



Inspired to Cure

January 2020

Disclaimer

This Presentation includes certain projections and forward-looking statements as of the date of this Presentation provided by Gamida Cell Ltd (the “company”). The information in this Presentation is current only as of its date and may have changed since that date. These projections and forward-looking statements include, but are not limited to, those regarding the company’s future financial position and results of operations, the company’s commercialization, marketing and manufacturing capabilities and strategy, the company’s intellectual property position, regulatory matters, market size and opportunity and the company’s estimates regarding expenses, future revenues, capital requirements and needs for additional financing. These projections and forward-looking statements are based on the beliefs of the company’s management as well as assumptions made and information currently available to the company. Such statements reflect the current views of the company with respect to future events and are subject to business, regulatory, economic and competitive risks, uncertainties, contingencies and assumptions about the company and its subsidiaries and investments, including, among other things, the development of its business, trends in the industry, the legal and regulatory framework for the industry and future expenditures. In light of these risks, uncertainties, contingencies and assumptions, the events or circumstances referred to in the forward-looking statements may not occur. None of the future projections, expectations, estimates or prospects in this presentation should be taken as forecasts or promises nor should they be taken as implying any indication, assurance or guarantee that the assumptions on which such future projections, expectations, estimates or prospects have been prepared are correct or exhaustive or, in the case of the assumptions, fully stated in the presentation. The actual results may vary from the anticipated results and the variations may be material.

Inspired to Cure with Next Generation Cell Therapies

We are pioneering new standards of care for patients with hematological malignancies



Omidubicel

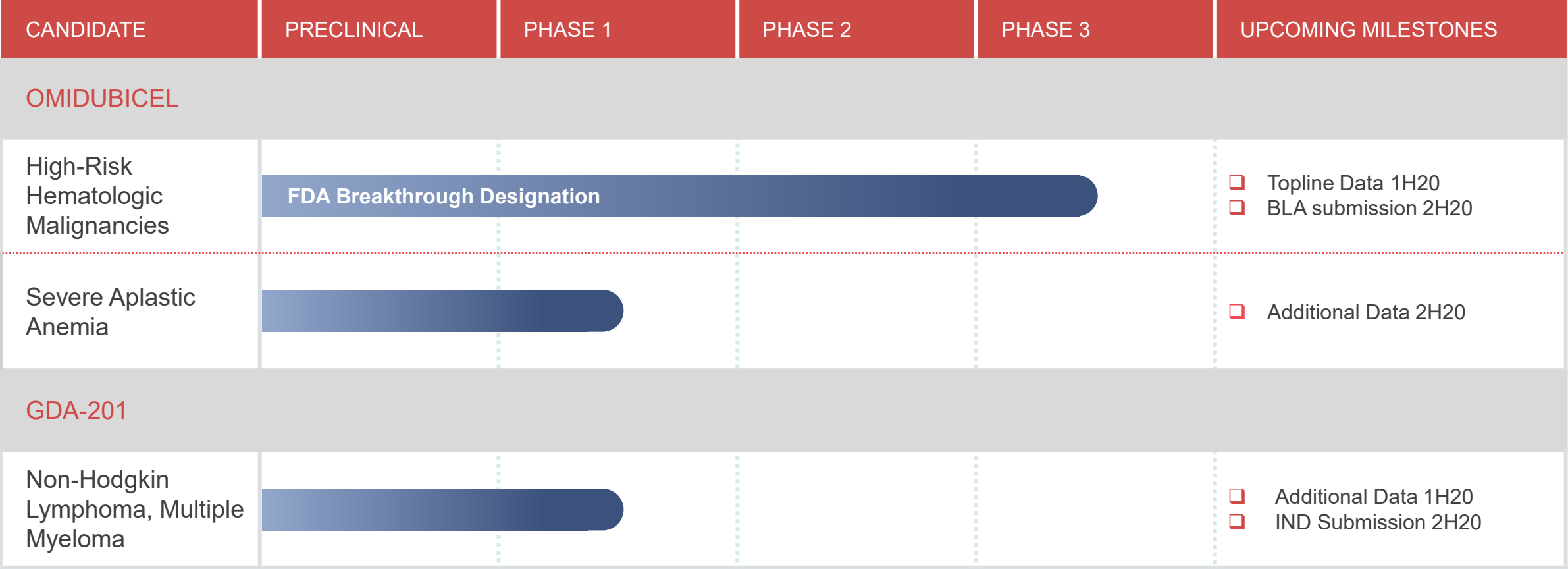
Holds curative potential for patients in need of bone marrow transplant



GDA-201

Harnesses the curative power of NK cells to treat non-Hodgkin lymphoma

Late-Stage Company with a Phase 3 Data Readout in 1H20



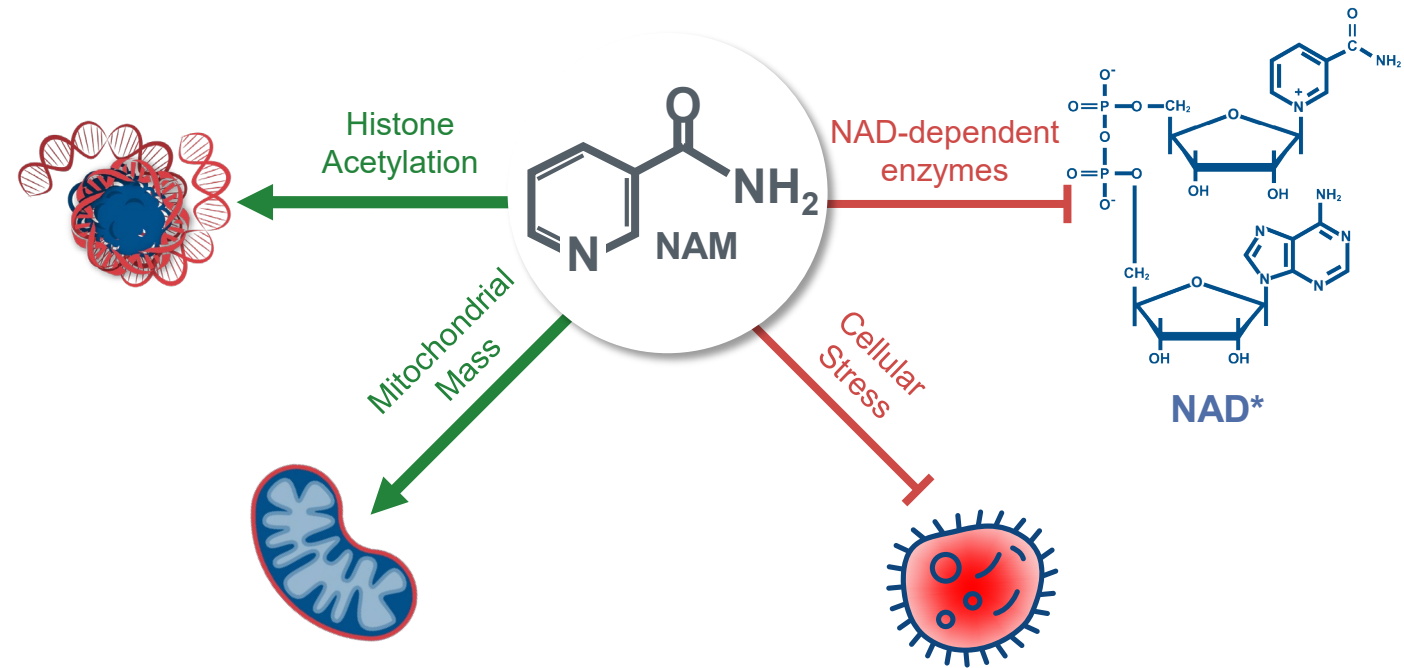
*The Aplastic Anemia Investigational New Drug (IND) application is currently filed with the FDA under the brand name, CordIn, which is the same investigational development candidate as omidubicel.

