The background features a blue-toned scientific illustration. It includes a large, textured, spherical structure resembling a virus or a cell with protruding filaments. There are also smaller molecular models with blue and red spheres connected by lines, and a network of thin, branching structures. The overall aesthetic is clean and futuristic, typical of pharmaceutical or biotech branding.

Activating the patient's immune system to fight cancer

Company presentation

November 2018

The logo for targovax is contained within a white circular area. The word "targovax" is written in a lowercase, sans-serif font. The letter "o" is replaced by a stylized graphic consisting of a small circle above and below a larger circle, with a vertical line connecting them.

targovax

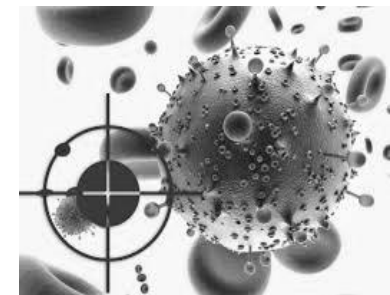
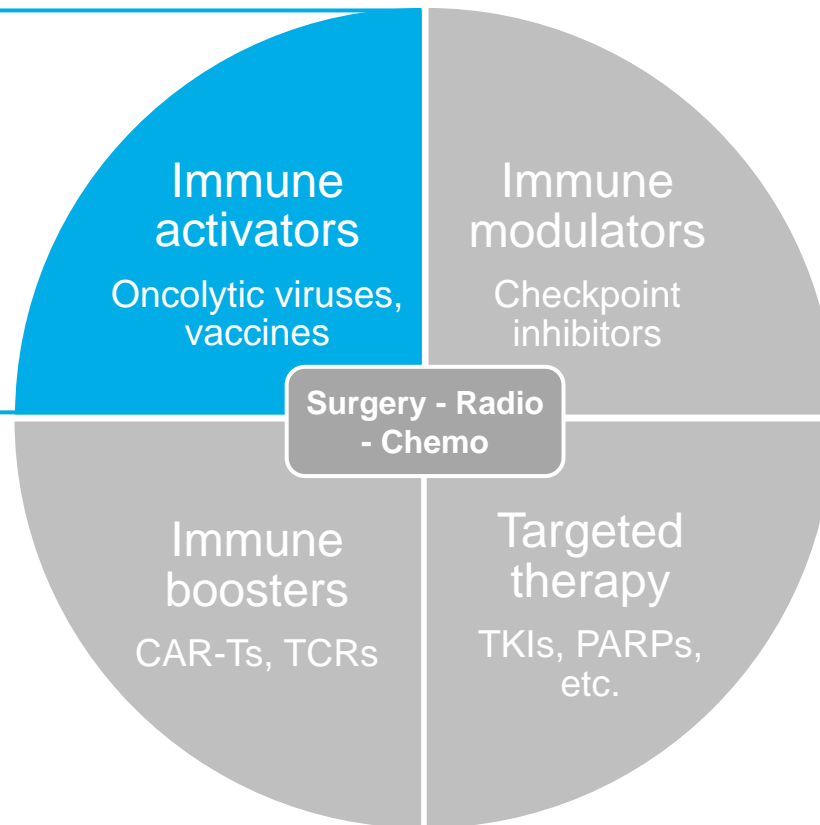
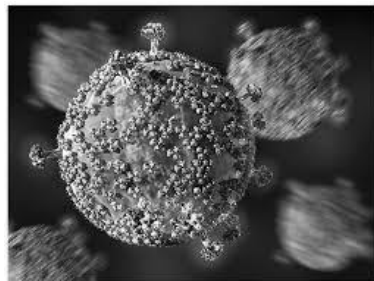
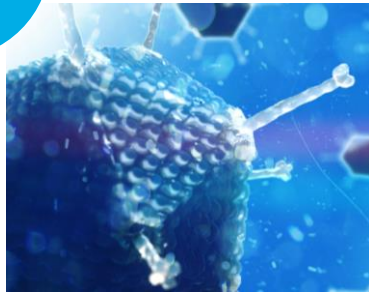
Important NOTICE AND DISCLAIMER

This report contains certain forward-looking statements based on uncertainty, since they relate to events and depend on circumstances that will occur in future and which, by their nature, will have an impact on the results of operations and the financial condition of Targovax. Such forward-looking statements reflect the current views of Targovax and are based on the information currently available to the company. Targovax cannot give any assurance as to the correctness of such statements.

