SUMMARY

This summary aims to give you an overview of the information contained in this document. As this is a summary, it does not contain all the information that may be important to you. You should read the entire document before you decide to [**REDACTED**] *in the* [**REDACTED**].

There are risks associated with any [**REDACTED**]. *Some of the particular risks in* [**REDACTED**] *in the* [**REDACTED**] *are set out in "Risk Factors" of this document. In particular, we are a biotechnology company seeking to* [**REDACTED**] *on the* [**REDACTED**] *under Chapter 18A of the Listing Rules as we do not meet the requirements under Rules 8.05(1), (2) or (3) of the Listing Rules. There are unique challenges, risks and uncertainties associated with* [**REDACTED**] *in companies like ours. Our Core Products are the products for the purpose of satisfying the eligibility requirements under Chapter 18A of the Listing Rules. We may continue to incur substantial costs and expenses in relation to R&D activities for our Core Products. We may not be able to successfully develop and market our Core Products and other product candidates. Your* [**REDACTED**] *decision should be made in light of these considerations.*

OVERVIEW

Established in 2018, we are a biotechnology company anchored in an integrated oncology approach combining antibody-drug conjugates (ADCs) and advanced immunotherapies. As of the Latest Practicable Date, our pipeline consisted of 11 product candidates, including two Core Products. All of our product candidates are self-discovered and self-developed. Our Core Product MHB036C is an ADC candidate (biological drug) under development for the treatment of solid tumors. Its lead indications are for the first or later line (1L+) treatment of non-small cell lung cancer (NSCLC) and breast cancer (BC). Another Core Product MHB018A is an antibody drug candidate (biological drug) under development for the treatment of thyroid eye disease (TED), with active TED being its lead indication. **WE MAY NOT BE ABLE TO SUCCESSFULLY DEVELOP AND/OR MARKET OUR CORE PRODUCTS.**

We have established: (i) a robust clinical oncology portfolio built on our proprietary ADC platform and a novel programmed cell death protein 1/ vascular endothelial growth factor (PD-1/VEGF) bispecific antibody (bsAb), and (ii) late-stage autoimmune assets progressing toward commercialization. Our autoimmune programs are positioned to generate revenue in near future, while our oncology programs focus on advancing ADC monotherapies for late-line settings and exploring combination therapies with our PD-1/VEGF bsAb to transform front-line cancer treatment. Together, these programs comprise a diversified pipeline of candidates:

Novel Oncology ADC and PD-1/VEGF Combination Therapies: Our Core Product MHB036C is a promising trophoblast cell surface antigen 2 (TROP-2) ADC developed for the treatment of a broad range of solid tumors. It is currently in a Phase I/II combination study for 1L+ NSCLC and a Phase II combination study for 1L+ BC, with our key product MHB039A, an innovative PD-1/VEGF bsAb. Our key product MHB088C is a promising B7-H3 ADC for the treatment of small cell lung cancer (SCLC) and other cancers, which is currently in a Phase III trial for 2L SCLC, 2L mCRPC and 2L ESCC as a monotherapy and a Phase I/II trial for 1L+ SCLC in combination with MHB039A.

Late Stage Autoimmune Assets: Our Core Product, MHB018A, is a novel and promising subcutaneous insulin-like growth factor 1 receptor (IGF-1R) VHH-based antibody. It is currently in a Phase III trial for active TED and chronic TED, supported by compelling Phase II efficacy and safety data in both active and chronic TED. Our key product MH004 is a novel topical Janus kinase (JAK) inhibitor with an NDA submitted for mild-to-moderate atopic dermatitis (AD) in China in March 2026, addressing the autoimmune indications with high need.

Our proprietary SuperTopoi platform is designed to overcome the industry-wide challenges faced by conventional ADC technology. It features a novel payload with 5-10 times higher potency compared with deruxtecan (Dxd)-based ADCs, while maintaining a better safety profile characterized by a low incidence of severe hematological toxicity and a significant reduced incidence of interstitial lung disease (ILD). This optimized therapeutic window enables broader application, including potential use in front-line settings.

Our Product Pipeline

All of the pipeline products are self-discovered by us. The following chart summarizes the key information of our drug candidates as of the Latest Practicable Date:

	Program	Target	Modality	Indication(s)	Mono/ Combo	Pre-clinical / Phase I / Phase II / Phase III / NDA/BLA	Current Status/Upcoming Milestone	Commercial Rights
	Autoimmune							
★	**MHB018A**	Sub-Q IGF-1R	mAb	Active TED[1][2]	Mono	China	Phase III topline readout anticipated in 2026Q3	Global
						United States/Europe/Japan[4]	Phase III FPI anticipated in 2026Q4	
				Chronic TED[1]	Mono	China	Phase III topline readout anticipated in 2027Q3	
						United States/Europe/Japan[4]	Phase III FPI anticipated in 2026Q4	
▲	**MH004**	Topical JAKi	Small Molecule	Mild-to-Moderate Atopic Dermatitis[2]	Mono	China	NDA approval anticipated in 2027H1	Global
						United States[5]	Phase III IND approved by the FDA in 2023	
				Vitiligo	Mono	China	Phase III FPI anticipated in 2026H2	
	MH048	BTK/pan-Src/ RIPK3 inhibitor	Small Molecule	Immunological Diseases	Mono		IND filing in China anticipated in 2026H2	Global
	Oncology							
★	**MHB036C**	TROP-2	ADC	Solid Tumors (e.g. 2L+ BC, NSCLC)	Mono	China	Phase I trial completed; Phase II trial ongoing	Global
▲	**MHB039A**	PD-1/VEGF	BsAb	1L+ SCLC	Combo with MHB088C[3]	China	Phase II data readout anticipated in 2026	Global
				1L+ BC (TNBC/ HR+/HER2- BC)	Combo with MHB036C[3]	China	Phase II data readout anticipated in 2026	
				1L+ NSCLC	Combo with MHB036C[3]	China	Phase II data readout anticipated in 2026	
				Solid Tumors	Mono	China[6]	Phase I/II trial commenced in April 2024	
▲	**MHB088C**	B7-H3	ADC	Solid Tumors	Mono	United States[7]	Phase Ib/II IND approved by the FDA in 2024	Global (except Greater China) **Greater China rights out-licensed to Qilu*
	MHB118C	Undisclosed	ADC	Solid Tumors	Mono	China	Phase I trial completion anticipated in 2026	Global
	MHB046C	Undisclosed	ADC	Solid Tumors	Mono	China	Phase I trial completion anticipated in 2026	Global
	MHB009C	B7-H4	ADC	Solid Tumors	Mono	China	Phase I trial completion anticipated in 2027	Global
	MHB042C	c-Met	ADC	Solid Tumors	Mono	China	Phase I trial completion anticipated in 2027	Global
	MHB048C	PSMA	ADC	Prostate Cancer	Mono	China	Phase I trial completion anticipated in 2027	Global

Clinical trials exempted and granted approval to progress to the next clinical stage

★ Core Product ▲ Key Product

Notes:

(1) Eligibility includes both treatment-naïve patients and patients previously treated with steroids. Consistent with the approved drug TEPEZZA, MHB018A is being developed for the treatment of the above two separate indications covering active and chronic TED respectively, with no limitation on treatment lines.

(2) The denoted indication(s) represent the lead indication(s) for each drug candidate, for which we expect to obtain first marketing approval(s).

(3) Each of our combination therapies is conducted under a separate IND approval granted by the NMPA. The enrolled patient populations for each relevant indications are distinct from those of the corresponding monotherapy studies.

(4) The U.S. FDA has agreed to accept China clinical data to initiate U.S. Phase III trials without bridging studies. We have obtained both Phase III IND approvals from the FDA and initiated the registrational trials. We plan to enroll the first patient in December 2026.

(5) We have no current plan to further develop MH004 in the U.S. market.

(6) We have no plan to further develop MHB039A as monotherapy and are focusing on the development in combination with ADCs.

(7) MHB088C is currently in a Phase III trial for 2L SCLC, 2L mCRPC and 2L ESCC as a monotherapy sponsored by Qilu, and a Phase I/II trial for 1L+ SCLC in combination with MHB039A in China initiated in September 2025, sponsored by us. We have entered into an exclusive license agreement with Qilu on March 31, 2025 to develop and commercialize MHB088C in Greater China (Chinese Mainland, Hong Kong, Macau and Taiwan). We have no current plan to further develop MHB088C as monotherapy in the U.S. market.

MHB036C (TROP-2 ADC) — Core Product

MHB036C has demonstrated convincing antitumor activity in multiple indications, including NSCLC and BC, with combination potential alongside advanced immuno-oncology agents in front-line settings.

In the completed Phase I and ongoing Phase II studies, MHB036C demonstrated encouraging efficacy across multiple tumor settings in the 1.5 mg/kg cohort. In triple-negative breast cancer (TNBC) patients for 2L+ treatment (n=30), the cohort reached an objective response rate (ORR) of 43%, with a median progression-free survival (PFS) of 6.9 months. In HR+HER2- BC patients for 2L+ treatment (n=25), we observed a 40% ORR and a median PFS of 9.0 months. In EGFR-mutant NSCLC patients for 2L+ treatment (n=16), we observed a 37.5% ORR and a median PFS of 9.1 months. Similarly, in NSCLC patients without AGA for 2L+ treatment (n=7), the treatment yielded a 57% ORR and a median PFS of 7.2 months. Safety results reinforce MHB036C's attractive risk-benefit profile. There were no major hematological side effects and only approximately 1% occurrence of ILD observed compared to other TROP-2 ADCs.

MHB018A (Sub-Q IGF-1R mAb) — Core Product

MHB018A is our novel subcutaneous IGF-1R (Sub-Q IGF-1R) VHH-based antibody and the promising IGF-1R program with proven Phase II efficacy and safety (n=98, no severe hearing damage) data. Compared to the existing competitors, its 450 mg/kg once-every-four-weeks (Q4W) dosing regimen offers a more convenient and patient friendly option. As a subcutaneous formulation could be available at retail pharmacies, MHB018A would also provide easier patient access.

