



Important Notices

This presentation is provided for informational purposes only and has been prepared to assist interested parties in making their own evaluation of Vincera Pharma, Inc. (“Vincera” or the “Company”) and LifeSci Acquisition Corp. (“LifeSci”) and related transactions (the “Proposed Transactions”).

No representations or warranties, express or implied are given in, or in respect of, this presentation. To the fullest extent permitted by law, the Company, its subsidiaries, stockholders, affiliates, representatives, partners, directors, officers, employees, advisers or agents shall not be responsible or liable for the use of this presentation, its contents, its omissions, reliance on the information contained within it, or on opinions communicated in this presentation. Industry and market data used in this presentation have been obtained from third-party industry publications and sources as well as from the Company. Vincera has independently verified the data obtained from these sources and cannot assure you of the data’s accuracy or completeness. This presentation purport to be all-inclusive or to contain all of the information that may be required to make a full analysis of Vincera or the Proposed Transactions and of the relevance and adequacy of the information and should make such other investigations as they deem appropriate.

Additional Information

In connection with the Proposed Transactions, LifeSci will file with the SEC a proxy statement on Schedule 14A (the “Proxy Statement”) for the common stock when it becomes available. Investors and security holders and other interested parties are urged to read the Proxy Statement available, carefully and in their entirety because they contain important information. Investors and security holders may obtain free copies (when available) and other documents filed with the SEC by LifeSci through the website maintained by the SEC at <http://www.sec.gov>, #3401, New York, NY 10019.

Participants in the Solicitation

LifeSci and Vincera and their respective directors and executive officers and other members of management and employees may be involved in the Proposed Transactions. Information about the directors and executive officers of LifeSci and Vincera will be set forth in the definitive proxy statement filed with the SEC regarding the Proposed Transactions. Stockholders, potential investors and other readers should read the definitive proxy statement before making investment decisions. These documents can be obtained free of charge from the sources indicated above.

No Offer or Solicitation

This presentation shall not constitute an offer to sell or the solicitation of an offer to buy any securities, nor shall there be any sale of securities which would be unlawful prior to registration or qualification under the securities laws of any such jurisdiction. No offering of securities shall be made in violation of Section 10 of the Securities Act.

Forward-looking Statements

This presentation includes certain statements that are not historical facts but are forward-looking statements for within the meaning of the Securities Reform Act of 1995. Forward-looking statements generally are accompanied by words such as “believe,” “may,” “will,” “estimate,” “could,” “predict,” “potential,” “seem,” “seek,” “future,” “outlook,” and similar expressions that predict or indicate future events or trends or that statements include, but are not limited to: statements regarding estimates and other financial and performance metrics; projections of the Company’s mission and business strategy; preclinical and clinical development plan; expected product candidate pipeline and timing of clinical trials and regulatory approval; expected impact and benefits of the Company’s PTEFb platform and bioconjugation platform; the Company’s ability to obtain and maintain intellectual property protection; LifeSci’s ability to consummate a transaction with the Company in the Proposed Transactions. These statements are based on various assumptions and on the current expectations of LifeSci’s and the Company’s management. Forward-looking statements are provided for illustrative purposes only and are not intended to serve as, and must not be relied on as a guarantee of accuracy or probability. Actual events and circumstances are difficult or impossible to predict and will differ from assumptions. These forward-looking statements include, but are not limited to, the following: general economic, financial, legal, political and business conditions and changes in domestic and foreign markets; the potential for LifeSci to enter into definitive agreements or successfully or timely consummate the Proposed Transactions or to satisfy the other conditions to consummate the Bayer license agreement is not entered into, and the risk that any required regulatory approvals are not obtained, are delayed or are suspended; risks associated with the combined company; risks associated with preclinical or clinical development conducted prior to the Company’s in-licensing; the risk that regulatory approval for the Proposed Transactions is not obtained; failure to realize the anticipated benefits of the Proposed Transactions, including as a result of a delay in consummation of the Proposed Transactions associated with, integrating the businesses of LifeSci and the Company; the amount of redemption requests made by LifeSci’s stockholders; the ability of both of LifeSci and the Company to terminate the Business Combination Agreement; risks related to the rollout of the Company’s business combination; assumptions underlying the Company’s expectations regarding its future business or business model; the Company’s ability to develop and commercialize its products; the effects of competition on the Company’s future business. If the risks materialize or assumptions prove incorrect, actual results could differ from those stated in the forward-looking statements. There may be additional risks that neither LifeSci nor the Company presently know or that LifeSci and the Company do not know or that LifeSci and the Company differ from those contained in the forward-looking statements. These forward-looking statements speak as of the date hereof, and LifeSci and the Company do not intend to update or revise these forward-looking statements.

Trademarks

This presentation contains trademarks, service marks, trade names and copyrights of LifeSci, Vincer and other companies, which are trademarks of their respective owners.

OUR VISION

We aspire to conquer cancer by addressing needs of our patients with paradigm-shif



Vincera Pharma Highlights



MANAGEMENT TEAM

- Cohesive, accomplished management team
- Highly engaged scientific advisory board and chair
- Proven track record of successful drug development & approvals, company creation, fundraising and value creation



ASSETS

Clinical small molecule:

- Best-in-class PTEFb [CDK9] inhibitors (oral and IV) in Phase 1; signs of clinical activity in double-hit DLBCL

Preclinical bioconjugation platform:

- SMDC for solid tumors
- CXCR5 ADC for B-cell malignancies
- CD123 ADC for AML



BUSINESS STRATEGY

- Develop oncology portfolio to address unmet patient needs with accelerated approval potential
- Bayer support in the process
- Develop each asset and optimize commercial value of each asset

Vincera Founders



AHMED HAMDY, MD
CEO

- Cofounder of Acerta Pharma
- Former CMO of Pharmacyclics, leading developer of Imbruvica®
- Proven track record for assembling experienced teams that deliver from INDs to NDAs



RAQUEL IZUMI, PhD
COO

- Cofounder of Acerta Pharma
- Former Sr Director of Clinical Development of Pharmacyclics
- Extensive drug development experience from preclinical stages through NDA submission



TOM THOMAS, JD

- Outside general counsel
- Extensive experience in venture, finance, M&A & IPO
- Partner, Pillsbury Winthrop



STUART
VP Bus

- Biotech devel
- Lead Quad in part M&A
- Led c R&D Cor T and L

Management Team Experience Proven Track F



\$7B acquisition by AstraZeneca in 2016 for acalabrutinib

Management Team's Contribution

- Founded Acerta with acalabrutinib
- Accelerated approval in 4 years

2013

Acerta founded

2014

1st patient dosed

2016

AZ acquisition

Acce



\$975M partnership with Janssen in 2011 [\$150 upfront]

\$21B acquisition of Pharmacyclics by AbbVie in 2012

Management Team's Contribution

- Developed ibrutinib from preclinical to Phase 3
- All three Phase 2 studies completed
- Accelerated Approvals

