



The In Vivo Immune Cell Programming Company

Program any immune cell. Scale globally.

CREATE Medicines: A New Paradigm for Improving Patient Outcomes

Transforming immunotherapy through in vivo programming

Direct in Vivo Programming

of immune cells inside the patient eliminates complex ex vivo manufacturing and reduced time to treatment.

Multi-Cell Immune Engagement

activates and coordinates T cells, NK cells, and myeloid cells to generate a robust and durable anti-tumor response.

Improved Patient Outcomes

result from a scalable, repeatable, and accessible approach, expanding treatment availability, lowering costs, and delivering meaningful clinical benefit.

Broad Therapeutic Potential

derived from a versatile platform that can be applied across multiple tumor types and therapeutic areas, enhancing long-term growth and impact.

Proven Platform. Focused Pipeline. Clear Path to Value



Clinical Validation

- First therapy to reprogram immune cells inside the body using mRNA-LNPs
- **Tolerable repeat dosing** with proof of mechanism in multiple tumor types



Versatile Platform

- Can program T cells, NK cells, and myeloid cells with **one flexible system**
- **Selective receptors and targeted LNPs** tailored for in vivo therapies



Efficiency, Scale, Access

- Capital efficient product development: concept to clinic in **<12 months**
- Established GMP manufacturing (>3 yr stability) and regulatory precedent

Validated Mechanism, Safety, and Potency Driving Clinical Success

Lessons from the first in vivo CAR programming of myeloid cells

**40+ patients treated
across two trials**

**Proven mechanism and
safe dosing links to a high
probability of success**

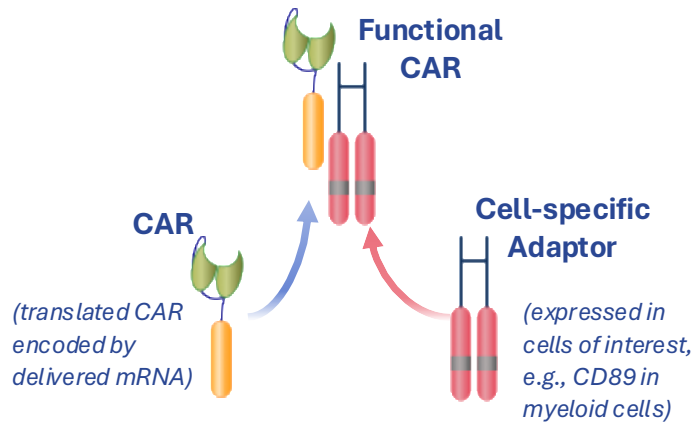
Proven Delivery, Biology, and Safety

Attribute	Proven in Patients
Tolerable safety and repeat IV dosing	✓
Uptake by multiple immune cells	✓
CAR expression	✓
Immune cell tumor infiltration	✓
Antigen presentation	✓
Cytokine and chemokine release	✓
Switch toward proinflammatory TME	✓
Evidence of clinical activity	✓

Proprietary RNA and LNP Toolbox for Precise, Cell-Selective In Vivo Programming

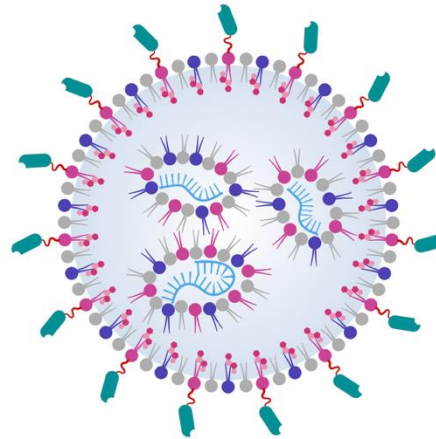
Each RNA cargo is designed to express only in its target immune cell, ensuring precision and safety.

Modular CARs Designed for Selective Immune Programming



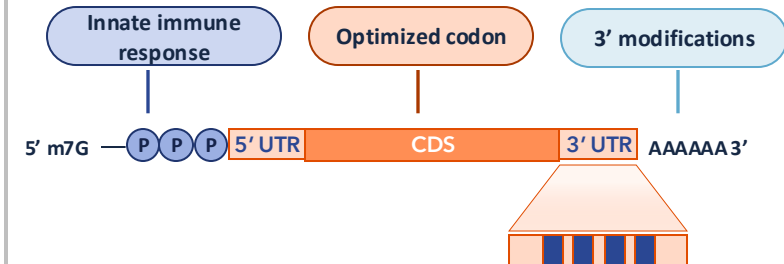
- Clinically validated CARs with precise, cell-selective expression
- Modular design programs only cells of interest
- Multiple CARs encoded in one product

Targeted LNPs for Immune Cell Uptake



- Proprietary LNPs with targeted and pan-targeted delivery
- Immune cell uptake confirmed in patients
- Low systemic and liver toxicity

RNA Optimized for Durable, Safe Expression



- Industry leading transient expression (>8 days)
- Minimal reactogenicity in patients
- Supports repeat dosing and durable immune activation
- Stably integrating retrotransposon

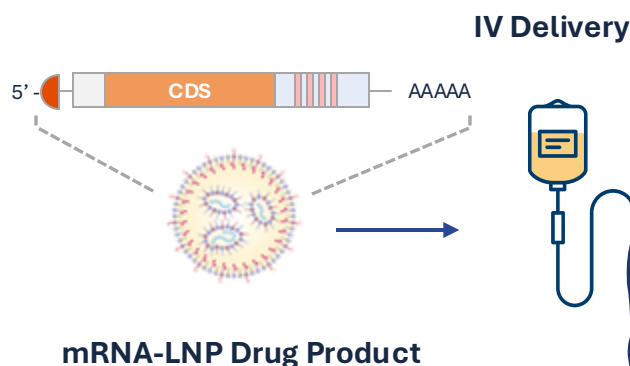
Transforming Immunotherapy Through In Vivo CAR Programming

T cells, NK cells, myeloid cells: programmed directly inside the body

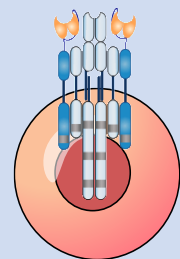
Multi-Immune Programming in Action

Clinically Proven mRNA-LNP Delivery

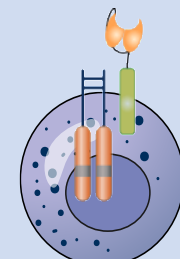
Repeat dosing & off-the-shelf,
no lymphodepletion



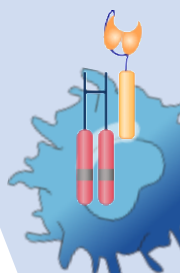
In Vivo CARs



T Cells



NK Cells








Myeloid Cells

Transforming
outcomes across
diseases

- Oncology
- Autoimmunity
- Fibrosis

Robust Clinical Pipeline Across Multiple Indications

PRODUCT	CELL TYPE(S)	INDICATION	PRECLINICAL	PHASE 1	PHASE 2	PHASE 3
Myeloid Cell Programming						
MT-303 (GPC3)	Myeloid Cells	HCC				
MT-302 (TROP2)	Myeloid Cells	Frontline GEJ (IST)				
Multi-immune Cell Programming						
MT-304 (HER2)	NK and Myeloid Cells	Breast Cancer				
CRT-401 (HER2+TROP2)	T, NK, and Myeloid Cells	Epithelial Tumors				
CRT-402 (CD19)	T Cells	B Cell Depletion				

