

A background image showing a male scientist on the left wearing glasses and looking through a microscope, and a female scientist on the right in a white lab coat looking down at something in her hands. The image is overlaid with large, semi-transparent orange and blue circles.

FY2021 Financial Results

12-month period ended December 31, 2021

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References to "FY" in this presentation for periods prior to 1 January 2018 are to the 12-month periods commencing in each case on April 1 of the year indicated and ending on March 31 of the following year, and the 9 month period from April 1 2017 to December 31 2017. From January 1 2018 the Company changed its fiscal year to the 12-month period commencing in each case on January 1. References to "FY" in this presentation should be construed accordingly.

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Note: This material was created to explain the details of our company and is not intended to be used for investment decisions. In addition, the contents reflect the views of our company at the time of the creation of the material, and the accuracy of the information is not guaranteed. Investments should be made based on the independent views of investors

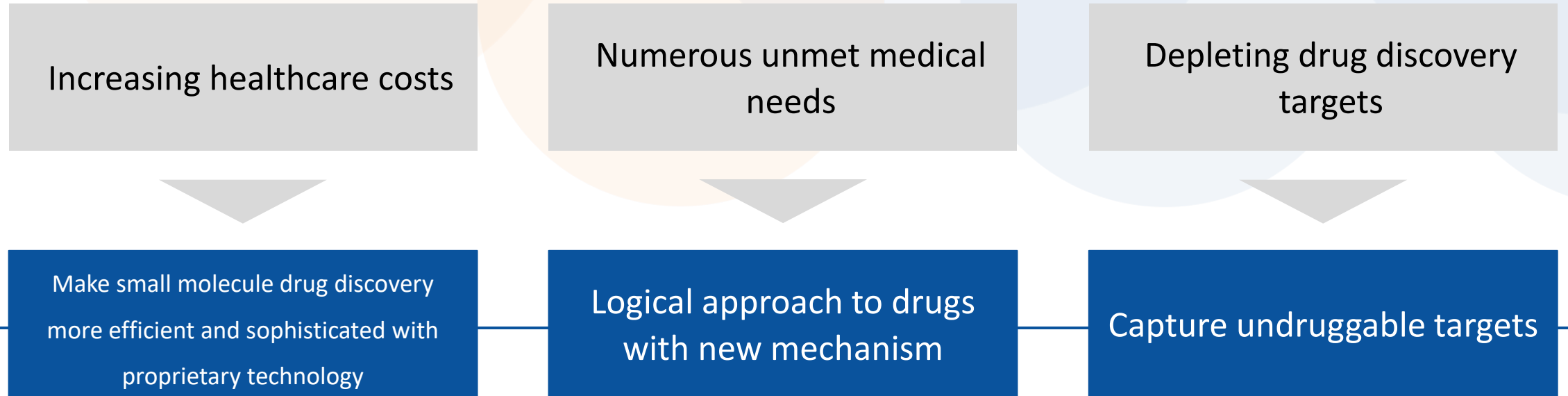
1

Business Summary

Shinichi Tamura, Chairman & CEO

Vision/Business Overview

Our vision is global biotech champions from Japan by solving challenges of drug discovery



We aim to overcome challenges with proprietary tech-based drug discovery platform (StaR[®]/SBDD) and

become “one of Japan’s global biopharmaceutical champions”

Current major target

GPCRs the largest drug discovery target, having large potential that our platform can approach

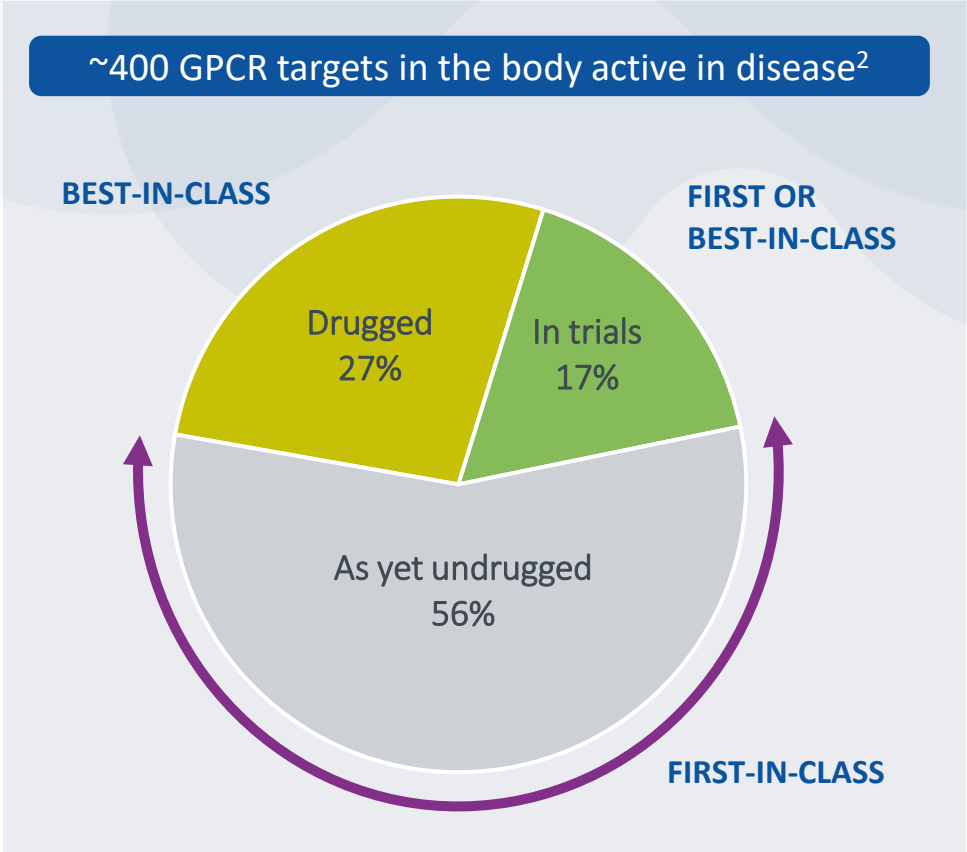
~400
GPCR targets active in diseases²

~34%
of FDA approvals target GPCRs¹

27%
of global sales are GPCR drugs¹

- NEUROLOGICAL DISORDERS
- GASTROINTESTINAL DISEASES
- IMMUNOLOGY/ONCOLOGY
- METABOLIC DISORDERS
- CARDIOVASCULAR
- RESPIRATORY

GPCRs are active in a wide range of disease areas, and offer broad therapeutic potential





Significant opportunity to target new first-in-class and/or improved best-in-class GPCR medicines

Sources: ¹ "Unexplored opportunities in the druggable human genome", Nature Reviews, 2016 ; ² "Trends in GPCR in Drug Discovery – new agents, targets and indications", Nature Reviews, 2017

Our Strengths

World-leading tech-based drug discovery platform (StaR[®]/SBDD)

| |  Conventional drug discovery |  Our drug discovery |
|-----------------------------|--|---|
| Location | Empirical design | Rational design (computer-based) |
| Method | High Throughput Screening (HTS ¹) | Drug discovery tech-platform (StaR [®] /SBDD ²) |
| Period³ | 4.5 years on average | 3.0 years on average |
| Costs³ | \$15 million | \$5 million |
| Features⁴ | Target structure usually unclear, difficult to design drugs precisely | Execute precise drug design following the confirmation of target structure |
| Target⁴ | Difficult for GPCRs with unstable structures | Focusing on GPCRs with unstable structures |

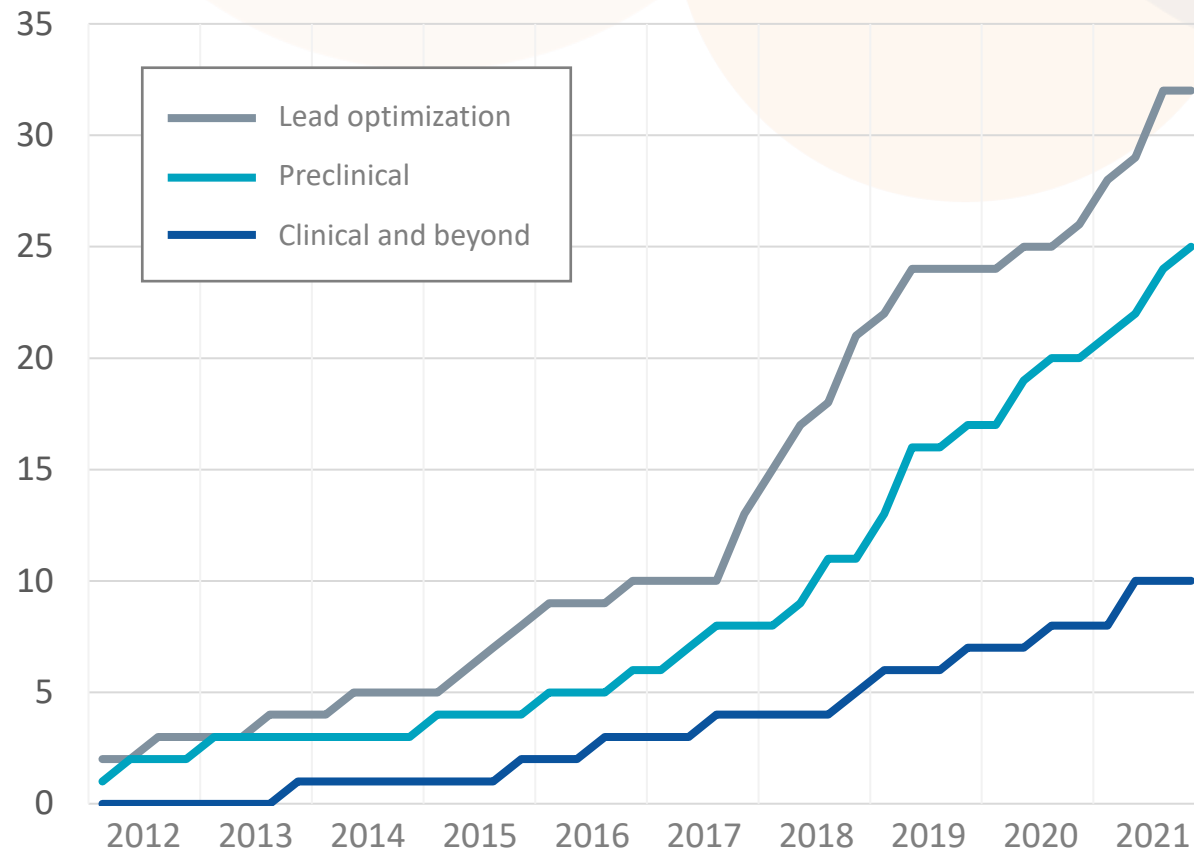
¹ HTS/High Throughput Screening is a method to find drug candidates by actually reacting tens of thousands to millions of compounds with drug targets using large machines and human hands.

² StaR[®]: Stabiised Receptor is a method for stabiising drug targets with unstable structures, such as GPCRs, and using them for structural analysis. SBDD: Structure-Based Drug Design is a method to design and screen compounds on the computer based on structural information (ref: Appendix) ³ The period from target selection to preclinical testing. For conventional drug discovery, figures are taken from NATURE REVIEWS Drug Discovery (MARCH 2010). ⁴ Precise drug design make clear the binding site of target, make easier to improve compound, create backups and redo – potentially increase the success rate. GPCR is most popular drug target which account for 30% of current drug target.(The details are to be mentioned later)

Track record of our drug discovery

Higher drug discovery efficiency with our tech-based drug discovery platform (StaR®/SBDD)

Trends in the number of programs per stage (cumulative)

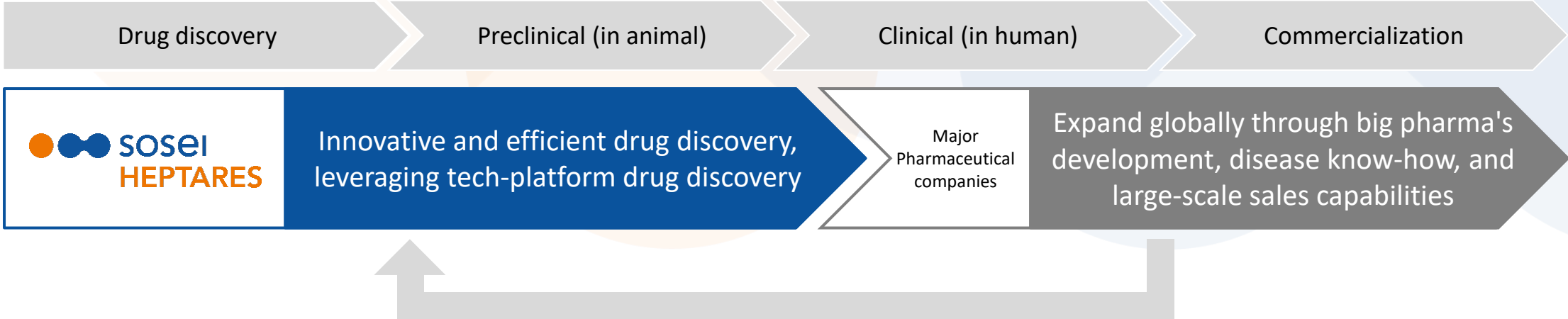


Number of programs
2020 vs 2021

| | 2020 | 2021 | |
|----------------------|------|------|----|
| Drug discovery | 10+ | 10+ | |
| Lead optimization | 6 | 7 | +1 |
| Preclinical | 12 | 15 | +3 |
| Clinical - Phase 1 | 7 | 9 | +2 |
| Clinical – Phase 2 | 1 | 1 | |
| Clinical – Phase 3 | 0 | 0 | |
| Approval application | 0 | 0 | |
| Approved | 0 | 0 | |

Business Model

Focus on innovation in the early stages, partnering with major pharmaceuticals after that



