

Recoding in Action

JP Morgan 2020

LET'S
RECODE
THE STORY

forward-looking statements

These slides and the accompanying oral presentation contain forward-looking statements and information. The use of words such as “may,” “might,” “should,” “expect,” “plan,” “anticipate,” “believe,” “estimate,” “project,” “intend,” “future,” “potential,” or “continue,” and other similar expressions are intended to identify forward-looking statements. For example, all statements we make regarding the initiation, timing, progress and results of our preclinical and clinical studies and our research and development programs, our ability to advance product candidates into, and successfully initiate or complete, clinical studies, the timing or likelihood of regulatory filings and approvals or the requirements that may be imposed, and the timing and likelihood of entering into contracts with payors for value-based payments over time or reimbursement approvals, and our commercialization plans for approved products are forward looking. All forward-looking statements are based on estimates and assumptions by our management that, although we believe to be reasonable, are inherently uncertain. All forward-looking statements are subject to risks and uncertainties that may cause actual results to differ materially from those that we expected. These statements are also subject to a number of material risks and uncertainties that are described in our most recent quarterly report on Form 10-Q, as well as our subsequent filings with the Securities and Exchange Commission. Any forward-looking statement speaks only as of the date on which it was made. We undertake no obligation to publicly update or revise any forward-looking statement, whether as a result of new information, future events or otherwise, except as required by law.

**Must
Beat the
Odds.

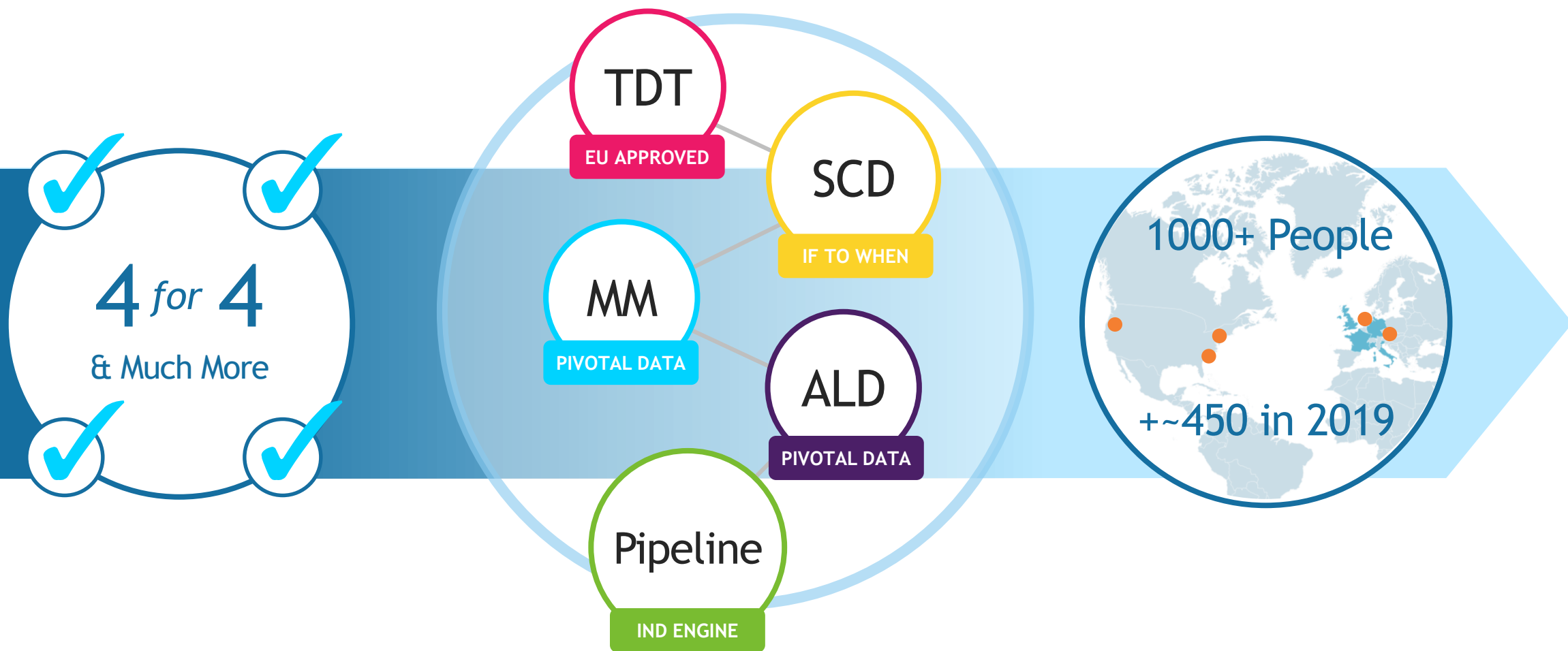
Period.**



Antifragility is beyond resilience or robustness.
The resilient shocks and stays the same;
the antifragile gets better.

