

Safe harbor



Forward looking statements

This communication contains certain forward-looking statements, relating to the Company's business, which can be identified by the use of forward-looking terminology such as "estimates", "believes", "expects", "may", "will" "should" "future", "potential" or similar expressions or by general discussion of strategy, plans or intentions of the Company. Such forward-looking statements involve known and unknown risks, uncertainties and other factors, which may cause our actual results of operations, financial condition, performance, or achievements, or industry results, to be materially different from any future results, performance or achievements expressed or implied by such forward-looking statements.

Such factors include, among others, the following: uncertainties related to results of our clinical trials, the uncertainty of regulatory approval and commercial uncertainty, reimbursement and drug price uncertainty, the absence of sales and marketing experience and limited manufacturing capabilities, attraction and retention of technologically skilled employees, dependence on licenses, patents and proprietary technology, dependence upon collaborators, future capital needs and the uncertainty of additional funding, risks of product liability and limitations of insurance, limitations of supplies, competition from other biopharmaceutical, chemical and pharmaceutical companies, environmental, health and safety matters, availability of licensing arrangements, currency fluctuations, adverse changes in governmental rules and fiscal policies, civil unrest, acts of God, acts of war, and other factors referenced in this communication.

Given these uncertainties, prospective investors and partners are cautioned not to place undue reliance on such forward-looking statements. We disclaim any obligation to update any such forward-looking statements to reflect future events or developments.

This material is not intended as an offer or solicitation for the purchase or sale of shares of Heidelberg Pharma AG. This material may not be distributed within countries where it may violate applicable law.

Management team with strong pharma and R&D experience





Dr. Jan Schmidt-Brand **CEO**



Heidelberg Pharma since 2001





Dr. András Strassz CMO





Heidelberg Pharma since 2020

More than 15 years experience in clinical drug development including roles at Sandoz, Amgen and biotech companies



Prof. Dr. Andreas Pahl **CSO**





Heidelberg Pharma since 2012

Heidelberg Pharma since 2023

Professor of Pharmacology and Toxicology at the University of Erlangen-Nuremberg (FAU) with 25 years experience in research and higher education

More than 20 years of experience in corporate finance, M&A, strategic

controlling, accounting and corporate development



Dr. George Badescu CBO

Heidelberg Pharma since 2018





More than 15 years experience in industry roles including leadership positions at Abzena



Walter Miller CFO





Dr. Jörg Kemkowski

COO



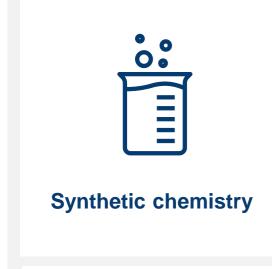


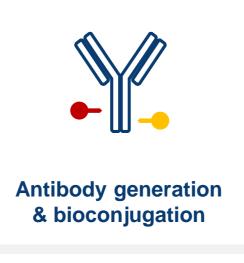


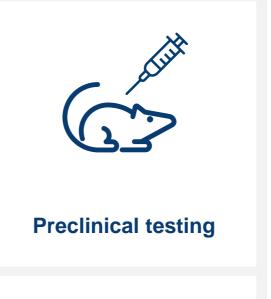
More than 30 years experience in human and animal healthcare industry in different R&D leadership positions

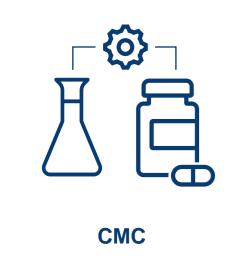
Strong in-house R&D capabilities and expertise

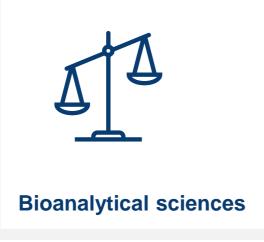




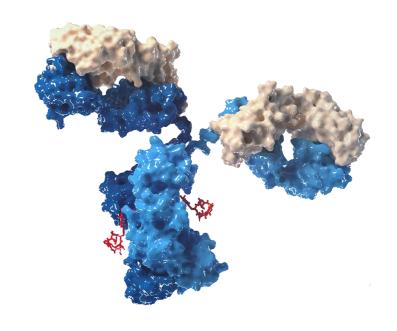












We are able to generate the best ADC candidate in the shortest time

Key achievements





Differentiated ADC Technology

- In Plug & Play mode
- 2 years from target to IND



Strong IP

- Several IP families
- Monopoly in the Amanitin/MOA space



GMP Manufacturing

- Fully synthetic process
- 5 GMP batches completed



Strategic partnerships

- Huadong: China-focused partnership
- Takeda: ATAC technology partnership



Clinical Stage

- 1 Phase 1 ongoing
- 2 additional INDs in the next year



Corporate & Finance

- Experienced leadership team
- Cash (runway): EUR 50.7m* (mid-2025)

