

A photograph of two female scientists in a laboratory. The scientist on the right, with dark hair, is smiling and looking towards the scientist on the left, who has short grey hair and is seen in profile. They are both wearing white lab coats over blue shirts. In the background, there is a desk with a computer monitor, a printer, and some papers.

# Advancing Vaccines for Better Lives

Company Presentation  
July 2020





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# Valneva's Value Proposition

Integrated business model with valuable commercial and R&D assets

## R&D

**Lyme vaccine in Phase 2; data read out from July; strategic collaboration with Pfizer announced April 2020<sup>1</sup>**

US/EU market opportunity of ~\$1bn per annum

- Only program in clinical development
- Pfizer to lead late-stage development and drive commercialization

**Chikungunya Phase 3 to commence Q4 2020**

Global market opportunity of ~\$0.5bn per annum

- Huge synergy with existing infrastructure
- Possible Priority Review Voucher upside

**R&D provides upside for shareholders**

Two unique vaccines with low R&D risk profile

## Commercial Business

**Total sales revenues €129.5m in 2019, +25% vs. 2018; Marketing & Distribution partnership with Bavarian Nordic announced June 2020<sup>2</sup>**

IXIARO®

- Only licensed JE vaccine for travelers in US CAN, EU; mandatory for US Military
- Sales > €90m in 2019

DUKORAL®

- Cholera (LT-ETEC) vaccine, licensed in CAN, EU, ROW
- Sales > €30m in 2019

**Recent transactions underline major valuation disconnect**

BN product acquisition from GSK @ 4.5x revenue

<sup>1</sup> Valneva PR: [Valneva and Pfizer Announce Collaboration to Co-Develop and Commercialize Lyme Disease Vaccine, VLA15](#); <sup>2</sup> Valneva PR: [Valneva and Bavarian Nordic Announce Marketing and Distribution Partnership](#)

# Valneva: A specialty vaccine company focused on prevention against diseases with major unmet needs



## 2 unique late stage programs

Lyme  
Chikungunya



## > 500 people

Four main sites  
Six in-market commercial teams



## >100 people in R&D

High R&D investment in 2020 to drive Lyme and chik late-stage development



# Lyme Disease Vaccine – VLA15



# Lyme Disease is a Massively Important Health Issue

Media attention spiked again this year

No available treatment to protect against Lyme disease

Major unmet medical need in North America and Europe

Lyme disease cases may rise 92 per cent in US due to climate change (New Scientist)<sup>1</sup>



<sup>1</sup> <https://www.newscientist.com/article/2232705-lyme-disease-cases-may-rise-92-per-cent-in-us-due-to-climate-change/>



# Valneva and Pfizer Collaboration to Co-Develop and Commercialize Lyme Disease Vaccine, VLA15

This partnership provides the opportunity for the rapid development and launch of a vaccine that has the potential to **address a major unmet medical need**.

The collaboration with Pfizer **validates Valneva's strong vaccine R&D capabilities**.

As an established global leader in the pharmaceutical industry with a strong commitment to vaccines and infectious diseases, **Pfizer is the best partner for VLA15**.



# Collaboration to Co-Develop and Commercialize Lyme Disease Vaccine, VLA15



**Valneva and Pfizer will work closely together throughout the development of VLA15**



- Valneva is eligible to receive a total of \$308 million cash payments consisting of a \$130 million upfront payment, \$35 million in development milestones and \$143 million in early commercialization milestones
- Valneva will fund 30% of all development costs through completion of the development program
- Pfizer will pay Valneva tiered royalties starting at 19%

