

InnoCare Pharma 2024 Annual Results Earnings Call

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March 27, 2025

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Our Mission & Vison: Science Drives Innovation for the Benefit of Patients





To Become

a Global Biopharmaceutical Leader that Develops and Delivers Innovative Therapies for Patients Worldwide

Oncology





Autoimmune

Our Therapeutic Focus

Key Achievements in 2024



Robust Commercial
Acceleration &
Solid Financial
Foundation

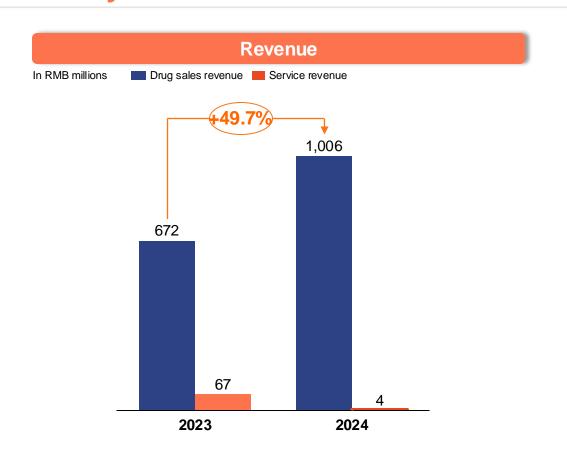
Diversified Product Portfolio & Multiple Ph3 Studies to Address Unmet Medical Needs

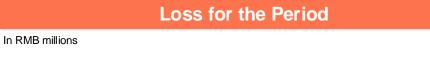
- Orelabrutinib achieved RMB 1Bn sales with 49.1% growth
- Loss for the year decreased by 30%
- Solid cash position of RMB 7.8Bn enables flexibility
- ❖ 2025 1st BD Deal: ICP-B02 (CD3xCD20) Partnered with Prolium
- Orelabrutinib 1L CLL/SLL NDA submitted in China and other indications NDA submitted in overseas
- Tafasitimab BLA for r/r DLBCL accepted under priority review
- Zurletrectinib (ICP-723) registrational study done, NDA will be submitted by the end of March 2025
- Mesutoclax (ICP-248) in combination with Orelabrutinib entered into Ph3 for 1L CLL/SLL; FPI achieved
- Orelabrutinib in Autoimmune Diseases
 - PPMS, global Ph3, targeting FPI by Mid-2025
 - > SPMS, global Ph3, targeting FPI by 2025
 - ITP, Ph3, targeting NDA submission in 2026H1
 - SLE, Ph2b enrollment completed, data readout in 2025Q4
- ❖ Soficitinib (ICP-332) (TYK-2/JAK1) Ph3 clinical trial for AD in China initiated and has enrolled 110+ patients
- ICP-488 (TYK-2, allosteric) Ph3 clinical trial for Psoriasis in China initiated; FPI achieved

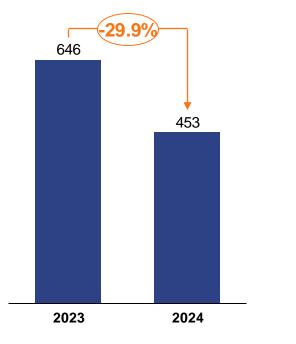
Drug Sales Achieved 49.7% yoy Growth, Total Loss Narrowed **Down by 29.9%**











2024 drug sales achieved 1,005.6M with 49.7% growth vs. prior year; total revenue achieved 1,009.4M with 36.7% growth vs. prior year.

