2022 Interim Results
Conference Call Presentation

HBM HOLDINGS-B, 02142.HK

31 August 2022

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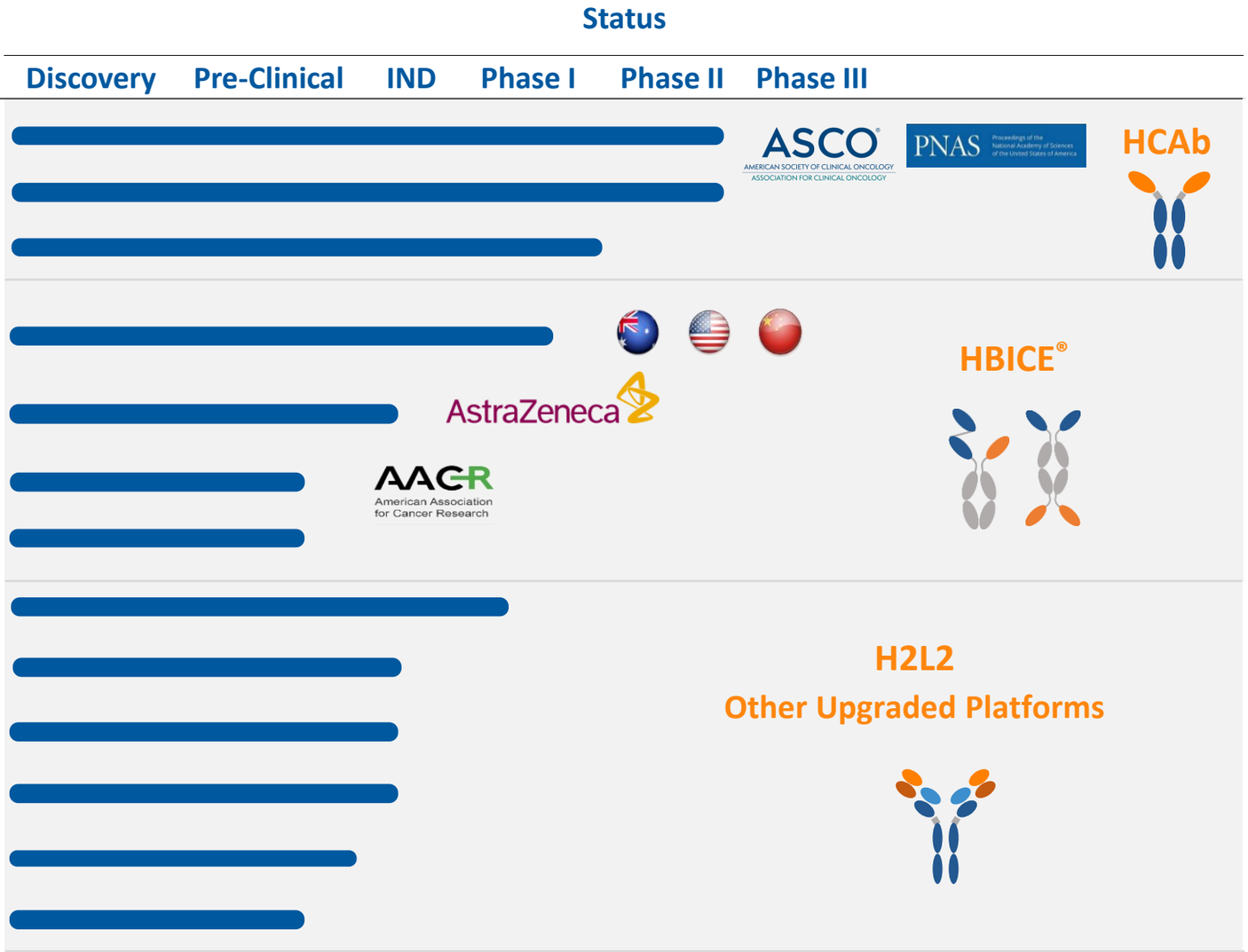
Continue Build-Up of Global Innovation Capabilities at Harbour BioMed

	Rapidly Develop Innovative Global Programs	Continuously Upgrade Technology Platforms for Multiple Modality Applications	Innovatively Broaden the Business Models of Global Collaborations
2022	• **Global Programs**: 16 4 clinical-stage assets 3 new IND in 2022 2H • License-in assets: 2 2 phase III	• H2L2, HCAb, HBICE®,SBC, HCAb Plus®, HBIKE • mAb, BsAb, ADC, CAR-T, CAR-NK, mRNA……	• Product global license-out • Platform license-out • Co-discovery/Co-development • Joint venture AstraZeneca, Dana-Farber Cancer Institute, Boston Children's Hospital, Mount Sinai
2020 (IPO)	• **Global Programs**: 7 1 phase I • License-in assets: 2 2 phase II	• H2L2, HCAb, HBICE®, SBC • mAb, BsAb	• Product global license-out • Platform license-out • Co-discovery/Co-development • Joint venture abbvie, MD Anderson Cancer Center, The Wistar Institute
2017	• **Global Programs**: 1 1 pre-clinical • License-in assets: 2 2 pre-clinical	• H2L2, HCAb • mAb	• Platform license-out Erasmus MC

HARBOUR BIOMED

Highly Innovative and Differentiated Global Portfolio Pipeline

Project	Target	Indication	Commercial Rights
HBM4003[1]	CTLA-4	Solid Tumors [a]	Global
		Solid Tumors [b]	
		Solid Tumors [c]	
HBM7008[2]	B7H4×4-1BB	Solid Tumors	Global
HBM7022	CLDN18.2xCD3	Solid Tumors	Global License-out
HBM9027	PDL1xCD40	Solid Tumors	Global
HBM7004	Undisclosed	Solid Tumors	Global
HBM9378	TSLP	Asthma	Global
HBM1022	CCR8	Solid Tumors	Global
HBM1020	B7H7	Solid Tumors	Global
HBM1007	CD73	Solid Tumors	Global
HBM9033	MSLN	Solid Tumors	Global
HBM1047	Undisclosed	Solid Tumors	Global



1. HBM4003 is a next-gen anti-CTLA-4 antibody with enhanced ADCC for Treg depletion
2. HBM7008 completed Phase I FPFD in Australia in May, US IND clearance and China IND approval in June 2022

a. Melanoma, HCC, RCC and Other Advanced Solid Tumors
b. Melanoma, HCC, NEC/NET and Other Advanced Solid Tumors
c. NSCLC and Other Advanced Solid Tumors

Significant Advancements for Portfolio Product Developments in 2022 1H

3 Clinical Studies Milestones

Data Readout

- *HBM4003 mono trial Phase I*
- *HBM4003 combo trial Phase I*

Data Analysis

- *HBM9036 Phase III*

  1st Interim Analysis

4 IND Approvals

- *HBM7008 IRB in Australia*
- *HBM7008 IND* in USA
- HBM7008 IND in China
- *HBM9378*

8 Ongoing Clinical Trials

- *HBM4003 combo trial for Melanoma*
- *HBM4003 combo trial for NEC/NET*
- *HBM4003 combo trial for HCC*
- *HBM4003 mono trial*
- *HBM7008*
- *HBM9161 MG, TED*
- *HBM9036 DED*

6 Global Publications

- *HBM4003 at ASCO*
- *HBM4003 at PNAS*
- *HBM9161 MG at Neurology and Therapy*
- *HBM9036 at International Ophthalmology*
- *HBM9027 at AACR*
- *87G7 at Science Immunology*

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01 Company Overview and Highlights

02 Develop Global Innovative and Differentiated Product Pipeline

03 Upgrade Technology Platforms to Explore Novel Frontier

04 Product Updates on Regional Market Assets

05 Financial Results

06 Outlook

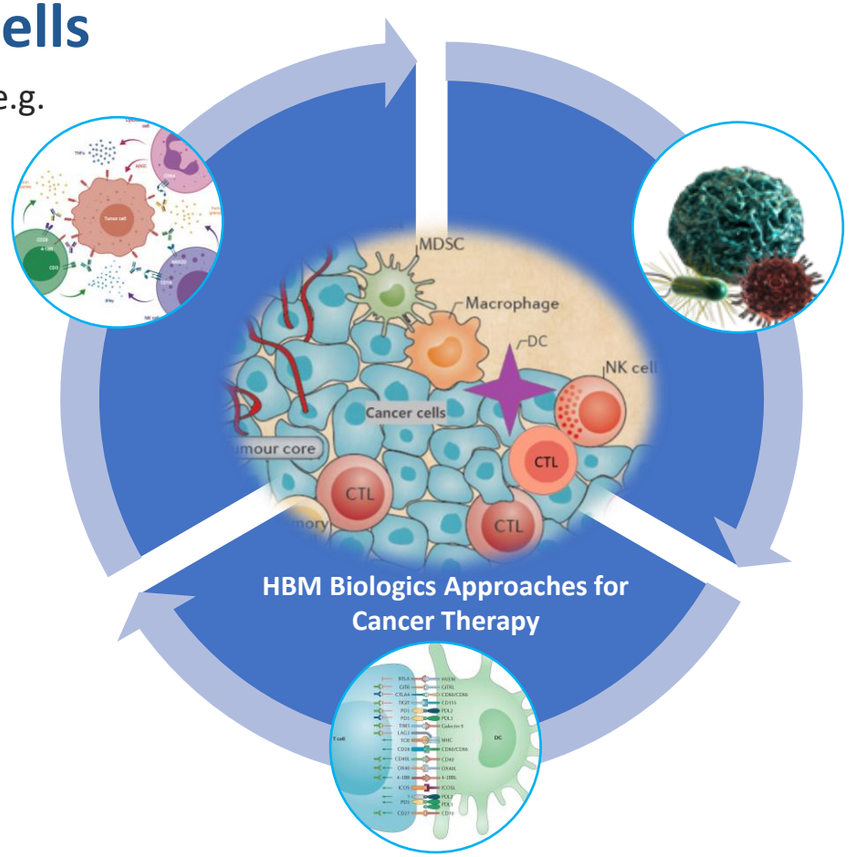
Focus on Next-Gen IO Therapeutics
Develop Global Innovative and Differentiated Product Pipeline

