



GCFF Healthcare Virtual Conference (Asia Pacific)

GCFF医疗保健线上会议（亚太专场）

November 2023 / 2023年11月

Forward Looking Statements

Except for the historical information discussed today and contained herein, the matters discussed today and set forth in this presentation are forward-looking statements within the meaning of the “safe harbor” provisions of the Private Securities Litigation Reform Act of 1995, including, but not limited to, statements regarding our ability to launch multiple products and obtain new product approvals in the future as planned; our ability to successfully close on a transaction to acquire commercial rights to a biosimilar candidate to Eylea® at any time; our projections for growing cash flows and revenues; our ability to become a partner of choice using toripalimab and our other products and product candidates; our ability to gain market share, revenue growth, demand growth or expand payer coverage in any of the markets for our products and product candidates; expectations for any of our products and product candidates becoming a new standard of care for any indication; expectations about market potential or opportunity in the future; our ability to realize synergies between the launch of LOQTORZI™ and our existing UDENYCA® team or to realize any other synergies in the future; our expectations about our products and product candidates extending patient survival, including through novel combinations; our expectations about filing an IND for CHS-1000 in 2024 or at all; our expectations about Casdozokitug being a fit in combination trials with toripalimab for lung cancer or any other indication; our expectations about the success of any of our products and product candidates in clinical trials in combination with others; and expectations about the size of the market or addressable market for any of our products and product candidates. Such forward-looking statements involve substantial risks and uncertainties that could cause Coherus’ actual results, performance or achievements to differ significantly from any future results, performance or achievements expressed or implied by the forward-looking statements. Such risks and uncertainties include, among others, the risks and uncertainties caused by our transition from a biosimilar focused company to an innovative immuno-oncology franchise funded by sales from FDA-approved therapeutics; the risks and uncertainties of the integration of our acquisition of Surface Oncology, Inc.; the risks and uncertainties inherent with clinical research and commercialization; the risks and uncertainties of the clinical development and regulatory approval process, including (but not limited to) the timing of Coherus’ regulatory filings; the risk that Coherus is unable to complete commercial transactions; risks and uncertainties in executing collaboration agreements and other joint ventures, including particular risks of working with international partners; and the risks and uncertainties of litigation. All forward-looking statements contained in this press release speak only as of the date on which they were made. Coherus undertakes no obligation to update or revise any forward-looking statements. For a further description of the risks and uncertainties that could cause actual results to differ from those expressed in these forward-looking statements, as well as risks relating to Coherus’ business in general, see Coherus’ Quarterly Report on Form 10-Q for the fiscal quarter ended September 30, 2023, filed with the Securities and Exchange Commission on November 6, 2023, including the section therein captioned “Risk Factors,” and in other documents Coherus files with the Securities and Exchange Commission. UDENYCA®, YUSIMRY™, CIMERLI® and LOQTORZI™, whether or not appearing in large print or with the trademark symbol, are trademarks of Coherus, its affiliates, related companies or its licensors or joint venture partners, unless otherwise noted. Trademarks and trade names of other companies appearing in this presentation are, to the knowledge of Coherus, the property of their respective owners.

前瞻性声明

除今天讨论的历史信息外，本演示文稿中讨论的事项属于1995年《私人证券诉讼改革法案》（Private Securities Litigation Reform Act of 1995）中“安全港”条款所指的前瞻性陈述，包括但不限于有关我们未来按计划推出多种产品和获得新产品批准的能力、我们随时成功完成收购Eylea®生物仿制药候选产品商业权利的交易的能力、我们对现金流和收入增长的预测、我们成为使用托瑞帕利单抗和其他产品及候选产品的首选合作伙伴的能力、我们获得市场份额、收入增长、需求增长或扩大付款人覆盖范围的能力、我们的产品和候选产品在任何市场上获得市场份额、收入增长、需求增长或扩大付款人覆盖范围的能力、我们的产品和候选产品在任何市场上获得市场份额、收入增长、需求增长或扩大付款人覆盖范围的能力等陈述；我们成为使用托瑞帕利单抗及我们的其他产品和候选产品的首选合作伙伴的能力；我们在我们的产品和候选产品的任何市场中获得市场份额、收入增长、需求增长或扩大支付方覆盖范围的能力；我们的任何产品和候选产品成为任何适应症的新治疗标准的预期；对未来市场潜力或机会的预期；我们在推出LOQTORZI™和我们现有的UDENYCA®团队之间实现协同效应或在未来实现任何其他协同效应的能力。我们对我们的产品和候选产品延长患者生存期（包括通过新型组合）的预期；我们对 CHS-1000 在 2024 年或根本不会申请 IND 的预期；我们对 Casdozokitug 与托利帕利单抗联合治疗肺癌或任何其他适应症的预期；我们对我们的任何产品和候选产品在与其它产品联合进行的临床试验中取得成功的预期；以及我们对任何产品和候选产品的市场规模或可解决市场的预期。此类前瞻性声明涉及重大风险和不确定性，可能导致Coherus的实际结果、业绩或成就与前瞻性声明明示或暗示的任何未来结果、业绩或成就大相径庭。这些风险和不确定性包括：我们从一家专注于生物仿制药的公司转型为一家创新型免疫肿瘤专营公司所带来的风险和不确定性；我们收购 Surface Oncology, Inc.整合过程中的风险和不确定性；临床研究和商业化过程中固有的风险和不确定性；临床开发和监管审批过程中的风险和不确定性，包括（但不限于）Coherus 向监管机构提交申请的时间；Coherus 无法完成商业交易的风险；执行合作协议和其他合资企业的风险和不确定性，包括与国际合作伙伴合作的特殊风险；以及诉讼的风险和不确定性。本新闻稿中包含的所有前瞻性陈述仅适用于发布当日。Coherus不承担更新或修改任何前瞻性声明的义务。有关可能导致实际结果与这些前瞻性声明中表述的结果不同的风险和不确定性的进一步描述，以及与Coherus业务总体相关的风险，请参阅Coherus于2023年11月6日向美国证券交易委员会提交的截至2023年9月30日的10-Q表季报，包括其中标题为“风险因素”的部分，以及Coherus向美国证券交易委员会提交的其他文件。除非另有说明，UDENYCA®、YUSIMRY™、CIMERLI® 和 LOQTORZI™，无论是否以大数据体或商标符号出现，均为 Coherus、其关联公司、相关公司或其许可方或合资伙伴的商标。就 Coherus 所知，本演示文稿中出现的其他公司的商标和商号是其各自所有者的财产。

