

# **Better Antibodies By Design**

Credit Suisse 2015 Global Healthcare Conference March 3, 2015



# **Forward Looking Statement**

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.

# **Antibody Innovation Generating World Class Products**



Focus on Cancer

- Differentiated human antibodies
- Track record breakthrough therapeutics

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### **Robust Product Pipeline**

- Ofatumumab cancer & autoimmune potential (marketed as Arzerra® in various CLL indications)
- Daratumumab blockbuster potential
- HuMax®-TF-ADC in Phase I solid cancers



### Passion for Innovation

- World class antibody know-how
- Proprietary technologies DuoBody<sup>®</sup> & HexaBody<sup>™</sup>
- Innovative pre-clinical pipeline



#### Partnerships → Product Ownership

- · Key collaborations drive current pipeline
- Product opt-ins + retain products for future value
- Well capitalized

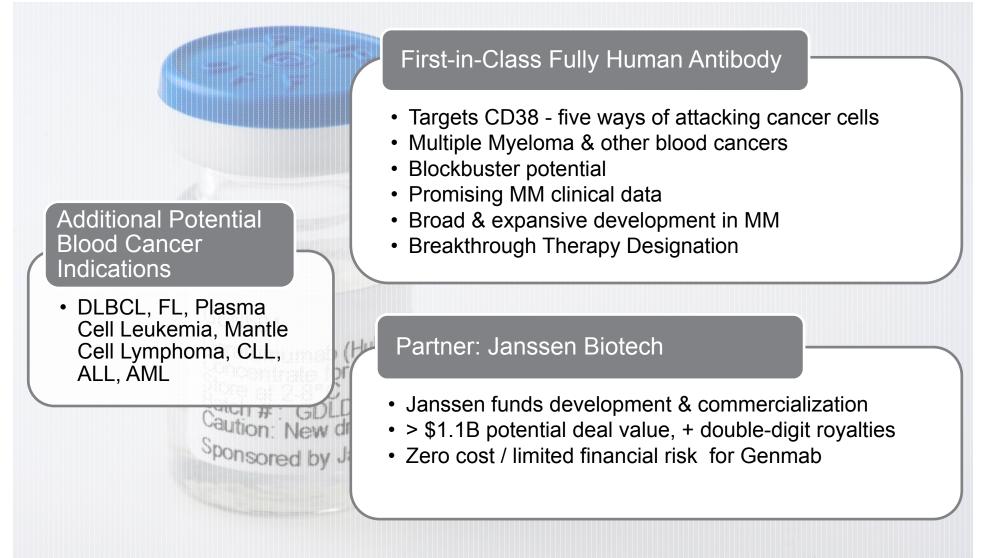


# **Innovative Pipeline**

		Development Phase					
Product	Disease Indications	Pre- clinical		Ш	Ш		
<b>Ofatumumab</b> 10 studies Target: CD20	Chronic lymphocytic leukemia (CLL)						
Indication: Cancer Partner: Novartis	Follicular lymphoma (FL)						
Ofatumumab 2 studies	Pemphigus vulgaris (PV)						
Target: CD20 Indication:	Relapsing remitting multiple sclerosis (RRMS)		Anr	lounced			
Autoimmune Partner: GSK	Neuromyelitis optica (NMO)		Announ	ced	>		
Daratumumab	Multiple myeloma (MM)				$\rightarrow$		
Target: CD38 Partner: Janssen	Non-Hodgkin's Lymphoma (NHL)		Announ	ced	>		
HuMax-TF-ADC Target: TF Partner: Seattle Genetics	Solid Cancers						
<b>Teprotumumab</b> 2 studies	Active thyroid eye disease						
Target: IGF-1R Partner: River Vision	Diabetic macular edema			•			
➢ 20 Active Pre-clinical	Partnered programs: HuMab, DuoBody & HexaBody						
programs incl. HuMax-AXL-ADC	Proprietary programs: HuMab, HuMab-ADC, DuoBody, DuoBody-ADC & HexaBody						

Subcutaneous formulation of ofatumumab

# Daratumumab (HuMax<sup>®</sup>-CD38) First-in-Class Antibody with Broad-Spectrum Killing Activity



# Expansive Daratumumab Development 12 Ongoing or Announced Studies

			D	evelo	Development Phase					
ndication	Disease Stage	Therapy	Pre- clinical	I.	I/II	Ш	ш			
	Smoldering	Mono*								
		Dara + VMP								
	Front line	Dara + Revlimid + Dex*								
	(transplant & non- transplant)	Dara + VTD*								
Multiple Myeloma**		Multi combo: 1 Study								
		Dara + Revlimid + Dex								
		Dara + Revlimid + Dex				>				
	Relapsed or Refractory	Dara + Velcade + Dex								
		Mono, Japan								
		Mono, safety								
	Double Refractory	Mono, BTD population					>			
NHL	Relapsed or Refractory	Mono*					>			
Non-MM	Various	Potential in: FL, DLBCL, Mantle Cell Lymphoma, ALL, AML, CLL		•						

