ONENESS

J.P. Morgan Healthcare Conference 2026

Transforming Global Diabetes Outcomes

From limb-saving DFU therapy to next-gen obesity innovation

9:30-9:55 AM January 15th, 2026 (PST)

Disclaimer

This presentation contains forward looking statements. All statements other than statements of historical facts included in this presentation, including, without limitation, those regarding our financial position, business strategy, plans and objectives of management for future operations (including development plans and objectives relating to our products), are forward looking statements. Such forward looking statements involve known and unknown risks, uncertainties and other factors which may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by such forward looking statements. Such forward looking statements are based on numerous assumptions regarding our present and future business strategies and the environment in which we will operate in the future. The important factors that could cause our actual results, performance or achievements to differ materially from those in the forward looking statements include, among others, risks associated with product discovery and development, uncertainties related to the outcome of clinical trials, slower than expected rates of patient recruitment, unforeseen safety issues resulting from the administration of our products in patients, uncertainties related to product manufacturing, the lack of market acceptance of our products, our inability to manage growth, the competitive environment in relation to our business area and markets, our inability to attract and retain suitably qualified personnel, the unenforceability or lack of protection of our patents and proprietary rights, our relationships with affiliated entities, changes and developments in technology which may render our products obsolete, and other factors.

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About Oneness

Innovation. Globalization. Sustainability.

Since 2008

A public-listed biotech (TPEx: 4743) dedicated to developing **First-in-Class** and **Best-in-Class** innovative products in metabolic disorders for the global market.

2020 MILESTONE

Global Licensing Deal with LEO Pharma

$530 M

Total Deal Value

2024 MILESTONE

Commercial Licensing with CR Double Crane

$34 M

Upfront Payment

2026 STRATEGY

Global Commercialization of Fespixon® and Bonvadis®

Market Launch

S&P Global Sustainability Yearbook (2023–2024)

The only pharmaceutical company from Taiwan included, demonstrating world-class ESG performance.

Top 10

GLOBALLY (PHARMA)

Oneness Manufacturing Site

World-Class Production & Quality Standards

Plant Area

80,000 m²

Annual Capacity

25 Million

tubes/yr

(15g topical cream)

US FDA

QSR 21 CFR 820

Fully Compliant Systemd

EU

ISO 13485

Certified for Medical Devices

AU, CA, BR

MDSAP

Certified for Medical Devices

International Standard

PIC/s GMP

Fully Certified Facility

Executive Summary : The Investment Thesis

Commercial Certainty Diabetic Foot Ulcer (ON101)

- Validated Science: First-in-class M1/M2 macrophage regulation showing ~80% amputation reduction[1].
- Global Footprint: Target 70 countries market access
- Payer Value: Direct cost-savings for >$300 B healthcare burden[2].

Innovation Upside Obesity (SNS851)

- Novel Mechanism: Liver-targeted mitochondrial metabolic reprogramming.
- Post-GLP-1 Era: Positioned as the essential “Maintenance Partner” for >$100B GLP-1 landscape[3] to address muscle loss & weight rebound.

Strategic Discipline Operational Excellence

- Manufacturing: In-house PIC/S GMP plant ensures margin & supply.
- Financials: Disciplined cash position with sufficient runway through key inflection points.
- Corporate ESG: S&P Global Top 10%, DJSI Emerging Markets Index and Bloomberg GEI

1. Follow-up outcomes from ON101 RCT & RWE
2. Int Wound J. 2024 Jan 31;21(2):e14709
3. J.P. Morgan Research : https://www.jpmorgan.com/insights/global-research/current-events/obesity-drugs accessed on Dec 3rd 2025

The Global Diabetes Reality : 2 Critical Unmet Needs

Diabetic Foot Ulcers & Amputation

The“SilentDriver” of Amputation

- Clinical Gap : 500+M diabetic patients[1], 1/3 will develop DFU[2], 31% proceed to amputation[3]
- Economic Burden : $300 B+ annual wound care[4] spending with limited therapeutic outcomes

Opportunity *Improved wound healing directly reduces amputation and healthcare cost*

Obesity & Metabolic

The “Post-GLP-1” Gap

- Tolerability Issues[5-6]: 80% patients have GI side effects result in 15% patients discontinued treatment
- Durability Issues[7]: 70% patients experience weight rebound after discontinued GLP-1 in 6 – 12 months

Opportunity *Improved tolerability profile for durable weight loss without muscle loss*

1. IDF Atlas 11th Edition | 2. N Engl J Med. 2017 Jun 15;376(24):2367-23753. | 3. Int Wound J. 2024 Jul 7;21(7):e14931 | 4. Int Wound J. 2024 Jan 31;21(2):e14709. | 5. N Engl J Med . 2025 Jul 3;393(1):26-36
6. Obesity (Silver Spring) . 2025 Dec;33(12):2296-2303 | 7. J Clin Med. 2025 May 28;14(11):3791

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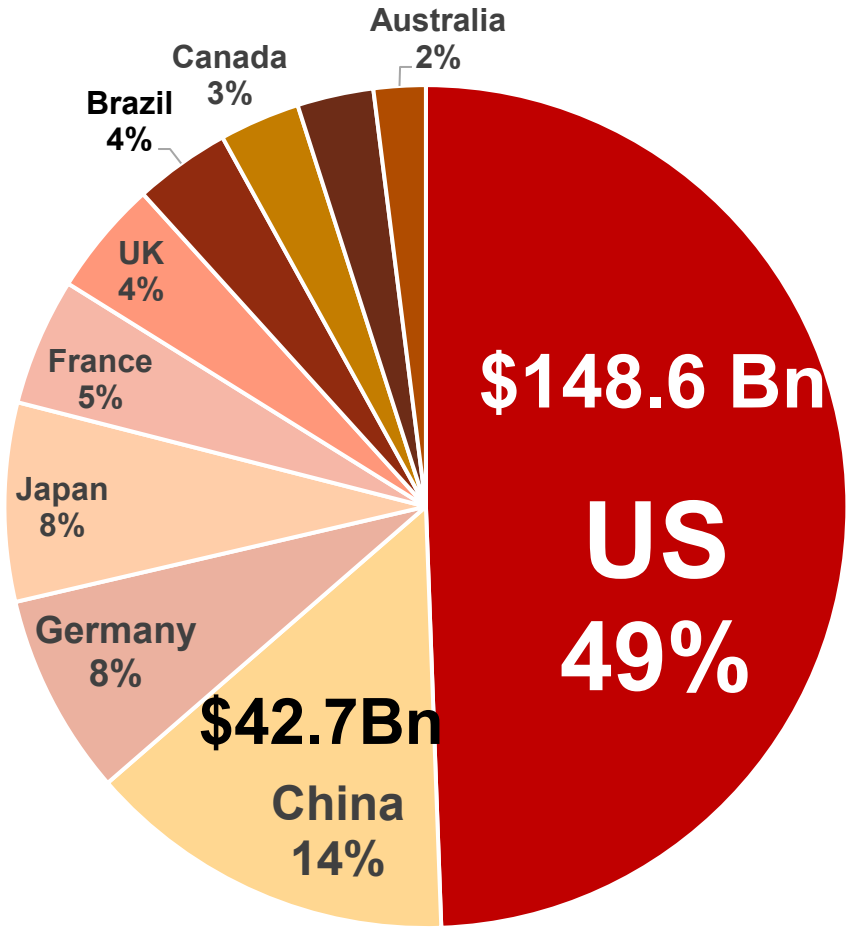
Fespixon® / Bonvadis® - Commercial Stage

