2022 ANNUAL RESULTS CONFERENCE CALL

TREATING PATIENTS BEYOND BORDERS

MARCH 2023

Antengene's Speakers Today


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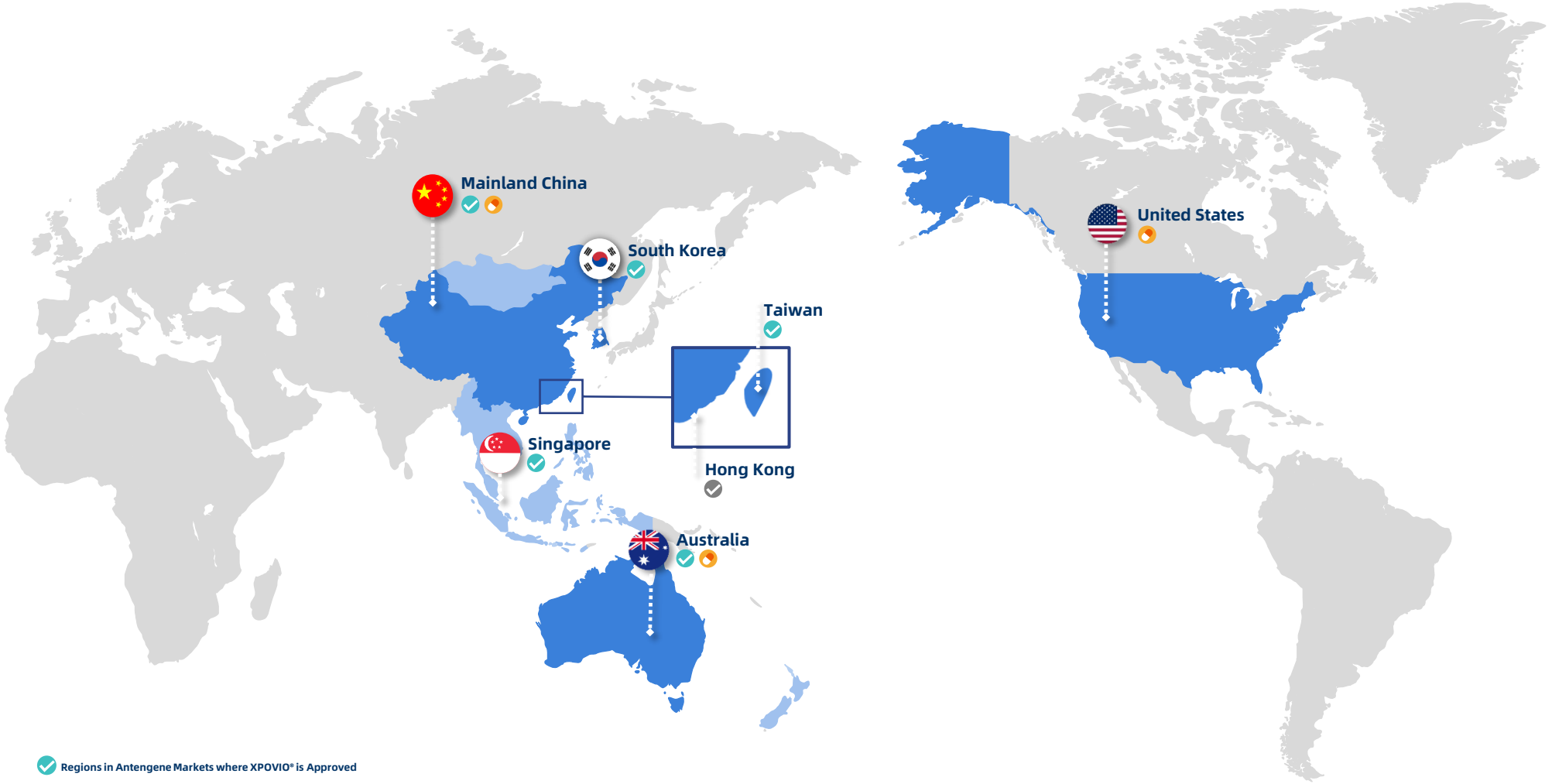
I. 2022 OVERVIEW

Antengene is Executing on Our Strategy to Bring Transformative Medicines to Patients Around the World



Regions in Antengene Markets where XPOVIO® is Approved

Regions Expecting Selinexor Approval in 2023

Regions with Ongoing Clinical Trials

Commercialization in

5 APAC Markets

9 Clinical Stage Assets*

16 Ongoing Trials in Mainland China, Australia and the US

370+ Employees Globally**

** 9 clinical stage assets includes ATG-031 (CD24 monoclonal antibody) that is ready for IND-submission*

*** Employee count as of 28th March, 2023*

Setting a Strong Foundation for Growth in 2023 and Beyond

ANTENGENE

XPOVIO® R&D and Pan-APAC Commercialization

XPOVIO® (selinexor) 20 mg tablet

塞利尼索片 20mg 希维奥®

2022 Revenue: RMB160.1 Million

(5.6x vs 2021 Revenue of RMB 28.8 mm)

5 Approved Markets: Taiwan

2022 Achievements

- ✓ **Commercial launch** of XPOVIO® in **Mainland China** in mid-May
- ✓ **Xd regimen** in multiple myeloma (MM) achieved **reimbursement listing** in **Australia**
- ✓ **Complete patient enrollment** for **"SEARCH" study** in **R/R diffuse large B-cell lymphoma (DLBCL)**
- ✓ **XVd regimen in MM** obtained Australian **PBAC recommendation** for reimbursement listing

2023 Catalysts

- ○ **Mainland China sNDA submission** for **"SEARCH" study** in **R/R DLBCL**
- ○ **XVd regimen** in 2L+ MM achieving reimbursement listing in Australia
- ○ **Complete patient enrollment** for **"BENCH"** study in 2L+ MM
- ○ NDA approval in **Hong Kong**
- ○ Start pivotal trial in **myelofibrosis (XPORT-MF-034)**

Research and Development

9 Clinical Stage Assets*

4 Clinical Development Partnerships

Bristol Myers Squibb™ · MERCK · 君实生物 TopAlliance · BeiGene

16 Research Data Publications

2022 ASCO ANNUAL MEETING · CSCO · EHA · AACR ANNUAL MEETING 2022 New Orleans · 2022 BOSTON · BMC Medicine

APAC R&D

ATG-008 (Onatasertib) – mTORC1/2 Inhibitor

2022 Achievements

- ✓ **Encouraging data readout of "TORCH-2" trial** in **relapsed/metastatic cervical cancer**
- ✓ Observed **single agent activity** in **2L+ HBV positive hepatocellular carcinoma** in **"TORCH" trial**

2023 Catalysts

- ○ Confirm the **regulatory pathway** for ATG-008 in combination anti-PD-1 monoclonal antibody in **relapsed/metastatic cervical cancer**

GLOBAL R&D

2022 Achievements

- ✓ Progressing smoothly in dose escalation (Phase I):
  - ATG-017 Tizaterkib (**ERK1/2** small molecule inhibitor)
  - ATG-101 (**PD-L1/4-1BB** bispecific antibody)
  - ATG-037(**CD73** small molecule inhibitor)
  - ATG-018 (**ATR** small molecule inhibitor)
- ✓ Entered into a **global clinical collaboration** with **Merck Sharp & Dohme** to evaluate ATG-037 in combination with **KEYTRUDA® (pembrolizumab)**

2023 Catalysts

- ○ **Clinical data readout**:
  - ATG-017 Tizaterkib (**ERK1/2** small molecule inhibitor)
  - ATG-101 (**PD-L1/4-1BB** bispecific antibody)
  - ATG-037 (**CD73** small molecule inhibitor)
  - ATG-018 (**ATR** small molecule inhibitor)
- ○ Commencement of **first-in-human trial**:
  - ATG-022 (**Claudin 18.2** ADC)
  - ATG-031 (**CD24** monoclonal antibody)

** 9 clinical stage assets includes ATG-031 (CD24 monoclonal antibody) that is ready for IND-submission*

XPOVIO® Commercialization in Mainland China and the APAC Regions

Regulatory Achievements

Approved in Mainland China
December 14th, 2021

Commercial Launch
May 2022

Approved in Australia
March 9th, 2022

Xd Regimen Reimbursement Listing
September 2022

XVd Regimen PBAC Recommendation for Reimbursement Listing
November 2022

Expected XVd Regimen Reimbursement Listing
H1 2023

Approved in South Korea
July 30th, 2021

Expected Reimbursement Listing
Q4 2023

Approved in Taiwan
October 21st, 2022

Expected Reimbursement Listing
Q1 2024

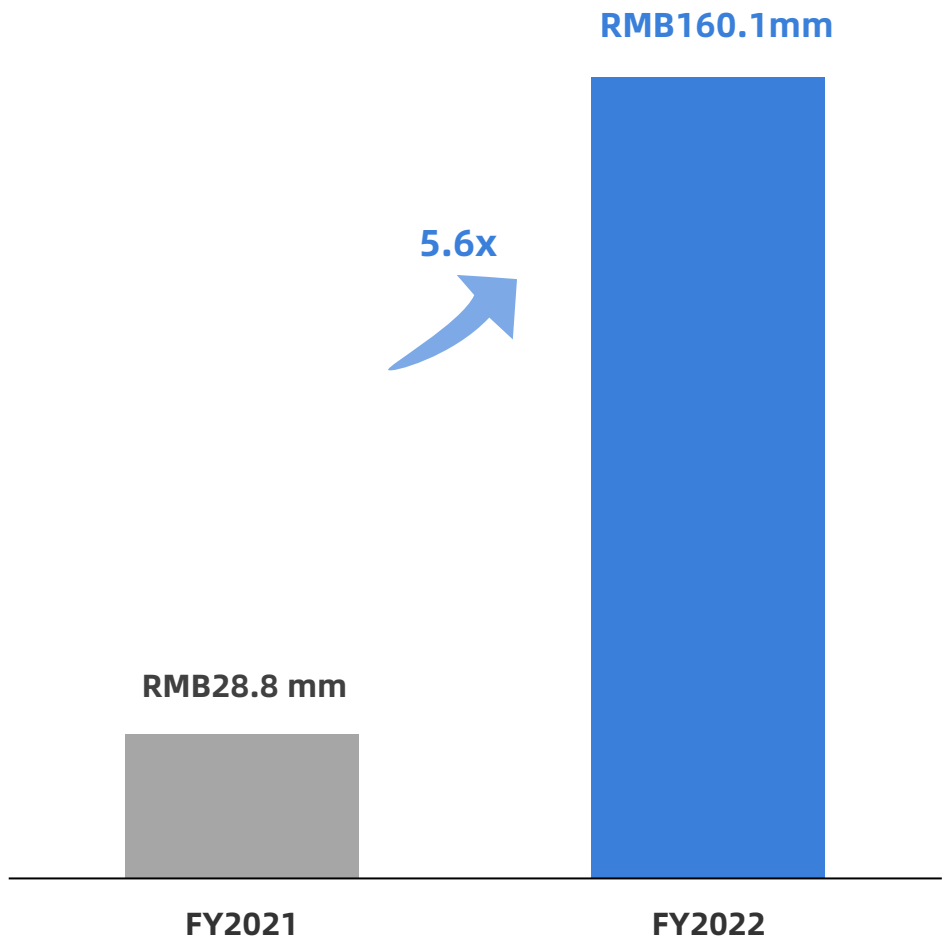
Approved in Singapore
March 1st, 2022

Expected Cancer Drug List Inclusion
H2 2023

Expansion into Stage II ASEAN Markets

NDA Submissions	To-be Submitted
Malaysia, Thailand	Indonesia

XPOVIO® Commercialization



Driving XPOVIO® Growth in 2023 and Beyond

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Multiple Catalysts Across China and APAC as Building Blocks for Continuous Revenue Growth

