# **Better Antibodies By Design**

36<sup>th</sup> Annual J.P. Morgan Healthcare Conference January 10, 2018





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This presentation contains forward looking statements. The words "believe", "expect", "anticipate", "intend" and "plan" and similar expressions identify forward looking statements. All statements other than statements of historical facts included in this presentation, including, without limitation, those regarding our financial position, business strategy, plans and objectives of management for future operations (including development plans and objectives relating to our products), are forward looking statements. Such forward looking statements involve known and unknown risks, uncertainties and other factors which may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by such forward looking statements. Such forward looking statements are based on numerous assumptions regarding our present and future business strategies and the environment in which we will operate in the future. The important factors that could cause our actual results, performance or achievements to differ materially from those in the forward looking statements include, among others, risks associated with product discovery and development, uncertainties related to the outcome of clinical trials, slower than expected rates of patient recruitment, unforeseen safety issues resulting from the administration of our products in patients, uncertainties related to product manufacturing, the lack of market acceptance of our products, our inability to manage growth, the competitive environment in relation to our business area and markets, our inability to attract and retain suitably gualified personnel, the unenforceability or lack of protection of our patents and proprietary rights, our relationships with affiliated entities, changes and developments in technology which may render our products obsolete, and other factors. Further, certain forward looking statements are based upon assumptions of future events which may not prove to be accurate. The forward looking statements in this document speak only as at the date of this presentation. Genmab does not undertake any obligation to update or revise forward looking statements in this presentation nor to confirm such statements to reflect subsequent events or circumstances after the date made or in relation to actual results, unless required by law.



## Genmab At-A-Glance Core Purpose, Strategy & Vision



#### Core Purpose

 To improve the lives of patients by creating & developing innovative antibody products



### Our Strategy

- Turn science into medicine
- Build a profitable & successful biotech
- Focus on Core Competence



### Vision

 By 2025, our own product has transformed cancer treatment and we have a pipeline of knock-your-socks off antibodies



## **Genmab At-A-Glance** Solid Foundation

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DARZALEX® Arzerra®	Tisotumab vedotin HuMax®-AXL-ADC HexaBody-DR5/DR5 DuoBody-CD3xCD20	DuoBody® Platform HexaBody® Tech.	Solid financial base	
2 marketed products generating royalty income	4 exciting proprietary clinical programs	2 proprietary next generation technologies for robust pre-clinical	Aim to own at least 50% of product rights Allows for building capabilities to market	

pipeline

own product in future



### **Innovative Clinical & Pre-clinical Pipeline**

## **Development for Marketed & Genmab Proprietary Products**

Disease Indications	Development Phase				
	Pre-Clinical	I	1/11	П	111
Multiple myeloma (MM)					
Non-MM & Solid tumor indications					
L) Follicular lymphoma (FL)					
Relapsing multiple sclerosis (RMS) (SubQ)					
Solid cancers					
Solid cancers					
Solid cancers					
Hematological malignancies					
	MM) Multiple myeloma (MM) Non-MM & Solid tumor indications Follicular lymphoma (FL) Relapsing multiple sclerosis (RMS) (SubQ) Solid cancers Solid cancers Solid cancers	MM)       Multiple myeloma (MM)       Image: Pre-Clinical         Non-MM & Solid tumor indications       Image: Pre-Clinical         CLL)       Follicular lymphoma (FL)         Relapsing multiple sclerosis (RMS) (SubQ)       Image: Pre-Clinical         Solid cancers       Image: Pre-Clinical         Solid cancers       Image: Pre-Clinical         Solid cancers       Image: Pre-Clinical         Solid cancers       Image: Pre-Clinical	• MM)       Multiple myeloma (MM)         Non-MM & Solid tumor indications         Follicular lymphoma (FL)         Relapsing multiple sclerosis (RMS) (SubQ)         Solid cancers         Solid cancers         Solid cancers         Solid cancers         Solid cancers	MM)       Multiple myeloma (MM)       I/II         Non-MM & Solid tumor indications       IIII         Follicular lymphoma (FL)       Relapsing multiple sclerosis         Relapsing multiple sclerosis       IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	MM)       Multiple myeloma (MM)       I/II       II         Non-MM & Solid tumor indications       IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII



