UNITED STATES SECURITIES AND EXCHANGE COMMISSION

WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): November 9, 2022

23andMe Holding Co.

(Exact name of Registrant as Specified in Its Charter)

Delaware (State or Other Jurisdiction of Incorporation) 001-39587 Commission File Number) 87-1240344 (IRS Employer Identification No.)

349 Oyster Point Boulevard South San Francisco, California 94080 (Address of principal executive offices, including zip code)

Registrant's telephone number, including area code: (650) 938-6300

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:						
	□ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)					
	Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)					
	Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))					
	Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))					
Securities registered pursuant to Section 12(b) of the Act:						
	Title of each class	Trading Symbol(s)	Name of each exchange on which registered			
Class A Common Stock, \$0.0001 par value per share		ME	The Nasdaq Global Select Market			
Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§ 240.12b-2 of this chapter).						
Emerging growth company □						
If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. \Box						

Item 7.01. Regulation FD Disclosure.

On November 9, 2022, 23andMe Holding Co. posted the presentation attached as Exhibit 99.1 to this Current Report on Form 8-K to its Investor Relations website at investors.23andme.com, which information is incorporated herein by reference.

The information in this report furnished pursuant to Item 7.01, including Exhibit 99.1 attached hereto, shall not be deemed "filed" for the purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that section. It shall not be deemed to be incorporated by reference into any of the Company's filings under the Exchange Act or the Securities Act of 1933, as amended, whether made before or after the date hereof and regardless of any general incorporation language in such filings, except to the extent expressly set forth by specific reference in such a filing.

The website address set forth above is included as an inactive textual reference only. The information contained on the website referenced herein is not incorporated into this Current Report on Form 8-K.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

Exhibit No.	Description of Exhibit
99.1	Investor Presentation
104	Cover Page Interactive Data File - the cover page interactive data file does not appear in the Interactive Data File because its XBRL tags are embedded within the Inline XBRL document

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned thereunto duly authorized.

23ANDME HOLDING CO.

Date: November 9, 2022

/s/ Joseph Selsavage Name: Joseph Selsavage Interim Chief Financial and Accounting Officer



Disclaimer

This presentation contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended, including statements regarding the future performance of 23andMe's businesses in consumer genetics and therspeutics and the growth and potential of its proprietary research platform. All statements, other than statements of historical fact, included or incorporated in this presentation, including statements regarding 23andMe's strategy, financial position, funding for continued operations, cash reserves, projected costs, plans, and objectives of management, are forward-looking statements. The words "believes," "anticipates," "estimates," "plans," "expects," "intends," "may," "could," "should," "potential," "likely," "projects," "continue," "will," "schedule," and "would" or, in each case, their negative or other variations or comparable terminology, are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words. These forward-looking statements are predictions based on 23andMe's current expectations and projections about future events and various assumptions. 23andMe cannot guarantee that it will actually achieve the plans, intentions, or expectations and isolosed in its forward-looking statements and you should not place undue relatance on 23andMe's forward-looking statements. The forward-looking statements contained herein are also subject generally to other risks and uncertainties that are described from time to time in the Company's filings with the Securities and Exchange Commission, including under Item 14, "Risk Factors" in the Company's most recent Annual Report on Form 19-K, as filed with the Securities and Exchange Commission, and as revised and updated by our Quarterly Reports on Form 19-Q and Current Reports on Form 8-K. These forward-looking statements involve a number of risks, uncertainties (many of which are beyond the control of 23andMe), or other assumptions that may cause actual results or performance to be materially different from those expressed or implied by these forward-looking statements, Investors are cautioned not to place undue reliance on any such forward-looking statements, which speak only as of the date they are made. Except as required by law, 23andMe does not undertake any obligation to update or revise any forward-looking statements whether as a result of new information, future events, or otherwise

Use of Non-GAAP Financial Measures

To supplement the 23andMe's unaudited condensed consolidated statements of operations and unaudited condensed consolidated balance sheets, which are prepared in conformity with generally accepted accounting principles in the United States of America ("GAAP"), this presentation also includes references to Adjusted EBITDA, which is a non-GAAP financial measure that 23andMe defines as net income before net interest expense (income), net other expense (income), changes in fair value of warrant liabilities, income tax (provision) benefit depreciation and amortization of fixed assets, amortization of internal use software amortization of acquired intancible assets, non-cash stock-based compensation expense, acquisition-related costs mal and continued business activities and expe rises related to restructuring and other charges, if applicable for the period. 23 and Me has provided a reconciliation of net loss, the most directly comparable GAAP financial measure, to Adjusted EBITDA at the end of this presentation.

Adjusted EBITDA is a key measure used by 23andMe's management and the board of directors to understand and evaluate operating performance and trends, to prepare and approve 23andMe's annual budget and to develop short- and long-term operating plans. 23andMe provides Adjusted EBITDA because 23andMe believes it is frequently used by analysts, investors and other interested parties to evaluate companies in its industry and it facilitates comparisons on a consistent basis across reporting periods. Further, 23andMe believes it is helpful in highlighting trends in its operating results because it excludes items that are not indicative of 23andMe's core operating performance. In particular, 23andMe believes that the exclusion of the Items eliminated in calculating Adjusted EBITDA provides useful measures for period-to-period comparisons of 23andMe's business. Accordingly, 23andMe betieves that Adjusted EBITDA provides useful infor operating results in the same manner as 23andMe's management and board of directors.

