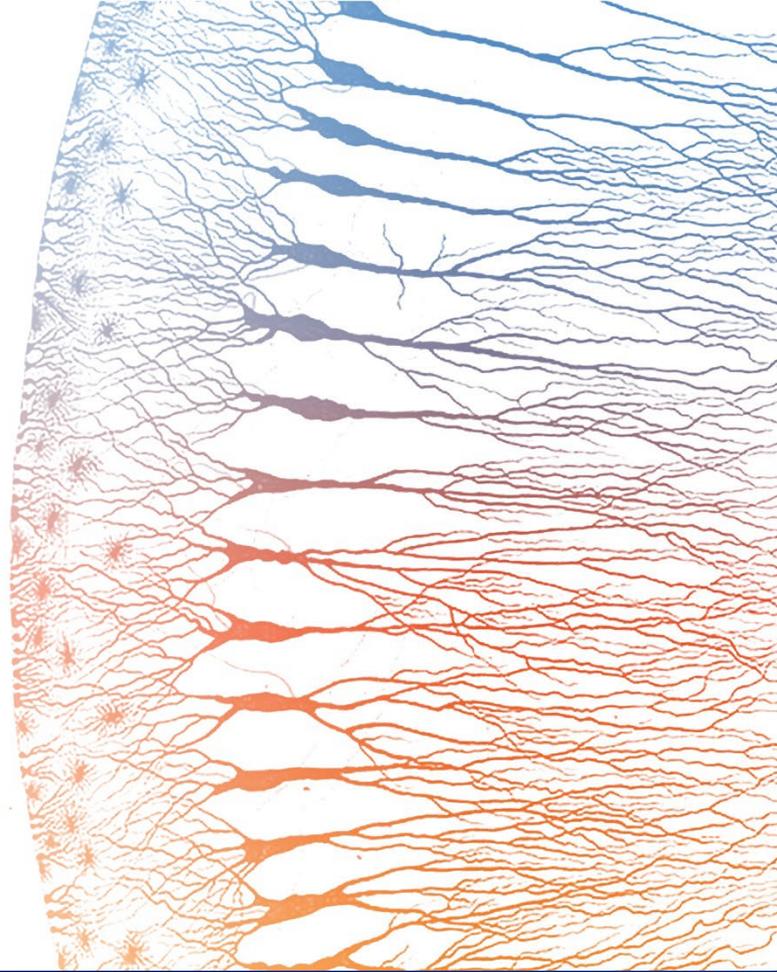




Leveraging Genetics to Treat Neurological Diseases

SOD1 Update / February 2025



This presentation contains forward-looking statements for the purposes of the safe harbor provisions under The Private Securities Litigation Reform Act of 1995 and other federal securities laws. The use of words such as “expect,” “anticipate,” “believe,” “future,” “plan,” “estimate,” or “potential,” and other similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words. These forward-looking statements include, among other things, statements about Voyager’s plans for the future of its SOD1 ALS gene therapy program, including its plan to assess alternate payloads for the program and expectations with respect to providing further updates on the program; Voyager’s beliefs regarding the potential cause of development candidate VY9323’s failure to achieve the desired product profile, including Voyager’s belief that such failure is not related to the capsid; Voyager’s cash runway; expectations for Voyager’s achievement of preclinical and clinical development milestones for its potential development candidates such as the identification of lead development candidates, IND and CTA filings, the initiation of clinical trials, and the generation of clinical data and proof-of-concept; the potential for third-party clinical data to inform Voyager’s product development programs; Voyager’s ability to expand from gene therapy and antibodies into other modalities of neurogenetic medicine; Voyager’s plans to present scientific data at future conferences and other scientific forums; Voyager’s ability to generate near-term and long-term funding through reimbursement, upfront, milestone and royalty-based fees (as applicable) under its existing licensing and collaboration agreements, and to obtain data regarding the performance of its TRACER-derived capsid families licensed to its collaborators and partners under such agreements; Voyager’s ability to maintain and advance product development programs under its current partnerships and collaborations; and the sufficiency of Voyager’s cash resources. These forward-looking statements are only predictions, and Voyager may not actually achieve the plans, intentions, or expectations disclosed in the forward-looking statements. All forward-looking statements are based on estimates and assumptions by Voyager’s management that, although Voyager believes such forward-looking statements to be reasonable, are inherently uncertain and subject to risks and uncertainties that may cause actual results to differ materially from those that Voyager expected. Such risks and uncertainties include, among others, the expectations and decisions of regulatory authorities; the timing, initiation, conduct, and outcomes of Voyager’s preclinical studies and clinical trials; the availability of data from clinical trials; the success of Voyager’s