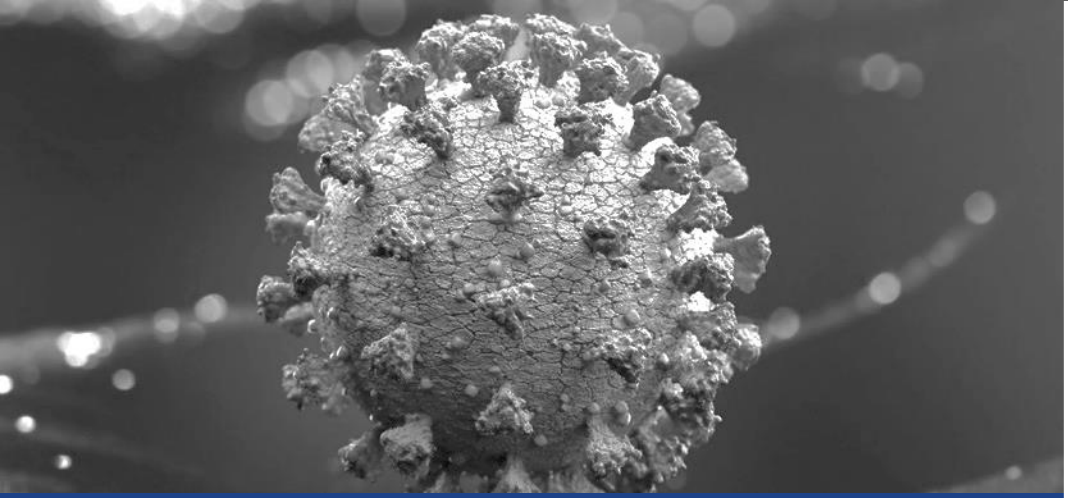
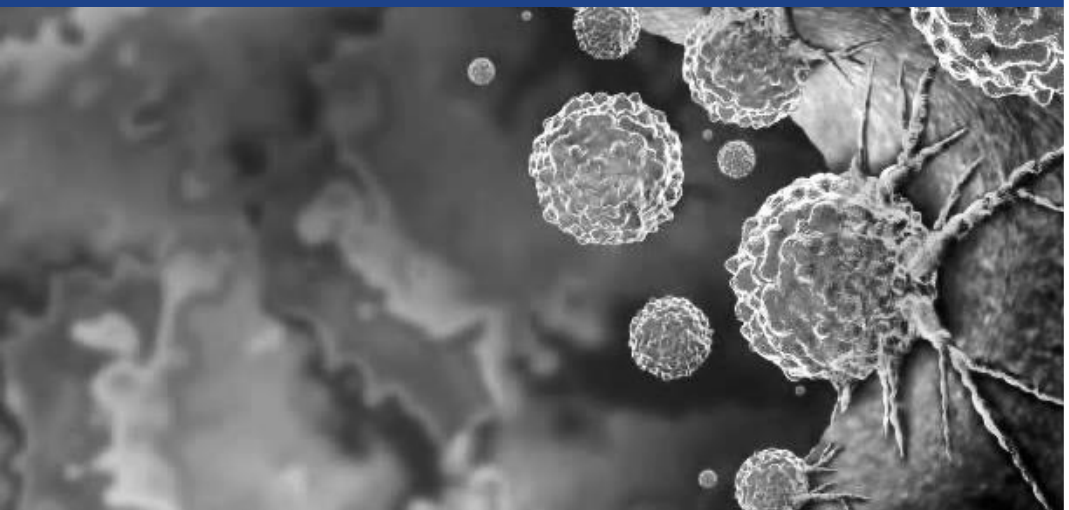


ImmunityBio®



ImmunityBio Investor Presentation

March 2026

Forward-Looking Statements and Intended Use

This presentation and the accompanying verbal remarks contain 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 and other regulatory agency meetings, timelines and potential results therefrom, global expansion efforts, strategic collaborations 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, review and approval 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 ImmunityBio's and/or its collaborators' investigational agents 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 February 23, 2026 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.

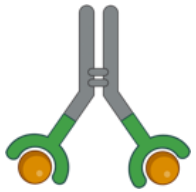
This presentation contains references to our trademarks and trademarks belonging to other entities. Solely for convenience, trademarks and trade names referred to in this presentation, including logos, artwork and other visual displays, may appear without the ® or TM symbols, but such references are 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.

ImmunityBio Platforms

Immunotherapy 2.0: Cytokines + Vaccine + Cellular Therapy Platforms

Fusion Proteins



NK & T Cell Activator
Memory T Cell

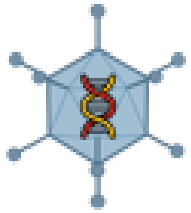
ANKTIVA

In-Vivo Lymphocyte Rescue

NMIBC CIS
US FDA Approved 2024
UK MHRA Approved 2025
EU EMA Approved 2026

NMIBC CIS & NSCLC
Saudi FDA Approved 2026

DNA Vaccine



Adenovirus (hAd5)

hAd5 CEA, MUC1, Brachyury

hAd5 PSA

hAd5 HPV

In-Vivo Lymphocyte Education

Phase 2

Cellular Therapy

CAR-NK

Off-The-Shelf
CAR-NK

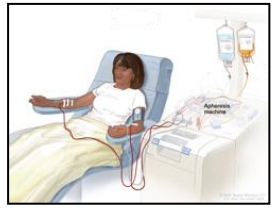
PD-L1 t-haNK

CD19 t-haNK

Ex-Vivo Lymphocyte Rescue

Phase 2

Apheresis



Ex-Vivo Cytokine Proliferation

M-ceNK

Ex-Vivo Lymphocyte Rescue

Phase 2

NASDAQ:IBRX - A Comprehensive Immunotherapy Company with Platforms Orchestrating Natural Killer, CD4+, CD8+ Killer T Cells and Memory T Cells for Durable Complete Responses Across Multiple Tumor Types

