A GENE-BASED AESTHETICS COMPANY

November 2022

JEUNE

PEARL-1 Durability Results

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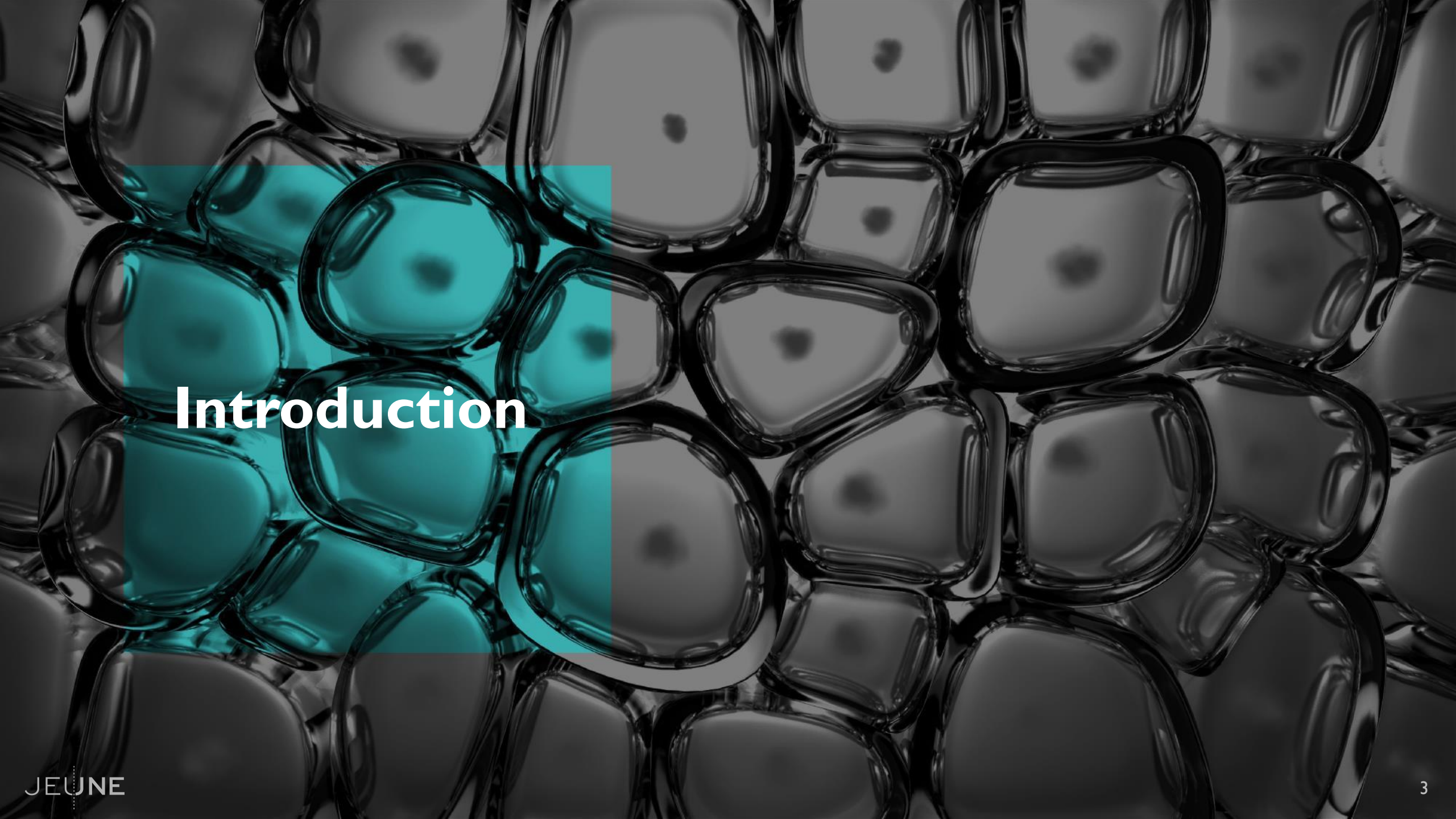
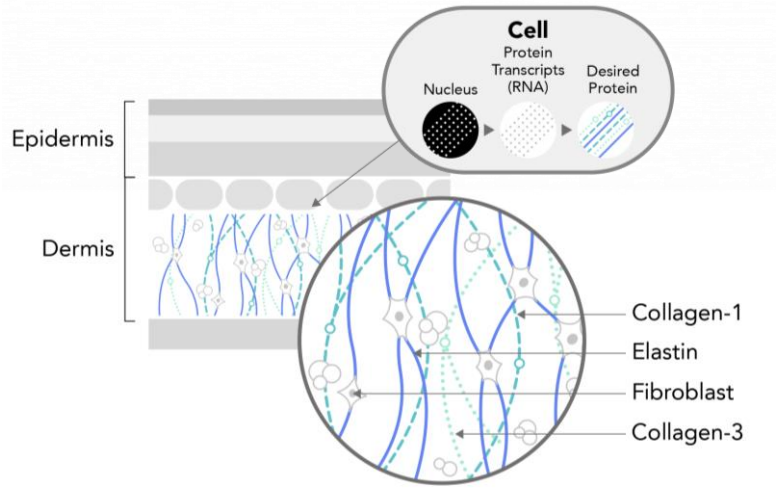


Introduction

Aging Skin is Caused by Declining Levels of Collagen and Elastin

- Skin aging is caused, in part, by a reduction of the skin's key proteins: collagen and elastin
- Impaired collagen and elastin synthesis leads to the degradation of the extracellular matrix, affecting overall skin quality and function
- The primary function of the extracellular matrix is to give skin its mechanical and biochemical properties

YOUNGER / HEALTHY



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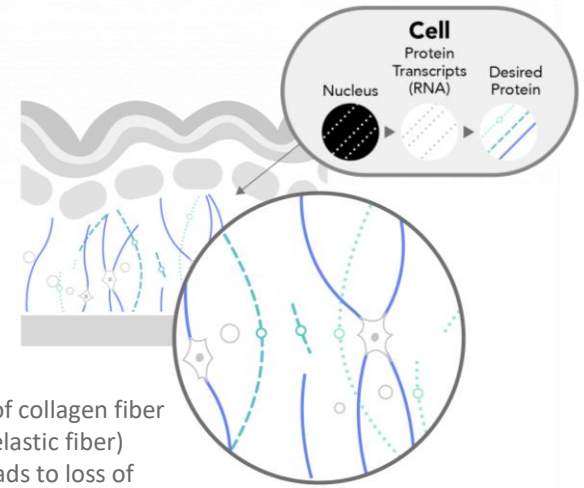


Declining levels of collagen fiber and elastin (elastic fiber) production leads to loss of extracellular matrix integrity

KB301 is Designed to Increase Production of Type III Collagen

- Collagen 3 provides tensile strength, and influences other functions such as cell adhesion, migration, proliferation, and differentiation through its interaction with integrins, which are cell surface receptors[1]

	Type I Collagen	Type III Collagen	Elastin
Percentage in the skin	70-80%	20-30%	2-3%
Aging alteration	declines with aging	Abundant in baby skin, declines thereafter	Abundant in baby skin, declines thereafter

1 Kim JK, Xu Y, Xu X, Keene DR, Gurusiddappa S, Liang X, Wary KK and Hook M, 2005. A novel binding site in collagen type III for integrins alpha1beta1 and alpha2beta1. J Biol Chem 280, 32512–20.

KB301 Key Product Differentiation

Feature	Benefit
Novel MOA naturally produces patient's own Collagen-3	Reduced wrinkles and improved skin quality attributes
Applicable for all skin types	Can be added to every patient's skin care program
Physician (injector) controlled placement	Targeted application to specific cheek skin concerns
Injected with 33-gauge microneedle	No painkillers required
Collagen response (onset) within days	No pre-event planning required
Expected 9-month (or longer) duration	Lasting "Jeune Glow"

KB301 Treatment

A universally appealing treatment because it does not alter the face shape or features, it simply returns the skin to a natural looking youthful state.

"KB301 holds the promise to fundamentally change the way we age."

