

IMMUNOGEN

Current as of October 6, 2017

Nasdaq: IMGN

Forward-Looking Statements

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This presentation includes forward-looking statements based on management's current expectations. These statements include, but are not limited to, ImmunoGen's expectations related to: the occurrence, timing and outcome of potential pre-clinical, clinical and regulatory events related to the Company's and its collaboration partners' product programs; the presentation of preclinical and clinical data on the Company's and its collaboration partners' product candidates; and the financial guidance provided. For these statements, ImmunoGen claims the protection of the safe harbor for forward-looking statements provided by the Private Securities Litigation Reform Act of 1995. Various factors could cause ImmunoGen's actual results to differ materially from those discussed or implied in the forward-looking statements, and you are cautioned not to place undue reliance on these forward-looking statements, which are current only as of the date of these slides. Factors that could cause future results to differ materially from such expectations include, but are not limited to: the timing and outcome of ImmunoGen's and its collaboration partners' research and clinical development processes; the difficulties inherent in the development of novel pharmaceuticals, including uncertainties as to the timing, expense and results of preclinical studies, clinical trials and regulatory processes; ImmunoGen's ability to financially support its product programs; the Company's dependence on its collaborative partners; industry merger and acquisition activity; and other factors more fully described in ImmunoGen's transition report on Form 10-KT for the six-month transition period ended December 31, 2016 and other reports filed with the Securities and Exchange Commission.

ImmunoGen: Progressing Towards Becoming a Fully Integrated Company

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Leadership in antibody-drug conjugates (ADCs)



Phase 3 program with POC established: mirvetuximab soravtansine



Platform generating novel clinical candidates



Technology validated clinically and through partnerships



Improving cash position



Team with deep development and commercial expertise in oncology

Strategic Priorities to Deliver ADCs to Patients

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Execute speed-to-market strategy for mirvetuximab soravtansine
Commercialize by 2020 for platinum-resistant ovarian cancer



Sustain leadership in ADCs through continued platform innovation
Payloads, linkers, methods of conjugation

Accelerate portfolio of novel ADC assets
IMGN779, IMGN632
Jazz Pharmaceuticals

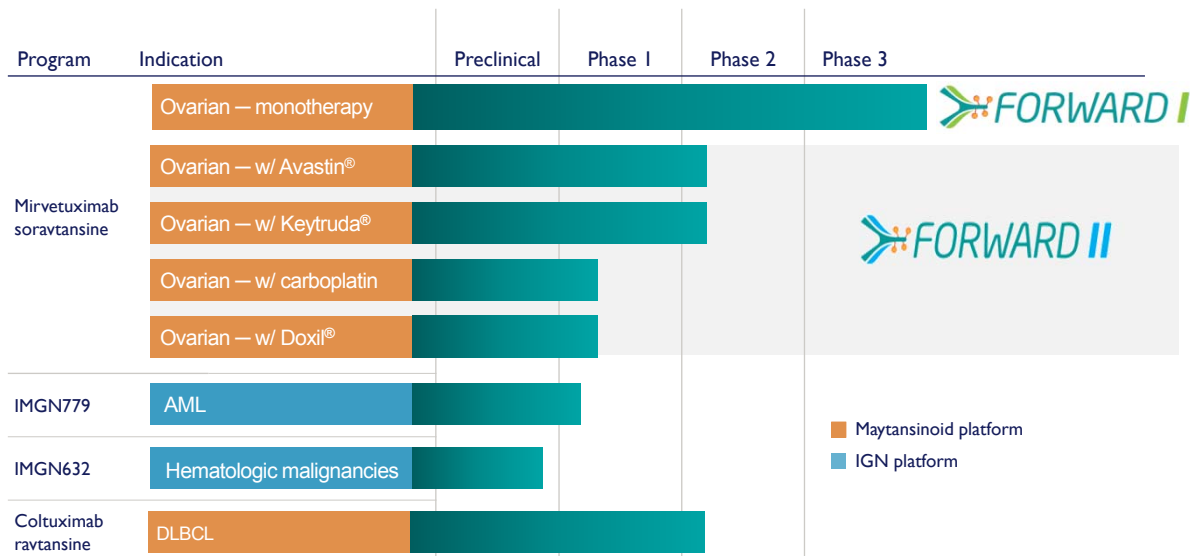


Expand reach and strengthen financials through partnerships
Generate revenue and access capabilities