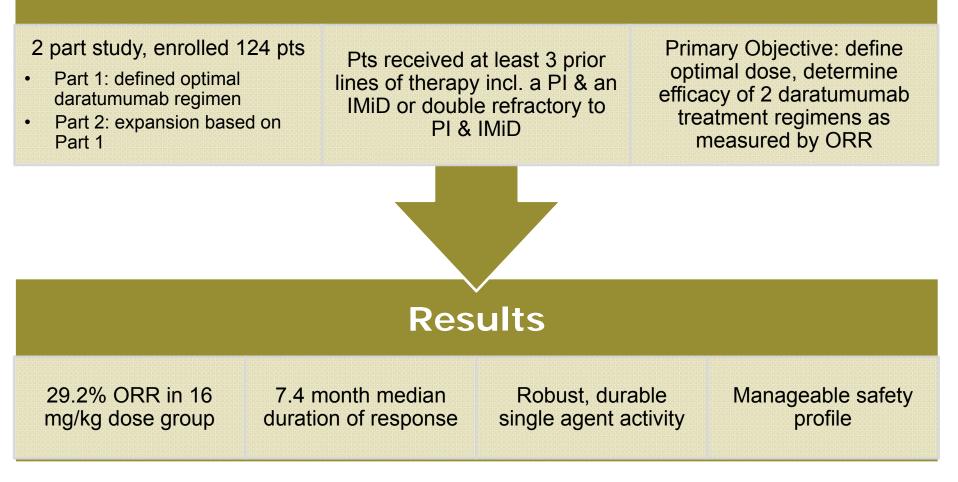
\*Study announced, first patient not yet dosed. \*\*Maintenance integrated into some study protocols

VMP = bortezomib & melphalan-prednisone VTD = bortezomib, thalidomide & dexamethasone BTD = Breakthrough Therapy Designation 6

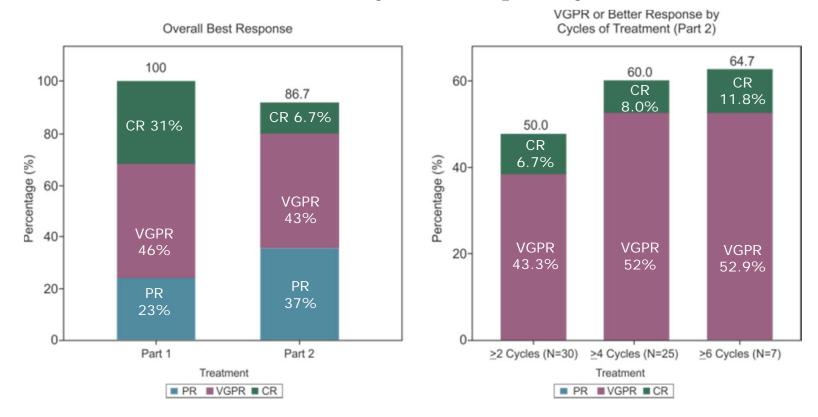


# **Positive Preliminary Results:** Daratumumab Phase II Study in Double Refractory MM

# **Study Design**



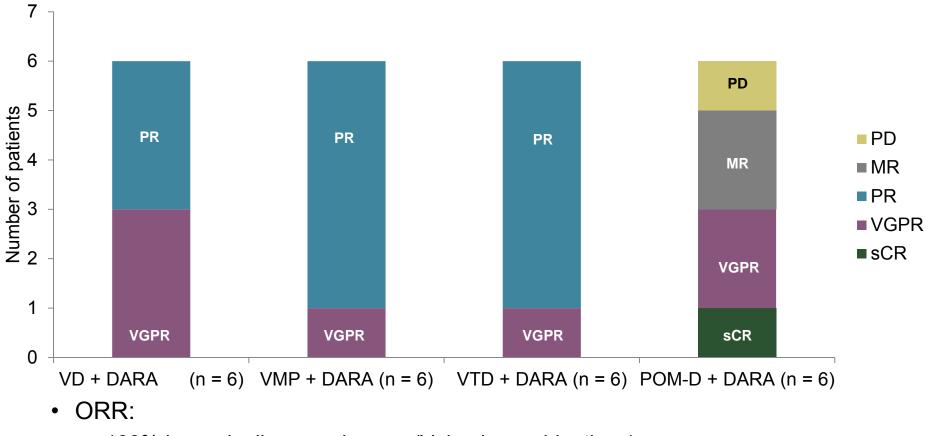
# Daratumumab: Early Signs of Clinical Activity Ph I/II Revlimid Combo Study in Multiple Myeloma



- Part 1; ORR 100% (31% CR, 46% VGPR)
- Part 2; ORR 87% (7% CR, 43% VGPR)
- 75% VGPR or better in patients treated for at least 6 months

Genmab

# Daratumumab: Early Signs of Clinical Activity Ph Ib MM Combo Study with Velcade / Pomalidomide Regimens



- 100% in newly diagnosed group (Velcade combinations)
- 50% in relapsed group –all <u>></u>VGPR (POM-D combination)

V, bortezomib; D, dexamethasone; DARA, daratumumab; M, melphalan; P, prednisone; T, thalidomide; POM, pomalidomide. sCR, stringent complete response; VGPR, very good partial response; PR, partial response; MR, minimal response; PD, progressive disease.

# Arzerra<sup>®</sup> (ofatumumab)

### Sales by GSK

- 2014 sales GBP 54.5M (~\$82.2M); royalty DKK 101M
- Genmab Cancer Royalty = 20%

Hrzerro® 10 steriit koncentrat steriili konsentraat Ofatumumab/Ofat i.v. 1000 mg/50 ml

#### **Our First Marketed Product**

- Human antibody targeting CD20 on cancerous B-cells
- Differentiated vs other CD20 mAb, targets slice of > \$8B market

#### Cancer

- Approved\*
  - US 1<sup>st</sup> Line CLL in combo w/ chlorambucil
  - EU 1<sup>st</sup> Line CLL in combo w/ chlorambucil or bendamustine
  - Fludarabine and alemtuzumab refractory CLL
- Phase III trials in CLL & FL
- · Partnered with Novartis

#### Autoimmune diseases (unapproved)

- Phase III trial ongoing in PV
- Relapsing remitting MS Ph III's & pivotal NMO trials announced
- Partnered with GSK

\*In US approved in combination with chlorambucil for the treatment of previously untreated patients with CLL for whom fludarabine-based therapy is considered inappropriate as well as for the treatment of patients with CLL refractory to fludarabine and alemtuzumab.

