vaccibody

Jefferies Virtual Healthcare Conference

June 2, 2021



Forward-looking statement

This announcement and any materials distributed in connection with this presentation may contain certain forward-looking statements. By their nature, forward-looking statements involve risk and uncertainty because they reflect the company's current expectations and assumptions as to future events and circumstances that may not prove accurate.

A number of material factors could cause actual results and developments to differ materially from those expressed or implied by these forward-looking statements.

Today's presenters

CEOMichael Engsig



M.Sc. Biochemistry and G.D.Bus.Admin.

- Extensive experience from leading early-stage drug discovery through late-stage and commercial development
- Launched products across all major geographical areas
 - · Takeda and Nycomed
 - PPD
 - KLIFO

Chief Innovation & Strategy Officer Agnete B. Fredriksen



M.Sc. in Molecular Biology and Ph.D. in Immunology

- Designed and created the first Vaccibody molecules
- Co-founder of Vaccibody AS (2007)
- Served as CSO 2007-2021, leading the scientific strategy



Overview of Vaccibody

- Leading vaccine platform taking advantage of differentiated technology to address a broad range of diseases
 - "targeting antigens to antigen presenting cells, generating unique rapid, strong and long-lasting immune response"
- Highly advanced oncology pipeline with two Phase 2 assets including VB10.NEO, an individualized vaccine targeting tumor specific epitopes, as well as VB10.16, an off the shelf vaccine
- Rapidly advancing infectious disease platform with initial focus on COVID-19 validating our approach
- Significant collaboration with Genentech to support development of key assets
- Highly experienced management team with track record of success



Pipeline

Broad oncology coverage and strong partnerships. Leveraging platform within infectious diseases

| Program | Indication | Discovery | Preclinical | Phase I | Phase II | Phase III | Partnerships | |
|------------------------|--|-----------|-------------|---------|----------|-----------|---|--|
| Oncology and precancer | | | | | | | | |
| Individualized | | | | | | | | |
| VB10.NEO | Melanoma, lung, bladder, renal, head & neck | | | | | | Genentech ¹ Nektar ² | |
| VB10.NEO | Locally advanced and metastatic tumors | | | | | | Genentech 1,3 | |
| Off the shelf | | 1 | | | | | | |
| VB10.16 | HPV16 positive cancers Cervical cancer ⁴ | | | | | | | |
| Undisclosed | Undisclosed targets within shared antigens | | | | | | | |
| Infectious disease | | | | | | | | |
| | | | | | | | | |
| VB10.COV2 | SARS-CoV-2 | | | | | | | |
| Undisclosed | Undisclosed targets within infectious disease | | | | | | | |



Vaccibody's Strategy

Leveraging Vaccibody's validated technology platform for maximum value generation

Vaccibody's aim is to become the world's leading vaccine technology company with an ability to address a range of diseases by executing on the core tenets of its strategy:



Rapidly advance existing assets through the clinic



Further leverage the technology platform to expand pipeline



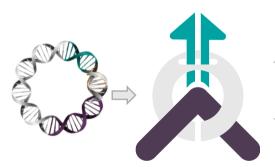
Seek strategic partnerships to compliment our strengths



Flexible Vaccibody™ platform can fuel multiple, precise products customized for each indication

The Vaccibody™ technology platform is developed based on the concept of targeting antigen to Antigen Presenting Cells (APCs) in order to create more efficacious vaccines

APC targeted vaccine platform



Targeting unit to attract and bind Antigen Presenting Cell

Dimerization unit for crosslinking targeted receptor

Antigenic unit

Vaccine modalities

The Vaccibody™ platform is agnostic in terms of delivery format:

- DNA vaccine
- mRNA vaccine
- Viral vector vaccine
- Fusion protein subunit vaccine

The Vaccibody[™] platform allows for flexibility both within the molecule and through the mode of delivery Vaccibody[™] is very well tolerated and provides large potential for combination therapies

Applicable to develop specific vaccine products for cancer, infectious diseases and autoimmunity

Vaccibody™ mechanism of action

The APC targeting vaccine technology platform creates unique rapid, strong and broad immune responses that can be tailored to each disease **Neutralization** APC -B cell of pathogen **APC** targeting and 4a 3a synapse **APC Needle-free injection &** attraction in-vivo expression Deltoid 3b

