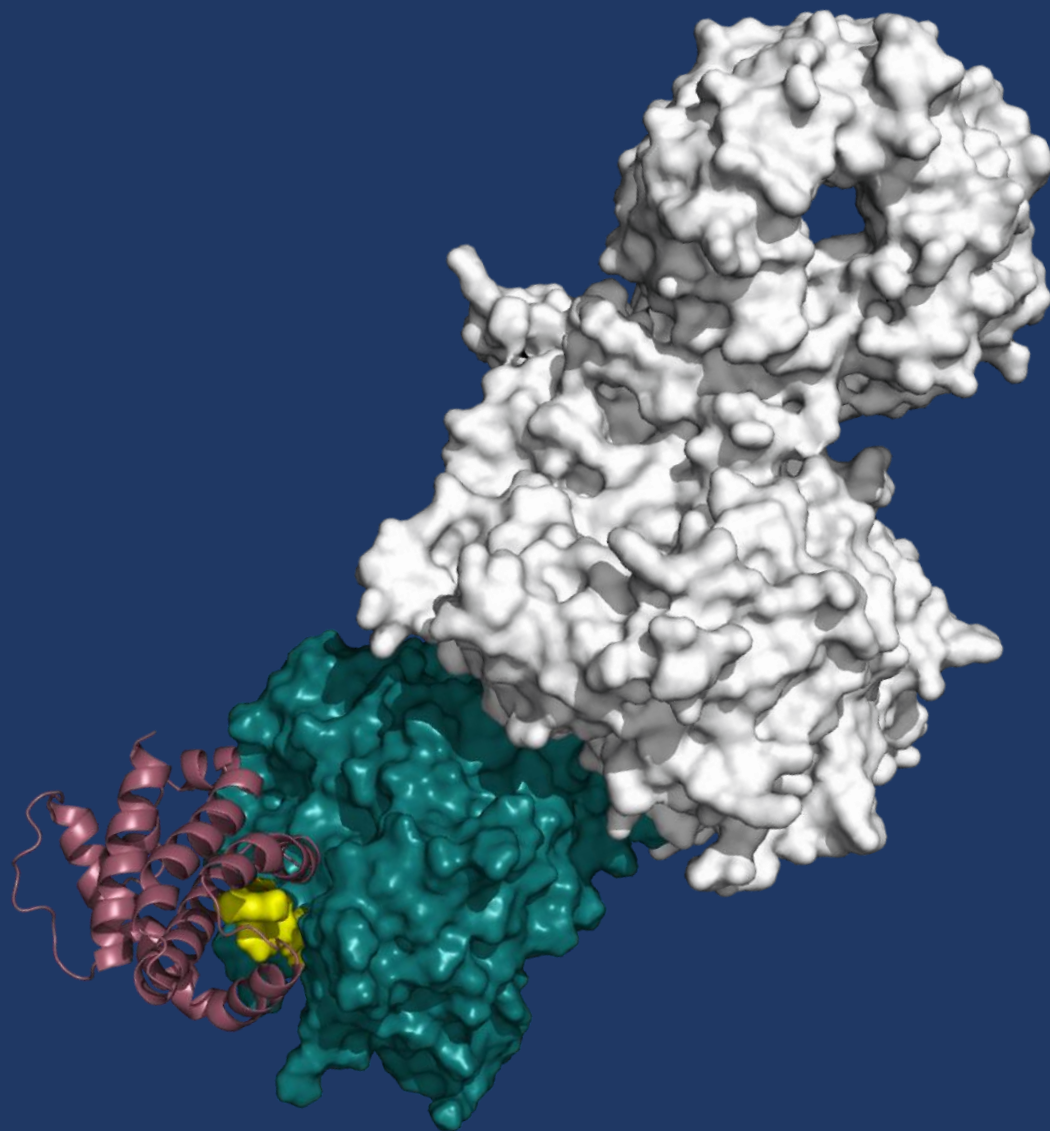


Captor Therapeutics
2024 results and update



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Summary

Four independent projects – potential for IND/CTA each year for the next 3 years

Projects of great importance – drugs for common diseases (e.g. hepatocellular carcinoma – ~1 000 000 deaths per year and ~1 000 000 new cases each year),

All first-in-class drug candidates to maximize commercialization potential and deal value

Low operating costs in discovery – competitive advantage over Western companies

Proximal value inflection points for CT-01 and CT-03 in Phase I clinical trials

Pipeline

Programme	Primary Target	Indications	Modality	Discovery	Preclinical*	IND Filing	Phase IA / IB	Phase II
CT-01	GSPTI NEK7	Hepatocellular carcinoma, Lung cancer, NET tumours	MG					
CT-02B	NEK7	Neuroinflammation (Parkinson's Disease, ALS, MS)	MG					
CT-02S	NEK7	Systemic autoimmunity (IBD, Gout, Dermatological diseases)	MG					
CT-03	MCL-1	Liquid & solid tumours	BIFD					
CT-05	PKCθ	Autoimmunity, Oncology, Transplantation, Metabolism	BIFD					
	New target projects	Autoimmunity, Cancer	MG BIFD					
	New E3 ligase degraders	Autoimmunity, Cancer	MG BIFD					

*CT-02B - Brain-penetrant
CT-02S - Systemic

*Preclinical stage include IND-enabling studies, **BIFD** – Bi-functional Degradere; **MG** – Molecular Glue

EIC Accelerator grant

Captor Therapeutics recommended for EIC Accelerator grant!