product candidates; the availability or commercial potential of product candidates under collaborations; the willingness and ability of Voyager’s collaboration partners to meet obligations under collaboration agreements with Voyager; the continued development of Voyager’s technology platforms, including Voyager’s TRACER capsid discovery platform and its antibody screening technology; Voyager’s scientific approach and program development progress, and the restricted supply of critical research components; the development by third parties of capsid identification platforms that may be competitive to Voyager’s TRACER capsid discovery platform; Voyager’s ability to create and protect intellectual property rights associated with the TRACER capsid discovery platform, the capsids identified by the platform, and development candidates for Voyager’s pipeline programs; the possibility and the timing of Voyager’s receipt of program reimbursement, development or commercialization milestones, option exercise, and other payments under Voyager’s existing licensing or collaboration agreements; the ability of Voyager to negotiate and complete licensing or collaboration agreements with other parties on terms acceptable to Voyager and the third parties; the success of programs controlled by third-party collaborators in which Voyager retains a financial interest; the ability to attract and retain talented directors, employees, and contractors; and the sufficiency of Voyager’s cash resources. These statements are also subject to a number of material risks and uncertainties that are described in Voyager’s most recent Annual Report on Form 10-K filed with the Securities and Exchange Commission, as updated by its subsequent filings with the Securities and Exchange Commission. Any forward-looking statement speaks only as of the date on which this presentation was presented. Voyager undertakes no obligation to publicly update or revise any forward-looking statement, whether as a result of new information, future events or otherwise, except as required by law. © Voyager Therapeutics, Inc.

- **Asset:** VY9323 = SOD1 miRNA payload + IV-delivered, second gen TRACER capsid (VCAP-Gen2)
- **Study:** Four doses explored in 6-month NHP GLP tox study; data from 3-month interim analysis
- **Outcome:**
 - All doses: No liver or systemic toxicity typical of AAV studies; no immunogenicity concerns
 - Higher doses: significantly reduced SOD1 mRNA (~60%) across multiple CNS regions; also resulted in late onset neurotoxicity (primarily tremors, delayed NfL increase, and nerve fiber degeneration)
 - Lower doses: did not result in adverse events; also did not result in sufficient SOD1 mRNA reduction

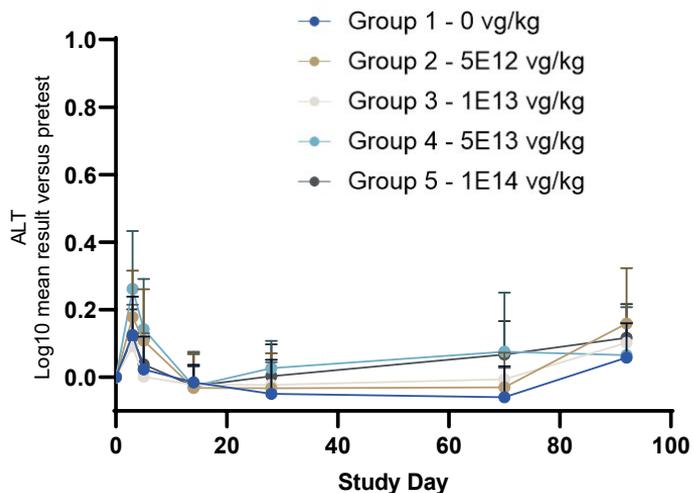
Key Data from Additional Studies: The VY1706 (tau silencing; same capsid) gene therapy program achieved desired activity levels and was well-tolerated in three-month NHP studies.

