ONWARD

EMPOWERING MOVEMENT

Company Deck

March 2024

Forward Looking Statements

This Presentation may include statements, including the Company's financial and operational medium-term objectives, that may be deemed to be "forward-looking statements". These forward-looking statements may be identified by the use of forward-looking terminology, including the terms " believes"," aims"," forecasts"," continues"," estimates"," plans"," projects"," anticipates"," expects"," intends"," may"," or " or, in each case, their negative or other variations or comparable terminology, or by discussions of strategy, plans, objectives, goals, future events or intentions. Forward-looking statements may and often do differ materially from actual results. Any forward-looking statements reflect the Company's current view concerning future events and are subject to risks relating to future events and other risks, uncertainties, and assumptions relating to the Company's business, results of operations, financial position, liquidity, prospects, growth, or strategies. Forward-looking statements speak only as of the date they are made.

Company Overview

ONWARD® at a Glance

Key Facts

- Founded in 2015
- ~100 FTEs
- HQ in Eindhoven, the Netherlands
- Science and Engineering Center in Lausanne, Switzerland
- US office in Boston, Massachusetts
- IPO 2021, Euronext Brussels and Amsterdam
- Followed by Bryan, Garnier & Co, Degroof Petercam, Kepler Cheuvreux and KBC Securities

Technology - 2 purpose-built neuromodulation platforms that stimulate the spinal cord via implantable (ARC$^{IM®}$) or external (ARC$^{EX®}$) technologies

Innovation - 10 FDA Breakthrough Device Designations and 240+ issued patents[1]

Clinical Success - One pivotal study completed with **positive top line results** reported for ARC^{EX}; **positive interim results** also reported for ARC^{IM} blood pressure indication

Market Opportunity - Large total addressable market ($20B+ / €19B) with limited competition

Commercialization - ONWARD expects to launch its first product and realize its **first revenues in 2H 2024**

Note: 1 EUR = 1.1 USD; FTE and patent figures as of end of Q4 2023
[1] Includes EP country validations

There are no cures nor effective therapies for spinal cord injury (SCI)

Unmet Need

Devastating

Not only paralysis & loss of sensation; frequently also infection, incontinence, blood pressure instability, loss of sexual function, and other challenges

Assistance required to support activities of daily life

Quality of life can be poor

Prevalent

US & Europe[1,2]
Prevalence ~650,000
Incidence ~50,000

Global[2]
Prevalence ~7,000,000
Incidence ~768,000

Costly

Avg Lifetime Cost[3] (paraplegic)
$2.9M / €2.6M

Avg Lifetime Cost[3] (tetraplegic)
$5.1M / €4.6M

Note: 1 EUR = 1.1 USD
[1] NSCISC Annual Report, US and Europe only. World Health Organization Fact Sheet, November 2013, estimate 40-80 cases per million
[2] Kumar et al. 2018, Traumatic Spinal Injury: Global Epidemiology and Worldwide Volume
[3] NSCISC Traumatic Spinal Cord Injury Facts and Figures at a Glance (2023 SCI Data Sheet); estimated lifetime costs for a person aged 25 at the time of injury with injury severity AIS ABC; costs for a tetraplegic person calculated as the average cost for a person with high tetraplegia and a person with low tetraplegia

Our Technology

Targeted, programmed electrical stimulation of the spinal cord to restore movement, function, and independence in people with spinal cord injury

ARC EX®

ARC IM®

Note: Investigational devices, not available for commercial use

Company Focus

Reach commercial stage by year-end, then expand labeling and platforms

Short Term
2024

Commercialize external platform (ARC^{EX})

First indication: Upper Limb

Population: SCI

Generate revenue and develop market for ARC^{IM}

Medium Term
2026

Commercialize implantable platform (ARC^{IM})

First indication: Blood Pressure

Population: SCI

Enter traditional medtech IPO/M&A window

Long Term
2026+

Expand labeling and platforms

New indications and platforms to be assessed such as BCI

Populations: SCI, Parkinson's, Stroke

Note: Investigational devices, not available for commercial use; SCI = Spinal Cord Injury

2024 comprises key value inflection points for ONWARD

2024 Strategic Priorities

2024

ARC^{EX} commercial launch (upper limb)

- FDA De Novo request submission – 1H 2024
- FDA clearance
- First commercial sale

ARC^{IM} pivotal study first participant enrollment (blood pressure)

- IDE submission
- IDE approval
- First participant enrollment

ARC IM BCI

Continue clinical studies[1] and strengthen unique position in BCI field (upper limb and mobility)

Today

Note: Investigational devices, not available for commercial use

[1] Funded by European Innovation Council and Christopher & Dana Reeve Foundation grants

Current Pipeline

9 indications under clinical or pre-clinical evaluation, with 3 in current roadmap

Short and medium term focus Funded primarily through grants and research partners

Platform	Indication	FDA BDD[1]	Pre-clinical	Human PoC	Clinical Feasibility[2]	Pivotal
ARC^{EX}	Upper Limb	✓	○			○
ARC^{IM}	Blood Pressure	✓	○		○	
ARC^{IM}	Mobility / Second Indication	✓	○		○	
ARC^{EX}	Mobility	✓	○	○		
ARC^{IM}	Parkinson's – Mobility		○	○		
ARC^{IM}	Bladder	✓	○	○ *Human PoC expected in 2024[3]*		
ARC^{IM} BCI	Mobility	✓	○	○		
ARC^{IM} BCI	Upper Limb		○	○		
ARC^{DBS}	Mobility		○	○		

