IMUGENE

Developing Cancer Immunotherapies

ASX:IMU

Extraordinary General Meeting

Wednesday, 20 August 2025

Release authorised by the Managing Director and Chief Executive Officer, Imugene Limited.

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Imugene is a clinical stage cancer company developing three drug products in CAR T cell therapy and oncolytic viruses

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Allo CAR T Cell Therapy
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azer-cel CD19 allo CAR T
Phase 1b

- Off-the-shelf drug, aka **allogeneic CAR T targeting blood cancers**
- 79% best overall response with best durability at > 16 months and on going
- Anticipate to initiate Pivotal Phase 2/3 registrational trial in CY2026 (subject to data and regulatory approvals) – FDA meeting expected in late 2025
- FDA IND

onCARlytics
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onCARlytics CD19 expressing virus
Phase 1 OASIS Trial

- Novel virus which acts as a CD19 target in solid cancers
- Makes solid cancers visible to CD19 drugs
- Currently in Phase 1 in solid cancers in combination with Blinatumomab (Approved CD19 drug in blood cancers)
- FDA IND

CF33 Oncolytic Virus
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CF33 Oncolytic Virus
Phase 1 VAXINIA MAST Trial

- Novel cancer killing virus
- Targeting a range of late-stage solid cancers
- Early results in bile tract cancer and durable stability of disease
- FDA IND

- Manufacturing: Out-Licensed azer-cel Phase 1b product to Kincell along with CAR T engineers to off-set cost and headcount
- Cost Cutting: Headcount reductions, prioritizing programs for value impacting studies are on-going
- Business and Development: Attendance at Bio Singapore and Hong Kong, Meeting at the Mesa as Partnering/Out-licensing Opportunity is ongoing
- Potential Science Conferences: Targeting AACR, ASCO, LUGANO, SNO, ASH, SITC etc.

Azer-cel 79% Overall Response Rate
N=14

Allo CAR T Cell Therapy
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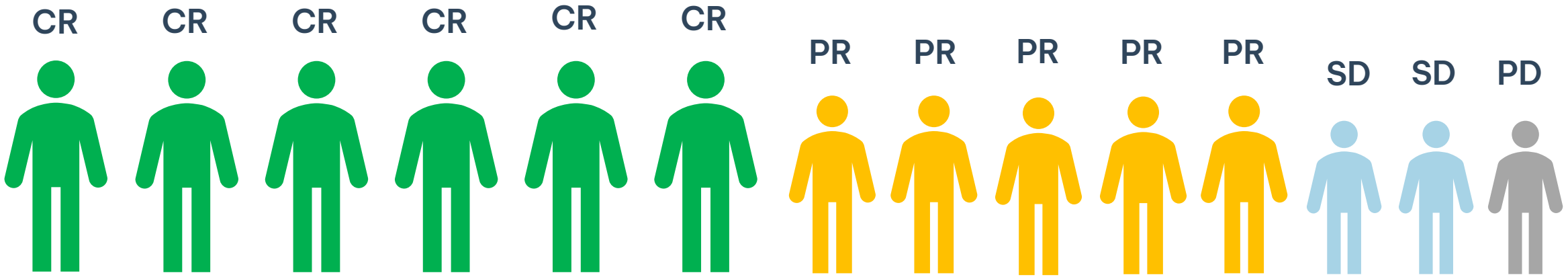
Best Response



*Allo transplant at Day 148

Overall Response Rate (ORR): the proportion of patients whose cancer shrinks or disappears after treatment – a measure of how well a treatment is working, specifically in clinical trials

Complete Response (CR): all measurable or visible signs of cancer are no longer detectable after treatment

Partial Response (PR): Significant reduction in tumour size (typically at least 50%) or disease burden, but not complete disappearance of the disease

Durability of Response (DoR): a measure of how long a treatment effect lasts, meaning the cancer remains controlled for a significant period

Expected Key Catalysts

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Rich News flow 12 months ahead across Imugene's programs

Key Achievements

azer-cel

January 2025: First Aus site opened for DLBCL clinical trial and first DLBCL patient dosed in AUS

February 2025: Phase 1b data update, 57% Overall Response/ Complete Response Rate Achieved

March 2025: Fast Track Designation granted for treatment of DLBCL

July 2025: Release of additional Phase 1b azer-cel data

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April 2025: FPI IV Combo Cohort 1

VAXINIA

September 2024: Orphan Drug Designation received

Key
FPI: First Patient In
Combo: Combination Therapy
DLBCL: Diffuse Large B-Cell Lymphoma (Blood Cancer)
IT: Intratumoural, **IV**: Intravenous

Expected Upcoming Milestones

azer-cel

3Q CY25
- Release of additional Phase 1b azer-cel data
- Recruitment of CAR-T naïve niche lymphoma patients in Phase 1b
- Potential for FDA Fast Track and/or Orphan Drug Designation for additional niche blood cancer

4Q CY25
- Planned FDA Meeting for registrational strategy/pivotal study, FDA support for niche indications
- Release of additional Phase 1b azer-cel data (DLBCL patients and ongoing durability data)

CY26
- Commencement of manufacturing and supply for registration/pivotal study
- Phase 1b data on CAR T naïve lymphoma patients
- Potential for RMAT/Breakthrough designation for accelerated approvals
- Initiate Activity for Registrational/Pivotal study

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2025-2026: IV Combo Recommended Phase 2 Dose (RP2D)

VAXINIA

2H CY25: Study update

Other

Partnering/Out-licensing Opportunity
Potential Conference Presentations: at AACR, ASCO, LUGANO, SNO, ASH, SITC

Projected timelines for trial initiation, site activation, and clinical milestones are subject to external factors beyond the Company's control, including regulatory approvals, site requirements, patient recruitment, dose escalation constraints, and expected and unexpected dose-limiting toxicities

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