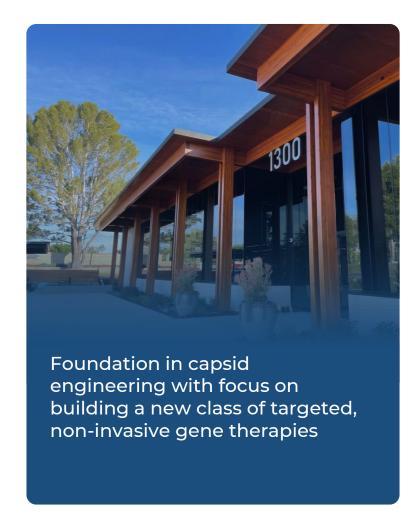


Unlocking the Potential of Gene Therapy for All



Capsida Biotherapeutics







Company History

2019



Founded

Based upon breakthrough AAV engineering technology from the laboratory of Viviana Gradinaru







2021



Partner

AbbVie CNS deal \$90M upfront including equity



Partner

CRISPR Research Collaboration

2022



Hire & Partner

Hired new CEO to lead experienced management team and initiated second partnering process

2023



Partner

Prevail / Lilly CNS deal \$55M upfront including equity



Partner

AbbVie Ophthalmology deal \$70M upfront including equity





Data Milestones

ASGCT Industry Symposium on **Breakthrough Capsids (up to 68% neurons)** and ETDD Presentation on **genetic epilepsy** (STXBP1 preclinical data)



Partner

Kate Therapeutics Manufacturing Collaboration



Leadership Team and Board of Directors

Decades of Industry Experience and Drug Development Expertise

Leadership



Peter Anastasiou Chief Executive Officer



Susan Catalano, PhD Chief Scientific Officer



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



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







Clare Ozawa. **PhD**



Viviana Gradinaru, PhD Founder























MD



Board Members

Beth Seidenberg,





Julie Hakim Chief Financial Officer





Bethany Mancilla Chief Business Officer





Rob Murphy Chief Manufacturing and Quality Officer





Swati Tole, MD Chief Medical Officer

Genentech



Rita Balice-Gordon. **PhD**







Frank Verwiel. MD

avesis



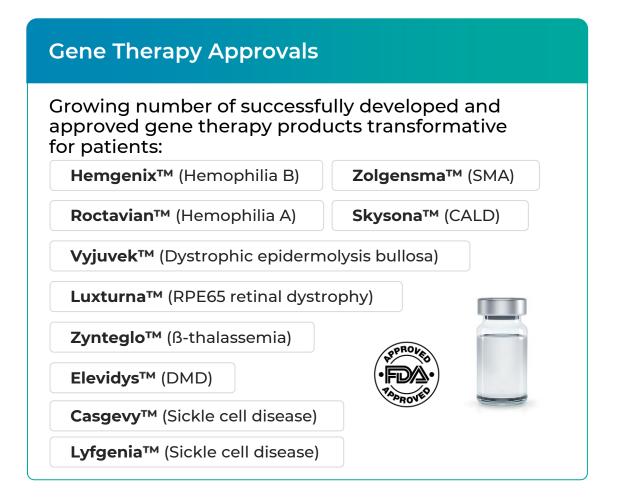
Peter Anastasiou Chief Executive Officer

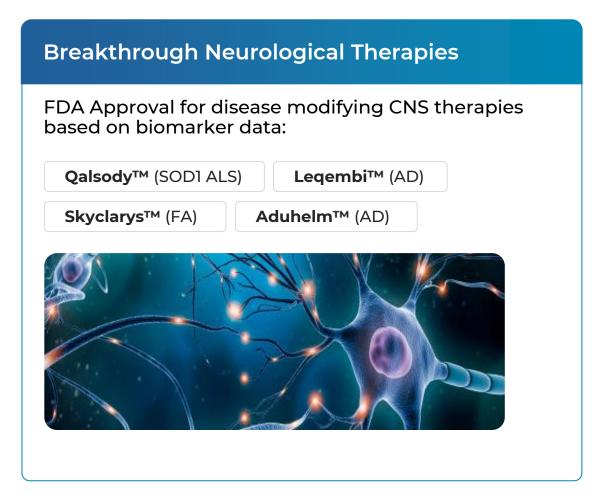






Recent FDA Approvals Create Significant Momentum







Capsida Addresses CNS Challenges Through our Engineered Gene Therapies

CNS Challenges

Wild Type AAV9 (IV Delivery)