Differentiated Pipeline of Novel Proprietary Programs

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 AML: acute myeloid leukemia, DLBCL: diffuse large B-cell lymphoma

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Mirvetuximab Soravtansine:

Improving Outcomes in Ovarian Cancer



Differentiated Profile

- Distinct target and mechanism of action
- First ADC to enter pivotal development for treatment of ovarian cancer
- Demonstrated activity in platinum-resistant and platinum-sensitive disease
- Favorable safety profile in clinical studies to date support expanded use as combination agent

Potential Across Multiple Treatment Settings

- Displace single-agent chemotherapy and become preferred agent for combination therapy in ovarian cancer
- Potential to expand into additional folate receptor alpha (FR α)-positive solid tumors, including: non-small cell lung, endometrial, and triple negative breast cancer

#1

LEADING CAUSE OF DEATH FROM GYNECOLOGIC CANCER IN US

5th

MOST COMMON CAUSE OF CANCER DEATH IN WOMEN

~22,000

WOMEN DIAGNOSED ANNUALLY

- Initial treatment entails surgery followed by platinum-based chemotherapy
- Most patients progress despite platinum-based treatment
 - Platinum-sensitive: cancer growth >6 months after platinum treatment
 - 7,500-9,000 platinum-sensitive US and EU patients, respectively, in \geq 2nd line¹
 - Platinum-resistant: cancer growth within 6 months of platinum treatment
 - 19,000-24,000 platinum-resistant US and EU patients, respectively, in \geq 2nd line¹
- Single-agent therapies in platinum-resistant setting have limited response, short progression-free survival (PFS) and challenging side effects



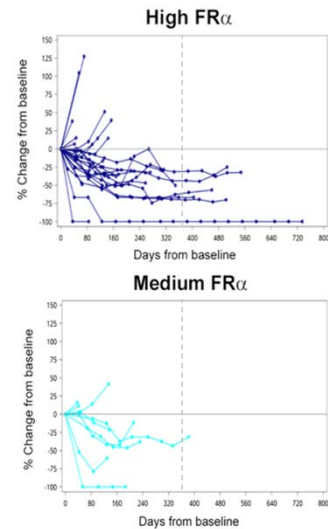
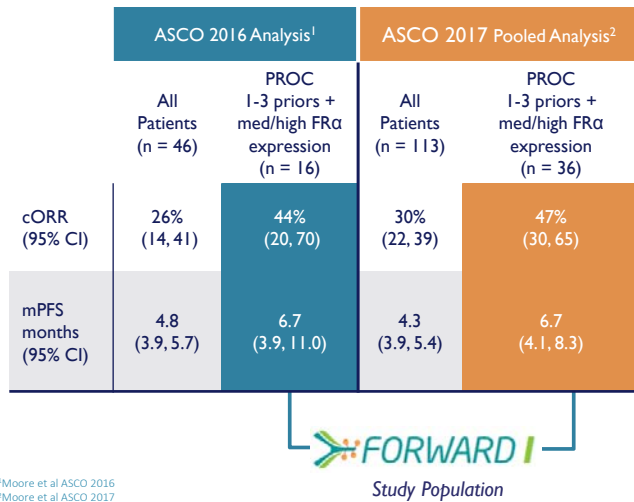
	ORR	mPFS (mos)	Common AEs
Paclitaxel ²	6.7-30.2%	3.4-3.9	Hair loss, neuropathy
Pegylated Liposomal Doxorubicin (PLD) ³	7.8-12.3%	2.1-3.7	Hand foot syndrome
Topotecan ⁴	0.0-19.3%	2.1-4.2	Low blood counts, fatigue

