

Targeted Immunology CD40/CD40L Therapeutics

Transplantation | Autoimmunity | ALS

June 2021

Forward-Looking Statements

This presentation contains forward-looking statements that involves substantial risks and uncertainties. Any statements about the company's future expectations, plans and prospects, including statements about its strategy, future operations, development of its product candidates, and other statements containing the words "believes," "anticipates," "plans," "expects," "estimates," "intends," "predicts," "projects," "targets," "could," "may," and similar expressions, constitute forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, although not all forward-looking statements include such identifying words. Forward-looking statements include, but are not limited to statements regarding: expectations regarding the timing for the commencement and completion of product development or clinical trials; the rate and degree of market acceptance and clinical utility of the company's products; the company's commercialization, marketing and manufacturing capabilities and strategy; the company's intellectual property position and strategy; the company's estimates regarding expenses, future revenue, capital requirements and needs for additional financing; developments relating to the company's competitors and industry; and the impact of government laws and regulations.

Actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including: the ability to develop commercially viable product formulations; the sufficiency of the company's cash resources; the ability to obtain necessary regulatory and ethics approvals to commence additional clinical trials; whether data from early clinical trials will be indicative of the data that will be obtained from future clinical trials; whether the results of clinical trials will warrant submission for regulatory approval of any investigational product; whether any such submission will receive approval from the United States Food and Drug Administration or equivalent foreign regulatory agencies and, if we are able to obtain such approval for an investigational product, whether it will be successfully distributed and marketed. These risks and uncertainties, as well as other risks and uncertainties that could cause the company's actual results to differ significantly from the forward-looking statements contained herein, are discussed in our annual report on Form 10-K for the year ended December 31, 2020, and other filings with the SEC which can be found at www.sec.gov. Any forward-looking statements contained in this presentation speak only as of the date hereof and not of any future date, and the company expressly disclaims any intent to update any forward-looking statements, whether as a result of new information, future events or otherwise.



Single Focus: Developing Best-in-Class Immune-Modulating Therapeutics with Validated Biology



Optimized & Differentiated Lead Asset: AT-1501

- Targeting CD40/CD40L pathway validated by extensive historical proof-of-concept data
- Engineered to increase potency, half-life and manufacturability vs. other anti-CD40 approaches
- Targeting both potential first-in-class and potential best-in-class indications



Shots on Goal in Conditions with Few or No Approved Medicines and High Morbidity

- Financed to support up to four clinical trials in: Solid Organ Transplantation (Kidney), Islet Cell Transplantation for Type 1 Diabetes, Autoimmune Nephritis, and Amyotrophic Lateral Sclerosis (ALS)
- Next generation antibody in pre-clinical development and future combination therapies possible



Near-Term Milestones and Strong Financial Profile

- Multiple interim and top-line data readouts expected beginning in 1H 2022
- \$108M in cash and cash equivalents (as of March 31, 2021) expected sufficient to fund operations well into 2023

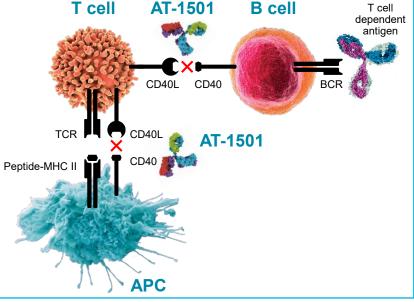




Mechanism Overview of CD40L Inflammatory Signaling

- Interaction of CD40 with CD40L on immune cells mediates activation of the co-stimulatory immune pathway, controlling "cross talk" between the adaptive and innate immune systems
- Maximal activation of inflammatory system is a 3-step process requiring co-stimulatory signaling
 - Step 1: Major histocompatibility complexes (MHC) and CD3/TCR engagement
 - Step 2: CD40 and CD40L binding resulting in cell division and clonal expansion
 - Step 3: Pro-inflammatory response by polarized T cells expressing inflammatory chemokines and cytokines
- Blocking CD40L shifts polarization from proinflammatory signaling to T cell anergy, apoptosis, and polarization to a Treg environment
 - Blocking CD40L thus does not generally result in lymphopenia often seen with immunosuppressive agents







