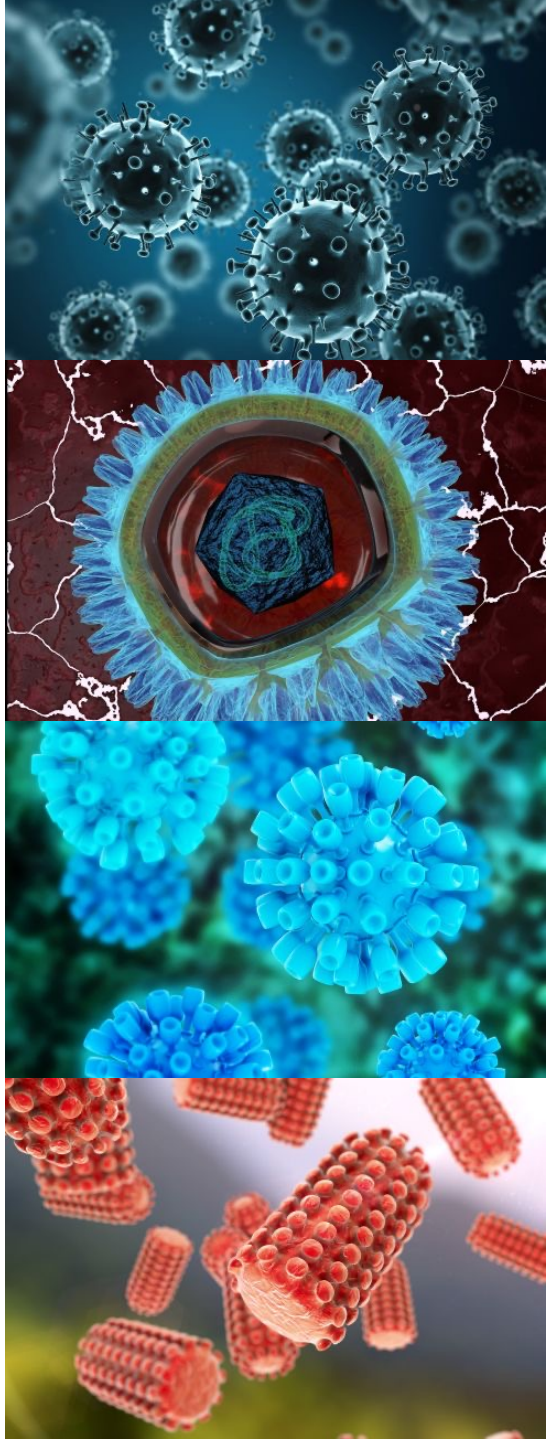
…not just one virus – every virus



Lillian Chiang PhD MBA, President & CEO presenting
Evrys Investor Meeting
December 15-16, 2021
www.evrysbio.com

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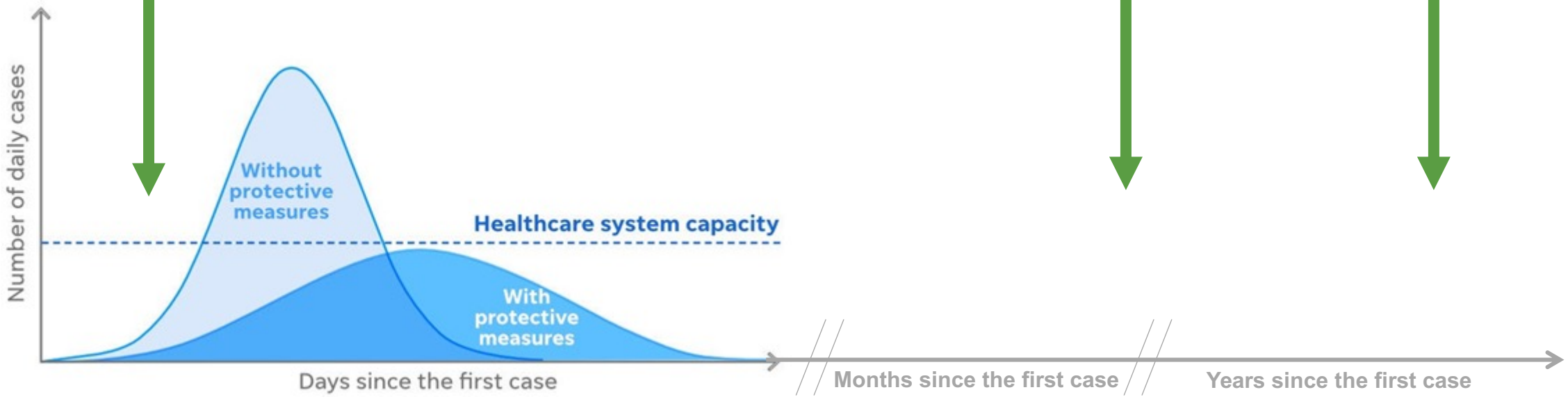
Old approaches fail to flatten the curve

