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Forward-Looking Statements

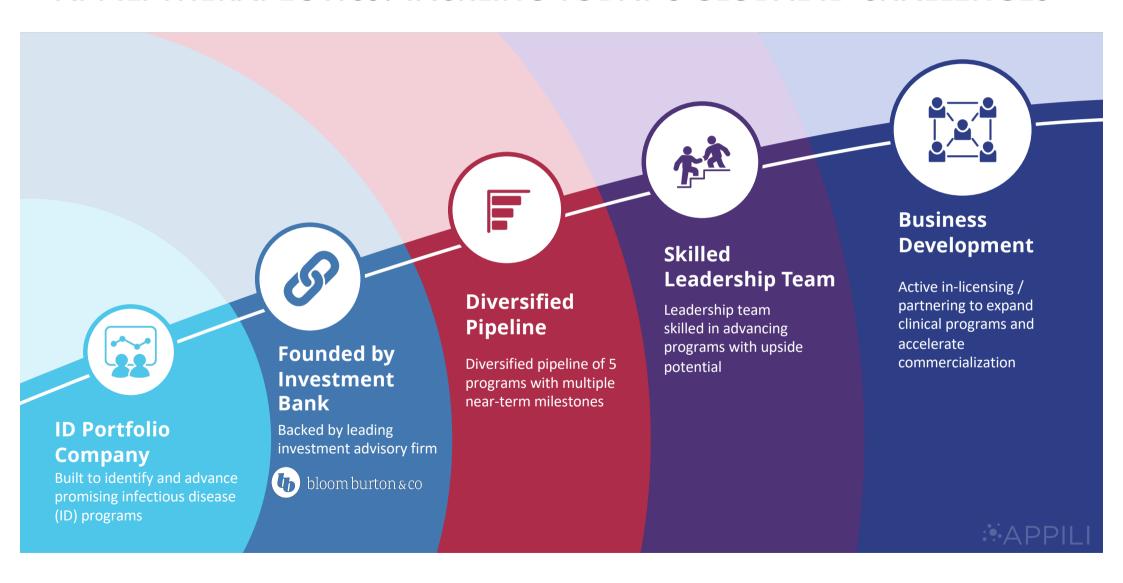
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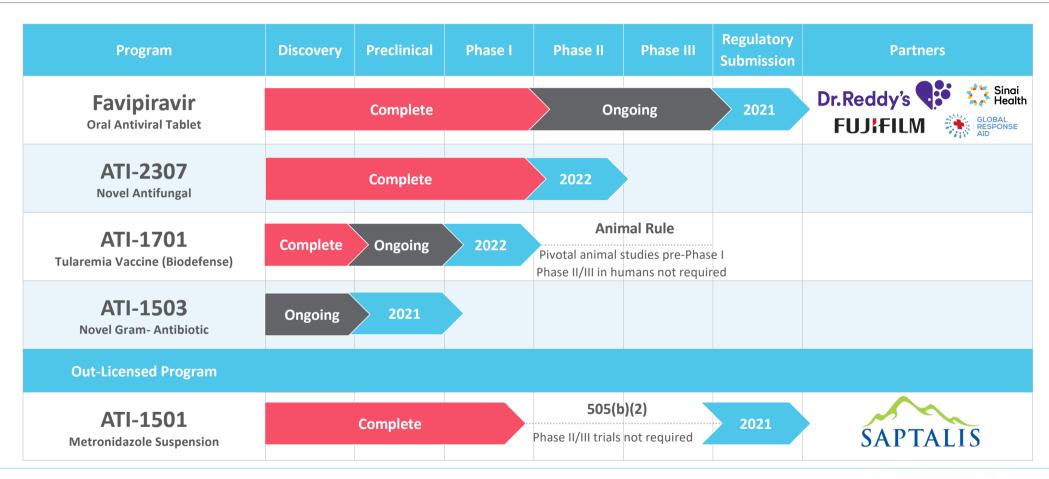
The Company does not assume any obligation to update any forward-looking statements, except as required by applicable securities laws.



