

A blue silhouette of a human figure in profile, facing right. The internal organs, including the brain, heart, and kidneys, are visible. Surrounding the figure are various molecular structures, including a large black chain of spheres, a smaller orange cluster, and several other smaller black and grey molecular models.

# Capsida Biotherapeutics Corporate Presentation

**May 2025**

This presentation is made solely for informational purposes and contains forward-looking statements based on current expectations and assumptions. These statements are not guarantees of future results.

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# Solving the Challenges of Gen-1 Genetic Medicines

Starting in CNS and Ophthalmology with IP rights and applicability across all therapeutic areas

	CNS Challenges	Capsida Solutions
<b>Crossing the BBB</b>	Limited ability to cross BBB; < 1% neuronal transduction	>70% of neurons transduced in NHPs
<b>Safety Concerns</b>	Liver and dorsal root ganglia (DRG) toxicity	>16x liver & >50x DRG detargeting; lower dosing
<b>Patient Populations</b>	Narrow therapeutic index (TI) limits to ultra-rare/rare diseases	Broader TI = more common diseases across ages
<b>Route of Administration</b>	Direct injection to brain or CSF causes significant risks and inconsistent expression	IV delivery limits risks and allows consistent expression
	IV delivery increases risk of off-target effects (esp. liver) and triggering immune response	Well-tolerated safety profile with no adverse histopathological findings

# Next-generation Genetic Medicines Company

Unlocking the full potential of gene therapy for all

## Wholly-owned Pipeline

### Two clinical programs in 2025

#### CAP-002: STXBPI-DEE

- ✓ IND clearance
- ✓ ODD granted

#### CAP-003: PD-GBA

- Human POC in Q4

### Third clinical program in 2026

#### CAP-004: Friedreich's ataxia

## Fully-integrated Capabilities

- » Capsid engineering
- » Cargo optimization
- » Clinical development
- » In-house manufacturing
- » Protected by expansive IP portfolio

## External Validation

### Strategic partnerships

abbvie » 1st AbbVie opt-in (\$40M) achieved



### Contract manufacturing



>\$300M funding to date, including \$50M Series A



# Near Clinical Stage Wholly-owned Programs

First human POC by end of 2025

Disease / Target	Preclinical	IND-Enabling	Phase 1/2	Key Catalysts
STXBP1 Developmental and Epileptic Encephalopathy (STXBP1-DEE)	First-in-class CAP-002			<div>2025</div> <div>Q1</div> <div>✓ IND clearance received</div> <div>Q3</div> <div>- First patient dosed</div> <div>2026</div> <div>Q1</div> <div>- First efficacy data</div>
Parkinson's disease associated with GBA mutations (PD-GBA)	Best-in-class CAP-003			<div>2025</div> <div>Q2</div> <div>- IND filing</div> <div>Q3</div> <div>- First patient dosed</div> <div>Q4</div> <div>- First biomarker data</div> <div>2026</div> <div>Q3</div> <div>- First efficacy data (1 yr)</div>
Friedreich's ataxia (FA)	Best-in-class CAP-004			<div>2025</div> <div>Q1</div> <div>- IND-enabling studies ongoing</div> <div>Q3</div> <div>- Traditional &amp; self-regulating cargo results</div> <div>2026</div> <div>Q2/Q3</div> <div>- IND filing</div>

**Capsida is the first genetic medicines company with FDA IND clearance for an engineered IV-delivered gene therapy that crosses the blood-brain-barrier and detargets liver**



## **CAP-002: STXBP1-DEE**

**STXBP1 Developmental and Epileptic  
Encephalopathy**

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# STXBP1 Developmental and Epileptic Encephalopathy

## Opportunity

- DEE (like LGS and Dravet) with no approved treatments
- Seizures, developmental delays, and motor impairment
- ~5,000 patients in US and Europe
- Genetic validation and potential for FDA approval after Ph2
- >\$1B peak year sales

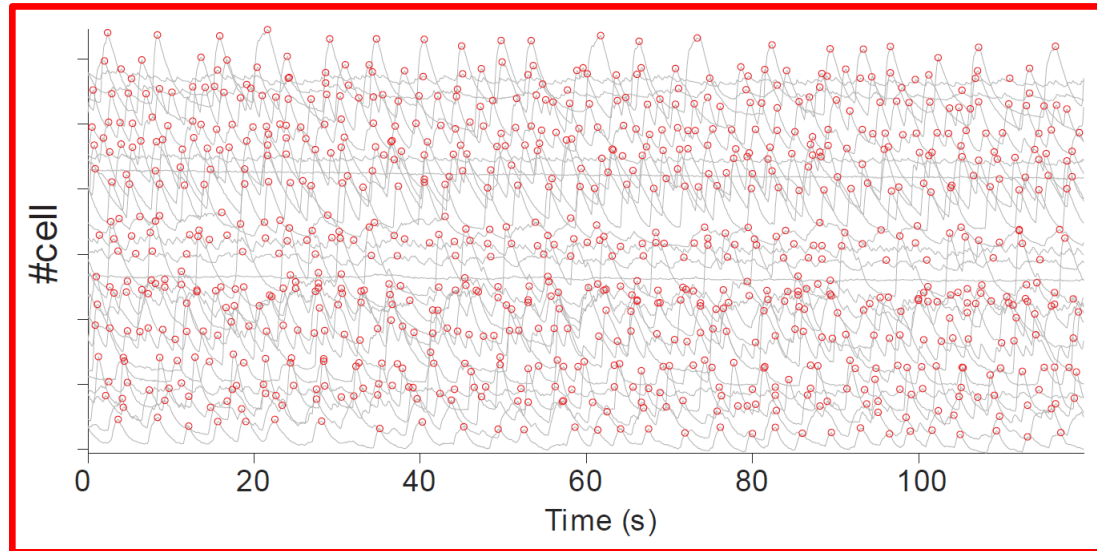
## CAP-002

- ✓ First and best in class IV-administered program
- ✓ Industry-leading brain wide STXBP1 protein increases
- ✓ Potential for correction of all phenotypes
- ✓ Safety demonstrated in GLP-Toxicology study in NHPs, including liver and DRGs
- ✓ Successful IND clearance and ODD granted
- Q2 Fast Track filings

