

The logo consists of a white, stylized mountain range with three peaks, overlaid on a background of a real mountain range under a blue sky.

EVEREST MEDICINES

2022 Earnings Presentation

March 2023

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INVESTMENT HIGHLIGHTS



4 near-term product launches with aggregate peak sales potential of RMB 10bn:

- Xerava – approved
- Nefecon – 2023 2H
- Taniborbactam – 2024
- Etrasimod - 2024



Therapeutic area leadership in renal disease and infectious disease with large unmet needs in Asia



Strong discovery capabilities anchored in clinically-validated mRNA technology platform



Strong balance sheet with pro forma cash balance of US\$ 432m

OUR PATH FORWARD – KEY STRATEGIC PRIORITIES














- Commercialize Nefecon successfully
- Advance Ever-001(BTK inhibitor) into phase II for glomerular disease
- Multiple pre-clinical candidates
- Strategically in-license differentiated assets

- Bivalent EVER-COVID19-M1 EUA
- Build discovery pipeline of therapeutic cancer vaccines
- Expand infectious disease vaccines pipeline
- Ensure high quality Jiashan site operation (GMP/GXP)














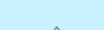





- Maximize Xerava™ commercial value
- Accelerate the development of Taniborbactam and EVER206 (SPR206)

BROAD PIPELINE WITH FIRST-IN-CLASS OR BEST-IN-CLASS POTENTIAL – 7 BLA/NDA APPROVALS EXPECTED IN THE NEXT FIVE YEARS

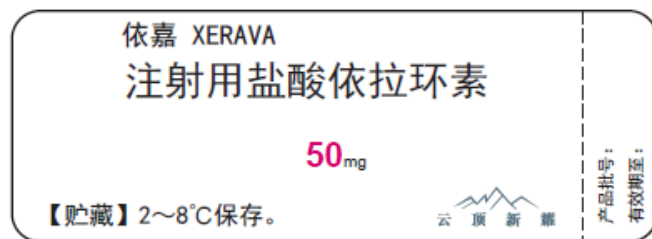
NDA/BLA approval	Molecule (Modality)	Partner	Commercial Right (In-licensing time)	Indication	Everest Clinical Status						Global Clinical Status
					Pre-clinical	Phase1	Phase2	Phase3	BLA/NDA Application	Approval	
2023	Tarpeyo (Nefecon)		Greater China, Singapore, South Korea	IgA nephropathy	[Progress bar: Pre-clinical to BLA/NDA Application]						NDA approved in US, EU
	Xerava™ (eravacycline)		Greater China, South Korea, SE Asia	cIAI	[Progress bar: Pre-clinical to Approval]						NDA approved in US, EU, UK
	EVER-COVID19-M1		Greater China, SE Asia, Pakistan	2 nd generation COVID-19 booster	[Progress bar: Pre-clinical to Phase 1]						Pre-clinical
2024	Taniborbactam		Greater China, South Korea, SE Asia	cUTI	[Progress bar: Pre-clinical to Phase 3]						Phase 3
	Etrasimod		Greater China, South Korea	Ulcerative Colitis	[Progress bar: Pre-clinical to BLA/NDA Application]						NDA filed in US and EU
2025 and beyond	Ralinepag		Greater China, South Korea	PAH	[Progress bar: Pre-clinical to BLA/NDA Application]						Phase 3
	XNW1011(EVER-001)		Worldwide	Glomerular disease	[Progress bar: Pre-clinical to Phase 1]						Phase 1b/2
	FGF401		Worldwide	HCC	[Progress bar: Pre-clinical to Phase 1]						Phase 1/2
	EVER206 (SPR206)		Greater China, South Korea, SE Asia	Gram negative infections	[Progress bar: Pre-clinical to Phase 1]						Phase 1
	Rabies mRNA Vaccine		50% Worldwide rights	Rabies	[Progress bar: Pre-clinical to Phase 1]						Pre-clinical
	Monoclonal Antibody	Self-developed	Worldwide	Glomerular disease	[Progress bar: Pre-clinical to Phase 1]						Pre-clinical
	mRNA Prophylactic Vaccine		50%/100% Worldwide rights	Multiple programs for infectious diseases	[Progress bar: Pre-clinical to Phase 1]						Pre-clinical
	mRNA Cancer Vaccine	Self-developed	Worldwide	Multiple programs against solid tumors	[Progress bar: Pre-clinical to Phase 1]						Pre-clinical

Abbreviations: HCC= hepatocellular carcinoma; IgA= immunoglobulin A; PAH=pulmonary arterial hypertension; cIAI=complicated intra-abdominal infections; cUTI=complicated urinary tract infections; IND= investigational new drug; NDA=new drug application; SE Asia= Southeast Asia; US=United States; Greater China= PRC, Hong Kong SAR, Macau SAR and Taiwan.

BUSINESS ACHIEVEMENTS IN 2022 AND YTD 2023

Therapeutic Area	Molecule	Milestone	
Renal Disease	Nefecon	 Positive topline from Part B of Phase 3 NeflgArd trial  NDA acceptance in China for the treatment of IgAN  Chinese subpopulation Phase 3 data topline readout  Taiwan FDA granted Accelerated Approval Designation  South Korea MFDS granted ODD and Fast Track designation  EU approval	
		EVER001 (XNW1011)	 IND approval for Phase 1b/II study in glomerular disease
		PTX-COVID19-B	 Positive Phase 2 data readout
mRNA	mRNA rabies vaccine	 Achieved Proof-of-concept milestone	
Infectious Disease	Xerava™	 NDA approval in China  NDA approval in Hong Kong  NDA acceptance in Taiwan	
		Taniborbactam	 Positive topline from global Phase 3 trial
		EVER206 (SPR206)	 Positive topline from Phase 1 trial
Other TAs	Etrasimod	 NDA acceptance by US FDA and European Medicines Agency  Positive topline from global Phase 3 trial	
		Trodelvy	 Divested Trodelvy's regional rights for up to US\$480 million

