



# InnoCare Pharma

## 2025H1 Results

*Stock Code: 09969.HK, 688428.SH*

*August 19, 2025*



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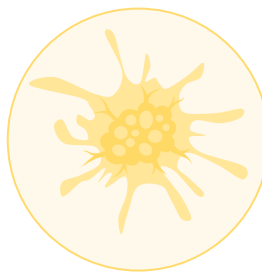
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# Our Mission & Vision: Science Drives Innovation for the Benefit of Patients



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

Cancer



Autoimmune

**Our Therapeutic Focus**



INNOCARE  
信达生物

10  
YEARS 2013-2023

**Congratulations!**

Approval of Orelabrutinib  
for the **first-line treatment**  
of **CLL/SLL** in China

宜诺凯®  
奥布替尼片  
Orelabrutinib Tablets  
50 mg  
30片/瓶  
INNOCARE  
信达生物

INNOCARE

10  
YEARS 2013-2023

**Congratulations!**

Approval of Minjuvi® Regimen  
for the treatment of Adult Patients  
with R/R DLBCL **in China**

明诺凯®  
注射用坦普妥单抗  
200 mg  
1瓶/盒  
INNOCARE  
信达生物

# Key Achievements in 2025H1

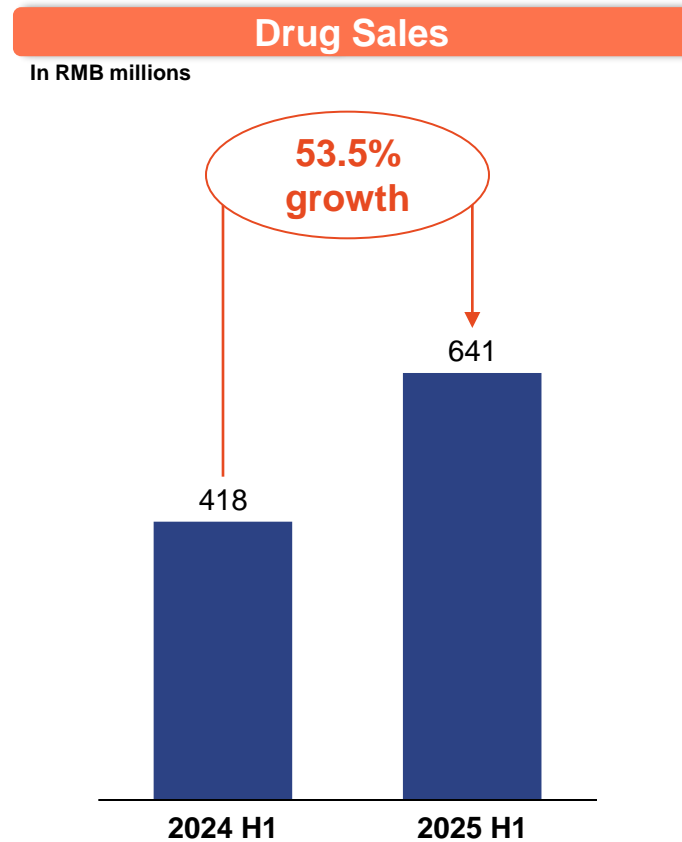
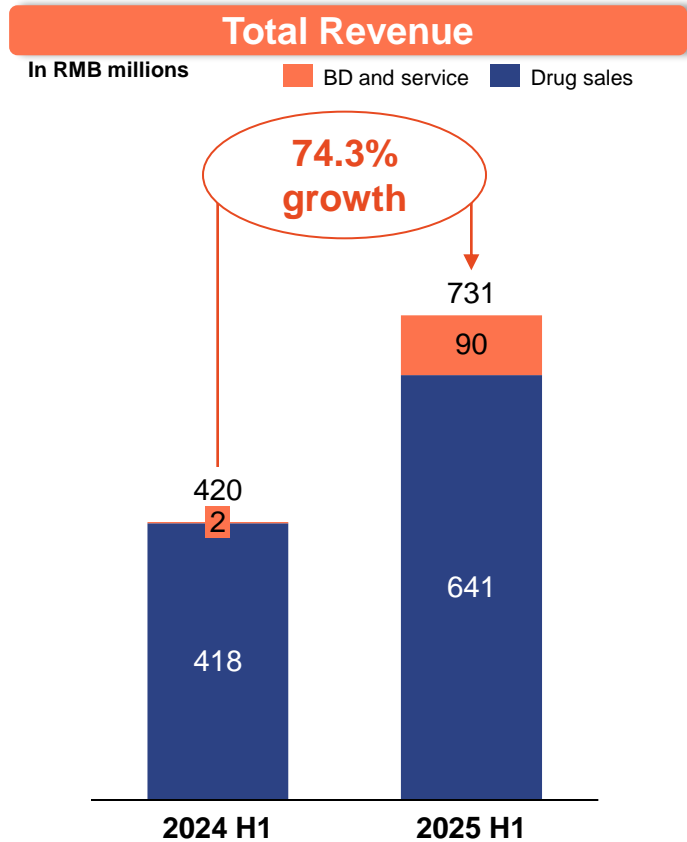
## Robust Commercial Acceleration & Solid Financial Foundation

- ❖ Total revenue reached **RMB 731 million**, representing a **yoy increase of 74.3%**
- ❖ Drug sales achieved **RMB 641 million** with **53.5% yoy growth**
- ❖ **Net loss** for the first half of 2025 significantly narrowed to **RMB 35.6 million**, representing a **yoy decrease of 86.7%**
- ❖ **Strong cash position of ~RMB 7.7 billion**

## Diversified Product Portfolio & Multiple PhIII Studies to Address Unmet Medical Needs

- ❖ **Orelabrutinib 1L CLL/SLL NDA approved in China** and other indications NDA submitted in overseas
- ❖ **Tafasitimab BLA for r/r DLBCL approved in China** with commercial launch planned next month
- ❖ **Zurletrectinib (ICP-723) NDA accepted and under priority review**
- ❖ **Mesutoclax (ICP-248)**
  - Combo with Orelabrutinib entered into **Ph3 registrational trial for 1L CLL/SLL-FDT**; patient enrollment ongoing
  - Approved to initiate **registrational study for BTKi treated MCL**; the first BCL-2 inhibitor in China to receive **Breakthrough Therapy Designation (BTD)**
  - **1L AML** dose expansion in CHN and global
  - **MDS** global study initiated
- ❖ **Orelabrutinib in Autoimmune Diseases**
  - **PPMS**, global Ph3 registrational trial, targeting FPI by 2<sup>nd</sup> half of 2025
  - **SPMS**, global Ph3 registrational trial, targeting FPI by 2<sup>nd</sup> half of 2025
  - **ITP**, Ph3 registrational trial, targeting NDA submission in 2026H1
  - **SLE**, Ph2b data readout in 2025Q4
- ❖ **Soficitinib (ICP-332) (TYK-2/JAK1)**
  - **Atopic dermatitis**: Ph3 registrational trial; patient enrollment is accelerating
  - **Vitiligo**: Ph2 trial initiated; patient enrollment underway
  - **Prurigo Nodularis (PN)**: Global Ph2 is being initiated
- ❖ **ICP-488** (TYK-2, allosteric) Ph3 registrational trial for **Psoriasis** in China initiated; patient enrollment ongoing