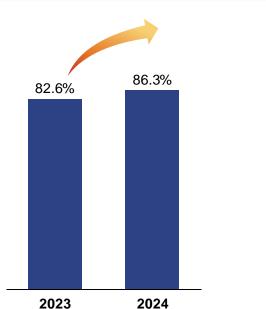
Loss for the period narrowed down by RMB 193M / 29.9% yoy attributable to drug sales growth, cost efficiency improvement and less unrealized foreign exchange loss

Driving Sustained Growth while a Strong Cash Position Provides Flexibility







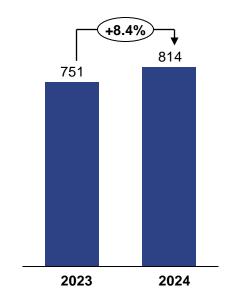


*Gross margin %=1-Cost of Revenue/Total Revenue

YTD Gross profit margin continued to improve to 86.3%, attributable to the changes in revenue composition and improved orelabrutinib manufacturing efficiency

R&D Expenses

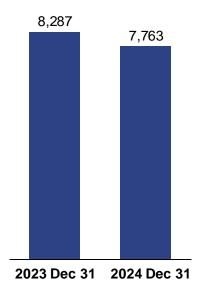




R&D expenses increased due to strategic investments in innovative technology platforms and increased resources allocated to clinical trials for our prioritized programs

Cash and related balance*





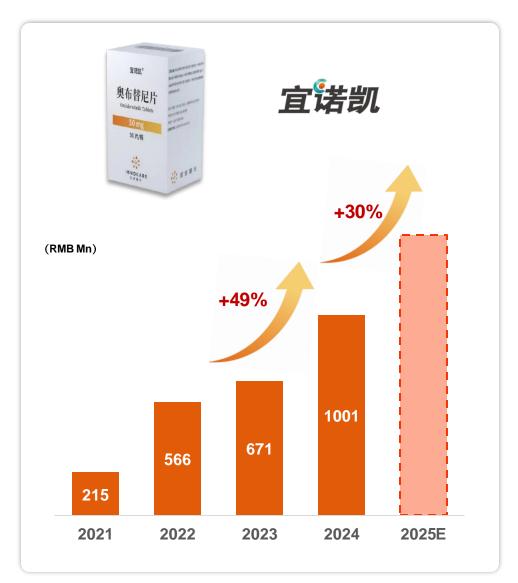
Robust cash and related balance of RMB 7.8B (~US\$1.1B) provides flexibility to expedite clinical development and to invest in a competitive pipeline

Orelabrutinib Commercialization:









Capturing the High-Potential MZL Market

- First and only BTKi for the treatment of r/r MZL
- MZL: The second largest NHL indication with significant market potential
- Committed to becoming a market leader in MZL

Further Expanding the Indications and Market Potential of CLL/SLL and MCL

- r/r CLL/SLL and r/r MCL approved and included in NRDL
- 1L CLL/SLL NDA submitted
- Prolonging treatment duration with strong efficacy and safety

Strong Execution

- **Experienced commercial leadership team** in hemato-oncology
- Enhance productivity and cost effectiveness by optimizing strategy and quick deployment
- Build long-term successful commercial capability in hematooncology and autoimmune diseases to achieve the Company's 2.0 goal

2025 1st BD Deal: ICP-B02 (CD3xCD20) Partnership with Prolium









Prolium Bioscience, Inc.



Upfront + Near-term
Payment

Milestone Payment

US\$ 520M

Royalty

Tiered Royalties on Net Product Sales

Capitalization and Equity

A Stake in Prolium

Under the terms of the agreement, Prolium will receive the rights to develop and commercialize ICP-B02 in the global non-oncology field and the oncology field outside of Asia.