APPILI THERAPEUTICS: TACKLING TODAY'S GLOBAL ID CHALLENGES



DIVERSIFIED PIPELINE DRIVING NEAR- AND LONG-TERM VALUE







Favipiravir

Antiviral for Treatment and Prevention of COVID-19

THE COVID-19 TREATMENT SPECTRUM

		No Therapy	Vaccine (EUA)	Avigan® (favipiravir)	Other R&D Antivirals (Not Approved)	Monoclonal Antibodies (EUA)	Convalescent plasma (EUA)	Remdesivir (Approved)	Immune Modulators (EUA)	Ventilators & Respiratory Support
Y	Pre Exposure No Disease	×								
	Post Exposure Unknown Disease	×								
	Asymptomatic					0				
(3)	Mild Disease									
(1)	Moderate Disease			₹			0			
	Severe Disease						0	0		



REEQONUSTM / AVIGAN®: PHASE 3 ORAL ANTIVIRAL FOR COVID-19





REEQONUSTM / Avigan[®] (favipiravir)

- Novel, broad-spectrum oral antiviral
- Approved in Russia and India for COVID-19
- Well-understood mechanism targeting essential viral polymerase
- Promising trial data for mild to moderate COVID-19
- Extensive clinical experience, safety database > 3,000 subjects
- Oral tablet suitable for use at home and outside the hospital
- Shelf stable and compatible with existing distribution channels

Global coalition advancing favipiravir for COVID-19

- · Appili working with global partners FUJIFILM, Dr. Reddy's, Global Response Aid
- Team built to support rapid development, and sustainable long-term supply
- Clinical program underway to definitively assess safety and efficacy
- Engaging with governments on access / supply

REEQONUSTM / AVIGAN® CLINICAL TRIALS

Appili program designed to support global registrations and leverage advantages of oral dose format with focus on early treatment and prevention in the community

Appili Lead Trial Phase 3

COVID-19 Early Treatment
Study (US + LATAM)
PRESECO

Status: Active, over 730 patients enrolled Interim Look: Completed May 2021 LATAM Expansion: Completed June 2021

Top-Line: Q3 2021

Appili Fol On Trial Phase 3

COVID-19 Post-Exposure Prophylaxis (US+)

PEPCO

Status: Protocol filed with FDA
First Patient In: Expected Q4 2021

Partner Trials Data from two hospital Phase 3 trials + three additional Phase 2/3 trials ongoing



THE VALUE OF ORAL ANTIVIRALS



Benefits of oral antivirals

- Opportunity to rapidly intervene prior to or early after infection when viral loads are highest
- · Potential to limit spread of disease, duration and progression to severe illness, hospitalizations
- Significant public health and economic benefits enabling reopening of the economy
- Durable need even after vaccine is available, protecting and treating high-risk groups including the elderly



Prior experience with Roche's Tamiflu® underscores value of oral antiviral, even when vaccine is available

2009 H1N1 Influenza Pandemic

Over \$3B

Global Tamiflu® Sales 2009 8.7M / \$905M

Estimated US Outpatient Rx / Sales
Excluding Stockpile
2009

Seasonal Influenza

Over \$500M

Annual US Tamiflu® Sales 2014-2015



URGENT UNMET NEEDS IN CRYPTOCOCCUS AND CANDIDA

Cryptococcus

- Opportunistic, invasive infection causing meningitis
- Heavy disease burden globally with high mortality
- Suboptimal outcomes with toxic standard of care

Global

US+

- Neglected, decades old public health crisis
- Unacceptable loss of life, political will to fix
- Severe infections treated with toxic agents
 - In-hospital mortality over 10%
 - Average hospital stay 15 days
 - Costs estimated over \$70K / case
- Underserved and growing orphan segment

Candida

- Among the most common fungal pathogens
- Resistance threatening existing antifungal arsenal
- CDC estimate over 34K drug-resistant cases in US annually
- Last resort agent amphotericin B is highly toxic
- Multiple segments of urgent unmet need, including:
 - Refractory and resistant Candida UTI
 - Emergent, highly resistant C. auris infections

The New York Times A Mysterious Infection, Spanning the Globe in a Climate of Secrecy

The rise of Candida auris embodies a serious and growing public health threat: drug-resistant germs.