Technology Platform Designed to Enhance the Number and Functionality of Allogeneic Donor Cells

NAM has the potential to expand any cell type, including stem cells and natural killer (NK) cells

Importance of NAM

- Plays a key role in metabolic reprogramming of cells
- Preserves cellular functionality and phenotype during expansion



Omidubicel

A potentially curative treatment
for patients in need of a bone
marrow transplant

gamida Cell



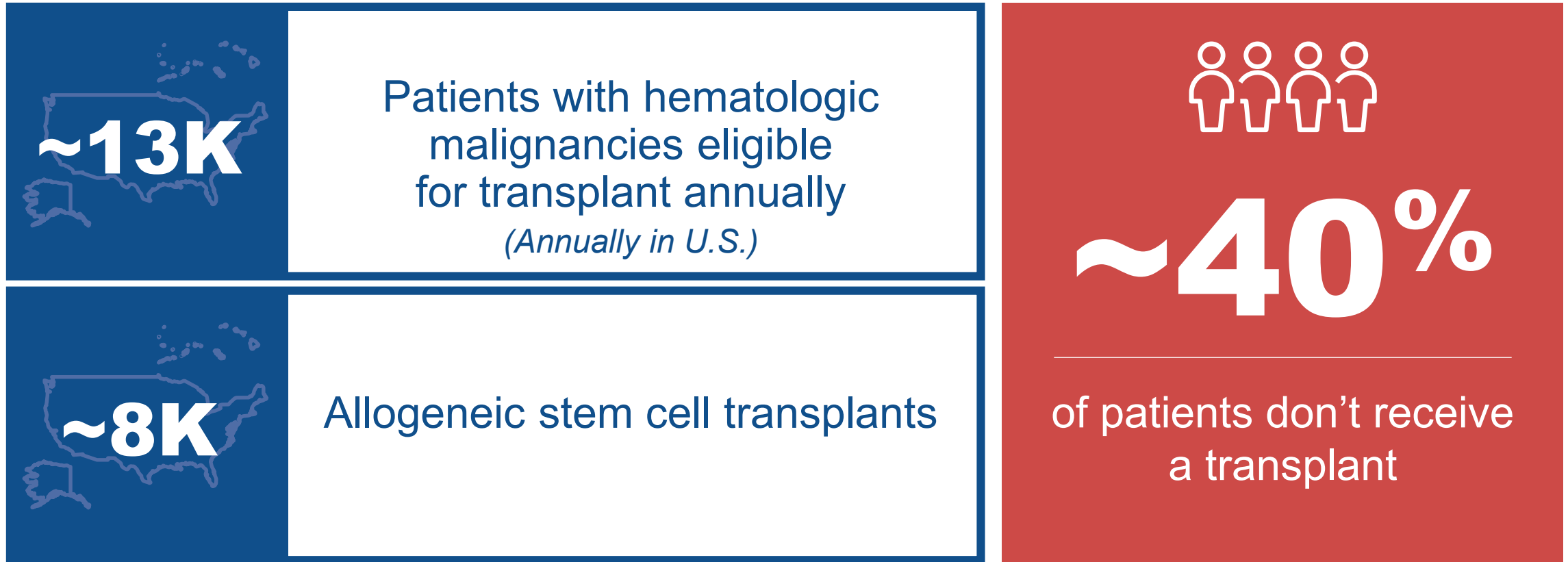
Meet Stacey

Stacey participated in the first clinical study of omidubicel at Duke University Medical Center after being diagnosed with AML. She is now eight years post-transplant.

"My ultimate goal was I wanted to live. We were ever so thankful to hear that there was a possible opportunity for me in a trial going on at Duke University."

This is one patient and results may not be indicative. Omidubicel is investigational and safety and efficacy have not been established by any agency.

