QUINCE THERAPEUTICS

Unlocking the power of a patient's own biology for the treatment of rare disease

The ThinkEquity Conference 2024

October 30, 2024

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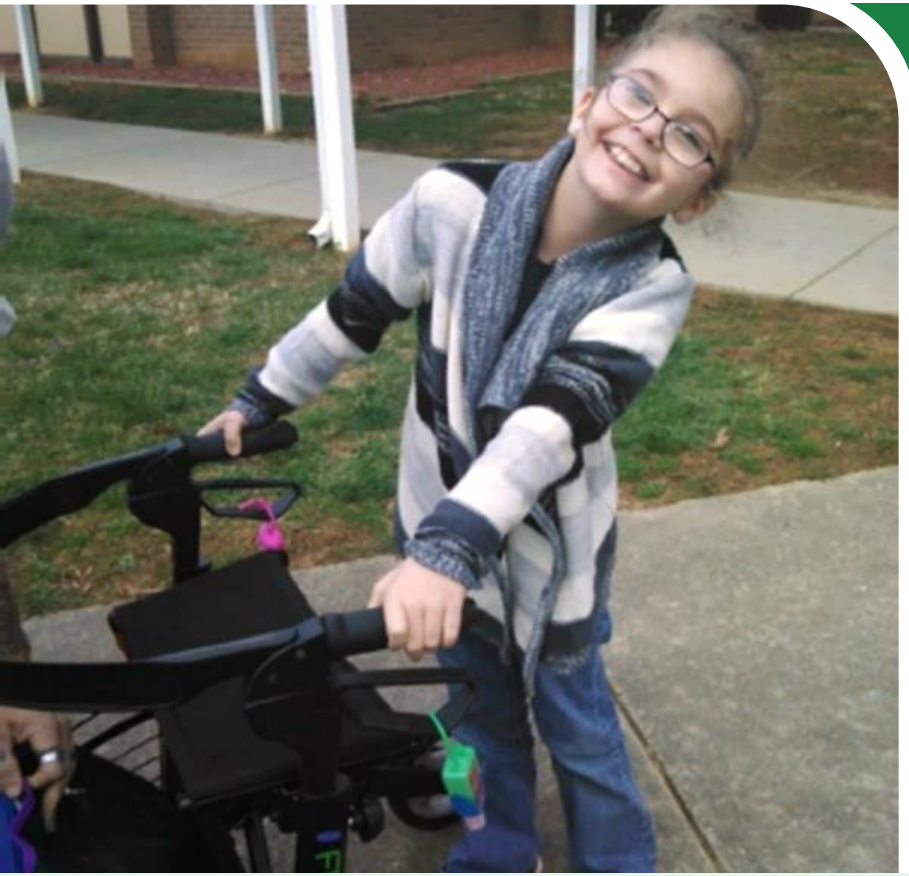
Quince Therapeutics investment highlights

- Pivotal Phase 3 clinical trial of EryDex underway in pediatric rare disease
- EryDex targets Ataxia-Telangiectasia (A-T) with no currently approved treatments and $1+ billion commercial opportunity
- Encouraging Phase 3 clinical trial results in prior study of patients with A-T
- Risk-mitigated Phase 3 study conducted under Special Protocol Assessment agreement with Fast Track and Orphan Drug designations
- Selected Duchenne muscular dystrophy (DMD) as second indication for EryDex
- Cash runway through pivotal Phase 3 topline results into 2026

