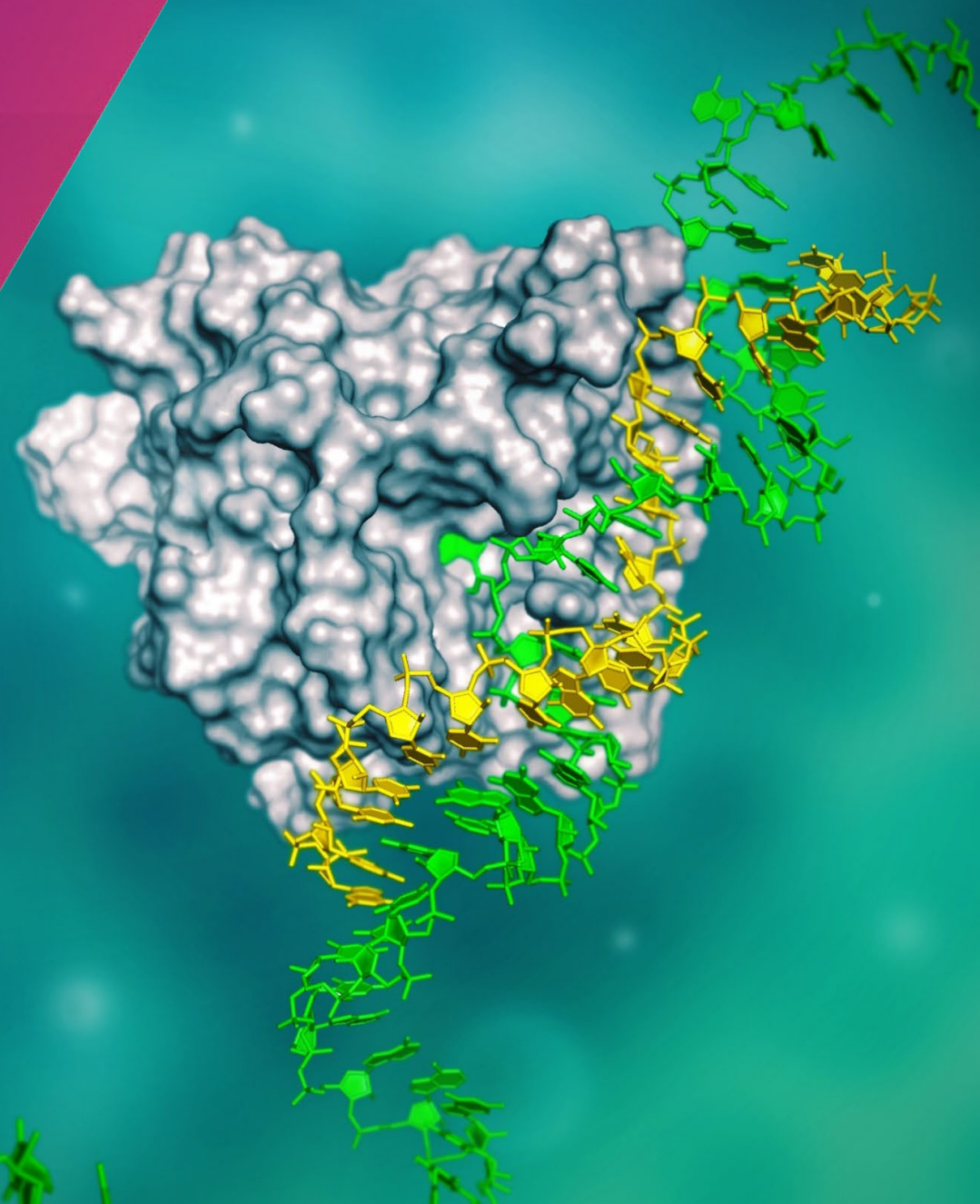




**ANALYST & INVESTOR**

**AXIOMER<sup>®</sup>  
TECHNOLOGY  
R&D EVENT**

*March 29, 2023, Virtual*



# Agenda

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## 1. Welcome and Agenda

Sarah Kiely

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## 2. Strategy overview

Daniel A. de Boer

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## 3. Introduction to ADAR

Gerard Platenburg

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## 4. ADAR RNA editing

Peter Beal, PhD

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## 5. Axiomer® platform overview

Gerard Platenburg

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## 6. IP overview and Partnering strategy

René Beukema

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## 7. Pipeline overview

Gerard Platenburg

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## 8. Summary and Milestones

Daniel A. de Boer

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## 9. Q&A

Daniel A. de Boer  
Gerard Platenburg  
René Beukema

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## 10. Closing

Daniel A. de Boer

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## Speakers

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**Sarah Kiely**  
*VP Investor Relations & Corporate Affairs*



**Daniel A. de Boer**  
*Founder & CEO*



**Gerard Platenburg**  
*Chief Scientific Officer*



**René Beukema**  
*Chief Corporate Development Officer*



**Peter Beal, PhD**  
*Professor, UC Davis; ProQR Scientific Advisory Board member*

# Forward-looking statements

This presentation contains forward-looking statements. All statements other than statements of historical fact are forward-looking statements, which are often indicated by terms such as "anticipate," "believe," "could," "estimate," "expect," "goal," "intend," "look forward to", "may," "plan," "potential," "predict," "project," "should," "will," "would" and similar expressions. Such forward-looking statements include, but are not limited to, statements regarding our strategy and future operations, statements regarding the potential of and our plans with respect to our technologies and platforms (including Axiomer®), our preclinical model data, our pipeline targets, our other programs and business operations, our current and planned partnerships and collaborators and the intended benefits thereof, including the collaboration with Lilly and the intended benefits thereof, including the upfront payment, equity investment, and milestone and royalty payments from commercial product sales, if any, from the products covered by the collaboration, as well as the potential of our technologies and product candidates; our updated strategic plans and the intended benefits thereof, our plans to seek strategic partnerships for our ophthalmology assets, and our financial position and cash runway. Forward-looking statements are based on management's beliefs and assumptions and on information available to management only as of the date of this presentation. Our actual results could differ materially from those anticipated in these

forward-looking statements for many reasons, including, without limitation, the risks, uncertainties and other factors in our filings made with the Securities and Exchange Commission, including certain sections of our annual report filed on Form 20-F. These risks and uncertainties include, among others, the cost, timing and results of preclinical studies and other development activities by us and our collaborative partners whose operations and activities may be slowed or halted due to shortage and pressure on supply and logistics on the global market; our reliance on contract manufacturers to supply materials for research and development and the risk of supply interruption from a contract manufacturer; the ability to secure, maintain and realize the intended benefits of collaborations with partners, including the collaboration with Lilly; the possible impairment of, inability to obtain, and costs to obtain intellectual property rights; possible safety or efficacy concerns that could emerge as new data are generated in research and development; general business, operational, financial and accounting risks; and risks related to litigation and disputes with third parties. Given these risks, uncertainties and other factors, you should not place undue reliance on these forward-looking statements, and we assume no obligation to update these forward-looking statements, even if new information becomes available in the future, except as required by law.



# Strategy overview

*Daniel A. de Boer, Chief Executive Officer*



# ProQR Therapeutics

## Overview



### Focus on Axiomer®

Exclusively focused on the development of proprietary Axiomer® RNA editing platform across multiple therapeutic areas; initial focus on liver and CNS diseases



### ADAR

Axiomer® is ADAR-mediated RNA editing, recruiting endogenous adenosine deaminase acting on RNA (ADAR)



### Novel Mechanism of Action

Axiomer® was discovered in ProQR labs in 2014 and uses well-proven modality of oligonucleotides to recruit a novel mechanism of action



### Two pillars underlie strategy

ProQR developing wholly owned pipeline with initial targets in liver-originated diseases



Selectively enter into partnerships: initial partnership with Lilly in September 2021, expansion announced December 2022



### Validated across multiple genes

Preclinical data demonstrate Axiomer® is broadly validated across multiple genes

# RNA editing – a new class of medicines

## Developing the RNA field



Era of **genetic** medicine



Focusing on developing **next generation approaches** with RNA



Potential to become a **new class** of RNA therapeutics

## Developing Axiomer®



Originating from **human** genetics



Inform **Axiomer® RNA editing platform** and **pipeline development**

# Axiomer<sup>®</sup> RNA-editing platform technology



## Versatile

- Ability to target multiple organs and a wide range of diseases with numerous applications
- Potential to include protective variants
- Designed to target a variety of RNA species (mRNA, miRNA, lncRNA)



## Safety

- No permanent changes
- No irreversible DNA damages and less risk of permanent side effects



## High specificity

- Highly targeted therapeutic with potential to minimize off-target effects and reduce the risk of adverse reactions



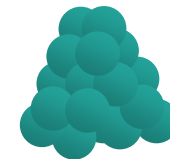
## Transient

- Provide a long-lasting therapeutic effect that does not require frequent dosing
- Potential to target diseases for which permanent changes would be deleterious



## No viral vector

- No risk of immunogenicity or capacity limitation due to the vector
- Efficient development and faster production increase the chance to reach market

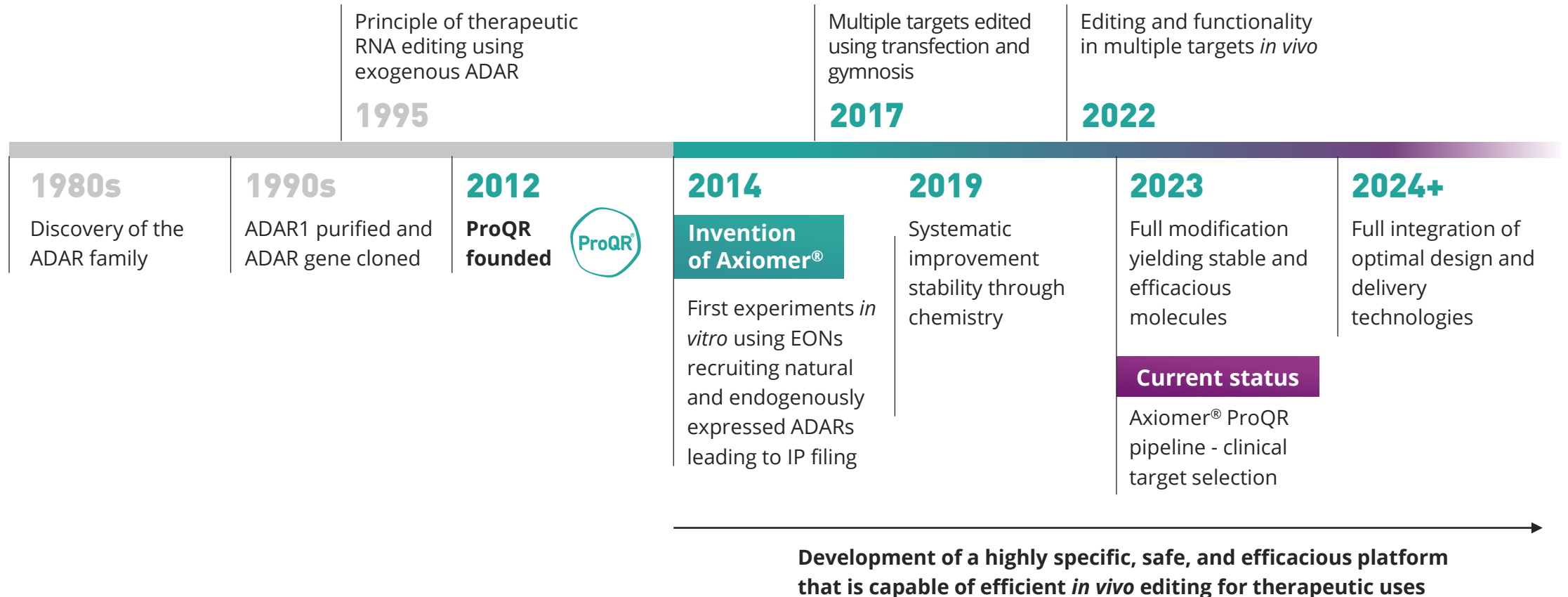


## Endogenous ADARs

- Leverage body's potential to treat disease
- Less risk of off-target effect vs. exogenous ADARs

ADAR: Adenosine deaminase acting on RNA, mRNA: messenger RNA, miRNA: microRNA, lncRNA: long non-coding RNA

# Axiomer<sup>®</sup> leading the field of RNA editing since 2014



ADARs: Adenosine deaminases acting on RNA, EONs: Editing oligonucleotides. References: Bass and Weintraub, Cell 48: 607-613, 1987; Rebagliati and Melton, Cell 48: 599-605, 1987; Bass and Weintraub, Cell 55: 1089-1098, 1988; Wagner et al. Proc Natl Acad Sci USA 86: 2647-2651, 1989; Hough and Bass, J Biol Chem 269: 9933-9939, 1994; Kim et al. J Biol Chem 269: 13480-13489, 1994; O'Connell and Keller, Proc Natl Acad Sci USA 91: 10596-10600, 1994; Woolf et al. Proc Natl Acad Sci USA 92: 8298-8302, 1995



# Value creation strategy

*ProQR will develop its own pipeline and selectively enter into partnerships*

## ProQR Pipeline

- Build **in-house pipeline** based on Axiomer® RNA editing technology platform
- Initial focus on **liver originated diseases**



## Partnerships

- Largely unencumbered platform, ProQR may **selectively enter partnerships**
- **Lilly partnership** with expansion announced December 2022 – total potential value of ~\$3.9B

# R&D strategy yielding our initial Axiomer<sup>®</sup> pipeline programs

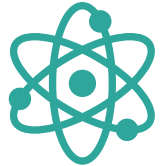
- Pipeline programs informed by **human genetics**
- **Liver as primary organ**: limited delivery risks and accessibility to RNA therapeutics
- **Preclinical models** available with strong translatability into the clinic
- Timely insight on **safety and target engagement** by conducting early clinical programs on healthy individuals using validated biomarkers
- **Clinical programs** with disease specific endpoints for regulatory approval

# ProQR development pipeline

	TARGET	DISCOVERY	NON-CLINICAL	CLINICAL	GUIDANCE	ESTIMATED POPULATION
<b>PROQR PROGRAMS</b>						
CHOLESTATIC DISEASES	<b>AX-0810</b> for <b>NTCP</b>				Entry into clinical trials in late 2024 / early 2025	~ 100K <sup>1</sup>
CARDIOVASCULAR DISEASES	<b>AX-1412</b> for <b>B4GALT1</b>				Entry into clinical trials in late 2024 / early 2025	~ 200M <sup>2</sup>
	<b>AX-1005</b> for CVD					
METABOLIC DISEASES	<b>AX-2911</b> for NASH					~ 16M
	<b>AX-0601</b> for obesity and T2D					~ 650M
	<b>AX-9115</b> for rare metabolic condition					~ 20K
RARE NEURO DISEASES	<b>AX-2402</b> for neurodegenerative condition					~ 30K
OTHERS	Multiple targets in discovery pipeline					
<b>PARTNERED PROGRAMS</b>						
	Initial 5 undisclosed targets	Progress undisclosed				
	Next 5 undisclosed targets	Progress undisclosed				
	Up to 5 potential additional targets					

<sup>1</sup>Approximately 100K people affected with Primary Sclerosing Cholangitis and Biliary Atresia in US and EU5. <sup>2</sup>Approximately 200 million people suffer from too high a level of cholesterol in US and EU5. *SLC10A1* is the gene that encodes for NTCP protein. CVD: Cardiovascular Diseases, NASH: Nonalcoholic steatohepatitis, T2D: Type 2 Diabetes. References: Boonstra K, Beuers U, Ponsioen CY. J Hepatol. 2012 May;56(5):1181-1188; Karlens TH, et al. J Hepatol. 2017 Dec;67(6):1298-1323; Dyson JK, et al. Lancet. 2018 Jun 23;391(10139):2547-2559; Sundaram SS, et al. Liver Transpl. 2017 Jan;23(1):96-109. Raghu VK, et al. Liver Transpl. 2021 May;27(5):711-718; NORD, 2019. Tsao CW, et al. Circulation. 2022;145(8):e153-e639. World Health Organization, World Gastroenterology Organization

# Well positioned to advance Axiomer®



## Science

- Deep understanding of basic science – ADAR, oligos
- Optimization of editing oligonucleotides (EONs) for therapeutic development



## Axiomer® has broad applicability

- Large number of potential therapeutic applications
- *In vivo* POC established in nervous system, liver



## Advancing toward the clinic

- Extensive translational and developmental expertise with oligo modality
- AX-0810 and AX-1412 initial pipeline targets



## Leading IP position

- Axiomer® is protected by 10 published patent families
- Continuously investing in expanding IP estate



## Strategic partnership strategy

- Lilly collaboration
- Selectively form additional partnerships
- Optionality and multiple value creating opportunities



## Experienced leadership

- Deep RNA, corporate finance, and business development expertise across Management Team, Supervisory Board, and Scientific Advisory Board



## Strong balance sheet

- 2022 YE cash €94.8M, plus \$60.0M from Lilly partnership expansion
- Cash runway to mid-2026, excluding potential for additional BD-related upside

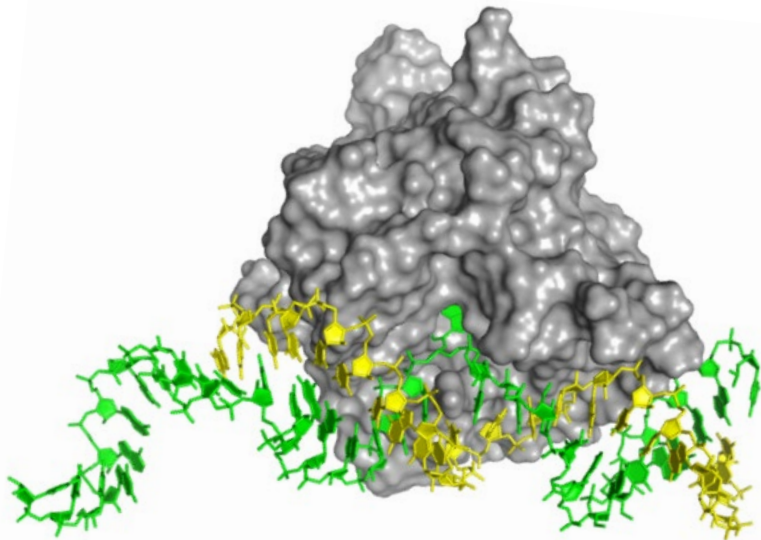


# Introduction to ADAR

*Gerard Platenburg, Chief Scientific Officer*

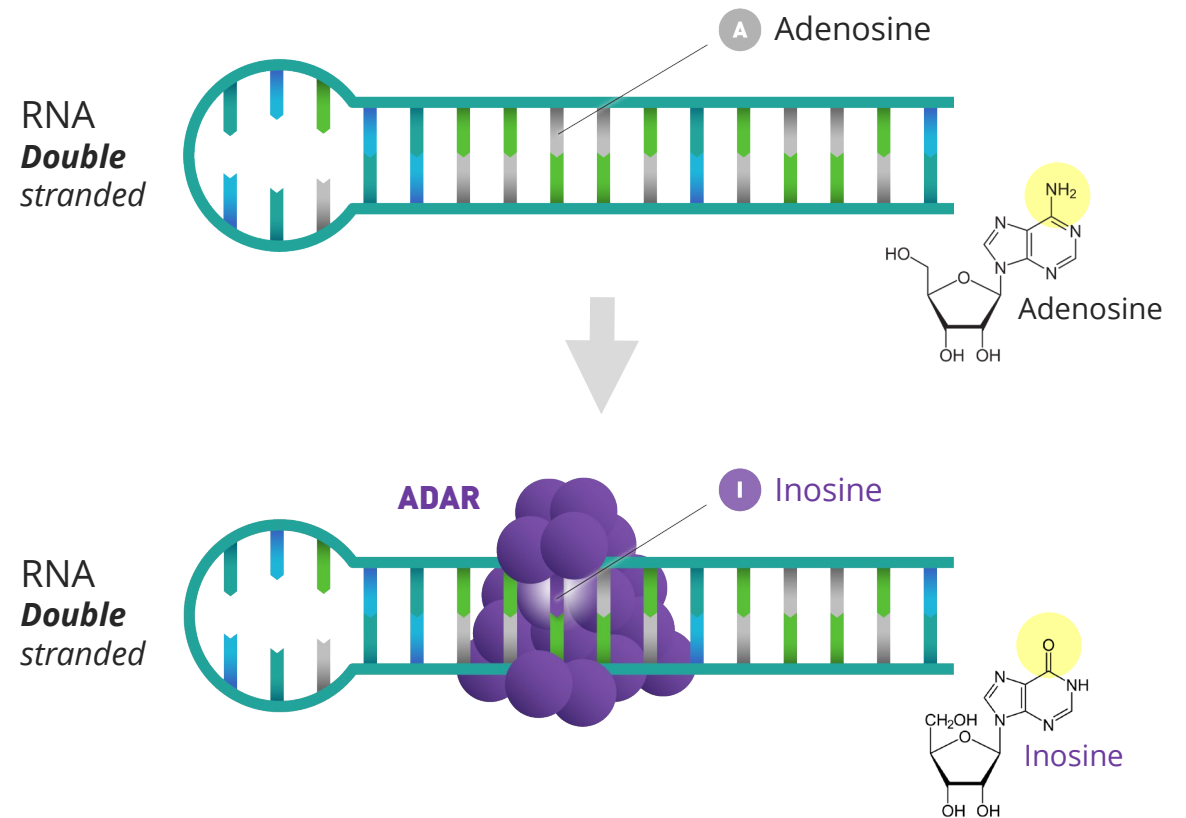
# What is ADAR editing?

**ADAR** (*Adenosine Deaminase Acting on RNA*)



Enzyme that performs specific form of natural RNA editing, called **A-to-I editing**. During A-to-I editing an **A nucleotide (adenosine)** is changed into an **I nucleotide (inosine)**

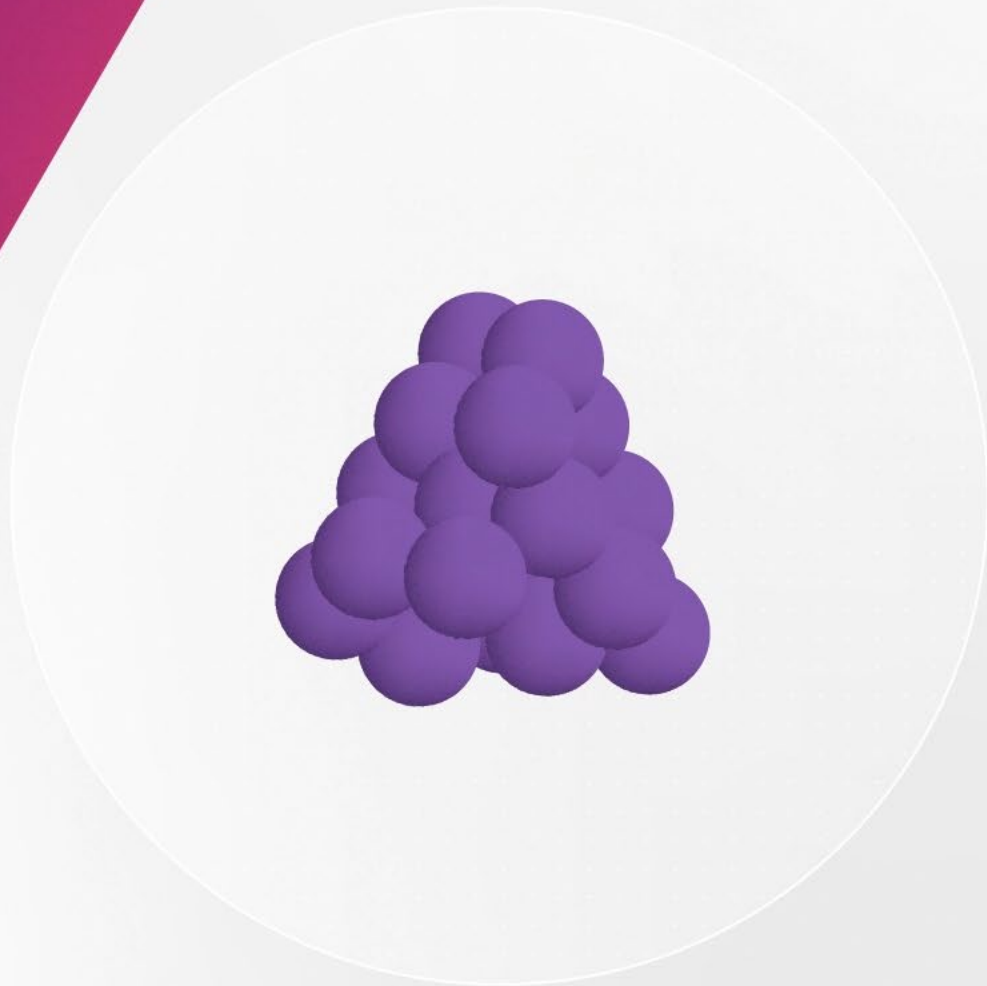
**Natural ADAR editing (A-to-I)**





# HOW DOES ADAR WORK?

*Explained in 4 minutes*



# Peter Beal, PhD

*UC Davis, ProQR Scientific Advisory Board member*



- Professor in the Department of Chemistry at the University of California at Davis and Director of the NIH-funded UC Davis Chemical Biology Graduate Program
- Advanced understanding of the structures and mechanism of action for the ADAR enzymes responsible for adenosine to inosine RNA editing in humans
- Led in the development of structure-guided methods for optimizing chemically modified oligonucleotides for recruitment of RNA-binding proteins including ADARs
- Teaches organic chemistry at the undergraduate level and several classes in nucleic acids chemistry and chemical biology at the graduate level
- Over 100 peer-reviewed publications in the field of RNA chemical biology and mentored over 50 Ph.D. and M.S. degree students
- Disclosure: ProQR Scientific Advisory Board

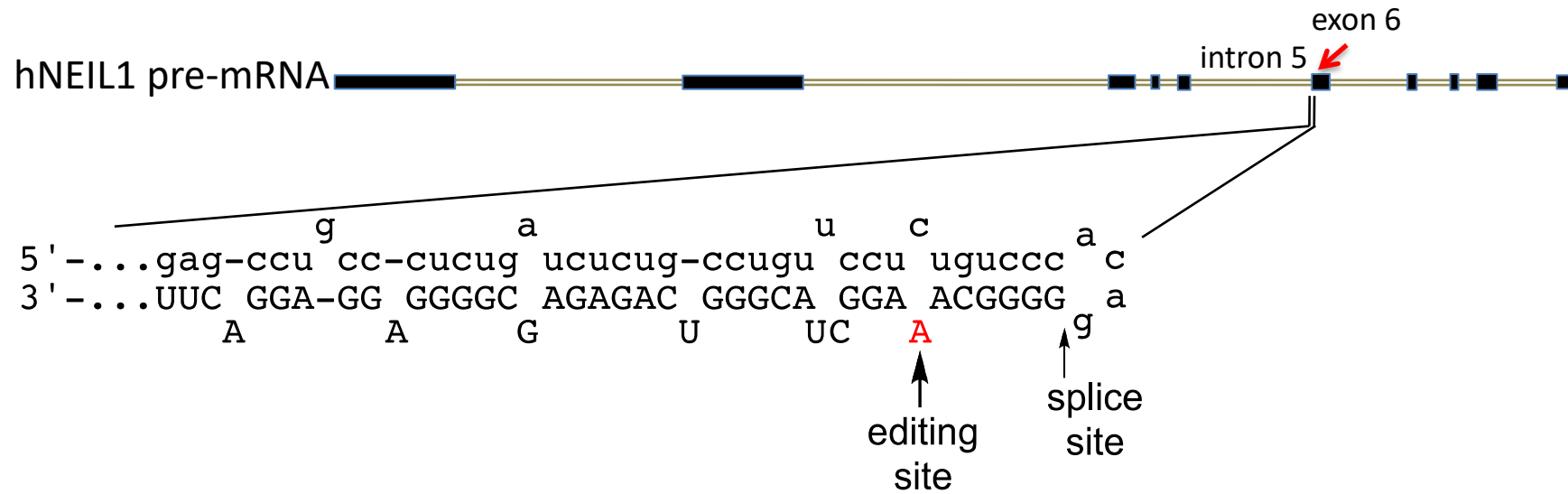
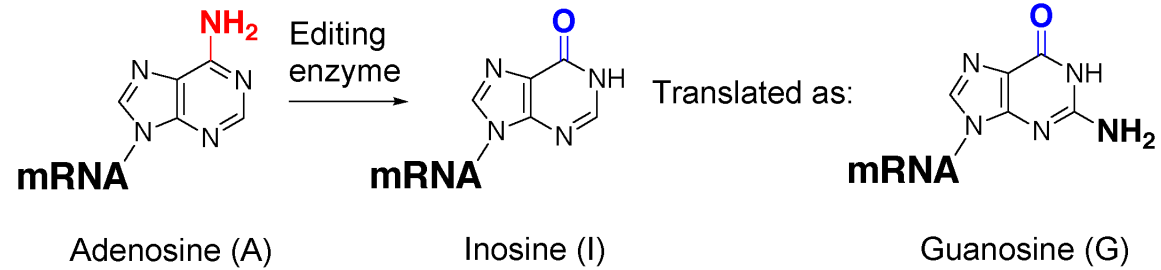


A 3D molecular model showing a protein structure (ADAR) in shades of blue and orange, bound to an RNA strand represented by a yellowish-orange ribbon. The protein is shown in a ribbon representation, and the RNA is also in a ribbon representation. The background is white with a faint, larger-scale version of the protein and RNA structure.