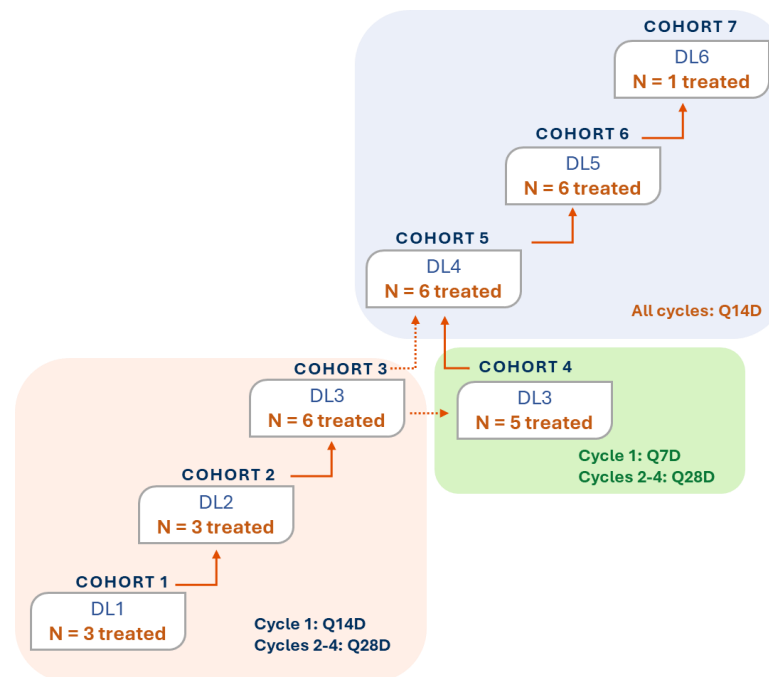
MT-302: TROP2 Myeloid CAR, Phase 1/2 Clinical Trial

Phase 1/2 Program

- 30 patients treated, 7 dose cohorts, 12 heterogeneous solid tumor sub-types
- High baseline tumor burden, numerous prior metastatic therapies
- Clinical and biological activity observed across dose levels

Clinical data readout at SITC

Dose Escalation Design

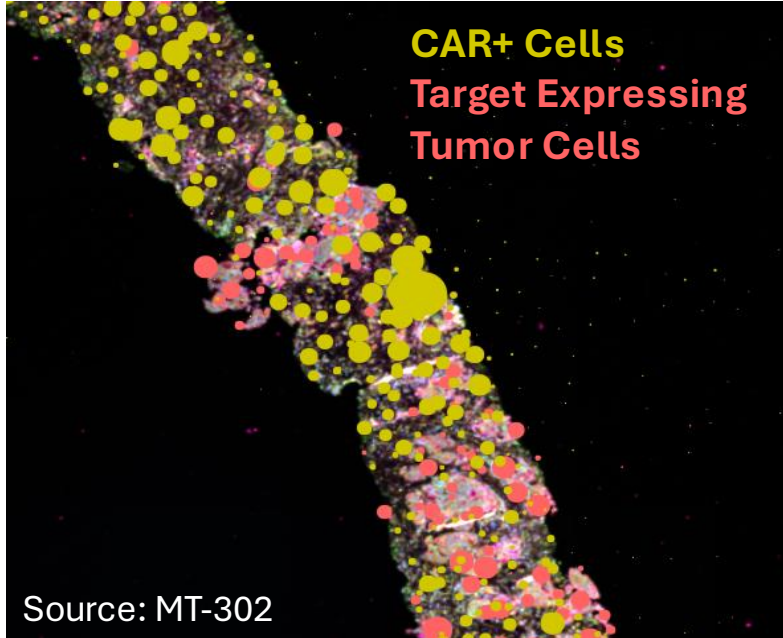


BOIN dose escalation to evaluate safety, pharmacodynamics, and early biologic activity

Demonstrated Proof of Mechanism in Humans

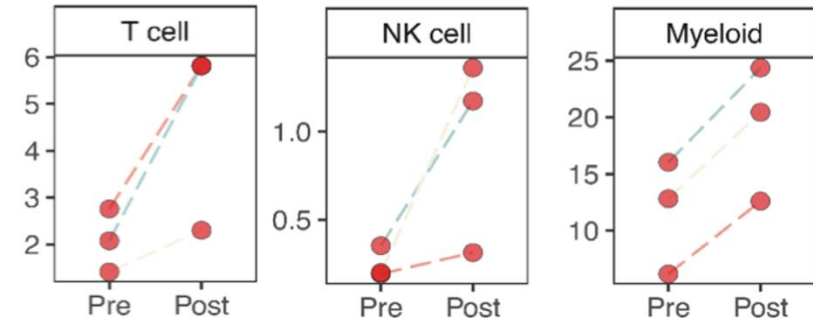
In Vivo CAR expression and immune activation in cold tumors

CAR Expression in Targeted Cells



- CAR+ myeloid cells infiltrate tumors and attack tumors.

Immune Activation



Source: MT-302

- Immune activation observed across T cells, NK cells, and myeloid compartments
- Repeat dosing tolerated with sustained CAR expression
- Established foundation for next-line and combinational studies

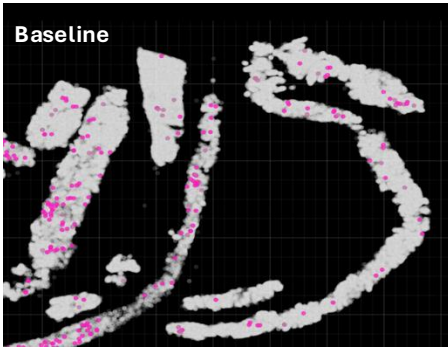
Tumor penetration and immune activation validate the CREATE platform mechanism in patients

Translating Early Insights to Durable Responses

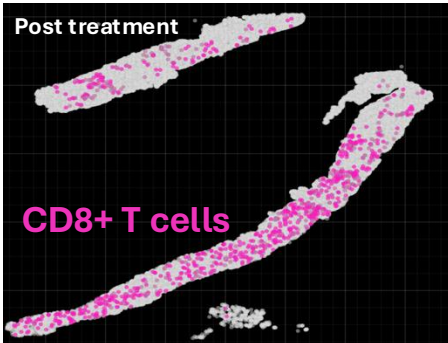
Immune infiltration and checkpoint expression reveal opportunity to enhance responses

