



2024 Jefferies London Healthcare Conference

November 19, 2024

Forward-Looking Statements

This Presentation contains forward looking statements that involve substantial risks and uncertainties. All statements, other than statements of historical facts, contained in this Presentation, including statements regarding our clinical development plans, strategy, future operations, future financial position, prospects, plans, and objectives of management, are forward looking statements. The words “anticipate,” “believe,” “continue,” “could,” “estimate,” “expect,” “intend,” “may,” “plan,” “potential,” “predict,” “project,” “target,” “should,” “would,” and similar expressions are intended to identify forward looking statements, although not all forward looking statements contain these identifying words. We may not actually achieve the plans, intentions, or expectations disclosed in these forward looking statements, and you should not place undue reliance on these forward looking statements. Actual results or events could differ materially from the plans, intentions and expectations disclosed in these forward looking statements. In addition, the forward looking statements included in this Presentation represent our views as of the date of this Presentation. We anticipate that subsequent events and developments will cause our views to change. However, while we may elect to update these forward looking statements in the future, we specifically disclaim any obligation to do so. These forward looking statements should not be relied upon as representing our views as of any date subsequent to the date of this Presentation.

This Presentation discusses our product candidates that are under preclinical study and in clinical trials, and which have not yet been approved for marketing by the U.S. Food and Drug Administration. No representation is made as to the safety or effectiveness of our product candidates for the therapeutic use for which they are being studied.

This Presentation also contains estimates and other statistical data made by independent parties and by us relating to market size and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such data and estimates. In addition, projections, assumptions and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk.

This Presentation shall not constitute an offer to sell or the solicitation of an offer to buy securities.

Leading Clinical Stage Next Generation AAV Company

PROVEN Platform

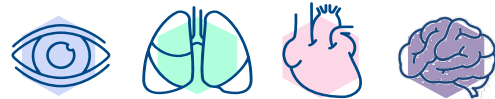
**DIRECTED
EVOLUTION:
~1B VECTOR
SEQUENCES**
Nobel Prize-Winning
Technology

NEXT GENERATION
Vector Discovery &
Payload Design

ROBUST Product Engine

MODULAR
Gene Delivery Vectors

**4 THERAPEUTIC
AREAS**



3 ROUTES OF ADMIN
Intravitreal
Aerosol
Intravenous

STRONG Clinical Data

**4D-150 BROAD
PROOF-OF-CONCEPT**
*Potential Best-in-Class Safety
for IVT Delivery:*
Enables Development & Commercial
Potential for Entire
Wet AMD Population

4D-710 & 4D-310
Demonstrated
Promising Transduction &
Early Clinical Signals

LATE-STAGE Capabilities

**WORLD CLASS
SENIOR RETINA TEAM**
Six Approvals & Five Launches of
Major Products

GMP MFG EXPERTISE
Hybrid & De-Risked

COMMERCIAL
Development Strategy for
Transformational Products in Large
Markets

\$551M cash* as of September 30, 2024; Runway through H1 2027

*Includes cash equivalents and marketable securities (unaudited)

World Class Senior Ophthalmology Leadership Team:

100+ Years of Experience with Six Approvals & Five Launches of Major Products



Robert Kim, MD

Chief Medical Officer

30+ years

Clinical Science, Clinical Operations,
Early- & Late-stage Clinical Development



Apellis

LUCENTIS
RANIBIZUMAB INJECTION

Beovu
(brolucizumab-dbl)
Injection



SYFOVRE
(pegcetacoplan injection)



Dhaval Desai, PharmD

Chief Development Officer

20+ years

Late-stage Product Development,
Medical Affairs & Scientific
Communications

**IVERIC
BIO**
An Astellas Company



izervay
(avacincaptad pegol
intravitreal solution) 2 mg

Beovu
(brolucizumab-dbl)
Injection



Christopher Simms

Chief Commercial Officer

25+ years

Pre-commercial & Commercial,
Pre-launch Preparations & Development

**IVERIC
BIO**
An Astellas Company



izervay
(avacincaptad pegol
intravitreal solution) 2 mg

LUCENTIS
RANIBIZUMAB INJECTION

Genentech
A Member of the Roche Group

Beovu
(brolucizumab-dbl)
Injection



Carlos Quezada-Ruiz, MD, FASRS

SVP, Therapeutic Area Head, Ophthalmology

20+ years

Leads Ophthalmology R&D, Early- & Late-
stage Clinical Development

Genentech
A Member of the Roche Group



VABYSMO
faricimab-svoa injection 6 mg











susvimo
ranibizumab injection 100 mg/ml
For Ocular Implant

LUCENTIS
RANIBIZUMAB INJECTION

Genetic Medicines Face **Significant Barriers** to Realize Their Potential & Achieve Sustainable Commercial Success

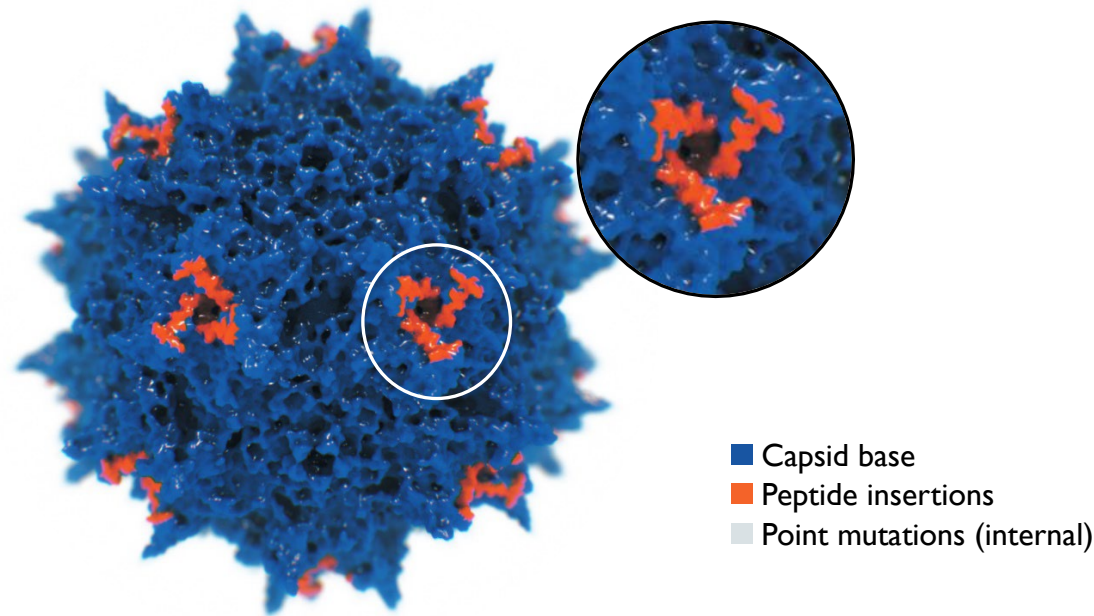
Characteristics:	Barriers for Conventional Genetic Medicines
Diseases(s) Targeted	✘ Low Prevalence & Incidence
Route of Delivery & Safety Risk	✘ Complex (Surgical, Systemic) Unpredictable safety
Pivotal Trial	✘ Reliance on Creative Pathways
Manufacturing	✘ High Doses & COGS
Commercial Potential	✘ High Prices = Payor Barriers & Limited Global Potential