Leveraging HBM Antibody Platforms to Synergize Three Distinct Mechanisms of Action in Immuno-oncology

1. Stimulate Immune Cells

by Immune Cell Engager Bispecific , e.g.
HBICE technology

HBM7022 (CLDN18.2xCD3)
HBM7008 (B7H4x4-1BB)
HBM9027 (PD-L1xCD40)
HBM7004
…



2. Direct Killing

Deplete Treg cells or Tumor cells by
eADCC and next-gen ADC technology

HBM4003 (CTLA4 –eADCC)
HBM1022 (CCR8 –eADCC)
HBM9033 (MSLN –ADC)
HBM1039
…

3. Overcome Immune Suppression

Modulate alternative immune evasion pathways beyond PD1/L1 using H2L2/HCAb/SBC technology

HBM1020 (B7H7)
HBM7008 (B7H4x4-1BB)
HBM1047 …

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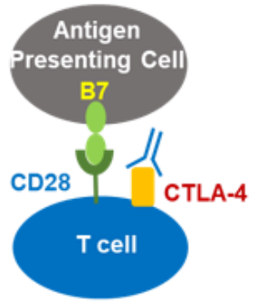
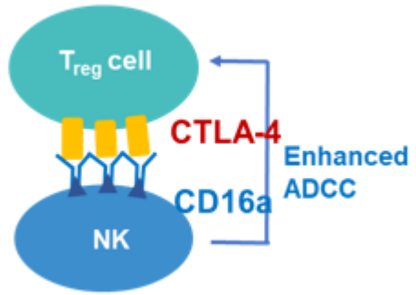
HBM4003

Next-Gen Anti-CTLA-4 Antibody with Potential to be the Mainstream of IO Therapeutics

MOA1
Checkpoint Inhibit



MOA2
T_{reg} Depletion



Competitive Advantages

1. Deplete intra-tumoral Treg cells via enhanced ADCC strategy
2. Great safety profile resulted from the reduced drug exposure in the serum
3. Huge potential for combination therapies

2022 Global Development

Monotherapy

- Phase Ib/II ASCO poster released

Combination Therapy

- Completed phase Ib/IIa Melanoma patient enrollment, phase Ia ASCO abstract released
- Completed first dosing of first patient of phase I trial for HCC
- Completed the patient recruitment of phase Ib trial for NET/NEC

ASCO
AMERICAN SOCIETY OF CLINICAL ONCOLOGY
ASSOCIATION FOR CLINICAL ONCOLOGY

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HBM4003

Next-Gen Anti-CTLA-4 Antibody with Potential to be the Mainstream of IO Therapeutics

Mono Therapy Phase I

Promising efficacy

- 2 patients with **PD-1 refractory HCC** (Australian, China) have been confirmed as **PR**
  - 1 HCC patient, tumor shrank by **64.4%** at week 24
  - 1 HCC patient, tumor shrank by **38.3%** at week 12
- Another **CRPC** patient from Australia had **PSA response** of more than **50%** reduction

Well tolerated

- No fatal TRAE
- Majority of TRAE were G1/2
- ≥G3 TRAE was 9.3% at 0.45mg/kg

Combination Therapy Phase I/IIa

Promising efficacy

- **2 of 6 patients** in 0.3mg/kg dosing group confirmed as **PR**
  - 1 **PD-1 resistant Mucosal Melanoma** patient, tumor shrank by **37.2%** at week 18
  - 1 **PD-1 resistant Urothelial Carcinoma** patient, tumor shrank by **57.4%** at week 12
- **Encouraging efficacy** of melanoma expansion trial was observed in difficult to treat subtype and in both PD-1 naive and PD-1 pretreated populations

Well tolerated

- No G4/5 TRAE
- No new signals or unexpected toxicities in combo therapy

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HBM4003
Next-Gen Anti-CTLA-4 Antibody with Potential to be the Mainstream of IO Therapeutics

2022 Scientific *Publication*

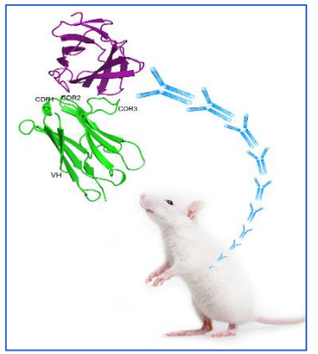
- Binds human CTLA-4 with high affinity reaching 10^{-11} M, as one fully human heavy-chain antibody
- Effectively depletes tumor-resident Treg with enhanced antibody-dependent cellular cytotoxicity (ADCC)
- Potent tumor penetration with small size, thereby more widely exerting its effect on T cell activation
- Less systemic drug exposure in vivo potentially provides an improved therapeutic window in clinical applications

PNAS RESEARCH ARTICLE | APPLIED BIOLOGICAL SCIENCES OPEN ACCESS Check for updates

An anti-CTLA-4 heavy chain–only antibody with enhanced T_{reg} depletion shows excellent preclinical efficacy and safety profile

Xin Gan[a], Qianqian Shan[a], He Li[a], Rick Janssens[a,b], Yuqiang Shen[a], Yun He[a], Fei Chen[a], Rien van Haperen[a,b], Dubravka Drabek[a,b], Jin Li[a], Yang Zhang[a], Jiuqiao Zhao[a], Beibei Qin[a], Ming-Jin Jheng[a], Victor Chen[a], Jingsong Wang[a], Yiping Rong[a], and Frank Grosveld[a,b,1]

Edited by Richard Flavell, Yale University, New Haven, CT; received January 17, 2022; accepted June 13, 2022



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HBM4003
Advocated by Global Leading Experts in IO Therapeutics

HBM4003 aims to transform the global IO landscape with breakthrough innovation

Dr. Frank Grosveld

Fellow of Royal Society and Member of Royal Netherlands Academy of Arts and Sciences

Professor and former Head of Department of Cell Biology & Department of Clinical Genetics at Erasmus University Medical Center

Dr. Robert Kamen

Venture Partner at Third Rock Ventures

Former President & Unit Head of Abbott Bioresearch Centre

Dr. Jon Wigginton

Chief Medical Officer, Cullinan Oncology; Advisor of MPM Capital

Former Therapeutic Area Head of Immuno-Oncology, Early Clinical Research at BMS

Former President of the Society for Immunotherapy of Cancer

Dr. Alexander Zukiwski

Chief Medical Officer at CASI Pharmaceuticals

Former Chief Executive Officer and Chief Medical Officer of Arno Therapeutics

Former Chief Medical Officer and Executive Vice President of Clinical Research at MedImmune

Dr. John M Kirkwood

Distinguished Service Professor Medicine, University of Pittsburg

Usher Professor of Medicine, Dermatology, Clinical and Translational Science at The University of Pittsburg School of Medicine

Specialty: Global Melanoma and Skin Cancer

Dr. Shivaani Kummar

Director, Phase 1 Clinical Research Program, Division of Oncology Stanford School of Medicine

Professor of Medicine & Radiology at Stanford University Medical Centre

Specialty: Sarcoma

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HBM7008 (B7H4x4-1BB)

First-in-Class Bispecific Antibody from HBICE® Platform

Global Multi-Center Clinical Trials

Australia: Completed FPFD for Phase I Trial

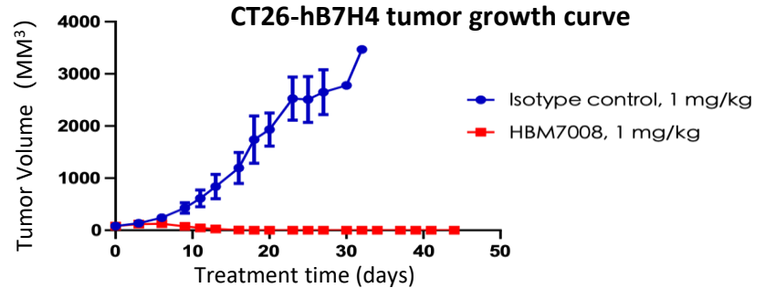
USA: Obtained IND Clearance

China: Obtained IND Approval

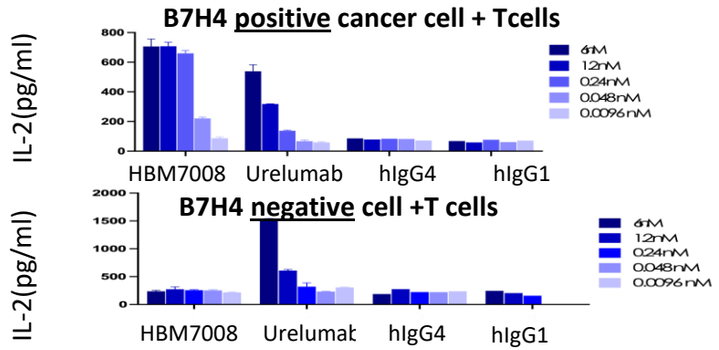
Competitive Advantages and Highlights

- ❑ Novel immune escape pathway - **First-in-class** target (B7H4x4-1BB)
- ❑ Fully human **bispecific antibody** from the HBICE® platform
- ❑ **Excellent safety profile**, potential to avoid 4-1BB liver toxicity risk with the benefit of its innovative biology mechanisms and bispecific design