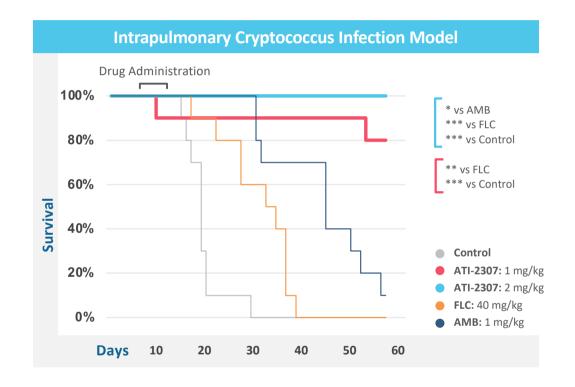


CDC (2018) https://www.cdc.gov/fungal/diseases/crvptococcosis-neoformans/statistics.html CDC (2019) AR Threats Report

ATI-2307: A NOVEL CLINICAL STAGE ANTIFUNGAL

- A novel antifungal with broad spectrum activity against a wide array of fungi, including Candida, Aspergillus and Cryptococcus
- 100% survival in lethal lung infection model
- Evaluated in 3 Phase 1 studies; safe and well tolerated at anticipated Phase 2 dose levels

Survival Data AMB = Amphotericin B FLC = Fluconazole */**/*** = p < 0.05 / 0.01 / 0.001 by log-rank test



New option for physicians to overcome difficult to treat and resistant fungal infections like Cryptococcus and Candida



MULTIPLE ATTRACTIVE MARKET OPPORTUNITIES

US Orphan Cryptococcal Meningitis Market

Over 5,000 Rx

Estimated amphotericin B Rx / year for CM and cryptococcosis



\$60K-\$90K per Rx

Premium pricing supported by payer research*



Over \$350M market opportunity

Annual US market potential at \$70K per Rx

+ US Refractory / Resistant Candida Markets



Drug-Resistant Candida

34.8K Cases / 1.7K Deaths

Estimates for 2017

Candida auris

90% resistant to at least ONE antifungal

30% resistant to at least TWO antifungals

318%

Case increase 2018 v 2015-2017

+ Ex-US Markets



ANTIFUNGAL BENCHMARKS AND VALUATIONS

Recent Approval: Cresemba®



- Developed by Basilea
- Azole Derivative
- FDA Approval in 2015

US License

Total Value: Over \$400M

+ double-digit royalties



Signed in 2010, amended in 2014, 2015

EU + APAC License

Total Value: Over \$700M

+ mid-teen royalties



Signed and amended in 2017

Valuations & Funds Raised*

Phase 2





\$120M Raise

Phase 3



\$185.3M

NASDAQ: SCYX, Jun 1, 2021



\$98.03M

NASDAQ: CDTX, Jun 1, 2021

+ Ex-US/Japan Partnership Total value: Over \$568M

+ double-digit royalties



Announced Sept 2019

PRIORITY REVIEW VOUCHER ELIGIBLE

If approved by the FDA for cryptococcal meningitis, candidate would be eligible for a priority review voucher

What is a priority review voucher (PRV)?

- Allow holder to accelerate FDA review of any NDA
- Granted by FDA to reward R&D in target areas
 - Rare pediatric disease
 - Tropical disease
 - Biodefense
- PRVs are transferrable, sale prices around \$100M



Date	Sell	Purchaser	Value (USD)	
H2 2014	BioMarin	Sanofi / Regeneron	\$67.5M	
H2 2014	Knight Therapeutics	Gilead	\$125M	
H1 2015	Asklepion / Retrophin	Sanofi	\$245M	
H2 2015	United Therapeutics	AbbVie	\$350M	
H2 2016	PaxVax	Gilead	\$290M	
2017	5 separate transactions		\$125M - \$150M	
2018	3 separate transactions	\$80M - \$110M		
2019	3 separate transactions		\$95M - \$105M	
H1 2020	Sarepta Therapeutics	Vifor Pharma	\$111M	
H2 2020	Lumos Pharma	Merck	\$100M	
H2 2020	Eiger Biopharma	Abbvie	\$95M	
H2 2020	Bayer	Argenx	\$98M	
H2 2020	Y-mAbs Therapeutics	United Therapeutics	\$105M	
H1 2021	Rhythm Pharmaceuticals	Alexion	\$100M	

