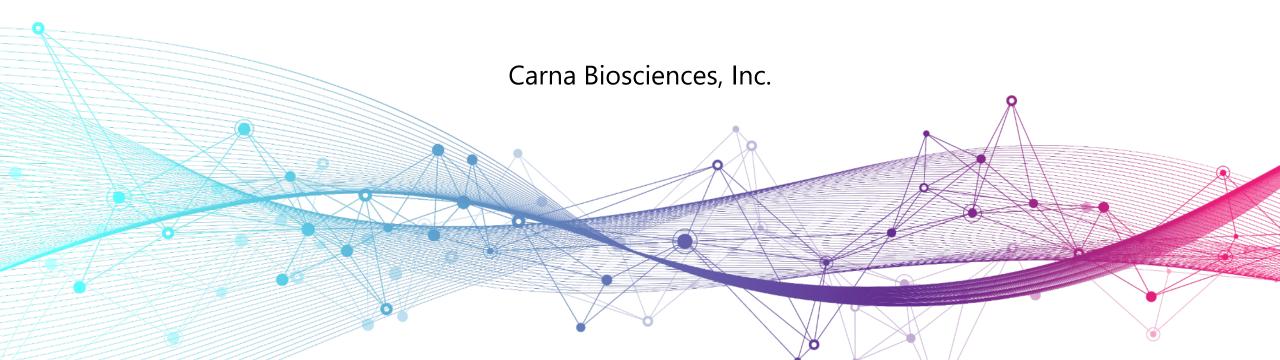


Financial Results FY2023

(January to December 2023)





AGENDA

FY2023 Key Highlights

Updates on Pipelines in Clinical Development

3

2

Updates on Licensed Pipelines



Drug Discovery Support Business



FY2023 Results



Business Plan for FY2024



Appendix





BTK inhibitor AS-1763

- The first patient was dosed in Phase 1b study in the U.S in August 2023. Multi-center clinical study Study Lead : Dr. Nitin Jain, Department of Leukemia, University of Texas MD Anderson Cancer Center.
- The Phase 1b study design and new preclinical data were presented at the 65th American Society of Hematology (ASH) Annual Meeting & Exposition in December 2023.
- Safe and well tolerated at the first two dose levels, and currently treating patients at dose level 3.

DGKα Inhibitor GS-9911 (partnered with Gilead)

- Phase 1 study in patients with solid tumors was initiated.
- In December 2023, the milestone payment was triggered by the initiation of Phase 1 clinical trials.

FY2023 Key Highlights



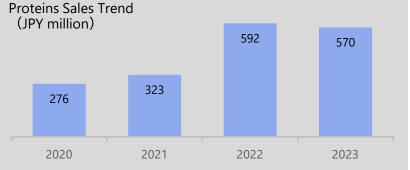
BTK inhibitor sofnobrutinib (AS-0871)

- Clinical Study Report (CSR) of the MAD study was finalized in November 2023. The safety, tolerability, pharmacokinetics (PK) and pharmacodynamics (PD) were evaluated.
- The results from the Phase 1 studies support to advance sofnobrutinib into Phase 2 clinical development.

sofnobrutinib : International Nonproprietary Name (INN) for AS-0871 MAD study : Multiple Ascending Dose study

Drug Discovery Support Business (ddSP)

- Sales were JPY 918 mn, exceeding FY2023 plan of JPY902 mn.
- Sales of kinase proteins remained strong, exceeding JPY 500 mn for the two consecutive years.



4



Updates on Pipelines in Clinical Development

AS-1763



sofnobrutinib (AS-0871)



International Nonproprietary Name (INN) : sofnobrutinib, Code name : AS-0871 International Nonproprietary Name (INN) : monzosertib, Code name : AS-0141

Pipelines in Clinical Development



Compound	Target	Indication	Status
AS-1763	BTK	Blood Cancer	 Phase 1 SAD and BA part in healthy volunteers were completed in the Netherlands. Phase 1b trial is ongoing in previously treated CLL/SLL and B-cell NHL patients in the U.S., and currently at third dose level (Jan, 2024). Multi-center clinical study Study Lead : Dr. Nitin Jain, Department of Leukemia, University of Texas MD Anderson Cancer Center.
sofnobrutinib (AS-0871)	BTK	Immune-inflammatory diseases	 Completed Phase 1 clinical trials (SAD/MAD) in healthy volunteers. Received the final Clinical Study Report (CSR) for the Phase 1 MAD study in November 2023. Demonstrated a favorable safety and tolerability profile as well as a promising PK/PD profile in the MAD study.
monzosertib (AS-0141)	CDC7/ ASK	Cancer	 Phase 1 study in cancer patients is in progress in Japan. Dose escalation part is ongoing. Clinical trial site : National Cancer Center Hospital and National Cancer Center Hospital East

SAD : Single Ascending Dose MAD : Multiple Ascending Dose BA : Bioavailability





Refer to P.46-P.53 for more information

Mechanism/ Indication **Orally available** small molecule inhibitor of Bruton's Tyrosine Kinase (BTK) targeting B cell malignancies

To overcome drug resistance

AS-1763 is a **non-covalent inhibitor** that reversibly inhibits BTK, **having a potential to be effective for patients who have developed resistance to the existing BTK inhibitors**.

To minimize a risk of side effects AS-1763 is designed to selectively inhibit BTK **to reduce a risk of potential side effects.**



AS-1763 : Targeting Blood Cancer

- Small molecule BTK inhibitor
- Non-covalent/reversible
- High kinase selectivity
- Pan-mutant BTK inhibitor
- Orally available

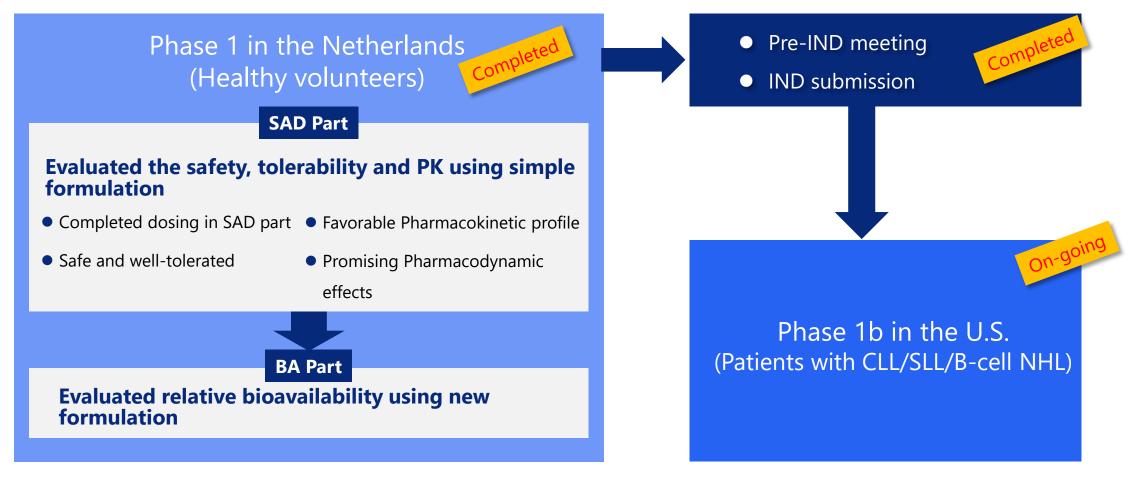
- Active against covalent/non-covalent BTK inhibitorresistant mutations found in patients (C481x, T474x, T316A, L528x)
- The first patient was dosed in August 2023 in Ph 1b study in the U.S.

2021	1		2022	2023	2025	>
	Phase	1			Phase 1b	Phase 2
	SAD Part • Healthy volunteers • Simple formulation (Completed)	BA Part • New formulation (Completed)		US IND (Completed)	<u>B cell malignancies</u> • Dose escalation part (Monotherapy) • Dose expansion part (Monotherapy) (In progress)	 <u>B cell malignancies</u> Ibrutinib naïve patients (Monotherapy) Patients who have failed or intolerant to standard treatment including cBTKi/nc BTKi inhibitors (Monotherapy)

IND application: Investigational New Drug application FPI: First Patient In SAD: Single Ascending Dose BA: Bioavailability B-cell malignancies: Chronic Lymphocytic Leukemia (CLL), Small Lymphocytic Lymphoma (SLL), and B-cell non-Hodgkin Lymphoma (B-cell NHL), etc. cBTKi: covalent BTK inhibitor ncBTKi: noncovalent BTK inhibitor

AS-1763: Phase 1 Clinical Trial in Progress





The first patient was dosed in Phase 1b study in August 2023.

AS-1763: Ph I Clinical Trial in Healthy Volunteers



Ref. P.49-P.52

Objectives of the study

A single dose of AS-1763 was administered orally to healthy volunteers to evaluate:

- plasma concentration of AS-1763
- safety assessments (clinical laboratory, ECGs, or vital signs, etc.)
- inhibitory potency on B cell activation

Result of the study

After a single-dose administration of 5 mg, 25 mg, 100 mg, 300 mg, 500 mg, and 600 mg of AS-1763:

- plasma concentrations of AS-1763 were increased in a dose dependent manner
- no clinically meaningful issues were reported in all safety assessments
- dose-dependent inhibition in B cell activation assays was observed

New tablet formulation for Phase 1b study

Relative oral bioavailability was evaluated after administering newly developed tablet formulation containing 100 mg of AS-1763 to healthy volunteers.

• the new tablet formulation demonstrated good oral bioavailability, supporting that the tablet formulation can be used for Phase 1b study.





Multi-center clinical study Study Lead : Dr. Nitin Jain, Department of Leukemia, University of Texas MD Anderson Cancer Center.

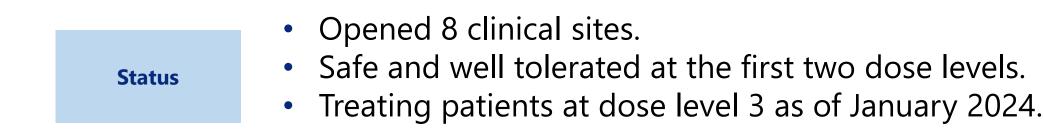
Phase 1b dose escalation part was initiated in the U.S.

