



Breaking Through Barriers in Neurology and Gene Therapy

Corporate Deck | March 2023

Forward-looking statements

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Voyager Therapeutics (Nasdaq: VYGR) Investment Thesis

Breaking Through Barriers in Neurology and Gene Therapy

CAPSID PLATFORM

The TRACER™ AAV Difference

- Potential to address gene therapy's narrow therapeutic window: superior BBB penetration at low doses
- Receptor identification supports potential for human translation
- Alliances with gene therapy leaders: Pfizer, Novartis, Neurocrine

CNS PIPELINE

Capsids Plus Diverse Payloads

- Validated targets and biomarkers allow potential for rapid proof-of-biology
- Indications with high unmet need: ALS, Alzheimer's, Parkinson's, Friedreich's Ataxia
- Nominating lead candidates; IND filings expected 2024/2025

PARTNERSHIPS

Generating Non-Dilutive Revenue

- Capsid license structure exclusive to target, NOT capsid – enables multiple licenses
- Pfizer and Novartis: license agreements for capsids against CNS targets
- Neurocrine: Collaboration on GBA1, FA, and five undisclosed targets
- Exploring additional partnerships

CNS pipeline focuses on validated targets with high potential value

Program (Mechanism)	Ownership	Early Research	Late Research	IND-Enabling
ALZHEIMER'S DISEASE Passive Tau Antibody	Wholly-Owned			
FRIEDREICH'S ATAXIA FXN Gene Therapy (Gene Replacement)	Neurocrine Collaboration (VYGR has 40% cost/profit split option)*			
ALS SOD1 Gene Therapy (Gene Silencing)	Wholly-Owned			
PARKINSON'S / OTHERS GBA1 Gene Therapy (Gene Replacement)	Neurocrine Collaboration (VYGR has 50% cost/profit split option)**			
EARLY RESEARCH PROGRAMS Allele-specific mHTT+MSH3 gene silencing for HD; Tau gene silencing for Alzheimer's; vHER2 antibody for brain mets	Wholly-Owned			
UNDISCLOSED DISEASES / Five Gene Therapy Programs		Neurocrine Collaboration		
RARE NEUROLOGICAL DISEASE / Gene Therapy		Pfizer License		
CNS DISEASES / Two Gene Therapy Programs		Novartis License		

TRACER™ AAV Capsid Platform

The TRACER™ AAV Difference

Delivery will enable the future of neuro genetic medicine

DELIVERY *currently limits* **NEUROLOGY**

Difficult to deliver across blood-brain barrier (BBB)



DELIVERY *currently limits* **GENE THERAPY**

Narrow therapeutic windows with local or systemic delivery

NEURO DELIVERY of GENETIC MEDICINES COMBINES THESE DELIVERY CHALLENGES

IV dosing: Low BBB penetration. Weak CNS transduction.

Local dosing (IT, IP*): Steep gradients. Restricted penetration within brain.

VOYAGER IS ENABLING DELIVERY of NEURO-GENETIC MEDICINES

Voyager's novel TRACER™-derived capsids power next-gen gene therapy

TRACER™ capsid discovery platform derived from evaluation of 200M+ variants of AAV5 and AAV9



Minimally invasive I.V.
Delivery



Customizable cell tropisms
(neurons, glial cells) and levels of
liver de-targeting