2022

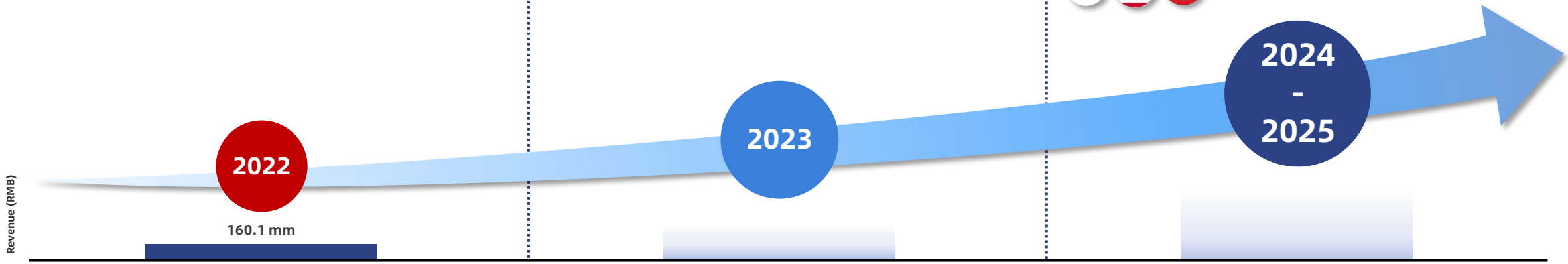
- **Commercial launch** in **Mainland China** in mid-May

2023

- **First full year of commercialization** in **Mainland China**
- **XVd** regimen in **MM** achieving **reimbursement listing** in **Australia**

2024 - 2025

- **XPOVIO®** obtaining **additional approvals** in **2L+ MM** and **3L+ DLBCL** in Mainland China, and entering the **National Reimbursement Drug List (NRDL)**
- **Xd** regimen in **MM** achieving **reimbursement listing** in **South Korea**
- TW **XVd** regimen in **MM** and **X monotherapy in DLBCL** achieving **reimbursement listing** in **Taiwan**
- **NDA Approval in 3 ASEAN Markets**



Indication Expansion Potential of XPOVIO® in Treatment Naïve Myelofibrosis in Combination with Jakafi® (ruxolitinib)

Data from Phase I "XPORT-MF-034" Study – ASH 2022 Annual Meeting

Karyopharm® Therapeutics

92%	100%	67%	57%
Evaluable patients (11/12) achieved SVR35 in week 24	Evaluable patients (12/12) achieved SVR35 at anytime	Evaluable patients (4/6) achieved TSS50 in week 24	Patients (13/23) maintained stable or improved hemoglobin levels at last follow up

AACR American Association for Cancer Research ANNUAL MEETING 2023 Orlando

Additional Updates in AACR 2023 (Abstract # CT261; April 18th)

Significant Unmet Medical Needs in Myelofibrosis in Our Regions

21,300+

New Cases in China and APAC Each Year

74,300+

Patients in China and APAC

Encouraging Data Readout of ATG-008 (Onatasertib) in "TORCH-2" Trial

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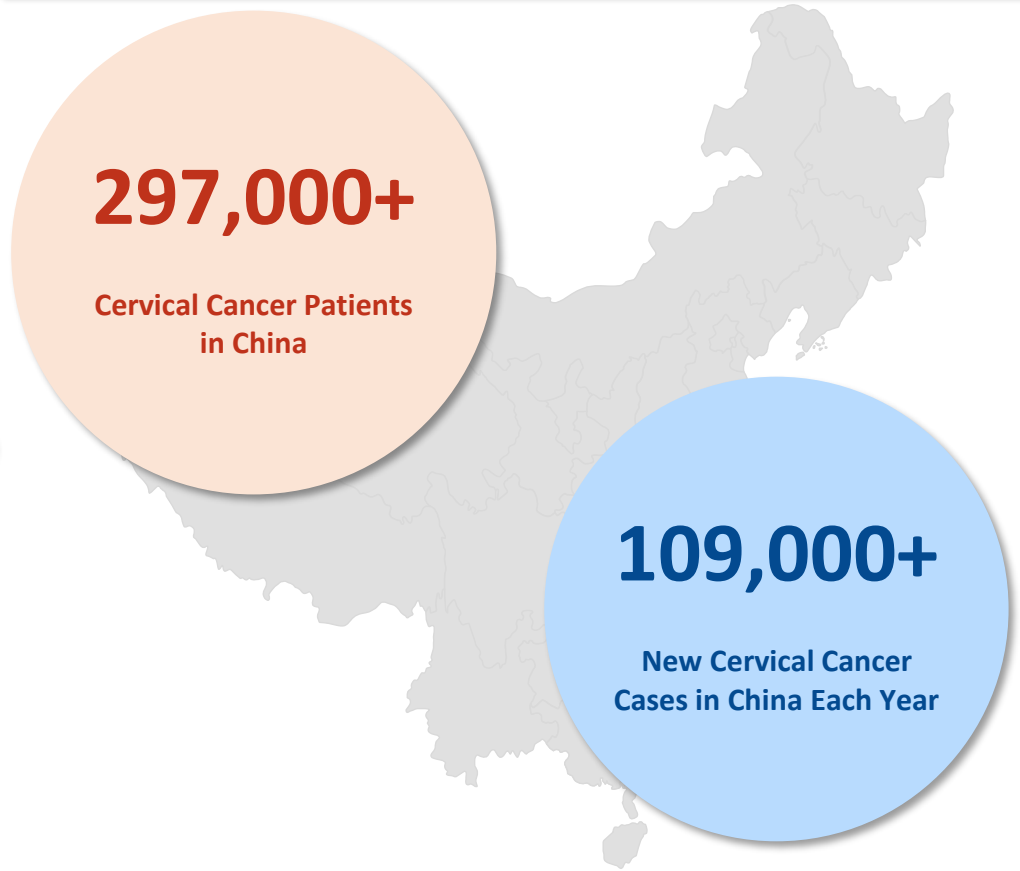
Encouraging Data in Advanced Cervical Cancer

ATG-008 (mTORC1/2i) in combination with **toripalimab (anti-PD-1 monoclonal antibody)**

Overall Response Rate (ORR) **52.4%** among all patients (11/21)	Overall Response Rate (ORR) **55.0%** efficacy evaluable population (11/20)	Overall Response Rate (ORR) **77.8%** among PD-L1+ patients (7/9)
Median Duration of Response **9.7 Months** among all patients (11/21)	Longest Treatment Duration **850 Days** among all patients (11/21)	**Generally Well Tolerated**

Huge Unmet Medical Needs in Advanced Cervical Cancer



2023 Catalyst: Confirm Regulatory Pathway

Global Rights Assets

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2022 Achievements to Date

Progressed Smoothly in Dose Escalation (Phase I)

- ✓ **ATG-017** (**ERK1/2** small molecule) in **"ERASER"** trial
- ✓ **ATG-101** (**PD-L1/4-1BB** bispecific antibody) in **"PROBE"** & **"PROBE-CN"** trial
- ✓ **ATG-037** (**CD73** small molecule inhibitor) in **"STAMINA"** trial
- ✓ **ATG-018** (**ATR** small molecule inhibitor) in **"ATRIUM"** trial

Entered into a Global Clinical Collaboration with Merck

- ✓ To evaluate **ATG-037** (**CD73** small molecule inhibitor) in combination with **KEYTRUDA® (pembrolizumab)**

MERCK KEYTRUDA (pembrolizumab)

Data Presentation at AACR 2022 in April

- ✓ **ATG-037** (**CD73** small molecule inhibitor)
- ✓ **ATG-018** (**ATR** small molecule inhibitor)
- ✓ **ATG-022** (**Claudin 18.2** antibody-drug conjugate)
- ✓ **ATG-012** (**KRAS** small molecule inhibitor)

AACR American Association for Cancer Research ANNUAL MEETING 2022 New Orleans

Data Presentation at SITC 2022 in November

- ✓ **ATG-031** (**CD24** monoclonal antibody) - **Oral presentation**
- ✓ **ATG-101** (**PD-L1/4-1BB** bispecific antibody)
- ✓ **ATG-018** (**ATR** small molecule inhibitor)
- ✓ **ATG-027** (**B7H3/PD-L1** bispecific antibody)

SITC 2022 NOVEMBER 8-12 BOSTON MASSACHUSETTS

Acquisition of All Outstanding Rights of ATG-037

- ✓ Acquired ownership of **all patents and patent applications** relating to ATG-037
- ✓ Antengene is **no longer obligated** to pay any future milestones and royalties to Calithera Biosciences

CALITHERA

2023 Catalysts

Clinical Data Readout

- ○ **ATG-017** (**ERK1/2** small molecule inhibitor)
- ○ **ATG-101** (**PD-L1/4-1BB** bispecific antibody)
- ○ **ATG-037** (**CD73** small molecule inhibitor)
- ○ **ATG-018** (**ATR** small molecule inhibitor)

Begin the Combination Segment of "ERASER" Trial

- ○ **ATG-017** (**ERK1/2** small molecule inhibitor) in combination with **OPDIVO® (nivolumab)**

Bristol Myers Squibb OPDIVO (nivolumab)

Commencement of First-in-human Trial

- ○ **ATG-022** (**Claudin 18.2** antibody-drug conjugate) in **"CLINCH"** trial
- ○ **ATG-031** (**CD24** mAb) in **"PERFORM"** trial

Data Presentation at AACR 2023 and Other Major Medical Conferences

- ○ **ATG-017** (**ERK1/2** small molecule inhibitor)
- ○ **ATG-037** (**CD73** small molecule inhibitor)
- ○ **ATG-031** (**CD24** monoclonal antibody)
- ○ **ATG-034** (**LILRB4** monoclonal antibody)
- ○ and more……

AACR American Association for Cancer Research ANNUAL MEETING 2023 Orlando

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II. CLINICAL OVERVIEW

APAC Rights Assets: Pipeline of Commercial or Near NDA Stage Drugs with First-in-Class/Best-in-Class Potentials

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Assets	Target *(Modality)*	Indication	Pre-clinical / Phase I / Phase II / Phase III/Pivotal / NDA / Commercialization	Antengene Rights	Partner
ATG-010[1] (Selinexor)	XPO1 *(Small molecule)*	R/R Multiple Myeloma	Combo with dexamethasone *(MARCH)* — *Mainland China NDA approved*	APAC[2]	Karyopharm Therapeutics; ANTENGENE
			Combo with dexamethasone *(STORM) - Partner's Pivotal Trial in the US* — *US, EU, SK, SG, AU & TW NDA approved*		
			Combo with bortezomib and dexamethasone *(BENCH)* ★		
			Combo with bortezomib and dexamethasone *(BOSTON) - Partner's Pivotal Trial in the US* — *US, EU, SG, AU & TW sNDA approved*		
			Combo with IMID/PI/CD38 mAb and dexamethasone *(STOMP)*		
		R/R Diffuse Large B-cell Lymphoma	Monotherapy *(SEARCH)* ★		
			Monotherapy *(SADAL) - Partner's Pivotal Trial in the US* — *US , SG, SK & TW sNDA approved*		
			Combo with R-GDP *(DLBCL-030)* ★		
		R/R NHL	Combo with lenalidomide + rituximab *(SWATCH)*		
		R/R T-cell & NK-cell Lymphoma	Combo with ICE/GemOx/tislelizumab *(TOUCH)* with BeiGene		
		Myelofibrosis	Combo with ruxolitinib *(MF-034)*		
ATG-016 (Eltanexor)	XPO1 *(Small molecule)*	R/R MDS	Monotherapy *(HATCH)*		
ATG-008 (Onatasertib)	mTORC1/2 *(Small molecule)*	Cervical Cancer and Other Advanced Solid Tumors	*Combo with toripalimab (TORCH-2)** with 君实生物 TopAlliance	APAC[3]	Celgene; Bristol Myers Squibb Company; ANTENGENE
		R/R Diffuse Large B-cell Lymphoma	Combo with ATG-010 *(MATCH)*		

Antengene Trials[4] | Partner Trials[5] | Global Trials in Collaboration with Partner | ★ Registrational Trial in China

In addition, for ATG-010 (selinexor), 12 Investigator Initiated Trials (IITs) are ongoing across China and the APAC regions covering both hematological malignancies and solid tumors