✓ BDD[1] Granted ○ Current Roadmap ○ Label Expansion ○ Platform Expansion

Note: The company may modify the pipeline based on clinical progress and marketplace considerations
[1] BDD = FDA Breakthrough Device Designation. ONWARD has been granted four additional BDDs for ARC^{EX} Bladder, ARC^{EX} Blood Pressure, ARC^{EX} Spasticity and ARC^{IM} Spasticity
[2] Includes both early feasibility (typically before device design finalized) and feasibility (near-final or final device design) studies
[3] Funded by Christopher & Dana Reeve Foundation grant

Technology and Evidence

ARC EX

First indication: Strength and function of the hands and arms

External system for non-invasive, programmed stimulation of the spinal cord

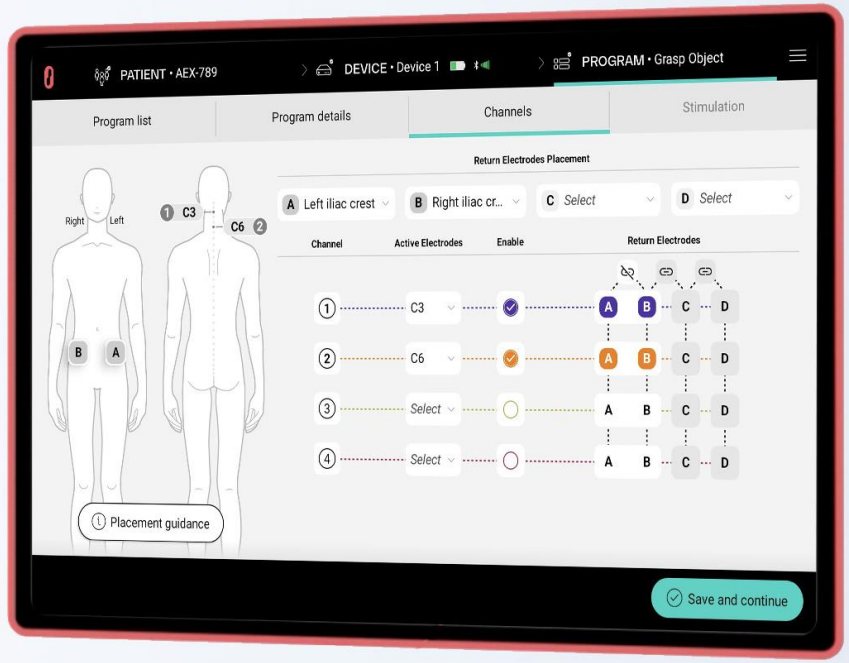
External Platform

ARC$^{EX®}$ Therapy

Programmed transcutaneous electrical stimulation to the spinal cord

Designed to restore movement, function, and independence in people with SCI

ARC$^{EX®}$ Stimulator



ARC$^{EX®}$ PRO & myARC$^{EX®}$ app

via ARC$^{EX®}$ Programmer

ARC$^{EX®}$ Therapy

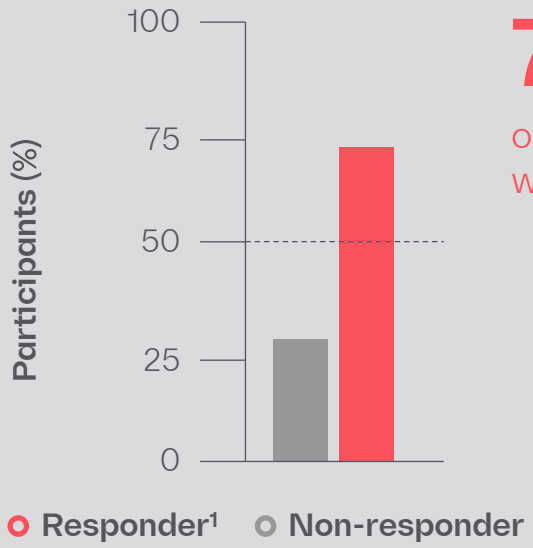
Individual stimulation parameters can be optimized for each patient's unique needs

Note: For investigational use only

The study met both primary safety and effectiveness endpoints

UP-LIFT

Pivotal Study



72%

of participants were responders[1]

Primary effectiveness endpoint: Defined as majority of the subjects experienced clinically significant improvement in selected strength and functional performance metrics

Primary safety endpoint: Defined as the incidence of serious adverse events (SAEs) related to the use of ARC^{EX} Therapy

Key takeaways

- **65 participants enrolled at 14 leading research sites**
- Announced completion of enrollment in December 2021
- Reported positive topline results in September 2022
- Study **met both primary** safety and effectiveness **endpoints**
- Up-LIFT pivotal study manuscript **publication expected in 1H 2024** in peer-reviewed top-tier scientific journal
- FDA De Novo request **submission expected in 1H 2024**

Note: For investigational use only; presented at the American Academy of Neurology Annual Meeting, April 2023
[1] Responders defined as participants who met or exceeded the minimally important difference criteria for at least one outcome of the strength domain and at least one outcome of the functional performance domain (43/60)

