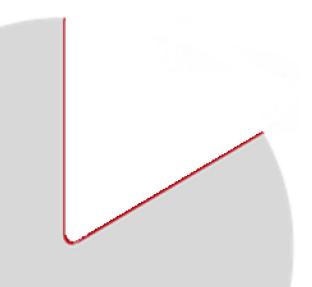


# THIRD QUARTER 2018 REPORT

# Ultimovacs





# Year-to-date of 2018 – at a glance...

- Encouraging signs of clinical effect based on results across the three completed clinical trials (prostate cancer, non-small cell lung cancer and malignant melanoma).
- In the US based phase I trial study in malignant melanoma, in which UV1 is given in combination with a PD-1 checkpoint inhibitor, the first patient has completed UV1 treatment without any safety issues related to UV1.
- In July, Ultimovacs took over the immunotherapy technology business of the Swedish company Immuneed AB. The complementary technologies of the two companies provide a unique platform for development of novel vaccine solutions for treatment and possibly prevention of cancer.
- To finance the activities towards a prospective registration of UV1 and the preclinical development of a new vaccine solution, Ultimovacs continues to prepare for an IPO on the Oslo Stock Exchange early 2019.

# **CEO's corner**

The main purpose of Ultimovacs at the present stage is to document the possible clinical usefulness of our cancer vaccine UV1. The company has now generated the knowledge needed to reach a decision on attempting to register UV1.

"To believe that the immune system can eliminate cancer is like believing a blow dryer can evaporate the ocean". Gustav Gaudernack (then professor in Immunology, now CSO) was told this when he got the



idea and took the first steps to develop a cancer vaccine. This year's Laureates for the Nobel Prize in Medicine or Physiology have demonstrated that cancer can be cured by manipulating the immune system. Their approach is to block different parts of the cancer cells' ability to protect themselves from an activated immune system. We now know that this works; it cures cancers we previously were not able to treat. It is a prerequisite for this to happen that the patient's immune system spontaneously has created relevant T-cells, and this only happens in a subgroup of patients. It should also be noted that these spontaneous immune responses would alone not be able to save



the lives of these patients with advanced cancer. The potential of spontaneous immune responses are only revealed when a checkpoint inhibitor is added to the equation.

The fact that checkpoint inhibitors work also is a tremendous leap forward for Gustav's approach; Since checkpoint inhibitors do not affect cancer cells directly, the clinical effect must come from T-cells spontaneously produced by the body. Ultimovacs is making the body produce similar cells by using a vaccine.

This simple fact was my personal reason for accepting the job to build up Ultimovacs for the purpose of developing and documenting our vaccine, UV1. The vaccine has the potential to provide patients with the T-cells their immune system has not produced spontaneously, and the patients need these cells to eliminate their cancer cells.

There have been many attempts to make a cancer vaccine. They have shown clear signs of helping patients, but they have not been good enough to be used in clinical practice. These unsuccessful attempts are of great value to us, we now have a much better understanding of the reasons why these activated T-cells do not help the patient. The Tcells have not been of the right kind, the choice of antigen (what the T-cells recognize in the cancer) has not been present in all cancer cells and varies over time. But above all, the vaccine induced T cells have been confronted with the same checkpoints as have the natural immune responses with a negative effect on efficacy.

With UV1, Ultimovacs addresses these challenges, it makes T-cells able to recognise an antigen we know is present in almost all cancer cells in most types of cancer and it makes T-helper cells that are able to recruit and activate other T-cells against the cancer. Also, we already know from our own clinical trials that the immunological and clinical effect of UV1 is augmented by combining vaccination with a checkpoint inhibitor. We may therefore ask: Is UV1 augmenting the effect of checkpoint inhibitors or are checkpoint inhibitors augmenting the effect of our vaccine? As checkpoint inhibitors will be part of cancer treatment in the foreseeable future, independent of cancer type, Ultimovacs with its universal cancer vaccine UV1 is uniquely positioned to combine our vaccine with any drug targeting immune checkpoints developed in the future. To this end we have filed patents protecting the use of UV1 in combinations with checkpoint inhibitors.

Ultimovacs is now planning and financing the last step to document that this approach can give a substantial treatment benefit to cancer patients. If all goes well, we will see UV1 used in regular treatment of patients in a not too distant future.



For us this is definitely not the last step in our development, it will be the starting point to develop the true potential of our technology; it can potentially be used in many different types of cancer, and in different stages. We believe that cancer vaccines should be used as early as possible, when it is a matter of definition whether it is treatment or prophylaxis – or potentially also as a preventive vaccine in high risk populations.

UV1 is simple to produce, stable and requires no sophisticated infrastructure to be used in large patient populations.

My colleagues and I in Ultimovacs, and the owners of the company keep reminding ourselves what a privilege it is to be a part of this development. The personal or monetary investment has perspectives far beyond a good return.

Oslo, 4 December 2018 Øyvind Kongstun Arnesen, CEO



# Background

Ultimovacs is a pharmaceutical company developing novel immunotherapies against cancer. The lead product candidate is UV1, a peptide-based vaccine inducing a specific T cell response against the universal cancer antigen telomerase. UV1 is being developed as a therapeutic cancer vaccine for use as monotherapy, and as a platform for other immuno-oncology drugs which require an ongoing T cell response for their mode of action. Ultimovacs is performing a broad clinical development program with clinical trials in Europe and the USA.

Ultimovacs was established in 2011. The company and its proprietary technology is based on pre-clinical and clinical research on immunotherapies conducted at the Oslo University Hospital. The company is privately held, mainly by Norwegian private investors/family offices.

Ultimovacs is located at the Oslo Cancer Cluster Innovation Park in Oslo, Norway, and is an active member of Oslo Cancer Cluster.