Jeune Scientific Advisor

Market Uptake Beyond the Current Aesthetic Market

Non-Aesthetic Consumers

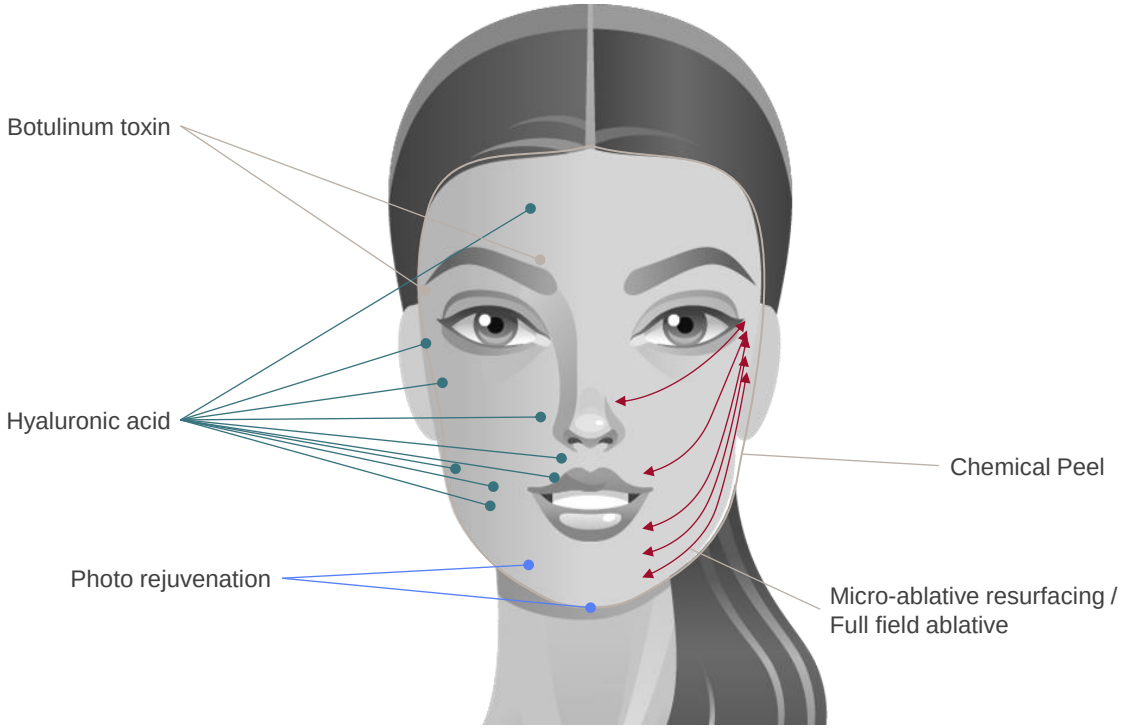
Stage 1: Aging Skin Concerns → **Stage 2:** Retinol and Sunscreen Usage → **Stage 3:** **Genetic Skin Rejuvenation with KB301 Treatments**

Aesthetic Consumers

Stage 1: Aging Skin Concerns Despite Current Treatments with Dermal Fillers, Neuromodulators and Lasers → **Stage 2:** Inclusion of **KB301 Treatments for Genetic Skin Rejuvenation**

Improvement in Skin Quality had Potential Beyond the Face

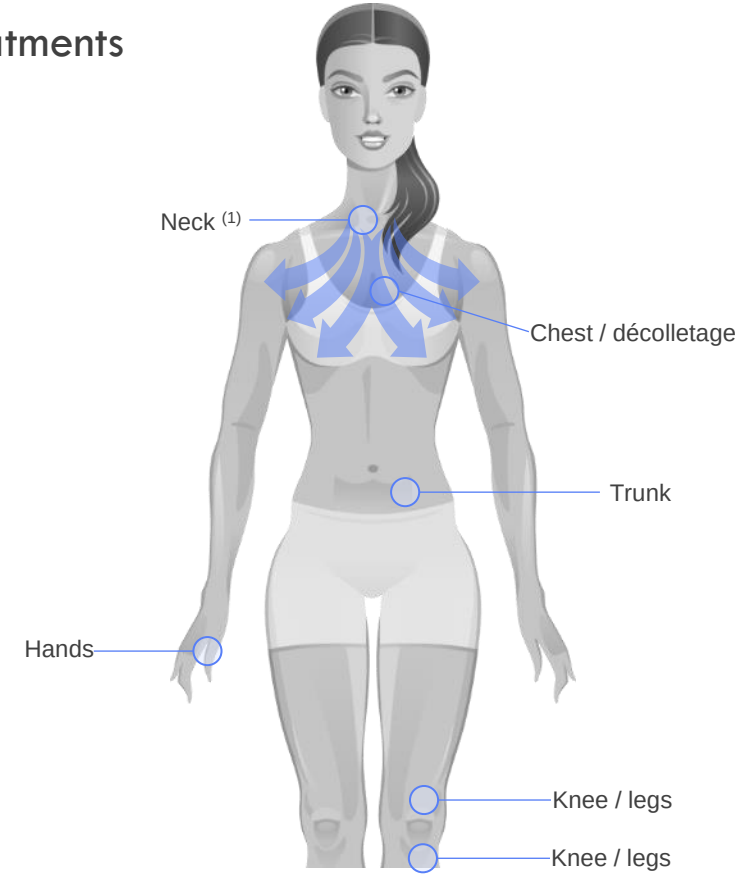
Significant opportunity in areas with no FDA-approved indications or treatments available.



Global Facial Rejuvenation Market[1]

$19B → $44B

2019 by 2026



Global Skincare Devices Market[2]

$18B → $50B

2018 by 2028

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Sources: ISAPS International Survey on Aesthetic/Cosmetic Procedures Note: Not all products or indications approved in the US.
1. September 2020 – insightSLICE - Global Facial Rejuvenation Market Share, Trends, Analysis and Forecasts, 2020-2030. 2. November 2020 – Research and Markets - Global Skincare Devices Market (2020 to 2030) - by Product, Distribution Channel, Application and End-user.

Robust Pipeline Addresses Multiple Aspects of Skin Quality

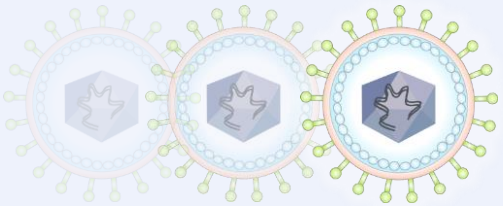
PROGRAM	INDICATION	GENE	PRE-CLINICAL	CLINICAL
KB301	Improved Skin Quality Attributes	type III collagen (COL3)		
KB303	TBD	elastin (ELN)		
KB302	TBD	COL3 + ELN		
KB304	TBD	Type 1 collagen (COL1)		
KB305	TBD	type IV collagen (COL4)		

KB301 Leverages Experience with Vector and Manufacturing Infrastructure

- KB301 uses same HSV-1 vector backbone as B-VEC, Krystal's rare skin disease product currently under FDA review for licensure
- Preclinical and clinical data generated for B-VEC, as well as manufacturing infrastructure, de-risks and accelerates KB301 development

CLINICAL EXPERIENCE

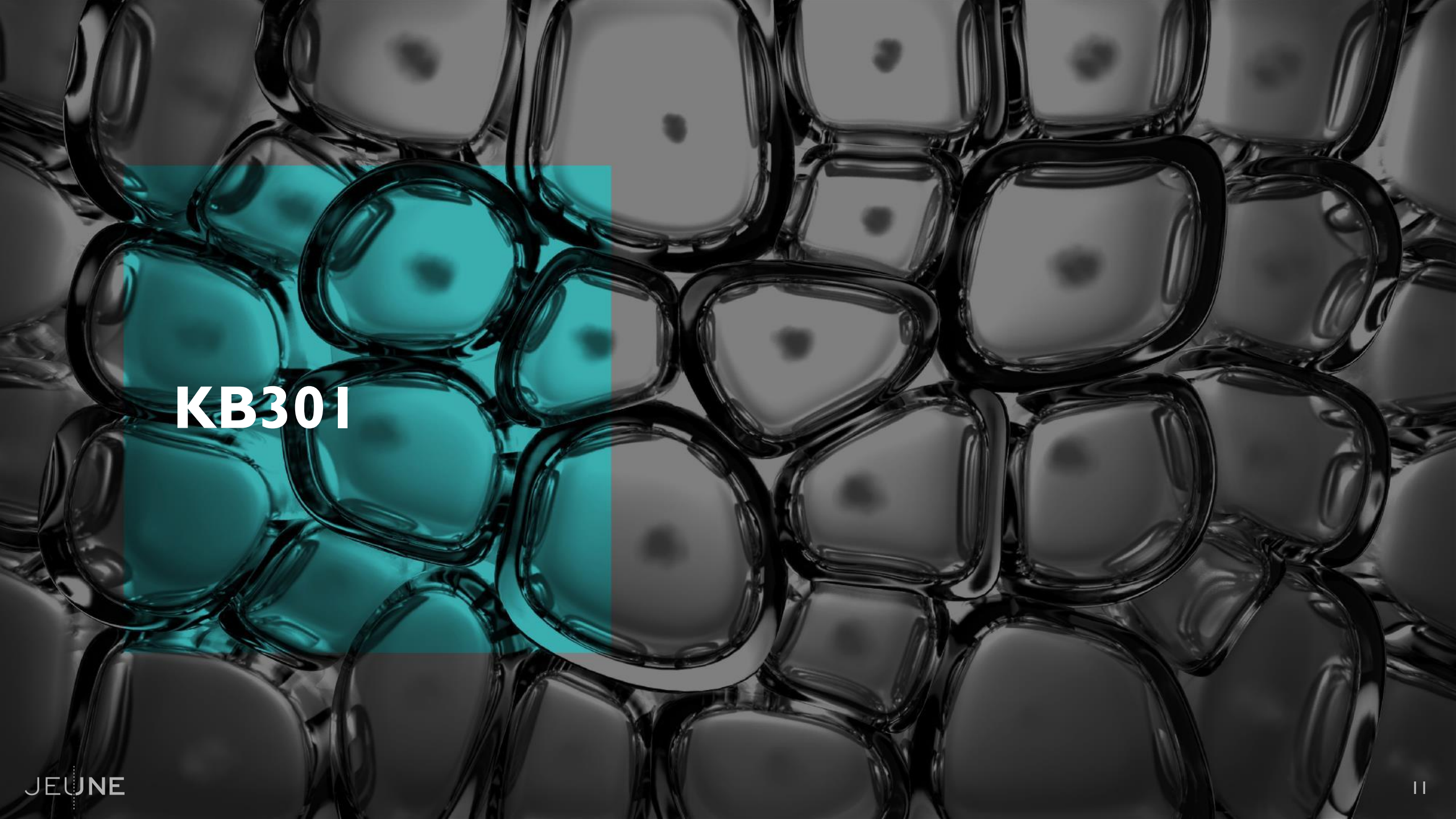
- Vector backbone extensively studied during B-VEC clinical development program
- Vector data package includes B-VEC Phase 1/2 and Phase 3 studies, two clinical stage programs, and multiple preclinical candidates
- Favorable preclinical and clinical safety profile across all products and routes of administration to date
- Jeune leverages data generated on other Krystal programs to inform KB301 clinical strategy and support interactions with regulators



