

42nd Annual J.P. Morgan Healthcare Conference 2024

Cedric Francois, M.D., Ph.D.
Chief Executive Officer

January 8, 2024

Forward-looking statements

Statements in this presentation 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 regarding preliminary financial information for the fourth quarter and full year ended December 31, 2023 and the appeal and re-examination of the MAA if CHMP issues a negative opinion for intravitreal pegcetacoplan and the safety profile of intravitreal pegcetacoplan. 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 forward-looking statements, although not all forward-looking statements contain these identifying words. Actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including adjustments to Apellis' preliminary revenue figures resulting from, among other things, the completion of financial closing and review procedures for the quarter and year ended December 31, 2023; whether the benefit/risk profile of SYFOVRE following the reported events of retinal vasculitis will impact our commercialization efforts; whether SYFOVRE will receive approval from foreign regulatory agencies for GA when expected or at all, including the impact on the likelihood and timing of such approvals; and other factors discussed in the "Risk Factors" section of Apellis' Annual Report on Form 10-K with the Securities and Exchange Commission on February 21, 2023 and Quarterly Report on Form 10-Q filed on November 1, 2023 and the risks described in other filings that Apellis may make with the Securities and Exchange Commission. Any forward-looking statements contained in this presentation 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.



Developing life-changing medicines for patients

2

FDAapproved medicines

MARKET-LEADING

treatment for GA



FIRST C3 THERAPY





700+
employees
globally



PIPELINE

of retinal, rare and CNS programs



Targeting C3 for comprehensive control of complement

Reach more U.S. patients with GA

SYFOVRE (pegcetacoplan injection)

Bring SYFOVRE to patients with GA worldwide

SYFOVRE
(pegcetacoplan injection)