HBM7008 completely leads tumor regression in B7H4 positive syngeneic model



B7H4 dependent 4-1BB activation and T cell stimulation



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HBM9378 (TSLP)

Next-Gen Monoclonal Antibody Therapeutics

Highlights

- ❑ A fully human antibody targeting TSLP, for the treatment of moderate-to-severe asthma
- ❑ IND Approval in 2022 1H
- ❑ FPFD of **phase I trial** in 2022 2H

Significant Clinical Unmet Needs for Moderate-to-severe Asthma

- **45.7** million adult asthma patients (≥20 years) globally, **1.2** million severe asthma in China[1-2]
- Conventional therapies including ICS, LABA and OCS are not effective for moderate to severe asthma
- **17.8** billion market by 2028, where above **40%** of patients will be treated with biologics

HBM9378 Highlights and Competitive Advantages

- Targeted TSLP signal, upstream of asthma T2 inflammation, while current biologics target downstream signals
- Tezepelumab Ph 2 & 3 clinical results showed significant decrease of asthma exacerbation without IgE, eosinophil count or FeNO limitation
- Less immunogenicity risk. The long half-life optimization, outstanding biophysical properties

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Source:
1. The Global Asthma Network. The Global Asthma Report 2018
2. The China Pulmonary Healthy Study Group. Prevalence, risk factors, and management of asthma in China: a national cross-sectional study. *Articles* 2018.1

HBM7022 (CLDN18.2xCD3)

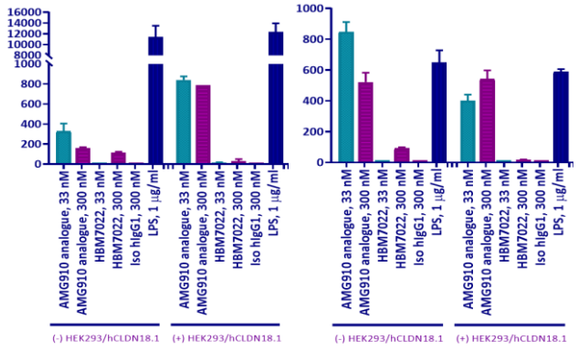
The First Global Out-licensed Bispecific Antibody Generated by HK-Listed Bio-tech

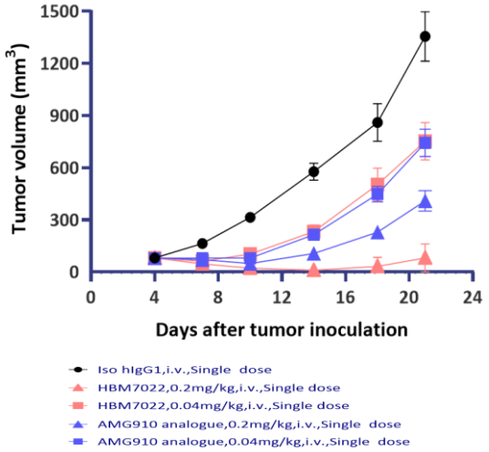
Highlights

- ❑ 2+1 format with better activity and potential larger therapeutic window
- ❑ Low CD3 and high CLDN18.2 affinity reduce systemic exposure and increase distribution to tumor
- ❑ Silent Fc extends half-life, avoids Fc crosslinking and ADCC

AstraZeneca

HBM7022 Pre-clinical Data





Antibody Therapeutics & Engineering Europe (June 8-10, 2021)

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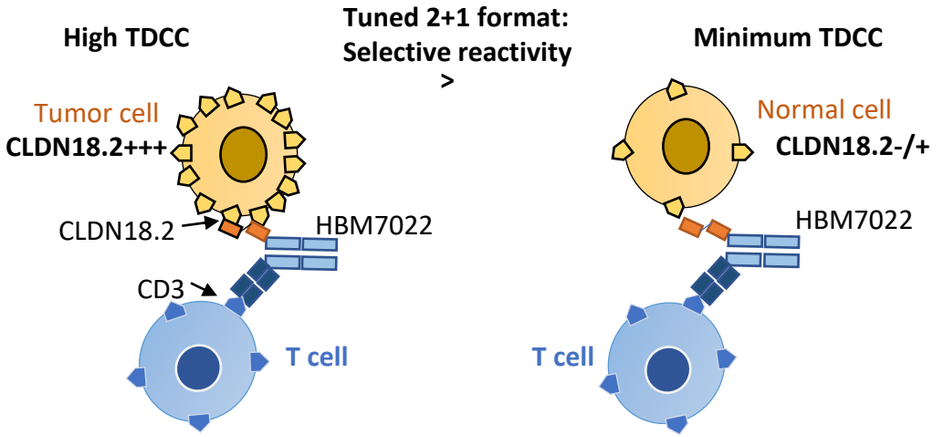
MOA of HBM7022



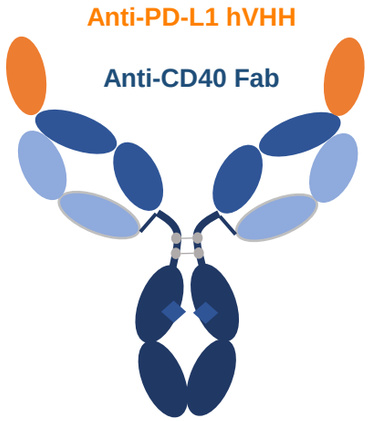
HBM9027 (PD-L1xCD40)

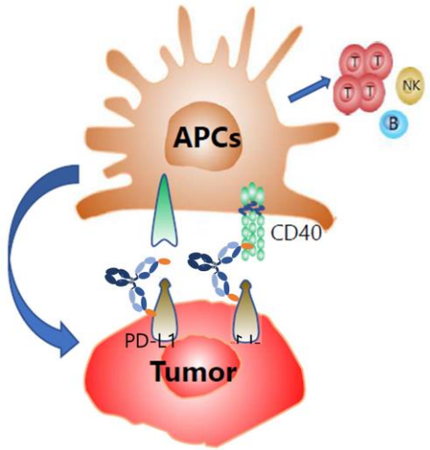
Innovative Bispecific Antibody Activating APC/T Cells

Highlights

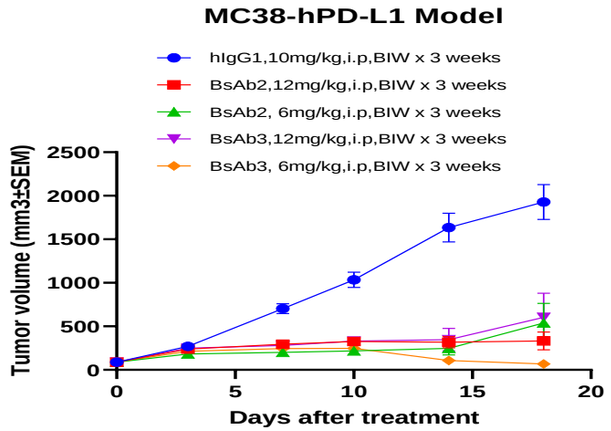
- Synergistically activating both myeloid/DC cells and T cells is critical for some solid tumor therapy considering the most abundant myeloid cell population in TME
- Well maintained αPD-L1 arm and αCD40 arm function activity with robust developability using fully human symmetrical HBICE® format
- Encouraging in vivo efficacy superior to Tecentriq and safety profile is much better than Selicrelumab

IND 2023





Strong TGI in hPD-1/hCD40 DKI Mice



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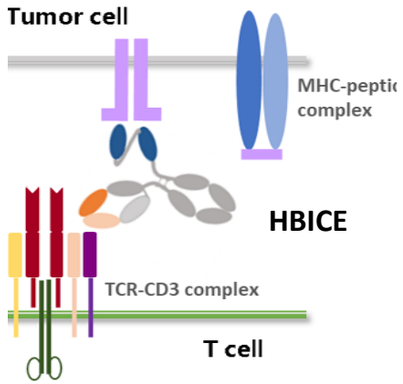
Continue to Advance CD3 Based HBICE® Using Novel TAA and Safer Anti-CD3 Arm

Unique 2+1 Asymmetric Bispecific Antibody (TAAxCD3)