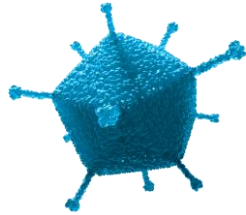
There are a number of factors that could cause actual results and developments to differ materially from those expressed or implied in these forward-looking statements. These factors include, among other things, risks or uncertainties associated with the success of future clinical trials; risks relating to personal injury or death in connection with clinical trials or following commercialization of the company's products, and liability in connection therewith; risks relating to the company's freedom to operate (competitors patents) in respect of the products it develops; risks of non-approval of patents not yet granted and the company's ability to adequately protect its intellectual property and know-how; risks relating to obtaining regulatory approval and other regulatory risks relating to the development and future commercialization of the company's products; risks that research and development will not yield new products that achieve commercial success; risks relating to the company's ability to successfully commercialize and gain market acceptance for Targovax's products; risks relating to the future development of the pricing environment and/or regulations for pharmaceutical products; risks relating to the company's ability to secure additional financing in the future, which may not be available on favorable terms or at all; risks relating to currency fluctuations; risks associated with technological development, growth management, general economic and business conditions; risks relating to the company's ability to retain key personnel; and risks relating to the impact of competition.

TARGOVAX'S POSITION IN THE FUTURE CANCER TREATMENT LANDSCAPE

Targovax focus



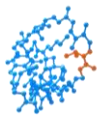
Two programs in clinical development, with an
ONCOLYTIC VIRUS LEAD PRODUCT CANDIDATE



ONCOS
Oncolytic virus

Lead product candidate

- Genetically **armed adenovirus**
- **Alerts the immune system** to recognize cancer antigens
- **Induces T-cells** specific to the patients' tumor
- **4 ongoing trials**



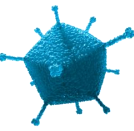
TG
Neoantigen
vaccine

Pipeline product

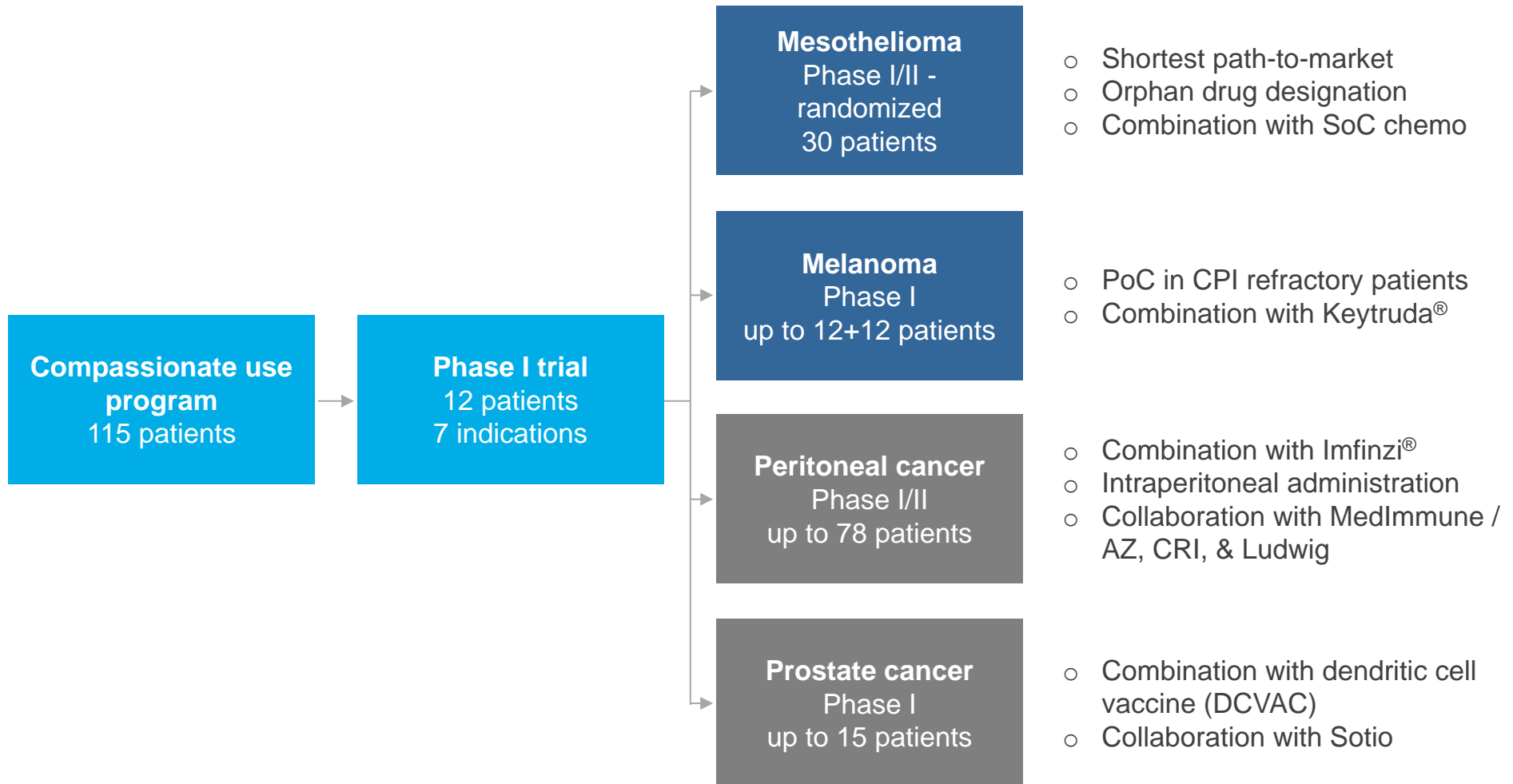
- **Shared neoantigen**, therapeutic cancer vaccine
- Triggers the immune system to **recognize mutant RAS cancers**
- **1 ongoing trial**