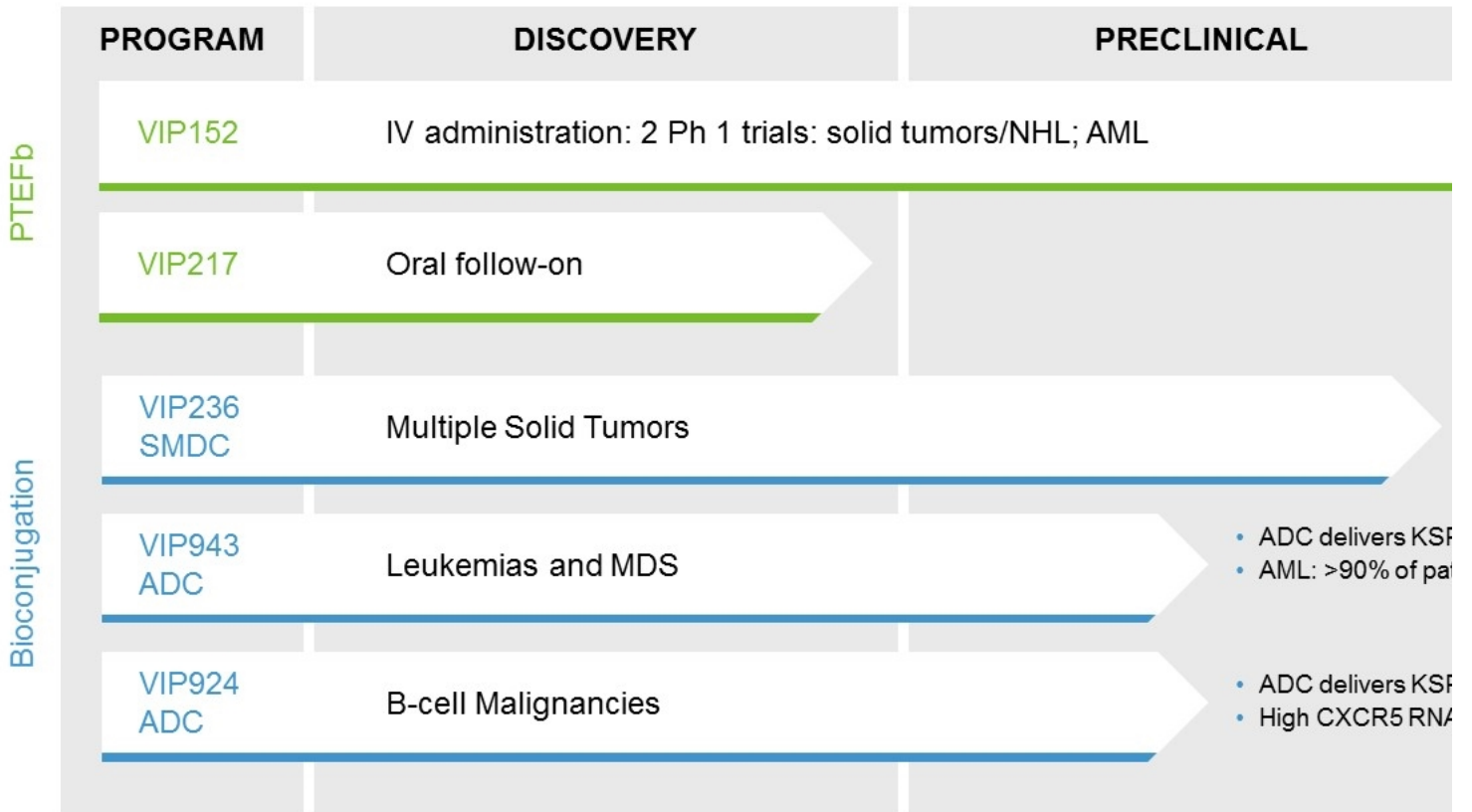
Magrolimab

\$4.9B acquisition of Forty Seven Inc by Gilead in 2015

Management Team's Contribution

- Developed magrolimab C1
- Complete and comprehensive

Vincera Pipeline*



ADC = antibody-drug conjugate; AML = acute myeloid leukemia; MDS = myelodysplastic syndromes; NHL = nonHodgkin lymphoma; PoC = proof of concept; PTE molecule drug conjugate

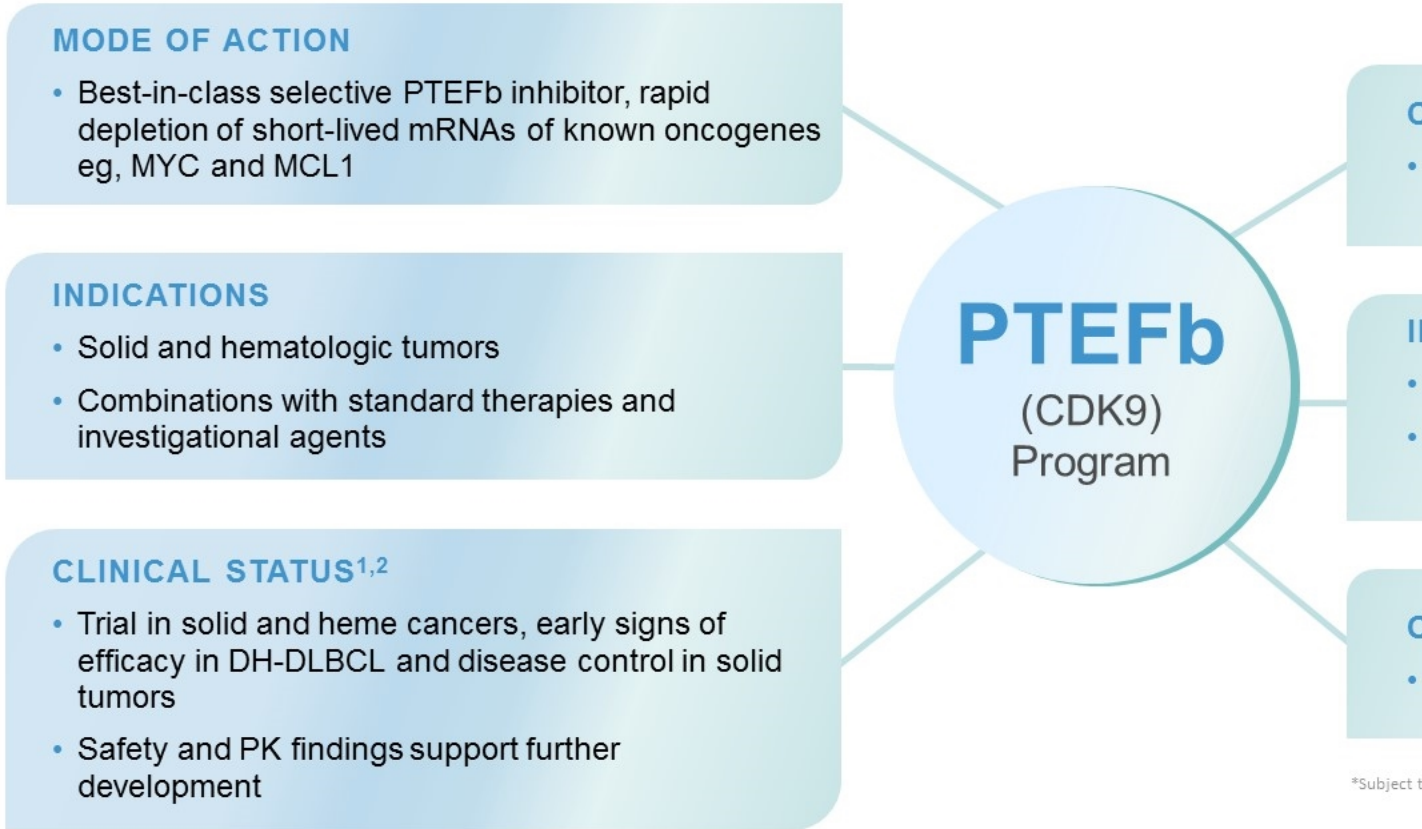
*Subject to signing and effectiveness of Bayer License Agreement

