vaccibody

Vaccibody AS

Farmasidagene 2019, Oslo

Non-confidential presentation

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Experienced international management team with solid drug development experience

- Privately-held clinical stage immuno-oncology company
  - Technology from University of Oslo and Oslo University Hospital in the laboratories of Professors Bjarne Bogen and Inger Sandlie
- >26 employees
- Proprietary, patented cancer vaccine technology
- Experienced, international management team with oncology expertise and biotech pedigree driving development
- Founded in 2007 in Oslo, Norway

Michael Engsig
Chief Executive Officer

KLIFO
Takeda NYCOMED

Agnete Fredriksen, PhD
President and Chief Scientific Officer

Co-founder

Siri Torhaug, MD
Chief Medical Officer *

AstraZeneca
NOVARTIS

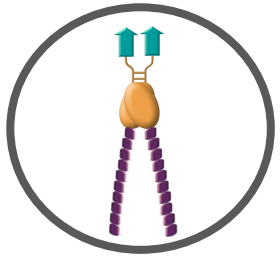
Mette Husbyn, PhD
Chief Technical Officer

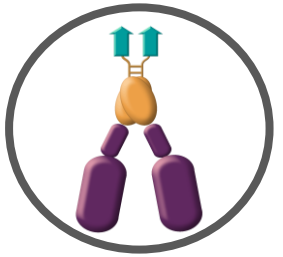
GE Healthcare
Lytix Biopharma

*Siri Torhaug joins January 2020

Vaccibody Cancer Vaccine Pipeline
VB10.16 – off-the-shelf, and **VB10.NEO** - personalized

PROGRAM	DISCOVERY	PRE-CLINICAL	PHASE I	PHASE II	PHASE III
MELANOMA LUNG (NSCLC) BLADDER RENAL HEAD AND NECK	**VB10.NEO**				
HEAD AND NECK	**VB10.NEO + NKTR-214***			NEKTAR	
PRECANCEROUS CERVICAL LESIONS	**VB10.16**				
CERVICAL	**VB10.16 + Atezolizumab (CPI)****				Roche

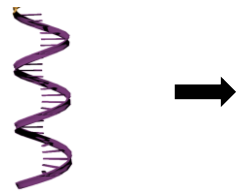




** NKTR-214 is Nektar Thrapeutic's CD122-biased IL-2 pathway agonist*
***Tecentriq® (Atezolizumab) is Roche's proprietary anti-PD-L1 checkpoint inhibitor (CPI)*

Vaccibody – Proprietary **DNA Vaccine** Platform
Concept of **targeting antigen to Antigen Presenting Cells**

The Vaccibody Technology Platform was developed based on the concept of **targeting antigen to APC** in order to create more efficacious vaccines.