At least two additional transactions with no financials disclosed, both involving Novo Nordisk as buyer





ATI-1701
Tularemia Vaccine

ATI-1701: BIODEFENSE VACCINE PROGRAM

Problem

- Francisella tularensis is 1,000X more infectious than anthrax and easily dispersed
- No FDA approved vaccine available
- Medical Counter Measure (MCM) needed for military, civilians

Solution

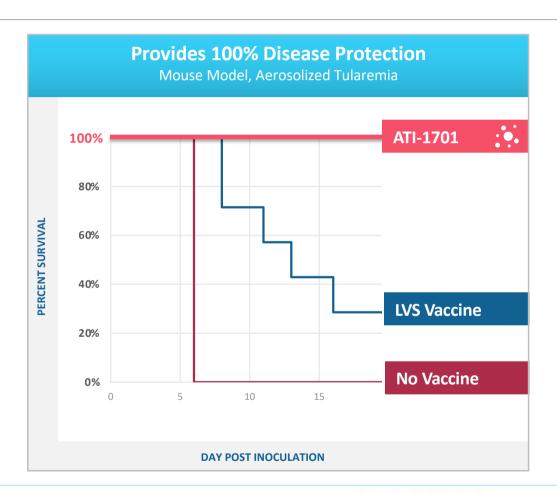
- ATI-1701 is a novel, live-attenuated tularemia vaccine candidate
- Superior to LVS in nonclinical study conferring 100% survival

Unique Development Path

- Alternative development per FDA's Animal Rule
- Priority Review + Fast Track designation
- US DOD DTRA supported with ~\$6M USD to May 2021
- Additional \$6.3M USD in DTRA funding announced October 2020

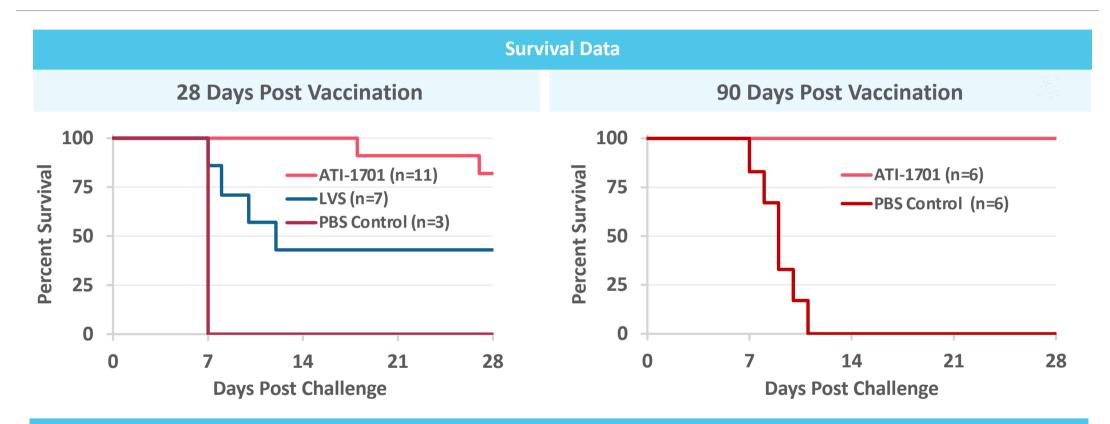
Program Milestones

- Validation work by DTRA Key primate data readout in 2021
- Correlates of protection work ongoing



ONGOING NON-HUMAN PRIMATE STUDY





ATI-1701 protective against lethal aerosolized F. tularensis challenge and superior to LVS in cynomolgus macaques





MARKET OPPORTUNITY

Civilian Stockpiling (US)

