

Upcoming events.

*FY results	March
*Valuation deep-dive	March
IP Group flagship science event	Мау
*Parkwalk meet the portfolio event	June
*AGM and life sciences investor update	June
*H1 results	August
*IP Group deeptech event	September
Kiko/McKinsey event	ТВС
*IP Group cleantech event	ТВС
*ESG deep-dive	ТВС
*IP Group 'deeptech' conference (Asia)	2024

^{*}Available to all shareholders



Investments with impact.

IP Group is a leading investor in breakthrough science and innovation companies with the potential to create a better future for all



Expertise.

Deep sector expertise built over many years



Impact.

Delivering social and environmental benefits, aligned with SDGs



International group.

Network of relationships in key territories



Permanent capital structure.

Advantages over fixed life fund model



Portfolio.

Built on access to leading science and technology



Track record.

3 unicorns created

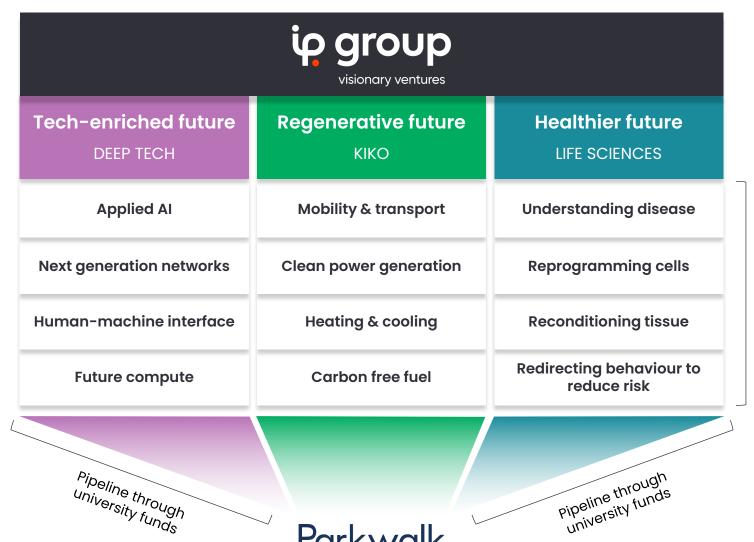








Deep sector expertise with clear focus areas.



Investing in Innovation

Parkwalk is a wholly-own subsidiary of IP Group, retains its own investment committee



Inflection points over the next 12-18 months.



istesso

GENOMICS



F E A T U R E S P A C E







Life Sciences

Clinical trial progress and revenue growth

Technology

Revenue growth

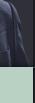
Cleantech

Technical progress, significant fundraisings and new pipeline



Agenda.





Greg Smith

Intro

09:30





09:35

Dr Sam Williams Overview of Life Sciences portfolio





09:45

Professor Sir Peter Donnelly

GENOMICS



10:00

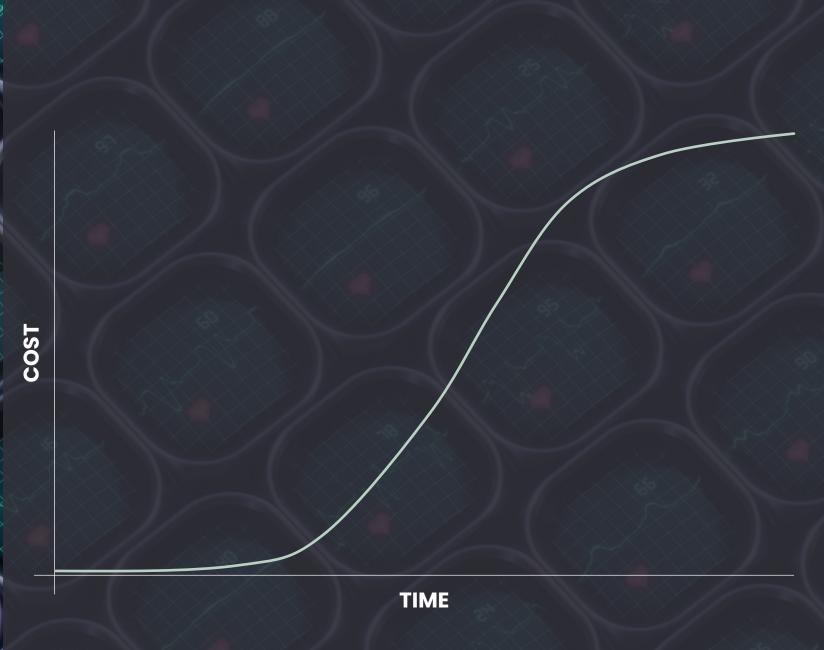
Dr Gordon Sanghera

Q&A





Healthcare costs vs time-to-intervention.