# RNA editing by the ADARs

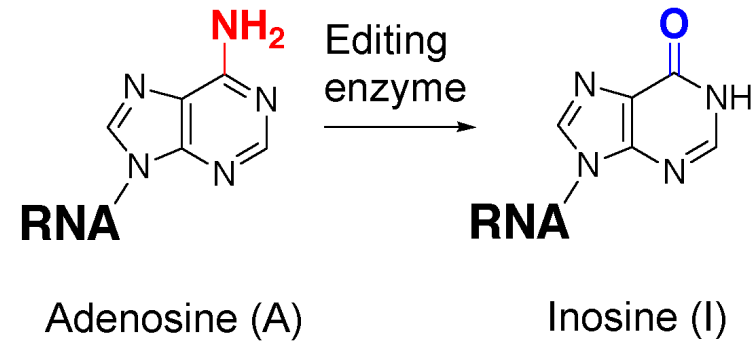
PETER BEAL Department of Chemistry, University of California, Davis

# Adenosine to Inosine RNA editing

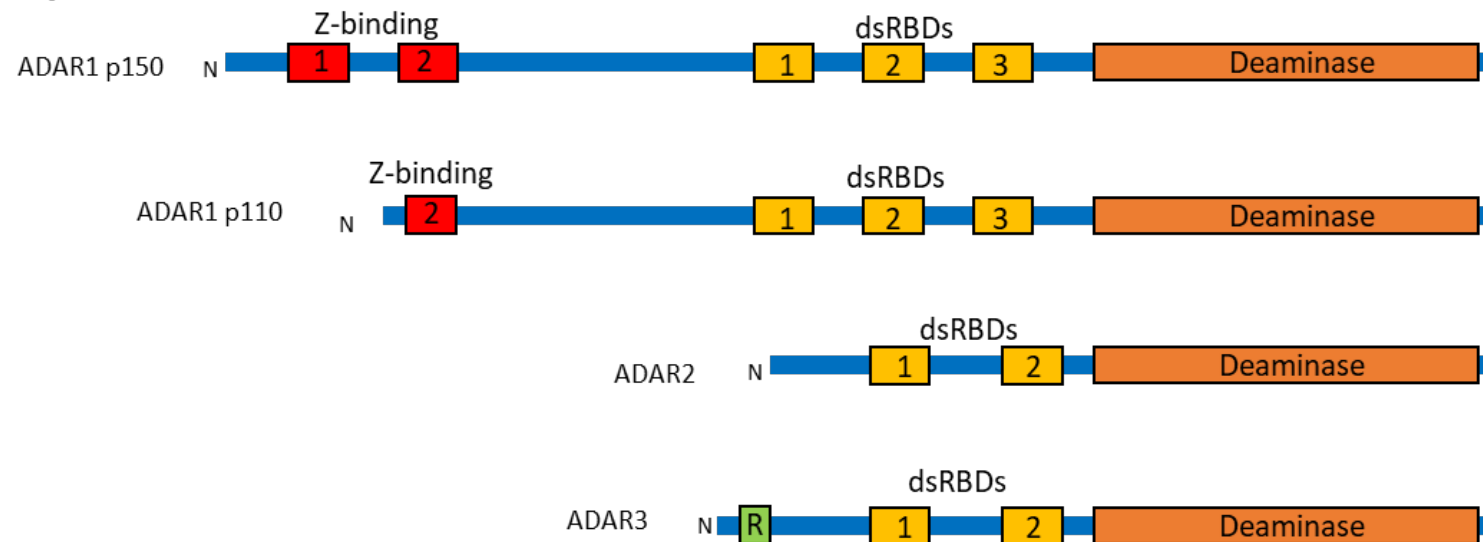


•Yeo, J.; Goodman, R.; Schirle, N.; David, S.S.; Beal, P.A. *Proc. Natl. Acad. Sci. U.S.A.* **2010**, 107, 48, 20715.

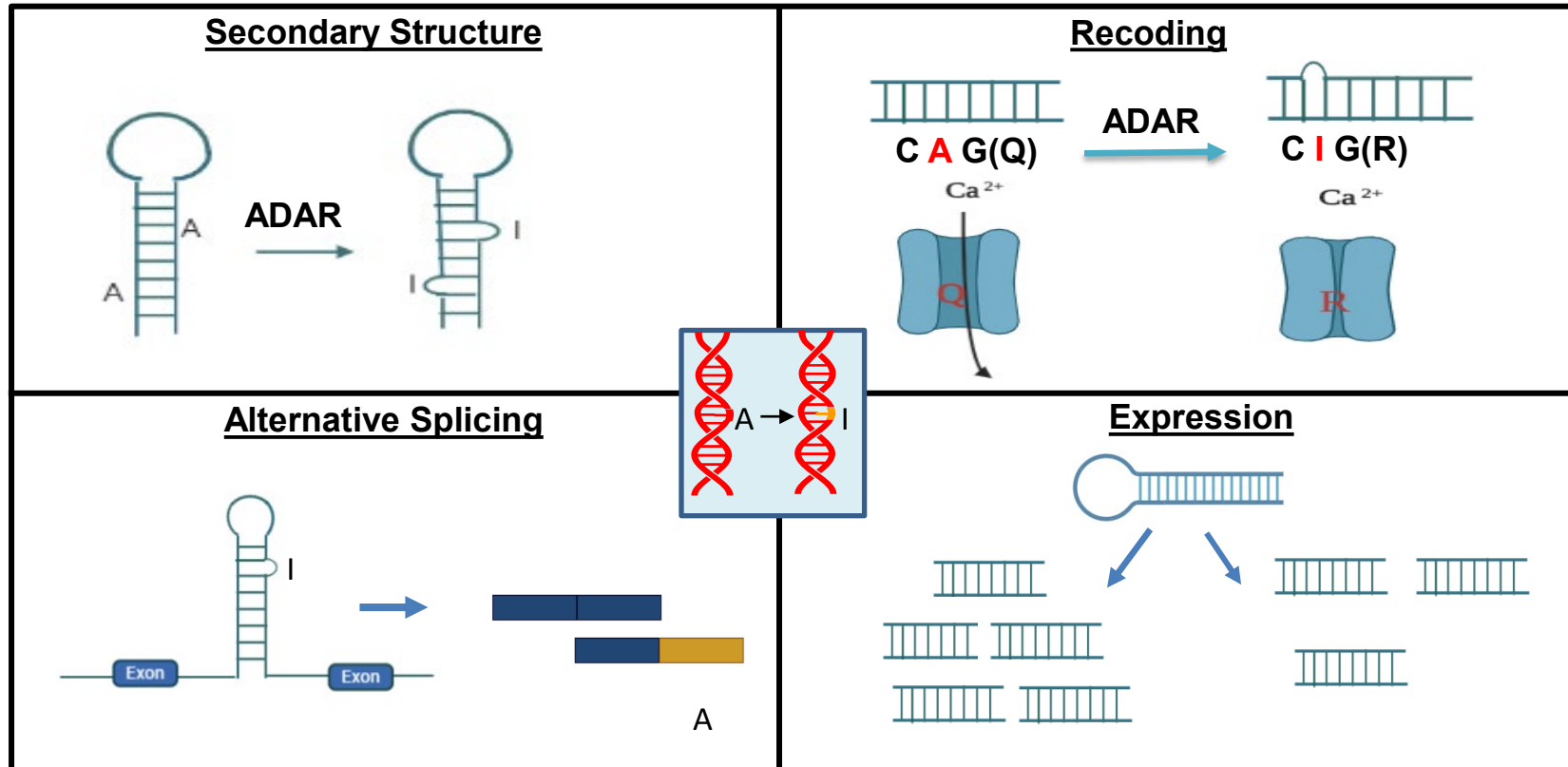
# Adenosine to Inosine RNA editing



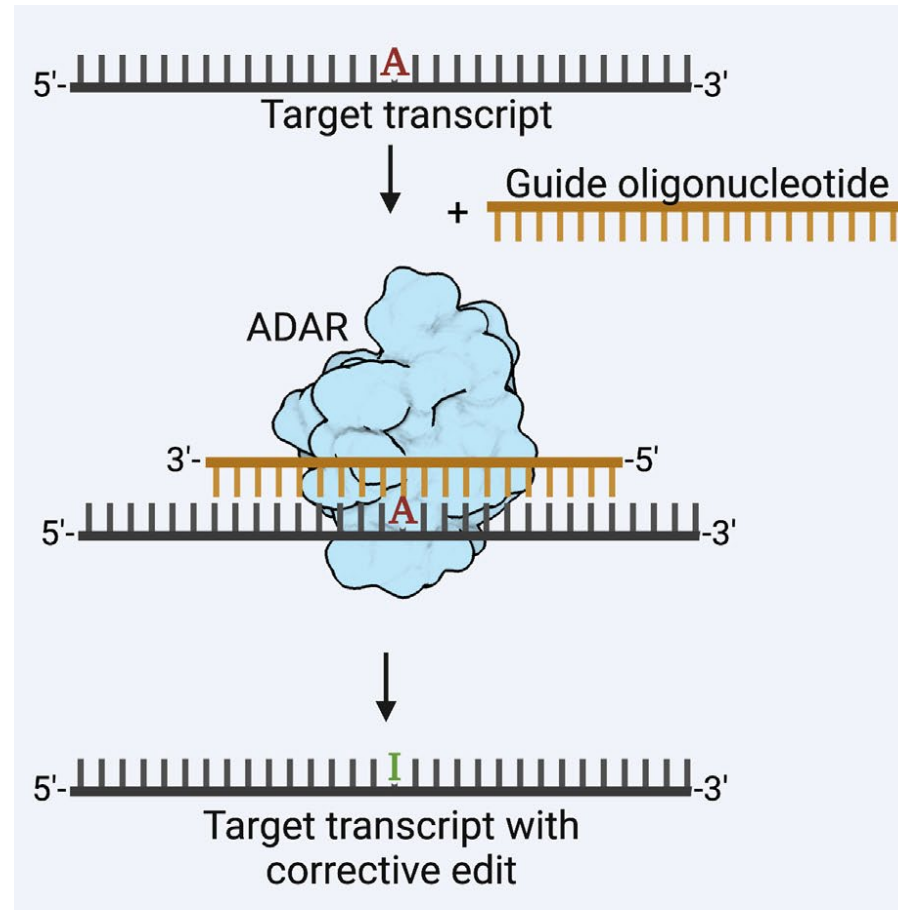
## ADARs



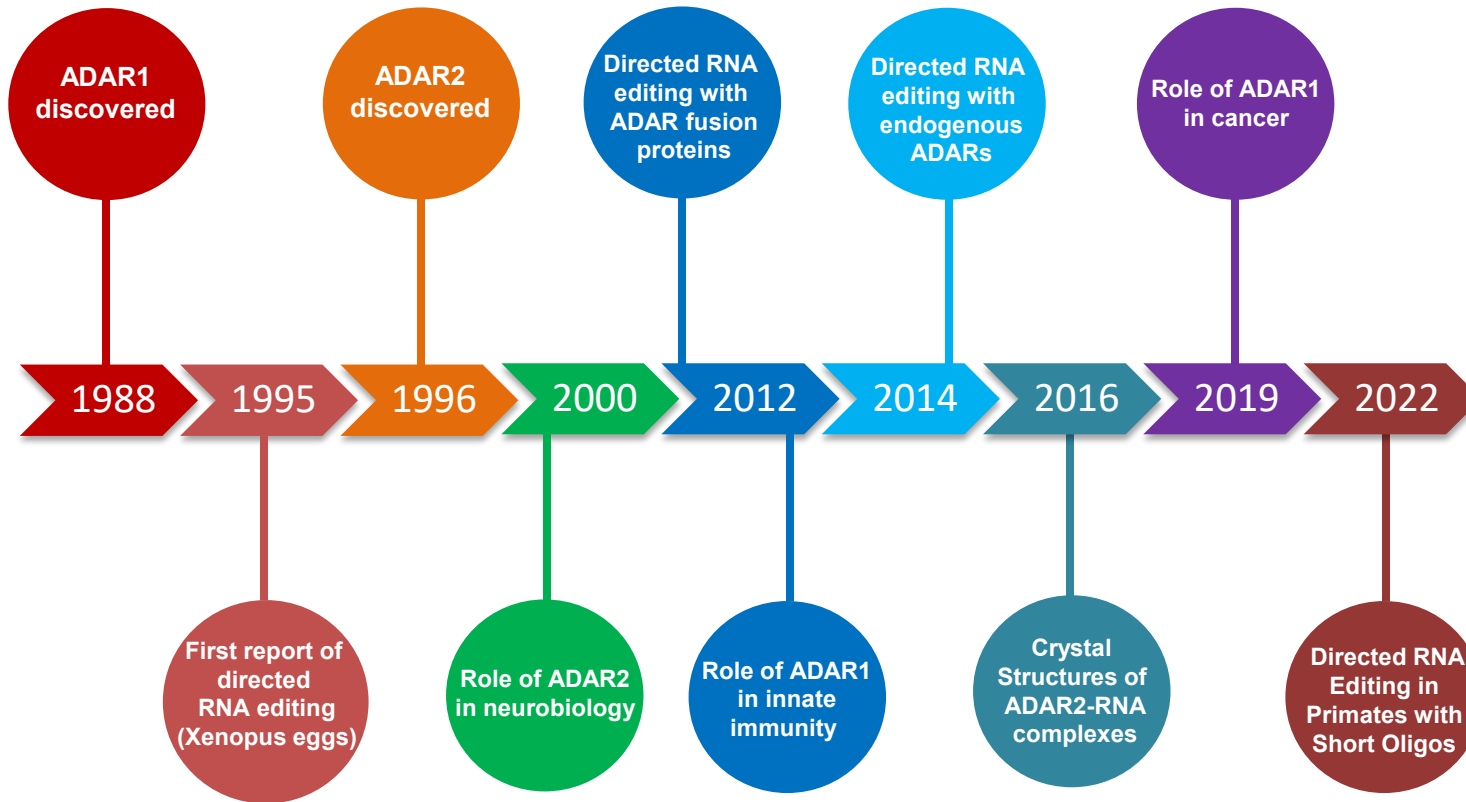
# Consequences of RNA Editing by ADARs



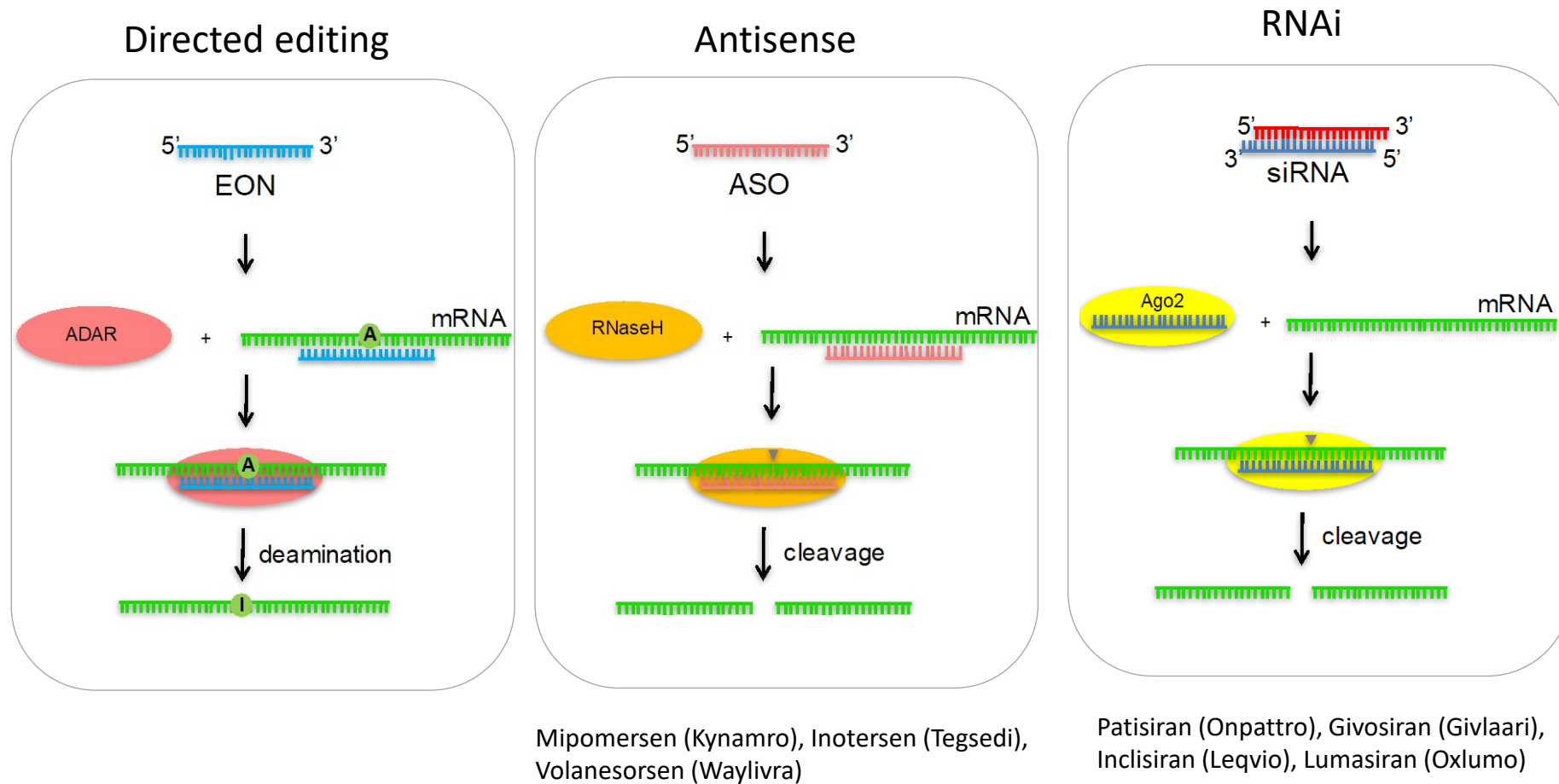
# Directed RNA editing



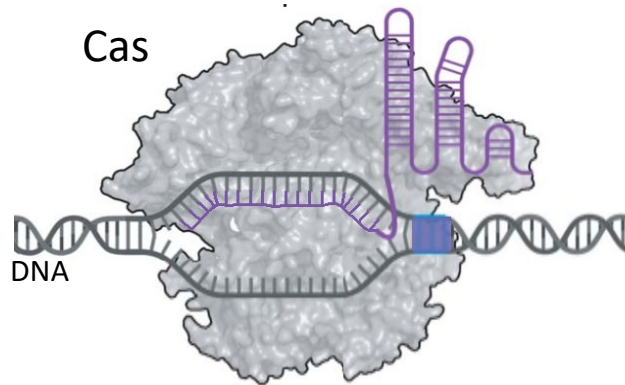
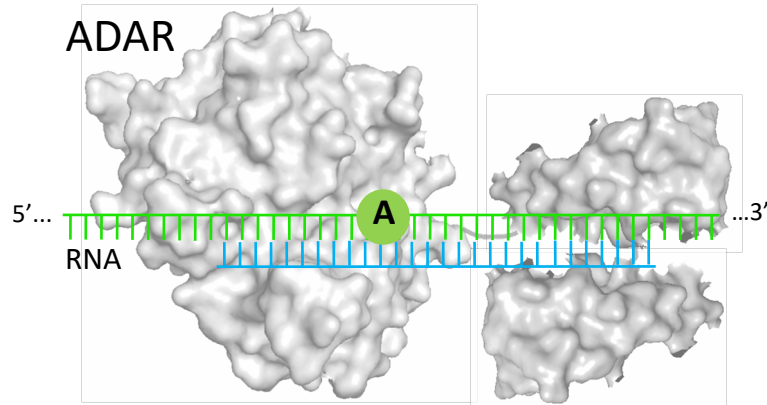
# Key Advances in ADAR research (1988-2022)



# Recruiting human effector proteins by oligonucleotides



# Directed RNA Editing



## Directed RNA editing vs Genome editing

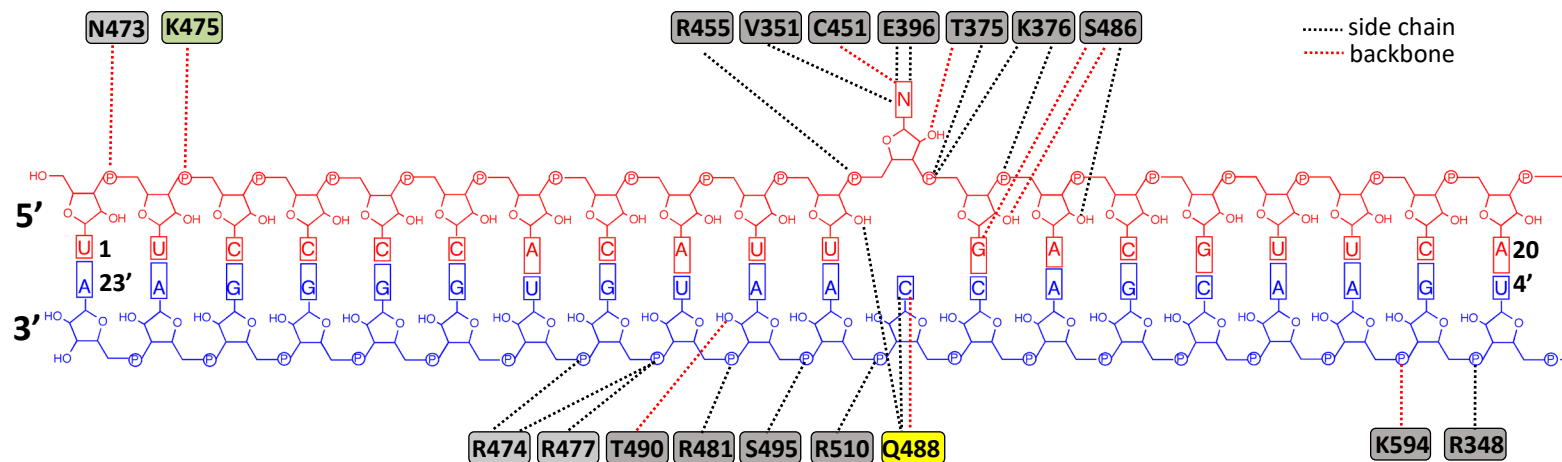
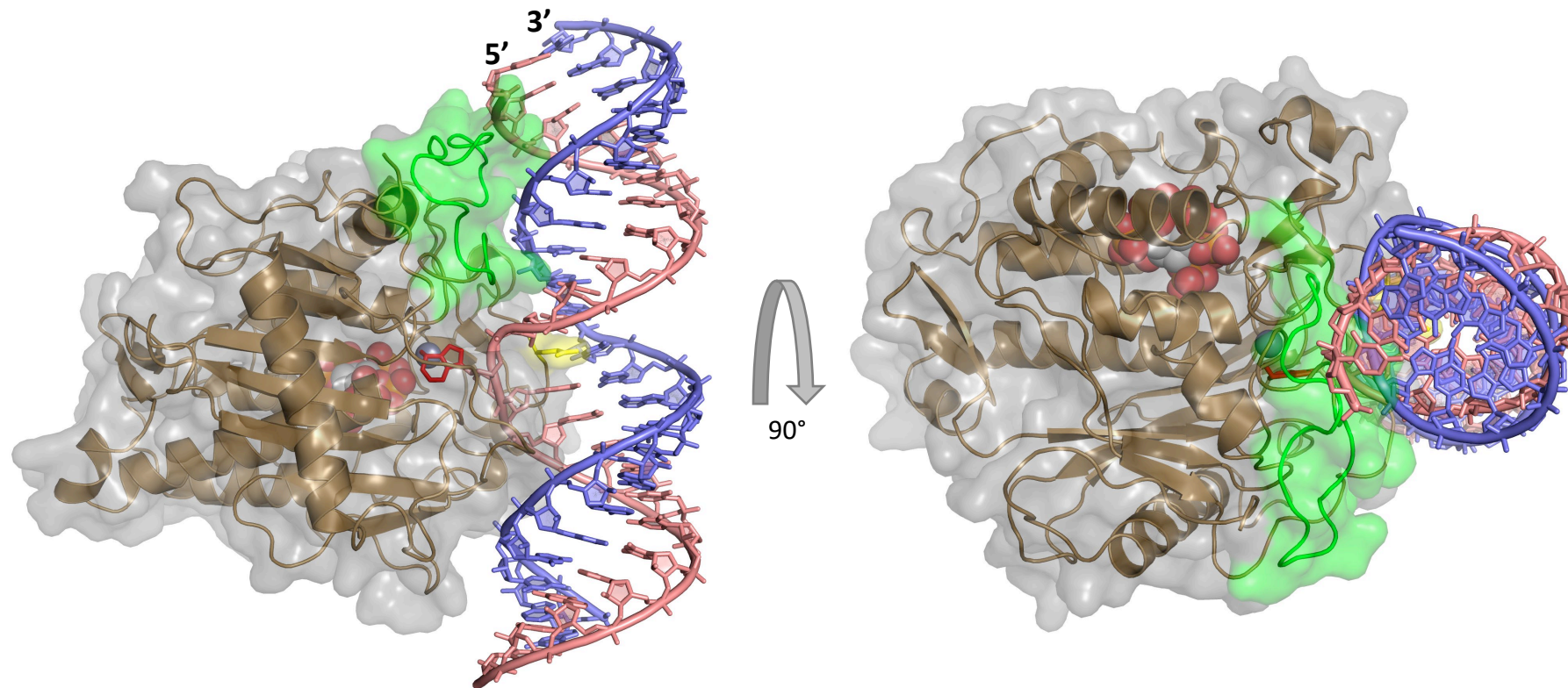
### Advantages

- Effects are reversible
- No need for enzyme delivery
- Human protein vs one of bacterial origin

### Challenges

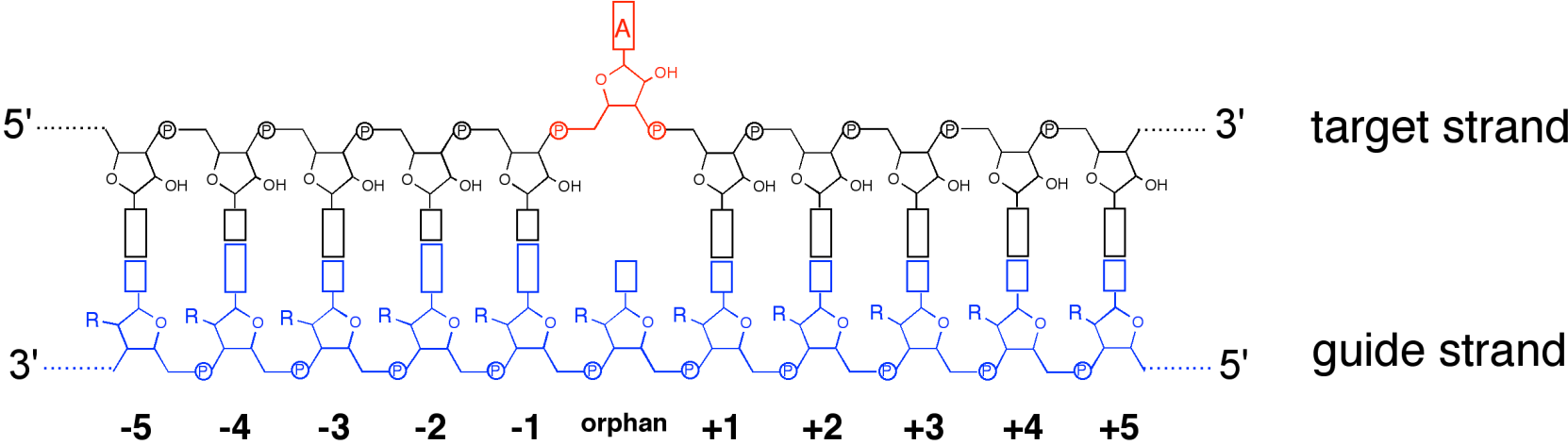
- Continuous administration of therapeutic may be necessary
- Low editing efficiency for certain target sequences



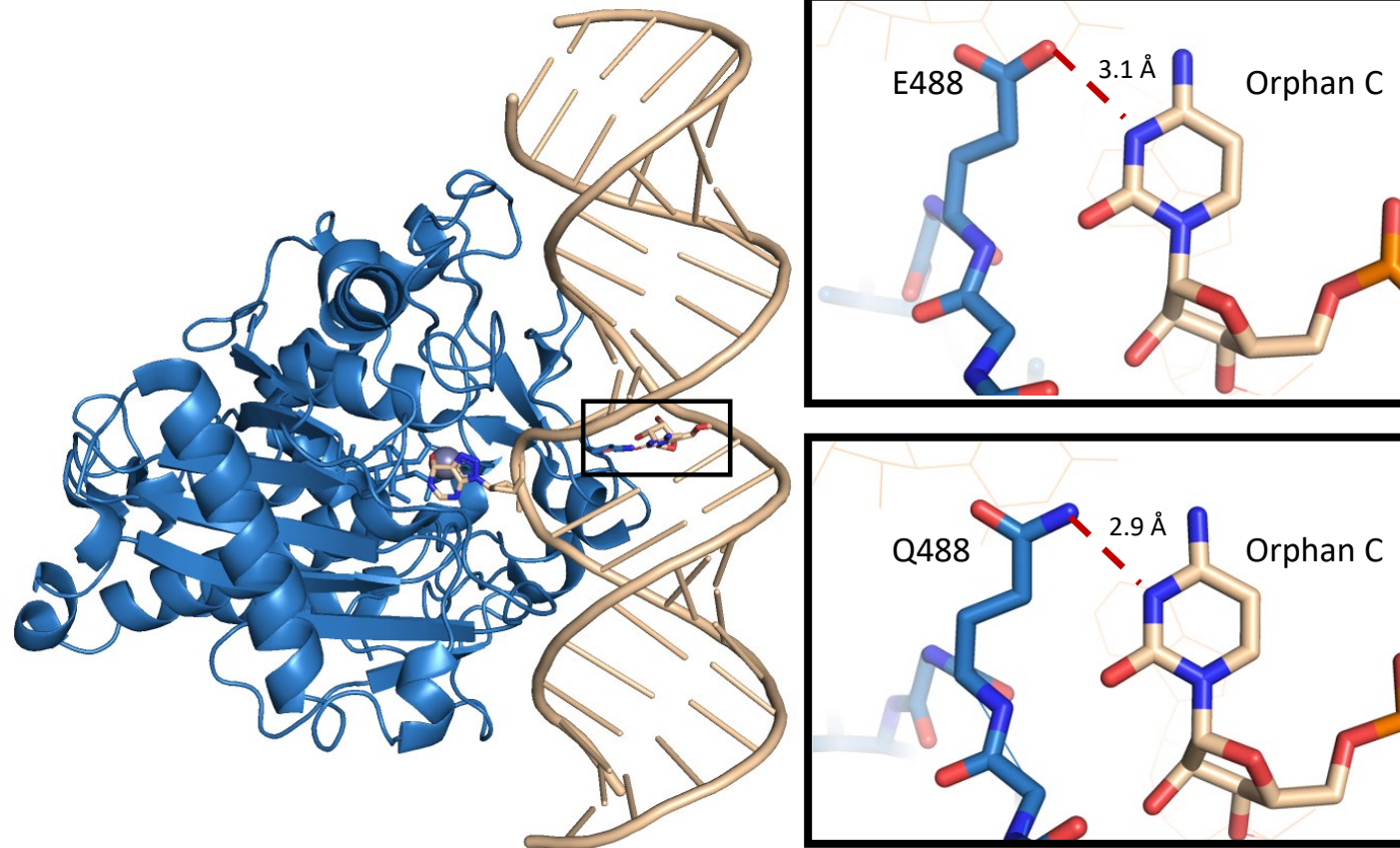


-Matthews, M.M.; Thomas, J.M.; Zheng, Y.; Tran, K.; Phelps, K.J.; Scott, A.I.; Havel, J.; Fisher, A.J.; Beal, P.A.  
*Nat. Struct. Mol. Biol.* **2016**, 23, 426-433.