**PTEFb
PROGRAM**

**VIP152 IV (Phase 1)
VIP217 Oral (Discovery)**

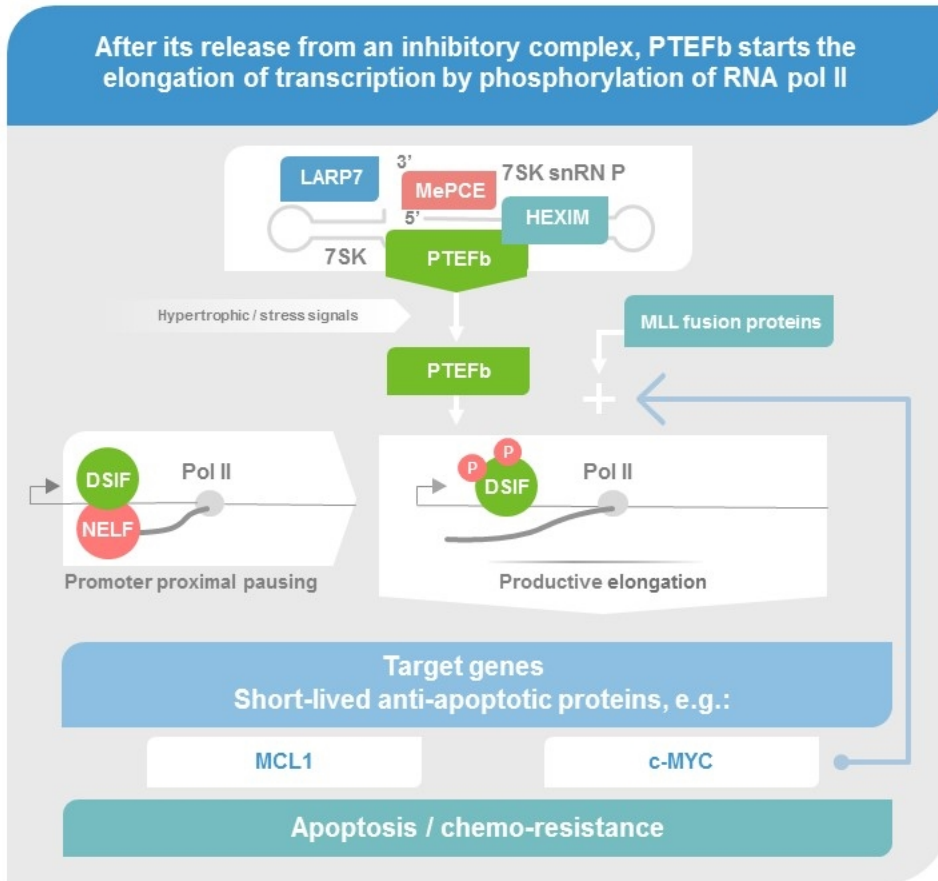


Summary of PTEFb (CDK9) Portfolio – Clinical & D



1. Blood (2018) 132 (Supplement 1):4055.
 2. JCO (2018) 36 (15): 2507.

PTEFb: A Novel Target for Oncology



PTEFb [CDK9]

- Positive transcription through
- A key target to address
- Inhibition causes induction of known oncogenes

Role of MCL1

- Drives tumor growth and resistance to apoptosis through various heme and non-heme entities
- Potential PD biomarker. Induction of apoptosis
- Inhibitors currently in development

Original figure by David Price and licensed under conditions of a GNU Free Documentation License, with modifications by Bayer AG and further modifications by Vencera Pharma, Inc. Permission is granted to copy, distribute and/or modify this figure under the terms of the GNU Free Documentation License, Version 1.3.

CDK9 is a Clinically Validated Target

	VIP152 Vincera	Dinaciclib Merck	Alvocidib (Flavopiridol) Tolero
Patients	Double hit DLBCL [MYC driven]	r/r CLL [MCL1 driven]	r/r CLL [MCL1 driven]
Treatment	VIP152 monotherapy	Dinaciclib monotherapy vs ofatumumab	Alvocidib monotherapy
Trial	Phase 1/1b dose escalation and dose expansion	Randomized Phase 3 (stopped early)	Two Phase 2's
Response	ORR: 29% (2/7), both PET-negative CRs	Dinaciclib ORR: 40% (8/20) Ofatumumab ORR: 8% (2/24)	Study 1 ORR: 54% (34/64) Study 2 ORR: 25% (41/164)
Durability	2.3 to 3.6 years	Dinaciclib mPFS of 13.7 mo Ofatumumab mPFS of 5.9 mo	Study 1: mPFS of 8.6 mo Study 2: mPFS of 7.6 mo

VIP152 is the Most Selective CDK9 Inhibitor in

Programs	VIP152 Vincera	AZD4573 AZ	Dinaciclib Merck	CYC065 Cyclacel
Selectivity	CDK9	CDK1/9	CDK1/2/5/9	CDK2/3/5/9
Development Stage	P1	P1	P3 mono P2 combo	P1
Type of tumor	Hematologic & Solid tumors	Hematologic	CLL stopped Solids combo with IO	AML, CLL, ALL Solid tumors
IC₅₀ on CDK9	3 nM	14 nM	1-4 nM	26 nM
Half life	4 h	<3 h	3 h	~1 h
Route of admin	IV	IV	IV	Oral & IV

VIP152 Highly Selective and Potent CDK9 Inhi

Assay	VIP152	Kinase	Kd [nM] @ DiscoverRx	IC ₅₀ [nM] @ Millipore
IC ₅₀ CDK9 [nM] low ATP	3	CDK9	1.3	13**
IC ₅₀ CDK9 [nM] high ATP	4	CDK1	n.a.	192
		CDK2	710	158
		CDK3	540	318
		CDK4- cyclinD1	120	n.d.
		CDK4- cyclinD3	68	n.d.
		CDK5	4900	286
		CDK6	n.a.	1048
		CDK7	24*	>10000
		CDK8	25000	n.d.
		CDK11	not active	n.d.