# Total Revenue in First Half 2025 Achieved **74.3% yoy Growth**, Diversified Portfolio and BD Potential Ensure Continued High Growth

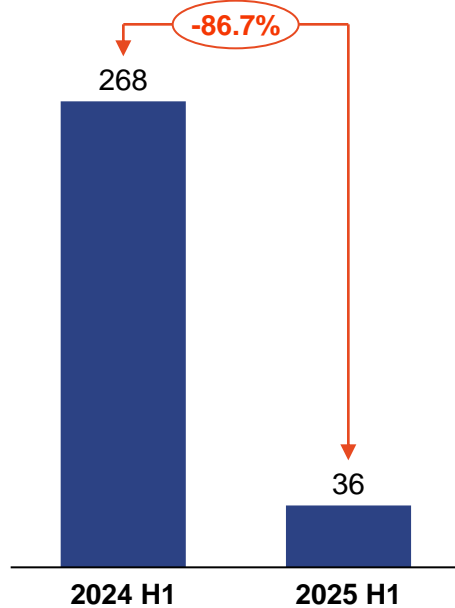


- **Total Revenue 74.3% yoy growth**
  - Drug sales continue robust growth
  - R&D engine provides fuel for BD revenue
- **Orelabrutinib 52.8% yoy growth**
  - Only BKTi for high-potential MZL market
  - Enhanced commercial execution to increase market share
- **Diversified portfolio ensures continued high growth**
  - Commercial launch of Tafasitamab for r/r DLBCL in 2<sup>nd</sup> half 2025
  - Orelabrutinib approved 1L CLL/SLL
  - Zurletrectinib expected approval in 1H2026

# Driving Rapid Top Line Growth, plus Strong Cash Position Provides Flexibility

## Loss for the Period

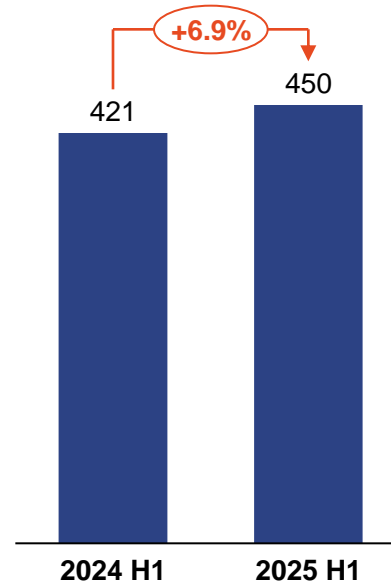
In RMB millions



Loss for the period narrowed down by RMB232M, an 86.7% yoy decrease, attributed to drug sales growth, business collaboration revenue, as well as cost efficiency improvement

## R&D Expense

In RMB millions



R&D expenses increased due to strategic investment in our innovative technology platform, expanded resources for prioritized clinical trials, and licensing-in related expenses

## Cash and related balance\*

In RMB millions



Robust cash and related balance of RMB 7.7B (~US\$1.07B) provides flexibility to expedite clinical development and invest in a competitive pipeline

# ICP-B02 (CD3xCD20) Partnership with Prolium



**Prolium Bioscience, Inc.**

Funded by  **rtw**

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.



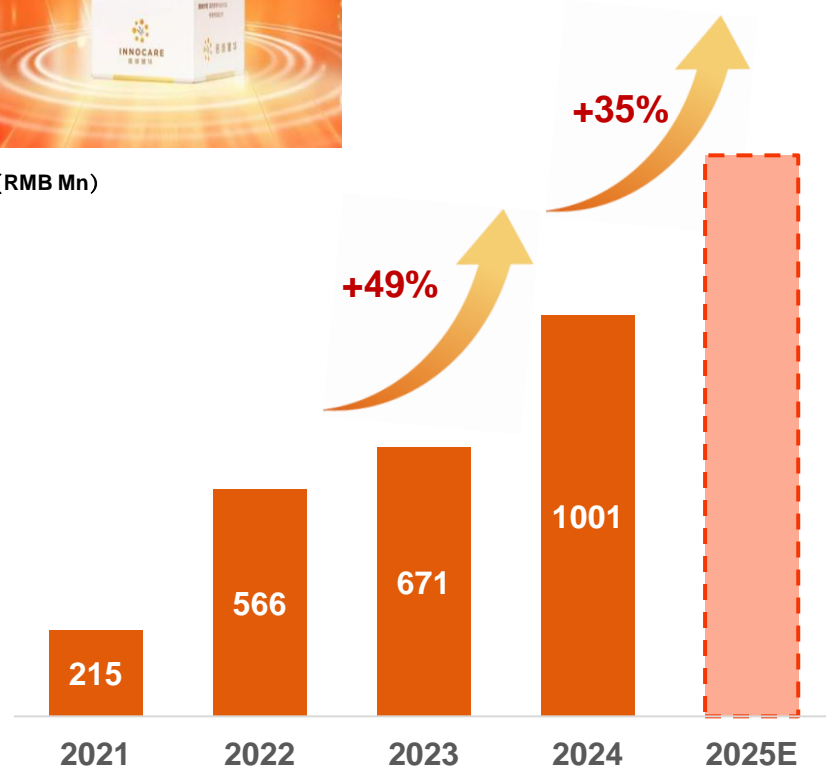
# Orelabrutinib Commercialization:

Driving High Sales Growth through Outstanding Product Data, Expanding Indications and Treatment Areas, and Recommended by Authoritative Guidelines



宜诺凯

(RMB Mn)



