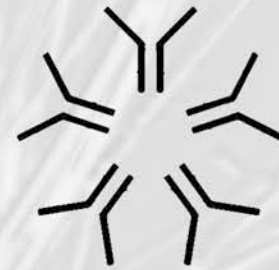


TORAGEN

BIOTECHNOLOGIES



*TREATING THE ROOT CAUSE OF HPV
INDUCED HEAD AND NECK CANCER*

JANUARY 2021

WORLDWIDE INCIDENCE

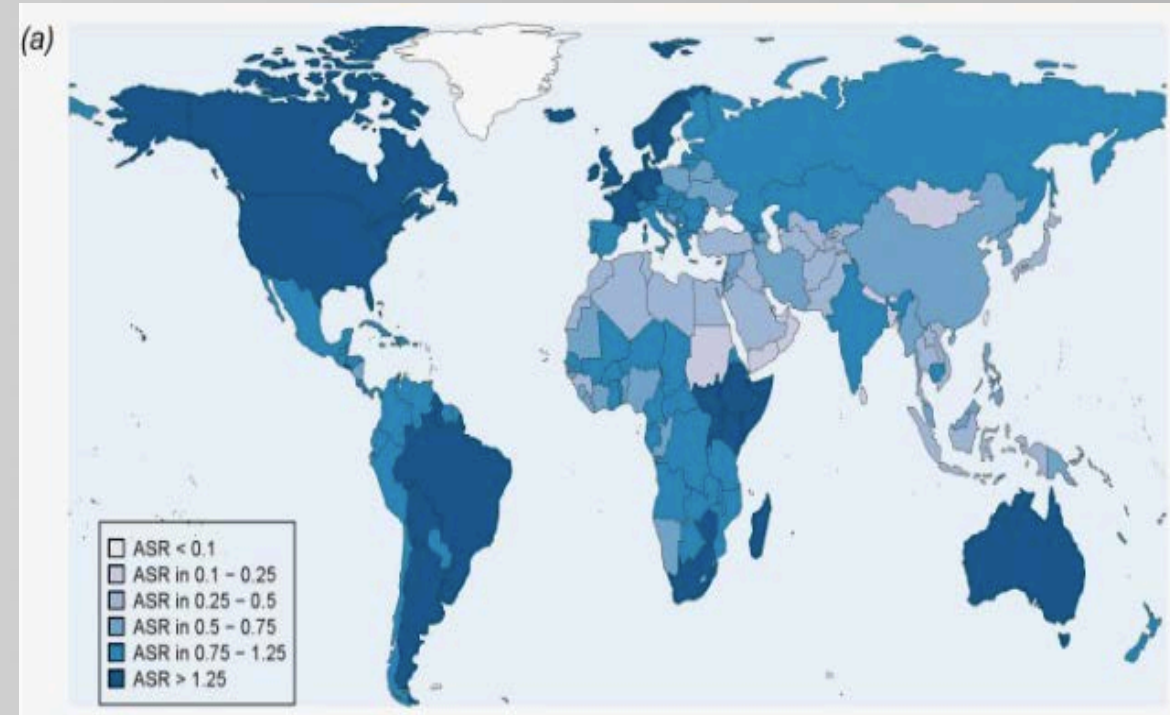
THE UNMET NEED

80% of us are exposed to the Human papillomavirus (HPV) in our lifetime

HPV is the leading cause of viral associated cancers (5% of all Cancers Worldwide)

