
**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION**
Washington, D.C. 20549

FORM 6-K

**REPORT OF FOREIGN PRIVATE ISSUER
Pursuant to Rule 13a-16 or 15d-16
of the Securities Exchange Act of 1934**

September 29, 2020

Commission File Number: 001-39363

IMMATICS N.V.

Paul-Ehrlich-Straße 15
72076 Tübingen, Federal Republic of Germany
(Address of Principal Executive Office)

Indicate by check mark whether the registrant files or will file annual reports under cover Form 20-F or Form 40-F.

Form 20-F Form 40-F

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(1):

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(7):

INFORMATION CONTAINED IN THIS REPORT ON FORM 6-K

On September 29, 2020, Immmatics N.V. (the "Company") issued a press release, a copy of which is attached hereto as Exhibit 99.1.

On September 29, 2020, the Company made available an updated investor presentation on its website. A copy of the investor presentation is attached hereto as Exhibit 99.2.

The fact that this presentation is being made available and filed herewith should not be deemed an admission as to the materiality of any information contained in the materials. The information contained in the presentation is being provided as of September 29, 2020 and the Company does not undertake any obligation to update the presentation in the future or to update forward-looking statements to reflect subsequent actual results.

EXHIBITS

| <u>Exhibit Number</u> | <u>Description</u> |
|---------------------------|--|
| 99.1 | Press release dated September 29, 2020 |
| 99.2 | Investor Presentation dated October 2020 |

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned, thereunto duly authorized.

IMMATICS N.V.

Date: September 29, 2020

by: /s/ Harpreet Singh
Harpreet Singh
Chief Executive Officer

**PRESS RELEASE****Immatics Appoints Arnd Christ as Chief Financial Officer**

Tuebingen, Germany and Houston, Texas, September 29, 2020 – Immatics N.V. (NASDAQ: IMTX, “Immatics”), a clinical-stage biopharmaceutical company active in the discovery and development of T cell redirecting cancer immunotherapies, announced today that Arnd Christ will join its leadership team as Chief Financial Officer (CFO) as of October 1, 2020. Arnd Christ was previously the CFO of InflaRx, a NASDAQ-listed biopharmaceutical company. Immatics’ current CFO, Thomas Ulmer, is stepping down to pursue new opportunities.

Harpreet Singh, PhD, Chief Executive Officer at Immatics, commented: “We welcome Arnd who brings extensive experience and a track-record of effectively managing financial operations within the public marketplace. His strategic leadership will serve us well as we continue to meet our development objectives for our T cell receptor-based therapeutics. I would also like to sincerely thank Thomas Ulmer for all his contributions to our organization to date, in particular for the transformation of Immatics from a private to a public company. On behalf of the entire Immatics team, I wish him the very best in his future endeavors.”

Arnd Christ added: “Immatics’ clinical pipeline, based on its unique target discovery and T cell receptor platforms, has significant potential to transform the lives of cancer patients. I am excited to become a part of this dynamic organization, and to support its continued development going forward.”

Arnd Christ brings nearly two decades of experience serving as CFO of both private and public biotechnology companies. Before joining InflaRx, he was CFO of several companies including Medigene AG, Novimmune SA and Probiodrug AG. Over the course of his career, Arnd Christ completed a broad range of corporate transactions including an IPO, capital raises and licensing deals. Prior to serving as a CFO, he held the position of Financial Director in various corporations related to the former Hoechst Group in Germany and the UK. Arnd Christ holds a master’s degree in business administration from the University of Würzburg, Germany.

Notes to Editors

About Immatics

Immatics combines the discovery of true targets for cancer immunotherapies with the development of the right T cell receptors with the goal of enabling a robust and specific T cell response against these targets. This deep know-how is the foundation for our pipeline of Adoptive Cell Therapies and TCR Bispecifics as well as our partnerships with global leaders in the pharmaceutical industry. We are committed to delivering the power of T cells and to unlocking new avenues for patients in their fight against cancer.

For regular updates about Immatics, visit www.immatics.com. You can also follow us on Twitter and LinkedIn.

Forward-Looking Statements:

Certain statements in this press release may be considered forward-looking statements. Forward-looking statements generally relate to future events or Immatics' future financial or operating performance. For example, statements concerning the timing of product candidates and Immatics' focus on partnerships to advance its strategy are forward-looking statements. In some cases, you can identify forward-looking statements by terminology such as "may", "should", "expect", "intend", "will", "estimate", "anticipate", "believe", "predict", "potential" or "continue", or the negatives of these terms or variations of them or similar terminology. Such forward-looking statements are subject to risks, uncertainties, and other factors which could cause actual results to differ materially from those expressed or implied by such forward looking statements. These forward-looking statements are based upon estimates and assumptions that, while considered reasonable by Immatics and its management, are inherently uncertain. New risks and uncertainties may emerge from time to time, and it is not possible to predict all risks and uncertainties. Factors that may cause actual results to differ materially from current expectations include, but are not limited to, various factors beyond management's control including general economic conditions and other risks, uncertainties and factors set forth in filings with the Securities and Exchange Commission (SEC). Nothing in this presentation should be regarded as a representation by any person that the forward-looking statements set forth herein will be achieved or that any of the contemplated results of such forward-looking statements will be achieved. You should not place undue reliance on forward-looking statements, which speak only as of the date they are made. Immatics undertakes no duty to update these forward-looking statements.

For more information, please contact:

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DELIVERING THE POWER
OF T CELLS TO
CANCER PATIENTS

Immatics

Corporate Presentation, October 2020

This presentation ("Presentation") is provided by Immatics N.V. ("Immatics" or the "Company") for informational purposes only. The information contained herein does not purport to be all-inclusive and Immatics nor any of its affiliates nor any of its or their control persons, officers, directors, employees or representatives makes any representation or warranty, express or implied, as to the accuracy, completeness or reliability of the information contained in this Presentation. You should consult your own counsel and tax and financial advisors as to legal and related matters concerning the matters described herein, and, by accepting this presentation, you confirm that you are not relying upon the information contained herein to make any decision.

Forward-Looking Statements. Certain statements in this presentation may be considered forward-looking statements. Forward-looking statements generally relate to future events or the Company's future financial or operating performance. For example, statements concerning timing of data read-outs for product candidates, the IND filing for IMA204, IMA301, IMA401, the Company's focus on partnerships to advance its strategy, projections of future cash on hand and other metrics are forward-looking statements. In some cases, you can identify forward-looking statements by terminology such as "may", "should", "expect", "intend", "will", "estimate", "anticipate", "believe", "predict", "potential" or "continue", or the negatives of these terms or variations of them or similar terminology. Such forward-looking statements are subject to risks, uncertainties, and other factors which could cause actual results to differ materially from those expressed or implied by such forward looking statements. These forward-looking statements are based upon estimates and assumptions that, while considered reasonable Immatics and its management, are inherently uncertain. New risks and uncertainties may emerge from time to time, and it is not possible to predict all risks and uncertainties. Factors that may cause actual results to differ materially from current expectations include, but are not limited to, various factors beyond management's control including general economic conditions and other risks, uncertainties and factors set forth in the Company's filings with the Securities and Exchange Commission (SEC). Nothing in this presentation should be regarded as a representation by any person that the forward-looking statements set forth herein will be achieved or that any of the contemplated results of such forward-looking statements will be achieved. You should not place undue reliance on forward-looking statements, which speak only as of the date they are made. Company undertakes no duty to update these forward-looking statements.

No Offer or Solicitation. This communication is for informational purposes only and does not constitute, or form a part of, an offer to sell or the solicitation of an offer to sell or an offer to buy or the solicitation of an offer to buy any securities, and there shall be no sale of securities, in any jurisdiction in which such offer, solicitation or sale would be unlawful prior to registration or qualification under the securities laws of any such jurisdiction. No offer of securities shall be made except by means of a prospectus meeting the requirements of Section 10 of the Securities Act of 1933, as amended, and otherwise in accordance with applicable law.

Certain information contained in this Presentation relates to or is based on studies, publications, surveys and the Company's own internal estimates and research. In addition, all of the market data included in this presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while the Company believes its internal research is reliable, such research has not been verified by any independent source. This meeting and any information communicated at this meeting are strictly confidential and should not be discussed outside your organization.