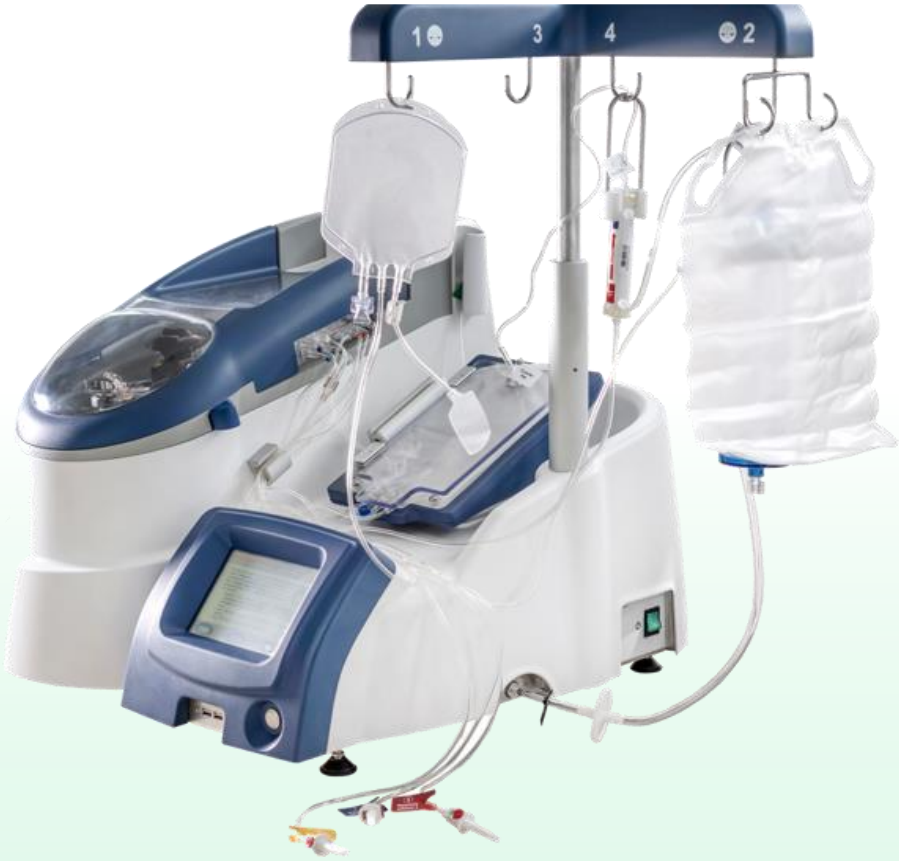
No currently approved treatments for A-T patients



- A-T is an inherited rare neurodegenerative and immunodeficiency disorder caused by mutations in ATM gene
- Neurological symptoms worsen until patients are wheelchair dependent, usually by age 12
- Median lifespan of approximately 25-30 years
- Currently no approved treatments for A-T
- Similar epidemiology to Friedreich’s ataxia

Unique drug/device combination with high barriers to entry

- One-touch, automated, and point-of-care device
- Designed to deliver therapeutic in patient's own (autologous) red blood cells – distinct from complicated cell or gene therapy
- Flexible technology designed to deliver wide range of therapeutics from small and large molecules to biologics
- IP exclusivity until at least 2034 globally & 2035 in U.S. and CE mark in Europe
- More than $100 million invested in proprietary AIDE technology



Autologous Intracellular Drug Encapsulation (AIDE) Technology

Phase 3 lead asset EryDex encapsulates potent anti-inflammatory steroid in autologous RBCs

A Autologous

I Intracellular

D Drug

E Encapsulation

- Autologous RBCs potentially ideal for steroid delivery
- May confer numerous benefits compared to conventional therapies, including:
  - Unique biodistribution
  - Altered pharmacokinetics and pharmacodynamics
  - Improved biocompatibility
  - Mitigating chronic toxicity and adrenal suppression
- AIDE technology designed to fundamentally alter steroid concentrations and allow for chronic administration

Favorable EryDex safety profile compared to conventional steroid administration

Well known toxicities of conventional steroid administration		*Favorable EryDex safety profile observed in clinical studies to date*
Growth suppression	X	√
Delayed puberty	X	√
Immune suppression	X	√
Hyperglycemia	X	√
Excessive weight gain	X	√
Hirsutism	X	√
Acne	X	√

EryDex Clinical History Snapshot

- **~270 patients treated with at least one dose**
- **~200 of those were patients with A-T**
- **Nearly 6,000 doses administered**

Source: Rossi L, et al. *Biotechnol Appl Biochem.* 2001;33(2):85-89.

