



**ASX:CHM**

**Extraordinary General Meeting**

**Corporate Overview**

**11 June 2024**

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## CORPORATE PROFILE

Exchange ASX: CHM

Share Price \$0.018  
(6 June 2024)

52 Week Range \$0.018- 0.047

Market Cap ~\$14.67M  
(6 June 2024)

## INVESTOR HIGHLIGHTS

### Innovative Pipeline

3 Novel Cell Therapy Technologies

### Early Clinical Promise

4 Phase 1 clinical trials open and enrolling  
30+ Patients treated

### Near Term Clinical Catalysts

Multiple clinical milestones over the next 12 months

### Proven Expertise

Experienced team with a track record of driving development through to registration & commercialization

# CHIMERIC'S BROAD PORTFOLIO

3 Novel cell therapies; 4 Clinical Trials

**CHM CDH17**  
CAR-T

Technology from:



**Phase 1/2 Trial Open**

**Sarah Cannon Cancer Centre**

**CHM CLTX**  
CAR-T

Technology from:



**Phase 1a Completed**  
**City of Hope**

**Phase 1b Trial Open**

**Sarah Cannon Cancer Centre**

**CHM CORE-NK**  
"Off the shelf" NK

Technology from:



**Phase 1b Trial Open**

**MD Anderson**

**Phase 1b Trial Open**

**Case Western**

# CHIMERIC: CHM CDH17 CAR-T Trial Open

## CHM CDH17 CAR-T

Technology from:



Phase 1/2 Trial Open

Sarah Cannon Cancer Centre

## PERSONALISED CAR-T: *Autologous*

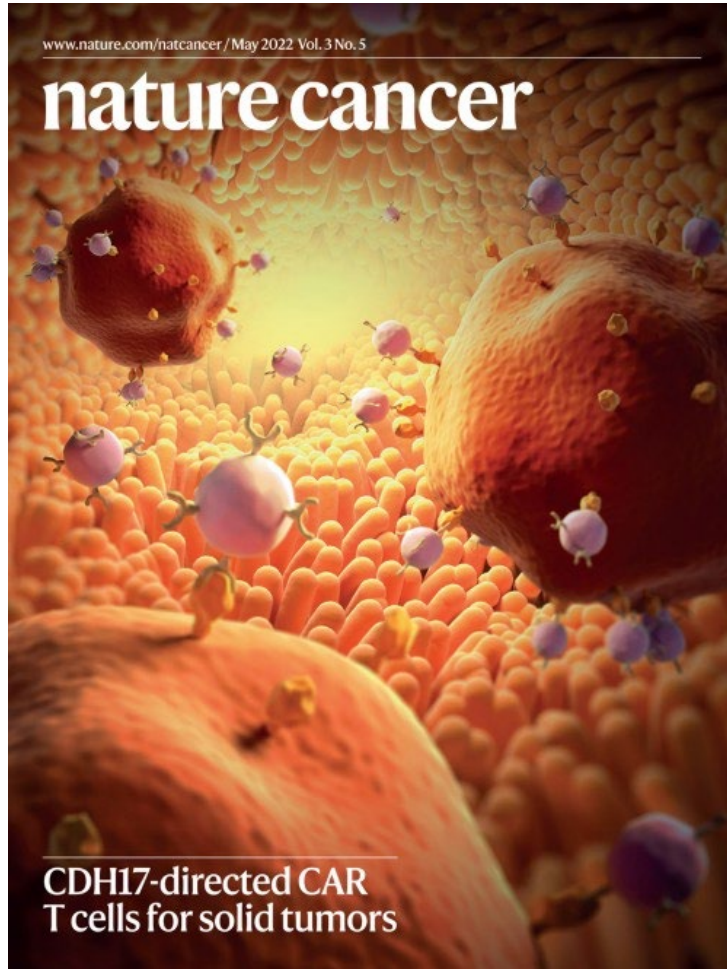
First in class CDH17 CAR T for  
gastrointestinal cancers

FDA IND clearance  
Nov 23

Phase 1/2 Trial Open in  
Colorectal Cancer, Gastric  
Cancer and Neuroendocrine  
tumours