AT-1501: Potential Best-in-Class Anti-CD40/CD40L Antibody

Targetir	ng CD40 Ligand vs. CD40 Receptor	lgG1 vs. fusion protein, pegylated FAB or lgG4			
CD40L and CD40	CD40L only				
Targeting both anti- CD40L and anti-	 Blocking anti-CD40L also inhibits CD11 costimulatory receptors on antigen presenting cells, thus blocking the pro-inflammatory polarization of CD8⁺ Cytotoxic T cells 	✓ Up to over 2x times longer half-life			
CD40 inhibits B cell polarization and class switching, as well as inhibits the pro- inflammatory	 Blocking CD40L also polarizes CD4⁺ lymphocytes to FoxP3⁺ Regulatory T cells (Tregs), thus creating a potentially more tolerogenic environment 	 Manufacturing advantages 			
polarization of CD4 ⁺ Helper T cells	 CD40L is more selectively expressed, providing the potential for additional safety and PK/PD/dosing advantages 	 Less anti-drug antibodies 			



Eledon's Preclinical Efforts and CD40L Historical Data Have Guided Our Choice of Clinical Development Programs

	• Over 70% of ALS patient blood samples exhibit a clear costimulatory activation signature ^a
ALS	>• Soluble CD40L levels in circulation of ALS patients correlate with rate of disease progression ^b
	 Blocking CD40 ligand delays disease onset and extends survival in preclinical models of ALS ^a

Kidney	\backslash	• Blocking CD40L prevented acute and long-term solid organ transplant rejection in multiple animal species
Transplant		• AT-1501 and historical anti-CD40L antibodies have been shown to prevent allograft transplant rejection as
		monotherapies in multiple animal models including in non-human primates

Islet Cell Transplant

In non-human primate islet cell transplant models, blocking CD40L compared to immunosuppressive cocktails containing tacrolimus resulted in prolonged graft function, improved islet cell survival and reduced renal toxicity
 AT-1501 induced long-term metabolic control in the absence of exogenous insulin in nonhuman primates

Autoimmune Nephritis

- Blocking CD40L signaling in preclinical models of Autoimmune Nephritis ameliorated proteinuria, reduced autoantibodies, decreased immune cell infiltration, and improved survival ^{c,d}
- Blocking CD40L in patients with SLE improved levels of dsDNA autoantibodies as well as clinical outcomes e

Note: SLE refers to Systemic Lupus Erythematosus. Source: (a) Lincecum, 2010. (b) Henkel, 2013. (c) Early, 1996. (d) Kalled, 1999. (e) Boumpas, 2003; Kalunian, 2002.



AT-1501: Pipeline in a Product Opportunity

Product	Indication		Developm	ent Stage		Anticipated Milestones	
Candidate		Pre-clinical	Phase 1	Phase 2	Phase 3	Anticipated milestones	
	Amyotrophic Lateral Sclerosis (ALS)					Phase 2 results expected in 1H 2022	
AT-1501	Kidney Transplantation					Initiate NHP study, readout expected late 2022 Explore ex-US clinical study	
AI-1501	Islet Cell Transplantation for Type 1 Diabetes					Enroll first Phase 2 patient in Canada Interim data readout expected in 1H 2022	
	Autoimmune Nephritis					Initiate Phase 2 trial in late 2021	
AT-2001 Autoimmune Indications			Lead optimization				

Note: Development plans and timelines may change, including based on US and global regulatory interactions.



AT-1501 Phase 1a/1b Single Ascending Dose Trial Completed in Healthy Subjects and ALS Patients

Healthy Volunteers or ALS Patients Receiving Either AT-1501 (mg/kg, IV) or Placebo

Subjects	Healthy	Healthy	ALS	Healthy	Healthy	Healthy	1501	Placebo
Dose (mg/kg)	0.5	1	1	2	4	8	NA	NA
n=	6	3	3	3	3	6	24	8

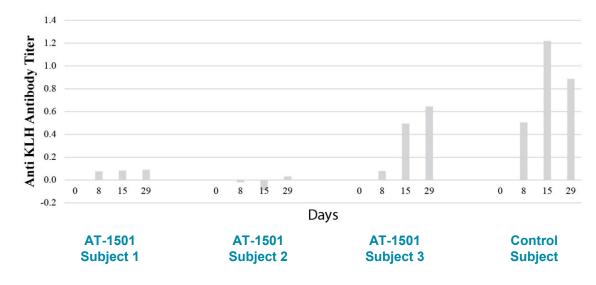
Number of Subjects (%) Experiencing TEAEs by Maximum Toxicity Grade										
Grade 1 (% Subjects Experiencing Events)	3 (50.0%)	2 (66.7%)	2 (66.7%)	2 (66.7%)	1 (33.3%)	1 (16.7%)	11 (45.8%)	5 (62.5%)		
Grade 2 (% Subjects Experiencing Events)	-	_	1 (33.3%)	_	_	1 (16.7%)	2 (8.3%)	_		
Grade 3	_	_	_	_	_	-	_	-		
Grade 4	_	—	—	—	—	—	—	_		
Grade 5	_	—	—	—	—	—	—	—		



