



BIOMICA

Microbiome-Empowered Therapeutics

April 2021

Forward Looking Statement

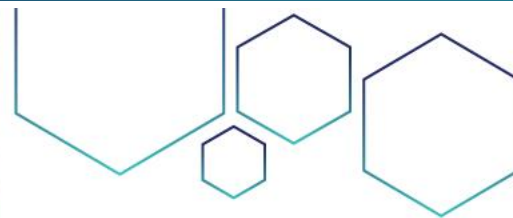
This presentation contains "forward-looking statements" relating to future events, and Biomica Ltd (the "Company") and its parent, Evogene Ltd. ("Evogene"), may from time to time make other statements, regarding our outlook or expectations for future financial or operating results and/or other matters regarding or affecting us that are considered "forward-looking statements" as defined in the U.S. Private Securities Litigation Reform Act of 1995 (the "PSLRA") and other securities laws. Such forward-looking statements may be identified by the use of such words as "believe", "expect", "anticipate", "should", "planned", "estimated", "intend" and "potential" or words of similar meaning. We are using forward-looking statements in this presentation when we discuss our value drivers, commercialization efforts and timing, product development and launches, estimated market sizes and milestones, as well as the capabilities of Evogene's and our technology.

Such statements are based on current expectations, estimates, projections and assumptions, describe opinions about future events, involve certain risks and uncertainties which are difficult to predict and are not guarantees of future performance. Therefore, actual future results, performance or achievements, and trends in the future may differ materially from what is expressed or implied by such forward-looking statements due to a variety of factors, many of which are beyond our control, including, without limitation, those described in greater detail in Evogene's Annual Report on Form 20-F and in other information Evogene files and furnishes with the Israel Securities Authority and the U.S. Securities and Exchange Commission, including those factors under the heading "Risk Factors".

Except as required by applicable securities laws, we disclaim any obligation or commitment to update any information contained in this presentation or to publicly release the results of any revisions to any statements that may be made to reflect future events or developments or changes in expectations, estimates, projections and assumptions.

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HIGHLIGHTS

Mission

Developing innovative microbiome-based therapeutics

Emerging biopharmaceutical company

Focus

Treatment of immune-mediated and infectious diseases:

- Immuno-Oncology
- Gastrointestinal (GI) related disorders
- Antimicrobial resistance (AMR)

Pipeline

Enabled by a unique computational predictive biology platform (combining 'Big-Data' & Artificial Intelligence technologies)

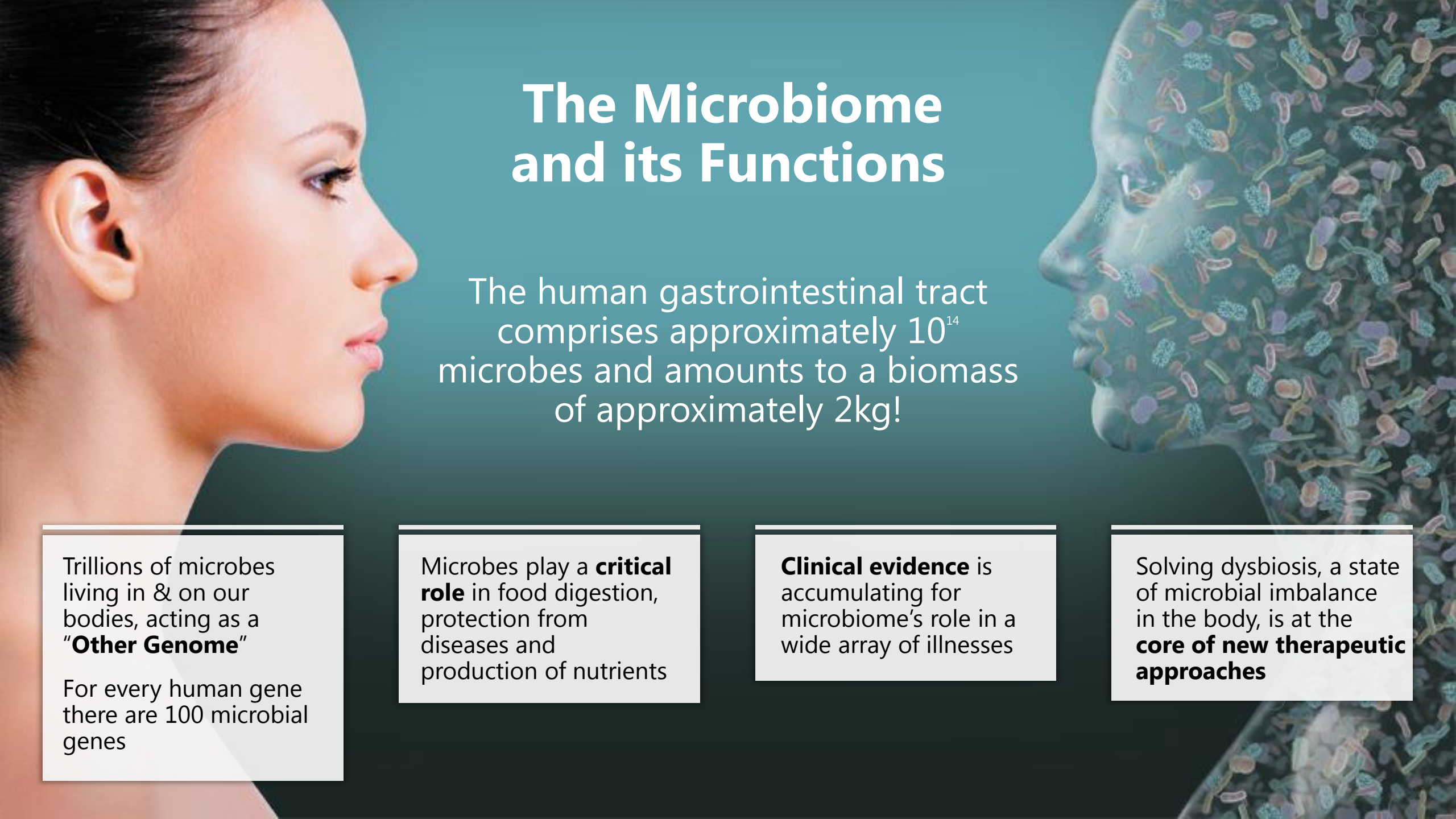
Founded Israel, 2017



Subsidiary of Evogene Ltd.
(NASDAQ, TASE: EVGN)

A pioneer in the field of
applied computational
predictive biology

Holds Approx. 90%



The Microbiome and its Functions

The human gastrointestinal tract comprises approximately 10^{14} microbes and amounts to a biomass of approximately 2kg!

Trillions of microbes living in & on our bodies, acting as a "**Other Genome**"

For every human gene there are 100 microbial genes

Microbes play a **critical role** in food digestion, protection from diseases and production of nutrients

Clinical evidence is accumulating for microbiome's role in a wide array of illnesses

Solving dysbiosis, a state of microbial imbalance in the body, is at the **core of new therapeutic approaches**

Market Landscape

↑ Rapid growing industry

2024

70%
CAGR

Multi \$Bn
market opportunity

> \$4Bn
invested in microbiome
companies since 2014

2018

A record
in Microbiome investment levels are
set in 2017 & 2018, and growing

Key Drivers

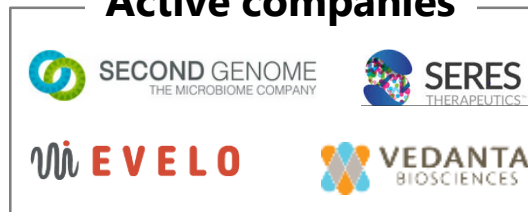
Big Pharma



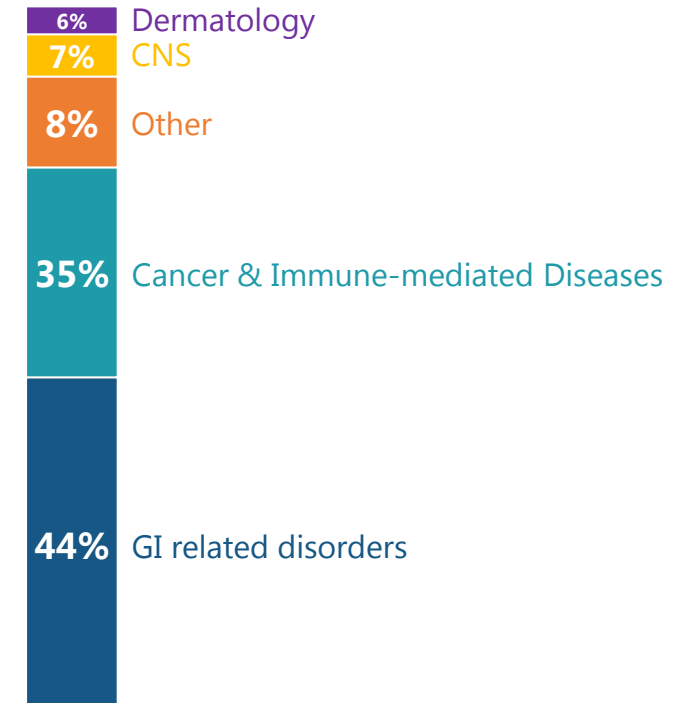
Prominent VCs



Active companies



Current areas of focus



Most candidates are still in the
discovery & preclinical stages;
few are in clinical stage (Ph. II/III)

Sources:
BCC Research (2017) – Human Microbiome-based Drugs and Diagnostics Market SVB – Emerging Healthcare: Microbiome Investment Trends Aug 2017)
<https://www.microbiometimes.com/the-microbiome-biotech-landscape-an-analysis-of-the-pharmaceutical-pipeline/>

Biomica's Mission and Focus



Discovery and development of novel therapies
for microbiome-related human disorders using
computational predictive biology

The Challenge

Microbiome space is Big-Data driven

Multi-OMICS big-data & clinical meta-data needed for addressing specific biological questions

How to cope with enormous amount of information?

⋮
The common practice:
The biological (trial and error) approach

⋮
It has 2 disadvantages:

A needle in a haystack...