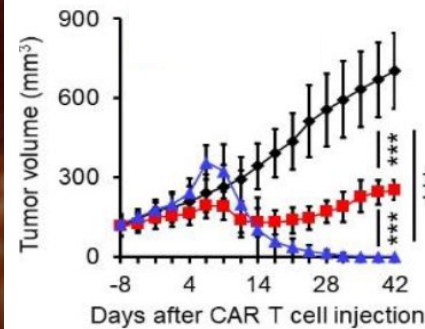
# CHM CDH17

## Pre-Clinical Efficacy

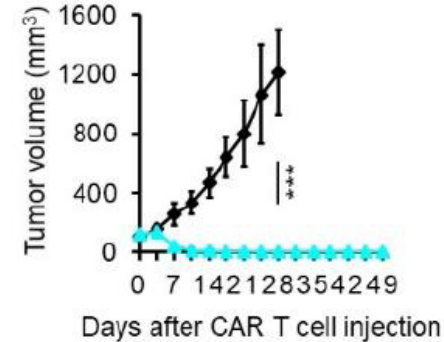


### CDH17 CAR T induced complete eradication of tumours with no relapse in seven mouse models

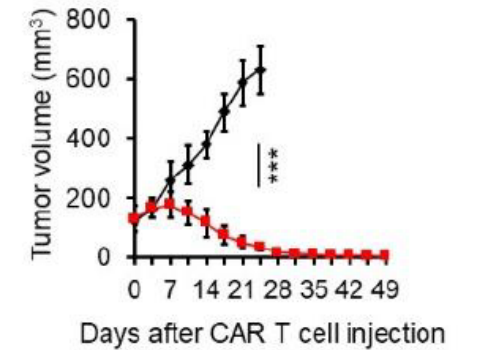
#### Neuroendocrine Tumours



#### Gastric Cancer



#### Pancreatic Cancer



Source: Feng et al., Nature Cancer, 2022

# CHIMERIC THERAPEUTICS: CHM CLTX CAR-T

## CHM CLTX CAR-T

Technology from:



**Phase 1a Completed  
City of Hope**

Phase 1b Trial Open

Sarah Cannon Cancer Centre

### PERSONALISED CAR-T: *Autologous*

First in class CLTX CAR T for brain cancer and solid tumours

Preliminary Positive Phase 1A Clinical Trial in Relapse/ Recurrent Glioblastoma

Ongoing Phase 1B Clinical Trial in Recurrent Glioblastoma

# CHIMERIC: CHM CORE-NK

## CHM CORE-NK “Off the shelf” NK

Technology from:



Phase 1b Trial Open

MD Anderson

Phase 1b Trial Open

Case Western

### Off the shelf: *Allogeneic*

NK cell expansion platform  
Universal Donor

Positive Phase 1A Clinical Trial in  
Colorectal Cancer and AML

Two ongoing Phase 1B  
Clinical Trials in AML and CRC

AML: Cohort 1 cleared, moved to  
dose expansion for Cohort 2

Foundation for next generation  
armored platform and CAR NK  
assets



# KEY CLINICAL CATALYSTS

## Delivering in 2023 and Advancing Key Clinical Milestones in 2024

### 2023 Achievements

### 2024 Milestones

**CHM CDH17**  
CHM 2101

- ✓ FDA IND Clearance for Ph. 1/2 Trial in Colorectal Cancer, Gastric Cancer and Neuroendocrine tumours

- ✓ Ph. 1/2 Site Initiation
- Ph. 1/2 1<sup>st</sup> Patient Treated
- Ph. 1/2 Preliminary Dose Escalation Data

**CHM CLTX**  
CHM 1101

- ✓ Ph. 1A Dose Escalation Complete in GBM
- ✓ Ph. 1A Positive Preliminary Data in GBM
- ✓ Ph. 1B 1<sup>st</sup> Patient Treated in GBM

- Ph. 1B Dose Expansion 1<sup>st</sup> Patient Treated
- Ph. 1B Preliminary Data

**CHM CORE-NK**  
CHM 0201

- ✓ Ph. 1B ADVENT AML Site Initiation
- ✓ Ph. 1B CHM CORE-NK 0201 + Vactosertib 1<sup>st</sup> Patient Treated

- ✓ Ph. 1B ADVENT AML 1<sup>st</sup> Patient Treated
- Ph. 1B ADVENT AML Dose Escalation Complete
- Ph. 1B ADVENT AML Preliminary Data

## FOR MORE INFORMATION



[www.chimerictherapeutics.com](http://www.chimerictherapeutics.com)



[www.linkedin.com/company/chimeric-therapeutics/](http://www.linkedin.com/company/chimeric-therapeutics/)