- Nassim Nicholas Taleb, author, *Antifragile: Things That Gain from Disorder*

2019 - A Foundational Year



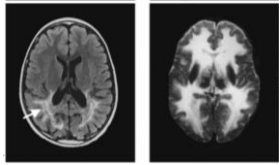
Cerebral Adrenoleukodystrophy - From Tragedy to Hope

2009

Science

AAAS

24 months
after gene
therapy →



24 months
after,
untreated ←

RECODE

Enhanced Construct
&
Manufacturing

EPNS: 2019

- ✓ 15/17 patients alive and MFD-free at 24 months follow up and continue to be MFD-free with up to 5 years of follow-up

- ✓ 32 total patients treated

Data as of April 25, 2019

2020

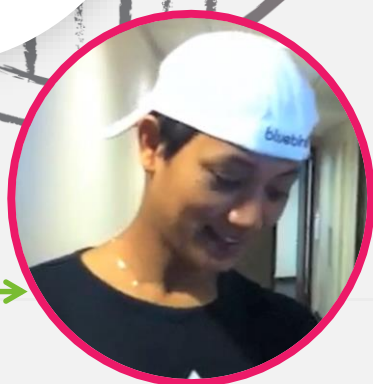
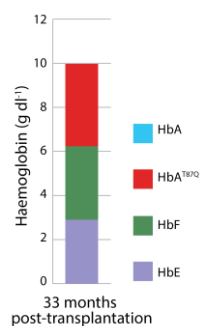
- 2H 2020 anticipated regulatory submission
- Newborn screening active in 14 US states; several pilot programs in EU



Transfusion-Dependent β -Thalassemia - Reimagined Future

2010

nature



RECODE

Vector Potency &
Manufacturing
Enhancement

ASH 2019

- 90% of evaluable patients with a non-B0/B0 genotype achieved TI, with median average total Hb levels of 12.2 g/dL in Phase 3 Northstar-2 (HGB-207) study

Data as of June 12, 2019

zynteglo[®]
(autologous CD34⁺ cells
encoding β^{A-T87Q} -globin gene)

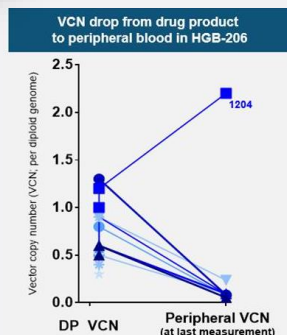
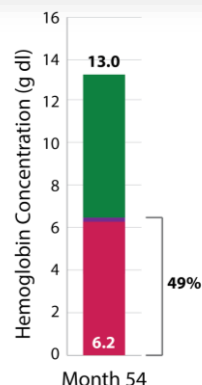
- ✓ EU Approved 2019
- ✓ US rolling BLA initiated 2019