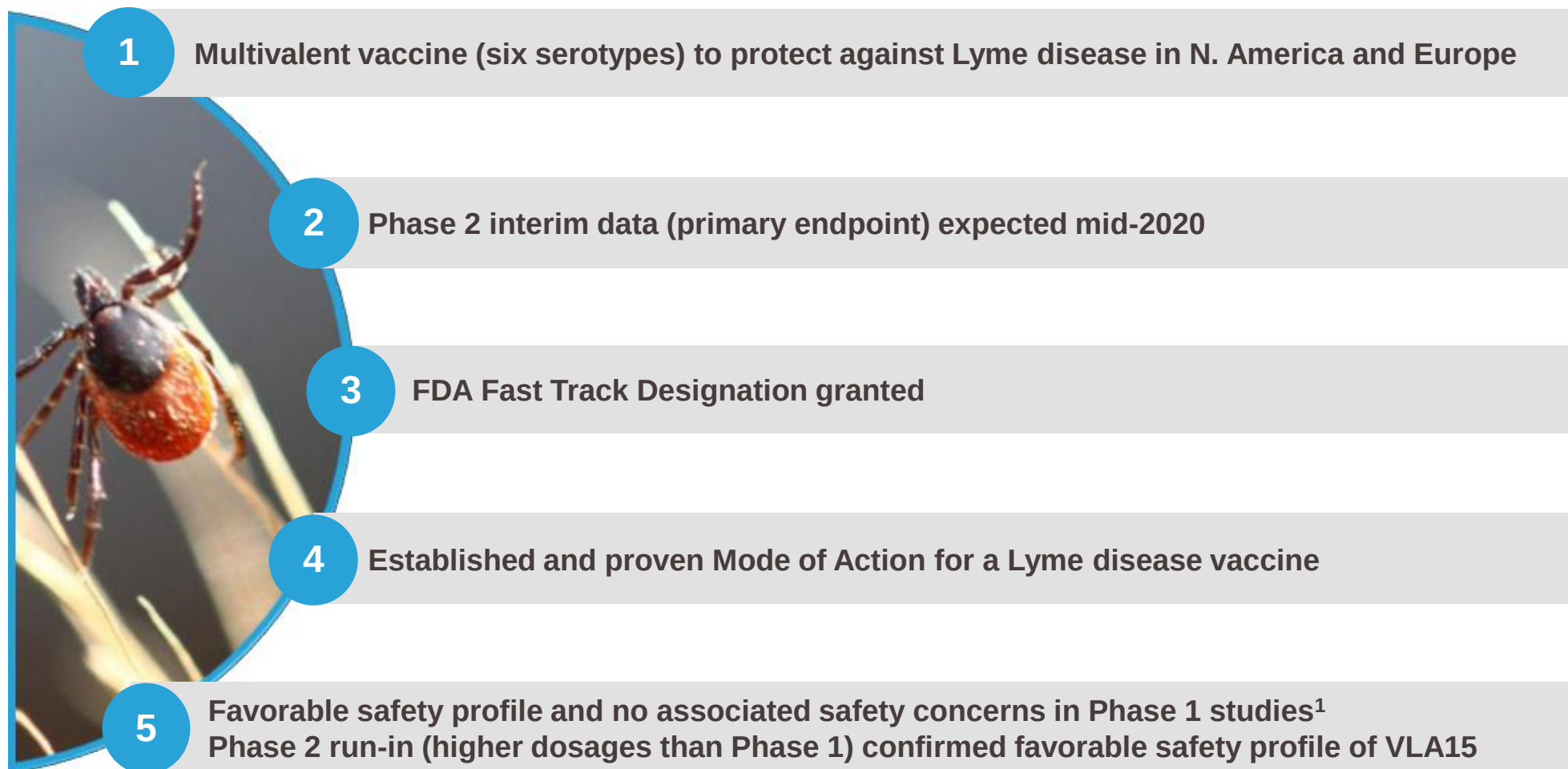


- Pfizer will fund 70% of all development costs through completion of the development program
- Pfizer will lead late-stage development and have sole control over commercialization



## VLA15: Key Value Driver in 2020 and Beyond

The only Lyme disease vaccine candidate in clinical development today



<sup>1</sup> Valneva PR: [Valneva Reports Positive Initial Booster Data and Final Phase 1 Data for its Lyme Disease Vaccine Candidate](#)

# Chikungunya Vaccine – VLA1553





# Chikungunya is a Growing and Enduring Problem

Representing a major public health threat

Currently there is no vaccine or any **treatment options** for chikungunya

Global market including endemic regions (see below);  
**Traveler vaccine market at up to €250m<sup>1</sup>**

**2019 - 2020: outbreaks<sup>2</sup> in Africa** (Djibouti, Ethiopia, Kenya, Sudan), **Asia** (Philippines, Thailand), **and South America** (Brazil, Colombia)