Payment ① - ③ from major pharmaceutical companies through licensing are our major revenue

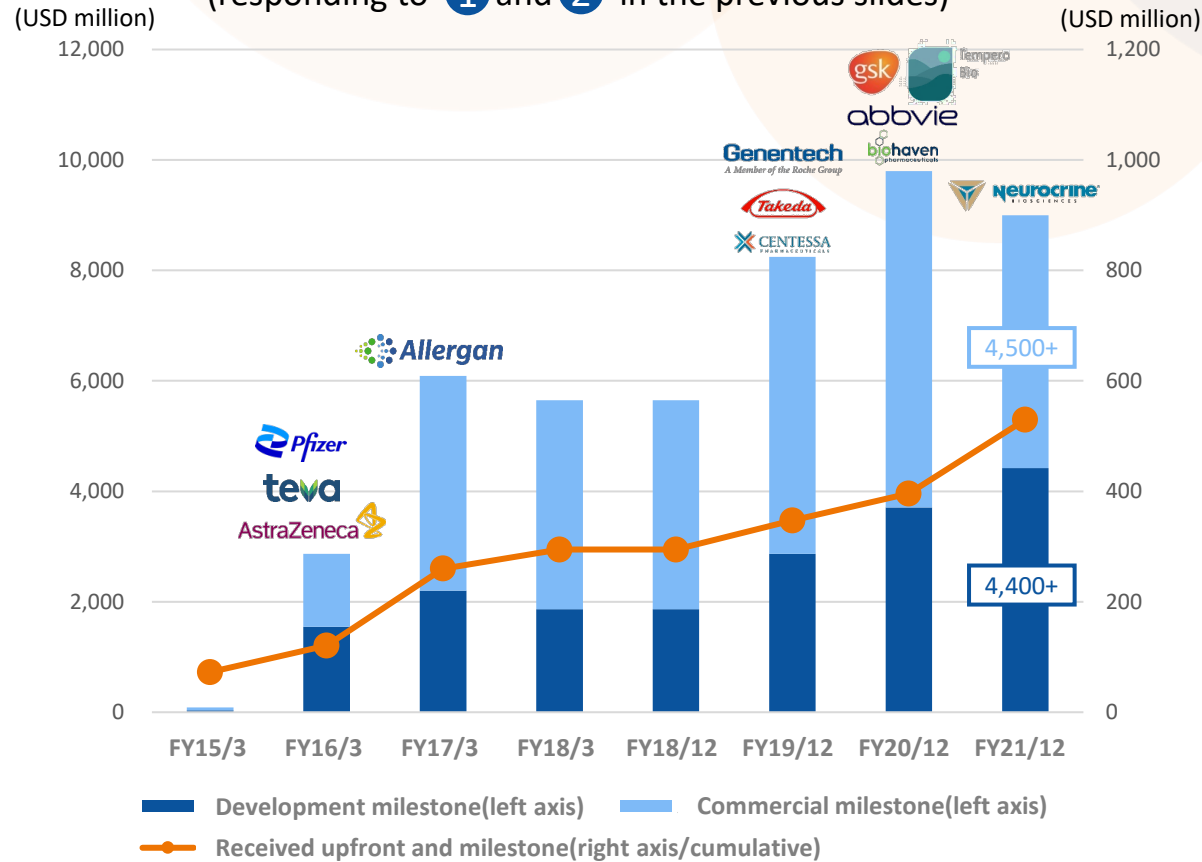
- | | | |
|---|-------------------|--|
| ① | Upfront payment | Receive upon license agreement |
| ② | Milestone payment | Receive upon the successful progression of the program |
| ③ | Royalty | Payment on future net sales (ranging from high single digit to mid-teen percentage of the sales at most) |

Japan Our strategic tactical development team in Japan will conduct late-stage clinical trials through to marketing, where our strengths can be leveraged.

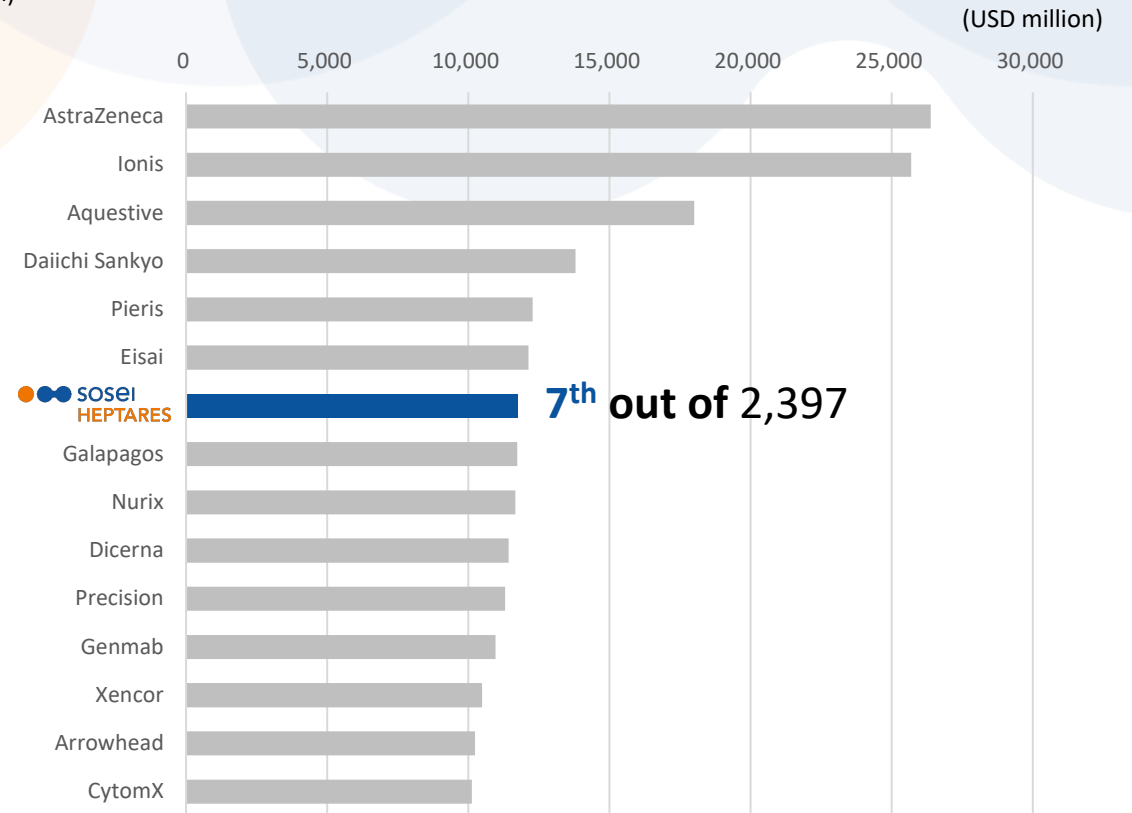
Our licensing partners

Total license value we made with world-class pharmaceutical companies

Balance of potential milestone from existing license agreements¹
(responding to ① and ② in the previous slides)



Top 15 pharmaceutical/biotech companies by license value²
(cumulative total since 2015)

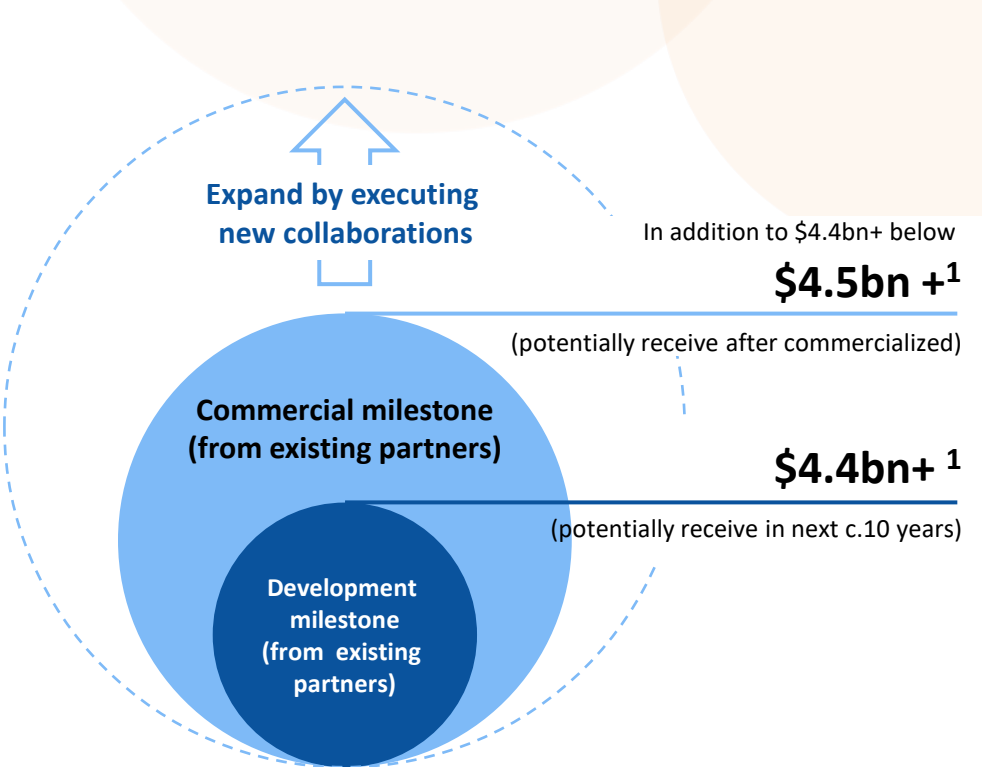


¹ Balance as of the end of the fiscal year of only those currently under contract. TEVA and Abbvie (formerly Allergan), for which compounds were returned, are excluded from the balances from FY2018 and FY2021, respectively. ² The figures are based on a third party's (EvaluatePharma's) proprietary database and therefore do not completely match the amounts shown in the LHS chart. Source: Company's data (LHS) and EvaluatePharma (as of 2022/1/18) (RHS)

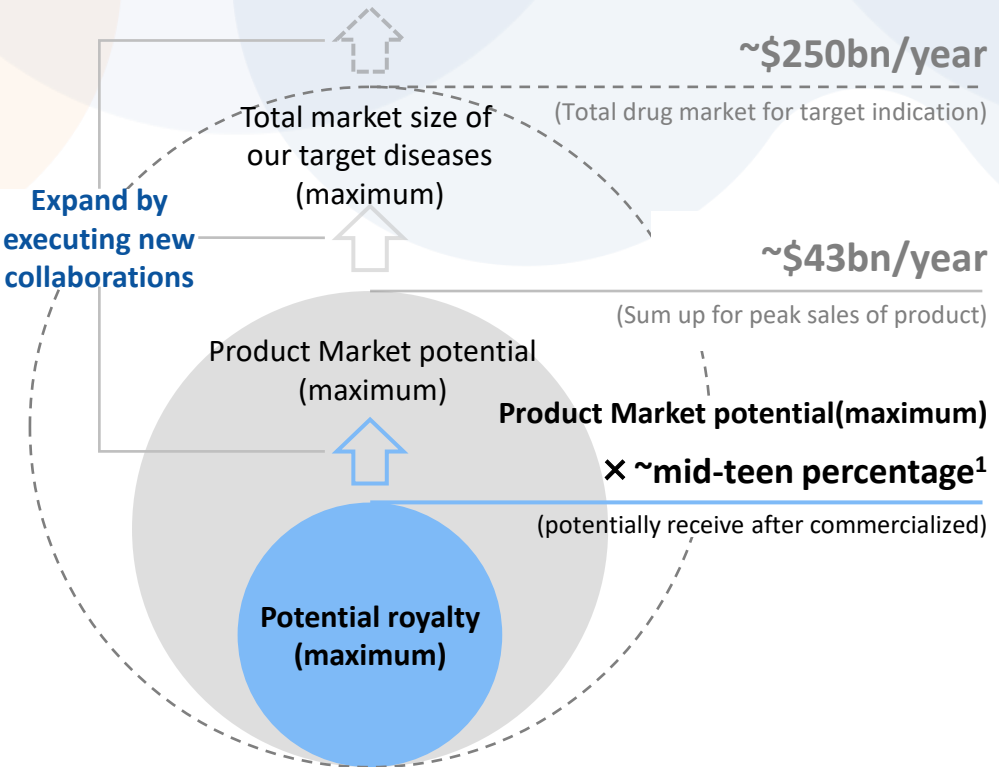
Potential revenue from existing partnerships

Securing stable revenues in the short to medium term from existing partnerships

2 Potential milestone from existing partners



3 Potential royalty from existing partners



● Short to medium term revenue potentially received in next 10 years
 ● Mid to long term revenue potentially received after commercialized

¹ All of these are the maximum values if all existing programs are successful. Note that the probability of success in drug discovery is not relatively high, and realistically not all programs will be successful. Source: Total market size of our target diseases and Product Market potential is stated in the Appendix



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FY2021 Consolidated Financial Results

Christopher Cargill, CFO

Another year of successful execution

Summary Financial Highlights for the 12 months ended 31 December 2021

- 1 **Revenue of ¥17,712m** (\$161m) vs. ¥8,842m (\$83m) in prior year, substantial increase driven by Neurocrine transaction.
- 2 **Core Earnings of ¥8,904m** (\$81m) vs. ¥2,904m (\$27m) in prior year; **Operating Profit of ¥3,775m** (\$34m) vs. ¥928m (\$9m) in prior year, substantial increases driven by Neurocrine transaction.
- 3 **Net profit of ¥1,017m** (\$9m), successfully achieving our corporate goal to **target sustainable and/or profitable results** for the full year despite significant impairment and contingent consideration charges.
- 4 **~¥10bn new growth capital raised**, adding funds earmarked to accelerate our strategic growth initiatives and investments.
- 5 **Net cash inflow of ¥20bn** (\$136m), resulting in a **robust cash balance of ¥60bn** (\$522m) at year end.