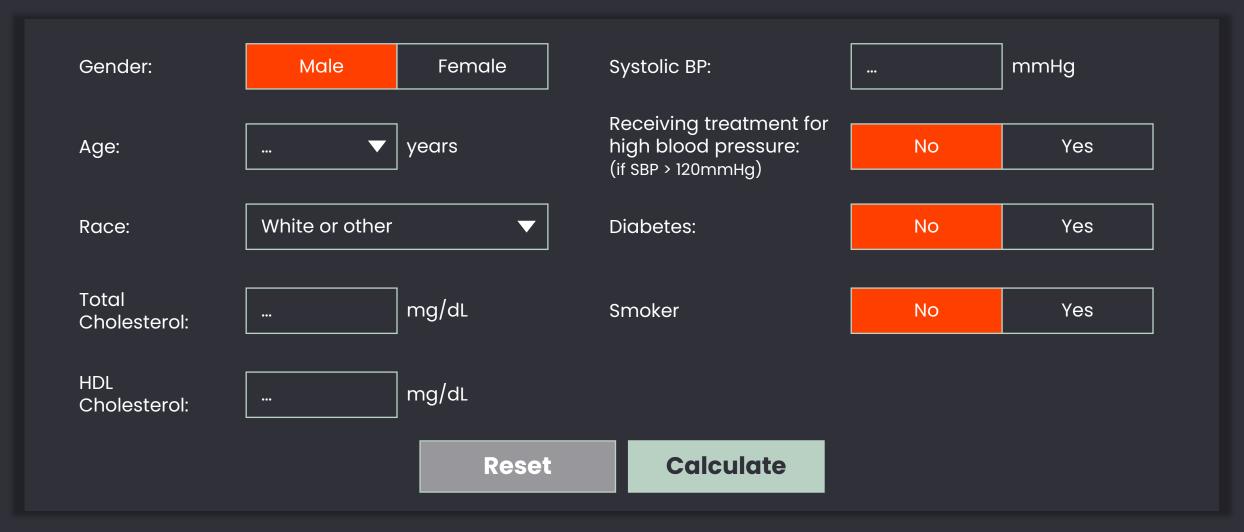


Healthcare costs vs time-to-intervention

REACTIVE TIME



Risk factors for ASCVD.





Healthcare costs vs time-to-intervention.

PROACTIVE

TIME



Understanding



Reprogramming



Reconditioning







Understanding

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Reprogramming



Reconditioning







Understanding

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Reprogramming





Reconditioning







Understanding

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ieso



Reprogramming



therapeutics



Reconditioning











Understanding

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Reprogramming



Mission



Reconditioning







Redirecting

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Eight clinical readouts by 2025.



^{*} Based on valuation of IP Group's stake in company at 31/12/22, including debt where applicable.



¹ Artios announced the initiation of Phase 2 trial in Feb 2023.

² Mission Therapeutics announced the completion of Phase 1 trial in Jan 2023.

³ Oxular announced the acceptance of IND in Jan 2023.

GENOMICS Unlocking Sustainable Personalised Healthcare

Company Overview

The next wave of genomics in healthcare will be for common diseases and will touch huge numbers of people around the world

First Wave Next Wave

Genetics for Rare Diseases









Reactive: Aiding Diagnosis & Treatment

Genomic applications limited to rare disease diagnosis and cancer treatment selection, for individuals

Proactive: Widely Used in Prevention of Common Diseases & Cancers

Powerful risk stratification for common diseases and cancers gives effective targeting of **screening**, **prevention**, & **treatment programmes**, at **population scale**