Maximize
EMPAVELI in PNH &
C3G/IC-MPGN

(pegcetacoplan) injection

1080 mg/20 mL solution

pipeline and Beam collaboration

Advance early

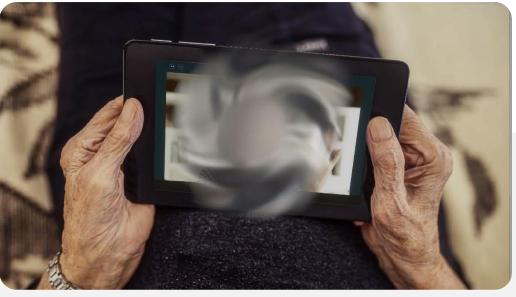


GA is a leading cause of blindness around the world

NORMAL VISION

VISION WITH ADVANCED GA

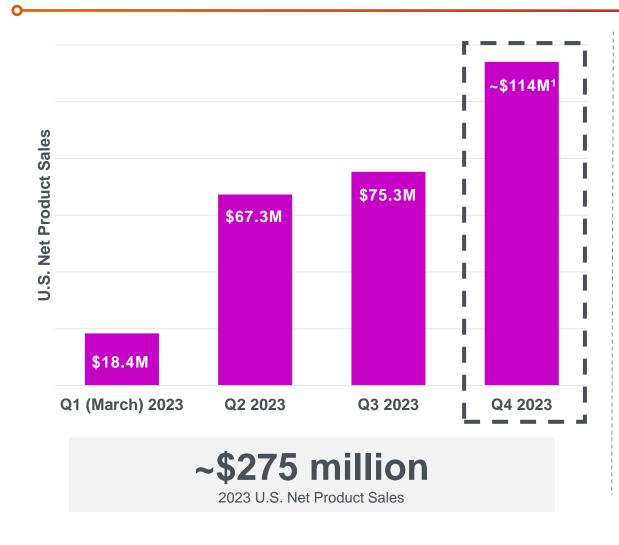


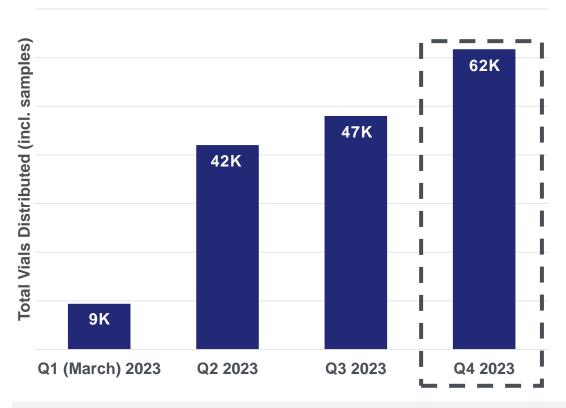


>1 million people in US¹ **5 million** people worldwide

Nearly **7 in 10 people** with GA (68%) believe impact on independence and quality of life due to visual decline is worse than expected²

Strong launch to date: \$114 million U.S. net product sales in 4Q23





~160K doses (vials distributed)

as of December 31, 2023



SYFOVRE is the market-leading treatment for GA in the U.S.

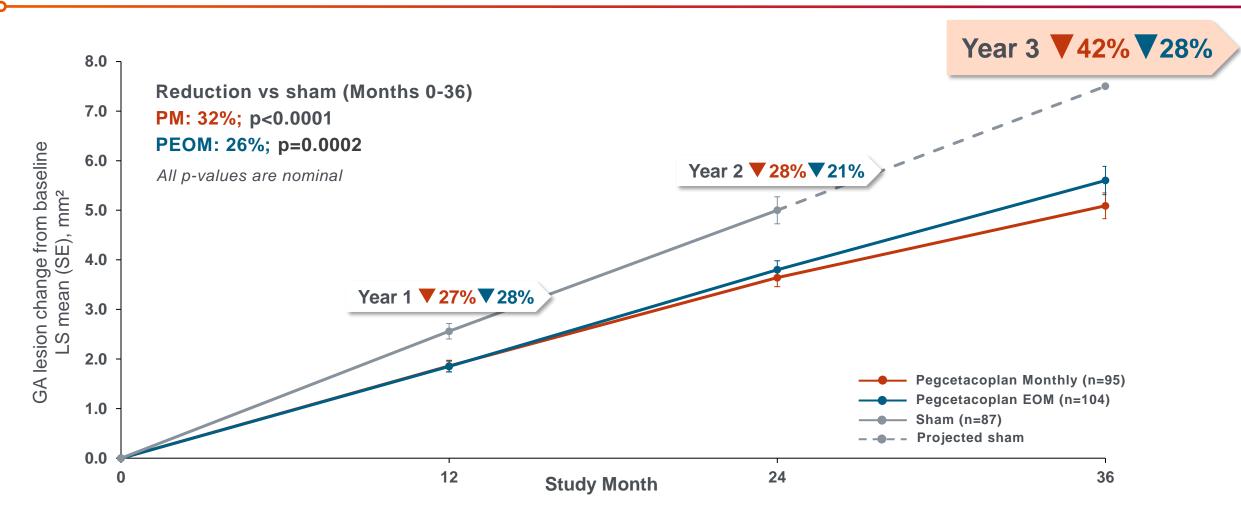
More efficacy over time

More experience

More vision for patients



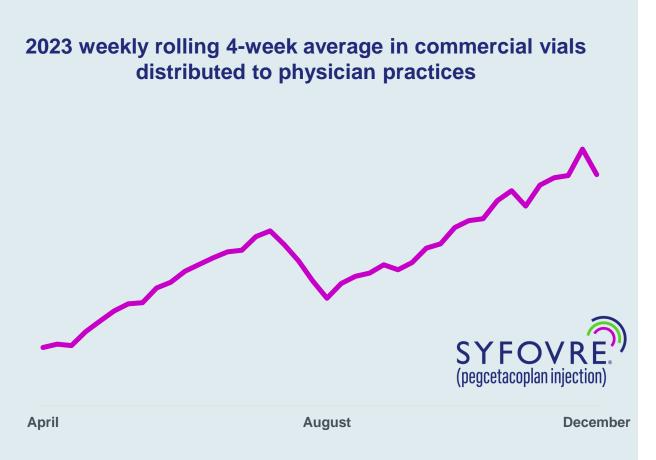
More efficacy over time: continued to demonstrate increasing effects, with up to 42% in year 3 in nonsubfoveal patients



