

FY2023 2Q Financial Results

The switch



is the Key

In case of any discrepancy,
the Japanese version shall prevail

MODALIS

Modalis therapeutics Corporation

(TSE : 4883)

August 7, 2023

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Modalis is a gene therapy company dedicated to translating evolutionary science into life-changing treatments for rare disease patients.

**The first CRISPR
based
gene modulation
Therapeutic
technology**

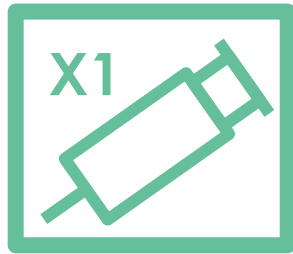
**Leading
company in
epigenetic
Modulation/
editing**

**Novel
precision medicines
for genetic disorders
for which
there have been
no cure**

Every life deserves attention

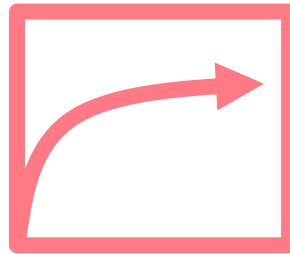
CRISPR-GNDM® is a promising new therapeutic modality

Potential benefits of CRISPR-GNDM® Technology



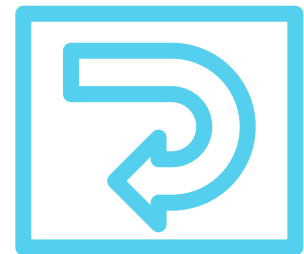
Single dose

Doesn't require
Repeated dosing



Long-lasting

Sustained effect
for years or decades



Disease Modifying

Not just to reduce
symptoms but
gives cure



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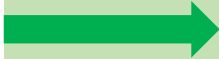
1. Key Topics

Modalis regains right of MDL-201 and 202 from Astellas

- Modalis regained the rights of MDL-201 and 202 from Astellas
- The target indications of the programs are DMD and DM1, respectively
- The market size of the indications is relatively large and Modalis will gain new revenue opportunities including new partnership
- Applying the know-how accumulated in the development of MDL-101 including the muscle tropic capsid, Modalis will strengthen the products
- As target engagement is confirmed in the NHP study of MDL-101, the company has confidence that the new version of the molecules that share the same vector system shall have extrapolated efficacy and safety.
- As new assets have been added, the company sharpened its strategy to put focus on 101 and 202.
- With this reacquisition, the company reorganize the pipeline to shift to muscular diseases where delivery and our know-how are well established
- The development of CNS programs will be resumed, subject to resource allowances while research continues.

Pipeline Status

As Modalis regains the rights of MDL-201 and 202, the pipeline was reorganized

Code	Indication	Ownership	Discovery/Preclinical			Clinical	
			Discovery Research	Lead Optimization	IND Enabling	Phase I/II	Pivotal
MDL-101	LAMA2-CMD*1	Modalis					
MDL-202	DM1 *2	Modalis					
MDL-201	DMD *3	Modalis					
MDL-103	FSHD *4	Modalis					
MDL-105	DCM*5	Modalis					
MDL-104	Tauopathy	Modalis					
MDL-206	Angelman Syndrome	Modalis					

*1: LAMA2-related congenital muscular dystrophy

*2: Myotonic Dystrophy Type 1

*3: Duchene Muscular Dystrophy

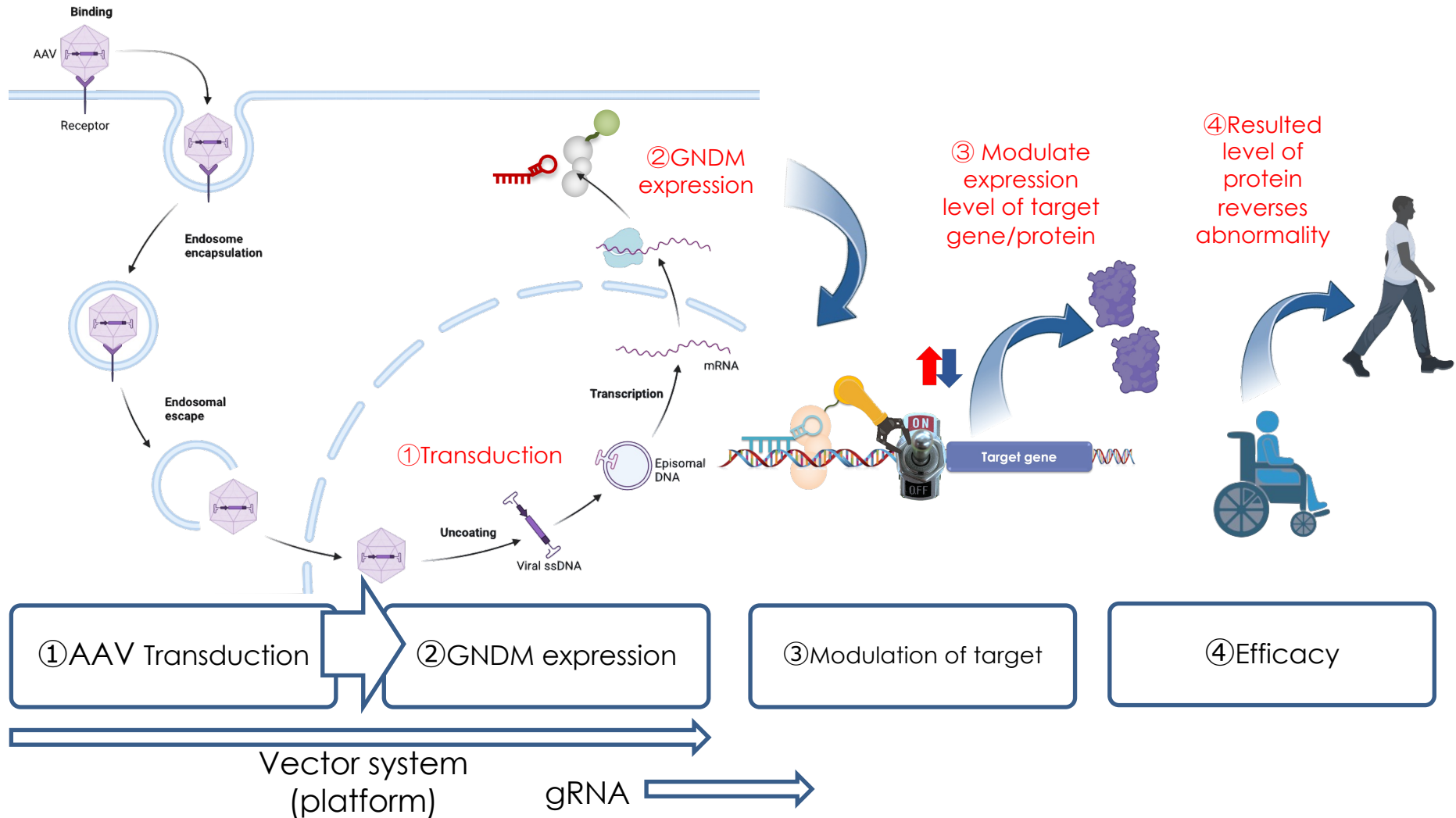
*4: facioscapulohumeral muscular dystrophy

