



MEDIVIR Q1 2022 WEBCAST

APRIL 28, 2022

MEDIVIR

Today's presenters



CEO

- Jens Lindberg
- Joined Medivir 2022
- > 25 years pharma experience with focus in Oncology.
- Has led global product strategy development for late-stage compounds as well as product launch for multiple compounds.
- Experience includes interim CEO role for Sedana Medical AB.
- Medivir ownership; 25.000 shares & 240.000 warrants



CFO

- Magnus Christensen
- Joined Medivir 2019
- > 20 years experience in finance, including CFO at O'Learys Trademark AB.
- Previous interim CEO at Medivir
- Experience of working in listed-, private equity- and private companies.
- Medivir ownership; 15.000 shares & 172.500 warrants



CSO

- Fredrik Öberg
- Joined Medivir 2011
- > 25 years experience in cancer research from industry and academia
- > 50 scientific articles and holds several patents.
- Adjunct professor at Medical Faculty of Uppsala University
- Medivir ownership; 69.172 shares & 159.010 warrants

Important notice

You must read the following before continuing. The following applies to this document and the information provided in this presentation by Medivir AB (publ) (the "Company") or any person on behalf of the Company and any other material distributed or statements made in connection with such presentation (the "Information"), and you are therefore advised to carefully read the statements below before reading, accessing or making any other use of the Information. In accessing the Information, you agree to be bound by the following terms and conditions.

The Information does not constitute or form part of, and should not be construed as, an offer of invitation to subscribe for, underwrite or otherwise acquire, any securities of the Company or a successor entity or any existing or future subsidiary or affiliate of the Company, nor should it or any part of it form the basis of, or be relied on in connection with, any contract to purchase or subscribe for any securities of the Company or any of such subsidiaries or affiliates nor shall it or any part of it form the basis of or be relied on in connection with any contract or commitment whatsoever. Specifically, this presentation does not constitute a "prospectus" within the meaning of the U.S. Securities Act of 1933, as amended.

The Information may not be reproduced, redistributed, published or passed on to any other person, directly or indirectly, in whole or in part, for any purpose. The Information is not directed to, or intended for distribution to or use by, any person or entity that is a citizen or resident of, or located in, any locality, state, country or other jurisdiction where such distribution or use would be contrary to law or regulation or which would require any registration or licensing within such jurisdiction. The Information is not for publication, release or distribution in the United States, Australia, Canada or Japan, or any other jurisdiction in which the distribution or release would be unlawful.

All of the Information herein has been prepared by the Company solely for use in this presentation. The Information contained in this presentation has not been independently verified. No representation, warranty or undertaking, express or implied, is made as to, and no reliance should be placed on, the fairness, accuracy, completeness or correctness of the Information or the opinions contained herein. The Information contained in this presentation should be considered in the context of the circumstances prevailing at that time and will not be updated to reflect material developments which may occur after the date of the presentation. The Company may alter, modify or otherwise change in any manner the content of this presentation, without obligation to notify any person of such revision or changes.

This presentation may contain certain forward-looking statements and forecasts which relate to events and depend on circumstances that will occur in the future and which, by their nature, will have an impact on the Company's operations, financial position and earnings. The terms "anticipates", "assumes", "believes", "can", "could", "estimates", "expects", "forecasts", "intends", "may", "might", "plans", "should", "projects", "will", "would" or, in each case, their negative, or other variations or comparable terminology are used to identify forward-looking statements. There are a number of factors that could cause actual results and developments to differ materially from those expressed or implied in a forward-looking statement or affect the extent to which a particular projection is realized. Factors that could cause these differences include, but are not limited to, implementation of the Company's strategy and its ability to further grow, risks associated with the development and/or approval of the Company's products candidates, ongoing clinical trials and expected trial results, the ability to commercialize existing and any future products, technology changes and new products in the Company's potential market and industry, the ability to develop new products, the impact of competition, changes in general economy and industry conditions and legislative, regulatory and political factors. While the Company always intends to express its best judgment when making statements about what it believes will occur in the future, and although the Company bases these statements on assumptions that it believes to be reasonable when made, these forward-looking statements are not a guarantee of its performance, and you should not place undue reliance on such statements. Forward-looking statements are subject to many risks, uncertainties and other variable circumstances. Many of these risks are outside of the Company's control and could cause its actual results to differ materially from those it thought would occur. The forward-looking statements included in this presentation are made only as of the date hereof. The Company does not undertake, and specifically decline, any obligation to update any such statements or to publicly announce the results of any revisions to any of such statements to reflect future events or developments.