Immatics' proprietary platforms create a leadership position in the TCR therapeutics space

- Two highly differentiated technology platforms for the discovery of pHLA targets & T cell receptors
- Foundation to achieve the next advance in immunotherapy, particularly for solid tumors
- Platforms validated by multiple strategic collaborations with oncology-focused global leaders incl. Amgen, Genmab, BMS, GSK and MD Anderson Cancer Center



Immatics is advancing a proprietary pipeline of Adoptive Cell Therapies (ACT) & TCR Bispecifics

- Four ACT programs in clinical development covering a broad range of solid cancers
- Two TCR Bispecifics programs with off-the-shelf availability in advanced preclinical development
- Next-Generation personalized multi-target approach designed to achieve durable clinical responses



- Strong IP estate & worldwide rights retained on lead programs
- Approx. \$320m of cash on the balance sheet post NASDAQ debut and a cash runway of 3+ years
- Supported by a strong shareholder base of premier US and European shareholders

Most cancer patients do not benefit from current immuno-oncology approaches



Checkpoint inhibitors

Clinical benefit mainly in patients with tumors with high mutational burden
minority of all cancers*

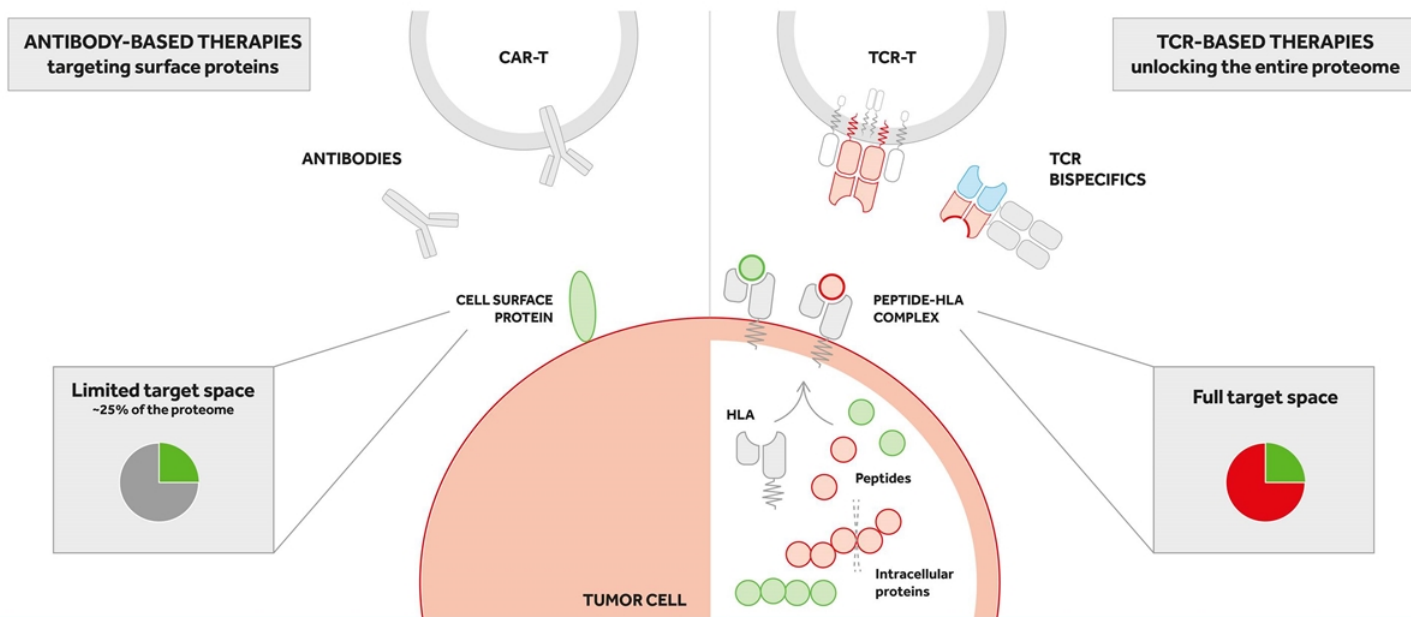
CAR-T

Clinical benefit mainly in patients with hematological indications
minority of all cancers**

Immatics is turning limitations into opportunities by
Developing TCR-based immunotherapies with the aim to offer a targeted therapy to patients with high medical need

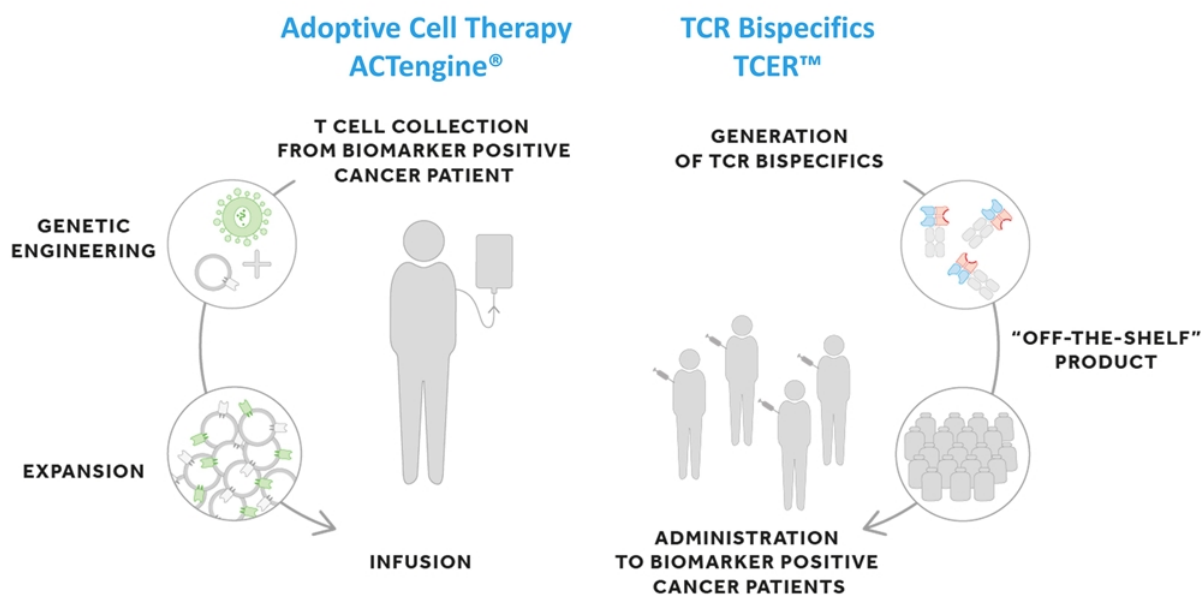
pHLA Targets Identified on Human Cancer Cells by Our Technology Platform

Are Building the Foundation for TCR-Based Therapies to Unlock Immunotherapies for Solid Cancers



Developing Two Distinct Targeted Treatment Modalities

Addressing the Needs of Patients with Bulky & De-Bulked Tumors



A Fully-owned Proprietary Pipeline of 4 Clinical & 4 Pre-Clinical Programs

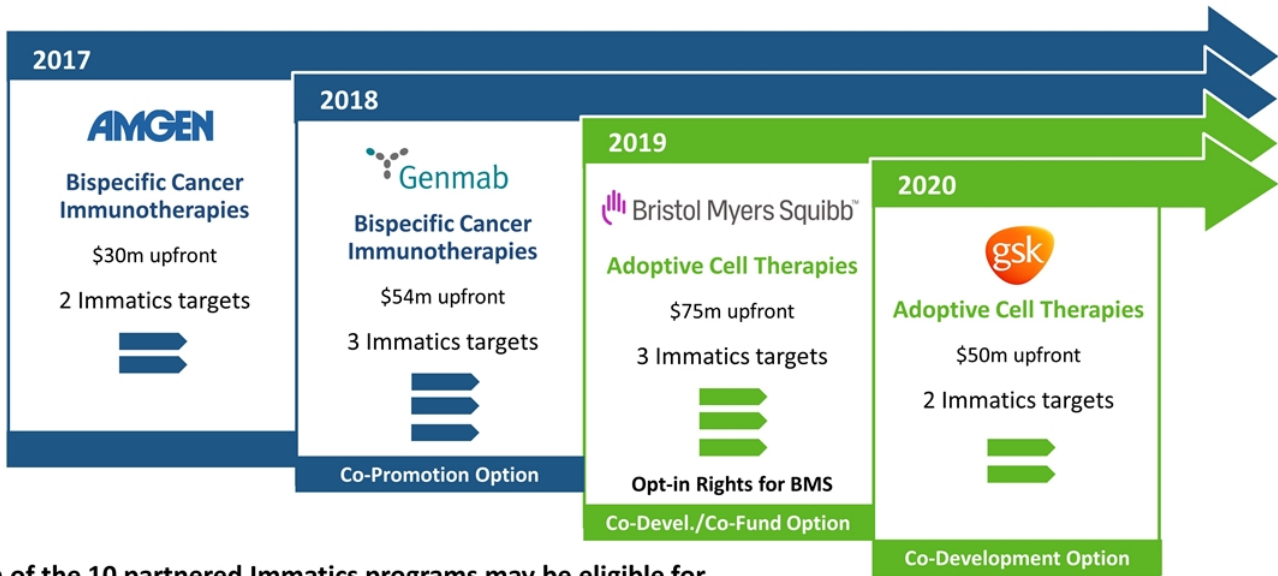
Leveraging Immatics pHLA Targets in 2 Distinct Treatment Modalities



| Product Class | Product Candidate | Indications | Preclinical | Phase 1 | Phase 2 | Phase 3 | Next expected Milestones |
|-------------------------------------|--------------------------------|-----------------------------------|---------------|------------|---------|---------|--|
| Autologous TCR-T ACTengine® | IMA201 (MAGEA4/8) | Solid cancers | ██████████ | ██████████ | | | } Combined initial data read-out 1Q 2021 |
| | IMA202 (MAGEA1) | Solid cancers | ██████████ | ██████████ | | | |
| | IMA203 (PRAME) | Hematological & solid cancers | ██████████ | ██████████ | | | |
| | IMA204 (COL6A3) | Solid cancers | ██████ | | | | IND filing 2021 |
| Allogenic γδ T cells ACTallo® | IMA301 (Cancer testis antigen) | Hematological & solid cancers | ██████ | | | | IND filing 2022 |
| | ACTolog® | IMA101 (Multi-target pilot trial) | Solid cancers | ██████████ | | | Topline data YE 2020 |
| TCR Bispecifics TCER™ | IMA401 (Cancer testis antigen) | Solid cancers | ██████ | | | | IND filing YE 2021 |
| | IMA402 (Cancer testis antigen) | Hematological & solid cancers | ██████ | | | | Lead Candidate YE 2020 |