Innovative Pipeline: Accelerating Portfolio Towards Value Realization



| Pre-IND | | Phase 1/2 | | Phase 3 | | Registration | | Approved | |
|-------------------------------|------|--|-----------|---|-----------|--------------------------------|---------|-------------------------------------|-----------|
| ADC | | Mesutoclax (ICP-248) | BCL2 | Orelabrutinib | втк | Orelabrutinib | втк | Orelabrutinib | втк |
| Solid tumor | | • r/r NHL(CHN, US) | | TN MCL (CHN) | | TN CLL/SLL (CHN) | | • r/r CLL/SLL (CHN) | |
| IL17 | Oral | AML(CHN, Global) | | MZL confirmatory (CHN) | | r/r MZL (SG) | | r/r MCL (CHN) | |
| Autoimmune disea | ase | Soficitinib (ICP-332) | TYK2/JAKI | • ITP (CHN) | | r/r MCL (AU) | | • r/r MCL (SG) | |
| Others Oral | | Prurigo nodularis (Global) | Phase 2 | SLE (CHN) | Phase 2b | Tafasitimab | CD19 | r/r MZL (CHN) | |
| Autoimmune disea | ase | ICP-189 _{+EGFRi} | SHP2 | PPMS (Global) | | r/r DLBCL (Mainland C | HN) | Tafasitimab | CD19 |
| | | NSCLC (CHN) | | SPMS (Global) | | Zurletrectinib | NTRK | • r/r DLBCL (GBA) | |
| | | ICP-B02 | CD3XCD20 | Tafasitimab | CD19 | NTRK fusion-positive (| cancers | r/r DLBCL (HK) | |
| | | NHL (CHN) | | DLBCL (CHN) | | (CHN) | | r/r DLBCL (Macao) | |
| | | ICP-490 | E3 Ligase | Mesutoclax | BCL2 | | | r/r DLBCL (TW) | |
| | | • MM (CHN) | | +Orelabrutinib | | | | | |
| | | NHL (CHN) | | TN CLL/SLL (CHN) | | | | | |
| | | ICP-B05 | CCR8 | Soficitinib (ICP-332) | TYK2/JAK1 | | | | |
| | | Hemato-oncology (CHN) | | Atopic Dermatitis (CHN) | | | | | |
| | | Solid Tumor (CHN) | | Vitiligo (CHN) | Phase 2/3 | | | | |
| | | (| | ICP-488 | TYK-2 | | | | |
| | | | | Psoriasis (CHN) | | | | Hemato-onc | cology |
| | | | | | | | | Autoimmune | e Disease |
| | | | | | | | | Solid Tumor | r |



Hemato-oncology: Marketed and Phase 3 Clinical Products





| Assets | Target | Indication | Clinical Trial | Registration | Market |
|--|--|--|--|--|--|
| Orelabrutinib | втк | r/r CLL/SLL | | | ★ CHN |
| | | r/r MCL | | | CHN,SG |
| | | r/r MZL | | | ★ CHN |
| | | 1L CLL/SLL | NDA accepted by CDE | | |
| | | 1L MCL | L MCL Global Ph3 ongoing | | |
| | | MZL Confirmatory Trial | Ph3 ongoing | | |
| | CD19 | | | | HK, MC, TW |
| Tafasitamab | | r/r DLBCL | Mainland China BLA accepted by CDE | | |
| | | DLBCL Confirmatory Trial | Ph3 ongoing | | |
| | | 1L CLL/SLL | Ph3 ongoing, combo with Orela | | |
| Mesutoclax (ICP-248) | BCL2 | r/r MCL (BTKi treated) Registration trial under application | | | |
| (101 210) | | 1L AML | Clinical trials ongoing in CHN & global | | |
| Others (ICP-490, -B02, -B05, etc.) | | Hemato-oncology | Clinical trials ongoing in multiple indications | | |
| | Orelabrutinib Tafasitamab Mesutoclax (ICP-248) Others (ICP-490, -B02, | Orelabrutinib Tafasitamab CD19 Mesutoclax (ICP-248) Others (ICP-490, -B02, | r/r CLL/SLL r/r MCL r/r MZL 1L CLL/SLL 1L MCL MZL Confirmatory Trial Tafasitamab CD19 Tafasitamab CD19 TL CLL/SLL r/r MZL 1L MCL MZL Confirmatory Trial TL CLL/SLL T/r DLBCL CD19 LBCL Confirmatory Trial 1L CLL/SLL r/r MCL (BTKi treated) 1L AML Others (ICP-490, -B02, Hemato-oncology | Orelabrutinib BTK IL CLL/SLL IL CLL/SLL IL MCL Global Ph3 ongoing MZL Confirmatory Trial Ph3 ongoing Tafasitamab CD19 Tafasitamab CD19 Mesutoclax (ICP-248) IL CLL/SLL Ph3 ongoing IL CLL/SLL Ph3 ongoing Ph3 ongoing IL CLL/SLL Ph3 ongoing Registration trial under application IL AML Clinical trials ongoing in CHN & global Hemato-oncology Clinical trials ongoing in multiple indications | Orelabrutinib BTK Tr/r MCL r/r MZL 1L CLL/SLL NDA accepted by CDE 1L MCL Global Ph3 ongoing MZL confirmatory Trial Ph3 ongoing r/r DLBCL DLBCL confirmatory Trial Ph3 ongoing Tafasitamab Mesutoclax (ICP-248) BCL2 T/r MCL (BTKi treated) Registration trial under application 1L AML Clinical trials ongoing in CHN & global Others (ICP-490, -B02, Clinical trials ongoing in multiple indications |

