

Q1 2017 RESULTS PRESENTATION

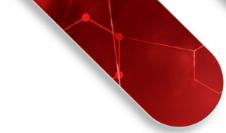
MAY 24TH 2017

LUIGI COSTA, CEO



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Disclaimer

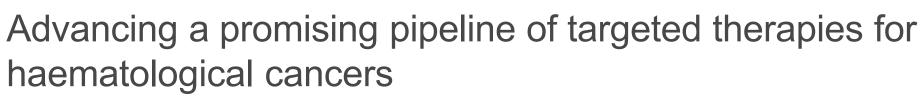
This presentation may contain certain forward-looking statements and forecasts based on uncertainty, since they relate to events and depend on circumstances that will occur in the future and which, by their nature, will have an impact on Nordic Nanovector's business, financial condition and results of operations. The terms "anticipates", "assumes", "believes", "can", "could", "estimates", "expects", "forecasts", "intends", "may", "might", "plans", "should", "projects", "will", "would" or, in each case, their negative, or other variations or comparable terminology are used to identify forward-looking statements. There are a number of factors that could cause actual results and developments to differ materially from those expressed or implied in a forward-looking statement or affect the extent to which a particular projection is realised. Factors that could cause these differences include, but are not limited to, implementation of Nordic Nanovector's strategy and its ability to further grow, risks associated with the development and/or approval of Nordic Nanovector's products candidates, ongoing clinical trials and expected trial results, the ability to commercialise Betalutin®, technology changes and new products in Nordic Nanovector's potential market and industry, the ability to develop new products and enhance existing products, the impact of competition, changes in general economy and industry conditions and legislative, regulatory and political factors.

No assurance can be given that such expectations will prove to have been correct. Nordic Nanovector disclaims any obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise.



- Highlights
 - ✓ Continued positive momentum of 2016: All operations on track
 - ✓ Planned pivotal Phase 2 PARADIGME trial on schedule to start in 2H 2017
 - ✓ SRC approved continued evaluation of 20 MBq/kg Betalutin[®] with 100 mg/m² lilotomab in a Phase 2 expansion cohort in Arm 4
 - ✓ First patient dosed with Betalutin® in Phase 1 dose-escalation study in DLBCL
 - ✓ Decision to initiate Phase 2 studies of Betalutin® + rituximab in 2L FL in 2H 2017
 - ✓ Decision to initiate Phase 1 study of Humalutin™ in 2H 2017
 - **✓** Updated results from LYMRIT 37-01 accepted for presentation at ICML in June





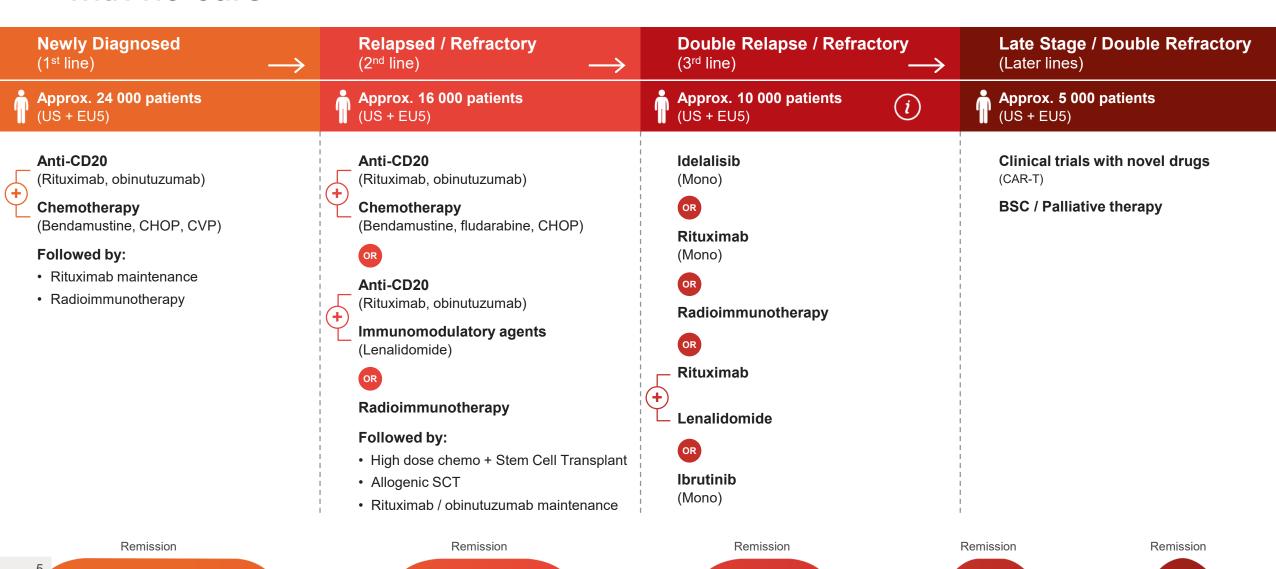
Product	Indication	Discovery	Preclinical	Phase 1	Phase 2	Phase 3
BETALUTIN® currently targeted indications	FL, 3 rd line FL, 2 nd line, combination with rituximab R/R DLBCL, SCT ineligible					
BETALUTIN® LCM indications						
HUMALUTIN™*	NHL, 1 st line					
Chimeric lilotomab with novel Leukaemia, multiple partnered projects payloads (ARCs, ADCs)						
AFFILUTIN	Multiple myeloma					