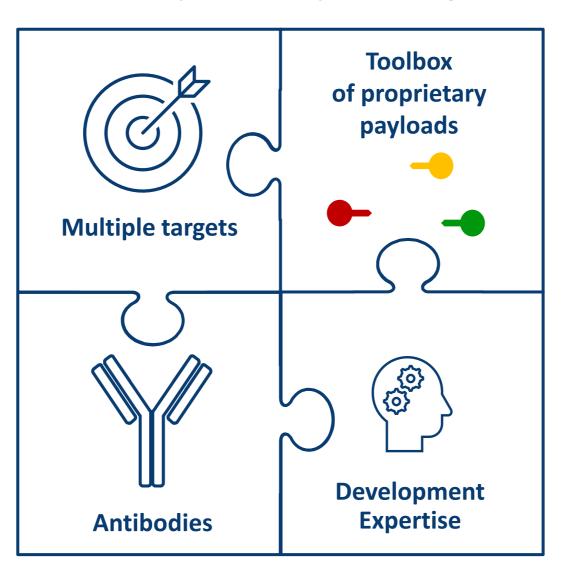
Value creation through development of best-in-class ADC assets



Discovery & development engine



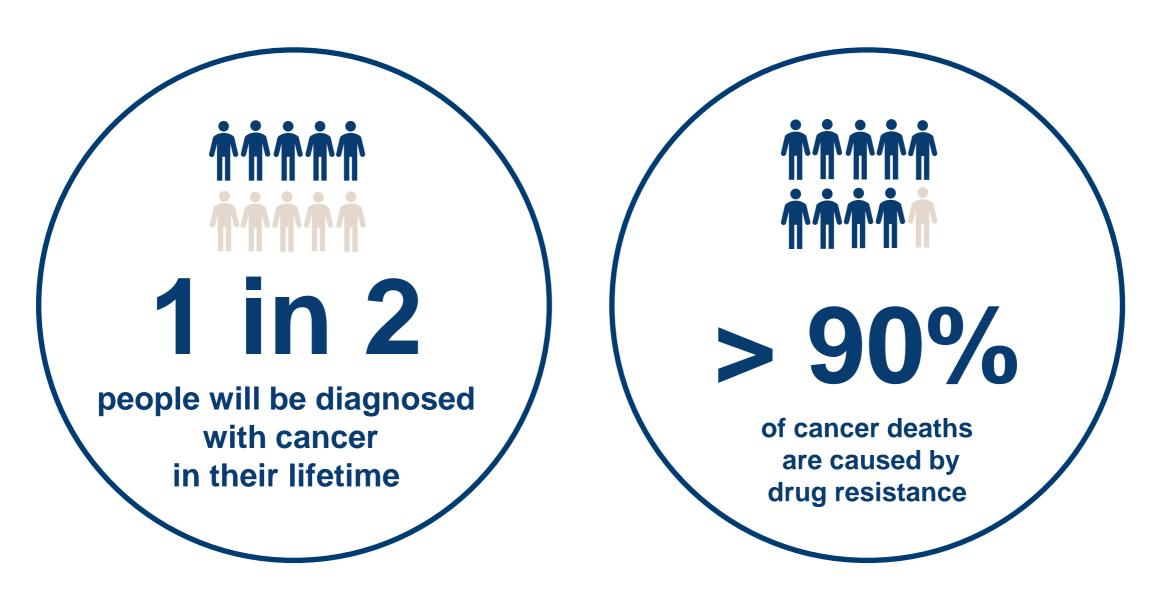
We are NOT a Target ID Company
We are NOT Ab Discovery Company



Partnering at IND-ready, First clinical data, EOP1, Clinical POC **Co-Development Upside: Retain territorial rights** for potential commercialization