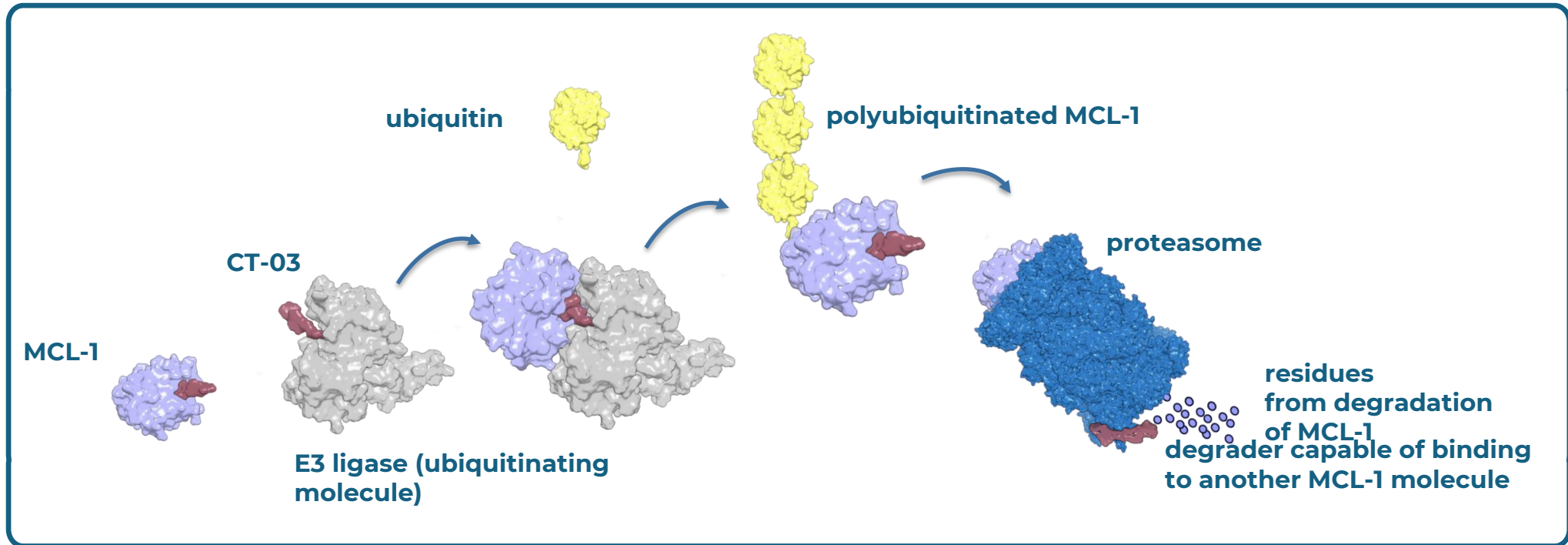
Captor Therapeutics has been recommended to receive a grant of up to **2.5 mln EUR** in a EU programme **EIC Accelerator!**

Captor Therapeutics is:

- **one of 71 companies chosen from 1,211 applicants (5.8% success rate)**
- **the only Polish company recommended**
- **one of 12 biotechnology companies – from ca. 1,000 biotechs in Europe.**

The grant is to be used for the development of the MCL-1 degrader (CT-03 project), a drug project for certain types of cancer, including blood, lung and breast cancer.

MoA of action of TPD-based drugs



Very low doses due to catalytic action (shown for CT-01, CT-02 or MonteRosa GSPT1 degrader)
Overcoming cancer resistance (shown for CT-03 or ARV-766 from Arvinas)
Targeting undrugged scaffolding proteins (shown for CT-02 or STAT6 degraders from Kymera)