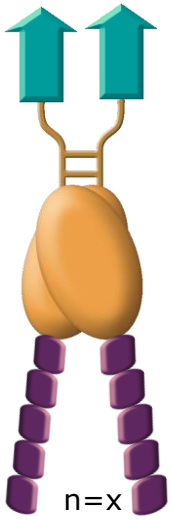


Exchangeable DNA Cassette

Vaccibody DNA Vaccine Plasmid

VB10.NEO

In vivo expression



Vaccibody in Protein Format

4

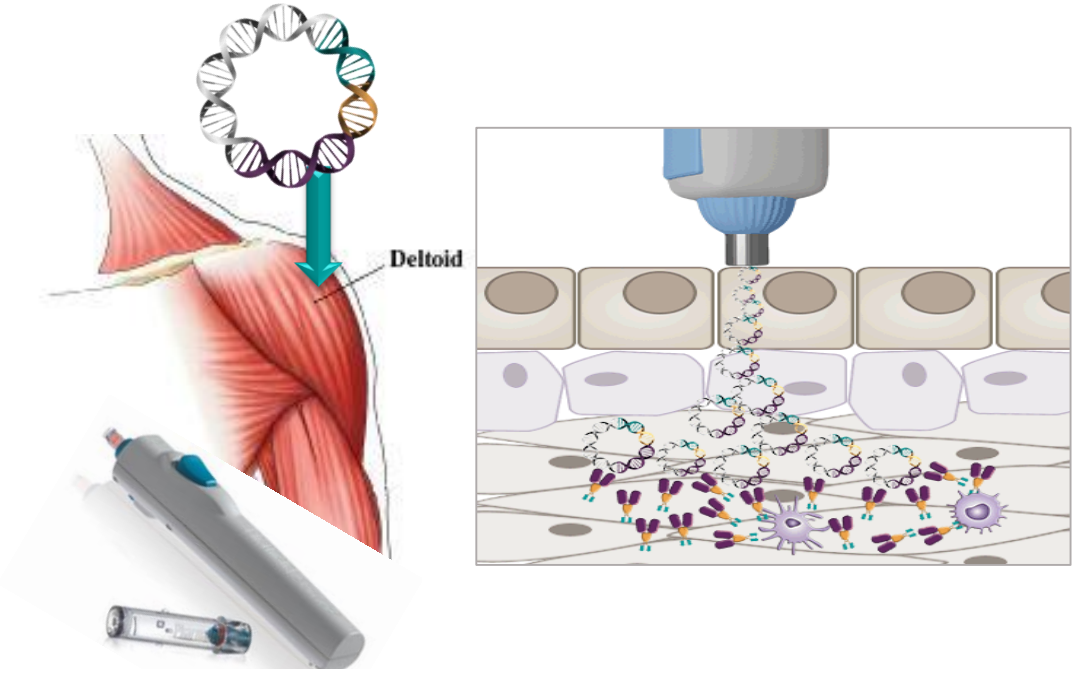
Target to Antigen Presenting Cell

Dimerization for crosslinking target receptor

Antigen moiety

Mode of action
FAST – STRONG – LONG LASTING Immune Response

Vaccibody DNA plasmid uses the muscle cell as a factory

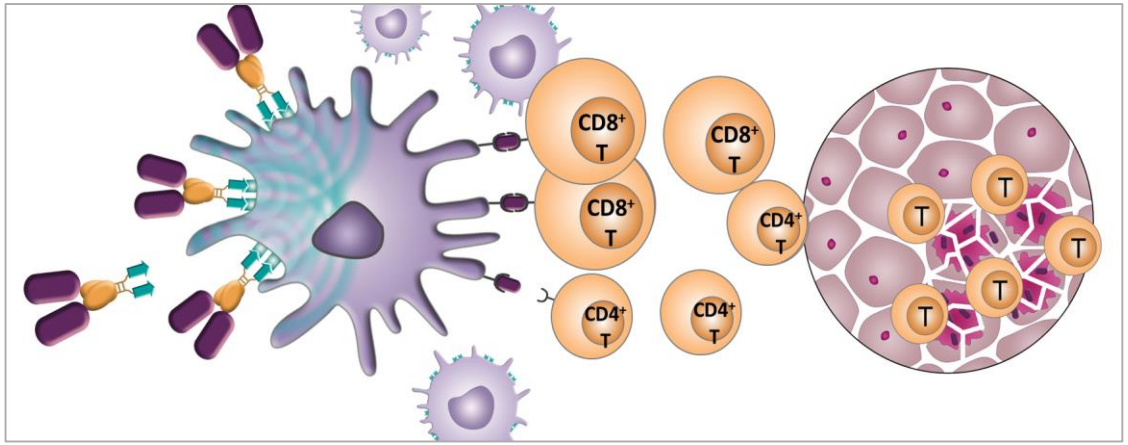


PharmaJet®

Direct targeting & attraction of antigen presenting cells

Faster and longer lasting immune responses