Resistance is one of the biggest challenges in oncology





The journey of many cancer patients



Before Treatment



Treatment



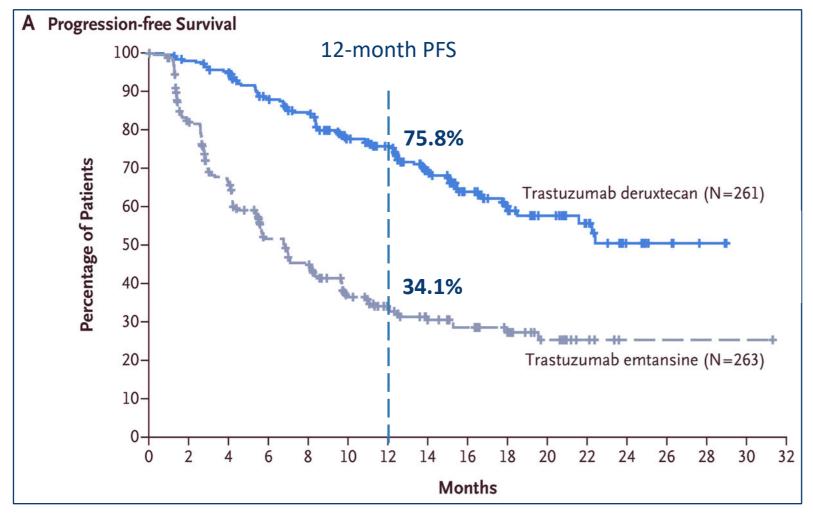
Resistance & Relapse



We need new drugs with new mode-of-action to overcome resistance

The Payload MOA is what makes the difference!





Enhertu®

Payload: deruxtecan (Topo 1 inhibitor)

Kadcyla[®]

Payload: emtansine (Tubulin inhibitor)

Source: Cortés, J. et al, N Engl J Med 2022; 386:1143-1154

Same target (Her2), same antibody (Trastuzumab), same patient population

Amanitin: Novel payload with novel MoA to overcome resistance



	Tubulin inhibitors e.g. Maytansines & Auristatines	DNA-damaging agents e.g. PBDs, PDDs, IGNs, Calicheamicin, Duocarmycins	Topoisomerase inhibitors e.g. Camptothecins, Deruxtecan, SN-38	RNA polymerase inhibitors Amanitin
Potency	High	Ultra-high	Low	Medium
Hydrophilicity	×	×	*	✓
Overcome resistance	×	×	×	✓
Active on non-dividing cells	*	✓	×	✓
Biomarker	*	×	×	✓
Target Exclusivity / Single player / IP monopoly	×	×	*	✓

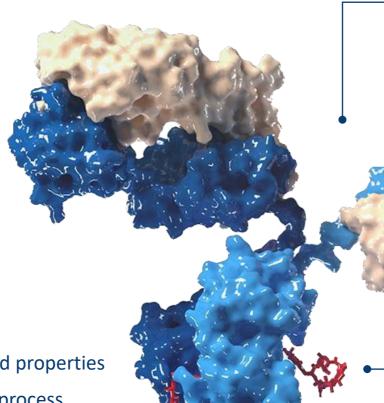
Amanitin has a mechanism of cytotoxicity that is radically different from that of conventional chemotherapy

ATACs are ADCs with amanitin as a payload



Amanitin as warhead

- Differentiated mechanism of action: inhibition of RNA Polymerase II
 - Kills dormant tumor cells
 - Overcomes resistance
 - Predictive biomarker
- Synthetic amanitin derivatives with improved properties
- GMP manufacturing through fully synthetic process