Introduction to Coherus, an Immuno-Oncology Company / Coherus公司介绍，一家免疫肿瘤公司

Coherus (Nasdaq: CHRS) is focused on developing and commercializing a diversified portfolio of next-generation immuno-oncology therapies and combinations that potentially extend patient survival across tumor types. / Coherus (Nasdaq: CHRS)专注于开发和商业化下一代免疫肿瘤疗法及组合的多样化产品组合，这些产品组合有可能延长多种肿瘤患者的生存期

The recent U.S. FDA approval of LOQTORZI (toripalimab-tpzi) for nasopharyngeal carcinoma, and multiple clinical-stage immuno-oncology candidates targeting the tumor microenvironment, underscore our deep commitment to innovation in immuno-oncology while the established infrastructure of our biosimilars business enables better treatment options, access, and outcomes for patients with life-altering diseases. / 我们的LOQTORZI (toripalimab-tpzi) 最近获得美国食品药品监督管理局批准用于鼻咽癌治疗。公司还有针对肿瘤微环境的多个处于临床阶段的免疫肿瘤候选药物。这表明了 我们致力于在免疫肿瘤学领域创新，我们的生物仿制药业务的成熟基础架构则为改变生命的疾病患者提供了更好的治疗选择、途径和结果

Coherus is headquartered in California. Learn about our pipeline and programs at coherus.com / Coherus的总部位于加利福尼亚州。可登录网站coherus.com了解我们的管线和项目的更多信息

Combined I-O Pipeline with Near-Term Catalysts in 2023-2024

/ 2023年-2024年有近期催化剂的免疫肿瘤管线

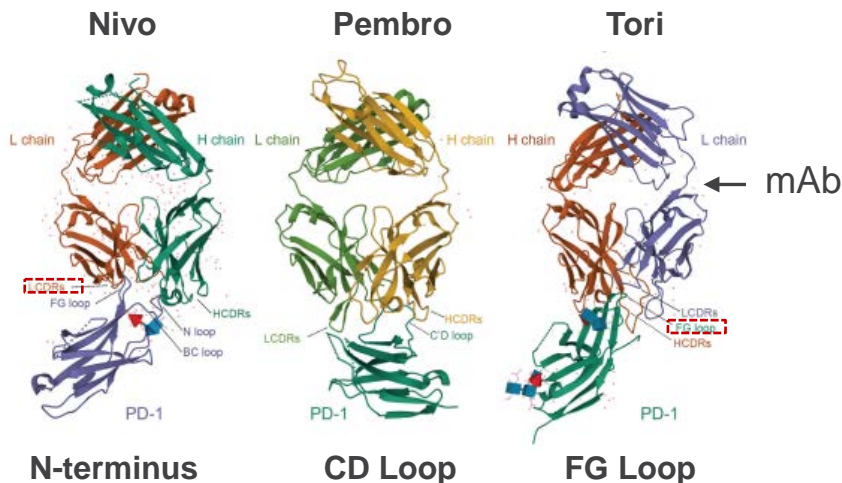
Innovative Immuno-Oncology Pipeline / 创新的免疫肿瘤管线

Candidate / 候选药物	Target / 靶点	Proposed Indication / 计划的适应症	Preclinical / 临床前	Phase 1 / 一期	Phase 2 / 二期	Pivotal Clinical Trials / 关键临床试验	Near-Term Catalysts / 近期催化剂
TORIPALIMAB*	PD-1	Nasopharyngeal Carcinoma / 鼻咽癌 (1L combo with chemo / 与化疗联用) Nasopharyngeal Carcinoma / 鼻咽癌 (2L/3L monotherapy / 单药治疗)					FDA Approved in NPC / FDA批准治疗鼻咽癌 Q4 2023 / 2023年第四季度
Casdozokitug	IL-27	Hepatocellular Carcinoma / 肝癌 Non-Small Cell Lung Cancer / 非小细胞肺癌					HCC Triplet Combo Data – Q1 2024 / HCC三联用数据 – 2024年第一季度 NSCLC Monotherapy Data / 非小细胞肺癌单药治疗数据 Q4 2023 / 2023年第四季度
CHS-006*	TIGIT	Solid Tumors / 实体瘤 Dose Exploration only / 仅探索剂量 Expansion phase gated / 扩张期控制					Enrollment Complete in Initial Cohort / 初始组招募完成
CHS-114	CCR8	Solid Tumors including Head & Neck Cancer / 实体瘤, 包括头颈癌					CHS-114 Phase 1 Data – H1 2024 / CHS-114一期数据 – 2024年上半年
CHS-1000	ILT4	Solid Tumors / 实体瘤 (in combination with toripalimab / 与toripalimab联用)					IND Filing Q1 2024 / 2024年第一季度提交IND

Unique Epitope and Mechanism of Action: / 独特表位和作用机制:

LOQTORZI, a next-generation anti-PD-1, binds a unique epitope with high affinity / Toripalimab 是一种新一代抗 PD-1, 能以高亲和力结合独特的表位

1 LOQTORZI Binds a Unique Epitope on PD-1 / LOQTORZI在PD-1上结合独特表位¹



2 LOQTORZI has Shown to Have High Affinity / LOQTORZI已经显示出很高的亲和力

Antibody / 抗体	K _D (nM)	Epitope / 表位
Toripalimab ²	0.3	FG loop
Pembrolizumab ³	3.9	CD loop
Nivolumab ³	7.2	N-terminus

- Toripalimab optimized during discovery with potency and unique CDR sequences and epitope / Toripalimab在研发过程中通过药效、独特的 CDR 序列和表位进行了优化

LOQTORZI™ FDA-Approved October 27th / 10月27日FDA批准LOQTORZI™

First and Only FDA-Approved Therapy for Nasopharyngeal Carcinoma (NPC) / 首个且唯一一个获得 FDA 批准的鼻咽癌 (NPC) 疗法