Need for Innovation in Bone Marrow Transplant



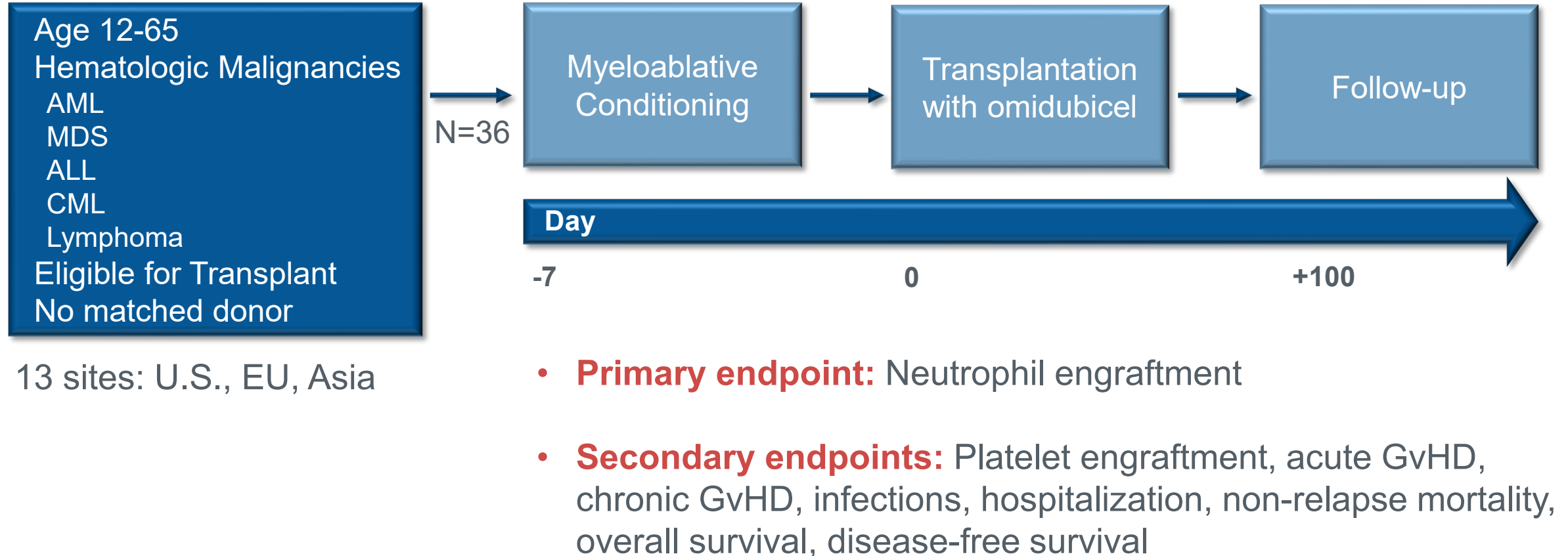
Internal Market Research Studies and Data Analysis, https://bloodcell.transplant.hrsa.gov/about/general_faqs/index.html.

There Is a Significant Population That Omidubicel Can Address

~13,000 patients with hematologic malignancies are eligible for transplant annually

		Patients	Challenges		Unmet Need
Omidubicel opportunity	Not Matched / Not Referred	5,200	<ul style="list-style-type: none">Numerous including:Access to careAccess to graft source	➔	Expand Access
	Matched Unrelated	5,200	<ul style="list-style-type: none">Availability of graft sourceQuality of graft sourceTime to engraftmentRisk of GvHDPotency of GvL effect	➔	Improve Outcomes
	Haploidentical				
	Cord Blood				
	Matched Related	2,600	<ul style="list-style-type: none">Availability of sibling donor		

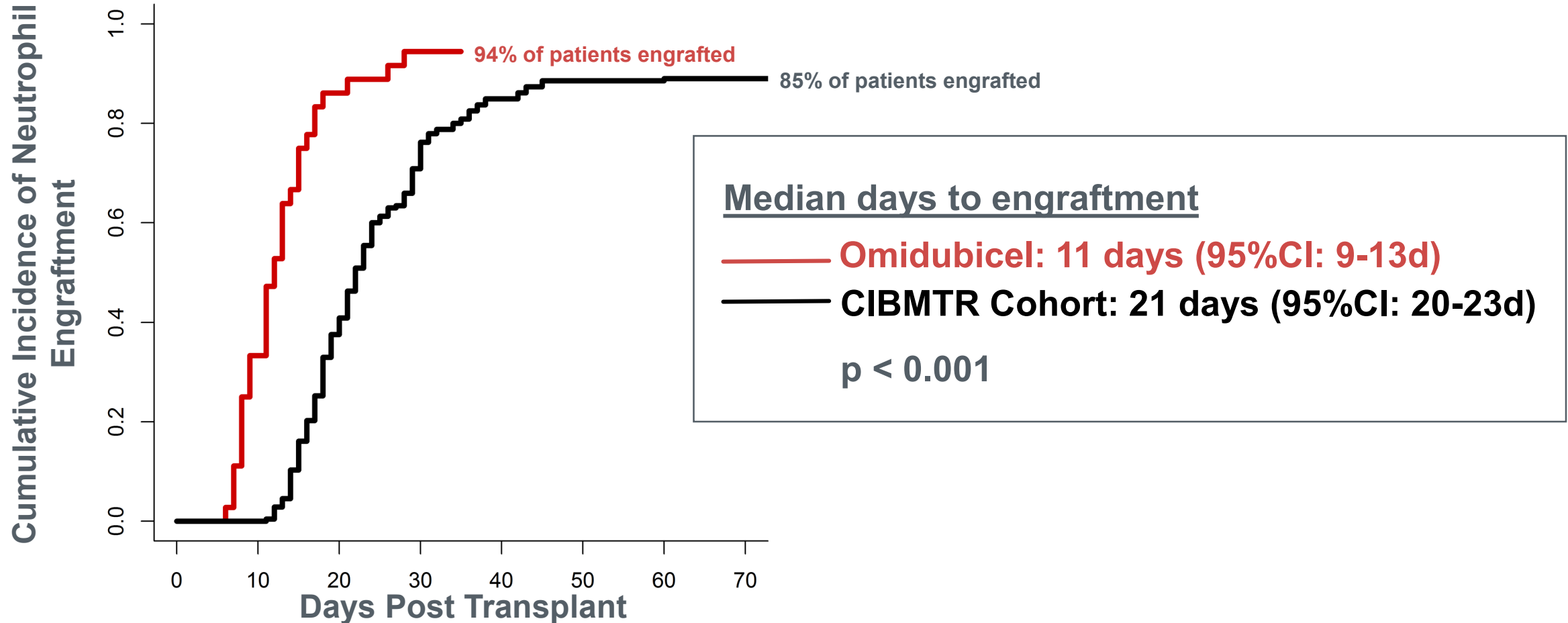
Phase 1/2 Study of Omidubicel in Hematologic Malignancies



Clinicaltrials.gov identifier NCT01221857.