Time when a therapy can flatten the curve

Time it takes to develop a new vaccine from scratch

Time it takes to develop a new antiviral from scratch



…not just one virus - every virus

- **Vision:** Shelf-stable, easily manufactured, ready-for-use pills to cure current and future viral infection
- **Mission:** Build a pipeline of breakthrough antiviral drugs that provide unique broad-spectrum treatment modalities and address the problem of drug resistance
- **Strategy:** Target the infected cell instead of the virus

Paradigm shift from target the virus to target the host

- Conventional Direct-Acting Antiviral or Vaccine:
  - Addresses one virus at a time
  - Viral mutation can confer reduced effectiveness
- Evrys Host-Targeted Antiviral:
  - Easily manufactured & shelf ready
  - Limit the growth of different viruses simultaneously
  - Provide high barrier to viral resistance
  - Address the infection condition, not a specific virus

Evrys products define new markets by addressing the infection condition that can be caused by many viruses

Evrys Product	Development Stage	Disease Condition	Viruses to Be Covered	[a]Competitor Therapy
EV-100	IND-enabling pre-clinical development	viral infection in immunosuppressed transplant patients	CMV, other herpes viruses, polyomaviruses (BKV, JCV)	CMV only
EV-200	lead optimization	chronic hepatitis B	HAV, HBV, HCV, HDV, HEV	HBV or HCV (not both)
EV-300	lead optimization *(DoD use)*	medical countermeasure (MCM) for acute lethal infection	Ebola, Marburg, encephalitis viruses, lassa fever virus, other alpha-, arena-, and filoviruses	vaccines for select viruses
EV-300	lead optimization *(commercial use)*	pan-respiratory infections	influenza A and B, respiratory syncytial virus, adenoviruses, coronaviruses, other respiratory viruses	influenza only (*e.g.,* Tamiflu)

[a] *Viruses covered by standard-of-care competitor antiviral drugs unless otherwise indicated (e.g., vaccines)*

Presentation Outline

- Company
- Technology
- Pipeline Overview
  - EV-100 – Transplant Infections
  - EV-200 – Viral Hepatitis
  - EV-300 – Medical Countermeasure & Pan-Respiratory
- Financing Strategy

Evrys Bio Overview

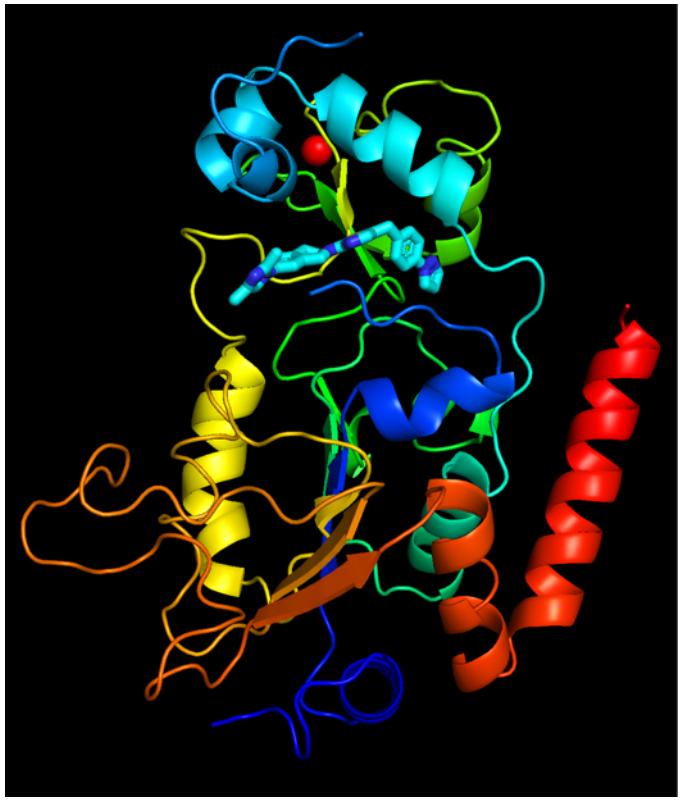
- Doylestown, PA since 2013
- $9 M investor financing to date
  - Pharma-savvy angels: CEO, C-level execs, Mid-Atlantic Bio Angels, Keiretsu, BOHE
  - 2 Strategic Investors: ShangPharma & BioArdis
- $47.1 M* non-dilutive financing
  - 11 Awarded Government Grants/Contracts
- Strong I.P. including issued patents
- World-class management team and advisors

