

Stoke Therapeutics

NASDAQ: STOK

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February 2021



Disclaimer

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This presentation contains “forward-looking” statements within the meaning of the “safe harbor” provisions of the Private Securities Litigation Reform Act of 1995, including, but not limited to: the ability of our TANGO platform to design medicines to increase protein production and the expected benefits thereof; the ability of STK-001 to treat the underlying causes of Dravet syndrome; the preclinical data and study results regarding OPA1; our preliminary cash, cash equivalents and restricted cash and shares outstanding as of December 31, 2020; our future operating results, financial position and liquidity; the direct and indirect impact of COVID-19 on our business, financial condition and operations, including on our expenses, supply chain, strategic partners, research and development costs, clinical trials and employees; our expectation about timing and execution of anticipated milestones, responses to regulatory authorities, expected nomination of future product candidates and timing thereof. These forward-looking statements may be accompanied by such words as “aim,” “anticipate,” “believe,” “could,” “estimate,” “expect,” “forecast,” “goal,” “intend,” “may,” “might,” “plan,” “potential,” “possible,” “will,” “would,” and other words and terms of similar meaning. These forward-looking statements involve risks and uncertainties, as well as assumptions, which, if they do not fully materialize or prove incorrect, could cause our results to differ materially from those expressed or implied by such statements, including: our ability to develop, obtain regulatory approval for and commercialize STK-001, OPA1 and future product candidates; the timing and results of preclinical studies and clinical trials; the risk that positive results in a clinical trial may not be replicated in subsequent trials or success in early stage clinical trials may not be predictive of results in later stage clinical trials; risks associated with clinical trials, including our ability to adequately manage clinical activities, unexpected concerns that may arise from additional data or analysis obtained during clinical trials, regulatory authorities may require additional information or further studies, or may fail to approve or may delay approval of our drug candidates; the occurrence of adverse safety events; failure to protect and enforce our intellectual property and other proprietary rights; failure to successfully execute or realize the anticipated benefits of our strategic and growth initiatives; risks relating to technology failures or breaches; our dependence on collaborators and other third parties for the development, regulatory approval, and commercialization of products and other aspects of our business, which are outside of our full control; risks associated with current and potential delays, work stoppages, or supply chain disruptions caused by the coronavirus pandemic; risks associated with current and potential future healthcare reforms; risks relating to attracting and retaining key personnel; failure to comply with legal and regulatory requirements; risks relating to access to capital and credit markets; environmental risks; risks relating to the use of social media for our business; and the other risks and uncertainties that are described in the Risk Factors section of our most recent annual or quarterly report and in other reports we have filed with the U.S. Securities and Exchange Commission. These statements are based on our current beliefs and expectations and speak only as of the date of this presentation. We do not undertake any obligation to publicly update any forward-looking statements.

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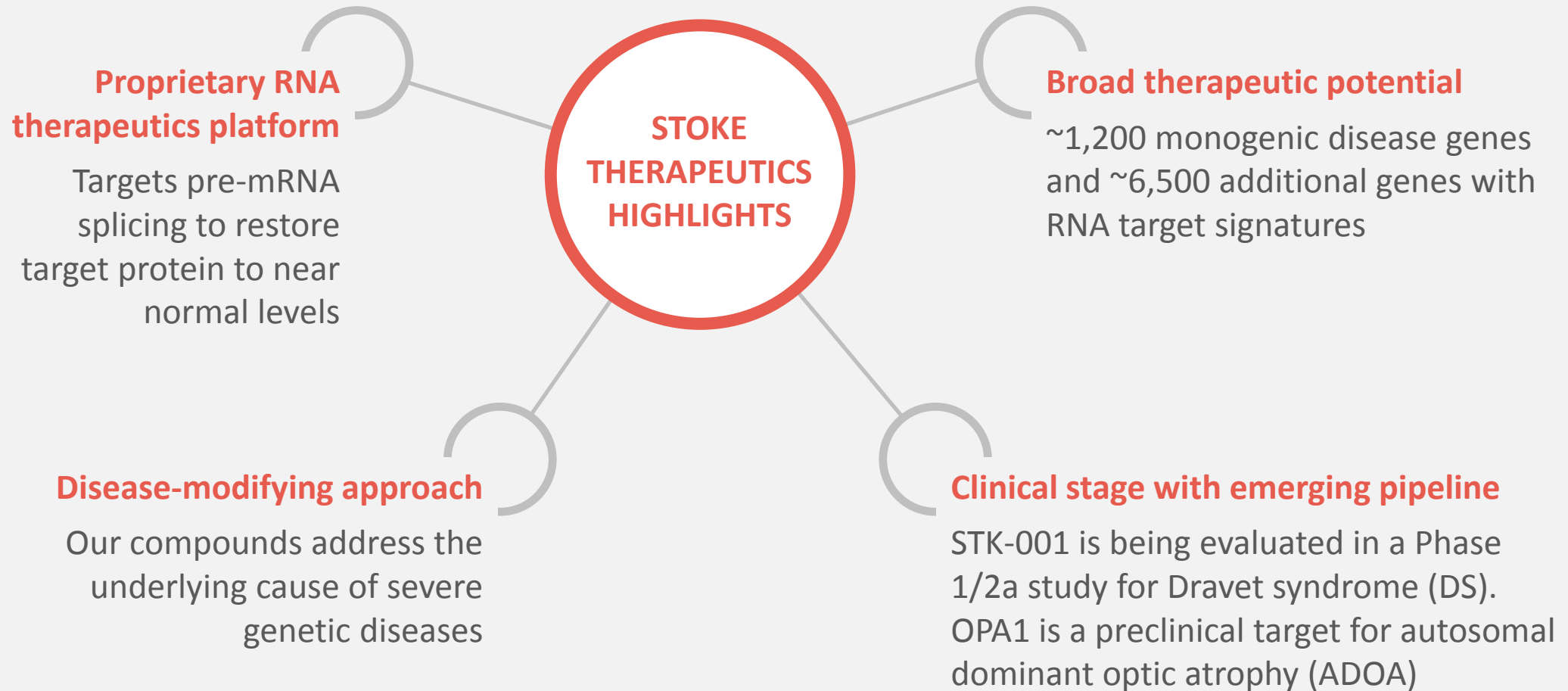


STOKE THERAPEUTICS

Boldly Restoring Genetic Health

Addressing the underlying cause of severe diseases by up-regulating protein expression with RNA-based medicines.