Treatment in three Phase I studies have been completed at the Oslo University Hospital. The patients have been followed up for survival, immune response and new anti-cancer treatment. Fifty-two (52) patients have been enrolled in these studies.

- Prostate cancer (22 patients)
   Patients with advanced prostate cancer without lung and/or liver metastases
   were enrolled. These patients had started CAB treatment (GnRH-agonist
   combined with anti-androgen) prior to UV1 treatment.
- Non-small cell lung cancer (NSCLC, 18 patients)
   In the lung study stage 3b/4 NSCLC patients were enrolled, who previously had been treated with palliative radiotherapy and/or at least two courses of chemotherapy. These patients were not to be in progression, confirmed by CT, at least 4 weeks prior to UV1 treatment.
- Malignant Melanoma UV1 in combination with ipilimumab (12 patients)
   The malignant melanoma trial included patients with unresectable or
   metastatic disease when enrolled, and were eligible for ipilimumab. Ipilimumab
   is an agent stimulating immune cell generation and is an approved drug for
   treatment of malignant melanoma.

Safety and tolerability were primary endpoints in all three studies, while immune response towards any of the UV1 peptides and efficacy were secondary endpoints.

Three different dose levels of UV1 were investigated in the prostate cancer and NSCLC studies (100, 300 and 700  $\mu$ g). In the malignant melanoma study, 300  $\mu$ g UV1 was



given in combination with ipilimumab. The majority of the UV1 doses have been given with GM-CSF as an adjuvant treatment.

Data from the three studies showed that UV1 is generally well tolerated. There were no dose limiting toxicities.

UV1 induced an immune response (hTERT specific T-cells) in 82% of patients across the three studies (range 67-91%).

When combining UV1 with ipilimumab, a CTLA-4 checkpoint inhibitor, 91% of malignant melanoma patients developed an immune response. The responses appeared earlier, required fewer vaccinations, and were stronger and more long lasting compared to vaccination with UV1 alone. These data are compatible with a mechanism of action where blocking CTLA-4 checkpoints induce additional expansion of UV1 specific T cells induced by UV1 vaccination.

The three completed trials show clinical outcomes that Ultimovacs sees as a strong basis for the next development phase towards registration of UV1;

- Prostate cancer: 73% of patients were alive after 3 years
- Non-small cell lung cancer (NSCLC): Median progression free survival (mPFS) was reached at 12 months and median overall survival was reached at 28 months
- Malignant melanoma: Median progression free survival (mPFS) was reached at 6.5 months and 67% of patients were alive after 3 years

All patients are followed for overall survival up to ten years and overall survival status will be updated regularly.

Ultimovacs believes that the effect of the UV1 vaccine will be most beneficial when combined with agents improving immune cells' ability to attack tumor cells.

Ultimovacs is currently the sponsor of one ongoing clinical study which is run in the US. In this phase 1 study the safety and tolerability of treatment with the combination of pembrolizumab (PD1 inhibitor) and UV1 in 20 patients with metastatic malignant melanoma is investigated.

Ultimovacs is currently planning for a randomized registration trial with the combination treatment of pembrolizumab and UV1 in patients with metastatic malignant melanoma.



# **Key Operational Highlights Q3 2018**

# R&D - Update from clinical trials

- In July 2018, the first patient was enrolled in the US based phase I trial study in malignant melanoma, in which UV1 is given in combination with the PD-1 checkpoint inhibitor pembrolizumab. A total of 20 patients are planned to be enrolled. According to the study protocol, the first patient must complete the UV1 treatment (14 weeks) before the next two patients can be enrolled. Pembrolizumab is a therapy improving immune cells' ability to attack tumor cells. The first patient has completed UV1 treatment without any safety issues related to UV1. The trial is now open for inclusion of the second and third patient.
- At the end of August 2018, University of Iowa Hospitals and Clinics was opened as the third US site in the above-mentioned study. John Wayne Cancer Institute was opened for enrolment in November 2018, and the following sites are now open for patient enrolment:
  - o Huntsman Cancer Institute (HCI), Salt Lake City
  - o St. Luke's University Health Network, Bethlehem
  - o The University of Iowa Hospitals and Clinics, Iowa City
  - o John Wayne Cancer Institute, Santa Monica
- 3-year survival data are now available for all patients still alive in the phase I malignant melanoma study conducted at the Oslo University Hospital where UV1 was combined with the CTLA4 checkpoint inhibitor Ipilimumab. 67% of patients were alive after 3 years, and median progression free survival (mPFS) was reached at 6.5 months.

### M&A

• On 11 July 2018, Ultimovacs AS completed the acquisition of TET Pharma AB, the former immunotherapy technology business of Immuneed AB. The acquired business is now established as a fully-owned Swedish subsidiary of Ultimovacs (renamed to Ultimovacs AB), based in Uppsala, Sweden. Based on an exclusive license agreement with the Leiden University Medical Centre, Immuneed has developed the proprietary and patent-protected Tetanus-Epitope Targeting-platform (the 'TET-platform') that Ultimovacs believes can attractively complement the vaccine technology of Ultimovacs. Ultimovacs considers the TET-platform technology as a promising and general strategy to strengthen and increase T cell responses against cancer peptides. In parallel with the continued development of the therapeutic cancer vaccine UV1, Ultimovacs will therefore pursue the development of a new first-in-class cancer vaccine solution based on the proprietary TET platform technology.



# **Risks and uncertainties**

Ultimovacs is a research and development company that is still in its early stages. The Company has not generated any revenues historically and is not expected to do so in the short term. Research and development up to approved registration is subject to considerable risk and is a capital-intensive process. The Company's candidates for cancer vaccines and technology platforms are dependent on research and development and may be delayed and/or incur higher costs than currently expected. Competing pharmaceuticals can capture market shares or reach the market faster than Ultimovacs. If competing projects have a better product profile (e.g. better efficacy and/or less side effects), the future value of Ultimovacs' product offerings may be lower than expected. The operations may also be impacted negatively by changes or decisions regarding laws and regulations. In addition, the Company is also dependent upon intellectual property rights.