## Innovative Clinical & Pre-clinical Pipeline Additional Shots on Goal

Product	Disease Indications	Development Phase				
		Pre-Clinical	I	1/11	П	III
Teprotumumab (RV001)BTDTarget: IGF-1R, Partner: Horizon Pharma	Graves' orbitopathy					
AMG 714 Target: IL-15, Partner: Celimmune	Celiac Disease					
ADCT-301 (HuMax-TAC-ADC)	Lymphoma					
Target: CD25, Partner: ADCT	Acute myeloid leukemia (AML) or acute lymphoblastic leukemia (ALL)					
JNJ-61186372 Targets: EGFR, cMet, Partner: Janssen	Non-small-cell lung cancer (NSCLC)					
JNJ-63709178 Targets: CD3, CD123, Partner: Janssen	Acute Myeloid Leukemia (AML)					
JNJ-64007957 Targets: BCMA, CD3, Partner: Janssen	Relapsed or refractory MM					
>20 Active Pre-clinical programs incl. DuoBody CD40x4-1BB	Proprietary programs: HuMab, HuMab- ADC, DuoBody, DuoBody-ADC & HexaBody					
Aim 4 INDs in 4 Years	Partnered programs: HuMab, DuoBody & HexaBody					



## **Cutting Edge Capabilities**

## Additional Value Created by Technologies



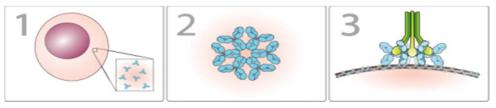
#### HexaBody Technology

- Robust effector function enhanced Ab
- Enables antibodies to readily form clusters of 6 (hexamers)
- Induces & enhances target cell killing after binding (CDC and apoptosis)
- Creates innovative products in cancer & infectious diseases
- Multiple ongoing research collaborations

#### **DuoBody Platform**

- Efficient & versatile bispecific Ab platform
- · Applicable to any antibody from any platform
- Regular IgG format
- · Large scale production validated
- No developability liabilities
- Robotized bispecific library generation
- Multiple ongoing collab. incl. with Novo Nordisk, Gilead & Janssen







### Daratumumab (Marketed as DARZALEX®) Approved in US, EU & Japan

First-in-class antibody targeting CD38 – 2 FDA BTDs

Marketed as monotherapy in US & EU for double refractory MM

Approved in US, EU & Japan in combo. w/ Revlimid  $\ensuremath{\mathbb{R}}$  & dex or Velcade  $\ensuremath{\mathbb{R}}$  & dex for relapsed / refractory MM

Approved in the US in combo. w/ Pomalyst® & dex for pts w/ MM who have received at least 2 prior therapies

Industry sponsored clinical studies ongoing in MM, NKT-cell lymphoma, MDS, amyloidosis and solid tumors

Blockbuster status – growing royalty income Royalty rate: 12% - 20%

Collaboration w/ Janssen Biotech

Up to \$1bn total in dev., reg. & sales milestones, Janssen responsible for all costs assoc. w/ dev. & commercialization

See local country prescribing information for precise indications





#### **Daratumumab Development**

### **Covering All Stages of Multiple Myeloma**

#### **High Risk Smoldering**

- Ph III subcutaneous (SC) (AQUILA)
- Ph II monotherapy (CENTAURUS)

#### Frontline

 Ph III D + Velcade®, melphalan & prednisone (D+VMP) (ALCYONE)

- Ph III D + VMP (Asia Pacific)
- Ph III D + Revlimid® & dexamethasone (D+Rd) (MAIA)
- Ph III D + Velcade, thalidomide & dexamethasone (D+VTd) (CASSIOPEIA)
- Ph II D + Revlimid, Velcade & dexamethasone (D+RVd) (GRIFFIN)
- Ph I Multi-combo (EQUULEUS)