Tafasitamab (CD19): BIC Profile for r/r DLBCL, Expected to Launch in 2025



Pilot use in Hainan & GBA

Approved in HK

Collaboration with TTY for TW development

BLA accepted in June 2024

Expected to Be Approved and Launched in 2025

| Tafasitamab | | ICP-CL-00901 (N=52) |
|-------------|----|------------------------|
| | | IRC |
| | N | % |
| ORR | 38 | 73.1% |
| CR | 18 | 34.6% |
| PR | 20 | 38.5% |
| DCR | 44 | 84.6% |

Tafasitamab (CD19): BIC Profile for r/r DLBCL, Expected to Launch in 2025



Comparison of Selected Novel Therapy in r/r DLBCL

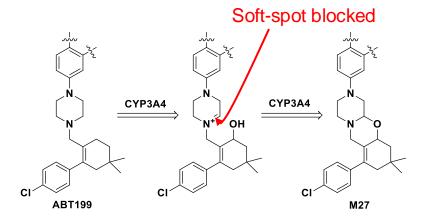
| Company | Target | Therapy | Phase | ORR (%) | CR (%) | mDOR (m) | mPFS (m) | mOS (m) |
|-----------------------|--------------|-----------------------------------|-------------------|----------|---------|-------------|------------|-------------|
| Incyte/InnoCare | CD19 | Tafasitamab + Lenalidomide | Approved ex-China | 57.5 | 40 | 43.9 | 11.6 | 33.5 |
| ADC Therapeutics | CD19 ADC | Loncastuximab tesirine | Approved ex-China | 48.3 | 24.1 | 10.25 | 4.93 | 9.92 |
| Roche | CD79b ADC | Polatuzumab vedotin + BR vs BR | Approved | 42 vs 18 | 23 vs 3 | 12.6 vs 7.7 | 9.5 vs 3.7 | 12.4 vs 4.7 |
| Roche | CD20/CD3 | Glofitamab | BLA | 52 | 39 | 10.4 | 3.8 | 11.5 |
| Amgen/ Beigene | CD19/CD3 | Blinatumomab | II | 43 | 19 | 11.6 | 3.7 | 5.0 |
| Regeneron/ Zai Lab | CD20/CD3 | Mosunetuzumab | II | 33 | 21 | N/A | N/A | N/A |
| AbbVie | BCL-2 | Venetoclax+R+Pola | II | 65 | 31 | 5.8 | 4.4 | 11 |

Non-head-to-head comparison

Mesutoclax (ICP-248): A Novel BCL-2 Inhibitor with Clinical Advantages







Venetoclax Pharmacological Properties

M27, a major metabolite of Venetoclax, shows ~80% AUC of the parent drug within 24 h

M27 has no pharmacological activity but has hematological toxicity*

Significant inhibition of CYP2C8 and CYP2C9 by Venetoclax and M27 with IC50 \leq 0.82 μ M

Significant inhibition of P-gp and BCRP by Venetoclax and M27 with IC50 ≤ 1.48 µM