<sup>1</sup> Chikungunya. L.E.K. interviews, research and analysis for traveler vaccine market., <sup>2</sup> Djibouti, Ethiopia, Kenya, Sudan; Philippines, Thailand; Brazil, Colombia



# VLA1553: Key Growth Driver for Future Valneva Sales

The only single-shot vaccine candidate against chikungunya today



- 1 VLA1553 is a monovalent live attenuated<sup>1</sup> prophylactic vaccine targeting chikungunya virus neutralization
- 2 Currently no preventive vaccines or effective antiviral treatments exist for chikungunya
- 3 FDA Fast Track Designation granted. Priority Review Voucher eligible
- 4 Phase 1 complete. Potential Phase 3 start as soon as the COVID-19 situation permits (currently planned for Q4 2020)
- 5 Seamless fit with existing commercial and manufacturing capabilities as a plug-and-play asset; Partnership with Instituto Butantan for LMICs<sup>2</sup>
- 6 Up to \$23.4 million (€20.3 million) awarded to Valneva for R&D by CEPI

<sup>1</sup> CHIKV LR2006-OPY1 infectious clone was attenuated by deleting large part of gene coding nsP3 (alphavirus-replicase; <sup>2</sup> Valneva PR: [Valneva to Partner with Instituto Butantan on Single-Shot Chikungunya Vaccine for Low- and Middle-Income Countries](#); Photo credit: James Gathany ([source](#))



# VLA1553: Excellent Data and Progressing Rapidly

## Status and clinical development overview

### End of Phase 2 (EoP2) FDA meeting held

- Detailed Phase 3 design confirmation expected delayed due to COVID-19 situation
- Accelerated Approval Pathway already confirmed
- Excellent Phase 1 previously reported

### Additional non-clinical studies requested by FDA fully completed

- Mosquito transmission studies
- NHP study addressing biodistribution
- Passive transfer study in NHPs to develop surrogate of protection using human sera from VLA1553-101

### Phase 3 initiation preparation proceeding

\*Subject to FDA approval

# SARS-CoV-2 (COVID-19) – VLA2001



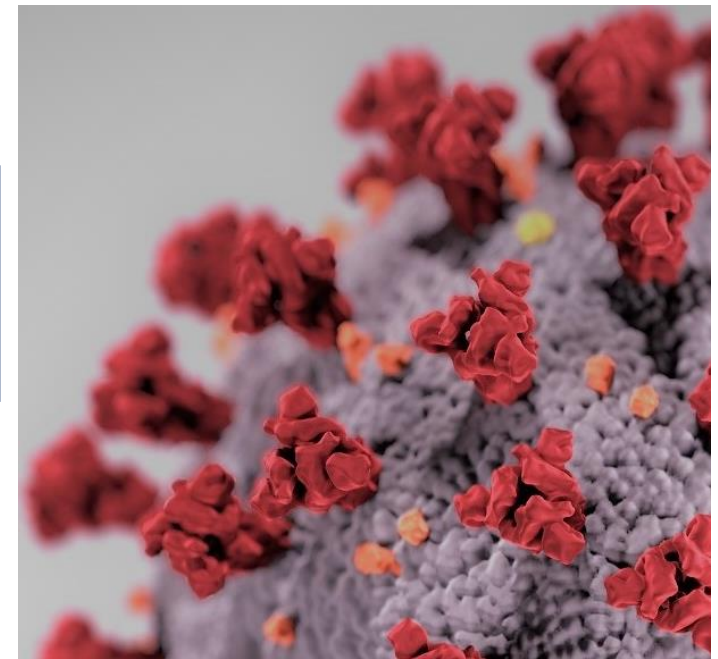


# Responding to the COVID-19 Crisis

**There is currently no vaccine and no specific treatment available for the novel coronavirus, SARS-CoV-2**

**Physical distancing has been effective<sup>1</sup>, but nationwide lockdowns are not a long-term solution**

**There have been over 10 million confirmed cases and over 500,000 deaths from COVID-19 worldwide<sup>2</sup>**



<sup>1</sup> Flaxman, S., Mishra, S., Gandy, A. *et al.* Estimating the effects of non-pharmaceutical interventions on COVID-19 in Europe. *Nature* (2020). <https://doi.org/10.1038/s41586-020-2405-7>;  
<sup>2</sup> Data retrieved from the [John's Hopkins University COVID-19 Dashboard](#) on June 30, 2020