4D-I50 Designed to be **the First Widely Adopted Genetic Medicine** in a Large Market Disease (Wet AMD & Beyond)

Characteristics:	Barriers for Conventional Genetic Medicines	4D-I50 Profile
Diseases(s) Targeted	 Low Prevalence & Incidence	 High Prevalence, Sustainable Incidence
Route of Delivery & Safety Risk	 Complex (Surgical, Systemic) Unpredictable safety	 In-Office IVT Favorable Safety Comparable to SoC
Pivotal Trial	 Reliance on Creative Pathways	 Aligned with Precedent Registration Studies and Global Agencies
Manufacturing	 High Doses & COGS	 Low Doses & COGS (<\$500/dose)
Commercial Potential	 High Prices = Payor Barriers & Limited Global Potential	 Competitive Pricing = Lower Payor Barriers & High Global Potential

4D-150 Designed for Sustained Intraretinal Expression of Anti-VEGF & Blockade of VEGF-C Production

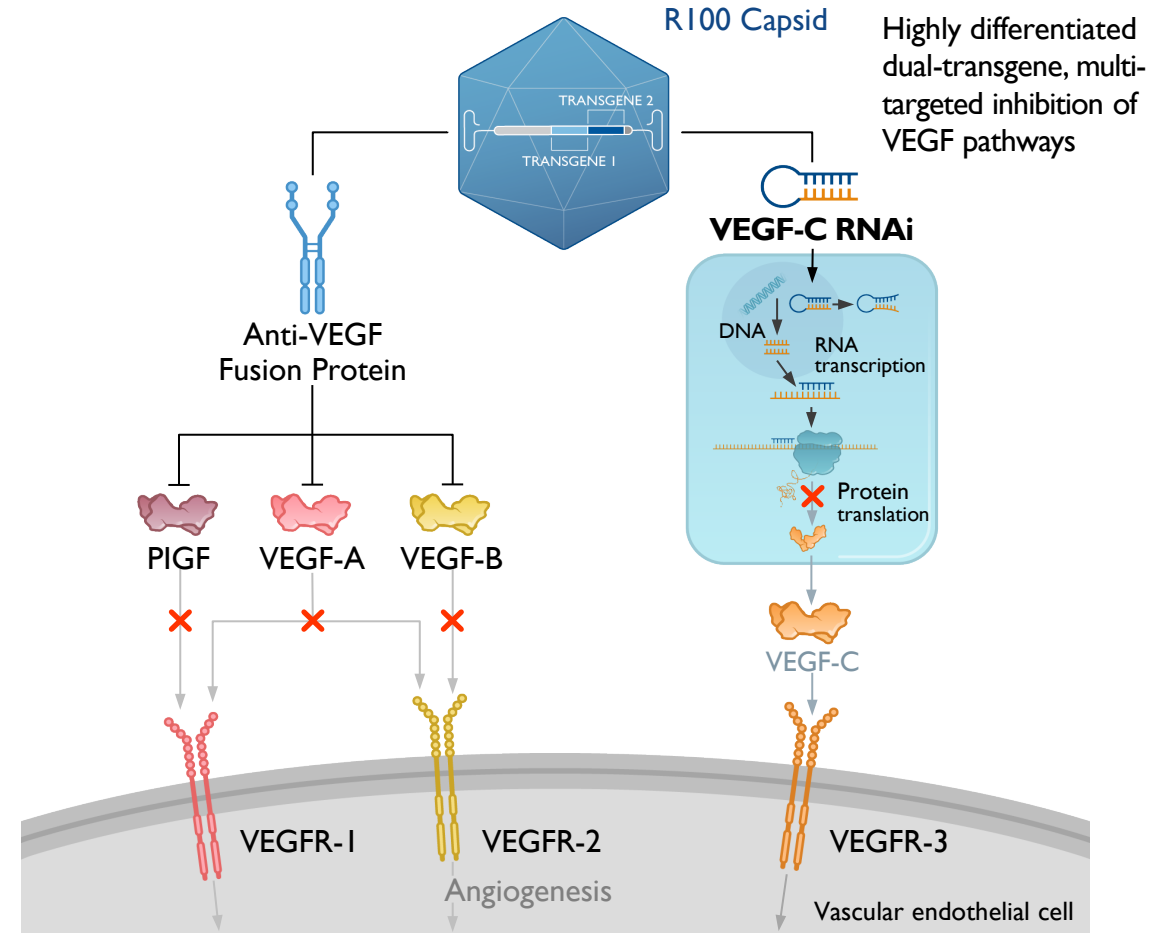
R100 Capsid



- ✓ Minimal inflammation potential, predictable prophylaxis
- ✓ Robust delivery to multiple retinal layers
- ✓ Durable expression of transgenes

Abbreviations: ILM, inner limiting membrane; NHP, nonhuman primate; RPE, retinal pigment epithelium.

4D-150



Wet AMD Population Matters:

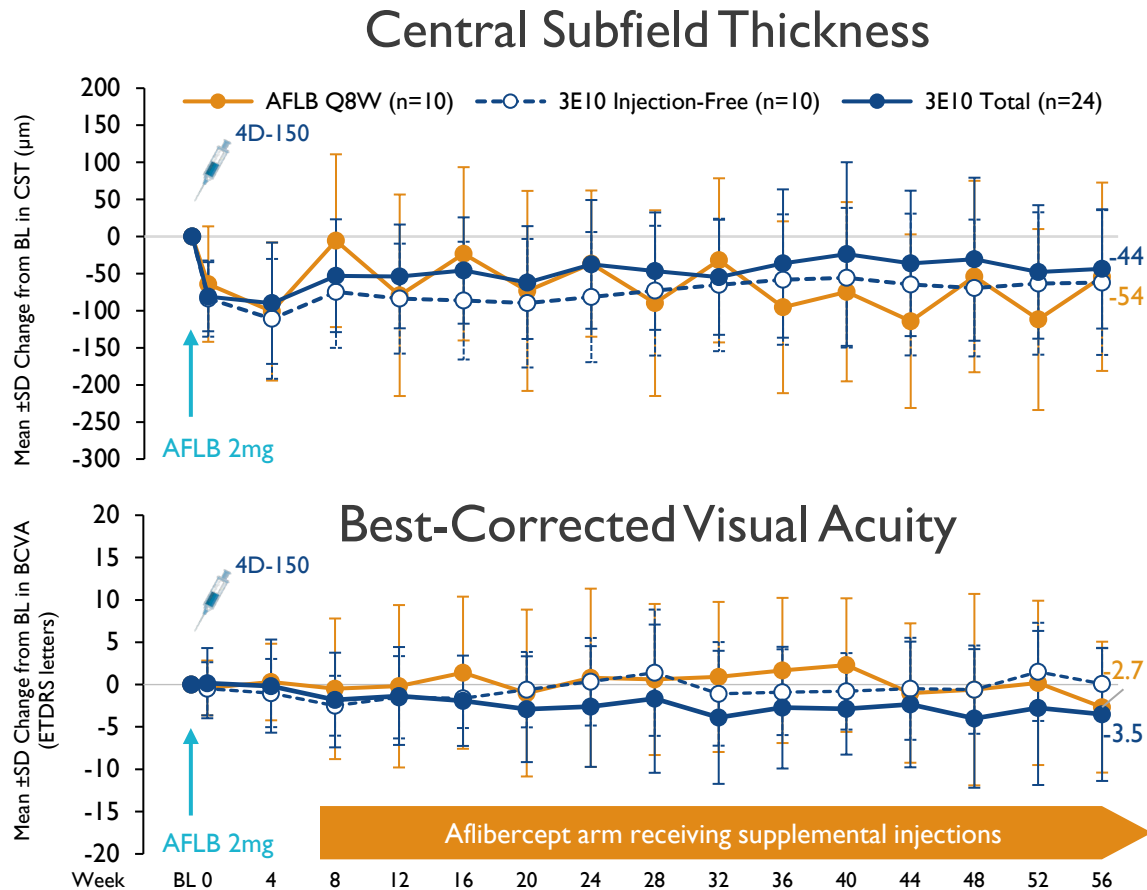
Phase 1/2 Program Studied a Broad Range of Disease Severity

	<p>Phase 1/2a Dose Exploration & Expansion</p>	<p>Phase 2b Population Extension</p>	<p>Phase 2b Subgroup Population Extension</p>
<p>Wet AMD Population</p>	<p>Severe ~10 prior injections L12M >400 μm CST Mean time since Dx: 3.7 years</p>	<p>Broad ~4-5 prior injections L12M <350 μm CST Mean time since Dx: 1.8 years</p>	<p>Recently Diagnosed (≤ 6 months) ~3 prior injections L12M ~300 μm CST Mean time since Dx: 0.2 years</p>

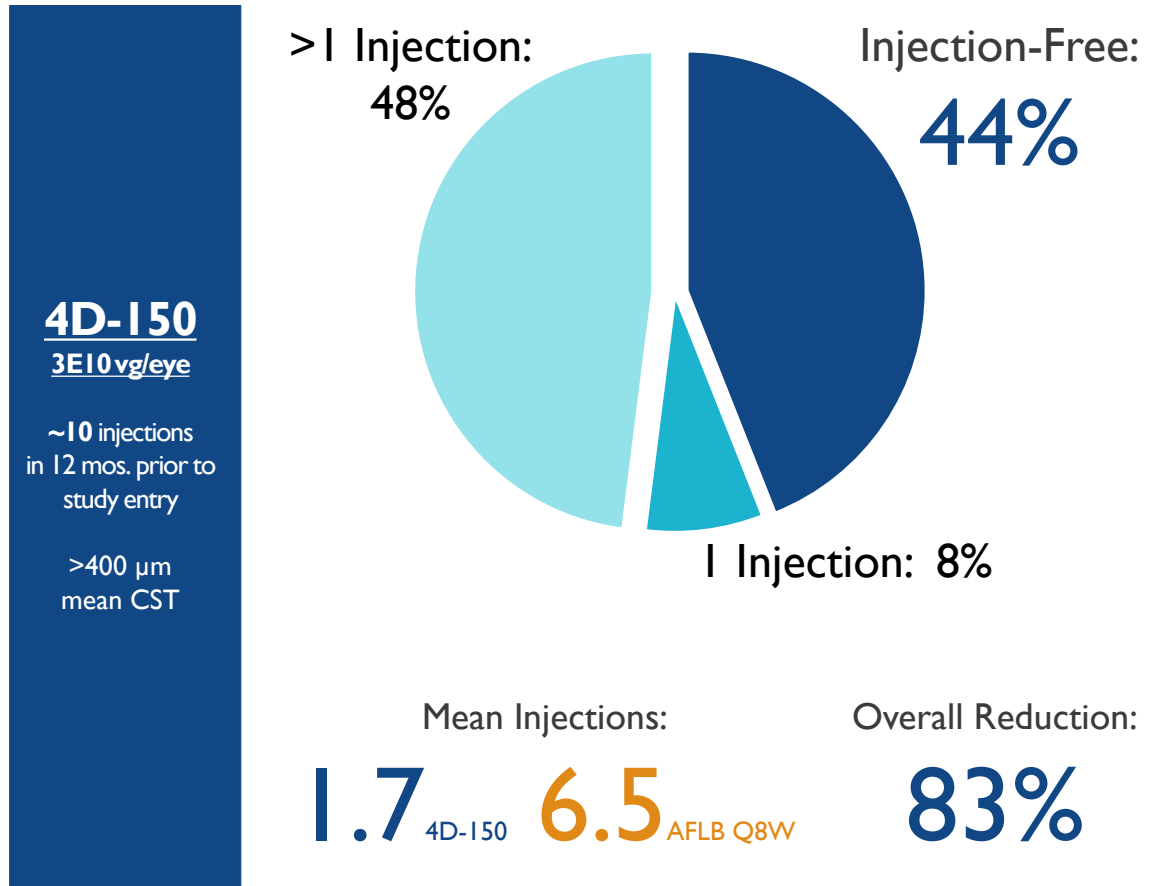
4D-150 vs. Aflibercept in Severe Wet AMD Population (Phase I/2a)

Anatomy & Visual Acuity Stable & Comparable to AFLB 2mg Q8W with Robust Reduction in Treatment Burden