High potency is
independent of [ATP]

13

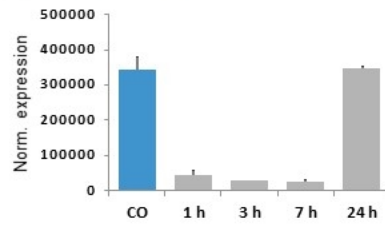
* No cyclin co-expression

** Probably lower limit of quantification

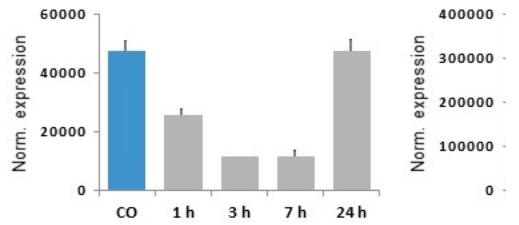
MoA – VIP152 Inhibits the Transcription of MYC

Reduction of MYC & MCL1 mRNA levels

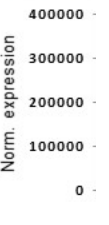
MYC mRNA



MCL1 mRNA

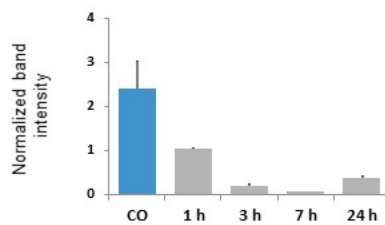


BCL2



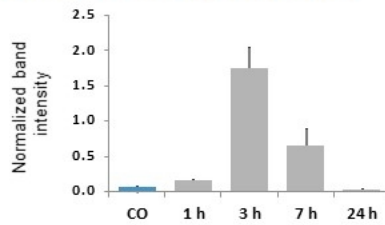
Durable reduction of MYC protein levels

MYC Protein

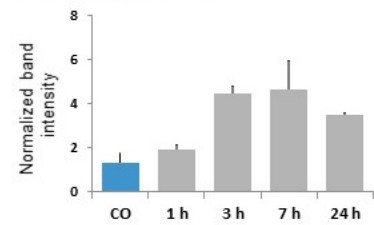


Induction of apoptosis

Cleaved Caspase 3 p17



Cleaved PARP



VIP152 (IV) - Clinical Trial Design & Status

Two Phase 1 clinical trials

FIRST-IN-HUMAN STUDY (17496; NCT02635672)

Dose escalation (N=31)

MTD

Expansion (N=20)

- Once weekly IV; 30-min infusion
- 21-day cycles
- No biomarker selection patient population (ie, all-comer advanced cancer)

- At recom
- Double-hi

AML study (18117; NCT02745743)

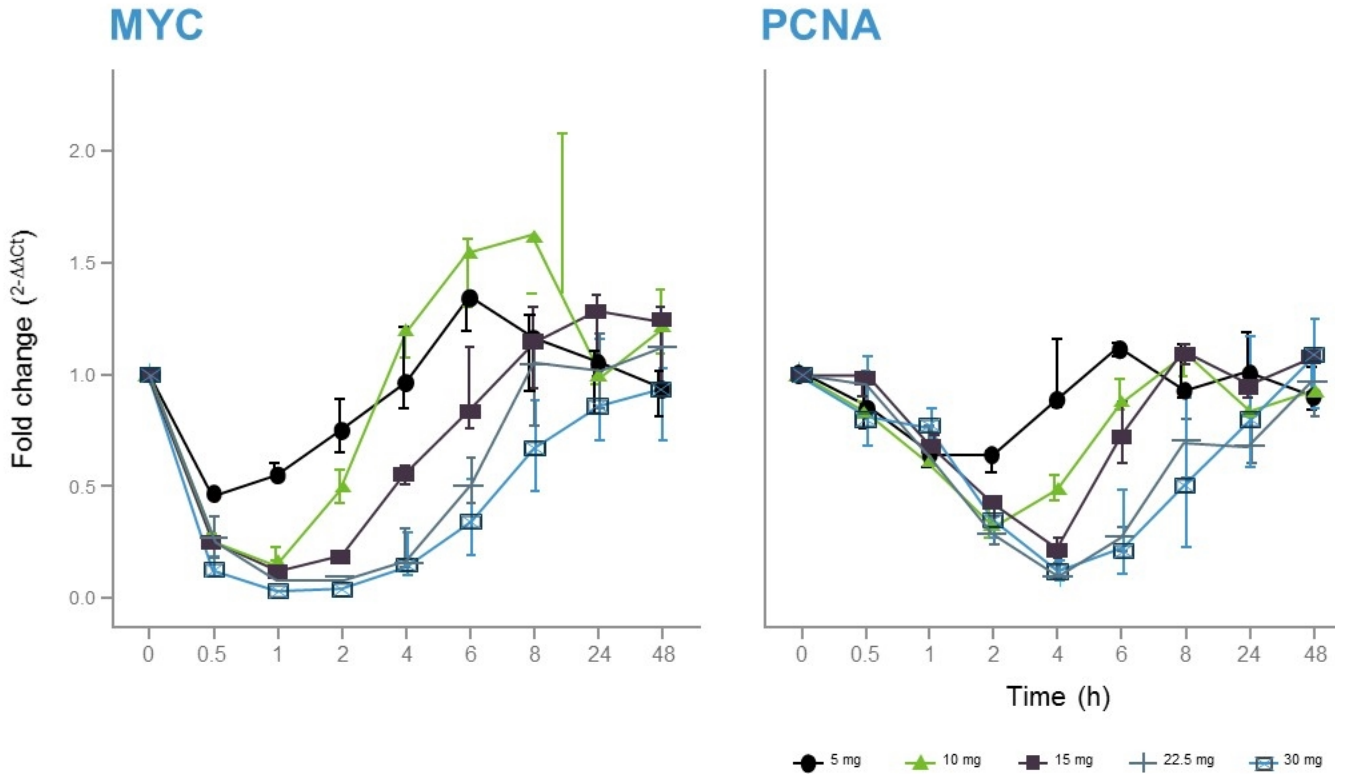
Dose escalation (N=21)

Completed

- Once weekly IV; 30-min infusion
- 21-day cycles
- No biomarker selection in patients with AML

VIP152 Pharmacodynamic Activity in Patient 5

PD biomarker assessment: mRNA expression in whole blood, cycle 1, day 1
Inhibition of MYC, MCL1 and cell proliferation (PCNA)



Manageable Safety Profile

Neutropenia manageable; Long-term CRs highlight tolerability profile

Adverse Events (>15%)	Grade 1	Grade 2	Grade 3	Grade 4
Nausea	17 (55)	9 (29)	0 (0)	0 (0)
Vomiting	15 (48)	5 (16)	0 (0)	0 (0)
Anemia	6 (19)	5 (16)	3 (10)	0 (0)
Neutropenia	0 (0)	3 (10)	5 (16)	4 (13)
Fatigue	2 (6)	8 (26)	0 (0)	0 (0)
Diarrhea	8 (26)	1 (3)	0 (0)	0 (0)
Constipation	4 (13)	2 (6)	0 (0)	0 (0)
Thrombocytopenia	4 (13)	2 (6)	0 (0)	0 (0)
Abdominal pain	0 (0)	2 (6)	3 (10)	0 (0)
Anxiety	4 (13)	1 (3)	0 (0)	0 (0)
Fever	4 (13)	0 (0)	1 (3)	0 (0)

