Årsregnskap for regnskapsåret 2020

Organisasjonsnr:	992 219 688
Navn/foretaksnavn:	BERGENBIO ASA
Forretningsadresse:	Jonas Lies vei 91
	5009 BERGEN

Brønnøysundregistrene
04.08.2022

2021 100238

Brønnøysundregistrene – Regnskapsregisteret

VEDLEGG TIL ÅRSREGNSKAP 2020

BERGENBIO ASA Jonas Lies vei 91 5009 BERGEN	Organisasjonsnr. 992 219 688	ASA

Registrerte opplysninger per		Eventuelle endringer dette regnskapsåret	
06.09.2021			
Startdato	**Avslutningsdato**	**Startdato**	**Avslutningsdato**
01.01.2020	31.12.2020		

Konsernforhold	Morselskap	Endret konsernforhold	
Foreninger som følger regler for frivillig virksomhet, kan ikke være morselskap	JA	☐ Morselskap	☐ Ikke morselskap

Kun for aksjeselskap som har meldt fravalg av revisjon

Selskapet har besluttet at årsregnskapet ikke skal revideres	☐ Ja
Årsregnskapet er utarbeidet av ekstern autorisert regnskapsfører	☐ Ja
Ekstern autorisert regnskapsfører har i løpet av regnskapsåret bistått ved den løpende regnskapsføringen eller utført andre tjenester for selskapet enn å utarbeide årsregnskapet	☐ Ja

Årsregnskapet er satt opp etter reglene for frivillig virksomhet ☐ Avkrysning er kun aktuelt for foreninger (FLI) som er registrert i Frivillighetsregisteret

Hvis enheten ikke følger norsk regnskapslov eller frivillighetsregisterloven, kryss av	☒ IFRS selskap	☒ IFRS konsern
Hvis enheten velger å avvike fra regnskapsloven § 6-1, kryss av	☐ Funksjon selskap	☐ Funksjon konsern

Følges regnskapsreglene for små foretak? ☐ Ja ☒ Nei

Jeg bekrefter at vedlagte årsregnskap er fastsatt av kompetent organ den Dato

Sted/dato, Underskrift av representant for enheten

Bare til bruk for Regnskapsregisteret

G ☒ NYVE ☐ Admr ☐ Kregn Ja ☒ Nei ☐ Aktiv. regn ☐

M ☐ Rets ☐ Ant.s 112

ov.b	årsb	res	bal	e.bal	gj.bal	rev	i-rev	k-res	k-bal	k-n	k-rev	i-k-rev	n
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

k-regn	kto	d.k	ik-fv	konsf	ifrs	fr-rev					funk	u.off	brev
☐	☐	☐	☐	☐	☐	☐					☐	☐	☐

BR-1001-11

Brønnøysundregistrene – Regnskapsregisteret

VEDLEGG TIL ÅRSREGNSKAP 2020

BERGENBIO ASA Jonas Lies vei 91 5009 BERGEN	Organisasjonsnr. 992 219 688	ASA

Registrerte opplysninger per		Eventuelle endringer dette regnskapsåret	
19.03.2021			
Startdato	**Avslutningsdato**	**Startdato**	**Avslutningsdato**
01.01.2020	31.12.2020		

Konsernforhold	Morselskap	Endret konsernforhold	
Foreninger som følger regler for frivillig virksomhet, kan ikke være morselskap	JA	☒ Morselskap	☐ Ikke morselskap

Kun for aksjeselskap som har meldt fravalg av revisjon

Selskapet har besluttet at årsregnskapet ikke skal revideres	☐ Ja
Årsregnskapet er utarbeidet av ekstern autorisert regnskapsfører	☐ Ja
Ekstern autorisert regnskapsfører har i løpet av regnskapsåret bistått ved den løpende regnskapsføringen eller utført andre tjenester for selskapet enn å utarbeide årsregnskapet	☐ Ja

Årsregnskapet er satt opp etter reglene for frivillig virksomhet ☐ Avkrysning er kun aktuelt for foreninger (FLI) som er registrert i Frivillighetsregisteret

Hvis enheten ikke følger norsk regnskapslov eller frivillighetsregisterloven, kryss av	☒ IFRS selskap	☒ IFRS konsern
Hvis enheten velger å avvike fra regnskapsloven § 6-1, kryss av	☐ Funksjon selskap	☐ Funksjon konsern

Følges regnskapsreglene for små foretak? ☐ Ja ☒ Nei

Jeg bekrefter at vedlagte årsregnskap er fastsatt av kompetent organ den Dato 19.03.2021

Sted/dato, Underskrift av representant for enheten
Bergen, 06.09.2021 Carina Bruvik Drange

Bare til bruk for Regnskapsregisteret

G ☐ NYVE ☐ Admr ☐ Kregn Ja ☐ Nei ☐ Aktiv. regn ☐

M ☐ Rets ☐ Ant.s ☐☐☐

☐ ov.b	☐ årsb	☐ res	☐ bal	☐ e.bal	☐ gj.bal	☐ rev	☐ i-rev	☐ k-res	☐ k-bal	☐ k-n	☐ k-rev	☐ i-k-rev	☐ n
☐ k-regn	☐ kto	☐ d.k	☐ ik-fv	☐ konsf	☐ ifrs	☐ fr-rev					☐ funk	☐ u.off	☐ brev

☐☐ ☐☐ ☐☐ ☐☐ ☐☐

BR-1001-11

Skattedirektoratet

Saksbehandler	Deres dato	Vår dato
Rune Tystad	20.04.2015	12.05.2015
Telefon	Deres referanse	Vår referanse
977 59 464	Petter Nielsen	2015/449349

BERGENBIO AS
Jonas Lies vei 91
5009 BERGEN

Tillatelse til å utarbeide årsregnskap og årsberetning på engelsk for BerGenBio AS, org.nr. 992 219 688

Vi viser til deres brev av 20. april 2015 hvor dere søker om dispensasjon fra kravet til å utarbeide årsregnskap og årsberetning på norsk språk for BerGenBio AS.

Skattedirektoratet gir på bakgrunn av en konkret helhetsvurdering BerGenBio AS tillatelse til å utarbeide årsregnskap og årsberetning på engelsk språk, jf. regnskapsloven § 3-4 tredje ledd. Dispensasjonen forutsetter at opplysningene som vedtaket baserer seg på ikke endres vesentlig, samt at selskapet gis tillatelse til å rapportere på engelsk til Oslo Børs i tilfelle børsnotering.

Kopi av dette brevet må sendes Regnskapsregisteret i Brønnøysund sammen med årsregnskapet. Det påligger den regnskapspliktige å dokumentere ved dette brev at tillatelsen er gitt.

Bakgrunn
BerGenBio AS er et bioteknologiselskap som utvikler nye legemiddelkandidater for behandling av aggressive legemiddelresistente krefttyper og har hovedkontor i Bergen. Selskapet arbeider i en meget internasjonal bransje hvor det er begrenset med kompetanse på ekspertnivå. Dette reflekteres i nasjonalitetene til både ledelse og øvrige ansatte i selskapet, - under halvparten av de ansatte i Norge er norske. Alle sentrale aktører og samarbeidspartnere innen denne bransjen behersker og benytter engelsk. Selskapet benytter også engelsk som arbeidsspråk. Av styremedlemmer i BerGenBio er 3 medlemmer, inkludert styrets leder, engelskspråklige. Videre er aksjonærene i BerGenBio i hovedsak profesjonelle/institusjonelle investorer. Blant selskapets ledelse på 7 personer er det kun en norskspråklig. Dette innebærer at arbeidsspråket i selskapet og all kommunikasjon både internt i selskapet og eksternt gjøres på engelsk. Informasjon som blir gjort tilgjengelig til aksjonærer i form av kvartalsrapporter, statusoppdatering og annen type informasjon blir kun gjort på engelsk. BerGenBio AS planlegger en notering på Oslo Børs mot slutten av 2015 og vil da søke dispensasjon fra vphl § 5-13 vedrørende krav til språk ved informasjonspliktige opplysninger. Etter selskapets vurdering er det ingen forhold rundt selskapets finansiering som skulle tilsi behov for regnskap på norsk. Den norske versjonen utarbeides kun for å tilfredsstille regnskapsloven.

Skattedirektoratets vurdering
Etter regnskapsloven § 3-4 tredje ledd skal "*årsregnskapet og årsberetningen ... være på norsk. Departementet kan ved ... enkeltvedtak bestemme at årsregnskapet og/eller årsberetningen kan*

Postadresse
Postboks 9200 Grønland
0134 Oslo

Besøksadresse:
Se www.skatteetaten.no
Org.nr: 996250318
E-post: skatteetaten.no/sendepost

Sentralbord
800 80 000
Telefaks
22 17 08 60

være på et annet språk."

I Ot. prp. nr. 42 (1997-1998) Om lov om årsregnskap m.v., er det uttalt følgende om regnskapslovens formål, jf. pkt. 1.1:

> *Regjeringen har som siktemål at regnskapsloven skal bidra til informative regnskaper for ulike grupper av regnskapsbrukere. Regnskapsbrukerne er dels investorer og kreditorer som tilfører kapital til foretakene, og dels andre grupper som har interesse av å vite hvordan foretaket drives, f.eks. de ansatte og lokalsamfunnet. Informasjonen til kapitalmarkedet skal gi grunnlag for riktig prising av finansielle objekter. Riktig prisdannelse på aksjer er en forutsetning for at ressursbruken i samfunnsøkonomien skal bli best mulig. Gode regnskaper vil også gjøre det vanskeligere for markedsdeltakere å ta ut spekulasjonsgevinster med basis i skjevt fordelt informasjon.*

Det fremgår således at et av hovedformålene med regnskapsloven er å bidra til *"informative regnskaper for ulike grupper av regnskapsbrukere"*. Regnskapsbrukere vil omfatte, jf. uttalelsen i proposisjonen, blant andre investorer, kreditorer, ansatte og lokalsamfunnet.

Det er etter Skattedirektoratets vurdering derfor avgjørende ved vurdering av om dispensasjon fra kravet til å utarbeide årsregnskap og/eller årsberetning på norsk kan gis, at det ikke foreligger mulige brukere av regnskapsinformasjon som blir vesentlig berørt negativt ved en eventuell dispensasjon.

Som nevnt ovenfor er det særlig hensynet til brukerne av regnskapsinformasjon som skal vurderes ved en dispensasjonssøknad. I denne vurderingen har Skattedirektoratet lagt vekt på at selskapet arbeider i en meget internasjonal bransje hvor alle sentrale aktører og samarbeidspartnere behersker og benytter engelsk. Videre er det vektlagt at selskapets arbeidsspråk er engelsk og at 3 av styremedlemmene, inkludert styrets leder, er engelskspråklige.

Vennligst oppgi vår referanse ved henvendelser i saken.

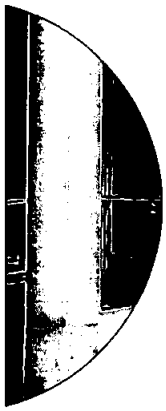
Med hilsen

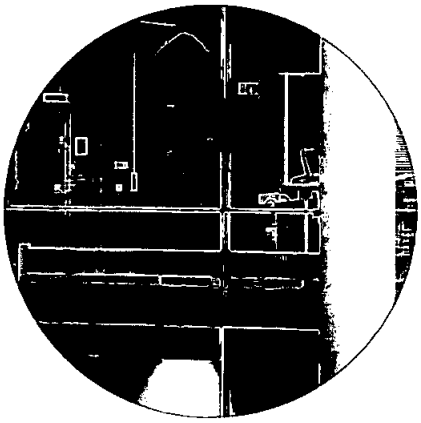
Torstein Kinden Helleland
seniorrådgiver
Rettsavdelingen, foretaksskatt
Skattedirektoratet

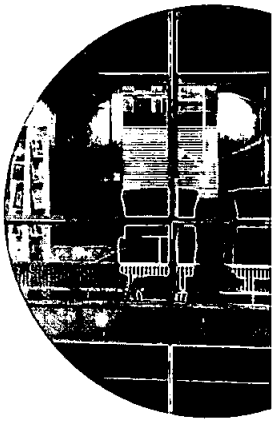
Rune Tystad

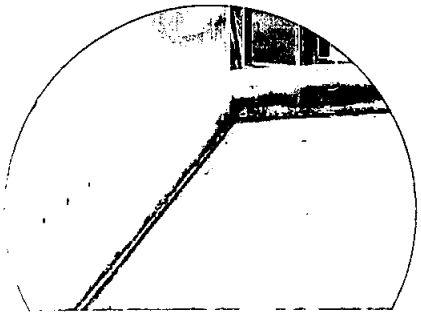
Dokumentet er elektronisk godkjent og har derfor ikke håndskrevne signaturer

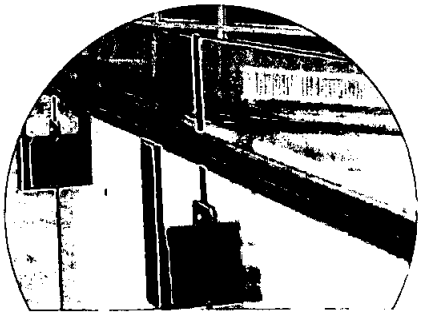
BerGenBio





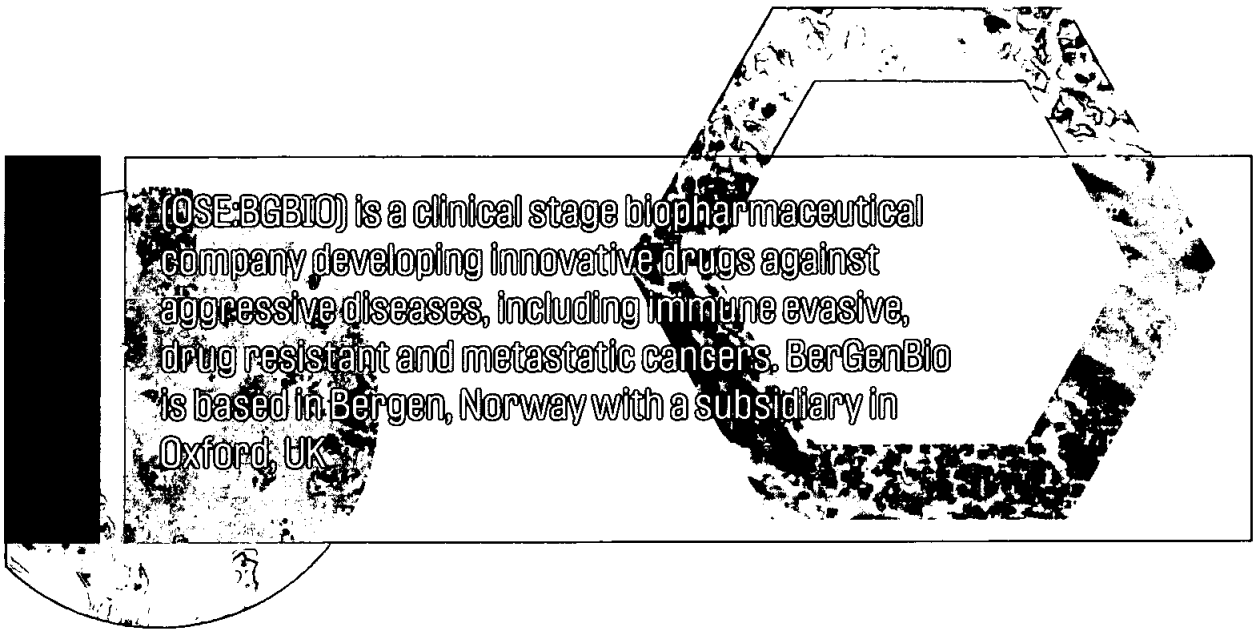


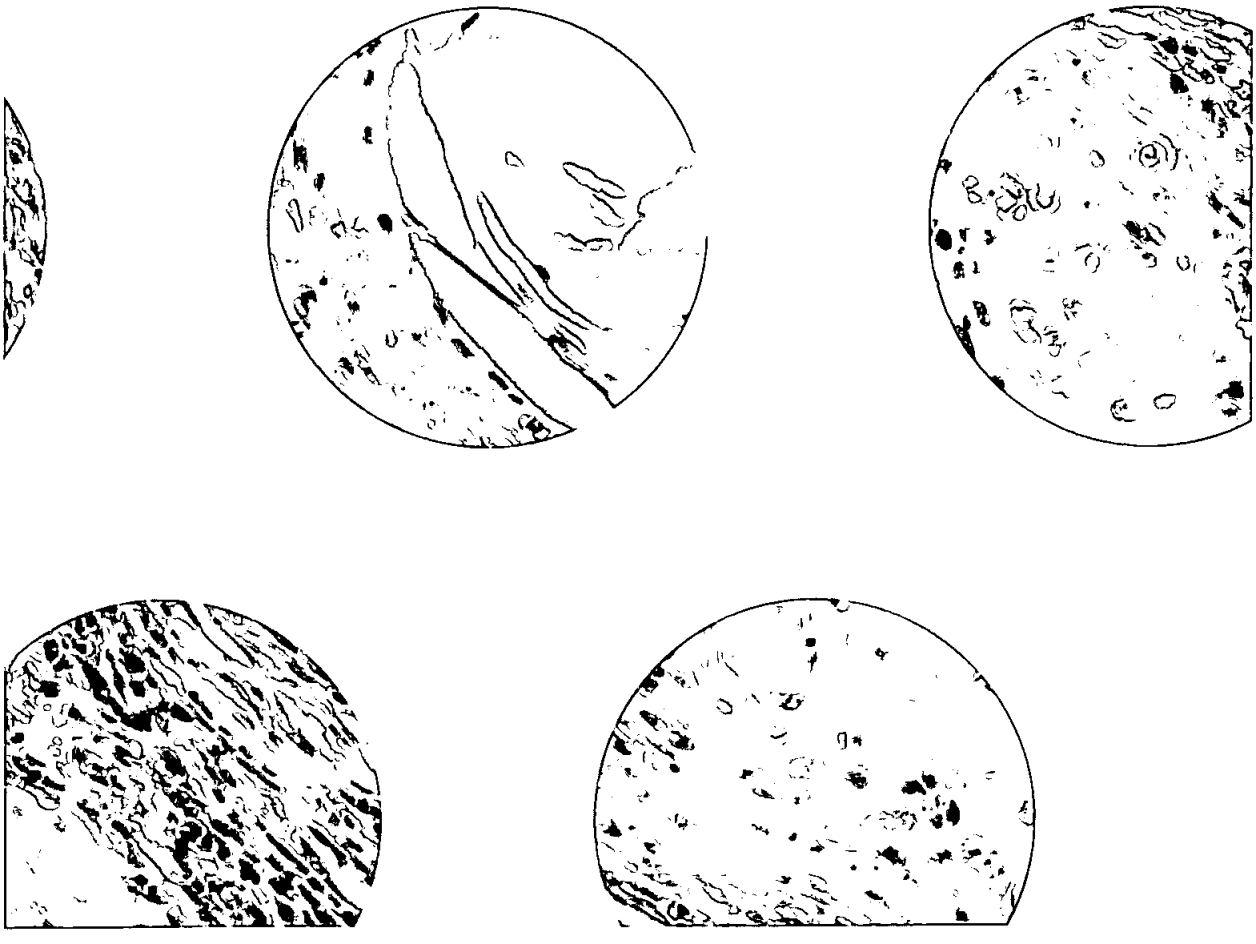


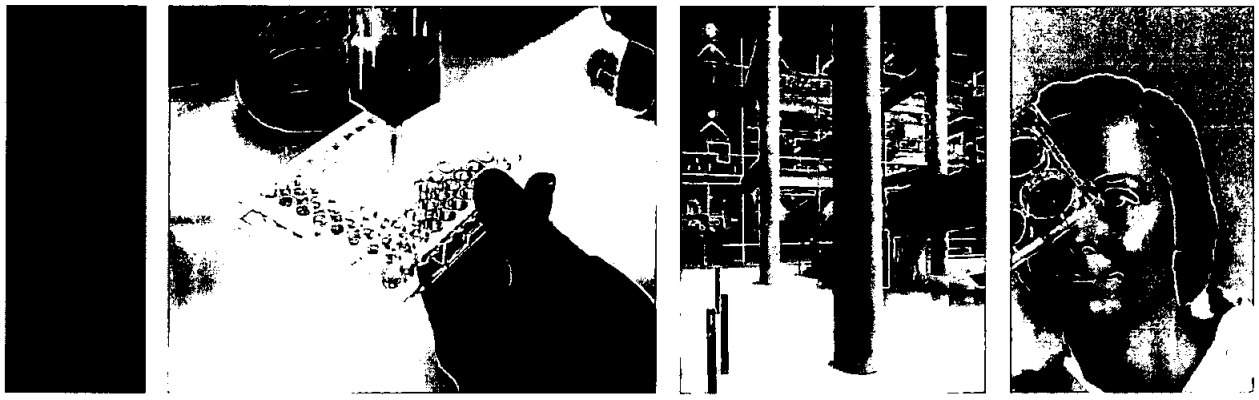


BerGenBio

Annual Report & Accounts 2020







Contents

Chairman's Statement

A YEAR OF CLINICAL PROGRESS IN ONCOLOGY AND COVID-19

Dear Shareholders

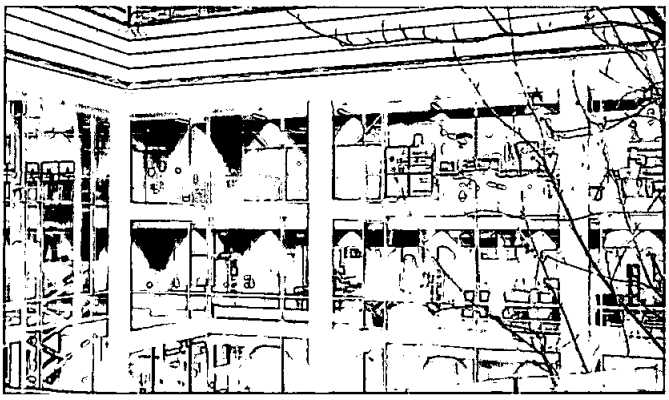
2020 was a challenging year on many levels, with the impact of the COVID-19 pandemic affecting the lives of millions around the world. For the healthcare sector, the challenge was particularly profound, as we and many of our peers found ourselves operating in an environment inhospitable to the continuation of the research and clinical activities central to the progression of our work, as well as having to spearhead the response to the biggest global healthcare crisis in recent memory.

We were aware of pre-clinical studies that have shown the potential of AXL inhibition in the treatment of viruses. This potential was validated by the decision of the UK government in April to select bemcentinib as the first candidate in the ACCORD study, a multicentre, seamless, Phase II adaptive randomisation platform trial to assess the efficacy and safety of multiple candidate agents for the treatment of COVID-19 in hospitalised UK NHS patients. Whilst funding was suspended by UKRI in July due to the falling number of hospitalised COVID-19 patients, this was reinstated in September following a rise in UK cases, and the trial recruitment resumed in December. In addition, we have initiated our own sponsored studies in South Africa and India, countries of high COVID-19 incidence, to continue obtaining the necessary data to determine the potential efficacy of bemcentinib in COVID-19 patients.

We are hopeful that bemcentinib can play a significant role in the global effort to find suitable treatment options for COVID-19 patients, which has had such serious implications for so many people and thereby ease pressures on hospital intensive care units, and ultimately treat thousands of patients.

The central focus of our efforts, oncology, remains unchanged. Throughout the year, and despite the pandemic, we have continued our work to explore the potential of bemcentinib as a first and second-line

Reflecting on the events of the past year, as Chairman of BerGenBio I am very proud of the way in which our company and staff have adapted, ensuring the continuation of our important work in oncology, where we hope to establish our AXL targeting therapies as a cornerstone treatment for cancer, but also in utilising our expertise to directly address the effort in combatting the virus.



cancer treatment, with specific focus on non-small cell lung cancer (NSCLC), the largest cancer killer worldwide, and leukemia (AML and MDS). These diseases remain areas of high unmet need, with low survival rates amongst those who fail to respond to now well-established immunotherapy treatments such as checkpoint inhibitors, or who are too weak to undergo additional courses of chemotherapy.

Looking forward we will build on the progress we have made into the coming year, with the aim of advancing bemcentinib into late-stage trials in NSCLC and AML. The company remains well funded to achieve this goal, securing a NOK 520 million fundraising in May 2020 and having maintained tight cost controls throughout.

As a responsible corporate citizen, we have a commitment to pursuing our business activities sustainably and support the Sustainable Development Goals outlined by the United Nations, in particular SDG 3, which aims to ensure healthy lives and promote well-being for all at all ages. Further details of BerGenBio's corporate governance and sustainability policies can be found later in this report and I urge shareholders to familiarise themselves with these.

Finally, I would like to thank the staff and management of BerGenBio, on behalf of the Board, for their dedication throughout this extraordinary year. We also extend our thanks to patients who have placed their trust in us and both new and established shareholders for their support as we continue our progress.

Sveinung Hole
Chairman of the Board

Highlights 2020

OUR VISION

BerGenBio (OSE:BGBIO) is a clinical stage biopharmaceutical company developing innovative drugs for aggressive diseases, including immune evasive, drug resistant and metastatic cancers

In 2020 BerGenBio continued with its clinical trials of bemcentinib in aggressive, immune evasive and therapy resistant cancers. The latest updates from our Non-Small Cell Lung Cancer (NSCLC) and Acute Myeloid Leukaemia (AML) research continue to indicate that bemcentinib could be a useful treatment either as a monotherapy or in combination with chemotherapy or immuno-therapy.

Yet 2020 was, of course, the year that the COVID-19 pandemic emerged. Leveraging our understanding of AXL inhibition in the treatment of viruses, we were pleased to be able to initiate clinical trials exploring bemcentinib's efficacy against COVID-19. Whilst our focus remains in oncology, we look forward to providing updates from our COVID-19 trials in the UK, South Africa and India in due course.

2020 in review

JANUARY 2020 — 30
Completed Private Placement of NOK 220m ($24.1m)

MAY 2020 — 04
Completed a Private Placement of NOK 520m ($50.2m)

JUNE 2020 — 25
BerGenBio announces positive interim clinical and translational data from Phase II combination trial in NSCLC

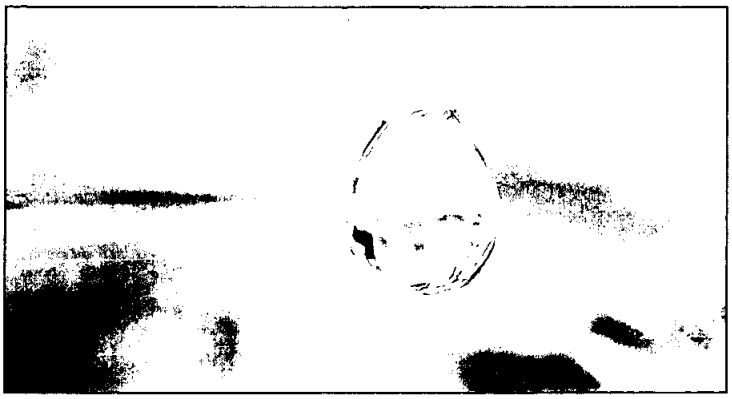
AUGUST 2020 — 18
Efficacy endpoint met in BERGAMO Phase II trial of bemcentinib in patients with HR-MDS or AML

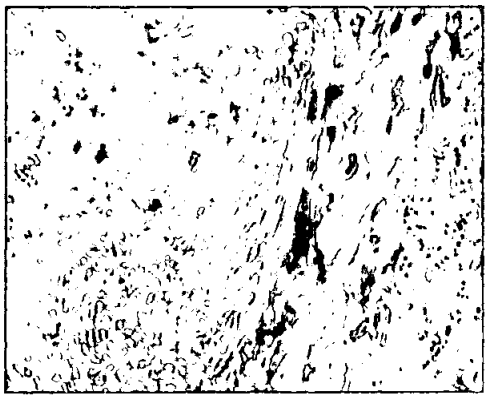
JANUARY 2020 — 15
Efficacy endpoint met for first stage of Phase II combination trial in NSCLC

APRIL 2020 — 28
BerGenBio's bemcentinib selected to be fast-tracked as potential treatment for COVID-19 through national UK Government ACCORD trial

JUNE 2020 — 02
First COVID-19 patient confirmed dosed with bemcentinib in Investigator Sponsored Study ACCORD trial

JULY 2020 — 20
First patient dosed with bemcentinib in recurrent glioblastoma Phase I/II Investigator Sponsored Study





COVID-19 Impact

Financial position

- Has remained robust, with strong cash position at year end
- Cost control measures taken early in the year

Clinical trials

- Pace of recruitment decreased, mirroring the wider sector
- Yet trials remain active and continue to recruit patients
- Those enrolled could continue with treatment
- As bemcentinib is orally administered once-a-day, patients could be issued with several months' dosage, negating the need to visit hospital pharmacies
- Dose adjustments made for patients in combination trials receiving checkpoint inhibitors, to reduce the redosing requirements

Working environment

- Business continuity protocols implemented to ensure the safety of BerGenBio's employees whilst core operational activities continue
- With this combination of remote and office working, the company's day-to-day activities have been largely unaffected

OCTOBER 2020 — 21
First patient enrolled in South Africa as part of BGBC020 randomised Phase II Company sponsored study assessing bemcentinib as a potential treatment for COVID-19

NOVEMBER 2020 — 11
High profile oral presentation on clinical translational research updates from Phase II bemcentinib and pembrolizumab combination study in NSCLC at annual SITC meeting

DECEMBER 2020 — 06
BerGenBio presents updated clinical data from two Phase II studies of bemcentinib in AML and MDS patients at ASH 2020