^{*} Chimeric anti-CD37 ARC LCM: Life Cycle Management

Follicular Lymphoma represents a large unmet medical need with no cure

Relapse



Relapse

Relapse

Relapse

Betalutin® is a novel anti-CD37 ARC specifically designed to treat NHL



DESIGN PROPERTY DIFFERENTIATION

CD37 – a validated target for B-cell NHL

- Highly expressed in B-cells
- Antibody internalization anchors the payload to cancer cells, resulting in prolonged irradiation of the nucleus
- A target ideally suited to be effective for patients previously treated with CD20-based therapies

Lutetium-177 – ideal radionuclide

- Beta-emitting radionuclide with half-life (6.7 days) matching the circulation time of the antibody
- A mean penetration depth of 0.23mm

 Payload properties are well suited for treating NHL while limiting unnecessary side effects

Multi-cell kill approach

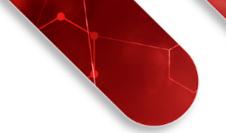
- Localised tumour cell kill (40-cell radius) from irreparable double strand DNA breaks
- Cytotoxic effect on poorly perfused or nonantigen expressing cells
- Expected to deliver better treatment outcomes than anti-CD20 therapies and chemotherapy (single cell kill approach)

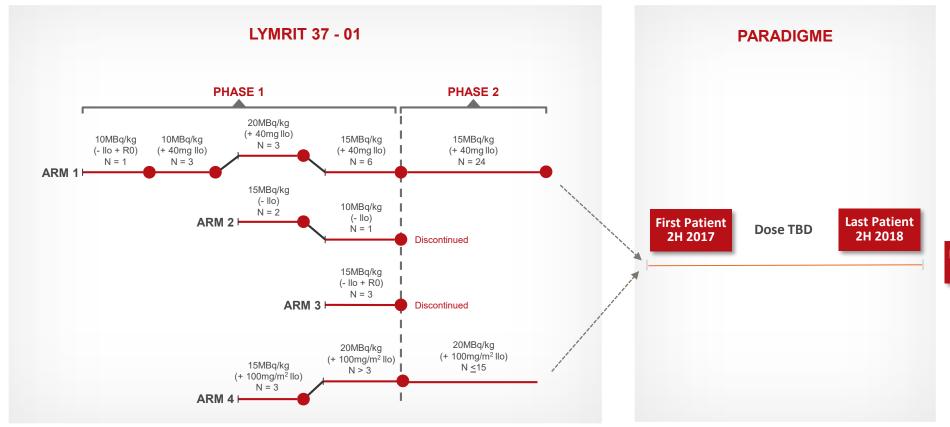
Lilotomab pre-dosing

- Optimises Betalutin[®] binding to CD37 on NHL cells
- Binds CD37 on B-cells and blocks Betalutin[®] binding – minimises side effects
- Enhances attractiveness of CD37 as target for new NHL therapy



Betalutin®'s Phase 1/2 study in iNHL will enable the selection of optimal dosing regimen for pivotal Phase 2





Regulatory submission 1H 2019

MBq: Megabecquerel; llo: lilotomab; R0: rituximab predosing on day 0;

Completed step (all patients enrolled).





