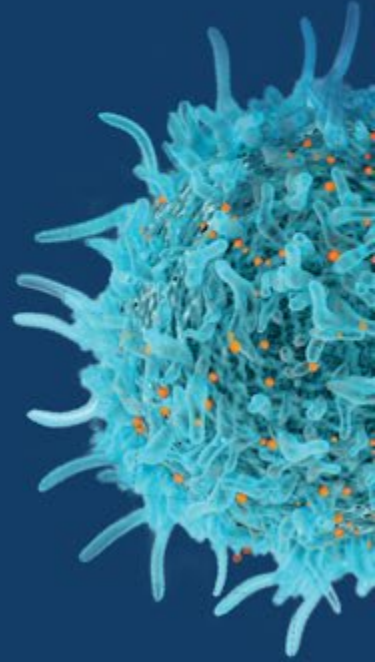


In vivo CAR-M: Redirecting endogenous myeloid cells with mRNA for cancer immunotherapy

Bindu Varghese, PhD
Carisma Therapeutics Inc.



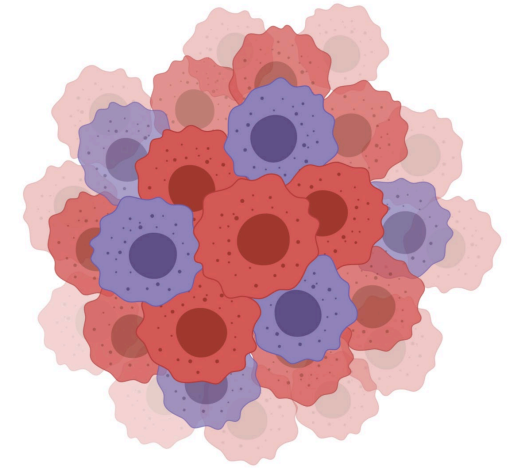
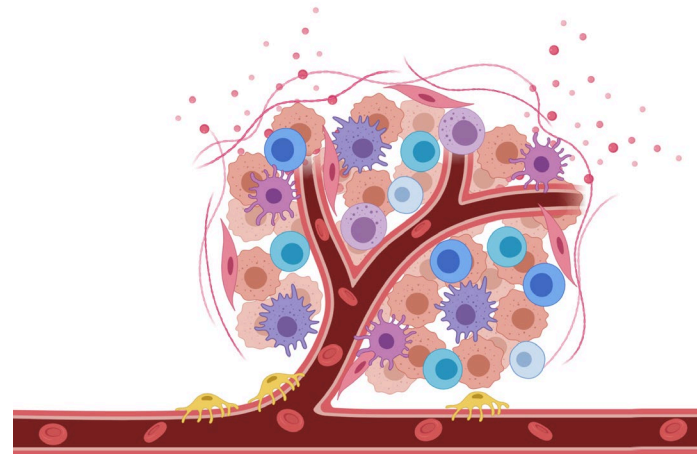
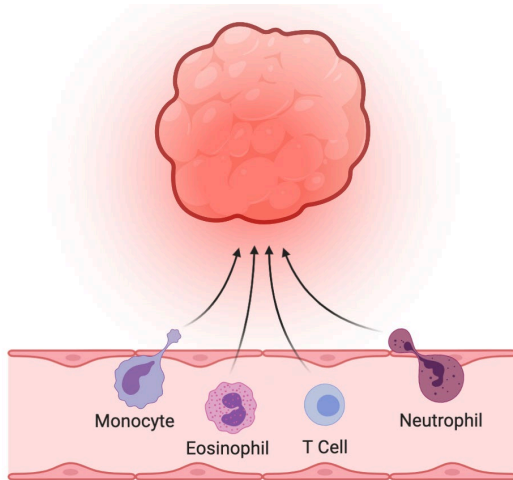


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Statements in this press release about future expectations, plans and prospects, as well as any other statements regarding matters that are not historical facts, may constitute "forward-looking statements" within the meaning of The Private Securities Litigation Reform Act of 1995. These statements include, but are not limited to, statements relating to Carisma's business, strategy, future operations, cash runway, the advancement of Carisma's product candidates and product pipeline, and clinical development of Carisma's product candidates, including expectations regarding timing of initiation and results of clinical trials. The words "anticipate," "believe," "contemplate," "continue," "could," "estimate," "expect," "goals," "intend," "may," "might," "outlook," "plan," "project," "potential," "predict," "target," "possible," "will," "would," "could," "should," and similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words.

Any forward-looking statements are based on management's current expectations of future events and are subject to a number of risks and uncertainties that could cause actual results to differ materially and adversely from those set forth in, or implied by, such forward-looking statements. These risks and uncertainties include, but are not limited to, (i) Carisma's ability to obtain, maintain and protect its intellectual property rights related to its product candidates; (ii) Carisma's ability to advance the development of its product candidates under the timelines it anticipates in planned and future clinical trials; (iii) Carisma's ability to replicate in later clinical trials positive results found in preclinical studies and early-stage clinical trials of its product candidates; (iv) Carisma's ability to realize the anticipated benefits of its research and development programs, strategic partnerships, research and licensing programs and academic and other collaborations; (v) regulatory requirements or developments and Carisma's ability to obtain and maintain necessary approvals from the U.S. Food and Drug Administration and other regulatory authorities; (vi) changes to clinical trial designs and regulatory pathways; (vii) risks associated with Carisma's ability to manage expenses; (viii) changes in capital resource requirements; (ix) risks related to the inability of Carisma to obtain sufficient additional capital to continue to advance its product candidates and its preclinical programs; and (x) legislative, regulatory, political and economic developments. For a discussion of other risks and uncertainties, and other important factors, any of which could cause the Carisma's actual results to differ from those contained in the forward-looking statements, see the "Risk Factors" set forth in Exhibit 99.3 to Carisma's Current Report on Form 8-K filed with the Securities and Exchange Commission on August 10, 2023, Carisma's Annual Report on Form 10-K for the year ended December 31, 2022 filed with the Securities and Exchange Commission on February 28, 2023, Carisma's Quarterly Report on Form 10-Q for the quarter ended June 30, 2023 filed with the Securities and Exchange Commission on August 10, 2023, as well as discussions of potential risks, uncertainties, and other important factors in Carisma's most recent filings with the Securities and Exchange Commission. Any forward-looking statements that are made in this presentation speak as of the date of this presentation. Carisma undertakes no obligation to revise the forward-looking statements or to update them to reflect events or circumstances occurring after the date of this presentation, whether as a result of new information, future developments or otherwise, except as required by the federal securities laws.

Key challenges for cell therapy in cancer



1. Trafficking & penetration

- Homing
- Extravasation
- Sufficient local concentration

2. Tumor microenvironment

- Immunosuppression
- Exhaustion/Anergy
- Low APC function
- Low Tumor Inflammatory Score

3. Target antigen heterogeneity

- Inherent resistance of Ag(-)
- Downregulation
- Antigen negative relapse

Chimeric Antigen Receptor Macrophages (CAR-M)

Redirecting myeloid cells to overcome barriers to successful cancer immunotherapy

