UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 8-K

CURRENT REPORT Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): January 30, 2024

AVROBIO, INC. (Exact name of registrant as specified in its charter)

Delaware (State or other jurisdiction of incorporation)

001-38537 (Commission File Number) 81-0710585 (I.R.S. Employer Identification No.)

100 Technology Square Sixth Floor
Cambridge, MA 02139
(Address of principal executive offices, including zip code)

(617) 914-8420

Not Applicable (Former Name or Former Address, if Changed Since Last Report)

| | ck the appropriate box below if the Form 8-K filing is intowing provisions: | tended to simultaneously satisfy the f | ling obligation of the registrant under any of the | | |
|--|--|--|--|--|--|
| X | Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425) | | | | |
| | Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12) | | | | |
| | Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b)) | | | | |
| | Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c)) | | | | |
| Sec | urities registered pursuant to Section 12(b) of the Act: | Trading symbol(s) | Name of each exchange on which registered | | |
| Common Stock, \$0.0001 par value per share | | AVRO | Nasdaq Global Select Market | | |
| chaj | cate by check mark whether the registrant is an emerging oter) or Rule 12b-2 of the Securities Exchange Act of 193 erging growth company | | 405 of the Securities Act of 1933 (§ 230.405 of this | | |
| | | | | | |
| | n emerging growth company, indicate by check mark if the ror revised financial accounting standards provided pursu | | | | |

Item 7.01. Regulation FD Disclosure.

On January 30, 2024, AVROBIO, Inc., a Delaware corporation ("AVRO") and Tectonic Therapeutic, Inc., a Delaware corporation ("Tectonic"), hosted a live webcast presentation to discuss the transactions contemplated by the Agreement and Plan of Merger and Reorganization, dated as of January 30, 2024, by and among AVRO, Tectonic and Alpine Merger Subsidiary, Inc., a Delaware corporation ("Merger Sub"), pursuant to which Merger Sub will merge with and into Tectonic, with Tectonic continuing as a wholly owned subsidiary of AVRO and the surviving corporation of the merger (the "Merger"). A webcast of the presentation and associated slides will be available on the Investors & Media section of AVRO's website at https://investors.avrobio.com and a replay will be archived for 30 days following the presentation. Furnished as Exhibit 99.1 hereto and incorporated herein by reference is the investor presentation that will be used by AVRO and Tectonic in connection with the Merger, including in the webcast described above.

The information in this Item 7.01, including Exhibit 99.1 attached hereto, shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such filing.

Item 9.01. Financial Statements and Exhibits.

(d) Exhibits

Exhibit

No. Description

99.1 Investor Presentation, dated January 30, 2024

104 Cover Page Interactive Data File (embedded within the Inline XBRL document)

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

AVROBIO, INC.

Date: January 30, 2024

By: /s/ Erik Ostrowski
Erik Ostrowski
President, Interim Chief Executive Officer, Chief Financial Officer and Treasurer



AVROBIO

DISCLAIMER

Inis communication contains "forward-looking statements" within the meaning of the "safe harbor" provisions of the Private Securities Liligation Reform Act of 1975, including but not limited to, express or implied statements regarding the structure, timing and completion of the proposed Merger; the combined company's listing on Nasdaq after closing of the proposed Merger and cash runway of the combined company; the undirected timing of closing; each company's and the combined company's expected cash position at the closing of the proposed Merger and cash runway of the combined company; the future operations of the combined company; the nature, strategy and focus of the combined company; the future operations of the combined company; the nature, strategy and focus of the combined company; the future operations of the combined company; and other clinical results; the competitive landscape of the combined company; and other clinical results; the competitive landscape of the combined company; and other statements that are not historical fact. All statements other than statements of historical fact contained in the competitive landscape of the combined company; and other statements that are not historical fact. All statements other than statements of historical fact contained in the competitive landscape of the combined company; and other statements are subject to a number of risks and uncertainties, many of which involve factors or circumstances that are beyond AVROBIO's. Tectonic 's or the combined company's control. Audit results could differ materially from those stated or implied in forward-looking statements due to a number of factors, including but not limited to (i) the risk that the conditions to the closing of the proposed Merger are not satisfied, including the failure to timely obtain shareholder approval for the transaction, if a all; (ii) uncertainties as to the firming of the consummation of the proposed Merger and the ability of each of AVROBIO and Tectonic to consummate the proposed Merger (vi) that