The primary financial risks are foreign exchange risks and financing risks. The company is affected by foreign exchange risk as the research and development costs for UV1 are mainly paid in USD and EUR. In addition, the Company has investment in foreign operations, whose net assets are exposed to currency translation risk. Adequate sources of funding may not be available when needed or may not be available on favorable terms. The Company's ability to obtain such additional capital or financing will depend in part upon prevailing market conditions as well as conditions of its business and its operating results, and those factors may affect its efforts to arrange additional financing on satisfactory terms. The Board of Directors works continuously to secure the business operation's need for financing.

Ultimovacs' financial risk exposures are described in more detail in the 2017 IFRS financial statement. No significant changes have occurred that affect these reported risks.



# Outlook

In the phase I study in malignant melanoma where UV1 is combined with pembrolizumab (PD1 inhibitor), Ultimovacs aims to have all 20 patients recruited by Q2 2019, and all safety data available shortly thereafter.

Ultimovacs intends to apply for conditional approval for UV1 in combinations with anti-PD-1 based on data from a planned pivotal phase II study investigating UV1 in combination with anti-PD-1 in malignant melanoma. This study is intended to be initiated in Q4 2019, with readout of primary endpoints 3 years after study start (PFS) and 4 years after study start (OS). Study objectives include to obtain efficacy and safety data on the combination therapy. The experimental objective across all Ultimovacs studies is to establish a relevant biobank of patient material for characterization of the immunological response and changes in the tumor milieu promoted by UV1 vaccination.

Ultimovacs actively seeks to broaden its pipeline of drug/technology candidates. The R&D activities focus on development of a new first-in-class cancer vaccine solution building on technology of Ultimovacs and the acquired TET-platform, and on development of new molecules and technologies based on biobank material from the ongoing and planned clinical studies conducted with UV1.

# Key financials Q3 2018

- Preparations for IPO/listing on Oslo Børs (Oslo Stock Exchange) are in process the aim is to complete an IPO early 2019. The main purpose of the IPO is to ensure financing of operations and core development projects until potential filing for Marketing Authorization of UV1.
- Significant increase in net loss in Q3-18 compared to Q3-17 primarily due to increased activity level of R&D activities (including manufacturing), higher headcount and more use of external advisors.
- Ultimovacs AS completed the acquisition of the immunotherapy technology business of Immuneed AB the 11 July. The purchase price for 100% of the shares was of MNOK 50.5 which was paid partly in cash and partly in newly issued shares in Ultimovacs AS. The consolidation of the newly acquired company into the Group has been incorporated for the first time in the Q3-18 interim statements.



		<b>.</b>			-
NOK (000) Unaudited	Q3-18	Q3-17	YTD-18	YTD-17	FY17
Total revenues	-	-	-	-	-
Total operating expenses	17 185	8 479	43 060	25 504	33 391
Operating profit (loss)	(17 185)	(8 479)	(43 060)	(25 504)	(33 391)
Profit (loss) for the peiod	(16 901)	(8 420)	(42 585)	(25 206)	(32 830)
Diluted and undiluted earnings / (loss) per share (NOK)	(26)	(16)	(69)	(49)	(62)
Net increase/(decrease) in cash and cash equivalents	(20 370)	(7 762)	(46 114)	(22 681)	96 806
Cash and cash equivalents at end of period	123 734	50 370	123 734	50 370	169 808

# **Financial review**

### **Financial results**

Ultimovacs does not yet generate revenues, as the Company is in a research and development phase.

Payroll and payroll related expenses increased in Q3-18 (MNOK 9.5) compared to the same period in 2017 (MNOK 4.9), primarily as a result of a higher headcount (4.5 additional FTEs), of which 1 FTE (2 employees) in the Swedish company, as well as an increase in the share-based compensation scheme liability of MNOK 2.9 compared to MNOK 0.8 in the Q3-17 period. Payroll and payroll related expenses YTD-18 was MNOK 19.9 (MNOK 13.8 in YTD-17).

Other operating expenses amounted to MNOK 7.6 in Q3-18 (MNOK 3.5 in Q3-17), of which MNOK 3.9 related to external R&D expenses. Expenses related to legal and financial consultants in connection with a due diligence process of TET Pharma AB amounted to MNOK 1.0 in Q3-18, and MNOK 2.1 in total for the process YTD. During 2017, Ultimovacs started preparations for a potential listing of the Company on Oslo Børs (Oslo Stock Exchange). Significant effort and simultaneous workstreams have commenced during YTD-18 in order to meet listing criteria and prepare the Company for a potential listing in H1-19.

Several corporate, legal and financial advisors have been involved in the process in YTD-18. Other operating expenses in YTD-18 was MNOK 22.7 (MNOK 11.3 in YTD-17).

Loss for the period in Q3-18 amounted to MNOK 16.9 (vs. a loss of MNOK 8.4 in Q3-17), and MNOK 42.6 in YTD-18 (MNOK 25.2 in YTD-17).

### **Financial position**

Total assets per 30 September 2018 was MNOK 193.6, an increase of MNOK 14.8 from 31 December 2017 as result of the purchase of TET Pharma AB with newly issued shares, partly offset by the operating loss.

Total liabilities as of 30 September 2018 amounted to MNOK 23.9, and total equity equaled MNOK 169.8.

