

A background image of a laboratory setting. In the foreground, there are several rows of small, round, light-colored petri dishes. In the background, several glass test tubes are visible, some containing a blue liquid. The lighting is soft and focused on the dishes and tubes.

**Developing first
in class cardiovascular drugs**

European Smallcap Event - 27 & 28 avril 2015

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Copies of the Document de Base filed with the AMF on January 26, 2015 under the number I. 15-036 may be obtained free of charge and upon request from Quantum Genomics, 2 -12 Chemin des Femmes, Bâtiment l'Odyssee, 91300 Massy, France - and from the internet websites of Quantum Genomics (www.quantum-genomics.com) and the AMF (www.amf-france.org).

Quantum Genomics draws the public's attention to chapter 4, "Risk factors", of the Document de Base registered with the AMF.

1/3

Of adults and more, depending on countries has high blood pressure. With the proportion going up to one in two for people aged 50 and above⁽¹⁾

9.4 million

Deaths worldwide every year due to complications of high blood pressure⁽¹⁾

1/3

Are dying due to cardiovascular diseases. 1st cause of death with 17 million deaths in the world each year⁽¹⁾



"Hyper-pressure contributes to nearly 9.4 million deaths due to heart disease and stroke every year and, together, these two diseases are the number one cause of death worldwide. And, hyper-pressure also increases the risk of kidney failure, blindness and several other conditions. It often occurs together with other risk factors like obesity, diabetes and high cholesterol – increasing the health risk even further."

WHO Chief Dr Margaret Chan – World Health Day April 07, 2013

\$ 40 billion

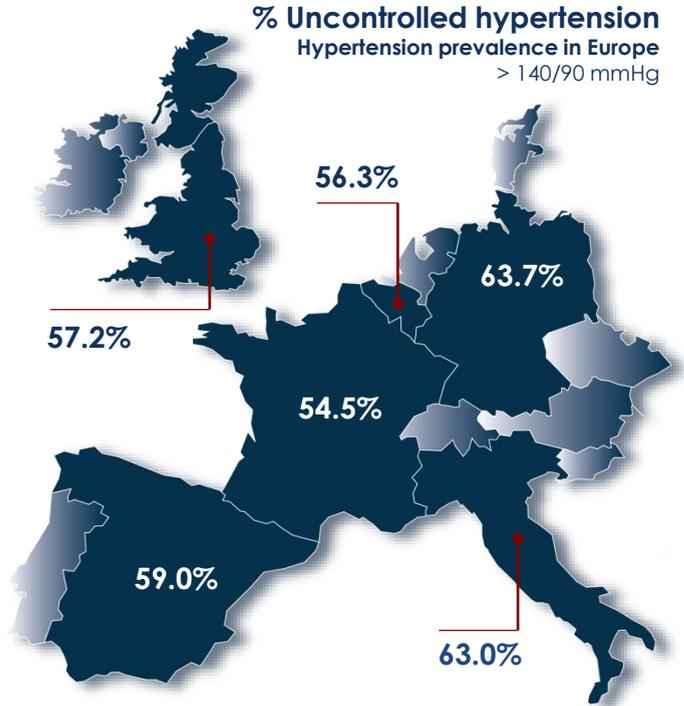
Global anti-hypertensive drugs market in 2013⁽²⁾

\$ 39 billion

Global heart failure drugs market in 2015⁽³⁾

Sources : (1) WHO (World Health Organization) - A global brief on hypertension, Silent killer, global public health crisis (2013),
(2) the pharmaletter (June 2014),
(3) Heidenreich et al, Circulation Heart Failure (2013)

Hypertension : the « silent killer » leading to global public health crisis

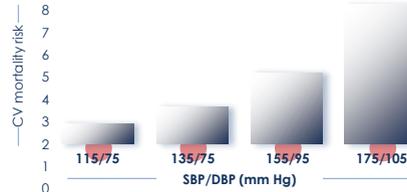


> 50% of treated patients still have high blood pressure

Using : Diuretics, beta-blockers, ACEi, ARBs, Calcium Channel blockers

x2 the risk of death from stroke or heart attack

Increase of 20/10 mmHg is associated to this risk



A strong need to develop new classes of drugs to improve hypertension control

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BAPAI : novel therapeutic class