Tectonic obtained the industry, market and competitive position data used throughout this presentation from its own internal estimates and research, as well as from industry and general publications, and research, surveys and studies conducted by third parties. Internal estimates are derived from publicly available information released by industry analysts and third-party sources, Tectonic's internal research and its industry experience, and are based on assumptions made by Tectonic based on such data and its knowledge of the industry and market, which it believes to be reasonable. In addition, while Tectonic believes the industry, market and competitive position data included in this presentation is reliable and based on reasonable assumptions, Tectonic has not independently verified any third-party information, and all such data involve risks and uncertainties and are subject to change based on various factors.

This presentation contains trademarks, services marks, trade names and copyrights of Tectonic and other companies, which are the property of their respective owners. The use or display of third parties' trademarks, service marks, trade name or products in this presentation is not intended to, and does not imply, a relationship with Tectonic, or an endorsement of sponsorship by Tectonic. Solely for convenience, the trademarks, service marks and trade names referred to in this presentation may appear with the \(\theta\). Two SN symbols, but such references are not intended to indicate, in any way, that the company will not assert, to the fullest extent under applicable law, their rights or the right of the applicable licensor to these trademarks, service marks and trade name.



DISCLAIMER (continued)

Participants in the Solicitation

This communication relates to the proposed merger transaction involving AVROBIO and Tectonic and may be deemed to be solicitation material in respect of the proposed merger transaction. In connection with the proposed merger transaction, AVROBIO will file relevant materials with the U.S. Securities and Exchange Commission (the "SEC"), including a registration statement on Form S-4 (the "Form S-4") that contains a proxy statement (the "Proxy Statement") and prospectus. This communication is not a substitute for the Form S-4, the Proxy Statement or for any other document that AVROBIO may file with the SEC and or send to AVROBIO's shareholders in connection with the proposed merger transaction. BEFORE MAKING ANY VOTING DECISION, INVESTORS AND SECURITY HOLDERS OF AVROBIO ARE URGED TO READ THE FORM S-4. THE PROXY STATEMENT AND OTHER DOCUMENTS FILED WITH THE SEC CAREFULLY AND IN THEIR ENTIRETY WHEN THEY BECOME AVAILABLE BECAUSE THEY WILL CONTAIN IMPORTANT INFORMATION ABOUT AVROBIO, THE PROPOSED MERGER TRANSACTION AND RELATED MATTERS.

Additional Information and Where to Find I

Investors and security holders may obtain free copies of the Form S-4, the Proxy Statement and other documents filed by AVROBIO with the SEC through the website maintained by the SEC at http://www.sec.gov. Copies of the documents filed by AVROBIO's website at www.avrobio.com. AVROBO, Tectonic, and their respective directors and certain of their executive officers may be considered participants in the solicitation of proxies from AVROBIO's shareholders with respect to the proposed merger transaction under the rules of the SEC. Information about the directors and executive officers of AVROBIO is set forth in its Annual Report on Form 10-K for the year ended December 31, 2022, which was filed with the SEC on March 23, 2023, and in subsequent documents filed with the SEC. Additional information regarding the persons who may be deemed participants in the proxy solicitations and a description of their direct and indirect interests, by security holdings or otherwise, are also included in the Form S-4, the Proxy Statement and other relevant materials to be filed with the SEC when they become available. You may obtain free copies of this document as described above.

No Offer or Solicitation

This communication does not constitute an offer to sell or the solicitation of an offer to buy any securifies nor a solicitation of any vote or approval with respect to the proposed transaction or otherwise. No offering of securifies shall be made except by means of a prospectus meeting the requirements of Section 10 of the U.S. Securifies Act of 1933, as amended, and otherwise in accordance with applicable law.