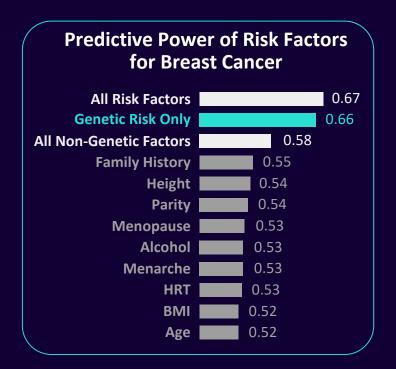
Identifying disease risk better than any other factor

Genetics is a **major risk factor** for all the common diseases and cancers

For many of these diseases it is **the most** important risk factor, often more predictive than all non-genetic risk factors combined

Genetic risk for common diseases is due to the cumulative effects of large numbers of individual DNA changes: polygenic risk

Genetic Risk Scores: a **single test** measuring susceptibility to many common diseases simultaneously



Genetic Risk Scores Are The Best Single Method of Determining Susceptibility to Disease



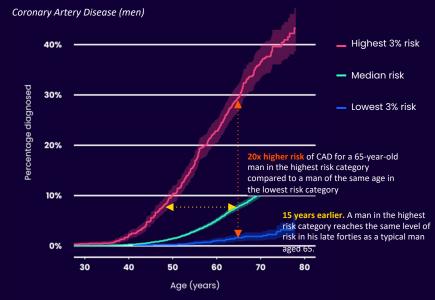
The game-changer: we can now measure genetic risk for common diseases and avoid downstream acute care costs

A new set of tools now enables us to capture polygenic risk to measure an individual's genetic risk for common diseases

Genetic risk is a very powerful predictor: can explain >20x difference in disease incidence

Genetic risks can be measured, quantified, and acted on years before symptom onset and expensive acute care costs

Accurately predicting an individual's genetic susceptibility to disease



Genetic Risk Scores reveal large variations in disease incidence



Genomics plc has the best-performing and broadest polygenic risk offering

Type 2 diabetes * Prostate cancer Alzheimer's disease Primary open angle glaucoma Hypertension

Coronary artery disease

Breast cancer

Lung cancer

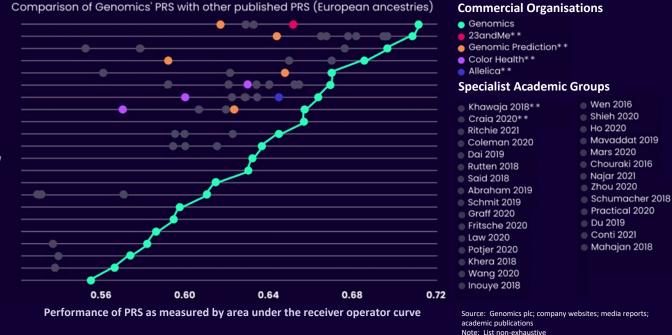
Atrial fibrillation Systemic lupus erythematosus Melanoma **Bowel cancer** Chronic obstructive pulmonary disease Cardiovascular disease Osteoporosis Ischaemic stroke Non-alcoholic fatty liver disease Rheumatoid arthritis

Age-related macular degeneration

Major depressive disorder

Chronic kidney disease

Anxiety disorders



Genomics plc PRSs cover more diseases than competitors and outperform specialist academic groups

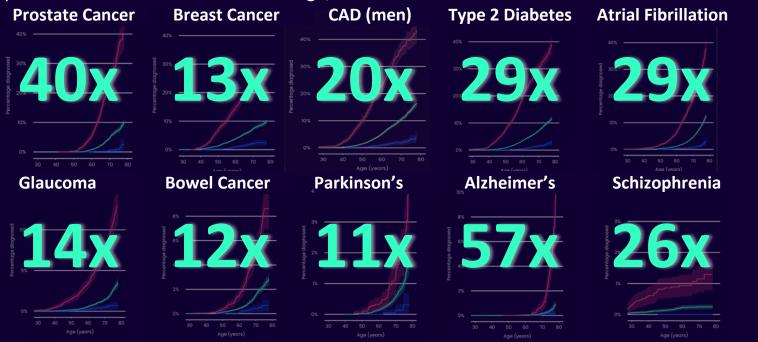
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^(*) Genomics plc clinical validation papers: Weale et al, Validation of an Integrated Risk Tool, Including Polygenic Risk Score, for Atherosclerotic Cardiovascular Disease in Multiple Ethnicities and Ancestries, The American Journal of Cardiology (2021); BC & PC - manuscripts in progress.