pellis

LS means estimated from a piecewise linear mixed-effects model that evaluated mean rate of change in GA area between pegcetacoplan arms and sham arm from baseline to Month 36, with knots at Months 12 and 24 allowing for the slope to be linear over each of the 12-month segments but to differ between segments (piecewise slope analysis). Mean rate of change of hypothetical sham from Month 24 to Month 36 was estimated from the mean rate of change in each period from Month 0 to Month 24. The modified full analysis set was used for the analysis, defined as patients who are in OAKS/DERBY antecedent study's ITT set, have not been enrolled in APL2-103, and received ≥1 injection of pegcetacoplan in GALE. Projected sham is shown with a dashed line. Data shown for patients who continued into the GALE trial after OAKS & DERBY. EOM, every other month; GA, geographic atrophy; ITT, intent to treat; LS, least-squares; PEOM, pegcetacoplan every other month; PM, pegcetacoplan monthly; SE, standard error. See slides from Apellis' presentation at the 2023 American Academy of Ophthalmology meeting on November 4, 2023 for full 3-year results from GALE extension study.

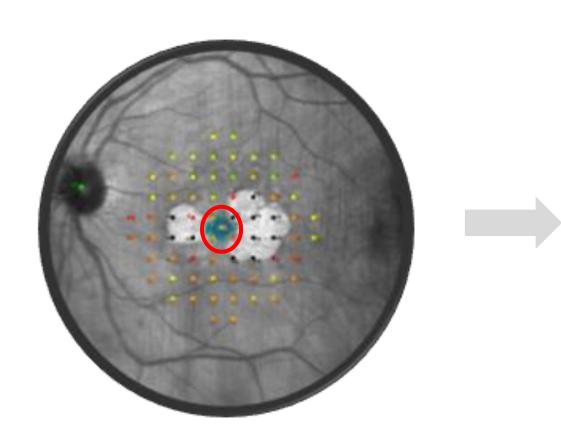
More experience: commercial launch is reaching new heights



- ✓ >150K SYFOVRE injections estimated since launch¹
- ✓ SYFOVRE holds an estimated ~95% of total patient share²
- ✓ Double-digit number of new sites each week; 70% of demand from non-PE³
- ✓ Strong access and reimbursement; permanent J-code as of 10/1/23
- Estimated rate of vasculitis remains rare at 0.01% per injection; last confirmed case in Sept 2023

More vision for patients: preserved vision longer in multiple post hoc analyses

Central macular light sensitivity analysis using 4 central points, as measured by microperimetry



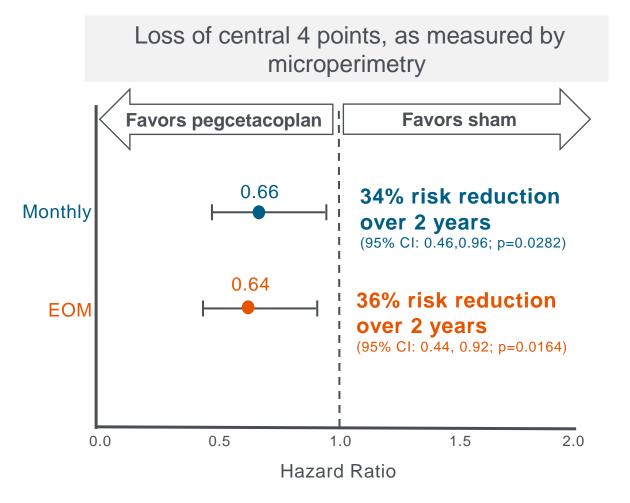
				#64 -1, -9	#63 1, -9				
		#46 -5, -7	#45 -3, -7	#44 -1, -7	#43 1, -7	#42 3, -7	#41 5, -7		
	#47 -7, -5	#25 -5, -5	#24 -3, -5	#23 -1, -5	#22 1, -5	#21 3, -5	#20 5, -5	#40 7, -5	
	#48 -7, -3	#26 -5, -3	#10 -3, -3	#9 -1, -3	#8 1 -3	#7 3. 3	#19 5, -3	#39 7, -3	
#65 -9, -1	#49 -7, -1	#27 -5, -1	#11 -3, -1			#6 3 -1	#18 5, -1	#38 7, -1	#62 9, -1
#66 -9, 1	#50 -7, 1	#28 -5, 1	#12 -3, 1			#17 3, 1	#37 5, 1	#61 7, 1	#69 9, 1
	#51 -7, 3	#29 5, 3	#13 -3, 3	#14 -1, 3	#15 1, 3	#16 3, 3	#36 5, 3	#60 7, 3	
	#52 -7, 5	#30 -5, 5	#31 -3, 5	#32 -1, 5	#33 1, 5	#34 3, 5	#35 5, 5	#59 7, 5	
		#53 -5, 7	#54 -3, 7	#55 -1, 7	#56 1, 7	#57 3, 7	#58 5, 7		
				#67 -1, 9	#68 1, -9				