In EU approved in combination with chlorambucil or bendamustine for the treatment of patients with CLL who have not received prior therapy and who are not eligible for fludarabinebased therapy, as well as for the treatment of patients with CLL refractory to fludarabine and alemtuzumab.



# Transfer Ofatumumab Collaboration from GSK to Novartis

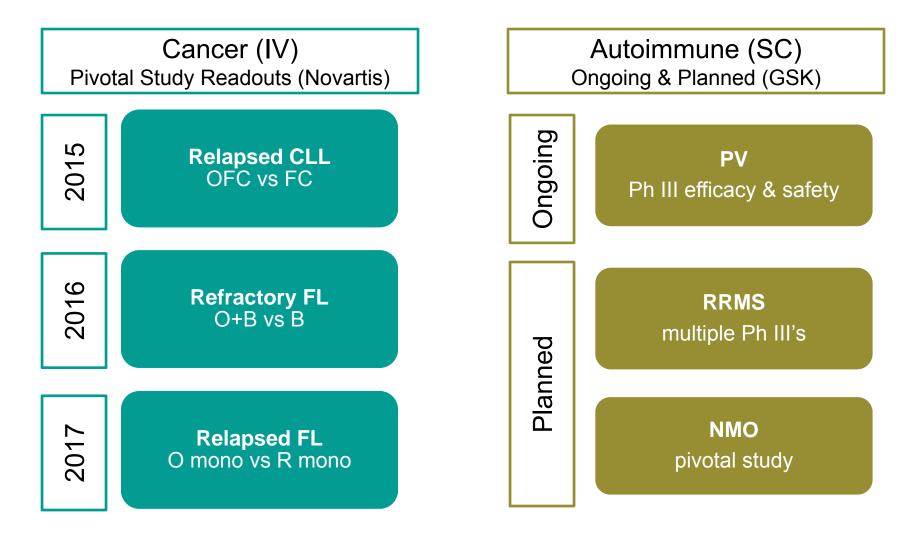
- Existing of atumumab collaboration transferred to Novartis
- Novartis to develop of atumumab in cancer indications
- GSK to continue of atumumab development in autoimmune diseases
- No further Genmab funding beyond December 2014
- Future cash impact GBP 60 M (DKK 570 M)
- CD20 exclusivity provisions modified





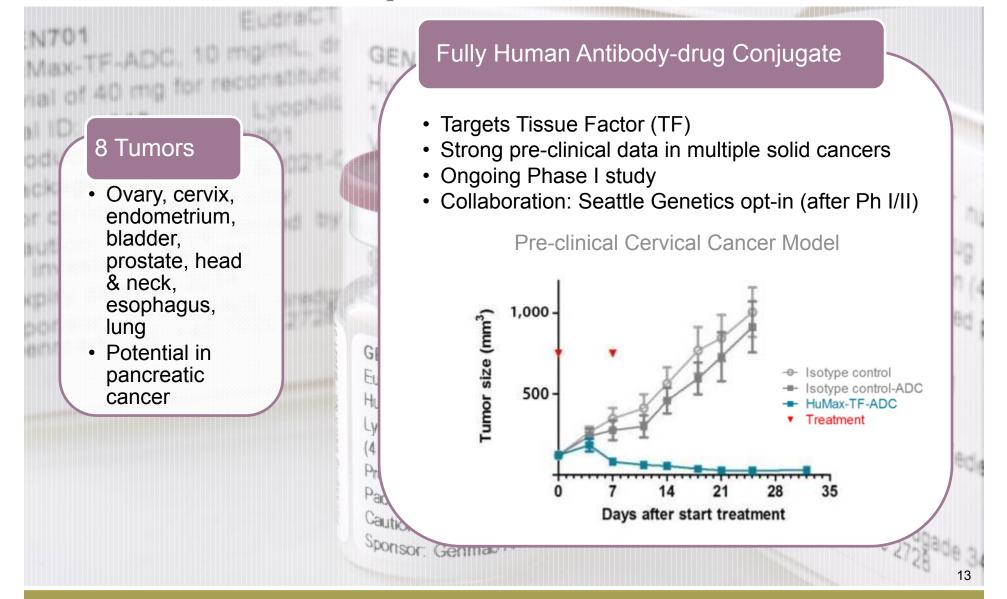


# **Ofatumumab: Planned & Ongoing Trials**





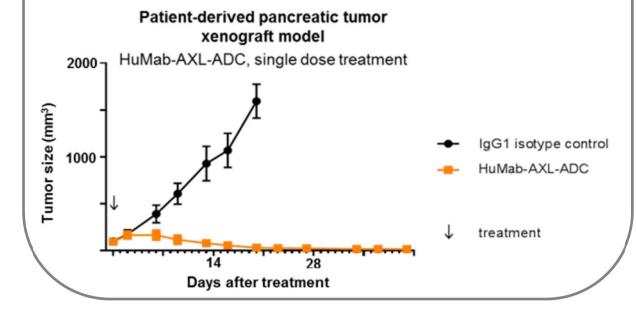
# HuMax<sup>®</sup>-TF-ADC: In the Clinic Next Generation Therapeutics

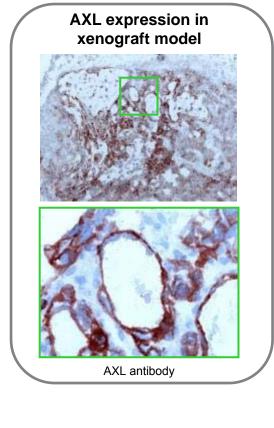


# HuMax-AXL-ADC Efficacy in *in vivo* Tumor Model

### Fully Human Antibody-Drug Conjugate

- Targets AXL signaling molecule expressed on many solid cancers
- HuMax-AXL-ADC shows anti-tumor activity in patient-derived xenograft model with heterogeneous target expression
- Collaboration: Seattle Genetics