Advantages of Mesutoclax



Eliminated major metabolite



Significant higher exposure



Improved efficacy



Reduced hematological toxicity



Reduced DDI risks

^{*} Venetoclax FDA non-clinical toxicology review

Mesutoclax (ICP-248): Excellent Clinical Results





BTKi + BCL-2i for 1L CLL/SLL

| | rela+Mesutocla | x Ibru + Ven¹ | Acala + Ven² |
|-------------|----------------|----------------|--------------|
| Sample Size | 42 | 106 | 291 |
| ORR | 100% | 86.8% | 92.8% |
| CRR | 53.4%* | 36.7% | NA |
| uMRD | 46.2%** W12 | 45.3% EOT+3 | 34.4% EOT |
| TLS | 0 | 0 | 0.3% |

Cutoff date: 2025/01/03

BTKi-treated r/r MCL

| | Mesutoclax | Venetoclax ^{3,4} | Pirtobrutinib⁵ |
|-----|----------------|---------------------------|-------------------------------|
| | BTKi+, N=17 | BTKi+, N=17 | cBTKi* Pretreated MCL N=90 |
| ORR | 70.5% | 53% | 57.8% |
| CRR | 23.5% | 18% | 20.0% |

Cutoff date: 2025/02/26

Ph3 Combo with Orelabrutinib for 1L CLL/SLL ongoing in China

Applying for registrational trial of BTKi-treated r/r MCL

1L AML clinical trial ongoing in China and globally

^{*} Target lesion by imaging; at RP3D

^{**} Median duration of combo treatment: 5.5m

^{*} cBTKi: covalent Bruton tyrosine kinase inhibitor

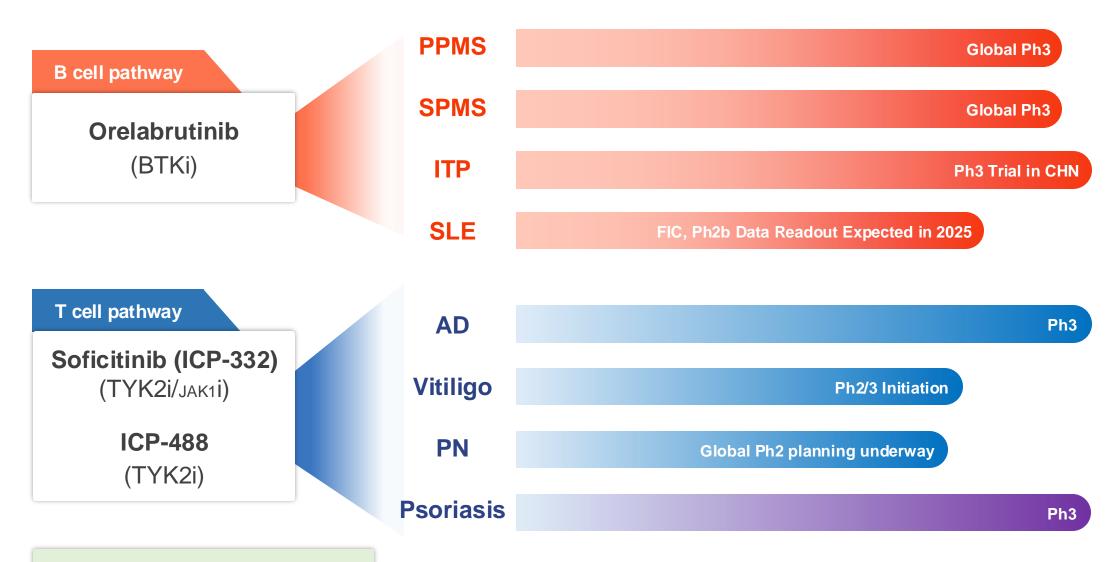
Well Positioned Portfolio in Autoimmune Diseases



Multiple Assets with Large Indications Progressed to Phase 3 Trials







Orelabrutinib: Enormous Potential for Treating Autoimmune Diseases







MS

- PPMS: Global Ph3 ongoing
- SPMS: Global Ph3 ongoing
- With high target selectivity, favorable PK and the ability to cross the BBB, Orelabrutinib offers a promising therapeutic option for treating PMS
- Best-in-class potential

