



Immunic
THERAPEUTICS

Immunic Therapeutics

First Quarter 2024 Financial Results and Corporate Update

NASDAQ: IMUX | May 8, 2024

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→ Forward-looking statements included in this presentation are based on information available to Immunic as of the date of this presentation. Immunic does not undertake any obligation to update such forward-looking statements except as required by applicable law.



Agenda

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01

First Quarter 2024 and Subsequent Highlights

January: Three-Tranche Private Placement of up to \$240M, Cash Runway Extended Into Q3/2025 Based on Initial \$80M Tranche

Private Investment in Public Equity (“PIPE”) financing

- **First tranche** was an upfront payment of **\$80 million** at \$1.43 per share
- **Second tranche** is a conditional mandatory purchase of an **additional \$80 million** at \$1.716 per share
 - Representing 120% of the first tranche purchase price
 - Conditioned on the announcement of phase 2b top-line data for the CALLIPER trial of vidofludimus calcium in PMS, volume weighted average share price levels, and minimum trading volumes
- **Third tranche** provides for the issuance of **\$80 million** of shares at the same price per share as the second tranche
 - To occur no later than three years after the second tranche
 - Permits investors to fund their purchase obligations on a “cashless” or net settlement basis
 - Conditioned on the same volume weighted average share price levels and minimum trading volumes as the second tranche
- Any of the conditions in the second or third tranches can be waived by holders of a majority of the outstanding securities, including the lead investor

Total Gross Proceeds

- **Up to \$240 million**

Participating Investors

- Led by BVF Partners
- Includes participation from **new and existing investors**, including Avidity Partners, Janus Henderson Investors, Soleus Capital, RTW Investments and Adage Capital Partners

Closing Date

- January 8, 2024 for initial \$80 million tranche

Lead Placement Agent / Placement Agent / Capital Markets Advisors

- Leerink Partners / Ladenburg Thalmann / Piper Sandler, B. Riley Securities, Brookline Capital Markets

February: Presented Data From Phase 2 CALLIPER and CALVID-1 Trials of Vidofludimus Calcium at the ACTRIMS Forum 2024 (February 29-March 2 in West Palm Beach, FL)

CALLIPER Interim Analysis: Clear Separation in NfL Levels Across All PMS Patients

- Oral Presentation: Robert J. Fox, MD, Staff Neurologist, Mellen Center for Multiple Sclerosis, Vice-Chair for Research, Neurological Institute, Cleveland Clinic, Cleveland, Ohio
- Title: Impact of Vidofludimus Calcium on Serum Neurofilament in Progressive MS: Data from the CALLIPER Interim Analysis

Impact of Vidofludimus Calcium on Serum Neurofilament in Progressive MS: Data from the CALLIPER Interim Analysis

The Ninth Annual Americas Committee for Treatment and Research in Multiple Sclerosis Forum 2024

Background
CALLIPER is a phase 2, multicenter, randomized, double-blind, placebo-controlled study evaluating the efficacy and safety of vidofludimus calcium (VID) in patients with progressive multiple sclerosis (PMS). The CALLIPER study design is a 24-week, randomized, double-blind, placebo-controlled study with a 24-week extension phase. The primary endpoint is the change in serum neurofilament light chain (NfL) levels from baseline to week 24. Secondary endpoints include the proportion of patients with a decrease in NfL levels, the proportion of patients with a decrease in NfL levels of at least 20%, and the proportion of patients with a decrease in NfL levels of at least 50%.

Objective
The objective of this interim analysis is to evaluate the impact of vidofludimus calcium on serum NfL levels in patients with PMS.

Methods
The interim analysis included all patients who had NfL levels measured at baseline and at least one subsequent time point (week 4, 8, 12, 16, 20, or 24). The primary endpoint is the change in serum NfL levels from baseline to week 24. Secondary endpoints include the proportion of patients with a decrease in NfL levels, the proportion of patients with a decrease in NfL levels of at least 20%, and the proportion of patients with a decrease in NfL levels of at least 50%.

Results
100 patients were included in the interim analysis, of which 50% had aPMS and 50% PPMS (Figure 1). Mean age was 48.7 and mean disease duration was 14.8 years in the full study population. A comparison of baseline serum NfL for the overall study population was performed by the VIDCA group by (22.4% p<0.01). A reduction was seen across all subgroups: 18.8% in aPMS, 25.7% in aPMS and 43.7% in aPMS (Figure 2).