Triggers patient-specific responses

No need for individualization



ONCOS CLINICAL PROGRAM OVERVIEW



ONCOS-102 CLINICAL DATA SUMMARY



	Patient population	Immune activation	Efficacy
Various solid tumors Ph I Monotherapy	<ul style="list-style-type: none">○ End-stage patients, 3rd line and beyond○ 7 different solid tumors○ 12 pts	<ul style="list-style-type: none">○ Innate: 12/12○ Adaptive: 11/12	<ul style="list-style-type: none">○ 40% DCR○ 2 long-term survivors○ Survival correlated with TIL increase
Mesothelioma Ph I/II randomized with SoC chemo	<ul style="list-style-type: none">○ Metastatic○ 1st and 2nd/3rd line○ 6 pts completed trial to date	<ul style="list-style-type: none">○ Innate: 6/6○ Adaptive: 3/4	<ul style="list-style-type: none">○ 50% DCR<ul style="list-style-type: none">○ 1 PR○ 2 SD
Melanoma Ph I Combo with Keytruda [®]	<ul style="list-style-type: none">○ PD-1 refractory advanced melanoma○ 6 pts completed trial to date	<ul style="list-style-type: none">○ Innate: 6/6○ Adaptive: 4/4	<ul style="list-style-type: none">○ 1 CR, w/supporting immune data○ 3 local responders, but with distal progression

ONE PATIENT HAD A COMPLETE RESPONSE

following ONCOS-102 and Keytruda combination treatment



Baseline



Progression on Keytruda

Week 3



*Partial response (PR) after
3x ONCOS-102 injections*

Week 9



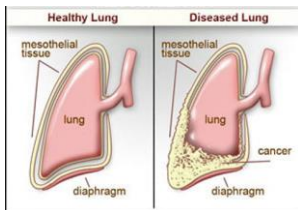
*Complete response (CR) after
3x ONCOS-102
& 2 Keytruda infusions*



