celularity

TURNING

NATURE'S MIRACLE

INTO

MEDICAL

BREAKTHROUGHS

Investor and Analyst Research & Development Day

May 21, 2024

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The revenue presented in this presentation is preliminary and unaudited, reflecting a management estimate as of the date of this presentation. These revenues are subject to the completion of Celularity's financial closing procedures. Celularity's independent registered public accounting firm has not conducted an audit or review of, and does not express an opinion or any other form of assurance on, these revenue figures.

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TURNING

NATURE'S MIRACLE

INTO

MEDICAL BREAKTHROUGHS

- Addressing the challenges of aging-related diseases.
- Diversified revenue stream with 280% growth in Q1 YoY.
- On track for three 510(k) filings in 2025-2026 with multi-billion $ market potential.
- Developing first-in-class / best-in-class cellular and regenerative therapies.
- State-of-the-art research and GMP manufacturing infrastructure.

BUILDING ON TWO+ DECADES OF LEADERSHIP

CUMULATIVE REVENUE GENERATED SINCE 2018	STEM CELLS BIOBANKED	AUTO/ALLO TRANSPLANTS FROM LIFEBANK®	PATIENTS TREATED WITH BIOMATERIAL PRODUCTS	STATE OF THE ART GMP FACILITY	PATENT PORTFOLIO
~ $110M	> 45,000	> 100	> 250,000	~ 150,000 SQ FT	~1,000

THE EVOLUTION OF CELULARITY

25 Years of Leadership in Cellular and Regenerative Medicine

Anthrogenesis CORPORATION | Celgene | celularity®

Broad Clinical Research Program

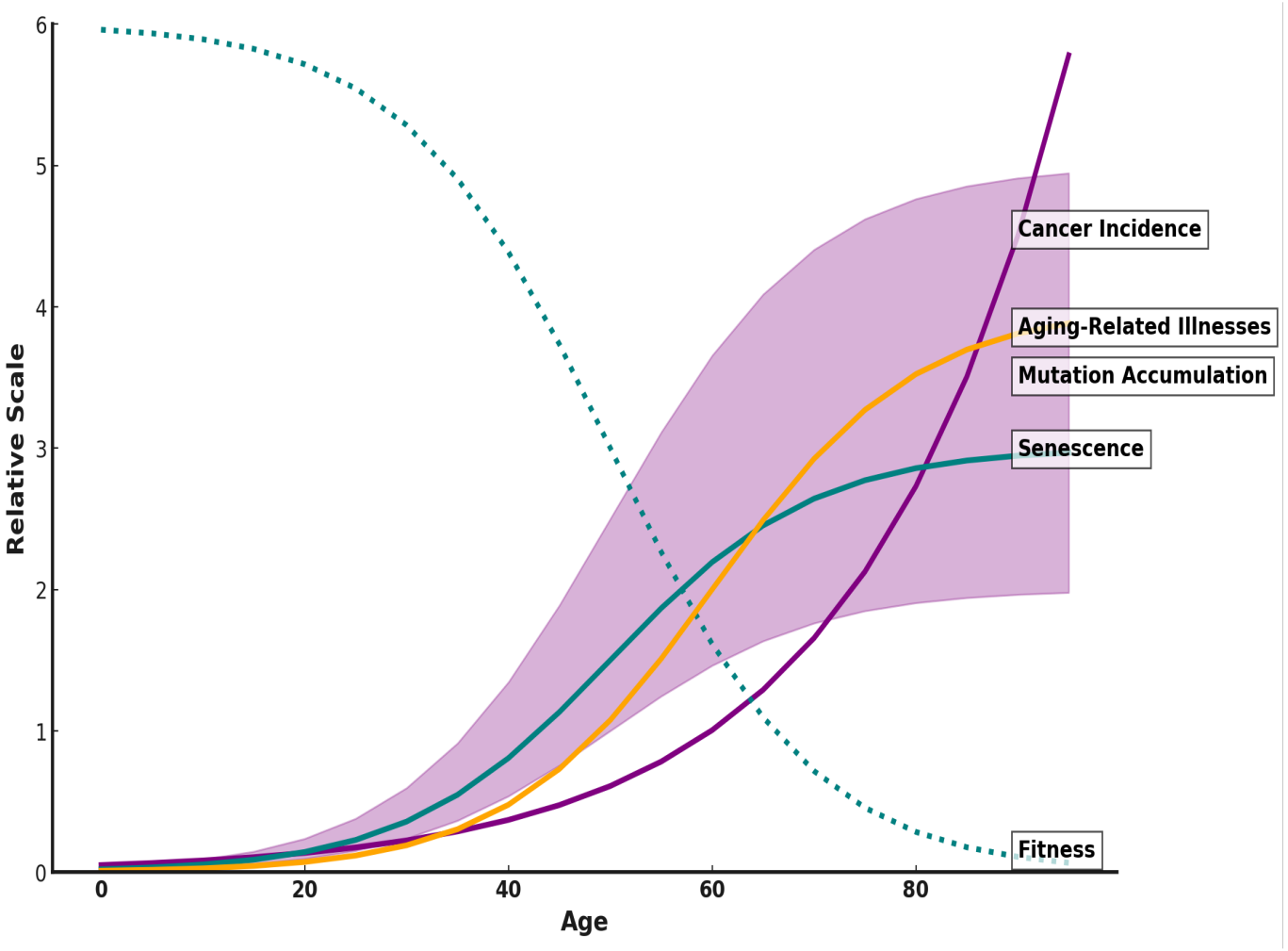
- ✓ *Revenue generation*
- ✓ *Manufacturing Infrastructure*
- ✓ *Clinical Consolidation*

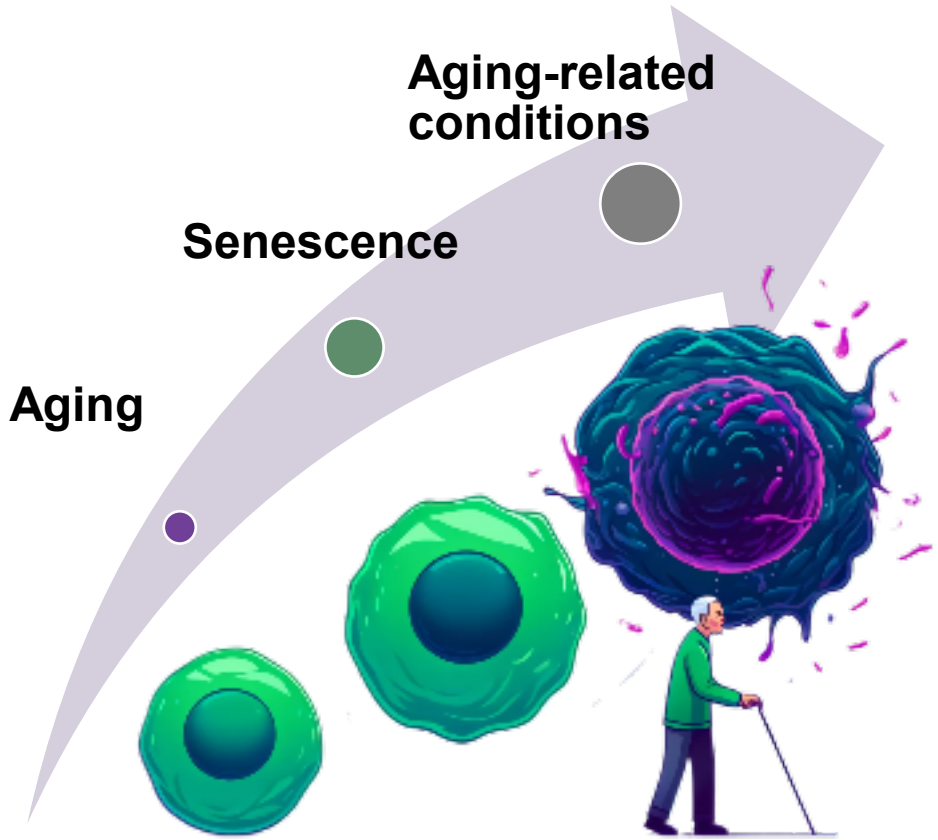
BIOBANKING → **BIOMATERIALS AND MLASCs[1]** → **ONCOLOGY** → ***AGING-RELATED DISEASES & ADVANCED BIOMATERIALS***

Build on Oncology Expertise

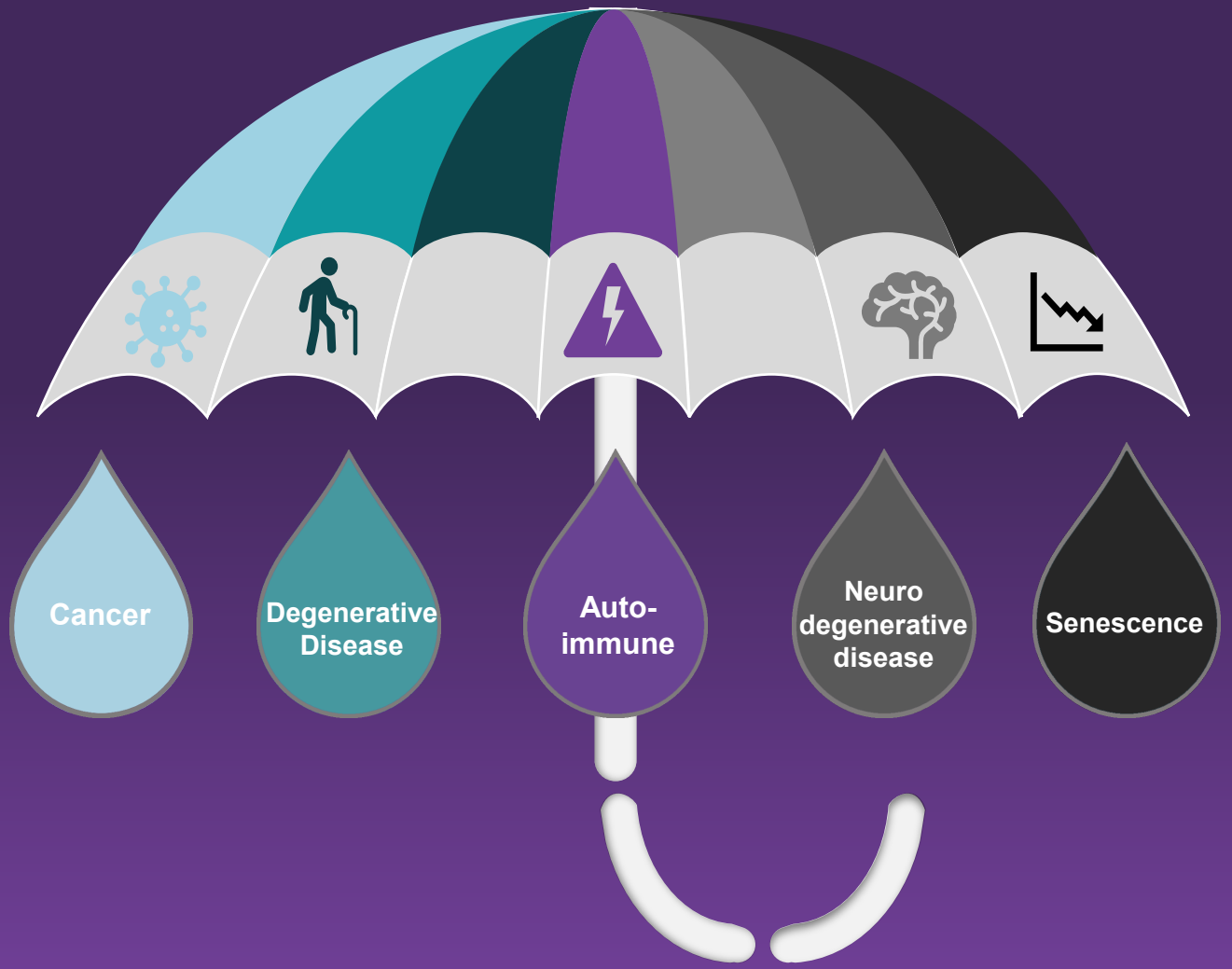
[1] *Mesenchymal-like adherent stromal cells*

ADDRESSING THE CHALLENGES OF AGING-RELATED DISEASES





ADDRESSING THE CHALLENGES OF AGING-RELATED DISEASES



DIVERSIFIED AND GROWING REVENUE STREAM

ADVANCED BIOMATERIALS

- Increase revenue stream with commercially available biomaterials
  - Biovance®
  - Biovance®3L
  - Biovance® 3L Ocular
  - Interfyl®
  - CentaFlex®
- CTW*, FUSE Bone Void Filler and CPM+ Wound Management pipeline development
- Advanced biomaterial product development and manufacturing

BIOBANKING

- Offer unique placental blood stem cell banking
- Launch a program with OB++ Network in 2024
- Launch Adult Stem Cell Banking business in Q2 to capitalize on the growing markets in longevity, performance therapeutics and immunotherapy

CELLULAR MEDICINE

- Development partners
- Pursue commercial opportunities to generate revenue by providing development services to third parties, including:
  - Autologous/Allogeneic cell therapy product development and manufacturing

STRONG FINANCIAL PLATFORM

**Celularity Tendon Wrap*
+Celularity Placental Matrix
++Obstretrician

ON TRACK FOR THREE 510(K) FILINGS IN 2025-2026

	Development	Pre-RFD[1]	Q-Sub[2]	510(k) Studies Progress	510(k) Submission[3]
Celularity Tendon Wrap	✓	✓	✓	80%	H1 2025
Fuse Bone Void Filler	✓	✓	✓	60%	H2 2025
Celularity Placental Matrix	✓	✓		50%	H2 2026

[1]Pre-Request for Designation.
[2]Q-Submission Program – voluntary program that allows medical device manufacturers to discuss regulatory requirements and processes with the FDA.
[3]A premarket submission made to FDA to demonstrate that the device to be marketed is as safe and effective(substantially equivalent) to a legally marketed device. (Section 513(I)(1)(A) FD&C Act).

Innovative First-in-Class Technologies

DEVELOPING FIRST-IN-CLASS / BEST-IN-CLASS CELLULAR AND REGENERATIVE ASSETS

Advanced Biomaterials	Indication	Discovery	Regulatory	Commercialization
Celularity Tendon Wrap (CTW)	Tendon		510(k)	
FUSE Bone Void Filler	Bone, Spine, Dental		510(k)	
Celularity Placental Matrix (CPM)	Wound Covering		510(k)	

Cellular Medicine	Optimization	Therapeutic Areas	Pre-Clinical	IND-Enabling	Phase 1/2
MLASC	Unmodified	FSHD			
MLASC	Unmodified	Autoimmune & Degenerative Disease			
T / NK	CAR + Persistence + Stealth	Autoimmune Disease			
T	CAR + Persistence + Stealth	Solid Tumor			
NK	Unmodified / CAR + Persistence + Stealth + Reduced Lymphodepletion	Aging-related / Senescence			

STATE-OF-THE-ART RESEARCH AND GMP MANUFACTURING INFRASTRUCTURE

WORLD-CLASS FACILITY FOR COMMERCIAL-SCALE MANUFACTURING

- **$100M investment** in cGMP/cGTP manufacturing
- *Highly specialized scientists, engineers & technicians*
- Enables greater control, efficiency and optimization

FULLY INTEGRATED COMMERCIAL-SCALE MANUFACTURING SITE

- Optimized product-specific CMC, QA/QC and manufacturing processes to accelerate development, production and commercialization
- **9 Grade C/ISO 7 suites**
- **6 Grade D/ISO 8 labs**
- Dedicated translational research labs

Celularity leverages 20 year+ investment in technologies and expertise required to manufacture cellular & biomaterial products at scale.