# DuoBody<sup>®</sup> Technology Efficient & Versatile Platform for Bispecific Antibodies

### DuoBody

- Dual-targeting, potential to improve specificity & efficacy
- Large scale manufacturing
  - Minimal protein engineering
  - Excellent quality BsAb at very high yields
- Differentiated from competitor platforms
  - Proper in vivo half-life
- Fc-effector functions
- Good manufacturability

### **Ongoing Collaborations**

- 3 Commercial deals
- Novartis (2 progr., \$175M potential deal value + royalties)
- Janssen Biotech (20 progr., \$3.6B potential deal value + royalties)
- BioNovion (expansion research deal)
- 6 Research deals
  - Lilly, Kirin, Cormorant, undisclosed major Biotech, Agenus, Humabs BioMed



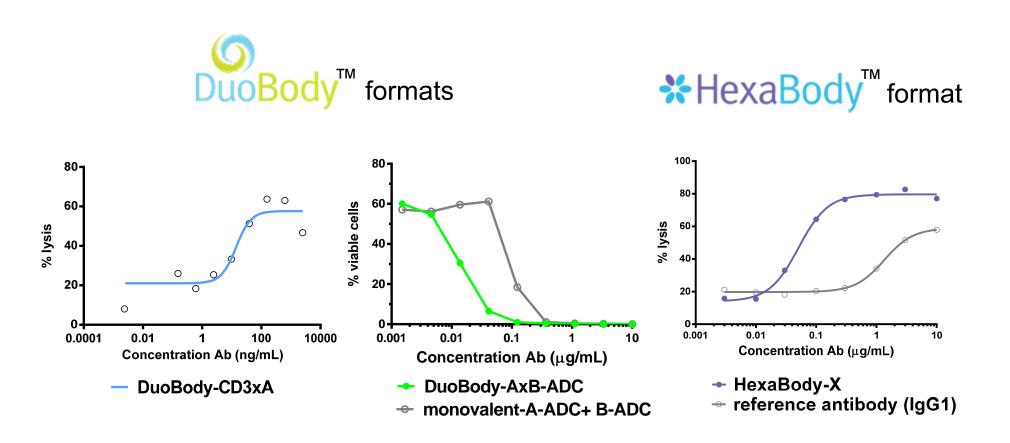
# HexaBody<sup>TM</sup> Technology Robust Effector Function Enhanced Antibodies

### HexaBody

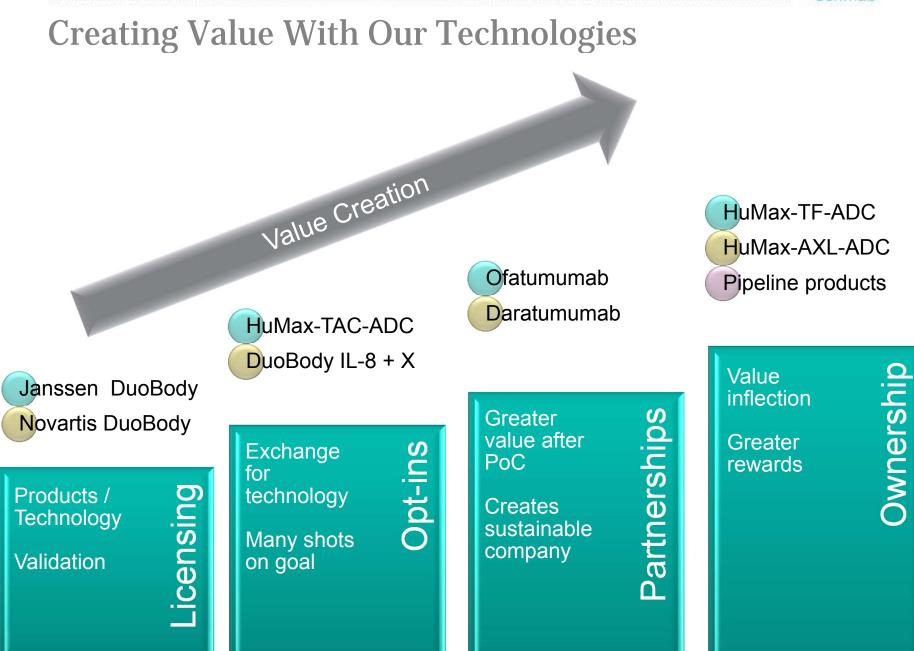
\*HexaBod

- Enables antibodies to readily form clusters of 6 (hexamers)
- Induces & enhances target cell killing after binding via CDC
- CDC capability to essentially any antibody
- Builds on natural antibody biology minimal engineering
- Create novel, differentiated products in cancer & infect. dis.
- Repurpose / rescue drug candidates that failed in Phase II/III
- Life cycle management
- Collaborations with undiscl. major Biotech & Humabs BioMed

## **Genmab's Robust Innovative Pre-Clinical Pipeline**







# Well-Capitalized Biotech – 2015 Guidance

Income Statement	DKKM	USDM*	2015 Expense Base DKK 625M (\$102M)
Revenue	650 - 725	106 - 118	DKK 50M
Operating expenses	(600) – (650)	(98) – (106)	(\$8M) DKK 90M (\$15M)
Reversal of GSK Liability	175	29	DKK 165M (\$27M)
Operating income	200 - 275	33 - 45	26%
Cash position at end of year**	2,300 – 2,400	376 – 392	34%
*USD 1.00 = DKK 6.1 **Cash, cash equivale		ole securities	DKK 110M 18%
2015 Guidance – March 2. 2	015		(\$18M) DKK 210N (\$34M) Pevelopment Research Salary Depreciation & Warrants Other