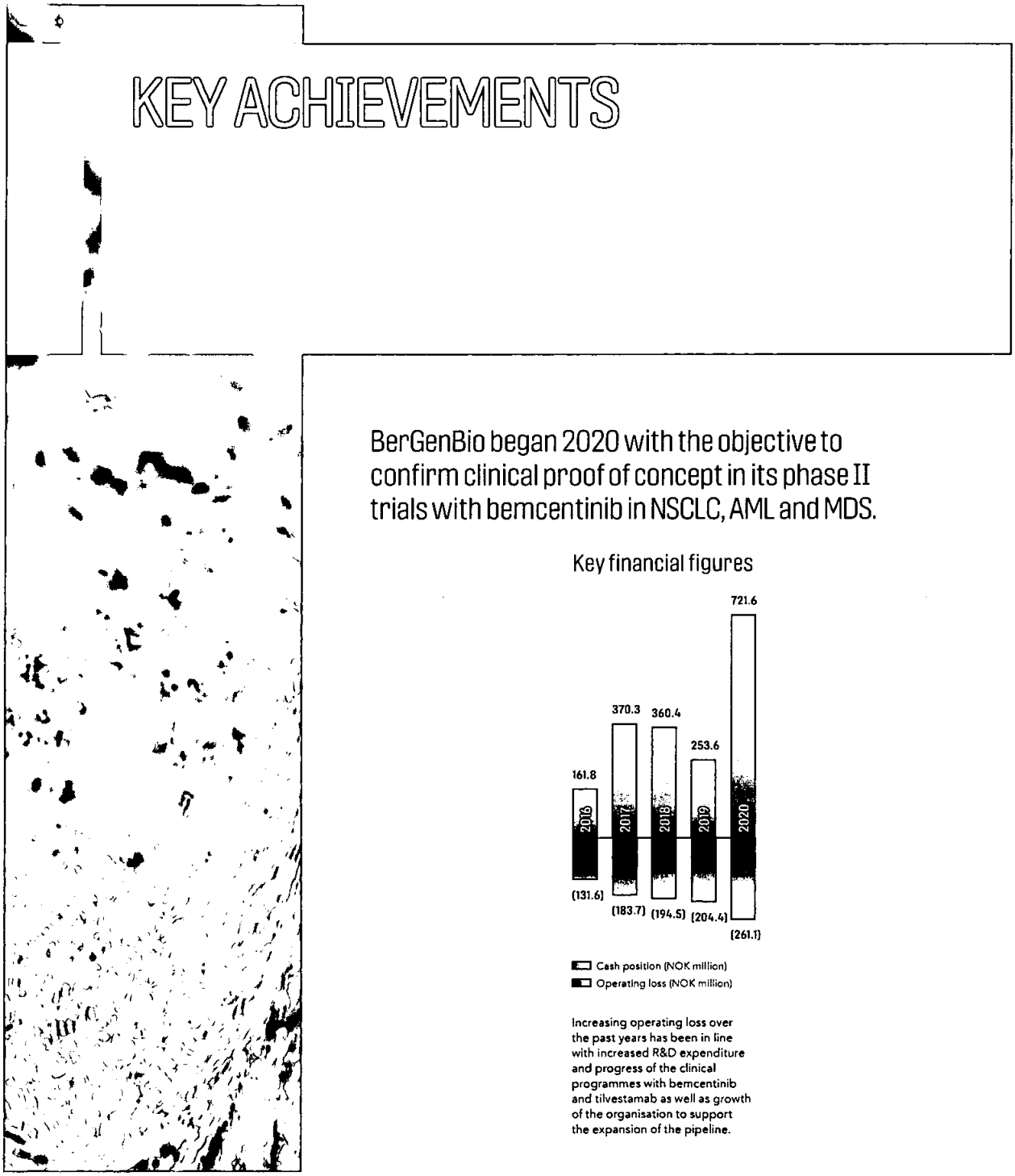
07 OCTOBER 2020
First patient dosed with bemcentinib in relapsed malignant pleural mesothelioma Investigator Sponsored Phase IIa study

06 NOVEMBER 2020
BerGenBio hosts virtual R&D Day

24 NOVEMBER 2020
First patient enrolled in India as part of BGBC020 Phase II trial assessing bemcentinib as a potential treatment for COVID-19

08 DECEMBER 2020
First COVID-19 patient is enrolled in reinitiated UK ACCORD trial assessing bemcentinib

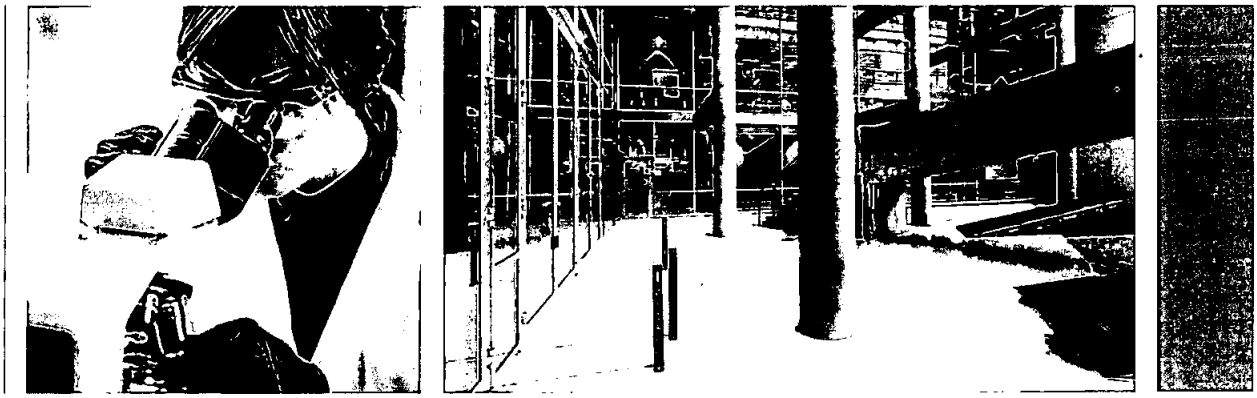
Key Achievements



BerGenBio began 2020 with the objective to confirm clinical proof of concept in its phase II trials with bemcentinib in NSCLC, AML and MDS.

Key financial figures

Increasing operating loss over the past years has been in line with increased R&D expenditure and progress of the clinical programmes with bemcentinib and tilvestamab as well as growth of the organisation to support the expansion of the pipeline.



Priority	Milestones	
Bemcentinib clinical progress	Clinical updates were presented at many major cancer and medical congresses and continue to support the first clinical position in 2L NSCLC, AML and MDS are the right target indications	✔
	Clinical and translational data presented:	
	• AML bemcentinib + LDAC: readouts at ASCO & EHA	✔
	• NSCLC bemcentinib + pembrolizumab: readouts at ASCO, WCLC, ESMO, SITC	✔
	• Two clinical trials initiated for treatment of COVID-19 patients	✔
Companion diagnostics development	Proprietary composite AXL tumor-immune (cAXL) biomarker score is under development to identify and diagnose patients that show durable benefit	✔
Tilvestamab (BGB 149) clinical progress	Completed Phase 1a trial tilvestamab in healthy volunteers and prepared for further development	✔
Organisational development	BGB has continued to build out the organisation with strategic medical, clinical, operational and regulatory hires	✔
Financial management	Private placement completed in January, May and June raising a total of NOK 740m	✔
	Disciplined management with cash runway to deliver key clinical data	✔

Chief Executive's Statement

I am pleased to report that our business operations and clinical trials have all been able to maintain high levels of activity throughout the year and our mitigation plans have been successful in limiting the impact of the pandemic.

Looking back on 2020, I reflect on what has been a challenging year, with the COVID-19 pandemic impacting communities and business around the world with tragic consequences. I am also extremely proud of the way that the healthcare sector has responded to the challenge we are facing; with collaborations between academic institutions, governments and companies proving that the industry can be mobilised effectively to address a common good.

BerGenBio has been playing its own role in the effort to tackle COVID-19, about which I will go into some detail later, but our principal focus has remained unchanged: progressing the Phase II clinical development programme investigating our lead product candidate bemcentinib. I am pleased to report that we have made good progress towards meeting our clinical and operational milestones over the year despite COVID-19 related disruption. This global crisis has affected BerGenBio, along with many other companies across the sector, by extending the anticipated development timelines due to restrictions at clinical trial sites and lengthening patient recruitment processes. However, I am pleased to report that our operations and trials have all been able to remain active throughout the year and our mitigation plans have been successful in limiting the impact of the pandemic.

Bemcentinib is a first-in-class, highly selective, potent, once-a-day oral inhibitor of AXL kinase, and is currently undergoing trials as a monotherapy and in combination with other drug treatments against aggressive diseases, including non-small cell lung cancer, acute myeloid leukaemia, myelodysplastic syndrome and COVID-19.

As a company, we remain world leaders in understanding the role and function of AXL biology. AXL is increasingly validated as a key mediator of aggressive disease, fostering immune evasion and therapy resistance and as a driver of metastasis, fibrosis and viral infection. BerGenBio's development strategies are based on the hypothesis that selective inhibition of AXL has the potential to underpin the successful treatment of many serious diseases, including those where options for patients are limited.

This research leadership was showcased in a virtual R&D day we hosted in November 2020, which featured independent key opinion leaders from the US and Europe sharing their latest research findings on AXL and clinical experience with bemcentinib in a range of disease settings. I would like to extend my thanks to all of those who participated in and attended this event.

Throughout the year we have continued to make progress with our clinical trials and data read outs, presenting updated clinical data and translational research findings to the scientific and medical community at several leading international congresses, albeit virtual. We remain committed to reporting our research findings and data at similar forums at regular intervals, and plan to present further data from our ongoing phase II trials in 2021.

In November 2020 we were pleased to be invited to make an oral presentation at the prestigious The Society for Immunotherapy of Cancer (SITC) conference, where we provided an update on clinical and translational data from our Phase II bemcentinib and pembrolizumab combination study in refractory NSCLC patients previously treated with a PD-L1 or PD-1 checkpoint inhibitor (CPI) as a monotherapy. These patients have very limited treatment options available to them and their survival outlook is dismal.

The combination of bemcentinib and checkpoint inhibitor pembrolizumab continued to report promising clinical benefit and in June we presented an interim data read out from an ongoing study reporting the median progression-free survival is 2.5 times greater for cAXL-positive, checkpoint refractory, NSCLC patients. AXL expression is associated with resistance to immunotherapy, and the interim translational analysis of these data suggests that bemcentinib has the potential to reverse acquired resistance to checkpoint inhibitors among previously treated NSCLC patients by targeting AXL-expressing immune cells in the tumour. This finding was well received by the scientific community as it reinforces the belief that bemcentinib has the potential to improve the clinical benefit of existing immuno-oncology drugs.

At the American Society of Hematology conference (ASH) in December, we were pleased to share updated interim clinical data from two Phase II studies of bemcentinib in AML and MDS; reporting a clinical benefit rate of over 70% in relapsed AML patients. The prognosis for relapsed AML patients under current standards of care is very bleak, so we are pleased to see such an encouraging clinical benefit, with many of these seriously ill patients remaining on the drug for extended durations of time. Collectively, these continuing positive data readouts strengthen our confidence in bemcentinib as a therapy in these relapsed haematological cancer indications.

In addition, during 2020 together with highly respected international research collaborators we announced several new clinical trial initiations and data being read out from investigator lead studies exploring bemcentinib's potential in: High Risk Myelodysplastic Syndromes (HR-MDS) or Acute Myeloid Leukaemia (AML), Glioblastoma (GBM), relapsed malignant mesothelioma, and COVID-19.

Alongside this core oncology-focused pipeline, 2020 saw BerGenBio respond to the global pandemic with the initiation of two trials to evaluate bemcentinib's potential as a treatment for COVID-19. The rationale for these studies was based on consecutive research findings suggesting that AXL plays an important role facilitating enveloped viruses (SARS-CoV-2, Ebola, Zika, etc) entering host cells and dampening the anti-viral immune response, and bemcentinib has been shown to demonstrate promising anti-viral activity in pre-clinical models. With the continued emergence of new strains of COVID-19, we remain confident that bemcentinib could play an important role in the global effort to combat the disease.

Two COVID-19 bemcentinib studies are currently ongoing. Patient recruitment for BGBC020, a BerGenBio sponsored trial being conducted in South Africa and India, was initiated in October. Post period-end, the trial's independent Data Monitoring Committee twice confirmed that no safety concerns had emerged, and recruitment of the target 120 patients could continue. In the UK, in December 2020, we announced dosing had resumed in the Investigator Sponsored ACCORD trial funded by UK Research and Innovation (UKRI). We look forward to providing further updates on the progress in this trial.

Looking ahead to 2021, we look forward to updating the market with further data from our AML, MDS and NSCLC studies, in particular, we anticipate important data from AML and MDS studies to be reported during the first half of the year and NSCLC data later in the year as the survival data needs to mature and expect the first data readout from our COVID-19 studies in South Africa and India in Q1.

During 2020 our organisation successfully adopted new working patterns ensuring the safety and wellbeing of our staff, collaborators and patients. We continued to build our organisation as we prepare for the demands of late-stage clinical development. During the year we successfully completed two capital raises and we remain well-funded with a strong cash position and tight cost control, and as such BerGenBio is well positioned for continued success in 2021.

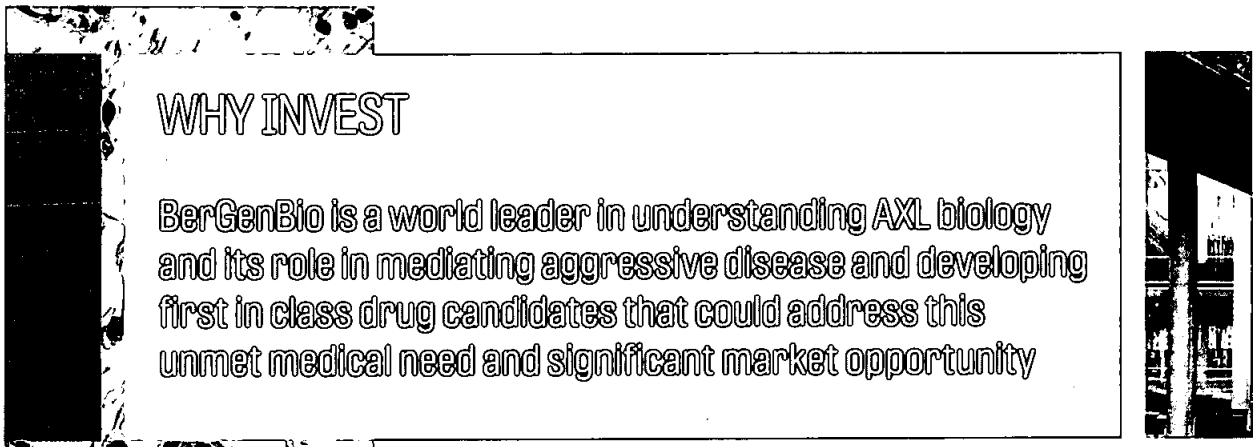
Going forward, we will continue to develop our sustainability management and report on the progress we make.

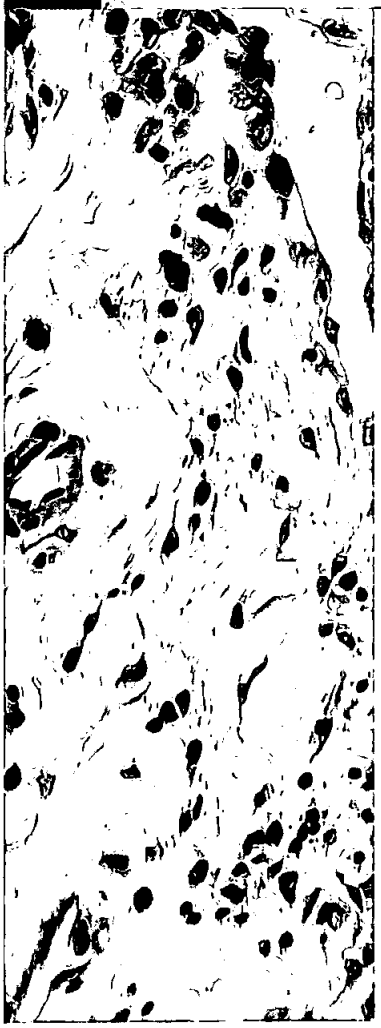
We are committed to building our business in line with international best practice on Environmental and Social Governance, in particular the Sustainable Development Goals identified by the United Nations. Through our vision to develop innovative drugs for aggressive diseases, we directly contribute to SDG 3 – health and wellbeing. Through our work, we are also contributing to SDG 8 - decent work and economic growth, 9 - industry, innovation and infrastructure, and 17 – partnerships for the goals.

I am extremely proud and grateful to our staff of the way our company has responded to challenges the past year has posed. I am also grateful for the trust placed in us by patients, collaborators, and our shareholders as we have adapted to the rapidly changing landscape. We remain focused on delivering the best outcomes for all our stakeholders and look forward to providing updates from our oncology and COVID-19 trials in the coming months.

Richard Godfrey
CEO

Why Invest In BerGenBio





We have two first-in-class potent and highly selective inhibitors of AXL in clinical development and a third out licenced for development.

AXL

AXL is a cell surface receptor tyrosine kinase, that when upregulated in response to stress factors in the tumour microenvironment renders cancers highly aggressive, immune-evasive and resistant to therapy with conventional drugs. Furthermore, it has recently been discovered that AXL has a unique dual role in facilitating host cell entry by envelope viruses, including SARS-CoV-2, and dampening of the body's immune response to viral infection.

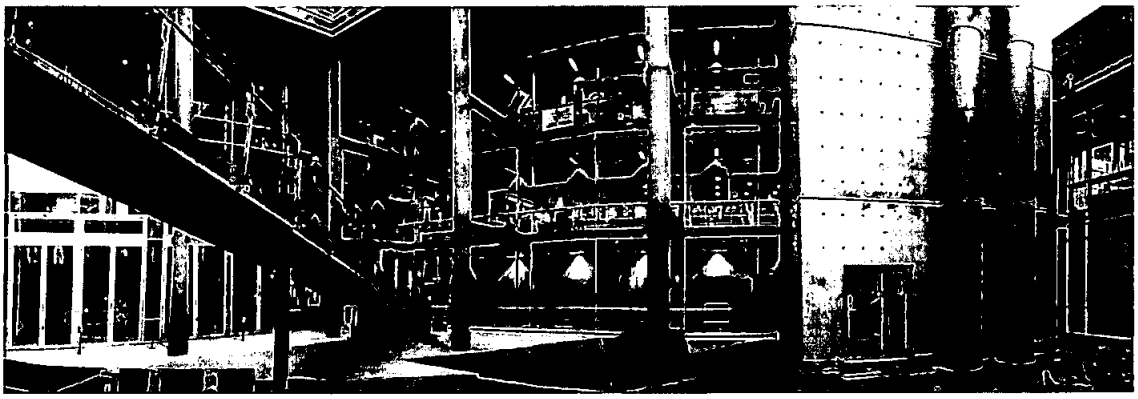
Bemcentinib

Bemcentinib's clinical development is focused on lung cancer and leukaemia. Company sponsored clinical development is supported by a broad Investigator Sponsored Trial (IST) programme.

Bemcentinib is in-licensed from Rigel Inc and BerGenBio holds exclusive worldwide rights to develop and commercialise it.

Tilvestamab

Tilvestamab, an anti-AXL antibody and the company's second clinical candidate developed by BerGenBio, has completed Phase Ia trial in healthy volunteers.



World leaders in understanding AXL biology

- AXL tyrosine kinase is a novel drug target that mediates immune evasion, therapy resistance & spread
- AXL upregulates PD-L1 on dendritic cells and blocks T-cell activity
- AXL inhibitors may be a potential cornerstone of cancer therapy
- Pipeline opportunities in multiple cancers and fibrosis

Three selective AXL inhibitors in clinical development

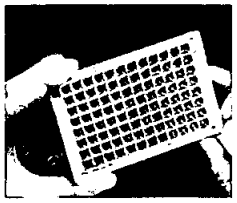
- Bemcentinib (oral once-a-day pill)
- Tilvestamab Monoclonal antibody (MAb)
- ADCT601 antibody drug conjugate (licenced to ADC Therapeutics SA)

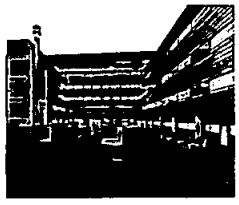
Clinical focus

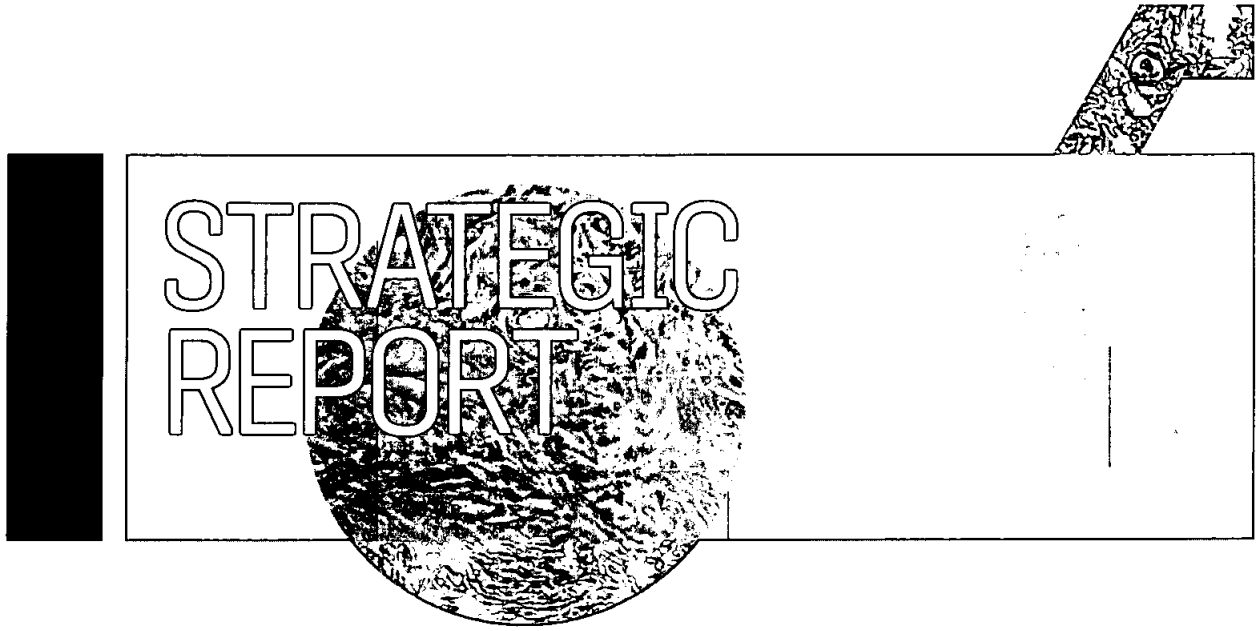
- Phase II: Monotherapy and combinations with checkpoint-inhibitors, targeted and chemotherapies
- Biomarker correlation, parallel CDx development
- Bemcentinib clinical development focus MDS (monotherapy), AML (chemo-combo), NSCLC (checkpoint-inhibitor combo)
- COVID-19 (monotherapy used with standard of care)

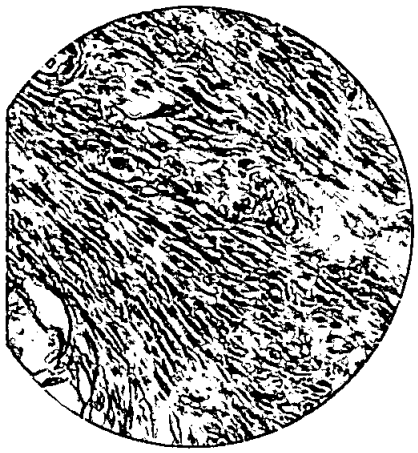
Resourced to deliver significant milestones

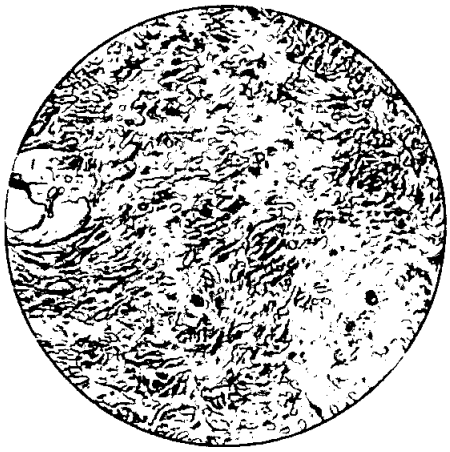
- Listed on Oslo Børs: BGBIO
- Clinical trial collaborations with Merck and leading academic centres in EU & USA
- 49 staff at two locations:
  - HQ & R&D in Bergen, Norway
  - Clinical Development in Oxford, UK
- Strong cash position
- Sustainable ESG focus

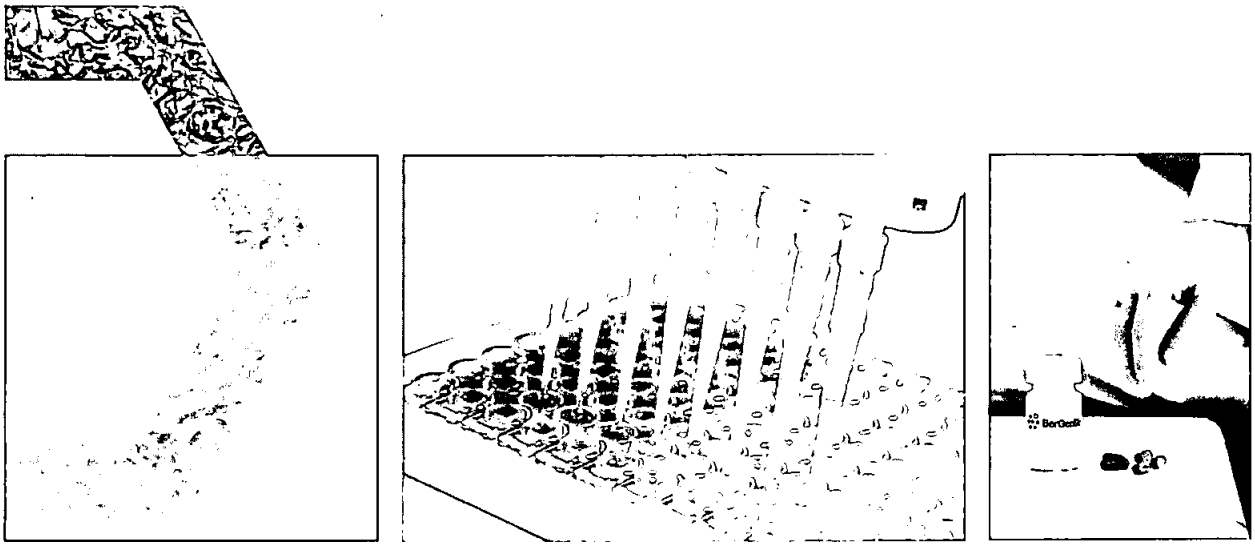





STRATEGIC
REPORT







Contents

STRATEGIC REPORT

What We Do

BERGENBIO IS A CLINICAL-STAGE BIOPHARMACEUTICAL COMPANY FOCUSED ON DEVELOPING INNOVATIVE DRUGS INHIBITING AXL, A PROTEIN INVOLVED IN AGGRESSIVE DISEASES INCLUDING IMMUNE EVASIVE, DRUG RESISTANT AND METASTATIC CANCERS AND COVID-19

The company has successfully translated its world-leading research of AXL's biological role and function into two first-in-class clinical development candidates: the highly selective, oral small molecule AXL inhibitor bemcentinib and the novel, anti-AXL monoclonal antibody (mAb) tilvestamab

Our Business Model

BerGenBio intends to develop its drug candidates itself and through strategic partnerships in multiple indications, and retains all strategic options for the future commercialisation of its products.

While the research and development strategy is designed in-house, the company leverages its network of external contract research organisations (CROs) to execute its development strategy. BerGenBio also collaborates with academic institutions to extend research in areas of interest of the company. This approach allows BerGenBio to react quickly and nimbly to industry changes.

Bemcentinib is in Phase II clinical testing with a focus on lung cancer, leukaemia and COVID-19, whereas tilvestamab, formerly known as BGB149, a therapeutic anti-AXL antibody, has completed Phase Ia trial in healthy volunteers.

Phase II clinical data generated with bemcentinib thus far confirms its potential utility as a therapy, in relapsed AML in combination with low dose chemo patients with relapsed MDS and shows that it may enhance outcomes when combined with immunotherapy in NSCLC. The data was particularly encouraging in patient subsets with evidence of high AXL activation. Taken together these initial data form the basis of BerGenBio's preparations for late-stage clinical strategy for bemcentinib.

Additional therapeutic opportunities for bemcentinib are being explored through the framework of Investigator Sponsored Trials (ISTs) in parallel to the company's own clinical programme.

The ability to predict which patients may benefit most from treatment with a selective AXL inhibitor may be an important success factor in clinical trials, as well as for registration and later reimbursement of these novel drugs. This insight underpins BerGenBio's strategy of extensive biomarker discovery and development of a companion diagnostic in parallel to the clinical programme.

Results obtained thus far in parallel to the Phase II programme with bemcentinib are encouraging.

BerGenBio furthermore leverages its leadership position in understanding the AXL biology as it relates to aggressive disease by building value through high profile collaborations such as Merck & Co. with whom BerGenBio have multiple clinical trial collaboration agreements as well as a multitude of leading academic research institutions globally.

Tilvestamab, a therapeutic anti-AXL antibody discovered, developed by BerGenBio, is planned to enter Phase Ib First-in-Patient trials in 2021.

BerGenBio has previously also out licenced an AXL antibody for antibody-drug-conjugate (ADC) development to ADC Therapeutics SA.

73%
RELAPSED AML

Reported clinical benefit after treatment with bemcentinib + LDAC

36%
HIGH RISK MDS PATIENTS

Overall response rate of bemcentinib monotherapy

17.3 MONTHS
MEDIAN OVERALL SURVIVAL:

in cAXL positive chemo refractory NSCLC patients treated with bemcentinib + pembrolizumab

Near Term Goals

H1 2021	H2 2021
BEMCENTINIB - SELECTIVE AXL INHIBITOR	
COVID-19: Trial and Key Secondary End Point data	Prepare for late stage registration trials
AML: Proof of Concept data	NSCLC: Top line clinical data 2L Phase 2 IO refractory in combination with pembrolizumab (BGBC008/B)
MDS: Proof of Concept data	NSCLC: Top line clinical data 2L Phase 2 IO + CHEMO refractory in combination with pembrolizumab (BGBC008/C)
TILVESTAMAB - THERAPEUTIC AXL FUNCTION BLOCKING ANTIBODY	
Phase 1b patient study	Expand into Phase 2a

Environmental, Social and Governance

CANCER REMAINS ONE OF THE MOST PRESSING HEALTHCARE CHALLENGES ACCOUNTING FOR THE SECOND MOST COMMON CAUSE OF DEATH GLOBALLY

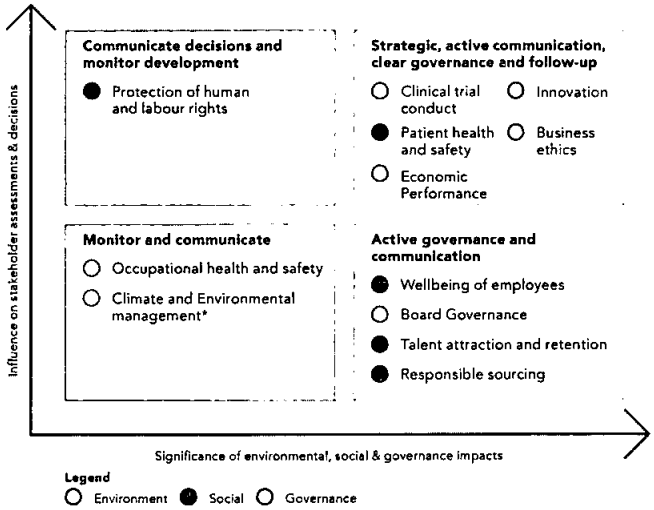
Cancer is a large healthcare burden and impacts almost everybody either as patients or friends and families.