Unprecedented Time to Neutrophil Engraftment with Omidubicel

~50% reduction in time to engraftment is associated with clinical benefit

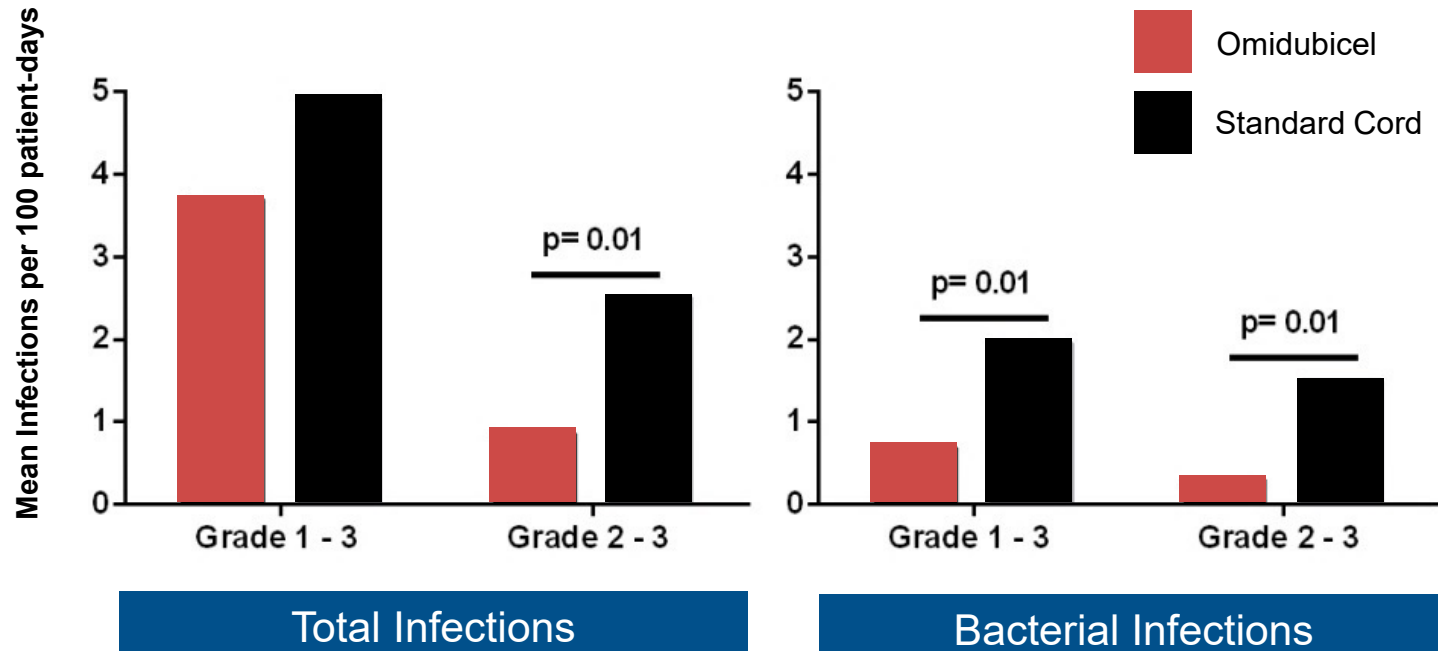


Journal of Clinical Oncology 2019 Feb 10;37(5):367-374.

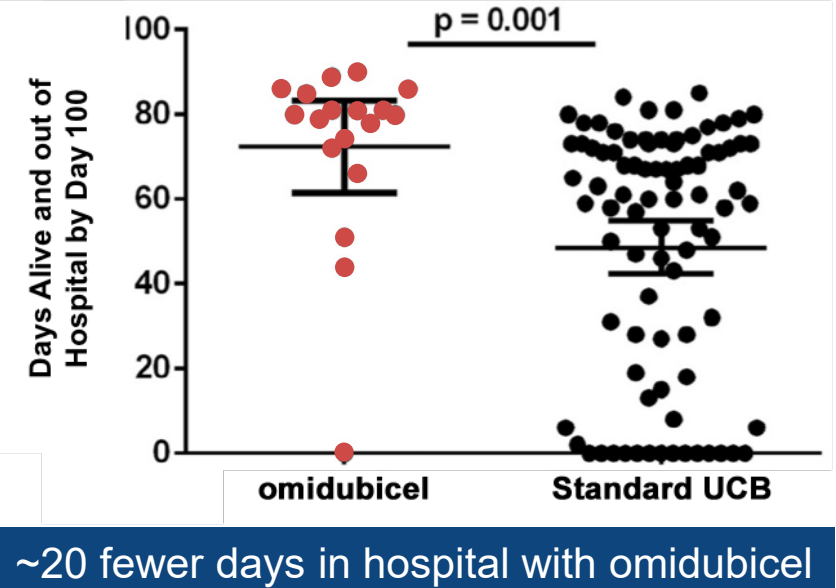
Note: CIBMTR registry data of 146 patients who received myeloablative conditioning and unmanipulated cord blood transplantation.

Rapid Engraftment Is Associated with Fewer Infections and Shorter Hospitalizations