## 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

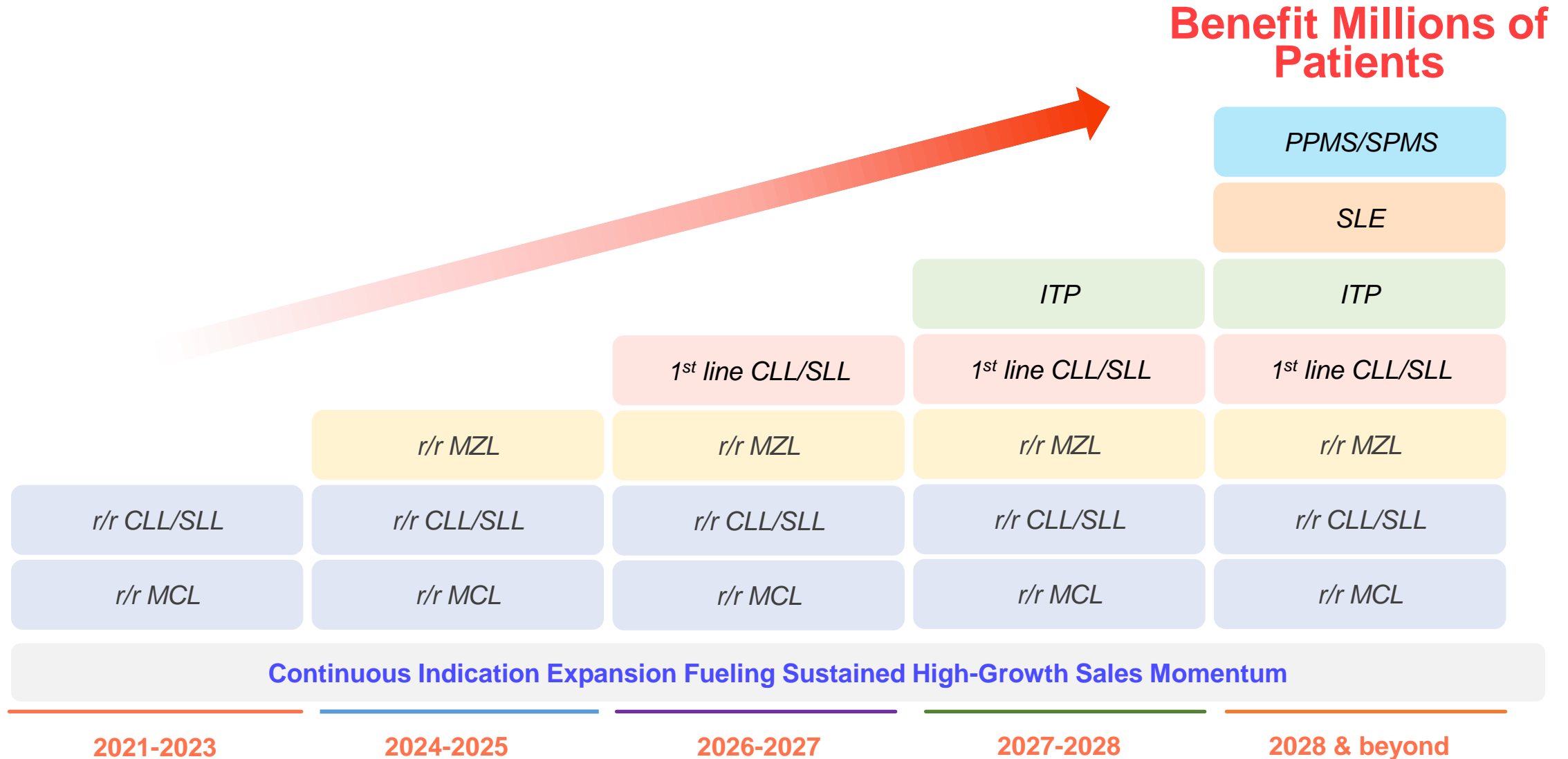
- ✓ **1L CLL/SLL approved**, further unlocks market potential and is expected to drive significant growth and market penetration
- ✓ **r/r CLL/SLL and r/r MCL approved and included in NRDL**
- ✓ **Prolonging treatment duration** with strong efficacy and safety

## Recommended in the 2025 CSCO Lymphoma Guidelines

- ✓ **CLL/SLL**: First-line and r/r CLL/SLL — **Grade I** recommendation
- ✓ **MZL**: **Grade I** recommendation
- ✓ **MCL**: First-line treatment of MCL — **Grade II** recommendation.

<sup>1</sup>**Indications included in NRDL:** adult patients with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma (SLL) who have received at least one prior therapy (r/r CLL/SLL), adult patients with mantle cell lymphoma who have received at least one prior therapy (r/r MCL), and adult patients with marginal zone lymphoma who have received at least one prior therapy (r/r MZL)

# Orelabrutinib: Strategic Lifecycle Management Driving Future Blockbuster Potential



# Innovative Pipeline: Accelerating Portfolio Towards Value Realization






Pre-IND	Phase 1/2	Phase 3	Registration	Approved
<b>ADC</b> <ul style="list-style-type: none"> <li>● Solid tumor</li> </ul>	<b>Mesutoclax (ICP-248)</b> <b>BCL2</b> <ul style="list-style-type: none"> <li>● AML(CHN, Global)</li> <li>● MDS(CHN, Global)</li> </ul>	<b>Orelabrutinib</b> <b>BTK</b> <ul style="list-style-type: none"> <li>● TN MCL (CHN)</li> <li>● MZL confirmatory (CHN)</li> </ul>	<b>Orelabrutinib</b> <b>BTK</b> <ul style="list-style-type: none"> <li>● r/r MZL (SG)</li> <li>● r/r MCL (AU)</li> </ul>	<b>Orelabrutinib</b> <b>BTK</b> <ul style="list-style-type: none"> <li>● TN CLL/SLL (CHN)</li> <li>● r/r CLL/SLL (CHN)</li> </ul>
<b>IL17</b> <b>Oral</b> <ul style="list-style-type: none"> <li>● Autoimmune disease</li> </ul>	<b>Soficitinib (ICP-332)</b> <b>TYK2/JAK1</b> <ul style="list-style-type: none"> <li>● Prurigo nodularis (Global) Phase 2</li> </ul>	<ul style="list-style-type: none"> <li>● ITP (CHN)</li> <li>● SLE (CHN) Phase 2b</li> <li>● PPMS (Global)</li> <li>● SPMS (Global)</li> </ul>	<b>Zurletrectinib</b> <b>NTRK</b> <ul style="list-style-type: none"> <li>● NTRK fusion-positive cancers (CHN)</li> </ul>	<ul style="list-style-type: none"> <li>● r/r MCL (CHN)</li> <li>● r/r MCL (SG)</li> <li>● r/r MZL (CHN)</li> </ul>
<b>Others</b> <b>Oral</b> <ul style="list-style-type: none"> <li>● Autoimmune disease</li> </ul>	<b>ICP-189+EGFRi</b> <b>SHP2</b> <ul style="list-style-type: none"> <li>● NSCLC (CHN)</li> </ul>	<b>Tafasitimab</b> <b>CD19</b> <ul style="list-style-type: none"> <li>● DLBCL (CHN)</li> </ul>		<b>Tafasitimab</b> <b>CD19</b> <ul style="list-style-type: none"> <li>● r/r DLBCL (Mainland CHN)</li> <li>● r/r DLBCL (GBA)</li> <li>● r/r DLBCL (HK)</li> <li>● r/r DLBCL (Macao)</li> <li>● r/r DLBCL (TW)</li> </ul>
	<b>ICP-B02</b> <b>CD3XCD20</b> <ul style="list-style-type: none"> <li>● NHL (CHN)</li> </ul>	<b>Mesutoclax</b> <b>BCL2</b> <ul style="list-style-type: none"> <li>● TN CLL/SLL-FDT (CHN) +Orela</li> <li>● BTKi treated MCL Phase 2 registrational</li> </ul>		
	<b>ICP-490</b> <b>E3 Ligase</b> <ul style="list-style-type: none"> <li>● NHL (CHN)</li> </ul>	<b>Soficitinib (ICP-332)</b> <b>TYK2/JAK1</b> <ul style="list-style-type: none"> <li>● Atopic Dermatitis (CHN)</li> <li>● Vitiligo (CHN) Phase 2/3</li> </ul>		
	<b>ICP-B05</b> <b>CCR8</b> <ul style="list-style-type: none"> <li>● Hemato-oncology (CHN)</li> </ul>	<b>ICP-488</b> <b>TYK-2</b> <ul style="list-style-type: none"> <li>● Psoriasis (CHN)</li> </ul>		
	<b>ICP-B794</b> <b>B7H3 ADC</b> <ul style="list-style-type: none"> <li>● SCLC</li> </ul>			



- Hemato-oncology
- Autoimmune Disease
- Solid Tumor

A person wearing a blue cleanroom suit, hood, and mask is reviewing a large sheet of paper in a pharmaceutical facility. The background shows complex industrial machinery with pipes and metal structures. The image is overlaid with a light blue gradient on the left side.