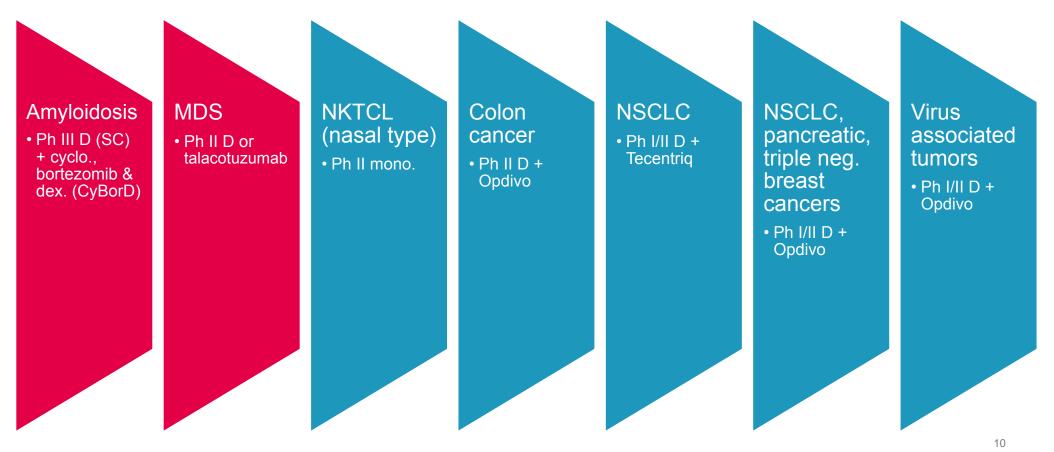
#### **Relapsed or Refractory**

- Ph III D + Vd (China)
- Ph III D + Kyprolis® & dexamethasone (D+Kd) (CANDOR)
- Ph III D (SC) + Pomalyst® & dexamethasone (D+Pd) (APOLLO)
- Ph III SC vs IV (COLUMBA)
- Ph II D + Imfinzi® (FUSION)
- Ph I D +Tecentriq®
- Ph I D + Opdivo®
- Ph I SC (PAVO)
- Ph I D + JNJ-63723283



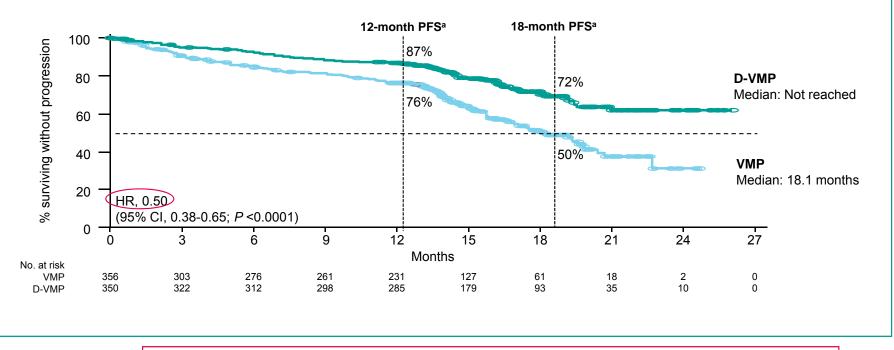
### **Daratumumab Development**

### **Beyond Multiple Myeloma**





## Front Line Multiple Myeloma: ALCYONE Ph III Newly Diagnosed Multiple Myeloma



#### In D-VMP arm:

- 50% reduction risk of disease progression or death in patients receiving D-VMP
- Median PFS not reached
- >3-fold higher MRD-negative rate

Data Presented at ASH – Atlanta, December 2017 / Basis of FDA & EMA Submissions, November 2017

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#### **Subcutaneous Daratumumab**

## Data Phlb PAVO Study in Relapsed or Refractory MM





## **Ofatumumab (Arzerra®)**

Human antibody targeting CD20

Two Phase III studies in relapsing MS ongoing

MS Advantages: Dosing Better disease management, subcutaneous dosing

MS Advantages: Attributes Potential for low immunogenicity, manageable safety profile

Marketed in various territories for certain CLL indications\*

Collaboration with Novartis Cash flow positive for Genmab Kure-0690-61 Arzerrae 1,000 mg/50 mL (20 mg/mL) Kuton, for Intravenous Infusion Kutos Vial - Discard Unused Portion Kutos Vial - Discard Unused Portion Kutos Kart Is Kutos Mart Is Kutos Kart Is

\*See local country prescribing information for precise indications



## Clinical Projects: Tisotumab vedotin Phase II for Cervical Cancer

Fully human antibody-drug conjugate (ADC)

Targets Tissue Factor (TF) Therapeutic potential in broad range of solid tumors

Ph II Study announced in cervical cancer Potential registrational pathway

Studies ongoing in solid tumors Indications incl. gynecologic (ovarian, cervical, and endometrial) cancers, prostate, bladder, & esophageal cancers, NSCLC & SCCHN

50:50 Co-development with Seattle Genetics





## Clinical Projects: HuMax-AXL-ADC Efficacy in *in vivo* Tumor Model

Human ADC

Targets tumor-associated AXL

Therapeutic potential in solid tumors

First-in-human Phase I/II study Indications incl. gynecologic (ovarian, cervical, & endometrial) cancers, thyroid cancer, NSCLC and melanoma Initiating expansion cohorts in 2018

ADC technology licensed from Seattle Genetics





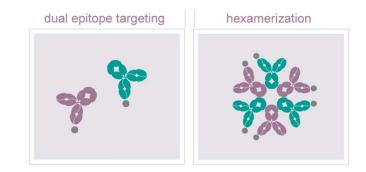
## **Clinical Projects: HexaBody-DR5/DR5** Potential in Solid Tumors