GMP MANUFACTURING

- GMP manufacturing already established with additional near-term capacity anticipated
  - **Ancoris:** Fully operational 10,000 sq ft GMP manufacturing facility has produced over 20 GMP batches to date
  - **Astra:** 150,000 sq ft GMP manufacturing facility to be operational by H2 2022 with capacity to support Krystal and Jeune portfolios
- Infrastructure and in-house vector manufacturing expertise to accelerate KB301 development and launch

Astra Manufacturing Facility
Expected H2 2022
Close proximity to Pittsburgh International Airport


KB301

PEARL-1 – KB301 Phase 1 Program Overview

- Phase 1 study (KB301-01) was conducted in 3 parts:

Safety (Cohort 1/1a)

Objectives

- Establish preliminary safety
- Evaluate for *COL3A1* transgene expression

Design

- Open-label treatment of buttocks
- Skin biopsies

Efficacy (Cohort 2)

Objectives

- Demonstrate preliminary efficacy
- Dose exploration
- Evaluate scales

Design

- Double-blind, placebo-controlled, randomized, split-face design
- Different doses explored in upper cheek, lower cheek, neck, and above knees

Durability (Cohort 2E)

Objectives

- Assess durability in subjects previously treated with high dose in lower cheeks
- Correct unevenness in lower cheeks that previously received placebo

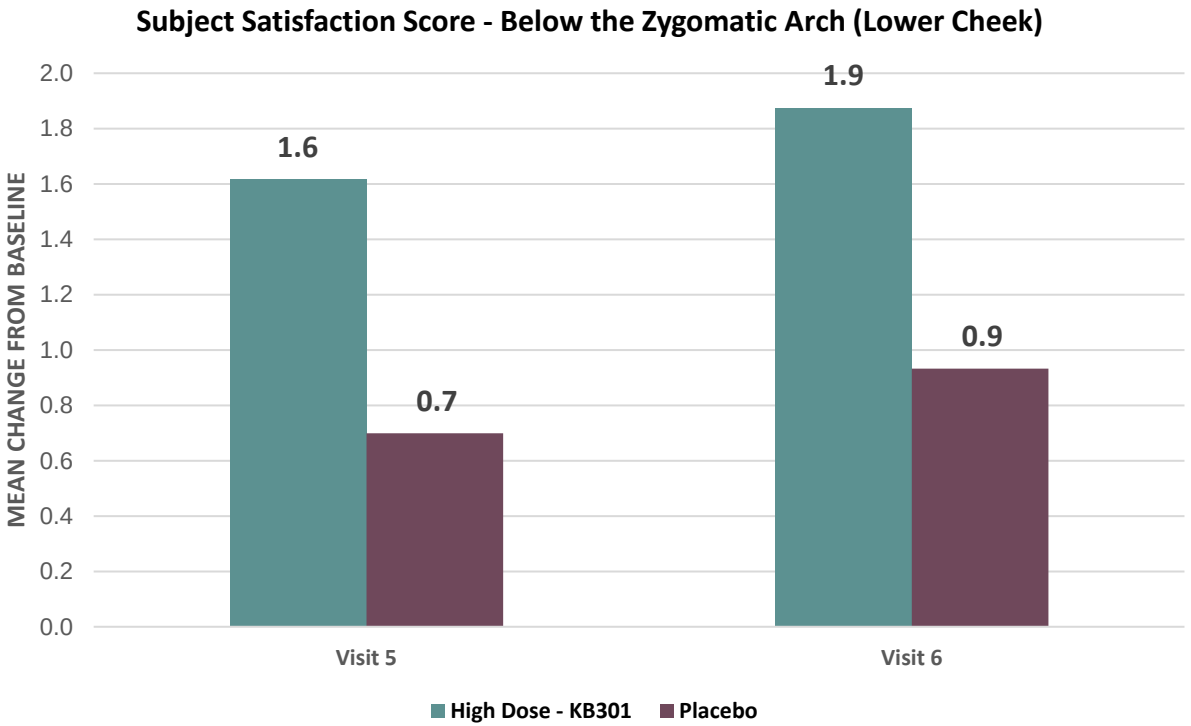
Design

- Open-label extension with observation of previously treated lower cheeks
- Treatment of lower cheeks that previously received placebo

PEARL-1: Cohort 2 Efficacy Results

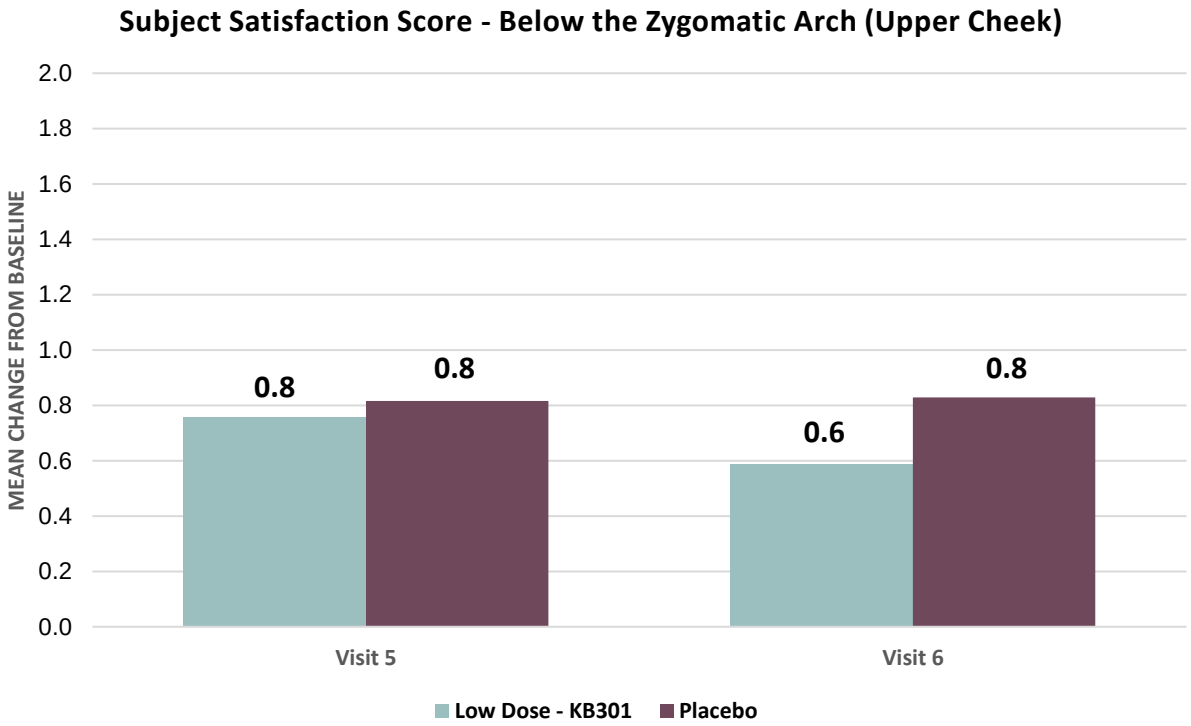
Difference in Mean Change from Baseline between High Dose KB301 and Placebo is Clinically Meaningful

High Dose



N for High Dose = 19 for KB301| N = 9 for Matching Placebo*

Low Dose



N for Low Dose = 12 for KB301| N = 6 for Matching Placebo

Results previously presented by Jeune in March 2022

** Assessment was done on 23 subjects.*
Visit 5 and 6 correspond to 2 to 4 weeks after the last dose, depending on whether the subject received 3 or 4 doses.

