

UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
Washington, DC 20549

FORM 8-K

CURRENT REPORT  
Pursuant to Section 13 or 15(d)  
of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): March 20, 2023

**Century Therapeutics, Inc.**  
(Exact name of registrant as specified in its charter)

Delaware  
(State or other jurisdiction of  
incorporation or organization)

001-40498  
(Commission File Number)

84-2040295  
(I.R.S. Employer  
Identification No.)

3675 Market Street  
Philadelphia, Pennsylvania  
(Address of principal executive offices)

19104  
(Zip Code)

Registrant's telephone number, including area code: (267) 817-5790

Not Applicable  
(Former name or former address, if changed since last report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of Each Class	Trading Symbol	Name of Exchange on Which Registered
Common Stock, par value \$0.0001 per share	IPSC	Nasdaq Global Select Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

**Item 7.01**      **Regulation FD Disclosure**

On March 20, 2023, Century Therapeutics, Inc. (the “Company”) updated information reflected in a slide presentation, which is attached as Exhibit 99.1 to this Current Report on Form 8-K and is incorporated herein by reference. Representatives of the Company will use the updated presentation in various meetings with investors from time to time.

The information contained in this Item 7.01 (including Exhibit 99.1) is being furnished and shall not be deemed “filed” for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the “Exchange Act”), or otherwise subject to the liabilities of that section and shall not be deemed to be incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as shall be expressly set forth by specific reference in such filing.

**(d) Exhibits**

<b>Exhibit No.</b>	<b>Document</b>
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<a href="#">99.1</a>	<a href="#">Investor Presentation of Century Therapeutics, Inc., dated March 20, 2023</a>
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104	Cover Page Interactive Data File (embedded within the Inline XBRL document)
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**SIGNATURES**

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

**CENTURY THERAPEUTICS, INC.**

By: /s/ Osvaldo Flores, Ph.D.  
Name: Osvaldo Flores, Ph.D.  
Title: President and Chief Executive Officer