Microperimetry 10-2 MAIA grid with the 4 central scotomatous points corresponding to the foveal area

Pegcetacoplan preserved light sensitivity in central fovea

Loss of central 4 points	Month 24 Mean (SD) change in BCVA, ETDRS letters
Yes (n=149)	-11.7 (17.33)
No (n=183)	-4.9 (11.16)

Maintenance of light sensitivity in foveal center shown to be associated with less vision loss over 2 years, as measured by BCVA





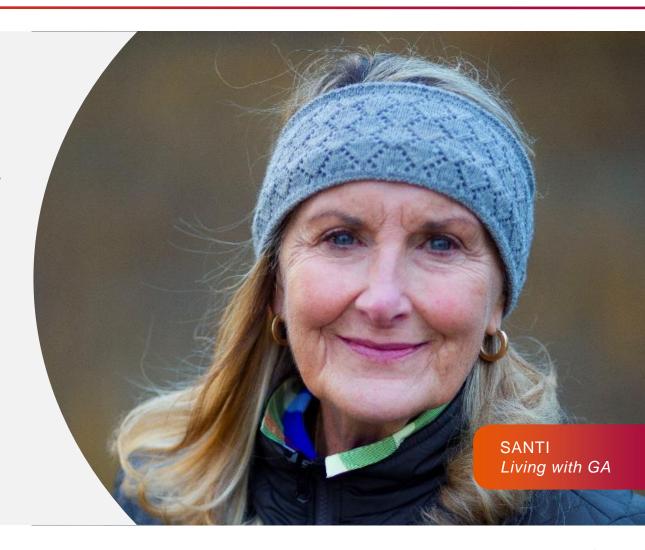
Positive physician feedback

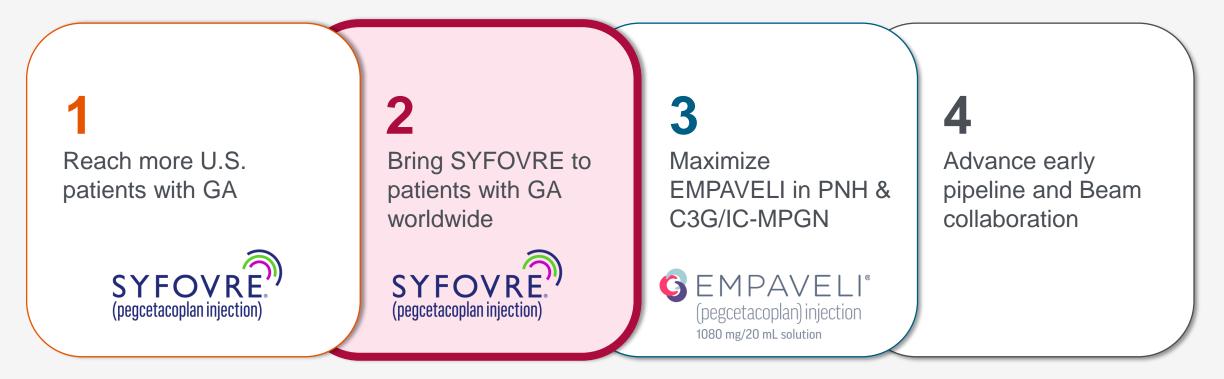


"Right now, 100% of my patients who receive treatment for GA are getting SYFOVRE."

