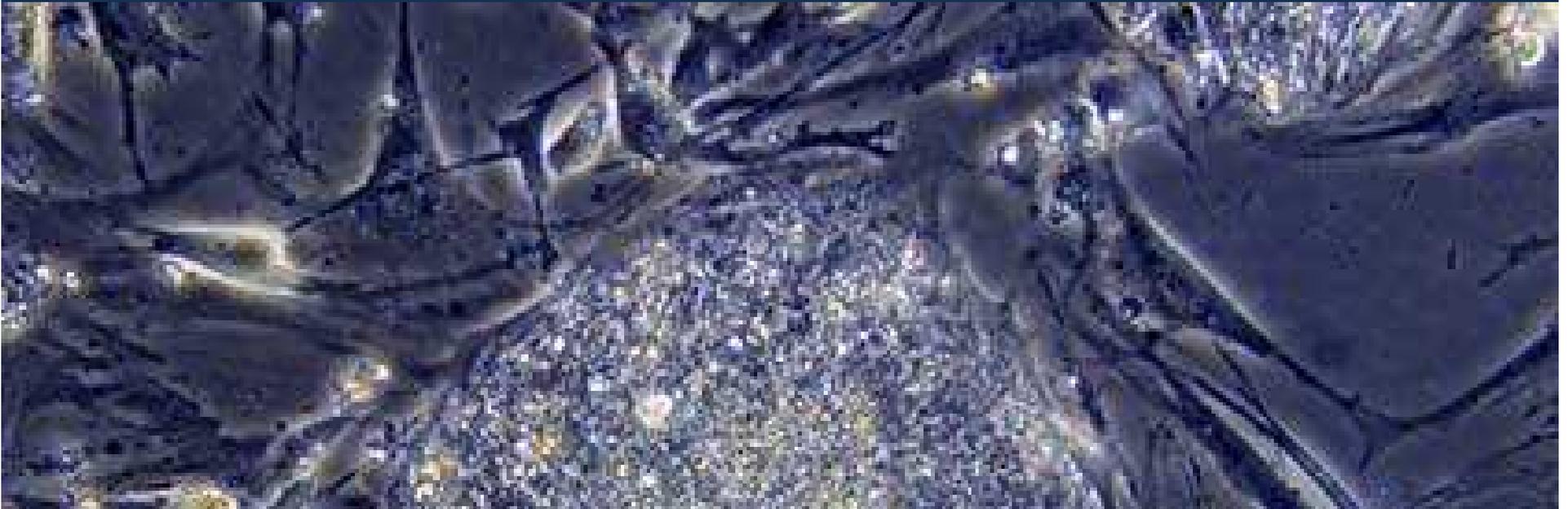


Venture Funding for Regenerative Medicine Companies

Gregory A. Bonfiglio
Proteus Venture Partners

CIRM ICOC Loan Task Force – January 16, 2008



Agenda

- Proteus Venture Partners: Overview
 - Who Are We?
- Funding Environment for RM Companies
 - Where Are We And How Did We Get Here?
 - Current Market Dynamics: Technology Push & Market Pull
- Access To Venture Capital
 - Funding & Value Creation: The Valley of Death
 - Venture Capital Metrics: What Do VCs Want?
 - Typical Venture Terms: What Do VCs Get?

Proteus Fund: Summary

▪ Regenerative Medicine Fund

- Stage Agnostic
- Geographically Diverse
- Top Tier Venture Returns
- 1st Mover Advantage

▪ Technology Focus

- Cell Therapies
- Tissue Engineering
- Tools & Enabling Devices
- Aesthetic Medicine

▪ Addressing Large Markets

- Aging Population
- Large Unmet Medical Needs
- Increasing Healthcare Spend

▪ World Class Team

- Core Team with Complementary Skills
- Deep Domain Expertise
- Outstanding SAB & Strategic Partners
- Industry Visibility & Leadership

▪ Disciplined Investment Approach

- Proprietary Deal Flow
- Rigorous Due Diligence
- Build Value Thru Active Management
- Timely Exits

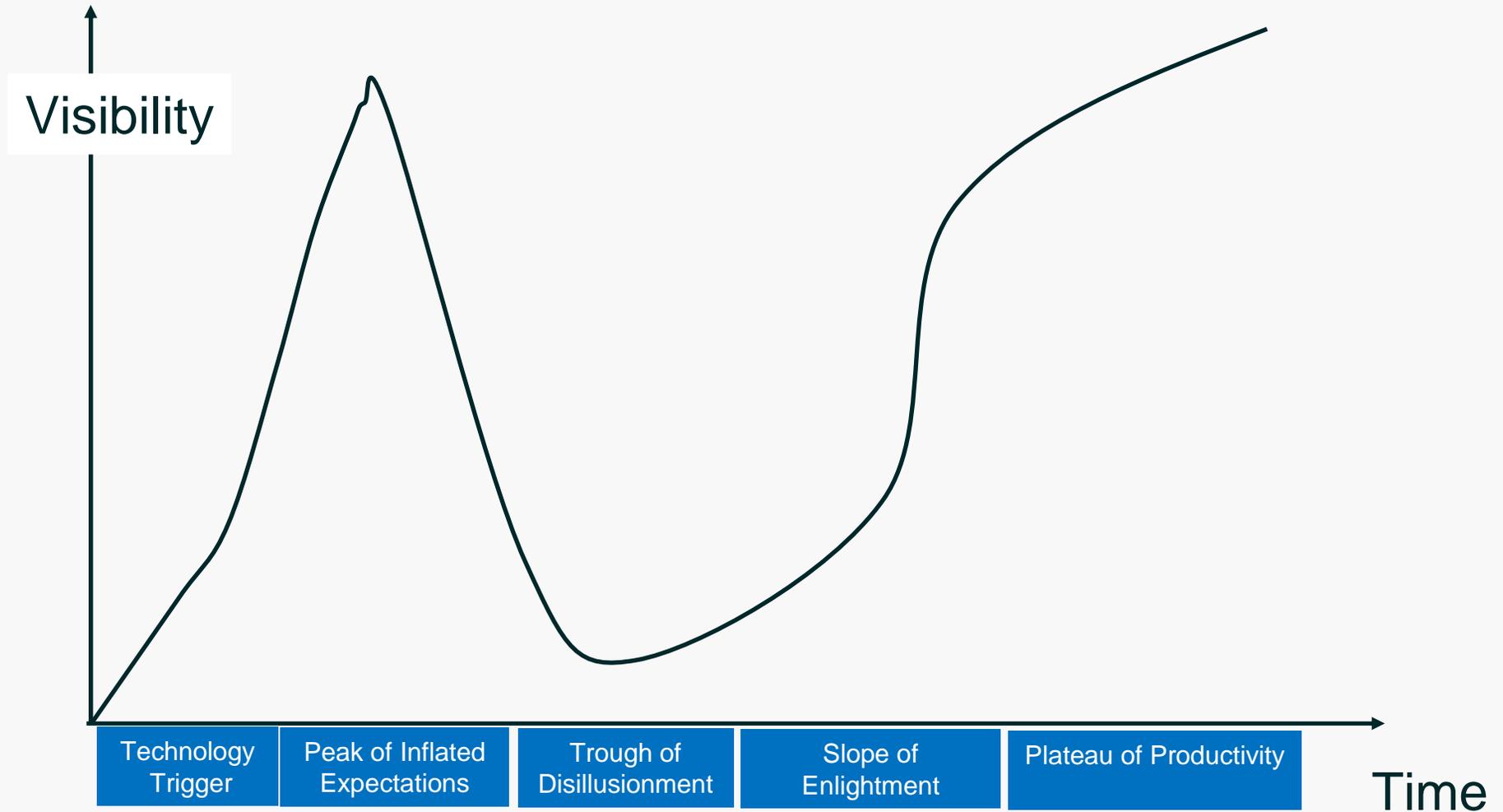
▪ Target Investments

- Outstanding Technology & Team
- Defensible IP
- Viable Business Model
- Near Term Path to Clinic or Revenues

Funding Environment for RM Companies

- Where Are We And How Did We Get Here?
- Current Market Dynamics: Technology Push & Market Pull

Gartner's Hype Cycle of Emerging Technologies



Funding Environment: 1st Cycle 1985-2002

- **Cell Therapies & Tissue Engineering Were Hot In The Early 1990s**
 - VCs Funded The Sector Aggressively
 - Research Projects
 - Grand Business Visions
- **Many New Companies Created**
 - ATS, Curis, Systemix, Bresagen, Organogenesis
- **Products Launched**
 - Carticel; Apligraf; Dermagraf
- **Market Peaked in 2000**
 - 3000 jobs; 73 companies; total market cap of \$2.6B
 - Time Magazine: **“TE Number 1 Job in USA”**