XERAVA™ APPROVED IN CHINA FOR TREATMENT OF COMPLICATED INTRA-ABDOMINAL INFECTIONS



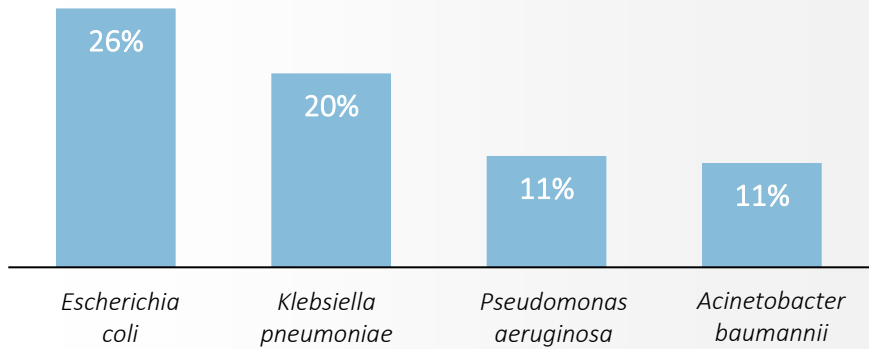
Approval on March 16,
2023



Commercial launch in
Q3 2023

CRITICAL UNMET MEDICAL NEEDS IN MDR GRAM-NEGATIVE INFECTIONS TREATMENT

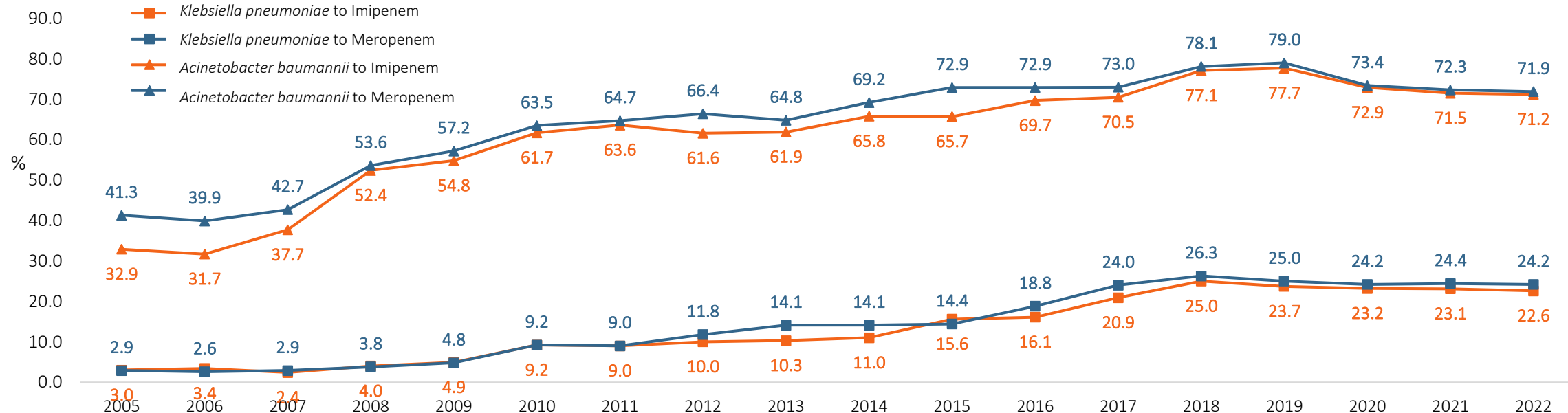
Dominant clinical Gram-negative pathogens (2022)



- ✓ *Escherichia coli*, *Klebsiella pneumoniae*, *Pseudomonas aeruginosa*, and *Acinetobacter baumannii* are the most common clinical Gram-negative pathogens.
- ✓ With increased use of carbapenem, carbapenem resistant pathogens have risen significantly over the past 10-15 years.
- ✓ Innovative and differentiated antibiotics are in urgent need to address Gram-negative infections, as patients with severe infections under critical care will likely only have time to use one round of antibiotic treatment

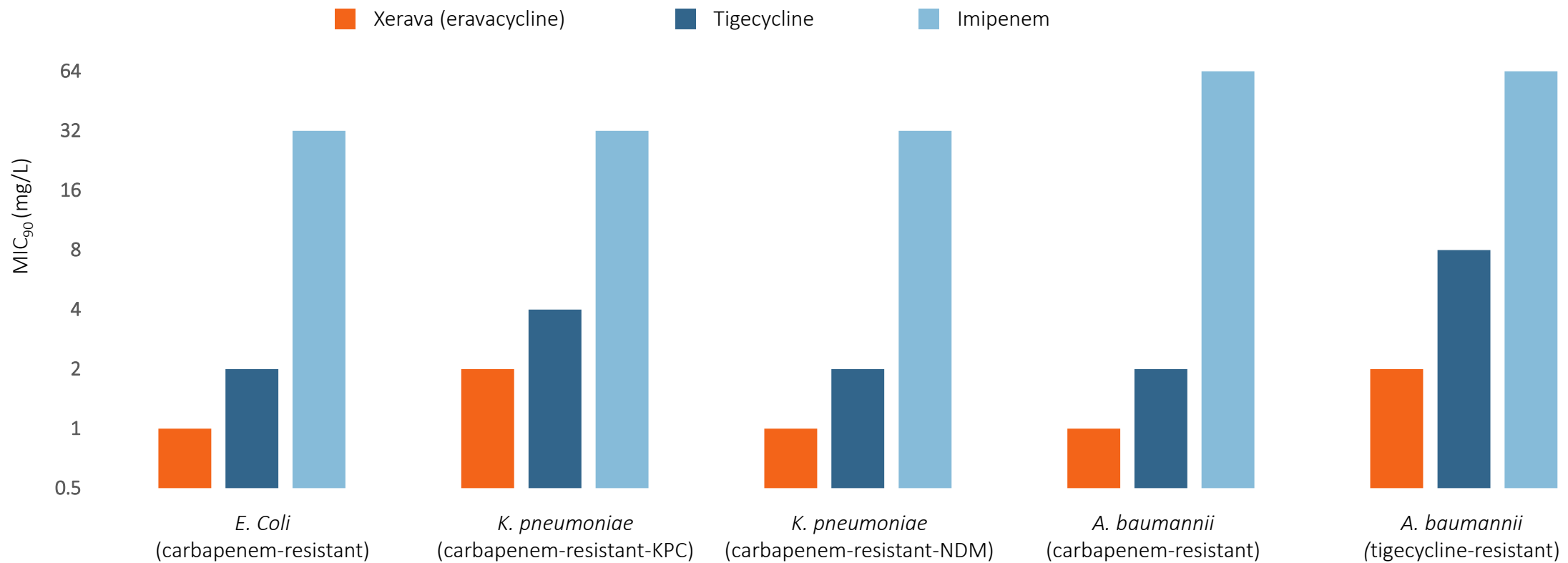
Carbapenem-resistant rate in China

Imipenem and meropenem are two major carbapenem antibiotics



XERAVA™ (ERAVACYCLINE) HAS SHOWN POTENT ANTIBACTERIAL ACTIVITY AGAINST CLINICALLY IMPORTANT ANTIBIOTIC-RESISTANT PATHOGENS IN IN-VITRO SUSCEPTIBILITY STUDIES CONDUCTED IN CHINA

MIC₉₀ distribution of eravacycline, tigecycline and imipenem against antibiotic-resistant gram-negative pathogens¹



Source: Zhao C, Wang X, Zhang Y, et al. BMC Infect Dis. 2019 Jun 10;19(1):508. ;Seifert H, Stefanik D, Sutcliffe JA, Higgins PG. Int J Antimicrob Agents. 2018 Jan;51(1):62-64

Abbreviations: MIC=minimum inhibitory concentration; KPC=Klebsiella pneumoniae carbapenemase; NDM=New-Delhi metallo beta-lactamase

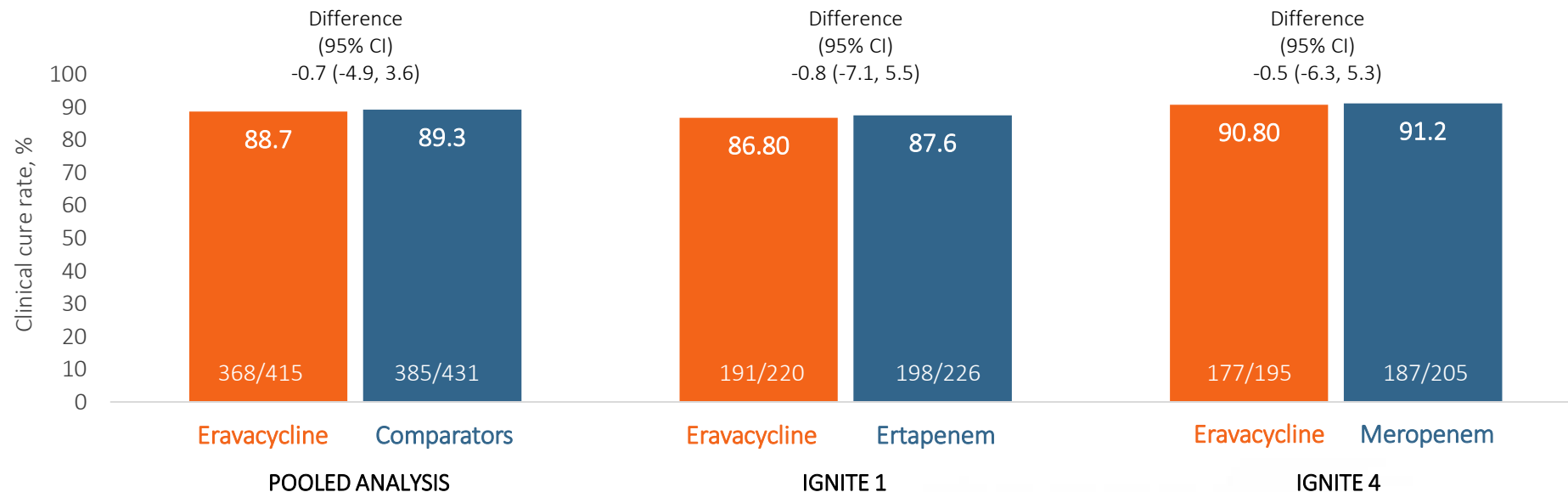
Note 1: No direct head-to-head data available. Caution advised when comparing across studies;