Early Signs of Monotherapy Efficacy in Phase

Dose escalation trial (solid tumors and NHL)

- 31 patients, ≥ 3 prior systemic chemotherapies in 97% of patients
- No biomarker selection

Early clinical signs of efficacy in DH-DLBCL

- 1 patient with DH-DLBCL in dose escalation achieved a PET-negative CR*
- DH-DLBCL patients have MYC rearrangements and either BCL2 or BCL6 rearrangements

Expansion cohort ongoing in DH-DLBCL

- 1/6 patients in the expansion cohort achieved a PET-negative CR*

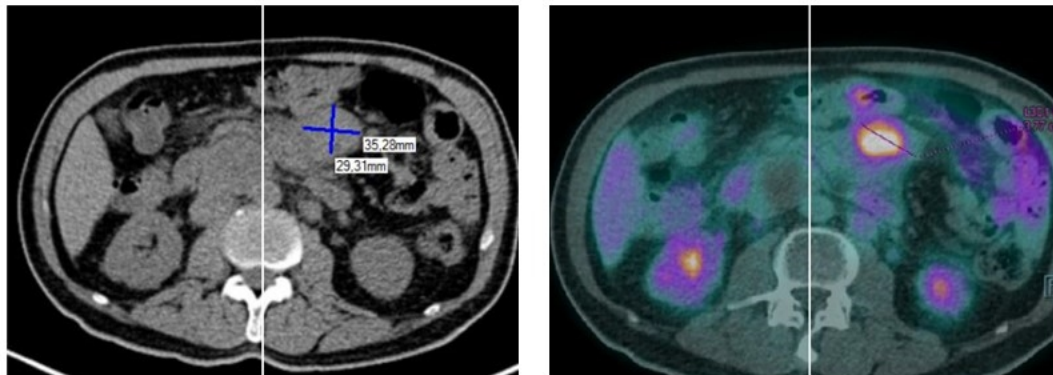
Disease control observed in heavily pretreated solid tumor patients (1 pancreatic cancer and 1 salivary gland cancer pt)



*Per investiga

Complete Metabolic Response Observed in Pa with Treatment-refractory Double-hit DLBCL

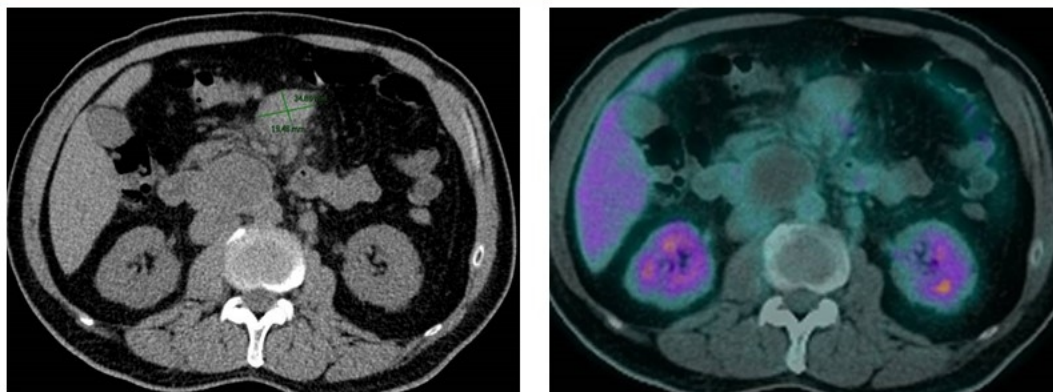
Baseline PET/CT



Treatment

- GCB m
- *BCL2* a
- *BCL2*, *I* MYC I
- Founda panel s mutata

PET/CT cycle 10



Prior Ther

1. R-EPOC
2. R-DHAF
3. Palliativ best res

IHC, immunohistochemistry; PET / CT, positron emission tomography/computed tomography; TTP, time to progression

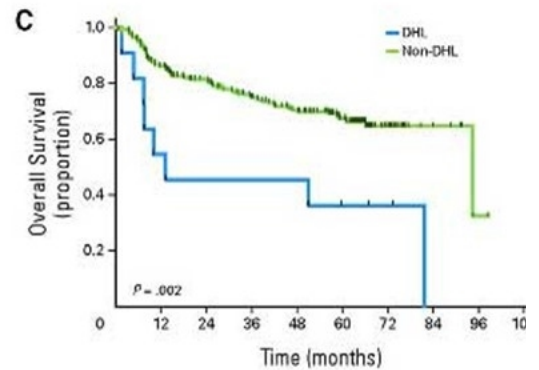
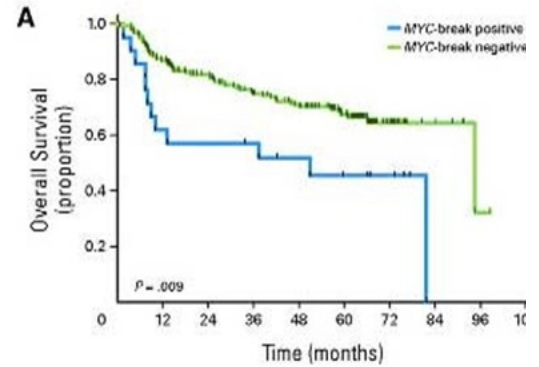
Poor Prognosis in Double-hit Lymphoma

Double-hit (DH)-DLBCL

- Activation of MYC and BCL2/BCL6 genes
- Rearrangements
- Overexpression
- 25% of r/r-DLBCL¹
 - Median PFS 11 months²
 - Median OS 22 months²

R-CHOP in unselected DLBCL pts:
>80% reach a PFS of 6-year⁽³⁾

1. Tumati et al Int J Radiation Oncol Biol Phys 2018;100:1126-32
2. Petrich et al Blood 2014;124:2354-61
3. Pfreundschuh et al Lancet Oncol 2011;12:1013-22



Overall survival (OS) and progression-free survival (PFS) after treatment with rituximab, cyclophosphamide, doxorubicin, and vincristine (R-CHOP) in large B-cell lymphoma (DLBCL) harboring gene breaks in MYC, BCL2, and BCL6 versus 168 patients with DLBCL who were negative for MYC, BCL2, and BCL6. Kaplan-Meier curves of (A) OS in 47 patients with DLBCL who were double-hit (DHL) versus 168 patients with DLBCL who were not double-hit (Non-DHL) show a significant association with OS ($P = .002$). Kaplan-Meier curves of (B) OS in 47 patients with DLBCL who were double-hit (DHL) versus 168 patients with DLBCL who were not double-hit (Non-DHL) show a significant association with OS ($P = .009$). Kaplan-Meier curves of (C) OS in 47 patients with DLBCL who were double-hit (DHL) versus 168 patients with DLBCL who were not double-hit (Non-DHL) show that combined breaks in MYC and BCL2 are significantly associated with OS ($P = .002$). Published in: Green et al JCO 2012;30: 3460-67 Copyright © 2012

Potential Indications

MYC and MCL1 overexpression is a hallmark of multiple aggressive, res representing a wide-ranging unmet medical need

B-cell Lymphoma MYC dependent
(DH-DLBCL, Transformed FL, RS, blastoid MCL)