In evaluating Adjusted EBITDA, you should be aware that in the future 23 and Me will incur expenses similar to the adjustments in this presentation. 23 and Me's presentation of Adjusted EBITDA should not be construed as an inference that future results will be unaffected by these expenses or any unusual or non-recurring items. Adjusted EBITDA should not be considered in isolation of, or as an alternative to, measures prepared in accordance with GAAP. Other companies, including companies in the same industry, may calculate similarly-titled non-GAAP financial measures differently or may use of them than entries of the same industry. The continued in accordance with GAAP for financial measures calculated to the use of these one-GAAP financial measures calculated in accordance with GAAP. Some of the iministations of Adjusted EBITDA does not properly reflect capital commitments to be paid in the future, and (ii) although depreciation and amortization are non-cash charges, the underlying assets may need to be replaced and Adjusted EBITDA does not reflect these capital expenditures. When evaluating 23andMe's performance, you should consider Adjusted EBITDA alongside other financial performance measures, including net loss and other GAAP results.

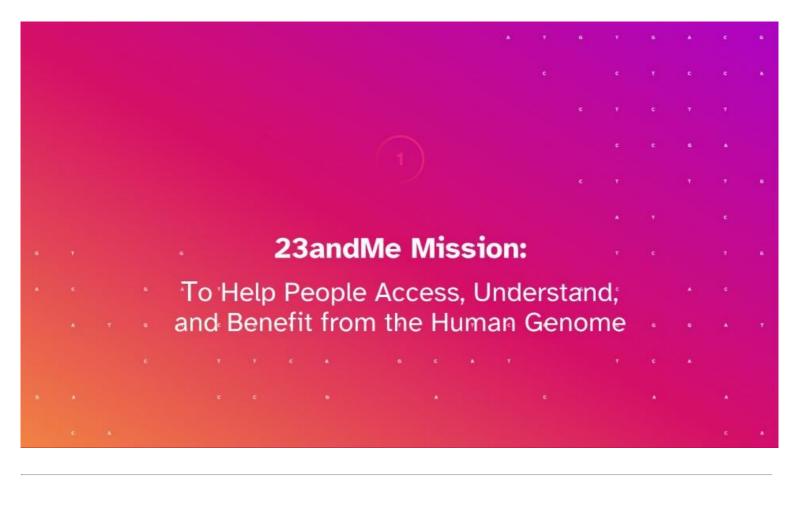
Intellectual Property

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Industry and Market Data

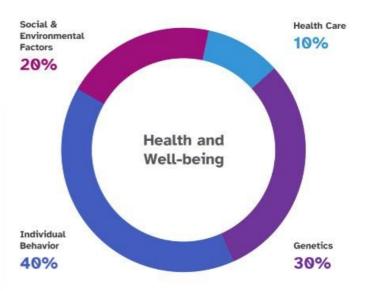
This Presentation relies on and refers to certain information and statistics based on 23andMe's management's estimates, and/or obtained from third party sources which it believes to be reliable. 23andMe has not independently verified the accuracy or completeness of any such third party information.

23andMe



The Problem: Today's Healthcare System Has Only a Small Impact on Our Health and Well Being

Impact of Different Factors on Risk of Premature Death¹



I. Schroeder, SA. (2007). We Can Do Better - Improving the Health of the American People. NEJM. 357:1221-8.

Today's Healthcare System is Dysfunctional

"Of course our system isn't about healthcare, it's about maximizing revenue for a whole bunch of different players that have nothing to do with what's good for patients."

Elisabeth Rosenthal (Editor-in-Chief, Kaiser Health News)

JAMA, "Waste in the US Health Care System" (2019). "Redpoint Globa! / Dynata survey of over 1,699 U.S. consumers (2029)." Gallup, "Americans: Views of U.S. Business and Industry Sections" (2020). "PhRMA, "Blopharmaceutical Research & Development The Process Behind New Medicines" (2015).

25%

U.S. healthcare spending is waste

75%²

Consumers wish their healthcare experience was **more personalized**

-15°

The Net Promoter Score (NPS) Americans gave the **pharmaceutical industry**

<12%

Probability of success for a drug to be approved, taking ~10 years and costing \$2.6B to develop

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E



Unlocking the Genetic Code Creates the Opportunity to Revolutionize the Diagnosis, Prevention and Treatment of Human · Disease ·

Cracking the code...

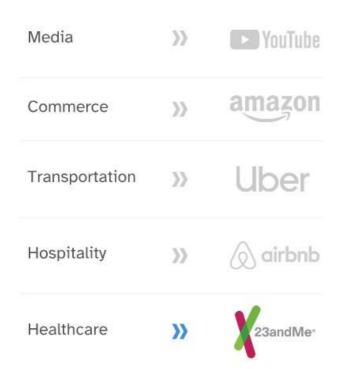
ACGT

...is a data problem, a very big data problem









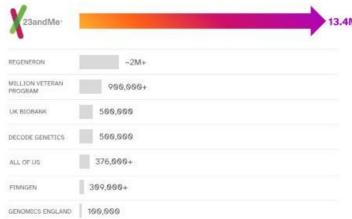
Consumer Scale and Empowerment is the Key to Disrupting Healthcare

"Healthcare cannot change from within, it will need an outside force to change it, and that force will be our customers."

Anne Wojcicki

The **Size and Scale** of 23andMe Enables **Rapid, Novel Discoveries**





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1 As of September 39, 2022.

