



GNTI-932: A gut specific CAR-Engineered Regulatory T cell therapy to treat Inflammatory Bowel Disease

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OVERVIEW GNTI-932, a novel hypo-immune gut-specific chimeric antigen receptor engineered T regulatory cell (CAR-EngTreg) therapy

- localization, proliferation, and significant therapeutic efficacy in colitis models.
- These findings suggest that CAR-EngTregs like GNTI-932, targeting tissue-specific antigens, hold promise for improving the effectiveness of Treg therapies for IBD.

expressing Target X

1st Phase screening in CD4 T cells for CAR activity and 2nd Phase for selection of top CAR-EngTregs with optimal Treg phenotype and functionality RESULTS



LVV-transduced CD4 T cells. Top CARs advanced to a secondary CAR screen in EngTregs to inform the selection of candidates with a range of activity and optimal functional profile.

Select expressing CARs with low activation at baseline



Evaluation of CAR expression and tonic signaling via LVV transduction in CD4 T cells Assessment and ranking of candidate CAR surface expression. (UT=Untransduced control and representative CAR expression) (B) Assessment of baseline CAR activation (tonic signaling).

Selection of binders with optimal CAR dependent activation



CD4 CAR-T activation assay. (A) Representative plots of CD4 CAR-T cell CD137 and CD69 expression post co-culture with HEK293 cells expressing Target X or an irrelevant antigen. (B) Activation of CD4 CAR-T cells normalized to CAR expression levels.

Selection of binders with optimal CAR dependent activation



CAR activation assay in EngTreg format. (A) Representative flow plots and (B) bar graphs of CAR EngTregs activation based on CD137 and CD69 expression and LAP and GARP expression.

Selection of binders with optimal suppressive activity



CAR dependent suppression assay. (A) Representative suppression data from one CAR EngTreg candidate. (B) Suppression for 8 candidates CAREngTregs. Suppression was calculated as follows: % suppression = ((a-b)/a)x100, where "a" is the percentage of Tresp proliferation in the absence of Tsupp and "b" is the percentage of Tresp proliferation in the presence of Tsupp. % suppression when Tsupp were activated by irrelevant Ag was also subtracted.

RESULTS GNTI-932 is a Dual-Engineered Regulatory T Cell Therapy Product with T regulatory cell phenotype and function

Dual Engineering and production process of GNTI-932	GNTI-932 engineering imparts Treg phenotype	GNTI-932 reduces proliferation of Teff via antigen-specific stimulation
	GNTI-932 Phenotype	GNTI-932 cells inhibit the GNTI-932 cells inhibit the GNTI-932 maintain CAR proliferation of dependent suppressive function
GNTI-932 Production Process	A Binder 1 Binder 2 Mock Poly-EngTregs CAR-EngTregs CAR-EngTregs B CD25 CTLA-4 ■ Mock	proliferation of Teff cells during TCR mediatedproliferation of Teff during CAR mediateddependent suppressive function post prednisolone or post-



GNT932 research grade manufacturing process and end of process purity. (A) Generation of highly pure CAR-EngTregs. Representative donor purity shown based on FOXP3⁺Marker+ and FOXP3+CAR+. (B) On-target integration analysis at the end of process have close to 100% total WT+INDEL+HDR%, with high HDR purity at both FOXP3 and TRAC.



GNTI-932 cells possess Tregs phenotype with CD127Low and CD25+, CD27⁺CD70⁻ (A) and express Treg markers that demonstrate function and stability (CTLA-4, TNFRII, EOS) (B). Mock cells are gated on CD4+ cells, and GNTI-932 cells are gated on Marker * CAR*FOXP3* cells. (C) GNTI-932 upregulated activation markers CD69 /CD137 and Treg functional markers LAP/GARP upon CAR-target X engagement



GNTI-932 are functional and suppress T effector (Tresp) proliferation post (A) TCR based activation (aCD3/CD28), (B) Antigen dependent activation via CAR-Target X engagement and following challenge (C) with Predinisolone (standard of care treatment for IBD) or a cocktail of pro-inflammatory cytokines (TNFq, IL-6, IL-6, IL-23) found in inflamed tissue of IBD patients.

RESULTS | Murine CAR-mEngTregs GNTI-932 surrogate localize in the intestine and improve outcomes in vivo efficacy models



CONCLUSIONS

•A multi-phase CAR screening strategy facilitated high-throughput discovery and selection of optimal binders for maintaining Treg phenotype and functionality. •GNTI-932 exhibits key Treg characteristics and demonstrates antigen-dependent suppressive function against effector T cells while maintaining stability under inflammatory conditions and

standard IBD treatment.

• Preclinical studies using murine surrogates of GNTI-932 demonstrated effective gut localization, proliferation at the site of inflammation, and significant therapeutic benefit in experimental colitis models, highlighting the potential for in vivo efficacy.

•In summary, Targeting IBD with CAR-engineered Tregs (GNTI-932) offers a novel approach to overcome the limitations of polyclonal Treg therapy by enhancing target specificity and persistence through its unique design.

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We make Tregs. Better.