- Broad sensitivity to VIP152 ac
- Opportunity for significantly imp or BCL-2 (venetoclax)

Leukemias MCL1 Dependent
(CLL, AML, MDS)

- Initial indication double refract with BTK/BCL2 inhibition
- Potential combinations (eg, BC

Myeloma highly expresses and is dependent on MCL1 & CDK9 for survival
(MM)

- Opportunity for significantly imp

Solid Tumors
(ovarian, TNBC, CRPC incl NEPC)

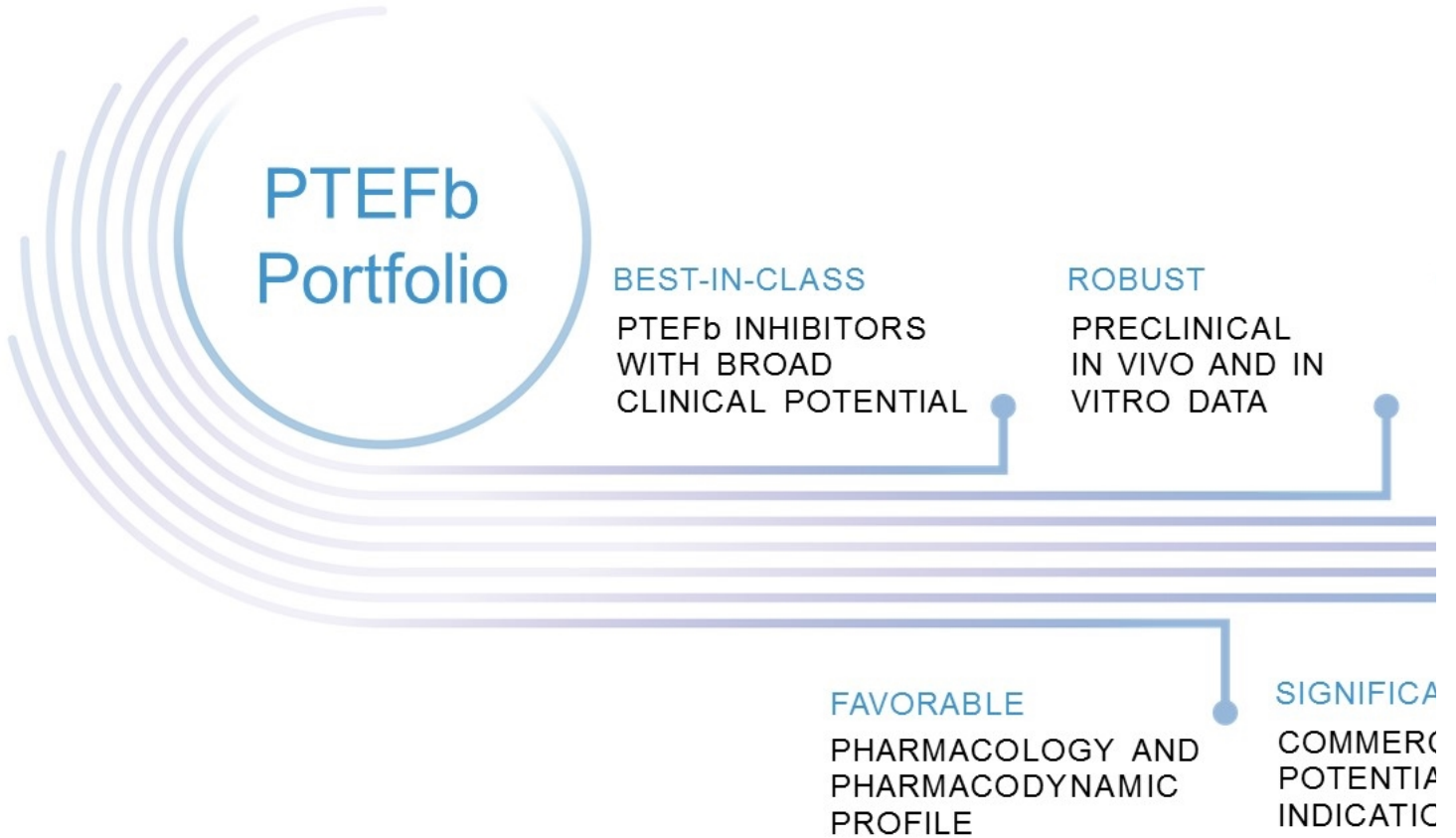
- MYC and MCL1 driven solid tu
- Opportunity for addressing dru

VIP152: Clinical Development Plan

Multiple Accelerated Approval Opportunities

Phase	Design	Population
1b	Myc driven heme tumors	DH-DLBCL, Transformed MCL
1b	Myc driven solid tumors	Ovarian, TNBC, CRPC [ir
1b	Double refractory/relapse (BTK & VEN)	R/R CLL

Summary: PTEFb Portfolio*



*Subject to signing and effectiveness of Bayer License Agreement

BIOCONJUGATION PLATFORM

VIP236 (SMDC)
VIP943 (CD123)
VIP924 (CXCR5)

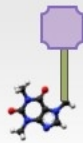


Vincera's Proprietary Bioconjugate Platforms – Sh

Turning 10 years of Bayer discovery know-how into break-through tre

SMALL MOLECULE DRUG CONJUGATE

SMDC



- Conjugate design for highly aggressive adv
- Targets cell surface cancer markers
- Drug release in tumor stroma
- Tailored warhead design

NEXT GEN ADC PLATFORM

ADC



- 2 candidates for heme malignancies
- Proprietary linker-payload technology
- Preferential activation in tumors increase the
- Extension to solid tumors for best-in-class tr modalities

DISCOVERY PROGRAMS

- New antibodies with KSPi linker-payload tec
- Multiple combinations of modular platform c