# **A Leading Hemato- oncology Franchise**

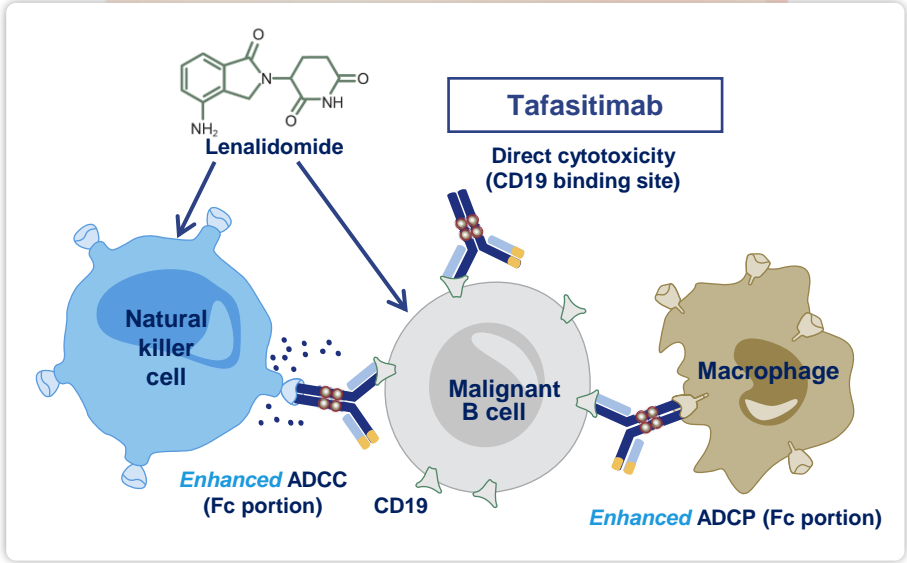
# Hemato-oncology: Marketed and Phase 3 Clinical Products

Assets	Target	Indication	Clinical Trial	Registration	Market
	BTK	r/r CLL/SLL			★ CHN
		r/r MCL			★ CHN,SG
		r/r MZL			★ CHN
		1L CLL/SLL			★ CHN
		1L MCL	Global Ph3 ongoing		
	CD19	MZL Confirmatory Trial	Ph3 ongoing		
		r/r DLBCL			★
		DLBCL Confirmatory Trial	Ph3 ongoing		
	BCL2	1L CLL/SLL-FDT	Ph3 registrational trial ongoing, combo with Orela		
		r/r MCL (BTKi treated)	Registrational trial initiated		
		1L AML	Dose expansion in CHN & global		
		MDS	Global study initiated		
Others (ICP-490, -B02, -B05, etc.)		Hemato-oncology	Clinical trials ongoing in multiple indications		

 Marketed  
 Clinical-Stage



# Tafasitamab (CD19): Best Profile Potential for r/r DLBCL, Unlocking Strong Market Potential



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	Approved	42	23	12.6	9.5	12.4
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

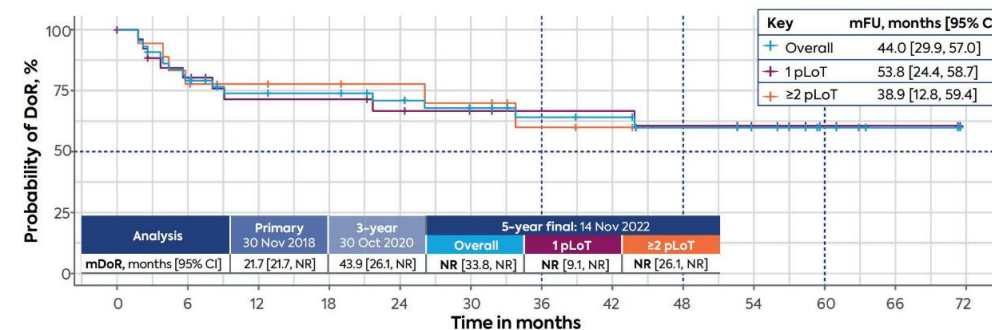
Non-head-to-head comparison

Source: Cheson BD, et al. Blood Cancer J. 2021;11:68–78.  
Frost & Sullivan Analysis as of the end of 2022; Insight; Pharma Intelligence

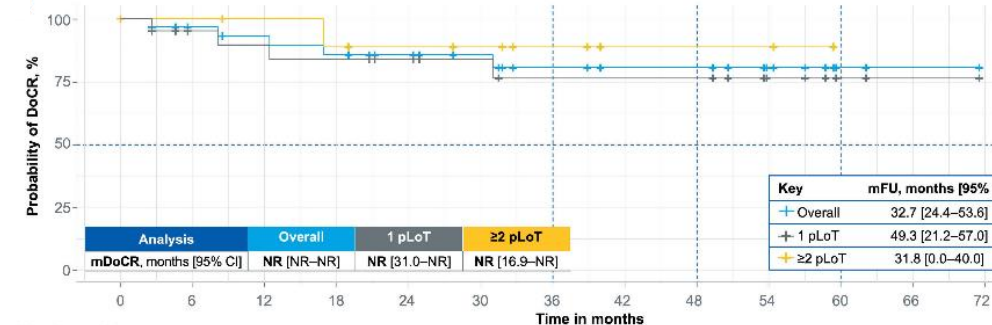
# Tafasitamab (CD19): Best Profile Potential for r/r DLBCL, Robust Clinical Efficacy

- ✓ Greater China's **first CD19-targeted antibody** for **r/r DLBCL**
- ✓ Robust **clinical efficacy**, with high overall response rate and durable remissions demonstrated in pivotal studies
- ✓ Large patient population with high unmet need, as **~40-55%**<sup>1</sup> of DLBCL patients relapse or become refractory after standard therapy
- ✓ Included as a Class II recommended regimen in the **CSCO Guidelines** for adult r/r DLBCL patients ineligible for ASCT
- ✓ **Strong commercial momentum** and first-mover advantage, well-positioned to capture significant market share

With a median follow-up of 44.0 months, the mDOR was not reached<sup>1</sup>

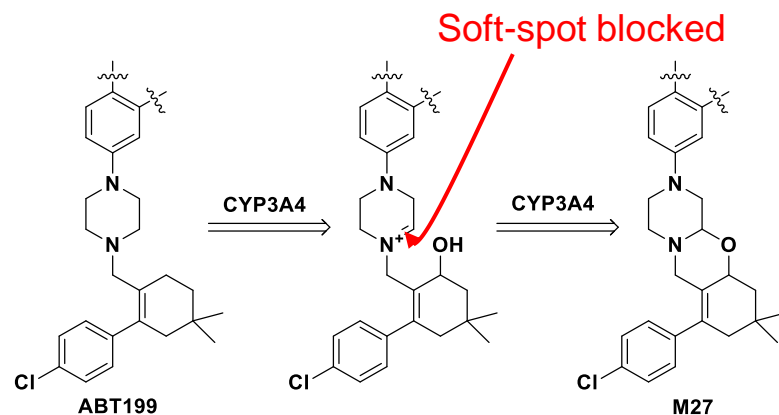


32.7-month median follow-up  
5-year DoCR rate estimated at 80.7%<sup>1</sup>



<sup>1</sup> Source: Crump M, Cancer Network, 2023; Epperla N, Exp Hematol Oncol, 2023; Cheson BD, ASCO Educ Book, 2023; Xu W, Cancer Commun (Lond), 2021 (CSCO Guidelines)