TED is a long-lasting autoimmune condition that affects the tissues around the eyes. It typically develops in two phases: an active phase, during which inflammation worsens and symptoms progress, and an inactive (chronic) phase, characterized by fibrosis and persistent tissue remodelling, with only residual inflammatory activity. Hence, active and chronic TED represent different stages of the same disease.

We presented the Phase I/II clinical data of MHB018A in patients with active and chronic TED at the Endocrine Society's Annual Meeting in June 2026. In the completed Phase II active TED trial, MHB018A has shown a proptosis response rate of 81% at the 450 mg dose (n=32) at Week 12. Data indicates a better therapeutic response than other intravenous and subcutaneous IGF-1R antibodies. In terms of safety, MHB018A was well tolerated across all three dosing regimens. No unique

toxicities were observed and no Grade≥3 hearing-related AEs were reported. In the completed Phase II chronic TED trial, MHB018A achieved a proptosis response rate of 76% at Week 24 (n=33). In terms of safety, MHB018A was well tolerated over the 24-week treatment period. No TEAE led to treatment discontinuation, death, or premature withdrawal from the study, and no subjects experienced SAEs. In addition, no severe hearing damage was observed, which adds to MHB018A's safety characteristics.

MHB088C (B7-H3 ADC) — Key Product

MHB088C is currently in pivotal Phase III trials for 2L SCLC, 2L mCRPC and 2L ESCC as a monotherapy and a Phase I/II trial for 1L+ SCLC in combination with MHB039A in China. Granted with breakthrough therapy designations, MHB088C is one of the most advanced B7-H3 ADC evaluated in combination trials with PD-(L)1/VEGF bsAb for 1L SCLC globally, according to CIC.

MHB088C demonstrated both efficacy and safety advantages in its Phase II clinical trials. In the Phase II study of 2L+ SCLC (n=103), as of June 13, 2025, the confirmed ORR were 21.4%, 42.2% and 43.3% for the 1.6 mg/kg Q2W, 2.0 mg/kg Q2W, and 2.4 mg/kg Q3W cohorts, respectively. The median progression-free survival (mPFS) was consistently between 5.5-6.0 months across cohorts. With respect to safety, 106 SCLC patients have received at least one dose of MHB088C, where only two ILD cases have been reported. The most frequent Grade ≥3 TEAEs were hematological in nature, primarily drops in neutrophil and white blood cell counts as well as anemia. These events occurred among around 10% of the patients in 1.6 and 2.0 mg/kg Q2W cohorts.

MHB039A (PD-1/VEGF bsAb) — Key Product

MHB039A is a next generation I/O therapy that offers extended dosing duration and enhanced therapeutic synergy. We are conducting a Phase I/II combination study of MHB036C and MHB039A in NSCLC patients and a Phase II combination study in BC, respectively, in China, We are also conducting a Phase I/II combination study of MHB088C and MHB039A in SCLC patients in China.

The Phase I clinical data for MHB039A demonstrates a foundational efficacy and safety profile. The study achieved saturated PD-1 receptor occupancy and VEGF biomarker response at doses of 10 mg/kg Q3W and above. Encouraging preliminary anti-tumor activity was observed in patients previously treated with agents targeting the same pathways, including PD-1/PD-L1 inhibitors, VEGFR tyrosine kinase inhibitors, or anti-VEGF monoclonal antibodies. Across 20 evaluable patients, only a low incidence of Grade 3 adverse events was reported, with no major hypertension or bleeding.

We position MHB039A as an advanced immunotherapy backbone designed be paired with our ADC candidates to enable chemo-free front-line treatment and unlock opportunities in multiple solid tumors. We also plan to explore additional combination of MHB039A across our diversified ADC portfolio.

MH004 (Topical JAKi) — Key Product

MH004 is the first topical prodrug of tofacitinib in the China market that targets AD and vitiligo. MH004 leverages an innovative transdermal delivery technology that enhances skin penetration and limited systemic exposure. This breakthrough potentially addresses the need for topical JAK treatments with a localized profile intended to minimize systemic safety risks associated with the class.

MH004 offers differentiated topical JAK inhibition (JAKi) with substantially less systemic exposure and reduced JAK2 inhibitory activity relative to ruxolitinib cream, which supports broader dermatologic use under clinical and regulatory guidance. MH004 has demonstrated potent efficacy with a favorable safety profile in its Phase III study for AD. In the study, 58.6% of patients treated with MH004 (concentration of 1.0%) achieved EASI-75, compared to 19.8% for the vehicle group. MH004 reached a 41.0% investigator global assessment treatment success (IGA-TS), compared to 10.3% for the vehicle group at Week 4. The completed Phase II study in vitiligo has shown early signals of efficacy, with encouraging F-VASI improvements as early as Week 4. In December 2025, CDE recommended us to resubmit an NDA for MH004 after obtaining the safety follow-up data from all subjects in the Phase III clinical trial for mild to moderate AD. We resubmitted an NDA for mild-to-moderate AD in China in March 2026.

