For Immediate Release

DIMERIX RECEIVES US$10M UPFRONT PAYMENT FROM EVEREST MEDICINES

- Dimerix receives the US$10 million upfront payment (~A$14.1 million[1]) from Everest Medicines under the previously announced commercial licensing agreement
- Everest Medicines holds exclusive rights to commercialise DMX-200 for the treatment of Focal Segmental Glomerulosclerosis (FSGS) across Greater China, South Korea and Southeast Asia[2]
- Between 500,000 - 1,000,000 people are estimated to be living with FSGS in the territories[3]
- Dimerix eligible to receive up to a further US$330 million (~A$467 million[1]) in success-based development, regulatory and commercial milestone payments, in addition to tiered royalties on net sales of DMX-200 in the licensed regions
- Everest is the fifth regional license agreement for DMX-200, following agreements with Advanz Pharma (announced October 2023)[4], Taiba Rare (announced May 2024)[5], Fuso Pharmaceutical Industries (announced 7 January 2025)[6], and BioMarin Pharmaceutical Inc. (announced 1 May 2025)[7]
- Dimerix has now received more than A$80 million in non-dilutive upfront licensing payments across these five licensing agreements
- Collectively, Dimerix five commercial license agreements provide the potential to generate up to ~A$1.9 billion[8] in potential milestone payments, in addition to future royalty income on net sales
- Dimerix retains all rights to DMX-200 in territories not currently licensed and continues to progress licensing discussions with potential partners across those unlicensed regions

MELBOURNE, Australia, 20 August 2026: Dimerix Limited (ASX: DXB, "Dimerix") a clinical-stage biopharmaceutical company developing kidney disease treatments, is pleased to announce today that it has received the initial US$10 million (A$14.1 million[1]) upfront payment under its recently announced license agreement with Everest Medicines.

Under the agreement, Everest has been granted exclusive rights to develop and commercialise DMX-200 across all indications including focal segmental glomerulosclerosis (FSGS), in Greater China (Mainland China, Hong Kong SAR, Macao SAR and Taiwan region), South Korea and certain Southeast Asian countries (Singapore, Malaysia, Thailand, Indonesia, Vietnam and Philippines).[2]

The Everest partnership further expands Dimerix's global commercialisation strategy for DMX-200, with the Company now having secured five high quality regional partners across key pharmaceutical markets. Collectively, Dimerix's licensing agreements provide the potential to generate up to ~A$1.9 billion[8] in upfront payments and potential milestone payments, in addition to future royalty income on net sales.

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Under the Everest agreement, and in addition to the US$10 million upfront payment, Dimerix is eligible to receive up to a further US$30 million (approximately A$42.4 million[1]) in success-based development and regulatory milestone payments, together with up to US$300 million (approximately A$424.4 million[1]) in commercial milestone payments. Dimerix is also entitled to tiered royalties ranging from 10% to 15% on net sales of DMX-200 across the Everest licensed territories.[2]

"Everest is a highly regarded partner with deep expertise in rare kidney diseases, and we look forward to continuing our collaboration as we advance the ACTION3 Phase 3 study.

Pleasingly, receipt of the US$10 million upfront payment also further strengthens Dimerix's balance sheet. Combined with existing cash reserves and the recently announced A$10 million facility, the Company is funded through major inflections points including completion of the ACTION3 Phase 3 trial for DMX-200 as well as initiation of the Phase 2 clinical trial for DMX-652."

Dr Nina Webster, CEO & Managing Director, Dimerix

Dimerix continues to pursue additional licensing opportunities in territories that remain unpartnered as it advances DMX-200 toward potential global registration and commercialisation.

About ACTION3 FSGS Phase 3 Study

The Phase 3 study, which is titled "Angiotensin II Type 1 Receptor (AT1R) & Chemokine Receptor 2 (CCR2) Targets for Inflammatory Nephrosis", or ACTION3 for short, is a pivotal (Phase 3), multi-centre, randomized, double-blind, placebo-controlled study of the efficacy and safety of DMX-200 in patients with FSGS who are receiving a stable dose of an angiotensin II receptor blocker (ARB). Once the ARB dose was stable, patients were randomized to receive either DMX-200 (120 mg capsule twice daily) or placebo.

The ACTION3 adult cohort is fully recruited with 333 patients randomised and dosed globally. Recruitment has been completed across 219 sites in 21 countries including the United States, Europe, Japan, China, Australia and New Zealand. The final adult patient commenced treatment in March 2026, transitioning the study from recruitment into treatment and follow-up. The final adult patient is expected to complete dosing in March 2028. Recruitment of paediatric patients aged 12-17 years continues as an independent cohort within the ACTION3 program and may support future expansion into adolescent indications in key territories.

The single Phase 3 trial in FSGS patients is designed to capture evidence of proteinuria and kidney function (eGFR slope) during the trial, aimed at generating sufficient evidence to support marketing approval. Further information about the study can be found on ClinicalTrials.gov (Study Identifier: NCT05183646) or Australian New Zealand Clinical Trials Registry (ANZCTR) (Study Identifier ACTRN12622000066785).