GLOBAL PIVOTAL STUDY RESULTS OF XERAVA™ SHOWN AS EFFECTIVE AS CARBAPENEMS IN cIAI

Efficacy demonstrated as a monotherapy in two global pivotal studies¹⁻⁴

- ✓ Proven as effective as Carbapenems in cIAI with non-inferiority demonstrated in 2 pivotal clinical trials, non-inferior to ertapenem (IGNITE1) and meropenem (IGNITE4)
- ✓ An alternative in increasing drug resistance due to ESBL and cabapenemases
- ✓ China bridging study completed in March 2021 demonstrates consistent result in efficacy and safety
- ✓ Well-tolerated

Clinical response in micro-ITT population at the TOC visit



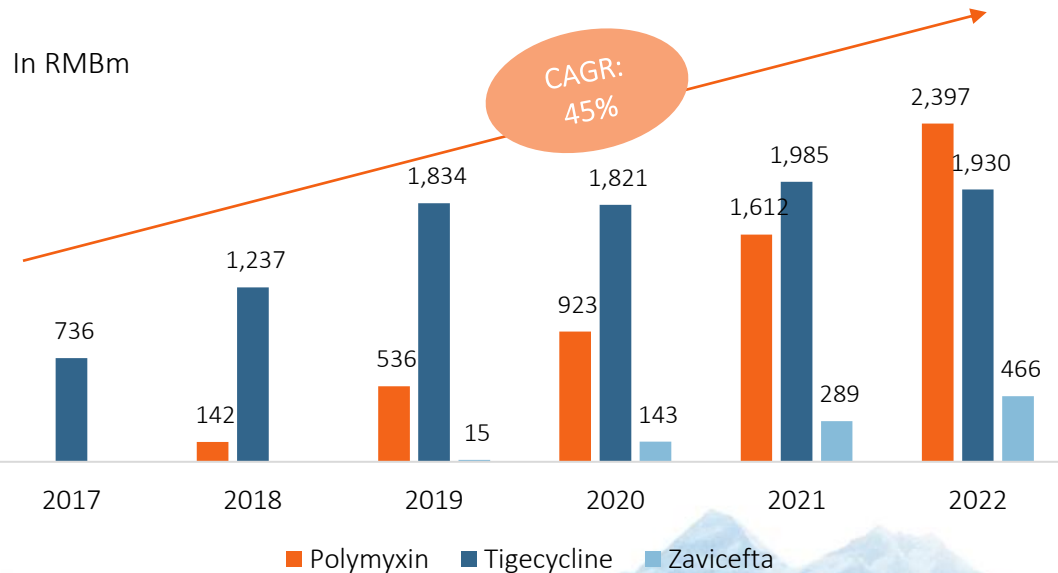
Sources: 1. XERAVA. Prescribing information. Tetrphase Pharmaceuticals, Inc.; Rev. 06/2020. 2. Data on file. Watertown, MA: Tetrphase Pharmaceuticals, Inc.; 2018. 3. Solomkin J, Evans D, Slepavicius A, et al. Assessing the efficacy and safety of eravacycline vs ertapenem in complicated intra-abdominal infections in the Investigating Gram-Negative Infections Treated with Eravacycline (IGNITE 1) trial: a randomized clinical trial. JAMA Surg. 2017;152(3):224-232. 4. Solomkin JS, Gardovskis J, Lawrence K, et al. IGNITE4: results of a phase 3, randomized, multicenter, prospective trial of eravacycline vs meropenem in the treatment of complicated intraabdominal infections. Clin Infect Dis. 2019;69(6):921-929.

Abbreviations: ESBL=extended-spectrum-lactamases;

LARGE MARKET POTENTIAL OF ANTIBIOTICS FOR MDR GRAM-NEGATIVE INFECTIONS IN CHINA

- ✓ **Tigecycline** (a tetracycline) achieved **sales of RMB ~2 billion in 2022 and volume of about 4.5m doses**. XERAVA™ (eravacycline) is a novel, fully synthetic, broad-spectrum, fluorocycline, parenteral antibiotic of the tetracycline class.
- ✓ Everest commenced XERAVA™ commercialization in Singapore in 2021 with est. **80% replacement** of Tigecycline volume.
- ✓ **Polymyxin** are increasingly used as **the last-line therapeutic options** for the treatment of infections caused by MDR Gram-negative bacteria. **Sales reached RMB ~2.4 billion in 2022.**
- ✓ Zavicefta® is the latest approved antibiotics for MDR Gram-negative bacteria. Achieved **sales of RMB 466 million in 2022.**
- ✓ High daily price of innovative antibiotics for MDR Gram-negative bacteria infections

Sales of Antibiotics for MDR Gram-negative Infections in China



Daily Price of Antibiotics for MDR Gram-negative treatment

Product Name	Daily Price (RMB)
Polymyxin (Polymyxin B and Colistin)	6,000-9,000
Zavicefta	4,000

