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Jefferies CEO ‘Back to School’ Fireside Chat

September 7th, 2023

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This document and the Presentation contain statements that are or may be forward-looking statements. These statements are based on our management's current beliefs, expectations and assumptions about future events, conditions and results, and on information currently available to us. This document and the Presentation also contain estimates and other statistical data made by independent parties and by us relating to market size and growth and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates. In addition, projections, assumptions and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk.

All statements other than statements of historical facts included in this document may be forward-looking statements, including statements that relate to the Company's future prospects, developments and strategies. Words such as "expect," "anticipate," "intend," "plan," "believe," "seek," "estimate," "think," "may," "could," "will," "would," "should," "continue," "potential," "likely," "opportunity" and similar expressions or variations of such words are intended to identify forward-looking statements, but are not the exclusive means of identifying forward-looking statements. Additionally, statements concerning future matters such as our expectations of business and market conditions, development and commercialization of new products, enhancements of existing products or technologies, and other statements regarding matters that are not historical are forward-looking statements.

Such statements are based on currently available operating, financial and competitive information and are subject to various risks, uncertainties and assumptions that could cause actual results to differ materially from those anticipated or implied in our forward-looking statements due to a number of important factors including, but not limited to, those risks that are described in the Company's most recent Annual Report and Accounts which can be found on the Company's website at https://investors.puretechhealth.com/financials-filings/reports and in the Company's Annual Report on Form 20-F for the year ended December 31, 2022 filed with the Securities and Exchange Commission.

Given these risks, uncertainties and other factors, many of which are beyond the Company's control, you should not place undue reliance on these forward-looking statements.

Each forward-looking statement speaks only as at the date of this document. Except as required by law, we assume no obligation to update these forward-looking statements publicly, or to revise any forward-looking statements to reflect events or developments occurring after the date of this document, even if new information becomes available in the future.

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Our Founded Entities are comprised of our Controlled Founded Entities and our Non-Controlled Founded Entities, all of which are incorporated in the United States. References to our "Controlled Founded Entities" refer to Follica, Incorporated, and Entrega, Inc., for all periods prior to March 1, 2023, Vedanta Biosciences, Inc., for all periods prior to May 25, 2022, Sonde Health Inc., and for all periods prior to June 10, 2021, Alivio Therapeutics, Inc. References to our "Non-Controlled Founded Entities" refer to Akili Interactive Labs, Inc., Karuna Therapeutics, Inc., Vor Bio, Inc., Gelesis, Inc., for all periods following May 25, 2022, Sonde Health, Inc., for all periods following March 1, 2023, Vedanta Biosciences, Inc., and, for all periods prior to December 18, 2019, resTORbio, Inc. We formed each of our Founded Entities and have been involved in development efforts in varying degrees. In the case of our Controlled Founded Entities Follica, Incorporated and Entrega, Inc., we continue to maintain majority voting control. With respect to our Non-Controlled Founded Entities, we may benefit from appreciation in our minority equity investment as a shareholder of such companies.

We are giving life to new classes of medicine to change the lives of patients with devastating diseases

PureTech Outperforms the Industry[1]

Identifying valuable programs & developing & clarifying their value efficiently

27

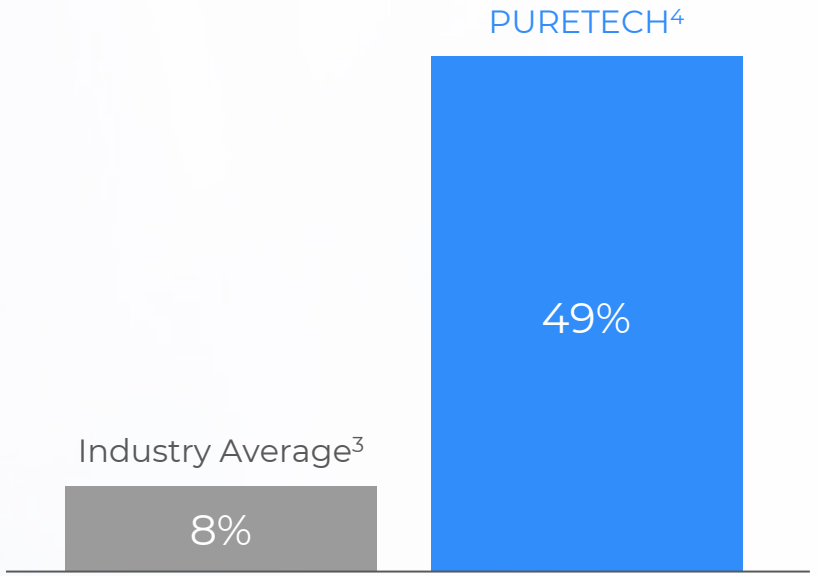
New therapeutics & therapeutic candidates generated from PureTech's R&D engine

1

Soon to be filed for FDA approval

2

Taken from inception to FDA & EU regulatory clearances



Probability of Transition Success from Ph1 to Regulatory Filing

TRACK RECORD OF CLINICAL SUCCESS[2]

Delivering on our mission to change patients' lives

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[1] PureTech has established the underlying programs and platforms that have resulted in therapeutics and therapeutic candidates that are being advanced within our Wholly Owned Programs or by our Founded Entities. The numbers on this slide reflects status of those therapeutics and therapeutic candidates as of the date of PureTech's most recently filed Annual Report on Form 20-F. [2] The cumulative percentages are calculated by multiplying the individual phase percentages listed in the following footnotes 3 & 4. [3] Industry average data measures the probability of clinical trial success of therapeutics by calculating the number of programs progressing to the next phase vs. the number progressing and suspended (Phase 1=52%, Phase 2=29%, Phase 3=58%). BIO, PharmaIntelligence, QLS (2021) Clinical Development Success Rates 2011 – 2020. This study did not include therapeutics regulated as devices. [4] The aggregate percentages include all therapeutic candidates advanced through at least Phase 1 by PureTech or its Founded Entities from 2009 onward, using the aforementioned calculation method based on the following individual phase percentages, Phase 1 (n = 7/9; 78%), Phase 2 (n = 10/12; 83%), Phase 3 (n = 3/4; 75%), last updated on June 21, 2023; Phase 2 and Phase 3 percentages include some therapeutic candidates where Phase 1 trials were not conducted by PureTech or its Founded Entities (i) due to the requirements of the medical device regulatory pathway or (ii) because a prior Phase 1 trial was conducted by a third party, which Phase 1 trials were not included in this analysis.