Over 640,000 Head and Neck Cancers Annually

330,000 Deaths Each Year



JNCI Cancer Spectrum, Volume 2, Issue 4, October 2018, pky045

HEAD AND NECK CANCER TREATMENT

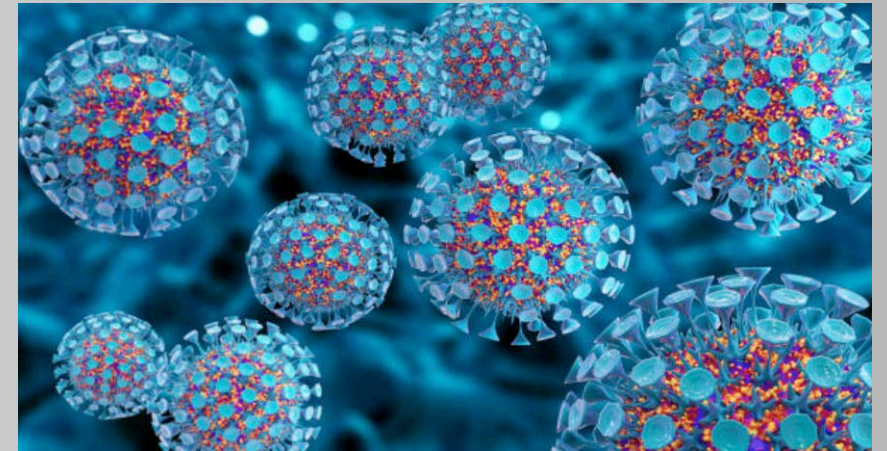
30-50% WILL RECUR

Radiation Therapy

Chemotherapy

Cetuximab is used upon recurrence
(\$82,000 for 18-week treatment)

Immunotherapy – PD/PDL-1 Inhibitors



MARKET SIZE – SECOND LINE INDICATION

Approximately \$2 Billion Worldwide

Toragen opportunity could approach \$200 Million Annually

In the U.S. – Orphan Drug Designation

TREATING THE ROOT CAUSE BY TARGETING HPV ONCOGENES

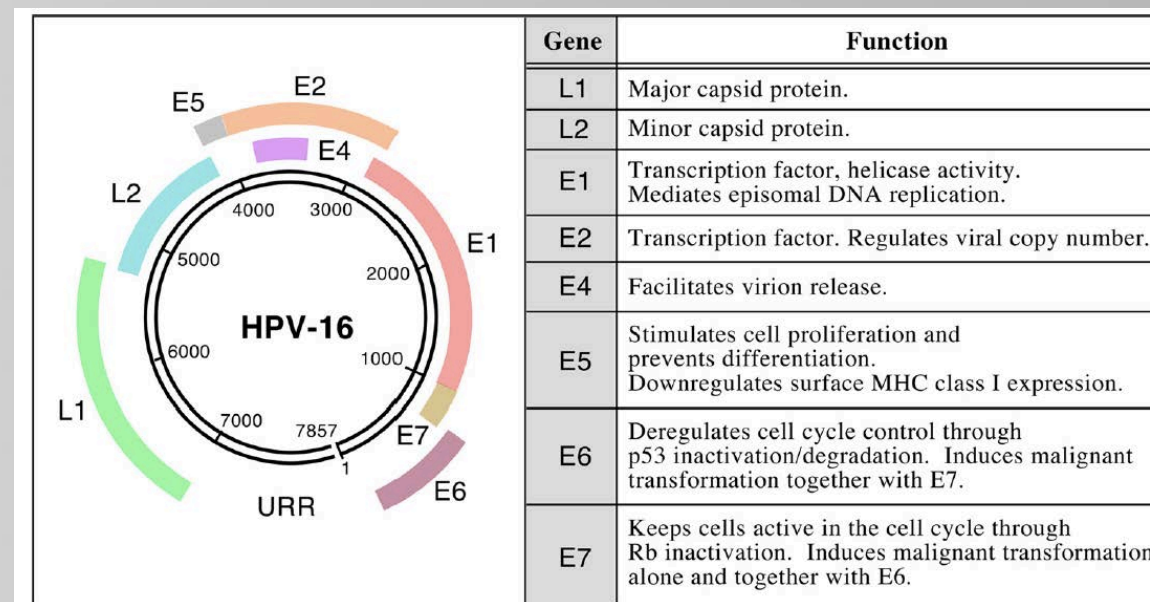
TGN-S11 Selectively Targets HPV Oncogenes

