

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 "continue," "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 business, technology, strategy, preclinical and clinical model data; our initial pipeline targets and the upcoming strategic priorities and milestones related thereto; the continued advancement of our lead development pipeline programs, including approved, ongoing and planned clinical trials; expectations regarding the planned Phase 1 clinical study of AX-0810 in NTCP for cholestatic diseases, including the planned trial design, implementation and initiation in the Netherlands, and our ability to recruit for and complete a Phase 1 clinical trial for AX-0810 in healthy volunteers; expectations regarding the safety and therapeutic benefits of AX-0810, including the planned dosing levels and their efficacy; the anticipated timing of initial Phase 1 clinical data for our lead program, AX-0810, in Q4 2025, and clinical updates across multiple programs in 2025; the continued development and advancement of our Axiomer™ platform; the therapeutic potential of our Axiomer RNA editing oligonucleotides and product candidates; the timing, progress and results of our preclinical studies and other development activities, including the release of data related thereto; our patent estate, including our anticipated strength and our continued investment in it; and the potential of our technologies and product candidates. Forwardlooking 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 expressed or implied by these forwardlooking 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 most recent annual report filed on Form 20-F. These risks and uncertainties include, among others, the cost, timing and results of preclinical studies and clinical trials and other development activities by us and our collaborative partners whose operations and activities may be slowed or halted shortage and pressure on supply and logistics on the global market, economic sanctions and international tariffs; the likelihood of our preclinical and clinical programs being initiated and executed on timelines provided and reliance on our contract research organizations and predictability of timely enrollment of subjects and patients to advance our clinical trials and maintain their own operations; our reliance on contract manufacturers to supply materials for research and development and the risk of supply interruption from a contract manufacturer; the potential for future data to alter initial and preliminary results of early-stage clinical trials; the unpredictability of the duration and results of the regulatory review of applications or clearances that are necessary to initiate and continue to advance and progress our clinical programs; 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; and risks related to macroeconomic conditions and market volatility resulting from global economic developments, geopolitical events and conflicts, high inflation, rising interest rates, tariffs and potential for significant changes in U.S. policies and regulatory environment. 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.

AxiomerTM advancing to value inflection



EON-GUIDED ADAR RNA EDITING, INVENTED BY PROQR

Now translating Axiomer in clinic

Foundational IP estate securing long-term leadership in the field



PIPELINE FOR RANGE OF HIGH UNMET NEEDS

AX-0810 Phase 1 trial dosing

ProQR leading neurological application of RNA editing; robust and durable efficiency across regions of CNS



HIGH IMPACT STRATEGIC PARTNERSHIPS

With Eli Lilly, Rett Syndrome Research Trust

Accelerating development and creating meaningful value for patients



OVER A DECADE OF RNA THERAPY LEADERSHIP

With experienced team and further strengthened management to drive the future of ProQR



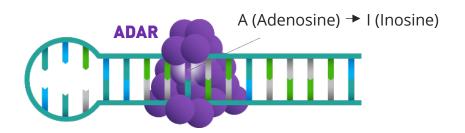
RUNWAY INTO MID 2027

Funding the clinical readout of multiple programs

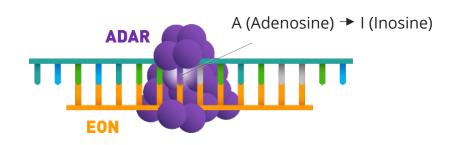
€ 106.9 million cash and cash equivalents as of end of Q3 2025

How Axiomer™ edits RNA

NATURAL ADAR EDITING



EDITING OLIGONUCLEOTIDE (EON)-directed **EDITING**



MODULATE



Modify protein function

CORRECT



Correct disease-causing mutations

PROTECT



Introduce protective variants

Pipeline horizons

Near term, next, and beyond

Near term

AX-0810 IN THE CLINIC

Axiomer in first-in-human (FIH) trial with AX-0810 targeting NTCP in **cholestatic disease**; Phase 1 trial dosing healthy volunteers to establish safety, PK, and target engagement

Next

AX-2402 RAPIDLY ADVANCING

Leading RNA editing CNS capability and first neuro pipeline program, AX-2402 for **Rett syndrome**, advancing rapidly – positioning ProQR at the forefront of neurological RNA editing medicines

Beyond

BROADER EXPANSION

Continued advancement of our platform, including earlier programs AX-1412 for **CVD** and AX-2911 for **MASH**, broadening the portfolio

Addressing unmet need in cholestatic diseases through NTCP modulation



Cholestatic diseases have high unmet medical need, especially **Primary Sclerosing Cholangitis** affecting adults (~80,000 patients) and Congenital **Biliary Atresia** affecting pediatrics early in life (~20,000 patients). Both conditions have no approved therapies and may require liver transplantation.^{1,2}



Patients **accumulate bile acids** in liver leading to
fibrosis and ultimately liver
failure.



Learnings from human genetics and literature demonstrate that modulation of the NTCP channel responsible for majority of bile acids re-uptake in liver cells could lead to hepatoprotective effects.