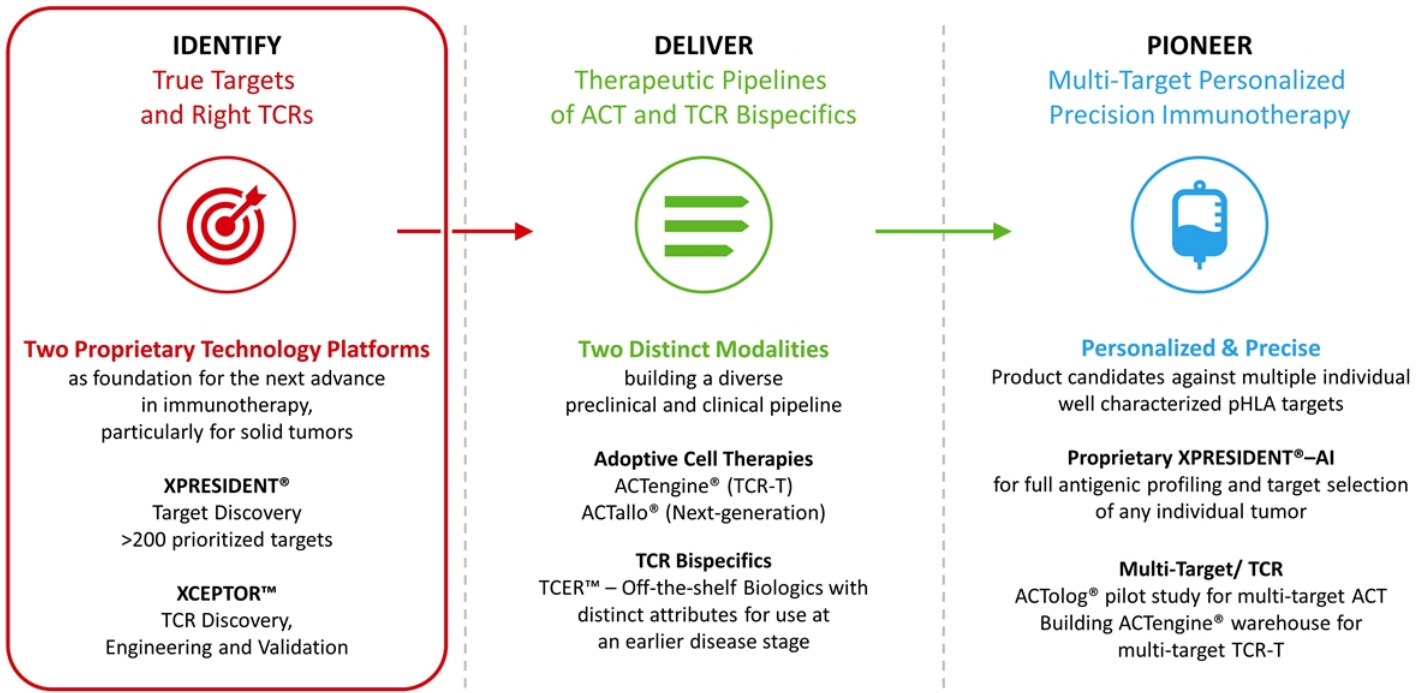
Developing 10 Programs with World-leading Industry Players

Validating Immatics' Unique Technologies and Expertise



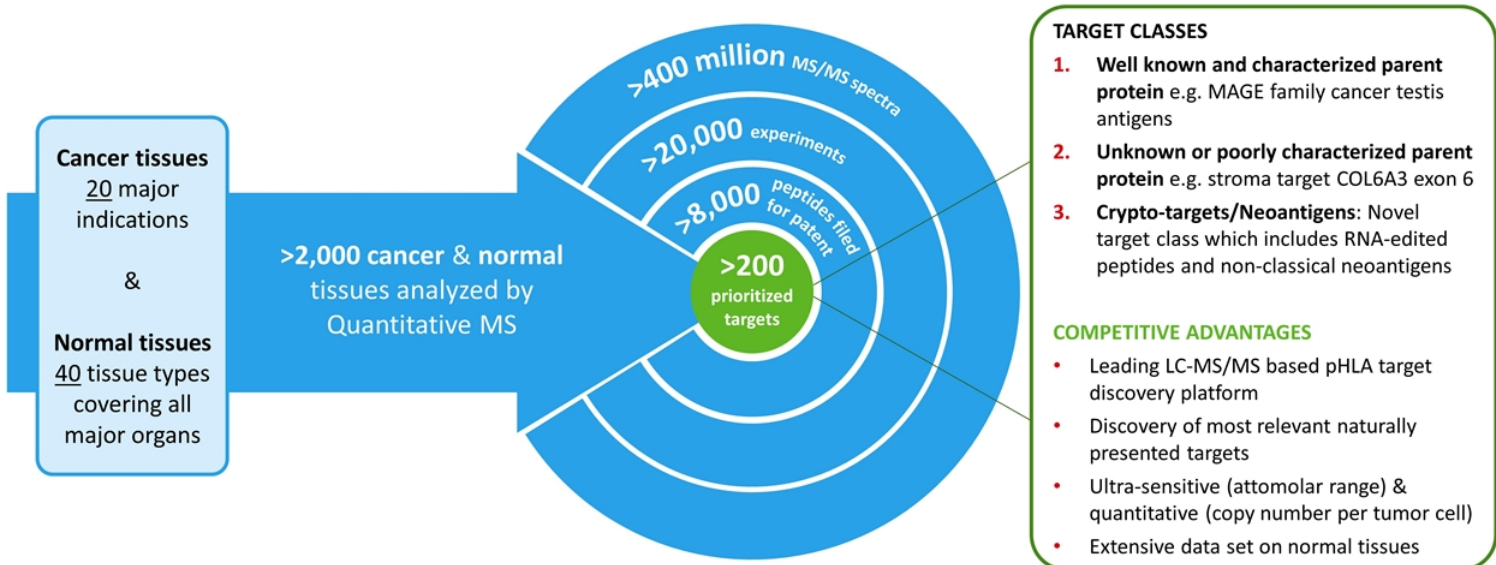
Each of the 10 partnered Immatics programs may be eligible for

- >\$500m aggregate milestone payments per program
- Tiered royalties per program



Discovery of True Cancer Targets – XPRESIDENT® Technology Platform

Prioritization of >200 pHLA Targets Covering All Target Classes

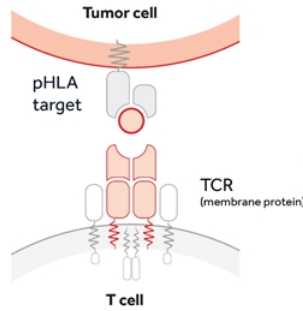


Development of the Right TCR for Two Modalities – ACT and Bispecifics

By Our XCEPTOR™ Technology Platform

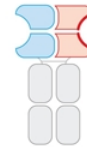
Adoptive Cell Therapy

ACTengine®
ACTallo®



TCR Bispecifics

T cell engaging
receptor (TCER™)



Natural or optimized natural TCR with **micromolar affinity** and favorable **specificity** profile

for genetic engineering of autologous and allogeneic T cells and direct clinical application

Proprietary **XCEPTOR™** Platform TCR Discovery, Engineering and Validation

Fast and efficient discovery of **multiple TCRs per target**

Affinity-maturated natural TCR variable domains with **nanomolar affinity** and favorable **specificity** profile

Highly potent TCR Bispecifics format with **extended half-life** and **antibody-like stability** and manufacturability

Platform Interaction Allows for Early De-selection of Cross-Reactive TCRs

“Fail Early Approach” Increases Focus on Most Promising TCR Candidates

Clinical fatalities have occurred in TCR-T trials using a titin cross-reactive TCR (published 2013)

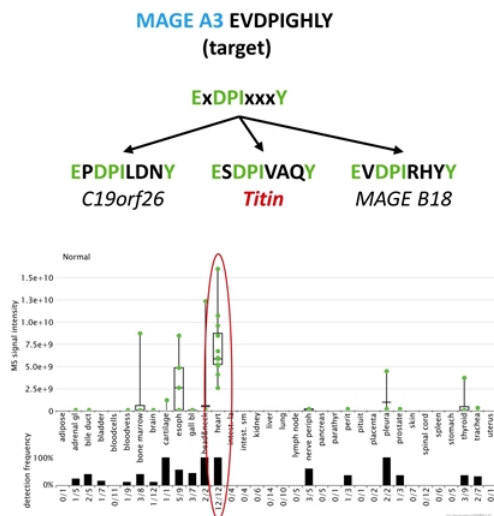
XPRESIDENT®-guided toxicity screening to prevent safety issues