Indication

Clinical trails in

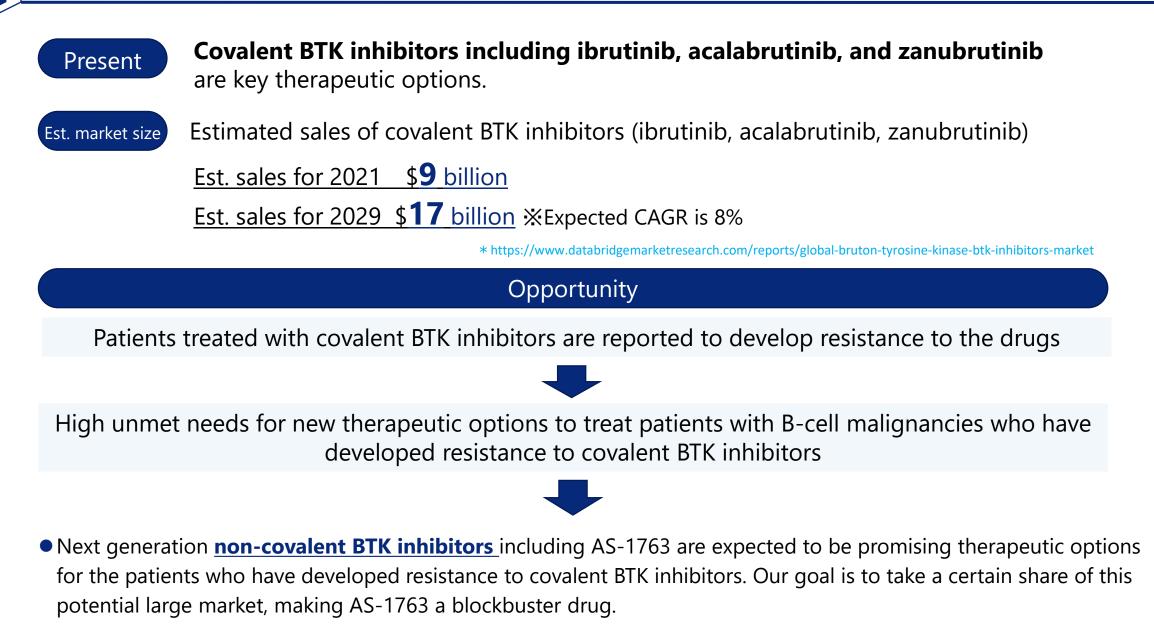
progress

Patients with CLL(Chronic Lymphocytic Leukemia), SLL(Small Lymphocytic Leukemia), and B-cell NHL(B-cell non-Hodgkin Lymphoma).



AS-1763: Potential Market Size (B-cell Malignancies)







Competitors: other non-covalent BTK inhibitors in clinical development

Compound	Company	Development Phase
pirtobrutinib (LOXO-305)	Lilly (Loxo)	Approved/P3
nemtabrutinib (ARQ 531)	Merck (ArQule)	P3
TT-01488	TransThera	P1
HMPL-760	HutchMed	P1

- FDA granted an accelerated approval to pirtobrutinib, the most advanced competitor to AS-1763, in the U.S early 2023.
- Focused differentiation strategy from pirtobrutinib is the key to the success of AS-1763.
- In preclinical studies, AS-1763 demonstrated to be effective for mutant BTKs that confer resistance to pirtobrutinib in addition to ibrutinib.





Ref. P.54-P.59

Mechanism/ Indication Sofnobrutinib is an **orally available** Bruton's Tyrosine Kinase (BTK) inhibitor to treat autoimmune diseases by inhibiting activation of immune cells such as B cells, macrophages, and mast cells.

To minimize a risk of side effects Sofnobrutinib is designed to selectively inhibit BTK to reduce a risk of potential side effects.

Characteristics

Sofnobrutinib is a **non-covalent BTK inhibitor** that reversibly inhibits BTKs to reduce safety concerns associated with covalent inhibitors.

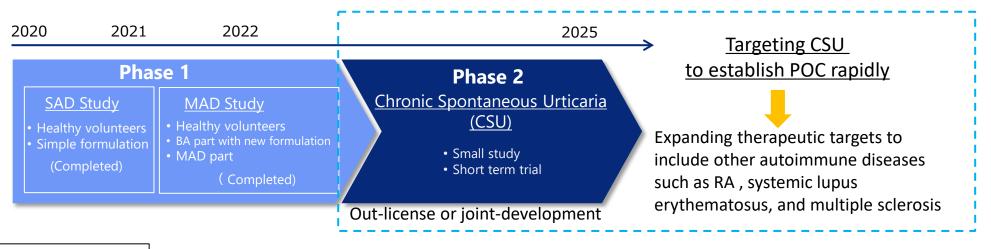
Sofnobrutinib (AS-0871): Non-covalent BTK Inhibitor



Sofnobrutinib (AS-0871) : Targeting Immune-inflammatory diseases

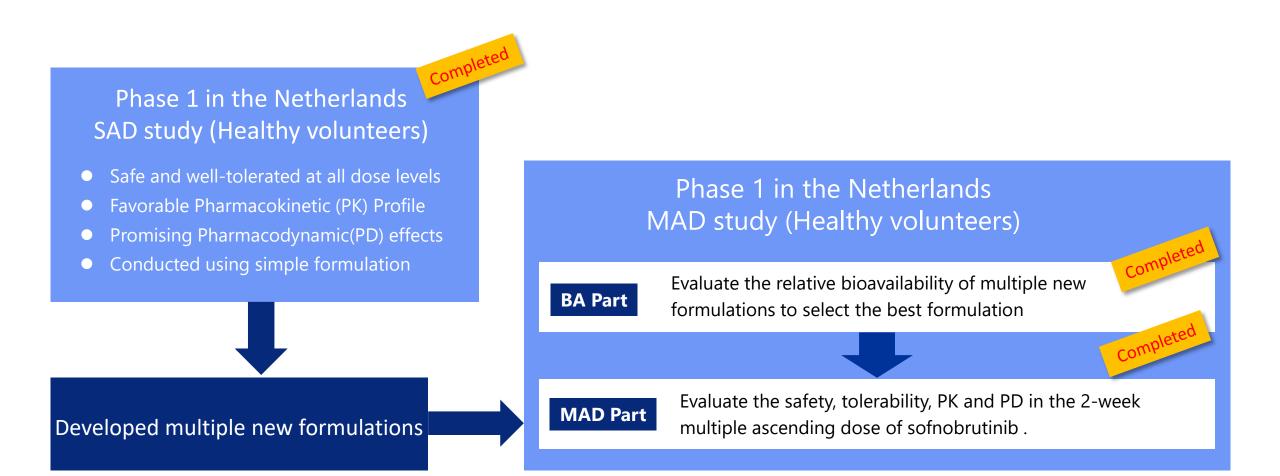
- Small molecule BTK inhibitor
- Non-covalent/reversible
- High kinase selectivity
- Orally available

- Demonstrated significant efficacies in arthritis models
- Showed efficacy in systemic lupus erythematosus model
- Phase 1 MAD study was completed
- Find a partner to conduct further development



SAD: Single Ascending Dose MAD: Multiple Ascending Dose BA: Bioavailability POC: Proof of Concept

Sofnobrutinib (AS-0871): Phase 1 Clinical Trial in Progress



ARNA BIOSCIEI



Ref. P.56-P.58

Objectives of Single Ascending Dose (SAD) study

A single dose of Sofnobrutinib was administered orally to healthy volunteers to evaluate:

- plasma concentration of sofnobrutinib
- safety assessments (clinical laboratory, ECGs, or vital signs, etc.)
- inhibitory potency on B cell and basophil activation

Result of SAD study

After a single-dose administration of 5 mg, 25 mg, 100 mg, 300 mg, 600 mg, and 900 mg of sofnobrutinib:

- plasma concentration of AS-0871 were increased in a dose dependent manner.
- no clinically meaningful issues were reported in all safety assessments.
- sufficient inhibition of B cell and basophil activations was observed at 100 mg or above.

New formulations for Multiple Ascending Dose (MAD) study

Plasma concentration was evaluated after administering newly developed capsule formulation and tablet formulation containing 50 mg of sofnobrutinib to healthy volunteers:

 the new tablet formulation was shown to be safe and demonstrated good oral bioavailability, and the tablet formulation was selected for the MAD part.



Ref. P.59

Multiple Ascending Dose (MAD) study MAD part design

- Double blinded, placebo-controlled, randomized multiple ascending dose study in healthy volunteers
- 14-day multiple oral doses of sofnobrutinib tablets in 3 cohorts (50, 150 or 300 mg twice daily)
- The safety, tolerability, PK and PD were evaluated.

Result of MAD study MAD part

- Well tolerated with no dose-limiting adverse events (AEs): AEs were mostly mild.
- Favorable safety profile up to 300 mg twice daily
- Favorable PK profile: approximately dose proportional with increasing doses
- Robust PD effect was observed: over 90% inhibition for basophils activation on Day 14 at 150 and 300 mg BID doses.

These results from the Phase 1 studies of sofnobrutinib support to advance sofnobrutinib into Phase 2 clinical development for further investigations.

Sofnobrutinib: CSU is a skin disease with unmet medical needs CARNA BIOSCIENCE

Chronic Spontaneous Urticaria (CSU) is a distressing skin disorder that characterized by itching and hives lasting for more than 4 weeks with unknown causes. The symptoms can last months or years, affecting QoL of patients.

Challenges of CSU

- A significant number of patients having uncontrolled CSU by existing drugs.
- High socio-economic costs for patients with high disease activity*
- Large number of patients; approximately 1% of the global population is affected*

High unmet medical needs with potential large market

* Br J Dermatol 2021;184:226-36.

Competitors		
Compound	Company	Development Phase
Remibrutinib (LOU064)	Novartis	P3

The Phase III trials met the primary endpoints and showed rapid symptom control in CSU, supporting the potential of BTK inhibitors as a new treatment option for those uncontrolled by first-line H1-antihistamines.* * https://www.novartis.com/news

Opportunity

- Approval of new treatment options may trigger the expansion of CSU market.
- We plan to pursue the clinical implications of sofnobrutinib (non-covalent BTK inhibitor) to provide clinical benefits by minimizing potential adverse events associated with covalent BTK inhibitors including remibrutinib.



Ref. P.60-P.63

Mechanism/ Indication Monzosertib is an **orally available** CDC7 kinase inhibitor targeting cancers.

To minimize a risk of side effects Monzosertib is designed to selectively inhibit CDC7 kinase **to reduce a risk of potential side effects**.

