



Unlocking the Potential of Gene Therapy for All

Jan 2024



Capsida Biotherapeutics



Foundation in capsid engineering with focus on building a new class of targeted, non-invasive gene therapies















Pipeline of wholly owned and partnered programs in rare and more common Neurological and Ophthalmology diseases



Fully integrated capabilities: capsid engineering, cargo optimization, discovery, preclinical research, process development, manufacturing, and clinical development

Company History

2019		Founded Based upon breakthrough AAV engineering technology from the laboratory of Viviana Gradinaru
	 	Series A \$50M Series A co-led by Westlake Village BioPartners and Versant Ventures
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



Julie Hakim
Chief Financial Officer



Bethany Mancilla
Chief Business Officer



Rob Murphy
Vice President, Technical Operations



Swati Tole, MD
Chief Medical Officer



Clare Ozawa, PhD



Beth Seidenberg, MD



Viviana Gradinaru, PhD
Founder



Rita Balice-Gordon, PhD



Frank Verwiel, MD



Peter Anastasiou
Chief Executive Officer



Recent FDA Approvals Create Significant Momentum

Gene Therapy Approvals

Growing number of successfully developed and approved gene therapy products transformative for patients:

Hemgenix™ (Hemophilia B)

Zolgensma™ (SMA)

Roctavian™ (Hemophilia A)

Skysona™ (CALD)

Vyjuvek™ (Dystrophic epidermolysis bullosa)

Luxturna™ (RPE65 retinal dystrophy)

Zynteglo™ (β-thalassemia)

Elevidys™ (DMD)

Casgevy™ (Sickle cell disease)

Lyfgenia™ (Sickle cell disease)



Breakthrough Neurological Therapies

FDA Approval for disease modifying CNS therapies based on biomarker data:

Qalsody™ (SOD1 ALS)

Leqembi™ (AD)

Skyclarys™ (FA)

Aduhelm™ (AD)

