Q1 Topics (1/2)



As of April 24, 2025

Launched	Lunsumio	Relapsed or refractory follicular lymphoma after two or more prior standard therapies	March 2025 (Japan)
Approved	NEMLUVIO [®] (nemolizumab)*	Moderate-to-severe atopic dermatitis and prurigo nodularis	February 2025 (EU)
	Tecentriq	Alveolar soft part sarcoma	February 2025 (Japan)
	Vabysmo	Addition of dosage form (prefilled syringe)	March 2025 (Japan)
	Evrysdi	Addition of dosage form (tablet)	March 2025 (Japan)
Filed	CellCept	Refractory nephrotic syndrome (public knowledge-based application)	March 2025 (Japan)
	RAY121	- (Phase I)	March 2025
Initiation of Study	Enspryng	Duchenne muscular dystrophy (Phase II)	April 2025
	MINT91	Solid tumors (Phase I)	April 2025
	Anti-TL1A antibody/RG6631	Ulcerative colitis (Phase III)	April 2025

Orange: in-house projects (development in global) Blue: In-licensed from Roche (development and distribution in Japan) *Conducted by Galderma, a global licensee

Overview of Development Pipeline

Q1 Topics (2/2)



As of April 24, 2025

	orforglipron*	Phase III ACHIEVE-1 (Type 2 diabetes) : Primary endpoint was achieved	April 2025
Readout	Lunsumio	Phase III SUNMO study (r/r aggressive B-cell non-Hodgkin lymphoma) : Primary endpoint was achieved	April 2025
PoC confirmed	NXT007	Hemophilia A	February 2025
Removed from Pipeline	Avastin	Small cell lung cancer (1st line, BEAT-SC study) : development discontinued	
Medical	Vabysmo	Data from the domestic phase IIII NIHONBASHI study for angioid streaks	April 2025
Conference	ConferencetrontinemabData from the phase Ib/IIa Brainshuttle™ AD study for Alzheimer's disease		April 2025
Orphan Drug Designation	Tecentriq	Unresectable thymic carcinoma	March 2025

Orange: in-house projects (development in global) Blue: In-licensed from Roche (development and distribution in Japan) r/r: relapsed or refractory, PoC: Proof of Concept *Conducted by Eli Lilly and Company, a global licensee

2025: Key R&D Milestones



As of April 24, 2025

	Product Indication / Study name		Progress
Projects to be	delandistrogene moxeparvovec	Duchenne muscular dystrophy (ambulatory)	
Approved	Vabysmo	angioid streaks	
P3/Pivotal Readouts	PiaSky	COMMUTE-a study*: atypical hemolytic uremic syndrome(aHUS)	
	Lunsumio+Polivy	SUNMO study: r/r aggressive B-cell non-Hodgkin lymphoma	<u>Achieved PE</u>
	Lunsumio	CELESTIMO study: follicular lymphoma (2nd line)	
	giredestrant	persevERA study: HR positive breast cancer (1st line)	
	<u>vamikibart</u>	SANDCAT study: noninfectious uvetic macular edema (UME)	
	<u>GAZYVA</u>	INShore study: pediatric nephrotic syndrome	
	GYM329+Evrysdi	MANATEE study: spinal muscular atrophy (SMA)	
	GYM329	MANOEUVRE study: facioscapulohumeral muscular dystrophy (FSHD)	
P2 Readouts	NXT007	hemophilia A	<u>PoC confirmed /</u> Decision to proceed to <u>Phase III**</u>
P1/2 Readout	<u>trontinemab</u>	Brainshuttle™ AD study: Alzheimer's disease	<u>Decision to proceed to</u> <u>Phase III</u>
Initiation of study	GYM329	obesity (Phase II study)	

Orange: in-house projects (development in global) Blue: In-licensed from Roche (development and distribution in Japan *Adult/Adolescent patients, **Three phase 3 studies scheduled to initiate in 2026 (vs. FVIII products, vs. Hemlibra, and pediatric patients) r/r: relapsed or refractory, PE: primary endpoint, HR: hormone receptor, PoC: Proof of Concept

Underlined: Changes since January 30, 2025

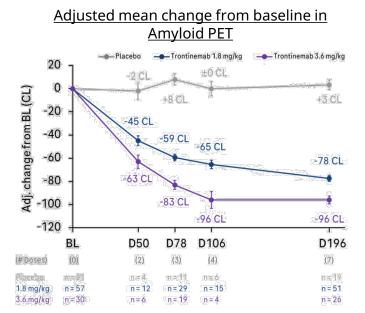
Overview of Development Pipeline

Trontinemab: Global Phase Ib/IIa Study in Participants with AD

Trontinemab is a novel Brainshuttle^{TM*} bispecific 2+1 mAb targeting amyloid-β (Aβ) that enables more rapid and deep reduction of brain Aβ levels compared to conventional antibodies, ^{IgG1Fc domain} while maintaining a favorable safety profile