Potentially effective for various cancers Monzosertib exhibited a potent anti-proliferative activity against a wide range of cancer cell lines in preclinical studies.

Potential first-in-class molecule Monzosertib has a potential to become a first-in-class drug as no CDC7 inhibitors have been approved.

Monzosertib (AS-0141): CDC7 Inhibitor



Monzosertib (AS-0141) : Targeting Cancer

HighPoter	 Small molecule CDC7 inhibitor High kinase selectivity Potential First-in-class drug Orally available 			 Potent anti-proliferative activity against various cancer cell lines Demonstrated strong anti-tumor activity in several human tumor xenograft models Conducting Phase 1 study in Japan targeting solid tumors Planning to expand to blood cancers as monotherapy or in combination with other drugs 				
2021	2021 2022 2023			2026				
		Phase 1				Phase 2		
• Dose e • Multi-:	Solid tumors • Dose escalation part • Multi-site clinical trial (In progress)		<u>ncers</u> ion part nical trial tion)	• Dose expansion part		Monotherapy or in combination • Multi-site clinical trial		



Clinical trial sites : National Cancer Center Hospital and National Cancer Center Hospital East

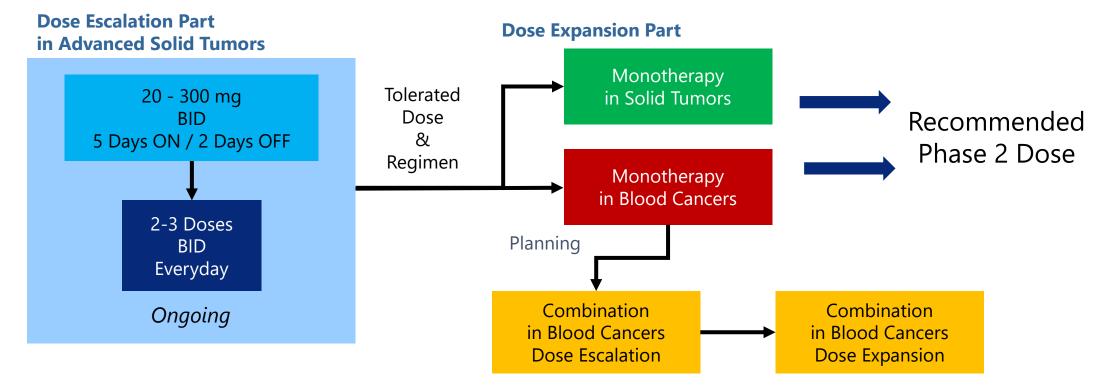
Clinical trails in progress	Phase 1 dose escalation study targeting cancer patients is ongoing.
 Objectives of the study	The primary objectives of the dose escalation study is to assess safety, tolerability, maximum tolerated dose (MTD), preliminary anti-tumor activity, and pharmacokinetics (plasma concentration, duration) of monzosertib.
Dosage	Oral administration, twice a day
 Status	 Treating patients at doses up to 300 mg BID (5d on/2d off or no drug holiday). 80 mg BID (5d on/2d off) was well-tolerated and safe. Switched to a continuous dosing schedule (without drug holiday) to maximize efficacy. Planning to expand to blood cancers as monotherapy or in combination with other drugs.

Monzosertib (AS-0141): Phase 1 Clinical Trial



Phase 1 study targeting cancer patients

- The Phase 1 study in patients with advanced, metastatic, relapsed or refractory malignancies. The protocol has been changed to include patients with blood cancers.
- The study consists of two parts, a dose escalation and an expansion.
- The primary objective is to assess safety, tolerability, maximum tolerated dose (MTD), preliminary anti-tumor activity, and PK / PD as well as to determine RP2D.
- Pharmacodynamic effect of monzosertib was confirmed at 40 mg-80 mg BID and above.



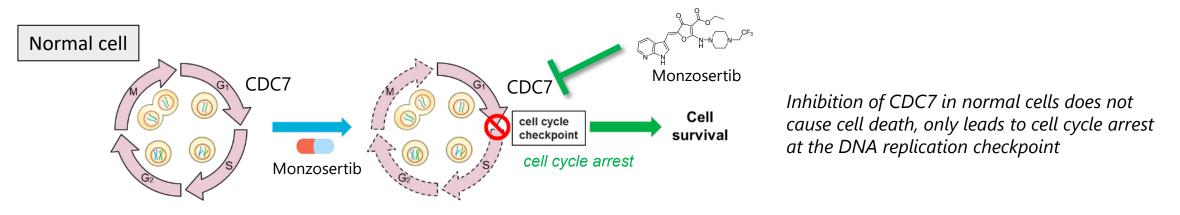
Monzosertib (AS-0141)



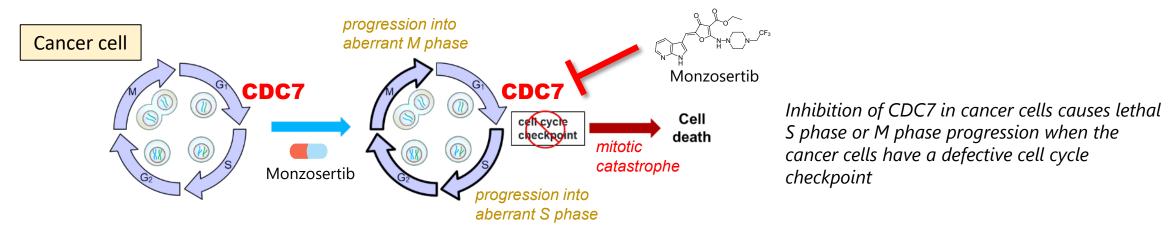
Potential Frist-in-class CDC7 Inhibitor Targeting Cancer

MoA of Monzosertib

• CDC7 (cell division cycle 7) is a serine/threonine kinase that facilitates DNA replication during DNA synthesis



• Over expression of CDC7 has been reported to cause uncontrolled proliferation of many cancer types





Updates on Licensed Pipelines

DGKα Inhibitor (Gilead Sciences, Inc.)



2 Joint Research with Sumitomo Pharma



Program/ Partner	Compound (Target)	Upfront payment	Total milestone payments expected	Royalty	Region	Contract date	Milestones received
DGKα inhibitor Gilead Sciences (Out-license)	GS-9911 (Immuno- oncology)	\$20M	\$450M	Undisclosed	Worldwide	Jun. 2019	Received milestones twice, totaling \$15M
Joint Research with Sumitomo Pharma	Kinase inhibitor (Psychiatric and neurological disorders)	JPY80M (including research milestone)	JPY10.6B	Undisclosed	Worldwide	Mar. 2018	

XSTING antagonist was removed from the list as Fresh Tracks Therapeutics, the licensee, announced in September 2023 its plant to liquidate and dissolve the company.





Partner	GILEAD Gilead Sciences, Inc. Out-licensed in June 2019 (worldwide rights)
Deal size	 Upfront payment \$20 million Maximum of \$450 million potential milestone payments upon achievement of certain development and commercial milestones
Royalties	Royalties on future net sales

1. Investigational DGKα inhibitor: GS-9911

2. Indication: Cancer (immunotherapy)

 At JP Morgan Annual Healthcare Conference held in January 2024, Gilead introduced DGKα as next generation target in oncology and presented GS-9911 as the DGKα inhibitor in Phase 1 trials.

3. The Phase 1 study is ongoing targeting patients with solid tumors.

Refer Gilead's website for details of the study. https://www.gileadclinicaltrials.com/study?nctid=NCT06082960



Partner	Sumitomo Pharma	Sumitomo Pharma Co., Ltd. Joint Research Agreement in March 2018 (worldwide rights)		
Deal size	 Upfront payment + Research milestone JPY80 million Maximum of JPY10.6 billion potential milestone payments upon achievement of certain development and commercial milestones 			
Royalties	Royalties on future net sales			

- 1. Joint research to discover novel kinase inhibitors to treat psychiatric and neurological disorders.
- 2. The term of the joint research was extended in December 2021.
- 3. Joint research is ongoing to identify preclinical candidates.



Drug Discovery Support (ddSP) Business

Updates on Drug Discovery Support Business

Sales were JPY918 mn, beating FY2023 plan

- Sales of kinase proteins exceeded JPY 500 mn for the two years in a row.
 - Biotinylated proteins which are provided solely by Carna penetrated into the market.
 - Strong demand from biotech companies including AI-driven drug discovery companies in the U.S and Europe.
 - Successfully achieved sales growth in fast growing China market thanks to local distributors.
- Overall sales declined in 2023 compared to 2022 when revenue related to the license agreement with Gilead was included.

Development of new products and services

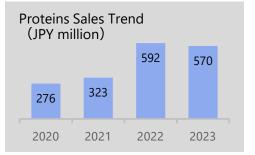
- Succeeded in developing next generation profiling system with ScieX BioPhase8800 and the preparation is ongoing to launch new profiling services.
- 49 kinds of kinase proteins, including high-demand mutant kinase biotinylated kinase proteins, are now available.



New Profiling System

dedicated program.

Combination of ScieX BioPhase8800 and our original robot arm that performed by a





FY2023 Drug Discovery Support Business Sales Trend

Japan

North

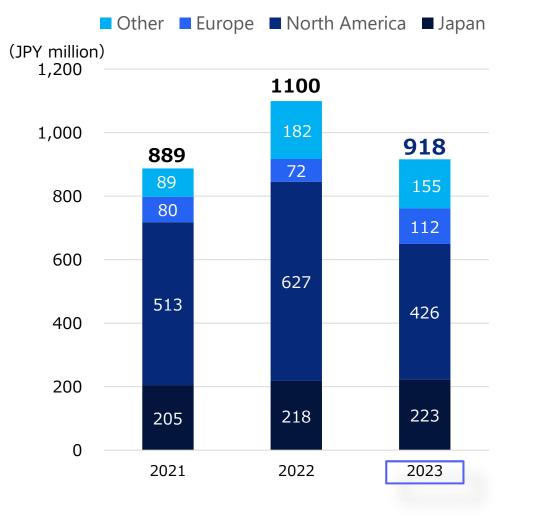
America

Europe

Other



Drug Discovery Support Business Sales Trend by Region (Consolidated)



Increased 2.1% YoY

• Sales increased YoY thanks to robust sales from cell-based assay services.