Manuscript under review, 2024

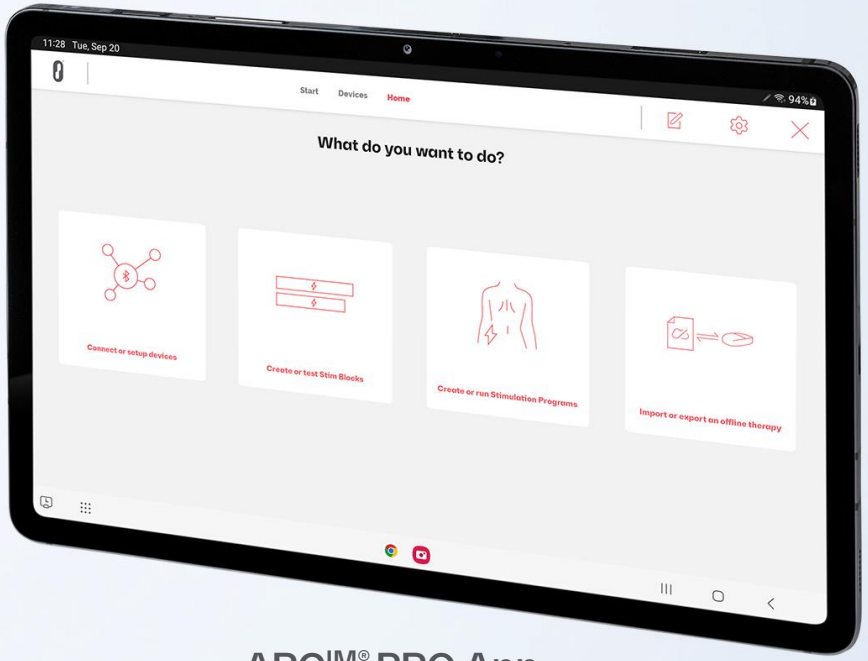
First indication: Improved blood pressure regulation

IPG and leads for direct, programmed stimulation of the spinal cord

Implantable Platform

ARC[IM]® Lead Family

myARC[IM]® App
via ARC[IM]® Controller



ARC[IM]® PRO App
via ARC[IM]® Programmer

ARC[IM]® Neurostimulator (IPG)

ARC[IM]® Hub

Note: For investigational use only; IPG = Implantable Pulse Generator

Prioritizing highly commercially viable therapy as first indication

Blood Pressure Indication

ONWARD is pursuing a therapy for **hemodynamic instability**:

- **High commercial viability**
- Cardiac dysfunction is **leading cause of death** among people with SCI[1]
- **Highly prevalent**, affecting almost 75% of people with SCI (nearly 500,000 people in the US & Europe)
- Now includes **Orthostatic Hypotension** (OH) and **Autonomic Dysreflexia** (AD); expansion of pivotal study scope to include AD expected to result in **increased awareness and clinical acceptance**

nature

DARPA

Validation

Paper detailing our approach was published January 2021

ONWARD and partners receiving up to $36M grant

[1] *Grigorean et al, J Med Life, 2009*

ARC^{IM} Interim Blood Pressure Results

Reported December 2022, 10 participants across studies in Canada and Switzerland

Summary Results

- All participants had **increased blood pressure** with stimulation
- All participants who were on anti-hypotensive medication **reduced dosage or stopped medication completely**
- All participants reported **reduction of orthostatic hypotension** in daily life, feeling more energized and less dizzy
- Partners report **higher levels of energy and increased participation in social interaction**, during meals and family time
- All participants **use stimulation actively** in daily life, several during the entire waking day (>10h per day)
- **Quality of Life improved in all participants**

"My outlook on life has become more positive. I feel more awake and less tired and dizzy. I have a lot more appetite for life" [1]

Publication of peer-reviewed interim results for blood pressure indication expected in top-tier scientific journal in 2024