- Strategic National Stockpile (SNS) to secure medical counter measures for US civilians
- Managed by CDC, US Dept. of Health & Human Services (HHS)



Potential Military Use (US +)

- Tularemia weaponized since mid 1900s; Iran, North Korea and Russia may stockpile
- 500K+ Israeli, South Korean soldiers at risk
- Potential deployment to hot zones; 1.4M+ US soldiers deployed to Middle East in OIF / OEF

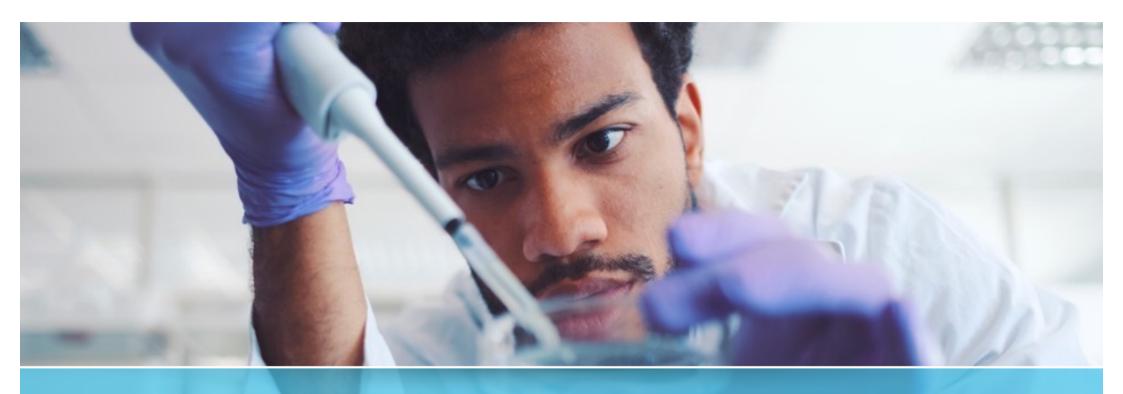


Stockpiling Benchmarks

- **SIGA (2018):** Up to \$629M for 1.7M courses of smallpox antiviral TPOXX®
- Bavarian Nordic (2017): Up to \$539M for bulk smallpox vaccine Imvamune®
- Emergent (2016): Up to \$1.6B for 52M units of anthrax vaccine NuThrax®
- Emergent (2011): Up to \$1.25B for 44.75M units of anthrax vaccine Biothrax®
- **SIGA (2011):** Up to \$472M for 2M courses of smallpox antiviral ST-246 (now TPOXX®)

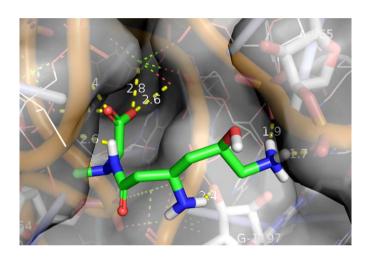
HHS has authority to procure biodefense agents prior to FDA approval

+ *PRV eligible* (\$100M+)



ATI-1503 Novel Class of Gram-Negative Antibiotics

NOVEL CLASS GRAM-NEGATIVE ANTIBIOTIC PROGRAM



ATI-1503 Program

- Developing novel class of antibiotics to address antibiotic resistance
- Novel mechanism, active vs Enterobacteriaceae, Pseudomonas, Acinetobacter
- Promising safety, PK, but original compound not potent enough
- Building on AstraZeneca program to improve potency

Recent Developments

- Novel structural biology approaches driving analogue design
- Efficacy gains now >10-fold compared to parent compound negamycin
- Demonstrated in vivo proof of concept vs Klebsiella and Escherichia
- Additional in vivo characterization underway focused on safety, PK/PD

Strong Partner Engagement and Funding

- Two Peer Reviewed Medical Research Program (PRMRP) awards: \$4.2M USD
- Funding from National Research Council of Canada: \$759K CDN
- Preclinical testing with partners at USAMRIID and NIAID













