

AGENE BIO

**Developing Innovative Therapeutic Solutions
for Patients at Risk of Neurodegeneration**

October 29, 2014



About AgeneBio

- Science and intellectual property based upon decades of research at Johns Hopkins focused on cognitive neuroscience and the neurobiology of the aging brain
- Leadership team with track record of success from basic research through commercialization
- Phase III ready candidate (AGB101) targeting large, unserved population with amnesic mild cognitive impairment (aMCI)
 - AGB101 restores normal brain function and memory in aMCI patients
- Novel GABA_A α 5 program in late discovery stage (IND 4Q15/1Q16)
 - Multiple cognition-related indications: aMCI, autism, schizophrenia
- ABG101 and GABA_A α 5 programs both with key issued patents

Management Team and BOD with Expertise Aligned to the Mission

Management

Jerry McLaughlin, President, CEO, Board of Directors

24-year veteran of the pharmaceutical industry: Merck, Endo, NuPathe

Michela Gallagher, PhD, Founder, CSO, Board of Directors

>20 years researching the neurobiology of aging: Johns Hopkins University, UNC-Chapel Hill

Sharon Rosenzweig-Lipson, PhD, VP, R&D

>20 years developing compounds for neurologic indications: Pfizer, Wyeth, AHP

Board of Directors (non-management)

Pat LePore, Chairman

Former Chairman & CEO, current Director for Par Pharmaceuticals

Floyd Bloom, MD

Founder and Director of Alkermes Inc., former Editor-In-Chief of *SCIENCE*

Charles Clarvit

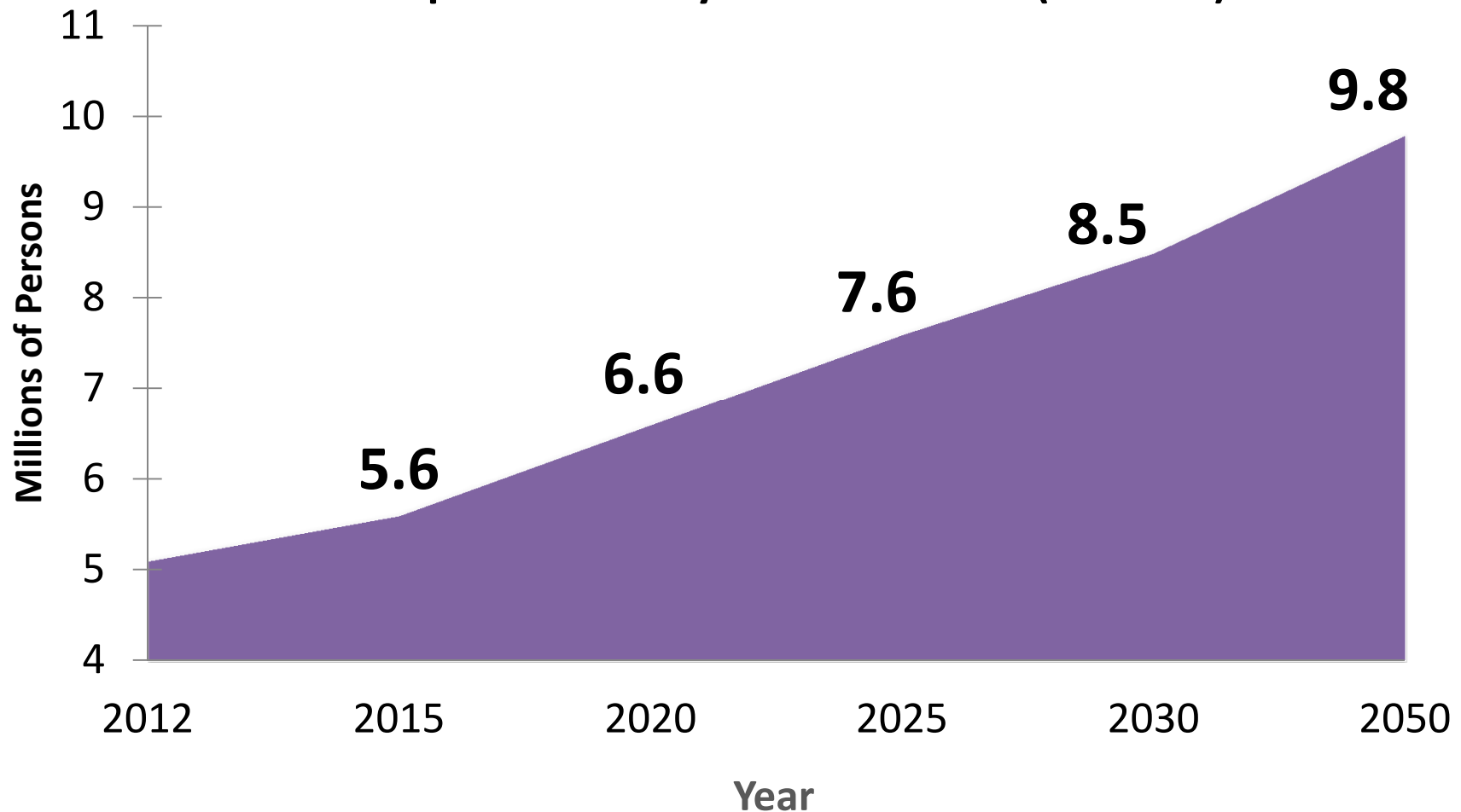
CEO of Vinci Partners US, former Co-Head of BlackRock Alternative Advisors, Johns Hopkins Trustee