Reformulating an already FDA-approved Drug

Enter market in half the time

IP-protected Pipeline

Human Papillomavirus (HPV 16) Oncogenes



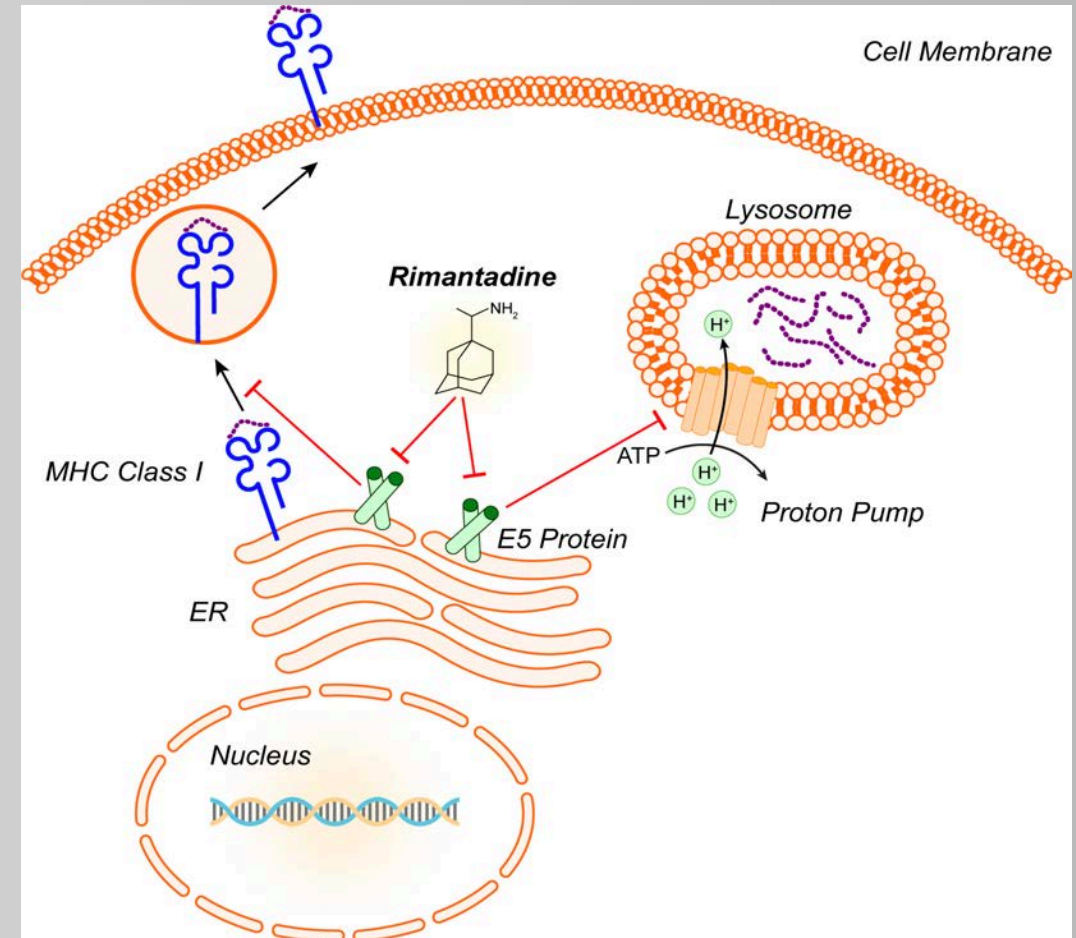
¹Centers for Disease Control and Prevention., July 8, 2016