SYNRGY Ph 1/2a clinical trial start up activities have initiated

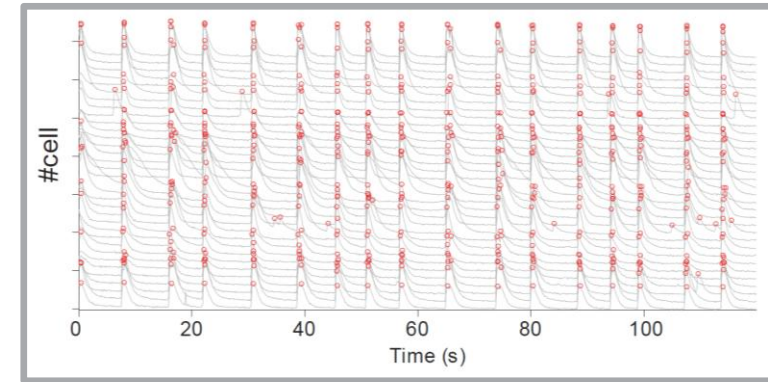


# CAP-002 Restores Normal STXBP1 Expression and Neuronal Firing in Human Knock Out Neurons

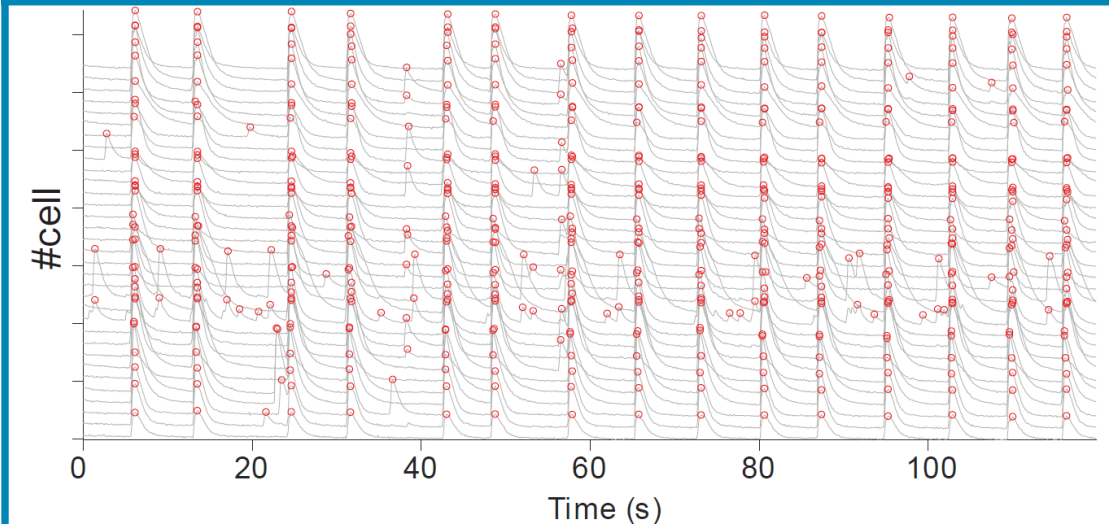


**STXBP1 Knock Out**

Normal



**CAP-002 restores neurons to normal firing**



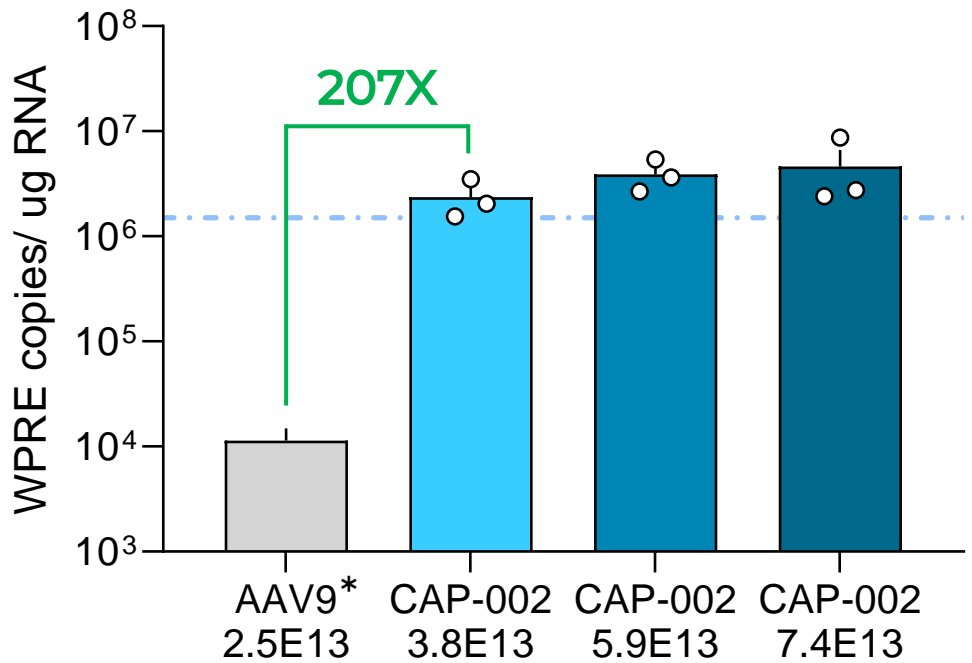
**STXBP1 Knock Out with CAP-002**

Generated in collaboration with Neurospector, a CRO established by Matthijs Verhage's laboratory at VUmc Research BV, part of Foundation Stichting Amsterdam UMC

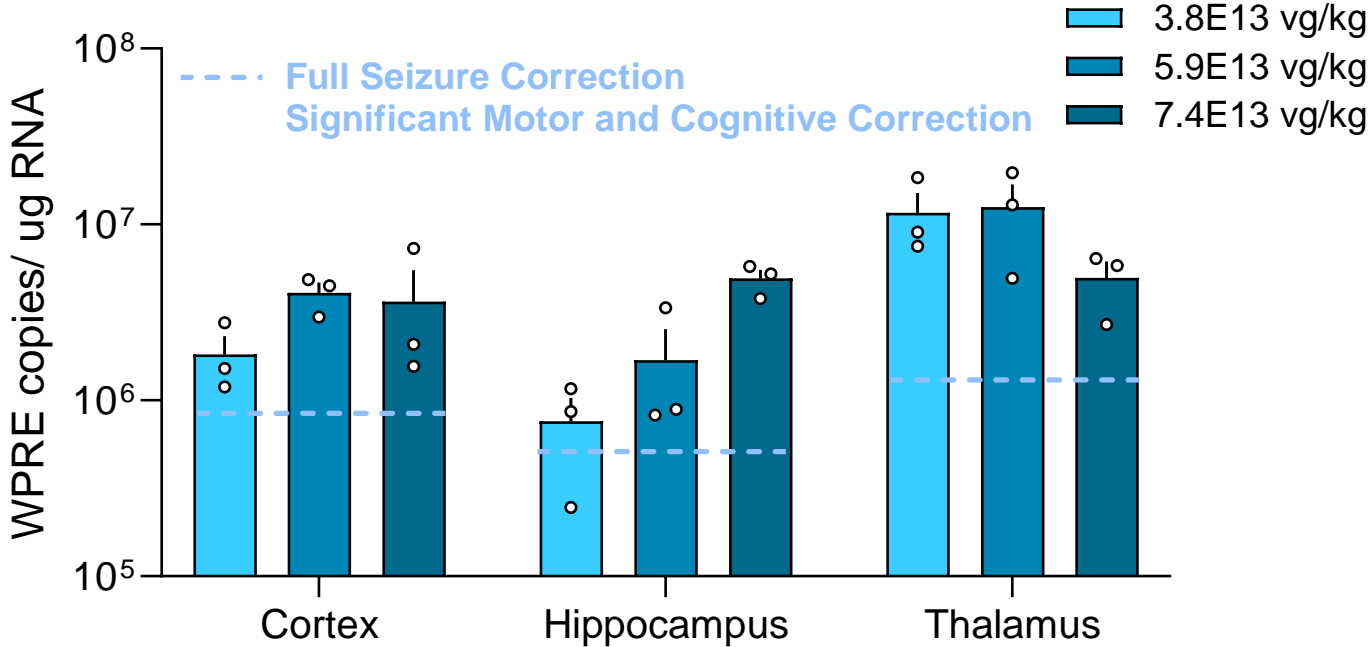
# STXBP1 Expression with CAP-002 in GLP Tox is Above Levels Required for Significant Correction of All Disease Phenotypes

## Brain Expression in NHPs in GLP Tox Study

### Average Brain RNA



### RNA in key ROIs



GLP Tox Study

In-life: 3 months

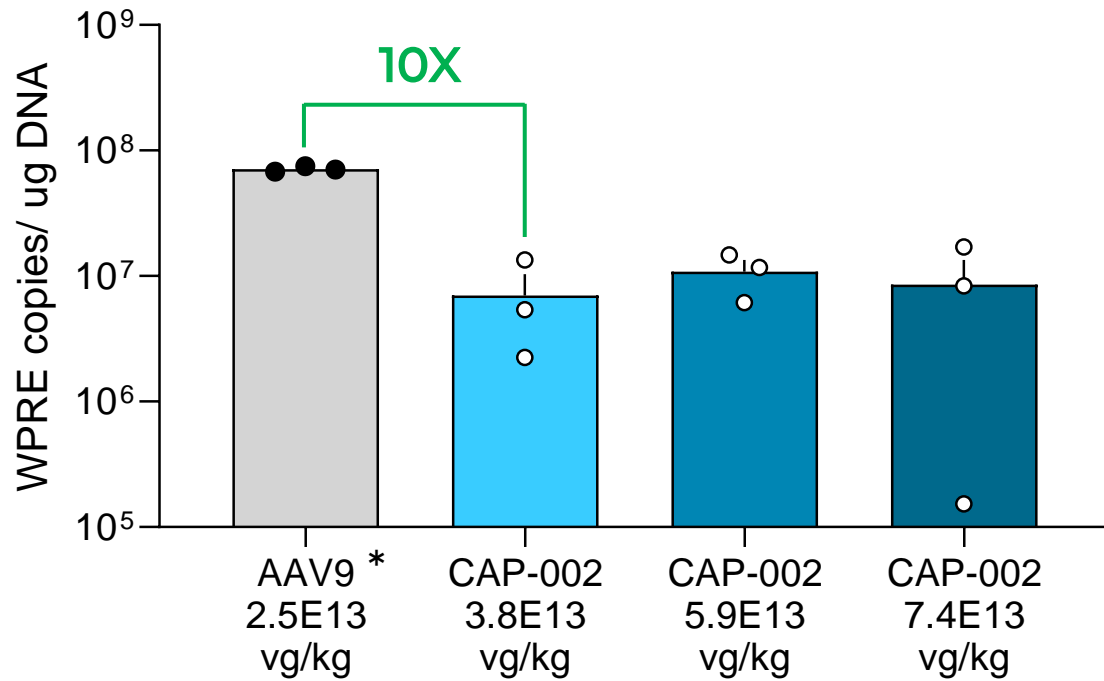
Species: Cynomolgus macaques (n=3/grp)

