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): August 11, 2021

ATAI LIFE SCIENCES N.V.
(Exact name of registrant as specified in its charter)

The Netherlands	001-40493	Not Applicable
(State or other jurisdiction of incorporation or organization)	(Commission File Number)	(I.R.S. Employer Identification No.)

c/o Mindspace
Krausenstraße 9-10
10117 Berlin, Germany
(Address of principal executive offices) (Zip Code)

+49 89 2153 9035
(Registrant's telephone number, include area code)

N/A
(Former Name or Former Address, if Changed Since Last Report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ 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))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common Stock, €0.10 par value per share	**ATAI**	**The Nasdaq Global Market**

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company ☒

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 7.01. Regulation FD Disclosure.

ATAI Life Sciences N.V. (the "Company") from time to time presents and/or distributes to the investment community at various industry and other conferences slide presentations to provide updates and summaries of its business. On August 11, 2021, the Company posted an updated corporate slide presentation in the "Investors" portion of its website at *www.atai.life*. A copy of its current corporate slide presentation is attached to this Form 8-K as Exhibit 99.1. The Company undertakes no obligation to update, supplement or amend the materials attached hereto as Exhibit 99.1.

The information contained in Item 7.01 of this Form 8-K (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 provided by specific reference in such a filing.

Item 9.01. Financial Statements and Exhibits.

(d) Exhibits

The following Exhibit 99.1 relating to Item 7.01 shall be deemed to be furnished, and not filed:

Exhibit No.	Description
99.1	Corporate Slide Presentation of ATAI Life Sciences N.V. dated August 2021
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.

ATAI LIFE SCIENCES N.V.

Date: August 11, 2021

By: /s/ Florian Brand
Florian Brand
Chief Executive Officer

atai
LIFE SCIENCES

Healing mental health disorders so that everyone everywhere can live a more fulfilled life.

Company Overview

Disclaimer

This presentation may include forward-looking statements. All statements other than statements of historical facts contained in this presentation, including statements regarding our future results of operations and financial position, industry dynamics, business strategy and plans and our objectives for future operations, are forward-looking statements. These statements represent our opinions, expectations, beliefs, intentions, estimates or strategies regarding the future, which may not be realized. In some cases, you can identify forward-looking statements by terms such as “may,” “will,” “should,” “expects,” “plans,” “anticipates,” “could,” “intends,” “targets,” “projects,” “contemplates,” “believes,” “estimates,” “predicts,” “potential” or “continue” or the negative of these terms or other similar expressions that are intended to identify forward-looking statements. Forward-looking statements are based largely on our current expectations and projections about future events and financial trends that we believe may affect our financial condition, results of operations, business strategy, short term and long-term business operations and objectives and financial needs. These forward-looking statements involve known and unknown risks, uncertainties, changes in circumstances that are difficult to predict and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statement. Moreover, we operate in a very competitive and rapidly changing environment. New risks emerge from time to time. It is not possible for our management to predict all risks, nor can we assess the impact of all factors on our business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in any forward-looking statements we may make. In light of these risks, uncertainties and assumptions, the forward-looking events and circumstances discussed in this presentation may not o results could differ materially and adversely from thos implied in the forward-looking statements. We caution you relying on these forward-looking statements, and we c forward-looking statements by these cautionary statements

The forward-looking statements included in this presentatio as of the date hereof. Although we believe that the expecta the forward-looking statements are reasonable, we canno the future results, levels of activity, performance circumstances reflected in the forward-looking statements or occur. Moreover, neither we nor our advisors nor a assumes responsibility for the accuracy and completenes looking statements. Neither we nor our advisors undertake update any forward-looking statements for any reason afte presentation to conform these statements to actual results our expectations, except as may be required by law. You presentation with the understanding that our actual future activity, performance and events and circumstances m different from what we expect.

Unless otherwise indicated, information contained in t concerning our industry, competitive position and the mar operate is based on information from independent indus organizations, other third-party sources and manage Management estimates are derived from publicly avai released by independent industry analysts and other third- well as data from our internal research, and are based

We are a founder-led team aiming to develop diff
for patients suffering from mental health disorder

Christian Angermayer
Founder & Chairman

APEIRON INVESTMENT GROUP
Alnylam PHARMACEUTICALS

Florian Brand
Co-Founder & CE

ROCKETINTERNET
springlane

Lars Wilde
Co-Founder

COMPASS
Navigating Mental Health Pathways
springlane

Greg Weaver
CFO

ELO
Eloxx Pharmaceuticals
Sirna Therapeutics

The atai team has collectively led → 13 **NDAs regula**

Executive Summary and Key Investment Highlight

1. Mental health disorders have become one of largest global health burd exacerbated by the COVID-19 pandemic. Despite the unmet patient ne remain limited, with only 7 new neuropsychiatric drugs approved since

2. As a response to lack of innovation, atai focuses on compounds with pr evidence, including psychedelics whose therapeutic potential has beco recent academic studies and which have benefited from recent regulat

3. Our platform consists of 11 drug development programs and 6 enabling focusing on differentiated and potentially disease-modifying mental hea We intend to continue to grow our platform through acquisitions and inc

4. Our platform approach: Decentralized drug development process, leve team and our enabling technologies such as digital therapeutics to aim safety, efficacy and probability of clinical success across our pipeline.

5. Validation of atai's operating model: IPO of COMPASS Pathways and C partnership with Perception (first drug development partnership betwee and a biopharmaceutical company developing psychedelics).

6. Our pipeline is rich in R&D catalysts over the next 18 months, and we h than 200 highly experienced FTEs / consultants across our platform, ar cash position of approx. $449M[1].

(1) ~$104M cash & cash equivalents as of March 31, 2021 with ~$345M subsequently received in connection with the closing of Series D and IPO

Meaningful R&D catalysts over the next 18 mon news flow, excluding potential for additional bus

Recent Milestones

2021

- Recognify started Phase 2a study in CIAS with RL-007
- Perception closed licensing deal with Otsuka for Japan
- atai entered strategic partnership with IntelGenx
- DemeRx received approval to start DMX-1002 Phase 1/2 in UK
- atai announced successful closing of Series D, raising $157m
- Perception announced positive Phase 1 results with PCN-101
- Empath partnered with Bionomics on PTSD drug development
- atai acquired majority stake in Recognify to develop RL-007 for CIAS
- Launch of Revixia Life Sciences to develop RLS-01
- COMPASS successfully IPO-ed on NASDAQ
- atai launched EmpathBio to develop EMP-01 for PTSD
- atai launched Introspect to develop Digital Therapeutics

Antici

- PCN-
- RL-00
- PCN-
- RL-00
- GRX-
- DMX-
- NN-10
- DMX-
- GRX-
- NN-10
- KUR-

Legend

Notes: FSI = First subject in, SQ = Subcutaneous, IV = Intravenous, BA = Bioavailability

Founded in

As a response to the **s**
innovation in the mer
well as the **emergenc**
have been overlooke
psychedelic compoun

Although mental health has become one of the la challenges, there has been little innovation for pat

SIGNIFICANT BURDEN

~1bn

Affected people

Global population with mental health disorders[1]

>50%

Of US population impacted

Expected that more than half of US population will have a mental health disorder at some point in their lifetime[2]

~$16tn

Global economic impact

Estimated global economic costs of mental health disorders by 2030[3]

~4x

Recent impact of COVID-19

Percentage of US adults experiencing symptoms of depression and anxiety rose from 11% in 2019 to 42% end of 2020[4]

1. Ritchie, “Global mental health: five key insights which emerge from the data”, Our World In Data (2018).
2. Kapil, “5 Surprising Mental Health Statistics”, National Council for Behavioral Health (2019).
3. Patel et al., “The Lancet Commission on global mental health and sustainable development”, The Lancet (2018).
4. Abbott, “COVID’s mental-health toll: how scientists are tracking a surge in depression, Nature (2021)
5. Salzer, “National Estimates o
6. Tew et al., “Impact of prior tre
7. Sinha, ”New Findings on Biol
8. EvaluatePharma (as of 19.03

A resurgence in psychedelic therapies is emerging

modifying drug candidates progress with regulator

1938 — LSD synthesized by Dr. Albert Hofmann at Sandoz research labs[1]

1953 — Psychedelic therapy developed by Dr. Abram Hoffer and Dr. Humphry Osmond, efficacious in treating alcoholics[2]

1960s — Dr. Stan Grof uses LSD to treat heroin addiction in Prague[3]

1965 — Drug Control Amendments forbid the manufacture and sale of psychedelic drugs (scheduling)[4]

> "America's public enemy number one is drug abuse."
>
> **PRESIDENT NIXON, 1971**

Early research suggested efficacy in mental health

Note: LSD = Lysergic acid diethylamide; TRD = Treatment-resistant depression; MDD = Major depressive disorder; PTSD = Post-traumatic stress disorder.