# 2015 Goals: Maximizing Pipeline Value

Priority	$\checkmark$	Targeted Milestone
Maximize daratumumab clinical progress	~	<ul> <li>» Phase II MM monotherapy data &amp; - if favorable, discuss regulatory next steps with health authorities</li> <li>» Start multiple new MM trials</li> <li>» Start non-MM clinical trial</li> </ul>
Optimize ofatumumab value		<ul> <li>» File for an additional indication</li> <li>» Phase III relapsed CLL data</li> <li>» Start Phase III sc autoimmune trials</li> </ul>
Strengthen differentiated product pipeline		<ul> <li>» Phase I HuMax-TF-ADC data</li> <li>» Progress HuMax-AXL-ADC</li> <li>» Progress pre-clinical DuoBody &amp; HexaBody projects</li> </ul>
Broaden partnership portfolio with next generation technologies	~	<ul> <li>» Expand DuoBody &amp; HexaBody collaborations</li> <li>» Progress partnered programs</li> <li>» New IND filings</li> </ul>
Disciplined financial management		» Maintain cost base while selectively investing to advance pipeline



## **On Track to a Sustainably Profitable Future**



- Robust differentiated product pipeline
  - Daratumumab, ofatumumab, HuMax-TF-ADC
  - Innovative pre-clinical pipeline
- Proprietary technologies -DuoBody & HexaBody
- Partnerships → Product ownership
  - Well capitalized
- Positioned for success
  - For patients & shareholders



# **Better Antibodies By Design**

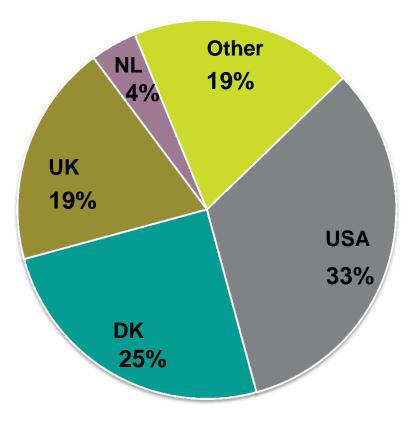
Appendix



### **International Shareholder Base**

- Major shareholders >5%
  - Johnson & Johnson Devel. Corp.
  - FMR (Fidelity)
  - ATP
- ADR program in USA
  - Ticker: GMXAY
  - Sponsored level 1
  - Ratio: 2 ADR: 1 ordinary share
  - Depositary Deutsche Bank
- Shares outstanding: 56,967,419
  - Total diluted shares: 62,246,008

#### Geographical Shareholder Distribution December 31, 2014\*





### Market Sizes Estimated Prevalence in 7 Major Markets

Disease	Estimated Incidence in 7 Major Markets <sup>1</sup>	Estimated Prevalence	Estimated Global Branded Sales by 2018
CLL	32,000	250,000	\$5.3B
FL	32,000	260,000	\$10.5B <sup>2</sup>
MM	55,000	190,000	\$11.5B
RRMS	26,100 <sup>3</sup>	370,600	\$18.5B <sup>3</sup>

<sup>1</sup>Incidence for MS does not include Japan

<sup>2</sup>Sales data is for NHL, which includes FL

<sup>3</sup>Data is for MS, which includes RRMS

Sources: CLL, DLBCL, FL 2013 forecast incidence: Datamonitor, "Pipeline Insight: Leukemias" and "Pipeline Insight: Lymphomas, Multiple Myeloma & Myelodysplastic Syndromes", March 2010.

CLL, DLBCL, FL prevalence based on median survival of 8 yrs: company estimates.

MM 2012 incidence: Datamonitor, "Multiple Myeloma Epidemiology", May 2013; MM prevalence: SEER 2012; company estimates.

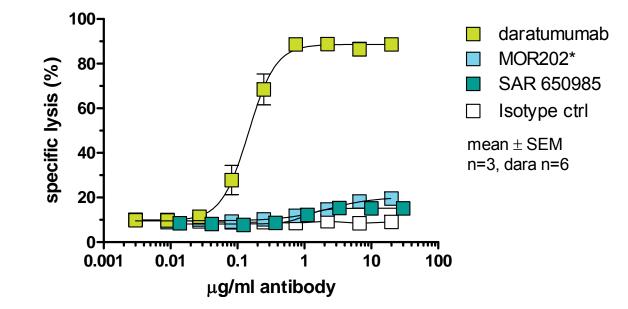
MS incidence, "Atlas of MS 2013"

RRMS prevalence, Datamonitor, "Multiple sclerosis Epidemiology", May 2012.

Sales data for CLL, FL, MM based on EvaluatePharma® 2014, sales data for MS from Datamonitor, "Multiple Sclerosis Forecast", 3 February 2014.