¹Decision Resources Group Ovarian Cancer report (Jun 2017), ^{2,3,4}JCO, vol 33; 32 Nov 2015, Gyn Onc 133(2014) 624-631.
ORR: Objective Response Rate; mPFS: median Progression-Free Survival; AEs: Adverse Events

Consistent Activity with Mirvetuximab over Multiple Cohorts

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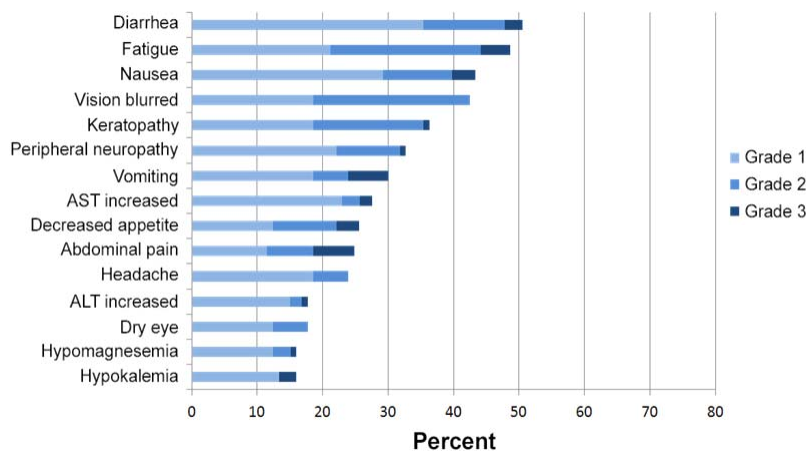
Clinical Benefit Observed in Platinum-Resistant Ovarian Cancer Well Past One Year on Treatment



¹Moore et al ASCO 2016
²Moore et al ASCO 2017
 cORR: confirmed Objective Response Rate

Favorable Safety Profile Demonstrated in Phase I Study

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- Well tolerated across all ovarian cancer cohorts (n = 113)
- Adverse events generally low grade and manageable
- No grade ≥ 3 adverse event occurred in $\geq 10\%$ of patients
- Consistent adverse event profile for FORWARD I eligible subset (n = 36) with the pooled population
- Drug-related AEs leading to discontinuation seen in 10 patients (9%)

Comprehensive Strategy to Maximize Mirvetuximab Reach

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FORWARD I

- Establish initial position through single-agent monotherapy in ovarian cancer

FORWARD II

- Expand benefit through combinations in earlier lines of ovarian cancer



National
Comprehensive
Cancer
Network*



- Broaden use into additional FR α -positive solid tumors (NSCLC, endometrial and triple-negative breast cancer)

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FORWARD I: Initial Point of Market Entry in Ovarian Cancer

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FORWARD I Phase 3 trial for PLATINUM-RESISTANT OVARIAN CANCER



~12,000-14,000
FR α -positive (high/medium)
platinum-resistant US and
EU patients, respectively, in
 $\geq 2^{\text{nd}}$ line¹

ENROLLMENT: 333 patients with FR α -positive (high/medium)
platinum-resistant ovarian cancer treated with up to 3 prior regimens

- >100 sites in U.S., Canada and Europe
- Conducted in partnership with GOG Foundation

Mirvetuximab soravtansine

2:1
randomization

Physician's choice
single-agent chemotherapy*

**PRIMARY ENDPOINT: Progression-Free Survival (PFS)
for high FR α expressers only and for all patients**

(FDA and EMA aligned with primary endpoint, statistical analysis plan and size of safety database)

*Pegylated liposomal doxorubicin (PLD), topotecan, weekly paclitaxel
¹Decision Resources Group Ovarian Cancer report (Jun 2017)
FORWARD I ClinicalTrials.gov identifier: NCT02631876
GOG Foundation: www.gog.org