1. Hofmann, MAPS (1996)
2. Dyck, "'Hitting Highs at Rock Bottom': LSD Treatment for Alcoholism" (2006)
3. Williams, "Human Psychedelic Research: A Historical and Sociological Analysis" (1999)
4. FDA, Drug Law History (2018)
5. Griffiths et al., "Psilocybin pr
6. MAPS, announcement brea
7. COMPASS, COMPASS Pat (2018)
8. FDA, FDA Approves New N

Patient reports: In a study, more than half of the p
therapy among the top five most meaningful expe

"When I had a craving, something in my head quickly thought about the good part, the taste, the feeling, the high, right? But if I think of the drug now... I quickly think about the downside. It changed the perception I have regarding the drug."[2]

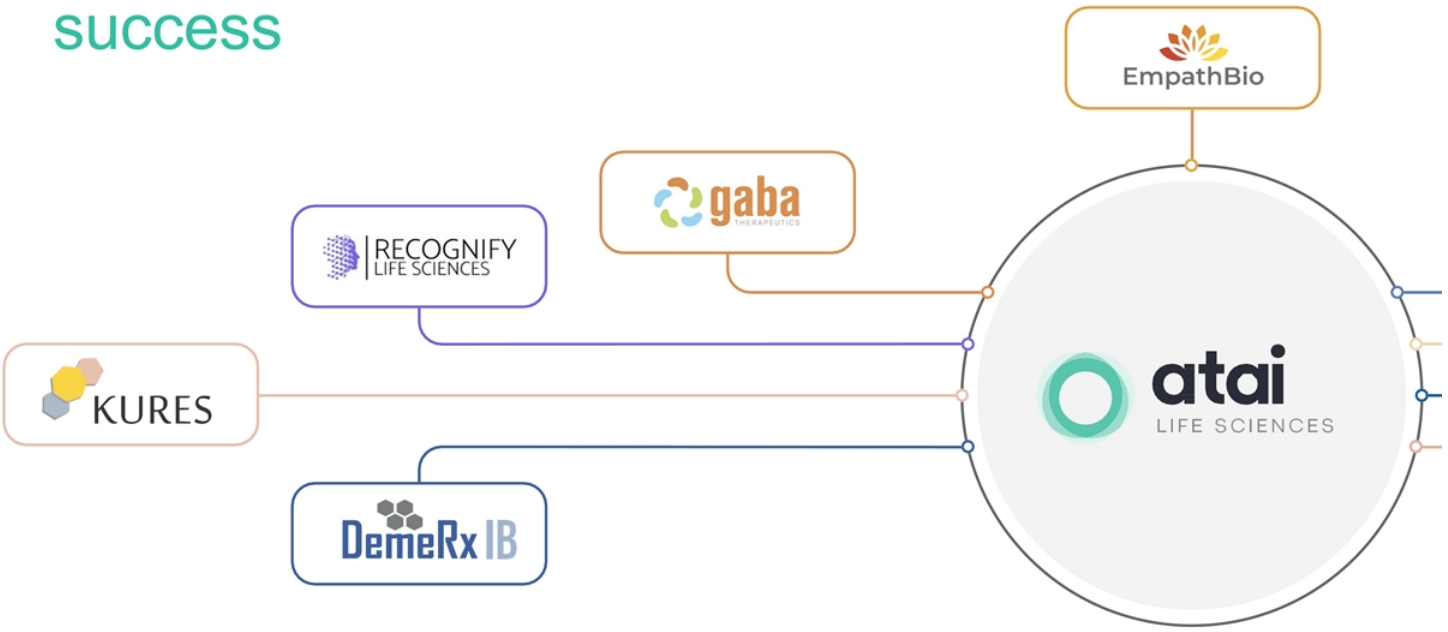
Male, 25
Ibogaine

"It sort of relieved a lot of stress, a lot of negative thoughts within my body… opened my eyes to see wh my stress and conflict is coming from… It is hard to explain but… it just brough lot of grief up that I had ins me, it brought it out and I g rid of a lot of grief."[3]

Male, 55
Psilocybin

1. Griffiths et al., "Psilocybin can occasion mystical-type experiences having substantial and sustained personal meaning and spiritual significance" (2006)
2. Schenberg et al., "Treating drug dependence with the aid of ibogaine: A qualitative study" (2017)
3. Watts et al., "Patients' Accounts of Increased 'Connectedness' and 'Acceptance' After Psilocybin for Treatment-Resistant Depression" (2017)
4. Argento et al., "Exploring ayahuasca-assisted therapy for addiction: A qualitative analysis of preliminary findings among an Indigenous community in Canada" (2019)

The atai platform: Decentralized drug developmer team and enabling technologies to aim for improv success



People

- Small teams with entrepreneurial autonomy develop our compounds
- Operational involvement of interdisciplinary atai team
- Access to experienced group of strategic advisors and KOLs

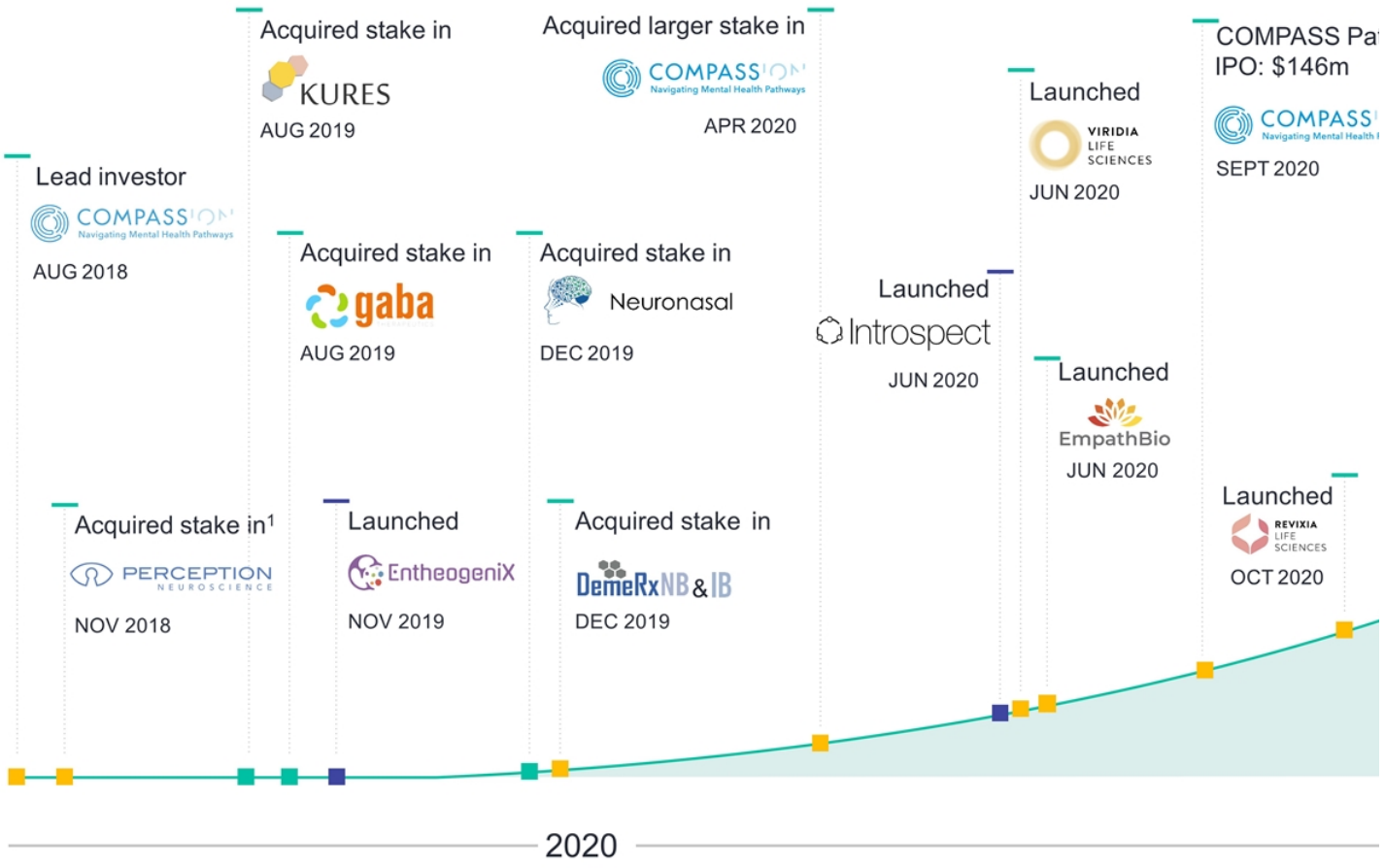
bridgebio ROIVANT SCIENCES

Process

- Disciplined selection criteri (including prior evidence in
- Impactful capital allocation acquired and incubated cor
- Strategic value capturing a high degree of optionality

COMPASS Navigating Mental Health Pathways

Rapid Growth via incubations and acquisitions:
6 psychedelic programs, 5 non-psychedelic program



1. Ketamine and S-ketamine are psychedelic/dissociative at therapeutic doses, while R-ketamine (the enantiomer that Perception Neuroscience is developing) is assumed to be nonpsyche

Development program overview: Our company ov
lead indications and stage of development

OUR PROGRAMS

Company	Lead Compound	Lead Indication	Type	Ownership %[1]
PERCEPTION NEUROSCIENCE	PCN-101 / R-ketamine	TRD	VIE	50.1%[2]
RECOGNIFY LIFE SCIENCES	RL-007 / Compound[3]	CIAS	VIE	51.9%
DemeRx IB	DMX-1002 / Ibogaine	OUD	VIE	59.5%
Neuronasal	NN-101 / N-acetylcysteine	mTBI	VIE	56.5%[4]
KURES	KUR-101 / Deuterated mitragynine	OUD	VIE	54.1%[5]
gaba THERAPEUTICS	GRX-917 / Deuterated etifoxine	GAD	Majority Owned Equity Interest[6]	53.8%[6]
EmpathBio	EMP-01 / MDMA derivative	PTSD	Wholly Owned	100%
REVIXIA LIFE SCIENCES	RLS-01 / Salvinorin A	TRD	Wholly Owned	100%
VIRIDIA LIFE SCIENCES	VLS-01 / DMT	TRD	Wholly Owned	100%

ENTITIES LIMITED TO EQUITY INTERE

COMPASS Navigating Mental Health Pathways	Developing COMP360 therapy, with psychological support from specially trained therapists, for TRD. Phase 2b trial is ongoing.	19.4%[7]
DemeRx NB	Developing DMX-1001, a formulation of noribogaine, as a potential at-home maintenance therapy for OUD. Preclinical stage.	6.3%[8]

Note: TRD = Treatment-resistant depression; CIAS = Cognitive impairment associated with schizophrenia; OUD = Opioid use disorder; GAD = Generalized anxiety disorder; mTBI = M
PTSD = Post-traumatic stress disorder, VIE = Variable interest entity.