[1] (s)NDA approved by US FDA, China NMPA, Australia TGA, South Korea MFDS and Singapore HSA; China Hong Kong and China Taiwan NDA submissions are completed;
[2] Antengene has rights for Greater China (Mainland China, Hong Kong, Taiwan, Macau), Australia, New Zealand, South Korea, and the ASEAN Countries;
[3] Antengene has rights for Greater China, South Korea, Singapore, Malaysia, Indonesia, Vietnam, Laos, Cambodia, the Philippines, Thailand and Mongolia;
[4] Most advanced trial status in Antengene territories and the trials are responsible by Antengene;
[5] Most advanced trial status in partner territories in the rest of the world and the trials are conducted by our licensing partners

* Investigator-initiated trials; R/R: relapsed/refractory; ND: newly diagnosed; MDS: myelodysplastic syndrome; CRC: colorectal cancer; PrC: prostate cancer; CAEBV: chronic active Epstein-Barr virus; NHL: non-Hodgkin lymphoma; Hem/Onc: hematological malignancies and solid tumors; R-GDP: Rituximab, Gemcitabine, Dexamethasone &Cisplatin;

AU: Australia; EU: Europe; SG: Singapore; SK: South Korea; TW: Taiwan; US: United States;

APAC Rights Assets: Poised to Advance in Additional Pivotal Studies

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Broad Indication Expansion Potential for ATG-010 and Potential Registrational Pathway for ATG-008

		2023				2024				2025				2026	
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
ATG-010 (selinexor) XPO1 Inhibitor	3L Diffuse Large B-cell Lymphoma	"SEARCH" - China Bridging Trial		sNDA submission											
	2L Multiple Myeloma	"BENCH" - China Bridging Trial				sNDA submission									
	Myelofibrosis	"MF-034" - Global Trial with Karyopharm Therapeutics													
ATG-008 (onatasertib) mTORC1/2 Inhibitor	Cervical Cancer	"TORCH-2" - Cervical Cancer Cohort (CPI Naïve)				Data Readout									
						"TORCH-3" - Pivotal Study in CPI Naïve Cervical Cancer									
		"TORCH-2" - Cervical Cancer Cohort (CPI Treated)				Data Readout									
						Pivotal Study in Checkpoint Inhibitor-treated Cervical Cancer									
	Nasopharyngeal Carcinoma	"TORCH-2" - Nasopharyngeal Cancer Cohort						Data Readout							
								Pivotal Study in Nasopharyngeal Carcinoma							

In addition, for ATG-010 (selinexor), **12 Investigator Initiated Trials (IITs)** are ongoing across China and the APAC regions covering both hematological malignancies and solid tumors

ATG-010 (Selinexor): Encouraging Preliminary Week 24 Data from Evaluable Patients Across Key Efficacy Endpoints from Phase I/II Study (XPORT-MF-034)

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Karyopharm Therapeutics

ASH 2022 Annual Meeting

A Global Phase I/II Multicenter Open-label Study to Evaluate the Safety and Efficacy of Selinexor Plus Ruxolitinib in Treatment Naïve Myelofibrosis Patients

Spleen Responses (SVR35)

- **92%** of evaluable patients (11/12) achieved SVR35 at week 24
- **100%** of evaluable patients (12/12) achieved SVR35 at anytime

Rapid Reduction in Total Symptom Scores (TSS)

- **67%** of evaluable patients (4/6) achieved TSS50 at week 24

Positive Impacts on Hemoglobin Levels

- **57%** of patients (13/23) maintained stable hemoglobin (± 2g/dL) or improved hemoglobin level (>2g/dL, increase) at last follow up

Safety and Tolerability

- Most common TEAE (n=24): Nausea, anemia, and fatigue (majority Grade 1-2)
- Most common Grade ≥3 TEAEs: thrombocytopenia (21%) and anemia (38%)

Additional Updates in AACR 2023 - Abstract # CT261; April 18th, 2023, 1:30 pm – 5:00 pm ET

AACR American Association for Cancer Research ANNUAL MEETING 2023 Orlando

Preliminary TSS50 analysis only includes patients who filled out all their symptom evaluation forms (n=6); other 6 patients who were evaluable for SVR analysis remained on therapy. Based on symptom scores collected from patients' medical charts, an updated TSS50 analysis will be presented at a future medical congress in 1H 2023. The safety and efficacy of selinexor in myelofibrosis has not been established and has not been approved by the US FDA or any regulatory authority.

AE: adverse event; MTD, maximum tolerated dose; ORR: overall response rate; OS: overall survival; PK: pharmacokinetics; RP2D: recommended phase 2 dose; SVR35: spleen volume reduction of at least 35%; TSS50: total symptom score reduction ≥ 50%.

Source: Karyopharm Investor Presentation dated March 13th, 2023

ATG-008 (Onatasertib): Deep Responses Observed in ATG-008 & Toripalimab Combination Treated Cervical Cancer Patients of "TORCH-2" Study

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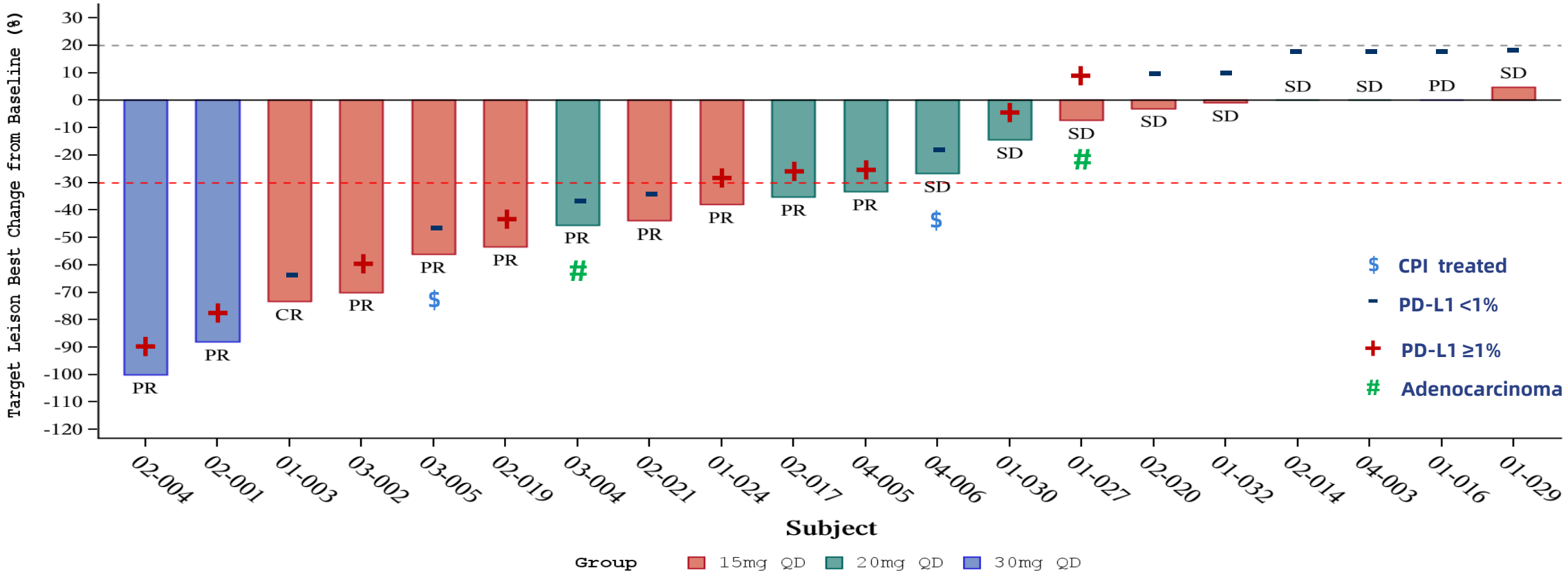
Preliminary Efficacy (as of October 21st, 2022)

- **21 patients** received treatment
- **ORR is 52.4%** (ITT,11/21)
  - **Efficacy Evaluable Population: ORR 55%** (11/20)
  - **PD-L1+ Population: ORR 77.8%** (7/9)



ATG-008 (Onatasertib): Durable Responses Observed in ATG-008 & Toripalimab Combination Treated Cervical Cancer Patients of "TORCH-2" Study

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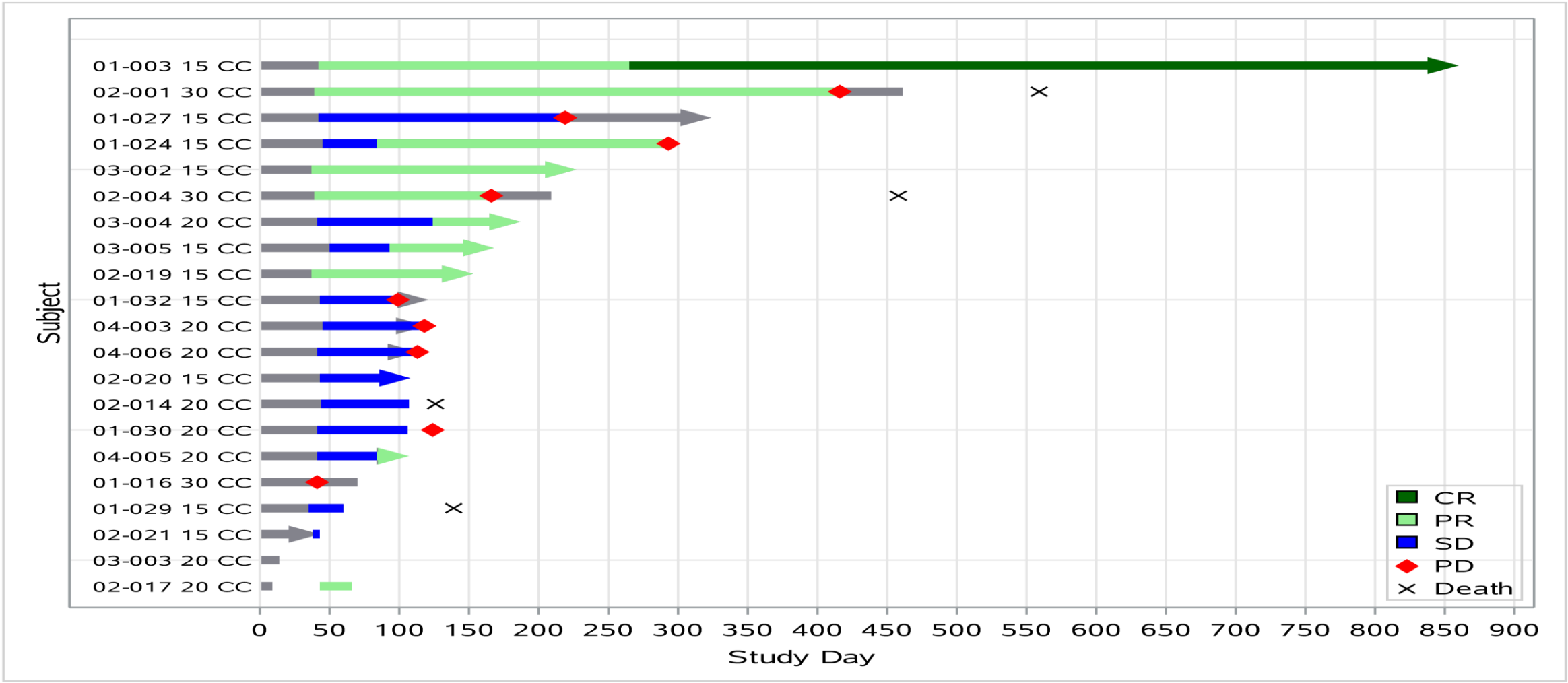
- The Median Duration of Response (mDOR) is **9.7 months**
- The Longest Treatment Duration is **850 days (Ongoing CR)** of Patient 01-003, Currently on ATG-008 Single Agent Treatment



ATG-008 (Onatasertib): Summary of Adverse Events of "TORCH-2" Study

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Preliminary Results (as of October 21st, 2022)

- The most common grade ≥ 3 TEAEs included:
  - **Lymphocyte count decreased (19.0%)**
  - **Rash (14.3%)**
  - **Hyperglycemia (9.5%)**