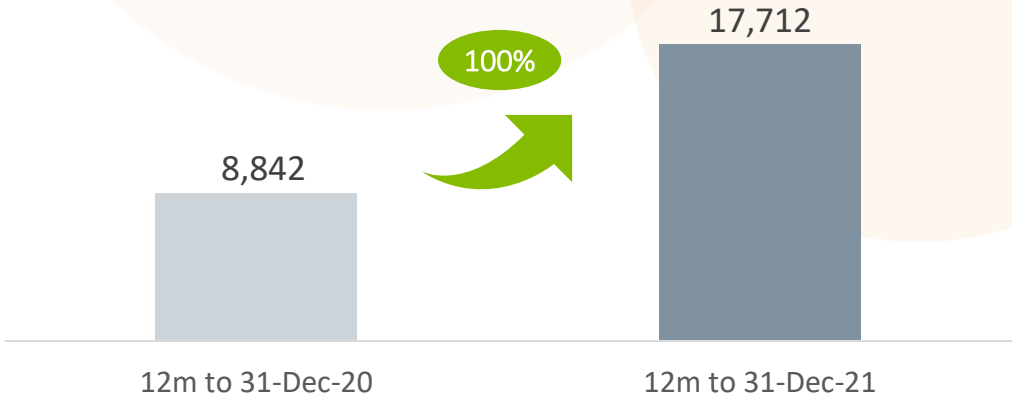
Our unique and balanced business model continues to support a **sustainable financial profile**

Note: USD:JPY FX rates used – 110.16 (FY2021) and 106.77 (FY2020)

Key financial indicators

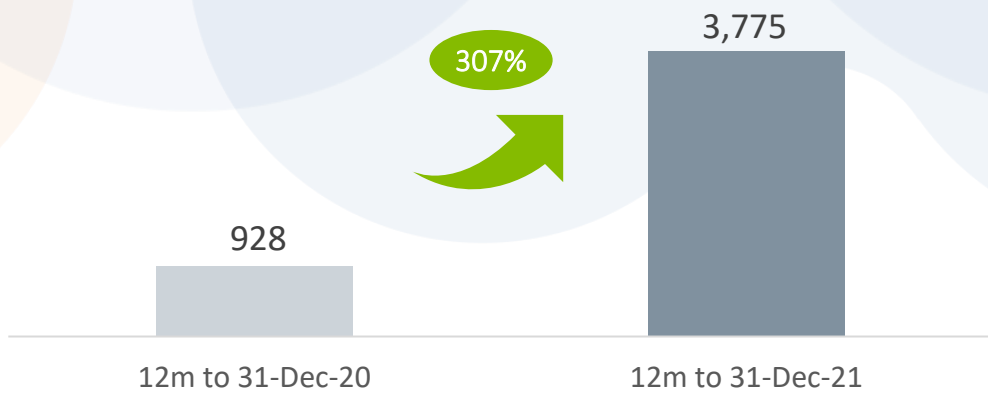
Significantly increased Operating Profit reflected encouraging revenue growth partially offset by (i) planned increase in R&D, and (ii) a non-cash impairment charge

Revenue (JPY million)



- Revenue increased +100% vs. 2020 primarily due to Neurocrine transaction. Milestones from existing partnerships include:
 - GSK (GPR35)
 - Pfizer (MC4 Ph 1 start)
 - Genentech (Delivery of StaRs®)
 - Deferred revenue releases on AbbVie and Genentech collaborations
- Royalties from Novartis declined slightly.

Operating Profit (JPY million)



- R&D costs increased due to higher activity on in-house programs, participation in new co-development collaborations and the impact of a stronger GBP vs. JPY.
- Intangible asset impairment charge associated with a collaboration partner’s decision not to progress certain out-licensed drug candidates in clinical trials.
- Higher SBC¹ costs from continued roll out of RSU² plans – aligning management’s interests with shareholders.

Notes: 1. SBC = Stock-Based Compensation; 2. RSU = Restricted Stock Units

Revenue breakdown

Significant increase in revenue driven by the Neurocrine transaction helped to generate a modest net profit despite significant impairment and contingent consideration charges

JPY million

USD million

| IFRS | 12m ended 31 Dec 2020 | 12m ended 31 Dec 2021 | 12m ended 31 Dec 2020 | 12m ended 31 Dec 2021 |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Revenue | 8,842 | 17,712 | 82.8 | 160.8 |
| Cost of Sales | (761) | (933) | (7.1) | (8.5) |
| R&D | (3,793) | (5,931) | (35.5) | (53.8) |
| G&A | (3,435) | (3,940) | (32.2) | (35.8) |
| Other Income | 79 | 8 | 0.7 | 0.1 |
| Other Expense | (4) | ① (3,141) | (0.0) | ① (28.5) |
| Operating Profit | 928 | 3,775 | 8.7 | 34.3 |
| Finance Income | 1,628 | 199 | 15.2 | 1.8 |
| Finance Expense | (578) | ② (3,797) | (5.4) | ② (34.5) |
| Equity Acc. Investments | (356) | 256 | (3.3) | 2.3 |
| Net Profit before Tax | 1,622 | 433 | 15.2 | 3.9 |
| Net Profit after Tax | 1,479 | 1,017 | 13.8 | 9.2 |

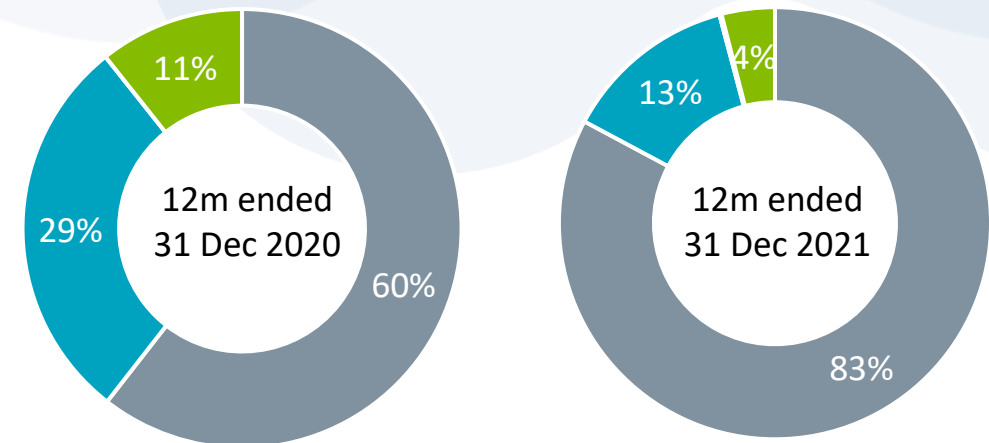
① Includes **non-cash impairment** charge of ¥3,064 million following a collaboration partner's decision not to progress older licensed drug candidates, and to instead focus development efforts on next-generation candidates with novel chemistry and longer patent protection

② Includes **non-recurring** charge of ¥2,891 million to increase the contingent consideration provision to cover the \$35m liability to former Heptares shareholders arising from the Neurocrine transaction. A major component of the 2015 Heptares SPA¹ has now expired, and we do not expect significant contingent consideration charges annually going forward

Note: USD:JPY FX rates used – 110.16 (FY2021) and 106.77 (FY2020)

¹ SPA = Share Purchase Agreement

Revenue by Type



| | 12m ended 31 Dec 2020 | | 12m ended 31 Dec 2021 | |
|----------------------|-----------------------|----------------|-----------------------|-----------------|
| Milestone | ¥5,353m | \$50.1m | ¥14,667m | \$133.1m |
| Royalty | ¥2,544m | \$23.8m | ¥2,311m | \$21.0m |
| Product Sales | – | – | ¥28m | \$0.3m |
| Other | ¥945m | \$8.9m | ¥706m | \$6.4m |
| Total Revenue | ¥8,842m | \$82.8m | ¥17,712m | \$160.8m |

Introduction of 'Core Earnings'

Core Earnings – the financial indicator favored by investors

JPY million

USD million

Commentary

| | 12m ended 31 Dec 2020 | 12m ended 31 Dec 2021 | 12m ended 31 Dec 2020 | 12m ended 31 Dec 2021 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
| IFRS Revenue | 8,842 | 17,712 | 82.8 | 160.8 |
| IFRS COS | (761) | (933) | (7.1) | (8.5) |
| IFRS R&D | (3,793) | (5,931) | (35.5) | (53.8) |
| IFRS G&A | (3,435) | (3,940) | (32.2) | (35.8) |
| Total IFRS OPEX | (7,989) | (10,804) | (74.8) | (98.1) |
| IFRS Other Income/(Exp) | 75 | (3,133) | 0.7 | (28.4) |
| IFRS Operating Profit | 928 | 3,775 | 8.7 | 34.3 |
| Add back material Non-cash costs: | | | | |
| Depreciation | 507 | 540 | 4.8 | 4.9 |
| Amortisation | 843 | 738 | 7.9 | 6.6 |
| Share Based Payments | 626 | 713 | 5.8 | 6.5 |
| Impairment | - | 3,138 | - | 28.5 |
| Remove material Non-recurring costs: | | | | |
| Restructuring/Other | - | - | - | - |
| Core Earnings | 2,904 | 8,904 | 27.2 | 80.8 |

- **Core Earnings** is a new key financial indicator that highlights the underlying **recurring cash generating capability** of the business.
- **Core Earnings** is defined as IFRS Operating Profit + material Non-cash costs + material non-recurring costs
- **Material Non-cash Costs** include depreciation, amortization, share based payments and impairment.
- **Material Non-recurring Costs** include restructuring costs and other material one-off items.
- Core Earnings = Cash Earnings + material Non-recurring Costs

Going forward we will disclose our Income Statement in a similar format to major Japanese pharma companies. We will breakdown the calculation of 'Core Earnings' – a key financial indicator for investors

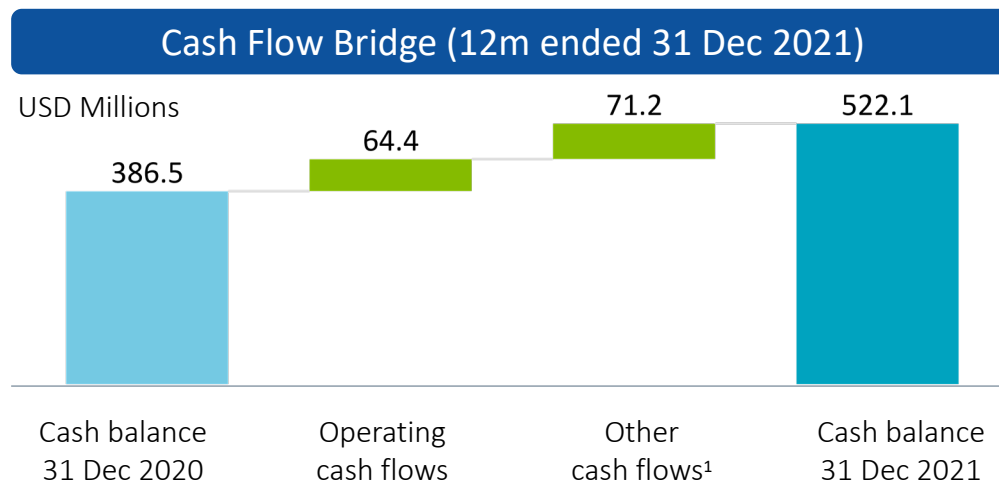
Balance Sheet

Sustainability of the business model and corporate strategy reflected via robust balance sheet

| | JPY million | | USD million | |
|--------------------------|-------------------|-------------------|-------------------|-------------------|
| | As of 31 Dec 2020 | As of 31 Dec 2021 | As of 31 Dec 2020 | As of 31 Dec 2021 |
| Goodwill & intangibles | 25,936 | ① 24,215 | 250.5 | ① 210.4 |
| Property, plant & equip. | 3,824 | 3,817 | 36.9 | 33.2 |
| Cash at hand | 40,008 | ② 60,087 | 386.5 | ② 522.1 |
| Equity Acc. investments | 3,087 | 3,479 | 29.8 | 30.2 |
| Other financial assets | 1,593 | 2,650 | 15.4 | 23.0 |
| Other assets | 2,017 | 2,737 | 19.5 | 23.9 |
| Total Assets | 76,465 | 96,985 | 738.6 | 842.8 |
| Convertible Bonds | 14,789 | ③ 27,440 | 142.9 | ③ 238.5 |
| Contingent Consideration | 1,107 | ④ 4,095 | 10.7 | ④ 35.6 |
| Other liabilities | 8,188 | 8,524 | 79.0 | 74.0 |
| Total Liabilities | 24,084 | 40,059 | 232.6 | 343.4 |
| Net Assets | 52,381 | 56,926 | 506.0 | 499.4 |

Commentary

- ① Decrease relates to intangible asset impairment arising from a collaboration partner's decision not to progress certain out-licensed drug candidates in clinical trials.
- ② Major increase in cash balance due to issuance of Convertible Bonds and receipt of Neurocrine upfront fee.
- ③ New convertible bonds issued in July 21.
- ④ Includes \$35m liability relating to the Neurocrine deal.