Guessing the lottery numbers

The Competitive Edge

Our computational technologies enable data integration, analysis & prediction

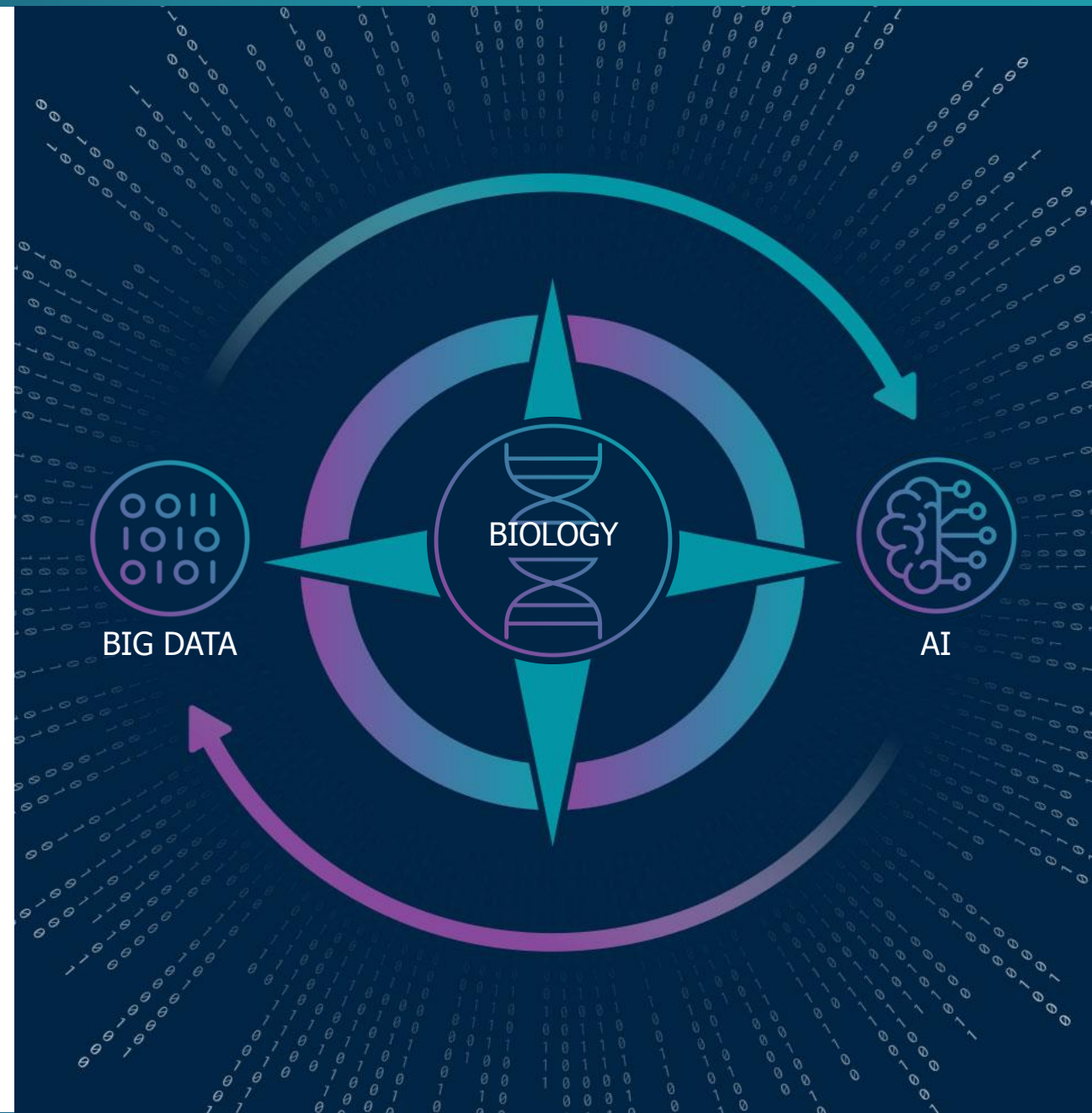
CPB[★] platform

Databases generated via data integration capabilities

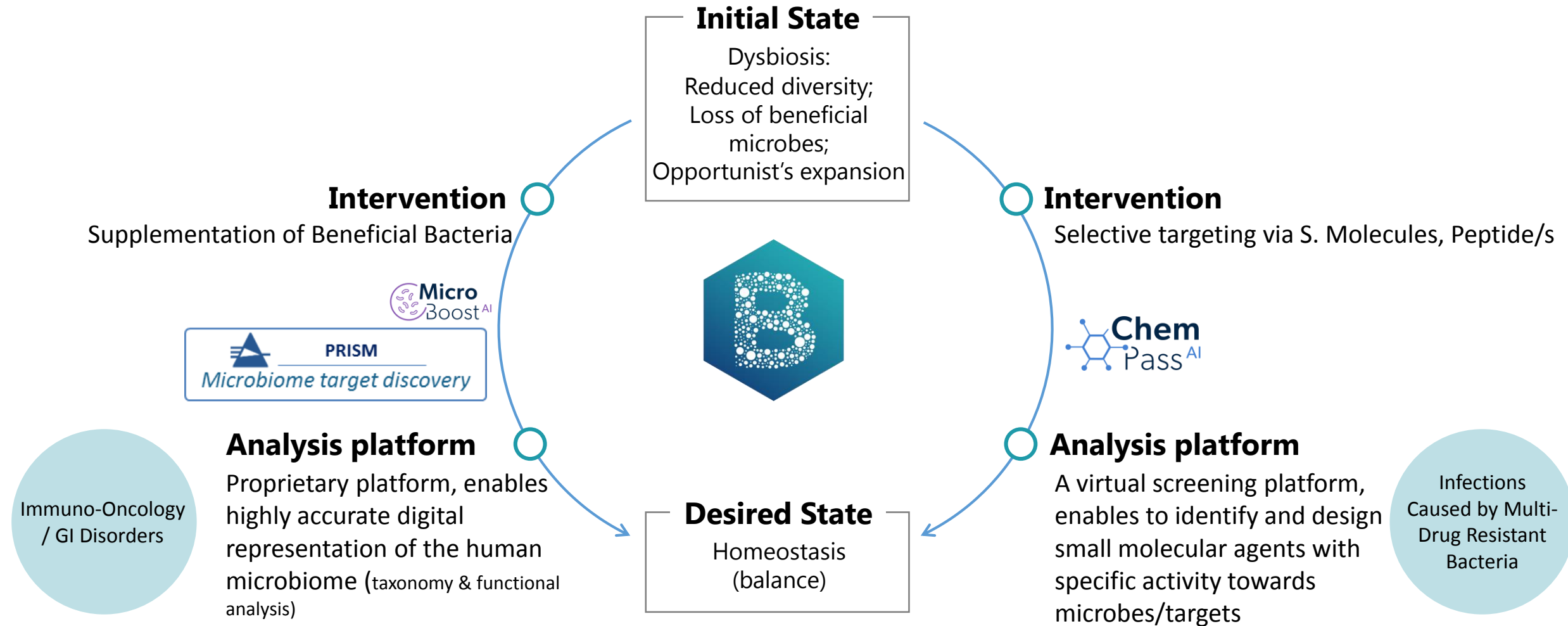


Proprietary computational algorithms (AI) utilized to mine data

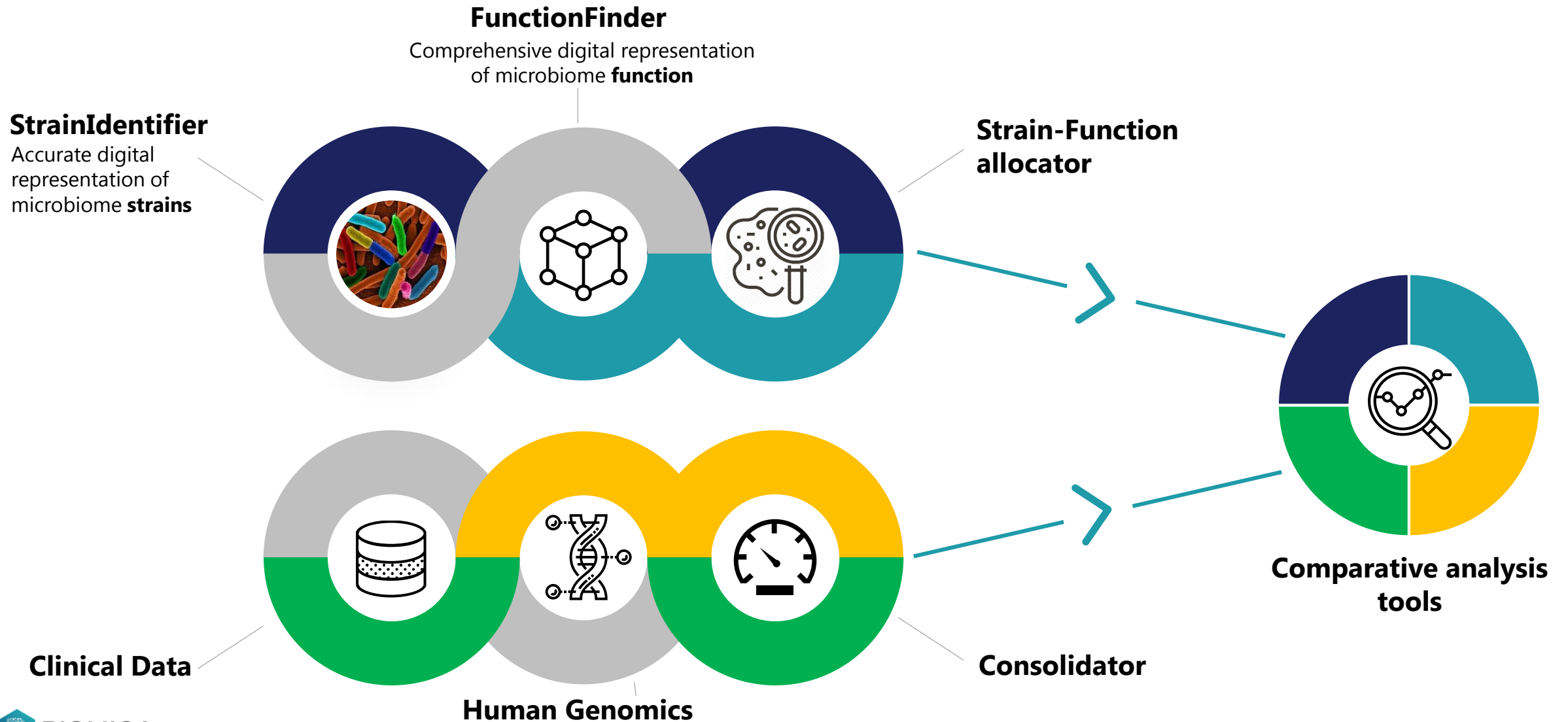
Developed over two decades at an investment of tens of millions of dollars and validated through collaborations with industrial leaders & internal results