2025-2026 Progress

	Indication	Agent	Progress	Status
NMIBC	**BCG Unresponsive CIS with or without Papillary**	**ANKTIVA +BCG**	• ~700% Revenue Growth with J-Code and NCCN Guidelines • UK / MHRA Approval • EU EMA CMA Granted (Feb 2026) • Saudi FDA Approved Jan 2026 (NMIBC + NSCLC)	☑ ☑ ☑ ☑
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	Recombinant BCG	**ANKTIVA +rBCG**	• Expanded Access Program Granted By the FDA	☑
NSCLC	**Lung Cancer Checkpoint Failure**	**ANKTIVA +Checkpoint**	• Ongoing randomized clinical trial phase 3 (ResQ201A) • Trial initiated globally including US, Canada, UK, EU, Asia and Australia	☑ ☑
Lymphopenia	**Solid Tumors (ALC)**	**ANKTIVA**	• Expanded Access Program Granted By the FDA	☑
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ANKTIVA Best-in-Class Duration of Response in BCG Unresponsive NMIBC-CIS Representing Overall Cost-Benefit Value

Nadofaragene	Pembrolizumab	ANKTIVA
DURATION 9.7 Months	DURATION 16.2 Months	DURATION 53+* Months & Ongoing
		Median Not Reached

DURATION is the key efficacy element to avoidance of cystectomy and represents overall cost-benefit value

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

* N=77, FDA Label

Bladder Key Highlights

Anktiva®
(nogapendekin alfa inbakicept-pmln)

- **84%** of patients who responded to ANKTIVA were able to keep their bladders at 36 months[1, 2] (n=100)
- **71%** of study participants had a complete response, meaning their cancer was eliminated[1] (n=100)(95% CI=61.1,79.6)
- **53+** Months Duration of Response, meaning some study participants remained NMIBC-free for over 4 years[1]
- **99%** Disease-Specific Overall Survival at 36 Months[1, 2]

1. Chang, S. (2025, April 26-29). An Update on QUILT-3.032: Durable Complete Responses to NAI (ANKTIVA) Plus BCG Therapy in BCG-Unresponsive CIS With or Without Ta/T1 Papillary Disease and in Papillary Disease without CIS. [Conference Presentation]. AUA2025, Las Vegas, Nevada, United States.

2. These data on time to cystectomy and disease specific survival represent prespecified secondary endpoints in QUILT-3.032. These results should be interpreted with caution and in the context of the study's limitations of a single-arm study.

ANKTIVA Commercial Progress Since Launch

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 Approvals:
   - UK July 2025:
   - EU EMA Approved Feb 2026:
   - Saudi Arabia Jan 2026:

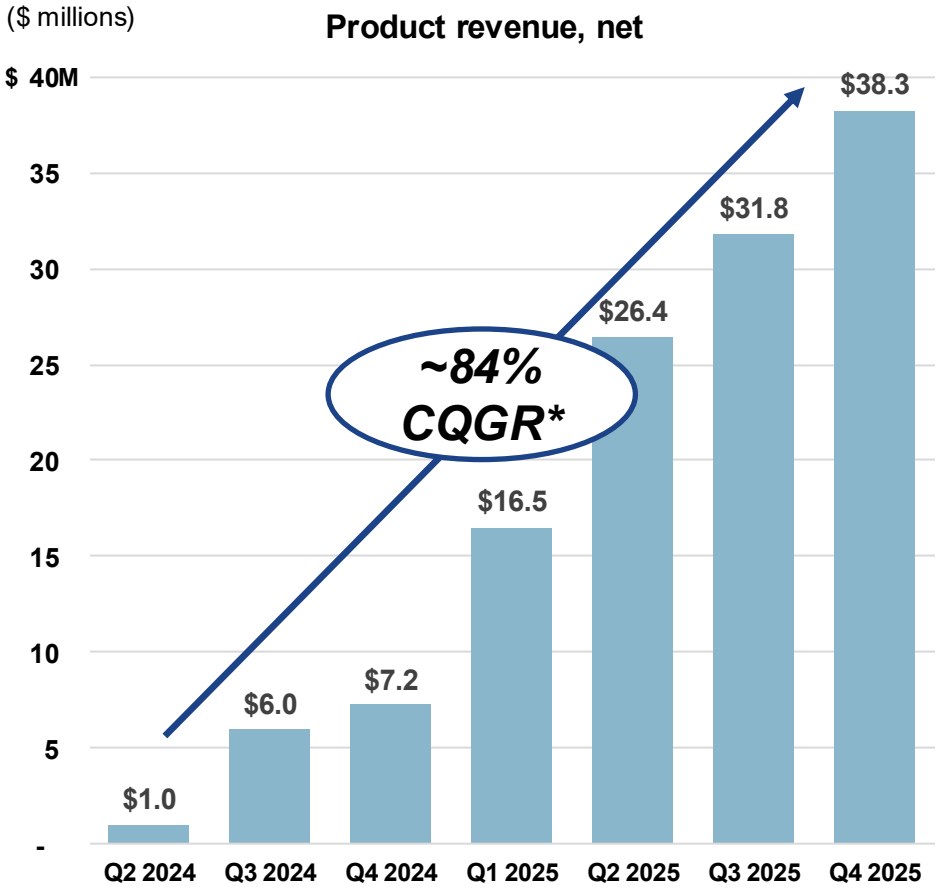
Comprehensive Market Access

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

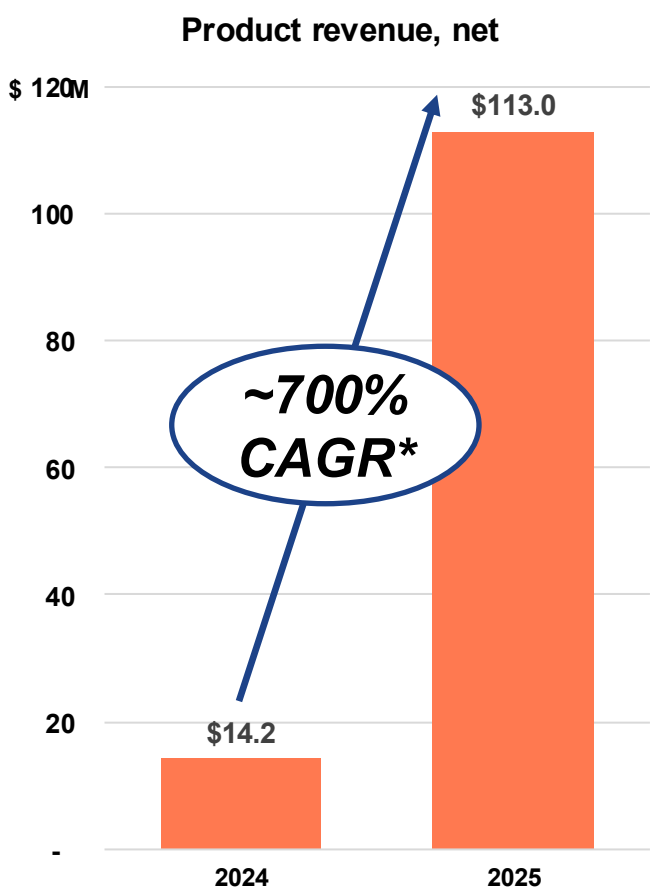
Continued Commercial Execution with Exceptional Growth Potential