T Cell Infiltration

Before: few T cells in tumor

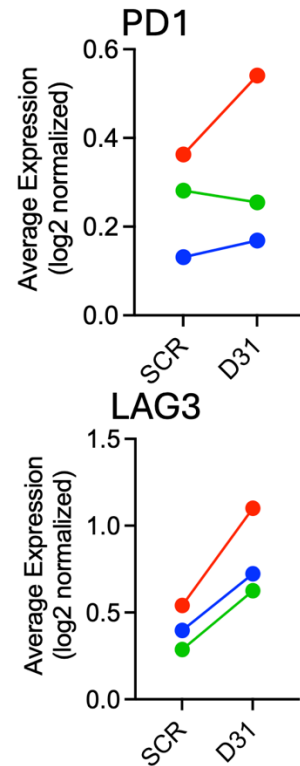


After: CD8+ T cells move into tumor



Checkpoint Expression

Rising Checkpoint Expression Shows Active Tumor-Immune Engagement:



- **T cell infiltration and checkpoint upregulation** confirm tumor engagement
- **Checkpoint induction** may have limited activity in refractory patients
- **Combination with checkpoint inhibitors** expected to restore T cell function and amplify response

Advancing 302 and 303 into Frontline Settings

Ph1 results establish mechanism and safety; translational findings define next-phase combinations

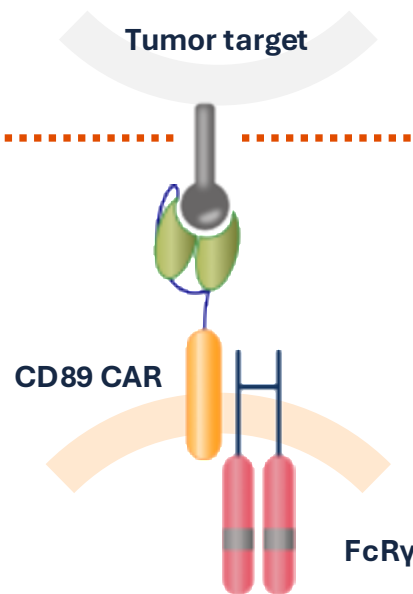
MT-302: GEJ IST

M8 Incidence:	~40,000/yr
Advanced 5 Yr Survival:	16%
Current Response Rate:	1L: 58%
	2L: 28%

Phase 2 IST Frontline Regimen



\$2.5B+ Market Opportunity



MT-303: HCC

M8 Incidence:	~290,000/yr
Advanced 5 Yr Survival:	3%
Current Response Rate:	1L: 30%
	2L: 18%

Phase 1/2 Frontline Regimen



\$3.2B+ Market Opportunity

Earlier-line patients and checkpoint combinations build on immune activation demonstrated in phase 1

Proven myeloid programming provides a pathway to better survival and outcomes in large, underserved patient groups

Proven Myeloid Programming Sets the Foundation for Multi-Immune Approach

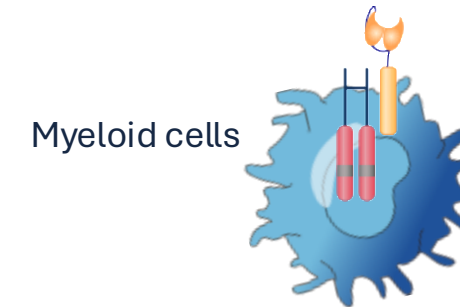
MT-302 and MT-303 showed that myeloid cells:

- ✓ Mechanistic proof in patients
- ✓ Present a tolerable safety profile with repeat dosing
- ✓ Show durable CAR expression in patient immune cells
- ✓ Induce proinflammatory tumor immune activation
- ✓ Enable direct mRNA CAR delivery to primary immune cells

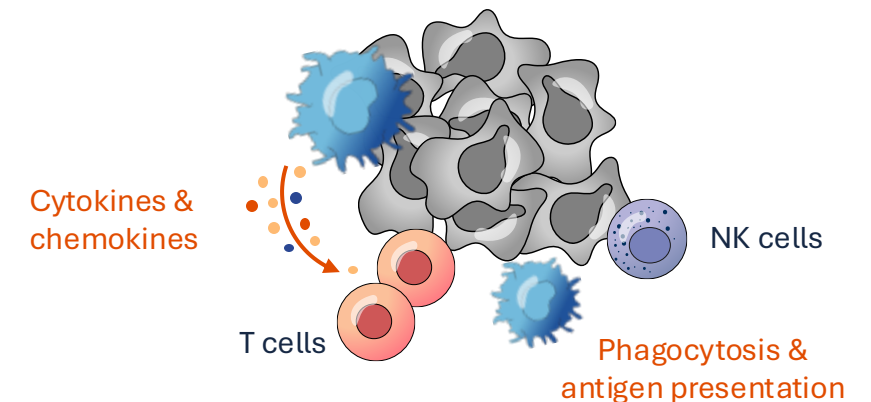
Our myeloid approach laid the foundation

Now we are advancing **multi-immune cell programming** for deeper, more durable responses

Myeloid Cell Programming



Tumor trafficking



Next Step: Multi-Immune Cell Activation

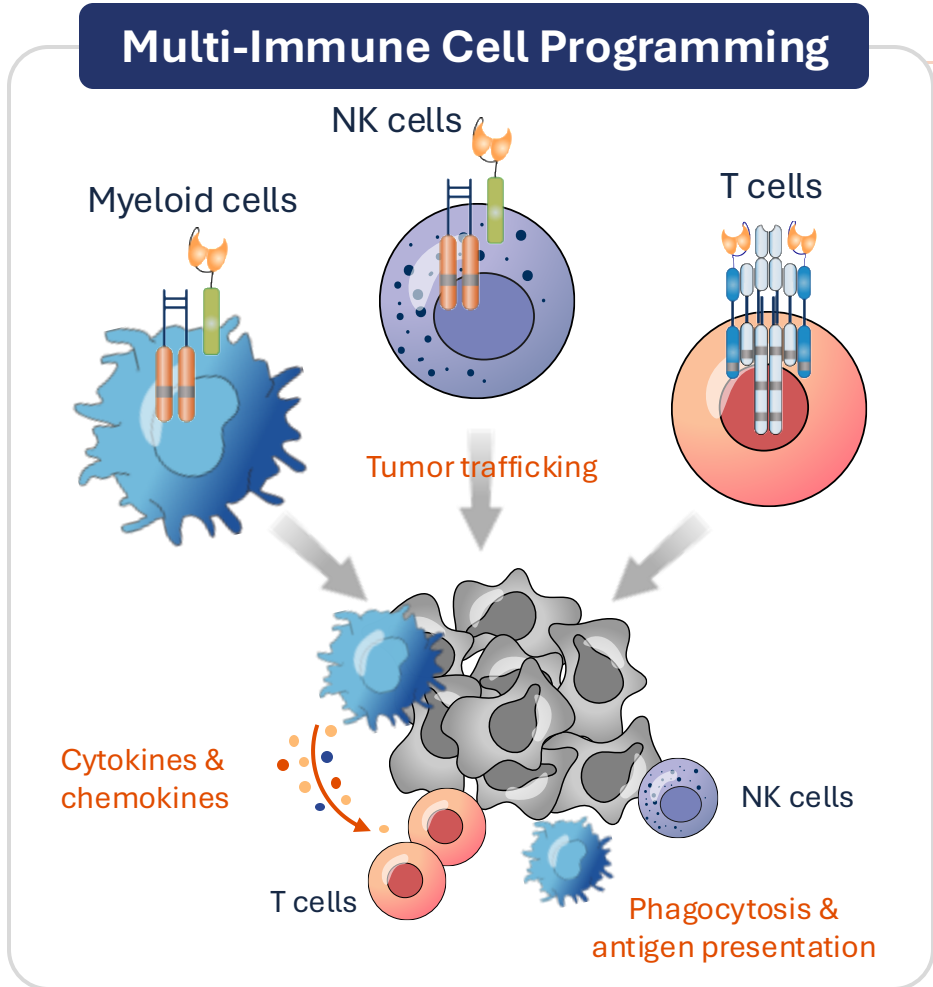
Expanding to engage T cells and NK cells for deeper, more durable responses in oncology and autoimmunity