(1) Unless otherwise indicated herein, ownership percentage based on ownership of securities with voting rights as of May 30th, 2021.
(2) Perception does not give effect to the shares of common stock issuable upon the conversion of outstanding convertible notes held by atai which may increase the ownership.
(3) RL-007 compound is (2R, 3S)-2-amino-3-hydroxy-3-pyridin-4-yl-1-pyrrolidin-1-yl-propan-1-one(L)-(+) tartrate salt.
(4) Neuronasal ownership does not give effect to the obligation to acquire further shares upon the achievement of specified development milestones which may increase the ownership to up to 64.5%.
(5) Kures ownership does increase the ownership to
(6) Operational involvemer acquire further shares upo
(7) As of June 30, 2021, w
(8) DemeRx NB ownership increase the ownership to

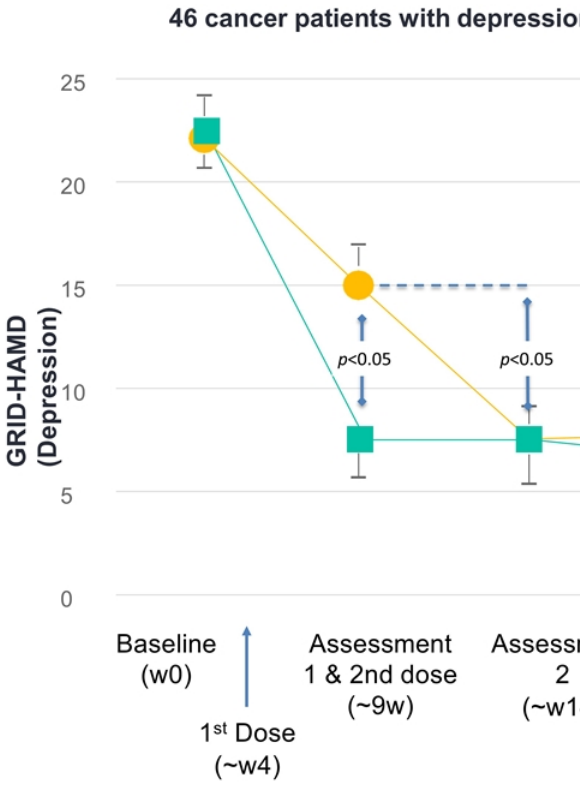
SUMMARY

COMPASS
Navigating Mental Health Pathways

OWNERSHIP	19.4%
PRODUCT	Oral Psilocybin (COMP360)
PHARMA-COLOGY	5-HT2A-R agonist
PRODUCT FEATURES	Rapid onset, potential for sustained efficacy after single dose
INDICATIONS	Primary: Treatment Resistant Depression Potential: Major Depressive Disorder, Anorexia, Autism, Bipolar Disorder, Chronic Cluster Headache, Body Dysmorphic Disorder
CURRENT STATUS	COMP360 Phase 1 trial completed and results publicly available, Phase 2b trial results expected end of 2021
INTELLECTUAL PROPERTY	Proprietary formulation of synthetic psilocybin, COMP360
HIGHLIGHT	Psilocybin demonstrated efficacy in reducing depressive symptoms in humans in an academic, third-party study

Early clinical signals leads to rapid and su symptoms

PRIOR EVIDENCE IN HUMANS (THIRD PARTY S



Note: GRID-HAMD = GRID Hamilton Depression Rating Scale; COMP360 therapy, COMP360 is administered in conjunction with psychological supp

1. Griffiths et al., "Psilocybin produces substantial and sustained decreas

SUMMARY

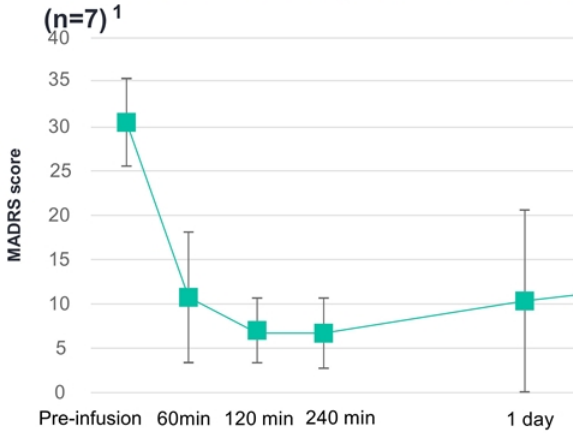
PERCEPTION NEUROSCIENCE

OWNERSHIP	50.1%
PRODUCT	Subcutaneous R-ketamine (PCN-101)
PHARMA-COLOGY	Glutamatergic modulator
PRODUCT FEATURES	Rapid-acting, nonpsychedelic antidepressant with potential for at home use
INDICATIONS	Primary: Treatment Resistant Depression Potential: Substance Use Disorder
CURRENT STATUS	Phase 1 trial showed safety and tolerability of R-ketamine at doses of up to 150mg, Phase 2 trial initiation anticipated in mid '21
INTELLECTUAL PROPERTY	Issued methods of use of R-ketamine for treatment of depressive symptoms
HIGHLIGHT	Third party study: Single IV dose (0.5 mg/kg) of R-ketamine led to a rapid and sustained decrease in MADRS in patients with TRD; dissociation was nearly absent[1]

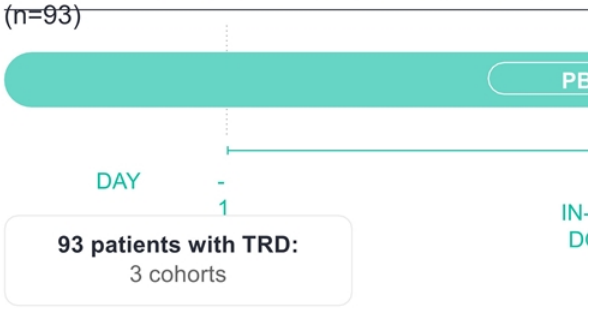
We aim to develop P
antidepressant with p

PRIOR EVIDENCE IN HUMANS (THIRD PARTY S

Mean MADRS over 7 days and median CAD (n=7) [1]



PLANNED PCN-101 PHASE 2 TRIAL: Randomize (n=93)

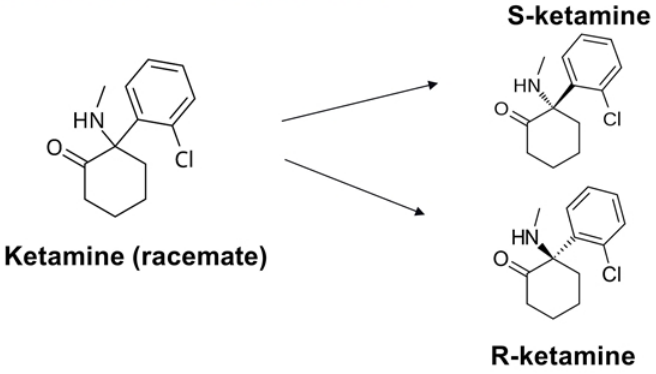


Note: MADRS = Montgomery-Asberg Depression Rate Scale, CADSS = C

1. Leal et al., "Intravenous arketamine for treatment-resistant depressio

Deep-dive R-ketamine vs. S-ketamine: Higher-pote antidepressant effect and lower potential for abuse

Profile of R- vs. S-ketamine



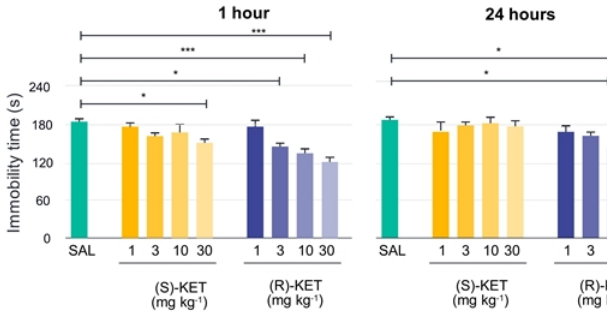
R-ketamine lacks the psychotomimetic and abuse potential of S-ketamine at therapeutic doses in preclinical models.

Like S-ketamine, R-ketamine's mechanism involves increased neuroplasticity through glutamatergic modulation, with potency differences putatively arising from:

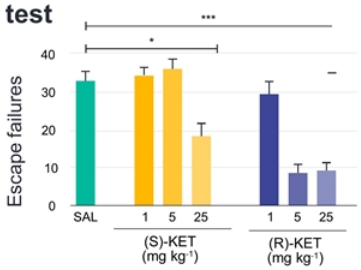
- Different active metabolite profiles
- Different pre- and post-synaptic sites of action
- Involvement of different intracellular pathways (mTORC1 vs. ERK)

Superior and more durable

Forced swim test[1] (third party study)



Learned helplessness test



R-ketamine outperformed and outlasted S-ketam in mice; confirmed i multiple other anim models in different

Note: mTORC1 = Mechanistic target of rapamycin complex 1, ERK = Extracellular signal-regulated kinases.