Proprietary HexaBody technology

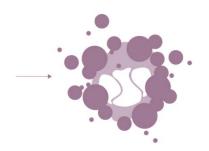
DR5 as tumor target

IND & CTAs filed in Q4 2017 Initiating Phase I/II study in Q1 2018

Potential in solid cancers Colorectal, NSCLC, triple neg. breast cancer, renal cell cancer & urothelial cancer



Apoptosis by hexamer-induced DR5 clustering and outside-in signaling





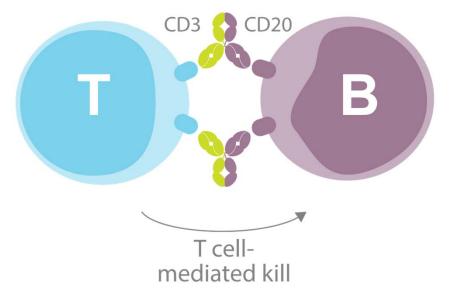
## Clinical Projects: DuoBody-CD3xCD20 Phase I/II Study Planned

Proprietary DuoBody Technology

CD20 as tumor target

IND & CTAs filed in Q4 2017 Initiating Phase I/II study in 2018

Potential in B-cell malignancies





## Well-Capitalized Biotech – 2017 Guidance

Income Statement	DKKM	USDM*	
Revenue	2,240 - 2,440	355 - 387	
Operating expenses	(1,000) – (1,100)	(159) – (174)	
Operating income	1,190 – 1,390	189 - 221	
Cash position at end of year**	>4,900	>777	
*USD 1.00 = DKK 6.3038 **Cash, cash equivalents and marketable securities			

2017 Guidance - Nov 29, 2017

#### DARZALEX sales

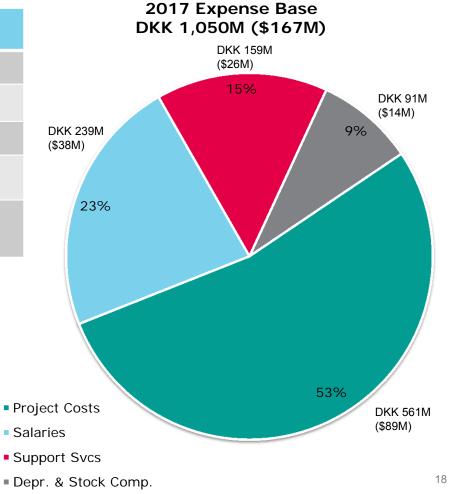
Genmab's estimate of DARZALEX net sales USD 1.1-1.3 billion

#### Revenue mid-point DKK 2,050M

- DARZALEX royalties DKK 1,000M
- DARZALEX milestones DKK 1,090M
- Quality of revenue improving

#### Expense mid-point DKK 1,050

- Expense increase DKK 287M, +38%
- Continued investment in our clinical & pre-clinical pipeline
- 8 pipeline projects drive ~DKK 440M, 42% of total expense





## **2018 Company Goals** Maximizing Differentiated Product Portfolio Value

Priority	✓	Targeted Milestone
Maximize daratumumab progress		<ul> <li>» FDA and EMA decision on Phase III ALCYONE multiple myeloma (MM) submission</li> <li>» Start new Phase III MM study</li> <li>» Report early clinical data in solid tumors</li> <li>» Phase III MAIA MM efficacy analysis in frontline</li> <li>» Phase III CASSIOPEIA MM efficacy analysis in frontline</li> </ul>
Optimize ofatumumab value		» Complete recruitment Phase III subcutaneous ofatumumab relapsing MS studies
Maximize tisotumab vedotin progress		<ul> <li>» Start two Phase II studies cervical cancer (recurrent / metastatic &amp; combination study in frontline)</li> <li>» Start Phase II study in additional solid tumor indications</li> </ul>
Strengthen differentiated product pipeline and technology partnership portfolio		<ul> <li>Start HuMax-AXL-ADC expansion phase in ongoing Phase I/II study</li> <li>Progress HexaBody-DR5/DR5 Phase I/II study</li> <li>Progress DuoBody-CD3xCD20 Phase I/II study</li> <li>Accelerate proprietary DuoBody Immuno-Oncology programs towards clinic</li> <li>Enter new technology or product collaborations</li> </ul>
Disciplined financial management and building a commercial footprint		<ul> <li>» Execute controlled company growth with selective investments in product &amp; technology pipeline</li> <li>» Continue investing in building commercialization and launch capabilities</li> </ul>



## **Creating Value for Patients & Shareholders**

## Building on 3 central pillars: Focus, Innovation & Execution



2 marketed products



4 proprietary early stage clin. programs



2 proprietary technologies



expertise

Robust pre-clinical pipeline

World-class antibody & R&D

Strategic collaborations



Building commercial expertise



Solid financials



Rroven track record

www.genmab.com