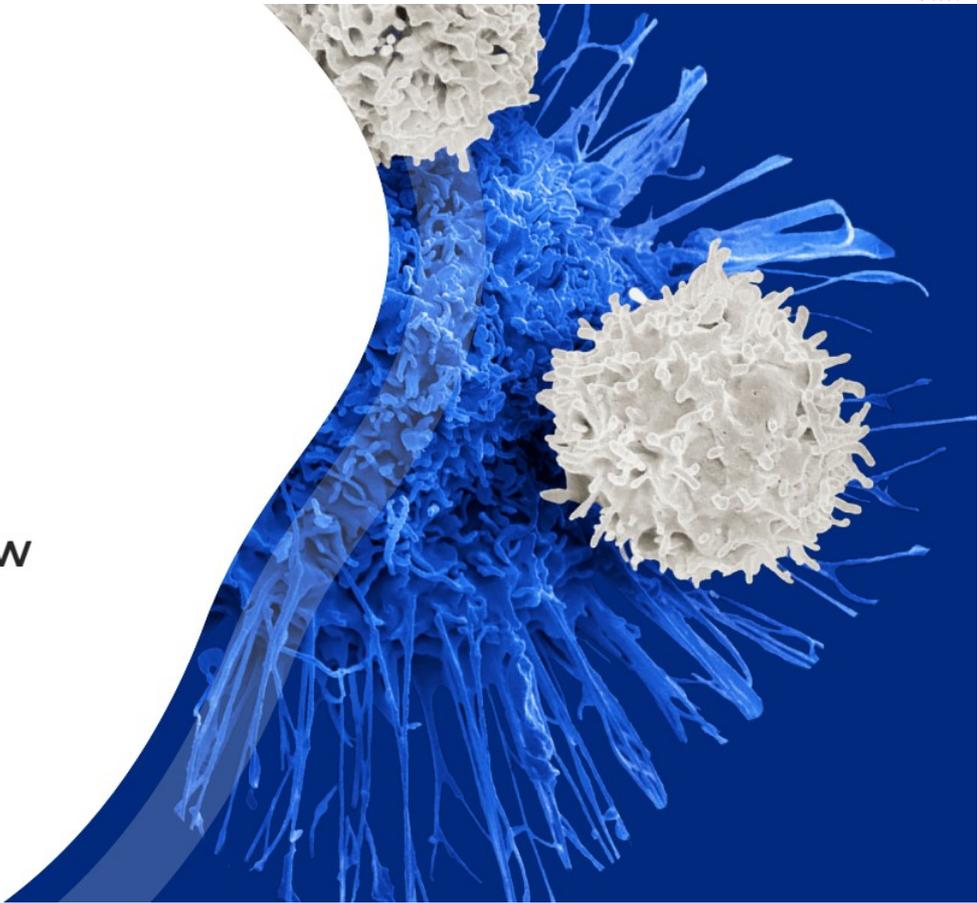
Date: March 20, 2023

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# Corporate Overview

March 2023



# Forward-looking statements

This presentation contains forward-looking statements within the meaning of, and made pursuant to the safe harbour provisions of, The Private Securities Litigation Reform Act of 1995. All statements contained in this document, other than statements of historical facts or statements that relate to present facts or current conditions, including but not limited to, statements regarding possible or assumed future results of operations, business strategies, research and development plans, regulatory activities, market opportunity, competitive position and potential growth opportunities are forward-looking statements. These statements involve known and unknown risks, uncertainties and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. In some cases, you can identify forward-looking statements by terms such as "may," "might," "will," "should," "expect," "plan," "aim," "seek," "anticipate," "could," "intend," "target," "project," "contemplate," "believe," "estimate," "predict," "forecast," "potential" or "continue" or the negative of these terms or other similar expressions. The forward-looking statements in this presentation are only predictions. We have based these forward-looking statements largely on our current expectations and projections about future events and financial trends that we believe may affect our business, financial condition and results of operations. These forward-looking statements speak only as of the date of this presentation and are subject to a number of risks, uncertainties and assumptions, some of which cannot be predicted or quantified and some of which are beyond our control, including, among others: our ability to successfully advance our current and future product candidates through

development activities, preclinical studies, and clinical trials; our reliance on the maintenance on certain key collaborative relationships for the manufacturing and development of our product candidates; the timing scope and likelihood of regulatory filings and approvals, including final regulatory approval of our product candidates; the impact of the COVID pandemic, geopolitical issues and inflation on our business and operations, supply chain and labor force; the performance of third parties in connection with the development of our product candidates, including third parties conducting our future clinical trials as well as third-party suppliers and manufacturers; our ability to successfully commercialize our product candidates and develop sales and marketing capabilities, if our product candidates are approved; and our ability to maintain and successfully enforce adequate intellectual property protection. These and other risks and uncertainties are described more fully in the "Risk Factors" section of our most recent filings with the Securities and Exchange Commission and available at [www.sec.gov](http://www.sec.gov). You should not rely on these forward-looking statements as predictions of future events. The events and circumstances reflected in our forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Moreover, we operate in a dynamic industry and economy. New risk factors and uncertainties may emerge from time to time, and it is not possible for management to predict all risk factors and uncertainties that we may face. Except as required by applicable law, we do not plan to publicly update or revise our forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise.

# Investment Thesis



## **Next generation platforms for iNK and gamma delta iT candidates**

Foundational investments in iPSC technology, genetic editing, and manufacturing

## **Experienced team in R&D, immuno-oncology, manufacturing and commercialization**

Exemplified by FDA clearance of Century's first IND for CNTY-101 & trial execution

## **Well capitalized with cash runway into 2026**

Operational efficiencies designed to enable delivery on key milestones, clinical data



# iPSC Platform



# Building a next generation allogeneic cell therapy platform

## iPSC Reprogramming



- Comprehensive collection of clinical grade lines (CD34+ HSC,  $\alpha\beta$  T cell,  $\gamma\delta$  T cell derived)

## Gene Editing



- Proprietary gene editing platform
  - CRISPR MAD7-derived gene editing for precise transgene integration

## iPSC Differentiation/Manufacturing



- Scalable protocols and processes to produce highly functional iNK and iT cell products

## Protein Engineering



- Developing proprietary next-generation CARs
- Universal tumor targeting platform

Vertically integrated capabilities differentiate Century's approach



# Foundational investments in iPSC know-how and manufacturing



## **iPSC license and collaboration agreement established in 2018**

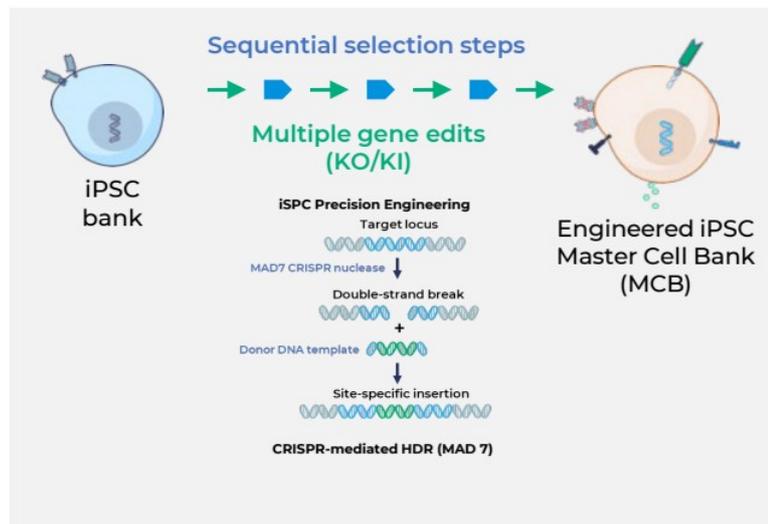
- Access to clinical grade iPSC lines
- Exclusive IP and know-how to generate immune effector cells using feeder-free methods (NK, T, Mac, DC)
- FCDI GMP manufacturing capacity for Century's product candidates
- Leveraging two decades of research & investment at University of Wisconsin and FCDI