First-in-class Wound Healing Innovation

Global Wound Care Burden > US$300 Bn



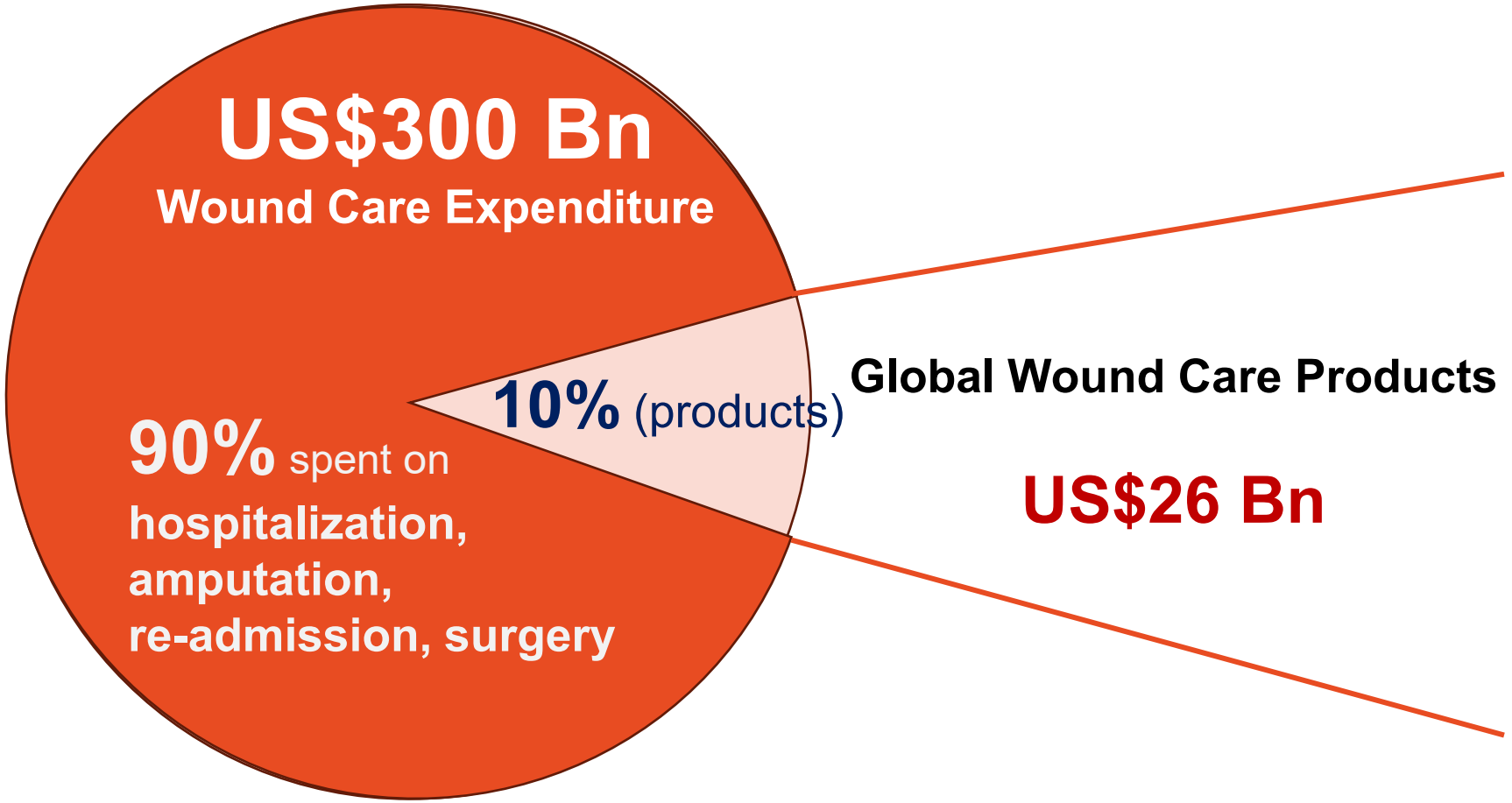
The US represents the largest market –

~50% of global spending

Top 10 spenders : [1] Int Wound J. 2023 Nov 14;20(10):3935–3938 [2] Int Wound J. 2024 Jan 31;21(2):e14709

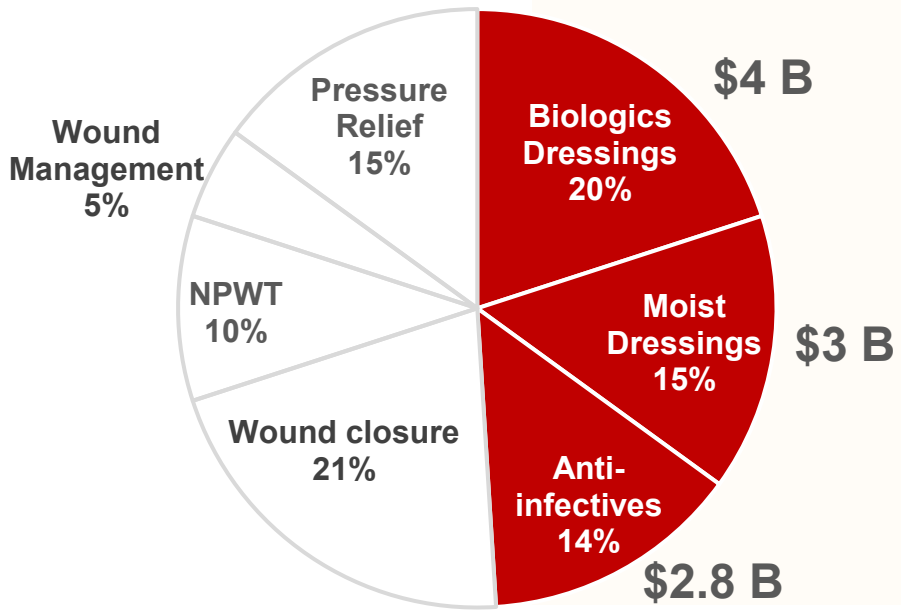
90% Wound Care Expenditures in Hospital Settings

Lack of effective treatments for wound healing



- Moisture dressing
- Growth factors
- Skin substitutes
- Oxygen system
- NPWT
- Offloading

Opens a Transformational Revenue Stream



$10B target market for Fespixon® / Bonvadis®

I. Reduce inflammation

Front. Pharmacology (2019)
JID Innovations (2022)
Curr. Issues Mol. Biol. (2025)

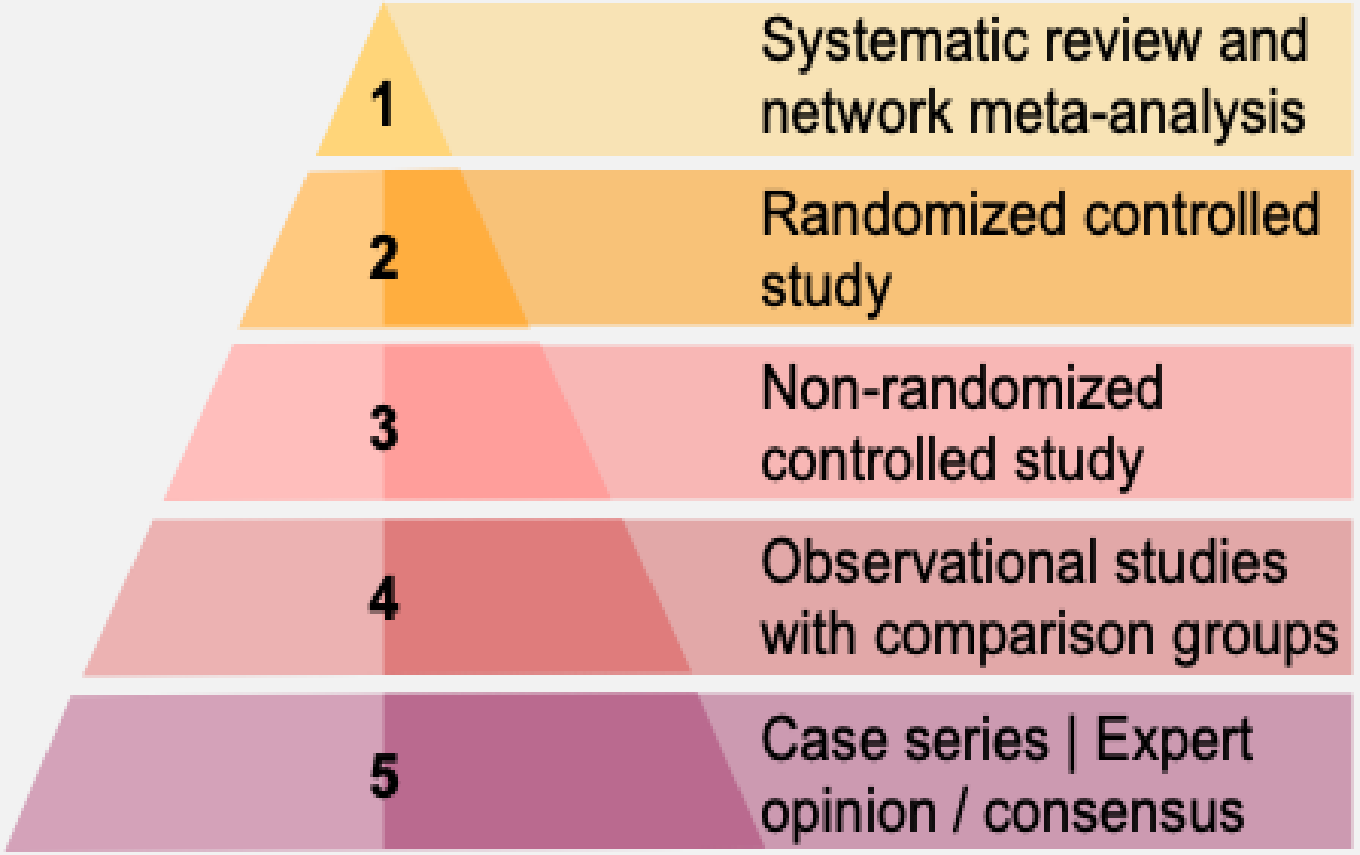
II. Promote tissue repair

JID Innovations (2022)
Curr. Issues Mol. Biol. (2025)

III. Minimize scar formation

Aesthetic Surgery Journal (2023)