Candidate target/ TCR

Determination of TCR binding motif

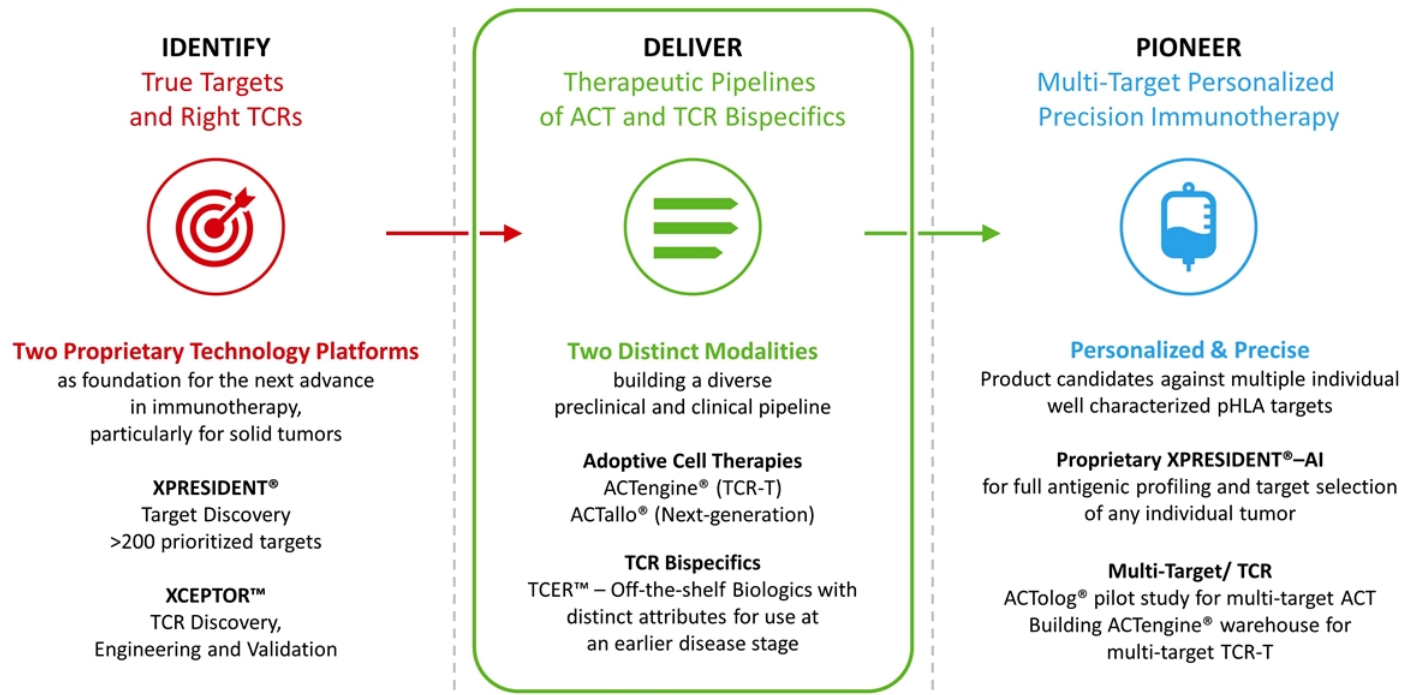
XPRESIDENT® search for relevant off-target peptides

XPRESIDENT® database:
Titin peptide **ESDPIVAQY** strongly presented on all investigated HLA-A*01+ normal heart tissue samples.



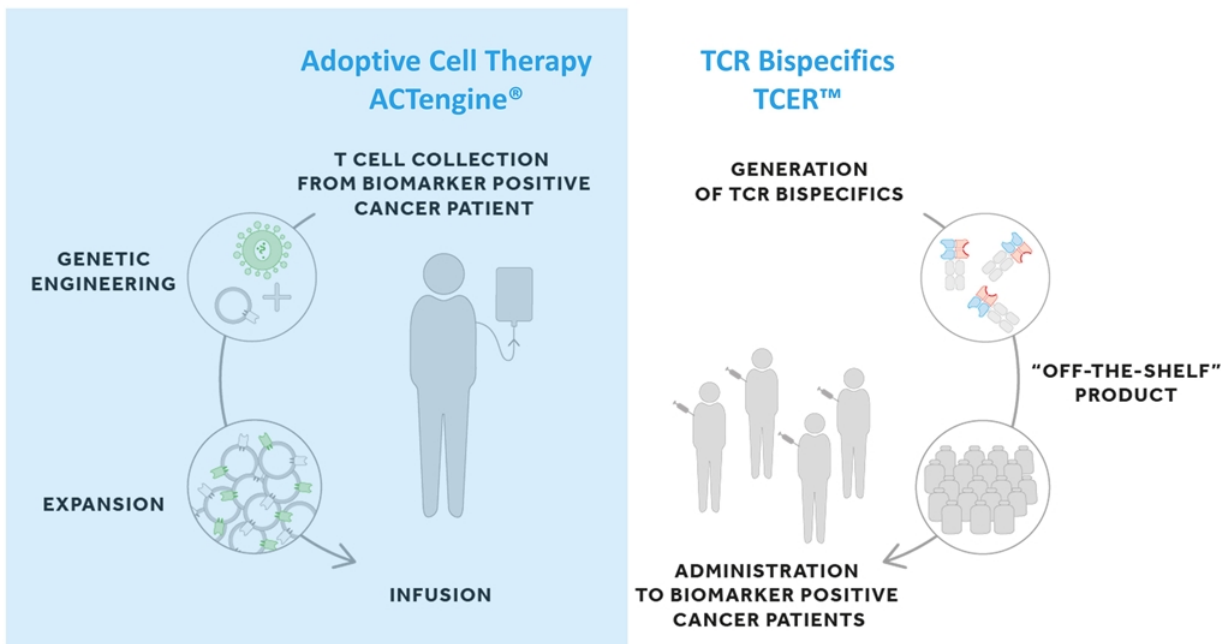
XPRESIDENT®-guided toxicity screening

- Direct *in situ* evidence of relevant off-target peptide presentation
- Fast and straightforward analysis
- Unbiased view on relevant organs for all targets
- “Titin Case” fatalities could be preventable



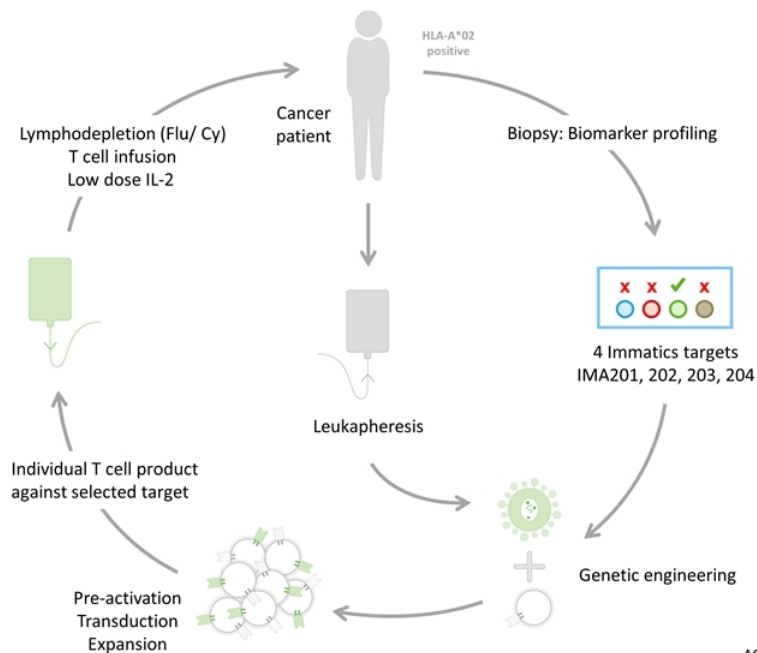
Developing Two Distinct Targeted Treatment Modalities

Addressing the Needs of Patients with Bulky & De-Bulked Tumors



ACTengine® – Engineered TCR-T Therapy

Autologous, Genetically Modified T cells Expressing a Novel TCR



ACTengine® IMA200 Series

Approach

- Proprietary TCR
- One target/ TCR per trial

Study Design

- 3 First-in-human trials ongoing (IMA201, IMA202, IMA203)
- 4th IND planned for 2021 (IMA204)
- Dose escalation cohorts to establish safety (2+2 or 3+3 design)
- Expansion cohort for signal finding (9-12 patients)

ACTengine® programs are supported by a grant of the Cancer Prevention & Research Institute of Texas (CPRIT)

Optimized Manufacturing for Younger T cells & Timely Patient Infusion

Established cGMP Capacities to Advance Next-Generation Cell Manufacturing Developments



Leukapheresis

Infusion-Ready



IMA203: 20 days

| | |
|--------------------------------|---|
| Manufacturing time (6 days) | QC testing (Full sterility, 14 days) |
|--------------------------------|---|

Key plans: Commercial ACTengine® expected 11 days

| | |
|--------------------------------|--|
| Manufacturing time (6 days) | Expedited QC testing (5 days sterility) |
|--------------------------------|--|



Manufacturing by Immatics Personnel for ongoing ACT programs

- ✓ Proprietary short manufacturing process designed to produce phenotypically younger, better persisting T cells
- ✓ T cell products are manufactured at the Evelyn H. Griffin Stem Cell Therapeutics Research Laboratory in collaboration with UTHealth, in **Houston, TX**
- ✓ 1,850 square foot state-of-the-art **cGMP Facility** operated by Immatics personnel
- ✓ Capacity: up to 48 manufacturing runs/month