Pharmacodynamics (Amyloid PET)

- Dose-dependent, extensive, rapid and substantial reduction in brain amyloid levels was confirmed at 1.8 mg/kg and 3.6 mg/kg
- At 3.6 mg/kg, 21 out of 26 cases (81%) achieved brain amyloid negativity (24 CL or below) by Week 28



 <u>Number and percentage of subjects who</u> <u>achieved brain amyloid negativity (24 CL</u> <u>or below)</u>					
Participants ≤24 CL (%)	1.8 mg/kg (Part 1+2)	3.6 mg/kg (Part 1+2)			
BL	0/61 (0%)	0/31 (0%)			
D50	1/12 (8%)	1/6 (17%)			
D78	12/29 (41%)	11/19 (58%)			
D106	4/15 (27%)	4/4 (100%)			
D196	33/51 (65%)	21/26 (81%)			

<u>Safety</u>1

- Trontinemab continues to show a favourable safety and tolerability profile
 - Low ARIA cases
 - Limited and transient anemia, manageable IRRs

module

	PART 1 + 2 (COMBINED) (n = 114)			
Total number of participants with event (%)	Cohort 3 1.8 mg/kg or Pbo (n = 76)	Cohort 4 3.6 mg/kg or Pbo (n = 38)		
ARIA-E	3 (3.9%)	0		
ARIA-H Microhemorrhage	5 (6.6%) 2 (2.6%)	1 (2.6%) 1 (2.6%)		
Superficial siderosis	3 (3.9%)	0		

1:Blinded safety data by dosing cohorts (cut-off date: November 2024). The study remains ongoing and blinded to individual treatment assignments (randomization active to placebo 4:1 in both Part 1 and 2). Participants

receiving trontinemab and placebo in a respective dose cohort are presented together by dosing cohort to avoid unblindingAD/PD:International Conference on Alzheimer's and Parkinson's Diseases and related neurological disorders, ARIA: amyloid-related imaging abnormalities, BL : baseline, CL : centiloid, D : Day, IRR: infusion-related reactions, Part1:Dose escalation part, Part2 : Dose expansion part

Source : AD/PD (April 1-5) presentation (Kulic L, et al.)

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Transferrin Receptor 1 _ (TfR1)

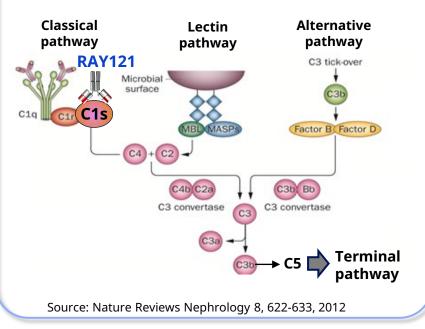
Transferrin

RAY121: Anti-Complement C1s Recycling Antibody



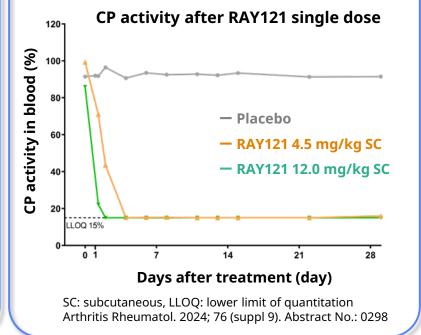
Product concept

- Selective binding to complement C1s and longlasting inhibition of classical complement pathway (CP) at low doses
- Expected to provide superior risk-benefit balance to C3/C5 inhibitors in CP driven diseases
- Simultaneous development for multiple indications to maximize the value



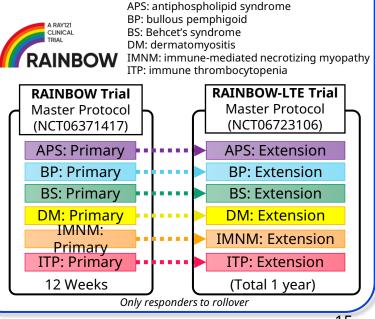
P1a healthy volunteer (HV) study results

- Confirmed sustained CP inhibition and favorable safety profile (serum T1/2 = 41 days)
- Aiming for monthly subcutaneous injection with autoinjector for self-administration to provide greater convenience