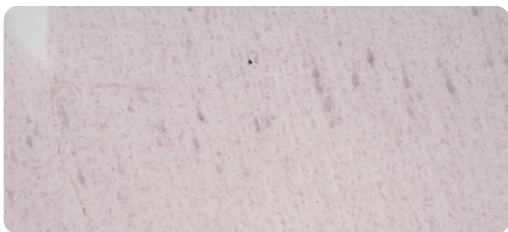


Capsida Addresses CNS Challenges Through our Engineered Gene Therapies

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**

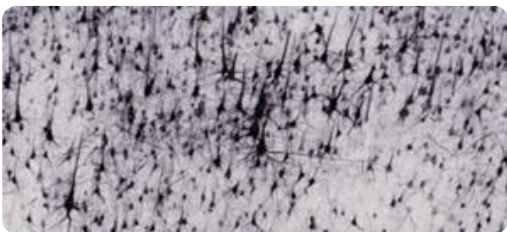
Risks

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**

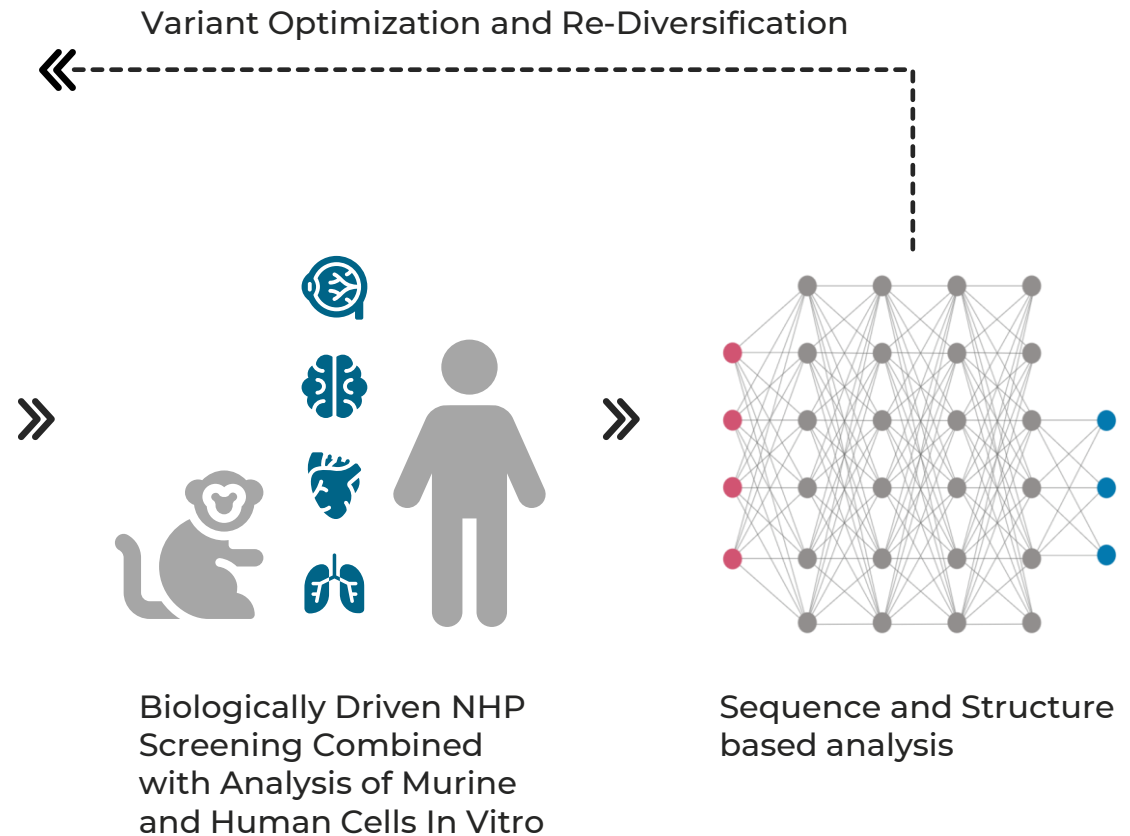
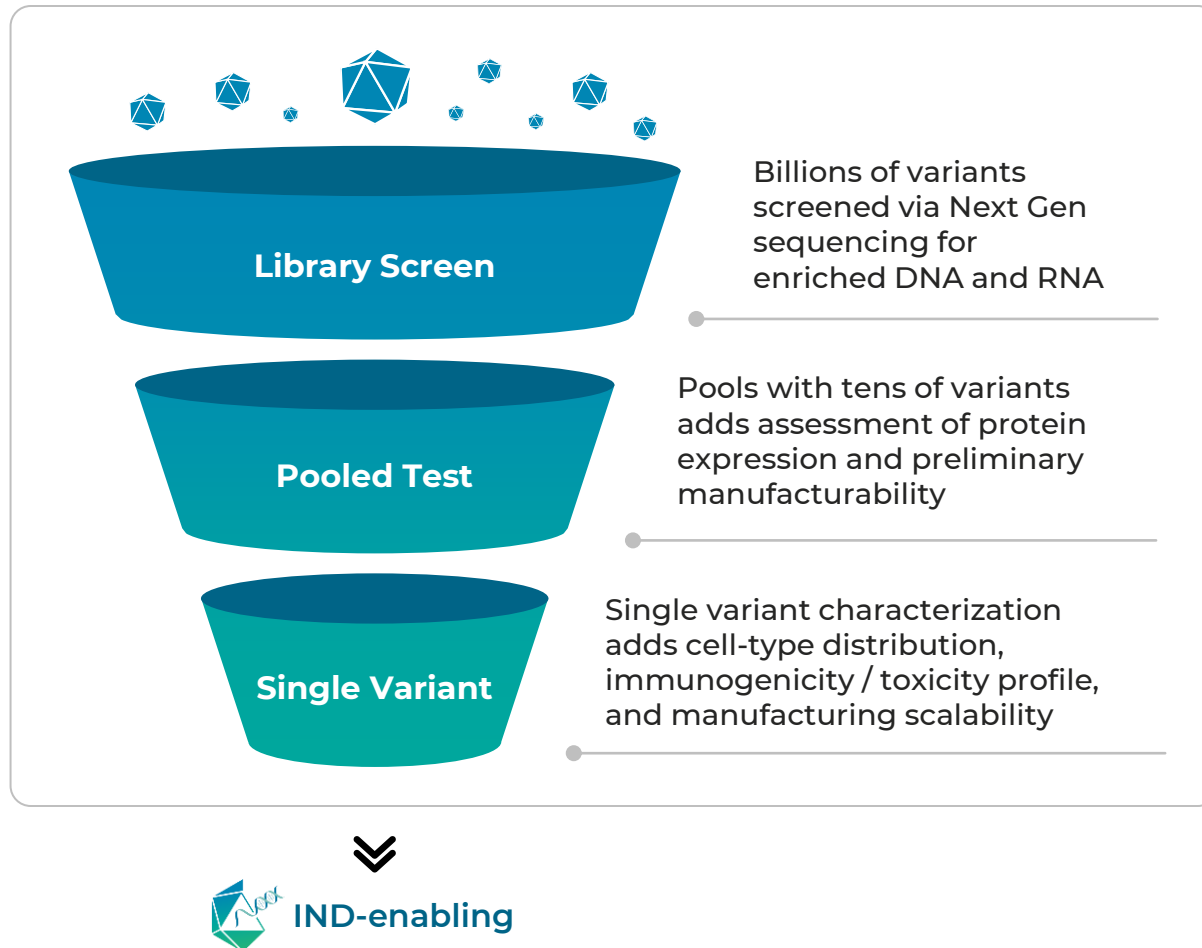
Enabling lower dosing and **~4000x difference** in CNS to liver targeting vs wild type AAV9