Cumulative total since 2013 including milestone payments not yet triggered

Evrys portfolio of well-characterized broad-spectrum antivirals

- EV-100 entering IND-enablement
- > 800 compounds synthesized
  - 5 validated Chemical Scaffolds with issued patents on 2, modulating a family of cellular proteins called sirtuins
- Platform technologies
  - Host target-engagement, antiviral mechanism-of-action, computational chemistry, biophysics
- Extendable and customizable to other viruses
  - viral hepatitis (EV-200)
  - medical countermeasures (EV-300)
  - respiratory viruses (EV-300)

Co-Crystal Structure of Evrys LEAD Bound to SIRT2

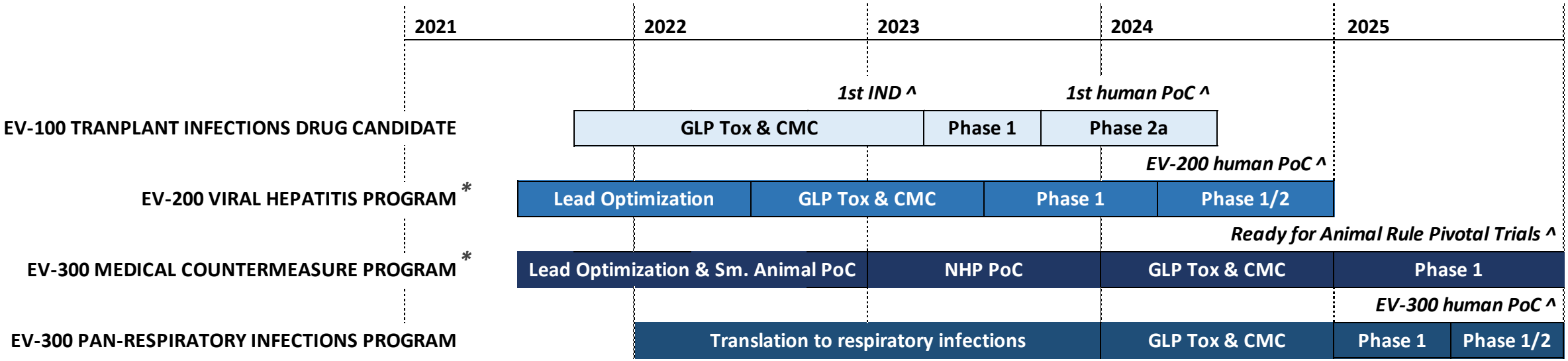


Host-Target: Human Sirtuin Proteins

- Sirtuins SIRT1-7 are multifunctional enzymes that regulate transcription, genome stability, cellular signaling, and energy metabolism in response to the metabolic status of the cell
- Viral infection disrupts the metabolic status of the cell and depend on sirtuin regulated functions to replicate productively
- SIRT2 modulators (nicotinamide, sirtinol, cambinol, AGK2) can engage cellular reprogramming to inhibit cytomegalovirus (HCMV)[1,2], hepatitis A virus[3], hepatitis B virus[4,5], *Listeria*[6,7], *Salmonella*[8], *Tuberculosis*[9]
- Evrys SIRT2 targeted drugs are allosteric inhibitors - if SIRT2 were a multifunctional Swiss army knife, Evrys SIRT2-targeted drugs modify some functions, such as the scissors, to stop viral replication, but do not completely knock out all functions of the knife required for cellular integrity of uninfected cells.
- SIRT2 KO mouse is healthy and less susceptible to infection[10]