ACTengine® Targets Are Prevalent and Display High pHLA Copy Numbers

Comparison of Our Frontrunner Targets to Clinically Validated NY-ESO-1

| | | Ongoing clinical ACTengine® trials | | | IND in 2021 |
|---|--|--|--|---|---|
| | NY-ESO-1 ⁵ | MAGEA4/A8 IMA201 | MAGEA1 IMA202 | PRAME IMA203 | COL6A3 exon 6 IMA204 |
| Naturally presented | Yes ¹ | Yes ² | Yes ² | Yes ² | Yes ² |
| Specificity class ³ | 1 | 1 | 1 | 1 | 2 |
| Number of pHLA copies per cell | 10-50 ⁴ | 100-1,000 ² | 50-900 ² | 100-1,000 ² | 100-700 ² |
| Tumor types with significant prevalence | Synovial sarcoma (80%) Melanoma (40%) HCC (40%) ... | Sq NSCLC (50%) HNSCC (35%) Bladder carcinoma (30%) Uterine carcinosarcoma (25%) Esophageal carcinoma (25%) Ovarian carcinoma (20%) Melanoma (20%) Sarcoma Subtypes (up to 80%) ... | HCC (40%) Sq NSCLC (35%) Melanoma (30%) Bladder carcinoma (20%) Esophageal carcinoma (20%) HNSCC (15%) Sarcoma Subtypes (up to 30%) ... | Uterine carcinoma (100%) Melanoma (95%) Ovarian carcinoma (80%) Sq NSCLC (65%) Uveal melanoma (50%) Cholangiocarcinoma (35%) Diffuse large B-cell lymphoma (30%) Breast carcinoma (25%) HNSCC (25%) Sarcoma Subtypes (up to 100%) ... | Pancreatic carcinoma (80%) Breast carcinoma (75%) Stomach carcinoma (65%) Sarcoma (65%) Esophageal carcinoma (60%) NSCLC (55%) HNSCC (55%) Uterine carcinosarcoma (55%) Colorectal carcinoma (45%) Mesothelioma (45%) Ovarian carcinoma (40%) Cholangiocarcinoma (40%) Melanoma (35%) Bladder carcinoma (35%) ... |

Immatics' clinical frontrunner targets show specificity profiles similar to NY-ESO-1 while having significantly higher peptide copy numbers

¹ Natural presentation of this peptide has been validated by clinical data. ² Validated by XPRESIDENT™ mass spectrometry. Target peptide copy numbers per cell were determined by AbsQuant™ technology. ³ Internal specificity categorization used at Immatics. Specificity class 1: peptide not routinely found on any normal tissue; no relevant RNA expression detected on critical organs. Specificity class 2: peptide showing a large therapeutic window with detections on normal tissue and low RNA expression on critical organs. ⁴ Purbhoo *et al.*, J Immunol 176:7308-7316 (2006). ⁵ Robbins *et al.*, J Clin Oncol 29(7): 917-924 (2011). Target prevalences for ACTengine® targets are based on TCGA data combined with a XPRESIDENT™-determined target individual MS-based mRNA expression threshold.

ACTengine® - Initial Safety and Persistence of T cells

Initial Data from IMA201, IMA202 and IMA203 as of 1Q 2020

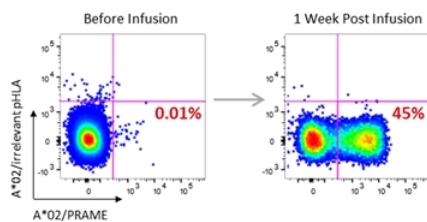
Studies Enrollment Status

- Products successfully manufactured for 10/10 patients
- **First 4 patients** treated across IMA201, IMA202 and IMA203 trials at lowest dose of dose escalation scheme (50 million specific T cells/m² → 5-10% of anticipated target dose at end of dose escalation)

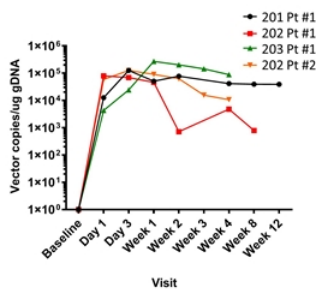
Preliminary Biological Activity and Safety Data

- Very high frequencies of persisting circulating target-specific T cells observed at lowest infused dose (up to 45%)
- Current longest observation period is 12 weeks – during this time T cells persist
- Serial biopsy analysis demonstrates infiltration of target-specific T cells into post-treatment tumor biopsies
- ACTengine® treatment is well-tolerated to date with no changes to treatment regime required
- Next combined data read-out expected in 1Q 2021

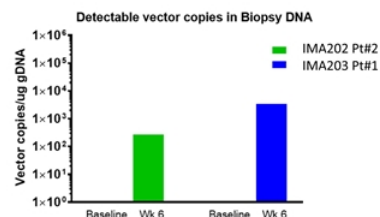
Cellular Immunomonitoring in Blood
IMA203 Patient #1



Molecular Immunomonitoring in Blood



Molecular Immunomonitoring in Tumor
IMA202 Patient #2, IMA203 Patient #1



ACTengine® Targets Are Prevalent and Display High pHLA Copy Numbers

COL6A3 Exon 6 Is Expressed Abundantly on Tumor Stroma in Many Solid Cancers

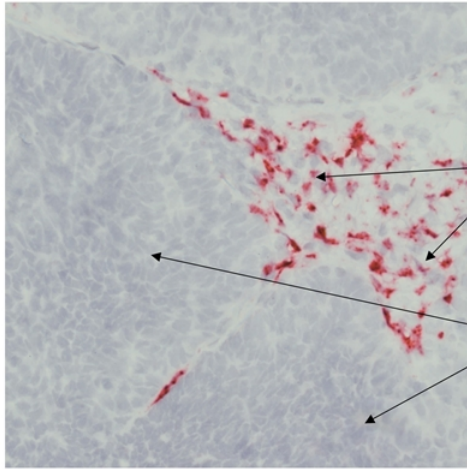
Ongoing clinical ACTengine® trials

IND in 2021

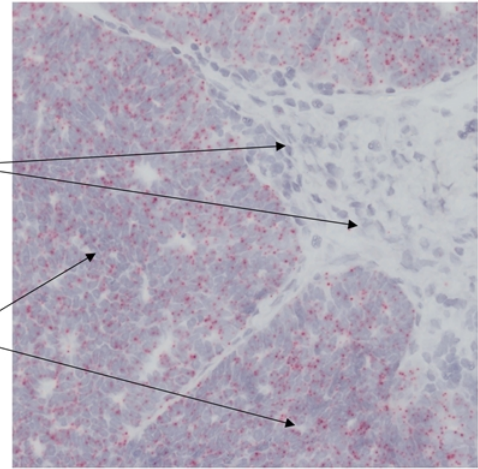
| | NY-ESO-1⁵ | MAGEA4/A8 IMA201 | MAGEA1 IMA202 | PRAME IMA203 | COL6A3 exon 6 IMA204 |
|---|--|--|--|---|---|
| Naturally presented | Yes ¹ | Yes ² | Yes ² | Yes ² | Yes ² |
| Specificity class ³ | 1 | 1 | 1 | 1 | 2 |
| Number of pHLA copies per cell | 10-50 ⁴ | 100-1,000 ² | 50-900 ² | 100-1,000 ² | 100-700 ² |
| Tumor types with significant prevalence | Synovial sarcoma (80%) Melanoma (40%) HCC (40%) ... | Sq NSCLC (50%) HNSCC (35%) Bladder carcinoma (30%) Uterine carcinosarcoma (25%) Esophageal carcinoma (25%) Ovarian carcinoma (20%) Melanoma (20%) Sarcoma Subtypes (up to 80%) ... | HCC (40%) Sq NSCLC (35%) Melanoma (30%) Bladder carcinoma (20%) Esophageal carcinoma (20%) HNSCC (15%) Sarcoma Subtypes (up to 30%) ... | Uterine carcinoma (100%) Melanoma (95%) Ovarian carcinoma (80%) Sq NSCLC (65%) Uveal melanoma (50%) Cholangiocarcinoma (35%) Diffuse large B-cell lymphoma (30%) Breast carcinoma (25%) HNSCC (25%) Sarcoma Subtypes (up to 100%) ... | Pancreatic carcinoma (80%) Breast carcinoma (75%) Stomach carcinoma (65%) Sarcoma (65%) Esophageal carcinoma (60%) NSCLC (55%) HNSCC (55%) Uterine carcinosarcoma (55%) Colorectal carcinoma (45%) Mesothelioma (45%) Ovarian carcinoma (40%) Cholangiocarcinoma (40%) Melanoma (35%) Bladder carcinoma (35%) ... |

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Stroma Target (COL6A3 exon 6)
in an Ovarian Cancer sample



Example of a Tumor Target
in the same Ovarian Cancer sample



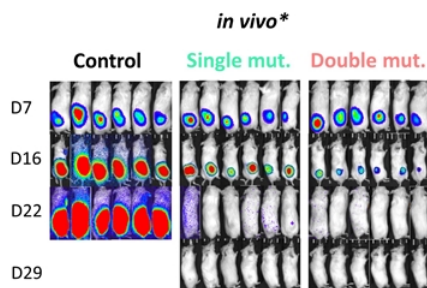
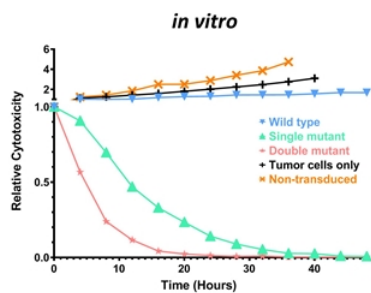
Stroma cells

Tumor cells

COL6A3 exon 6 is prevalently expressed at high copy numbers in the tumor stroma across many solid cancers

ACTengine® IMA204 – Complete Tumor Eradication *in vitro* and *in vivo*

Two Affinity-enhanced TCR Candidates with High Avidity, Specificity and Potency for IMA204

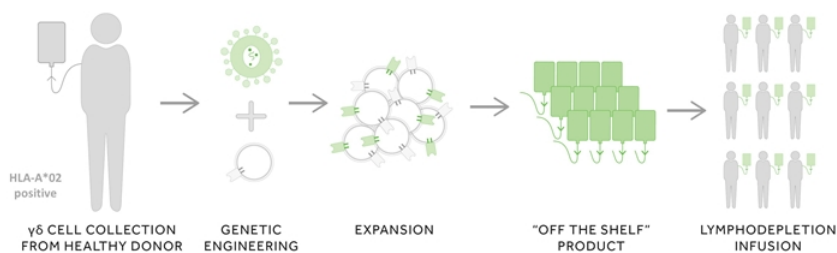


- Two affinity-enhanced TCRs with excellent pre-clinical properties *in vitro* and *in vivo*
- One of the candidates shows full functionality also in CD4+ T cells without requirement for a CD8 co-receptor
- Final preclinical safety evaluation of the target and the two candidate TCRs ongoing
- IND submission on track for 2021

*In vivo data by Jim Riley, University of Pennsylvania, control – non transduced T cells. TCR avidity and specificity data not shown, available in IMA204 presentation on Immatics website.