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Terms of the operation



1

BAPAI : novel therapeutic class



✓ Quantum Genomics, the « *BAPAI company* », is developing first in class treatment targeting a new pharmacological pathway in the brain

✓ Benefiting from more than 20 years of the highest standard academic research in Europe



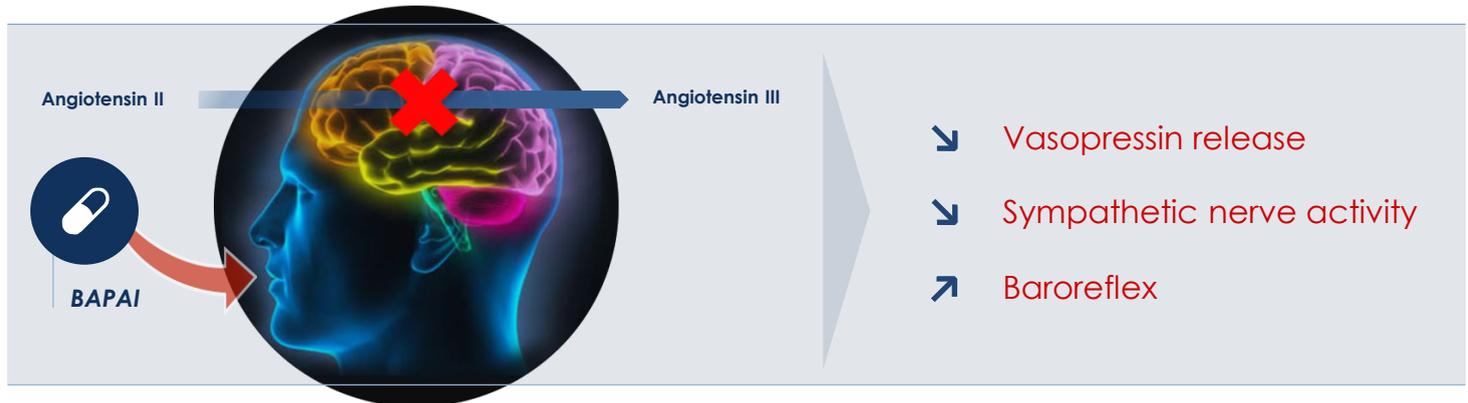
Catherine Llorens-Cortes,

PhD in Neurobiology, Director of the Central Neuropeptides and cardio-vascular hydro-regulation research team – College de France CIRB-CNRS UMR U1050 7241/INSERM



2014
Category
« Research team »

Inhibition of Aminopeptidase A



Increase of the diuresis
(urinary elimination)



Lowering vascular
resistance



Controlling
heart rate



BAPAI are innovative drugs that target a new central pharmacological pathway leading to both antihypertensive effects and cardioprotection

- **Mostly uncontrolled or poorly controlled : LRHV patients**



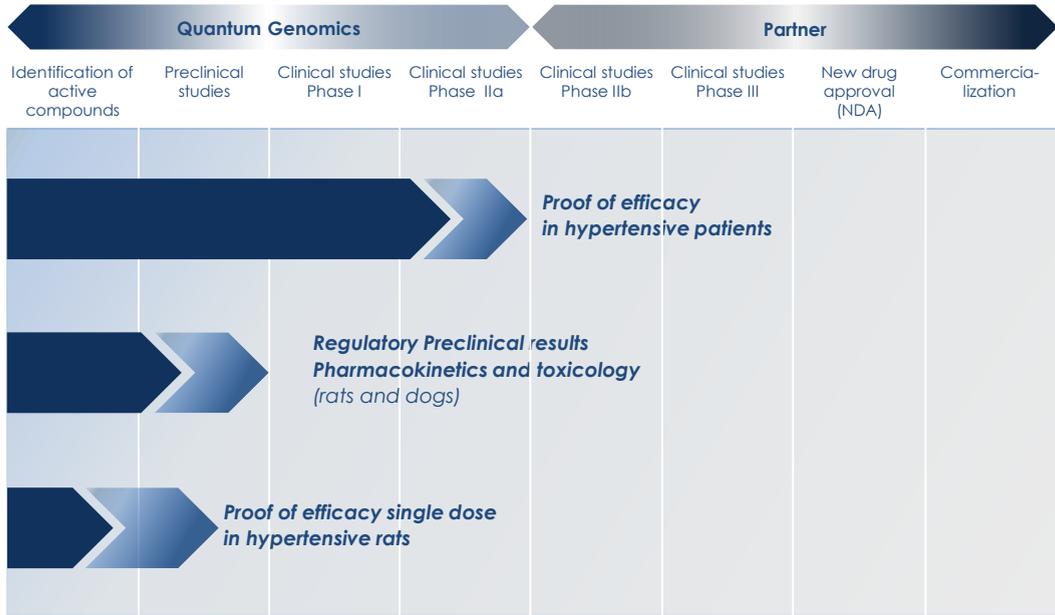
- LRHV is overexpressed in elderly, Asian, Afro-American and Hispanic populations
- ACEs and ARBs drugs are not a therapeutic option for those patients



