

Change lives through living medicines

Corporate Overview

December 2023

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This presentation contains forward-looking statements that are based on management's beliefs and assumptions and on information currently available to management. All statements other than statements of historical facts contained in this presentation are forward-looking statements. Forward-looking statements include, but are not limited to, statements concerning: the therapeutic and curative potential of agenT-797 and iNKT cells, the mechanism of action, potency and safety of agenT-797 and iNKT cells, interim or top-line data, future development plans and timelines (including pre-clinical, clinical, regulatory, manufacturing and commercial), estimated treatment costs, our ability to continue to successfully manufacture iNKT cells (including capacity and scalability), and any other statements containing the words "may," "believes," "expects," "anticipates," "hopes," "intends," "plans," "forecasts," "estimates," "will" and similar expressions are intended to identify forward-looking statements. These forward-looking statements are subject to risks and uncertainties, including the factors described under the Risk Factors section of the most recent Form 10-K, Form 10-Q and the S-1 Registration Statement filed with the SEC. Actual results could differ materially and adversely from those anticipated or implied in the forward-looking statements. There are several important factors that could cause MiNK's actual results to differ materially from those indicated by such forward-looking statements, including a deterioration in MiNK's business or prospects; adverse developments in clinical development, including unexpected safety issues observed during a clinical trial; adverse developments in the U.S. or global capital markets, credit markets or economies generally; and changes in regulatory, social, and political conditions. For instance, actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including the uncertainties inherent in the initiation, enrollment and maintenance of patients, and completion of clinical trials, availability and timing of data from ongoing clinical trials, expectations for the timing and steps required in the regulatory review process, including our ability to obtain regulatory clearance to commence clinical trials, expectations for regulatory approvals, the impact of competitive products, our ability to enter into agreements with strategic partners. When evaluating MiNK's business and prospects, careful consideration should be given to these risks and uncertainties. These statements speak only as of the date of this presentation, and MiNK undertakes no obligation to update or revise these statements.



MINK THERAPEUTICS HIGHLIGHTS



Unique Cell Therapy Platform

Off-the-shelf, potent invariant natural killer T (iNKT) cells administered without lymphodepletion or host rejection



Robust Pipeline of Allogeneic Products

Fully internal capabilities to engineer CARs, TCRs, and bispecific engagers



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Clinically Advanced Programs

Ongoing clinical trials in oncology & immune-mediated diseases demonstrate clinical benefit with favorable safety

Proprietary Manufacturing

In-house, scalable, closed automated process to produce functional iNKTs at scale



INKT CELLS EMPLOY COMPLEMENTARY MECHANISMS TO TARGET CANCER





INKT CELLS ARE POWERING THE NEXT GENERATION OF CELL THERAPIES OVERCOMES PRACTICAL AND MECHANISTIC CHALLENGES OF OTHER CELL TYPES

	INKT Cells	Yố T Cells	Cells	NK Cells
Innate AND adaptive immune modulation			×	\bigotimes
Tumor homing and persistence	\checkmark	 	×	\mathbf{x}
No Lymphodepletion	\checkmark	?	×	?
Naturally suppresses GvHD	\checkmark	×	×	\mathbf{x}
No exhaustion	\checkmark	×	×	\mathbf{x}
Potential to multi-dose without lymphodepletion	\bigcirc	\mathbf{x}	×	\mathbf{x}



UNIQUE BENEFITS OF INKTS DEMONSTRATED IN THE CLINIC EASILY ADMINISTERED, SAFE AND DURABLE RESPONSES



No lymphodepletion prior to administration



Unprecedented persistence of up to 6 months independent of HLA matching



Long-term disease stabilization (6M+) in advanced solid tumors refractory to prior standard of care



First immune cell therapy to improve survival in patients with respiratory distress syndrome (>70% vs 10-39% control)



Excellent safety profile No GvHD, CRS or ICANS



INKT CELLS CAN BE ARMORED TO ENHANCE TUMOR KILLING

INKT

Cells

CAR/TCR Engineering

- Proprietary discovery platforms without additional gene edits
- Targeted tumor cell killing