CT-01

CT-01: Targeting HCC with molecular glue degrader of GSPT1 & NEK7

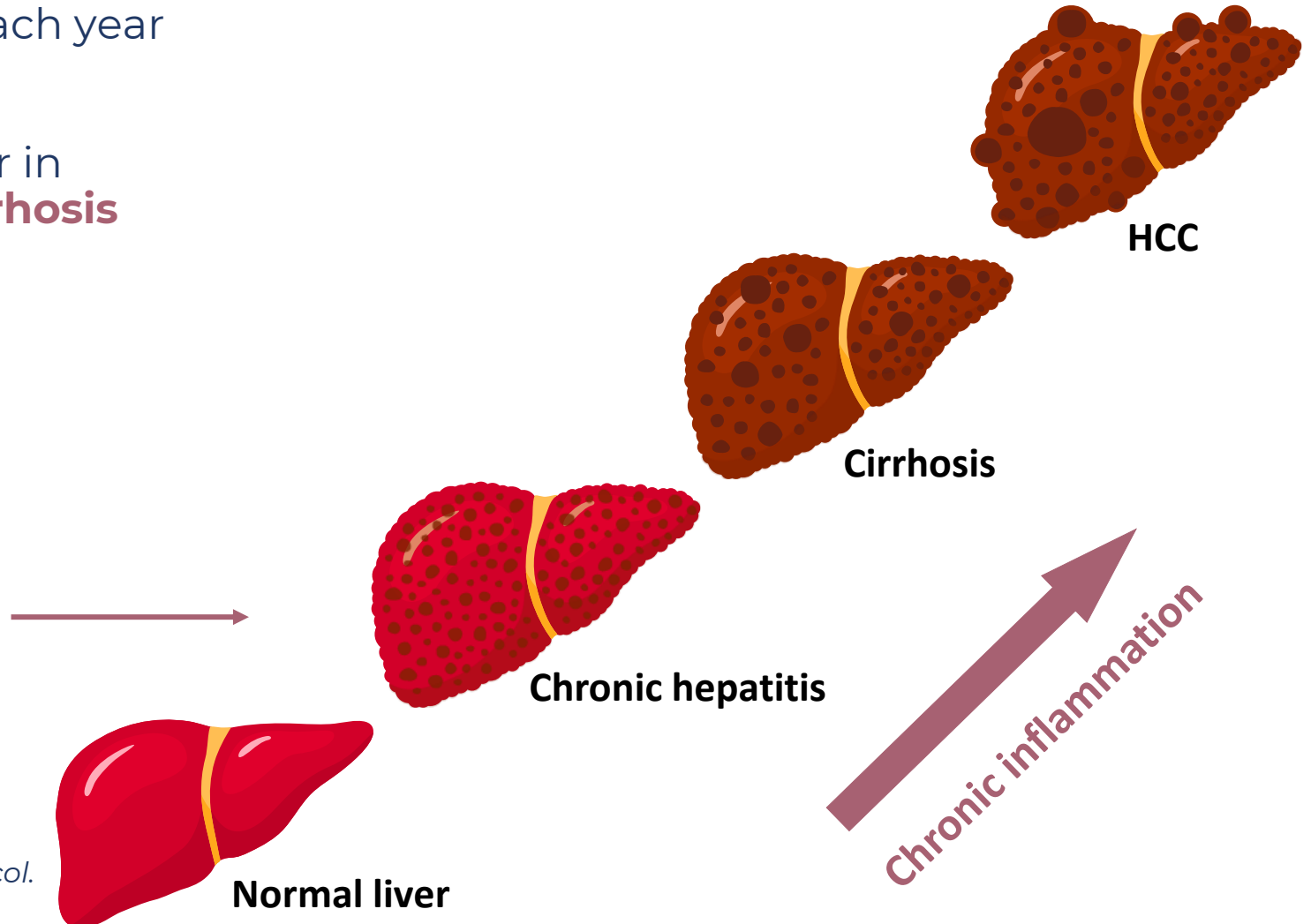
The project offers intervention in multiple indications:

- hepatocellular carcinoma
 - lung cancer
 - rare cancers
 - NET tumors
-
- phase I clinical trial in hepatocellular carcinoma is starting
 - the market of the treatment of HCC is currently worth ca. 3 bln USD with CAGR of 12%
 - Third most deadly cancer after lung cancer and CRC

Hepatocellular carcinoma: a brief overview

- Ca. 1 000 000 people diagnosed each year
- Ca. 1 000 000 deaths per year
- Risk factors: most HCC cases occur in patients with antecedent **liver cirrhosis** (all causes)

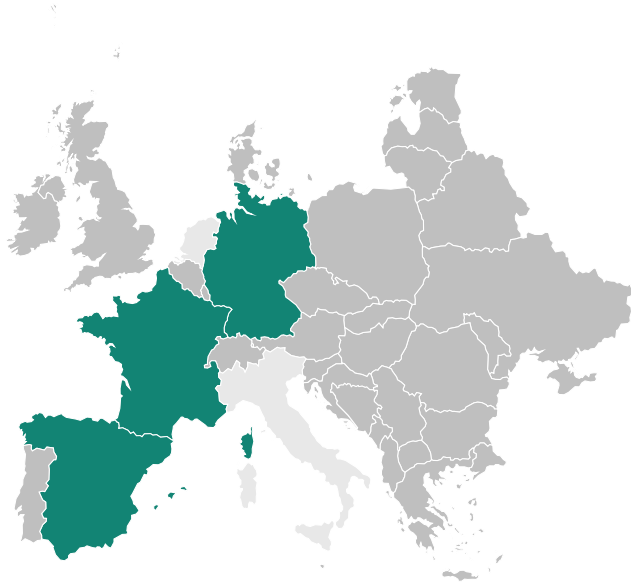
Alcoholic liver disease
Hepatitis B viral infection
Nonalcoholic steatohepatitis
Hepatitis C viral infection



ACS. Cancer Facts & Figures 2022. GBDLCC. JAMA Oncol. 2017;3:1683. Ramakrishna. Liver Cancer. 2013;2:367.