A Differentiated Platform for the Discovery and Development of Novel RNA-based Medicines



Targeted Augmentation of Nuclear Gene Output

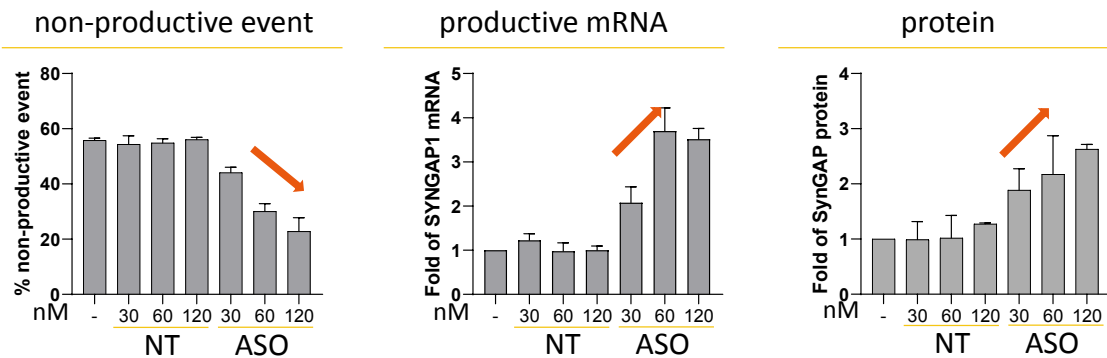
Our compounds aim to restore protein levels by increasing protein production from the functional copy of a gene and:

- ▶ Selectively boost expression only in tissues where the protein is normally expressed
- ▶ Offer one drug for diseases caused by many different mutations
- ▶ Apply to genes of diverse size: can be used to address small or large gene targets

TANGO ASOs Demonstrate Dose-Dependent Increases in Protein Expression Across Targets of Diverse Size, Type and Function

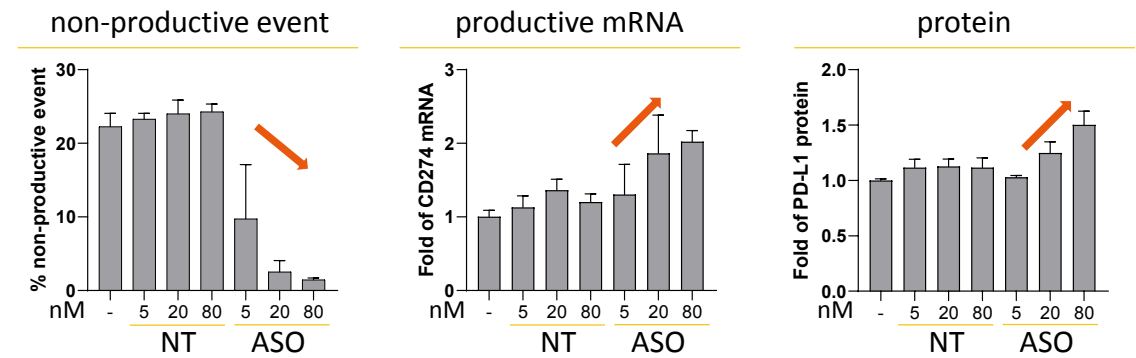
Genetic epilepsy – haploinsufficiency

SYNGAP1



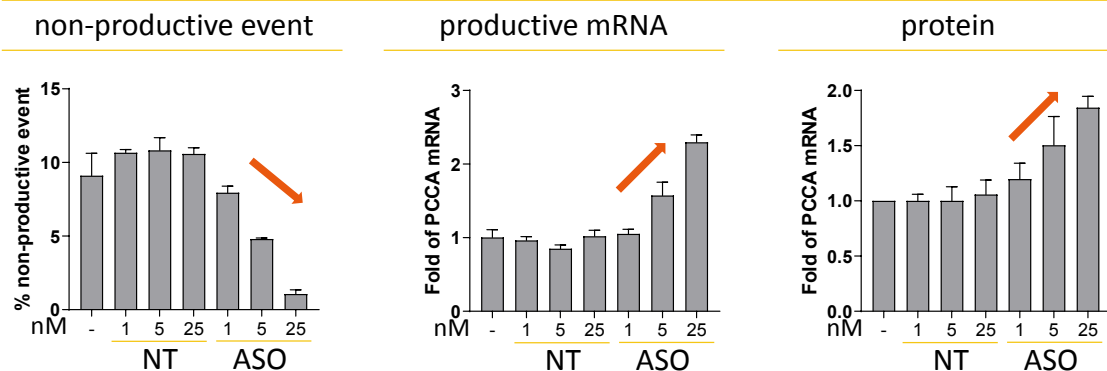
Pathway target – wild-type

CD274 (PD-L1)

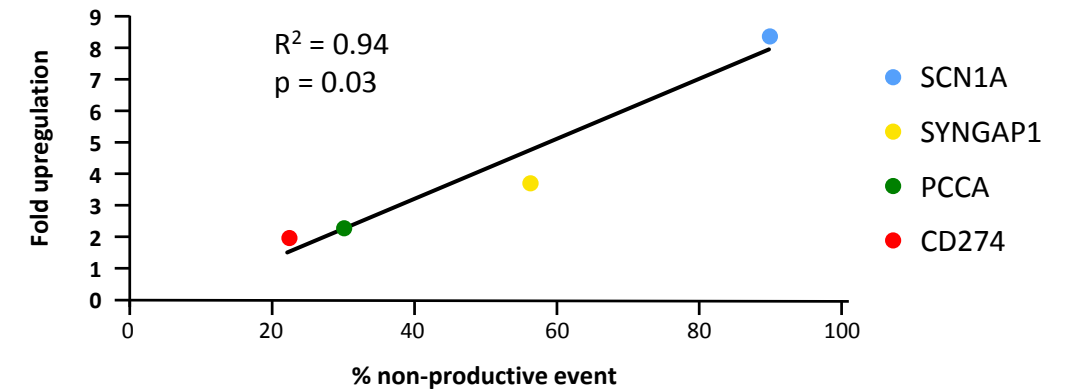


Liver target – autosomal recessive

PCCA



Correlation between event abundance (+CHX) & upregulation



Dravet Syndrome: A Severe, Progressive Genetic Epilepsy

85%

of cases caused by a
HAPLOINSUFFICIENCY
of the *SCN1A* gene

RESULTS IN

50%

Na_v1.1 protein
expression



1 out of 16,000

babies are born with Dravet syndrome

Up to
20%

of children and adolescents with Dravet syndrome die before adulthood, due to SUDEP¹, prolonged seizures, seizure-related accidents or infections



Seizures are not adequately controlled in

90% of people with Dravet syndrome

~35,000

people affected in the U.S., Canada, Japan, Germany, France and the UK



Dravet syndrome is not concentrated in a particular geographic area or ethnic group

¹ Sudden Unexpected Death in Epilepsy

Sources: 2018 Health Advances Report; Djémié et al., *Molecular Genetics & Genomic Medicine*, 2016; Lagae et al., *Developmental Medicine & Child Neurology*, 2017; Nabbout et al., *Orphanet Journal of Rare Diseases*, 2013