Founded Entities Drive Value & Non-Dilutive Funding

Founded Entities significant untapped value to fund PureTech's future growth & value

Wholly Owned Programs[1]

LYT-100
Deupirfenidone

LYT-300
Oral Allopregnanolone

LYT-310
Oral Cannabidiol

LYT-200
Anti-Galectin-9 mAb

3 additional preclinical CNS programs
via our innovation engine

$

Generate non dilutive capital to fund next generation of programs and return capital to shareholders

Founded Entities[2]

NASDAQ: KRTX

2.8% Equity[3]

NASDAQ: VOR

4.0% Equity

NASDAQ: AKLI

14.6% Equity

22.8% Equity + Royalties[4]

41.0% Equity[5]

35.2% Equity

73.8% Equity

$3.8B capital raised by Founded Entities since July 2018, of which 96% was from 3rd parties

$350.5M consolidated cash & cash equivalents with operational runway to Q1 2026; PureTech has not needed to raise capital in ~6 years

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[1] Refrences in this presentation to "Wholly Owned Programs" refer to the Company's five therapeutic candidates (LYT-100, LYT-200, LYT-300, and LYT-310, lymphatic and inflammation platforms and potential future therapeutic candidates and platforms that the Company may develop or obtain. References to "Wholly Owned Pipeline" refer to LYT-100, LYT-200, LYT-300, and LYT-310. The FDA and corresponding regulatory authorities will ultimately review our clinical results and determine whether our wholly-owned therapeutic candidates are safe and effective. No regulatory agency has made any such determination that our wholly-owned therapeutic candidates are safe or effective for use by the general public for any indication; [2] Founded Entities represent companies founded by PureTech in which PureTech maintains ownership of an equity interest and, in certain cases, is eligible to receive sublicense income and royalties on product sales. Relevant ownership interests for Vedanta, Sonde and Entrega were calculated on a partially diluted basis (as opposed to a voting basis) as of June 30, 2023, including outstanding shares, options and warrants, but excluding unallocated shares authorized to be issued pursuant to equity incentive plans. Karuna, Akili and Vor ownerships were calculated on a beneficial ownership basis in accordance with SEC rules as of July 31, 2023, August 3, 2023, and August 4, 2023, respectively; [3] As of March 22, 2023, PureTech has sold its right to receive a 3% royalty from Karuna to Royalty Pharma on net sales up to $2 billion annually, after which threshold PureTech will receive 67% of the royalty payments and Royalty Pharma will receive 33%. PureTech retains its equity ownership in Karuna. Additionally, under its license agreement with Karuna, PureTech retains the right to receive milestone payments upon the achievement of certain regulatory approvals and 20% of sublicense income; [4] Gelesis ownership represents the percentage of Gelesis' outstanding common stock held by PureTech as of August 11, 2023. On a beneficial ownership basis (as calculated in accordance with SEC rules), PureTech owns 92.0% of the outstanding securities of Gelesis as of June 12, 2023. On June 12, 2023, PureTech entered into an Agreement and Plan of Merger to acquire all of the outstanding equity and equity-linked securities of Gelesis and to cause Gelesis to become an indirect wholly owned subsidiary of PureTech upon consummation of the transaction. Please see PureTech's Schedule 13D filings with respect to Gelesis on file with SEC for additional information. PureTech is also eligible to receive certain payments from Gelesis under its license agreement, including sublicense payments and royalties on sales of certain products, including Plenity; [5] Vedanta's $106.5 million recent financing round was structured as convertible debt. PureTech ownership reflects ownership as of June 30, 2023, and does not take into account any potential future dilution, if applicable, as a result of conversion of that debt amount.

Distinctive Approach to Drug Development Drives Success

R&D engine is repeatable and scalable based on 3 pillars

VALIDATED EFFICACY

Advancing **novel compounds** designed to preserve pharmacology of **efficacious** drugs to maximize unrealized potential

CLEAR PATIENT BENEFIT

Applying **proprietary insights & technologies** to address key limitations and **unlock full drug potential** to address **patient needs**

EFFICIENT & DE-RISKED PATH

Building on **well-defined clinical & regulatory path** backed by our **proven R&D track record**

(6x the industry average [1])

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[1] See slide 6 of our corporate presentation at https://investors.puretechhealth.com/ for method of calculation.

KarXT Case Study

1st new mechanism for treating schizophrenia in over 50 years invented & advanced by PureTech

PATIENT NEED

~2.7M **living with schizophrenia in the US**

~3.2M **with Alzheimer's disease psychosis in the US**

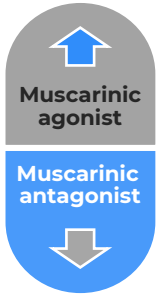
Current antipsychotics **have significant side effects and poor adherence**

Xanomeline had shown efficacy but was sitting on a shelf at Eli Lilly due to GI Tolerability issues

PURETECH ROLE

Built top team of CNS experts

- ✓ **PureTech invented & filed patents** to cover the agonist/antagonist concept
- ✓ **Completed tolerability POC**
- ✓ Planned Phase 2 POC study



Xanomeline
CNS active agonist

Trospium chloride
Peripheral antagonist blocks side effects of agonist

VALUE REALIZATION

Positive Phase 3 data in schizophrenia as monotherapy

- ✓ Phase 3 EMERGENT-2 study in adults with schizophrenia **met the primary endpoint** with a **clinically meaningful (9.6-point) reduction in the PANSS total score** compared to placebo ($p<0.0001$)
- ✓ Phase 3 EMERGENT-3 trial in adults with schizophrenia **met the primary endpoint** with a **clinically meaningful (8.4-point) reduction in PANSS total score** compared to placebo ($p<0.0001$)
- ✓ NDA submission expected in mid-2023