JANUARY 2024



Merger of Tectonic Therapeutic and AVROBIO

OVERVIEW

- Tectonic Therapeutic, a privately-held biotechnology company focused on discovering and developing GPCR-targeted therapies, intends to merge with AVROBIO, Inc. (Nasdaq: AVRO)
- Supported by the Board of Directors of both companies and subject to stockholder approval and other customary closing conditions

TRANSACTION SUMMARY

- Planned \$130.7 million private financing from new and existing leading life sciences investors, together with existing cash from both companies at closing, expected to be approximately \$165 million and provide cash runway into mid-2027
- Expected pro forma ownership is approximately 40% pre-merger Tectonic shareholders,
 22% pre-merger AVROBIO shareholders, and 38% purchasers in the private financing
- Merger and financing expected to close in Q2 2024

MANAGEMENT

- Existing Tectonic management to lead the combined company
- Board of Directors of combined company will include one director from the AVROBIO BOD



Tectonic Therapeutic – Transforming the Discovery of Novel GPCR-Targeted Therapies, Innovating in Their Development

- · Validated platform to discover and optimize biologics that target GPCRs
- · Prioritizing high value GPCR targets, where small molecules are not the right modality
- · First two assets address indications with no approved therapy
 - 1. RXFP1 agonist potential therapy for Group 2 PH1 in HFpEF2
 - >600,000 Patients in US alone (>20 times PAH)
 - Initial Phase 1A PK/PD data demonstrated activity and favorable PK with potential for monthly dosing; full data set from this study expected by mid 2024
 - Phase 1B hemodynamic proof of concept expected in 2025, randomized Phase 2 data expected in 2026
 - 2. GPCR antagonist antibody addressing hereditary hemorrhagic telangiectasia (HHT)
- Team with extensive track record of drug discovery and development success, resulting in 20 first approvals
 across multiple therapeutic areas
- Well capitalized by a syndicate of leading institutional funds
- Transaction expected to provide runway into mid-2027

Pulmonary Hypertension Heart Failure with Preserved Ejection Fraction



Our Team Has Delivered for Patients and Investors



Alise Reicin, M.D.



Christian Cortis, Ph.D.



McNamara, Ph.D.



Anthony Muslin, M.D.



Marcella Ruddy, M.D.



Marc Schwabish, Ph.D.













agenus



₹SYNTA

















MERCK









Timothy Springer, Ph.D. Co-Founder









Andrew Kruse, Ph.D. Co-Founder

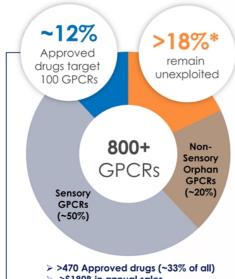








Biologics Offer Advantages Over Small Molecules in Targeting GPCRs in Multiple Settings



- When difficult to drug with small molecules Biologic captures complexity of ligand / receptor engagement
- If target site similar to domains of different proteins Biologic minimizes off target binding to improve safety / tolerability
- If use case requires tissue /compartment targeting Engineer biologic to target or exclude compartment as needed
- When multi-modal action needed Bispecific approach enables dual target engagement
- >>\$180B in annual sales
- > Predominantly small molecules
- Address broad range of therapeutic areas
- > Only 3 are antibodies

(*) Hauser, A.S. et al., Cell. 2018 Jan 11; 172(1-2): 41–54.e19.

* 18% = 100% - 12% (approved drug targets) - 50% (sensory) - 20% (non-sensory, orphan)



Our Unique Pipeline Opportunities are Enabled by Biologic Targeting of GPCRs



GROUP 2 PULMONARY HYPERTENSION (Group 2 PH)

> Potential Best-in-Class RXFP1 Agonist¹

Supporting clinical data

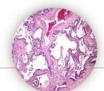


HEREDITARY HEMORRHAGIC TELANGIECTASIA (HHT)

First in Class & Indication

GPCR Antagonist² (anti-angiogenic)

Target pathway linked to disease genetics



FIBROSIS

Bi-specific Approach

GPCR Antagonist² (anti-fibrotic)

Supporting clinical data for one component of bispecific

Scale of POC studies: ~50-200 patients per indication 3-6 months treatment

- 1. Fusion protein lead molecule in-licensed from Harvard U., optimized using GEODe platform
- 2. GPCR targeted mAbs discovered internally using GEODe platform



Post Close Cash to Support Pipeline Progression Into Mid-2027 and Several Key Inflection Points