ONCOS CLINICAL DEVELOPMENT STRATEGY

1

Path-to-market
Orphan indication

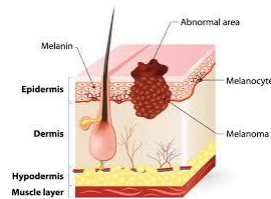


Target launch
indication

- Mesothelioma
- Orphan drug status
- Combo with SoC chemo

2

Proof-of-concept
Re-activating CPIs



CPI refractory
cancers

- CPI refractory melanoma
- Combo w/PD-1

3

Proof-of-concept
New CPI indication

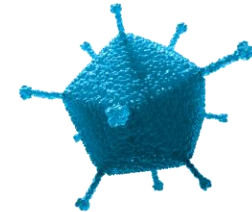


**Indications with no/
limited effect of CPIs**

- Ovarian and colorectal cancer with spread to peritoneum
- Combo w/PD-L1

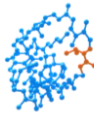
4

Next generation
oncolytic viruses



Platform expansion
with new targets

- Ongoing *in vivo* testing
- Novel targets and mode-of-action

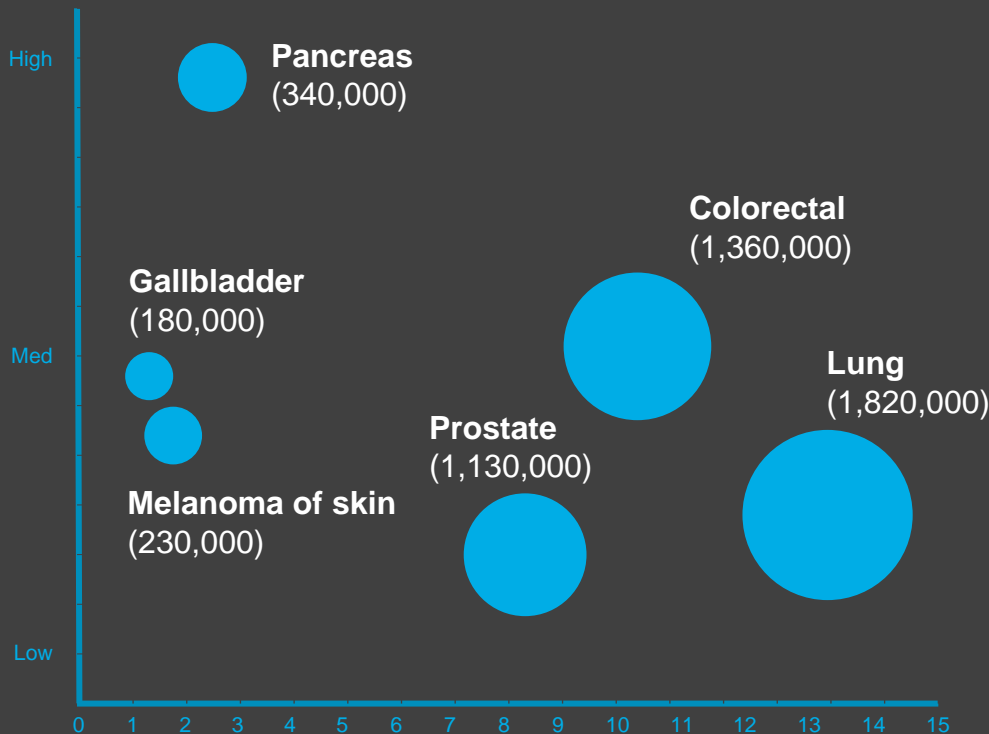


The RAS gene is mutated in 90% OF PANCREATIC AND 50% OF COLORECTAL CANCERS

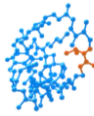
Frequency of RAS mutations