Sources: Wei et al., "A historical review of antidepressant effects of ketamine and its enantiomers" (2020); Chang et al., "Comparison of antidepressant and side effects in mice after intranasa (2019);

1. Zanos et al., "NDMAR inhibition-independent antidepressant actions of ketamine metabolites" (2016);
2. Yang et al., "R-ketamine: a rapid-onset and sustained antidepressant without psychotomimetic side effects" (2015).

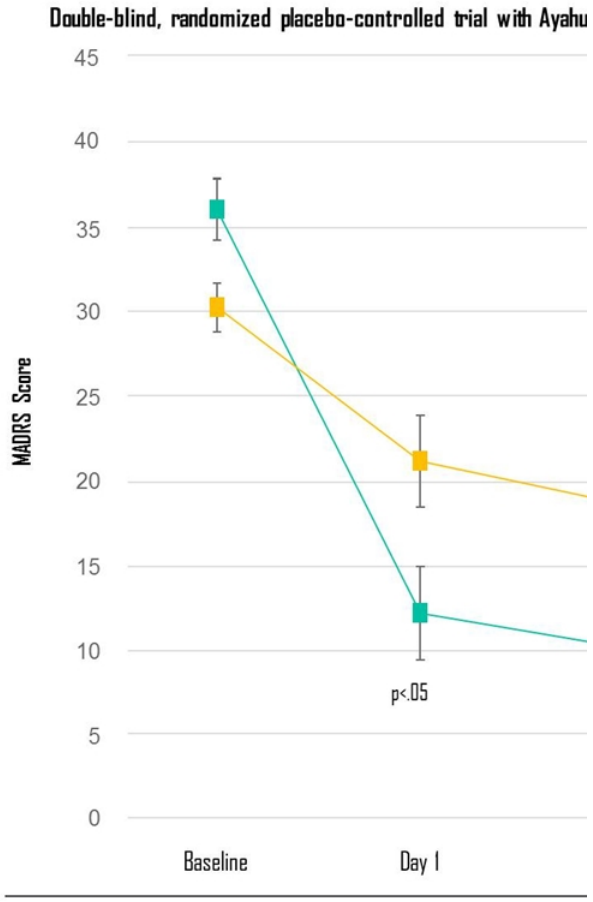
SUMMARY

VIRIDIA LIFE SCIENCES

OWNERSHIP	100%
PRODUCT	Dimethyltryptamine (DMT) in a buccal transmucosal film (VLS-01), DMT is the active psychedelic moiety in Ayahuasca
PHARMA-COLOGY	5-HT2A-R agonist
PRODUCT FEATURES	Rapid onset, sustained efficacy after single dose, short duration of psychedelic effect (~30 to 45 minutes)
INDICATIONS	Primary: Treatment Resistant Depression Potential: Eating Disorders, Substance Use Disorders
CURRENT STATUS	Pre-clinical: Formulation work and safety testing in progress; Phase I clinical trial anticipated to initiate in mid-'22
INTELLECTUAL PROPERTY	Filed provisional on formulations of DMT
HIGHLIGHT	VLS-01 is designed to have an improved duration of psychedelic effect while improving tolerability

VLS-01 may increas
reducing patient and

PRIOR EVIDENCE IN HUMANS (THIRD PARTY STUDY[1])



Note: MADRS: Montgomery-Asberg Depression Rate Scale.

1. Palhano-Fontes et al. "Rapid antidepressant effects of the psychedelic ayahuasca in treatment-resistant

SUMMARY

REVIXIA LIFE SCIENCES

OWNERSHIP	100%
PRODUCT	RLS-01 is a buccal formulation of Salvinorin A (SalA), a naturally occurring psychedelic compound derived from the *Salvia divinorum* plant
PHARMA-COLOGY	Non-orally bioavailable, non-nitrogenous agonist of the kappa-opioid receptor (KOR), no interaction with serotonergic mechanisms
PRODUCT FEATURES	Rapid-acting hallucinogenic compound, no wash-out of SSRIs required
INDICATIONS	Primary: Treatment Resistant Depression Potential: Substance Use Disorder, Pain
CURRENT STATUS	Phase 1 clinical trial anticipated to initiate in H2 '22
INTELLECTUAL PROPERTY	Filed provisional on formulation of SalA
HIGHLIGHT	Hallucinogenic experiences demonstrated by all six significantly elevated HRS clusters on an active dose, and no significant adverse events (third party study).[1]

Salvonorin A's subje
to be similar to class

PRIOR EVIDENCE IN HUMANS (THIRD PARTY S

Participant ratings on Hallucinogen Rating

Cluster	Placebo	Active
Affect	0.75 (0.47)	1.50 (0.
Cognition	0.37 (0.41)	1.61 (0.
Intensity	0.38[2] (0.76)	3.00[2] (0
Perception	0.33 (0.36)	1.71 (0.
Somaesthesia	0.31 (0.33)	1.27 (0.
Volition	0.94 (0.53)	1.85 (0.

Note: Data are mean ratings with one standard deviation shown in parenthese

1. Addy, "Acute and post-acute behavioral and psychological effects of salvi
2. Median used instead of mean for nonparametric data

Depression positioning and landscape: atai's progra differentiated from one another and from competitors

	TRD treatments being developed by atai companies				Marketed thera	
	Compass	Perception	Viridia	Revixia	J&J	e.g
Company	COMPASS Navigating Mental Health Pathways	PERCEPTION NEUROSCIENCE	VIRIDIA LIFE SCIENCES	REVIXIA LIFE SCIENCES	Johnson & Johnson	
Compound	COMP360	R-ketamine	DMT	Salvinorin A	S-ketamine	S
Potential for at home use		✓				
Potential for sustained efficacy	✓	✓	✓	✓	✓	
Rapid onset of treatment effect[1]	✓	✓	✓	✓	✓	
Mechanism of Action	5-HT2A-R agonist	Glutamatergic modulator	5-HT2A-R agonist	KOR agonist	NMDA-R antagonist	SE b

Note: 5HT2A-R = Serotonin 2A receptor, KOR = kappa-opioid receptor, NMDA-R = N-methyl-D-aspartate receptor, NET = Norepinephrine transporter, SERT = Serotonin Transpo Dimethyltryptamine, 5-MeO-DMT = 5-methoxy-N,N-dimethyltryptamine , SSRI = Selective Serotonin Reuptake Inhibitor, SNRI = Selective serotonin-norepinephrine reuptake Inhibit model of psilocybin therapy, COMP360 is administered in conjunction with psychological support from specially trained therapists.
Sources: GlobalData, Evaluate Pharma (both as of 2021), Uthaug, M. V. et al. Prospective examination of synthetic 5-methoxy-N,N-dimethyltryptamine inhalation: effects on salivar
1. Rapid onset of treatment effect versus standard of care.

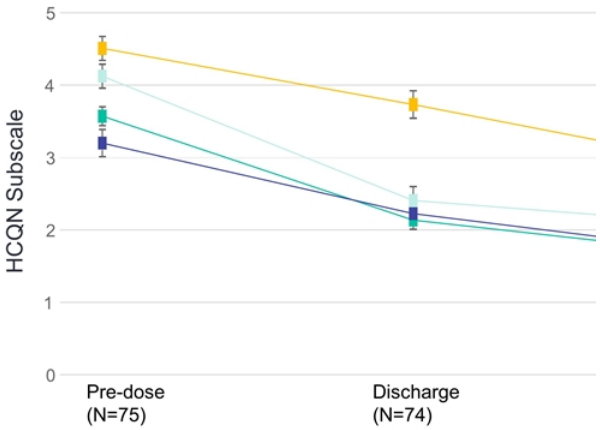
SUMMARY

DemeRx IB & NB

OWNERSHIP	59.5%[2]
PRODUCT	Ibogaine HCl capsules (DMX-1002), ibogaine is a naturally occurring psychedelic compound isolated from a West African shrub, iboga
PHARMA-COLOGY	Opioid mediated, cholinergic, glutamatergic and monoaminergic receptor modulator
PRODUCT FEATURES	A single dose of ibogaine may precipitate a rapid withdrawal and long-term abstinence in OUD patients
INDICATIONS	Primary: Opioid Use Disorder Potential: Substance Use Disorder, Post-Traumatic Stress Disorder, Traumatic Brain Injury
CURRENT STATUS	Phase 1/2 trial to initiate in mid '21
INTELLECTUAL PROPERTY	Pending method of treatment claims for OUD for ibogaine, issued method of treatment claims for OUD patients on methadone for noribogaine[3]
HIGHLIGHT	Potential sustained reduction in opioid craving with DMX-1002 single administration

A single-dose of ibog reductions in opioid patients

PRIOR EVIDENCE IN HUMANS (THIRD PARTY



ONGOING PHASE 1/2 TRIAL

Stage 1: Maximum Tolerated Dose

TREATMENT (MULTIPLE DOSES) SAFETY/P

Subject cohort:
Recreational opioid users
(up to 30 subjects)

Objective
Dose findi

Note: HCQN = Heroin Craving Questionnaire, PTSD = Post-traumatic stress d

1. Mash et al., "Ibogaine Detoxification Transitions Opioid and Cocaine Abu
2. Refers to ownership in DemeRx IB. DemeRx NB ownership is 6.3%, whic
3. Noribogaine Intellectual property resides in DemeRx NB