Tectonic Pipeline and Expected Readouts

| RXFP1 Agonist (TX45 – Fc-relaxin) | Phase 1a | Complete PK/PD Data: mid 2024 Ph 1b hemodynamic proof of concept data: 2025 Randomized Ph 2 data: 2026 | |
|--|------------------------------------|--|--|
| GPCR Antagonist (HHT Program) | Development Candidate Selection | Start of Ph 1: Q4 2025 / Q1 2026 Start of randomized studies: ~Q4 2026 | |
| GPCR Antagonist (Fibrosis Program) | Discovery | Develop internally or partner | |
| GPCR Modulators (Undisclosed) | Discovery | Develop internally or partner | |

ncludes in vivo HHT validation



GEODe Designed to Solve Key Challenges in GPCR Targeted Biologics Discovery

Challenges

RETAIN

endogenous GPCR structure to enable screening against relevant form of receptor

PURIFY

target in sufficient quantities to power screening campaign

INDUCE

immune response to human GPCR in animals if immunization strategy is pursued

STABILIZE

receptor in active conformation to enable agonist discovery

GEODe™ Platform Features Designed for Success

1

Receptor Engineering, and Purification Technology delivers abundant receptor reagent in native conformation

In-vitro Yeast Display Libraries

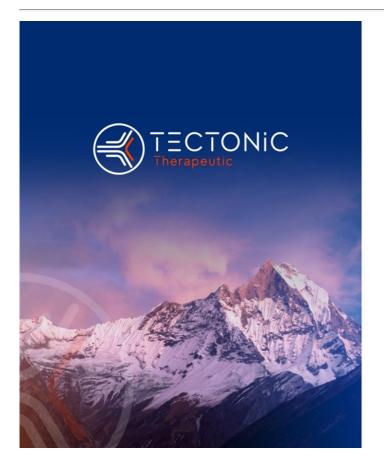
provide high-diversity, without immune editing

3.

Protein Engineering

Optimize protein pharmacology Engineer antigen formats to enable screening for agonists or antagonists as needed



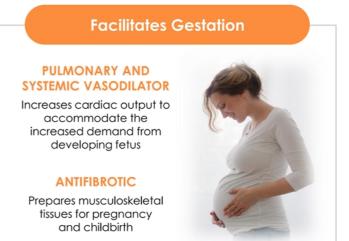


TX45: Fc-RELAXIN FUSION PROTEIN

RXFP1 agonist with differentiated profile

Hemodynamic and Anti-fibrotic Properties of Relaxin Demonstrated by its Role in Pregnancy

Pharmacology AGONIST Natural Ligand of RXPF1 Receptor No RXFP1 internalization from relaxin agonism → no desensitization with chronic therapy Relaxin upregulated in pregnancy Relaxin to the solution cryo-EM map of Mill-length RXFP1-Gs complex solution cryo-EM map of Mill-length RXFP1-Gs com



Pharmacologic properties of relaxin hold promise as a potential treatment for cardiopulmonary and renal disease, but its short half-life has impeded its development



Evidence of Serelaxin's Safety and Benefit in Acute Heart Failure (AHF)

- A meta-analysis of 6 studies and >11,000 patients demonstrated that a 2-day infusion of serelaxin was safe and resulted in a 23% decrease in 5-day worsening heart failure
- One of two pivotal studies include in meta-analysis, RELAX-AHF-2, failed to achieve the coprimary endpoints, and we believe that two factors contributed to this outcome
 - It was ambitious to expect that a two-day infusion of serelaxin, with its short half-life and mechanism
 of action, would demonstrate clinical benefit at day 5 and, more puzzlingly at 6 months
 - Operational challenges with patient enrollment may also have had an impact
- Limitations of serelaxin's PK inhibited further development, but its clinical performance supports advancement of TX45 whose PK profile permits chronic dosing for chronic diseases such as pulmonary hypertension and heart failure

*Teerlink J.R. et al. Eur. J. Heart Fail. 2019; 22: 315-329; patients from RELAX-AHF-JP (N=30 total) not listed in table



TX45 is Engineered to Solve a Critical PK Problem Observed with Other Relaxin Molecules