[1,2]Mao 2016, Koyuncu 2014, [3]Kanda 2015, [4,5]Piracha 2018, Yu 2018, [6,7]Eskandarian 2013, Pereira 2018, [8]Gogoi 2018, [9]Bhaskar 2020, [10]Ciarlo 2017

Business Plan:
2023 IND, 2024 POC, 2025 Exit



**EV-200 and EV-300 currently funded by NIAID and DTRA, respectively.*
^Shows timing of indicated milestone

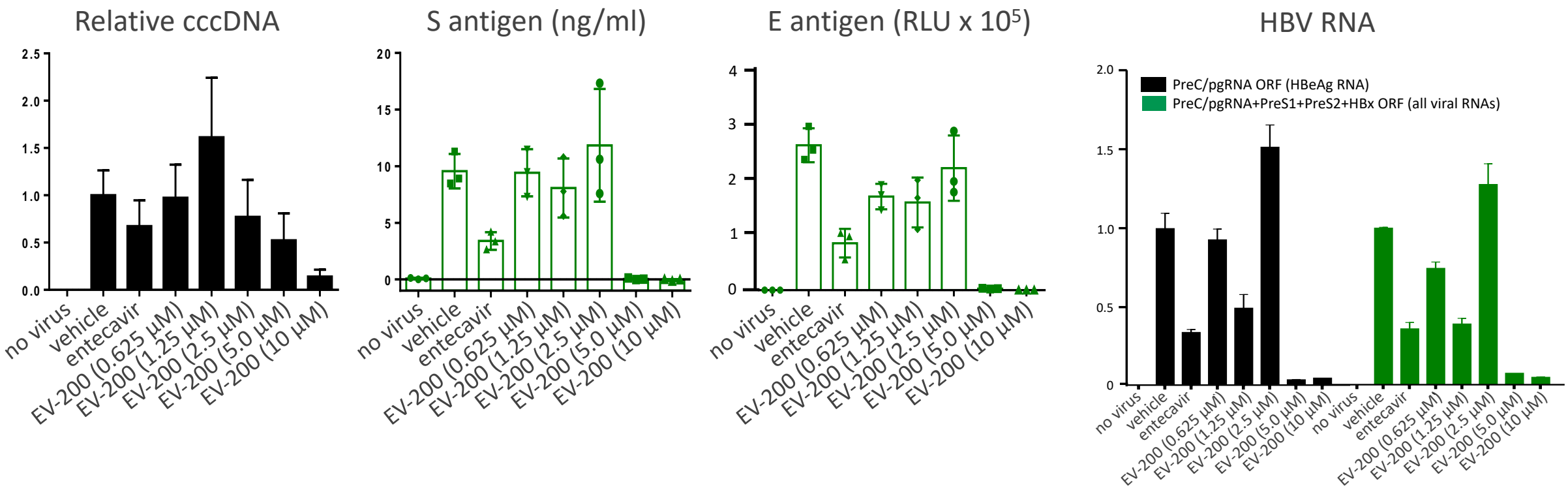
EV-100: First Clinical Target - cytomegalovirus

- Rapid path to Proof of Platform and FDA approval
  - **CMV viral load** is a validated biomarker and approvable endpoint
  - Proof of Concept: antiviral effectiveness in transplant patients with active CMV infection
  - First indication (orphan): non-inferiority CMV prophylaxis
- Attractive U.S. market for a small biotech
  - CMV comprises ~40% of transplant viral infections
  - $3.2 B annually to manage CMV complications and organ rejection including > $1 B in antivirals
  - Broad-spectrum against other herpes and polyomaviruses will drive utilization and downstream label expansion to non-CMV infections