Scientific Approach



PRISM - Platform Capabilities



Biomica's Edge

Our computational platform is capable of **unprecedented high-resolution** microbiome analysis

Pioneers in the field of **functional microbiome analysis**, leading innovative technology

Minimum Microbial Strains

Maximum Relevant Functions

Maximal Therapeutic Impact

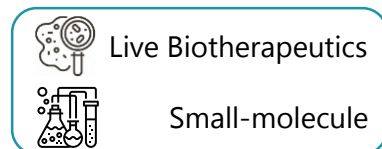
Advantages of our approach Vs. others in the field:

- Fecal Microbiota Transplant (FMT): Collection of 10,000s entities, no QC
- Single-strain method: We bring higher efficiency due to multiple MoAs
- Other multi-strain rationally-designed LBPs: We optimize a consortium for better efficacy with less adverse effects (due to fewer & carefully selected entities)

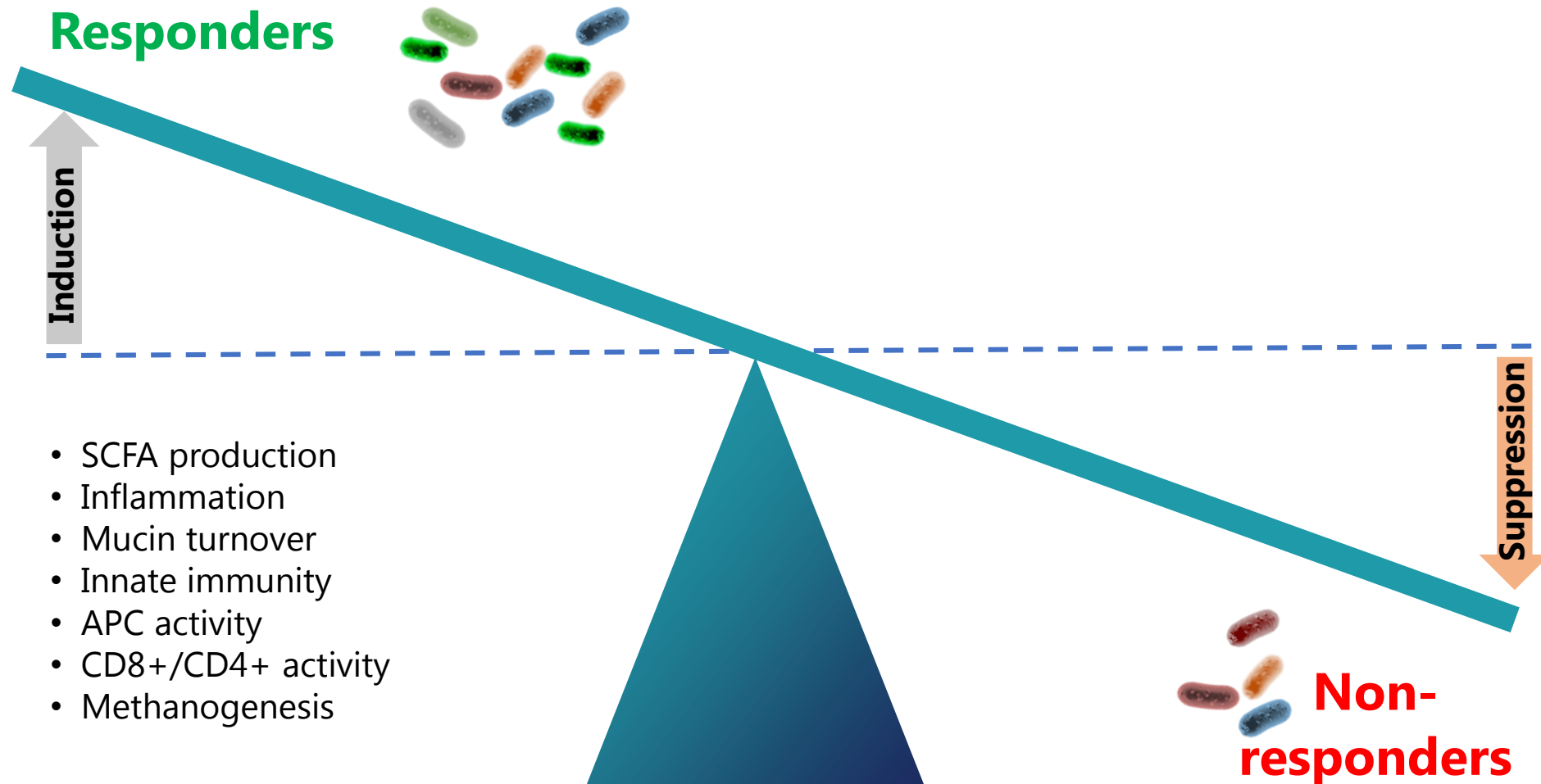
Biomica's Discovery Pipeline

	Program	Indication / Target	Discovery	Preclinical	Phase 1	Phase 2	Approach
Immuno-oncology (with ICI*)	BMC121	Combination Therapy for NSCLC**					
	BMC127	Combination Therapy for NSCLC					
	BMC128	Combination Therapy for NSCLC					
GI related disorders	BMC321	IBD					
	BMC322	IBD					
	BMC426	IBS					
Antimicrobial resistance (AMR***)	BMC202	C. difficile toxin-B					

In the AMR Program, Biomica has a collaboration with Nobel Prize Laureate Prof. Ada Yonath at Weizmann Institute of Science to develop a selective treatment for MRSA



Response to Immunotherapy is Modulated Through Specific Bacterial Functions



Fecal Microbiota Transplantation (FMT) and re-Induction of anti-PD-1 Therapy in Refractory Patients - POC

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Science

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Clinical studies are testing whether cancer immunotherapy drugs work better when patients receive a fecal transplant. JEFF MCINTOSH/THE CANADIAN PRESS/AP PHOTO

Fecal transplants could help patients on cancer immunotherapy drugs

By Jocelyn Kaiser | Apr. 5, 2019, 1:45 PM

“...Now, another potential therapy is being tested in clinical studies: fecal transplants. Early results from two groups described at the annual meeting of the American Association for Cancer Research (AACR) here this week suggest some patients who initially did not benefit from immunotherapy drugs saw their tumors stop growing or even shrink after receiving a stool sample from patients for whom the drugs worked...”

“...One unresolved question is exactly which microbes help ramp up the desired immune activity...”

Modulating gut microbiota to treat cancer

Science

REPORTS

Cite as: E. N. Baruch *et al.*, *Science* 10.1126/science.abb5920 (2020).

Fecal microbiota transplant promotes response in immunotherapy-refractory melanoma patients

Erez N. Baruch^{1,2,*†}, Ilan Youngster^{3,4}, Guy Ben-Betzalel¹, Rona Ortenberg¹, Adi Lahat⁵, Lior Katz⁶, Katerina Adler⁷, Daniela Dick-Necula⁸, Stephen Raskin^{4,9}, Naamah Bloch¹⁰, Daniil Rotin⁸, Liat Anafi⁸, Camila Avivi⁸, Jenny Melnichenko¹, Yael Steinberg-Silman¹, Ronac Mamtani¹¹, Hagit Harati¹, Nethanel Asher¹, Ronnie Shapira-Frommer¹, Tal Brosh-Nissimov¹², Yael Eshet^{4,8,13}, Shira Ben-Simon¹⁰, Oren Ziv¹⁰, Md Abdul Wadud Khan¹⁴, Moran Amit¹⁵, Nadim J. Ajami¹⁴, Iris Barshack^{4,8}, Jacob Schachter^{1,4}, Jennifer A. Wargo^{14,16}, Omry Koren¹⁰, Gal Markel^{1,2,17,*†}, Ben Boursi^{4,18,19,†}

CLINICAL TRIALS

Fecal microbiota transplant overcomes resistance to anti-PD-1 therapy in melanoma patients

Diwakar Davar^{1*}, Amiran K. Dzutsev^{2*}, John A. McCulloch², Richard R. Rodrigues^{2,3}, Joe-Marc Chauvin¹, Robert M. Morrison¹, Richelle N. Deblasio¹, Carmine Menna¹, Quanquan Ding¹, Ornella Pagliano¹, Bochra Zidi¹, Shuowen Zhang^{1†}, Jonathan H. Badger², Marie Vetizou², Alicia M. Cole², Miriam R. Fernandes², Stephanie Prescott², Raquel G. F. Costa², Ascharya K. Balaji², Andrey Morgun⁴, Ivan Vujkovic-Cvijin⁵, Hong Wang⁶, Amir A. Borhani⁷, Marc B. Schwartz⁸, Howard M. Dubner⁸, Scarlett J. Ernst¹, Amy Rose¹, Yana G. Najjar¹, Yasmine Belkaid⁵, John M. Kirkwood¹, Giorgio Trinchieri^{2†§}, Hassane M. Zarour^{1,9†§}

Anti-programmed cell death protein 1 (PD-1) therapy provides long-term clinical benefits to patients with advanced melanoma. The composition of the gut microbiota correlates with anti-PD-1 efficacy in preclinical models and cancer patients. To investigate whether resistance to anti-PD-1 can be overcome by changing the gut microbiota, this clinical trial evaluated the safety and efficacy of responder-derived fecal microbiota transplantation (FMT) together with anti-PD-1 in patients with PD-1-refractory melanoma. This combination was well tolerated, provided clinical benefit in 6 of 15 patients, and induced rapid and durable microbiota perturbation. Responders exhibited increased abundance of taxa that were previously shown to be associated with response to anti-PD-1, increased CD8⁺ T cell activation, and decreased frequency of interleukin-8-expressing myeloid cells. Responders had distinct proteomic and metabolomic signatures, and transkingdom network analyses confirmed that the gut microbiome regulated these changes. Collectively, our findings show that FMT and anti-PD-1 changed the gut microbiome and reprogrammed the tumor microenvironment to overcome resistance to anti-PD-1 in a subset of PD-1 advanced melanoma.