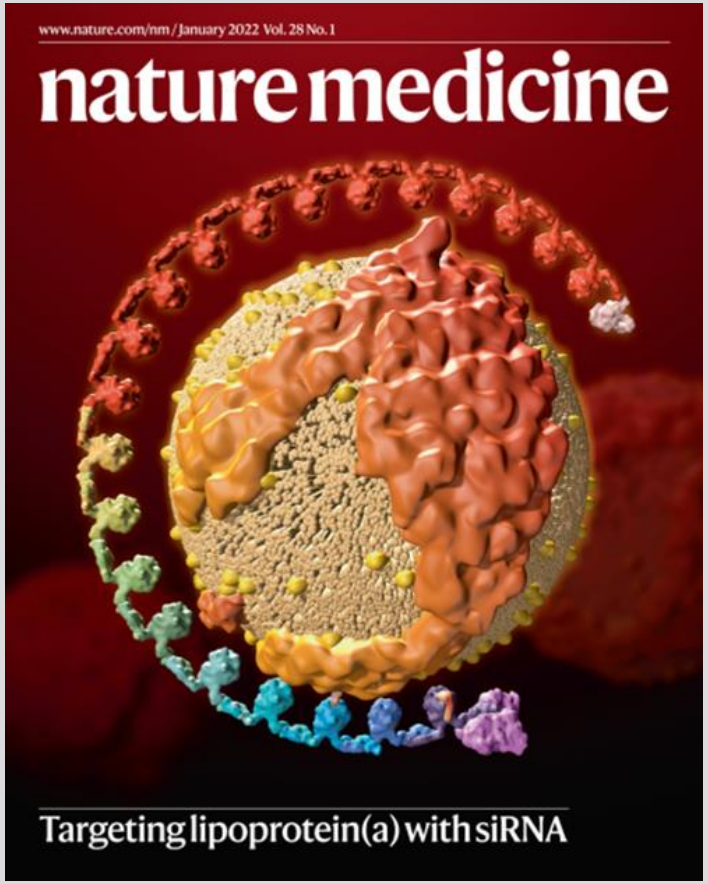
Note: For investigational use only

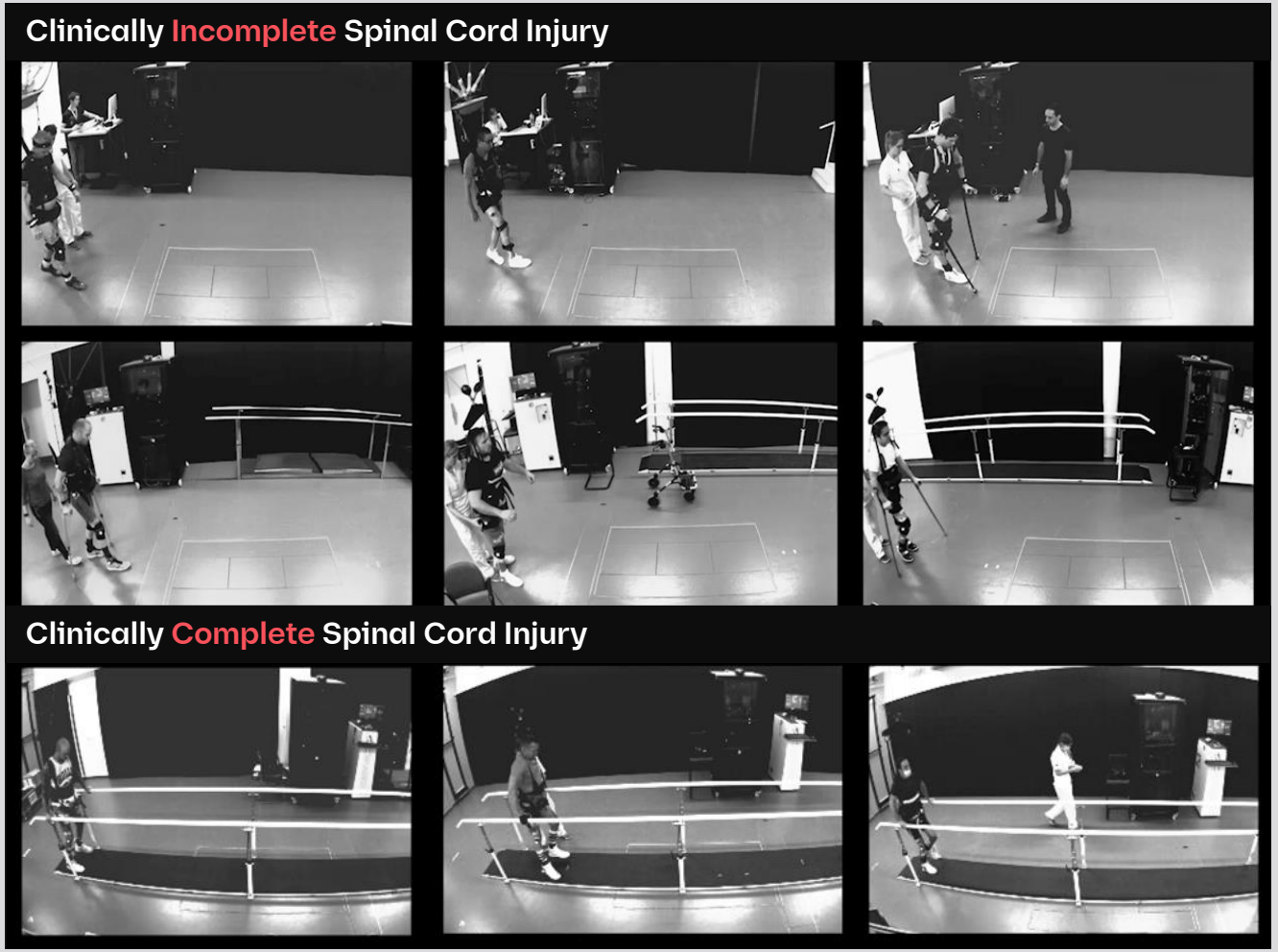
[1] *Comment reflects the experience of a single study participant and should not be extrapolated to reflect study results nor claims.*

Next indication: Standing and walking

Mobility - STIMO Trial

Ability to stand and walk restored in 9 participants with chronic injuries; even those with AIS-A severity





ClinicalTrials.gov Identifier: NCT02936453

Note: For investigational use only

ARC BCI

First indication: Mobility or Upper Limb

ARC-IM® BCI

Think

An intention to move originates in the brain.

Decode

The brain-computer interface uses AI to decode that intention.

Move

The ONWARD® ARC-IM® platform converts that decoded information into precise stimulation of the spinal cord, resulting in thought-driven movement.

ONWARD

ONWARD is strategically well positioned to benefit from advances in BCI technology

Brain Computer Interface (BCI)

BCI landscape

- Multiple companies racing to develop implanted **brain recording devices**
- All these companies are focused on recording brain signals to establish the capability to **control computers with thought**

NEURALINK synchron Precision

Blackrock Neurotech Paradromics Science

ONWARD differentiation

- Advancing BCI technology to **restore movement of the human body** using our ARC^{IM} spinal cord stimulation therapy
- ARC^{IM} platform is **"BCI-ready"** (i.e. designed to receive wireless signals from a BCI)
- Unique capabilities and flexible technology platform means ONWARD could eventually **partner with other BCI companies or develop its own BCI using in-licensed technology**