Sickle Cell Disease - Daring to Dream

2017



The NEW ENGLAND
JOURNAL of MEDICINE



RECODE

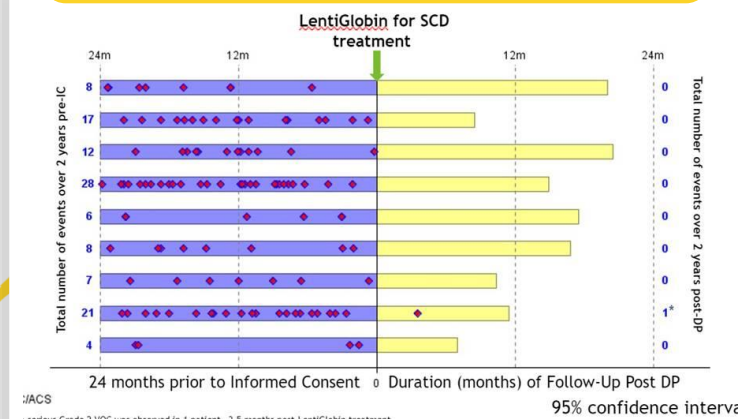
Pre-Tx Transfusions

More Thorough Conditioning

Higher Cell Dose

Higher VCN

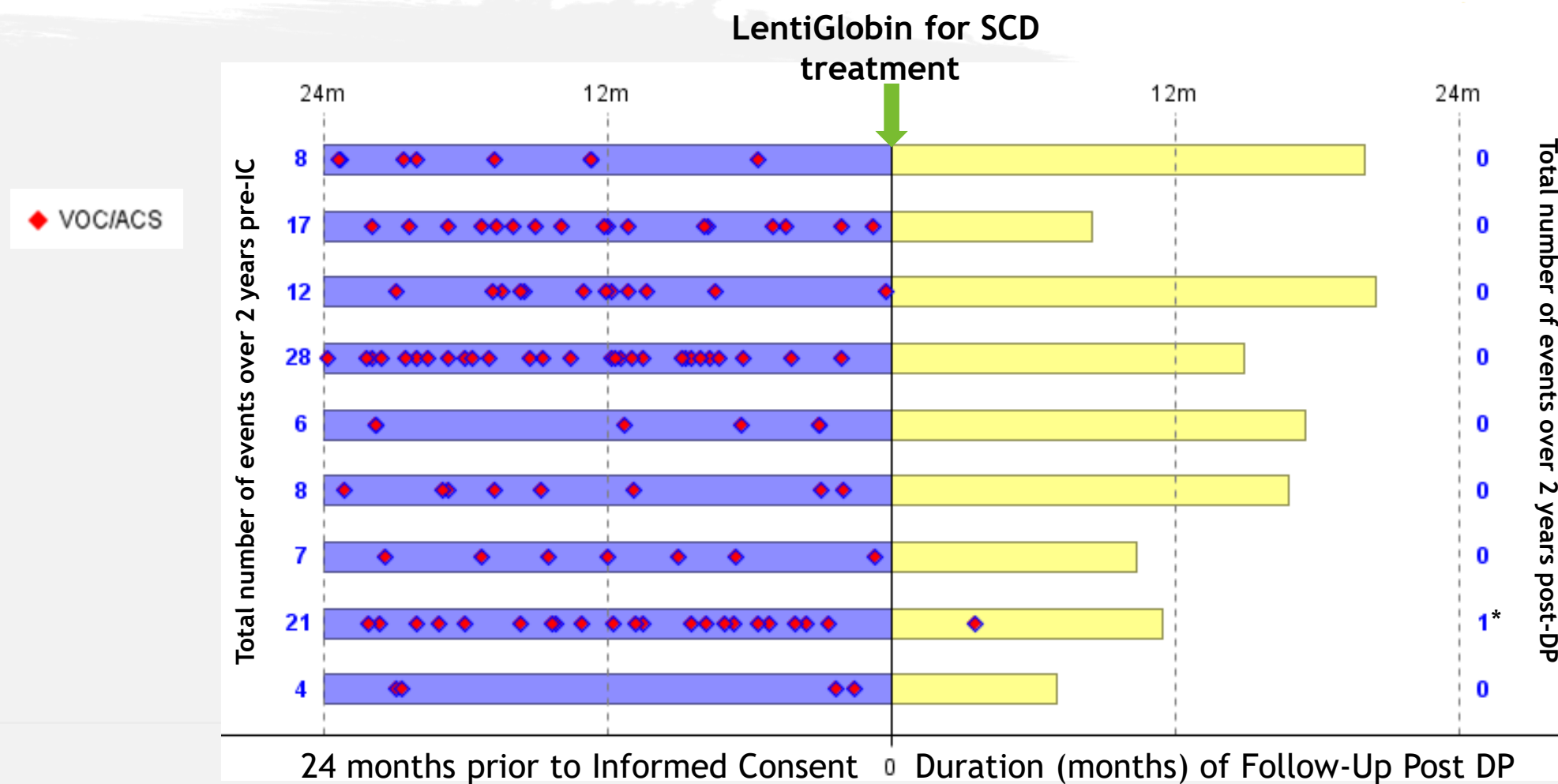
ASH 2019



99% reduction in annualized rate of VOC + ACS*

• Accelerated development underway

Sickle Cell Data - Take a Closer Look



*As previously reported, 1 non-serious Grade 2 VOC was observed in 1 patient ~3.5 months post-LentiGlobin treatment
Investigator-reported adverse events of VOC or ACS are shown; *Patients with ≥ 4 VOC/ACS at baseline before Informed Consent and with $\sim \geq 6$ months of follow-up post-DP infusion
ACS, acute chest syndrome; VOCs, vaso-occlusive crises; DP, drug product

Multiple Myeloma - Changing What's Possible

Standard of Care*

- ~4 months PFS
- ~30% ORR
- ~3% CR



RECODE

BCMA Target &
Next-Gen CAR

2019 - KarMMa topline

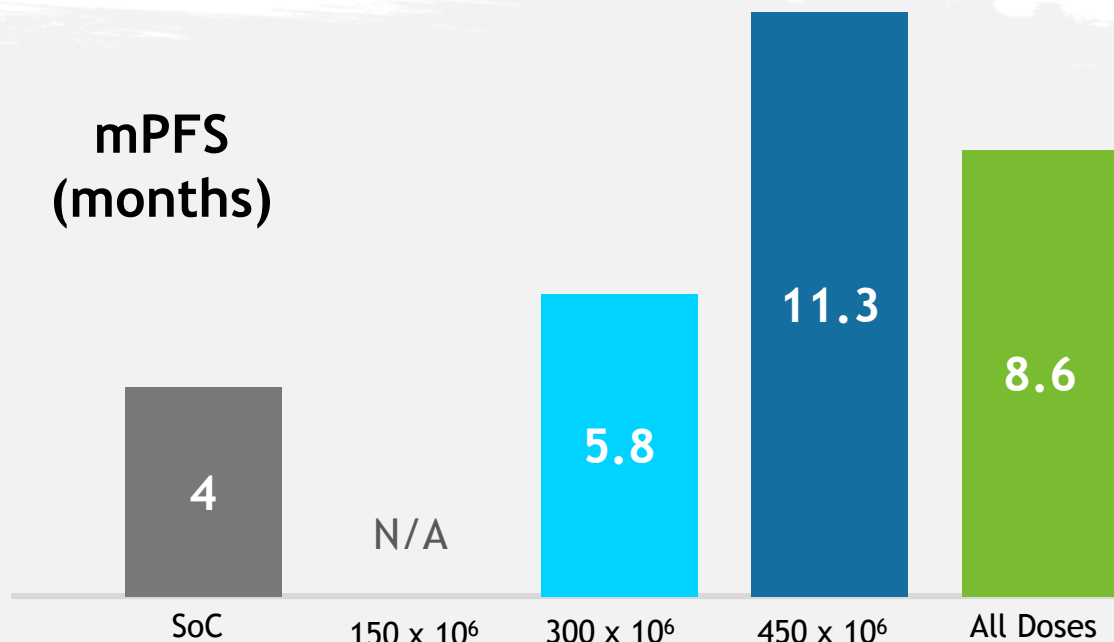
- ✓ Positive Pivotal Data
- ✓ Met primary and secondary endpoints
- ✓ Deep and durable responses across dose levels

2020

- 1H 2020 anticipated U.S. BLA submission
- Ongoing studies in 3L, 2L and 1L (Newly Diagnosed)

ide-cel (bb2121) - Positive Pivotal Data

mPFS
(months)



	150 x 10 ⁶ CAR+ T cells (N=4)	300 x 10 ⁶ CAR+ T cells (N=70)	450 x 10 ⁶ CAR+ T cells (N=54)	All Doses (N=128)
ORR, n (%)	2 (50.0)	48 (68.6)	44 (81.5)	94 (73.4)
CR/sCR, n (%)	1 (25.0)	20 (28.6)	19 (35.2)	40 (31.3)
Median DoR, mo	---	9.9	11.3	10.6