*5: Dilated Cardiomyopathy

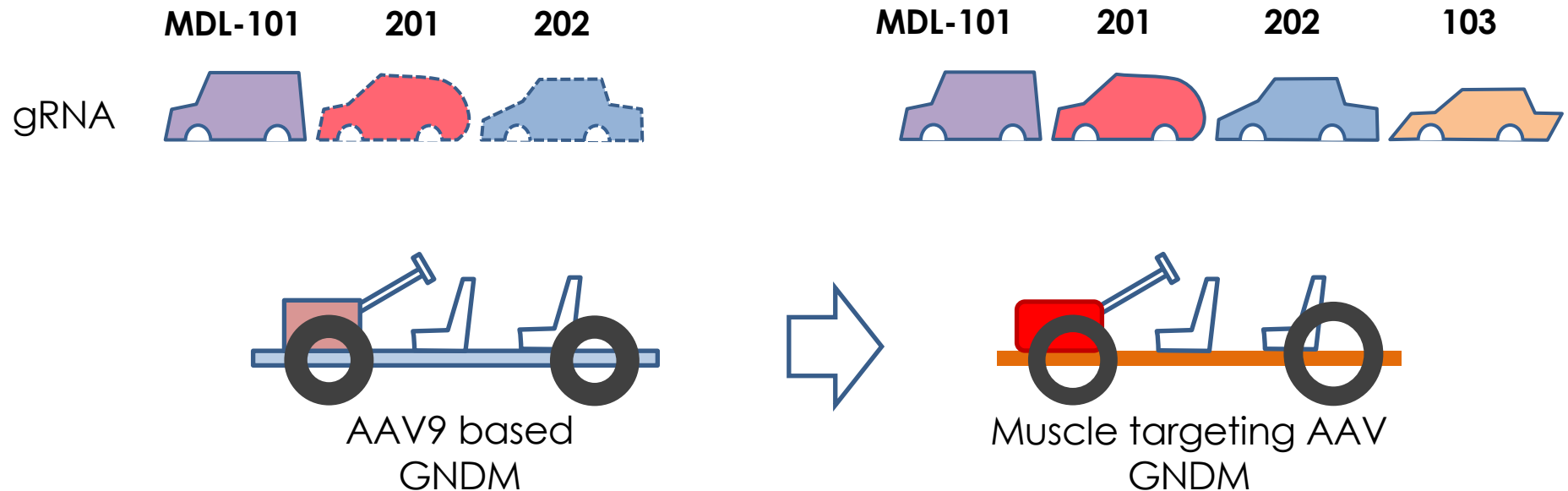
The other topics in pipeline reorganization

- Modalis adds MDL-103 which targets FSHD by silencing Dux4 gene and the company has incubated for years.
- CNS programs including MDL-104 have been deprioritized but continue to put in research effort.
- MDL-102 and MDL-205 was removed from the pipeline.

Among the 4 steps to demonstrate efficacy, 2 steps are common to the muscle programs and confirmed to function in NHP



Like MDL-101 which has already been transplanted to the new system, 201 and 202 will be transferred together with 103 to increase their potency



LAMA2-CMD (aka CMD1a)

Severe muscular dystrophy caused by loss of function mutation in LAMA2 gene

MDL-101

Potential to be the first-in-class and the first LAMA2-CMD treatment

Prevalence	1 in 30,000* 10,000 in US
Disease Onset	Apparent at birth or within a few months after birth
Disease Burden	Patients do not survive past adolescence • Severe muscle weakness • Lack of muscle tone (hypotonia) • Little spontaneous movement • Joint deformities (contractures) • Heart problems and seizures
Disease Causing Gene	LAMA2 mutation
Commercial opportunity	\$500M+

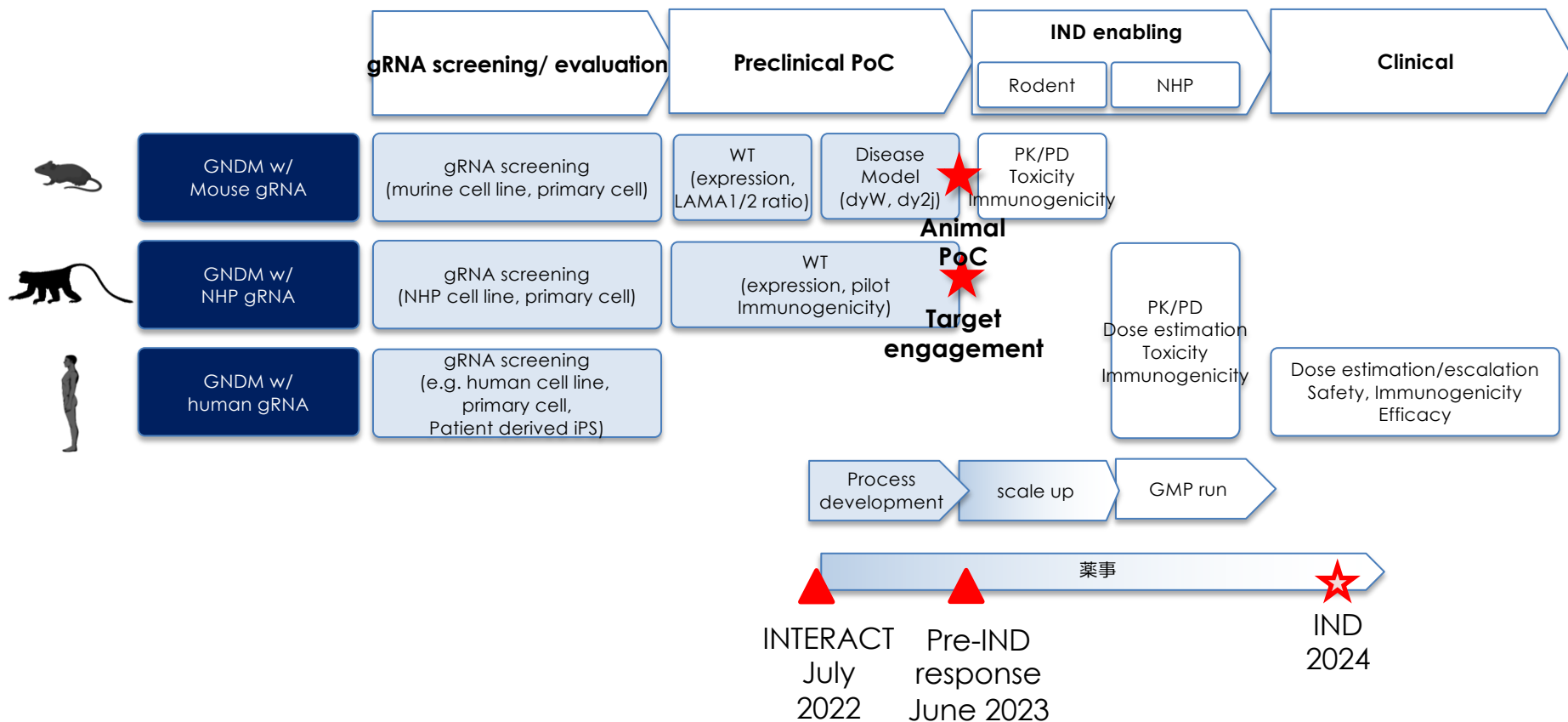
Source: *Ophanet #Modalis assumption based on prevalence and potential