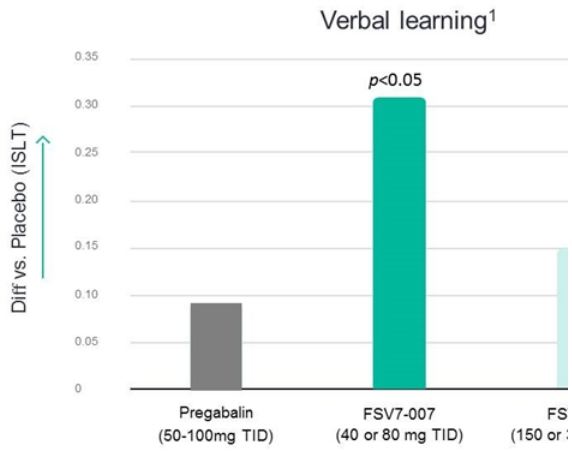
SUMMARY

RECOGNIFY LIFE SCIENCES

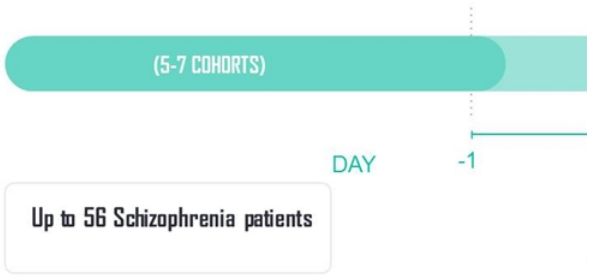
OWNERSHIP	51.9%
PRODUCT	(2R, 3S)-2-amino-3-hydroxy-3-pyridin-4-yl-1-pyrrolidin-1-yl-propan-1-one(L)-(+) tartrate salt oral capsules (RL-007)
PHARMA-COLOGY	Cholinergic, glutamatergic and GABA-B receptor modulator
PRODUCT FEATURES	No drug-related serious adverse events in over 500 study subject exposures, pro-cognitive effects demonstrated in two Phase 1 and one Phase 2 trials
INDICATIONS	Primary: Cognitive Impairment Associated with Schizophrenia Potential: Autism, Alzheimer's dementia
CURRENT STATUS	Phase 2a trial initiated in H1'21
INTELLECTUAL PROPERTY	Issued composition of matter patent
HIGHLIGHT	Previous Phase 2 showed pro-cognitive potential of RL-007 in 180 patients with diabetic peripheral neuropathic pain

RL-007 has previous
human clinical studie

PRIOR EVIDENCE IN HUMANS



ONGOING PHASE 2 TRIAL: Single-arm, single-blind dose-ranging clinic



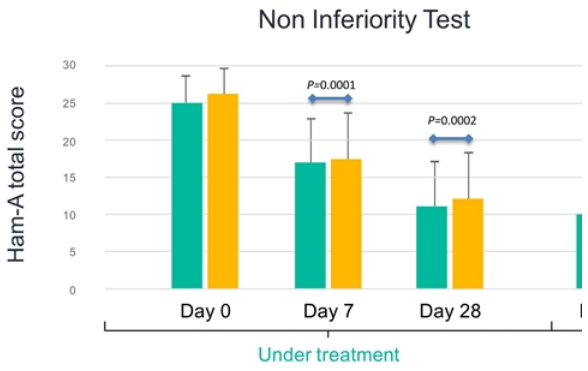
Note: CIAS = Cognitive impairment associated with schizophrenia; RL-007 is (2R, 3S)-2-amino-3-hydroxy-3-
1. Verbal learning was assessed by the "International Shopping List Task" (ISLT)
2. Verbal delayed recall was assessed by ISLT with a delayed recall, as a parameter for short-term memo

SUMMARY

OWNERSHIP	53.8%
PRODUCT	Deuterated etifoxine HCl oral dosage form (GRX-917)
PHARMA-COLOGY	Etifoxine facilitates endogenous production of neurosteroids like allopregnanolone through agonist activity at the mitochondrial translocator protein (TSPO)
PRODUCT FEATURES	GRX-917 is designed to have rapid onset activity of anxiolytic activity like benzodiazepines but without the sedating, addicting, or cognitive impairing properties
INDICATIONS	Primary: Generalized Anxiety Disorder Potential: Social Anxiety Disorder, Postpartum Depression
CURRENT STATUS	Phase 1 trial initiated in H1'21
INTELLECTUAL PROPERTY	Issued composition of matter on deuterated etifoxine (GRX-917) and corresponding methods of use
HIGHLIGHT	GRX-917 is aimed to be an improved version of Etifoxine, which already showed promising results

GRX-917 has the po
rapid-onset efficacy

PRIOR EVIDENCE IN HUMANS (THIRD PARTY



ONGOING PHASE 1 TRIAL

Part 1: Single Ascending Dose

TREATMENT	SAFETY/PK
Up to 40 healthy subjects: Up to 5 cohorts	**PD Endpoi** qEEG

Note: HAM-A = Hamilton Anxiety Rating Scale, SD = standard deviation, qEE

1. Nguyen et al., "Efficacy of etifoxine compared to lorazepam monotherapy
2. Cottin et al., "Safety profile of etifoxine: A French pharmacovigilance surv

SUMMARY

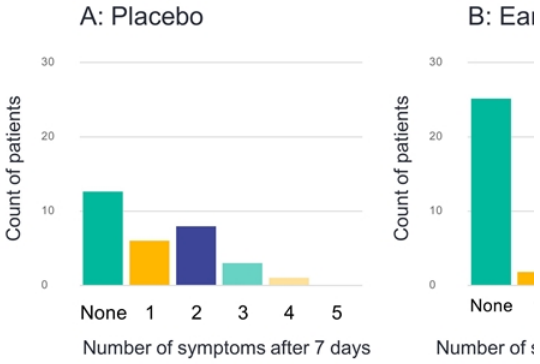
Neuronasal

OWNERSHIP	56.5%
PRODUCT	Intranasal N-acetylcysteine (NN-101)
PHARMA-COLOGY	N-acetylcysteine (NAC) stimulates glutathione production thus reducing oxidative damage
PRODUCT FEATURES	Direct-to-brain intranasal administration showed to increase concentrations in the brain and reduce side effects associated with very high doses of oral or IV NAC
INDICATIONS	Primary: mild Traumatic Brain Injury Potential: Parkinson's Disease
CURRENT STATUS	Pilot study completed in H2'20, Phase 1 trial anticipated to initiate in mid '21
INTELLECTUAL PROPERTY	Pending patent on methods of use of NAC for treating post-concussion syndrome
HIGHLIGHT	Improved brain-penetration of NN-101 and NAC effect in early mTBI

NN-101 has the pote
pharmacological trea

PRIOR EVIDENCE IN HUMANS (THIRD PARTY S

**Treatment of 81 mTBI patients with NAC (24h p
probability of symptom resolution by ~2x (OR =**



PLANNED PHASE 1 TRIAL: Single-site, 4-part cli

RANDOMIZED OPEN LABEL | FORMULATION CO

Subject cohort:
Healthy volunteers

Ide

Note: HAM-A = Hamilton Anxiety Rating Scale..

1. Hoffer et al., "Amelioration of acute sequelae of blast induced mild trauma

SUMMARY

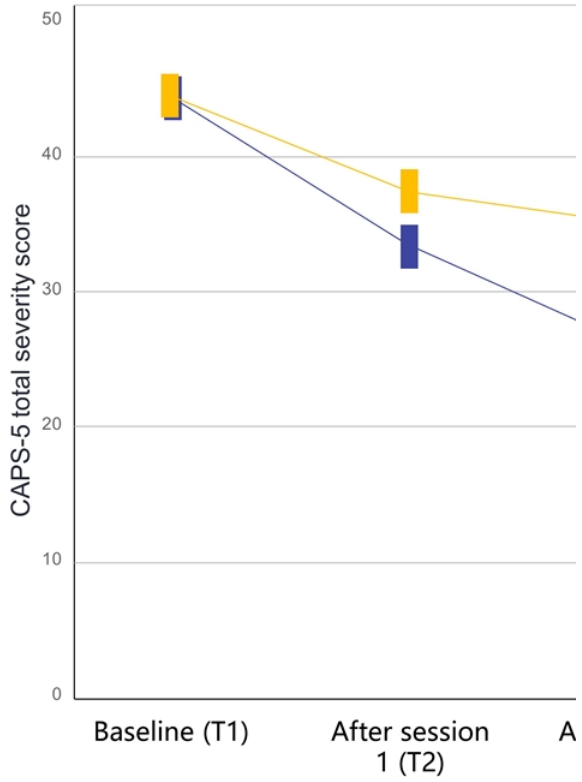
EmpathBio

OWNERSHIP	100%
PRODUCT	EMP-01 is an oral formulation of an MDMA derivative being developed for the treatment of PTSD
PHARMA-COLOGY	A monoamine releaser and reuptake inhibitor with prominent effects on serotonin (5-HT)
PRODUCT FEATURES	An entactogen; a compound class that increases feelings of empathy and closeness--with a potentially improved cardiovascular profile compared to MDMA
INDICATIONS	Primary: Post-traumatic Stress Disorder Potential: General Anxiety Disorder
CURRENT STATUS	Phase 1 trial anticipated to initiate in mid '22
INTELLECTUAL PROPERTY	Filed provisional on formulation, combination approach
HIGHLIGHT	EMP-01 is aimed to be an improved version of MDMA to treat PTSD symptoms, through an improved cardiovascular profile and potential digital therapeutic support

MDMA-assisted psyc
PTSD symptoms in S

PRIOR EVIDENCE IN HUMANS (THIRD PARTY

MDMA-assisted therapy significantly re
(n=90)