Note: For investigational use only

ONWARD has already achieved several groundbreaking BCI milestones

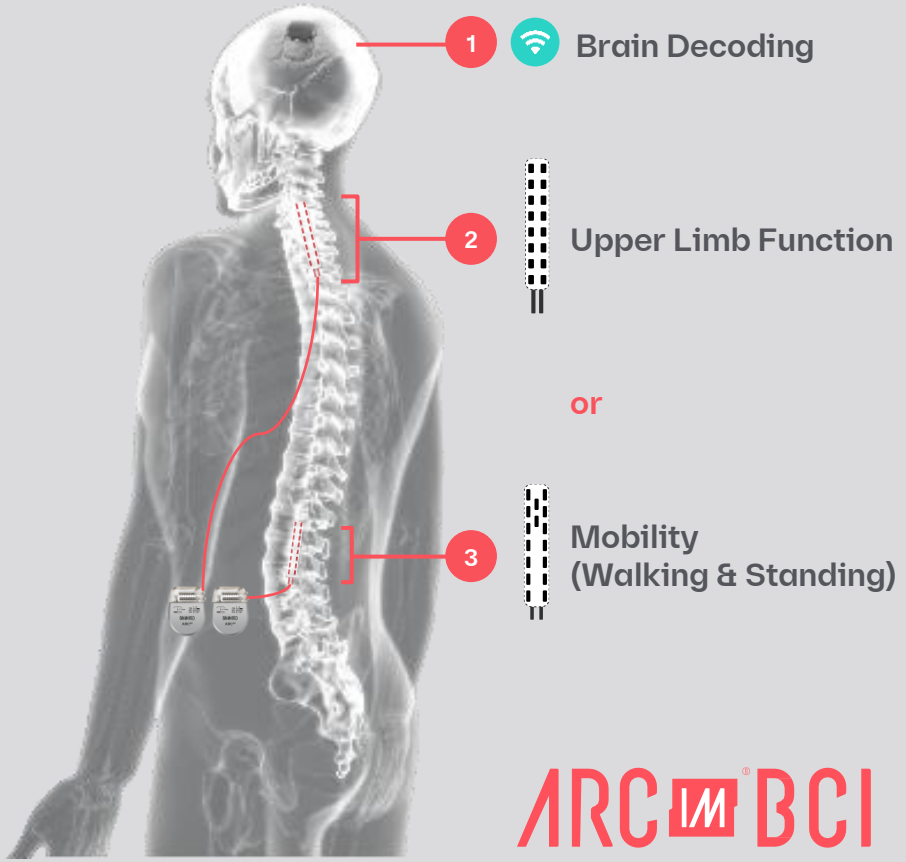
BCI Achievements

Achievements

- In conjunction with EPFL and CEA-Clinatec, **successfully implanted humans with investigational BCIs** to facilitate mobility (walking) in 2021 and upper extremity movement in 2023
- Approach **published in Nature**, May 2023
- Awarded **European Innovation Council and Christopher & Dana Reeve Foundation grants** to study BCI technology in at least eight additional humans to recover hand/arm function and mobility
- Awarded **FDA Breakthrough Device Designation (BDD)** to restore thought-driven lower limb mobility after SCI
- Accepted to **FDA's new TAP Program**, providing early and frequent strategic engagement from the FDA, patients, providers and payers
- **Exclusive license to BCI IP** from EPFL

Next steps

Additional implants expected for upper limb and mobility indications in 2024



ARC IM® BCI

Note: For investigational use only; TAP = Total Product Lifecycle Advisory Program

BCI activities provide opportunity for brand and awareness building

BCI Media Coverage

Upper Limb

FOX NEWS

Progress for paralyzed patients: First implanted device is placed to restore arm, hand and finger movement

engadget

The ARC nerve-stimulation system could help quadriplegic patients move their arms again

CNN

AI implants help paralyzed patient move arms, hands

BARRON'S

Brain implants could restore paralyzed patients' arm movements

KANAAL Z

BEKIJK – Uitzending Z-Nieuws woensdag

+MASS DEVICE

How Onward uses spinal cord stimulation — and perhaps BCI — to restore movement

Mobility

abcNEWS

Artificial intelligence used in medical procedure to help paralyzed man walk

CNN

Paralyzed man able to walk again with brain and spine implants

The Washington Post

A Paralyzed Man Walks with Brain and Spine Implants

The New York Times

Brain Implants Allow Paralyzed Man to walk Using His Thoughts

NBC NEWS

Brain and spine implants enabled a paralyzed man to climb stairs and walk on rough terrain, study shows

BBC

Brain implants help paralyzed man to walk again

Documentaries

Bloomberg

Progress for paralyzed patients: First implanted device is placed to restore arm, hand and finger movement

CNN

AI implants help paralyzed patient move arms, hands

Other Mentions

Bloomberg

Elon Musk's Neuralink performs its first human implant

abcNEWS

Elon Musk's Neuralink implants brain chip into human brain

USA TODAY

Musk touts Neuralink's first patient as a big step. Experts say it's part of long legacy

Daily Mail

Rage against the machine: Americans warn Elon Musk to 'stop creating cyborgs' after he revealed the first human has had Neuralink's brain chip

DE TIJD

Wat zit er in De 7 vandaag?