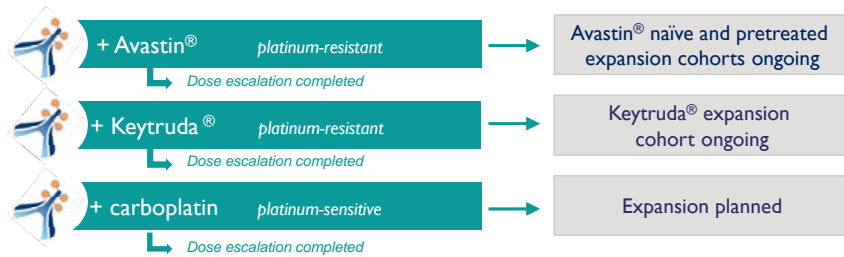
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FORWARD II

Phase Ib/2 trial for EARLIER-LINE TREATMENT OF OVARIAN CANCER



Patients with recurrent FRα-positive ovarian cancer



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FORWARD II ClinicalTrials.gov identifier: NCT02606305

*Preclinical combination data published – Ponte et al, *Neoplasia* 2016 **13**

Current Treatments Indicate Need for Effective Combinations for Both Platinum-Resistant and Platinum-Sensitive Ovarian Cancer

Platinum-Resistant Ovarian Cancer	
AURELIA ¹	
Regimen	Chemo/Bev
Median age	61
Patient population	Platinum resist 1-2 priors 60% - 1 prior 40% - 2 prior
Prior bevacizumab	7%
ORR	27%
mPFS (mo)	6.7 (95% 5.7, 7.9)

Platinum-Sensitive Ovarian Cancer		
	OCEANs ²	GOG213 ³
Regimen	Carbo/Gem	Carbo/Tax
Median age	61	60
Patient population	plat sensitive, 1 prior	plat sensitive, 1 prior
Prior bevacizumab	0	10%
ORR	57%	56%
mPFS (mo)	8.4 (95% 8.3, 9.7)	10.4 (95% 9.7-11)

¹Pujade-Lauraine, et al., *JCO* 32:1302 (2014)

²Aghajanian, et al., *JCO* 30:2039 (2012)

³Coleman, et al., *Lancet Oncol* 18:779 (2017)

Mirvetuximab: Encouraging Activity and Safety in Multiple Combinations

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PHASE IB/2 STUDY*	COMBINATION AGENT		
	Avastin	Keytruda	Carboplatin
Number enrolled	14 (platinum-resistant)	13 (platinum-resistant)	18 (platinum-sensitive)
Median number of prior therapies (range)	6 (2-8)	5 (2-7)	3 (1-5)
Grade 3 or greater adverse events in > 1 patient	Hypertension, small intestinal obstruction	None	Neutropenia, anemia, thrombocytopenia, hypokalemia
Dose limiting toxicity	1 pt with grade 2 neutropenia and thrombocytopenia	None	1 pt with grade 3 vasculitis
Objective response rate	29% (95% CI 8, 58)	NA	65% (95% CI 38, 86)
Median progression free survival (months)	9.5 (95% CI 3.5, 15.2)	NA	12.1 (95% CI 9.0, 15.0)