We Pioneered Digital DTC Healthcare to Empower Customers With Affordable, Direct Access

TIME MAGAZINE INVENTION OF THE YEAR

1. The Retail DNA Test

By Anita Hamilton | Wednesday, Oct. 29, 2008



Best Inventions of 2008

From a genetic testing service to an invisibility obei to an ingenitius public bike system to the world's first movin skyecraper — here ere TIME's picka for the lop innovations of 2008

best inventions of 2000

8 FDA

Proven accuracy (99% NPV/PPV) and accessibility¹

2015	Carrier	Status	(inherited	conditions)
------	---------	--------	------------	-------------

2016 GHR (genetic health risk)

2017 BRCA (breast and ovarian cancer)

2018 PGt (pharmacogenetic metabolism)

2019 MUTYH (colorectal cancer)

2020 PGt (pharmacogenetic drug response)

2022 HOXB13 (prostate cancer)

2022 Simvastatin (cholesterol PGt)

ee FDA De Novo Authorizations 146944, 169926, 179946 and 189928 and FDA 518K Clearances K182784 and K193492

>90%

of 23andMe+ members receive a report with meaningful genetic results 18,000+

Customers with an increased risk for Chronic Kidney Disease

8,000+

Customers with a tested BRCA1 / BRCA2 variant 12,000+

Customers with Hypercholesterolemia (FH) variants

Providing Customers With Key, Actionable Insights

"Like me, there are many women who have slipped through the cracks of our current medical screening system, either because they don't have a family history of breast or ovarian cancer. Or they do not know that they have Ashkenazi Jewish ancestry. In my case, even though I know I have Ashkenazi ancestry, that wasn't enough to prompt my doctor to consider screening. So there are many women walking around with this risk, who, like me, would have never known of their own risk but for this test from 23andMe."

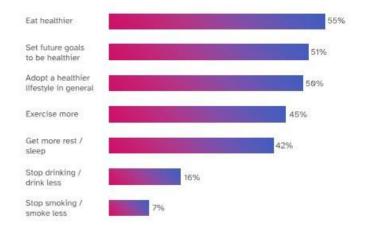
23andMe customer who discovered she had a BRCA1 mutation

Note: Estimates based on prevalence of variants in 23andMe's Database as of September 30, 2022.

Genetic Data Helps Drive Behavior Change

76%

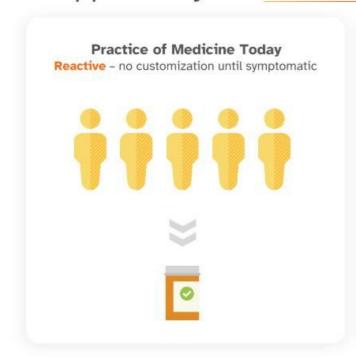
Report taking a positive health action¹



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Opportunity for Personalized Healthcare at Scale





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Problems we are solving

1

Prevention is not a focus

The majority of people living in the United States don't think about health until it's too late.

2

Health is not accessible

Healthcare is elusive to many people and it is often gated by affordability, geography, cultural affinity, and overly complex systems. 3

Health is not personal

Most healthcare today takes a generic approach, often missing the full context to people's lives and failing to deliver a path to their wellbeing.

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What are Genetic Health Services?

Health Predispositions

Identify risks, implement targeted prevention, monitoring, and management



Wellness

Targeted to help you feel your best



Pharmacogenetics

Therapeutics that work best for you



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Future of 23andMe: Fully Integrated Genetic Health Services











Genetic Health Evaluation **Telehealth Services**

Lab Tests

Precision Prescribing Using Pharmacogenetics

Long-term Engagement

All connected within a single technology platform

Available in all

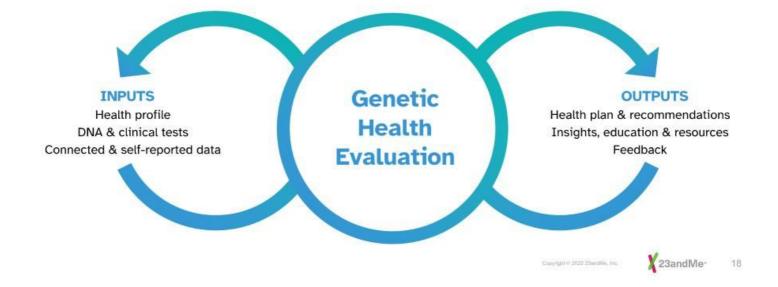


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First Step: Genetic Health Evaluation

A dynamic, longitudinal service that combines **your health data** (genetic, medical, lifestyle, environmental, wearables, etc.) with your interests and goals, and delivers a **personalized health & wellness plan** with interesting, engaging, recommendations.



Next Step: Implementing a Genetically Informed, Personalized Health & Wellness Plan

Consultation with a clinician to develop a personalized health & wellness plan that could include additional labs, treatment options and lifestyle changes



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23andMe Personal Genome Service (PGS)

The First and Only Multi-Disease DTC Personal Genome Service that Includes FDA-Authorized Reports and Provides Personalized Genetic Insights and Tools



Health Predispositions¹

30+

Including:

Type 2 Diabetes (Powered by 23andWe) Coronary Artery Disease 23andMa+ Uterine Fibroids 23andMe+ Migraine 2SandMe+ MUTYH-Associated Polyposis

BRCA1/BRCA2 (selected variants)



Wellness²

10

Including: Muscle Composition Genetic Weight Alcohol Flush Reaction Saturated Fat and Weight Sleep Movement Dog & Cat Allergies 23andMo+

Carrier Status

40+

Including: Cystic Fibrosis Sickle Cell Anemia Familial Hyperinsulinism (ABCC8-Related) Tay-Sachs Disease Glycogen Storage Disease (Type 1a)



