



Summit Therapeutics Q4 & FY 2025 Earnings Call

February 23, 2026
4:30pm ET

Forward Looking Statement

Any statements in this presentation about the Company's future expectations, plans and prospects, including but not limited to, statements about the clinical and preclinical development of the Company's product candidates, entry into and actions related to the Company's partnership with Akeso Inc., the Company's anticipated spending and cash runway, the therapeutic potential of the Company's product candidates, the potential commercialization of the Company's product candidates, the timing of initiation, completion and availability of data from clinical trials, the potential submission of applications for marketing approvals, the expected timing of BLA submissions or FDA decisions, potential acquisitions, statements about the previously disclosed At-The-Market equity offering program ("ATM Program"), the expected proceeds and uses thereof, the Company's estimates regarding stock-based compensation, and other statements containing the words "anticipate," "believe," "continue," "could," "estimate," "expect," "intend," "may," "plan," "potential," "predict," "project," "should," "target," "would," and similar expressions, constitute forward-looking statements within the meaning of The Private Securities Litigation Reform Act of 1995. Actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including the Company's ability to sell shares of our common stock under the ATM Program, the conditions affecting the capital markets, general economic, industry, or political conditions, including the effects of geopolitical developments, domestic and foreign trade policies, and monetary policies, the results of our evaluation of the underlying data in connection with the development and commercialization activities for ivonescimab, the outcome of discussions with regulatory authorities, including the Food and Drug Administration, the uncertainties inherent in the initiation of future clinical trials, availability and timing

of data from ongoing and future clinical trials, the results of such trials, and their success, global public health crises, that may affect timing and status of our clinical trials and operations, whether preliminary results from a clinical trial will be predictive of the final results of that trial or whether results of early clinical trials or preclinical studies will be indicative of the results of later clinical trials, whether business development opportunities to expand the Company's pipeline of drug candidates, including without limitation, through potential acquisitions of, and/or collaborations with, other entities occur, expectations for regulatory approvals, laws and regulations affecting government contracts and funding awards, availability of funding sufficient for the Company's foreseeable and unforeseeable operating expenses and capital expenditure requirements and other factors discussed in the "Risk Factors" and "Management's Discussion and Analysis of Financial Condition and Results of Operations" sections of filings that the Company makes with the Securities and Exchange Commission. Summit defines a "positive study" as a clinical study that with one or more prespecified primary endpoints in which one of those endpoints achieves a statistically significant benefit according to the protocol or statistical analysis plan. Any change to our ongoing trials could cause delays, affect our future expenses, and add uncertainty to our commercialization efforts, as well as to affect the likelihood of the successful completion of clinical development of ivonescimab. Accordingly, readers should not place undue reliance on forward-looking statements or information. In addition, any forward-looking statements included in this presentation represent the Company's views only as of the date of this release and should not be relied upon as representing the Company's views as of any subsequent date. The Company specifically disclaims any obligation to update any forward-looking statements included in this presentation.

HARMONi-3 Clinical Trial Update

● HARMONi-3:

- Phase III multi-regional clinical study in 1L NSCLC comparing ivonescimab + chemo vs. pembrolizumab + chemo
- For two separate cohorts, squamous and non-squamous histologies, statistical analyses for PFS and OS will be conducted separately (two separate ITT populations)

● February 2026 HARMONi-3 Updates:

- HARMONi-3 squamous cohort: patient screening completed Q1 2026
- Statistical plan amended to include interim PFS analysis of HARMONi-3 squamous cohort
 - Note: OS is expected to be immature at time of this interim PFS analysis

● Timing Expectations:

- **Q2 2026:** interim PFS analysis expected for HARMONi-3 squamous cohort
- **H2 2026:** final PFS & interim OS data for HARMONi-3 squamous cohort expected
- **H2 2026:** expected completion of enrollment for HARMONi-3 non-squamous cohort
- **H1 2027:** final PFS in HARMONi-3 non-squamous cohort

Q4 2025 & Current Highlights



Summit Collaborations:

GORTEC:

Phase III ILLUMINE study in HNSCC, expect FPI Q2 2026

RevMed:

First patient dosed Q1 2026

GSK:

Studies starting mid-2026



HARMONI

BLA Filed; PDUFA Nov 14, 2026

HARMONI-3

Squam. Interim PFS Q2¹

Squam. Final PFS, Int. OS H2 2026¹

Non-Squam. Final PFS H1 2027¹

HARMONI-7

Enrollment progressing

HARMONI-GI3

Enrollment initiated



HARMONI-A

2L+ EGFRm NSCLC
ivonescimab + chemo stat sig
OS vs. chemo

OS HR 0.74 (p=0.19)

HARMONI-6

1L Squamous NSCLC
ivonescimab + chemo stat sig
PFS vs. PD-1 + chemo

PFS HR 0.60 (p<0.0001)

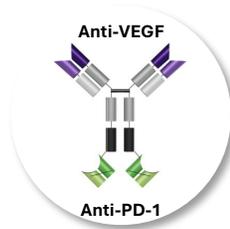


GORTEC: Groupe d'Oncologie Radiothérapie Tête Et Cou or Head and Neck Oncology and Radiotherapy Group; RevMed: Revolution Medicines
PDUFA: Prescription Drug User Fee Act; OS: overall survival; PFS: progression-free survival; HR: hazard ratio; PD-1=programmed cell death protein 1; References: 1. Summit Therapeutics Press Release February 23, 2026; Studies conducted by Akeso are single-region studies conducted in China.



Ivonescimab

Includes both Summit and Akeso trials



PD-1 x VEGF Class Frontrunner with Multi-Year Lead

Mission: Patients First

To improve quality of life, increase potential duration of life, by resolving serious unmet medical needs

Proven Track Record

Leadership in global oncology with a proven track record with high-speed and quality execution.

4 Global Phase III Trials

HARMONI HARMONI₃
HARMONI₇ HARMONI_{GB}

4
Phase III Trials with Positive Results

Positive Phase III Readouts to Date
The only in-class Phase III Readouts

15
Phase III Trials¹

Phase III Trials in Multiple Tumor Types¹

>4K
Trial Patients

Patients Dosed in All Clinical Trials³

2
Chinese Approvals

Indications Approved in China by the NMPA

44
Sponsored Trials

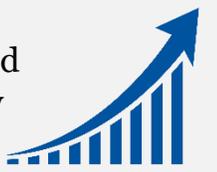
Total Ivonescimab Trials Sponsored by Summit or Akeso²

142
Total Trials

Total Trials Involving Ivonescimab on clinicaltrials.gov²

>60K
Commercial Patients in China

Patients Dosed Commercially in China³



Abbreviations: PD-1=programmed cell death protein 1; VEGF=vascular endothelial growth factor; NMPA = National Medical Products Administration (China); References: 1. Total Phase III clinical trials announced, enrolling, or completed as of February 20, 2026, via clinicaltrials.gov or public announcement; 2. Ivonescimab trials via clinicaltrials.gov; 3. Akeso public announcements



Ivonescimab Development: Summit + Akeso Pipelines



Phase I and II trials completed by Akeso.



These ivonescimab clinical trials are being conducted in China and/or Australia and are fully sponsored and managed by Akeso.

