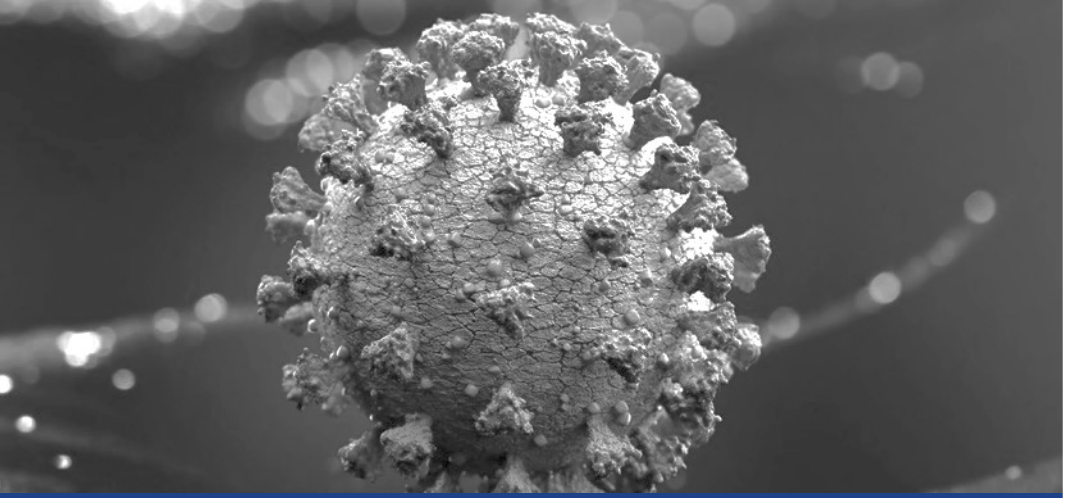
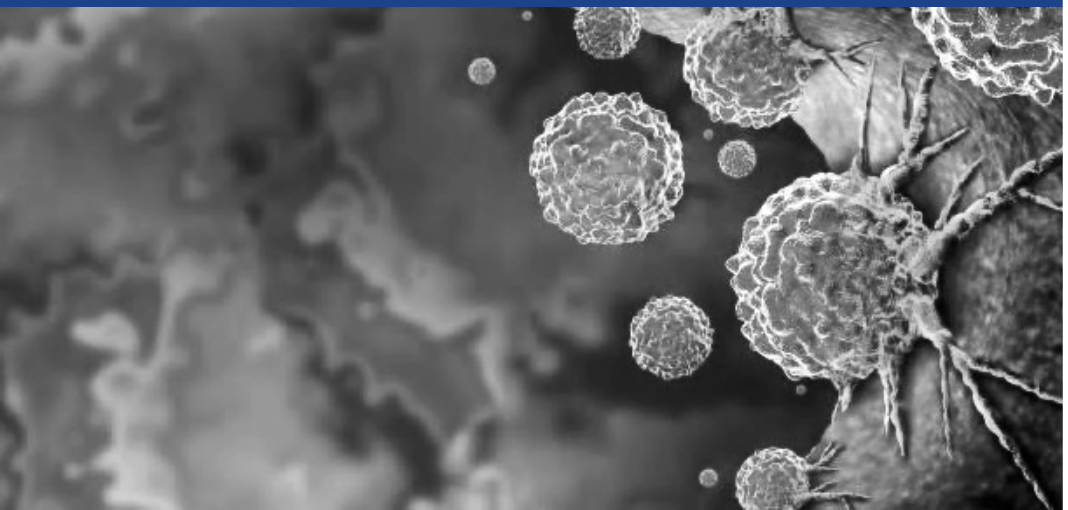


