Initial Phase 2a IMM-1-104 Data Conference Call

Immuneering

Nasdaq: IMRX

September 12, 2024

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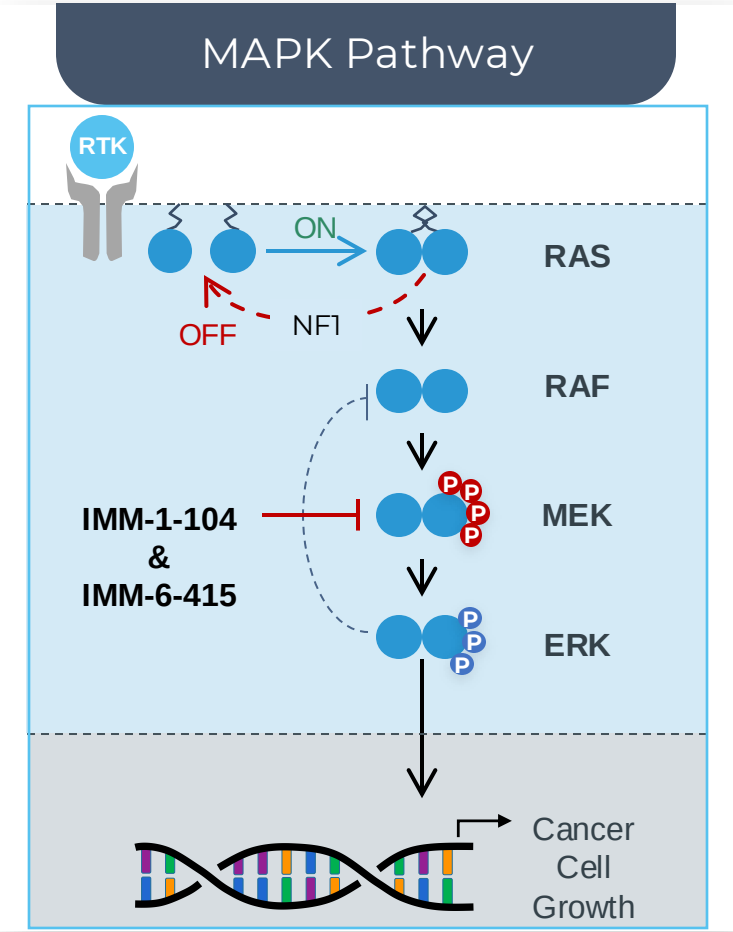
Data of trametinib, cobimetinib, binimetinib, selumetinib, encorafenib, AMG-510 (now known as sotorasib) and / or other therapeutic agents as compared to IMM-1-104 presented in this presentation is based on head-to-head studies where these therapies have been purchased from commercial sources rather than the pharmaceutical company commercializing or developing, as applicable, the compound.

Immuneering Mission:

Help Many Cancer Patients Live Longer and Feel Better



- **200,000+ cancer patients** are estimated to have RAS or RAF driven tumors.
- RAS, RAF, and MEK inhibitors have historically faced tolerability issues, and eventually stop working when patients develop resistance. Our uniquely designed MEK inhibitors aim to do better.
- In Phase 1, our lead candidate IMM-1-104 showed excellent tolerability, fewer resistance mutations, and clear activity in pancreatic cancer, a huge unmet need.
- Phase 2a tests IMM-1-104 alone and in combination, in 1st line pancreatic cancer and other settings.

IMM-1-104 Phase 2a

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IMM-1-104 Clinical Development

INDICATION	TYPE	DISCOVERY	IND-ENABLING	PHASE 1	PHASE 2	PHASE 3	~ N (patients)
	Combination	1L – 104 + mGem/nab-Pac					30
Pancreatic	Combination	1L – 104 + mFOLFIRINOX					30
	Monotherapy	2L (or 1L)					30
Melanoma (RAS^{mut})	Monotherapy	2L, 3L post-IO (or 1L)					30
NSCLC (RAS^{mut})	Monotherapy	2L, 3L					30