EV-100: A Game-Changer for CMV

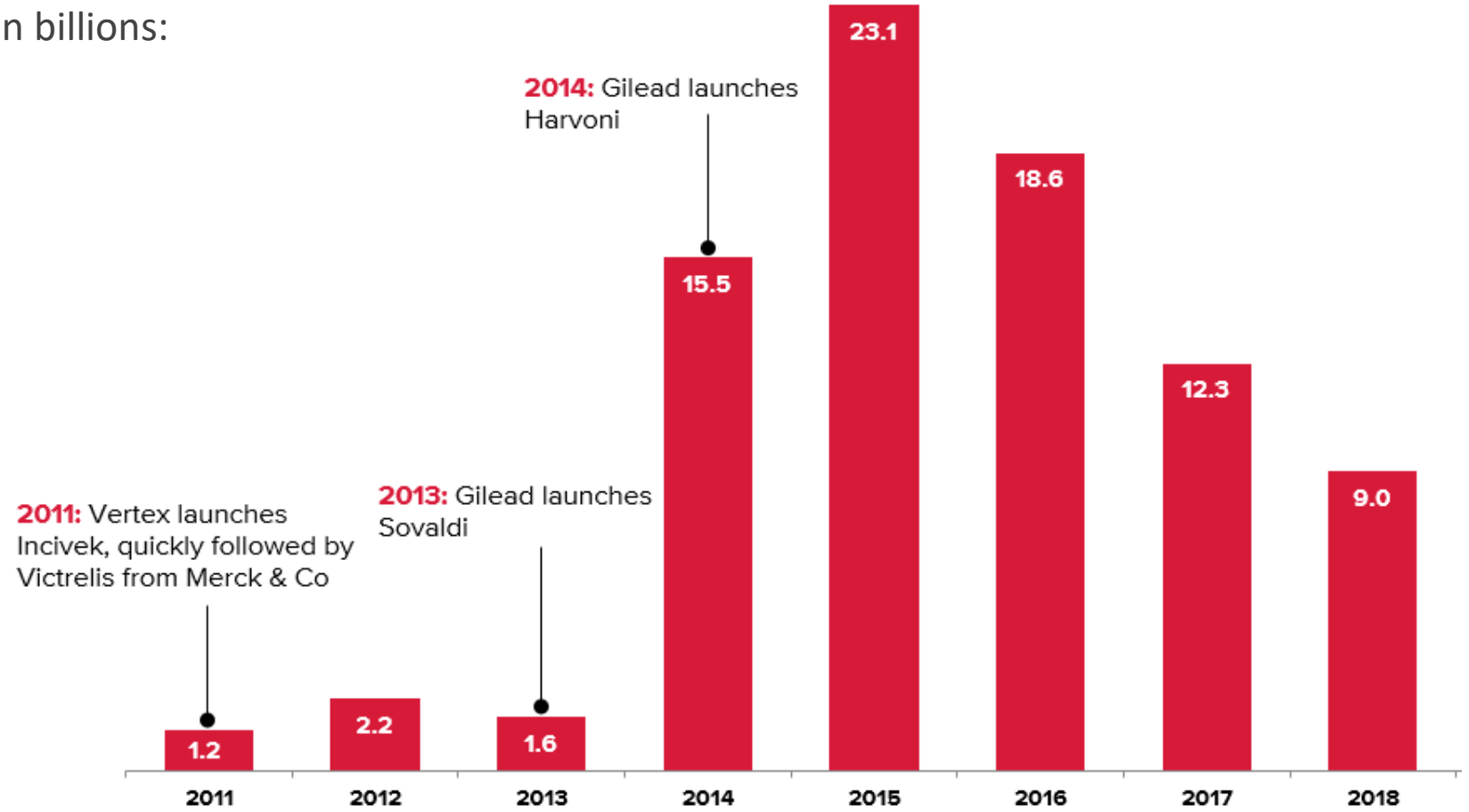
Drug *mechanism*	Pan-Viral Profile	EC_{50} (µM)	MAX INH at EC_{99}	Time to virus detection after block-release	Response to high viral load	Viral Genes conferring resistance	Human Dose (mg/kg)
EV-100 ***human SIRT2 inh***	**CMV, EBV, BKV, JCV, others**	**0.7**	**>100-fold**	**> 96 hours**	**No change in EC_{50} as viral dose increases**	**None known**	**4**
Marketed drugs:							
Valganciclovir (SOC) ***nucleoside inh***	CMV, HSV	2.6	28-fold	72 hours	EC_{50} is increased as viral dose increases	UL54, UL97	15
Letermovir (SOC) ***viral terminase inh***	CMV	0.003	4-fold	24 hours	ongoing spread	UL56	8
Cidofovir (tox-limited) ***viral DNA pol inh***	CMV, HSV	0.64	>100-fold	> 96 hours	n.d.	UL54	5
Foscarnet (tox-limited) ***pyrophosphate mimic***	CMV, HSV	200	n.d.	n.d.	n.d.	UL54	90