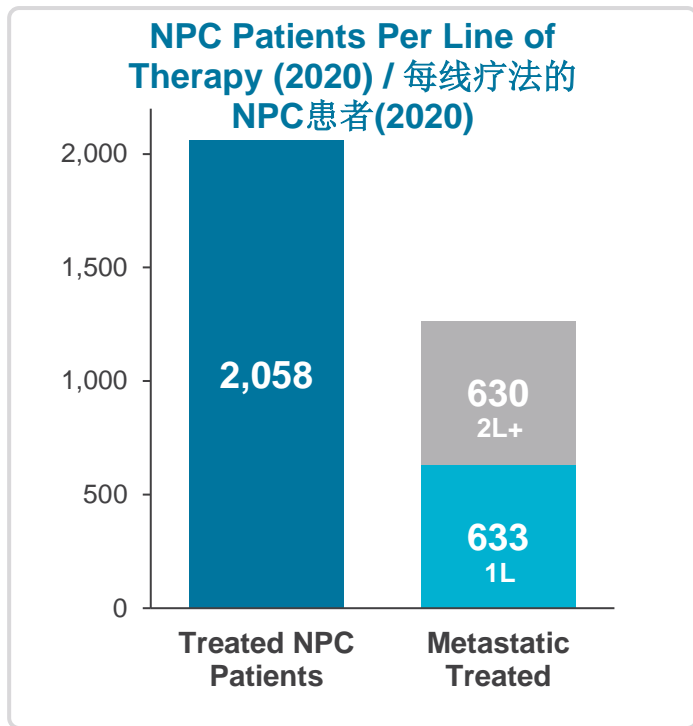


First and only FDA-approved therapy for R/M NPC / 首个且唯一一个获得 FDA 批准的R/M NPC疗法

- Approved in ALL lines of therapy for R/M NPC / 获准用于R/M NPC的所有治疗方案
- Indicated in combination with chemotherapy for 1st line treatment and as monotherapy in 2L+ for patients with disease progression on or after platinum containing chemotherapy, irrespective of PD-L1 status / 适用于与化疗联合进行一线治疗，以及作为 2L+ 的单药治疗，用于接受含铂化疗或化疗后疾病进展的患者，与 PD-L1 状态无关
- JUPITER-02 achieved significant PFS and OS outcomes / JUPITER-02取得了显著的PFS和OS结果
- Potential to become the new standard of care for R/M NPC / 有望成为R/M NPC的新治疗标准
- Launch planned for early Q1 2024 / 2024年第一季度初计划启动



Nasopharyngeal Carcinoma is a Rare Head & Neck Cancer / 鼻咽癌是一种罕见的头颈癌



LOQTORZI™ + Chemo has the Potential to Become the New Standard of Care for First-Line Treatment / LOQTORZI™ +化疗有望成为一线疗法的新标准

High Burden of Disease / 疾病负担高

- 0.5-2 cases per 100,000 annual incidence in the U.S. / 美国年发病率为每 10 万人 0.5-2 例
- Median average 5-year survival rate of 20% in R/M NPC / R/M NPC 的平均 5 年存活率中位数为20%

First and only FDA-approved therapy for NPC / 首个且唯一一个获得 FDA 批准的NPC疗法

- Currently 60% of NPC patients are prescribed chemo-only regimens / 目前, 60% 的鼻咽癌患者只接受化疗方案
- Adding LOQTORZI™ to 1L chemotherapy significantly improved overall survival in pivotal study (JUPITER-02) / 在关键研究中, 将LOQTORZI™加入1L化疗可显著提高总体生存率 (JUPITER-02)

Market Potential / 市场潜力

- Up to \$200M Projected Opportunity by 2027 (across 1L and 2L+) / 到2027年预期最高\$2亿多的机会 (1L和2L+)

Sources: 1. DRG and Cancer.net; 2. Coherus Internal Research; Note: Patient incidence based on internal research & forecast as of 12/03/21 / 来源: 1. DRG 和Cancer.net; 2. Coherus内部研究; 注: 基于内部研究和预测的患者发病率, 截止2021年12月3日

Toripalimab has Demonstrated Compelling NPC Treatment Effect / Toripalimab已经展示出令人信服的NPC治疗效果

Final overall survival data presented at ASCO 2023 / 在2023年ASCO大会上公布最终总生存率数据

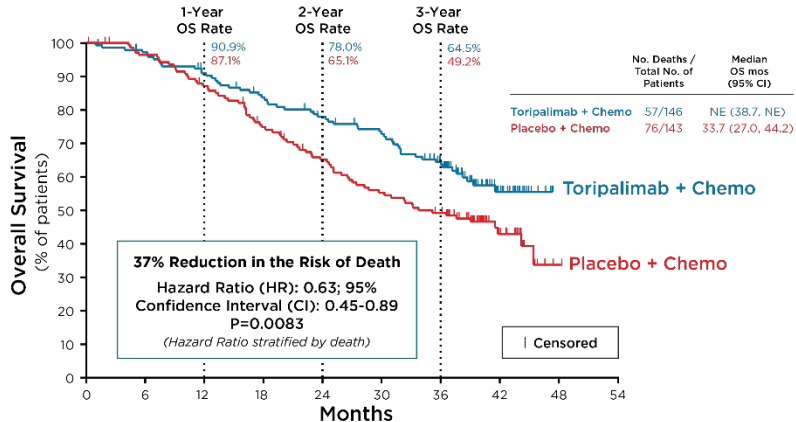
External Scientific Validation / 外部科学证实



2021 ASCO
ANNUAL MEETING
Featured at plenary session /
全体会议上专题报告

JUPITER-02 Final Overall Survival Analysis in Intent-To-Treat Population

Data cut-off date: Nov 18, 2022



No. at Risk	0	6	12	18	24	30	36	42	48	54
Toripalimab + Chemo	146	139	128	116	106	97	79	25	0	0
Placebo + Chemo	143	135	121	102	86	73	64	21	1	0

CI - Confidence interval; NE - Not evaluable; ITT - intent to treat; OS - Overall survival; RCT - Randomized controlled trial; R/M-NPC - Recurrent or metastatic NPC

Toripalimab plus chemotherapy resulted in a **37% reduction in the risk of death**, HR=0.63, versus chemotherapy alone / 与单用化疗相比, Toripalimab加上化疗可令死亡风险降低37%, HR=0.63