Data Cut-off Date: 21st October, 2022	15 mg QD (N=10) n (%)	20 mg QD (N=8) n (%)	30 mg QD (N=3) n (%)	Total (N=21) n (%)
Subjects with at least one TEAE	9 (90.0)	8 (100)	3 (100)	20 (100)
Serious TEAE	2 (20.0)	2 (25.0)	2 (66.7)	6 (28.6)
Grade 3 or 4 TEAE	6 (60.0)	6 (75.0)	3 (100)	15 (71.4)
TEAE Leading to Dose Modification	5 (50.0)	6 (75.0)	2 (66.7)	13 (61.9)
• TEAE leading to ATG-008 Dose Modification	5 (50.0)	6 (75.0)	2 (66.7)	13 (61.9)
• TEAE leading to Toripalimab Dose Modification	3 (30.0)	3 (37.5)	0	6 (28.6)
TEAE Leading to Dose Reduction	0	1 (12.5)	2 (66.7)	3 (14.3)
• TEAE leading to ATG-008 Dose Reduction	0	1 (12.5)	2 (66.7)	3 (14.3)
• TEAE leading to Toripalimab Dose Reduction	0	0	0	0
TEAE Leading to Dose Interruption	5 (50.0)	5 (62.5)	1 (33.3)	11 (52.4)
• TEAE leading to ATG-008 Dose Interruption	5 (50.0)	5 (62.5)	1 (33.3)	11 (52.4)
• TEAE leading to Toripalimab Dose Interruption	3 (30.0)	3 (37.5)	0	28.6
TEAE Leading to Treatment Discontinuation	0	1 (12.5)	0	1 (4.8)
TEAE Leading to Death	0	0	0	0

ATG-008 (Onatasertib) In Combination with Toripalimab (PD-1 mAb)

Potential Best-in-Class Treatment for 2L+ Cervical Cancer as Demonstrated in "TORCH-2"

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	ATG 008 + Toripalimab (Data from "TORCH-2")	Pembrolizumab (Global Standard of Care)	AK104 (Only CPI Approved by CDE)	Sintilimab + Anlotinib
Mechanism of Action (MoA)	mTORC 1/2i + PD-1 mAb	PD-1 mAb	PD-1/CTLA-4 BsAb	PD-1 mAb + VEGFRi
Number of Patients	21 (ITT)	98 (ITT)	100 (FAS, ITT 111)	39 (EE, ITT 42)
Prior Treatment Lines	≤2 (52.4%); **≥3 (47.6%)**	≤2 (69.4%); ≥3 (30.6%)	≤2 (100%)	≤2 (78.6%); ≥3 (21.4%)
PD-L1	N, TPS≥1% (42.8%)	N, CPS≥1 (83.7%)	N	Y, CPS≥1 (100%)
ORR	52.4%; **77.8% (TPS≥1%)**	12.2%	33%	59%
DCR	94.4%	30.6%	52%	94.9%
PFS (months)	5.45; 9.63 (15 mg cohort)	2.1	3.75	9.4
OS (months)	NE	9.4	17.5	NE
Response in CPI treated	1/2	N/A	N/A	N/A
Response in AdCa	1/2	1/5	NE	0/6

AdCa: Adenocarcinoma

Source: publications & primary research

Global Rights Assets: A Clinical Stage Pipeline with Transformational Potentials

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Assets	Target *(Modality)*	Hits Discovery	Lead Nomination	*In vitro* efficacy	*In vivo* efficacy	CMC/Tox	IND	Phase I	Antengene Rights	Partner
ATG-017 (Tizaterkib)[1]	**ERK1/2** *(Small molecule)*	**Monotherapy ± nivolumab for R/R Hem/Onc *(ERASER)***						**with Bristol Myers Squibb**	**Global**	**ANTENGENE**
ATG-101[2]	**PD-L1/4-1BB** *(Bispecific)*	**Monotherapy for Hem/Onc *(PROBE & PROBE-CN)***								
ATG-037[3]	**CD73** *(Small molecule)*	**Monotherapy ± pembrolizumab for Hem/Onc *(STAMINA)***						**with MERCK**		
ATG-018	**ATR** *(Small molecule)*	**Monotherapy for Hem/Onc *(ATRIUM)***								
ATG-022	**Claudin 18.2** *(ADC)*	**Monotherapy for Onc *(CLINCH)***								
ATG-031	**CD24** *(mAb)*	**Monotherapy for Hem/Onc *(PERFORM)***								

Antengene Trials

[1] *Licensed from AstraZeneca and Antengene has obtained exclusive global rights to develop, commercialize and manufacture ATG-017 (Tizaterkib);*
[2] *Licensed from Origincell and Antengene has obtained exclusive global rights to develop, commercialize and manufacture ATG-101;*
[3] *Licensed from Calithera Biosciences and Antengene has obtained exclusive global rights to develop, commercialize and manufacture ATG-037*
** ATG-037 IND equivalent in Australia = institutional scientific and ethics review before governmental notification*
Hem/Onc = hematological malignancies and solid tumors

Global Rights Pipeline Comprised of Clinical Stage Assets with First and/or Best-in-Class Potential

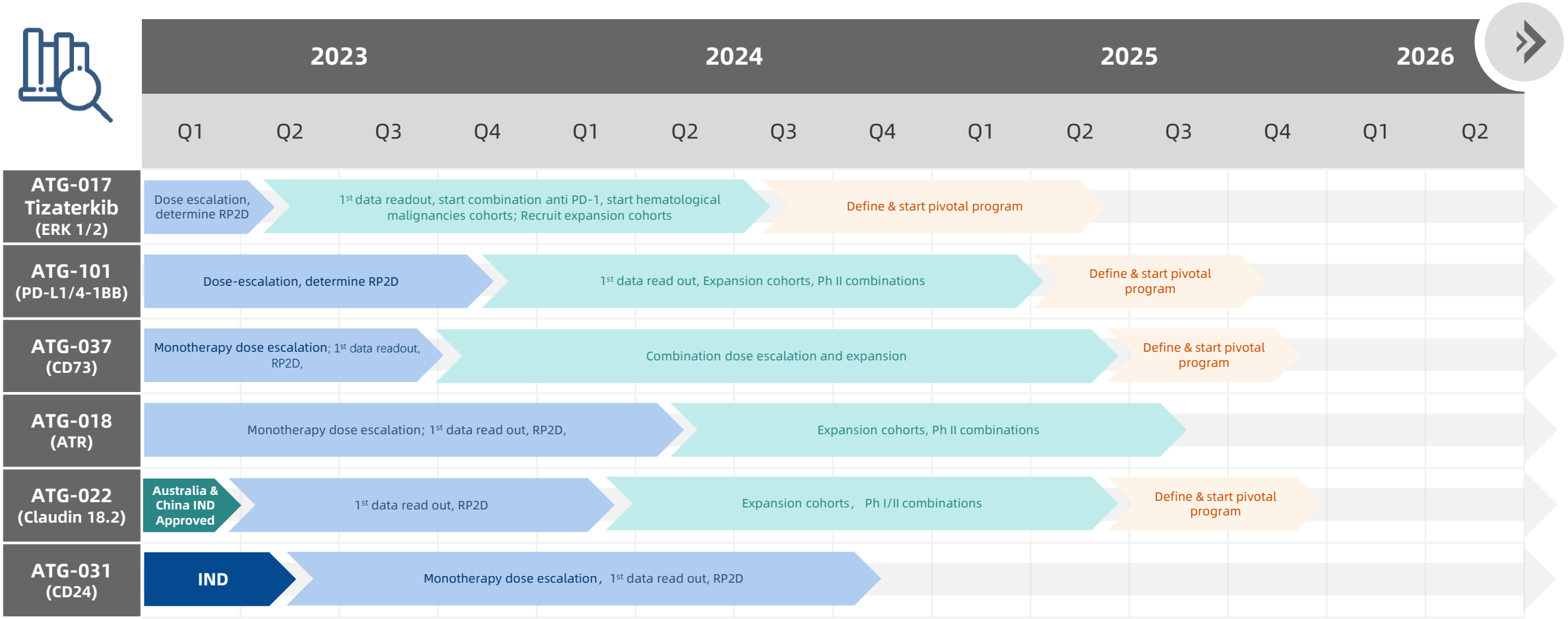
ANTENGENE

	ATG-017 (Tizaterkib)	ATG-101	ATG-037	ATG-018	ATG-022	ATG-031
Target	**ERK1/2**	**PD-L1/4-1BB**	**CD73**	**ATR**	**Claudin 18.2**	**CD24**
Modality	Small Molecule	Bispecific Antibody	Small Molecule	Small Molecule	ADC	Monoclonal Antibody
Indication	■ RASm NSCLC, Pancreatic cancer, CRC, and Melanoma ■ I/O combinations Bristol Myers Squibb™ OPDIVO (nivolumab)	■ Re-sensitize prior CPI responders (NSCLC, SCLC, GI, H/N SCC, melanoma) ■ Disease with previously limited CPI activity ■ Multiple combination opportunities	■ Monotherapy where immune suppressed TME is critical ■ Broad opportunities both as monotherapy and combination with existing / future I/O MERCK KEYTRUDA (pembrolizumab)	Hematological Malignancies / Solid Tumors	Solid Tumors	Hematological Malignancies / Solid Tumors
Differentiation	✓ **Higher potency** and dual IoC and PoA activity with slow off-rate kinetics ✓ Lower efficacious dose with a higher max absorbable dose/dose ratio ✓ **Broad therapeutic potential** (targeting RAS/MAPK pathway) ✓ Multiple **combination** opportunities	✓ PD-L1 cross-linking dependent activation of 4-1BB to avoid unwanted 4-1BB signaling in normal tissue and minimize risk of hepatotoxicity ✓ Demonstrated significant anti-tumor activity in animal models of **resistant tumors as well as those that progressed on anti-PD-1/L1 treatment** ✓ Displayed an **excellent safety profile** in GLP toxicology studies	✓ Orally bioavailable small molecule that completely **overcomes 'hook effect'** common in other anti-CD73 antibodies ✓ **Tissue penetrance not achievable with mAbs** ✓ Promising preclinical efficacy as a monotherapy and strong combination potential	✓ Better ***in vivo* efficacy** compared with benchmark in pre-clinical CDX tumor models ✓ Orally available	✓ **High affinity antibody (pM)**; Strong *in vivo* efficacy pre-clinically in Claudin 18.2 low expression PDX models ✓ Demonstrated an excellent safety profile in GLP toxicology studies	✓ **First in class target** ✓ No clinical competitor ✓ Showed **mono-therapy *in vivo* efficacy and synergy** with chemotherapy, rituximab and CPI
Status	Phase I clinical trial **"ERASER"** ongoing in Australia and US; Dose expansion and combo with nivolumab to initiate enrollment soon	Phase I clinical trial **"PROBE"** ongoing in Australia and US; **"PROBE-CN"** ongoing in China; US FDA granted an orphan drug designation for the treatment of pancreatic cancer in September 2022	Phase I clinical trial **"STAMINA"** ongoing in Australia, and China for monotherapy and combo with pembrolizumab	Phase I clinical trial **"ATRIUM"** ongoing in Australia	Phase I clinical trial **"CLINCH"** obtained Australian HREC approval in December 2022 and China NMPA IND approval in March 2023; 1st pt under screening	IND submission in H1 2023 for **"PERFORM"**

Global Rights Assets: Clinical Development Timeline Spanning 2023 to 2025 Encompassing a Series of Clinical Data Readouts

ANTENGENE

Early data on safety, PK, PD through 2023 with ATG-017 (Tizaterkib), ATG-101 and ATG-037