Unresectable/Metastatic PDAC: Key 1L Clinical Benchmarks

Trial	Treatment	Line of Treatment	PS	OS (months)	ORR	PFS (months)	CR (%)	PR (%)	SD (%)
[a] **Phase III MPACT**	Gemcitabine	**1st Line**	0-1	6.7	**7%**	**3.7**	0	**7.2**	28.4
[a] **Phase III MPACT**	nab-Paclitaxel + Gemcitabine	**1st Line**	0-1	8.5	**23%**	**5.5**	0.2	**22.7**	27.4
[b] **Phase III PRODIGE/ACCORD 11**	FOLFIRINOX	**1st Line**	0-1	11.1	**32%**	**6.4**	0.6	**31.0**	38.6
[c] **Phase III NAPOLI-3**	NALIRIFOX	**1st Line**	0-1	11.1	**42%**	**7.4**	0.6	**41.5**	25.8
[d] **Modified (m) Gem/nab-Pac**	(m) nab-Paclitaxel + Gemcitabine	**1st Line**	0-1	10	**18.6%**	**5.4**	NR	NR	NR

NR = Not Reported

[a] Phase III MPACT trial (link)
[b] Phase III PRODIGE/ACCORD 11 trial (link)
[c] Phase III NAPOLI-3 trial (link)
[d] Retrospective analysis – modified (m) Gem/nab-Pac 1L PDAC (link)

Initial Results from Phase 2a Arm Evaluating IMM-1-104 with Modified Gemcitabine/ nab-Paclitaxel in First Line Pancreatic Cancer as of September 12, 2024

Patient	MAPK Mutation Variant	Dose (p.o.) Level for IMM-1-104	% Change in SLD 1st Scan	% Change in SLD 2nd Scan	% Change in SLD 3rd Scan	% Change in SLD 4th Scan	% Change SLD 5th Scan	ORR/ RECIST
1	GNAS-T105Vfs*3 (*)	240mg QD	**-100%**	**-100%**	**-100%**	**-100%**	*next scan*	**CR**
2	KRAS-G12V*	240mg QD	**-8%**	**-10%**	**-40%**	*next scan*		u**PR**°
3	KRAS-G12V*	240mg QD	**-4%**	*next scan*				**SD**
4	Unk.#	240mg QD	**+6%**	*next scan*				**SD**
5	KRAS-G12R*	240mg QD	**-9%**	*next scan*				eq**PD****
Initial Overall Response Rate (ORR):			40%					
Initial Disease Control Rate (DCR):			80%					

IMM-1-104 has been well-tolerated to-date in combination with modified gemcitabine/nab-paclitaxel

SLD = sum of longest diameters

* Detected in prior genetic test

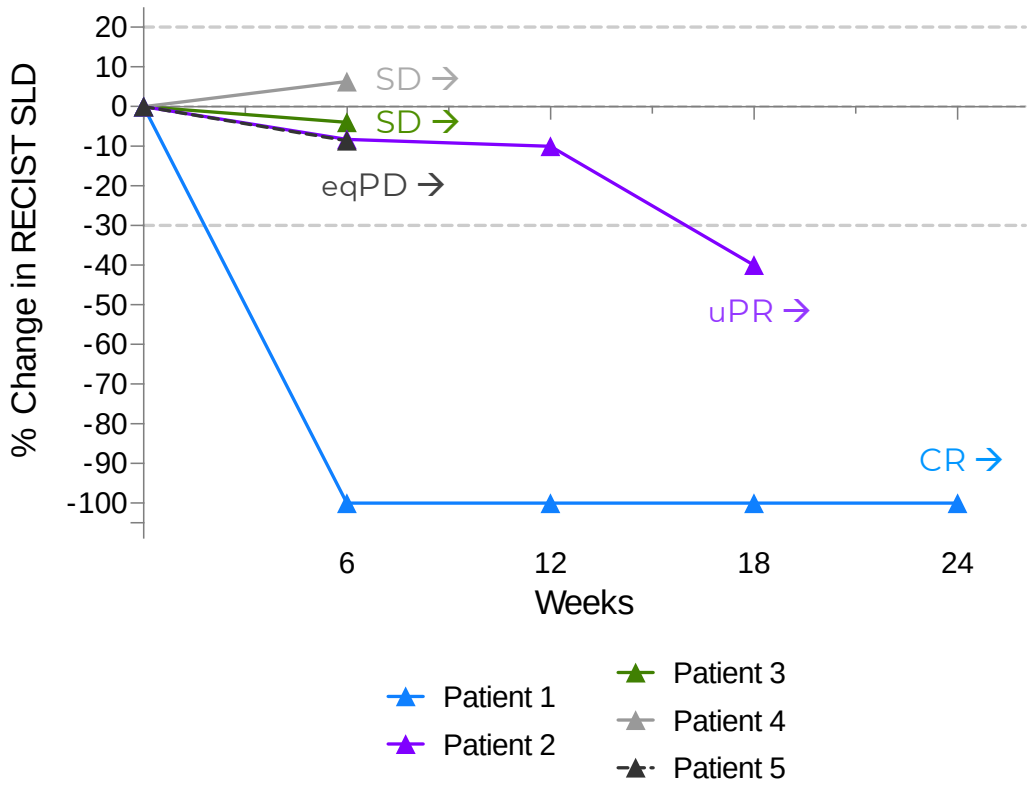
Unknown (Unk.); MAPK pathway variant not detected in plasma cfDNA or prior genomic test