Summary of MDL-101 for LAMA2-CMD

- Reported by 1Q/2023
 - Mouse model data in two disease strains (dy2j and dyW) and wildtype
 - Upregulation of LAMA-1 gene and protein along with GNDM expression
 - Improvement in biochemical and physiological readouts as well as prolonged survival
 - Sustained expression of GNDM in WT mice for 2 years
 - INTERACT meeting with FDA (Jul 2022)
 - Capsid change (Sep 2022)
 - Evaluation of new constructs with new capsids in rodents and NHPs (started in Dec 2022)
 - Redesigning the manufacturing process for the new version molecule
 - KOL meetings and drafting clinical synopsis and protocol
- Progress thereafter
 - **Received Pre-IND response from FDA (June)**
 - **Presented development updates of MDL-101 as a late-breaking abstract at ASGCT**
- Next steps:
 - Continue IND enabling GLP tox and PK/PD
 - Continue process development and pilot productions for GMP campaign

Conducting IND enabling studies as well as process development

Current status of MDL-101 and road map to clinic



Myotonic dystrophy type 1(DM1)

extension of CTG repeat in 3' UTR of DMPK gene

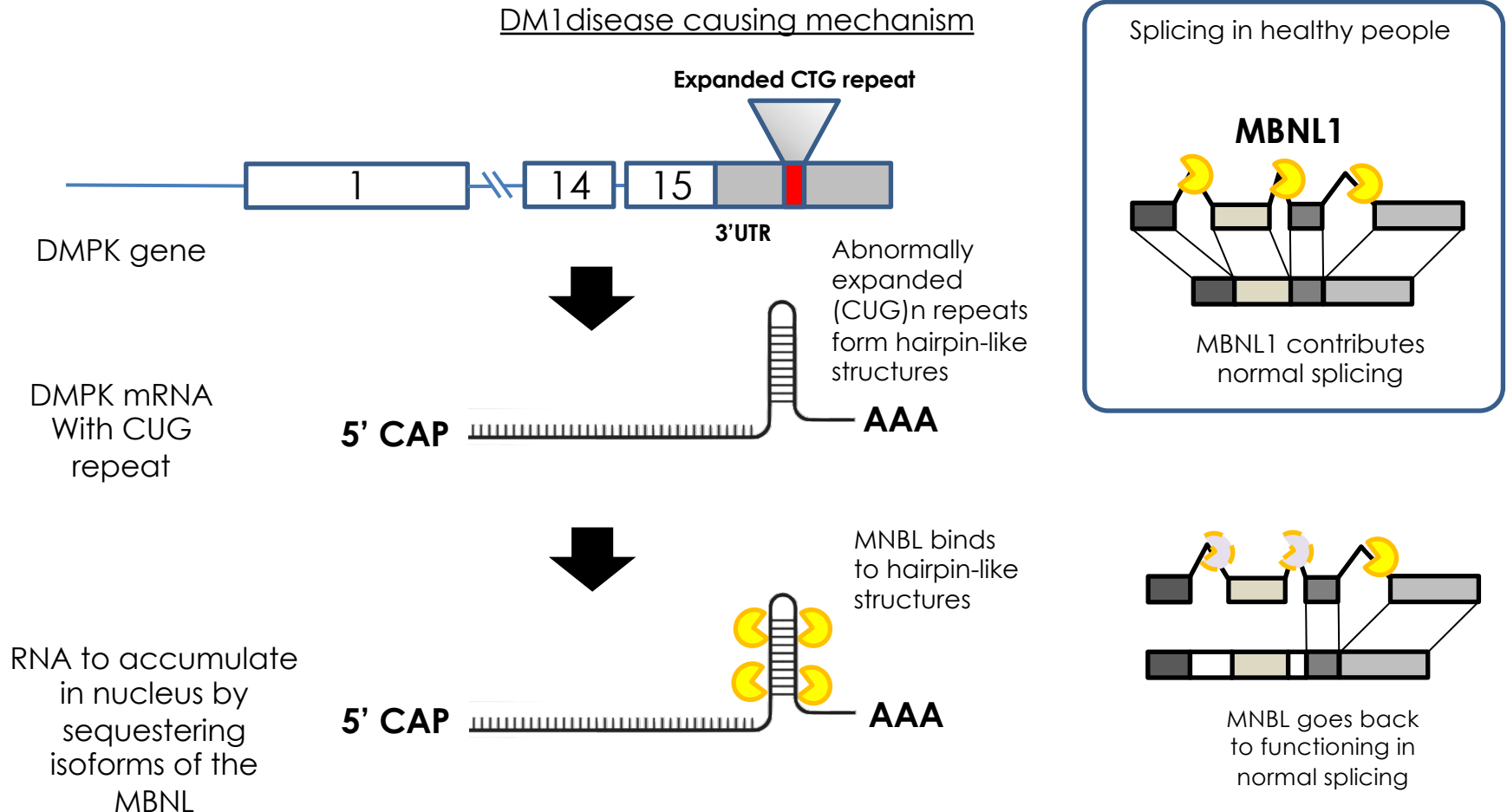
MDL-202

Potential to be the first-in-class and the first DM1 treatment

Prevalence	1-4.8 in 10,000 (1 in 2,300*)	DM is the most common muscular dystrophy among adults of European ancestry
Disease onset	DM1 can occur from birth to old age	Age at onset is between 20 and 70 years (typically onset occurs after age 40)
Disease Burden	muscle weakness and wasting (atrophy), myotonia	DM causes weakness of the voluntary muscles, although the degree of weakness and the muscles most affected vary greatly according to the type of DM and the age of the person with the disorder
Cause of disease	Microsatellite expansion in 3' UTR of DMPK gene	Extended CTG repeat capture MBNL1 protein which is essential for normal splicing
Market size	\$2.2B # By 2032	\$80M market as of 2022 without any treatment but is expected grow