Phase 1 KLH Challenge Demonstrates Functional Activity

- 4 healthy volunteers received keyhole limpet hemocyanin (KLH), a potent immune challenge, via subcutaneous injection
- Subjects 1-3 also received simultaneous 8 mg/kg IV AT-1501
- More closely resembling potential clinical use, AT-1501 subjects were not pre-treated with the study drug 3 to 7 days prior to receiving KLH

AT-1501 fully inhibited immune response to KLH in two subjects (subjects 1 and 2) and partially inhibited immune response to KLH in the third subject (subject 3)



Kidney Transplant Market Opportunity



Over **23,000 U.S. kidney transplants per year** and ~193,000 Americans have a functioning kidney transplant

- Over 20% incidence of new onset diabetes in first 6
 months post-transplant in CNI treated patients
- · CNIs are also associated with kidney- and neuro-toxicity
- Fewer than 50% of transplanted kidneys from deceased donors function more than 10 years
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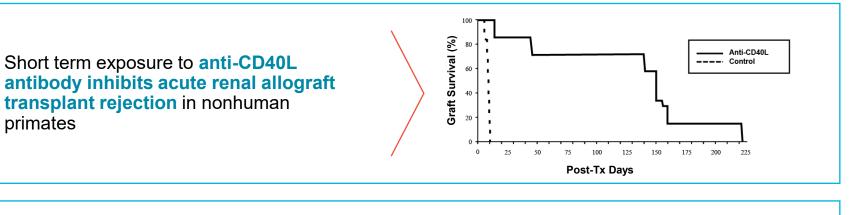
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- ~90,000 Americans face a 3-5 year wait for a kidney
- Up to **15% of transplants per year are re-transplants** further limiting organ availability for new patients
- ~450% increase in annual medical cost to treat transplant patients who experience renal graft failure

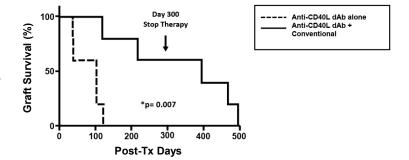
AT-1501 has potential to reduce drug-associated morbidity and improve graft survival associated with standard of care regimens, such as those including calcineurin inhibitors (CNIs)



Anti-CD40L Antibodies Prevent Renal Allograft Transplant Rejection in Nonhuman Primate Models



Inhibition of renal allograft transplant rejection in nonhuman primates after short term anti-CD40L antibody exposure in conjunction with induction immunotherapy, steroids, and mycophenolate mofetil, showed persistent effect even after therapy was discontinued



Islet Cell Transplant Market Opportunity



~1.3M Americans live with Type 1 diabetes (T1D)



~70,000 (5%) estimated to have Brittle form of T1D



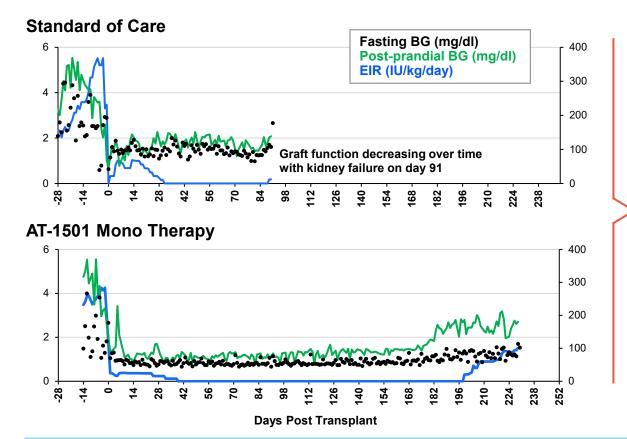
 BT1D patients have difficult-to-manage glucose levels with severe blood glucose fluctuations despite treatment and higher risk of diabetes related death



Minimally invasive islet cell transplantation underutilized in part because of **need for multiple transplant grafts** (usually within 90 days) in part due to immunosuppressive regimens with **CNIs**, that may be toxic to transplanted insulin producing islet cells AT-1501 has potential to unlock islet cell transplant market by improving islet cell graft survival & reducing side effects associated with standard of care regimens, such as those including calcineurin inhibitors (CNIs)