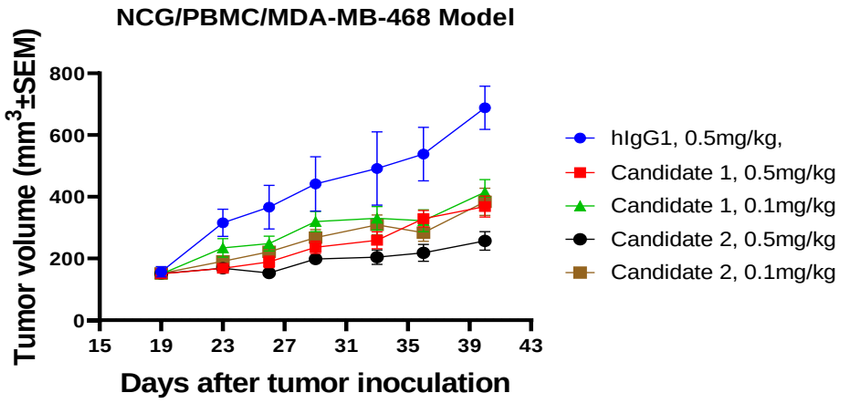
Highlights

- HBICE® technology grants asymmetric structure but less light chain mispairings
- TAA is mainly expressed in low PD-L1 tumors, particularly in gynecological cancers and squamous cell lung cancer
- Potentially combine with PD1 therapy in acquired resistance or co-expression patients

MOA



NSG Mouse Human PBMC CDX Model



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HBM1020 (B7H7)

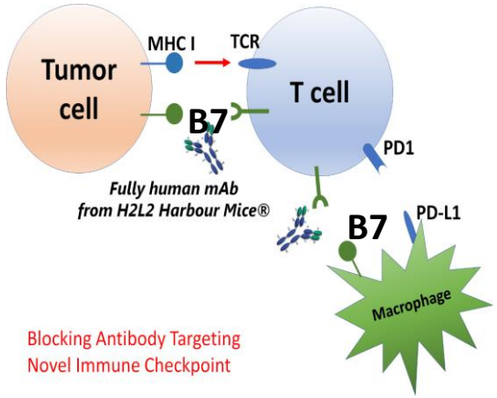
Novel B7 Family Plays an Alternative Immune Escape Mechanism Beyond PD-L1

Highlights

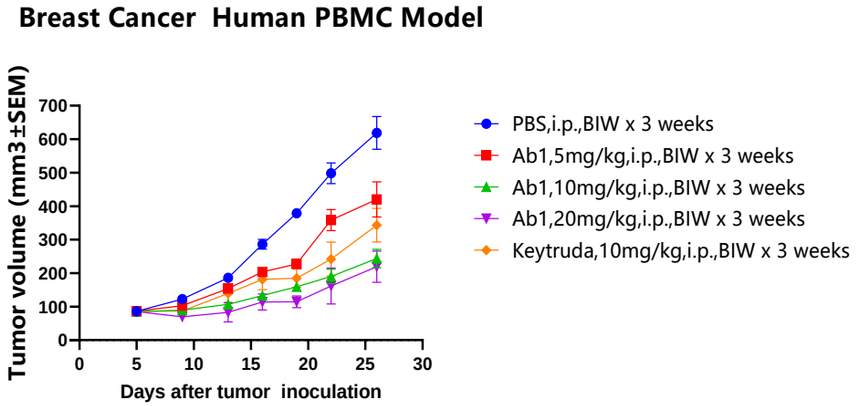
- ❑ B7H7 is a first-in-class target potentially serving as an alternative immune escape pathway
- ❑ Potent receptor blocking, T cell activation activity and excellent in vivo efficacy in humanized tumor models
- ❑ Huge potential to treat PD-L1 negative or anti-PD1/PD-L1 refractory cancer patients

IND 2022

H2L2



Strong TGI in Breast Cancer Model



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HBM1022 (CCR8)

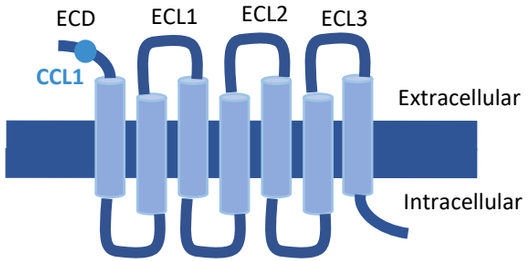
Next-Gen Treg Depletion Therapeutics Targeting A Novel GPCR Target

Highlights

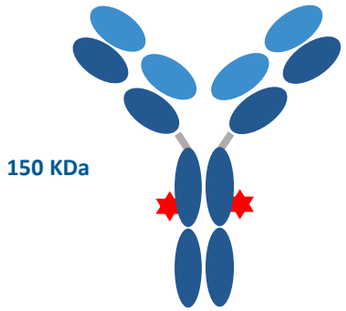
- ❑ Potent tumor resident Treg depletion activity
- ❑ Potent inhibition of CCL1-induced signaling pathway / in vivo anti-tumor efficacy
- ❑ Comparable human/cyno binding affinity
- ❑ Significant potential for breast cancer, colon cancer, and multiple solid tumors and hematological malignancies

IND 2022

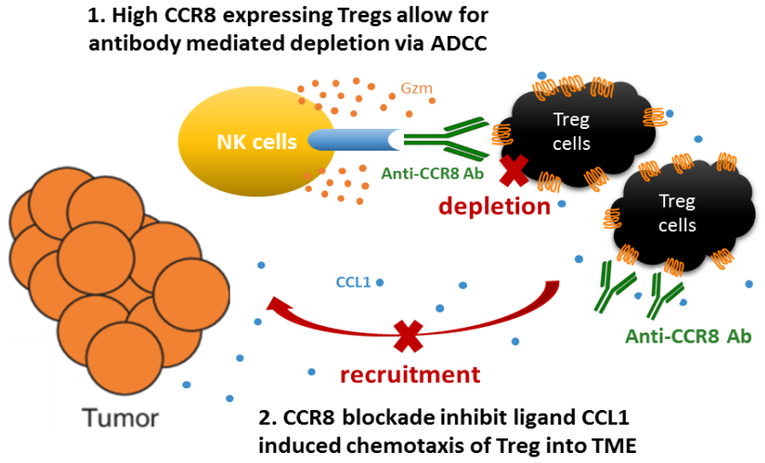
Target CCR8



HBM1022



Mechanism of Action



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HBM9033 (MSLN)

Next-Gen Mesothelin ADC for Solid Tumors

Highlights

- ❑ Unique fully human antibody warhead with improved binding, internalization, blocking activity and less interference by sMSLN
- ❑ The 4th generation of serum stable and tumor-specific cleavable linker with novel payload
- ❑ Superior in vivo potency and promising safety profile compared to other ADC technologies

H2L2-ADC to MSLN

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HBM9033

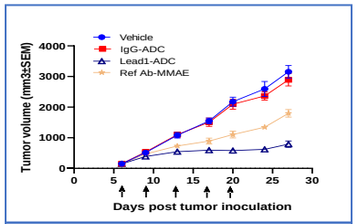
US IND in 2023

Patients of MSLN+ cancers

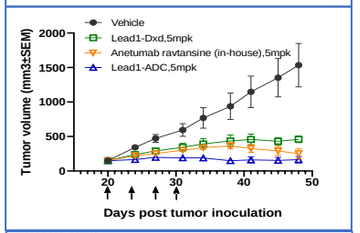
Cancer types	Percentage
Ovary carcinoma	89.9%
PDAC	70.5%
Uterus,endometrioid adenocarcinoma	63.4%
Colorectum adenocarcinoma	48.4%
Lung, adenocarcinoma	47.4%
Liver cancer	41%
Stomach adenocarcinoma	31%
SCLC	27.8%
Thymic carcinoma	35.3%
Mesothelioma	75%
Clear cell RCC	4.4%
Urothelial carcinoma	12.9%

MSLN luminal/membrane expression percentage in 1562 pts tumors

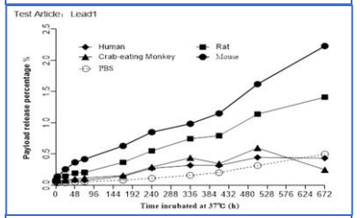
Better efficacy than MMAE based ADC in mouse CDX model 1



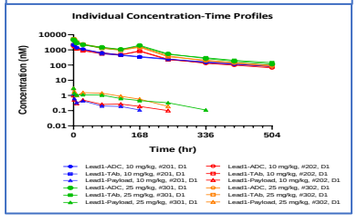
Better efficacy than DXd based ADC in mouse CDX model 2