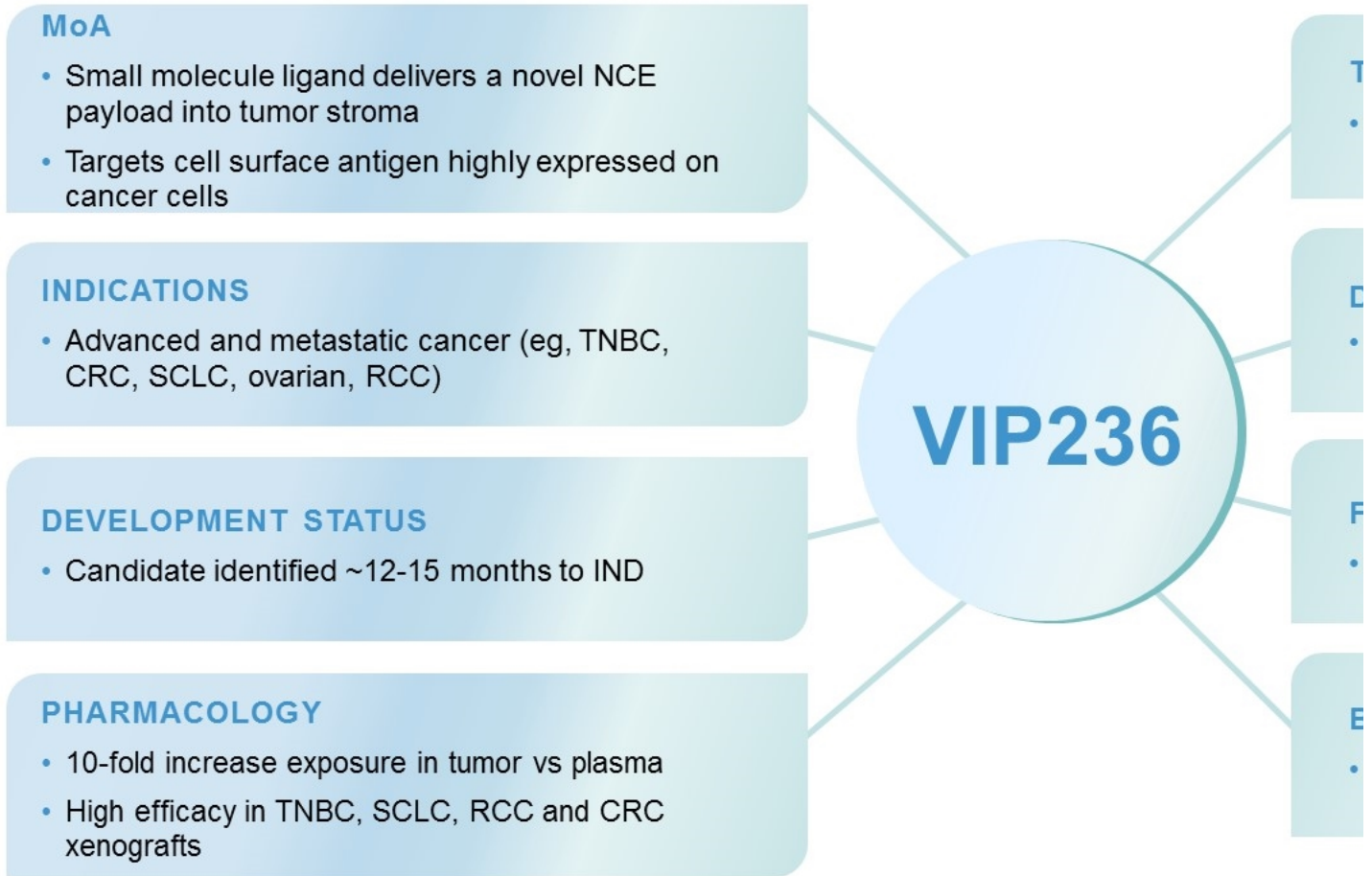
*Subject to signing and effectiveness of Bayer License Agreement

SMALL MOLECULE DRUG CONJUGATE (SMDC)

VIP236



Key Features of VIP236, Cancer Cell Surface T



27

SMDC Dual Targeting Rationale

Tumor Stroma Activated Conjugate

Targeting moiety

- Ligand binds cancer selective markers
- Stable non-peptidic ligand
- Proven tumor homing

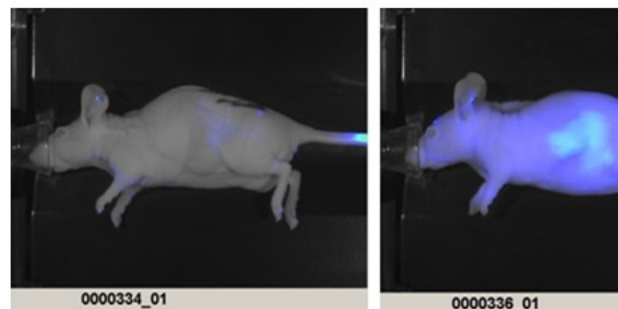
Linker enables tumor specific release of active payload

- Extracellular cleavage in tumor stroma
- Non-cleavable isomer is inactive

Differentiated profile

- Target: Cancer cell-surface marker
- Linker: Cleaved by protease in tumor stroma
- Payload: NCE with an improved profile
- In vivo proof of concept in multiple solid tumor models (colon, breast, SCLC, RC)
- Well tolerated after repeated dosing

Imaging shows efficient targeting of Unconjugated dye IR800 Neg ctrl ligand-



NEXT GEN ADC PLATFORM

VIP943
VIP924



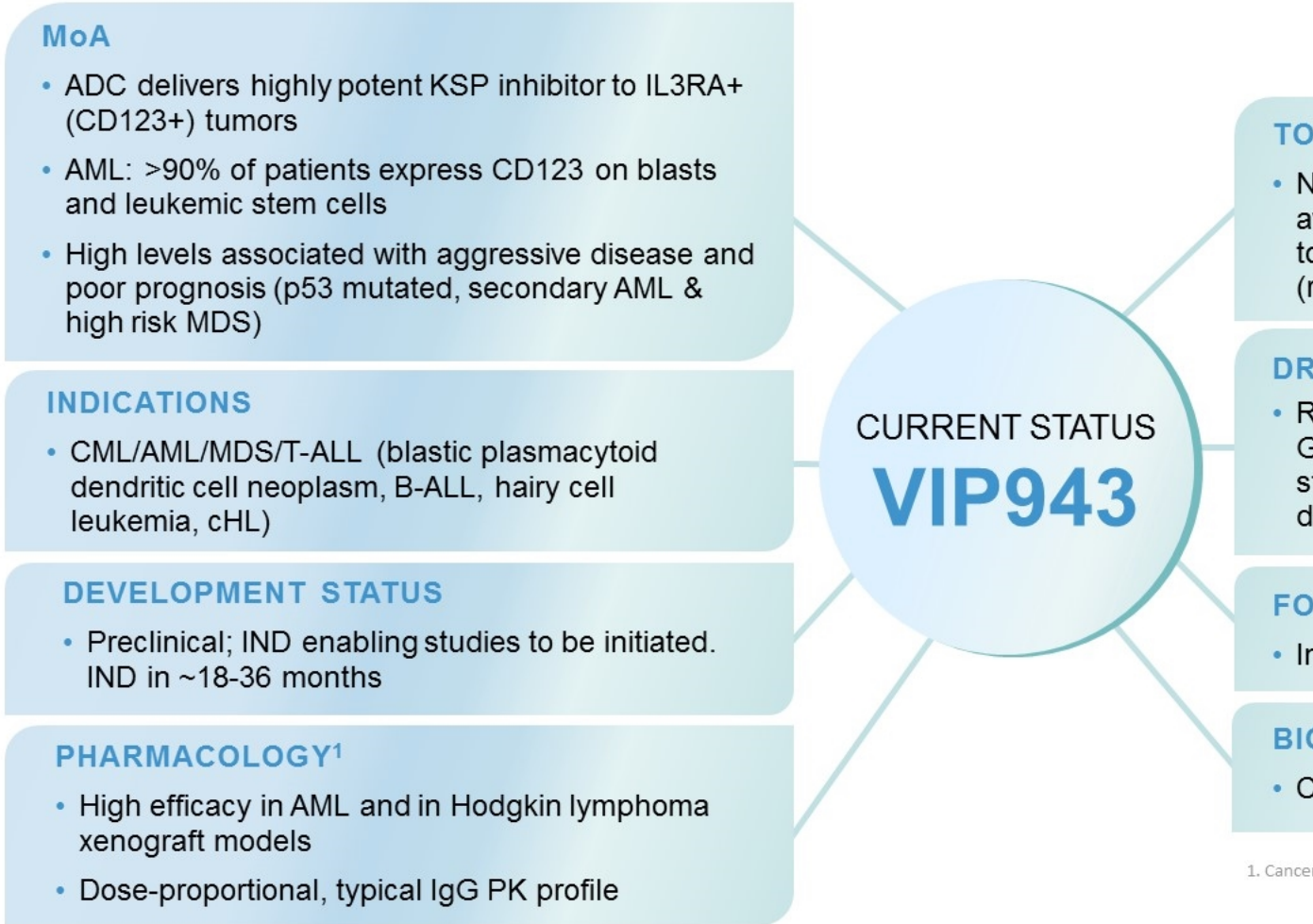
Vincera's Next Generation ADC Technology Solutions