Receptor identification
enables rational design



**Multi-Species
Validation**

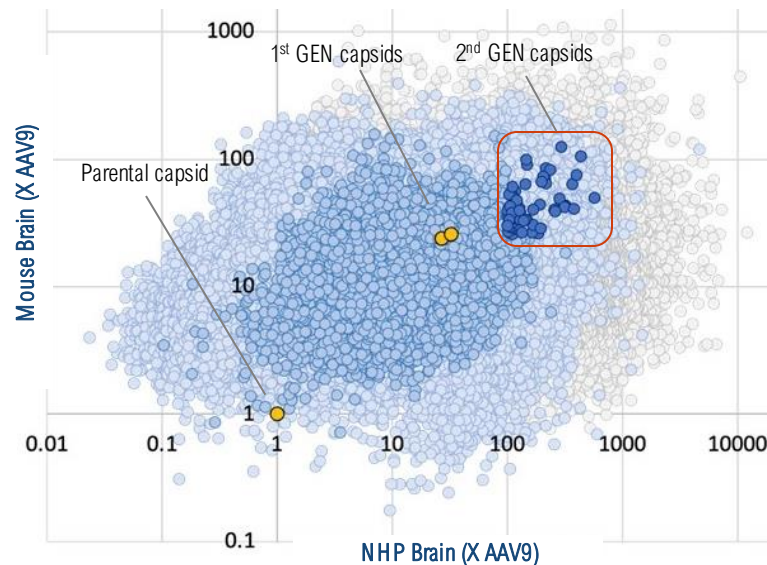


Improved, broad
CNS transduction



Fully integrated:
capsid engineering, NHP in vivo validation,
scalable production (HEK, Sf9)

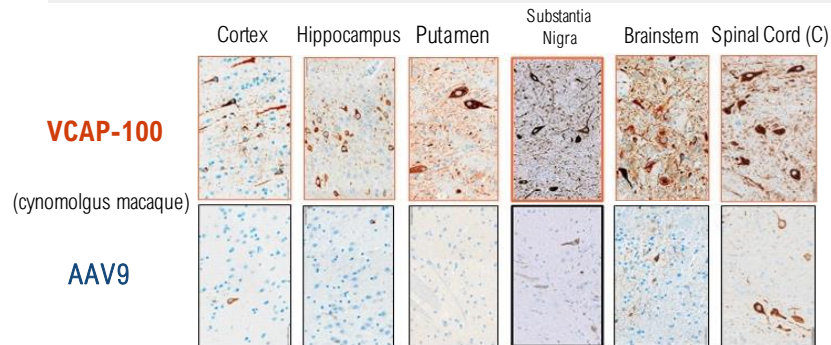
>100-fold improved CNS delivery across species



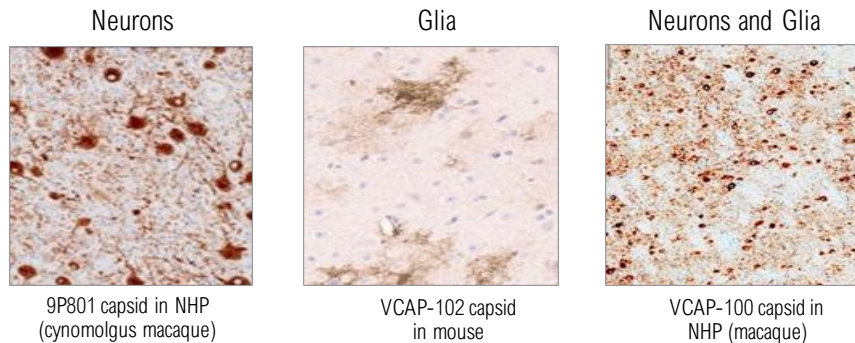
Data Presented at ASGCT 2022, Moyer et. al.