Anatomy & Visual Acuity 4D-150 vs. Aflibercept



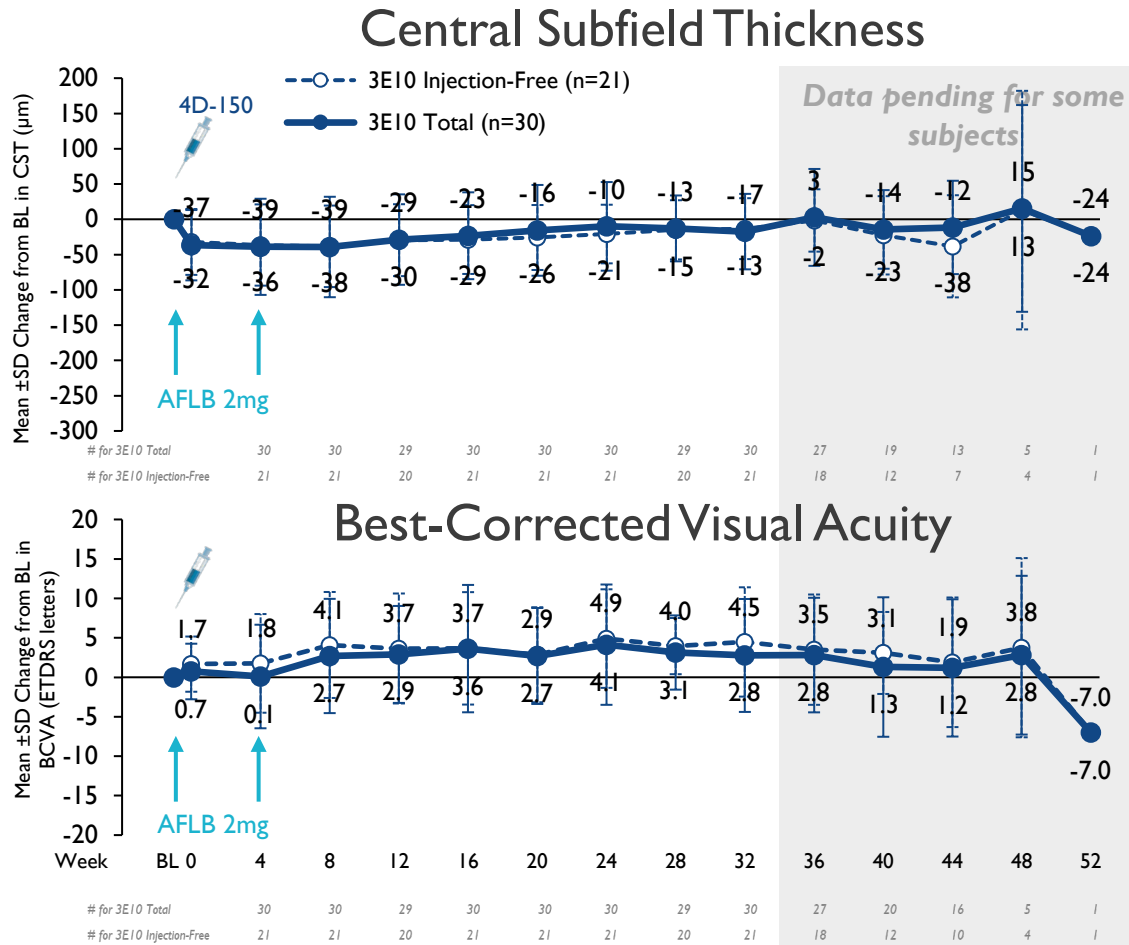
Treatment Burden Post-4D-150 Through Year 1 (KM Est.)



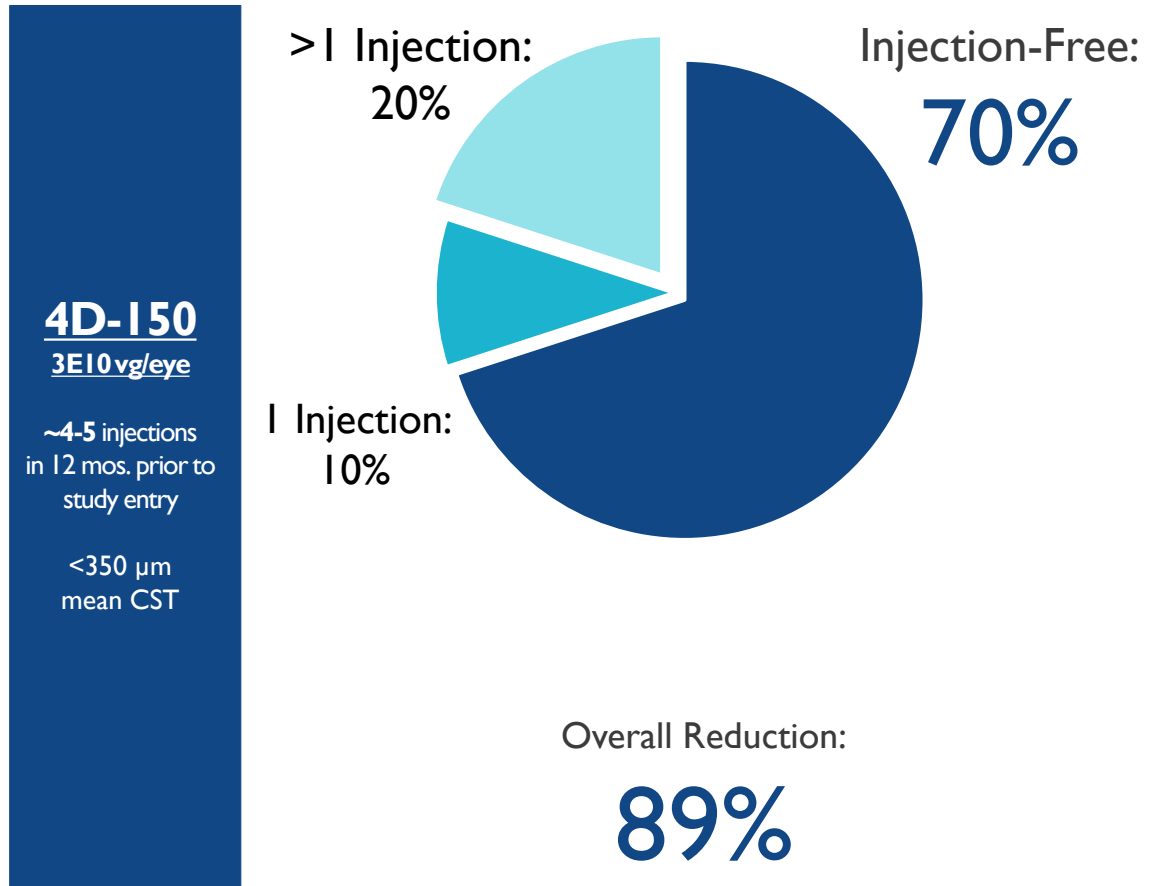
4D-150 in Broad Wet AMD Population (Phase 2b)

Anatomy & Visual Acuity Stable with Robust Reduction in Treatment Burden

Anatomy & Visual Acuity 4D-150



Treatment Burden Post-4D-150 Through Year 1 (KM Est.)