Funding Environment: 1st Cycle 1985-2002

- **Market Collapsed in 2001**
 - ATS, Organogenesis filed Bk in 2002
- **Political Controversy Over hESCs**
- **Many High Profile Failures or Retrenchments**
 - ATS, Curis, PPL, Bresagen, BioTransplant, Organogenesis
- **VCs Withdrew Support For the Sector**
 - Overall Healthcare Funding Remained Strong
 - But RM Companies Got **Under 2%**
 - Many Big VCs had **Nuclear Bombs** in Portfolio

Funding Environment: A New Cycle

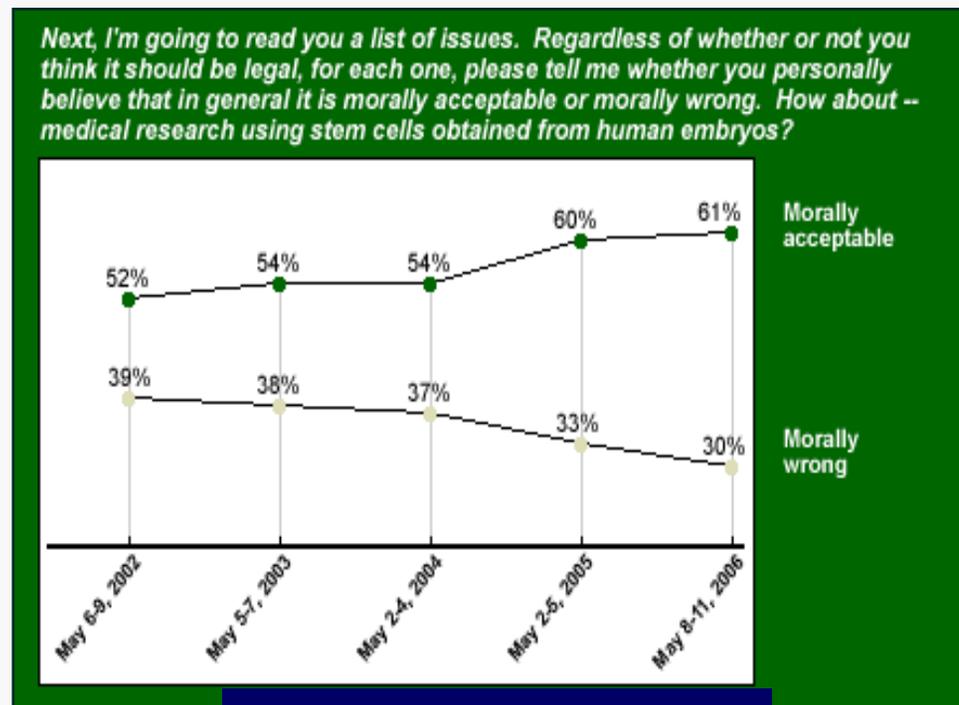
■ Gov't Funding Increasing

- California Prop 71 & Wisc, NJ, NY, MD, etc
- UK; Singapore; Australia; Canada

■ Political Risk Declining

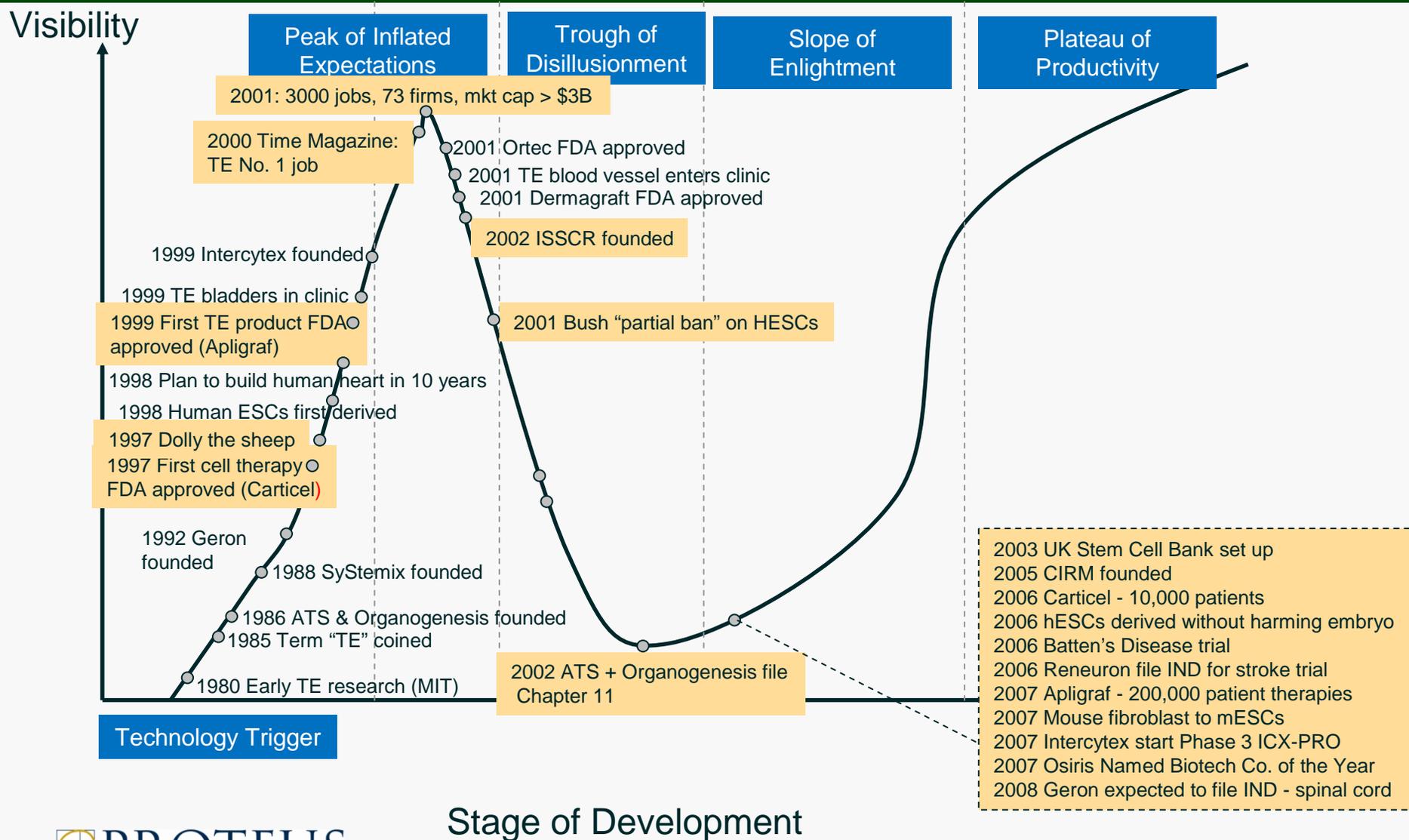