Adding T and NK cells to our proven platform will:

- ✓ Synergize with programmed myeloid cells
- ✓ Enhance direct anti-tumor activity
- ✓ Overcome resistance mechanisms for durable responses
- ✓ Leverage science to expand into heme and autoimmunity

New pipeline candidates advancing this vision

- MT-304 first new class of multi-immune CAR therapy
- CRT-401 and CRT-402 integrate CAR-T into the pipeline in solid tumors, hematological malignancies, and autoimmune

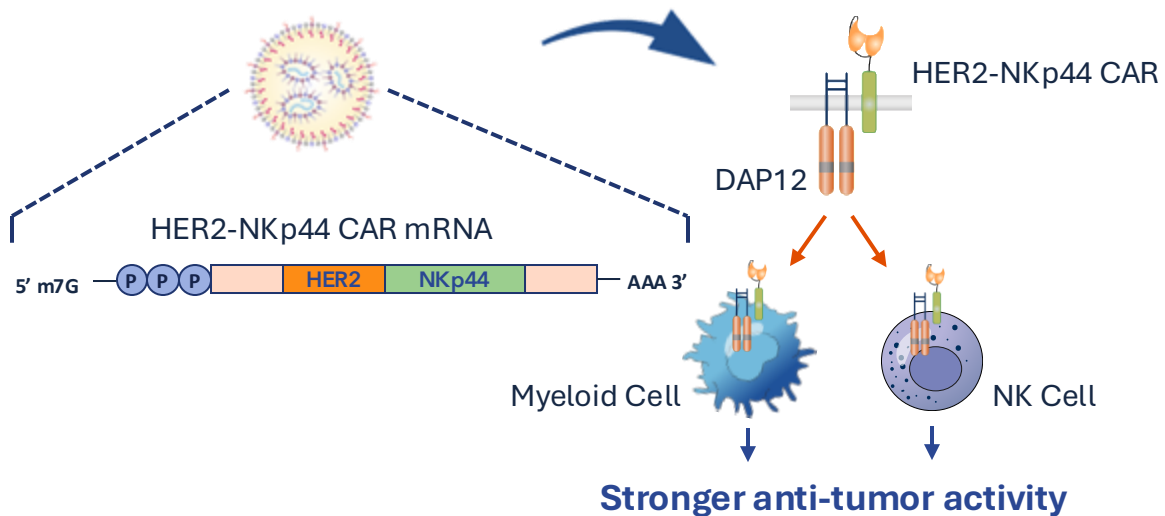


MT-304: First Clinical Candidate From CREATE'S Multi-Immune Platform

HER2-NKp44 CAR extends validated myeloid programming to NK cell engagement for enhanced cytotoxicity

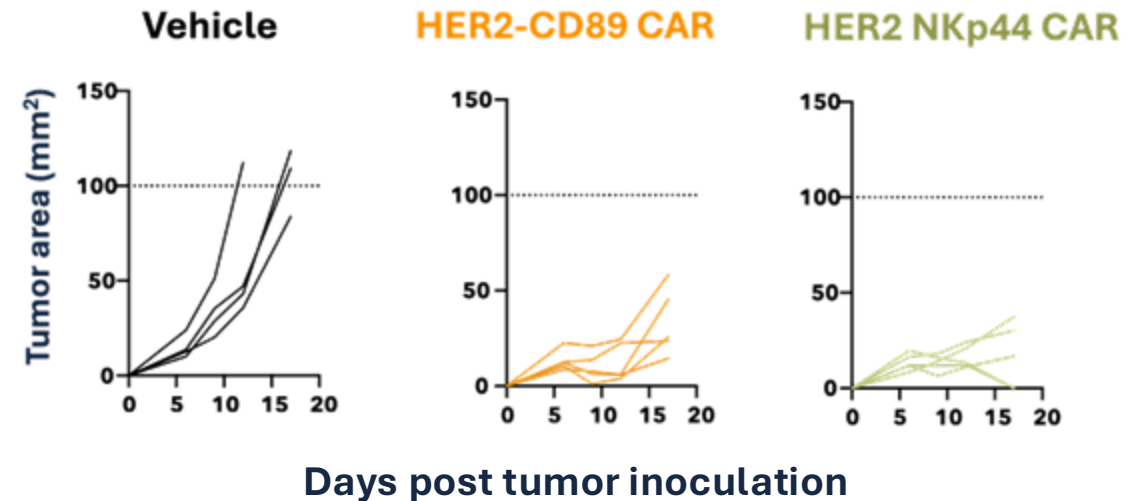
NKp44 CAR Design

- DAP12 ensures **cell-specific activity**
- **Stronger immune cytotoxicity**
- Myeloid programming to co-ordinates innate and adaptive immune killing



Preclinical Data Demonstrate Superior Efficacy

- **Greater activity** than CD89-based CAR in HER2 tumor models
- **Tumor regressions** observed in models refractory to CAR-T and checkpoint inhibitors
- Establishes **MT-304 as first-in-class dual-cell therapeutic** with enhanced cytotoxic potency



MT-304 Phase 1/2 Clinical Trial: Translating Multi-Immune Programming into Patients

First-in-human study evaluating safety, repeat dosing, and activity: monotherapy and checkpoint combination