Ongoing Phase 3 programs in **psychosis in Alzheimer's disease.**

Generating Value for Patients and Shareholders

KarXT Case Study Part 2

$18.5M
Total PRTC spend[1]

46.6X ROI[2]

Potential Upside Value[3]

~$1.4B

Value of current Karuna holdings plus potential milestones from royalty deal, excluding milestone payments & 20% sublicense revenue royalties under Karuna license

Cash generated to date, through equity sales and $100M upfront payment from the Royalty Pharma transaction

Founded Entities model enabled us to generate non-dilutive capital without tapping the capital markets

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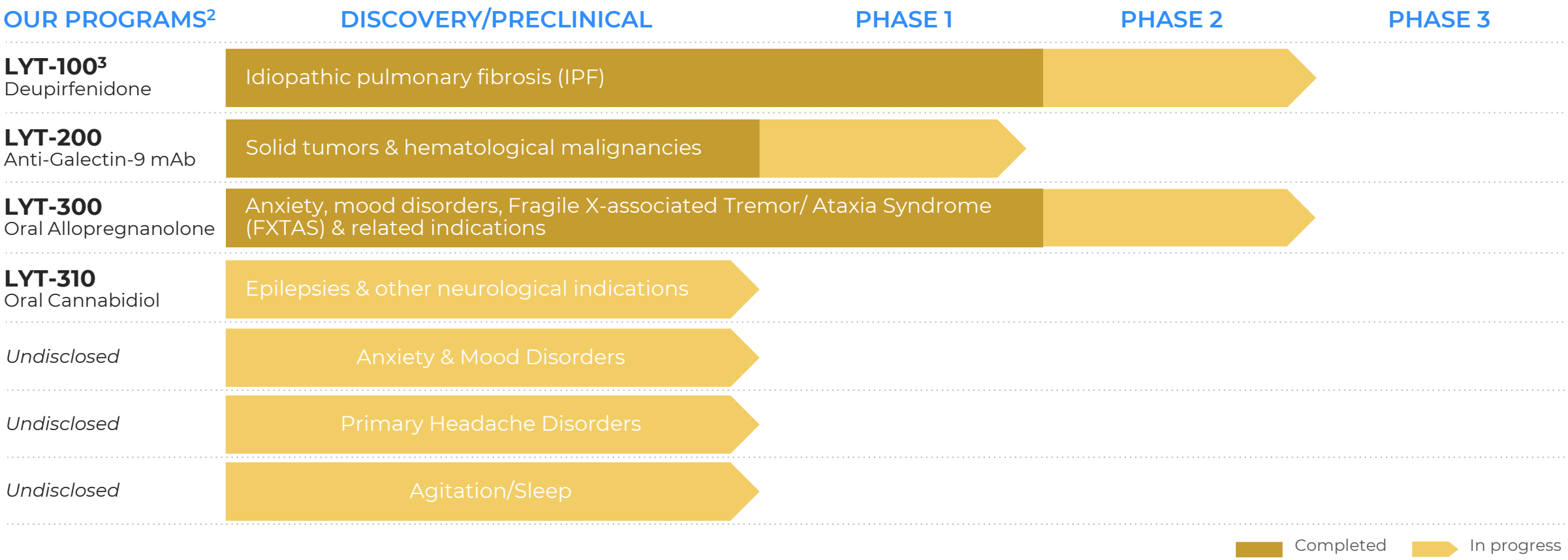
[1] Represents total PureTech principal investment in Karuna; [2] Return on Investment (ROI) and value creation calculations were assessed based on PureTech's percentage ownership of Karuna outstanding shares as of market close August 31, 2023. ROI and its components are non-IFRS financial measures. We report certain financial information using non-IFRS financial measures, as we believe these measures provide information that is useful to management and investors to assess financial performance. These non-IFRS financial measures do not have any standardized meaning and may not be comparable with similar measures used by other companies. For certain non-IFRS financial measures, there are no directly comparable amounts under IFRS. These non-IFRS financial measures should not be viewed as alternatives to measures of financial performance determined in accordance with IFRS. For a reconciliation of ROI and its components to IFRS financial measures (where applicable) please refer to appendix slides 65-67 on our corporate presentation at https://investors.puretechhealth.com/; [3] Represents the amounts described in footnote 4 plus the amounts described in footnote 5; [4] Represents the value of PureTech's holdings of KRTX common stock as of August 31, 2023, plus the $400 million in potential milestone payments included in PureTech's transaction with Royalty Pharma. The value of KRTX common stock may vary over time. PureTech also may not receive the totality of the milestone payments under its transaction with Royalty Pharma; [5] Represents cash generated to date through sales of KRTX common stock and the $100 million in upfront consideration from PureTech's transaction with Royalty Pharma. Please see Slide 67 on our corporate presentation at https://investors.puretechhealth.com/ for additional information regarding PureTech's sales of KRTX common stock.

Wholly Owned Pipeline[1]

PureTech: Multiple value drivers and robust pipeline



Research and Partnered Programs include multiple "Glyphed" CNS programs in candidate selection

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[1] References in this presentation to "Wholly Owned Programs" refer to the Company's five therapeutic candidates (LYT-100, LYT-200, LYT-300, and LYT-310), lymphatic and inflammation platforms and potential future therapeutic candidates and platforms that the Company may develop or obtain. References to "Wholly Owned Pipeline" refer to LYT-100, LYT-200, LYT-300, and LYT-310; [2] The FDA and corresponding regulatory authorities will ultimately review our clinical results and determine whether our wholly-owned therapeutic candidates are safe and effective. No regulatory agency has made any such determination that our wholly-owned therapeutic candidates are safe or effective for use by the general public for any indication; [3] Also being advanced for medical countermeasures under the FDA Animal Rule; plans underway to study LYT-100 in progressive fibrosing interstitial lung disease (PF-ILDs) and exploring LYT-100 in additional opportunities where pirfenidone has shown human efficacy signals e.g., heart failure with preserved ejection fraction (HFpEF) and focal segmental glomerulosclerosis (FSGS).