ATI-1501

Taste-Masked Liquid Metronidazole

TASTE-MASKED LIQUID METRONIDAZOLE

Opportunity

- Metronidazole is a front-line anti-infective that is heavily prescribed in US with 10M+ oral Rx but no approved liquid oral forms
- · Pediatrics and elderly with difficulty swallowing tablets must crush and resuspend
- Process exacerbates metronidazole's bitter taste = non-compliance, switching

Solution

- ATI-1501 is a proprietary, taste-masked liquid metronidazole formulation, evaluated in clinic
 - Demonstrated bioequivalence to solid metronidazole tablets
 - Revealed strong and clear palatability improvements vs crushed tablets

Outlicensing Deal

- Announced license agreement with Saptalis Pharmaceuticals for US rights in December 2019
- NDA filing expected in 2021







BUSINESS DEVELOPMENT: BUILDING AND ADVANCING ID PIPELINE



Company built to find and advance ID programs



Robust in-licensing strategy to identify overlooked assets

- Agnostic to any particular platform or technology
- Pharma, academia, government agencies
- Constantly analyzing programs to identify those that can address compelling unmet needs



Establishing relationships with pharma for future commercialization

SKILLED MANAGEMENT TEAM



ARMAND BALBONI

CHIEF EXECUTIVE OFFICER

Extensive drug development experience in civilian, academic, and military organizations







SR. DIRECTOR, MANUFACTURING AND PHARMACEUTICAL DEVELOPMENT
20+ years as a drug development professional and PhD chemist; discovery to Phase 3

MYRIAM TRIFST







YOAV GOLAN, MD

CHIEF MEDICAL OFFICER

30+ years as an infectious disease physician; published research on *C. difficile* infections







STÉPHANE PAQUETTE

SENIOR DIRECTOR, CORPORATE DEVELOPMENT

10+ years infectious disease and industry

R&D experience; PhD in virology & immunology







KIMBERLY STEPHENS

CHIEF FINANCIAL OFFICER

CPA, CA 20+ years of financial management and public company experience



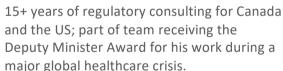




JASON MCEWAN

DIRECTOR, REGULATORY AFFAIRS

15+ years of regulatory consulting for Ca









DON CILLA, PHARMD, MBA
CHIEF DEVELOPMENT OFFICER

and invasive candidiasis

30+ years drug development experience, including clinical, clinical pharmacology and program leadership positions for many marketed compounds







BOARD OF DIRECTORS



IAN MORTIMER

CHAIR

President and Chief Financial Officer of Xenon Pharmaceuticals Inc, 20+ years of experience in the biotechnology sector





BRIAN BLOOM

MEMBER

Chairman and CEO of Bloom Burton & Co, 20+ years of capital market experience





JUERGEN FROEHLICH, MD

MEMBER

30+ years of biotech experience including all phases of drug development and regulatory interactions







THERESA MATKOVITS, PhD

MEMBER

20+ years of experience as a leader in global drug development, with extensive expertise in infectious disease





ROCHELLE STENZLER

MEMBER

25+ years of experience as a board director and senior operating executive in healthcare and other industries.



CYNAPSUS





ARMAND BALBONI

MEMBER

Extensive drug development experience in civilian, academic, and military organizations







FINANCIAL OVERVIEW AND CAPITAL STRUCTURE

FINANCING (As of June 1, 2021)

Capital Raised:

- \$68M raised in total
 - \$43.6M in equity
 - \$25.3M in government assistance

Cash & cash resources (Dec 31,2020)

• Cash & Short-term Investments: \$20.2M

Government grants over 2.5 years: \$2.6M USD

CAPITAL STRUCTURE (As of June 1, 2021)

62.8M Common shares outstanding

14.7M Warrants

6.7M Options

84.2M Fully diluted

STOCK INFORMATION (As of June 1, 2021)

TSX: APLI Graduated to TSX September 16, 2020

\$0.74 - \$1.60 52 week low-high

\$53.4M Market Cap

SIGNIFICANT OWNERSHIP

Bloom Burton & Co. K2 Principal Fund L.P.

Innovacorp

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