Addressable Markets and Competitive Landscape of Our Product Candidates

TROP-2 ADC for BC and NSCLC (MHB036C)

The global BC drug market is expected to reach US$99.0 billion by 2035, at CAGRs of 5.3% from 2025 to 2030 and 4.1% from 2030 to 2035. The global NSCLC drug market is expected to reach US$115.8 billion in 2035, at CAGRs of 9.0% from 2025 to 2030 and 6.7% from 2030 to 2035. As of the Latest Practicable Date, three TROP-2 ADCs had obtained regulatory approvals that collectively cover TNBC, NSCLC and HR+/HER2- BC, and seven were in clinical development for combination therapy with PD-(L)1 inhibitors for BC or NSCLC. For details, see "Industry Overview — Global TROP-2 ADC Market."

Intravenous IGF-1R Antibody for TED (MHB018A)

The global TED drug market is projected to reach US$13.4 billion in 2035, at CAGRs of 13.9% from 2025 to 2030 and 12.2% from 2030 to 2035. As of the Latest Practicable Date, three intravenous and no subcutaneous IGF-1R antibodies had been approved for TED, and two intravenous and six subcutaneous IGF-1R antibodies were in clinical development. For details, see "Industry Overview — Global Thyroid Eye Disease Market."

B7-H3 ADC for SCLC and Prostate Cancer (MHB088C)

The global SCLC drug market is expected to reach US$12.1 billion in 2035, at CAGRs of 8.6% from 2025 to 2030 and 6.7% from 2030 to 2035. The global prostate cancer drug market is expected to reach US$46.9 billion in 2035, at CAGRs of 6.4% from 2025 to 2030 and 4.9% from 2030 to 2035. As of the Latest Practicable Date, there were no B7-H3 ADC approved globally, five were in clinical development with PD-(L)1 inhibitors as combination therapy for SCLC, and ten were in clinical development as monotherapy for SCLC or CRPC. For details, see "Industry Overview — Global B7-H3 ADC Market."

PD-(L)1/VEGF Bispecific Antibody (MHB039A)

The global PD-(L)1/VEGF bsAb market is projected to reach US$91.4 billion in 2035, at CAGRs of 146.3% from 2025 to 2030 and 42.0% from 2030 to 2035. As of the Latest Practicable Date, one PD-(L)1/VEGF bsAb had obtained regulatory approvals with two approved indications and fifteen were in active clinical development for BC, NSCLC and other solid tumors. For details, see "Industry Overview — Global PD-(L)1/VEGF bsAb Market."

JAK Inhibitors for AD and Vitiligo (MH004)

The global AD drug market is projected to reach US$29.9 billion in 2035, at CAGRs of 7.3% from 2025 to 2030 and 5.0% from 2030 to 2035. The global vitiligo drug market is expected to reach US$11.8 billion in 2035, at CAGRs of 20.2% from 2025 to 2030 and 18.3% from 2030 to 2035. As of the Latest Practicable Date, one topical JAK inhibitor had been approved for AD and vitiligo, four were in Phase III or later-stage of development for AD and four were in Phase II or later-stage of development for vitiligo. For details, see "Industry Overview — Global Dermatology Treatment And Care Market."

OUR STRENGTHS

We believe the following strengths have contributed to our success and differentiated us from our competitors: (i) a focus in novel ADCs and advanced immunotherapy, complemented by a late-stage autoimmune portfolio; (ii) advancing the oncology treatment paradigm through the ADC and immuno-oncology combination therapies featuring promising ADCs and a novel PD-1/VEGF bispecific antibody; (iii) late-stage autoimmune portfolio with differentiated formulations, robust clinical validation, near-term commercialization and cash flow potential; (iv) proprietary Topo I ADC platform SuperTopoi with differentiated safety profiles and comprehensive clinical data, anchored for sustainable ADC portfolio innovation with novel targets, linkers and structures; and (v) a management team distinguished by proven achievements, exceptional execution capabilities, and the support from seasoned industry veterans.

OUR STRATEGIES

We plan to execute the following strategies to achieve our mission and drive our future growth: (i) rapidly and strategically advance our novel ADC and advanced I/O assets to later stage and continue to explore combination therapies opportunities; (ii) accelerate global clinical development of our autoimmune portfolio towards commercialization; (iii) proactively explore value-accretive partnerships globally to maximize the clinical and commercial potential of our drug candidates; (iv) fuel pipeline development through continuous and highly efficient R&D efforts; (v) strategically enhance our operational capabilities, including efficient manufacturing and commercialization capabilities; and (vi) further attract, train and retain talent to expand our capabilities.