PEARL-1: Cohort 2 Extension Study for Assessment of Durability

- 10 of 23 subjects who completed the **Cohort 2 (Efficacy)** re-enrolled into **Cohort 2E (Durability)**

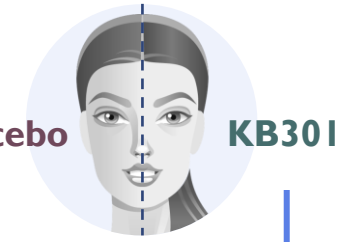
N = 23 Subjects
Completed Cohort 2
(Efficacy)

- *9 subjects not eligible (received low dose)*
- *4 subjects did not enroll*

N = 10 Subjects
Re-enrolled into Cohort 2E
(Durability)

N = 7 Subjects

- Previously received high dose to one cheek and placebo to the other cheek and determined to be uneven

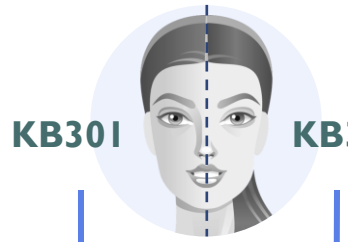


n = 7 Cheeks
Treated to correct for uneveness

n = 7 Cheeks
Observed for durability

N = 3 Subjects

- Previously received high dose to both cheeks

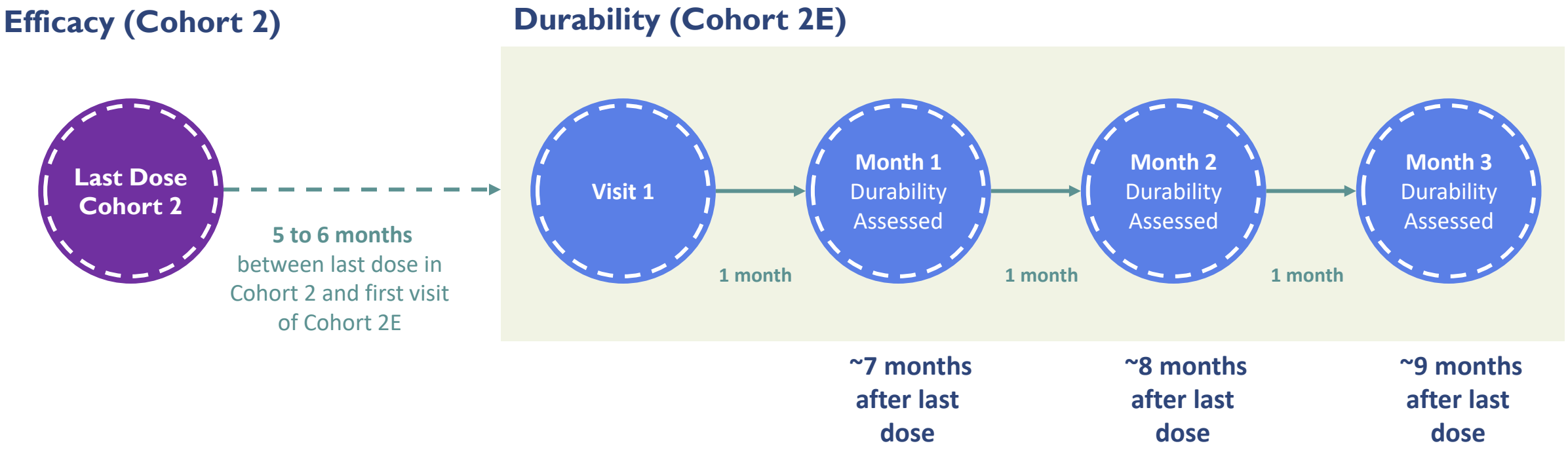


n = 6 Cheeks
Observed for durability

Total of **13 lower cheeks** from 10 subjects
included in durability assessment of Cohort 2 Extension

Assessment of Durability in Cohort 2 Extension

- Open-label extension to evaluate durability of high dose KB301 following unblinding of Cohort 2



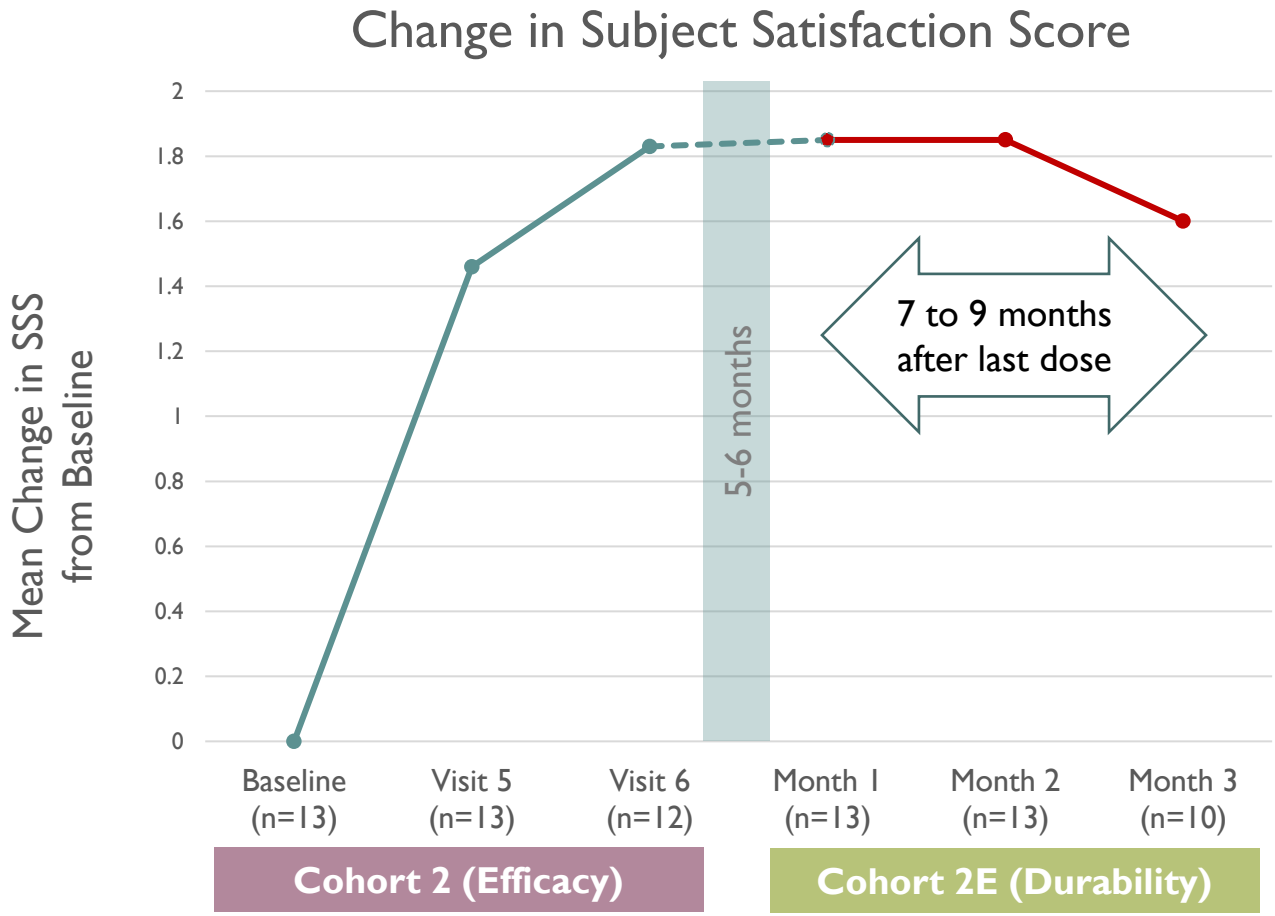
Endpoints

- Change in **Subject Satisfaction Score** from baseline*
- **Investigator Assessment** of clinically meaningful difference (yes/no) compared to baseline*

** Baseline defined as the beginning of Cohort 2 prior to any treatment with KB301*

Mean Change in Subject Satisfaction Scores during Cohort 2 Extension

- Subject Satisfaction Scores (SSS) collected in Cohort 2E indicate persistent treatment effect out to 9 months after the last dose of KB301