Notes: USD:JPY FX rates used – 31 Dec 2020 spot rate: 103.52, 31 Dec 2021 spot rate: 115.07

1. Includes Investing, financing and FX related movements

Cost Guidance for FY2022

Guidance stated on total IFRS expenses basis going forward, rather than cash basis used in FY2021

Guidance
(FY2022)

R&D expenses (IFRS basis)

¥5,750 to 6,750m
(FY2021: Actual ¥5,931m)

- Increase investment across all divisions to grow capacity and progress priority assets towards early clinical development to enhance value before partnering

G&A expenses (IFRS basis)

¥3,750 to 4,250m
(FY2021: Actual ¥3,940m)

- Maintain investment in functional support teams (IT, Finance, HR, etc.) to enable great science
- Build on robust governance practices

Modest increases planned for R&D and G&A in FY2022 versus FY2021, in line with our balanced and sustainable business model. Investing today to create value tomorrow

3

Operational Highlights

Christopher Cargill, CFO

Achievement in FY2021

Promote future growth through both organic and strategic growth


FY2021 OBJECTIVES

ACHIEVEMENT



Organic Growth



- 1 Execute 2-3 new high value collaborations and/or co-investments every year
- 2 Expand expertise in GPCRs
- 3 Generate 2 new preclinical candidates on average, every year
- 4 Advance discovery and development pipeline

- ✓ Completed: 1 
- ✓ Completed: Continue to update drug discovery platform
- ✓ Completed: M1/M4 dual agonist M1 agonist backup
- ✓ Completed: MC4 ant. and CGRP ant. advanced to Ph1

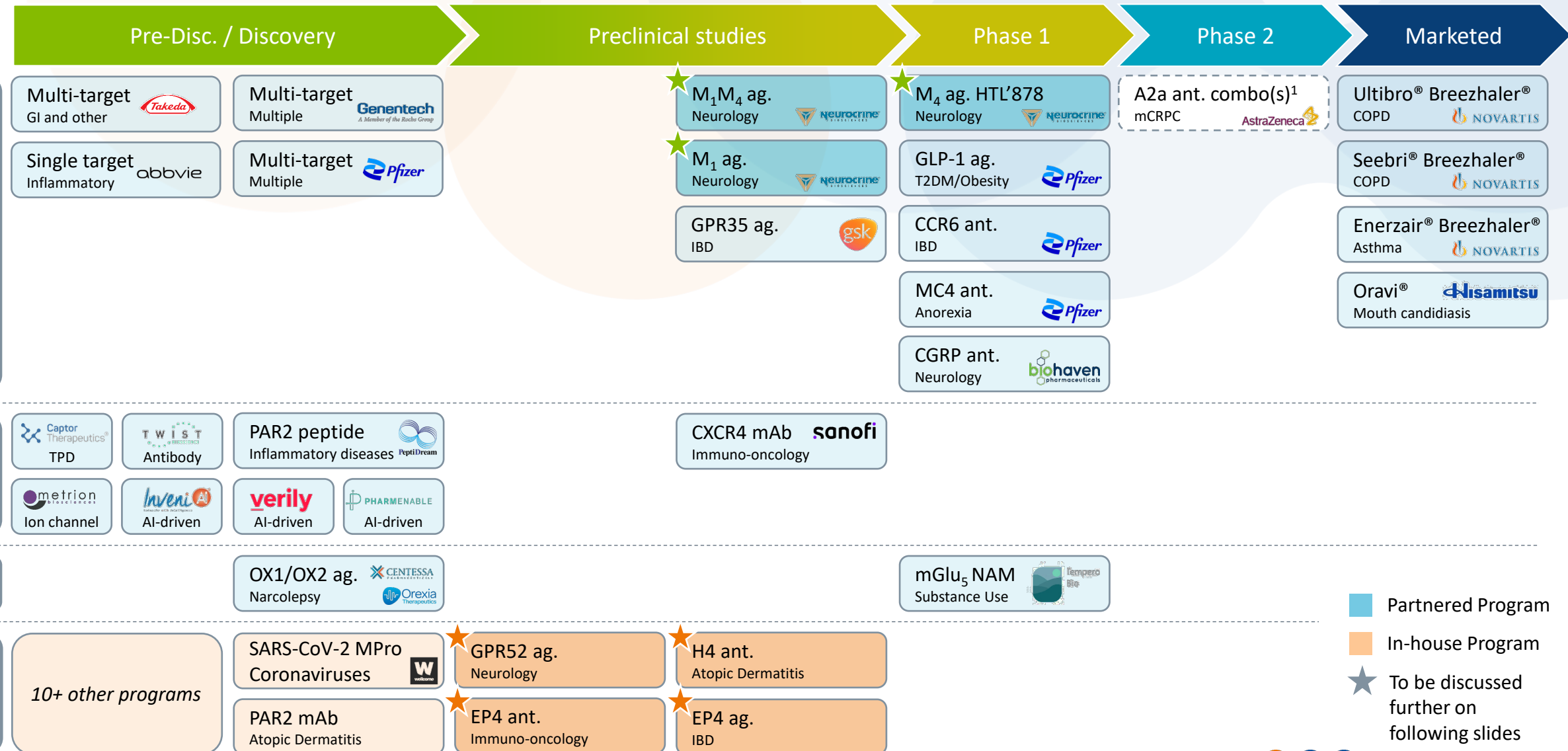


Strategic Growth

- 1 Seek out revenue-generating opportunities including M&A
- 2 Invest / collaborate in novel technologies
- 3 Expand drug target classes beyond GPCRs
- 4 In-license late-stage programs for Japan market

- ✓ Completed additional fundraising in July. Continue to look for suitable acquisition target.
- ✓ Completed 
- ✓ Completed 
- ✗ Not yet completed

Pipeline overview











- Partnered Program
- In-house Program
- ★ To be discussed further on following slides

Note: Seebri®, Ultibro®, Energair® and Breezhaler® are registered trademarks of Novartis AG.) ¹AstraZeneca have removed the A2a program from their clinical pipeline as at Q3 2021

Major licensing deals

Achieved one of the largest executed CNS license collaborations with Neurocrine in 2021

| Partner | Execution | Program | Therapeutic Area | Upfront and Initial Milestone | Potential Total Milestone ¹ |
|---|---------------|---|---|-------------------------------|--|
|  | November 2021 | Collaboration and license agreement for M ₄ , M ₁ and M ₁ /M ₄ dual agonist | Neurological disorders | \$100m | \$2.6bn |
|  | December 2020 | Collaboration and license agreement for GPR 35 | Gastrointestinal, immunology | \$44m | \$480m |
|  | December 2020 | Collaboration and license agreement for CGRP portfolio | Neurology | \$10m | \$380m |
|  | June 2020 | Discovery Collaboration and Option to License ² | Inflammatory and Autoimmune | \$32m | \$400m |
|  | August 2019 | Multi-target Collaboration | Multiple; Initial focus on Gastrointestinal | \$26m | \$1.2bn |
|  | July 2019 | Multi-target Collaboration | Multiple | \$26m | \$1bn |
|  | November 2015 | Multi-target Collaboration | Multiple | -- | \$1.8bn |
|  | August 2015 | Collaboration and license agreement for A _{2a} antagonist ³ | Immuno-oncology | \$10m | \$500m |

¹Potential option fees, development, regulatory and commercial milestone payments. Sosei Heptares is also eligible to receive tiered royalties ranging from high single digit to mid-teen percentage on future net sales of any products developed under the partnership. ²AbbVie has the option to expand the collaboration by an additional three targets. ³AstraZeneca have removed the A2a program from their clinical pipeline as at Q3 2021

Four upcoming wholly-owned programs

Prioritized for development over the next 12 to 24 months



Schizophrenia and Psychosis

GPR52 agonist



Atopic Dermatitis

H4 antagonist



Immunosuppression in solid tumours

EP4 antagonist



Inflammatory Bowel Disease

EP4 agonist

TARGET PRODUCT PROFILE

- Once daily oral small molecule
- 24hr target engagement

- Once daily oral small molecule
- To be used as a monotherapy or in combination

- Once daily oral small molecule
- To be used in combo with checkpoint inhibitors

- Oral GI restricted
- Good potency and selectivity
- Minimal GI systemic exposure






4

Organic Growth Plan Update

Dr. Miles Congreve,
Senior Vice President,
Chief Scientific Officer

Achievement in FY2021 (Organic Growth)

Major progress in muscarinic and drug discovery platform are in the following slides

| | FY2021 OBJECTIVES | ACHIEVEMENT |
|--|--|---|
|  <p>Organic Growth</p> | <p>1 Execute 2-3 new high value collaborations and/or co-investments every year</p> | <p>✓ Completed: 1 </p> |
| | <p>2 Expand expertise in GPCRs</p> | <p>✓ Completed: Continue to update drug discovery platform</p> |
| | <p>3 Generate 2 new preclinical candidates on average, every year</p> | <p>✓ Completed: M1/M4 dual agonist M1 agonist backup</p> |
| | <p>4 Advance discovery and development pipeline</p> | <p>✓ Completed: MC4 ant. and CGRP ant. advanced to Ph1</p> |
|  <p>Strategic Growth</p> | <p>1 Seek out revenue-generating opportunities including M&A</p> | <p>✓ Completed additional fundraising in July. Continue to look for suitable acquisition target.</p> |
| | <p>2 Invest / collaborate in novel technologies</p> | <p>✓ Completed </p> |
| | <p>3 Expand drug target classes beyond GPCRs</p> | <p>✓ Completed </p> |
| | <p>4 In-license late-stage programs for Japan market</p> | <p>✗ Not yet completed</p> |

New strategic collaboration with Neurocrine

\$100m upfront and up to \$2.6bn in future economics for selective Muscarinic agonist family

Licensed Portfolio

M4 agonists
(Global)

Dual M4/M1 agonists
(Global)




M1 agonists
(ex-Japan)

- 1 Neurocrine gained **rights to a portfolio of potential best-in-class selective muscarinic receptor agonists** in development for the treatment of major CNS disorders
- 2 Sosei Heptares received **US\$100 million upfront**
- 3 Sosei Heptares to receive **ongoing R&D funding** and **up to US\$1.5 billion** in potential development and regulatory milestones, **up to US\$1.1 billion** in commercial milestones, **plus tiered up to mid-teen percentage royalties** on net sales
- 4 Sosei Heptares also **retained the rights to develop all muscarinic M1 agonists in Japan in all indications**, with Neurocrine receiving co-development and profit share options

Developing novel muscarinic receptor agonists for schizophrenia and other neuropsychiatric disorders

M4 agonist competition landscape

Muscarinic M4R now an increasingly de-risked and validated target for multiple types of SZ

| |  |  |  | We are potentially best in class |
|---|---|---|---|---|
| Lead Program | KarXT | CVL-231 (Emraclidine) | HTL16878 | <ul style="list-style-type: none"> Avoids non-M4R muscarinic side effects Mitigates peripheral M4R cardiovascular effects Different profile to PAM, M4 agonist can be more effective in patients who lack cholinergic tone |
| Mechanism of Action | M ₁ /M ₄ agonist M ₂ /M ₃ antagonist | M ₄ PAM ² | M ₄ agonist | |
| Phase (most advanced program) | Ph3 | Ph1b | Ph2 in 2022 | |
| Target | Schizophrenia Dementia related neuropsychiatric disorders | Schizophrenia | Schizophrenia | |
| Impact of recent clinical data ¹ | Achieved primary endpoint in Phase II clinical trial (18 November 2019) Share price: \$17.68 → \$85.10 (\$1.7bn+ Market cap increase) | Positive results from Phase I clinical trials (29 June 2021) Share price: \$12.57 → \$23.20 (\$1.6 bn+ Market cap increase) | - | |

¹ Change in share price 5 days after announcement; ² PAM = Positive Allosteric Modulator
Source: Company disclosures, FactSet



Neurocrine
BIOSCIENCES



Our discovery platform updates

Further strengthening our world leading platform for GPCR by developing new technology



Solid Core Technologies

StaR[®]
(Stabilised Receptor)

SBDD
(Structure-Based Drug Design)

+

+

Latest updating our platform

CryoEM

DEL Screening
(DNA Encoded Library)

Protein Binder Toolkit

“for difficult target/faster”

“for better compound/faster”



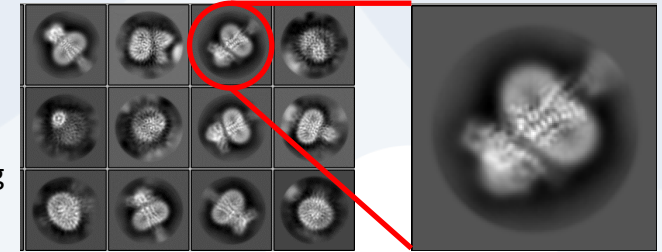
World leading Tech-based drug Discovery Platform for GPCR

Our discovery platform updates (cont'd)

Combining with our StaR[®]/SBDD, 3 new technologies makes our platform better and faster

CryoEM

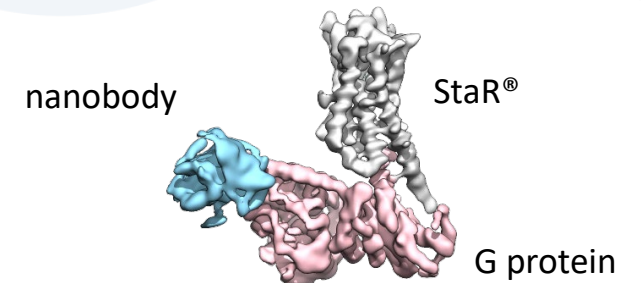
- **12 Unique GPCRs resolved by CryoEM in 2020-2021.**
- We have our own CryoEM internally and access to 2 high power instruments in Cambridge. Richard Henderson, our co-founder and Scientific Advisory Board member won the Nobel prize (2017) for developing this technology.
- Example: Family B receptors are implicated in a range of disease areas and are long standing drug targets – structure determination of these receptors was historically challenging.
- We have determined multiple structures of Family B receptors **by both X-ray crystallography and cryo-EM to enable SBDD.**



2D class averages

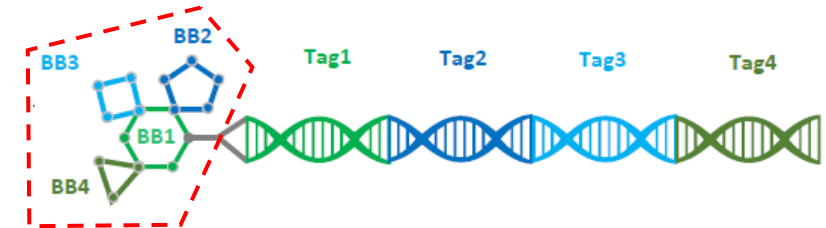
Protein Binder Toolkit

- **Most CryoEM structures we have solved required the introduction of additional protein domains.**
- These include domains **fused to the StaR[®]** or introduced during expression or purification.
- Fusion partners, mini G proteins*, nanobodies and antibody fragments have all been successfully used.
- In addition to structures, protein binders also facilitate protein engineering, biophysics and pharmacology.