Note: For investigational use only

ARC Therapy Evidence

Increasingly robust evidence and visibility to clinical outcomes across both platforms and multiple indications

	Indication	Key Takeaways		
ARC EX	**SCI Upper Limb (n=121)** ○ 10 pilot studies[1] (n=56) ○ Up-LIFT pivotal study (n=65) ○ LIFT Home (n=17)	Statistically significant improvement in strength and function	Supporting safe use in home setting	No device related serious adverse events
ARC IM	**SCI Blood Pressure (n=15)[3]** ○ Squair et al 2022[4] (n=1) ○ STIMO-HEMO: unpublished, ongoing (n=6) ○ HemON CH: unpublished, ongoing (n=7) ○ HemON NL: unpublished, ongoing (n=1)	Reduced orthostatic hypotension and improved quality of life	Optimal stimulation location confirmed (hemodynamic hotspot)	ONWARD IPG (n=8) and lead (n=4) successfully implanted
	SCI Mobility (n=12)[5] ○ STIMO study (n=10); Wagner et al 2018[6] ○ Includes BCI study (n=1); Lorach et al 2023[7] ○ BoxSwitch: unpublished, ongoing (n=1)	Recovery of standing, walking and other activities	Neurological recovery persists even without EES[2]	Closed-loop control through brain interface appears promising
	Parkinson's Disease Mobility[8] (n=2) ○ STIMO-PARK (n= 2); Milekovic et al.[9]	Improved balance and reduced falls[10]	Reduced freezing of gait	Improved walking endurance and symmetry

Visibility to clinical outcomes available for both ARC^{IM} and ARC^{EX} technology platforms (as of 30 January 2024)

Note: For investigational use only

[1] Not all pilot studies investigated upper extremity function, [2] EES = Epidural electrical stimulation, [3] Positive interim results released in December 2022, [4] Squair et al. N Engl J Med 2022, [5] One participant implanted in both STIMO and BCI study and one participant implanted in both STIMO and BoxSwitch study, [6] Wagner et al. Nature 2018, [7] Lorach et al. Nature 2023, [8] Rowald et al. Nat Med 2022, [9] Milekovic et al. Nat Med 2023, [10] Based on findings for 1 patient ,

Commercial

Current pipeline indications and potential pipeline opportunities

Total Addressable Market

	Indication	Injury severity / level	US & EU eligible population[1]	Total addressable market[2]
Current roadmap				
ARC EX	**Upper Limb**	AIS B-D / lesion C2 - C8	199,000* 34% of SCI cases[1]	$6.0B / €5.5B
ARC IM	**Blood Pressure**	AIS A–D / lesion C3 – T6	215,000 37% of SCI cases[1]	$7.3B / €6.6B
ARC IM	**Mobility**	AIS B-D / lesion C3 - T10	222,000 38% of SCI cases[1]	$7.6B / €6.9B
Potential future indications				
ARC EX ARC IM ARC IM BCI	**Potential future indications[3]**		~3,845,000** Prevalence	~$120B / ~€110B
			>4,000,000**	>$140B / ~€130B

* Primarily driven by home use opportunity (vs. clinic use)
**Patients may benefit from more than one therapy (e.g. Blood Pressure and Upper Limb function)

Note: 1 EUR = 1.1 USD

[1] *Company data, epidemiology data from 2022 NSCISC Annual Statistical Report Complete Public Version*
[2] *Assumes pricing in alignment with value in comparison to existing rehabilitation therapies*
[3] *Includes a selection of potential future indications for ARC^{EX} (Bladder, Stroke Mobility and Stroke Upper Limb), ARC^{IM} (Bladder, Cervical and Parkinson's Mobility) and ARC^{IM} BCI (Mobility and Cervical)*

High Awareness and Pent-Up Demand

Enthusiasm from leading patient advocacy organizations and eagerness from SCI community

What they are saying...

CHRISTOPHER & DANA REEVE FOUNDATION
TODAY'S CARE. TOMORROW'S CURE.®

"Functional recovery once deemed impossible may now be in reach"

Marco Baptista, Ph.D.
Chief Scientific Officer
Christopher & Dana Reeve Foundation

FGQ Fördergemeinschaft der Querschnittgelähmten in Deutschland e.V.

"I have been following this closely for over 20 years, nothing like this has been brought to the clinical setting"

Kevin Schultes
Chairman of the Executive Board
German Spinal Injuries Association (FGQ)

WINGS for LIFE

"This is our most visible success!"

Anita Gerhardter
CEO
Wings for Life

Strong relationships with **leading patient advocacy organizations** to drive awareness and market access

2500+ people with SCI or their family members have reached to ONWARD to inquire about our therapies since 2020

Commercial Strategy

Pursue highly concentrated customer base with direct field organization

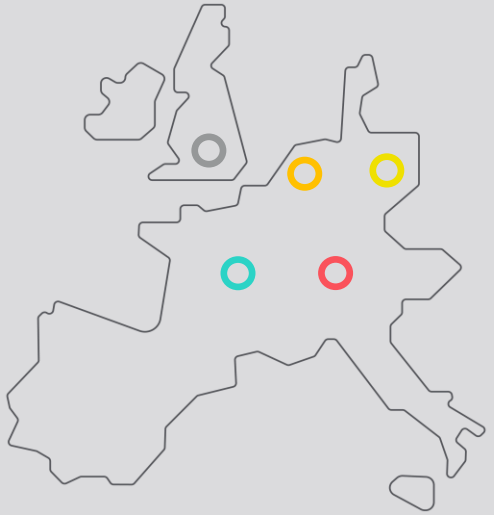
Call Points

~330

(2023)

US

Europe



Geographical focus

US and select European markets with sophisticated neurorehabilitation infrastructure, clinical partnerships, and/or favorable reimbursement for medical innovation

~250

Tier 1 and Tier 2 specialist rehab centers

Initial focus: ~50 Tier 1 accounts including VA SCI hub centers, Up-LIFT investigational sites and other US flagship SCI clinics

Sales force deployment: Expect to start with 6-10 Sales Reps in first year of sales

~80

Specialist rehab centers

Initial focus: ~30 accounts including DMGP member paraplegia centers in Germany, chiefly BG SCI Kliniks

Sales force deployment: Expect to start with 2-5 Sales Reps in Europe and UK

Source: Company estimates

Reimbursement pathways open immediately upon commercial launch

Economics

US

ARC EX® Initially target Veterans Affairs beneficiaries, Workers' Compensation opportunities, and self-pay market to establish pricing history, while capturing real-world data to support pursuit of new CMS HCPCS code.