No Approved Disease-Modifying Therapies for Dravet Syndrome

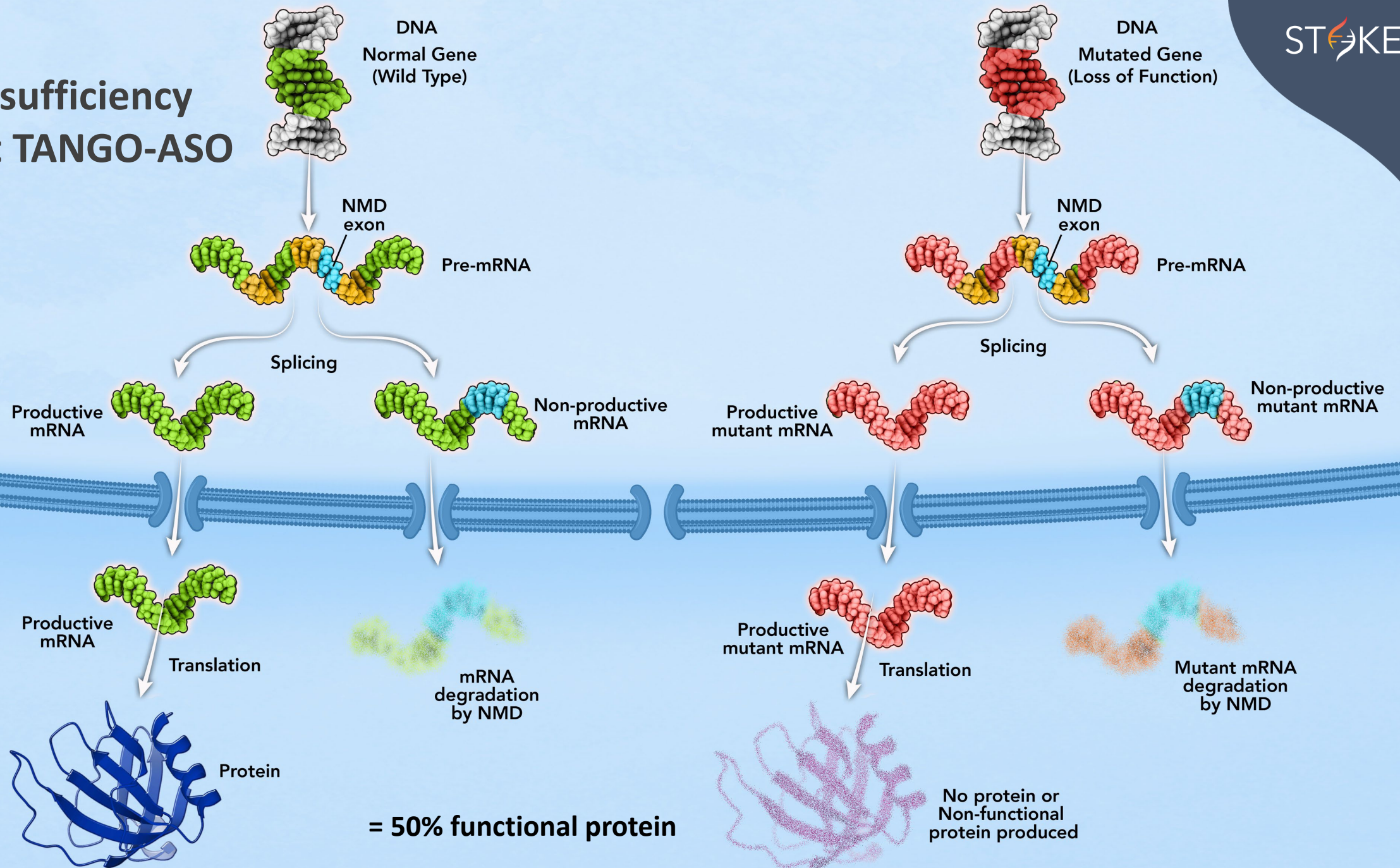
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Non-Seizure Comorbidities of Dravet Syndrome Are Not Addressed by Current Therapies

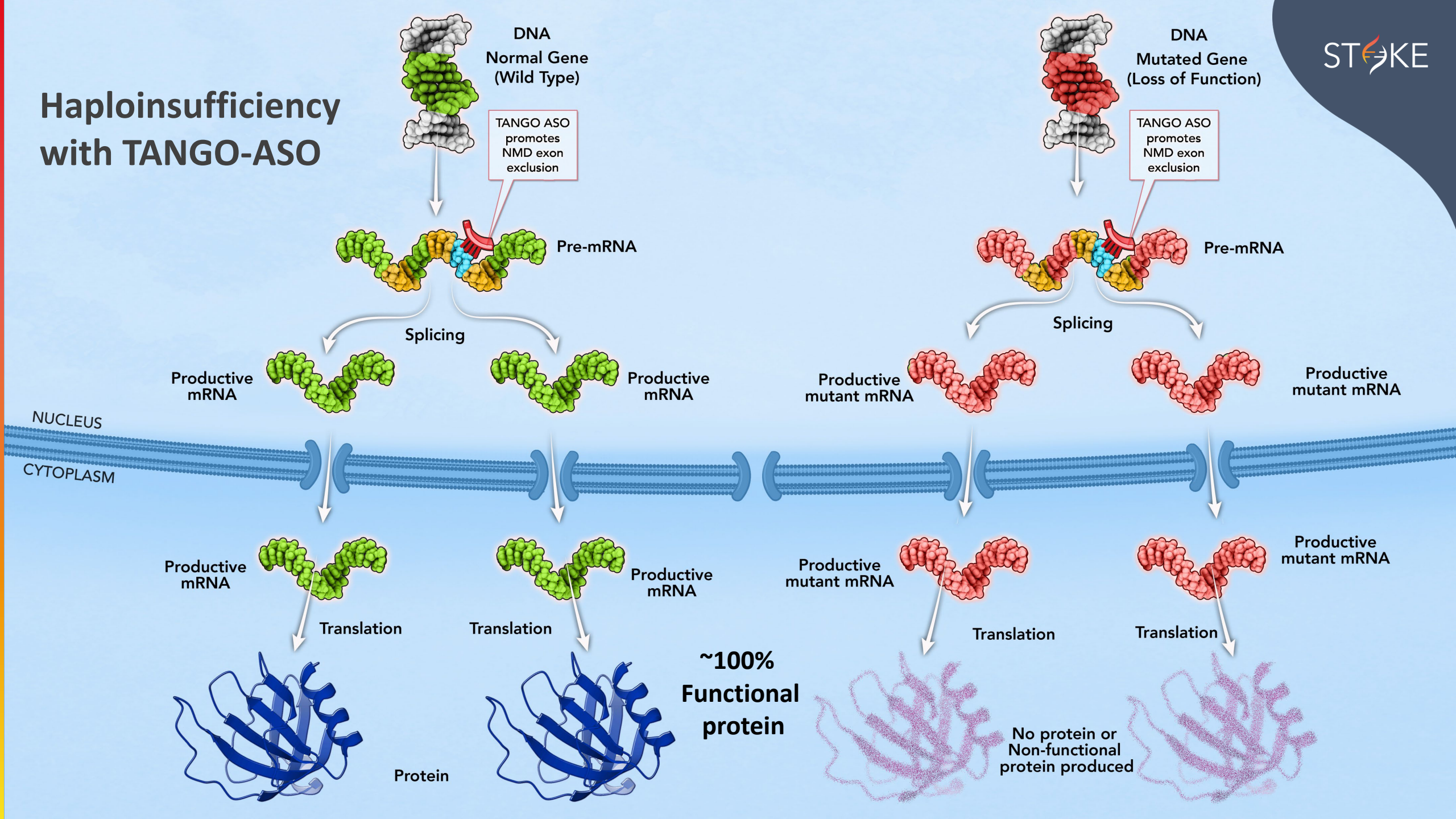
- Intellectual disability
- Developmental delays
- Movement and balance issues
- Language and speech disturbances
- Growth defects
- Sleep abnormalities
- Chronic infections
- Disruptions of the autonomic nervous system
- Mood disorders