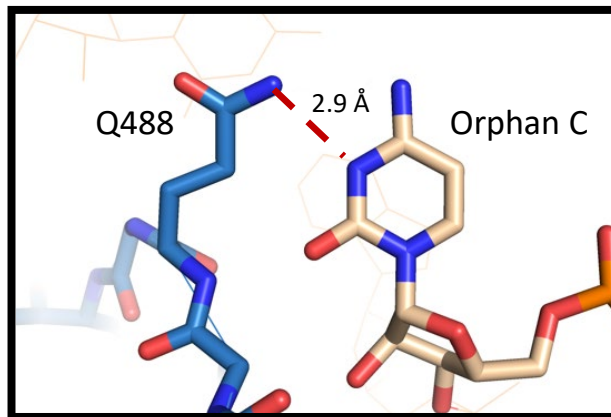
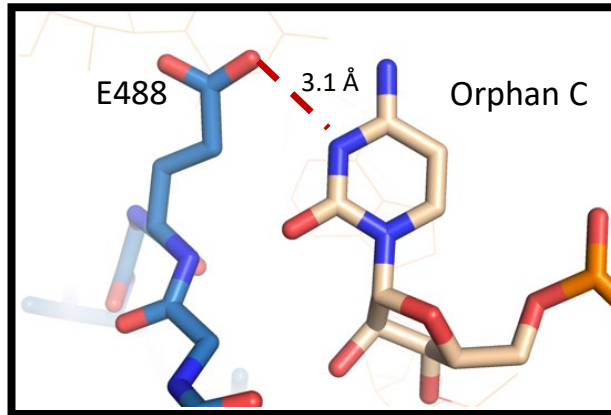
# Directed RNA editing by ADARs-Guide strand optimization



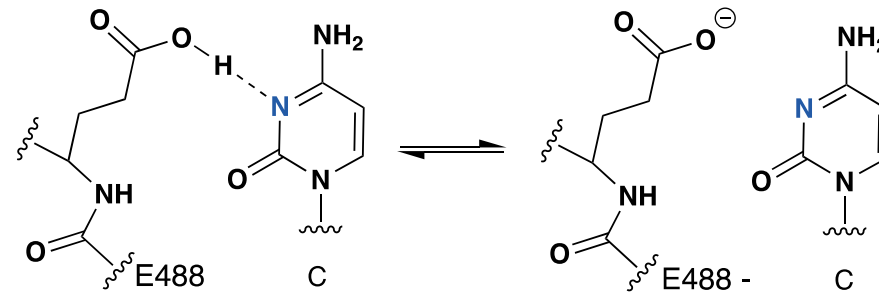
## Orphan base contacts in ADAR2-RNA complexes



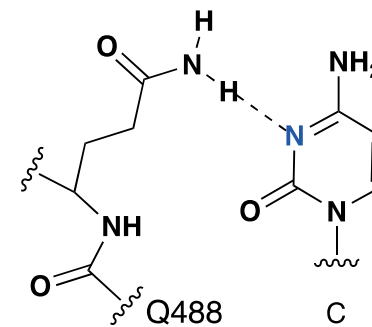
## Orphan base contacts in ADAR2-RNA complexes



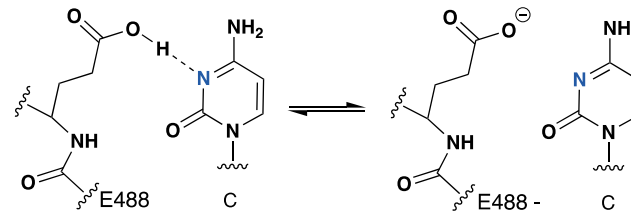
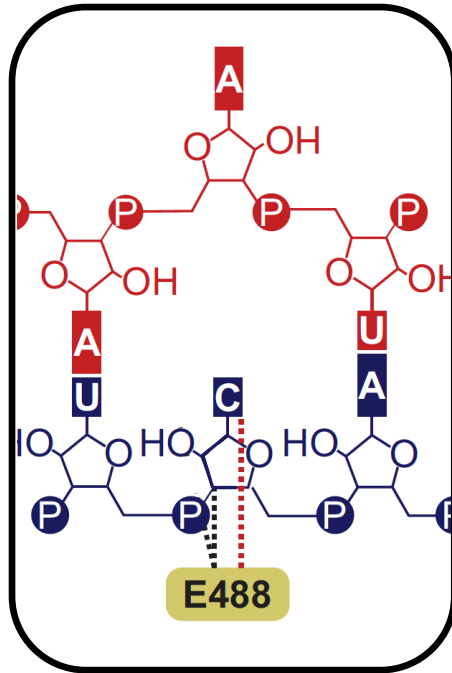
**Wild Type-Cytidine**  
Protonation-Dependent Hydrogen Bonding



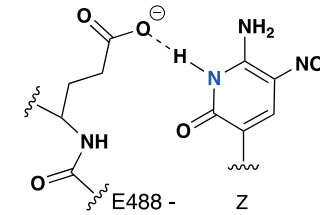
**E488Q-cytidine**



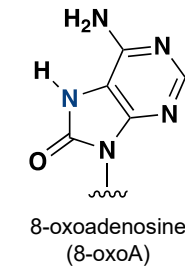
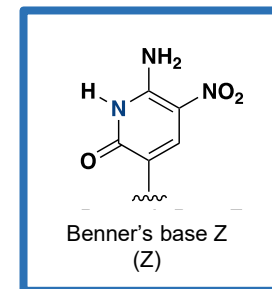
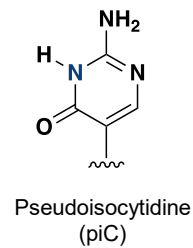
## Cytidine analogs to increase editing efficiency



ADAR2 - cytidine

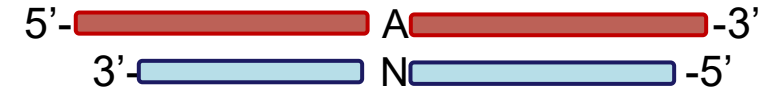


ADAR2 cytidine analog



cytidine analogs

# Cellular editing is enhanced by the Z base



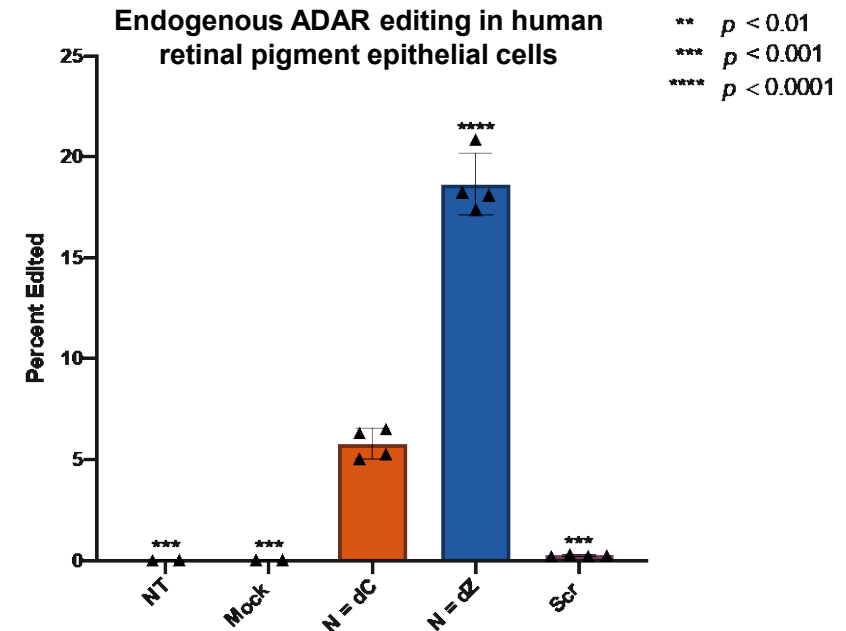
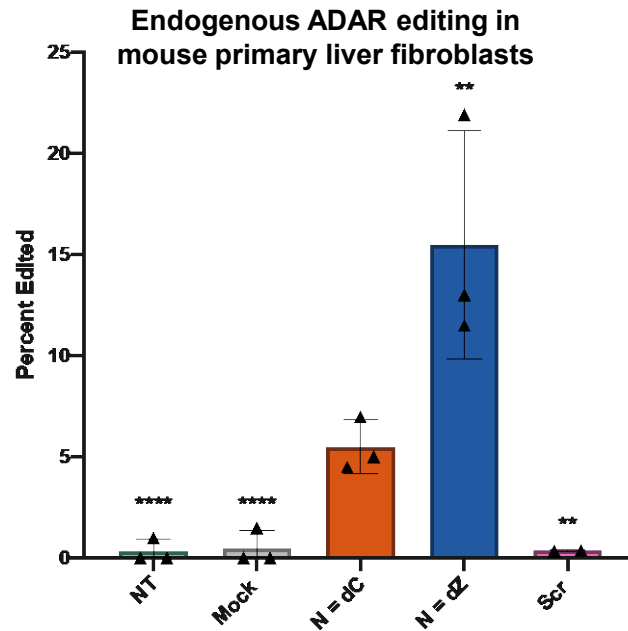
[N] DNA

N 2'-OMe

\* PS

5'-G\*C\*C\*C\*A\*GCCUUUGAG\*A\*C\*U\*CUGUC[NAG]AGUU\*G\*U\*U\*C\*U-'3

5'-C\*A\*A\*G\*G\*U\*GAUGACGAU\*C\*A\*C\*U\*GUCG[CNA]UGACA\*A\*C\*A\*C\*G\*C-'3



# ADARs have 5' nearest neighbor preference

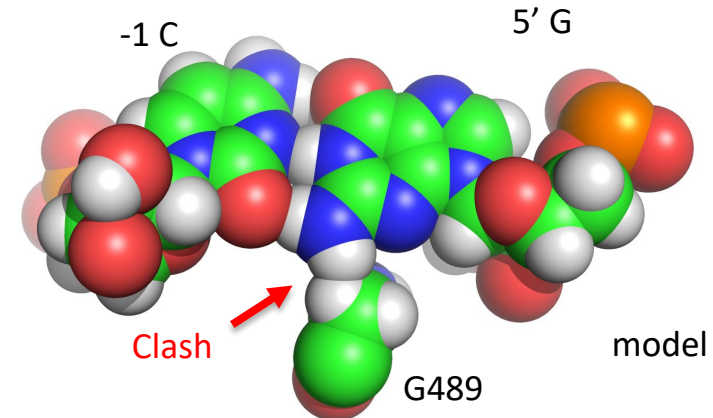
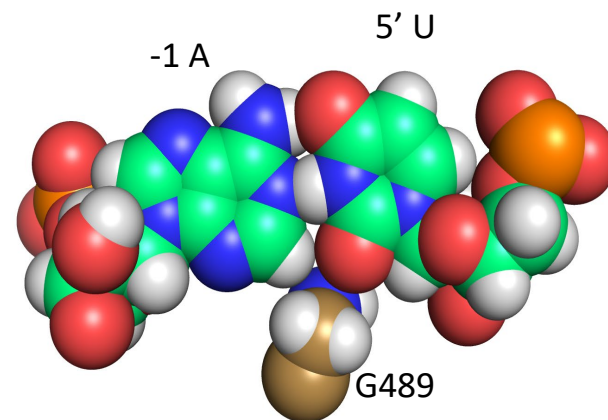
enriched

depleted

enriched

depleted

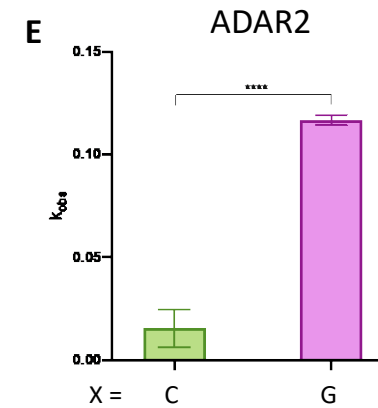
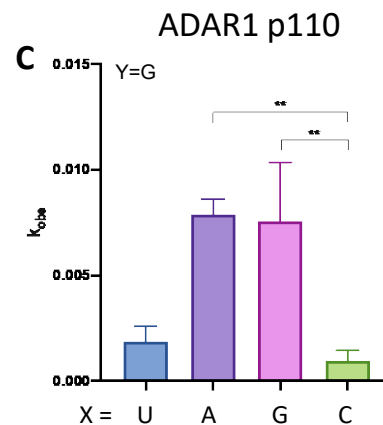
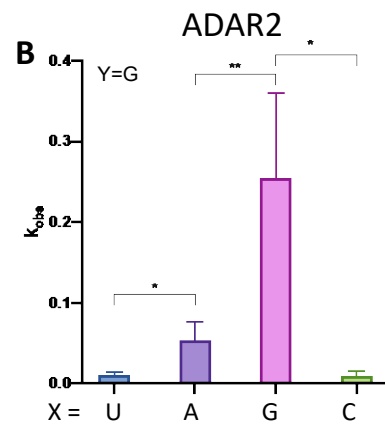
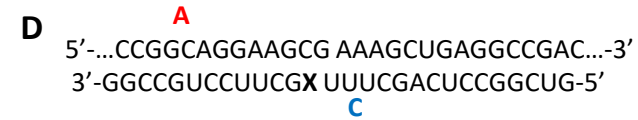
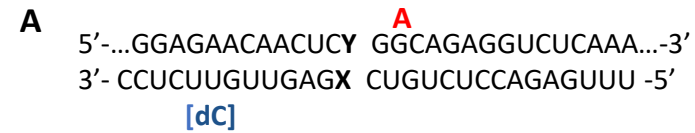
-Eggington, J.M.; Greene, T.; Bass, B.L. *Nat. Comm.* **2011**,2:319.



*Nat. Struct. Mol. Biol.* **2016**, *23*, 426-433

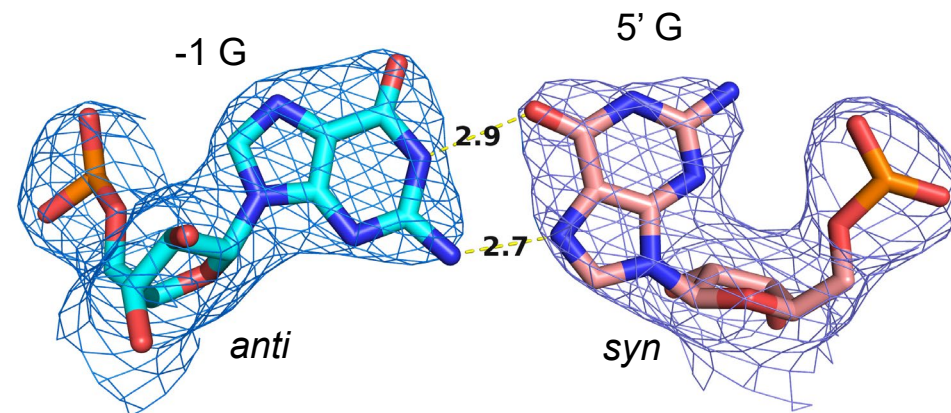
ProQR Therapeutics – R&D day 2023

# G-G and G-A Pairs Enable Editing for targets with 5' G



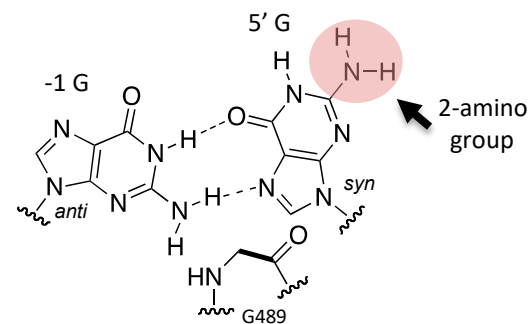
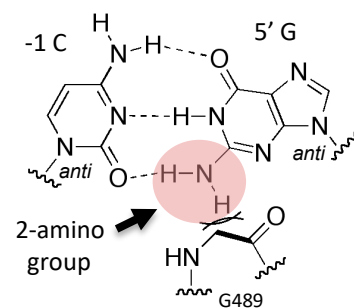
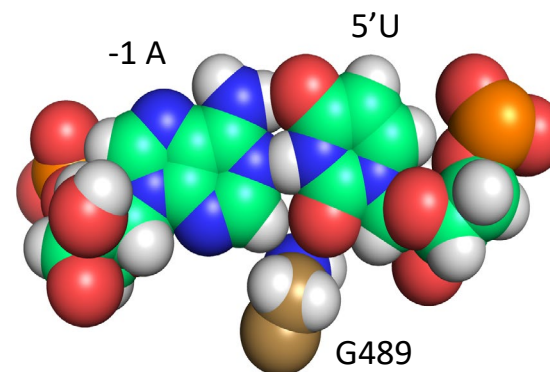
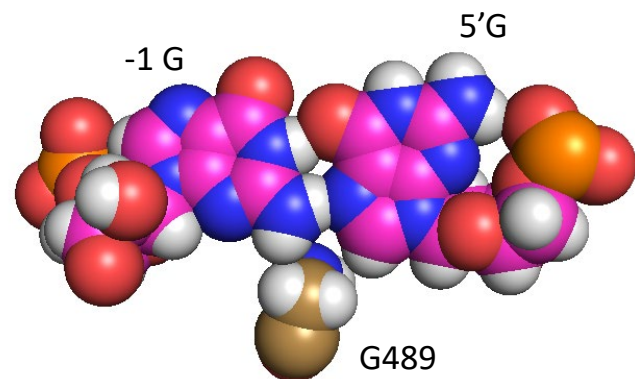


# Crystal structure of ADAR-*RNA* complex shows G-G with a specific pairing geometry



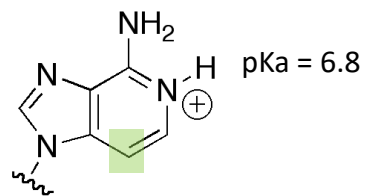
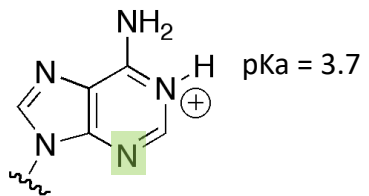
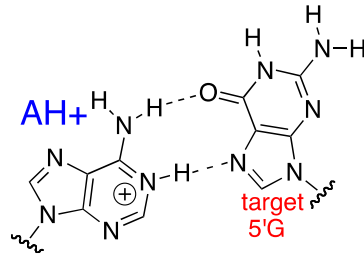
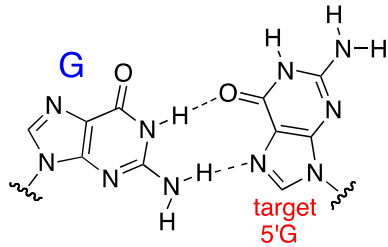
# Inducing syn conformation at 5' G solves steric problem

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# Effects of purine analogs paired with 5' G

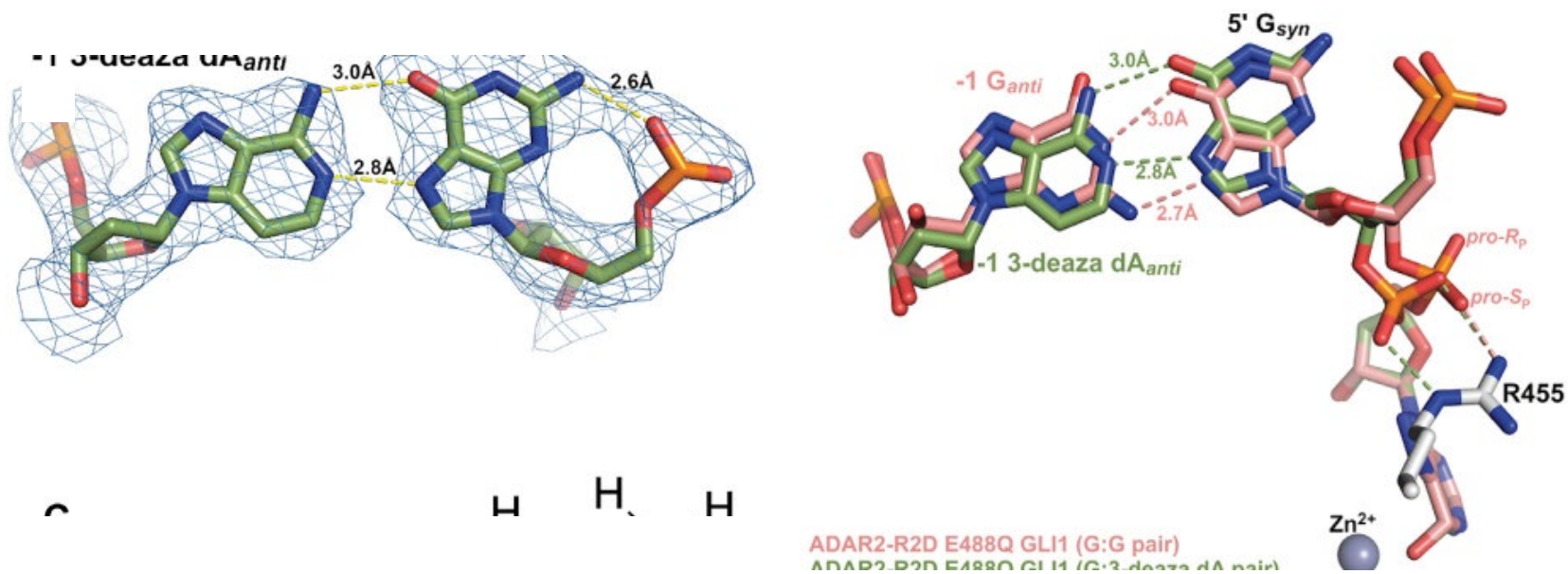
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3-deaza dA

Krishnamurthy, R. *Acc. Chem. Res.* **2012**, 45, 12, 2035-2044.