Consistent Quarterly Product Revenue Growth

Consistent quarterly product revenue growth…



…has yielded strong year-over-year growth



Anktiva®
(nogapendekin alfa inbakicept-pmln)

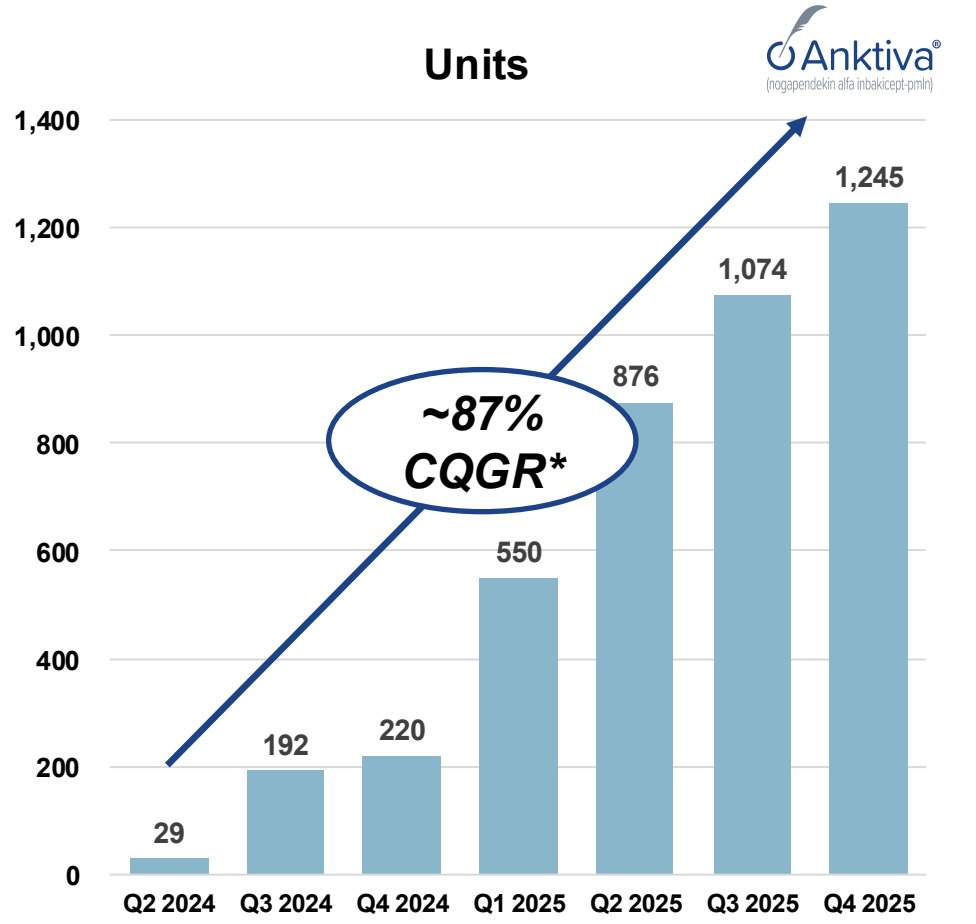
- BCG Unresponsive NMIBC, CIS with or without Papillary
  - FDA Approval
  - NCCN Guidelines
  - MHRA, EMA, SFDA Approval
- Submitted for BCG Unresponsive NMIBC, Papillary Only NCCN Guidelines under review

** Preliminary, unaudited selected financial results are subject to final adjustment and provided as an approximation for Q4 2025 and FY 2025 results.*

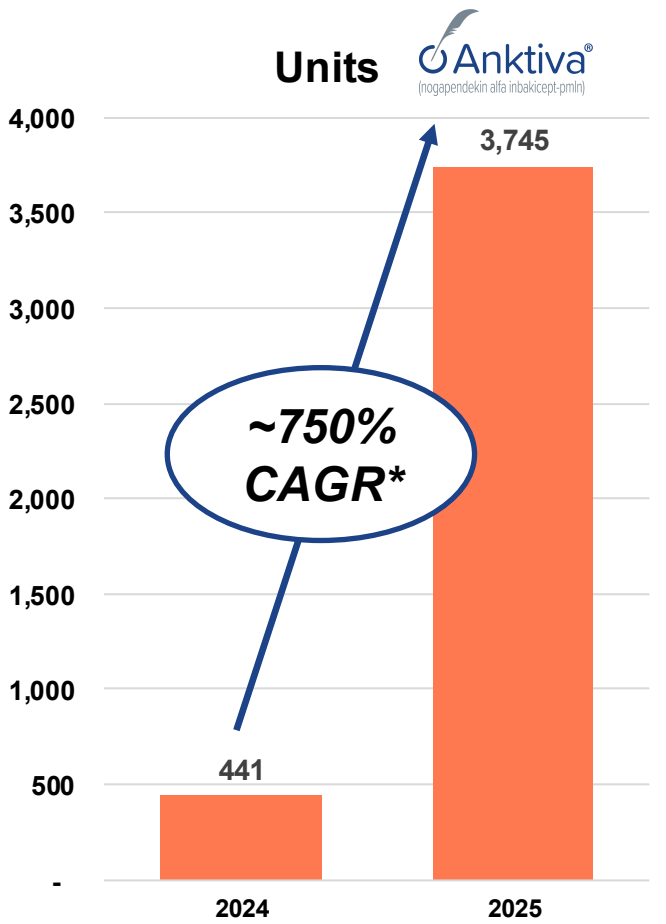
Continued Commercial Execution with Exceptional Growth Potential

Consistent Unit Volume Growth

Consistent monthly adoption



…has yielded strong year-over-year unit growth



** Preliminary, unaudited selected financial results are subject to final adjustment and provided as an approximation for Q4 2025 and FY 2025 results.*

Cash, Cash Equivalents and Marketable Securities

Company Positioned with adequate cash through multiple, high impact catalyst events

Balance Sheet - Cash, cash equivalents and marketable securities			
($ in thousands)	**Q4 2025 [(a)]**	**Q3 2025**	**Q4 2024**
Cash and cash equivalents	$88,334	$60,241	$143,428
Marketable securities	154,484	197,572	6,381
Total Cash and cash equivalents and Marketable securities	$242,818	$257,813	$149,809

(a) Preliminary unaudited selected financial results are subject to final adjustment and provided as an approximation for Q4 2025 and FY 2025 results.