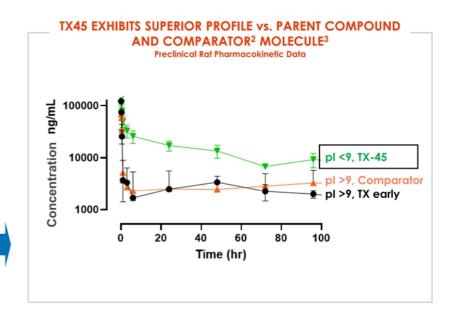
Relaxin has very short in vivo half-life Fc-fusion needed to improve PK



Relaxin Fc-fusions have steep decline in exposure after dosing (>90%) because of glycocalyx binding due to high pl1



Engineering TX45 to reduce net positive charge (and lower pl) prevents rapid clearance

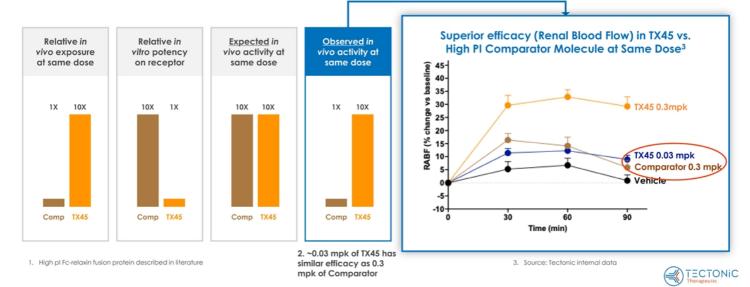


- Isoelectric Point High pI Fc-relaxin fusion protein described in literature Source: Tectonic internal data



TX45 Reflects Significant Protein Engineering to Optimize Its Pharmacology

TX45 results in \sim 10x greater *in vivo* potency over comparator¹ molecule than predicted based on PK and *in vitro* activity² – potentially from reduced trapping of drug in glycocalyx, resulting in increased free drug available to activate RXFP1 in tissues



TX45 – Optimized RXFP1Agonist for Group 2 PH in HFpEF

| ✓ Potential Best-in-Class Relaxin Agonist with Optimized PK | Protein engineering has extended pharmacologic half-life to support monthly dosing |
|---|--|
| ✓ High Unmet Need in Group 2 PH with HFpEF¹ | No approved therapy>600,000 patients in USHigh 5-year high mortality |
| Mechanism may be Ideal to Address Group 2 PH | Pulmonary + systemic vasodilation, cardiac relaxation Reversal of fibrosis in pulmonary vasculature and heart Anti-inflammatory |
| Supporting Clinical and Pre- clinical Data | Hemodynamic benefit in studies of serelaxin in AHF Clear benefit observed with TX45 in rodent PH and CHF models |
| ✓ Streamlined Development Strategy | No outcome study needed Enrichment strategy for CpcPH where there is greatest unmet need Enables potential early launch relative to congestive heart failure |
| ✓ Potential to Expand Indications | Other PH Groups, Heart failure, renal disease |

. Heart Failure with preserved Ejection Fraction



Pulmonary Hypertension Consists of 5 Distinct Diseases

Group 2 PH is of Greatest Interest for TX45's Initial Indication

Group 1 ("PAH") $(\sim 25,000^{1})$

- Idiopathic
- Hereditary
- Connective tissue disease-associated
- Congenital heart disease-associated
- · Drug-induced

Group 2 $(>600,000^1)$

- Due to left heart disease (HFpEF, HFrEF) or valvular heart disease
- · CAD, HTN, T2DM2, high cholesterol are risk factors
- Two Subtypes: CpcPH / IpcPH

Group 3

- Due to lung disease or hypoxia
- May be due to COPD, interstitial lung disease (i.e., IPF) or obstructive sleep apnea

Group 4 ("CTEPH")

· Chronic thromboembolic pulmonary hypertension -i.e., as a consequence of blood clots

Group 5 (Misc.)