Highlights during last quarter

Highlights during last quarter

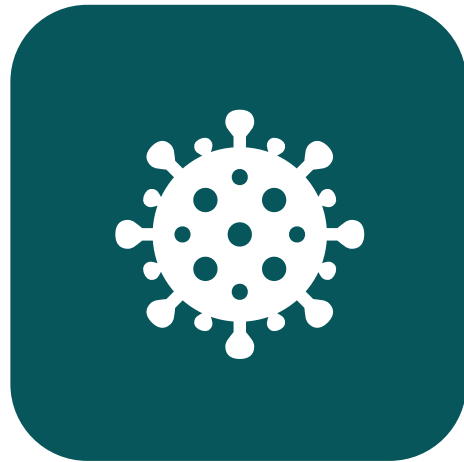
Continued progress for fostrox in liver cancer

- Biomarker data for fostrox monotherapy presented at EASL, supporting proof-of-concept.
- Initiation of clinical trial centers in Spain and South Korea. ~45% of planned centers in South Korea, imperative for the future development of fostrox in Asia.

Overall portfolio development

- The first IGM-8444 + birinapant combination dose escalation cohort cleared with no DLTs and no clinically significant liver toxicity observed to date.
- Birinapant + IGM-8444 pre-clinical data at AACR 2022 confirms strong synergistic tumor cytotoxicity.
- Subgroup analysis of phase II study with MIV-711 for osteoarthritis published, showing significantly reduced osteoarthritis-related pain.

A unique, first-in-class, lead asset in liver cancer (HCC) & successful partnering strategy













Focused strategy with clear priority for first-in-class, orphan drug in liver cancer



Active partnering strategy for additional value creation across product portfolio

Pipeline overview – in-house development & assets for partnering

PROJECT	PARTNER	DISEASE AREA	PRE-CLINICAL	PH 1	PH 2	PH 3	ON MARKET	FINANCIALS	POTENTIAL NEXT EVENT(S)
IN-HOUSE PROGRAM									
Fostroxacitabine bralpamide	In-house development	HCC (mono) HCC (combo)						100% Medivir	<ul style="list-style-type: none"> ▪ Selection of dose(s) ▪ Dose expansion
PARTNERING PROGRAMS									
Xerclear	GSK, SYB	Herpes						Royalties	<ul style="list-style-type: none"> ▪ Registration in China
Remetinostat	TBD	CTCL, BCC, SCC						TBD	<ul style="list-style-type: none"> ▪ Partnering agreement
MIV-711	TBD	Osteoarthritis						TBD	<ul style="list-style-type: none"> ▪ Partnering agreement
Birinapant	IGM Biosciences	Solid tumors						Milestones (up to \$350m) & royalties	<ul style="list-style-type: none"> ▪ Selection of dose ▪ Expansion cohort(s)
USP-1	Tango Therapeutics	Cancer						Milestones & royalties	<ul style="list-style-type: none"> ▪ CD Selection ▪ US IND
USP-7	Ubiquigent Limited	Cancer						Revenue share	<ul style="list-style-type: none"> ▪ Partnering agreement for Ubiquigent

 Projects developed by Medivir
 Projects developed by external partner

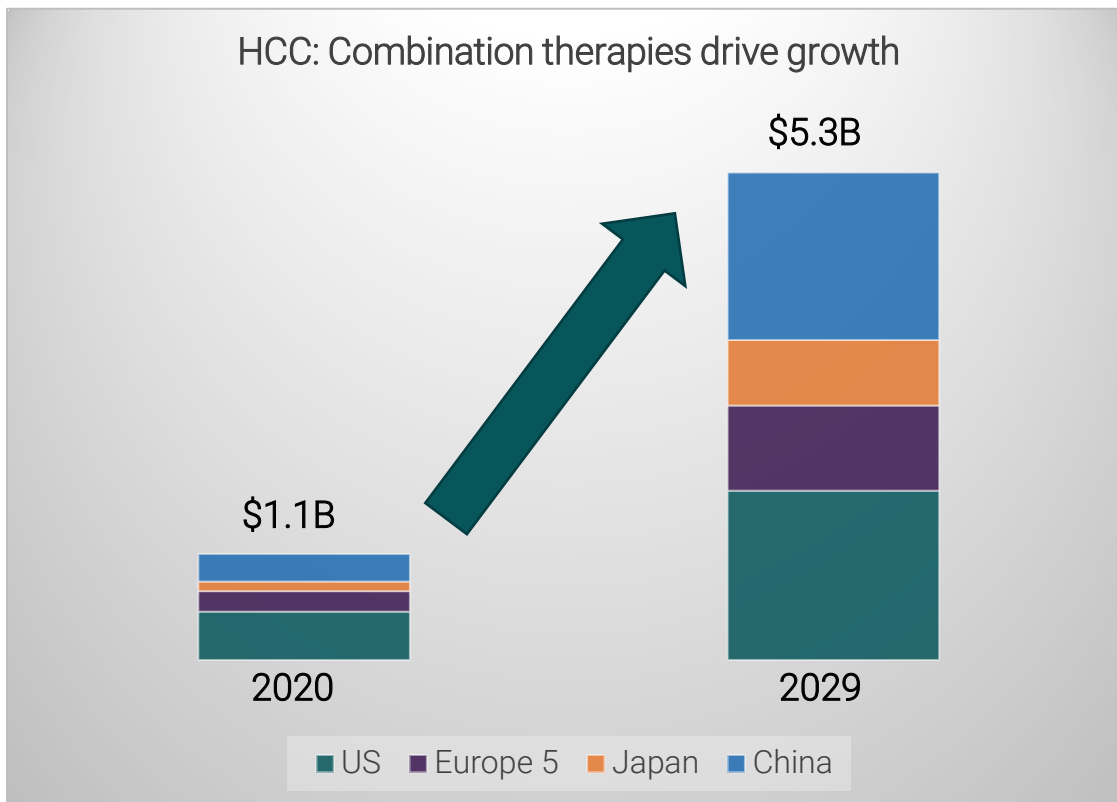
Fostroxacitabine bralpamide (fostrox)