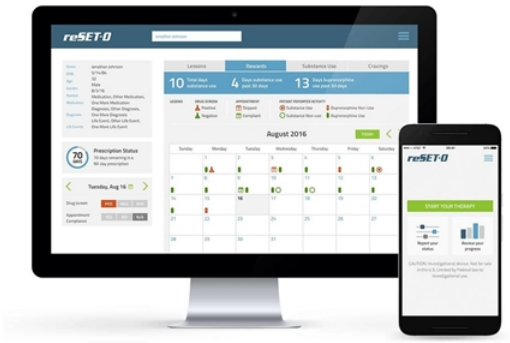
Note: Change in CAPS-V total severity score from T1 to T4 (P < 0.0001, d
outcome. Primary analysis was completed using least square means from
Mitchell et al., "MDMA-assisted therapy for severe PTSD: a randomized, c

Deep dive Introspect: Powerful digital therapeutics across the pipeline with goal to improve treatment

Pear Tx created a precedent

Positive regulatory sentiment

reSET-O © from Pear Therapeutics is the first prescription digital therapeutic that obtained FDA approval for treatment of patients with OUD (2018)



FDA is supporting and stimulating Digital Health initiatives[1]:

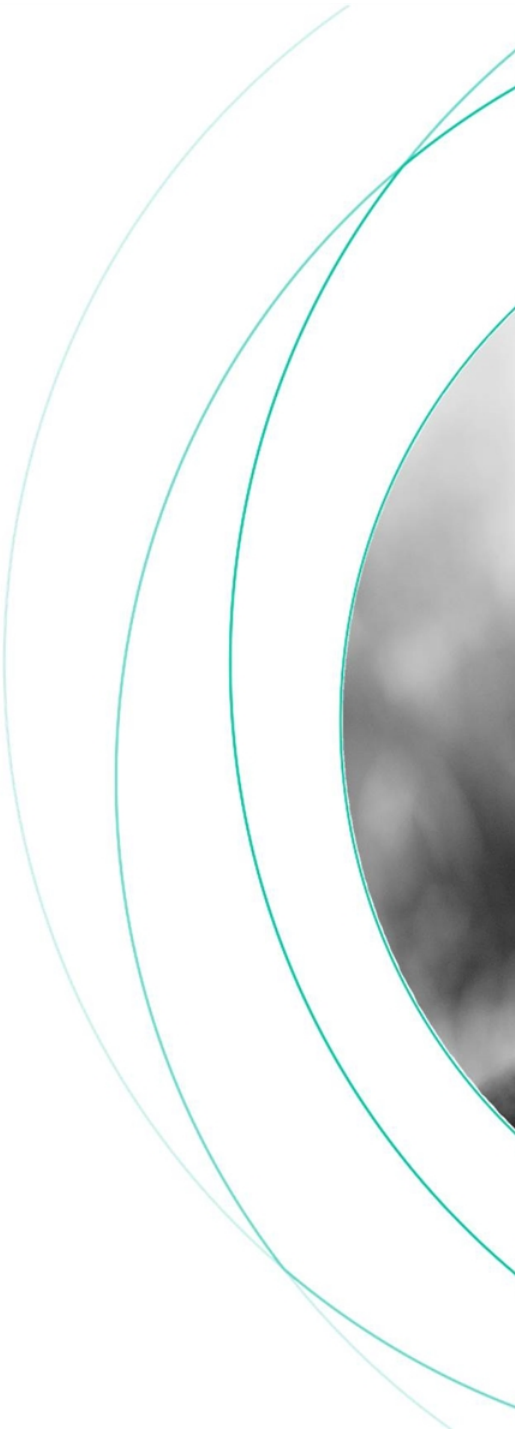
1. FDA, "Digital Health Innovation Action Plan" (2018)

Financial Position

Issuer (ticker)	ATAI Life Sciences N.V. (NASDAQ: ATAI)
Market capitalization	~$2.7B[1]
Outstanding shares	154.8M
Cash & cash equivalents	• ~$104M cash & cash equivalents as of March 31, 2021 • ~$345M subsequently received in connection with the closing of Series D and IPO • atai is well financed to fund planned operations through 2023

APEIRON INVESTMENT GROUP
NOVATOR
CATALIO CAPITAL MANAGEMENT
THIEL
GALAXY
WOODLINE PARTNERS
FUTURE VENTURES
SUBVERSIVE CAPITAL
FALCON EDGE CAPITAL
MOORE CAPITAL MANAGEMENT, LP
puravida INVESTMENTS

(1) As of July 20, 2021



Investor Contact:
Greg Weaver
Chief Financial Officer
Email: greg.weaver@atai.life

atai
LIFE SCIENCES

Appendix

ATAI PLATFORM

INDICATION DEEP DIVES

- Overview
- Depression
- CIAS
- SUD
- Anxiety
- mTBI
- MoA

The atai approach:
We are leveraging a platform approach to to aim for improved probability of clinical success

Process

Our process is designed to aim for effective prog development and value capturing

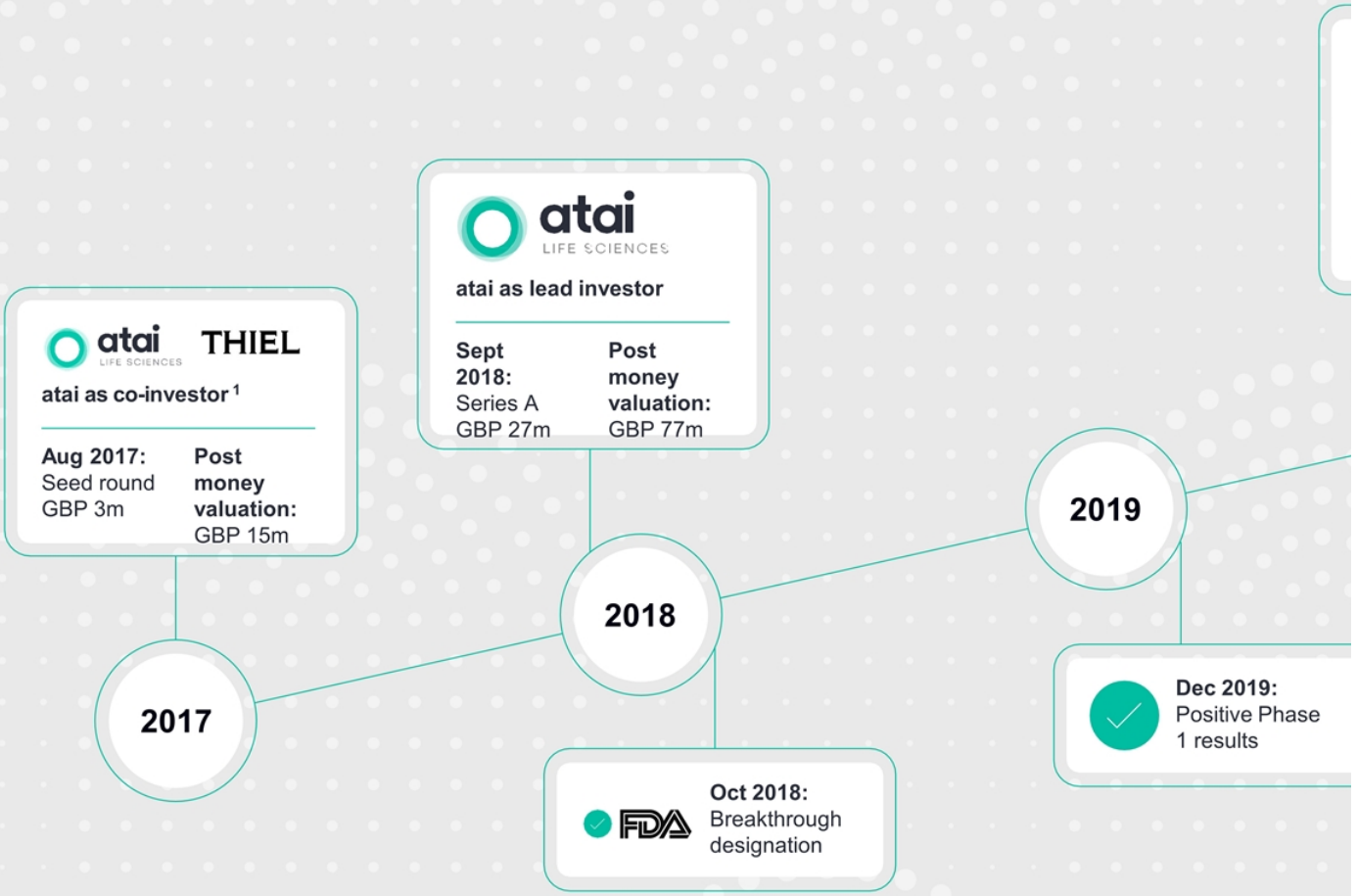
Disciplined New Program Selection

- Prior evidence in humans to increase probability of success
- Differentiated treatment effect to address unmet patient needs
- Significant commercial potential and complementary to drug candidates already in pipeline

Capital Allocation and Decentralized Operations

- Small teams with entrepreneuria autonomy develop our drugs
- Access to milestone-based fund shared services and enabling te
- Economies of scope and cross-fertilization across our developm programs

Case study: COMPASS Pathways creates a prec
companies: From foundation in 2017 to public con



1. atai co-founder, Christian Angermayer (though his family office, Apeiron) was initial investor into Compass which shareholding was contributed to atai upon atai's incorporation
2. Market Cap as of July 20, 2021

Our People: Over 50 atai professionals with strong track re
advisors support the CEOs of our companies with the exec