ANTENGENE

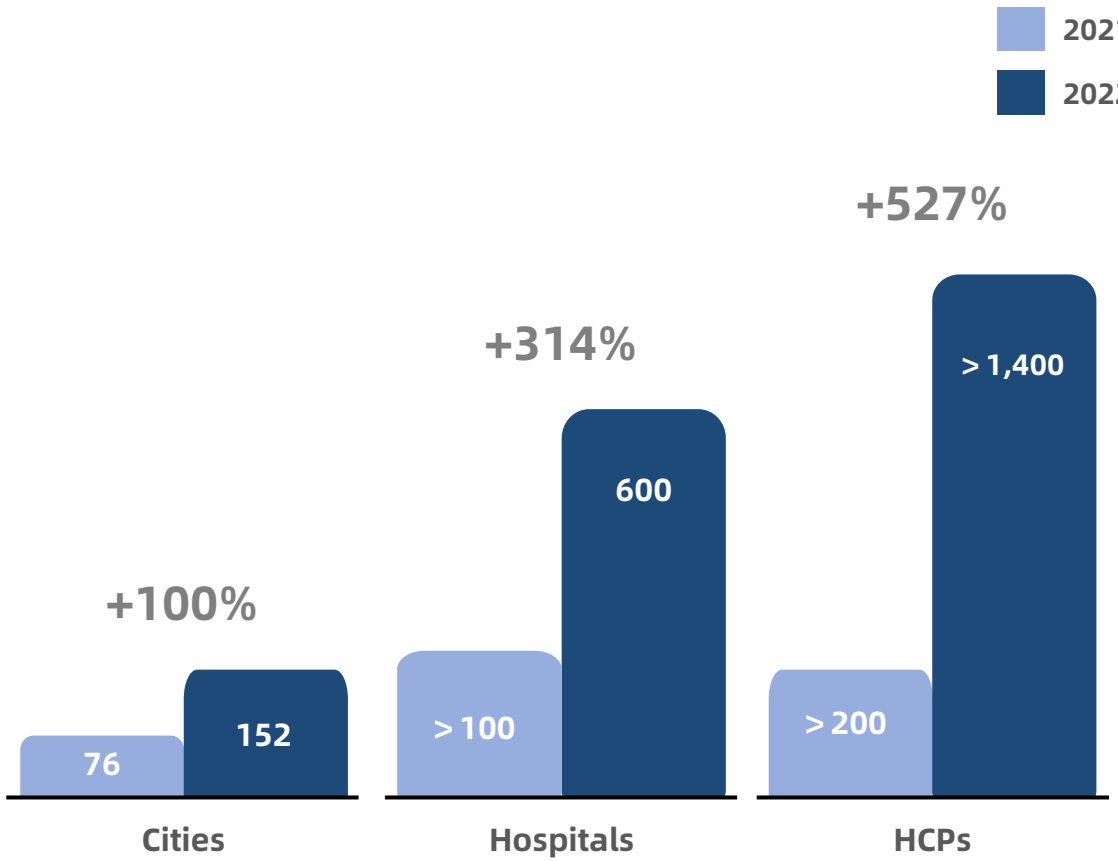
III. COMMERCIAL OVERVIEW

Expanding Physician Base and Patient Access to XPOVIO® in Mainland China

ANTENGENE

Laying a solid foundation for a successful commercialization of XPOVIO® in Mainland China

Rapid Commercial Penetration



** Presence from Named Patient Program (NPP Program)*

Continuously Expanding Business Channels

- **80+ distributors** across Mainland China — 上海医药 SHANGHAI PHARMA; 国药集团 SINOPHARM; 华润医药商业 CR PHARMA COMM
- Covered **120+ DTP pharmacies** across Mainland China with **1,800+ restockings** — 上药云健康; SPS 专业药房; 邻客·智慧药房; MEDOFFER 思派大药房; 德信行大药房; 国心大药房
- Achieved **46 hospital listings** in **19 provinces** — 中国医学科学院血液病医院 INSTITUTE OF HEMATOLOGY & BLOOD DISEASES HOSPITAL, CHINESE ACADEMY OF MEDICAL SCIENCES & PEKING UNION MEDICAL COLLEGE; 西京医院 XIJING HOSPITAL
- Attained **34 urban-customized commercial health insurance listings (Huiminbao)** in **28 provinces, autonomous regions & municipalities**

2022 Mainland China Medical Educational Activities

ANTENGENE

Guidelines Recommendation

Multiple Myeloma

✓ **CSCO/CMDA/CMA/CACA Myeloma Guidelines Recommendation:**

- the **X-base regimen** is **recommended** for first and multiple relapsed patients

Lymphoma

✓ **CSCO Lymphoma Guidelines Recommendation:**

- the **X-base regimen** is **recommended** for 2L+ rrDLBCL patients

Selinexor China Data Publications/ Submissions

31* Selinexor China Data Publications/Submissions in Major Medical Conferences and Medical Journals

Educational Activities

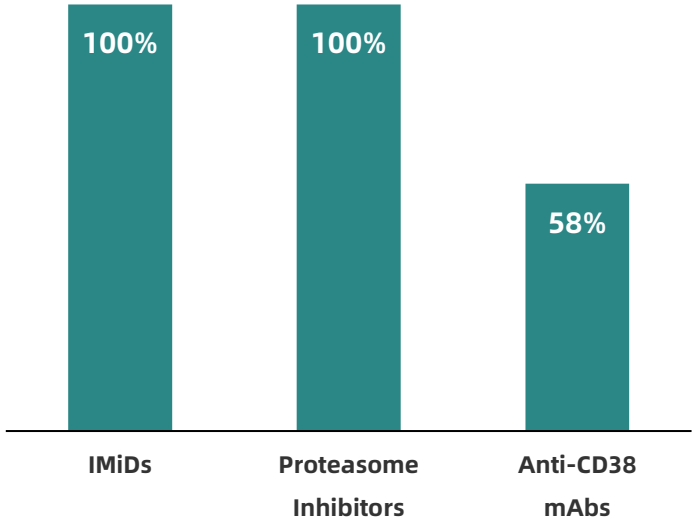
** 31 publications includes data generated from real world studies and investigator initiated trials (IITs) in multiple myeloma, lymphoma, acute myeloid leukemia, myelodysplastic syndromes, myelofibrosis, and T-cell acute lymphoblastic leukemia*

Initial Observations for XPOVIO® Launch in China Market

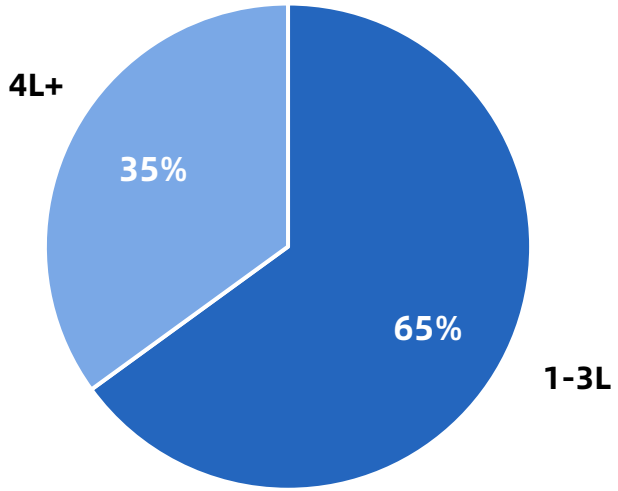
XPOVIO® Being Prescribed in Earlier Lines of Therapy

ANTENGENE

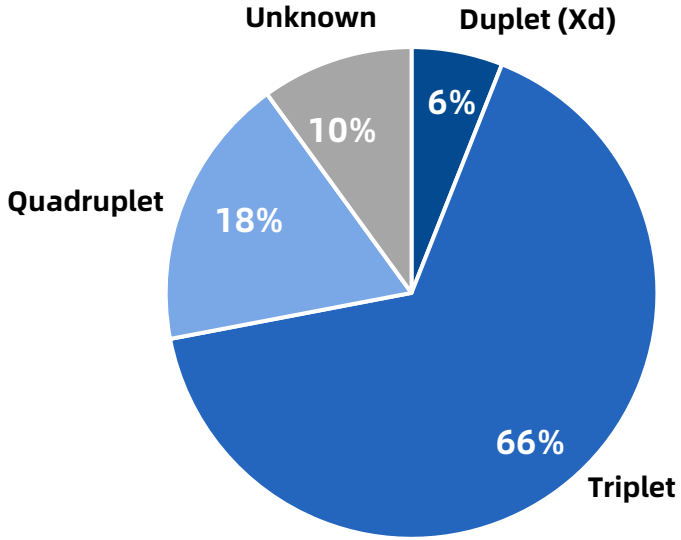
By 3L, Most Patients are Exposed to IMiDs, Proteasome Inhibitors, and anti-CD38 mAbs



Usage and Lines of Therapy Amongst XPOVIO® Patients



Treatment Regimen Among Prescribed Patients



Physician Testimonials Highlighting XPOVIO's Differentiated Profile

"**MARCH, BOSTON** trial data indicates that Selinexor combo regimens bring more innovative therapeutic options and better treatment outcomes for relapsed/refractory, multidrug resistance, metastasis and/or **high-risk MM** patients."

KOL, Dr. Jun Ma, Chief Supervisor of CSCO, Harbin Hematology and Oncology Institute

"Selinexor is more convenient and likely leads to higher compliance because it is an **oral regimen**. The efficacy of Selinexor is proven in a number of clinical trials. Besides being used as a monotherapy, Selinexor could also be **combined with a number of drugs such as chemo, target therapy, I/O, etc.**"

KOL, Dr. Zhiming Li, Sun Yat-sen University Cancer Center

Data cut off September 2022

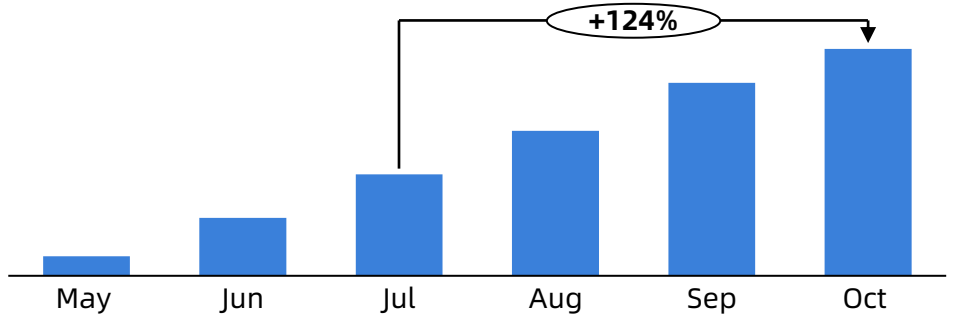
Asia Pacific Markets – Executing on XPOVIO® Launch Plans

Reimbursement Timelines

Excellent Launch Trajectory

Australia

- Total number of XPOVIO® treated patients **doubled in 3 months** (between July to October)
- First multiple myeloma indication (Xd regimen) **included for reimbursement** on 1st September
  - XPOVIO® achieved that in **180 days** ; whereas oncology medicines are listed in **496 days** on average
- Xd achieved **>50% new patient share** of available penta-refractory patients
- XVd obtained the Australian **PBAC recommendation** for reimbursement listing



Other Asia Pacific Markets

- Building of KOL advocacy and XPOVIO® experience:
  - **>250 patients** treated with XPOVIO® via pre approval access program
  - Pre-reimbursement **Patient Familiarization Program activated**
- ASEAN markets expansion commencing with **NDA submissions in Thailand and Malaysia in 2022, and Indonesia in H1 2023**

Asia Pacific Markets 2023 Catalysts

- **Australia**
  - **XVd** in MM **reimbursement and PBS listing** in **H1 2023**
- **South Korea**
  - **Xd** in MM **reimbursement listing** in **Q4 2023** through PE exemption pathway
- **Singapore**
  - XPOVIO® **Cancer Drug List inclusion** in **H2 2023**
- **Hong Kong**
  - **Xd** in MM **regulatory approval** in **H1 2023**
  - **DTC approval** and **hospital formulary listings**
- **Taiwan**
  - **XVd** in MM and **X** in DLBCL positive PBRS decision in **Q4 2023**, followed by **reimbursement listing** in **Q1 2024**

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IV. SCIENTIFIC OVERVIEW

Scientific Recognition at Major Medical Conferences

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14 Poster Publications and **1 Oral Presentation** in 2022 and Early 2023

AACR American Association for Cancer Research® ANNUAL MEETING 2022 New Orleans

- ATG-037 (CD73 Small Molecule Inhibitor)
- ATG-018 (ATR Small Molecule Inhibitor)
- ATG-022 (Claudin 18.2 ADC)
- ATG-008 (mTORC1/2 Small Molecule Inhibitor)
- ATG-012 (KRAS Small Molecule Inhibitor)

sitc Society for Immunotherapy of Cancer 2022 SITC NOVEMBER 8-12 BOSTON MASSACHUSETTS