Globally Validated by Science, RCT and RWE



Manuscript submitted. ON101 ranked among top 5

JAMA Network Open | Advances in Wound Care | Hindawi

2 ongoing

Aesthetic Surgery Journal | JWC | International Wound Journal

Mayo Clinic Proceedings | International Wound Journal

中华内分泌代谢杂志 | Acta Cardiologica Sinica | current issues in molecular biology

JWC | Gavin Publishers

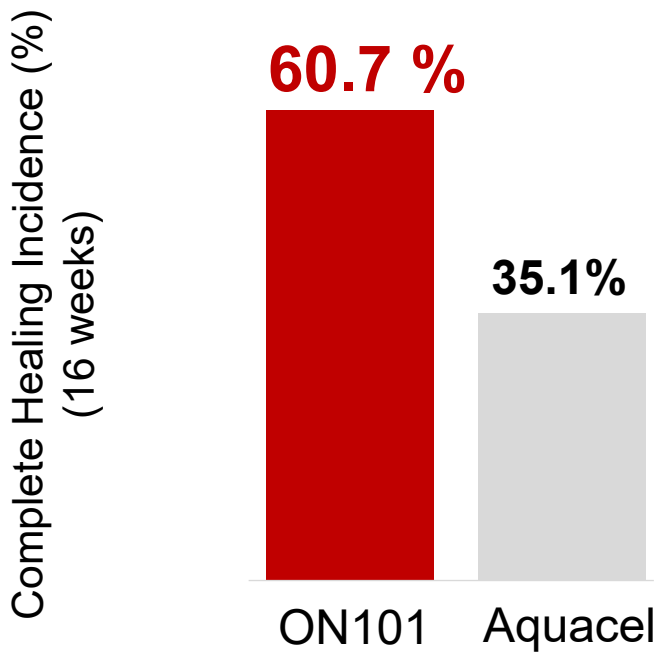
Case Reports in Clinical Medicine

RCT : Superiority to Standard of Care

Phase 3 MRCT

P=0.0001

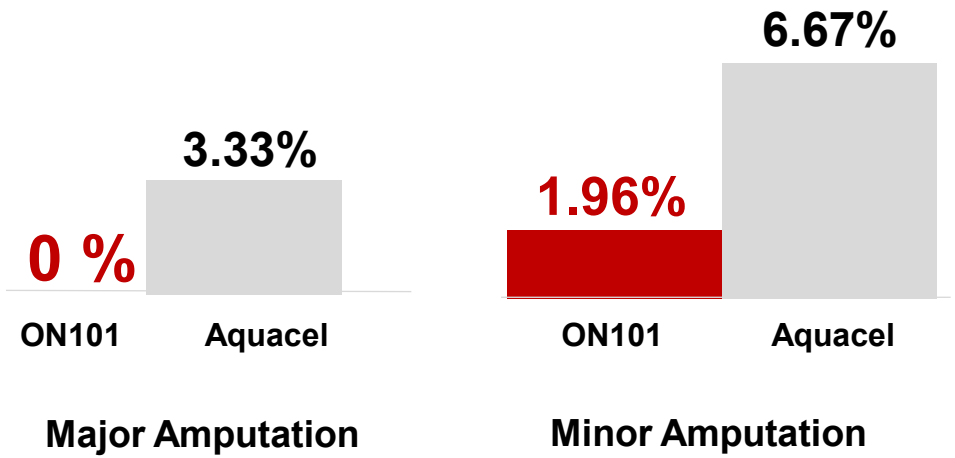
Wagner Grade 1 – 2 (N=236)



Phase 3 MRCT (2-yr Follow-up)

80% Reduction

in overall amputation risk vs control



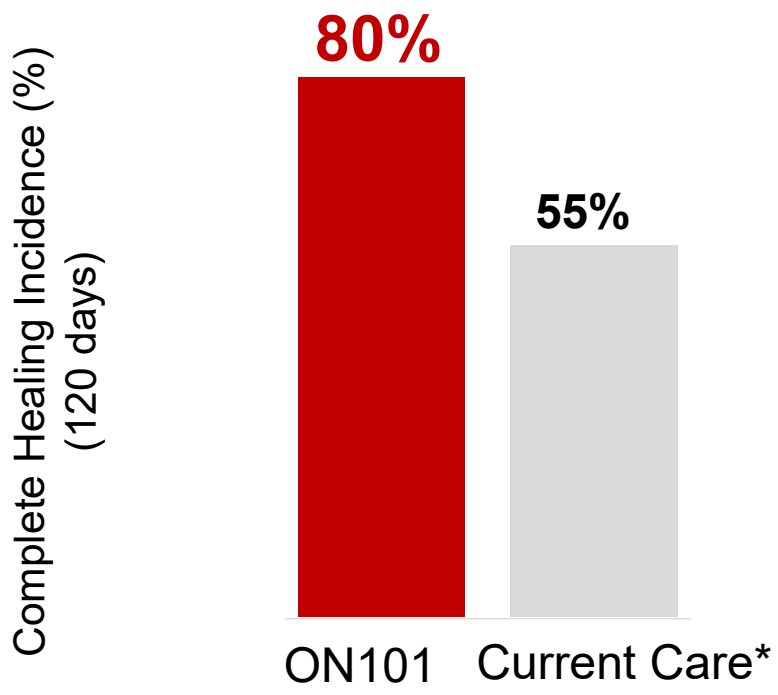
[1] JAMA Netw Open. 2021 Sep 1;4(9):e2122607
[2] ON101CLOS01study report

RWE: Superiority to Current Advanced Therapies

Real-world Study

P=0.0017

Wagner Grade 1 – 3 (N=178)

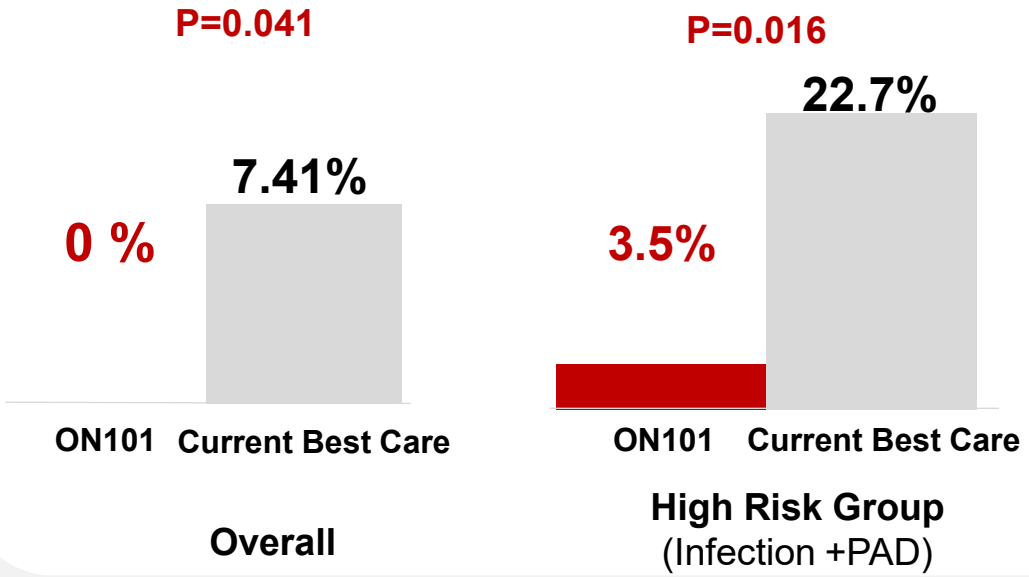


*Negative Wound Pressure Therapy, Skin Substitutes, Flap, Skin Graft, Silver Foam Dressing

Real-world Study (1-yr Follow-up)