## **Established in-house manufacturing accelerates learnings and enables faster product iteration**

- 53,000 ft<sup>2</sup> facility
- Designed to produce multiple immune cell types
- Two sites provides optionality and maximizes flexibility



# Precision CRISPR MAD7 mediated sequential gene editing of iPSC cell generates uniform product candidates



## Advantages of Century's Platform

**Precise** CRISPR mediated homology directed repair reduces off-target integration

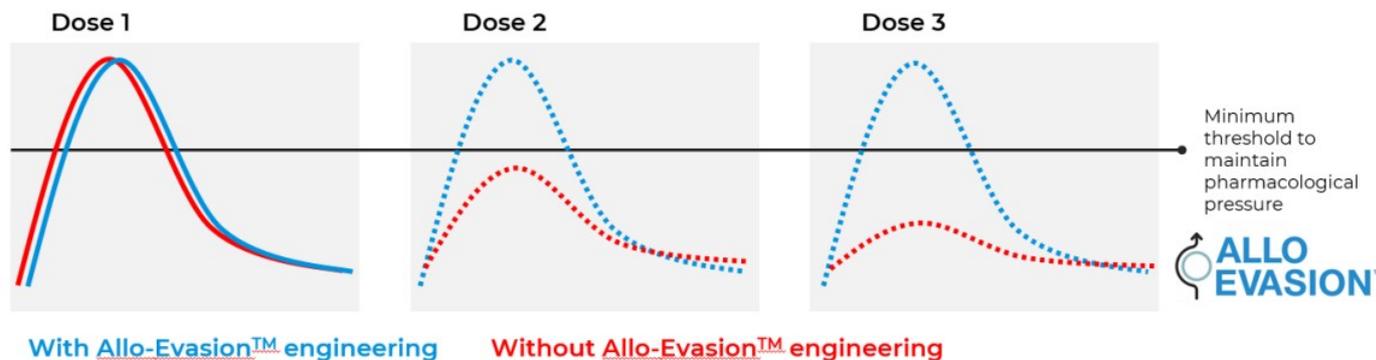
Stepwise and efficient gene editing **avoids risky multiplex modification** and structural variants

Quality control through generation of homogenous MCB establishes genomic product **integrity**

Manufacturing begins at the MCB, confirmed to be **free from genetic aberrations**

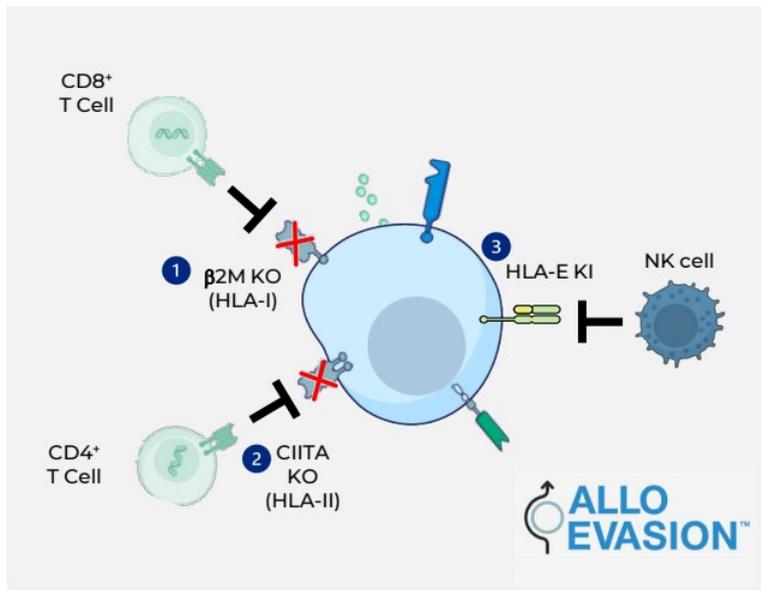
# Potential to drive durable responses with engineering to resist immun rejection