1

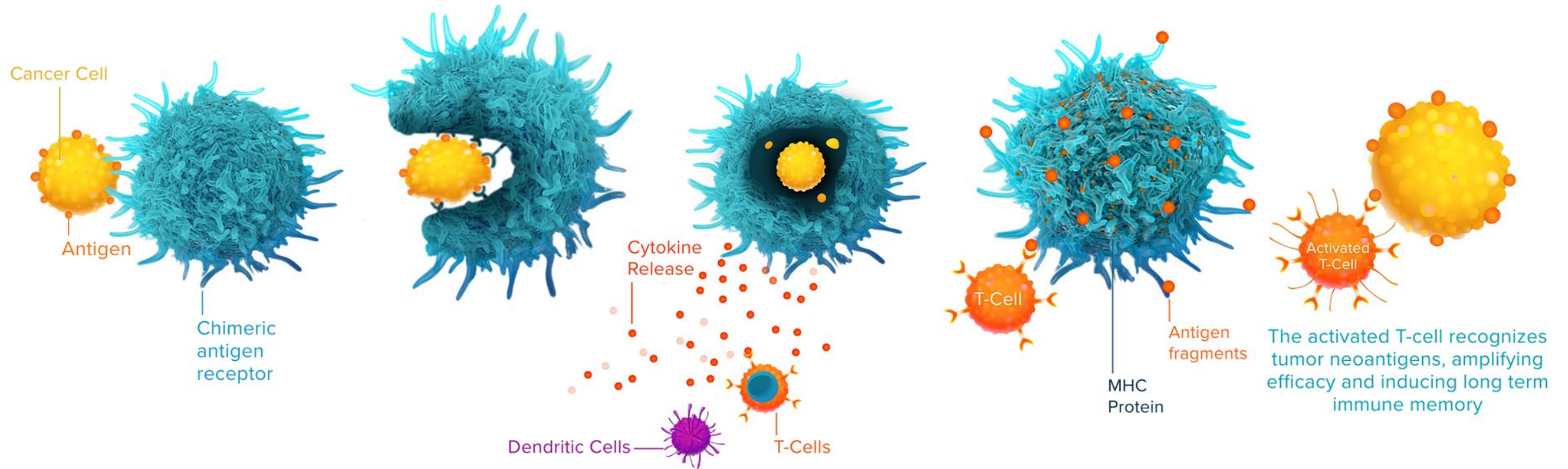
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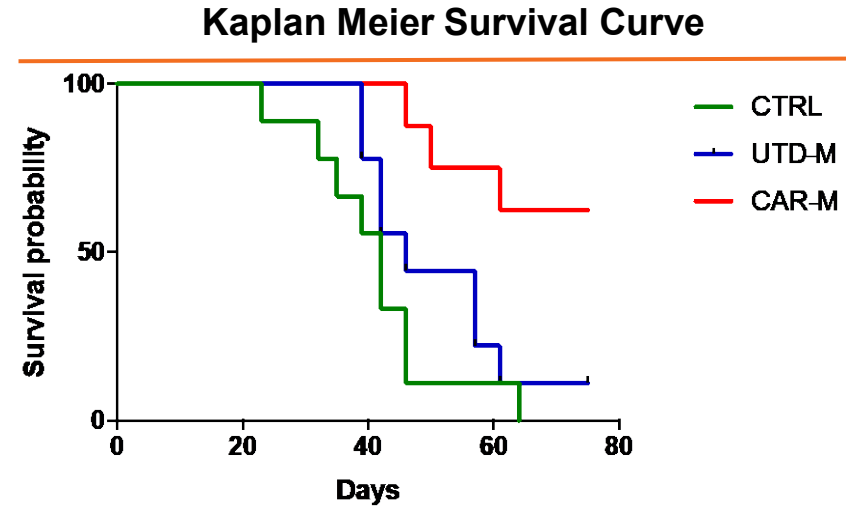
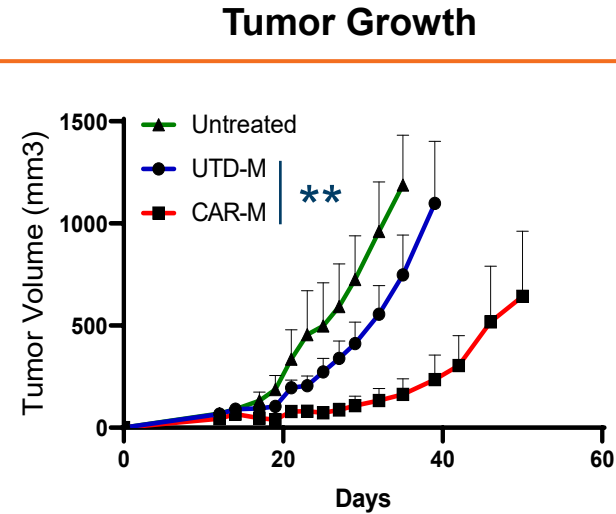
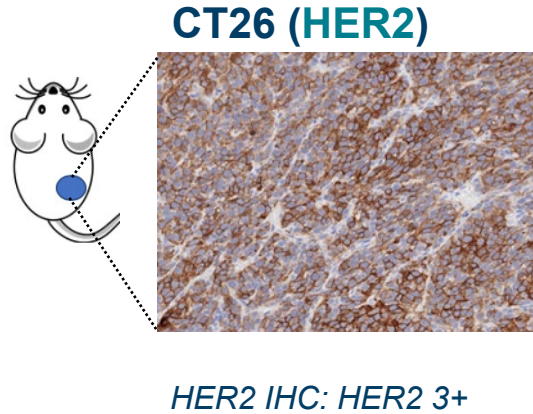
TRAFFICKING & PHAGOCYTOSIS

IMMUNE ACTIVATION

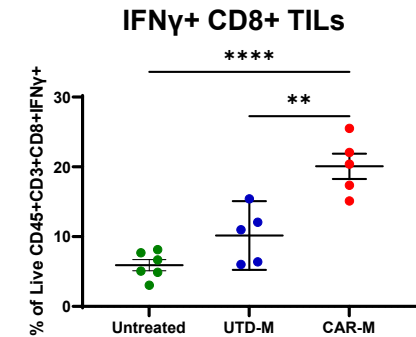
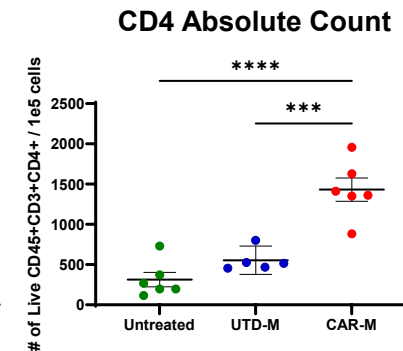
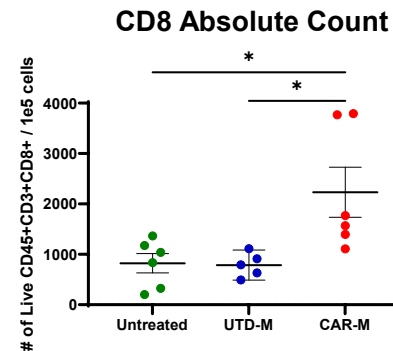
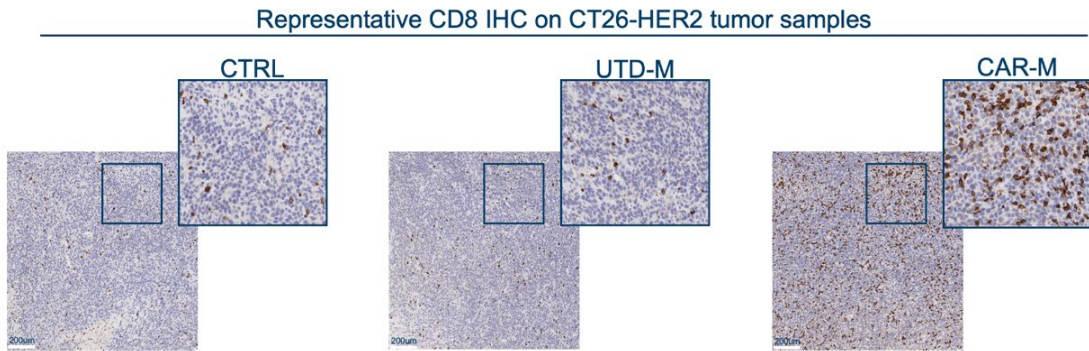
ANTIGEN PRESENTATION