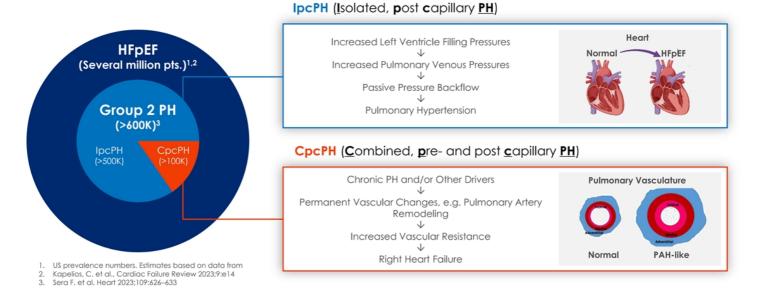
 Miscellaneous group with causes unclear or multiple underlying factors

US Prevalence
 CAD: Coronary Artery Disease, HTN: Hypertension, T2DM: Type 2 Diabetes Mellitus Nat. Pul. Hypertension Unit, Ireland



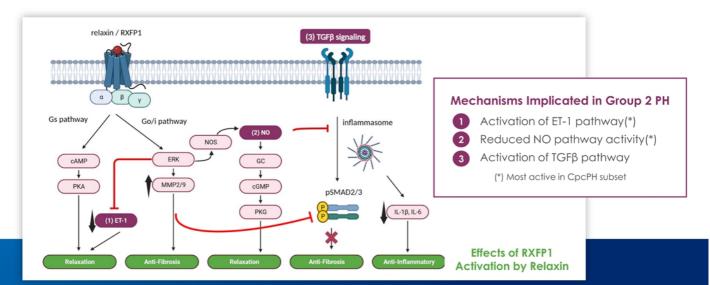
Our Focus is on the Group 2 PH Subset of Heart Failure with Preserved EF (HFpEF)

Clinical Program Designed to Enable Evaluation of Efficacy in Each Subgroup





Relaxin Multimodal MOA Addresses Pathways Implicated in Group 2 PH Pathophysiology



- ✓ Pulmonary and systemic arterial vasodilation
- ✓ Favorable remodeling: anti-fibrotic effect in heart and pulmonary vasculature
- ✓ Anti-inflammatory



Relaxation and Anti-Fibrotic Effects of Relaxin Have Potential for Disease Modification in Group 2 PH

- · Heart, and vascular dysfunction contribute to disease pathology
- Renal dysfunction also present in many of these patients

| CHARACTERISTICS OF GROUP 2 PH | ІрсРН | СрсРН | ANTICIPATED RELAXIN EFFECTS |
|---|-------|-------|--|
| Pulmonary artery narrowing, thickening, stiffening, fibrotic remodeling | | ✓ | Pulmonary Vasodilation Anti-inflammatory, anti-fibrotic |
| Right Ventricular Dysfunction | ✓ | ✓ | Right ventricular remodeling |
| Thickening and stiffening of Left Ventricle | ✓ | ✓ | Peripheral vasodilation, cardiac relaxation, left ventricular remodeling |
| Compromised kidney function | ✓ | ✓ | Improvement in kidney function |

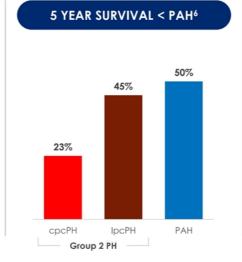
Balanced vasodilation in pulmonary and peripheral vasculature needed for safety and efficacy



Group 2 PH vs. PAH

- Significant opportunity for a first-in-indication therapy
- Highly motivated physicians and patients

US PREVALENCE >> PAH >600,0001-3 **IpcPH** (>500K) СрсРН <25,0004 Group 2 PH PAH Multi-\$ Billion Market >\$4 Billion Market in US Today⁵ Opportunity



NO THERAPEUTIC OPTIONS

No approved therapies

Limited pipeline

PAH Drugs have failed in Group 2 PH with the exception of PDE5i in CpcPH

Multiple drugs/ mechanisms approved

ET1R antagonists PDE5 inhibitors GC stimulators

ACTRII-Trap

Group 2 PH

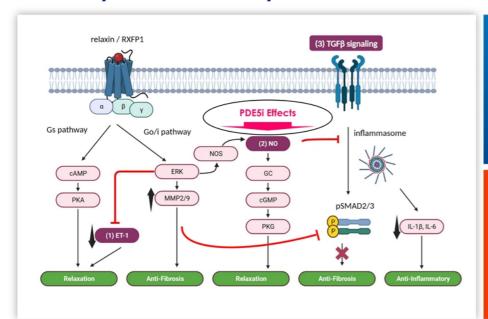
PAH





- US prevalence numbers. Estimates based on data from Kapelios, C. et al., Cardiac Failure Review 2023;9:e14 Sera F. et al. Heart 2023;109:626–633 www.pabrilitative.com GlobalData https://doi.org/10.1371/journal.pone.0199164.g003