### **Cash flow**

The net decrease in cash and cash equivalents in Q3-18 of MNOK 20.4 (MNOK 7.8 in Q3-17) was a result of operating activities and the purchase of TET Pharma AB for MNOK 4.6 in cash in addition to shares in Ultimovacs AS. Total net decrease in cash and cash equivalents in the YTD-18 period was MNOK 46.1 (MNOK 22.7 in YTD17). Total cash and cash equivalents per 30 September 2018 amount to MNOK 123.7.



The Board of Directors and the CEO confirm that the Interim Report provides a true and fair overview of the group's and the parent company's operations, financial position and results of operations, and states material risks and uncertainty factors faced by the parent company and the companies within the group.

This report has been reviewed by the Company's auditor.

The Board of Directors and CEO of Ultimovacs AS

Oslo, 4 December 2018

Jonas Einarsson Chairman of the Board

Henrik Schüssler Board member Bjørn Rune Gjelsten Board member

Ketil Fjerdingen Board member Ole Kristian Hjelstuen Board member

Leiv Askvig Board member

Øyvind Kongstun Arnesen CEO

Kristin L. A. Wilhelmsen Board member

#### Interim condensed consolidated statement of comprehensive income

NOK (000) Unaudited	Note	Q3-18	Q3-17	YTD-18	YTD-17	FY17
Other operating income		-	-	-	-	-
Total revenues		-	-	-	-	-
Payroll and payroll related expenses	3, 5	9 454	4 889	19 937	13 848	18 158
Depreciation and amortization		166	135	471	392	534
Other operating expenses	4, 5	7 566	3 456	22 651	11 264	14 700
Total operating expenses		17 185	8 479	43 060	25 504	33 391
Operating profit (loss)		(17 185)	(8 479)	(43 060)	(25 504)	(33 391)
Financial income		346	60	550	317	631
Financial expenses		62	1	75	19	70
Net financial items		284	59	474	299	561
Profit (loss) before tax		(16 901)	(8 420)	(42 585)	(25 206)	(32 830)
Income tax		-	-	-	-	-
Profit (loss) for the peiod		(16 901)	(8 420)	(42 585)	(25 206)	(32 830)
Other comprehensive income - Translation difference	es	61	-	61	-	-
Total comprehensive income (loss) for the period	bd	(16 840)	(8 420)	(42 524)	(25 206)	(32 830)
Diluted and undiluted earnings/(loss) pr share (NOK)	6	(26)	(16)	(69)	(49)	(62)

#### Interim condensed consolidated statement of financial position

NOK (000) Unaudited	Note	30 Sep 2018	30 Sep 2017	31 Dec 2017
ASSETS				
Goodwill	2, 11	10 395	-	-
Licenses	2, 11	50 461	-	-
Patents		3 178	3 444	3 378
Property, plant and equipment		711	632	558
Total non-current assets		64 744	4 076	3 935
Receivables and prepayments	7	5 155	4 139	5 082
Bank deposits		123 734	50 370	169 808
Current assets		128 889	54 509	174 890
TOTAL ASSETS		193 633	58 585	178 825
EQUITY Share capital		641	511	606
Share premium		314 256	145 081	268 475
Total paid-in equity		314 897	145 592	269 082
Accumulated losses		(145 186)	(94 977)	(102 601)
Translation differences		61	-	-
TOTAL EQUITY	6, 9	169 771	50 615	166 480
LIABILITIES				
Deferred tax	2, 11	10 395	-	-
Non-current liabilities		10 395	-	-
Accounts payable		1 836	1 032	3 033
Other current liabilities		11 630	6 938	9 312
Current liabilities	8	13 466	7 970	12 345
TOTAL LIABILITIES		23 861	7 970	12 345
TOTAL EQUITY AND LIABILITIES		193 633	58 585	178 825

#### Interim condensed consolidated statement of cash flow

NOK (000) Unaudited	Q3-18	Q3-17	YTD-18	YTD-17	FY17
Loss before tax	(16 901)	(8 420)	(42 585)	(25 206)	(32 830)
Non-cash adjustments	-				
Depreciation and amortization	166	135	471	392	534
Interest received incl. investing activities	(1)	-	(1)	(252)	(564)
Net foreign exchange differences	41	(59)	(39)	(47)	2
Working capital adjustments:					
Changes in prepayments and other receivables	77	4	(73)	1 038	95
Changes in payables and other current liabilities	970	599	1 122	1 162	5 538
Net cash flow from operating activities	(15 647)	(7 741)	(41 105)	(22 911)	(27 226)
Purchase of property, plant and equipment	(138)	(21)	(424)	(21)	(21)
Acquisition of subsidiary	(4 586)	-	(4 586)	-	-
Interest received	1	-	1	252	564
Net cash flow used in investing activities	(4 723)	(21)	(5 009)	230	542
Proceeds from issuance of equity	-	-	-	-	125 919
Share issue cost	-	-	-	-	(2 430)
Net cash flow from financing activities	-	-	-	-	123 489
Net change in cash and cash equivalents	(20 370)	(7 762)	(46 114)	(22 681)	96 806
Effect of change in exchange rate	(40)	59	40	47	(2)
Cash and cash equivalents at beginning of period	144 144	58 073	169 808	73 004	73 004
Cash and cash equivalents at end of period	123 734	50 370	123 734	50 370	169 808

### Interim condensed consolidated statement of changes in equity

NOK (000) Unaudited	Share Capital	Share Premium	Accum. Iosses	Total equity
Balance at 1 January 2017	511	145 081	(69 771)	75 821
Loss for the period	-	-	(25 206)	(25 206)
Issue of ordinary shares	-	-	-	-
Share issue costs	-	-	-	-
Translation differences	-	-	-	-
Balance at 30 Sep 2017	511	145 081	(94 977)	50 615
Balance at 1 January 2018	606	268 475	(102 601)	166 480
Loss for the period	-	-	(42 585)	(42 585)
Issue of ordinary shares	35	45 781	-	45 815
Share issue costs	-	-	-	-
Translation differences			61	61
Balance at 30 Sep 2018	641	314 256	(145 125)	169 771



# **Notes**

### **1.** General information

Ultimovacs AS (the Company or Ultimovacs) and its subsidiary (together the Group) is a pharmaceutical Group developing novel immunotherapies against cancer. The Company is a limited liability company and is privately held, mainly by Norwegian private investors/family offices.