CHINA COMMERCIAL LAUNCH PLAN OF XERAVALM



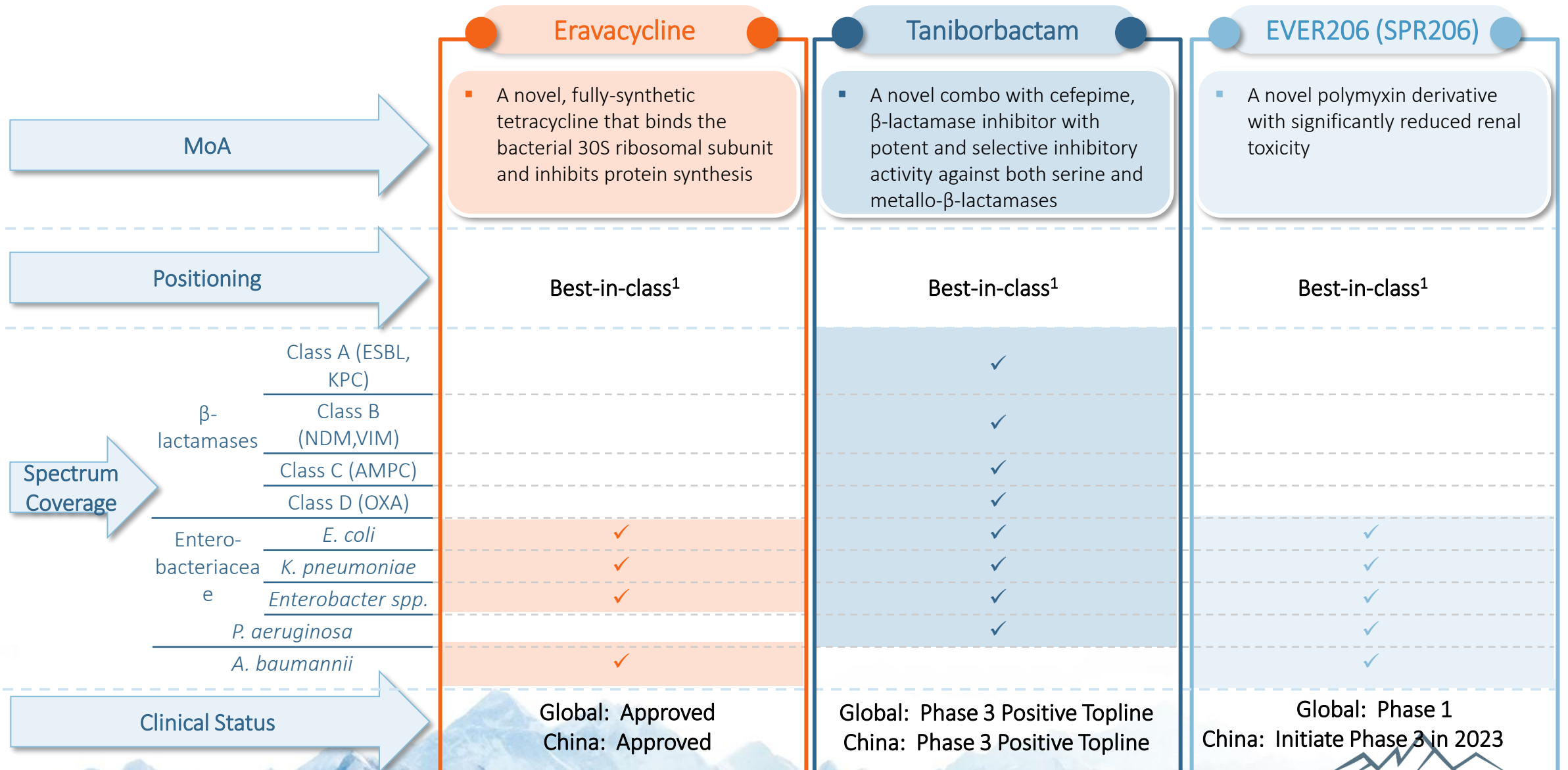
*Xerava has been recommended in multiple global treatment guidelines issued by Infectious Disease Society of America's (IDSA) and European Society of Clinical Microbiology and Infectious Diseases (ESCMID) as a treatment choice for multi-drug resistant gram-negative bacterial infections including Carbapenem resistant organisms. In addition, it was included in an expert consensus on the multi-disciplinary management of intra-abdominal infections by the Chinese Society of Surgery of Chinese Medical Association, Infectious Diseases Society for Evidence-based and Translational Medicine of Chinese Research Hospital Association and the Editorial Board of Chinese Journal of Surgery. In Feb. 2023, Xerava was also recommended in the Guidelines for the diagnosis, treatment, prevention and control of infections caused by carbapenem-resistant gram-negative bacilli.

XERAVA™ INTERNATIONAL COMMERCIAL PLAN



Singapore	<ul style="list-style-type: none">• Already launched in Singapore with in-house team• 80% replacement of Tigecycline market in listed hospital
Taiwan	<ul style="list-style-type: none">• Approval expected in 2H 2023• Commercialization partnership with TTY Biopharma
Hong Kong	<ul style="list-style-type: none">• NDA approved in October 2022• Commercial launch by end-2023
South Korea and certain Southeast Asia markets	<ul style="list-style-type: none">• Under discussion with regulatory authorities on regulatory pathway

OUR ANTIBIOTIC PORTFOLIO OF BEST-IN-CLASS THERAPIES FOR MDR GRAM- INFECTIONS



¹ With the potential.

**NEFECON: FIRST-IN-DISEASE THERAPY TARGETING IGA1, CHINA NDA APPROVAL EXPECTED IN 2H 2023 WITH
BREAKTHROUGH THERAPY DESIGNATION GRANTED**



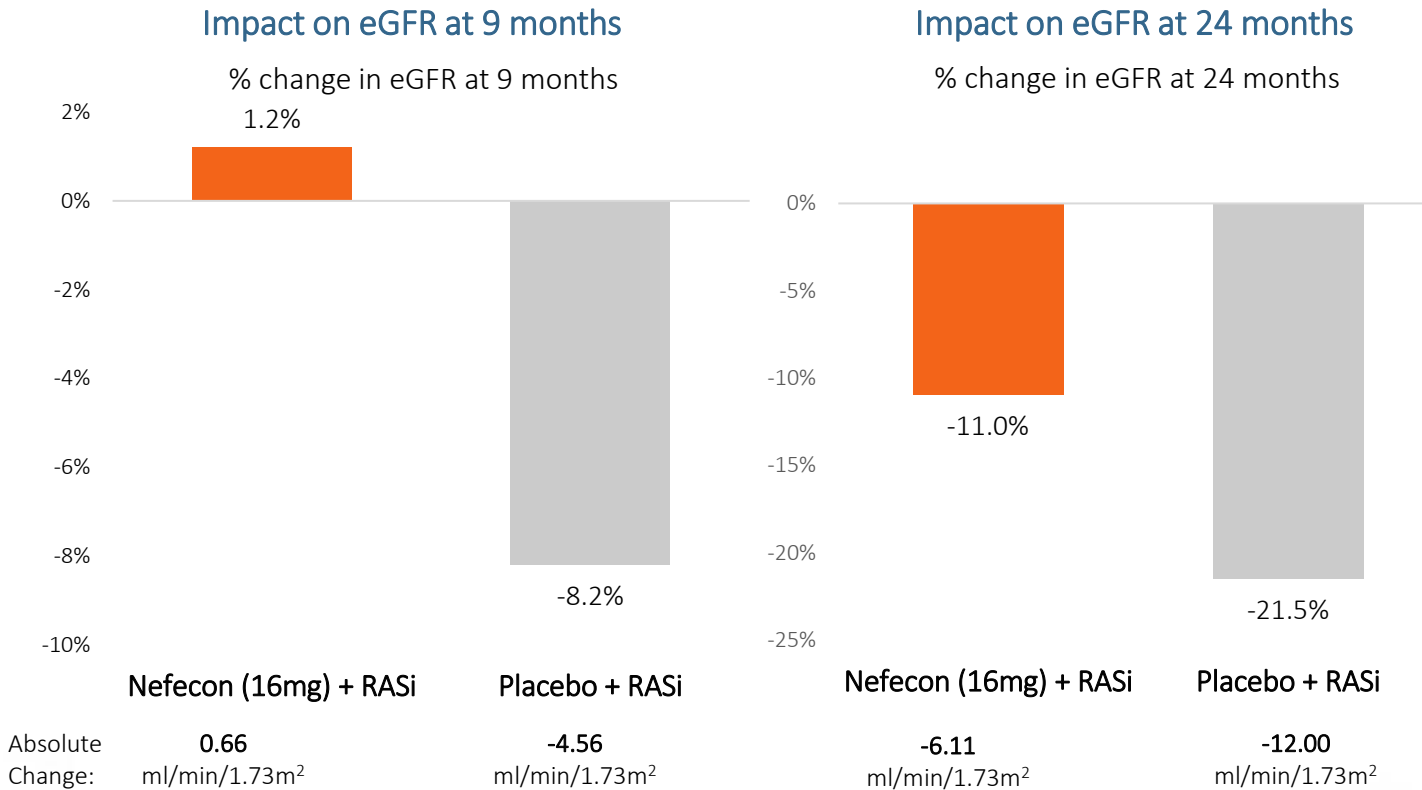
NEFECON[®]
budesonide delayed release capsules

耐赋康

布地奈德迟释胶囊

NEFECON PHASE 3 DATA: FIRST THERAPY TO DEMONSTRATE DELAY IN KIDNEY FUNCTION LOSS

- 9 month of dosing with 16mg Nefecon in 364 patients resulted in 50% less loss of kidney function vs placebo at 24 months
- Treatment benefit on eGFR was apparent across baseline UPCR subgroups.