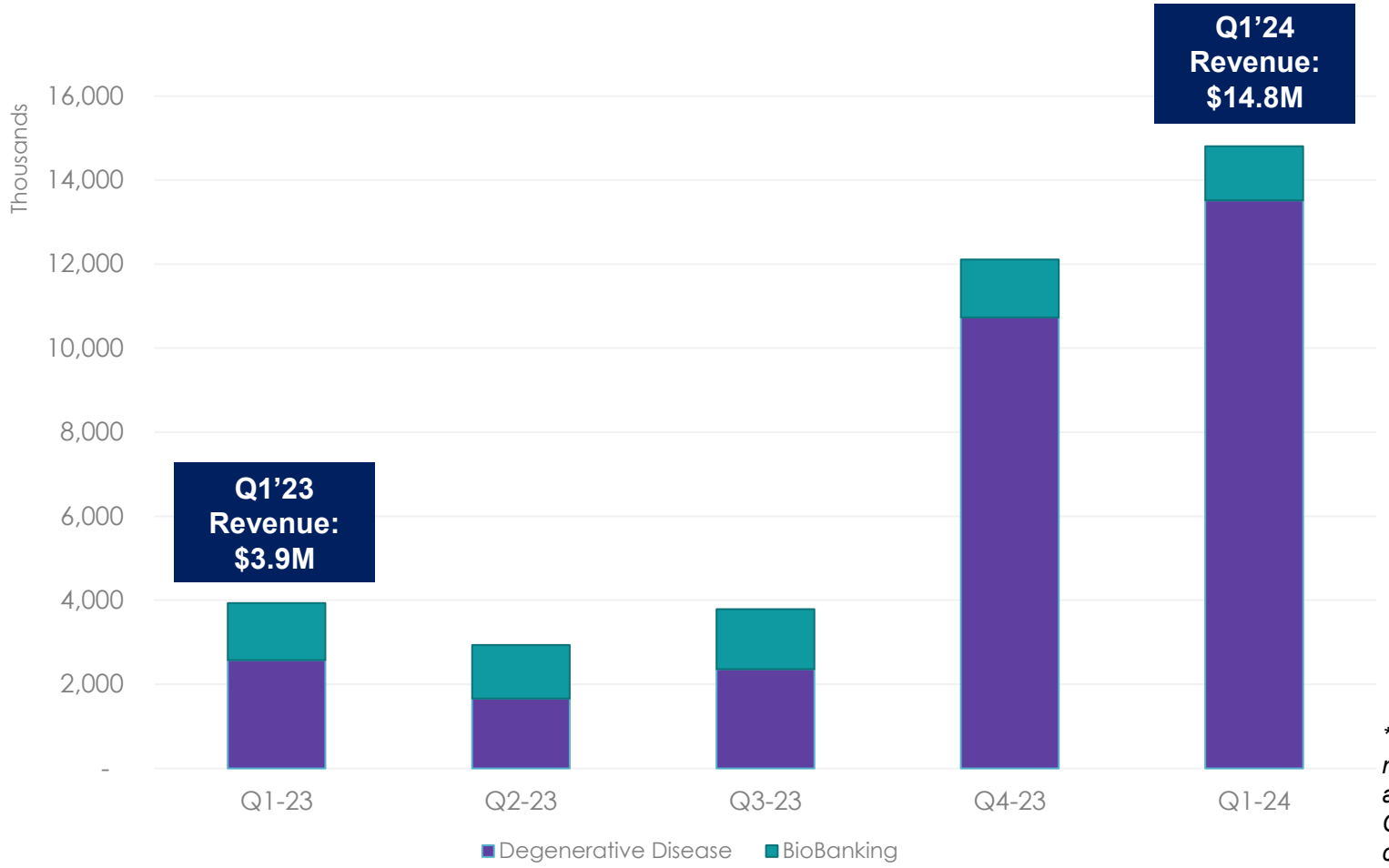
Degenerative Disease

CURRENT COMMERCIAL PRODUCTS

PIPELINE PROGRAMS

QUARTERLY NET REVENUE*

Growing Revenue from Commercial Biomaterial Product Sales and Biobanking Services



~280% GROWTH

Q1'23 vs. Q1'24 (YoY)

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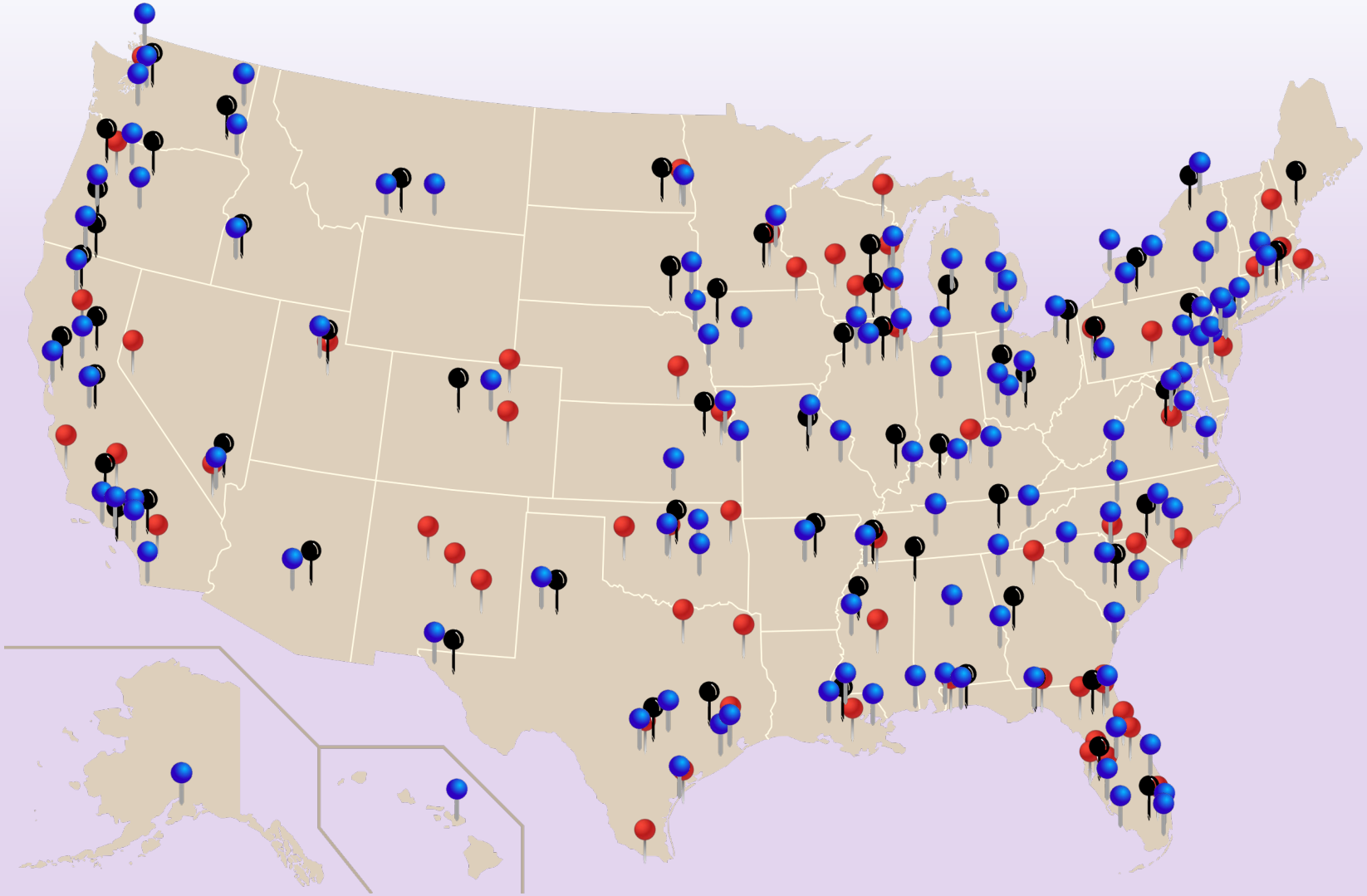
Increased net revenue realizing commercial opportunities

COMMERCIAL AND MARKETING STRATEGY: ROBUST SALES NETWORK AVAILABLE FOR PIPELINE PRODUCTS



40+ sales representatives in wound care and general surgery

100+ sales representatives in the eye care market (through Versea Ophthalmology Inc)

1,000+ sales representatives in orthopedic surgery and sports medicine (through Arthrex Inc)

CURRENT COMMERCIAL BIOMATERIAL PRODUCTS

BIOVANCE®

Completely decellularized placenta-derived allograft; provides dermal scaffold to serve as a foundation for advanced wound healing.

Interfyl®

Connective tissue matrix (CTM) from chorionic plate of human placenta; provides structural support while maintaining its elasticity.

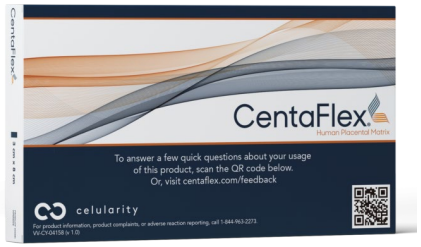
3L

Completely decellularized placenta-derived allograft; **unique 3-layer design** with improved structural integrity and handleability.

Biovance 3L OCULAR

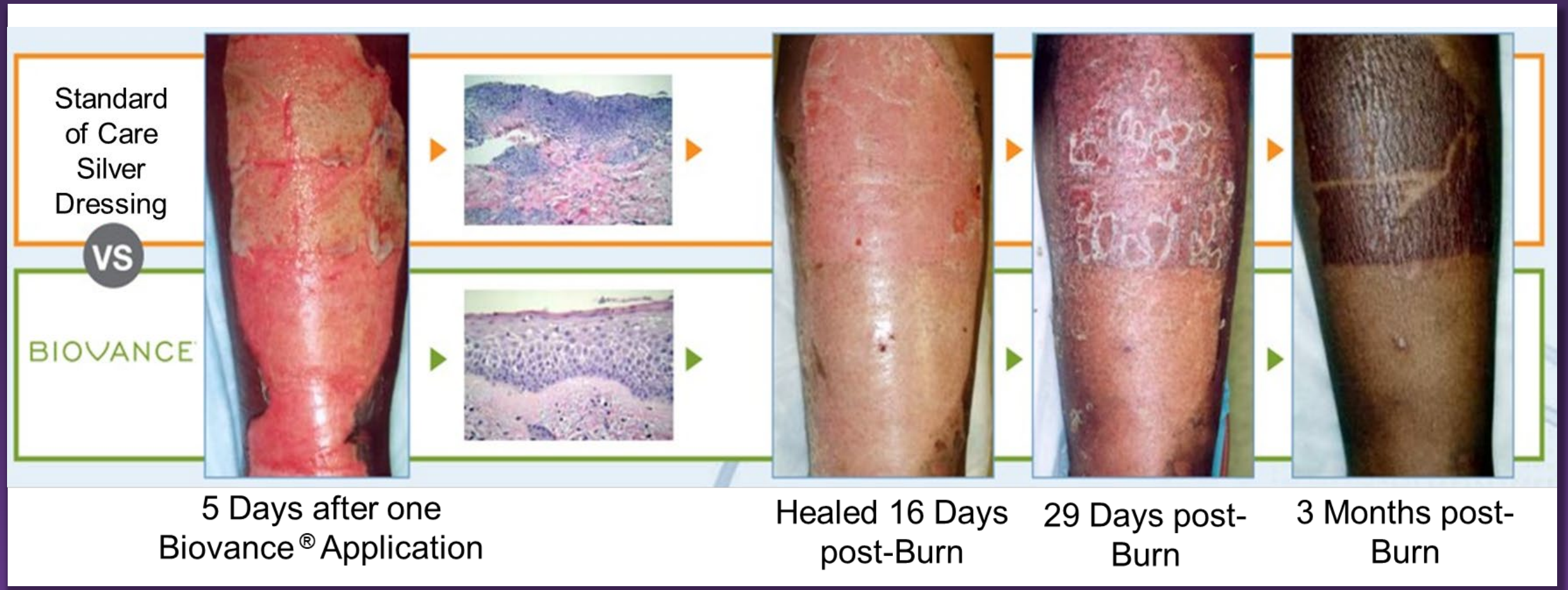
Designed for ocular surface diseases and disorders.

CentaFlex®



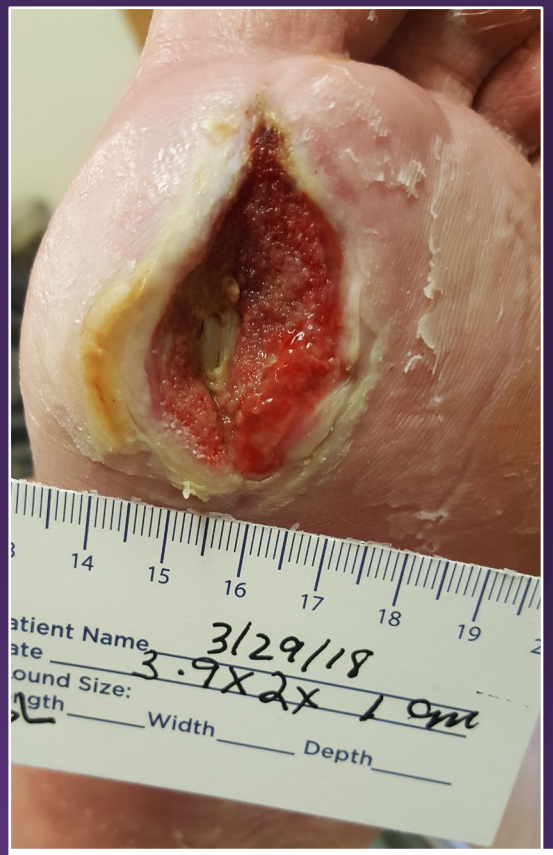
Completely decellularized human placental umbilical cord; provides stronger and more durable support for soft-tissue repair.

BIOVANCE® SECOND-DEGREE BURN STUDY

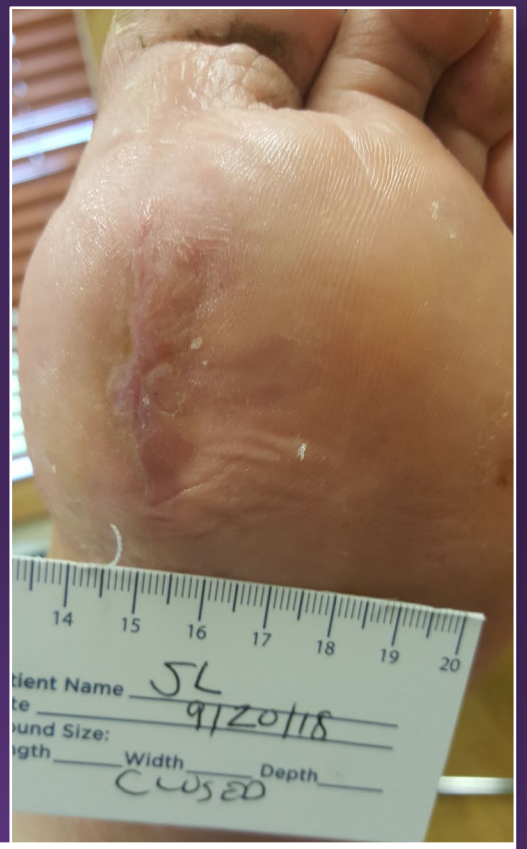


Treadwell T, Walker D, Nicholson B. The Treatment of Second Degree-Burns with Dehydrated, Decellularized Amniotic Membrane vs a Nanocrystalline Silver Dressing. SAWC Meeting. Orlando, FL; 2014