DEL Screening (DNA Encoded Library)

- Alternative strategy for hit identification in early drug discovery.
- **Libraries of 15 billion to >1 trillion compounds.**
- Allows access to unprecedented levels of diversity.
- Compounds engineered with unique features to facilitate identification.
- **We first reported DEL for PAR2 StaR[®] in 2018.**
- **13 StaR[®] proteins have now been subjected to DEL screens.**



*US patent, US 10,738,287 B2, relating to the miniG technology was granted in the name of Heptares Therapeutics Limited in 2020. First granted patent from the miniG family, WO 2017/129998 A1 - also granted in 2021 in the UK (GB 2558968B) and Australia (AU 2017212788B2), and pending in territories including Europe, China, Japan and Canada.






5

Strategic Growth Plan Update

Dr. Matt Barnes,
Senior Vice President, Drug Discovery,
Head of R&D Portfolio Management

Achievement in FY2021 (Strategic growth)

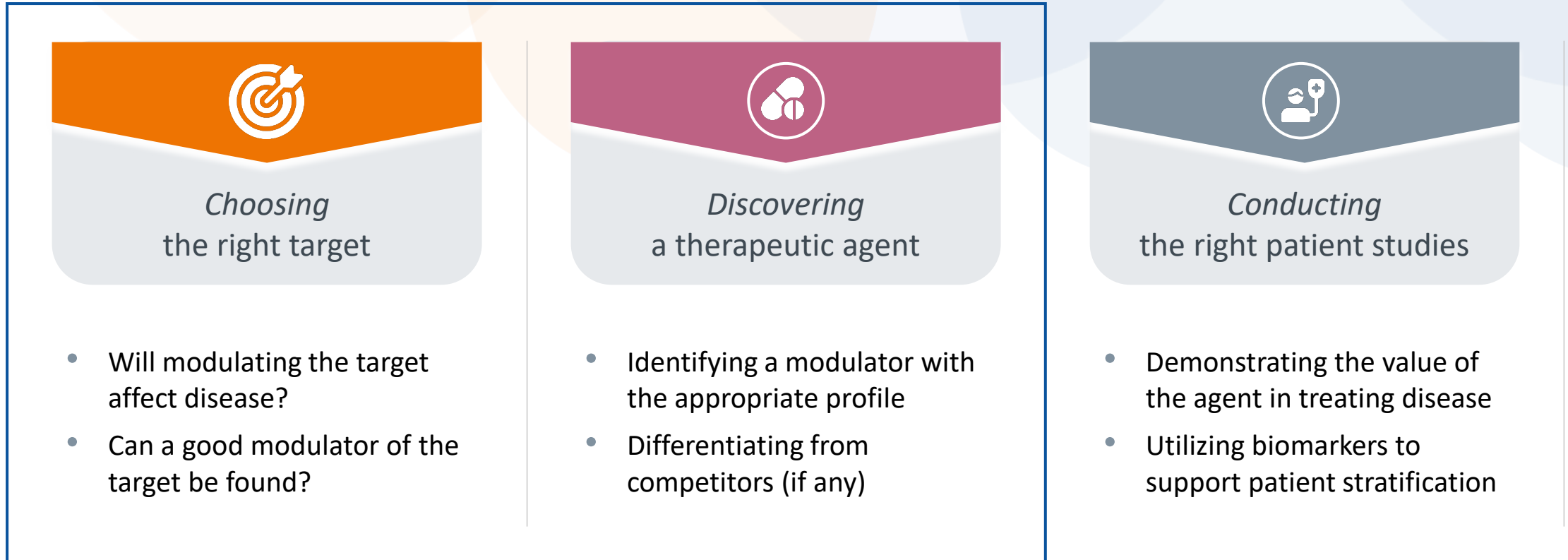
Major progress in new technologies and expansion beyond GPCR are in the following slides

| | FY2021 OBJECTIVES | ACHIEVEMENT |
|--|--|--|
|  <p>Organic Growth</p> | 1 Execute 2-3 new high value collaborations and/or co-investments every year | ✓ Completed: 1  |
| | 2 Expand expertise in GPCRs | ✓ Completed: Continue to update drug discovery platform |
| | 3 Generate 2 new preclinical candidates on average, every year | ✓ Completed: M1/M4 dual agonist M1 agonist backup |
| | 4 Advance discovery and development pipeline | ✓ Completed: MC4 ant. and CGRP ant. advanced to Ph1 |
|  <p>Strategic Growth</p> | 1 Seek out revenue-generating opportunities including M&A | ✓ Completed additional fundraising in July. Continue to look for suitable acquisition target. |
| | 2 Invest / collaborate in novel technologies | ✓ Completed  |
| | 3 Expand drug target classes beyond GPCRs | ✓ Completed  |
| | 4 In-license late-stage programs for Japan market | ✗ Not yet completed |

Strategic collaboration Target

To leverage technology by choosing right targets and agent is our greatest opportunities

Key opportunity/Target of Strategic collaboration



Strategic collaboration landscape

Significant build of in-house methods and industry collaborations to drive new best practice



Choosing the right target

verily

Inveni AI
Innovate with Intelligence

Our Core Technologies

- StaR®
- CryoEM
- Protein Binder Toolkit
- SBDD
- DEL Screening

Discovering a therapeutic agent

PHARMENABLE

metrion biosciences

TWIST BIOSCIENCE

Captor Therapeutics®

PeptiDream

kymab

World leading Tech-based drug Discovery Platform for GPCR and beyond

Strategic collaboration Partners

Three new key partnerships in AI drug discovery field since 2021



AI drug discovery (Target)

- Research collaboration combining Verily's immune profiling capabilities and SH's StaR® platform and SBDD capabilities
- Collaboration aims to identify GPCRs expressed in immune cells, enhance our understanding of their functional relevance and prosecute as potential drug targets in **immune-mediated diseases**



AI drug discovery (Target)

- Discovery collaboration combining InveniAI's AI-powered platform for target discovery with SH's GPCR SBDD and early development capabilities
- Collaboration aims to identify new therapeutic product concepts for **immune diseases** and generate novel compounds that could improve responses to existing immunotherapies



AI drug discovery (Compound)

- Technology collaboration with PharmEnable to leverage its proprietary artificial intelligence-enabled and medicinal chemistry technologies.
- Collaboration to drive novel drug discovery against a challenging peptidergic GPCR target associated with neurological diseases.

New multi-target collaboration with Verily

Aims to accelerate the development of novel therapies for immune-mediated diseases

300+ Potential GPCRs

High priority candidate targets

Structure-based drug development

verily Immune Profiler

Data

8 million readouts per sample
+ Reference data

- + Cell sorting & frequencies
- + Gene expression
- + Disease score, treatment / response
- + Chromatin accessibility & contacts

Analysis

Integrative analysis
+ Quality Control

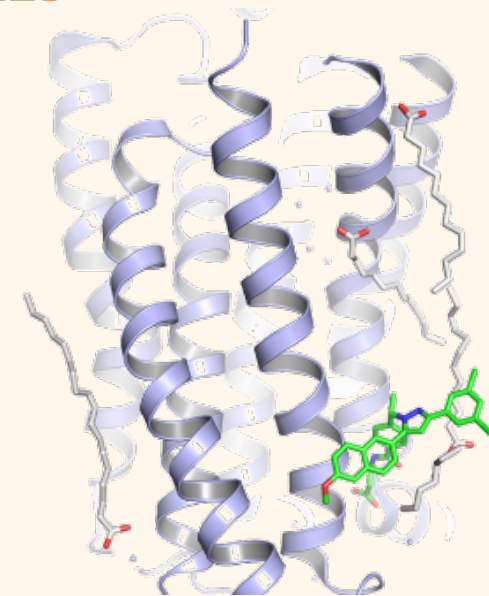
- Prioritized pathways & signatures
- Multi-faceted evidence
- Public datasets
- Wet lab validation

= Better Tx & Better Dx



StaR® Platform

GPCRs are proteins that represent the **target and site of action** for more drugs marketed today or in development than any other class of proteins



Strategic collaboration Partners (cont'd)

Our SBDD platform is also now being applied to areas outside our traditional GPCR space



Targeted GPCR Degradation

- Technology collaboration to initially identify novel small molecules that target a GPCR for degradation as potential therapeutic agents for **gastrointestinal disorders**
- Further aim to generate high resolution structural information around the GPCR-E3 ligase complex to enhance drug discovery efforts



Ion Channels

- Technology collaboration to demonstrate the potential of SBDD to address disease-associated ion channels
- Initial focus to identify novel, highly specific drug leads for further development against a single ion channel associated with **neurological diseases**



Antibody

- Discovery collaboration combining Twist's synthetic antibody libraries and bioinformatics expertise with SH's StaR® platform
- Collaboration aims to discover **therapeutic antibodies** against GPCRs identified by SH
- SH will have exclusive, full global rights to develop and commercialize any antibody leads identified and directed to the targets of interest



6

Objectives for FY2022

Shinichi Tamura, President and CEO

Overview for our growth strategy

Mid to long-term direction for accelerating our growth

For our IT-based drug discovery platform (StaR®/SBDD)

For our future strategic growth



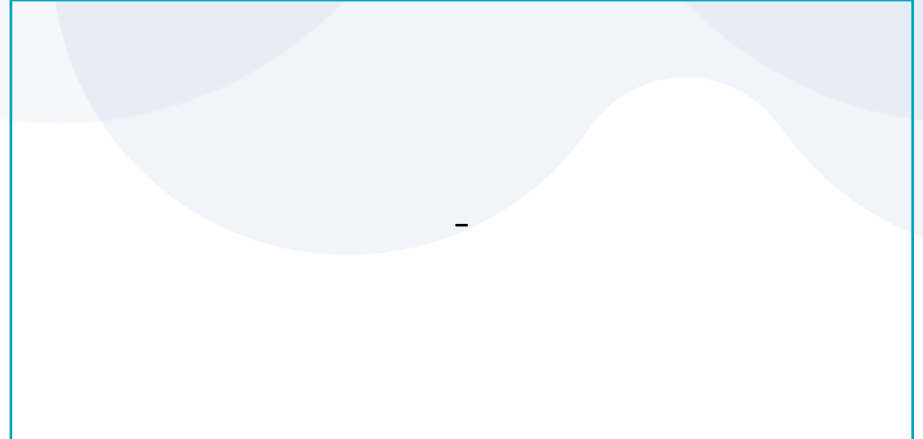
Organic Growth

- Increase the value of the deal by out-licensing after obtaining POC in your own clinical trials, not in preclinical
- Keeping strongness to our position as world leading IT-based drug discovery solution provider



Strategic Growth

- Leverage our platform potential through new strategic technology collaborations
- Maximize the synergy with current platform and future alliance partner which came from acquisition/alliance deal



- Searching for a transformative acquisition which leverage each other
- In-license late-stage clinical development products for the Japanese market

Priority objectives for FY2022

Continue to promote future growth through both organic and strategic growth

FY2022 OBJECTIVES



Organic Growth

- 1 Execute at least one new high value collaborations and/or co-investments
- 2 Generate at least one new preclinical candidates
- 3 Further enhance platform productivity



Strategic Growth

- 1 Continue to search for opportunities to acquire companies that will bring new sources of revenue
- 2 Collaborate/invest in new technologies with synergies
- 3 In-license late-stage clinical development products for the Japanese market

Priority objectives for FY2022 (cont'd)

Promote sustainable ESG practices and policies across global business

Sustainable Development Goals adopted by the United Nations (Sep-15)



Sosei Heptares is undertaking initiatives focused on 10 of the 17 Sustainable Development Goals



- E**
- Sustainability Committee promotes efficient energy use and renewable energy sources, and waste and water usage reduction
 - Promote efficiency in discovery

- S**
- Ms. Miwa Seki nominated for appointment as new External Director
 - Grant funding received from Wellcome to advance the SARS-CoV-2 Mpro inhibitor program and seek partnering opportunity

- G**
- Proposed Board of Directors – 8 members (incl. 6 external independent)
 - Investment Committee and Scientific Advisory Board provide recommendations to the Board

Source: United Nations
 LINK: https://soseiheptares.com/uploads/Sustainability/Sustainability_20201214_JP.pdf

Our management team

Transition to new management will be executed after approval general shareholders' meeting

Board of Directors

| | | | |
|---|--|--|---|
|  | Shinichi Tamura Chairman of the Board |   | |
|  | Chris Cargill Representative Executive Officer, President and CEO |   | ✓ |
|  | Tomohiro Toyama External Independent Director |  | |
|  | Kuniaki Kaga External Independent Director |   | |
|  | Dr. David Roblin External Independent Director |     | |
|  | Noriaki Nagai External Independent Director |   | |
|  | Rolf Soderstrom External Independent Director |         | |
|  | Miwa Seki External Independent Director |    | ✓ |

Executive Officers

| | | | |
|---|--|--|---|
|  | Chris Cargill Representative Executive Officer, President and CEO |   | ✓ |
|  | Hironoshin Nomura Chief Financial Officer |   | ✓ |
|  | Kieran Johnson Chief Accounting Officer |   | ✓ |
|  | Kazuhiki Yoshizumi Chief Compliance Officer |  | |
|  | Dr. Matt Barnes President, Heptares Therapeutics Ltd. |   | ✓ |
|  | Tadayoshi Yasui Representative Director President, Sosei Co.Ltd. |   | |