Efficacy Findings:

- ✓ **Statistically significant eGFR stabilization with Nefecon 16mg** compared to placebo following 9 months treatment ($p < 0.0001$)
- ✓ After 9 months:
 - eGFR increase for Nefecon treated patients: 0.66ml/min/1.73m²
 - eGFR decline for placebo: 4.56ml/min/1.73m²
- ✓ After 24 months:
 - eGFR decline for Nefecon treated patients: 6ml/min/1.73m²
 - eGFR decline for placebo: 12ml/min/1.73m²

NEFECON PHASE 3 DATA: 2-YEAR SLOPE ANALYSIS SHOW eGFR IMPROVEMENT

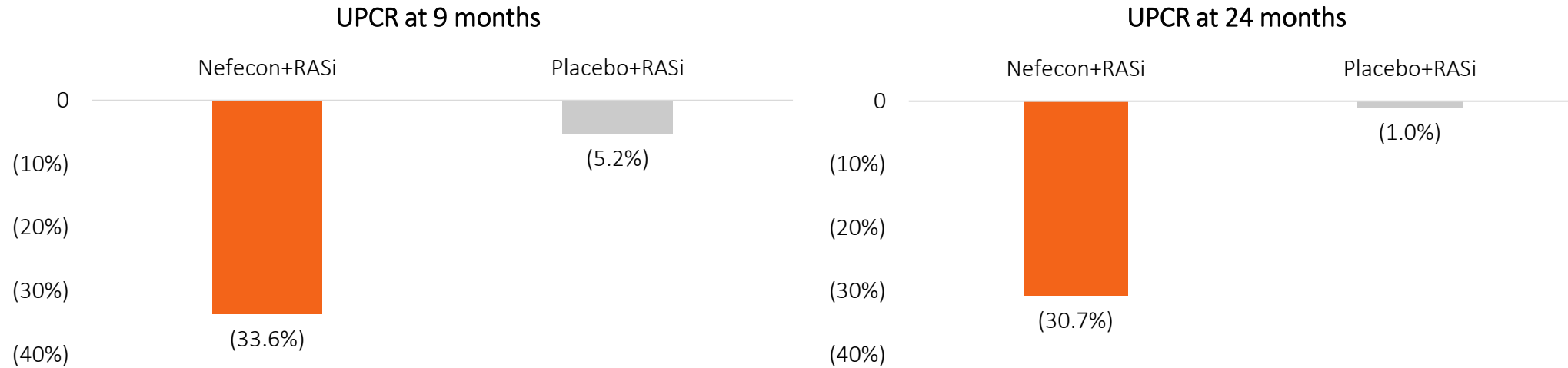
- ✓ Supportive analyses of eGFR 2-year slope were **statistically significant and clinically relevant**.
- ✓ **The improvement in total 2-year eGFR slope was estimated to be 1.8 to 3.0 ml/min/ 1.73m² per year** for Nefecon 16mg once daily compared to placebo, depending on the analysis method used.
- ✓ All estimates are well in excess of the difference per year in 2 year eGFR total slope required to predict clinically meaningful treatment effects on the composite endpoint of ESDR, eGFR < 15 ml/min/ 1.73m² or sustained doubling of serum creatinine (Inker et al 2019)

Nef-301 Part B eGFR 2-year analyses (Full Analysis Set N=364)

Difference between Nefecon 16mg and Placebo in 2-year eGFR total slope (ml/min/1.73m ² per year) 1-sided p-value	Absolute change in eGFR from baseline at 24 months	
	Nefecon 16mg (N=182)	Placebo (N=182)
1.8 – 3.0 with p-values <0.0001 – 0.0035	-6ml/min/1.73m ²	-12ml/min/1.73m ²

NEFECON PHASE 3 DATA: SUSTAINED UPCR REDUCTION AFTER TREATMENT STOPPED FOR 15 MONTH

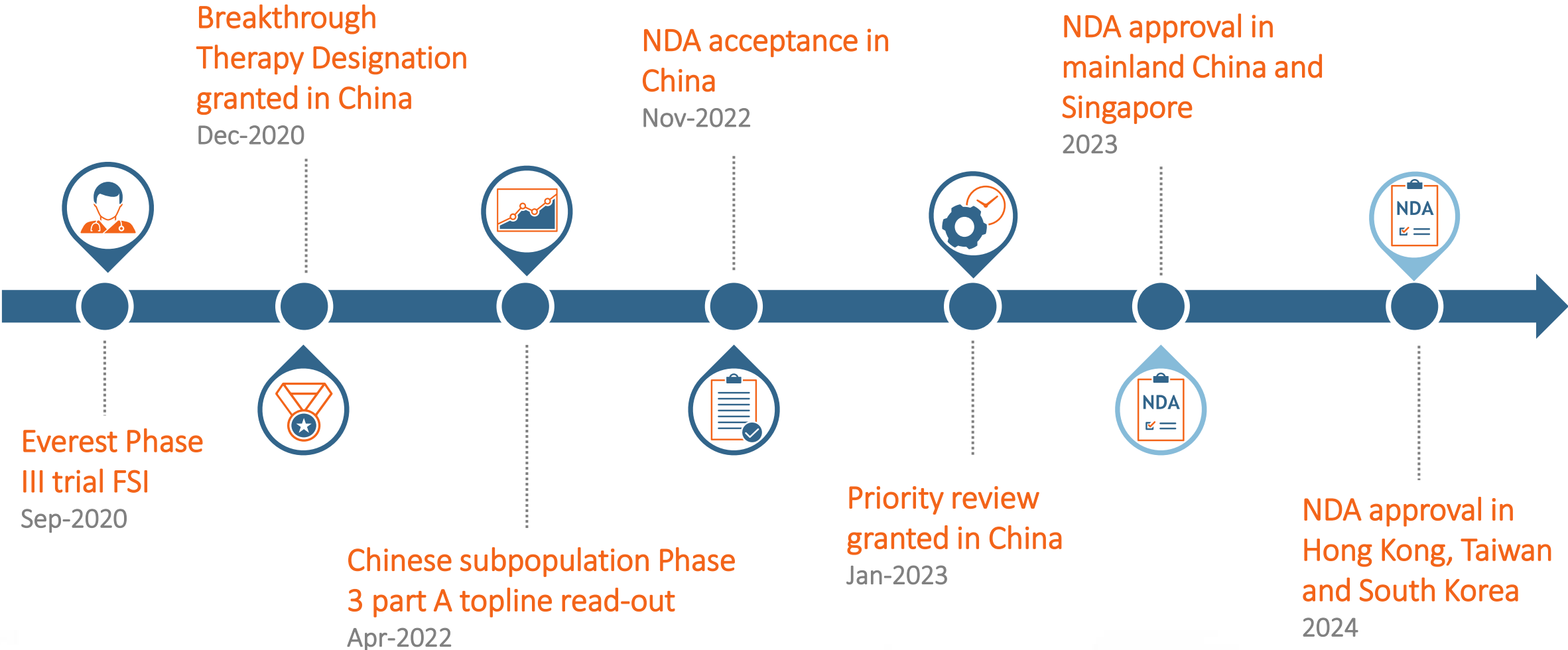
- ✓ The % reduction in UPCR for Nefecon 16mg versus placebo increased over time from 3 to 12 months, and thereafter returned to end of treatment (9 months) levels at the end of the follow-up period (15 months).
- ✓ **Sustained proteinuria effects and long lasting eGFR treatment benefit** even after 15 months after discontinuation, **supporting disease modification.**



Safety Findings:

- ✓ Nefecon was generally well tolerated
- ✓ The adverse event profile was similar to that reported in Part A:
 - The majority of TEAEs were of mild or moderate severity
 - The most commonly reported TEAEs observed with an increased frequency compared to placebo were oedema peripheral, hypertension, muscle spasms, and acne
 - TEAEs led to discontinuation of study drug in <10% of Nefecon-treated patients.