Ultimovacs is located at the Oslo Cancer Cluster Innovation Park in Oslo, Norway, and is an active member of Oslo Cancer Cluster.

### 2. Basis for preparations and accounting principles

The Group's presentation currency is NOK (Norwegian kroner).

These interim condensed financial statements have been prepared in accordance with IAS 34 Interim Financial Reporting. The accounting policies applied in the preparation of these financial statements are consistent with those followed in connection with the Company's 2017 financial statements. These condensed interim financial statements should therefore be read in conjunction with the financial statements. The Group has implemented IFRS 15 *Revenue from Contracts with Customers in 2018*; however, this did not have any impact as the Group is not generating revenues.

The consolidated financial statements comprise the financial statements of the Ultimovacs AS and its newly acquired 100% owned subsidiary Ultimovacs AB as at 30 September 2018. Note that as the Group just comprised of Ultimovacs AS prior to the acquisition, historical comparative figures in this report are therefore of Ultimovacs AS only.

This interim report has been subject to a limited audit review. These interim financial statements were approved for issue by the Board of Directors on 4 December 2018.

#### Consolidation

The Group controls an entity when it is exposed to, or has rights to, variable returns from its involvement with the entity and has the ability to affect those returns through its power over the entity. The financial statements of subsidiaries are included in the consolidated financial statements from the date on which control commences until the date on which control ceases.

When the Group loses control over a subsidiary, it derecognizes the assets and liabilities of the subsidiary, and any related non-controlling interests and other components of equity. Any resulting gain or loss is recognized in profit or loss. Any interest retained in the former subsidiary is measured at fair value when control is lost. When a foreign operation is disposed of in its entirety or partially such that control, significant influence or joint control is lost, the cumulative amount in the translation reserve related to that foreign operation is reclassified to profit or loss as part of the gain



or loss on disposal. If the Group disposes of part of its interest in a subsidiary but retains control, then the relevant proportion of the cumulative amount is reattributed to non-controlling interests.

#### **Foreign Operations and currency**

The Group's interim financial statements are presented in NOK, which is the Groups's functional currency.

Transactions in foreign currencies are initially recorded by the companies in the Group in its respective functional currency spot rate at the date the transaction first qualifies for recognition.

Monetary assets and liabilities denominated in foreign currencies are translated at the functional currency spot rates of exchange at the reporting date. Differences arising on settlement or translation of monetary items are recognized in the statement of profit and loss and other comprehensive income.

Intra-group balances and transactions, and any unrealized income and expenses arising from intra-group transactions, are eliminated. Unrealized losses are eliminated in the same way as unrealized gains, but only to the extent that there is no evidence of impairment.

The assets and liabilities of foreign operations, including goodwill and fair value adjustments arising on acquisition, are translated into NOK at the exchange rates at the reporting date. The income and expenses of foreign operations are translated into NOK at the average exchange rates within each respective month of the date of the transactions. Exchange differences on intra-group items are recognized in profit or loss of the respective company and Group accounts.

Foreign currency differences are recognized in other comprehensive income (OCI) and accumulated in the translation reserve.

#### **Business combination**

The Group accounts for business combinations using the acquisition method when control is transferred to the Group. The consideration transferred in the acquisition is generally measured at fair value, as are the identifiable net assets acquired. Any goodwill that arises is tested annually for impairment. Any gain on a bargain purchase is recognized in profit or loss immediately. Transaction costs are expensed as incurred, except if related to the issue of debt or equity securities.

At each reporting date, the Group reviews the carrying amounts of its non-financial assets to determine whether there is any indication of impairment. If any such indication exists, then the asset's recoverable amount is estimated.

Goodwill is tested annually for impairment, as well as when there is any indication that the goodwill may be impaired. For impairment testing, assets are grouped together into the smallest group of assets that generates cash inflows from continuing use that are largely independent of the cash inflows of other assets or cash generating units (CGU). Goodwill arising from a business combination is allocated to CGUs or groups of CGUs that are expected to benefit from the synergies of the combination. An impairment loss is recognized in the income statement when the carrying amount



of CGU, including the goodwill, exceeds the recoverable amount of the CGU. Recoverable amount of the CGU is the higher of the CGU's fair value less cost to sell and value in use.

#### **Intangible assets**

Intangible assets are reviewed for impairment whenever there is any indication that these assets may be impaired. If any such indication exists, the recoverable amount (i.e. the higher of the fair value less cost to sell and value in use) of the asset is estimated to determine the amount of impairment loss.

For the purpose of impairment testing of these assets, recoverable amount is determined on an individual asset basis unless the asset does not generate cash flows that are largely independent of those from other assets. If this is the case, recoverable amount is determined for the CGU to which the asset belongs to.

#### **Deferred tax**

Deferred tax liabilities are recognized on taxable temporary differences arising on investments in subsidiaries.

#### **IFRS 16 Leases**

The Group has analyzed the potential impact of implementing IFRS 16 Leases. The standard will require the Group to recognize a liability to make lease payment (lease liability) and an asset representing the right to use the underlying assets during the lease term (the right-of-use asset) and separately recognize the interest expense on the lease liability and the depreciation expense of the right-to-use asset. As lessee the Group can chose to apply the standard either using a full retrospective or a modified retrospective approach and this is currently being evaluated by the Group. The Group does currently not expect that the new standard will significantly impact the Group's Statement of profit and loss and other comprehensive income or statement of financial position, but will require more extensive note disclosures. The newly acquired subsidiary Ultimovacs AB will not be affected by the implementation of this standard as the company has no material long term contracts.