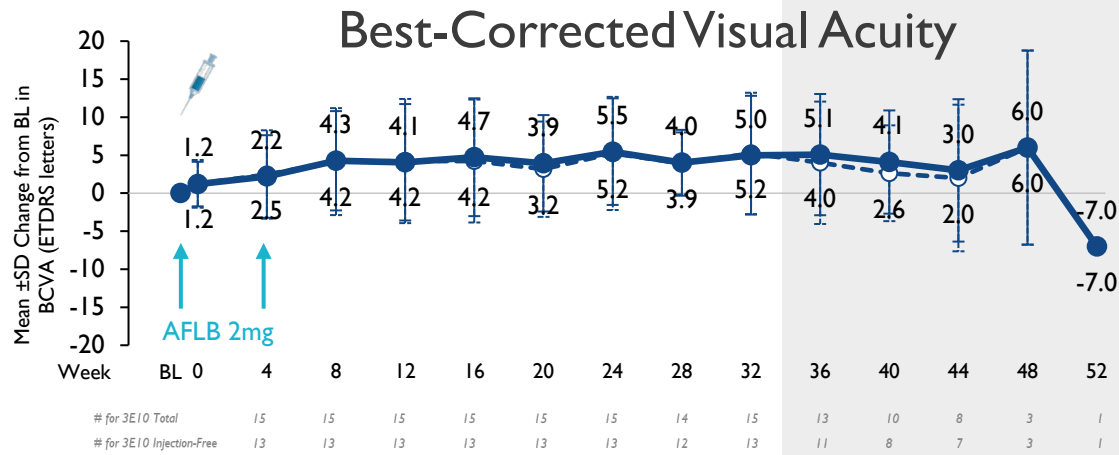
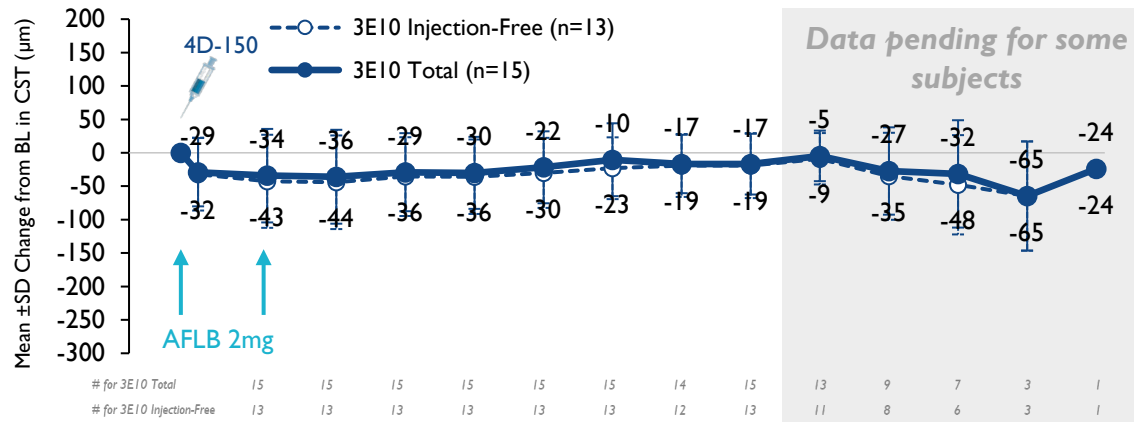


4D-I50 in Recently Diagnosed (≤ 6 Months) Wet AMD Population (Phase 2b)

Anatomy & Visual Acuity Stable with Robust Reduction in Treatment Burden

Anatomy & Visual Acuity 4D-I50

Central Subfield Thickness



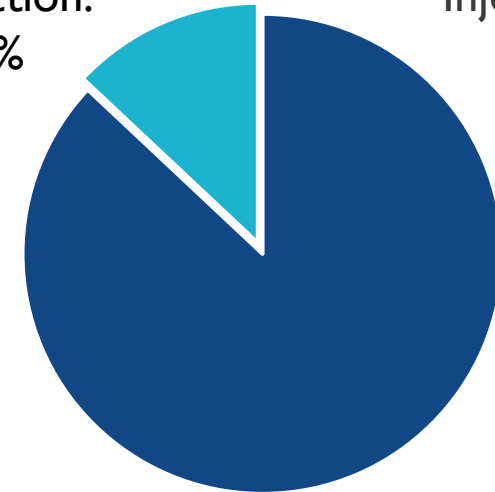
Treatment Burden Post-4D-I50 Through Year 1 (KM Est.)

4D-I50 3E10 vgl/eye

~3 injections
in 12 mos. prior to
study entry

~300 µm
mean CST

1 Injection:
13%



Injection-Free:
87%

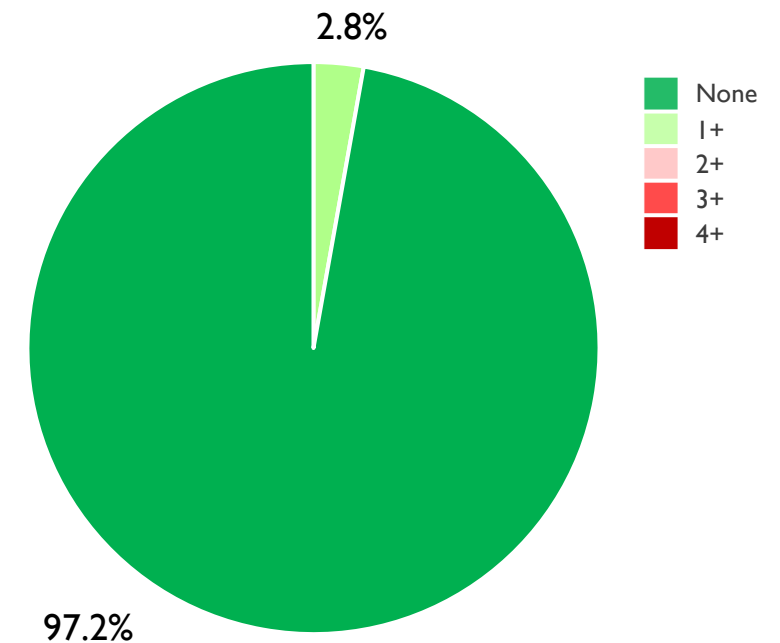
Overall Reduction:
98%

4D-I50 Continues to Demonstrate Potential Best-in-Class Safety

- No 4D-I50–related serious adverse events
- Rate of 3E10 dose 4D-I50–related intraocular inflammation: **Wet AMD**
 - **2.8%** (2 of 71) had transient I+VC at any timepoint
 - **99%** (70 of 71) completed steroid prophylaxis taper on schedule
- No 4D-I50–related hypotony, endophthalmitis, vasculitis, choroidal effusions or retinal artery occlusions observed to date
- Rate of intraocular inflammation: **DME**
 - **0%** treated at any dose (n=22) had IOI at any timepoint

All 4D-I50 3E10 vg/eye-Treated Wet AMD Patients (N=71)

Highest SUN/NEI Score (4D-I50–Related)*



Data cutoff, August 23, 2024.