NHP Cortex

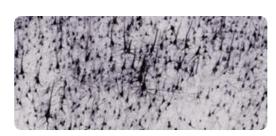


Neuronal Transduction	Limited ability to cross biological barriers, esp. BBB - < 1% transduction with wild type AAV9 IV
Safety Concerns	Safety concerns / liver toxicity
Patient Populations	Traditional gene therapies primarily for ultra- rare/rare diseases
Risks	Direct injection into the brain or CSF is invasive with significant risks

Capsida Solutions

Capsida Engineered Capsid (IV Delivery)

NHP Cortex



Capsida engineered capsids cross BBB with high levels of neuronal transduction – up to 70% neurons

Enabling lower dosing and ~4000x difference in CNS to liver targeting vs wild type AAV9

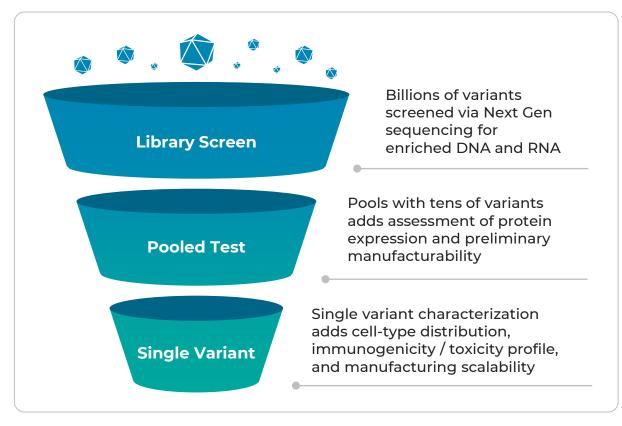
Access to more common diseases across all ages

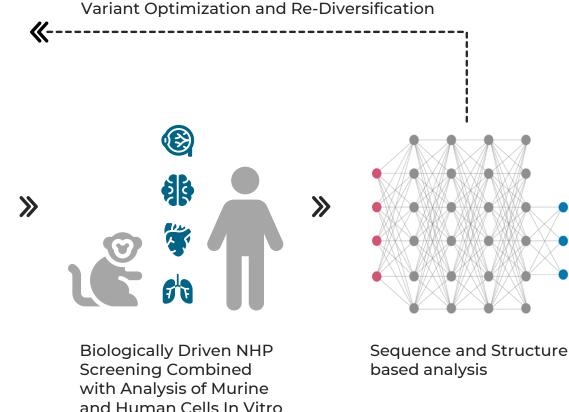
Targeted IV admin increases effectiveness and reduces risks



NHP Driven Targeted Gene Therapy Engineering Platform

High-throughput Process Identifies Capsids that Target Desired Tissues and Cell Types While De-targeting Undesired Tissues







Automated and High-Throughput NHP Screening Platform Accelerates Identification of Breakthrough Capsids





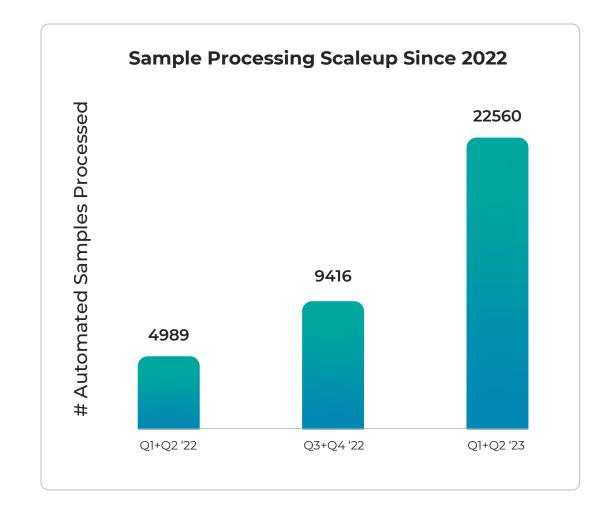
Improves data accuracy and reproducibility – highly consistent process