Decreased 32.0% YoY

- Strong demand for kinase proteins from biotech companies including AI-driven drug discovery companies.
- Overall sales declined compared to 2022 when the revenue related to the license agreement with Gilead was included.

Increased 56.8% YoY

 Sales of kinase proteins were strong thanks to the continuous orders from AI-driven drug discovery companies.

Decreased 14.9% YoY

- In China, sales of kinase proteins remained robust.
- Overall sales were not as strong as the previous year but exceeded JPY 150 mn.

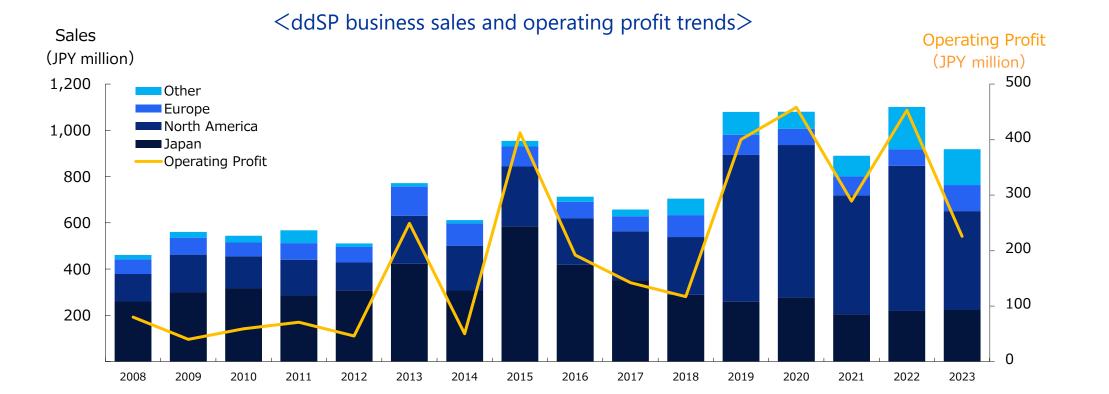
Drug Discovery Support Business : Strengths



Carna's kinase proteins and services have grown as one of the world's top brands.

- Established the direct sales channels in Japan and the U.S. Our products and services are distributed through our exclusive agent in Europe. In China, SUBC*, one of the leading research tool provider in China distributes our kinase proteins (exclusive for us in kinase related products).
- These strengths enable our business to increase in sales continuously and significantly contribute to our performance with stable high profit margin.

*Shanghai Universal Biotech Co.(SUBC) SUBC is one of the leading reagents suppliers in China, headquartered in Shanghai, has 36 branches with over 700 employees. Top sales company in immune-related reagents in China.



Drug Discovery Support Business : Our own unique products and services

Kinase Proteins

- World-class product lineup : over 500 products including mutants
- Built a mass-production system : provide custom made kinase proteins of several dozen mg.
- High quality : highly active, high purity and stable quality (less variations among batches)

Biotinylated Protein Kinases

- Established our own technology of manufacturing biotinylated protein kinases: biotinylated protein kinases are suitable for the drug discovery research of next generation kinase inhibitors.
- Biotinylated protein kinases of over 200 kinds are available and product lineup is expanding.

Profiling Services

- Data accuracy is the most important factor in kinase inhibitor selectivity profiling.
- Our customers, including both domestic and international pharmaceutical companies, highly evaluate Carna's profiling services for its data accuracy.

Our customers, the world's major pharmaceutical companies and promising bio-ventures, who use our kinase proteins and profiling services, launched many molecular target drugs. Some of the approved drugs became blockbusters.



Biotinylated Protein Kinases

- The demand for high throughput screening systems for small molecule compounds which bind to kinase proteins is increasing.
- Carterra (U.S) developed a new innovative high throughput system, LSA^{XT}, which enabled small molecule screening and characterization in addition to antibody.
- Carna and Carterra collaborated to preliminary develop the assay with this new screening system in combination with Carna's single site biotinylated kinase proteins and Carterra's HT-SPR LSA^{XT} instrument.
- This collaboration successfully proved this new system screen about hundreds kinases and compound binding event just in 3 days.



Our biotinylated kinase protein sales is expected to be expand with the permeation of Carterra LSA^{XT} .

Drug Discovery Support Business : Key growth driver 2



Profiling Services

- Conventionally, capillary electrophoresis has been known as highly reliable method for measuring kinase protein activity without using radioisotopes.
- Perkin Elmer (renamed Revvity in 2023)'s EZ Reader which equipped electrophoresis system on microchip with 12 capillaries has been a de facto standard for measuring kinase activity, was announced its discontinuation including supply of consumables and the support as of the end of this year. This boosts high demand for a substitute system with the same data quality.
- We have been providing high quality profiling services with EZ Reader.
- To continue offering profiling services, we challenged and succeeded in developing our original substitute system. The new system consists of combination with Sciex BioPhase8800 of 8 capillary electrophoresis, and the robot arm with stacker which we originally installed by combining stand alone machines.



Carna will continue reliable profiling services with this original system and aim to acquire even more customers.

Market environment for Drug Discovery Support Business



Market environment

• The demand for kinase inhibitor drug discovery research services is strong in North America and China. More stable in Japan.

Competitors • Our advantage

- Major competitors:
 - Thermo Fisher Scientific (US)、Eurofins (EU) SignalChem (Canada)、Reaction Biology (US)
- Carna is the only drug discovery support service provider specialized in kinase inhibitor drug discovery.
- Carna is the only major player who offers biotinylated kinases.
- Precise assays, appropriate product development and finely attentive technical support by scientists with drug discovery experiences and knowledges.



FY2023年 Consolidated Financial Results



(JPY million)	FY2022 Actual	FY2023 Actual	YoY Change	FY2023 Plan	FY2023 Dec.14 Revised Plan	
Total Sales	1,386	1,625	+239 +17.2%	902	1,610	
ddSP business	1,100	918	-182 -16.6%	902	902	 In line with the initial plan. Although the sales of proteins were strong, overall sales decreased from 2022 when the revenue related to the license agreement with Gilead was included.
ddRD business	286	707	+421 +147.4%		707	 Received a milestone payment of \$5 million from Gilead. Received an upfront payment from FRTX and a milestone payment from BioNova in FY2022.
Total Operating Loss	(1,269)	(1,116)	+152	(1,890)	(1,183)	 Operating loss decreased YoY thanks to the increase in sales.
ddSP business	452	225	-227 -50.2%	221	221	In line with the initial plan.Operating profit declined YoY due to a decrease in sales.
ddRD business	(1,722)	(1,342)	+380	(2,111)	1,404	Operating loss decreased YoY due to the increase in sales.
Ordinary Loss	(1,278)	(1,126)	+152	(1,911)	1,203	
Net Loss	(1,349)	(1,152)	+196	(1,936)	1,229	• Net loss decreased thanks to the increase in sales.
R&D cost	1,882	1,903	+21	1,968	1,968	• Continued investment in the programs in clinical trials.

Business plan for FY2023 dose not include potential milestone payments or upfront payments as the timing or the amounts are difficult to predict.

FRTX : Fresh Tracks Therapeutics, Inc. Note : Rounded down to the nearest million yen

Consolidated Balance Sheet



	(JPN million)	As of Dec. 31,2022	As of Dec. 31,2023	Change	Reason for changes
Curi	rent assets	4,104	4,191	+87	Cash and deposits -489 Accounts receivable-trade +605
	Cash and deposits	3,379	2,889※	-489	Amount raised through stock acquisition rights +1,349
Non	-current Assets	162	158	-3	
Tota	al assets	4,266	4,349	+83	
Curi	rent liabilities	436	375	-60	
Non	-current liabilities	188	96	-91	Long term loans payable -120
Tota	al liabilities	624	472	-152	
Tota	al net assets	3,641	3,877	+235	Capital stock and capital surplus +1,388 Retained earnings -1,152
Tota	al liabilities and net assets	4,266	4,349		
Sh	areholders' equity ratio	85.0%	89.1%	XThe milestone payment of \$5 mn (JPY707 mn) from Gile	
BPS	5	255.0yen	226.16yen	was record	ed as sales in FY2023. However, it is not included in
PBF	R(株価純資産倍率)	2.0x	2.3x	cash and deposit as of the end of FY2023 as the more received in January 2024.	
Sha	are price of Carna	520yen	522yen		

Note: Share price is the closing price of the term end.





<Exercise of Subscription Rights to Shares in FY2023

	19 th Subscription Rights to Shares	20 th Subscription Rights to Shares	Total
Amount raised (JPY)	47mil.	1,302mil.	1,349mil.
No. of shares exercised (Shares)	50,000	2,836,500	2,886,500

<20th Subscription Rights to Shares >

	DEC. 2022	JANAPR.2023	Total
Amount raised (JPY)	300 mil.	1,302mil.	1,602mil.
No. of shares exercised (Shares)	550,000	2,836,500	3,386,500
No. of Exercised rights / No. of total rights issued	16.2 %	83.8%	100%

Financing

Additional financing may be considered as necessary in order to accelerate the clinical trials of AS-1763, our most important asset.



CARNA BIOSCIENCES

Business Plan

Key Milestones for 2024



			Key Milestones	
	Business	Milestones for 2023	Achievement in 2023	Milestones for 2024
	AS-1763	□ Ph1b FPI (US)	Ph1b FPI (US)Dosing initiated in August 2023	Present interim clinical data from ongoing Ph1b study
	Sofnobrutinib (AS-0871)	 Complete Ph1 MAD study Prepare a package for licensing 	 Complete Ph1 MAD study Finalized the CSR in November 2023 Prepare a package for licensing 	Promote partnering activity to find a strategic partner
ddRD	Monzosertib (AS-0141)	Initiate Ph1 expansion part	 Initiate Ph1 expansion part Changed to daily administration and dose escalation part is ongoing 	 Enroll patients with blood cancers Initiate Ph1 dose expansion part
	Research program	Bring one or more programs in preclinical stage or license a program	 Bring one or more programs in preclinical stage. Selected a development candidate for further evaluation 	
	ddSP	 Expand sales of in-house developed products and services in North America and Asia Increase line-up of protein kinase products Expand sales of cell-based assay 	 Expand sales of in-house developed products and services in North America and Asia Increase line-up of protein kinase products Expand sales of cell-based assay 	 Expand sales of in-house developed products and services in North America and Asia Increase line-up of protein kinase products Expand sales of cell-based assay

*Starting 2024, ddRD business will only disclose the key milestones for the clinical development pipelines as priority objectives.