*Duration of follow up, ≤2.5 years. NEI, National Eye Institute; SUN, Standardization of Uveitis Nomenclature.

4FRONT-1 Phase 3 Wet AMD Study Design

Primary Endpoint: BCVA Noninferiority of 4D-I50 3E10 vg/eye to Aflibercept 2mg Q8 weeks

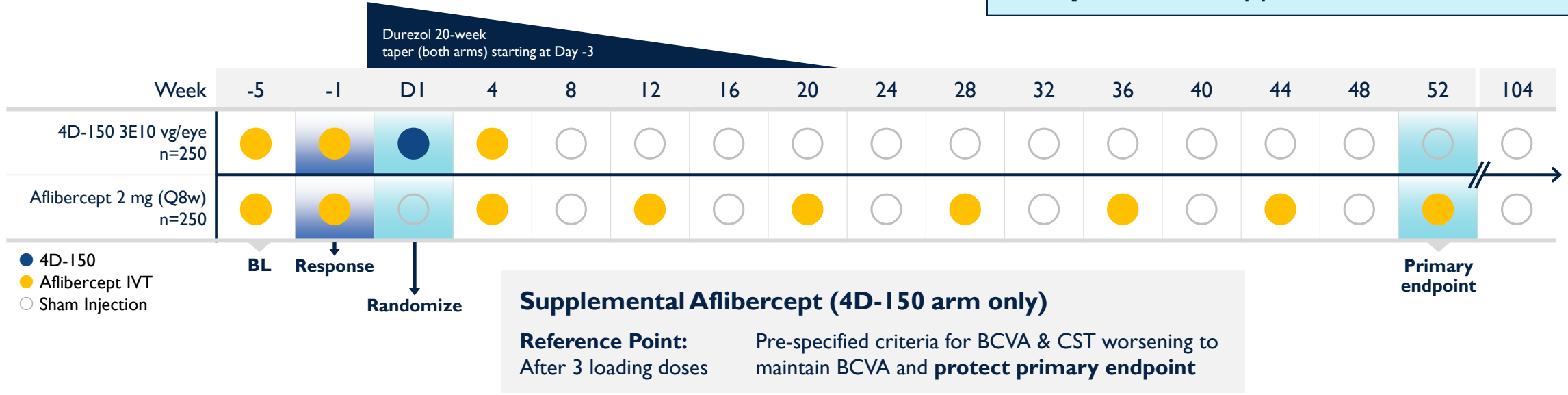
Key Inclusion Criteria

Treatment naïve wet AMD

BCVA:
25-78 letters

Anti-VEGF responsive:
After Week -5 loading dose

- ✓ **Best understood** study population
- ✓ **Enriched** to reduce variability
- ✓ **Optimized** supplemental criteria



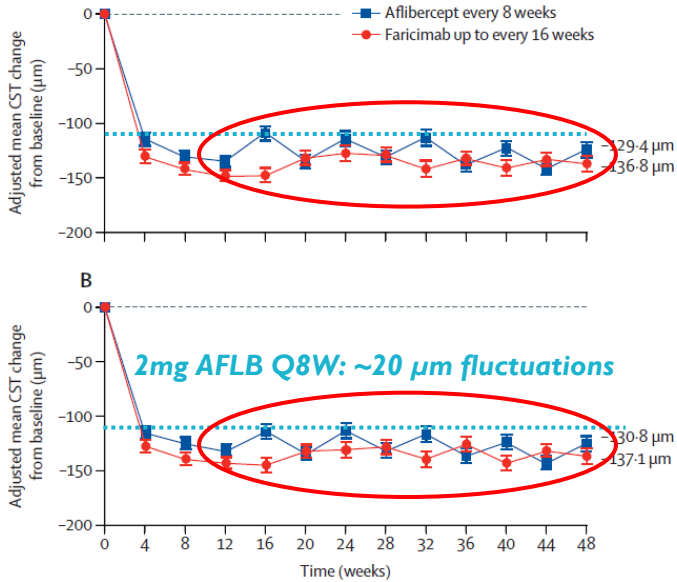
Designed to Drive Clinical, Regulatory & Commercial Success

Initial CST Benefit Achieved by **First 3 Loading Injections**: Goal of Sustained Anti-VEGF Delivery via 4D-I50 is to **Maintain Disease**

Retinal Anatomy (CST)

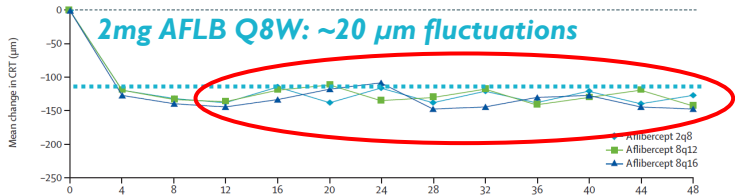
VABYSMO™
faricimab-svoa injection 6 mg

TENAYA / LUCERNE¹



EYLEA® HD
(aflibercept) Injection 8 mg

PULSAR²



1. Khanani A et al. *Ophthalmol* 2024; 131(8):914-26 (TENAYA & LUCERNE) 2. Lanzetta P et al. *Lancet* 2024; 403:1141-52 (PULSAR)

Initial Vision Gains Achieved by **First 3 Loading Injections**: Goal of Sustained Anti-VEGF Delivery via 4D-I50 is to **Maintain Vision**

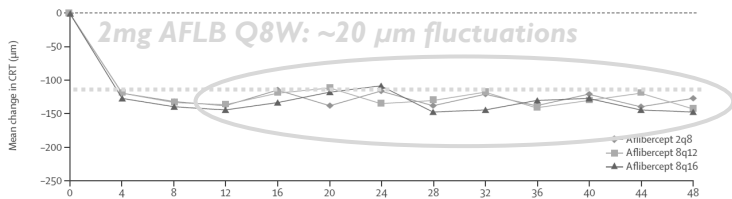
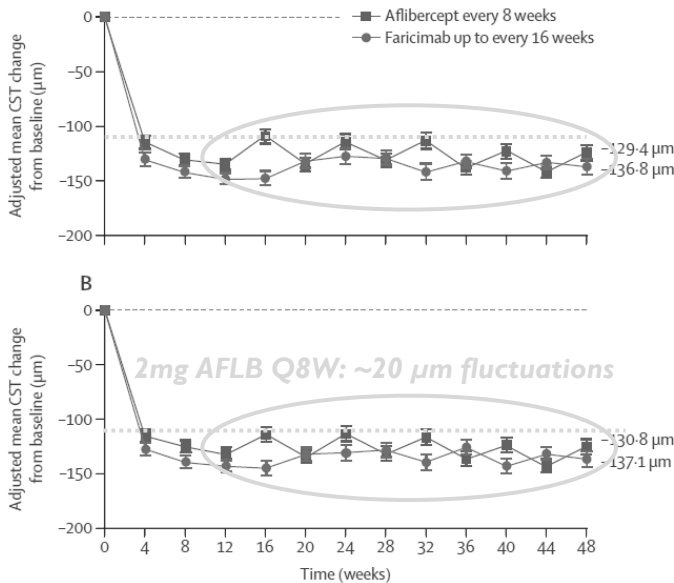
VABYSMO™
faricimab-svoa injection 6 mg