# Structure of ADAR-RNA complex with 3-deaza dA:G pair



# Summary

- ADAR-mediated RNA editing is capable of rewriting genetic information at the RNA level
- Human ADARs have important roles in neurobiology, innate immunity and cancer
- Synthetic oligonucleotides (EONs) can be used to direct ADARs to make corrective edits
- High-resolution structures of ADAR-RNA complexes, along with rigorous biochemical studies, have enabled optimization of EONs by rational design (e.g. Z at orphan base, 3-deazaA at -1 position)

## Beal Group

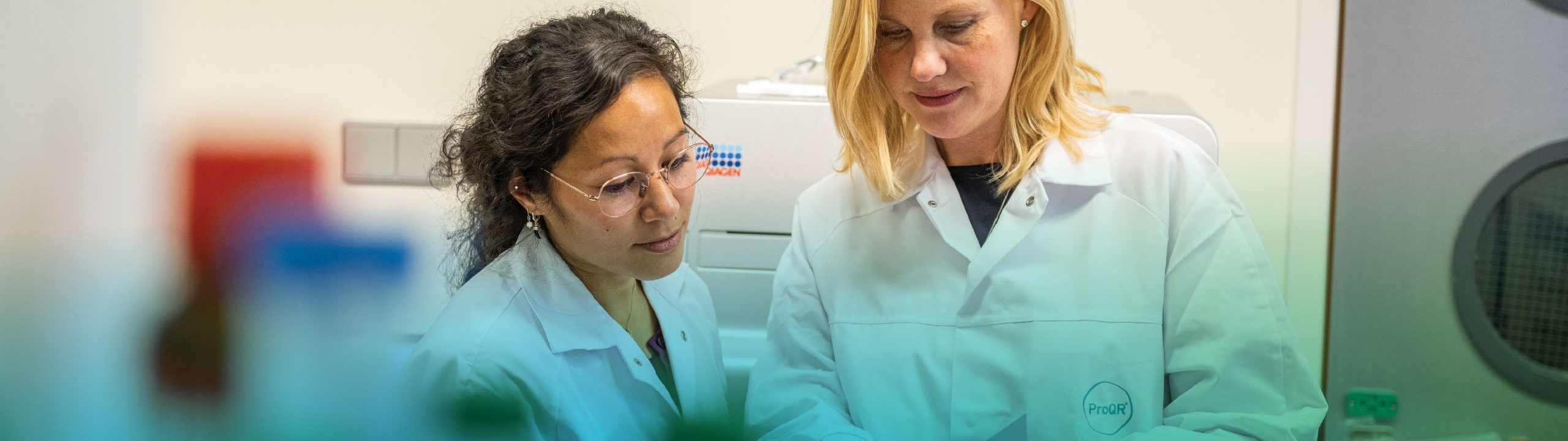
Prince Salvador  
Kristen Campbell  
Aashrita Manjunath  
Xander Wilcox  
Agya Karki  
Hannah Brinkman  
Casey Jacobsen  
Herra Mendoza  
Victorio Jáuregui Matos  
Bailey Wong  
Sukanya Mozumder  
Natalie Dugan



## Collaborators

Prof Ron Emeson (Vanderbilt)  
Turnee Malik (Emeson Lab, Vanderbilt)  
Prof Andy Fisher (UC Davis)  
Xander Wilcox (Fisher Lab, UC Davis)  
Prof Dean Tantillo (UC Davis)  
Dr. Lenka van Sint Fiet (ProQR)





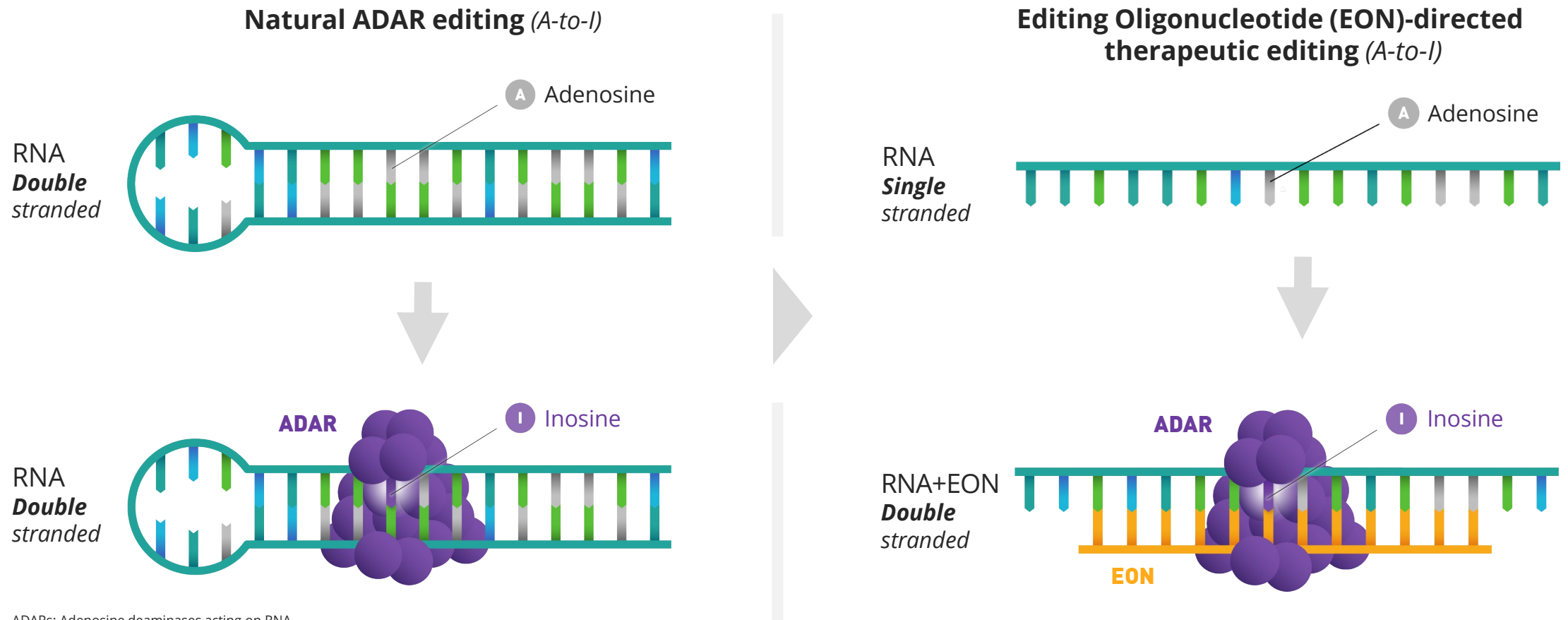
# Axiomer<sup>®</sup> platform overview

*Gerard Platenburg, Chief Scientific Officer*

**DISCLAIMER:** THIS SECTION CONTAINS DATA GENERATED IN HOUSE AND IN COLLABORATION EXPLAINING THE UNDISCLOSED TARGETS IN SOME OF THE FOLLOWING SLIDES

# Axiomer<sup>®</sup> EONs unlock cellular machinery potential to treat diseases

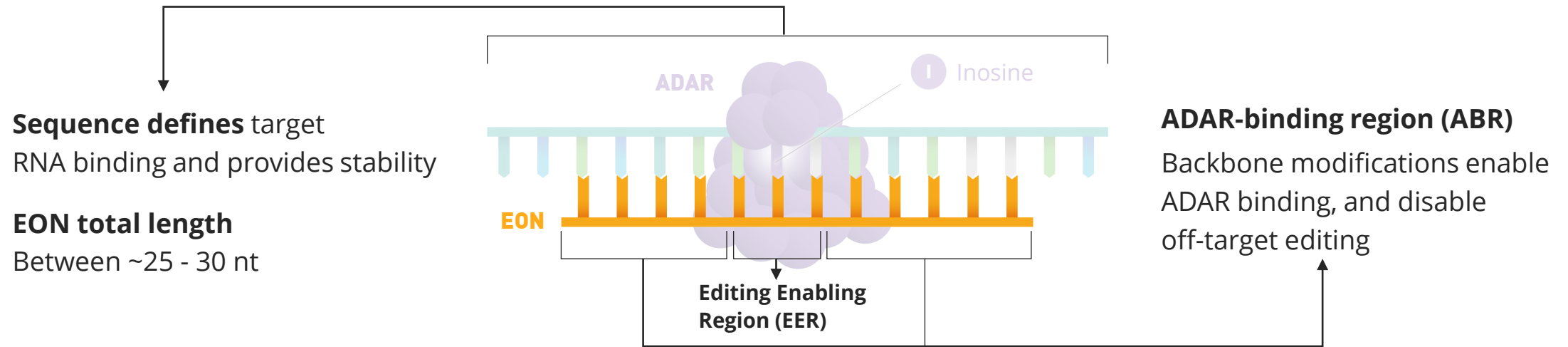
*By attracting ADARs and allowing highly specific editing*



ADARs: Adenosine deaminases acting on RNA.



# Driving the development of optimized EONs for therapeutic use



## Optimized sequence and chemistry define functionality



Increase editing efficacy



Bring metabolic stability



Prevent off-target ('bystander') editing



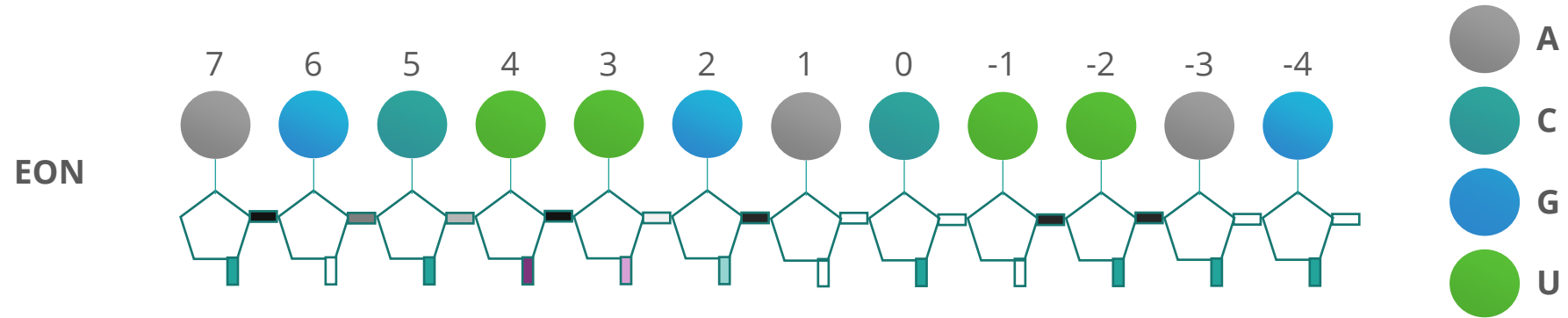
Ensure bioavailability (cell and tissue uptake)



Offer safety and tolerability at therapeutic doses

ADAR: Adenosine deaminase acting on RNA, EON: Editing oligonucleotide, Nt: nucleotides

# Accelerating program advancement with focus on design principles



	Aspect	Determined by	Modifications	Effects
○	Base	Target RNA	Mismatches and analogs	Improved PD
	Ribose modification	ADAR structure	2'-H; 2'-OMe; 2'-MOE; 2'-F; 2'-NH <sub>2</sub> , LNA, TNA, diF, 2'-FANA	Improved PK and PD
□	Linkage	ADAR structure	PO; PS; PN; MeP; UNA; PAc	Improved PK and PD

**This work led to a portfolio of 10 published patent families**

ADAR: Adenosine deaminase acting on RNA, EON: Editing oligonucleotide, PD: pharmacodynamic, PK: pharmacokinetic

# Axiomer<sup>®</sup> RNA editing platform has broad potential



## Consistent RNA editing

in all models evaluated in nervous system and liver, including NHP *in vivo*



## Increased editing efficiency and hepatocyte uptake *in vivo*

GalNAc does not interfere with A-to-I editing and leads to editing increase



## Validation of Axiomer's potential for therapeutic targets

With positive effect on protein expression



## Broad applicability

With proof of concept in mutation correction and multiple forms of protein modulation

# Establishing a strong platform in multiple organs, targets and models



**Nervous  
system**

Targeting CNS and PNS

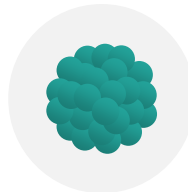


**Liver**

Targeting liver-originated diseases



**Cell  
models**



**Organoids**



**Mice  
*in vivo***



**NHP  
*in vivo***



**Model  
target**



**PoC therapeutic targets**  
Tool targets used for optimization



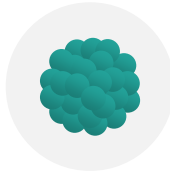
**Pipeline  
targets**

CNS: Central nervous system, NHP: Non-human primate, PNS: peripheral nervous system

# Assessing RNA editing across different models and targets in the nervous system



**Cell  
models**



**Cerebral  
Organoids**



**Mice  
*in vivo***



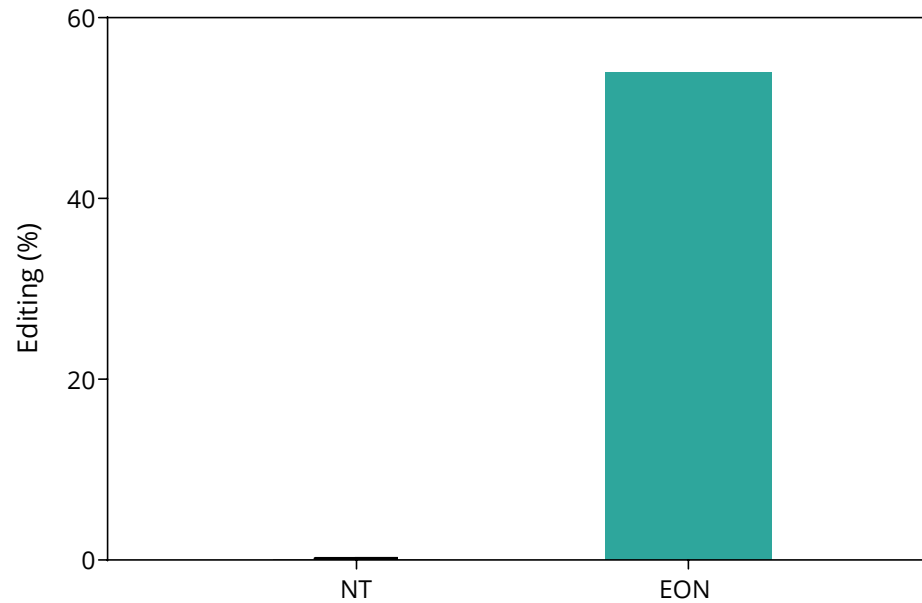
**NHP  
*in vivo***

# More than 50% RNA editing achieved in human iPSC derived neurons



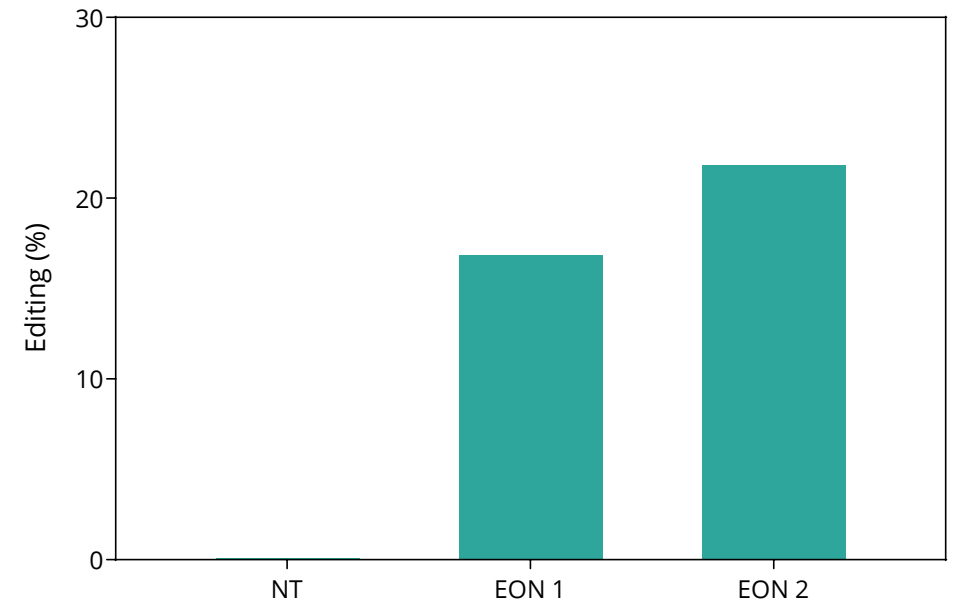
## RNA editing of *ACTB*

*Gymnosis, 2.5 $\mu$ M, single dose, n=1, 2 weeks, dPCR*



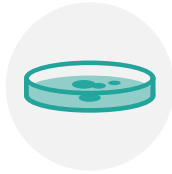
## RNA editing of *APP*

*Gymnosis, 10 $\mu$ M, single dose, washout, n=1, 2 weeks, dPCR*



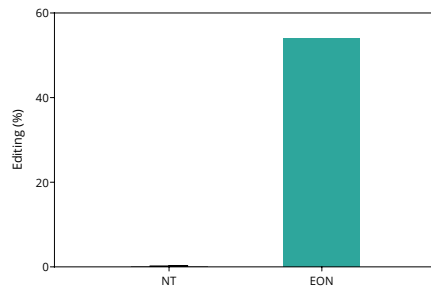
iPSC-derived neurons of 4-6 weeks of neuron maturation

# Assessing RNA editing across different models and targets in the nervous system

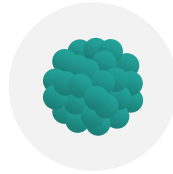
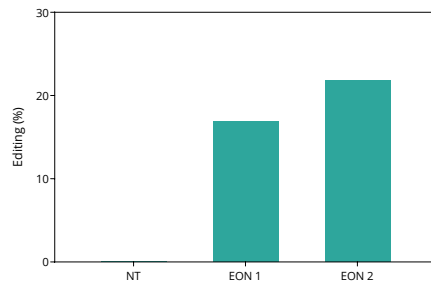


**Cell models**

**More than 50% RNA editing of *ACTB* in human iPSC derived neurons**



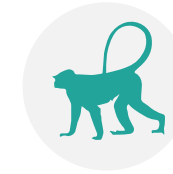
**More than 20% RNA editing of *APP* in human iPSC derived neurons**



**Cerebral organoids**



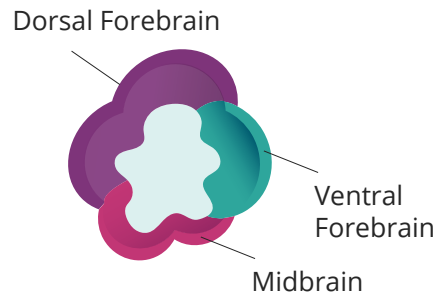
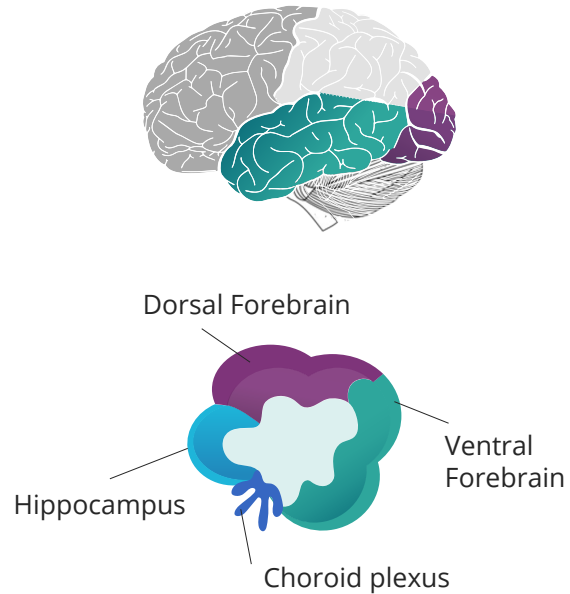
**Mice *in vivo***



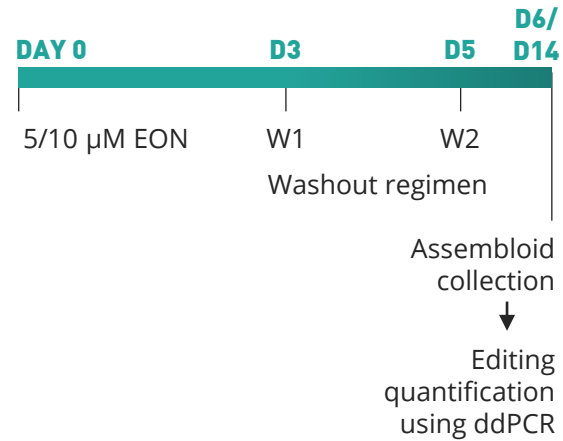
**NHP *in vivo***

Conditions of the *ACTB* iPSC derived neurons experiment: gymnosis, 2.5 $\mu$ M, single dose, n=1, 2 weeks, dPCR and conditions of the *APP* iPSC derived neurons experiment: gymnosis, 10 $\mu$ M, single dose, washout, n=1, 2 weeks, dPCR.

# Up to 65% RNA editing achieved in iPSC derived cerebral organoids



## Gymnotic uptake



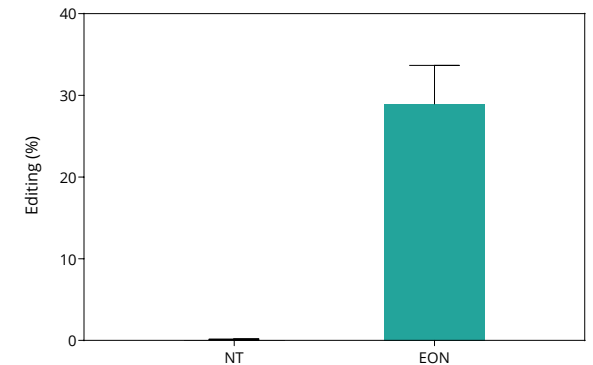
## Human cerebral organoids

130-150 days



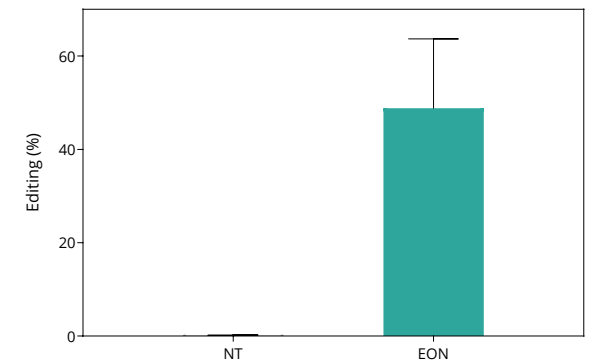
## RNA editing of *ACTB*

Gymnosis, 10 $\mu$ M, single dose, washout, n=7, 6 days, ddPCR, mean, SD



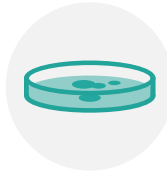
## RNA editing of *APP*

Gymnosis, 5 $\mu$ M, single dose, washout, n=5, 2 weeks, ddPCR, mean, SD



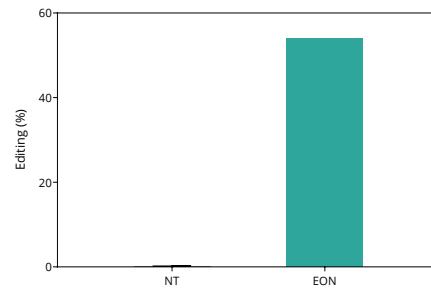


# Assessing RNA editing across different models and targets in the nervous system

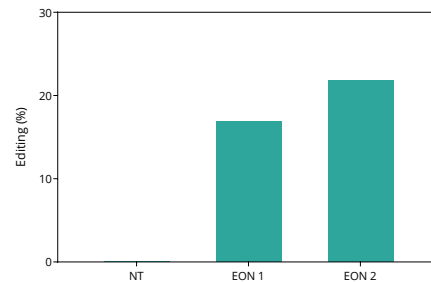


## Cell models

More than 50% RNA editing of *ACTB* in human iPSC derived neurons

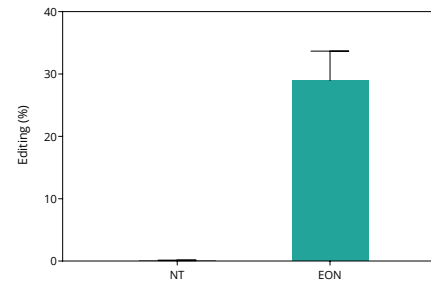


More than 20% RNA editing of *APP* in human iPSC derived neurons

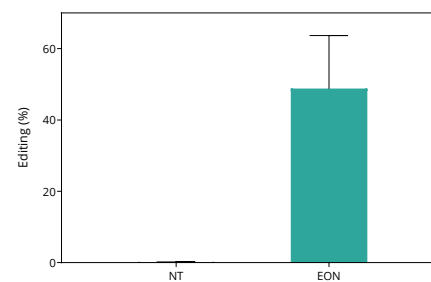


## Cerebral organoids

Up to 35% RNA editing of *ACTB* in cerebral organoids



Up to 65% RNA editing of *APP* in cerebral organoids



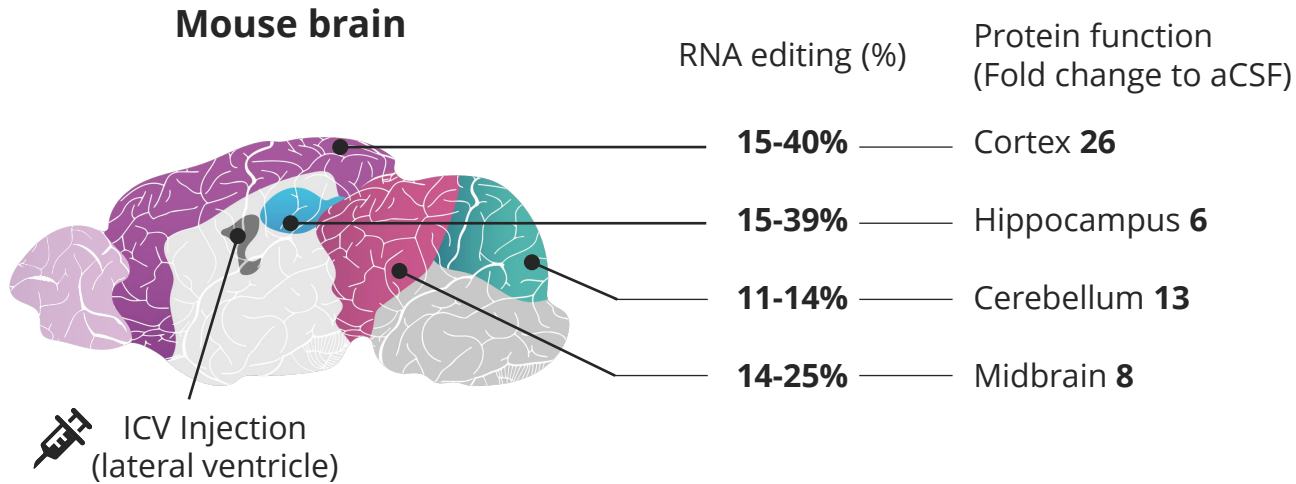
## Mice *in vivo*



## NHP *in vivo*

Conditions of the *ACTB* iPSC derived neurons experiment: gymnosin, 2.5μM, single dose, n=1, 2 weeks, dPCR and conditions of the *APP* iPSC derived neurons experiment: gymnosin, 10μM, single dose, washout, n=1, 2 weeks, dPCR. Conditions of the *ACTB* cerebral organoids of 130 days: gymnosin, 10μM, single dose, washout, n=7, 6 days, ddPCR, mean, SD and *APP* cerebral organoids of 150 days: gymnosin, 5μM, single dose, washout, n=5, 2 weeks, ddPCR, mean, SD

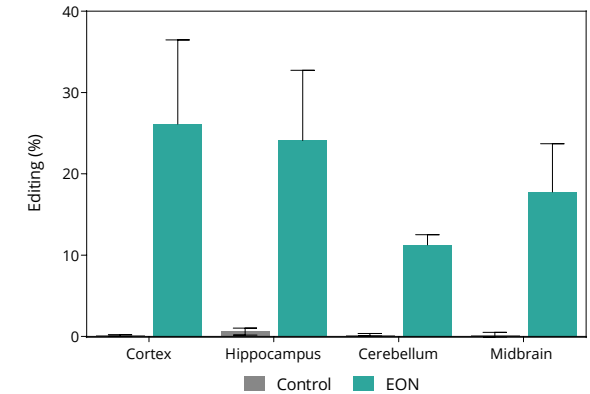
# RNA editing leads to protein function recovery in brain tissues of interest *in vivo*



**Up to 40% editing *in vivo* leading to 26-fold change in protein function recovery at 4 weeks with a single dose**

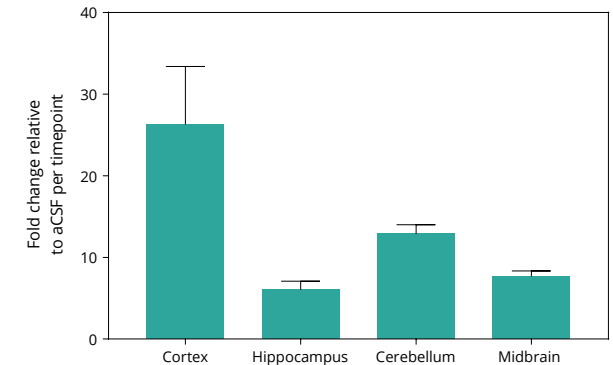
## RNA editing in mice brain\*

ICV, 250µg, single dose, n=6, 4 weeks, ddPCR, mean, SD



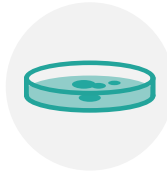
## Protein function in mice brain\*

ICV, 250µg, single dose, n=6, 4 weeks, western blot, mean, SEM



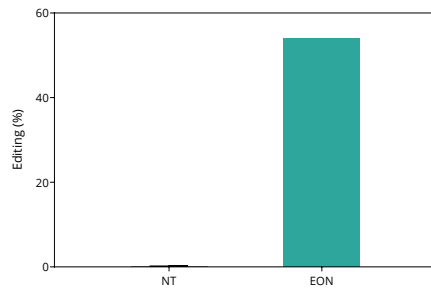
\*Undisclosed target. ICV: intracerebroventricular, aCSF: artificial cerebrospinal fluid. Mouse brain (sagittal) from Allen Mouse Brain Atlas