Ronald Nordmann

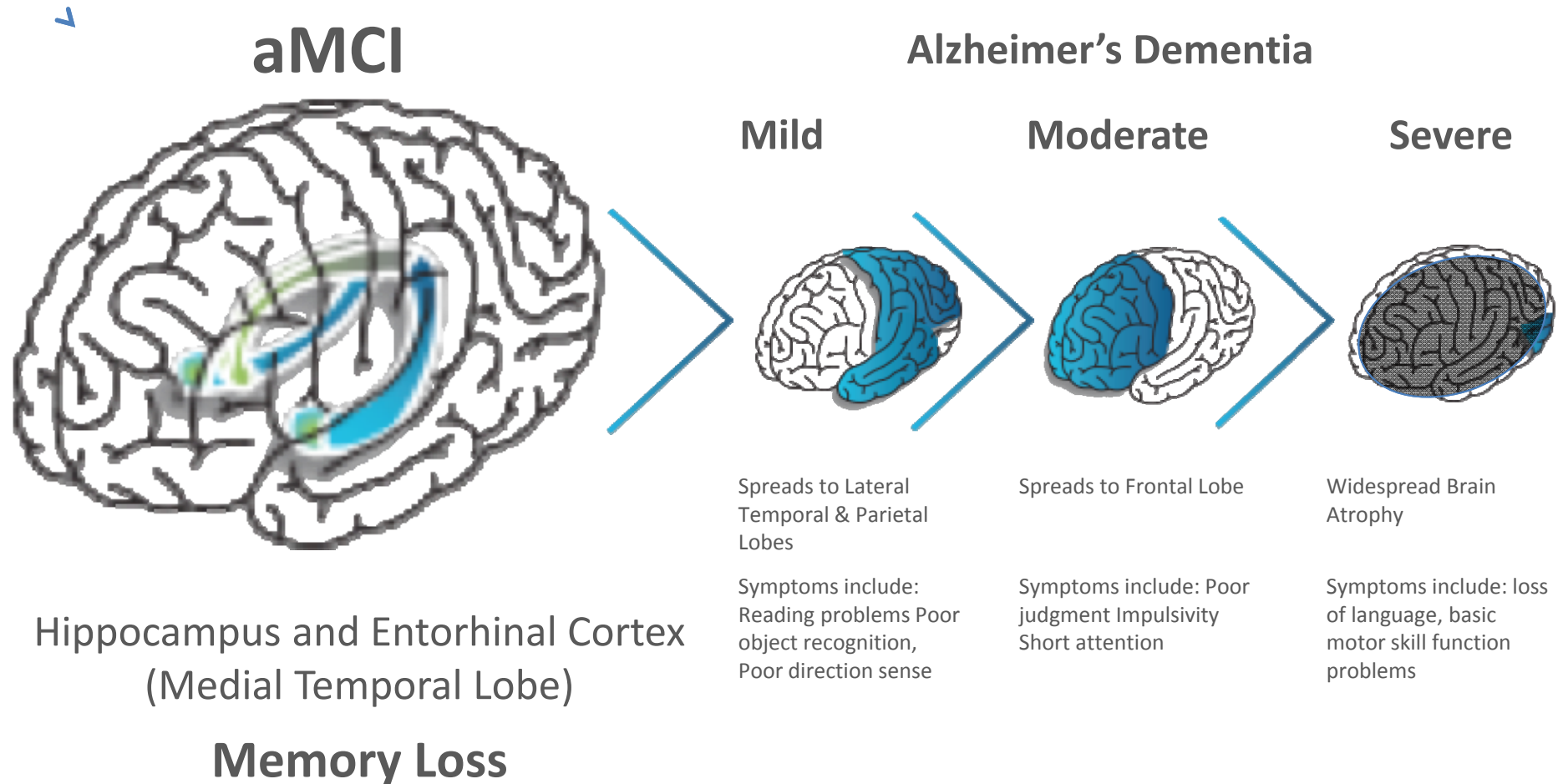
Former Partner at Deerfield Management, PaineWebber Group, Inc., Johns Hopkins Trustee Emeritus