Davar *et al.*, *Science* **371**, 595–602 (2021) 5 February 2021

1 | Cancer Immunotherapy - Combination Therapy

Initial Focus on Lung Cancer (NSCLC)

- Non-small cell lung cancer (NSCLC) is the leading cause of cancer-related mortality worldwide
- Current solutions reach only an average of **17%-20%*** overall response rate



Biomica aims to improve clinical response of ICI through immunomodulating combination therapy

BMC121 & BMC127

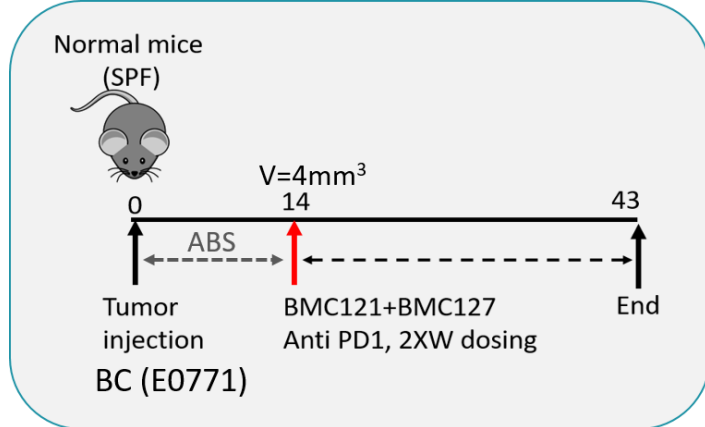
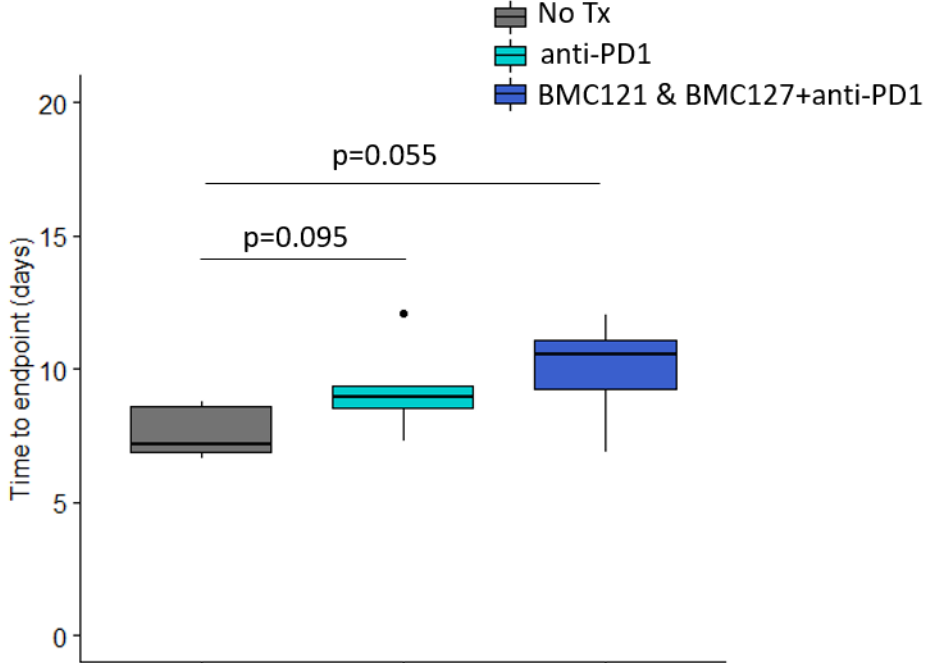
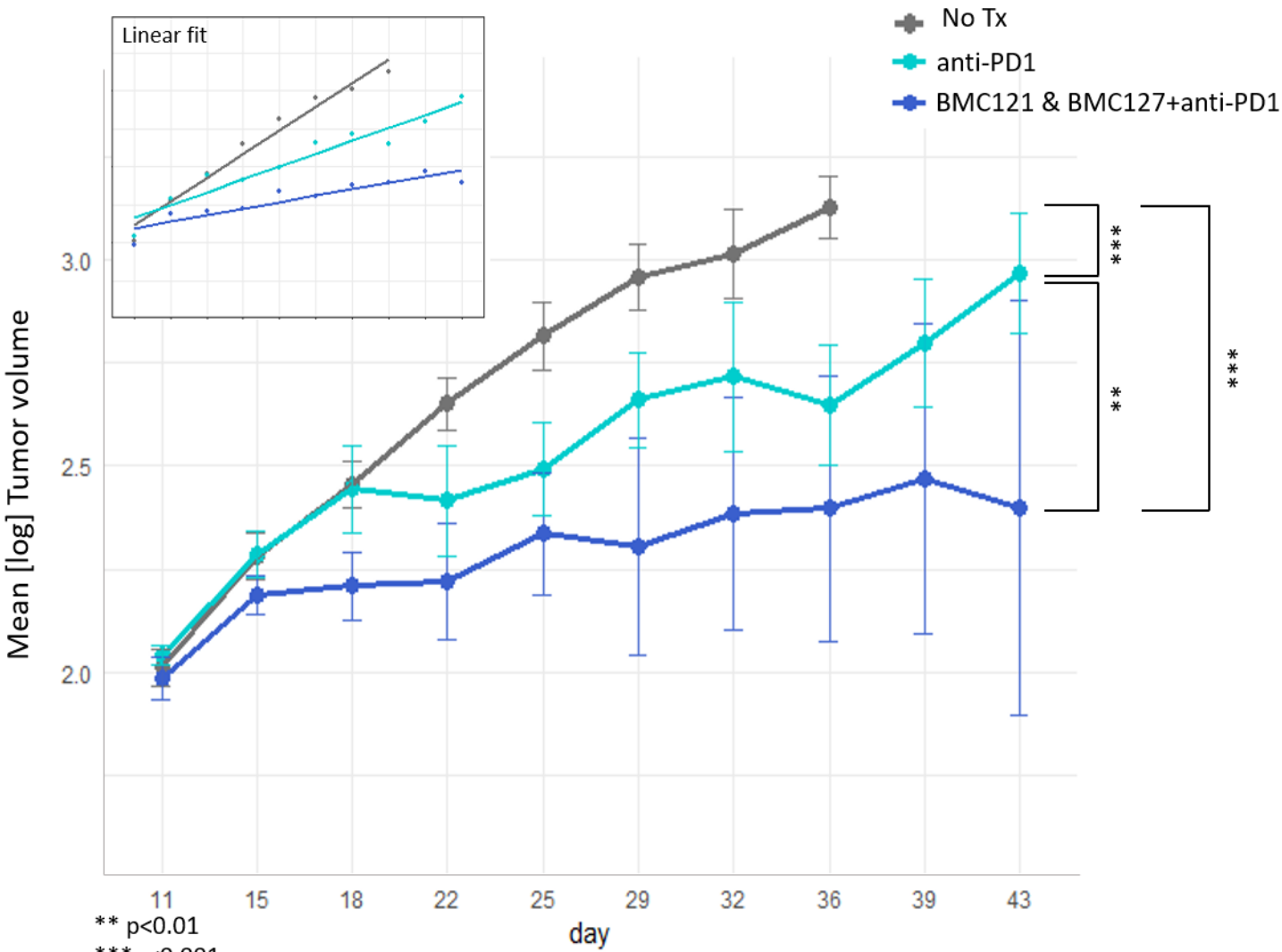
Rationally designed consortia aimed to facilitate anti-tumor activity in combination with ICI

- Orally administered capsule, comprised of 4 bacterial strains each, detected through Biomica's proprietary computational functional genomic analysis platform
- Strains were selected based on specific functional capabilities and their immuno-stimulatory potential
- The combination of 4 different microbial strains in a consortium is aimed to achieve effective immune activation through several underlying and complementary mechanisms

Consortium	Microorganism	Microbial component / function					Host response					Interactions with other microorganisms		
		Cell envelope component	SCFA production	Lactate production	Flagella	Mucin degradation	Dendritic cell activation and Th1 response	CD4/8 activation	NF-κB activation	TLR activation	TNFα	Gut health	Consortium members	General gut residents
BMC121	BMCS111	Green	Green	Green	Orange	Green	Light blue	Green	Green	Green	Green	Green	Green	Green
	BMCS114	Orange	Green	Orange	Green	Green	Light blue	Green	Green	Green	Light blue	Green	Light blue	Green
	BMCS115	Green	Green	Orange	Orange	Green	Light blue	Green	Green	Green	Light blue	Green	Green	Light blue
	BMCS117	Green	Orange	Orange	Orange	Orange	Green	Light blue	Green	Green	Green	Light blue	Light blue	Light blue

BMC121 & BMC127 potentiate the effect of anti-PD1 therapy *in vivo*

Mean Tumor Volume and Time To Endpoint significantly improved



Optimizing our IO consortia: BMC128

Consortium	Microorganism	Microbial component / function					Host response					Interactions with other microorganisms		
		Cell envelope component	SCFA production	Lactate production	Flagella	Mucin degradation	Dendritic cell activation and Th1 response	CD4/8 activation	NF-κB activation	TLR activation	TNFα	Gut health	Consortium members	General gut residents
BMC121	BMCS111													
	BMCS114													
	BMCS115													
	BMCS117													

Consortium	Microorganism	Microbial component / function					Host response					Interactions with other microorganisms	
		Cell envelope component	SCFA production	Lactate production	Polysaccharides degradation	Mucin degradation	Dendritic cell activation and Th1 response	CD4/8 activation	NF-κB activation	TLR activation	Gut health	Consortium members	General gut residents
BMC127	BMCS119												
	BMCS113												
	BMCS116												
	BMCS1111												