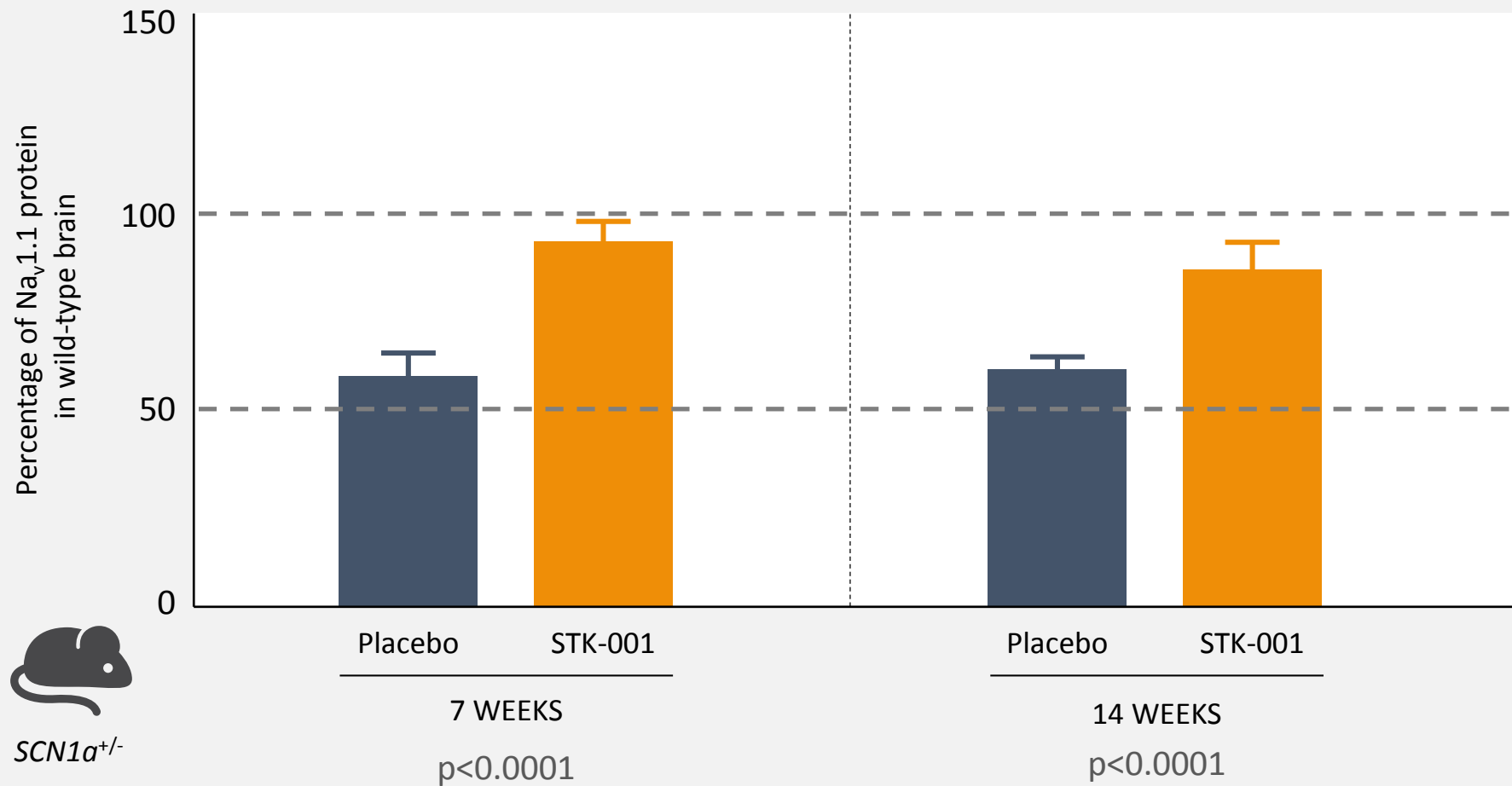
Haploinsufficiency without TANGO-ASO



Haploinsufficiency with TANGO-ASO

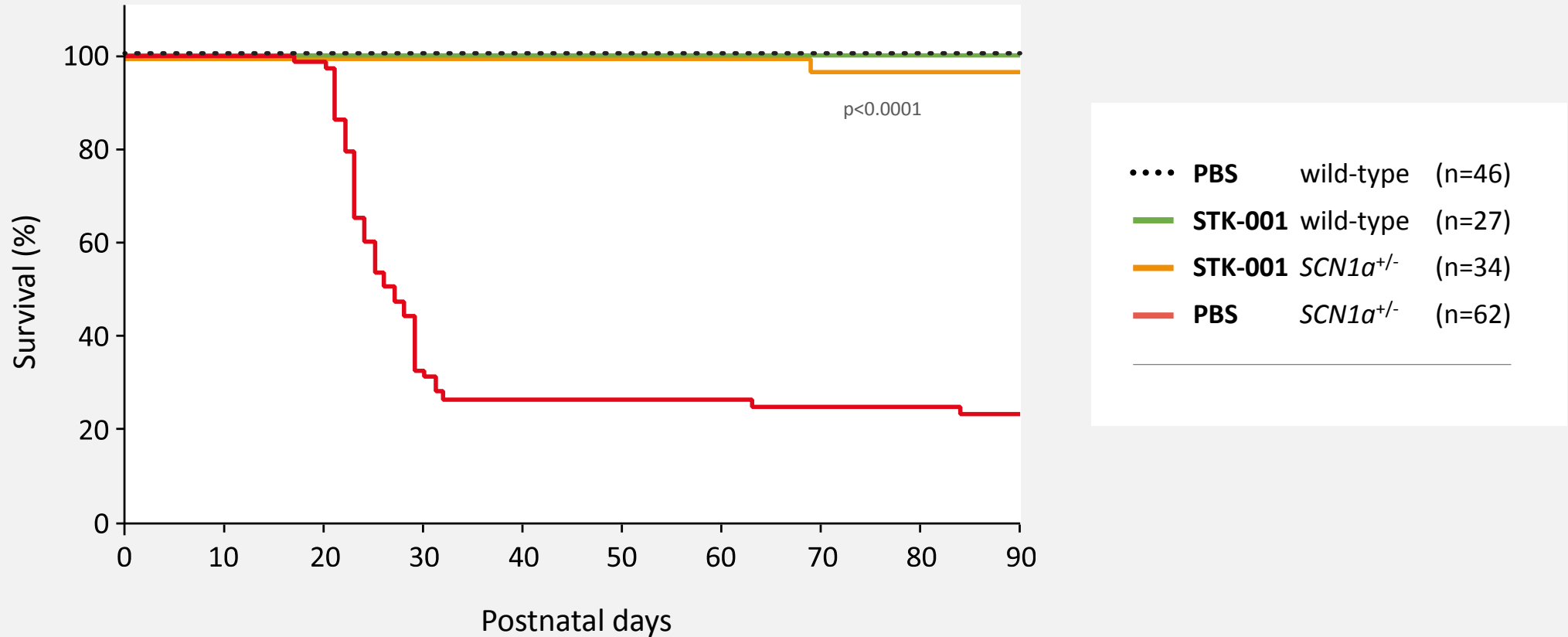


STK-001 Restores $\text{Na}_v1.1$ to Near Normal Levels for >3 Months in Dravet Syndrome (DS) Mice after a Single Dose