PDE5 Inhibitors Affect Only One of Several Pathways Addressed by Relaxin



PDE5 inhibitors demonstrated efficacy across 3 studies (1-3) including:

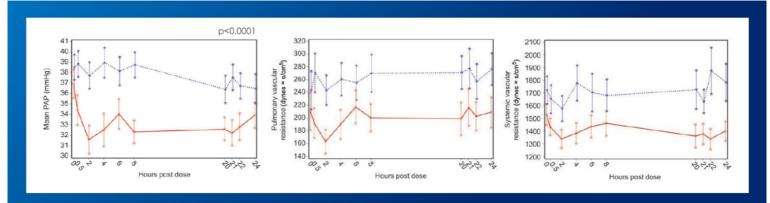
- ✓ Reduction in PVR
- ✓ Improvement in exercise capacity
- ✓ Decrease in heart failure hospitalizations

TX45 anticipated to be effective in both Cpc-PH and Ipc-PH because it targets additional anti-fibrotic on top of activation of the NO pathway



Relaxin Improves Hemodynamics in Heart Failure

Balanced pulmonary and peripheral vasodilation, and increased cardiac output relevant to Group 2 PH



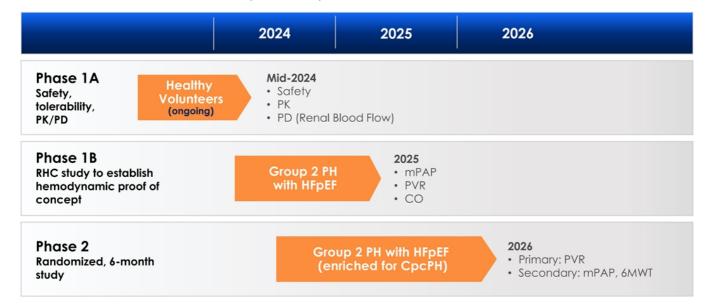
- Above: serelaxin infusion for 20hrs in Acute Heart Failure patients with elevated pulmonary artery pressure (PAP) rapidly lowered mPAP, pulmonary vascular resistance (PVR), systemic vascular resistance (SVR) and improved renal function*
- Not shown: serelaxin also improved additional hemodynamic parameters including pulmonary capillary wedge pressure (PCWP), right atrial pressures (RAP) and cardiac index (CI)
- In a similar study in patients with chronic CHF, a reduction in PCWP and an increase in cardiac output was demonstrated**

*Ponikowski P. et al. Eur. Heart J. 2014, **Dschietzig T. et. Al. Ann NY Acad Sci 2009



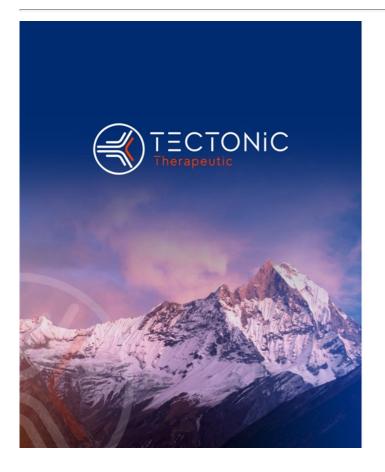
TX45 Development Program Overview

Planned readouts in mid-2024, 2H 2025, 2026



RHC: Right Heart Catheter
mPAP: Mean Pulmonary Arterial Pressure
PVR: Pulmonary Vascular Resistance
CO: Cardiac Output
6MTW: 6-Minute Walk Test





Preliminary PK/PD Analysis After TX45 Administration in Healthy Volunteers

January 2024

Summary of preliminary data from TX45 SAD study¹

Cohort A (0.3 mg/kg IV) and Cohort C (150 mg SC)