NTCP, sodium taurocholate co-transporting polypeptide. References: 1Trivedi PJ, et al. Clin Gastroenterol Hepatol. 2022 Aug; 20(8):1687-1700.e4; 2Schreiber RA, et al. J Clin Med. 2022 Feb 14;11(4):999

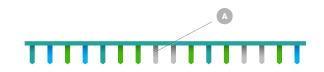
AX-0810: first-in-class RNA editing therapy targeting NTCP for cholestatic diseases

LIVER WITH CHOLESTATIC DISEASE

High concentration of bile acids in hepatocytes

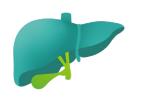




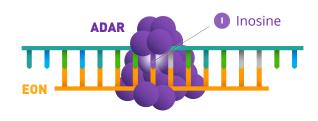


AX-0810 STRATEGY FOR DISEASED LIVER

AX-0810 modifies the NTCP channel to limit bile acids uptake while preserving all other functions of the channel







- AX-0810 makes an A-to-I edit that mimics a variant to enable lower bile acids concentration in hepatocytes
- AX-0810 is designed to be a disease-modifying treatment

Therapeutic goals

- Reduce inflammation and fibrosis from bile acids toxicity
- Alleviate symptoms in PSC and BA
- Prevent or delay cirrhosis, organ failure, and transplant

ADAR, Adenosine Deaminase Acting on RNA; BA, Biliary atresia; EON, Editing Oligonucleotide; NTCP, sodium taurocholate co-transporting polypeptide; PSC, Primary Sclerosing Cholangitis; WT, Wild Type.

NTCP modulation approach broadly validated

Reducing liver bile acids toxic overload via NTCP modulation is a key driver for hepatoprotective effects



HUMAN GENETICS

Healthy population discovered with NTCP variants that reduces bile acids uptake into liver¹⁻³



IN VITRO

NTCP variant leads to an 8-fold decrease of bile acids re-uptake *in vitro*



IN VIVO

NTCP modulation demonstrated activity in mouse cholestatic disease model, with 2- to 3-fold change in conjugated bile acids⁴⁻⁵



IN CLINIC

Clinical PoC with bulevirtide in Ph3 Hepatitis D trial, for which liver improvement occur in patients, even without virologic response⁶⁻⁸



Bulevirtide (Hepcludex) is a daily SC injected NTCP inhibitor approved for Hepatitis D. NTCP channel is a known transporter for bile acids and hepatitis virus from bloodstream to the liver.

14 Ho RH, et al. J Biol Chem. 2004 Feb 20;279(8):7213-22; ²Vaz FM, et al. Hepatology. 2015 Jan;61(1):260-7; ³Schneider AL, et al. Clin Res Hepatol Gastroenterol. 2022 Mar;46(3):101824; ⁴Slijepcevic D, et al. Hepatology. 2018 Sep;68(3):1057-1069; ⁵Salhab A, et al. Gut. 2022 Jul;71(7):1373-1385; ⁶Wedemeyer H, et al. N Engl J Med. 2023 Jul 6;389(1):22-32; ⁷Wedemeyer H, J Hepatol. 2024 Oct;81(4):621-629.; ⁸Dietz-Fricke C, JHEP Rep. 2023 Mar 15;5(4):100686.

EON mediated editing demonstrates consistent editing of NTCP and impact on biomarker in vivo

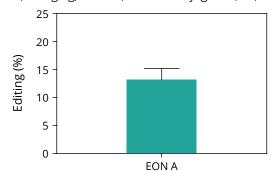
Editing efficiency

NTCP RNA Editing in Humanized Mice

(N=4, 20mg/kg, 6 doses, GalNAc conjugation, SC, D25, ddPCR)

NTCP RNA Editing in NHP

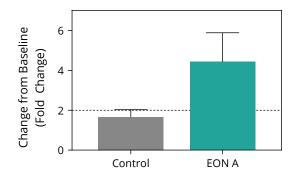




Plasma total bile acids

Plasma TBA in Humanized Mice

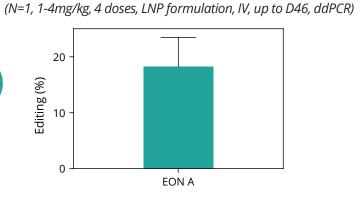
(N=4, 20mg/kg, 6 doses, GalNac conjugation, SC, D25)

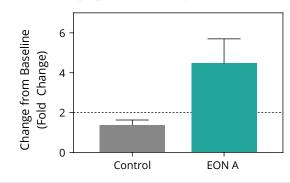


Plasma TBA in NHP

(N=1, 1-4mg/kg, 4 doses, LNP formulation, IV, up to D39)







- EON A results in consistent editing data in humanized mouse model and NHP in vivo with approx. 15% editing reaching expected NTCP modulation
- Reaching >2-fold
 changes in
 biomarkers expected impact on
 plasma bile acids
 levels following NTCP
 EON treatment

AX-0810 first-in-human (FIH) Phase 1 trial

Dosing healthy volunteers to assess safety, tolerability, PK, and biomarker-based target engagement of AX-0810