INTERFYL® CASE STUDY

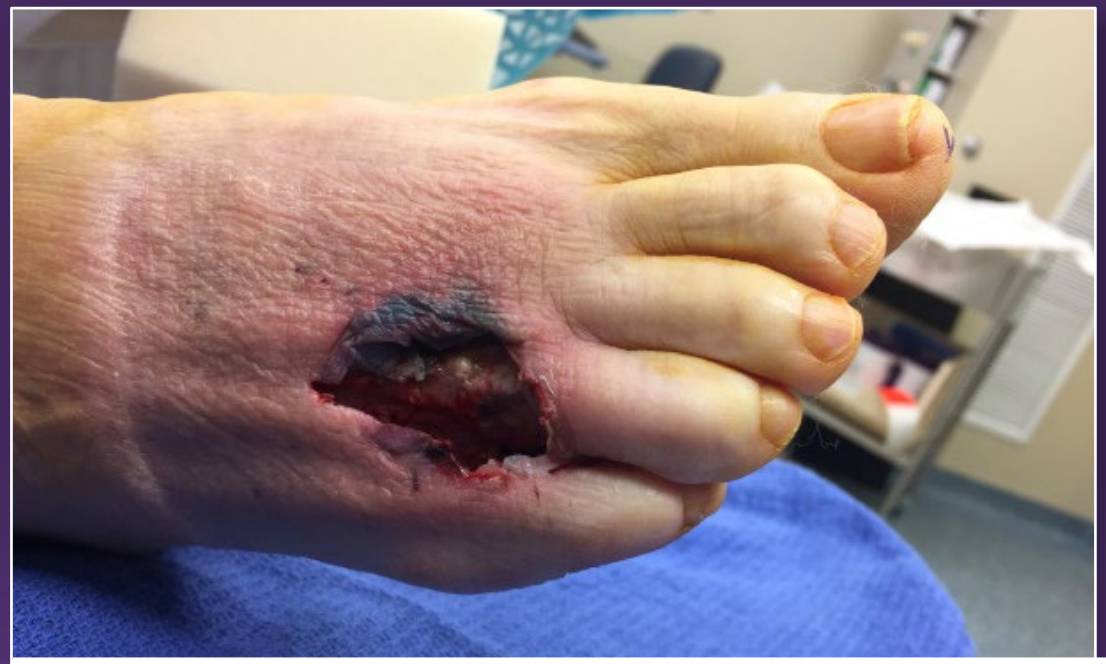


A 76-year-old Female with Type II diabetic foot ulcer

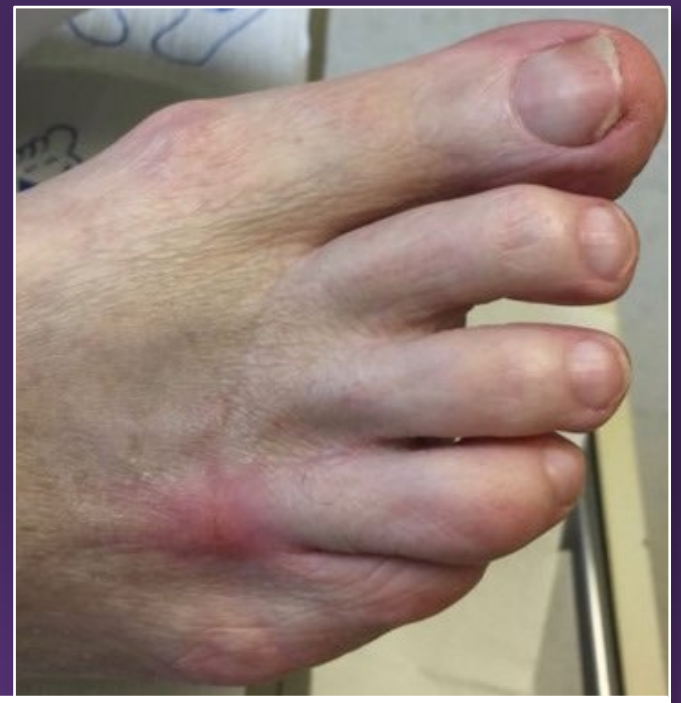


B Complete wound closure after three Interfyl® treatments

BIOVANCE® 3L HUMAN AMNIOTIC MEMBRANE ALLOGRAFT



A 65-year-old female; chronic and necrotic dorsal foot wound



B Complete wound closure after single application in three weeks

BUILDING AWARENESS AMONG SURGEONS AND PATIENTS

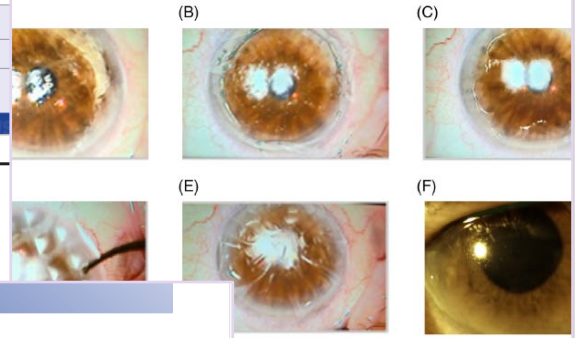
ELSEVIER

Clinics in Podiatric Medicine and Surgery

Volume 32, Issue 1, January 2015, Pages 147-159

Recent Advances in Acellular Regenerative Tissue Scaffold

Nicole M. Protzman MS [a], Steph



a case of anterior basement membrane dy
y, showing the poor irregular surface of the
ent Membrane Dystrophy (B), post burring
f DDHAM (D), placement of bandage cont

Check for updates

Received: 4 April 2022 | Revised: 28 September 2022 | Accepted: 12 October 2022

DOI: 10.1002/jbm.b.35186

RESEARCH ARTICLE

WILEY

An in vitro comparison of human corneal epithelial cell activity and inflammatory response on differently designed ocular amniotic membranes and a clinical case study

Yong Mao[1] | Nicole M. Protzman[2] | Nikita John[1] | Adam Kuehn[3] | Desiree Long[3] | Raja Sivalenka[3] | Radoslaw A. Junka[3] | Anish U. Shah[4] | Anna Gosiewska[3] | Robert J. Hariri[3] | Stephen A. Brigido[3]

SECTION: ORIGINAL RESEARCH

Real-world Experience With a Decellularized Dehydrated Human Amniotic Membrane Allograft

Janice M. Smiell, MD[1]; Terry Treadwell, MD[2]; Helen D. Hahn, RN, MBA[1]; Michel H. Hermans, MD[3]

DHAM

Brigido et al., Clin Res Foot Ankle 2018, 6:3

DOI: 10.4172/2329-910X.1000276

Clinical Research on Foot & Ankle

Research Article | Open Access

The Use of an Acellular Connective Tissue Matrix in Hindfoot and Ankle Fusions: Understanding the Cellular Bench Top Data with a Consecutive Patient Series: A Pilot Study

ashuck E[3], Joachim Kohn[3] and Mohit Bhatia[4]

ited States

ited States

Mao et al.

Journal of Experimental Orthopaedics (2022) 9:69

https://doi.org/10.1186/s40634-022-00509-4

Journal of Experimental Orthopaedics

ORIGINAL PAPER | Open Access

A decellularized flowable placental connective tissue matrix supports cellular functions of human tenocytes in vitro

Check for updates

rials (RCTs) are designed to evalu-
olled conditions, use of strict in-

DDHAM

Journal of Biology and Medicine

Review Article

Flowable placental connective tissue matrices for tendon repair: A review

Nicole M Protzman[1], Yong Mao[2], Ra
Long[3], Anna Gosiewska[3]*, Robert J
Brigido[3]

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Gleason et al., J Biotechnol Biomater 2022, 12:8

Journal of Biotechnology & Biomaterials

Research Article | Open Access

Decellularized and Dehydrated Human Amniotic Membrane in Wound Management: Modulation of Macrophage Differentiation and Activation

Joseph Gleason[1], Xuan Guo[1], Nicole M Protzman[2], Yong Mao[3], Adam Kuehn[1], Raja Sivalenka[1], Anna Gosiewska[1*], Robert J Hariri[1] and Stephen A Brigido[1]

bioengineering

MDPI

Review

Placental-Derived Biomaterials and Their Application to Wound Healing: A Review

Nicole M. Protzman [1], Yong Mao [2], Desiree Long [3], Raja Sivalenka [3], Anna Gosiewska [3,*], Robert J. Hariri [3] and Stephen A. Brigido [3]

ADVANCED BIOMATERIAL PIPELINE HIGHLIGHTS

Products Tailored to Clinical Needs

Development Strategy

1. **Differentiated** scientific, clinical, and regulatory approach.
2. **Robust** intellectual property.
3. **Accelerated** through strategic partnerships and collaborations.

Pipeline Products

CELULARITY TENDON WRAP (CTW)

TENDON MANAGEMENT

FUSE BONE VOID FILLER (FUSE)

ORTHOPEDICS/BONE

CELULARITY PLACENTAL MATRIX (CPM)

WOUND MANAGEMENT

Unmet Need / Growing Markets | Regulatory De-Risking | Internal GMP Manufacturing | Proprietary Process

GROWING TOTAL ADDRESSABLE MARKET

~$2.2B[1]
Global Tendon Wrap Market

$4.7 Billion
by 2032
7.8% CAGR

~$3.4B[2]
Global Bone Fuse Market

$6.2 Billion
by 2032
6.8% CAGR

~$14.6B[3]
U.S. Wound Care Market

$24.0 Billion
by 2033
5.1% CAGR

~$5.1B[4]
Global Dermal Filler Market

$14.4 Billion
by 2031
10.8% CAGR

1. Global Market Insights, August 2022. 2. Global Market Insights, April 2024. 3. Nova 1 Advisor, 2024. 4. Allied Market Research, October 2022. *CAGRs are the estimated cumulative annual growth rates for 2023 -2031.

THE CELULARITY TENDON WRAP (CTW) DIFFERENCE: EFFECTIVE MANAGEMENT AND PROTECTION OF TENDON INJURIES

80%

H1 2025

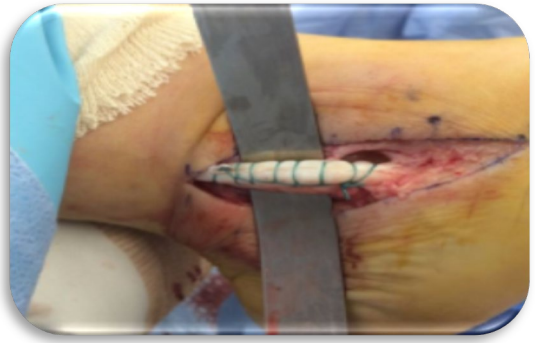
R&D Feasibility	Process Development	Prototype Characterization	Pre-RFD	Pre-Submission / Q-Sub	510(k) Enabling Studies & Tech Transfer	510 (k) Submission Commercial Runs & Device Launch

Clinical Challenges

- Slow and ineffective tendon healing
- High likelihood of recurrence
- Drawbacks with current allograft or xenograft products:
  - Infection
  - Bulkiness
  - Impingement

Celularity CTW Difference

- Sutureable
- Biophysical Strength
- Bioresorbable
- Biocompatible



Effective Tendon Healing

THE FUSE DIFFERENCE: FILLER FOR BONE DEFECTS OR GAPS OF THE SKELETAL SYSTEM, EXTREMITIES, SPINE AND PELVIS

60%

H2 2025

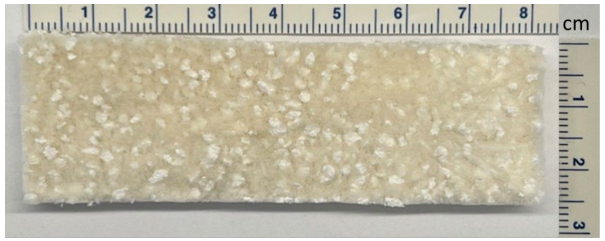
R&D Feasibility	Process Development	Prototype Characterization	Pre-RFD	Pre-Submission / Q-Sub	510(k) Enabling Studies & Tech Transfer	510 (k) Submission Commercial Runs & Device Launch

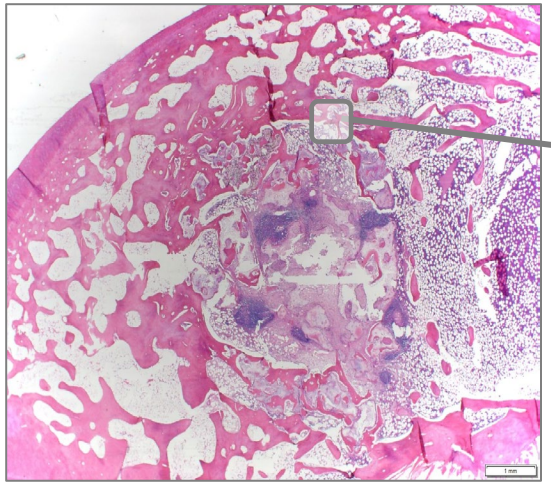
Clinical Challenges

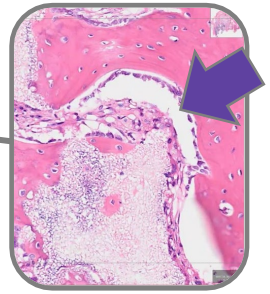
- Ineffective integration with the injured tissue
- Migration of the mineral component
- Implant degradation rates not matching rate of bone regeneration

Celularity FUSE Difference

- Composite Material
- Moldable
- Osteoconductive
- Bioresorbable
- Biocompatible







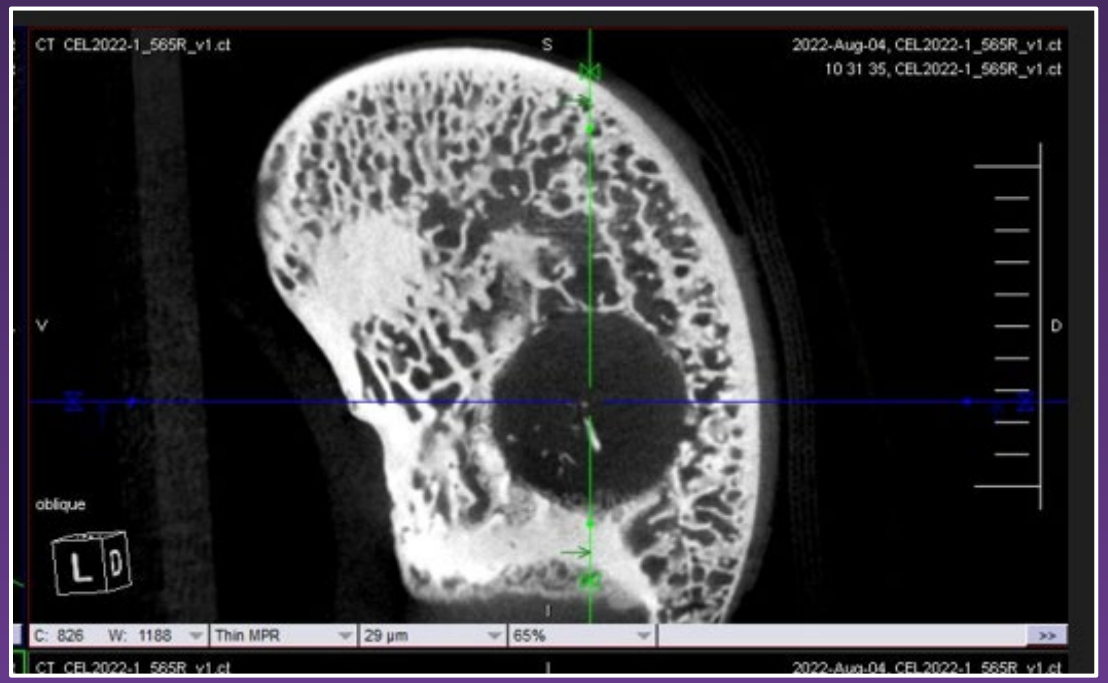
New Bone Formation

FUSE: PRECLINICAL EFFECTIVENESS

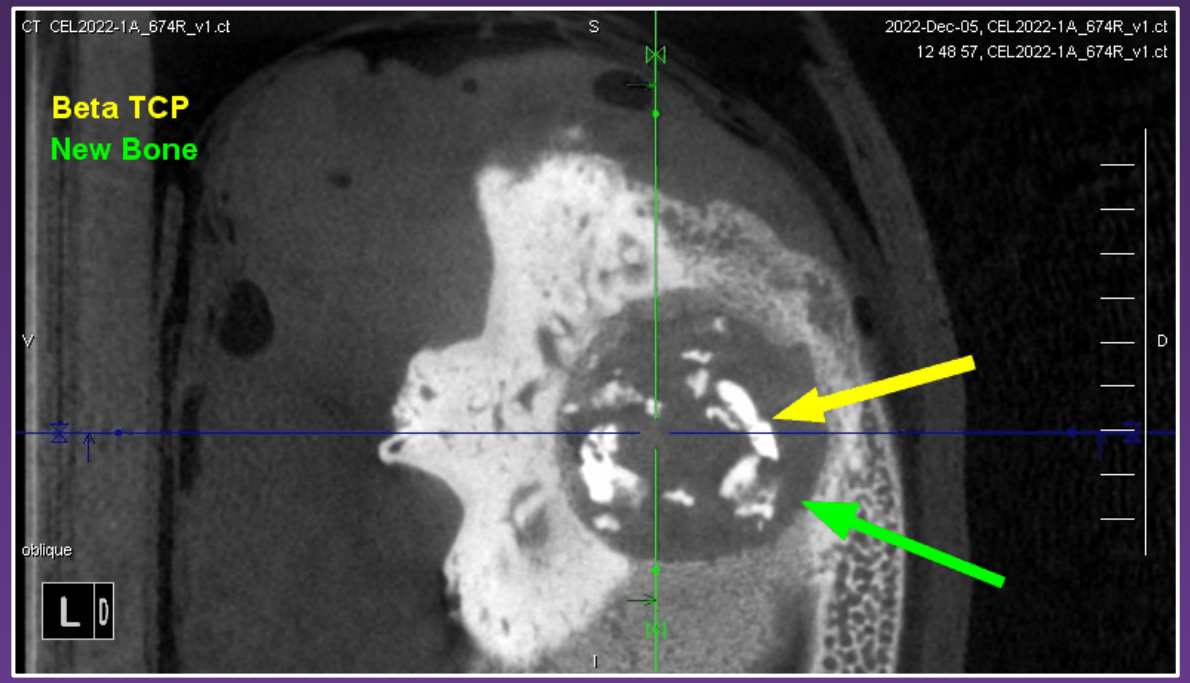
Micro Computed Tomography – New Bone Growth with FUSE in a Femur Defect in a Rabbit Model

3 Weeks Post Implantation

CONTROL



FUSE



New Bone Formation Observed in Bone Defects Treated with FUSE

THE CELULARITY PLACENTAL MATRIX (CPM) DIFFERENCE: WOUND MANAGEMENT: CHRONIC, ACUTE, BURNS AND SURGICAL WOUNDS, POST LASER SURGERY