MULTIPLE REGULATORY APPROVALS OF NEFECON EXPECTED IN 2023 - 2024

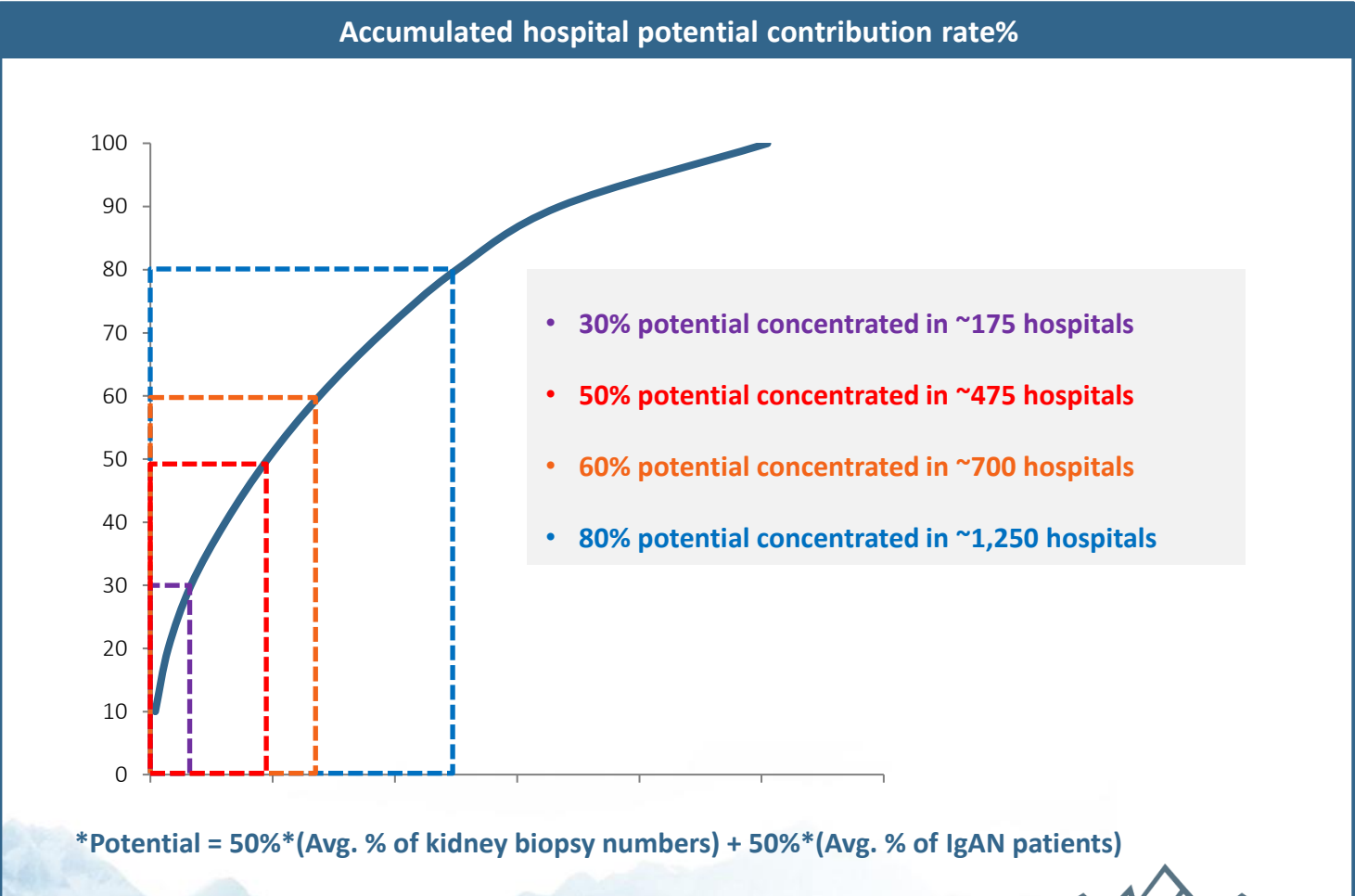
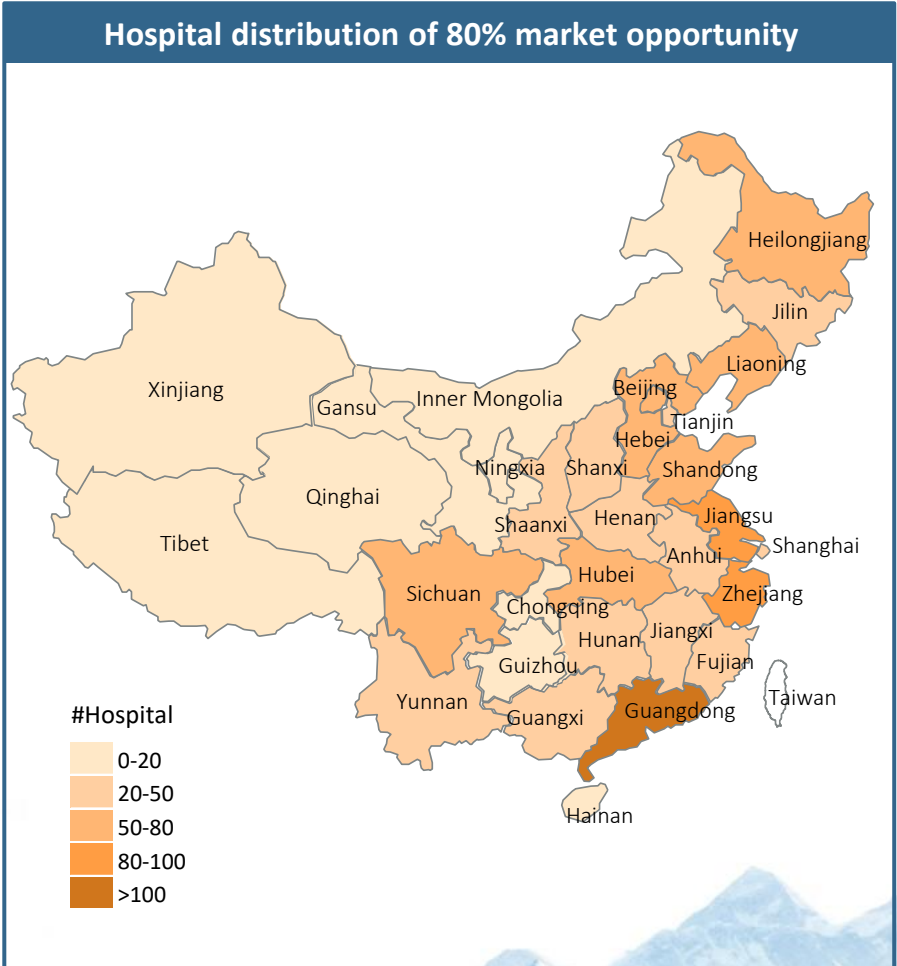