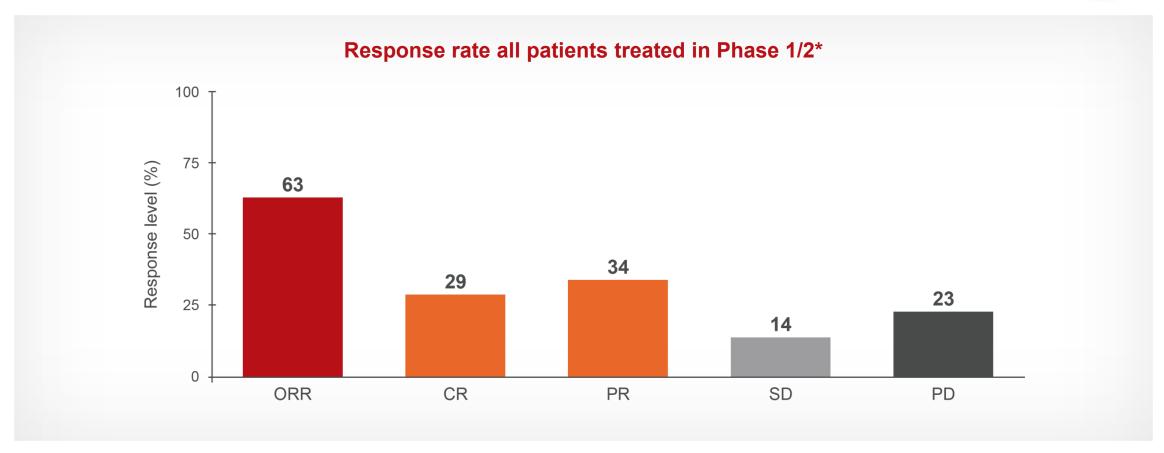


- Concluded review of safety data from Arm 4, Phase 1 in LYMRIT 37-01
- SRC approves 20 MBq/kg Betalutin® with 100 mg/m² lilotomab in a Phase 2 expansion cohort in Arm 4
- Building a robust database of safety and efficacy data
- PARADIGME on track to start with optimal dosing regimen in 2H 2017



ASH 2016 update: Tumour response rates confirm Betalutin®'s potential to deliver clinical benefits





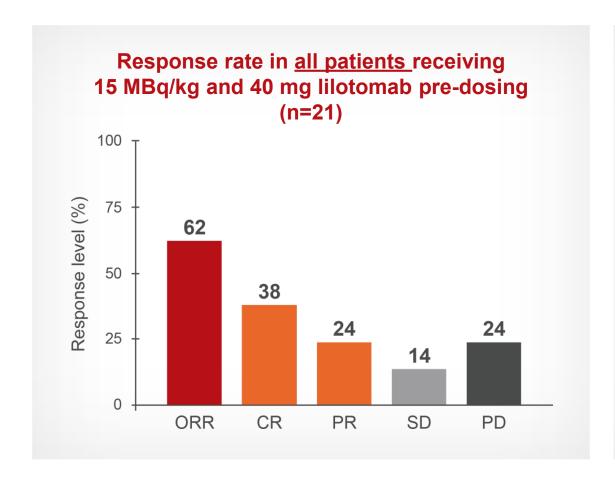
ORR = Overall response rate, CR = Complete response, PR = Partial response, SD = Stable disease, PD = Progressive disease. Tumour response assessed according to Cheson criteria 2007. One patient with a transformed lesion has been excluded from the efficacy analysis of the 15 MBq/kg group but included in the incidence of DLTs.

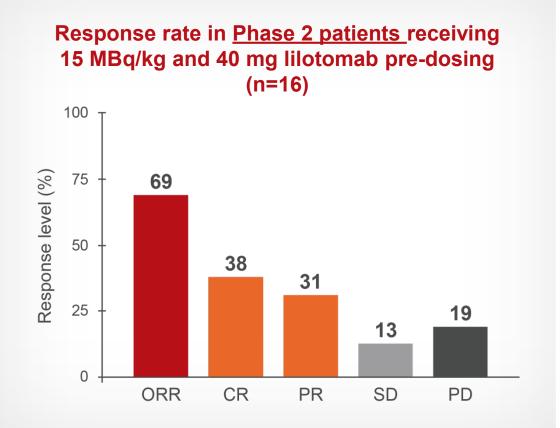
ASH 2016, Poster version of the Abstract 1780, Prof. A Kolstad et al.