50%

H2 2026

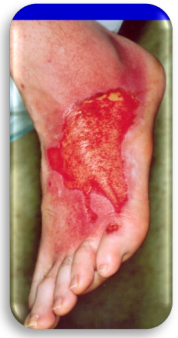
R&D Feasibility	Process Development	Prototype Characterization	Pre-RFD	Pre-Submission / Q-Sub	510(k) Enabling Studies & Tech Transfer	510 (k) Submission Commercial Runs & Device Launch

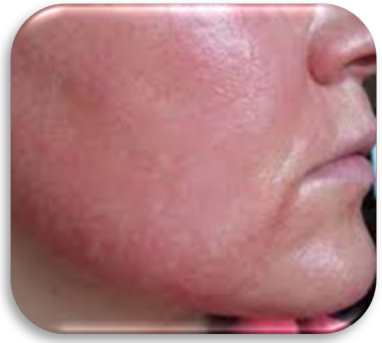
Clinical Challenges

- Lack of effective therapies
- Current standard of care ineffective and unchanged for decades
- Tissue ablation post laser surgery requires effective wound management

Celularity CPM Difference

- Flowable
- Conforming to size / change of wounds
- Leveraging placental ECM development from FUSE





OTHER ONGOING DEVELOPMENT: PLACENTAL DERMAL FILLER

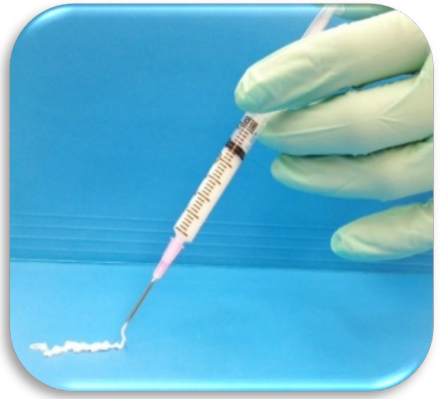
R&D Feasibility	Process Development	Prototype Characterization	Pre-RFD	Pre-Submission / Q-Sub	PMA Enabling Studies & Tech Transfer	PMA Submission Commercial Runs & Device Launch

Clinical Challenges

- Ineffective implant integration with the surrounding tissues
- Downtime and discomfort
- Unnatural appearance
- Non-predictable outcomes

Celularity Placental Dermal Filler Difference

- Injectable via 27–32-gauge needle
- Leveraging placental ECM development from FUSE and CPM



Cellular Medicine

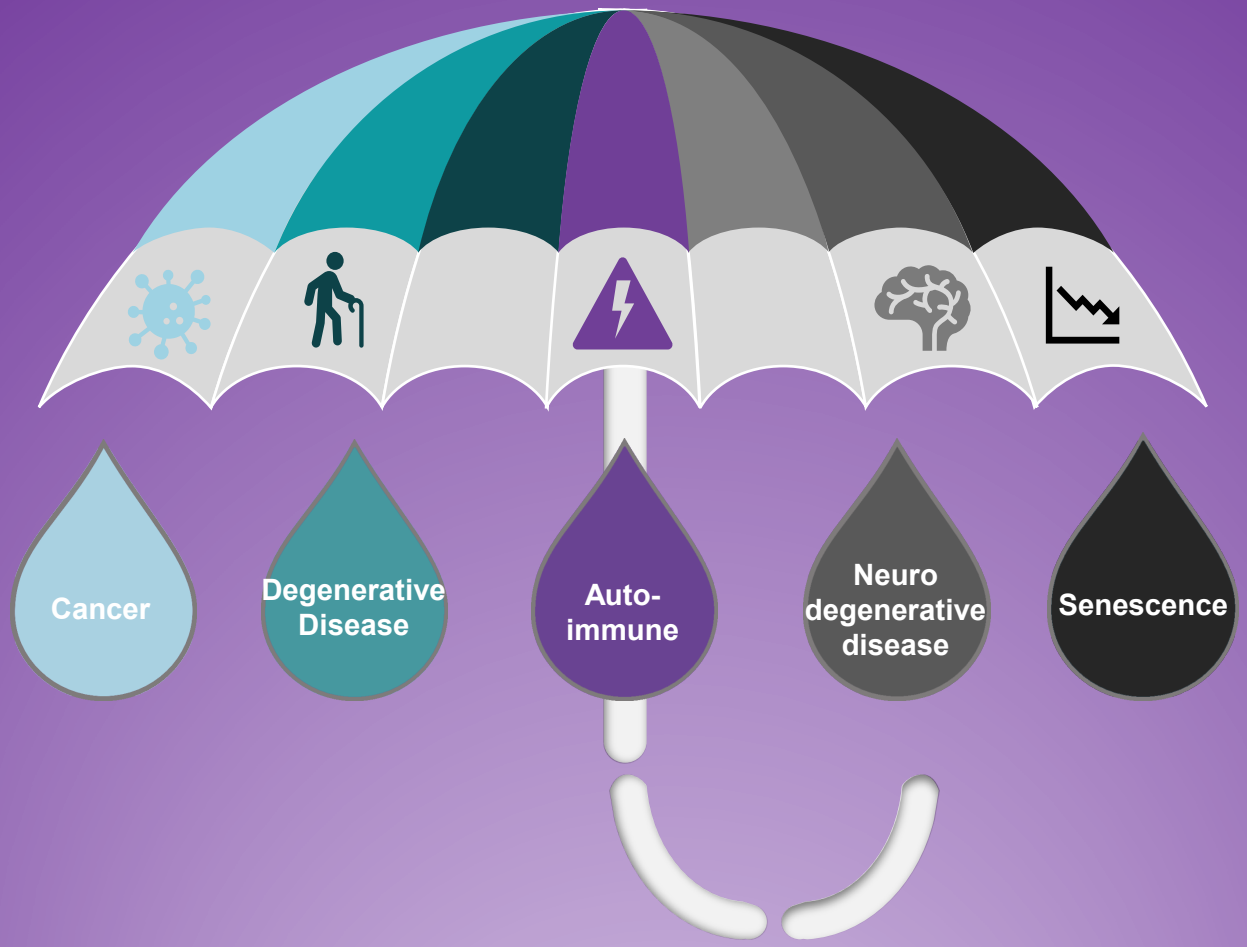
CELULARITY ADVANTAGE - PROPRIETARY CELL PLATFORM

UNIVERSAL ENGAGER PLATFORM

SENESCENCE

NEURODEGENERATIVE

A LEADER IN AGING-RELATED DISEASES



DEVELOPING FIRST-IN-CLASS / BEST-IN-CLASS CELLULAR AND REGENERATIVE ASSETS

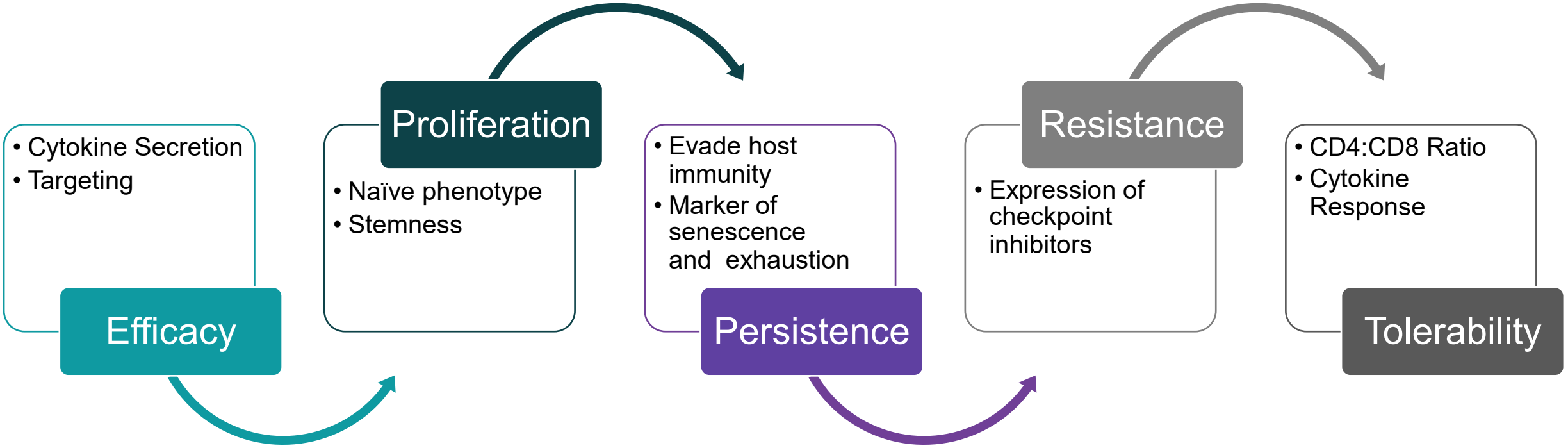
Advanced Biomaterials	Indication	Discovery	Regulatory	Commercialization
Celularity Tendon Wrap (CTW)	Tendon		510(k)	
FUSE Bone Void Filler	Bone, Spine, Dental		510(k)	
Celularity Placental Matrix (CPM)	Wound Covering		510(k)	

Cellular Medicine	Optimization	Therapeutic Areas	Pre-Clinical	IND-Enabling	Phase 1/2
MLASC	Unmodified	FSHD			
MLASC	Unmodified	Autoimmune & Degenerative Disease			
T / NK	CAR + Persistence + Stealth	Autoimmune Disease			
T	CAR + Persistence + Stealth	Solid Tumor			
NK	Unmodified / CAR + persistence + Stealth + Reduced Lymphodepletion	Aging related / Senescence			

Celularity Advantage

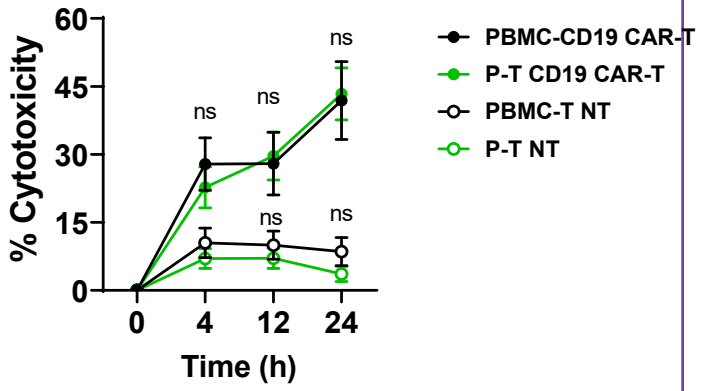
PROPRIETARY CELL PLATFORM

CHARACTERISTICS OF AN IDEAL CELLULAR THERAPY



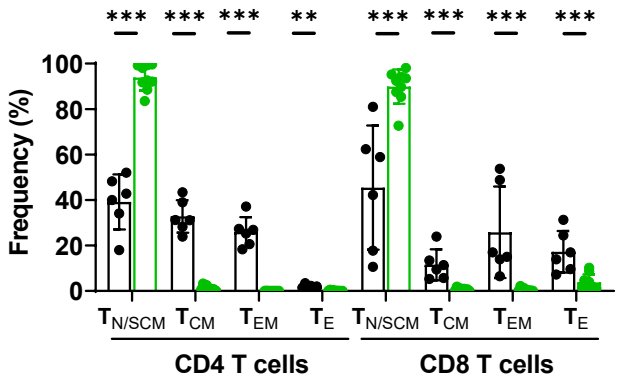
IDEAL CHARACTERISTICS ARE INHERENT IN CELULARITY'S STARTING MATERIAL

Efficacy*



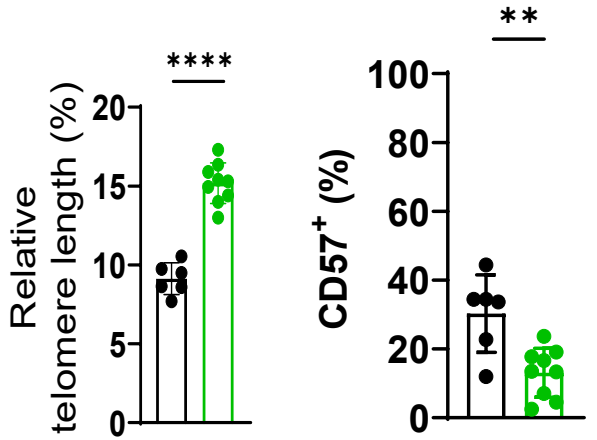
P-T CD19 CAR-T and PBMC-CD19 CAR-T cells display **similar cytotoxicity**

Proliferation*



Enriched for T_N and T_{SCM} which retain the greatest **proliferative** potential

Persistence*

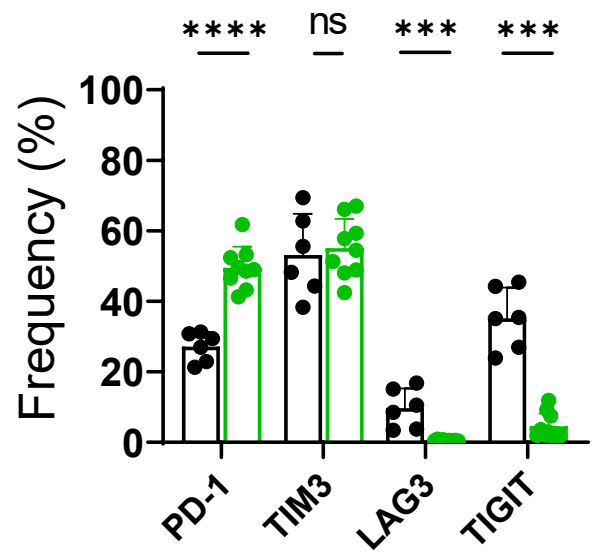


Express little to no, **exhaustion** and **senescence** markers

*J Immunother Cancer, 2024 Apr 29;12(4):e008656.doi: 10.1136/jitc-2023-008656

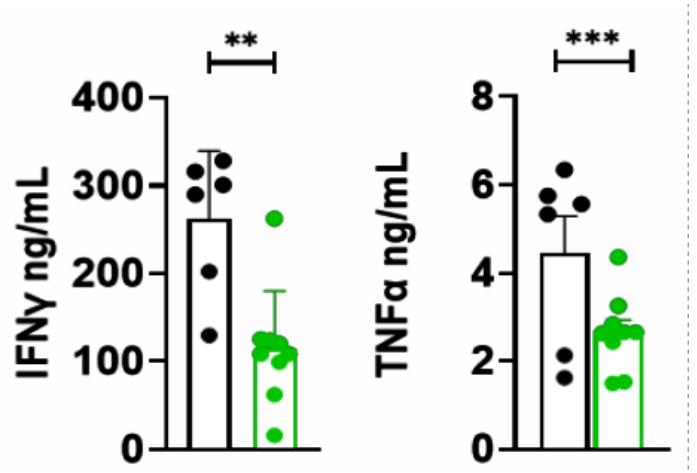
IDEAL CHARACTERISTICS ARE INHERENT IN CELULARITY'S STARTING MATERIAL

Resistance*



Resist expression of **immune checkpoint inhibitors** LAG3 and TIGIT

Tolerability*

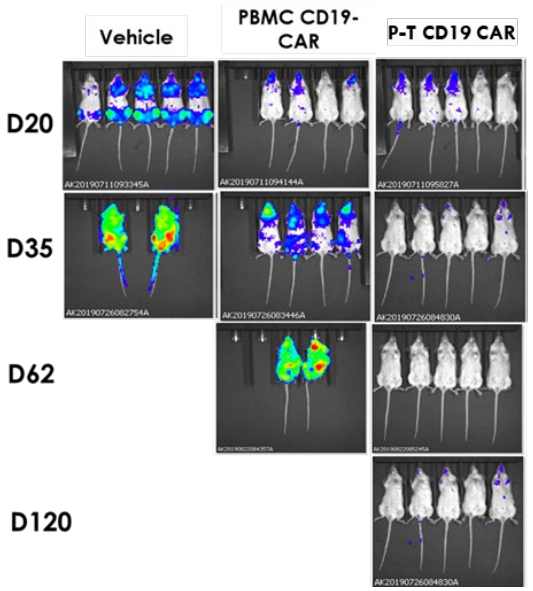


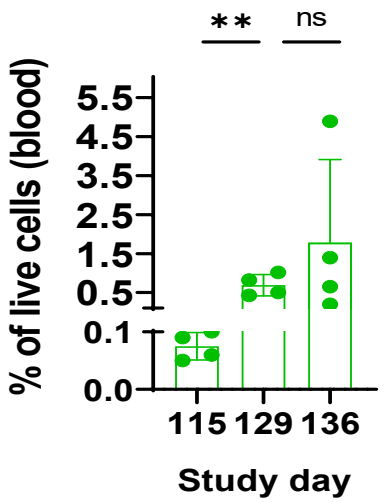
Reduced IFNγ production by P-T CD19 CAR-T may lower the potential for toxicity