ACTallo® – Next Generation Off-the-shelf TCR-T Therapy

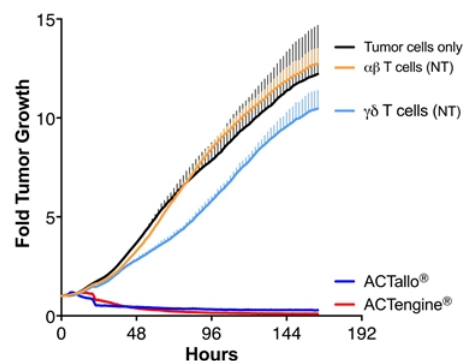
Allogenic, Genetically Modified $\gamma\delta$ T cells Expressing a Novel TCR



$\gamma\delta$ T cells

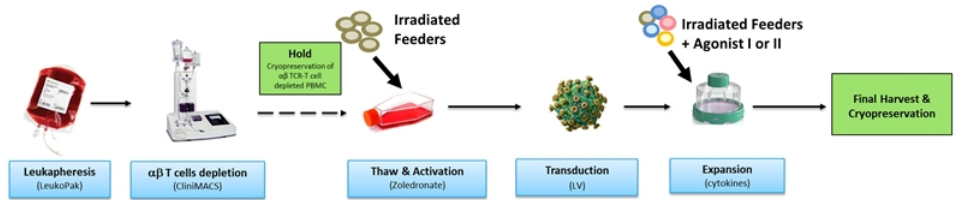
- Are **abundant** in the peripheral blood
- Show **intrinsic anti-tumor activity**
- **Naturally infiltrate** solid tumors and correlate with **favorable prognosis**
- Are HLA-independent, thus **do not cause GvHD** in allogenic setting
- Can be **expanded rapidly to high numbers** in a **cGMP-compliant manner**
- Can be effectively redirected using **$\alpha\beta$ TCR or CAR constructs**
- Are **promising for an off-the-shelf cell therapy approach**

ACTallo® T cells recognize and kill tumor cells *in vitro*



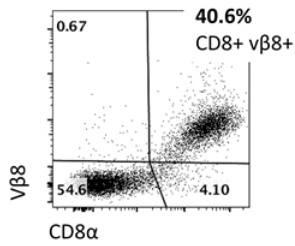
Tumor cells presenting target of interest (pHLA) at physiological levels

ACTallo® – Efficient Transduction & Robust Expansion of $\gamma\delta$ T cells



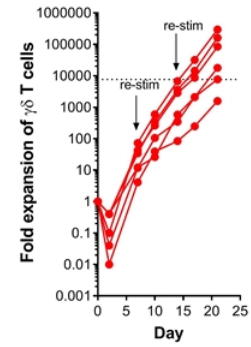
Proprietary lentiviral vector system

4-in-1 construct: TCR α + TCR β + CD8 α + CD8 β



Transducing $\gamma\delta$ T cells with a single vector might significantly reduce costs and complexity

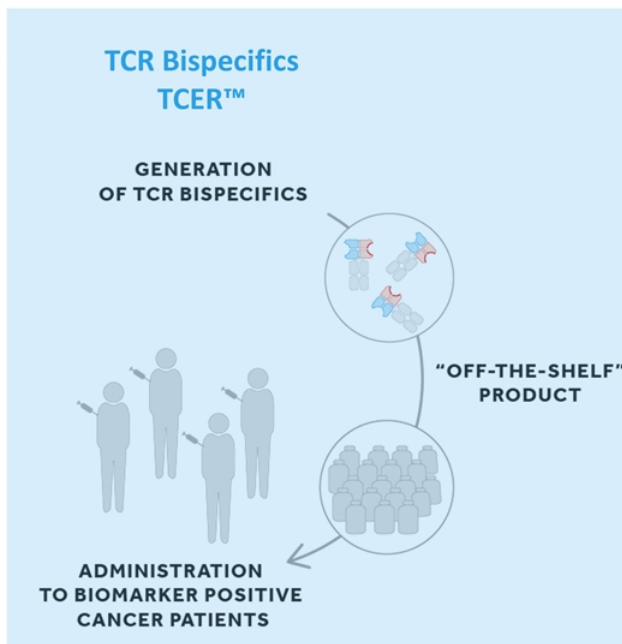
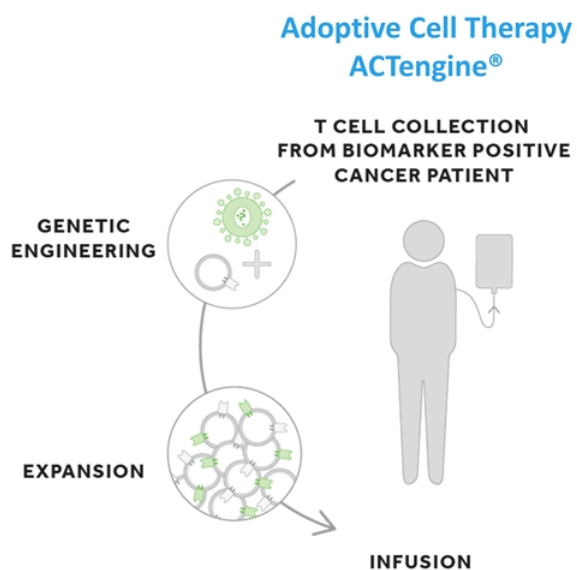
Process candidate



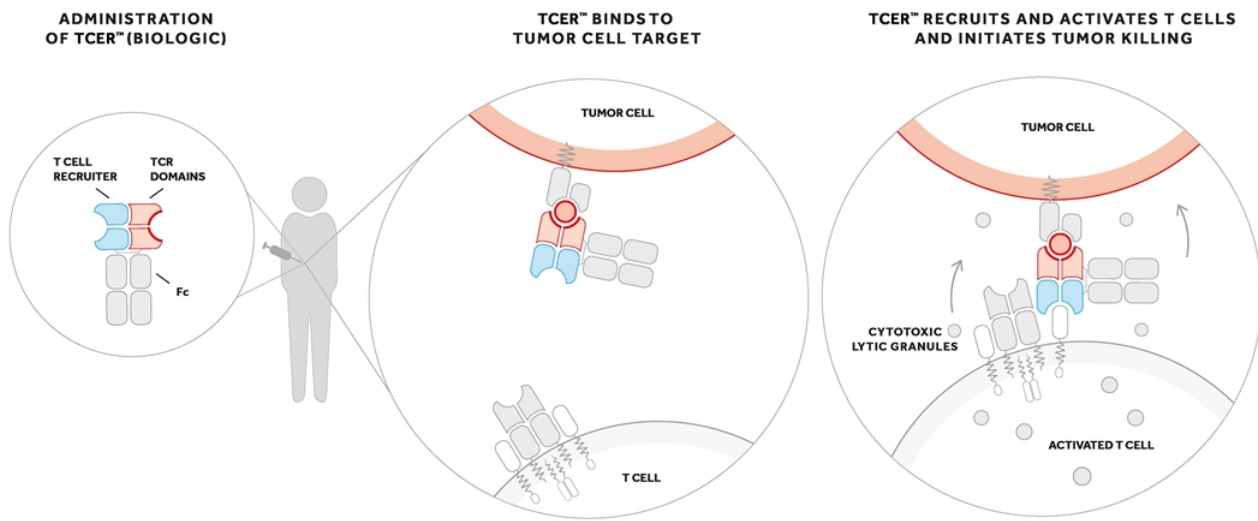
Current processes have the potential for hundreds of doses from one single donor leukapheresis

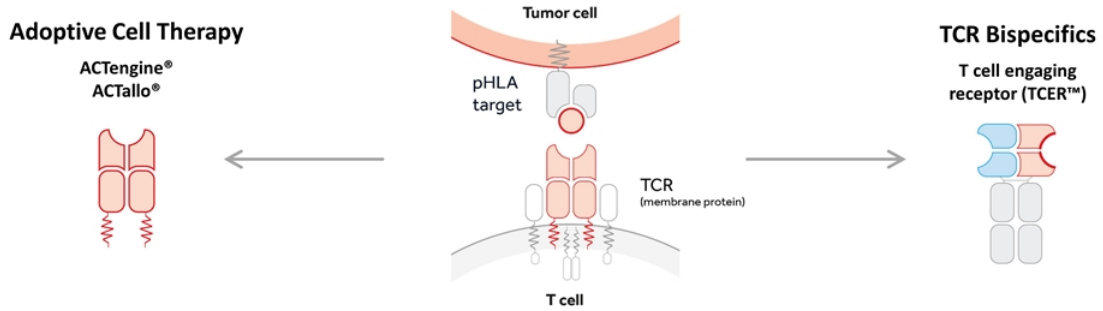
Developing Two Distinct Targeted Treatment Modalities