Pharmacogenetics

23andMe+

Including: SLCO1B1 Drug Transport CYP2C19 Drug Metabolism

· e.g., citalopram and clopidogrel DPYD Drug Metabolism







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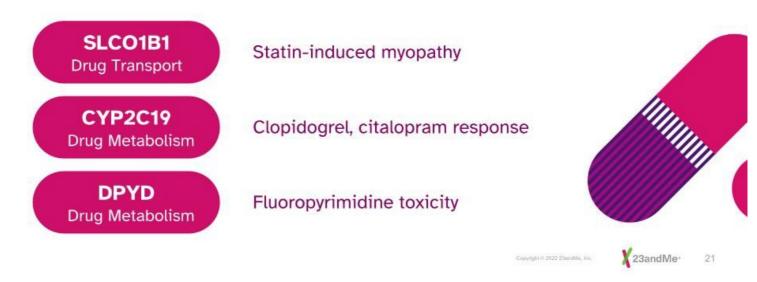
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Includes FDA Authorized Genetic Health Risk Reports and Wellness Reports for Genetic Likelihood Powered by 23andMe Research.
 Wellness information does not require FDA Authorization.

Unique to 23andMe: FDA-approved Pharmacogenetics Reports

3 reports and **2 medication insights** that look at genetic variants that influence how a person responds or processes certain medications (FDA-cleared)



Long-term Engagement with Customers



Educate

General education about health risks and preventative measures in context of overall health



Passive Data Monitoring

Monitor health data and recommend earlier testing based on risk assessment



Follow-up Testing

Schedule follow-up labs as needed based on risks identified in genetic health evaluation



Automated Insights

Tailored recommendations based on individual health data



Clinician Consultation

Option to consult with Lemonaid clinician as needed



Cascade Testing

Potential for education & testing of family members as needed





Bold predictions for human genomics by 2030



The regular use of **genomic information** will have transitioned from boutique to mainstream in all clinical settings, making genomic testing **as routine as complete blood counts.**"

Strategic vision for improving human health at the forefront of genomics

National Human Genome Research Institute
Nature, October 28, 2020





Limited Use of Genetic Data and Lack of Patient Engagement Constrain Productivity

Drug Development is Inefficient



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Pharmaceutical Industry

years average time-to-IND1

failure rate²

23andMe

years to IND with current clinical-stage drugs

Targets with genetic evidence have historically had a higher success rate³

Publications supporting human genetic evidence for approved drug indications

Nelson et al., 2015 (Nature Genetics); King et al., 2019 (PLOS Genetics)

Potential to More Efficiently Develop Novel Therapeutics by "Power, Need, and Speed"

IND = Investigational New Drug Application, Idareview.org, "The Drug Development and Approval Process" (2929).

Probability of success for a drug to be approved is estimated to be <12%, PhRMA, "Biopharmaceutical Research & Develot The Process Behind New Modicines" (2919).

Nelson et al., 2915 (Nature Genetics), King et al., 2019 (PLOS Genetics)

Our Scale Enables Real-Time Genetics Health Research¹ (numbers below represent the number of research participants with the condition

	1,876,573 High cholesterol	358,275 Type 2 Diabetes	37,853 Type 1 Diabetes
	1,785,456 Depression	2,355,068 APOE e4 carriers (Alzheimer's risk)	85,604 Epilepsy
-4	1,113,057 Asthma	667,019 Eczema	250,764 Psoriasis
	634,734 Irritable Bowel	107,126 UC / Crohn's	64,800 Barrett's Esophagus
(6	534,696 Arrhythmia	159,135 Coronary Artery	42,836 Pulmonary Embolism
1	9,047 Systemic Sclerosis	7,334 Sarcoidosis	4,528 Idiopathic Pulmonary Fibrosis

¹ As of August 2, 2621. ² As of September 2621. ¹ 23andMe COVID-19 manuscript live on MedRXiv September 7, 2629.

1,287,060

750K

Consumers participated in the COVID-19 study in the **first 90 days**



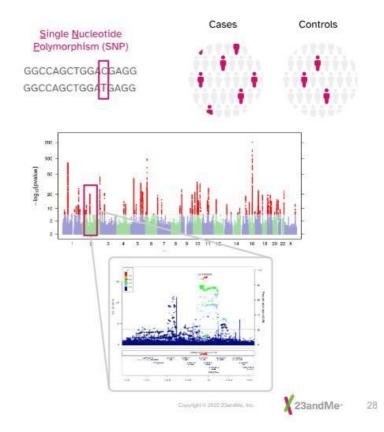
March 16 Kicked Off Study

- April 6 Launched Study
- June 8 Preliminary Findings Posted Findings³ Sept. 7

Re-contactable Customers Participate in Health Research

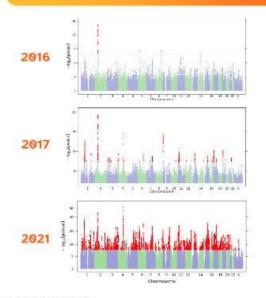
Genome-Wide Association Studies (GWAS)

- WAS is a statistical analysis of Single Nucleotide Polymorphisms (SNPs), looking to identify differences in frequency between disease cases and controls.
- SNPs tinked with disease will be found at different frequencies in cases versus controls.
- Association is represented by the level of statistical significance (p-value) of the SNP frequency difference.
- SNPs can be tested across the genome and mapped to specific regions.