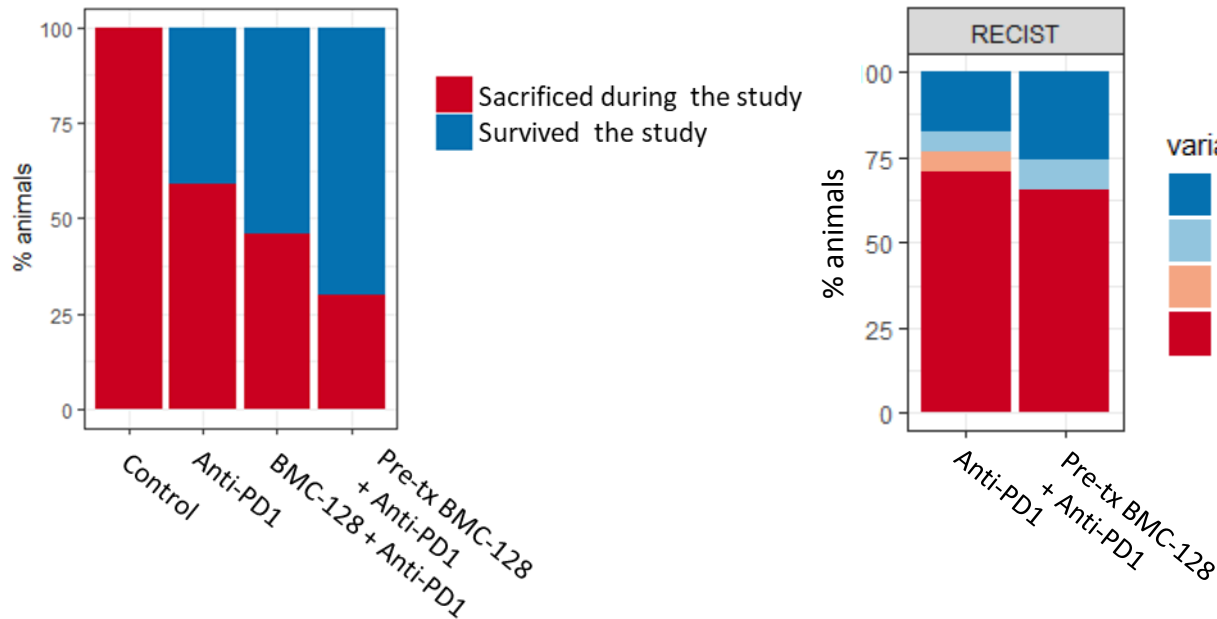
A new combination providing all microbial functions & presenting higher likelihood for survival in GI.



BMC128



BMC128 administered prior to and in combination with anti-PD1 significantly improved anti-tumor activity



Biomica Announces Positive Pre-Clinical Results in its Immuno-Oncology Program

Biomica's, a subsidiary of Evogene Ltd., live biotherapeutic drug candidate BMC128 administered in combination with Immune Checkpoint Inhibitors (ICI) significantly improved anti-tumor activity. Proof-of-concept first-in-man studies expected next year

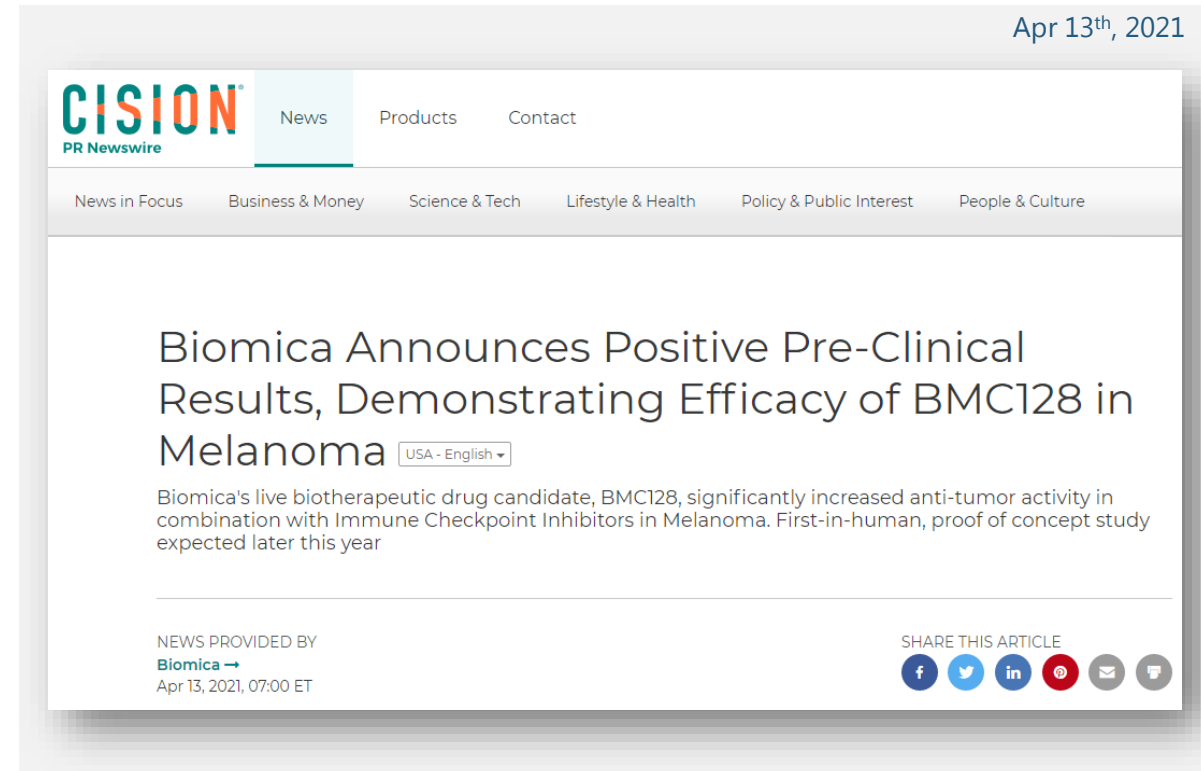
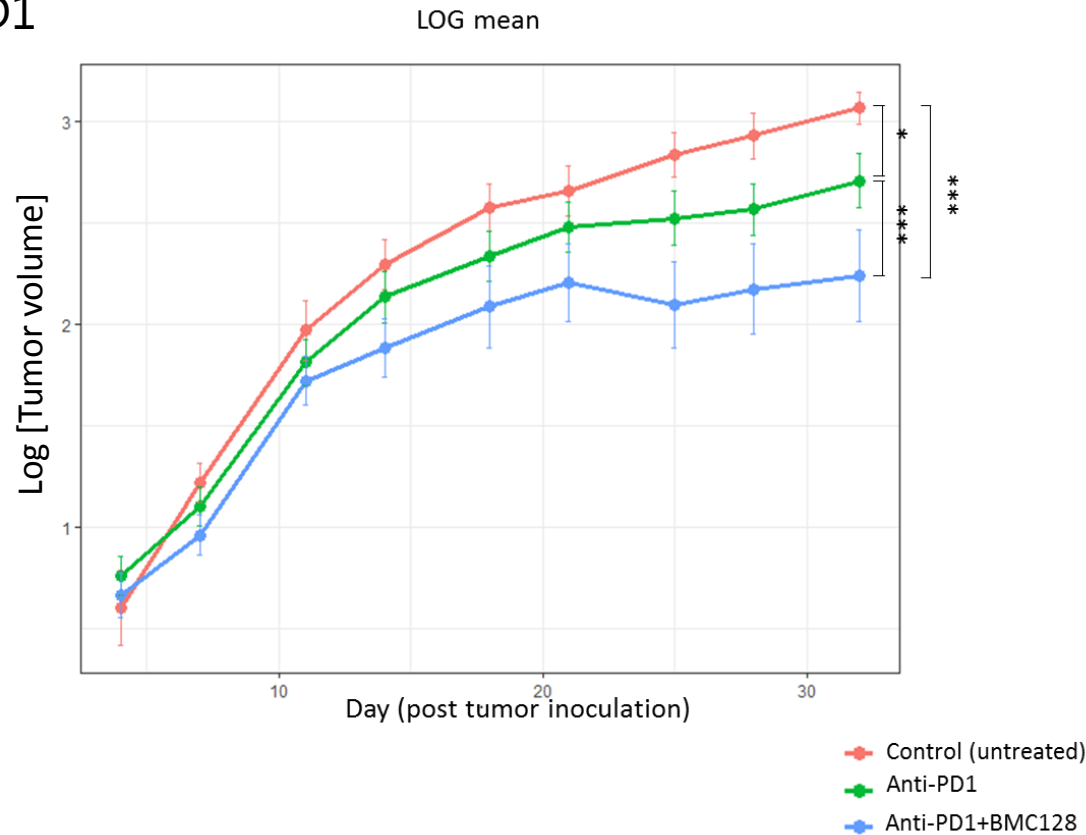
Rehovot, Israel – September 8, 2020 – Biomica Ltd., an emerging biopharmaceutical company developing innovative microbiome-based therapeutics, and a subsidiary of Evogene Ltd. (NASDAQ: EVGN, TASE: EVGN), today announced positive pre-clinical in-vivo results in its immuno-oncology program for a follow-on combination of bacterial strains. In these studies, Biomica tested BMC128, which consists of four live bacterial strains derived from Biomica's drug candidates BMC121 and BMC127. Treatment with BMC128, both prior to and in combination with ICI, significantly improved anti-tumor activity in mice.

ORR (CR+PR):
23.5% vs 34.8%
48% increase in responders

The study indicates that pre-treatment with BMC128 conditions the immune system and primes it for an efficient anti-tumor response

BMC128 Demonstrating Efficacy of in Melanoma

BMC128 significantly enhanced anti-tumor activity, resulting in an increased response of melanoma tumors to anti-PD1



These results demonstrate the potential applicability of BMC128 and its relevance to **treating multiple types of solid tumors**

First-in-human, proof of concept study expected to initiate later this year

- BMC128 consists of **4 live bacterial strains**
- Results demonstrated a significant **reduction of tumor volume**, and **increased animal survival** compared to anti-PD1 therapy alone
- **MOA is immune mediated**- increased tumor inflammation & infiltration of T lymphocytes and NK cells
- Potential applicability in the treatment **various types of solid tumors**

The screenshot shows a news article on the Cision PR Newswire website. The article is dated October 13th, 2020, and is categorized under 'News'. The headline reads: 'Biomica Announces Initiation of Large-Scale Production of Live Bacterial Product (LBP) Candidate Consortium in its Immuno-Oncology Program'. Below the headline, a sub-headline states: 'The company is advancing to scale-up and GMP batch production, to support anticipated first-in-man proof-of-concept clinical trials next year'. The article is provided by Biomica, dated October 13, 2020, 07:00 ET. There are social media sharing icons for Facebook, Twitter, LinkedIn, and Email at the bottom right.