ImmunityBio®



ImmunityBio Investor Presentation

January 2025

Forward-Looking Statements and Intended Use

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, such as statements regarding data and results from clinical trials and potential implications therefrom, commercialization plans and timelines, including product availability and shipments, potential regulatory pathways and approval requests and submissions, FDA, UK MHRA, EU EMA and other regulatory agency meetings, timelines and potential results therefrom, global expansion efforts, the collaboration between ImmunityBio and the Serum Institute of India and expected results therefrom, the regulatory review process and timing thereof, market and prevalence data, potential benefits to patients, potential treatment outcomes for patients, the described mechanism of action and results and contributions therefrom, information regarding potential benefit to patients, information regarding ongoing pre-clinical studies and clinical trials, potential future uses and applications of ANKTIVA and use in cancer vaccines and across multiple tumor types, methods, ImmunityBio's financial condition, and ImmunityBio's approved product and investigational agents as compared to existing treatment options, among others. Statements in this presentation that are not statements of historical fact are considered forward-looking statements, which are usually identified by the use of words such as "anticipates," "believes," "continues," "goal," "could," "estimates," "scheduled," "expects," "intends," "may," "plans," "potential," "predicts," "indicate," "projects," "seeks," "should," "will," "strategy," and variations of such words or similar expressions. Statements of past performance, efforts, or results of our preclinical and clinical trials, about which inferences or assumptions may be made, can also be forward-looking statements and are not indicative of future performance or results. Forward-looking statements are neither forecasts, promises nor guarantees, and are based on the current beliefs of ImmunityBio's management as well as assumptions made by and information currently available to ImmunityBio. Such information may be limited or incomplete, and ImmunityBio's statements should not be read to indicate that it has conducted a thorough inquiry into, or review of, all potentially available relevant information. Such statements reflect the current views of ImmunityBio with respect to future events and are subject to known and unknown risks, including business, regulatory, economic and competitive risks, uncertainties, contingencies and assumptions about ImmunityBio, including, without limitation, (i) the risks and uncertainties associated with commercial launch execution, success and timing, (ii) risks and uncertainties related to the regulatory submission and review process, (iii) the ability of ImmunityBio to continue its planned preclinical and clinical development of its development programs through itself and/or its investigators, and the timing and success of any such continued preclinical and clinical development, patient enrollment and planned regulatory submissions, (iv) potential delays in product availability and regulatory approvals, (v) risks and uncertainties associated with third party collaborations and agreements, (vi) whether the BCG manufactured by Serum will receive regulatory approval in the U.S. and/or other regions, (vii) ImmunityBio's ability to retain and hire key personnel, (viii) ImmunityBio's ability to obtain additional financing to fund its operations and complete the development and commercialization of its various product candidates, (ix) potential product shortages or manufacturing disruptions that may impact the availability and timing of product, (x) ImmunityBio's ability to successfully commercialize its approved product and product candidates and uncertainties around regulatory reviews and approvals, (xi) ImmunityBio's ability to scale its manufacturing and commercial supply operations for its approved product and future approved products, and (xii) ImmunityBio's ability to obtain, maintain, protect and enforce patent protection and other proprietary rights for its product candidates and technologies. More details about these and other risks that may impact ImmunityBio's business are described under the heading "Risk Factors" in the Company's Form 10-K filed with the U.S. Securities and Exchange Commission ("SEC") on March 19, 2024 and the Company's Form 10-Q filed with the SEC on November 12, 2024, and in subsequent filings made by ImmunityBio with the SEC, which are available on the SEC's website at www.sec.gov. ImmunityBio cautions you not to place undue reliance on any forward-looking statements, which speak only as of the date hereof. ImmunityBio does not undertake any duty to update any forward-looking statement or other information in this press release, except to the extent required by law.

Our product candidates are investigational agents that are restricted by federal law to investigational use only. Except as set forth in specific product approvals, safety and efficacy have not been established by any agency, including the FDA.

This presentation contains references to our trademarks and trademarks belonging to other entities. Solely for convenience, trademarks and trade names referred to in this presentation, including logos, artwork and other visual displays, may appear without the ® or TM symbols, but such references are not intended to indicate, in any way, that we will not assert, to the fullest extent under applicable law, our rights or the rights of the applicable licensor to these trademarks and trade names. We do not intend our use or display of other companies' trade names or trademarks to imply a relationship with, or endorsement or sponsorship of us, by any other companies.

This presentation is intended to provide a company overview and is intended for investor use only. It is not promotional and should not be used with patients or health care professionals.

Mechanism of Action of Anktiva

First-in-Class Overcoming Tumor Evasion by Activation of NK Cells and Rescuing T Cells

Anktiva as the Foundational Cytokine to Overcoming Tumor Evasion by:

Proliferation of NK, CD4+, CD8+ T Cells

Activating NK Cells and IFNy

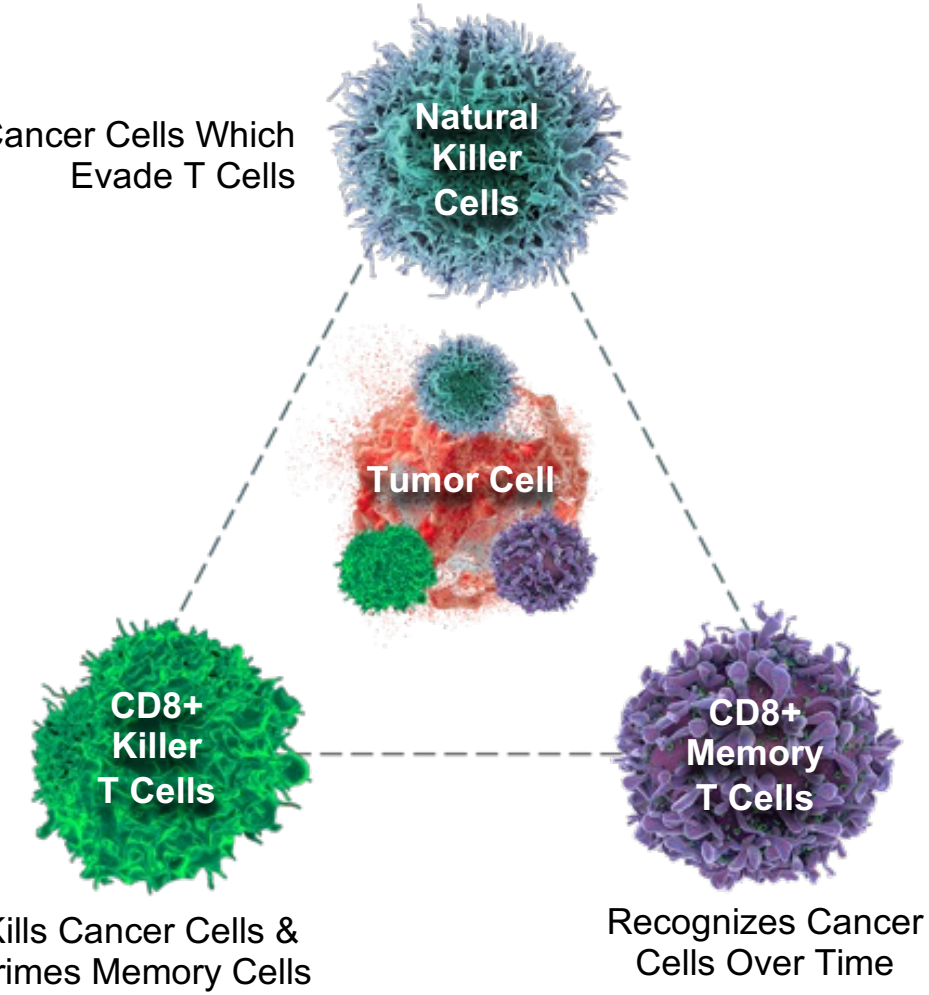
Overcoming Lymphodepletion

Overcoming MHC-I Loss

Converting Cold Tumor to Hot Tumor

While Neupogen (filgrastim) rescues neutrophils, Anktiva rescues lymphocytes

Kills Cancer Cells Which Evade T Cells



Kills Cancer Cells & Primes Memory Cells

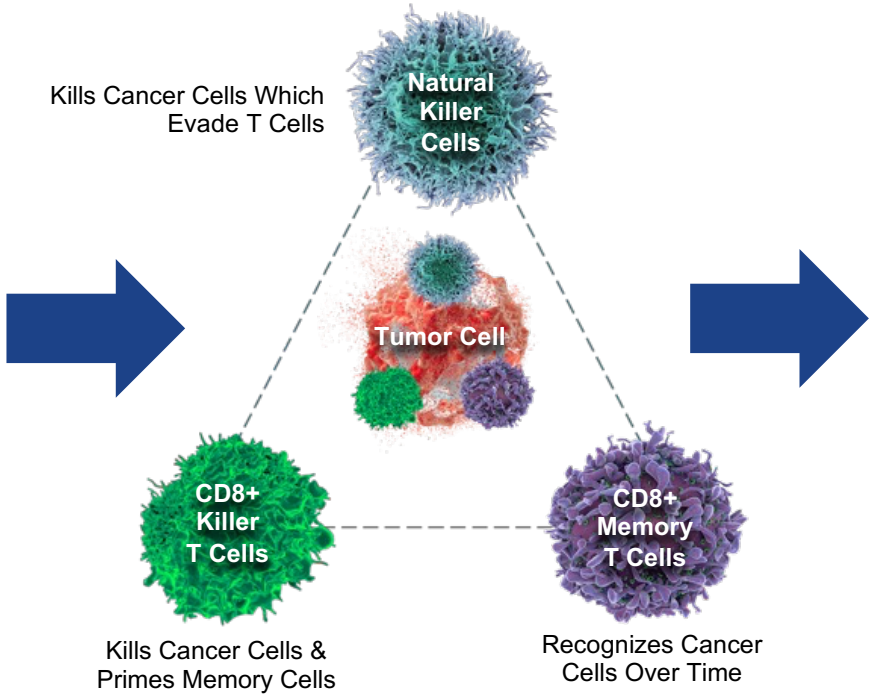
Recognizes Cancer Cells Over Time

ANKTIVA as the Backbone of Immunotherapy 2.0
Beyond Checkpoint Inhibitors

Universal Cancer Immunotherapy Across All Tumor Types



Anktiva



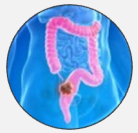
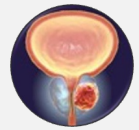
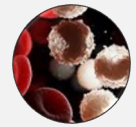
Immunotherapy 2.0: ANKTIVA Combinations

- ❑ **ANKTIVA + BCG APPROVED**
- ❑ **ANKTIVA + Checkpoint Inhibitor**
- ❑ **ANKTIVA + Adenoviral Vaccine**
- ❑ **ANKTIVA + Rituxan**
- ❑ **ANKTIVA + CAR-T/CAR-NK**
- ❑ **ANKTIVA + M-ceNK**

Platforms Orchestrating NK, CD4+, CD8+ Killer T Cells and Memory T Cells for Durable Complete Responses Across Multiple Tumor Types:
The Potential for ANKTIVA to Serve as a Foundational Cytokine for a Universal Cancer Immunotherapy