Demonstrated Efficacy in NPC¹ / 展示治疗NPC的效果¹

- mPFS 21.4 vs 8.2 months, HR=0.52 (95%CI: 0.37-0.73), p=0.0001
- mOS not yet reached vs 33.7 months for placebo, / mOS尚未达到 vs 安慰剂33.7月 HR=0.63 (95% CI: 0.45, 0.89), P=0.0083
- No unanticipated safety signals / 没有意外的安全信号

Source: / 来源: 1. Mai, HQ., Journal of Clinical Oncology 41, no. 16_suppl (June 01, 2023) 6009-6009.; 2. Mai, HQ., Chen, QY., Chen, D. et al. Toripalimab or placebo plus chemotherapy as first-line treatment in advanced nasopharyngeal carcinoma: a multicenter randomized phase 3 trial. *Nat Med* 27, 1536-1543 (2021). <https://doi.org/10.1038/s41591-021-01444-0>

Commercial Launch Activities for LOQTORZI Have Commenced / LOQTORZI的商业启动活动已经开始

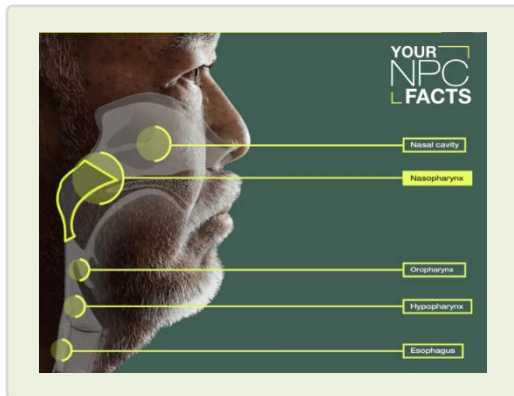


Fully Synergistic with Current UDENYCA team / 与当前的 UDENYCA团队完全协同

- Sales team trained and making calls; / 销售团队培训和打电话： 2,200 Oncs = 80% of Rx's
- >100 NPC KOLs reached within 2 days of approval / 在批准两天内联系了100多个NPC KOL
- Payer engagement underway to gain coverage / 正在与付款方沟通，获得覆盖
- LOQTORZI Solutions goes live mid-November / LOQTORZI解决方案11月中旬上线

Building and Mobilizing an NPC Patient Community / 建立和动员一个NPC患者群体

- NPCFacts.com was created to be a primary source of disease state information for doctors and patients / 创建 NPCFacts.com 的目的是为医生和患者提供疾病状态信息的主要来源
- 2,100 NPC patients or caregivers have opted-in to our community and are receiving content most important to the patient at each stage of their patient journey / 2,100 名 NPC患者或护理人员选择加入我们的群体，并在患者旅程的每个阶段接收对患者最重要的内容



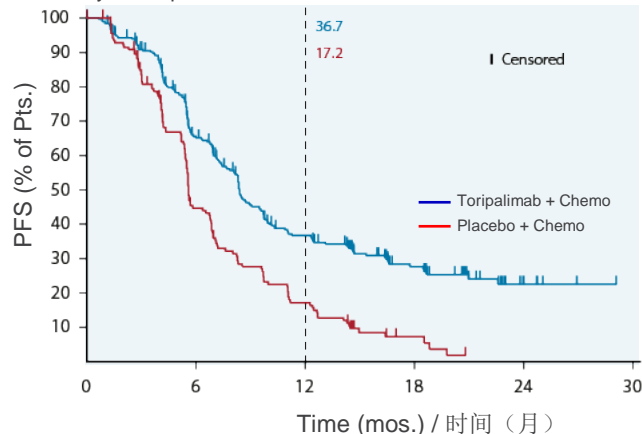
Phase 3 Trial as First-Line Treatment for Advanced NSCLC (CHOICE-01): Final PFS Analysis and Interim OS Analysis / 作为晚期 NSCLC 一线疗法的 3 期试验 (CHOICE-01) : 最终 PFS 分析和中期 OS 分析

External Scientific Validation / 外部科学证实



Progression-Free Survival / 无进展生存期

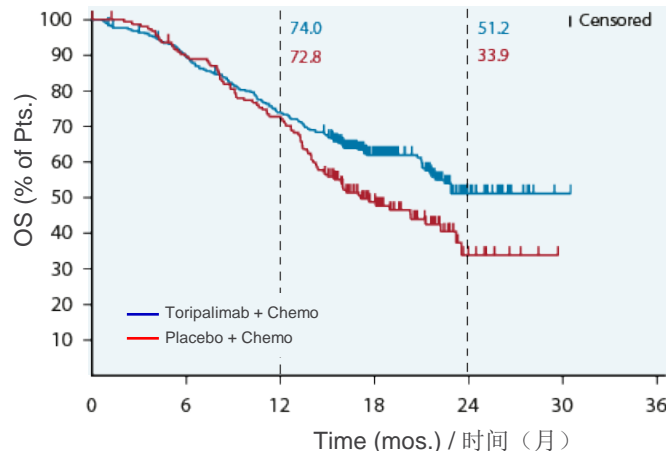
by BIRC per RECIST v1.1



Stratified HR for disease progression or death: / 疾病进展或死亡的分层 HR: 0.49 (95% CI 0.39-0.61) 2-sided $P < 0.0001$