TENAYA / LUCERNE¹

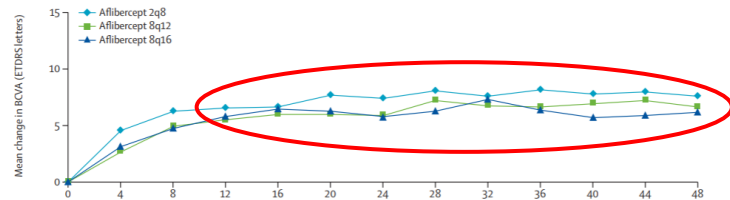
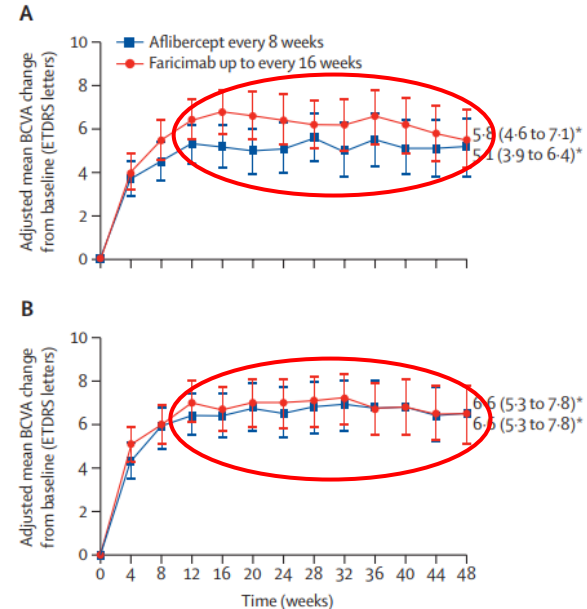
EYLEA® HD
(aflibercept) Injection 8 mg

PULSAR²

Retinal Anatomy (CST)



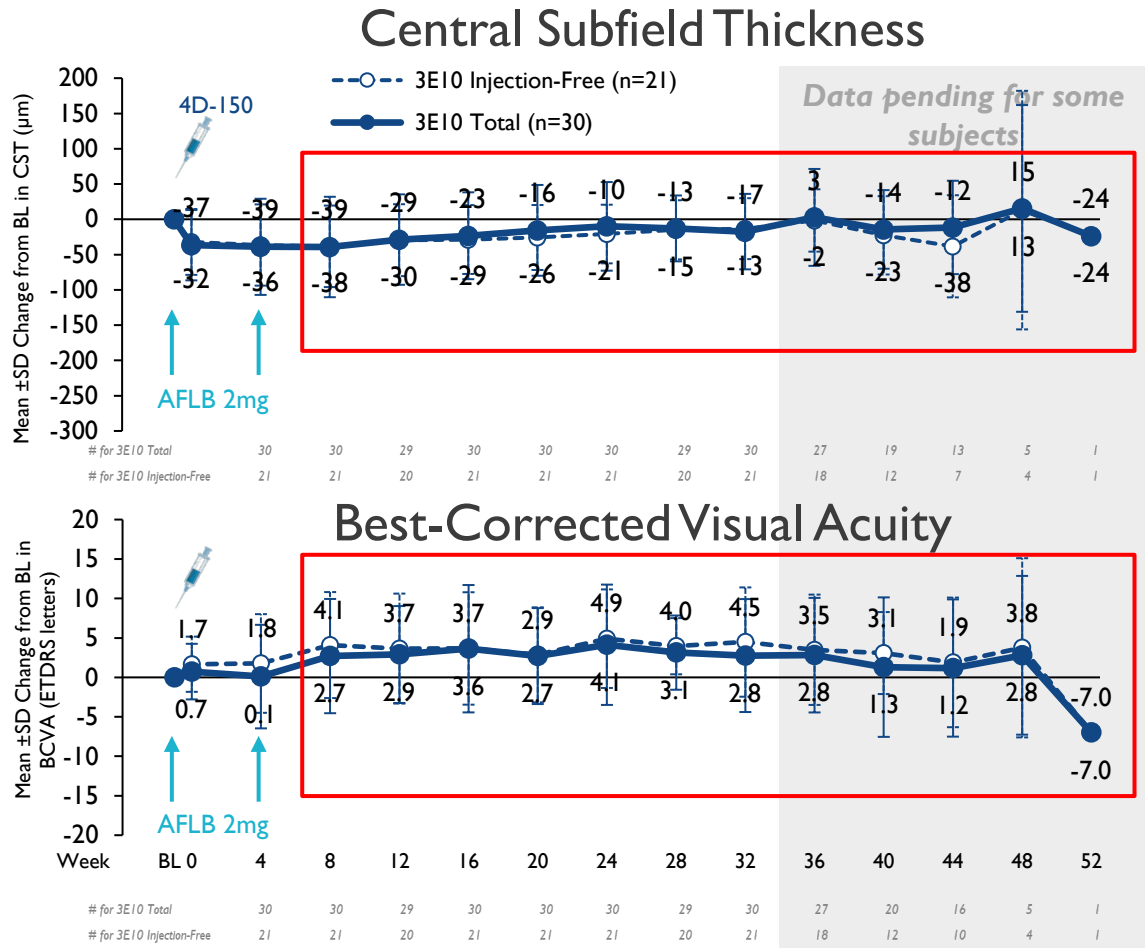
Visual Acuity (BCVA)



1. Khanani A et al. *Ophthalmol* 2024; 131(8):914-26 (TENAYA & LUCERNE) 2. Lanzetta P et al. *Lancet* 2024; 403:1141-52 (PULSAR)

4D-I50 Maintained Anatomy & Visual Acuity in Broad Wet AMD Population (Phase 2b)