Conclusions:

- Cause believed to be off-target payload activity; not capsid or SOD1 target related
- VY9323 will not advance; assessing alternate payloads for potential path forward
- Cash runway extended into mid-2027

VY9323 shows robust liver de-targeting even at 1E14 vg/kg

ALT - VY9323 in NHP

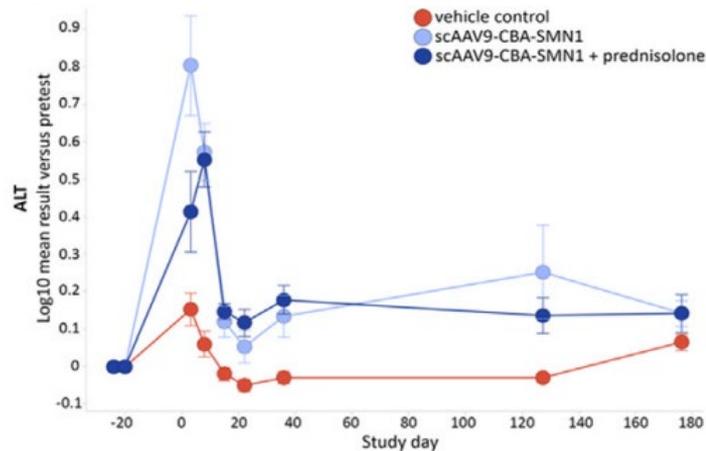


Molecular Therapy

Original Article

Liver injury in cynomolgus monkeys following intravenous and intrathecal scAAV9 gene therapy delivery

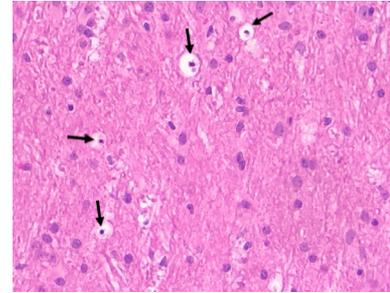
Eloise Hudry,¹ Fumiaki Aihara,¹ Emily Meseck,² Keith Mansfield,¹ Cameron McElroy,² Deepa Chand,^{2,3} Francis Fonyuy Tukov,² and Kelley Penraat¹



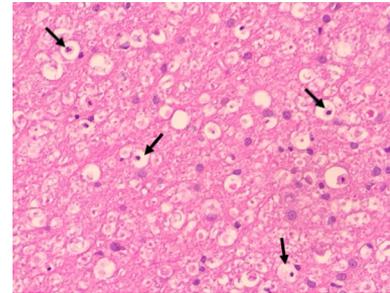
Hudry E et al (2023) Molecular Therapy; scAAV9-CBA-SMN1 administered IV at a dose of 1.1E10¹⁴ vg/kg

- **Cortex:** Moderate nerve fiber degeneration in the cerebral hemisphere white matter
- **Spinal Cord:** Nerve fiber degeneration primarily in the dorsal and ventral white matter tracts
- **Dorsal Root Ganglia and Nerve:** Nerve fiber degeneration, increased cellularity, neuronophagia, and mononuclear cell infiltration

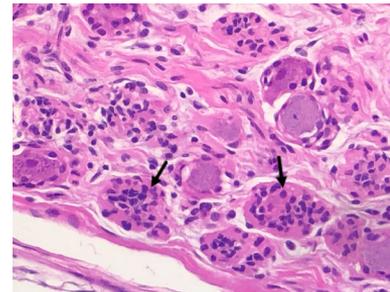
Cerebral hemisphere, White Matter: Nerve Fiber Degeneration (arrows)



Cervical Spinal Cord, White Matter: Nerve Fiber Degeneration (arrows)