Excellent plasma stability



Confirmed in-vivo stability of ADC shows minimal payload release in monkey



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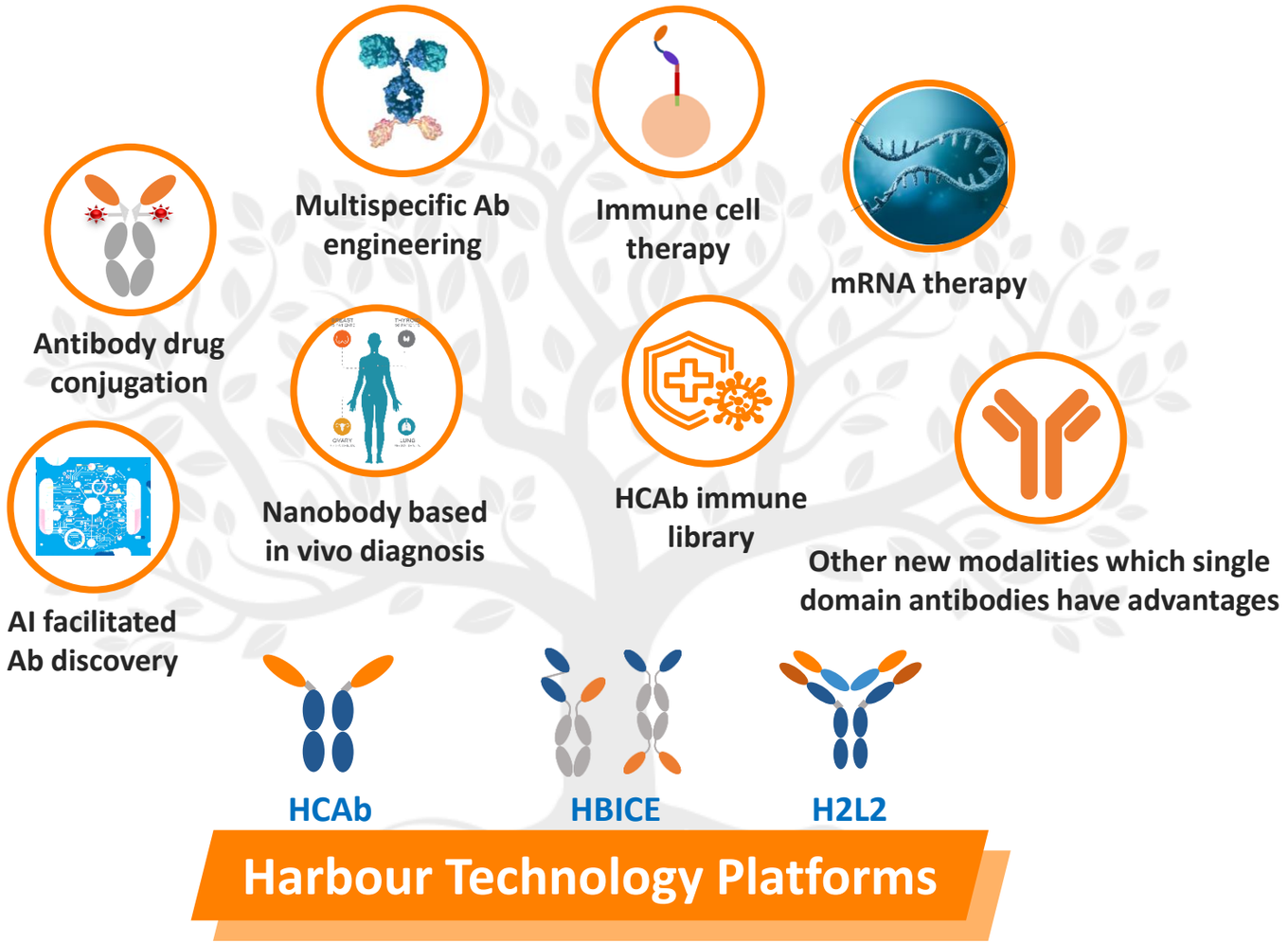
Broad Applications of Technology Platforms Empower Global Biotherapeutics Innovation

Harbour Mice®

- HBICE®
- NK Cell Engager
- HCAb Plus®
- ADC



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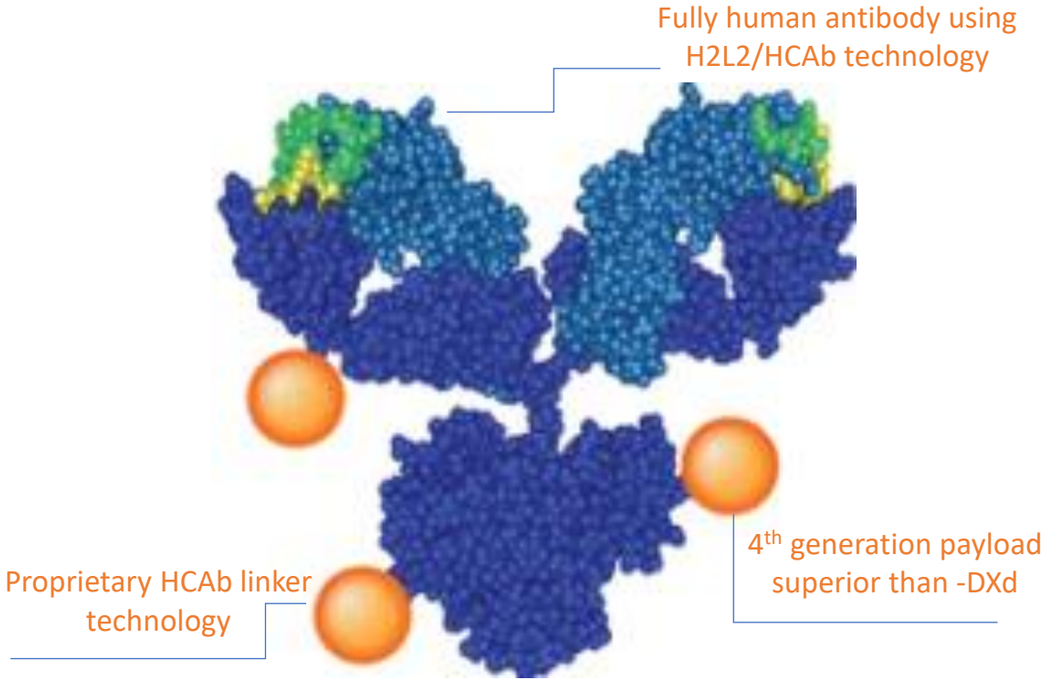
Technology Platforms

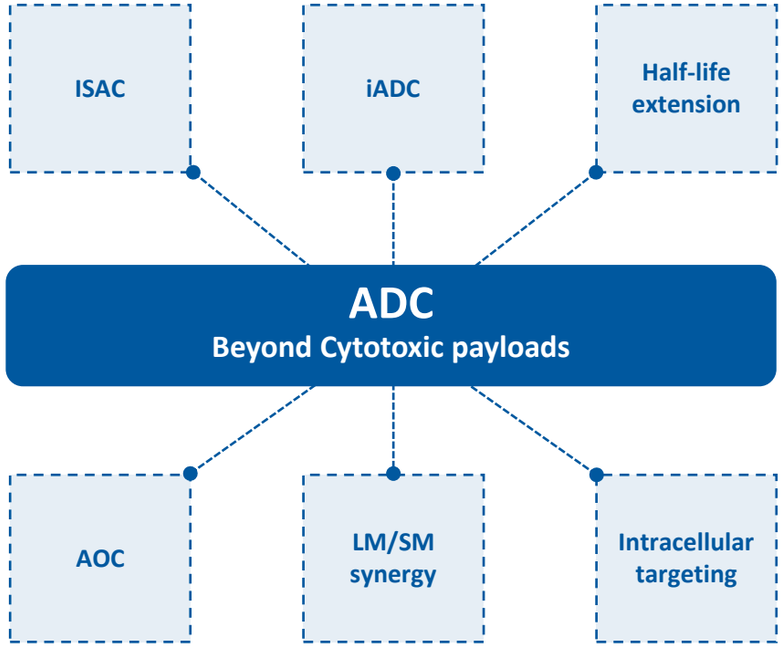
Further Exploration on Next-Gen Novel Therapeutics in ADC and NK

Develop Innovative ADC Therapeutics

Unique HCAb-based ADC Platform

- ❑ Promising potency for both cold and hot tumors
- ❑ Sensitize the tumor to immunotherapy with novel targets and payloads
- ❑ Combine SM and LM advantages to expand HBM portfolio





HARBOUR BIOMED

Further Exploration on Next-Gen NK Cell Engager Biologics

HBiKE

HCAb based Bispecific NK Cell Engager

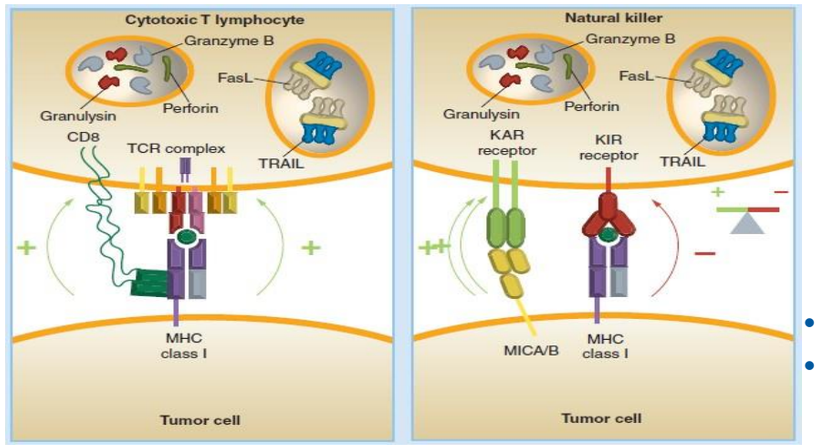
NK Cell Engager Arms

- ❑ **NKstim1** (available HCAb leads)
- ❑ **NKstim2** (available HCAb)
- ❑ **CD16a**
- ❑ **Others** (screening)

In 2022, NK Cell Tech Successfully Completed fundraising of over RMB 100 million

CAR-NK Collaboration

HBM entered into a strategic collaboration with NK Cell Tech in 2021



Dr. Zhigang Tian

- Member of Academia Europaea
- Member of Chinese Academy of Engineering

HARBOUR BIOMED

Global Collaboration and Innovation

Drive Product Developments Leveraging Technology Platforms

Global Collaborations to Maximize the Value of Technologies and Assets

50+ Partners

200+ Projects

10+ Clinical Stage

Platform Licensing *

AstraZeneca, abbvie, MD Anderson Cancer Center, Pfizer, Lilly, celsius, COMPASS THERAPEUTICS, Innovent 信达生物制药, BeiGene