2025-2026 Progress

	Indication	Agent	Progress	Status
NMIBC	**BCG Unresponsive CIS with or without Papillary**	**ANKTIVA +BCG**	• ~700% Revenue Growth with J-Code and NCCN Guidelines • UK / MHRA Approval • EU EMA CMA Granted (Feb 2026) • Saudi FDA Approved Jan 2026 (NMIBC + NSCLC)	☑ ☑ ☑ ☑
	BCG Unresponsive Papillary Only	**ANKTIVA +BCG**	• Papillary Only NCCN Guidelines Submitted for Approval • FDA Type B Meeting Held - sBLA resubmitted	☑ ☑
	BCG Naïve CIS	**ANKTIVA +BCG**	• Enrollment Complete Feb 2026	☑
	Recombinant BCG	**ANKTIVA +rBCG**	• Expanded Access Program Granted By the FDA	☑
NSCLC	**Lung Cancer Checkpoint Failure**	**ANKTIVA +Checkpoint**	• Ongoing randomized clinical trial phase 3 (ResQ201A) • Trial initiated globally including US, Canada, UK, EU, Asia and Australia	☑ ☑
Lymphopenia	**Solid Tumors (ALC)**	**ANKTIVA**	• Expanded Access Program Granted By the FDA	☑
Pancreatic Cancer	**3rd Line or greater Pancreatic**	**ANKTIVA +CAR-NK**	• RMAT Designation Granted by the FDA in Multiply Relapsed Locally Advanced or Metastatic Pancreatic Cancer	☑

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 Enrollment Complete – Full Accrual Achieved Feb 2026

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 clinical trial sites internationally
- Clinical trial is live in India and in progress 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)

2025-2026 Progress

	Indication	Agent	Progress	Status
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Addressing Alternative Source of BCG

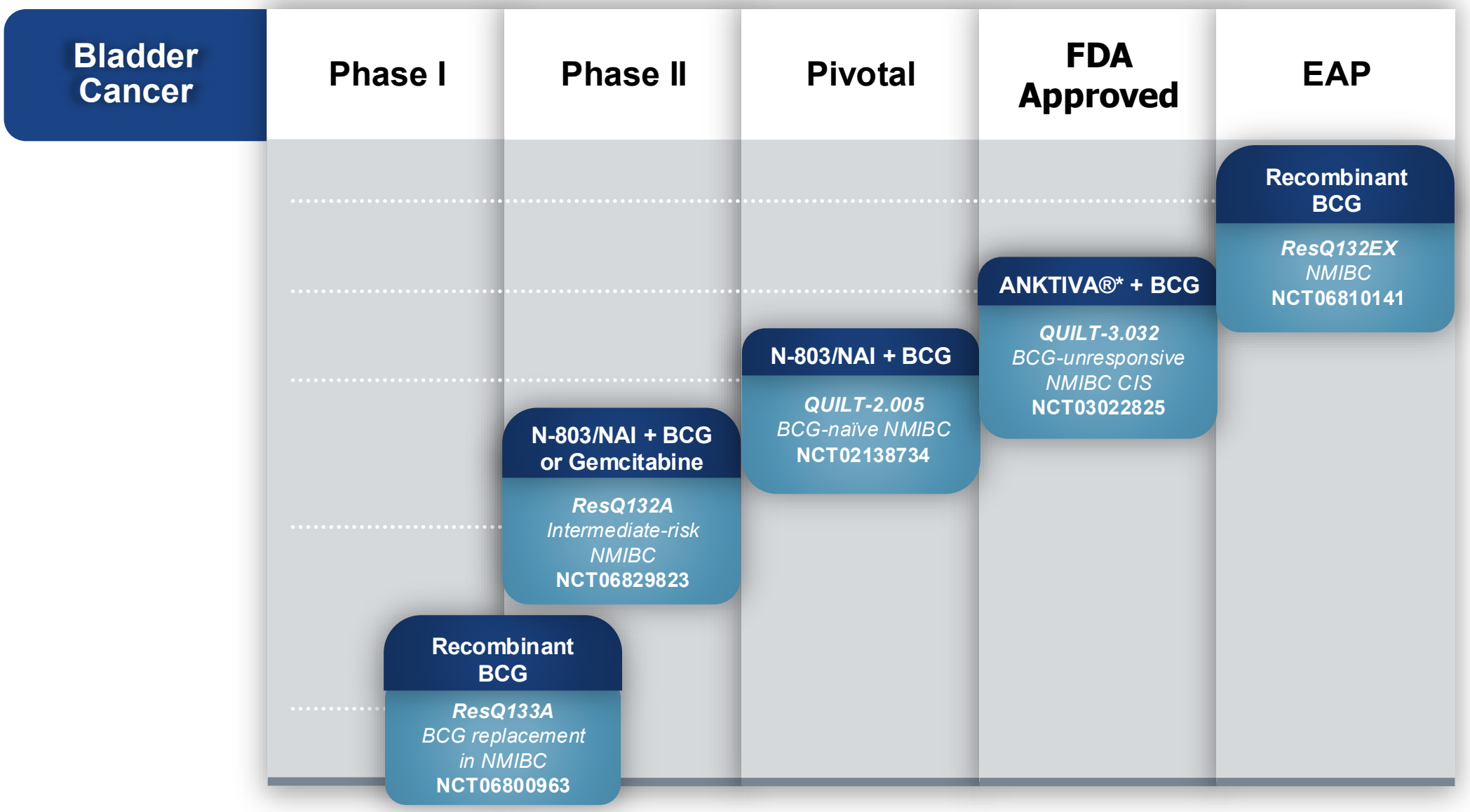
FDA Authorized Expanded Access Program for rBCG (Feb 2025) – Addressing BCG Shortage

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)

Looking Ahead - Anktiva Bladder Pipeline



*nogapendekin alfa inbakicept-pmln.