2

Robust pipeline of new drug candidates

A robust pipeline of new drug candidates



HYPERTENSION

CONGESTIVE HEART FAILURE



Typically, identification and preclinical phases last 2-3 years, a phase I 1-2 years, a phase IIa 1-2 years, a Phase IIb 1-2 years, a phase III 2-3 years and new drug approval and commercialization 2-3 years.

- **Mechanism of action:** a brain penetrating prodrug

- QGC001 is able to release in the brain the specific and selective APA inhibitor EC33 which blocks the production of brain angiotensin III

- **Success of preclinical studies**

-
- | | | |
|---------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| ➤ Stability profile |  | Chemical stability and properties compatible with the development of a solid dosage form |
| ➤ Pharmacokinetics |  | High bioavailability in dogs |
| ➤ Toxicity |  | No toxicity observed in rats and dogs up to 1,000 mg/kg, no cardiac toxicity, no genotoxicity, no hepatotoxicity |
| ➤ Efficacy |  | Efficacy demonstrated in hypertensive rats (SHR & DOCA Salt rats) at 15 mg/kg per os. |
-



Approval for initiating the first in human Phase I clinical study

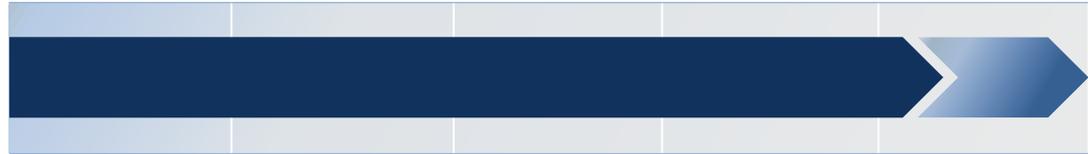
Target discovery Identification of active compounds Preclinical studies Clinical studies Phase I Clinical studies Phase II



QGC001

First-in-class

Stand alone treatment of Hypertension



Phase Ia • 2012

Randomized, double blind, placebo controlled study of single ascending doses in 80 healthy volunteers

➤ **Positive : overall safety and tolerability of QGC001 up to 2g**



Phase Ib • 2013

Randomized, double blind, placebo controlled study of multiple ascending doses in 44 healthy volunteers

➤ **Positive : overall safety and tolerability of QGC001 up to 750mg twice a day and no food interaction**



Phase IIa • Q1 2015

Initiation of a phase IIa in hypertensive patients



➤ Michel Azizi, MD,

Medical Doctor, University Professor – Hospital Practitioner Director of CIC 9201 (Cardiovascular, renal, endocrine pathology and physiology)



● **Example for one patient :**



● **4 Centers in France all labelled as “Centers of Excellence” by the European Society of Hypertension**

- Hôpital Européen Georges Pompidou – Paris – Pr. Michel Azizi
- Hôpital de la Croix Rousse – Lyon – Pr. Pierre Lantelme
- Hôpital Cardiologique, CHRU – Lille – Pr. Claire Mounier-Vehier
- Hôpital Arthur Gardiner – Dinard – Pr. Thierry Denolle



QGC011

Combo BAPAI / IEC

Treatment of hypertension in combination with other antihypertensives/ combination therapy for reduced dosing and reduction of side effects