Overall Survival / 总生存期

Data Cut-off: October 31, 2021 / 数据截止: 2021年10月31日



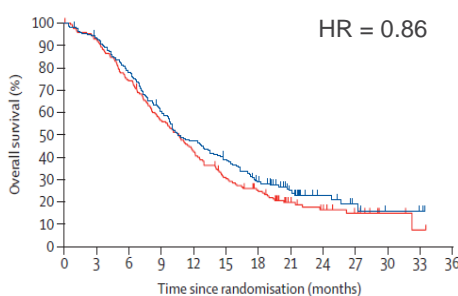
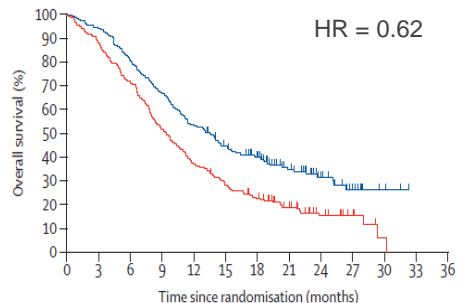
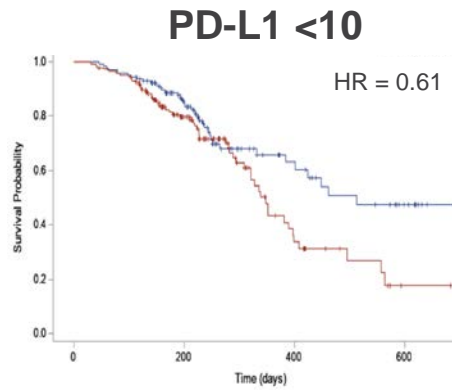
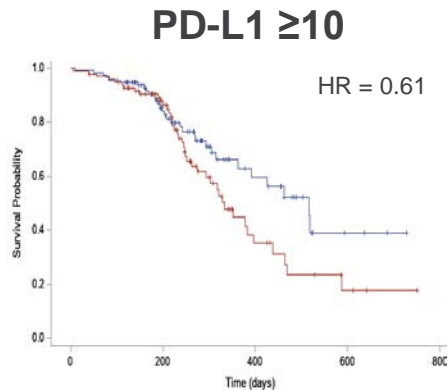
Stratified HR for death, 0.69 (95% CI 0.52-0.92) 2-sided $P = 0.0099$ Crossed the boundary of 0.0245

Source: Toripalimab Plus Chemotherapy for Patients With Treatment-Naive Advanced Non-Small-Cell Lung Cancer: A Multicenter Randomized Phase III Trial (CHOICE-01) Journal of Clinical Oncology 41, no. 3 (January 20, 2023) 651-663. / 来源: Toripalimab联合化疗治疗对治疗无效的晚期非小细胞肺癌患者: 多中心、随机三期试验(CHOICE-01), 《中国癌症杂志41》, no. 3 (2023年1月20日) 651-663

Toripalimab with Chemotherapy in Esophageal Carcinoma Demonstrates Efficacy Independent of PD-L1 Expression / Toripalimab与化疗联合治疗食管癌显示出与PD-L1表达无关的疗效

Toripalimab

JUPITER-06¹
Overall Survival /
总生存期



Toripalimab in Combination with Chemotherapy also Demonstrated an Improvement in PFS and OS Over Placebo Across all PD-L1 Expression Levels for NPC³ and NSCLC⁴ Phase 3 Studies / 在NPC³和NSCLC⁴的3期研究中，Toripalimab与化疗的联合治疗在所有PD-L1表达水平下的PFS和OS均优于安慰剂

Pembrolizumab

KEYNOTE-590²
Overall Survival / 总生存期

1. Shun Yamamoto, Ken Kato, JUPITER-06 establishes immune checkpoint inhibitors as essential first-line drugs for the treatment of advanced esophageal squamous cell carcinoma, *Cancer Cell*, Volume 40, Issue 3, 2022, Pages 238-240, ISSN 1535-6108, <https://doi.org/10.1016/j.ccell.2022.02.009>; 2. Pembrolizumab Jong-Mu Sun, Pembrolizumab plus chemotherapy versus chemotherapy alone for first-line treatment of advanced oesophageal cancer (KEYNOTE-590): A randomized, placebo-controlled phase 3 study. *The Lancet*, Vol 398, August 28, 2021.; 3. Mai, HQ., Chen, QY., Chen, D. et al. Toripalimab or placebo plus chemotherapy as first-line treatment in advanced nasopharyngeal carcinoma: a multicenter randomized phase 3 trial. *Nat Med* 27, 1536–1543 (2021); 4. Toripalimab Plus Chemotherapy for Patients With Treatment-Naive Advanced Non–Small-Cell Lung Cancer: A Multicenter Randomized Phase III Trial (CHOICE-01), *Journal of Clinical Oncology* October 2022, DOI: 10.1200/JCO.22.00727.

Toripalimab Pivotal Development Program / Toripalimab 关键开发活动

Adj / Neoadj

HCC Adjuvant CT16 / JUPITER-04 P3 Mono vs placebo / 单药vs安慰剂
NSCLC Neoadjuvant CT29 / NEOTORCH / JUPITER-09 P3 Mono vs placebo / 单药vs安慰剂
ESCC Neoadjuvant CT42 / JUPITER-14 Combo vs chemo / 联合用药vs化疗
Gastric Adj CT45 Combo vs chemo / 联合用药vs化疗
Cervical Adj CT49 Combo vs chemo / 联合用药vs化疗

1st-Line / 一线

NSCLC EGFR(-) CT19 / CHOICE-01 P3 Chemo combo vs chemo / 化疗联合用药vs化疗	Melanoma CT17 / JUPITER-01 P3 Mono vs dacarbazine / 单药vs dacarbazine
NSCLC EGFR(+) CT25 / JUPITER-07 P3 Chemo combo vs chemo / 化疗联合用药vs化疗	NPC CT15 / JUPITER-02 P3 Chemo combo vs chemo / 化疗联合用药vs化疗
TNBC CT26 JUPITER-05 P3 Chemo combo vs chemo / 化疗联合用药vs化疗	CT21 / ESCC JUPITER-06 P3 Chemo combo vs chemo / 化疗联合用药vs化疗
SCLC CT28 / JUPITER-08 P3 Chemo combo vs chemo / 化疗联合用药vs化疗	HCC CT-35 / JUPITER-10 P3 Combo w bevacizumab vs sorafenib / 与bevacizumab联合 用药vs sorafenib
RCC CT36 JUPITER-12 P3 Combo w axitinib vs sunitinib / 与axitinib 联合用药 vs sunitinib	HCC CT27 / JUPITER-11 P3 Combo w lenvatinib vs Lenvatinib / 与lenvatinib联合用药 vs Lenvatinib
UC PD-L1+ CT-8 Chemo combo vs chemo / 化疗联合用药vs化疗	Mucosal Melanoma P3 CT43 Combo with axitinib vs pembrolizumab / 与 Axitinib联合用药 vs pembrolizumab
IHCC CT39 Combo vs lenvatinib / 联合用药vs lenvatinib	