<sup>1</sup>Murine data generated in collaboration with lab of Mingshan Xue, Baylor College of Medicine

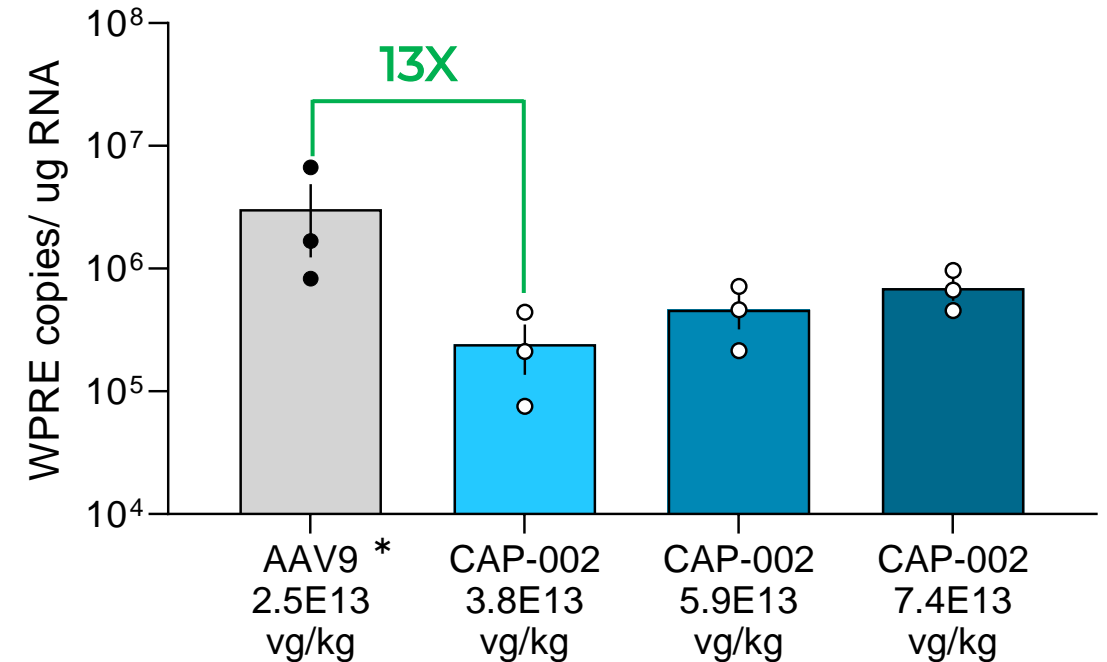


# CAP-002 is Substantially Detargeted from Liver and DRGs in NHPs in GLP Tox Compared to AAV9

Liver DNA in NHP GLP Tox Study



DRG RNA in NHP GLP Tox Study



**Well-tolerated safety profile with no adverse histopathological findings**

\*Historical IV-delivered AAV9 2.5E13 vg/kg (non-STXBP1 cargo control)

GLP Tox Study  
In-life: 3 months  
Species: Cynomolgus macaques (n=3/grp)

# CAP-002 Phase 1/2a SYNRGY Study

Potential for approval after Phase 2 study

Clinical Ph1/2 Planning

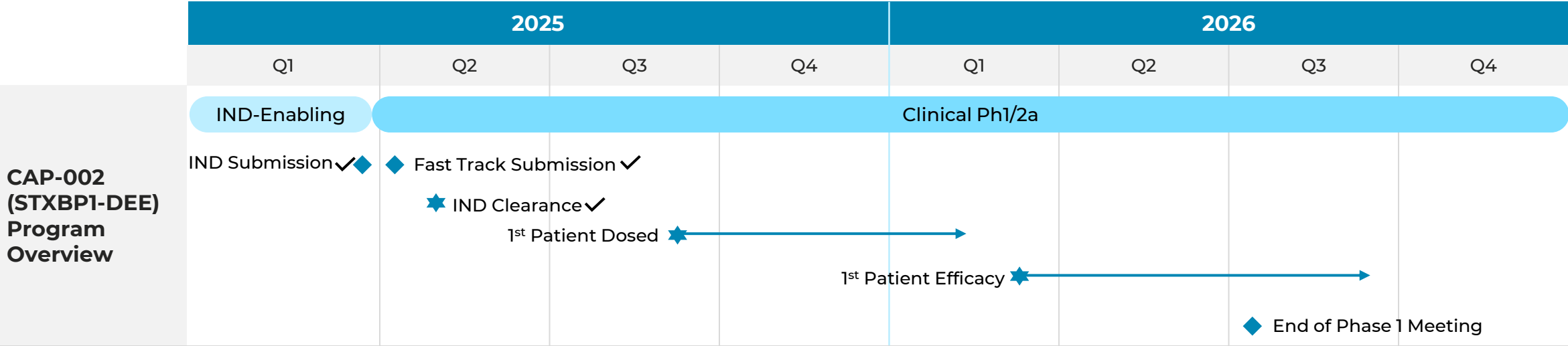
Population

- » 18 months – 7 years
- » Potential expansion to broader ages
- » Ph1: 6 patients

Key Measurements

- » Safety
- » Motor, language, neurocognitive, seizure, and EEG
- » Clinical scales consistent with STARR natural history study

Plan to leverage ODD and other designations to accelerate approval



EEG = electroencephalogram; STARR = STXBP1 Clinical Trial Ready



## CAP-003: PD-GBA

Parkinson's disease associated  
with GBA mutations

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# Parkinson's Disease Associated with GBA Mutations