Novel IV delivered capsids with potential to transform CNS treatment

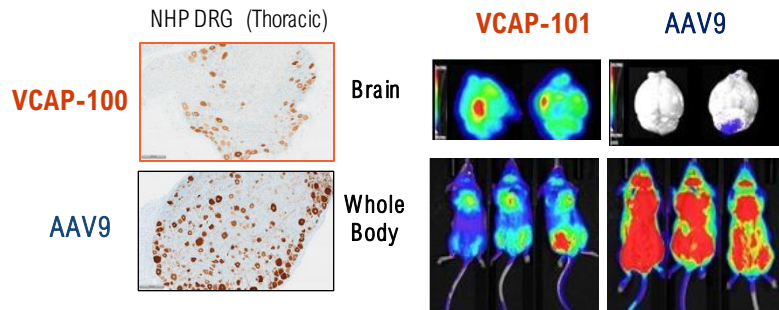
Widespread CNS distribution



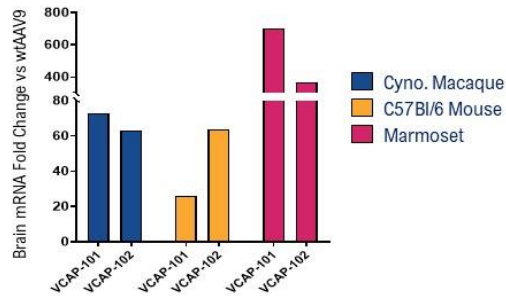
CNS neurons and glia transduced



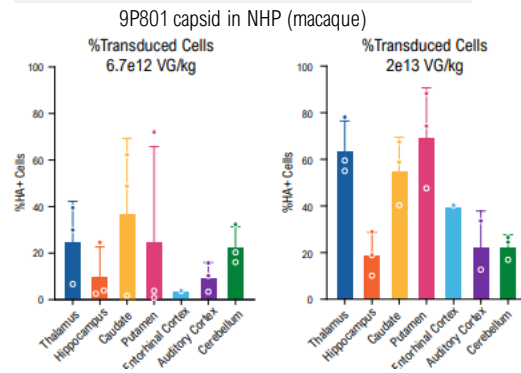
Detargeting of peripheral tissues



Cross species transduction



Transduction at low doses

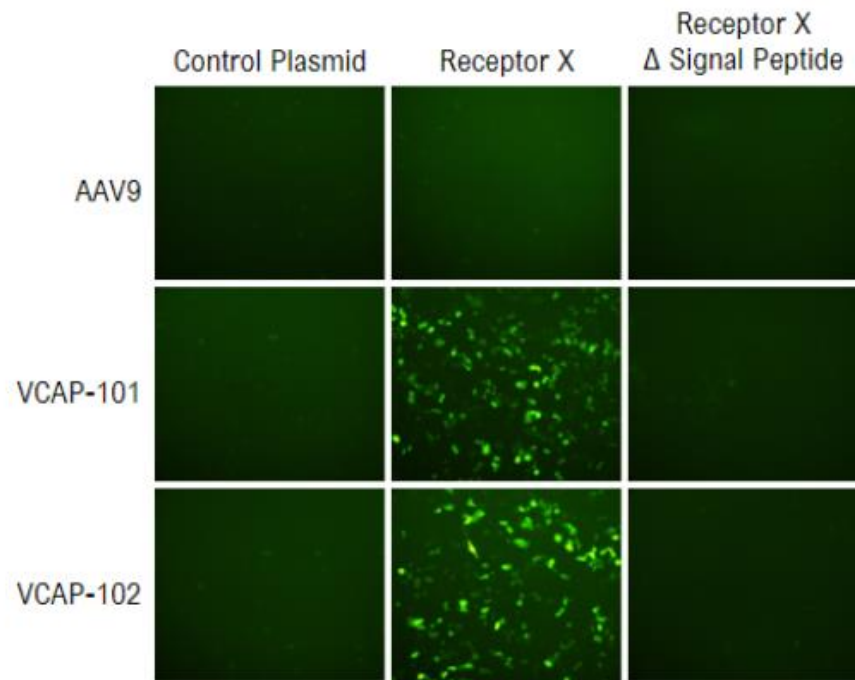


Receptor identified for TRACER™ capsid family

- ✓ Receptor identified for one of our most promising TRACER™ AAV capsids (ESGCT 2022)
- ✓ Expression confirmed in human endothelial cells and multiple CNS cell types

Characterizing the applicable receptor and confirming activity with the human orthologue increases probability that the related capsid will cross the BBB in humans

- Should facilitate rational design of AAV capsids for targeted IV delivery
- May enable IV delivery to CNS for diverse therapeutic modalities (preclinical experiments underway)



ESGCT 2022: Identification of a Cell Surface Receptor Utilized by an Engineered BBB-Penetrant Capsid Family with Enhanced Brain Tropism in Non-Human Primates and Mice

Transformative CNS Pipeline

Combining capsids with diverse payloads

Collaboration demonstrates how Voyager is enabling neuro genetic medicine

NOVEL CAPSIDS

- IV-delivered
- 100-1000X CNS transduction
- Multiple CNS cell tropisms (neurons, glial cells); liver/DRG de-targeting
- Capsid receptor identification

- ✓ Pfizer license option exercised
- ✓ Novartis license option exercised
- ✓ Neurocrine collaborating on multiple targets



DIVERSE PAYLOADS

- CNS diseases
- CNS targets
- Preclinical models
- Vectorizing payloads (siRNA, antibodies, gene replacement)