Senior Management

| | | | |
|---|---|---|---|
|  | Dr. Miles Congreve Chief Scientific Officer |   | |
|  | Dr. Rob Cooke Chief Technology Officer |  | |
|  | James Taylor Chief Business Officer |     | |
|  | Dr. Barry Kenny Senior Business Advisor |     | |
|  | Dr. Marcus Messenger Vice President, Business Development |    | ✓ |
|  | Dr. Alastair Brown Vice President, Translational Sciences |   | ✓ |
|  | David Howe Vice President, Non-CNS Development & Experimental Medicine |     | ✓ |

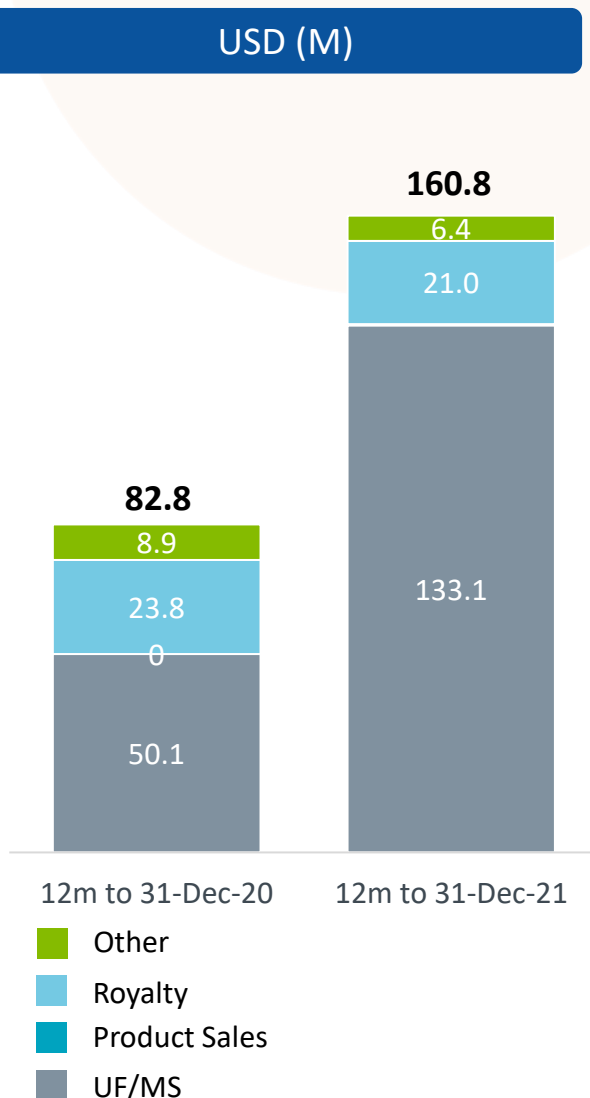
✓ updated



Appendix

Revenue breakdown by type (IFRS)

USD (M)



Upfront (UF)/Milestone (MS) revenue recognized in the full Financial Year¹

| Date | FY20 UF/MS Event | Revenue (USDm) |
|--------|---|----------------|
| Feb-20 | Daiichi Sankyo lead identified | 1.5 |
| Jun-20 | AbbVie collab upfront | 2.5 |
| Jun-20 | Novartis Enerzair® Breezhaler® Japan approval | 1.3 |
| Jul-20 | Novartis Enerzair® Breezhaler® EU approval | 5.0 |
| Aug-20 | Takeda structure solved | 0.3 |
| Sep-20 | Pfizer Phase 1 start | 5.0 |
| Nov-20 | Tempero Bio collab upfront | 5.0 |
| Nov-20 | Fair value of shares in Tempero Bio | 2.0 |
| Nov-20 | Biohaven collab upfront | 5.0 |
| Nov-20 | Biohaven share consideration | 4.7 |
| Dec-20 | AbbVie StaR® structure solved | 0.7 |
| Dec-20 | Takeda StaR® structure solved | 0.3 |
| Dec-20 | GSK collab upfront | 12.5 |
| | Selected revenue | 4.3 |

| Date | FY21 UF/MS Event | Revenue (USDm) |
|--------|---|----------------|
| Feb-21 | Genentech StaR® structure solved | 1.1 |
| Feb-21 | Genentech StaR® structure solved | 0.5 |
| Apr-21 | Genentech StaR® structure solved | 1.1 |
| May-21 | Pfizer Phase 1 start | 5.0 |
| Jun-21 | Biohaven Phase 1 start | 0.5 |
| Jul-21 | FFTC termination of exclusive distribution rights | -4.5 |
| Nov-21 | Hisamitsu exclusive distribution rights | 4.1 |
| Nov-21 | Takeda collab upfront | 2.5 |
| Dec-21 | Neurocrine collab upfront | 100.0 |
| Dec-21 | Genentech StaR® structure solved | 0.8 |
| Dec-21 | GSK candidate selection | 6.9 |
| | Selected revenue | 15.1 |

¹ Values relate to revenue recognized in the full financial year per accounting measures, as opposed to cash received in the full financial year.

IFRS Income Statement Reconciliation

Income Statement Reconciliation: 'Cash' basis to IFRS basis

USD (000s)

YEN (M)

| | FY21 | FY20 | FY21 | FY20 |
|---------------------------------|-----------------|-----------------|-----------------|----------------|
| Royalties | 20,981 | 23,826 | 2,311 | 2,544 |
| Milestones | 133,139 | 50,133 | 14,667 | 5,353 |
| Goods sales | 256 | - | 28 | - |
| Other | 6,405 | 8,850 | 706 | 945 |
| Total Revenue | 160,782 | 82,809 | 17,712 | 8,842 |
| Cash COS | (7,109) | (5,684) | (784) | (607) |
| Cash R&D | (50,034) | (31,944) | (5,511) | (3,411) |
| Cash G&A | (22,857) | (18,687) | (2,518) | (1,995) |
| Other Cash Income | 46 | 699 | 5 | 75 |
| Cash Earnings | 80,829 | 27,193 | 8,904 | 2,904 |
| SBP, Depn & Amort – COS | (1,356) | (1,440) | (149) | (154) |
| SBP, Depn & Amort - R&D | (3,808) | (3,575) | (420) | (382) |
| SBP, Depn & Amort - G&A | (12,911) | (13,488) | (1,422) | (1,440) |
| Other Operating Costs | (28,488) | - | (3,138) | - |
| Operating income | 34,265 | 8,689 | 3,775 | 928 |
| IFRS Revenue – per above | 160,782 | 82,809 | 17,712 | 8,842 |
| IFRS COS | (8,465) | (7,124) | (933) | (761) |
| IFRS R&D | (53,842) | (35,519) | (5,931) | (3,793) |
| IFRS G&A | (35,767) | (32,175) | (3,940) | (3,435) |
| Total IFRS OPEX | (98,075) | (74,818) | (10,804) | (7,989) |
| IFRS Other Income | (28,442) | 699 | (3,133) | 75 |
| IFRS OPERATING INCOME | 34,265 | 8,689 | 3,775 | 928 |

StaR® Platform

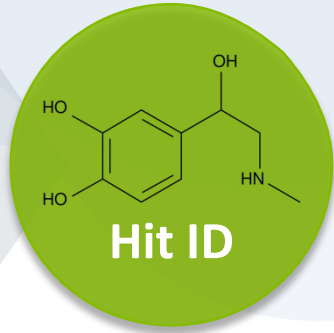
We are driving a new era of GPCR SBDD with surprising insight into ligand binding modes



- DRUG TARGET PROFILE
- ITERATIVE MUTAGENESIS
- THERMOSTABILITY
- PHARMACOLOGY
- CHARACTERIZATION



- SCREENING
- BIOPHYSICS
- STRUCTURE
- INTERPRETATION
- LIGAND OPTIMIZATION



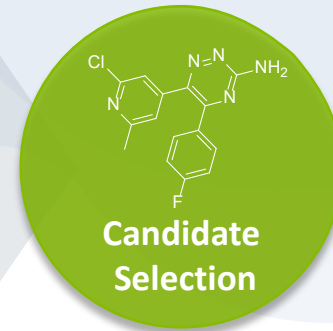
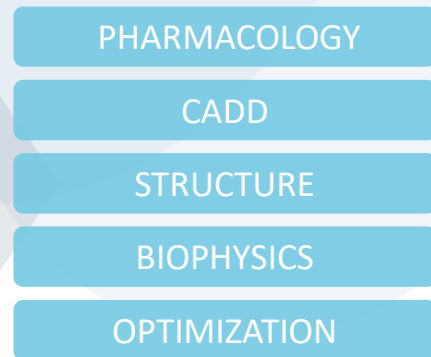
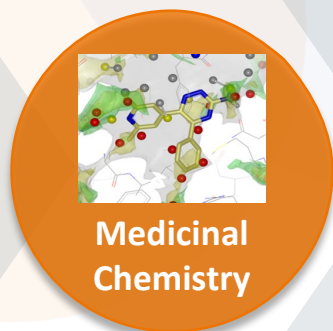
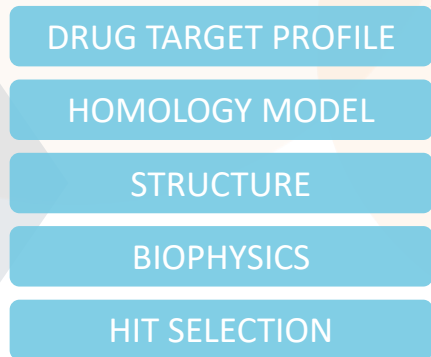
- **GPCR drug discovery remains challenging**
 - *Low expression levels* – often with complicated expression and secretion pathways
 - *Difficult purification* – lose structural integrity outside the membrane
 - *Heterogeneity* – inherently flexible; changing conformation depending on the bound ligand

- We introduce point mutations into a GPCR which leads to **increased thermostability**
- The receptor is trapped in a relevant conformation to match the drug product profile
- The **Stabilized Receptor (StaR®)** can be extracted from the membrane and purified with function retained

70+ Stabilized Receptors generated in agonist and/or antagonist conformations

SBDD Platform

Collaborating with StaR[®], Structure Based Drug Design(SBDD) is powerful tool for GPCR



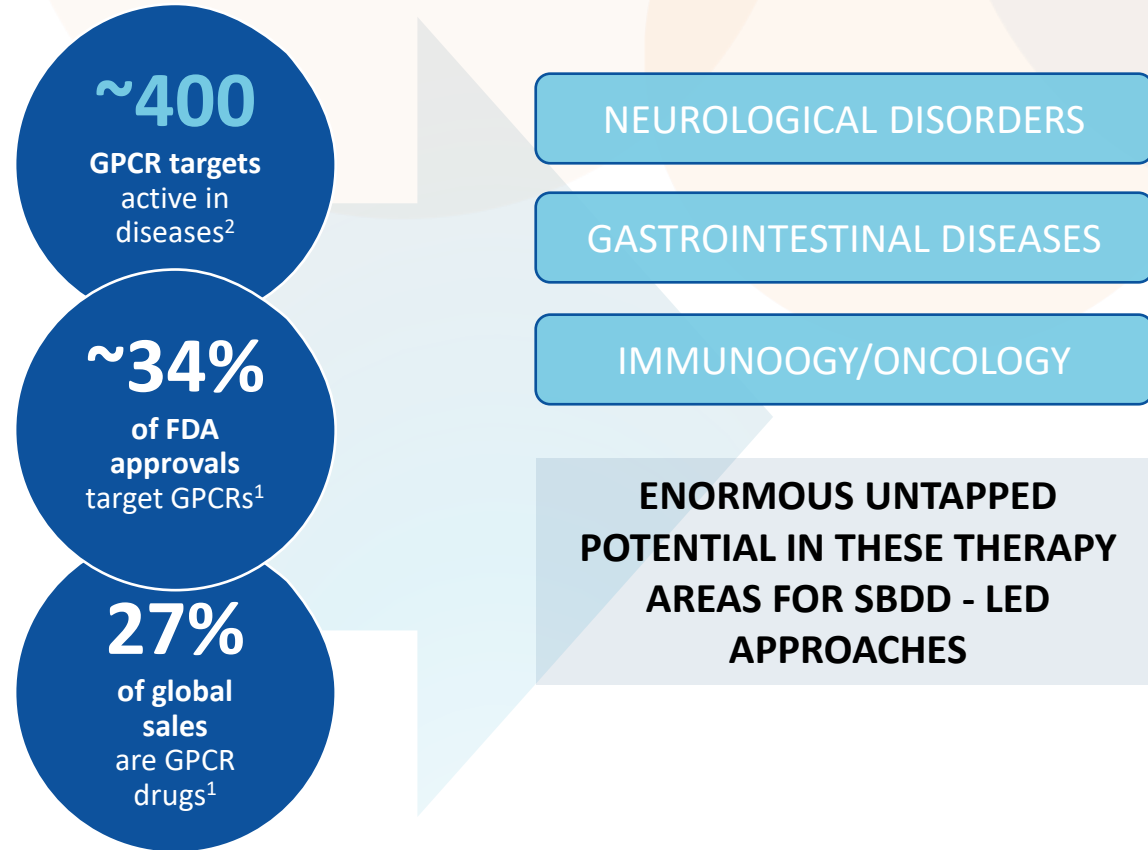
- **GPCR focused SBDD**
 - *Hit Identification*– Virtual Screening, Biochemical and Biophysical assays
 - *Structure Determination* – characterize binding modes
 - *Pharmacology* – understanding mode of action and signalling

- Medicinal Chemistry working closely with Computer Aided Drug Design (CADD)
- Establish detailed Screening Cascade and progression criteria
- Typically 2 year process from starting the target screening to entering Candidate Selection phase