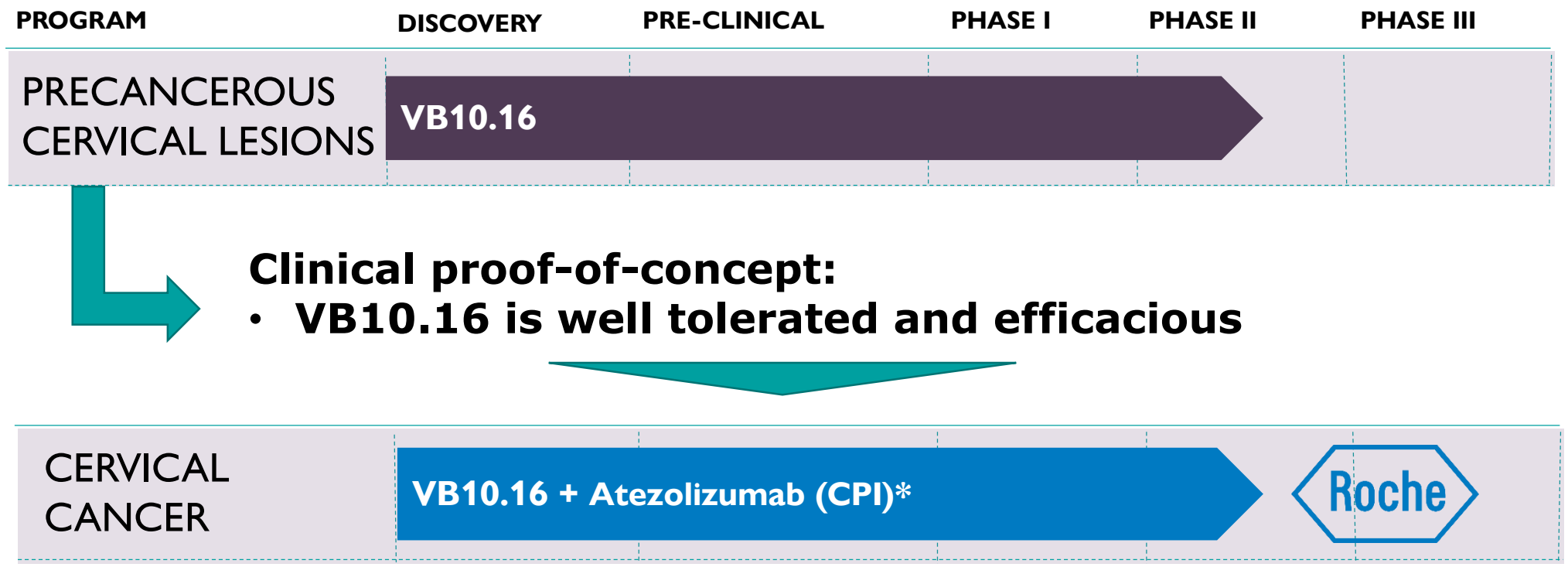
Stronger potential to kill cancer cells



Target – Attract – Mature – Deliver – Cross-present

MIP-1α: Skewing the immune system to a CD8+ killer T-Cell response

VB10.16 against HPV16 Positive Cancers. Clear Unmet Medical Need

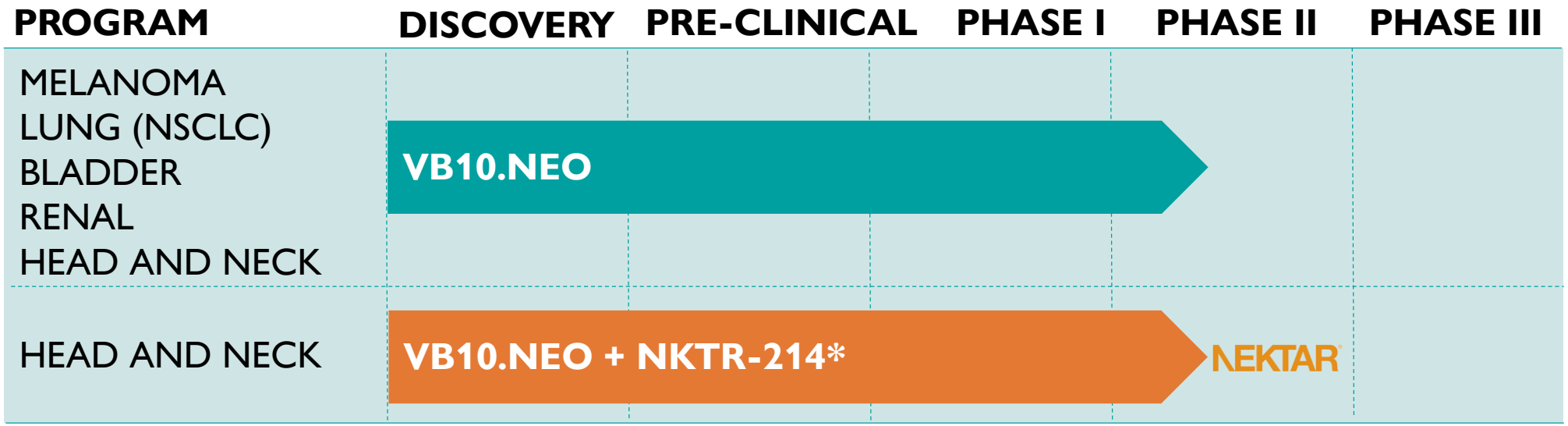


- Cervical cancer: 4th leading cause of cancer death for women
- Regional – 56.3% 5Y survival**
- Metastasized – 16.9% 5Y survival**

- Study in six countries incl. Norway
- Up to 50 patients
- First patient to be dosed Q1 2020