Antibody

Targeting tumor antigen

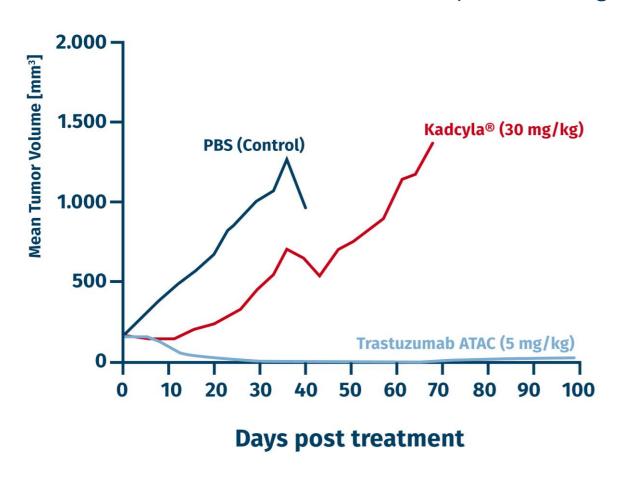
Site-specific conjugation

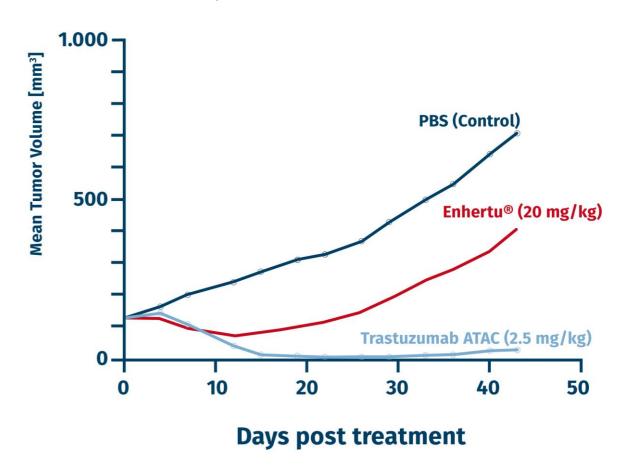
- Proprietary conjugation sites
- Reduced Fcγ-receptor binding for improved therapeutic index (TI)
- Excellent stability in circulation
- Drug-Antibody Ratio (DAR) = 2.0

ATACs overcome resistance to current ADCs



Breast cancer model (JIMT-1 Xenograft) is resistant to Kadcyla® and Enhertu®





Trastuzumab ATAC leads to complete remission in resistant model after single-dose

Growing pipeline of proprietary and partnered programs

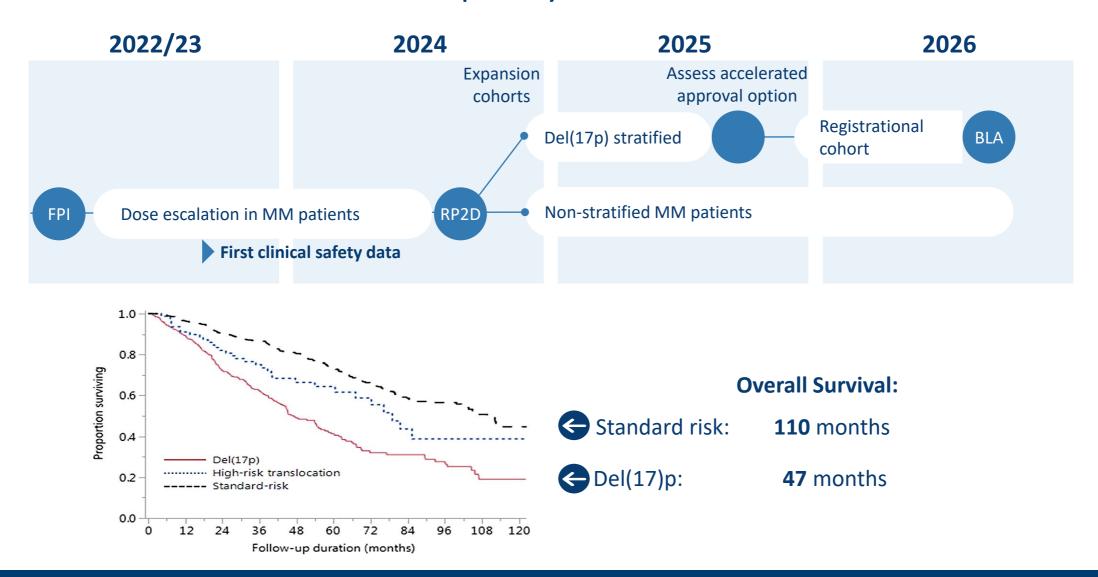


	Product	Target	Indication	Research	Preclinic	Phase I	Phase II	Phase III	Partner
ATAC pipeline	HDP-101	BCMA	Multiple Myeloma						Huadong (China+)
	HDP-102	CD37	NHL (DLBCL/CLL)						Huadong (option China+)
	HDP-103	PSMA	Prostate cancer						Huadong (China+)
	HDP-104	GCC	Gastrointestinal (e.g., CRC)						Huadong (option China+)
TOPO	HDP-201	n/a	Solid tumors						Proprietary
ATAC partners	TAK-ATAC	n/a	Oncology						Takeda
Legacy assets	TLX250-CDx	CA-IX	Renal Carcinoma Urothelial Carcinoma, TNBC						Telix
	TLX250	CA-IX	Renal carcinoma						Telix
	RHB-107		Oncology/GI, Covid-19						RedHill