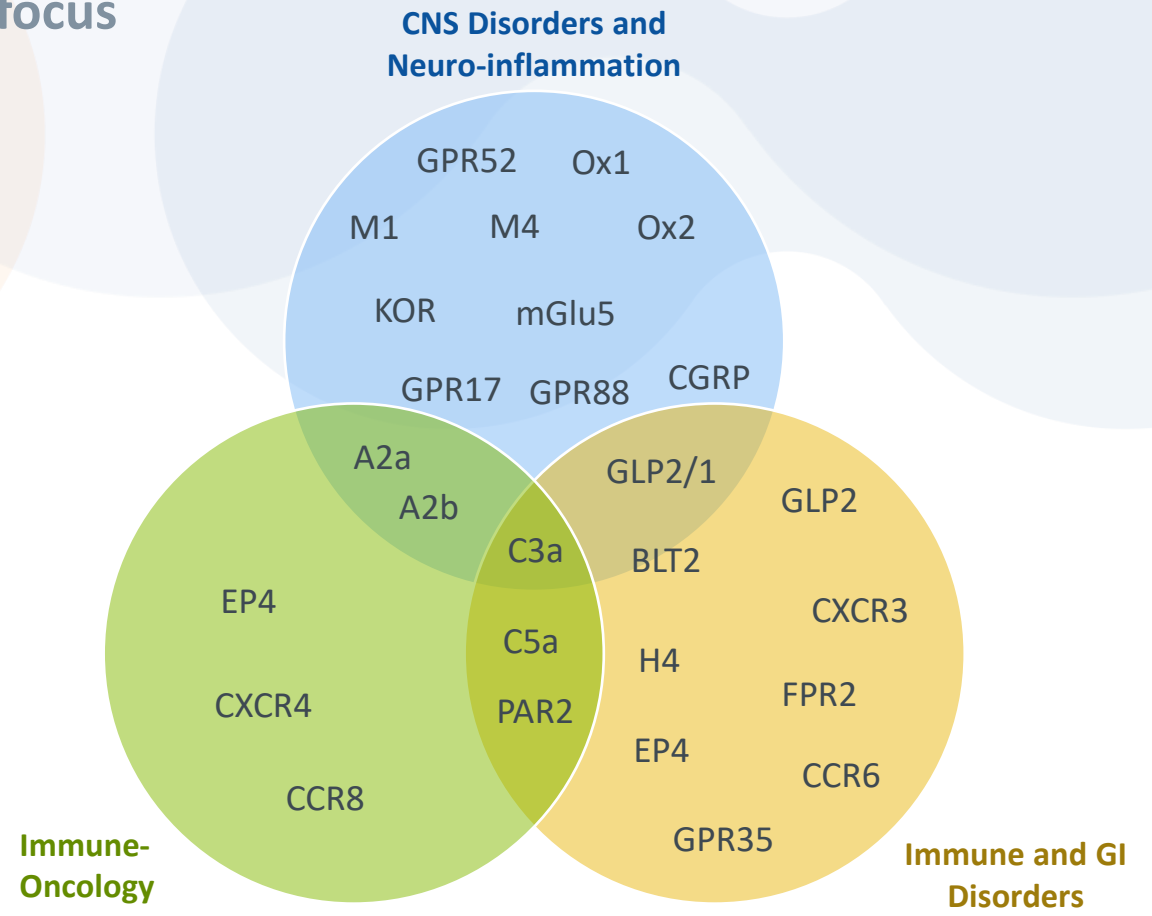
25+ Preclinical Candidates identified for in-house and collaboration pipeline

Major indication for GPCR

Neuroscience, Immunology and GI are our areas of focus



GPCRs are active in a wide range of disease areas, and offer broad therapeutic potential






Significant opportunity to target new first-in-class and/or improved best-in-class GPCR medicines

Sources: ¹ "Unexplored opportunities in the druggable human genome", Nature Reviews, 2016 ; ² "Trends in GPCR in Drug Discovery – new agents, targets and indications", Nature Reviews, 2017

SARS-CoV-2 protease inhibitors competition landscape

We need several options for drug resistance and aiming one of the best class therapies

| |  Pfizer |  SHIONOGI |  SOSEI HEPTARES |
|-------------------|--|---|---|
| Program | PAXLOVID™ | S-217622 | SH-879 |
| Administration | Oral | Oral | Oral |
| Number of doses | twice a day | once a day | once a day |
| Features | Requirement for ritonavir combination boost exposure | Not require co-dosing with ritonavir | Not likely require co-dosing with ritonavir |
| Phase | FDA authorized the emergency use | Phase 2/3 | Potential clinical candidate identified suitable for further development |
| Key data findings | <ul style="list-style-type: none"> ✓ Exhibits potent in vitro antiviral activity against SARS-CoV-2 ✓ Good tolerability, no safety findings up to 500mg dose 2x daily with ritonavir/10 days in healthy volunteers ✓ Interim data of Phase 2/3 EPIC-HR Study was announced in November 2021 - Reduced Risk of Hospitalization or Death by 89% | <ul style="list-style-type: none"> ✓ Phase 2a shows followings <ul style="list-style-type: none"> • On day 4 (after the 3rd dose), the proportion of subjects with positive viral titer decreased by approximately 60-80%, compared to the placebo group • No cases of exacerbation required hospitalization or similar therapy as hospitalization were found in the S-217622 group | <ul style="list-style-type: none"> ✓ Comparable antiviral activity to Pfizer's PF-07321332 against SARS-CoV-2 in cell based assays ✓ Low in vitro clearance, superior in vivo clearance and high plasma exposure from oral dosing |

Receives Grant Funding from Wellcome on Dec 2021



- Funding comes through the Covid-19 Therapeutics Accelerator, which was set up by Wellcome, Bill & Melinda Gates Foundation and Mastercard
- In-house program funded by Wellcome through the Covid-19 Therapeutics Accelerator
- Currently advancing the pre-clinical development of novel oral anti-viral small molecules targeting the main protease of SARS-CoV-2 (M^{pro}) as potential treatments for COVID-19

In vitro data of SH-879

SH-879 represents an excellent opportunity for further development as an oral drug for the treatment of COVID-19

TARGET PRODUCT PROFILE

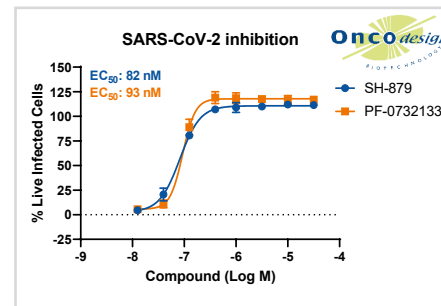
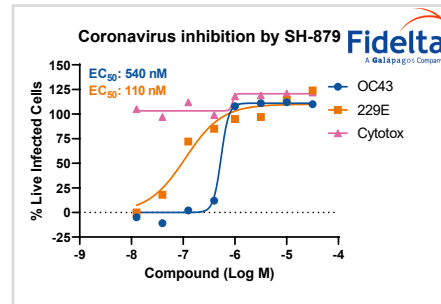
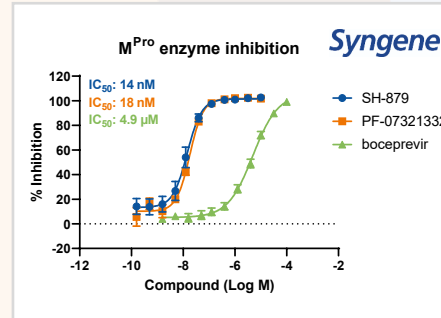
Once or twice daily oral agent for treatment of SARS-CoV-2 viral infection dosed immediately after a positive test result and for up to 2 weeks thereafter, with potential for broader application for intervention of associated human coronavirus and related viral infections.

PROGRAM STAGE

Excellent progress has been made in >1 chemical series of inhibitors since project initiation Apr-20

Potential clinical candidates have now been identified, suitable for further development

Promising PK results from SH-879, our most advanced asset (see adjacent charts for cell-based antiviral assay data)



Next Step

Proactively seeking funding via charitable organizations and trusts / other philanthropic sources of funding, to rapidly progress our molecules

Program is available for global partnering to accelerate progress to human clinical trials
 Significant inbound interest received and under assessment

Program remains a core ESG project – We will not profit/receive economics from sales to Least Developed Countries*. For all other countries, we will reinvest a portion of any profits received towards our Group’s ESG initiatives

* Regardless of pandemic/endemic status. List of LDCs as defined by the United Nations.

SZ treatment system

M4 agonist is 4th-gen candidate aiming to be a highly effective and safer treatment for SZ

| | | Typical antipsychotic | Atypical antipsychotics | | |
|-------------------------------|--|-----------------------|-------------------------|--------------------------------|----------------------------------|
| MoA | | D2 Ant | D2 Ant +5-HT Regulator | D2 partial Ag + 5-HT Regulator | M4 Agonist*** |
| Typical medicine (Peak sales) | | Haldol | Zyprexa (\$5,000M+) | Abilify (\$6,100M) | KarXT, CVL-231 HTL'878 |
| Generation | | 1 st | 2 nd | 3 rd | 4 th |
| Efficacy | Positive symptoms Number of patients 20M* | +++ | +++ | +++ | +++ |
| | Negative Symptom Number of patients 11.5M* | - | + | + | ++ |
| | Cognitive impairment Number of patients 16M* | - | + | + | ++ |
| Safety | Extrapyramidal symptoms** | ++++ | ++ | + | - |
| | Weight gain | + | ++++ | + | - |

M4 agonist is 4th-gen candidate

- Potential Best-in-Class therapy with a novel mechanism
- Improved efficacy and Safety

*As 1 patient can have several symptoms, number of patients in 3 symptoms is overlapping
 **Drug-induced movement disorders including involuntary or uncontrollable movements. tremors. muscle contractions. It is said to be related with D2 receptor occupancy balance.
 ***Expected efficacy and expected safety derived from ongoing clinical trials of KarXT and CVL-231.
 Source: P T. 2014 Sep; 39(9): 638–645, J Clin Psychiatry. 2010;71(3):280–286, Schizophr Bull. 2010 Jan; 36(1): 36–42 and EvaluatePharma



Neurocrine
BIOSCIENCES



sosei
HEPTARES

Estimation of potential market size

Market size and peak sales of our development products in the preclinical stage and beyond

| Category | Indication ² | Number of Patients | Peak Sales(USD million) | | Our Products |
|-------------------------|----------------------------|----------------------------|------------------------------|---------------------------|---|
| | | | Market Size | Individual Products | |
| Neurological disorders | Dementia | ~55 million | \$7,266M (2010) | \$3,913M (2009/Aricept) | M1 agonist, M1/M4 agonist |
| | Schizophrenia | ~20 million | \$20,691M (2011) | \$6,198M (2013/Abilify) | M4 agonist, M1/M4 agonist |
| | Substance use disorders | ~10.4 million ¹ | - | - | mGlu5 NAM |
| | Narcolepsy | ~3 million | \$2,014M (2020) | \$1,742M (2020/Xyrem) | OX2 agonist |
| | Other | - | - | - | CGRP antagonist, GPR52 agonist |
| Immunological disorders | Cancer | ~42 million | \$152,495M (2020) | \$14,380M (2020/Keytruda) | A2a antagonist, EP4 antagonist, CXCR4 mAb |
| | Inflammatory bowel disease | ~10 million | \$19,966M (2020) | \$7,809M (2020/Humira) | CCR6 antagonist, GPR35 agonist, EP4 agonist |
| | Atopic Dermatitis | ~13.3 million | \$4,127M ³ (2020) | \$3,204M (2020/Dupixent) | H4 antagonist, PAR2 mAb |
| Other | T2DM/Obesity | ~420 million | \$48,861M (2020) | \$6,652M (2014/Lantus) | GLP1 agonist |
| | Anorexia | ~2.9 million | - | - | MC4 antagonist |
| | SARS-CoV-2 | ~240 million | - | - | Mpro |
| 合計 | | | \$255,420M | \$43,898M | |












Source (Number of patients): World Health Organization, The European Federation of Crohn's & Ulcerative Colitis Associations (EFCCA), Narcolepsy Network, Inc., GBD 2015 Disease and Injury Incidence and Prevalence Collaborators (October 2016). "Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990-2015: a systematic analysis for the Global Burden of Disease Study 2015". Lancet. 388 (10053): 1545-1602. ¹The number of patients with drug addiction
Source (Peak Sales): Sales of each indications are extracted from Evaluate Pharma's data of sales by disease and sales by individual products (as of 18 Jan. 2022). ²Sosei Heptares may target one segment in the market for specific diseases. ³ Since there is no applicable indication category, the market size of "Eczema" is stated. Current market size for Atopic Dermatitis may be larger than stated above.