## VLA2001: SARS-CoV-2 Vaccine Program for COVID-19

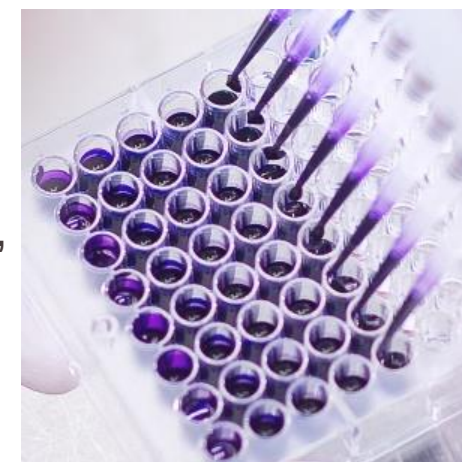
### Collaboration with Dynavax

#### Leveraging Valneva's existing capabilities to develop an inactivated, adjuvanted whole virus vaccine candidate

- BSL3 labs recommissioned for pre-clinical activities
- Resources from other early stage programs reallocated; grant funding also sought for clinical development and manufacturing
- Valneva and Dynavax to align with regulatory authorities on optimal strategy to expedite clinical development
- Goal to initiate clinical trials before end of 2020 (subject to successful preclinical work and receipt of appropriate funding)
- Plug-and-play at Valneva's FDA approved Livingston manufacturing facility with ability for rapid scale-up; facilitated program acceleration through use of a previously FDA-approved platform

#### Benefits of an Inactivated Vaccine Approach

- Inactivated vaccines are well studied and widely used
- They can be used in vulnerable populations (i.e., pregnant women, older and certain immunocompromised patients)
- Some other SARS-CoV-2 approaches (e.g., RNA- and DNA-based) have never been approved in humans



# Commercial Products





## IXIARO®/JESPECT®

### Only vaccine against Japanese encephalitis (JE) in US, Canada and Europe

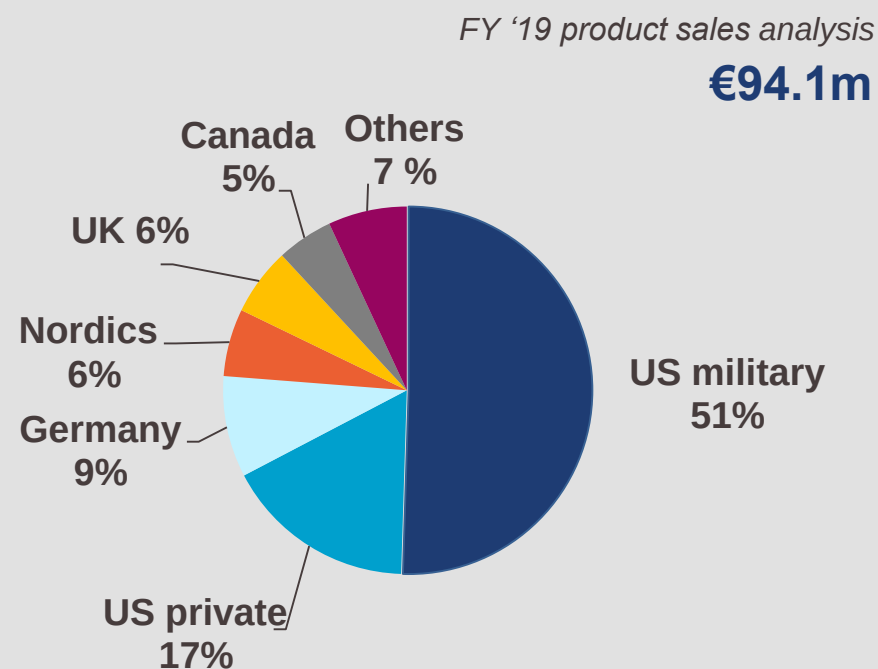
#### IXIARO®/JESPECT®

- Designed to protect travelers and military against JE, the leading cause of viral neurological disease and disability in Asia
- Indicated for active immunization against JE in **adults, adolescents, children and infants** aged two months and older<sup>1</sup>