# Assessing RNA editing across different models and targets in the nervous system

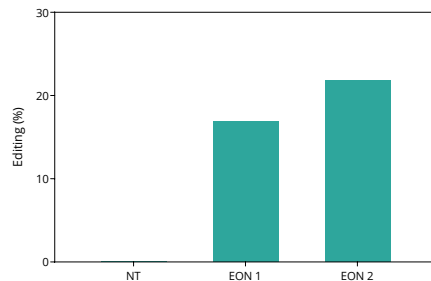


## Cell models

More than 50% RNA editing of *ACTB* in human iPSC derived neurons

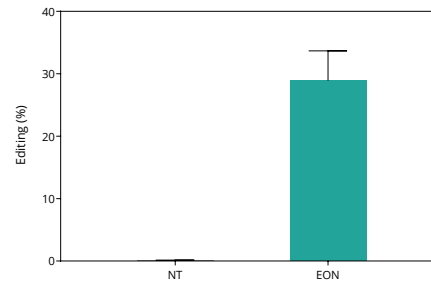


More than 20% RNA editing of *APP* in human iPSC derived neurons

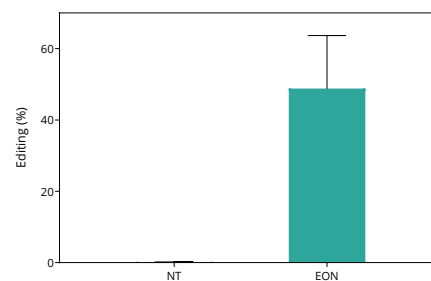


## Cerebral organoids

Up to 35% RNA editing of *ACTB* in cerebral organoids

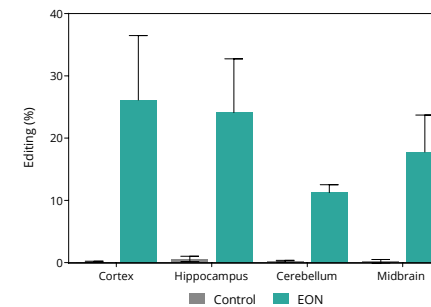


Up to 65% RNA editing of *APP* in cerebral organoids

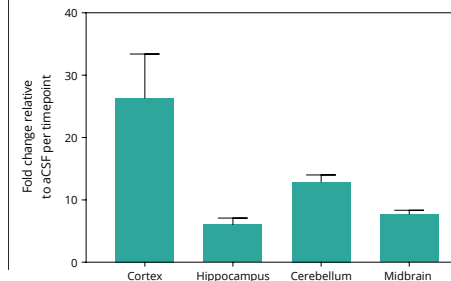


## Mice *in vivo*

Up to 40% RNA editing in mice brain\*



26-fold change in protein function in mice brain\*



## NHP *in vivo*

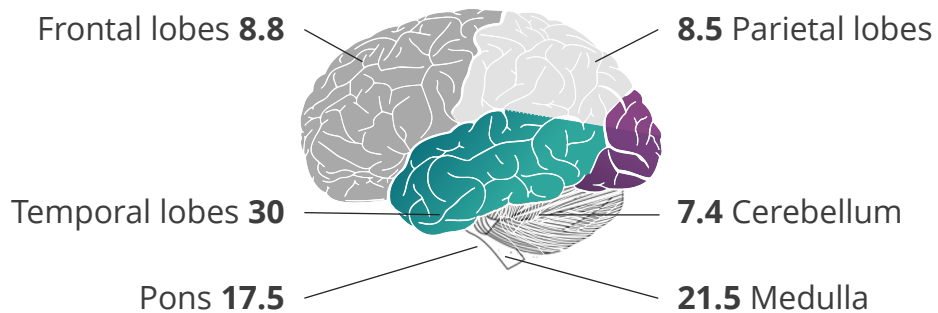
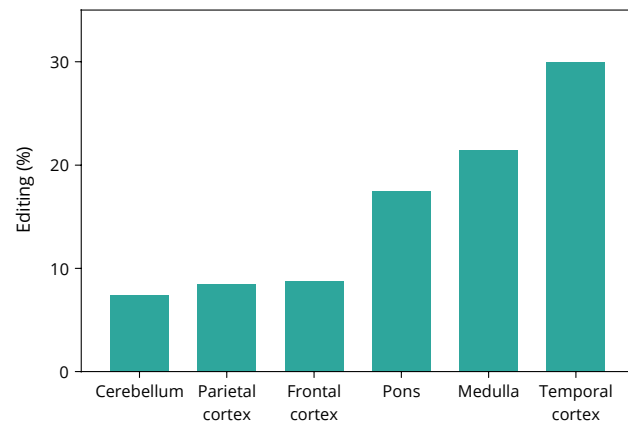
\*Undisclosed target. Conditions of the *ACTB* iPSC derived neurons experiment: gymnosis, 2.5μM, single dose, n=1, 2 weeks, ddPCR and conditions of the *APP* iPSC derived neurons experiment: gymnosis, 10μM, single dose, washout, n=1, 2 weeks, ddPCR. Conditions of the *ACTB* cerebral organoids of 130 days: gymnosis, 10μM, single dose, washout, n=7, 6 days, ddPCR, mean, SD and *APP* cerebral organoids of 150 days: gymnosis, 5μM, single dose, washout, n=5, 2 weeks, ddPCR, mean, SD. Conditions of the mice *in vivo* experiment: intracerebroventricular (ICV), 250μg, single dose, n=6, 4 weeks, editing: ddPCR and protein function: western blot, mean, SD and SEM

# Up to 30% RNA editing reported in brain and approx. 50% in spinal cord in NHP *in vivo*



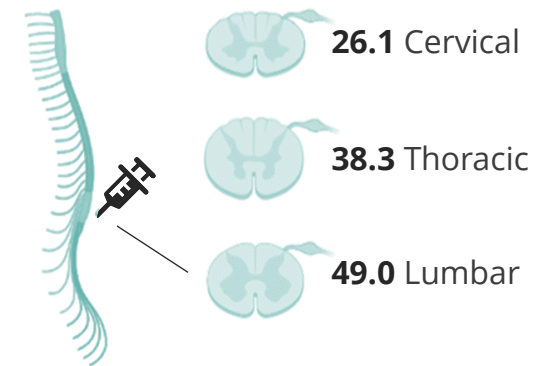
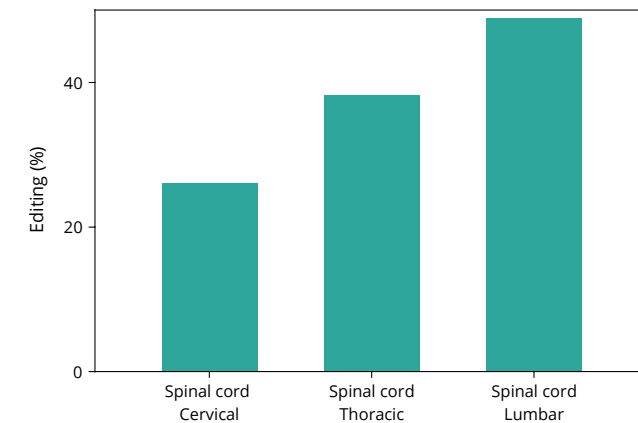
## RNA editing *in vivo* in NHP brain\*

IT administration, 12mg, single dose, n=3\*\*, 7 days, ddPCR



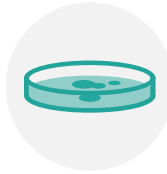
## RNA editing *in vivo* in NHP spinal cord\*

IT administration, 12mg, single dose, n=3\*\*, 7 days, ddPCR



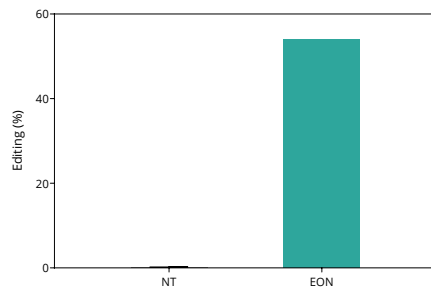
\*Undisclosed target. \*\*Data of 2 NHPs not analyzable due to human error during injection procedure. IT: intrathecal, NHP: non-human primate

# Consistent editing reported - including *in vivo* NHP - in the nervous system

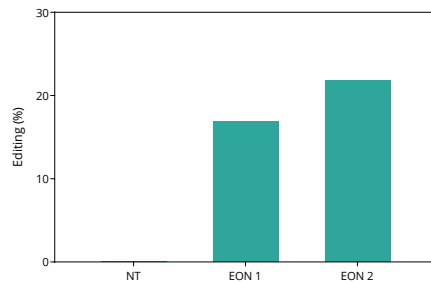


## Cell models

More than 50% RNA editing of *ACTB* in human iPSC derived neurons

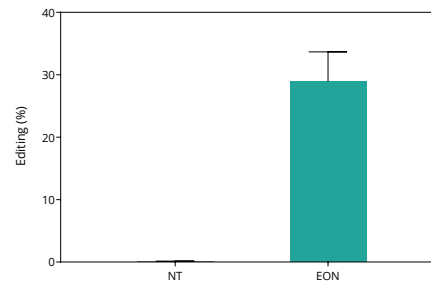


More than 20% RNA editing of *APP* in human iPSC derived neurons

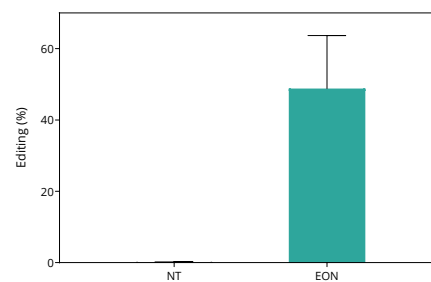


## Cerebral organoids

Up to 35% RNA editing of *ACTB* in cerebral organoids

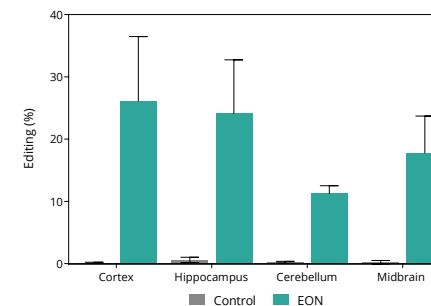


Up to 65% RNA editing of *APP* in cerebral organoids

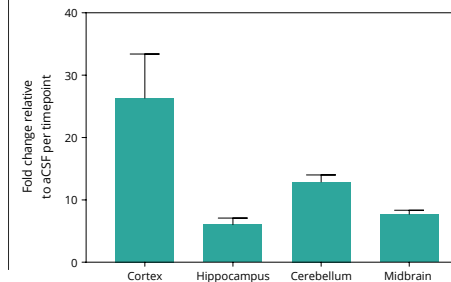


## Mice *in vivo*

Up to 40% RNA editing in mice brain\*

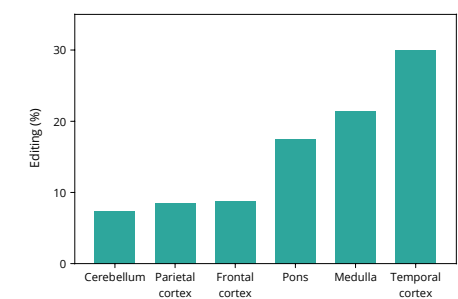


26-fold change in protein function in mice brain\*

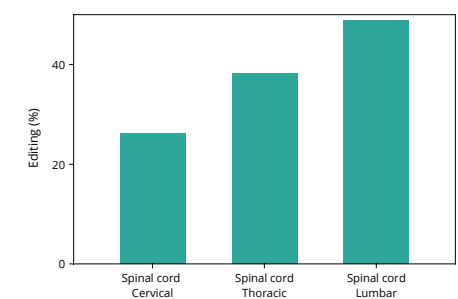


## NHP *in vivo*

Up to 30% RNA editing in NHP brain\*



Approx. 50% RNA editing in NHP spinal cord\*



\*Undisclosed target. Conditions of the *ACTB* iPSC derived neurons experiment: gymnosis, 2.5µM, single dose, n=1, 2 weeks, ddPCR and conditions of the *APP* iPSC derived neurons experiment: gymnosis, 10µM, single dose, washout, n=1, 2 weeks, ddPCR. Conditions of the *ACTB* cerebral organoids of 130 days: gymnosis, 10µM, single dose, washout, n=7, 6 days, ddPCR, mean, SD and *APP* cerebral organoids of 150 days: gymnosis, 5µM, single dose, washout, n=5, 2 weeks, ddPCR, mean, SD. Conditions of the mice *in vivo* experiment: intracerebroventricular (ICV), 250µg, single dose, N=6, 4 weeks, editing: ddPCR and protein function: western blot, mean, SD and SEM. Conditions of the non-human primate (NHP) *in vivo* experiment: intrathecal (IT), 12mg, single dose, n=3\*\*, 7 days. \*\* Data of 2 NHPs not analyzable due to human error during injection procedure.

# Establishing a strong platform in multiple organs, targets and models



**Nervous  
system**

Targeting CNS and PNS

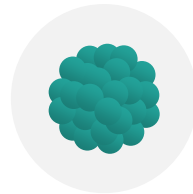


**Liver**

Targeting liver  
originated diseases



**Cell models**



**Organoids**



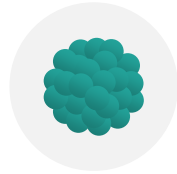
**Mice *in vivo***

CNS: Central nervous system, PNS: peripheral nervous system

# Advancing Axiomer<sup>®</sup> development across different models and targets in the liver



**Cell models**



**Liver organoids**



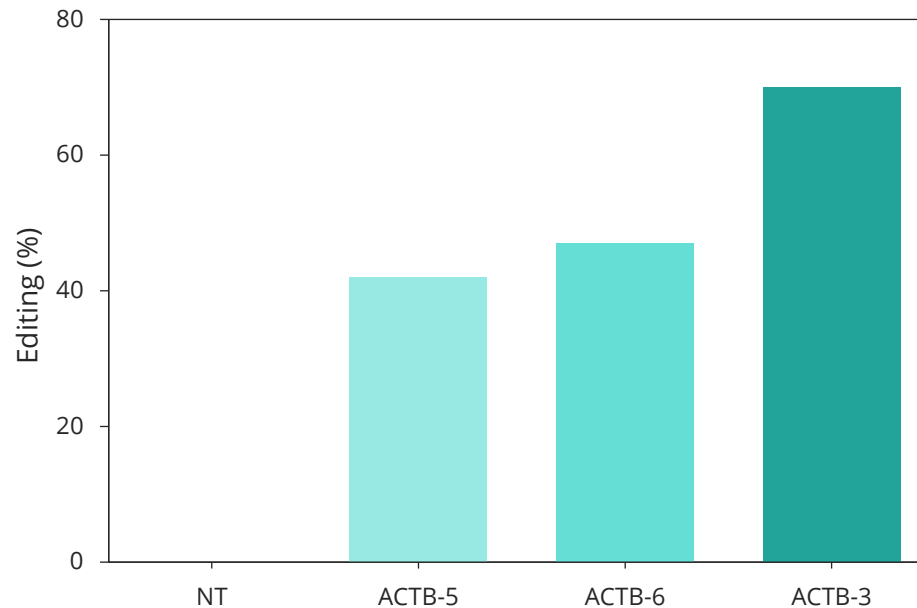
**Mice *in vivo***

# Up to 70% RNA editing in human primary hepatocytes



## RNA editing of *ACTB* in human primary hepatocytes

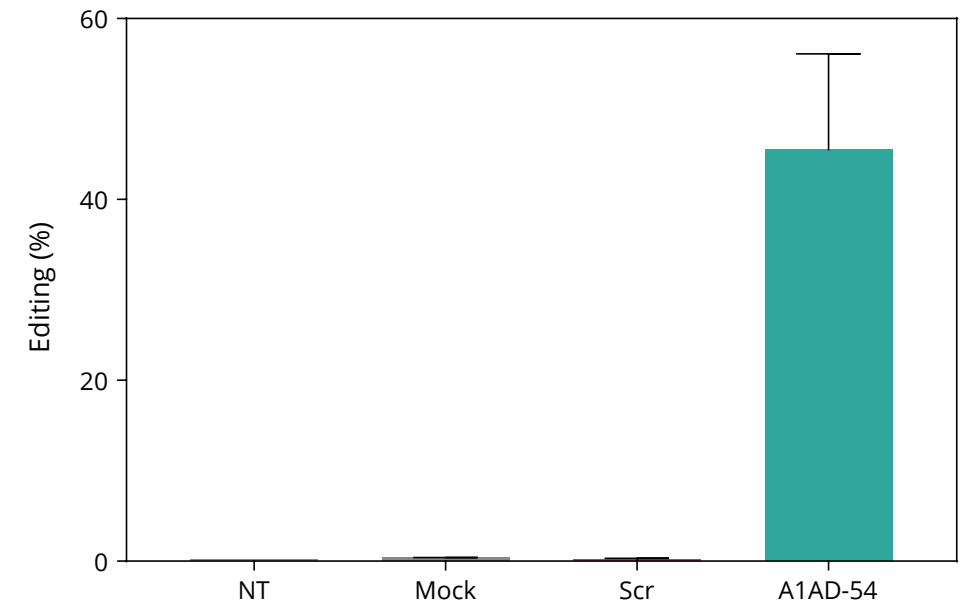
*Gymnosis, 10 $\mu$ M, single dose, n=1, 48 hours, dPCR*



Similar levels of RNA editing of *ACTB* achieved in several models of liver origin (not presented here)

## RNA editing of *SERPINA1* E366K in human A1AD patient hepatocytes

*Transfection, 100 nM, single dose, n=2, 47 hours, dPCR, mean, SD*



>50% RNA editing of *SERPINA1* E366K in human A1AD patient hepatocytes

A1AD: Alpha-1 antitrypsin deficiency.

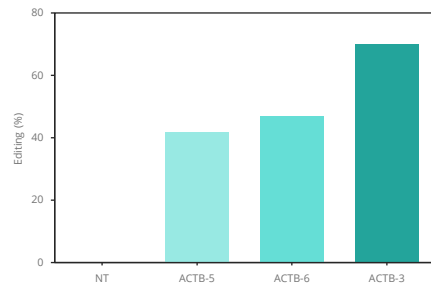


# Advancing Axiomer<sup>®</sup> development across different models and targets in the liver

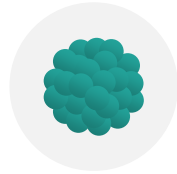
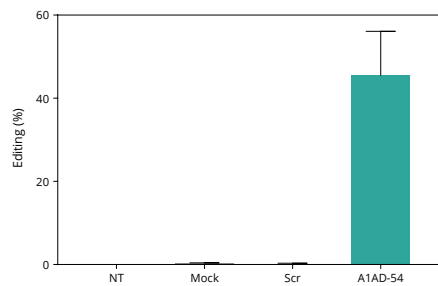


## Cell models

Up to 70% RNA editing of *ACTB* in human primary hepatocytes



>50% RNA editing of *SERPINA1* E366K in human A1AD patient hepatocytes



## Liver organoids



## Mice *in vivo*

Conditions of *ACTB* editing experiment in human primary hepatocytes experiment: gymnosis, 10uM, single dose, N=1, 48 hours, dPCR; Conditions of the of *SERPINA1* editing experiment in human A1AD patient hepatocytes experiment: transfection, 100 nM, single dose, N=2, 47 hours, dPCR, mean, SD.

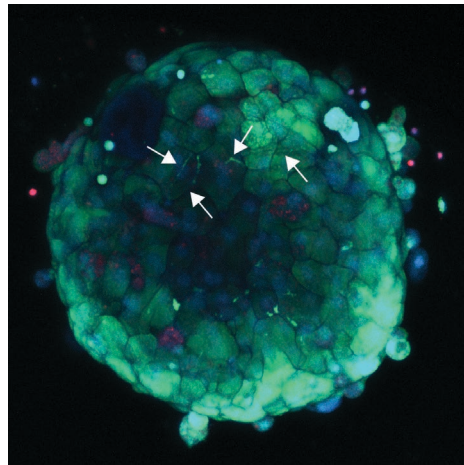
# Editing in InSphero Human Liver microtissues (LMTs)

Primary hepatocytes, Kupffer cells and liver endothelial cells in 3D spheroid

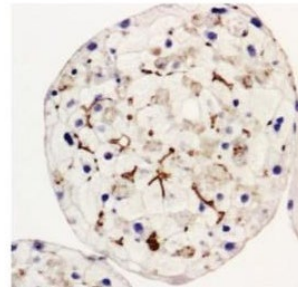


## Live imaging of LMT

Stained with 5-CFDA (green), PI (red)  
and Hoechst (blue)



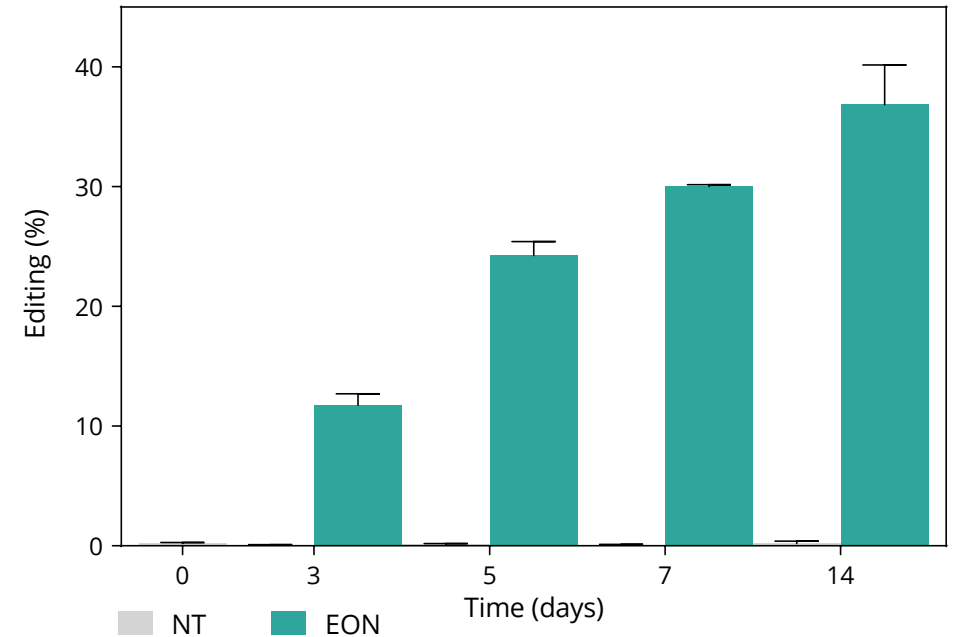
**BSEP** Bile Canaliculi  
(InSphero data)



Presence of bile channels in LMTs by day 7 fluorescent dye 5-CFDA secreted from healthy cells into bile channels (canaliculi)

## Editing of *ACTB* in human LMTs

Gymnosis, 1 $\mu$ M, constant dose, 3 pools of 24 LMTs  
per condition, 14 days, dPCR, mean, SD



Treatment of LMTs with 1 $\mu$ M EON for 14 days results in up to 40% RNA editing of *ACTB*

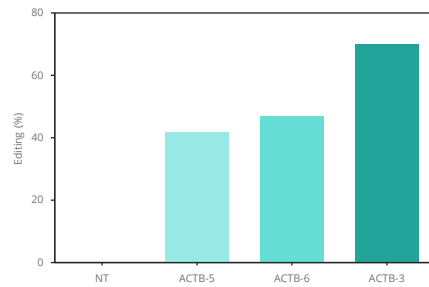
BSEP: Bile salt export pump, LMTs: Liver Microtissues constituted of primary hepatocytes, Kupffer cells and liver endothelial cells in 3D spheroid.

# Advancing Axiomer<sup>®</sup> development across different models and targets in the liver

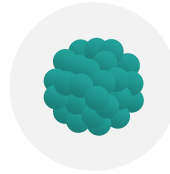
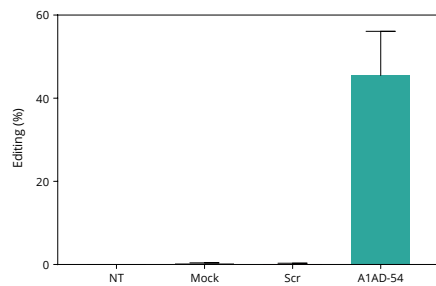


## Cell models

Up to 70% RNA editing of *ACTB* in human primary hepatocytes



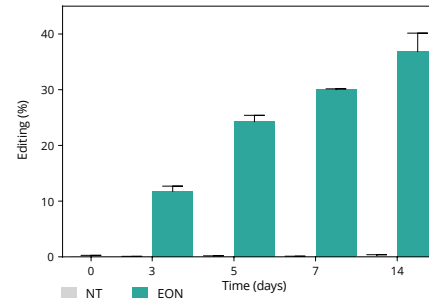
>50% RNA editing of *SERPINA1* E366K in human A1AD patient hepatocytes



## Liver organoids

Up to 40% RNA editing of *ACTB* in human LMTs

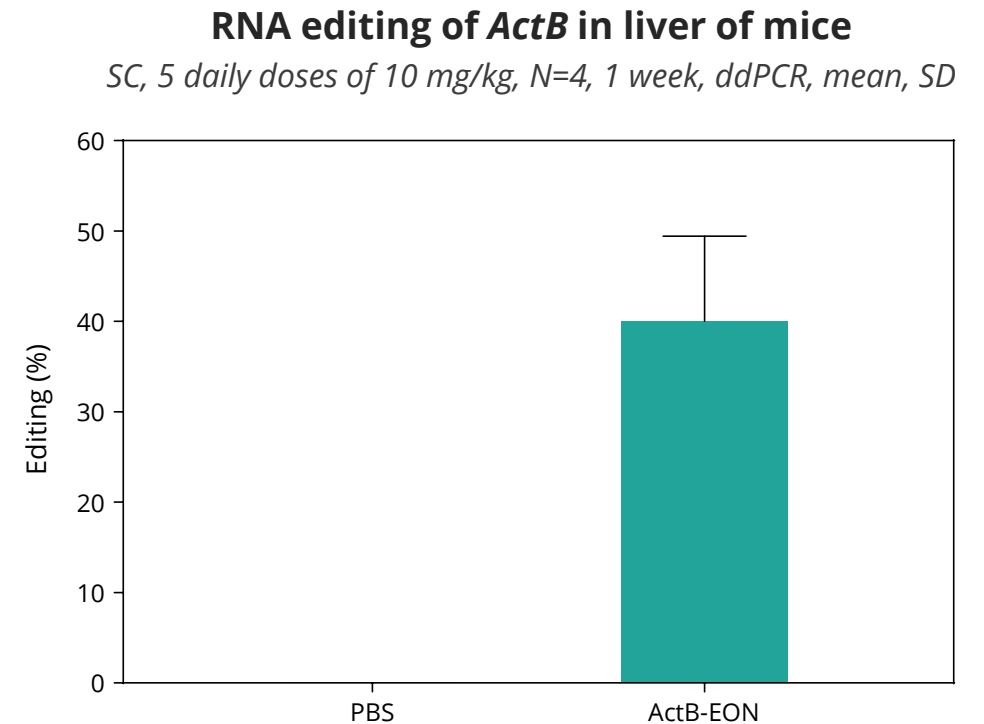
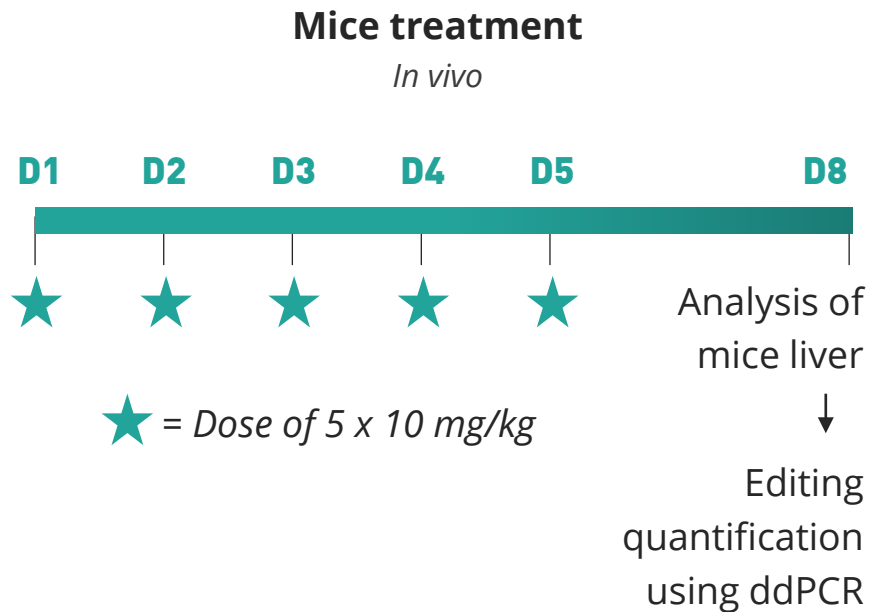
*Gymnosis, 1μM, constant dose, 3 pools of 24 LMTs per condition, 14 days, dPCR, mean, SD*



## Mice *in vivo*

Conditions of *ACTB* editing experiment in human primary hepatocytes experiment: gymnosis, 10uM, single dose, N=1, 48 hours, dPCR; Conditions of the of *SERPINA1* editing experiment in human A1AD patient hepatocytes experiment: transfection, 100 nM, single dose, N=2, 47 hours, dPCR, mean, SD. LMTs: human liver microtissues.

# Up to 50% RNA editing of *ActB* in liver of mice



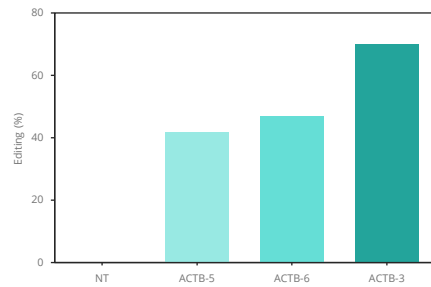
High *in vivo* RNA editing of *ActB* in the liver of mice reaching up to 50%

# Advancing Axiomer<sup>®</sup> development across different models and targets in the liver

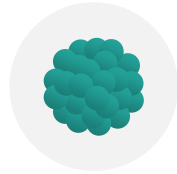
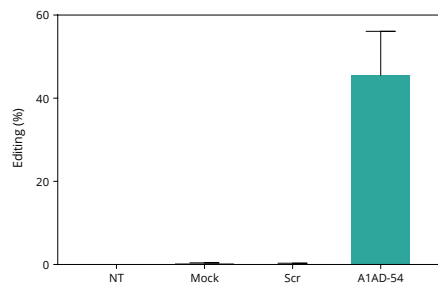


## Cell models

Up to 70% RNA editing of *ACTB* in human primary hepatocytes



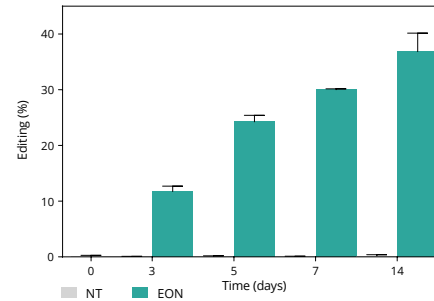
>50% RNA editing of *SERPINA1* E366K in human A1AD patient hepatocytes



## Liver organoids

Up to 40% RNA editing of *ACTB* in human LMTs

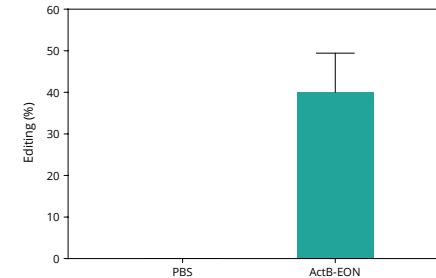
*Gymnosis*, 1 $\mu$ M, constant dose, 3 pools of 24 LMTs per condition, 14 days, dPCR, mean, SD



## Mice *in vivo*

Up to 50% RNA editing of *ActB* in liver of mice

*SC*, 5 daily doses of 10 mg/kg, N=4, 1 week, ddPCR, mean, SD



Conditions of *ACTB* editing experiment in human primary hepatocytes experiment: *Gymnosis*, 10 $\mu$ M, single dose, N=1, 48 hours, dPCR; Conditions of the of *SERPINA1* editing experiment in human A1AD patient hepatocytes experiment: transfection, 100 nM, single dose, N=2, 47 hours, dPCR, mean, SD. LMTs: human liver microtissues.