BCG: Bacillus Calmette-Guérin; CIS: carcinoma in situ; EAP: Expanded Access Program; FDA: Food and Drug Administration; N-803/NAI: nogapendekin alfa inbakicept-pmln; NMIBC: non-muscle invasive bladder cancer.

BCG + Anktiva: Durable Response

2025-2026 Progress

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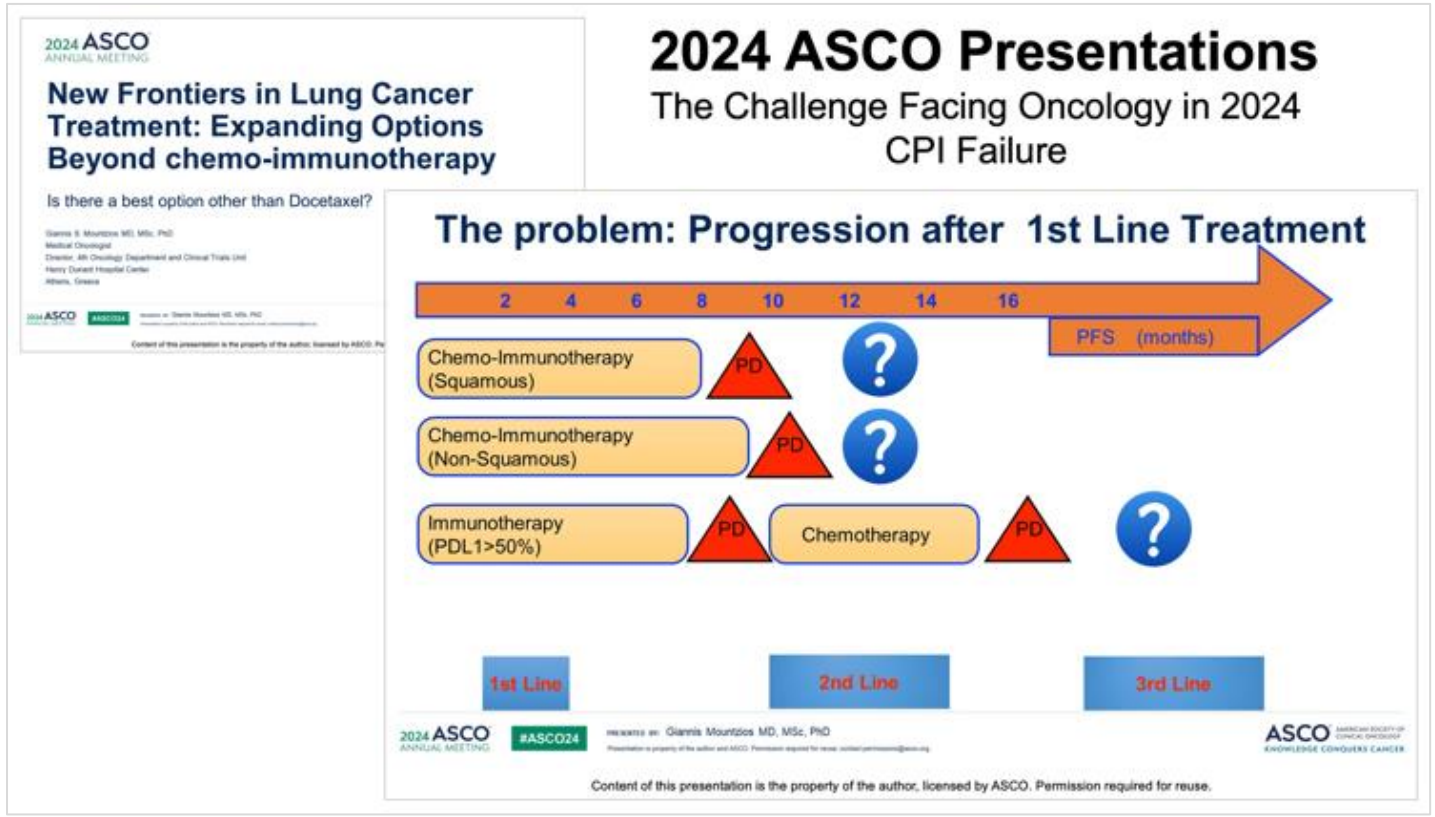
Pancreatic Cancer	3rd Line or greater Pancreatic	ANKTIVA +CAR-NK	• RMAT Designation Granted by the FDA in Multiply Relapsed Locally Advanced or Metastatic Pancreatic Cancer	☑

Checkpoint Failures in Lung Cancer: The Oncology Challenge in 2025



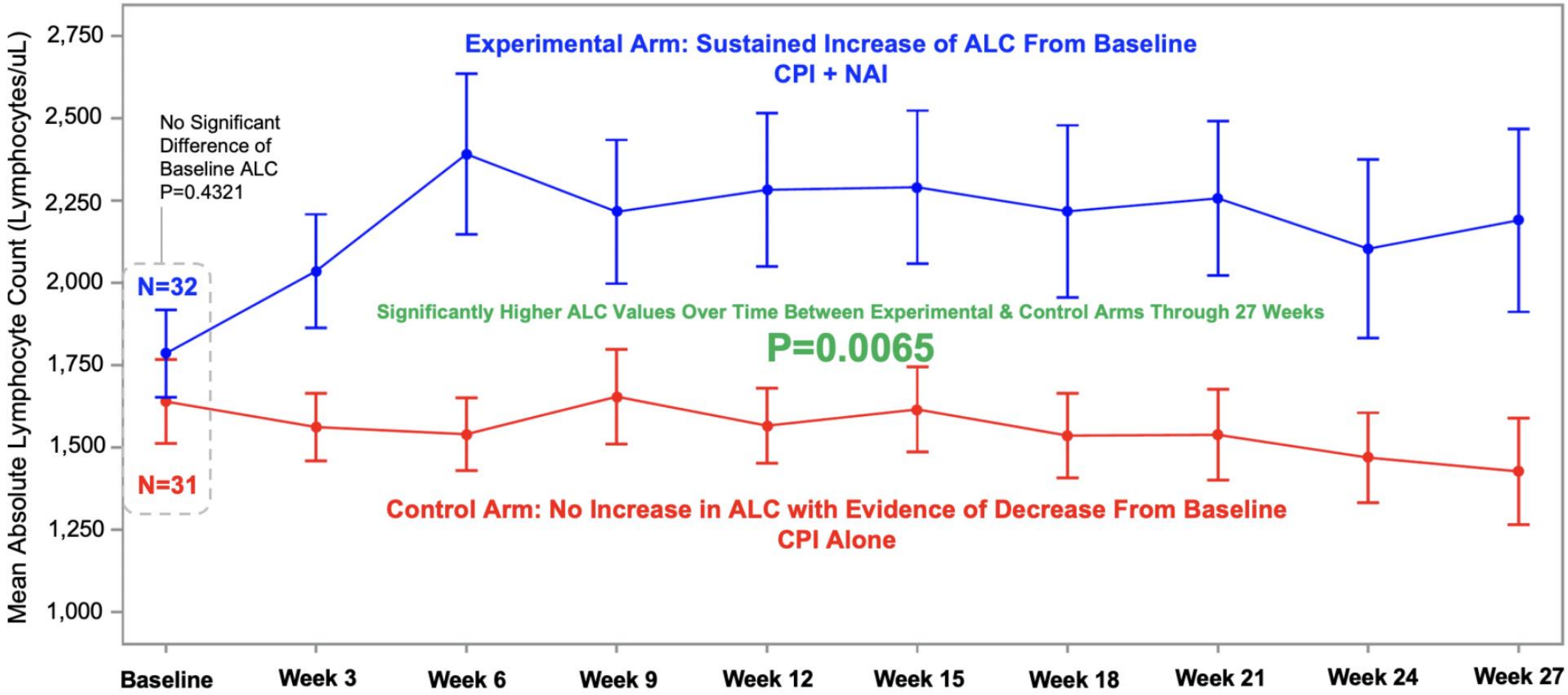
The challenge facing oncology in 2024 CPI failures