■ RM Market Maturing

- Technology Advancing
- Products Entering the Market

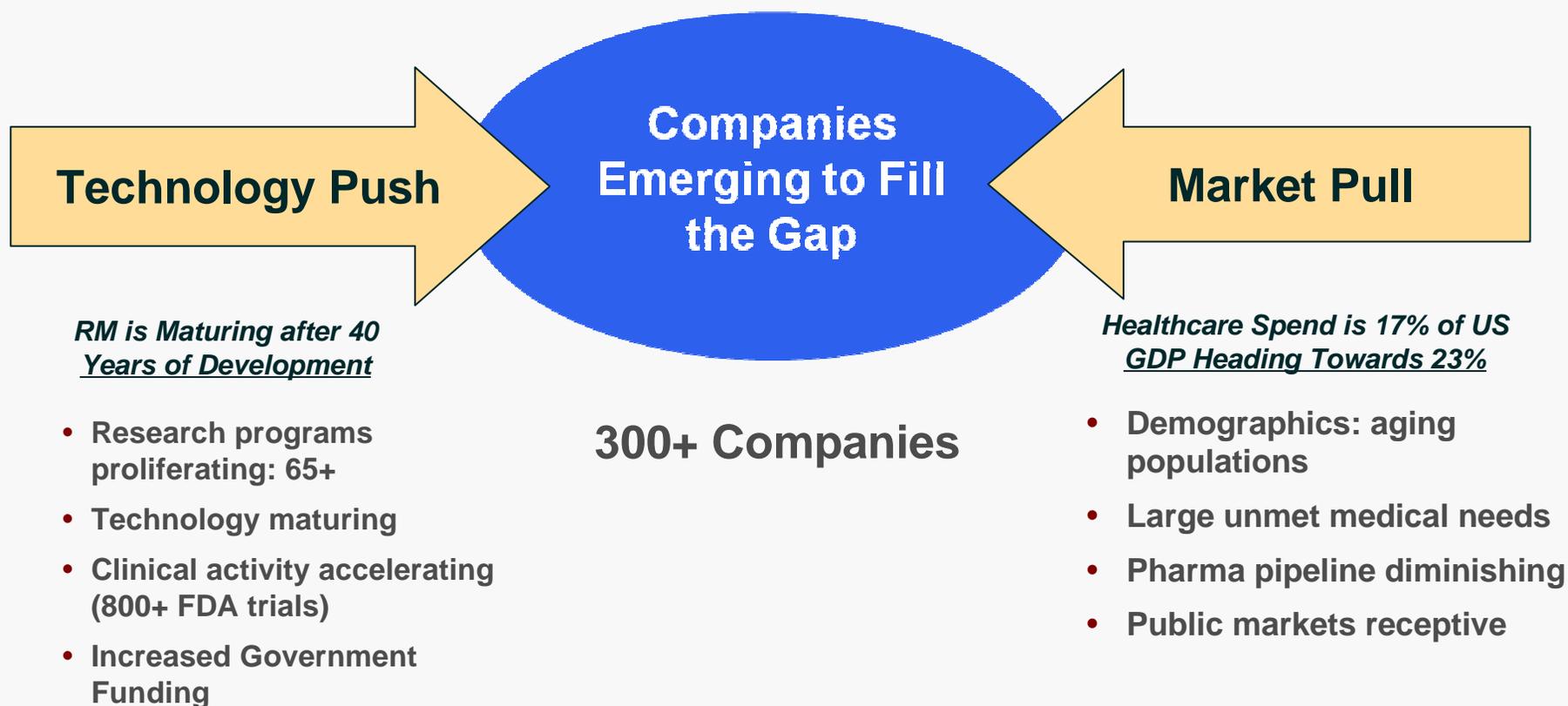


Stem Cell Poll 2006

Technology Push: Beginning the 2nd Half of the Gartner Curve



Funding Environment: Market Dynamics



The Market is at a Crucial Inflection Point

Technology Push: RM Programs Proliferating

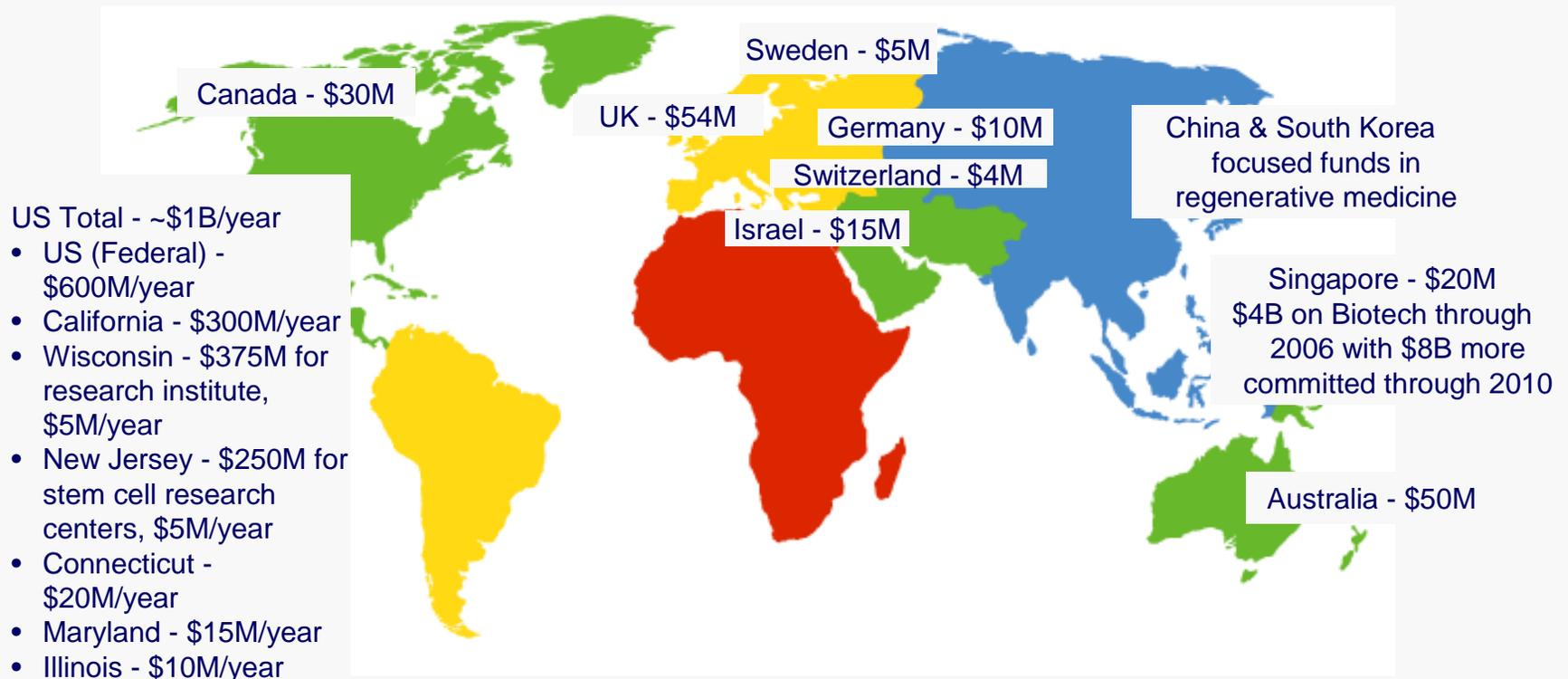
Over 65+ Regenerative Medicine Programs Nationwide



Source: TFG Analysis

Technology Push: Increased Gov't Funding

Worldwide Funding for RM Expected to Reach \$14B Worldwide in 10 years



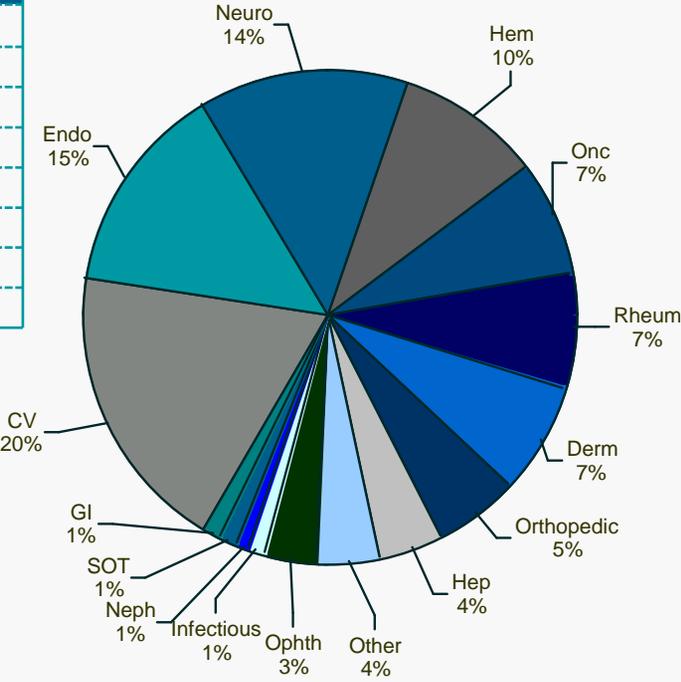
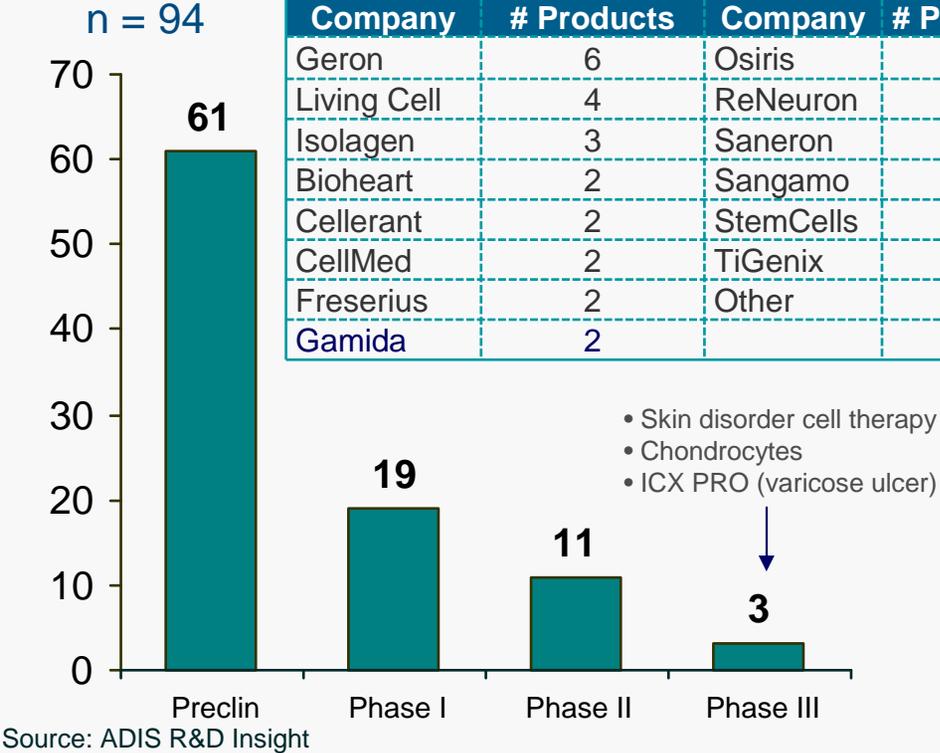
Source: Media Articles, Navigant, TFG Analysis

