

Third Quarter 2021 Financial Results Conference Call

November 8, 2021

Apellis Participants

CEDRIC FRANCOIS, M.D., Ph.D.

Co-Founder, President & Chief Executive Officer

ADAM TOWNSEND

Chief Commercial Officer

FEDERICO GROSSI, M.D., Ph.D.

Chief Medical Officer

TIMOTHY SULLIVAN

Chief Financial Officer

Forward-Looking Statements

Statements in this press release about future expectations, plans and prospects, as well as any other statements regarding matters that are not historical facts, may constitute "forward-looking statements" within the meaning of The Private Securities Litigation Reform Act of 1995. These statements include, but are not limited to, statements relating to Apellis' interpretation of results from the OAKS and DERBY trials, its planned timing of regulatory submissions and the potential advantages and therapeutic potential of intravitreal pegcetacoplan for GA. The words "anticipate," "believe," "continue," "could," "estimate," "expect," "intend," "may," "plan," "potential," "predict," "project," "should," "target," "will," "would" and similar expressions are intended to identify forwardlooking statements, although not all forward-looking statements contain these identifying words. Actual results may differ materially from those indicated by such forwardlooking statements as a result of various important factors, including: whether results obtained in preclinical studies

and clinical trials will be indicative of results that will be generated in future clinical trials; whether the results of the DERBY and OAKS trials are sufficient to support regulatory submissions; whether a submission for approval of intravitreal pegcetacoplan for GA on the basis of the DERBY and OAKS trials will be accepted by the FDA or foreign regulatory agencies; whether intravitreal pegcetacoplan will receive approval from the FDA or equivalent foreign regulatory agencies for GA when expected or at all; whether, if intravitreal pegcetacoplan receives approval, it will be successfully distributed and marketed; and other factors discussed in the "Risk Factors" section of Apellis' Quarterly Report on Form 10-Q filed with the Securities and Exchange Commission on November 8, 2021 and the risks described in other filings that Apellis may make with the Securities and Exchange Commission. Any forward-looking statements contained in this press release speak only as of the date hereof, and Apellis specifically disclaims any obligation to update any forward-looking statement, whether as a result of new information, future events or otherwise.

Q3 2021 Highlights



EMPAVELI™ (pegcetacoplan) U.S net product revenue in PNH exceeded our expectations



Phase 3 DERBY and OAKS data position pegcetacoplan to become the first potential treatment for GA



Continued advancement of broad pipeline across rare disease, neurology and ophthalmology



Reinforced our global leadership in complement

We believe pegcetacoplan is a breakthrough for patients with GA



DERBY and OAKS PHASE 3 RESULTS SHOWED:

- Clinically meaningful reduction in GA lesion growth
- Favorable safety profile
- Reduced lesion growth in monthly and every-other-month (EOM) dosing
- Greater effect in extrafoveal lesions.

Plan to meet with U.S. FDA by end of 2021 and submit NDA in H1 2022

C3 IS THE ONLY TARGET TO COMPREHENSIVELY CONTROL COMPLEMENT OVERACTIVATION IN GA

EMPAVELI in PNH is the first step in building our rare disease franchise

\$5.3m PNH net revenues in Q3 2021

EMPAVELI met or exceeded all launch metrics for Q3



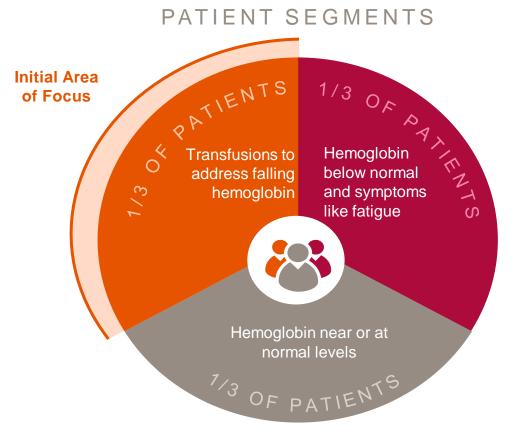
Positive CHMP opinion in EU for systemic pegcetacoplan in PNH; decision regarding approval expected by end of 2021

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3 late-stage programs to start over next 18 months; ALS Ph2 ongoing

EMPAVELI commercial launch exceeding expectations



1,500

U.S. PNH patients on C5 inhibitors

150

Newly diagnosed eligible PNH patients in the U.S. annually

Since launch:

- >115 physicians enrolled in REMS
- >100 start forms
- C5 inhibitor switch patients are majority of new EMPAVELI starts
 - ->70% of switches from Ultomiris
- 14 of top 20 payers agreed to place EMPAVELI on positive formulary

Initial feedback from surveyed retina specialists reinforces our belief in blockbuster potential of pegcetacoplan in GA

"This [pegcetacoplan] would be a complete shift in the paradigm of how we approach and treat GA." — CA Retina Specialist²

"It's certainly impressive, a first-in-class therapy for GA with some solid efficacy data."

— US Retina Specialist1

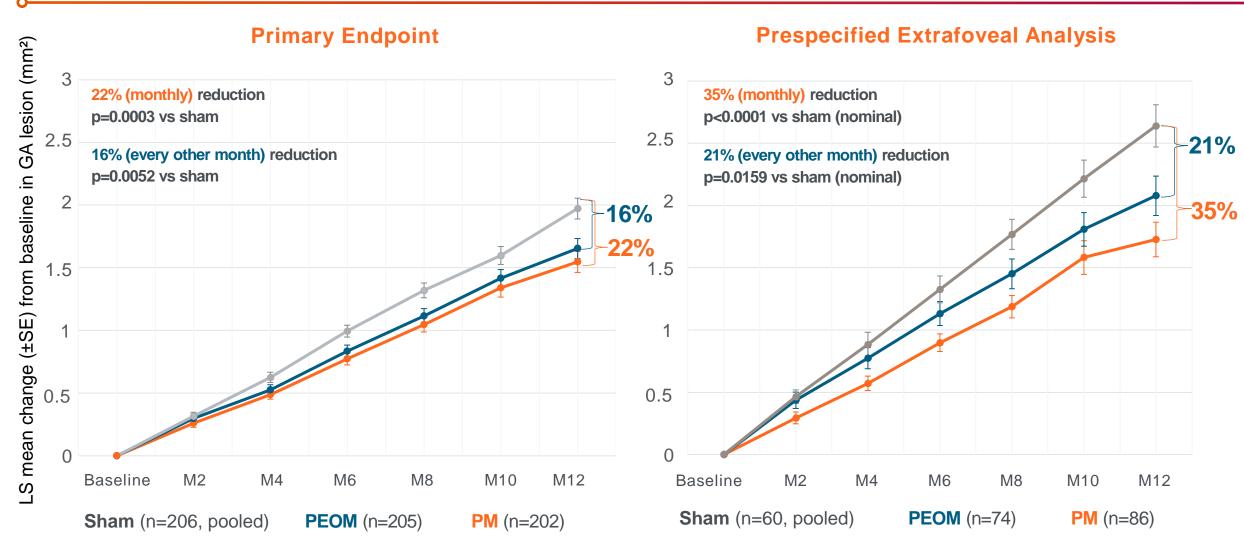
"This is huge. We don't have anything to treat GA."

– US Retina Specialist³



Commercial team preparing for potential approval and launch of pegcetacoplan in GA!

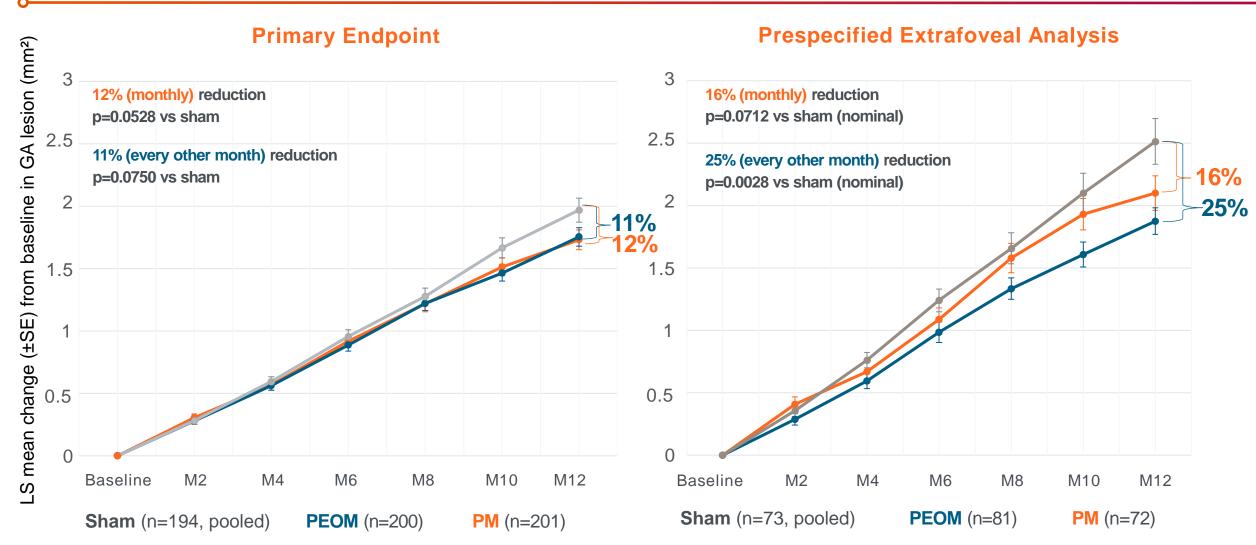
OAKS: Pegcetacoplan met the primary endpoint and further reduced GA lesion growth in patients with extrafoveal lesions