HCC is a significantly growing market with large unmet need

HCC market estimated to grow almost five-fold until 2029

Despite recent advancements, unmet need is still high



- Liver cancer incidence and mortality are increasing with liver cancer the third leading cause of cancer death worldwide 3%^{1,2}
- Despite recent advances in treatment of HCC, still only ~1/3 of patients responding to systemic treatment
- The HCC market growth is driven by combination therapies and patients treated in earlier disease stages

Source: GlobalData 2021

¹(<https://seer.cancer.gov/statfacts/html/livibd.htm>)

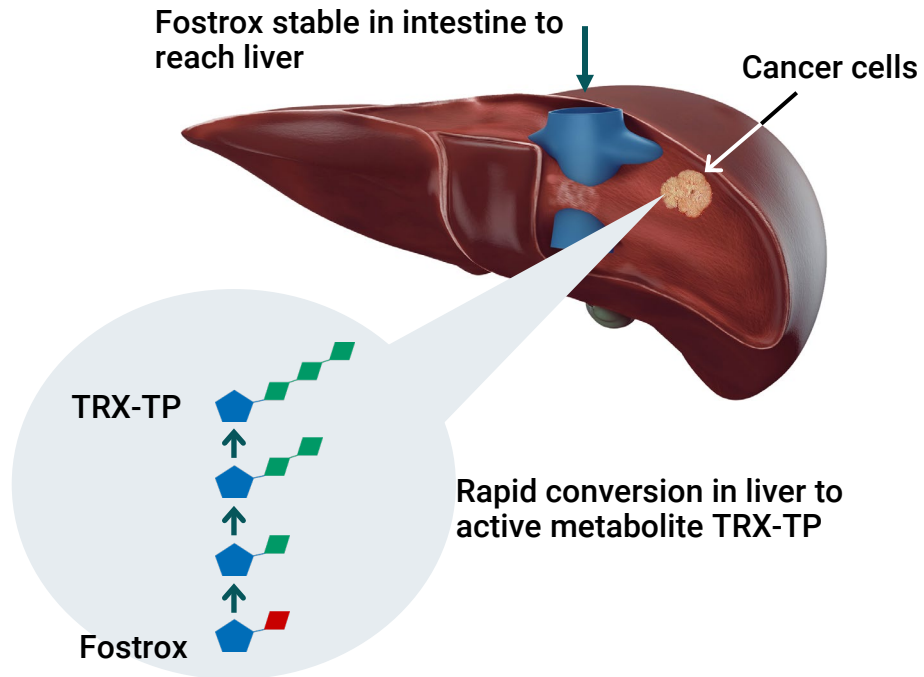
² Sayiner M, et al. Digestive Diseases and Sciences. 2019; 64: 910-917