Multiple ascending dose (MAD) N=33 (24 on treatment, 9 on placebo)



DMC safety reviews before proceeding to next dose and dose escalation is sequential during the dosing phase

Treatment

AX-0810 GalNAc conjugated editing oligonucleotide

Objectives

- Assess safety, tolerability, and PK of AX-0810
- Confirm target engagement as measured by biomarkers

Key endpoints

- Change in bile acids levels
- Bile acids profile
- TUDCA challenge
- Liver biomarkers

Phase 1 progressing

- Cohort 1 safety, tolerability, PK towards year end 2025/early 2026
- Target engagement data on all cohorts in H1 2026

CTA, Clinical Trial Application; DMC, Data Monitoring Committee; MAD, Multiple Ascending Dose; PK, Pharmacokinetics; TUDCA, Tauroursodeoxycholic acid; AX-0810 CTA has been approved in Europe (October 2025).

Clinically relevant biomarker strategy to inform future development

From target engagement to pharmacodynamics biomarkers



TARGET ENGAGEMENT



DISEASE RELEVANCE



MECHANISTIC PHARMACODYNAMIC

Total bile acids (TBAs) levels

Assess effect on bile acids transporter activity

Bile acids profile

Confirm NTCP specificity

Conjugated bile acids clearance (TUDCA)

Differentiate effect between doses to inform dosing regimen in disease population

NTCP, sodium taurocholate co-transporting polypeptide; TUDCA, Tauroursodeoxycholic acid.

Learnings from the FIH translating into the disease population

Healthy volunteers

Plasma TBA

from normal to ↑ with AX-0810

Plasma conjugated bile acids

from normal to ↑ with AX-0810

TUDCA challenge

from normal clearance to 1 with AX-0810

Disease population

Plasma TBA

From ↑ in cholestasis to ↑↑↑ with AX-0810

Plasma conjugated bile acids

from normal to ↑ with AX-0810

TUDCA challenge

from ↓ clearance to ↓↓ with AX-0810

Disease andpoints **↓ Liver enzymes**

↓ Cholestasis markers

↓ Fibrosis markers

FIH, First in Human; TBA, Total Bile Acids.

AX-2402 RNA editing therapy targeting MECP2 for Rett Syndrome





Rett Syndrome is a devastating and progressive neuro-developmental

disorder caused by variants in the transcription factor Methyl CpG binding protein 2 (MECP2). There is a high unmet need for a disease modifying therapy.



Nonsense variants lead to severe phenotypes. They represent more than one third of Rett Syndrome cases and are projected to affect 20,000 individuals in US and EU.^{1,2}



Rett Syndrome is **not a neuro- degenerative disorder** and
restoring levels of the MECP2
protein has shown to **reverse symptoms** in mice.³



Axiomer has the potential to restore the precise level of MECP2 protein regulatory function, which is lacking in Rett Syndrome and become a disease modifying therapy.



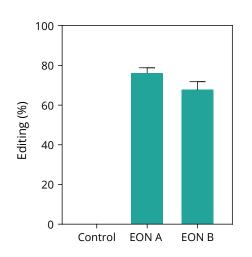
Rett Syndrome Research Trust partnership includes \$9.2 M in funding; collaboration established in January 2024, expanded in Dec 2024.



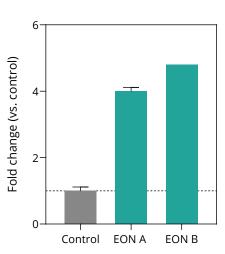
¹Krishnaraj R, et al. Hum Mutat. 2017 Aug;38(8):922-93; ²RSRT 2023 conference; ³Guy J, et al. Science. 2007 Feb 23;315(5815):1143-7.

Editing increases mRNA levels and restores protein expression; Broad editing distribution in CNS

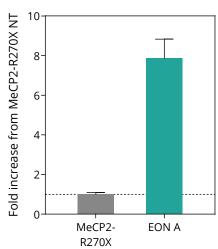
R270X MECP2 editing



MECP2 RNA levels



R270W MECP2 protein levels

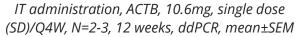


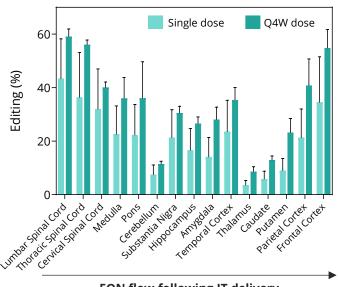
Up to 80 % editing of R270X MECP2 in patient fibroblasts

Increased MECP2 RNA levels due to PTC recoding and NMD inhibition

Increased R270W MECP2 protein levels

RNA editing in NHP in vivo





EON flow following IT delivery

Stable and prolonged editing efficiency in both superficial and deep brain regions

EON, Editing oligonucleotide; NT, Non-treated; TF, transfection, Conditions panel on the left and middle: 100 nM EON, transfection, 48h, N=2, mean±SEM. Conditions panel on the right: MeCP2-R270X-NanoLuc activity; 100 nM EON, transfection, 48h, N=8, mean±SEM.