# **Daratumumab Induces Superior CDC**



	Daratumumab (Genmab)	MOR202* <sup>1</sup> (MorphoSys)	SAR 650984 <sup>1,2</sup> (Sanofi-Aventis)
EC50 (μg/mL)	0.15	2.3	1.0
Maximum killing (%)	90	20	15

\*MOR202 clone MOR03087; <sup>1</sup>:surrogate mAb produced in HEK cells, generated using VH and VL sequences as published PCT patent applications WO2012/041800 (MOR03087) and WO2008/047242 (38SB19); <sup>2</sup>:38SB19

# CD38 Landscape: Direct In-House Pre-Clinical Comparison with Surrogates of Competitor Antibodies

		Daratumumab (Genmab)	MOR202 <sup>1</sup> (MorphoSys)	SAR 650984 <sup>1, 2</sup> (Sanofi-Aventis)	AB79 (Millennium/Takeda)
	Origin	Human	Human	Humanized	Human
	Development phase	Phase III	Phase I/IIa	Phase I/II	Pre-clinical
	Binding <sup>3</sup>	+++	++	+++	+++
	ADCC (max lysis) <sup>3</sup>	++	++	++	++
	CDC (max lysis) <sup>3</sup>	+++	+	+	++
Mechanism	Phagocytosis <sup>3, 4</sup>	+++	++	nd	+++
of Action	Ecto-enzyme function	+	-	+++	+
	Direct PCD 5, 6	-	-	++	-
	PCD after cross- linking <sup>5, 6</sup>	+++	+++	+++	+++

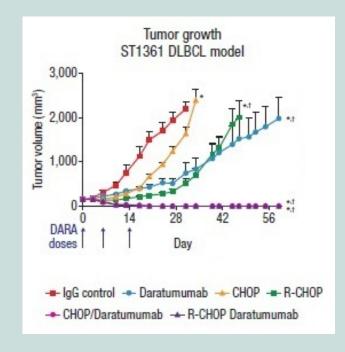
\*MOR202 clone MOR03087; <sup>1</sup>:surrogate mAb produced in HEK cells, generated using VH and VL sequences as published in PCT applications WO2012/041800 (MOR03087) and WO2008/047242 (38SB19); <sup>2</sup>:38SB19; <sup>3</sup>:Daudi cells; <sup>4</sup>:based on EC50 data, <sup>5</sup>:Ramos cells <sup>6</sup>: PCD: Programmed cell death, measured by Annexin V positivity and caspase-3 activation. nd = not determined

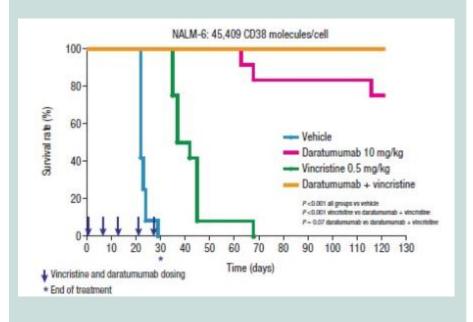


## Daratumumab Beyond Multiple Myeloma Pre-clinical Activity in DLBCL & ALL

Effect daratumumab on tumor growth in patient-derived DLBCL model

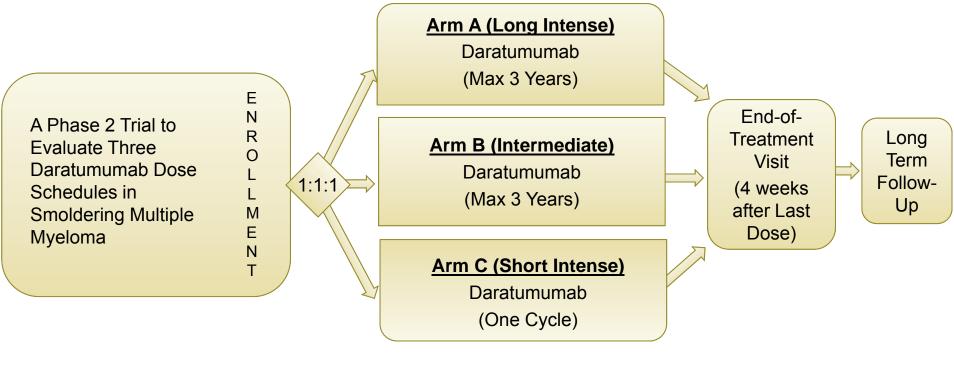
Effect daratumumab with or without vincristine in ALL xenograft model





### Janssen Daratumumab Clinical Trials in Multiple Myeloma: Smoldering

NCT 02316106 (SMM2001 Centaurus) Enrolling Soon (1Q15): 120 Est. Pts



1 Cycle = 8 Weeks

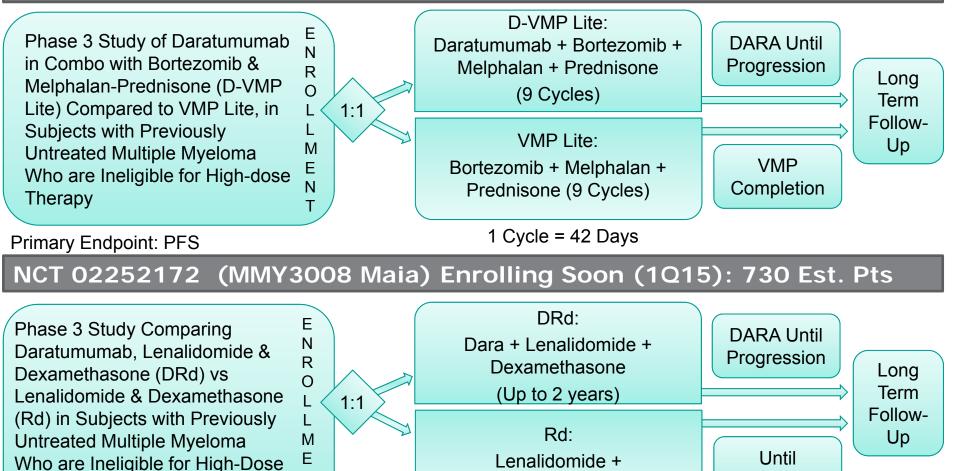
Primary Endpoints: CR & Time to Progression to Symptomatic Multiple Myeloma