"The GALE data are promising and continue to suggest SYFOVRE's efficacy increases over time."

"I have only used SYFOVRE and continue to use it on my new and existing patients... I feel comfortable with a 1/10,000 risk of vasculitis at this time."





Approximately 5 million people living with GA worldwide¹





>2.5M people with GA in Europe¹



No approved treatments available outside of the U.S.



84% of European ECPs are convinced that early GA treatment is essential²

Committed to bringing SYFOVRE to patients in EU

Anticipated EU timeline

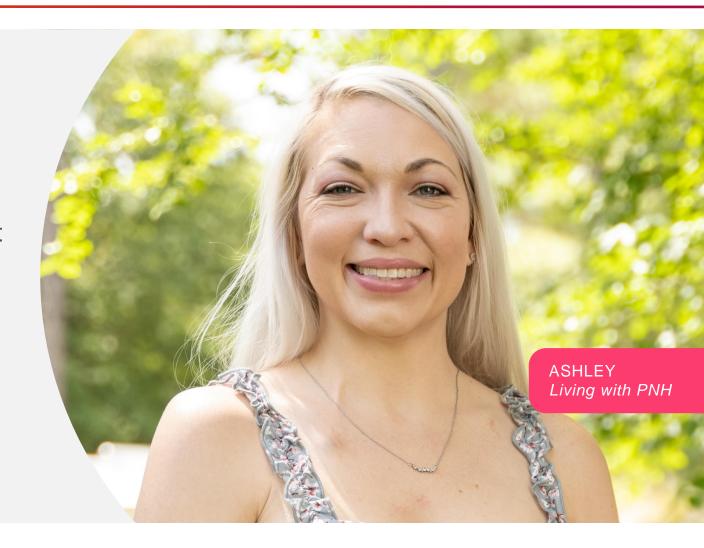




EMPAVELI is elevating the standard of care in PNH

As of December 31, 2023:

- ~\$91 million¹ in FY 2023 U.S. net product sales
 - \$24 million¹ in 4Q 2023 U.S. net product sales
- ~10% of demand in 2023 was from treatment-naïve patients
- 97% patient compliance rate





Unprecedented safety profile demonstrated through realworld experience

>1,400 patient years of systemic pegcetacoplan exposure¹

Zero reported cases of meningococcal infection¹

Thrombosis rate of **0.51 events per 100** patient-years²

EMPAVELI Injector: improving the patient experience



PATIENT QUOTES¹

"There were no skin issues. It took 45 minutes. Virtually painless! It was great."

"Everything went great! I've actually had less swelling at the injection site with this new pump... So far I'm loving it!"

"Super simple, no problems at injections site, no problem removing the injector, **not a single problem so far!**"



Since October approval:

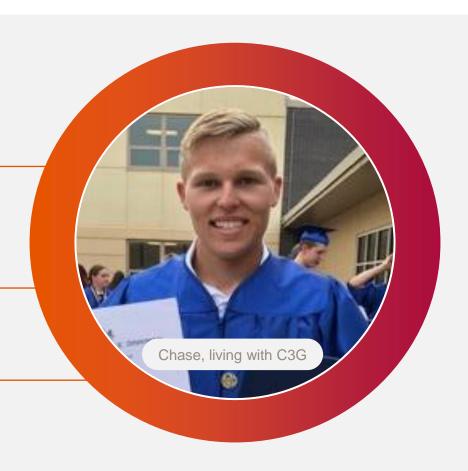
- >50% conversion of existing patients
- >90% of new starts