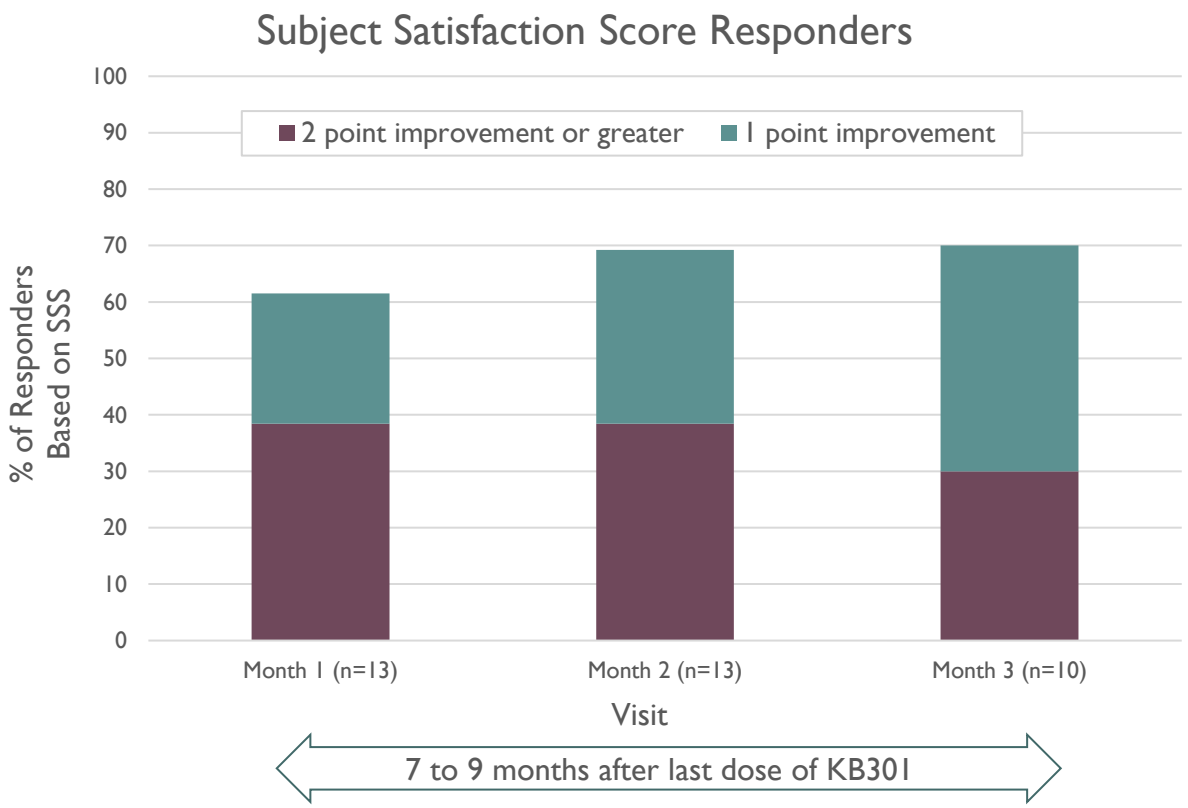


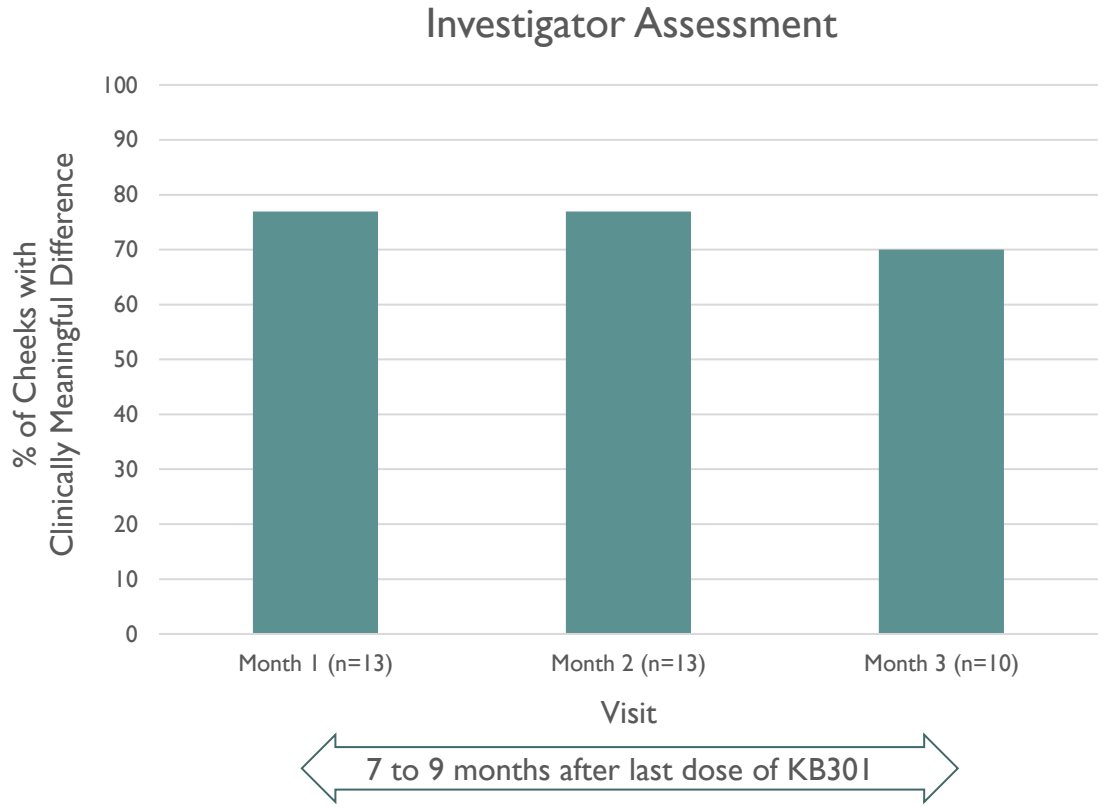
Subject Satisfaction Scores remain elevated from baseline approximately 7-9 months after the last dose in Cohort 2

Change in SSS compared to baseline (defined as the beginning of Cohort 2 prior to any treatment with KB301)
Visit 5 and 6 correspond to 2 to 4 weeks after the last dose, depending on whether the subject received 3 or 4 doses
Missing data at Visit 6 and Month 3 are due to missed study visits.

Sustained Treatment Response during Cohort 2 Extension

- Subject Satisfaction Score shows high proportion of responders up to 9 months after last dose
- Investigator Assessment shows high proportion of cheeks with a clinically meaningful difference up to 9 months after last dose