Genmab

### Janssen Daratumumab Clinical Trials in Multiple Myeloma: Frontline Non-Transplant

### NCT 02195479 (MMY3007 Alcyone) Enrolling Now: 700 Est. Pts

Ν



Primary Endpoint: PFS

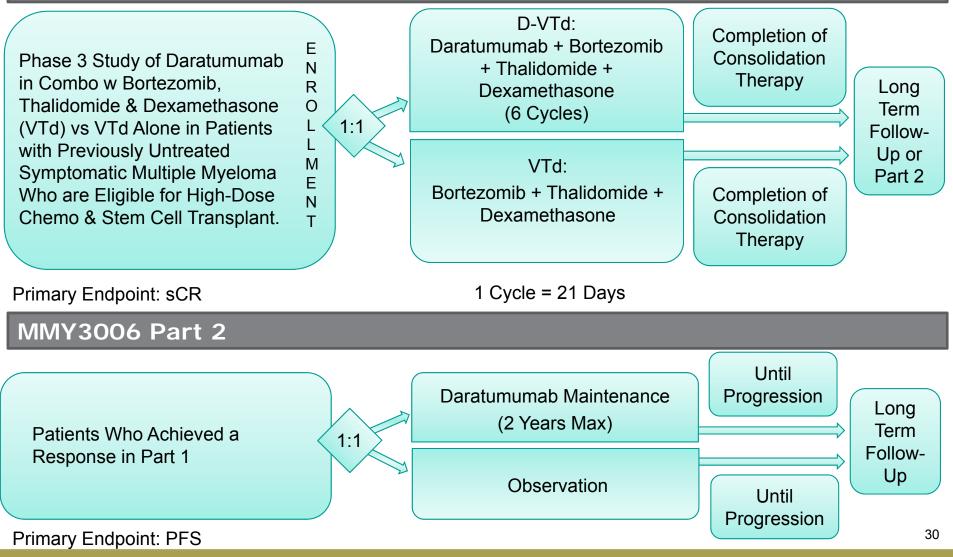
Therapy

Dexamethasone

Progression

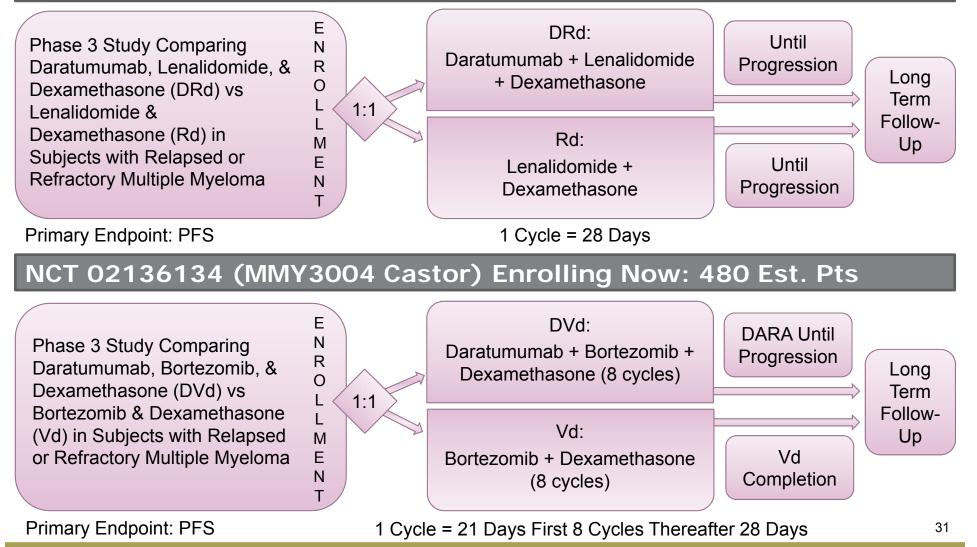
### Janssen Daratumumab Clinical Trials in Multiple Myeloma: Frontline Transplant

### MMY3006 (Cassiopeia) Enrolling Soon (2Q15): 1,000 Est. Pts: Part 1



### Janssen Daratumumab Clinical Trials in Multiple Myeloma: Relapsed or Refractory

### NCT 02076009 (MMY3003 Pollux) Enrolling Now: 560 Est. Pts



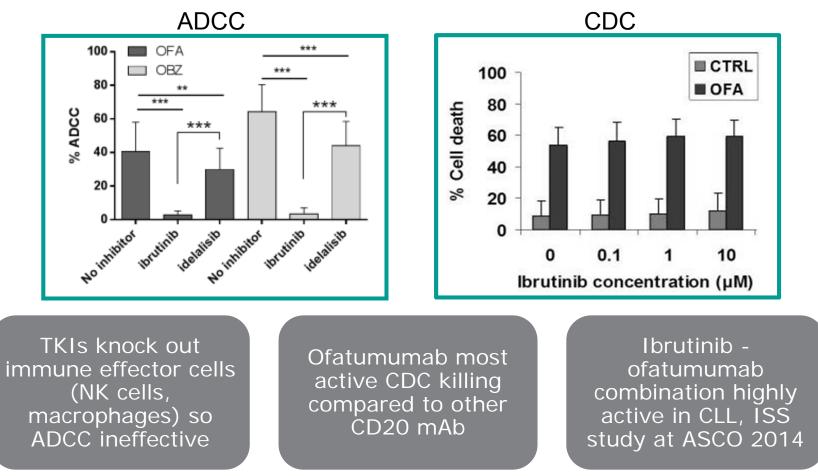
# 2014 Ofatumumab Data Ofatumumab Maintenance Prolongs PFS in Relapsed CLL