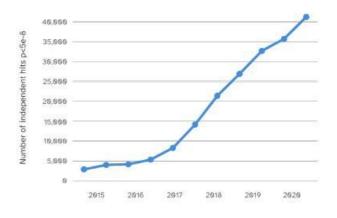


Size and Scale Accelerate Target Discovery

Example: Number of Osteoarthritis GWAS¹ hits dramatically increase as database grows



New programs are identified through GWAS¹ hits, which increase as size of database grows



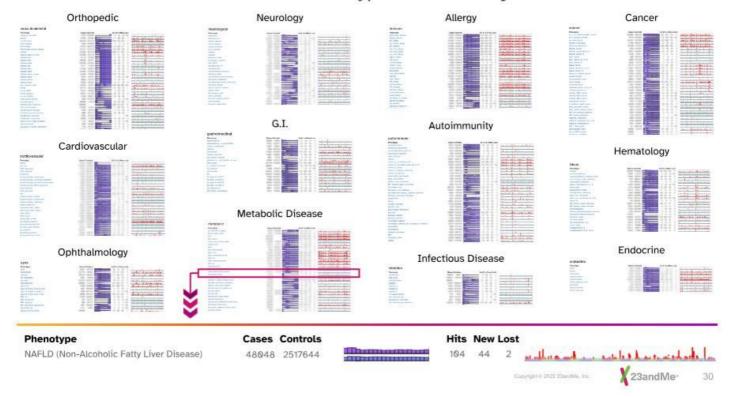
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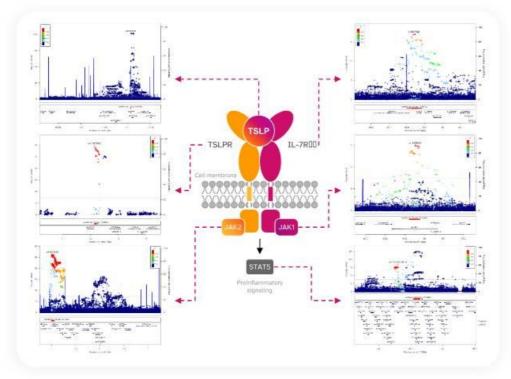
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1 GWAS: Genome-Wide Association Study.

Hundreds of Distinct Clinical Phenotypes Across Major and Rare Diseases



Genetic Association of the TSLP Signalling Pathway With Asthma



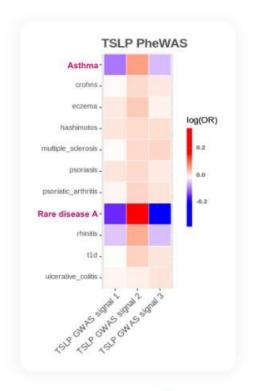
- TSLP is a well-known cytokine with a role in maintaining immune homeostasis and regulating inflammatory responses at mucosal barriers.
- The TSLP signaling pathway is an attractive therapeutic target. e.g. Tezepelumab, a TSLP-blocking monoclonal antibody for treatment of asthma.
- Our genetic data shows that multiple genes within the TSLP pathway associate strongly with asthma.

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Breadth of Phenotyping Provides Deeper Genetic Understanding Beyond Single Diseases

- PheWAS = Phenotype Wide Association Study
- Every SNP in the genome can be interrogated at >1,000 medically related phenotypes.
- Besides the role of a gene in a disease of interest, we can use genetics to learn potential indication expansions or possible unwanted toxicities.
- For TSLP, PheWAS indicates lack of effect in eczema but also <u>highlights potential indication expansion in a rare</u> <u>disease.</u>



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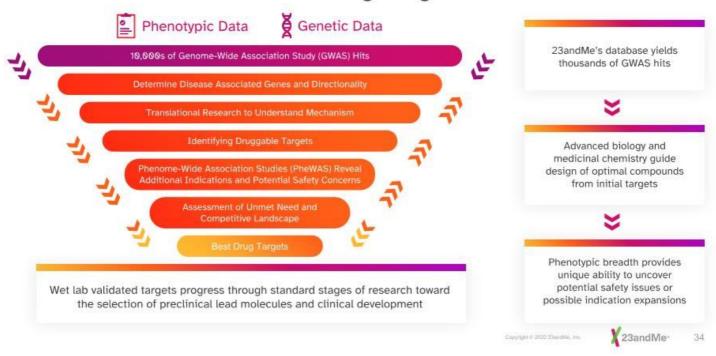
We Have Generated a Research and Development Pipeline Covering Multiple Therapeutic Areas



GSK is solely responsible for the development of GSK6897698 (GSK'698) in later-stage clinical trials. Subject to its successful commercialization, 23andMe is eligible to earn tiered worldwide royatiles up to the low double cligits.
 The 59+ programs in the combined therapeutic areas include 189% owned and royalty interest targets as well as those in collaborations. The majority of the programs are in collaboration with GSK. Note: As of March 31, 2922

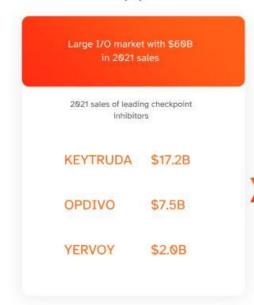


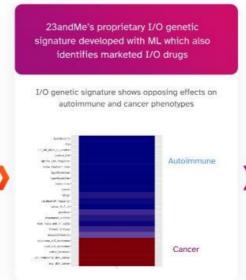
Systematic, Scalable Research Platform Yields Novel Drug Targets