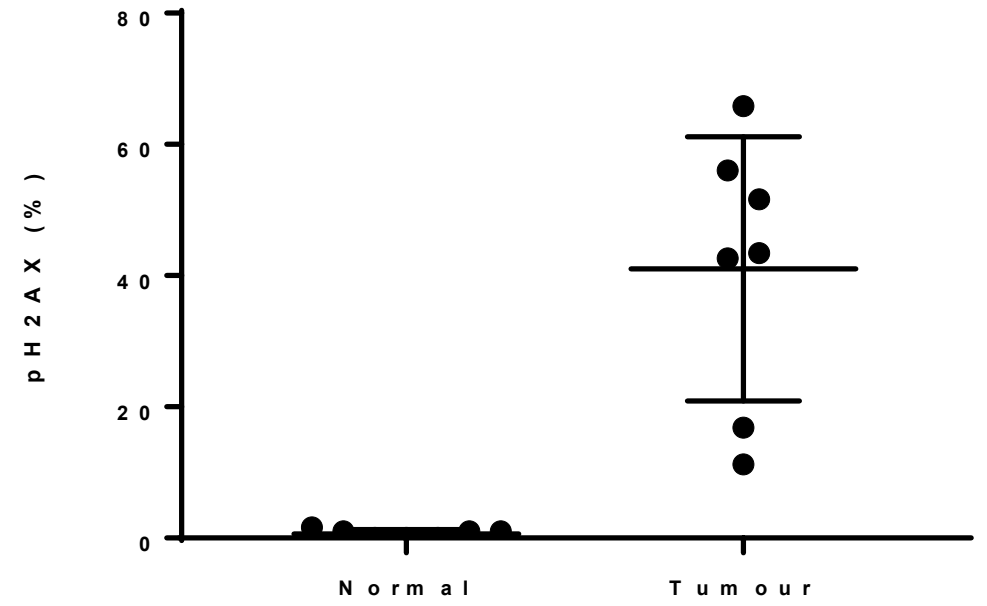
Fostrox – first-in-class, orphan drug inducing DNA damage & cell death selectively in liver tumor tissue

Differentiated mechanism of action (MoA) designed to be liver targeted & minimise systemic exposure

DNA-damage & cell death observed in tumor tissue but not in normal liver tissue*



DNA-damage in normal liver vs tumour

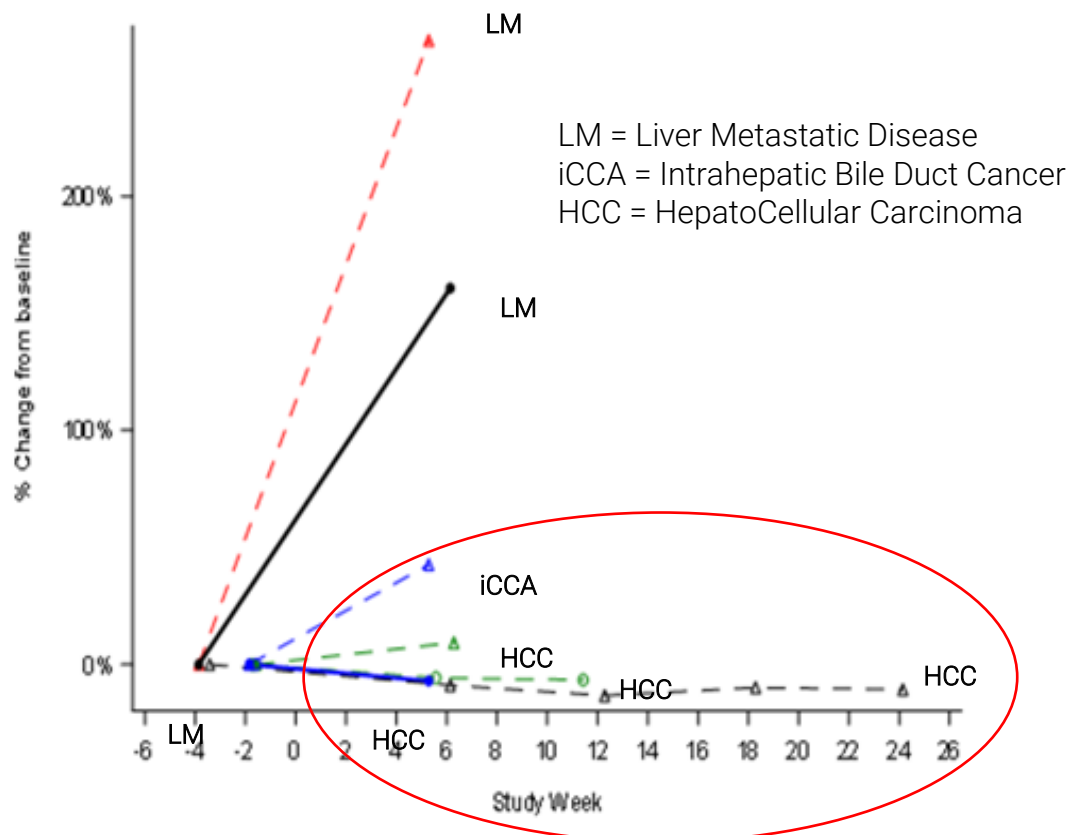


*PD marker gH2AX (% positive cells/brown stain) shows fostrox induced DNA-damage in tumor cells and not normal liver tissue



Phase 1b monotherapy results presented at ESMO supports continued development of fostrox