Heavily pretreated population

- 94% refractory to anti-CD38, 84% triple refractory
- All patients were refractory to their last treatment (progression during or within 60 days of last therapy)

Deep and durable responses across dose levels

- mPFS of >11mo at the 450 x 10⁶ dose
- Durability is consistent across doses

Safety consistent with the Ph1 data

- Gr ≥ 3 CRS and iiNT were reported in <6% of subjects at each target dose
- CRS and iiNT of any grade occurred in 83.6% and 18% of patients, respectively

Intense & Steep Innovation Curve - R&D With a Soul

RESEARCH INNOVATION ENGINE



PLATFORM TOOLS
& TECH



ACADEMIC
COLLABORATORS



INDUSTRY LEADING
PARTNERS

NEXT GEN
PRODUCT
CANDIDATES

INTEGRATE

1:Many
R&D
Strategy

ITERATE

CLINICAL EXPERIENCE

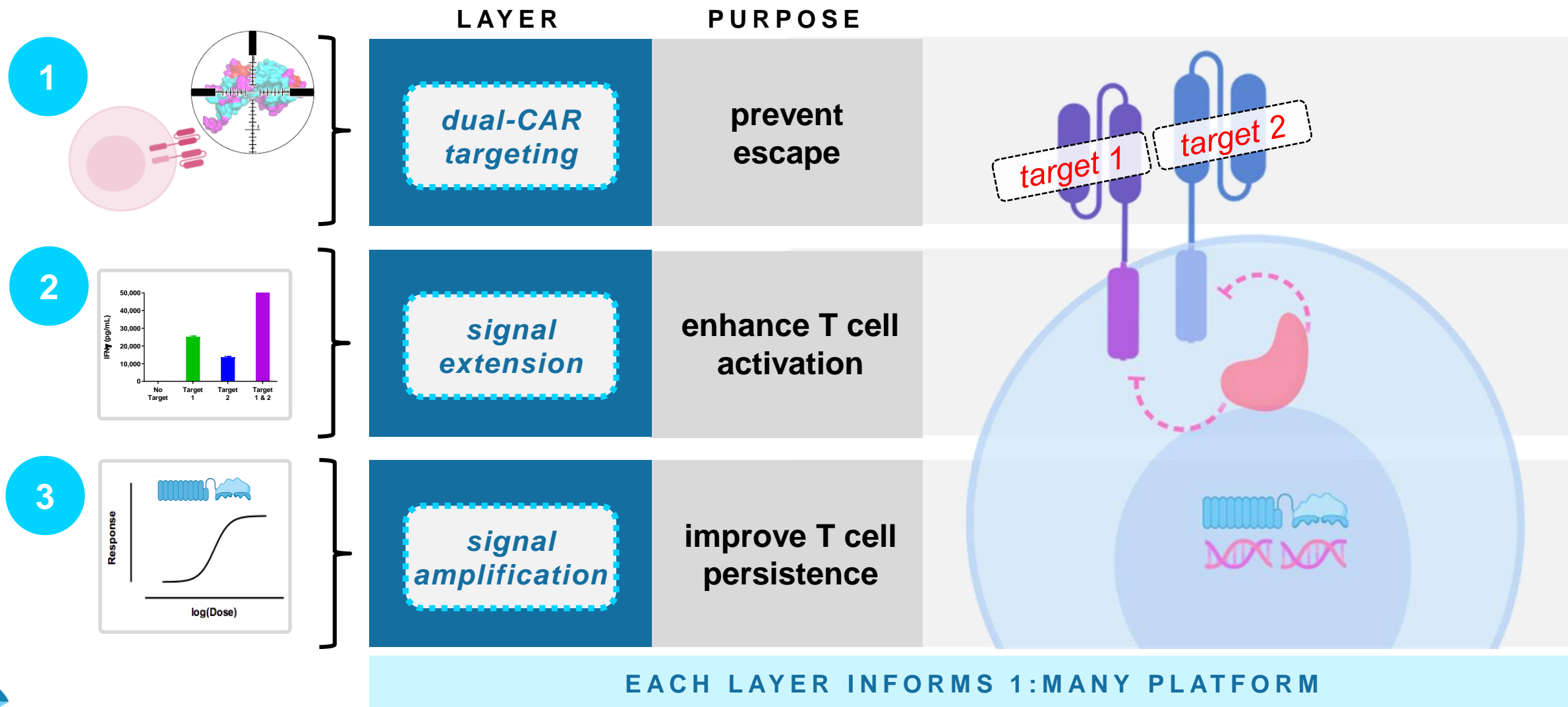
- MM – bb21217
- SCD – BCL11a
- MCC – MCC1 TCR

- ZYNTEGLO™ for β-thalassemia
- ide-cel for MM
- LentiGlobin for SCD
- Lenti-D for CALD