US Population with aMCI Exceeds 5 Million Today and May Nearly Double by 2050

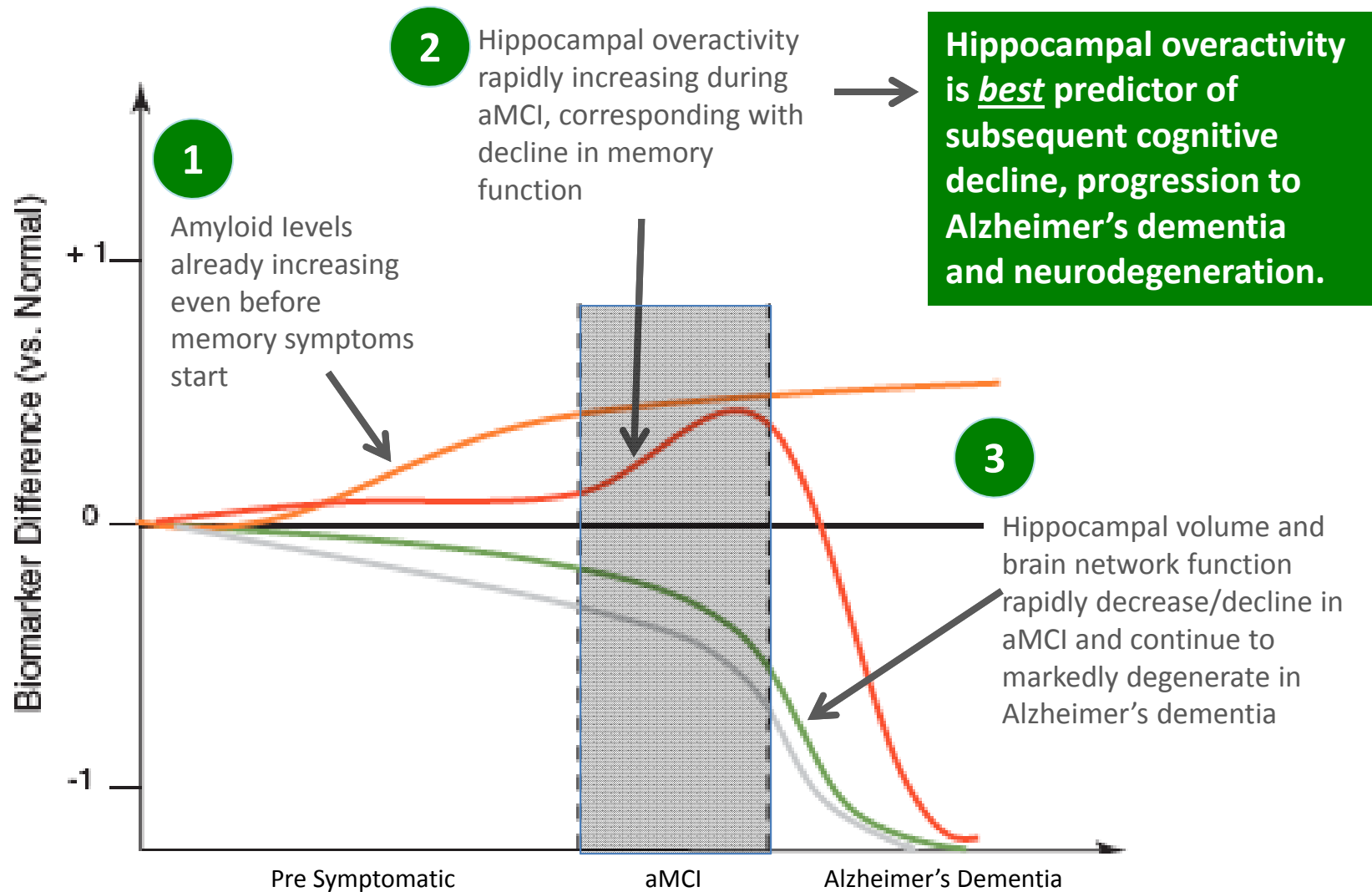
US Population >65 years with aMCI (Millions)