#### Commercial position

- Currently, **no effective treatment for the disease**
- **The only approved vaccine available for US, EU and Canadian travelers**
- Supply agreement in place with US military and strong track record of repeat contracts
- Limited competition - local producers exist in endemic regions and mainly serve public markets

#### North America driving growth



<sup>1</sup> Indications differ by country - Please refer to Product / Prescribing Information (PI) / Medication Guide approved in your respective countries for complete information, incl. dosing, safety and age groups in which this vaccine is licensed. The currently available presentation for Ixiaro® can be used in children from 3 years of age. Prior to availability of the new presentation, no attempt should be made to adjust the syringe volume or to administer a 0.25mL/3µg dose in children less than 3 years of age.

Only cholera (ETEC<sup>1</sup>) vaccine approved in EU, Canada and Australia

## DUKORAL®

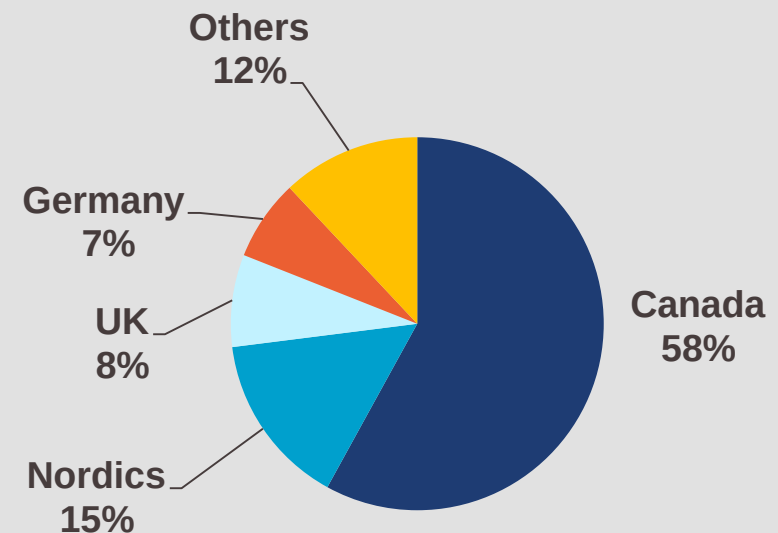
- For the prevention of diarrhea caused by *Vibrio cholera* and/or heat-labile toxin producing enterotoxigenic *Escherichia coli* (ETEC)<sup>1</sup>
- Designed to protect adults and children traveling to endemic areas

### Commercial position

- In several markets, incl. EU, indicated for cholera only
- **Only approved cholera vaccine available for Canadian, European and Australian travelers**
  - ~3-5 million cholera cases, 100,000-120,000 deaths/year<sup>2</sup>
  - ~5-18 million reported ETEC cases/year<sup>3</sup> (ETEC is the most frequent form of traveler's diarrhea)
  - WHO pre-qualification widely used in other countries
  - Asian manufacturers predominantly serve local markets

## Canada remains our key market

FY '19 product sales analysis  
**€31.5m**



<sup>1</sup> Indications differ by country - Please refer to Product / Prescribing Information (PI) / Medication Guide approved in your respective countries for complete information, incl. dosing, safety and age groups in which this vaccine is licensed, ETEC = Enterotoxigenic Escherichia coli (E. Coli) bacterium; <sup>2</sup> WHO cholera factsheet February 2014; <sup>3</sup> Lundkvist J, Steffen R, Jonsson B. Cost-benefit of WC/rBS oral cholera vaccine for vaccination against ETEC-caused travelers' diarrhea. J Travel Med 2009; 16(1):28-34;



# Valneva's Management and Advisory Team – Dedicated to Deliver VLA's Vision

Experienced international team

## Management Board



- **Thomas Lingelbach** – President & CEO (center)
- **Franck Grimaud** – President & CBO (2<sup>nd</sup> from left)
- **David Lawrence** – CFO (2<sup>nd</sup> from right)
- **Wolfgang Bender, MD, PhD** – CMO (left)
- **Frédéric Jacotot** – General Counsel & Corporate Secretary (right)