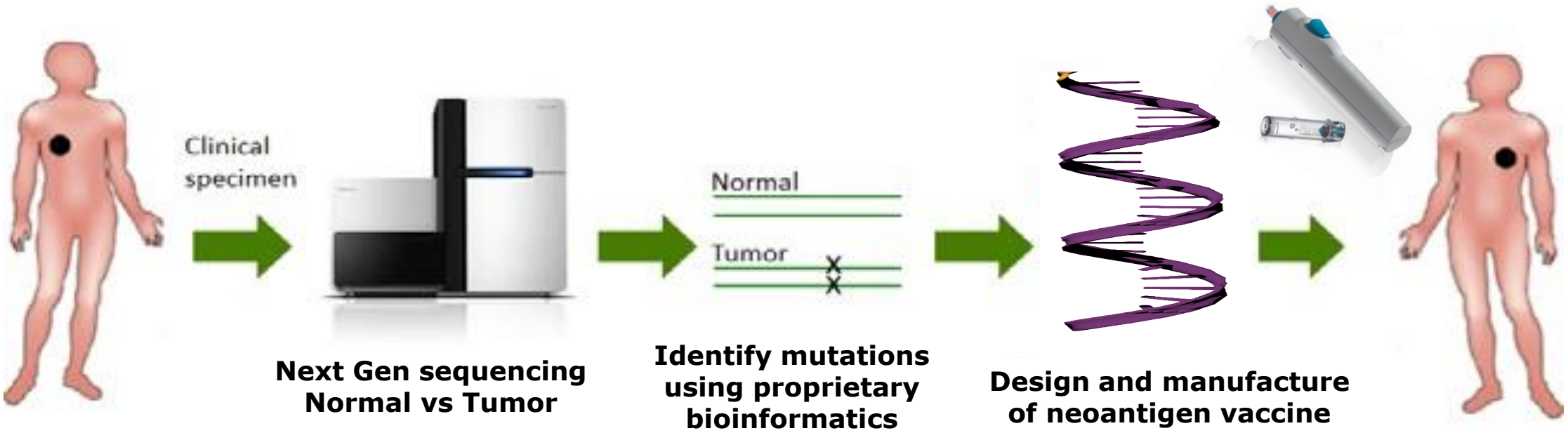
Tecentriq® (Atezolizumab) is Roche's proprietary anti-PD-L1 checkpoint inhibitor (CPI)
** *National Cancer Institute*
311.400 deaths per year - *American Cancer Society, Global Cancer Facts & Figures 4th Edition*

VB10.NEO
Phase 1/2a **Personalized Cancer Neoantigen Vaccine** Study



- Inclusion criteria - patients who did not reach complete responses with current standard of care immune checkpoint blockade
- 9 sites in Germany by year-end (n = 40-91)
  - 23 patients enrolled per Q2 2019
- NKTR-214 combo trial expected to start patient enrolment Q4 2019

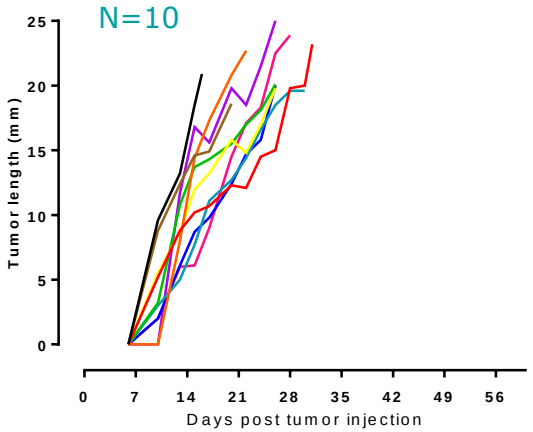
Personalized Cancer Neoantigen Vaccine



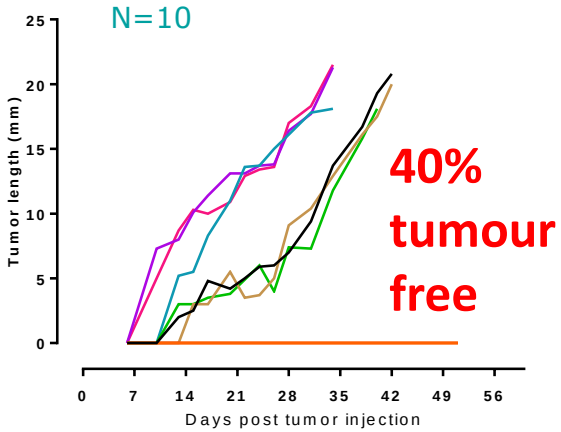
Vaccibody Induces **Tumor Protection as Monotherapy** – in mice