Full dose of each agent able to be combined

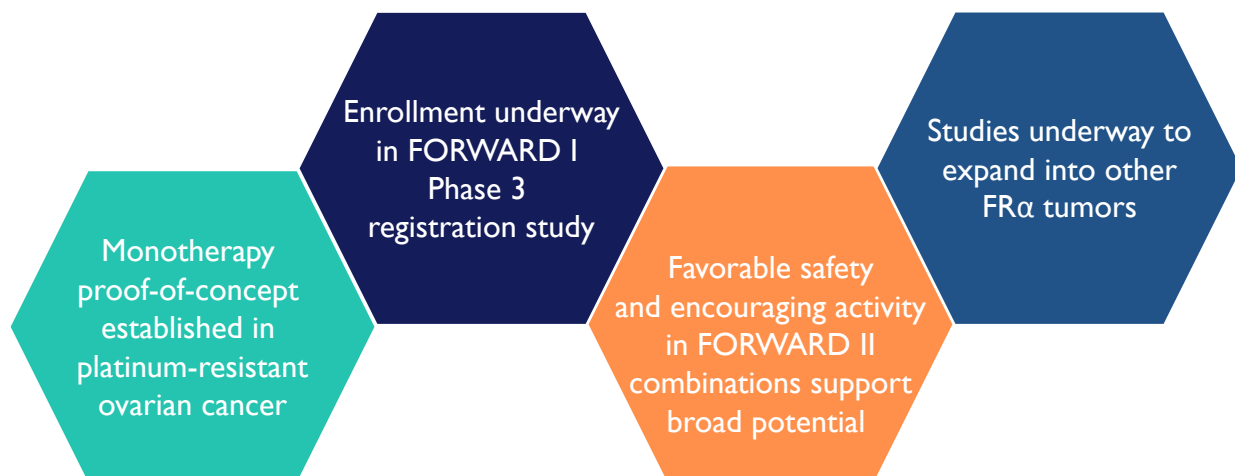
Favorable safety profile with adverse events in-line with known profiles of each agent

Most common low grade AEs: diarrhea, nausea, blurred vision, fatigue

*ASCO 2017 O'Malley D., et al. 15

Mirvetuximab Represents Compelling Treatment Opportunity

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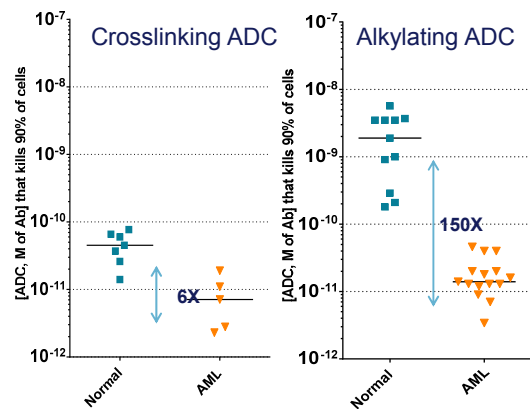
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Accelerating Pipeline of Earlier-Stage Antibody-Drug Conjugates

A New Class of DNA-Acting IGN Payloads

Designed for improved efficacy and tolerability

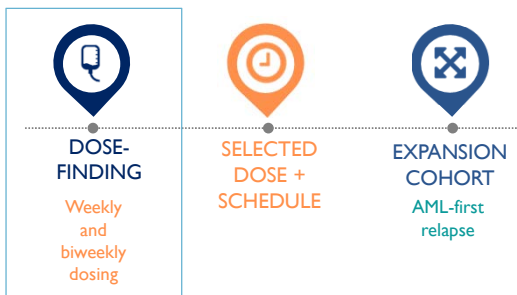
- Indolinobenzodiazepine backbone
 - Payload binds tightly to minor groove of DNA
 - High potency extends ADC technology to targets expressed at lower levels and to tumors resistant to tubulin disrupting agents
 - Monoimine chemistry alkylates one strand of target DNA
 - Retains anti-tumor potency of crosslinking drugs with less toxicity to normal cells
 - Allows for repeat administration with reduced cumulative toxicity compared to a cross-linking payload



IGN DNA alkylator designed to selectively kill AML blasts while sparing normal bone marrow progenitors

IMGN779: targeting CD33

- First ADC with IGN payload
- Enrolling AML patients in Phase I
- Clinical data reported mid-2017, additional data expected in late 2017



IMGN632: targeting CD123

- Next generation IGN payload demonstrated 10X increase in potency
- Peptide linker and proprietary site-specific conjugation yields excellent plasma stability and efficient drug release at tumor site
- Preclinical data reported at 2016 ASH (oral ab #768):
 - Exceptional activity in preclinical AML models, including those resistant to standard of care therapies, with Therapeutic Index >100 fold
 - High *in vitro* potency against AML blasts from patients, including those with mutations/translocations which predict poor prognosis
- IND application 3Q17 and clinical testing expected to begin in 4Q17