Slide credit: clinicaloptions.com

Study overview



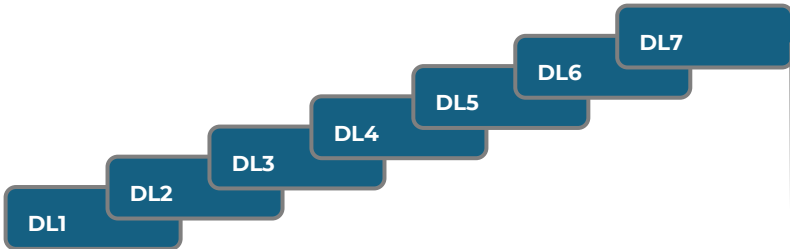
- Countries and number of sites:
 - France: 8 sites
 - Germany: 4 sites
 - Spain: 7 sites
- 177 of screened subjects globally (the full study)
- 141 of enrolled subjects globally (the full study)
- mBOIN design

- **Primary objectives:** safety, MTD, RP2D
- **Secondary objectives:** preliminary anti-tumor activity, PK profile of ABS-752 and the active metabolite, changes in safety biomarkers
- **Exploratory objectives:** the target engagement and PD profile (changes in GSPT1, NEK7, ISR gene expression), the association between the treatment, PK/PD profile and anti-tumor efficacy

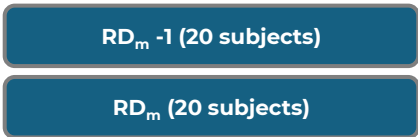
Study design

PART 1 – MONOTHERAPY – CT-01

Part 1a – DOSE ESCALATION

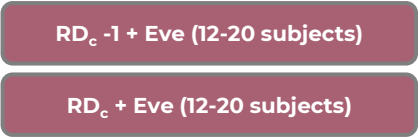


Part 1b – DOSE EXPANSION



1b i 2b – the dose expansion parts – are not obligatory.

DL1 & DL2: 1-3 patients
DL2-DL7: 3 patients in each cohort
After 28 days of treatment, 2 safety committees decide on escalation