Increases data quantity – scale up on animal and tissue utilization

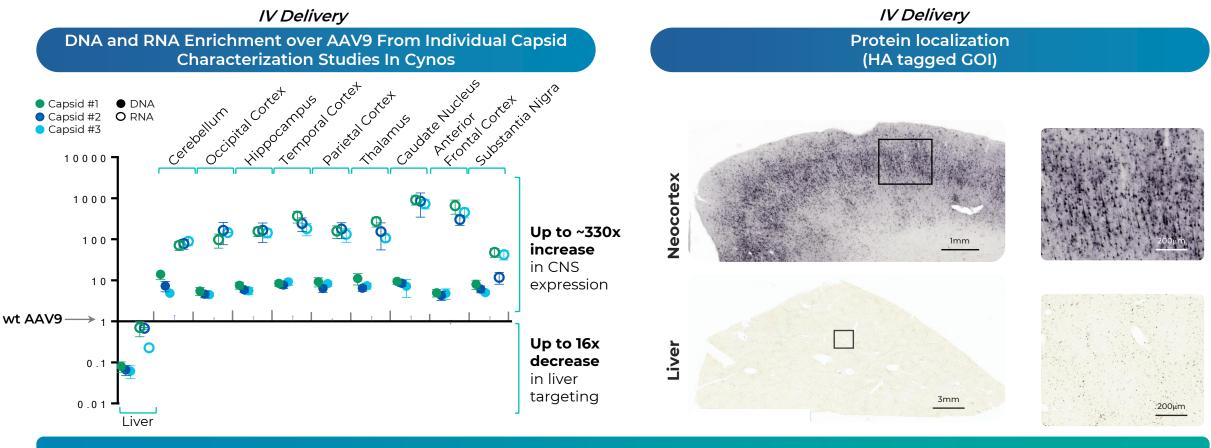


Screening capacity increases **250**%





Gen 5 Capsids Yield Breakthrough Expression Across The CNS And Significant Liver De-Targeting vs WT AAV9

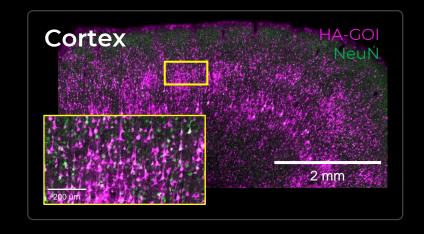


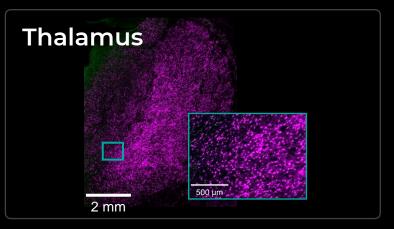
~4000X difference in CNS expression vs liver targeting with Capsida's breakthrough capsids relative to wtAAV9

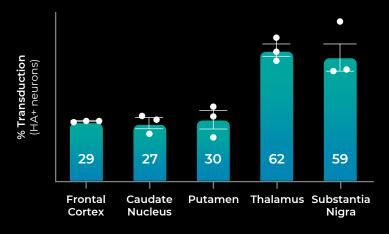
Lower efficacious doses
Wider Therapeutic Index

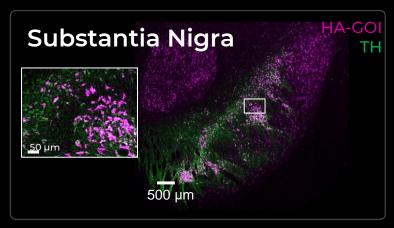


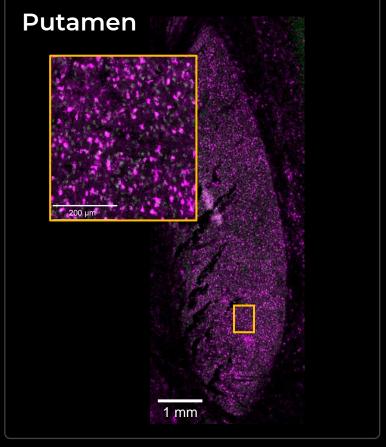
Gen 5 Capsid Results In Widespread Protein Expression Across Representative Areas Of The Brain Following IV Delivery