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LS means estimated from a mixed-effects model for repeated measures. The modified intention-to-treat population was used for the analysis. GA=geographic atrophy; LS=least square; M=month; PEOM=pegcetacoplan every other month; PM=pegcetacoplan monthly; SE=standard error.

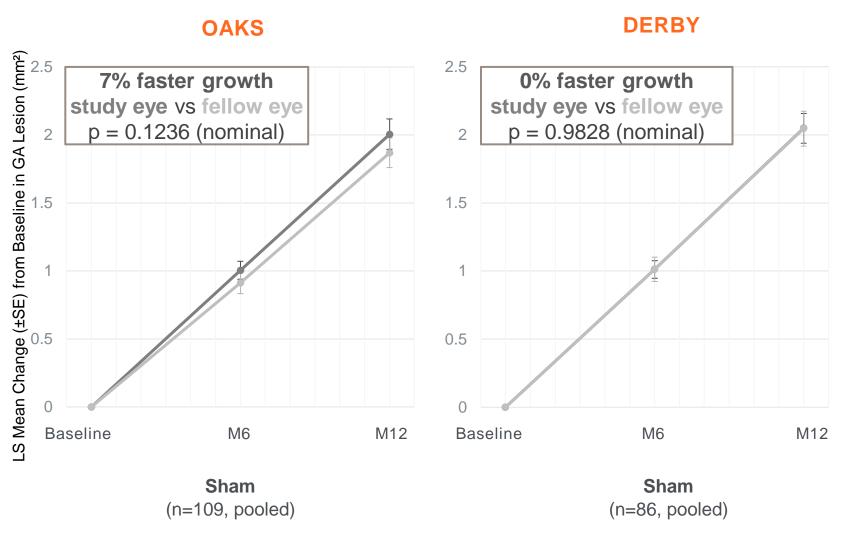
DERBY: Pegcetacoplan narrowly missed the primary endpoint and reduced GA lesion growth in patients with extrafoveal lesions