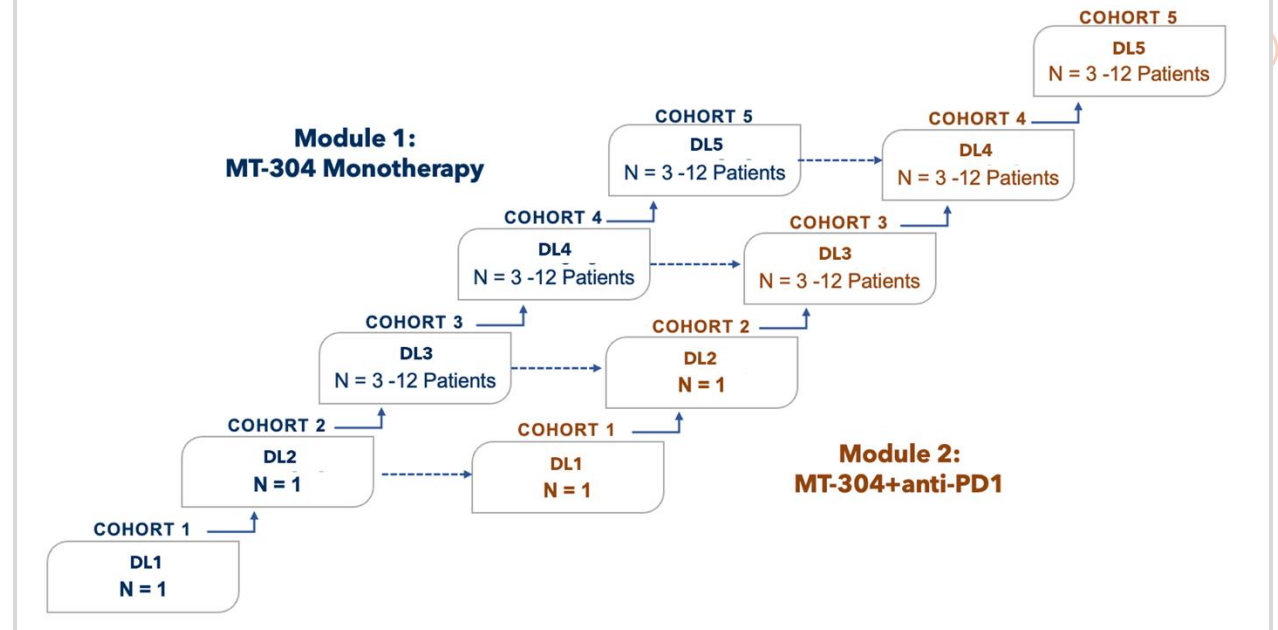
Phase 1/2 Program

Overview

- Basket study of pretreated solid tumors expressing HER2
- Standard safety, efficacy endpoints
- Evaluating activity as a monotherapy and in combination with anti-PD1

First Patient Expected Q4 2025

Dose Escalation Design



Goal for MT-304 to Increase Response Rates without Sacrificing Tolerability

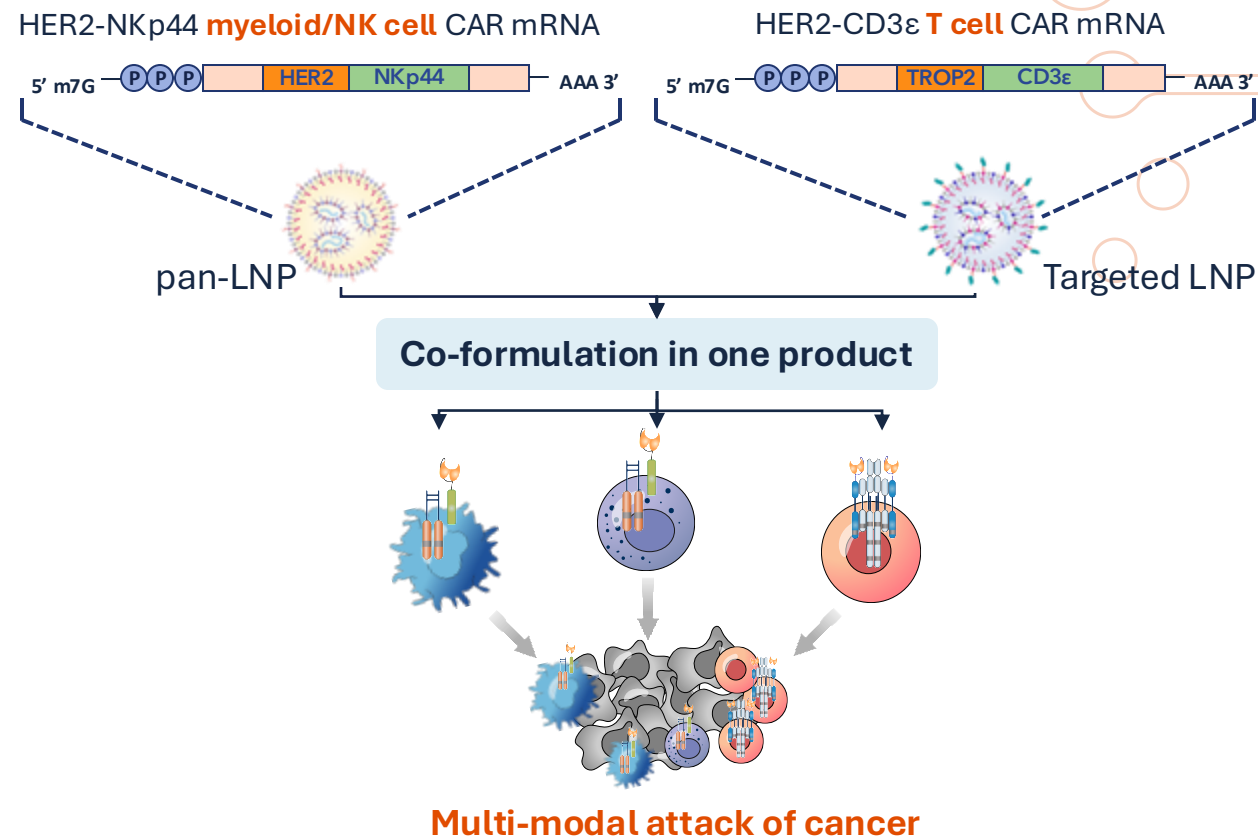
Our next step is to incorporate T-cell engagement, completing the multi-immune circuit for deeper, more durable responses.

CRT-401: Completing the Multi-Immune Network with T cell Programming

Combining the innate power of myeloid and NK cells with the precision and persistence of T cells

Superior in vivo product, tailored for solid tumors

- Builds on MT-304's validated HER2 immune framework
- Adds **targeted T cell programming** for direct cytotoxicity and durable immune memory
- **Targeted LNP enhances RNA uptake** in T cells while preserving myeloid and NK delivery
- Delivers **multi-modal attack** on tumors by coordinating innate and adaptive immune responses



CRT-401 is the first product to integrate myeloid, NK, and T-cell programming, enabling a unified immune assault on solid tumors.

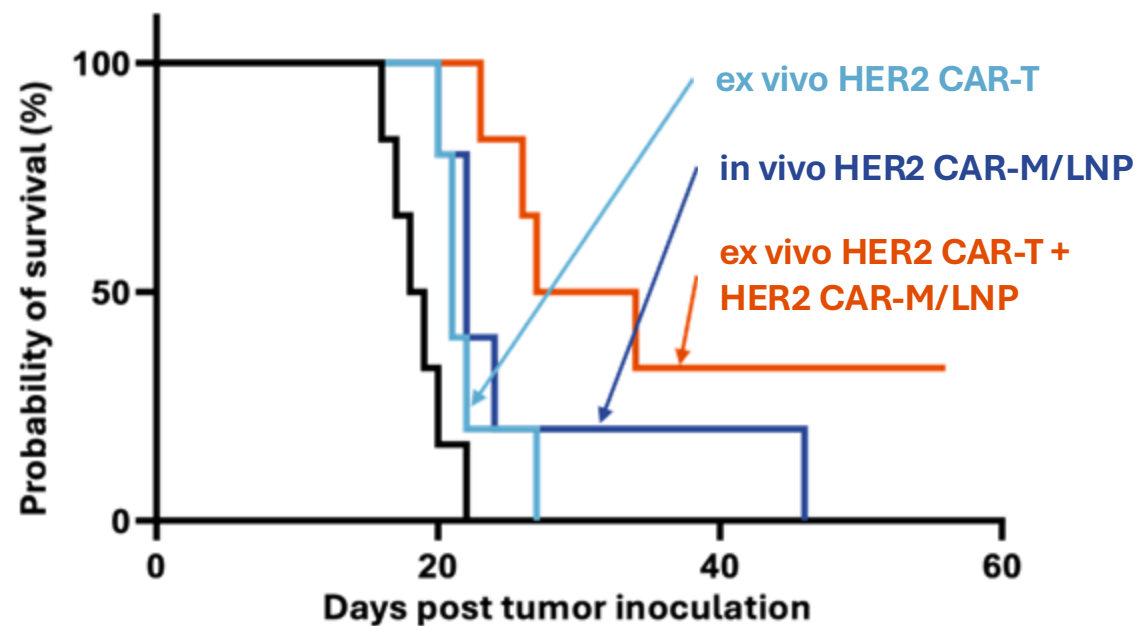
CAR-Engineered Myeloid Cells Solve Limitations of CAR-T Cells