## 3. Personnel expenses

#### **Personnel expenses**

NOK (000)	Q3-18	Q3-17	YTD-18	YTD-17	FY17
Salaries and bonuses	5 200	3 379	13 239	9 678	13 396
Social security tax	813	539	2 048	1 547	2 139
Pension expenses	414	227	1 009	659	899
Share-based compensation	2 879	850	3 549	2 139	3 199
Other personnel expenses	95	26	234	89	138
Government grants	53	(132)	(142)	(265)	(1 613)
Total personnel expenses	9 454	4 889	19 937	13 848	18 158
Number of FTEs at end of period	14	10	14	10	10

Please refer to note 10 for additional information regarding the share-based payments.

## 4. Operating expenses

The Group is in a development phase, and the majority of the Group's costs are related to R&D. These costs are expensed in the statement of comprehensive income.

Operating	expenses
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NOK (000)	Q3-18	Q3-17	YTD-18	YTD-17	FY17
External R&D expenses	3 866	2 475	12 441	7 865	12 829
Clinical studies	1 725	2 065	5 602	3 915	3 826
Manufacturing costs	1 256	81	5 293	535	8 329
Other R&D expenses	885	445	1 546	941	674
Rent, office and infrastructure	671	476	1 929	1 410	1 856
IP expenses	330	259	1 873	863	1 240
Accounting, audit, legal, consulting	1 643	-	4 377	199	397
Other operating expenses	687	712	2 385	1 858	2 589
Government grants	368	(465)	(354)	(931)	(4 212)
Total operating expenses	7 566	3 456	22 651	11 264	14 700

### 5. Government grants

The following government grants have been received and recognized in the profit and loss as a reduction of operating expenses and personnel costs.

#### **Government grants**

NOK (000)	Q3-18	Q3-17	YTD-18	YTD-17	FY17
Innovation Norway	-	-	-	-	400
BIA grants from The Research Council of Norway	(421)	598	496	1 195	1 243
Skattefunn from The Research Council of Norway	-	-	-	-	4 182
Total government grants	(421)	598	496	1 195	5 825

### 6. Earnings per share

The basic earnings per share are calculated as the ratio of the profit for the year divided by the weighted average number of ordinary shares outstanding.

#### Earnings per share

NOK (000)	Q3-18	Q3-17	YTD-18	YTD-17	FY17
Loss for the period	(16 901)	(8 420)	(42 585)	(25 206)	(32 830)
Average number of share during the period	640 816	510 911	617 712	510 911	526 786
Earnings/loss per share (NOK)	(26)	(16)	(69)	(49)	(62)

As the Company has currently no issuable ordinary shares, diluted and basic (undiluted) earnings per share is the same.

### 7. Current assets

#### **Receivables and prepayments**

NOK (000)	30 Sep 2018	30 Sep 2017	31 Dec 2017
Government grants	4 182	3 580	4 229
Prepayments	348	148	421
Other receivables	625	410	431
Total receivables and prepayments	5 155	4 139	5 082

# 8. Current liabilities

#### **Current liabilities**

	30 Sep	30 Sep	31 Dec
NOK (000)	2018	2017	2017
Accounts payable	1 836	1 032	3 033
Public duties payable	1 090	837	1 347
Share-based compensation liability	8 340	3 732	4 791
Other current liabilities	2 200	2 369	3 173
Total current liabilities	13 466	7 970	12 345



### 9. Shareholder information

The share capital as at 30 September 2018 was NOK 640.816, all as ordinary shares with equal voting rights and a nominal value of NOK 1. The acquisition of TET Pharma AB in July 2018 was paid partly in newly issued shares, where the number of shares increased from 606.160 pre-transaction to 640.816.

Ultimovacs AS had 40 shareholders as at 30 September 2018, and the 20 largest shareholders are listed below:

	# of	
Shareholder	shares	Share-%
Gjelsten Holding AS	195 418	30,5%
Inven2 AS	90 871	14,2%
Canica AS	55 886	8,7%
Radiumhospitalets Forskningsstiftelse	55 835	8,7%
Langøya Invest AS	36 253	5,7%
Imuneed AB	34 656	5,4%
Watrium AS	32 837	5,1%
Sundt AS	24 686	3,9%
Prieta AS	19 407	3,0%
CGS Holding AS	14 575	2,3%
Helene Sundt AS	14 575	2,3%
Annemvax AS	9 876	1,5%
Holmetjern Invest AS	9 142	1,4%
Månebakken AS	7 560	1,2%
Vitmed AS	6 400	1,0%
K-TO AS	4 767	0,7%
Asteroidebakken AS	3 780	0,6%
Aeolus AS	3 500	0,5%
Jakob Hatteland Holding AS	2 500	0,4%
Løren Holding AS	2 000	0,3%
20 Largest shareholders	624 524	97,5%
Other shareholders (20)	16 292	2,5%
Total	640 816	100,0%

#### Share register

### **10.** Shared-based payments

At the Annual General Meeting in April 2016 the Board was authorized to introduce a new incentive scheme for employees (Phantom stock plan), based on the value development of the Company's shares. All employees have been granted a certain number of phantom shares, which are not physically held by the owner. Employees are entitled, upon exercise, to receive a cash amount corresponding to the increase in the value of the underlying share in the period from the option was assigned to the exercise. According to the agreement, the Board of Directors of the Company may, at its discretion and subject to applicable authorizations from the general meeting, elect to settle any compensation-amounts payable in shares rather than cash payments. The Chairman of the Board has expressed that it is likely that the compensation will be paid in cash and not shares. The Board does not presently have the authority from



the General assembly to issue new shares for the purpose of the compensation payment. The compensation scheme has therefore been treated as a cash-settled share-based payment.