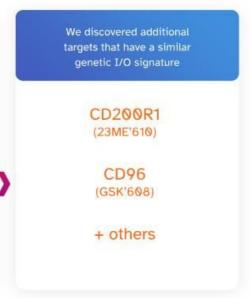


23andMe Immuno-oncology (I/O) Programs

Our I/O Programs Were Identified With ML and AI Applied to Our Proprietary I/O Genetic Signature





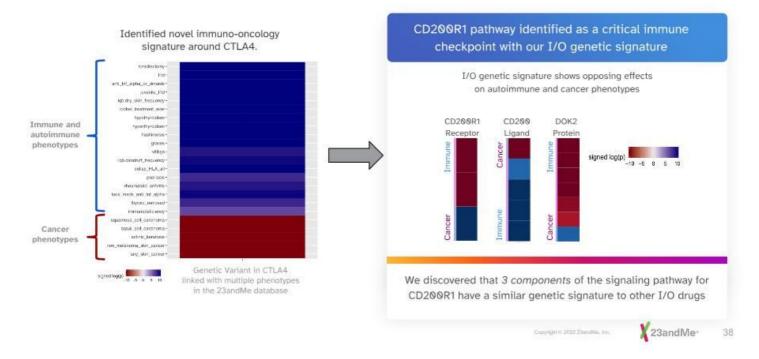


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23ME'610 Targeting CD200R1

CD200R1 was Identified as a Promising Anti-Cancer Drug Target with 23andMe's Proprietary Immuno-oncology (I/O) Genetic Signature

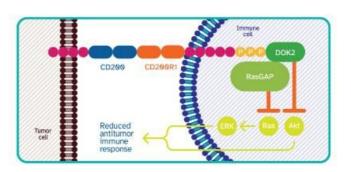


CD200R1 is an Immune Checkpoint

- CD200R1 is an inhibitory receptor expressed on Tcells and myeloid cells
- CD200 is the only known ligand for CD200R1 in humans and is highly expressed in certain cancers
- Binding of CD200 to C200R1 decreases the ability of T-cells to recognize and kill cancer cells
- Several viruses have co-opted CD200 analogues to suppress and evade the host immune response

References: J Virol 2012;86:6246, J Virol 2004;78:7867, J Immunol 2005;175:4441, Structure 2813;21:829, JCI. Insight 2018;3:e96836

CD200:CD200R1 Signaling



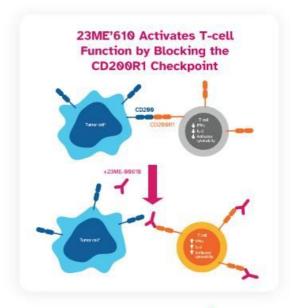
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23ME-00610 (23ME'610) Binds with High Affinity to CD200R1 and Inhibits Immunosuppressive Signaling

- 23ME '610 is a fully humanized, effectorless, IgG1 antibody against human CD200R1
- 23ME '610 binds CD200R1 with high affinity (K_D < 0.1 nM)
- 23ME '610 blocks CD200 ligand binding to CD200R1, resulting in inhibition of immunosuppressive signaling
- The restoration of T-cell activity by 23ME '610 was demonstrated using in vitro models of the tumor microenvironment
- No adverse effects of blocking CD200R1 have been observed in nonclinical toxicology studies

*CD200-expressing cell types include tumor, stroma and endothelial IFN, interferon; IL, interleukin

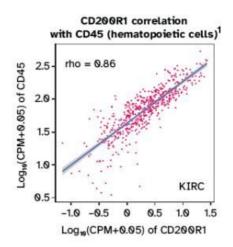


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CD200R1 is expressed on tumor-infiltrating lymphocytes (TILs) from The Cancer Genome Atlas (TCGA)

- CD200R1 expression (using RNAseq data from TCGA) is correlated with several immune cell markers: CD4, CD8, CD45 (shown), and CD11b
- CD200R1 is co-expressed with antigens or markers that are expressed on lymphocytes seen in most cancer types



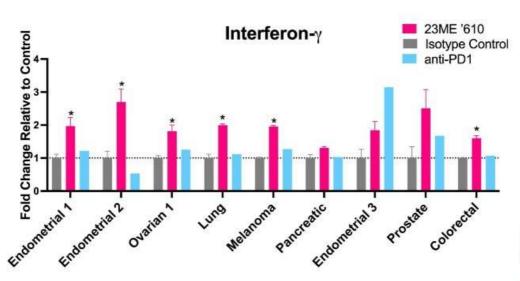
 Clear cell renal carcinoma (KIRC) is shown and was chosen because it had high immune infiltration in the TCGA dataset

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Inhibition of CD200R1 has the potential to address resistance to anti-PD1 therapies

Blocking the CD200R1 pathway enhanced IFNy production from SEB-stimulated PBMCs compared to isotype control and anti-PD1 in the majority of samples tested



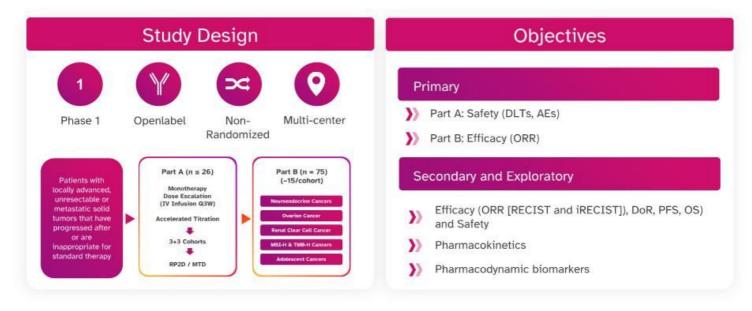
PBMC, peripheral blood mononuclear cell; PD-1, programmed death-1; SEB, staphylococcal enterotoxin B.