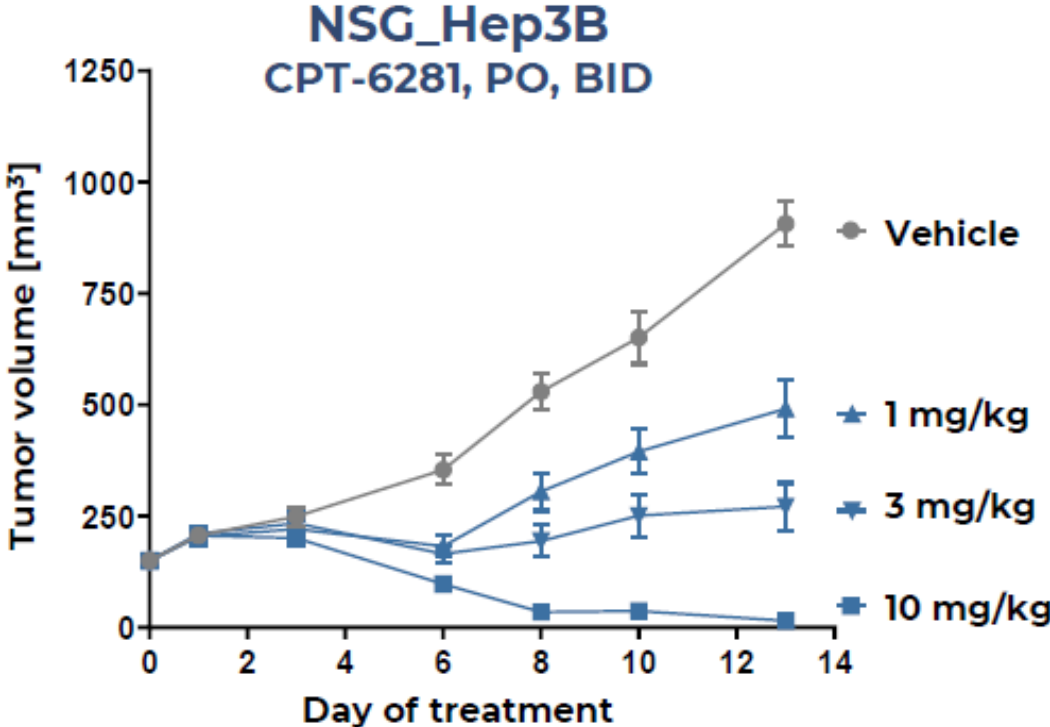
Part 2a – DOSE ESCALATION

Part 2b – DOSE EXPANSION

PART 2 – COMBOTHERAPY CT-01 + EVEROLIMUS

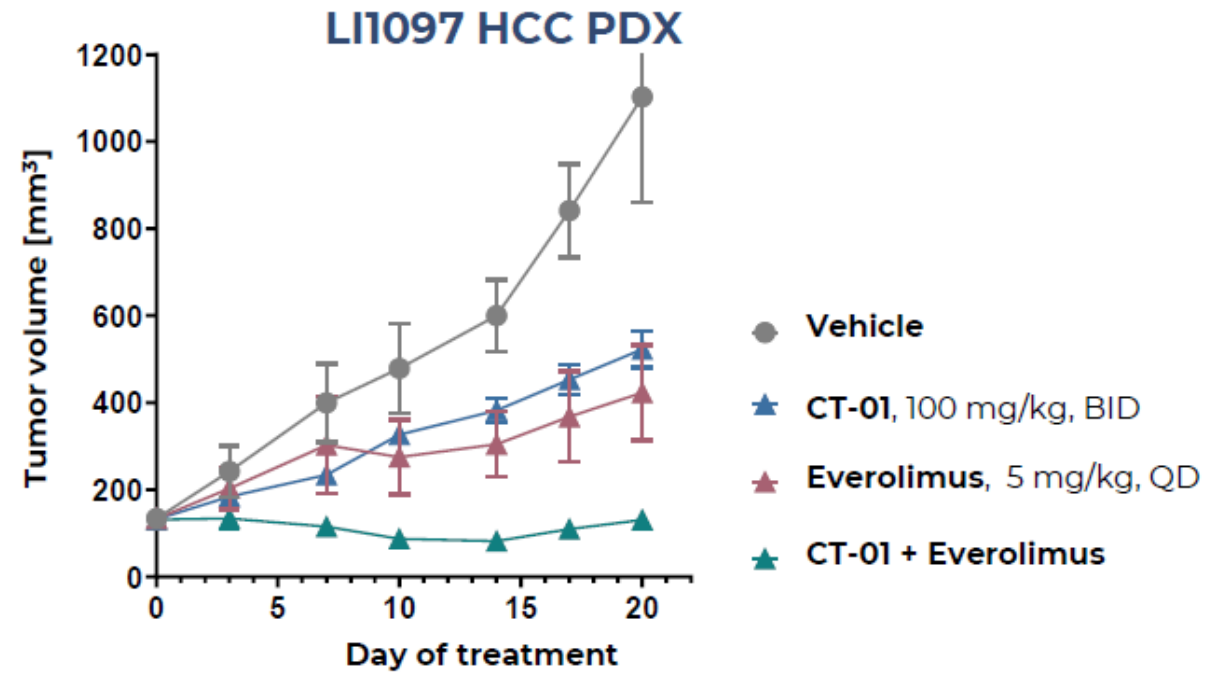
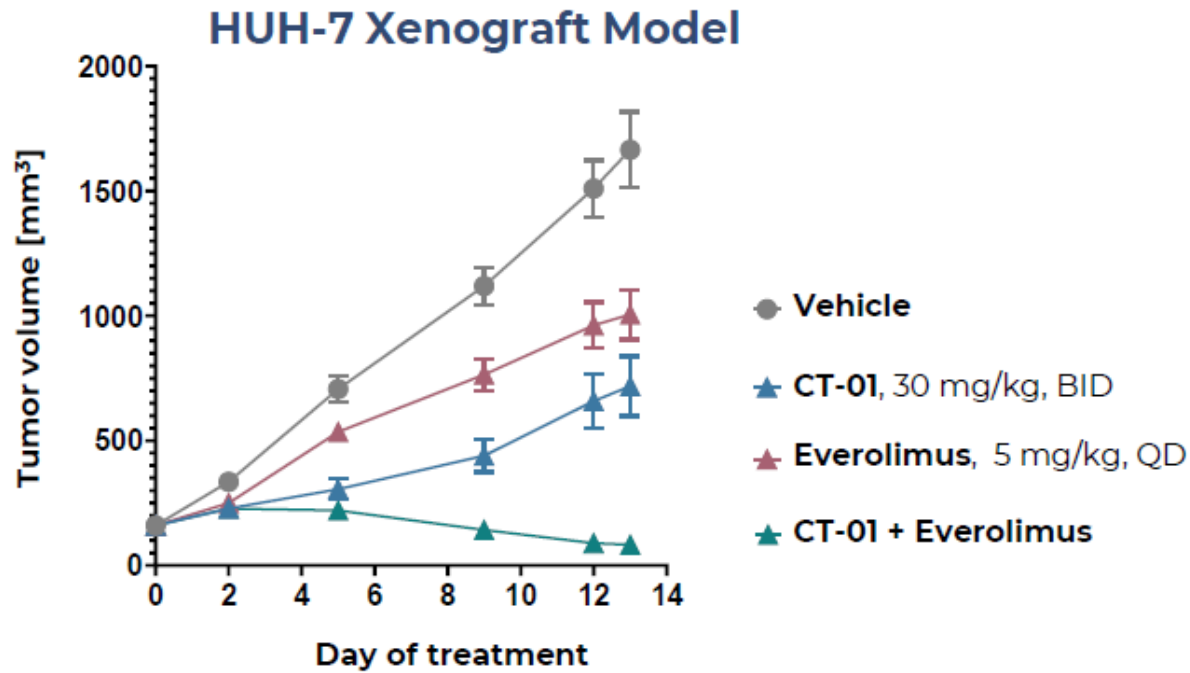
Preclinical data