Unlocking Value from Wholly Owned Programs

Key component of robust capital return strategy

Plus three additional preclinical CNS programs underway produced from our innovative engine

PATHWAYS TO VALUE REALIZATION

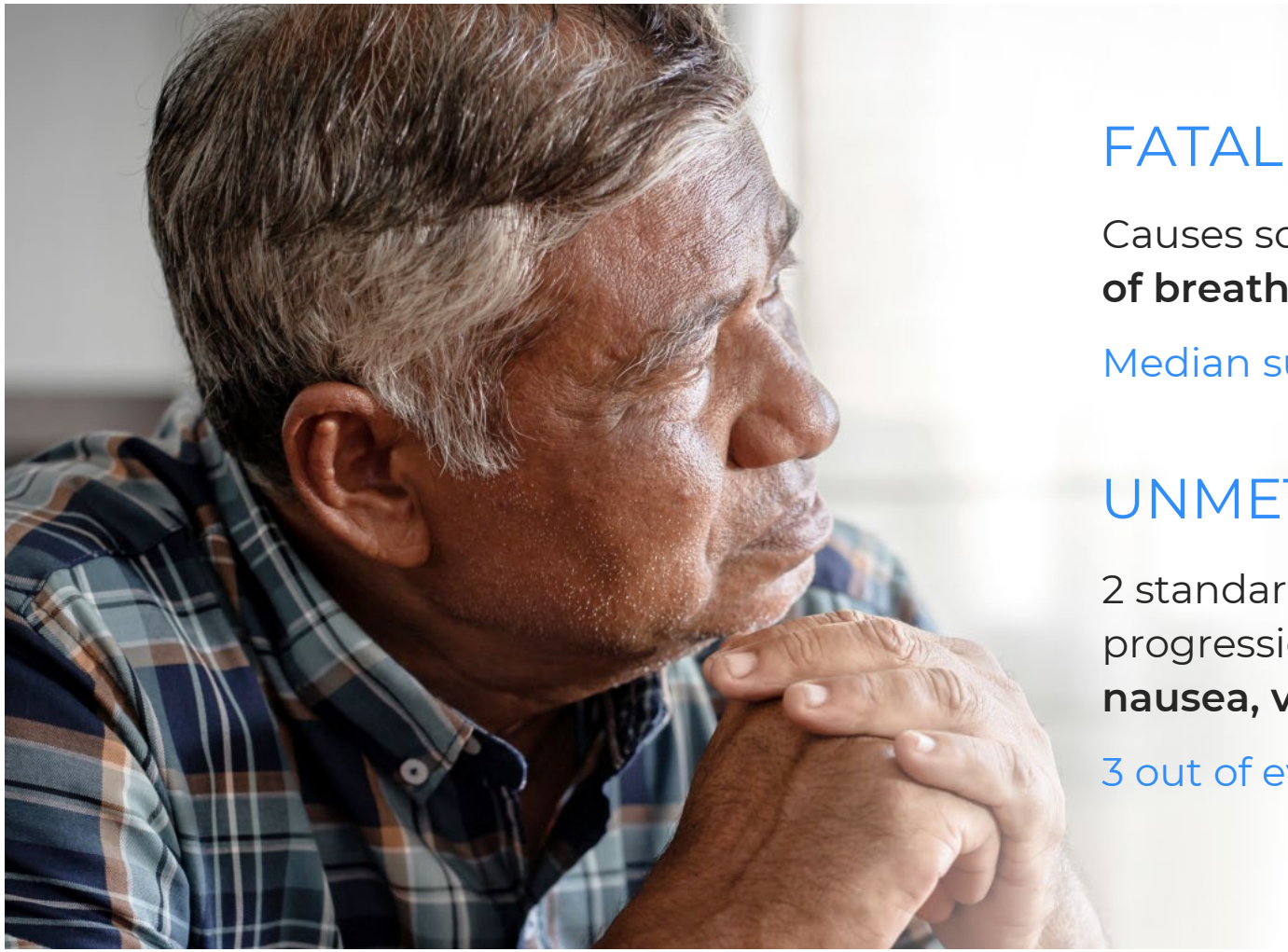
ADVANCE	**CREATE**	**SELL**
new & existing programs	new Founded Entities	asset or partnering/ royalty transactions

FUND NEW & EXISTING PROGRAMS

RETURN CAPITAL TO SHAREHOLDERS

LYT-100 for Idiopathic Pulmonary Fibrosis (IPF)

ORPHAN DESIGNATION: ~120,000 patients in the US, ~110,000 in the EU5[1]



FATAL & PROGRESSIVE

Causes scar tissue in the lungs, leading to **shortness of breath and loss of lung function**[2]

Median survival 2 – 5 years[3]

UNMET MEDICAL NEED

2 standard of care treatments proven to slow disease progression, but **have significant side effects, including nausea, vomiting and diarrhea**[4,5]

3 out of every 4 patients are not on standard of care[6]

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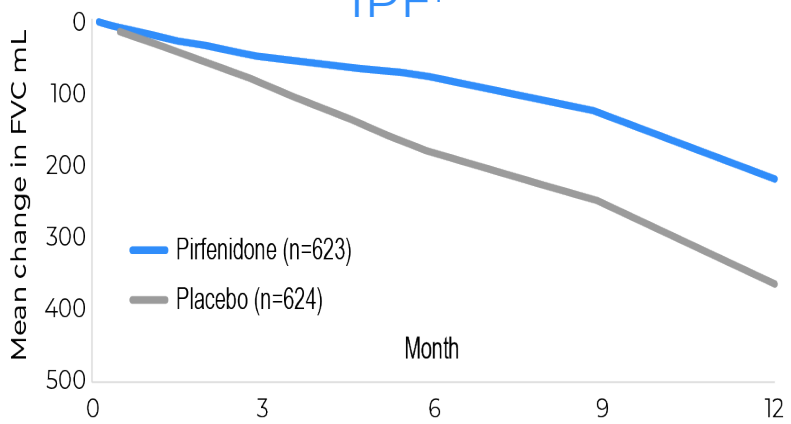
ESBRIET (pirfenidone) and OFEV (nintedanib) were approved in 2014