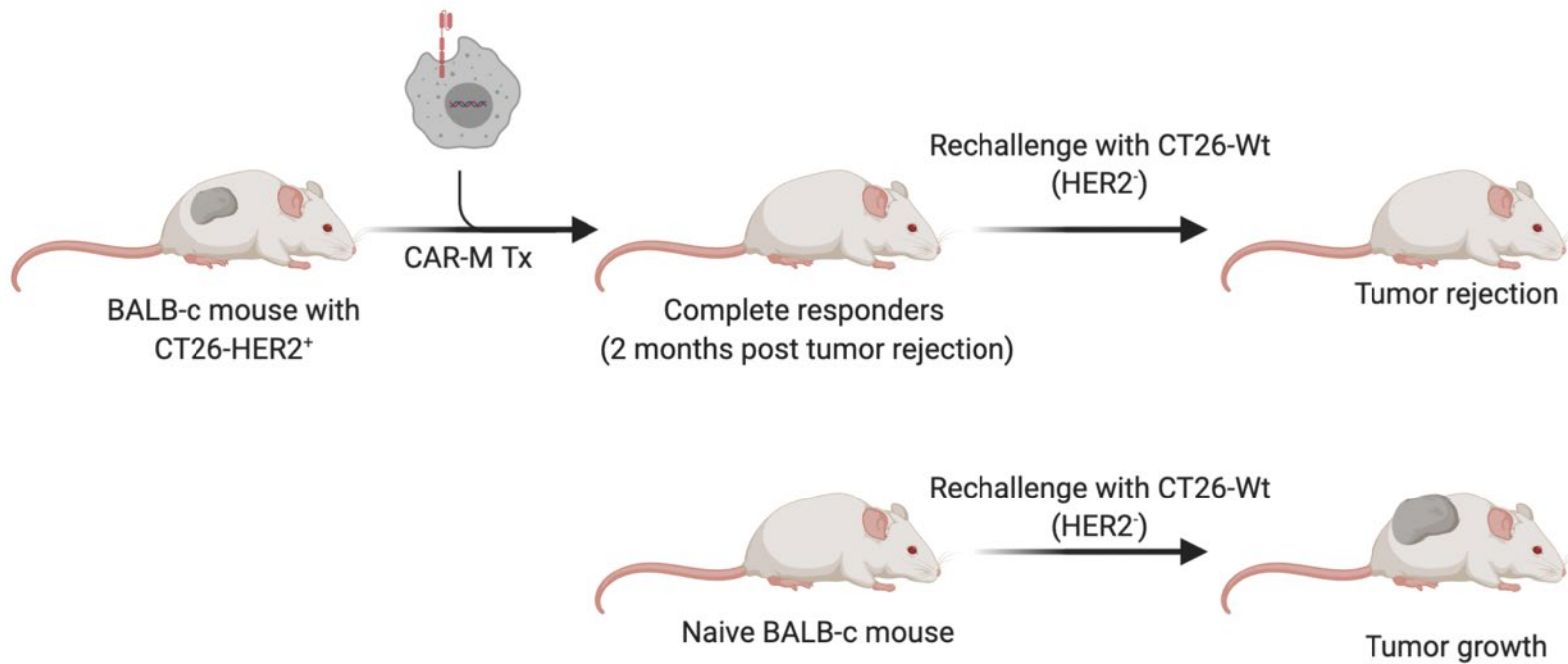
Ex vivo CAR-M shrinks tumors, modulates the TME, and induces systemic T cell responses in immunocompetent models



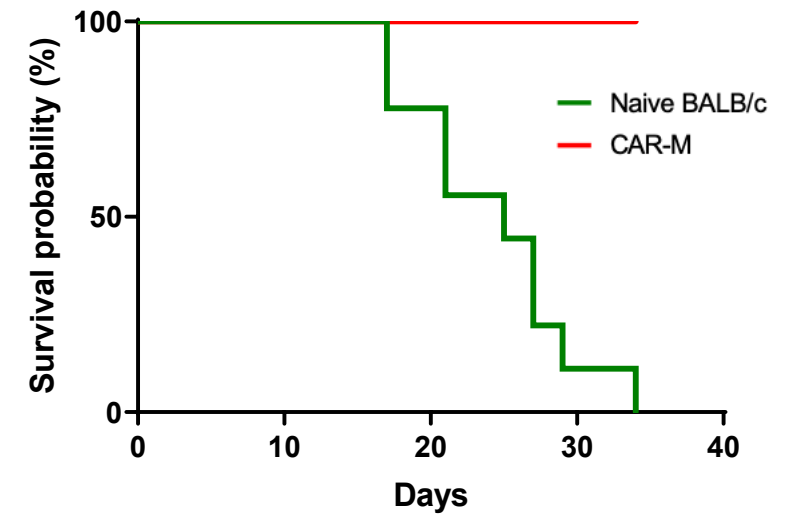
CAR-M modulate the TME – CD8 & CD4 T cell infiltration



Ex vivo CAR-M Therapy Protects Mice Against Tumor Recurrence and Prevents Antigen Negative Relapse



CT26 Wt (HER2-) rechallenge: Kaplan Meier Survival Curve



CT-0508 Phase I Study: Safety, Feasibility, and Evidence of CAR-M Mechanism of Action in Pts w/ HER2+ Solid Tumors

FEASIBILITY

- Successful manufacturing from autologous monocytes
- High CAR expression
- High purity/viability
- Robust M1 phenotype

PRELIMINARY CLINICAL PROFILE

- No dose limiting toxicities
- No severe CRS/ICANS
- No on target/off tumor tox
- Best overall response of SD
- SD in HER2 3+ population 44.4% (n=4/9); SD in HER2 2+ population 0% (n=0/5)

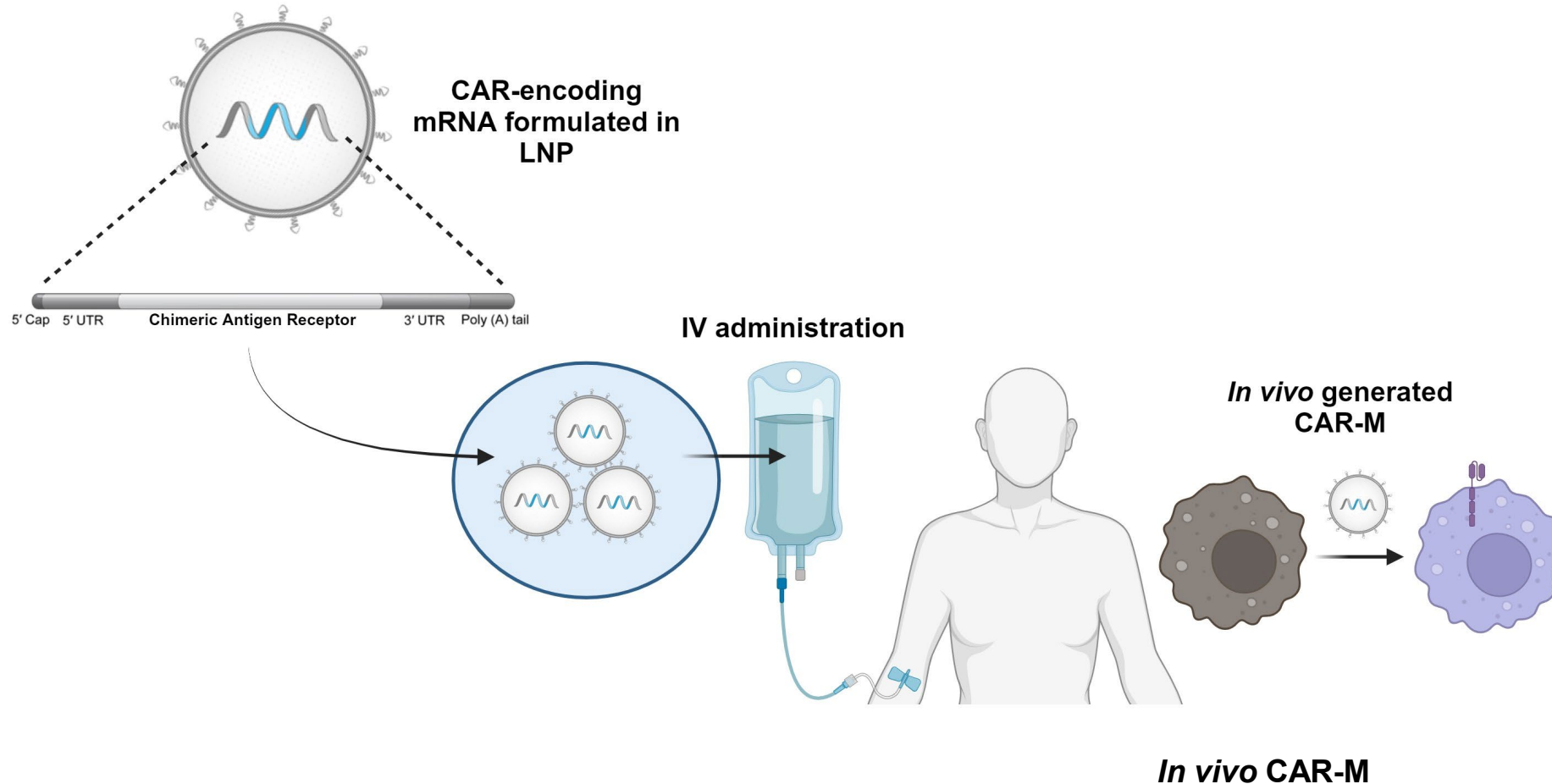
MECHANISM OF ACTION

- CT-0508 tumor infiltration detected
- TME remodeling correlates with clinical outcome
- T cell expansion and fitness correlates with clinical outcome
- Exhausted T cells increase on treatment