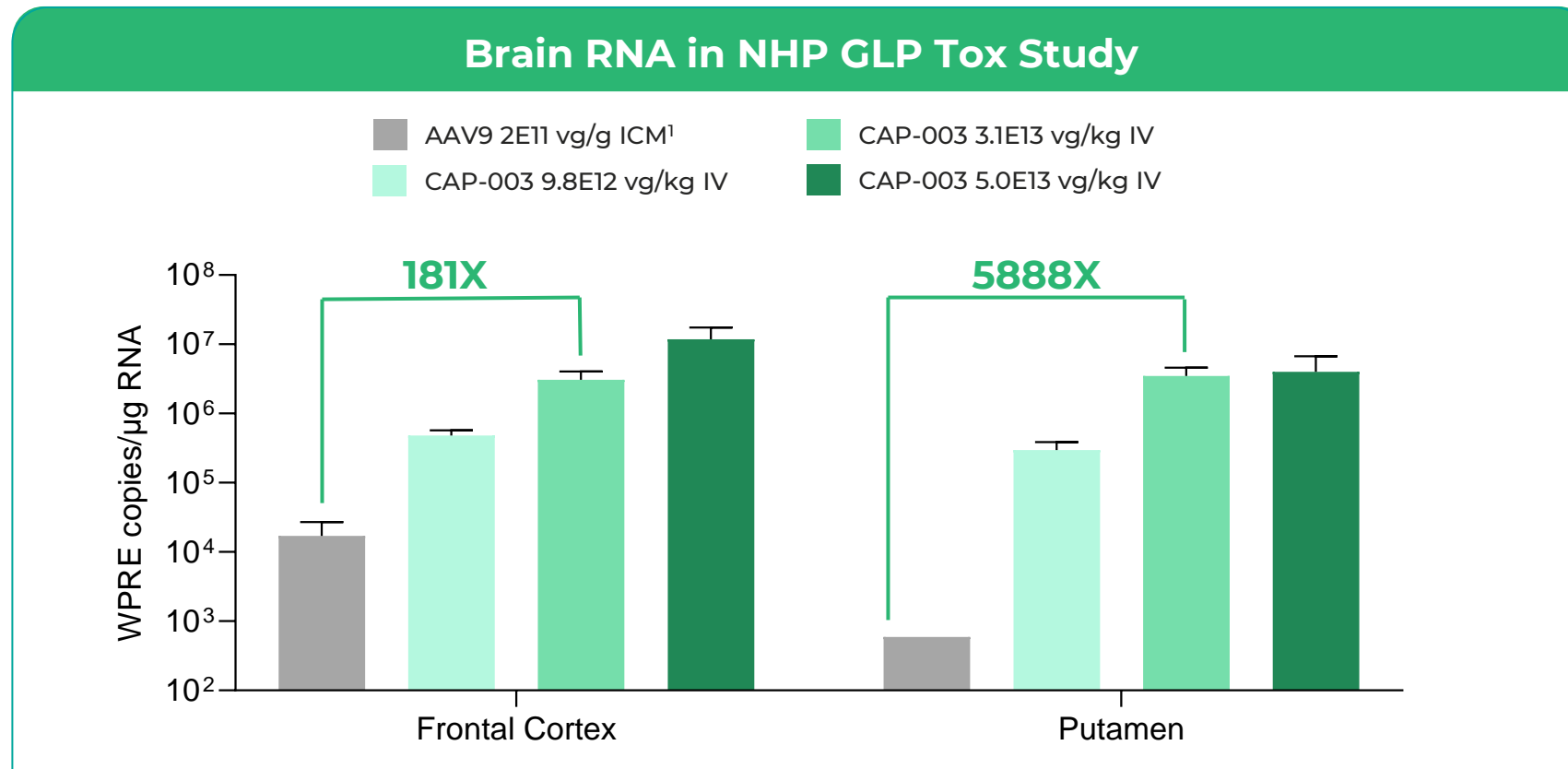
## Opportunity

- Up to 15% of all PD cases = ~330k patients in US and Europe
- No approved GBA1 treatments and no PD disease modifying treatments
- >\$1B peak year sales
- Potential for expansion to idiopathic PD

## CAP-003

- ✓ Best in class IV-administered program
- ✓ Industry-leading brainwide GCase enzyme elevation
- ✓ Potential for significant disease modification
- ✓ Safety demonstrated in GLP-Toxicology study in NHPs, including liver and DRGs
- ✓ Successful pre-IND meeting
- Q2 IND and Fast Track filings

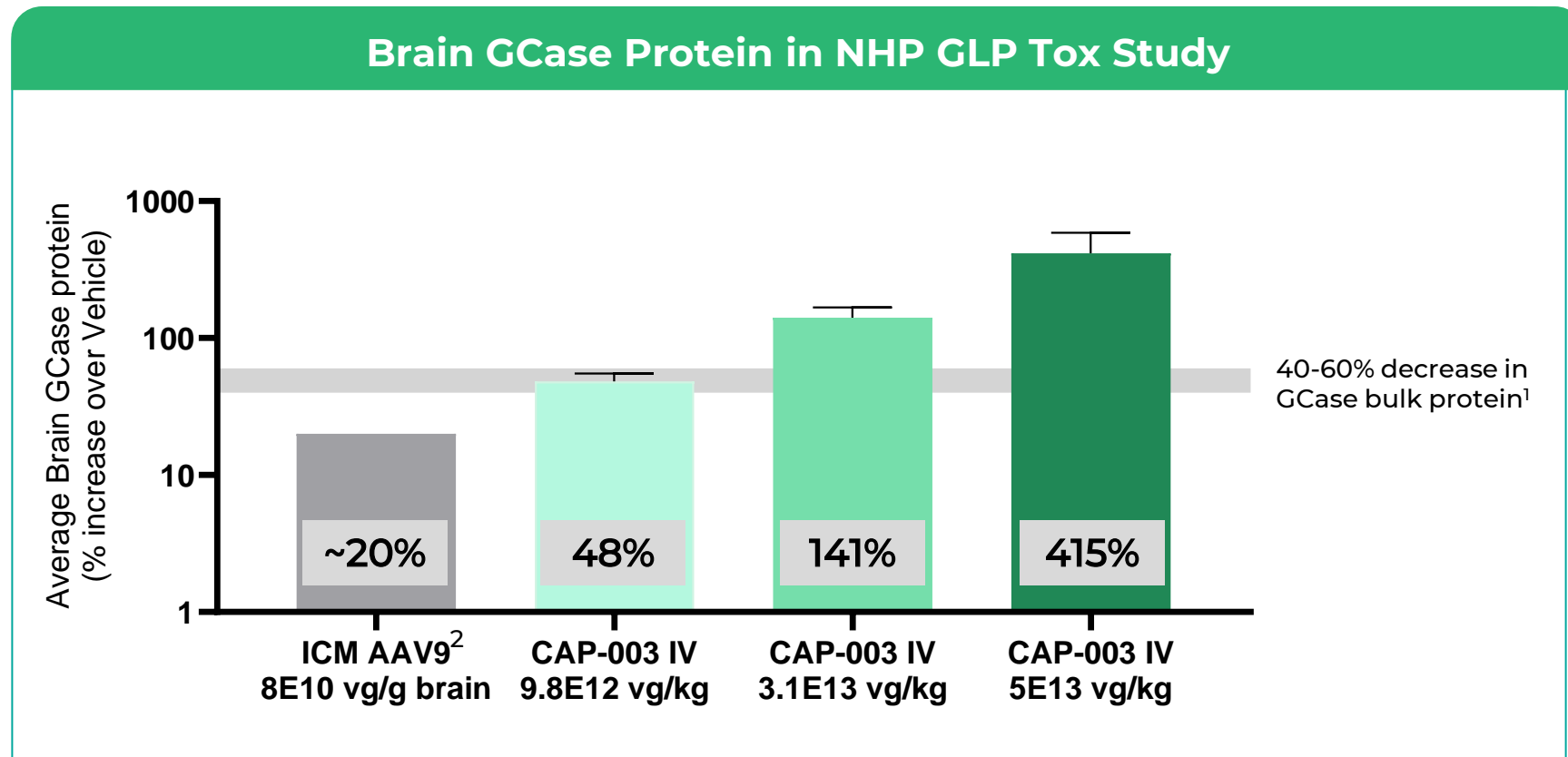
# IV-delivered CAP-003 Achieves Superior RNA Expression Compared to ICM-delivered AAV9 in NHPs



<sup>1</sup>AAV9 ICM data generated from past Capsida study with same expression cassette (promoter, regulatory elements, etc.) but different therapeutic cargo; no protein or %neuron comparison possible