ASK & ANSWER ENGINE

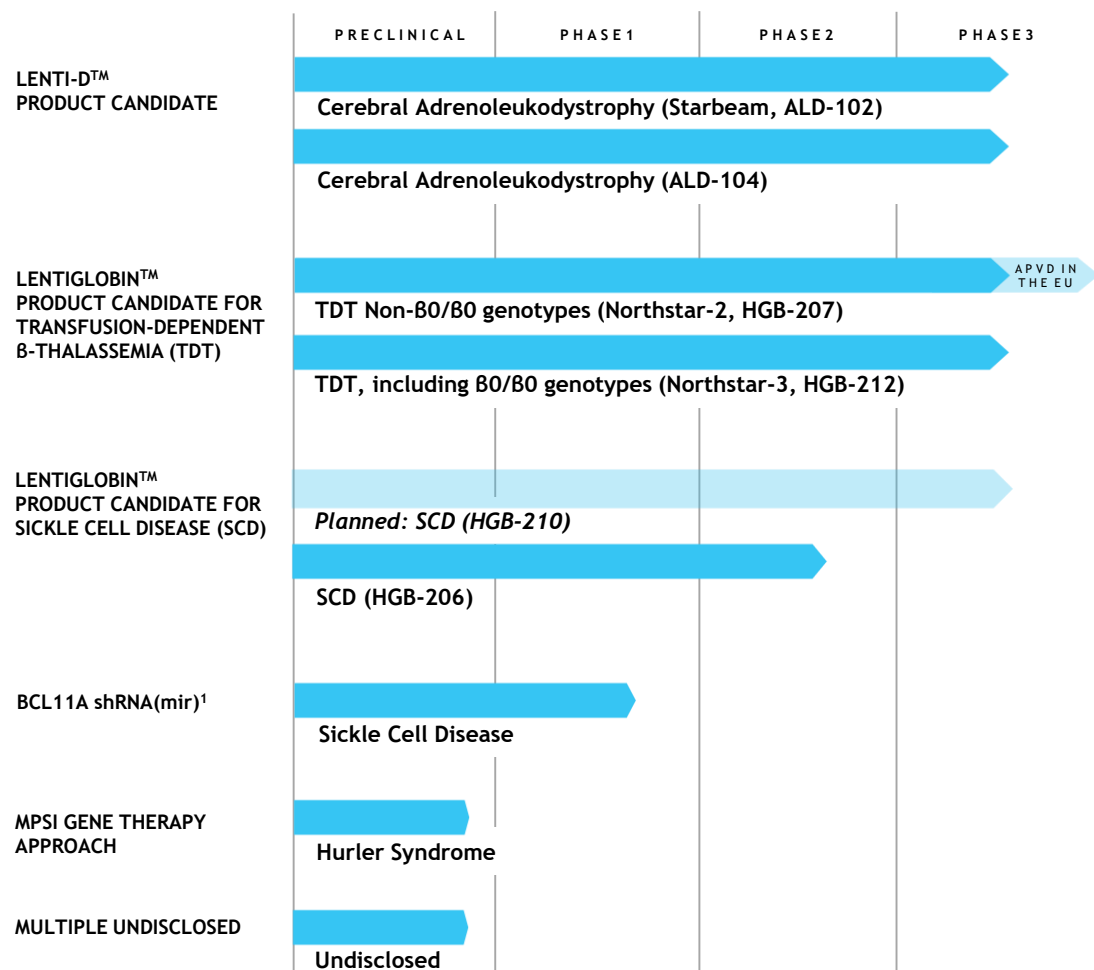


Diffuse Large B-Cell Lymphoma -Triple Threat Approach



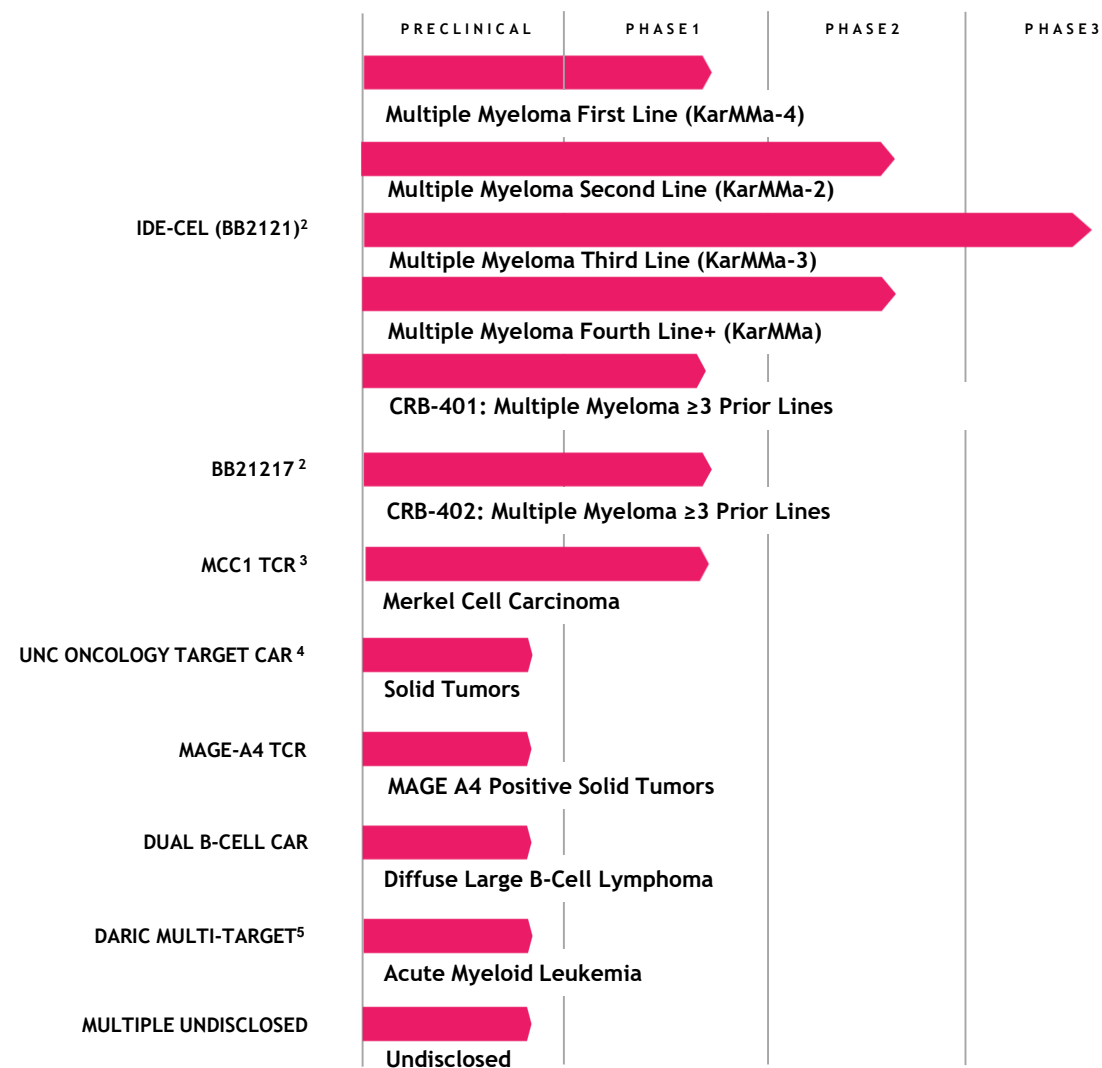
Engine Starting to Deliver

Severe Genetic Diseases

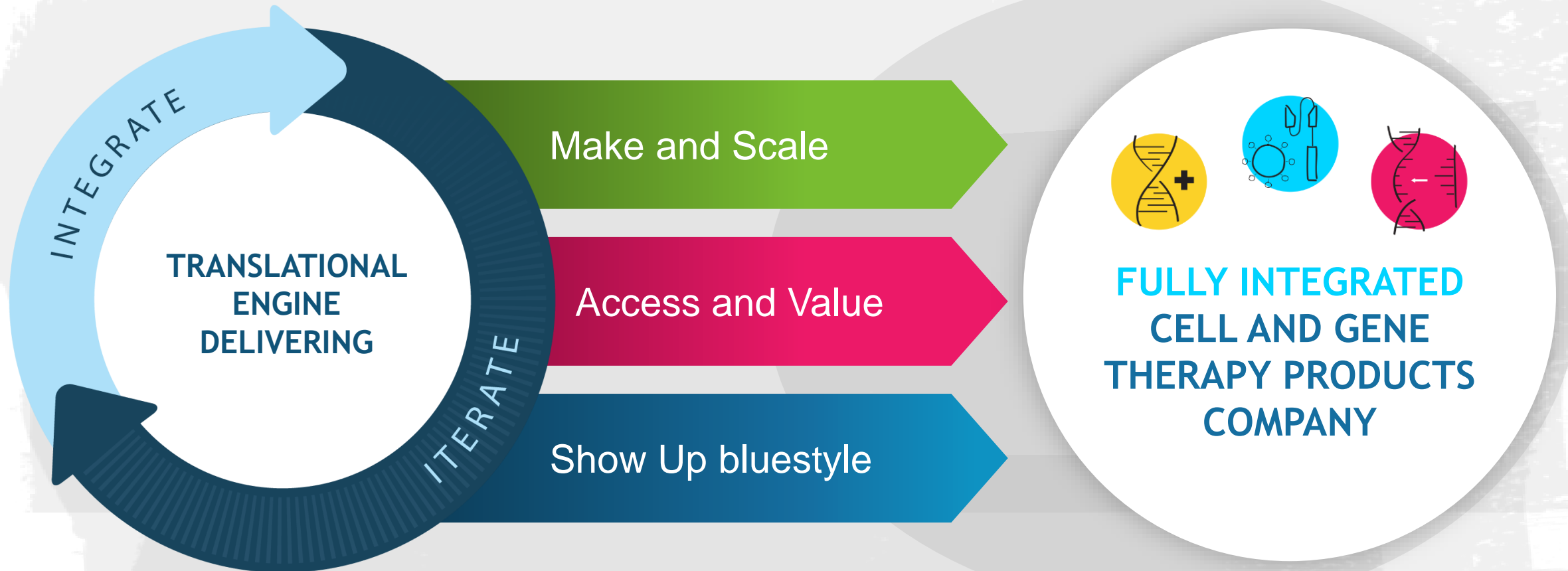


- ¹ Dev is led by Dana-Farber/Boston Children's Cancer and Blood Disorders Center
² Dev is led in collaboration with Celgene
³ Dev is led by Fred Hutch Cancer Research Institute
⁴ Dev is led by University of North Carolina
⁵ Dev is led by Seattle Children's Research Institute