Target discovery

Identification of active compounds

Preclinical studies

Clinical studies Phase I



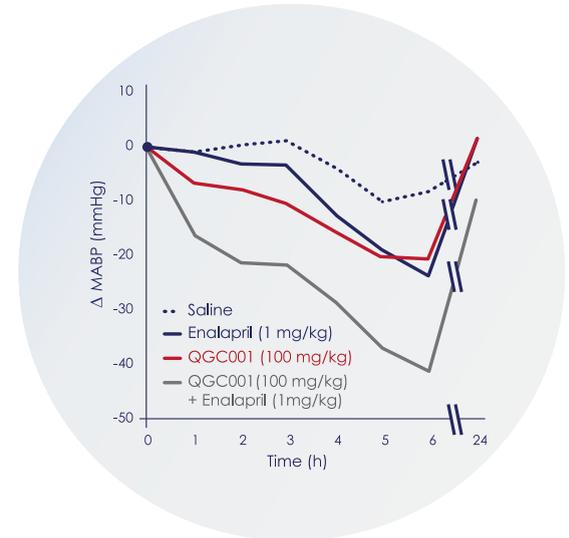
- **An alternative product to currently marketed antihypertensive drugs**

- Therapeutic solution for patients poorly or not controlled by existing treatments
- Synergistic action that allows to dosage reduction and minimized side effects

- **Preclinical results demonstrating high interest in combination with the Angiotensin Converting Enzyme inhibitor, Enalapril (Renitec/Vasotec)**



Synergy of action should improve the control of BP in hypertensive patients

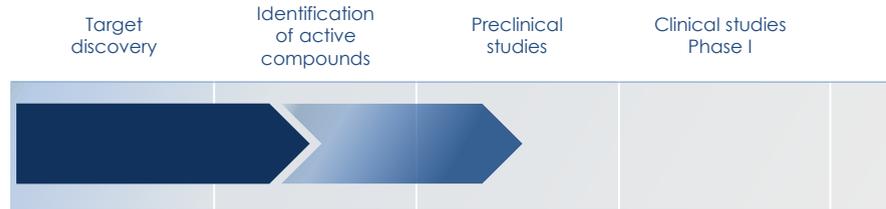




QGC006

Best-in-class

Optimized treatment of hypertension as monotherapy / 10x AminopeptidaseA inhibition vs. QGC-001



- **Extended research program to identify new BAPAI's**
 - › Improved inhibition, better selectivity versus other enzymes or other receptors
- **2nd generation drug**
 - › 10 times more potent inhibitor of Aminopeptidase A compared to QGC001



**Reinforcement of the patents' portfolio of Quantum Genomics
PLUS increase the lifetime of BAPAI's drugs**



QGC101

First-in-class

Prevention and treatment of congestive heart failure



- **APA plays a major role in several diseases**

- The potential of BAPAI has been demonstrated in the prevention and treatment of congestive heart failure in a first study in rodents

- **Two preclinical studies for QGC101**

- Proof of efficiency in a rodent model and in a dog model



Widening the potential of BAPAI towards other diseases



Widening towards animal health market



Signature in January 2014 of a collaborative agreement, with license option, with a major company in the domain of animal health to treat heart failure in dogs

2015

2016



QGC001

Optimization of the galenic and the pharmaceutical form

- ✓ Results of 3 month repeated doses: toxicity studies rats and dogs
- ✓ Patients enrollment of 50% and toxicity results

✓ patient enrollment : 100%

✓ Results clinical trials phase IIa by end of June
File at CTA to launch of pivotal phase II trial



QGC011

- ✓ Results of repeated doses in hypertensive rats
- ✓ Results of PK & Tox repeated doses in rats

✓ Results of PK & Tox repeated doses in dogs



QGC006

✓ Results of unique dose in hypertensive rats

Start Pilot production
Start regulatory toxicity studies



QGC101

Preliminary results on post infarction heart failure (rats 28 days)

- ✓ Results of repeated doses in congestive heart failure (dog models) by end of June
- ✓ Potential licence agreement in animal health by end of December

✓ Results on post infarction heart failure (rats – 3 months)



3

Efficient organization and strong assets

Management team



Lionel Ségard - President & CEO

Former CEO of Inserm-Transfert, subsidiary of INSERM (French National Institute for Health and Medical Research)
 Founder and former president of Inserm Transfert Initiative (seed fund dedicated to healthcare young innovative companies)
 Founder of the Strategic Council for Innovation (secretary general from 2003 to 2005), The Council's goal is to boost French efforts in the field of research and high technologies and included key figures from France's science, industry and financial community
 Biochemist by training (University of South Paris - Orsay).