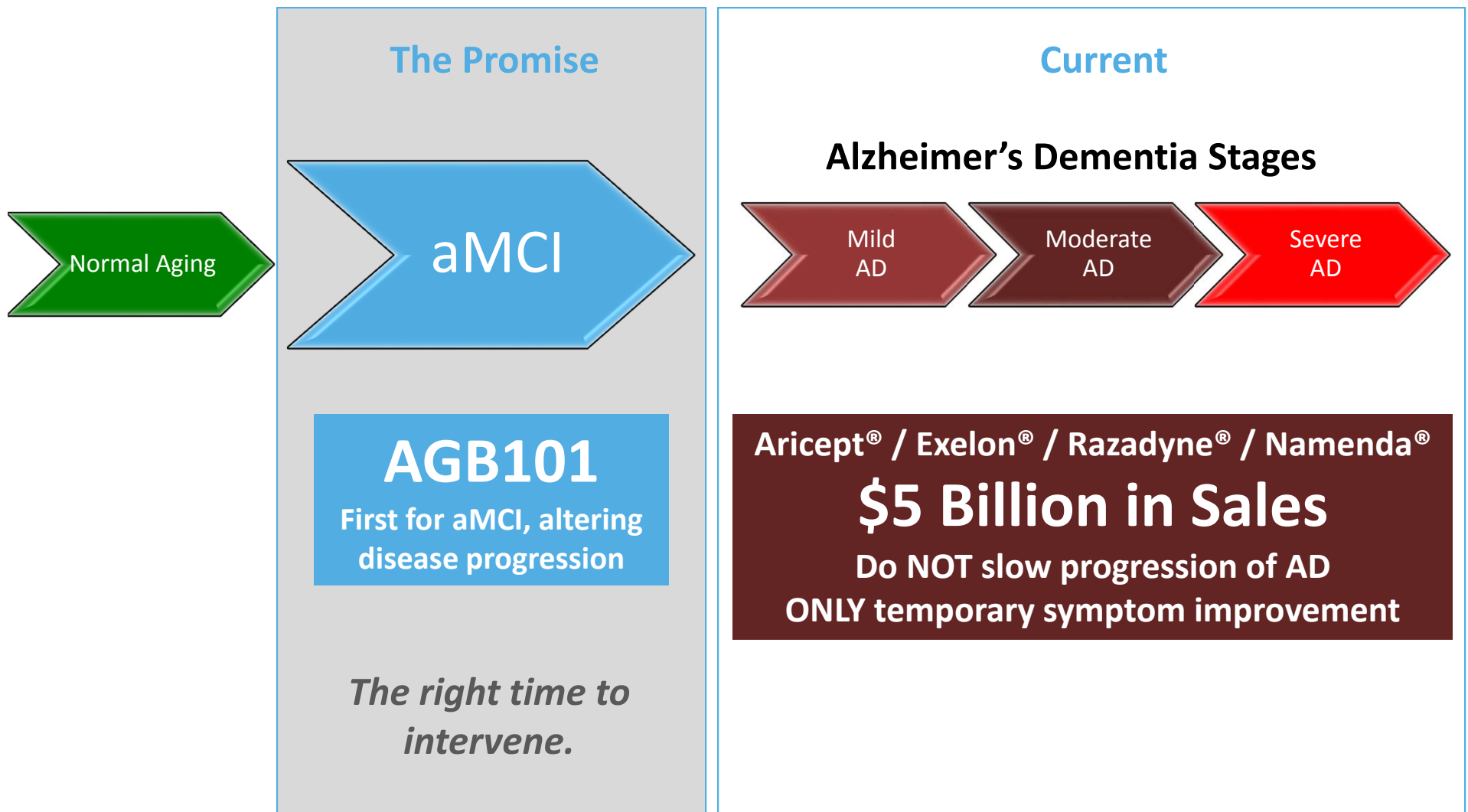
aMCI Manifests as the Result of Neurodegeneration in the Medial Temporal Lobe