Cytokine Engineering

- In vivo expansion
- Improved persistence

CD3/ other

Bispecific Engagers

Enhanced activity via synergies with

- CD3 based engagers
- Proprietary iNKT engagers



INNOVATIVE PIPELINE WITH NATIVE AND ENGINEERED INKTS

Product	Target	Indication and Approach	Preclinical	IND-enabling	Phase 1/2	Latest & Upcoming Milestones
		Solid tumors ± anti-PD1		_		• Updated data at SITC 2023
agenT-797	enT-797 Native iNKT	Gastric cancer + SOC ± BOT/BAL ¹				Trial initiation 2023
		Acute Respiratory Distress Syndrome (ARDS)				Updated data at ATS 2023
MiNK-215	FAP CAR	Solid tumors				Potential IND filing 2024Updated data at ASGCT 2023
MiNK-413	BCMA CAR	Multiple myeloma				IND ready 2024
MiNK-PRAME-TCR	PRAME TCR	Solid tumors				Candidate nomination 2024
MiNK-Engagers	Undisclosed	Solid tumors				Candidate nomination 2024



MINK THERAPEUTICS HAS ROBUST DISCOVERY PLATFORMS FOR CAR AND TCR





RAPID CLINICAL DEVELOPMENT THROUGH PARTNERSHIPS HIGH IMPACT COLLABORATIONS AND NON-DILUTIVE FINANCING



PRINCIPAL INVESTIGATOR:Dr. Terese C. HammondPulmonology and Critical Care



Discovery: novel TCR targets





PRINCIPAL INVESTIGATOR:Dr. Yelena JanjigianChief Gastrointestinal Oncology

Phase 2: agenT-797 + chemotherapy ± PD-1/CTLA-4 in Gastric Cancer agenus

Clinical and Research: agenT-797 combination with immune checkpoint inhibitors



MINK MANUFACTURING PROCESS TO ACHIEVE ≤\$10K PER DOSE OFF-THE-SHELF, COST-EFFECTIVE AND SCALABLE TO >5000 DOSES

manufacturing



closed process



agenT-797

Clinical data in solid tumors



AGENT-797 SHOWS RESPONSES AND DURABLE STABILIZATION SINGLE DOSE WITHOUT LYMPHODEPLETION IN HEAVILY PRE-TREATED PATIENTS



3L+ Solid Tumors			
	Monotherapy (n=28)	Combination (n=6)	
BOR , n (%)			
Partial Response	0 (0%)	1 (17%)	
Stable Disease	7 (25%)	3 (50%)	
DCR [CR + PR + SD], n (%)	7 (25%)	4 (67%)	
Median PFS (months, 95% CI)	2.3 (1.6, 3.0)	5.5 (1.8, 10.3)	
Median follow-up (months)	6.0	10.3	



PARTIAL RESPONSE IN PD-1 REFRACTORY GASTRIC CANCER 42% TARGET LESION REDUCTION AT 9 MONTHS; RESPONSE ONGOING

Gastric Cancer Patient		
Patient Characteristics	75-year-old maleFailed prior PD-1 therapies	
Prior Therapies	 Pembrolizumab PD FOLFOX + nivolumab + oxaliplatin SD 	
Treatment	 Single dose of agenT-797 + nivolumab (200mg) DL1: 4.3 x 10⁶ cells/kg 	
Response	 33% target reduction at 6 months 42% target reduction at 9 months PFS: 10M+ 	

Baseline



Month 3



Month 6







AGENT-797: PROLONGED PERIPHERAL PERSISTENCE AND TH1 CYTOKINE PROFILE ENHANCED IFNY AND TNFα AND UP TO 6 MONTHS PERSISTENCE









AGENT-797: PROMOTES IMMUNE CELL INFILTRATION IN TUMOR INCREASED CD3, CD4, CD8 AND NK CELLS

Increased T Cell Infiltration (mIF)



Increased CD8 and NK cell Infiltration (RNA-Seq)





Source: <u>Purbhoo MA et al, SITC 2023 Poster 735</u> ssGSEA: single sample gene set enrichment analysis from RNAseq