By discovering and developing novel medicines to treat aggressive diseases, including advanced, treatment resistant cancers, we aim to improve and save lives and thereby create value for patients, society, and shareholders. Sustainability is therefore the foundation of our activities and directly linked to our long-term success. We are committed to the UN Sustainable Development Goals (SDGs) and our vision is directed to contributing to SDG 3 – health and wellbeing. Through our work we are also contributing to SDG 8 – decent work and economic growth, SDG 9 – industry, innovation and infrastructure, and SDG 17 – partnerships for the goals.

SDGs in focus

In order to have a real and meaningful impact, we worked in 2020 to strengthen our sustainability management. The aim was to identify ESG (Environmental, Social and Governance) activities in BerGenBio's value chain that are material for us and our stakeholders. Our key stakeholders include our patients and their families, our employees, investors, regulators, suppliers and other business partners, such as research organisations and academic institutions.

The work involved mapping of our value chain, review of industry standards, organisations and peers. In addition, we engaged with key stakeholders and consulted ESG experts in order to gain insight into what is important to our stakeholders and their expectations of us. The matrix to the right provides an overview of the resulting material ESG topics that are deemed important for our long-term sustained value creation.



The topics in the top right corner are those which are of most strategic importance to BerGenBio. These are given detailed descriptions in this report: Innovation and clinical trial conduct are addressed in the "Performance" section in this chapter; business ethics is addressed in the corporate governance report and in the Board of Directors' report; economic performance in the financial statements whilst patient health and safety along with the remaining topics are covered in the ESG section in the Board of Directors' report. A reference index of the reporting is provided in the appendix for ease of location.

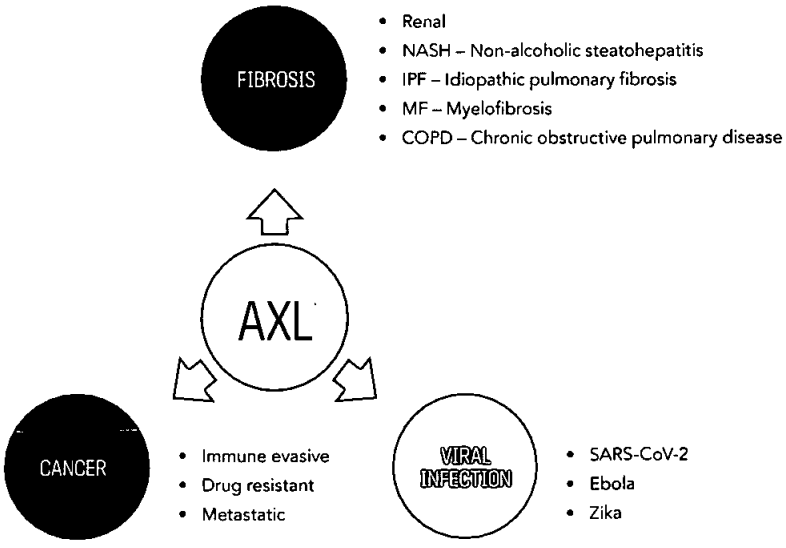
TWO AXL TARGETING DRUG CANDIDATES IN CLINICAL DEVELOPMENT

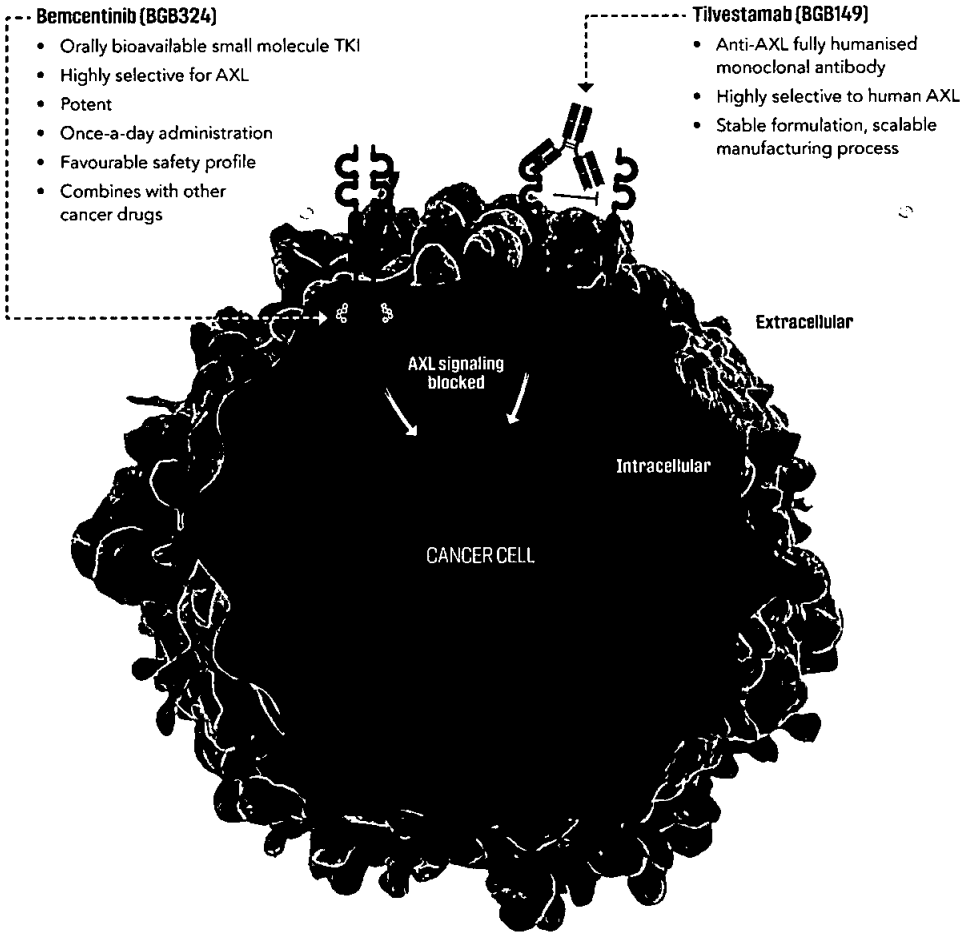
Our drugs selectively inhibit AXL signaling

AXL regulates cellular plasticity implicated in fibrotic pathologies e.g. EMT, EndMT, Macrophage polarity

Elevated AXL signaling strongly associated with cancer progression, immune evasion, drug resistance and metastasis

AXL mediates viral entry to cells and dampening of viral immune response




Bemcentinib (BGB324)
• Orally bioavailable small molecule TKI
• Highly selective for AXL
• Potent
• Once-a-day administration
• Favourable safety profile
• Combines with other cancer drugs
Tilvestamab (BGB149)
• Anti-AXL fully humanised monoclonal antibody
• Highly selective to human AXL
• Stable formulation, scalable manufacturing process
Extracellular
AXL signaling blocked
Intracellular
CANCER CELL

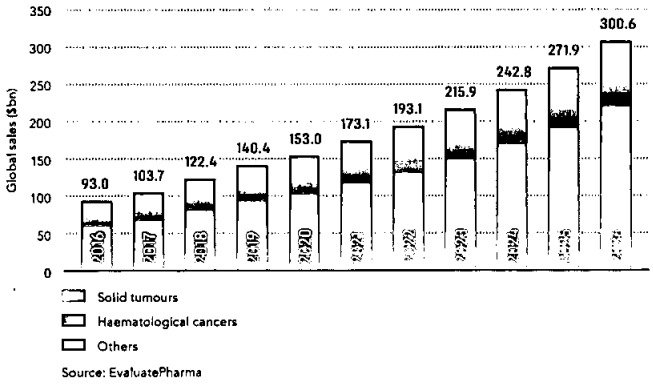
Industry Context

INDUSTRY CONTEXT

Oncology is the world's largest pharmaceutical therapeutic area and it is forecast to continue to grow at 12% CAGR, reaching $300bn in 2026.

Oncology drugs accounted for almost half of the novel drugs approved by the FDA in 2020.

Exhibit 1: Projected global oncology sales



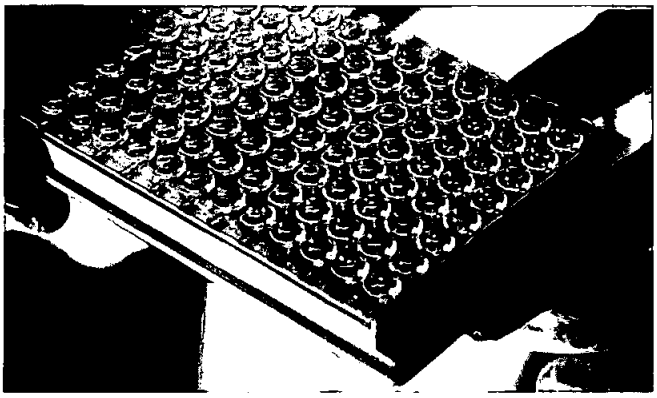
Source: EvaluatePharma

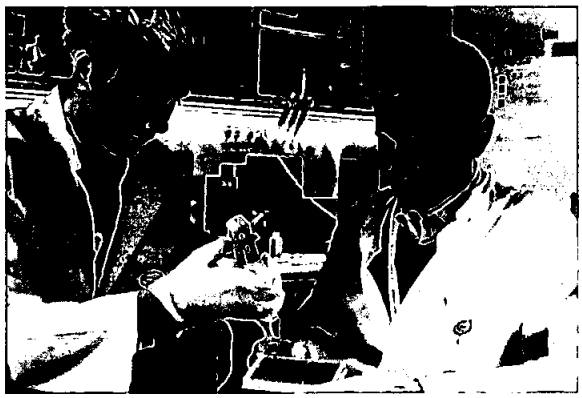
Oncology - an innovative growing market

Cancer is the second leading cause of death globally and one of the largest burdens on healthcare systems. The prevalence of cancer is expected to continue to rise due to the world's growing and aging population and by 2040 the global burden is conservatively forecast to reach 27.5m new cases, a significant increase from 17.0m in 2018[1].

EvaluatePharma estimates that in 2020 global sales of oncology therapeutics surpassed $150bn, accounting for almost 20% of all pharmaceutical sales and making it by far the largest therapeutic area. EvaluatePharma also expects sales to increase at a robust 12% CAGR, almost twice the growth rate of the overall pharmaceutical market, with global sales reaching

A paradigm shift in the understanding of cancer has directed treatments away from systemic chemotherapies and ushered in the new age of precision immuno-modulating medicines that are better tolerated, more effective and extend patient survival rates, and deliver meaningful benefits for healthcare systems.





$300bn in 2026[2]. This increase is largely driven by the forecast growth in PD-1/PD-L1 checkpoint inhibitors which are expected to reach almost $58bn in 2026[2].

Oncology attracts the most interest – and funding – from pharmaceutical companies due to the current unmet medical need and large patient populations that present an attractive commercial opportunity. The oncology market is highly diversified due to the heterogeneity of the disease and the requirement for multiple different therapies to treat each of the more than 200 different types of cancers. Cancer treatment resistance remains challenging and a key rationale for ongoing research and development efforts to find novel treatments.

The US FDA approved 53 novel drugs in 2020, the second highest count in over 20 years despite the considerable headwind from the COVID-19 pandemic. Oncology drugs and first-in-class medicines each accounted for almost half of the approvals, highlighting the regulator's willingness to wave through urgently needed therapies on the back of early efficacy signals to maximise the potential benefit to patients. This has created an ideal environment for novel treatments with unique mechanisms of action to revolutionise the current treatment paradigm.

Oncology - evolving treatment landscape that encourages innovation and the development of new therapies with novel mechanisms of action

The oncology treatment landscape is constantly evolving. Historic standard of care included surgery, chemotherapy and radiotherapy. However, a paradigm shift in the understanding of cancer has directed treatments away from systemic therapies and ushered in the new age of precision medicines that provide benefits to both patients and healthcare systems. These therapies include targeted therapies, immunotherapies and therapies associated with predictive biomarkers, which increasingly are becoming the standard of care in many cancers. These therapies can achieve unprecedented responses by identifying patient populations with specific genes and/or proteins that are hallmarks of a particular cancer and selectively targeting them. However, despite the success of these therapies, challenges remain due to acquired treatment resistance and inevitable disease progression for most patients. This has led to multiple different lines of treatments and combinations of targeted therapies. Combining immunotherapies with chemotherapy is increasingly becoming the best approach to treat the complex and constantly mutating disease that is cancer.

Following the advent of precision medicines, the list prices of innovative cancer drugs have steadily risen over the past decade, starting with novel targeted therapies and now immunotherapies. The median price of new cancer drugs launched in the US in 2019 was almost $150,000, compared to less than $80,000 in 2013[3].Personalised medicine strategies that use predictive biomarker tests to identify the patients most likely to respond to treatment can command broader reimbursement and higher pricing due to improved treatment efficacy.

1. American Cancer Society - Cancer Facts & Figures 2021 (also cited as Siegel R. L. et al., Cancer Statistics, CA Cancer J Clin. 2021, 71, 7–33. https://doi.org/10.3322/caac.21654)
2. EvaluatePharma (accessed 10 January 2021)
3. IQVIA – Global Oncology Trends 2018 and 2019

Industry Context continued

Immunotherapy - combinations define the future of cancer care

It is increasingly recognised that cancer is a disease of the immune system. The ability of cancers to evade or escape the immune response is now recognised to be one of the most distinguished cancer hallmarks, such that extensive research efforts over the last decade have focused on developing immunotherapies that activate and enhance the body's immune system to target and kill cancer cells. These therapies have yielded exceptional results, inducing durable responses in some previously intractable cancers. Checkpoint inhibitors, in particular those targeting the PD-1/PD-L1 pathway, have been the most efficacious and successful immuno-oncology therapies. Agents inhibiting the PD-1/PD-L1 checkpoint (by blocking PD-1 or its ligand PD-L1) have seen broad uptake and are now approved in more than 20 different cancer indications. The leading PD-1 checkpoint inhibitors in use are Merck & Co.'s (known as MSD outside the US) Keytruda (pembrolizumab) and Bristol Myers Squibb's Opdivo (nivolumab). These therapies have the widest range of approvals and together account for more than 90% of patient treatments with checkpoint inhibitors[4].

PD-1 checkpoint inhibitors have caused a shift in the treatment paradigm across many cancers

The first PD-1 checkpoint inhibitors were approved in 2014 for non-small cell lung cancer (NSCLC) and melanoma. Use was initially focused in later lines of therapy in advanced late-stage cancers with metastatic disease, which is typical for novel oncology treatments that are normally approved based on clinical trials in patients with limited remaining treatment options whose cancers had progressed on previous lines of therapy. PD-1 checkpoint inhibitors have advanced into earlier lines of treatment at an unprecedented rate (two to three years) in many cancers due to the significant benefit they offer to patients, such that patients are receiving them before chemotherapy or in the early stages of cancer. This has led to a paradigm shift in the treatment of many different cancers and has left a void in later lines of treatment that these therapies previously filled.

Following the first approvals of PD-1 checkpoint inhibitors, there has been a flurry of approvals for combinations of checkpoint inhibitors with targeted therapies and chemotherapies in particular. Despite their success, there remains a significant demand for new innovative treatments and combinations thereof to address the persisting unmet medical need and further advance the current standard of care to improve patient life span and quality of life. Rational combinations of PD-1 checkpoint inhibitors with targeted therapies that can have synergistic effects or address acquired treatment resistance represents a significant commercial opportunity. For these therapies there is a real focus on drugs with good safety and tolerability that can enhance efficacy while limiting unwanted side effects.

Rational combinations of PD-1 checkpoint inhibitors with well tolerated treatments are highly sought after

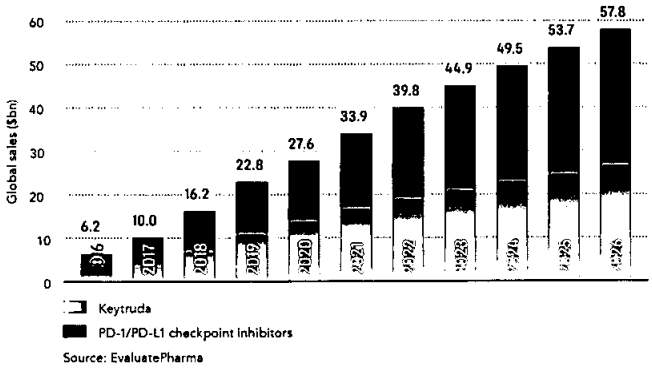
In the US, there are currently six approved PD-1/PD-L1 checkpoint inhibitors. The dominance of these treatments are highlighted in lung cancer in metastatic NSCLC, where

PD-1/PD-L1 checkpoint inhibitors were used in 55% of first-line treatments for newly diagnosed patients, as well as 59% of later lines of therapy by 2019[4].

Keytruda has emerged as the clear market leader in the checkpoint space, particularly in lung cancer which is the second most common cancer. Keytruda is now expected to become the world's biggest selling drug in 2023 with forecast sales of more than $21bn[2].

A significant milestone and change in the treatment paradigm of all cancers came with the first ever tissue-agnostic approval for Keytruda

Exhibit 2: Projected global sales of PD-1 and PD-L1 checkpoint inhibitors



Source: EvaluatePharma

in 2017. This allows oncologists to prescribe Keytruda based on the cancer's genetic and molecular features instead of its organ of origin, broadening the range of cancers it can be used to treat. Cancer is now being defined and treated in a more precise and personalised way through the use of genetic and molecular biomarkers, which can be identified through tumour biopsy and specialised diagnostic tests. Thus for immunotherapies and combinations thereof, the discovery and development of effective biomarkers remains an area of significant research efforts. Personalised medicines – delivering the right drug to the right patient at the right time.

Personalised medicines - delivering the right drug to the right patient at the right time

Precision medicines have revolutionised the treatment of cancer such that immunotherapies and targeted therapies are the fastest growing treatment areas in oncology. Targeted therapies block the growth and spread of cancer by interfering with specific 'molecular targets' that are involved in these processes. These therapies include antibodies and synthetic small molecules and represented over 90% of the new drugs launched in the US between 2015 and 2019, with these therapies making up a similar portion of the total oncology clinical pipeline[5]. Targeted therapies are generally approved in biomarker-restricted patient populations and 58% of the drugs launched in this time period required or recommended biomarker testing prior to use. Receptor tyrosine kinases are a common target of successful therapies due to their involvement in a myriad of cellular processes that have been implicated in cancer survival, growth and spread. This is highlighted in NSCLC where treatments targeted at the epidermal growth factor receptor (EGFR) and anaplastic lymphoma kinase (ALK) receptor tyrosine kinases have seen widespread uptake. AstraZeneca's small molecule EGFR inhibitor Tagrisso (osimertinib) has rapidly become the first-line standard of care for patients that tested positive for EGFR mutations with global sales forecast to reach almost $10bn in 2026[2].Novel targets are highly sought after and are the subject of extensive research efforts.

The use of predictive biomarker tests to identify the patients most likely to respond to specific treatments has seen rapid uptake. This has enabled personalised medicine strategies that have a number of distinct advantages such as improved treatment efficacy, which demands broader reimbursement and higher pricing. Additionally, it spares patients unnecessary rounds of treatment and ultimately reduces the economic burden of healthcare. The use of a predictive biomarker and companion diagnostic strategy can also be an immense advantage during clinical development as it can significantly shorten the path to registration and greatly improve the.chances of success.

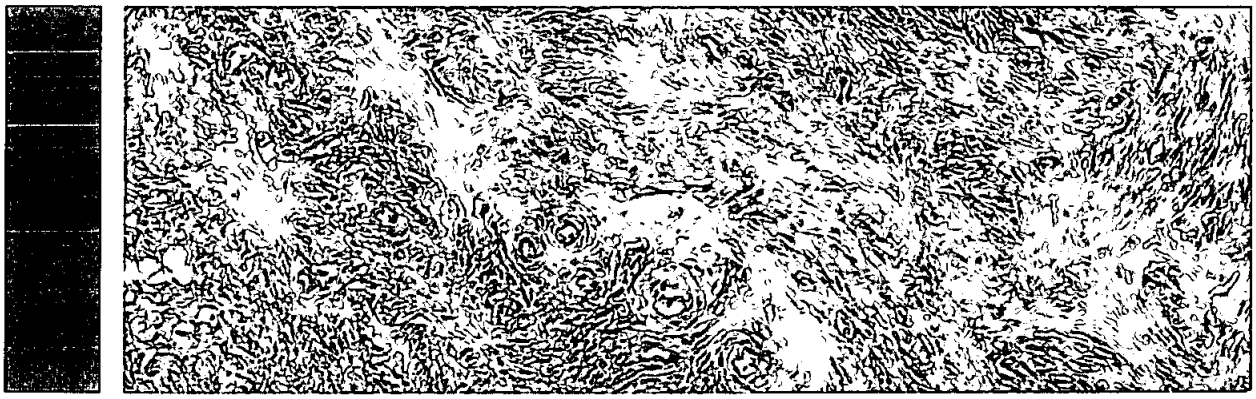
Comparing oncology drugs developed with a biomarker vs those without showed an almost seven-fold improvement (10.7% vs 1.6%)[6].

Predictive biomarkers can have significant advantages for the commercialisation and development of therapies

Research around additional potential biomarkers for response to immune checkpoint inhibitors and other modes of therapy is an area of intense research and an important driver of differentiation for companies hoping to develop a novel therapy. This is also illustrated by a market for biomarkers and diagnostics, which itself is predicted to see double-digit growth over the coming decades, nearing $6bn over the next several years according to Informa research.
A key biomarker for the most commonly used checkpoint inhibitors is the PD-L1 protein which is believed to play a major role in suppressing the immune system. Patients with a higher level of PD-L1 expression on tumour cells are more likely to respond to treatment with PD-1/PD-L1 checkpoint inhibitor therapy. However, patients with tumours that lack PD-L1 completely are expected to show limited to no response to treatment.

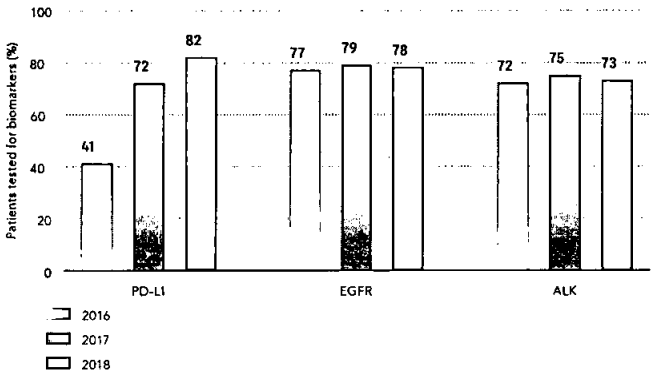
4. IQVIA – Global Oncology Trends 2019
5. IQVIA – Supporting Precision Oncology
6. Wong C. H. et al., Estimation of clinical trial success rates and related parameters, Biostatistics, 2019, 20, 273–286. https://doi.org/10.1093/biostatistics/kxx069

Industry Context continued



For a number of major tumour types, patient treatment protocols are now based on the use of diagnostic tests to identify biomarkers and redefine cancers into more precise subsets, with improved patient response rates, better outcomes and more tolerable treatments. It is now common practice to screen NSCLC patients presenting with advanced disease for biomarkers to determine the optimal treatment approach. Immunohistochemistry (IHC) is a standard method of testing for PD-L1, EGFR and ALK biomarker status in particular, which determines whether patients receive an immunotherapy or targeted therapy in the first line.

Exhibit 3: Percentage of NSCLC patients tested for relevant biomarkers



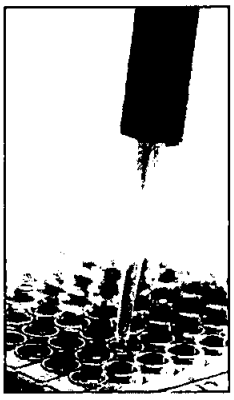
Source: IQVIA – Global oncology trends 2019

BerGenBio is a pioneer in understanding AXL biology and its role in mediating aggressive disease including drug resistant, immune-evasive and metastatic cancers, as well as fibrosis and viral infection. Overexpression of the AXL receptor tyrosine kinase has been established as a negative prognostic factor in a multitude of cancers. Lead asset bemcentinib, currently the most advanced AXL selective inhibitor in clinical development globally, is a potent and highly selective small molecule AXL inhibitor that is taken as a convenient oral once-a-day pill. Bemcentinib's clean safety profile and good tolerability make it ideal for use in combination with other treatments. Bemcentinib is currently in a broad Phase II development programme in acute myeloid leukaemia (AML) in combination with low dose cytarabine (chemotherapy) and in NSCLC in combination with Keytruda (immunotherapy). Preliminary results from both trials have shown encouraging efficacy signals. Bemcentinib is also being investigated in two Phase II trials in COVID-19 (ACCORD-2 in the UK and BGBC020 in South Africa and India) as an add-on therapy to standard of care.

BerGenBio is also developing predictive biomarkers and companion diagnostics to identify patients most likely to respond to treatment based on their AXL status for both haematological (blood) cancers and solid tumours.

Innovation

LEVERAGING INNOVATION TO TRANSFORM PATIENT OUTCOMES



Our Approach

BerGenBio's goal is to create meaningful impact in the lives of patients with aggressive diseases, including immune evasive, drug resistant and metastatic cancers. Through cutting-edge technologies, partnerships and scientific expertise we seek to transform the lives of such patients. Over the years, our organisation has gained a deep insight into AXL biology to bring value for patients by tailoring transformative drugs targeting AXL signaling pathways.

> THE RELAPSED AML SETTING REPRESENTS AN EMERGING AND VERY SIZEABLE MARKET AND BEMCENTINIB HAS THE POTENTIAL TO CAUSE A SHIFT IN THE TREATMENT PARADIGM.

Innovation, research and development are at the center of our business model. We embed an innovation-centric approach in every stage of our drug discovery process. Our approach is defined by rigorous research with state-of-the-art technologies. Our research focuses on gaining a thorough understanding of cellular mechanisms, therapy resistance, disease-specific attributes and clinical evidence. This understanding is the foundation on which we develop next-generation therapies for aggressive diseases.

We have a dedicated team and collaborators working to deliver effective therapeutic solutions for patients. We empower our team to develop expertise in niche areas to increase innovation and efficiency in our R&D efforts. Our Corporate Social Responsibility and standard operating procedures provide the guidelines and minimum standards required for research conduct. We are currently establishing a robust governance process which will review the progress of various research projects and re-evaluate priorities periodically.

Our R&D capabilities and strategic partnerships

Over the past few years we have made substantial R&D investments to strengthen our pipeline and identify new therapeutic opportunities. While our research laboratories provide us with the requisite tools and infrastructure, our greatest R&D assets are our scientists and collaborators, and the scientific know-how they represent. We have nine publications and presentations that stand as a testament to our organisational knowledge-base.

R&D EXPENSES IN FY2020

NOK 225.5M

Our valued partnerships supporting us in the development of bemcentinib

- Merck & Co. (MSD)
- ADC Therapeutics
- Massachusetts Institute of Technology
- Southampton University UK
- University Medical Center, Mannheim, Mannheim, Germany
- German Cancer Research Center (DKFZ), Heidelberg, Germany
- Department of Hematology, Cellular Therapy and Hemostaseology, University Hospital Leipzig, Leipzig, Germany
- Harvard Medical School
- MD Anderson Cancer Center
- University of Texas Southwestern Medical Center
- Haukeland University Hospital
- University of Bergen
- University of Iowa

Innovation continued

The potentiating effects of bemcentinib to enhance efficacy and address PD-1 treatment resistance are supported by initial encouraging data from the ongoing Phase II study in combination with Keytruda.

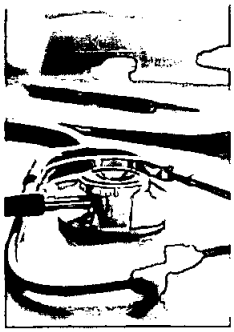
Over the years, we have strategically expanded our capabilities and our sphere of impact by engaging in partnerships with industry leaders. This has made it possible for us to accelerate our innovation-linked pursuits. We have partnered with leading academic institutions, pharmaceutical companies and clinical research organisations for advancement of our R&D efforts. Some of our key partnerships are:

- We have partnered with MSD, a global pharmaceutical company. MSD is supplying KEYTRUDA for a clinical trial in advanced non-small cell lung cancer. In January 2020 we had encouraging outcomes from a clinical trial. Our selective AXL inhibitor bemcentinib met the pre-specified efficacy endpoint in stage 1 of NSCLC phase II combination trial with KEYTRUDA.
- We have entered a licensing agreement with ADCT, a Swiss biotech to develop an AXL-ADC.
- We have entered into Investigator Sponsored Trials (ISTs) collaborations with several front-line patient facing physicians for clinical trials in several cancer indications, including myelodysplastic syndrome (MDS), Acute Myeloid Leukemia (AML), Non-Small Cell Lung Cancer (NSCLC), Melanoma, Pancreatic Cancer, Mesothelioma and Glioblastoma Multiforme.
- BerGenBio has been selected as a first candidate in a first wave of new and existing medicines to be tested through the UK Accelerating COVID-19 Research & Development: Phase 2 platform (ACCORD-2) study.

Our R&D performance

R&D Developments at a glance	
Total R&D expenses	NOK 225.5 million
Number of patents granted	10
Number of peer-reviewed publications	2
Number of international presentations	9

AML: AN AGGRESSIVE DISEASE WITH LIMITED TREATMENT OPTIONS



AML is one of the most prevalent types of leukaemia in adults and consists of a heterogenous group of haematological (blood) cancers that originate in the bone marrow. The proliferation of cancer cells in the bone marrow interferes with the normal production of mature blood cells leading to lower levels of essential red blood cells, platelets and white blood cells and the symptoms of anaemia, thrombocytopenia and neutropenia. AML is an aggressive disease with a five-year survival rate of 28.7% (this is even lower for frail and elderly patients)[7]. Myelodysplastic syndrome (MDS) can be considered a premalignant disease that also originates in bone marrow and encompasses a range of haematological conditions that are characterised by chronic cytopenia due to abnormal haematopoiesis and cell maturation. Approximately 30% of MDS patients' disease progresses to AML.