[1] GlobalData Epidemiology and Market Size Search. [2] Barratt SL, Creamer A, Hayton C, Chaudhuri N. Idiopathic Pulmonary Fibrosis (IPF): An Overview. J Clin Med. 2018 Aug 6;7(8):201. [3] Fisher, M., Nathan, S. D., Hill, C., Marshall, J., Dejonckheere, F., Thuresson, P., & Maher, T. M. (2017). Predicting Life Expectancy for Pirfenidone in Idiopathic Pulmonary Fibrosis. Journal of Managed Care & Specialty Pharmacy, 23(3-b Suppl), S17–S24. https://doi.org/10.18553/jmcp.2017.23.3-b.s17. [4] Rubino C. M., Bhavnani S. M., Ambrose P. G., Forrest A., Loutit J. S. Effect of food and antacids on the pharmacokinetics of pirfenidone in older healthy adults. Pulmonary Pharmacology & Therapeutics. 2009 Aug;22(4):279-285. [5] Belhassen, M., Dalon, F., Nolin, M., & Van Ganse, E. (2021). Comparative outcomes in patients receiving pirfenidone or nintedanib for idiopathic pulmonary fibrosis. Respiratory research, 22(1), 135. [6] Dempsey TM, Payne S, Sangaralingham L, Yao X, Shah ND, Limper AH. Adoption of the Antifibrotic Medications Pirfenidone and Nintedanib for Patients with Idiopathic Pulmonary Fibrosis. Ann Am Thorac Soc. 2021 Jul;18(7):1121-1128.

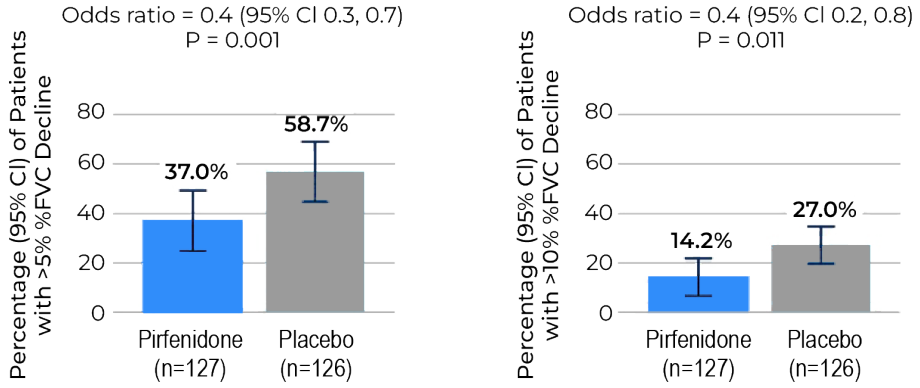
Pirfenidone:

Clinically validated anti-fibrotic & anti-inflammatory

IPF[1]



UNCLASSIFIABLE INTERSTITIAL LUNG DISEASE (UILD)[2]



APPLICATION/FOCUS

- Pirfenidone FDA-approved for IPF with breakthrough designation for uILD; has been shown to extend life in patients with IPF by approximately 3 years[3]
- Over a dozen late-stage & real-world efficacy studies demonstrate efficacy in IPF[4]
- Clinical proof-of-concept studies in FSGS, uILD, radiation-induced fibrosis & other inflammatory & fibrotic diseases
- <u>BUT</u> GI-related tolerability issues significantly limit its usage, resulting in **~50% who discontinue, dose adjust, or switch**[5] & **3 out of every 4 patients are not on standard of care**[6]
- Despite drawbacks, 2022 sales of pirfenidone were ~$800K & sales of both SOC treatments combined were ~$4B[7]

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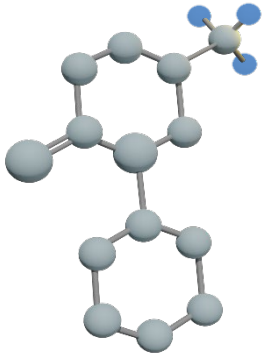
[1] Noble, P., et al. European Respiratory Journal (2016) 47:243-253 [2] ERS 2019: http://bit.ly/2I19WCC; [3] Fisher, M., Nathan, S. D., Hill, C., Marshall, J., Dejonckheere, F., Thuresson, P., & Maher, T. M. (2017). Predicting Life Expectancy for Pirfenidone in Idiopathic Pulmonary Fibrosis. Journal of Managed Care & Specialty Pharmacy, 23(3-b Suppl), S17–S24. https://doi.org/10.18553/jmcp.2017.23.3-b.s17 [4] Saad, M. I., Mcleod, L., Hodges, C., Vlahos, R., Rose-John, S., Ruwanpura, S., & Jenkins, B. J. (2021). ADAM17 Deficiency Protects against Pulmonary Emphysema. American Journal of Respiratory Cell and Molecular Biology, 64(2), 183-195. doi:10.1165/rcmb.2020-0214oc; [5] Cottin, V., et al. ERJ Open Research (2018); Dempsey et al. Annals of the American Thoracic Society, 18(7), 1121–1128. https://doi.org/10.1513/AnnalsATS.202007-901OC; [6] Dempsey TM, Payne S, Sangaralingham L, Yao X, Shah ND, Limper AH. Adoption of the Antifibrotic Medications Pirfenidone and Nintedanib for Patients with Idiopathic Pulmonary Fibrosis. Ann Am Thorac Soc. 2021 Jul;18(7):1121-1128; [7] IPF & PF-ILD SOC 2022 annual sales.