Addressing the Needs of Patients with Bulky & De-Bulked Tumors



Mode of Action

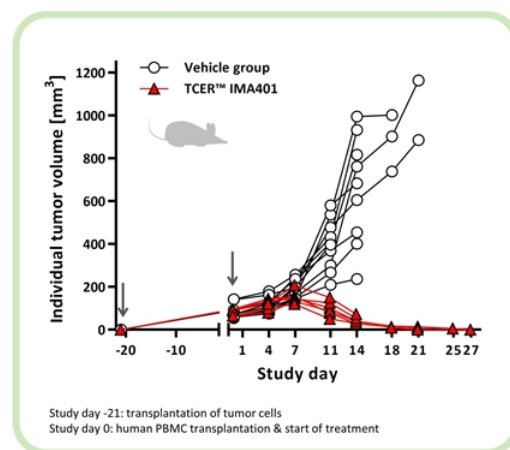




| | | |
|---|--|---|
| <p>Natural or optimized natural TCR with micromolar affinity and favorable specificity profile</p> <p>for genetic engineering of autologous and allogeneic T cells and direct clinical application</p> | <p>Proprietary XCEPTOR™ Platform TCR Discovery, Engineering and Validation</p> <p>Fast and efficient discovery of multiple TCRs per target</p> | <p>Affinity-matured natural TCR variable domains with nanomolar affinity and favorable specificity profile</p> <p>XPRESIDENT®-guided similar peptide counterselection during maturation</p> <p>Highly potent TCR Bispecifics format with extended half-life and antibody-like stability and manufacturability</p> |
|---|--|---|

TCER™ IMA401 Lead Shows Distinguished Specificity & Complete Tumor Eradication in Xenograft Models

Tumor Xenograft Mouse Model



Preparatory activities for GMP manufacturing ongoing
IND filing for YE 2021 on track

Proprietary TCR Bispecifics Format

- TCER™ design confers superior potency and stability compared to multiple tested alternative bispecific formats
- **Significantly extended half life of several days** as compared to competitor molecules

Very High Potency

- Very low concentration (low pM range) required for *in vitro* killing of tumor cells expressing physiological levels of target pHLA
- **Complete tumor eradication *in vivo*** (tumor xenograft mouse model)

Distinguished Specificity

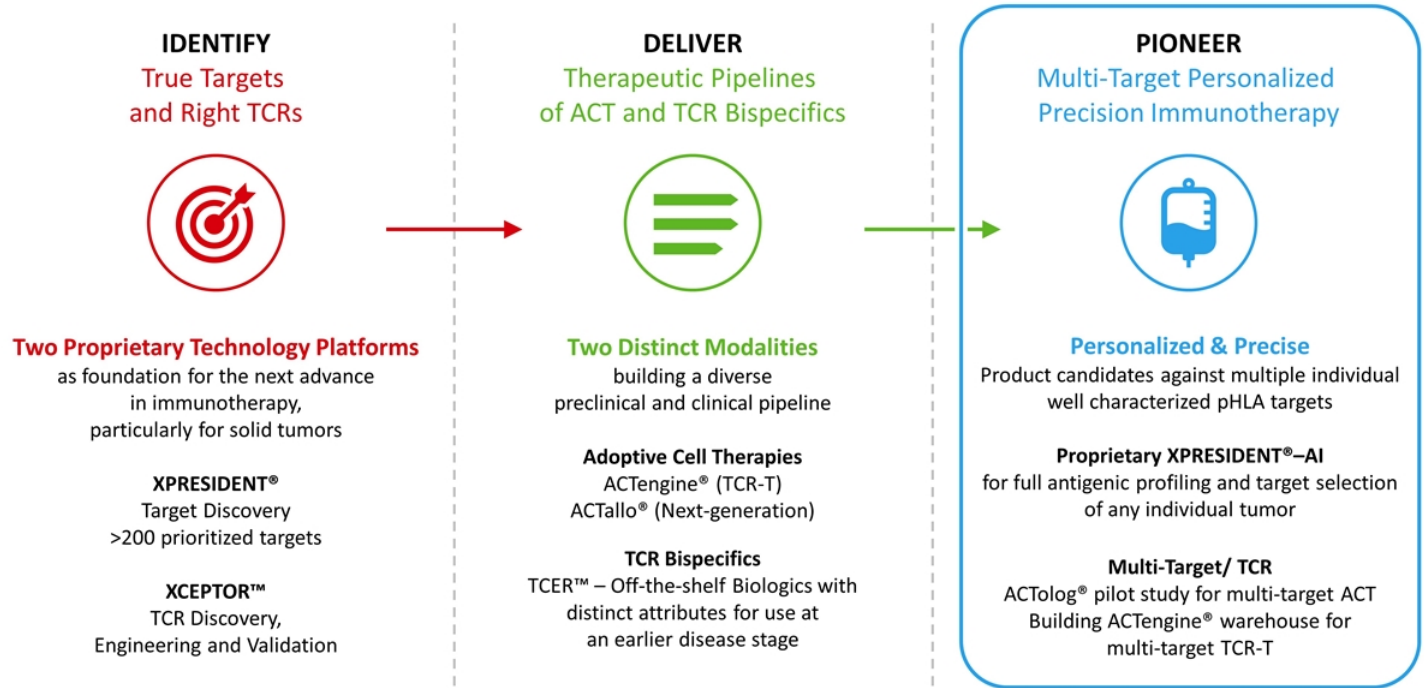
- Broad therapeutic window ($\geq 1,000 - 10,000$ fold) as defined by reactivity against tumor cells and healthy tissue cells

Favorable CMC Characteristics

- Excellent manufacturability in CHO cells
- Very stable compound (stress testing in PBS)

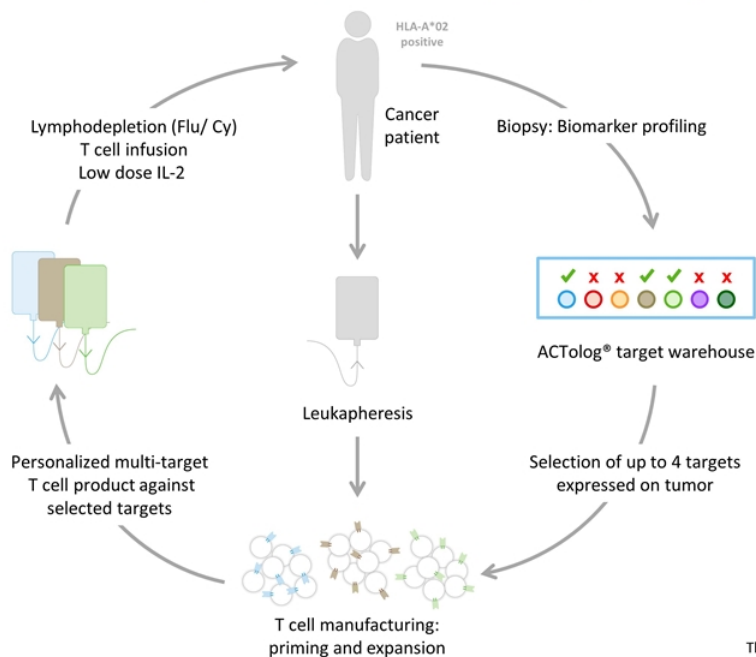
Patient Population

- Target-positive solid tumors, including cancers of the lung, head and neck, esophagus, sarcoma and several others



ACTolog® – Pioneering Personalized Multi-target T cell Therapy

Pilot Trial Using Autologous T cells Expressing Endogenous TCRs



ACTolog® IMA101

Approach

- Personalized multi-target T cell therapy using a warehouse approach
- Autologous T cells, Endogenous TCRs
- Clinical proof of concept previously delivered in melanoma by Cassian Yee (MD Anderson Cancer Center) with single target in combination with checkpoint inhibition [Chapuis *et al.*, *Sci Transl Med* (2013) and Chapuis *et al.*, *JCO* (2016)]

Indications

- Basket trial in solid tumors

Study Design/Status

- First-in-human trial ongoing
- Cohort 1 (ACTolog® only)
- Cohort 2 (plus Atezolizumab)
- Total of N=12 patients treated as of January 2020, up to N=20 planned

The ACTolog® program is supported by a grant of the Cancer Prevention & Research Institute of Texas (CPRIIT)

ACTolog® – Pioneering Personalized Multi-target T cell Therapy

Preliminary Clinical Data as of January 2020



Patients

- 12 patients treated (various solid tumor indications).
- Median duration of disease of the patients was 4 years (range 2-18 years) with a median of 6 previous rounds of treatment (range 2-12).

Feasibility

- Very high ACTolog® cell doses (mostly $>10^{10}$) could be administered.
- Patients received mostly multi-target ACTolog® products (range 1-3).