The primary aim of first-line treatment of AML is the induction of complete remission (elimination of the cancer). Treatment options include aggressive dosing regimens of chemotherapy (eg cytarabine plus an anthracycline drug), however disease relapse is often observed. These patients will then be treated with hypomethylating agents or low dose cytarabine (median overall survival (mOS) ~ six months) or targeted therapy. The approval of targeted therapies has added new treatment options for patients who test positive for the specific gene mutation or overexpression, with varying response rates and mOS of six to nine months in relapsed/refractory disease. The most prominent targeted therapies include Astellas' FLT3 inhibitor Xospata (gilteritinib) (mutation found in 20% of patients) and treatments targeting IDH1/2 mutations (observed in less than 15% and 20% of patients respectively).

The median age of AML diagnosis is 65 and thus ~70% of patients are not deemed fit enough to tolerate intensive chemotherapy due to advanced age and comorbidities. AbbVie/Roche's BCL-2 inhibitor Venclexta (venetoclax) was recently approved in combination with hypomethylating agents or low dose cytarabine in elderly patients and those who cannot tolerate intensive chemotherapy. BCL-2 is overexpressed in almost 85% of AML patients and this represents the new standard of care for these frail patients.

However, despite these advances, AML remains a significant unmet medical need, particularly in patients who have relapsed and have limited treatment options. The relapsed setting represents a sizeable market and bemcentinib has the potential to cause a shift in the treatment paradigm. AXL overexpression has been widely established as a negative prognostic factor in AML and early clinical data of AXL inhibition with bemcentinib has shown promising anti-leukemic activity and immune activation. In the US, in recognition of this unmet need, the FDA has granted bemcentinib orphan drug designation for AML as well as fast track designation in AML.

There is a significant demand for novel and innovative therapies to address the substantial unmet medical need

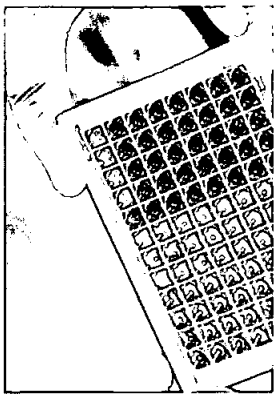
BerGenBio is exploring the utility of its AXL inhibitor bemcentinib as a monotherapy and in combination with chemotherapy in AML in the multicohort Phase II study BGBC003 (NCT02488408). The combination with low dose cytarabine has shown promising results in relapsed AML patients that could lead to a shift in the treatment paradigm for this growing unmet need. Additionally, encouraging results from the Phase II BERGAMO study (NCT03824080) of bemcentinib monotherapy in high-risk MDS patients warrant further investigation. BerGenBio has also identified a predictive biomarker (sAXL) that can be used to identify patients that are most likely to benefit from treatment based on their AXL status using a simple and convenient blood sample.

7. National Cancer Institute, SEER Cancer Stat Facts (accessed 7 January 2021) https://seer.cancer.gov/statfacts/html/amyl.html

Innovation continued

NSCLC: SYNERGISTIC COMBINATIONS COULD CHANGE THE TREATMENT PARADIGM AND ADDRESS UNMET MEDICAL NEED

Lung cancer is the second most common cancer and the leading cause of cancer mortality



Lung cancer is the second most common cancer and despite recent advancements in treatment options it remains the leading cause of cancer related mortality. NSCLC is the most common type of lung cancer and represents approximately 85% of patients. NSCLC generally presents late and is frequently diagnosed at stage IV when metastatic, which limits the potential treatment options.

Over the last decade the NSCLC treatment paradigm has evolved significantly with the approval of targeted therapies and immunotherapies. It is now routine to screen NSCLC patients presenting with advanced disease for biomarkers to determine the presence of a driver mutation and determine the optimal treatment approach (personalised medicine). The most commonly tested biomarkers are PD-L1, EGFR and ALK in particular, which determines whether patients receive an immunotherapy or targeted therapy in the first line. These treatments have shown impressive durable responses in some cases, although they are limited to only a small subset of patients that inevitably relapse due to acquired treatment resistance, leading to disease progression.

Immunotherapies, more specifically PD-1 checkpoint inhibitors, have brought about a step change in the treatment of NSCLC and Merck & Co.'s Keytruda is the market leading PD-1 checkpoint inhibitor. An important biomarker for the most commonly used checkpoint inhibitors is the expression of PD-L1 protein on tumour cells. Initially the FDA approved Keytruda monotherapy for first-line metastatic NSCLC patients with high PD-L1 expression (>50% using the tumour proportion score) and for whom it is the current standard of care. For patients with low PD-L1 expression (<50%), Keytruda plus platinum doublet chemotherapy (cisplatin with Eli Lilly's Alima (pemetrexed)) is now becoming the standard of care following a recent guideline update in the US. This means that all NSCLC patients without an actionable driver mutation such as EGFR or ALK receive Keytruda or a combination thereof in the first line, irrespective of their PD-L1 status. Approximately a third of patients have tumours that lack PD-L1 completely (<1%) and these patients show the lowest response rates to treatment PD-1 checkpoint inhibitors.

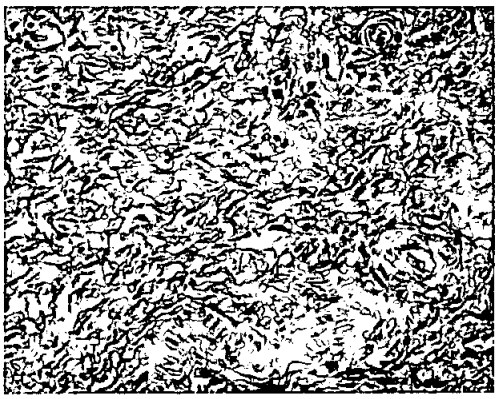
The advancement of Keytruda and targeted therapies into the first-line setting in metastatic NSCLC has left a vacuum in later lines with limited treatment options that include the older chemotherapy agents such as docetaxel or Taxol that achieve limited response for short periods of time with minimal patient benefit. There has been a rush of approvals for combinations of checkpoint inhibitors with targeted therapies and chemotherapies in particular. However, there remains a high unmet medical need and a large market potential for a well-tolerated therapy that could increase patient responses to Keytruda.

AXL is a recognised negative prognostic factor and resistance mechanism in NSCLC. BerGenBio is investigating the utility of its AXL inhibitor bemcentinib in combination with Keytruda in advanced NSCLC patients in the multicohort Phase II study BGBC008 (NCT03184571). Bemcentinib's unique mechanism of action works synergistically with immunotherapy (Keytruda) to increase a cancer's immunogenicity (its ability to be recognised and targeted by the immune system) while reducing its immunosuppressive effects. The potentiating effects of bemcentinib to enhance efficacy and address PD-1 treatment resistance are supported by encouraging data from the ongoing Phase II study in combination with Keytruda. This combination has the potential to enable a treatment paradigm shift by addressing PD-1 resistance, an unmet need.

A key part of the Phase II study is the use of biomarker analysis to identify patients who are most likely to benefit from treatment based on their AXL status. BerGenBio is developing an IHC diagnostic that uses a proprietary scoring system (cAXL) to identify patients using a solid tumour biopsy.

COVID-19: NEW OPPORTUNITIES FOR BEMCENTINIB

The COVID-19 pandemic has presented a new opportunity for bemcentinib as a potential treatment



While the emergence of a number of approved COVID-19 vaccines will likely lead to widespread immunisation, this will take time globally before the spread of the virus is under control. Furthermore, long-term data on safety and durability, as well as the impact of mutagenicity and the emergence of new variants of the virus on vaccine efficacy, will become increasingly pertinent. Much like the flu (influenza virus), COVID-19 could become endemic with seasonal spikes in basal infection levels requiring annual vaccination against the latest strain.

In the near term and probably for the next several years, there is likely to be significant demand for multiple effective treatment options. The standard of care is being constantly revised as our understanding of the SARS-CoV-2 virus and the COVID-19 disease increases. Building an arsenal of multiple treatments that work in different ways is important as COVID-19 is a multifaceted illness that affects individuals in different ways. Current treatment options are limited to the anti-viral agent Veklury (remdesivir) and corticosteroid dexamethasone and are only respectively applicable to hospitalised patients and those that also have severe disease. There remains an urgent need for treatments across the entire treatment spectrum.

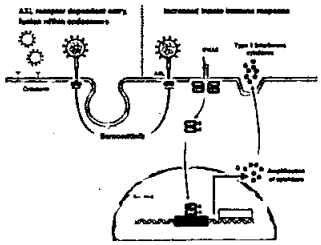
Bemcentinib has presented a unique dual mechanism of action to combat COVID-19 infection

Preclinical work suggests that AXL plays a key role in SARS-CoV-2 viral infections via two mechanisms. It is used by the virus to gain entry into cells, facilitating viral replication and spread. It is also involved in suppressing a key anti-viral defence mechanism (type 1 interferon response) of the immune system. Bemcentinib's potential dual mechanism of action and convenient once-a-day oral dosing is of interest, initially clinical utility is being assessed in the hospitalised setting. If efficacious in these patients, clinical development work to assess its potential use in the community setting or as a post-exposure prophylactic may be appropriate depending on our clinical and translational data from ongoing studies.

Two Phase II trials are exploring bemcentinib efficacy in combination with current standard of care treatments in hospitalised patients. Bemcentinib was the first treatment selected in the UK's ACCORD-2 study that is being funded primarily by the Department of Health and Social Care (DHSC) and UK Research and Innovation (UKRI). BerGenBio has also initiated a company sponsored study in South Africa and India.

The competitive landscape is constantly evolving and with it the expectations for potential new treatments. Bemcentinib's effectiveness in these studies vs or in addition to other therapeutic drugs will define its utility as a treatment against a backdrop of global vaccination programmes.

Exhibit 4: Bemcentinib mechanism of action against SARS-CoV-2 infection of cells



Source: IQVIA – BerGenBio corporate presentation

Pipeline Overview

BERGENBIO IS A CLINICAL-STAGE BIOPHARMACEUTICAL COMPANY FOCUSED ON DEVELOPING INNOVATIVE DRUGS INHIBITING AXL, A PROTEIN INVOLVED IN AGGRESSIVE DISEASES INCLUDING IMMUNE EVASIVE, DRUG RESISTANT AND METASTATIC CANCERS

The company has successfully translated its world-leading research of AXL's biological role and function into two first-in-class clinical stage assets: the highly selective, oral small molecule AXL kinase inhibitor bemcentinib and the novel functionally blocking anti-AXL therapeutic monoclonal antibody (mAb) tilvestamab.

In 2020, BerGenBio continued to progress its Phase II clinical development programme, which continues to generate data to demonstrate that bemcentinib and AXL inhibition can potentially increase the efficacy of immunotherapy, targeted and chemotherapy; particularly in patients whose tumours are rich in AXL. Investigator-led trials are exploring a range of other oncology indications: High Risk Myelodysplastic Syndromes, Acute Myeloid Leukaemia, Glioblastoma and relapsed malignant mesothelioma, which all reported updates this year.

BerGenBio's central clinical focus is on NSCLC and AML. The NSCLC / pembrolizumab combination study (BGBC008) continues to deliver promising data readouts, with interim clinical and translational data presented in the summer that demonstrated clinical benefit in AXL-positive patients. This strengthens the evidence that bemcentinib could be a potential alternative to the second-line chemotherapy standard-of-care. Elsewhere, recent results from the Phase II trials of bemcentinib in combination with low-dose chemotherapy (LDAC) in AML (BGBC003) indicate that the treatment has promising efficacy in relapsed AML patients who are unfit for intensive chemotherapy.

Prompted by the global pandemic, in 2020 BerGenBio initiated trials using bemcentinib to treat COVID-19 patients, based on pre-clinical research that had shown the potential of AXL inhibition in infectious diseases. Two Phase II studies have been initiated in the UK and in South Africa/India.

Tilvestamab, a proprietary, therapeutic anti-AXL antibody, is BerGenBio's second clinical asset and has completed a Phase 1a trial and is expected to enter a Phase 1b First-in-Patient trial in 2021. Pre-clinical data was presented in October 2020, showing that tilvestamab prevents AXL mediated cell signalling in cancer cell lines, reduces cell migration and invasion and shows anti-tumour efficacy.

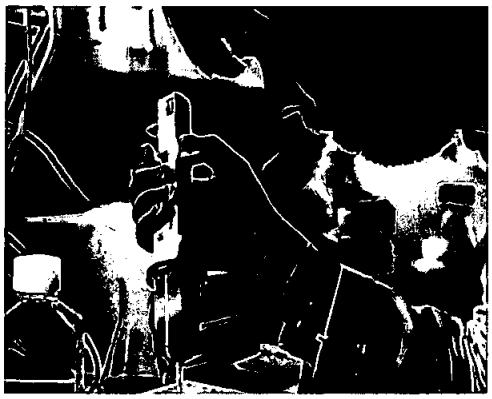
In parallel with the clinical development programme, BerGenBio pursues a broad companion diagnostics programme in order to support a personalised medicine approach for the company's AXL inhibitors.

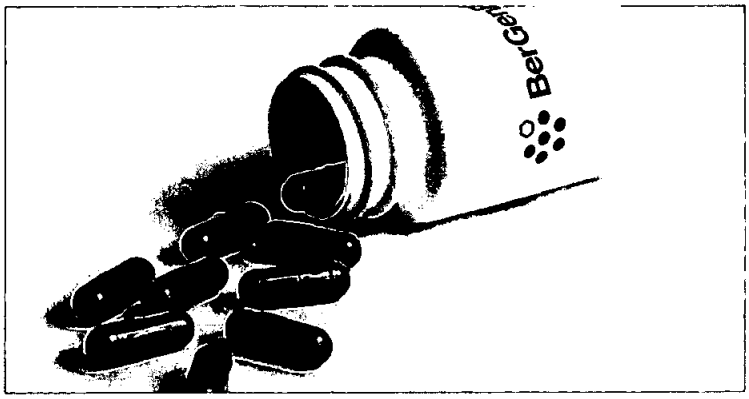
BerGenBio pipeline of sponsored clinical trials

Candidate
Bemcentinib monotherapy
Bemcentinib combination with LDAC
Bemcentinib combination with pembrolizumab MERCK
Bemcentinib monotherapy
Tilvestamab (BGB149)

BerGenBio pipeline of Investigator Sponsored Trials (ISTs)

Candidate
Bemcentinib





Ongoing trial
Completed trial

Targeted Indication	Preclinical	Phase I	Phase II	Registrational
>2L AML & MDS				
>2L AML				
2L NSCLC chemo refractory				
2L NSCLC CPI refractory				
2L NSCLC CPI+ chemo refractory				
Hospital COVID-19 patients				
Phase I				

Targeted Indication	Phase I	Phase II	Registrational	Sponsor
COVID-19	Monotherapy			Uni. Hospital Southampton/ UKRI funded
2L AML	Monotherapy			European MDS Cooperative Group
2L HR-MDS	Monotherapy			European MDS Cooperative Group
Recurrent Glioblastoma	Monotherapy			Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins
Relapsed Mesothelioma	+ pembrolizumab			University of Leicester
1L Metastatic Melanoma	+ pembrolizumab or + Dabrafenib/Trametinib			Haukeland University Hospital
2-4L Stage 4 NSCLC	+ docetaxel			UT Southwestern Medical Center
1L metastatic or recurrent PDAC	+ Nab-paclitaxel + Gemcitabine + Cisplatin			UT Southwestern Medical Center

Product Pipeline

FOCUSED ON AXL

At a glance:

- AXL is a negative prognostic factor in a multitude of aggressive diseases including immune evasive, therapy resistant cancers
- AXL is a cell surface receptor tyrosine expressed on cancer cells and cells of the innate immune system
- When activated on immune cells, AXL suppresses the immune response; on cancer cells it allows for immune escape, therapy resistance and spread

AXL receptor tyrosine kinase is expressed on aggressive cancer cells and on cells of the innate immune system where it acts to suppress the immune response to the cancer.

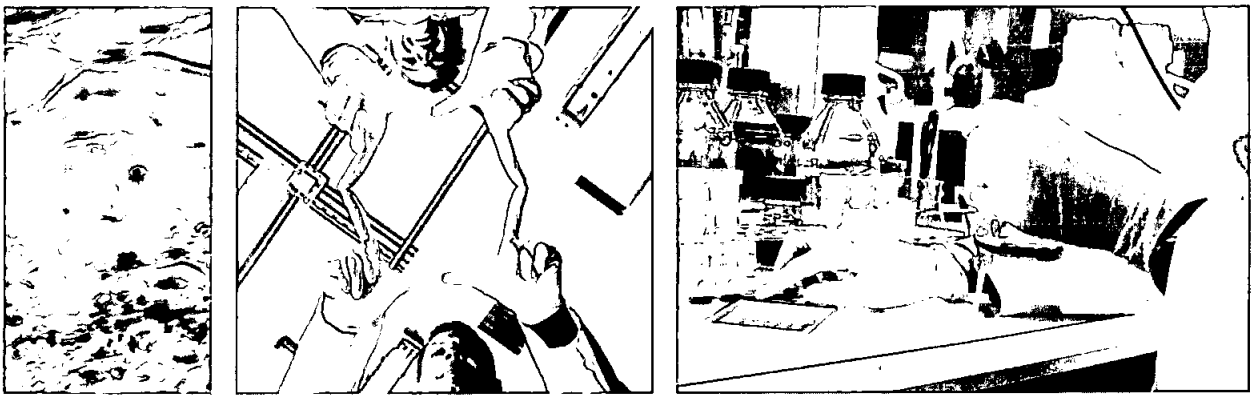
AXL helps aggressive tumours escape detection by the immune system[8] and destruction by therapy[9] through its dual action of switching off the innate immune response and allowing cancer cells to enter a state of survival by becoming resistant to therapy, less susceptible to immune attack and able to spread throughout the body.

AXL expression has been shown as a negative prognostic factor in a multitude of diseases including AML, MDS and NSCLC in oncology.

While seldom mutated, AXL becomes epigenetically unregulated in response to adverse changes – it has been demonstrated to correlate with lack of response to checkpoint inhibitor therapy, impaired T-cell mediated killing of cancer cells and reduced activity of dendritic and natural killer cells[10, 11, 12, 13].

AXL has also been reported to be implicated in life-threatening fibrotic conditions.

8. Terry et al., (2019 Cancer Immunology Research)
9. Quinn et al., (Mol Cancer Ther.2019)
10. Hugo et al. Cell (2016)
11. Davidsen etal. AACR (2018)
12. Kurowska-Stolarska et al. Nature Communications (2017)
13. Paolino et al. Nature (2014)



BEMCENTINIB, PHASE II – preparing for late-stage development

First-in-class highly selective AXL inhibitor

At a glance:

- First-in-class, highly selective and potent oral small molecule AXL inhibitor to treat aggressive cancer
- Phase II clinical development in AML, MDS and solid tumours including 2L NSCLC; as a monotherapy and in combination
- Phase II randomised clinical trials in COVID-19 are ongoing in the UK, South Africa and India

Key results to date:

Bemcentinib, a highly selective small molecule AXL inhibitor is being tested as a monotherapy and in combination with immuno-, targeted and chemotherapy in leukaemia and solid tumours. Bemcentinib, when taken once daily orally, has reported activity both as a monotherapy and in combination. In addition, AXL biomarker correlation has been observed and treatment is generally well tolerated.

The company has focused its clinical development with bemcentinib on second line NSCLC, AML and MDS patients, in several company sponsored trials.

In 2019, these trials delivered important and highly promising interim results for bemcentinib as a complete monotherapy in AML (43% complete response rate in AXL biomarker positive patients, evidence of immune activation and clonal stabilisation) and NSCLC in combination with pembrolizumab (33% overall response rate and 8.4 months median PFS in cAXL positive patients). In 2020, BerGenBio continued with its Phase II expansion cohorts in both NSCLC, and relapsed AML and MDS with promising interim analyses presented at a number of major medical congresses.

In addition, BerGenBio supports a strategic portfolio of investigator initiated trials which are sponsored by leading patient facing research physicians in indications with strong scientific rationale and potential for future label extension.

Product Pipeline continued

BERGENBIO COMPANION DIAGNOSTICS

Tissue and plasma markers to identify patients most likely to benefit

At a glance:

- Probability of success for a drug development programme is greatly improved in the presence of a biomarker
- Common technologies used during diagnosis of cancer patients include tissue-based procedures such as immunohistochemistry (IHC) which typically require a biopsy
- Blood sample analysis (liquid biopsies) are also particularly attractive options as they promise a more convenient and cost-effective patient experience
- The company uses established and cutting-edge technology in its CDx development programme. The objective is to clinically validate relevant biomarkers and seek regulatory approval for their use in future clinical trials and pursue a personalised medicine approach to reimbursement

Key results to date:

AXL IHC

- Proprietary cAXL IHC method has been developed and is CLIA validated for clinical trail use
- Half of the cAXL evaluable advanced NSCLC patients in BerGenBio's BGBC008 Phase II clinical study of bemcentinib in combination with pembrolizumab (NCT03184571) were found to stain positive for tumour cAXL
- cAXL positive patients reported superior response (33% vs 7%) and median progression free survival (PFS, c. 8.4 months vs 2.9 months) compared to cAXL negative patients

Soluble AXL

- When the AXL receptor is not in use, it is shed into the plasma, levels of soluble AXL (sAXL) are thus inversely correlated with AXL signalling activity
- Approximately half of relapsed / refractory AML and MDS patients were found to exhibit low sAXL plasma levels indicative of increased AXL signalling activity in the company's BGBC003 Phase I/II bemcentinib monotherapy clinical study (NCT02488408)
- Patients with low sAXL / high AXL signalling reported superior response (43% vs 0%) compared to those with high levels of sAXL when treated with bemcentinib monotherapy

OVERVIEW OF RESULTS: BERGENBIO SPONSORED STUDIES

Focus: AML and Lung Cancer

BerGenBio designed a strategic Phase II programme to identify the most promising indications for selective AXL inhibition to progress into late-stage clinical development.

In anticipation of a correlation of efficacy with biomarker expression, particularly the bemcentinib target AXL, a comprehensive biomarker programme was rolled out alongside the clinical trials.

COVID-19

In April 2020, BerGenBio's bemcentinib was selected to take part in the UK Government's ACCORD study, a multi-centre randomised Phase II clinical trial initiative, to assess bemcentinib's effectiveness in treating the most vulnerable patients with COVID-19. This was temporarily suspended as case numbers dropped, then subsequently restarted in September 2020. Since then, BerGenBio has also initiated the randomised Phase II BGBC020 study of bemcentinib in patients with COVID-19 in South Africa and India. Recruitment is ongoing for both trials.

Monotherapy / Chemo combo elderly AML patients:
Durable clinical benefit as monotherapy and in combo with low dose AraC

21,000 new cases annually in USA*

Results

1) bemcentinib monotherapy in R/R AML in sAXL positive patients:
- 43% CR/CRi/CRp-rate

2) bemcentinib + LDAC in relapsed AML patients:
- ORR to date of 45%
- CR/CRi rate to date of 36%
- Median time-on-treatment 6.2 months in patients with CR/CRi

Context
- Venetoclax reported 19% ORR in R/R AML as monotherapy, and is now approved in combination with chemo in first line setting.

Clinical Trial Identifier: NCT02488408

Pembrolizumab combo 2L NSCLC
Increase response rate - including in PD-L1 negative

200,000 new cases annually in USA*

Results in advanced previously treated patients
- Cohort A – in chemo refractory patients
  - Stage 1 and 2 complete
  - 33% ORR in cAXL positive patients
  - Median PFS 8.4 months in cAXL positive patients
  - mOS 17.3 months in cAXL positive vs 12.4 months in cAXL negative
- Cohort B – checkpoint inhibitor refractory patients
  - Stage 1 completed, stage 2 recruiting; data immature
  - mPFS 2.5 fold longer in cAXL positive patients
- Cohort C – checkpoint-chemo refractory patients
  - Recruiting

Context
- Pembrolizumab monotherapy or combination with chemotherapy is current standard of care
- ORR in PD-L1 negative / low patients is 8–14%, with 2 months PFS**

Clinical Trial Identifier: NCT03184571

* US only, https://seer.cancer.gov, accessed Feb 15 2019

** Garon et al: KEYNOTE-001 study. NEJM (2015)

Product Pipeline continued

EXPLORING ADDITIONAL PIPELINE OPPORTUNITIES THROUGH INVESTIGATOR SPONSORED TRIALS (IST)

Investigator Sponsored Trials

BerGenBio has established a strategic Investigator Sponsored Trial (IST) program to support its own sponsored clinical development programme.

Investigator sponsored trials are clinical trials proposed by front-line patient-facing highly respected research physicians who act as the regulatory sponsor and are supported by industry in bespoke clinical development partnerships.

The industry partner does not assume the role of sponsor according to European or US regulatory guidelines but may offer support in a variety of different ways, such as providing the investigational medicinal product at no cost.

As such, ISTs are a cost effective way to investigate additional pipeline opportunities for bemcentinib while raising the company's profile among the scientific and clinical community, who will ultimately be prescribing bemcentinib to patients should it be approved.

ISTs with bemcentinib are ongoing or planned in the following indications: COVID-19, Acute Myeloid Leukemia (NCT03824080), Myelodysplastic Syndromes (MDS) (NCT03824080), Glioblastoma and MDS (NCT03824080), Mesothelioma (NCT03654833), Metastatic Melanoma (NCT02872259), advanced Non-Small Cell Lung Cancer (NCT03184571) and Pancreatic cancer (NCT03649321).

Updated results from these studies will be presented at future clinical congresses as appropriate.

Potential label expansion with additional phase II studies with bemcentinib

Monotherapy Selected, biomarker directed patients	COVID-19	Ongoing
	Glioblastoma	Ongoing
	Ovarian (EMT signature selected)	Potential
Chemotherapy Combinations Improve responses in hard to treat settings	Pancreatic	Ongoing
	NSCLC	Ongoing
Immunotherapy Combinations Target resistance, enlarge addressable patient population	Melanoma	Ongoing
	Mesothelioma	Ongoing
Targeted Therapy Combinations Target resistance, enlarge addressable patient population	Melanoma	Ongoing

TILVESTAMAB, PHASE I

First-in-class therapeutic AXL antibody

At a glance:

- First-in-class therapeutic AXL function blocking antibody
- Discovered and developed by BerGenBio
- Robust, scalable manufacturing process established
- Phase I healthy volunteer clinical trial completed, Phase 1b First-in-Patient trials planned in 2021

Tilvestamab is a fully humanised AXL function blocking antibody discovered and wholly owned by BerGenBio.

The antibody has completed a placebo controlled healthy volunteer Phase I clinical trial (NCT03795142) to confirm its safety, tolerability, pharmacokinetics and pharmacodynamics prior to testing its efficacy in patients. The company is planning to initiate a Phase 1b, First-in-Patient, trial in 2021.

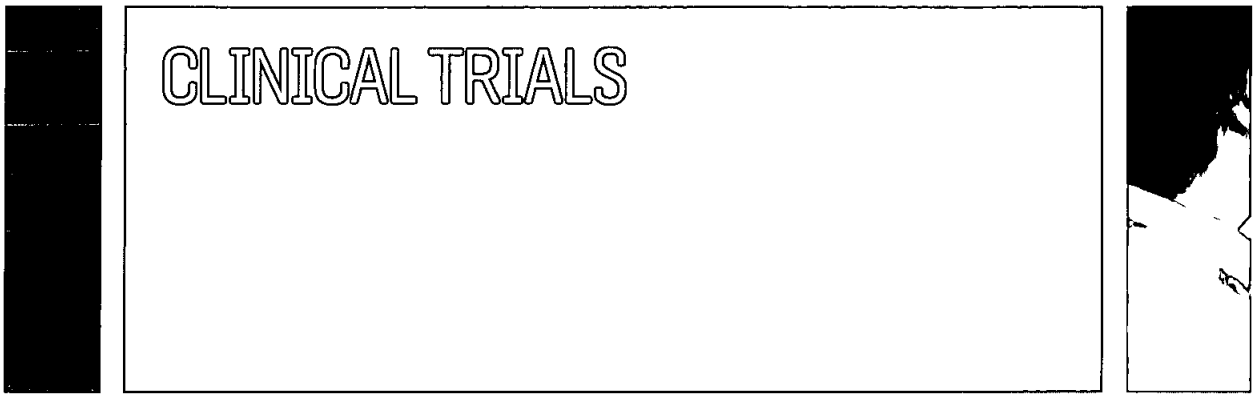
Antibodies are proteins that our bodies produce to mark pathogens for recognition by the immune system and that as such play a vital part in building immunity. Antibodies are characterised by extremely high specificity and can be produced by biological systems such as specialised cells within our bodies.

These characteristics captured the biotechnology industry's interest several decades ago: Instead of using chemical synthesis generating chemical structures (so-called "small molecules") it is now possible to engineer highly specific proteins ("large molecules") that either activate or antagonise a cell surface receptor's signal (as for example the immune checkpoint inhibitor antibodies). Antibodies now form a vital part of modern medicine as they can be engineered with high specificity to a certain target and function thus inducing a desired therapeutic effect.

Tilvestamab is an antibody that binds the extracellular portion of the AXL receptor and blocks its signal. Tilvestamab is fully humanised and is selective for human AXL; it is manufactured by specialised cells that are kept in a bioreactor in a process that is being optimised to reproducibly yield the antibody at high quantity. Therapeutic antibodies like tilvestamab are most commonly administrated intravenously (bemcentinib on the other hand, a small molecule, is taken orally).

While both tilvestamab and bemcentinib block the AXL signal, they will be strategically developed in different indications.

Clinical Trials



Clinical Trials

Clinical trials are important to ascertain the efficacy, safety and effectiveness of drug candidates. BerGenBio collaborates with Contract Research Organisations and academic institutions around the globe to conduct our clinical trials. Patient safety, regulatory compliance, transparency, ethics, and privacy are the cornerstones of our clinical trial conduct. As such, we engage with only those partners that share our values of responsible clinical trial conduct. We have established procedures to ensure systematic screening and onboarding of our partners. Our clinical team works with our partners on contractual agreements that clearly outline responsibilities and ensures adherence to global and local guidelines and regulations.