CISION[®] PR Newswire

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Oct 13th, 2020

News in Focus Business & Money Science & Tech Lifestyle & Health Policy & Public Interest People & Culture

Biomica Announces Initiation of Large-Scale Production of Live Bacterial Product (LBP) Candidate Consortium in its Immuno-Oncology Program

English ▾

The company is advancing to scale-up and GMP batch production, to support anticipated first-in-man proof-of-concept clinical trials next year

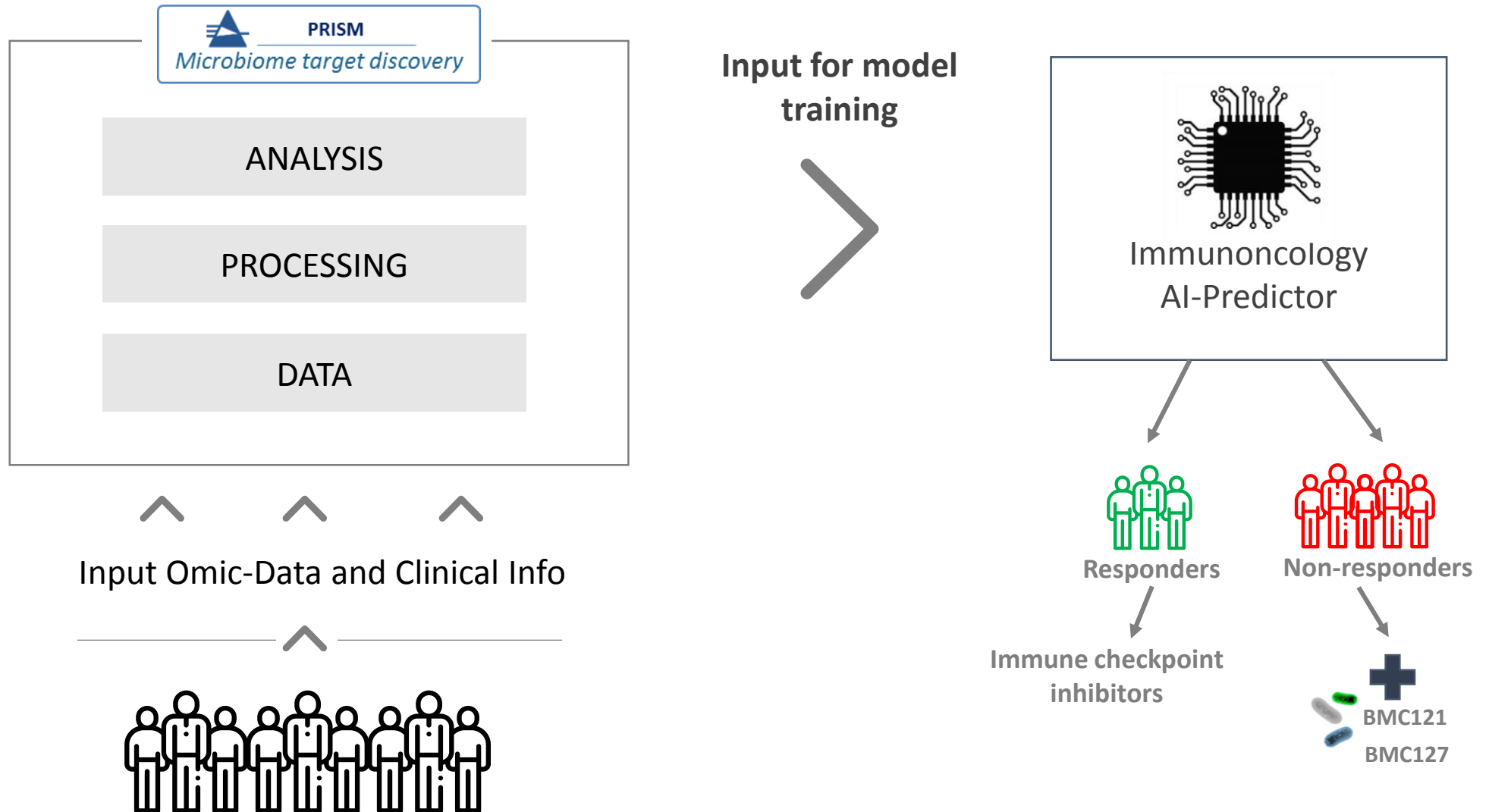
NEWS PROVIDED BY
Biomica →
Oct 13, 2020, 07:00 ET

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f t in e

Predictor of Patients' Response to ICI

Utilizing AI and PRISM-generated high-res microbiome profiles



2 | GI Related Disorders

IBS & IBD

Irritable Bowel Syndrome (IBS)*

A common intestinal functional disorder, group of symptoms:

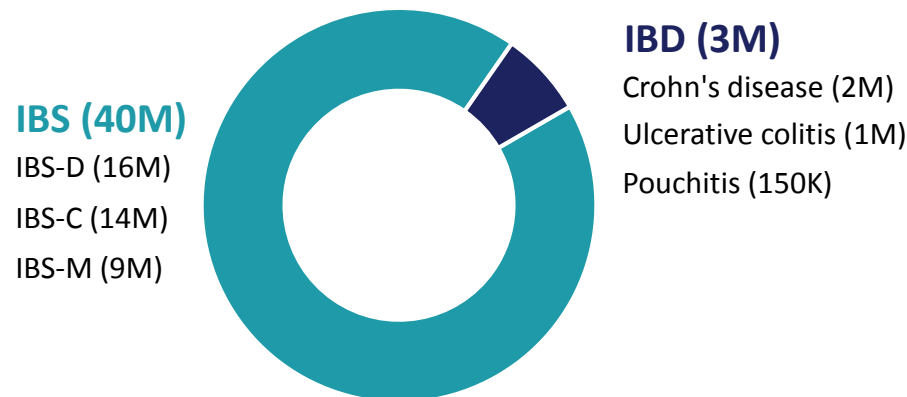
- Abdominal Pain
- Constipation or Diarrhea
- Bloating, Gas & Diarrhea

In collaboration with The University of North Carolina (UNC) at Chapel Hill

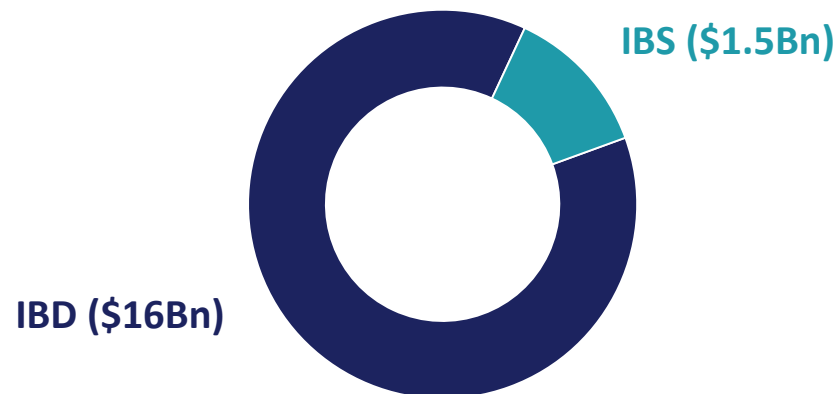
Inflammatory Bowel Disease (IBD)**

A group of inflammatory conditions of the colon and small intestine (Crohn's disease, Ulcerative colitis & Pouchitis)

Approximate number of patients: 43M



Approximate market size (USD)

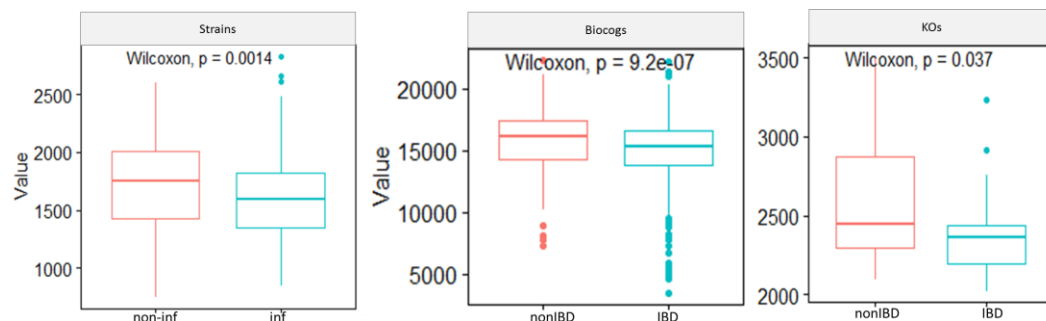


Both clearly related to the microbiome

Biomica pushes the barriers posed by existing therapies by addressing the underlying cause of the disorder, rather than the symptoms

Established Role for Microbiome in IBD Etiology

A state of inflammation is associated with reduced richness of microbial taxa and functions



Roles for Intestinal Bacteria, Viruses, and Fungi in Pathogenesis of Inflammatory Bowel Diseases and Therapeutic Approaches

R. Balfour Sartor^{1,*} and Gary D. Wu^{2,*}

¹Departments of Medicine, Microbiology & Immunology, University of North Carolina at Chapel Hill, Chapel Hill, NC 27599

²Division of Gastroenterology, Perelman School of Medicine, the University of Pennsylvania, Philadelphia, PA 19104

Gastroenterology. 2017 February

Therapeutic Manipulation of the Microbiome in IBD: Current Results and Future Approaches