 Milestones achieved

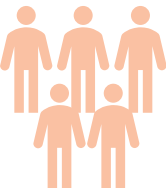




 Upcoming milestones

MARKET OPPORTUNITY IS CONCENTRATED IN SOUTHEASTERN AND CENTRAL CHINA, TOP 700 HOSPITALS REPRESENT 60% MARKET POTENTIAL

- NRDL listing expected to be 2025 1H
- Est. number of kidney biopsies nationwide: 346,196
- Est. new incidences of IgAN: 102,190



EVEREST IS DEDICATED TO BUILDING A RENAL PIPELINE TO ADDRESS SIGNIFICANT UNMET MEDICAL NEEDS FOR THE MOST COMMON PRIMARY GLOMERULAR DISEASES

Indication	IgA Nephropathy (IgAN)	Membranous Nephropathy (MN)	Minimal Change Disease (MCD)	Focal Segmental Glomerulosclerosis (FSGS)
Prevalence in China	 4-5M	 ~2M	 1-2M	 500K-1M
Available Therapy	<ul style="list-style-type: none"> Nefecon approved in US and EU No approved Therapy in China 	No approved Therapy	No approved Therapy	No approved Therapy
Everest's pipeline		EVER001 + Pre-clinical candidate (Monoclonal Antibody)		

Continuing to expand the pipeline through internal discovery and in-licensing

Source for prevalence: KOL and company internal estimate.

BUILDING COMMERCIALIZATION CAPABILITY TO SUCCESSFULLY LAUNCH XERAVA™ AND NEFECON

Build a lean and efficient commercial organization of experienced talents with proven track record

Dedicated marketing and sales team



Xuetao Wen
VP, IM&ID BU



Internal Medicines BU
(80-100 FTEs for Nefecon in 2023)

Infectious Disease BU
(100-120 FTEs for Xerava in 2023)

Shared functions



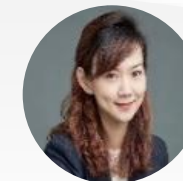
Feng Sheng
SVP, Market Access & GA



Song Rong
SD, Medical Affairs (IM)



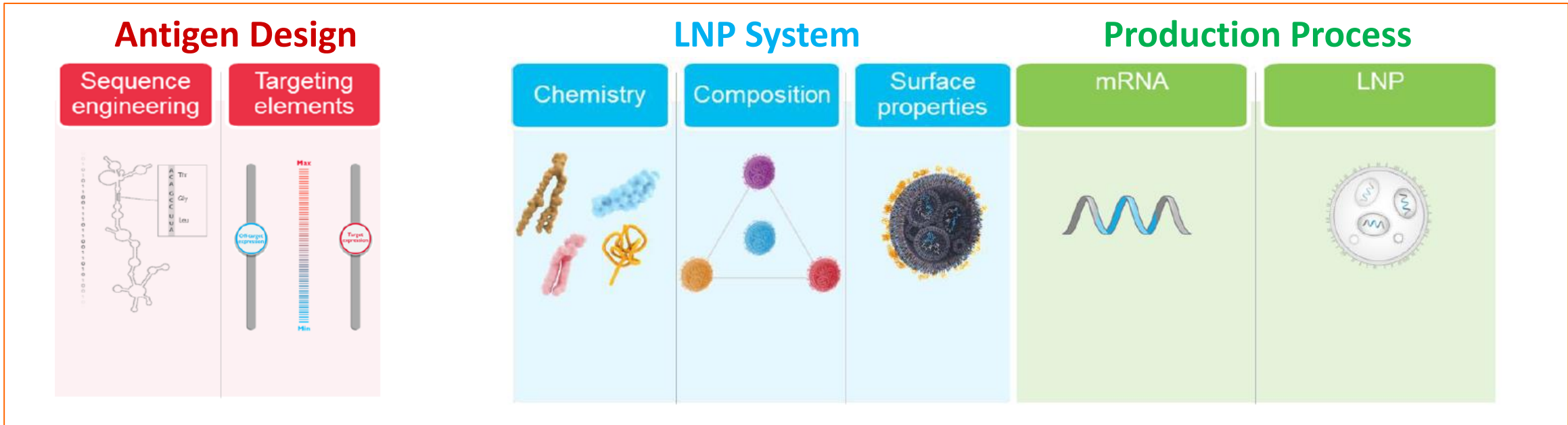
Jianzhong Tang
SD, Medical Affairs (ID)



Lilian Qian
VP, Channel and commercial operation excellence



EVEREST HAS ACCESS TO A LEADING MRNA PLATFORM – COVERING THE ENTIRE INDUSTRIAL CHAIN FROM ANTIGEN DESIGN TO COMMERCIAL PRODUCTION



mRNA Sequence Design System

- Completed the technology transfer of antigen design and sequence optimization, which has been **clinically-proven** in the development of PTX-COVID19-B mRNA vaccine.
- Our bioinformatics team utilizes clinically validated and the state-of-the-art algorithms to **improve antigen design** and facilitate the vaccine discovery

Continuous Development of the LNP System

- Co-development with Providence next generation lipid nanoparticle (LNP) delivery systems to enhance cell-mediated immunity.

Seasoned Multi-Disciplinary Vaccine R&D Team

- A vaccine R&D team comprised of experts in virology, immunology, bioinformatics and structural biology, technology transfer and clinical research with **10-20+ years of experience**