- · Well tolerated with minimal adverse events, no drug-related SAEs
- Pharmacokinetics
 - Low intersubject variability in serum concentrations (≤ 20%)
 - No evidence of immune mediated clearance
- · Pharmacodynamics from 0.3 mg/kg cohort (lowest dose)
 - ~38% increase in renal plasma flow on Day 2 post dose persisting at least until Day 8 post dose
 - Consistent with serelaxin's effect
 - Meets "go criteria"

TX45 SAD Dose Escalation Plan



RPF= Renal Plasma Flow *Cohorts F and G are optional

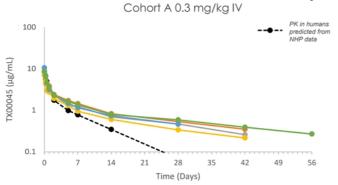
Based on preliminary data, we anticipate Q4W dosing at optimal SC dose

1. As of Jan 18, 2024

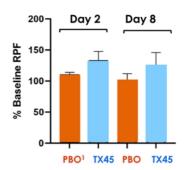


Phase 1A Study Preliminary Single Dose TX45 PK/PD Data (0.3 mg/kg)

TX45 Serum Concentrations from Phase 1A Subjects



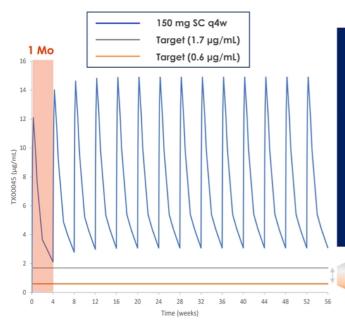
Renal Plasma Flow in Phase 1A Subjects TX45 Dosed on Day 1 - Cohort A 0.3 mg/kg IV







PK Modeling based on Preliminary Data Suggests TX45 Can be Given Monthly



- A model was constructed using observed data from both 0.3 mg/kg IV and 150 mg SC cohorts to predict trough concentrations of 150 mg SC Q4W
- Terminal t_{1/2} is based on 0.3 mg/kg IV cohort as data beyond 14 days from 150 mg SC cohort was not available for accurate half life determination

Model assumptions

- Steady state terminal t_{1/2}, similar for IV and SC
- Terminal t_{1/2} of 16.7 days, observed in 0.3mg/kg IV cohort is maintained in additional cohorts

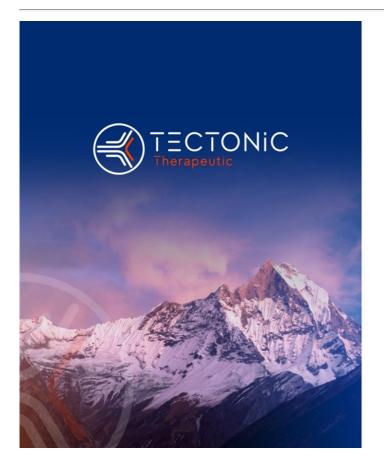
Target Exposure Range Predicted to Provide Maximal Efficacy based on Preclinical Models



Significant Pharma Interest in Relaxin Tectonic has Potential Best-in-Class Molecule

| Company | Format | Formulation | Expected Dosing Frequency |
|----------------------|--|----------------------------------|------------------------------|
| TECTONIC Therapeutic | FC-FUSION Engineered for optimal PK, biodistribution, high [C] formulation | SubQ High [C] achievable | Q4 Weeks |
| AstraZeneca 🕏 | Fc-Fusion | SubQ | Q2 Weeks |
| Lilly | h-Albumin-mAb-Fusion | SUbQ Injection site reactions | Q Weekly |





Summary



Uniquely Positioned to Deliver on Value Creating Milestones

Pipeline of Uniquely Differentiated Assets

Multiple Inflection Points 2024, 2025, 2026

Address important clinical problems, underserved patient populations

Accomplished Team World-leader Founders

20 1st Approvals
>\$50 Billion in Annual Sales

Leadership with Proven Track Record Strong Balance Sheet Anticipated Post Transaction

~\$165 Million

>3 Year Runway

Well positioned to execute





JANUARY 2024