## Supervisory Board

- **Frédéric Grimaud** (France), *Chairman*
- **James Sulat** (US), *Chair – Audit Committee*
- **Anne-Marie Graffin** (France)
- **Thomas Casdagli** (UK)
- **Sharon Tetlow** (US)
- **Johanna Pattenier** (CH)

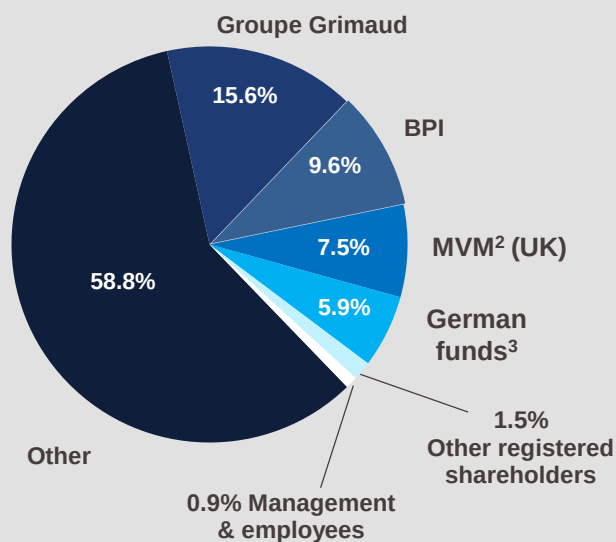
## Scientific Advisory Board

- **Ralf Clemens, MD, Ph.D.**, *Chair*
- **Norman W. Baylor, Ph.D.**
- **Anna Durbin, MD**
- **Alain Munoz, MD, Ph.D.**
- **George R. Siber**
- **Stanley Plotkin, MD**

# VLA has strengthened its institutional shareholder base with blue-chip healthcare investors including US

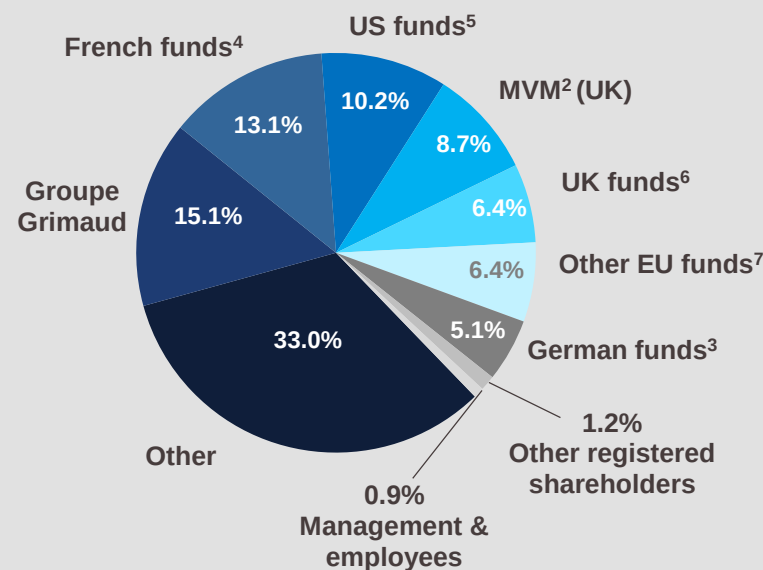
## January 2018

- Number of ordinary shares: 77.6m
- Shareholder structure<sup>1</sup>:



## May 2020

- Number of ordinary shares: 90.9m
- Shareholder structure<sup>1</sup>:



<sup>1</sup> Estimates based on ordinary share capital; <sup>2</sup> Funds managed by MVM Life Science Partners; <sup>3</sup> Combined positions of Apus Capital, Apo AM, Lupus alpha, and others; <sup>4</sup> Combined positions of BPI, AXA Paris and others; <sup>5</sup> Combined positions of U.S.-based funds managed by Deerfield Partners, Armistice Capital, New Leaf, General American, Granite Point and others; <sup>6</sup> Combined positions of Highclere, AXA Investment Managers Ltd. and Abingworth LLP; <sup>7</sup> Combined positions of multiple funds based in Liechtenstein, the Netherlands, Austria, Luxembourg, and Switzerland.