Co-discovery/JV

THE WISTAR INSTITUTE, Erasmus MC University Medical Center Rotterdam, Dana-Farber Cancer Institute, Mount Sinai, Universiteit Utrecht, Boston Children's Hospital Until every child is well, NL Health~Holland SHARED CHALLENGES, SMART SOLUTIONS, VIR, LCB LegoChemBio, BioMap 百图生科, NK CELLTECH 恩凯赛药, HBMAT

*Previous and Current Licensees

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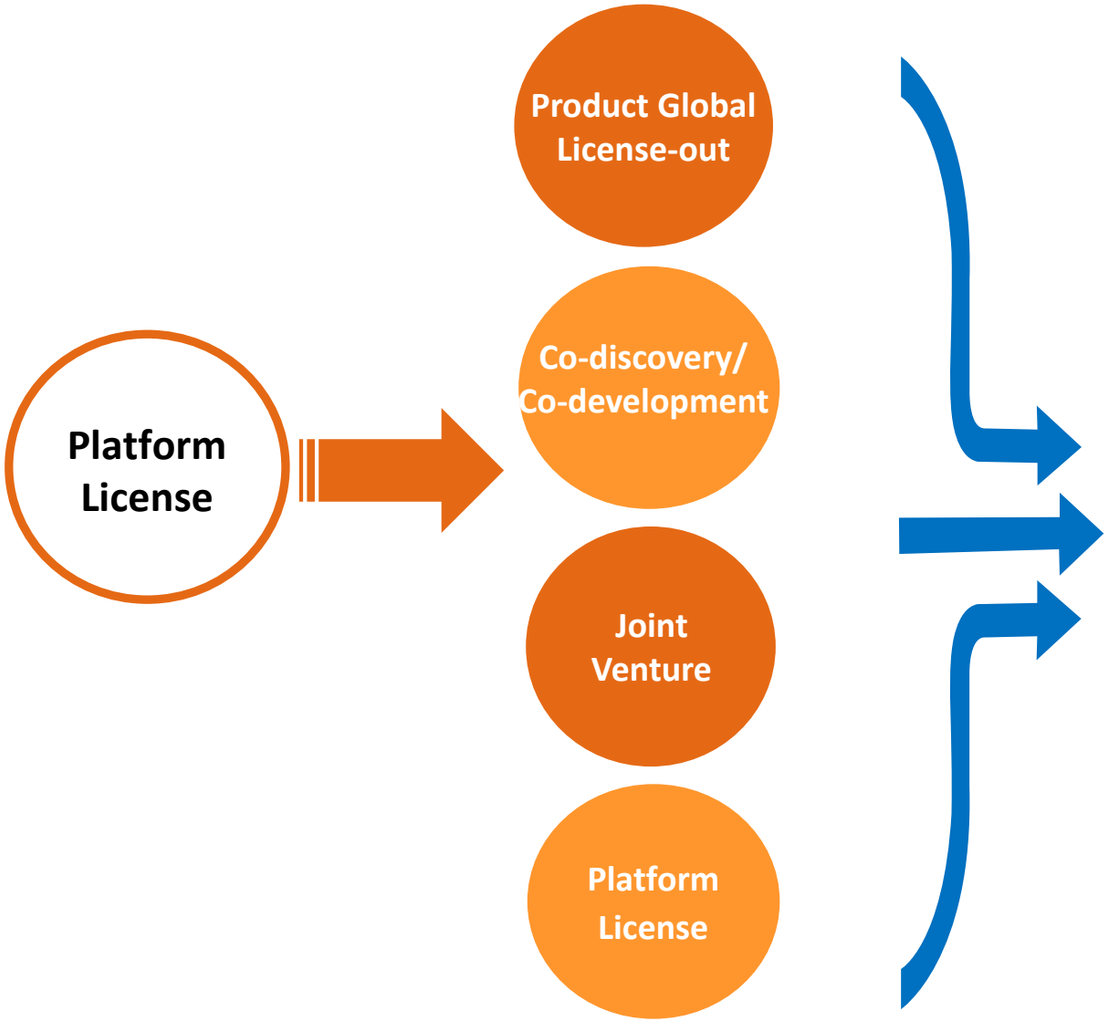
Expanding Multiple Partnership Models to Drive Product Developments



- Innovation driven partnership model
- Accelerated bench to bedside speed
- Optimized expertise and resource sharing
- Higher return short term and long term
- Risk mitigation

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Significant Advancements Were Achieved for Global Collaborations in 2022 1H

Product Global License-out

- ❑ HBM7022 out-license to **AstraZeneca** with total payments at least **US$350 million**
- ❑ Commenced collaborations with LCB, Duality Biologics on **ADC**

Co-discovery/Co-development

- ❑ Collaborated with **Dana-Farber** to develop novel bispecific antibodies and CAR-T
- ❑ Collaborated with **Boston Children's Hospital** to develop novel antibody therapy
- ❑ Collaborated with **BioMap** to develop novel antibodies with AI technology

Joint Venture

- ❑ Incubated NK cell therapeutics, "**NK Cell Tech**" successfully completed fundraising

Platform License-out

- ❑ Certain molecules generated from HBM technology platforms were advanced into clinical stage by **Innovent Biologics**

HBM7022 (CLDN18.2xCD3)

The First Global Out-licensed Bispecific Antibody Generated by HK-listed Bio-tech

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AstraZeneca

- In April 2022, HBM7022, one pre-clinical asset, was out-licensed to AstraZeneca
- In May 2022, HBM received **US$25 million** upfront payment (total transaction value of **US$350 million** + royalty fee)
- In July 2022, AstraZeneca and HBM teams have successfully completed HBM7022 transfer for subsequent developments

McKinsey & Company

Life Sciences Practice

Vision 2028: How China could impact the global biopharma industry

Enabling technologies. In 2021, several China-focused companies developed drugs using bispecific antibody or ADC platforms. Harbour BioMed was one of them; it used its proprietary platform to develop a bispecific antibody targeting CLDN18.2xCD3 and licensed it to AstraZeneca.

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Nasdaq

MARKETS ▲ AZN 387.17 +0.87 1.01%

Harbour BioMed Reaches License Deal With AstraZeneca On Bispecific Antibody HBM7022

CONTRIBUTOR RTTNews.com — RTTNews

PUBLISHED APR 6, 2022 09:31PM EDT

(RTTNews) - Harbour BioMed said that it has reached license agreement with AstraZeneca (AZN, AZN.L) for CLDN18.2xCD3 bispecific antibody (HBM7022).

PHARMACEUTICAL BUSINESS REVIEW

08 APR 2022 News

DRUG DISCOVERY | RESEARCH & DEVELOPMENT

Harbour BioMed, AstraZeneca sign license deal for bispecific antibody

By PBR Staff Writer

Biopharmaceutical firm Harbour BioMed (HBM) and AstraZeneca have entered into a global out-license agreement for CLDN18.2xCD3 bispecific antibody HBM7022.

01 Company Overview and Highlights

02 Develop Global Innovative and Differentiated Product Pipeline

03 Continuously Upgrade Technology Platforms to Explore Novel Frontier

04 Product Updates on Regional Market Assets

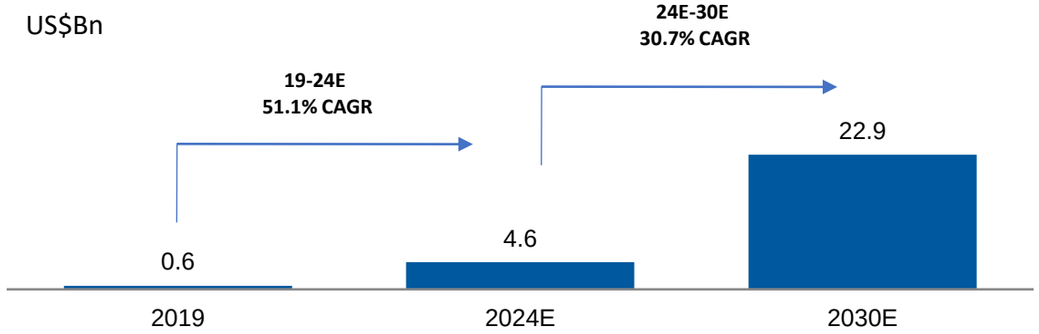
05 Financial Results

06 Outlook

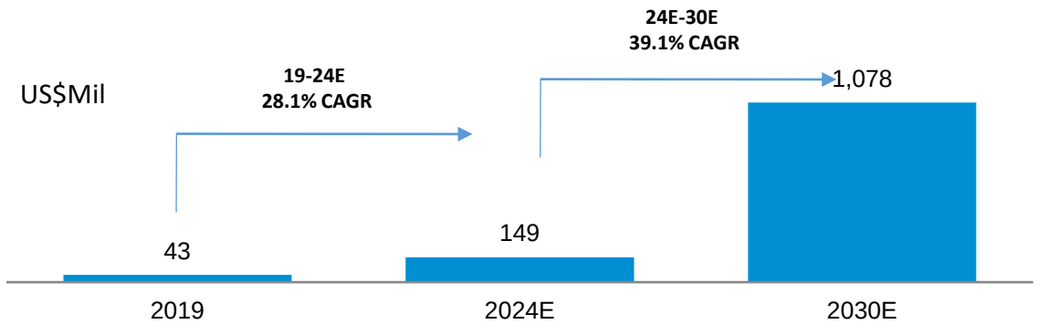
Batoclimab (HBM9161)