Partnered Pipeline

| Compound | Target / Mechanism of Action | Modality | Indication | Partner | Disc. | PCC | Ph1 | Ph2 | Ph3 | App | Mkt |
|--|------------------------------|----------|----------------------------|---|-------|-----|-----|-----|-----|-----|-----|
| Traditional Out-licensing Collaborations | | | | | | | | | | | |
| Seebri® Breezhaler® | LAMA | SME | COPD | NOVARTIS | █ | █ | █ | █ | █ | █ | █ |
| Ultibro® Breezhaler® | LAMA+LABA | SME | COPD | NOVARTIS | █ | █ | █ | █ | █ | █ | █ |
| Enerzair® Breezhaler® | LAMA+LABA+ICS | SME | Asthma | NOVARTIS | █ | █ | █ | █ | █ | █ | █ |
| ORAVI® | Antifungal agent miconazole | SME | Oropharyngeal candidiasis | Daiichi Sankyo | █ | █ | █ | █ | █ | █ | █ |
| Imaradenant ¹ | Adenosine A2a ant. combo | SME | mCRPC | AstraZeneca | █ | █ | █ | █ | █ | █ | █ |
| HTL'878 | Muscarinic M4 agonist | SME | Neurology diseases | Neurocrine | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | Muscarinic M1 agonist | SME | Neurology diseases | Neurocrine | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | Muscarinic M1/M4 agonist | SME | Neurology diseases | Neurocrine | █ | █ | █ | █ | █ | █ | █ |
| PF-07081532 | GLP-1 agonist | SME | T2DM / Obesity | Pfizer | █ | █ | █ | █ | █ | █ | █ |
| PF-07054894 | CCR6 antagonist | SME | Inflammatory bowel disease | Pfizer | █ | █ | █ | █ | █ | █ | █ |
| PF-07258669 | MC4 antagonist | SME | Anorexia | Pfizer | █ | █ | █ | █ | █ | █ | █ |
| BHV3100 | CGRP antagonist | SME | Neurology diseases | biohaven | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | GPR35 agonist | SME | Inflammatory bowel disease | gsk | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | Multi target | SME | Multiple indications | Pfizer | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | Multi target | SME/LME | Multiple indications | Genentech <small>A Member of the Roche Group</small> | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | Multi target | SME/LME | Gastrointestinal and other | Takeda | █ | █ | █ | █ | █ | █ | █ |
| Not disclosed | Single target | SME | Inflammatory diseases | abbvie | █ | █ | █ | █ | █ | █ | █ |















Note: SME = small molecule. LME = large molecule. Seebri®, Ultibro®, Enerzair® and Breezhaler® are registered trademarks of Novartis AG. ¹ AstraZeneca have removed the A2a program from their clinical pipeline as at Q3 2021

Partnered Pipeline (cont'd)

| Compound | Target / Mechanism of Action | Modality | Indication | Partner | Disc. | PCC | Ph1 | Ph2 | Ph3 | App | Mkt |
|---|---------------------------------------|----------|-------------------------------|---|-------|-----|-----|-----|-----|-----|-----|
| Co-development / Profit-share Collaborations | | | | | | | | | | | |
| KY1051 | CXCR4 mAb | mAb | Immuno-oncology |  | █ | | | | | | |
| Not disclosed | PAR-2 | Peptide | Inflammatory diseases |  | █ | | | | | | |
| Not disclosed | Targeted Protein Degradation | SME | Gastrointestinal disorders |  | █ | | | | | | |
| Not disclosed | AI-Augmented Drug Discovery | SME | Neurology diseases |  | █ | | | | | | |
| Not disclosed | Ion Channel Drug Discovery | SME | Neurology diseases |  | █ | | | | | | |
| Not disclosed | Multi target AI-powered | SME/LME | Immune diseases |  | █ | | | | | | |
| Not disclosed | Antibody Discovery | mAb | Disease-relevant GPCR targets |  | █ | | | | | | |
| Not disclosed | Multi target AI-powered | SME/LME | Immune diseases |  | █ | | | | | | |
| Co-owned Investments | | | | | | | | | | | |
| TMP301 | mGlu5 NAM | SME | Substance use disorders |  | █ | | | | | | |
| Not disclosed | OX1/OX2 agonist (oral and intranasal) | SME | Narcolepsy |   | █ | | | | | | |

Note: SME = small molecule. LME = large molecule

In-house Pipeline

| Compound | Target / Mechanism of Action | Modality | Indication | Originator | Dis | PCC | Ph1 | Ph2 | Ph3 | App | Mkt. |
|---|------------------------------|----------|---------------------------------|---|----------------------|-----|-----|-----|-----|-----|------|
| In-house Programs (Not yet partnered) | | | | | | | | | | | |
| Not disclosed | H4 antagonist | SME | Atopic Dermatitis |  | ██████████ | | | | | | |
| Not disclosed | EP4 antagonist | SME | Immuno-oncology |  | ██████████ | | | | | | |
| Not disclosed | GPR52 agonist | SME | Neurology diseases |  | ██████████ | | | | | | |
| Not disclosed | EP4 agonist | SME | Inflammatory bowel disease |  | ██████████ | | | | | | |
| Not disclosed | PAR-2 mAb | mAb | Atopic Dermatitis |  | ██████ | | | | | | |
| SH-879 | SARS CoV-2 Mpro | SME | Coronaviruses |  | ██████ | | | | | | |
| Multiple programs | Not disclosed | SME/LME | Neurology diseases |  | ██████ | | | | | | |
| Multiple programs | Not disclosed | SME/LME | GI and Inflammatory diseases |  | ██████ | | | | | | |
| Multiple programs | Not disclosed | SME/LME | Immunology diseases |  | ██████ | | | | | | |
| In-house Programs (No longer internally funded. Targeting academic / industrial partnership) | | | | | | | | | | | |
| HTL'310 | SSTR5 agonist | Peptide | Hypoglycaemic disorders |  | ████████████████████ | | | | | | |
| HTL'097 | GLP-1 antagonist | Peptide | Hypoglycaemic disorders |  | ██████████ | | | | | | |
| HTL'023 | Dual GLP-2/GLP-1 agonist | Peptide | Intestinal failure / NASH |  | ██████████ | | | | | | |
| Not disclosed | Apelin agonist | Peptide | Pulmonary Arterial Hypertension |  | ██████████ | | | | | | |
| HTL'641 | Dual orexin antagonist | SME | Insomnia and sleep disorders |  | ██████████ | | | | | | |

Note: SME = small molecule. LME = large molecule

Glossary

| Basic Terminology/Technology | | |
|------------------------------|--|--|
| GPCR | G Protein-Coupled Receptor | There are about 800 types of GPCRs in the human body. While 400 of them are known to be potential drug targets, about 300 of them are not yet drugged |
| StaR | Stabilized Receptor | Sosei Heptares' proprietary technology to stabilize a GPCR by engineering a small number of single point mutations outside of the ligand-binding site. It enables to identify the structure of GPCRs to be used for SBDD drug discovery as well as antibody drug discovery as antigens |
| SBDD | Structure-Based Drug Design | A method to design drugs on a computer base based on the analysis of the three-dimensional structure of the drug target (e.g., protein receptor) |
| TPD | Targeted Protein Degradation | Drugs that promote the degradation of target proteins (e.g., receptors) in cells and aim for therapeutic effects by reducing disease-causing proteins |
| PAM | Positive Allosteric Modulator | A regulator that binds to unusual active sites (allosteric sites) on the receptor to increase the affinity and effect of the agonist |
| NAM | Negative Allosteric Modulator | A regulator that binds to an unusual active site on the receptor (allosteric site) and reduces the affinity and effectiveness of the agonist |
| Ag | Agonist | A therapeutic drug that binds to a receptor and activates an intracellular signaling system similar to biological substances |
| Ant | Antagonist | A therapeutic drug that suppresses biological reactions by binding to receptors and preventing them from binding to biological substances |
| PK | Pharmacokinetics | Research and testing on the relationship between drug dosage and blood concentration. Mainly describes the rate process of ADME |
| PD | Pharmacodynamics | Research and testing on the relationship between drug concentration and pharmacological effects |
| ADME | Absorption, Distribution, Metabolism and Excretion | A series of process in the absorption of drugs into the body, distribution within the body, metabolism in the liver and other organs, and excretion in the kidneys and other organs |
| POM | Proof of Mechanism | Proof of mechanism of action, mainly through biomarkers. It can suggest the possibility of efficacy in fewer cases than POC |
| POC | Proof of Concept | Proof of a therapeutic concept, primarily through clinical efficacy and safety |
| Ach | Acetylcholine | A neurotransmitter released from the peripheral parasympathetic and motor nerves to transmit nerve stimuli |
| IND | Investigational New Drug | Information packages for development candidates to be submitted to the U.S. Food and Drug Administration (FDA) at the time of initiation of clinical trials |
| Ph1 | Phase1 | A study in humans. The main purpose is to confirm the safety of the drug candidate mainly by healthy volunteers. |
| Ph2 | Phase2 | A study in humans. The main purpose is to confirm the efficacy of the drug candidates on a small scale (however, the number of patients varies greatly depending on the disease) |
| Ph3 | Phase3 | A study in humans. The main purpose is to determine the efficacy of the drug candidates on a large scale (however, the number of patients varies greatly depending on the disease) |
| NDA | New Drug Application | An application to the U.S. Food and Drug Administration (FDA) for approval to market a new drug |
| Disease/Drug | | |
| LAMA | Long Acting Muscarinic Antagonist | An inhalant that dilates bronchial tubes and improves respiratory function by inhibiting the action of acetylcholine receptors (M3), which increase parasympathetic nerves. |
| LABA | Long Acting Beta2-Agonist | An inhalant that improves respiratory function by stimulating sympathetic beta2 receptors to dilate the bronchi. |
| ICS | Inhaled Corticosteroid | An inhalant that suppresses airway inflammation to prevent coughing attacks and other symptoms caused by asthma, also promotes the action of beta 2 stimulants and improve airway hyperresponsiveness. |
| mCRPC | Metastatic Castration-Resistant Prostate Cancer | Cancer that has spread (metastasized) beyond your prostate gland and for which hormone therapy is no longer effective in stopping or slowing the disease. |
| COPD | Chronic Obstructive Pulmonary Disease | A group of diseases that causes damage to the bronchi and lung due to smoking or inhalation of toxic substances, resulting in breathing problems. |
| AD | Alzheimer's Disease | Alzheimer's disease is a progressive neurologic disorder that causes the brain to shrink (atrophy) and brain cells to die, the most common cause of dementia . |
| DLB | Dementia with Lewy Bodies | Protein deposits, called Lewy bodies, develop in nerve cells in the brain regions involved in thinking, memory and movement (motor control), the second most common type of dementia. |

Glossary (cont'd)

| Drug discovery target | | |
|-----------------------|--------------------------------------|--|
| M1 | Muscarinic M1 Receptor | One of the five subtypes M1 to M5 of muscarinic acetylcholine receptors, known to be involved in learning and memory. |
| M4 | Muscarinic M4 Receptor | One of the five subtypes M1 to M5 of muscarinic acetylcholine receptors, known to be involved in behavior and dopamine release. |
| CGRP | Calcitonin Gene-Related Peptide | CGRP is thought to be involved in vasodilation, decreased heart rate, and increased myocardial contractility via receptors. |
| A2A | Adenosine A2A receptor | One of the four subtypes of adenosine receptors, A1, A2A, A2B, and A3. It is expressed in many tissues and has multiple functions such as neural activity, vasodilation, and immune regulation. |
| GLP-1 | Glucagon-like Peptide 1 | GLP-1 is secreted by gastrointestinal cells when we eat, and is involved in insulin secretion from the pancreas and appetite regulation in the central nervous system. |
| CCR6 | Chemokine Receptors 6 | A type of B chemokine receptor that responds to chemokines generated during inflammation. It is believed to be involved in inflammation and immunity mainly by it's regulating the migration activity of leukocytes into inflamed tissues. |
| MC4 | Melanocortin 4 Receptor | MC4 is expressed in the central nervous system and is the main receptor that mediates the appetite suppressing effect of alpha-melanocyte stimulating hormone. |
| GPR35 | G Protein-Coupled Receptor 35 | Orphan receptors - expressed mainly in immune and gastrointestinal tissues and is thought to be involved in areas of gastrointestinal tract, cardiovascular, inflammation, and central nervous system. |
| CXCR4 | CXC Motif Chemokine Receptor 4 | CXR4 induces migration of cancer cells and is known to be important in metastasis process. |
| mGlu5 | Metabotropic Glutamate Receptor 5 | One of the metabolic glutamate receptors expressed in the central nervous system. Glutamate is known to be the most abundant excitatory neurotransmitter in the human nervous system. |
| OX1, OX2 | Orexin 1 Receptor, Orexin 2 Receptor | Orexins are a class of neuropeptides that are known to play a role in stabilizing wakefulness and inhibiting sleep. |
| GPR52 | G Protein-Coupled Receptor 52 | An orphan receptor that is highly expressed in the striatum- may play a role in the regulation of frontal lobe-striatal and limbic dopamine in psychiatric and neurological disorders. |
| H4 | Histamine H4 Receptor | H4 is particularly expressed in immune system cells and is known to be involved in inflammation and allergy. |
| EP4 | Prostaglandin EP4 Receptor | EP4 suppresses innate and acquired immunity and is known to induce tumor progression |
| PAR2 | Protease-Activated Receptor 2 | PAR2 is known to be associated with many physiological and pathophysiological processes such as inflammation, tumor metastasis, gastrointestinal motility, pain, and itching |
| SSTR5 | Somatostatin Receptor 5 | SSTR is expressed mainly on small intestinal endocrine cells and pancreatic beta cells, inhibits the secretion of gastrointestinal hormones such as GLP-1 and PYY by binding somatostatin. |
| GLP-2 | Glucagon-like Peptide 2 | Intestinal GLP-2 is secreted together with GLP-1 during nutrient intake, and repairs and protects the intestinal tract. |
| Mpro | SARS-CoV-2 Main Protease | An enzyme essential for the replication of Sars-CoV-2(COVID-19 cause virus). One of the target proteins for the development of antiviral drugs. |
| D2 | Dopamine Receptor D2 | Dopamine is a neurotransmitter in the brain involved in motor control, motivation, and learning - known to be associated with Parkinson's disease and schizophrenia. |
| 5-HT | 5-Hydroxytryptamine Receptor | 5-hydroxytryptamine (serotonin), as a transmitter in the central nervous system, is thought to play an important role in the regulation of brain function. |
| | Orphan receptor | A receptor whose existence is known based on genetic analysis, but for whom no ligand has been identified. |
| | Ligand | A ligand is a molecule that binds to a specific receptor in vivo, such as hormones, neurotransmitters. For example, the ligand for muscarinic receptors is acetylcholine. |

Locations

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