Global cancer incidents per 10,000

(xx) = no. of cancer patients

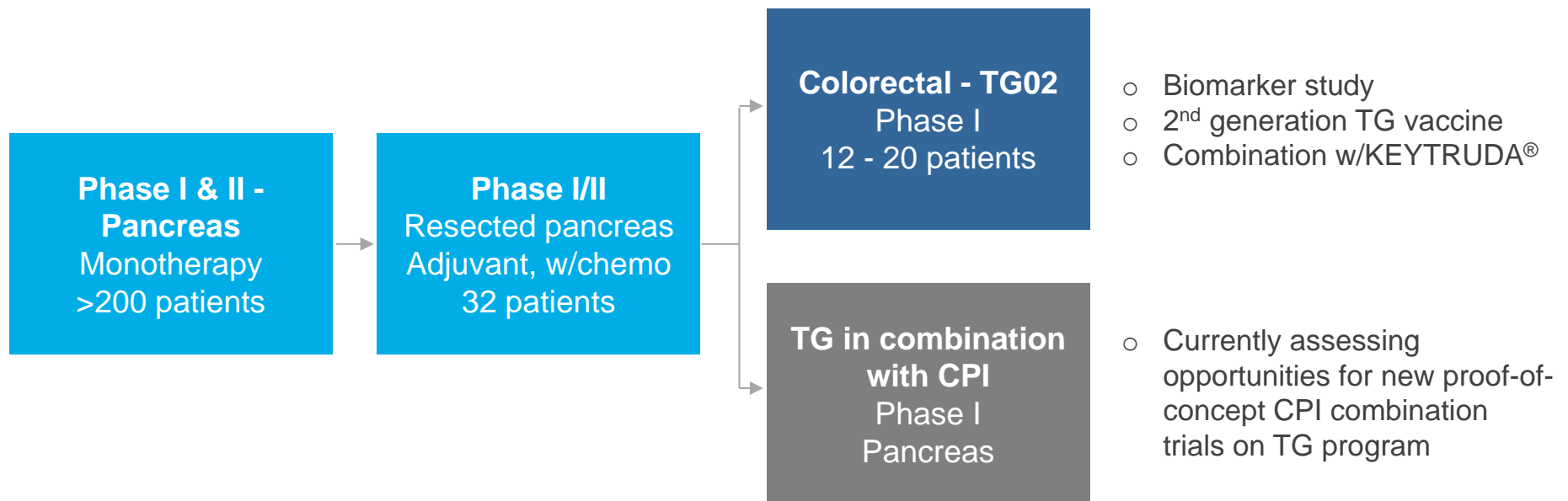


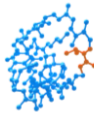
- RAS mutations are oncogenic and result in **uncontrolled cell division**
- There are **no existing therapies** targeting RAS mutations
- Targovax' TG program is a **unique neoantigen vaccine approach** for mutant RAS cancer



TG CLINICAL PROGRAM OVERVIEW

Phase I/II trial in resected pancreas cancer recently completed





TG01 IN RESECTED PANCREATIC CANCER

SIGNAL OF EFFICACY SEEN IN PHASE I/II TRIAL

Median overall survival

33.4 vs. 27.6 months reported in the ESPAC4 trial for gemcitabine alone (from time of surgery)

- First cohort: 33.1 months
- **Second cohort: not yet reached**

Median disease free survival

16.1 vs. 13.1 months reported in the ESPAC4 trial for gemcitabine alone (from time of surgery)