Jean-Philippe Milon, PhD - Chief Operating Officer

Several management positions at Bayer HealthCare, then member of the Worldwide Executive Committee as head of WW Business Development, Licensing, Mergers & Acquisitions
 Previously head of the cardiovascular business at Sandoz
 More than 25 years of experience in Healthcare mainly in the Pharmaceutical Industry.



Marc Karako - Chief Financial Officer

Previously Executive Vice President & Chief Financial Officer of Carlson Wagonlit Travel.
 Former Chief Financial and Legal Officer of Vallourec. Former Vice President Finance at Thomson Multimedia.
 10 years at IBM in various financial management positions.
 Master of engineering (Ecole des Ponts ParisTech) and MBA from the University of Chicago.



Fabrice Balavoine - Vice President Research & Development

15 years of experience in Drug Discovery and Drug Development.
 Participated in the development of several drug candidates (new chemical entities, peptides and recombinant proteins) that reached clinical stages in different therapeutic areas. Ph.D. in Organic Chemistry from the University Paris-Sud, master of science from Ecole Supérieure de Physique et de Chimie Industrielle of Paris (ESPCI) and Executive MBA from the ESSEC & Mannheim Business School.



Olivier Madonna - Chief Medical Officer

In depth knowledge of international R&D processes within pharmaceutical, biotech and medical device industries.
 Previous experience as Head of cardiovascular medical departments with MSD and J&J.
 MD Cardiologist, Nephrologist, Specialist in Internal Medicine.



Pierre Corvol, MD, Chairman

Professor Emeritus at Collège de France • Honorary President of Collège de France
Member of the Academy of Sciences • Member of the Academy of Medicine
Member of the American Academy of Arts and Sciences



Professor John C. Burnett Jr

Marriott Family Cardiovascular Research Professor, Mayo Clinic
Member, American Society for Clinical Investigation
Member, Association of American Physicians



Professor Mark Caulfield

Co-director of William Harvey Research Institute, Barts and The London School of Medicine and Dentistry,
Queen Mary University of London (UK) • Director of the NIHR Biomedical Research Unit in Cardiovascular Disease at Barts (UK)
Member of the Academy of Medical Sciences in the UK



Professor Alexandre Persu

Head of the Hypertension Clinic, Cardiology Department, Cliniques Universitaires Saint-Luc,
Catholic University of Louvain, Brussels, Belgium
Member of the International and European Society of Hypertension

	Patent family 1 (granted)	Patent family 2 (granted)	Patent family 3 (granted)	Patent family 4 (filed)	Patent family 5 (filed)	Patent family 6 (filed)
Filed by	 (exclusive WW license)	 (exclusive WW license)	 (exclusive WW license)			
Area of invention	Concept of BAPAI to treat hypertension (active ingredient patent)	QGC001 for the treatment of hypertension and related diseases	QGC006 for the treatment of hypertension and related diseases	Manufacturing process of QGC001	QGC011 for the treatment of hypertension and related diseases	QGC001L for the treatment of hypertension and related diseases
Status	Granted 	Granted 	Granted 	Under review Zone PCT 	Under review Zone PCT	Under review Zone PCT
Expiration date	14/01/2019	16/07/2023 *	06/08/2024 **	07/11/2031	21/12/2032 *	10/2033 *



Patents operated by Quantum Genomics provide secure protection for future drugs up to 2033 (plus potential 5 years extension)

* Potential patent protection extension for 5 years

** Data exclusivity if the patent expires before the date of market availability (10 years in France, 5 years in the USA)