A Breakthrough Therapeutics for IgG Mediated Autoimmune Diseases

Huge Market Potential



China Biologics for Immunological Diseases Treatment



China MG Market

HBM9161 Competitive Advantages

Strong Efficacy

- Effectively eliminate pathogenic IgG
- Clinical POC established across indications

Great Safety

- Fully human IgG with low immunogenicity risk
- Less likely to lead to inflammation with reduced effector function Well-tolerated, majority of AEs are mild and/or moderate

Convenient Treatment

- Fixed-dose subcutaneous injection
- Possible for patient self-administration
- Improved patient compliance

HARBOUR BIOMED

Source: Frost & Sullivan

Batoclimab (HBM9161)

A Breakthrough Therapeutics for IgG Mediated Autoimmune Diseases

MG

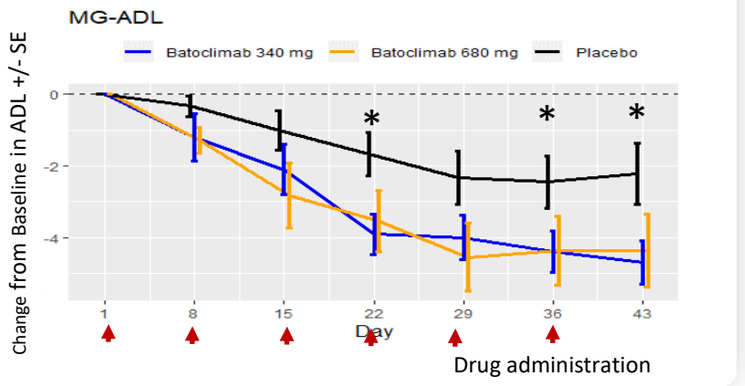
- Phase I
- Phase II Data Readout 2021
- Phase III Ongoing

TED

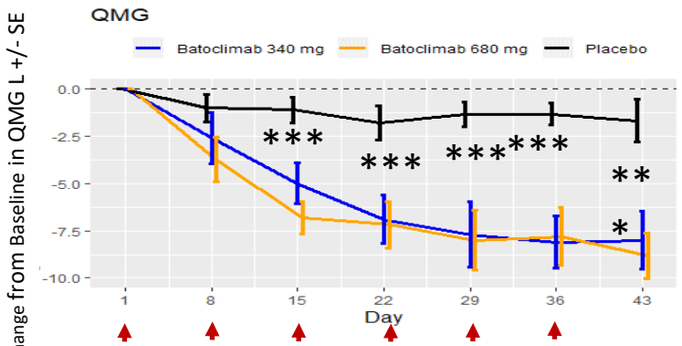
- Phase I
- Phase II/III Ongoing

MG Positive Ph II Study Results, Presented at the 25th World Congress Neurology (WCN)

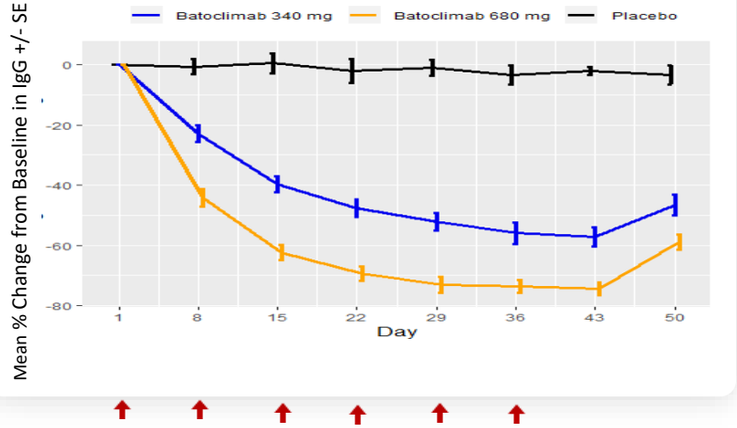
MG-ADL



MG-QMG



MG-IgG



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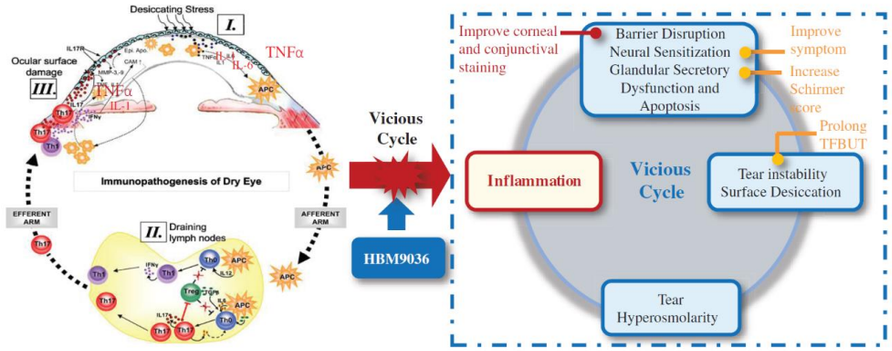
Tanfanercept (HBM9036)

A Differentiated Therapeutics to Treat the Growing Prevalence of Dry Eye Disease

First Global Innovative Biological Drug in China to Treat Moderate-to-severe DED

Mechanism of Action



Excellent Safety Profile

Highly Comfortable

Similar drop comfortable score with placebo

Rapid Onset

4 weeks vs. 3-6 months

Substantial improvement in clinical signs from the initiation of treatment (Tanfanercept vs. Competitors)

2022

- **Completed** the first interim analysis of phase III trial in 2022 1H
- **Completed** over half of patient enrollment
- Positive results of HBM9036 phase II clinical data was published on “International Ophthalmology” in 2022 1H

HARBOUR BIOMED

01 Company Overview and Highlights

02 Develop Global Innovative and Differentiated Product Pipeline

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04 Product Updates on Regional Market Assets

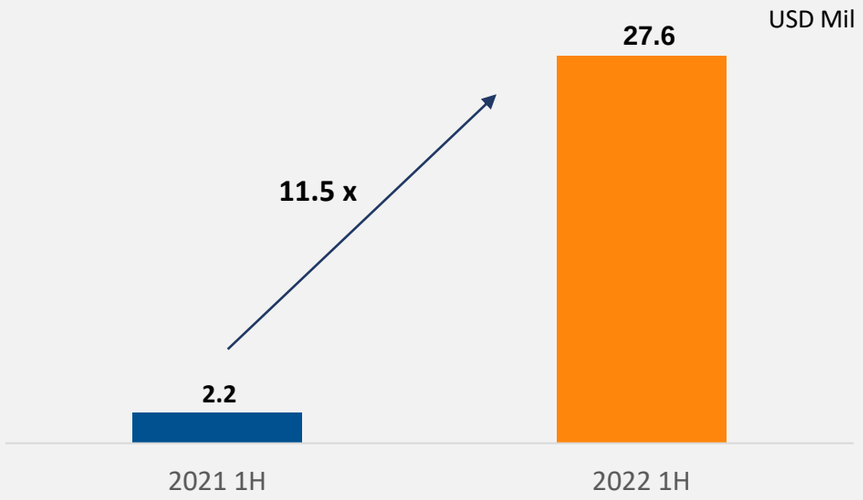
05 **Financial Results**

06 Outlook

Revenue Significantly Increased in 2022 1H

Revenue

Total revenue significantly increased from US$2.2 million for the six months ended 30 June 2021 to US$27.6 million for the six months ended 30 June 2022, primarily due to the increase in our revenue from recognizing molecule license fee. Our molecule license fee increased from US$1.8 million for the six months ended 30 June 2021 to US$27.1 million for the six months ended 30 June 2022, due to the recognition of the upfront payment of approximately US$25 million received from AstraZeneca for our collaboration agreement.

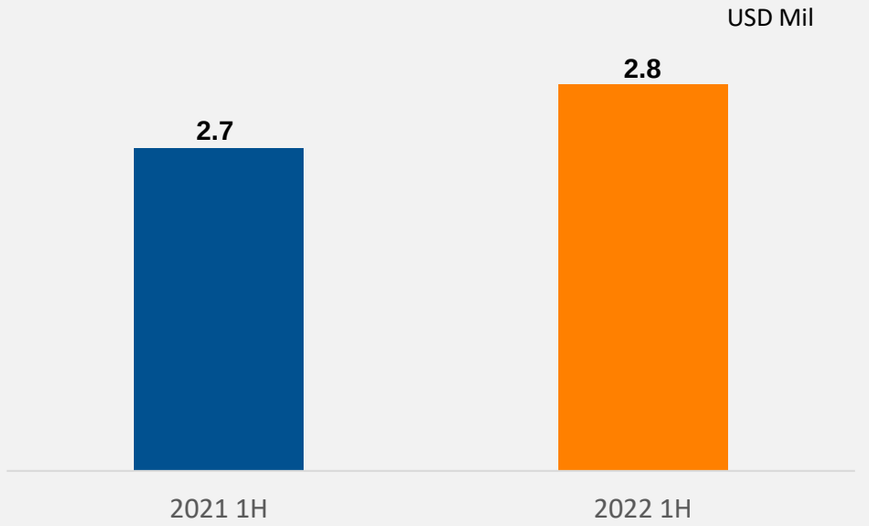


Other Income and Gains

Other income and gains were US$2.8 million for the six months ended 30 June 2022, whereas US$2.7 million for the six months ended 30 June 2021.