AX-1412 RNA editing therapy targeting B4GALT1 for cardiovascular diseases



Leading causes of death in the world~18 million people die from CVDs every year (32% of all global deaths)
Despite therapies, the unmet medical need remains.



AX-1412 is designed to provide people with a protective genetic variant of B4GALT1 that is associated with 36%¹ reduction in the risk of cardiovascular disease.



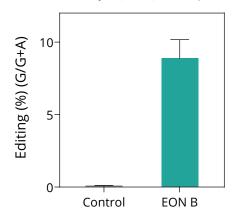
AX-1412 may become a stand-alone cardio-vascular therapy that may also work synergistically with standard of care to further reduce risk of CVDs.



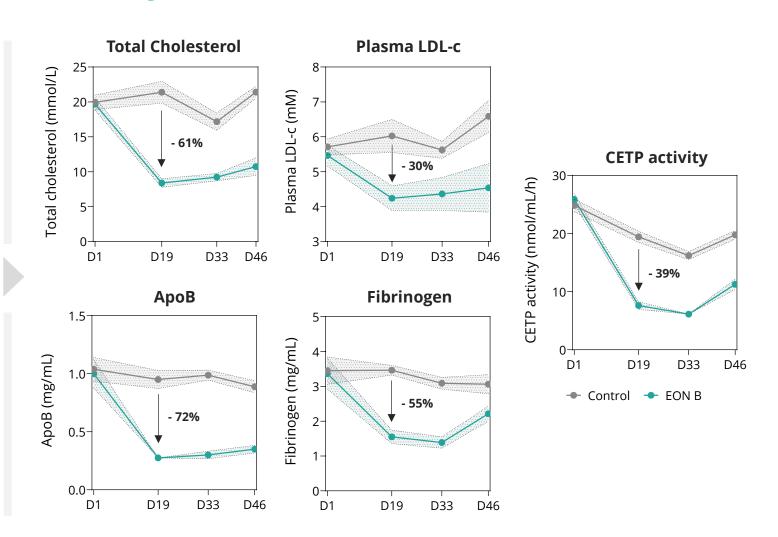
¹Montasser ME, et al. Science, 2021 Dec 3:374(6572):1221-1227

EON-mediated editing of B4GALT1 leads to meaningful effect on key biomakers in E3L.CETP Mice

B4GALT1 editing and biomarkers in E3L.CETP mice (N=10, 2mg/kg, LNP formulation, IV Q1W, D46, ddPCR)



Treatment with EON B led to a reduction in total cholesterol, ApoB, and LDL-c confirming this therapeutic approach to address cardiovascular diseases



AX-2911 RNA-editing therapy to address Metabolic dysfunction associated steatohepatitis (MASH)



MASH and subsequent stages of liver disease are very prevalent and still on the rise worldwide.

MASH individuals have a high unmet medical needs due to the progressive nature of the disease (cirrhosis and hepatocellular carcinoma) and limited therapeutic options available.¹



PNPLA3 (patatin-like phospholipase domain-containing 3) I148M is a variant **commonly reported** in the MASH population worldwide (20-60% of the patients) and is known as **associated risk factor**.^{2,3} Approx. 8 million individuals in US and EU are homo-zygous for the 148M variant.



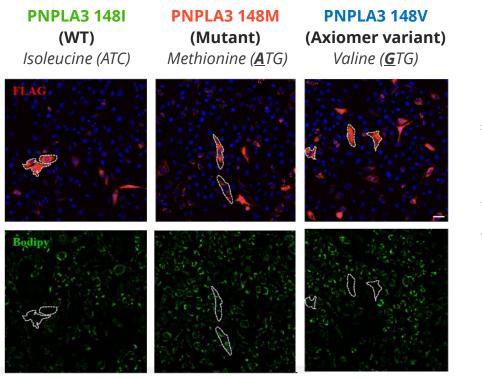
Axiomer EONs have the potential to change the Methionine into a Valine bringing the PNPLA3 protein back to a WT-like functional conformation.



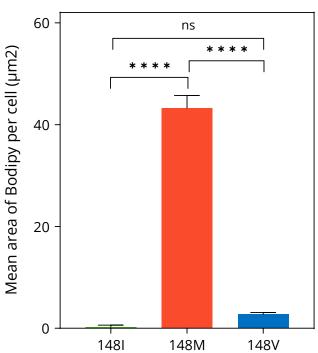
¹Sandireddy R, et al. Front Cell Dev Biol. 2024 Jul 16;12:1433857; ²Romeo S, et al. Nat Genet. 2008 Dec;40(12):1461-5; ³Salari N, et al. BMC Endocr Disord. 2021 Jun 19;21(1):125.