aMCI: Period of Rapid Changes in Hippocampal Activity and Memory Decline



No Approved Treatments for aMCI and Nothing Today Alters Disease Progression

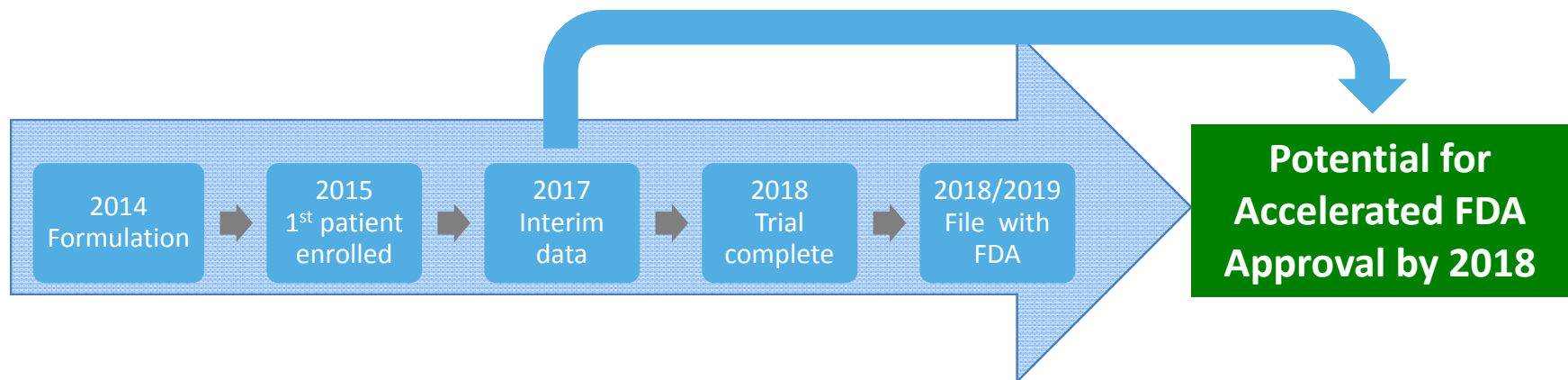


AGB101 Restores Normal Brain Circuitry and Improves Memory in aMCI Patients

- Active ingredient: levetiracetam
 - Mechanism of action: modulates neuronal firing in the hippocampus
 - Commercially successful atypical antiepileptic (~2B in peak sales)
 - AGB101 is dosed once-a-day at 1/5 the antiepileptic dose
- Preclinical data in age-impaired and AD rodent models
 - AGB101 improves the entorhinal cortex - hippocampal network & memory
- Phase II clinical data in aMCI - AGB101:
 - Attenuates hippocampal overactivity
 - Restores entorhinal cortex activity
 - Improves memory function