85% Reduction

in overall and high amputation risk vs control



Mayo Clin Proc. 2025 Aug 2:S0025-6196(25)00076-X

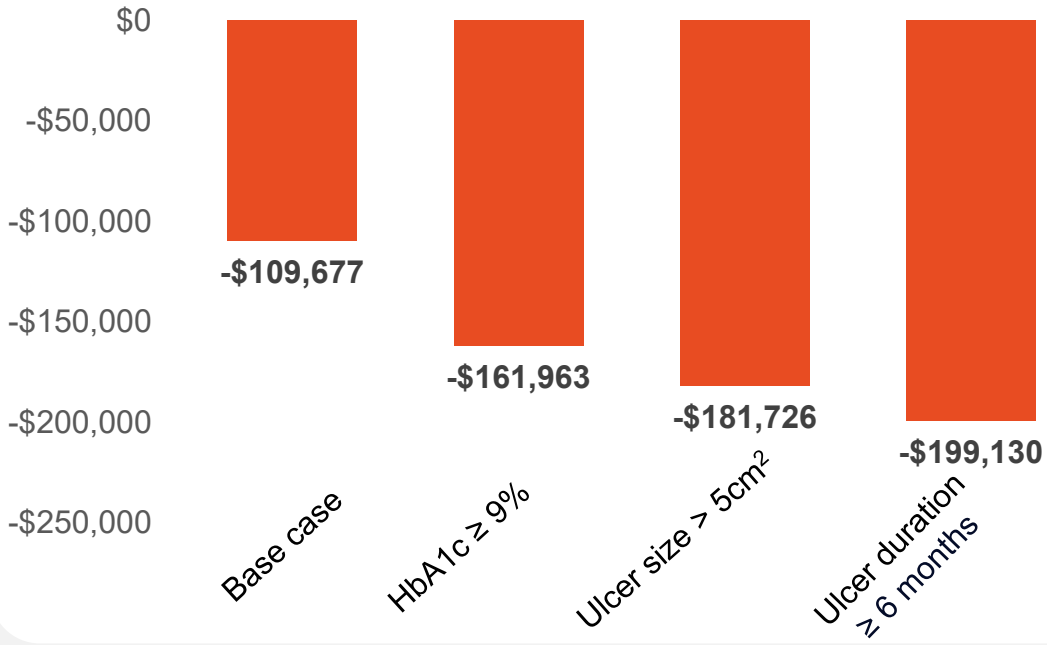
Health-economics : Cost-saving for DFUs

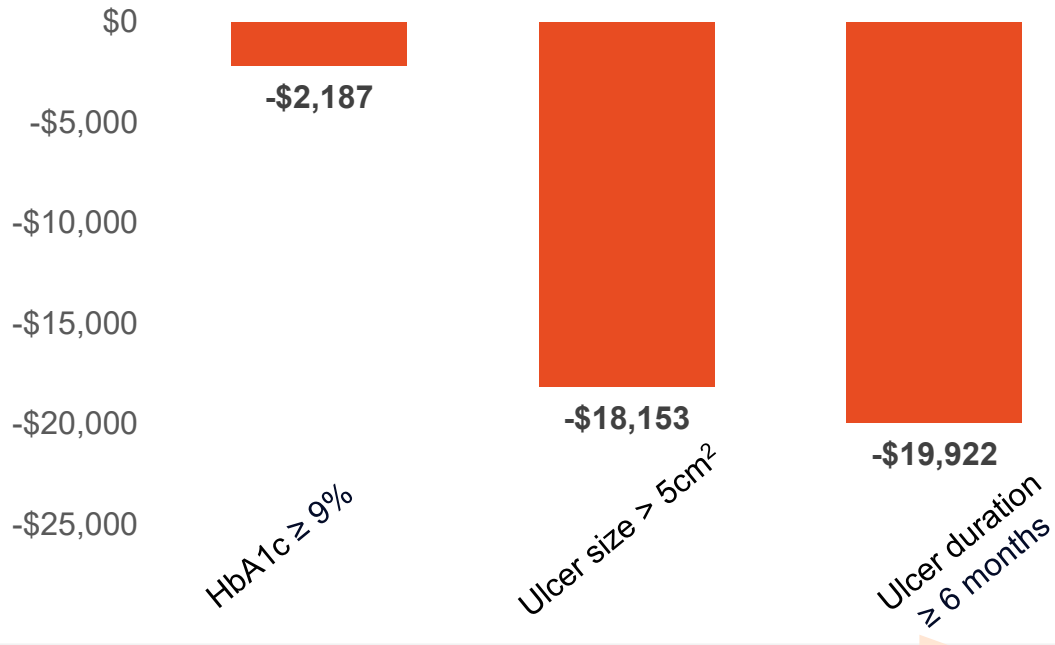
High Cost Structure (Singapore)

Cost Saving (USD) ~$109,000 – 200,000

Single Payer Market (Taiwan)

Cost Saving (USD) ~$2,000 – 20,000





SEVERITY → SAVINGS

Robust Clinical Evidence Worldwide in All Types of Wounds

1 DIABETIC FOOT ULCER (DFU) N = 333

Taiwan

N=126 (RWE, Wagner Gr 2 - 3, ON101 vs Current Therapies)
Significant Healing (65% vs. 24.2%, p<0.0001)

N=10 (Hard-to-heal Case Series, incl. osteomyelitis or tendon exposure)
Limb salvage (100%)

N=6 (DFU with Uremia Case Series)
Healing (80% in 20 weeks)

Case Reports in Clinical Medicine

USA

N=12 (RWE, Wagner Gr 2 with IDSA 2, ON101 vs SOC)
Mean Healing Time (73.5 vs178 days)
Significant Ulcer Reduction (p=0.0312) and 19% **Cost Saved**

Egypt

N=146 (RWE, Wagner Gr 2 - 4, ON101 vs SOC)
Shorter Duration (5.3 vs 23 weeks)
Significant healing : 100% vs 15.1% at Week 16

Italy

N=20 (Hard-to-heal Case Series)
Mean Healing Time 42 days

Singapore

N=13 (Hard-to-heal Case Series)
Rapid Ulcer Reduction (p<0.05),
Healing at Week 12 : 69.2%

2 OTHER WOUND TYPES N = 184

Post-surgical wounds

N=46 (Placebo-controlled)
Vancouver scar scale : pigmentation, vascularity, pliability, height (p<0.05)

AESTHETIC SURGERY JOURNAL

N=30 (RWE, ON101 vs SOC)
Vancouver scar scale : pigmentation, vascularity, pliability, height (p<0.05)

Acute Traumatic Wounds

N= 34 (ON101 vs Biodegradable Temporizing Matrix)
Significant Faster Wound Healing (37.5 vs. 65.2 days, p=0.002)

Radiation Dermatitis

2025 TJCC

N=58 (Real-world Study, RTOG 3+)
ON101 vs. Standard Therapy (Mepilex, Silver dressing)
Significant Faster Wound Healing
12 vs 15.5 days with SOC p=0.003

2nd Degree Burns

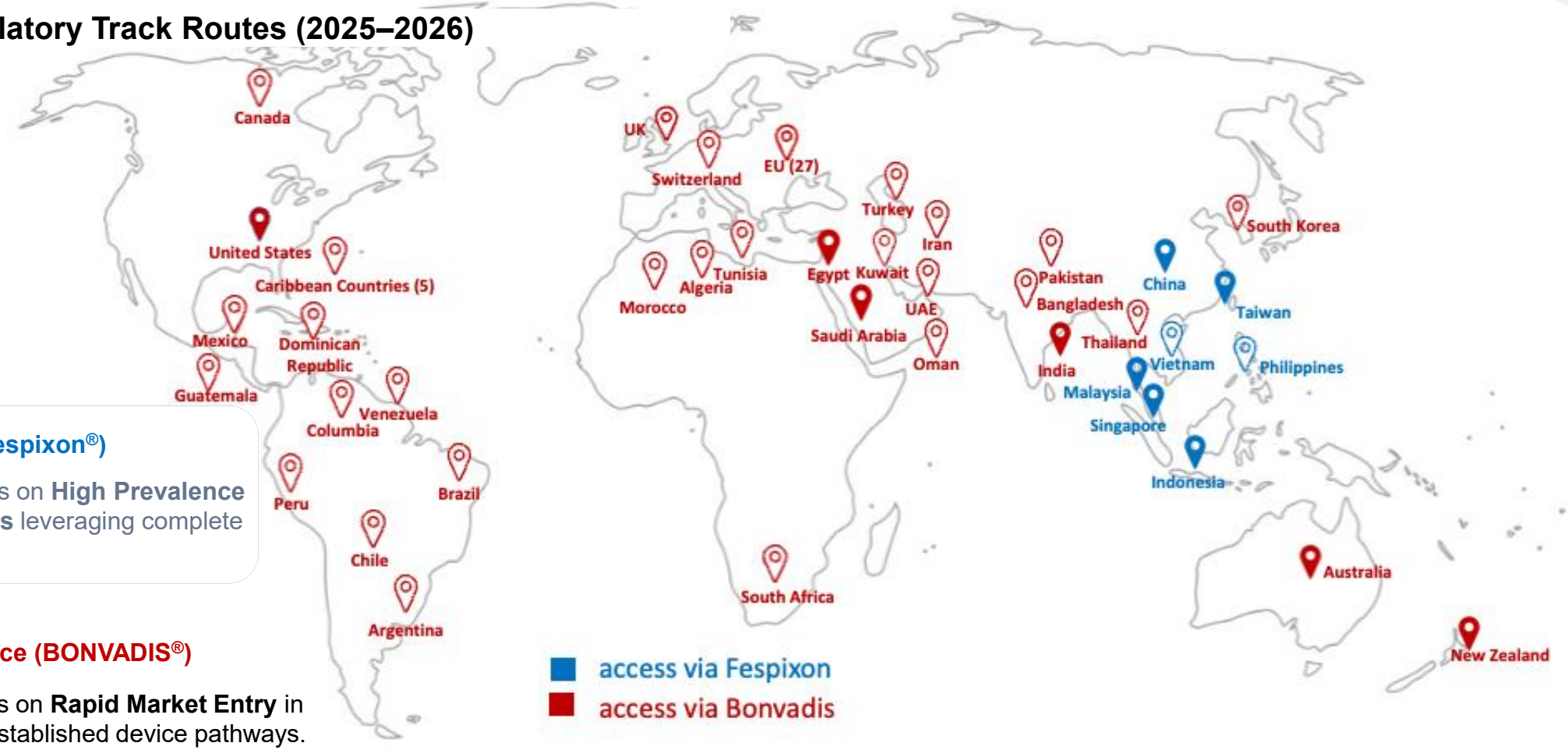
N=6 (Case Series)
Rapid Healing (10-14 days)
Soft, flexible skin without contractures

Venous Leg Ulcer (VLU)

N=10 (Case Series)
80% Healing vs 39% Historical SOC
Healing Time: 35.5 days (vs 90+)

ON101 Global Market Access to 70 Countries

Dual Regulatory Track Routes (2025–2026)



New Drug (Fespixon®)

Strategic focus on **High Prevalence Asian Markets** leveraging complete clinical data.

Medical Device (BONVADIS®)

Strategic focus on **Rapid Market Entry** in regions with established device pathways.