Attractive commercial opportunity for EryDex lead indication

$1+ billion* estimated global peak commercial opportunity for A-T indication alone

- Estimated prevalence of approximately 10,000 patients with A-T* in U.S., U.K., and EU4 countries with no currently approved A-T therapies
- First-to-market potential with no known late-stage competition and granted orphan drug designation from FDA and EMA, and Fast Track designation from FDA for the treatment of A-T
- Attractive rare disease pricing comparables with recently approved treatment for Friedreich's ataxia indication (Biogen's Skyclarys WAC pricing at $370K/year)
- Highly scalable manufacturing infrastructure in place with low direct cost of goods – less than 1% of comparable U.S. rare disease pricing

*$1+ billion estimated global peak commercial opportunity and estimated A-T patient population are based on IQVIA Medical Claims (Dx), PharmetricsPlus (P+), and IQVIA Analytics in the U.S. and the company's internal estimates and assumptions outside the U.S.

Physicians expect broad usage of EryDex in A-T

"I would use this in as many ambulatory patients as possible. The disease has a devastating course – I would look forward to using this to try to slow down progression."

– Pediatric Neurologist

Given high unmet need and limited treatment options, HCPs expected utilization across all patient segments

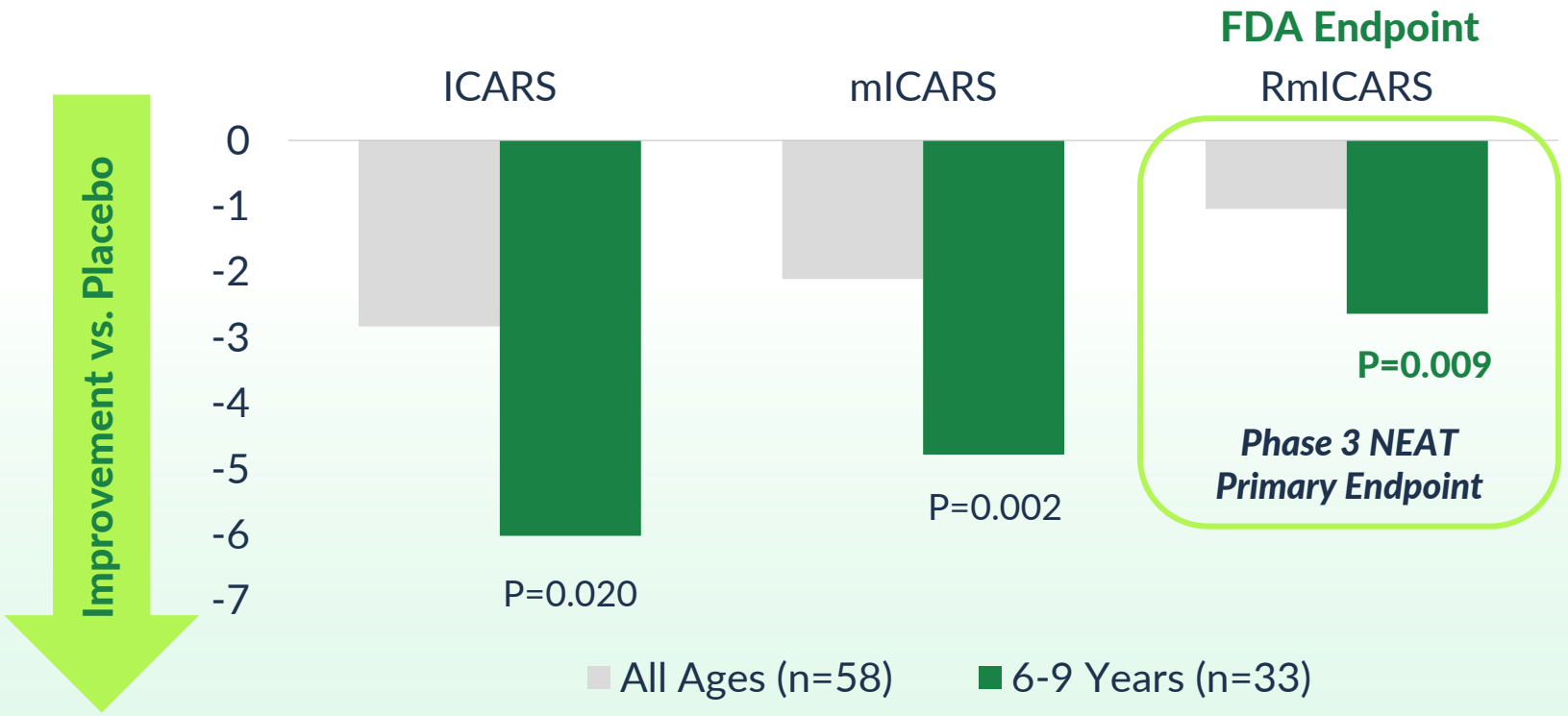
Note: Analysis based target product profile. Source: 2021 Third-Party Market Landscape Assessment, physician n = 14