**Allo-Evasion™ edits + repeat dosing = potential greater durability**



**Next-wave of allogeneic cell therapies must solve for challenge of rejection**

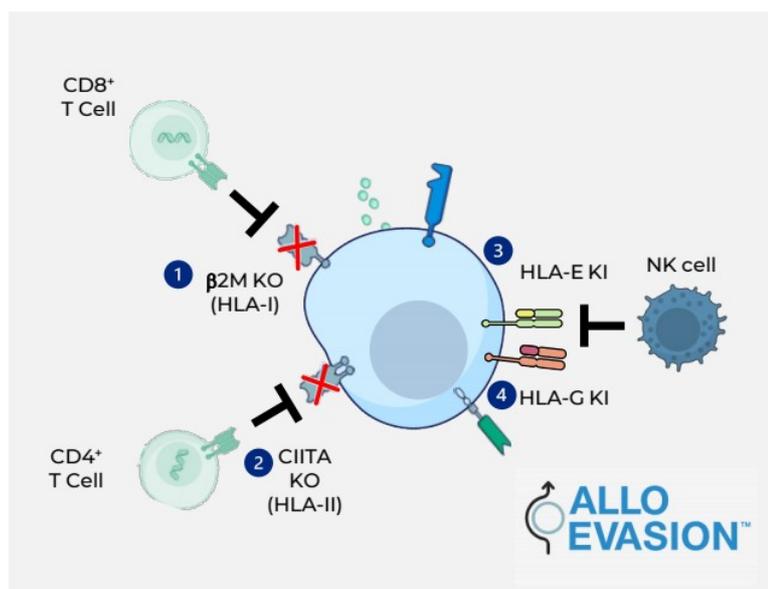
# Allo-Evasion™ 1.0 designed to overcome 3 major pathways of host vs graft rejection



## 3 core edits disarm host cells from eliminating therapy

1. Deletion of  $\beta$ 2M, a protein required to express HLA-I on the cell surface prevents recognition by CD8 T cells
2. Knock out of CIITA eliminates HLA-II expression to escape elimination by CD4 T cells
3. Knock-in of HLA-E prevents killing by NK cells

# Allo-Evasion™ 3.0 Provides Additional Protection Against NK Cell Killin

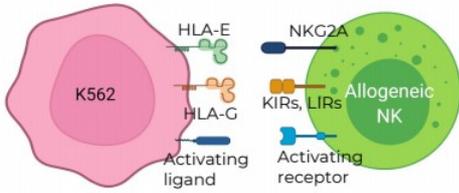


## 4 core edits disarm host cells from eliminating therapy

1. Deletion of  $\beta$ 2M, a protein required to express HLA-I on the cell surface prevents recognition by CD8 T cells
2. Knock out of CIITA eliminates HLA-II expression to escape elimination by CD4 T cells
3. Knock-in of HLA-E prevents killing by NK cells
4. Knock-in of HLA-G improves protection against killing by NK cells

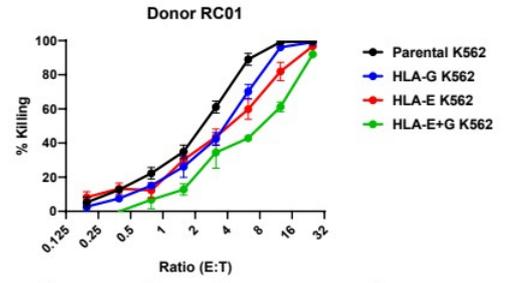
# Expression of HLA-E + HLA-G further protects from NK cell killing

## Proof-of-Concept Study with HLA-I Null K562 Cells Engineered with HLA-E and HLA-G

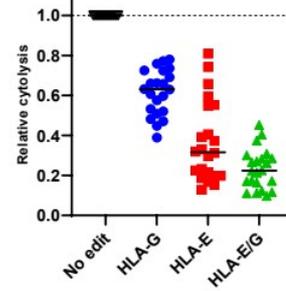


- HLA-E and HLA-G engage different receptors on NK cells including NKG2A, KIRs, and LIRs
- The expression of NKG2A, KIRs, and LIRs varies among NK cells from different donors

## The Combination of HLA-E + HLA-G Improved Protection to Killing by Allogeneic NK Cells



## Agglomerated Data from 22 NK Cell Donors





## Pipeline and Franchises



# Pipeline

Product candidate pipeline across cell platforms and targets in solid and hematologic cancers

Product	iPSC Platform	Targets	Indications	Discovery	Preclinical	Clinical			Collaborator
						P1	P2	P3	
CNTY-101	iNK	CD19	B-Cell Malignancies						
CNTY-102	iT	CD19 + CD22	B-Cell Malignancies						
CNTY-107	iT	Nectin-4	Solid Tumors						
Programs in Collaboration									
CNTY-104	iNK/iT	Multi-specific	Acute Myeloid Leukemia						Bristol Myers Squibb
CNTY-106	iNK/iT	Multi-specific	Multiple Myeloma						Bristol Myers Squibb
Research Programs									
Discovery	iNK/iT	TBD	Hematological / Solid Tumors						