Axiomer™ creates a PNPLA3 protein with WT-like functionality

1481 and 148V reports equivalence in lipid droplet sizes



Hoechst (nuclei), Bodipy (Lipids) and M2 anti-flag (PNPLA3)



- The wild-type 148I shows smaller lipid droplets, reflecting normal lipid metabolism
- The 148M variant induces significantly larger lipid droplets, consistent with its pathogenic role in lipid metabolism disorders
- The corrected variant 148V results in wild-type like droplet sizes, suggesting a corrective effect on lipid accumulation, similar to 148I

Treatment conditions: HeLa cells, plasmid, transfection, 250uM linoleic acids, 24h, cell lipase activity by IF One-way ANOVA, ****, P<0.0001; Mean, SEM.

Pipeline leverages the promise of RNA editing

Demonstrating applications to modulate, correct and protect







MODULATE

AX-0810

NTCP for cholestatic diseases

Preliminary safety and PK data towards end of 2025; Target engagement in H1 2026

CORRECT

AX-2402

MECP2 program for *Rett syndrome R270X*

Multiple additional *Rett programs*

AX-2911

PNPLA3 program for MASH

PROTECT

AX-1412

B4GALT1 program for cardiovascular diseases

19



Partnered pipeline 10 undisclosed targets (option to expand to 15)

B4GALT1, Beta-1,4-galactosyltransferase 1; MECP2, Methyl CpG binding protein 2; NTCP, sodium taurocholate co-transporting polypeptide; PNPLA3, Patatin-like phospholipase domain-containing 3.





Resource slides

Video





ProQR Leadership Team

Management Team



Daniel de Boer Founder & CEO, Board Executive Director





Gerard Platenburg

Chief Scientific Officer, Board Executive Director









Dennis Hom

Chief Financial Officer















Cristina Lopez Lopez, MD, PhD Chief Medical Officer









Sheila Sponselee Chief People and Operations Officer

tomorrows

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2 Alnylam



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Theresa Heggie



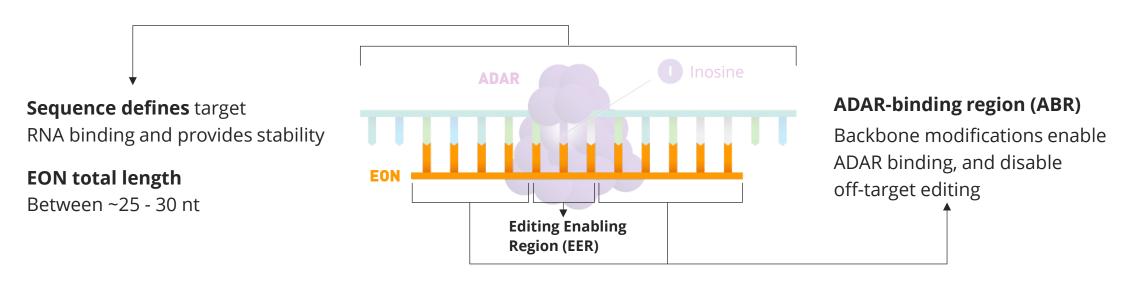
2 Alnylam FREELINE

ProQR development pipeline

	TARGET	DISCOVERY	NON-CLINICAL	CLINICAL	NEXT MILESTONE	ESTIMATED POPULATION
DEVELOPMENT PIPELINE					-	
AX-0810 for Cholestatic diseases	NTCP				Initial safety and PK data ¹	~100K patients²
AX-2402 for Rett syndrome	MECP2 R270X				Candidate selection	~5K patients
AX-1412 for Cardiovascular disease	B4GALT1				Scientific update GalNAc	~200M patients³
AX-2911 for MASH	PNPLA3				Candidate selection	~8M patients
DISCOVERY PIPELINE						
AX-1005 for CVD	Undisclosed					~200M patients
AX-0601 for obesity and T2D	Undisclosed					~650M patients
AX-9115 for rare metabolic condition	Undisclosed					
AX-2403 for Rett syndrome	MECP2 R168X					~6K patients
AX-2404 for Rett syndrome	MECP2 R255X					~5K patients
AX-2405 for Rett syndrome	MECP2 R294X					~6K patients
AX-2406 for Rett syndrome	MECP2 R133H					
AX-3875 for rare metabolic & CNS disorder	Undisclosed					
AX-4070 for rare CNS disorder	Undisclosed					
PARTNERED PIPELINE						
10 targets (option to expand to 15)	Undisclosed	Progress undisclosed				Lilly

¹CTA authorization announced October 2020. ²Approximately 100K people affected with Primary Sclerosing Cholangitis and Biliary Atresia in US and EU5. ³Approximately 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: Trivedi PJ, et al. Clin Gastroenterol Hepatol. 2022 Aug;20(8):1687-1700.e4; Schreiber RA, et al. J Clin Med. 2022 Feb 14;11(4):999; Tsao CW, et al. Circulation. 2022;145(8):e153–e639. World Health Organization, World Gastroenterology Organization

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

Axiomer™ RNA editing journey

From invention to the clinic

ProQR invents oligo mediated RNA Editing recruiting endogenous ADAR

2014

ProQR pivots to solely focus on ADAR editing

2022

ProQR starts a FIH Clinical Trial targeting NTCP

2025

2014-2018+

ProQR secures broad key patent positions on ADAR-mediated RNA editing 2015-2021

ProQR optimizes the ADAR platform in stealth 2021

ProQR and Eli Lilly enter into first 5 target partnership worth \$1.25B 2022

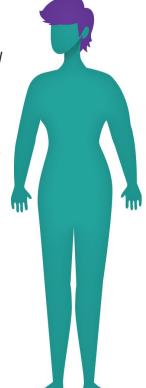
ProQR and
Eli Lilly expand
partnership to 10
targets worth
~\$3.9B

2023

ProQR
demonstrates >50%
RNA editing in CNS
and liver in NHP
and announces
pipeline

2024

- ProQR first in the field to report a disease relevant biomarker effect using Axiomer in NHP.
- Initial indication of good safety profile.
- Initial clinical validation of ADAR editing.