P1b basket study for six autoimmune diseases

- Ongoing patient enrollment in Japan, Europe, and U.S. to evaluate safety, PK/PD, and early efficacy of RAY121 (RAINBOW Trial)
- The subsequent RAINBOW-LTE trial provides opportunity for continued treatment while evaluating long-term safety and efficacy

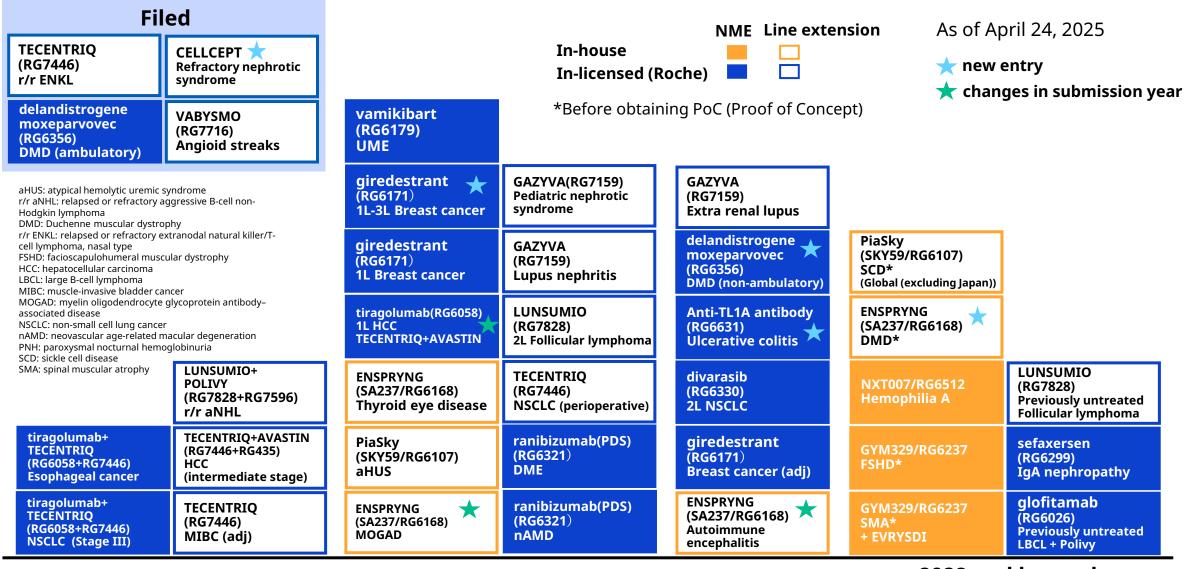


LTE: long-term extension

Overview of Development Pipeline

Projected Submissions (Post PoC NMEs and Products)





2025

2026

2027

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Projects under Development (1/2)

As of April 24, 2025

	Pha	ase I	Phase II	Phas	e III	Filed
Cancer	LUNA18 / paluratide - Solid tumors GC33 / codrituzumab - HCC STA551 - Solid tumors SOF10 (RG6440) - Solid tumors ALPS12 - Solid tumors SAIL66 - CLDN6 positive solid tumors ROSE12 - Solid tumors	<pre>MINT91 - Solid tumors ★ RG7421 / cobimetinib - Solid tumors RG6026 / glofitamab - Hematologic tumors RG6160 / cevostamab - r/r MM</pre>		AF802 (RG7853) / Alecensa - NSCLC(stage III)* RG7446 / Tecentriq - NSCLC (perioperative) - MIBC (adjuvant) - HCC (2L) RG7446 / Tecentriq +RG435 / Avastin - HCC (intermediate stage) RG6058 / tiragolumab +RG7446 / Tecentriq - NSCLC (stage III) - Esophageal cancer RG6058 / tiragolumab+RG7446 / Tecentriq+RG435 / Avastin - HCC (1L)	 RG6171 /giredestrant BC (adjuvant) BC(1L) BC(1L-3 L) RG7828 / Lunsumio Follicular lymphoma (2L) Previously untreated follicular lymphoma RG7828 / Lunsumio +RG7596 / Polivy r/r aNHL RG6026 / glofitamab +RG7596 / Polivy Previously untreated large B-cell lymphoma RG6330 / divarasib NSCLC (2L) 	RG7446 / Tecentriq - r/r ENKL
Immunology	DONQ52 - Celiac disease RAY121 - Autoimmune disease			RG7159 / Gazyva - Lupus nephritis - Pediatric nephrotic syndrome - Extra renal lupus	RG6299 / sefaxersen -IgA nephropathy RG6631 (Anti-TL1A antibody) - Ulcerative colitis★	CellCept - Refractory nephrotic syndrome★