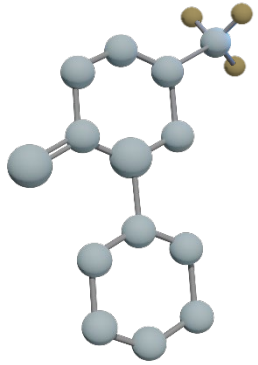
LYT-100:

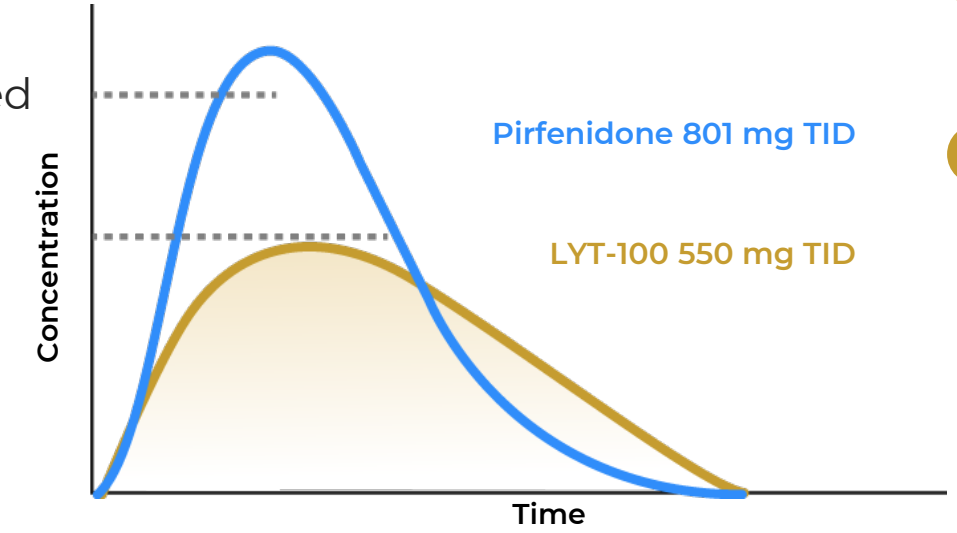
Potential advantages with pirfenidone's de-risked clinical profile

PIRFENIDONE

- **Clinically validated efficacy**
- Associated with GI AEs
- Higher exposure limited by tolerability







LYT-100

- **Differentiated PK profile while maintaining pharmacology (activity)**
- **Substantially improved adverse event profile[1]**
- **Potential to enhance exposure that could improve efficacy; maximum tolerated dose not determined**

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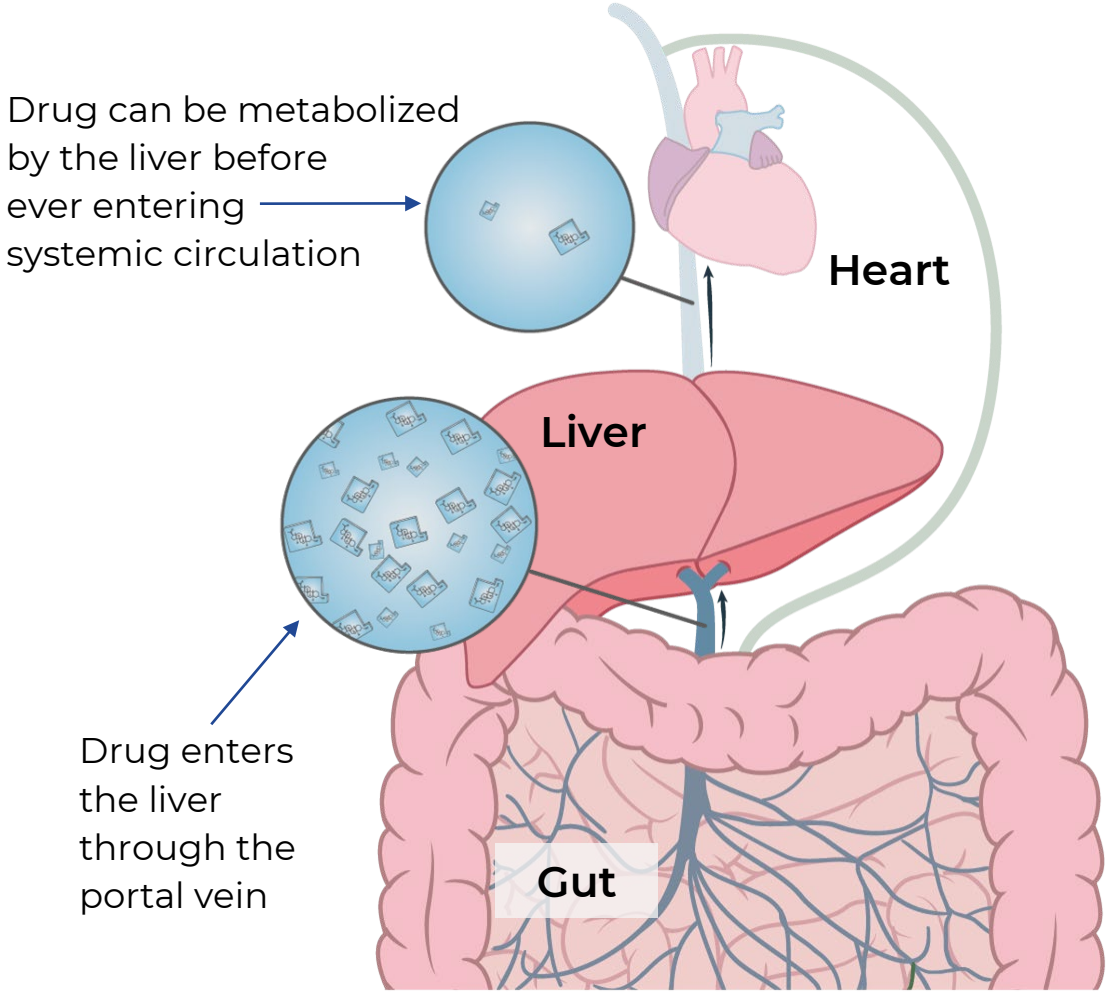
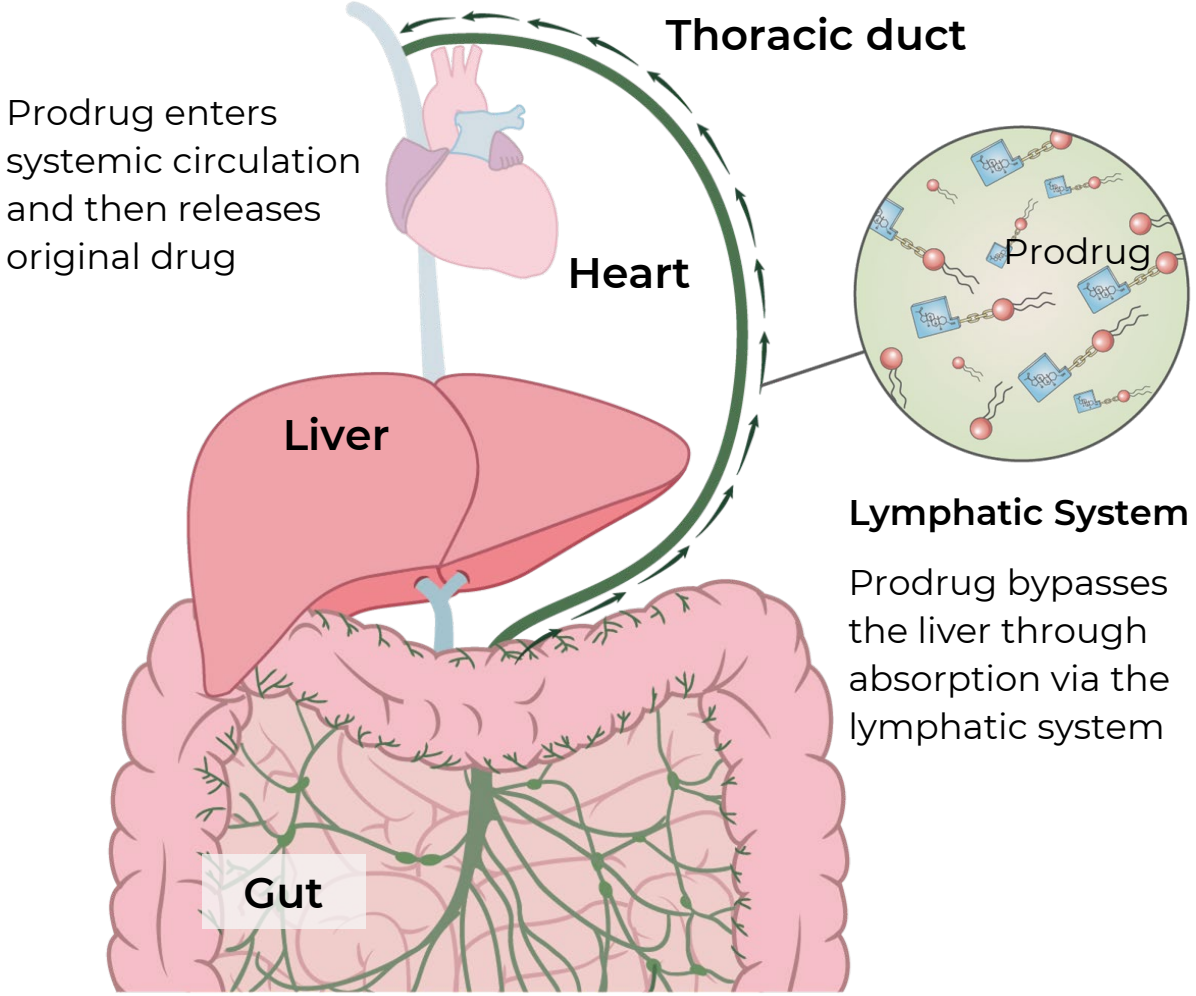
LYT-100 is an investigational drug not approved by any regulatory authority.
[1] Based on healthy older adult crossover trial.