High unmet need in C3G and IC-MPGN

Rare kidney diseases with no approved medicines

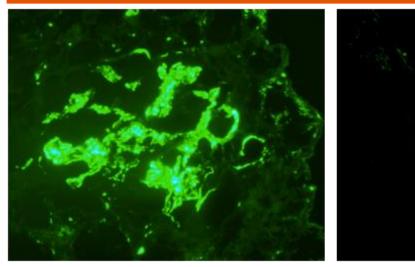
Progress to kidney failure in ~50% of patients within 5-10 years of diagnosis

~5,000¹ potential US patients for C3G/IC-MPGN

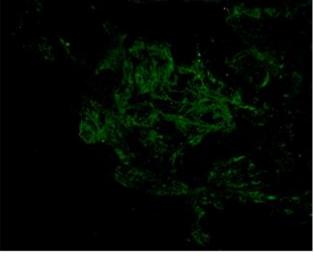


Phase 2 NOBLE data: pegcetacoplan reduced disease activity in only 12 weeks

C3c Staining at Week 12 (Patient 1)







Week 12 (C3c 0)

Reduction in C3c staining in pegcetacoplan-treated patients

Reduction in intensity	% of patients (n=10)
1+ magnitude	80%
2+ magnitude	50%
Zero staining	40%



Results strengthen our confidence in pegcetacoplan for C3G / IC-MPGN



In only 12 weeks, pegcetacoplan reduced disease activity



Treatment effect shown in **both C3G / IC-MPGN** in patients with kidney transplants



Improvements across key clinical measures, including stable kidney function and improved proteinuria