Technology Push: Products Entering the Market

90+ Programs In Development – 30+ Clinical Trials – 25+ Products Launched

Products in Development By Stage

Products in Devel. by Therapeutic Area



RM Revenues Are Ramping: \$130M in 2001 to \$1.15B in 2006

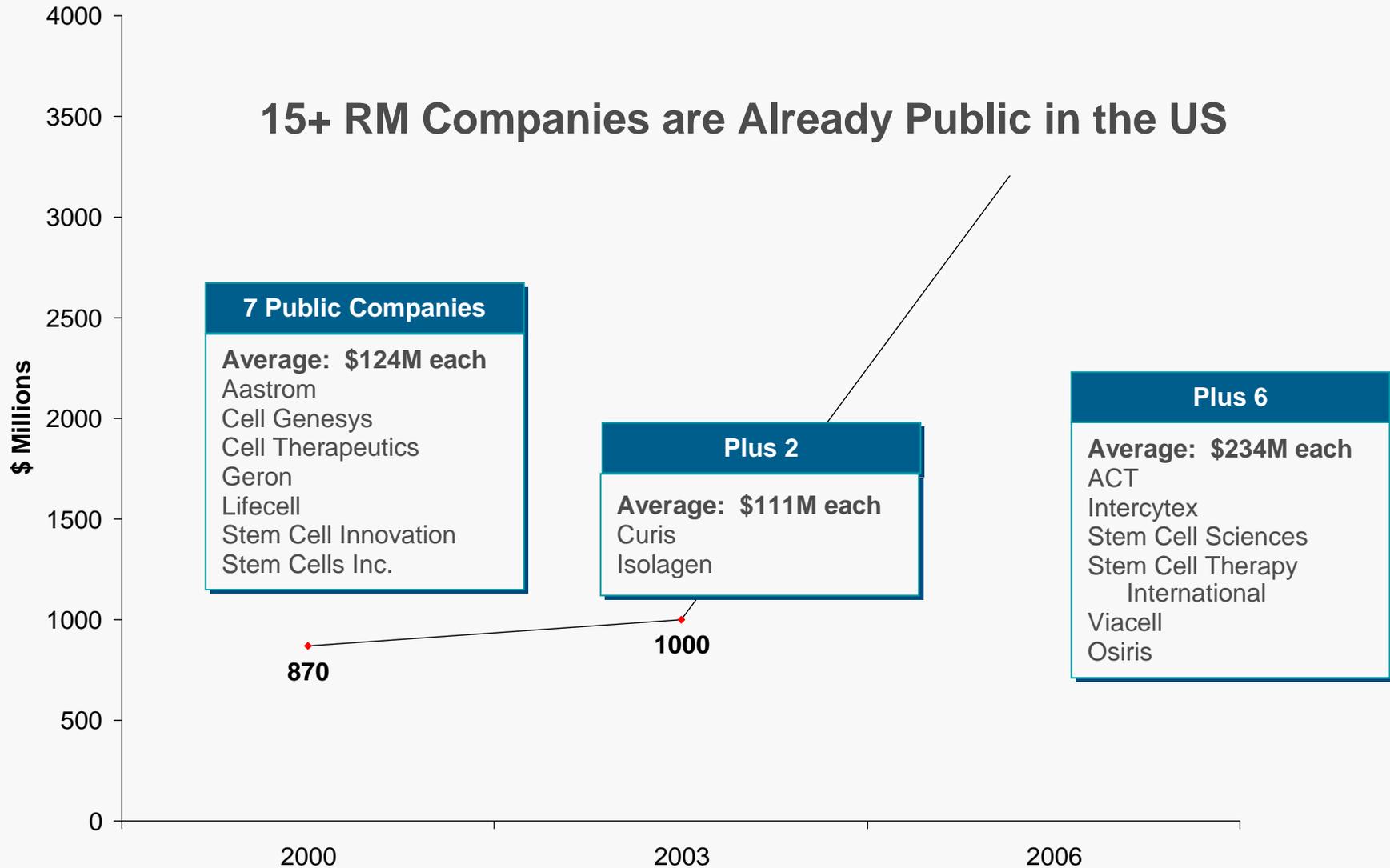
| Company | Product | Market | 2001 (\$US M) | 2005 (\$USM) | 2006 (\$USM) |
|------------------------|---|-----------------------------------|------------------|-----------------|------------------|
| Medtronic | INFUSE | BMP (US) | 0 | 500.0* | 570 |
| LifeCell | AlloDerm, Cymetra, Repliform, GraftJacket, AllocraftDBM | Skin, Urology, Bone (US) | 26.6 | 88.9 | 136.8 |
| Genzyme | Carticel | Cartilage (US) | 18.4 | 66 | 67.5 |
| Tutogen | Tutoplast | Bone | 12.8 | 31.9 | 37.9 |
| Organogenesis | Apligraf | Skin (US) | 20.0* | 40.0* | 45.0* |
| Interpore (Biomet) | AGF, Pro Osteon, Bone Plast | Orthobiologics | 20.1 | 21.0* | 22.0* |
| Integra Life Sciences | Neuragen, Integra, Newdeal, Duragen, Collagen Sponge | Skin, Orthopedics (US) | 8.7 | 135 | 166 |
| Biotissue technologies | BioSeed-S, BioSeed-C, BioSeed Oral Bone | Skin, Cartilage, Bone (GER) | 1.3 | 2.0* | 2.0* |
| Co.don | Chondrotransplant | Cartilage | 1.6 | 0.4 | 0.6* |
| Stryker | OP-1 | BMP (US) | 0.5* | 23.0* | 25.0* |
| Orquest (DePuy) | Healos | Bone, Cartilage, Soft Tissue (US) | 1.1* | 2.0* | 2.0* |
| ReGen | Collagen Meniscus Implant | Cartilage (US Trials) | 0.5 | 0.6 | 0.6 |
| Isolagen | Autologous Fibroblasts | Skin | 0 | 8.8 | 6.1 |
| Others | Various | Various | 10 | 40.0* | 60* |
| Total | | | ~\$130M | ~\$900M | ~\$1,150M |

Source: PJB Publications 2003; Equity Research; Company websites; SEC; *=Estimated