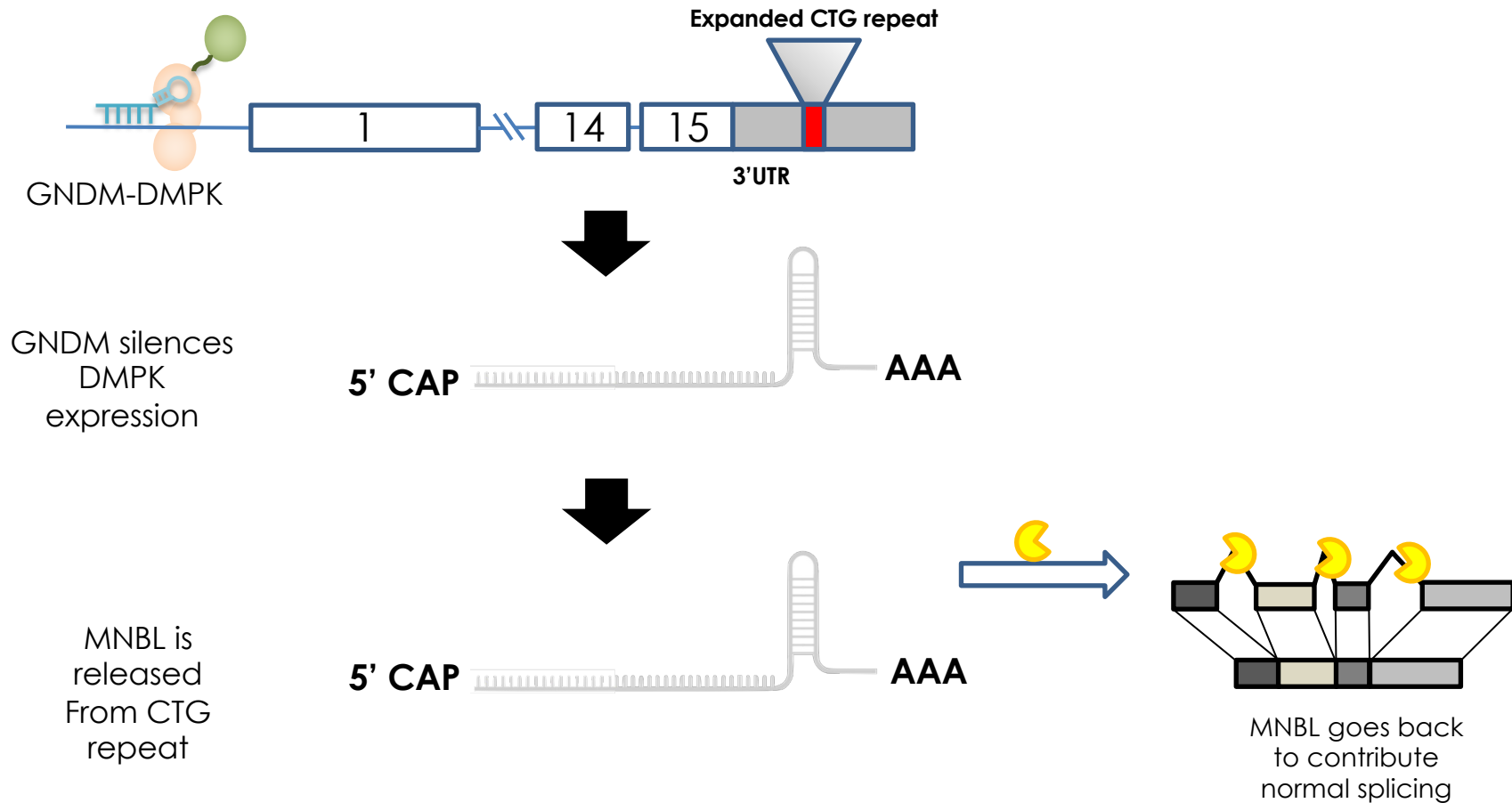
*Source: Myotonic Disease Foundation # DelveInsight (including both DM1 and DM2)

DM1 is caused by abnormal splicing rooted from CTG extension in 3'UTR of DMPK gene



MDL-202 silences DMPK expression and release splicing protein MNBL to function properly in muscle cells

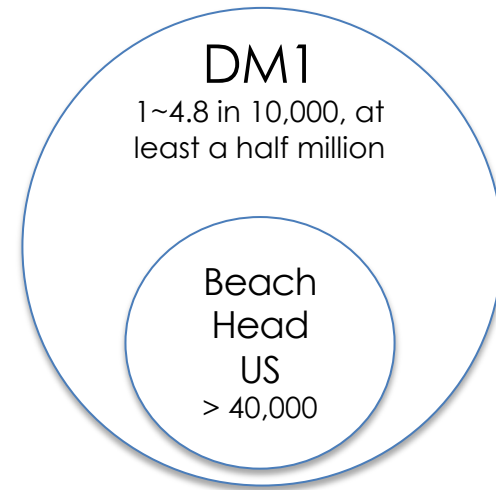
MDK-202's mechanism of action



DM1 has relatively large prevalence in muscular disorders

Prevalence of DM1

- Prevalence was estimated at 1 in 8,000-10,000, but recent population-wide screening estimated: mutation prevalence of 4.8 in 10,000 individuals
- DM1 can affect newborns to older adults
- US > 40,000 individuals (Japan > 10,000)



DM1: Myotonic Dystrophy Type 1

Source: Marta Pascual-Gilabert, The myotonic dystrophy type 1 drug development pipeline: 2022 edition

Duchenne Muscular Dystrophy (DMD)

A type of muscular dystrophy caused by mutation in Dystrophin gene

MDL-201

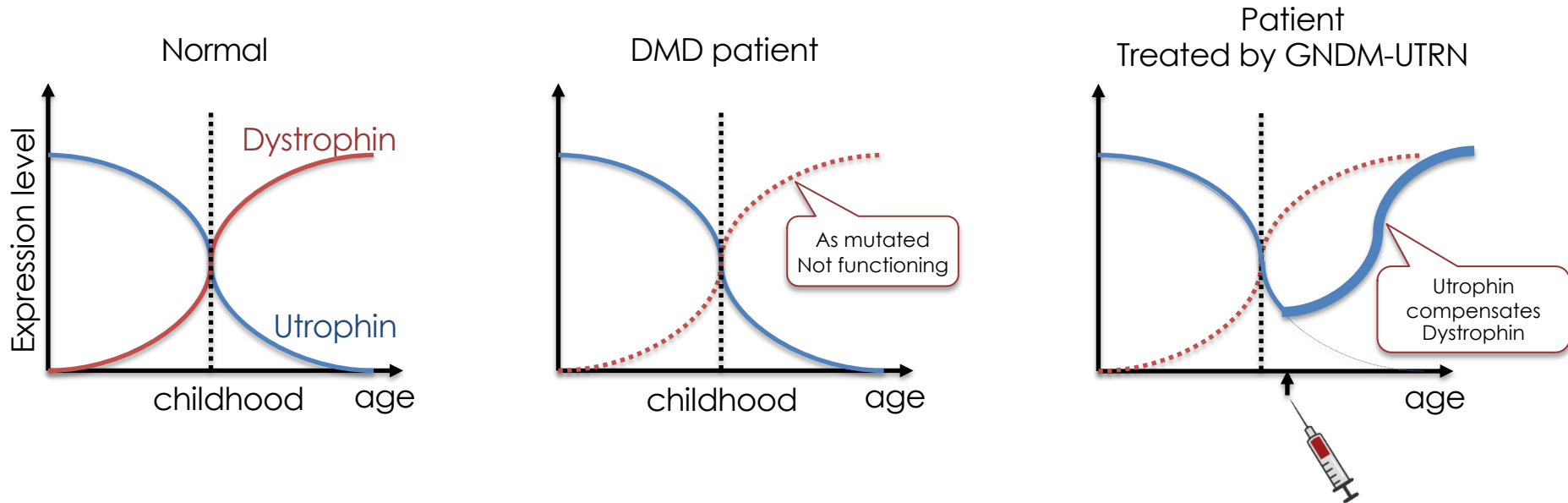
Potentially best-in-class molecule by rebooting UTRN gene expression by GNDM