DFU Breakthrough : FESPIXON® & Bonvadis® (ON101)

Redefining the global DFU SOC in 5 years

First-in-Class

The only macrophage-regulating therapy[1]
redefining wound-bed biology for paradigm shift

Global Regulatory Momentum

11 Approvals, Submitted in **38** countries.

Clinically Proven

	RCT[2]	RWE[3]
	ON101 vs SOC	ON101 vs Advanced Therapies
Healing Rate	↑ **70%**	↑ **50%**
Amputation	↓ **85%**	↓ **80%**

Commercial Engine

- US: 510(k) cleared; Treatment paradigm shift and market landscape re-shape with CMS policy changes.
- China:: national scale through partnership & NRDL.
- EU: CE mark in 2026

1. Biomed Pharmacother. 2023 Sep:165:115199 . | 2. ON101CLOS01 Follow-up Report to ON101 Randomized Controlled Trial (RCT) | 3. RWE: Real-world evidence published Mayo Clinic Proceeding 2025

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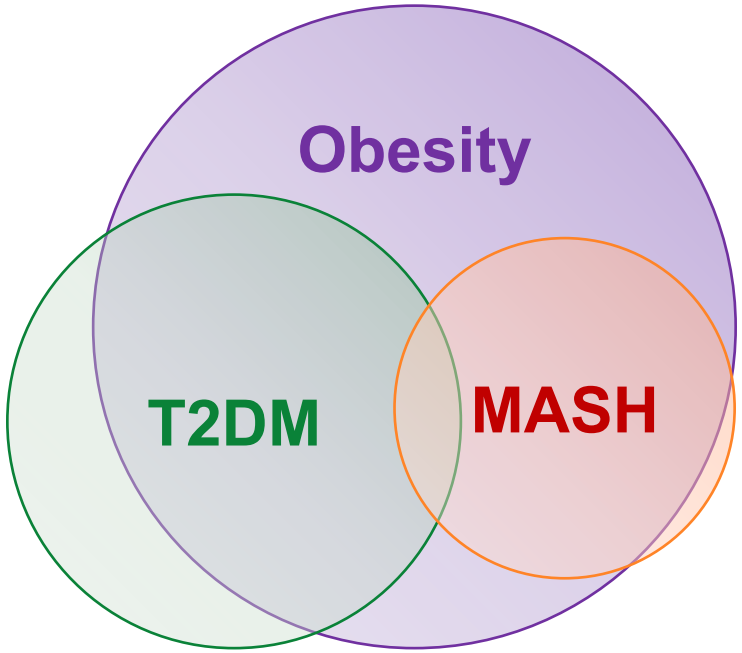
SNS851: the First-in-class siRNA for Sustained Weight Loss

The siRNA with novel mechanism for energy expenditure, achieving durability and superior efficacy with lower dose of GLP-1

The Unresolved Disease Burden in Metabolic Disorders

- **Obesity:** A global pandemic driving cardiovascular and metabolic comorbidities.
- **MASH (NASH):** "Silent killer" with no fully curative therapies; rapidly becoming the leading cause of liver transplant.
- **Type 2 Diabetes:** Continued need for agents that address insulin resistance beyond pure glycemic control.



The Gap:

Current standards of care do not sufficiently address the multifactorial nature of these interlinked diseases

The Market Gap In Current GLP-1 Therapies

Despite commercial success, GLP-1 agonists face critical limitations in real-world adherence and physiological sustainability.

THE "YO-YO" REBOUND

Rapid **weight regain** upon discontinuation due to unresolved metabolic set-points.

MUSCLE WASTING

~40% of weight loss comes from lean mass, risking sarcopenic obesity.

CNS CONCERNS:

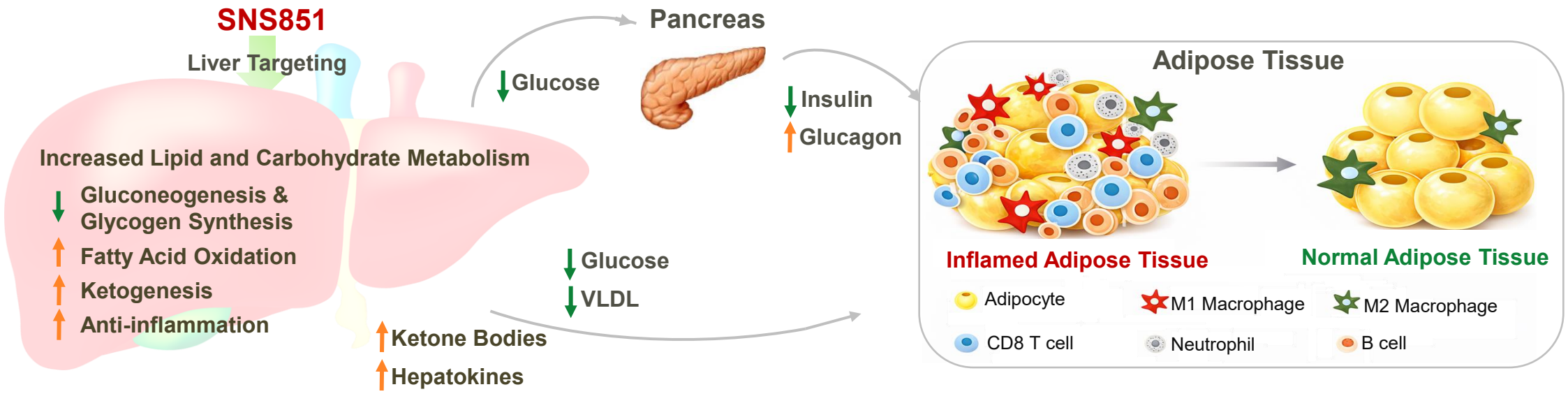
Reports of depression & anhedonia. Direct action on brain reward centers.

SNS851 Next-Gen Obesity siRNA Drug

Benefits	SNS851	GLP-1 Agonists
Preserve Muscle	✓	✗
Clean GI Profile	✓	✗
Sustained Efficacy	✓	✗
NO CNS Concerns	✓	✗

In toxicology studies, SNS851 demonstrated a clean safety profile with NO GLP-1 related adverse effects.

Mechanistic Innovation : Metabolic Paradigm Shift



1. Hepatic Trigger

- **Gene X Silencing** : Precise liver-targeting delivery via patented technology
- Restricted to liver hepatocytes

2. Metabolic Reset

- **Energy Expenditure**: Disrupts energy storage efficiency
- **Secretome Shift** : Hepatokines and Ketones modulate downstream tissues

3. Systemic Resolution

- **Macrophage Attenuation** : Pro-inflammatory M1 and immune cells reduction
- **Outcome :** Suppresses chronic adipose inflammation

Monotherapy Efficacy: Preclinical Proof of Concept

Obesity

"In alignment with findings from gene X, KO mice models, SNS851 prevents high-fat-diet induced obesity without appetite suppression. It fundamentally alters energy storage vs. expenditure"

Type 2 Diabetes

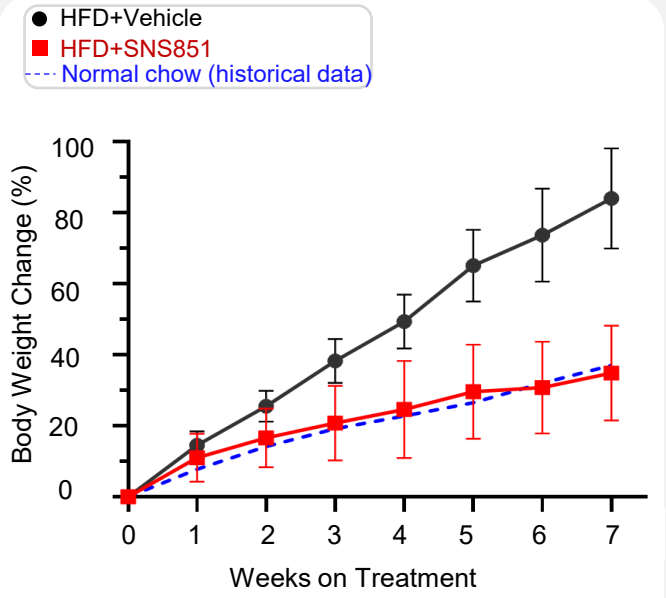
Improved insulin sensitivity markers (HOMA-IR) and reduced Insulin-to-Glucagon Ratio (IGR), indicating restored metabolic health.

MASH (NASH)

Significant reduction in hepatic steatosis and inflammation. Direct suppression of pro-inflammatory immune cells in adipose and liver tissue.