CT-01 causes regression of hepatocellular carcinoma in mice (p.o., BID)



Preclinical data

CT-01 combined with Everolimus causes tumor regression even in models (types of liver cancer) that are difficult to drug



CT-01 in 2025

- Quick patient recruitment – hepatocellular carcinoma is a major disease, there is no effective cure (the drugs are sold for 3 billion USD per year in spite of poor effectiveness)
- CT-01 will be tested **as a second line of therapy**, which increases the chances of success
- We will learn about the interim results at the turn of the year 2025 and 2026

CT-03

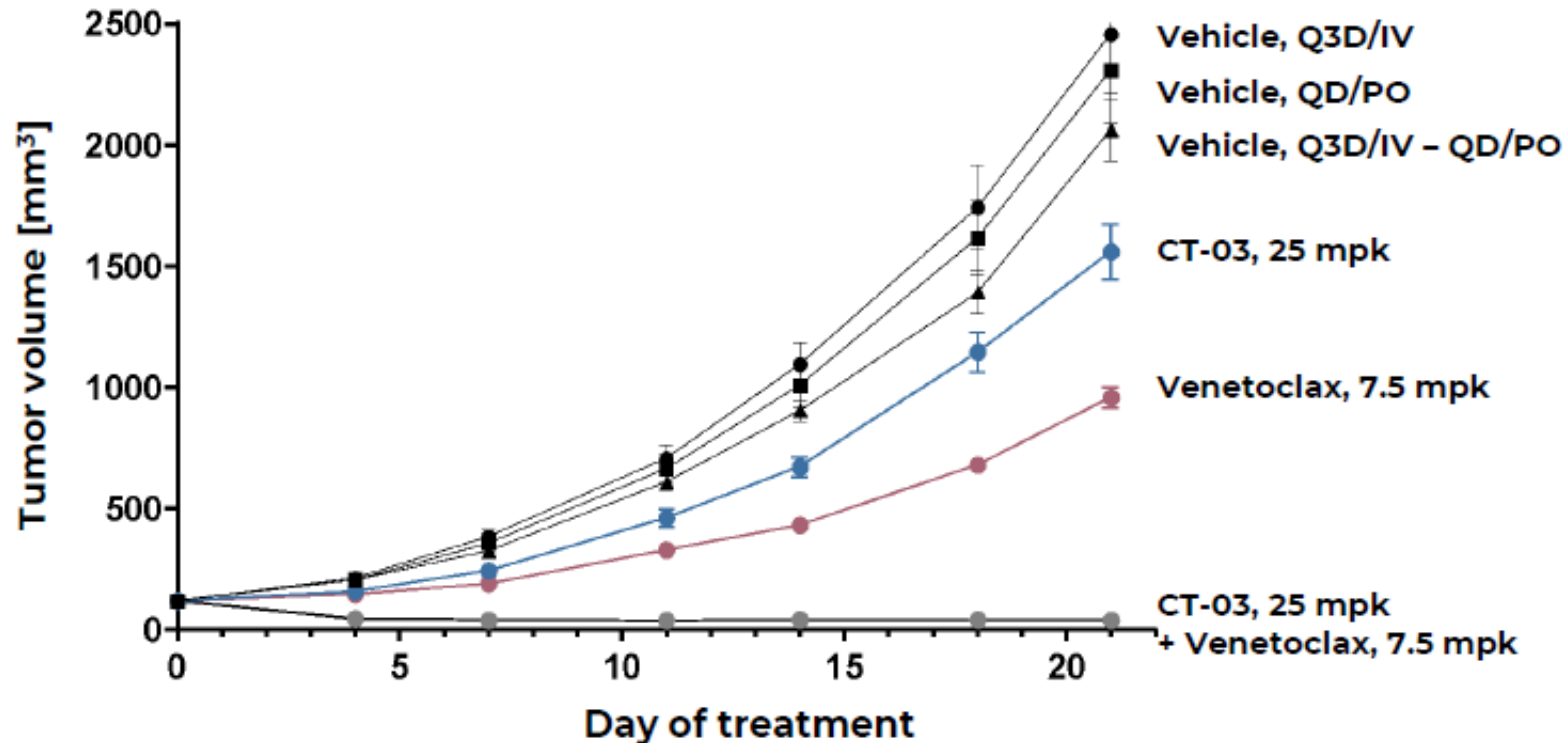
CT-03: Overcoming cancer resistance with MCL-1 degrader