TUMOR TYPE	STUDY	LINE & INDICATION	REGIMEN	PHASE				STATUS
				1/1b	2	3	Approved	
Lung	HARMONI ₁	2L advanced EGFRm+ NSCLC	ivonescimab + chemo vs. placebo + chemo	██████████	██████████	██████████	██████████	Active, Recruiting Complete
	HARMONI ₃	1L metastatic NSCLC	ivonescimab + chemo vs. pembrolizumab + chemo	██████████	██████████	██████████	██████████	Recruiting
	HARMONI ₇	1L metastatic PD-L1 high (≥50%) NSCLC	ivonescimab vs. pembrolizumab	██████████	██████████	██████████	██████████	Recruiting
Gastrointestinal	HARMONI _{GTB}	1L metastatic CRC	ivonescimab + chemo vs. bevacizumab + chemo	██████████	██████████	██████████	██████████	Recruiting
Lung	HARMONI _A	2L advanced EGFRm+ NSCLC	ivonescimab + chemo vs. placebo + chemo	██████████	██████████	██████████	██████████	Active, Recruiting Complete
	HARMONI ₂	1L metastatic NSCLC (all PD-L1 levels)	ivonescimab vs. pembrolizumab	██████████	██████████	██████████	██████████	Active, Recruiting Complete
	HARMONI ₆	1L advanced or metastatic NSCLC	ivonescimab + chemo vs. tislelizumab + chemo	██████████	██████████	██████████	██████████	Active, Recruiting Complete
	HARMONI _{8A}	2L advanced or metastatic NSCLC progressed on or after PD-L1 therapy	ivonescimab + docetaxel vs. placebo + docetaxel	██████████	██████████	██████████	██████████	Not Yet Recruiting
	HARMONI ₉	Consolidation treatment SCLC not progressed after chemoradiation	ivonescimab vs. placebo	██████████	██████████	██████████	██████████	Recruiting
Breast	AK112-208	1L advanced or metastatic NSCLC	ivonescimab + cadonilimab ± chemo	██████████	██████████	██████████	██████████	Recruiting
	HARMONI _{BC1}	1L inoperable locally advanced/metastatic TNBC	ivonescimab + nab-paclitaxel vs. placebo + nab-paclitaxel	██████████	██████████	██████████	██████████	Recruiting
Gynecologic	AK117-203	1L metastatic TNBC	ivonescimab + chemo	██████████	██████████	██████████	██████████	Recruiting
	AK104-221	2L OC	ivonescimab ± chemo ± cadonilimab	██████████	██████████	██████████	██████████	Recruiting
Head and Neck	AK112-211	1L platinum-sensitive OC	ivonescimab ± chemo ± olaparib	██████████	██████████	██████████	██████████	Recruiting
	HARMONI _{HN1}	1L recurrent or metastatic HNSCC with PD-L1 positive (CPS ≥1)	ivonescimab + AK117 vs. placebo + pembrolizumab	██████████	██████████	██████████	██████████	Recruiting
Gastrointestinal	HARMONI _{GI1}	1L unresectable locally advanced or metastatic BTC	ivonescimab + chemo vs. durvalumab + chemo	██████████	██████████	██████████	██████████	Active, Recruiting Complete
	HARMONI _{GI2}	1L metastatic PDAC	ivonescimab + chemo ± AK117 vs. placebo + chemo	██████████	██████████	██████████	██████████	Recruiting
	HARMONI _{GI6}	1L metastatic CRC	ivonescimab + chemo vs. bevacizumab + chemo	██████████	██████████	██████████	██████████	Recruiting
	AK112-209	1L advanced HCC	ivonescimab ± anti-TIGIT antibody ± cadonilimab ± anti-TIGIT/TGF-β vs. sintilimab + bevacizumab	██████████	██████████	██████████	██████████	Recruiting
	AK112-210	1L metastatic PDAC	ivonescimab ± cadonilimab ± AG vs. AG	██████████	██████████	██████████	██████████	Recruiting
	AK119-202	1L or 2L microsatellite stable CRC	ivonescimab + anti-CD73 mAb ± chemo	██████████	██████████	██████████	██████████	Recruiting
Various Cancers	AK130-201	2L advanced BTC	ivonescimab ± anti-TIGIT/TGF-β or ivonescimab	██████████	██████████	██████████	██████████	Not yet recruiting
	AK117-202	1L or 2L advanced or metastatic NSCLC, GEJ, BTC, PDAC	ivonescimab + ligufalimab ± chemo	██████████	██████████	██████████	██████████	Active, Not Recruiting
	AK127-104	1L advanced malignant tumors	ivonescimab + anti-TIGIT antibody	██████████	██████████	██████████	██████████	Not yet recruiting