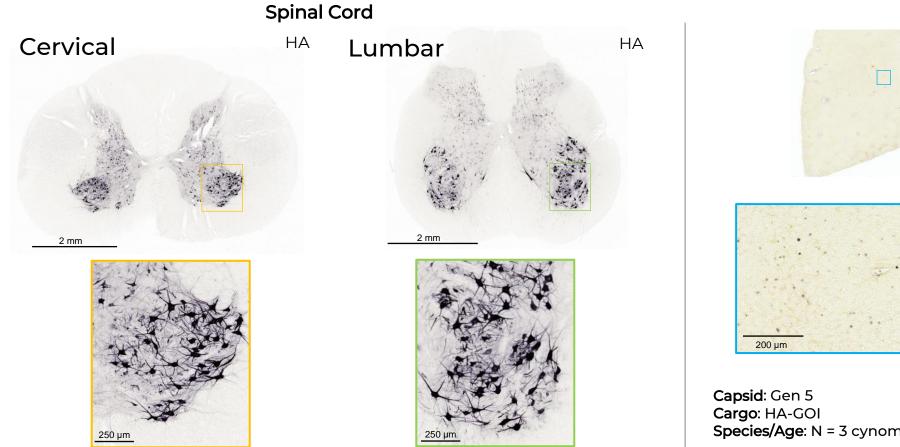


Capsid: Gen 5 Cargo: HA-GOI

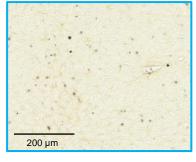
Species/Age: N = 3 cynomolgus macaques, ~42mo



Gen 5 Capsid Expression Extends To Spinal Cord And Is Well Tolerated Following IV Delivery







16X de-targeted compared to AAV9

Species/Age: N = 3 cynomolgus macagues/~42mo

Gen 5 capsid is well tolerated with no clinical pathology or immunogenicity findings

Unremarkable histopathology across the body, including liver and DRGs



Pipeline for Rare and Common Diseases Across All Ages

Capsida Wholly Owned Programs						
Disease / Target	Cargo	Discovery	IND-Enabling	Clinical		
Genetic Epilepsy due to STXBP1 mutations	Gene Supplementation	CAP-002				
Parkinson's disease associated with GBA mutations	Gene Supplementation	CAP-003				
Undisclosed	Gene Supplementation	CAP-004				

Partnered Programs					
Disease / Target	Cargo	Partner	Co/Co Option		
Neurological Diseases & Disorders (3)	Undisclosed	abbvie	One Program, U.S. Profit Share		
Neurological Diseases & Disorders	Undisclosed	Prevail Abbatic Count Substitute Library Lilly	One Program, U.S. Margin Share		
Ophthalmology Diseases & Disorders (3)	Undisclosed	abbvie			
Friedreich's Ataxia	Editing	CRISPR THERAPEUTICS	CRISPR owned, Capsida Co/Co Option		



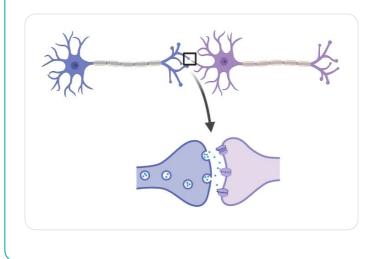
Syntaxin-binding Protein 1 (STXBP1) Genetic Epilepsy

STXBP1 Genetic Mutation

Autosomal dominant

STXBP1 is expressed in every neuron and is essential for neurotransmitter release

Reduction in STXBP1 levels results in impaired neurotransmission





Refractory seizures

Developmental delay, cognitive dysfunction, and intellectual disability

Absent speech

Behavioral issues

Motor abnormalities

Early mortality



No approved therapies

Anti-seizure medications only partially effective



Collaboration & exclusive license with Mingshan Xue, Baylor College of Medicine

Haploinsufficient mouse model shows dose-dependent correction of seizures, cognitive, and motor deficits with STXBP1 gene supplementation