NORDIC NANOVECTOR

The efficacy of Betalutin® 15 MBq/kg with 40 mg lilotomab pre-dosing was confirmed in Phase 2

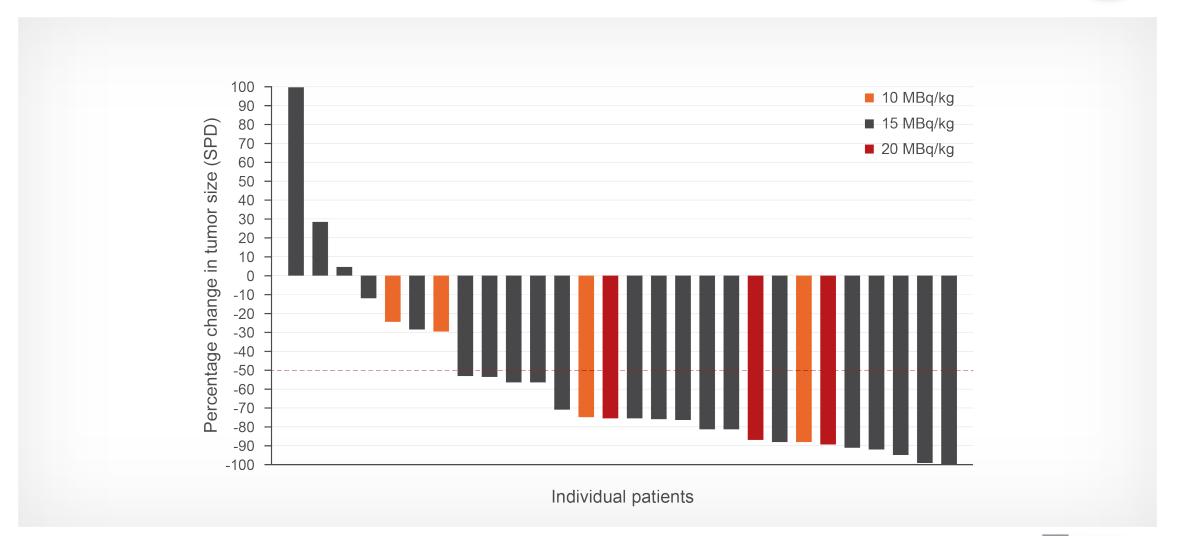






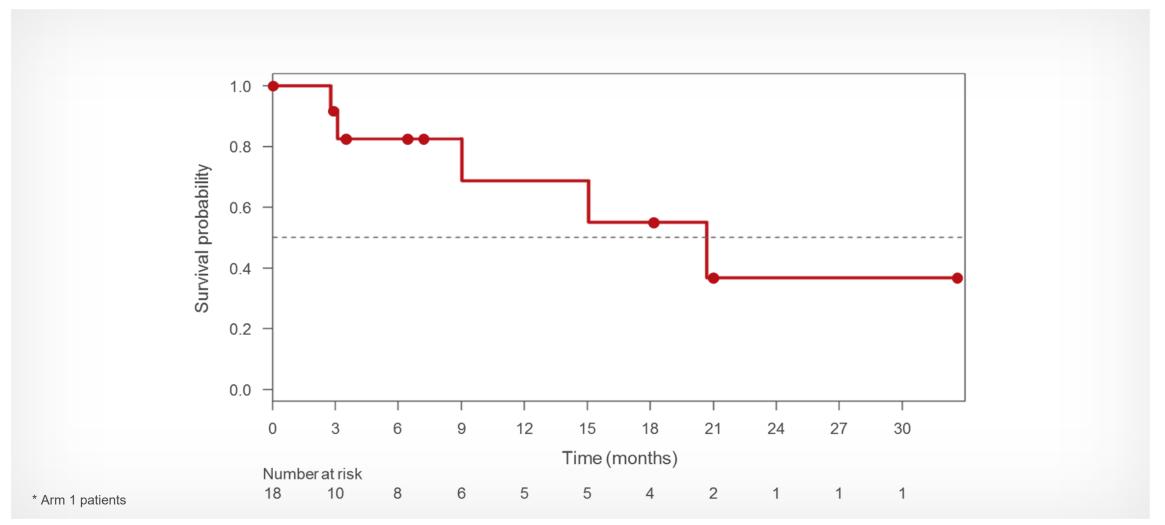


89% of patients showed tumour reduction



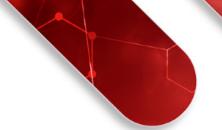


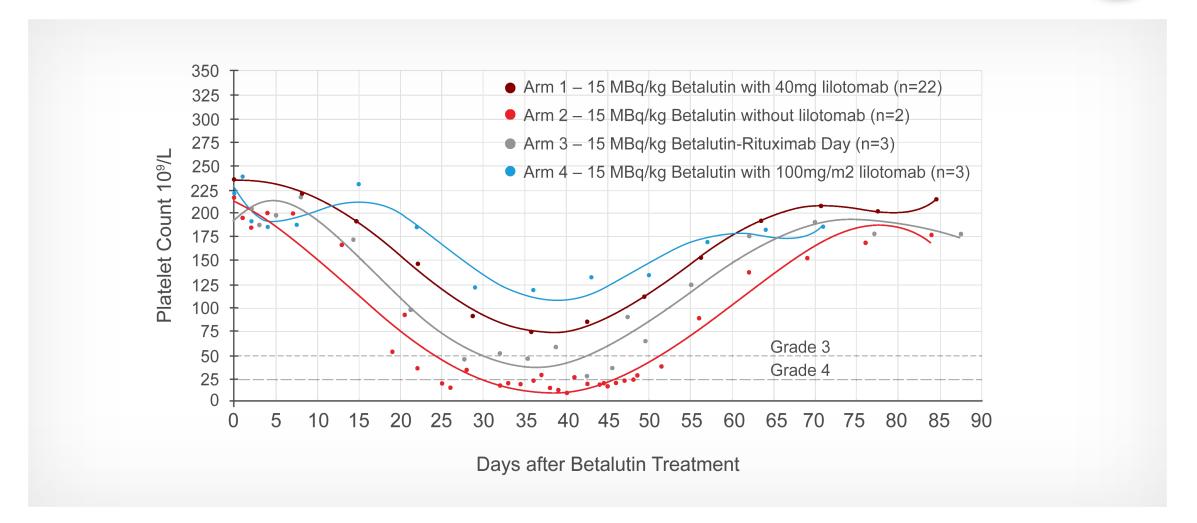
Median DOR* of 20.7 months in heavily pretreated patients