Prevalence	1 in 3,500 to 5,000 male newborns	Relatively high in genetic disorders
Disease onset	most commonly appears between 3 and 6 years old	
Disease Burden	Most severe clinical symptoms of all the muscular dystrophies including muscles weakness and atrophy	Motor development begins to slow in early childhood and muscle weakness progresses, followed by cardiomyopathy, scoliosis, and respiratory complications
Cause of disease	Disruption or mutation in Dystrophin gene	Loss of dystrophin and abnormal histological development of muscle necrosis and regeneration
Market size	\$1.1BM 2022	Expected to grow at CAGR=42.5% with approval of new therapeutics

*Source: <https://doi.org/10.1212/WNL.00000000000011425>

UTRN-GNDM reactivate Utrophin gene to compensate non-functioning Dystrophin gene in DMD patient

Concept of GNDM-UTRN to re-activate UTRN gene



Facioscapulohumeral Muscular Dystrophy (FSH, FSHD)

A type of muscular dystrophy caused by impaired Dux4 gene expression

MDL-103

Potentially first-in-class treatment by silencing expression of toxic Dux4 gene product

Prevalence	1 in 10,000-20,000	Muscular dystrophy most frequent in adults
Disease Onset	Often not recognized until the 20s and tends to worsen during adolescence	Progression of disease to face, shoulders, and arms is generally slow
Disease Burden	weakness of the facial muscles, the stabilizers of the scapula, or the dorsiflexors of the foot	Symptoms of asymmetrical (unbalanced) muscle weakness Visual impairment, vascular abnormalities, hearing impairment, etc.
Disease Causing Gene	Over expression of Dux4 gene	DUX4 is originally expressed in germline cells but need to be suppressed in somatic cells
Commercial opportunity	\$500M+	

Source: <https://doi.org/10.1212/WNL.00000000000011425>

Orphanet, Raymond A. Huml MD A concise guide

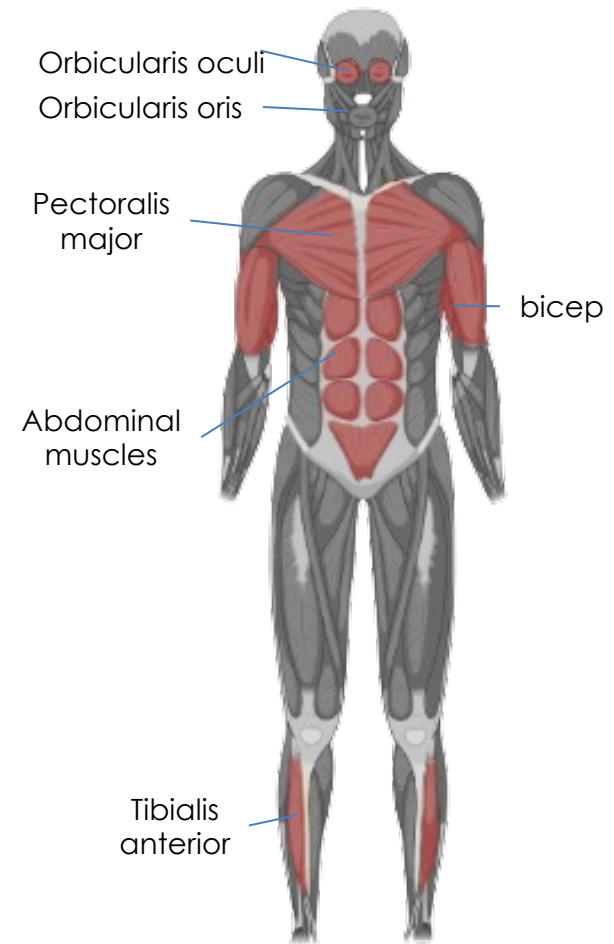
FSHD is a genetic muscle disorder in which the muscles of the face, shoulder blades and upper arms are most affected

Facioscapulohumeral muscular dystrophy (FSHD) is the **most common** autosomal dominant form of muscular dystrophy, affecting approximately **1 in 8000** individuals worldwide.

FSHD usually **begins before age 20**, with weakness and atrophy of the muscles around the eyes and mouth, shoulders, upper arms and lower legs. Later, weakness can spread to abdominal muscles and sometimes hip muscles.

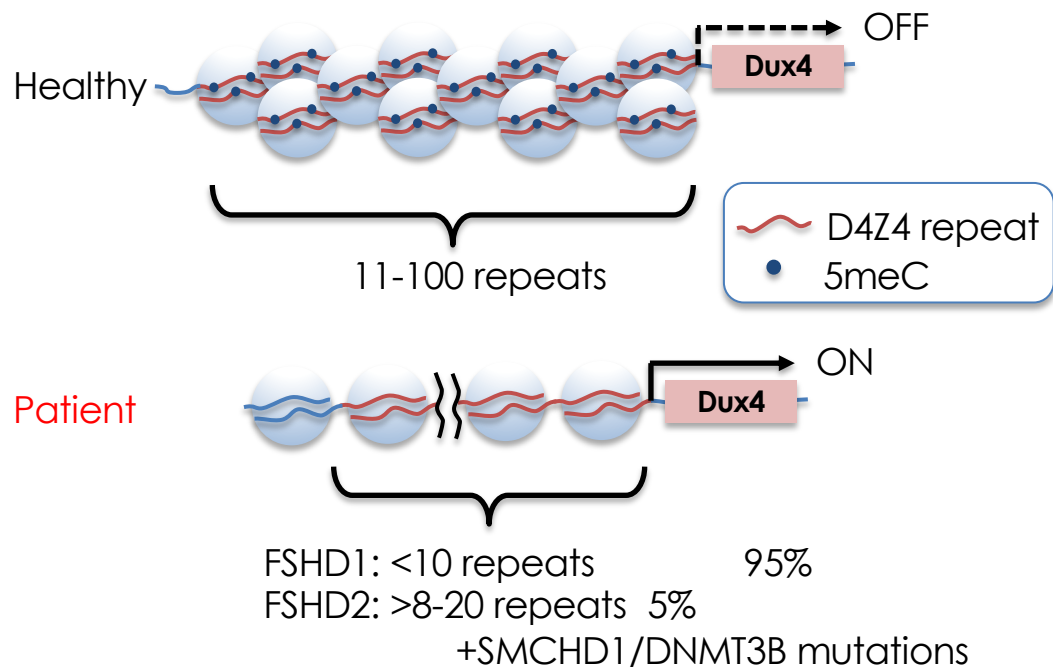
Some experts divide FSHD into **adult-onset** and **infantile-onset** forms. The adult-onset is far more common.

