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): June 21, 2022

CRISPR THERAPEUTICS AG

(Exact name of Registrant as Specified in Its Charter)

Switzerland	**001-37923**	**Not Applicable**
(State or Other Jurisdiction of Incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**
Baarerstrasse 14 6300 Zug, Switzerland **(Address of Principal Executive Offices)**		**Not Applicable** **(Zip Code)**

Registrant's Telephone Number, Including Area Code: 41 (0)41 561 32 77

(Former Name or Former Address, if Changed Since Last Report)

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
Common Shares, nominal value CHF 0.03	CRSP	The Nasdaq Global 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.
☐

Item 8.01 Other Events.

On June 21, 2022, the Company hosted an Innovation Day and presented updates on various of its preclinical and clinical programs. Selected slides from the presentation are attached hereto as Exhibit 99.1 and are incorporated herein by reference.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits:

Exhibit No.	Description
99.1	Selected Slides from Presentation, dated June 21, 2022
104	Cover Page Interactive Data File (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.

CRISPR Therapeutics AG

Date: June 21, 2022

By: /s/ Samarth Kulkarni
Samarth Kulkarni, Ph.D.
Chief Executive Officer

Exhibit 99.1

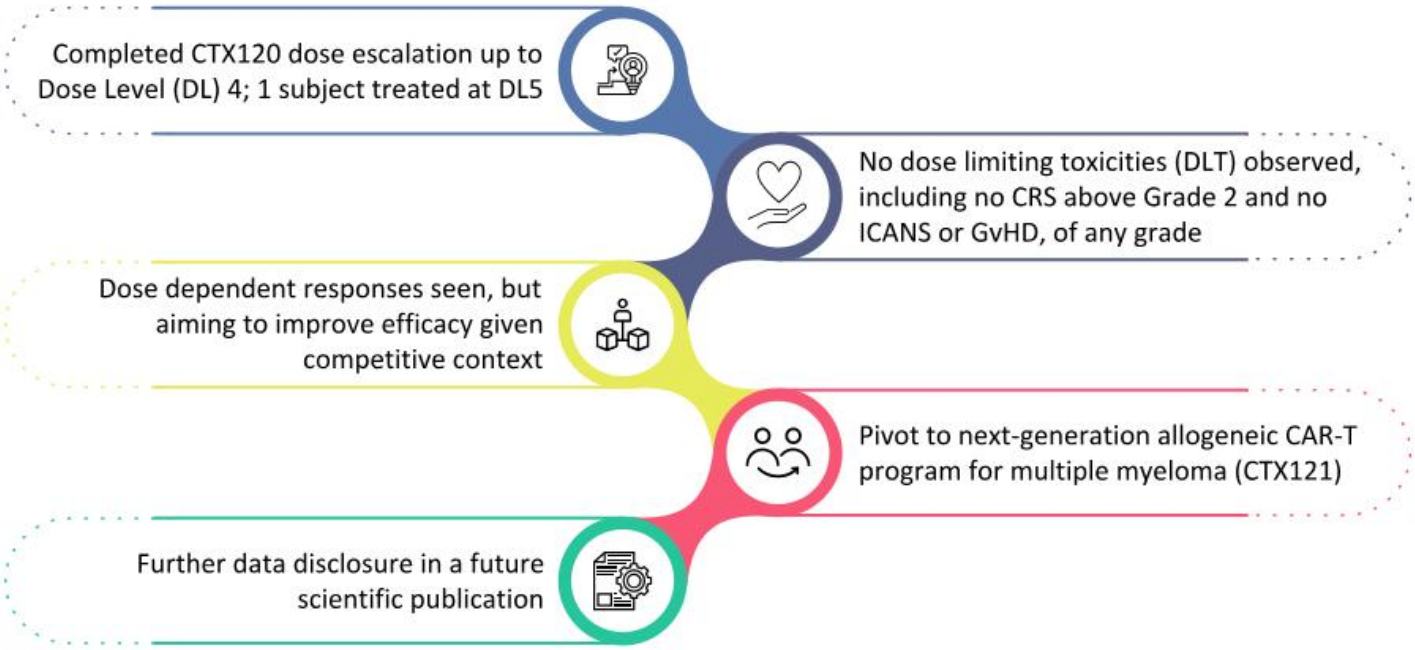

CRISPR
THERAPEUTICS
CRISPR Therapeutics Innovation Day
June 21, 2022

Forward-Looking Statements

The presentation and other related materials may contain a number of "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995, as amended, including statements regarding CRISPR Therapeutics' expectations about any or all of the following: (i) its plans and expectations for its preclinical studies, clinical trials and pipeline products and programs; (ii) the safety, efficacy and clinical progress of its various clinical programs; (iii) the status of preclinical studies and clinical trials (including, without limitation, the expected timing of data releases, announcement of additional programs and activities at clinical trial sites, and discussions with regulatory authorities) and expectations regarding the data that is being presented; (iv) the data that will be generated by ongoing and planned preclinical studies and clinical trials and the ability to use that data for the design and initiation of additional preclinical studies and clinical trials; (v) the activities under its collaborations and the expected benefits thereof; and (vi) the therapeutic value, development, and commercial potential of CRISPR/Cas9 gene editing technologies and therapies, including as compared to other therapies. Without limiting the foregoing, the words "believes," "anticipates," "plans," "expects" and similar expressions are intended to identify forward-looking statements. You are cautioned that forward-looking statements are inherently uncertain. Although CRISPR Therapeutics believes that such statements are based on reasonable assumptions within the bounds of its knowledge of its business and operations, forward-looking statements are neither promises nor guarantees and they are necessarily subject to a high degree of uncertainty and risk. Actual performance and results may differ materially from those projected or suggested in the forward-looking statements due to various risks and uncertainties. These risks and uncertainties include, among others: the potential for initial and preliminary data from any clinical trial and initial data from a limited number of patients not to be indicative of final trial results; the potential that clinical trial results may not be favorable; that one or more of its internal or external product candidate programs will not proceed as planned for technical, scientific or commercial reasons; that future competitive or other market factors may adversely affect the commercial potential for its product candidates; uncertainties inherent in the initiation and completion of preclinical