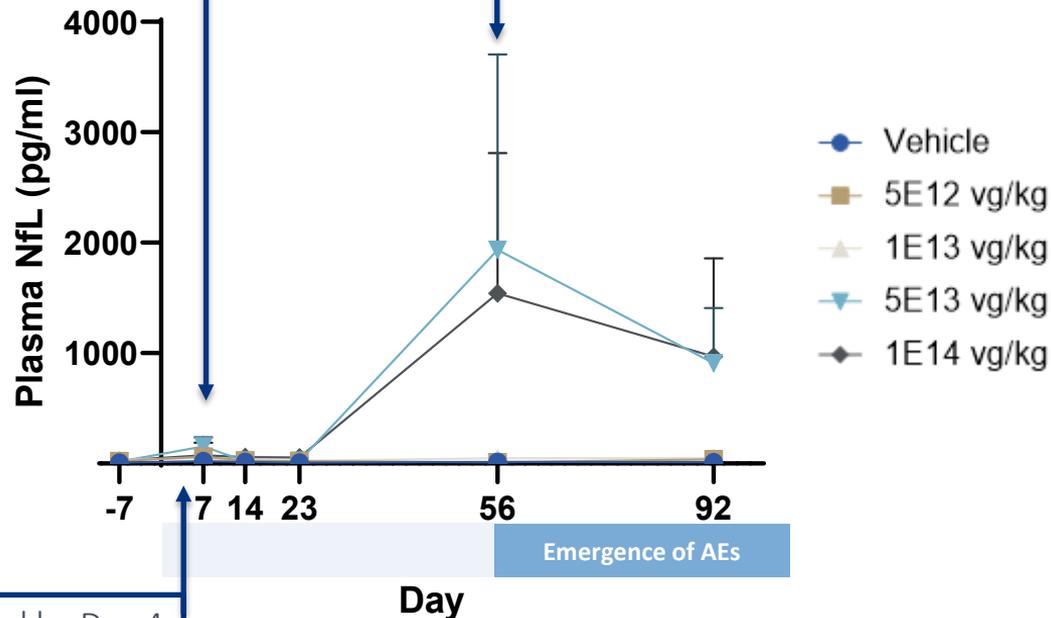
Dorsal Root Ganglion: Increased Glial Cellularity with aggregate (arrows), Decreased Neuronal Cellularity



Capsid Not a Driver of the Late-Onset Neurotoxicity

Mild, transient increase in NfL, consistent with but lower magnitude vs reported in AAV literature, resolved in 2-3 weeks

Significant increase in NfL concurrent with AE onset in NHPs, implicating payload activity

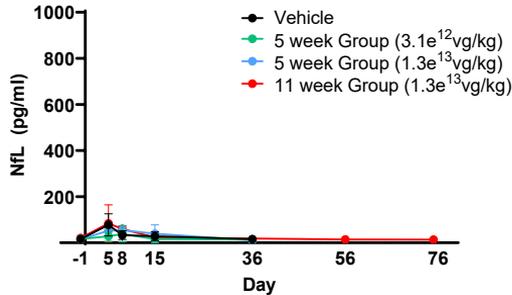


>99% capsid shed from blood by Day 4

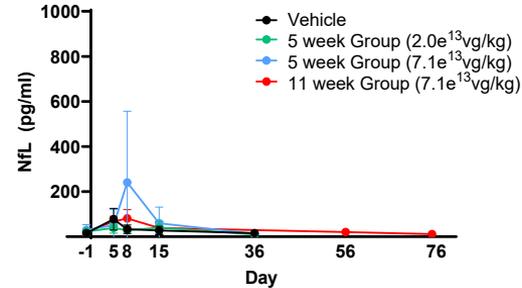
Same Capsid Shows No Delayed NFL Increase with Four Different Payloads at IV Doses Up To 7E13 in NHPs

VY1706
(tau silencing)

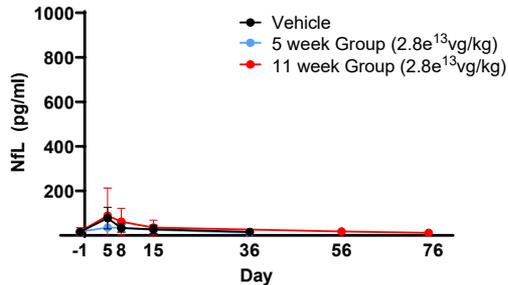
VCAP-Gen2.Promoter 2.miR1



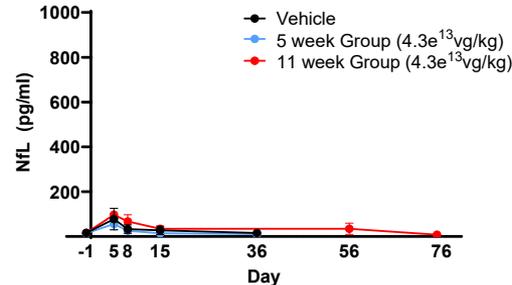
VCAP-Gen2.Promoter 2.miR2



VCAP-Gen2.Promoter 3.miR1



VCAP-Gen2.Promoter 3.miR2

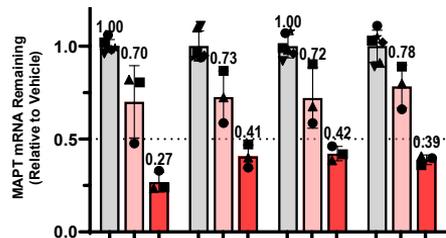


- No dose-limiting toxicology signals were observed at 3 months, including doses where toxicity was observed in ALS-SOD1