CMS has indicated its desire to identify an accelerated path to coverage for Breakthrough therapies (TCET).

ARC IM® Apply for new Category III CPT code to facilitate billing from day 1, with evidence generation plan to build case for new Category I code over time.

Leverage eligibility for incremental payment in outpatient (TPT) and inpatient (NTAP) settings in interim.

Breakthrough Designation satisfies "substantial clinical improvement" for outpatient (TPT) and inpatient (NTAP) add-on payments and "newness" requirements for NTAP.

Europe

Initial plan to commercialize in **Germany, UK, France, Netherlands, and Switzerland**; focus will be on clinic vs. home sales. Target markets selected based on reimbursement environment for new technologies and sophistication of SCI rehabilitation infrastructure.

In largest European market (Germany), diagnosis (ICD) and procedural (OPS) codes are in place for planned indications, and a pathway exists to negotiate supplemental fee to cover ARC^{IM} procedure at a rate commensurate with the new, differentiated procedure.

Note: CMS = Centers for Medicare and Medicaid Services ; CPT = Current Procedural Terminology ; HCPCS = Healthcare Common Procedure Coding System ; NTAP = New Technology Add-on Payment ; TCET = Transitional Coverage for Emerging Technologies ; TPT = Transitional Passthrough payment

Phased targeting approach: Establish foothold and pricing history, while generating required evidence for CMS

ARC^{EX} US Payor Strategy and Timeline

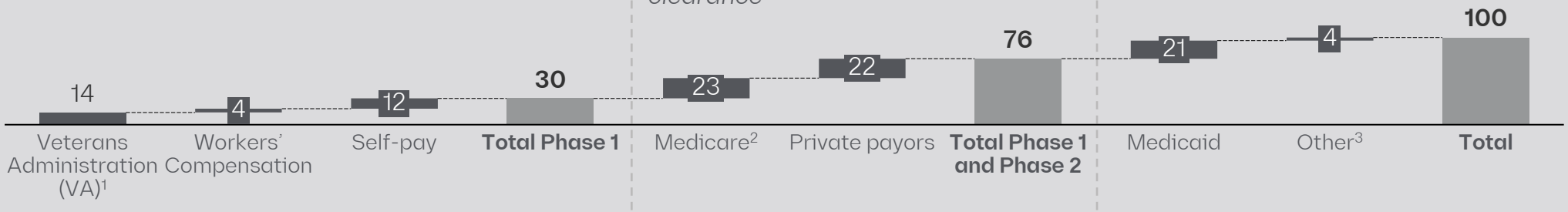
Targeting timeline

Phase 1: Establish foothold — *Year 1; immediately upon FDA clearance*

Phase 2: Expand reach — *Years 2 to 4 post-FDA clearance*

Phase 3: Continue growth — *Year 5+ post-FDA clearance*

SCI covered lives (est.), %



Payor types and rationale

- **VA**: access soon after FDA clearance
- **Workers' Compensation**: access from day 1 through Tier 1 clinic referrals
- **Self-pay**: access from day 1 through Tier 1 clinic referrals and direct to patient/caregiver marketing; leverages individual funding, third party funding, philanthropy, and legal settlements

- **Medicare**: access through CMS coverage decisions benefitting from real-world evidence generated in Phase 1
- **Private payors**: case-by-case basis with coverage for a portion influenced by CMS decisions; some patients could be accessed as early as Phase 1 case-by-case

- **Medicaid**: state administered case-by-case basis, longer process
- **Other**: access challenging; partially uninsured population

CMS = Centers for Medicare and Medicaid Services
Note: Assumes 300k people with SCI in the US, out of which 42k are potential VA patients; assumes primary payor breakdown as per NSCISC 2021 Annual Report 5 years post-injury for remaining 258k non-VA patients; assumes patients who can be accessed through self-pay represent 20% of "private payors" pool, 20% of "workers' compensation" pool, 15% of "Medicare" pool and 5% of "Medicaid" pool.
[1] Includes veterans with SCI who are not currently seen at VA centers but who may be eligible for VA coverage
[2] Medicare covered lives are split 50/50 between fee-for-service (CMS administered) and Medicare Advantage (private payor (MAC) administered). CMS decisions affect coverage for all, but private payors set payment for Medicare Advantage covered lives and are not required to follow CMS payment assignments.
[3] Includes other government, no pay, private funds and other payor categories from NSCISC 2021 Annual Report (may include people uninsured or not covered)
Source: Company estimates; VA; NIH National Center for Biotechnology Information (NCBI); NSCISC 2021 Annual Report

Current competition is standard of care: 3-6 months of rehab followed by costly support for activities of daily life

Competition

ARC EX

ARC IM

Similar Pre-Commercial Technologies

- **Intellectual property** controlled by UCLA and ONWARD
- Limited **funding** raised to date[1]
- **Academic** management teams

No Direct Competitors

Potential future competition from spinal cord stimulators for pain and other existing indications

- Currently **supporting academic research** with existing technology
- **Several years** required to reach parity with ONWARD and market a competing technology
- Likely to **enter space via M&A**, leveraging balance sheets