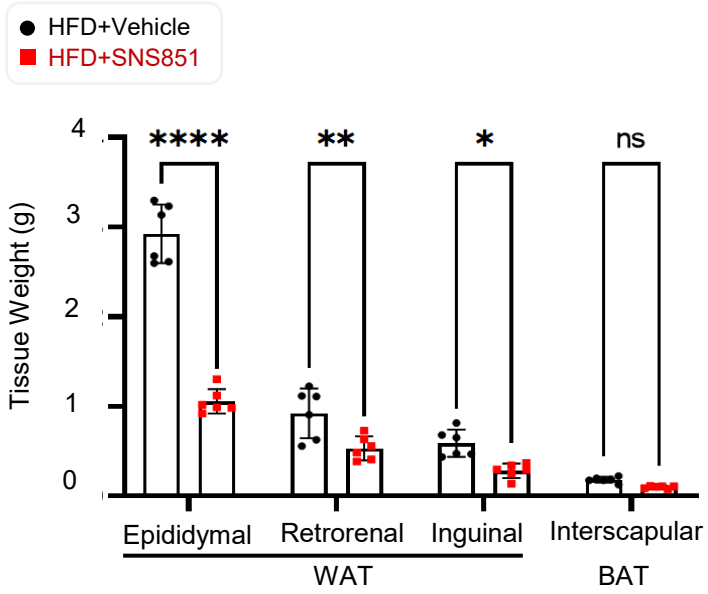
SNS851 Protects Against Diet-Induced Obesity & Preserves Muscle

Body Weight Trajectory



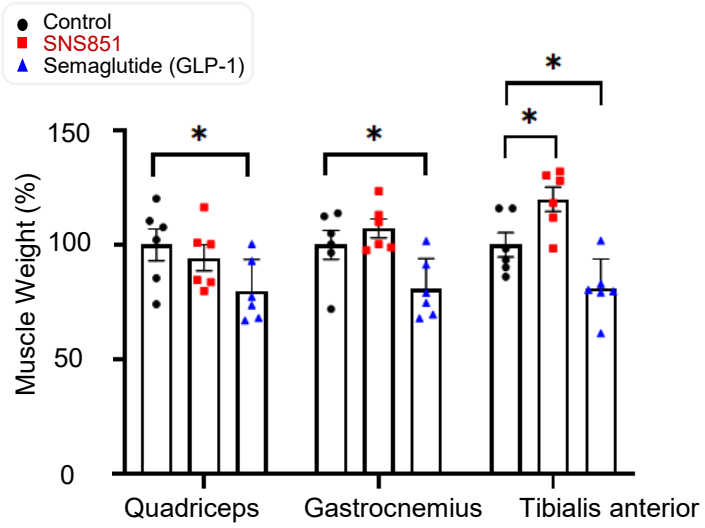
Key Finding: SNS851 prevents weight increase

Specific Fat Reduction



Key Finding: Significant reduction in white adipose tissue (WAT) while sparing Brown Adipose Tissue (BAT).

Muscle Preservation



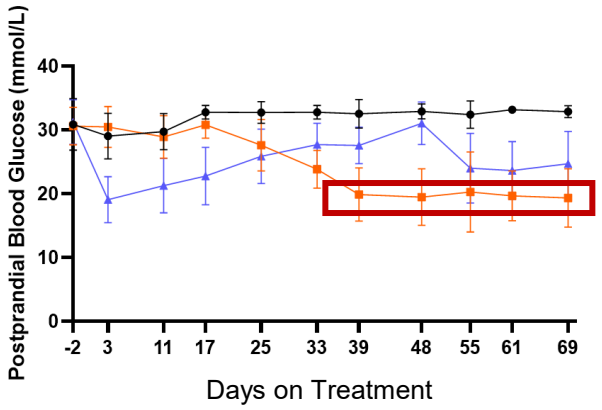
Key Finding: No Muscle Loss; Tibialis Anterior Muscle Increased by 20%

Study Duration : 8 weeks | Model : DIO Mice (n = 6 / group)

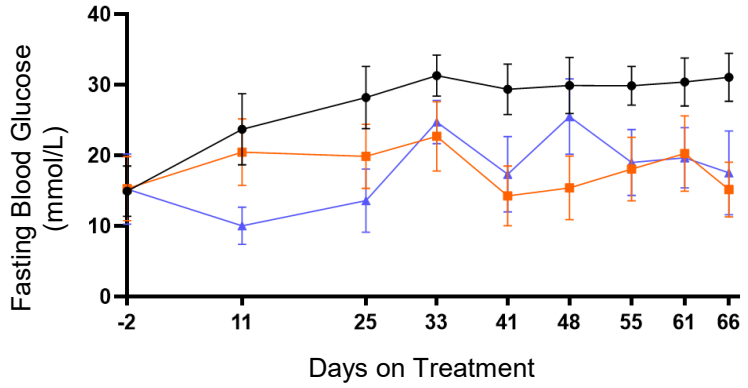
*HFD: High-fat diet

SNS851 Demonstrates Consistent Glycemic Improvement

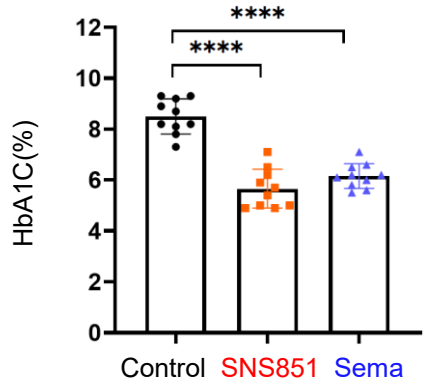
Random Blood Glucose



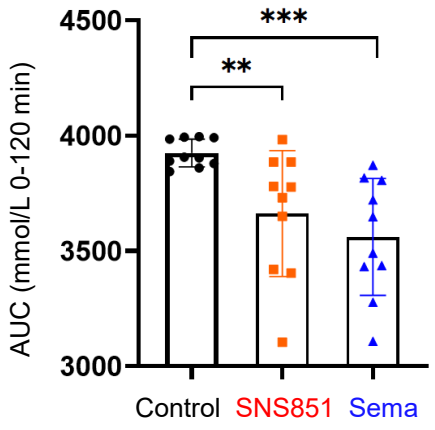
Fasting Blood Glucose



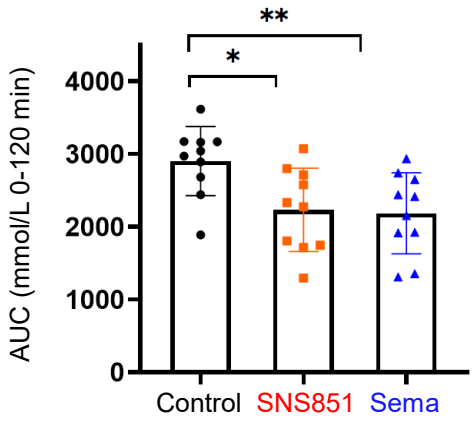
HbA1c

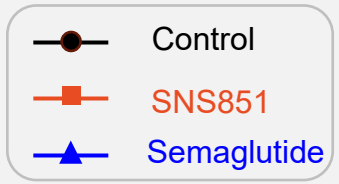


OGTT(Oral Glucose Tolerance Test)



ITT (Insulin Tolerance Test)



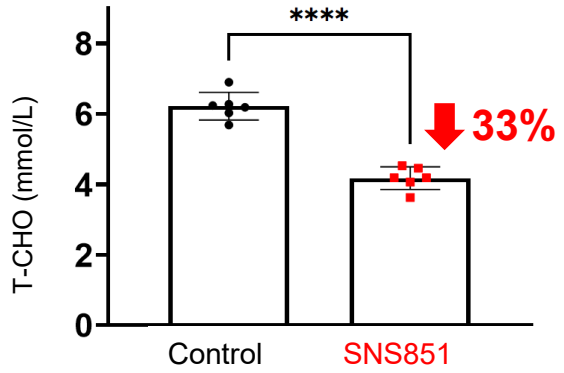


Study Duration : 9 weeks| Model : db/db Mice (n = 10 / group)

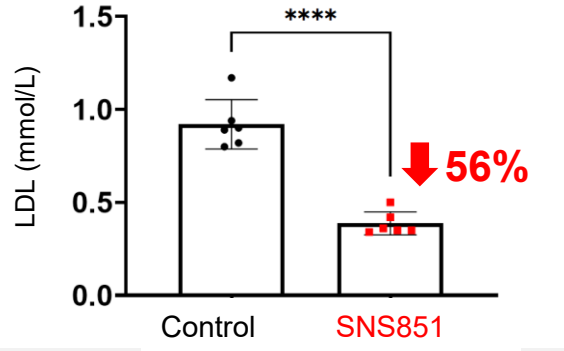
SNS851 Significantly Improves Lipid Metabolism

Improved Serum Lipid Profile

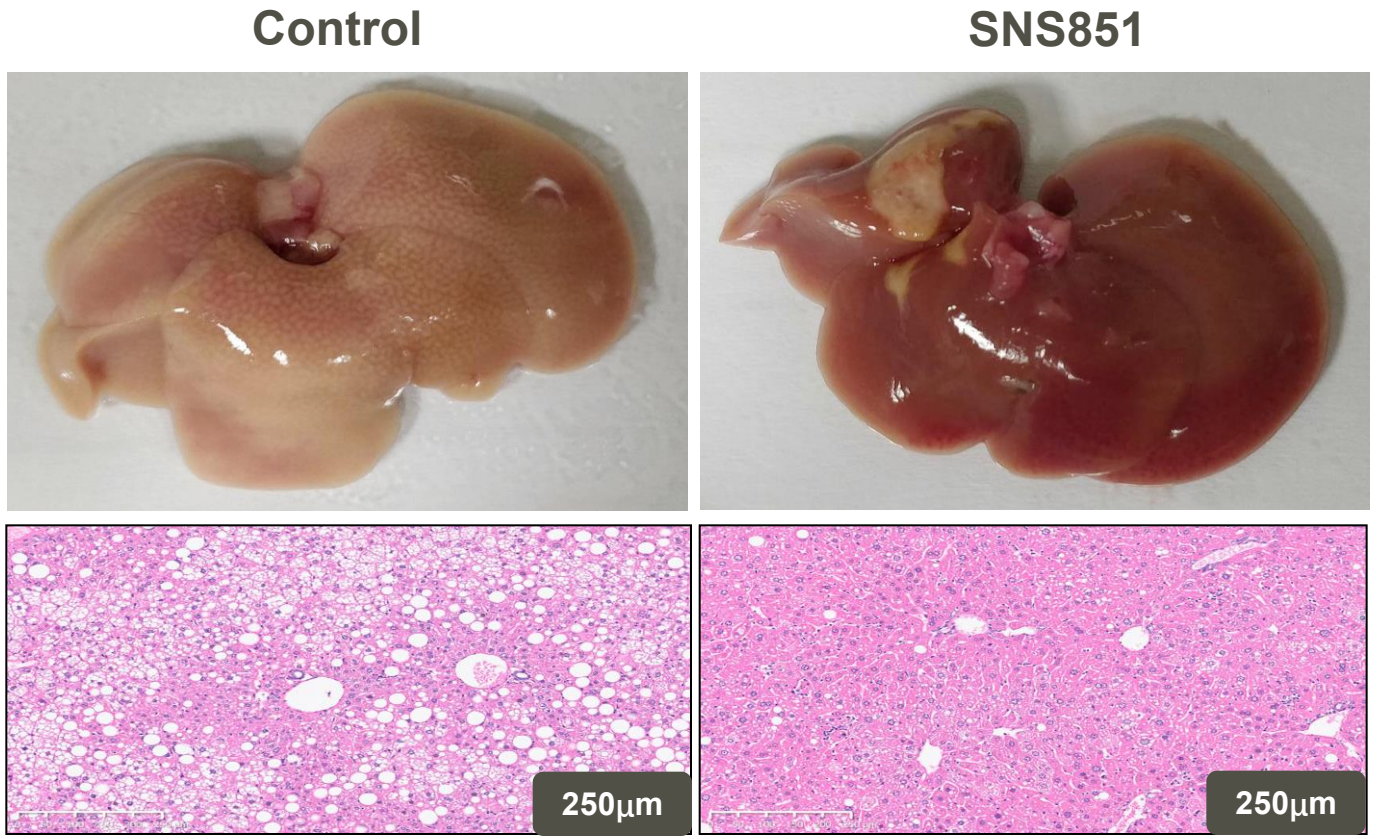
Total Cholesterol (T-CHO)