ANKTIVA as the Backbone Across All Tumor Types

Activating NK Cells and Rescuing T Cells

BLADDER			LUNG	CANCER VACCINE	PROSTATE	LIQUID TUMORS
						
Bladder Cancer BCG Unresponsive CIS	**Bladder Cancer BCG Unresponsive Papillary**	**Bladder Cancer BCG Naïve CIS**	**Lung Cancer Checkpoint Failure**	**Colon Cancer Prevention**	**Prostate Cancer Recurrent**	**Hematologic Malignancies**
ANKTIVA + BCG	**ANKTIVA + BCG**	**ANKTIVA + BCG**	**ANKTIVA + Checkpoint**	**ANKTIVA + TriAd**	**ANKTIVA + hAd5 PSA**	**ANKTIVA + Rituximab**
Approved 2024 • J-Code 9028 • EU EMA Filed • UK MHRA Filed	**Supplemental BLA To Be Filed 2025**	**Interim Analysis Completed 2024**	**BLA Planned Filing 2025**	**Clinical Trial Ongoing** >100 Patients Enrolled	**Clinical Trial 2025**	**Clinical Trial Ongoing**

ANKTIVA as the Backbone Across All Tumor Types

Activating NK Cells and Rescuing T Cells



Bladder Cancer
BCG Unresponsive
CIS

ANKTIVA
+
BCG

Approved
2024

- J-Code 9028
- EU EMA Filed
- UK MHRA Filed



Bladder Cancer
BCG Unresponsive
Papillary

ANKTIVA
+
BCG

Supplemental
BLA To Be
Filed 2025



Bladder Cancer
BCG Naïve
CIS

ANKTIVA
+
BCG

Interim
Analysis
Completed
2024



Lung Cancer
Checkpoint Failure

ANKTIVA
+
Checkpoint

BLA
Planned
Filing 2025

Prostate Cancer
Recurrent

ANKTIVA
+
hAd5 PSA

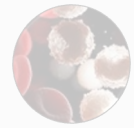
Clinical
Trial
2025

Colon Cancer
Prevention

ANKTIVA
+
TriAd

Clinical
Trial
Ongoing

>100 Patients Enrolled



Hematologic
Malignancies

ANKTIVA
+
Rituximab

Clinical
Trial
Ongoing



ANKTIVA Best-in-Class Complete Response in BCG Unresponsive NMIBC-CIS

ANKTIVA FDA Label Q2 2024
UK MHRA Submission Q4 2024

N=77

62%

New England Journal of Medicine, 2022

N=82

71%

EU EMA Submission Q4 2024
30 Countries

N=100

71%

ANKTIVA Durable Complete Response

Chamie K, et al. IL-15 Superagonist NAI in BCG-Unresponsive Non-Muscle-Invasive Bladder Cancer. NEJM Evid. 2023 Jan;2(1): EVIDoa2200167. doi: 10.1056/EVIDoa2200167.

ANKTIVA Best-in-Class Duration of Response in BCG Unresponsive NMIBC-CIS

Adstiladrin	Pembrolizumab	ANKTIVA
DURATION	DURATION	DURATION
9.7	16.2	47+*
Months	Months	Months & Ongoing
		Median Not Reached



DURATION is the key efficacy element to avoidance of cystectomy

* N=77, FDA Label

Data from Individual Registration Trials and Package Inserts with No Direct Comparisons of Trials
Data from each respective FDA Approved product label

ANKTIVA Safety Comparable to BCG Alone[1, 2, 3]

0% - 3.4%

Grade 3 & 4
Adverse Events [1]

0%

Grades 3 & 4*
Dysuria, Urinary Frequency and
Micturition Urgency [1]

0%

Treatment Related
Grade 5 AEs [1, 3]

Safety and Tolerability
Consistent with
BCG Alone [2]



7%

Treatment Related
Discontinuation [1]

The AE profile is consistent with PK results:
No systemic absorption with local intravesical administration [1]

Adverse reactions (≥5%) resulting in interruption with ANKTIVA plus BCG were UTI (10%), dysuria (8%), hematuria (6%), and bladder irritation (6%) [1]

The most common (≥15%) adverse reactions, including laboratory test abnormalities, were increased creatinine, dysuria, hematuria, urinary frequency, micturition urgency, urinary tract infection, increased potassium, musculoskeletal pain, chills and pyrexia. [1]

*Serious adverse reactions occurred in 16% of patients receiving Anktiva with BCG

1. ANKTIVA Package Insert. ImmunityBio, Inc. 2024. 2. Chamie K, et al. IL-15 Superagonist NAI in BCG-Unresponsive Non-Muscle-Invasive Bladder Cancer. NEJM Evid. 2023 Jan;2(1): EVIDoa2200167. doi: 10.1056/EVIDoa2200167. 3. One death reported due to a cardiac arrest that was unrelated to ANKTIVA + BCG.