Biological Response

- ACTolog® has led to high target specific T cell levels and persistence with total frequencies up to 80% of all peripheral CD8+ T cells.
- T cells exhibit a non-exhausted phenotype.
- Target specific T cells were detectable in post-treatment tumor biopsies

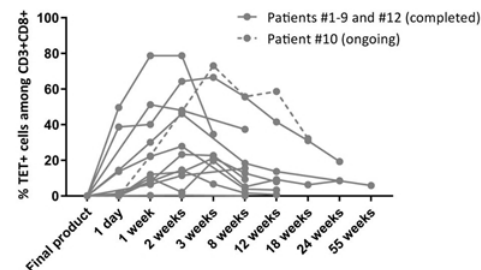
Safety Assessment

- ACTolog® IMA101 is well-tolerated to date with no changes to treatment regime required.
- The most common adverse events were expected cytopenias associated with the lymphodepleting regimen and Grade 1-2 cytokine release syndrome.

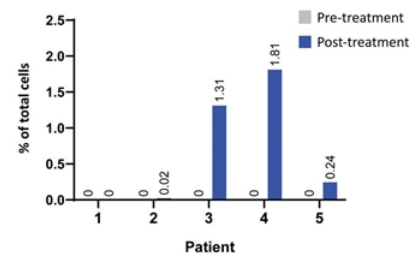
Preliminary Clinical Assessment

- Patients entered the trial with progressive disease, having failed the previous line of therapy.
- Median time to progression was ~12 weeks (range 6 weeks to 7 months) by RECIST1.1 (in some cases with transient tumor reduction of up to 26%).

T cell Persistence in Blood

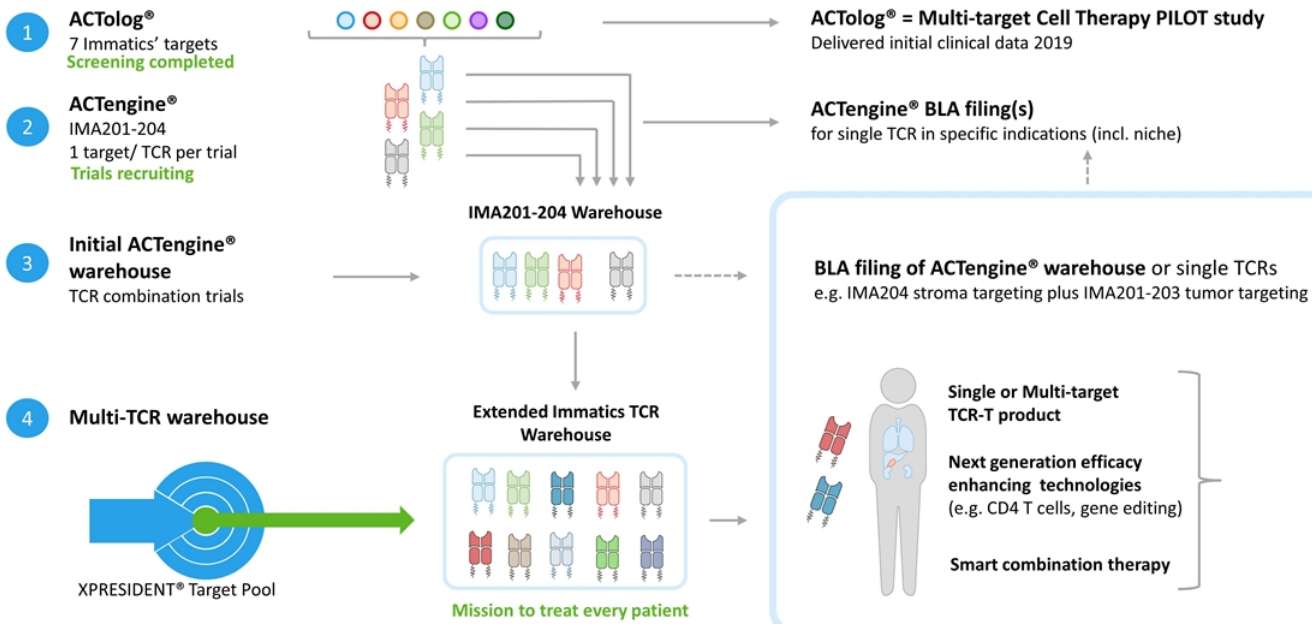


T cell Infiltration into Tumor



Immatics' Multi-target TCR-T Strategy and Vision

Addressing Major Challenges in Immuno-oncology to Make a Therapeutic Difference



The Leadership Team

Experienced Global Leadership Team Across Europe and the US



Harpreet Singh
Chief Executive Officer



Rainer Kramer
Chief Business Officer



Arnd Christ
Chief Financial Officer



Steffen Walter
Chief Technology Officer



Carsten Reinhardt
Chief Development Officer



Cedrik Britten
Chief Medical Officer



Toni Weinschenk
Chief Innovation Officer



Jordan Silverstein
Head of Strategy

Tübingen, Germany, 120 FTEs



Senior Leadership, Research and Development (XPRESIDENT®, XCEPTOR™, TCER™), Translational Development, Clinical Operations, Finance, HR, IT, QM

Munich, Germany, 10 FTEs



Senior Leadership, Business Development, Intellectual Property, Regulatory Affairs, Communications

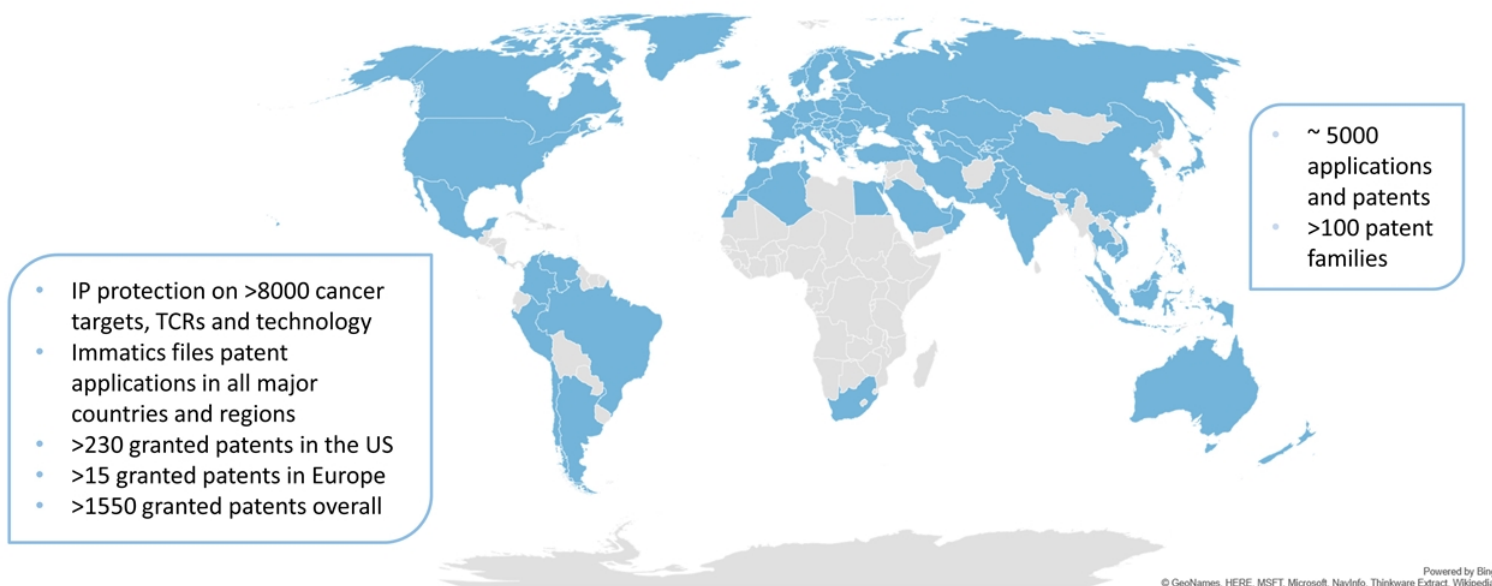
Houston, Texas, 70 FTEs



Senior Leadership, Research and Development (Adoptive Cell Therapy), CMC, Clinical Operations, Regulatory Affairs, QA/QC, HR, Investor Relations

Continuously Growing IP Portfolio Protecting Proprietary Know-How

Immatics' Patent Estate – Territorial Coverage



ACTengine®

Significantly increased clinical footprint for our ACTengine® programs

- Additional clinical trial sites have been initiated in Germany and the US
- Green light by the German regulatory authority for the IMA202 and IMA203 studies
- Screening of patients started and first product infusion in Europe

Extension of Collaboration with UTHealth until end of 2024

- Exclusive access to state-of-the art cGMP manufacturing infrastructure ensuring continued manufacturing and supply of T cell products for ongoing and planned early-stage ACT clinical trials

Two affinity-enhanced TCR candidates with high avidity, specificity, potency identified for the tumor stroma target COL6A3

- IND submission for the IMA204 program for 2021 on track

IMA201, IMA202 and IMA203 programs are on track for an initial combined data read-out in 1Q 2021

TCER™

IMA401 TCR Bispecific program is on track for an IND submission YE 2021

- Preparatory activities for GMP manufacturing of the lead TCER™ molecule IMA401 ongoing
- Additional IND-supportive data are being generated

Selection of lead candidate(s) for the IMA402 program planned for YE 2020

Next-Gen ACT

IMA301 program is on track for an IND filing in 2022

- Data update for the IMA301 program is expected for 3Q 2020

Topline data for the multi-target pilot study IMA101 planned to be presented at a scientific conference in 4Q 2020

- Screening and patient treatment for the multi-target pilot study IMA101 completed



Thank you

www.immatics.com