Development Program for AGB101 is Significantly De-risked

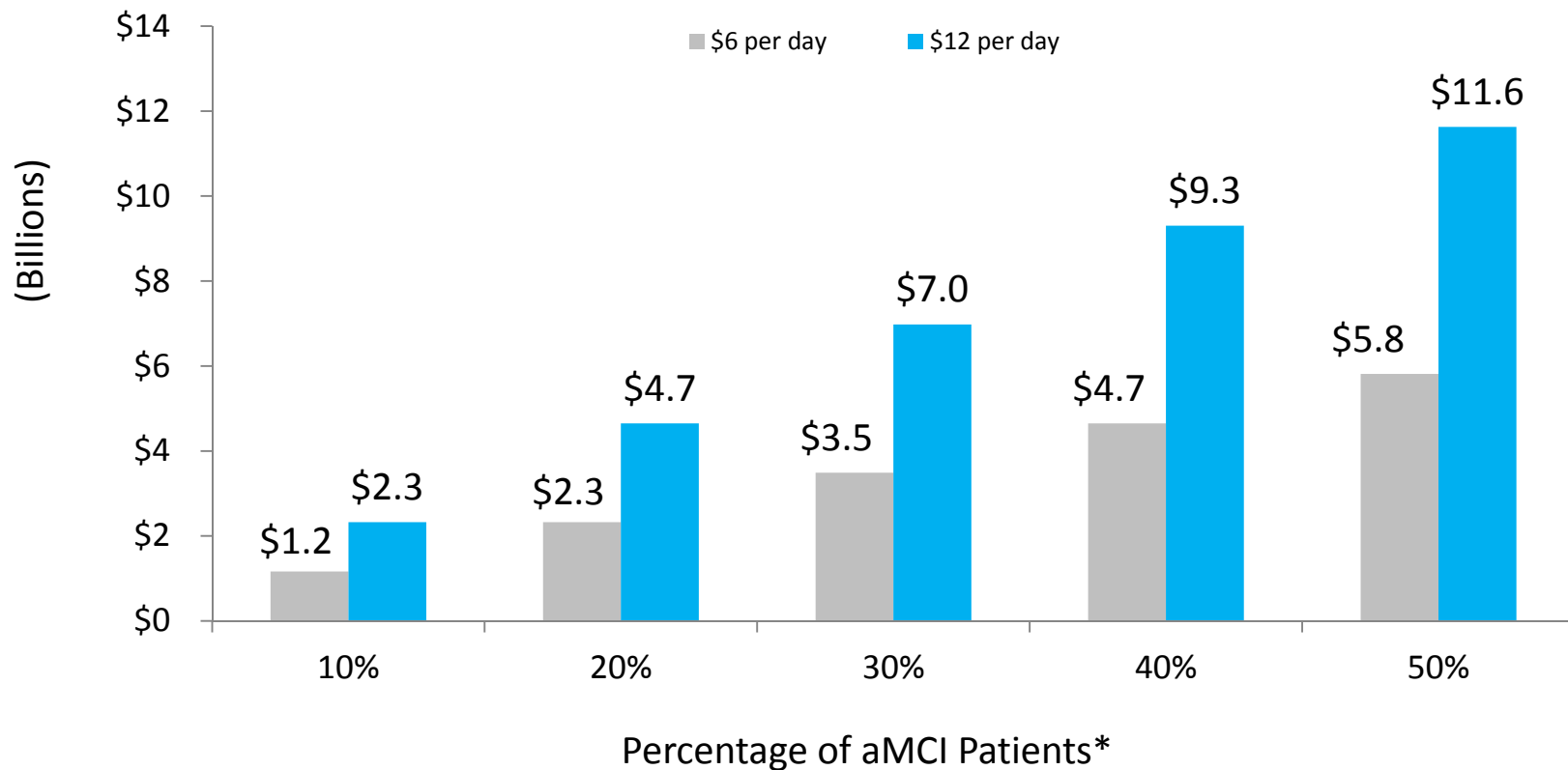
- ✓ Efficacy consistent from preclinical through Phase II
- ✓ Established safety at 5X the AGB101 dose
- ✓ Regulatory path - Phase III plan complies w/FDA guidance
 - Primary endpoint: CDR-SB
 - Key Secondary: Entorhinal cortex thinning



- ✓ U.S. patent 8,604,075 - Low dose levetiracetam in cognition (2029)
 - Additional patents in process

aMCI Population Presents a Substantial Market Opportunity

aMCI Revenue Opportunity (US Only)