Data in K€ - audited	FY 2014	FY 2013	FY 2012
Net income corrected for non-cash effects	(2,034)	(1,532)	(831)
Change in net working capital	(757)	545	217
Fixed assets	(350)	(113)	(61)
FREE CASH FLOW	(3,141)	(1,100)	(675)
Capital increase	3,699	831	336
Borrowings and shareholders' loans	3,307	1,043	419
Debt repayment	(1,042)	(419)	0
Other elements (mainly Bpifrance loans)	162	(75)	(143)
FINANCINGS	8,210	1,380	610
Change in cash	2,984	280	(65)
CASH (END OF PERIOD)	3,318	334	54

Cash from inception

December 23, 2005 to December 31, 2014

 **€ 13.6 million**
Operating expenses
(primarily R&D)

 **€ 13.6 million**
Equity/shareholders financing

 **€ 1.7 million**
Subsidies from Bpifrance (Public
Innovation Bank) and ANR
(National Research Agency)

 **€ 1.6 million**
Research Tax Credits (RTC)

 **3.0 M€ loan from the shareholder Téthys was converted into capital during the public equity offering of February 2015**

Capital increase
12.9 M€
to cover the following
4 R&D programs



QGC001



Completion of phase IIa for hypertension



Implementation of studies necessary to prepare the approval file for phase IIb (pivotal trial)



QGC101



Finalisation of the preclinical studies and then move directly to phase II



QGC006



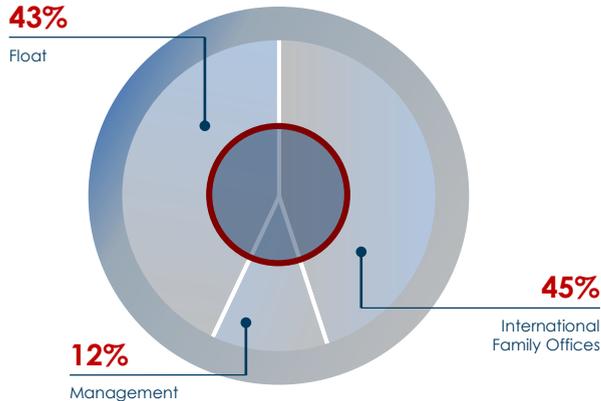
Progress of preclinical studies on combinations QGC011 with other antihypertensive drugs and the "best-in-class" product QGC006 (with superiority in the same therapeutic category)



QGC011

Current capital breakdown

(6,859,962 shares)



5 family offices:

Alix AM	14.7%
Téthys	11.6%
Grand Allied	11.5%
Delore	4.1%
Ador	2.8%

Stock market data

- Listed on Marché Libre (Euronext) since July 2009
- Listed on Alternext Paris since April 10, 2014
- ISIN : FR0010783837
- Ticker code : ALQGC
- Market capitalisation: 45.8 M€ as of April 21, 2015

ALQGC
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Potential dilution

- Up to 1,161,038 new shares could be issued if all existing common share purchase warrants were to be exercised, which represents 14.5% potential dilution
- Company policy is to issue warrants after each capital increase such that potential dilution never exceeds 15% at any time



4

A strategy focused on rapid value creation

Top-selling antihypertensive drugs

Blockbuster (I.N.N.)	Company	Main Patent expiration date
Diovan (valsartan)	NOVARTIS	Sept. 2012
Micardis (telmisartan)	Boehringer Ingelheim Bayer HealthCare Pharmaceuticals	Jan. 2014
Benicar, Olmetec (olmesartan)	Daichi-Sankyo	Oct. 2016
Avapro, Aprovel (irbesartan)	SANOFI Bristol-Myers Squibb	Mar. 2014
Blopress (candesartan)	Takeda AstraZeneca	Jun. 2012

Antihypertensive drugs account for 5 of 10 top-selling cardiovascular products, each with annual sales >\$1 billion

Increasing generic threat creates significant need for innovative antihypertensive therapeutics candidates

Pipelines lack innovation; majority of late stage programs focused on combination therapies using existing drugs

Quantum Genomics aims to sign a partnership agreement with a Pharmaceutical Company while QGC001 is in phase II :

 **Goal**
 Building an alliance with a pharmaceutical company to develop the BAPAI platform

 **Upfront/ Milestones**
 Financing clinical and regulatory trials starting from the signature of the license

 **Royalties**
 The partner will be in charge of marketing and sales activities
 Starting sales ASAP after New Drug Approval
 Quantum Genomics will receive royalties on sales