Investigator Sponsored Trials (ISTs) are clinical trials where BerGenBio is approached by front line patient facing highly respected research physicians. The physicians act as the regulatory sponsor (sponsor-investigator), and are supported by industry in bespoke clinical development partnerships. BerGenBio does not assume the role of sponsor in these partnerships, but provides support in a variety of different ways, such as providing investigational drug at little or no cost, scientific and intellectual input to the trial design, protocol drafting, regulatory filing, compliance support, modest contribution to costs or provision of specialist required laboratory services. We have established robust processes to select partners for these ISTs to ensure the sponsor-investigator is qualified and has the necessary resources to carry out the study.

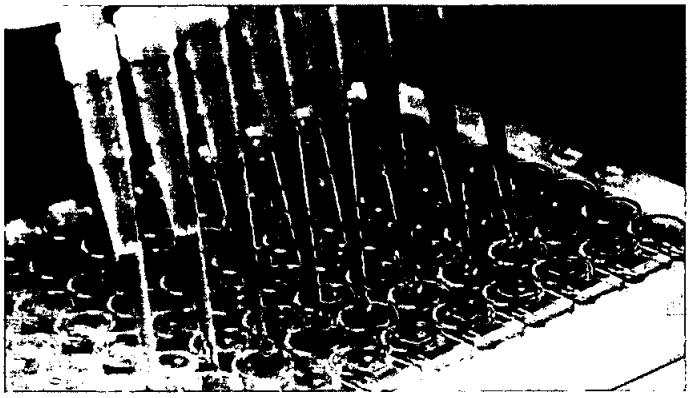
4 BGB sponsored clinical trials and 6 ISTs currently active

3 BGB sponsored clinical trials and 3 new ISTs in 2020

Clinical trial management

We have employed standard processes for monitoring our clinical trials conducted across our portfolio. Systemised procedures for documentation are in place that enable us to effectively monitor and record various performance indicators of the clinical trials. Our documentation system tracks data on the safety, efficacy, risk-benefit profile, toxicological data and dose-response relationship for our new therapeutics.

We conduct our clinical trials in accordance with international regulations, guidance and standards. While we delegate elements of day-to-day management to Clinical Research Organisations and other specialist vendors, we maintain clear oversight of trial performance. We monitor and record a variety of performance indicators to ensure high performance. In particular, we monitor indicators relating to safety, efficacy, risk-benefit profile, toxicological data, dose-response relationship and operational performance.



The Director of Clinical Operations works closely with our Chief Medical Officer to lead our clinical trial portfolio. The Senior Management Team oversees conduct of the clinical trial portfolio and conducts regular reviews of trial progress and compliance with international and local standards. The Clinical Sub-committee of the Board periodically reviews compliance and progress of various clinical trials. Our clinical trials are also subjected to external controls, such as supervision by an independent ethics committee, independent data monitoring committees, and inspections by regulatory authorities.

Compliance and ethics

We ensure strict conformity with international, regional and local regulatory requirements in all our sponsored studies. All our clinical studies comply with the principles elucidated in the Declaration of Helsinki, the International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use, including Good Clinical Practice guidelines E6 (R2) and International Ethical Guidelines for Health-related Research Involving Humans. In 2020, we had no critical inspection findings from any of our regulators and no monetary claims were received.

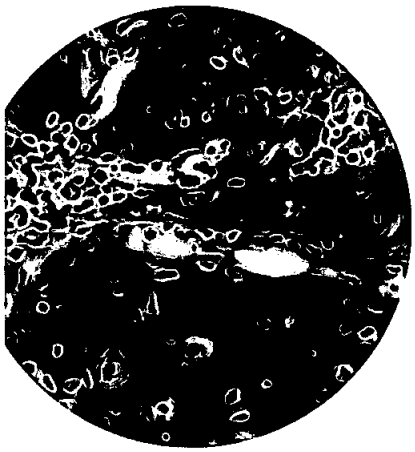
Transparency

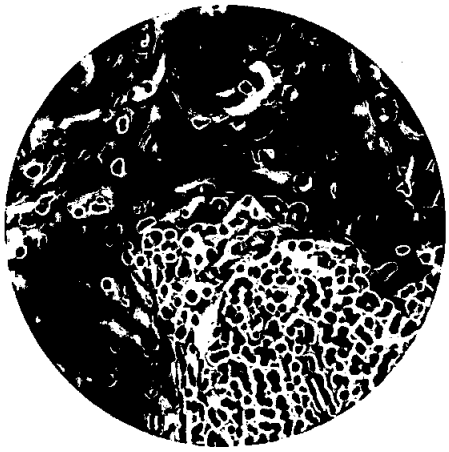
We make periodic disclosures of clinical trial data in line with EFPIA-PhRMA Principles for Responsible Clinical Trial Data Sharing. We share information on the outcomes of our clinical trial studies at https://clinicaltrials.gov and through EUDRaCT and other registries in accordance with international legislation. We also support academia by sharing clinical data upon request pursuant to relevant regulations and protocols.

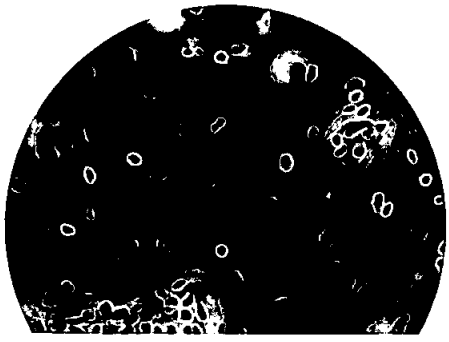
Clinical trial management during COVID-19

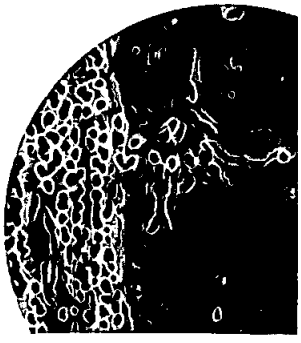
In light of the pandemic, arrangements were made to minimise the need for clinical trial participants to visit clinics through a combination of remote visits where appropriate and provision of additional medication via the pharmacies. Care was taken to focus on maintaining the quality of critical data and processes during this time.

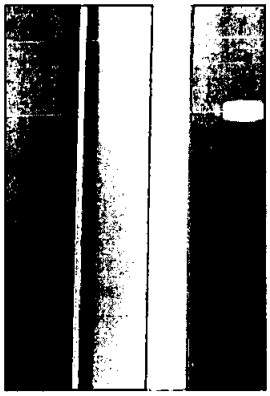
CORPORATE GOVERNANCE











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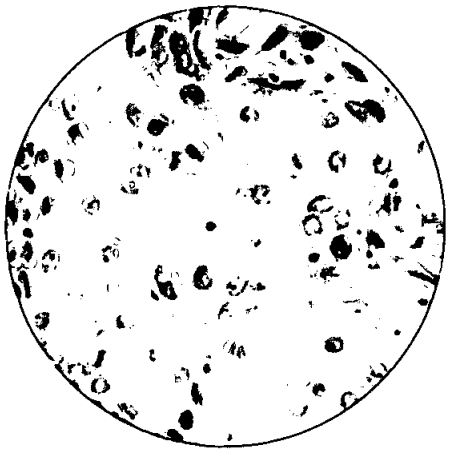


Board of Directors

SVEINUNG HOLE

Chair

Sveinung Hole is the CEO of Trond Mohn Foundation and Stiftelsen Kristian Gerhard Jebsen. Hole holds a number of Board positions amongst others at Tromsø Research Foundation, Sarsia investment funds, Nordic and Europe Health Invest AS, PE Helse AS and Prophylix Pharma AS. He also heads the Health & Care21 Strategy Council appointed by the Norwegian Minister of Health. Formerly he was the CEO of Sarsia Seed AS, Board Member of Norwegian Venture Capital Association and Bergen Hospital Trust (Helse Bergen). Hole has also held various top management positions in the Nordic and US. Hole holds a Master of International Management from BI Norwegian Business School.

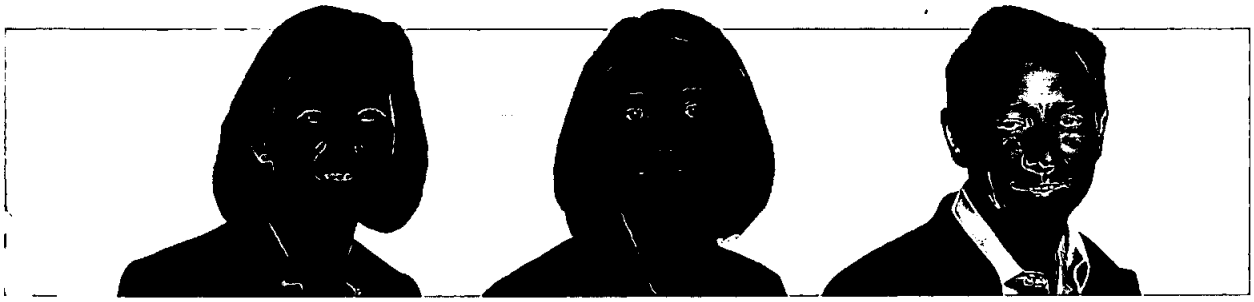
Mr Hole joined the Board of Directors on 1 September 2010 and as Chairman 13 March 2019. He is a Norwegian citizen and resides in Norway. He attended 15 Board meetings in 2020.

DR. STENER KVINNSLAND

Non-Executive Director

Stener Kvinnsland has more than 30 years of experience in oncology. He is Chair of Board, Oslo University Hospital. Among Dr. Kvinnsland's previous roles, he was Chief Executive Officer of the Bergen Hospital Trust (Helse Bergen), Head of the Department of Oncology and Medical Physics at Haukeland University Hospital, Professor of Medicine (Oncology) at the University of Bergen and Director Clinical R&D, Oncology for Pharmacia & Upjohn in Milan.

Mr Kvinnsland joined the Board of Directors on 22 February 2015. He is a Norwegian citizen and resides in Norway. He attended 14 Board meetings in 2020.



DR. DEBRA BARKER

Independent Non-Executive Director

Debra Barker is a seasoned clinical development executive with experience from Novartis, Roche, Smithkline Beecham and Knoll and served until recently as the Chief Medical and Development Officer at Polyphor Ltd. Dr Barker has a Diploma in Pharmaceutical Medicine and received a MSc in immunology from the King's College in London and a Medical Degree from the Queens College, Cambridge, UK. She is a UK-Swiss citizen.

Mrs Barker joined the Board of Directors on 13 March 2019. She is a UK citizen and resides in Switzerland. She attended 14 Board meetings in 2020.

DR. SALLY BENNETT

Independent Non-Executive Director

Sally Bennett has a career spanning medicine, equity and capital markets and investment management. She has spent the last 13 years at Healthcor, one of the largest healthcare focused investment firm in the US, where she is currently a senior member of the investment team. Prior to Healthcor she spent a decade in senior analyst roles at ING Financial Markets and latterly Piper Jaffray. She serves on the Council of Governors at UCLH, an NHS Foundation Trust Hospital and is a Board member of the P4 Precision Medicine Accelerator Programme in the UK. She is a member of the Institute of Directors (IoD) and has been awarded the CertIoD qualification. Dr Bennett received a BSc in Anatomical Sciences and a Medical Degree, awarded with Honours, both from the University of Manchester. She is a UK citizen.

Dr Bennett joined the Board of Directors on 9 December 2020. She is a UK citizen and resides in UK. She attended 1 Board meeting in 2020.

DR. FRANÇOIS THOMAS

Independent Non-Executive Director

François Thomas has more than 25 years of experience in the life sciences sector and is currently a Venture Partner at Sofimac, responsible for management of the Inserm Transfert Initiative portfolio. Prior to this he was the CEO of Cytheris, a private biotech company, and have held management positions at Ipsen (VP Clinical Development), Genset (VP Licensing and Pharmacogenomics), led the healthcare corporate finance at Bryan Garnier and was a Venture Partner at Atlas Ventures. He has been on the Board of Directors of more than 20 biotech companies in the EU and NA, and has been involved in the development of multiple HemOnc drugs during his professional career. Dr. Thomas is a French certified medical oncologist, a former assistant professor at the Gustave Roussy Institute, and received MSc in cancer biology and an MBA in management from Paris University and MIT (Boston), respectively. He is a French citizen.

Mr Thomas joined the Board of Directors on 9 December 2020. He is a French citizen and resides in France. He attended 1 Board meeting in 2020.

Management Team

RICHARD GODFREY MRPharmS, MBA

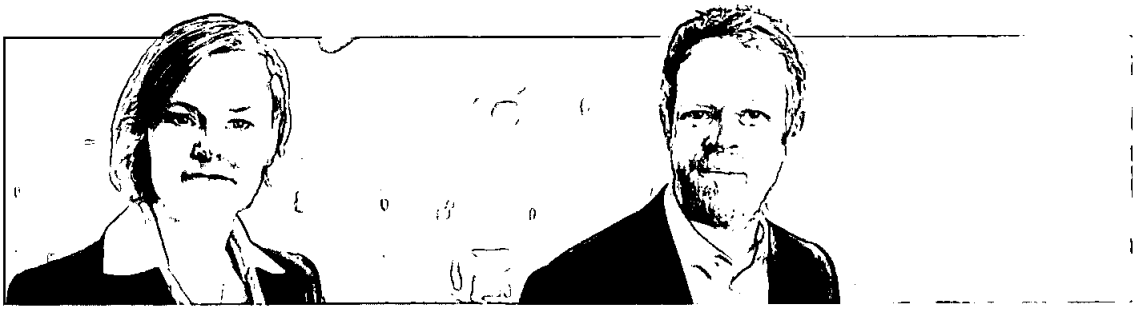
Chief Executive Officer

Mr Godfrey joined BerGenBio as Chief Executive Officer in 2008. Mr Godfrey has more than 30 years' experience leading and developing international biopharmaceutical organisations. From 2003-2007 Mr Godfrey served as Chief Executive Officer of Aenova Inc., a specialist biopharmaceutical company. Prior to this he was the Managing Director of DCC Healthcare Ltd and previously held positions of increasing responsibility in research, development and commercial roles at Catalant, Eli Lilly and Reckitt Benckiser, Mr Godfrey is a qualified Pharmacist, holds a degree in Pharmaceutical Chemistry from Liverpool University and received an M.B.A. from Bath University. Mr Godfrey is a British citizen and resides in Norway.

PROFESSOR HANI GABRA MD, PhD, FRCPE, FRCP

Chief Medical Officer

Professor Hani Gabra joined BerGenBio in September 2019 as Chief Medical Officer, based in Oxford UK. He has extensive experience of preclinical cancer biology and clinical drug development, having previously been Vice President in Early Clinical Development at AstraZeneca in Cambridge, UK, concurrently holding the positions of Professor of Medical Oncology at Imperial College London and Honorary Consultant in Medical Oncology at Imperial College Healthcare NHS Trust (since 2003) and Adjunct Professor at the Centre for Cancer Biomarkers at University of Bergen (since 2016). Prof Gabra is an internationally recognised leader in translational research and gynaecological oncology. His research interests include tumour suppressor genes that regulate receptor tyrosine kinase networks (including AXL), the molecular basis of clinical platinum resistance, and all phases of ovarian cancer clinical research.



GRO GAUSDAL PhD

Director of Research & Bergen Site Leader

Dr Gro Gausdal joined BerGenBio in 2013 and holds the position of Director of Research and Bergen Site Leader. Prior to joining BerGenBio, she obtained her PhD degree investigating mechanisms of drug induced cell death and resistance in leukaemia. Dr Gausdal carried out her Post Doc training at the MD Andersen Cancer Center in Houston and at the University of Bergen, and has over 15 years' experience in academic research and supervision.

ENDRE KJÆRLAND PhD

Associate Director of IP and Contracts

Dr Endre Kjærland joined BerGenBio AS in 2011 and is now head of intellectual property, quality systems and contracts. Prior to joining BerGenBio, he has gained more than 10 years of experience in academic science and supervision. He completed a MSc in molecular biology and PhD in biochemistry from the University of Bergen.

RUNE SKEIE

Chief Financial Officer

Rune Skeie joined BerGenBio in 2018 as CFO. He has over 20 years of financial management, corporate development, corporate governance and advisory experience with public and private companies across multiple industry sectors. The majority of his career was spent at EY (formerly Ernst & Young), where he held the role of Executive Director, before joining REMA Franchise Norge AS, the multinational supermarket business. Mr Skeie is a Registered Accountant and a State Authorised Public Accountant.

JAMES BARNES PhD

Director of Operations

Dr James Barnes joined BerGenBio in March 2019 as Director of Regulatory Affairs and Programme Management, based in Oxford, UK. He has 14 years' experience in the fields of regulatory strategy, regulatory policy and project management across a wide range of therapeutic areas, including oncology. His early and late-stage development experience, recently focused on innovative breakthrough products for rare diseases, has been gained from both pharmaceutical and consultancy roles. He has a Cellular & Molecular Biology PhD from the University of Bristol in the field of colorectal cancer and held a Postdoctoral Research position in Human Embryonic Stem Cells at the University of Sheffield.

DEBBIE MOLYNEUX

Interim HR Director

Debbie Molyneux joined the company in 2019 as Consultant for Human Resources. She has 20 years experience of HR in multi-national organisations and SMEs in a variety of Industry sectors, including medical devices. Debbie has experience of leading multi-national HR teams with strategic leadership and her consultancy has seen her support businesses undergoing change, advising management teams and providing a wide range of HR services including organisation design and learning and development. Debbie is a graduate of the University of Birmingham, a member of the Russell Group of Universities, holds a post graduate qualification in Human Resource Management from Oxford Brookes University, and is a Chartered Member of the CIPD (Chartered Institute of Personnel and Development).

ALISON MESSOM PhD

Director of Clinical Operations

Dr Alison Messom joined BerGenBio in June 2019 based in Oxford, UK. She brings over 20 years' clinical research experience having held a wide variety of leadership roles, within Pharma Companies & CROs. She has detailed experience of directing global clinical trials across phases I-IV and has worked in a wide variety of leadership roles, within Pharma Companies & CROs. Alison has been awarded a PhD in molecular genetics by The University of Leeds and a postgraduate certificate in international business management by University College Dublin.

Remuneration Report 2020

Prepared by: BerGenBio Remuneration Committee

IN 2020 BERGENBIO HAS CONTINUED TO PUSH AHEAD WITH MAJOR ACHIEVEMENTS IN THE RESEARCH AND DEVELOPMENT TOWARDS PROVIDING REAL MEDICINES FOR CLINICAL UNMET NEEDS

Section 1 - Chairman's Letter

This statement regarding remuneration of the management of BerGenBio ASA has been adopted by the Board of Directors of BerGenBio ASA pursuant to section 6-16a of the Norwegian Public Limited Companies Act.

In 2020 BerGenBio has continued to push ahead with major achievements in the research and development towards providing real medicines for clinical unmet needs. The COVID-19 pandemic has affected BerGenBio along with many other companies across this sector. However, for BerGenBio the pandemic also presented a unique business opportunity based on the discovery of bemcentinib's potential COVID-19 effect. An extraordinary effort from the BerGenBio team resulted in this discovery being translated into clinical trials, and thus value for the company.

In a time where many businesses have struggled, BerGenBio has been fully operational all year, without the need for government grants, and expanding as it prepares for late-stage asset development. After careful consideration, the Board of Directors has applied its remuneration practices cautiously, but normally to be able to develop the business, recruit and retain key personnel in order to pursue our strategic goals.

As the company matures and as new formal requirements on transparency and governance have to be implemented, the Remuneration Committee in 2020 engaged external assistance to ensure our policies are compliant and that the application serves our business needs in the business environment we operate. The resulting Remuneration Policy has not materially changed, but is updated and will reflect the upcoming formal requirements, like the Shareholder Rights Directive (SRD II), as they materialise. A comprehensive Benchmark analysis of remuneration models and levels based on a revised Peer Group of companies reflecting BerGenBio's development stage, documents that our policies and practices are well within the normal ranges and should serve our business purpose effectively.

After the annual general meeting the updated Remuneration Policy will be available on the company's website in the Corporate Governance section.

I look forward to receiving your support for our new Remuneration Policy at the annual general meeting 19 March 2021.

Sveinung Hole
Chairman of the Remuneration Committee
23 February 2021

Section 2 - Remuneration Committee Activity

The Remuneration Committee

The Board of Directors with the support of the Remuneration Committee determines the remuneration policy for BerGenBio. The applied remuneration practices must continue to support the strategic aims of the business and enable recruitment, motivation and retention of senior executives. At the same time, BerGenBio's practices must take account of the views of governance bodies and the expectations of shareholders and the wider employee population.

The Board of Directors approves the total remuneration of the CEO, which is communicated to the shareholders through the annual report. The Board of Directors also has final approval of the remuneration of the senior management, based on the recommendation of the Remuneration Committee.

In 2020, the Committee has taken paid advice from Deloitte to revise both the Remuneration Policy and remuneration practices. The scope of the engagement was to ensure compliance with existing and coming laws, regulations, and good corporate governance, as well as making sure the company is able to stay competitive in recruitment and retention.

The engagement comprised revision of compensation models and levels, as well as benchmarking of major elements of compensation based on a revised Peer Group of companies.

The Board of Directors appoints the Remuneration Committee which consists of members of the Board of Directors. The members in 2020 were:

- Sveinung Hole, Chairman
- Debra Barker
- Sally Bennett (from 9.12.2020)
- Grunde Eriksen (1.1.2020 – 9.12.2020)

The Committee met six times in 2020. The CEO and CFO have given input to levels of remuneration and performance, and have not participated in final conversations regarding their own levels of remuneration.

The following matters were covered by the Committee during the year:

- Composed a new Peer Group of companies in accordance with the development of BerGenBio
- Verified compensation principles, models and levels according to market practice in Peer Group
- Performed a comprehensive Benchmark analysis of major remuneration elements for key positions
- Updated and refined the company's Remuneration Policy
- Prepared recommendations to the Board of Directors for the grant of share options as part of the Long Term Incentive Plan
- Prepared recommendations to the Board of Directors for the yearly salary adjustment of the CEO and reviewed the recommendations made by the CEO for salary adjustments of the Executive Management Team
- Prepared recommendations to the Board of Directors for pay-out of 2019 Short Term Incentives award for the CEO and the Executive Management Team
- Prepared recommendation to the Board of Directors for Short Term Incentives Plan for CEO and shared objectives for the Executive Management Team for 2020
- Reviewed CEO performance according to the 2020 Short Term Incentives Plan
- Participated in recruitment of key personnel, interviews and agreeing remuneration packages for key personnel
- Reviewed ongoing organisational development process and plan

Remuneration Report 2020 continued

Section 3 - Overview of the Remuneration Policy

The Remuneration Policy

The overall objectives of the Remuneration Policy are to:

- Support the purpose and sustainability of the company
- Align the remuneration components with the interests of shareholders and other stakeholders relevant to the above
- Support delivery of BerGenBio's strategic priorities
- Attract, motivate and retain members of the Board of Directors and the Executive Management Team of the appropriate calibre given the size and complexity of the business; and
- Reward members of the Executive Management Team in line with corporate and individual performance

The current remuneration policies for BerGenBio are based on the principles summarised below:

Principle	Summary
Market competitive remuneration	BerGenBio offers market-competitive remuneration opportunities to attract, retain, and motivate the talent needed to achieve BerGenBio's vision, business strategy and other company objectives. BerGenBio shall balance the need to provide competitive levels of reward against a desire to be cost effective when determining reasonable and responsible reward outcomes.
Pay for performance	A proportion of the remuneration package, the short-term incentive programme, is performance based to link remuneration outcomes with the achievement of key financial and non-financial targets that are aligned with our strategy. Each element of remuneration is weighted in order to ensure continuous and further positive development of the company.
Transparency	Remuneration programmes are designed and communicated in a manner that reinforces the linkage between business objectives, vision and culture.
Business alignment and consistency	Remuneration decisions are made to ensure local practices are aligned and consistent with BerGenBio's principles and policies. The remuneration practices will remain flexible enough to evolve as BerGenBio's business priorities change.
Shareholder alignment	The remuneration programmes will align the interests of all employees in driving value creation for shareholders. Our strategy is about enhancing BerGenBio's focus on developing novel medicines for aggressive diseases. To sustain BerGenBio's position as a world leader in this field, BerGenBio's strategy hinges upon actionable strategic priorities. Each of these strategic priorities consists of several themes where the company has defined specific financial and non-financial goals and related actions to execute over time.

A key component of the policy review is to establish an appropriate Peer Group of companies in order to verify the market competitiveness of the remuneration package and assess market practice for short term incentives and equity incentive programmes.

The selection of the peer companies is based on industry sector, commercial status, products, number of employees, revenue and, where applicable, market capitalisation.

This has led to the selection of a comparator Peer Group, which, reflecting the structure of BerGenBio, covers both Nordic and UK companies.

After the 2020 update, the BerGenBio Comparator Peer Group consists of 19 companies from the Nordic countries (13) and the UK (6) with number of employees, revenue, R&D expense and market capitalisation spanning from well below to well above the relevant metrics for BerGenBio. The Peer Group is used for a benchmarking of the Executive Management Team to assess the market positioning of the remuneration packages.

The remuneration arrangements for the BerGenBio Executive Management Team comprise the following elements:

- Base salary
- Short-term incentive (bonus)
- Long-term incentive (share options)
- Benefits
- Pension

Section 4 - Remuneration Policy for each element

To comply with new requirements effective from 1 October 2021 the company's Remuneration Policy is presented as a separate document presented to the annual general meeting 19 March 2021 for approval. The resulting Remuneration Policy has not materially changed, but is updated and will reflect the upcoming formal requirements as they materialise.

Section 5 - Remuneration for 2020

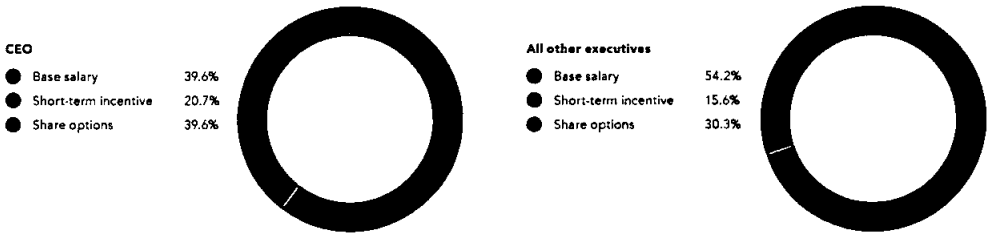
See Notes 5 and 6 to the group financial statements for remuneration tables for 2019 and 2020.

The chart below shows, as aproportion of the 2020 total remuneration package, the percentage value split between salary, Short Term Incentives and Long term Incentives across the Executive Management Team. The Committee considers the below structure, with a considerable proportion of the remuneration being equity based, to be necessary and appropriate at the present stage of development for the company.

This year's salary adjustments and bonus entitlement for 2020 (STI) are based on the benchmarking report from the revised peer group and the revised Remuneration Policy. Salary adjustments for the CEO and the Executive Management Team are well within the normal range (around the median from the Benchmark analysis).

In accordance with the Remuneration Policy for 2020 and the proposed policy for 2021, a discretionary Stretch Bonus has been awarded at 50% of the stretch-potential (10% – 25%) and applied discretionary Stretch Bonus has been awarded at 50% of the stretch-potential and applied based on the extraordinary team achievement of in record time turning the discovery of bemcentinib's potential COVID-19 effect into value for the company. In approximately three months from time of discovery, the randomised phase-II UK ACCORD study was approved, and followed up with approval of two additional randomised phase-II studies in South-Africa and India shortly thereafter, all done under severe COVID-19 related restrictions, and with employees working from home and across multiple sites.

The yearly Long Term Incentive grant was done based on average price the week before the grant following the annual general meeting 16 March 2020 and allocated according to the criteria as set out in the Remuneration Policy.



Corporate Governance Report 2020

1. Corporate Governance in BerGenBio

BerGenBio ASA considers good corporate governance to be a prerequisite for value creation and trustworthiness, and for access to capital. In order to secure strong and sustainable corporate governance, it is important that BerGenBio ensures good and healthy business practices, reliable financial reporting and an environment of compliance with legislation and regulations.

BerGenBio is incorporated and registered in Norway and is subject to Norwegian law. The company's shares are listed on Oslo Børs, and thus subject to the requirement to prepare an annual statement of its principles and practices for corporate governance. The company endorses the Norwegian Code of Practice for Corporate Governance, issued by the Norwegian Corporate Governance Board, most recently revised on 17 October 2018 (the "Code"). Compliance with the Code is based on the "comply or explain" principle, which means that the company must either comply with the individual items in the Code or explain why they have chosen an alternative solution.

Implementation and reporting of corporate governance

BerGenBio has governance documents setting out principles for how business should be conducted. References to more specific policies are included in this corporate governance report where relevant. The BerGenBio governance regime is approved by the Board of Directors in the company.

BerGenBio believes good corporate governance involves openness and trustful cooperation between the company and all its stakeholders. By practising good corporate governance, the company's Board of Directors and management will contribute to achieving the company's objectives of openness, independence, equal treatment, and control and management.

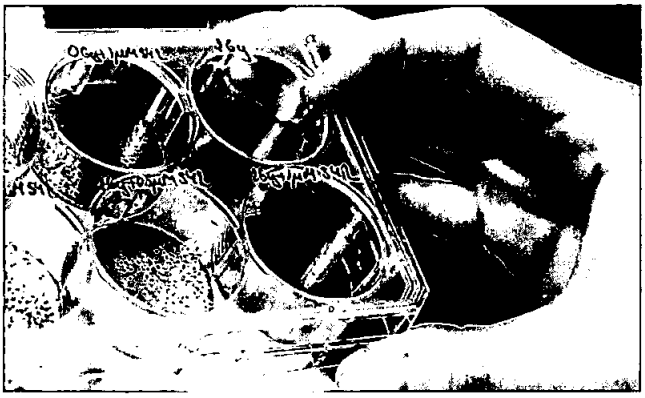
The following sections provide a discussion of the company's corporate governance in relation to each section of the Code. According to the company's own evaluation, the company deviates from the Code on the following points:

- Formulation of company takeover policy (section 14)
- Formulation of guidelines for use of the auditor for services other than auditing (section 15)

Values and ethical policies

The company's main values and ethical principles form the basis for the company's corporate social responsibility policy. The CSR policy is distributed to all employees, management and Board members, and published on the company's website.

The company's ethical and corporate social responsibility rules set forth the basic principles for business practices and personal behaviour for BerGenBio and apply to all employees, as well as persons/entities related to the company, including hired consultants acting on behalf of the Group. They comprise the company's main principles on issues such as human and labour rights, health and safety, business ethics, legal compliance, insider trading, whistle-blowing and other relevant issues related to the company's operations.