Solid Tumors    Hematologic Tumors



# Promise of allogeneic cell therapies in lymphoma



## Large unmet need remains despite progress with autologous cell therapies

- ~25% of eligible patients receive CAR-T therapy<sup>1</sup>
- ~35% of patients achieve long-term remission even in earlier lines of therapy<sup>1</sup>



## Off-the-shelf modalities approaching bar set by autologous but falling short on durability

- Rejection limits potential of durable responses for first wave of allogeneic cell products
- Bispecifics lack curative potential of cell therapy

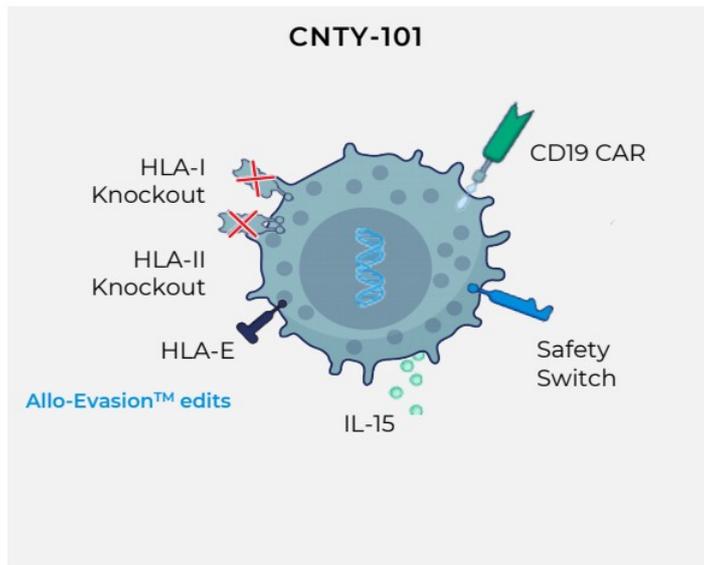


## Goal to deliver more durable response rates vs autologous

- Century candidates designed to realize benefit of repeat dosing enabled by Allo-Evasion™
- Shift from “one and done” to first repeat dosing to increase pharmacological pressure

1. Targeted Oncology, Many Challenges, Opportunities for CAR T-Cell Therapies in Lymphoma, Sept 2022

## CNTY-101: Differentiated next-gen CD19 targeted product

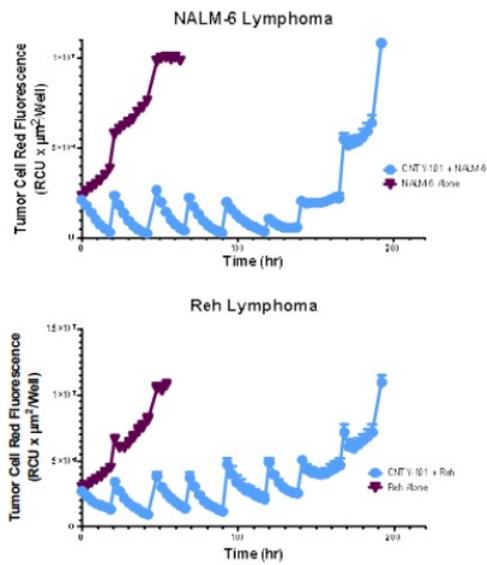


### Delivering on our vision to change the cell therapy treatment paradigm

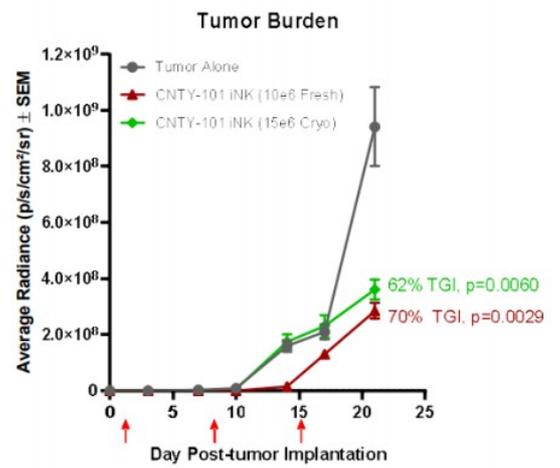
- Goal to improve durability, tolerability and ease of outpatient administration
- Potential to eliminate need for lymphodepletion with subsequent cycles of therapy
- First CD19-targeted agent to test durability benefit of repeat dosing enabled by Allo-Evasion™ edits