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

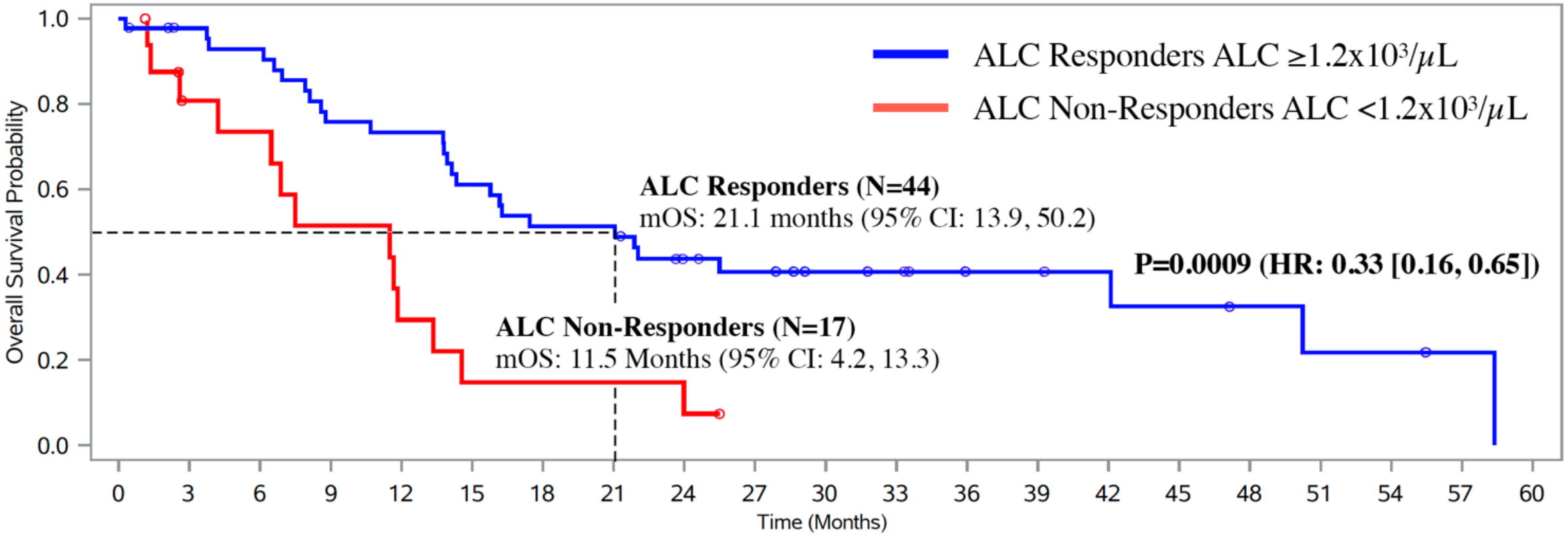
- Overall survival ≤ 10 months
- Treatment options are limited
- NCCN does not recommend retreatment with checkpoint therapy after checkpoint failure

QUILT-2.023: Randomized Clinical Trial: First Line NSCLC ANKTIVA + CPI versus CPI Alone

Randomized Control Study Demonstrates Significant Difference (p=0.0065) in ALC Increase Over Time with ANKTIVA + CPI versus CPI Alone



QUILT-3.055: Restoration and Maintenance of ALC Correlated with Prolonged Overall Survival in 2L and 3L+ NSCLC



World's First Approval for Immunotherapy 2.0 in NSCLC Activation of NK and T Cells in Lung Cancer: ANKTIVA + Checkpoint Inhibitor

ImmunityBio®

NEWS RELEASE

Saudi FDA Grants Accelerated Approval to ImmunityBio's ANKTIVA® In Combination with Checkpoint Inhibitors for Metastatic Non-Small Cell Lung Cancer

- ANKTIVA, in combination with an immune checkpoint inhibitor, has received accelerated approval from the Saudi Food and Drug Authority for the treatment of metastatic non-small cell lung cancer, marking the first approval in the world of a subcutaneously administered IL-15 receptor superagonist that restores immune competence
- ANKTIVA + checkpoint inhibitor represents the first approved chemotherapy-free immunotherapy that activates both natural killer cells and killer T cells, heralding the era of immunotherapy 2.0
- Accelerated approval was granted following SFDA review of clinical data from QUILT-3.055 in second-line and greater NSCLC patients and QUILT-2.023 in first-line NSCLC demonstrating significant immune restoration and a consistent association between lymphocyte recovery with improved survival in checkpoint-experienced patients
- Newly approved therapy supports ImmunityBio's mission to provide access to patients globally who could benefit from this chemotherapy-free combination treatment

CULVER CITY, Calif., January 14, 2026 – ImmunityBio, Inc. (NASDAQ: IBRX), a commercial-stage

Non-Small Cell Lung Cancer (NSCLC):

Therapeutic indication:
ANKTIVA is indicated in combination with immune checkpoint inhibitors for the treatment of adult patients with metastatic NSCLC with disease progression on or after standard of care (immune checkpoint inhibitors alone or in combination with chemotherapy). Patients with actionable genomic alteration should have disease progression on approved therapy for these alterations, before using ANKTIVA in combination with immune checkpoint inhibitors.