CT-0508 + Keytruda® (pembrolizumab) Phase I safety study enrolling in US

Directly Reprogramming Myeloid Cells *In Vivo* with mRNA/LNP

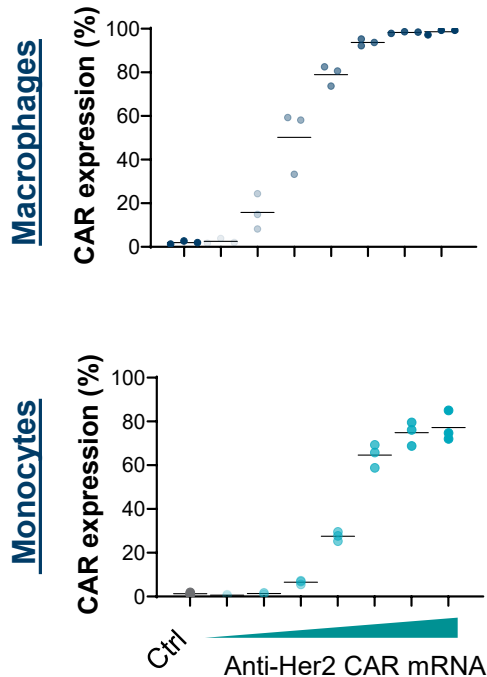
Redirecting endogenous myeloid cells with mRNA for cancer immunotherapy



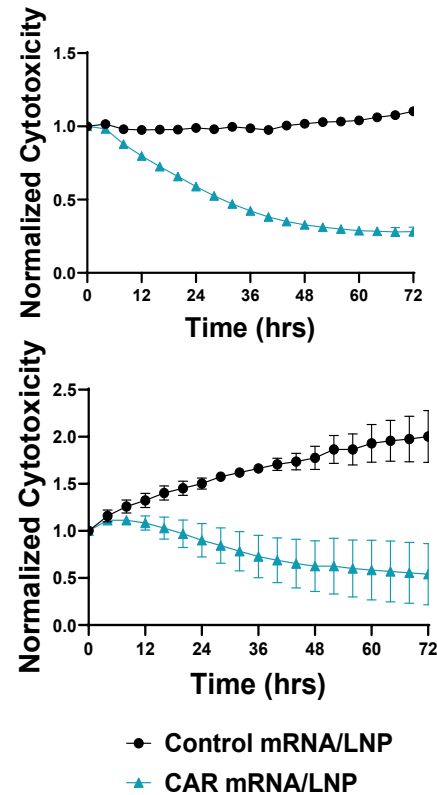
mRNA/LNP transfection generates highly functional CAR-M

Human macrophages and monocytes engineered with CAR-encoding mRNA/LNP *in vitro* demonstrated high CAR expression and antigen specific killing of tumor cells in 2D and 3D.

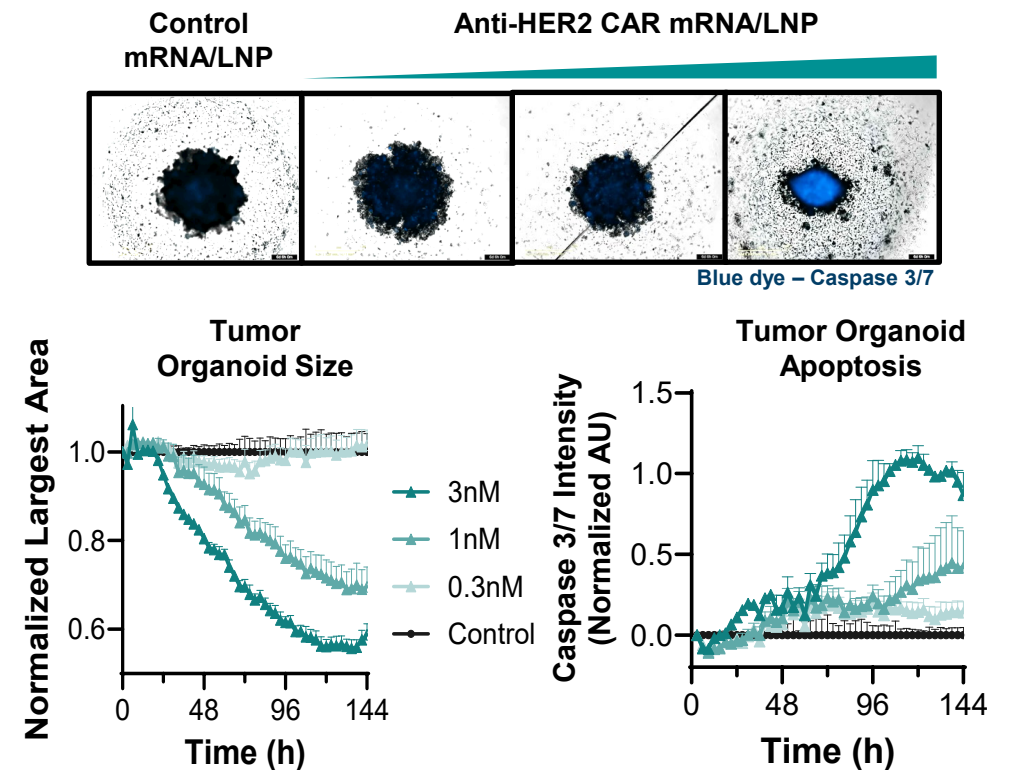
CAR Expression



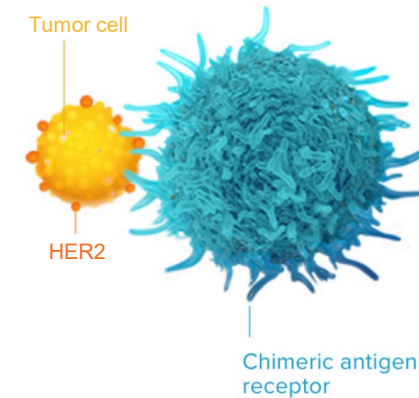
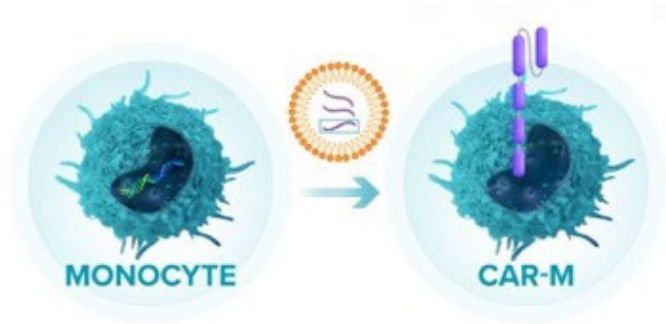
Tumor Killing



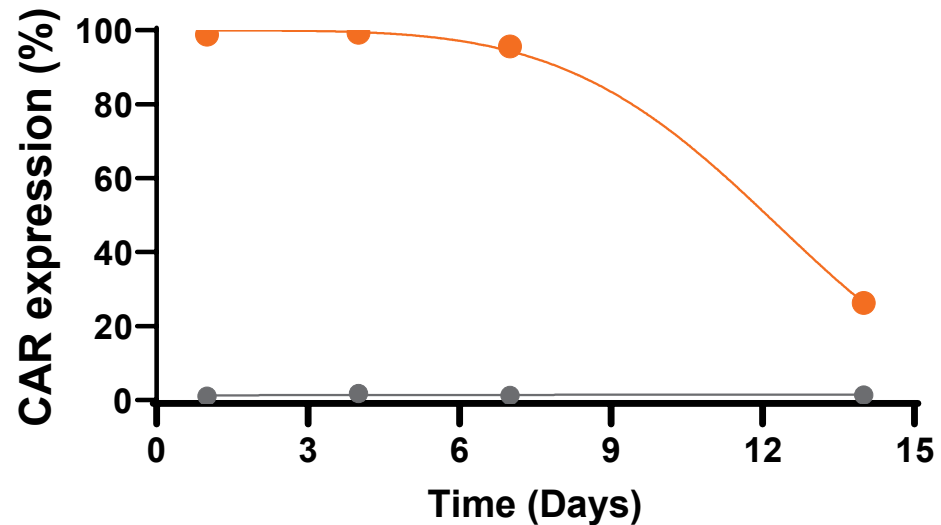
In Situ Reprogrammed TAMs Shrink Tumor Spheroids