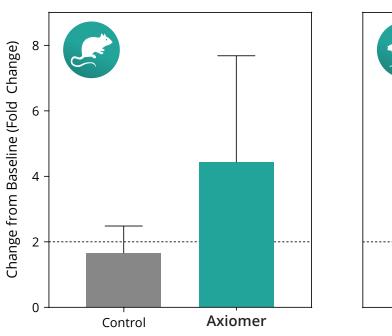
ADARs: Adenosine deaminases acting on RNA, EONs: Editing oligonucleotides

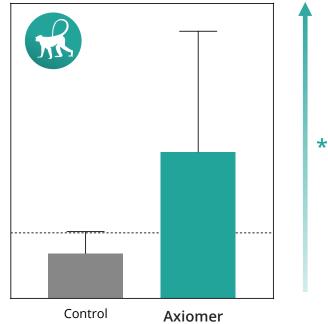
Assessing total bile acids (TBA) levels

Demonstrating AX-0810 EON effect on liver bile uptake function

- NTCP transporter is responsible for >90% of total bile acid (TBA) reuptake from the bloodstream into the liver
- NTCP modulation of bile acids reuptake function by AX-0810 is expected to result in an increase in plasma TBA
- A 2-fold change is expected to be meaningful in the patient population

Plasma total bile acids levels





* Expected direction of change in TBA levels

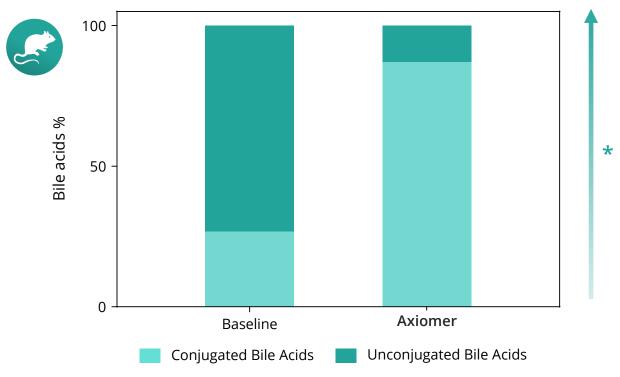
NTCP, sodium taurocholate co-transporting polypeptide; TBA, Total Bile Acid; UDCA, Tauroursodeoxycholic acid. Panel on the left: Mice, N=4, 20mg/kg EON, 6 doses, GalNac conjugation, SC, D25; panel on the right: NHP, N=1, 1-4mg/kg EON, 4 doses, LNP formulation IV, up to D39

Confirming AX-0810 specificity for NTCP

By assessing changes in bile acids profile

- NTCP is the main transporter
 of conjugated bile acids from
 the portal vein into hepatocytes
- NTCP modulation of bile acids reuptake function by AX-0810 is expected to result in:
 - An increase in conjugated bile acids in the plasma
 - No-to-limited changes in unconjugated bile acids levels in plasma

Plasma total bile acids profile



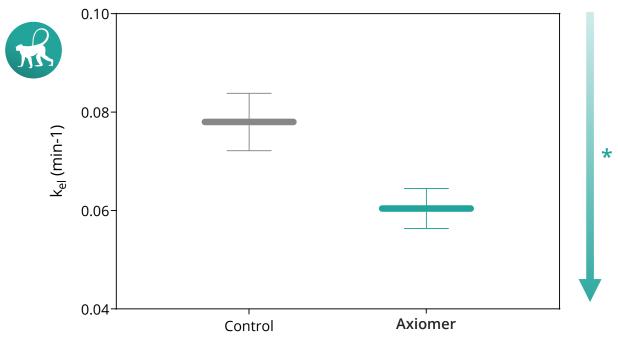
*Expected direction of change in plasma conjugated bile acids

NTCP, sodium taurocholate co-transporting polypeptide. Experiment conditions: Mice, N=4, 20mg/kg EON, 6 doses, GalNac conjugation, SC, D25

Safely and transiently mimic disease conditions with a TUDCA challenge

- A mechanistic challenge with TUDCA is expected to:
 - Give indication on NTCP bile acids uptake activity and Axiomer specificity on NTCP transporter
 - Provide discriminatory effect between doses to inform future dosing regimen selection
- An increase in TUDCA plasma levels is expected to further confirms AX-0810 efficiency and selectivity

TUDCA clearance from plasma with Axiomer



* Expected direction of change in TUDCA clearance

NTCP, sodium taurocholate co-transporting polypeptide; TUDCA, Tauroursodeoxycholic acid. Experiment conditions: NHP, exploratory study, n=5-7, 10mg/kg EON, 4 doses, SC, D51.