- ✓ Neurocrine collaborating on GBA1 and FA programs plus five discovery programs
- ✓ Voyager advancing wholly-owned programs in gene replacement, silencing, antibodies



ENABLING NEURO-GENETIC MEDICINES

OPTIMAL CAPSID



OPTIMAL PAYLOAD



PROGRAM VALUE CREATION

Anti-tau antibody offers a new twist on an Alzheimer's target

HIGH UNMET NEED + COMMERCIAL POTENTIAL

~6 million people in U.S.*

Multiple approaches

needed: Like oncology, combination treatment may improve outcomes (i.e. anti-amyloid + anti-tau)

VALIDATED TARGET

Tau

Pathology closely correlates with disease progression and cognitive decline

Targets C-terminal domain

Failed approaches targeted N-terminal; more consistent than mid-domain

EFFICIENT PATH TO PROOF-OF-BIOLOGY

New Tau PET tracers enable imaging for tau pathology and use as clinical trial biomarkers

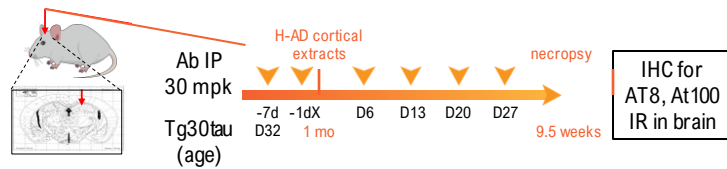
ROBUST PRECLINICAL PHARMACOLOGY

Voyager IV-delivered antibody inhibited spread of pathological tau by >70% in mouse seeding model (AAIC 2022)

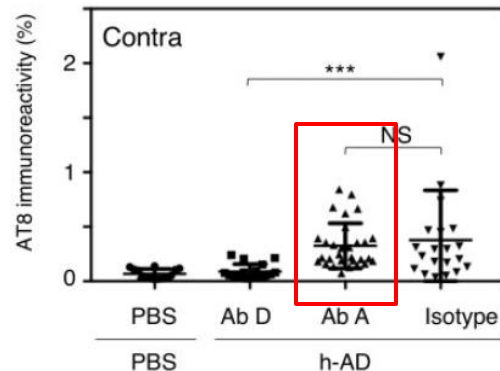
STATUS: Lead development candidate selected

MILESTONE: Expect to initiate GLP tox in 2023 to enable IND H1 2024

Voyager's anti-tau antibody is differentiated from other anti-tau antibodies

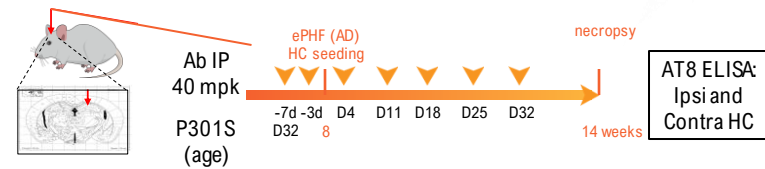


N-terminal Ab IPN002 is **not effective** in both mouse seeding model and clinic

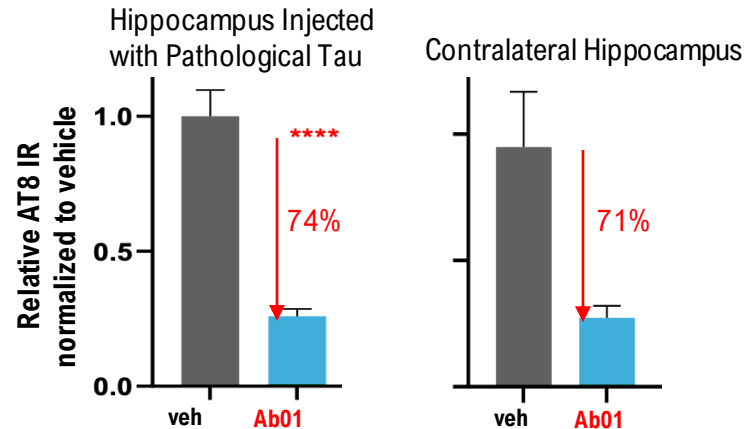


Note: Ab A targets N-terminus (aa15-24, IPN002)