New RM Companies Forming

| Cell Therapy | Cell Therapy (Cont.) | Genomics/Tools | Tissue Engineering | Aesthetic Medicine |
|-------------------------------|-------------------------|-----------------------|------------------------------|------------------------|
| Advanced Cell Technology | CytoMatrix | Aclara Biosciences | Aastrom Biosciences | Allergan |
| Alexion Pharmaceuticals | Cytori Therapeutics | Affymetrix | Befutur Biotechnologies | Artefill |
| Allcells, LLC | Dendreon | Agilent Technologies | BioHeart Inc. | Artes Medical, Inc. |
| Amcell, Inc. | Desmos, Inc. | BioAnalyte | BioMimetic Pharmaceuticals | Candela Corporation |
| Amcyte, Inc. | Diacrin, Inc. | Caliper Life Sciences | BioTissue Technologies GmbH | Cynosure Inc. |
| Anergan | Educell d.o.o | Celera Genomics | Cellect Bio | Galderma |
| Argos Therapeutics | ES Cell International | CuraGen Corporation | Chrysalis BioTechnology | Genaera |
| Athersys | Gamida Cell | Diversa Corporation | Co.Don | Inamed |
| BioE | GenOWay | Geneos | CryoLife | Intercytex |
| Biohybrid Technologies | Geron | GeneLogic | Cytograft Tissue Engineering | Karo Bio |
| BioMark International | Histostem | HGSI | Dentigenix | Ligand |
| Cell Transplant International | Interpore International | Illumina, Inc. | Encelle | MediCor |
| Cellartis AB | Islet Technology, Inc. | Lab Key | ExacTech | Mentor |
| Cellerix | Ixon Biotech | Lexicon | Kourion Therapeutics | Milbar Labs |
| Cellex Biosciences | Medra, Inc. | Luminex Corporation | MG Biotherapeutics | Nastech |
| Cellpro, Inc. | Nephros Therapeutics | Myriad Genetics | Neuronyx Inc. | Neurogen |
| CepTor | Orion Biosolutions | Nanogen, Inc. | Orthovita | OrthoNeutrogena |
| Chromos | Progenitor Cell Therapy | Orchid Biosciences | Osiris Therapeutics | Pherin Pharmaceuticals |
| Circe Biomedical, Inc. | ReNeuron | Perkin Elmer, Inc. | Osteotech | Predix Pharma |
| Collagen Corporation | Stem Cell Technologies | Proteome Software | Regeneration Technologies | Phytopharm |
| Creative Biomolecules | StemCells, Inc. | Sage-N Research | Selective Genetics | Q-med |
| Cryolife, Inc. | Theravita Inc. | Sequenom | Thermogenesis | Sapphire Therapeutics |

Public Markets Increasingly Receptive to RM Companies



Source: Yahoo Finance; Company Websites; SEC

Public Markets Are Rewarding Clinical Progress

| Company | Product / Stage | Market | Revenue | Mkt Cap Range / M&A |
|----------------------------|---|---|---------|--|
| AnorMED | Mozobil, Phase III | Hematopoietic stem cell transplantation | < \$1M | Acquisition by Genzyme: \$580M (10/2006) |
| Aastrom Biosciences | Tissue Repair Cell (TRC) technology: Ph III; Ph IIb Ph I/II | bone regen-osteonecrosis of the femoral head critical limb ischemia non-union fracture | < \$1M | \$ 140M (\$128 - \$202M) |
| Dendreon | Provenge; FDA review (prostate cancer) Neuvenge: Ph I (breast, ovarian, colon cancer) | Cellular immunotherapy, monoclonal antibody, and small molecule product candidates to treat various cancers | < \$1M | \$ 640M (\$301M - \$ 2.1B) |
| Geron | Filing IND for spinal cord early 2008 | treatment of cancer, spinal cord injury, heart failure, diabetes, and HIV/AIDS | < \$4M | \$ 551M (\$425M - \$ 753M) |
| Intercytex | ICX-PRO, Ph III – in Ph III for VLU's & Ph II for DFUs VAVELTA®, Ph II ICX-TRC, Ph II | Stimulate active repair in chronic wounds Facial rejuvenation Hair regeneration | < \$1M | \$ 90M (LSE-AIM mkt) |
| LifeCell | AlloDerm ; GraftJacket; AlloCraft | Tissue-based prods for reconstructive, orthopedic, and urogynecologic surgical procedures | \$ 166M | \$1.3B \$ 650M - \$1.3B) |
| Osiris | Prochymal, Ph III & II Provacel, a phase I | GVHD & Crohn's Disease Acute MI | \$10M | \$ 377M (\$290M - \$847M) |
| ViaCell | UC storage Pre-clinical work in cancer, cardiac & diabetes | Collecting and preserving stem cells from umbilical cord blood | \$ 59M | \$ 300 (purchased by PerkinElmer 10/02/07 – 52% premium) |

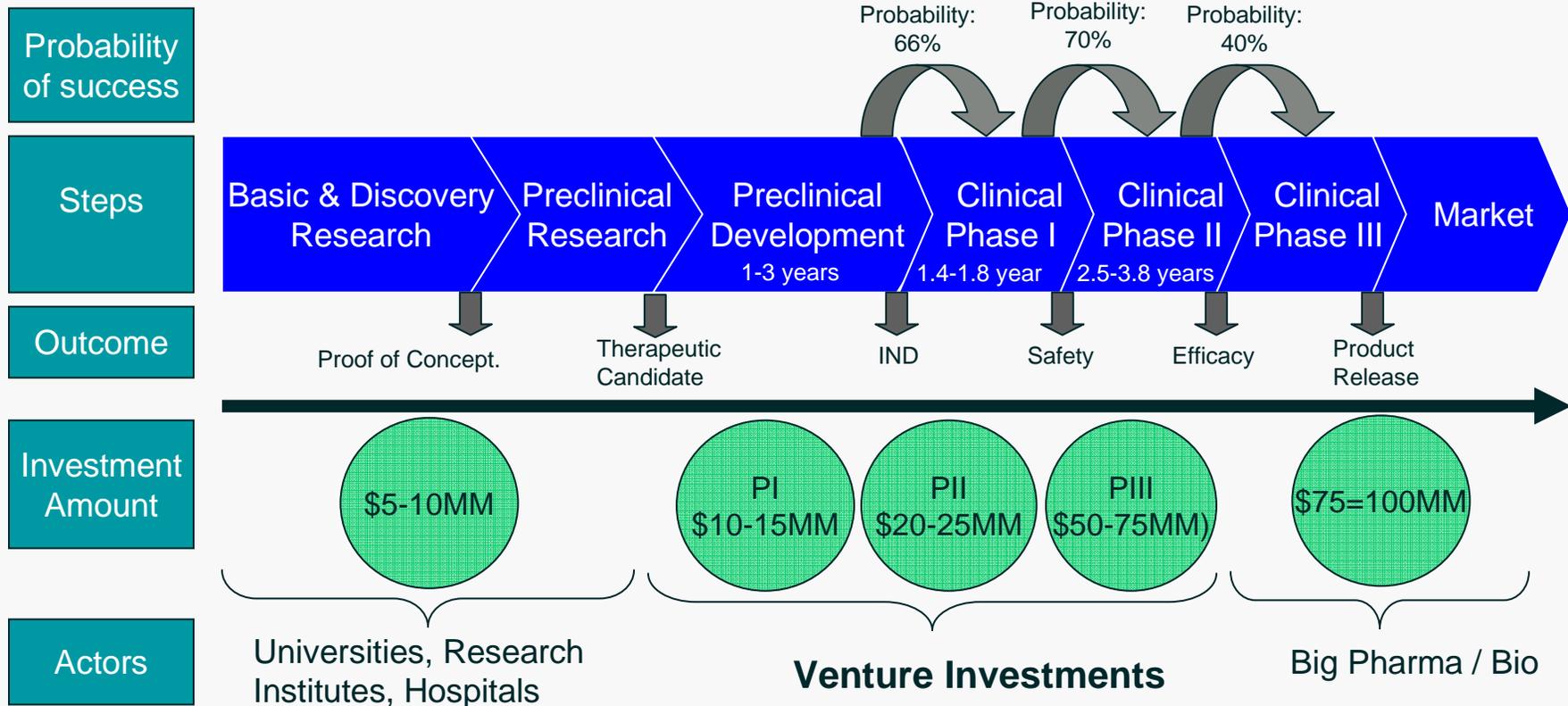
Venture Capitalists Getting Back in the Game



RM Companies - Access To Venture Capital

- Funding & Value Creation: The Valley of Death
- Venture Capital Metrics: What Do VCs Want?
- Typical Venture Terms: What Do VCs Get?