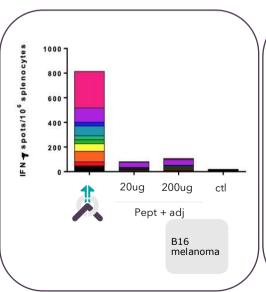


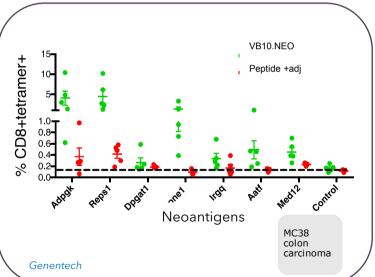
Internalization & presentation to CD4 and CD8 T cells

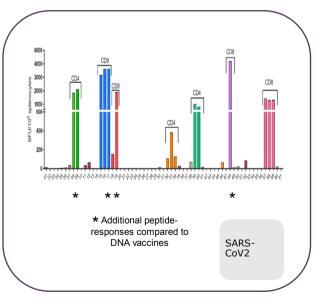
Killing of cancer cells or pathogen-infected cells

Vaccibody induce rapid and strong T cell responses with unique increased breadth of the CD8 T cell response

VB10.NEO elicits a more potent and broad CD8 T cell response than multiple other vaccine technologies









VB10.NEO: Exclusively licensed to Genentech

Global, oncology collaboration between Vaccibody and Genentech to develop individualized neoantigen cancer vaccines across multiple tumor types



GenentechA Member of the Roche Group

Conduct clinical Phase1b trial combining VB10.NEO with atezolizumab



Responsible, and bear all costs, for all further clinical, regulatory, manufacturing and commercialization activities for VB10.NEO

Research, Bioinformatics and Manufacturing Collaboration

- Initial upfront and near-term payments of USD 200 million
- Potential milestone payments of up to USD 515 million
- Tiered low double-digit royalties on net sales



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VB10.NEO: Vaccibody's individualized cancer vaccine - potentially best in class

Targeting antigen presenting cell

Proprietary neoantigen selection method

Promising immunogenicity and clinical data
Phase I/IIa in >50 patients with melanoma, NSCLC, SCCHN, RCC and urothelial cancer

100% manufacturing success rate
 Flexible, rapid and cost-effective manufacturing of targeted VB DNA vaccine

Well tolerated

VB10.NEO

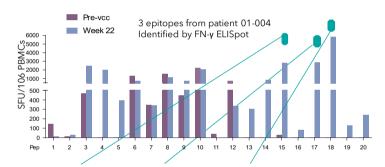


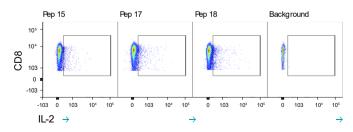
Fully personalized vaccine against the patient's individual cancer specific mutations



VB10.NEO: Strong signs of clinical efficacy. Neoepitope-specific CD8 dominating immune responses in SCCHN patients with clinical response

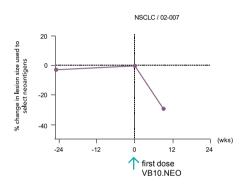
- Marked changes in lesion size development observed after initiating VB10.NEO
- Shrinkage of tumors and stabilization of progressing lesions
- Strong, dominant CD8 responses in patients with clinical responses



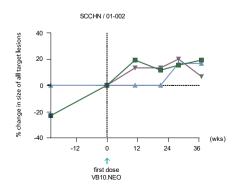


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Stable disease at vaccination start



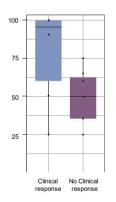
Progressive disease at vaccination start



Intriguing link between neoepitope quality parameter, immune responses and clinical signals

Patients with responses show highest frequency of high quality neoepitope and the strongest immune response profile

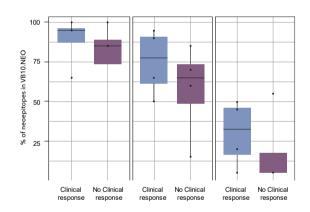
Frequency of high quality neoepitopes vs change in lesion size



Patients with response after VB10.NEO vaccinations have:

Highest frequency of high quality neoepitopes

Frequency of immunogenic neoepitopes vs change in lesion size



Patients with response after VB10.NEO vaccinations have:

- Highest frequency of immunogenic neoepitopes
- Highest frequency of increased response after vaccination
- Highest frequency of de novo immune responses



VB10.16: Therapeutic cancer DNA vaccine against HPV16 induced pre-malignancies and malignancies