Material breaches of the ethical guidelines may result in termination of employment/engagements.

During 2020, the CSR policy was strengthened by including additional topics and augmented to become our Code of Conduct. The new Code of Conduct will be approved by management and the Board of Directors and implemented in 2021. This will be conducted in connection with the reassessment of our vision and values which was planned for 2020 but had to be postponed due to the COVID-19 pandemic.

2. Business

BerGenBio is a clinical-stage biopharmaceutical company focused on developing novel medicines for aggressive diseases, including advanced, treatment-resistant cancers.

The company's operations comply with the business objective set forth in its articles of associations section 3:

"The company's objective is to undertake research and development in biotechnology with a focus on new pharmaceutical therapeutics".

The company has developed clear goals and strategies which are further described in the annual report for 2020.

3. Equity and Dividends

Capital adequacy

BerGenBio's total equity at 31 December 2020 was NOK 670.2 million, corresponding to an equity ratio of 90.8%. The Board of Directors considers this to be an adequate level relative to the risk and scope of operations based on the company's internal estimated capital requirements.

The company's capital situation is continuously monitored, and the Board of Directors will take adequate steps to capitalise the company if deemed necessary.

Dividend policy

BerGenBio has not developed any dividend policy. The company is focusing on the development of novel pharmaceutical products and does not anticipate paying any cash dividend until sustainable profitability is achieved. The company has not previously distributed any dividends to its shareholders.

Authorisations to the Board of Directors

At the company's annual general meeting, on 16 March 2020, the Board of Directors was granted the following authorisation:

- Authorisation to increase the company's share capital by up to NOK 732,919 in connection with its existing share option scheme. The authorisation is effective until the earlier of the AGM in 2021 and 30 June 2021.

For supplementary information on the authorisations, reference is made to the minutes of the annual general meeting held on 16 March 2020, available from the company's website.

At the company's extraordinary general meeting, held on 19 June 2020, the Board of Directors was granted the following authorisation:

- The Board of Directors is granted an authorisation to increase the share capital with up to NOK 1,764,516 by subscription new shares, which constitute 20% of the company's outstanding shares. The purpose of the authorisation is to permit the issue of new shares to strengthen the company's equity and to increase the liquidity and/ or to broaden the company's shareholder base.

For supplementary information on the authorisations, reference is made to the minutes of the annual general meeting held on 19 June 2020, available from the company's website.

Corporate Governance Report 2020 continued

4. Equal treatment of Shareholders and transactions with close associates

BerGenBio has only one class of shares. Each share in the company carries one vote, and all shares carry equal rights, including the right to participate in general meetings. All shareholders shall be treated on an equal basis, unless there is just cause for treating them differently.

Share issues without preferential rights for existing shareholders

In the event of a share capital increase through the issue of new shares, a decision to waive the existing shareholders' preferential rights to subscribe for shares shall be justified. Where the Board of Directors resolves to issue shares, and waive the preferential rights of existing shareholders pursuant to an authorisation granted to the Board of Directors by the general meeting, the justification will be publicly disclosed in a stock exchange announcement issued in connection with the shares issuance.

In 2020 there have been completed two share capital increases where existing shareholders rights and equal treatment have been secure by subsequent offerings.

Transactions in treasury shares

Any transactions in treasury shares shall be carried out through Oslo Børs, and in any case to prevailing stock exchange prices. In the event that there is limited liquidity in the company's shares, the company will consider other ways to cater for equal treatment of shareholders. There were no such transactions in 2020.

Approval of agreements with shareholders and close associates

For transactions that are considered to be not immaterial between the company and its closely related parties, the Board of Directors will arrange for an independent third-party valuation. Members of the Board of Directors and executive personnel are required to notify the Board of Directors when such members have any significant, direct or indirect, interest in a transaction carried out by the company. There were no such transactions in 2020.

5. Freely Negotiable Shares

The shares of the company are freely negotiable, and the company's articles of association do not place any restrictions on the negotiability of shares.

6. General Meetings

The general meeting is open to all shareholders, and BerGenBio encourages all shareholders to participate and exercise their rights in connection with the company's general meetings. The right to participate and vote at the general meeting can only be exercised for shares registered in the shareholders' register by the fifth business day prior to the day of the general meeting.

Notice of a general meeting and any supporting documents, including the recommendation by the Nomination Committee and other information on the resolutions to be considered, shall be made available on the company's website no later than 21 days prior to the date of the general meeting. In accordance with the company's articles of association, documents that are to be considered by the general meeting are not required to be sent to the shareholders if they have been made available on the company's website. The deadline for registration will be set as close to the meeting as possible, and all the necessary registration information will be described in the notice.

Shareholders unable to attend may vote by proxy. Whenever possible, the company will prepare a proxy form that will allow separate votes for the items that are to be considered in the general meeting.

The agenda for the annual general meeting is stipulated by the articles of association, and the main topics to be considered include the approval of the annual accounts and the Director's report, including distribution of dividend, and remuneration of leading personnel.

The Board Chairman is normally the chairperson for the general meeting. If there is disagreement on individual items for which the Board Chairman belongs to one of the fractions, or is not regarded as being impartial for other reasons, another chairperson will be appointed to ensure impartiality regarding the items to be considered.

The Board Chairman and the CEO will be present at general meetings, together with representatives of the Board. Representatives of the Nomination Committee, the Remuneration Committee and the Audit Committee, as well as the auditor, should be present at general meetings where matters of relevance for such committees/persons are on the agenda.

Minutes from the general meetings will be published in accordance with the stock exchange regulations.

In 2020, BerGenBio held its annual general meeting on 16 March. In addition extraordinary general meetings were held on 20 February, 19 June and 9 December. Due to the pandemic meeting restriction shareholders were encouraged to exercise their shareholder rights without physical attendance for the meeting 19 June, and in accordance with Norwegian provisional legislation exempting companies from physical meetings requirements the meeting 9 December was held virtually.

7. Nomination Committee

The Nomination Committee of BerGenBio consists of three members, elected pursuant to section 9 of the company's articles of association.

The Nomination Committee is responsible for recommending candidates for the election of members and Chairman of the Board of Directors, candidates for the election of members and Chairman of the Nomination Committee, and remuneration of the Board of Directors, Board subcommittees and the Nomination Committee.

The objectives, responsibilities and functions of the Committee are further described in the "Instructions for the Nomination Committee", which were adopted by the general meeting at the AGM in 2017. The instructions are available from the company's website.

The current Nomination Committee consists of:

- Hans Peter Bøhn (Chair) – elected on the annual general meeting 13 March 2019
- Ann-Tove Kongsnes – elected on the annual general meeting 13 March 2019
- Shantrez Miller Gillebo – elected on the extraordinary general meeting 9 December 2020

All members are elected with a term until the annual general meeting in 2021. All members are considered independent of the company's Board of Directors and executive management.

All shareholders are entitled to nominate candidates to the Board, and contact information for proposing candidates can be found on the company's website.

8. Board of Directors; Composition and Independence

Pursuant to the articles of association section 5, the company's Board of Directors shall consist of three to seven members. At 31 December 2020, the Board of Directors consisted of five members, whereof two women:

- Sveinung Hole (Chair) – elected on the annual general meeting 16 March 2020 for two years up to annual general meeting in 2022
- Stener Kvinnsland – elected on the annual general meeting 16 March 2020 for two years up to annual general meeting in 2022
- Debra Barker – elected on the annual general meeting 13 March 2019 for two years up to annual general meeting in 2021
- Sally Bennett – elected on the extraordinary general meeting 9 December 2020 up to annual general meeting in 2021
- François Thomas – elected on the extraordinary general meeting 9 December 2020 up to annual general meeting in 2021

The composition of the Board of Directors is in compliance with the independence requirements of the Norwegian Code of Practice for Corporate Governance, (the "Corporate Governance Code"), meaning that (i) the majority of the shareholder-elected Board Members are independent of the company's executive management and material business contacts, (ii) at least two of the shareholder-elected Board Members are independent of the company's main shareholders (shareholders holding more than 10% of the shares in the company), and (iii) no members of the company's Management serve on the Board of Directors. Furthermore, pursuant to the Norwegian Public Limited Companies Act, if the Board of Directors of a Norwegian public limited liability company consists of four to five members, then each gender shall be represented by at least two members.

Except for Sveinung Hole and Stener Kvinnsland, all Board Members are independent of the company's significant business relations and large shareholders (shareholders holding more than 10% of the shares in the company) and of the Management.

Board members are encouraged to own shares in BerGenBio. The following shares are held by the Board as of 31 December 2020:

Name	Position	Considered independent	Served since	Term expires	Board Meeting Attendance 2020	Shares	Share options
Sveinung Hole	Chair	No	01.09.2010	AGM 2022	15	107,394[14]	0
Stener Kvinnsland	Board member	No	22.02.2015	AGM 2022	14	104,444	0
Debra Barker	Board member	Yes	13.03.2019	AGM 2021	14	0	0
Sally Bennett	Board member	Yes	09.12.2020	AGM 2021	1	0	0
François Thomas	Board member	Yes	09.12.2020	AGM 2021	1	0	0

14. Sveinung Hole holds 104,444 shares in the Company through Svev AS, a wholly owned company of Sveinung Hole, and 2,950 shares directly

Corporate Governance Report 2020 continued

9. The Work of the Board of Directors

The Board of Directors is responsible for the management of the company, including the appointment of Chief Executive Officer (CEO), convening and preparing for general meetings and supervising the daily management and the activities of the company in general.

The Board of Directors has implemented instructions for the Board and the executive management, with focus on allocation of internal responsibilities and duties. The objectives, responsibilities and functions of the Board of Directors and the CEO are in compliance with rules and standards applicable to the company and are described in the company's "Instructions for the Board of Directors" and "Instructions for the CEO".

The Board of Directors will produce an annual schedule for its work, with particular focus on objectives, strategy and implementation. The CEO is responsible for keeping the Board of Directors informed and provides monthly reports to the Board of Directors about the company's activities, position and financial and operational developments. During 2020, the Board of Directors held 15 meetings.

The Board of Directors' consideration of material matters in which the Chairman of the Board is, or has been, personally involved, shall be chaired by another member of the Board.

The Board of Directors shall annually evaluate its performance and expertise in the previous year. The evaluation is made available to the Nomination Committee.

Audit Committee

The Board of Directors established an Audit Committee on 28 February 2017, which is a sub committee of the Board of Directors. Its main duties are to assess the company's financial reporting and systems for internal control. The Audit Committee also supports the Board in the administration and exercise of its responsibility for supervision in accordance with applicable rules and legislations. From 2021 pre approval of non audit services delivered by the independent auditor is required from the Audit Committee. The company's Audit Committee is governed by the Norwegian Public Limited Liability Companies Act and a separate instruction adopted by the Board of Directors. The Audit Committee has held four meetings in 2020, and met with the Auditor, EY, separately without the executive management present.

The members of the Audit Committee are elected by and amongst the members of the Board of Directors for a term of up to two years. The current members of the Audit Committee are:

- Sally Bennett (Chair)
- Sveinung Hole
- François Thomas

Remuneration Committee

The Board of Directors has established a Remuneration Committee as a preparatory and advisory committee for the Board of Directors in questions relating to remuneration of the company's executive management.

The duties are described in the company's "Instructions for the Remuneration Committee". The main duties include the responsibility to review the remuneration and benefits strategy of the members of the executive management; review the performance of the executive management vs. the adopted objectives and recruitment policies, career planning and management development plans; and prepare matters related to other material employment issues in respect of the executive management. The Remuneration Committee meets as often as deemed necessary, but normally four to six times a year.

The members of the Remuneration Committee are elected by and amongst the members of the Board of Directors for a term of up to two years and shall be independent of the company's executive management. The current members of the Remuneration Committee are:

- Sveinung Hole (Chair)
- Debra Barker
- Sally Bennett

10. Risk Management and Internal Control

The Board of Directors of BerGenBio are responsible for ensuring that the company has sound and appropriate risk management and internal control systems in accordance with the regulations that apply to its business activities.

The company has implemented a comprehensive set of relevant corporate manuals and procedures, which provide detailed descriptions of procedures covering all aspects of managing its operations, including the development of clinical data and financial performance. The procedures and manuals are continuously revised to reflect best practice derived from experience or adopted through regulations.

The Board of Directors receives reports from the management on developments and results related to strategy, finance, KPIs, risk management, clinical studies, challenges and plans for the coming periods. In addition, quarterly and annual reports are prepared in accordance with the listing requirements and recommendations of Oslo Børs, and they are reviewed by the Audit Committee prior to the Board meeting and subsequent publication.

BerGenBio prepares its financial accounts in accordance with the international accounting standard IFRS, which aims to provide a true and fair overview of the company's assets, financial obligations, financial position and operating profit. For information on the company's financial risk and risk management, reference is made to the Board of Directors' report and Note 20 in the 2020 annual report.

11. Remuneration of the Board of Directors

The remuneration of the Board of Directors is determined by the shareholders at the annual general meeting of the company based on the proposal from the Nomination Committee. The level of the remuneration is based on remuneration of Board members for comparable companies and reflects the Board of Directors' responsibility, expertise, the complexity of the company, as well as time spent and the level of activity in both the Board of Directors and any Board Committees.

The remuneration of Board members is not linked to the company's performance and does not contain option elements. Board members who participate in the Audit Committee or Remuneration Committee receive separate compensation for this.

Detailed information on the remuneration of the Board of Directors can be found in Note 5 to the financial accounts in the annual report for 2020.

Members of the Board of Directors, or companies with which they are associated, should not engage in specific assignments for the company in addition to their appointment as members of the Board, but if they do, this shall be fully disclosed to the Board of Directors. The remuneration for such additional duties will be approved by the Board of Directors and specifically identified in the annual report.

12. Remuneration of Executive Personnel

The main principles for BerGenBio's executive remuneration policy are that the management should be offered terms that are competitive when salary, benefits, bonus and pension plans are seen as a whole. The executive remuneration guidelines are described in the company's annual report and have been presented to and adopted by the general meeting.

The company has a share option scheme for employees, which is linked to the company's long-term performance with shareholder values and interest. Details regarding the programme are available in Note 6 to the financial accounts in the annual report for 2020.

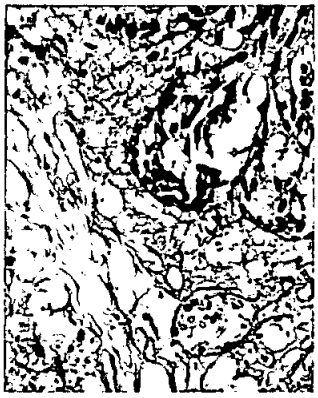
13. Information and Communications

BerGenBio complies with Oslo Børs' Code of Practice for IR. The Board of Directors has adopted an investor relations policy, to clarify roles and responsibilities related to financial reporting and regulate contact with shareholders and the investor market and ensure that the principles of openness and equal treatment of market participants are followed. The IR policy is available from the company's website. In addition, the Board has adopted separate instructions for financial reporting and handling of inside information.

The company will each year publish a financial calendar, providing an overview of the dates for major events such as its ordinary general meeting and publication of interim reports. Interim reports are published on a quarterly basis, in line with Oslo Børs' recommendations. The company will give open presentations in connection with its interim reporting.

All financial and other IR information is provided in English. All information is distributed to the company's shareholders by postings on the company's website at the same time as it is sent to Oslo Børs through its information system www.newsweb.no.

Corporate Governance Report 2020 continued



14. Take-Overs

There are no defence mechanisms against take-over bids in the company's articles of association, nor have other measures been implemented to specifically hinder acquisitions of shares in the company.

In the event of a take-over process, the Board of Directors and the executive management will ensure that the company's shareholders are treated equally and that the company's activities are not unnecessarily interrupted. The Board of Directors has a special responsibility in ensuring that the shareholders have sufficient information and time to assess the offer. In addition to complying with relevant legislation and regulations, the Board of Directors will seek to comply with the recommendations in the Code, including a valuation from an independent third-party. On this basis, the Board of Directors will make a recommendation as to whether the shareholders should accept the bid.

The Board of Directors has not established any other written guidelines for procedures to be followed in the event of a take-over bid, as such situations normally are characterised by specific and one-off situations which makes guidelines challenging to prepare.

15. Auditor

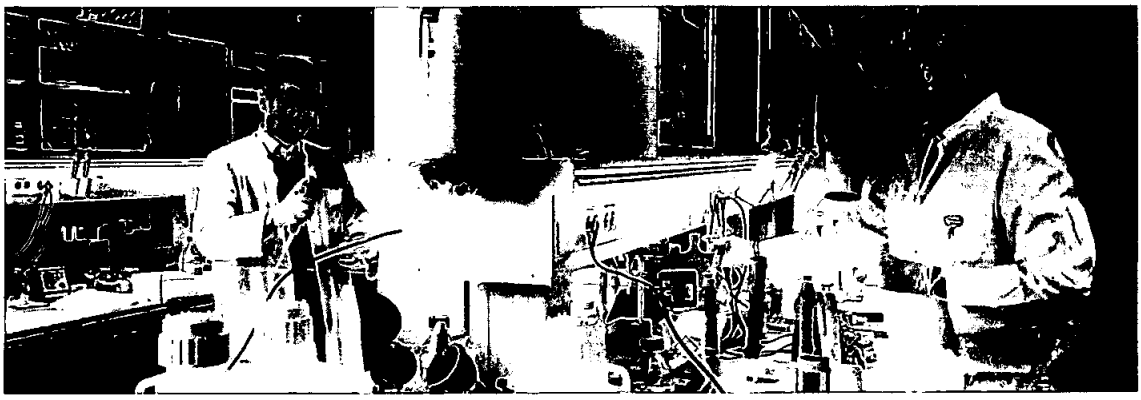
The company's auditor is EY and is regarded as independent in relation to BerGenBio ASA. The Board of Directors receives an annual confirmation from the auditor that the requirements regarding independence and objectivity have been satisfied.

The auditor prepares an annual plan for carrying out the auditing work, which is made known to the Audit Committee. The Audit Committee have annual meetings with the auditor to discuss the annual accounts, accounting principles, assessment of any important accounting estimates and matters of importance on which there has been disagreement between the auditor and the company's executive management. At least once per year, the auditor will present to the Audit Committee a review of the company's internal control procedures, including identification of weaknesses and proposals for improvement. These meetings will also be held with an opportunity for a review with the auditor, without the company's day to day management being present. No separate guidelines have been prepared for use of the auditor for services other than auditing but from 2021 pre approval is required from Audit Committee.

The Board of Directors will disclose the remuneration paid to the auditor to the shareholders at the annual general meeting, including a break-down of the fee paid for audit work and fees paid for other specific assignments, if any. The Audit Committee has reviewed the work of the auditor and recommend to the General Meeting to retain EY as the company's auditor.

The auditor will participate at the annual general meeting.

Board of Directors' Report 2020



Strategy

BerGenBio ASA ("the company") and its subsidiary (together "the Group") is a biopharmaceutical company developing novel medicines for aggressive diseases, including advanced, immune-evasive and treatment resistant cancers. The company has a portfolio of multiple clinical assets targeting the receptor tyrosine kinase AXL and is focused on developing a pipeline of first-in-class AXL kinase inhibitors as a potential cornerstone of combination cancer therapy. The company is a world leader in understanding the essential role of AXL kinase in mediating cancer spread, immune evasion and drug resistance in multiple aggressive solid and haematological cancers.

AXL expression is linked with poor prognosis in most cancers, it allows tumours to become aggressive and resistant to therapy while having immune-suppressive effects. BerGenBio's research is based upon the hypothesis that AXL inhibition has potential value as a monotherapy and in combination with other drugs.

The company's lead drug candidate, bemcentinib, is a highly selective, potent, oral, first-in-class small-molecule AXL inhibitor, currently being evaluated as a therapy in a Phase II clinical programme focused on mono- and combination therapies in AML and lung cancer.

The company is investigating bemcentinib in NSCLC, AML and MDS, in combination with current and emerging therapies (including immunotherapies, targeted therapies and chemotherapy), and as a single agent. A broad investigator-initiated trial programme is exploring the wider potential of bemcentinib in disease indications with high scientific rationale, Key Opinion Leaders (KOL) support, and high unmet medical need with a view to develop future pipeline opportunities.

Bemcentinib has also been reported to exhibit potent anti-viral activity in preclinical models against several enveloped viruses, including Ebola and Zika virus. Recent data have expanded this to SARS-CoV-2.[15, 16]. Bemcentinib selectively inhibits AXL kinase activity, blocking viral entry and enhancing the anti-viral type I interferon response, a key cellular defence mechanism against viral infection. The drug is currently under investigation for efficacy in hospitalised COVID-19 patients in clinical trials being conducted at sites across the UK, South Africa and India.

BerGenBio's second clinical asset is tilvestamab (formerly BGB149), a first-in-class anti-AXL antibody, has completed a Phase Ia trial in healthy volunteers and is expected to enter Phase Ib, First-in-Patient, in 2021.

The company acknowledges the challenges in the current times and remains committed to:

- Continuing to advance the bemcentinib clinical development programme towards late-stage clinical trials as a second line treatment in AML and NSCLC
- Developing companion diagnostics to potentially enrich future clinical trials and improve probability of regulatory success
- Progressing the clinical development of our anti-AXL monoclonal antibody tilvestamab (BGB149)
- Securing additional pipeline opportunities for the company's AXL inhibitors in oncology and non-oncology indications including COVID-19

15. Dowall SD et al. Antiviral Screening of Multiple Compounds against Ebola Virus. Viruses 2016, 8:27
16. Meertens L et al. Axl mediates ZIKA virus entry in human glial cells and modulates innate immune responses. Cell Rep 2017 18:324

Board of Directors' Report 2020 continued

Operational review

During 2020 the company maintained its clinical research focus with its lead drug candidate bemcentinib, a novel, once-a-day, orally administered, highly selective inhibitor of AXL. Data generated through clinical trials so far has been encouraging and the company is committed to continuing the progression of bemcentinib into late-stage clinical trials and through to regulatory approval where data warrants.

The US Food and Drug Administration (FDA) has approved Fast Track Designation for bemcentinib for the treatment of AML.

The ongoing COVID-19 pandemic has adversely impacted drug development timelines across the industry. BerGenBio has seen recruitment into its clinical trial programmes slow during the period. However, the company's clinical trials remain active and continue to recruit patients. Furthermore, the company continues to see encouraging clinical data reported from its own studies as well as investigator led studies evaluating bemcentinib in additional indications.

Clinical Trial Progress: Bemcentinib

BerGenBio progressed all of its company sponsored clinical trials and provided readouts at or in connection with leading oncology congresses in 2020:

- BGBC003 – bemcentinib in combination with low dose chemotherapy (LDAC) in AML
- BGBC008 – combination therapy with pembrolizumab in NSCLC

Results from the BGBC003 Phase II trials of bemcentinib in combination with low-dose chemotherapy (LDAC) in AML patients were presented at the American Society of Hematology (ASH) meeting in December. The data indicated that treatment with the bemcentinib-LDAC combination shows promising efficacy in relapsed AML patients who are unfit for intensive chemotherapy. Of 11 evaluable relapsed patients, a clinical benefit rate of 73% was reported, with Overall Response rate of 45% and Complete Response rate of 36%. In the investigator-led BERGAMO Phase II Trial in MDS and AML, the primary endpoint of overall response rate (ORR) was met, with the MDS cohort achieving a 36% response rate. An extensive translational programme continues to explore potential biomarkers for bemcentinib combination therapy.

Various updates from the Phase II BGBC008 study of bemcentinib in combination with pembrolizumab in NSCLC were presented in 2020. In January it met its efficacy endpoint for the first stage of the trial. In June, the company shared interim clinical and translational data at the Next Gen Immuno-Oncology Congress, with six of seven checkpoint inhibitor refractory composite AXL (cAXL)-positive patients reporting clinical benefit. At SITC in November updated cohort B data demonstrated the combination of bemcentinib and pembrolizumab was well tolerated and clinically active in CPI-refractory cAXL positive NSCLC. These findings add further confidence on the potential benefit of bemcentinib as an alternative to the second-line chemotherapy standard-of-care. Top line data from expansion cohorts B2 and cohort C are expected in 2021.

Clinical Trial Progress: COVID-19

In response to the global pandemic that emerged in early 2020, BerGenBio began to explore bemcentinib as a potential COVID-19 treatment, based on the company's understanding of its reported potent anti-viral activity in preclinical models against several enveloped viruses, including Ebola and Zika. Two COVID-19 bemcentinib studies are currently ongoing.

- The first is a Phase II study which is part of the UK Research and Innovation (UKRI) funded COVID-19 ACCORD platform trial, with the first patient enrolled in the reinitiated study in December
- The second, a BerGenBio-sponsored Phase II study of 120 hospitalised COVID-19 patients in South Africa and India (BGBC020), is currently recruiting patients

Progress: tilvestamab (BGB149)

Tilvestamab (BGB149) is the first functional blocking anti AXL monoclonal antibody to enter clinical development and is BerGenBio's second clinical stage drug development programme targeting AXL.

Pre-clinical data was presented at the virtual 32nd EORTC NCI AACR (ENA) Symposium in October 2020, showing that tilvestamab prevents AXL mediated cell signalling in cancer cell lines, reduces cell migration and invasion and shows anti-tumour efficacy in a panel of mouse xenograft models.

A Phase 1a trial, evaluating the safety, tolerability and pharmacokinetics of tilvestamab has been completed and it is expected to enter a Phase 1b First-in-Patient trial in 2021.

Progress: Companion Diagnostics Programme

The availability of a predictive biomarker test significantly enhances the chances of regulatory success and later reimbursement, in general and particularly for high-value oncology drugs.

The development of a Companion Diagnostics test is therefore a strategic priority for the company. Consistently, bemcentinib efficacy alone or in combination has scaled with AXL biomarker expression and several candidates continue to be explored and evaluated for progression into forward development of a clinically validated Companion Diagnostics assay.

Other progress

The company supports its own clinical development programme with a broad portfolio of investigator sponsored clinical trials of high scientific value, commercial interest and key opinion leader endorsement. This is considered a cost-effective strategy to explore opportunities for potential future label extension for bemcentinib.

Similarly, pre-clinical academic collaborations exploring AXL's role in driving additional oncology or non-oncology indications are sought or supported where appropriate.

2020 has seen clinical trial initiation and data readouts from investigator led studies exploring bemcentinib's potential in: High Risk Myelodysplastic Syndromes (HR-MDS) or Acute Myeloid Leukaemia (AML), Glioblastoma (GBM) and relapsed malignant mesothelioma.

Risks and uncertainties

The Group operates in a highly competitive industry sector with many large players and may be subject to rapid and substantial technological change.

The long term impact of the COVID-19 pandemic remains unclear although no greater for BerGenBio than any other business in the sector.

BerGenBio is currently in a development phase involving activities that entail exposure to various risks. BerGenBio's lead product candidate bemcentinib is currently in Phase II clinical trials. This is regarded as an early stage of development and the clinical studies may not prove to be successful. Timelines for completion of clinical studies are to some extent dependent on external factors outside the control of the Group, including resource capacity at clinical trial sites, competition for patients, etc.

The financial success of BerGenBio and / or its commercial partners requires obtaining marketing authorisation and achieving an acceptable reimbursement price for its drugs. There can be no guarantee that the drugs will obtain the selling prices or reimbursement rates foreseen.

Financial risks

Interest rate risk

The Group holds cash and cash equivalents and does not have any borrowings. The Group's interest rate risk is therefore in the rate of return of its cash on hand. Bank deposits are exposed to market fluctuations in interest rates, which affect the financial income and the return on cash.

Exchange rate risk

The value of non-Norwegian currency denominated costs will be affected by changes in currency exchange rates or exchange control regulations. The Group undertakes various transactions in foreign currencies and is consequently exposed to fluctuations in exchange rates. The exposure arises largely from the clinical trials and research expenses. The Group is mainly exposed to fluctuations in pounds sterling (GBP), euro (EUR), and US dollar (USD). The Group are holding part of the bank deposit in GBP, EUR and USD depending on the need for such foreign exchange.

The foreign currency exposure is also mostly linked to trade payables with short payment terms. The Group might consider changing its current risk management of foreign exchange rate if it deems it appropriate.

Credit risk

Credit risk is the risk of counterparty's default in a financial asset, liability or customer contract, giving a financial loss. The Group's receivables are generally limited to receivables from public authorities by way of government grants. The credit risk generated from financial assets in the Group is limited since it is cash deposits. The Group places its cash in bank deposits in recognised financial institutions to limit its credit risk exposure.

The Group has not suffered any loss on receivables during 2020 and the Group considers its credit risk as low.

Liquidity risk

Liquidity is monitored on a continued basis by Group management.

The Group works continuously to ensure financial flexibility in the short and long term to achieve its strategic and operational objectives. Management considers the Group's liquidity situation to be satisfactory. The Group secured equity funding of gross NOK 220 million in January 2020 and additional gross NOK 520 million in May/July 2020.

Non-financial risks

Technology risk

The Group's lead product candidate, bemcentinib (BGB324), is currently in Phase II clinical trials. This is regarded as an early stage of development and the Group's clinical studies may not prove to be successful.

Competitive technology

The Group operates in a highly competitive industry sector with many large players and is subject to rapid and substantial technological change. The long term impact of the COVID-19 crisis remains unclear although no greater for BerGenBio than any other business in the sector.

The Group is currently in a development phase involving activities that entail exposure to various risks. The Group's lead product candidate bemcentinib is currently in Phase II clinical trials. This is regarded as an early stage of development and the clinical studies may not prove to be successful. Timelines for completion of clinical studies are to some extent dependent on external factors outside the control of the Group, including resource capacity at clinical trial sites, competition for patients, etc.

Board of Directors' Report 2020 continued

[redacted]

Patent and IP risks

The success of the company will highly depend on the company's ability to obtain and maintain patent protection for its products, methods, processes and other technologies, to preserve trade secrets, to prevent third parties from infringing proprietary rights of the company and to operate without infringing the proprietary rights of third parties. To date, the company holds certain exclusive patent rights in major markets. The patent rights are limited in time. The company cannot predict the range of protection any patents will afford against competitors and competing technologies, including whether third parties will find ways to invalidate the patents, obtain patents claiming aspects similar to those covered by the company's patents and patents applications, and whether the company may be subject to litigation proceedings.

Regulatory & Commercial risks

The financial success of the Group requires obtaining marketing authorisation and achieving an acceptable reimbursement price for its drugs. There can be no guarantee that the Group's drugs will obtain the selling prices or reimbursement rates foreseen by the Group.