FPI: First Patient In

CSR: Clinical Study Report

ddRD: Drug Discovery R&D business ddSP: Drug Discovery Support Business





(JPY million)	FY2023 Actual	FY2024 Plan	Outlook for 2025 – 2028
Total Sales	1,625	925	
ddSP business	918	925	Maintain stable sales
ddRD business	707	-	Revenue from milestone payments and upfront payments
Total Operating Loss	(1,116)	(2,201)	
ddSP business	225	229	Maintain stable profit while investing in product developments
ddRD business	(1,342)	(2,431)	Continue to invest in R&D and deliver profits depending on the size of milestone payments and upfront payments
Ordinary Loss	(1,126)	(2,208)	
Net Loss	(1,152)	(2,225)	
(JPY million)	FY2023 Actual	FY2024 Plan	Outlook for 2025 – 2028
R&D Cost	1,903	2,309	Continue to invest in R&D for the future growth. The R&D cost may vary from JPY 1 bn to 2.5 bn, depending on the size of clinical studies.
Сарех	11	44	Invest in equipment for R&D and IT system (JPY20 mn to 100 mn)

• Business plan for FY2024 dose not include potential milestone payments or upfront payments as the timing or the amounts are difficult to predict.

• Numerical targets for 2025-2028 are not disclosed for the same reason.

ddRD: Drug Discovery R&D business ddSP: Drug Discovery Support Business

Growth Strategy



> Advance clinical trials of our innovative pipelines to maximize corporate value

Started internal drug discovery activity	Demonstrated strong capabilities in drug discovery	Maximize the value of pipelines	Continue delivering profits
2010-2015	2016-2020	2021-2025 (Plan)	2026-2030 (Plan)
 Established in-house research capability Established pipeline 	 Out-licensed multiple programs Initiated clinical trials 	 Advance clinical trials of AS-1763, sofnobrutinib(AS-0871) and monzosertib(AS- 0141) Earn revenue from new license deals Receive milestone payments from the out- licensed programs and deliver profits Initiate pre-clinical and clinical studies of new pipelines 	 Receive milestone payments and royalty income from the out-licensed programs and expand profits Earn revenue from new license deals Initiate pre-clinical and clinical studies of new pipelines



<ddRD>

- ✓ Advance clinical trials of AS-1763 and monzosertib(AS-0141)
- ✓ Create next wave of pipeline
- ✓ Receive milestone payments and royalty income from out-licensed programs

<ddSP>



- Expand sales of in-house developed products and services in North America and Asia
- Secure sustainable sales growth by launching new products and services and reaching out to new customers
- Generate cash to invest in ddRD

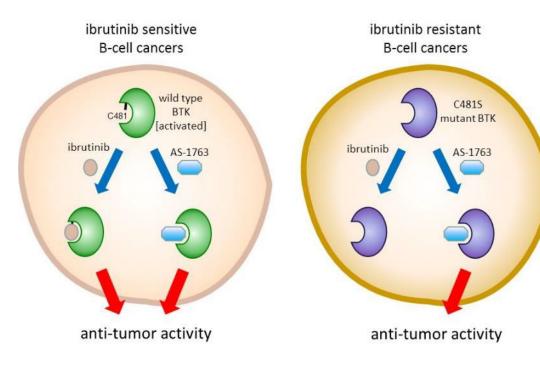
ddRD: Drug Discovery R&D business ddSP: Drug Discovery Support Business



CARNA BIOSCIENCES

Appendix 1

AS-1763: Potent Inhibitor of C481S mutant BTK



Medicinal Chemistry

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Drug Annotation

ARNA BIOSCIENCES

Discovery of AS-1763: A Potent, Selective, Noncovalent, and Orally Available Inhibitor of Bruton's Tyrosine Kinase

Wataru Kawahata,* Tokiko Asami, Takao Kiyoi, Takayuki Irie, Shigeki Kashimoto, Hatsuo Furuichi, and Masaaki Sawa

Cite This: J. Med. Chem. 2021, 64, 14129–14141



IC₅₀ values of AS-1763 against wild-type and C481S-mutant BTK

	IC ₅₀ (nM)		
	BTK[A]	BTK ^{C481S}	
AS-1763	0.85	0.99	

J Med Chem. 2021 Oct 14;64(19):14129-14141.

AS-1763: Strong Cellular Activity and High Kinase Selectivity

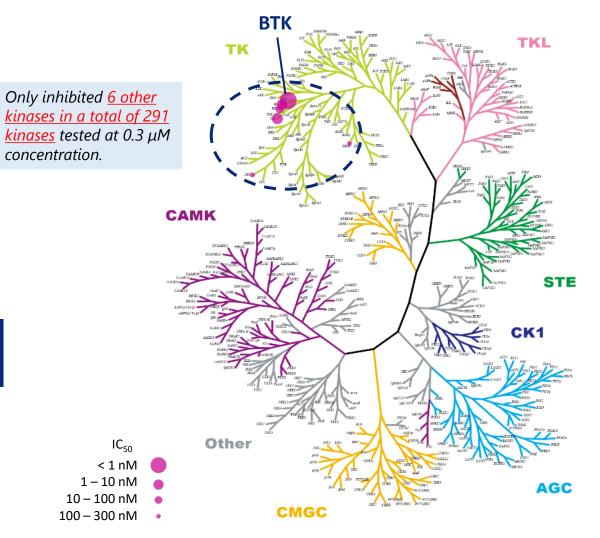
In vitro pharmacological activities of AS-1763

	IC ₅₀	IC ₅₀ (nM)		
	AS-1763	Ibrutinib		
Autophosphorylation BTK (Ramos)	1.4	1.1		
CD69 activation (Human whole blood)	11	8.1		
Cancer cell growth OCI-Ly10 cells	1.8	0.75		
Cancer cell growth OCI-Ly10 [BTK C481S] cells	20	1030		
Normal cell growth HEL299 cells	6370	6870		

Ramos: human Burkitt lymphoma cell line OCI-Ly10: human B-cell non-Hodgkin lymphoma cell line OCI-Ly10 [BTK C481S]: BTK[C481S] knock-in OCI-Ly10 cells HEL299: human embryo lung cell line

J Med Chem. 2021 Oct 14;64(19):14129-14141.

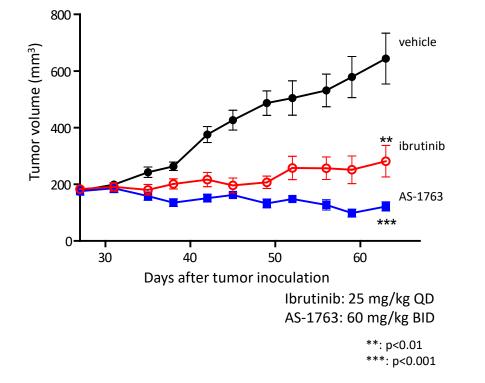
♦ Kinase selectivity profiling



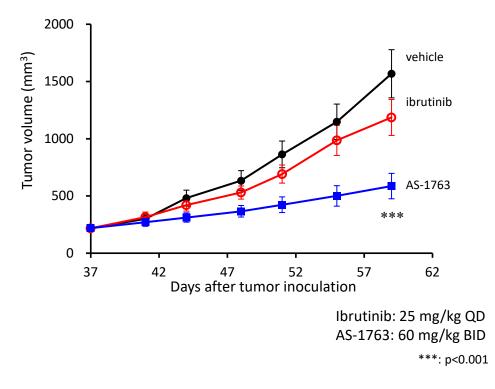


AS-1763: In Vivo Antitumor Effect against BTK^{C481S} Mutant

 In vivo antitumor effects of AS-1763 on human B-cell non-Hodgkin lymphoma cell line, OCI-LY10 tumor xenograft mouse model (n=8-10)



 In vivo antitumor effects of AS-1763 on ibrutinibresistant BTKC481S knock-in OCI-LY10 tumor xenograft mouse model (n=11)



Study Design

Step 1 Single Ascending Dose (SAD) Part	Step 2 Relative Bioavailability (BA) Part		
 Double-blind, placebo-controlled, randomized FIH study Simple formulation (solution) 6 dose levels (8 subjects/cohort A, 8 subjects/cohort B) 6 active / 2 placebo for each dose level Safety and tolerability Pharmacokinetics and pharmacodynamics (PD; CD69 upregulation on naïve B cells) 	 Open label study Another cohort of 8 subjects The subjects were dosed with a single dose of AS-1763 100-mg tablet, and relative bioavailability with simple formulation was evaluated 		
Enrolled (n = 16)Cohort A5 mg active n = 6 placebo n = 2	100 mg600 mgactive n = 6active n = 6placebo n = 2placebo n = 2		
Cohort B (n = 8) Cohort B active placebo	n = 6 active $n = 6$ active $n = 5$ $(n = 7)$		

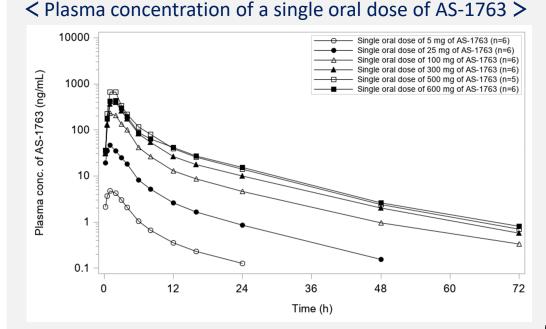
*One subject was withdrawn from the study on Day 1 of 300-mg period before the intake of treatment medication (placebo) by physician's decision. This subject showed AEs (Grade 2 lymphocytosis and Grade 2 neutropenia) which were considered treatment-emergent but not trial medication-related. No replacement was done at 300-mg and the following 500-mg periods.

AS-1763: SAD Part



Safety and tolerability

- AS-1763 was well-tolerated after single dose administration up to the maximum dose level (600 mg).
- No serious adverse events (AEs) were reported during the trial.
- Two Grade 2 AEs were reported in one subject, which were considered not related to trial medication.
- Other AEs reported were of mild intensity and showed no apparent dose-relationship in frequency.
- No clinically relevant changes from baseline were observed in all other safety parameters assessed (clinical laboratory, 12-lead safety ECGs, vital signs, or physical examinations).