Problems of ADCs	NextGen Design Features ¹	Impact/Efficacy
High-potency payloads have narrow therapeutic index	KSP inhibitor is a novel payload class in ADCs	Low/no toxicity High potency Flexibility
Off-target toxicities due to leaking and unspecific cleavage of highly toxic, cell-permeable toxins	Stable linker specifically cleaved by legumain , a tumor associated protease Impermeable payload – Cell Trapper™ attached to KSPi to reduce membrane permeability	Unique cleavage Second level of protection Safety: No off-target toxicity Efficacy: High
Highly lipophilic payloads cause aggregation and unspecific pinocytosis of ADCs	KSPi payload with Cell Trapper™ is hydrophilic and does not cause aggregation	Safety: No aggregation Efficacy: High CMC: Less

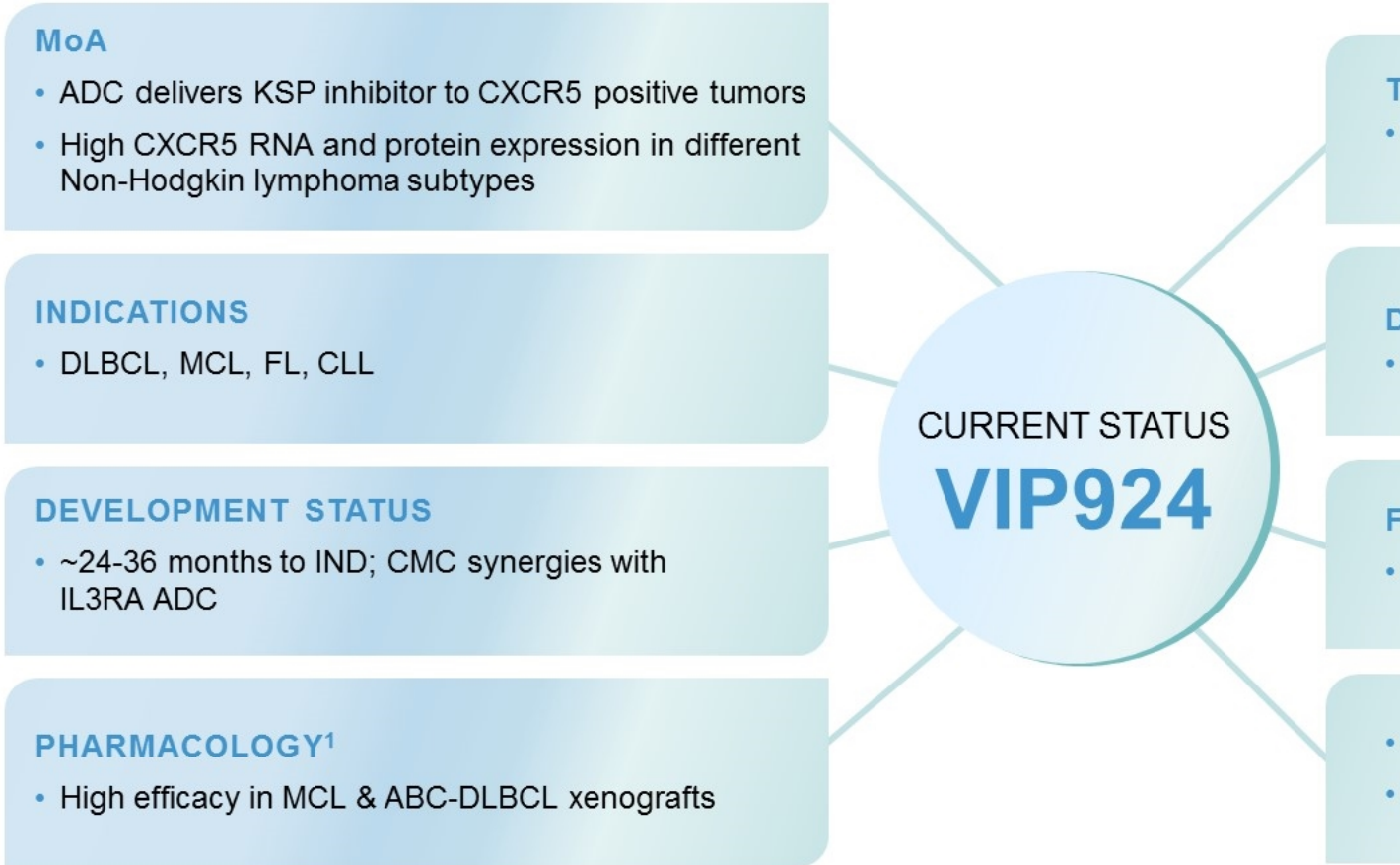
1. <https://dx.doi.org/10.1021/asc.bioconjchem.0c00357>

*Subject to clinical data

Key Features of VIP943, an IL3RA-KSPi ADC



Key Features of VIP924, a CXCR5-KSPi ADC



1. Cancer Res (2019) 79 (13 suppl):4825

Expected Upcoming Milestones

VIP152

- Q1 2021 – Begin Phase 1b study for Myc driven hematologic malignancies
- Q1 2021 – Begin Phase 1b study for Myc driven solid tumors
- Q1 2021 – Begin Phase 1b study for R/R D CLL
- Late 2021 – Initial clinical data from Phase 1b studies

VIP236

- H1 2022 – Begin FIH study for solid tumors

VIP94

- H2 2022 – Begin Phase 1b study for hematologic malignancies

Vincera Summary



A strong management team with a proven track record of successes

- Publicly traded company (PCYC): Co-development w JNJ, \$1B; Sale to Abbvie, \$21B
- Private company (Acerta) founded company on preclinical asset and took it to approval and sale of company: M&A \$7B, AZN
- >20 years of experience in CDK9 space
- >10 years of ADC development experience from discovery to clinical development

Innovative, next-generation bioconjugation platform

- Modular technology designed to address specific challenges of current
- KSPi-ADC safety profile has been de-risked in cyno tox studies with pc & best-in-class opportunity
- SMDC is ready for IND after GLP tox

*Subject to signing and effectiveness of Bayer License Agreement

34