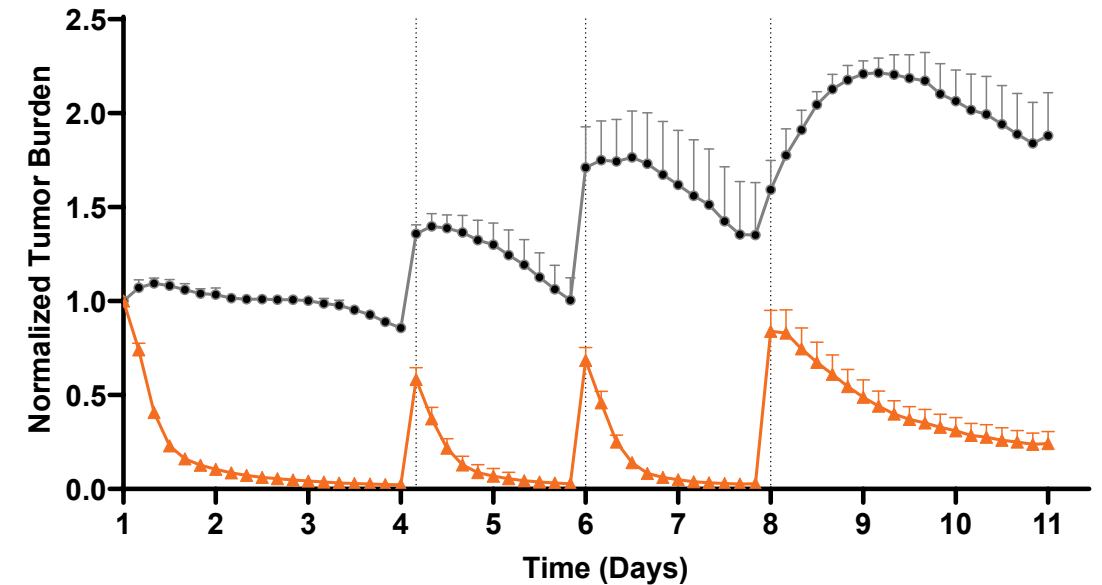
CAR expression and serial killing capacity following a single mRNA/LNP CAR transfection



CAR Persistence Following Single Transfection



Serial Killing of HER2+ AU565 Breast Cancer Cells



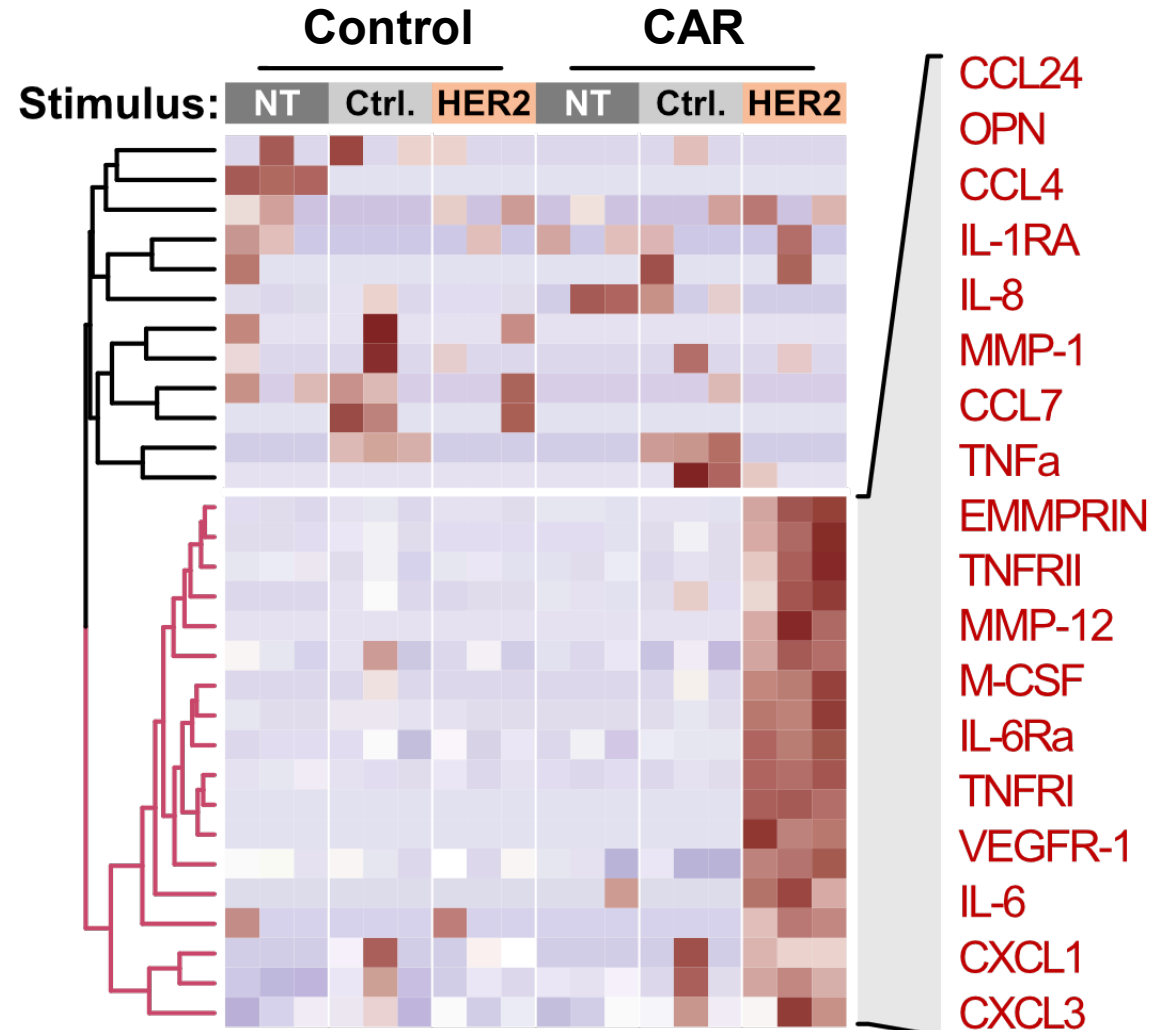
● Untreated Macrophages
 ▲ CAR mRNA/LNP

mRNA/LNP transfection generates highly functional CAR-M

Antigen dependent CAR signaling leads to broad proinflammatory cytokine secretion



- No Treatment (NT)
- Control Ag MSLN (Ctrl)
- Target Ag HER2 (HER2)



CAR engagement leads to CAR-M M1 polarization

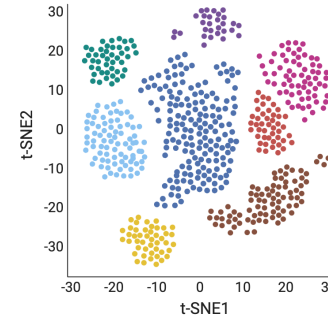


Control Ag MSLN (Ctrl)

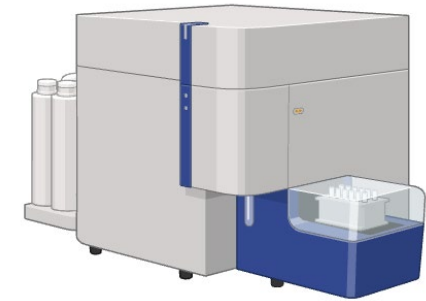
+

Target Ag HER2 (HER2)