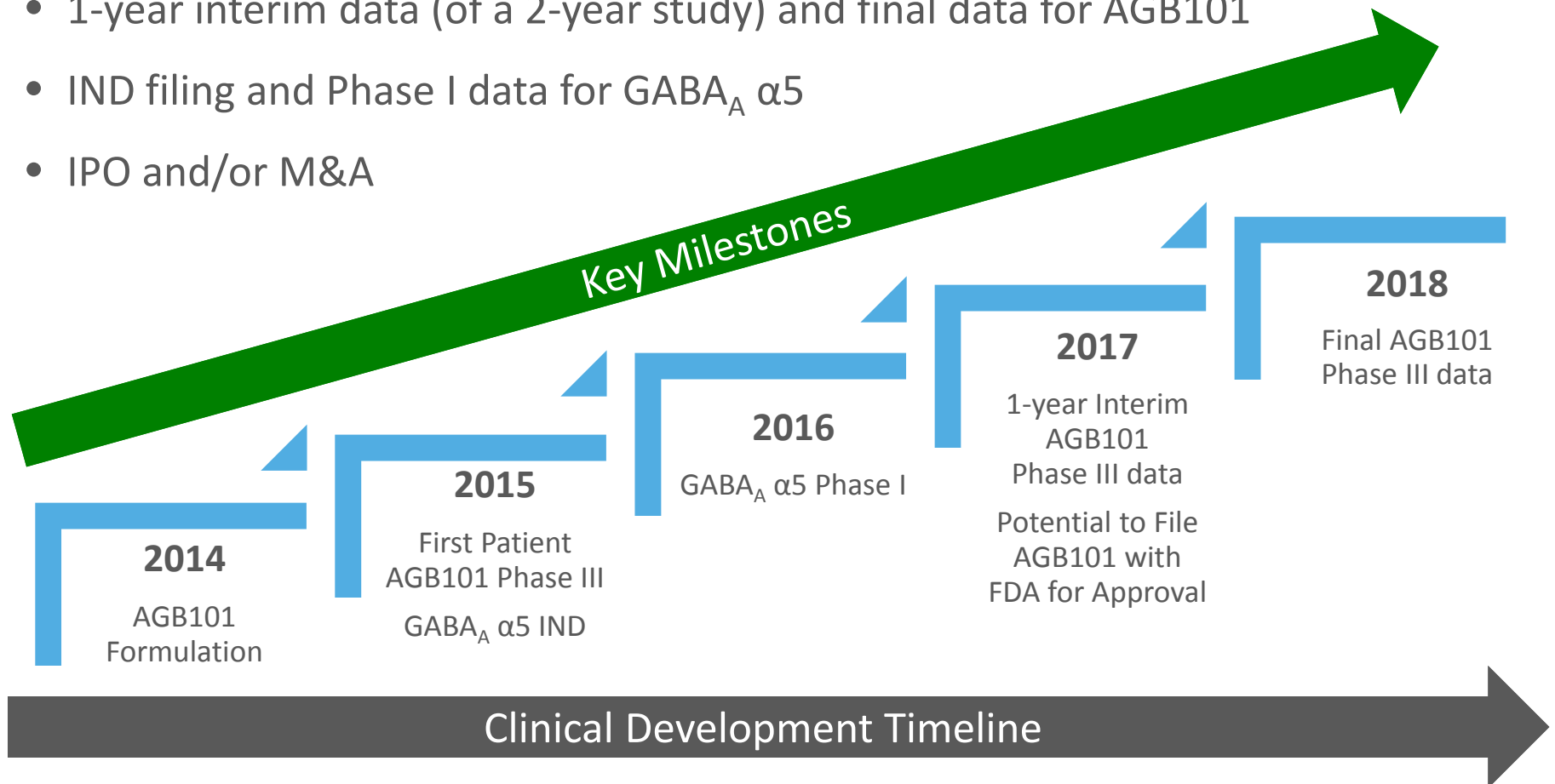


* 2025 aMCI patient estimates. Based upon prevalence of aMCI in the US of 5 million in 2012 with an annual growth rates of 3%. Assumes 70% compliance rate.

Milestones Provide Multiple Valuation Drivers and Liquidity Opportunities

Key Drivers

- 1-year interim data (of a 2-year study) and final data for AGB101
- IND filing and Phase I data for GABA_A α5
- IPO and/or M&A



AgeneBio Summary

- Unparalleled science driving development assets
- Next-stage team in place to rapidly advance the pipeline
- Regulatory pathway with FDA buy-in for lead program
- IP protection in place for all pipeline assets
- Attractive commercial opportunities

AGB101

Potential to be the first therapeutic for aMCI and first to delay the onset of Alzheimer's dementia

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