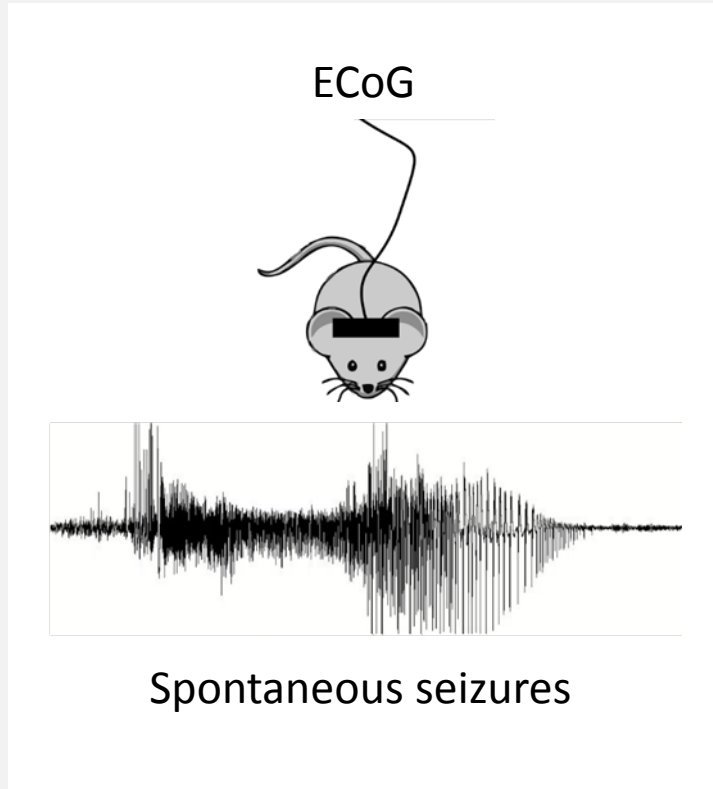


STK-001 Significantly Reduces Premature Mortality in DS Mice After a Single Dose

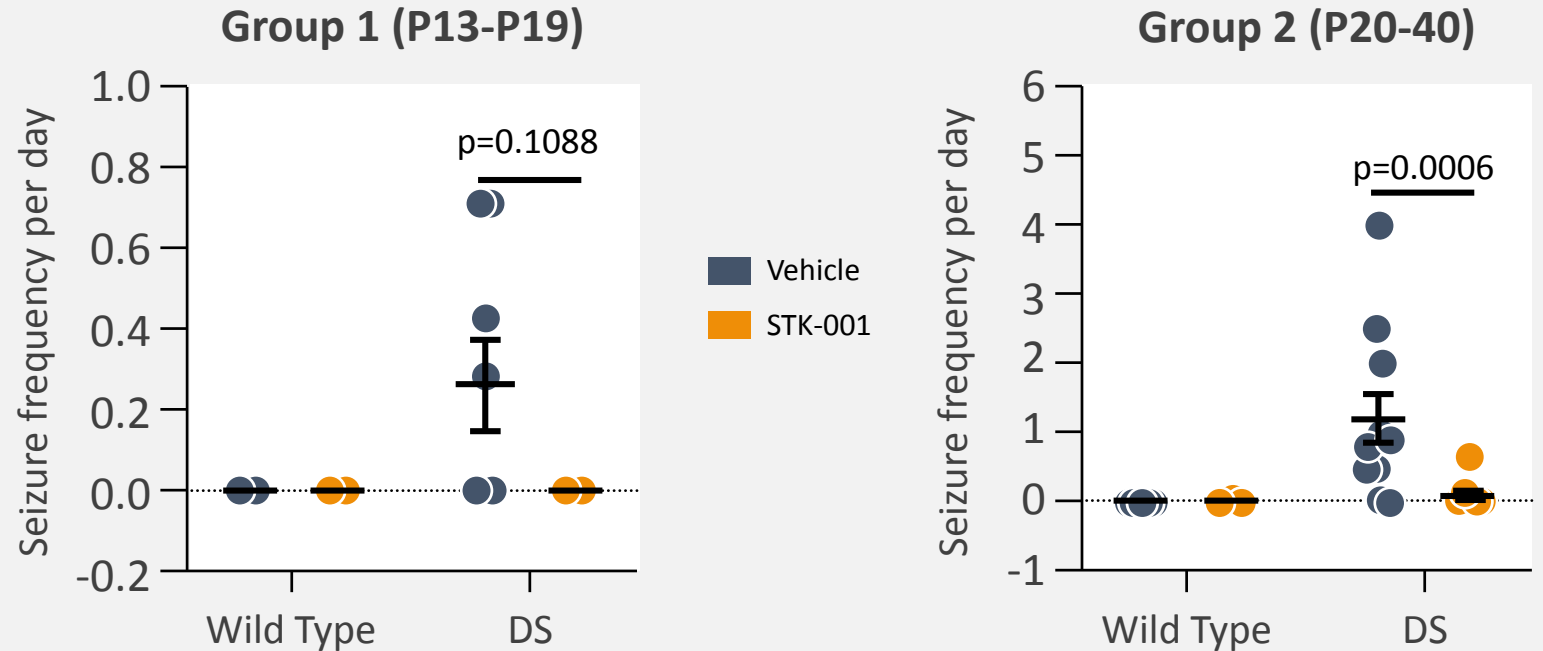
Significant improvements in survival after STK-001 administration at postnatal day 2



STK-001 Administration Reduces Seizure Frequency in DS Mice

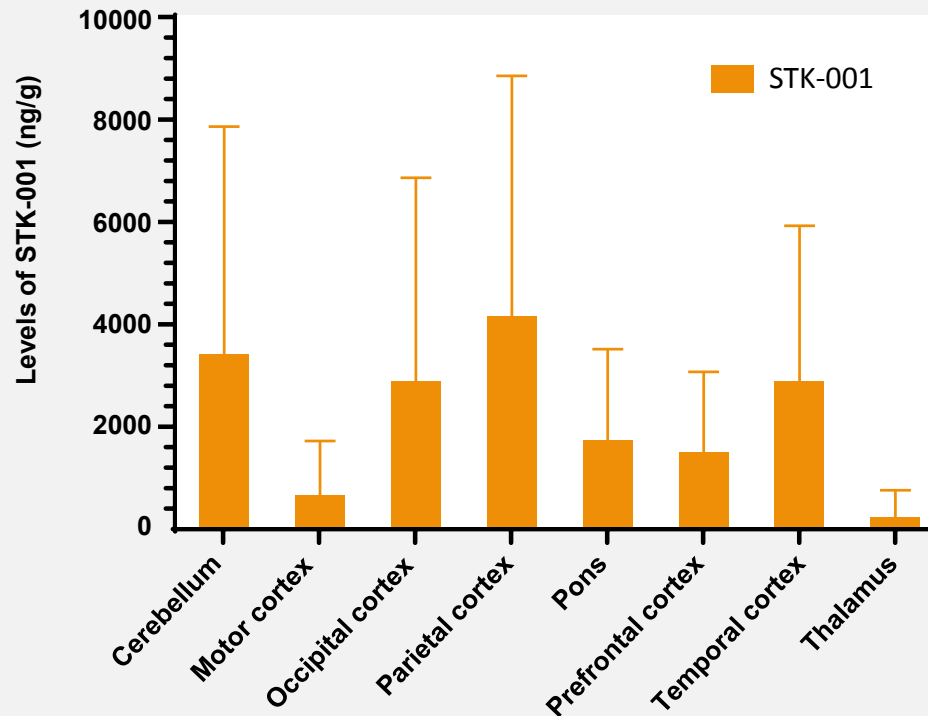


A single dose of STK-001 completely stopped seizure events early (P13-19) and substantially reduced seizure frequency late (P20-40)