HPV-ASSOCIATED CANCERS

- TARGETING E5 WITH TGN-S11

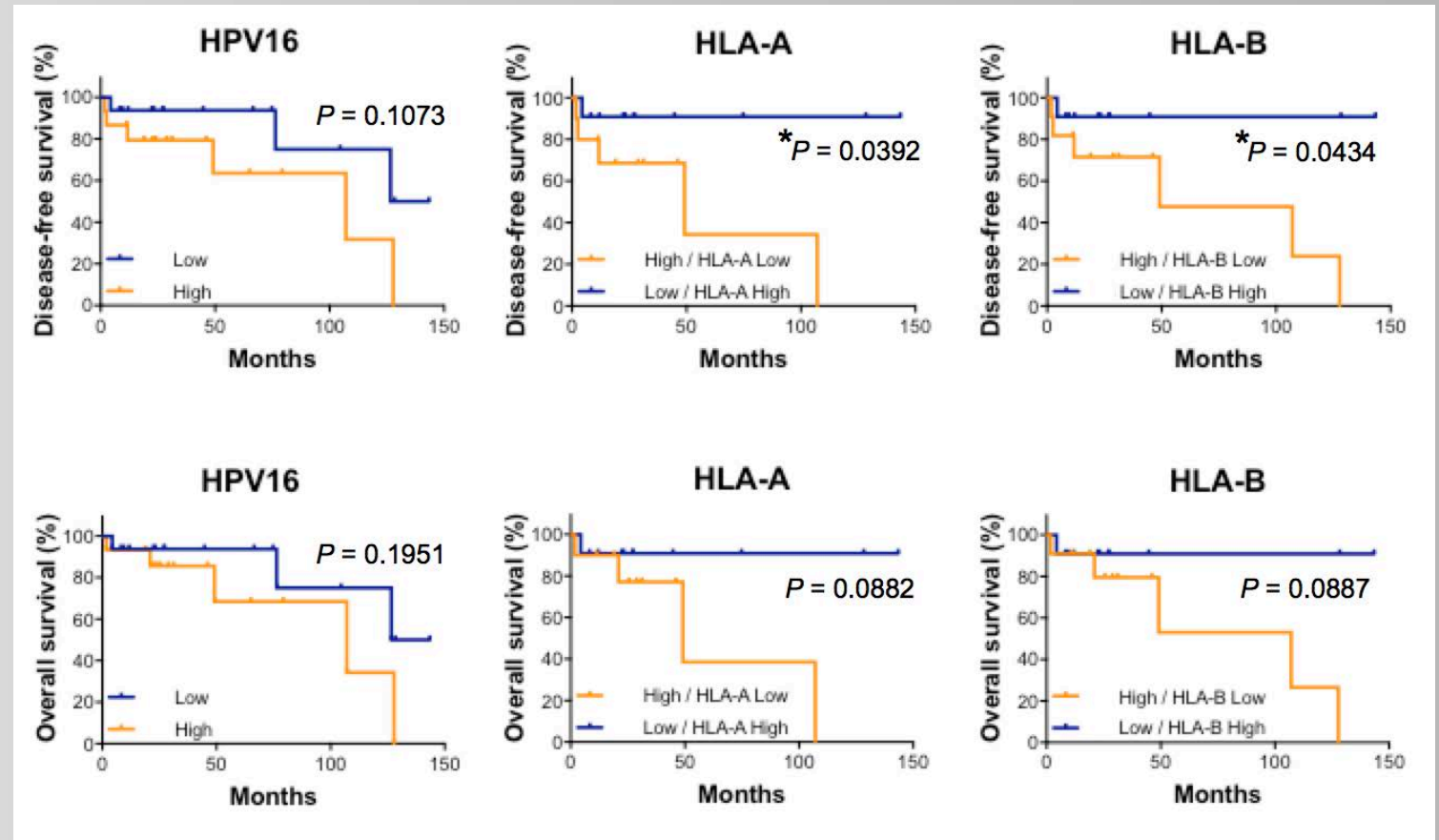
HPV E5 Function

- ❑ HPV E5 directly binds to MHC Class I and downregulates surface expression of MHC.
- ❑ HPV E5 also inhibits antigen processing and tumor antigen presentation.
- ❑ This directly limits the ability of T-cells to detect and kill HPV+ tumor cells.
- ❑ Potential to enhance activity of existing approved immunotherapy agents including PD-1 blockade

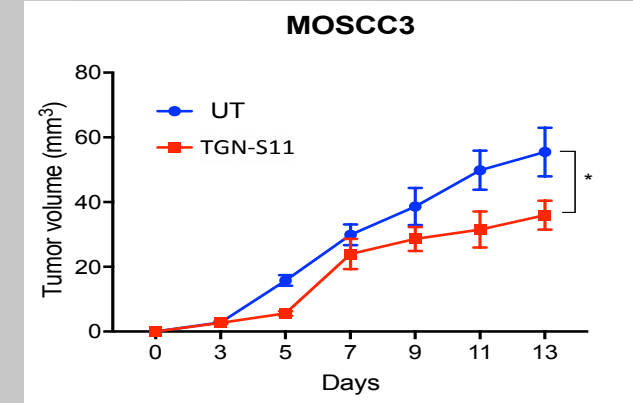
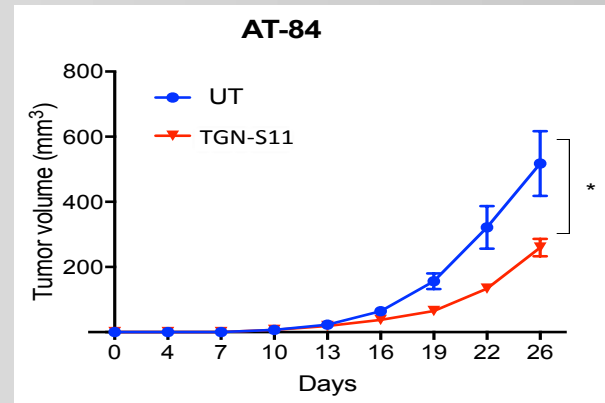
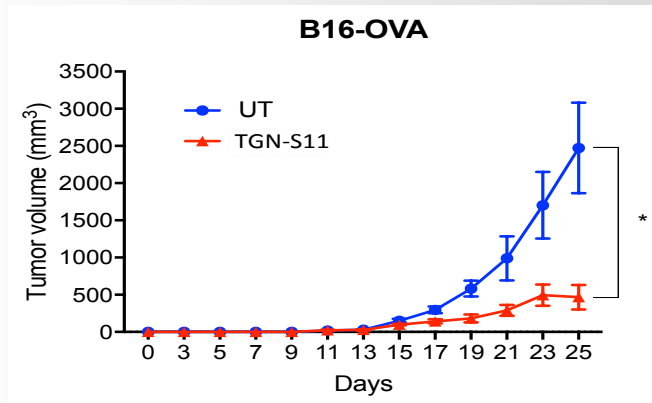