ANKTIVA Launch First 6 Months Since Approval

1. ANKTIVA Approval April 2024



2. Anktiva Launched May 2024

3. NCCN Guidelines Approval May 2024

4. J-Code 9028, Effective Jan 2025

5. Global Submissions: UK Nov 2024: EU Dec 2024:

Market Access: 240 Million Medical Lives Covered as of November 2024

Florida Blue
VA U.S. Department of Veterans Affairs
CVS caremark
cigna healthcare
EXPRESS SCRIPTS
KAISER PERMANENTE
United Healthcare
CENTENE Corporation
Horizon
HIGHMARK
Humana
HCSC Health Care Service Corporation
ucare
Anthem
of Tennessee
Independence
Optum
Blue Cross Blue Shield of Michigan
Elevance Health
EmblemHealth
BlueCross BlueShield of North Dakota
aetna COVENTRY
Blue Cross Blue Shield of Hawai'i
BlueCross BlueShield of North Carolina
BlueCross BlueShield of Alabama
BlueCross BlueShield Minnesota

ANKTIVA
No Change in Urology Order & BCG Administration Workflow

- ✓ One Day Delivery
- ✓ No Special Cleaning Agents
- ✓ 36 Month Shelf Life
- ✓ No Change in BCG Workflow
- ✓ No Special Freezers
- ✓ Same Order Flow as BCG

ANKTIVA as the Backbone Across All Tumor Types

Activating NK Cells and Rescuing T Cells



Bladder Cancer
BCG Unresponsive
CIS

ANKTIVA
+
BCG

Approved
2024

- J-Code 9028
- EU EMA Filed
- UK MHRA Filed



Bladder Cancer
BCG Unresponsive
Papillary

ANKTIVA
+
BCG

Supplemental BLA To Be Filed 2025



Bladder Cancer
BCG Naïve
CIS

ANKTIVA
+
BCG

Interim
Analysis
Completed
2024



Lung Cancer
Checkpoint Failure

ANKTIVA
+
Checkpoint

BLA
Planned
Filing 2025

Prostate Cancer
Recurrent

ANKTIVA
+
hAd5 PSA

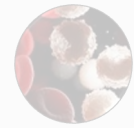
Clinical
Trial
2025

Colon Cancer
Prevention

ANKTIVA
+
TriAd

Clinical
Trial
Ongoing

>100 Patients Enrolled



Hematologic
Malignancies

ANKTIVA
+
Rituximab

Clinical
Trial
Ongoing

Anktiva + BCG in BCG-Unresponsive Papillary NMIBC

Summary of Efficacy and Prolonged Cystectomy Avoidance in BCG-Unresponsive Patients with Papillary Disease (NEJM)

72 Evaluable Patients with BCG Unresponsive Papillary Disease

- **Primary Endpoint Met**
- **Disease Free Rate**:
  - **12 Months: 55.4%** (95% CI=42.0% to 66.8%)
  - **18 Months: 51.1%** (95% CI=37.6% to 63.1%)
  - **24 Months: 48.3%** (95% CI=34.5% to 60.7%)
- **Cystectomy Avoidance: 93%** with median follow up 20.7 months
- Current SOC for BCG Unresponsive Papillary is Radical Cystectomy

NEJM Evidence

Supplemental BLA Plans to Submit in 2025

ANKTIVA as the Backbone Across All Tumor Types

Activating NK Cells and Rescuing T Cells



Bladder Cancer BCG Unresponsive CIS

ANKTIVA + BCG

Approved 2024

- J-Code 9028
- EU EMA Filed
- UK MHRA Filed



Bladder Cancer BCG Unresponsive Papillary

ANKTIVA + BCG

Supplemental BLA To Be Filed 2025



Bladder Cancer BCG Naïve CIS

ANKTIVA + BCG

Interim Analysis Completed 2024



Lung Cancer Checkpoint Failure

ANKTIVA + Checkpoint

BLA Planned Filing 2025

Prostate Cancer Recurrent

ANKTIVA + hAd5 PSA

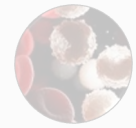
Clinical Trial 2025

Colon Cancer Prevention

ANKTIVA + TriAd

Clinical Trial Ongoing

>100 Patients Enrolled



Hematologic Malignancies

ANKTIVA + Rituximab

Clinical Trial Ongoing

ANKTIVA + BCG in the NMIBC BCG Naïve Setting Durable Complete Response and Disease Free ≥ 9.5 Years

QUILT-205 Trial[1, 2]

- **Complete Response and Disease Free in 9 out of 9 (100%) 2-year trial**
- 6 out of 9 were evaluable in 2023
- 2 subjects died of natural causes independent of bladder cancer
- 1 lost to follow up
- All 6 out of 6 (100%) remain in complete response (CIS) or disease free (Papillary) for >9.5 years
- **All 6 patients avoided cystectomy for >9.5 years**

As of 2024

6 out of 6 (100%) Remain Disease Free

≥ 9.5 Years

Conclusion: ANKTIVA + BCG in BCG Naïve Patients Results in Durable Complete Response with Quality of Life and Adverse Events Consistent with BCG Alone

1. Adapted From Rosser CJ, et al., Safety, Tolerability, and Long-Term Clinical Outcomes of an IL-15 analogue (N-803) Admixed with Bacillus Calmette-Guérin (BCG) for the Treatment of Bladder Cancer. Oncoimmunology. 2021 May 2. Data on File