Due to the planned listing on the Oslo Stock exchange in H1-19, the compensation is expected to be settled in cash to the phantom-shareholders shortly after the listing, and the compensation-liability is therefore classified as a short-term liability in the interim condensed statement of financial position.

A new option program is expected to be presented for approval by the General Assembly in connection with the planned IPO.

The fair value of the phantom shares are based on a Black Scholes model, with an exercise price for all allocated and non-allocated phantom shares of NOK 1.133, vesting period until 31 December 2018, a volatility of 60-70%, risk free rate of 1.1% and an estimated share price based on the latest shares issues with an increase based on estimated share price at the time of the IPO.

#### 11. Business combinations and intangible assets

#### Acquisition of Tet Pharma AB

On 11 July 2018, Ultimovacs AS completed the acquisition of Tet Pharma AB, the immunotherapy technology business of Immuneed AB. The acquired business is now established as a fully-owned Swedish subsidiary of Ultimovacs, based in Uppsala, Sweden, and has been renamed to Ultimovacs AB.

Based on an exclusive license agreement with the Leiden University Medical Centre, Immuneed has developed the proprietary and patent-protected Tetanus-Epitope Targeting-platform (the 'TET-platform') that Ultimovacs believes can attractively complement the vaccine technology of Ultimovacs. Ultimovacs considers the TET-platform technology as a promising and general strategy to strengthen and increase T cell responses against cancer peptides.

In parallel with the continued development of the therapeutic cancer vaccine UV1, Ultimovacs will therefore pursue the development of a new first-in-class cancer vaccine solution based on the proprietary TET-platform technology.

Following the acquisition of the business from Immuneed AB, Ultimovacs AB currently has two employees, bringing the total number of employees in Ultimovacs Group to 16 (totaling 14 FTEs).

Ultimovacs AB is consolidated into Ultimovacs' consolidated financial statements from 11 July 2018. From 11 July to 30 September 2018, Ultimovacs AB had no revenues, and a negative loss before tax for the period of tNOK 465. The company had not revenues or costs prior to the acquisition on 11 July 2018.

Total transactions costs related to the acquisition amounts to MNOK 2.1.

The purchase price was partly paid in cash and partly in shares in Ultimovacs AS. SEK 5,000,000 (corresponding to NOK 4,631,500) was paid in cash. Additionally, Ultimovacs AS issued 34,656 new shares to Immuneed AB. In the previous share issue in Ultimovacs AS (October 2017), the subscription price per share was NOK 1,322. Based on this valuation, the value of the newly issued shares corresponds to NOK 45,815,232, bringing the total purchase price to NOK 50,446,732.



Based on the preliminary purchase price allocation (PPA), the gross purchase price is tNOK 50,447. Book value of the equity is tNOK 46, which gives an excess value of tNOK 50,401. All the excess value identified in the PPA process has been allocated to the patented TET-technology which is available through an exclusive license, classified as an intangible asset in the balance sheet. The intangible asset will be tested for impairment loss whenever circumstances indicate that an intangible asset's carrying amount may not be recoverable, or at least once a year. When it is assessed that the probability of expected future economic benefits using reasonable and supportable assumptions, amortization of the intangible asset shall begin by the straight-line method over the estimated useful life of the asset.

Deferred taxes of tNOK 10,383 have been calculated on the excess values utilizing the tax rate in Sweden of 20.6%. Goodwill related to the step up of deferred tax amounts to tNOK 10,383. The goodwill comprises the value of expected synergies arising from the acquisition, assembled workforce and deferred tax on excess values.

The valuation date for the preliminary purchase price allocation is 11 July 2018, which also is the date of the transaction. The PPA is preliminary, as we have not yet obtained all of the information related to the fair value of the acquired assets and liabilities related to the acquisition to finalize the purchase price allocation. Accordingly, these preliminary estimates may be subject to change during the measurement period, which is up to one year from the acquisition date. The preliminary purchase price allocation has identified the following fair values of identifiable assets and liabilities in Ultimovacs AB as at the date of the acquisition:

(000)	SEK	NOK
Goodwill related to step up/deferred tax	11 320	10 383
Intangible asset (licensed technology)	54 950	50 401
Total non-current assets	66 270	60 783
Cash and cash equivalents	50	46
Total current assets	50	46
TOTAL ASSETS	66 320	60 829
Deferred tax	(11 320)	(10 383)
TOTAL LIABILITIES	(11 320)	(10 383)
TOTAL CONSIDERATION (PURCHASE PRICE)	55 000	50 447

### 12. Events after the balance sheet date

No significant events have occurred after the balance sheet date.