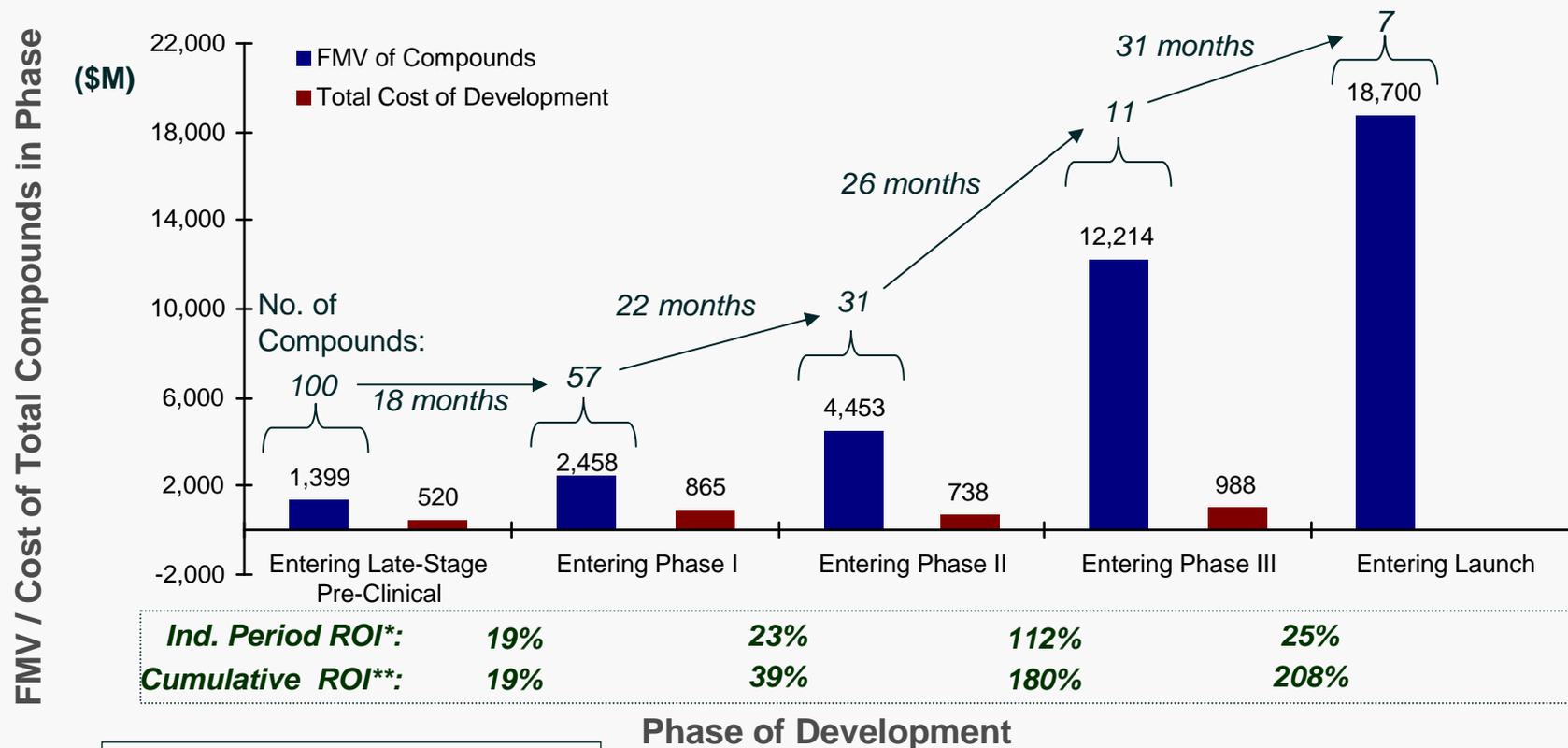
RM Product Development Timeline



Key Metrics:

- Average Time to Market: 10-15 Years
- Average Costs: \$1B
- Failure Rate: @90%
- Less than 30% of approved drugs recoup development costs

Valuation Analysis On Risk Adjusted NPV



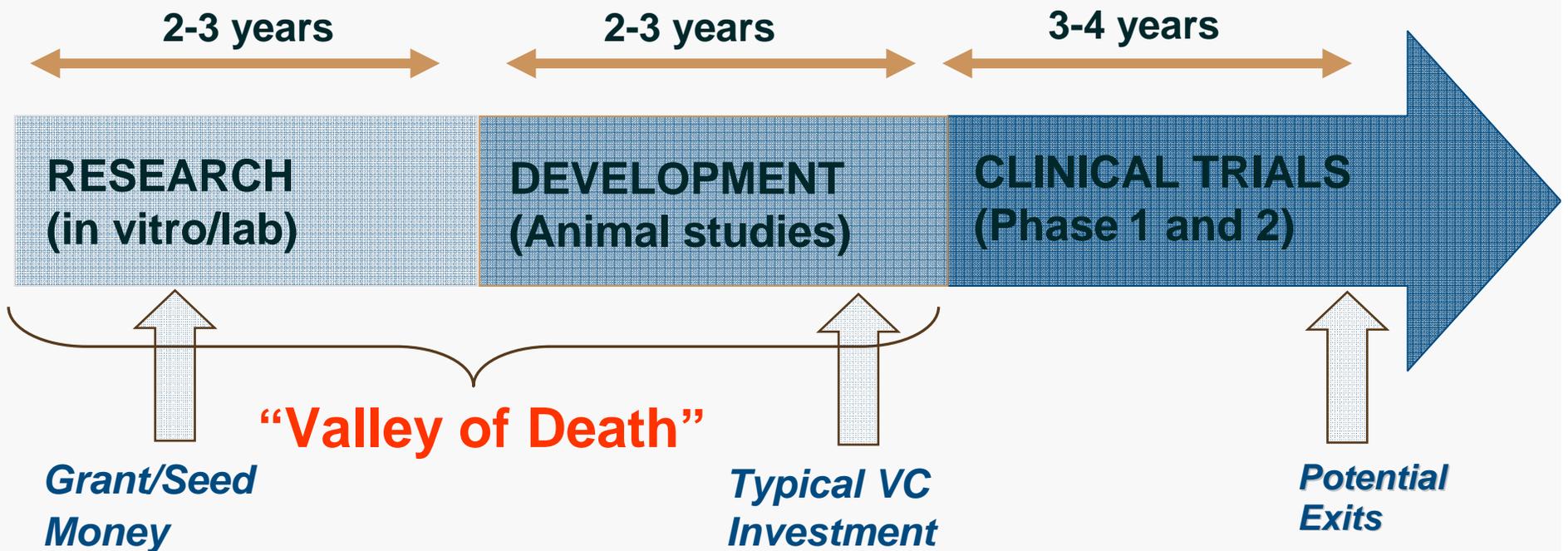
FMV = ~5x peak year revenues of \$500M discounted by probability of launching

Source: ADIS, Pharma Projects, Fortis Bank, Paraxel, Jagle, Lehman Brothers, Journal of Health Economics 22:151-185 (2003), TFG Estimates

RM Company Funding Vacuum: *The Valley of Death*

Time to *Start of Phase 3 trials* can be up to *7-10 years*

Time to *1st Venture Interest* can be up to *5-6 Years*



VC Metrics: What Do VCs Want?

Proprietary Commercial Technology

- Great Science ≠ Great Business
- Core Research Completed
- Proof Of Concept Established

▪ **Strong Management Team**

- Board
- SAB

▪ **Solid Intellectual Property Position**

- Freedom To Operate
- Defensible IP (Patents & Trade Secrets)

▪ **Large Market Opportunity**

- Target markets > \$1B/year

▪ **Defensible Business Model**

- Allogeneic v. Autologous
- Product v. Service

▪ **Differentiation**

- How Is Your Approach Different?
- Why Is It Better?