Multi-immune programming overcomes the limitations of ex vivo CAR-T and delivers curative potential.

In vivo engineered myeloid cells provide survival benefit in combination with ex vivo CAR-T

- Ex vivo HER2 CAR-T monotherapy yields limited benefit
- In vivo myeloid CAR-LNP drives strong innate immune activation
- Combining in vivo CAR-M with CAR-T produces **complete, durable tumor regression**
- Provides mechanistic foundation for next-generation **multi-immune therapeutics (MT-304 → CRT-401)**

hHER2 tg mouse solid tumor model



Preclinical synergy validates CREATE's multi-immune programming approach for durable tumor clearance.

Extending CREATE's RNA Platform Beyond Solid Tumors

One RNA Platform — Dual Capability

Transient CAR expression for B cell depletion in autoimmunity

Stable CAR integration for durable B cell malignancy depletion

CREATE's mRNA-LNP Innovation Improves In Vivo B cell Depletion, Validated in Humans

Human data confirm clinical potential of in vivo CAR-T therapies

Validation in Oncology

- Lentivirus- EsoBiotech
- Shenzhen, China September 18th 2025

THE LANCET

This journal Journals Publish Clinical Global health Multimedia Events About

Standard PDF (opens in a new tab)

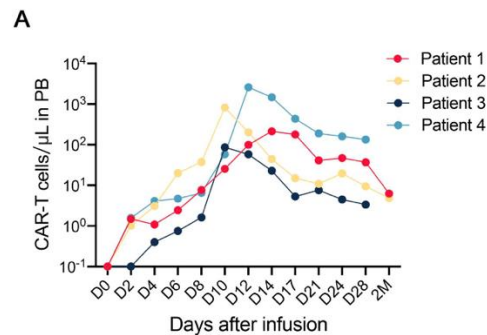
CORRESPONDENCE · Volume 406, Issue 10500, P228-231, July 19, 2025

[Download Full Issue](#)

In-vivo B-cell maturation antigen CAR T-cell therapy for relapsed or refractory multiple myeloma

Jia Xu^a · Lin Liu^a · Philippe Parone^b · Wei Xie^a · Chunyan Sun^a · Zhaozhao Chen^a · et al. [Show more](#)

[Affiliations & Notes](#) [Article Info](#)



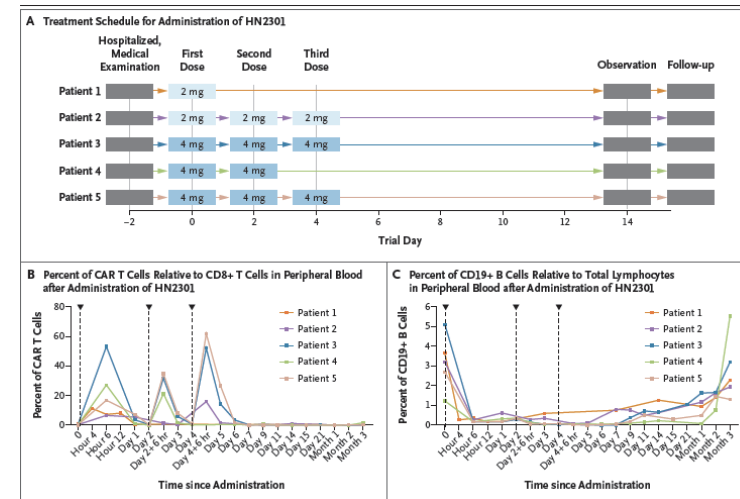
CD19 CAR-T in Autoimmunity

- mRNA- CD8 targeted tLNP
- Wuhan, China September 18th 2025

The NEW ENGLAND JOURNAL of MEDICINE

CORRESPONDENCE

In Vivo CD19 CAR T-Cell Therapy for Refractory Systemic Lupus Erythematosus

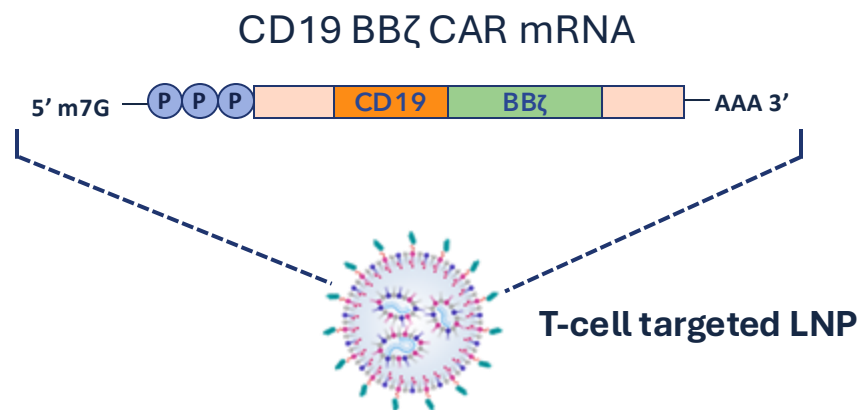


CREATE is advancing a clinically validated concept with a safer, more scalable RNA-LNP platform that enables transient or stable B-cell depletion as needed.