# Glossary

Words/terms	Description
General/basic terms	
UV1	UV1 is Ultimovacs' synthetic peptide vaccine
Peptides	Peptides are short or long-chains of amino acids, and amino acids are the
	building blocks of protein.
Immune response	The activity of the immune system against foreign substances (antigens).
Adjuvant	A medical substance used to enhance the effect of another medical
	substance.
GM-CSF	"Granulocyte-macrophage colony-stimulating factor". Ultimovacs uses
	GM-CSF as adjuvant together with UV1 to strengthen the ability of UV1 to
	stimulate the immune system.
Immune checkpoint	Medicines that "takes the brakes off the immune system" The immune
inhibitors	system has brakes necessary to balance a normal immune response. The
	downside to these brakes is that it makes it easier for a tumor to grow
	because the immune system becomes less able to fight the tumor. By
	"blocking the brakes", the immune system becomes more potent in killing
	tumor cells. PD1 / PDL1 inhibitors (Keytruda and Opdivo) and CTLA4
	inhibitors (Yervoy – ipilimumab) are examples of Checkpoint inhibitors.
	There are many others in development.
CTLA-4	A protein found on T cells (a type of immune cell) that helps balancing a
	normal immune response. The balance is needed to avoid collateral
	damage of normal cells. When CTLA-4 is bound to another protein called
	B7, it helps keep T cells from multiplying and killing other cells, including
	cancer cells. Ipilimumab works by making it difficult for the CTLA4 to bind
	to B7. Ipilimumab (Ipi/Yervoy) was the first checkpoint inhibitor to reach
	the market.
PD-1 / PD-L1	A protein found on T cells (a type of immune cell) that helps balancing a
	normal immune response. The balance is needed to avoid collateral
	damage of normal cells. When PD-1 is bound to another protein called PD-
	L1, it helps keep T cells from killing other cells, including cancer cells. Some
	anticancer drugs, called immune checkpoint inhibitors, are used to block
	PD-1 or PD-L1. When this checkpoint is blocked, the "brakes" on the
	immune system are released and the ability of T cells to kill cancer cells is
Charling signt in hild it and	increased.
Checkpoint inhibitors	Anti CTI A 4 shoelyngint inhibitor from DNAS (Dristal NAvors Sawith)
Yervoy (Ipilimumab)	Anti-CTLA-4 checkpoint inhibitor from BMS (Bristol-Myers Squibb)
Opdivo (Nivolumab)	Anti-PD-1 checkpoint inhibitor from BMS (Bristol-Myers Squibb)
Keytruda (Pembrolizumab)	Anti-PD-1 checkpoint inhibitor from Merck
Tecentriq (Atezolizumab)	Anti-PD-L1 checkpoint inhibitor from Roche
Bavencio (Avelumab)	Anti-PD-L1 checkpoint inhibitor from Merck (Germany)/Pfizer/Eli Lilly
Imfinzi (Durvalumab)	Anti-PD-L1 checkpoint inhibitor from AstraZeneca
Clinical trial terms	Complete response (The disconcerness of all sizes of any and in success to
CR	Complete response (The disappearance of all signs of cancer in response to
	treatment. Also called complete remission.)



PR	Partial response (A decrease in the size of a tumor, or in the extent of	
	cancer in the body, in response to treatment. Also called partial	
	remission.)	
SD	Stable disease (Cancer that is neither decreasing nor increasing in extent	
	or severity.)	
PD	Progressive disease (Cancer that is growing, spreading, or getting worse.)	
ORR	Overall response rate = CR + PR	
OS	Overall survival (The length of time from either the date of diagnosis or the	
	start of treatment for a disease, such as cancer, that patients diagnosed	
	with the disease are still alive. In a clinical trial, measuring the overall	
	survival is one way to see how well a new treatment works.)	
PFS	Progression-free survival (The length of time during and after the	
	treatment of a disease, such as cancer, that a patient lives with the disease	
	but it does not get worse. In a clinical trial, measuring the progression-free	
	survival is one way to see how well a new treatment works.)	
Medical terms		
Intradermal	In order to initiate an immune response, a vaccine must be taken up by antigen presenting cells (dendritic cells). UV1 is administered via the intradermal route, i.e. injection in the dermis, one of the layers of the skin. This layer, underneath the epidermis, is highly vascularized and contains a large amount of immune cells, mainly dermal dendritic cells.	
Biopsy	A piece of tissue, normal or pathological removed from the body for the purpose of examination.	
IgE	Immunoglobulin E (IgE) are antibodies produced by the immune system. If you have an allergy, your immune system overreacts to an allergen (what you are allergic to) by producing IgE. These antibodies travel to cells that release chemicals, causing an allergic reaction when an allergen enters the body.	



SAE	A continue educates event (SAE) in human drug trials is defined as any		
JAE	A serious adverse event (SAE) in human drug trials is defined as any		
	untoward medical occurrence that at any dose		
	1. results in death,		
	2. is life-threatening		
	<ol> <li>requires inpatient hospitalization or causes prolongation of existing hospitalization</li> </ol>		
	4. results in persistent or significant disability/incapacity,		
	5. is a congenital anomaly/birth defect, or		
	<ol> <li>requires intervention to prevent permanent impairment or damage.</li> </ol>		
	The term "life-threatening" in the definition of "serious" refers to an event in which the patient was at risk of death at the time of the event; it does not refer to an event which hypothetically might have caused death if it were more severe. Adverse events are further defined as "Any untoward medical occurrence in a patient or clinical investigation subject administered a pharmaceutical product and which does not necessarily have to have a causal relationship with this treatment."		
PSA	PSA is an enzyme (protein) important for reproduction. PSA is present in		
	small quantities in the serum of men with healthy prostates, but is often		
	elevated in the presence of prostate cancer or other prostate disorders.		



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# **About Ultimovacs**

Ultimovacs is a pharmaceutical company developing novel immunotherapies against cancer. The lead product candidate is UV1, a peptide-based vaccine inducing a specific T cell response against the universal cancer antigen telomerase. UV1 is being developed as a therapeutic cancer vaccine (TCV) for use as monotherapy, and as a platform for other immuno-oncology drugs which require an ongoing T cell response for their mode of action. Ultimovacs is performing a broad clinical development program with clinical trials in Europe and the USA.

Ultimovacs was established in 2011. The company and its proprietary technology is based on preclinical and clinical research on immunotherapies conducted at the Oslo University Hospital. The company is privately held, mainly by Norwegian private investors/family offices. Ultimovacs is located at the Oslo Cancer Cluster Innovation Park in Oslo, Norway, and is an active member of Oslo Cancer Cluster.