Leading IP supporting ADAR-mediated RNA editing platform technology

- Axiomer™ IP strategy commenced in 2014 with first patent application filings
- Currently 32 published patent families, comprising 39 national/regional patents
- Axiomer™ IP portfolio is constantly expanding
- Oppositions/appeals and several Third-Party Observations have been filed against a variety of applications and patents in the Axiomer™ IP portfolio, all by strawmen

ProQR Axiomer[™] leading IP estate for ADAR-mediated RNA editing

- ProQR's Axiomer™ IP contains 3 early RNA editing platform patent families covering single-stranded oligonucleotides that recruit endogenous ADAR
- Oppositions/appeals and Third-Party Observations have been filed throughout these three patent families
- First (2014): oligonucleotides with a complementary (**targeting**) and a stem-loop (**recruiting**) portion
- Second (2016): oligonucleotides without a stem-loop structure but with one or more mismatches and chemical modifications
- Third (2016): oligonucleotides **without a stem-loop structure** but with specific chemical modifications in the '**Central Triplet**'

Overview of Axiomer™ related patents

Docket	Priority	Feature	Status	Remarks
1 (0004)	17DEC2014	Targeted RNA Editing using endogenous ADARs	Granted AU BR <u>CA CN</u> IL IN <u>JP</u> NZ <u>US US</u> ZA	Platform IP
2 (0013)	22JUN2016	Short EONs with wobble and/or mismatch base pairs	Granted <u>AU</u> IL <u>JP KR</u> NZ <u>US US</u> US	Platform IP
3 (0014)	01SEP2016	Chemically modified short EONs	Granted AU <u>CN EP</u> IL IN <u>JP KR</u> NZ <u>US US US</u> ZA	Platform IP
4 (0016)	19JAN2017	EONs + protecting SONs (heteroduplex formation)	Granted <u>US</u>	Platform IP
5 (0023)	18MAY2018	PS linkages / chiral linkages (e.g., PS, PN)	Granted AU <u>US</u>	Platform IP
6 (0025)	28JAN2019	Editing of PTC in exon 61 USH2A	Granted US	Target
7 (0026)	11FEB2019	Phosphonacetate linkages / UNA modifications	<u>Published</u>	Platform IP
8 (0029)	03APR2019	MP linkages	Granted <u>IP</u>	Platform IP
9 (0031)	24APR2019	Editing inhibition	<u>Published</u>	Platform IP
10 (0032)	13JUN2019	Benner's base (dZ)	Granted <u>CN</u> ZA	Platform IP – with UC Davis (P Beal)
11(0035)	23DEC2019	Editing in exon 35 of ABCA4 for Stargardt disease	<u>Published</u>	Target
12 (0039)	23JUL2020	Split EONs	Published	Platform IP
13 (0045)	14FEB2022	PCSK9	<u>Published</u>	Target
14 (0046)	15JUL2022	5'-GA-3' editing	<u>Published</u>	Platform IP – with UC Davis (P Beal)
15 (0048)	15JUL2022	diF modification	Published	Platform IP
16 (0051)	21OCT2022	Heteroduplex Editing Oligonucleotide (HEON) complexes	Published	Platform IP

Overview of Axiomer™ related patents

Docket	Priority	Feature	Status	Remarks
17 (0052)	24NOV2022	HFE	Published	Target
18 (0053)	09DEC2022	B4GALT1	Published	Target
19 (0054)	01DEC2022	ALDH2	Published	Target
20 (0055)	20JAN2023	AG1856 saponin	Published	Platform IP – with FU Berlin (A Weng)
21 (0057)	20FEB2023	ANGPTL3	Published	Target
22 (0058)	24MAR2023	KCC2	Published	Target – with Eli Lilly
23 (0059)	24MAR2023	PNms linkages	Published	Platform IP
24 (0060)	27MAR2023	NTCP	Published	Target
25 (0061)	16JUN2023	RELN	<u>Published</u>	Target
26 (0062)	07SEP2023	MC4R	Published	Target
27 (0066)	16NOV2023	GALK1	Published	Target
28 (0067)	20DEC2023	нтт	Published	Target
29 (0070)	18JAN2024	IDUA	Published	Target – with Eli Lilly
30 (0071)	02APR2024	NTCP	Published	Target
31 (0072)	25APR2024	PNPLA3	Published	Target
32 (0073)	11APR2024	PIAS1	Published	Target