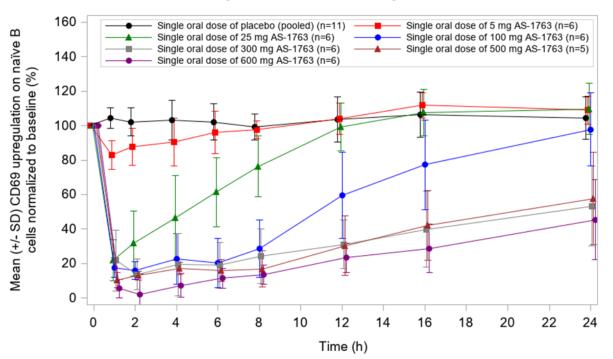
Pharmacokinetics

- After a single-dose oral administration, plasma concentration of AS-1763 rapidly reached the maximum and then declined in a biphasic manner across the dose range (median tmax between 0.5 and 1.5 hours; mean t1/2 between 8.4 and 12.1 hours).
- Mean AS-1763 exposures generally increased with dose up to 500 mg.

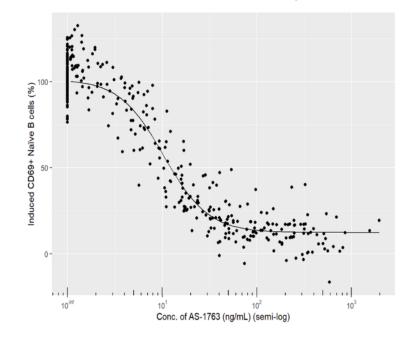


- Inhibition of B cell CD69 upregulation was observed for 5 mg onwards.
- Maximum inhibition (arbitrarily defined as ≥80%) was observed at 1-2 hours post-dose from 100 mg to 600 mg, and the duration of inhibition was dose-dependent with values of 2, 6, 8 and 8 hours for 100, 300, 500, and 600 mg, respectively.
- Based on a PK/PD correlation analysis, the IC50 value of AS-1763 on CD69 upregulation was calculated to be 10.5 ng/mL.

< B cell CD69 upregulation after a single oral dose of AS-1763 >

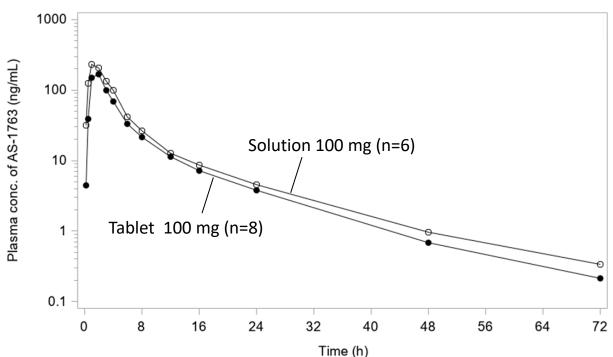


< PK/PD correlation analysis >





- In the BA part, 100 mg tablet and the solution showed almost similar PK profile while the exposure of 100 mg tablet was slightly lower than the that of the solution.
- The PK/PD data and favorable safety profile in healthy volunteers support a planned Phase 1b clinical study with AS-1763 tablet twice daily dosing in relapsed/refractory CLL and B-cell NHL.

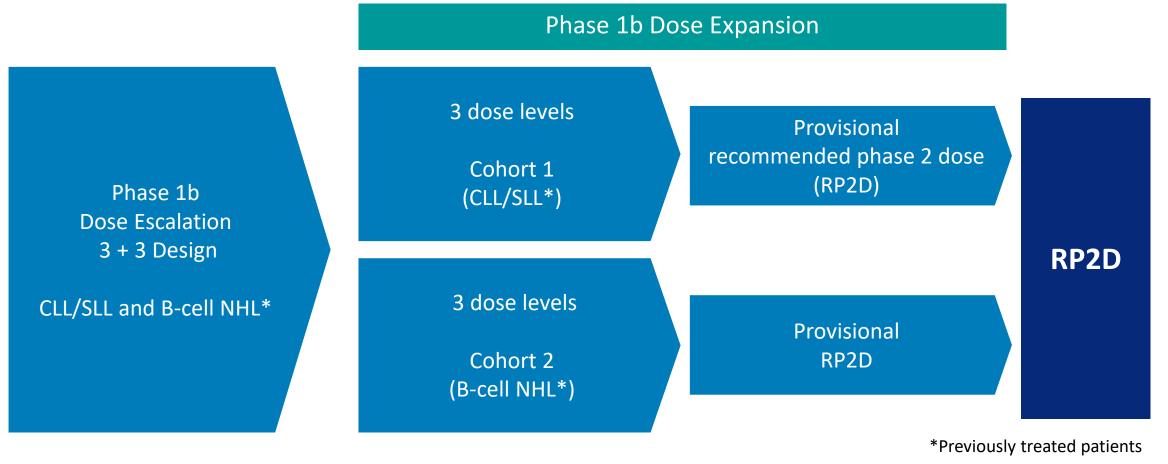


<PK of Tablet vs Solution after a Single oral dose AS-1763>

AS-1763: BA Part



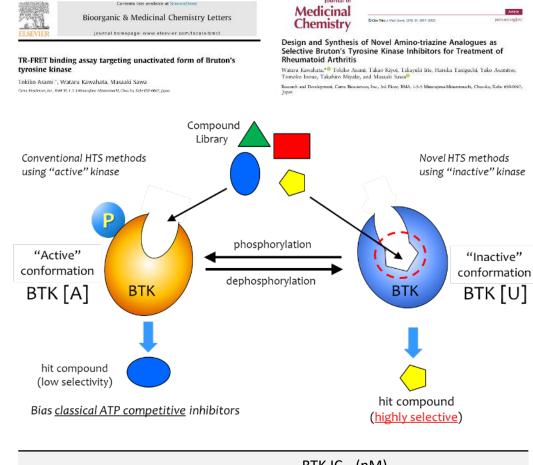




◆ The first patient was dosed in August 2023.

Sofnobrutinib (AS-0871): Excellent Kinase Selectivity

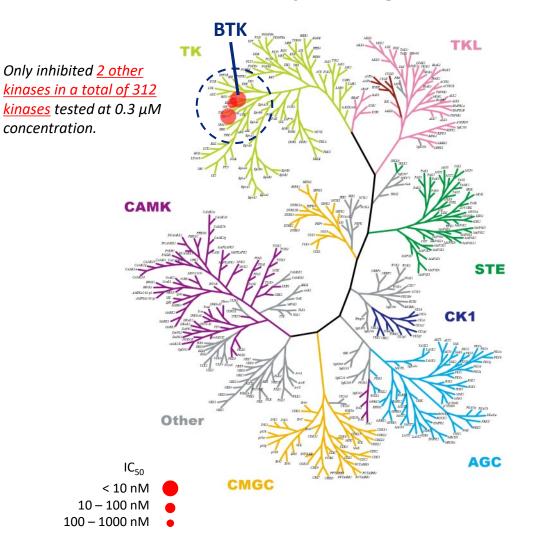
Targeting Inactive Conformation of BTK



lournal o

	BTK IC ₅₀ (nM)		
	BTK[A]	BTK[U]	
sofnobrutinib	3.4	0.3	

Kinase Selectivity Profiling

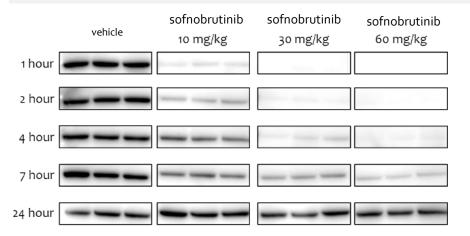


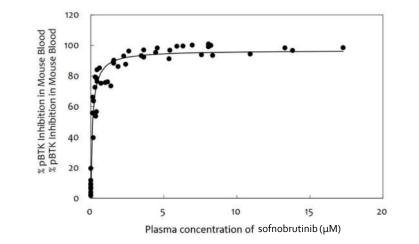
54

Sofnobrutinib (AS-0871): In Vivo Therapeutic Efficacy CARNA BIOSCIENCES

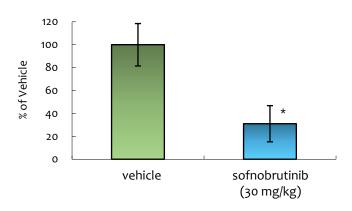
PK/PD Study

Auto-phosphorylation status of BTK was measured following oral single administration of sofnobrutinib.

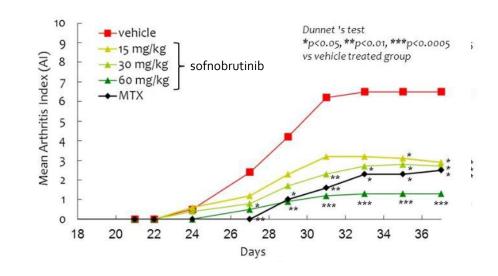




Passive cutaneous anaphylaxis (PCA) mouse model (n=5)



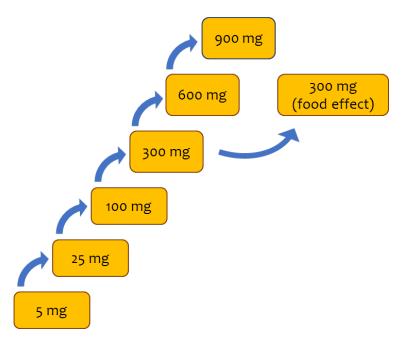
Collagen-induced arthritis (CIA) mouse model (n=10)





SAD Part (Completed)

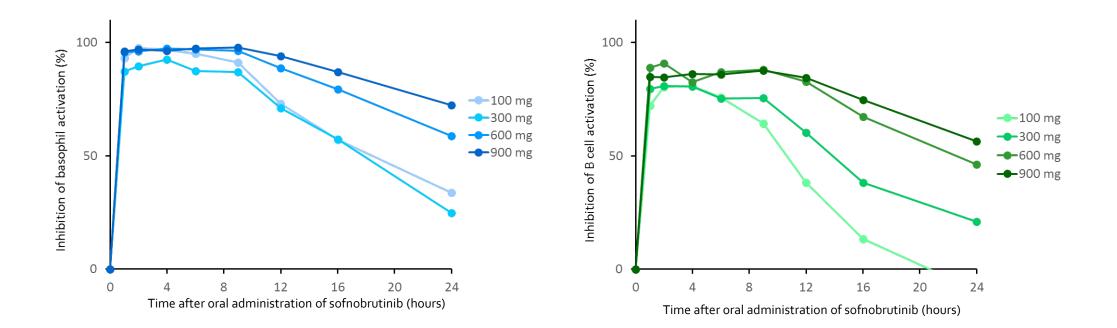
Step 1 Single Ascending Dose (SAD)	Step 2
 6 dose levels (8 subjects/cohort) Placebo controlled (6 active / 2 placebo) Safety and tolerability Pharmacokinetics and pharmacodynamics 	• Food effect



- Sofnobrutinib is well-tolerated without any safety concerns.
- Favorable pharmacokinetic profile.
- Blood samples to assess PD effects were analyzed for evaluation of the B-cell and basophil responses. Administration of sofnobrutinib at 100mg or above resulted in strong inhibition of B-cell and basophil activation.
- Switching to a new formulation in the MAD study.