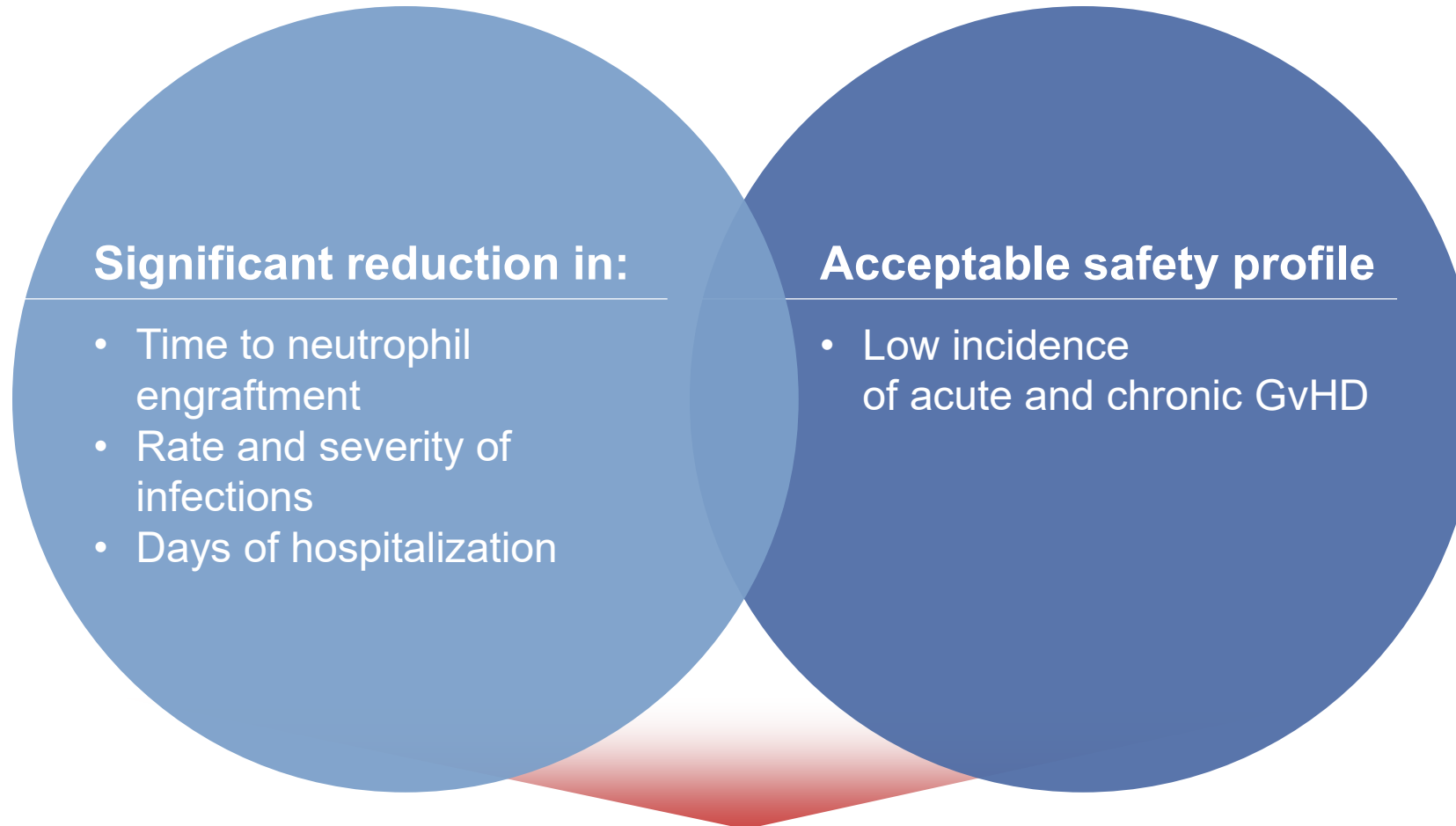
Infection



Hospitalization



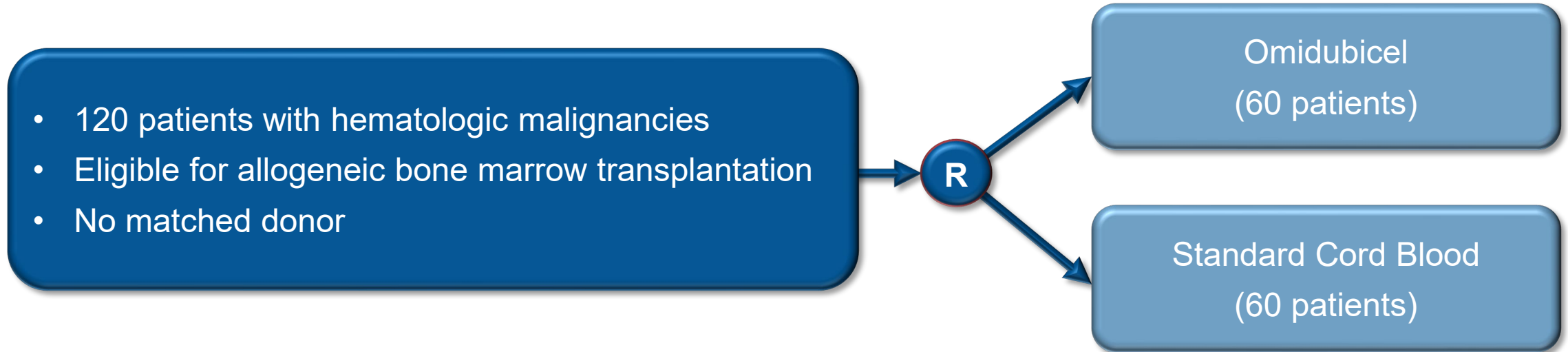
Omidubicel Phase 1/2 Study: Key Takeaways



FDA Breakthrough Therapy Designation

Journal of Clinical Oncology 2019 Feb 10;37(5):367-374.

Topline Data from Phase 3 Study Expected 1H20



Primary endpoint: Time to neutrophil engraftment

Secondary endpoints: Platelet engraftment, acute GvHD, chronic GvHD, infections, hospitalization, non-relapse mortality, overall survival, disease-free survival

