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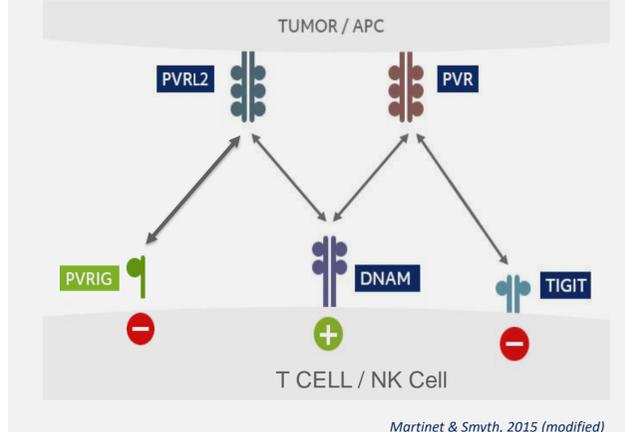
West Cancer Center, Memphis, TN¹; South Texas Accelerated Research Therapeutics (START), San Antonio, TX² Sarah Cannon Research Institute., Nashville, TN³; Compugen USA Inc., South San Francisco, CA⁴.

BACKGROUND

- There is a high unmet medical need for the treatment of pts with relapse/refractory disease following treatment with checkpoint inhibitors
- COM701 is a novel first-in-class checkpoint inhibitor and humanized IgG4 monoclonal antibody that binds with high affinity to poliovirus receptor related immunoglobulin domain containing (PVRIG) blocking its interaction with its ligand, PVRL2
- In non-clinical experiments we have demonstrated that inhibition of PVRIG leads to enhanced activation of T and NK cells and that knockout of PVRIG results in tumor growth inhibition in mouse tumor models
- We hypothesize that COM701 will be safe and tolerable and demonstrate antitumor activity in pts with R/R solid tumors
- We have reported on safety/tolerability in initial dose level cohorts¹

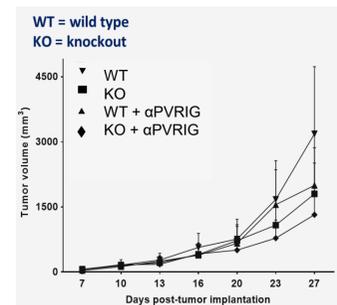
PVRIG IS A Novel Checkpoint in the TIGIT/DNAM-1 AXIS

Two Parallel Inhibitory Pathways



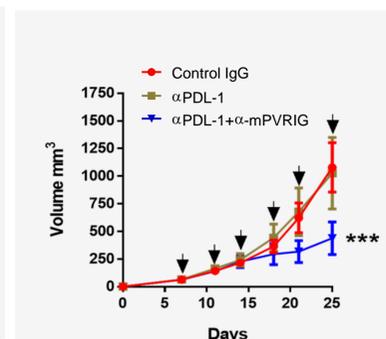
PVRIG INHIBITION REDUCES TUMOR GROWTH IN MOUSE CANCER MODELS

PVRIG KO MICE (MC38)



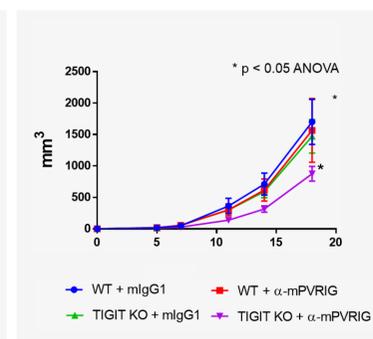
Reduced tumor growth in KO mice

anti-PVRIG + anti-PD1 (CT26)