Video

QUILT-2.023: Prolonged Survival

2025-2026 Progress

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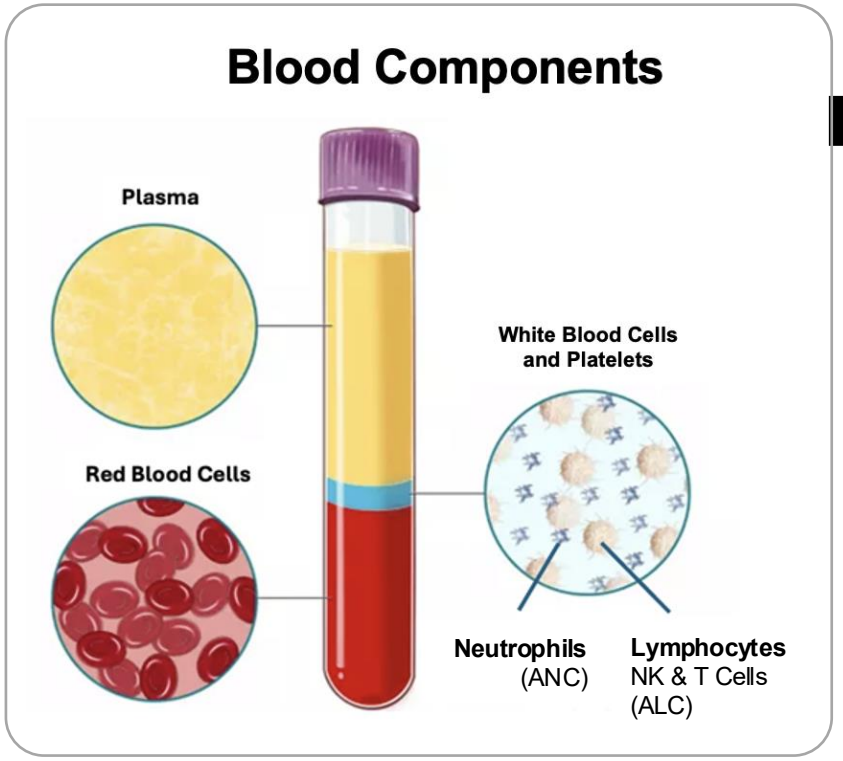
Standard of Care
Destroys the Very Cells that Kill Cancer

Lymphopenia and Low ALC Results in Reduced Overall Survival

Introducing Absolute Lymphocyte Count (ALC) and Lymphopenia



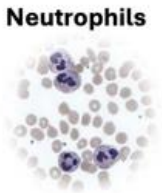
ANC: Absolute Neutrophil Count
ALC: Absolute Lymphocyte Count

Low Red Blood Count

Anemia

EPOGEN

Treats Anemia
Increases Red Blood Cell Production
1989

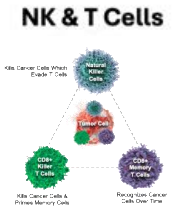


Low Neutrophil Count

Neutropenia

NEUPOGEN

Prevents Infection
Increases Neutrophil Production
1991



Low Lymphocyte Count

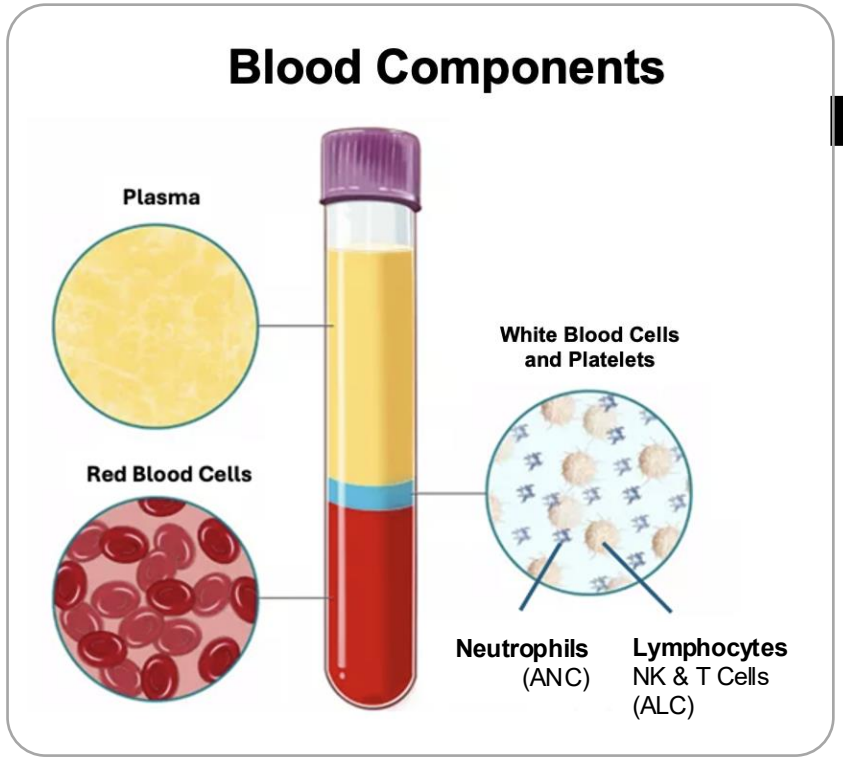
Lymphopenia

Loss of NK & T Cells
Which Kill Cancer &
Induce T Cell Memory

No Treatment for Over 50 Years
The Missing Link

Kills Cancer & Infected Cells

First Lymphocyte Rescue Agent in 50+ Years as Backbone to Chemo-Immunotherapy and Radiotherapy



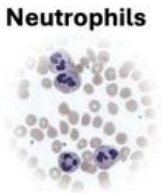
ANC: Absolute Neutrophil Count
ALC: Absolute Lymphocyte Count