AGENT-797 IS WELL-TOLERATED NO DLTS AND FEW RELATED ADVERSE EVENTS

	Total	agenT-797 MonoTx		agenT-797 + anti-PD-1	
Dose level	N = 34	DL1: 4.3 x 10⁶ cells/kg N = 8	DL2: 1.4 x 10⁷ cells/kg N = 20	DL1: 4.3 x 10⁶ cells/kg N = 3	DL2: 1.4 x 10 ⁷ cells/kg N = 3
AE, n (%)	32 (94)	8 (100)	18 (90)	3 (100)	3 (100)
Any AE of grade ≥ 3	19 (56)	7 (88)	11 (55)	0	1 (33)
	3 (9)	0	2 (10)	0	1 (33)
	1 (3)	0	0	0	1 (33)
TRAE, n (%)	9 (27)	3 (38)	2 (10)	2 (67)	2 (67)
Any TRAE of grade \geq 3	1 (3)	1 (13)	0	0	0
Any TRAE leading to discontinuation	0	0	0	0	0
Any TRAE leading to dose interruption	0	0	0	0	0
Any TRAE leading to death	0	0	0	0	0
TRAE by System Organ Class, n (%)					
General (Fatigue, Chills)	5 (15)	1 (13)	1 (5)	1 (33)	2 (67)
Skin (Pruritus, Odor)	2 (6)	1 (13)	0	1 (33)	0
Immune system (CRS)	1 (3)	0	1 (5)	0	0
Nervous system (Dysgeusia)	1 (3)	0	0	0	1 (33)
Psychiatric (Insomnia)	1 (3)	0	0	1 (33)	0
Respiratory (Dyspnoea)	1 (3)	0	1 (5)	0	0
Blood and lymphatic system (Anemia)	1 (3)	1 (13)	0	0	0



agenT-797

Clinical data in immune dysfunction



INKT CELLS PLAY A PROTECTIVE ROLE IN INFECTION AND INFLAMMATION





Infections

- Bacterial and viral infections
- Promotes CD8+ cytotoxic response
- Protects against tissue damage

Autoimmune Diseases

- Lupus, Multiple Sclerosis, Arthritis, Diabetes
- Induction of suppressive cells
- Modulating cytokine and Th profile

Pulmonary Fibrosis & Lung Dysfunction

- Immune or non-immune -mediated
- Suppresses pro-fibrotic factors such as TGFB
- Modulates macrophage polarization



AGENT-797 IMPROVES SURVIVAL AND LUNG FUNCTION IN SEVERE CARDS AGENT-797 TREATMENT: 30-DAY SURVIVAL RATE OF 70% (VS 10% SITE-BASED CONTROL)



Increased Survival vs Case control

Reduced Incidence of Secondary Infections, including Pneumonia

	Dose Level 1 (n=3)	Dose Level 2 (n=4)	Dose Level 3 (n=13)
	n (%)	n (%)	n (%)
Pneumonia	2 (67)	3 (75)	2 (15)
Bacteraemia	2 (67)	0	1 (8)
Urinary tract infection	0	3 (75)	1 (8)
Fungaemia	0	1 (25)	1 (8)
Cytomegalovirus viraemia	0	0	1 (8)
Lung abscess	1 (33)	0	0
Pneumonia klebsiella	0	1 (25)	0
Sepsis	1 (33)	0	0
Septic shock	0	0	1 (8)
Upper respiratory tract infection	1 (33)	0	0



Source: <u>Purbhoo MA et al, SITC 2022, Poster 649</u> CARDS: COVID-19 Associated Acute Respiratory Distress Syndrome

AGENT-797 IS WELL TOLERATED IN SEVERE CARDS PATIENTS

No Significant Adverse Events

	agenT-797 ± ECMO (n=20)	agenT-797 + ECMO (n=4)
	n (%)	n (%)
AE	20 (100)	4 (100)
Any AE of grade ≥ 3	19 (95)	4 (100)
TRAE	5 (25)	0 (0)
Any TRAE of grade \geq 3	1 (5)	0
Any TRAE leading to discontinuation	0	0
Any TRAE leading to dose interruption	0	0
Any TRAE leading to death	0	0