Conclusion
The interim analysis of the CALLIPER study shows that vidofludimus calcium significantly reduces serum NfL levels in patients with PMS. This reduction was observed across all subgroups, including aPMS and PPMS. The reduction in NfL levels was observed at all time points, suggesting a sustained effect of vidofludimus calcium on NfL levels in patients with PMS.

CALVID-1: Potential Contribution to the Reduction of Fatigue in MS Patients

- Oral Presentation: Dr. Alexandra Herrmann, Manager Translational Pharmacology, Immunic
- Title: May Vidofludimus Calcium Potentially be Used to Reduce Fatigue in Multiple Sclerosis by Blocking EBV Reactivation?

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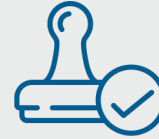
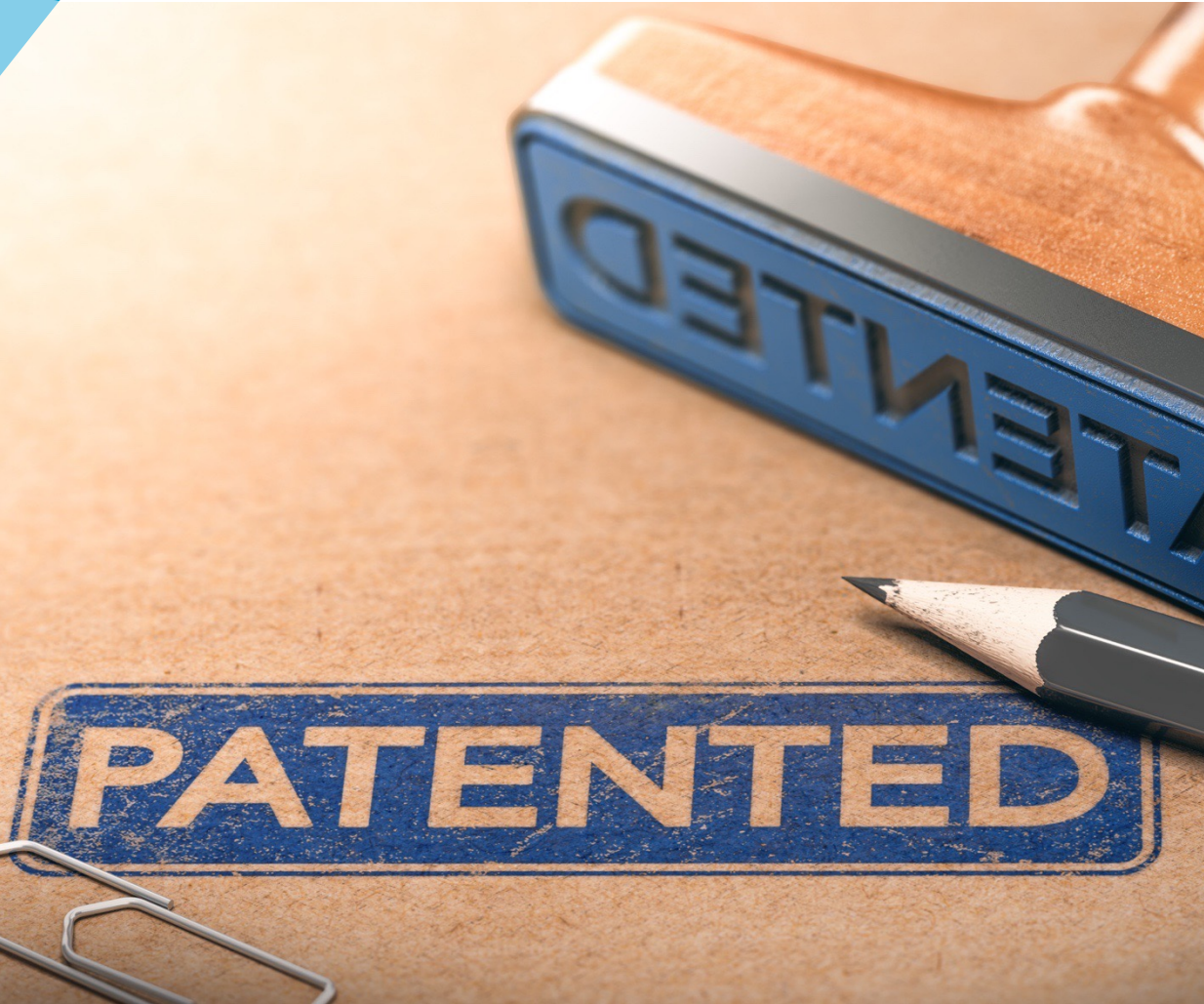
Background
Fatigue represents the most common symptom in both multiple sclerosis (MS) and post-COVID syndrome (PCS). However, the underlying pathogenesis of the clinical manifestation remains unclear. In case of PCS, reactivation of latent Epstein-Barr virus (EBV) is a potential trigger. EBV reactivation is also known to induce along fatigue and may be a potential driver for fatigue observed in MS, PCS, and MS. We aim to study the effect of vidofludimus calcium (VID) on EBV reactivation in MS patients. We hypothesize that EBV reactivation in MS patients is associated with fatigue and that VID may be used to reduce fatigue in MS patients by blocking EBV reactivation.