Commercial Opportunity Potential >\$1B

No disease modifying programs in clinical development

Potential to be first-in-class and first-in-disease

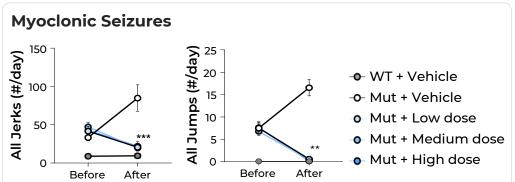
1:30,000 live births¹ (up to 4500 in US and EU) and growing

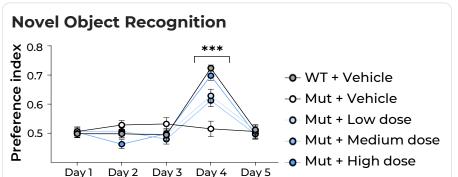
¹Lopez-Rivera et al., Brain, 2020



Dose-dependent Therapeutic Efficacy of Gene

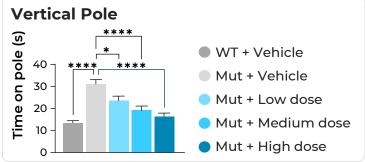
Supplementation Enabled by Brain-wide STXBP1 Expression **Epilepsy Cognitive Dysfunction**





Brain-wide Stxbp1 expression achieves significant reduction of myoclonic seizures and novel object recognition in murine model at all doses

Motor Deficits



Dystonia Mut + High Dose AAV **Before** AAV injection



Brain-wide Stxbp1 expression achieves correction of vertical pole motor ability and dystonia (hindlimb clasping) in murine model

Difference from Mut + VEH: ns, non-significant, * p < 0.05, ** p < 0.01, *** p < 0.001, **** p < 0.0001

Data generated in collaboration with lab of Mingshan Xue, Baylor College of Medicine

¹Medians based on ordinal data

Effective treatment of disease manifestations requires brain-wide supplementation of the hSTXBP1 gene achievable with Capsida's breakthrough capsids to correct circuits associated with seizure, cognitive and motor phenotypes

After

AAV



Integrated Process & Analytical Development and cGMP Capabilities Accelerates Capsid Prioritization and Clinical Supply

Vector Production (VP)



Rapid production of engineered capsids for preclinical studies

Process & Analytical Development (PAD)



-

Conduct in-depth manufacturability assessment of lead capsids in suspension process

Up to 50 L bioreactor scale

Develop and optimize key analytical assays

15,000 ft² cGMP Manufacturing Facility

Leverages single use systems

Up to 200L bioreactor scale

Finish – fill operations

Unidirectional flow

In-house QC capabilities for product release

Modular clean rooms



Experienced MFR and PD staff



In house capabilities reduce turn-around times and expedite process transfer to support clinical studies



cGMP

(MFG)

Manufacturing

Strong Capital Position Through Venture and Partnerships

\$265MFunding to Date

>\$2B In Milestones

\$50MSeries A

\$90MUpfront & Equity

\$55MUpfront & Equity

\$70MUpfront & Equity



AbbVie CNS collaboration, up to **\$530M** in development potential milestones, <u>excluding</u> commercial



Lilly CNS collaboration, up to **\$685M** in potential development and commercial milestones



AbbVie Ophthalmology expansion, **\$595M** in potential development milestones, <u>excluding</u> commercial

abbvie



Looking Ahead

Advance



Advance differentiated internal development candidates to IND and through clinical proof-of-concept

4000x therapeutic window vs. wt AAV9

Broad and well-tolerated neuronal expression across brain regions and spinal cord with significant liver detargeting

Manufacturability profile inline with wtAAV9

Collaborate



Collaborate with our partners to achieve milestones and advance potential co-development programs











Expand



Expand opportunities to leverage breakthrough capsids for additional high unmet diseases



Neurology



Ophthalmology



Other TA

Execute



Execute by managing cash and cultivating talent to grow and maximize value creating opportunities for patients and shareholders





Our Pipeline is Making the Impossible Possible

1300 Rancho Conejo Blvd Thousand Oaks, California

或 www.capsida.com