# CNTY-101 shows strong pre-clinical anti-tumor activity

*In Vitro* Serial killing assay



Robust activity against lymphoma xenograft



Borges, et al, ASH 2021

# ELiPSE-1: First-in-Human Study CNTY-101

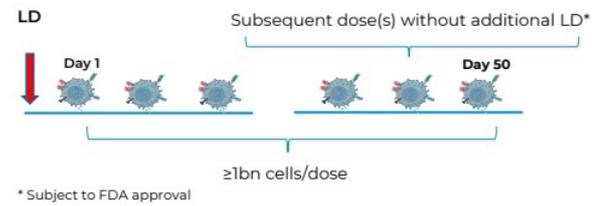
Schedule A: Single ascending dose study  
(3+3 escalation design)

DL1	DL2	DL3
100M	300M	1Bn

+ IL-2  
2<sup>nd</sup> cycle of single dose allowed for patients who demonstrate benefit



Schedule B: Accessing multiple doses per cycle



## Study to assess:

Impact of Allo-Evasion™ on iNK cell persistence and PK after multiple dosing (Schedule B)

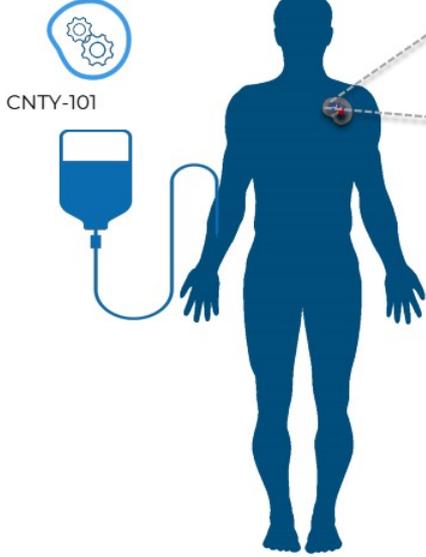
Multiple dose regimen with up to 6 doses with single lymphodepletion conditioning

Potential to increase durability of responses with Allo-Evasion™ enabled repeat dosing regimen

Currently enrolling patients with relapsed/refractory CD19+ B-cell lymphomas  
First patient dosed February 2023

# ELIPSE-1 translational endpoints

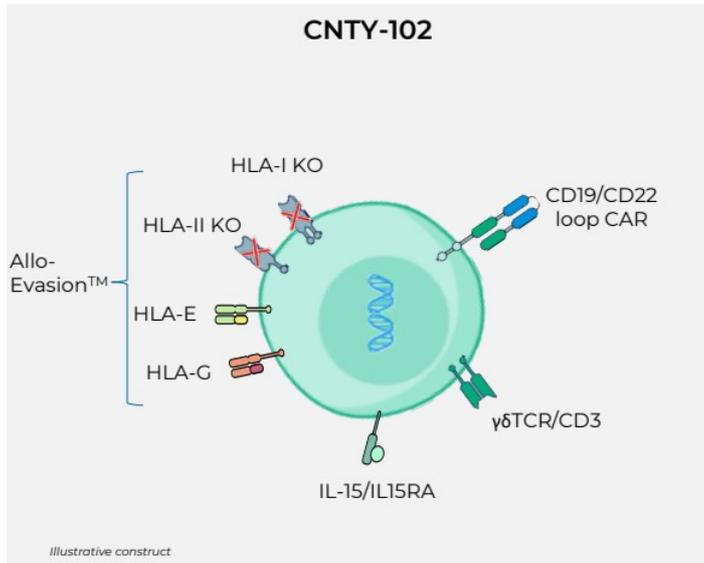
Lymphodepletion,  
Century product  
infusion



	Mechanism of Action/ Resistance		Safety & Other Efficacy Correlates
<b>Blood</b> 	 Pharmacokinetics: Expansion & Persistence   Phenotype & function	 PD biomarker B cell aplasia   Cellular Immunogeni	
<b>Serum/ Plasma</b> 	 IL-15   % VAF  Homeostatic cytokines, IL-2  Minimum residual disease (ctDNA)	 Humoral Immunogen   CRP  Cytokines: CRS, neurotoxic	
<b>Tumor Biopsy</b> 	 iNK tumor Trafficking   Tumor Antigen expression Tumor immune microenvironment Tumor Biology	Tumor burden and other baseline biomarkers	

*Initial proof of concept data in 2023*

# CNTY-102: Leveraging the $\gamma\delta$ iT platform designed to deliver best-in-class potential



## Designed to address factors that limit durability of cell therapy in B-cell malignancies

- $\gamma\delta$ iT cells demonstrate high proliferation, persistence, trafficking leading to potentially sustained anti-tumor activity
- Dual targeting to designed to counter antigen escape relapse - a major limiting factor for durability of CD19 CAR T therapies
- Armed with Allo-Evasion™ edits to enable repeat dosing to potentially deliver durable responses