TORAGEN RESEARCH DATA

High expression of the HPV E5 oncogene confers worse Overall Survival in Head and Neck Cancer Patients



Single agent anti-tumor activity of TGN-S11 in multiple murine head and neck models



ACCOMPLISHMENTS - WE ARE EXECUTING

\$450,000 of Angel Capital raised

Licensed Drug from UCSD & Filed PCT Patent

Developed our Fast to Market Regulatory Strategy

FDA agreed to our 505(b)(2) Strategy

Anti-Cancer Activity of ██████████ Derivatives

CROSS-REFERENCE TO RELATED APPLICATIONS

[0001]

TECHNICAL FIELD

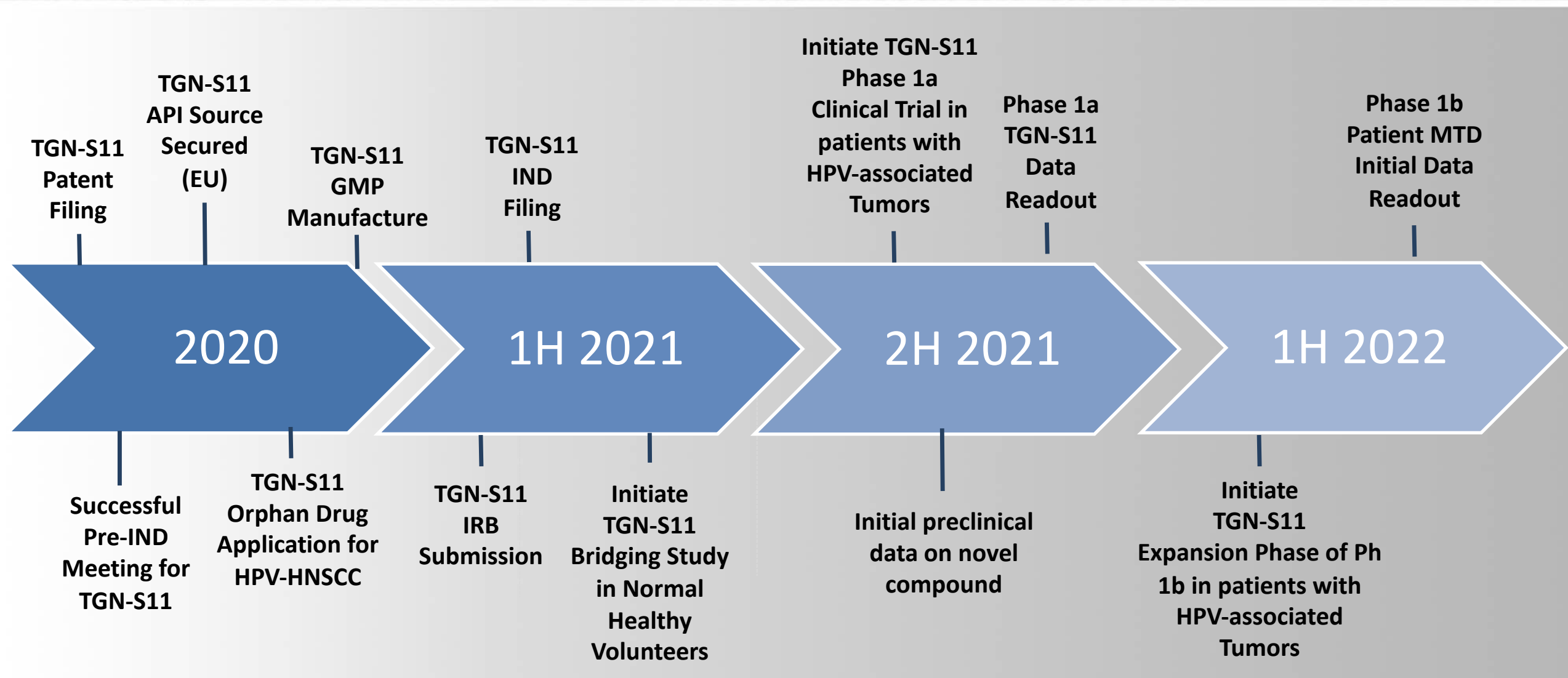
[0002] The present disclosure relates to methods of treating cancer comprising administering ██████████ or a derivative thereof, for example, ██████████. The present disclosure more particularly relates to methods of treating cancer comprising administering ██████████.