Access to more common diseases across all ages

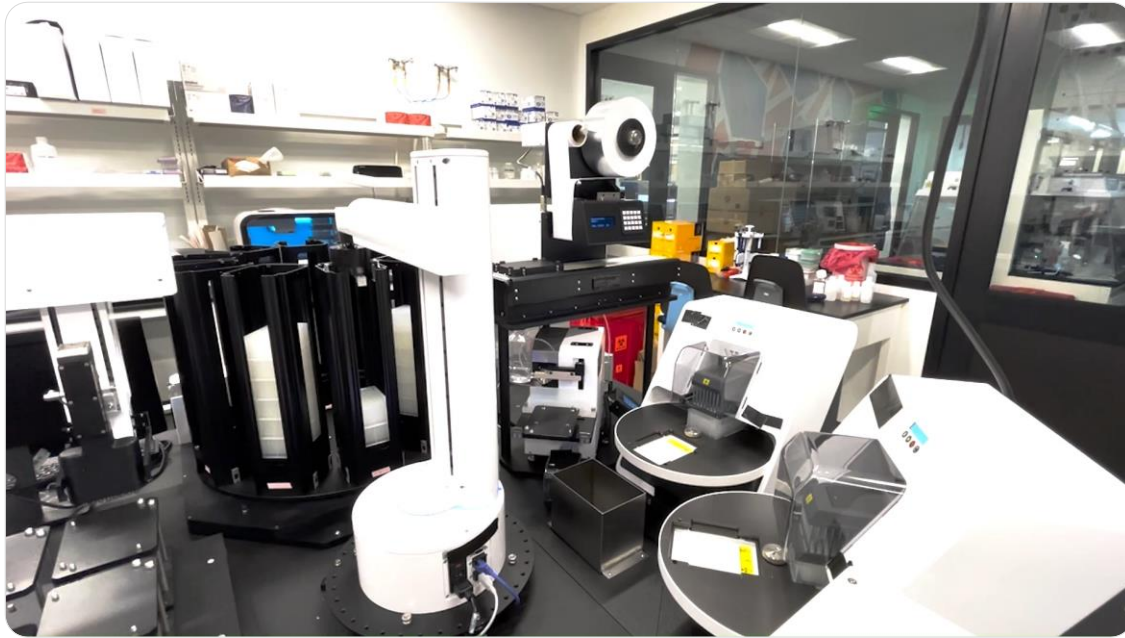
Targeted IV admin **increases effectiveness** and **reduces risks**