-
- >50 sites globally
 - Enrollment completed December 2019

Preparing for a Successful Omidubicel Launch

1 Engaging top transplant centers

2 Building patient and hospital support services

3 Working with payers to ensure reimbursement

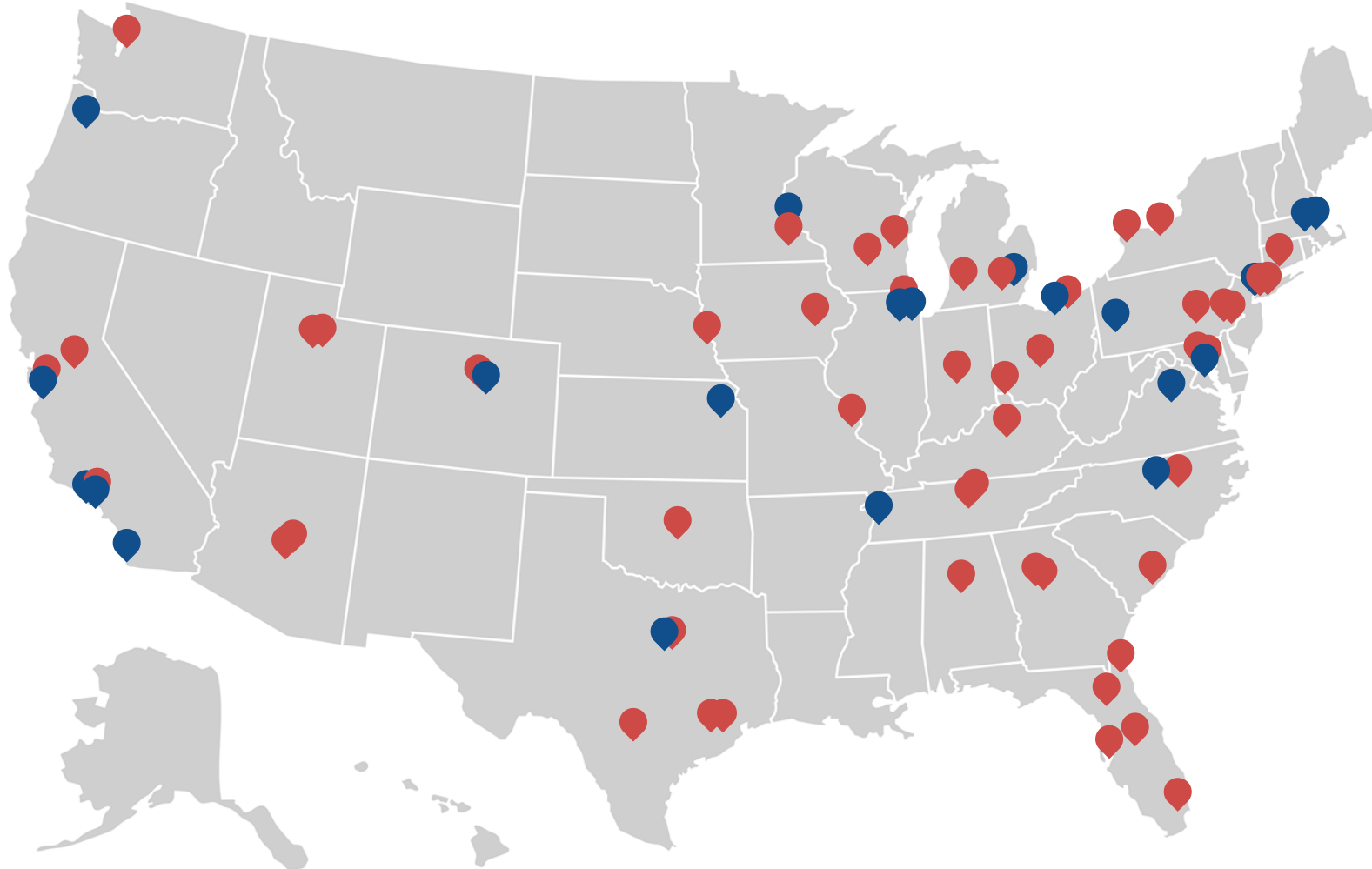
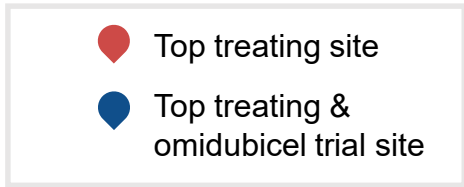
4 Ensuring commercial manufacturing readiness

**Preparing to submit
Biologics License
Application to FDA
in 2H20***

*If data are positive.

Bringing Omidubice^l to Patients

Approximately **70**
transplant centers
account for ~80%
of bone marrow transplants
in U.S.



Our Goal Is to Bring Omidubicel to Every Patient Who Needs It



Pre-Infusion and Reimbursement Support

Prior to infusion:

- Cord blood unit selection
- Benefits verification
- Assistance with prior authorization process



Patient Coverage Support

Assistance for patients who are:

- Uninsured
- Underinsured or inadequate insurance



Travel and Housing Resources

Patients and caregivers travel and housing support services



Claims Appeals

Support if a claim is denied and requires appeal

Omidubicel Key Takeaways

- Unprecedented time to neutrophil engraftment and acceptable safety profile observed in Phase 1/2 clinical study
- Phase 3 enrollment completed with topline data expected 1H20
- Construction ongoing at two manufacturing facilities to ensure reliable commercial supply
- Pre-commercial activities underway to prepare for possible 2021 launch

GDA-201

Harnessing Innate Immunity Using
Natural Killer (NK) Cells to Treat
Cancer

gamida Cell

A person wearing a motorcycle helmet and gear is riding a motorcycle on a road. The person is wearing a grey and yellow jacket, blue jeans, and brown boots. The motorcycle is white and black. The background is a blurred road and greenery.

Meet Wayne

Wayne participated in the Phase 1/2 clinical study of GDA-201 at the University of Minnesota to treat lymphoma. His lymphoma is in remission a year after treatment.

“[The doctors] were finding that the lymphoma appeared to have evaporated, completely gone away, that the lymph nodes were really showing no signs of having any kind of cancer in them.”

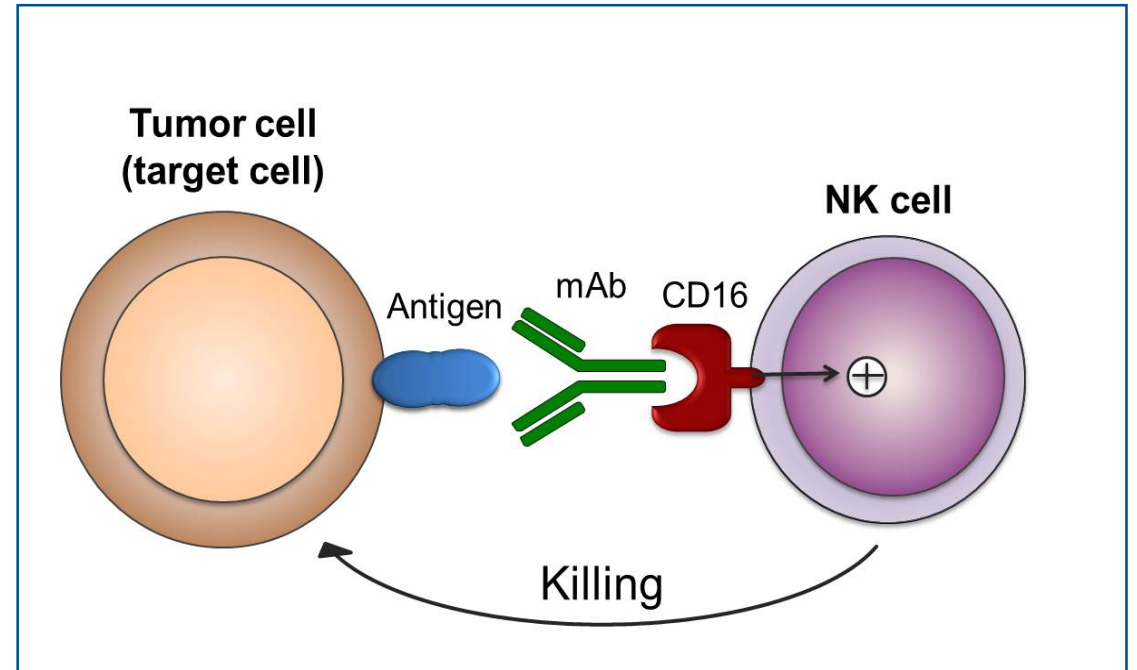
This is one patient and results may not be indicative. Omidubicel is investigational and safety and efficacy have not been established by any agency.