- ATG-031 (CD24 Monoclonal Antibody)
- ATG-101 (PD-L1/4-1BB Bispecific Antibody)
- ATG-018 (ATR Small Molecule Inhibitor)
- ATG-027 (B7H3/PD-L1 Bispecific Antibody)

AACR American Association for Cancer Research® ANNUAL MEETING 2023 Orlando

- ATG-031 (CD24 Monoclonal Antibody)
- ATG-017 (ERK1/2 Small Molecule Inhibitor)
- ATG-037 (CD73 Small Molecule Inhibitor)
- ATG-034 (LILRB4 Antagonist Antibody)
- ATG-008 (mTORC1/2 Small Molecule Inhibitor)

ATG-022: An Anti-Claudin 18.2 ADC with Potent *In Vivo* Efficacy in Claudin 18.2 Very Low-Expression Tumors

ANTENGENE

Summary of ATG-022

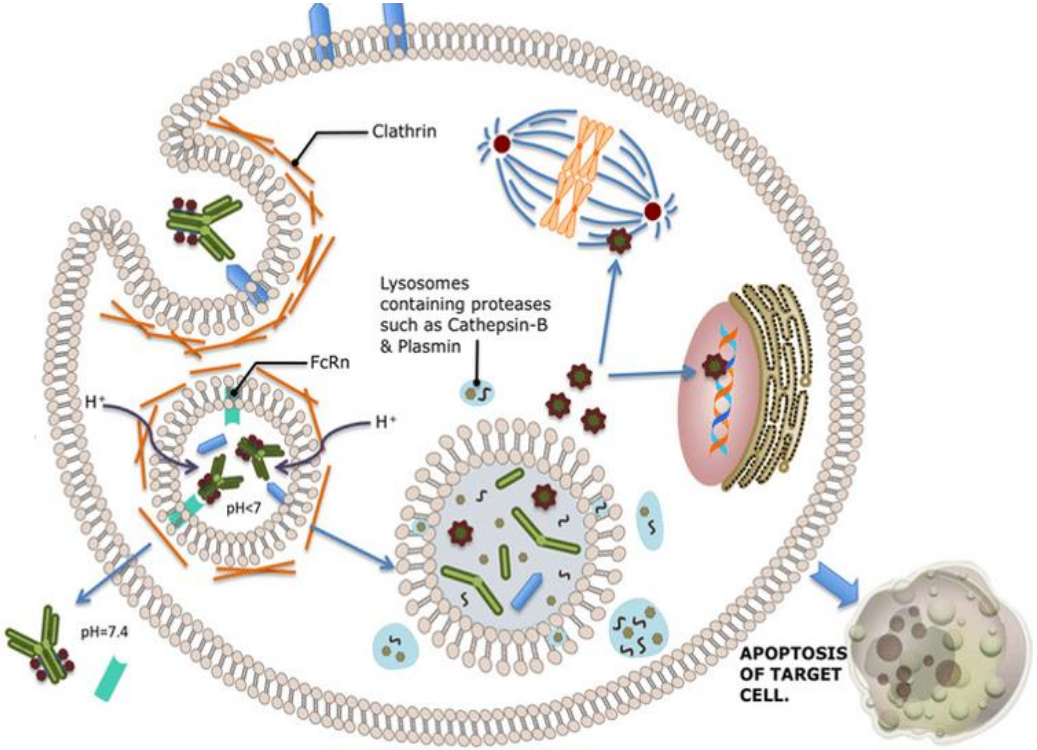
- Claudin 18.2 is a **tumor-associated antigen** overexpressed particularly in gastric, esophageal and pancreatic cancers, occasionally in other tumors including lung, ovarian, and head & neck malignancies
- Clinical ADC candidate with **vc-MMAE as linker payload (DAR4)**

Best-in-Class Potential

- High affinity antibody (pM grade) against Claudin 18.2 **allows targeting of patients with low expression of Claudin 18.2**
- Strong *in vivo* efficacy pre-clinically in PDX models with **various Claudin 18.2 expression levels, including in tumors with extremely low Claudin 18.2 expression**

Excellent Safety Profile

- Demonstrated an **excellent safety profile** in GLP toxicology studies
  - Induced complete tumor regression (tumor-free) in pre-clinical PDX model **without affecting the body weight of the animal**
- Displayed **high specificity** in Retrogenix's Cell Microarray Technology Experiment
  - ATG-022 mAb **specifically interacted with Claudin 18.2**, the primary target, on both fixed and live cells



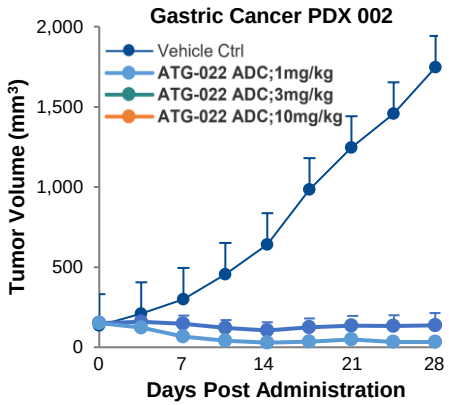
Christina Peters, Stuart Brown
Antibody-drug conjugates as novel anti-cancer chemotherapeutics

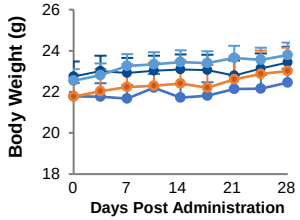
ATG-022 Demonstrated Strong *In Vivo* Efficacy in Various Claudin 18.2 Level PDX Models

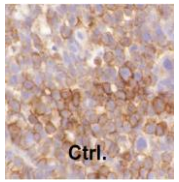
ANTENGENE

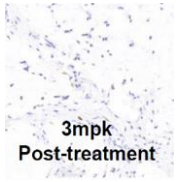
High Expression Level of Claudin 18.2

ATG-022 Induced Tumor Regression (TR) or Complete Remission (CR)

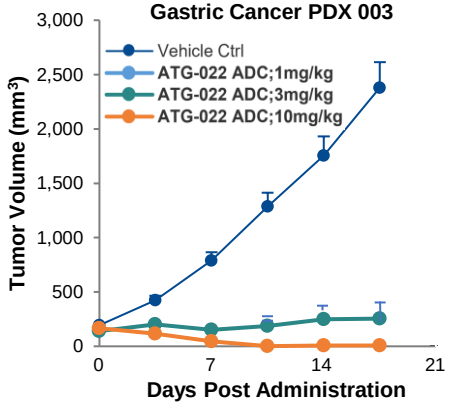


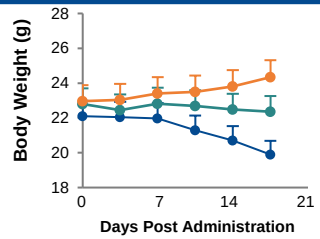


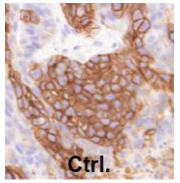


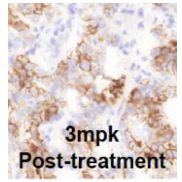


Model	CLDN18.2 Expression		TGI%		
	Positive%	IHC Intensity	1mpk	3mpk	10mpk
PDX002	90%	1+~2+	TR	TR	CR





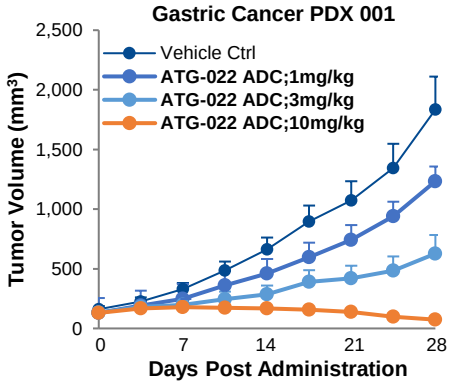


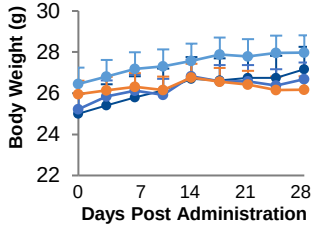


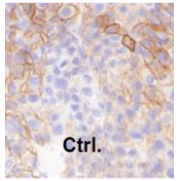
Model	CLDN18.2 Expression		TGI%	
	Positive%	IHC Intensity	3mpk	10mpk
PDX003	70%	2+~3+	94%	CR

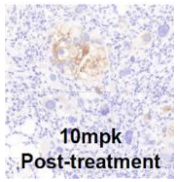
Moderate Expression Level of Claudin 18.2

ATG-022 Induced Tumor Regression (TR) or Complete Remission (CR)





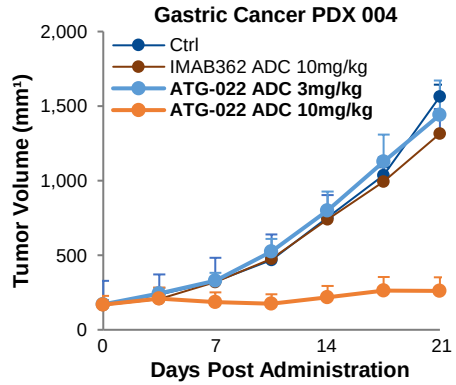


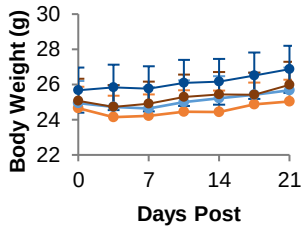


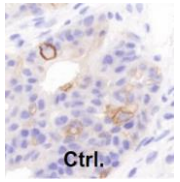
Model	CLDN18.2 Expression		TGI%		
	Positive%	IHC Intensity	1mpk	3mpk	10mpk
PDX001	60%	1+	35%	72%	TR

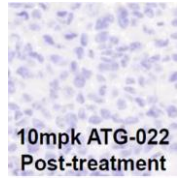
Extremely Low Expression Level of Claudin 18.2

ATG-022 Inhibited Tumor Growth









Model	CLDN18.2 Expression		TGI%		
	Positive%	IHC Intensity	BMK	3mpk	10mpk
PDX004	<5%	0~1+	NS	NS	93

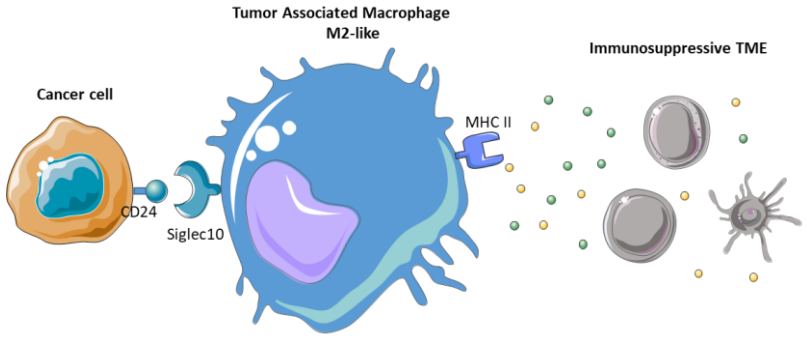
Source: AACR 2022.