# Assessing the potential of GalNAc on cell uptake and RNA editing efficiency



**Liver**

Targeting liver  
originated diseases



**GalNAc**

Optimizing  
liver delivery



**BEA assay**



**Mice *in vivo***

BEA, Biochemical editing assay.

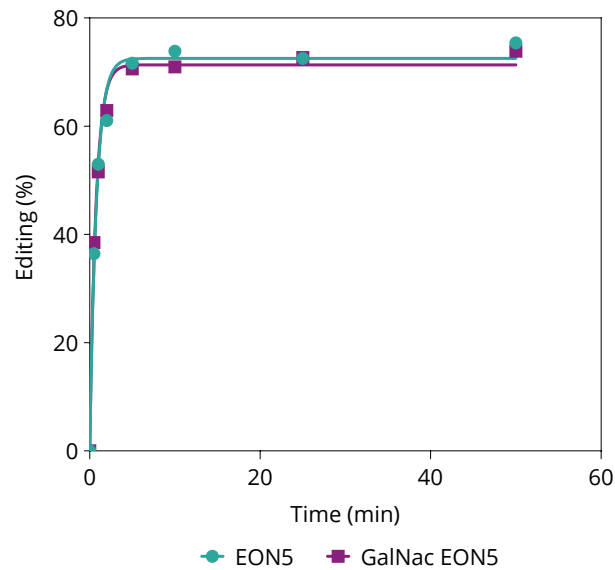
# Positive impact of GalNAc on cell uptake and RNA editing efficiency



## BEA assay

### GalNAc does not interfere A-to-I editing *in vitro*

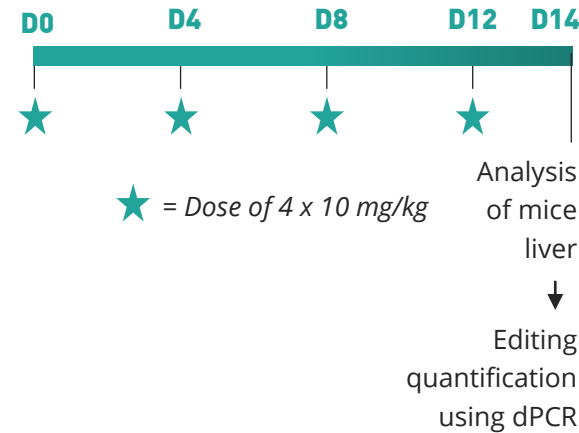
2nM target RNA, 6nM EON and 6nM ADAR2, N=1, BEA assay\*



## Mice *in vivo*

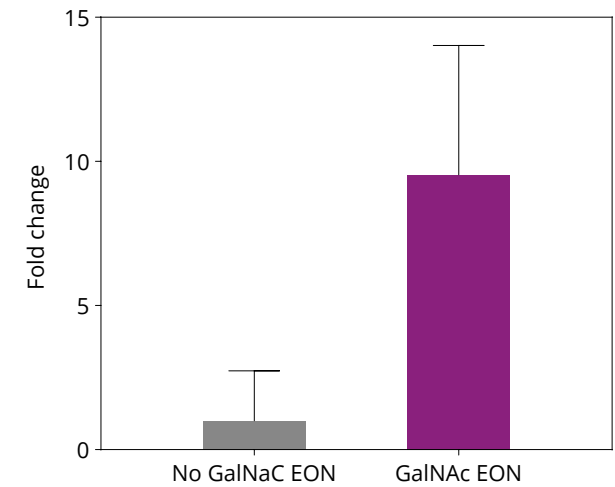
### Mice treatment

*In vivo*



### 10-fold change in editing in liver of mice\*\*

SC, 4 doses of 10 mg/kg, N=4-5, 2weeks, dPCR, mean, SD



BEA, Biochemical editing assay; SC, subcutaneous; SD, standard deviation. \*BEA assay timepoints 0, 0.5-, 1-, 2-, 5-, 10-, 25- and 50-min. \*\*Undisclosed target.

# Axiomer<sup>®</sup> PoC in the nervous system and liver across multiple models including *in vivo*



## Consistent RNA editing reported

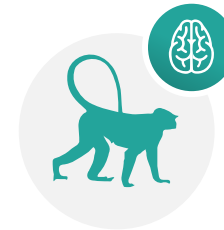
in all models in nervous system and liver



Up to 40% editing reported in the nervous system of mice *in vivo*



Up to 50% editing reported in the liver of mice *in vivo*



Approx. 50% editing reported in the nervous system of NHP *in vivo*

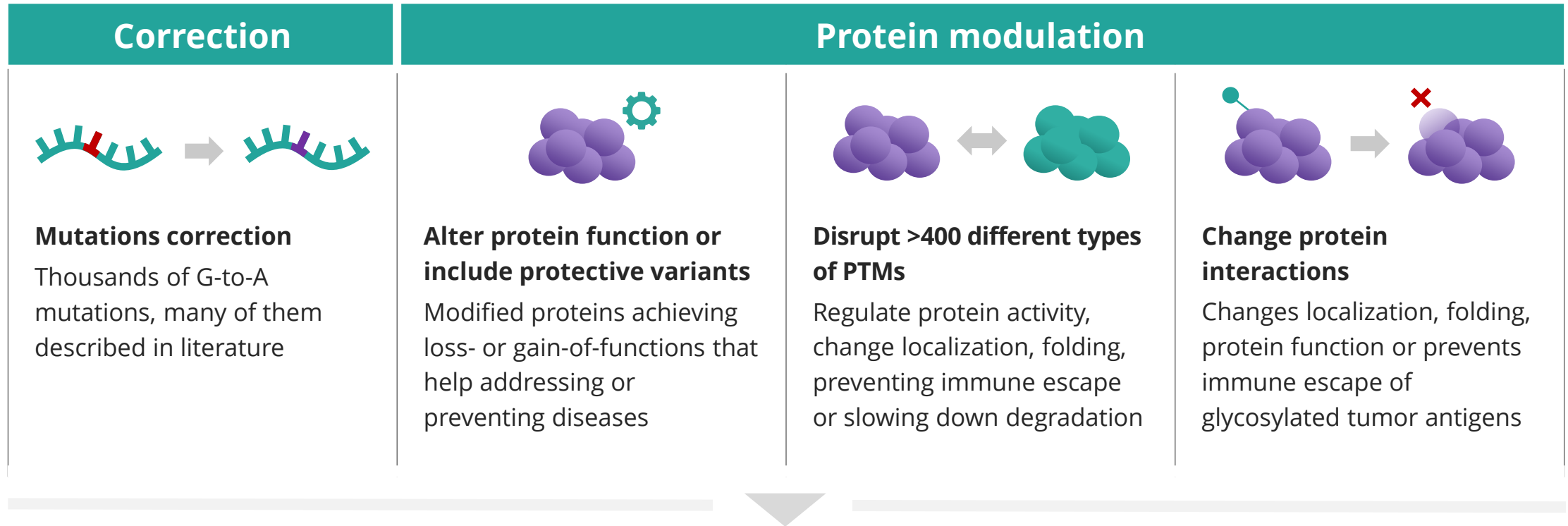


## Increased editing efficiency and hepatocyte uptake *in vivo*

GalNAc does not interfere with A-to-I editing and leads to a 10-fold editing increase



# Axiomer<sup>®</sup> creating a new class of medicines with broad therapeutic potential



## BROAD THERAPEUTIC POTENTIAL

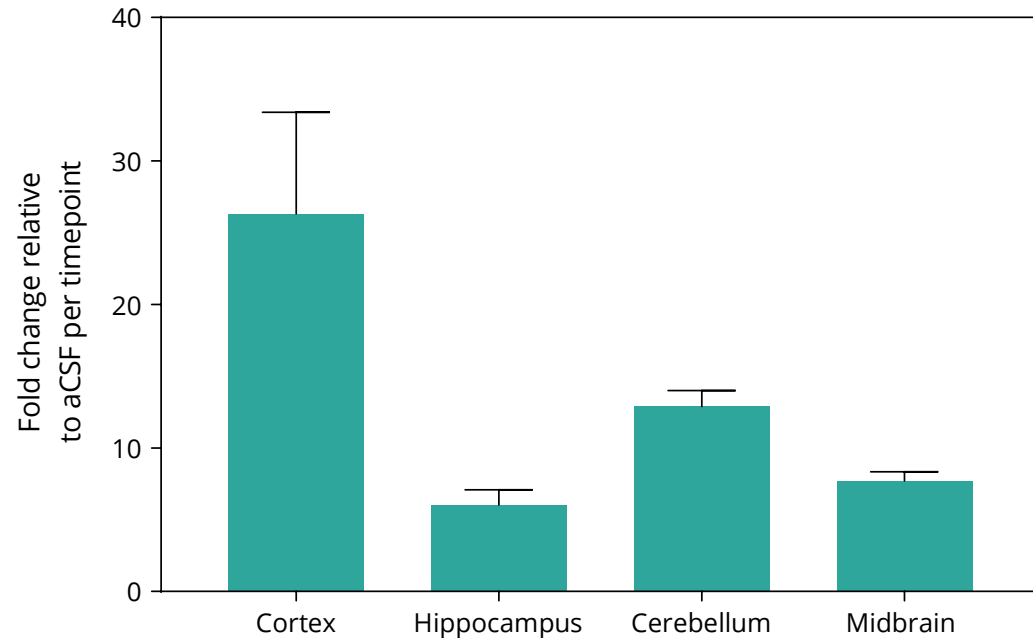
- ✔ Common diseases
- ✔ Rare diseases
- ✔ Target a wide variety of organs
- ✔ Treat so-far undruggable targets

PTMs: Post-translational modifications.

# Mutation correction with Axiomer<sup>®</sup> leads to protein recovery

## Protein function in mice

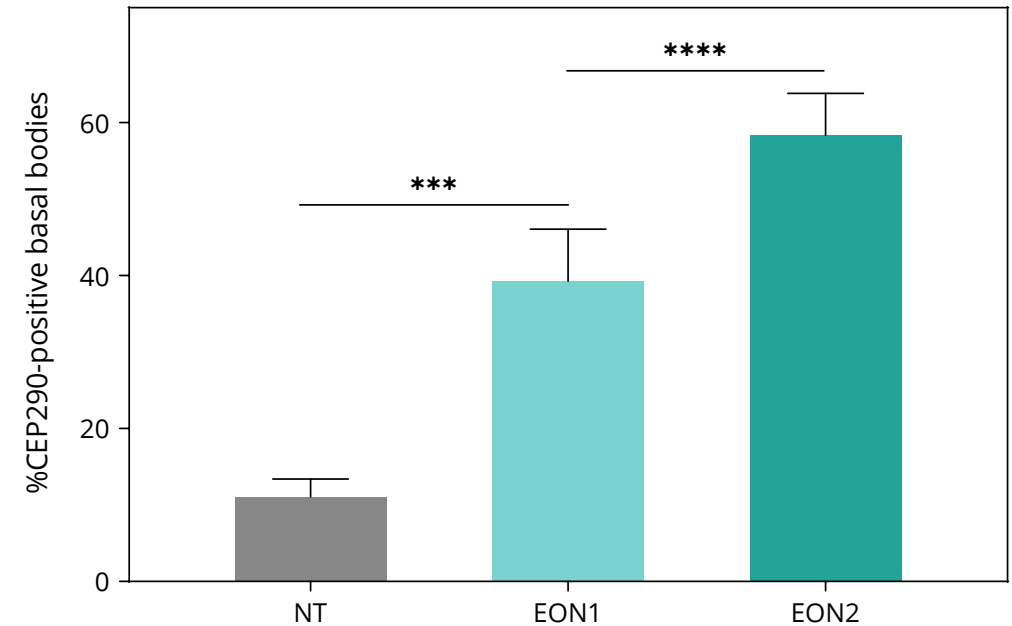
ICV, 250µg, single dose, N=6, 4 weeks, western blot, mean, SEM



In the brain, Axiomer<sup>®</sup> EONs lead to 26-fold increase in protein function in the cortex after editing

## CEP290 protein recovery in organoids

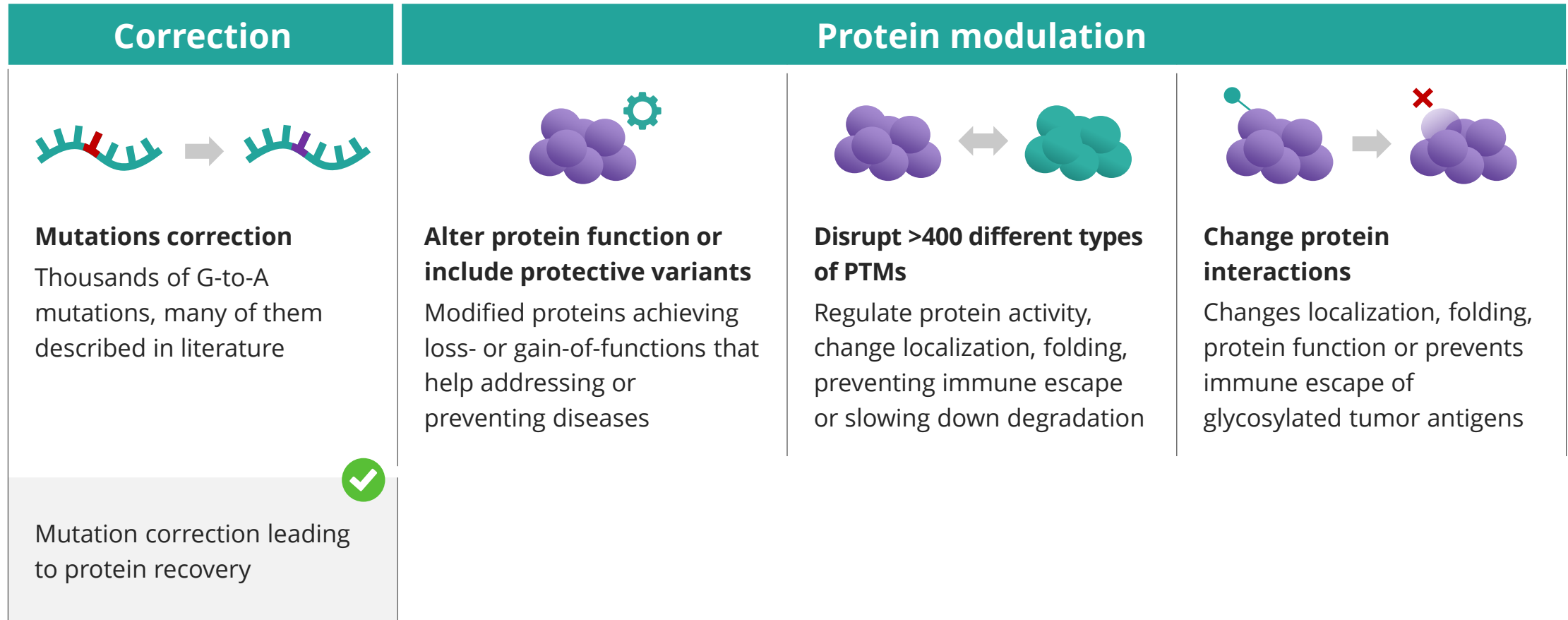
Gymnosis, 10µM, single dose, N=8, 2 weeks, IF, mean, SD



Significant increase in CEP290 protein levels and intensity was detected at the basal body of LCA07-3 organoids treated with EONs after 2-weeks treatment

ICV: Intracerebroventricular injection, IMF: Immune Fluorescence; SD: standard deviation, SEM: Standard error of the mean, WT: wild type. Statistical significance was determined using Brown-Forsythe and Welch ANOVA test.

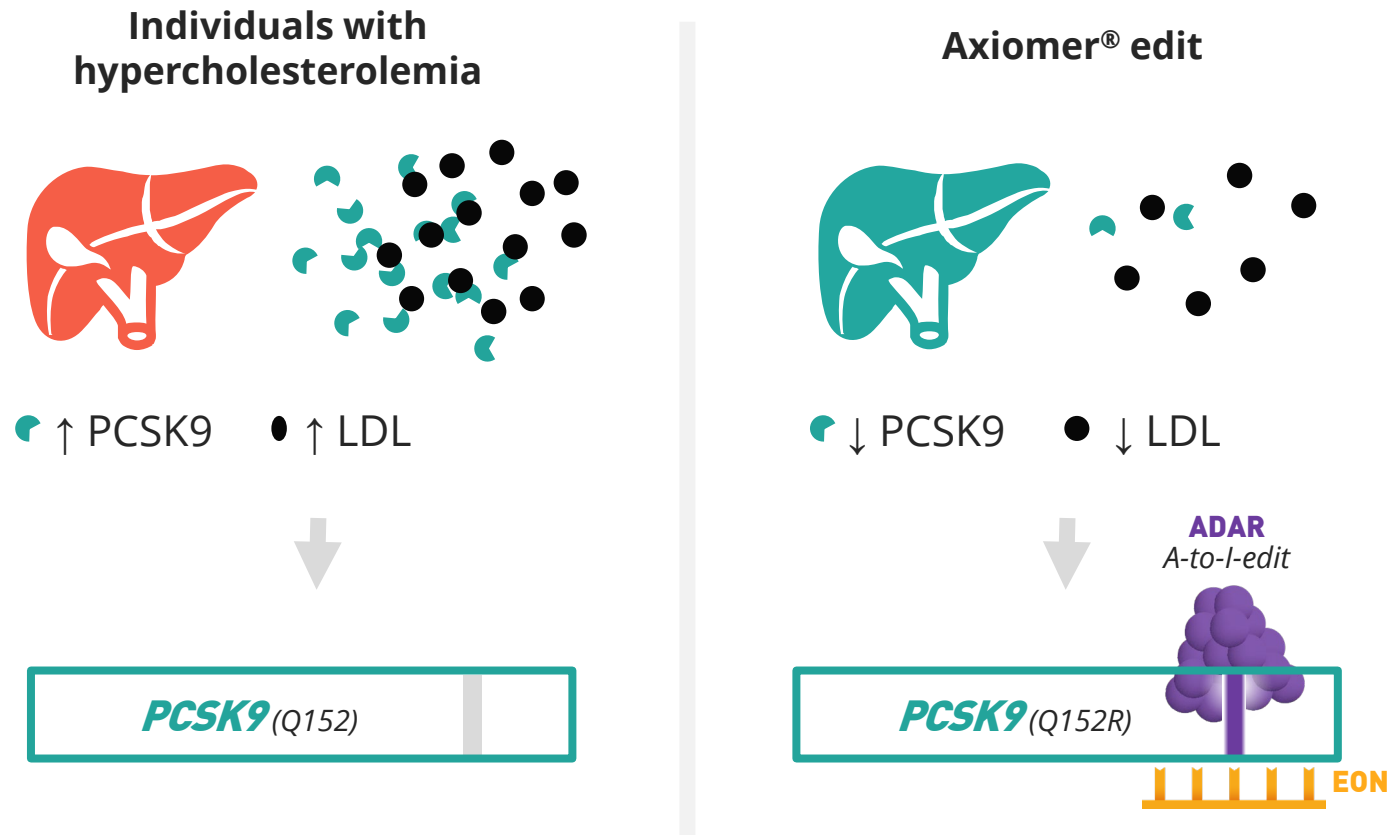
# Axiomer<sup>®</sup> creating a new class of medicines with broad therapeutic potential



PTMs: Post-translational modifications.

# Changing the autocleavage site with Axiomer<sup>®</sup> leads to a LOF in PCSK9

Generation of a loss-of-function variant to lower PCSK9



## Disruption of PCSK9 autocleavage site reduces protein in bloodstream

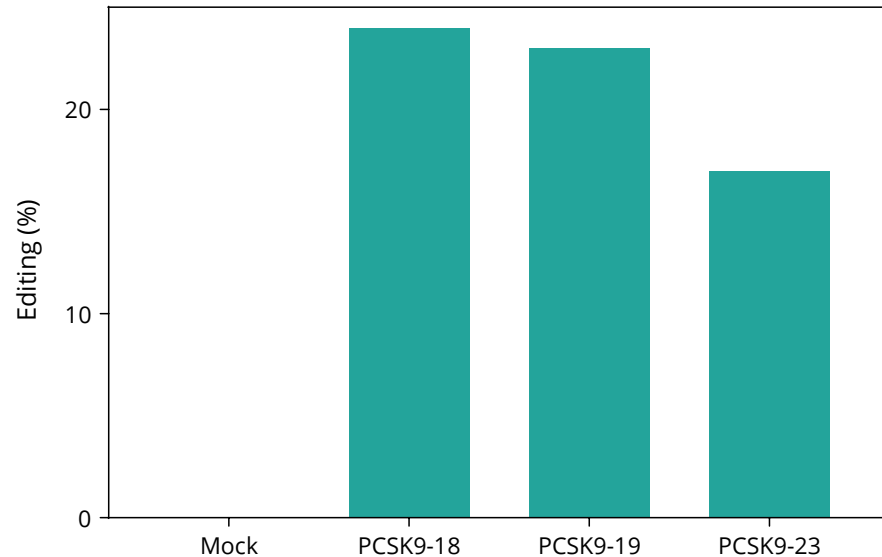
- Less PCSK9 leads to increase of LDL-R on cells, decrease of 'bad' LDL in bloodstream
- Loss-of-function *PCSK9* variant Q152H is associated with low plasma LDL cholesterol in a French-Canadian family and with impaired processing and secretion in cell culture

LDL: Low density lipoprotein, LDL-R: Low density lipoprotein receptor. LOF: Loss of function. Reference: Mayne J, et al. Clin Chem. 2011 Oct;57(10):1415-23.

# Editing of *PCSK9* RNA results in a proenzyme with dominant negative properties

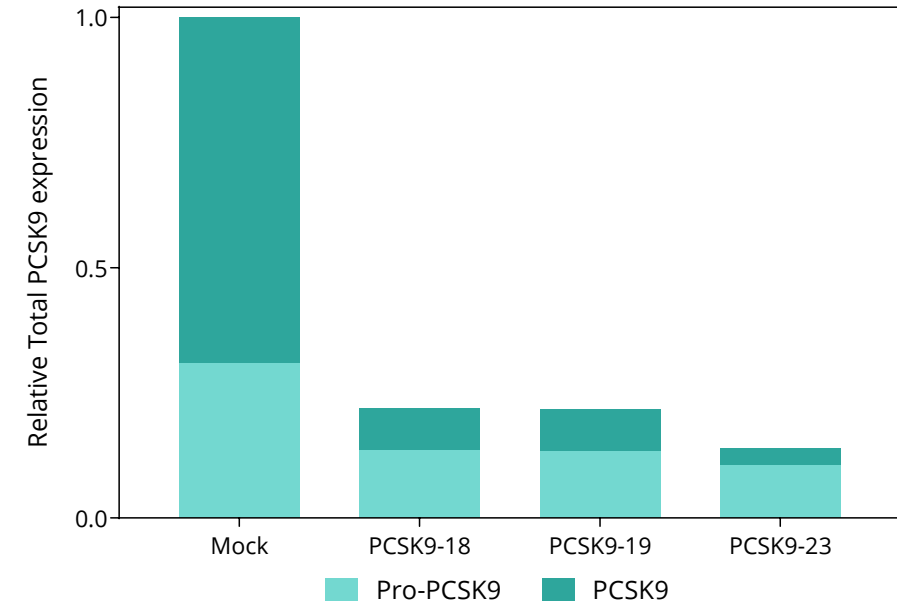
## RNA editing of *PCSK9* in HeLa cells

Transfection, 100nM, single dose, N=2, 48 hours, ddPCR




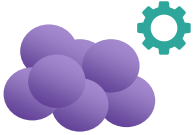

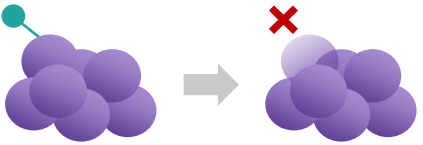


## PCSK9 protein expression in HeLa cells

Transfection, 100nM, single dose, N=2, 48 hours, western blot



- Up to 25% A-to-I editing of *PCSK9* RNA detected using ddPCR assays leading up to 80% reduction of total PCSK9 protein
- The inability to undergo autocleavage likely retains the proenzyme in the endoplasmic reticulum where it can act as a dominant negative protein, preventing the exit of the wild-type form of PCSK9.
- Shift in the ratio cleaved to uncleaved PCSK9 observed; 70%:30% in mock to 25%:75% in treated samples

# Axiomer<sup>®</sup> creating a new class of medicines with broad therapeutic potential

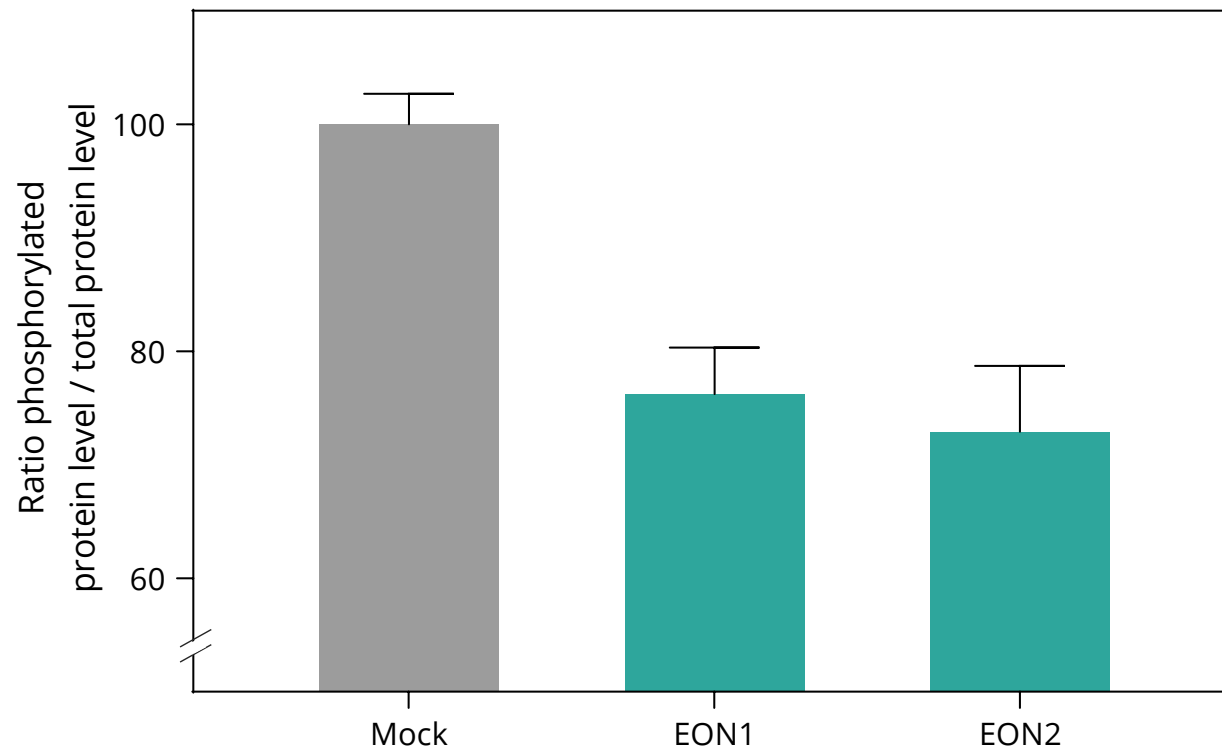
Correction	Protein modulation		
 <p><b>Mutations correction</b> Thousands of G-to-A mutations, many of them described in literature</p>	 <p><b>Alter protein function or include protective variants</b> Modified proteins achieving loss- or gain-of-functions that help addressing or preventing diseases</p>	 <p><b>Disrupt &gt;400 different types of PTMs</b> Regulate protein activity, change localization, folding, preventing immune escape or slowing down degradation</p>	 <p><b>Change protein interactions</b> Changes localization, folding, protein function or prevents immune escape of glycosylated tumor antigens</p>
Mutation correction leading to protein recovery 	Variant resulting in a dominant negative effect 		