^(**) Publications by Homburger et al (2019) for Color; Lello et al (2020) for Genomic Prediction; Udler et al (2019) for 23andMe; Billi et al (2021) for Allelica, Khawaja et al (2018), and Craig et al (2020).

Genomics plc tools are the most powerful in identifying variation in risk

Multiplier in disease incidence between High/Low Genetic Risk for Ten Selected Common Diseases



High variances in risk exist across many diseases, Genomics plc tools cover >50 diseases

Commercial opportunities across 3 customer segments leverage the same underlying technology



Enterprise

Double-digit \$m contract with US life insurer signed for delivery in 2023. Scaling-up now across key customer groups with large captive audience.

Customers

- Global Life Insurers & Reinsurers
- Large, Self-Insured Employers
- Employer Benefits Companies
- Executive Health Checks

TAM:





Life Sciences

Applications

- Target / Indication Intelligence
- Clinical Development
- Commercial / Marketed Tx
- Companion Diagnostics (CDx)

TAM: \$25+



Payers & Providers

- A Population Health (Requires clinical & CE evidence)
- Single Payer Health Systems
- Value Based Care
- Reimbursement for Prevention
- **B** Near-Term Revenue
- Fee-for-Service Providers
- Companies Selling into Healthcare
- Health Test Providers

TAM:

\$50+

Successful NHS clinical trial establishes clinical utility

World-first trial, HEART, using Genomics risk assessment in cardiovascular disease prevention carried out with the NHS

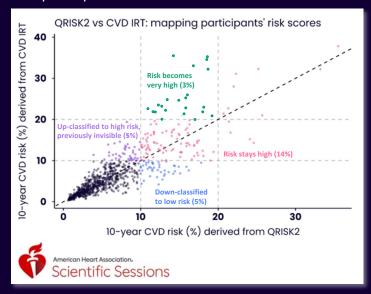
Demonstrates successful integration of PRS into current GP (PCP) clinical practice

24% of participants had clinically significant changes in CVD risk when genetics added to QRISK in an integrated risk tool

GPs reported they would change their management of 13% of the study population as a result of their integrated genetic risk

QRISK2 versus CVD IRT

832 participants



Implemented across England for 45-65 year olds, potential to avoid 18,560 acute events



Strong support from clinicians, key opinion leaders, and patients



"Advances in risk prediction have contributed to the significant fall we've seen in cases of heart and circulatory diseases in recent decades.

Personalised medicine, including incorporation of genetic tests, will be one of the **defining advances** of the coming decades."

- Professor Sir Nilesh Samani, Medical Director British Heart Foundation

"The HEART study has shown us that this kind of genomic testing has the **potential to transform** the way we manage cardiovascular disease in primary care.

I changed my management of a number of my patients directly due to the new information coming through from the integrated tool."

- Professor Ahmet Fuat, Chief Investigator HEART



NHS pilot

91% of healthcare providers found integration straightforward

87% of participants would recommend to friends & family



Genetic tests could identify people at risk of heart disease, NHS study finds

World-first pilot in England helps identify those who could be offered statins, who would otherwise be 'invisible' to NHS.



eople most at risk of heart disease in the work

The NHS study, called Heart, offered genetic te cardiovascular disease over the next 10 years.

DNA test will show patients' hidden risk of heart disease

New genetic tests 'can identify those at risk of heart disease

ew predictive genetic tests have allowed GPs in north England to identify people most at risk of heart disease in the world's first pilot of the technology

aged between 45 and 64, in the hone of better predicting their risk of developing cardiovascular disease over the next 10 years.

Practitioners at 12 GP surgeries in the north-east and north Cumbria found that the calculated risk of heart disease based on routine measures such as view in the morth-cast and morth-Combrid found that the family history, blood pressure, body mass index and smoking status aged 45 to 64, in the hope of better predicting t changed for about a quarter of participants when their DNA was taken into

> In 13 per cent of cases, GPs said the shift in heart disease risk was substantial enough for them to change their management of the patient, for ortion treatment example by recommending cholesterol-lowering statins.