RESEARCH AND DEVELOPMENT

Our in-house R&D team consisted of 110 employees as of the Latest Practicable Date, most of whom had obtained at least bachelor's degrees, and over 37.2% members of our R&D team had obtained post-graduate degrees. Our R&D team is led by a team of scientists with years of drug development experience. As of the Latest Practicable Date, the core R&D personnel involved in the development of the Core Products all remain employed by us.

In 2024, 2025 and the five months ended May 31, 2025 and 2026, we recorded research and development expenses of RMB280.7 million, RMB230.3 million, RMB60.1 million and RMB120.0 million, respectively, representing 95.4%, 86.1%, 91.1% and 89.0% of our total operating expenses for the corresponding years/periods. In 2024, 2025 and the five months ended May 31, 2025 and 2026, we recorded research and development expenses attributable to our Core Products of RMB49.0 million, RMB91.5 million, RMB22.8 million and RMB67.7 million, respectively, representing 17.5%, 39.7%, 38.0% and 56.4% of our total R&D expenses for the corresponding years. See "Business — Research and Development" for further details.

INTELLECTUAL PROPERTY

As of the Latest Practicable Date, we held 36 issued patents and 138 patent applications (including seven PCT applications), of which ten issued patents and 35 patent applications (including three in China, four in the U.S., and 28 in other jurisdictions) are related to our Core Products.

OUR SUPPLIERS

During the Track Record Period, our suppliers are mainly comprised of CROs and CDMOs for our R&D activities. In 2024, 2025 and the five months ended May 31, 2026, purchases from our five largest suppliers in aggregate accounted for 58.6%, 43.4% and 38.8% of our total purchases, respectively, for each year/period during the Track Record Period. Our purchases from our largest supplier for each year/period during the Track Record Period amounted to RMB58.6 million, RMB28.6 million and RMB14.2 million, representing 23.8%, 15.2% and 14.0% of our total purchases for the respective period. See "Business — Our Suppliers" for more details.

SUMMARY OF KEY FINANCIAL INFORMATION

Summary of Consolidated Statements of Comprehensive Loss

The following table sets forth a summary of our consolidated statements of comprehensive loss for the years indicated:

	Year ended December 31,		Five months ended May 31,	
	2024	2025	2025	2026
	RMB'000	*RMB'000*	*RMB'000 (unaudited)*	*RMB'000*
Revenue	–	264,410	264,151	–
Cost of revenue	–	(743)	(349)	–
Gross profit	**–**	**263,667**	**263,802**	**–**
Research and development expenses	(280,689)	(230,322)	(60,060)	(120,001)
Administrative expenses	(13,541)	(37,053)	(5,903)	(14,831)
Other income	23,974	2,976	769	53
Other gains/(losses), net	1,595	702	24	(857)
Operating (loss)/profit	**(268,661)**	**(30)**	**198,632**	**(135,636)**
Finance income	158	8,606	74	5,394
Finance costs	(117)	(76)	(23)	(90)
Fair value change of financial liabilities at FVTPL	(14,011)	(927,808)	(249,527)	(79,891)
Loss before income tax	**(282,631)**	**(919,308)**	**(50,844)**	**(210,223)**
Income tax expense	–	–	–	–
Loss for the year/period attributable to the owners of the Company	**(282,631)**	**(919,308)**	**(50,844)**	**(210,223)**

During the Track Record Period, we had not commercialized our drug candidates, but generated revenue primarily from our license agreement with Qilu in 2025. Our net loss increased from RMB282.6 million in 2024 to RMB919.3 million in 2025 primarily due to an increase of RMB913.8 million in recorded fair value change of financial liabilities due to our financing activities and adjustments in our valuation, partially offset by RMB264.4 million revenue generated from our license agreement with Qilu. See "Financial Information — Description of Selected Items of Our Consolidated Statements of Comprehensive Loss" for more details. Our net loss increased from RMB50.8 million in the five months ended May 31, 2025 to RMB210.2 million in the five months ended May 31, 2026, mainly reflecting higher R&D expenses as we continued to advance our pipeline and the timing of revenue recognition under our license agreement, partially offset by lower recorded fair value losses on financial liabilities at FVTPL. We expect our net loss for 2026 to increase significantly as compared to 2025, primarily due to higher R&D expenditure as we continue to progress our pipeline, including the advancement of MHB018A into Phase III clinical trials for both active and chronic TED in China, together with non-cash fair value losses on financial liabilities at FVTPL reflecting our financing activities and valuation adjustments.