# Key Upcoming Newsflow



## **Lyme disease vaccine candidate VLA15**

- **First Phase 2 data expected July 2020**

## **Chikungunya vaccine candidate VLA1553**

- **Phase 3 initiation (pending FDA confirmation)**

## **New IXIARO® contract with the U.S. Department of Defense expected mid-2020**

## **COVID-19 vaccine candidate expected to enter clinical trials before the end of 2020**

Thank you  
Merci  
Danke  
Tack



# Appendix



# Chikungunya: Vector Prevalence and Disease Outbreaks

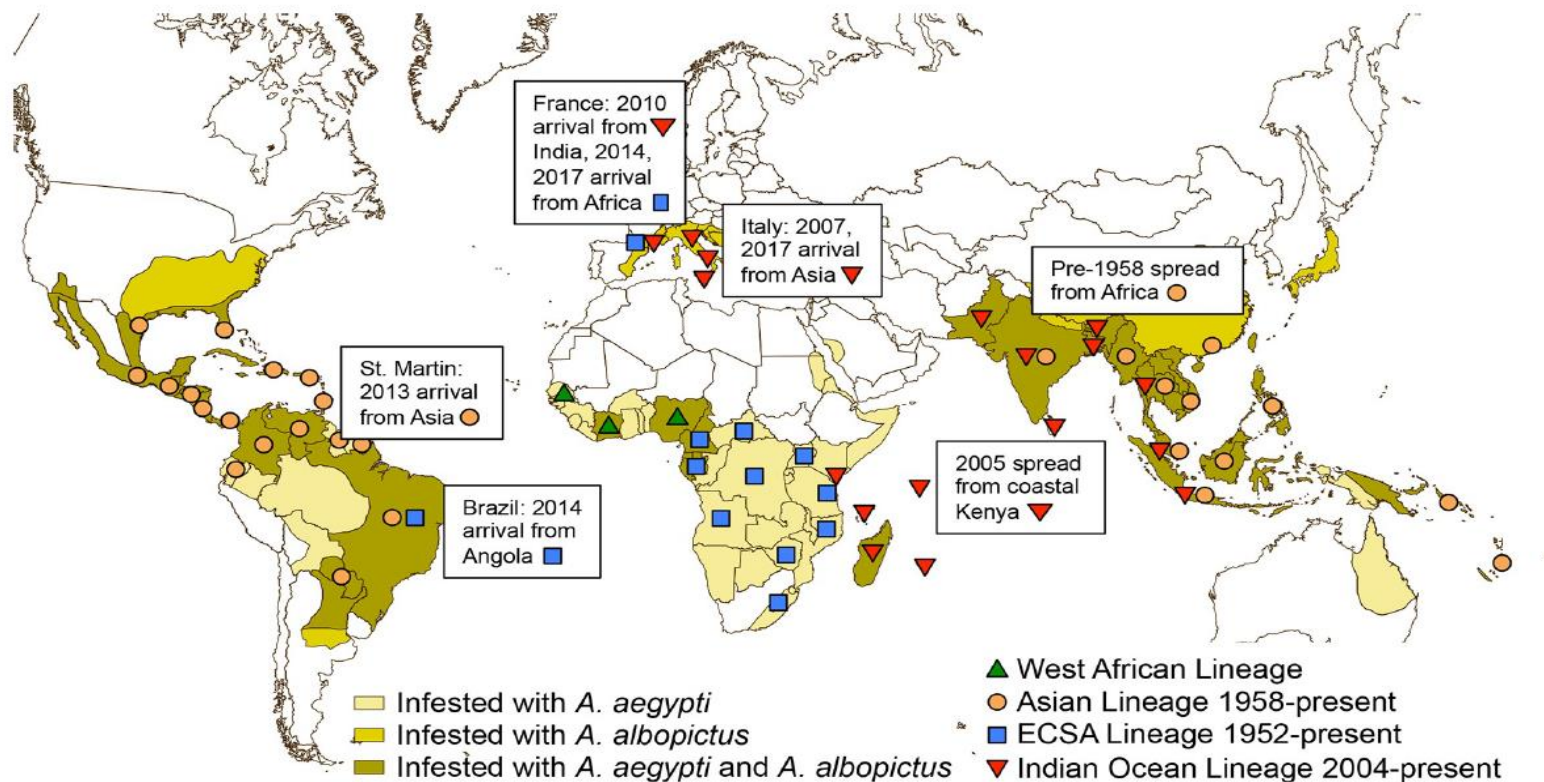


Fig 1. World map with countries where autochthonous (locally initiated) chains of CHIKV transmission have been identified. Data from World Health Organization (<http://www.who.int/emergencies/diseases/chikungunya/en/>) and Pan American Health Organization ([https://www.paho.org/hq/index.php?option=com\\_topics&view=article&id=343&Itemid=40931&lang=en](https://www.paho.org/hq/index.php?option=com_topics&view=article&id=343&Itemid=40931&lang=en)). CHIKV, chikungunya virus.

<https://doi.org/10.1371/journal.pntd.0006919.g001>

Rezza & Weaver 2019



# VLA1553 is Expected to be Highly Differentiated

## Competition overview

|                               | Valneva                                                                                               | Emergent (Paxvax)                 | Themis                                                                                                |
|-------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------|
| <i>Vaccine candidate</i>      | Monovalent, single dose, live-attenuated vaccine candidate                                            | Virus-like particle (VLP) vaccine | Measles-vectored Chikungunya vaccine (MV-CHIK), Live-recombinant vaccine                              |
| <i>Schedule</i>               | Single-shot - Day 0                                                                                   | 2 shots - Day 0 & 28              | 2 shots - Day 0 & 28                                                                                  |
| <i>Development stage</i>      | Phase 1 in US complete (data <u>published</u> )<br><br>No Phase 2 trial needed (single shot efficacy) | Phase 2 completed                 | Multiple Phase 2 studies<br>- 2x completed (in EU/PR)<br>- 1 recruiting<br>- 1 active, not recruiting |