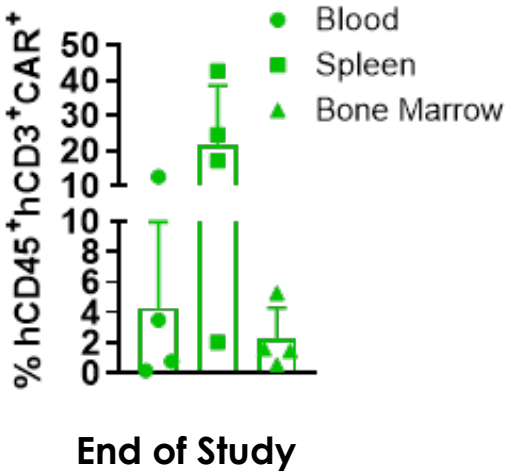
*J Immunother Cancer, 2024 Apr 29;12(4):e008656.doi: 10.1136/jitc-2023-008656

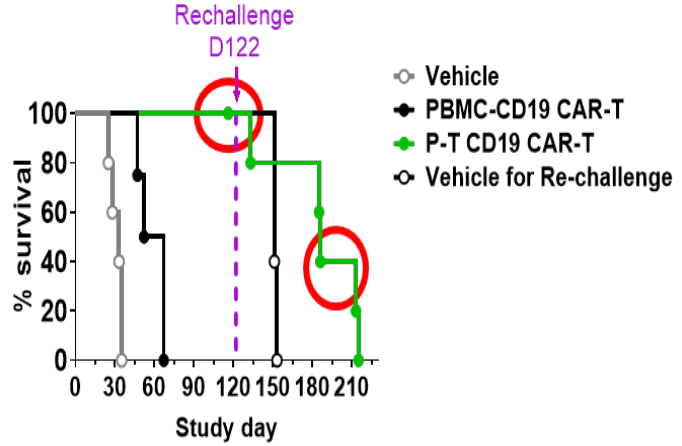
INHERENT CHARACTERISTICS OF CELULARITY'S PRODUCT TRANSLATE TO ENHANCED PRECLINICAL EFFICACY AND PERSISTENCE

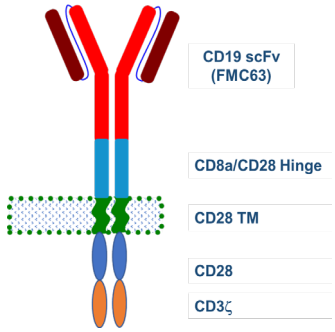
Efficacy | Proliferation | Persistence | Survival











P-T CD19 CAR-T **eliminated tumor** and resulted in **100% survival** out to **120 days**

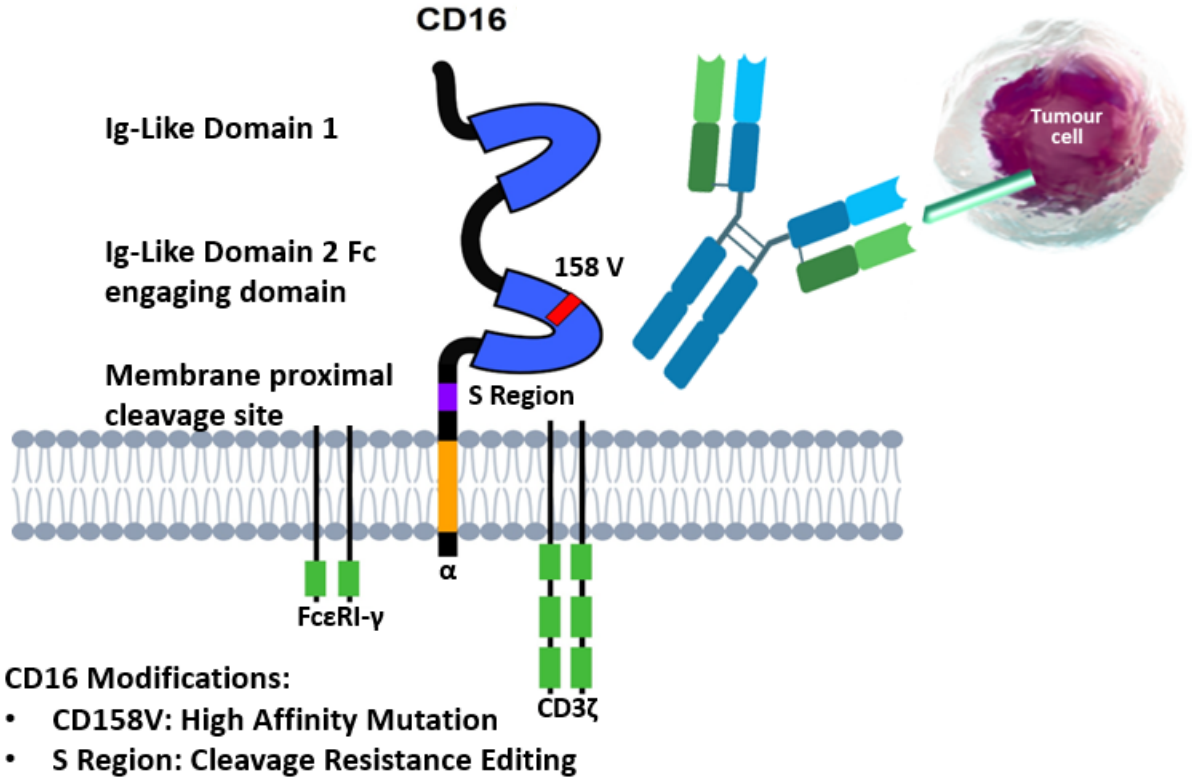
P-T CD19 CAR-T "**stemness" characteristics demonstrated**

- Re-expansion in response to tumor cell rechallenge on Day 122
- Extended survival out to 215 days upon tumor rechallenge
- Differentiated persistence at end of study to elicit prolonged antitumor activities

Universal Engager Platform

OUR COMBINATION APPROACH

CD16 OFFERS THE OPPORTUNITY FOR A CELL THERAPY/ANTIBODY COMBINATION PLATFORM



CD16 Modifications:

- **CD158V: High Affinity Mutation**
- **S Region: Cleavage Resistance Editing**

Celularity's proprietary CD16 has the potential to be a universal receptor to enhance the efficacy of therapeutic antibodies for cancer treatment

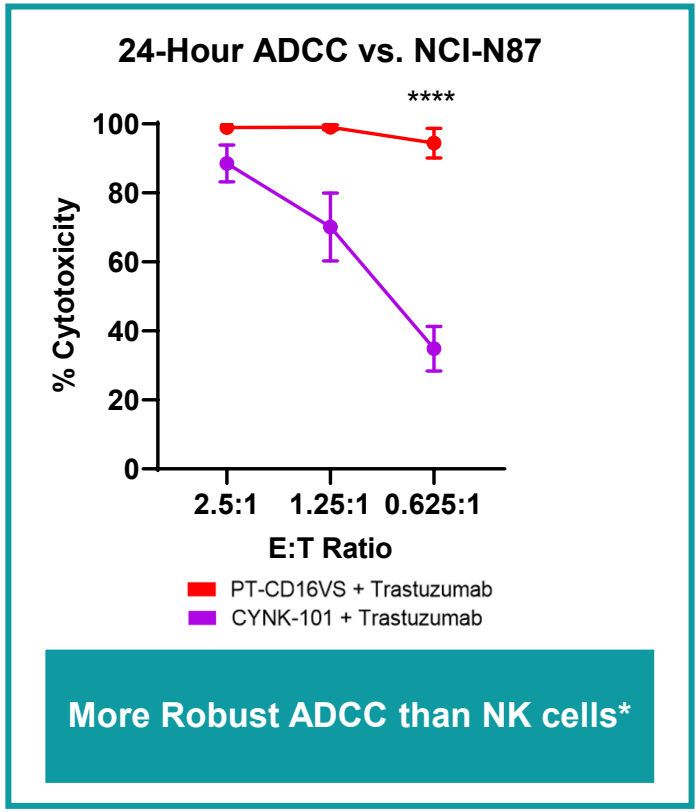
CD16 expressed on surface of natural killer (NK) cells, monocytes, macrophages and neutrophils

Identified as Fc receptors FcγRIIIa (CD16a) and FcγRIIIb (CD16b) and involved in antibody-dependent cellular cytotoxicity (ADCC)

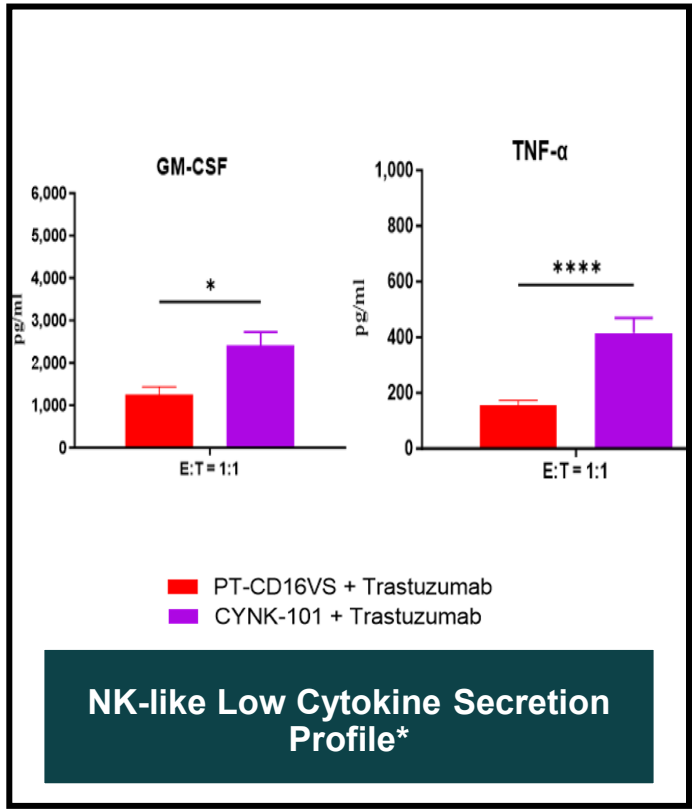
Binding of CD16 to Fc domain of IgG antibodies result in cross-linking of CD16 on the surface of effector cells

This cross-linking induces signal transduction and activates the effector cells

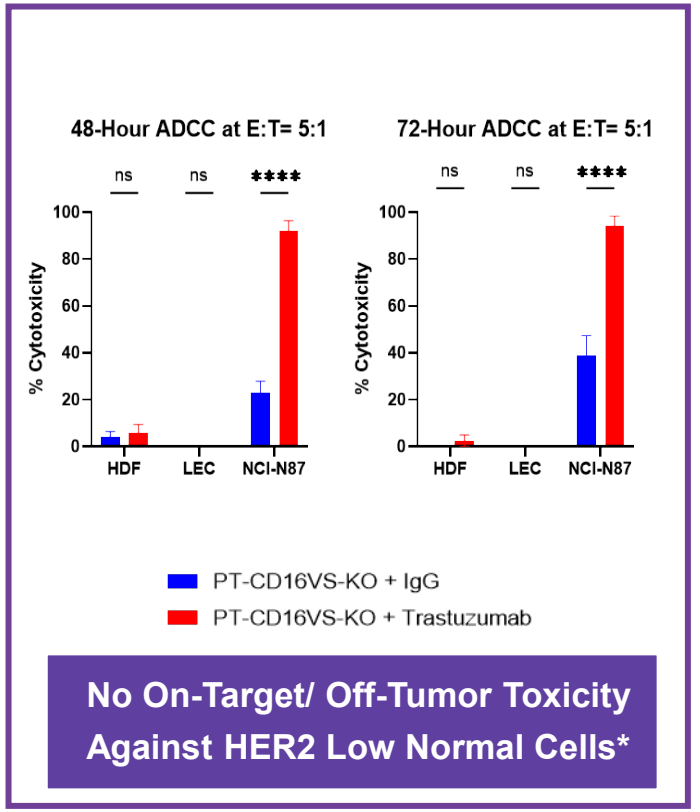
PT-CD16 + Trastuzumab: Superior Antitumor Activity



More Robust ADCC than NK cells*



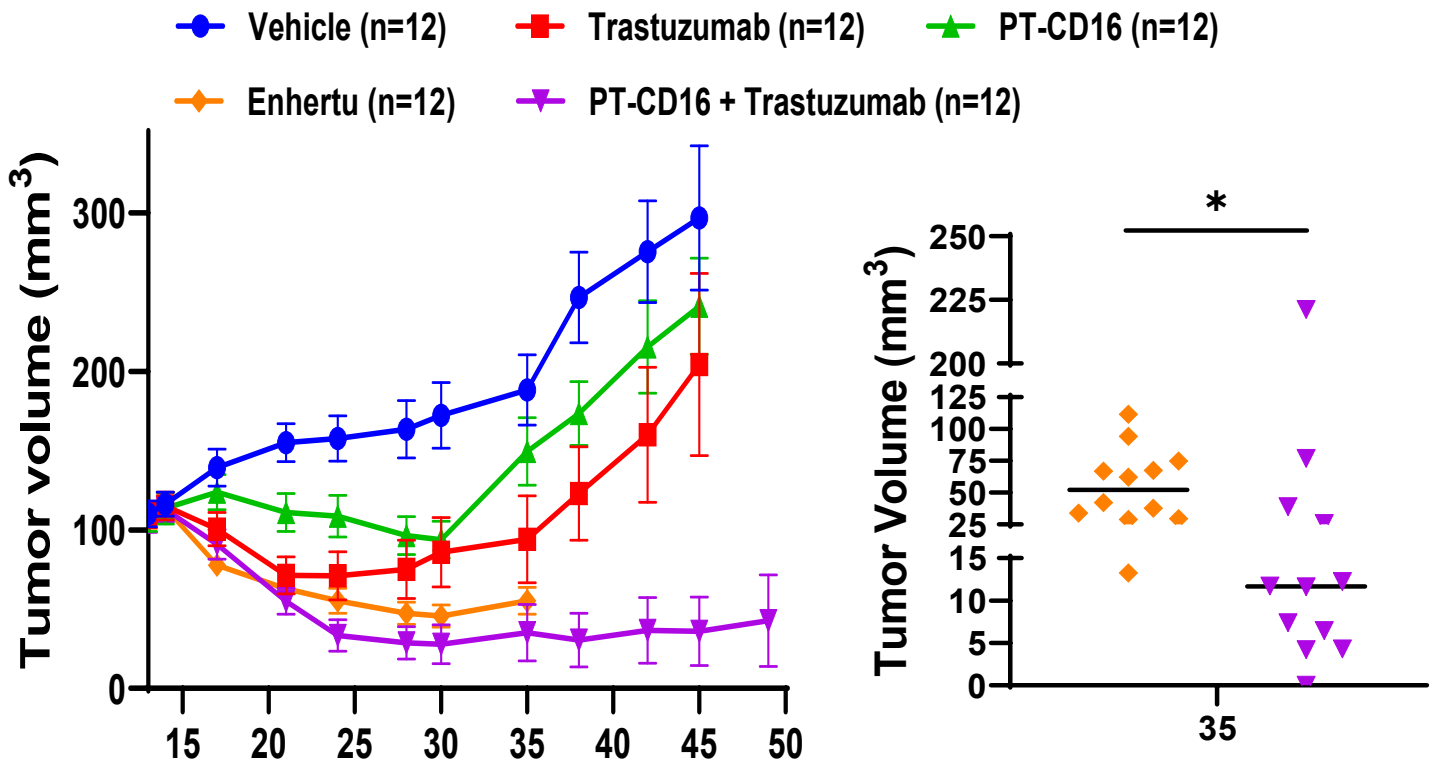
NK-like Low Cytokine Secretion Profile*



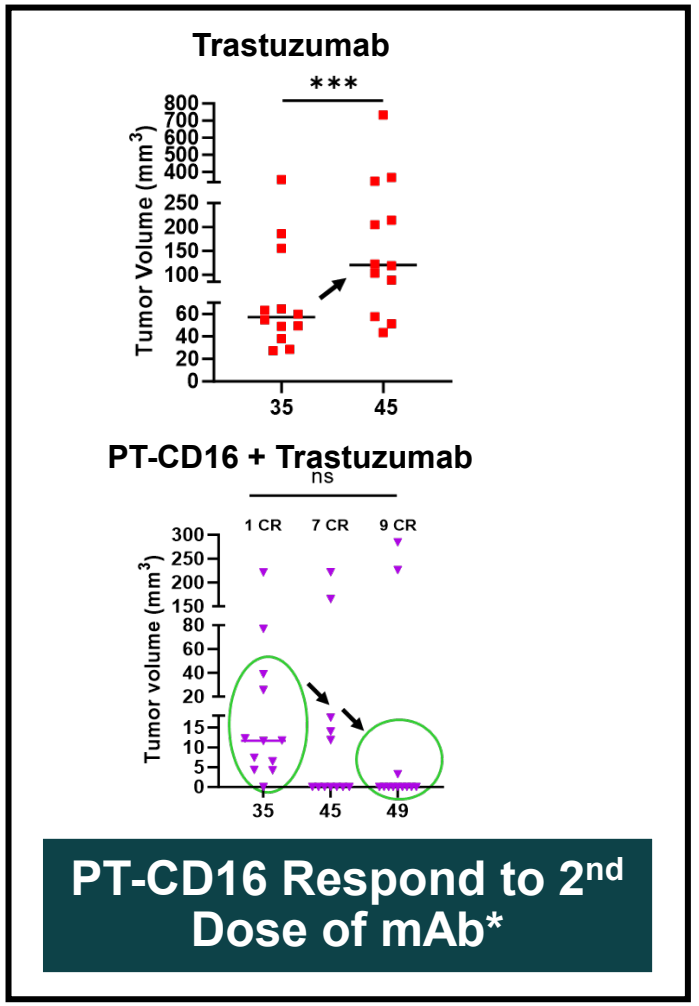
No On-Target/ Off-Tumor Toxicity Against HER2 Low Normal Cells*