Encouraging changes in liver target lesions*



**Out of 10 enrolled patients, one did not complete safety follow up and one lacked independent radiologist assessment

Safety profile supports moving forward with development

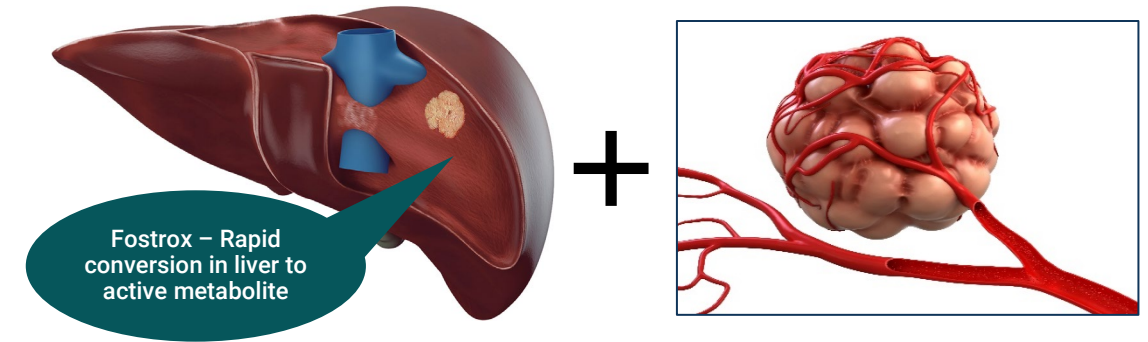
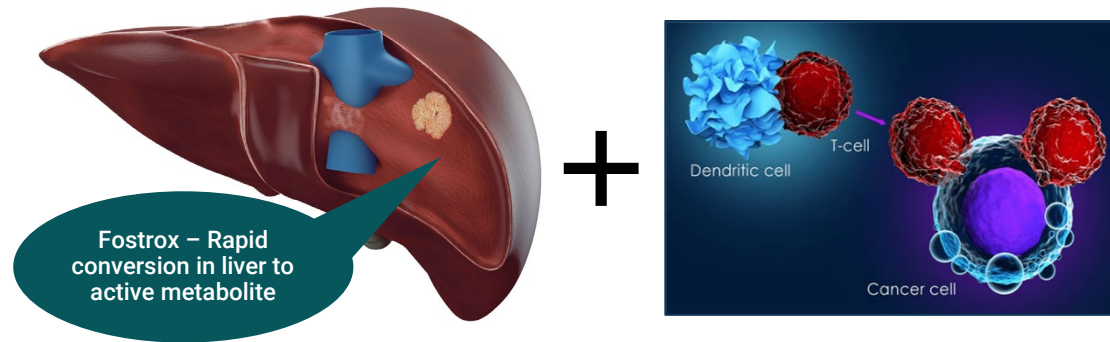
- Decreases in blood cell counts were the most common side effects, these resolved quickly
- In phase 1b four patients out of seven with primary liver cancer (e.g. HCC, iCCA) had stable disease as best overall response; one stayed on treatment for eight months
- Liver biopsy data has demonstrated delivery of fostrox to the liver, and a selective effect of fostrox on cancer cells vs normal liver tissue, across different types of cancer



Fostrox – A unique, differentiated MoA in HCC inhibiting DNA replication; strong potential for combinations

Fostrox + stimulation of immune system (PD-1)

Fostrox + blocking blood supply to tumor (TKI)



“Fostrox induces DNA damage and tumor cell death, potentially leading to **increased tumor antigen presentation and increased immune response**”

“TKI’s induce lack of oxygen in tumors leading to increased PGK1* expression and most importantly **higher levels of fostrox active metabolite**”

*Phosphoglycerate kinase 1 – hypoxia inducible gene



Fostrox – Innovative combination of proven technology and MoA to improve probability of success