Non-Human Primate Islet Cell Transplant Model: SOC Versus AT-1501 Blood Glucose Stabilization

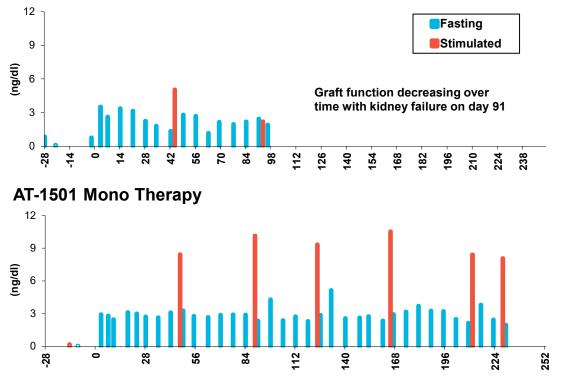


In animals whose islet cells were ablated to induce T1D and who then underwent islet cell transplantation, AT-1501 provided for better blood glucose level stabilization and less drug related animal morbidity and mortality than standard of care



Non-Human Primate Islet Cell Transplant Model: SOC Versus AT-1501 C-peptide Levels

Standard of Care



- C-peptide levels are a surrogate biomarker of insulin production, islet cell viability and function
- In response to meal stimulation, functioning islets produce more insulin and thus C-peptide
- Animals receiving AT-1501 showed better islet cell function than those receiving standard of care



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Phase 2 Islet Cell Transplantation for T1D Study Design

DESIGN

- 52-week, open label, single dose level study
- Initial group of up to 6 subjects with Type 1 Diabetes (T1D) at a single Canadian site (up to 12 subjects overall)
- Islet cell transplant combined with induction therapy plus AT-1501 and mycophenolate mofetil every third week by IV infusion

PLANNED DATA GENERATION

- Safety & tolerability
- Graft function & insulin independence
 - e.g., C-peptide, HbA1C
- Number of hypoglycemic events
- Need for repeat islet cell transplant(s)



Autoimmune Nephritis Market Opportunity

Autoimmune Nephritis represents a group of individual rare, inflammatory kidney diseases including Lupus Nephritis (LN), Focal Segmental Glomerulosclerosis (FSGS) and IgA Nephropathy (IgAN)

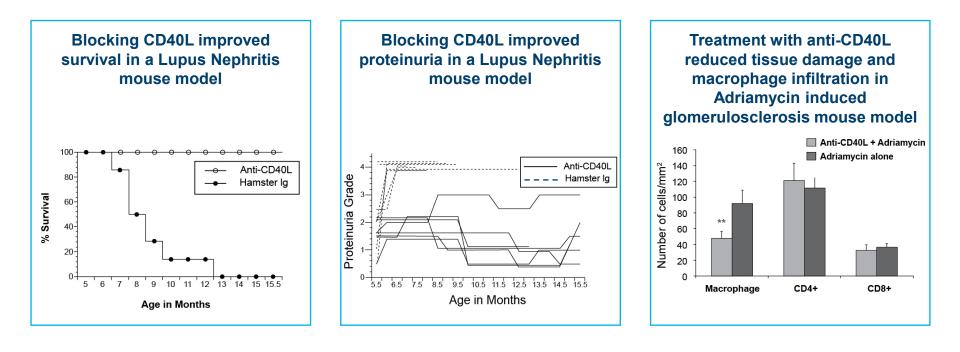
These diseases may be debilitating and costly - often leading to end-stage renal disease, dialysis, renal transplant, and even death

Kidney damage occurring with these conditions is associated with leakage of blood proteins into the urine (proteinurea). Reduction in proteinuria may be adequate as a primary endpoint for accelerated registration pathways

No FDA or EMA approved therapies for IgAN or FSGS, and only 2 approved therapies for LN