Jonathan J. Hansen, M.D., Ph.D.¹ and R. Balfour Sartor, M.D.²

Jonathan J. Hansen: jjhansen@med.unc.edu; R. Balfour Sartor: rbs@med.unc.edu

Curr Treat Options Gastroenterol. 2015 March

BMC321 & BMC322

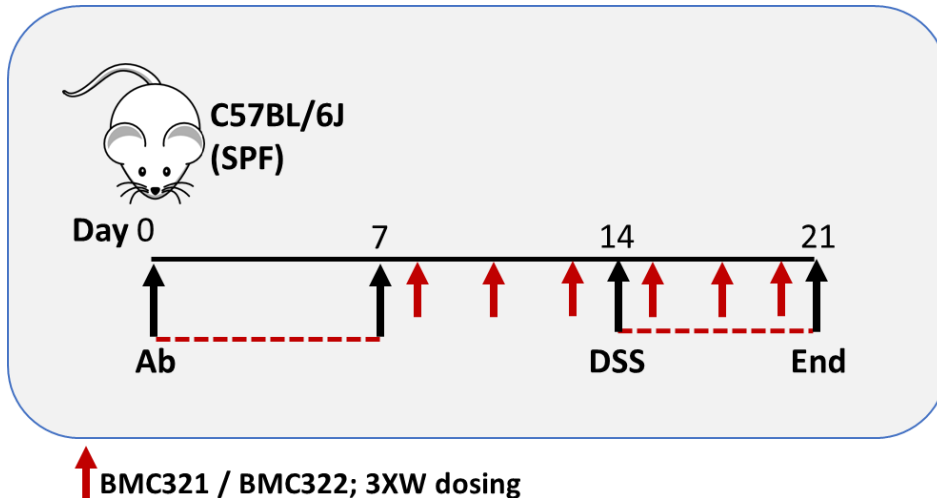
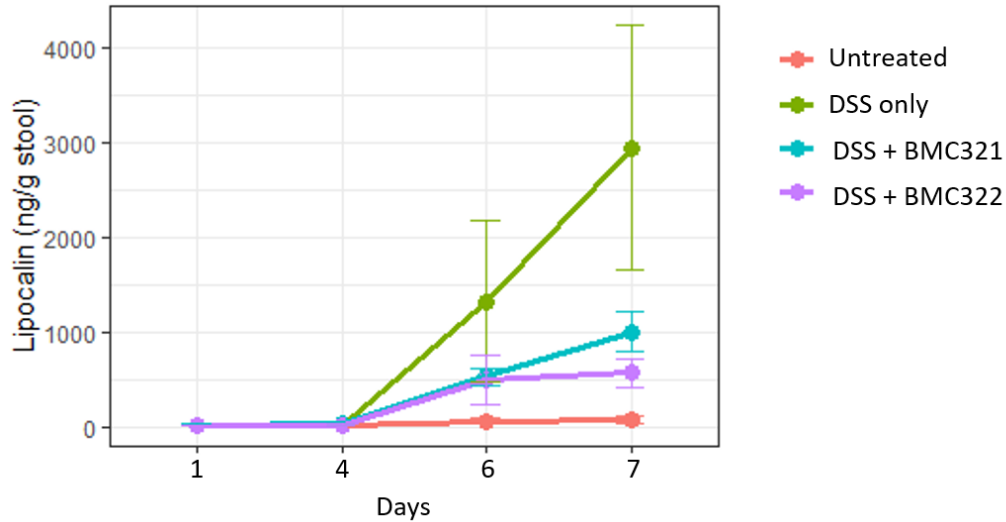
Rationally designed consortia aimed to reduce inflammation for the treatment of IBD

- Orally administered capsule, comprised of 4 bacterial strains each, detected through Biomica's proprietary computational functional genomic analysis platform
- Strains were selected based on their anti-inflammatory functions targeting both immunocytes and intestinal mucosal cells
- The combination of 4 different microbial strains in a consortium is aimed to effectively attenuate inflammation through several complementary mechanisms
- Support growth and metabolism of other consortium members and the growth of additional favorable gut resident bacteria

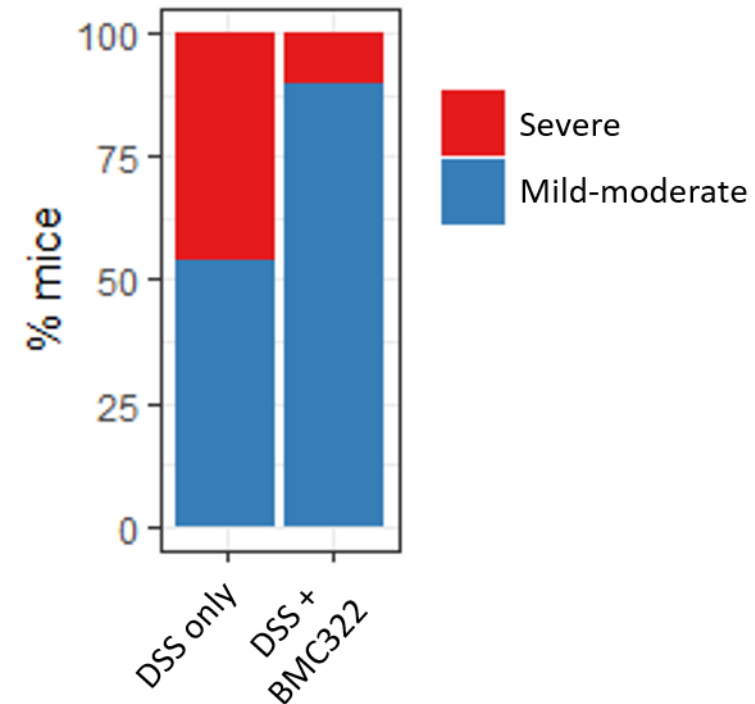
Consortium	Microorganism	Microbial component / function						Host response							Interactions with other microorganism		
		SCFA	Function 61458	Function 314622	Function 314623	Function 32072	Function 2456	Tregs↑	mechanism1	mechanism2	mechanism3	mechanism4	mechanism5	mechanism6	mechanism7	with other members in consortium	with other gut residents
BMC321	BMCS311																
	BMCS315																
	BMCS313																
	BMCS318																

BMC321 & BMC322 indicate to reduce inflammation in a DSS-treated mouse model*

Gut Inflammation level, During DSS treatment

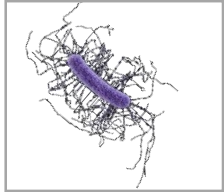


Inflammation status
Day 7 of DSS treatment



Severe inflammation (% of total number of mice):
Control - 43% VS. BMC322- 10%

3 | C. difficile Infection (CDI) - Landscape



Gram-positive, anaerobic, spore-forming, toxin-producing bacillus



Most common hospital-acquired infections (Over 600,000 a year)



Increasing cause of morbidity and mortality (older hospitalized patients)



Incidence & associated mortality progressively increasing in W. countries



15%–25% of all cases of antibiotic-associated diarrhea result from CDI

- **Pathogenicity of C. difficile is mainly mediated by two exotoxins**
- Infection manifestations:
 - Diarrhea
 - Abdominal cramping and pain
 - Fever
 - Nausea
- **The economic cost of CDI est. as \$5.4Bn mostly due to hospitalization**

BMC202

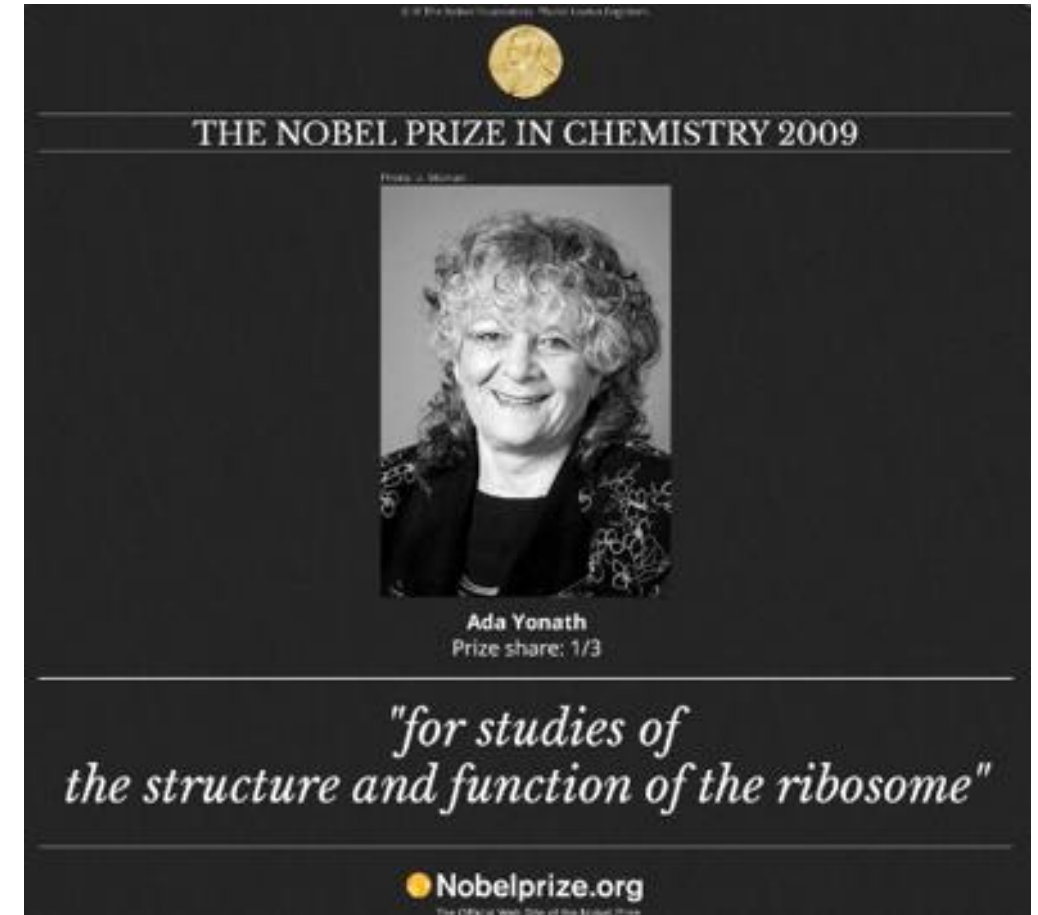
- Our approach is to utilize **BMC202** as a non-antibiotic inhibitor of C. difficile toxin, which is responsible for the symptoms associated with CDI, **while preserving healthy gut microbiome**
- BMC202 is a selective anti-bacterial agent designed to inhibit the glucosyl-transferase domain of the C. difficile toxin (TcdB)
- The drug candidate has been identified using Biomica's in silico chemical screening platform, which enables high throughput screening of a database of **~300M** molecules.

A collaboration between Biomica and the Weizmann Institute of Science

The company has in-licensed IP and knowhow generated by the Nobel Prize Laureate Prof. Ada Yonath, who supports Biomica's work on this program

Biomica develops a **selective** treatment against antibiotic resistant strains of Staphylococcus aureus (MRSA) infection, in a microbiome focused approach utilizing proprietary computational tools

- MRSA is a multi-drug resistant bacterium, responsible for several difficult-to-treat infections, leading to tens of thousands of annual cases of mortality in the US
- MRSA market in 2016 was approximately \$2.9Bn, projected to reach over \$3.9Bn by 2025*.