Low-Density Liporotein (LDL)



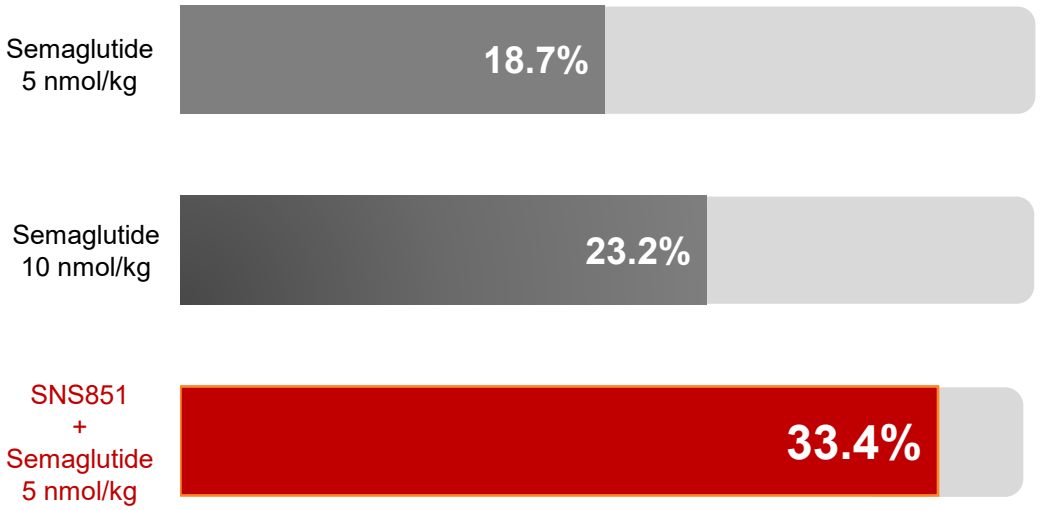
Alleviated Hepatic Steatosis (Fatty Liver)



SNS851 + GLP-1 : The Synergistic Durability

WEIGHT LOSS

Weight Loss %

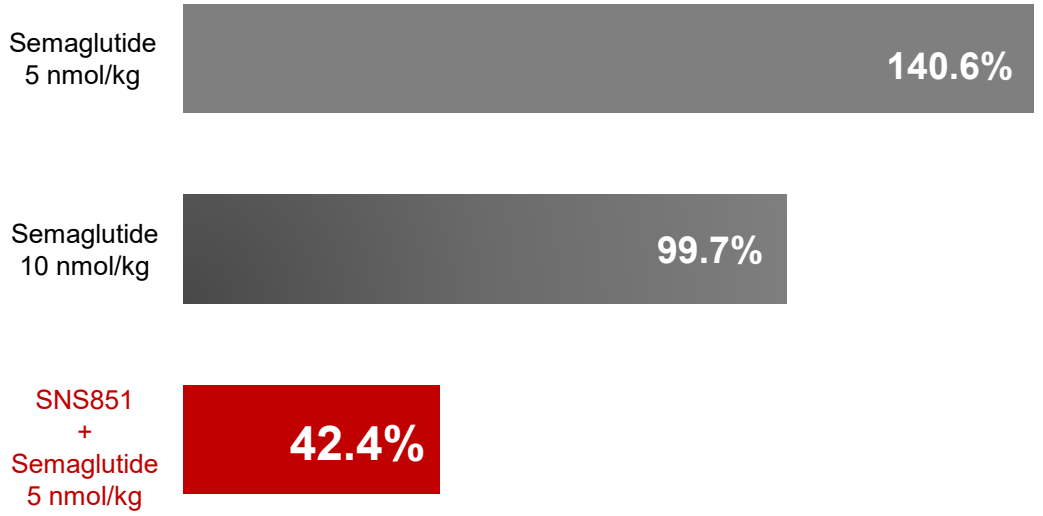


Enhanced 78% at ½ Dose

(DIO Mouse Model)