Currently no curative treatment option exists



FSHD disease mechanism

Inappropriate expression of Dux4 in skeletal muscles



- The D4Z4 repeat region at location 4q35 on chr4
- Healthy has numerous highly **methyated** D4Z4 repeats
- FSHD-1 and -2 affected has **hypomethylated** D4Z4 repeats.
- FSHD-1 non-manifesting, or unaffected has few repeats, but these have **higher methylation**

What has been achieved and coming next

	What has been achieved	What's coming next
MDL-101 LAMA2-CMD	• Animal PoC in disease model mice • Target engagement in NHP • Pre-IND with FDA (June 2023) • Presentation at ASGCT 2023	• GLP-Tox • GMP manufacturing • IND (2H 2024)
MDL-202 DM1	• Animal PoC in disease model mice • Regain rights from Astellas	• Transplantation to muscle tropic capsid • Target engagement in NHP with new version molecule • Partnering
Other	• MDL-201 (DMD) • MDL-103 (FSHD) • MDL-105 (DCM) • CNS programs	• Transplantation to muscle tropic capsid • Animal PoC (FSHD, DCM)0 • Target engagement in NHP with new version molecule • Partnering • Continuing research • Explorer neurology capsids and LNPs • Partnering

Other updates on business

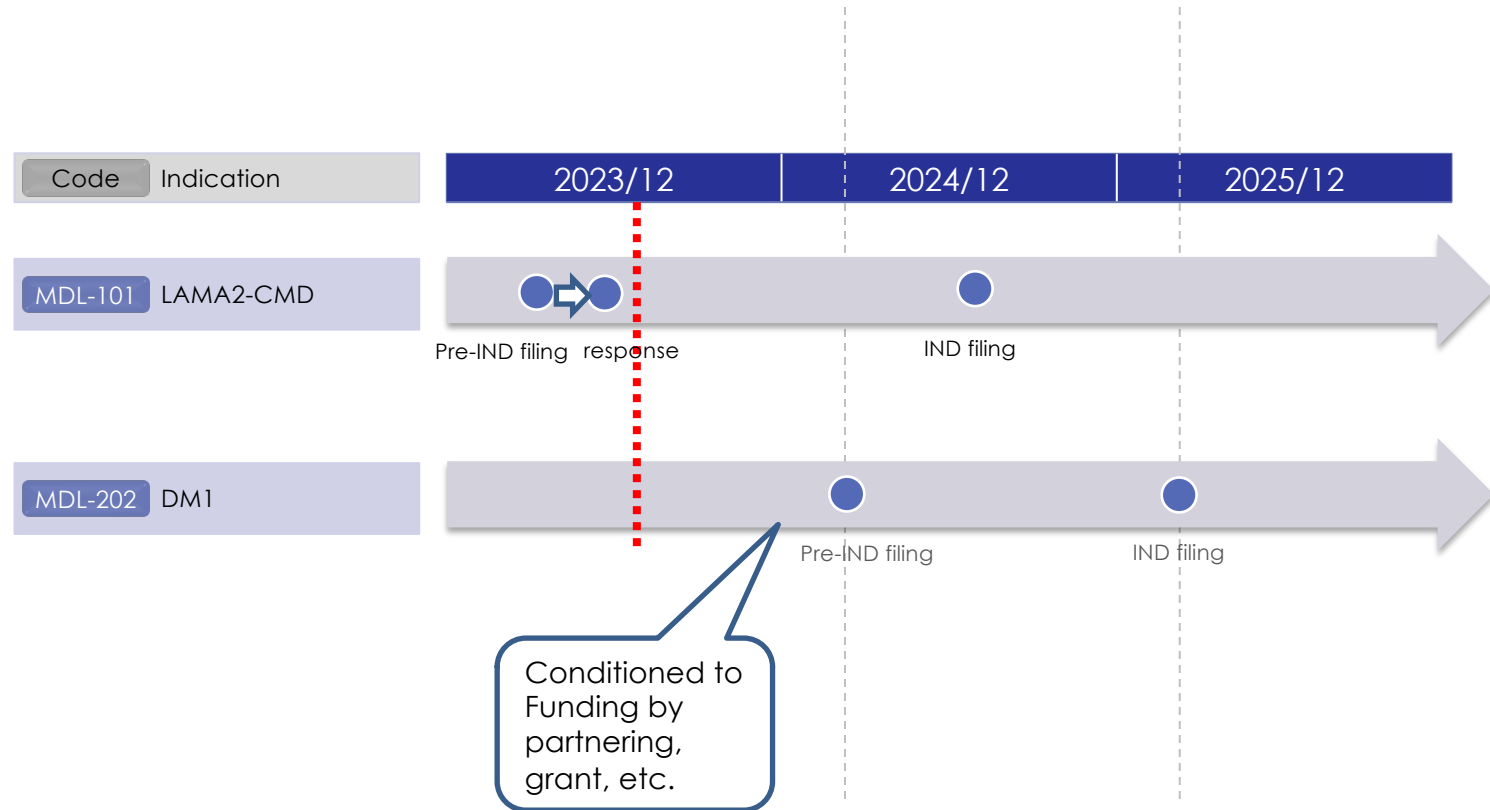
- Progress on intellectual property
 - Regained rights of MDL-201 and MDL-202 from Astellas Pharma Inc by Asset Purchase Agreement

- Progress on partnering
 - Partnering discussion ongoing with pharma/biotech companies with the new MDL-101 data
 - Concurrent with the development activity of MDL-202 with the newer version of construct, the company started to explore new partner for the molecules
 - Research collaboration: In discussion with pharma/biotech companies on new targets

2. Financial Highlights

Status of the focused pipeline

As regained rights of MDL-201 and 202, reorganized pipelines and put higher priority on muscle disorder programs



* Scheduled milestone events are informational in the future and subject to change

PL & Business Result

(Million Yen)

	FY2022 2Q (A)	FY2023 2Q (B)	(B) – (A)
Operating revenue	40	-	(40)
Operating expenses	908	1,044	136
R&D	778	906	128
SGA	130	138	8
Operating income	(868)	(1,044)	(176)
Ordinary income	(780)	(995)	(215)
Current Profit	(775)	(1,033)	(258)

Operating expenses

- R&D increased year on year as business progressed (primarily in personnel expenses, research material expenses, rent fee, expenses for conducting clinical trials of MDL-101 and yen depreciation against US dollar)