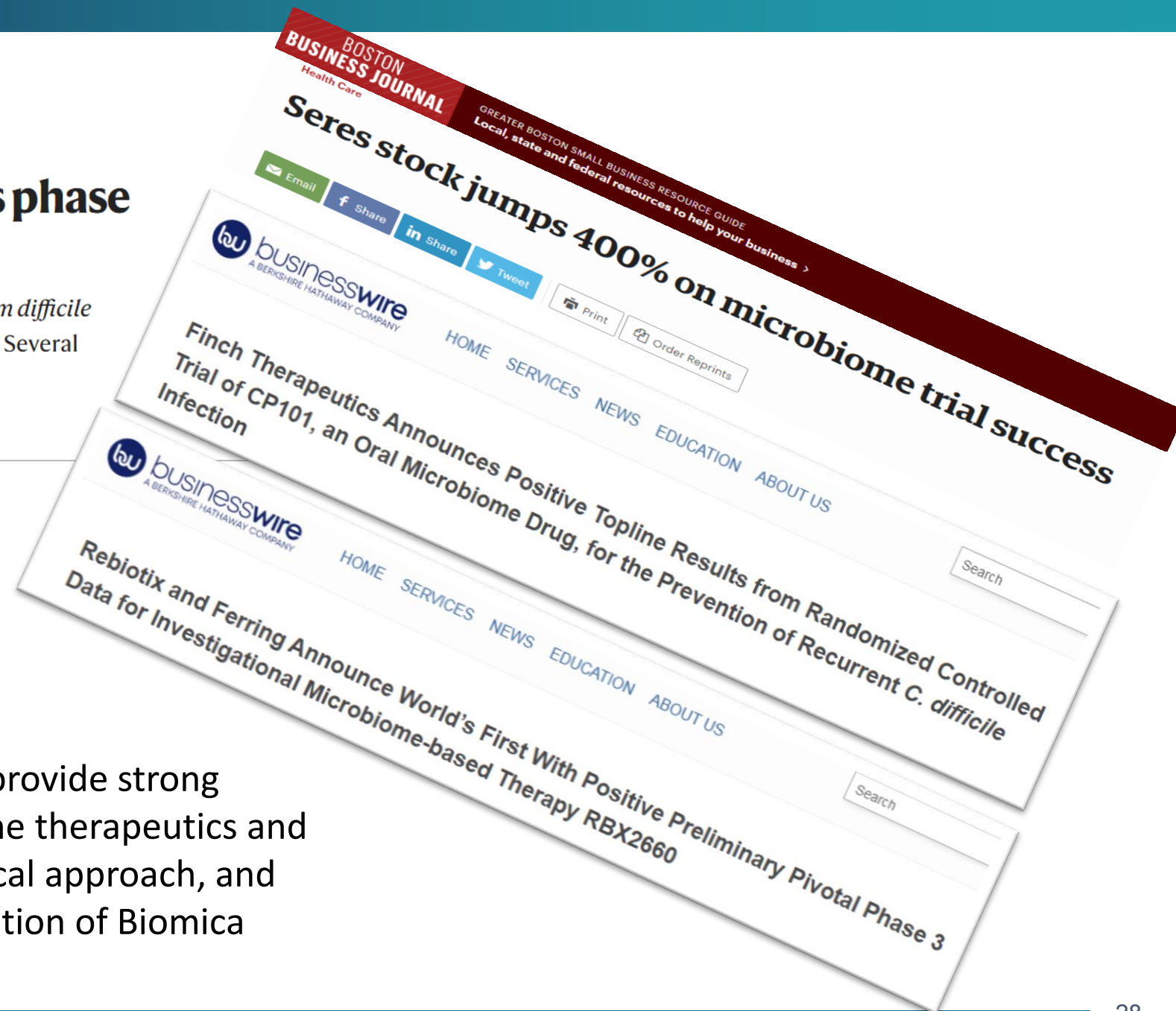
First microbiome-based drug clears phase III, in clinical trial turnaround

Seres Therapeutics' stool-derived treatment for recurrent *Clostridium difficile* infection could become the first FDA-approved microbiome therapy. Several other live biotherapeutic microbial products are close behind.

Ken Garber



The recent positive Phase 3 clinical data provide strong validation for the utilization of microbiome therapeutics and helps validate Biomica's science and clinical approach, and demonstrates the potential value proposition of Biomica



Management



Dr. Elran Haber, CEO

- Previously served as the CEO of Therapix Biosciences (Nasdaq, TASE: TRPX), leading the company to a successful IPO on Nasdaq, and advancing the company's programs to clinical stage
- Spent more than 10 years as Chairman and board member of several privately held, and publicly traded, companies
- Served in senior executive roles in various life science companies and a private investment firm
- Holds a PhD in Pharmaceutical Science and an MBA in Finance & Financial Engineering, both from The Hebrew University of Jerusalem, Israel



Prof. Yehuda Ringel, CSO

- Chief Division of Gastroenterology and Hepatology at Meir Medical Center, Israel
- Professor of Medicine at Chapel Hill, North Carolina and is affiliated with University of North Carolina Hospitals
- Has more than 30 years of diverse experiences, especially in Gastroenterology and translational research, and an expert on IBS and functional motility disorders
- Recipient of several prestigious awards
- MD from Technion Institute of Technology, Israel



Dr. Shiri Meshner, VP of R&D

- Previously served as the head & principal investigator of the Dead Sea microbiology lab in the Dead Sea-Arava Science Center
- Spent over 5 years working in the pharma industry both in the US and in Israel (OSI pharmaceuticals and Teva pharmaceuticals)
- Holds a PhD in systems microbiology from the Department of Physics of Complex Systems at The Weizmann Institute

Board of Directors



Mr. Ofer Haviv, Chairman

- Serves as Evogene's (Nasdaq: EVGN), President and CEO as of late 2004. Prior to that he held the positions of Evogene's COO and CFO and was involved in the spin-off from Compugen
- Served as a Director of Finance and Treasurer at Compugen (NASDAQ: CGEN), includes two private placements and an IPO on NASDAQ



Mr. Doron Ben Ami, Director

- A seasoned executive with more than 20 years of management experience in the multinational biotech industry
- Served as Head of the Eastern Europe and Israel region at Merck (MSD), Managing Director of MSD Israel and previously as the General Manager of Lundbeck in Israel



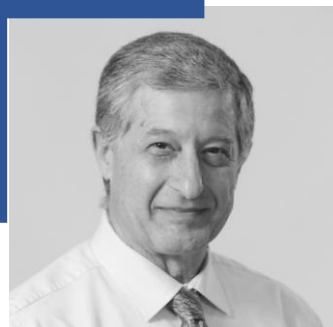
Dr. Kinneret Savitsky, Director

- A seasoned Biopharma executive
- Serves as the CEO of FutuRx Ltd., the Israeli Biotechnology accelerator established by OrbiMed, Johnson & Johnson Innovation, JJDC and Takeda Pharmaceutical
- Currently serves as a Chairperson and Board member at number of privately held healthcare/pharma companies
- Served as the CEO of BioLineRx Ltd. (Nasdaq: BLRX)

Prof. Yehuda Ringel, Director

Scientific Advisory Board & Advisors

Prof. Yehuda Ringel



Chief Division of Gastroenterology and Hepatology at Meir Medical Center, Israel. Professor of Medicine at Chapel Hill, North Carolina and is affiliated with University of North Carolina Hospitals.

Prof. Willem M De Vos



Professor and Chair of Microbiology at Wageningen University, the Netherlands and Professor of Human Microbiomics at the University of Helsinki, Finland.

Prof. R. Balfour Sartor



Serves as the Midget Distinguished Professor of Medicine, Microbiology and Immunology and Director of the Multidisciplinary IBD Center at the University of North Carolina, Chapel Hill.

Prof. James Versalovic



Pathologist-In-Chief at Texas Children's Hospital and Director of Texas Children's Microbiome Center, Professor and Vice Chair of Pathology & Immunology at Baylor College of Medicine.

Prof. David Rubin



Section chief of gastroenterology, hepatology, and nutrition at University of Chicago Medicine. Chair-elect of the National Scientific Advisory Committee of the Crohn's and Colitis Foundation.

Dr. Ravid Straussman

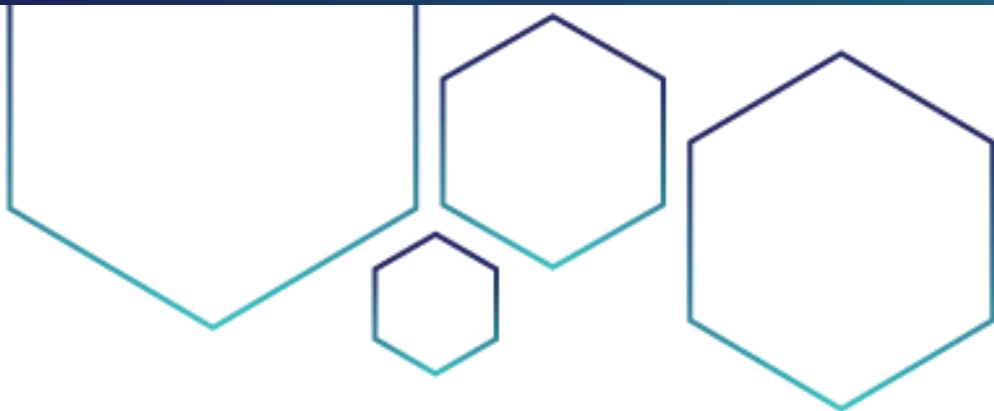


Principle investigator of the Tumor microenvironment, tumor microbiome and resistance to anti-cancer therapy lab at the Weizmann Institute of Science, Israel.



SUMMARY

- Human Microbiome based therapeutics is a rapidly growing space, represents a multi \$Bn market opportunity
- Biomica develops innovative microbiome-based therapeutics utilizing a dedicated computational predictive biology tools
- Biomica's computational tools have been specifically developed to allow the processing of large amounts of data to obtain high-resolution mapping of microbial profiles to deliver optimized drug candidates
- Focus on high-value clinical programs for the development of therapies for antibiotic resistant bacteria, Immuno-Oncology and microbiome-related gastrointestinal (GI) disorders.
- Experienced Management Team, Board of Directors and world class Scientific Advisory Board



BIOMICA

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