PT-CD16 + Trastuzumab: Superior Antitumor Activity

Low Cytokine Secretion & No On-Target/ Off-Tumor Toxicity

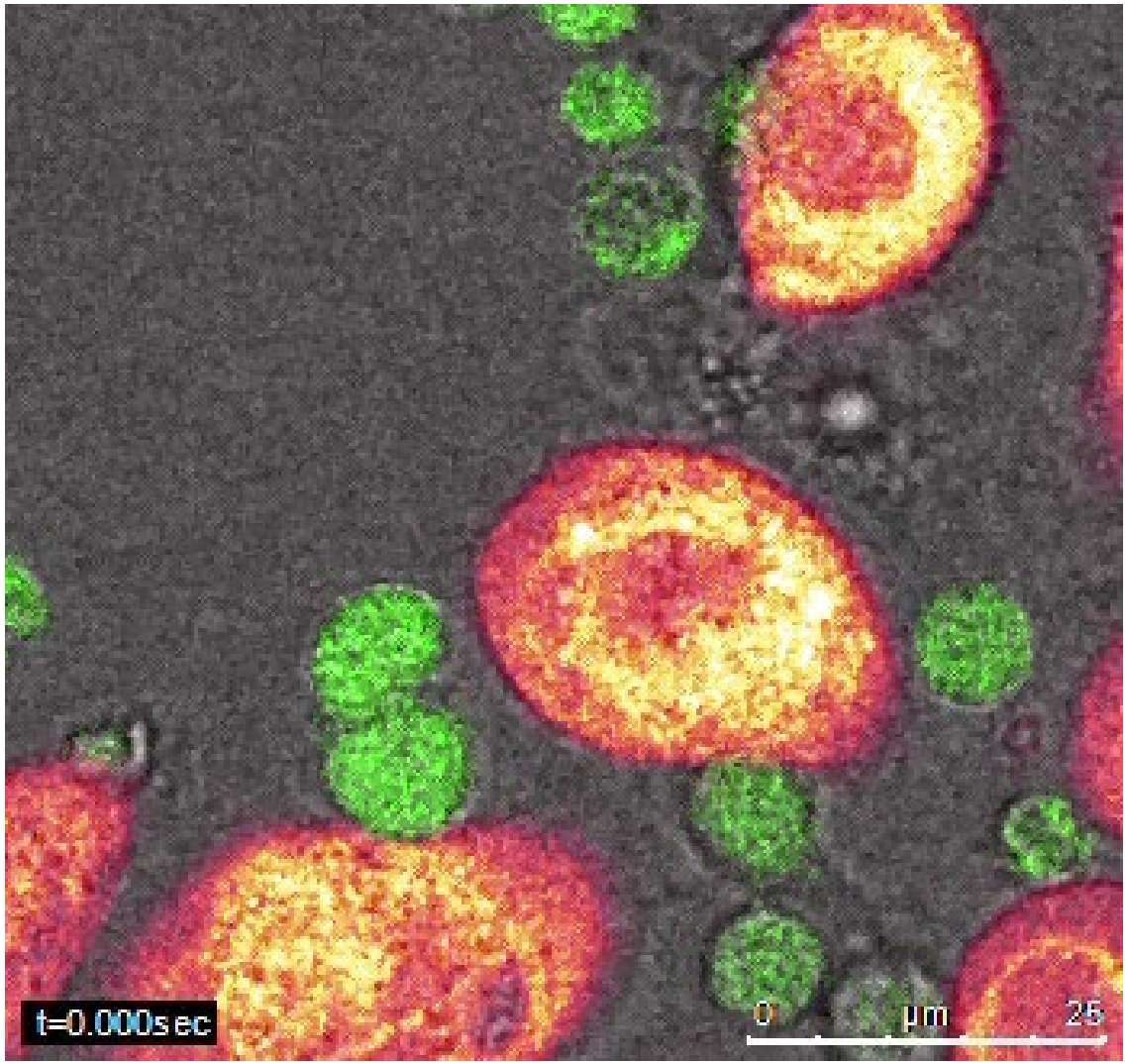


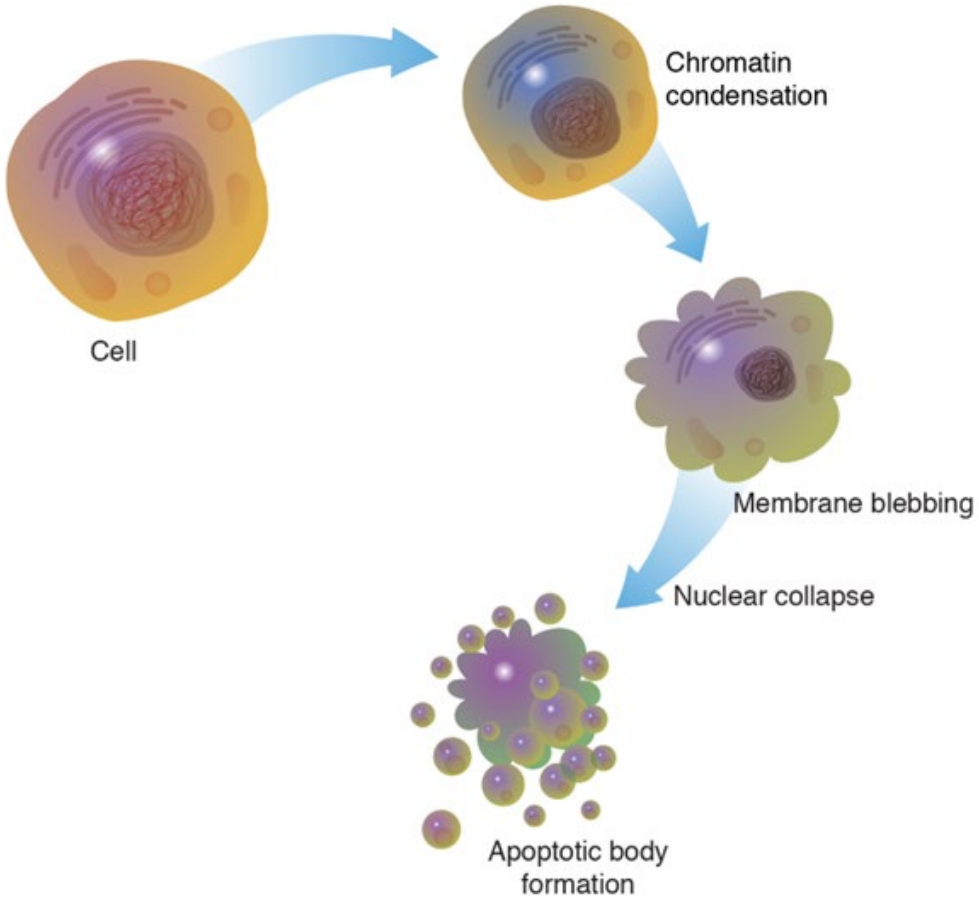
Superior Antitumor Activity*



PT-CD16 Respond to 2nd Dose of mAb*

PT-CD16 + TRASTUZUMAB KILLING HER2 +VE TUMOR CELLS

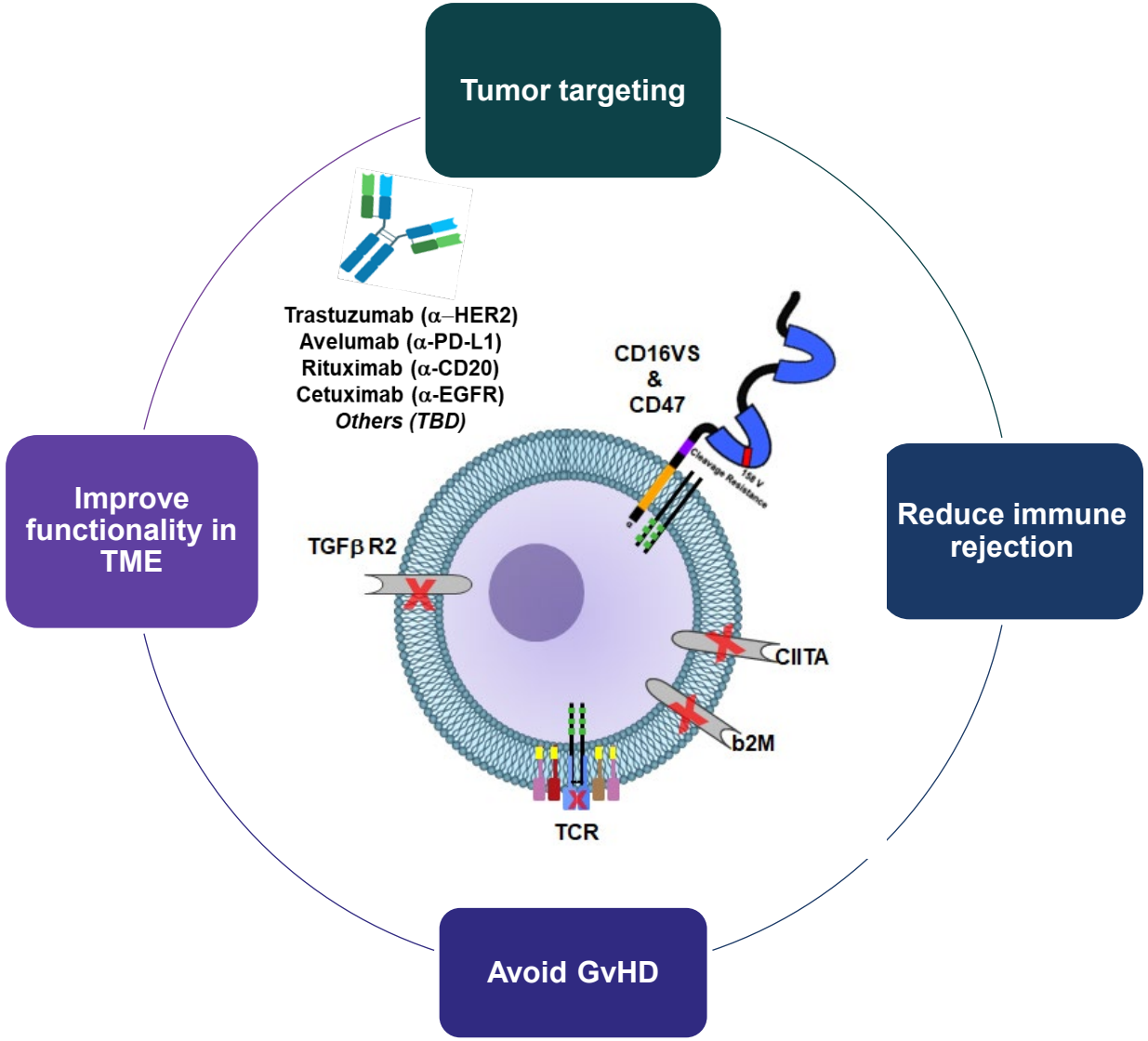




NEXT GEN PT-CD16: NOVEL DESIGN ENABLING T CELL-MEDIATED ADCC
A FIRST-IN-CLASS ALLOGENEIC "UNIVERSAL ENGAGER" T CELL

Challenge of CAR-T Therapy

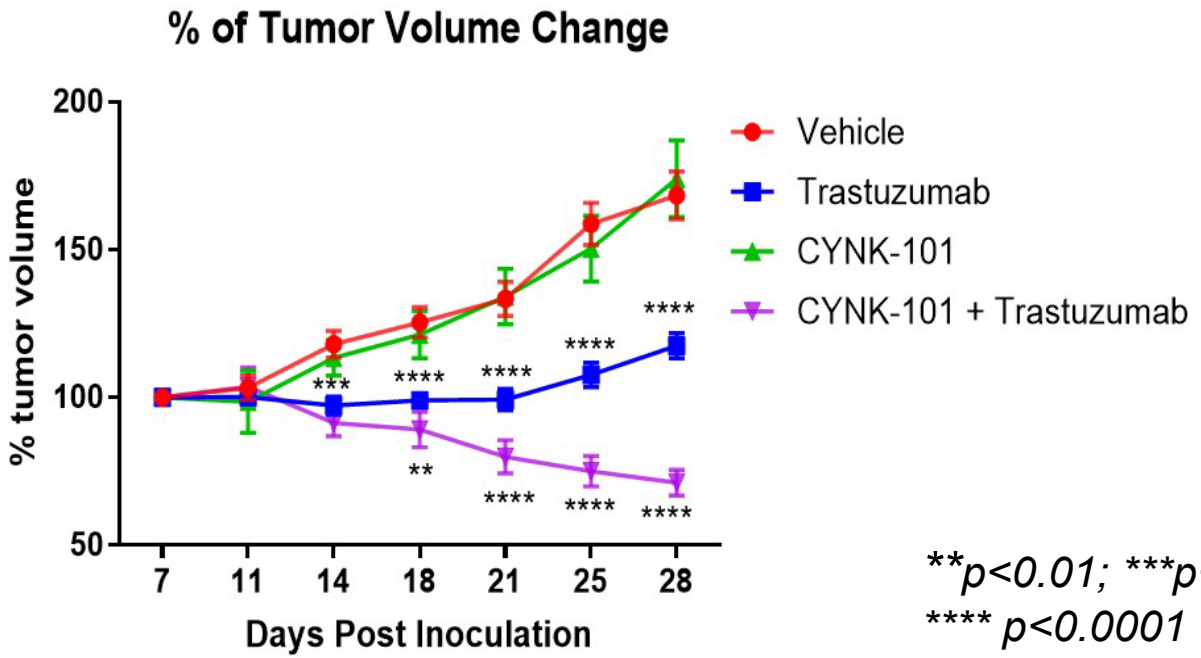
- Conventional CAR signaling induces T cell overactivation
  - CRS and neurotoxicity
  - Tonic signaling -> Exhaustion
- Antigen escape
- On-Target Off-Tumor toxicity
- Persistence and host vs. graft rejection



Celularity's Solution

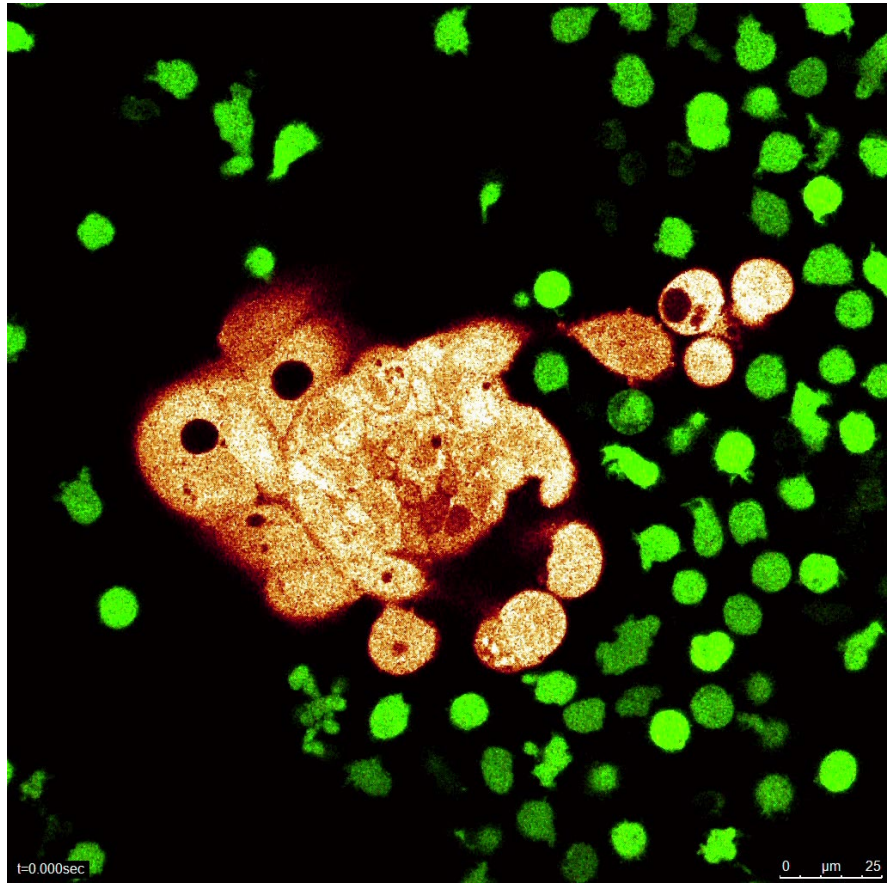
- CD16 signaling moderate T cell activation:
  - Low cytokine secretion
  - Controllable signaling through mAb withdrawal
- "Universal Engager" approach enabling the targeting of multiple antigens via Ab swap
- No On-Target/ Off-Tumor targeting observed with P-T CD16 cells
- Improved persistence through stealth modifications to reduce allorejection by host immune cells