ATG-031: First-in-Class CD24 Antibody to Inhibit the "Don't Eat Me" Signal

ANTENGENE

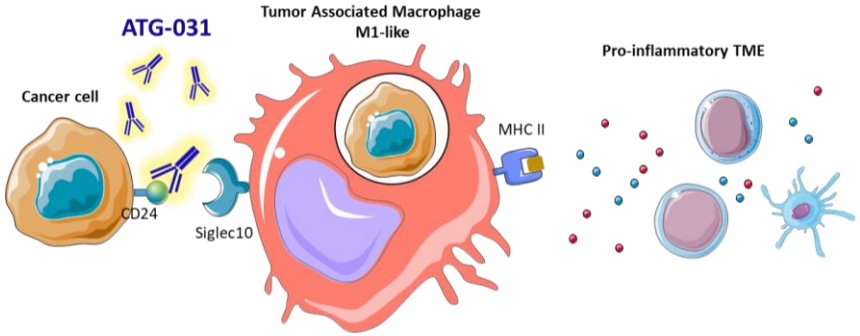
Summary of ATG-031

- CD24 is a novel "don't eat me" target not expressed in healthy erythrocytes, thus **potentially overcoming the anemia issues commonly seen in CD47**
- **First-in-class humanized CD24 mAb** inhibits the "don't eat me" signal by blocking CD24-Siglec10 pathway and enhances macrophage-mediated phagocytosis of cancer cells
- **CDx antibody successfully developed** in-house for patient selection
- Potent **single agent** *in vivo* efficacy and **synergy with chemotherapy or CPI**



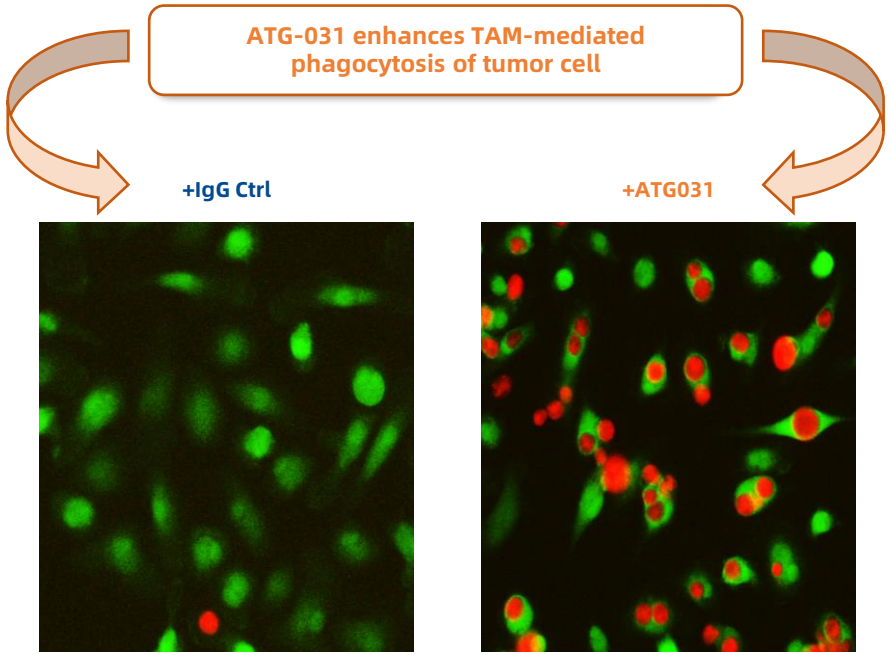
"Don't Eat Me"

- Reduced phagocytosis
- M2-like Tumor Associated Macrophage
- Immunosuppressive Tumor Microenvironment
- Less tumor antigen presentation
- In-activated T and NK cells



"Eat Me"

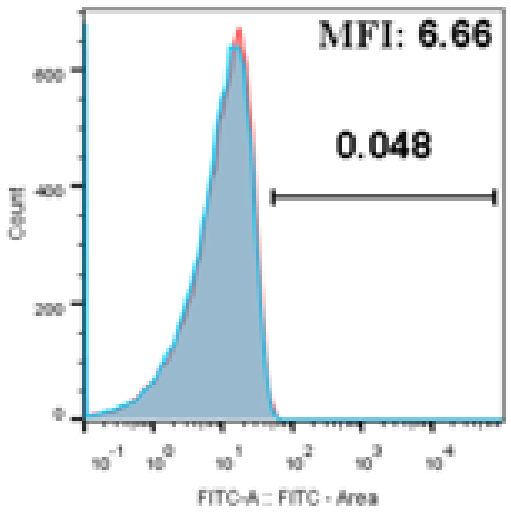
- Increased phagocytosis
- M1-like Tumor Associated Macrophage
- Pro-inflammatory Tumor Microenvironment
- Enhanced Tumor Antigen presentation
- Activated T and NK cells



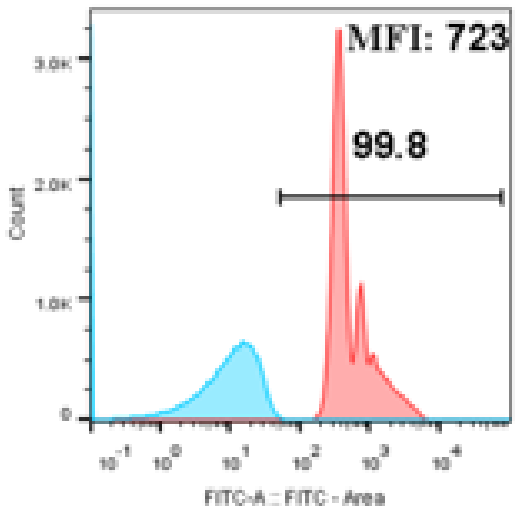
CD24 is Not Expressed on Human Red Blood Cells, Unlike CD47

- Due to the normal tissue distribution of CD47 (e.g. Expression on red blood cell), the clinical development of CD47 binding molecules has been hampered by the on-target-off-tumor toxicity, such as anemia
- **Unlike CD47, CD24 is not expressed on human red blood cells**

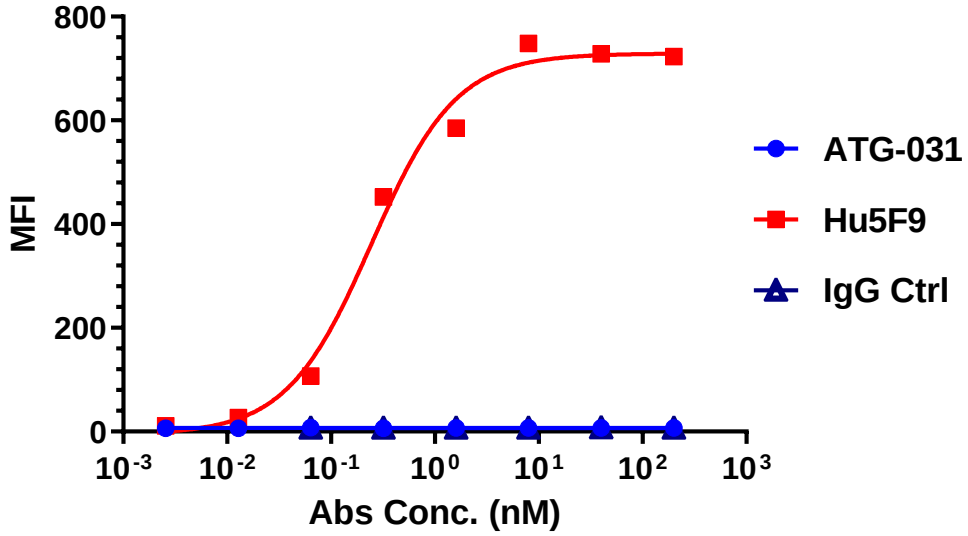
ATG-031



Anti-CD47



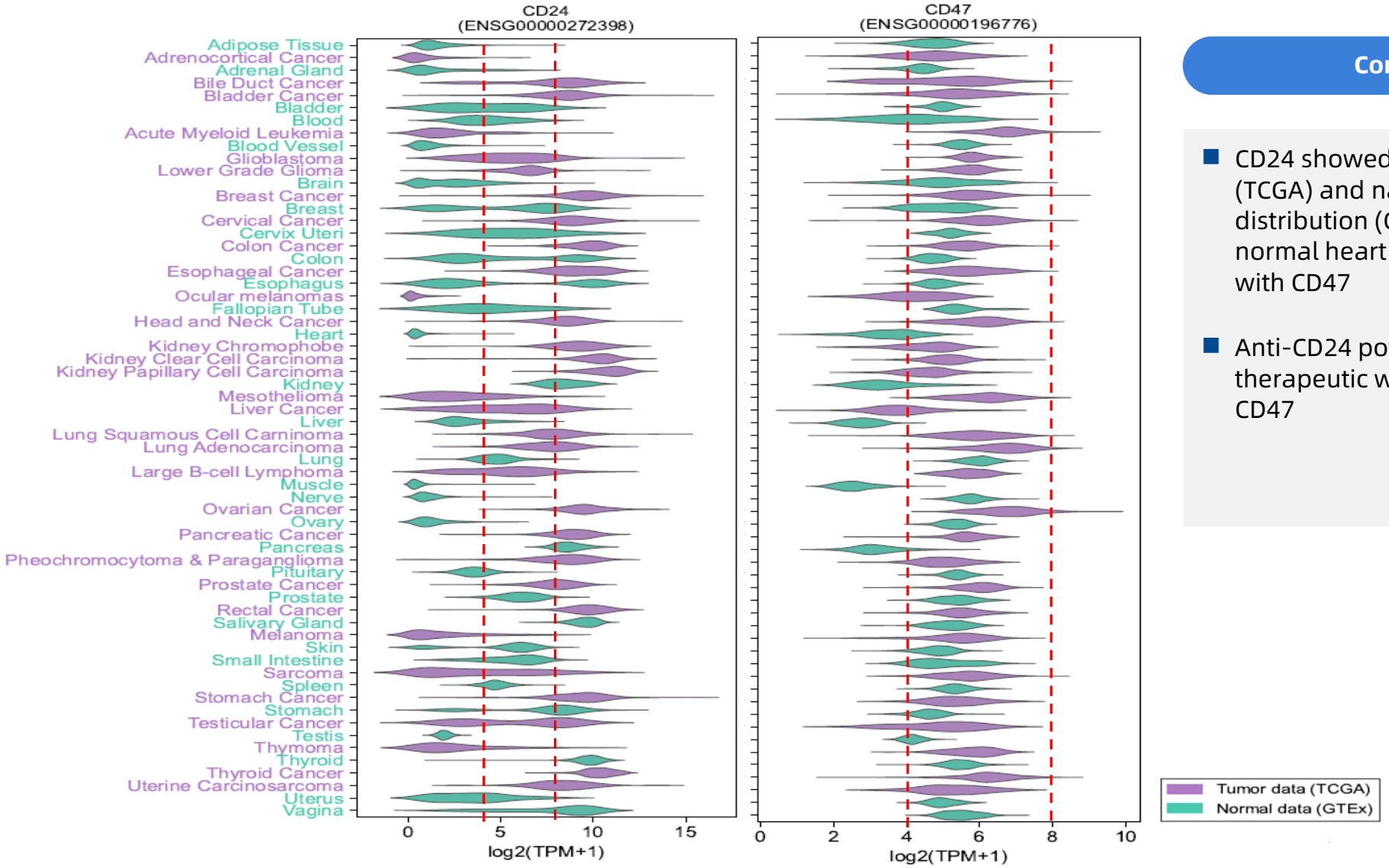
Human RBC



Human RBC Expressed CD47 but Not CD24

CD24 Has Higher Tumor Expression Compared to CD47

ANTENGENE



Comparison Analysis

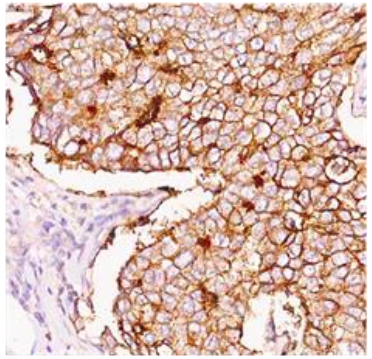
- CD24 showed much higher tumor expression (TCGA) and narrower normal tissue distribution (GTEx), with significantly lower normal heart and CNS expression, compared with CD47
- Anti-CD24 potentially has a larger therapeutic window compared with anti-CD47

CD24 is Over-expressed in Multiple Tumor Types

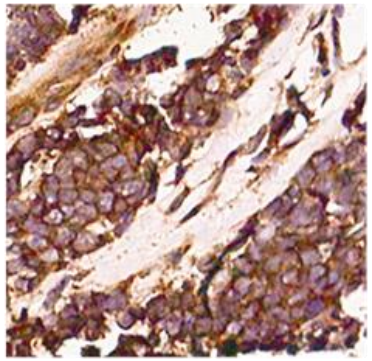
ANTENGENE

- A highly selective CDx antibody for IHC was developed in-house
- IHC staining on tumor tissue microarray revealed that 50-80% of patients with lung, breast, bladder, ovarian, or liver cancer have CD24 expression on tumor cell surface
- CD24 over expression was also detected in other solid tumor types and hematological malignancies