Induction of DNA-damage & cell death well established in cancer



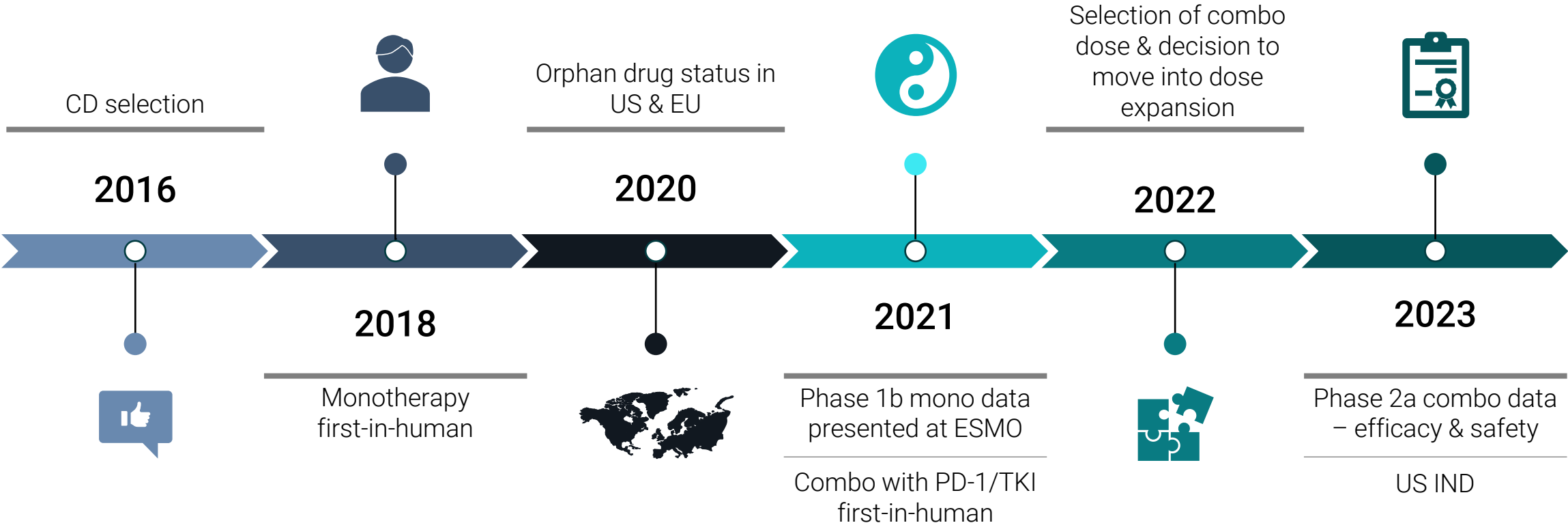
Proven, liver targeted pro-drug mechanism as in anti-HCV (Sovaldi)



Pro-drug approach bypasses resistance mechanisms for increased efficacy



Fostrox – continued momentum moving into 22/23





Ongoing phase 1b/2a combination study in 2nd line HCC exploring combinations with both anti-PD-1 & TKI

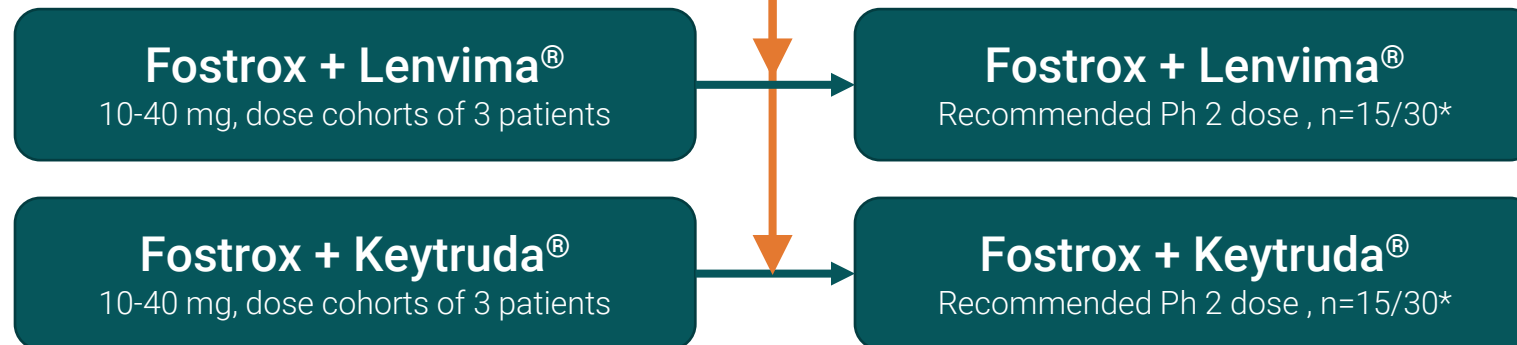
Dose escalation – phase 1b

Dose expansion – phase 2a

Study Details & Objectives

Decision point

- Finalise phase 2 dose for each combination
- Which combination(s) to take into phase 2, one or both



Investigator sites split 60/40 EU & Asia

Patient Population:

- 2L advanced inoperable HCC, Child-Pugh A
- progressed on or intolerant of 1L SOC therapy for HCC, including atezo/bev patients

Primary Objective:

- assess safety and tolerability as combination therapy
- determine recommended phase 2 doses

Secondary Objective:

- to evaluate tumor response rate based on RECIST v1.1

*15 patients per arm if both arms are taken forward or potentially 30 if one combination is chosen

Fostrox – A unique, first-in-class potential treatment for primary liver cancer



Significant unmet need & commercial potential; fostrox complementing, not replacing, existing therapies



Unique MoA that selectively targets cancer in the liver and bypasses resistance mechanisms