# Mesutoclax (ICP-248): A Novel BCL-2 Inhibitor with Great 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  $IC_{50} \leq 0.82 \mu M$



Significant inhibition of P-gp and BCRP by Venetoclax and M27 with  $IC_{50} \leq 1.48 \mu M$

## Advantages of Mesutoclax



Eliminated major metabolite



Significantly higher exposure



Reduced hematological toxicity



Reduced DDI risks



Excellent efficacy & safety profile

\* Venetoclax FDA non-clinical toxicology review

CYP: Cytochrome P450 proteins; BCRP: breast cancer resistance protein; DDI: drug-drug interaction; PK: Pharmacokinetics

# Mesutoclax (ICP-248): Differentiated Profile Driving High Possibility of Success

Ph3 registrational trial Combo with Orelabrutinib for 1L CLL/SLL-FDT ongoing in CHN

Registrational trial ongoing  
First BCL-2 inhibitor in China to receive Breakthrough Therapy Designation

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

	Orela+Mesutoclax	Ibru + Ven <sup>1</sup>	Acala + Ven <sup>2</sup>
Sample Size	42	106	291
ORR	100%	86.8%	92.8%
CRR	57.1%*	36.7%	NA
uMRD	65%** W36	45.3% EOT+3	34.4% EOT
TLS	0	0	0.3%

Cutoff date: 2025-07-21

\* Complete remission in target lesion at RP3D per image

\*\* MRD checkpoint at 36<sup>th</sup> week of combo treatment

## BTKi-treated MCL

	Mesutoclax	Venetoclax <sup>3,4</sup>	Pirtobrutinib <sup>5</sup>
	BTKi+, N=25	BTKi+, N=17	cBTKi* Pretreated MCL N=90
ORR	84%	53%	57.8%
CRR	36%	18%	20.0%

Cutoff date: 2025-07-10

\* cBTKi: covalent Bruton tyrosine kinase inhibitor

# Mesutoclax (ICP-248): Advancing AML and MDS Programs with Strong Global Market Potential

1L AML: Dose expansion in CHN & global

MDS: Global study initiated

## 1L AML

	Mesutoclax	Venetoclax <sup>1</sup>	Lisaftoclax <sup>2</sup>	Sonrotoclax <sup>3</sup>
	N=17	N=286	N=39	N=79
CRR	70%	66.4%	51.3%	67.1%
uMRD*	57.1%	23.5%	NA	52.8%
SAE	5.7%	83%	43.3%	77.2%
60-D Mortality	0%	7% (30-day)	3.9%	3.8% (30-day)

Cutoff date: 2025-07-04

- ✓ **High likelihood of success in MDS**  
Mesutoclax demonstrated robust efficacy and a favorable safety profile, positioning it for a high probability of success in MDS
- ✓ **Large, fast-growing market opportunity**  
The global myelodysplastic syndrome drugs market size was valued at USD 4.55 billion in 2024 and is anticipated to reach around USD 11.17 billion by 2034<sup>4</sup>
- ✓ **Accelerate global clinical studies**  
Optimizing dose and safety in MDS can fast-track global registration trials, strengthening both clinical and commercial positioning

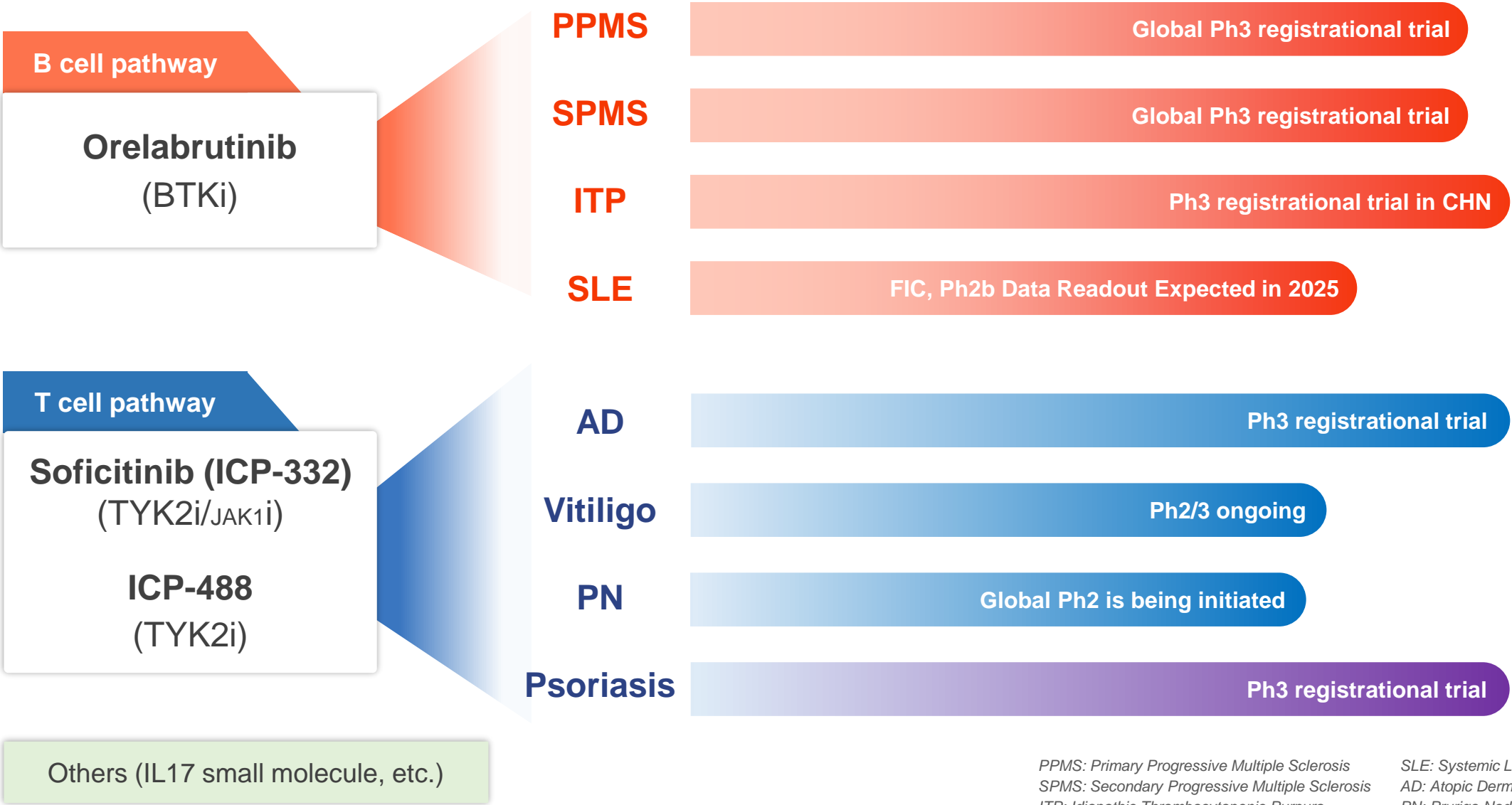
1. N Engl J Med 2020;383:617-29.  
2. 2024 ASCO  
3. 2025. EHA  
4. Nova One Advisor, Insight Code: 8817  
Note: \*Calculate in patients with composite complete remission