The Group will need approvals from the US Food and Drug Administration (FDA) to market its products in the US, and from the European Medicines Agency (EMA) to market its products in Europe, as well as equivalent regulatory authorities in other worldwide jurisdictions to commercialise in those regions. The Group's future earnings are likely to be largely dependent on the timely marketing authorisation of bemcentinib for various indications.

Financial review

(Figures in brackets = same period 2019 unless stated otherwise)

Accounting policies

The financial statements of BerGenBio Group have been prepared in accordance with International Financial Reporting Standards (IFRS) as adopted by the EU on 31 December 2020. Figures is for the Group and for the parent company BerGenBio ASA labelled ASA below.

Financial results

Operating revenues

Revenue for the full year 2020 amounted to NOK 0.6 million (NOK 8.9 million) for the Group and NOK 0.7 million (NOK 9.0 million) for ASA. The revenue in 2019 represents a clinical milestone from an out licence agreement with ADCT. Revenue in 2020 is refund of patent cost from this license agreement.

Operating expenses

Total operating expenses for 2020 for the Group amounted to NOK 261.7 million (NOK 213.3 million), and NOK 263.3 million (NOK 214.7 million) for ASA.

Employee expenses were NOK 60.2 million (NOK 35.7 million) for the group and NOK 35.9 million (NOK 21.4 million) for ASA. Payroll expenses increased in 2020 compared to 2019 due to increased headcount as part of organisational development in preparation for the next phase of clinical trials, including transfer of contractors to employees. Short term incentive increased compared to 2019 representing full year effect to senior management hired in 2019. Employee share option cost increased compared to 2019 caused by positive development of the share price in the year and increase of non-cash accruals for social security tax.

For the full year 2020 other operating costs for the Group amounted to NOK 200.8 million (NOK 176.8 million), and 226.6 million (192.6 million) for ASA. The increased costs are driven by the start-up cost of new clinical studies and higher drug manufacturing expenses.

The Group has recognised government grants for a total of NOK 21.4 million (NOK 26.0 million) for the full year 2020. Government grants are recognised as cost reduction in the profit and loss. Payroll expenses have been reduced by NOK 4.8 million (NOK 5.3 million) and operating expenses by NOK 16.6 million (NOK 20.7 million) as a result of these government grants. ASA has recognised government grants for a total of NOK 18.6 million (NOK 22.9 million) for the full year 2020. Payroll expenses have been reduced by NOK 2.0 million (NOK 2.1 million) and operating expenses by NOK 16.6 million (NOK 20.7 million) as a result of these government grants.

The operating loss for the Group in 2020 was NOK 261.1 million (NOK 204.4 million) and NOK 262.6 million (NOK 205.7 million) for ASA, reflecting the increased level of activity related to the clinical trials and organisational build up.

Net financial gain for the Group was NOK 4.1 million (gain NOK 5.1 million) and NOK 4.1 million (NOK 5.0 million) for ASA for the full year 2020.

Losses after tax for the Group were NOK 257.0 million (NOK 199.3 million) and NOK 258.6 million (NOK 200.7 million) for ASA for the full year 2020.

Financial position

Total assets as of 31 December 2020 for the group increased to NOK 738.2 million (NOK 270.4 million at year-end 2019) for the Group and to NOK 733.5 million (NOK 270.6 million at year-end 2019) for ASA, mainly due to the cash raised through private placements executed during 2020.

Total liabilities were NOK 68.0 million (NOK 50.6 million at year-end 2019) for the Group and NOK 62.6 million (NOK 48.6 million at year-end 2019) for ASA.

Total equity as of 31 December 2020 was NOK 670.2 million (NOK 219.8 million at year-end 2019) for the Group and NOK 670.9 million (NOK 222.0 million at year-end 2019) for ASA, corresponding to an equity ratio of 90.8% (81.3%) for the Group and 91.5% (82.0%) for ASA.

Cash flow

Net cash flow from operating activities was negative by NOK 234.3 million (NOK 186.7 million) for the Group and negative by NOK 234.3 million

(NOK 187.6 million) for ASA for the full year 2020, mainly driven by the level of activity related to the clinical trials the Group is conducting as well as milestone payments related to progress made.

Net cash flow received from investing activities during the full year 2020 was positive by NOK 3.5 million (NOK 2.2 million) for the Group and NOK 3.5 million (NOK 2.2 million) for ASA.

Net cash flow from financing activities was positive NOK 699.5 million (NOK 77.3 million) for the Group and NOK 699.5 million (NOK 77.3 million) for ASA for the full year 2020, representing the proceeds from the private placements completed in the first quarter at gross NOK 220.0 million, second quarter at gross NOK 500.0 million and the repair offering completed in third quarter at gross NOK 20.0 million.

Cash and cash equivalents increased to NOK 721.6 million (NOK 253.6 million) for the Group and NOK 721.2 million (NOK 252.7 million) for ASA.

Research and development

While the research and development strategy is designed in-house in BerGenBio, the Group leverages its network of external contract research organisations (CROs) in order to execute its development strategy. BerGenBio also collaborates with academic institutions to extend the research in areas of interest of the Group.

The Group has employed experienced personnel that are capable of directing work that is performed by the CROs. This approach to product development allows the Group to quickly change research directions and efforts when needed and to quickly bring in new technologies and expertise when necessary.

Uncertainties related to the regulatory approval process and results from ongoing clinical trials generally indicate that the criteria for capitalisation of R&D cost are not met until market authorisation is obtained from relevant regulatory authorities. The Group has currently no development expenditure that qualifies for recognition as an asset under IAS 38.

Going concern

The Board stated that the annual accounts represent a true and fair view on the Group's financial position at the turn of the year. According to the Norwegian Accounting Act section 3-3 (a), the Board of Directors confirmed that the financial statements have been prepared under the assumption of going concern.

Environmental, social and governance (ESG)

Cancer remains one of the most pressing healthcare challenges accounting for the second most common cause of death globally. Our vision is to improve and save lives and thereby create value for patients, society, and shareholders through our work in discovering and developing novel medicines to treat aggressive diseases, including advanced, treatment resistant cancers.

ESG is therefore important to us as it is the foundation of our activities and directly linked to our long-term success. In order to have a real impact, we worked in 2020 to strengthen our sustainability management. The aim was to identify ESG (Environmental, Social and Governance) topics in BerGenBio's value chain that are material for us and our stakeholders. Our key stakeholders include our patients and their families, our employees, investors, regulators, suppliers and other business partners, such as research organisations and academic institutions.

The work involved mapping of our value chain and a review of industry standards, organisations and peers.

The topics which are of most strategic importance to us are; innovation, clinical trial conduct, business ethics, economic performance and patient health and safety.

In connection with the materiality analysis, we also analysed the United Nation's Sustainability Development Goals (SDGs) to identify those we have the largest impact upon: We directly contribute to SDG 3 – health and wellbeing. In addition, we also contribute to SDG 8 – decent work and economic growth for our employees and society, SDG 9 – industry, innovation and infrastructure – through our research and development and finally, SDG 17 – partnerships for the goals – through our extensive cooperation with research organisations and academic institutions. Given the current stage of development of BerGenBio, we do not have significant negative impact on the goals, but this may change when we move into production and will be reassessed.

All topics are addressed in the below. However, the strategic topics are also described in other parts of our annual report and we refer to the World Economic Forum disclosure reference index in the appendix for ease of location along with an overview of performance data. The reporting in this section addresses BerGenBio's requirements under section 3-3 a and c of the Norwegian Accounting Act.

Governance

The ESG analysis provided a basis for determining BerGenBio's ambitions and KPIs and alignment with our strategy. We also determined metrics to monitor our performance for our material ESG topics. Moreover, we strengthened our management structures by revising our Corporate Social Responsibility policy and augmenting it to our new Code of Conduct in addition to strengthening our responsible supply chain management.

The CEO has the overall responsibility for ESG in BerGenBio and our ESG commitment is overseen by the Board of Directors. Our governance structure is elaborated upon in the Corporate Governance report earlier in the annual report.

Board of Directors' Report 2020 continued

Going forward, we will further integrate the material ESG topics into our strategy and governance including setting strategic ESG targets and incorporating additional metrics. We have now established a foundation which will grow with us to ensure our sustainable value creation as our company further develops.

Innovation

Innovation, research and development are at the center of our business model. Our dedicated team and collaborators focus on gaining a thorough understanding of cellular mechanisms, therapy resistance, disease-specific attributes and clinical evidence through rigorous research with state-of-the-art technologies. Our approach to innovation and results are elaborated upon in the strategic report.

Clinical trial conduct

Clinical trials are essential to ascertain the efficacy, safety and effectiveness of drug candidates and it is crucial that they are conducted in accordance with our high standards and regulatory requirements. Further information is provided in the Strategic Report section earlier in the report.

Patient health and safety

The safety and wellbeing of our patients is imperative for our drug candidates to deliver on BerGenBio's vision and will become even more important when we get to the production and commercialisation phase of our company development. We embed drug safety considerations throughout the drug development lifecycle. Our research from the pre-clinical studies are evaluated and discussed with experts and regulators prior to proceeding to the clinical trial phase. We examine the potential outcome of our trials to ensure patients are subjected to testing only when suitable. The primary consideration of all our clinical trials is to ensure the safety and effectiveness of our medicines. We conduct detailed studies on the safety profiles of our drug candidates throughout the trial and testing phase. Adverse effects and risks linked to drug candidates are recorded and reported to regulatory authorities (aligned with regulations) on a periodic basis. It is also of paramount importance to us to ensure the personal information of our patients and no claims of any breaches were received in 2020.

Board governance

For BerGenBio it is important that the Board reflects the diversity of their company's stakeholders in order to be more aware of their needs. This will enable the Board to assist the company in making robust strategic decisions, in addition to controlling risks and ensuring legal compliance. In addition, this enables us to be well-positioned to deliver long-term value for shareholders and stakeholders. Our Board consists of five non-executive members of which two are women. Three of the members are independent. The members of the Board reflect different nationalities and a breadth of competences including health, medicine and pharmacy and research and finance.

Further information is provided in Section 8: Board of Directors and Independence, which can be found in the Corporate Governance report.

Economic

BerGenBio contributes economically to society through our investments in research and development and our sound economic performance sets the foundation for our future contribution as we further develop our company towards production and commercialisation. Our performance is disclosed in our financial statements.

Business ethics

To ensure that patients, research and development partners, employees, shareholders and other stakeholders feel confident about our commitment to operate in accordance with responsible, ethical and sound corporate and business principles, the Group has established a set of ethical guidelines that are presented in its policy for corporate social responsibility (CSR policy). These guidelines provide a framework for what BerGenBio considers as responsible conduct, and defines the individual responsibilities of employees through a combination of broad principles and specific requirements.

The CSR policy applies to all employees and Board members in the Group, and is available from the Group's website. By agreement, the ethical guidelines may also apply to independent consultants, intermediaries or others acting on behalf of BerGenBio. Material breaches of the ethical guidelines may result in termination of employment.

During 2020, the CSR policy was strengthened to include additional topics such as conflicts of interest, marketing practices and fair competition, data privacy and integrity, supplier conduct, patient first approach. The policy was also augmented to become our Code of Conduct to reflect our commitment to sustainability. The new Code of Conduct will be approved by management and the Board of Directors and implemented in 2021. The Code of Conduct will then be distributed to all employees, managers and Board members and shall also be referred to in all employment contracts. This will be conducted in connection with the reassessment of our values which was planned for 2020 but had to be postponed due to the COVID-19 pandemic. Subsequently the need for training in the Code of Conduct and ethical dilemmas will be assessed.

33%
OF LEADERSHIP POSITIONS HELD BY WOMEN

The Group takes a zero tolerance stance towards corruption, money laundering and insider trading. All employees are encouraged to report any breaches of Group regulations. No incidents were reported in 2020.

Social

Diversity and inclusion

We encourage the development of a diverse and inclusive work environment. BerGenBio promotes an open and strong corporate culture with a healthy, safe and fair work environment that enables free exchange of ideas and fosters collaboration. We are committed to being an equal opportunity employer

10%
EMPLOYEE TURN-AROUND RATE RECORDED

and to fair treatment for each of our employees throughout their tenure with the Group. We strictly prohibit discrimination of any form on the basis of gender, age, race, ethnic background, sexual orientation, among other diversity metrics.

The Group recruits from environments where the number of women and men is relatively equally represented. At year end, BerGenBio employed 49 people of which 59% are women. Three out of nine executives in the management team are women whilst two out of the five Board members are women. Our team represents 10 nationalities and their different backgrounds enhance our ability to innovate and strengthens our work environment. Our highly educated employees, includes 16 colleagues with PhDs. We make provisions to cater to the diverse needs and aspirations of our employees. We also support each of our employees with their individual challenges depending on their personal circumstances.

Talent attraction and retention

Our employees are at the core of BerGenBio's growth story. We aim to engender an organisational culture which appeals to employees with varied talent and experience. Enabling the all-round development and growth of our employees plays a vital role in attracting and retaining promising talent. Our hiring process focuses on creating a diverse employee pool in terms of culture, educational background and skillsets, among other considerations.

We have rolled out various training and development programmes for our employees in the areas of Good Clinical Practice (GCP) and Good Manufacturing Practice, as well as introduction of a mandatory basic course in the General Data Protection Regulation (GDPR). We also encourage our employees to enrol in external accredited learning programmes with relevant professional bodies such as The Organisations for Professionals in Regulatory Affairs (TOPRA) and The Institute of Clinical Research (ICR). In order to support the career growth of our employees, we engage with them through periodic performance appraisals to help them reflect on their progress and set professional goals. The appraisal process also helps in aligning an employee's career aspirations with BerGenBio's goals. We also provide long term incentives through our stock option programme to support long-term association of employees with the Group.

In 2020 we welcomed 14 new colleagues to our team, of which 79% were women. In addition, we have two PhD students employed. All employees receive regular performance and development evaluation.

Wellbeing of employees

Employee wellbeing is important to boost workplace satisfaction and productivity levels. To ensure the wellbeing of our employees, we consider it important to focus on job satisfaction, financial security, healthy work environment and overall engagement in organisational activities. The global pandemic during 2020 required changes in working arrangements with working from home have increased focus on wellbeing of employees. The global pandemic meant that most staff transitioned to working from home. We supported our employees with lunch and learn sessions focusing on wellbeing during lockdown and providing skills development to enable effective working from virtual offices. Lockdown in 2020 saw the introduction of regular monthly virtual social sessions including quizzes, team coffee mornings and craft sessions.

We periodically capture our workforce's sentiment and feedback through employee engagement surveys. In the employee engagement survey conducted in 2020, we had an 85% response rate with an engagement score of 84%. The feedback that we receive from our employees helps us update our policies and design interventions to enhance employee engagement and satisfaction. We provide competitive compensation for all our employees which is commensurate with their level of experience, qualification and expertise.

We had a sick-leave of 2.0% in 2020 compared to 1.1% in 2019.

All employees can take advantage of our flexible hours and we have shower facilities to enable our employees to exercise comfortably around their working day.

Occupational health and safety

We encourage our employees to embrace a proactive approach to managing their health. We focus holistically on the physical, emotional and mental wellbeing of our employees and provide them assistance to cope with identified ailments.

2020 saw the introduction of two dedicated mental health first aiders to support wellbeing and all staff have access to private medical care. In response to the global pandemic we assessed the health risk of each of our employees to enable a safe return to work and implemented workstation assessments to ensure our employees have safe work spaces and the right equipment to work virtually.

We believe that safe working conditions are a fundamental right of each employee. We ensure alignment of our occupational safety management systems with globally recognised standards and guidelines.

Board of Directors' Report 2020 continued

Our laboratory safety management systems conform to the requirements of ISO 15190:2003 and OSHAS 3404 laboratory safety guidelines. A systematic protocol is in place to record and investigate any untoward incidents. In 2020, no occupational safety-linked incident occurred at any of our facilities. We have recorded 0 days of work absence due to work-related illness, underpinning our efforts to promote a healthy work environment.

Responsible sourcing

We rely on third parties for clinical studies (Contract Research Organisations) and supply of raw materials, office supplies and housekeeping services. We currently have six key suppliers. We consider engaging with the right vendors and suppliers as critical and therefore seek to only partner with third parties who share our values of business ethics, social and environmental consciousness.

Following the ESG analysis, we strengthened our responsible supply chain management. This involved development of a supplier self-assessment questionnaire. The questionnaire is based on a recognised pharmaceutical sector standard (Pharmaceutical Supply Chain Initiative, PSCI) and will be implemented into our existing supplier management system. We also included compliance with the PSCI's principles for responsible supply chain management into our supplier contract and included our expectations of suppliers in terms of upholding high ethical standards and regulatory compliance in our revised Code of Conduct.

Our Director of Operations is responsible for procurement and supply chain management-linked activities and oversees effective implementation of management systems. Our supplier screening process evaluates suppliers on ESG criteria prior to onboarding them. We conduct an analysis to determine our critical suppliers based on risks and opportunities linked with each supplier. Going forward, we will administer the self-assessment questionnaire to the prioritised suppliers. The supplier self-assessment process will enable us to appraise our partners based on their adherence to regulatory norms as well as social and environmental standards. It will also provide insights into our suppliers' practices in terms of ethics, labour management, environmental conservation and employee health & safety management. The outcome of the self-assessment exercise will guide us in engaging with them to strengthen their performance on identified improvement areas.

Protection of human and labour rights

We are committed to the protection of human and labour rights in all our operational endeavours. We recognise the universal and fundamental nature of human rights and align all our operations with the Universal convention on Human Rights and conventions of the International Labour Organisation (ILO). Our commitment to human rights protection has been emphasised in our Code of Conduct. Whilst having robust systems to ensure the protection of human rights within our operational bounds, we also expect all our suppliers and value chain partners to strictly comply with relevant norms on human rights protection. We have zero tolerance to child labour, forced labour, discrimination of any form and direct or indirect violation of human rights. We have established grievance redressal mechanisms to ensure timely resolutions of any breaches in this regard. We are not aware of any cases of discrimination or any other human rights breaches in our operations during 2020.

Climate and environmental management

We recognise the importance of corporate engagement in environmental conservation and climate action. Our approach to carbon management currently focuses on tracking our energy consumption and corresponding emissions. As we are currently not engaged in any large-scale manufacturing activities, our environmental footprint stems primarily from the resources consumed in our laboratories and office spaces. In addition, we also account for footprint arising out of our indirect business activities such as employee travel and supply chain operations. We are conscious of the impact of waste that we generate, specifically bio-hazardous waste. We are also cognisant of the impact of pharmaceuticals in the environment and are developing systems to manage this risk. Furthermore, we consider it imperative to have stringent systems and initiatives in place to address our future needs in terms of safe and responsible waste management.

Share information

As of 31 December 2020, there were 87,259,983 ordinary shares outstanding, up from 61,076,590 shares at year end 2019, following the private placement in January and May 2020, subsequent repair offerings and shares issued under the employee share option programme during the year.

The company has one class of shares and all shares carry equal voting rights.

The company had more than 11,000 shareholders at 31 December 2020.

The results for BerGenBio ASA for 2020 show a loss of tNOK 258,563. The Board proposes that the loss should be covered by share premium.

Outlook

BerGenBio's broad Phase II clinical development programme with bemcentinib, pipeline of AXL inhibitors and financial position, together provide a strong foundation to create and deliver significant value for shareholders.

The Board considers that the results emerging from the clinical development programmes, particularly in NSCLC, AML and MDS, provide support for AXL inhibition as an

attractive approach for cancer therapy and are providing valuable information to inform the future development strategy for bemcentinib. In COVID-19, we anticipate providing further updates from our ongoing trials in the UK, South Africa and India early in 2021. Further clinical data will be reported at future medical congresses and as appropriate by the company.

We continue to strengthen our organisation with skilled and experienced new hires to support our strategies, and we remain well-funded to advance our pipeline.

In retaining global rights to bemcentinib, BerGenBio maintains complete strategic flexibility for its future development and commercialisation. It is anticipated that the high novelty of bemcentinib plus its promising therapeutic profile, particularly in combination with existing therapies, could make it and future pipeline candidates attractive targets for partnering. A go-to market strategy may also be considered in selected indications in discrete territories, where greater value for shareholders could be created.

Bergen

The Board of Directors, BerGenBio ASA

23 February 2021

Sveinung Hole
Chairman

Dr. Debra Barker
Non-Executive Director

Dr. François Thomas
Non-Executive Director

Dr. Stener Kvinnsland
Non-Executive Director

Dr. Sally Bennett
Non-Executive Director

Richard Godfrey
CEO

Confirmation from the Board of Directors and CEO

We confirm that, to the best of our knowledge, the financial statements for the period from 1 January to 31 December 2020 have been prepared in accordance with IFRS as adopted by EU and the Norwegian Accounting Act and give a true and fair view of the Group and the company's consolidated assets, liabilities, financial position and results of operations, and that the Report of the Board of Directors provides a true and fair view of the development and performance of the business and the position of the Group and the company together with a description of the key risks and uncertainty factors that the company is facing.

Bergen

The Board of Directors, BerGenBio ASA

23 February 2021

Sveinung Hole
Chairman

Dr. Stener Kvinnsland
Non-Executive Director

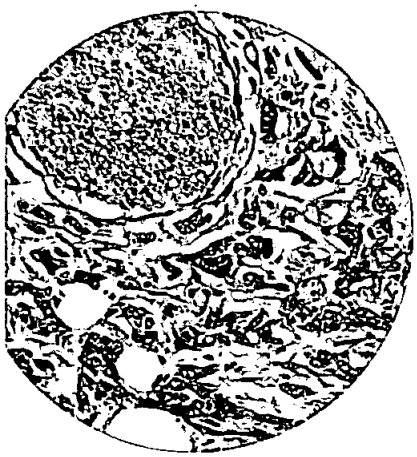
Dr. Debra Barker
Non-Executive Director

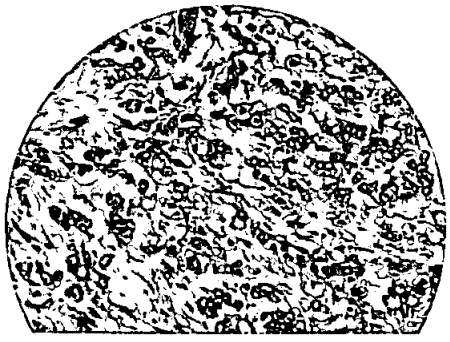
Richard Godfrey
CEO

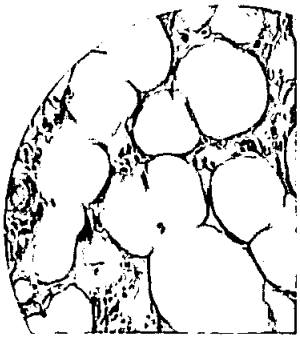
Dr. Sally Bennett
Non-Executive Director

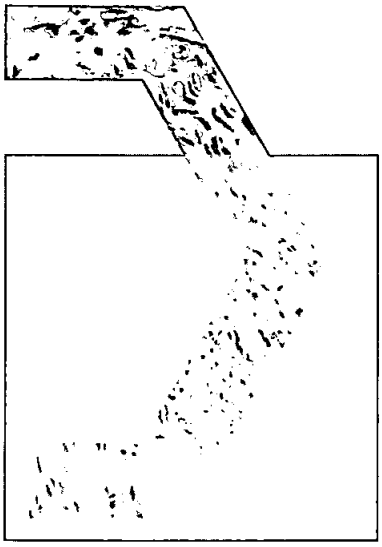
Dr. François Thomas
Non-Executive Director

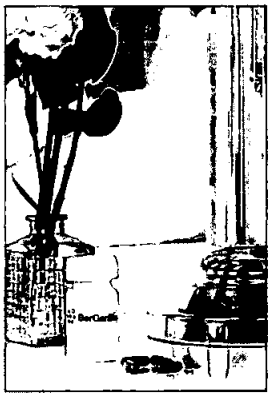
FINANCIAL STATEMENTS











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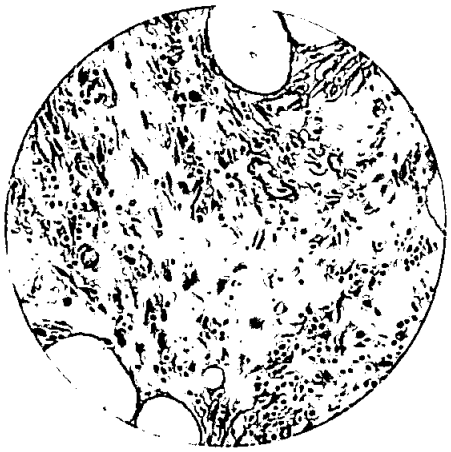

FINANCIAL STATEMENTS

Income Statement and Other Comprehensive Income

1 January – 31 December (NOK 1000)

Parent 2019	Parent 2020		Note	Group 2020	Group 2019
9,000	**651**	**Revenue**	4	**601**	**8,900**
20,166	24,573	Payroll and other related employee cost	5, 7, 10	48,832	34,533
1,184	11,346	Employee share option cost	5, 6	11,346	1,184
785	726	Depreciation	8	726	785
192,589	226,648	Other operating expenses	7, 9, 13, 22	200,788	176,773
214,724	**263,293**	**Total operating expenses**		**261,692**	**213,274**
(205,723)	**(262,642)**	**Operating profit**		**(261,091)**	**(204,374)**
11,288	18,812	Finance income	11	19,499	11,530
6,261	14,733	Finance expense	9, 11	15,437	6,434
5,027	**4,079**	**Financial items, net**		**4,062**	**5,096**
(200,696)	**(258,563)**	**Profit before tax**		**(257,029)**	**(199,278)**
0	0	Income tax expense	12	0	0
(200,696)	**(258,563)**	**Profit after tax**		**(257,029)**	**(199,278)**
		Other comprehensive income			
		Items which will not be reclassified over profit and loss			
(200,696)	**(258,563)**	**Total comprehensive income for the year**		**(257,029)**	**(199,278)**
		Earnings per share:			
(3.46)	(3.45)	– Basic and diluted per share	14	(3.43)	(3.43)

Statement of Financial Position

31 December (NOK 1000)

Parent 2019	Parent 2020		Note	Group 2020	Group 2019
		ASSETS			
		Non-current assets			
974	2,332	Property, plant and equipment and right-of-use assets	8	2,332	974
974	**2,332**	**Total non-current assets**		**2,332**	**974**
		Current assets			
16,923	9,985	Other current assets	7, 15, 22	14,228	15,818
252,653	721,161	Cash and cash equivalents	16, 20	721,641	253,586
269,575	**731,146**	**Total current assets**		**735,869**	**269,404**
270,550	**733,478**	**TOTAL ASSETS**		**738,200**	**270,378**
		EQUITY AND LIABILITIES			
		Equity			
		Paid in capital			
6,108	8,726	Share capital	17	8,726	6,108
189,985	628,896	Share premium	17	628,231	187,786
25,860	33,272	Other paid in capital	6, 17	33,272	25,860
221,953	**670,894**	**Total paid in capital**		**670,229**	**219,754**
221,953	**670,894**	**Total equity**		**670,229**	**219,754**
		Non-current liabilities			
0	1,367	Long term debt	9	1,367	0
0	**1,367**	**Total non-current liabilities**		**1,367**	**0**
		Current liabilities			
25,620	20,132	Accounts payable		22,550	26,746
20,902	35,078	Other current liabilities	9, 18, 22	38,046	21,803
2,074	6,008	Provisions	19	6,008	2,074
48,596	**61,217**	**Total current liabilities**		**66,604**	**50,624**
48,596	**62,584**	**Total liabilities**		**67,971**	**50,624**
270,550	**733,478**	**TOTAL EQUITY AND LIABILITIES**		**738,200**	**270,378**

Bergen
The Board of Directors, BerGenBio ASA
23 February 2021

Sveinung Hole	**Dr. Stener Kvinnsland**	**Sally Bennett**	**François Thomas**	**Dr. Debra Barker**
Chairman	Non-Executive Director	Non-Executive Director	Non-Executive Director	Non-Executive Director

Statement of Changes in Equity

(NOK 1000)

Group 2020	Note	Share capital	Share premium	Other paid in capital	Total equity
Balance at 1 January 2020		**6,108**	**187,786**	**25,860**	**219,754**
Profit after tax			(257,029)		(257,029)
Other comprehensive income (loss) for the year, net of income tax					0
Total comprehensive income for the year			**(257,029)**		**(257,029)**
Recognition of share-based payments	5, 6			7,412	7,412
Issue of ordinary shares	17	2,618	738,234		740,852
Share issue costs	17		(40,760)		(40,760)
Transactions with owners		2,618	697,474	7,412	707,504
Balance at 31 December 2020		**8,726**	**628,231**	**33,272**	**670,229**

Group 2019	Note	Share capital	Share premium	Other paid in capital	Total equity
Balance at 1 January 2019		**5,471**	**309,791**	**22,018**	**337,280**
Profit after tax			(199,278)		(199,278)
Other comprehensive income (loss) for the year, net of income tax					0
Total comprehensive income for the year			**(199,278)**		**(199,278)**
Recognition of share-based payments	5, 6			3,842	3,842
Issue of ordinary shares	17	637	82,148		82,785
Share issue costs	17		(4,875)		(4,875)
Transactions with owners		637	77,273	3,842	81,752
Balance at 31 December 2019		**6,108**	**187,786**	**25,860**	**219,754**

Parent 2020	Note	Share capital	Share premium	Other paid in capital	Total equity
Balance at 1 January 2020		**6,108**	**189,985**	**25,861**	**221,953**
Loss for the year			(258,563)		(258,563)
Other comprehensive income (loss) for the year, net of income tax					0
Total comprehensive income for the year			**(258,563)**		**(258,563)**
Recognition of share-based payments	5, 6			7,412	7,412
Issue of ordinary shares	17	2,618	738,234		740,852
Share issue costs	17		(40,760)		(40,760)
Transactions with owners		2,618	697,474	7,412	707,504
Balance at 31 December 2020		**8,726**	**628,896**	**33,273**	**670,894**

Parent 2019	Note	Share capital	Share premium	Other paid in capital	Total equity
Balance at 1 January 2019		**5,471**	**313,408**	**22,018**	**340,897**
Loss for the year			(200,696)		(200,696)
Other comprehensive income (loss) for the year, net of income tax					0
Total comprehensive income for the year			**(200,696)**		**(200,696)**
Recognition of share-based payments	5, 6			3,842	3,842
Issue of ordinary shares	17	637	82,148		82,785
Share issue costs	17		(4,875)		(4,875)
Transactions with owners		637	77,273	3,842	81,752
Balance at 31 December 2019		**6,108**	**189,985**	**25,861**	**221,953**

Statement of Cash Flows

1 January – 31 December (NOK 1000)

Parent 2019	Parent 2020		Note	Group 2020	Group 2019
		Cash flow from operating activities			
(200,696)	(258,563)	Profit before tax		(257,029)	(199,278)
		Adjustments for:			
785	726	Depreciation of property, plant and equipment	8	726	785
3,842	7,412	Share-based payment expense	5	7,412	3,842
(2,658)	3,934	Movement in provisions	10, 19	3,934	(2,658)
(1,324)	270	Currency-gains/+loss not related to operating activities		710	(332)
(2,206)	(3,614)	Net interest received		(3,614)	(2,206)
		Working capital adjustments:			
4,508	6,938	Decrease in trade and other receivables and prepayments		1,590	2,013
10,152	8,622	Increase in trade and other payables		11,982	11,151
(187,597)	**(234,276)**	**Net cash flow from operating activities**		**(234,290)**	**(186,683)**
		Cash flows from investing activities			
2,206	3,614	Net interest received		3,614	2,206
0	(67)	Purchase of property, plant and equipment	8	(67)	0
2,206	**3,548**	**Net cash flow used in investing activities**		**3,548**	**2,206**
		Cash flows from financing activities			
82,785	740,852	Proceeds from issue of share capital	17	740,852	82,785
(4,875)	(40,760)	Share issue cost		(40,760)	(4,875)
(593)	(585)	Cash payments for the principal portion of the lease liability	9	(585)	(593)
77,317	**699,507**	**Net cash flow from financing activities**		**699,507**	**77,317**
1,324	(270)	Effects of exchange rate changes on cash and cash equivalents		(710)	332
(108,075)	468,779	Net increase/(decrease) in cash and cash equivalents		468,765	(107,160)
359,403	252,653	Cash and cash equivalents at beginning of period	16	253,586	360,414
252,653	**721,161**	**Cash and cash equivalents at end of period**	16	**721,641**	**253,586**

Notes to the Financial Statements

Note 1 - Corporate information

BerGenBio ASA ("the company") as the Parent Company and its subsidiary (together "the Group") is a clinical-stage biopharmaceutical company developing innovative drugs for aggressive diseases, including immune evasive, drug resistant and metastatic cancers.