Pharmacodynamics of sofnobrutinib (AS-0871)

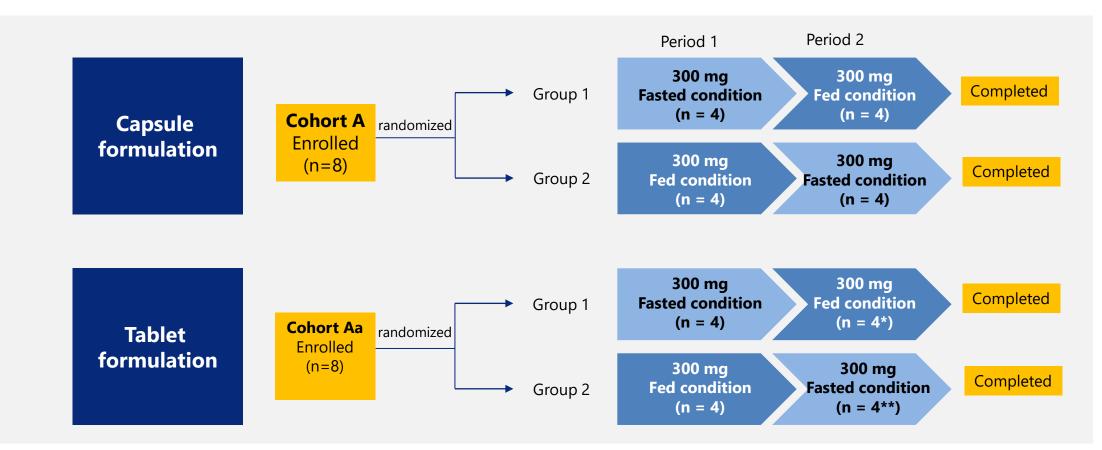
- Pharmacodynamic study demonstrated that subjects who received sofnobrutinib showed dose proportional inhibitions in basophil and B-cell activations, and significant and sustained inhibitory effects were observed at 100 mg and above.
- Oral administration of sofnobrutinib achieved therapeutic plasma levels needed to inhibit B cells and basophils activation, suggesting that sofnobrutinib has a potential to become a new treatment option for inflammatory diseases.



Sofnobrutinib (AS-0871): Phase 1 MAD Study BA part CARNA BIOSCIENCES

Study Design of rBA/FE part

PK, safety, and tolerability after single-dose oral administration of sofnobrutinib, formulated as capsules or tablets, were evaluated under fasted and fed conditions in an open-label, randomized, 2-period crossover design. Eight healthy subjects (Cohort A or Cohort Aa) were randomized to either Group 1 or Group 2 (4 subjects per group).



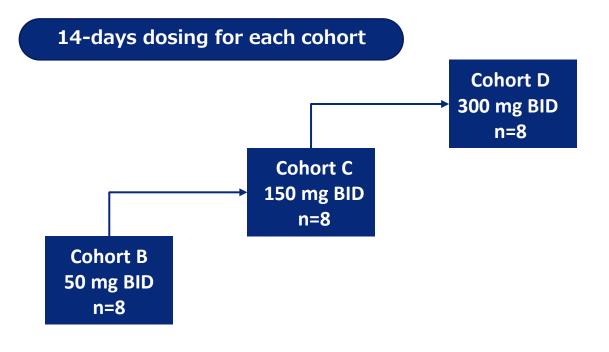
*One subject vomited after dosing (considered not related to study drug), excluded from the PK analysis. **One subject withdrew from the study due to personal reasons before dosing.

Sofnobrutinib (AS-0871): Phase 1 MAD Study MAD part



Study Design of MAD part

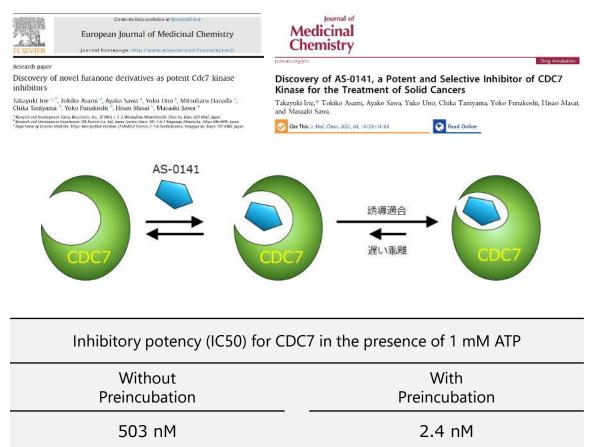
- In the MAD part, safety, tolerability, PK, and PD of 3 multiple ascending doses of sofnobrutinib, following 14-day multiple dose oral administration of sofnobrutinib, will be investigated using a double blind, placebo-controlled, randomized design in 3 cohorts of 8 healthy subjects each.
- Dosing was completed as planned.
- The final Clinical Study Report (CSR) for the Phase 1 MAD study has been finalized in November 2023.



- Well tolerated with no dose-limiting AEs.
- Favorable safety profile up to 300 mg BID.
- The exposure levels increased dose-dependently, and favorable PK profile with tablet formulation was confirmed.
- Achieved almost complete inhibition of basophil activation (PD marker) at 150 mg and 300 mg BID at a steady state

Monzosertib (AS-0141): Time-Dependent Inhibitor of CDC7

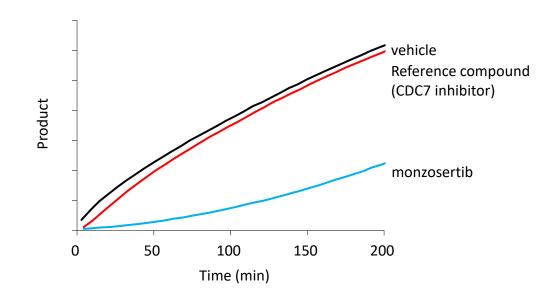
Monzosertib has a unique inhibitory mechanism for CDC7 kinase (time-dependent inhibition)



Monzosertib inhibits CDC7 in a reversible fashion but has a very slow off-rate

Rapid dilution assay for Cdc7 inhibitors. Recovery of enzymatic activity was monitored by formation of the phosphorylated product.

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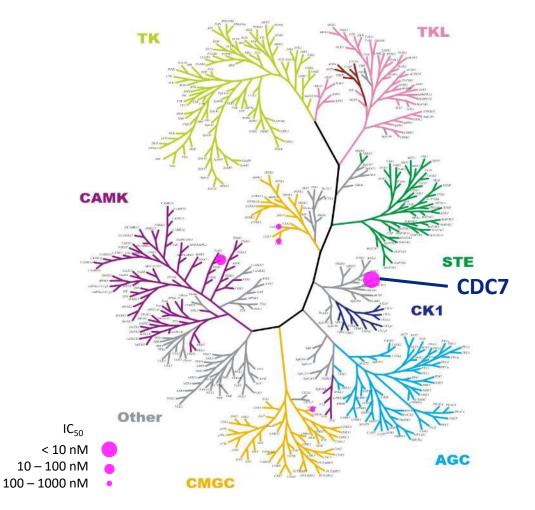


J Med Chem. 2021 Oct 14;64(19):14153-14164.

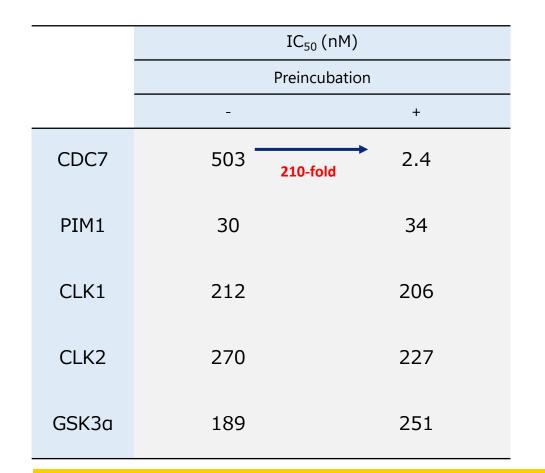
Monzosertib (AS-0141): High Kinase Selectivity

Kinase Selectivity Profiling

In the presence of 1 mM ATP with preincubation



◆ IC50 values of hit kinases (at 1 mM ATP)



CDC7 is the only kinase that shows preincubation effect

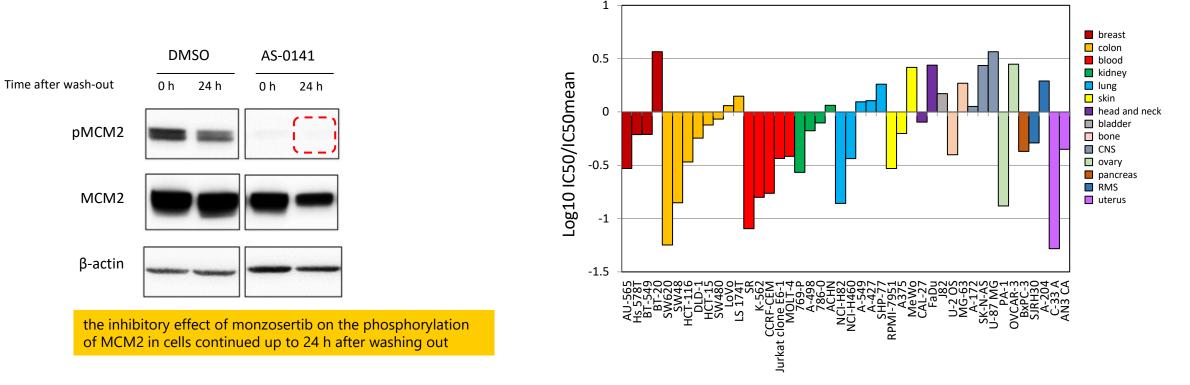
J Med Chem. 2021 Oct 14;64(19):14153-14164.