# **Well Positioned Portfolio in Autoimmune Diseases**



# Multiple Assets with Large Indications Progressed to Phase 3 Trials





## 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
- Ph2b Clinical Trial Enrollment Complete, **Data Readout Expected in 2025Q4**

**~8 million patients worldwide**

# Orelabrutinib in ITP: Large Market Opportunity Approaching NDA

## Disease & Patient Population

- ITP (Immune Thrombocytopenia) is a chronic autoimmune bleeding disorder with significant relapse rates after first-line therapy.
- ~300,000 chronic patients in China
- ~60,000 new cases annually

## Current Treatment Gaps

Current Therapy	Limitations
Steroids & IVIG	Short-term benefit, significant side effects
TPO-RA	Risk of thrombotic events, decreased efficacy with prolonged treatment
Others	Lack of durable, safe oral options

## Orelabrutinib's Advantage

Inhibits abnormal B-cell activation & autoantibody production with wider safety margin and convenient oral dosing

## Market Potential

China's large ITP patient base and growing diagnosis rate create a significant market opportunity worth hundreds of millions USD

## Key Milestones

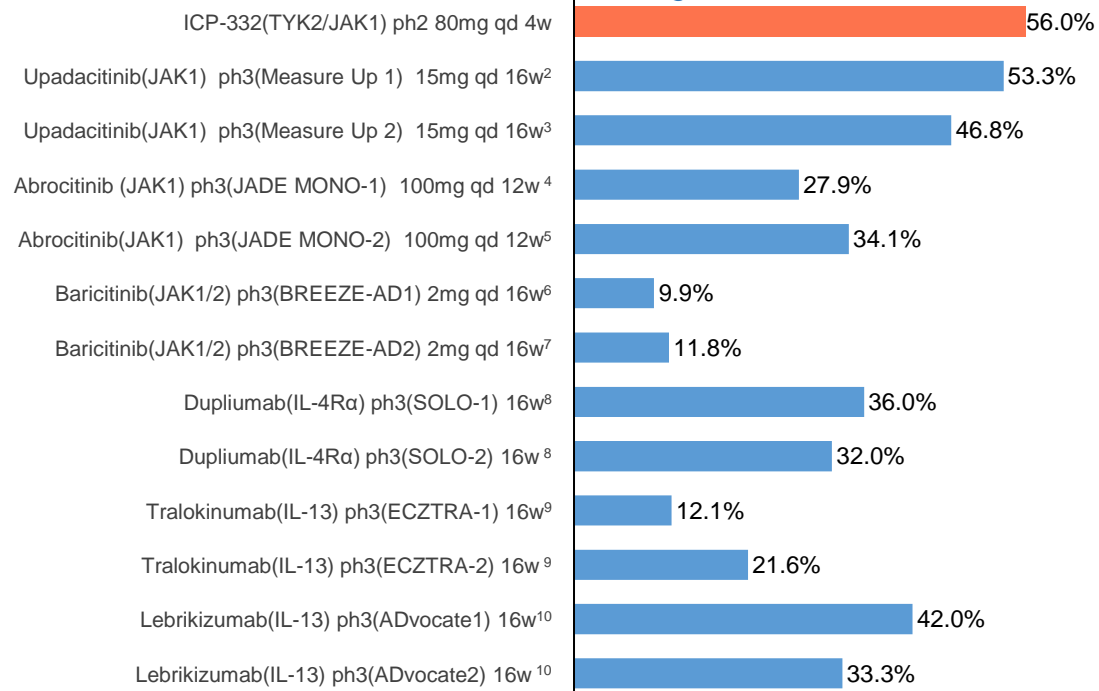
2025 H1: Ph3 enrollment completed  
2026 H1: NDA filing expected

Poised to address the significant unmet need in ITP – strong potential to become the next growth driver.

# Soficitinib (ICP-332), ICP-488: Two Differentiated TYK2 Inhibitors with 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

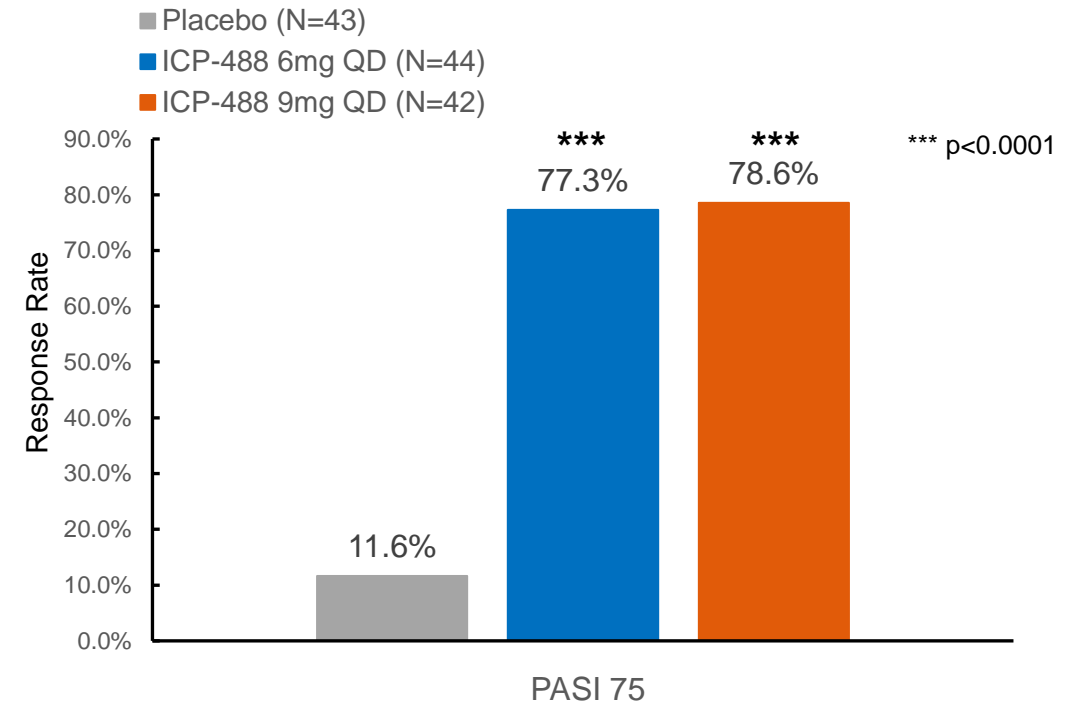


# Not a head-to-head comparison

- ✓ Ph3 registrational trial for AD ongoing
- ✓ Ph2/3 trial for vitiligo ongoing
- ✓ Ph2 global trial for prurigo nodularis is being initiated