CRT-402: Dual RNA System for Precise In Vivo CAR-T Control

Targeting CD19 for hematologic malignancies and autoimmunity with transient or stable in vivo CAR-T

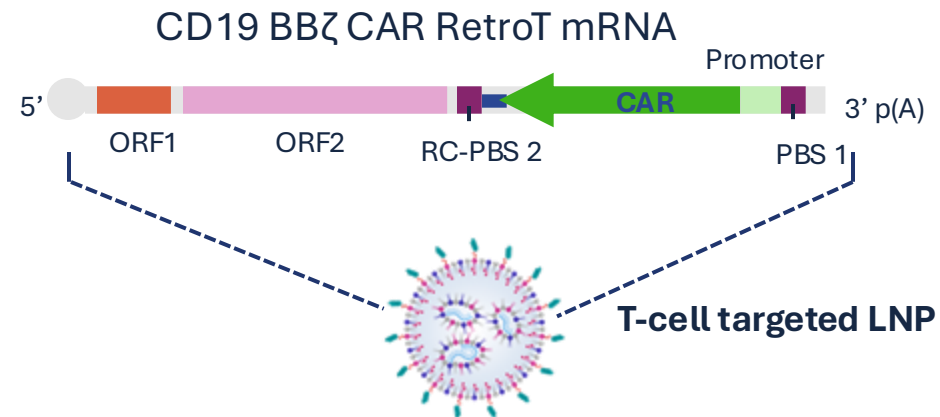
Transient In Vivo T Cell Programming



- Delivers **episomal CD19 CAR mRNA** directly to T cells via targeted LNPs
- Enables **repeat dosing** for controlled and reversible CAR expression
- Designed for **temporary B-cell depletion** in autoimmune disease

Transient mRNA: reversible, tunable, redosable

Stable Integration via All-RNA RetroT System



- Utilizes CREATE's **fully human RetroT** mechanism for CAR gene integration
- Achieves **permanent CAR expression** directly within T cell genome
- Enables **durable B-cell clearance** in hematologic malignancies

Genomic integration of CD19 CAR:
stable, precise, and long-lasting

CREATE RetroT: Precise RNA Integration Enabling Stable In Vivo CAR-T Programming

- **All RNA integration system**

- **Fully RNA based:** No DNA templates or viral vectors
- Leverages CREATE's RetroT mechanism for **direct CAR integration** into the T cell genome

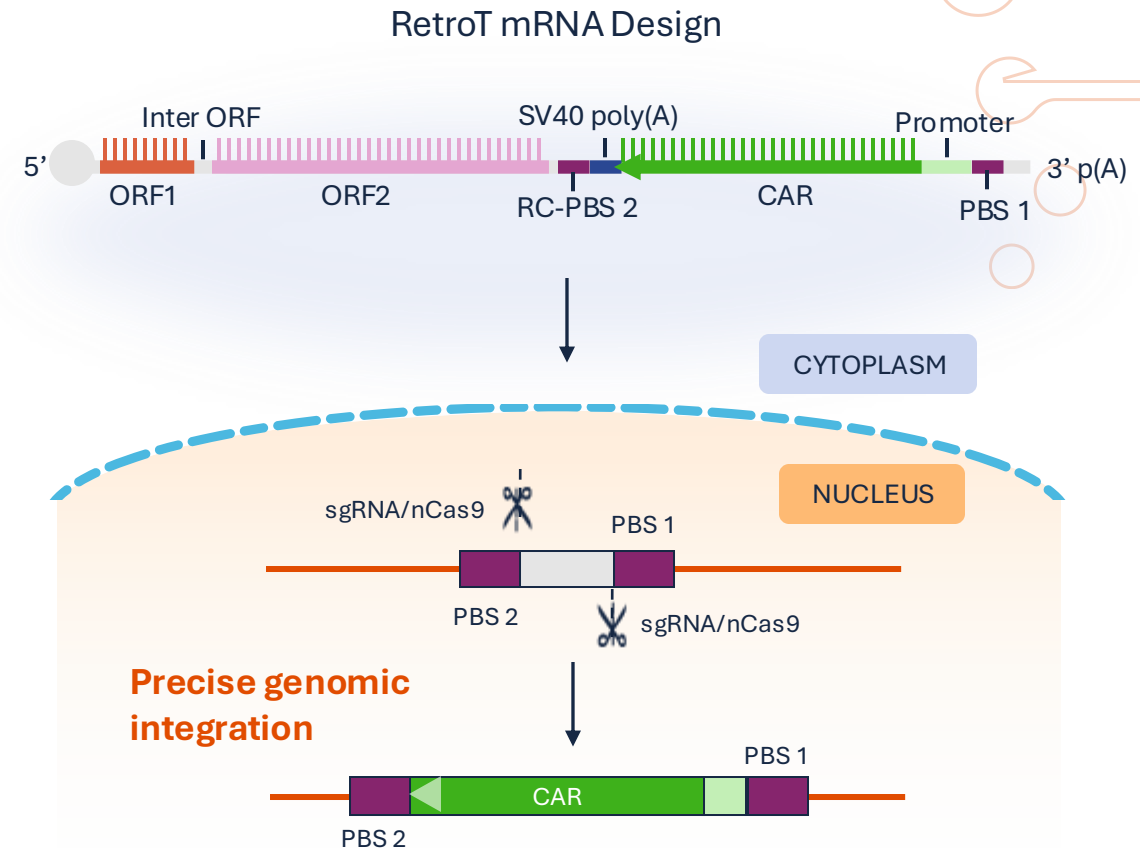
- **Integration efficiency**

- **Precision safety**

- **Controlled, biallelic integration observed** – no evidence of partial or off-target insertions
- Maintains normal T cell viability and proliferation

- **Functional Validation**

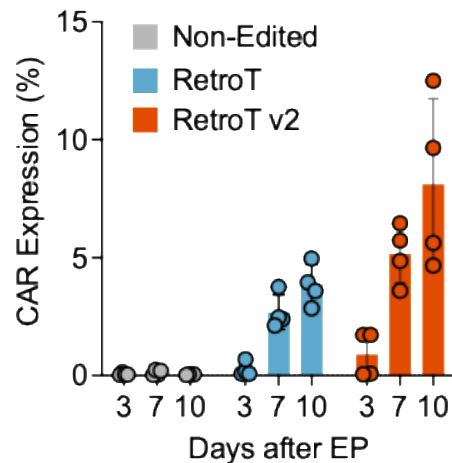
- RetroT-integrated CART cells show **robust, specific CD19+ tumor killing**
- Engineered CART secrete effector cytokines (GM-CSG, IFN- γ) upon tumor engagement



RetroT delivers safe, efficient, and precise RNA integration, unlocking stable in vivo CAR-T therapy for the first time.

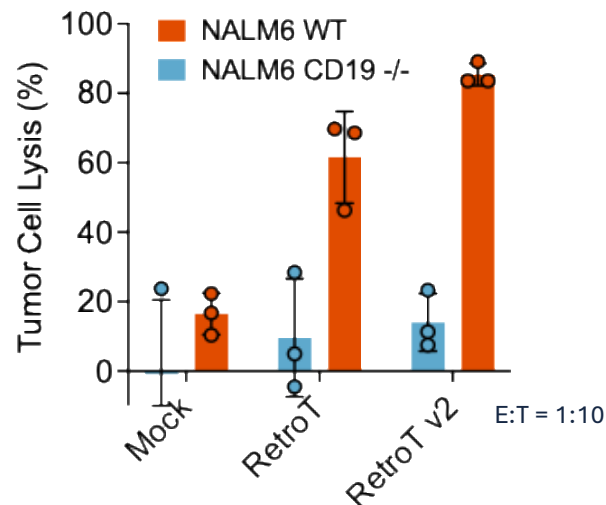
RetroT-integrated CD19 CAR-T Cells Demonstrate Potent, Precise and Durable Function