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

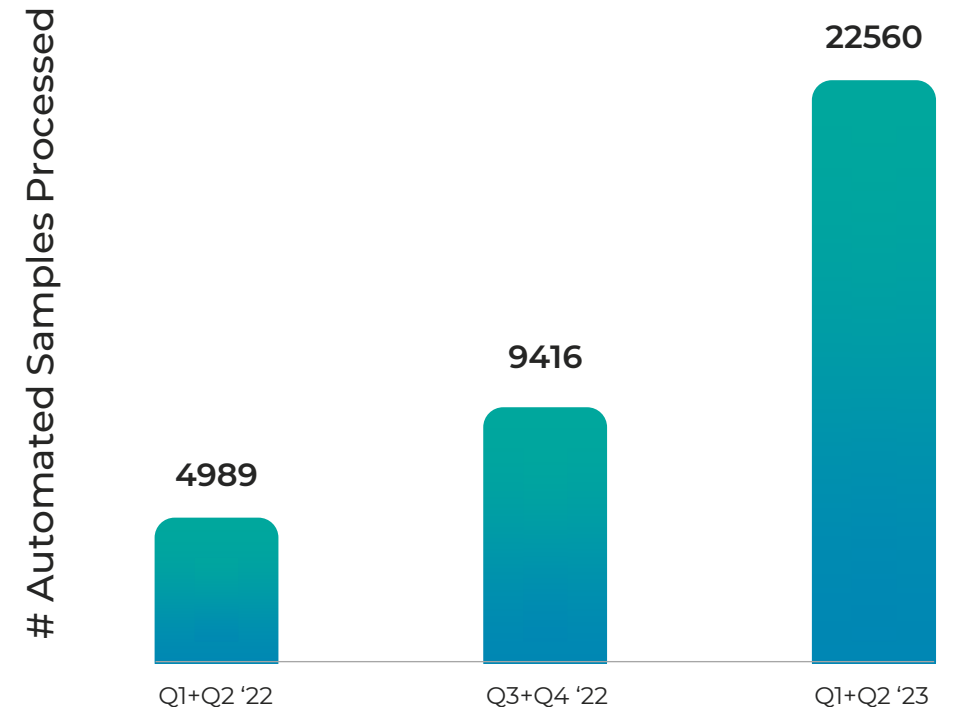


Increases data quantity – scale up on animal and tissue utilization



Screening capacity increases **250%**

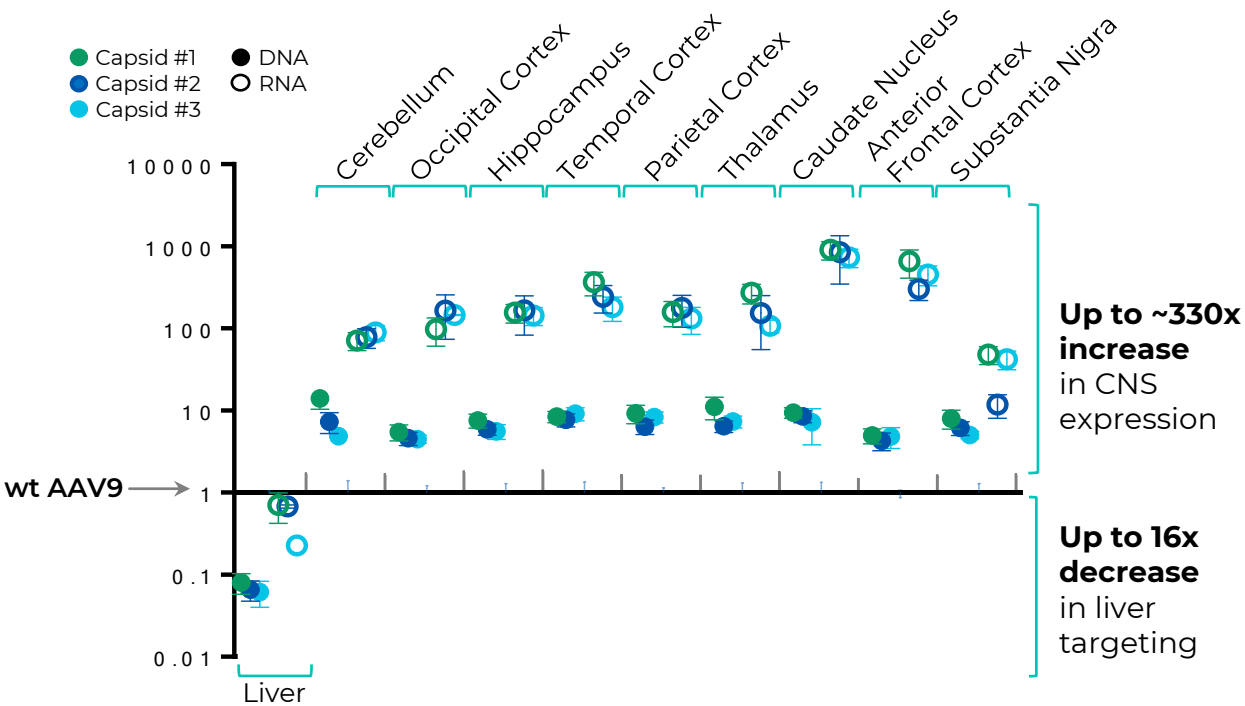
Sample Processing Scaleup Since 2022



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

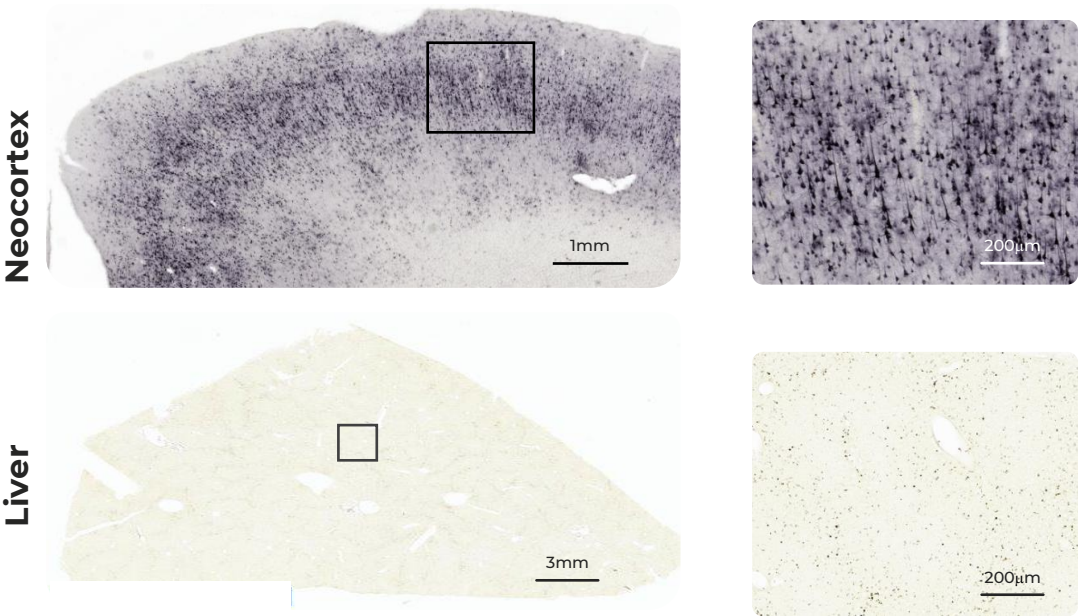
IV Delivery

DNA and RNA Enrichment over AAV9 From Individual Capsid Characterization Studies In Cynos