Representative Transactions

Acquirer	Developer	Indication	Status	Terms
		Cardiovascular	Phase I	Upfront payment + up to € 120 million licence fees and milestone payments; Servier to continue development of XEN-D0103; Owns commercial rights ex US and Japan
		Hypertension	Phase II	Acquisition (90,3% of shares) : \$ 882.3 million

Sources: companies press release



QGC001: lead asset with blockbuster potential

- › Currently in phase II for hypertension
- › Leading anti-hypertensive drugs facing patent expiration



Unique approach in a large market

- › \$40 Billion in annual anti-hypertensive drug sales worldwide
- › >50% of hypertension patients lack adequate treatment



Robust pipeline of new drugs

- › 3 compounds in development for hypertension and 1 for congestive heart failure



BAPAI: novel therapeutic class for hypertension

- › Targets new pharmacological pathway in brain



Strong IP Portfolio

- › Exploitation of exclusive worldwide rights to fundamental BAPAI patents
- › Multiple patent applications pending



Appendices

Annex 1 – Design of the Phase I Clinical Studies

Study QGC001/1QG1

Clinicaltrials.gov:NTC019000171

56 subjects randomized

Single dose 10 mg (3 active, 1 placebo)
Single dose 50 mg (3 active, 1 placebo)
Single dose 125 mg (6 active, 2 placebo)
Single dose 250 mg (6 active, 2 placebo)
Single dose 500 mg (6 active, 2 placebo)
Single dose 750 mg (6 active, 2 placebo)
Single dose 1000 mg (6 active, 2 placebo)
Single dose 1250 mg (6 active, 2 placebo)

24 subjects randomized

8 subjects randomized

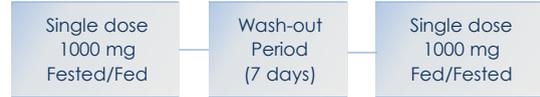
Two-ways crossover

36 subjects randomized

Study QGC001/1QG2

Clinicaltrials.gov:NTC019000184

Single dose 1000 mg (6 active, 2 placebo)
Single dose 1500 mg (6 active, 2 placebo)
Single dose 2000 mg (6 active, 2 placebo)