Ryan Barrett
GC & Lead of
Corporate Development


Greg Bates
VP, Regulatory Affairs


Roman Dahl
VP, Operations &
Innovation


Majed Fawa
VP, CMC


Anne Johnson
VP, Global Controller


David Keene
VP, Digital Therapeutics


Georgina Kilfoil, PMP
VP, Clinical Operations


Glenn Short
VP, Early De


Vicki Klutzaritz
Sr Director, Development
Operations


Sanjeev Kumar
Sr Director, Technical
Accounting


Edmund Neuhaus, PhD
Senior Director,
Psychology


Carrie Bowe
Director, Ne


Sarah McEwen, PhD
Director, Clinical Science


Galyna Pidpruzhnykova, PhD
Director, Innovation Strategy


Anna Richardson
Chief of Staff, Director
Stakeholder Engagement


Nicki Shah
Director, Ta


Michael Auerbach
Supervisory Board


Jason Camm
Supervisory Board


Andrea Heslin Smiley
Supervisory Board


Amir Kalali,
Supervisory


Terence A. Kelly, PhD
CEO Perception
Neuroscience


Ian Massey
CEO GABA Therapeutics


Deborah Mash, PhD
CEO DemeRx


Tom Bradsh
CEO Neuro

Alnylam PHARMACEUTICALS · APTINYX · ARUVANT · AXIAL · BCG · Boehringer Ingelheim · COVANCE · De

Lilly · McKinsey & Company · NOVARTIS · PRA Health Sciences · PTC THERAPEUTICS · Roche · ROIVANT SCIENCES

Our enabling technologies are designed to efficient drug discovery and improved treatr outcomes

Digital Therapeutics

Introspect

- Wholly owned digital therapeutics platform dedicated to providing more comprehensive, personalized care management with potential to secure stronger IP protection

Psyber

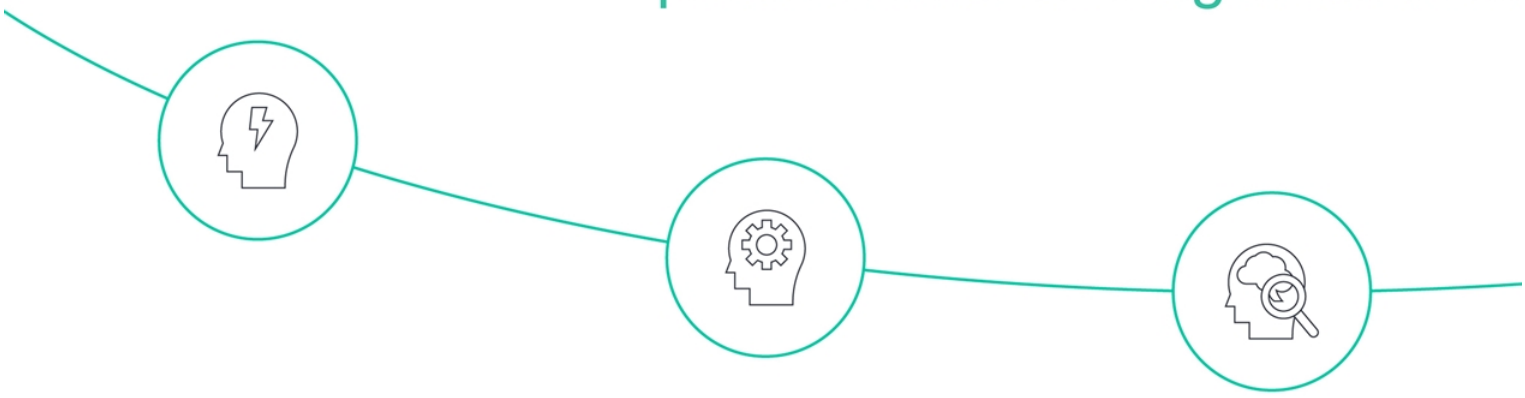
- Utilizes digital combination tools to empower atai's programs, such as remote monitoring and remote counseling

AI Enabled Drug Discovery

EntheogeniX

- Joint venture with Cyclica, with atai currently owning 80%
- AI-enabled computational biophysics pla designed to optimize and accelerate dru discovery
- Potential to be a product engine for atai supporting the next generation of novel programs

We are initially focused on mental health disor
patient need and significant ma



~300m

Patients with **Depression** (global)[1]

~33% of patients are resistant to front line treatments

~40m

Patients with **Anxiety Disorders** (US)[2]

Current treatments have slow onset (4- 12 weeks) or side effects including sedation

~18m

Patients with **Cognitive Impairment Associated with Schizophrenia** (global)[3]

No pharmacological treatments approved for CIAS

1. World Health Organization (2020)
2. Anxiety and Depression Association of America (2020)
3. Using CSCI Criterion; Reichenberg et al., "Neuropsychological Function and Dysfunction in Schizophrenia and Psychotic Affective Disorders" (2009)
4. SAMSHA - National Survey on Drug Use and Health (2017)
5. Georges et al, "Traumatic Bra

Robust Ability to Block Strategy: IP, regulat
create framework for excluding would-be com

Robust Specialty
Pharma IP Strategy

Drug & Digital Com
Therapeutics
Exclusivity
Strategy

Differential
De-scheduling

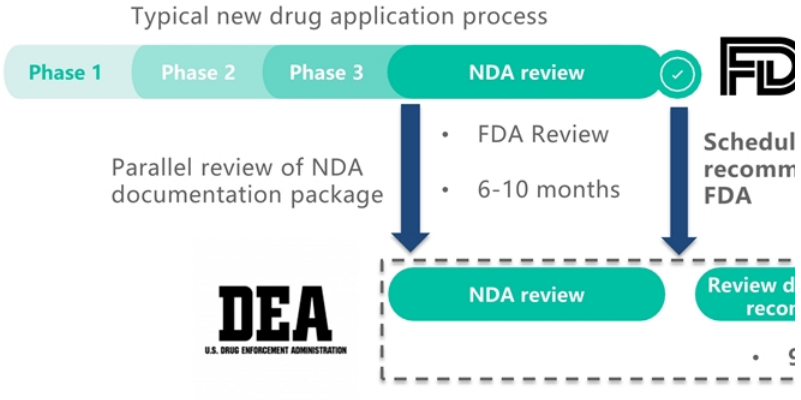
Strategic Restrictiv
Covenants

Leading IP and
Regulatory
Advisors

Additional **DEA process for schedule**
1 process, takes approx. 4 months

Successful precedents include GHB and THC

FDA evaluates NDAs and sha on down-scheduling of the pa



	Jazz Pharmaceuticals	
Brand name	Xyrem	Mar
Compound	Sodium oxybate (sodium salt of GHB*)	THC
Indication	Narcolepsy	Che
Launch	2002	198

Source: FDA website
* GHB = y-hydroxybutyric acid

Depression

Depression

Opportunity Overview

Treatment resistant depression (TRD) is diagnosed after two failed courses of antidepressants.

~300m

Global sufferers of depression[3]

Treatment options for TRD

Antidepressants

Augmentation therapy[1] S-

Ketamine

Somatic therapy[2]

High-intensity psychological interventions

2

Approved drugs for (Spravato, Symby

1. Includes mood stabilizers, atypical antipsychotics, and esketamine.
2. Includes rTMS (repetitive transcranial magnetic stimulation), tDCS (transcranial direct current stimulation), ECT (electroconvulsive therapy), and DBS (deep-brain stimulation).
3. World Health Organization (2020)
4. Hasler et al., Acute psycholog (2004)
5. Pandarakalam, 2018; Sussm
6. Evaluate Pharma (as of 19.03

atai is targeting depression via multiple co

Dep

		COMPASS Navigating Mental Health Pathways	VIRIDIA LIFE SCIENCES
	Company		
	Compound	COMP360	DMT
Population / Drug class	Indication	TRD	TRD
	MoA Target / Drug Class	5-HT2A-R agonist	5-HT2A-R agonist
Convenience / Use	Potential for at home use	⊗	⊗
	Potential for concomitant use with SSRIs	⊗	⊗
	In-clinic duration	6-8 hours	~2 hours
Commercial	Distribution channels	New clinics infrastructure	S-ketamine/ psilocybin clinics

Cognitive Impairment Associated with Schizophrenia

Cognitive Impairment Associated with Schizophrenia (CIAS)

Opportunity Overview

Schizophrenia is a chronic, psychiatric disorder characterized by a heterogeneous combination of symptoms, including psychosis, social withdrawal, flat emotional affect and cognitive impairment. Nearly all schizophrenia patients are affected by CIAS, limiting both social and non-social cognitive functions.