PTMs: Post-translational modifications

# Changing a specific amino acid with Axiomer<sup>®</sup> reduces phosphorylation

## Change in phosphorylated protein ratio\*


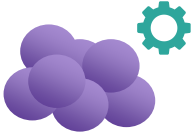

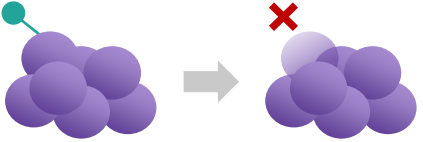



Transfection, 400nM, N=2-4, 48 hours, western blot, SD



\*Undisclosed target. EONs: Editing oligonucleotides

- Specific A-to-I editing achieved with Axiomer<sup>®</sup> EONs changes protein post-translational modification
- Reduction of protein phosphorylation alters protein function
- Approximately 25% reduction in the phosphorylated protein vs. total protein level achieved with 2 EONs

# Axiomer<sup>®</sup> creating a new class of medicines with broad therapeutic potential

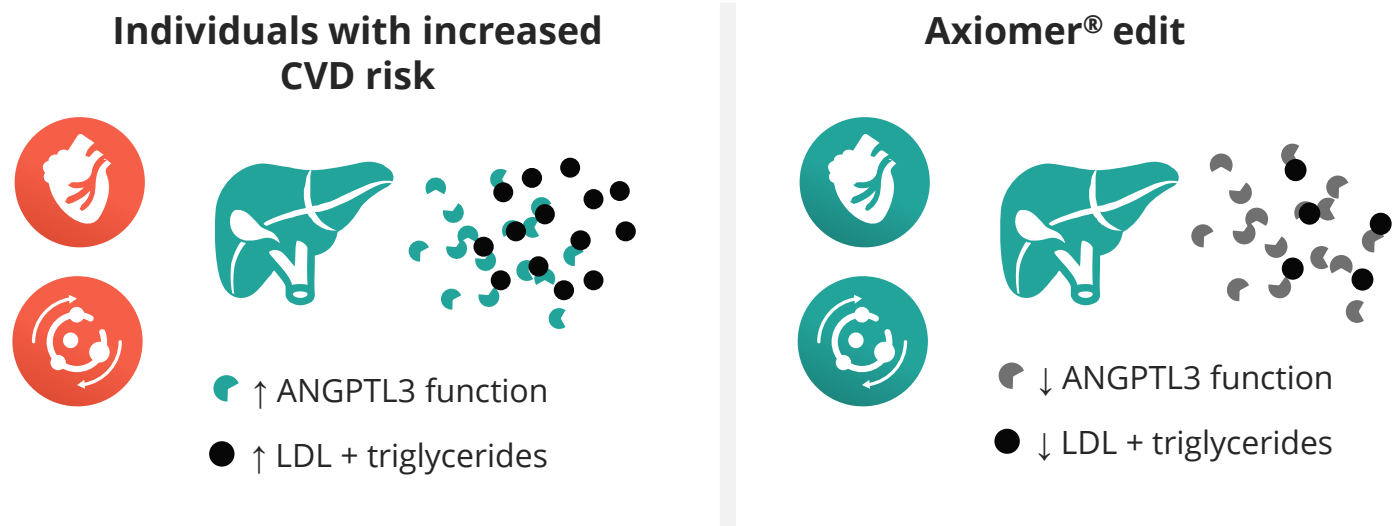
Correction	Protein modulation		
 <p><b>Mutations correction</b> Thousands of G-to-A mutations, many of them described in literature</p>	 <p><b>Alter protein function or include protective variants</b> Modified proteins achieving loss- or gain-of-functions that help addressing or preventing diseases</p>	 <p><b>Disrupt &gt;400 different types of PTMs</b> Regulate protein activity, change localization, folding, preventing immune escape or slowing down degradation</p>	 <p><b>Change protein interactions</b> Changes localization, folding, protein function or prevents immune escape of glycosylated tumor antigens</p>
Mutation correction leading to protein recovery 	Variant resulting in a dominant negative effect 	Reduction of protein phosphorylation altering protein function 	

PTMs: Post-translational modifications



# Changing a protein binding site with Axiomer<sup>®</sup> leads to a LOF in ANGPTL3

*Generation of a loss of function variant to activate lipoprotein lipases*



Wildtype ANGPTL3    AAAGACTTTGTCCAT**AAG**ACGAAGGGCCAAATTAAT  
 -K--D--F--V--H--**K**--T--K--G--Q--I--N-

Edited ANGPTL3    AAAGACTTTGTCCAT**GAG**ACGAAGGGCCAAATTAAT  
 -K--D--F--V--H--**E**--T--K--G--Q--I--N-

■ = Heparin-binding motif

**ANGPTL3 is an angiotensin-like factor that inhibits lipoprotein lipases (LPL)**

- Increase triglyceride, cholesterol, and non-esterified fatty acids in plasma leading to an increased risk of CVD

**Reported loss of function variant of ANGPTL3**

- Significantly decreased triglycerides, LDL-cholesterol, and total cholesterol
- Significantly decreased odds ratio for coronary artery disease

**Heparin binding was shown to be essential for proper ANGPTL3 function**

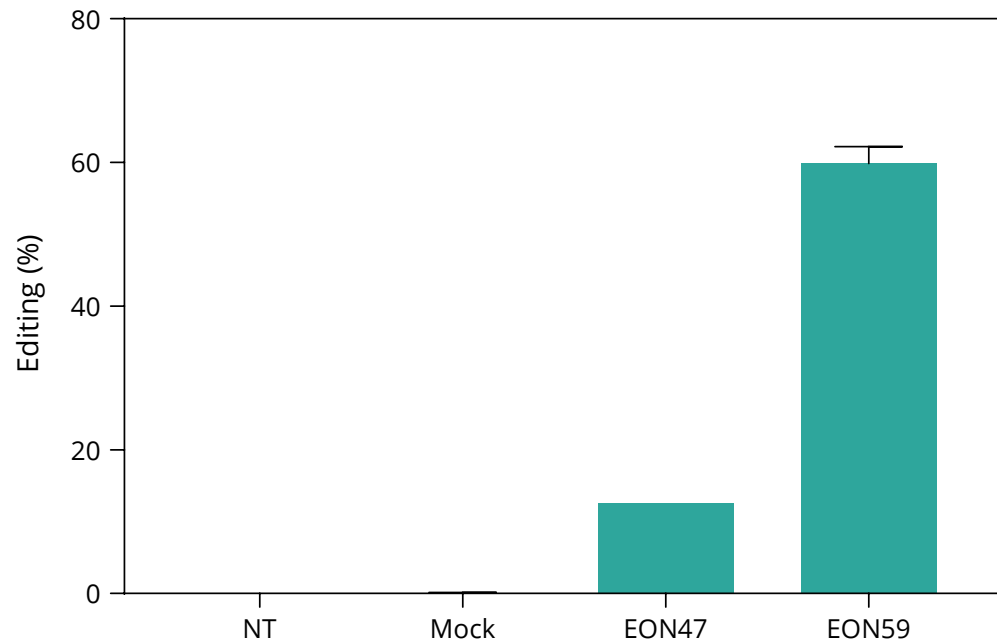
- Disruption of the heparin binding site is highly likely to abrogate LPL inhibition, ultimately leading to lipid lowering in the serum

CVD; cardiovascular disease. LDL: low density lipoprotein, LOF: Loss of function. References: Ono M et al. J Biol Chem. 2003 Oct 24;278(43):41804-9; Romeo S et al. J Clin Invest. 2009 Jan;119(1):70-9; Dewey FE et al. N Engl J Med. 2017 Jul 20;377(3):211-221.

# ANGPTL3 variant disrupting essential protein binding site

**More than 60% RNA editing of ANGPTL3 in primary human hepatocytes derived spheroids**

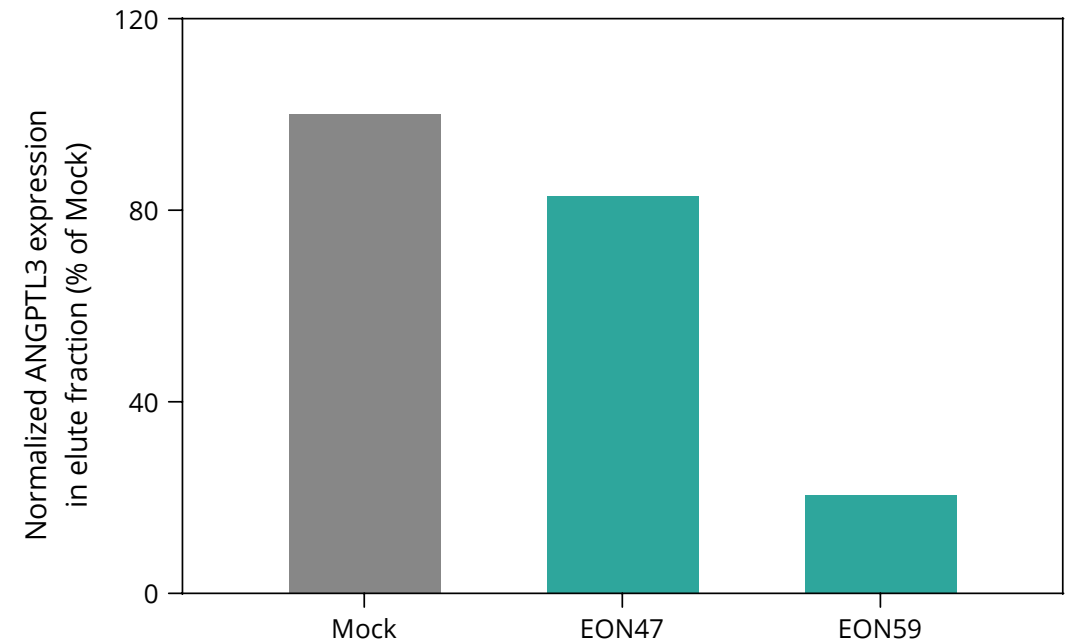
*Gymnosis, 1 $\mu$ M, single dose, N=1 or 2, 5 days, dPCR, mean, SD*



More than 60% RNA editing of ANGPTL3 in primary human hepatocytes derived spheroids


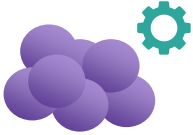

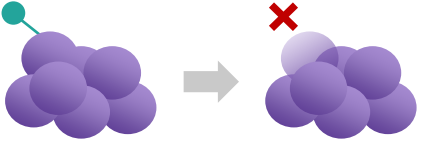
**Up to 80% decrease in heparin binding in Huh-7 cells**

*Gymnosis, 1 $\mu$ M, single dose, N=1, 72 hours, western blot*



Up to 80% decrease in heparin binding in Huh-7 cells

# Axiomer<sup>®</sup> creating a new class of medicines with broad therapeutic potential

Correction	Protein modulation		
 <p><b>Mutations correction</b> Thousands of G-to-A mutations, many of them described in literature</p>	 <p><b>Alter protein function or include protective variants</b> Modified proteins achieving loss- or gain-of-functions that help addressing or preventing diseases</p>	 <p><b>Disrupt &gt;400 different types of PTMs</b> Regulate protein activity, change localization, folding, preventing immune escape or slowing down degradation</p>	 <p><b>Change protein interactions</b> Changes localization, folding, protein function or prevents immune escape of glycosylated tumor antigens</p>
<p>Mutation correction leading to protein recovery</p>	<p>Variant resulting in a dominant negative effect</p>	<p>Reduction of protein phosphorylation altering protein function</p>	<p>Variant impacting protein interaction with sugar</p>

# Axiomer<sup>®</sup> RNA editing platform has broad potential



## Consistent RNA editing

in all models evaluated in nervous system and liver, including NHP *in vivo*



## Increased editing efficiency and hepatocyte uptake *in vivo*

GalNAc does not interfere with A-to-I editing and leads to editing increase



## Validation of Axiomer's potential for therapeutic targets

With positive effect on protein expression



## Broad applicability

With proof of concept in mutation correction and multiple forms of protein modulation



# **IP overview and Partnering strategy**

*René Beukema, Chief Corporate Development Officer*

# Overview of Axiomer<sup>®</sup> related patents

Docket	Priority	Feature	Status
1 (0004)	17DEC2014	Targeted RNA Editing using endogenous ADARs	Granted <a href="#">CA</a> <a href="#">CN</a> <a href="#">EP</a> <a href="#">IL</a> <a href="#">JP</a> <a href="#">NZ</a> <a href="#">RU</a> <a href="#">US</a> <a href="#">ZA</a>
2 (0013)	22JUN2016	Short EONs with wobble and/or mismatch base pairs	Granted <a href="#">IL</a> <a href="#">JP</a> <a href="#">KR</a> <a href="#">US</a>
3 (0014)	01SEP2016	Chemically modified short EONs	Granted <a href="#">CN</a> <a href="#">EP</a> <a href="#">JP</a> <a href="#">KR</a> <a href="#">NZ</a> <a href="#">US</a> <a href="#">ZA</a>
4 (0016)	19JAN2017	EONs + protecting SONs (heteroduplex formation)	Granted <a href="#">US</a>
5 (0023)	18MAY2018	PS linkages / chiral linkages (e.g., PS, PN)	<a href="#">Published</a>
6 (0026)	11FEB2019	Phosphonacetate linkages / UNA modifications	<a href="#">Published</a>
7 (0029)	03APR2019	MP linkages	<a href="#">Published</a>
8 (0031)	24APR2019	Editing inhibition	<a href="#">Published</a>
9 (0032)	13JUN2019	Benner's base (dZ)	<a href="#">Published</a> <a href="#">Granted</a> <a href="#">ZA</a>
10 (0039)	23JUL2020	Split EONs	<a href="#">Published</a>

In addition to the above, numerous patent applications are pending but have not yet been published. ProQR expands its Axiomer<sup>®</sup> IP portfolio continuously.

# Leading IP supporting ADAR-mediated RNA editing platform technology

- Axiomer® IP strategy commenced in 2014 with first patent application filings
  - Today 10 published patent families, currently comprise 22 patents
- Continuing to invest in and expand our IP estate
- March 2023 successful defense of key Axiomer® patent protecting ADAR-mediated RNA editing (EP 3234134 B1)
- Oppositions filed in February 2021 with the European Patent Office (EPO) by two separate strawmen against ProQR's granted patent EP 3434134 B1, which is related to targeted RNA editing using endogenous ADARs
- Following public hearing, EPO ruled in favor of ProQR

# Partnering pillar of our strategy provides significant optionality and upside potential

- Partnerships bring resources, capabilities, and funding to further advance our pipeline programs as well as a new class of medicines based on our Axiomer<sup>®</sup> RNA editing technology platform
  - ProQR brings deep RNA editing and oligonucleotide development expertise, IP
- Initial Axiomer<sup>®</sup> partnership with Lilly September 2021, with expansion in December 2022 – total potential value of \$3.9 B, plus potential royalties for a total of up to 15 targets
- ProQR and Lilly to develop editing oligonucleotides for ten targets; Lilly has an option for an additional five targets for \$50 M opt in fee
- ProQR has received \$125 M consisting of an upfront payments and equity investments
- Partnering ophthalmology assets (does not use Axiomer<sup>®</sup>)
- Selectively enter additional partnerships



# Axiomer<sup>®</sup> has the potential to target a broad range of diseases

## Metabolic disorders

- Type 2 diabetes
- Obesity

## Lung diseases

- Cystic Fibrosis
- Primary ciliary dyskinesia
- Surfactant Metabolism Dysfunction
- ABCA3 deficiency
- Familial Pulmonary Fibrosis

## Liver disorders

- Alpha-1 antitrypsin deficiency
- Cholestatic disorders
- Factor V Deficiency
- Hemophilia B
- Hereditary hemochromatosis
- Hurler Syndrome
- Ornithine transcarbamylase deficiency
- Non-alcoholic steatohepatitis
- Non-alcoholic fatty liver disease
- Pompe Disease
- Porphyrias
- Transthyretin-related hereditary amyloidosis
- Wilson disease



## CNS and Neuromuscular disorders

- Parkinson's Disease
- Spinocerebellar Ataxia
- Alzheimer's Disease
- Huntington's Disease
- Pain disorders

## Ophthalmology

- Inherited retinal disorders
- Fuchs Endothelial Corneal Dystrophy
- Primary Congenital Glaucoma

## Oncology

- KRAS driven tumors
- P53 driven tumors

## Blood / Cardiovascular system disorders

- Hypercholesterolemia
- Thrombophilia
- Alpha/Beta thalassemia
- Progeria

## Kidney

- Polycystic kidney disease

## Immunological disorders

- Paroxysmal nocturnal hemoglobinuria



# Pipeline

*Gerard Platenburg, Chief Scientific Officer*

# Millions of known sites within the RNA where ADARs perform A-to-I editing



## Wide ADAR expression

RNA editing is naturally occurring with wide ADAR expression



## Broad therapeutic potential

with the possibility to target multiple organs

# Unlocking the therapeutic potential of Axiomer<sup>®</sup> through the liver

*Enhanced delivery and available biomarkers*



## High editing in the liver

High expression of ADARs  
in the liver



## GalNAc liver targeting

- 85% of the hepatocytes present the Asialoglycoprotein receptor
- GalNAc does not interfere with ADARs



## Derisked delivery

Proven accessibility to RNA therapeutics through subcutaneous injection



## Validated biomarkers

That correlate with the type and severity of liver diseases

# Axiomer<sup>®</sup> can address numerous liver-originated diseases

*Pipeline programs informed by human genetics*



## High metabolic activity & influence on other organs

- Bile production and excretion
- Lipid production and metabolism
- Plasma proteins synthesis
- Glucose regulation
- Micronutrients
- Detoxification

## Numerous liver-originated diseases



Cholestatic diseases



Cardiovascular diseases



Coagulation disorders



Metabolic disorders



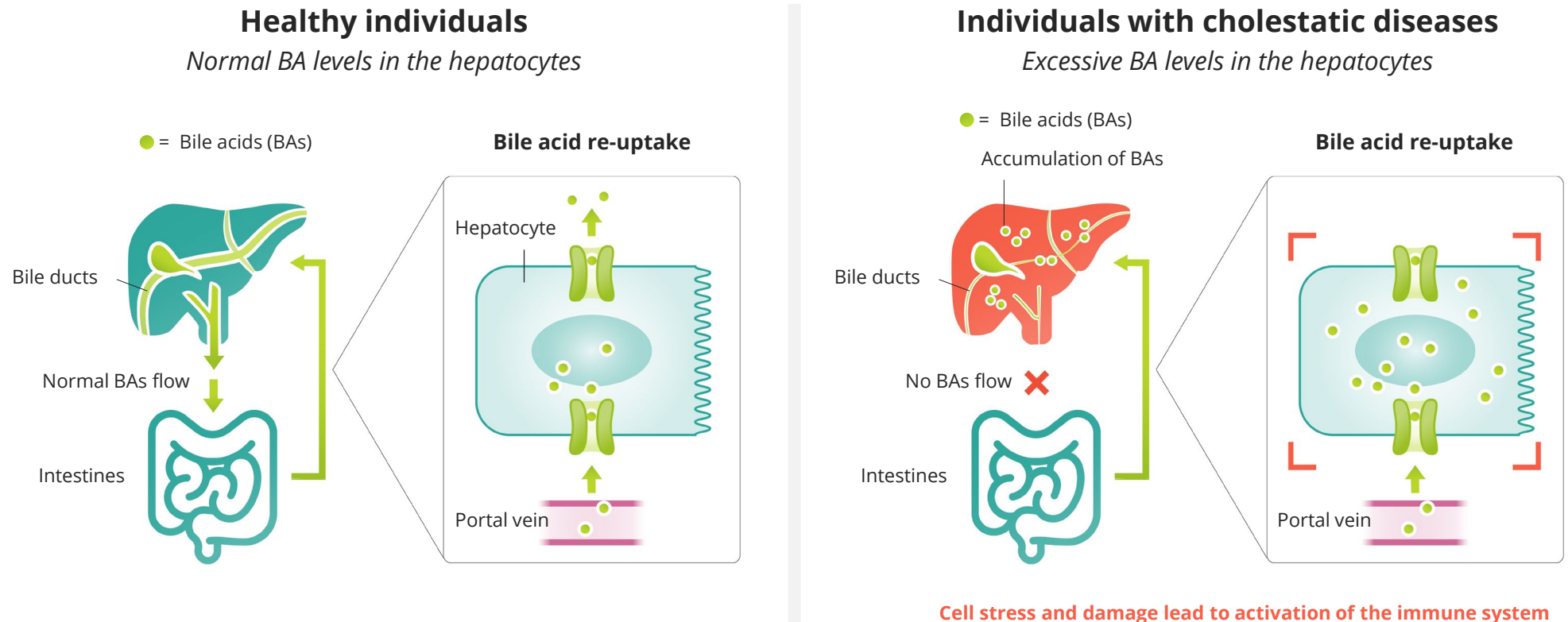
Storage diseases



Many others...

# **AX-0810 for Cholestatic Diseases**

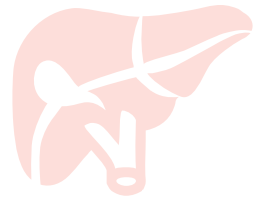
# Excessive accumulation of bile acids in the liver leads to cell stress and damage



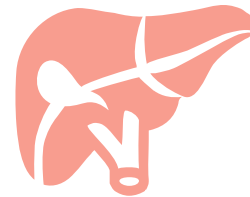
**Dysfunctional bile ducts lead to a toxic buildup of bile acids in the liver of individuals with cholestatic diseases**

References: Cai SY, et al. JCI Insight. 2017;2(5):e90780 and Cai SY, Boyer JL. Ann Transl Med. 2021 Apr;9(8):737

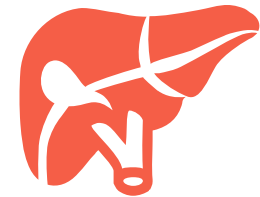
# Cholestatic diseases remain a leading cause of liver transplantation



**Liver inflammation  
and fat-soluble  
vitamin deficiencies**



**Liver fibrosis –  
cirrhosis and  
portal hypertension**



**Liver failure and  
malignancy**



**Progression leads to poor life prognosis and need for transplantation**

References: Arndtz K, Hirschfield GM. Frontline Gastroenterol. 2017 Oct;8(4):260-266; Cheung AC, et al. Dig Dis Sci. 2016 Jun;61(6):1692-9; Le M, Reinshagen K, Tomuschat C. J Pediatr Surg. 2022 Dec;57(12):934-946; Carbone M, Neuberger J. Clin Res Hepatol Gastroenterol. 2011 Jun;35(6-7):446-54; Sundaram SS, et al. Liver Transpl. 2017 Jan;23(1):96-109.



# High unmet medical needs remain in Primary Sclerosing Cholangitis and Biliary Atresia



	 <b>Primary Sclerosing Cholangitis (PSC)</b>	 <b>Biliary Atresia (BA)</b>
<b>Diagnosis</b>	Adult : ~30-40 years, 2/3 men	Pediatric: first weeks of life
<b>Population*</b>	≈ 80K individuals	≈ 24K individuals
<b>Patho-physiology</b>	Bile duct strictures due to fibrosis and sclerosis	Absent or defective bile ducts
<b>Symptoms</b>	Pruritus, fatigue, pain, weight loss, recurrent bacterial infection, inflammatory bowel disease (70%)	Jaundice, poor weight gain, pale stool, dark urine
<b>Progression</b>	Progression to liver cirrhosis and increased risk of cancer	Rapid progression to cirrhosis and portal hypertension early in life
<b>Standard of Care</b>	<b>No approved therapy</b>	<b>No approved therapy Hepatoportoenterostomy**</b>

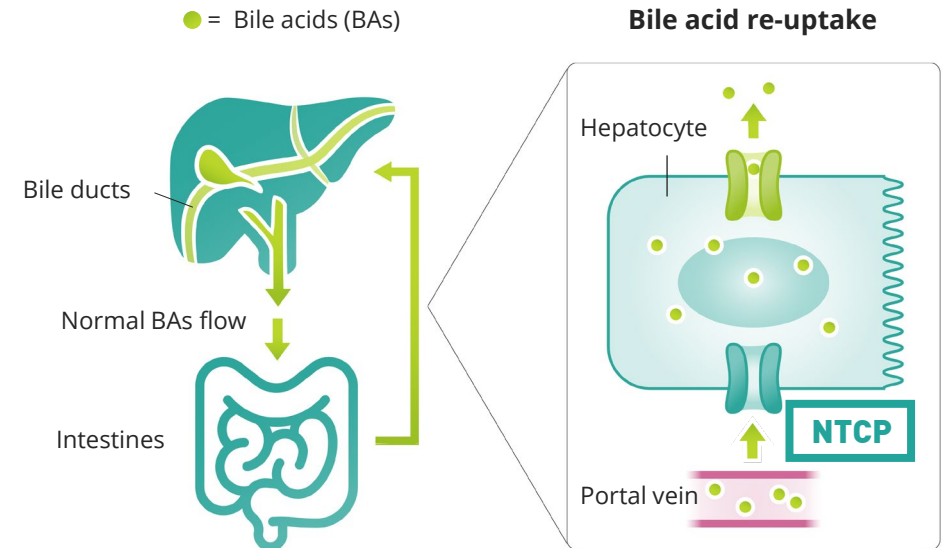
\*Patient population estimation in the international Group of Seven countries (G7) and based on current population data and literature,. \*\*Surgery removing the extrahepatic biliary tree and linking the liver directly to a loop of intestine to enable bile to enter the bowel. References: Boonstra K, Beuers U, Ponsioen CY. J Hepatol. 2012 May;56(5):1181-1188; Karlsen TH, et al. J Hepatol. 2017 Dec;67(6):1298-1323; Dyson JK, et al. Lancet. 2018 Jun 23;391(10139):2547-2559; Neuberger J. 2003 Apr;6(2):113-121; Sundaram SS, et al. Liver Transpl. 2017 Jan;23(1):96-109. Raghu VK, et al. Liver Transpl. 2021 May;27(5):711-718; NORD, 2019. Hirschfield G, et al. The Lancet. 2013. 382, 9904, 1587 – 1599. Japanese Biliary Atresia Society. Japanese Biliary Atresia Registry (JBAR). <https://jbas.net/en/national-registration/>.

# Blocking bile acids re-uptake into the liver reduces excessive and toxic accumulation



- NTCP (*SLC10A1* gene): Sodium (Na<sup>+</sup>)-taurocholate cotransporting polypeptide
  - 95 % of liver bile acid are recycled from the intestine back to the liver via NTCP
- In the human genetics, loss of function (LOF) variants in NTCP naturally occur in some people exhibiting a mild phenotype
- Pharmacological modulation of NTCP improves outcomes of cholestasis reducing liver damage and inflammation in a mouse model

**NTCP is the main transporter involved in bile acids re-uptake from the portal circulation to the liver**



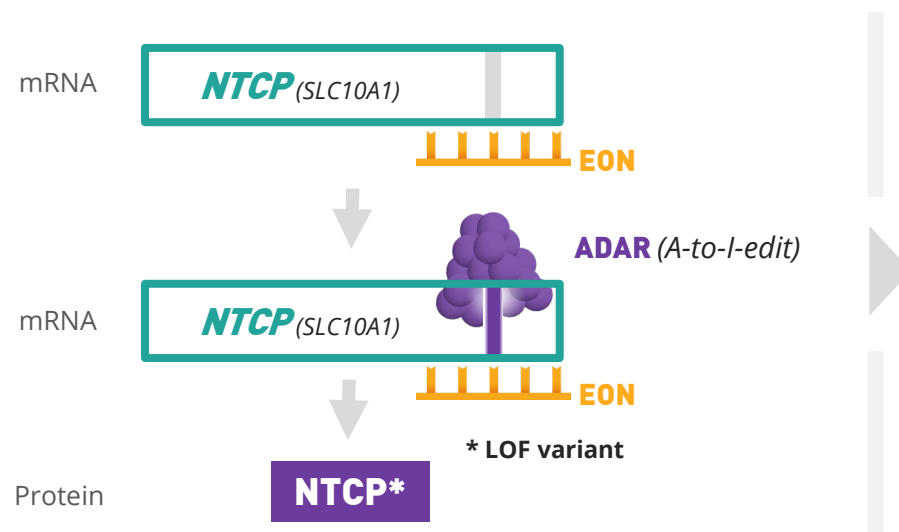
NTCP: Na-taurocholate cotransporting polypeptide. *SLC10A1* is the gene that encodes for NTCP protein. References: Ho RH, et al. J Biol Chem. 2004 Feb 20;279(8):7213-22; Vaz FM, et al. Hepatology. 2015;61(1):260-267; Vaz FM, et al. Dig Dis. 2017;35(3):259-260; Slijepcevic D, et al. Hepatology. 2018 Sep;68(3):1057-1069; Mao F, et al. J Biol Chem. 2019;294(31):11853-11862.