RNA Sequencing



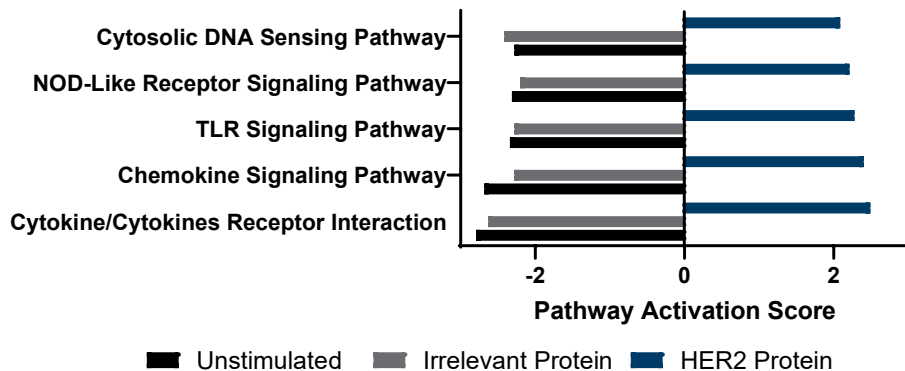
FACS



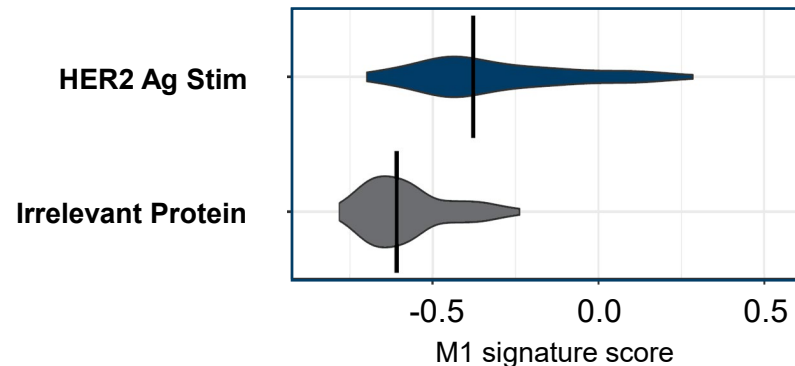
M1 / M2 Analysis

RNA-Sequencing Analysis of M1 Macrophage Gene Expression

CAR signaling activates pro-inflammatory pathways

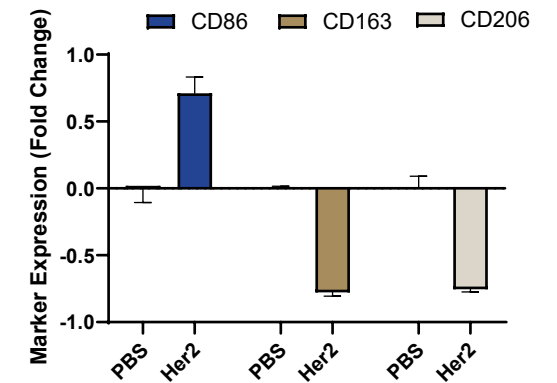


CAR signaling enhances M1 signature score



M1/M2 Surface Markers

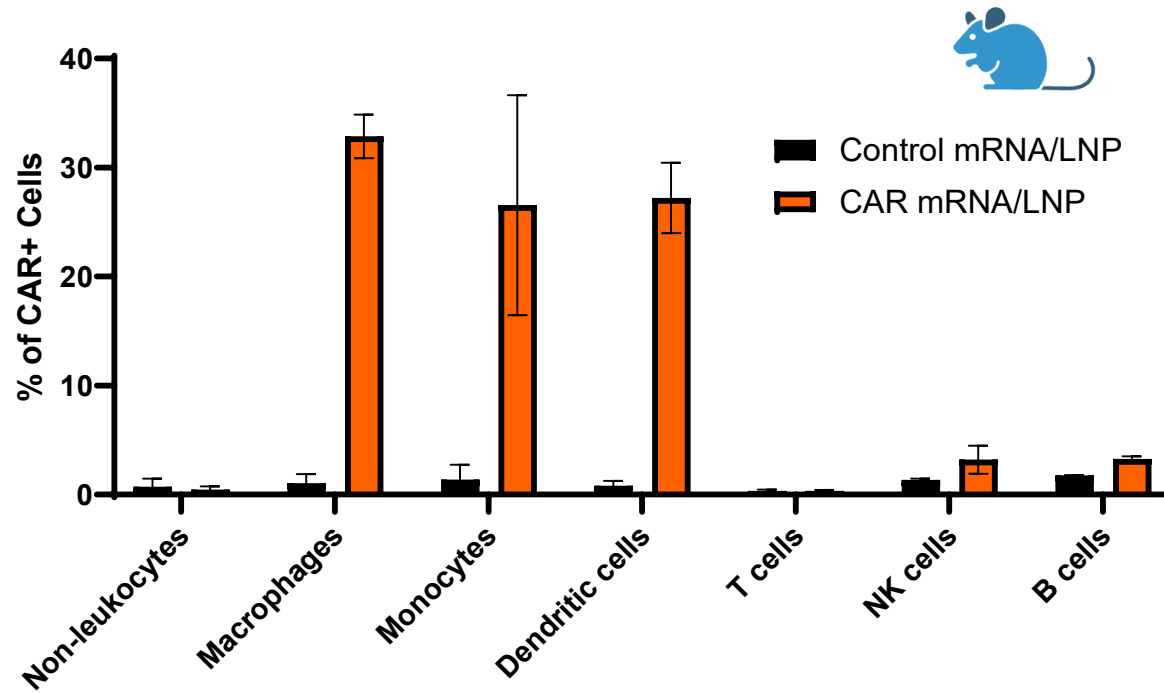
Increased M1 & Decreased M2 Markers



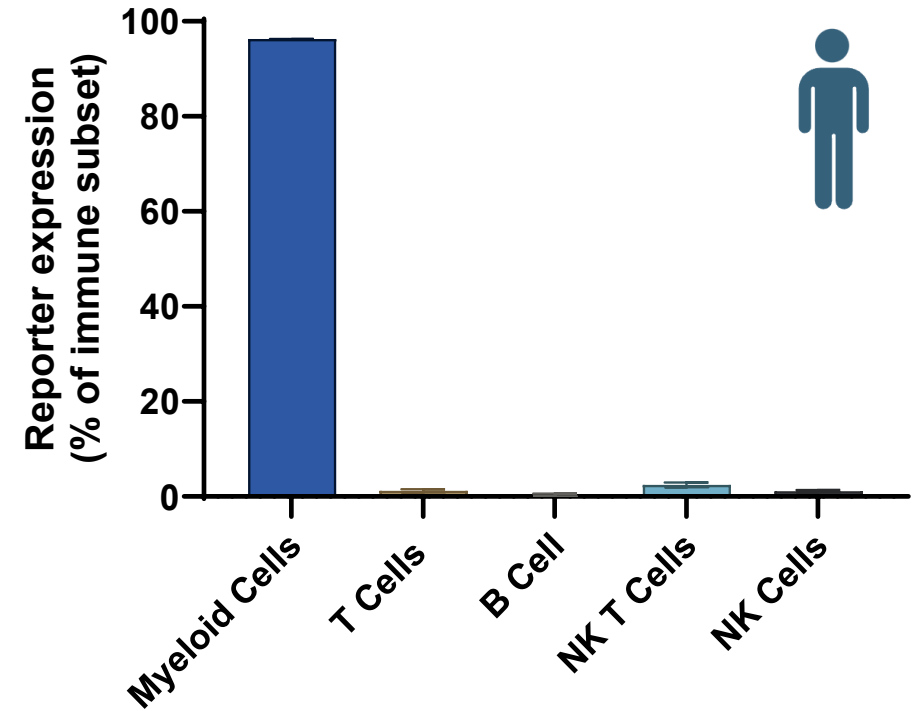
Systemic CAR mRNA/LNP administration leads to preferential expression in myeloid cells *in vivo*

Significant CAR expression observed in macrophages, monocytes, and dendritic cells