Putting NK Cells to Work Using Our NAM Technology Platform

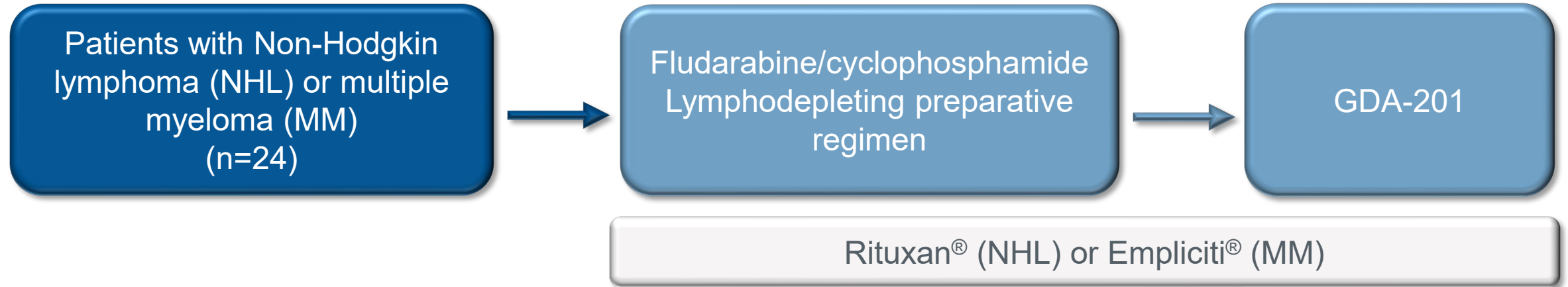
Benefits of NK Cells

- Natural killer (NK) cells infusion is a promising immune therapy for cancer
 - No HLA matching required
 - Synergy with antibodies
 - Potential for off-the-shelf therapy
- Expansion is necessary to obtain clinically meaningful doses with retained cell function

GDA-201: NK Cells + Tumor-specific Antibodies

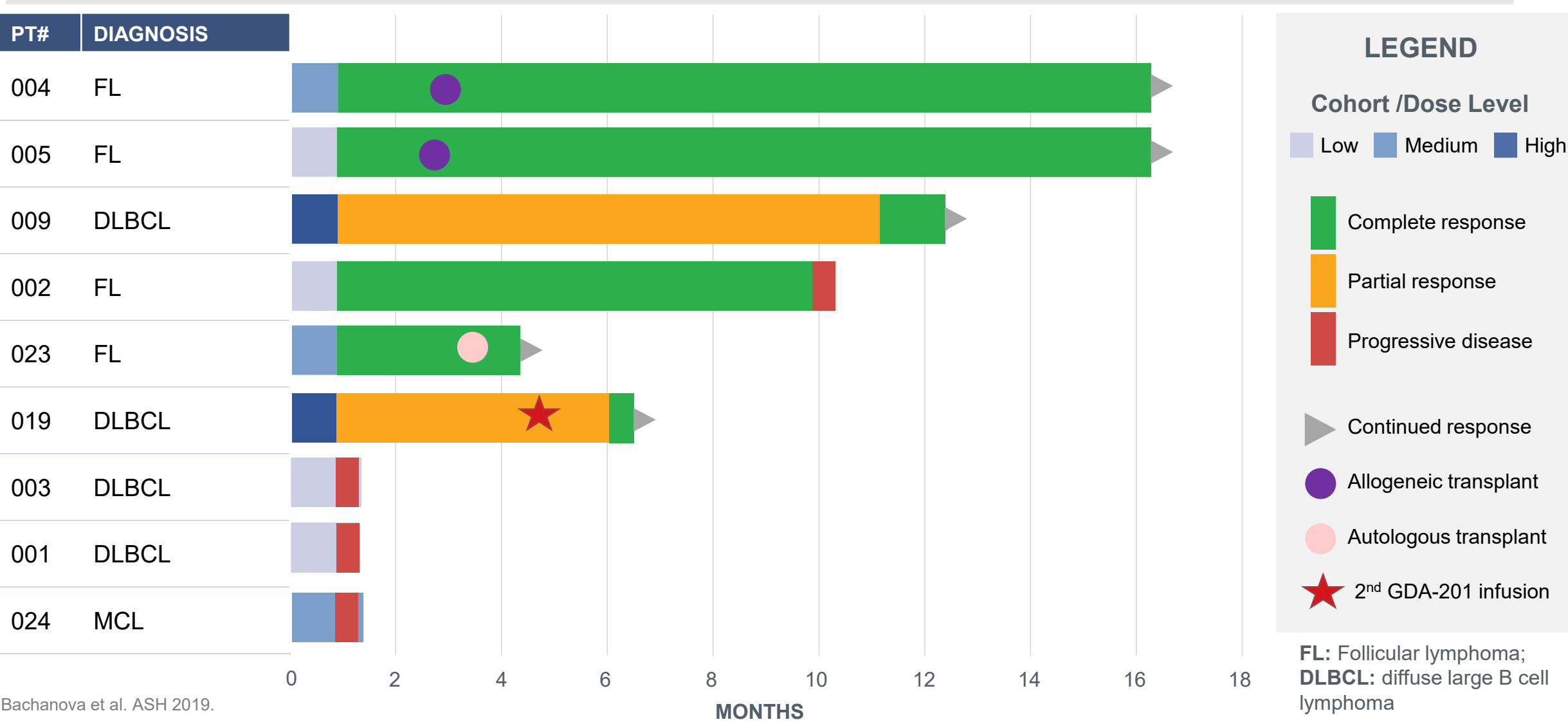


Phase 1 Study of GDA-201 in Patients with Non-Hodgkin Lymphoma and Multiple Myeloma