Encouraging EryDex Phase 3 clinical trial results in prior ATTeST study

EryDex
ATTeST Trial

- Improvement observed in 6 to 9 year-old subgroup across multiple endpoints
- At 12 months, EryDex well-tolerated with no serious safety concerns
- 3+ years of ATTeST OLE observed no serious safety concerns
- Apply key learnings from ATTeST to pivotal NEAT study

ATTeST ICARS Values in ITT Population



Note: Company ATTeST clinical trial data (ClinicalTrials.gov ID: NCT02770807) presented reflect nominal p-values for ICARS values in ITT populations. Values reflect Least Square Means (LSM) difference from placebo and the P value presented • ICARS = International Cooperative Ataxia Rating Scale • mICARS = Modified International Cooperative Ataxia Rating Scale • RmICARS = Rescored Modified International Cooperative Ataxia Rating Scale

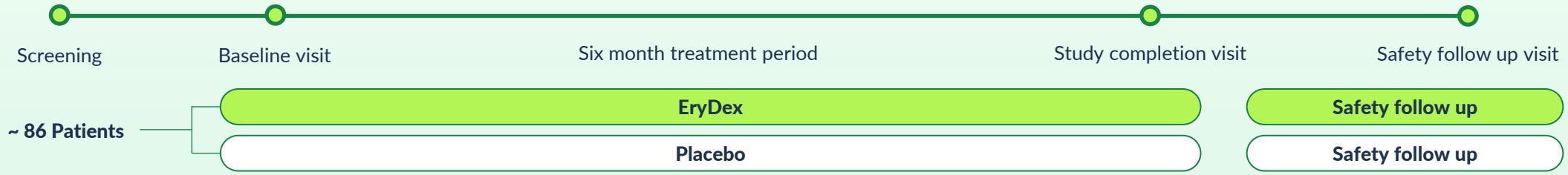
Pivotal Phase 3 NEAT study design

Pivotal study being conducted under Special Protocol Assessment (SPA) agreement with FDA
Allows for NDA submission, assuming positive results, following a single global Phase 3 NEAT study

Randomized, double-blind, placebo-controlled study with six infusions scheduled once every 21 to 30 days
Enrolled first patient in global Phase 3 NEAT clinical trial of EryDex in June 2024
Topline data expected in fourth quarter of 2025

7 patients with A-T enrolled as of mid-August 2024
Plan to enroll approximately 86 patients with A-T ages 6 to 9 years old (primary analysis population)
Approximately 20 additional patients with A-T ages 10 years or older also will be included
Participants will be eligible to transition to an open label extension (OLE) study

Primary efficacy endpoint – RmICARS
RmICARS measures primarily focused on posture and gait disturbance



Note: RmICARS = Rescored Modified International Cooperative Ataxia Rating Scale. Company NEAT clinical trial: ClinicalTrials.gov ID: NCT06193200.