IV Delivery

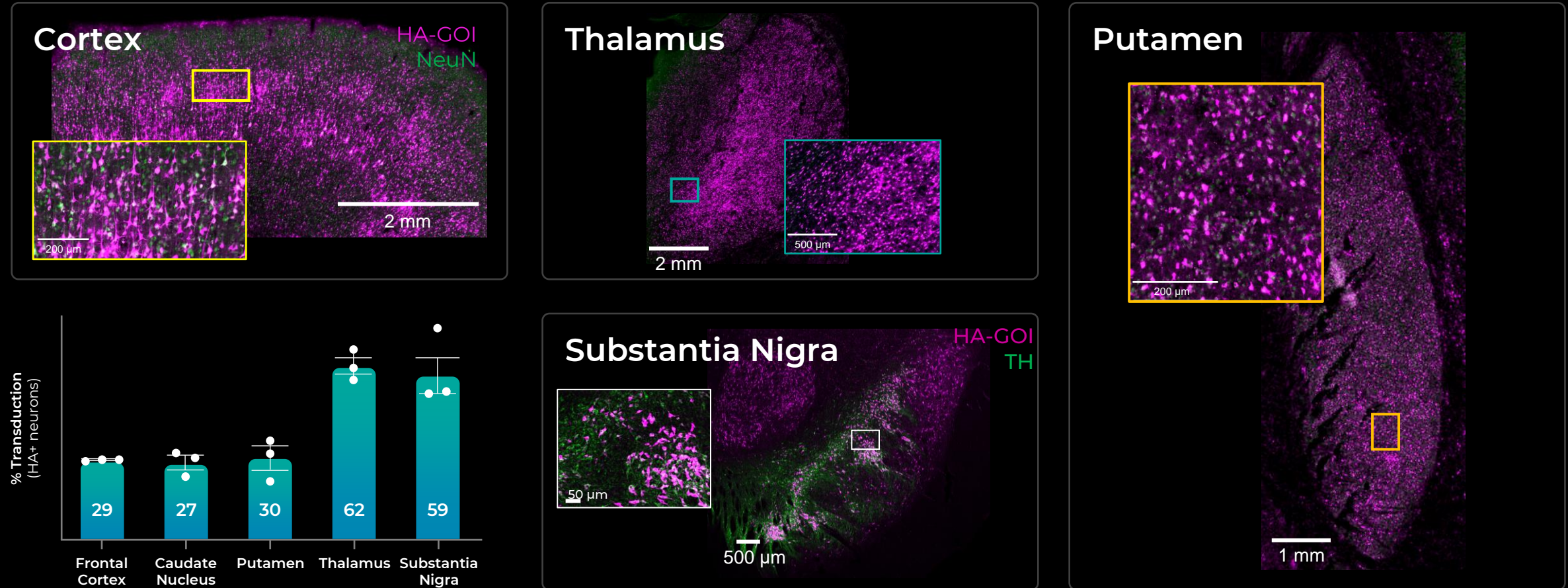
Protein localization (HA tagged GOI)