Albert, *Brain*, 2019



Ab01 inhibits spread of pathological tau in mouse seeding model



Liu, *AAIC* 2022

Gene therapy approach to a validated target in ALS*

HIGH UNMET NEED + COMMERCIAL POTENTIAL

~20,000 people in U.S. **

~800 ALS patients have a
SOD1 mutation

Incidence: 1 in 50,000**

Existing treatments are
minimally effective;
disease is typically fatal
within 3 years of diagnosis

VALIDATED TARGET

SOD1

SOD1 mutations cause
toxic gain of function in
forms of familial ALS

Tofersen, under FDA review, is
an ASO targeting SOD1 that has
demonstrated clinical effect.
Gene therapy approach could
follow with more durable
solution.

EFFICIENT PATH TO PROOF-OF-BIOLOGY

SOD1 measurable in
CSF; plasma
neurofilament light
chain biomarkers
measurable in plasma

ROBUST PRECLINICAL PHARMACOLOGY

Preclinical data showed
robust SOD1 knockdown
and significant
improvements in motor
performance and survival

STATUS: Lead optimization underway

MILESTONE: ID lead candidate projected in H1 2023

SOD1 knockdown approach shows preclinical survival benefit in mouse models

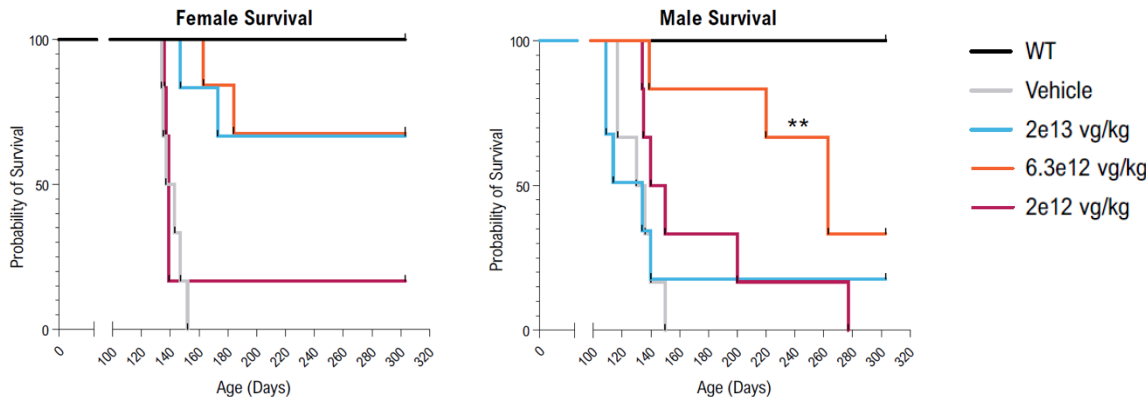
Strategy to combine highly potent siRNA construct with CNS-tropic, BBB penetrant TRACER capsid

- May enable broad CNS knockdown of SOD1, potentially addressing disease manifestations beyond the spinal cord

Promising preclinical results in mouse model

- Robust SOD1 knockdown in all levels of the spinal cord with IV dosing using a mouse BBB penetrant capsid
- Significant improvements in motor performance, body weight and survival

Increase in Survival



GBA1 gene replacement; partnered with Neurocrine Jan 2023

HIGH UNMET NEED + COMMERCIAL POTENTIAL

~1 million people in U.S.*

>10% of PD patients
have a GBA1 mutation

Potential to treat
idiopathic PD

VALIDATED TARGET

GBA1

GBA1 mutations increase
the risk of PD ~20-fold*

STATUS:

Lead optimization
underway

EFFICIENT PATH TO PROOF-OF-BIOLOGY

GBA1 mutations
decrease expression
of GCase protein,
leading to substrate
elevation.