PBMCs from each respective patient were incubated with 100 nM of 23ME-00610, anti-PD-1, or isotype control. Cells were stimulated with SEB. IFNY levels were determined by enzyme-linked immunosorbent assay. Mean biologic triplicates were normalized to isotype control. *P <0.05.

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Phase 1 Study of 23ME'610 in Patients with Locally Advanced or Metastatic Solid Malignancies



Abbreviations: AEs: Adverse Events; DLT: Dose limiting toxicity, DOR: duration of response; IV: Intravenous; ORR: Objective Response Rate; OS: Overall Survivat PFS: Progression Free Survivat; Q3W: every three weeks; RECIST: Response Evaluation Criteria in Solid Tumors: RP2D: Recommended Phase 2 Dose Copyright © 2022 23 and Me, Inc.



23ME'610 Targeting CD200R1: A Genetically-Validated Approach to Anti-Cancer Therapy

- CD200R1 is an immune checkpoint with a strong I/O signature in three components of the pathway.
- 23ME-00610 is a high-affinity, first-in-class, anti-CD200R1 antibody with immune-activating properties, including:
 - Prevention of CD200-mediated suppression of chronically stimulated T cells
 - Enhancement of cytokine secretion from peripheral blood mononuclear cells (PBMCs) isolated from cancer patients
 - Augmentation of PBMC-mediated tumor cell killing
- CD200R1 expression was observed on tumor infiltrating lymphocytes from The Cancer Genome Atlas, suggesting that this pathway contributes to an immunosuppressive tumor microenvironment.
- CD200R1 was also expressed in immune checkpoint inhibitor non-responders, indicating that
 inhibition of the CD200R1 immune checkpoint has the potential to address resistance to anti-PD-1
 and anti-CTLA4 therapies¹.
- Part B of Phase 1 study will evaluate four tumor indication-specific expansion cohorts and a cohort of adolescents with locally advanced unresectable, or metastatic solid malignancies.

1. Data presented in poster at 2922 American Association for Cancer Research (AACR) annual meeting

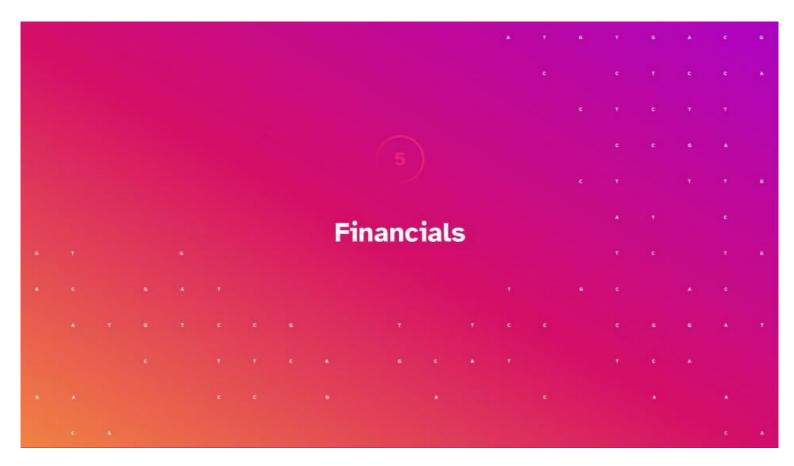
GSK6097608 (GSK'608) Targeting CD96

The GSK'608 Program is a Prime Example of the Value 23andMe Brings to Drug Discovery and Development

- Inhibition of CD96 leads to immune activation and tumor growth inhibition in non-clinical models
- GSK'608 is a high affinity monoclonal antibody against CD96
- GSK'608 is currently being evaluated in an ongoing Phase 1 study
- In January 2022, 23andMe elected to take a royalty option on GSK'608. As a result, GSK is now solely responsible for the development of GSK'608.

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Investing in Future Growth in a Fiscally Responsible Manner

- 1 Investing in future growth potential. For those business segments expected to drive future growth, including the new genetic health services and our therapeutics business, we plan to focus on the most strategically and financially valuable options and invest appropriately in each.
- Employing a conservative approach to planning. Recognizing the current uncertainties in the economy and financial markets, we are prioritizing the minimization of Adjusted EBITDA deficit rather than maximizing top-line growth in our Consumer business (PGS and telehealth).
- 3 Solid cash position. Cash of \$411 million¹ supports 23andMe's plans for significant investment in Therapeutics portfolio and strategic initiatives.

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'As of September 39, 2922.