A higher lilotomab pre-dosing regimen may protect against haematologic toxicity

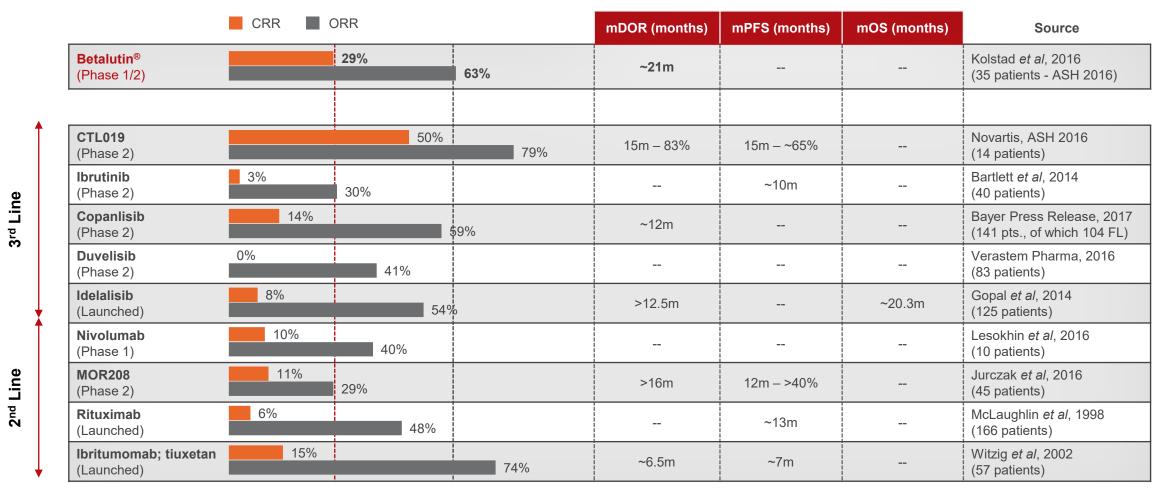






Betalutin® as a single agent holds significant edge over existing and upcoming competitors in R/R FL

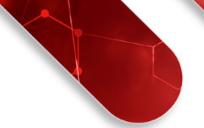




Results from different trials for comparison purpose only and NOT head to head studies



Betalutin® has a unique value proposition in iNHL based on important differentiating factors