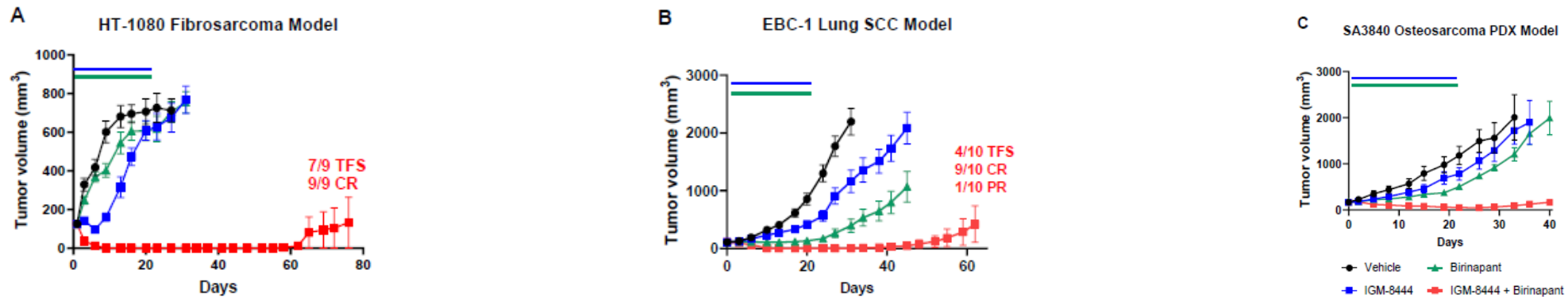


Induction of DNA-damage & cell death well established in cancer, strong potential for attractive combinations

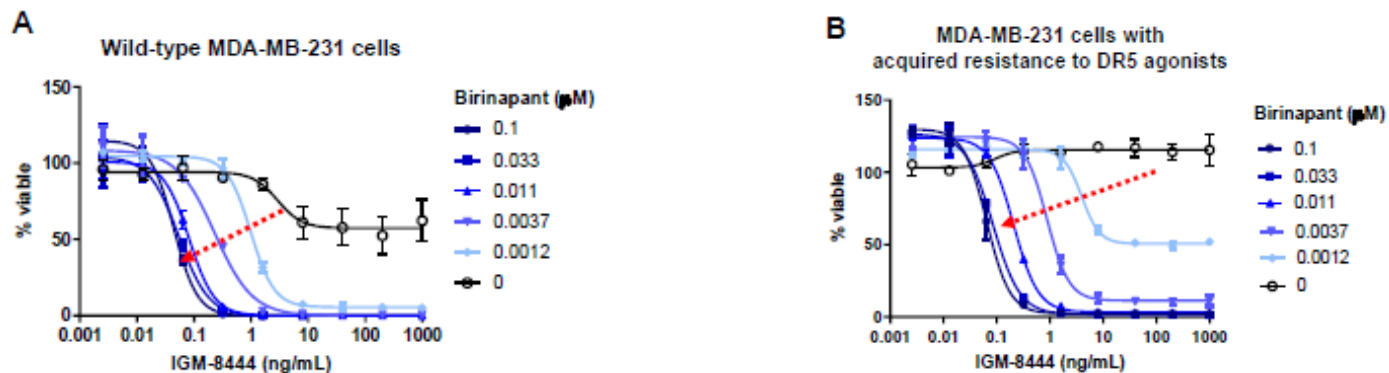
Other Program Highlights

Birinapant + IGM-8444 pre-clinical data at AACR 2022 confirms strong synergistic tumor cytotoxicity¹

Synergy demonstrated across multiple solid tumor indications



IGM-8444 + Birinapant Induced Synergistic Killing in Cell Line with Acquired Resistance to DR5 Agonists



- The first of four planned birinapant combination dose escalation cohorts cleared with no DLTs and no clinically significant liver toxicity observed to date.
- IGM is currently enrolling patients in the second dose escalation cohort.

¹Wang, Beatrice T. et al, Poster no. 1068, 2022 AACR meeting, New Orleans, April 8-13