Extraordinary loss

- Impairment loss on fixed assets

SGA: Selling and Generally Administrative Expenses

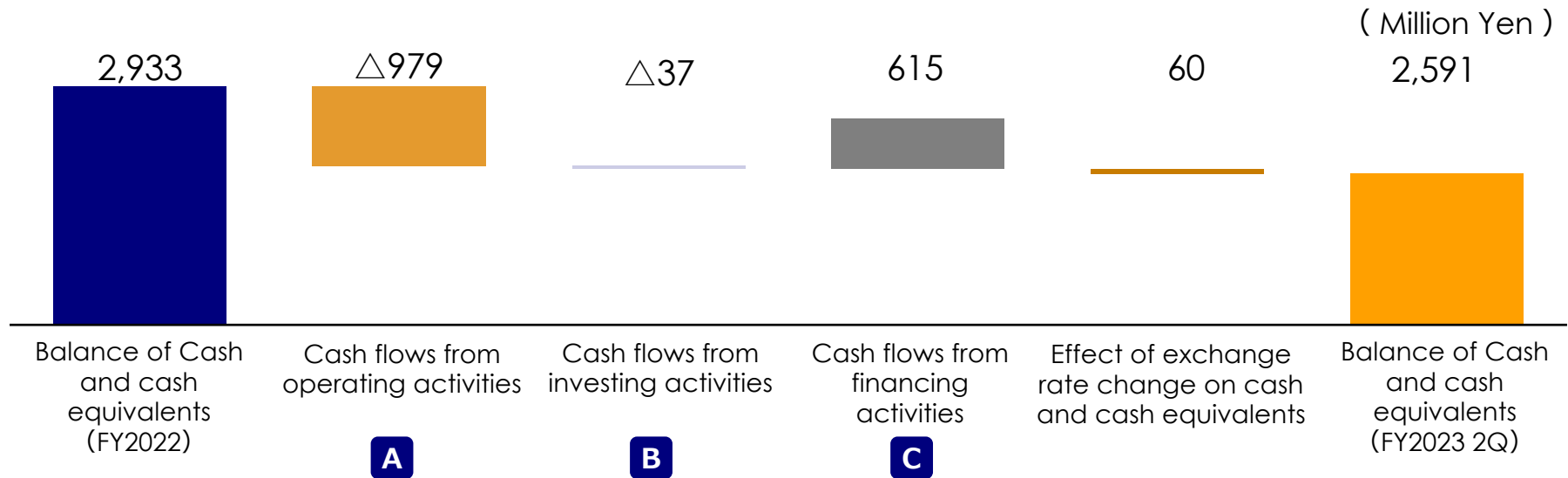
BS & Financial Position

(Million Yen)

	FY2022 (A)	FY2023 2Q (B)	(B) – (A)
Current assets	3,061	2,782	(279)
Cash & deposits	2,933	2,591	(342)
Non-current assets	68	72	4
Total assets	3,129	2,855	(274)
Current liabilities	141	278	137
Non-current liabilities	47	45	(2)
Total liabilities	188	323	135
Total net assets	2,941	2,532	(409)
Total liabilities and net assets	3,129	2,855	(274)
Capital adequacy ratio	93.4%	88.0%	

- High Equity ratio
Under financing to secure a more stable financial base
- Decrease in property, plant and equipment and intangible assets due to impairment loss

Cash Flow Status



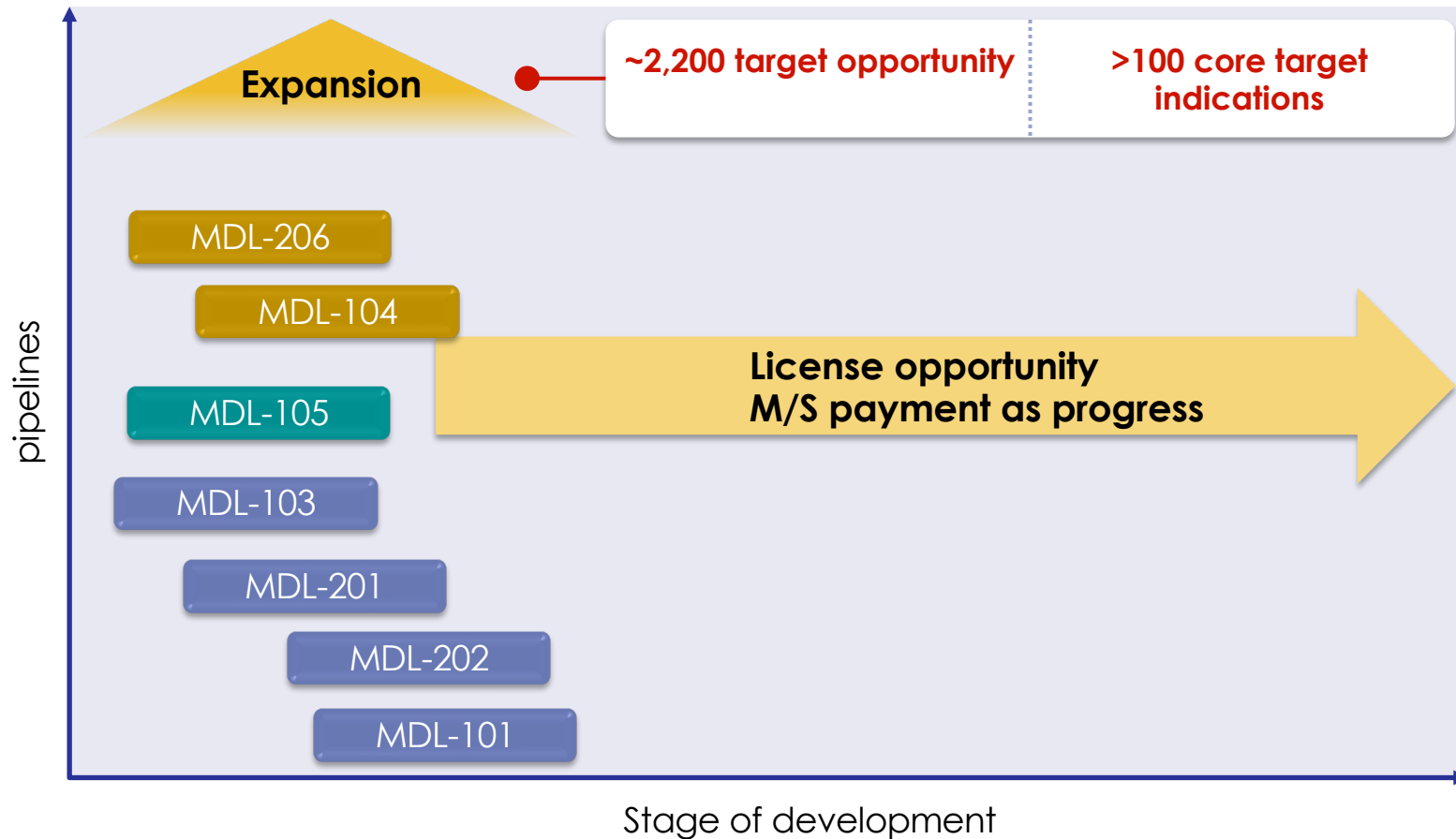
A Cash flows from operating activities	• Loss before income taxes (△1,032) • Impairment loss (37)
B Cash flows from investing activities	• Purchase of property, plant and equipment (△37)
C Cash flows from financing activities	• Proceeds from issuance of stock acquisition rights (618)