| <i>Duration of protection</i> | 100% seroconversion at <b>13 months</b> following single-dose administration                          | 6 months                          | 6 months                                                                                              |
| <i>Phase 3 Guidance</i>       | <b>Pivotal trial (Phase 3) initiation planned Q4 2020<sup>4</sup></b>                                 | 2020                              | 2020                                                                                                  |

<sup>1</sup> PR Emergent BioSolutions Announces Interim Results From Phase 2 Study Evaluating CHIKV-VLP, Chikungunya Virus Vaccine Candidate ([Link](#)) + Detailed study results Emergent/Paxvax' Phase 2 clinical trial results ([Link](#)), <sup>2</sup> PR Themis Bioscience Publishes Compelling Phase 2 Results for Lead Vaccine Candidate against Chikungunya Fever in The Lancet ([Link](#)) + Themis' Phase 2 clinical trial results: ([Link](#)), <sup>3</sup> PR Valneva reports further positive results for its chikungunya vaccine candidate ([Link](#)); <sup>4</sup> Potential Phase 3 start as soon as the COVID-19 situation permits



## **VLA1553 Key Differentiators**

The only single-shot vaccine candidate for chikungunya today

### **Rapid onset of long-lasting protection**

- Single vaccination is sufficient to induce sustaining, high titer, neutralizing antibodies

### **Cross-protection potential against globally circulating strains**

### **“Intrinsic human viral challenge” provided first indication of efficacy**

### **Full-scale drug substance manufacturing process established at existing in-house FDA licensed facility**

- Product is lyophilized, optimized storage conditions

### **Regulatory approval will be based on an immunological surrogate<sup>1</sup> (Accelerated Approval Pathway)<sup>2</sup>**

### **Manufacturing and commercial infrastructure to produce and commercialize VLA1553 already in place**

<sup>1</sup> Immune marker reasonably likely to predict clinical benefit, as an immunogenicity endpoint in lieu of a clinical endpoint to infer vaccine effectiveness; <sup>2</sup> Valneva PR: [Valneva Reports Positive End-of-Phase 2 Chikungunya Meeting with the U.S. FDA; Sets Stage for Phase 3 Study](#)