*Pre-clinical data available in 2023*

# Vision for winning in solid tumors with $\gamma\delta$ iT platform

## Challenges

Trafficking and infiltration

Tumor heterogeneity

Requirement for chemotherapy conditioning

TME / Immunosuppressive environment

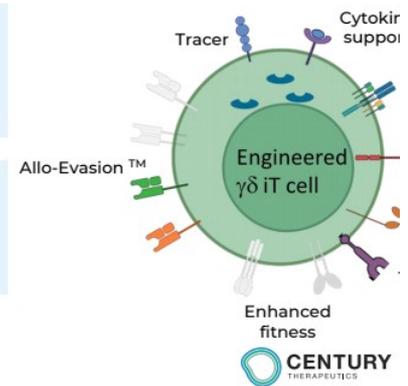
## Century's Solution

$\gamma\delta$  iT cells - tissue homing

- Engage endogenous immunity
- Multi tumor targeting pathways

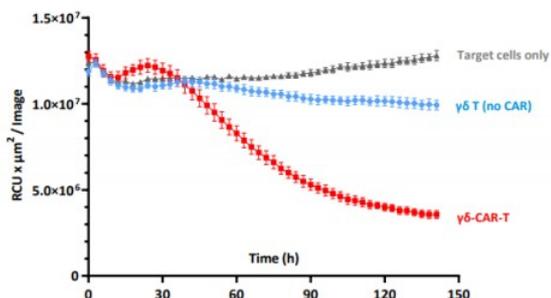
- Novel conditioning regimens
- Genetic engineering

Future engineering strategies

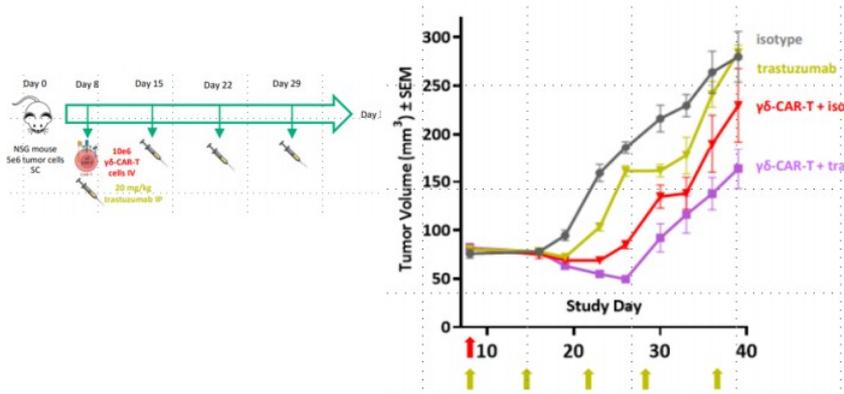


# iPSC-derived $\gamma\delta$ T cells effective at tumor control as monotherapy and combination with antibody

$\gamma\delta$ -EGFR-CAR-T cells demonstrate significant CAR killing of ovarian spheroids



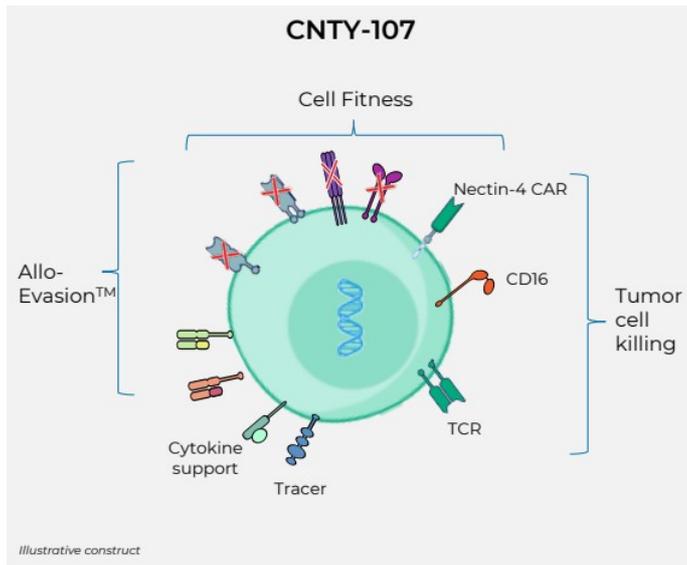
$\gamma\delta$ CAR-T demonstrate additive efficacy in combination with trastuzumab



Treatment	% TGI	Significance
trastuzumab	0	P=0.9980
$\gamma\delta$ -CAR-T	18	P=0.7073
$\gamma\delta$ -CAR-T + trastuzumab	42	P=0.0358