° Partial response result classified as "unconfirmed" pending subsequent scan

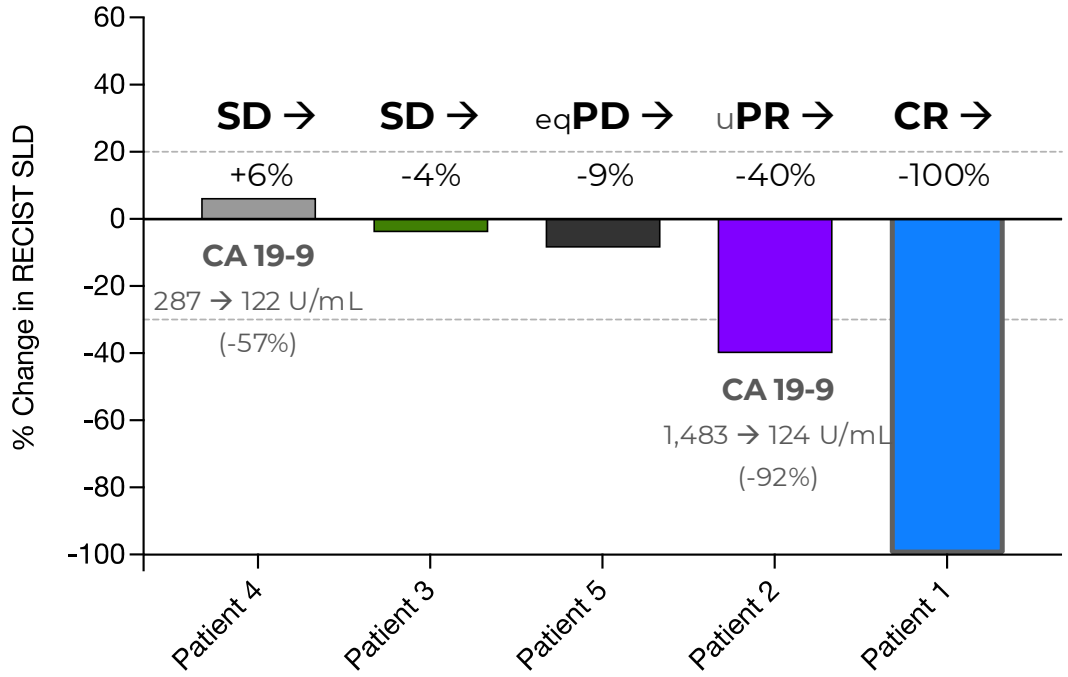
**Equivocal (eq); Patient not dosed for over two weeks during hospitalization for a preexisting condition. Scans showed ascites and a pleural effusion categorized by radiology as equivocal new lesions per RECIST 1.1. The investigator determined these to be related to the recent placement of a hepatic stent, not disease progression. The patient is improving and remains on therapy.

Promising Early Clinical Activity: Phase 2a 1L PDAC (104+mGnP)

Spider Plot (Arm B: 104 + mGnP)



Waterfall Plot (Arm B: 104 + mGnP)



→ On Treatment
(BoR to date Shown)

- IMM-1-104 + modified Gemcitabine/nab-Paclitaxel (mGnP) combination is well-tolerated (5 evaluable patients at first dose level)
- All 5 patients at 240 mg IMM-1-104 QD p.o. + nab-Pac (125 mg/m2 i.v.) and Gem (1,000 mg/m2 i.v.) on days 1, 15 of every 28-day cycle
- Multiple patients now enrolled (not yet to first scan) at 320 mg IMM-1-104 + mGnP

Data as of 12SEPT24

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Phase 2a Initial Data Summary

- Goal of this Phase 2a trial is to evaluate IMM-1-104 in a variety of potential indications
- Early and encouraging data in 1L pancreatic cancer patients - a population with significant unmet need
- Results achieved at the IMM-1-104 lead-in dose of 240 mg
- If these early results continue, we believe there is a clear path forward for development of IMM-1-104 in 1L pancreatic cancer
- We look forward to providing additional updates

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