- First cohort 13.9 months
- **Second cohort 19.5 months**

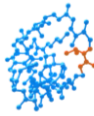
mutRAS immune activation

94% (30 out of 32 patients) had **RAS-specific immune activation**

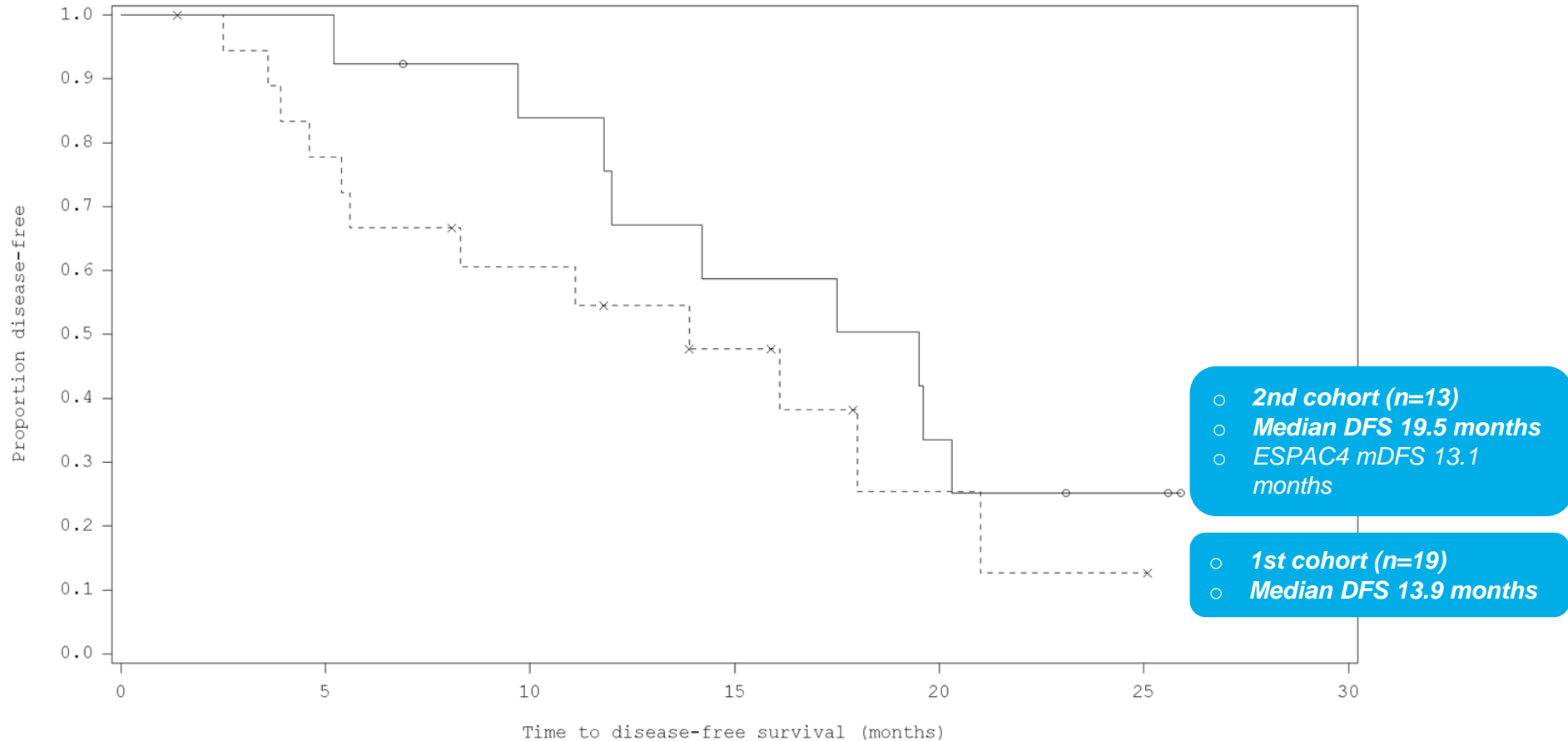
Dosing and safety

Dosing regimen defined and TG01 is **well-tolerated**

First cohort: 19 pts, Second cohort: 13 pts. Total 32 pts.