Glyph™: PureTech's Lymphatic-Targeting Chemistry Platform

Conventional oral drug transport



Glyph oral drug transport via the lymphatic system



LYT-300 for Patients With Mental Health Conditions

Oral allopregnanolone for anxiety and mood disorders

Topline data from the Phase 2a POC trial in HV for anxiety by YE 2023

COMMON & DEBILITATING

Anxiety

- Generalized anxiety disorder (GAD) impacts **6.8 million adults**
- Social anxiety disorder affects **15 million** adults
- Panic disorder impacts **6 million** adults[1]

Mood Disorders

- **~9.6%** of adults are affected by mood disorders in a lifetime globally[2]

UNMET MEDICAL NEED

Standard of care treatments can have **mixed efficacy, delayed onset of action and poor tolerability**

Despite drawbacks, global anxiety disorders and depression treatment market size is expected to be ~$20B in 2023[3]

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[1] Anxiety & Depression Association of America Anxiety Disorder Facts and Statistics; [2] Zachary Steel and others, The global prevalence of common mental disorders: a systematic review and meta-analysis 1980–2013, *International Journal of Epidemiology*, Volume 43, Issue 2, April 2014, Pages 476–493, https://doi.org/10.1093/ije/dyu038; [3] Yahoo! Finance: Anxiety Disorders And Depression Treatment Market Size & Share Analysis - Growth Trends & Forecasts (2023 - 2028).

LYT-300: Potential First-in-Disease Therapy for FXTAS

PureTech awarded up to $11.4M grant to support Phase 2 trial with leading FXTAS experts

Awarded up to $11.4M from the DoD to advance LYT-300 for FXTAS

LATE ONSET & DEVASTATING

Fragile X-associated Tremor/ Ataxia Syndrome

- Rare disease & late onset condition in otherwise healthy adults
- Closely related to, but distinct from, fragile X syndrome (FXS); both conditions are the result of repeated elements in the *FMR1* gene
- Occurs in **up to 75%** of males and **~16%** of females with the *FMR1* premutation by 80 y.o.[1]
- Clinical signs, including tremor, balance problems and cognitive decline, typically adult-onset
- Carriers are common: **1 in 400** men, **1 in 150-200** women

UNMET MEDICAL NEED

Currently, there are **no primary treatments** for FXTAS

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[1] National Fragile X Foundation: Prevalence of FXTAS; *FMR1* = Fragile X Messenger Ribonucleoprotein Gene 1.