studies and whether results from such studies will be predictive of future results of future studies or clinical trials; it may not realize the potential benefits of its collaborations; potential impacts due to the coronavirus pandemic, such as the timing and progress of clinical trials; uncertainties regarding the intellectual property protection for its technology and intellectual property belonging to third parties, and the outcome of proceedings (such as an interference, an opposition or a similar proceeding) involving all or any portion of such intellectual property; and those risks and uncertainties described under the heading "Risk Factors" in its most recent annual report on Form 10-K, quarterly report on Form 10-Q, and in any other subsequent filings made by it with the U.S. Securities and Exchange Commission, which are available on the SEC's website at www.sec.gov. Existing and prospective investors are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date they are made. CRISPR Therapeutics disclaims any obligation or undertaking to update or revise any forward-looking statements contained in this presentation, other than to the extent required by law.

Caution should be exercised when interpreting results from separate trials involving separate product candidates. There are differences in the clinical trial design, patient populations, and the product candidates themselves, and the results from the clinical trials of autologous products may have no interpretative value on our existing or future results.

Path Forward for BCMA-Directed CAR-T



Patient Baseline Characteristics and Safety in COBALT-RCC

Patient characteristics *All Dose Levels, N=14*	
Age, median years (range)	64.5 (51 – 77)
Male, n (%)	12 (86)
Stage IV at screening, n (%)	14 (100)
Prior treatments, median n (range)	3 (1 – 6)
CD70 expression level, median % (range)	100 (1 – 100)

Adverse Events of Interest, N (%)
All Dose Levels, N=14

- **Acceptable safety profile across all dose levels to date, including no DLTs**
- No instances of tumor lysis syndrome, infusion reactions, HLH, ICANS, GvHD or secondary malignancies occurred
- 7 (50%) patients had Gr 1-2 CRS; no Gr ≥ 3 CRS events
- 3 patients with SAEs related to CTX130; all were CRS events
- 3 patients with SAEs of infections, all found to be unrelated to CTX130, including a pneumonia with Gr 5 dyspnea resulting in death

CRS, cytokine release syndrome; DLT, dose-limiting toxicity; Gr, grade; GvHD, graft versus host disease; HLH, hemophagocytic lymphohistiocytosis; ICANS, immune effector cell associated neurotoxicity syndrome; SAE, serious adverse events
Data cutoff: May 2022

Evidence of Activity for CTX130 in RCC – a First for Allogeneic Cell Therapy in Solid Tumors

CTX130 shows promising potential disease control in COBALT-RCC

Cell dose (CAR+ T cells)	DL1 $3x10^7$ N=3	DL2 $1x10^8$ N=3	DL3 $3x10^8$ N=4	DL4 $9x10^8$ N=4	Total N=14
Overall response rate	1 (33)	0	0	0	**1 (7)**
Stable disease	2 (67)	2 (67)	2 (50)	4 (100)	**10 (71)**
Disease Control Rate (DCR = CR + PR + SD)	3 (100)	2 (67)	2 (50)	4 (100)	**11 (79)**

- One patient with complete response has maintained their CR through their most recent visit at M18
- Typical PK seen with peak time to expansion at a median of D10 and peak concentration of ~3500 copies/µg
- Encouraging results underscore the potential of further increasing potency

Case Study | Durable Complete Response in RCC with CTX130

Subject Overview

Patient profile

- 64-year-old male with clear cell RCC diagnosed in 2017
- 1 prior line of therapy with cabozantinib and atezolizumab
- Relapsed after PR with lesions in the lung and pleura
- CD70+ expression: 100% at baseline

Efficacy

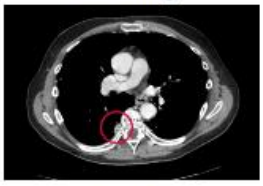
- PR at D42 after a single infusion of $3x10^7$ CAR+ T cells
- CR at M3 and remains in CR at M18

Safety

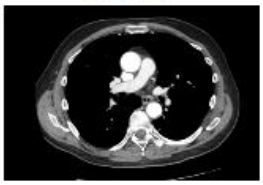
- Only Gr 1-2 adverse events
- No AEs considered related to CTX130

Deepening of response over time

Screening



Day 42



Month 18