**GLP Tox Study**  
**In-life:** 3 months  
**Species:** Cynomolgus macaques (n=3/grp)

# IV CAP-003 Achieves Superior GCase Protein Expression in GLP Tox Study Compared to ICM-delivered AAV9



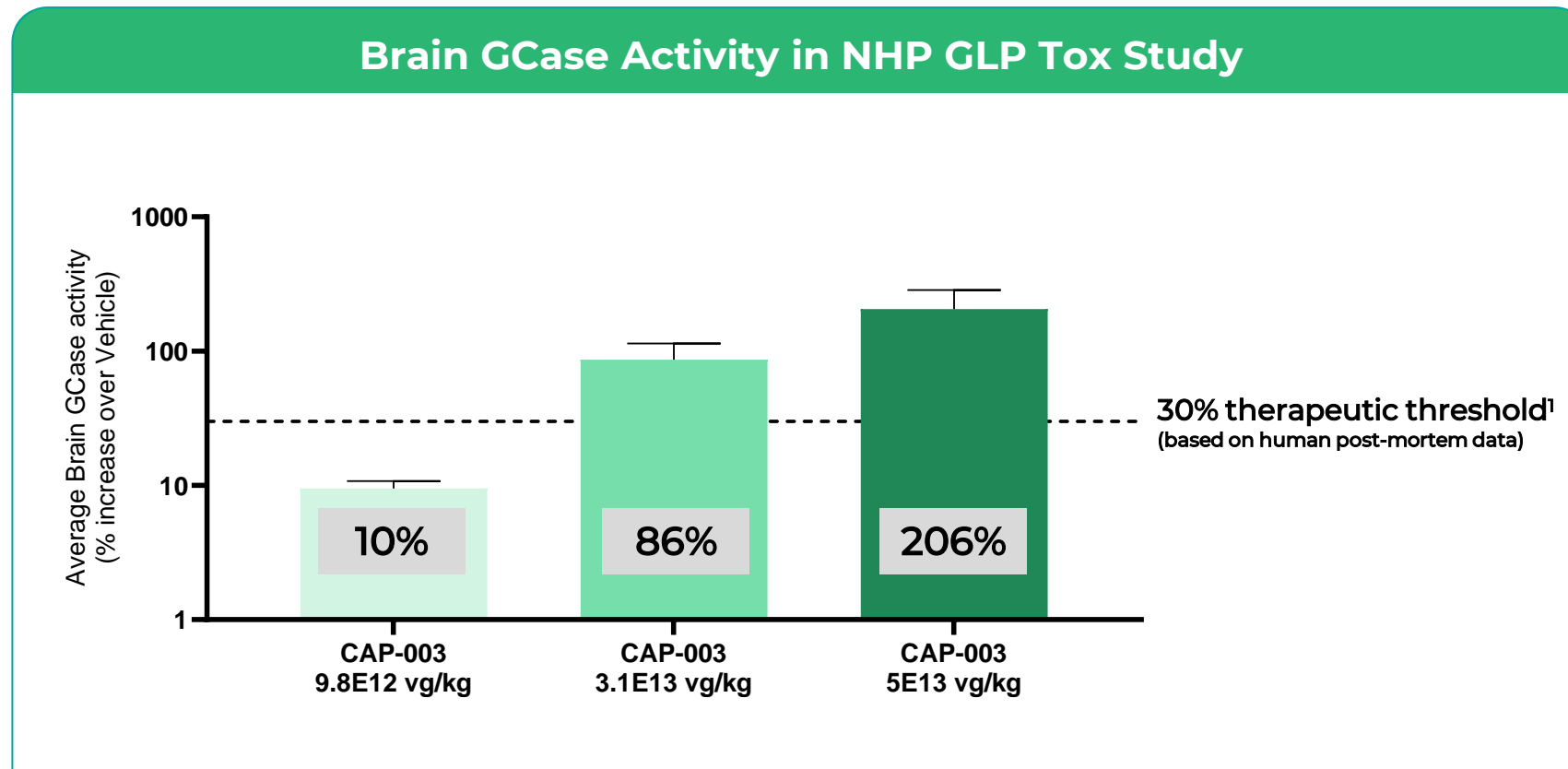
<sup>1</sup> Sanz Munoz et al., 2021 Decrease in GCase bulk protein in post-mortem brain tissues compared to healthy individuals

<sup>2</sup> ICM AAV9 reported by Prevail (Source: 2019 S1 filing) in their non-clinical NHP studies (~20% increase across cortex, hippocampus, midbrain 6 months after administration)

**GLP Tox Study**  
**In-life:** 3 months  
**Species:** Cynomolgus macaques (n=3/grp)



# CAP-003 Exceeds Efficacy Threshold for Normalizing GCase Activity in Patients in NHP GLP Tox Study

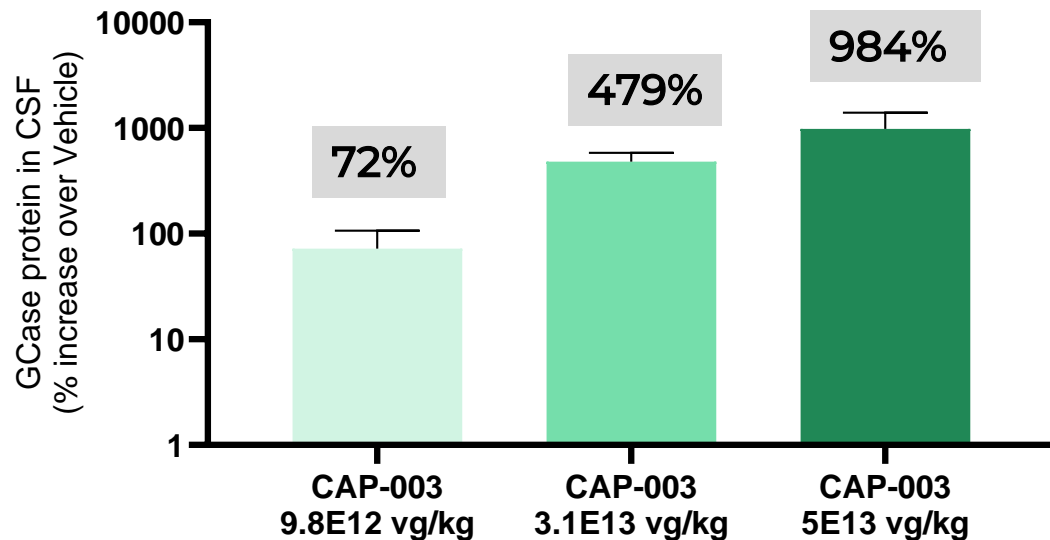


<sup>1</sup>Leyns et al., 2023. Post-mortem studies demonstrate an approximate 30% GCase activity deficit in patients compared to healthy individuals

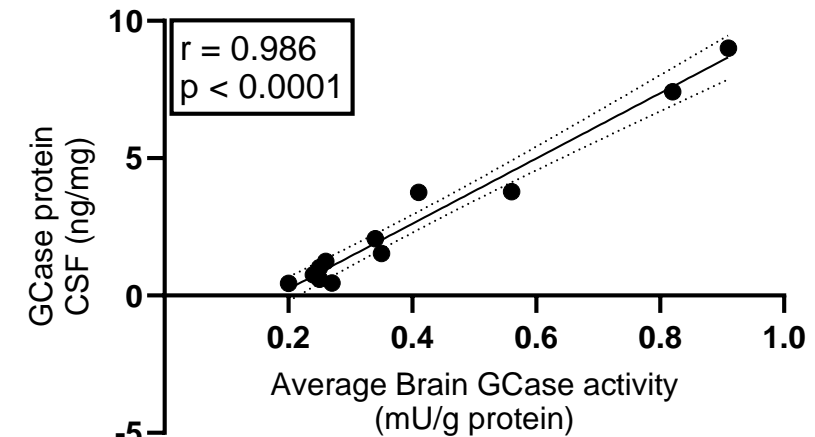
**GLP Tox Study**  
**In-life:** 3 months  
**Species:** Cynomolgus macaques (n=3/grp)