Expanding the clinical development plans in multiple indications

C-01

 Finalized Phase 1/2a study with VB10.16 monotherapy in HPV16+ precancerous cervical lesions

C-02

- Phase II study of VB10.16 + atezolizumab in advanced cervical cancer has been initiated and recruitment is on track
- IA #1, performed after 10 patients passed 6 weeks of treatment showed no safety concerns and the trial continuous as planned

Exploring the commercial potential of VB10.16 for the treatment of additional HPV positive cancer indications like HNSCC

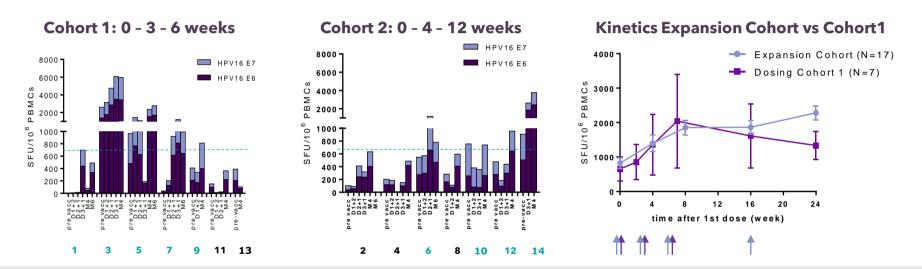
VB10.16



Off the shelf vaccine targeting foreign viral antigens



VB10.16: Strong correlation with strength of induced HPV16-specific immune response and lesion size reduction



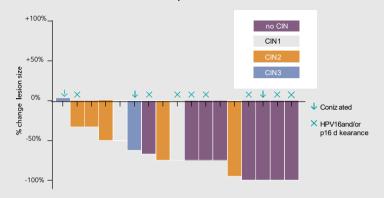
- All 9 patients with strong HPV16-specific T cell responses (>650 spots/mill) experienced reduction of the lesion size after vaccination with VB10.16
- The vaccination regimen from cohort 1 (week 0, 3 and 6) plus a booster vaccination at W16 was introduced in the Expansion Cohort. Stronger, long-lasting responses caused by the boost

VB10.16: Strong clinical data as monotherapy in precancerous lesions

VB10.16 as a monotherapy in HPV16-positive, precancerous cervical lesions induces

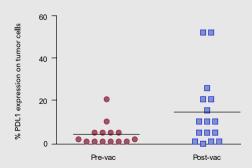
- Strong immune response and thus lesion size reduction in all patients followed >4 months
- CIN regression to CIN1 or no CIN in 10 patients
- HPV16 and/or p16 clearance in 8 patients
- Well tolerated. No SAEs
- Upregulation of PD-L1 in the lesions post vaccination, providing scientific rationale for combination with anti-PD-1/PD-L1 in cancer patients

Lesion size reduction, CIN regression and HPV16 and/or p16 clearance



Best response data (at enrollment: 10 CIN3 and 7 CIN2 patients)

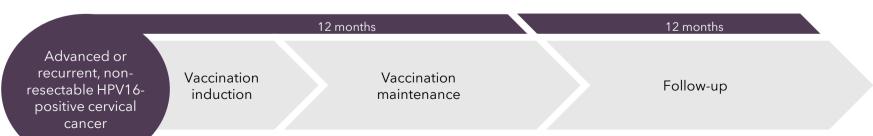
Upregulation of PD-L1 expression in lesions after vaccination



VB C-02: VB10.16 & atezolizumab (Tecentriq®) in advanced Cervical Cancer initiated & on track

A Multi-Centre, Open-label Phase 2a Trial of the Combination of VB10.16 and Atezolizumab in Patients with Advanced or Recurrent, Non-resectable HPV16 Positive Cervical Cancer (NCT04405349)

- Objectives: safety/tolerability, immunogenicity and efficacy
- Primary endpoints: incidence/severity of AEs, ORR (RECIST 1.1.)
- Up to 50 patients
- Conducted in Europe in 6 countries (Germany, Belgium, Bulgaria,
 Czech Republic, Poland and Norway)
- First patient dosed: 01Jul20