Alternative target



Alternative target (CD37) ideal for patients who progress after rituximab (anti-CD20)-based regimens

High and durable response*



- **Higher Complete Response** than currently known competitors, as a single agent
- Sustained Duration of Response in heavily pre-treated patients

Predictable and manageable toxicity*



- Generally well tolerated
- Predictable, transient and reversible cytopenias

Convenience for patients and physicians



- One-time therapy: 100% patient compliance and superior convenience
- No repeat visits to cancer centre: improved QoL for patient
- Optimised healthcare resource utilisation

Combination potential



• Potential synergy from combination with anti-CD20 mAbs and others



We are already planning for a successful commercialisation



• Explore **optimal dosing regimen/other measures to maximise efficacy**, e.g. predictive biomarkers, selected subpopulations

Develop and communicate Betalutin®'s story

- Leverage KOLs from leading academic institutions
- Deploy medical education and conference programs
- Create great patient cases and communicate benefits to patients

Improve patients' access to Betalutin®

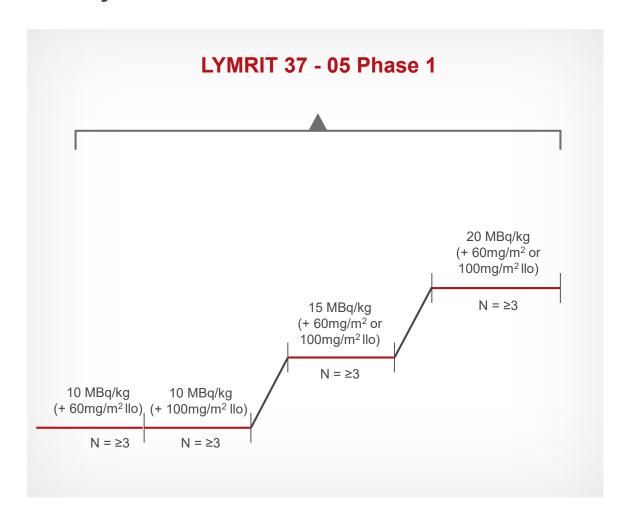
- Launch at Academic Centers and Regional Healthcare Networks
- Establish Betalutin®'s Centres of Excellence
- Optimize Betalutin®'s referral pathway
- Utilise mobile NucMed team to administer product in remote areas

Communicate positive customer experience

- Develop easy and efficient process for ordering and dispensing Betalutin[®]
- Communicate to target audience how **easy the process is** (videos, toolkits)



First patient dosed with Betalutin® in Phase 1 dose escalation study in DLBCL

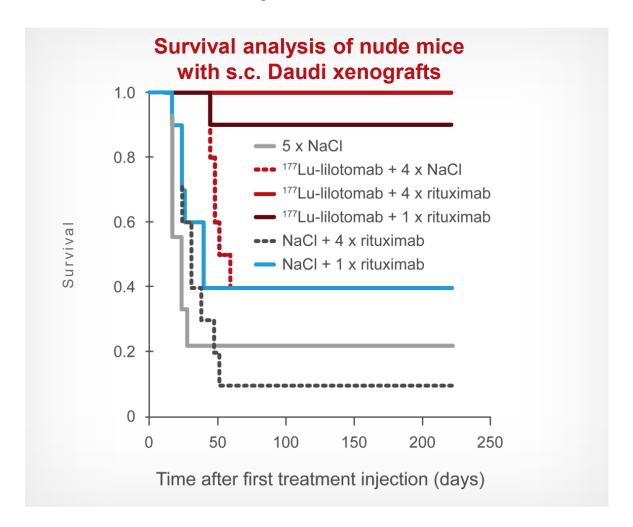


- One of the most common forms of NHL with unmet medical need
- Phase 1 open label, single injection, ascending dose study
 - Investigate various Betalutin[®] doses and lilotomab pre-dosing regimens in up to 24 patients
 - The study is open for enrolment in the US and Europe
 - Objective to identify an optimal dosing regimen for Phase 2



Synergistic effect of Betalutin® in combination with rituximab in a preclinical NHL model*