Strategic partnership with Jazz Pharmaceuticals

Strategic Partnership with Jazz Pharmaceuticals to Develop and Co-Commercialize ADCs

IMGN779, IMGN632, and an additional early-stage pipeline asset

Partnership

- ImmunoGen to develop until Jazz opt in
- Jazz responsible for subsequent development, registration and commercialization
- After opt in, Jazz and ImmunoGen to share costs

Co-Commercialization

- ImmunoGen opt-in rights to co-commercialize one product in US with profit sharing



Significant Funding

- \$75 MM upfront to ImmunoGen
- Up to \$100 MM in R&D funding
- Per program:
 - Opt-in fees – prior to pivotal study or any time prior to BLA
 - Regulatory milestones
 - Tiered royalties on commercial sales

MODULAR APPROACH → INTEGRATED SYSTEM

Targeting Vehicles

- MAbs
- Probodyes
- Novel protein and chemical binders

Linkers

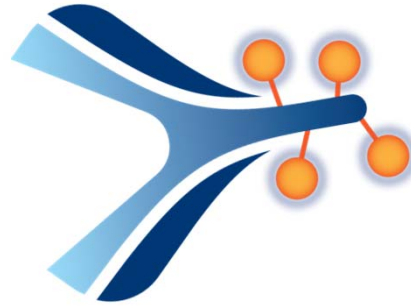
- Thioether
- Peptide
- Hindered disulfides
- Others in development

Payloads

- Tubulin-acting maytansinoids (e.g., DMI, DM4)
- DNA-acting IGNs (e.g., DGN462, DGN549) – alkylate DNA

Conjugate Chemistry and Screening

- Lysine and site-specific conjugation
- Microscale synthesis and screening methods
- Proprietary conjugate CMC capabilities



DRIVES CONTINUED ADC INNOVATION AND LEADERSHIP

ADC Expertise Has Led to Extensive Collaborations

Partner Development Programs	Preclinical	Phase I	Phase 2
Bayer Anetumab ravtansine	█	█	█
Biotest Indatuximab ravtansine	█	█	
AMGEN AMG XXX	█	█	
NOVARTIS	PCA062	█	█
	HKT288	█	█
Lilly LY3076226	█	█	
CYTOMX THERAPEUTICS CX-2009	█	█	
Takeda GCC-targeting ADC	█		

█ Maytansinoid platform
 █ IGN platform



Jazz Pharmaceuticals*



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Significant Progress Towards Our Goals

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Mirvetuximab Soravtansine

- ✓ FORWARD I trial enrolling; activating 100+ trial sites globally
- ✓ Reported pooled analysis data at ASCO 2017 from Phase I ovarian cancer expansion cohorts
- ✓ Reported Phase 1b/2 FORWARD II combination study data at ASCO 2017
- ✓ Established collaborations, including Merck Keytruda® combination, Clovis Rubraca® IST and NCCN clinical studies
- ✓ Published findings in *Journal of Clinical Oncology, Cancer and Neoplasia*

Earlier-Stage Portfolio

- ✓ Reported first clinical data with IMGN779 at EHA 2017
- ✓ Formed a strategic collaboration with Jazz Pharmaceuticals to develop and commercialize IMGN779, IMGN632 and another early-stage pipeline asset

Partnerships

- ✓ CytomX advanced CX-2009 to Phase I testing
- ✓ New partnership with Jazz

Operations

- ✓ Significantly strengthened cash position through sale of IMGN529 to Debiopharm,
- ✓ Amended agreements with Sanofi
- ✓ Convertible debt exchange

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Milestones Supporting Execution of Strategic Objectives

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EXECUTE SPEED-TO-MARKET STRATEGY FOR MIRVETUXIMAB SORAVTANSINE

- FORWARD I registration trial
 - Enrolling patients
 - Activating 100+ sites globally in 2017
- Clinical data presentations
 - Publish eye drop cohort findings
 - Additional combination data from FORWARD II (expected 2018)