Summary of Consolidated Balance Sheets

The table below sets forth selected information from our consolidated balance sheets as of the dates indicated:

	As of December 31,		As of May 31,
	2024	2025	2026
	RMB'000	*RMB'000*	*RMB'000*
Total non-current assets	39,694	45,255	53,390
Total current assets	46,549	841,104	657,169
Total assets	**86,243**	**886,359**	**710,559**

	As of December 31,		As of May 31,
	2024	2025	2026
	RMB'000	*RMB'000*	*RMB'000*
Total non-current liabilities	–	4,393	5,917
Total current liabilities	1,211,700	2,886,231	2,853,368
Total liabilities	**1,211,700**	**2,890,624**	**2,859,285**
Net current liabilities	**1,165,151**	**2,045,127**	**2,196,199**
Net liabilities	**1,125,457**	**2,004,265**	**2,148,726**
Share capital	14	14	14
Other reserves	(53,801)	(13,301)	52,461
Accumulated losses	(1,071,670)	(1,990,978)	(2,201,201)
Total deficits	(1,125,457)	(2,004,265)	(2,148,726)
Total deficits and liabilities	**86,243**	**886,359**	**710,559**

We recorded net current liabilities of RMB1,165.2 million, RMB2,045.1 million and RMB2,196.2 million as of December 31, 2024 and 2025 and May 31, 2026, respectively, and net liabilities of RMB1,125.5 million, RMB2,004.3 million and RMB2,148.7 million as of the same dates, primarily due to our convertible preferred shares, which were classified as current liabilities in these periods. Our net liabilities increased from RMB1,125.5 million as of December 31, 2024 to RMB2,004.3 million as of December 31, 2025, primarily attributable to our loss for the year of RMB919.3 million in 2025, which was principally driven by the fair value change of financial liabilities at FVTPL of RMB927.8 million relating to our convertible preferred shares. Our net liabilities further increased to RMB2,148.7 million as of May 31, 2026, primarily attributable to our loss for the period of RMB210.2 million in the five months ended May 31, 2026, which included fair value changes of financial liabilities at FVTPL of RMB79.9 million relating to our convertible preferred shares. See Consolidated Statements of Changes in Equity in the Accountant's Report set out in Appendix I to this document and "Financial Information — Description of Selected Items of Our Consolidated Statements of Comprehensive Loss" for more details. Our net current liabilities increased from RMB1,165.2 million as of December 31, 2024 to RMB2,045.1 million as of December 31, 2025, primarily due to an increase of RMB1,846.7 million in financial liabilities at FVTPL relating to our financing activities and an upward adjustment in our valuation, partially offset by an increase of RMB771.0 million in cash and cash equivalents and a decrease of RMB189.5 million in trade payables. Our net current liabilities further increased to RMB2,196.2 million as of May 31, 2026, primarily reflecting a decrease of RMB195.9 million in cash and cash equivalents, partially offset by an increase of RMB18.4 million in prepayments, deposits and other receivables and a decrease of RMB23.2 million in trade payables. See "Financial Information — Discussion of Selected Items from Our Consolidated Balance Sheets" for more details. Upon [**REDACTED**], all of our convertible preferred shares will automatically convert into ordinary shares in accordance with their terms and will cease to be recognized as financial liabilities at FVTPL and be reclassified to equity. As a result, our net liabilities and net current liabilities positions are expected to turn into net assets and net current assets positions after [**REDACTED**].

Summary of Consolidated Statements of Cash Flows

The following table sets forth the components of our consolidated statements of cash flows for the periods indicated:

	Year Ended December 31,		Five months ended May 31,	
	2024	2025	2025	2026
	RMB'000	*RMB'000*	*RMB'000 (unaudited)*	*RMB'000*
Net cash (outflow to)/inflow from operating activities	(145,606)	(182,604)	154,087	(180,725)
Net cash inflow from investing activities	7,753	287	2,286	6,243
Net cash inflow from/(outflow to) financing activities	35,076	966,756	14,202	(2,347)

	Year Ended December 31,		Five months ended May 31,	
	2024	2025	2025	2026
	RMB'000	*RMB'000*	*RMB'000 (unaudited)*	*RMB'000*
Net (decrease)/increase in cash and cash equivalents	**(102,777)**	**784,439**	**170,575**	**(176,829)**
Cash and cash equivalents at the beginning of year/period	131,208	29,712	29,712	800,749
Effect of foreign exchange rate changes on cash and cash equivalents	1,281	(13,402)	(9)	(19,024)
Cash and cash equivalents at end of year/period	**29,712**	**800,749**	**200,278**	**604,896**

Our primary uses of cash during the Track Record Period were to fund our research and development of our drug candidates. During the Track Record Period, we had financed our operations mainly from series of financing and licensing revenue. We recorded net cash outflow to operating activities of RMB145.6 million, RMB182.6 million and RMB180.7 million in 2024, 2025 and the five months ended May 31, 2026. Our net cash used in operating activities primarily reflected our loss before tax as we continued to invest in R&D, adjusted for non-cash items and changes in working capital. In the five months ended May 31, 2026, our net cash outflow to operating activities was primarily attributable to our loss before tax of RMB210.2 million, adjusted for the increase of RMB79.9 million in fair value of financial liabilities at FVTPL, the decrease of RMB23.2 million in trade payables and the increase of RMB17.5 million in prepayments, deposit and other receivables. In 2025, our net cash outflow to operating activities was primarily attributable to our loss before tax of RMB919.3 million, adjusted for the increase of RMB927.8 million in fair value of financial liabilities at FVTPL, the decrease of RMB189.5 million in trade payables and the increase of RMB22.5 million in prepayments, deposit and other receivables. In 2024, our net cash outflow to operating activities was primarily attributable to our loss before tax of RMB282.6 million, adjusted for the increase of RMB122.8 million in trade payables, the increase of RMB14.0 million in fair value of financial liabilities at FVTPL and the increase of RMB7.9 million in other non-current assets. See "Financial Information — Liquidity and Capital Resources — Consolidated Statements of Cash Flows" for more details.