- All constructs, including VY1706, showed substantial target knockdown in relevant brain regions

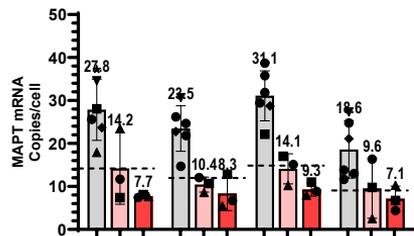
Tissue punch PCR

Strong and broad tau mRNA knockdown



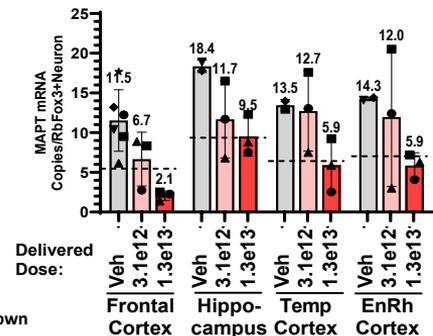
In situ hybridization

Strong and broad tau mRNA knockdown observed in cells



Fluorescent in situ hybridization

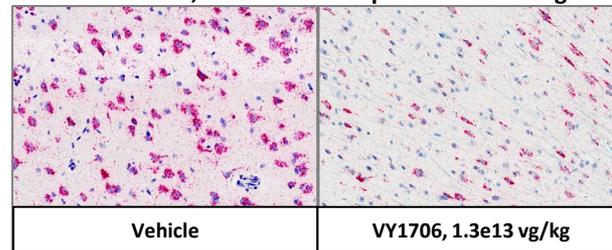
Strong and broad neuronal tau mRNA knockdown



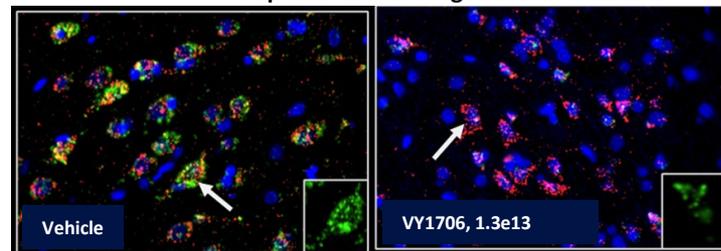
Single IV dose of VY1706 resulted in 50% to 73% reductions in tau mRNA levels across cerebral cortex.

Additional NHP data to be presented at ADPD.