CYNK-101 *in vivo* ADCC Efficacy



***p<0.01; ***p<0.001; **** p<0.0001*

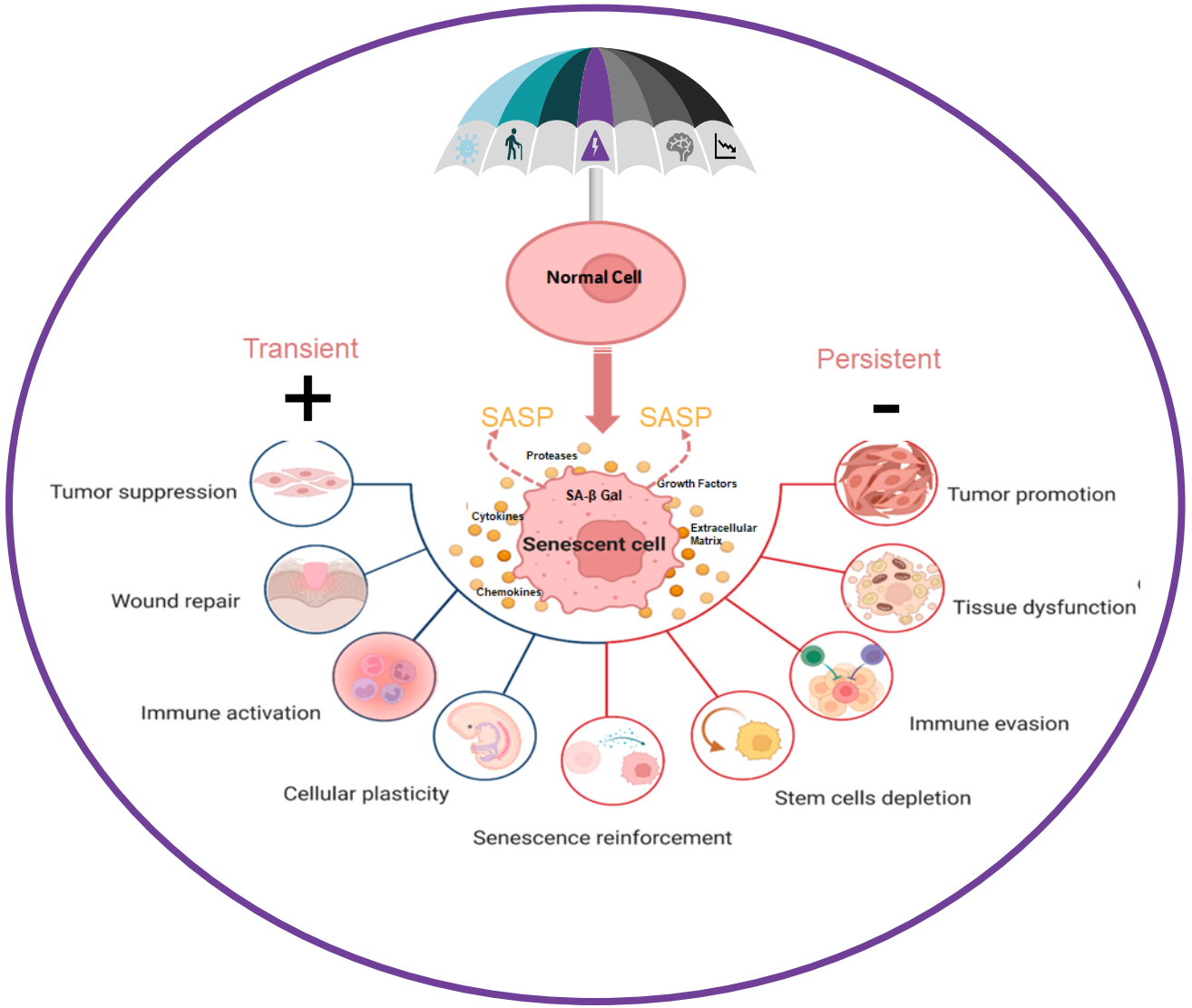
CYNK-101 *in vivo* killing HER2 +ve Cancer



Senescence

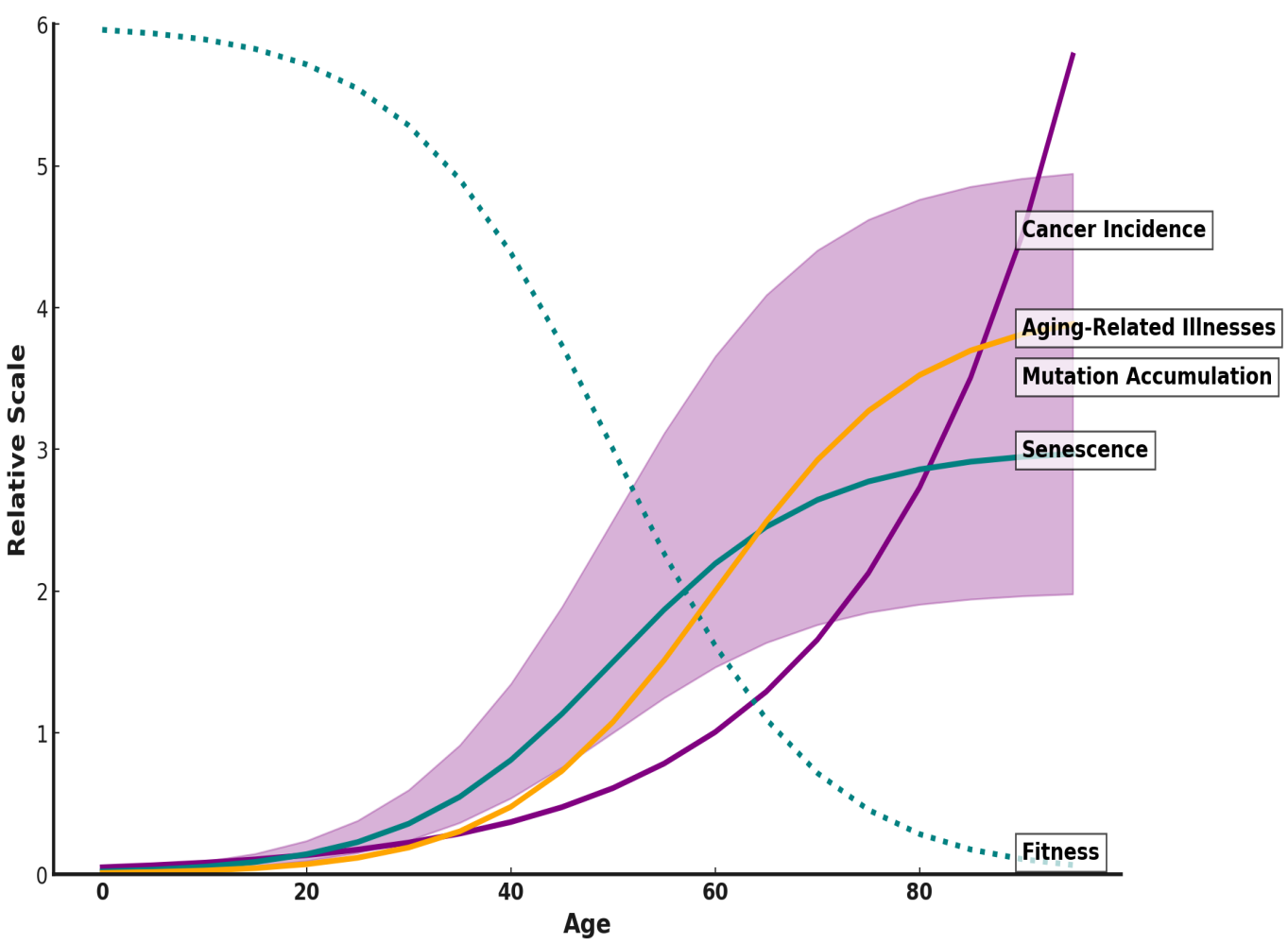
TARGETING THE COMMON BIOLOGY OF CANCER AND AGE-RELATED DISEASES

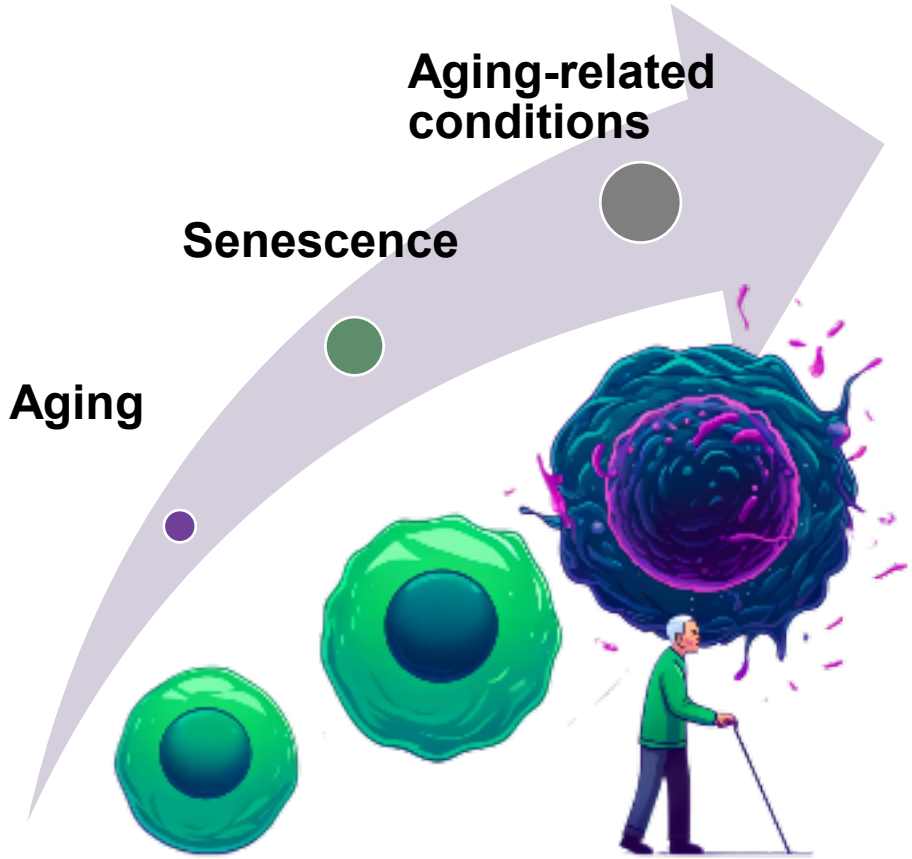
ACCUMULATION OF SENESCENT CELLS IS ACCEPTED AS A DRIVER OF A MAJORITY OF AGING-RELATED PATHOLOGIES



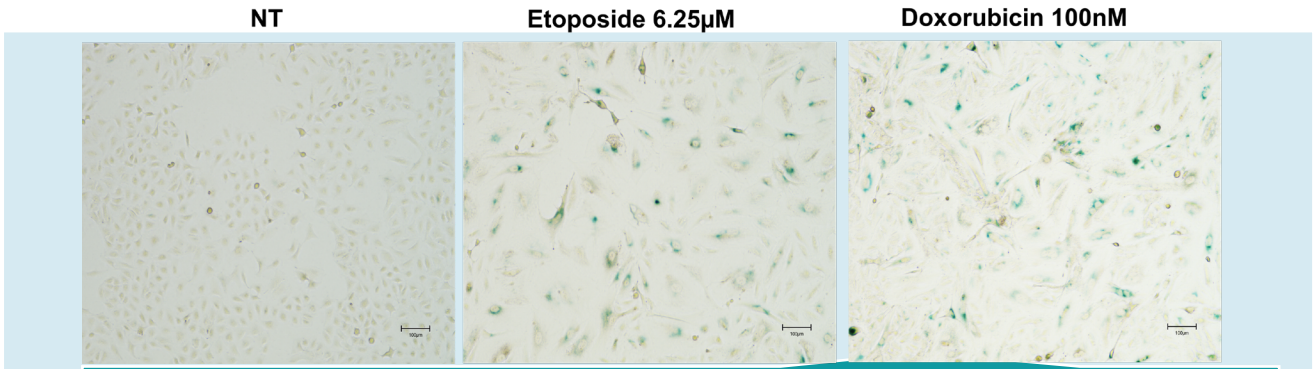
- Senescence involves cell-cycle arrest and the release of inflammatory cytokines
- Senescent cells exhibit morphological alterations and abnormal organelles
- Persistence of senescent cells can be maladaptive, leading to aging-related diseases including cancer
- Early clinical data confirm that senotherapeutic approaches could be beneficial in human disease
- NK cells have a key role in **senoablation**, removal of these persistent senescent cells

ADDRESSING THE CHALLENGES OF AGING-RELATED DISEASES



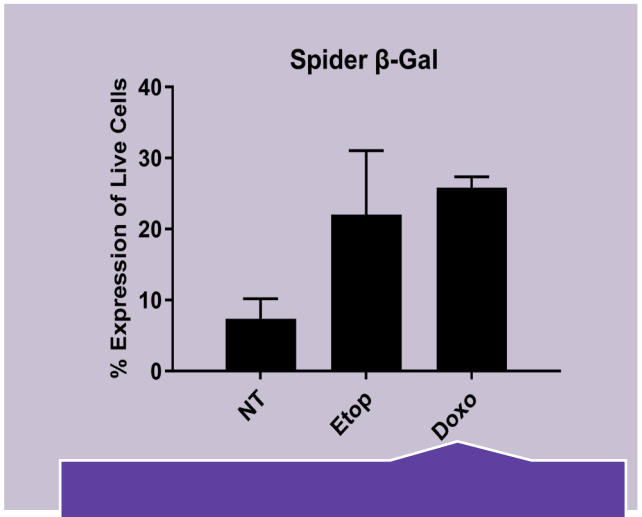


PRECLINICAL STUDIES DEMONSTRATE CYNK-001 AND CYNK-201 ACTIVITY AGAINST SENESCENT CELLS

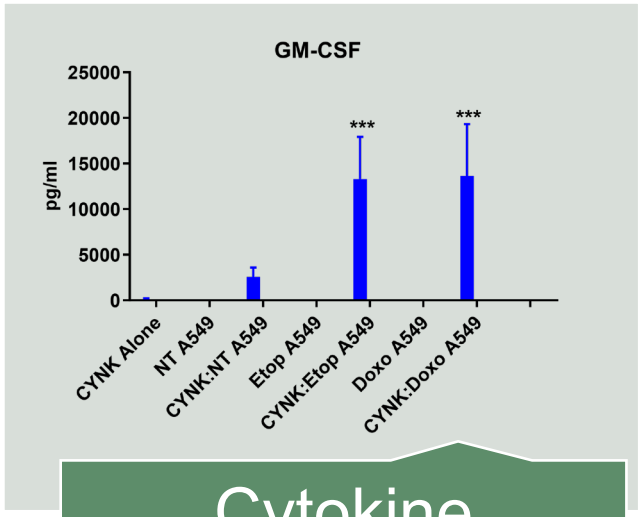


Chemo-induced Senescence

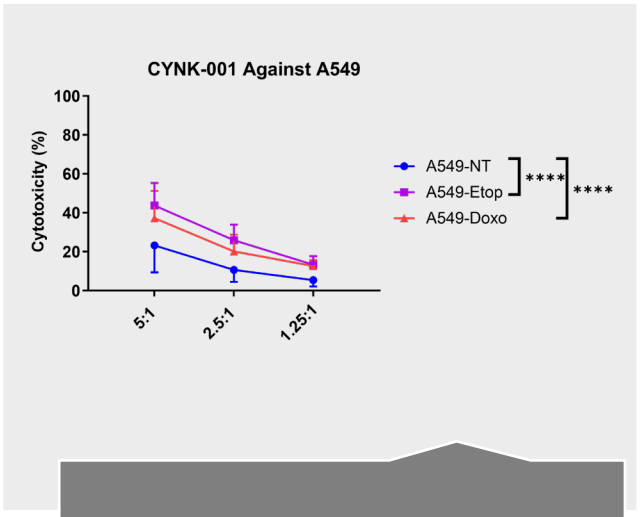
Both CYNK-001 and CYNK-201 cells demonstrated significantly enhanced elimination of senescent cells