Working Capital Sufficiency

Our Directors are of the view that, taking into account the financial resources available to our Group, including cash and cash equivalents, cash flows from operating and financing activities, and the estimated net [**REDACTED**] from the [**REDACTED**], we have sufficient working capital to meet our present requirements and to cover at least 125% of our costs, including research and development expenses and administrative expenses, for at least the next 12 months from the date of this document.

Our cash burn rate refers to the average monthly amount of net cash used in operating activities, payment for property, plant and equipment and lease payments, without taking into account the potential cash inflow from existing licensing and collaboration agreement. We estimate that we will receive net [**REDACTED**] of approximately RMB[**REDACTED**] in the [**REDACTED**], assuming an [**REDACTED**] of HK$[**REDACTED**] per Share, being the low end of the indicative [**REDACTED**] stated in this document. Assuming an average cash burn rate going forward of 1.1 times the level in 2025, we estimate that (i) our cash and cash equivalents as of May 31, 2026 at RMB604.9 million, will be able to maintain our financial viability for [**REDACTED**] months, (ii) if we take into account [**REDACTED**]% of the estimated net [**REDACTED**] from the [**REDACTED**] (namely, the portion allocated for our working capital and other general corporate purposes), [**REDACTED**] months, or, (iii) if we take into account all estimated net [**REDACTED**] from the [**REDACTED**], [**REDACTED**] months. Directors and our management team will continue to monitor our working capital, cash flows, and our business development progress.

[**REDACTED**]

OUR SINGLE LARGEST GROUP OF SHAREHOLDERS

As of the Latest Practicable Date, our Single Largest Group of Shareholders, comprising Dr. Cao, Ms. Geng, Ming De Holdings and Radiance C LLC, was able to exercise approximately 36.27% voting rights in our Company. Immediately upon completion of the [**REDACTED**] (assuming the [**REDACTED**] is not exercised), our Single Largest Group of Shareholders will be entitled to exercise approximately [**REDACTED**]% voting rights in our Company and will remain as our single largest group of Shareholders. There will be no controlling shareholder of our Company under the Listing Rules upon [**REDACTED**]. For details, see "Relationship with Our Single Largest Group of Shareholders" in this document.

OUR PRE-[REDACTED] INVESTMENTS

We conducted five rounds of the Pre-[**REDACTED**] Investments with an aggregate amount of approximately US$240 million from the Pre-[**REDACTED**] Investors, which include private equity and venture capital funds and investment holding companies, among which some have a specific focus on the healthcare industry. OrbiMed Advisors LLC is our sophisticated investor. Immediately upon completion of the [**REDACTED**] (assuming the [**REDACTED**] is not

exercised), OrbiMed Advisors LLC, through its affiliates, will hold approximately [**REDACTED**]% of the total issued share capital of our Company. For details, see "History, Development and Corporate Structure — Pre-[**REDACTED**] Investments" in this document.

COLLABORATION AND LICENSING ARRANGEMENTS

We have entered into an exclusive license agreement with Qilu on March 31, 2025 to develop and commercialize MHB088C in Greater China. We granted Qilu an exclusive license to use, produce and manufacture the licensed compound and licensed products within Greater China, and a non-exclusive license to synthesize the payload, linker, linker-payload and B7-H3 antibody for the above purposes. The Qilu Collaboration Agreement does not limit any targeted indications of MHB088C or its form of therapy for Qilu. Prior to the execution date, MHB088C was in a Phase I/II clinical study for solid tumors in China and received IND approval from the FDA to conduct Phase I/II clinical trials for solid tumors in July 2024. We retained global rights to MHB088C outside Greater China and continued to advance our development in these regions. The joint development committee, composed of two members from each of us and Qilu, shall be responsible for overseeing and coordinating the development, transfer, manufacturing and commercialization of the licensed compounds and products. We and Qilu shall be each responsible for remedial actions relating to product liability in our respective territories. Qilu agreed to make us an upfront payment of RMB280 million, milestone payments in an aggregate amount of up to RMB1,065 million for R&D, registration and sales activities, and tiered royalties. As of December 31, 2025, we have received milestone payments of RMB30.0 million. See "Business — Collaboration and Licensing Agreement" for more details.

DIVIDEND

We did not declare or pay dividends on our Shares during the Track Record Period. As of the Latest Practicable Date, we had not adopted a formal dividend policy and did not have any pre-determined dividend payout ratio. See "Financial Information — Dividend" for more details.