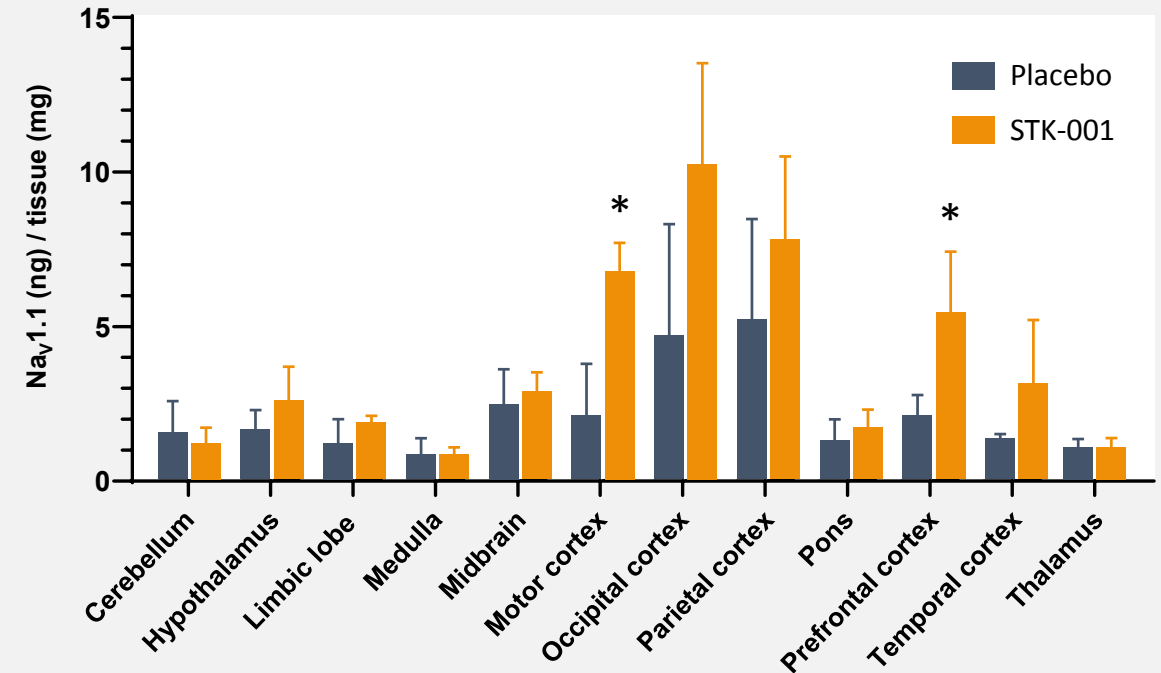


STK-001 Achieves Broad Distribution and Increases Na_v1.1 Protein Expression in NHPs

Study 1: Exposure of STK-001 observed in all brain regions



Study 2: Na_v1.1 protein levels increased up to 3-fold



* = p<0.05

Single and Multiple-Dose Toxicology Studies in NHPs Showed STK-001 Well-Tolerated

Key safety findings from GLP studies*

No observed adverse events at
highest dose tested



No change in platelet counts or
renal/hepatic function



No adverse histopathology in
brain, spinal cord, liver and kidney



*In non-GLP studies in NHPs, at levels above the NOAEL, hind limb paresis was observed; at extremely high dose levels, acute convulsions were observed.

STK-001 Has Potential to Address the Genetic Cause of Dravet Syndrome (DS)

Single dose restores Na_v1.1 to near normal levels for >3 months in DS mice



Significantly reduces mortality and seizure frequency in DS mice



Achieves broad distribution and increases Na_v1.1 protein expression in NHPs

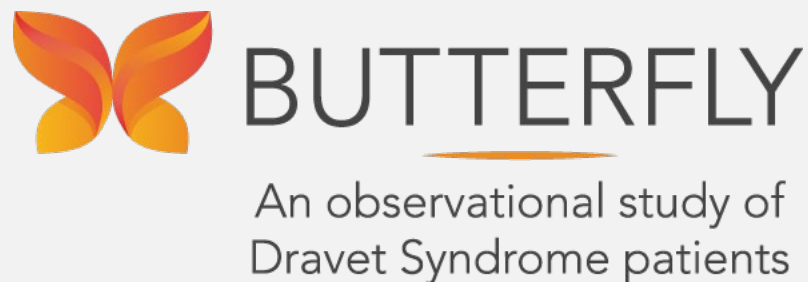


Well-tolerated as shown in single and multiple-dose toxicology studies in NHPs



Non-Seizure Comorbidities of DS are Progressive and Measurable

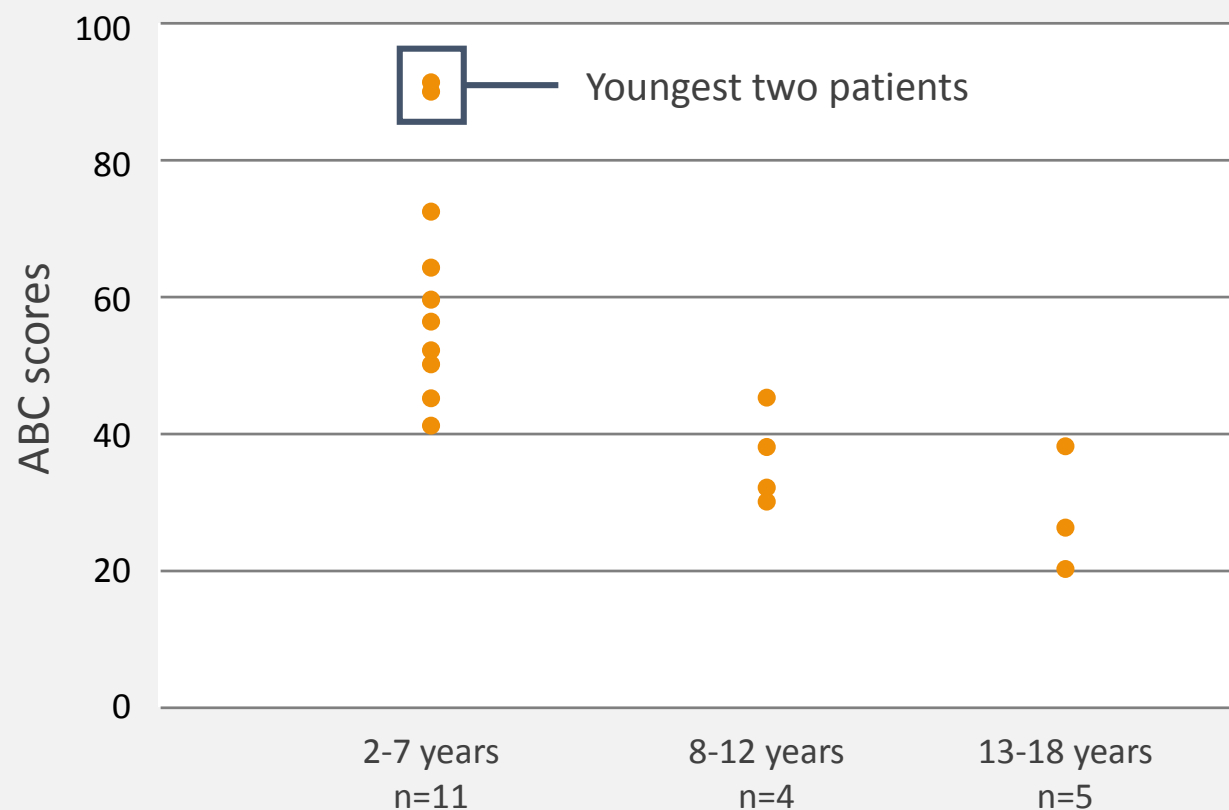
Enrollment completed (n=36, 2-18 year-olds). Study ongoing.