Oncology



Path to Patients - Underappreciated Opportunity



Path To Patients - Making It Happen In The Real World

SUSPENSION



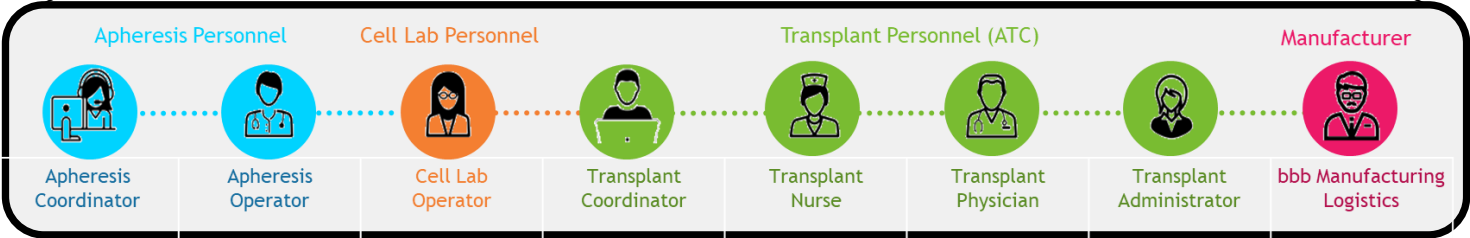
Treating Patients
At Scale



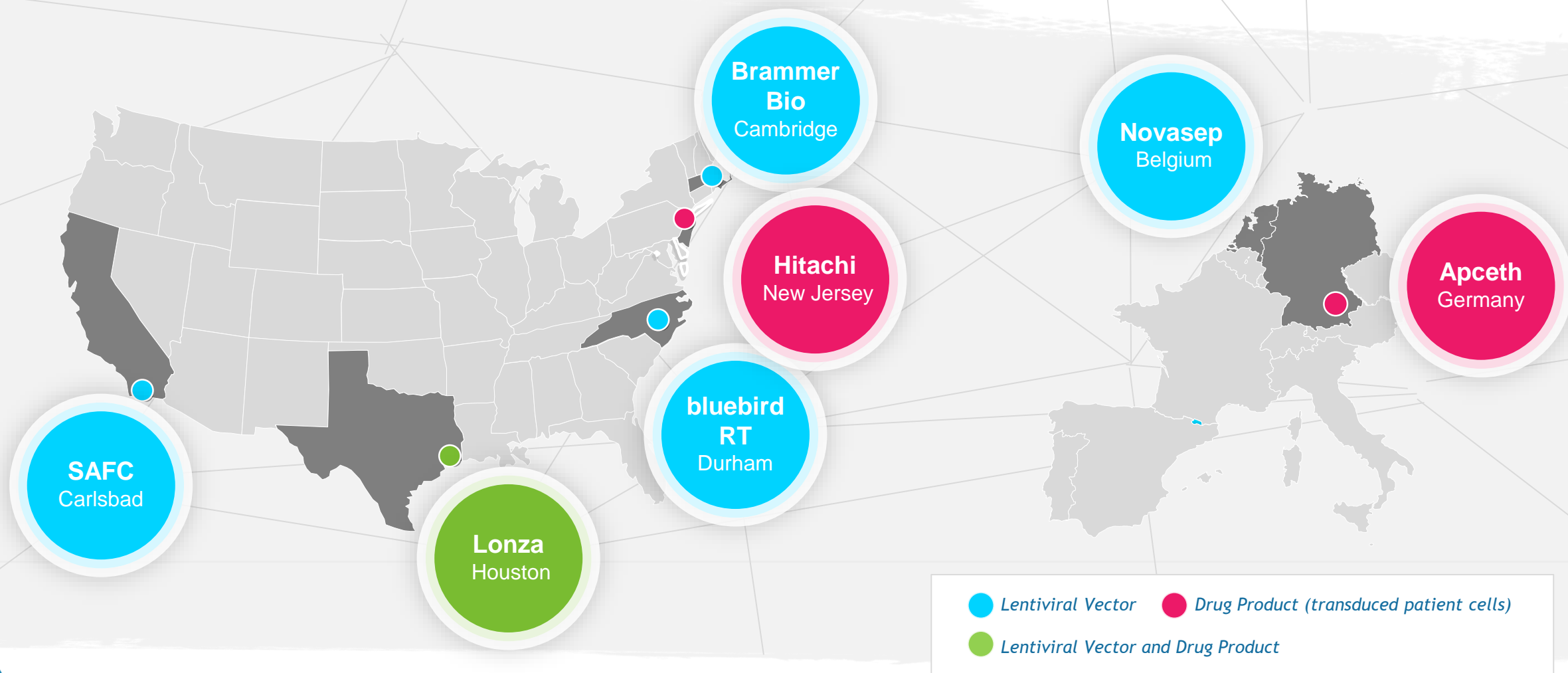
COMMERCIAL QUALIFIED TREATMENT CENTERS (QTCs) & DRUG PRODUCT



Delivering For
Commercial



Manufacturing Network Strategy - Product Supply Through Both Internal Capacity & Contract Partners



Access & Value - As An Ecosystem We Can ALL Do Better

Poor Behaviors Persist

- EPS & Q2Q Driven Mindset
 - Because-You-Can Pricing
 - Unexplainable Price Increases
 - Excessive Innovator Rewards - Top 10 Medicines Anticipated ~\$1.4 TRILLION in Revenue Through 2024*
- Defending the Status Quo
 - Biosimilar Resistance and Patent Extensions

Good Behaviors Gaining

- Transparent Engagement Across Stakeholders
- Limiting/Eliminating Price Increases
- Resolving Patient Co-Pay and Access
- New Ideas Taking Hold (And Expected)
 - Prevalence Based Revenue Capping
 - At-Risk / Outcomes Based Payments
 - EQRx Newco - “Me Too @ Lower Cost”

bluebird Value Principles and Proposed Payment Model

Fair Value
Recognition

QoL &
Life Extension

Share
Risk

Up to 80% at
Risk

Consider
Patient
Affordability

Payment over
~5 years

System
Affordability

Capped
Lifetime Cost

BE RESPONSIBLE, FUND INNOVATION AND DON'T DO STUPID STUFF

Year 1

Year 2

Year 3

Year 4

Year 5

NO COST

Potential Lifelong Benefit

Payments only made with success

zynteglo®

- ✓ Estimated cost effective value \$3-4 million, ~\$2M based on life extension and quality of life (excluding cost offsets)
- ✓ Lifetime cost if successful: \$1.76* million (€315K/year, capped at 5 years)