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

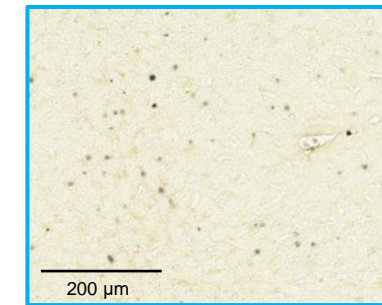
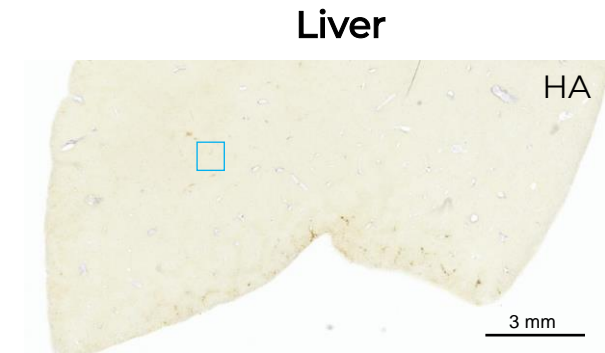
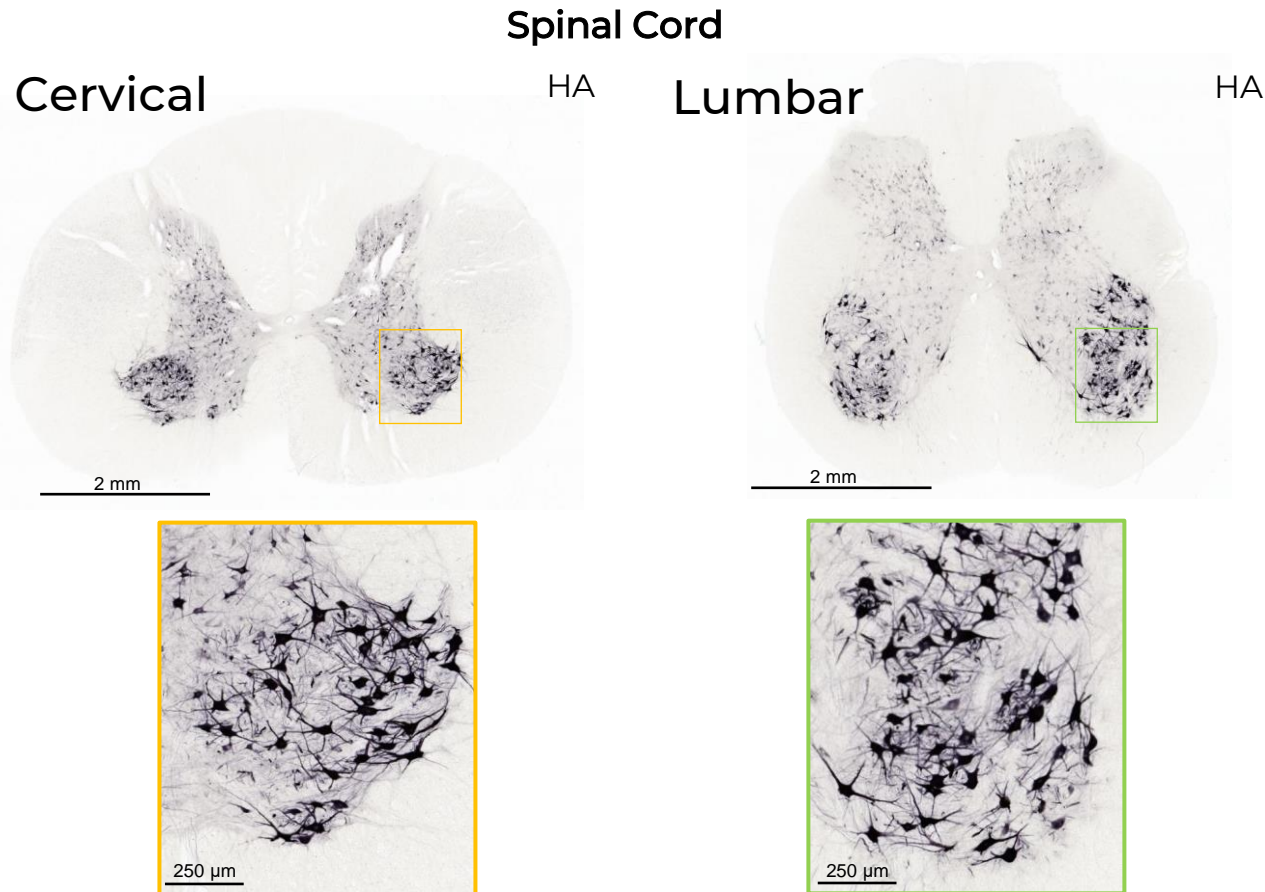
= Lower efficacious doses
Wider Therapeutic Index

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

Capsid: Gen 5
Cargo: HA-GOI
Species/Age: N = 3 cynomolgus macaques/ ~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		
Undisclosed	Gene Supplementation	CAP-003		

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	 	One Program, U.S. Margin Share
Ophthalmology Diseases & Disorders (3)	Undisclosed	abbvie	
Friedreich's Ataxia	Editing		CRISPR owned, Capsida Co/Co Option
ALS	Editing		Capsida owned, CRISPR Co/Co Option

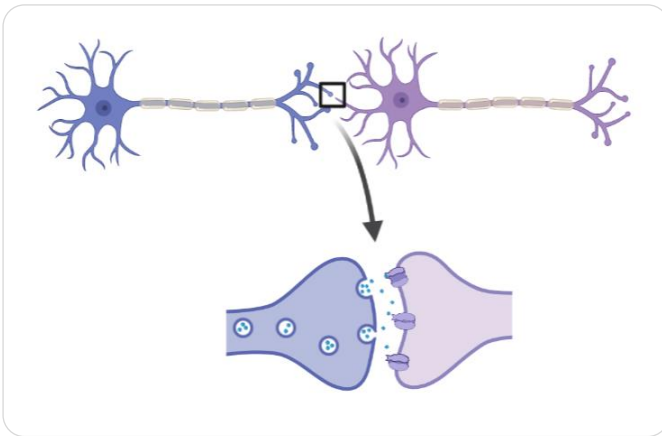
Syntaxin-binding Protein 1 (STXBP1) Genetic Epilepsy