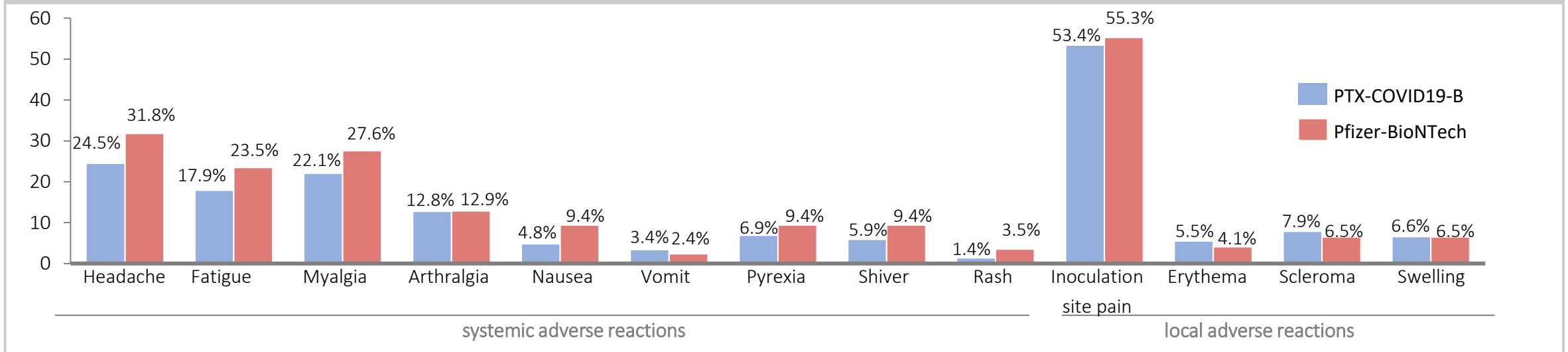
PRODUCTION BASE IN MANUFACTURING PLANT AT JIASHAN, A CITY NEAR SHANGHAI



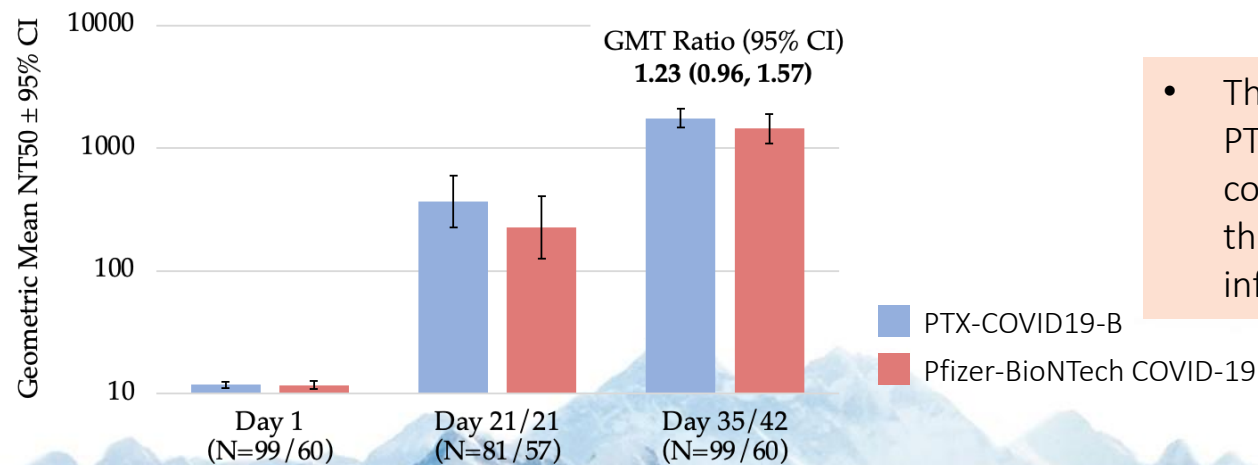
- March 2020 - Jiashan construction began for drug research and development, GMP production base and GSP facility. Everest formed strategic partnership with Jiashan SDIC
- The production base is built in full compliance with NMPA, EMA GMP, WHO PQ standards
- Industry-leading cGMP commercial production-line to provide robust supply to China and global markets
- Sep 2022 - Phase 1 construction completed; building for quality control and office space open for operations since Q1
- Dec 2022 - commencement of manufacturing operations for mRNA vaccines with annual capacity of 700m doses

PTX-COVID19-B VALIDATES OUR mRNA PLATFORM WITH STELLAR PHASE 2 DATA OF 1ST GEN COVID19 VACCINE

- The overall incidence of all-cause solicited adverse events (AEs) was similar between both treatment groups after the first and second doses: 71.6% and 59.0% for PTX-COVID19-B and 74.2% and 62.4% for Comirnaty®, respectively.



Geometric Mean NT50



- The analysis of immune responses demonstrated that PTX-COVID19-B **met the criteria for non-inferiority** compared to Comirnaty®. The analysis two weeks after the second vaccination also demonstrated non-inferiority in terms of seroresponse rates.

PTX-COVID19-B, Dose 2, n=290; Pfizer-BioNTech dose 2, n=170

*Day 28 Neutralization results are prior to administration of the 2nd dose. Safety Analysis Set (SAS) : Safety analysis set population, subjects who have received the vaccine. Solicited adverse reactions are adverse reactions within 7 days after vaccination.

Source: N Engl J Med. 2020 Dec 17;383(25):2439-2450.; N Engl J Med. 2020 Dec 17;383(25):2427-2438.

mRNA PLATFORM PIPELINE WITH SELF-DISCOVERED PRODUCT CANDIDATES

Program	Indication	Pre-clinical	Phase I	Phase II	Phase III	Everest Rights	Remarks
EVER-COVID19-M1	2 nd generation COVID-19 booster						IND filing rolling submission started
Rabies vaccine	Rabies					50% Global	Achieved proof-of-concept
mRNA Prophylactic Vaccine	Multiple programs for infectious diseases					50%/100% Global	
mRNA Cancer Vaccine	Multiple programs against solid tumors					Global	

INCOME STATEMENT AND CASH POSITION

RMB'000	Years Ended 31 December	
	2022	2021
Revenue	12,792	54
Cost of revenue	(4,645)	(23)
Gross profit	8,147	31
General and administrative expenses	(276,547)	(242,676)
Research and development expenses	(809,736)	(613,433)
Distribution and selling expenses	(326,687)	(198,150)
Other income	4,624	4,956
Other gains - net	1,143,399	22,940
Operating loss	(256,800)	(1,026,332)
Finance income - net	32,887	24,065
Fair value change in financial assets at fair value through profit or loss	(21,748)	-
Fair value change in financial instruments issued to investors	(1,614)	(6,452)
Loss before income tax	(247,275)	(1,008,719)
Income tax expense	(8)	-
Loss for the year (IFRS measure)	(247,283)	(1,008,719)
Adjustments to Non-IFRS measure	229,857	231,432
Loss for the year (Non-IFRS measure)	(17,426)	(777,287)

Revenue of RMB12.8m generated from sales of eravacycline and Trodelvy in Singapore

Cost of revenue are associated with the costs for importation of Trodelvy and Xerava

G&A expenses increase primarily due to professional service expenses

R&D expenses increase was attributable to

- increased number of clinical trials of our drug candidates, as well as some Trodelvy related costs have been reimbursed by Gilead in 2023
- expansion of internal discovery team to build in-house R&D capabilities
- increased costs occurred in the process of technical transfer for our drug candidates

Distribution and selling expenses increase primarily attributable to increased employee benefit expenses, which has been partially reimbursed by Gilead in 2023, and pre-launch activities carried out for commercialization.

Other income decreased by RMB0.3m for the year ended 31 December 2022, primarily attributable to a decrease in government grants received.

Other gains increased by RMB1.1bn for the year ended 31 December 2022, primarily attributable to disposal gain from Trodelvy® transaction.

Finance income – net increased primarily from interest income on bank deposit.

Loss for the year (IFRS measure) narrowed by RMB761.4m primarily attributable to disposal gain from Trodelvy® transaction.

Loss for the year (Non-IFRS measure) narrowed by RMB759.9m, due to other gain of RMB1,322.3m from Trodelvy® transaction.

Cash Balance

- RMB1,651.4m cash/cash equivalents and bank deposit, as of 31 December 2022.
- Pro forma cash balance of US\$432m, inclusive of US\$196m upfront payment from Gilead received in January 2023

2023 CATALYSTS

2023

Molecule	Milestone	Status
Nefecon	 NDA approval in IgAN in China and Singapore	<input type="checkbox"/>
	 NDA filing in IgAN in Hong Kong, Taiwan and South Korea	<input type="checkbox"/>
	 File for full approval with US FDA, EC and UK MHRA in 2023.	<input type="checkbox"/>
EVER001	 Phase 2 topline data readout	<input type="checkbox"/>
Xerava™	 NDA approval in cIAI in China	<input checked="" type="checkbox"/>
	 NDA approval in cIAI in Taiwan region	<input type="checkbox"/>
Taniborbactam	 NDA filing in China	<input type="checkbox"/>
	 NDA filing in US	<input type="checkbox"/>
EVER206 (SPR206)	 Phase 3 trial initiation	<input type="checkbox"/>
EVER-COVID19-M1 (Bivalent mRNA COVID vaccine)	 IND filing for Phase 1 and Phase 2 trial	<input type="checkbox"/>
	 EUA in China	<input type="checkbox"/>
Etrasimod	 Phase 3 UC trial enrollment completion	<input type="checkbox"/>
	 Phase 3 trial 12-week induction of remission data	<input type="checkbox"/>
	 FDA approval of Etrasimod in UC	<input type="checkbox"/>

Completed On track

INVESTMENT HIGHLIGHTS



4 near-term product launches with aggregate peak sales potential of RMB 10bn:

- Xerava – approved
- Nefecon – 2023 2H
- Taniborbactam – 2024
- Etrasimod - 2024



Therapeutic area leadership in renal disease and infectious disease with large unmet needs in Asia



Strong discovery capabilities anchored in clinically-validated mRNA technology platform



Strong balance sheet with pro forma cash balance of US\$ 432m