Objective
Due to its antiviral and anti-inflammatory potential, we want to study the effect of VID on EBV reactivation in MS patients. We hypothesize that EBV reactivation in MS patients is associated with fatigue and that VID may be used to reduce fatigue in MS patients by blocking EBV reactivation.

Methods
In the phase 2 CALVID-1 trial, patients aged 18 years or older who were diagnosed with MS were randomized to receive placebo or VID. The primary endpoint is the proportion of patients with a decrease in fatigue scores from baseline to week 24. Secondary endpoints include the proportion of patients with a decrease in fatigue scores of at least 20% and the proportion of patients with a decrease in fatigue scores of at least 50%.

Conclusion
The CALVID-1 trial is currently ongoing and will provide valuable insights into the potential of VID to reduce fatigue in MS patients by blocking EBV reactivation. The results of this trial will be presented at the ACTRIMS Forum 2024.

March: Received Fourth U.S. Patent Directed to Use of Vidofludimus Calcium in MS



Notice of Allowance from the USPTO for patent application 16/981,122, covering the composition-of-matter of a specific polymorph of vidofludimus calcium and a related method of production of the material



Claims are expected to provide protection into 2039 internationally, unless extended further; patent previously granted in Australia, Canada, Indonesia, Japan and Mexico



Multi-layered intellectual property strategy for vidofludimus calcium provides protection into 2041 in the US



April: Hosted In-Person Multiple Sclerosis R&D Day in San Francisco



Could Vidofludimus Calcium be the First Neuroprotective Treatment Option for Multiple Sclerosis?

Immunic speakers:

- Daniel Vitt, PhD, CEO & President
- Hella Kohlhof, PhD, CSO
- Andreas Muehler, MD, CMO

Attending expert:

- Zuoming Sun, Ph.D., Professor, Department of Molecular Imaging & Therapy City of Hope, Duarte, CA

Recording: <https://www.youtube.com/watch?v=pmrwoTVxEZo>



02

Financial and Operating Results

Condensed Consolidated Statements of Operations

(In thousands, except share and per share amounts, unaudited)

	Three Months Ended March 31,	
	2024	2023
Operating expenses:		
Research and development	\$ 18,736	\$ 22,963
General and administrative	5,145	4,288
Total operating expenses	23,881	27,251
Loss from operations	(23,881)	(27,251)
Other income (expense):		
Interest income	1,187	800
Change in fair value of the tranche rights	(4,796)	—
Other income (expense), net	(2,094)	1,179
Total other income (expense)	(5,703)	1,979
Net loss	\$ (29,584)	\$ (25,272)
Net loss per share, basic and diluted	\$ (0.30)	\$ (0.58)
Weighted-average common shares outstanding, basic and diluted	97,299,955	43,664,783

→ **\$97.3 million in cash and cash equivalents as of March 31, 2024 expected to fund operations into Q3/2025**



03

Clinical Development Programs

Several Clinical Value Inflection Points Ahead



IMU-838 in PMS

- Top-line data from phase 2 CALLIPER trial expected in April 2025

IMU-838 in RMS

- Interim, non-binding futility analysis of phase 3 ENSURE program expected in late 2024
- Readout of first phase 3 ENSURE trial anticipated in Q2/2026, second in H2/2026

IMU-856

- Phase 2 clinical trial in preparation
- Potentially applicable to a multitude of gastrointestinal disorders



04

Q&A Session



05

Summary and Highlights

Advanced Clinical Pipeline

Well Differentiated Programs in Various Phases of Clinical Development

Program	Preclinical	Phase 1	Phase 2	Phase 3
Vidofludimus Calcium (IMU-838)	Relapsing Multiple Sclerosis (RMS) – ENSURE Trials			
	Progressive Multiple Sclerosis (PMS) – CALLIPER Trial			
	Ulcerative Colitis (UC) – CALDOSE-1 Trial			
IMU-856	Celiac Disease			
IMU-381	Gastrointestinal Diseases			

■ Completed or ongoing ■ In preparation or planned

Thank You!



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