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# CHIMERIC THERAPEUTICS

**APPENDIX**



**CHIMERIC**  
**THERAPEUTICS**

# CHIMERIC LEADERSHIP TEAM

## EXPERTS IN CELL THERAPY DEVELOPMENT & COMMERCIALIZATION

### EXPERIENCE

**75+** Years of Cell Therapy Experience



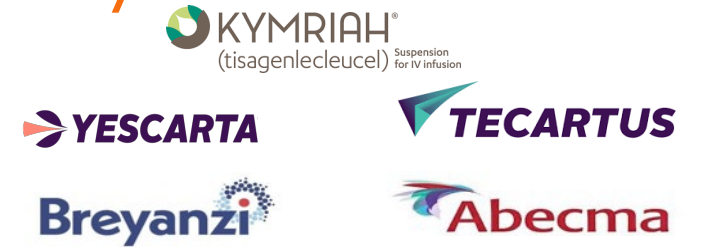
### EXPERTISE

**50+** Development Programs



### PROVEN

**5/6** FDA-Approved CAR T Cell Therapies



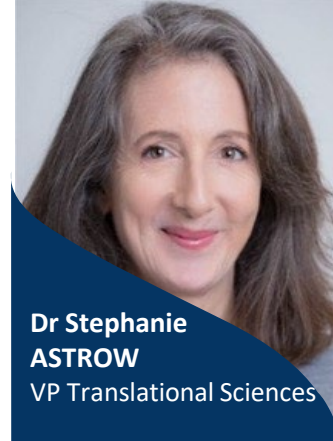
**Dr Rebecca McQualter**  
Chief Operating Officer