EV-200: Reduction of Hepatitis B virus cccDNA, S and E antigens, and RNA to treat chronic infection



HCV Market Comparator for HBV Cure

In billions:



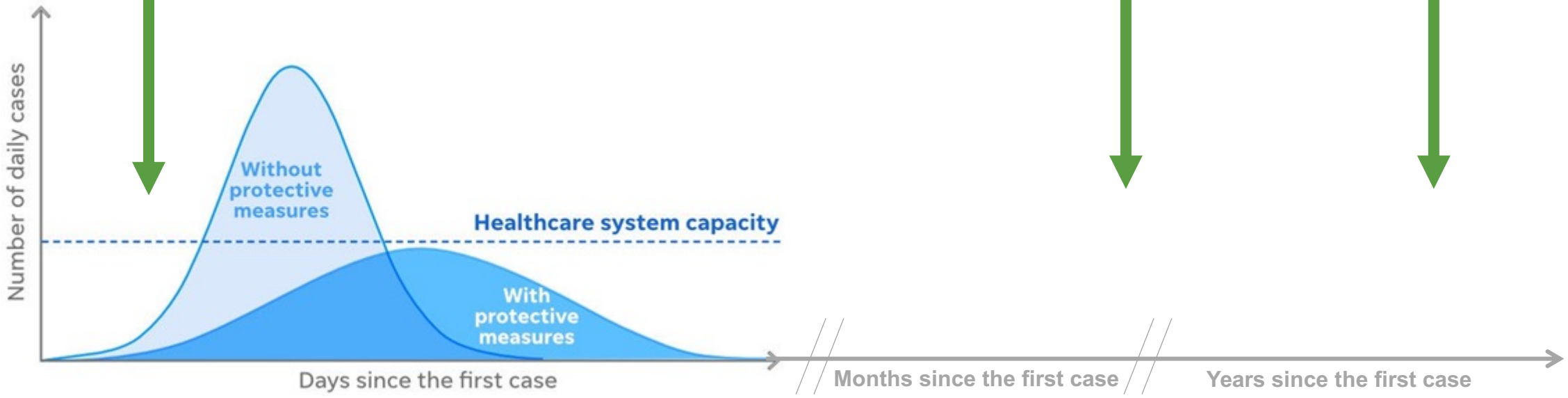
Source: EvaluatePharma

EV-300 aims to flatten the curve

Time when a therapy can flatten the curve

Time it takes to develop a new vaccine from scratch

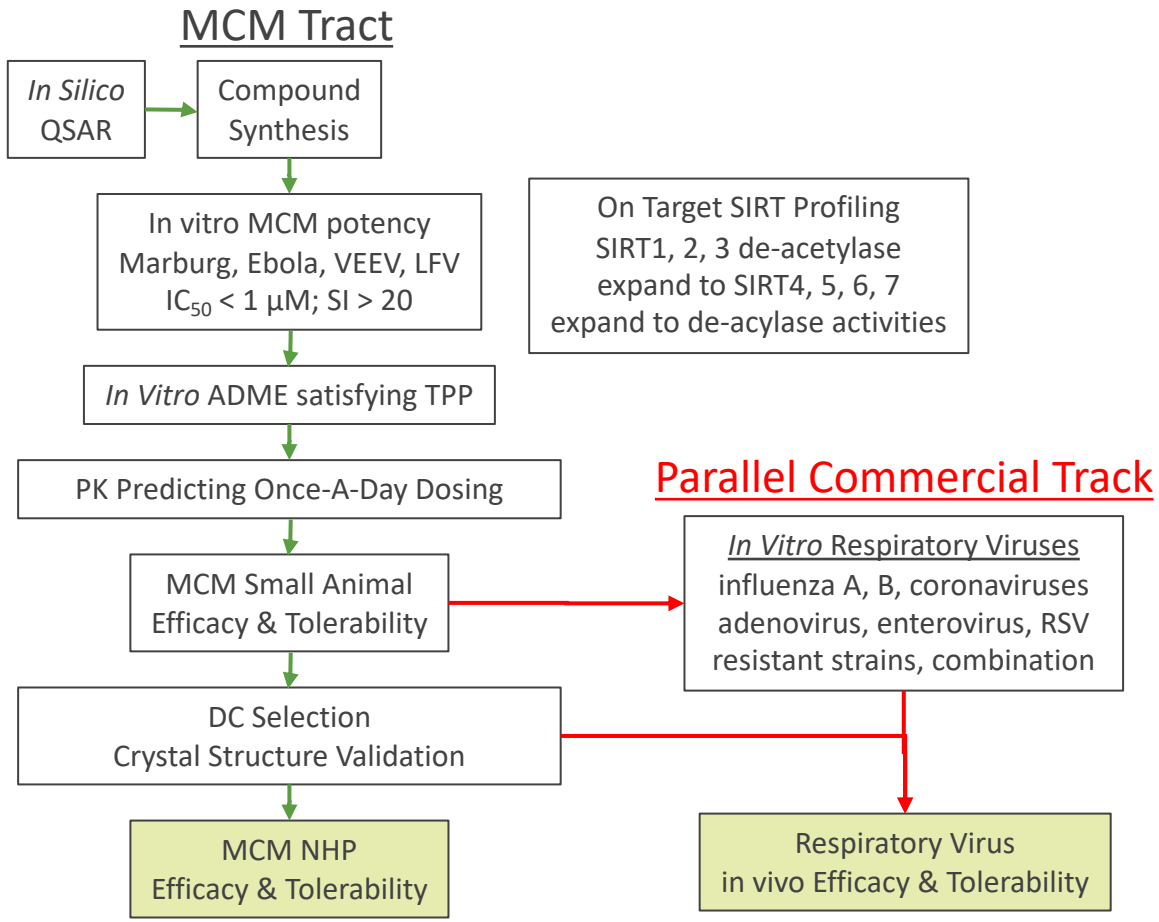
Time it takes to develop a new antiviral from scratch



EV-300: $34.3 M Defense Contract

Medical Counter Measure (MCM) to treat lethal acute Alphaviruses, Arenaviruses, and Filoviruses

- June 30, 2021: Contract execution
- $34.3 M, 5+ years to Phase 1
- Market approval via Animal Rule
- Evrys retains all commercialization
  - Government MCM stockpile
  - Evrys funded civilian acute pan-respiratory virus infections



EV-300: Broad effectiveness against diverse respiratory viruses