▪ **Exit Strategy**

- IPO Vs. M&A (Attractive Products For Acquirer)
- Realistic Timeframe

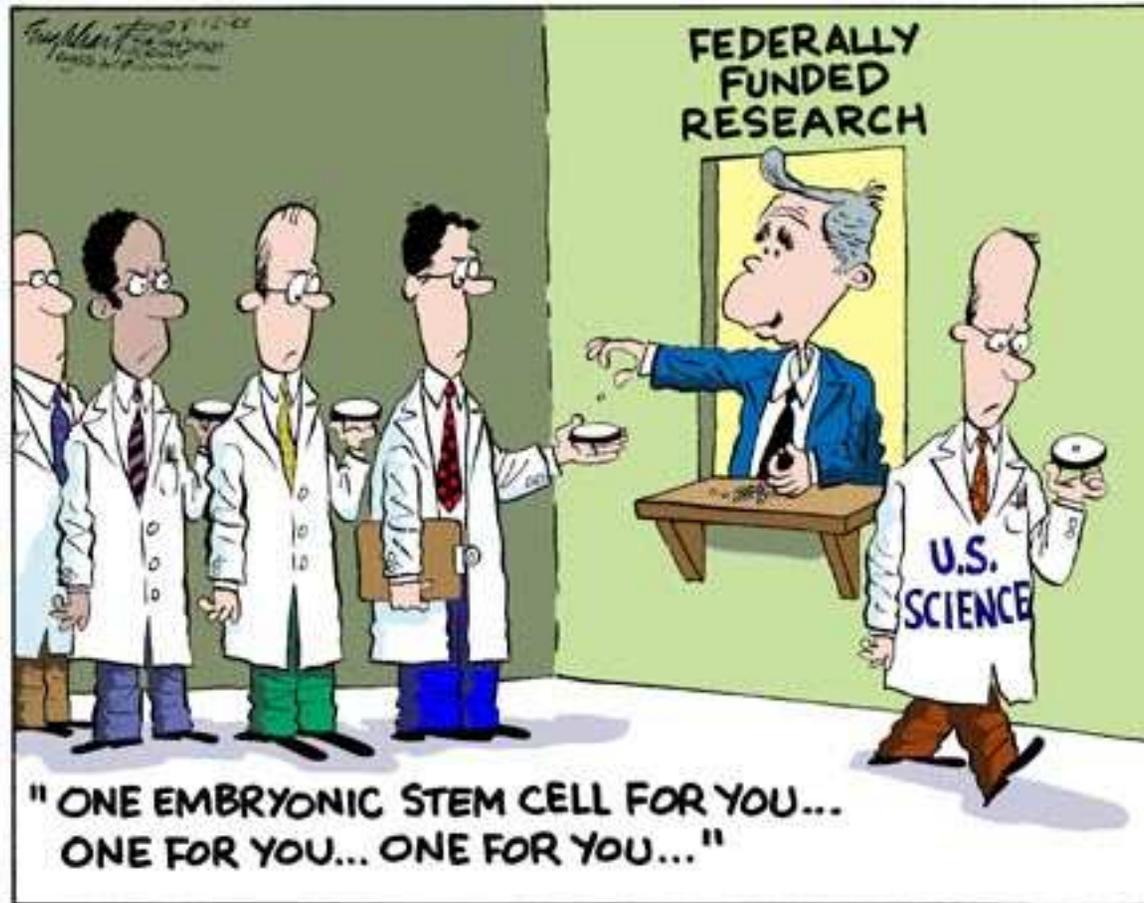
▪ **Acceptable Risk/Return Profile**

- Multiple Chances To Win

Typical VC Terms: What Do VCs Get?

- **Valuation**
 - % Ownership; Dilution
- **Dividend Rate: 8%**
- **Preferred Return: 1X-3X**
- **Anti-Dilution Protection**
 - Full Ratchet; Weighted average
- **Protective Provisions**
- **BOD Seat**
- **Participation Rights**
 - Right of First Refusal; Follow-on financings

The Final Word



Appendices

RM Commercialization Challenges

- Technology Issues
- Business Models
- IP Issues
- Regulatory Hurdles

Commercialization Challenges: Technology

R&D

- Creation and Characterization of Optimal Cells for Therapy
- Contaminant Free Cell Lines
- Development of Scaffolds & Matrices for Tissue Engineering
- Safe & Reliable Expansion
- Directed Differentiation
- Imaging Technology and Biological Markers to Track Cell Migration & Engraftment

Manufacturing

- Technologies for Scale-Up
 - Commercial Quantities of Product
 - Pathogen Free
 - Consistent Lots
- Reliable Preservation Methods
- Control CoGs
- Standardization in the Field

Commercialization Challenges: Business Models

Autologous Model

- **Using Pts Own Cells/ Tissue for Therapeutic Effect**
 - Personalized Medicine
- **Advantages:**
 - Easier Regulatory Path (GTP)
 - No Immune Response
- **Challenges:**
 - Doesn't Scale
 - COGS

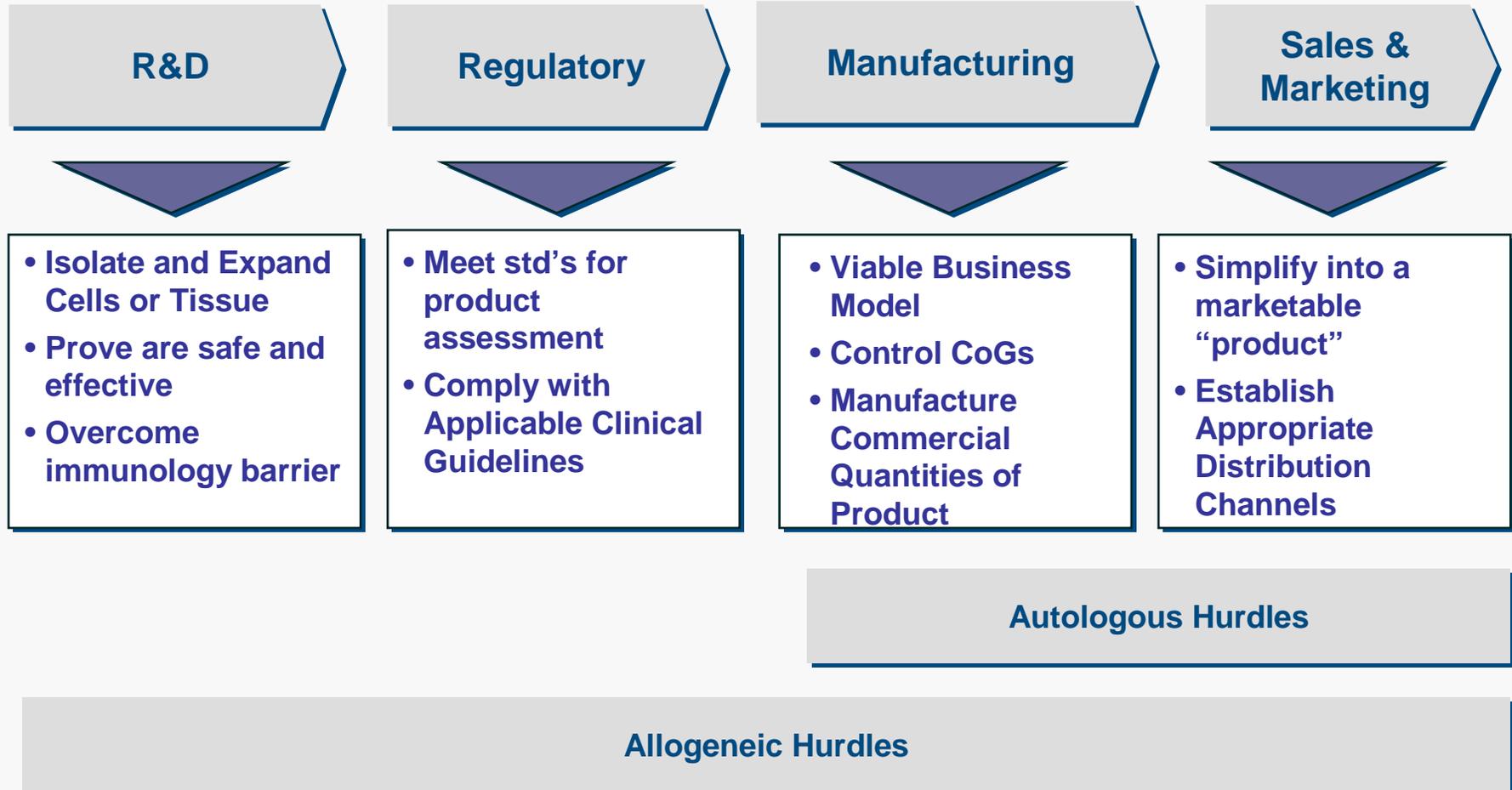
Allogeneic Model

- **Universal Cells in a Bottle**
 - Big Pharma “Drug Model”
- **Advantages:**
 - Scalable
 - Low COGS
- **Challenges:**
 - More Difficult Regulatory Path
 - Immune Response

Service vs. Product

RM Business Models: *Major Hurdles*

Commercialization Challenges: Value Chain Perspective



RM Business Models: *Autologous v. Allogeneic*

Moving From Core Technology to Commercial Product is a Major Challenge

**Broad Product &
Large Patient
Base**

Flawed Model?