Synergistic tumor growth inhibition with anti-PD1

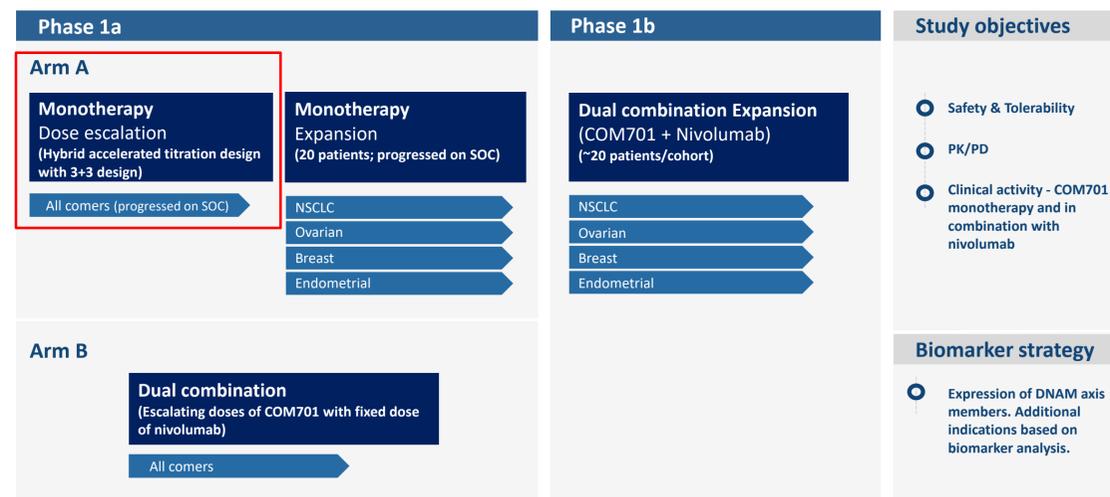
anti-PVRIG + TIGIT KO (B16)



PVRIG inhibition required for tumor growth inhibition in TIGIT KO mice

METHODS

- NCT03667716 is an ongoing open-label first-in-human phase 1 study in pts with R/R solid tumors
- We report on the initial part of this study (in red box) evaluating the safety and tolerability of escalating doses of COM701 monotherapy IV Q3 weekly



EXPLORATORY OUTCOME MEASURES

- To evaluate preliminary antitumor activity of COM701 as monotherapy
- To assess any association of DNAM axis members with clinical outcome
- To explore evidence of COM701-mediated PD effect in blood as monotherapy as well as in combination with nivolumab

KEY INCLUSION CRITERIA

- Age ≥18 yrs
- Histologically or cytologically confirmed, locally advanced or metastatic solid malignancy and has exhausted all the available standard therapy or is not a candidate for the available standard therapy
- ECOG performance status 0-1
- Prior anti-PD-1, anti-PD-L1, anti-CTLA-4, OX-40, CD137 permissible
- Adequate hematological, hepatic and renal function

KEY EXCLUSION CRITERIA

- Active autoimmune disease requiring systemic therapy in the last 2 years prior to the first dose of COM701
- Symptomatic interstitial lung disease or inflammatory pneumonitis
- Untreated or symptomatic central nervous system metastases
- History of immune-related events that led to immunotherapy treatment discontinuation

ACCRUAL INFORMATION

- As of the date of this presentation the 5th dose level pt cohort has been filled
- No dose-limiting toxicities have been observed in the 5th dose level pt cohort and earlier dose level cohorts¹
- Clinical and laboratory assessment for safety and tolerability is ongoing for the 5th and earlier pt dosing cohorts

ACKNOWLEDGMENT

- We thank the patients for participating in this clinical trial and their families
- The investigators and clinical trial sites
- Study NCT03667716 is in collaboration with Bristol-Myers Squibb

PRIMARY OUTCOME MEASURES

- To evaluate the safety profile of COM701 as monotherapy and in combination with nivolumab in subjects with advanced solid tumors
- The incidence of adverse events and dose-limiting toxicities (21-day DLT window) graded as per CTCAE v4.03
- To identify the maximum tolerated dose and/or the recommended dose for expansion
- To characterize the PK profile of COM701 as monotherapy and in combination with nivolumab

SECONDARY OUTCOME MEASURES

- To characterize the immunogenicity of COM701 alone and in combination with nivolumab
- To evaluate preliminary antitumor activity of COM701 in combination with nivolumab (Phase 1b only) responses as per RECIST v1.1

REFERENCE

1. Drew W. Rasco, Kyriakos P. Papadopoulos, Adeboye H. Adewoye, John Hunter, Denise Ramsey, Adam ElNaggar, Amita Patnaik, Daniel A. Vaena. J Clin Oncol 37, 2019 (suppl 8; abstr TPS40). ASCO-SITC 2019.