DRIVE INNOVATION AND ACCELERATE PORTFOLIO OF EARLIER-STAGE ADCs

- IMGN779
 - Expanded Phase I clinical data (expected 4Q17)
 - Preclinical combination data (expected 4Q17)
- IMGN632
 - IND submission (completed 3Q17)
 - Phase I initiation (expected 4Q17)

EXPAND INNOVATION AND MAINTAIN FINANCIAL STRENGTH THROUGH PARTNERSHIPS

- Partner progress
- New collaboration with Jazz Pharmaceuticals (announced 3Q17)

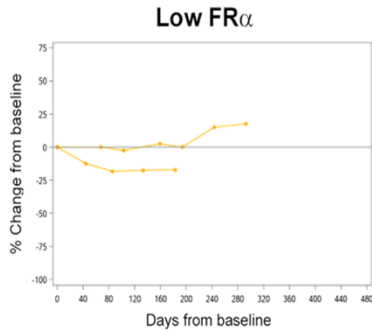
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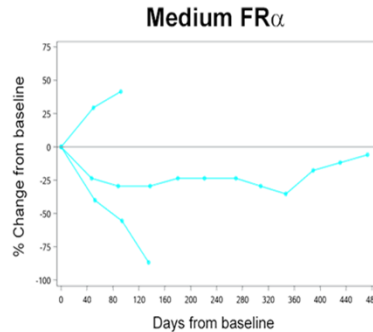
- Phase 3 registration trial underway with mirvetuximab
- Comprehensive, validated ADC technology portfolio
- Robust pipeline of differentiated ADCs
- Financial strength and discipline
- Experienced team

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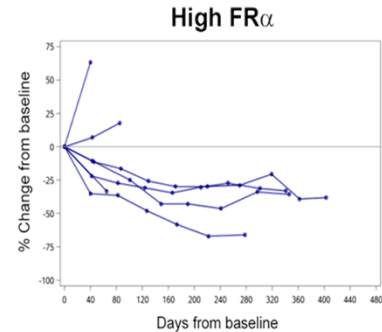
Clinical Activity Observed in Heavily Pre-treated Patients in FORWARD II Cohort



Consistent depth and duration of response associated with FR α - expression

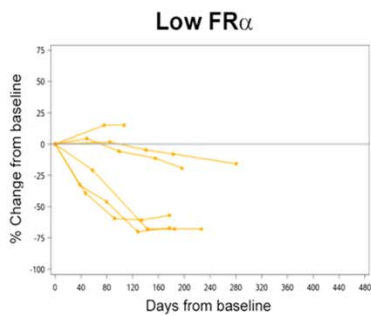


Clinical benefit observed well beyond 1 year

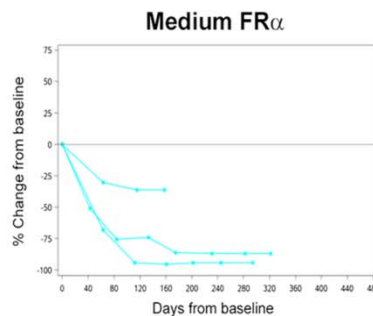


Data support planned expansion cohorts for combination

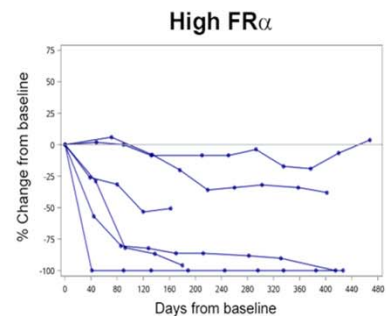
Clinical Activity Observed in Heavily Pre-treated Patients in FORWARD II Cohort



Combination active in low expressors



Consistent depth of response associated with FR α -expression



Clinical benefit observed well beyond 1 year

Potential avenue for exploration in platinum-sensitive setting