# CAP-003 Significantly Increases GCase in CSF in GLP Tox Study Validating Use as Clinical Biomarker

## GCase Protein in CSF in NHP GLP Tox Study

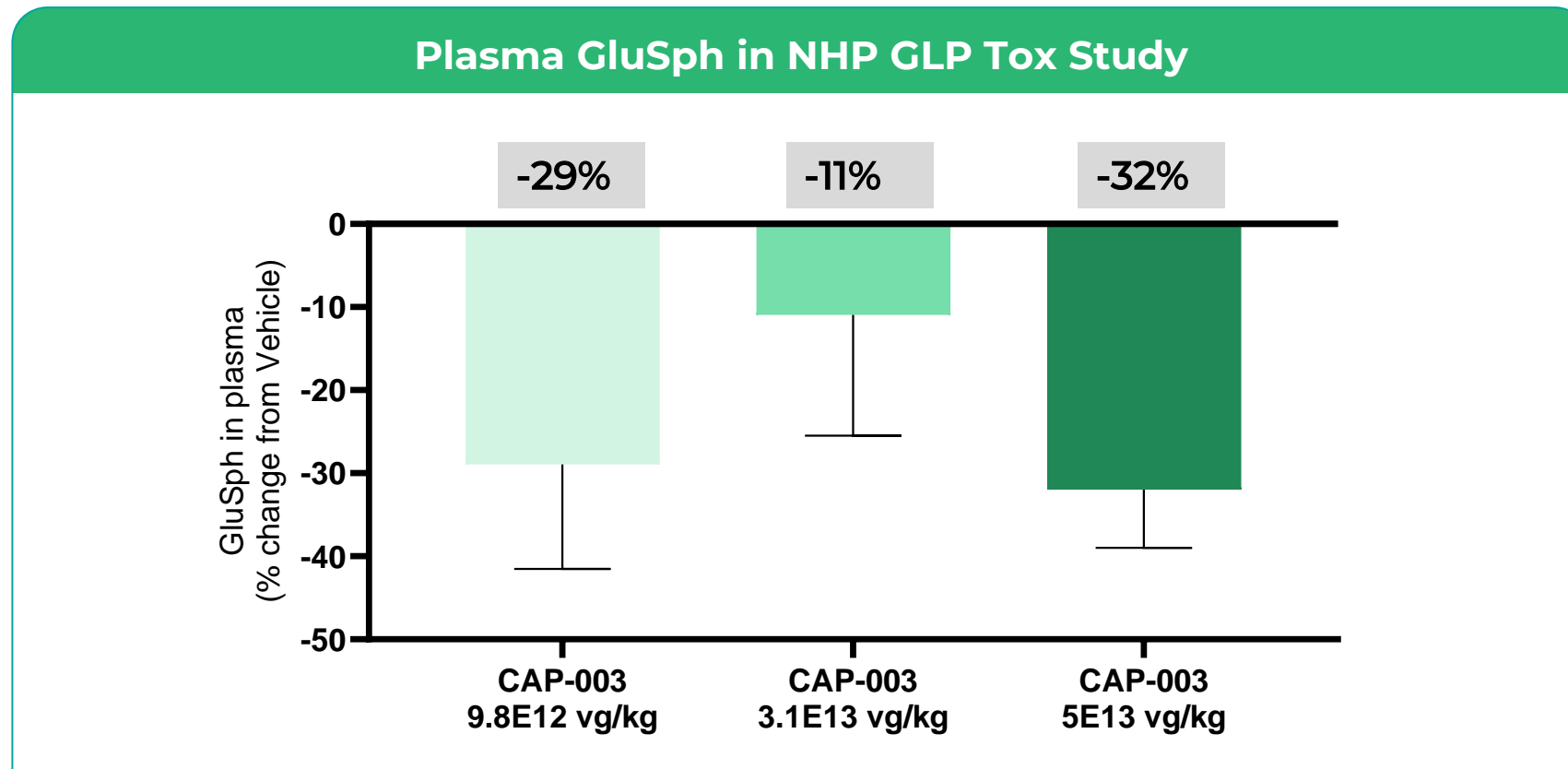


## Correlation of CSF GCase Protein & Brain GCase Activity



**GLP Tox Study**  
**In-life:** 3 months  
**Species:** Cynomolgus macaques (n=3/grp)

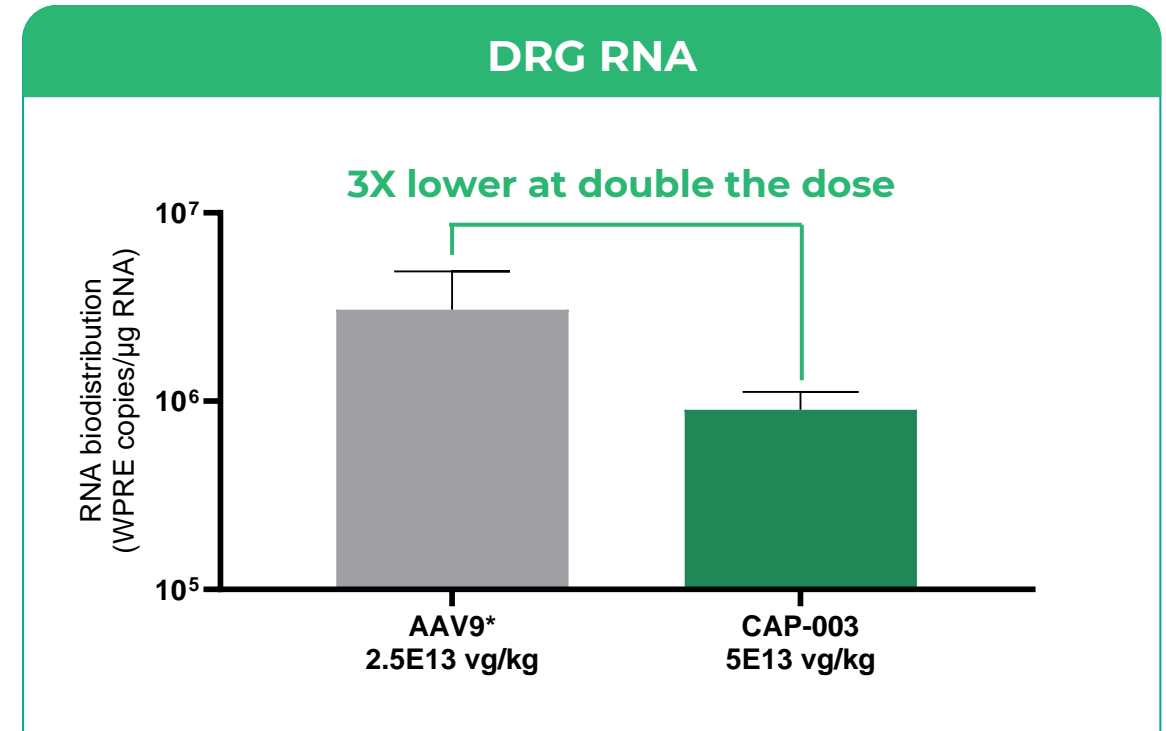
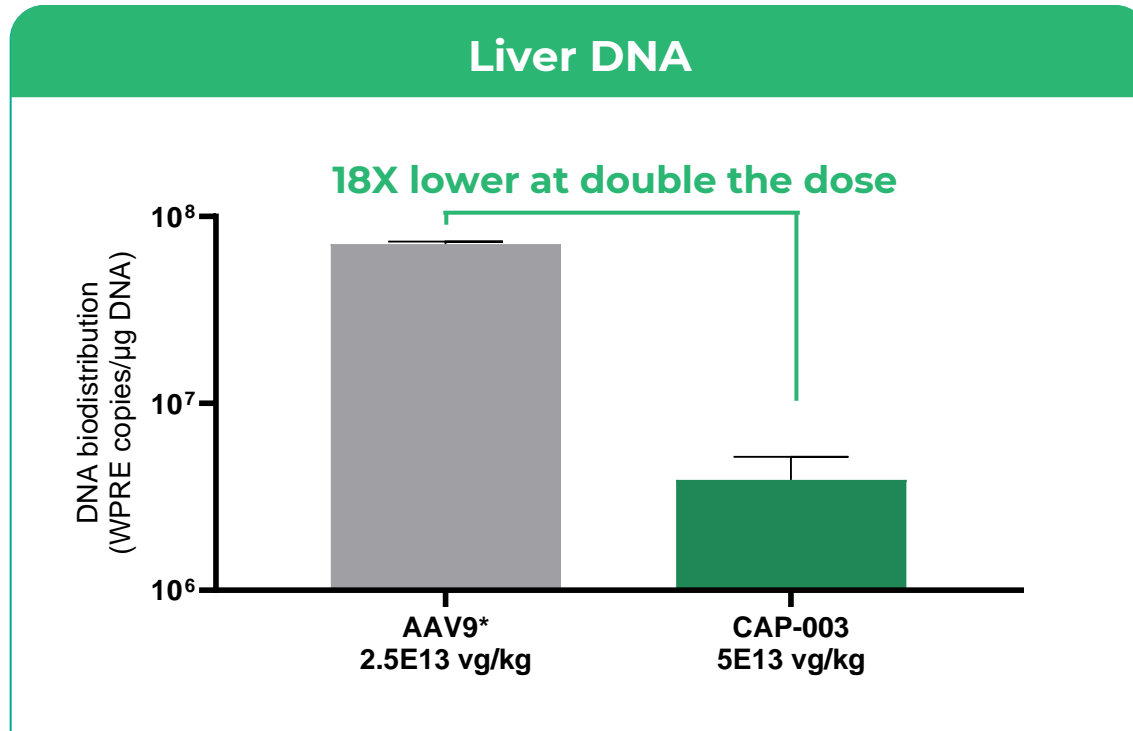
# Decreased GluSph Levels in Plasma Confirm Target Engagement in GLP Tox Study in Healthy NHPs