Pivotal Phase 3 Trial of ANKTIVA in NMIBC BCG Naïve Interim Analysis

Trial Design

BCG Alone N=188 **Vs.** **ANKTIVA + BCG N=188**

FDA Randomized Control Trial Cohort A

FDA Requested Interim Analysis (n=43)

BCG Alone 52% CR **Vs.** **ANKTIVA + BCG 84% CR**

Data on File, BLA Submission at 9 months, FDA Interim Analysis Requested

Status Update

- Ongoing recruitment
- Expanding internationally beyond US
- Trial live in India and in process of going live in Europe

Potential Courses of Treatment in BCG Naïve Same as Current FDA Label for BCG Unresponsive (Up to 36 Doses Over 37 Months)

Addressing Alternative Source of BCG

Discussion with FDA for Regulatory Guidance for Market Access - January 2025

ImmunityBio, Serum Institute of India Agree on an Exclusive Arrangement for Global Supply of Bacillus Calmette-Guerin (BCG) Across All Cancer Types

Thursday, May 2, 2024

- Collaboration will result in BCG manufacture at large scale for use in combination with ANKTIVA®, ImmunityBio's recently approved treatment for non-muscle invasive bladder cancer (NMIBC)



ANKTIVA as the Backbone Across All Tumor Types

Activating NK Cells and Rescuing T Cells



Bladder Cancer
BCG Unresponsive
CIS

ANKTIVA
+
BCG

Approved
2024

- J-Code 9028
- EU EMA Filed
- UK MHRA Filed



Bladder Cancer
BCG Unresponsive
Papillary

ANKTIVA
+
BCG

Supplemental
BLA To Be
Filed 2025



Bladder Cancer
BCG Naïve
CIS

ANKTIVA
+
BCG

Interim
Analysis
Completed
2024



Lung Cancer
Checkpoint Failure

ANKTIVA
+
Checkpoint

BLA
Planned
Filing 2025

Prostate Cancer
Recurrent

ANKTIVA
+
hAd5 PSA

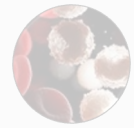
Clinical
Trial
2025

Colon Cancer
Prevention

ANKTIVA
+
TriAd

Clinical
Trial
Ongoing

>100 Patients Enrolled

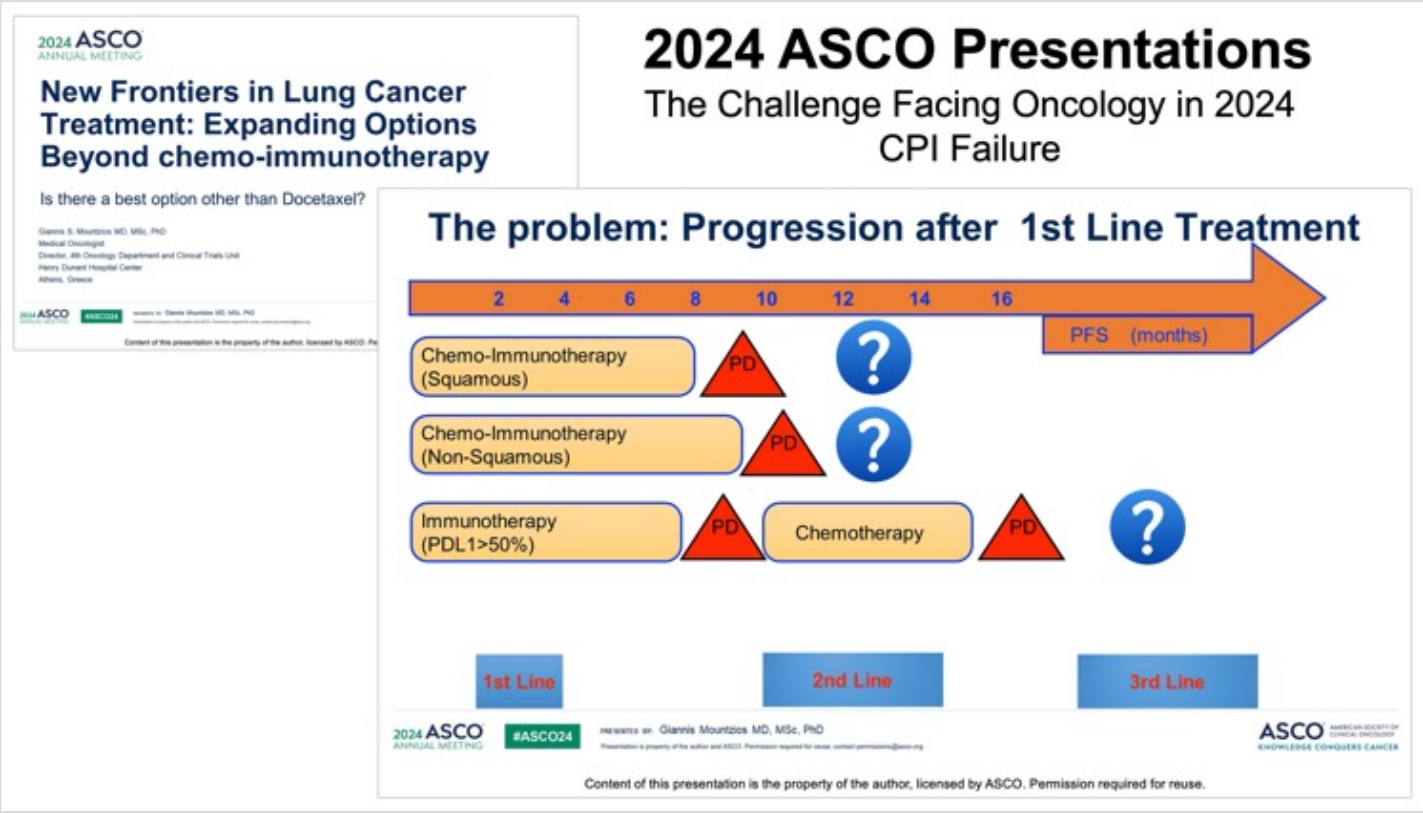


Hematologic
Malignancies

ANKTIVA
+
Rituximab

Clinical
Trial
Ongoing

Checkpoint Failures in Lung Cancer: The Oncology Challenge in 2025



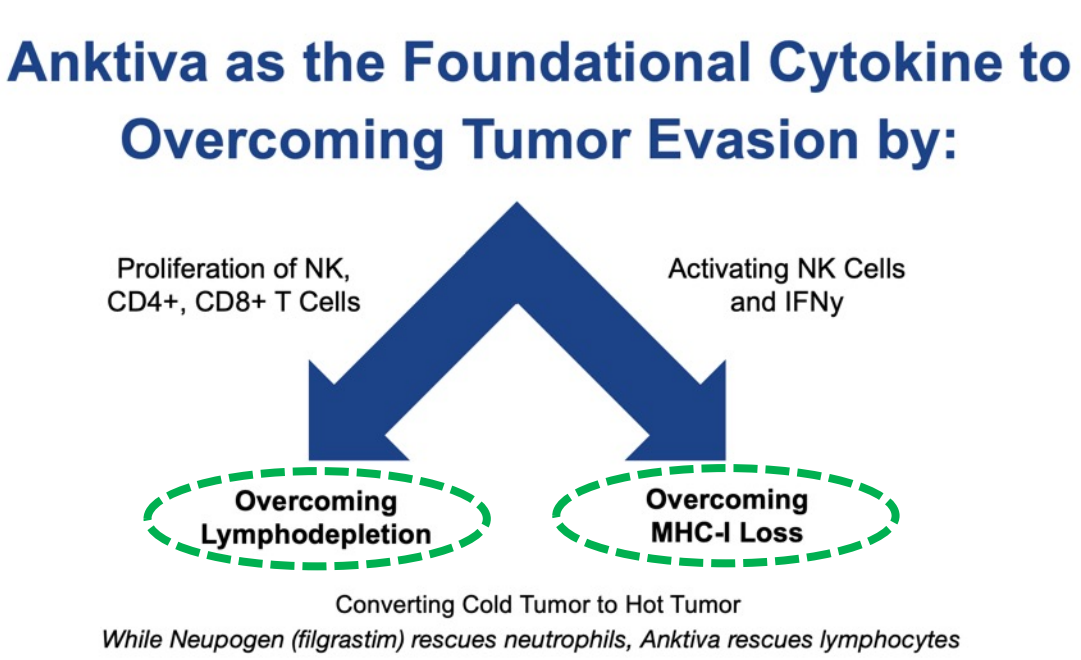
The challenge facing oncology in 2024 CPI failures

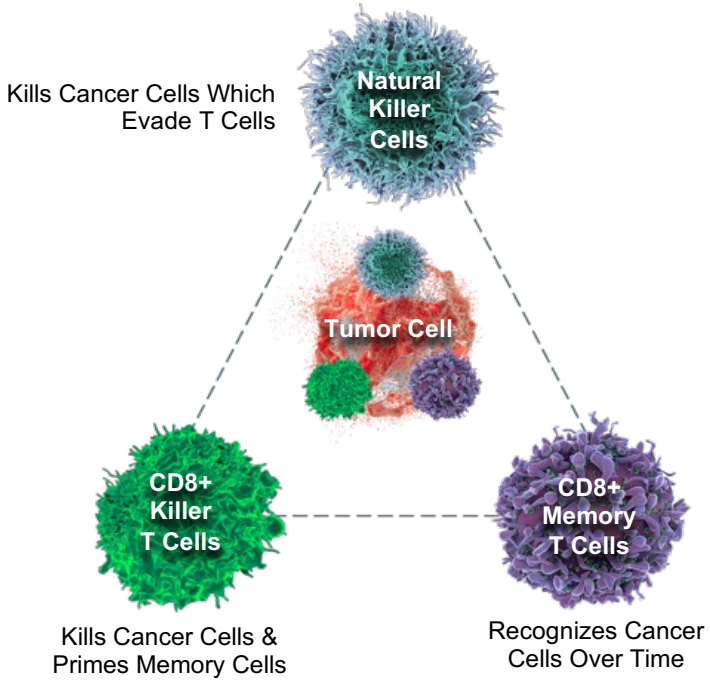
NSCLC: Current SOC patients progressing after checkpoint therapy +/- chemotherapy have a dismal prognosis