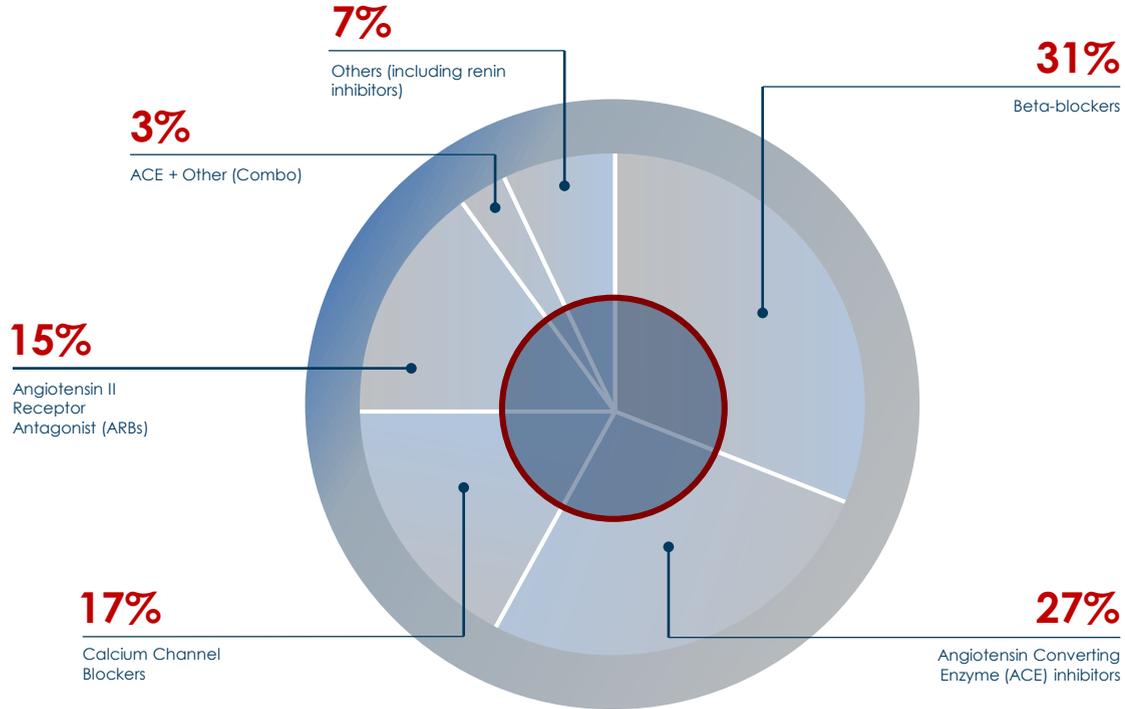


Repeated dose over 7 days 500 mg bid (9 active, 3 placebo)
Repeated dose over 7 days 750 mg bid (9 active, 3 placebo)
Repeated dose over 7 days 1000 mg bid (9 active, 3 placebo)

Inclusion criteria:

- Caucasian male healthy subjects of 18 to 45 years of age
- Body mass index ≤ 27 kg / m²
- Non-smoker or less than 5 cigarettes per day

Annex 2 – Existing antihypertensive drugs



Annex 3 – Simplified income statements and balance-sheet

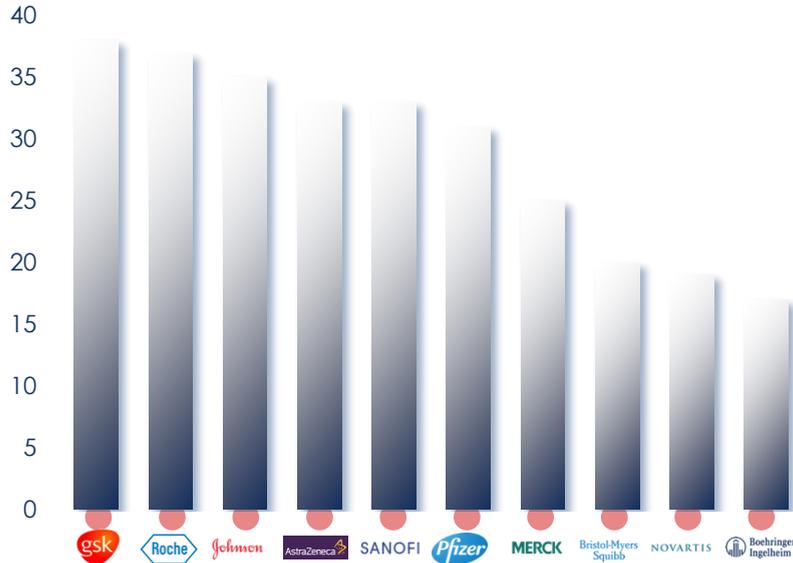
Audited data in € French GAAP	2014	2013
Revenue	12,000	17,400
Purchases and external expense	1,102,708	1,087,662
Personnel expenses	1,302,840	764,719
OPERATING RESULT	(2,417,548)	(1,902,545)
EARNINGS BEFORE TAX	(2,536,935)	(1,914,382)
EXTRAORDINARY INCOME	(4,889)	(1,028)
Research Tax Credit (RTC)	334,953	373,980
NET INCOME	(2,206,871)	(1,541,430)

Audited data in € French GAAP	12/31/2014
Fixed assets	623,502
Current receivables	644,613
Cash	3,318,033
Prepaid expenses	166,462
TOTAL ASSETS	4,752,610
Shareholders equity	(129,793)
Other equity (conditional advance)	727,500
Provisions	-
Financial debt	3,307,707
Other liabilities	847,196
TOTAL EQUITY AND LIABILITIES	4,752,610



Top dealmakers 2012 (number of deals)

Partnering remains of huge strategic importance to pharmaceutical companies, as R&D productivity declines, blockbuster drug revenues fall off the patent cliff and growth in the major markets stalls



**Approximately
600 R&D deals/
year WW**



**800 to 1 000 Licensing
deals/year WW**



**300 to 400 M&A/
year WW**

The background of the slide is a photograph of a laboratory setting. In the foreground, there are several rows of small, round, white petri dishes. In the background, there are several glass test tubes or pipette tips hanging vertically, some containing a blue liquid. The lighting is soft and focused on the dishes and tubes.

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