Authorised for lodgement by the Board of Dimerix

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About Dimerix

Dimerix Limited (ASX: DXB) is a clinical-stage biopharmaceutical company focused on developing new therapies for kidney diseases with significant unmet medical need. The Company's lead program, DMX-200, is currently in Phase 3 clinical development for focal segmental glomerulosclerosis (FSGS), a serious and life-threatening rare kidney disease with limited treatment options. In addition, Dimerix is advancing a Phase 2 program in acute kidney injury (AKI), further strengthening its pipeline in high-need renal indications. With a growing network of five commercial partners supporting global development and future market access, Dimerix is committed to expanding its reach and delivering innovative treatments to as many patients as possible worldwide while creating long-term value for shareholders. For more information, please visit the company's website at www.dimerix.com.

About DMX-200 in FSGS

FSGS is a rare, serious kidney disorder characterised by progressive scarring (sclerosis) in parts of the glomeruli—the kidney's filtering units. This scarring leads to proteinuria, progressive loss of kidney function, and often end-stage renal disease. FSGS is increasingly understood to have an inflammatory component, with monocyte and macrophage activation contributing to glomerular injury. In the United States, more than 40,000 people are estimated to be living with FSGS, including both adults and children.[9] There are no therapies specifically approved for FSGS in the U.S., and disease management relies on non-specific immunosuppressive and supportive therapies. In patients with progressive or treatment-resistant FSGS, the average time from diagnosis to end-stage kidney disease can be as short as five years. Even among those who undergo kidney transplantation, disease recurrence occurs in up to 60% of cases,[10] underscoring the urgent need for new, disease-modifying treatments.

DMX-200 is a chemokine receptor (CCR2) antagonist administered to patients already receiving an angiotensin II type I receptor (AT1R) blocker, the standard of care treatment for hypertension and kidney disease. DMX-200 is protected by granted patents in various territories until 2032, with patent applications submitted globally that may extend patent protection to 2042, in addition to Orphan Drug Designation granted in the United States, Europe, UK and Japan[11].

About DMX-652 in Acute Kidney Injury

Acute kidney injury (AKI) is a prevalent and severe clinical syndrome of substantial unmet need. It can arise from several high-risk clinical settings including, most notably, cardiac surgery and sepsis and is characterised by a rapid decline in kidney function (within hours), often resulting in high morbidity and mortality. The current addressable patient population is estimated to be approximately 260,000 across the major markets of United States, Germany, France, Italy, Spain and United Kingdom per annum,[12,13] making this indication a potential orphan designation. AKI represents a significant clinical burden. There are no approved therapies for AKI, which is associated with rapid kidney function decline within hours, increased risk of chronic kidney disease and long-term kidney complications.

DMX-652 is a selective inhibitor of USP30 - a mitochondrial enzyme that slows the removal of damaged mitochondria. DMX-652, which is a small molecule delivered as an oral once daily capsule, is designed to support mitochondrial quality control in injured kidney cells, a mechanism indicated in the progression of AKI caused by ischaemia (lack of blood flow resulting in oxygen starvation), toxins or sepsis related causes, as well as in other renal and non-renal indications. The DMX-652 acquisition includes the composition of matter patent, an open IND in the US with a Phase 2 clinical trial protocol which has received approval to proceed by the US Food and Drug Administration (FDA), as well as sufficient pharmaceutical grade (GMP) drug product for the Phase 2 trial and all manufacturing methodology. The Phase 2 trial is designed to investigate DMX-652's potential to prevent kidney injury and preserve renal function.

Dimerix Forward Looking Statement

This release includes forward-looking statements that are subject to risks and uncertainties. Although management believes that the expectations reflected in the forward-looking statements are reasonable at this time, Dimerix can give no assurance that these expectations will prove to be correct. Readers are cautioned not to place undue reliance on forward-looking statements. Actual results could differ materially from those anticipated. Reasons may include risks associated with drug development and manufacture, risks inherent in the regulatory processes, delays in clinical trials, results of clinical trials, contractual risks, risks associated with patent protection, future capital needs or other general risks or factors, including but not limited to those factors outlined in the most recent Dimerix Limited Annual Report.

References

1 *Based on XE rate of 1 USD = 1.409 AUD as at 19 August 2026*

2 *ASX release 16 June 2026*

3 Yang Y, Zhang Z, Zhuo L, Chen DP, Li WG. (2018) The Spectrum of Biopsy-Proven Glomerular Disease in China: A Systematic Review. Chin Med J (Engl), 131(6):731–735; and Du X, Xiao D, Ao C, Zhang Y, Xuan J. Disease Burden of IgA Nephropathy in China. ISPOR Europe 2021. (poster/presentation)

4 *ASX release 5 October 2023*

5 *ASX release 27 May 2024*

6 *ASX release 7 January 2025*

7 *ASX release 01 May 2025*

8 *Based on XE exchange rates & further terms outlined in ASX Announcements on 5 October 2023, 27 May 2024, 07 January 2025, 01 May 2025; and 16 June 2026*

9 *Nephcure FSGS Facts (https://nephcure.org/)*

10 *Front. Immunol., (July 2019) | https://doi.org/10.3389/fimmu.2019.01669*

11 *ASX releases: 14 December 2015, 21 November 2018, 07 June 2021, 30 September 2025*

12 *Demirjian S, Bashour CA, Shaw A, et al. Predictive Accuracy of a Perioperative Laboratory Test–Based Prediction Model for Moderate to Severe Acute Kidney Injury After Cardiac Surgery. JAMA 2022;327:956–64. https://doi.org/10.1001/jama.2022.1751.*

13 *Hobson C, Ruchi R, Bihorac A. Perioperative Acute Kidney Injury. Crit Care Clin 2017;33:379–96. https://doi.org/10.1016/j.ccc.2016.12.008*