Monzosertib (AS-0141): Strong Cellular Activity

Prolonged inhibition in cells

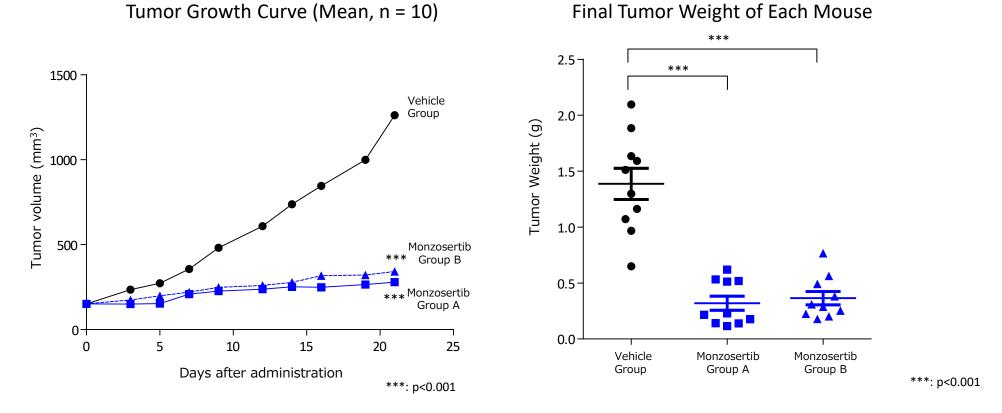
Human colon cancer cell line, Colo-205 cells were treated with DMSO control or monzosertib. After washout of the inhibitor, the cells were further incubated in the same media for 0 or 24 h and subjected to western blot analysis.





J Med Chem. 2021 Oct 14;64(19):14153-14164.

In vivo antitumor efficacy of monzosertib in a SW620 (human colon cancer) xenograft mouse model



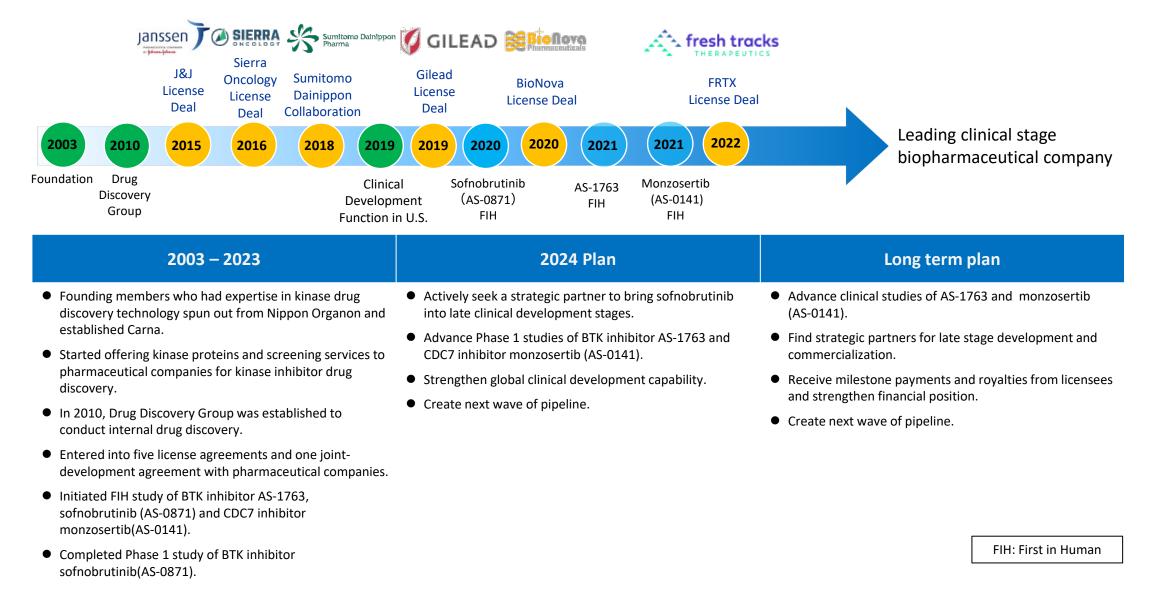
Monzosertib group A: 60 mg/kg TID, 4d ON/2d OFF Monzosertib group B: 120 mg/kg QD



Appendix 2



Our goal is to deliver innovative therapies for patients suffering from serious diseases



Management Team



Directors



Kohichiro Yoshino, Ph.D. President & Chief Executive Officer, Representative Director

Dr. Yoshino founded Carna Biosciences in 2003 as a spin-out venture from Nippon Organon, a subsidiary of N.V. Organon where he was the head of the Osaka Research Center. As a member of Organon Research Committee, Dr. Yoshino contributed to research and development of NV Organon. Before joining Nippon Organon, he engaged in the research and development of small molecule drugs at Kanebo Corporation Inc.

From 2004 to 2008, he was a Visiting Professor at Center for Advanced Science and Innovation, Osaka University. He earned M.S. in Chemistry from the Graduate School of Tokyo Institute of Technology and Ph.D. from Kyoto University.



Norio Aikawa Head of Drug Discovery and Support Business, Head of IP and Legal Department, Director

Mr. Aikawa is one of the founding member of Carna Biosciences. Mr. Aikawa has a long and extensive experience in the area of intellectual property and has contributed to strengthening Carna's IP strategy. Before joining Carna in 2003, he was the head of Intellectual Property Department at Nippon Organon. Before that, he was the head of Intellectual Property Department at Kanebo Corporation. He holds a bachelor's degree in Science from Hirosaki University.



Masaaki Sawa, Ph.D. Chief Scientific Officer, Director

Dr. Sawa built the current drug discovery group at Carna. Before joining Carna, he held positions at Sumitomo Dainippon Pharma.
Prior to that, he was a medicinal chemist at Nippon Organon, a subsidiary of N.V. Organon.
From 2004 to 2006, he was a visiting scientist at the Scripps Research Institute in San Diego.
Dr. Sawa was a Visiting Professor at Graduate School of Medicine, Kobe University from 2013 to 2015.
He received his Ph.D. from Kyoto University.



Emi Yamamoto Chief Financial Officer, Director, President of CarnaBio USA, Inc.

Ms. Yamamoto joined Carna Biosciences in 2004 after engaged in fund administration at CSK Venture Capital. She built Carna's accounting and business management group and held a responsible role in Carna's IPO. Since 2017, she leads administration group, in charge of accounting, finance, human resources, and corporate planning. Ms. Yamamoto holds a bachelor's degree in Business Administration from Aoyama Gakuin University, and a Certified Public Accountant.



Akinori Arimura, Ph.D. Chief Development Officer, Director

Dr. Arimura joined Carna Biosciences in 2018 as head of newly established clinical development department and has since established Carna's clinical development capability both in Japan and in the U.S. Prior to joining Carna, Dr. Arimura led the global development of anticancer drugs at Shionogi & Co., Ltd, with responsibility for planning and implementing the clinical studies as well as for collaboration with biotech companies. Prior to that, he engaged in the drug discovery research at Shionogi as head of allergy, immunology and oncology areas.

He was a visiting scientist at Columbia University, where he was recognized for his achievement in Molecular Immunology research. Dr. Arimura received his Ph.D. from Gifu Pharmaceutical University.

Management Team



Directors



Atsuo Arita Outside Director

Before joining the Board of Directors in 2020, Mr. Arita served as External Auditor of Carna Biosciences from 2004 to 2020, overseeing its management as a full-time company auditor. He held various responsible roles in accounting, finance, and sales management at Kanebo Corporation Ltd. and was the head of business management at Kanebo.

He holds a bachelor's degree in Business and Commerce from Keio University.



Tsuguo Ogasawara Outside Director

Mr. Ogasawara served as External Auditor of Carna Biosciences from 2005 to 2020 before joining the Board of Directors in 2020. He has brought Carna his extensive experience in international business. He was a Director at Chugai Pharmaceutical Co. Ltd., in charge of international business. Prior to that, he was engaged in business management, finance, and international business at Toray Industries, Inc. He holds a bachelor's degree in Economics from Keio University.



Teruo Takayanagi, Ph.D. Outside Director

Dr. Takayanagi joined the Board of Directors of Carna Biosciences in 2015. He was the Director of Daiichi Pharmaceutical Co., Ltd. from 2001 to 2006 where he engaged in the R&D management and led post-marketing surveillance to promote proper use of its pharmaceutical products. He also held a responsible role in business integration with Sankyo. He was a full-time Auditor of Daiichi Sankyo Company, Limited from 2007 to 2011. Dr. Takayanagi is an Auditor of Japanese Society of Drug Informatics. Dr. Takayanagi received his Ph.D. from the University of Tokyo.



Takao Matsui Outside Director

Mr. Matsui served as External Auditor of Carna Biosciences since 2019 to 2020 before joining the Board of Directors in 2020. He has over 35 years of experience in financial audit and related advisory business. He served as Certified Public Accountant at KPMG AZSA LLC. from 1982 to 2018. Mr. Matsui also currently serves as Outside Director of AIR WATER, INC. He was a Specially Appointed Professor at School of Accountancy, Kansai University since April 2018 to March 2020. He is a part-time lecturer at Kansai University and School of Accountancy, Kansai University since April 2018 to March 2020. He is a part-time lecturer at Kansai University and School of Accountancy, Kansai University since April 2018.

Mr. Matsui holds a bachelor's degree in School of Business Administration from Kwansei Gakuin University, and a Certified Public Accountant.





"Carna" is a goddess of Roman mythology who takes care of human health, protecting the human heart and other organs as well as everyday life, and is said to be the root for the word "cardiac."

The word "biosciences" is derived from the words 'biology' and 'life sciences.'

Carna Biosciences has created contemporary Carna goddess with protein kinase.

Carna Biosciences, Inc.

Corporate Planning

BMA3F 1-5-5 Minatojia-Minaimachi, Chuo-ku, Kobe 650-0047 <u>https://www.carnabio.com/</u> ir-team@carnabio.com

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Investors should aware that the actual performance of the company could be materially different from our current forecasts.

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