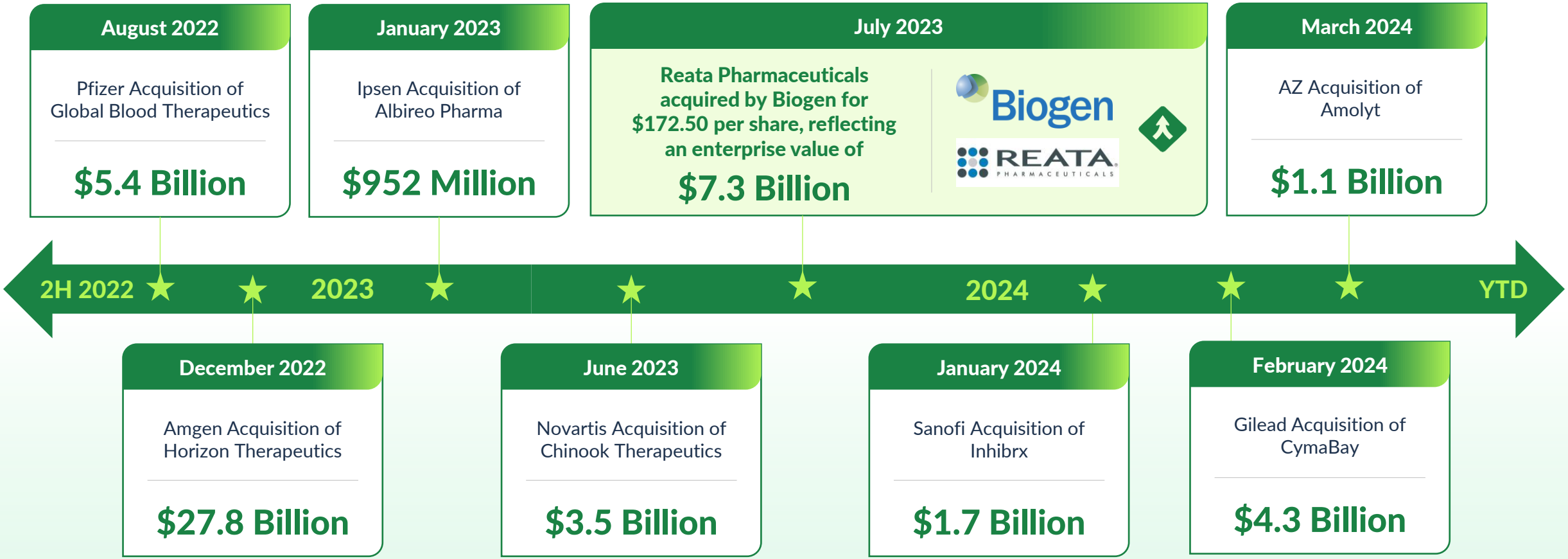
Selected DMD as second development program for EryDex

EryDex

For indications beyond A-T where chronic steroid treatment is – or has the potential to become – a standard of care

- **Duchenne muscular dystrophy (DMD)** ideal second indication for EryDex given well-described clinical benefits of steroids in patients with DMD
- Generating proof-of-concept clinical trial study designs to evaluate EryDex for the potential treatment of patients with DMD in 2024
- Potential to start proof of concept study in 2025 in corticosteroid intolerant populations, representing majority of patients with DMD
- Investigating other potential indications for EryDex spanning across ataxias, neuromuscular indications, hematology, cancer, and autoimmune diseases, with a focus on rare diseases

Recent transaction activity in rare disease space



Additional ~$7 billion committed in licensing and collaboration deals within rare disease space in 2023 alone