## ICP-488 Ph2 Psoriasis

ICP-488 demonstrates outstanding efficacy in Ph2 trial for Psoriasis



- ✓ Ph3 registrational trial for psoriasis initiated, patient enrollment ongoing



# Oral Therapies for Comprehensive Coverage of Autoimmune Diseases

Orelabrutinib (BTKi)

Soficitinib (ICP-332) (TYK2/JAK1i)

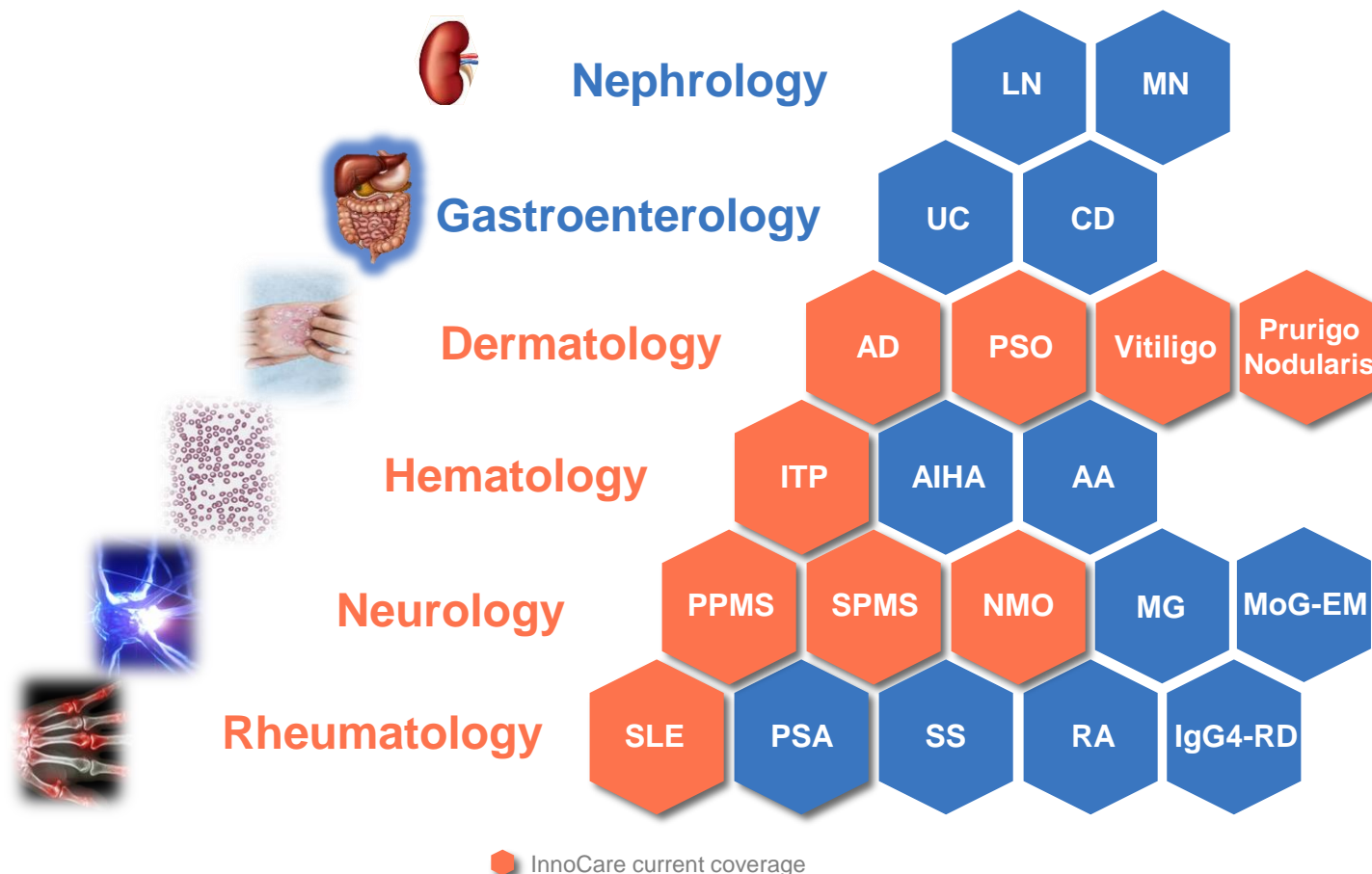
ICP-488 (TYK2i)

IL-17 (small molecule)

Project 40 (cyclic peptide)

Projects 42 & 43 (small molecule)

Project 44 (molecular glue)



■ Clinical  
■ Pre-clinical

LN: Lupus Nephritis  
MN: membranous nephropathy  
UC: Ulcerative Colitis  
CD: Crohn disease

AA: Aplastic anemia  
AIHA: Autoimmune hemolytic anemia  
NMO: Neuromyelitis optica  
MG: Myasthenia gravis

MoG-EM: MOG antibody-associated encephalomyelitis  
SS: Sjogren syndrome  
RA: Rheumatoid Arthritis  
IgG4 RD: IgG4 related disease

A close-up photograph of a person in a white lab coat and white gloves using a pipette to transfer liquid into a small vial. The person is also wearing safety glasses. The background is a blurred laboratory setting. The text "Innovative Solid Tumor Assets" is overlaid on the left side of the image.

# **Innovative Solid Tumor Assets**

## Precision Medicine

Benefit patients more

### Zurletrectinib (ICP-723)

- ✓ Second-Generation TRKi for NTRK gene fusion-positive patients registrational trial completed
- ✓ NDA submitted in March 2025, accepted under priority review

## 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 approved in July and clinical trial to commence soon
- ✓ PoC in 2025

# Design & Advantage of InnoCare's Proprietary ADC Platform



## Novel Connector

- Irreversible connector
- Prevent thiol exchange

## Hydrophilic Linker

- Allows high DAR
- Improves stability

## Effective Payload

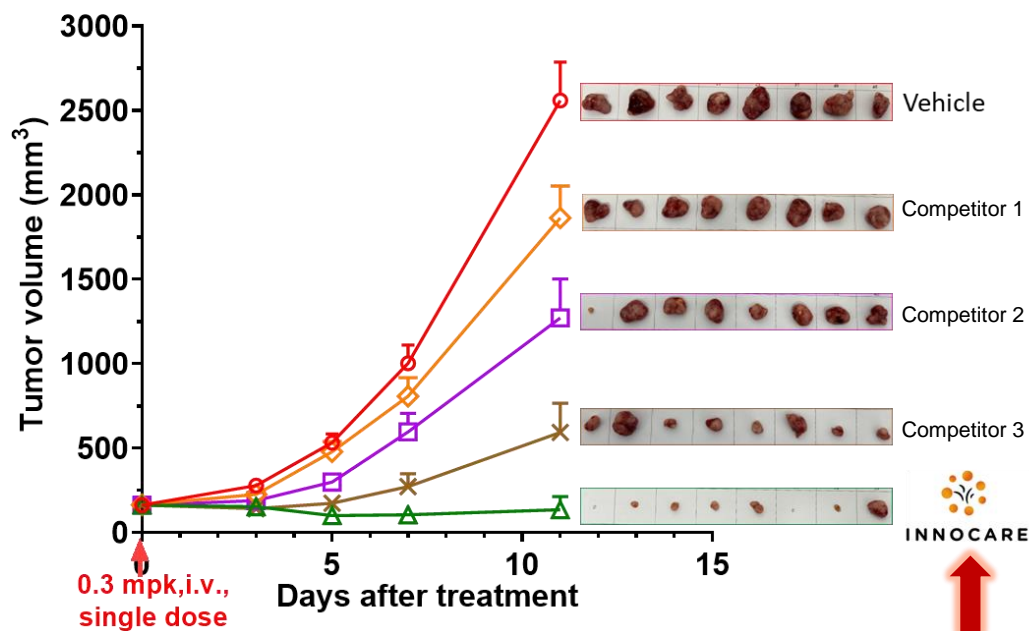
- Potent
- Bystander effect
- Tumor-specific release
- Rapid clearance