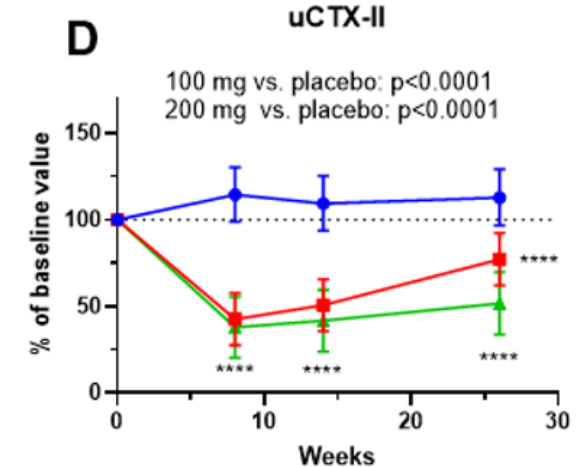
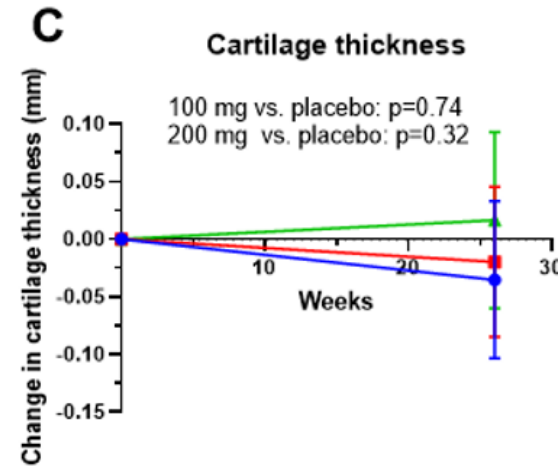
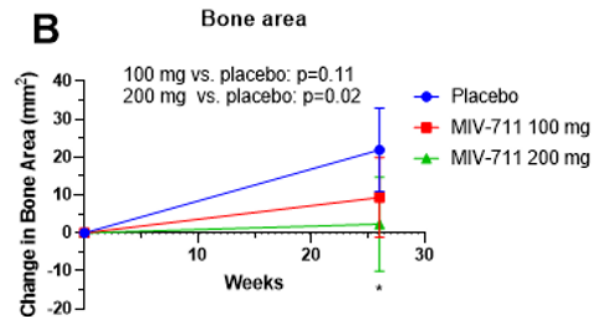
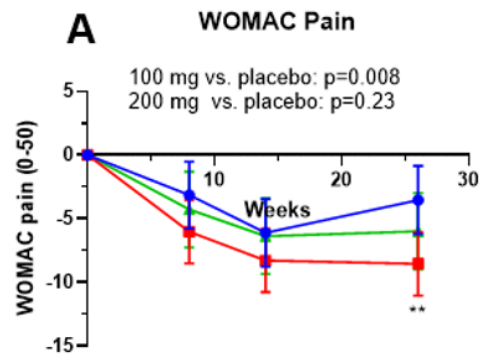
MIV-711 – In a subgroup with predominantly unilateral knee pain, significant reduction in OA pain was found, with concurrent beneficial structural effects

Significant reduction in OA pain for 100 mg, numerical trend for 200 mg

Significant difference in bone area for 200 mg, numerical trend for 100 mg

No significant difference in cartilage thickness, only numerical trend

Significant reduction in cartilage degradation biomarker in both groups



The data strengthens the hypothesis for positive effects on both pain & joint structure and provides guidance for future clinical trials.

¹Bihlet et al, *Clinical and Experimental Rheumatology*, published online 28 February 2022

²Yazici et al *Osteoarthritis and Cartilage* 2021

Financial highlights Q1

Financial summary Q1, 2022

Consolidated Income Statement, summary

(SEK m)

	Q1		Full year
	2022	2021	2021
Net turnover	0.5	9.9	25.5
Other operating income	0.4	7.5	10.2
Total income	0.9	17.4	35.7
Other external expenses	-25.8	-18.8	-73.3
Personnel costs	-6.2	-5.8	-21.4
Depreciations and write-downs	-0.6	-0.7	-2.6
Other operating expenses	-0.3	-	-0.6
Operating profit/loss	-32.0	-7.9	-62.1
Net financial items	-0.7	-0.1	-0.5
Profit/loss after financial items	-32.7	-8.0	-62.6
Tax	-	-0.1	-0.5
Net profit/loss for the period	-32.7	-8.1	-63.1

- Net turnover for Q1 2022 was SEK 0.5 million
- Operating loss for the Q1 2022 was SEK -32 million
- Cash flow from operating activities for Q1 2022 was SEK -40 million
- Cash balance end of Q1 2022 was SEK 181 million

Significant momentum across portfolio delivering on key strategic priorities; more to come

Recent progress across product portfolio

Potential future key events

Accelerating fostrox

- Phase 1b monotherapy data presented at ESMO & additional proof-of-concept data at EASL
- Decision to continue development as combination therapy & phase 1b/2a combo study initiated with Keytruda® or Lenvima®
- Initiation of clinical trial centers in Spain and South Korea with ~45% of planned centers in South Korea

- First safety data from phase 1b combo study in Caucasian & Asian patients
- Initiation of phase 2a dose expansion study with one or two combination arms
- First efficacy data from combination arm(s)
- Initial steps to prepare for IND filing
- Asia development plan

Maximise value of assets for partnering & out-licensing

- The first IGM-8444 + birinapant combination dose escalation cohort cleared with no DLTs.
- Re-negotiated deal for remetinostat improving Business Development potential
- Subgroup analysis of phase II study with MIV-711 showing significantly reduced osteoarthritis-related pain.

- Birinapant + IGM8444 first data & decision which tumors to continue development in
- CD selection and IND-filing for USP-1 by Tango
- Value added partnering opportunities for remaining assets

Q/A

Upcoming activities

- ABG Sundal Collier Life Science Day, May 18
- Pareto Securities' Healthcare Conference, September 7-8