DISEASE FREE SURVIVAL FROM SURGERY

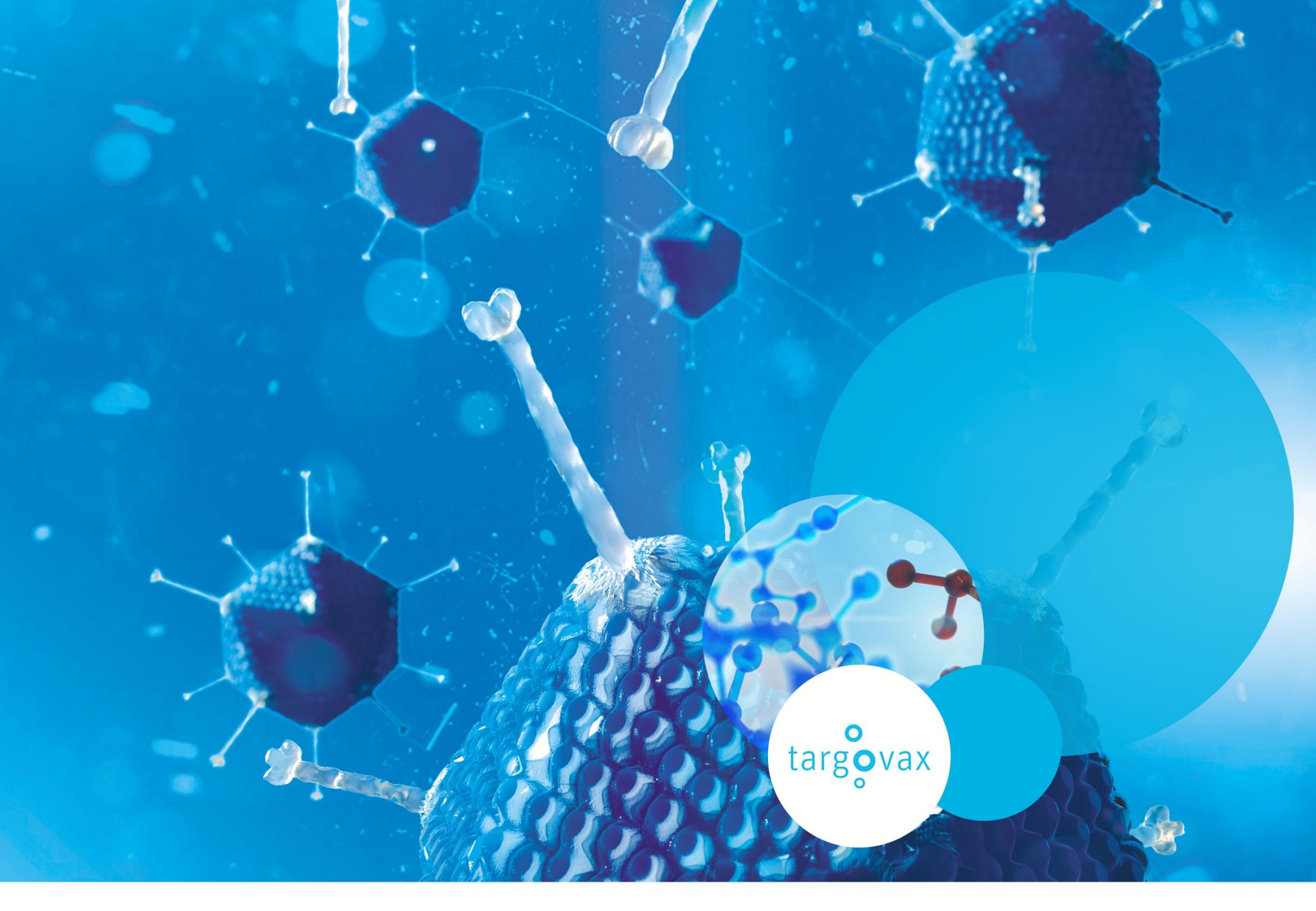


PIPELINE OVERVIEW AND MILESTONES

Platform	Product candidate	Preclinical	Phase I	Phase II	Phase III	Next expected event
ONCOS oncolytic adenovirus	ONCOS-102	Mesothelioma Comb. w/ pemetrexed/cisplatin				1H 2020 Randomized ORR data
		Melanoma Comb. w/KEYTRUDA®				1H 2019 ORR and immune data first cohort
		Peritoneal metastasis ¹ Collab: Ludwig, CRI & AZ Comb. w/IMFINZI®				Update by collaborator, expected 2019
		Prostate Collab: Sotio Comb. w/DCVAC				Update by collaborator, expected 2019
	Next-gen ONCOS	3 viruses undisclosed				2H 2019 Target disclosure and <i>in vivo</i> data
TG neo-antigen cancer vaccine	TG01	Pancreatic cancer Comb. w/gemcitabine				TBD
	TG02	Colorectal cancer Proof-of-mechanism Comb. w/KEYTRUDA®				1H 2019 Immune activation and mechanistic data (mono)
	TG02	CPI synergy TG + PD-1				1H 2019 TG02 + <i>in vivo</i> data




¹ Patients with advanced peritoneal disease, who have failed prior standard chemotherapy and have histologically confirmed platinum-resistant or refractory epithelial ovarian or colorectal cancer

■ Ongoing collaborator sponsored trials



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Large deals in the last year show strong
INDUSTRY INTEREST IN ONCOLYTIC VIRUSES

Acquirer	Target	Type of deal	Deal value
 Boehringer Ingelheim		M&A Phase I/II oncolytic virus	USD 250m up-front cash
 MERCK	 <small>Developers of Oncolytic Immunotherapies</small>	M&A Phase I/II oncolytic virus	USD 400m up-front cash
 <small>PHARMACEUTICAL COMPANIES OF Johnson & Johnson</small>		M&A Pre-clinical oncolytic virus	USD 140m up-front cash Up to USD 1b total value
 Bristol-Myers Squibb		BD partnership Pre-clinical oncolytic virus	USD 15m milestone payment Up to USD 1b total value