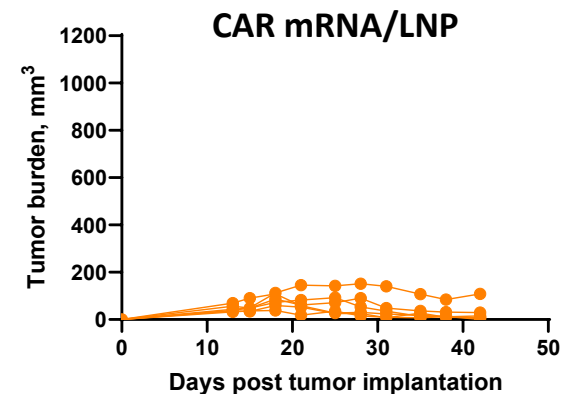
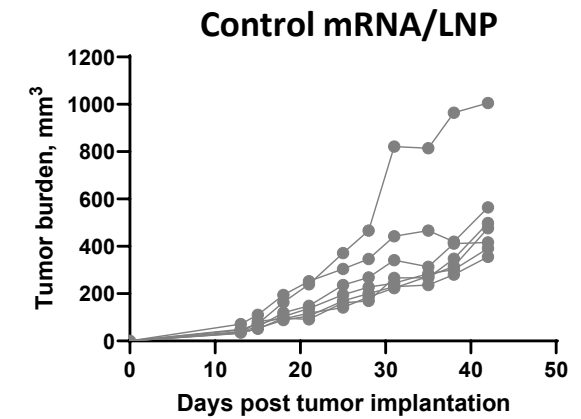
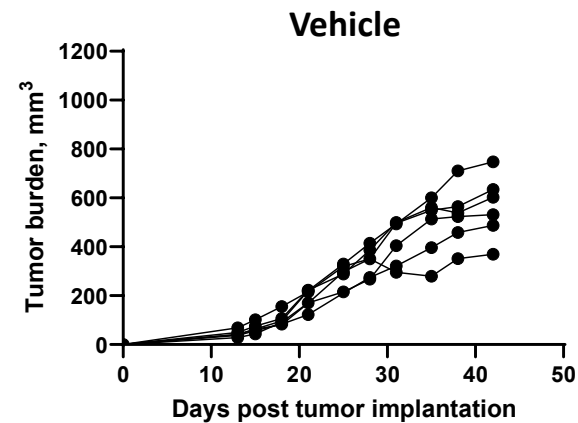
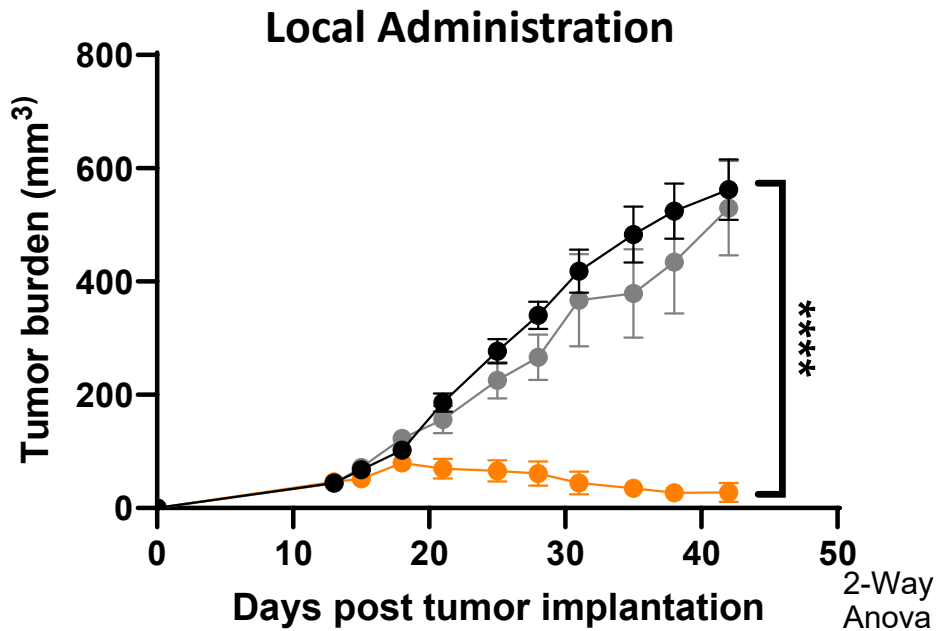
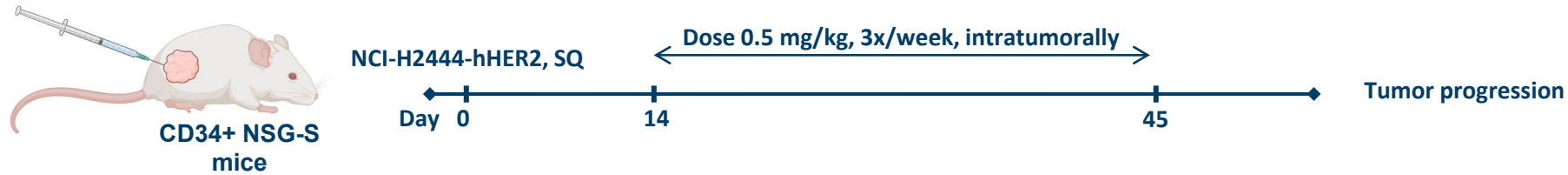
CAR Distribution *in vivo* (Mouse Blood)



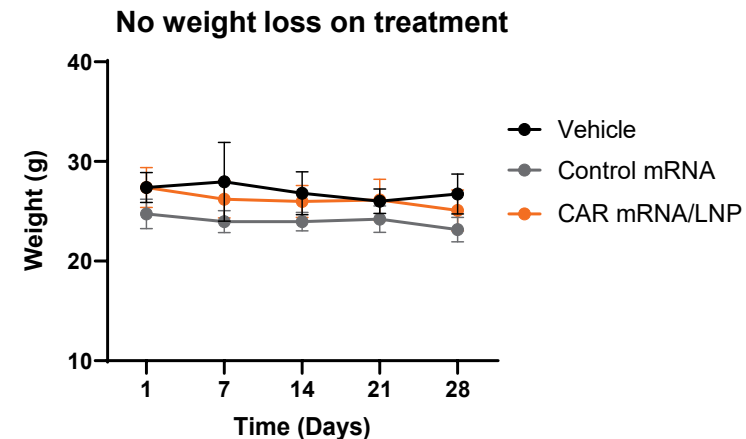
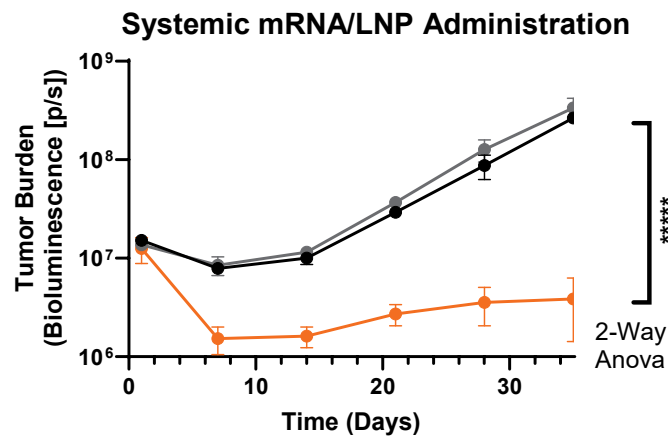
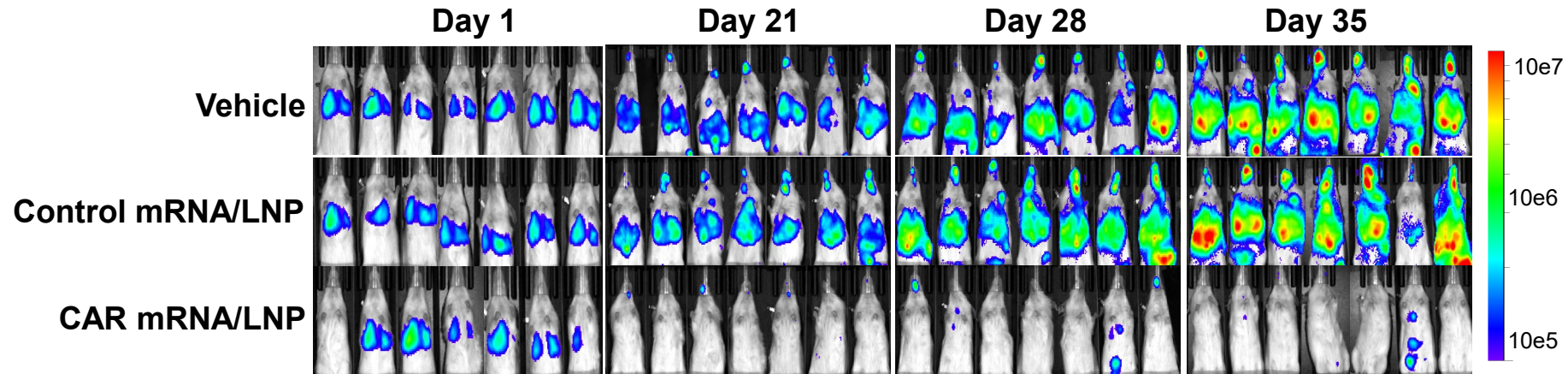
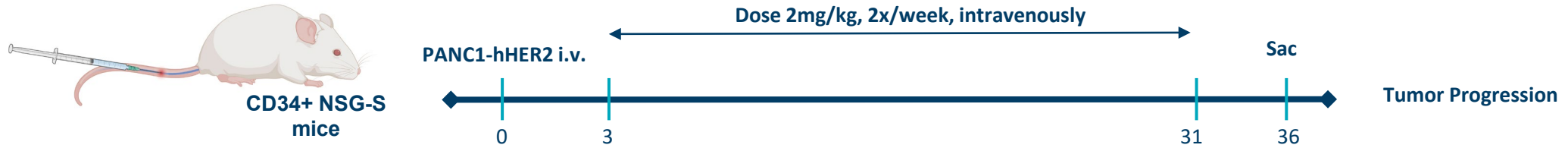
CAR Expression *in vitro* (Human PBMC)