WEIGHT REBOUND

Weight Regain % After Withdrawal

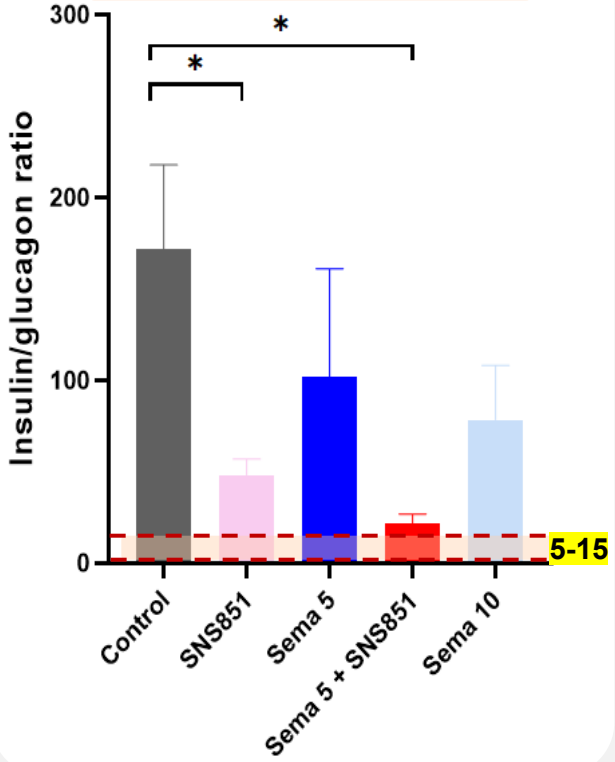


Reduced 70% Rebound

SNS851+GLP-1 Enhances Fat Utilization and Insulin Sensitivity

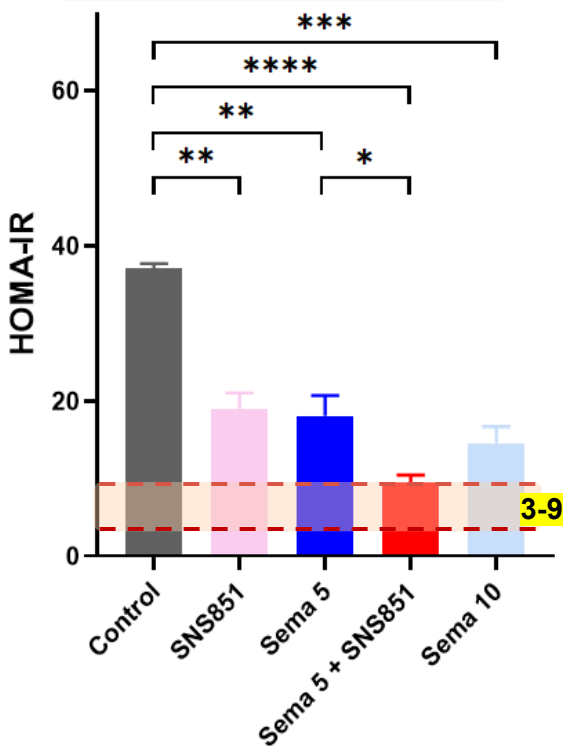
IGR

Physiological range
High-fat diet: >15
normal diet : 5–15



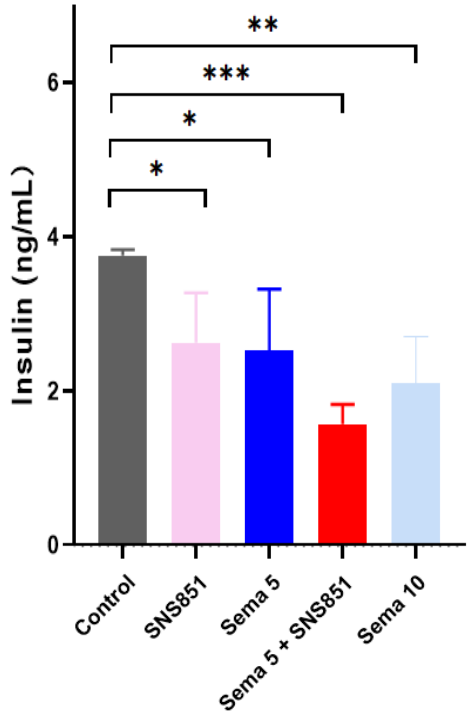
HOMA-IR

Physiological range
High-fat diet: >10
normal diet : 3-9



Circulating Insulin Levels

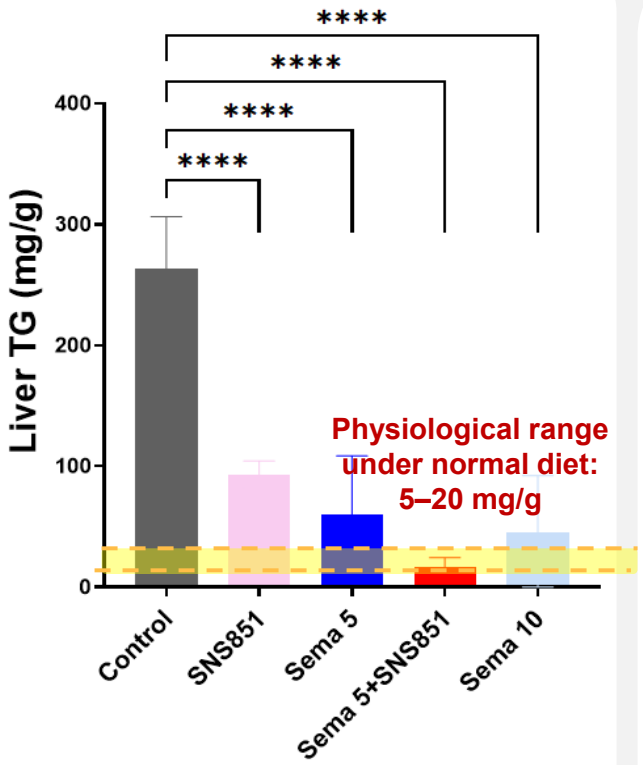
Significantly Lowered in Combo Group



- **Hyperinsulinemia is a key driver of pathological fat accumulation.**
- **Combination therapy achieved the most pronounced reduction in circulating insulin levels, consistent with restored insulin sensitivity.**

SNS851+GLP-1 : Robustly Clears Hepatic Lipid Accumulation

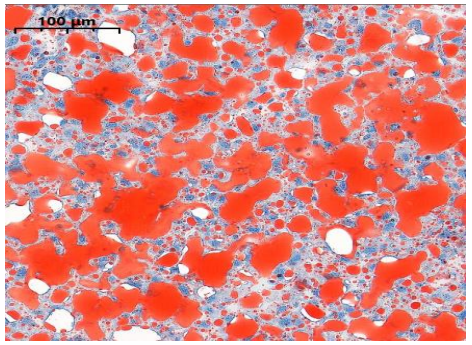
Hepatic Triglyceride Content
(Liver TG)



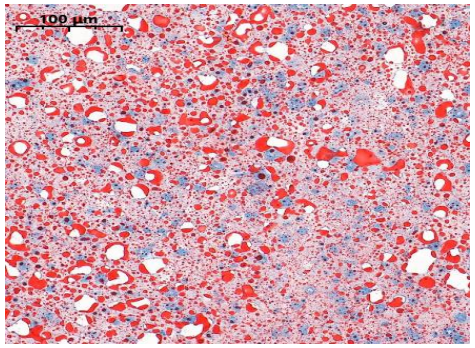
Key Finding : High-fat diet induces marked hepatic steatosis, whereas chow diet represents normal liver histology

Visualized hepatic lipid accumulation by oil red O staining

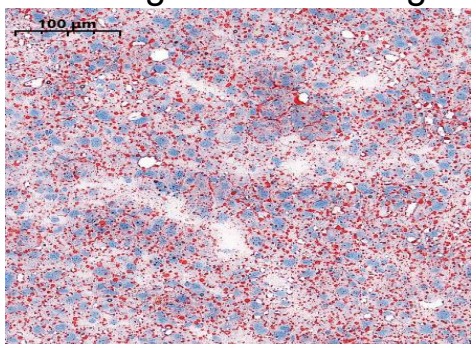
Control



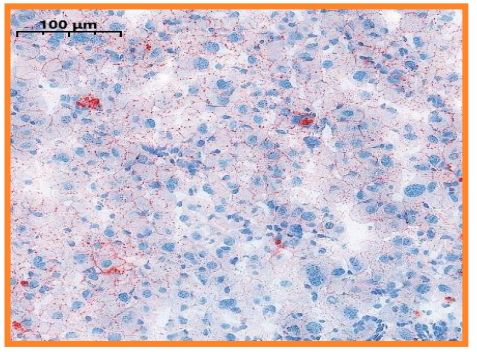
SNS851 10 mg/kg



Semaglutide 5 nmol/kg

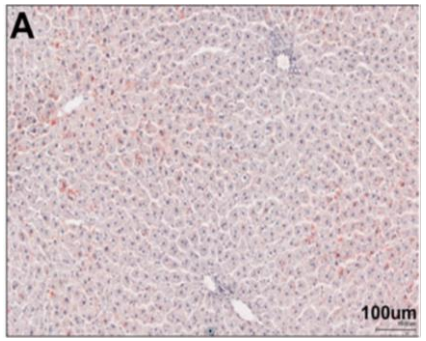


Combination



Combination therapy reduces hepatic triglyceride levels toward the physiological range, exceeding the effects of either monotherapy.

Chow Diet*



*YaligarJ,GopalanV,KiatOW,SugiiS,ShuiG,etal.(2014)EvaluationofDietaryEffectsonHepaticLipidsinHighFatandPlaceboDietFedRatsbyInVivoMRSandLC-MSTechniques.PLoSONE9(3):e91436.

Safety Profile & Advantages

SNS851 demonstrates wide safety margin in GLP Toxicity Studies

SNS851 addresses the critical safety pitfalls of current therapies:

- **Target Specificity:** GalNAc delivery ensures the siRNA is active only in hepatocytes, minimizing off-target risks in other tissues.
- **No GI Toxicity:** In contrast to mechanisms involving the CNS and gut satiety, SNS851 avoids nausea or vomiting".
- **Muscle Preservation:** No evidence of lean mass loss in preclinical models; weight loss is driven by adiposity reduction.

Parameter	Rodents (SD Rats)	Non-Rodents (Cynomolgus Monkeys)
Dose Multiplier	100X Effective Dose	100X Effective Dose
Body weight	Normal	Normal
Food intake	Normal	Normal
Vital signs	Normal	Normal
Hematology	Normal	Normal
Serum biochemistry	Mild ALT/AST elevation*	Normal
Histopathology	Minimal to mild microscopic changes*	Normal

Positioned as a safer, more tolerable long-term maintenance therapy.

*non-adverse class effects, common pathological features of GalNAc-siRNA

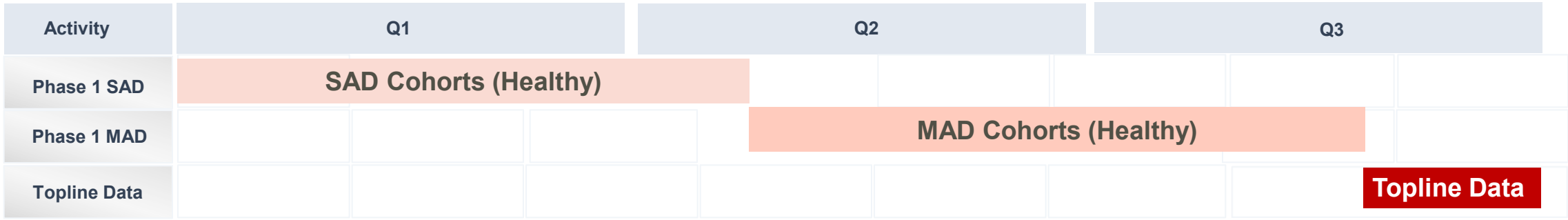
Phase 1 Development Plan & Partnership Strategy

Study Overview

Design:
Randomized, double-blind, placebo-controlled

Population:
Healthy volunteers
N=52

Randomization:
- **SAD: 6 active : 2 placebo**
- **MAD: 8 active : 2 placebo**



Target Partners

- **Strategic global pharma looking for first-in-class metabolic pipeline**

Path to Value Creation (2026–2028)

"Building the next global metabolic leader—powered by first-in-class science, commercial momentum, and partnership-ready innovation."

1. Expand FESPIXON® and Bonvadis® into $26 B global markets[1] through strategic alliance
2. Advancing SNS851 into >$30 B global markets[2] through partnerships
3. Clear path to building a leading metabolic-disease company with first-in-class assets

1. Global Market Insights - Wound Care Market – By Product, Application, End Use & Global Forecast, 2025 – 2034
2. Obesity Market Revolution: Reshaping the Future of Metabolic Health IQVIA Forecast Link accessed Dec 3rd 2025

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Q&A