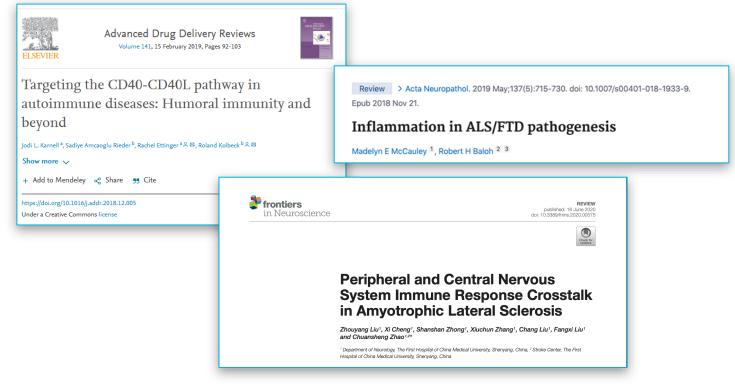


Blocking CD40L Ameliorates Glomerulosclerosis and Proteinuria in Historical Autoimmune Nephritis Rodent Models





Autoimmune Pathogenesis of ALS is Increasingly Recognized





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ALS Overview & Market Opportunity



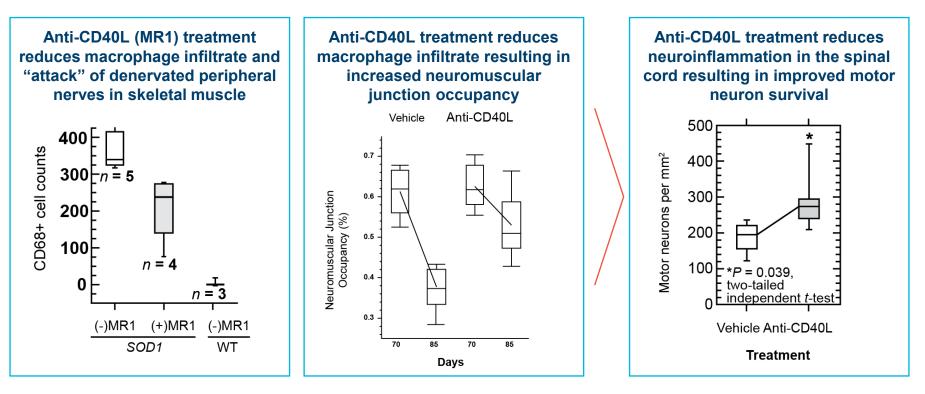
People with ALS ultimately **lose the ability to ambulate**, lose the ability to swallow, and when breathing muscles become affected, need permanent ventilatory support to assist with breathing

50% and 80% of ALS patients die within **3 and 5 years** from diagnosis, respectively. Most people die from respiratory failure or cachexia

Very high 5-year ALS morbidity and mortality despite two FDA approved treatments



Anti-CD40L Historical Antibody Improves Motor Neuron Survival & Decreases Inflammation in Peripheral Nerves of ALS Mice



Phase 2 ALS Study Design

DESIGN

- 12-week, open label, multiple ascending dose level study
- Four dose cohorts of up to ~18 patients each
- Each subject serves as own control by comparing changes from baseline

PLANNED DATA GENERATION

- Safety & tolerability
- Biomarkers of CD40L target engagement
 - e.g., CXCL13
- Pro-inflammatory chemokines and cytokines upregulated in ALS

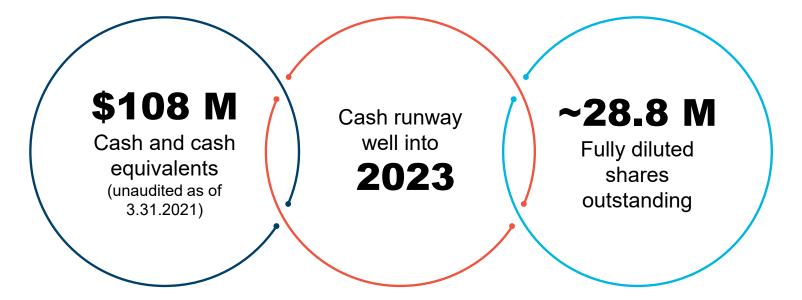
 e.g., TNF-α, MCP1, IL-6, Enraged

Exploratory endpoints

 e.g., ALS Functional Rating Scale, respiratory function, Neurofilament Light Chain



Strong Financial Profile





2021 Execution Priorities

- Continue to enroll ALS Phase 2 study
- Begin enrollment of Islet Cell Transplantation for Type 1 Diabetes Phase 2 study
- Explore launching ex-US Kidney Transplantation clinical study
- Initiate Kidney Transplantation non-human primate study
- Initiate Phase 2 Autoimmune Nephritis study
- Advance AT-1501 subcutaneous formulation



Targeting interim and top-line Phase 2 data readouts in up to 4 indications in 2022, with the first data readouts beginning in 1H2022



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