First-in-human clinical trial with an ATAC ongoing



HDP-101: anti-BCMA-ATAC for multiple myeloma



High unmet medical need – overall survival of del(17)p patients is less than half vs. standard risk

ATACs promise significant clinical benefits



Unique preclinical features of ATACs

Efficacious against dormant tumor cells

Efficacious in ultra-low target-expressing tumor cells

Novel MoA to which all patients will be naïve

Neither hematologic nor ocular toxicity seen for Amanitin or HDP-101

Enhanced efficacy in high-risk del(17p) tumors

Potential clinical benefit

Longer PFS and MRD negativity

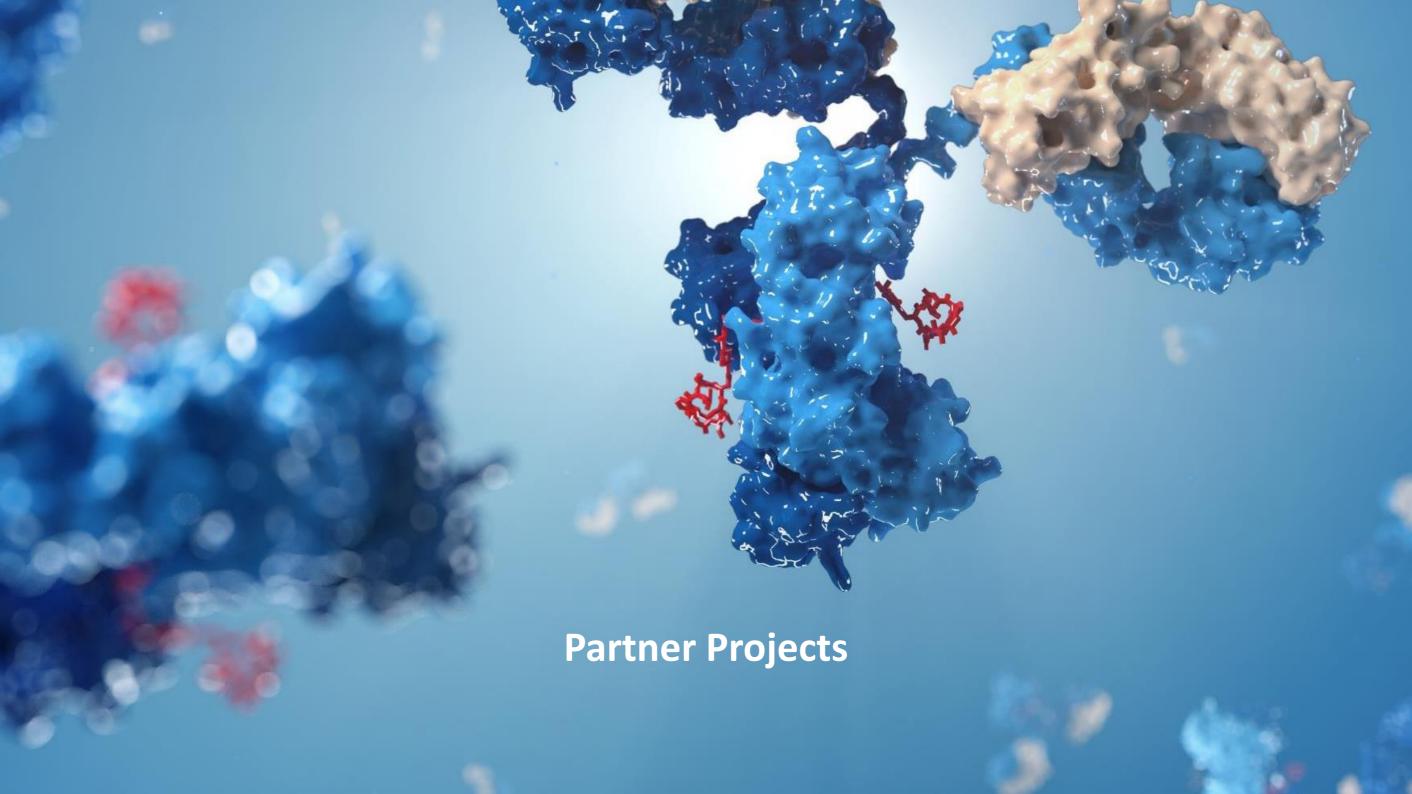
Deeper responses and higher ORR

Overcome resistance

Superior safety profile

Breakthrough designation and accelerated approval

ATACs have best-in-class potential



Partner Projects



Strategic partnership with Huadong Medicine (February/September 2022)