- Therapeutic benefit must be extraordinary
- Cost structure is not scalable
- Competing with lower cost therapy
- High risk of substitution & relatively low barriers to competitive entry

Large Pharma Model

- Low COGS: Cost structure is scalable
- Lower cost therapy targeted to large patient populations
- Can compete against biologics & possibly small molecules
- Immunogenicity is major issue

**Niche
Products &
Small Patient
Base**

Current Model

- Small populations with no current efficacious therapy
- “Salvage” therapies
- Can be profitable but is not scalable
- Creates strong relationships with caregivers and patients

Specialty Biotech Model

- Efficacious therapy will target populations with high unmet needs
- Moderate COGS
- Cost structure can possibly be spread across multiple diseases

Autologous

Allogeneic

Autologous Model: *Challenges Are Scale and Competition*

Autologous Promise

| | Promise | Reality | |
|---|---------|---------|---|
| Proven safe and efficacious cell source | ✓ | ✓ |  |
| Overcome immunology barrier | ✓ | ✓ | |
| Standards for product assessment | ✓ | ✓ | |
| Cooperate with regulatory authorities | ✓ | ✓ | |
| Achieve scalable cell expansion | ✓ | | |
| Simplify into a 'marketable' product | ✓ | | |

Multiple Business Models Emerge

- Therapeutic Product
 - Novocell
 - Aastrom
 - ACTC
- Device
 - Cytori
- Service
 - Viacell

**Regulatory Risks (FDA Approval) Are Lower,
But Costs & Competitive Risks Are High**

Allogeneic Model: *Promise of Scale & Marketable Product*

Allogeneic Promise

| | Promise | Reality | |
|---|---------|---------|--|
| Proven safe and efficacious cell source | ✓ | ? |  <u>Meet Minimum Hurdles</u> <ul style="list-style-type: none">• Immune Response is a unique allogeneic challenge• Regulatory hurdles are becoming clarified• Unique ethical / legislative issues arise with hESCs |
| Overcome immunology barrier | ✓ | ? | |
| Standards for product assessment | ✓ | ? | |
| Cooperate with regulatory authorities | ✓ | ? | |
| Achieve scalable cell expansion | ✓ | ? |  <u>Drive Broader Market Uptake</u> <ul style="list-style-type: none">• Expansion potential enables scalability• Simplicity will evolve over time• Reimbursement ultimately drives broad uptake as well |
| Simplify into a 'marketable' product | ✓ | ? | |

**Regulatory Risks Are Higher,
But So Are Barriers To Entry**

Commercialization Challenges: Other

Regulatory; IP; and Reimbursement

- **Regulatory Environment Needs Clarity**
 - FDA Standards for Safety & Efficacy
 - Standards & Guidelines Are Evolving
 - Cross Border Inconsistencies
- **IP Landscape Is Treacherous**
 - Large Patent Estates Concentrated in Few Entities
 - Inconsistent & Competing Patents: Invites Litigation
 - Need “Freedom To Operate” Opinions
- **Reimbursement Path Unclear**

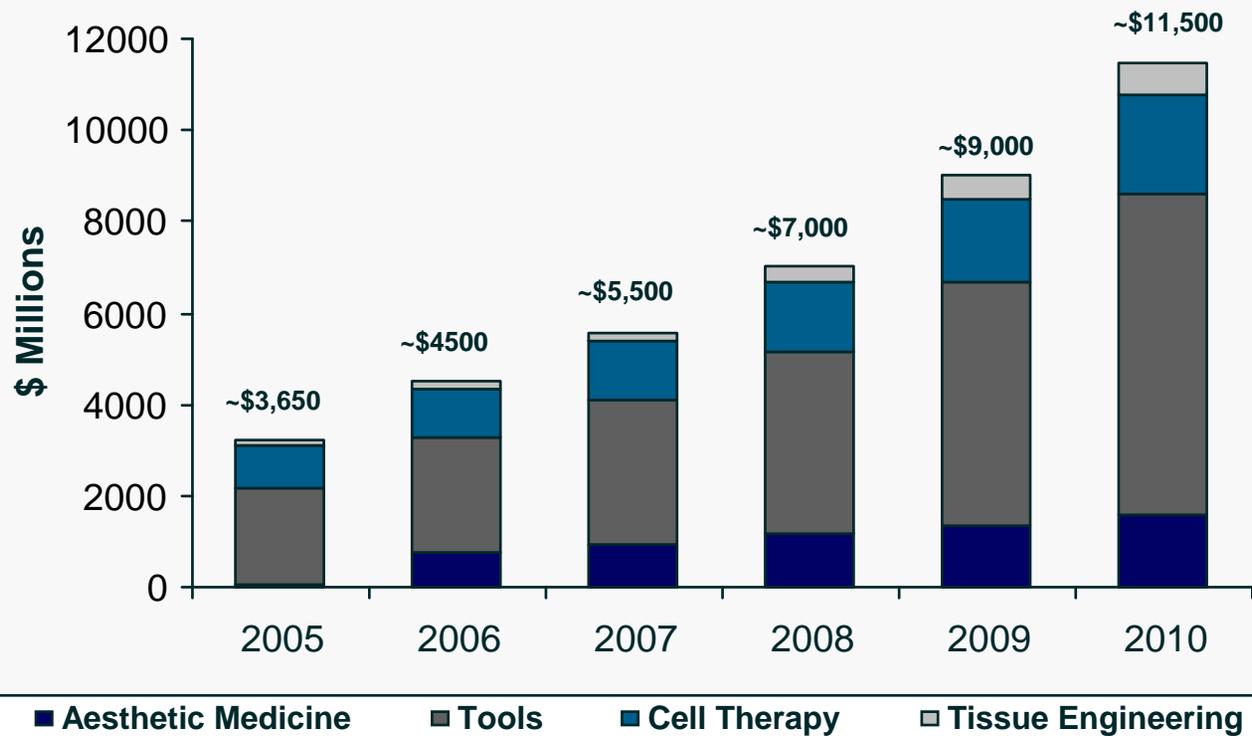
Commercialization Best Practices

- Business Model
 - Identify drivers of value and focus on these first
 - Manage to Valuation Milestones
- IP
 - File Provisional Patents
 - Protect Trade Secrets
 - Identify IP Risks Early
- Reimbursement: Address Early in Process (PI or PII, not PIII)
 - Begin conversations with *Centers for Medicare and Medicaid Services (CMS)*
- Remain sensitive to the external environment / ecosystem
 - Alternative approaches in the pipeline
 - Complementary approaches in the market or in the pipeline
 - Look for Partners

Total Regenerative Medicine Market

Market Over \$11.5B in 2010

| CAGR%, 2005-2010 | |
|------------------------------|--------------|
| Cell Therapy: | 19.3% |
| Tissue Engineering: | 36.9% |
| Aesthetic Medicine: | 21.9% |
| Regenerative Medicine Tools: | 28.3% |
| Total: | 25.7% |



Source: MedMarket Diligence, MII News, Global Industry Analysts, TFG Analysis

Recent M&A Transactions in Tissue Regeneration

| Date | Buyer | Target | Deal | Notes |
|--------|----------------|-------------------------|-------------------------------|--|
| Q3 '06 | Smith & Nephew | Osteobiologics Inc. | \$ 72M | <ul style="list-style-type: none"> • \$3M revenues • Purchase price 20x revenues |
| Q3 '06 | Orthoflix | Blackstone Medical Inc. | \$ 333M | <ul style="list-style-type: none"> • \$60M revenues • EBIT \$2M • Purchase price 5x revenues |
| Q1 '06 | Smith & Nephew | PLUS Orthopedics | \$ 889M | <ul style="list-style-type: none"> • \$300M revenues • EBIT \$36M in '06 • Purchase price 3x revenues |
| Q1 '06 | Kyphon | InnoSpine Inc. | \$ 2.5M upfront & \$27M | <ul style="list-style-type: none"> • Pre-revenue acquisition • Followed FDA approval |
| Q2 '04 | Biomet | Interpore Cross Int'l | \$ 280M | <ul style="list-style-type: none"> • \$68M revenues • Purchase price 4x revenues |
| Q2 '04 | Zimmer | Implex | \$ 108M | |

Mar 07: S&N announced \$1.1.B available for acquisitions

Source: RegenTec,
Public Market Data

RM Exit Strategies

Licensing: Key Metrics 2005-2006

| <i>Term</i> | <i>Mean</i> | <i>Median</i> |
|-------------------------|---------------|---------------|
| Upfront Payments | \$19M | \$32M |
| R&D Funding | \$26M | \$26M |
| Milestones | \$187M | \$244M |
| Equity | \$18M | \$30M |

N = 47 Deals; Source: Recap

Big Pharma May Fuel M&A Exits / Valuations

Deloitte & Touche Survey of Senior Execs of the Pharmaceutical Industry (Dec. 2006)

- *“More than 50 percent of large pharmaceutical revenues by 2015 will come from products and services they don't offer today.”*
- *“Large pharma & biotech need to adopt dramatic changes in their business strategies if they want to maintain their success.”*

▪ Case study: Pfizer's Pharmaceutical Sales (in M's) WSJ 10/23/07

| Drug | Treatment | 3Q '07 | 3Q '06 | Change |
|----------|----------------|--------|--------|--------|
| Lipitor | Cholesterol | 3,170 | 3,321 | -5% |
| Norvasc | Blood pressure | 640 | 1,208 | -47% |
| Celebrex | Painkiller | 577 | 537 | 8% |
| Lyrica | Nerve pain | 465 | 340 | 37% |
| Viagra | ED | 450 | 423 | 6% |
| Zyrtec | Allergies | 428 | 397 | 8% |
| Zoloft | Antidepressant | 124 | 459 | -73% |