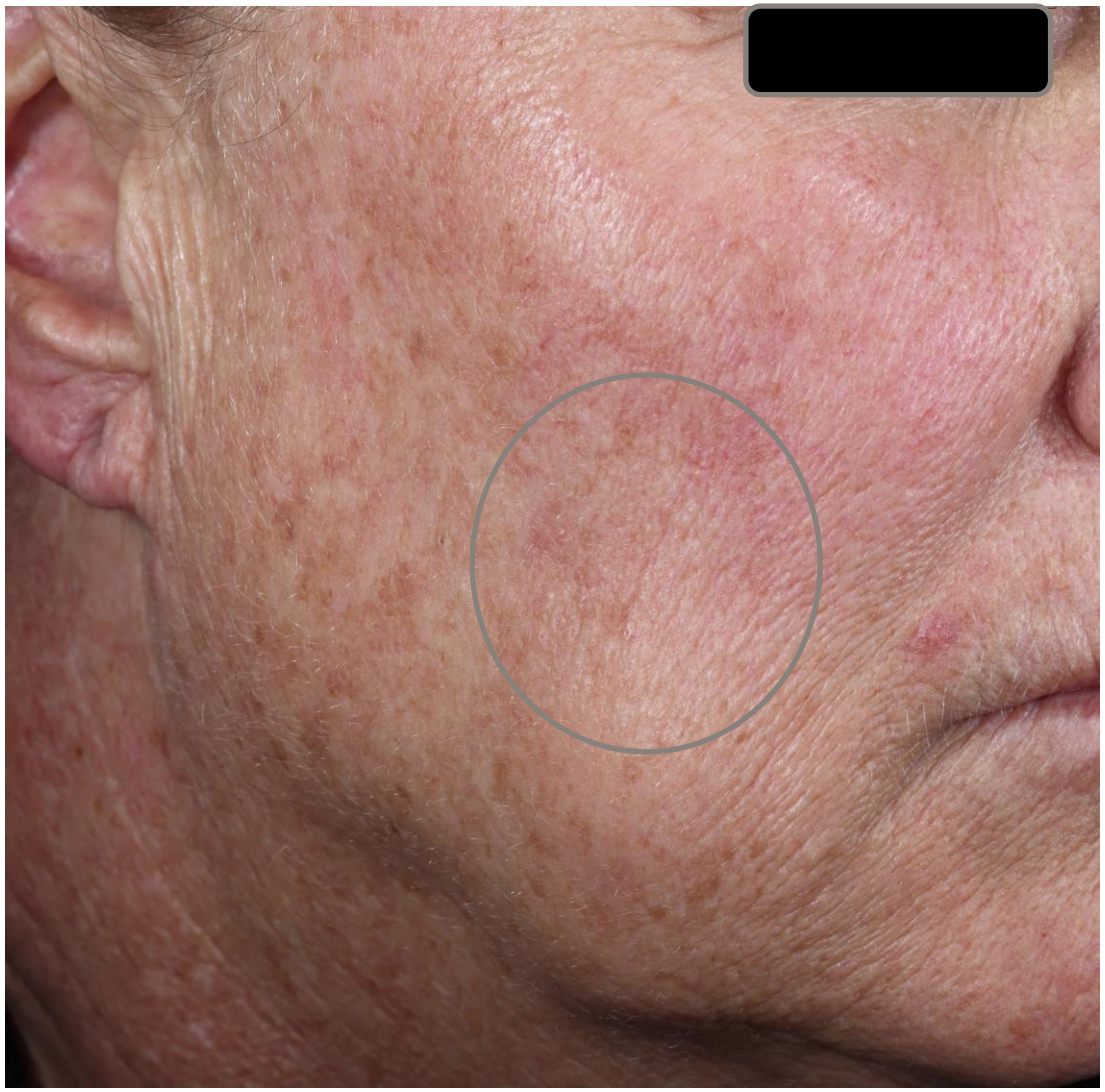




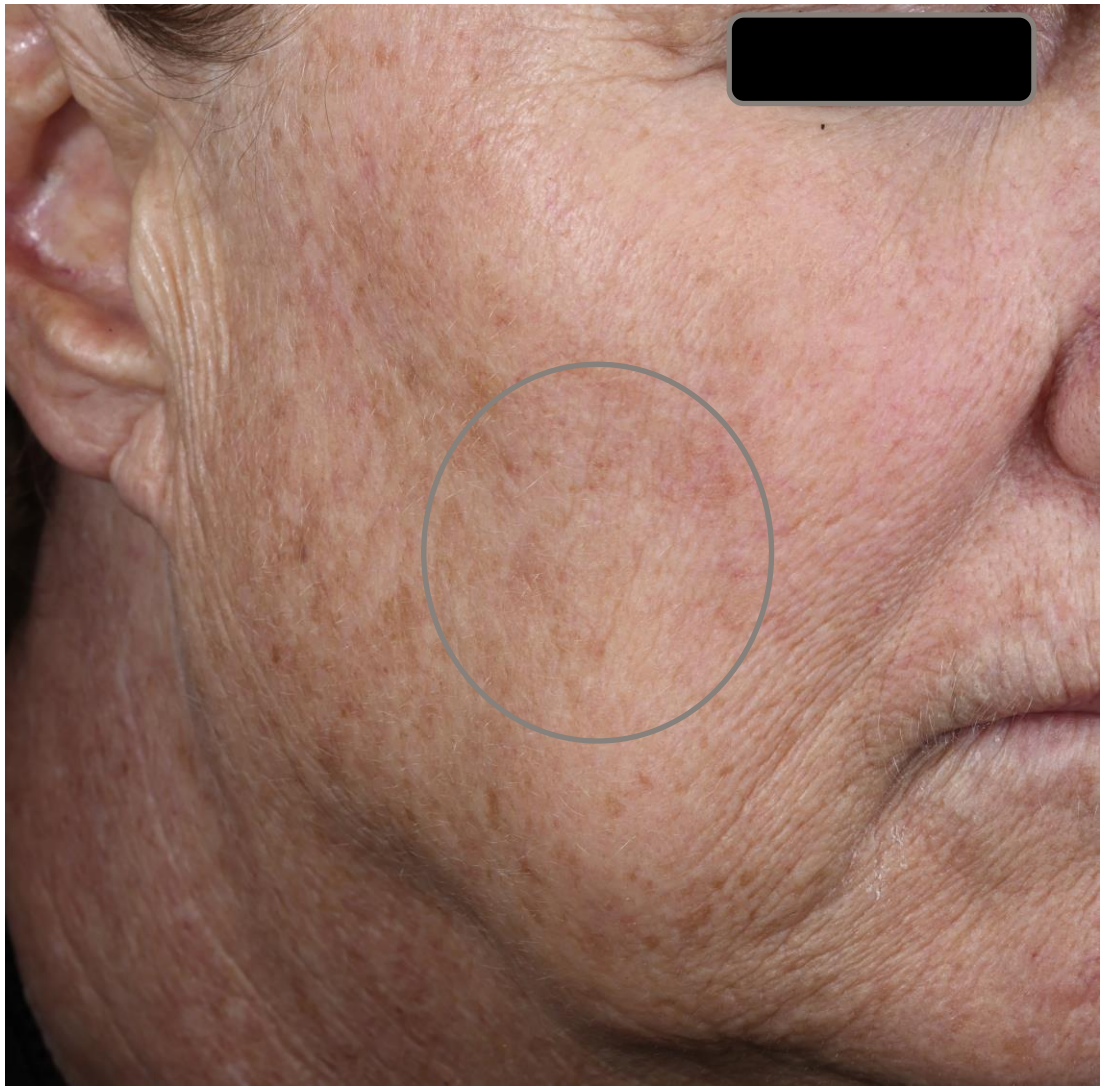
Change in SSS and Investigator Assessments compared to baseline (defined as the beginning of Cohort 2 prior to any treatment with KB301)
Missing data at Month 3 are due to missed study visits.

Lower Cheek Observation Arm: Cohort 2 Baseline and Nine Month Extension Assessment