Abbreviations: 1L=first-line; 2L=second-line; AG=albumin-bound paclitaxel plus gemcitabine; BTC=biliary tract cancer; Chemo=chemotherapy; CPS=combined positive score; CRI=colorectal cancer; EGFRm+=epidermal growth factor receptor mutant positive; GEJ=gastroesophageal junction; HCC=hepatocellular carcinoma; HNSCC=head and neck squamous cell carcinoma; mAb=monoclonal antibody; NSCLC=non-small-cell lung cancer; OC=ovarian cancer; PD-L1=programmed cell death-ligand 1; PDAC=pancreatic ductal adenocarcinoma; SCLC=Small Cell Lung Cancer; TIGIT=T cell immunoreceptor with Ig and ITIM domains; TNBC=triple negative breast cancer; vs.=versus. Reference: ClinicalTrials.gov



Ivonescimab Development: Summit Pipeline

TUMOR TYPE	STUDY	LINE & INDICATION	REGIMEN	PHASE				STATUS
				1/1b	2	3	Approved	
Lung	HARMON ¹	2L advanced EGFR+ NSCLC	ivonescimab + chemo vs. placebo + chemo					Active, Recruiting Complete
	HARMON ^{1,3}	1L metastatic NSCLC	ivonescimab + chemo vs. pembrolizumab + chemo					Recruiting
	HARMON ^{1,7}	1L metastatic PD-L1 high (≥50%) NSCLC	ivonescimab vs. pembrolizumab					Recruiting
Gastrointestinal	I HARMON ^{1-GT}	1L metastatic CRC	ivonescimab + chemo vs. bevacizumab + chemo					Recruiting

Phase I and II trials completed by Akeso.

Collaborations

GORTEC: Ph3 ILLUMINE Study: HNSCC
RevMed: Novel RAS(ON)i: NSCLC, PDAC, CRC
GSK: Novel B7-H3: multi-tumor incl. SCLC
More Planned in 2026

RASi

ADC

>60 ISTs Supported¹

15 Currently Enrolling
 5 via MD Anderson Collaboration

>46

Ivonescimab Posters,
 Publications & Presentations²

Present-time biopharma confidence in ivonescimab is a significant governor in our go-forward clinical development expense

Summit planning to initiate additional set of Phase III studies with continuous details coming throughout 2026



References: 1. In Summit license territories, Data on File 55. Summit Therapeutics Inc. Supported = at a minimum, a notification of support communicated to PI; 2. Publications available at smmtx.com, Accessed on Jan 6, 2026. Abbreviations: 1L=first-line; 2L=second-line; ADC=antibody drug conjugate; Chemo=chemotherapy; CRC=colorectal cancer; EGFR+=epidermal growth factor receptor mutant positive; ISTs=Investigator Sponsored Trials; NSCLC=non-small-cell lung cancer; PDAC=pancreatic ductal adenocarcinoma; HNSCC=head and neck squamous cell carcinoma; PD-L1=programmed cell death-ligand 1; RAS=renin-angiotensin system; RASi=RAS inhibitor; RAS(ON)i=RAS inhibitor to RAS proteins in ON state (revmed.com/science, Accessed Jan 10, 2026); SCLC=small cell lung cancer; incl.=including; vs.=versus. Reference: ClinicalTrials.gov



Ivonescimab

Four Phase III Clinical Studies with Positive Results

1L NSCLC

Ivonescimab vs. Anti-PD-1 +/- chemo

HARMONI-2



PD-L1 Positive, Monotherapy
**Ivonescimab vs.
pembrolizumab**

Presented at WCLC 2024
Presidential Symposium¹
*The Lancet*²

Approved indication in China

Awaiting data
maturation for OS

HARMONI-6



Squamous, PD-L1 All-Comers
**Ivonescimab + chemo vs.
tislelizumab (PD-1) + chemo**