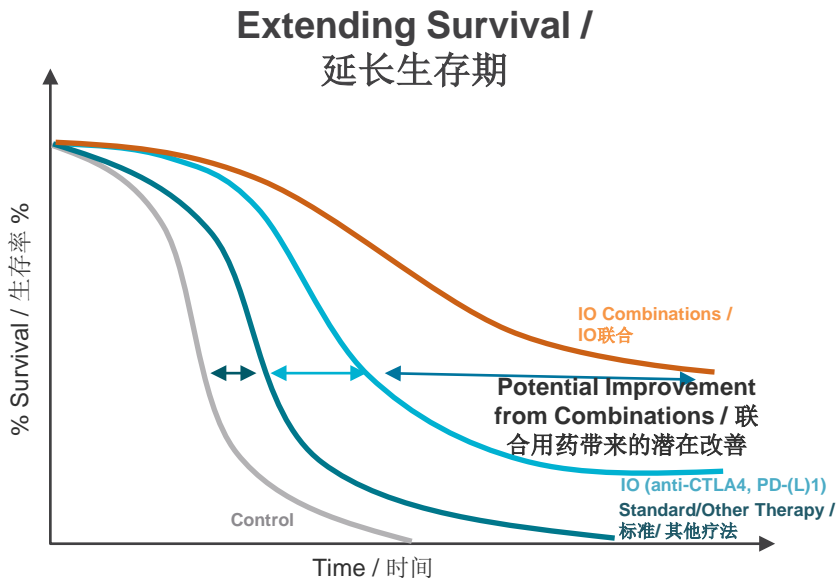
≥ 2nd Line / 二线 (P2)

Melanoma CT4 POLARIS01 P2 Mono single arm / 单药单臂
NPC CT5 POLARIS02 P2 Mono single arm / 单药单臂
UC CT12 POLARIS03 P2 Mono single arm / 单药单臂
GC CT-3 POLARIS04 P2 Mono single arm / 单药单臂

- Published P3 datasets / 已发布P3数据
- Tori + TKI
- MAA under review in EU / 在欧盟进行MAA评估 (Junshi)
- Potential to file in EU near term / 有望近期在欧盟提交

Extending Patient Survival Through Toripalimab Combinations / 通过Toripalimab联合用药延长患者生存期

Competitive Clinical Stage Pipeline / 有竞争力的临床阶段管线



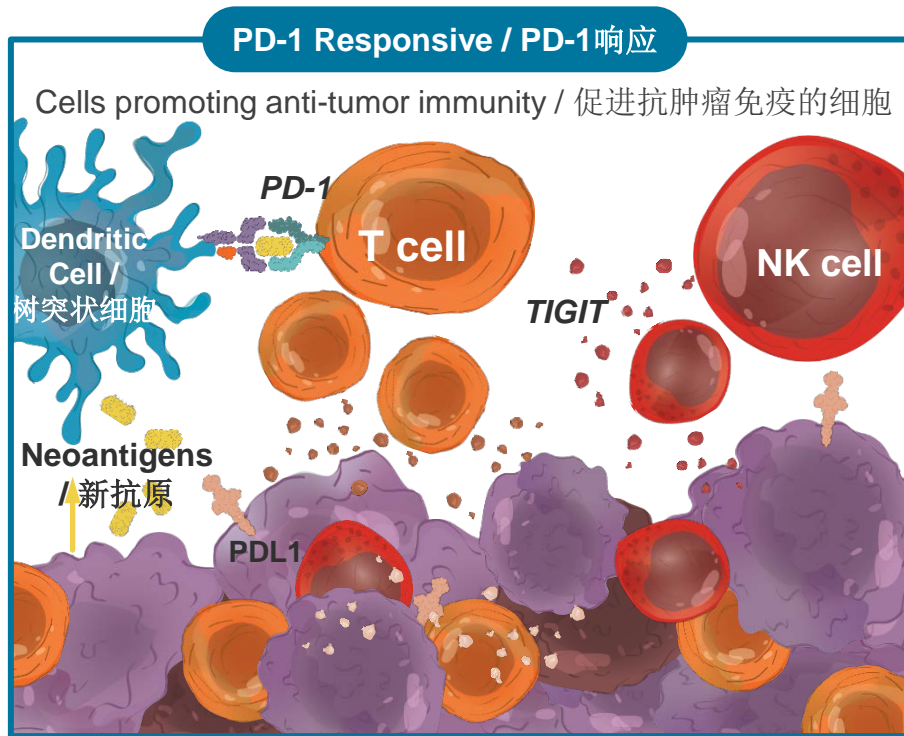
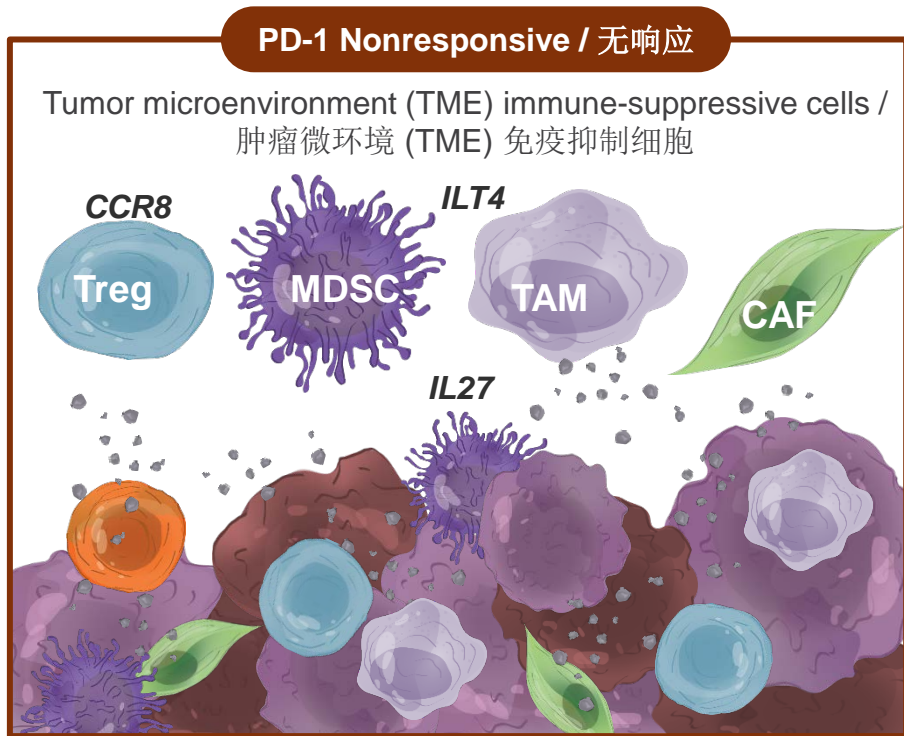
Source: / 来源: "Immune Checkpoint Blockade in Cancer Therapy"; Allison, James; Nobel Lecture (December 2018)