**Dr Eliot BOURK**  
Chief Business Officer



**Dr Jason LITTEN**  
Chief Medical Officer



**Dr Stephanie ASTROW**  
VP Translational Sciences

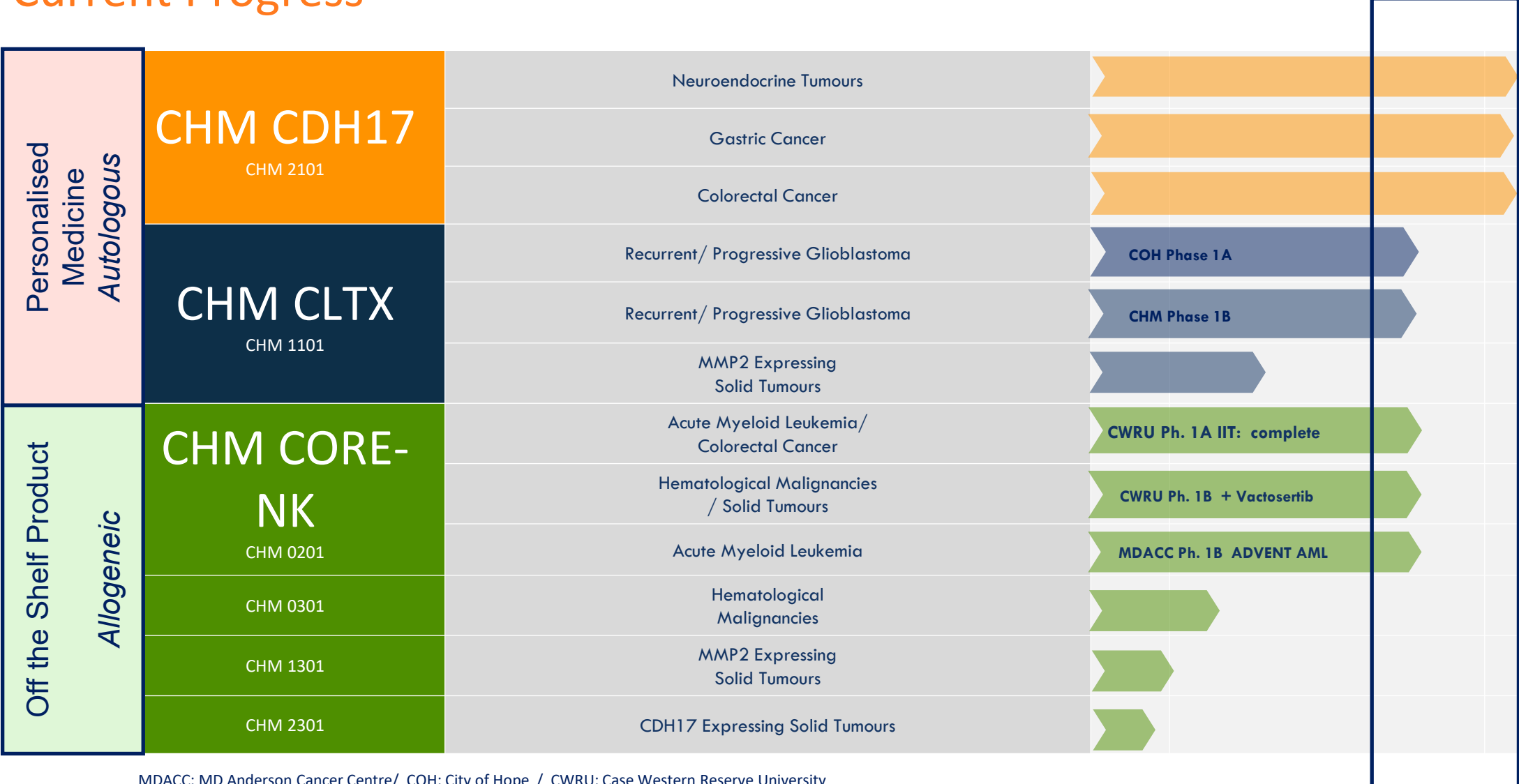


**Kelly THORNBURG**  
VP Technical Operations



# CHIMERIC: POSITIONED FOR SUCCESS

## 2024 Current Progress



MDACC: MD Anderson Cancer Centre/ COH: City of Hope / CWRU: Case Western Reserve University

# CHM CDH17 CAR T

## PHASE 1/2 CLINICAL TRIAL IN GI CANCERS

### OBJECTIVE:

Characterize the safety and tolerability of CDH17 CAR and determine the recommended Phase 2 dose (RP2D) for Phase 2

### PRIMARY ENDPOINTS:

- DLT's, Safety Profile
- AE's, CRS, ICANS

### SECONDARY ENDPOINTS:

- ORR, DCR, TTR, DOR,
- PFS, OS
- Cellular Kinetics

**Colorectal Cancer**

**NETs**  
G1, G2, and well-differentiated G3 NETs of the midgut and hindgut with  $\leq 55\%$  Ki67 expression

**Gastric Cancer**  
Central laboratory confirmation of CDH17+ tumor expression by IHC (H score  $\geq 5$ ) is required.

450 X  $10^6$

150 X  $10^6$

50 X  $10^6$

DOSE ESCALATION

Tumor Specific Dose Confirmation



Tumor Specific Dose Expansion

Upon signal confirmation, dose confirmation and expansion in tumour specific cohorts

All patients must have received at least 1 prior line of systemic anti-cancer treatment in the locally advanced or metastatic setting. Participants must have received or declined FDA-approved and available treatment options

# POSITIVE PRELIMINARY PHASE 1A CLINICAL DATA IN RECURRENT/ PROGRESSIVE GLIOBLASTOMA



## DISEASE CONTROL RATE

**55%**

Disease Control Rate  
(DCR) in heavily  
pretreated patients

Exceeding historical disease  
control rates of 20-37%<sup>1</sup>

## SURVIVAL

**~10 months**

Median survival in patients  
that achieved disease  
control

**14+ months**

Survival in two patients that  
achieved disease control

~7 month survival expectation  
after first recurrence<sup>2</sup>

## SAFETY

Generally, well tolerated

No Dose Limiting Toxicities

No Cytokine Release  
Syndrome

No Tumour Lysis Syndrome

1. Temozolomide DCR: = 37% Ref: DOI:10.1200/JCO.2009.26.5520 Journal of Clinical Oncology 28, no. 12 (April 20, 2010) 2051-2057; Lomustine DCR: 20% The Lancet Oncology: Volume 20, Issue 1, 1-164, 65  
2. Gallego O. Nonsurgical treatment of recurrent glioblastoma. Curr Oncol. 2015 Aug;22(4):e273-81.

# CHM CLTX CAR

## ADVANCING DEVELOPMENT TO MULTI-SITE PHASE 1B

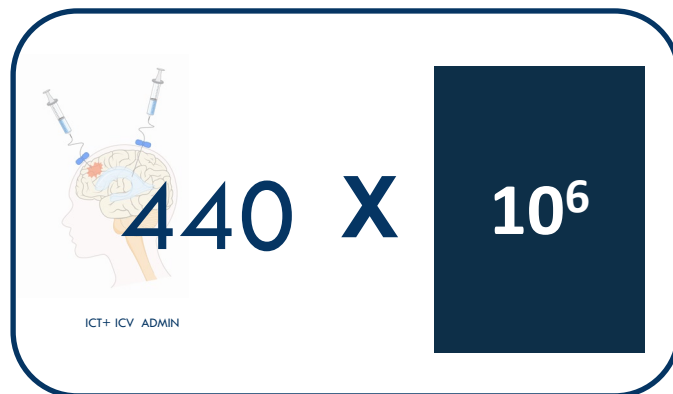
### OBJECTIVES:

- PFS, OS, ORR
- Safety & Feasibility
- RP2D
- Cellular Kinetics

### PATIENT POPULATION:

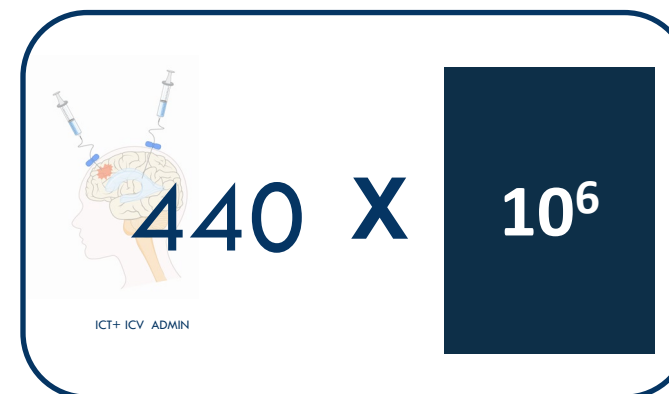
- Recurrent / progressive glioblastoma

### PART A DOSE CONFIRMATION



3-6 PATIENTS

### PART B DOSE EXPANSION



12-26 PATIENTS

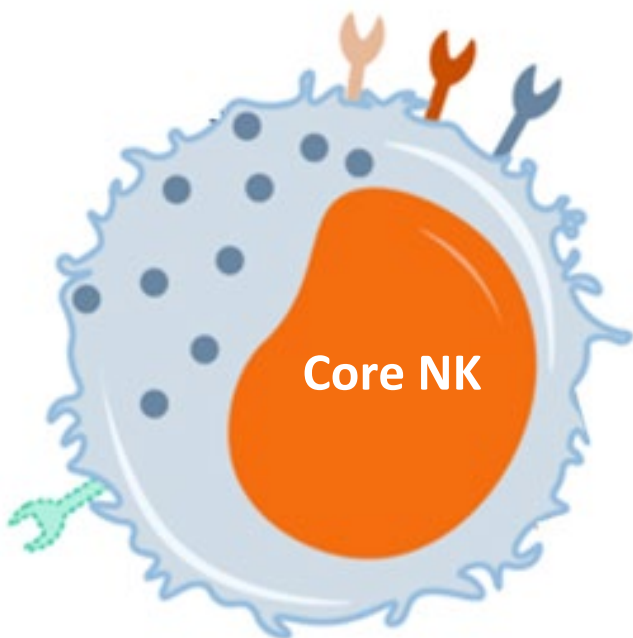
SAFETY & EFFICACY ASSESMENT





# CHM CORE-NK DEVELOPMENT PLAN

OPTIMIZING FOR THE FUTURE



1.

## CHM 0201 Combinations

Exploring novel combinations utilizing NK cells with standard of care therapies

2.

## CHM 0301 Next Generation Platform

Next generation armored platform development

3.

## CAR-NK Products

Development of CAR NK products utilizing our CLTX and CDH17 chimeric antigen receptors

# ADVENT-AML PHASE 1B CLINICAL TRIAL

## CHM CORE-NK 0201 + AZA + VEN IN FRONT-LINE AML

### HIGH UNMET NEED IN AML

Despite treatment advances, outcomes for AML patients not eligible for intensive chemotherapy or allogeneic stem cell transplant are poor

### CHM CORE-NK 0201 + AZACITIDINE + VENETOCLAX

**A Phase Ib Trial of Azacitidine, Venetoclax and CHM CORE-NK 0201 Allogeneic NK Cells for Acute Myeloid Leukemia**

Study Initiation: Q1, 2024

Enrollment: 23 participants

Dose Escalation Eligibility:

Relapse or refractory AML, or MDS/AML with 10% to 19% blasts

Dose Expansion Eligibility:

Newly diagnosed, older/unfit patients with adverse risk AML or MDS/AML

Clinical Trials.gov Identifier: NCT05834244

THE UNIVERSITY OF TEXAS  
**MD Anderson**  
~~Cancer Center~~

# CHM CORE-NK 0201 + Vactosertib Re-Opened

**FDA APPROVED FIRST EVER TRIAL OF NK CELLS WITH VACTOSERTIB**

A Phase Ib Study to Evaluate Safety and Persistence of ex Vivo Expanded Universal Donor NK Cells in Combination With IL-2 and TGF-beta Receptor I Inhibitor Vactosertib

Study Initiation: Jan 2023 – paused due to staff issue

Enrollment: 12 Patients

Estimated Completion: reopened April 2024; completion Late 2024

Eligible Patients:

Relapse or refractory solid tumours and hematological malignancies

Clinical Trials.gov Identifier: NCT05400122