Presented at ESMO 2025
Presidential Symposium³
*The Lancet*⁴

sNDA pending in China

Awaiting data
maturation for OS

EGFRm NSCLC Post-TKI

Ivonescimab + Chemo vs. Placebo + Chemo

HARMONI-A



EGFRm after a TKI
**Ivonescimab + chemo vs.
placebo + chemo**

Presented at ASCO 2024⁵
OS Update: SITC Nov. 2025⁷
*JAMA*⁶

Approved indication in China

HARMONI



EGFRm after a 3rd-gen TKI
**Ivonescimab + chemo vs.
placebo + chemo**

Presented at WCLC 2025
Presidential Symposium⁸
US BLA submitted Q4 2025

References: 1. Wang C, et al. HARMONI-2. Presented at WCLC 2024.; 2. Xiong A, et al. *Lancet*. 2025;405(10481):839-849; 3. Lu S, et al. HARMONI-6. Presented at ESMO 2025.; 4. Chen Z, et al. *Lancet*. 2025;406(10515):2078-2088.; 5. Zhang L, et al. HARMONI-A study. Presented at ASCO 2024.; 6. Fang W, et al. *JAMA*. 2024;332(7):561-570.; 7. Zhang L, et al. Final OS Analysis: HARMONI-A. Presented at SITC 2025.; 8. Goldman J, et al. HARMONI. Presented at WCLC 2025. Abbreviations: 1L=first-line; 2L=second-line; ASCO=American Society of Clinical Oncology; chemo=chemotherapy; EGFRm=epidermal growth factor receptor mutation; ESMO=European Society for Medical Oncology; gen=generation; JAMA=The Journal of the American Medical Association; NSCLC=non-small cell lung cancer; OS=overall survival; PD-1=programmed cell death protein 1; PD-L1=programmed cell death-ligand 1; SITC=The Society for Immunotherapy of Cancer; sNDA=Supplemental New Drug Application (for marketing authorization); TKI=tyrosine kinase inhibitor; VEGF=vascular endothelial growth factor; vs.=versus; WCLC=World Conference on Lung Cancer.

Platform Opportunity



> 50 approved indications¹
for PD-(L)1 Inhibitors +
VEGF Inhibitors

Checkpoint Inhibitor Global Market

> \$90B in 2028²
>\$20B NSCLC

PD-(L)1: >\$50B in 2024³
\$30B pembrolizumab in 2024⁴



> \$110B

VEGF Inhibitor Global Market

> \$20B in 2028⁵

Potential growth beyond current PD-(L)1 & VEGF indications

*Examples of opportunities include:
PD-L1 low TNBC,
EGFRm NSCLC*

1. KEYTRUDA® USPI, OPDIVO® USPI, LIBTAYO® USPI, IMFINZI® USPI, BAVENCIO® USPI, JEMPERLI® USPI, TECENTRIQ® USPI, ZYNYZ® USPI, AVASTIN® USPI, CYRAMZA® USPI, LENVIMA® USPI, INLYTA® USPI, SUTENT® USPI. 2. TD Cowen and IQVIA, estimates. 3. Stifel report, estimate; compilation of Form 10-K and 20-F as filed with the US SEC. 4. MRK 2024 Form 10-K, as filed with the US SEC. 5. TD Cowen and IQVIA, estimate. Abbreviations: EGFRm=epidermal growth factor receptor mutation; NSCLC=non-small-cell lung cancer; PD-1=programmed cell death protein 1; PD-L1=programmed cell death-ligand 1; TNBC=triple-negative breast cancer; VEGF=vascular endothelial growth factor

Upcoming Catalysts: Shaping the Path Forward



FY26

Further details to continue for new global Phase IIIs

1H26

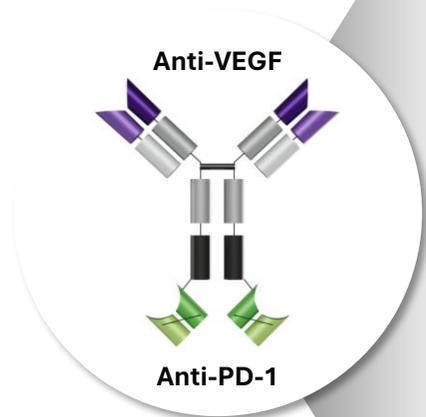
HARMONi-3 SQ: Interim PFS analysis expected
ILLUMINE: Coop group Phase III HNSCC study FPI expected

2H26

HARMONi-3 SQ: Final PFS, interim OS data readout expected
HARMONi-3 nSQ: Completion of enrollment expected
HARMONi: BLA PDUFA Date: EGFRm NSCLC post-TKI

1H27

HARMONi-3 nSQ: Final PFS data readout expected



Abbreviations: Coop=cooperative; HNSCC=head and neck squamous cell carcinoma; TKI=tyrosine kinase inhibitor; BLA=Biologics License Application; EGFRm=epidermal growth factor receptor mutant; NSCLC=non-small-cell lung cancer; nSQ=non-squamous; OS=overall survival; PD-1=programmed cell death protein 1; PFS=progression-free survival; SQ=squamous; VEGF=vascular endothelial growth factor; PDUFA=Prescription Drug User Fee Act; PDUFA Date: Targeted action date by the health authority (US Food & Drug Administration) for BLA application; FY=fiscal year; 1H=first half; 2H=second half.