Orange: in-house projects (development in global) Blue: In-licensed from Roche (development and distribution in Japan) *maintenance therapy after chemoradiation In principle, completion of first dose is regarded as pipeline entry into each phase of clinical studies. *: Projects with advances in stages since January 30, 2025 aNHL: aggressive B-cell non-Hodgkin lymphoma, BC: breast cancer, ENKL: refractory extranodal natural killer/T-cell lymphoma, nasal type, HCC: hepatocellular carcinoma, MIBC: muscle-invasive bladder cancer, MM: multiple myeloma, NSCLC: non-small cell lung cancer, r/r: relapsed or refractory



Projects under Development (2/2)



As of April 24, 2025

	Phase I		Phase II	Phas	e III	Filed
Neurology	RG7935 / prasinezumab - Parkinson's disease RG6102/trontinemab -Alzheimer's disease (PI/II)		GYM329 (RG6237) - SMA (combination with Evrysdi) (PII/III) - FSHD SA237 (RG6168) - DMD ★ RG6042 / tominersen - Huntington's disease	SA237 (RG6168) / Enspryng - MOGAD - AIE	RG6356 / delandistrogene moxeparvovec - DMD*(non-ambulatory)	RG6356 / delandistrogene moxeparvovec - DMD*(ambulatory)
Hematology			SKY59 (RG6107)/ PiaSky(Global (excluding Japan)) - SCD NXT007 (RG6512) - Hemophilia A (PI/II)	SKY59 (RG6107)/ PiaSky - aHUS		
Ophthal mology	RG6321 / PDS - nAMD (PI/II) - DME (PI/II)			SA237 (RG6168) / Enspryng - TED	RG6179 / vamikibart - UME	RG7716 / Vabysmo - Angioid streaks
Other	REVN24 - Acute diseases GYM329 (RG6237) - Obesity BRY10 - Chronic diseases	RAY121★ - (Not disclosed) RG6615 / zilebesiran - Hypertension (PI/II)	AMY109 - Endometriosis			

Orange: in-house projects (development in global) Blue: In-licensed from Roche (development and distribution in Japan) *Sarepta manages the global study, including Japan. *: Projects with advances in stages since January 30, 2025 In principle, completion of first dose is regarded as pipeline entry into each phase of clinical studies aHUS: atypical hemolytic uremic syndrome, AIE: autoimmune encephalitis, DMD: Duchenne muscular dystrophy, DME: diabetic macular edema, FSHD: facioscapulohumeral muscular dystrophy, MOGAD: myelin oligodendrocyte glycoprotein antibody-associated disease, nAMD: neovascular age-related macular degeneration, SCD: sickle cell disease, SMA: spinal muscular atrophy, TED: thyroid eye disease, UME: uvetic macular edema

Advances in Major Chugai Originated Projects Out-Licensed to 3rd Parties (1/2)



As of April 24, 2025

Generic name/ Development code	Mode of Action	Licensee	Granted rights to licensee	Indication	Stage	Progress		
			exclusive global license for the	license for the	KRAS-mutated recurrent low-grade serous ovarian cancer (LGSOC)	Global: P3 US: Under FDA review	 U.S. FDA BTD (recurrent LGSOC in combination with defactinib) U.S. orphan drug designation (avutometinib in combination with defactinib in recurrent LGSOC) RAMP301 trial (P3) ongoing globally NDA was accepted under the accelerated approval pathway by the U.S. FDA in Dec 2024 (recurrent KRAS mutant LGSOC at least one prior line of systemic therapy in combination with defactinib) Priority review was designated with a Prescription Drug User Fee Act (PDUFA) action date of June 30, 2025 	
avutometinib	RAF/MEK	Verastem						
/VS-6766	clamp	Oncology	manufacturing, development and marketing	KRAS G12C advanced non-small cell lung cancer (NSCLC)	Global/ U.S. : P1/2	 RAMP 203 trial (P1/2 in combination with KRAS G12C inhibitor sotorasib with or without defactinib) ongoing globally U.S. FDA fast track designation of avutometinib in combination with sotorasib U.S. FDA fast track designation for the combination of avutometinib plus defactinib with sotorasib 		
				First-line metastatic pancreatic ductal adenocarcinoma (mPDAC)	US: P1/2	 RAMP 205 trial (P1/2 evaluating avutometinib and defactinib in combination with gemcitabine and nab-paclitaxel) ongoing 		

Advances in Major Chugai Originated Projects Out-Licensed to 3rd Parties (2/2)