GCase and substrate
measurable in CSF

MILESTONE: Advancing in collaboration with
Neurocrine

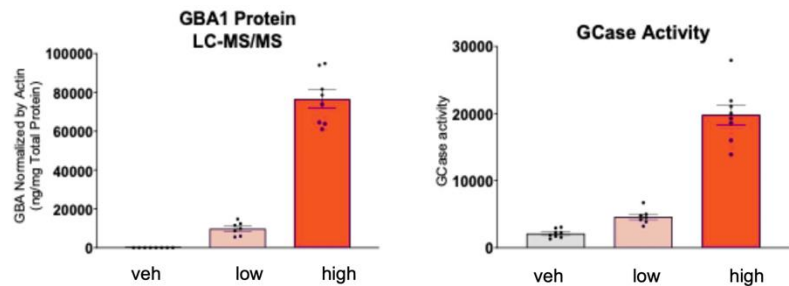
ROBUST PRECLINICAL PHARMACOLOGY

Preclinical data
demonstrate CNS target
engagement and delivery
of therapeutically relevant
levels of GCase in GBA
loss of function mouse
model.

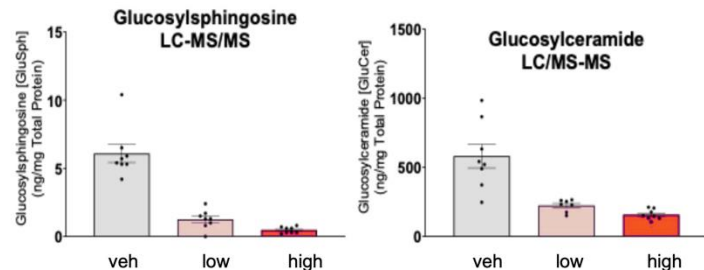
Restoration of GCase with IV-administered, BBB-penetrant AAV capsids

- BBB-penetrant AAV capsid provides *in vivo* proof-of-concept (POC) for increase in GCase with concomitant reduction of substrates
- Delivery of therapeutically relevant levels of GCase may disrupt disease process, and potentially slow neurodegeneration
- IV delivery with CNS-tropic capsid may enable widespread distribution to multiple affected brain regions and avoid need for more invasive approaches

GCase increased in GBA1 LOF mouse model



Substrate decreased in GBA1 LOF mouse model



HD gene therapy initiative leverages latest in disease biology

HIGH UNMET NEED + COMMERCIAL POTENTIAL

~41,000 people in U.S.*

Incidence: 0.7 in
100,000**

Currently no cure or
treatment that can halt,
slow or reverse HD*

VALIDATED TARGETS

Allele-specific mHTT

Target the mutant protein
while preserving the
healthy version, which may
improve safety profile

MSH3

DNA repair enzyme
potentially involved in
harmful DNA expansions in
the HTT gene

EFFICIENT PATH TO PROOF-OF-BIOLOGY

Leveraging emerging
fluid-based
biomarkers and
imaging

ROBUST PRECLINICAL PHARMACOLOGY

First-in-class approach
based on evolving
research on the role of
somatic expansion in HD

STATUS:

Voyager is developing a vectorized
siRNA approach to silence HTT allele-
specifically and MSH3

MILESTONE:

Early research initiative to determine if
advancement warranted

siRNA tau gene silencing approach for Alzheimer's disease

HIGH UNMET NEED + COMMERCIAL POTENTIAL

~6 million people in U.S.*

Multiple approaches

needed: Like oncology, combination treatment may improve outcomes (i.e. anti-amyloid + anti-tau, or multiple anti-tau approaches)

VALIDATED TARGET

Tau

Pathology closely correlates with disease progression and cognitive decline

siRNA gene silencing approach to lower tau within neurons (intracellular)

EFFICIENT PATH TO PROOF-OF-BIOLOGY

New tau PET tracers enable imaging for tau pathology and use as clinical biomarkers

ROBUST PRECLINICAL PHARMACOLOGY

New initiative leverages Voyager's tau expertise to target intracellular tau; may complement extracellular tau antibody

STATUS:

Voyager is optimizing siRNA tau gene silencing payloads

MILESTONE:

Early research initiative to determine if advancement warranted

Partnerships

Track Record of Non-Dilutive Revenue

Multiple partnership structures driving value



CAPSID LICENSES

PROVIDE:

- Validation (third-party buy-in, potential program use)
- Near-term funding (upfront and option exercise payments)
- Long-term funding (milestones and royalties)
- Multiple 'shots on goal' to prove human translation



PROGRAM PARTNERSHIPS

PROVIDE:

- Significant long-term potential value (profit share or milestones and royalties)
- Cost savings (program funding)
- Validation (investment into program)
- Near-term funding (upfront, early development milestone payments)