The item primarily consists of:

- Interest income
- Fair value change of other financial assets



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R&D Expenses Increased Mainly Due to Clinical Investments in Phase III Assets

Research and development costs

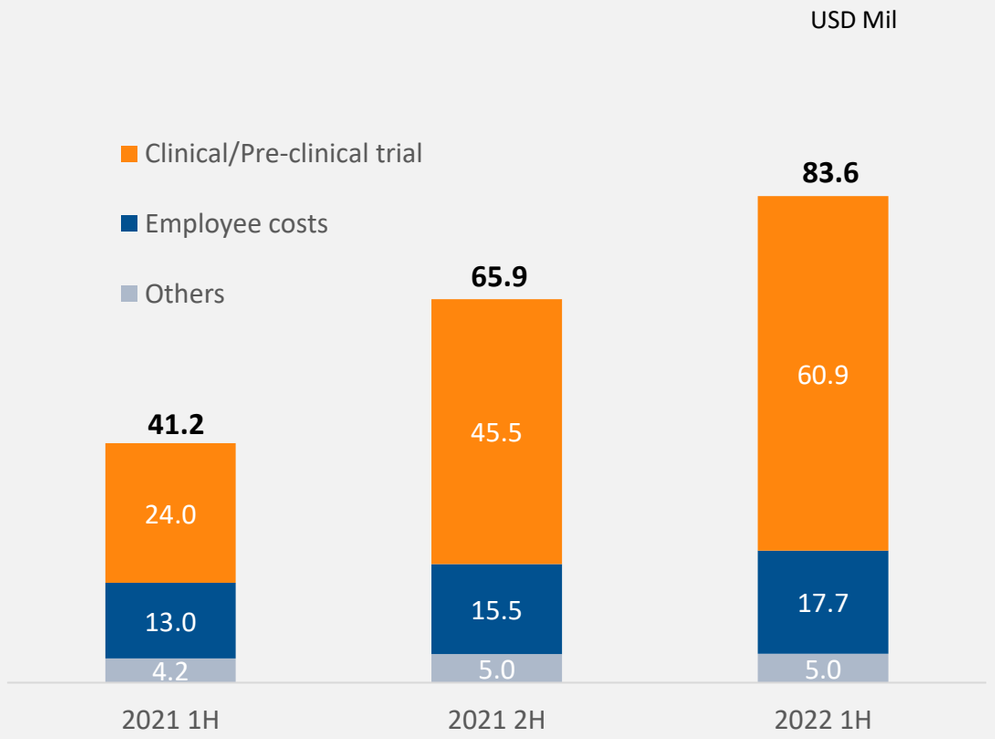
R&D expenses increased significantly from US$41.2 million for the six months ended 30 June 2021 to US$83.6 million for the six months ended 30 June 2022.

This increase was primarily attributable to:

(i) increased investments in our key clinical programs

(ii) increased investments in our molecule assets in discovery and pre-clinical stages

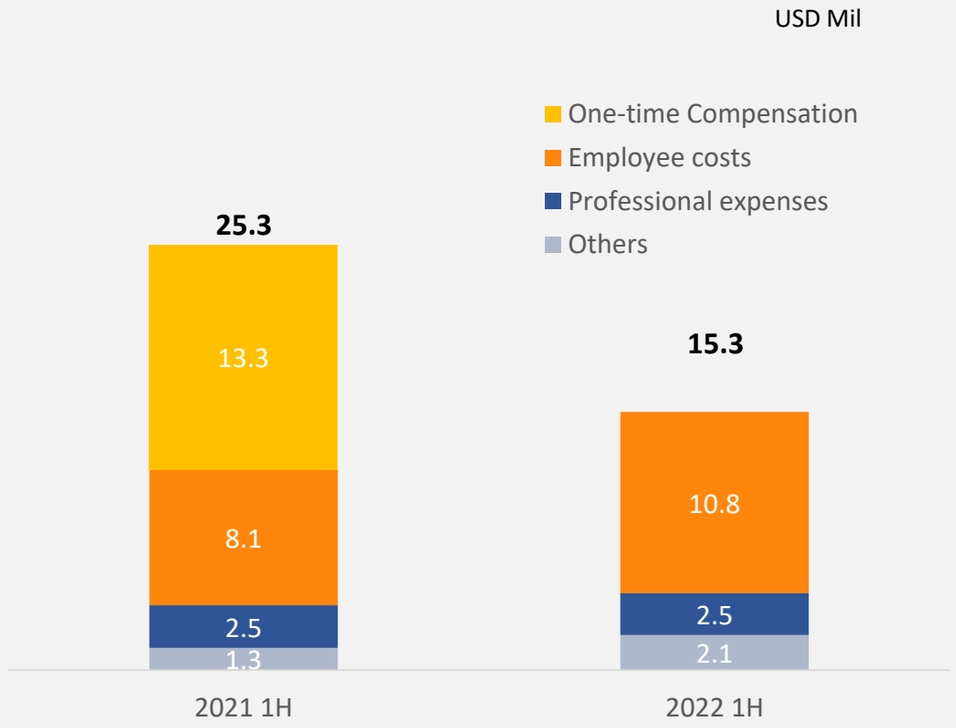
(iii) an increase in employee cost from US$13.0 million to US$17.7 million due to the increase in our R&D staffs



Administrative Expenses Decreased Due to One-time Expense in 2021 1H

Administrative expenses

Administrative expenses was US$25.3 million in 2021 1H, decreased by US$10.0 million to US$15.3 million in 2022 1H, primarily attributable to one-time compensation expenses in 2021 1H.



Loss for the period

Loss for the period increased 19% from US$**61.6** million for the six months ended June 2021 to US$**73.1** million for the six months ended 30 June 2022.

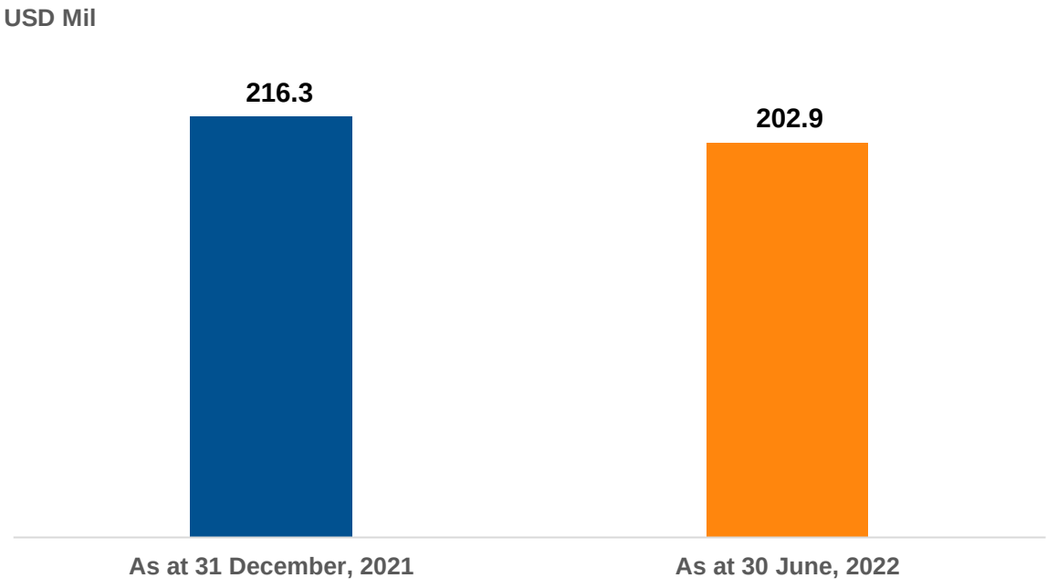
Effective Cash Flow Management to Maintain Healthy Cash Position

Summary of Consolidated Statements of Financial Position

USD Mil	30 June	31 December
	2022	2021
Non-current assets	47.3	41.5
Current assets	221.0	240.9
Include: **Cash and bank balances**	**202.9**	**216.3**
Current liabilities	55.9	41.1
Net current assets	165.1	199.8
Non-current liabilities	55.6	18.4
Net assets	156.8	222.9

Cash and bank balances

Cash and bank balances decreased from US$216.3 million to US$202.9 million.



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Outlook

Advancing Next-Gen Biotherapeutics by Leveraging Industry Leading Technology Platforms

- **8 ongoing clinical trials** in phase I/II/III with differentiated targets
- **3 new assets targeting on IND** submissions in 2022 2H

Global Innovative Products Powered by HBM's Technology Platforms Start to Show Significant Values

Cutting-edge Technology Platforms Grow and Broaden HBM Ecosystem

- **Broad applications** of HBM Technology Platforms
- **Novel business models** of partnership
- Solid **financial supports**

- Global collaborations **accelerate** product developments
- Global collaborations generate **cash flow**

Sustainable Global Collaborations Maximize the Assets Values

Healthy Cash Position Supports Company Growth

- Revenue **significantly increased** 11.5x in 2022 1H
- Cash balance US$202.9 million as of 30 Jun 2022

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Q&A

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THANK YOU