Seasoned leadership team

Dirk Thye, M.D.
CEO & CMO

- 20+ years of experience in biotech executive leadership, company creation, R&D, and drug discovery
- Agenovir, Cidara, Cerexa, Peninsula

Charles Ryan J.D., Ph.D.
President

- 25+ years of experience in pharmaceuticals and biotech executive leadership, legal, IP, finance, and development
- Forest Laboratories, Travecta, Neurotrope

Brendan Hannah, M.B.A
COO, CBO, & PFO

- 15+ years of experience leading biotech BD, finance, and business operations
- Led BD at Agenovir (acquired by Vir Biotech for up to $290 million)
- Involved in $2+ billion in transactions

Thomas Sabia, M.B.A.
CCO

- 20+ years of drug commercialization and development experience across large, midsize, and small biotech organizations
- Spark Therapeutics (a Roche Company), Sobi, CSL Behring, Sanofi

Giovanni Mambrini, MSc
CTO

- 20+ years of medical device technology experience with cross-functional expertise in bringing complex programs to market
- Co-founded EryDel with prior experience at Covidien, Dideco, Livanova

Maureen Roden, M.S.N.
VP, Clinical Development

- 30+ years of drug development experience and executive leadership
- Luna Consulting, BSPI, National Cancer Institute

Pamela Williamson, RAC, FRAPS, M.B.A.
Head of Regulatory

- 30+ years of regulatory affairs, quality assurance, pharmacovigilance, health authority compliance and manufacturing operations experience
- Alexion Pharmaceuticals, Genzyme Corporation, Serono/Ares-Serono

Gary Ward, Ph.D.
VP, CMC

- 30 + years managing chemistry, manufacturing, and controls and product development operations
- Expert in broad range of NCE types/product dosage forms
- Pfizer, Dura Pharma, Chugai Biopharma, 3M Company

Mary Ellen Sillivos
VP, Human Resources

- 20+ years of human resources experience in the biotech and biopharmaceutical industry
- Dermira, Hyperion, Affymax

Stacy Roughan
VP, Communications & IR

- 25+ years leading comprehensive strategic communications and investor relations programs
- Expert at crisis and activist situations, M&A transactions, and financings
- NuVasive, Valeant Pharmaceuticals, Ribapharm

Key clinical and corporate milestones

2024

- First patient enrolled in Phase 3 NEAT clinical trial
- Selected DMD as second indication for EryDex and generating study designs
- Determine other potential indications for EryDex and initiate R&D activities
- Received Fast Track designation for A-T from FDA
- Initiation of Phase 3 NEAT open label extension
- Phase 3 ATTeST data published in *The Lancet Neurology*

2025

- Completion of Phase 3 NEAT study enrollment
- Phase 3 NEAT clinical trial topline results in Q4 2025
- Prepare for potential NDA and MAA submissions in 2026, assuming positive study results
- Initiate DMD clinical study for second EryDex indication
- Potential out-licensing of ex-U.S. regional territories to provide runway through approval

Unlocking the power of a patient's own biology for the treatment of rare disease

- **A** Autologous
- **I** Intracellular
- **D** Drug
- **E** Encapsulation

Key investment takeaways

Compelling clinical proposition

- Pivotal Phase 3 clinical trial of EryDex for A-T underway to evaluate lead rare disease asset with topline results expected in fourth quarter of 2025
- Risk-mitigated clinical and regulatory approach supported by optimized clinical trial design, special protocol assessment (SPA) agreement with FDA, Fast Track designation from FDA, and encouraging Phase 3 clinical trial results in prior study

Attractive commercial opportunity

- Lead asset EryDex targets rare disease A-T with no currently approved treatments and $1+ billion commercial opportunity
- Selected DMD as second indication for EryDex given high unmet need and well-described clinical benefits of steroids in patients with DMD

Well-positioned to execute

- Cash runway through pivotal Phase 3 topline results into 2026
- Seasoned and experienced leadership team