalized*" immunotherapy based on patient's HLA-type that would address ~140,000 third-line breast cancer patients (99% of all third-line patients) and extend to other types of cancer
- **Bria-PROS™** "Off-The-Shelf Personalized" immunotherapy for prostate cancer patients (34,500 deaths in the US)
- Clinical Strategy Team involved in **19 prior drug approvals**



BriaCell

*Developing Novel Therapeutics to Destroy Cancer*

info@BriaCell.com BriaCell.com 1-888-485-6340

# *Thank you*