Strong Balance Sheet to Kick Off 2026

\$713.4M

Cash

as of December 31, 2025

\$0

No Debt

as of December 31, 2025

Financial Summary Q4'25 vs. Q3'25



	Three Months Ended (in millions)	
	December 31, 2025	September 30, 2025
Total GAAP Operating Expenses	\$ 225.0	\$ 234.2
Research and development	147.3	131.1
General and administrative	77.7	103.1
Non-GAAP Operating Expenses	\$ 113.3	\$ 103.4
Non-GAAP Research and Development ⁽¹⁾	102.0	90.5
Non-GAAP General and Administrative ⁽¹⁾	11.3	12.9
GAAP Net Loss	\$ (219.2)	\$ (231.8)
Non-GAAP Net Loss	\$ (107.5)	\$ (101.0)

(1) Excludes stock-based compensation

(1) Excludes stock-based compensation
Refer to the next slides for reconciliations between Generally Accepted Accounting Principles (GAAP) and Non-GAAP financial measures.

Schedule Reconciling Selected Non-GAAP Financial Measures



	Three Months Ended (in millions)	
	December 31, 2025	September 30, 2025
Reconciliation of GAAP to Non-GAAP Research and Development Expense		
GAAP Research and development	\$ 147.3	\$ 131.1
Stock-based compensation (Note 1)	(45.3)	(40.6)
Non-GAAP Research and Development	\$ 102.0	\$ 90.5
Reconciliation of GAAP to Non-GAAP General and Administrative Expenses		
GAAP General and administrative	\$ 77.7	\$ 103.1
Stock-based compensation (Note 1)	(66.4)	(90.2)
Non-GAAP General and Administrative	\$ 11.3	\$ 12.9
Reconciliation of GAAP to Non-GAAP Operating Expenses		
GAAP Operating expenses	\$ 225.0	\$ 234.2
Stock-based compensation (Note 1)	(111.7)	(130.8)
Non-GAAP Operating Expense	\$ 113.3	\$ 103.4

Note 1: Stock-based compensation is a non-cash charge and costs calculated for this expense can vary year-over-year depending on the stock price of awards on the date of grant as well as the timing of compensation award arrangements.

Schedule Reconciling Selected Non-GAAP Financial Measures



	Three Months Ended (in millions)	
	December 31, 2025	September 30, 2025
Reconciliation of GAAP Net Loss to Non-GAAP Net Loss		
GAAP Net Loss	\$ (219.2)	\$ (231.8)
Stock-based compensation (Note 1)	111.7	130.8
Non-GAAP Net Loss	\$ (107.5)	\$ (101.0)
Reconciliation of GAAP EPS to Non-GAAP EPS		
GAAP Loss Per Share	\$ (0.29)	\$ (0.31)
Stock-based compensation (Note 1)	0.15	0.18
Non-GAAP Loss Per Share	\$ (0.14)	\$ (0.13)
Basic and Diluted Weighted Average Shares Outstanding	766.4	743.4

Note 1: Stock-based compensation is a non-cash charge and costs calculated for this expense can vary year-over-year depending on the stock price of awards on the date of grant as well as the timing of compensation award arrangements.



Bob Duggan

*Chairman & Co-Chief
Executive Officer*



Dr. Maky Zanganeh

*President & Co-Chief
Executive Officer*



Manmeet Soni

*Chief Operating
Officer & Chief
Financial Officer*



Dave Gancarz

*Chief Business &
Strategy Officer*



Dr. Allen Yang

*Chief R&D
Officer*