BACKGROUND

Cancer is the second most common cause of death in the United States. In 2018, approximately 1.7 million new cases were expected to be diagnosed and about 610,000 deaths due to cancer were expected to occur in the United States. There are more than 100 types of cancer including head and neck cancer, skin cancer (e.g., melanoma), cervical cancer, lung cancer, and breast cancer. Head and neck cancer accounts for approximately 4% of all cancers in the United States, and while melanoma accounts for only 1% of skin cancers, it causes the majority of deaths due to skin cancer. Additionally, about 1 in 8 women in the United States will develop breast cancer over the course of her lifetime, and death rates due to breast cancer are higher for women than any other cancer, excluding lung cancer. Additionally, about 5% of overall cancer worldwide is associated with human papillomavirus (HPV), including cervical cancer and head and neck squamous cell carcinoma (HNSCC), and the percentage of HPV-associated cancer has been increasing. Anti-PD-1 checkpoint blockade immunotherapy for recurrent or metastatic HNSCC after platinum-based chemotherapy was approved by the FDA due to overall survival benefits in patients receiving these anti-PD-1 agents, but the objective response rate to single agent checkpoint blockade immunotherapy in remains low (see e.g., Ferris et al. *N Engl J Med.* 2016 Nov 10;375(19):1856-1867; Seiwert et al. *Lancet Oncol.* 2016 Jul;17(7):956-965; Cohen et al. *Lancet.* 2019 Jan 12;393(10167):156-167;

INFLECTION POINT

SEEK TO RAISE \$10 MILLION IN SERIES A ROUND – 2-3 YEAR RUNWAY



DEVELOPMENT TEAM



Andrew Sharabi, MDPH
Founder and CEO
Specializes in treating
Head & Neck Cancer



Anita Busquets, CFO
Experienced startup
executive
7th company



Rick Lumpkin, PhD
Director of R & D
Over 30 yrs of
early-stage biotech
experience



James Kanter, PhD
Chemistry
Manufacturing
expert



John Reiner, PhD
Chemist
Enantiomer/SAR Lead



Elizabeth Vadas, PhD
Formulation Expert
Lead Developer at
Merck



Roger Dilts, PhD
Development
Expert in assays development to
choose development candidates

ADVISORS



Jeff Hartlin
Outside Counsel



Ezra Cohen, MD
Clinical Advisor



Dennis Carson, MD
Scientific Advisor



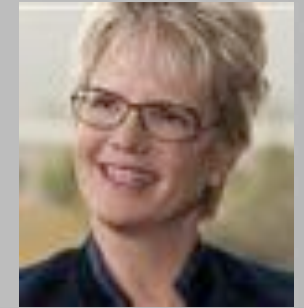
John Major
Board Member



Daniel Solorio
Regulatory Ops



Michael Swit
Regulatory Counsel



Faye Hunter
Licensing

IN SUMMARY

Clinical Stage Ready Company

Novel IP and Research Pipeline

Technology designed to enhance PD-1 inhibitor drugs

Seeking Orphan Drug Designation in US

Significant Market ~ \$2 billion

THANK YOU!

FOR MORE INFORMATION PLEASE VISIT

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INQUIRIES@TORAGENBIOTECH.COM