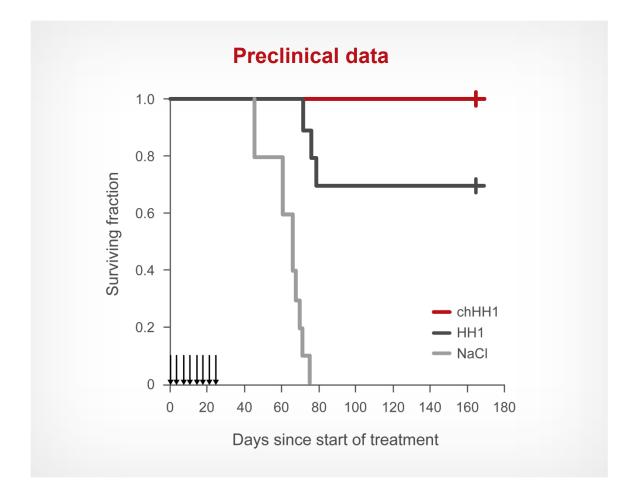




- Betalutin[®] increased binding of rituximab to NHL cells and uptake of rituximab in NHL tumours
- Strong synergistic effect of combination of Betalutin[®] and rituximab on survival of mice with NHL (Hazard ration = 0.024, Cox regression)
- Median survival time in combination: >222 days (p < 0.05)
- Median survival time with either treatment alone was 31 - 40 days with rituximab or 50 days with Betalutin[®]
- Plan to advance into Phase 2 clinical studies in 2H 2017





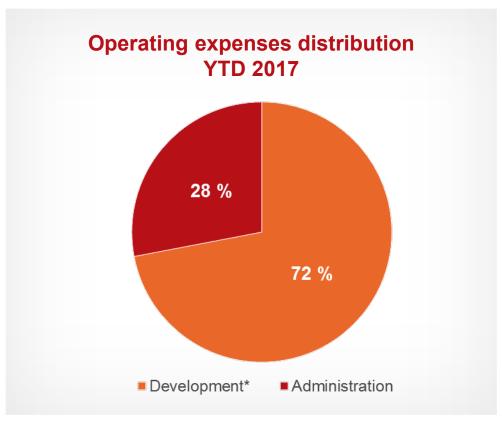


- Preclinical studies confirm potential
 - Less immunogenic potential for repeat dosing in NHL patients
 - Similar specificity to human lymphoid tissues as lilotomab
 - Higher antibody dependent cellular cytotoxicity (ADCC)
- First clinical trial expected to start in 2H 2017



Operating loss reflecting focus on development





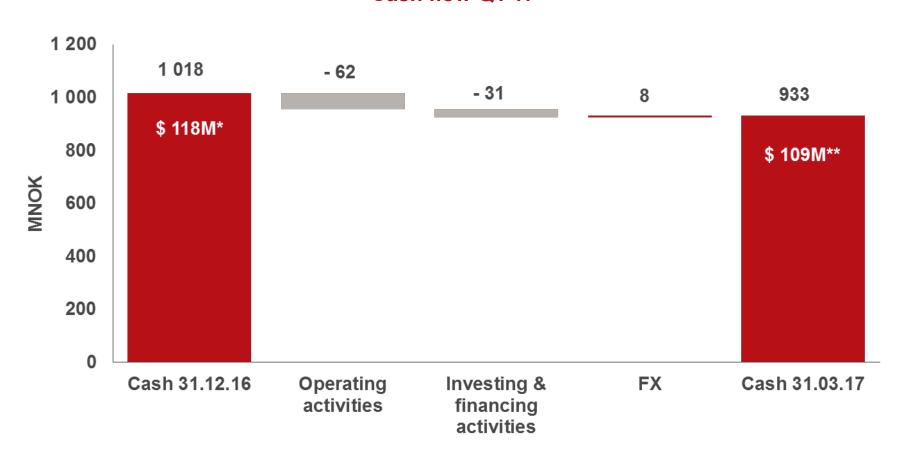
Operating expenses impacted by clinical trials, preclinical R&D and commercial preparation



Solid cash position, expected to be sufficient beyond planned first regulatory submission for Betalutin[®] in FL



Cash flow Q1'17







✓	2H 2016	Betalutin [®] in FL	First patient treated in Arms 3 and 4 in Phase 1/2 FL study
✓	2H 2016	Betalutin [®] in FL	Dose escalation in Arm 4 in Phase 1/2 FL study
✓	2H 2016	Betalutin [®] in DLBCL	Initiated DLBCL clinical programme
✓	2H 2016	Pipeline	Exploratory ADC collaborations
✓	1H 2017	Betalutin® in DLBCL	First patient treated in DLBCL study
✓	1H 2017	Betalutin [®] in FL	SRC approval for continued evaluation of 20 MBq/kg Betalutin [®] with 100 mg/m ² lilotomab