CT26 colon carcinoma model

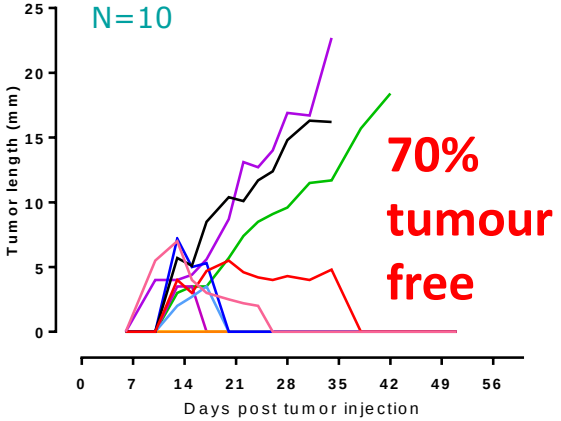
Control



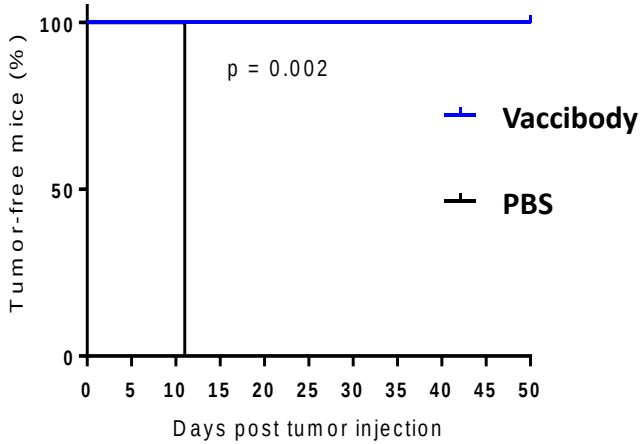
Vaccibody Monotherapy



Vaccibody Combination Therapy



Re-challenged mice are protected

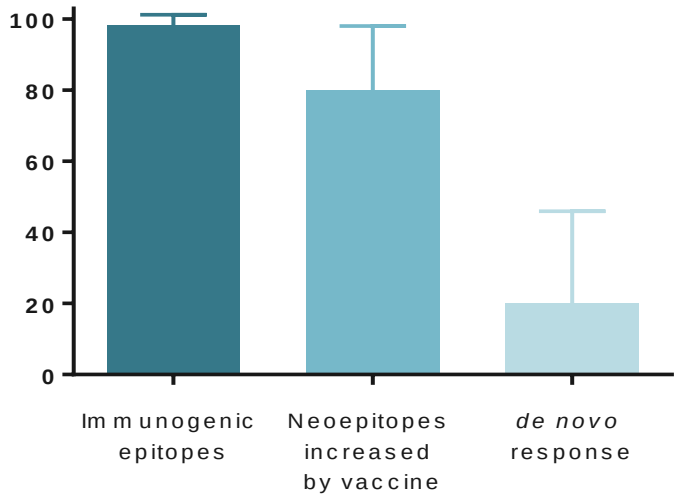


- **Monotherapy** - strong CD8+ T cell responses and **tumour protection**
- **Combo with CPI** –
  - Enhanced anti-tumour responses involving **complete tumour regression** of large, established tumours
  - **Long-term memory responses** - after a 2nd tumour challenge, no sign of tumour growth

VB10.NEO induce **immune responses** to the majority of selected neoepitopes in first three patients patients

Patient	Indication	TMB	#months on CPI before VB10.NEO	Disease at VB10.NEO start
A	SCCHN	Low	32	Relapsed
B	SCCHN	Low	15	stable
C	RCC	Low	18	stable

- First patients are all low TMB and with SD as best response to long-term CPI treatment.
- 1 patient progressed before VB10.NEO treatment.



First 3 patients tested after 6 vaccinations:

- High % of immunogenic neoepitopes selected with NeoSELECT prediction.
- Majority of neoepitopes increased by VB10.NEO
- Boosting pre-existing as well as *de novo* responses

Breaking News: 5th of November – **VB10.NEO induces Positive Clinical Responses**

SITC poster on Vaccibody webpage Saturday evening*

- VB10.NEO demonstrates the ability to induce clinical responses in multiple patients with metastatic or locally advanced solid tumours
- The clinical responses were observed within 9-24 weeks after first dose of VB10.NEO
- The clinical responses correlate with frequency of high quality neoepitopes as well as strong de novo neoepitope-specific CD8+ T cell responses induced by the vaccine
- The lesion used for neoepitope selection by NeoSELECT™ showed the most evident tumour shrinkage
- All patient-specific VB10.NEO vaccine batches have to date been produced successfully with the 20 highest ranked neoepitopes
- VB10.NEO is well tolerated

* http://www.vaccibody.com/scientific-presentations/

Vaccibody **TEAM** ready to execute and deliver!

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Thank you

Caspar Foghsgaard
Director Business Development

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