β-Gal expression



Cytokine response



Cytotoxicity

CYNK-001 CELLS EXHIBIT THE CAPABILITY TO ERADICATE SENESCENT CELLS

Neurodegenerative

CLINICAL STUDIES DEMONSTRATE MLASCs IMMUNOMODULATORY AND REGENERATIVE ACTIVITY

Immunomodulation

Macrophages

Downregulate M1 phenotype
Upregulate M2 phenotype

Dendritic Cells

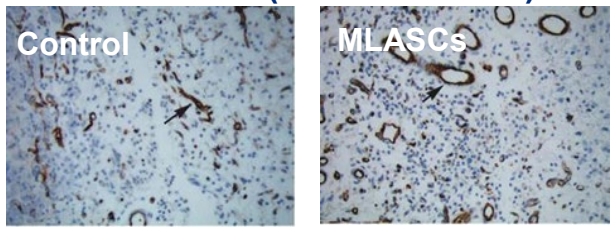
Reduce maturation of DC cells
Down- regulate immune stimulatory signals
Promote "tolerogenic" DC phenotype

T Cells

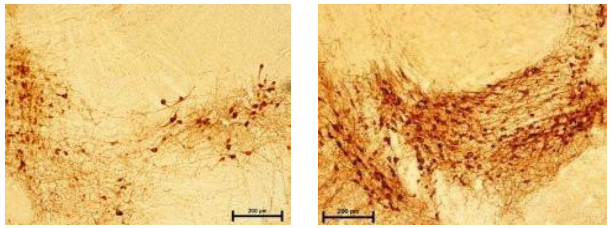
Suppress activated T cell proliferation
Reduce T helper (Th) Th1 and Th17 cells
Increase regulatory T cells (Treg)

Regeneration

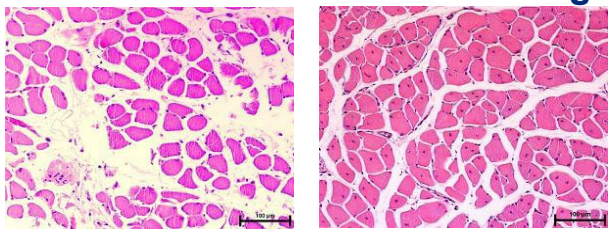
Stroke: vWF (blood vessels)



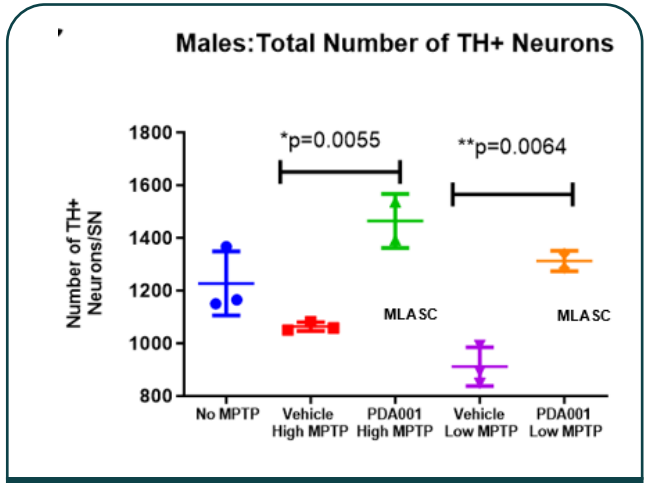
Parkinson's Disease: TH (DA Neurons)



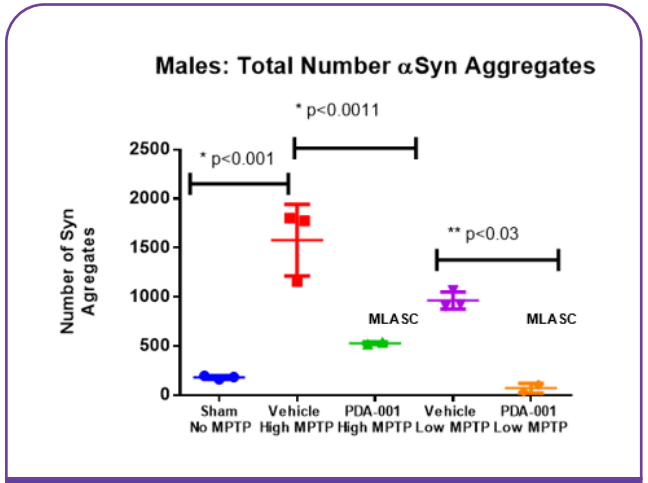
Hindlimb Ischemia: H&E Staining



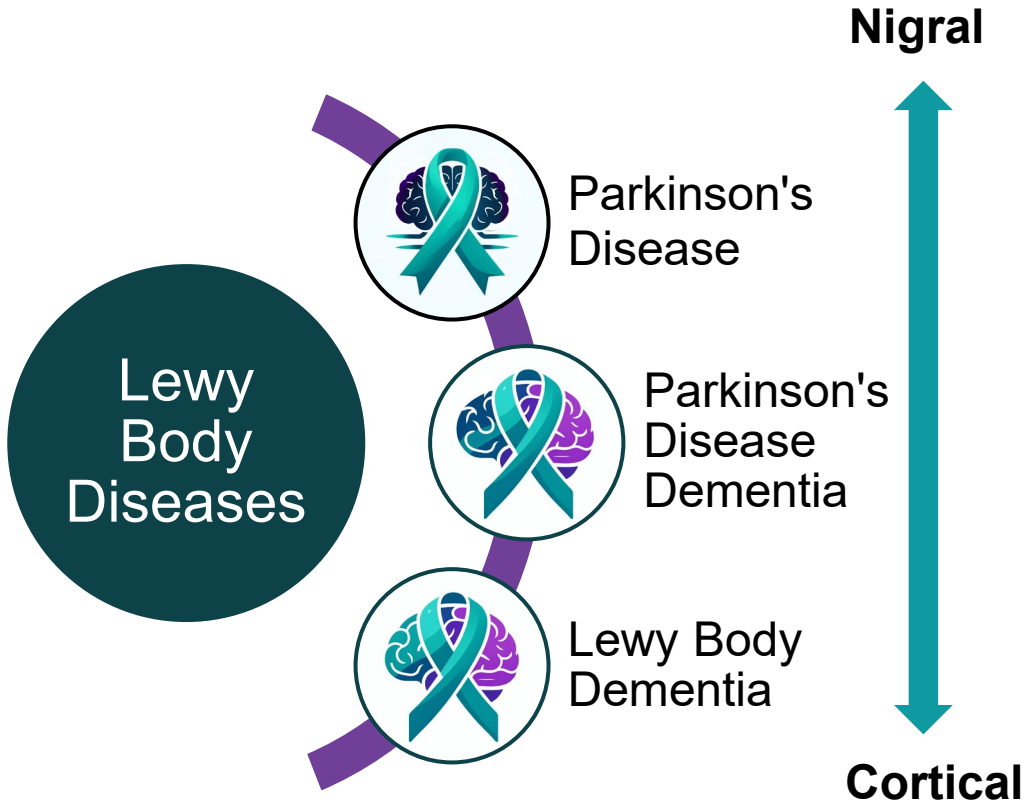
IN-VIVO EXPERIMENTS SUGGEST POTENTIAL OF MLASCs IN LEWY BODY DISEASES



MLASCs can prevent the loss of dopamine neurons associated with PD neurotoxicity



Reduction of α-Syn alpha-synuclein aggregates in SN caused by high dose of MPTP was observed with the MLASCs



FACIOSCAPULOHUMERAL MUSCULAR DYSTROPHY (FSHD)

FSHD is currently one of the most prevalent types of muscular dystrophy

- Prevalence 1/20,000
- Conservative estimate
- **17,500 cases in USA**

Most people with the disease have a normal life span.

- Disease severity is highly variable
- **25% of patients >50 years of age require a wheelchai**r

IND Cleared
Awaiting
Orphan drug
designation
decision

2024 RECOGNITION OF OUR SCIENCE

ACCEPTED

Journal for ImmunoTherapy of Cancer

Placental circulating T cells: a novel, allogeneic CAR-T cell platform with preserved T cell stemness, more favorable cytokine profile, and durable efficacy compared to adult PBMC-derived CAR-T

ORS TENDONSECTION Orthopaedic Research Society

Emerging technologies for the management and protection of tendon injuries: decellularized placental biomaterials

12th World Biomaterials Congress WBC2024

Tri-layer Decellularized, Dehydrated Human Amniotic Membrane Supports Proliferation and Stemness Of Limbal Stem Cells Derived From Induced Pluripotent Stem Cells

AACR

Placental circulating T cells expressing CD16 in combination with Trastuzumab demonstrate robust anti-tumor antibody dependent cellular cytotoxicity (ADCC) against gastric cancer

ASCO®

Effect of placental circulating T cells expressing CD16 on multiple hematological and solid tumor cancers through combination with various monoclonal antibodies

ASGCT

Human Placental Hematopoietic Stem Cell Derived Natural Killer Cells preferentially eliminate senescent cells derived from a tumor model

Technical Operations

STATE-OF-THE-ART RESEARCH AND GMP MANUFACTURING INFRASTRUCTURE

WORLD-CLASS FACILITY FOR COMMERCIAL-SCALE MANUFACTURING

- **$100M investment** in cGMP/cGTP manufacturing
- *Highly specialized scientists, engineers & technicians*
- Enables greater control, efficiency and optimization

FULLY INTEGRATED COMMERCIAL-SCALE MANUFACTURING SITE

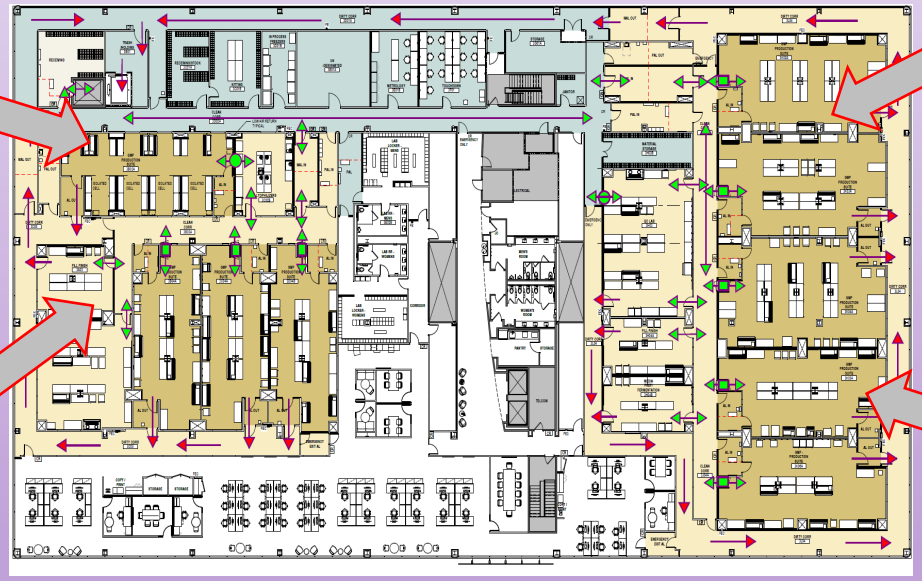
- Optimized product-specific CMC, QA/QC and manufacturing processes to accelerate development, production and commercialization
- **9 Grade C/ISO 7 suites**
- **6 Grade D/ISO 8 labs**
- Dedicated translational research labs

Celularity leverages 20 year+ investment in technologies and expertise required to manufacture cellular & biomaterial products at scale.

MANUFACTURING SUITES

Production Suites

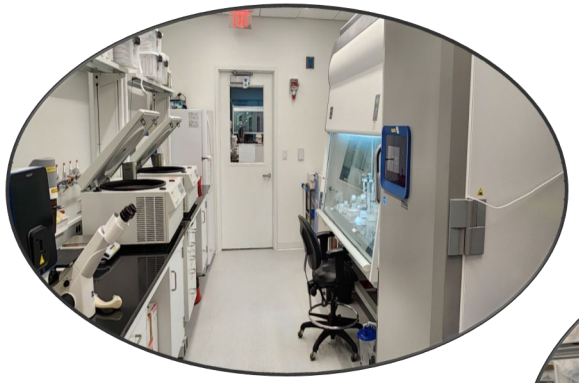
- 9 x Grade C/Class 10,000
- Controlled classified corridors (Grade D); both clean & exit.
- Airlocks (Grade C & D)
- Cart/Material Pass through
- ISO manufacturing environment
- BSL 2 environment



Support Labs

- 6 x Grade D/Class 100,000
- Unidirectional Flow
- Controlled classified corridors (Grade D)
- QC, Media Prep, Lyophilization, etc.

PROCESS & ANALYTICAL DEVELOPMENT LABS



- Flexible Lab space to support multiple cell types and products
- Capabilities and equipment for small and large processing to support all phases of development and transfer activities
- **Identical processing at-scale equipment across PD and GMP** suite for efficient tech transfer and effective process troubleshooting
- **Identical analytical instrumentation across QC and analytical development** for smooth and fast method transfer

CELULARITY'S QUALITY MANAGEMENT SYSTEM

Celularity is audited/inspected

- **FDA (Aug 14 – 22, 2023)**
- Association for the Advancement of Blood and Biotherapies (AABB) (Aug 2-3, 2021)
- American Association of Tissue Banks (AATB) (Jul 24-28, 2023)
- New York State Department of Health (Apr 5-8, 2022)

The Celularity QMS complies with
Human Cells, Tissues, and Cellular and Tissue-Based Products under 21 CFR 1271

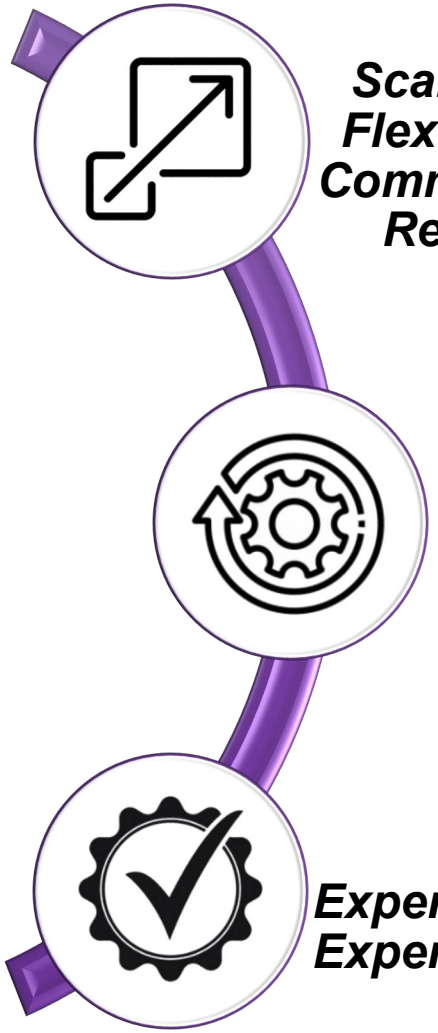
- IND Products under 21 CFR 211
- Blood Components and laboratory requirements under 21 CFR 600.

Documents and Records → Complaints, NC & CAPAs → Suppliers and Audits → Change control → Training

Celularity's Capability Highlights

Enabled Through Commercial Ready Facility and Expertise in Cell Therapy Product Processing and Manufacturing

Autologous



Scalable, Flexible & Commercial Ready

- Commercial ready facility to support **nine (9)** cell therapy products concurrently – **autologous / allogeneic**
- Simultaneously support up to **18+** tissue based **advanced biomaterials**
- Expansive suites - (9) ISO 7, (6) ISO 8 (additional capacity available)
- **Audited/inspected operations by the FDA**

Quality Oversight & Robust CoI and CoC

- Robust QMS – ACE
- In-house QC, Tech training & Metrology
- External testing network to supplement in-house capabilities
- Chain of Custody (CoC) and Chain of Identify (CoI) from donor material receipt to shipment back to treatment center

Allogeneic

Expertise & Experience

- Internal talents with experience in autologous / allogeneic product
- Multiple IND and ODD/FTD filings
- **Ongoing partnership with Big Biopharma on Cell Therapy Product Development**

COLLABORATIONS AND PARTNERSHIP

REGENERON
SCIENCE TO MEDICINE®

Arthrex®

GENTING
BERHAD

VERSÉA™
Ophthalmics

CIRM
CALIFORNIA'S STEM CELL AGENCY

Celgene

Cryoport

BioCellgraft

SUMMARY

- Addressing the challenge of aging-related diseases.
- Diversified revenue stream with 280% growth in Q1 YoY.
- On track for three 510(k) filings in 2025-2026 with multi-billion $ market potential.
- Developing first-in-class / best-in-class cellular and regenerative therapies.
- State-of-the-art research and GMP manufacturing infrastructure.