Key milestones anticipated through 2018

2H 2017	Betalutin [®] in FL	First patient treated in PARADIGME study
2H 2017	Betalutin [®] in FL	Start of clinical study of Betalutin®/rituximab combo in 2L FL
2H 2017	Humalutin™	Start of clinical study of Humalutin™ in NHL
2H 2018	Betalutin [®] in FL	Preliminary read out of clinical study of Betalutin®/rituximab combo in 2L FL
2H 2018	Betalutin [®] in DLBCL	Preliminary read out of DLBCL Phase 1 study
2H 2018	Betalutin [®] in FL	Preliminary read out of PARADIGME study

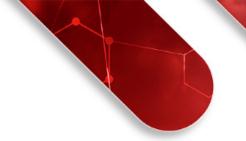


Summary and outlook

- All operations on track
- PARADIGME on schedule to start in 2H 2017
- Phase 2 expansion cohort in Arm 4 with 20 MBq/kg Betalutin[®] with 100mg/m²
 open for enrolment
- Promising competitive profile for Betalutin[®]
- First patient dosed with Betalutin® in Phase 1 DLBCL study
- Decisions to initiate two new studies in 2H 2017
- Current cash resources expected to be sufficient to take the company beyond the planned first regulatory submission for Betalutin[®] in FL



Upcoming Financial Events



Q2 2017 Results

August 23rd, 2017

Capital Markets Day, Oslo

September 27th, 2017

Q3 2017 Results

November 22nd, 2017





Nordic Nanovector's mission is to extend and improve the lives of patients with haematological cancers by developing and commercialising innovative Antibody Radionuclide Conjugates (ARC)

Nordic Nanovector ASA

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Glossary

1L, 2L, 3L: first, second and third line of treatment

ADC: Antibody-Drug Conjugate

ARC: Antibody-Radionuclide-Conjugate

(A)SCT: (Autologous) stem cell transplant

ASH: American Society of Hematology

B-cell: A type of lymphocyte (white blood cell) in the humoral immunity of the body's adaptive immune system. Can be distinguished from other lymphocytes by the presence of a protein on the B-cell's outer surface known as a B cell receptor (BCR). This specialised receptor protein allows a B-cell to bind to a specific antigen.

CD20: B-lymphocyte antigen CD20 is an activated-glycosylated phosphoprotein expressed in the surface of all

B-cells beginning at the pro-B phase and progressively increasing in concentration until maturity

CD37: B-lymphocyte antigen CD-37 is a protein, a member of the transmembrane 4 superfamily, also known as the tetraspanin superfamily of cell surface antigens

CR: Complete response

DLBCL: Diffuse Large B-Cell Lymphoma

FL: Follicular Lymphoma

FDA: Food and Drug Administration

Humalutin™: Chimeric anti-CD37 ARC

IFRS: International Financial Reporting Standard

IND: Investigational New Drug

iNHL: Indolent non-Hodgkin Lymphoma

IPO: Initial Public Offering

KOL: Key opinion leader

LCM: Lifecycle management

Lilotomab: Betalutin® consists of the radionuclide lutetium-177 conjugated to the B-cell seeking anti-CD37 antibody lilotomab (formerly referred to as HH1).

¹⁷⁷**Lu:** Radionuclide lutetium-177

mAb: Monoclonal antibody

MBq: Megabecquerel (radioactivity measurement unit)

MD: Medical doctor

nASCT: Not eligible for autologous stem cell transplant

NNV003: chimeric anti-CD37 antibody developed by Nordic Nanovector



Glossary, cont.

NHL: non-Hodgkin's Lymphoma

OSE: Oslo Stock Exchange

ORR: Overall response rate (the CR and PR, jointly)

PARADIGME: Name of Nordic Nanovector's pivotal Phase 2 study

PFS: Progression free survival

PR: Partial response

QoL: Quality of life

R: rituximab

RIT: Radioimmunotherapy

SAB: Scientific Advisory Board

SD: Stable disease

SRC: Safety Review Committee

T-cell: A type of lymphocyte (white blood cell) that plays a central role in cell-mediated immunity. Can be distinguished from other lymphocytes by the presence of a T-cell receptor (TCR) on the cell surface. They are called T-cells because they mature in the thymus.