GluSph = Glucosylsphingosine

**GLP Tox Study**  
**In-life:** 3 months  
**Species:** Cynomolgus macaques (n=3/grp)

# GLP Tox Data Demonstrate CAP-003 is Substantially Detargeted from Liver and DRGs in NHPs Compared to AAV9



**Well-tolerated safety profile with no adverse histopathological findings**

\*Historical IV-delivered AAV9 2.5E13 vg/kg (non-GBA cargo control)

GLP Tox Study  
In-life: 3 months  
Species: Cynomolgus macaques (n=3/grp)

# CAP-003 (PD-GBA) Phase 1/2 Clinical Plan

## Clinical Ph1/2 Planning

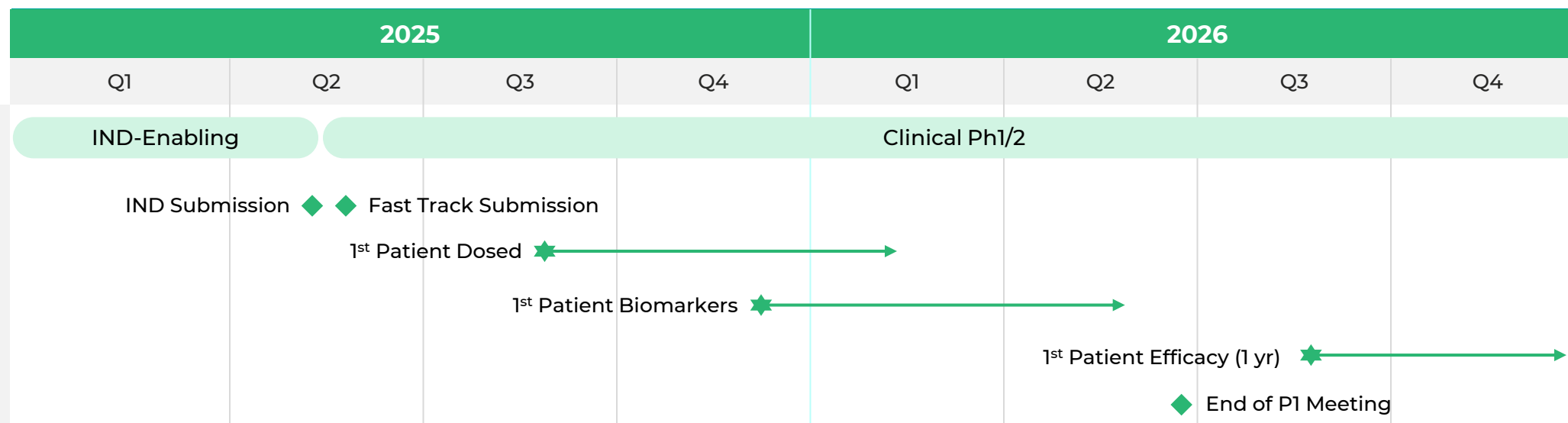
### Population

- » Ages 21-75 years
- » PD Hoehn & Yahr Stage 1-3
- » Ph1: 6 patients

### Key Measurements

- » Safety
- » Biomarkers (e.g., GCase, GluSph, & GluCer)
- » 1 & 2-year efficacy (e.g., MDS-UPDRS, cognition, etc.)

## CAP-003 (PD-GBA) Program Overview



GluSph = glucosylsphingosine; GluCer = glucosylceramide;  
MDS-UPDRS = Unified Parkinson's Disease Rating Scale



# CAP-004: FA

## Friedreich's ataxia



# Friedreich's Ataxia

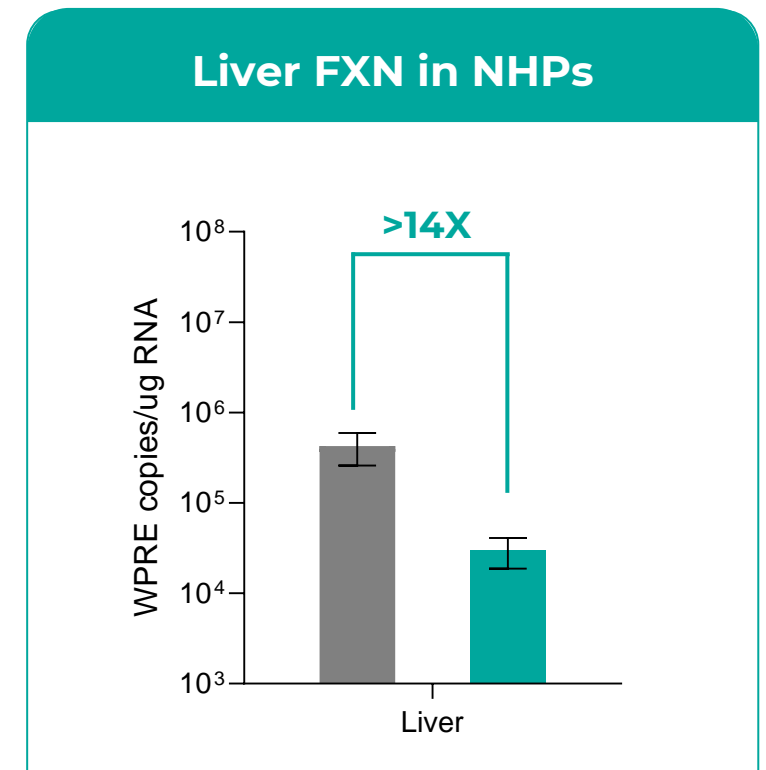
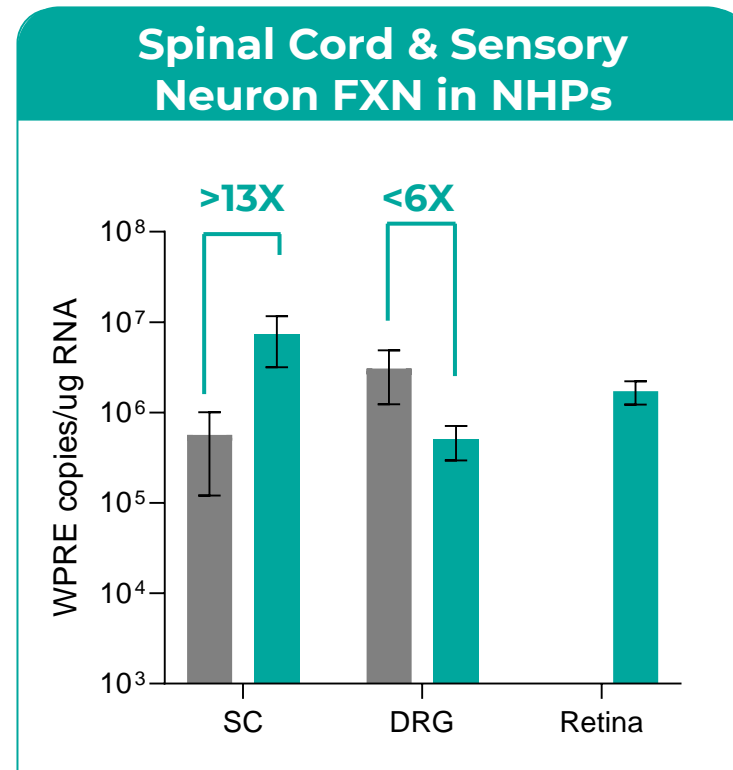
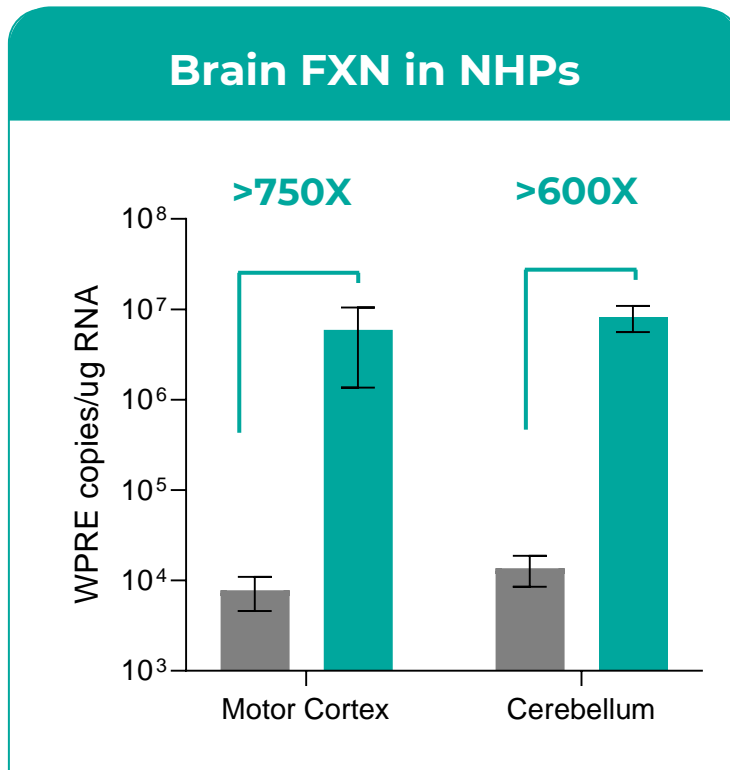
## Opportunity