ProQR Axiomer™ IP

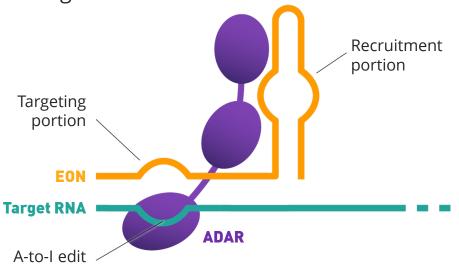
Broad coverage

- Axiomer[™] patent claims are broad and cover:
 - Any type of chemically modified oligonucleotide aimed at RNA editing of any possible target and any possible disease using endogenous ADAR
 - Specific targets, including SERPINA1 (A1AT deficiency), IDUA (Hurler syndrome),
 LRRK2 (Parkinson's disease)
 - Oligonucleotides with chirally-controlled linkages
 - Oligonucleotides with all sorts of chemistries (also in the 'Central Triplet'), including **DNA**
- To note: claims directed to chemically modified oligonucleotides do not cover viral delivery of the oligonucleotide

Overview of key claims - 1

Granted claims in the 1st Axiomer[™] patent family relate to (chemically modified) oligonucleotides that comprise:

- A targeting portion for binding to a target RNA incl. target adenosine
- A recruitment portion (hairpin structure) for recruiting endogenous ADAR to edit the target adenosine



US 10,676,737	Granted
<u>US 11,781,134</u>	Granted

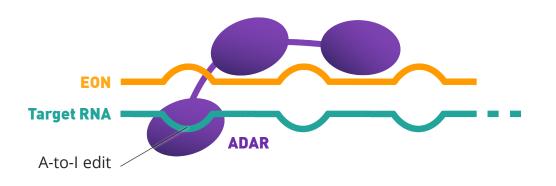
Claim 17 (US 11,781,134):

A method for making a change in a target RNA sequence in a human cell, comprising the steps of:

- introducing into the cell an oligonucleotide construct that is sufficiently complementary to bind by nucleobase pairing to the target RNA sequence, wherein the target RNA sequence comprises a target adenosine;
- allowing the formation of a double-stranded structure of the oligonucleotide construct with the target RNA sequence upon base pairing;
- allowing the double-stranded structure of the oligonucleotide and the target RNA sequence to recruit an hADARI or hADAR2 enzyme naturally present in the cell;
- allowing the hADARI or hADAR2 enzyme to perform deamination of the target adenosine to an inosine in the target RNA sequence.

Overview of key claims - 2

Granted claims in the 2nd Axiomer[™] patent family relate to oligonucleotides that do **not** have a hairpin structure, but instead have one or more wobbles and/or mismatches, and chemical modifications in the base, ribose sugar and/or linkage to increase stability and are still able to recruit **endogenous** ADAR to edit the target adenosine.



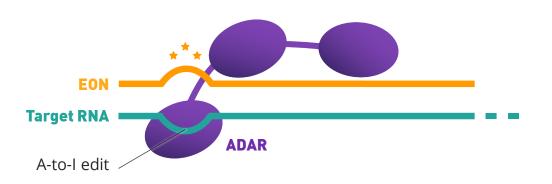
US 10,988,763	Granted
US 11,649,454	Granted
US 12,018,257	Granted

Target-specific claims are directed to:

- An AON capable of forming a double stranded complex with a target RNA in a cell, wherein: the target RNA encodes alpha1- antitrypsin (A1AT), LRRK2, or the target RNA is encoded by the IDUA gene
- The AON is complementary to a target RNA region comprising a target adenosine
- The AON comprises one or more nucleotides with one or more sugar modifications
- The AON does <u>not</u> comprise a portion that is capable of forming an intramolecular stem-loop structure that is capable of binding an ADAR enzyme
- The AON is shorter than 100 nucleotides.
- The AON optionally comprises 1, 2, 3, 4, 5, 6, 7, 8, 9 or 10 mismatches, wobbles and/or bulges with the complementary target RNA region, and, wherein formation of the double stranded complex between the AON and the target RNA results in the deamination of the target adenosine by an ADAR enzyme present in the cell

Overview of key claims - 3

Granted claims in the 3rd Axiomer™ patent family relate to oligonucleotides that do **not** have a hairpin structure, but have **chemical modifications** in the base, ribose sugar and/or linkage to increase stability and are still able to recruit **endogenous** ADAR to edit the target adenosine.



EP 3 507 366 B1	Granted; appeal pending	
<u>US 10,941,402</u>	Granted	
<u>US 11,851,656</u>	Granted	
<u>US 12,203,072</u>	Granted	

Claim 1 (US 11,851,656):

An antisense oligonucleotide (AON) comprising a Central Triplet of 3 sequential nucleotides, wherein

- the AON is capable of forming a double stranded complex with a target RNA molecule in a cell comprising a target adenosine;
- the nucleotide directly opposite the target adenosine is the middle nucleotide of the Central Triplet;
- 1, 2 or 3 nucleotides in the Central Triplet comprise a sugar modification and/or a base modification to render the AON more stable and/or more effective in inducing deamination of the target adenosine; with the proviso that the middle nucleotide does not have a 2'-O-methyl modification;
- the AON does <u>not</u> comprise a 5'-terminal O6-benzylguanosine;
- the AON does <u>not</u> comprise a portion that is capable of forming an intramolecular stem-loop structure that is capable of binding a mammalian ADAR enzyme present in the cell; and
- the AON can mediate the deamination of the target adenosine by the ADAR enzyme.