~2.5 million patients worldwide

ITP

- Ph3 registrational trial for the treatment of ITP is underway in China, with NDA submission expected in 2026H1
- BTKi treatment for autoimmune diseases is just around the corner

Over 200,000 new patients globally each year

SLE

- The world's first and only BTKi demonstrating efficacy in Ph2 trial
- Phase 2b Clinical Trial Enrollment Complete, Data Readout Expected in 2025Q4

~8 million patients worldwide

Soficitinib (ICP-332), ICP-488: Two Differentiated TYK2 Inhibitors have Great Potential in Multiple Indications





Soficitinib Ph2 AD

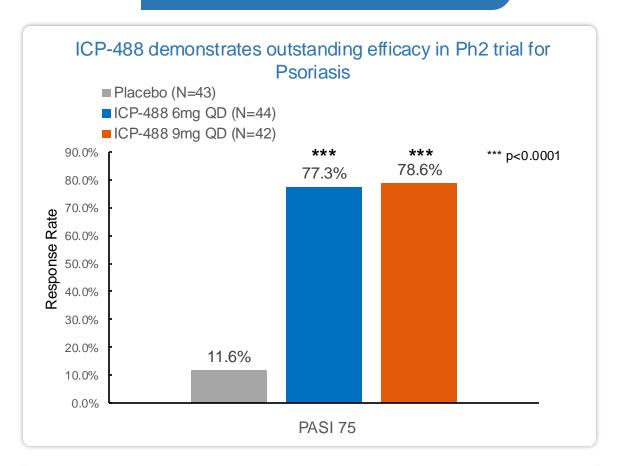
Phase 2 data indicates that soficitinib demonstrates significant efficacy in treating AD, showing the best efficacy (placebo-adjusted) compared to several other innovative drugs ICP-332(TYK2/JAK1) ph2 80mg qd 4w 56.0% Upadacitinib(JAK1) ph3(Measure Up 1) 15mg qd 16w² 53.3% 46.8% Upadacitinib(JAK1) ph3(Measure Up 2) 15mg qd 16w3 Abrocitinib (JAK1) ph3(JADE MONO-1) 100mg qd 12w 4 27.9% Abrocitinib(JAK1) ph3(JADE MONO-2) 100mg qd 12w5 34.1% Baricitinib(JAK1/2) ph3(BRE EZE-AD1) 2mg qd 16w6 9.9% 11.8% Baricitinib(JAK1/2) ph3(BRE EZE-AD2) 2mg qd 16w7 36.0% Dupliumab(IL-4Rα) ph3(SOLO-1) 16w8 Dupliumab(IL-4Rα) ph3(SOLO-2) 16w8 32.0% 12.1% Tralokinumab(IL-13) ph3(ECZTRA-1) 16w9 Tralokinumab(IL-13) ph3(ECZTRA-2) 16w9 21.6% Lebrikizumab(IL-13) ph3(ADvocate1) 16w10 42.0% 33.3% Lebrikizumab(IL-13) ph3(ADvocate2) 16w 10

- ✓ Ph3 trial for AD ongoing, >110 pts enrolled
- ✓ Ph2/3 trial for vitiligo initiated

Not a head-to-head comparison

✓ Ph2 global trial for prurigo nodularis is being planned

ICP-488 Ph2 Psoriasis



Ph3 trial for psoriasis initiated, FPI achieved

Oral Therapies for Comprehensive Coverage of Autoimmune Diseases





Orelabrutinib (BTKi)

Soficitinib (ICP-332) (TYK2/JAK1i)