3. Growth Strategy

Growth Strategy

opportunity expands two dimensionally

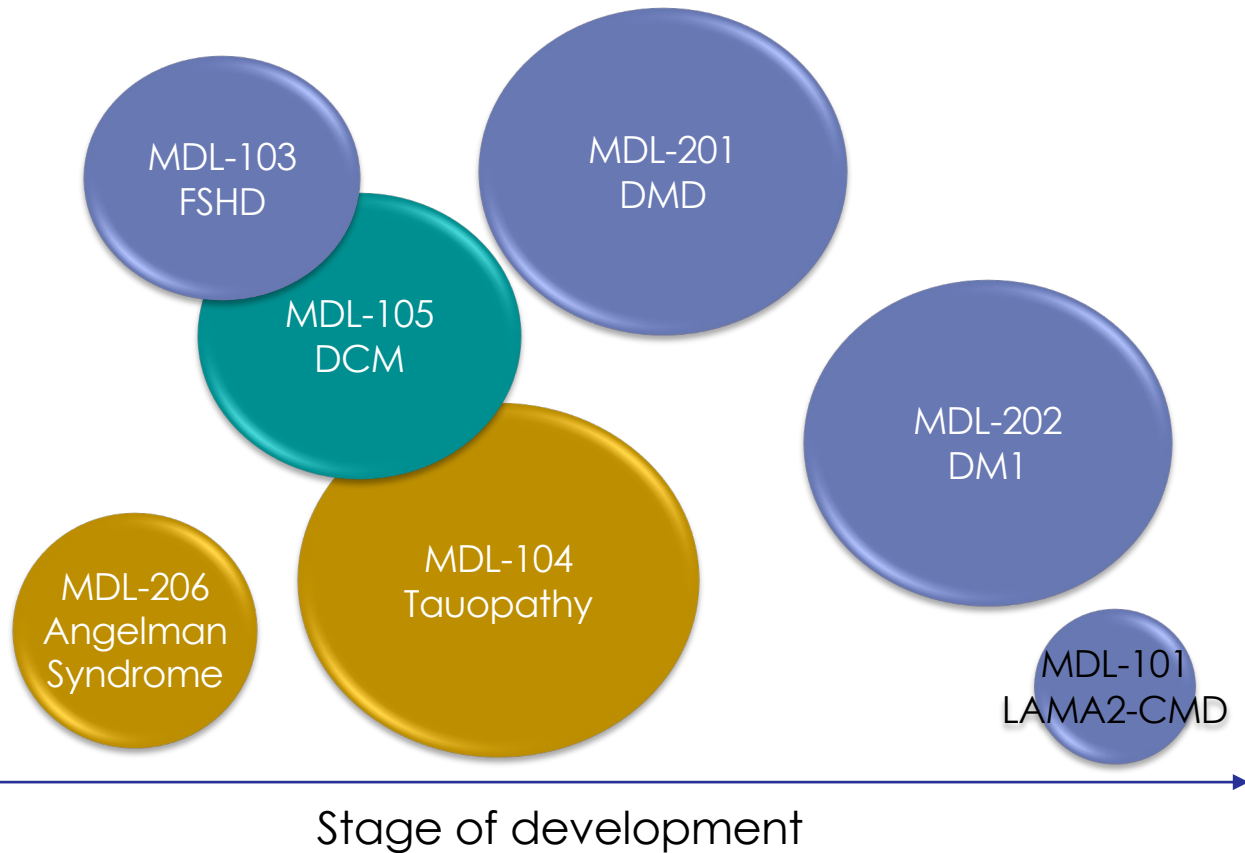
Potential Growth for GNDM technology



Modalis' pipelines and market size

Large indication programs follow MDL-101 which paves the clinical path

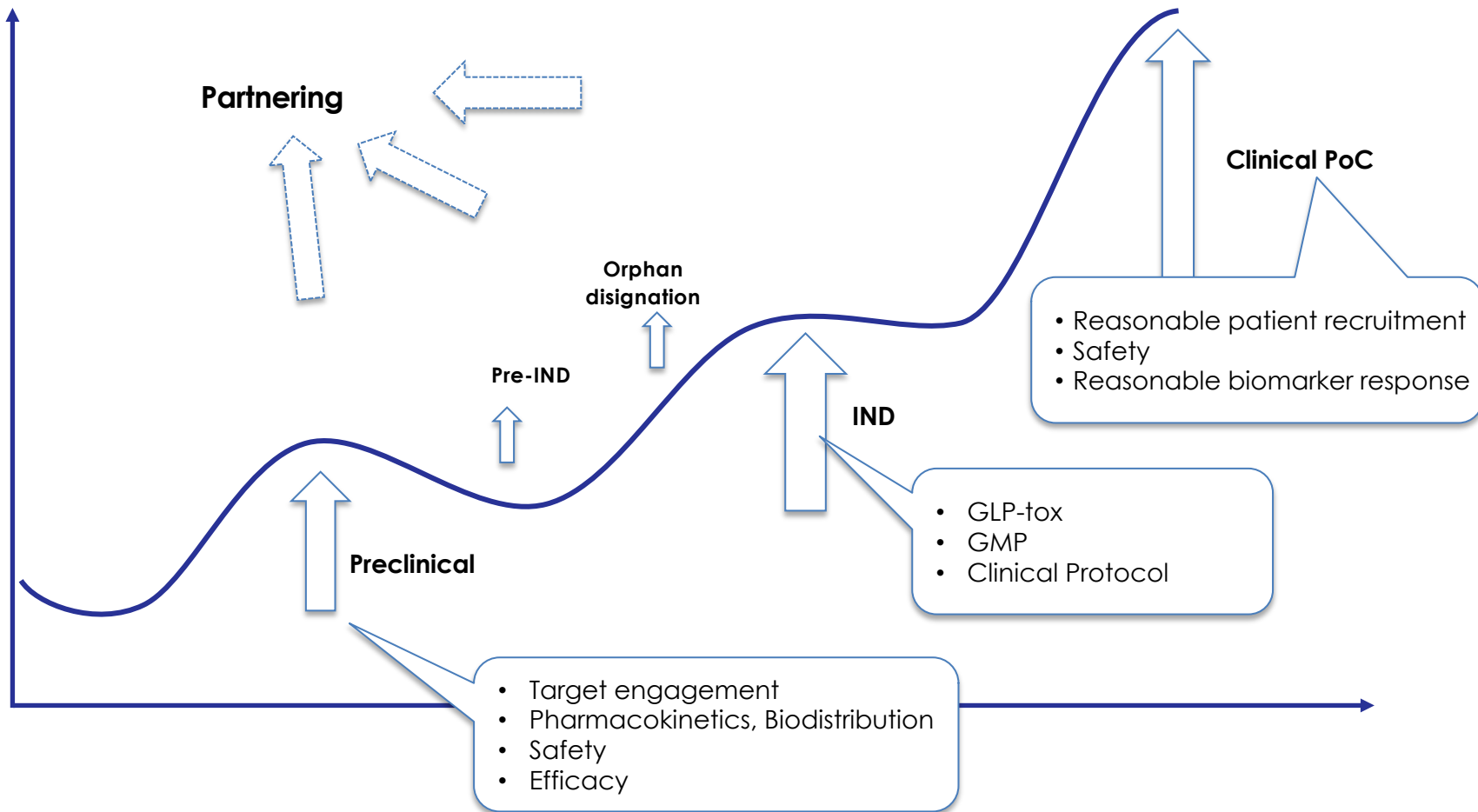
Modalis' pipelines and market size



※ Size of circles represents an image of market size or patient number of each indication

Future pre-clinical and clinical trials are expected to increase the value of the company.

Expected milestone events and impact on corporate value



Modalis is uniquely positioned within the CRISPR field

	Editing Gene base	Modulation (epigenetic editing)
CRISPR	Editas CRISPR Tx Intellia BEAM	 Tune Chroma EpicBio
Other (e.g. ZFN)	Sangamo	Encoded

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