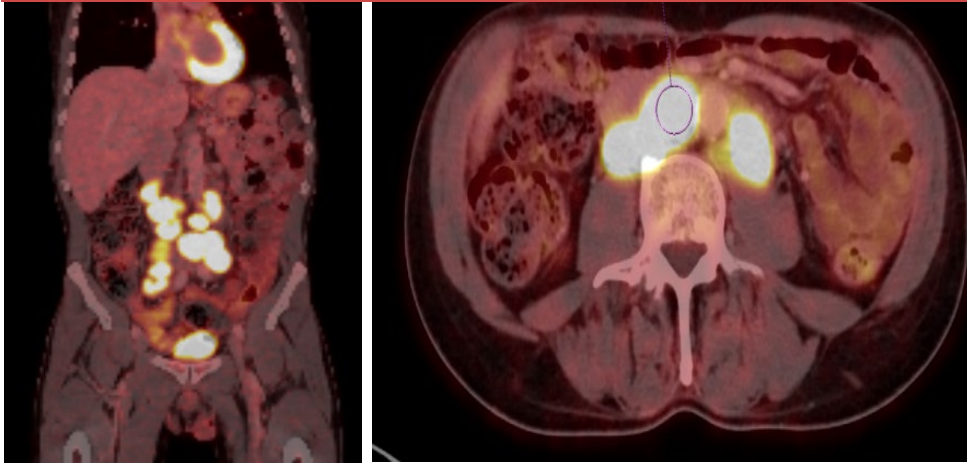
- **Primary endpoint:** Maximum tolerated dose of GDA-201 (3 doses evaluated)
- **Secondary endpoints:** Overall response, toxicity

GDA-201 Is Highly Active in Non-Hodgkin Lymphoma

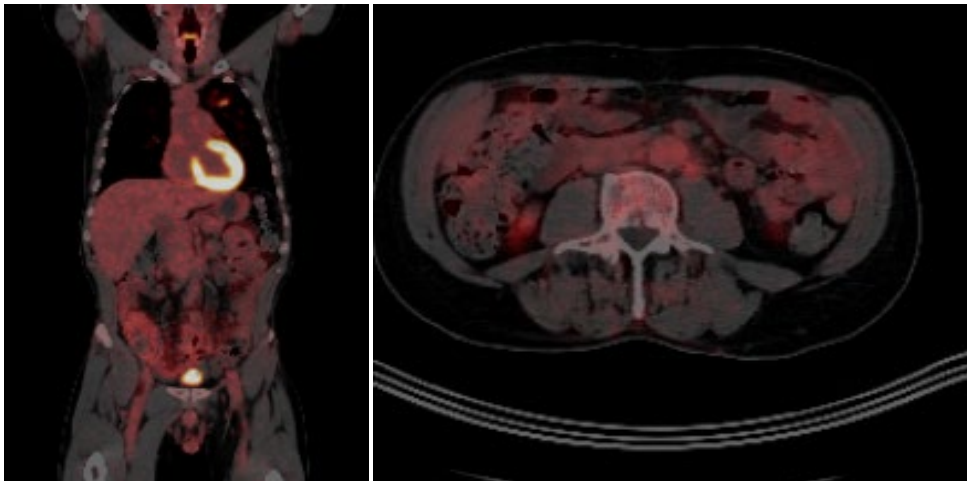


Patient 009

Pt 009: Baseline



Pt 009: 6-month post GDA-201



- 57-year-old man with history of CLL and Richter's transformation-large cell lymphoma, measurable retroperitoneal lymph nodes at baseline
- Prior therapy: FCR-light, Rituximab/Bendamustine, Ibrutinib/Revlimid, R-CHOP, Venetoclax/Rituximab
- Allogeneic HSCT (matched sibling)
- Relapse at 6 months
- Treated with GDA-201
- 28-day response: Tumor shrinkage
- 6 months: PR with continued tumor shrinkage
- 12 months: Complete response

Bachanova et al. ASH 2019.

GDA-201 Phase 1 Study: Key Takeaways

Promising early clinical activity

- 6 complete responses among 9 patients with heavily pre-treated NHL
- Activity observed in patients with DLBCL
- Maximum target dose achieved

Generally well tolerated

- No dose limiting toxicities
- No graft vs. host disease (GvHD)
- No tumor lysis syndrome
- No neurotoxicity

Data support Phase 1/2 multi-center, multi-dose study in NHL

NK Could Be the Next Disruptive Cell Therapy

CAR-T Benefits	CAR-T Limitations
<ul style="list-style-type: none">• Dramatically changed treatment paradigm• Demonstrated long-term clinical benefits	<ul style="list-style-type: none">• Complex manufacturing process• Side effects, including cytokine release syndrome• Many patients aren't fit enough for treatment

Precedent for Rapid Path to Approval for Cell Therapies with Significant Clinical Benefit
YESCARTA® IND to BLA: 27 Months

2014	2015		2016	2017		
IND Submitted (Dec)	ZUMA-1 Ph1 Study First Patient Enrolled (Apr)	ZUMA-1 Ph2 Pivotal Study Opens (Nov)	ZUMA-1 Pivotal Study Interim Analysis (Nov)	ZUMA-1 Pivotal Study Topline Primary Analysis (Feb)	BLA Submission Completed (Mar)	FDA Approval (Oct)

Expected 2020-2021 Milestones

Omidubicel

- ☐ Report topline data from the Phase 3 study in 1H20
- ☐ Present data from the Phase 3 study at a medical meeting in 2H20
- ☐ Submit BLA in 2H20*
- ☐ Report additional data from the Phase 1/2 study in patients with severe aplastic anemia in 2H20
- ☐ Launch omidubicel in 2021*

GDA-201

- ☐ Present additional data from the Phase 1 study in 1H20
- ☐ Submit IND in 2H20
- ☐ Initiate a Phase 1/2 clinical study in NHL in 2021

*If data are positive.

Financial Snapshot

- Total cash position of approximately \$56 million (unaudited) as of December 31, 2019
- Cash supports capital needs into 4Q20*
- Approximately 90 employees

*Cash runway guidance is based on the company's current operational plans and excludes any additional funding that may be received or business development activities that may be undertaken.

We Are Inspired to Cure

NAM Platform

Potential to expand any cell type, including stem cells and NK cells

Omidubicel

Preparing for Phase 3 data readout and BLA submission

GDA-201

Stunning early clinical activity in heavily pre-treated patients with lymphoma

Looking Ahead

Potential to launch first-ever FDA-approved bone marrow transplant graft



Inspired to Cure

January 2020