Generic name/ Development code	Mode of Action	Licensee	Granted rights to licensee	Indication	Stage	Progress
	molizumab Anti-IL-31 receptor A humanized monoclonal antibody Galderma		Exclusive global license for the	Atopic dermatitis	Global: Approved (EU) ★	 FDA BLA / EMA MAA accepted in Feb 2024 Obtained U.S. FDA approval in Dec 2024 Obtained EMA approval in Feb 2025 *
nemolizumab		development and marketing excluding Japan and Taiwan	Prurigo nodularis	Global: Approved (EU) ★	 FDA BLA / EMA MAA accepted in Feb 2024 (FDA priority review designation for prurigo nodularis) Obtained U.S. FDA approval in Aug 2024 Obtained EMA approval in Feb 2025 * 	
<i>c</i>	Oral non-		Worldwide development and commercialization rights	Type 2 diabetes	Р3	• Phase 3 (ACHIEVE-1): orforglipron demonstrated HbA1c reduction by an average of 1.3% to 1.6% and a 7.9% weight reduction at the highest dose at 40 weeks. A safety profile was consistent with injectable GLP-1 medicines *
orforglipron /LY3502970	pron pepulaic GLP- and	and		Obesity	Р3	 Phase 2 study: orforglipron demonstrated up to a 14.7% weight reduction at 36 weeks. The results were published in the New England Journal of Medicine*
				Obstructive sleep apnea ★	Р3	 Initiated a phase 3 study in Q4 2024 *
-/AP306	06 Of phosphate Alebund	Exclusive global license for the manufacturing,	Hyperphospha	China: P2	• In a phase 2 study, AP306 showed a clinically significant reduction in serum phosphorus levels at the end of treatment compared to baseline	
(FOS789)	transporters		development and marketing	temia		• AP306 is granted China Breakthrough Therapy Designation for the treatment of hyperphosphatemia in patients with chronic kidney disease

* Sean W, et al. Daily Oral GLP-1 Receptor Agonist Orforglipron for Adults with Obesity. *NEJM* 2023.



As of April 24, 2025

FoundationOne CDx Cancer Genomic Profile -Companion diagnostic indications-



As of April 24, 2025

Alterations	Cancer type	Relevant drugs
Activating EGFR alterations		afatinib maleate, erlotinib hydrochloride, gefitinib, osimertinib mesilate, dacomitinib hydrate
EGFR exon 20 T790M alteration	Non-small cell	osimertinib mesilate
ALK fusion genes	lung cancer (NSCLC)	alectinib hydrochloride, crizotinib, ceritinib, brigatinib
ROS1 fusion genes	(1100220)	Entrectinib
MET exon 14 skipping alterations		capmatinib hydrochloride hydrate
BRAF V600E and V600K alterations	Malignant melanoma	dabrafenib mesylate, trametinib dimethyl sulfoxide, vemurafenib, encorafenib, binimetinib
<i>ERBB2</i> 2 copy number alterations (HER2 gene amplification positive)		trastuzumab (genetical recombination)
AKT1 alterations	вс	capivasertib
PIK3CA alterations		
PTEN alterations		
KRAS/NRAS wild type	CRC	cetuximab (genetical recombination), panitumumab (genetical recombination)
Microsatellite Instability-High		nivolumab (genetical recombination)
Microsatellite Instability-High		pembrolizumab (genetical recombination)
Tumor Mutational Burden-High	Colid turn ora	pembrolizumab (genetical recombination)
<i>NTRK1/2/3</i> fusion genes	Solid tumors	entrectinib, larotrectinib sulfate, <u>repotrectinib</u>
<i>RET</i> fusion genes		selpercatinib
BRCA1/2 alterations	Ovarian cancer	olaparib
BRCA1/2 alterations	Prostate cancer	olaparib, talazoparib tosilate
FGFR2 fusion genes	Biliary tract cancer	pemigatinib

* Underlined are the companion diagnostic features and relevant drugs currently under application for regulatory approval

FoundationOne Liquid CDx Cancer Genomic Profile

-Companion diagnostic indications-

As of April 24, 2025

Alterations	Cancer type	Relevant drugs
Activating EGFR alterations		afatinib maleate, erlotinib hydrochloride, gefitinib, osimertinib mesilate
EGFR exon 20 T790M alteration	Non-small cell lung cancer (NSCLC)	osimertinib mesilate
ALK fusion genes		alectinib hydrochloride, crizotinib, ceritinib
ROS1 fusion genes		entrectinib
MET exon14 skipping alterations		capmatinib hydrochloride hydrate
NTRK1/2/3 fusion genes	Solid tumors	entrectinib
BRCA1/2 alterations	Prostate cancer	olaparib