Subject Age: 65



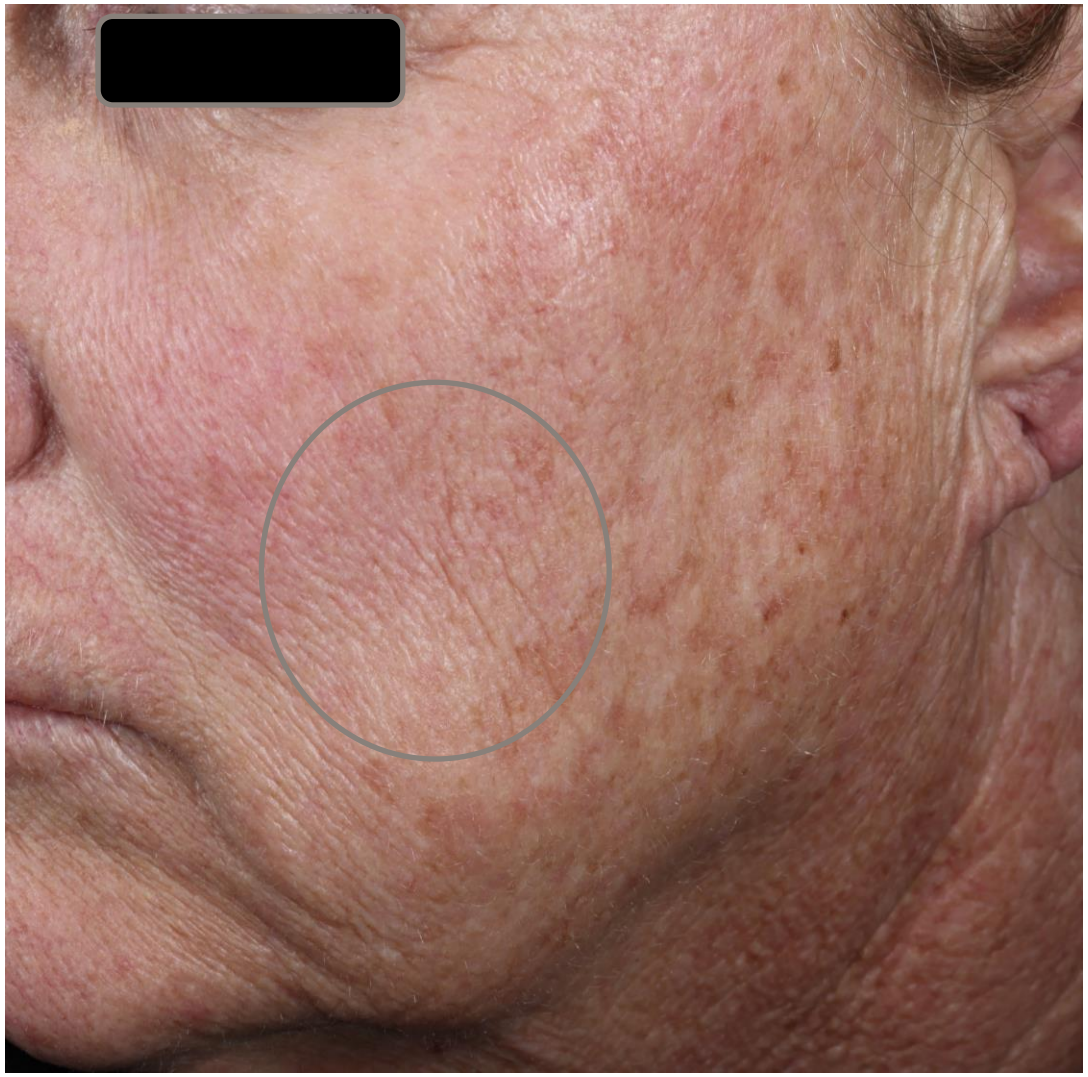
Baseline



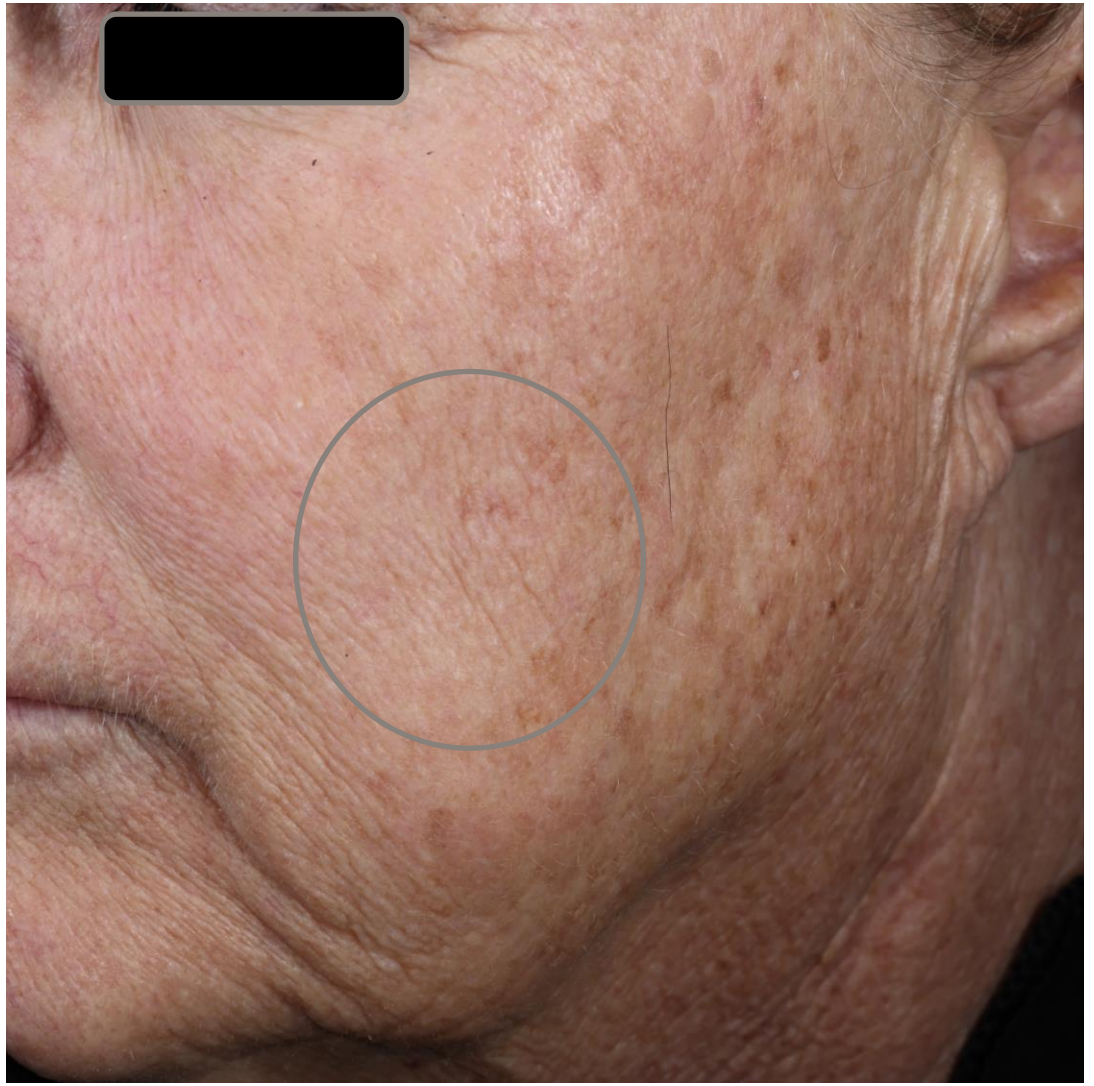
9 Months

Lower Cheek Observation Arm: Cohort 2 Baseline and Nine Month Extension Assessment