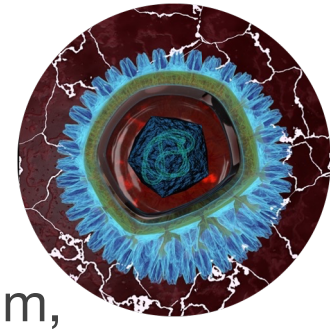
Virus	Virus Family	Cell Line (CC_{50})	Evrys LEAD EC_{50}	Comparator EC_{50}	Comparator Standard of Care (SOC)	Assay performed by
HCoV-OC43	beta coronavirus	human MRC5 (> 25)	0.54	1.6	hydroxychloroquine	Evrys Bio
SARS-CoV2	beta coronavirus	human Calu 3 (16)	0.64	0.07	remdesivir (SOC)	USAMRIID
Influenza A	orthomyxovirus	human HNBE (> 100)	<u>1.2</u>	<u>0.71</u>	ribavirin	NIAID DMID
Influenza B	orthomyxovirus	canine MDCK (> 5)	1.2	> 25	oseltamivir (SOC)	Evrys Bio
HCoV-229E	alpha coronavirus	human MRC5 (> 25)	1.6	0.04	remdesivir	ImQuest
Ad5	adenovirus	human MRC5 (> 25)	1.6	3.1	cidofovir	Evrys Bio
Influenza A^R	orthomyxovirus	canine MDCK (> 5)	2.5	9	oseltamivir (SOC)	Evrys Bio
MERS	beta coronavirus	human MRC5 (> 20)	4.1	0.07	remdesivir	USAMRIID
RSV	orthopneumovirus	human MRC5 (> 25)	6.7	16.1	ribavirin	Retrovirox