Combined Coherus I-O Pipeline / 联合的Coherus I-O 管线

Candidate (Target) / 候选药物 (靶点)	Preclinical / 临床前	Phase 1 / 一期	Phase 2 / 二期	Pivotal Clinical Trials / 关键临床试验
Toripalimab* (PD-1)	[Progress bar spanning all stages]			
Casdozokitug (IL-27)	[Progress bar spanning Preclinical, Phase 1, and Phase 2]			
CHS-006 (TIGIT)	[Progress bar spanning Preclinical and Phase 1]			
CHS-114 (CCR8)	[Progress bar spanning Preclinical]			
CHS-1000 (ILT-4)	[Progress bar spanning Preclinical]			

*In the U.S.

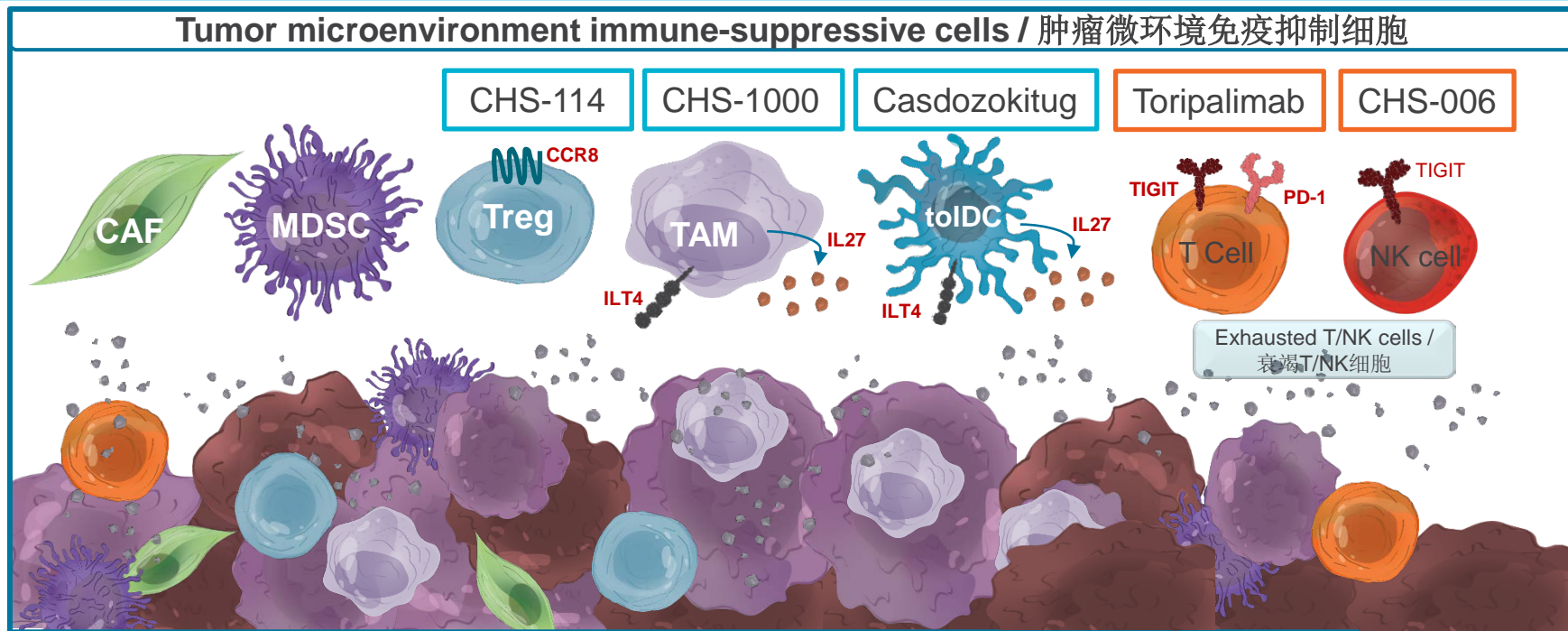
Next Step Change in Survival Benefit May Come from Overcoming PD-1 Resistance Mechanism in the TME / 攻克TME中的PD-1抗性机制可能会为生存带来下一步改变



Science driven I-O combinations to overcome PD-1 resistance in multiple tumors / 科学驱动I-O联合用药，克服多种肿瘤的PD-1抗药性

Coherus I/O Programs: / Coherus I/O项目:

Focusing on the Tumor Micro-environment with Next-Generation Combinations / 专注于肿瘤微环境与下一代联合用药



- Relieving T/NK cell exhaustion (toripalimab/TIGIT) / 缓解T/NK细胞衰竭(toripalimab/TIGIT)
- Targeting/reprogramming major resistance cell types/factors (CHS-1000, casdozokitug, CHS-114) / 靶向/重编程主要抵抗细胞类型/因子(CHS-1000、casdozokitug、CHS-114)

Overview of Casdozokitug / Casdozokitug概述

(formerly SRF388 / 前称SRF388)

High-affinity, human IgG1 antibody against IL-27 / 抗 IL-27 的高亲和力人类 IgG1 抗体

IL-27 is a highly immunosuppressive cytokine and serves as a “master switch” of checkpoint protein expression / IL-27 是一种高度免疫抑制细胞因子，是检查点蛋白表达的“总开关”

Translational and clinical evidence to support activity in liver and lung cancers / 支持肝癌和肺癌活性的转化和临床证据

Monotherapy responses in treatment-refractory NSCLC and ccRCC; combination activity in HCC / 对难治性 NSCLC 和 ccRCC 的单药治疗反应；对 HCC 的联合治疗活性

**Novel Antibody
Targeting
IL-27 / 新颖抗体靶向
IL-27**

Overview of CHS-114 / CHS-114概述

(Formerly SRF114 / 前称SRF114)