Professor Sir Peter Donnelly, the founder and chief executive of Genomics the company that developed the genetic tests, said a further 700,000 people in England aged 45 to 64 had a high enough risk of heart disease to be recommended statins, but were "invisible to the NHS" because existing

The Telegraph



Genetic tests could save patients at 'invisible danger of heart attacks and strokes

tatins, pillot study finds

herwise he "invisible" to the NIIS, a pilot study has found.

Heart, offered genetic tests to nearly 1,000 people aged 45 to or predicting their risk of developing cardiovascular disease

disease based on mutine measures such as family history mass index and smoking status changed for about a quarter of

nations - for example, by offering statios



World first large scale roll out of genetic risk scores in healthcare

Our Future Health (OFH), the flagship UK programme with the NHS to recruit 5M participants over 5 years

Genomics will be the exclusive supplier of Genetic Risk Tools in OFH

Risk information based on **Genomics plc Genetic Risk Tools provided to** individuals and NHS

Working with NICE to obtain endorsement and scale-up - a worldwide reference point





Deliver population level risk stratification and clinical benefits

Implemented across England for 45 to 65 year olds, we project:

700,000 hidden individuals would be identified as high risk for **CVD** - potentially avoiding 18,560 acute events

350,000 women between 45-49 would be up-classified into moderate or high risk of breast cancer - 2X detection rate

Improved **bowel cancer** screening selection increases colonoscopy detection rate by over 20%

Lower use of costly DEXA scans for osteoporosis but 2X+ identified at high risk



Avoid 18,560 CVD Events



2X Detection Rates of **Breast Cancer**



2X Detection Rates of **Osteoporosis**



GENMICS







Resolutions.

1.	Receive Report and Accounts for year ended 31 December 2022	n.	Re-elect Ms Aedhmar Hynes
2.	Approve Directors' Remuneration Report	12.	Re-elect Mr Greg Smith
3.	Declare Final Dividend of £0.0076 per share for year ended 31 December 2022	13.	Re-elect Dr Elaine Sullivan
4.	Re-appoint KPMG LLP as auditor	14.	Authority to allot shares
5.	Authorise Directors to fix the remuneration of the auditor	15.	Disapplication of pre-emption rights
6.	Elect Ms Anita Kidgell	16.	Further disapplication of pre-emption rights
7.	Re-elect Mr David Baynes	17.	Political expenditure
8.	Re-elect Dr Caroline Brown	18.	Authorisation to make market purchases of own shares
9.	Re-elect Mr Heejae Chae	19.	To hold a general meeting on 14 clear days' notice
10.	Re-elect Sir Douglas Flint		



Proxy Results.

Resolution	Votes For		Discretion		Votes Against		Votes Withheld
	Votes	%	Votes	%	Votes	%	Votes
1.	751,804,789	99.98	5,210	0.01	23,443	0.01	5,668,073
2.	643,182,974	85.98	5,210	0.01	104,756,327	14.01	9,557,004
3.	757,473,862	99.98	5,210	0.01	12,452	0.01	9,991
4.	752,186,188	99.29	5,210	0.01	5,267,200	0.7	42,917
5.	757,421,409	99.98	5,210	0.01	32,885	0.01	42,011
6.	731,943,382	96.64	5,210	0.01	25,401,836	3.35	151,087
7.	756,493,410	99.87	5,210	0.01	889,906	0.12	112,989
8.	749,334,751	98.93	5,210	0.01	8,049,464	1.06	112,090
9.	719,163,628	94.94	5,210	0.01	38,217,371	5.05	115,306
10.	741,853,880	97.94	5,210	0.01	15,525,370	2.05	117,055
11.	748,380,618	98.8	5,210	0.01	9,004,528	1.19	111,159
12.	756,776,091	99.91	5,210	0.01	610,176	0.08	110,038
13.	736,270,705	97.87	5,210	0.01	15,952,050	2.12	5,273,550
14.	750,475,454	99.07	5,210	0.01	6,960,298	0.92	60,553
15.	717,887,563	94.77	5,210	0.01	39,545,240	5.22	63,502
16.	697,420,347	92.07	5,210	0.01	60,011,259	7.92	64,699
17.	721,652,334	95.26	5,210	0.01	35,833,896	4.73	10,075
18.	750,528,521	99.1	5,210	0.01	6,776,371	0.89	191,413
19.	746,604,840	98.56	5,210	0.01	10,861,966	1.43	29,499
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