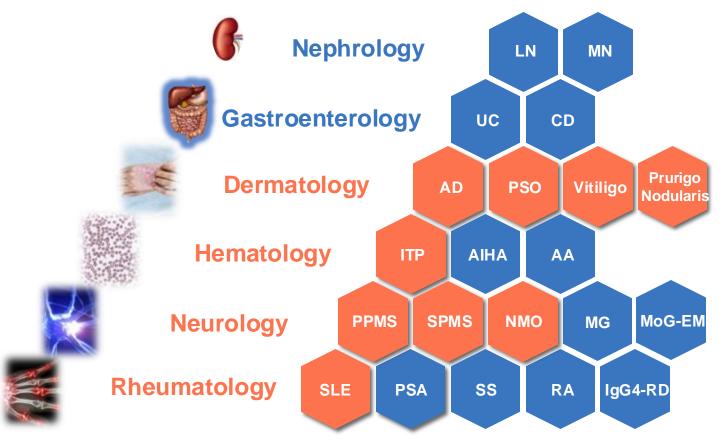
ICP-488 (TYK2i)

IL-17 (small molecule)

Project 40 (cyclic peptide)

Projects 42 & 43 (small molecule)

Project 44 (molecular glue)



InnoCare current coverage



Pre-clinical

LN: Lup us Nephritis
MN: membran ous nephropathy
UC:Ulcerative Colitis
CD: Crohn disease

AA: Aplastic anemia AIHA: Autoimmune hemolytic anemia NMO: Neuromyelitis optica MG:Myasthenia gravis MoG-EN: MOG antibody-associated encephalomyelitis SS: Sjogren syndrome RA: Rheumatoid Arthritis IgG4 RD:IgG4 related disease



Solid Tumors Strategy



Precision Medicine

Benefit patients more

Zurletrectinib (ICP-723)

- ✓ Second-Generation TRKi for NTRK gene fusionpositive patients registrational trial completed
- ✓ NDA submission expected by the end of March 2025

Combo Therapy

Benefit more patients

ICP-189 (SHP2i)

 ✓ Dose expansion of combination therapy with Firmonertinib (EGFRi) for NSCLC ongoing

ADC

Targeting Hard-to-Treat Cancers

ICP-B794 (anti-B7-H3 ADC)

- ✓ Innovative linker-payload invented with in-house technology
- ✓ Superior efficacy and safety window in animal models
- ✓ IND submission in 2025H1

Design & Advantage of InnoCare's Proprietary ADC Platform







Novel Connector

- Irreversible connector
- Prevent thiol exchange

Hydrophilic Linker

- Allows high DAR
- Improves stability

Effective Payload

- Potent
- Bystander effect
- Tumor-specific release
- Rapid clearance

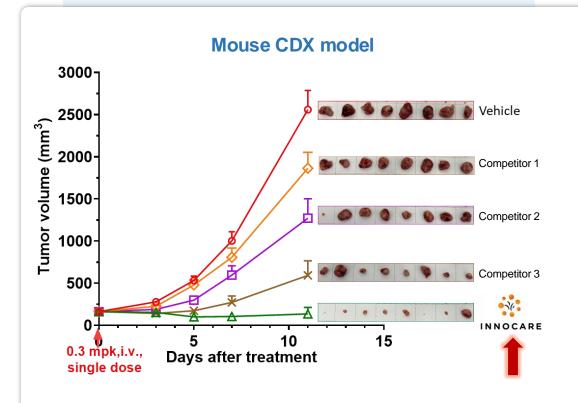
ICP-B794: Robust Anti-Tumor Activity in Animal Models vs. Other Platforms

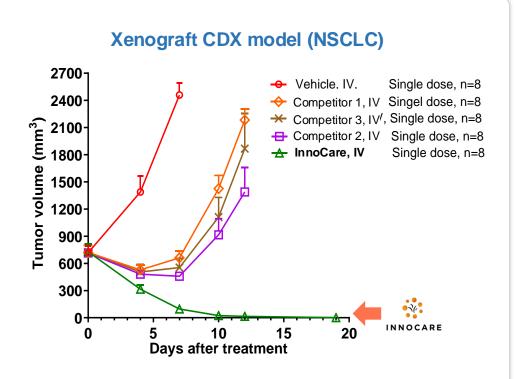




ICP-B794 Demonstrates Superior Anti-Tumor Activity in Animal Model Compared to Others