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

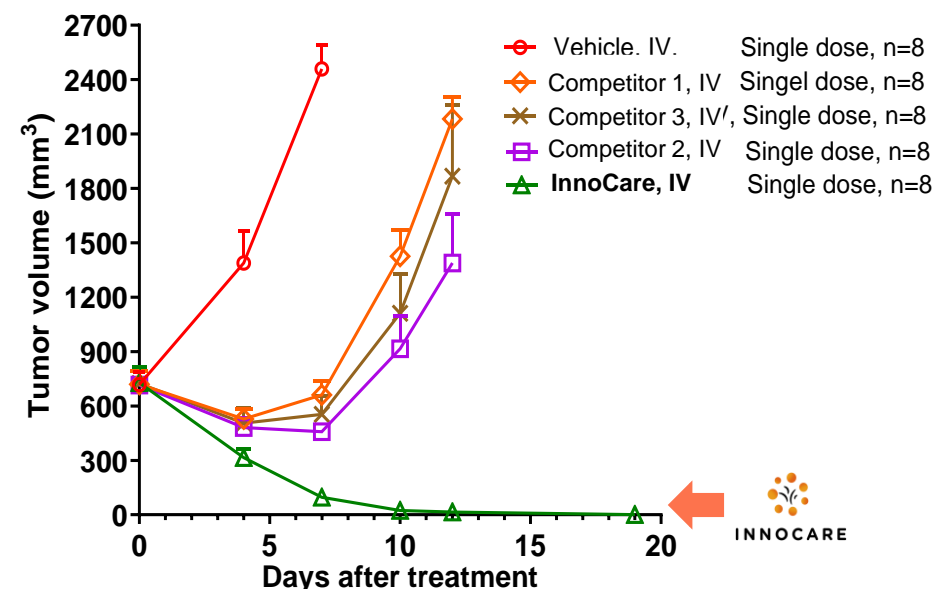
## ICP-B794 Demonstrates Superior Anti-Tumor Activity in Animal Model Compared to Others

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

Mouse CDX model



Xenograft CDX model (NSCLC)



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

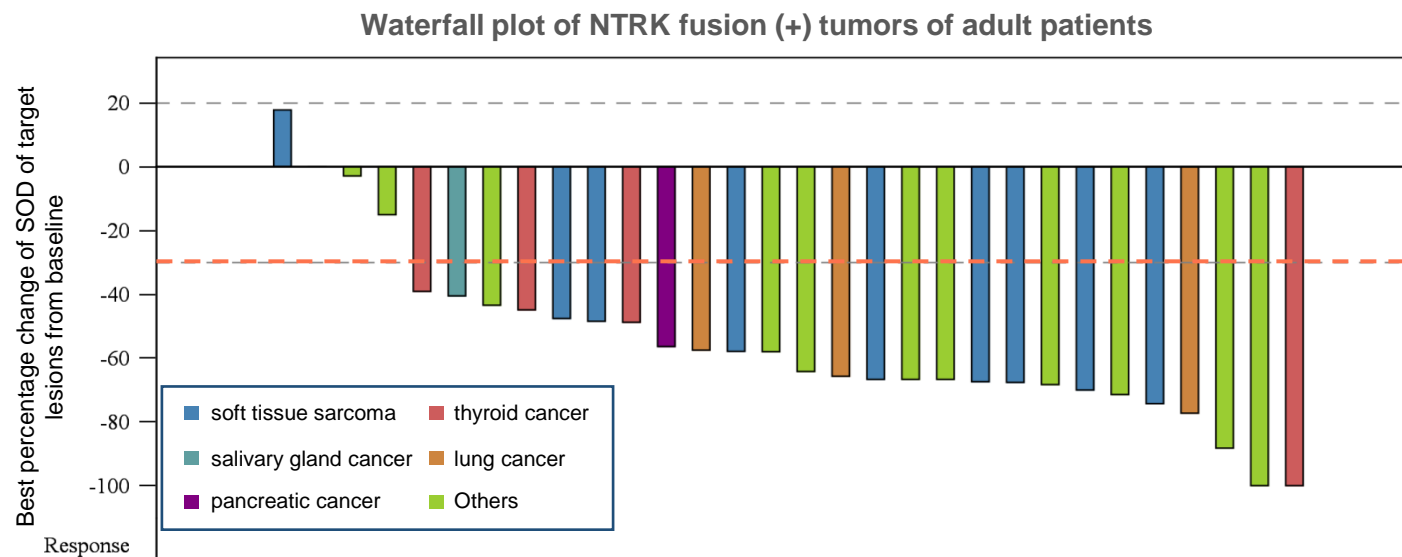


**Zurletrectinib (ICP-723): 2<sup>nd</sup> Generation TRKi for the Treatment of Tumors with NTRK Gene Abnormalities, NDA accepted under priority review**






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

## 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 Upcoming Milestones

	Assets	Milestones
<b>Commercialization &amp; BD</b>	<b>Commercialization</b>	Rapid sales growth
	<b>BD</b>	Get more BD deals done
 <b>Hemato-oncology</b>	<b>Orelabrutinib</b>	Ph3 registrational trial for combination with ICP-248 in 1L CLL/SLL-FDT complete patient enrollment
	<b>Mesutoclax (ICP-248)</b>	Data readout: Combination with orelabrutinib in 1L CLL/SLL Ph2 trial longer efficacy; BTKi-treated MCL
		Accelerate patient enrollment in registration trial for BTKi-treated MCL
		Aim to get data to support 1L AML registration trial
		Aim to get data to support MDS registration trial
 <b>Autoimmune Diseases</b>	<b>Orelabrutinib</b>	Completion of ITP Ph3 registration trial
		Global Ph3 registrational trial initiation in PPMS, FPI
		Global Ph3 registrational trial initiation in SPMS, FPI
		Data readout: SLE Ph2b study
	<b>Soficitinib (ICP-332)</b>	Completion of patient enrollment for Ph3 AD trial
		Completion of patient enrollment for Ph2 vitiligo trial
		Global Ph2 trial in PN, FPI
	<b>ICP-488</b>	Completion of patient enrollment for Ph3 psoriasis trial
 <b>Solid Tumor</b>	<b>Zurletrectinib (ICP-723)</b>	NDA approval in adults and adolescents
		Pediatric patients NDA Submission in CHN
	<b>ICP-B794</b>	FPI & Clinical PoC by the end of 2025



INNOCARE

*Empowering the Future Together*

*Thank you for your attention!*