Initial findings showed:

- Validation of standard cognitive measures for use in DS patients
- Substantially decreased neurocognitive abilities despite the use of multiple anti-epileptic therapies
- Apparent widening from normal levels in overall intellectual development that increases with age
- A gap in adaptive functioning

Baseline VABS-III Adaptive Behavior Composite (ABC)*



* VABS = Vineland Adaptive Behavior Scales

* ABC score based on Communication, Daily Living, and Socialization domains and expressed relative to normative mean of 100

Source: Observational Study to Investigate Cognition and Quality of Life in Children and Adolescents with Dravet Syndrome: Baseline Analysis of the BUTTERFLY Study (AES 2020)

Enrollment and Dosing in MONARCH Phase 1/2a Trial is Ongoing

Design	Open-label evaluation of single and multiple ascending doses of STK-001 (up to 30mg) <ul style="list-style-type: none">• SAD: Currently enrolling• MAD: Planned initiation 2H 2021 <i>Doses >30mg remain on FDA partial clinical hold</i>
Target Enrollment	~48 children and adolescents ages 2-18 years old with Dravet syndrome and confirmed <i>SCN1a</i> variant
Primary Endpoint	Safety and tolerability of single and multiple ascending dose levels; characterize human pharmacokinetics (PK)
Secondary Endpoint	Change in seizure frequency over 12-weeks, quality of life
Preliminary Data	Initial safety and PK data anticipated in 2021
Open-Label Extension	Currently enrolling



Autosomal Dominant Optic Atrophy (ADOA): A Severe, Progressive Optic Nerve Disorder

65-90%

of cases caused by a
HAPLOINSUFFICIENCY
in the *OPA1* gene



RESULTS IN



50%

OPA1 protein
expression and disease
manifestation

1 out of 30,000

people are affected globally with a
higher incidence of ~1 out of 10,000 in
Denmark due to a founder effect



Up to

46%

of patients
are registered
legally blind



>400

Different *OPA1* mutations
reported in ADOA patients

80%

of patients are
symptomatic
by age 10

~18,000

people affected in the U.S., Canada,
Japan, Germany, France and the UK



No Approved Disease-Modifying Therapies for ADOA

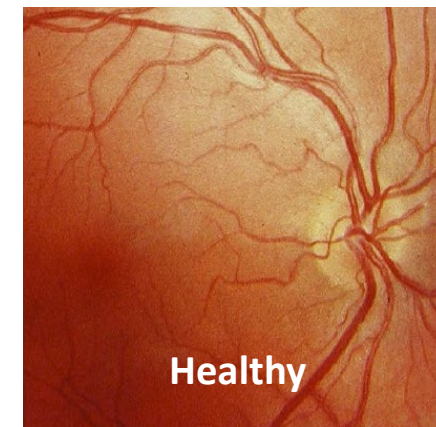
Healthy Vision



Simulation of Optic Neuropathy



- Most common inherited optic nerve disorder
- Leads to central field defects and reduced color vision in both eyes
- Severity can vary; rate of vision loss difficult to predict
- Supportive services and low-vision aids are offered for patients



Healthy



ADOA patient

Sources: Yu-Wai-Man P et al. *Ophthalmology*, 2010; Yu-Wai-Man P, Chinnery PF. *Ophthalmology*, 2013;

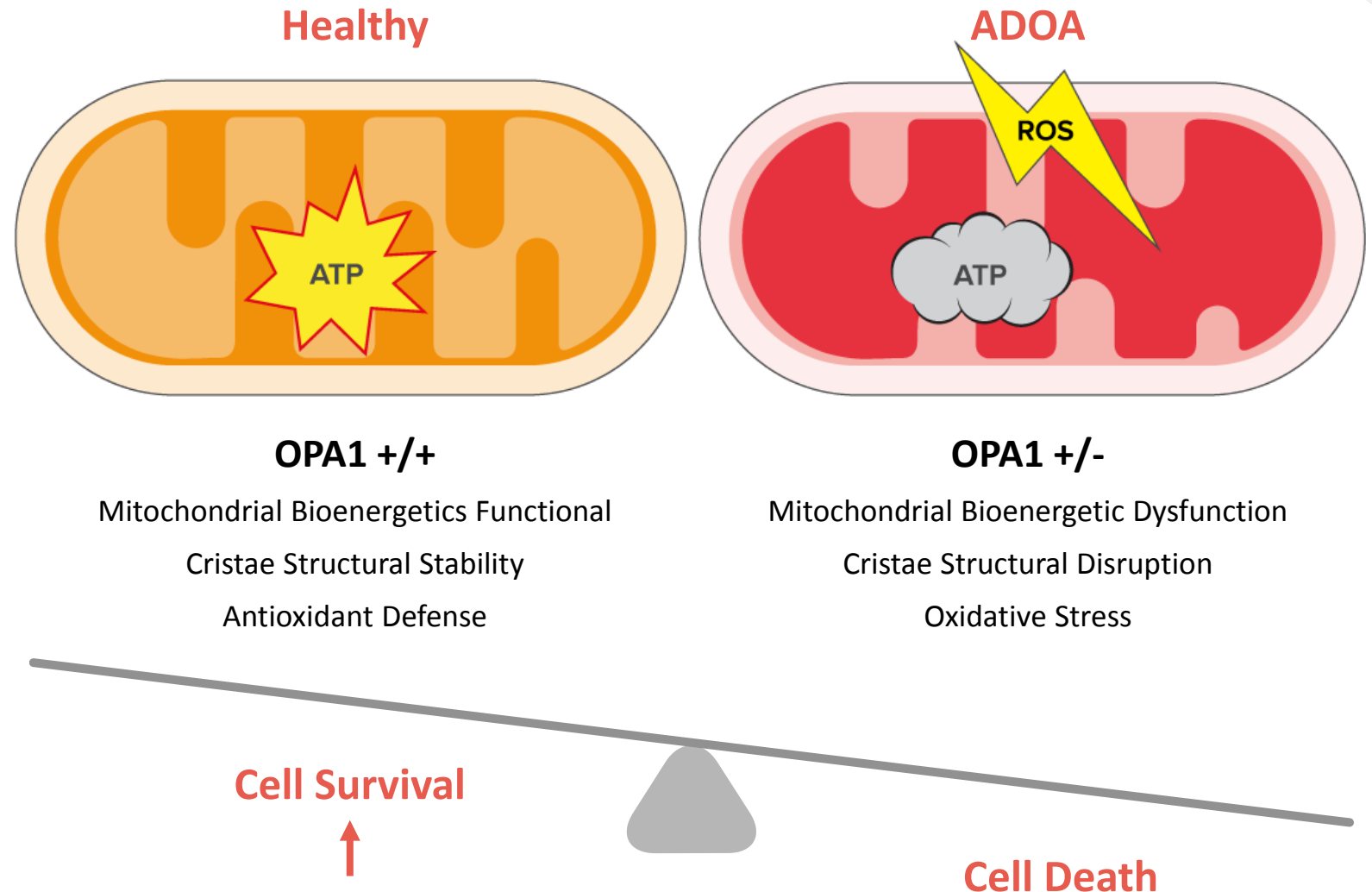
Lenaers G, Hamel C, Delettre C, et al. *Orphanet J Rare Dis*, 2012; Chun BY and Rizzo JF III. *Curr Opin Ophthalmol*, 2016