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Applicability of Vaccibody's Platform for Infectious Diseases

| | Rapid onset of immune responses | Complex and mulitple antigen design | Tailored to each disease's correlate of protection | Non-complex manufacturing process and formulation, painless administration |
|---------------|--|---|--|--|
| Opportunity | One dose efficacy | Include multiple antigens from same or different pathogens Inclusion of conserved epitopes | Match targeting unit and antigen to the disease's correlate of protection | Rapid response timeGlobal distributionThermostabilityLow CoGs |
| Applicability | Pandemics and other emerging diseases, travel, biodefense Therapeutic potential post exposure | Vaccine against complex pathogens and pathogens with high Ag variability Pan-pathogen vaccines Immunocompromised patients | Pathogens particularly sensitive to specific immune responses | Pandemics and other emerging diseases LMIC |



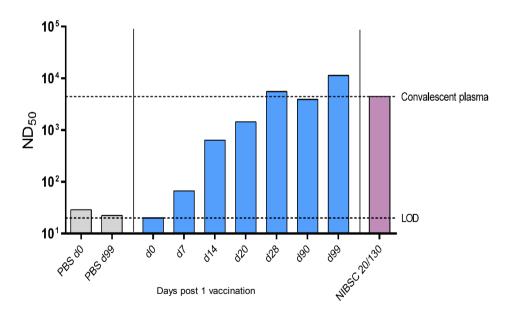
VB against Covid-19 prove VB ability to elicit rapid neutralizing antibody responses 7 days after 1 dose

- Rapid neutralizing Ab responses already at day 7 post 1 dose that increase to day 28
- Stabilizes at high levels without further dosing

Rapid and long-lasting neutralizing activity can be elicited with a single dose

The T cell response is long-lasting and effective memory responses are generated (see reference)

Neutralizing Ab responses over time after a single vaccination

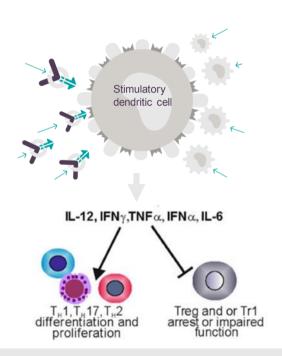


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Vaccibody's 2-arm CoV2 strategy to fight variants of concern

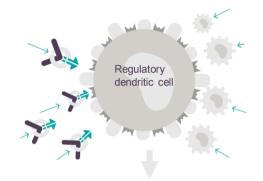
- 1) Rapid development of novel vaccines specifically targeting variants of concern that affect prior immunity as they emerge
 - <u>Candidate 1</u> harbors K417N, E484K and N501Y mutations matching the South African variant of concern
- 2) A T cell-based candidate less sensitive to spike mutations
 - <u>Candidate 2</u> harbors multiple selected, immunogenic and conserved T cell epitopes spanning several SARS-CoV2 antigens
 - Preclinical testing ongoing to identify lead candidate
 - Alone or in combination with RBD/Spike vaccines
 - Prophylactic and therapeutic potential

Targeting unit offers unique ability to explore Agspecific immune tolerance

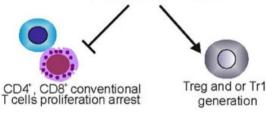




Natural ligands or scFv binding diverse set of surface receptors



IL-10, TGF β , IDO, PD-1, ARG



Cancer and infectious disease

Autoimmunity, allergy etc

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Key Strengths of Vaccibody™ Platform

- Flexibility in platform and precision in products
- Improved immune responses
 - Targeting to APC ensure rapid, strong and controlled immune responses
- Safety: very well tolerated across patient groups
- Attractive manufacturing, formulation and administration



Strong financial foundation for achieving our vision

- By end of the 1st quarter of 2021, Vaccibody had a cash position of USD 179.7 million
- Vaccibody has initiated a process to explore a possible listing on the Nasdaq (US)



Accomplishments and news flow guidance

Selected accomplishments

metastatic cancer

- November 2019
 Initial data from the VB10.NEO trial shows positive clinical responses in patients with local or
- July 2020
 First patient dosed in VB C-02 Phase II trial of VB10.16 in combination with Roche's atezolizumab in advanced cervical cancer
- October 2020
 Worldwide, exclusive collaboration with Genentech on VB10.NEO
- December 2020
 Pre-clinical data on second generation Cov2
 vaccine and launch of Infectious Disease strategy

News flow guidance

- **1H 2021:** VB10.COV2 Update on clinical development plans
- 1H 2021: VB10.NEO - initiation of VB N-02, Phase Ib trial
- **2H 2021:** VB10.16 fully enrolled VB C-02 trial in cervical cancer
- VB10.16 interim clinical data for first patients from VB C-02 trial in cervical cancer
- 2H 2021:
 Pre-clinical update from the infectious disease initiative



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