No Cytokine Release Syndrome





; Source: <u>Hammond TC et al, ATS 2023 Poster P1172</u> CARDS: Covid-related Acute Respiratory Distress Syndrome; Dashed line indicates upper range limit in healthy people

SIGNIFICANT IMPROVEMENT NOTED IN CARBAPENEM-RESISTANT PNEUMONIA PATIENT CLEARED LUNG INFECTION AND STOPPED VV-ECMO 13 DAYS POST AGENT-797 INFUSION

Carbapenem-resistant Severe ARDS Patient

Patient Characteristics	 21-year-old male Severe ARDS Carbapenem resistant Pseudomonal Pneumonia on VV-ECMO
Treatment	 Single dose of agenT-797 DL2: 1 x 10⁹ cells
Response	Cleared InfectionStopped ECMO 13 days post-infusion

Pre-infusion



Post agenT-797 infusion





agenT-797

Preclinical data on synergy with CD3 engagers



LIMITATIONS OF CURRENT T CELL ENGAGERS





INKTS POTENTIATE A SUSTAINED IMMUNE RESPONSE





INKTS AND CD3 ENGAGER SHOW 2X TUMOR KILLING INKT CELLS WILL SYNERGIZE WITH PATIENTS' ENDOGENOUS IMMUNE CELLS



- PBMCs and T cells mimic host immune system
- Cytotoxicity normalized to CD3 engager activity with PBMCs or T cells aligning with current therapy
- CD3 engager + allogeneic iNKT cells (as low as 0.2 X 10⁵) boost cytotoxicity >2 fold



MiNK-215

Preclinical data from Engineered FAP-CAR-iNKT cells



TARGETING TUMOR-PROMOTING STROMAL CELLS IN SOLID TUMORS FAP^{HIGH} CAFS OCCUR IN >90% OF EPITHELIAL-DERIVED TUMORS

- FAP^{high} CAFs are highly immune-suppressive and tumor-promoting in the TME
- FAP^{high} CAFs secrete a variety of cytokines to modulate immune activity
- Targeting FAP^{high} CAFs may result in tumor cell death in highly stromagenic cancers without IO success





MINK FAP-CAR-INKT PROMOTES SURVIVAL IN FAP+ TUMOR-BEARING MICE SUPERIOR ANTI-TUMOR ACTIVITY TO CLINICAL REFERENCE CAR (SIBROTUZUMAB)





NSCLC MOUSE ORTHOTOPIC MODEL RECAPITULATES TUMOR STROMA IN VIVO ASSESSMENT OF TARGETING FAP+ CAFS





Source: <u>Boi S et al, ASGCT 2023, Poster 1488</u> Orthotopic lung cancer model with A-549 expressing NY-ESO-1 antigen in immunodeficient mice

MINK-215 HALTS TUMOR GROWTH AND IMPROVES SURVIVAL IN MICE SYNERGIZES WITH HOST T CELLS FOR ENHANCED ACTIVITY





Source: <u>Boi S et al, ASGCT 2023, Poster 1488</u> Orthotopic lung cancer model with A-549 expressing NY-ESO-1 antigen in immunodeficient mice

MINK-215 PROMOTES T CELL INFILTRATION & CYTOKINE SECRETION DECREASES FAP EXPRESSION IN TUMOR STROMA





Source: <u>Boi S et al, ASGCT 2023, Poster 1488, Boi S et al, CICON 2023, Poster</u> Orthotopic lung cancer model with A-549 expressing NY-ESO-1 antigen in immunodeficient mice

MiNK-413

Preclinical data from Engineered BCMA-CAR-iNKT cells



MINK-413 DELAYED TUMOR ENGRAFTMENT IN XENOGRAFT MICE REDUCED TUMOR BURDEN AND IMPROVED SURVIVAL IN MINK-413 TREATED MICE



BROAD TARGET APPLICATION IN ONCOLOGY AND INFLAMMATION





Summary & Milestones



MINK IS PIONEERING ALLOGENEIC INKT CELL THERAPIES FOR ONCOLOGY





NEAR TERM-MILESTONES