[**REDACTED**]

[**REDACTED**] to be borne by us are estimated to be approximately HK$[**REDACTED**] (including [**REDACTED**], assuming an [**REDACTED**] of HK$[**REDACTED**] per Share, being the mid-point of the indicative [**REDACTED**] of HK$[**REDACTED**] to HK$[**REDACTED**] per Share), which represent [**REDACTED**]% of the gross [**REDACTED**] from the [**REDACTED**], assuming no Shares are [**REDACTED**] pursuant to the [**REDACTED**]. The above [**REDACTED**] are comprised of (i) [**REDACTED**] expenses of HK$[**REDACTED**], and (ii) non-[**REDACTED**] expenses of HK$[**REDACTED**], including (a) fees and expenses of our legal advisors and reporting accountants of HK$[**REDACTED**], and (b) other fees and expenses of HK$[**REDACTED**]. During the Track Record Period, we incurred [**REDACTED**] of approximately HK$[**REDACTED**]. We expect to incur [**REDACTED**] of approximately HK$[**REDACTED**] after the Track Record Period, approximately HK$[**REDACTED**] of which is expected to be charged to our consolidated statements of comprehensive loss, and approximately HK$[**REDACTED**] of which is attributable to the [**REDACTED**] of Shares and will be deducted from equity upon [**REDACTED**]. The [**REDACTED**] above are the latest practicable estimate for reference only, and the actual amount may differ from this estimate.

USE OF [**REDACTED**]

We estimate that we will receive net [**REDACTED**] of approximately HK$[**REDACTED**] from the [**REDACTED**], after deducting [**REDACTED**], fees and other estimated expenses in connection with the [**REDACTED**] to be paid and payable by us, assuming that the [**REDACTED**] is not exercised and an [**REDACTED**] of HK$[**REDACTED**] per Share, being the mid-point of the indicative [**REDACTED**] of HK$[**REDACTED**] to HK$[**REDACTED**] per share. We intend to use the net [**REDACTED**] for the following purposes: (i) approximately [26.0]%, or

HK$[**REDACTED**], will be used for the ongoing and planned clinical development of MHB036C for solid tumors; (ii) approximately [25.0]%, or HK$[**REDACTED**], will be used for the ongoing and planned clinical development of MHB018A for TED; (iii) approximately [7.0]%, or HK$[**REDACTED**], will be used for our ongoing and planned clinical development of the combination therapy between our key products MHB088C (B7-H3 ADC) and MHB039A (PD-1/VEGF bsAb) for 1L+ SCLC and other solid tumors; (iv) approximately [12.0]%, or HK$[**REDACTED**], will be used for the ongoing and planned development and commercialization of our key product MH004; (v) approximately [10.0]%, or HK$[**REDACTED**], will be used to advance and expand our therapeutic pipeline including combination therapies; (vi) approximately [10.0]%, or HK$[**REDACTED**], will be used to expand our commercialization capacities and manufacturing and quality management functions to support the global development and commercialization of our pipeline assets; and (vii) approximately [10.0]%, or HK$[**REDACTED**], will be used for working capital, business development and general corporate purposes, providing financial flexibility to support day-to-day operations and advance our pipeline.

RISK FACTORS

We believe there are certain risks and uncertainties involved in our operations, some of which are beyond our control. These risks are set out in "Risk Factors" in this document. Some of the major risks we face include: (i) We depend substantially on the successful clinical development, regulatory approval and commercialization of our drug candidates. Any failure to achieve the foregoing, or significant delays or cost overruns in the process, could materially and adversely affect our business, financial condition, results of operations and prospects; (ii) if our drug candidates fail to demonstrate safety and efficacy to the satisfaction of regulatory authorities or do not otherwise produce positive results, we may incur additional costs or experience delays in completing, or may ultimately be unable to complete, the development and commercialization of our drug candidates; (iii) clinical drug development is a lengthy and expensive process with inherent uncertainties, and we may not be able to commercialize our drug candidates at all; (iv) all material aspects of the research, development, manufacturing and commercialization of biopharmaceutical products are heavily regulated; (v) we may face challenges in developing or marketing our drug candidates as combination therapies due to safety, efficacy, or regulatory issues; (vi) the regulatory approval processes of the NMPA, FDA and other comparable regulatory authorities are time-consuming and may evolve over time. If we are unable to obtain without undue delay any regulatory approval for our drug candidates in our targeted markets, our business may be materially and substantially affected; (vii) we face intense competition and rapid technological change, and our competitors may develop therapies that are similar, more advanced, or more effective than ours; and (viii) we currently rely on third parties to manufacture our drug candidates for clinical development, and we may continue to rely on them for initial commercial-scale manufacturing upon regulatory approval. Our business could be adversely affected if those third parties fail to deliver sufficient quantities of quality products.

NO MATERIAL ADVERSE CHANGE

Our Directors confirm that up to the date of this document, there has been no material adverse change in our financial, operational or trading positions or prospects of our Group since May 31, 2026 and there is no event since May 31, 2026 which would materially affect the information shown in our consolidated financial statements included in the Accountant's Report included in Appendix I to this document.