Editing Efficiency



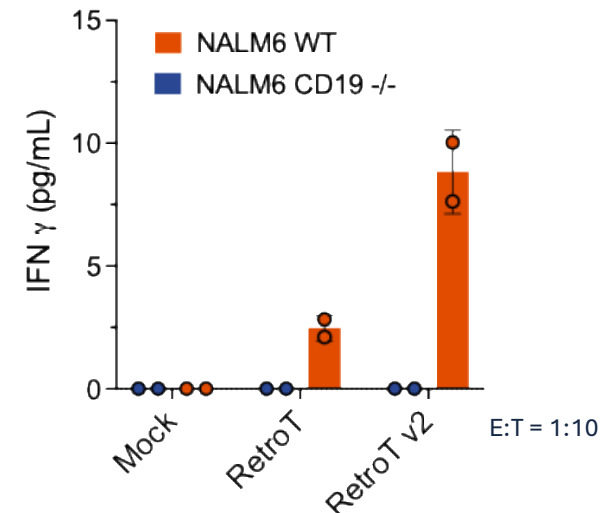
- Consistent CD19 CAR integration in up to 12% of T cells
- Achieved without DNA templates or viral vectors

Tumor Cell Lysis



- Specific and robust kill of CD19⁺ NALM6 tumor cells
- No activity against CD19⁻ cells confirms target specificity

Cytokine Production



- Activation-dependent cytokine production consistent with CAR activation
- Demonstrates proper immune signaling upon target engagement

CREATE RetroT achieves precise RNA integration and potent CAR-T function — validating the first fully RNA-based platform for stable in vivo cell programming.

Integration of Technology and Manufacturing Enable Rapid, Scalable, and Cost-effective Product Development



Integrated technology platform

- Proprietary RNA: 8+ days of expression; transient and permanent CAR integration
- Targeted CAR constructs: cell-specific activation
- LNP delivery: targeted and pan-immune LNPs
- Strong IP estate: 115+ patents/applications filed



Proven Manufacturing

- End-to-end GMP capability: PD, pDNA, mRNA, LNP, Fill-Finish
- Proven scale: >4 GMP batches
- Stability and quality: >3 years stability
- Flexible platform: speed and lower COGS

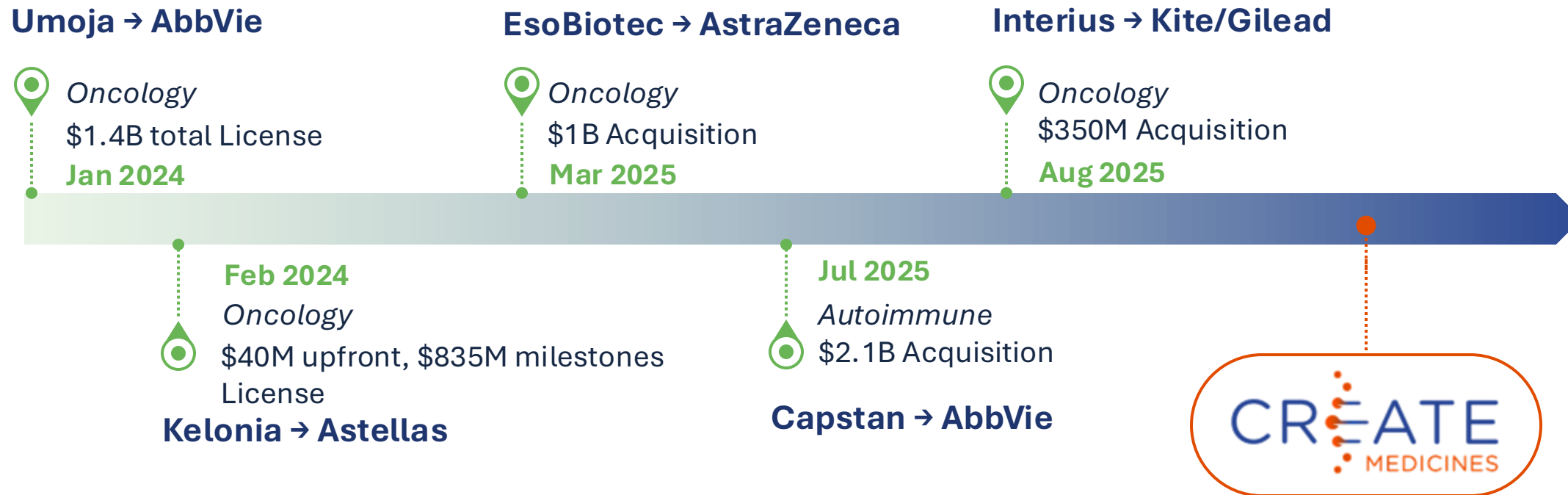


Product-focused Approach

- Global reach: open sites in Australia, Korea, Taiwan, USA and the EU
- Rapid path to clinical data: in less than 12 months concept to clinic
- Cost efficient path: via platform-based regulatory strategy
- Aligned with agencies: strategy built with regulatory insights

The Market Wants In Vivo CAR Therapies

Strategic interest shows it to be an area of rapid growth and focus



CREATE is positioned to be the engine for biopharmas looking to accelerate in vivo CAR capabilities across oncology and autoimmunity

Blockbuster Product Potential Across Oncology and Autoimmunity

From frontline programs to next-generation multi-immune therapies



Focus Area	Assets	Summary Observations
Oncology	<u>Myeloid</u> MT-302-TROP2 MT-303-GPC3	Human validation of in vivo CARs <ul style="list-style-type: none">• Tolerable safety, repeat dosing (>20 doses)• Early efficacy signals as monotherapy and tolerable safety profile (Data SITC 2025)• Advancing to frontline settings (Data Q2 2026)
	<u>Multi-Lineage</u> MT-304-HER2 CRT-401-HER2+TROP2	Multi-immune cell programming to conquer solid tumors leveraging T, NK and myeloid cells <ul style="list-style-type: none">• Encouraging preclinical data for MT-304 and CRT-401 programming to date• Q4 2025 FPI for MT-304 (Data Q4 2026)
Autoimmune	<u>CART</u> CRT-402-CD19/BCMA	B cell depletion (CD19/BCMA) <ul style="list-style-type: none">• Uniquely toggle between transient and stable CAR expression, tailoring immune rest (temporary deletion) vs durable B cell removal• Positioned to compete directly in the CD19 autoimmune reset race, but with broader flexibility (multi-lineage, transient/stable)
Platform		<ul style="list-style-type: none">• Industry leading RNA engineering and LNP delivery technology• Demonstrated mRNA delivery to T, NK, and myeloid cells• Manufacturing moat: GMP-ready, scalable, low COGS, <12 months concept-to-clinic, > 3 years stability• Ideation to clinical trial in < 12 months

Supported by Strong Investor Syndicate and Management Team



Daniel Getts, MBA, PhD
CEO, Co-founder



Allan Shaw
Chief Financial Officer &
Chief Business Officer



Robert Hofmeister, PhD
Chief Scientific Officer



Matthew Maurer, MD
Chief Medical Officer



Jason Walsh
Chief Financial
Operations Officer



Curtis Demick
Chief People Officer



Contact Us

info@createmedicines.com