The project offers therapeutic intervention in 30% of all cancers in which resistance is developed

- Liquid tumors (leukemia, lymphoma, myeloma)
- Solid tumors (breast and lung cancers, CRC, melanoma, rare cancers)
- intravenous administration
- first clinical trial planned in liquid tumors
- Inhibition of MCL-1 causes its persistent accumulation which causes side effects and precludes efficacy
- degradation of ca. 70% of MCL-1 kills cancer cells and is safe for other tissues including heart
- 13 out of 14 clinical trials of inhibitors have been stopped due to safety concerns and inadequate efficacy

Combo of CT-03 & venetoclax regresses aggressive AML tumors

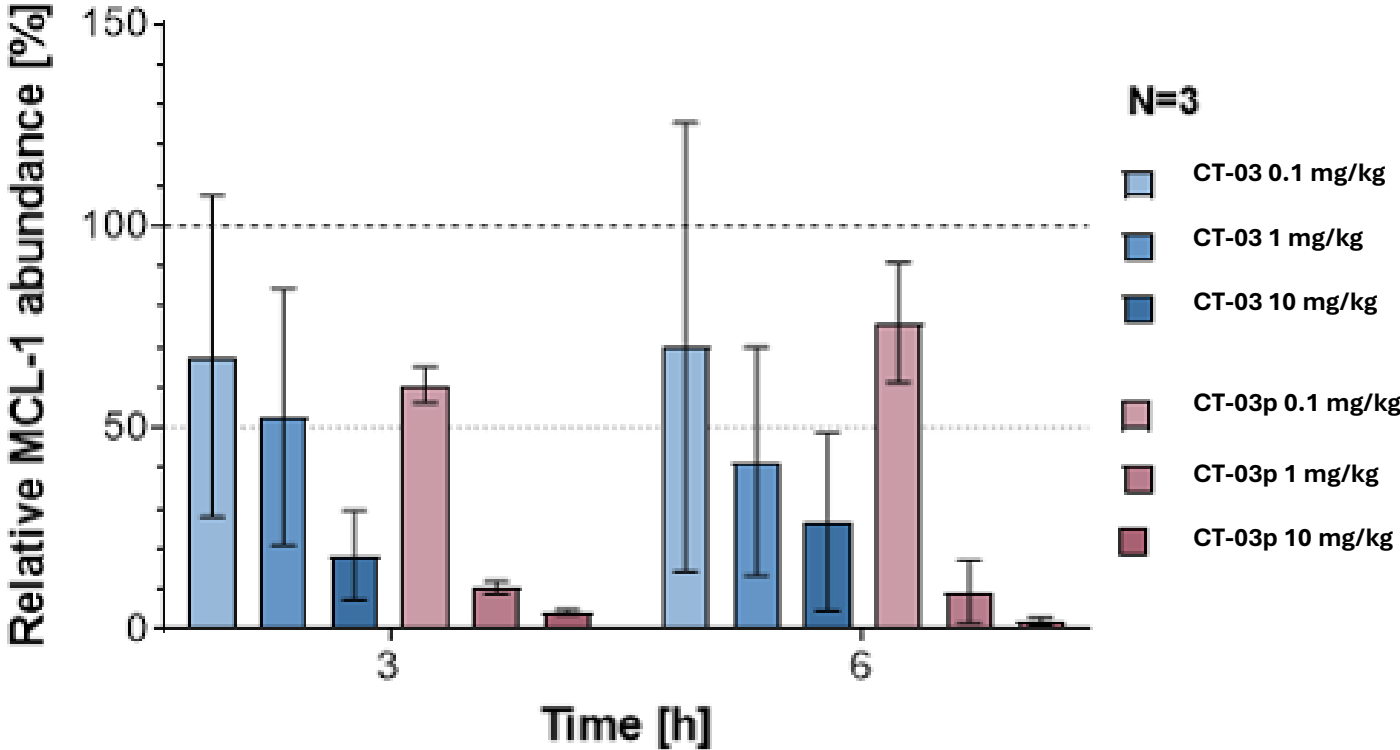
CT-03 combined with Venetoclax causes regression of AML in mice



CT-03: i.v. Q3D, Venetoclax: p.o. QD

Great degradation of MCL-1 & safety in non-human primates

CT-03(p) causes degradation of MCL-1 in non-human primates (bars show the percentage of remaining MCL-1, depending on the amount of drug and on the time since administering the drug)