# AX-0810 is designed to reduce bile acids re-uptake into the liver

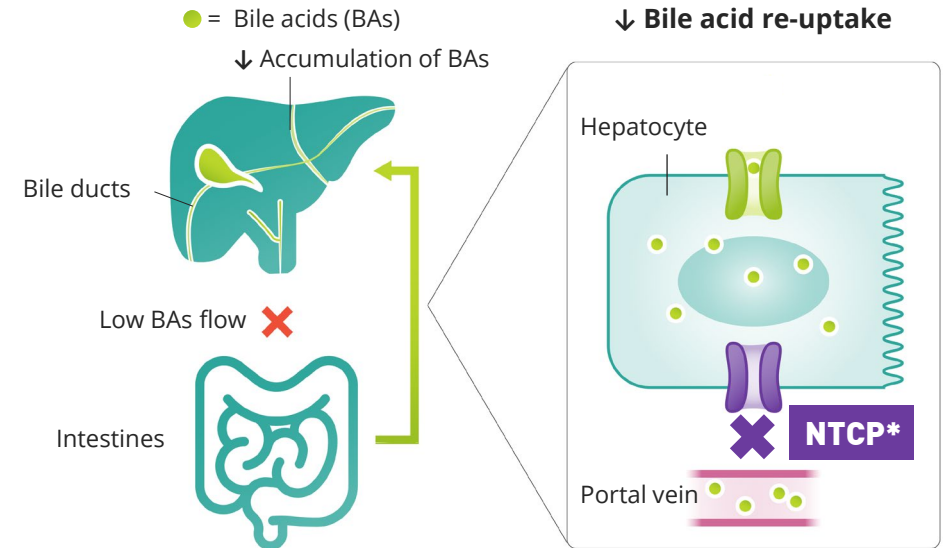
*RNA editing to a loss of function variant of NTCP can improve liver function*



## AX-0810 therapy for cholestatic diseases



## Reduced BA levels in the hepatocytes



- AX-0810 is a novel and “on target” approach reducing bile acid re-uptake into the hepatocytes
  - Transient and controlled approach introducing a loss of function of NTCP

- AX-0810 can reduce bile acid load in the liver
  - To alleviate associated pathology and symptoms in PSC and BA
  - To prevent or delay the development of cirrhosis, organ failure and need for transplant

BA: Bile acids, NTCP: Na-taurocholate cotransporting polypeptide, PSC: Primary Sclerosing Cholangitis. *SLC10A1* is the gene that encodes for NTCP protein.

# Well-defined development path for AX-0810



PRECLINICAL STAGE	EARLY CLINICAL	LATE CLINICAL
<i>Preclinical models available with strong translatability into the clinic</i>	<i>Early insight on safety and target engagement using validated biomarkers</i>	<i>Clinical programs with disease specific endpoints for regulatory approval</i>
<p><b>Translational models available</b></p> <ul style="list-style-type: none"> <li>• Organoids models</li> <li>• Animal models</li> </ul> <p><b>Proof of mechanism measures in animal models</b></p> <ul style="list-style-type: none"> <li>• Serum levels of ALP and <math>\gamma</math>-GT</li> <li>• Total bile acids in serum and liver</li> <li>• Hepatic inflammation and fibrosis</li> </ul>	<p><b>Program with Phase 1 on healthy volunteers</b></p> <p><b>Validated biomarkers in cholestatic diseases</b></p> <ul style="list-style-type: none"> <li>• Bile acids in serum, urine and feces</li> <li>• Liver enzymes</li> <li>• Serum cholesterol</li> </ul> <p><b>Disease specific biomarkers in preparation for next trials:</b></p> <ul style="list-style-type: none"> <li>• ALP for PSC</li> <li>• Bilirubin for BA</li> </ul>	<p><b>Primary Sclerosing Cholangitis</b> Co-primary endpoint for regulatory approval:</p> <ul style="list-style-type: none"> <li>• Reduction in ALP and</li> <li>• Histological liver evaluation</li> </ul> <p><b>Biliary atresia</b></p> <ul style="list-style-type: none"> <li>• Time to liver transplantation</li> <li>• Mean change in total serum bilirubin levels, liver enzymes, bile acid levels, blood platelets and serum albumin</li> </ul>

$\gamma$ -GT:  $\gamma$ -glutamyl transferase; ALP, Alkaline phosphatase; BA, biliary atresia; BDL, Bile duct ligation; LMT, Liver microtissues; NTCP, Na-taurocholate cotransporting polypeptide; PSC, Primary Sclerosing Cholangitis

# AX-0810 early evidence generation approach on safety and target engagement

*Phase 1 on healthy volunteers for cholestatic diseases*



## Objectives

- Assess safety, tolerability, PK and PD of AX-0810 without interference by concomitant pathological conditions
- Establish target engagement by biomarkers

## Trial design

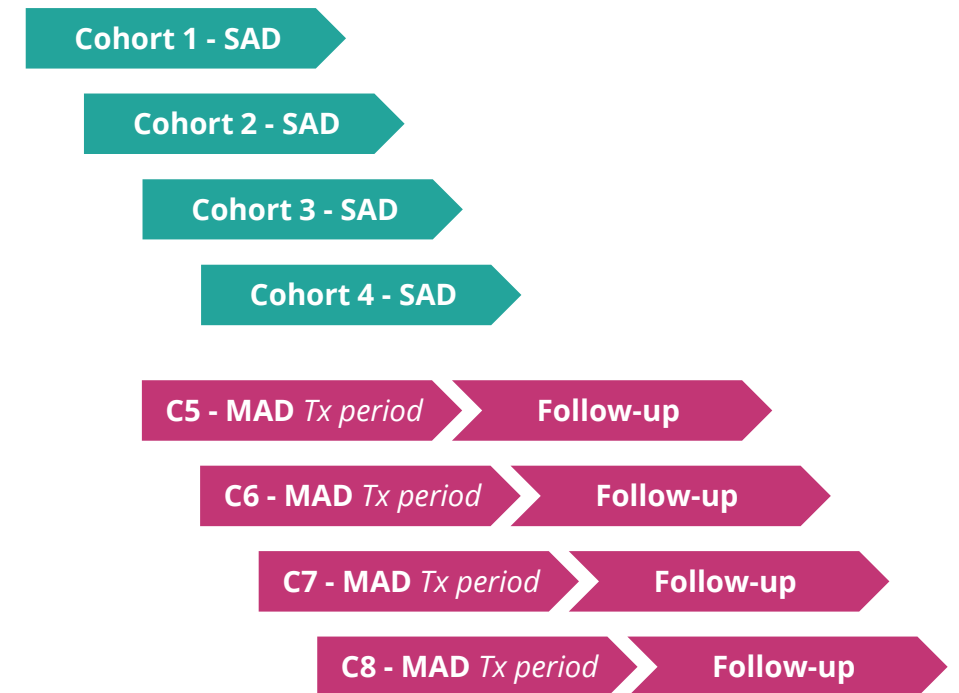
- Single and multiple dose ascending trial
- Single trial site: timely recruitment and data generation

## Endpoints will include

- Safety, tolerability, PK and PD of AX-0810
- Change in bile acids in serum, urine and feces, liver enzymes and serum cholesterol
- Change in disease specific biomarkers: ALP and bilirubin
- Measure RNA editing in circulating exosomes in plasma

**Entry into clinical trials in late 2024 / early 2025**

## Preliminary study design



ALP, Alkaline phosphatase; MAD, multiple ascending dose; PD, Pharmacodynamic; PK, Pharmacokinetics; SAD, single ascending dose.

# Summary and next steps for AX-0810



## High unmet medical need in cholestatic diseases

with PSC and BA being leading indications for liver transplantation



## A rigorous approach to increase probability of success

from preclinical to the clinical stage, including validated biomarkers and a clear regulatory pathway



## AX-0810 is a novel and “on target” approach

- Originated from human genetics
- Reducing bile acid re-uptake into the liver via NTCP loss of function



## Next steps

- Generate new data on hit and lead selection
- Entry into clinical trials in late 2024 / early 2025

BA, biliary atresia; NTCP, Na-taurocholate cotransporting polypeptide; PSC, Primary Sclerosing Cholangitis

# Axiomer<sup>®</sup> can address numerous liver-originated diseases

*Pipeline programs informed by human genetics*



## High metabolic activity & influence on other organs

- Bile production and excretion
- Lipid production and metabolism
- Plasma proteins synthesis
- Glucose regulation
- Micronutrients
- Detoxification

## Numerous liver-originated diseases



Cholestatic diseases



Cardiovascular diseases



Coagulation disorders



Metabolic disorders



Storage diseases



Many others...

# AX-1412 for Cardiovascular Diseases (CVD)



# Despite current therapies, CVD remains the highest cause of disability and death in the world



## Leading causes of death in the world

~18M people die from CVDs every year (32% of all global deaths)



## With projected increased number of patients

By 2035, >130 million adults in the US are projected to have some form of CVD with a total costs of \$1.1 trillion



## Unmet medical need remains

Current standard of care includes lipid lowering therapies and hypertension medications. Despite therapies, the unmet medical need remains

- Residual risk despite SoC
- Low treatment adherence
- Tolerability issues

# Two independent risk factors involved in CVD may have negative synergistic effect

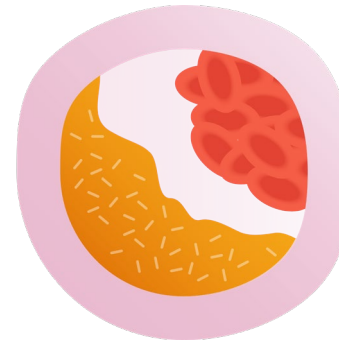


Increased arterial plaque formation

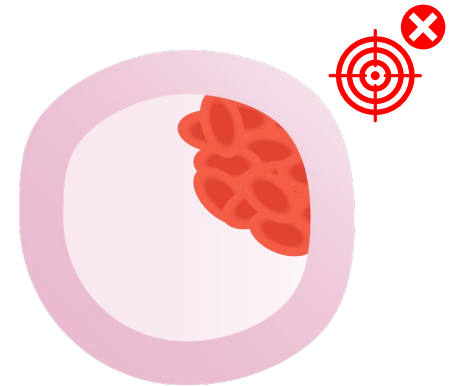


↑ LDL-C

Potential synergistic negative effect



Increased risk for blood clotting



↑ Fibrinogen

LDL-c and fibrinogen are two **independent risk factors** involved in cardiovascular diseases, atherosclerosis and thrombotic events

ASCVDs, atherosclerotic cardiovascular diseases; CVDs, cardiovascular diseases; LDL-c, Low-density lipoprotein cholesterol. References: Linton MF, et al. Endotext. South Dartmouth (MA): MDText.com, Inc., January 3, 2019; Vilar R et al. 2020, Haematologica 105, 284-296; Zabczyk, M et al. Clinical Outcomes. J. Clin. Med. 2021, 10, 2999; Surma S et al. 2022 Int. J. Mol. Sci. 23, 193; Zabczyk M, et al. J Clin Med. 2021;10(13):2999.

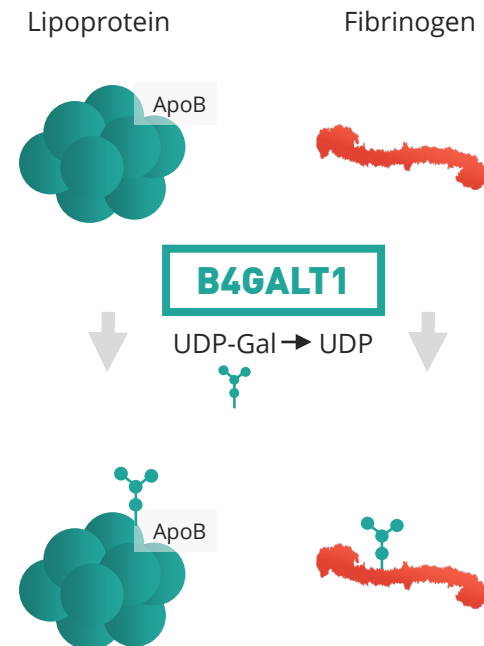
# Genetic and functional evidence links a missense variant in *B4GALT1* to lower LDL-C and fibrinogen

*B4GALT1* plays a role in transferring galactose to CVD risk factors



## Beta-1,4-galactosyltransferase 1 (B4GALT1)

B4GALT1 transfers galactose from uridine diphosphate galactose (UDP-Gal) to specific glycoprotein substrates

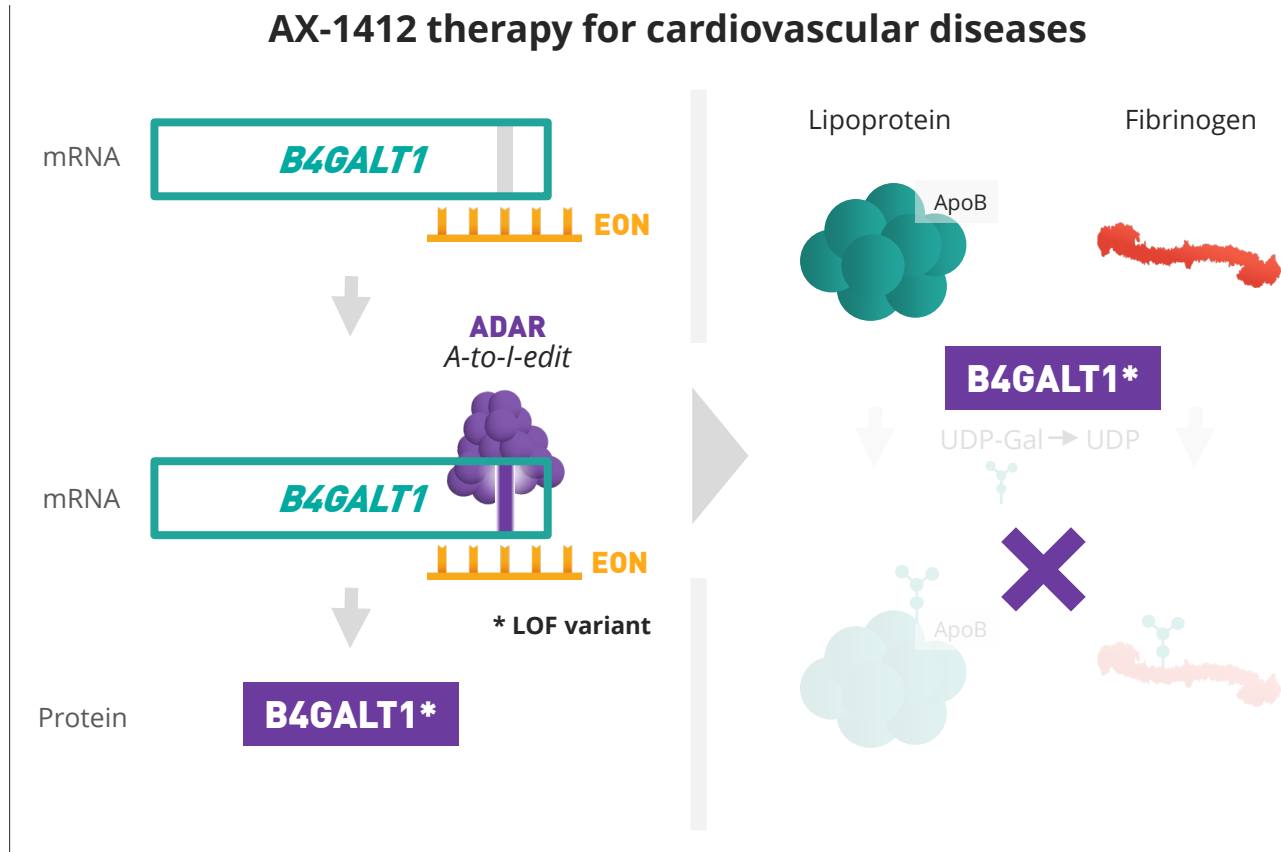


- Reported **Old Order Amish-enriched missense variant (p.Asn352Ser)** in a functional B4GALT1
  - Associated with lower serum LDL-C and lower plasma fibrinogen
  - 50% decrease in glycosylation efficiency
- B4GALT1 acts on apolipoprotein B100, fibrinogen, which are known drivers of increased risk of CVD
- ***B4GALT1* loss of function associates with decreased coronary artery disease** in gene-based analysis

ApoB: Apolipoprotein B, CVD: cardiovascular disease, LDL-C: Low-density lipoprotein cholesterol. Reference: Montasser ME. et al., 2021 Science 374(6572):1221-1227

# AX-1412 brings a novel approach to reduce residual risk for a potential cardiovascular event

*RNA editing to a loss of function variant of B4GALT1 can have pleiotropic effect targeting two CVD risk factors*



## **B4GALT1 p.N352S protective allele**

- Leads to hypo-galactosylation of apolipoprotein B100, fibrinogen

## **AX-1412 is a novel and unique approach to address CVD**

- Pleiotropic effects for cardiovascular protection
- Not suitable for knockdown technologies, as leads to semi-lethality and severe development abnormalities in mouse studies

## **AX-1412 can lower LDL-C and fibrinogen levels to reduce residual risk in cardiovascular diseases**

- Prevent or delay the development of cardiovascular events

ADAR: adenosine deaminase acting on RNA, ApoB: Apolipoprotein B, CVDs: cardiovascular diseases, LDL-C: Low-density lipoprotein cholesterol. Reference: Montasser ME. et al., 2021 Science 374(6572):1221-1227.

# Well-defined development path for AX-1412



PRECLINICAL STAGE	EARLY CLINICAL	LATE CLINICAL
<p><i>Preclinical models available with strong translatability into the clinic</i></p>	<p><i>Early insight on safety and target engagement using validated biomarkers</i></p>	<p><i>Clinical programs with disease specific endpoints for regulatory approval</i></p>
<p><b>Organoids models for CVD</b></p> <ul style="list-style-type: none"> <li>• Blood-derived myeloid cells and THP-1 cells</li> <li>• Cell-laden microtissue spheroids</li> </ul> <p><b>Animal models</b></p> <ul style="list-style-type: none"> <li>• The Apoe<sup>-/-</sup> mouse model</li> </ul> <p><b>Proof of mechanism measures in animal models</b></p> <ul style="list-style-type: none"> <li>• Serum lipid levels</li> <li>• Atherosclerotic lesion area</li> <li>• C-reactive protein (CRP) and Interleukin 6 (IL-6)</li> <li>• Endothelial function</li> </ul>	<p><b>Programs with Phase 1 on healthy individuals</b></p> <ul style="list-style-type: none"> <li>• Reduce potential signal-to-noise ratio as CVD patients have many comorbidities</li> </ul> <p><b>General CVD biomarkers</b></p> <ul style="list-style-type: none"> <li>• non-HDL-C</li> <li>• Triglycerides</li> <li>• Apolipoprotein B</li> </ul> <p><b>Target specific biomarkers</b></p> <ul style="list-style-type: none"> <li>• LDL-C</li> <li>• Fibrinogen</li> </ul>	<p><b>Primary endpoints</b></p> <ol style="list-style-type: none"> <li>1. All-cause mortality and fatal CVD events or</li> <li>2. Composite endpoints (incl. fatal and non-fatal CVD events)</li> </ol> <p><b>Secondary endpoints</b></p> <ul style="list-style-type: none"> <li>• Could consider using biomarkers as surrogate endpoints to reasonably predict treatment effects on outcome.</li> </ul>

Apoe: Apolipoprotein E, CVD: cardiovascular diseases, HDL-C: High-density lipoprotein cholesterol; LDL-C: Low-density lipoprotein cholesterol, THP-1: human monocytic cell line

# AX-1412 early evidence generation approach on safety and target engagement

*Phase 1 on healthy volunteers for CVD*



## Objectives

- Assess safety, tolerability, PK and PD of AX-1412 without interference by concomitant pathological conditions
- Establish target engagement of AX-1412

## Trial design

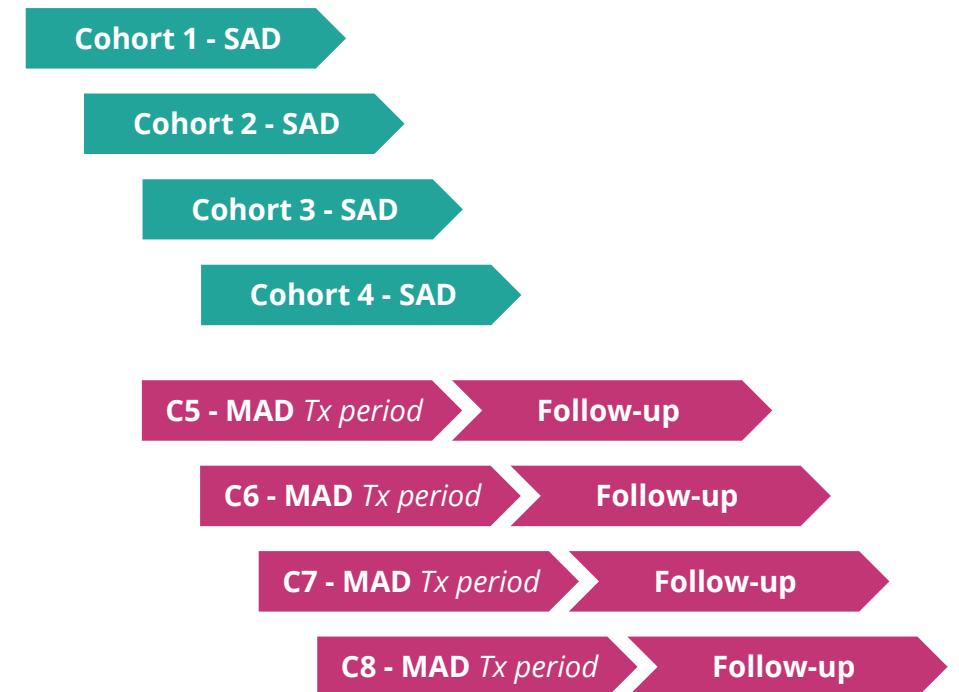
- Single and multiple dose ascending trial
- Single site trial

## Endpoints will include

- Safety and tolerability
- Biomarkers measuring target engagement: LDL-C, fibrinogen, non-HDL-C, triglycerides, apolipoprotein B
- Measure RNA editing in circulating exosomes in plasma

**Entry into clinical trials in late 2024 / early 2025**

## Preliminary study design



HDL-C: High-density lipoprotein cholesterol, LDL-C: Low-density lipoprotein cholesterol, MAD: multiple ascending dose, PD: Pharmacodynamic, PK: Pharmacokinetics, SAD: single ascending dose.

# Summary and next steps for AX-1412



## CVD remains the highest cause of disability and death

LDL-C and fibrinogen are two independent risk factors involved in cardiovascular diseases



## A rigorous approach to increase probability of success

from preclinical to the clinical stage, including validated biomarkers



## AX-1412, a novel and unique approach

- Originated from human genetics
- Pleiotropic effects for cardiovascular protection
- Not suitable for knockdown technologies



## Next steps

- Generate new data on hit and lead selection
- Entry into clinical trials in late 2024 / early 2025

CVD: cardiovascular disease, LDL-C: Low-density lipoprotein cholesterol

# ProQR development pipeline

	TARGET	DISCOVERY	NON-CLINICAL	CLINICAL	GUIDANCE	ESTIMATED POPULATION
<b>PROQR PROGRAMS</b>						
CHOLESTATIC DISEASES	<b>AX-0810</b> for <b>NTCP</b>				Entry into clinical trials in late 2024 / early 2025	~ 100K <sup>1</sup>
CARDIOVASCULAR DISEASES	<b>AX-1412</b> for <b>B4GALT1</b>				Entry into clinical trials in late 2024 / early 2025	~ 200M <sup>2</sup>
	<b>AX-1005</b> for <i>CVD</i>					
METABOLIC DISEASES	<b>AX-2911</b> for <i>NASH</i>					~ 16M
	<b>AX-0601</b> for <i>obesity and T2D</i>					~ 650M
	<b>AX-9115</b> for <i>rare metabolic condition</i>					~ 20K
RARE NEURO DISEASES	<b>AX-2402</b> for <i>neurodegenerative condition</i>					~ 30K
OTHERS	<i>Multiple targets in discovery pipeline</i>					
<b>PARTNERED PROGRAMS</b>						
	<i>Initial 5 undisclosed targets</i>	<i>Progress undisclosed</i>				
	<i>Next 5 undisclosed targets</i>	<i>Progress undisclosed</i>				
	<i>Up to 5 potential additional targets</i>					

<sup>1</sup>Approximately 100K people affected with Primary Sclerosing Cholangitis and Biliary Atresia in US and EU5. <sup>2</sup>Approximately 200 million people suffer from too high a level of cholesterol in US and EU5. *SLC10A1* is the gene that encodes for NTCP protein. CVD: Cardiovascular Diseases, NASH: Nonalcoholic steatohepatitis, T2D: Type 2 Diabetes. References: Boonstra K, Beuers U, Ponsioen CY. J Hepatol. 2012 May;56(5):1181-1188; Karlens TH, et al. J Hepatol. 2017 Dec;67(6):1298-1323; Dyson JK, et al. Lancet. 2018 Jun 23;391(10139):2547-2559; Sundaram SS, et al. Liver Transpl. 2017 Jan;23(1):96-109. Raghu VK, et al. Liver Transpl. 2021 May;27(5):711-718; NORD, 2019. Tsao CW, et al. Circulation. 2022;145(8):e153-e639. World Health Organization, World Gastroenterology Organization





# Summary and Milestones

*Daniel A. de Boer, Chief Executive Officer*

# Summary

## Pipeline

- Initial programs focused on liver-originated diseases and will address Cholestatic Diseases targeting NTCP and Cardiovascular Diseases targeting *B4GALT1*
  - Initiation of clinical trials anticipated in late 2024/early 2025

## Platform proof of concept

- Validation of Axiomer<sup>®</sup> across multiple preclinical in vitro, organoid, and in vivo models:
  - Up to 40% editing reported in the nervous system of mice in vivo leading to 26-fold change in protein function recovery
  - Up to 50% editing reported in the liver of mice in vivo
  - Up to 50% editing reported in the nervous system of NHP in vivo
- Broad applicability of Axiomer<sup>®</sup> demonstrated with ability to correct mutation, modulate protein function by altering protein function, disrupting post-translational modifications, and changing protein interaction in preclinical models

# Multiple upcoming value-creating milestones

## Platform

- Multiple platform updates over the next 12 months including NHP data in liver
- Plans to scale up discovery efforts ongoing
- Multiple scientific presentations and peer-reviewed publications in 2023 and 2024

## Pipeline

- AX-0810 for cholestatic diseases
  - Presentation of non-clinical proof of concept data over next 12 months
  - Update on translational data over the next 18 months to enable progression into CTA
  - Entry into clinical trials in late 2024 / early 2025
- AX-1412 for CVD
  - Presentation of non-clinical proof of concept data over next 12 months

- Update on translational data over the next 18 months to enable progression into CTA
- Entry into clinical trials in late 2024 / early 2025

## Partnerships and BD

- Eli Lilly \$3.9 B partnership
  - Potential option exercise for expansion of deal to 15 targets, with \$50 M opt-in payment to ProQR
  - Other milestone payments
- Potential additional multi-target discovery partnership
- Potential outlicensing of ophthalmology portfolio

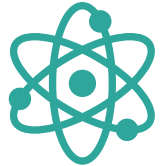
## Intellectual property

- Continued expansion of IP portfolio

## Financial

- Cash position of €94.8M, plus \$60.0M from Lilly partnership expansion at YE 2022 provides cash runway to mid 2026, beyond multiple clinical data readouts

# Well positioned to advance Axiomer®



## Science

- Deep understanding of basic science – ADAR, oligos
- Optimization of editing oligonucleotides (EONs) for therapeutic development



## Axiomer® has broad applicability

- Large number of potential therapeutic applications
- *In vivo* POC established in nervous system, liver



## Advancing toward the clinic

- Extensive translational and developmental expertise with oligo modality
- AX-0810 and AX-1412 initial pipeline targets



## Leading IP position

- Axiomer® is protected by 10 published patent families
- Continuously investing in expanding IP estate



## Strategic partnership strategy

- Lilly collaboration
- Selectively form additional partnerships
- Optionality and multiple value creating opportunities



## Experienced leadership

- Deep RNA, corporate finance, and business development expertise across Management Team, Supervisory Board, and Scientific Advisory Board



## Strong balance sheet

- 2022 YE cash €94.8M, plus \$60.0M from Lilly partnership expansion
- Cash runway to mid-2026, excluding potential for additional BD-related upside

**Q&A**



# Closing

*Daniel A. de Boer, Chief Executive Officer*



**IT'S IN  
OUR RNA**