Shown EC_{50} concentration in µM providing 50% maximal antiviral effectiveness. Underlined indicates EC_{90} reported. CC_{50} drug concentration in µM resulting in 50% cytotoxicity; ">" indicates highest concentration tested.

U.S. Government (Govt) is a critical stakeholder in infectious disease

- Govt non-dilutive funding is a profit center for Evrys research, preclinical and clinical development
- Govt contracts will de-risk Evrys manufacturing risk
- Govt advanced purchase commitments for the Strategic National Stockpile will de-risk Evrys market risk
- Evrys govt network provides visibility to all infectious disease stakeholders (patients, physicians, drug companies, payers, FDA)
- Evrys Other Transaction Authority (OTA) contract with DoD is the same instrument used for 2020-21 COVID contracts

Expert Team

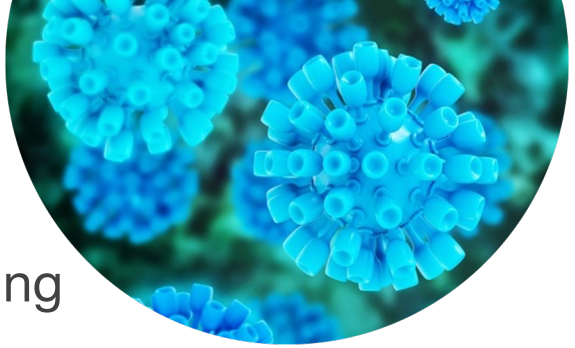


Lillian Chiang, PhD, MBA
Founder, CEO & President
Serial entrepreneur: Millennium, Purdue, Aestus, Kadmon

Thomas Shenk, PhD
Founder, Chairman of the Board
Princeton Professor: founded ImClone, MeiraGTx, Novalon, Cadus, PMV

Steve Holtzman, *Board Advisor*
Former CBO Biogen, CEO Infinity, CEO Decibel Therapeutics

Richard Whitley
Board Director and Clinical Advisor
Infectious disease Key Opinion Leader, Gilead Board Director



Jim Tonra, PhD
Chief Scientific Officer
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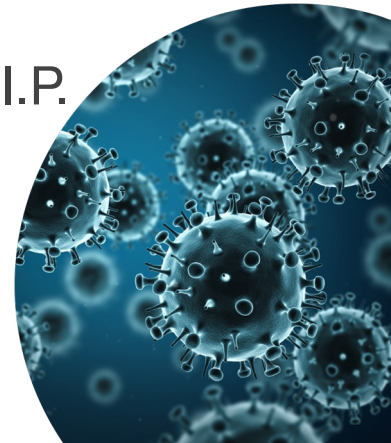
Stacy Remiszewski, PhD
Head of Chemistry
Former Director, Roche Oncology Chemistry.

Matthew Todd, PhD
Head of Enzyme Biology and Biophysics
Former Director, Janssen Lead Discovery.

Justine Bucholz
Chief of Operations & Project Management
Former Sr. Project Manager, PPD.

Aaron Dubberley
Head of Intellectual Property
Former Mt. Sinai Asst. Director. of I.P.

Dana Fowlkes, MD PhD
Chief Business Officer
Former CSO, Karo Bio AB



Contact: Lillian Chiang, CEO
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evrys bio

Evrys Bio Summary

- Transformational technology, strong I.P., huge unmet need
- Inventor, Team, Advisors, and Investors with track record
- Leveraged investment with government funding development
  - $47 M since inception including future milestones
  - Currently operating nearly cash-neutral
- Tipping point of technology with preclinical proof-of-concept