ICP-B794 Exhibits Superior Tumor-killing Effect in Large Tumors





Note: linker-payload from different platforms conjugated to InnoCare anti-B7H3, all tested articles with DAR≈8

Safety Window is >200 fold in preclinical studies

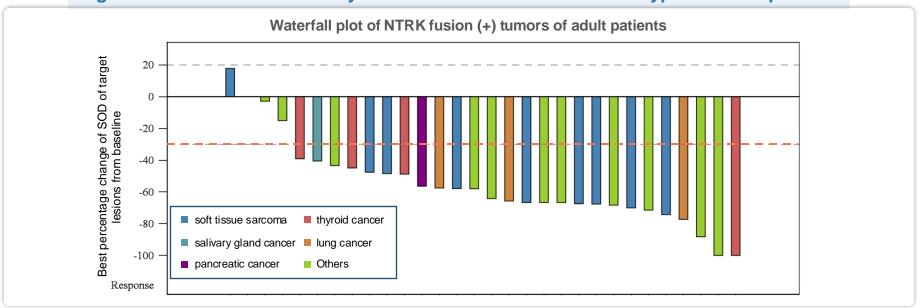
Zurletrectinib (ICP-723): 2nd Generation TRKi for the Treatment of Tumors with NTRK Gene Abnormalities





- Registration trial for NTRK gene abnormalities in adults and adolescents, NDA submission in March 2025
 - ✓ ORR: 85.5%
 - ✓ Long duration of response (longest beyond 36 months)
- Registrational trial for pediatric patients ongoing, targeting NDA submission later 2025
- Efficacious in TRKi-resistant patients

Significant and durable efficacy observed across diverse tumor types in adult patients



Data cut-off: ICP-CL-00505 (2024-06-11); ICP-CL-00501 (2024-04-18)

Key Milestones in Next 12 Months





| | Assets | Milestones | | | | |
|-------------------|---|--|--|--|--|--|
| Commercialization | Commercialization | Rapid sales growth | | | | |
| & BD | BD | Strive to get BD deals | | | | |
| | | NDA approval for 1L CLL/SLL in CHN | | | | |
| | Orelabrutinib | NDA approval for r/r MZL in Singapore | | | | |
| \wedge | | NDA submission for CLL/SLL, r/r MCL, r/r MZL overseas | | | | |
| | | Ph3 trial for combination with ICP-248 in 1L CLL/SLL enrollment completed | | | | |
| Hemato-oncology | Tafasitamab BLA approval in CHN for r/r DLBCL | | | | | |
| Tromate emelology | | Data readout: BTKi-treated r/r NHL; Combination with orelabrutinib in 1L CLL/SLL Ph2 trial longer efficacy | | | | |
| | Mesutoclax (ICP-248) | Ph3 trial for combination with orelabrutinib in 1L CLL/SLL enrollment completed | | | | |
| | | Registration trial initiation in BTKi-treated r/r MCL patients | | | | |
| | | Completion of AML dose escalation | | | | |
| | | Completion of ITP Ph3 registration trial, NDA submission in 2026H1 | | | | |
| (A) | Orelabrutinib | Global Ph3 trial initiation in PPMS, FPI | | | | |
| { · · · · · | | Global Ph3 trial initiation in SPMS, FPI | | | | |
| Autoimmune | | Data readout: SLE Ph2b study | | | | |
| Diseases | Soficitinib (ICP-332) | Completion of patient enrollment for Ph3 AD trial | | | | |
| | | Completion of patient enrollment for Ph2 vitiligo trial | | | | |
| | ICP-488 | Completion of patient enrollment for Ph3 psoriasis trial | | | | |
| 20 PM | Zurletrectinib | NDA submission for adult and adolescent patients in CHN | | | | |
| | (ICP-723) | NDA Submission for pediatric patients in CHN | | | | |
| Solid Tumor | ICP-B794 | Initiate clinical trial and try to get PoC in the clinic by the end of 2025 | | | | |
| Solid Tulliol | ICP-189 | Data readout: Combo with EGFRi in NSCLC | | | | |