- Overall survival ≤ 10 months
- Treatment options are limited
- NCCN does not recommend retreatment with checkpoint therapy after checkpoint failure

QUILT 3.055: Second / Third Line NSCLC
ANKTIVA Activity in NSCLC Checkpoint Progressors

Findings support the novel immune-mediated mechanism of action of ANKTIVA (rescuing T cells and CPI) to rescue CPI in patients who had progressed on CPI: Converting Cold Tumors to Hot





2025 Plan: BLA Submission of QUILT-3.055 Study (N=83) with Confirmatory Randomized Trial (ResQ201A-NSCLC)

QUILT 3.055: Second / Third Line NSCLC
ANKTIVA Activity in NSCLC Checkpoint Progressors

Study Design:

Anktiva + Checkpoint (CPI) Without Intervening Therapy in Patients Progressing on Same CPI

Endpoint:

Median Overall Survival

Results: N=86

- Median OS: **14.1 months** (95% CI 11.7, 16.3) with 24 pts still on study
- In **PD-L1-ve** patients, the median overall survival was **15.8 months** (95% CI: 11.5, 24.0)
- Rescue in **both** PD-L1+ve and PD-L1-ve patients
- Long-term survival: **33.7% at ≥18 months** and **31.4% ≥21 months**

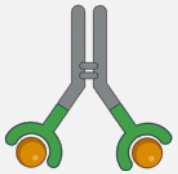
Findings support the novel immune-mediated mechanism of action of ANKTIVA (rescuing T cells and CPI) to rescue CPI in patients who had progressed on CPI: Converting Cold Tumors to Hot

ImmunityBio Proprietary Platforms:
Intellectual Property Term: 2035+

Immunotherapy 2.0: Overcoming Checkpoint Inhibitor Patent Cliff

Driving Innovation and Leadership with Broad Patent Coverage

Antibody Cytokine Fusion Proteins



245
Granted/Allowed Worldwide

DNA Vaccines



104
Granted/Allowed Worldwide

Off-the-Shelf NK Cell Therapy



220
Granted/Allowed worldwide



ANKTIVA Biologics Exclusivity

ANKTIVA + BCG Patent

ANKTIVA + Checkpoint Patent

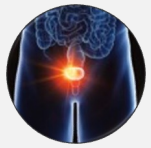
2035[1]

Over 700+ issued patents worldwide covering ImmunityBio immunotherapy portfolio

[1] *Date does not include any patent term adjustment or extension. Biologics exclusivity extends to 2036.*

ImmunityBio: 2025 ANKTIVA Catalysts

BLADDER CANCER



Bladder Cancer BCG Unresponsive CIS

ANKTIVA + BCG

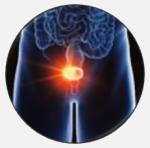
- US Revenue w/ J-Code
- EMA Filing Accepted
- MHRA Filing Accepted
- ROW Filing
- EU and UK Approval
- EU and UK Launch
- ROW Approval



Bladder Cancer BCG Unresponsive Papillary

ANKTIVA + BCG

- Supplemental BLA Filing
- BLA Acceptance
- Papillary Indication Approval



Bladder Cancer BCG Naïve CIS

ANKTIVA + BCG

- Full Enrollment



Bladder Cancer Recombinant BCG

ANKTIVA + rBCG

- FDA Filing for Market Access of Alternative Supply

LUNG

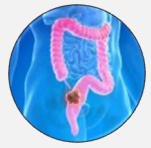


Lung Cancer Checkpoint Failure

ANKTIVA + Checkpoint

- BLA Filing for Accelerated Approval
- Ongoing Randomized Clinical Trial Phase 3
- Acceptance of BLA Filing

CANCER VACCINE



Colon Cancer Prevention

ANKTIVA + TriAd

- Data Read Out for First Cancer Vaccine Prevention Trial

ImmunityBio Leadership Team



Patrick Soon-Shiong, M.D. FACS
Executive Chairman, Global Chief Medical & Scientific Officer



Rich Adcock
President & Chief Executive Officer



Leonard S. Sender, M.D.
Chief Medical Officer Liquid Tumors & Cell Therapy



Sandeep Reddy, M.D.
Chief Medical Officer Solid Tumors & Diagnostics



Enrique Diloné, Ph.D.
Chief Technology Officer



Charles G. Garlisi, Ph.D.
Senior Vice President, Regulatory Affairs



Sarah Singleton
Chief Communications Officer & Head of Patient Advocacy



Bruce Brown, M.D.
Senior Vice President Medical Affairs



Elizabeth Gabitzsch
Senior Vice President, Product Development & Vaccine Programs



David Sachs
Chief Financial Officer



Regan Lauer
Chief Accounting Officer



Manju Saxena, Ph.D.
Senior Vice President of Product Development, Cell Therapy Program



Jason Liljestrom, Esq.
General Counsel



Barry Simon, M.D.
Chief Corporate Affairs Officer