CT-03: 2025 milestones

In the second half of 2025, a GLP-tox study will be completed

Completion of the Investigator's Brochure

Ongoing API production

Finances

Profit & loss statement

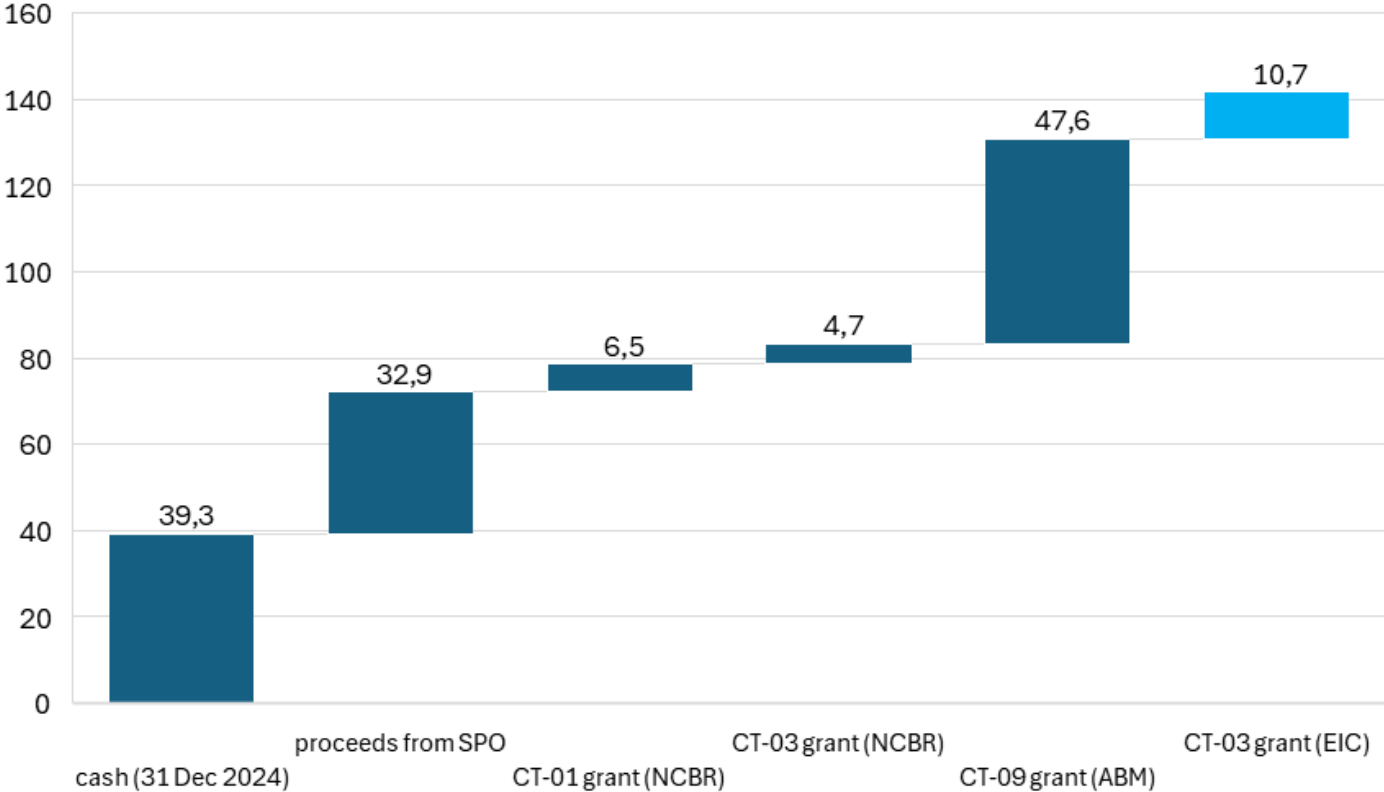
	01.01.2024
CONSOLIDATED STATEMENT OF PERFORMANCE AND OTHER COMPREHENSIVE INCOME	-
	31.12.2024
CONTINUING OPERATIONS	
Research and development income	15,825
Cost of services sold	5,230
Gross profit (loss) on sales	10,595
Subsidy (grant) revenues	5,842
Research and development expenditures	43,900
General administrative expenses	11,455
Other operating income	60
Other operating costs	109
Operating profit (loss)	-38,967
Interest revenues	1,044
Financial revenues other than interest	-
Financial expenses	503
Profit (loss) from continuing operations before tax	-38,426
Income tax	-
Net profit (loss) from continuing operations	-38,426
Net profit (loss) for period	-38,426

} Research collaboration with Ono Pharmaceutical

Operating expenses

	01.01.2024	01.01.2023	
OPERATING EXPENSES	-	-	
	31.12.2024	31.12.2023	
Depreciation	5,059	5,440	laboratory and office space
Consumption of materials and energy	3,732	5,237	mainly reagents used in laboratories
External services	29,766	56,217	clinical trial, preclinical trials
Taxes and charges	411	436	
Costs of employee benefits	21,110	25,213	
Other costs	507	779	
Total costs	60,585	93,322	

Financing



The EIC grant was awarded in February 2025. Captor applied for "blended financing": apart from 2,5 mln EUR in grant, Captor is eligible for an investment by a fund manager by European Investment Bank (EIB). EIB might invest in Captor's shares in an SPO, EIB's share in the SPO would not exceed 50%, and EIB's investment would not exceed 5,3 mln EUR.



Captor
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