Anatomy & Visual Acuity 4D-I50

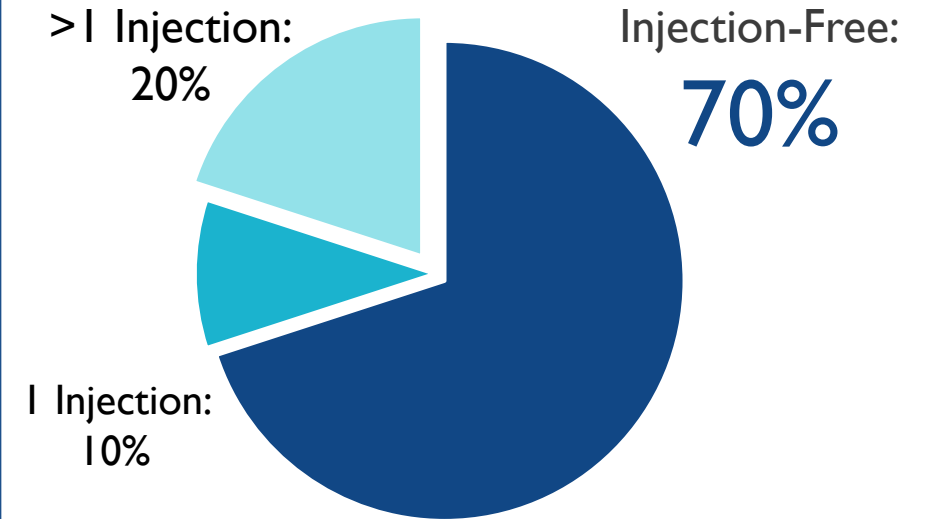


Treatment Burden Post-4D-I50 Through Year 1 (KM Est.)

4D-I50
3E10 vgl eye

~4-5 injections in 12 mos. prior to study entry

<350 µm mean CST

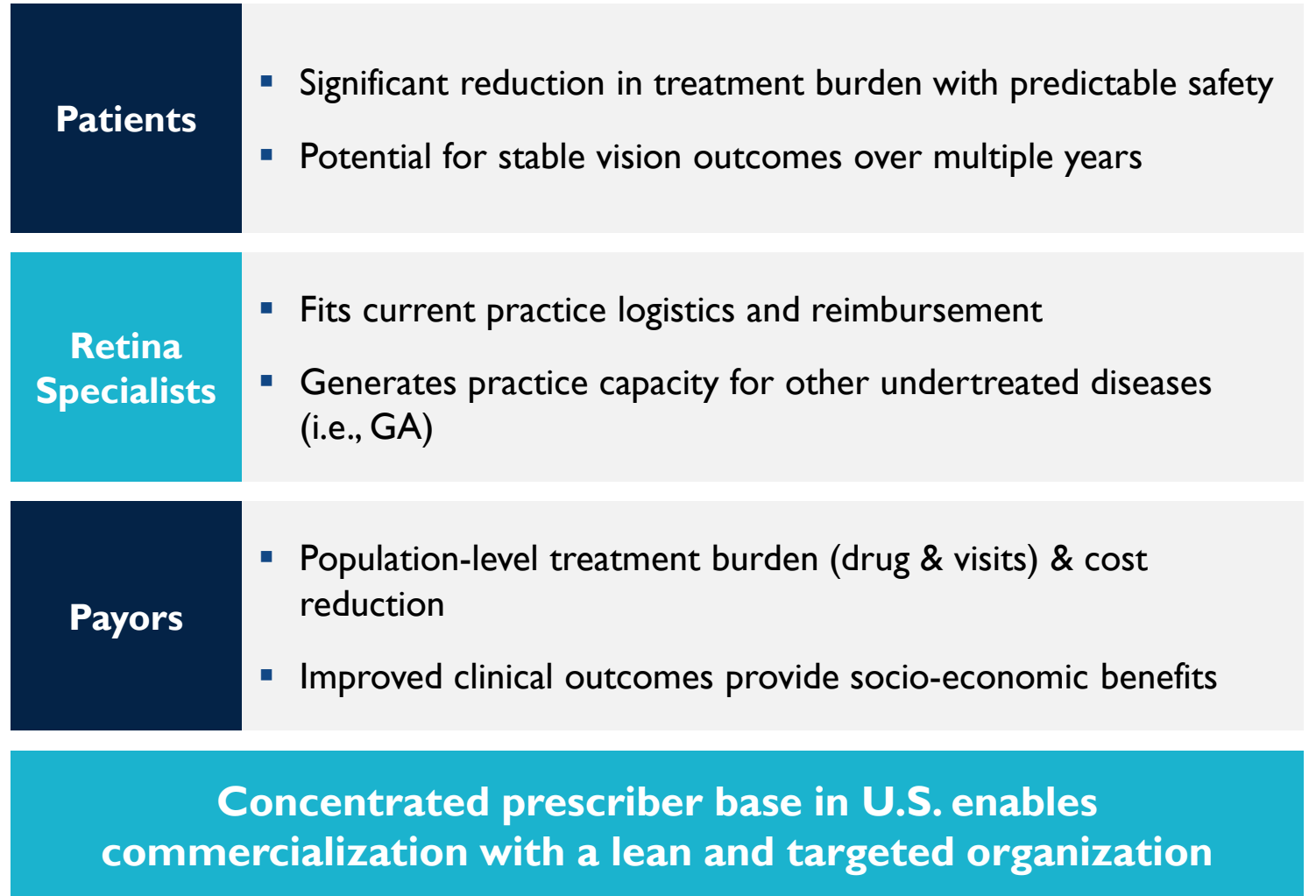


Overall Treatment Burden Reduction:
89%

4D-I50 Target Product Profile has the Potential to Win Commercially

Target Product Profile

- 1 Safety **comparable to market-leading anti VEGF brands**
- 2 Efficacy that **maximizes vision outcomes** with **extended durability**
- 3 **In-office, intravitreal administration**



Strong Cash Balance to Execute Through Key Near-Term Expected Milestones

Large Market Ophthalmology



4D-150 **Wet AMD**

✓ 24-week landmark from Phase 2a Dose Expansion (N=51) at Angiogenesis: **February 3, 2024**

✓ 24-week landmark Phase 2b Population Extension (N=45) at ASRS: **July 17, 2024**

✓ **4D-150 Wet AMD Development Day: September 18, 2024**

✓ Interim longest available follow up data through up to 2.5 years from PRISM Ph I/2a, 2b cohorts

✓ Final 4FRONT Phase 3 clinical trial design update

52-week landmark from Phase 2b Population Extension: **February 2025**

Initiation of Phase 3 4FRONT-I clinical trial: **Q1 2025**



4D-150 **DME**

SPECTRA clinical trial program update: **Early January 2025**



4D-175 **GA**

✓ IND filing: **Q2 2024**

Begin enrollment of Phase I GAZE clinical trial: **Q1 2025**

Pulmonology



4D-710 **CF**

Interim data & program update from AEROW clinical trial: **Mid-2025**

Cash Balance

\$551M cash as of **September 30, 2024** (Unaudited); **Runway into H1 2027**





THANK YOU

5858 Horton Street, Suite 455 | Emeryville, California 94608

(510) 505-2680 | Investor.Relations@4DMT.com

IR.4DMT.com | [LinkedIn](#)