Pegcetacoplan was well tolerated in the study

Nephrologists are highly encouraged by the Phase 2 NOBLE data

This is miraculous

I have a patient that needs this

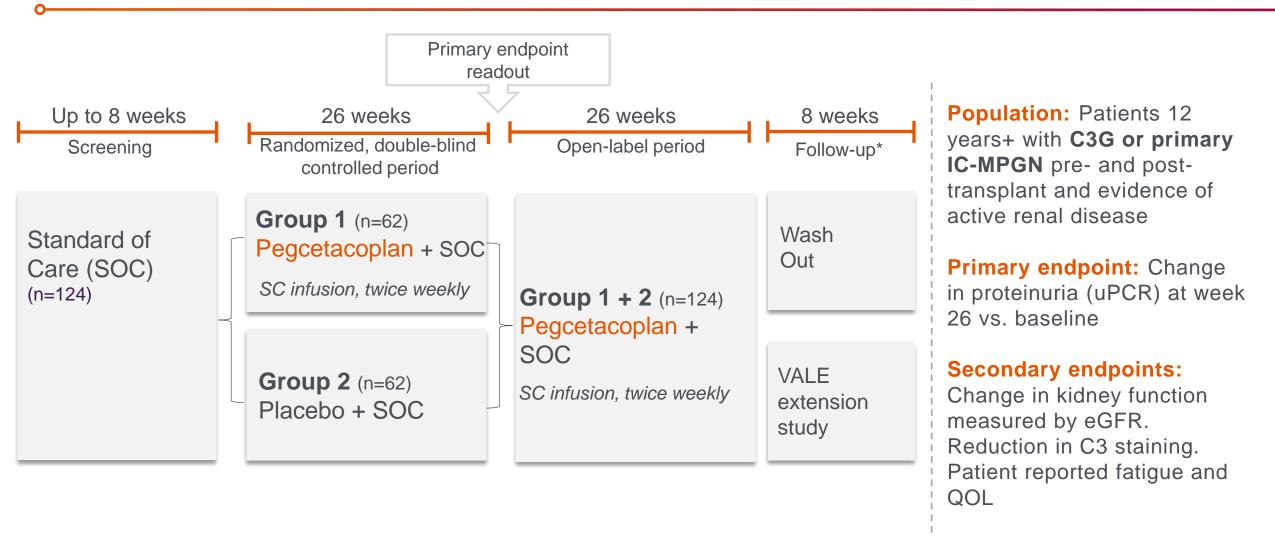
A true diseasemodifying agent

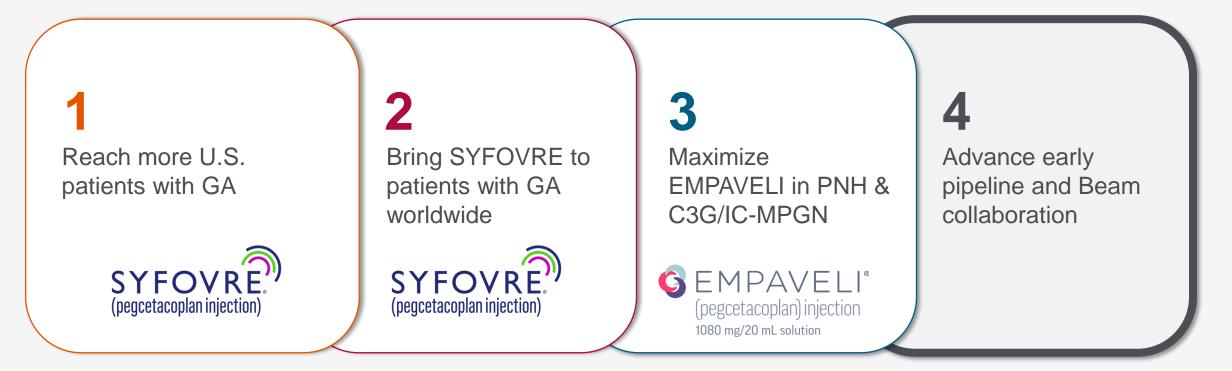
You don't have to convince me anymore

I didn't think this was possible!

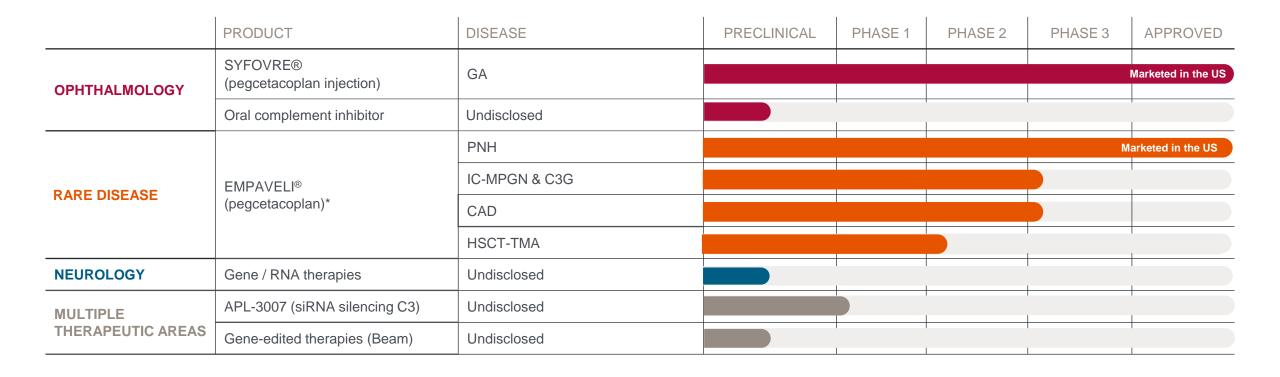
This is impactful – there is a clear effect

VALIANT Phase 3 study: patient enrollment complete, with topline data study expected mid-2024





Prioritizing high-potential opportunities in retina, rare and central nervous system (CNS) diseases



Reach more U.S. patients with GA

(pegcetacoplan injection)

Bring SYFOVRE to patients with GA worldwide



Maximize
EMPAVELI in PNH &
C3G/IC-MPGN



Advance early pipeline and Beam

collaboration



42nd Annual J.P. Morgan Healthcare Conference 2024

Cedric Francois, M.D., Ph.D.
Chief Executive Officer

January 8, 2024