Low Red Blood Count

Anemia

EPOGEN

Treats Anemia
Increases Red Blood Cell Production
1989

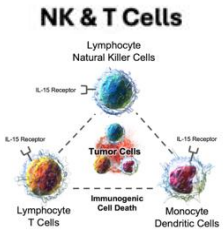


Low Neutrophil Count

Neutropenia

NEUPOGEN

Prevents Infection
Increases Neutrophil Production
1991



Low Lymphocyte Count

Lymphopenia

ANKTIVA

Induces Cancer Cell Death
Regenerates NK and T cells and Induces T Cell Memory

ANKTIVA Approved 2024

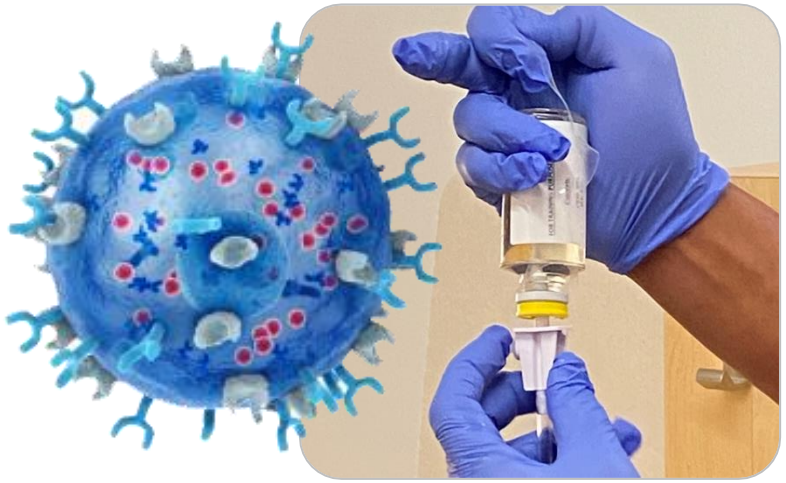
Non-Hodgkin’s Lymphoma Program

QUILT-3.092 Clinical Trial of Non-Hodgkin's Lymphoma Refractory/Relapsed

Study Design:

Open-label, Phase 1/2 Study of CD19 t-haNK as a Single Agent and in Combination With an IL-15 Superagonist (N-803) and Rituximab in Subjects With Relapsed/Refractory Non-Hodgkin Lymphoma. Phase 2 Chemo-Free CAR-NK Trial Launched Feb 2026.

Up to 20 subjects will be enrolled and randomized 1:1 to 1 of 2 cohorts, as outlined below. The initial 3 subjects will be sequentially enrolled in a staggered fashion, with a 7-day interval between each subject to enable the capture and monitoring of any acute and subacute toxicities.



CD19 CAR-NK Cellular Therapy

2025-2026 Progress

	Indication	Agent	Progress	Status
NMIBC	BCG Unresponsive CIS with or without Papillary	ANKTIVA +BCG	• ~700% Revenue Growth with J-Code and NCCN Guidelines • UK / MHRA Approval • EU EMA CMA Granted (Feb 2026) • Saudi FDA Approved Jan 2026 (NMIBC + NSCLC)	☑ ☑ ☑ ☑
	BCG Unresponsive Papillary Only	ANKTIVA +BCG	• Papillary Only NCCN Guidelines Submitted for Approval • FDA Type B Meeting Held - sBLA resubmitted	☑ ☑
	BCG Naïve CIS	ANKTIVA +BCG	• Enrollment Complete Feb 2026	☑
	Recombinant BCG	ANKTIVA +rBCG	• Expanded Access Program Granted By the FDA	☑
NSCLC	Lung Cancer Checkpoint Failure	ANKTIVA +Checkpoint	• Ongoing randomized clinical trial phase 3 (ResQ201A) • Trial initiated globally including US, Canada, UK, EU, Asia and Australia	☑ ☑
Lymphopenia	Solid Tumors (ALC)	ANKTIVA	• Expanded Access Program Granted By the FDA	☑
Pancreatic Cancer	**3rd Line or greater Pancreatic**	**ANKTIVA +CAR-NK**	• RMAT Designation Granted by the FDA in Multiply Relapsed Locally Advanced or Metastatic Pancreatic Cancer	☑

QUILT-88: Effect of Tumor Burden and ALC Levels on Overall Survival

QUILT-88: Overall Survival by ALC Response and Median Baseline CA19-9

	All Subjects (N=50)	Average On-Treatment ALC < 0.5 (10^3/uL) and Baseline CA19-9 >3,852 u/mL (N=27)	Average On-Treatment ALC ≥ 0.5 (10^3/uL) and Baseline CA19-9 ≤3,852 u/mL (N=23)
Median Overall Survival	5.3 Months	3.1 Months	7.1 Months
		P-value: <0.0001, HR: 0.28 (0.14, 0.55)	

Table 10.3

2025-2026 Progress

	Indication	Agent	Progress	Status
NMIBC	**BCG Unresponsive CIS with or without Papillary**	**ANKTIVA +BCG**	• ~700% Revenue Growth with J-Code and NCCN Guidelines • UK / MHRA Approval • EU EMA CMA Granted (Feb 2026) • Saudi FDA Approved Jan 2026 (NMIBC + NSCLC)	☑ ☑ ☑ ☑
	BCG Unresponsive Papillary Only	**ANKTIVA +BCG**	• Papillary Only NCCN Guidelines Submitted for Approval • FDA Type B Meeting Held - sBLA resubmitted	☑ ☑
	BCG Naïve CIS	**ANKTIVA +BCG**	• Enrollment Complete Feb 2026	☑
	Recombinant BCG	**ANKTIVA +rBCG**	• Expanded Access Program Granted By the FDA	☑
NSCLC	**Lung Cancer Checkpoint Failure**	**ANKTIVA +Checkpoint**	• Ongoing randomized clinical trial phase 3 (ResQ201A) • Trial initiated globally including US, Canada, UK, EU, Asia and Australia	☑ ☑
Lymphopenia	**Solid Tumors (ALC)**	**ANKTIVA**	• Expanded Access Program Granted By the FDA	☑
Pancreatic Cancer	**3rd Line or greater Pancreatic**	**ANKTIVA +CAR-NK**	• RMAT Designation Granted by the FDA in Multiply Relapsed Locally Advanced or Metastatic Pancreatic Cancer	☑