Exclusive licensing agreement for Asia*

- Exclusive license for HDP-101 and HDP-103; deal value: up to USD 469 m + royalties
- Exclusive option for HDP-102 and HDP-104; deal value: up to USD 461 m + royalties

Investment Agreement

Equity investment of € 105 m in Heidelberg Pharma



ATAC Technology Collaborations

License agreement for an ATAC with Takeda (September 2022):

Worldwide exclusive license for an ATAC against an undisclosed target.



^{*} People's Republic of China, Hong Kong, Macao, Taiwan, South Korea, Indonesia, Singapore, The Philippines, Thailand, Bangladesh, Bhutan, Brunei, Myanmar, Cambodia, Laos, Malaysia, Maldives, Mongolia, Nepal and Vietnam; excludes Japan, India, Pakistan, Sri Lanka

Highlights Legacy Portfolio: TELIX



TLX250-CDx is Progressing towards Market Approval

TLX250-CDx (89Zr-girentuximab) (imaging) enables accurate diagnosis of clear cell renal cell carcinoma (ccRCC)

Pivotal Phase III study (ZIRCON) reported positive results in November 2022

- Global multicenter phase III trial with 300 patients with renal masses completed
- Pivotal trial met all endpoints

Next steps:

- Filing for regulatory approval with the FDA and other agencies
- Planned approval and launch in ccRCC in 2024
- Estimated peak annual revenue for Heidelberg Pharma from US alone: > \$ 100 m*

Indication expansion:

 Ongoing phase II studies in bladder cancer and in triple-negative breast cancer



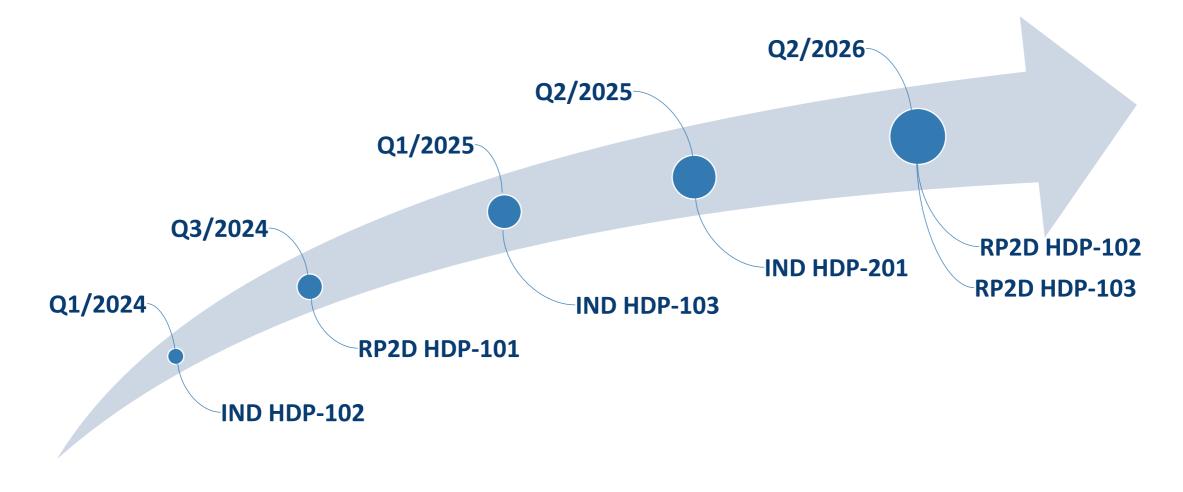


TLX250 (177Lu-girentuximab) (therapy) – ongoing phase II studies in kidney cancer

Outlook



- We are a clinical-stage company with the goal of becoming a leading global ADC player
- Multiple inflection points over the next 36 months with potential to many-fold increase of company valuation



Investment opportunity



Solid cash runway until mid 2025 supports execution of ongoing programs and clinical validation of ATACs

- Additional financing required to reach multiple value inflection points across our portfolio until end of 2026
- (Bridge-) Financing until non-dilutive funding becomes available through licensing income and royalties
- Develop portfolio potential in full and without delay
- Accelerate business transformation from R&D to market focused company
- Flexible financing structure possible