Antibody Targeting CCR8 / 靶向 CCR8抗体

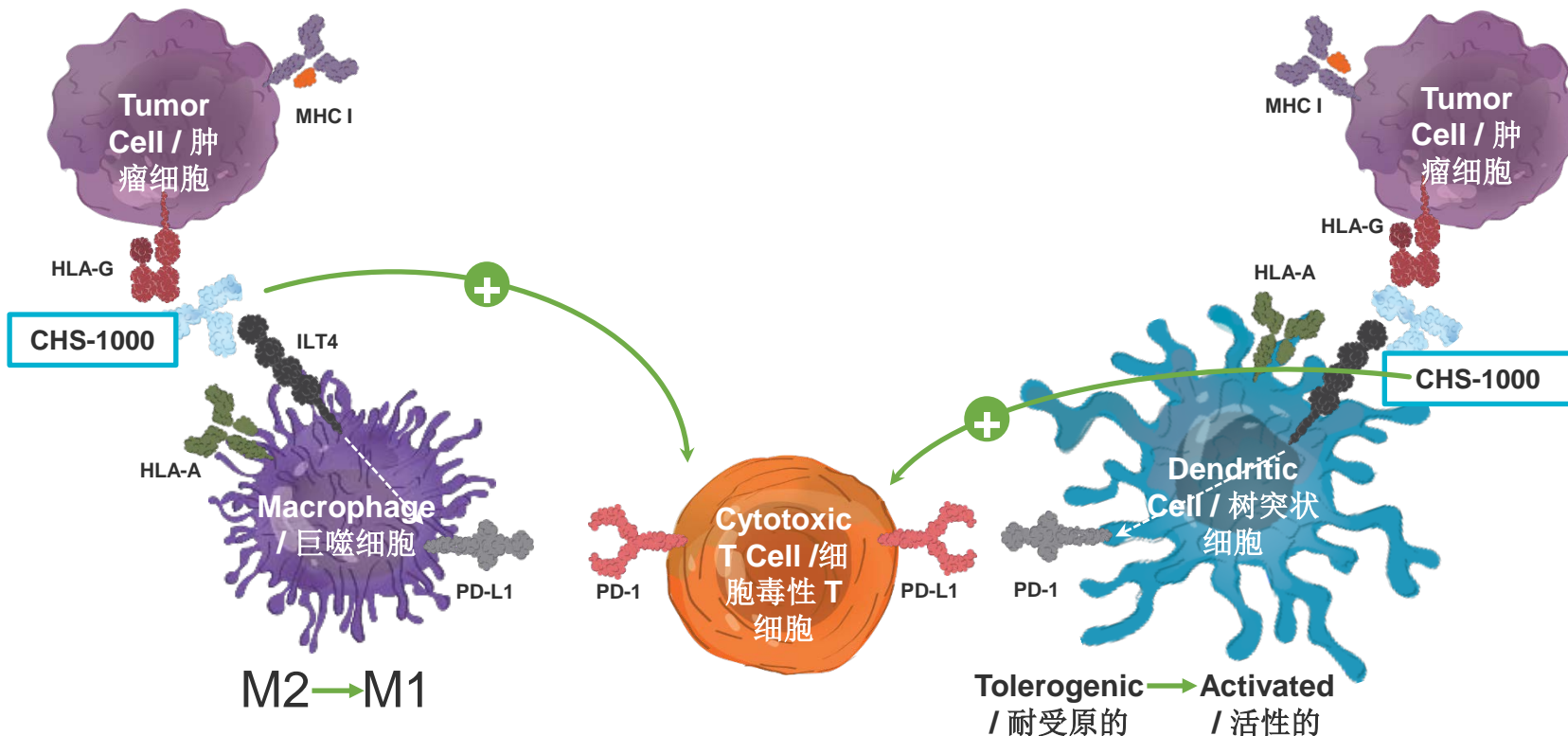
High-affinity, fully human IgG1 antibody against CCR8 / 针对 CCR8 的高亲和力全人 IgG1 抗体

Binds and induces ADCC and ADCP specifically of CCR8⁺ tumor Treg cells / 结合并诱导与 CCR8⁺肿瘤 Treg 细胞特异性的ADCC 和 ADCP

Highly selective for human CCR8, no off-target binding identified with extensive screening / 对人类 CCR8 具有高度选择性，经广泛筛选未发现脱靶结合现象

Human CCR8⁺ tumor Treg cell depletion seen *in vitro*, and *in vivo* in HuCCR8 knock-in mice / 体外观察到的人类 CCR8⁺ 肿瘤 Treg 细胞耗竭，以及 HuCCR8 基因敲入小鼠体内观察到的人类 CCR8⁺肿瘤 Treg 细胞耗竭

IND expected 2024 for CHS-1000, an anti-ILT4 antibody to repolarize M2 (suppressive) macrophages to M1 (inflammatory) macrophages / CHS-1000 是一种抗 ILT4 抗体，可将 M2（抑制性）巨噬细胞重新极化为 M1（炎症性）巨噬细胞，预计 2024 年完成 IND 申请

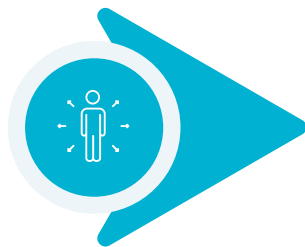


Anticipated Near-Term Catalysts in Immuno-Oncology / 预期免疫肿瘤领域的近期催化剂



LOQTORZI™

Official U.S. launch of
LOQTORZI™
(toripalimab) in
Q1 2024 / 2024年第一
季度在美国正式启动
LOQTORZI™
(toripalimab)



Casdozokitug

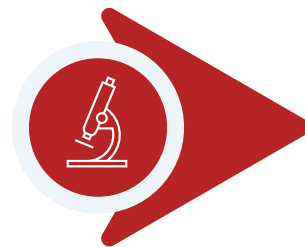
HCC Triplet
Combination data
expected Q1 2024 / 预
计2024年第一季度HCC
三联组合数据发布

NSCLC monotherapy
data expected Q4 2023
/ 预计2023年第四季度
NSCLC单药疗法数据



CHS-114

CHS-113 Phase 1
data in solid tumors,
including head & neck
cancer, expected in
H1 2024 / 预计2024
年上半年发布CHS-
113治疗实体瘤的一期
数据，包括头颈癌



CHS-1000

IND filing with the
U.S. Food & Drug
Administration in Q1
2024 / 2024年第一季
度向美国食品药品监
督管理局提交IND



Thank you
谢谢