TGI = Tumor Growth Inhibition

# CNTY-107: First in class Nectin-4 targeted $\gamma\delta$ iT cell therapy



## Leveraging the power of the $\gamma\delta$ iT cell platform for solid tumors

### Nectin-4 has been validated by ADC approaches

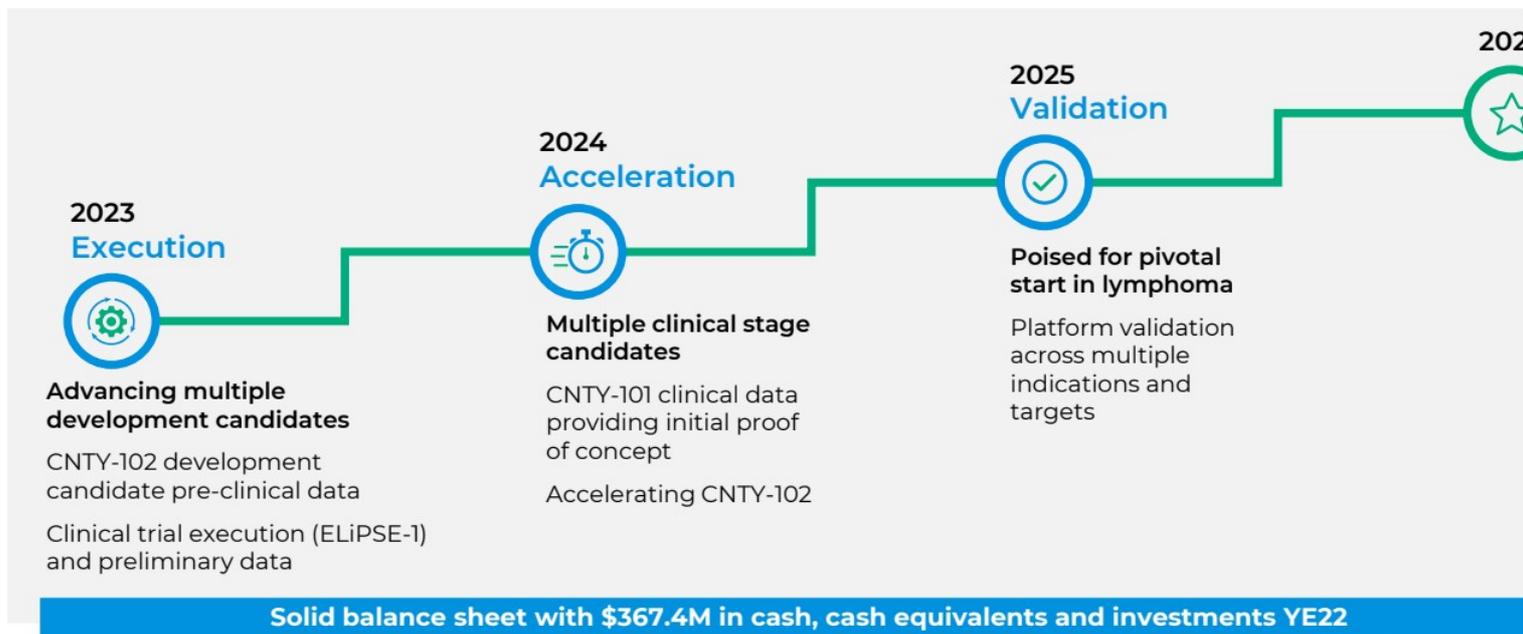
- Opportunity to address multiple Nectin-4 positive solid tumors
  - Potential indications include bladder, breast, pancreatic, non-small cell lung cancer, esophageal/gastric, head and neck, and/or ovarian cancers<sup>1</sup>

### GD iT allogeneic therapies provide potential to improve upon ADC toxicity profile and efficacy

- Intrinsic homing of GD iT cells to tissues and solid malignancies
- Multi-tumor killing modalities to tackle heterogeneity

# Strategy and 3-year vision for growth

Delivering on potential for allogeneic cell therapies to exceed efficacy, safety and logistics of autologous approaches



# Emerging leader in cell therapies for cancer

## **Comprehensive iPSC cell platform**

For immune effector cells

## **Technical Expertise**

Genetic and protein engineering, process development and immuno-oncology

## **Foundation in Science**

Continuing investment in innovation drives R&D

## **State-of-the-art GMP manufacturing facilities**

Fully operational, enabling improved and faster product iteration

## **Financial Strength**

Cash runway into 2026, Ended 4Q22 with cash, cash equivalents, and investments of \$367.4M

## **Emerging pipeline of candidates**

Product engine anticipated to deliver multiple INDs over the next 3 years

## **BMS Discovery Collaboration**

Initial focus on AML (CNTY-104) and Multiple Myeloma (CNTY-106)

**~165**

Employees including experienced leaders and entrepreneurs

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