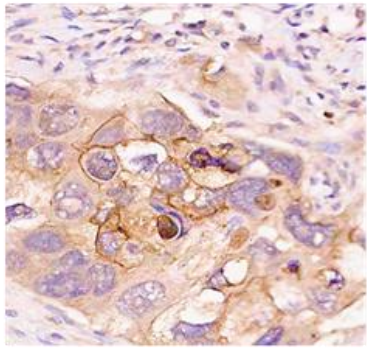
Breast Cancer



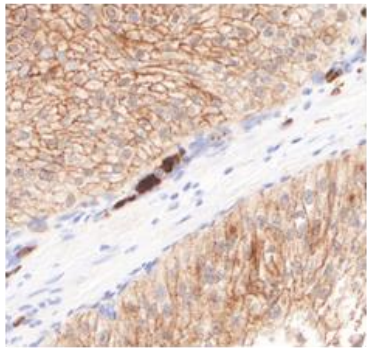
Small Cell Lung Cancer



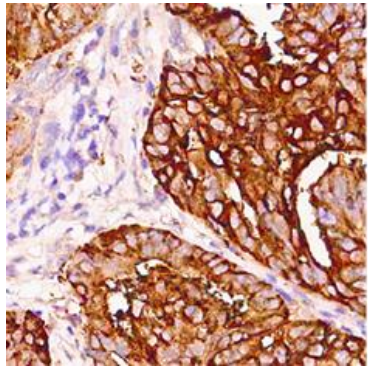
NSCLC-Sq



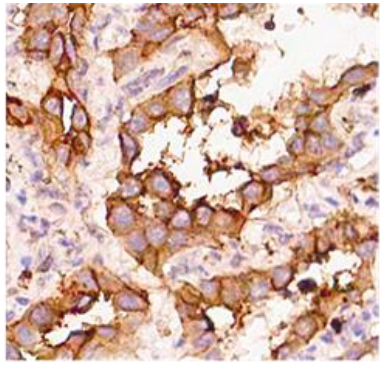
Bladder Cancer



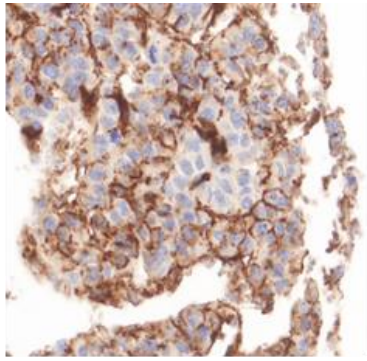
Ovarian Cancer



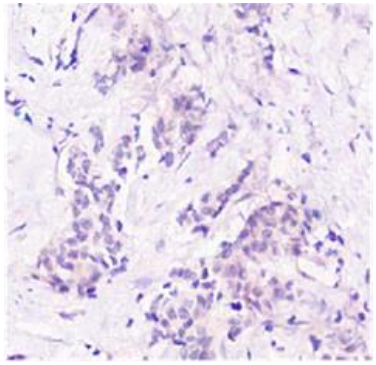
NSCLC-Adeno



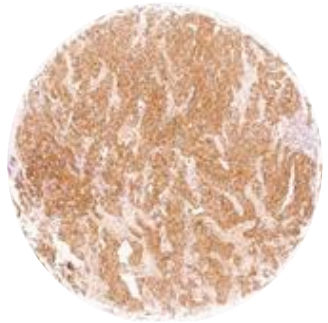
Liver Cancer



Negative Stained Tumor



CD24 Expression in Cancerous Tissue and Para-cancerous Normal Tissue



Breast Cancer Tissue

Para-cancerous Normal Tissue

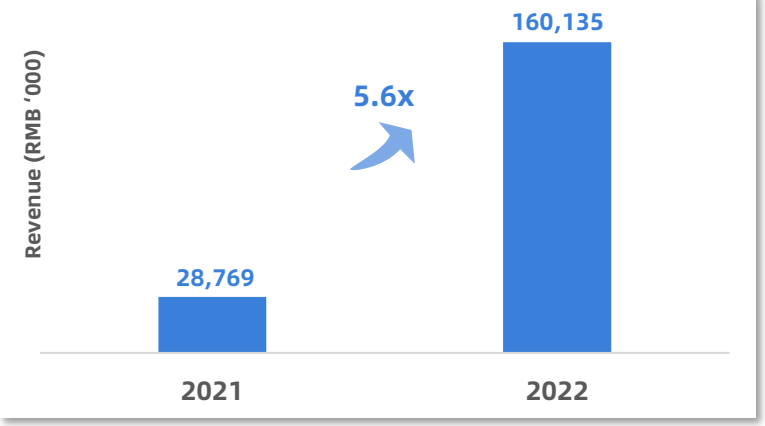
V. FINANCIAL RESULTS

2022 Financial Highlights

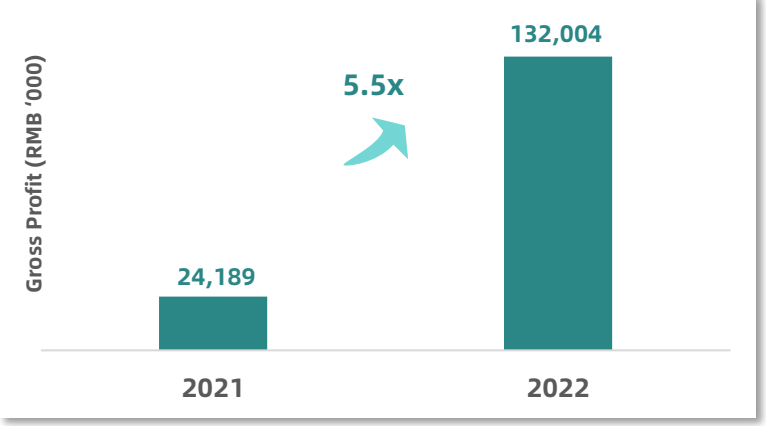
ANTENGENE

Cash and Bank Balances – RMB 1,790 mm (USD 257 mm)

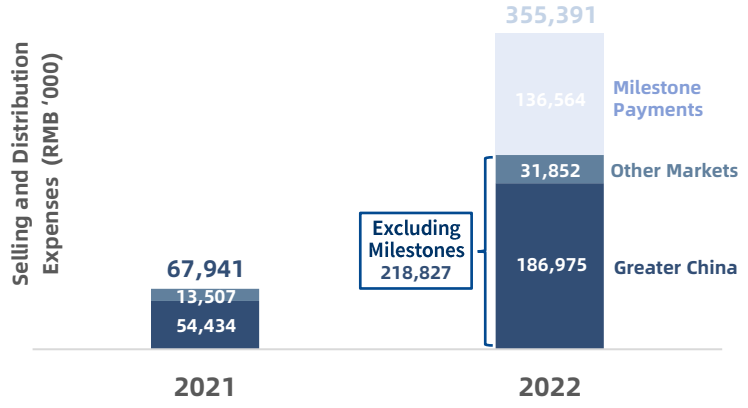
2021-2022 Revenue



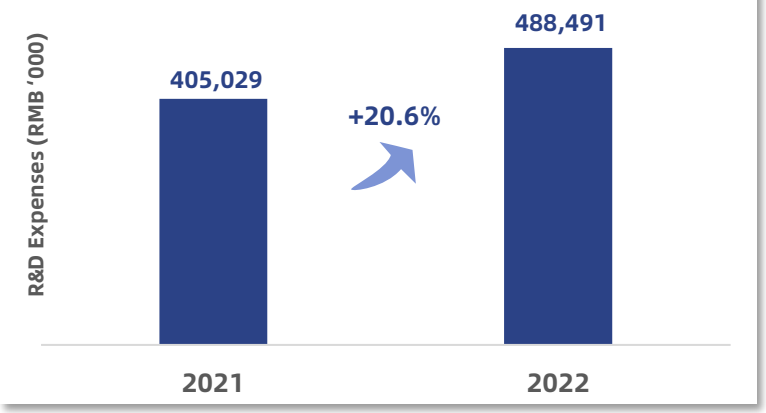
2021-2022 Gross Profit



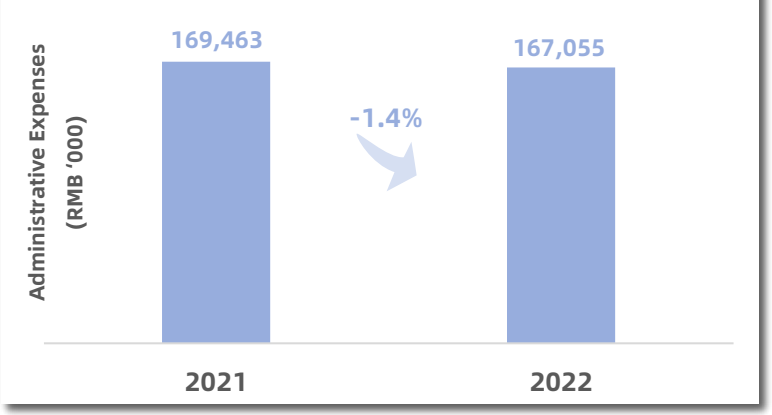
2021-2022 Selling and Distribution Expenses



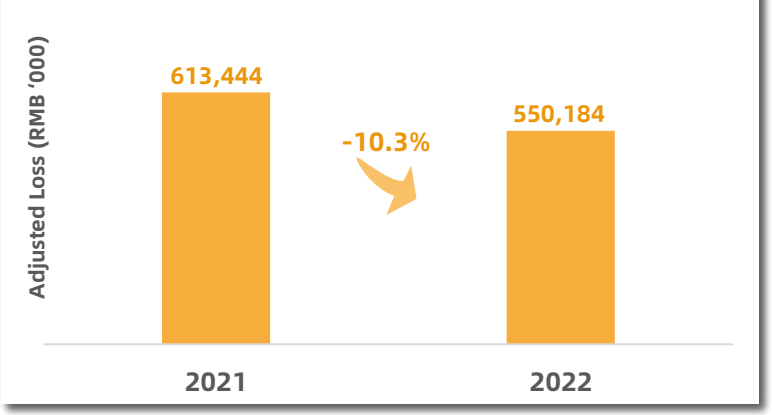
2021-2022 Research & Development Expenses



2021-2022 Administrative Expenses



2021-2022 Adjusted Loss



*USD/RMB exchange rate of 1/6.96 for Cash and Bank Balances is as of December 31st, 2022

ANTENGENE

V. CLOSING REMARKS

2023 is a Catalyst-Rich Year for Antengene

ANTENGENE

Commercialization across China and APAC, with multiple data read outs of clinical stage programs

Selinexor Commercial Launch Across Asia Pacific

- Reimbursement approval: **Australia** (MM XVd)
- Reimbursement submission: **South Korea** (MM Xd)
- Reimbursement submissions: **Taiwan** (MM XVd; DLBCL)
- XPOVIO® inclusion in the **Singapore Cancer Drug List**
- Commercial launch: **Hong Kong** (MM Xd)

Clinical Development Progress

- **Confirm regulatory pathway** of **ATG-008** (mTORC1/2i) in advanced cervical cancer
- **Complete patient enrollment** for **"BENCH" study of ATG-010** (XPO1i) in 2L+ multiple myeloma
- **Preliminary data read out** of **ATG-017** (ERK1/2i) "ERASER" trial
- **Preliminary data read out** of **ATG-101** (PD-L1/4-1BB BsAb) "PROBE" trial and "PROBE-CN" trial
- **Preliminary data read out** of **ATG-037** (CD73i) "STAMINA" trial
- **Preliminary data read out** of **ATG-018** (ATRi) "ATRIUM" trial
- **First patient dosing: ATG-022** (Claudin 18.2 ADC) and **ATG-031** (CD24 mAb)

Multiple Regulatory Filings

- Selinexor (ATG-010) NDA filing in **Indonesia** (MM SVd & Sd; DLBCL)
- Selinexor (ATG-010) sNDA filing in **Hong Kong** (MM SVd; DLBCL)
- Selinexor (ATG-010) sNDA filing in **Mainland China** (DLBCL)
- Selinexor (ATG-010) sNDA filing in **South Korea** (MM SVd)

ANTENGENE

ANTENGENE CORPORATION LIMITED
(SEHK: 6996.HK)

MARCH 2023

THANK YOU

TREATING PATIENTS BEYOND BORDERS