Revenue Composition

		Three Months Ende	d September	30,	Year End	ed March 31,
(in \$M, except percentages)	FY2023		FY2022		FY2022	
	Amount	Percentage of Revenue	Amount	Percentage of Revenue	Amount	Percentage of Revenue
Consumer Services	\$57	75%	\$44	80%	\$222	82%
Research Services	19	25%	11	20%	50	18%
Therapeutics	100	360			-	
Total Revenue	\$76	100%	\$55	100%	\$272	100%



Consumer Services Revenue Seasonality by Quarter

	Q1	Q2	Q3	Q4	Full Year
FY 2019	28%	19%	18%	35%	100%
FY 2020	24%	24%	21%	31%	100%
FY 2021	18%	21%	22%	39%	100%
FY 2022	22%	20%	21%	38%	100%



Research and Development Expense

	Three Months Ended September 30,				YoY
(in \$M, except percentages)	FY2023		FY2022		101
	Amount	Percentage of total R&D expense	Amount	Percentage of total R&D expense	% Change
Therapeutics	\$24	46%	\$22	48%	12%
Consumer and Research Services	28	54%	23	52%	23%
Total R&D Expense	\$53		\$45		

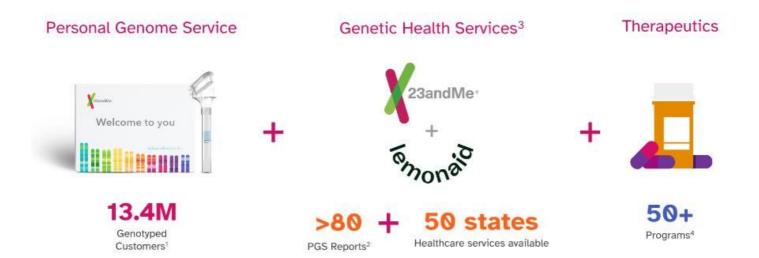


Sales and Marketing Expense Composition

	Three Months Ended September 30,		
	FY2023	FY2022	
(in \$M)	Amount	Amount	
Advertising and Brand	\$12	\$7	
Personnel-related expenses	5	3	
Outside Services, equipment and supplies	2	1	
Depreciation and Amortization	3	\$	
Facilities and other OH Alloc	2	2	
Total S&M Expense	\$25	\$14	



How 23andMe Helps People Access, Understand, and Benefit from the Human Genome

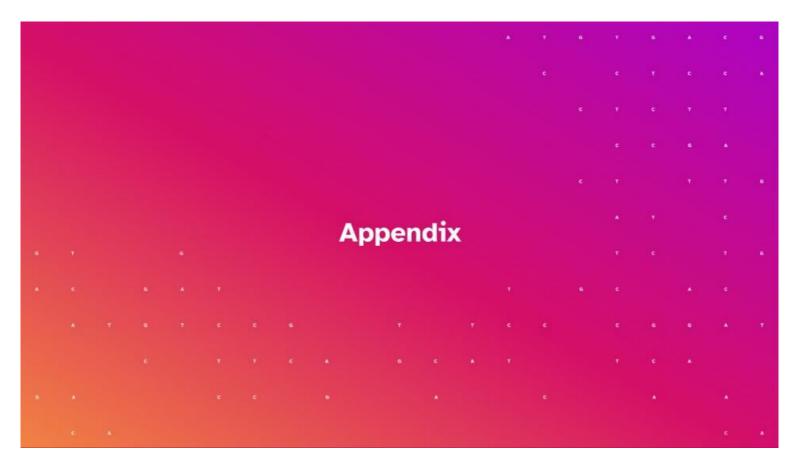


. As of September 39, 2022. 2. Includes Health Predisposition, Wellness, Carrier Status and Pharmacogenetic Reports, including those in 23 and Men. subscription service. 3. Future services currently in development. 4. As of March 33, 2822.

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E.

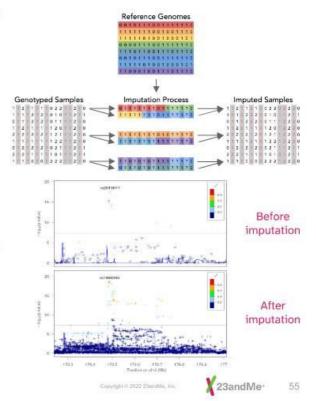


The Vast Majority of GWAS Discoveries Can be Made Without Large-scale Sequencing

- Nearby genetic variants are correlated with each other. Knowing the variant in one position allows nearby variants to be inferred.
 - . E.g. Fill in the blanks:

The q***k brown f*x jumps ov*r the **zy dog.

- The same principle applies in genetics. The process of filling in the gaps is known as 'genotype imputation'.
- We type ~650,000 SNPs using our genotyping array, which allows accurate imputation for >35m SNPs in the genome.
- Genotype imputation is much more cost effective than largescale sequencing.
 - · Whole-genome sequencing ~\$1000 / sample.
 - Exome sequencing ~\$400 / sample.
 - Imputation < \$0.01 / sample
- We do deploy sequencing in situations where there is a clear benefit over and above imputation (e.g. rare disease).



23andMe's Value Proposition

- Disrupting the Healthcare experience. 23andMe is building a personalized health and wellness experience that caters uniquely to the individual by harnessing the power of their DNA. Integrating Lemonaid Health's online digital health platform to deliver personalized, prevention-oriented, genetically-based healthcare at scale
- The world's premier re-contactable phenotype-linked genetic database. A vast (>13M genotyped customers) proprietary dataset rich with both genotypic and phenotypic (health) information allows insights that unlock revenue streams across digital health, therapeutics, and much more
- Continuously increasing quantity and quality of phenotypic data. Impressive customer participation provides >4 billion phenotypic data points for unprecedented statistical power to discover new insights into health and potential therapies.
- Over 50 identified therapeutic programs validates the approach of developing novel therapeutics using genetic data. One program in clinical development with GSK, one wholly owned program started clinical trials in January 2022.
- Difficult to replicate platform for value creation. The FDA-approved consumer platform, the
 therapeutics efforts, and the rich database combine to create multiple opportunities for substantial value creation
- **Solid cash position.** Solid balance sheet supports 23andMe's plans for significant investment in therapeutics portfolio and strategic initiatives

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