Image of child sourced from ICR, Ophthalmology Center Barcelona. Accessed Jan. 8, 2021 from <https://icrcat.com/en/eye-conditions/leber-hereditary-optic-neuropathy/> Credit: Lhon Eye

Society Sweden. Image shown depicts Leber Hereditary Optic Neuropathy, which presents visual effects similar to ADOA.

OPA1 is Critical for Normal Mitochondrial Function and Cellular Metabolism

- Retinal ganglion cells have very high energy (ATP) requirements
- Impaired mitochondrial function leads to cell death
- OPA1 is critical for mitochondrial function and energy production



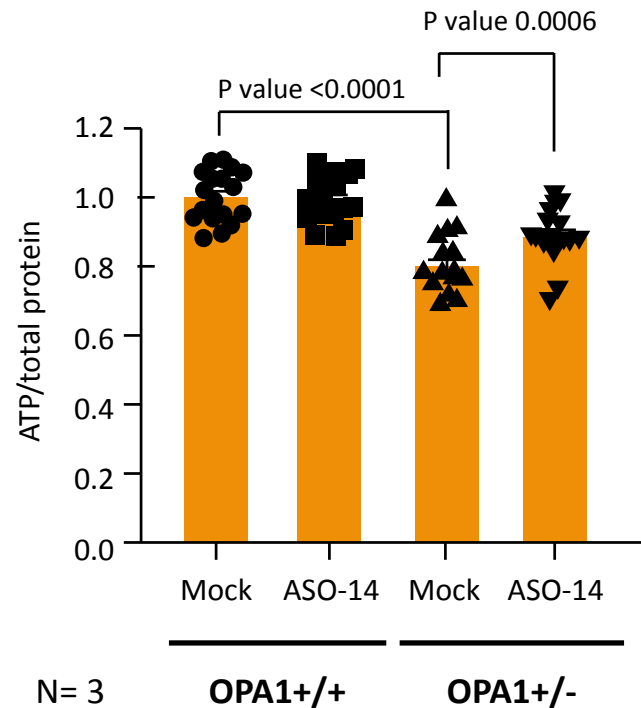
TANGO ASO Demonstrates Dose-Dependent OPA1 Protein Increases in Rabbit Retina



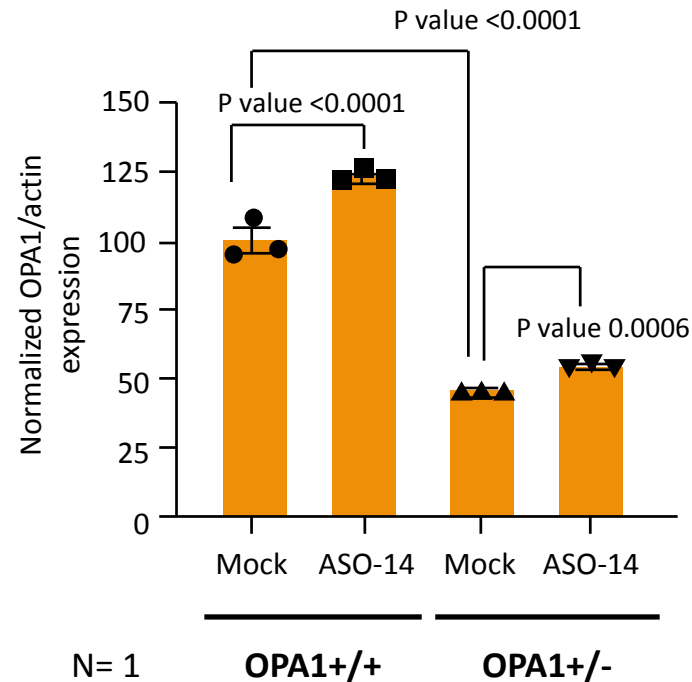
* $P < 0.0005$ by one-way ANOVA compared to PBS group

TANGO ASO Partially Restores ATP and Protein Levels in Human OPA1 +/- Cells

ASO treatment increased ATP levels in OPA1 deficient cells



ASO treatment increased OPA1 protein levels



*one-way ANOVA
t-test

TANGO ASOs Have the Potential to Address the Genetic Cause of ADOA

Dose-dependent increases in OPA1 protein expression in rabbit retina



Increases ATP and protein levels in human OPA1 +/- cells



Well tolerated for up to 29 days after intravitreal injection in rabbit



Lead optimization is underway to potentially identify a clinical candidate in 2021



Stoke identified a variety of non-productive alternative-splicing events that lead to mRNA degradation and limit protein production.

10K+

Genetic diseases are caused by mutations in a single gene

5%

Of these diseases are addressed by current therapeutic approaches

~1,200

Monogenic disease genes containing at least one NMD-inducing non-productive event

~6,500

Additional unique genes found by Stoke that contained at least one NMD-inducing non-productive event

2021 Milestones

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1H2021	Initiate Swallowtail Open Label Extension (OLE) study of STK-001
2H2021	Initiate multiple ascending dose (MAD) study of STK-001
2H2021	Preliminary safety and PK data from Phase 1/2a MONARCH study of STK-001
2H2021	Initiate ADOA natural history data collection
YE2021	Complete lead optimization for OPA1 compounds
YE2021	Demonstrate <i>in vivo</i> proof of mechanism and safety for a third program

Current Financials Anticipated to Fund Operations into 2024

\$287.6M

**Cash, Cash Equivalents
& Restricted Cash**

as of 12/31/2020

36.6M

Common Shares Outstanding

as of 12/31/2020

United in our mission to address the underlying cause of severe diseases by up-regulating protein expression with RNA-based medicines.





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