Local administration of CAR mRNA/LNP in humanized mice leads to significant solid tumor control

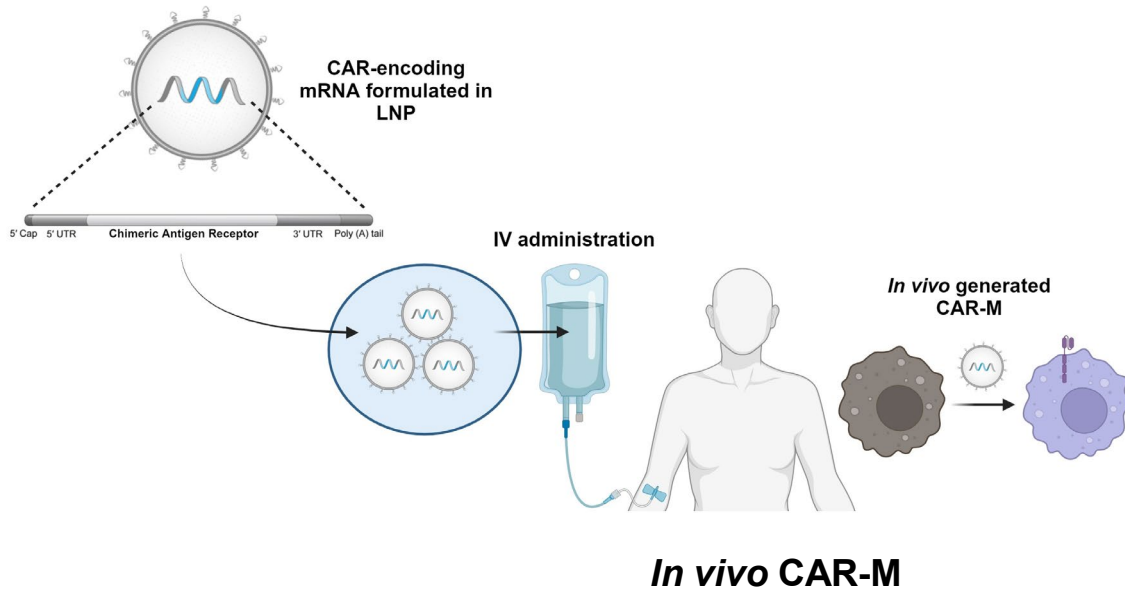


Intravenous administration of CAR mRNA/LNP leads to suppression of metastatic pancreatic tumor growth



In Vivo CAR-M: A novel cancer immunotherapy platform

Redirecting endogenous myeloid cells with mRNA for cancer immunotherapy

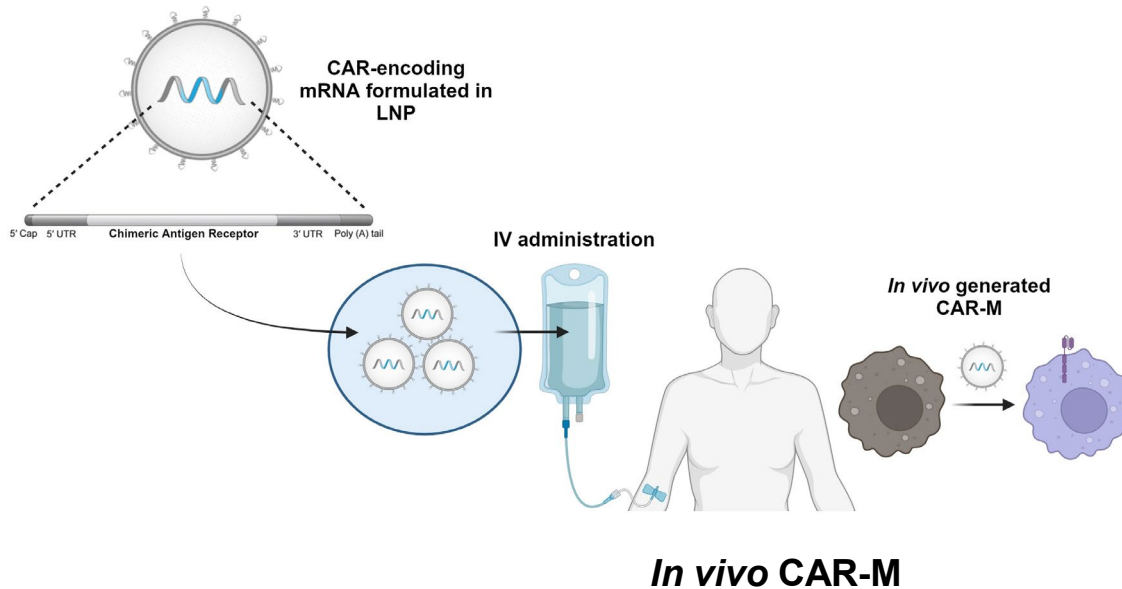


Summary and Key Takeaways

- ✓ mRNA/LNP CAR-M are highly functional
- ✓ CAR-M demonstrate targeted killing and secrete a broad array of inflammatory mediators
- ✓ CAR engagement polarizes CAR-M toward M1 phenotype
- ✓ Robust transfection of CAR+ myeloid cells in vivo w/minimal transfection of non-myeloid cells
- ✓ In Vivo CAR-M controls tumors upon regional or systemic administration and clears metastasis
- ✓ In Vivo CAR-M well tolerated in pre-clinical models

In Vivo CAR-M: A novel cancer immunotherapy platform

Redirecting endogenous myeloid cells with mRNA for cancer immunotherapy



Key Advantages

- ✓ Off-the-shelf
 - ✓ Full MHC matching (redirecting patient's own cells)
 - ✓ Non-viral, mRNA-based platform
 - ✓ Ability to re-dose to maintain pharmacologic pressure
 - ✓ Robust platform that can be developed against diverse tumor antigens/indications
- ✓ **Benefits of CAR-M therapy:**
- Targeted anti-tumor activity
 - Tumor infiltration
 - TME activation
 - T cell recruitment
 - Epitope spreading

Acknowledgements



Stefano Pierini, Asen Bagashev, Yumi Ohtani, Rashid Gabbasov, Kayleigh Ross, Shuo Huang, Amanda Bona, Sherly Mardiana, Kate Slovik, Alison Worth, Karan Nagar, Robert Saporito, Chris Sloas, Michael Ball, Rehman Qureshi, Nicholas Minutolo, Kevin Tosh, Claudia Lee, Louise Calabretta, Sascha Abramson, Michael Klichinsky, Thomas Condamine



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THANK YOU



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