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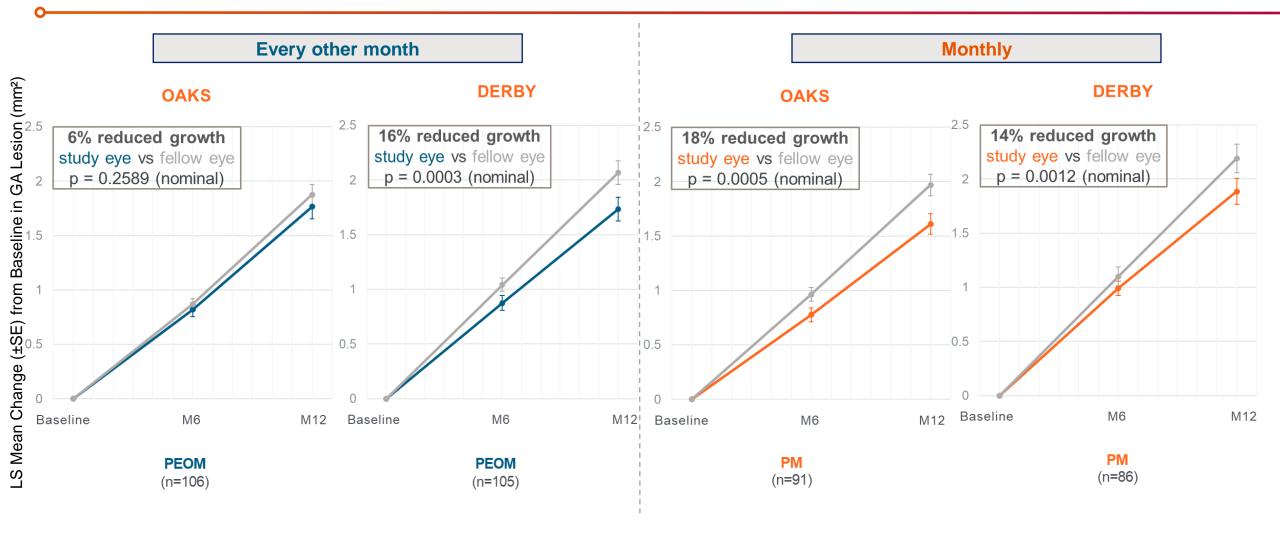
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Similar GA lesion growth in study eyes vs. fellow eyes observed in sham pooled groups





Pegcetacoplan reduced lesion growth in treated study eyes vs. untreated fellow eyes with both monthly and EOM treatment





Pegcetacoplan demonstrated a favorable safety profile in DERBY and OAKS

All data represented are from DERBY and OAKS combined

EXUDATIONS ¹		
Monthly	25 patients (6.0%)	
EOM	17 patients (4.1%)	
Sham	10 patients (2.4%)	

¹ Exudations include adverse events reported by the investigator as choroidal neovascularization (CNV) or neovascular AMD

INFECTIOUS ENDOPHTHALMITIS

2 cases confirmed

1 case suspected

6,331 total injections (0.047%)

INTRAOCULAR INFLAMMATION

13 patients with intraocular inflammation

No events of retinal vasculitis or retinal vein occlusion

Third Quarter 2021 Financial Results

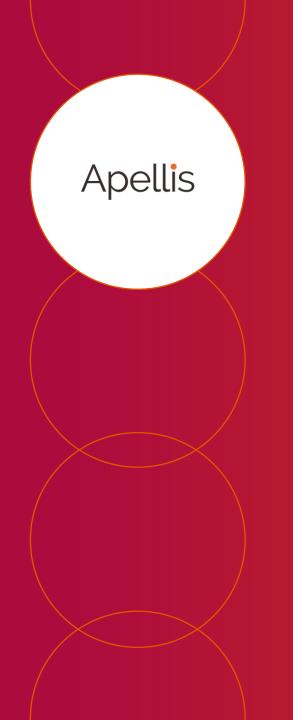
(In USD Millions)	Three Months Ended September 30,	
	2021	2020
Net Product Revenue	\$5.3	-
Licensing and Other Revenue	\$0.4	\$0.6
Total Revenue	\$5.7	\$0.6
Cost of Goods Sold	\$0.1	-
Expenses		
Research and Development (R&D) Expenses	\$87.7	\$93.2
General & Administrative (G&A) Expenses	\$45.8	\$37.0
Non-operating Expenses	\$67.7	\$6.1
Total Expenses	\$201.2	\$136.3
Net Loss	\$(195.6)	\$(135.7)

Apellis expects its cash of \$430 million as of September 30, 2021 to fund the company's current operating plan into the third quarter of 2022

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Key milestones through 2022

We expect: Remainder 2021 2022 Apellis Complete enrollment in ALS Phase 2 study *** EU approval decision for Submit NDA in GA to US FDA pegcetacoplan in PNH with Sobi Begin pre-submission discussions with EU Regulatory feedback from FDA for regulators for GA pegcetacoplan in GA H₁ 2022 PNH launch by Sobi in EU countries Start Phase 3 study in IC-MPGN / C3G Publish preclinical data on AAVs administered with C3 inhibition Sobi to initiate late stage studies in Initiate Phase 3 study in iAMD, pending CAD and HSCT-TMA regulatory feedback 24-month DERBY & OAKS results H₂ 2022 Submit IND for APL-1030 Potential approval of pegcetacoplan in GA (***) Apellis



Q&A



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