LYT-310: Potential to be Highly Differentiated in Epilepsies & Other Neurological Indications

Initiation of Phase 1 trial expected in 4Q 2023

Epilepsies

- **~3 million** adults and 470,000 children are affected by epilepsy in the U.S.[1]
- 20-33% of patients with epilepsy have drug-resistant epilepsy[2]

UNMET MEDICAL NEED

Despite the many approved antiseizure medications, there is a need for **safer adjunctive treatments in refractory patients**

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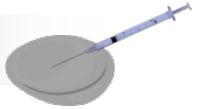
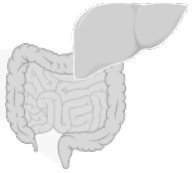
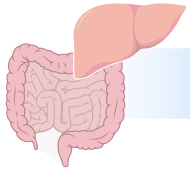
[1] Zack MM, Kobau R. National and state estimates of the numbers of adults and children with active epilepsy — United States, 2015. *MMWR*. 2017;66:821–825. DOI: 10.15585/mmwr.mm6631a1; [2] Source: Epilepsy Foundation.

LYT-310: Oral CBD A Highly Differentiated Profile For Broad Application

	APPROVED CBD ORAL SOLUTION		PURETECH'S LYT-310
Target Population	1 yr+, Primarily Children		 1 yr+, Primarily Teens/Adults Pediatric form planned with target down to 1 year old
Target Indications	Approved in US for 3 Rare Epilepsies Approved in US and EU for Lennox-Gastaut syndrome, Dravet syndrome, or tuberous sclerosis complex		Epilepsies & Other CNS Indications Exploring range of rare and more common forms of epilepsy as well as other CNS disorders
Dosing	Large Volume of Oily Solution Administered via syringe twice per day		 Capsules & Other Flexible Routes Capsule dosage form plus water-based emulsion planned for pediatric patients
Side Effects	Diarrhea, Elevated Liver Enzymes		 Potential for Reduced Side Effects ...due to lower dose to GI & liver, a result of bypassing first-pass metabolism in liver
Manufacturing	Complex, Nonstandard Manufacturing Processed from extraction of cannabis plant		 Standard Manufacturing Standard pharmaceutical manufacturing techniques

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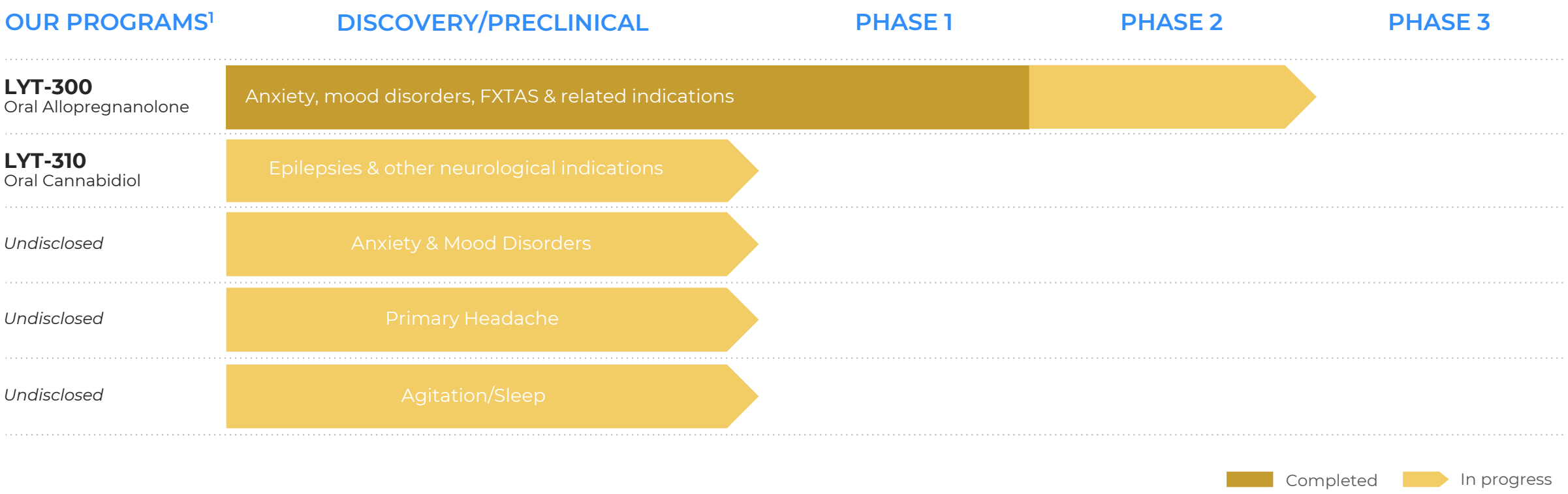
LYT-310 is an investigational drug not approved by any regulatory authority.

Glyph Generated CNS Therapeutic Pipeline

Multiple value drivers and robust pipeline



Glyph™ technology platform is an engine to generate future therapeutic candidates

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[1] The FDA and corresponding regulatory authorities will ultimately review our clinical results and determine whether our wholly-owned therapeutic candidates are safe and effective. No regulatory agency has made any such determination that our wholly-owned therapeutic candidates are safe or effective for use by the general public for any indication.

Key Value Drivers

Multiple clinical milestones expected across Wholly Owned Programs

THERAPEUTIC CANDIDATE[1]		MILESTONES	
LYT-100	Deupirfenidone	✓ Initiation of registration-enabling trial in IPF	1H 2022
		Results from registration-enabling trial in IPF	2024
LYT-200	Anti-Galectin-9 MAb	✓ **Data from Phase 1 single agent cohorts in solid tumors**	YE 2022
		✓ Initiation of Phase 1b clinical trial in acute myeloid leukemia	YE 2022
		✓ Initiation of Phase 1b combination cohorts in solid tumors	1Q 2023
		Initial results from a subset of patients from Phase 1b clinical trial in AML	YE 2023
LYT-300	Oral Allopregnanolone	✓ **Results from the first objective of multi-part Phase 1 program**	2Q 2022
		✓ **Completion of the multi-part Phase 1 program**	YE 2022
		✓ Initiation of Phase 2a using a validated clinical model of anxiety in healthy volunteers	1H 2023
		Results from Phase 2a using a validated clinical model of anxiety in healthy volunteers	YE 2023
LYT-310	Oral Cannabidiol	Initiation of clinical trial	4Q 2023

B Key anticipated milestones are **bolded**

✓ Indicates completed milestone

Wholly Owned Programs Consist of 4 Therapeutic Candidates[1] in Addition to Technology Platforms

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Q&A

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