Establishing Promising Access & Value Foundation



EU Launch Readiness

- ☒ First ever at-risk value-based agreement signed with multiple Sick Funds in Germany (~50-70% of patients in Germany covered)
- ☒ Team in place in Zug, UK, France, Italy, Germany, and Nordic Markets
- ☒ Qualified Treatment Centers and manufacturing ready in Germany



U.S. Launch Readiness

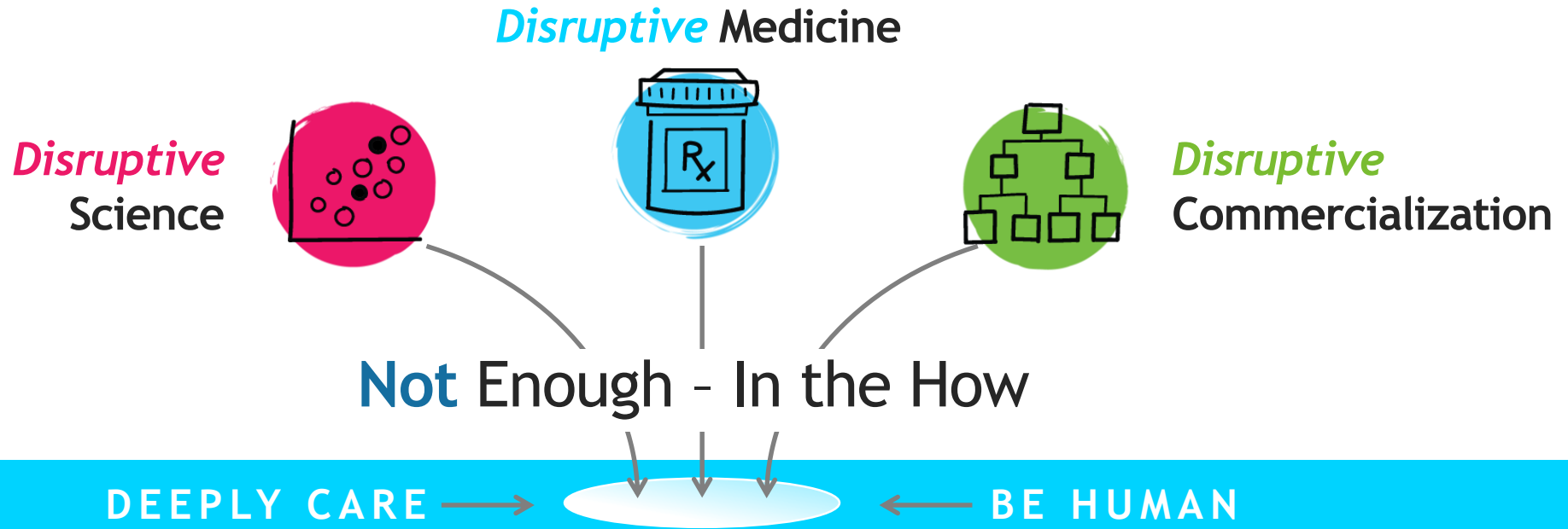
- ☒ Team in place for U.S. commercialization
- ☐ Payers (Commercial) - Actively engaging to enable access & value-based payment over time at launch
- ☐ Policy (State & Federal) - Focused on enabling value-based payment over time in commercial and for Medicaid markets to drive access
- ☐ Distribution - Establishing customized distribution model to serve QTC & payer needs



Market and Patient Engagement

- ☒ Disease Education and outreach in place
- ☒ Patient Advocacy education and initiative support

Path to Patients - Show up bluestyle



At Every Turn, Every Interface

Just Different - Our Biggest Compliment



Apheresis Centers & Staff



Institutions/Doctor's Office



Families & Patients



bluestyle

- Truly put patients first - care deeply and be human
- Focus on enabling best decision for patient/family
- Seamless gene therapy delivery for optimized patient experience
- Relationships = Trust = Better Care
- Listen and Learn
- Improve every day

What if this were you, your family, your child?

Planned 2020 Milestones - Distilling to Practice

	FIRST HALF 2020	SECOND HALF 2020
Regulatory Submissions	<ul style="list-style-type: none"> Ide-cel (bb2121) MM U.S. BLA submission ZYNTEGLO completion of U.S. BLA submission 	<ul style="list-style-type: none"> Lenti-D CALD EU MAA and U.S. BLA Submissions
Clinical Updates	<ul style="list-style-type: none"> Ide-cel (bb2121) KarMMa and CRB-401 data* LentiGlobin SCD Phase 3 HGB-210 study start 	<ul style="list-style-type: none"> Lenti-D ALD-102 data update Zynteglo Phase 3 (HGB-207 and HGB-212) data LentiGlobin SCD HGB-206 data and regulatory update
Commercial & Foundation Building	<ul style="list-style-type: none"> ZYNTEGLO first commercial patients treated ZYNTEGLO QTC and Sick Fund contracts in place 	<ul style="list-style-type: none"> ZYNTEGLO Access and Reimbursement in additional EU countries established ZYNTEGLO and ide-cel U.S. launch ready 1-2 New INDs

CASH RUNWAY INTO SECOND HALF 2021

A Bold Vision in 2019 - Becoming a Reality in 2020





everyone deserves a bluebird day!