Population	<ul> <li>Pts in CR or PR after 2<sup>nd</sup> &amp; 3<sup>rd</sup> line treatment for CLL</li> <li>Ofatumumab vs Observation</li> </ul>
Key Safety Data	<ul> <li>Grade 3 &amp; 4 AEs</li> <li>Ofatumumab 25%</li> <li>Observation 17%</li> </ul>
Key Efficacy Data	<ul> <li>PFS</li> <li>Ofatumumab 28.6 months</li> <li>Observation 15.2 months</li> </ul>
Conclusion	<ul> <li>Ofatumumab maintenance provided significant clinical benefit for pts with relapsed CLL</li> <li>Well-tolerated with no unexpected toxicities</li> </ul>



# Ofatumumab

Potential to Combine with Tyrosine Kinase Inhibitors

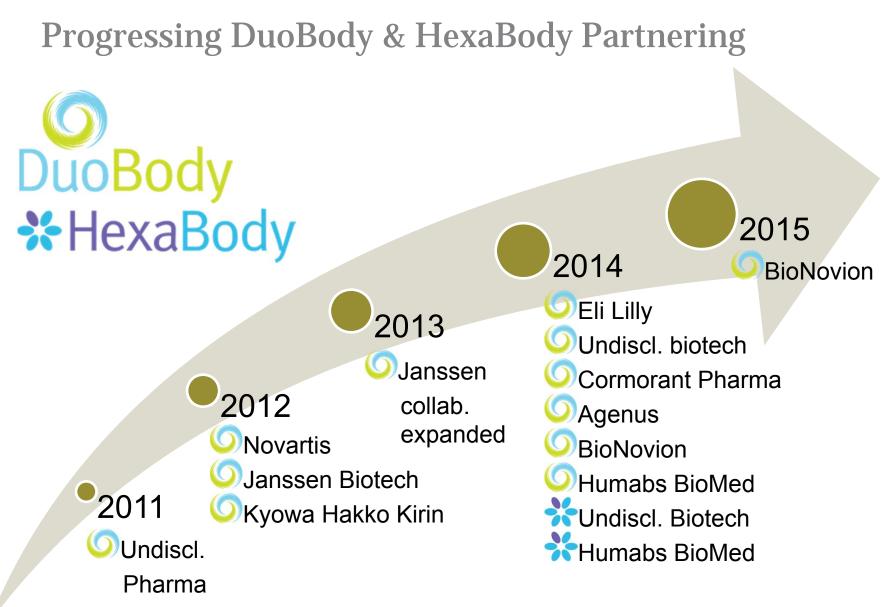


#### Sources:

Da Roit et al. "Ibrutinib interferes with the cell-mediated anti-tumor activities of therapeutic CD20 antibodies: implications for combination therapy." Abstract. EHA 2014

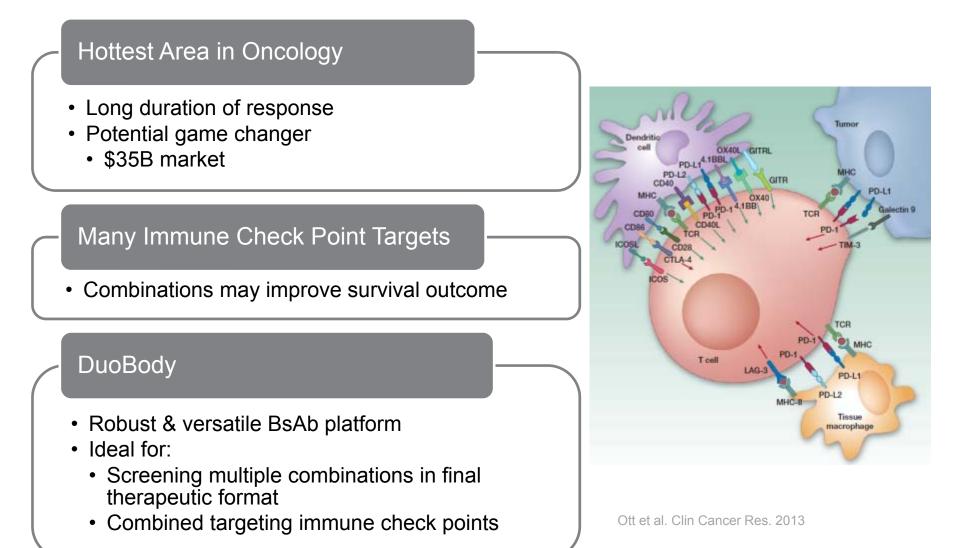
Jaglowski et al. "A Phase Ib/II study evaluating activity and tolerability of the BTK inhibitor ibrutinib in combination with ofatumumab in patients with chronic lymphocytic leukemia / small lymphocytic lymphoma (CLL/SLL) and related diseases." ASCO 2014







## Immuno-Oncology Turning Cancer into a Chronic Condition





### **Income Statement: Year Ended December 31**

	<u>2014</u> DKK m	<u>2013</u> nillions	Change	<u>2014</u> USD mi	<u>2013</u> Ilions **
Revenue	850	664	186	139	108
R&D Costs G&A Expenses Operating Expenses	(506) (79) (585)	(528) (67) (595)	22 (12) 10	(83) (13) (96)	(86) (11) (97)
Operating Result	265	69	196	43	11
Net Financial Items & Tax	36	1	35	6	-
Net Result - Continuing Operations	301	70	231	49	11
Net Result - Discontinued Operation	-	42	(42)	-	7
Net Result	301	112	189	49	18
Cash position increase/(decrease)* Cash position at end of period*	1,104 2,661	41 1,557		180 435	7 254

\*Cash, cash equivalents, and marketable securities

\*\* USD 1.00 = DKK 6.1214 (Danish Central Bank spot rate on December 31, 2014)



# Better Antibodies By Design