Medtronic Abbott Boston Scientific

Note: For investigational use only

[1] Less than $4M raised by Company A in private capital as of February 2024 (source: PitchBook); Company B's total funding not sufficiently material to be tracked by PitchBook

Corporate

High-growth market segment with successful peers reaching significant valuations

Neurostimulation Comps

Size

$14.8B

(2030E)

CAGR

12.2%

(2023E – 2030E)

Comparable Companies

Company	HQ	Exit Year	Exit Type	Market Cap ($)	EV/Sales Multiple NTM
Axonics		2024	M&A	**3.7B**	~7.7x
Inspire		2018	IPO	**5.8B**	n/a

Sources: Global News Wire – Vantage Market Research – Global Neurostimulation Devices Market Size for market size and CAGR; BTIG Research & Strategy for Axonics (as of 08 January 2024); Yahoo Finance for Inspire (as of 09 February 2024)

Backed by excellent long-only and specialist investors

Funding

2016

April
RVO Loan & Series A
€36M / $40M

RVO loan of €10M / $11M
Several of Europe's leading life science venture capital firms invested €26M / $29M

EQT Life Sciences
inkef capital
wellingtonpartners
Gimv

2019

October
Series A Extension & NRT Acquisition
€10M / $11M

Series A extension of €5M / $5.5M from existing shareholders
NRT acquisition brought €5M / $5.5M in fresh capital and shareholder relationship with a leading global patient advocacy organization

Christopher & Dana Reeve Foundation
TODAY'S CARE. TOMORROW'S CURE.®

2021

April
Convertible Note
€30M / $33M

All current institutional investors participated with €7M / $8M
New investors contributed €23M / $25M

INVESTNL
Onassis Foundation

October
Initial Public Offering
€80M / $88M

Believed to be the largest early-stage medtech IPO in European history
Outstanding valuation despite weakening market
Very strong book of long-only and specialist investors

AXA
Öhman
Belfius Insurance

Note: 1 EUR = 1.1 USD; IPO funding reflects net proceeds; gross proceeds were €86M prior to exercise of the over-allotment option

Experienced, global management team with the expertise to commercialize

Dave Marver
CEO

Seasoned medical technology executive with 30 years of global experience. Nearly **15 years with Medtronic** in a variety of Vice President roles in the US and Europe. Has served as **CEO of listed companies on NASDAQ and Euronext**; raised over $200M in capital via IPO and private financings; companies have developed three Time Magazine Best Invention awards.

Khaled Bahi
Interim CFO

Former CFO of Symetis, acquired by Boston Scientific in 2017 for $435M. Over 20 years of medtech experience in a variety of finance leadership positions. Former CFO of Stilla Technologies in France and former finance leader for Fresenius in France, Europe, Middle East, and Africa. MSc from ETH Zürich.

John Murphy, PhD
CTO

Over 25 years of experience leading the development of active medical implants and neurostimulation devices. Former **Chief Technology Officer for LivaNova** with responsibility for neuromodulation R&D. Also former **VP Engineering for Abbott**, where he was responsible for CRM and neuromodulation R&D; PhD from EPFL.

Erika Ross Ellison, PhD
VP Clinical, Regulatory and Quality

Former **Leader of Abbott Neuromodulation's Clinical function**. Former neuroscience director at Cala Health, a neuromodulation device company. Former **professor of Neurosurgery at Mayo Clinic**. PhD in Neuroscience from Mayo Clinic, BS in Biology and MSc in Molecular Biology from the University of Denver.

Grégoire Courtine, PhD
CSO

PhD in Experimental Medicine and trained in Mathematics, Physics, and Neurosciences. **Professor at EPFL**. Awards include Schellenberg Prize, Rolex Award, Chancellor Award, and Fellowship from the European Research Council. Preeminent researcher with **over 120 publications in top peer-reviewed journals.**

Sarah Moore
VP Global Marketing

Over 20 years of healthcare Marketing, Sales and Business Development experience, including **20+ product launches**. Former **Global Marketing Leader at Nevro**, a neuromodulation company. Nearly 15 years with J&J as Business Unit and Marketing leader. MBA from Duke University.

Bob Odell
VP Operations

Decades of medtech leadership experience including Class II and Class III devices for **hospitals, clinics and home use**. Former **President & COO of Cardiac Insight** and former **COO of Cardiac Science**. Leadership roles with **GE Healthcare, Siemens, Philips and Medtronic**.

Several important catalysts expected in 2024

Upcoming Milestones and News Flow

ARC^{EX}
Up-LIFT pivotal study manuscript publication
Upper limb

ARC^{EX}
Regulatory clearance submission
Upper limb

ARC^{EX}
FDA clearance
Upper limb

ARC^{EX}
First commercial sale (US)
Upper limb

ARC^{IM}
First participant enrollment[1]
Early feasibility study
Parkinson's mobility

ARC^{IM}
Interim results publication
Blood pressure

ARC^{IM}
IDE submission
Empower BP pivotal study
Blood pressure

ARC^{IM}
IDE approval
Empower BP pivotal study
Blood pressure

ARC^{IM}
First participant enrollment
Empower BP pivotal study
Blood pressure

ARC^{IM}
First-in-human[2]
Bladder

ARC^{IM} BCI
Additional implants[3]
Upper limb and Mobility

Note: All platforms and therapies are for investigational use only
[1] Funded by Michael J. Fox Foundation for Parkinson's Research grant
[2] Funded by Christopher & Dana Reeve Foundation grant
[3] Funded by European Innovation Council and Christopher & Dana Reeve Foundation grants

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