Subject Age: 65



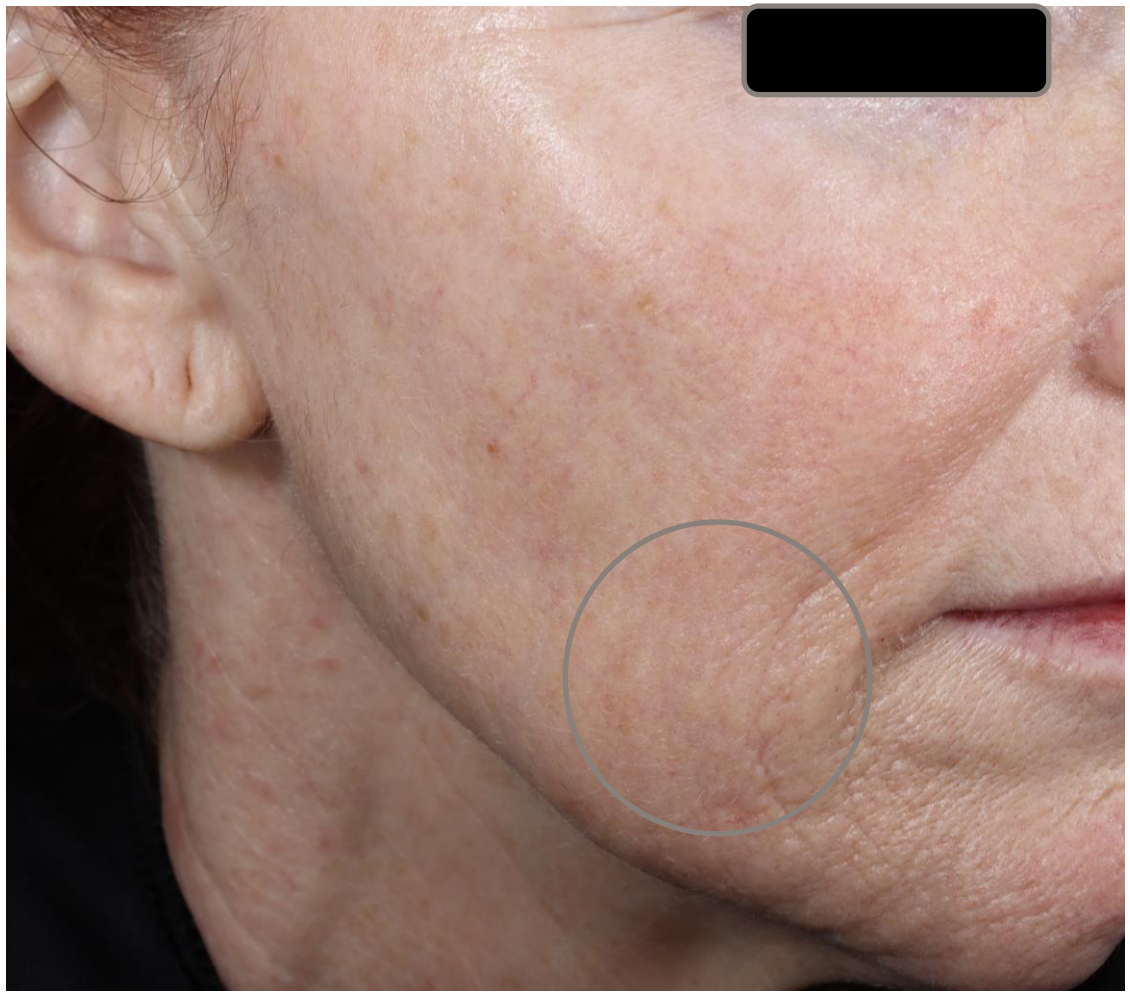
Baseline



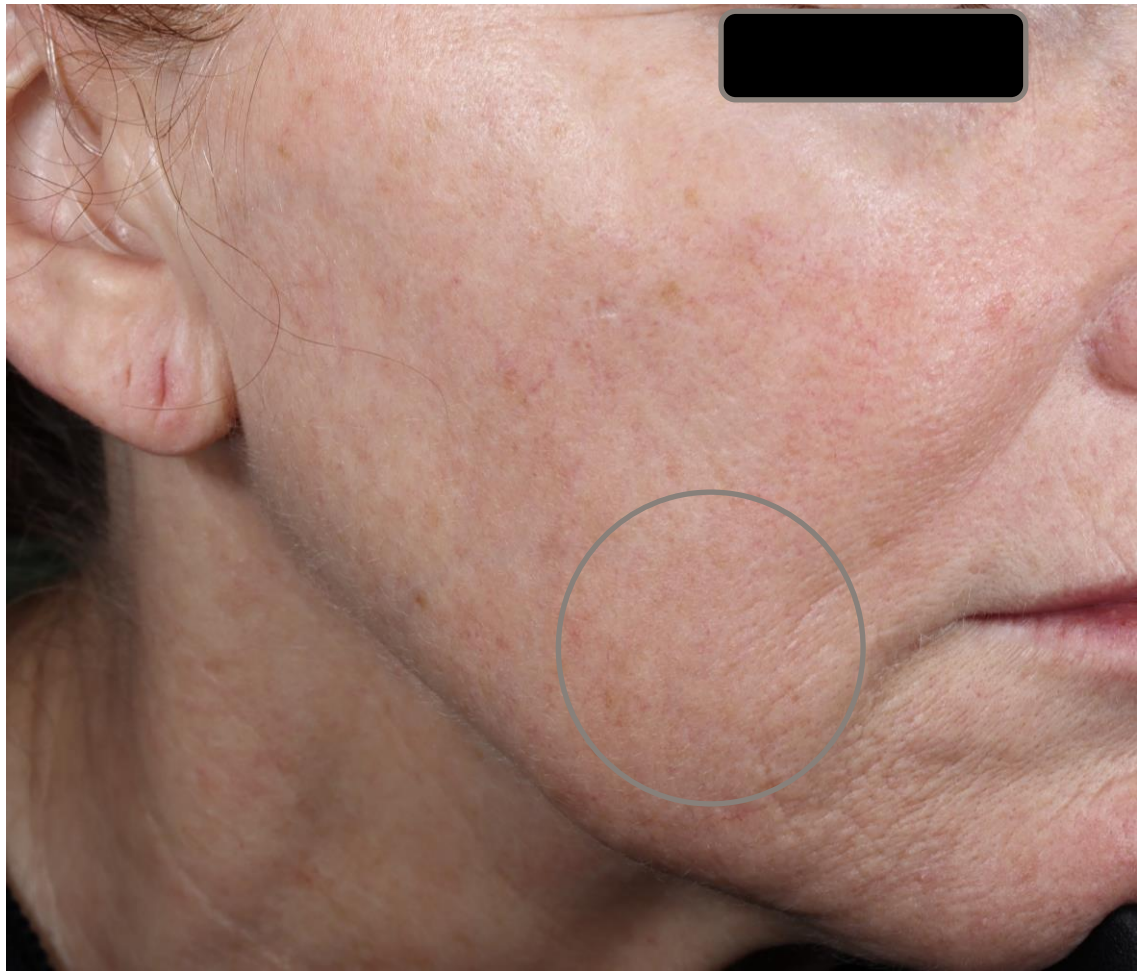
9 Months

Lower Cheek Observation Arm: Cohort 2 Baseline and Nine Month Extension Assessment

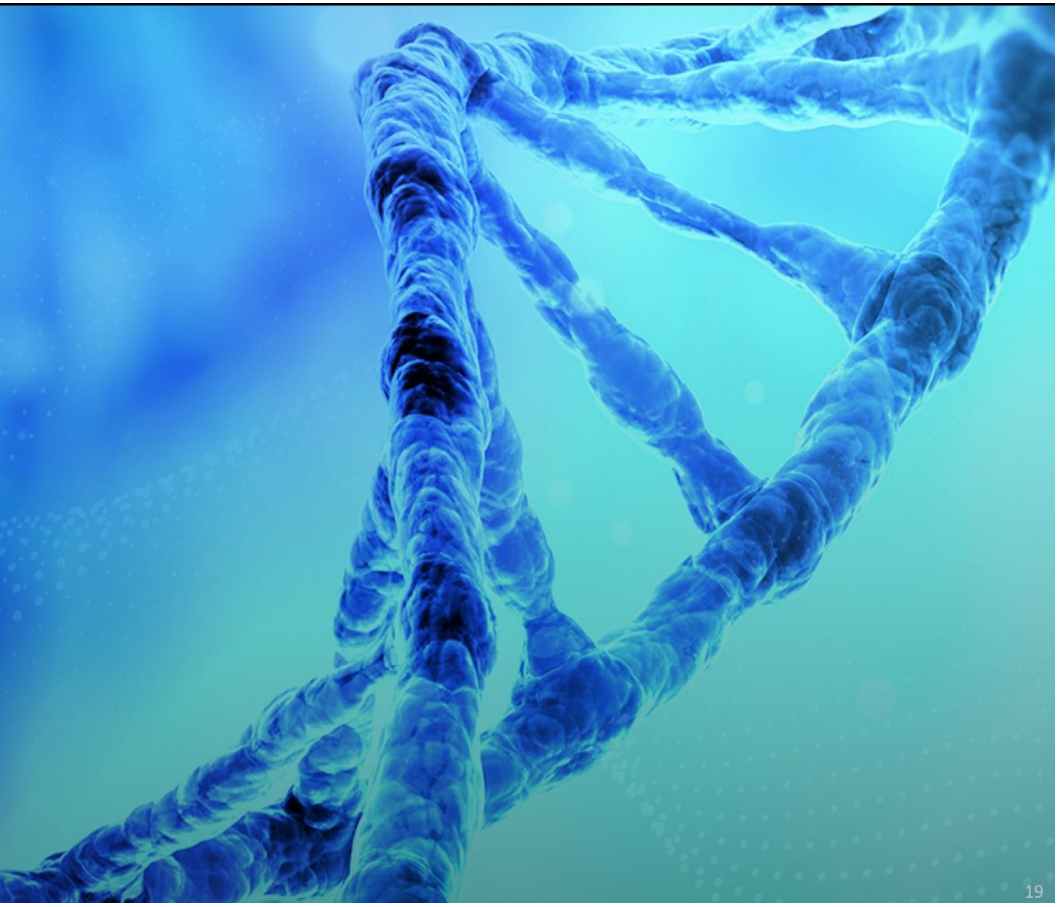
Subject Age: 61



Baseline

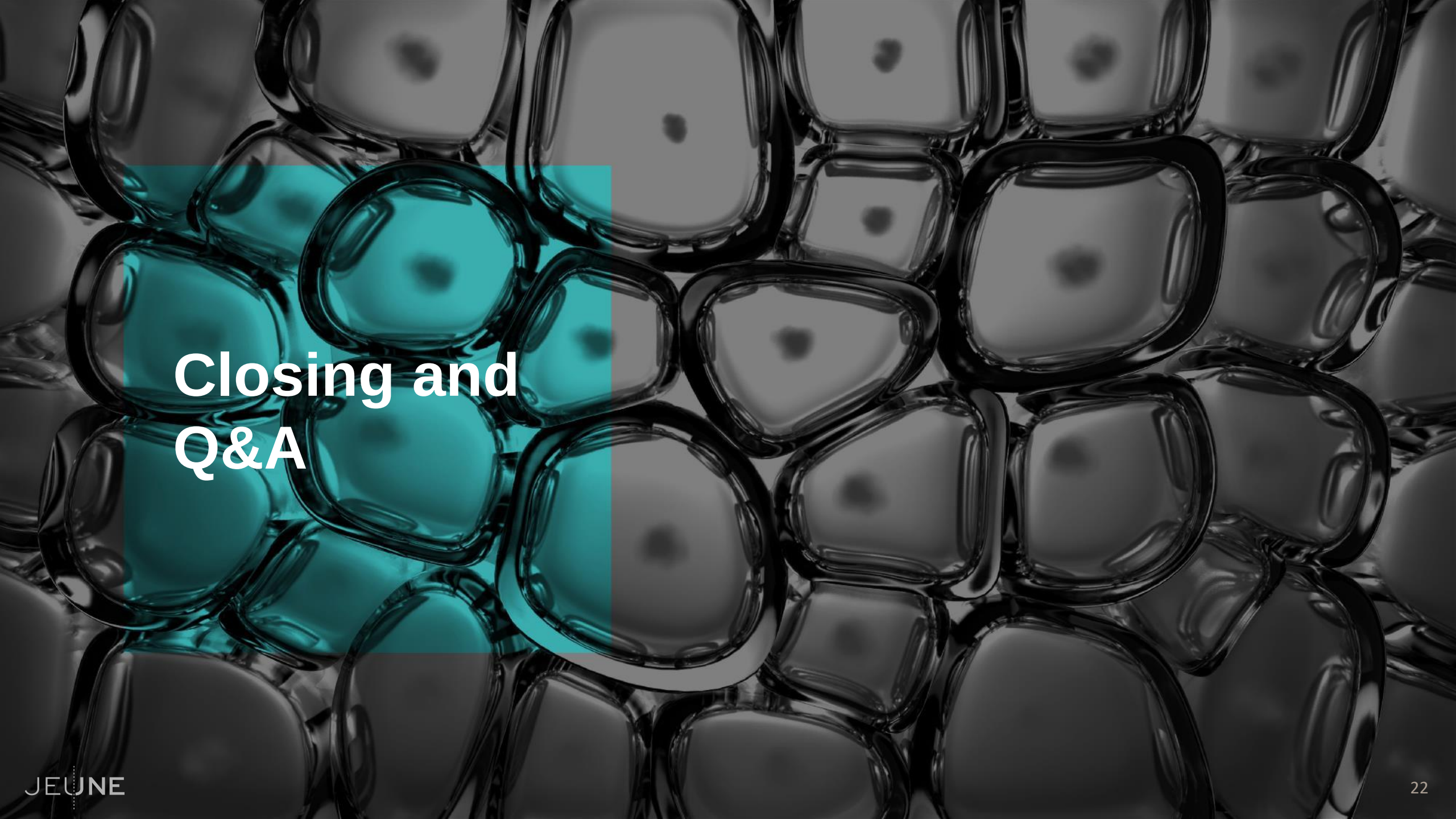


9 Months



Conclusions

- Results from open-label PEARL-1 Cohort 2 Extension demonstrate evidence of durable treatment response approximately 7, 8, and 9 months after last dose as indicated by:
  - Sustained change in Subject Satisfaction Scores compared to pre-treatment
  - Percent of responders by Subject Satisfaction Score
  - Percent of cheeks demonstrating clinically meaningful change from baseline based on Investigator Assessment



Closing and Q&A