Frontal Cortex, MAPT in situ representative images



Frontal Cortex, NeuN/MAPT in situ representative images

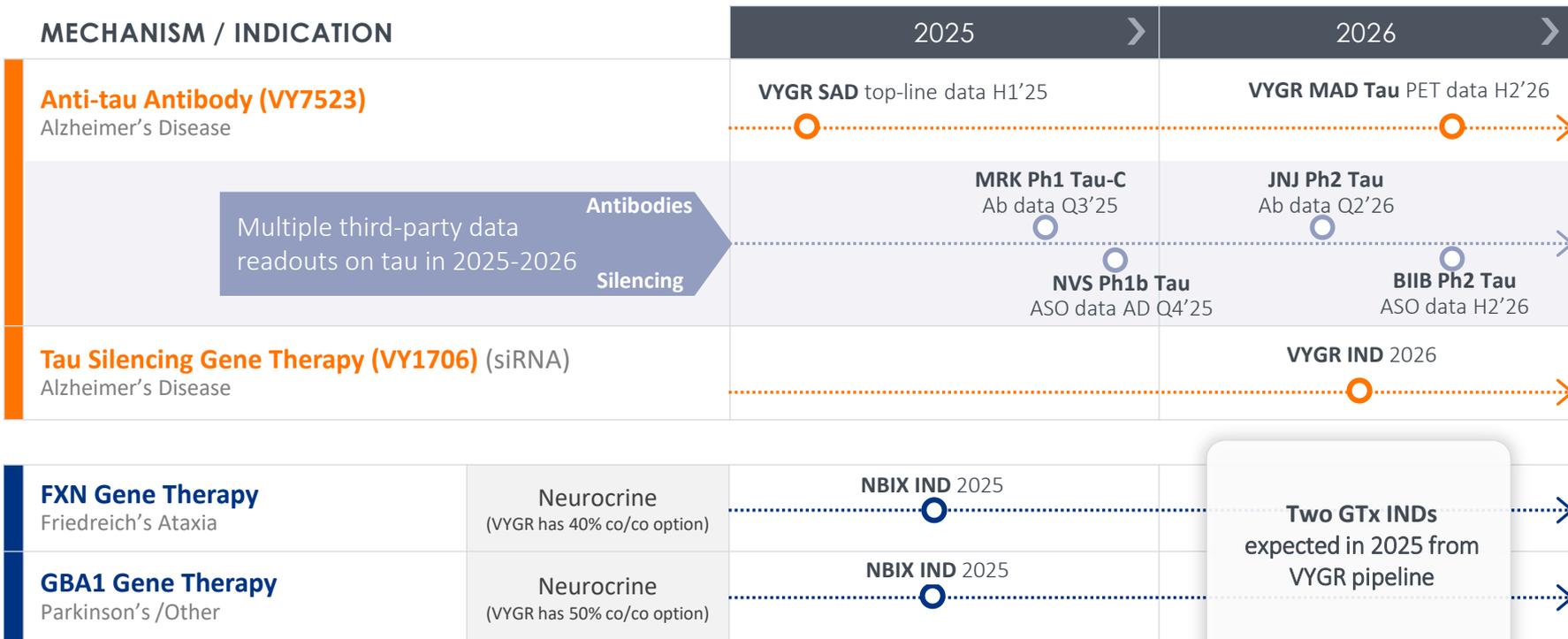


CNS Pipeline Focuses on Validated Targets with High Potential Value



	Mechanism / Indication	Research	IND-Enabling	Phase I	Phase II	Phase III
WHOLLY-OWNED	Anti-tau Antibody (VY7523) / Alzheimer's Disease	[Progress bar from Research to Phase I]				
	Tau Silencing Gene Therapy (VY1706) (siRNA) / Alzheimer's Disease	[Progress bar from Research to IND-Enabling]				
	SOD1 Silencing Gene Therapy (siRNA) / ALS	[Progress bar from Research to Research]				
	Anti-Aβ Gene Therapy (Vectorized Antibody) / Alzheimer's Disease	[Progress bar from Research to Research]				
COLLABORATIONS (REIMBURSED)	FXN Gene Therapy / Friedreich's Ataxia	Neurocrine (VYGR has 40% co/co option)	[Progress bar from Research to IND-Enabling]			
	GBA1 Gene Therapy / Parkinson's /Other	Neurocrine (VYGR has 50% co/co option)	[Progress bar from Research to IND-Enabling]			
	Five Gene Therapy Programs / Undisclosed	Neurocrine	1 in IND-enabling; 4 undisclosed			
	Huntington's Gene Therapy / Huntington's	Novartis	Undisclosed			
CAPSID LICENSES	Gene Therapy / Rare Neurological Disease	Alexion, AstraZeneca Rare Disease License				
	Four Gene Therapy Programs / SMA + 3 CNS Diseases	Novartis Licenses				

Runway Extended into Mid-27; Beyond Multiple Potential Catalysts





PIPELINE

Multiple clinical data readouts expected 2025/26; cash into mid-2027¹

Two approaches to tau (mAb and GTx) – and all-star team



PLATFORMS

Intravenous CNS GTx platform; robust preclinical data + partnerships

Emerging ALPL shuttle may enable multi-modality CNS delivery



PARTNERSHIPS

Blue-chip partners include Novartis, Neurocrine, Alexion

\$8.2B in potential milestone payments, incl. \$2.9B development



Thank You

www.voyagertherapeutics.com