~21m

Global sufferers of schizophrenia [1]

~$155bn-

Estimated annual US economic burden du to schizophrenia[4]

To date, there are no pharmacological treatments approved for CIAS

1. Charlson et al., "Global Epidemiology and Burden of Schizophrenia: Findings From the Global Burden of Disease Study" (2016)
2. Using CSCI Criterion; Reichenberg et al., "Neuropsychological Function and Dysfunction in Schizophrenia and Psychotic Affective Disorders" (2009)
3. Laursen, Nordentoft & Morter
4. Cloutier et al., "The Economic
5. EvaluatePharma (as of 19.03

PIPELINE SUMMARY

9 Clinical Stage Therapies in Development for CIAS

12 Pre-Clinical Stage Therapies in Development

17 Different Mechanisms of Action

RL-007 is well positioned, cor signal of pro-cognitive effects

Overview of Leading Clinical Stage Competitors for Cognitive Impairment

	RECOGNIFY LIFE SCIENCES	Boehringer Ingelheim	Pfizer
Therapy	RL-007	BI-425809	PF-03463275
Primary Indication	CIAS	CIAS	CIAS
MoA	GABA / nicotinic modulator	GlyT1 inhibitor	GlyT1 inhibitor
Current Phase	II	II	II
Notes	Previously assessed in over 500 subjects for other indications with no serious adverse events observed	Completed Phase II with positive results; recruiting for Ph III	Ongoing Phase

Note: GABA = Gamma aminobutyric acid; TAAR1 = trace amine-associated receptor; GlyT1 = Glycine Trans M4 = muscarinic acetylcholine 4; PAM = positive allosteric modulator
Sources: GlobalData, Evaluate Pharma (both as of 2021)

Substance Use Disorder

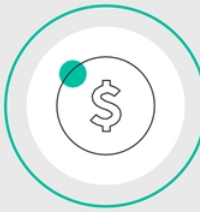
Substance Use Disorder (SUD)

Opportunity Overview

Substance use disorders are highly prevalent disorders characterized by an inability to control the use of a legal or illegal drug, medication or other psychoactive compound

~20m

US sufferers of SUD in 2017[1]



$787b

Societal cost asso with OUD in U

Treatment options for Opioid Use Disorder (OUD)

Synthetic opioid receptor agonists (methadone and buprenorphine)

Opioid antagonists (naltrexone and naloxone)

1. SAMSHA - National Survey on Drug Use and Health (2017)
2. Wilson et al., "Drug and opioid-involved overdose deaths – United States, 2017-2018" (2020)
3. Murphy, "The cost of opioid u
4. Sinha, "New Findings on Biolo

SUMMARY

DMX-1002 could potentially become a paradigm-shifting therapy for Opioid Use Disorder

Current standard of care for OUD is medication therapy, requiring opioid substitutes that carry significant side effects

Current strategies for withdrawal support have high rates of relapse

DMX-1002 has the potential t
modifying treatment for OUD,

	Therapy	Mecha
Disease Modification Single dose administered in monitored setting, providing both withdrawal support and oneiric experience with goal of complete remission	Ibogaine (DMX-1002) DemeRx	Mi
Withdrawal Support[2] Therapies given for symptomatic management during supervised withdrawal (detoxification)	Clonidine	Alph
	Lofexidine	Alph
Medication Assisted Therapy[1] Daily therapy given in substitution of opioid in outpatient setting in attempt to wean off from opioid	Methadone	Mu
	Buprenorphine	Partial
	Naltrexone	Mu-

Source: GlobalData, Evaluate Pharma (both as of 2021)
1. Current Standard of Care
2. Rarely used given high rates of relapse. Used primarily in institutional or penitentiary settings

Anxiety

Anxiety

Opportunity Overview

Anxiety disorders develop when feelings of apprehension and unease persist over an extended period and potentially worsen over time

Treatment options for anxiety disorders

Antidepressants (SSRIs)

Benzodiazepines

Psychotherapy

~40m

Anxiety disorder sufferers in the US[1]

<50%

Less than half of patients Anxiety disorder in the receive treatment[2]

1. National Alliance on Mental Illness (2021)
2. Anxiety and Depression Association of America (2021)
3. DeVane et al., "Anxiety Disorders in the 21st Century: Status, Challenges, Opportunities, and Comorbidity With Depression", AJMC (2005)

SUMMARY

There is an unmet need in GAD for therapies with rapid onset, high efficacy, and minimal side effects

SSRI's are current standard of care for GAD but require 4-6 weeks for onset of effect and have several disadvantages[1]:

1. SSRI/SNRI-specific inadequacy
2. Lack of tolerability
3. Patient nonadherence to medications that fail to relieve symptoms of anxiety quickly

Benzodiazepines are second-line treatment, offering fast and effective relief, but carrying significant risk of:

1. Sedation
2. Impaired cognition
3. Dependence/addiction

GRX-917 can fill unmet need (GAD) with rapid onset and f

Overview of Current Therapeutic Options for Generalized Anxiety Disorde

Class	Examples	Mechanism of action	Favo safety
Benzoxazine	deu-etifoxine (GRX-917) gaba	$GABA_A$ Channel and TSPO Potentiation	
Selective Serotonin Reuptake Inhibitor (SSRI)	Escitalopram	SERT blockade	
Serotonin and Norepinephrine Reuptake Inhibitor (SNRI)	Venlafaxine	SERT AND NET blockade	
Benzodiazepines	Alprazolam	$GABA_A$ Potentiation	
Tricyclic Antidepressant (TCA)	Imipramine	Mixed MoA	
Azapirones	Buspirone	partial 5-HT1A agonist	
Gabapentinoid	Pregablin	VDCC inhibition	

Note: GABA = Gamma aminobutyric acid, SERT = serotonin transporter , NET = serotonin transporter; Mo mitochondrial translocator protein
Source: GlobalData, Evaluate Pharma (both as of 19.03.2021)
1. DeMartini et al., "Generalized Anxiety Disorder" (2019)

Traumatic Brain Injury

Traumatic Brain Injury (TBI)

Opportunity Overview

Traumatic brain injury typically occurs when a sudden force impacts the head or body, resulting in damage and functional impairment of the brain. atai initially focuses on mild traumatic brain injuries.

~1.7m

People sustain TBI each year in US[1]

5.3m

Americans live with TBI related disabilities[3]

To date, there are no pharmacological treatments approved for Traumatic Brain Injury

1. Georges et al, "Traumatic Brain Injury", NCBI (2020)
2. CDC, "Surveillance Report of Traumatic Brain Injury-related Emergency Department Visits, Hospitalizations, and Deaths" (2014)
3. Thurman et al., "Report to Co
4. Hoffer et al., "Repositioning

While **mental health is the initial focus**, adjacent indications may allow for **significant expansion**

Anti-inflammatory properties make psychedelics potentially interesting for a variety of therapeutic indications[1]

Selected CNS indications of i therapeutics

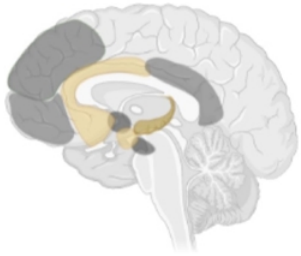
Indication	Estimated 2026 Market Size ($BN)	A
Eating disorders	7.4*	
Obsessive-Compulsive Disorder	3.7*	
Attention Deficit Hyperactivity Disorder	3.3	
Autism Spectrum Disorders	1.4*	
Multiple Sclerosis	21.1	
Ischemic/ Hypoxic Brain Injury	20.0	
Alzheimer's Disease	10.6	
Migraine Headache	9.6	
Parkinson's Disease	2.4	
Amyotrophic lateral sclerosis	1.0	
Cluster Headache	0.3	
	80	

* Company estimate based on worldwide incidence

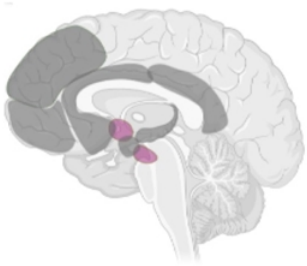
Source: EvaluatePharma for all indications with exception of Eating disorders, Autism spectrum di
Market size was calculated based on estimated worldwide incidence and current yearly average c
1. Flanagan & Nichols, "Psychedelics as anti-inflammatory agents" (2018). 2. Spriggs et al., "Positiv
disorder" (2020). 3. Lea et al., "Perceived outcomes of psychedelic microdosing as self-managed t
diethylamide (LSD) promotes social behavior through mTORC1 in the excitatory neurotransmissio
obsessive-compulsive disorder" (2006). 6. Szabo et al., "The Endogenous Hallucinogen and Trace
Sigma-1 Receptor Activation in Human Primary iPSC-Derived Cortical Neurons and Microglia-Like
Disease Dementia" (2020) 8. Katchborian-Neto et al., "Neuroprotective potential of Ayahuasca an
al., "Psychedelics as a novel approach to treating autoimmune conditions" (2020). 10. Szabo A., "P
Schindler et al., "Exploratory Controlled Study of the Migraine-Suppressing Effects of Psilocybin" (

atai aims to develop novel disease-modifying st
health by focusing on neuroplasticity

Standard of Care



1 SSRIs localized to serotoninergic pathways with slow onset, mainly ↓AN: reduced stress, emotional blunting.



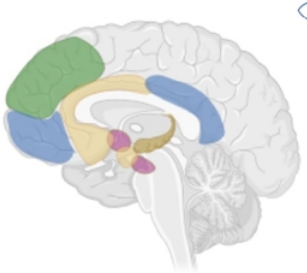
2 Buprenorphine ↓RN Opioid receptor agonists for maintenance; drawbacks: respiratory depression and maintained dependency.

atai LIFE SCIENCES

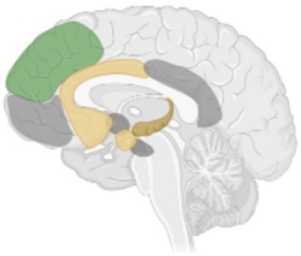
PERCEPTION NEUROSCIENCE

DemeRx IB

VIRIDIA LIFE SCIENCES



1 Pleiotropic re-set of DMN & AN. Increased neuroplasticity combined with
2 psychedelic experience facilitates regaining control of CC and RN and “unlearning” negative behaviors.



3 Modulatory (+/-) effect on AN. Restoration of top-down control of emotion
from CC.

“Watching my best friend and business
suffer, being let down by existing treatm
finally finding comfort in psychedelic the
was all the inspiration I needed to comm
to this cause.”

Florian Brand | CEO | atai life sciences