- CNS, cardiac, and sensory manifestations
- ~5,000 patients in the US and 15,000 worldwide
- Genetic validation and potential for FDA approval after Ph2
- >\$1B peak year sales

## CAP-004

- ✓ Best in class IV-administered program
- ✓ Industry-leading frataxin protein expression in all relevant tissues
- ✓ Potential for correction of CNS, cardiac, and sensory manifestations
- ✓ Safety demonstrated in NHPs, including liver and DRGs
- ✓ IND-enabling studies ongoing, incl. self-regulating cargo
- Q2/Q3 2026 IND Filing

# IV CAP-004 Achieves Therapeutically Meaningful RNA Expression Levels in Key FA Tissues While Detargeting Liver



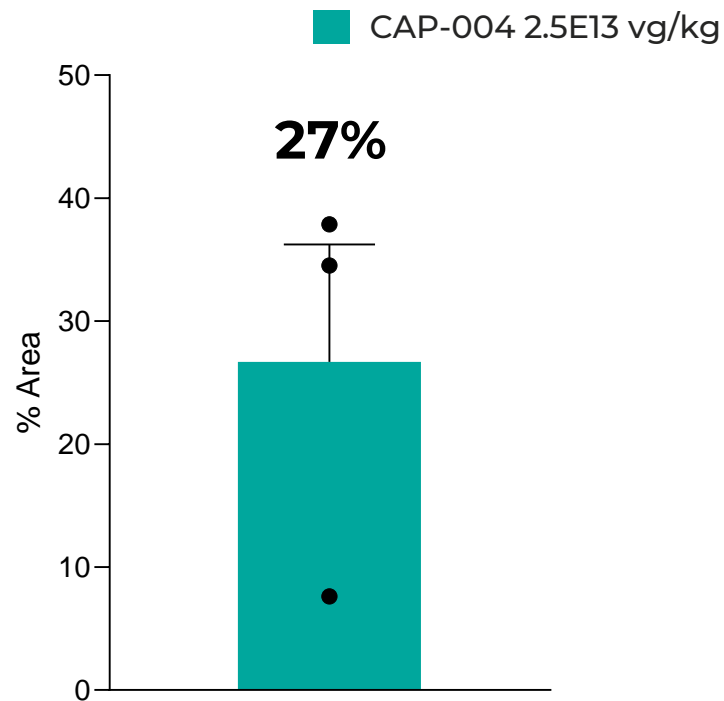
■ AAV9 2.5E13 vg/kg<sup>1</sup> ■ CAP-004 2.5E13 vg/kg

FXN = Frataxin

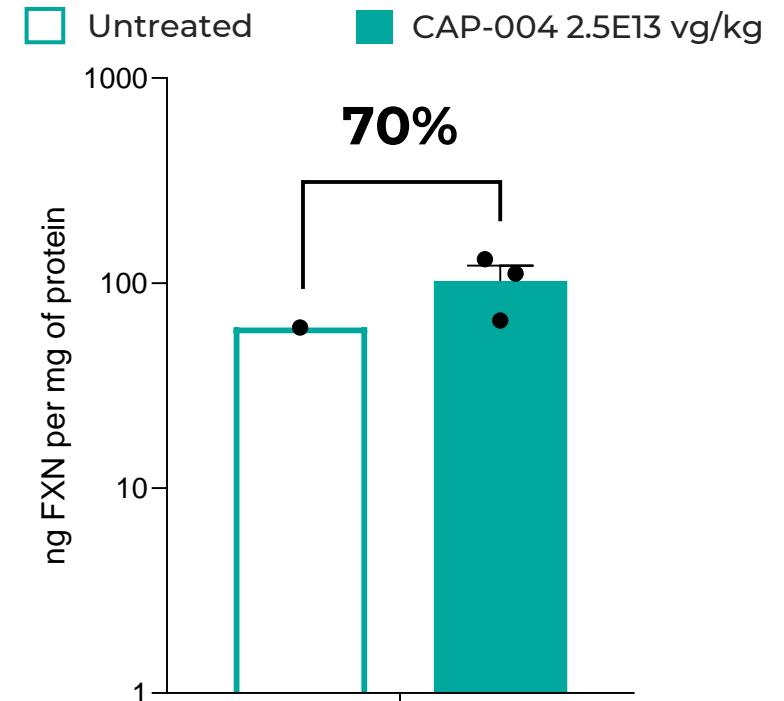
<sup>1</sup>AAV9 data generated from past Capsida study with same expression cassette (promoter, regulatory elements, etc.) but different therapeutic cargo

# 27% Average Transduction of Left Ventricle with CAP-004 Results in >70% Increase in FXN Expression in Heart

## Left Ventricle %HA Positive Area in NHPs



## Cardiac FXN protein levels increase in NHPs





# Platform and Capabilities

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# Capsida – Uniquely Positioned to Lead Gene Therapy

## Capsid Engineering Scale

Fully industrialized and roboticized platform

Screening capabilities across cell types in NHPs and human cells

## CNS Tropism

>99% specific to neurons

>70% neurons transduced

Broad IP capsids and capsid/cargo

## Peripheral Detargeting

>16x liver & >50x DRG detargeted

Superior off-target safety profile

Broad IP protecting detargeting

## Therapeutic Expression

Expression in NHPs with potential for full disease correction

Industry leading expression levels across pipeline programs

## Clinical Translatability

Identified/patented novel human receptor with complete homology in NHPs and humans

Validated expression in NHPs including primates >20 years old

## Manufacturability

In-house process development and GMP manufacturing

Productivity surpassing AAV9

Quality specifications > FDA requirements

**Only Capsida has created all the capabilities and results needed to deliver on the promise of gene therapy**

# In-house Process & Analytical Development and cGMP Manufacturing

Enables Capsida to control quality, timelines, and costs

## Vector Production



Rapid production of engineered capsids for preclinical studies

## Process & Analytical Development



Conduct manufacturability assessment in HEK293 suspension process

Up to 50 L bioreactor scale

Develop and optimize key analytical assays

## cGMP Manufacturing



15,000 ft<sup>2</sup> cGMP Manufacturing Facility

Leverages single use systems

200L bioreactor scale with ability to significantly expand capacity

Finish – fill operations

Unidirectional flow

In-house QC capabilities for product release

Modular clean rooms

**Excellent yields and quality specifications at or above FDA standards**





# Corporate & Finance

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# Leadership Team and Board of Directors

Decades of Industry Experience and Drug Development Expertise

## Leadership



**Peter Anastasiou**  
Chief Executive Officer



**Nicholas Flytzanis, PhD**  
Founder, Chief Research and Innovation Officer



**Nick Goeden, PhD**  
Founder, Chief Technology Officer



**Julie Hakim**  
Chief Financial Officer



**Bethany Mancilla**  
Chief Business Officer



**Rob Murphy**  
Chief Manufacturing and Quality Officer



**Swati Tole, MD**  
Chief Medical Officer



**Clare Ozawa, PhD**



**Beth Seidenberg, MD**



**Viviana Gradinaru, PhD**  
Founder



**Rita Balice-Gordon, PhD**  
CEO, Muna Tx



**Frank Verwiel, MD**  
Chairman, Intellia



**Peter Anastasiou**  
Chief Executive Officer



# >\$300M Funding to Date



# Next-generation Genetic Medicines Company

Unlocking the full potential of gene therapy for all

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abbvie » 1st AbbVie opt-in (\$40M) achieved



### Contract manufacturing



**Wholly-owned Programs with Multiple Catalysts in 2025**



# Our Pipeline is Making the Impossible Possible

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