CREATIVE COLLABORATIVE STRUCTURES

PROVIDE:

- Opportunities to combine TRACER capsids and receptor technology with cutting-edge payloads and biologics, placing Voyager at forefront of neurogenetic medicine
- Various deal structures with range of participation being explored

DISCUSSIONS ONGOING

January 2023: Voyager strategic collaboration with Neurocrine for GBA1+

VOYAGER RECEIVES:

Strengthens balance sheet

Up-front consideration of \$175M (\$136M cash, \$39M equity purchase at 50% premium)

Secures program funding

Program costs fully reimbursed*

Transformational downstream value

Up to \$4.2B in potential milestones (\$1.5B development, \$2.7B commercial) + **royalties [%]**

- GBA: U.S. low double-digit to twenty; ex-U.S. high single-digit to mid-teen
- Rare CNS targets: U.S. high single-digit to mid-teen; ex-U.S. mid single-digit to low double-digit





Option to elect 50/50 cost/profit sharing in U.S.
for GBA1 program following Phase 1



NEUROCRINE RECEIVES:

Worldwide rights to Voyager's GBA1 gene therapy program for Parkinson's disease and other GBA1-mediated diseases* and three gene therapy programs directed to rare CNS targets, each enabled by Voyager's next-generation TRACER™ capsids, as well as a Board seat.

Existing partnership highlights

	Disease/Target (Cells, Tissues, Transgenes)	Upfront Payment	Potential Option + Option Exercise Fees	Potential Milestone Payments	Tiered Royalties
 NEUROCRINE BIOSCIENCES	GBA1 Program + 3 undisclosed targets	\$175 million (\$136 million cash; \$39 million equity)	N/A	\$4.2 billion	GBA, U.S. low double-digit to twenty; ex-U.S. high single-digit to mid-teen. Rare CNS targets, U.S. high single-digit to mid-teen; ex-U.S. mid single-digit to low double-digit
 NOVARTIS	2 undisclosed CNS targets (expandable to 2 additional rare CNS targets)	\$54 million	\$25 million – exercised, \$61 million potential expansion	\$600 million for exercised targets, \$600 million potential expansion	Mid- to high-single-digit
 Pfizer	1 undisclosed rare neurologic disease target	\$30 million	\$10 million – exercised	\$290 million	Mid- to high-single-digit
 NEUROCRINE BIOSCIENCES	Friedreich's Ataxia + 2 undisclosed targets	\$165 million (\$115 million cash; \$50 million equity)	N/A	\$1.3 billion	High-single-digit to high-teens in the U.S. and mid-single-digit to mid-teens ex-U.S.

Summary

Management team brings neurology and gene therapy expertise



Al Sandrock, M.D., Ph.D.
Chief Executive Officer



Robin Swartz
Chief Operating Officer



Todd Carter, Ph.D.
Chief Scientific Officer



Peter Pfreundschuh
Chief Financial Officer



Allen Nunnally
Chief Business Officer



Michelle Quinn Smith
Chief Human Resources Officer



Robert Hesslein
General Counsel



Trista Morrison
SVP Corporate Affairs



Recent highlights and upcoming milestones

Q3 2022	✓	Pfizer option exercised on capsid for rare neurologic target; \$10M payment
Q1 2023	✓	Neurocrine collaboration for GBA1 + 3 discovery programs; \$175M payment, potential \$4.4B deal
Q1 2023	✓	Launched updated HD early research initiative: allele-specific mHTT + MSH3 gene silencing
Q1 2023	✓	Selected lead candidate in anti-tau antibody program for Alzheimer's disease
Q1 2023	✓	Novartis option exercised on capsids for two CNS targets; \$25M payment
Q1 2023	✓	Launched Alzheimer's early research initiative: tau gene silencing
Q1 2023	○	AD/PD 2023 Conference: presenting data on GBA1 Parkinson's and anti-tau antibody programs
H1 2023	○	Expect to ID lead candidate for SOD1 ALS gene therapy
ONGOING	○	Advancing GBA1 Parkinson's and FXN Friedreich's Ataxia gene therapy programs with Neurocrine
ONGOING	○	Potential for additional value-creating partnerships; discussions ongoing



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