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



Severe Disease Manifestations

Refractory seizures

Developmental delay, cognitive dysfunction, and intellectual disability

Absent speech

Behavioral issues

Motor abnormalities

Early mortality



Extreme Unmet Need

No approved therapies

Anti-seizure medications only partially effective



Robust Translational Evidence

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

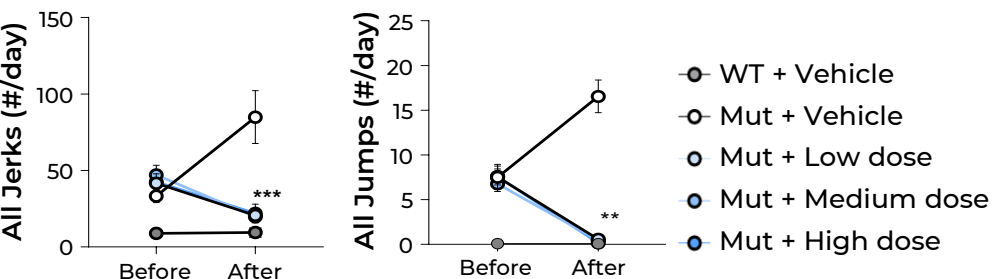
1:30,000 live births¹ (up to 4500 in US and EU) and growing

¹Lopez-Rivera et al., Brain, 2020

Dose-dependent Therapeutic Efficacy of Gene Supplementation Enabled by Brain-wide STXBP1 Expression

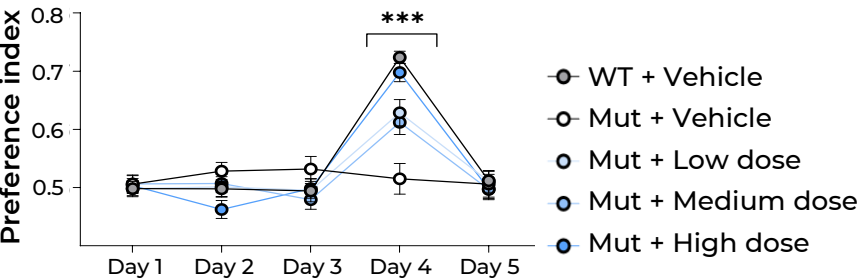
Epilepsy

Myoclonic Seizures



Cognitive Dysfunction

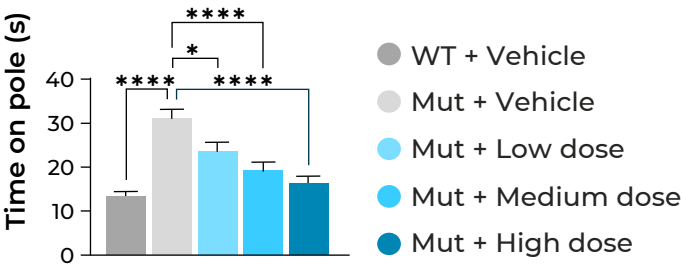
Novel Object Recognition



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

Motor Deficits

Vertical Pole



Dystonia

Mut + High Dose AAV



Dystonia¹ Correction by Gene Supplementation

WT	Mut	Low	Medium	High
0.18	2.50	1.49	0.84	0.62

¹Medians based on ordinal data

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

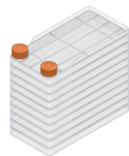
Difference from Mut + VEH: ns, non-significant, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$

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

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

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)



+

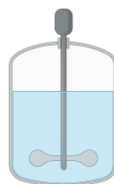


Conduct in-depth manufacturability assessment of lead capsids in suspension process

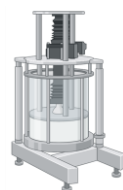
Up to 50 L bioreactor scale

Develop and optimize key analytical assays

cGMP Manufacturing (MFG)



+



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

Strong Capital Position Through Venture and Partnerships

\$265M
Funding to Date

>\$2B
In Milestones

\$50M
Series A



\$90M
Upfront & Equity

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



\$55M
Upfront & Equity

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



\$70M
Upfront & Equity

AbbVie Ophthalmology expansion, **\$595M** in potential development milestones, excluding commercial



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

abbvie



Lilly

Prevail
THERAPEUTICS

A Wholly Owned Subsidiary of Eli Lilly and Company

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

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