BerGenBio's lead product, bemcentinib (BGB324), is a selective, potent and orally bio-available small molecule AXL inhibitor in company sponsored Phase II clinical trials in major cancer indications and COVID-19, with read-outs anticipated during 2021. It is the most advanced selective AXL inhibitor in clinical development.

BerGenBio ASA is a limited public liability company incorporated and domiciled in Norway. The address of the registered office is Jonas Lies vei 91, 5009 Bergen, Norway.

BerGenBio retains strategic flexibility for the further development and commercialisation of its product candidates: it is anticipated that the high novelty of bemcentinib plus its promising therapeutic profile could make it (and later other pipeline candidates) attractive targets for strategic partnering; a "Go-to market" strategy will also be considered in select indications in discrete territories.

The consolidated financial statements and the financial statement for the company cover the year ending 31 December 2020 and were approved for issue by the Board of Directors on 23 February 2021.

Note 2 - Basis for preparation and significant accounting policies

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have consistently been applied in all periods presented. Amounts are in Norwegian kroner (NOK) and all values are presented in 1,000 NOK, except when otherwise indicated. The presenting currency of the Group and the company is NOK.

Basis for preparation

The consolidated financial statements for the Group and the company have been prepared in accordance with IFRS as adopted by the EU, other than money market fund which is presented at fair value thought profit and loss. The consolidated financial statements and the company financial statements have been prepared on a historical cost basis, except money market fund which is recognised at fair value through profit and loss.

Basis for consolidation

The consolidated financial statements comprise the financial statements of the company and its subsidiary as at 31 December 2020. The subsidiary is BerGenBio Limited, located in Oxford in the United Kingdom and is 100% owned and controlled by the parent company BerGenBio ASA. BerGenBio Limited was incorporated 10 January 2017 with a share capital of NOK 1,044.

Going concern

The Group works continuously to ensure financial flexibility in the short and long term to achieve its strategic and operational objectives. Capital markets are used as a source of liquidity when this is appropriate and when conditions in these markets are acceptable. An IPO and capital increase of gross NOK 400 million was successfully completed on the 7 April 2017 and a private placement raising gross NOK 187.5 million was successfully completed on the 13 April 2018. A further a private placement raising gross NOK 74.2 million was completed 14 June 2019. In 2020 funding of total NOK 740 million was raised, and thus the Board of Directors has reasonable expectation that the Group will maintain adequate resources to continue in operational existence for the foreseeable future. The financial statements are prepared under the going concern assumption.

Summary of significant accounting policies

The new and amended standards and interpretations from IFRS that were adopted by the EU with effect from 2019 did not have any significant impact on the reporting for 2019 and 2020. The Group has not early adopted any standard, interpretation or amendment that has been issued but is not yet effective.

Notes to the Financial Statements continued

Note 2 - Basis for preparation and significant accounting policies continued

Revenue recognition

Revenue from contracts with customers is recognised when control of the goods or services are transferred to the customer at an amount that reflects the consideration to which the Group and the company expects to be entitled in exchange for those goods or services. The Group and the company has generally concluded that it is the principal in its revenue arrangements, because it typically controls the goods or services before transferring them to the customer.

The Group's and the company's products are still in the research and development phase, and have limited revenue from sales of products yet.

The Group (the company) has entered into an out licence agreement where development, regulatory and sales-based milestones trigger revenue payment to the Group (the company). Revenue from out licence agreements are recognised in the period when the milestone events occured.

Government grants

Government grants are recognised where there is reasonable assurance that the grant will be received and all attached conditions will be complied with. The grant is recognised in the income statement in the same period as the related costs, and presented net. Government grants are recognised at the value of the contribution at the transaction date.

Government grants are normally related to either reimbursements of employee costs and classified as a reduction of payroll and related expenses, or related to other operating activities and thus classified as a reduction of other operating expenses.

Research and development costs

Research costs are expensed as incurred. Internal development costs related to the Group's development of products are recognised in the income statement in the year incurred unless it meets the asset recognition criteria of IAS 38 "Intangible Assets". An internally generated asset arising from the development phase of an R&D project is recognised as an intangible asset if the Group can demonstrate:

- Its ability to use or sell the intangible assets
- The technical feasibility of completing the intangible asset so that the asset will be available for use or sale
- Its intention to complete and its ability and intention to use or sell the asset
- How the asset will generate future economic benefits
- The availability of adequate technical, financial and other resources to complete the development and use of sell the asset
- The ability to measure reliably the expenditure during development

Uncertainties related to the regulatory approval process and results from on-going clinical trials, generally indicate that the criteria are not met until the time when marketing authorisation is obtained from relevant regulatory authorities. The Group has currently no development expenditure that qualifies for recognition under IAS 38.

Property, plant and equipment

Property, plant and equipment are stated at cost, net of accumulated depreciation and accumulated impairment losses, if any. Acquisition cost includes expenditures that are directly attributable to the acquisition of the individual item. Property, plant and equipment are depreciated on a straight-line basis over the expected useful life of the asset. If significant individual parts of the assets have different useful lives, they are recognised and depreciated separately. Depreciation commences when the assets are ready for their intended use.

An item of property, plant and equipment and any significant part initially recognised is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. Any gain or loss arising on derecognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is included in the income statement when the asset is derecognised.

The residual values, useful lives and methods of depreciation of the property, plant and equipment are reviewed at each financial year and adjusted prospectively, if appropriate.

Investment in subsidiaries

Subsidiaries are consolidated in the Group Financial Statement. In the Company Financial Statement subsidiaries are measured at cost.

Significant accounting policies

Identifying a lease

At the inception of a contract, The Group assesses whether the contract is, or contains, a lease. A contract is, or contains, a lease, if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

The Group (the company) as a lessee

Separating components in the lease contract

For contracts that constitute, or contain a lease, the Group (the company) separates lease components if it benefits from the use of each underlying asset either on its own or together with other resources that are readily available, and the underlying asset is neither highly dependent on, nor highly interrelated with, the other underlying assets in the contract. The Group (the company) then accounts for each lease component within the contract as a lease separately from non-lease components of the contract.

Recognition of leases and exemptions

At the lease commencement date, the Group (the company) recognises a lease liability and corresponding right-of-use asset for all lease agreements in which it is the lessee, except for the following exemptions applied:

- Short-term leases (defined as 12 months or less)
- Low value assets

For these leases, the Group (the company) recognises the lease payments as other operating expenses in the statement of profit or loss when they incurred.

Lease liabilities

The lease liability is recognised at the commencement date of the lease. The Group (the company) measures the lease liability at the present value of the lease payments for the right to use the underlying asset during the lease term that are not paid at the commencement date. The lease term represents the non-cancellable period of the lease, together with periods covered by an option either to extend or to terminate the lease when the Group (the company) is reasonably certain to exercise this option.

The lease payments included in the measurement comprise of fixed lease payments (including in-substance fixed payments), less any lease incentives receivable.

The lease liability is subsequently measured by increasing the carrying amount to reflect interest on the lease liability, reducing the carrying amount to reflect the lease payments made and remeasuring the carrying amount to reflect any reassessment or lease modifications.

The Group (the company) does not include variable lease payments in the lease liability. Instead, the Group (the company) recognises these variable lease expenses in profit or loss when they occur.

Notes to the Financial Statements continued

Note 2 - Basis for preparation and significant accounting policies continued

Right-of-use assets

The Group measures the right-of-use asset at cost, less any accumulated depreciation and impairment losses, adjusted for any remeasurement of lease liabilities. The cost of the right-of-use asset comprise:

- The amount of the initial measurement of the lease liability recognised
- Any lease payments made at or before the commencement date, less any incentives received
- Any initial direct costs incurred by the Group.

The Group (the company) applies the depreciation requirements in IAS 16 Property, Plant and Equipment in depreciating the right-of-use asset, except that the right-of-use asset is depreciated from the commencement date to the earlier of the lease term and the remaining useful life of the right-of-use asset.

The Group (the company) applies IAS 36 Impairment of Assets to determine whether the right-of-use asset is impaired and to account for any impairment loss identified.

Financial assets

Initial recognition and measurement

Financial assets are classified, at initial recognition, as subsequently measured at amortised cost, fair value through other comprehensive income (OCI), and fair value through profit or loss.

Financial assets are recognised initially at fair value plus, in the case of financial assets not recorded at fair value through profit or loss, transaction costs that are attributable to the acquisition of the financial asset.

Financial assets at amortised cost

This category is the most relevant to the Group. The Group measures financial assets at amortised cost if both of the following conditions are met:

- The financial asset is held within a business model with the objective to hold financial assets in order to collect contractual cash flows and
- The contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

Financial assets at amortised cost are subsequently measured using the effective interest (EIR) method and are subject to impairment. Gains and losses are recognised in profit or loss when the asset is derecognised, modified or impaired.

Financial assets at fair value through profit or loss

Financial assets at fair value through profit or loss are carried in the statement of financial position at fair value with net changes in fair value recognised in the statement of profit or loss.

The Group financial assets at fair value through profit or loss include money markets fund.

Impairment of financial assets

The Group assesses, at each reporting date, whether there is objective evidence that a financial asset or a group of financial assets is impaired. An impairment exists if one or more events that has occurred since the initial recognition of the asset (an incurred 'loss event'), has an impact on the estimated future cash flows of the financial asset or the group of financial assets that can be reliably estimated. Evidence of impairment may include indications that the debtors or a group of debtors is experiencing significant financial difficulty, default or delinquency in interest or principal payments, the probability that they will enter bankruptcy or other financial reorganisation and observable data indicating that there is a measurable decrease in the estimated future cash flows, such as changes in arrears or economic conditions that correlate with defaults.

The amount of any impairment loss identified is measured as the difference between the asset's carrying amount and the present value of estimated future cash flows (excluding future expected credit losses that have not yet been incurred).

Financial liabilities

Initial recognition and measurement

Financial liabilities are classified, at initial recognition, as financial liabilities at fair value through profit or loss, loans and borrowings, payables, or as derivatives designated as hedging instruments in an effective hedge, as appropriate.

All financial liabilities are recognised initially at fair value and, in the case of loans and borrowings and payables, net of directly attributable transaction costs.

The Group's financial liabilities include trade and other payables, and loans and borrowings.

The Group does not have financial liabilities at fair value through profit and loss.

Derecognition

A financial liability is derecognised when the obligation under the liability is discharged or cancelled or expires.

Share-based payments

The Group operates an equity-settled, share-based compensation plan, under which the Group receives services from employees and members of the Board as consideration for share-based payments (options).

The cost of equity-settled transactions is determined by the fair value at the date when the grant is made using an appropriate valuation model.

That cost is recognised, together with a corresponding increase in other paid in capital in equity, over the period in which the performance and/or service conditions are fulfilled in employee benefits expense. The cumulative expense recognised for equity-settled transactions at each reporting date until the vesting date reflects the extent to which the vesting period has expired and the Group's best estimate of the number of equity instruments that will ultimately vest. The statement of profit or loss expense or credit for a period represents the movement in cumulative expense recognised at the beginning and end of that period and is recognised in employee benefits expense.

The fair value of the options granted is measured using the Black-Scholes model. Measurement inputs include share price on the measurement date, exercise price of the instrument, expected volatility, weighted average expected life of the instruments, expected dividends and the risk-free interest rate.

When the options are exercised, the Group will issue new shares. The proceeds received net of any directly attributable transaction costs are recognised as share capital (nominal value) and share premium reserve.

Taxes

Current income tax

Current income tax assets and liabilities are measured at the amount expected to be recovered from or paid to the taxation authorities. The tax rates and tax laws used to compute the amount are those that are enacted or substantively enacted, at the reporting date in the country where the Group operates and generates taxable income.

Deferred tax

Deferred tax is provided using the liability method on temporary differences between the tax bases of assets and liabilities and their carrying amounts for financial reporting purposes at the reporting date.

Deferred tax liabilities are recognised for all taxable temporary differences, except:

When the deferred tax liability arises from the initial recognition of goodwill or an asset or liability in a transaction that is not a business combination and, at the time of the transaction, affects neither the accounting profit nor taxable profit or loss.

Notes to the Financial Statements continued

Note 2 - Basis for preparation and significant accounting policies continued

Deferred tax assets are recognised for all deductible temporary differences, the carry forward of unused tax credits and any unused tax losses. Deferred tax assets are recognised to the extent that it is probable that taxable profit will be available against which the deductible temporary differences, and the carry forward of unused tax credits and unused tax losses can be utilised.

The carrying amount of deferred tax assets is reviewed at each reporting date and reduced to the extent that it is no longer probable that sufficient taxable profit will be available to allow all or part of the deferred tax asset to be utilised. Unrecognised deferred tax assets are re-assessed at each reporting date and are recognised to the extent that it has become probable that future taxable profits will allow the deferred tax asset to be recovered.

Deferred tax assets and liabilities are measured at the tax rates that are expected to apply in the year when the asset is realised or the liability is settled, based on tax rates (and tax laws) that have been enacted or substantively enacted at the reporting date.

Deferred tax relating to items recognised outside profit or loss is recognised outside profit or loss.

Deferred tax items are recognised in correlation to the underlying transaction either in OCI or directly in equity.

Foreign currencies

The Group's financial statements are presented in NOK, which is also the parent's functional currency.

Transactions and balances

Transactions in foreign currencies are recorded at their respective functional currency spot rates at the date the transaction first qualifies for recognition.

Monetary assets and liabilities denominated in foreign currencies are translated at the functional currency spot rates of exchange at the reporting date.

Differences arising on settlement or translation of monetary items are recognised in profit or loss as financial items.

Cash and short-term deposits

Cash and short-term deposits in the statement of financial position comprise cash at banks and short-term highly liquid deposit with a maturity of three months or less, that are readily convertible to a known amount of cash and subject to an insignificant risk of changes in value.

For the purpose of the statement of cash flows, cash and cash equivalents consist of cash and short-term deposits, as defined above. The indirect method is used to prepare the statement of cash flow.

Provisions

Provisions are recognised when the Group has a present obligation (legal or constructive) as a result of a past event, it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation. The expense relating to a provision is presented in the Income Statement and other Comprehensive Income net of any reimbursement.

If the effect of the time value of money is material, provisions are discounted using a current pre-tax rate that reflects, when appropriate, the risks specific to the liability. When discounting is used, the increase in the provision due to the passage of time is recognised as a finance cost.

Pensions and other post-employment benefits

As per 1 October 2016, the Group decided to change the defined benefit scheme to a defined contribution scheme. Under the defined contribution scheme, the Group does not commit itself to paying specific future pension benefits, but makes annual contributions to the employees' pension savings.

The Group's payment to the defined contribution scheme amounts to 7% of salary up to 12G and 18.1% of salary between 7.1G and 12G for Norwegian employees and 7–10% for UK employees (G is Norwegian National Insurance basic amount).

Further details about pensions, and the closing of the defined benefit scheme, are given in Note 10.

New and amended standards and interpretations

The standards and interpretations that are issued, but not yet effective, up to the date of issuance of the Group's financial statements are disclosed below.

Note that only the ones that are expected to have material impact on the Group's financial position, performance, and/or disclosures are discussed. The Group intends to adopt these standards, if applicable, when they become effective.

Changes in accounting policies and disclosures

The accounting policies adopted are consistent with those of the previous financial year, except for the amendments to IFRS which have been implemented by the Group during the current financial year. No additional new standards have been applicable for the Group's 2020 financial statements.

Other standards

Other standards, interpretations and amendments that are issued, but not yet effective are either not applicable for the Group or is not expected to have a material impact of the financial statements.

Note 3 - Significant accounting judgements, estimates and assumptions

The preparation of the Group's financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts of revenues, expenses, assets and liabilities, and the disclosure of contingent liabilities. Uncertainty about these assumptions and estimates could result in outcomes that require a material adjustment to the carrying amount of assets or liabilities affected in future periods.

Estimates and assumptions

Preparation of the accounts in accordance with IFRS requires the use of judgement, estimates and assumptions that have consequences for recognition in the balance sheet of assets and liabilities and recorded revenues and expenses. The use of estimates and assumptions is based on the best discretionary judgement of the Group's management.

Share-based payments

The Group initially measures the cost of equity-settled transactions with employees using the Black-Scholes model to determine the fair value of the liability incurred. Estimating fair value for share-based payment transactions requires determination of the most appropriate valuation model, which is dependent on the terms and conditions of the grant. This estimate also requires determination of the most appropriate inputs to the valuation model including the expected life of the share option, volatility and dividend yield and making assumptions about them. The assumptions and models used for estimating fair value for share-based payment transactions are disclosed in Note 6.

Money market fund

Money market fund is classified as cash and cash equivalent. The criteria for classifying this as cash equivalent are that these funds are short term, highly liquid, readily convertible into known amounts of cash and subject to insignificant risk of changes in value. The evaluation of these criteria require use of judgement. The purpose of the fund is to meet short term commitments.

Note 4 - Segments and revenue

For management purposes the Group is organised as one business unit and the internal reporting is structured in accordance with this.

The Group has entered into an out-licence agreement where development, regulatory and sales-based milestones are due upon the occurrence of certain specific events. In 2019 a clinical milestone triggered a milestone payment and revenue to BerGenBio ASA at NOK 8.7 million. In 2020 there was no milestone revenue from this license agreement and the revenue represent refund of patent costs.

Notes to the Financial Statements continued

Note 5 - Payroll and related expenses

Parent 2019	Parent 2020		Group 2020	Group 2019
14,543	17,451	Salaries	37,364	28,225
3,322	3,209	Social security tax	5,840	5,055
1,355	1,523	Pension expense	3,075	2,358
2,143	3,500	Short Term Incentive	6,062	3,033
931	904	Other remuneration	1,291	1,158
(2,128)	(2,014)	Government grants	(4,800)	(5,297)
20,166	**24,573**	**Total payroll and other employee related cost**	**48,832**	**34,533**
3,842	7,412	Share option expense employees	7,412	3,842
(2,658)	3,934	Accrued social security tax on share options	3,934	(2,658)
1,184	**11,346**	**Total employee share option cost**	**11,346**	**1,184**
21,350	**35,919**	**Total employee benefit cost**	**60,177**	**35,717**
14	16	Average number of full time equivalent employees	34	26

Management remuneration

Total remuneration to management during the year ended 31 December 2020

		Salary	Short Term Incentive	Pension expense	Other remuneration
Richard Godfrey (CEO)	A)	3,085	1,421	197	12
Rune Skeie (CFO)	B)	1,426	275	193	12
James B Lorens (CSO)	C)	2,551	281	201	8
James Barnes (Director of Operations)	D)	1,919	360	192	0
Hani Gabra (CMO)	E)	3,118	240	0	180
Alison Messom (Director of Clinical Operations)	F)	1,608	0	161	0
Gro Gausdal (Director of Research & Bergen Site Leader)	G)	987	165	139	14
Endre Kjærland (Associate Director of IP and Contracts)	H)	919	158	118	12
Total remuneration		**15,613**	**2,899**	**1,201**	**237**

For management participating in the option program, the expense charged to the profit or loss for 2020 is as follows:

A) Richard Godfrey, 2306.08
B) Rune Skeie, 674.99
C) James Lorens, (40.50)
D) James Barnes, 676.08
E) Hani Gabra, 554.56
F) Alison Messom, 287.94
G) Gro Gausdal, 238.89
H) Endre Kjærland, 253.97

See Remuneration Report in the Governance section for additional information.

In the event of termination of the CEO's employment contract by the company without cause, he is entitled to 12 months notice or severance payment in lieu of equivalent salary, bonus and benefits. In the event of a change of control the CEO is entitled to compensation of 18 months' salary and at the CEO's sole discretion buy back of his shares to fair market value, both in the event that the employment agreement is terminated within 18 months of a change of control of the company.

Total remuneration to management during the year ended 31 December 2019

			Salary	Short Term Incentive	Pension expense	Other remuneration
Richard Godfrey (CEO)		A)	2,949	1,073	193	11
Rune Skeie (CFO)		B)	1,275	195	188	11
James B Lorens (CSO)	1)	C)	1,446	230	111	7
Anthony Brown (Director of Research)	2)	D)	480	0	34	0
Tone Bjaaland (Director of Clinical Operations)	3)	E)	1,519	0	54	0
James Barnes (Director of Operations)	4)	F)	1,334	168	12	0
Hani Gabra (CMO)	5)		723	0	19	56
Gro Gausdal (Director of Research & Bergen Site Leader)		G)	863	0	0	12
Endre Kjærland (Associate Director of IP and Contracts)		H)	803	131	0	11
Total remuneration			**11,393**	**1,797**	**611**	**109**

1) Employed part-time in a 20% position until July 2019. 100% position rest of the year
2) Resigned March 2019
3) Resigned May 2019
4) Employed March 2019
5) Employed September 2019

For management participating in the option program, the expense charged to the profit or loss for 2019 is as follows:

A) Richard Godfrey, 1716.3
B) Rune Skeie, 412.9
C) James Lorens, 164.8
D) Anthony Brown, -125.4
E) Tone Bjaaland, -45.6
F) James Barnes, 214.4
G) Gro Gausdal, 90.1
H) Endre Kjærland, 157.8

Notes to the Financial Statements continued

Note 5 - Payroll and related expenses continued

Board of Directors remuneration

The remuneration to the Board of Directors for the year ended 31 December

	Served since	Served until	2020	2019
Sveinung Hole	September 2010		470	446
Stener Kvinnsland	September 2015		232	215
Debra Barker	March 2019		253	216
Sally Bennett	December 2020		19	0
François Thomas	December 2020		19	0
Grunde Eriksen	March 2019	December 2020	291	231
Pamela Trail	March 2019	December 2020	283	197
Stein Holst Annexstad	February 2016	March 2019	0	113
Jon Øyvind Eriksen	January 2012	March 2019	0	76
Hilde Furberg	June 2015	March 2019	0	56
Kari Grønås	February 2016	March 2019	0	56
Total remuneration			**1,568**	**1,606**

Note 6 - Employee share option programme

The Group has a share option scheme for employees. Each option gives the right to acquire one share in BerGenBio on exercise.

The Group has a share option programme to ensure focus and align the Group's long term performance with shareholder values and interest. Most of the employees in the Group take part in the option programme. The programme also serves to retain and attract senior management.

The exercise price for options granted is set at the market price of the shares at the time of grant of the options. In general, for options granted after 2012 the options expire eight years after the date of grant.

Options vest annually in equal tranches over a three-year period following the date of grant.

	2020		2019	
Total options	**Number of options**	**Weighted average exercise price**	**Number of options**	**Weighted average exercise price**
Balance at 1 January	2,569,547	21.07	3,181,514	18.20
Granted during the period	2,026,663	15.00	784,629	25.00
Exercised during the period	(102,500)[17]	11.15	(870,000)	9.89
Forfeited and cancelled	(284,478)	20.14	(526,596)	28.07
Balance at 31 December	**4,209,232**	**18.45**	**2,569,547**	**21.07**

17. Average share price at date of exercise NOK 37.50

2,026,663 options were granted in the 12 months period ended 31 December 2020 and 784,629 options were granted in the 12 months period ended 31 December 2019.

In the annual general meeting on the 22 March 2017 it was resolved a split of the shares so that one share with a nominal value of NOK 10 was split into 100 shares with a nominal value of NOK 0.10. The overview above takes into account the share split.

The average weighted expected remaining lifetime of options is 3.0 years at year end.

The exercise price is calculated as the weighted average exercise price of the forfeited, cancelled and exercised options.

Vested options	2020	2019
Options vested at 1 January	1,701,981	2,598,334
Exercised and forfeited in the period	(163,552)	(1,396,596)
Vested in the period	348,772	500,243
Options vested at 31 December	**1,887,201**	**1,701,981**
Total outstanding number of options	4,209,232	2,569,547

The options are valued using the Black-Scholes model.

The risk free interest rates are based on rates from Norges Bank and Oslo Børs on the Grant Date (bonds and certificates) equal to the expected term of the option being valued. Where there is no exact match between the term of the interest rates and the term of the options, interpolation is used to estimate a comparable term. The vesting period is the period during which the conditions to obtain the right to exercise must be satisfied. The Group has estimated an expected vesting date and this date is used as basis for the expected lifetime. The Group expects the options to be exercised earlier than the expiry date. For options granted earlier than 2014, the mean of the expected vesting date and expiry date has been used to calculate expected lifetime due to the lack of exercise pattern history for the Group and experience from other companies in combination with the relatively long lifetime of these options (up to eight years).

For valuation purposes 56% expected future volatility has been applied.

For 2020 the value of the share options expensed through the profit or loss amounts to NOK 7.4 million (2019: NOK 3.8 million). In addition a provision for social security contributions on share options of NOK 3.9 million (2019: NOK -2.7 million) is recognised based on the difference between the share price and exercise price on exercisable option as at the end of the period.

Outstanding Instruments Overview

	Outstanding Instruments			Vested Instruments	
Strike price	Number of instruments	Weighted Average remaining contractual life	Weighted Average Strike Price	Vested Instruments 31.12.2020	Weighted Average Strike Price
10.62	395,000	0.58	10.62	395,000	10.62
11.15	190,000	1.47	11.15	190,000	11.15
15.00	1,848,130	7.27	15.00	0	0.00
16.01	640,000	2.30	16.01	640,000	16.01
24.00	210,000	3.00	24.00	210,000	24.00
25.00	548,527	6.30	25.00	191,787	25.00
28.50	164,665	5.83	28.50	114,663	28.50
46.70	212,910	5.40	46.70	145,751	46.70
	4,209,232			**1,887,201**	

Notes to the Financial Statements continued

Note 6 - Employee share option programme continued

Members of management participating in the option programme at year end

Option holder	Position	Number of options outstanding 31 December 2020	Number of options outstanding 31 December 2019	Weighted Average Strike Price 31 December 2020
Richard Godfrey	Chief Executive Officer	1,542,617	1,129,284	19.31
James B Lorens	Chief Scientific	568,737	588,507	15.24
Rune Skeie	Chief Financial Officer	242,757	96,090	21.40
James Barnes	Director of Operations	237,400	59,400	17.50
Hani Gabra	Chief Medical Officer	208,000	0	15.00
Gro Gausdal	Director of Research & Bergen Site Leader	143,376	91,709	20.34
Endre Kjærland	Associate Director of IP and Contracts	130,525	88,525	21.56
Alison Messom	Director of Clinical Operations	108,000	0	15.00
Total		**3,181,412**	**2,053,515**	

Note 7 - Government grants

Government grants have been recognised in the profit or loss as a reduction of related expense with the following amounts

Parent 2019	Parent 2020		Group 2020	Group 2019
2,128	2,014	Payroll and related expenses	4,800	5,297
20,727	16,616	Other operating expenses	16,616	20,727
22,854	**18,630**	**Total**	**21,417**	**26,024**

Grants receivable as at 31 December are detailed as follows:

Parent 2019	Parent 2020		Group 2020	Group 2019
2,531	2,551	Grants from Research Council, BIA	2,551	2,531
	591	Grants from Research Council, PhD	591	0
8,033	4,750	Grants from SkatteFunn	4,750	8,033
0	0	Grants R&D UK	4,243	2,637
10,564	**7,892**	**Total**	**12,135**	**13,202**

BIA grants from the Research Council:

The company currently has three grants from the Research Council, programmes for user-managed innovation arena (BIA).

The first BIA grant (AXL targeting therapeutics to treat fibrotic diseases) totals to NOK 12.0 million and covers the period from April 2015 to April 2019. The Group has recognised NOK 0.0 million in 2020 (2019: NOK 0.9 million) classified partly as reduction of payroll and related expenses and partly as a cost reduction of other operating expenses.

The second BIA grant ("Investigator-Initiated Trials for AXL driven cancers with high unmet clinical need") totals to NOK 15.1 million and covers the period from February 2017 to January 2021. The Group has recognised NOK 3.2 million in 2020 (2019: NOK 4.0 million) classified partly as reduction of payroll and related expenses and partly as a cost reduction of other operating expenses.

The third BIA grant ("AXL as a therapeutic target in fibrosis; biology and biomarkers") has been awarded from 2019 and amount up to NOK 10.7 million. The Group has recognised NOK 4.5 million in 2020 (2019: NOK 3.6 million) classified partly as reduction of payroll and related expenses and partly as a cost reduction of other operating expenses.

PhD grants from the Research Council:

BerGenBio has been awarded two grants supporting industrial PhDs in 2020. The fellowship covers 50% of the established current rates for doctoral research fellowships and an operating grant to cover up to 50% of additional costs related to costly laboratory testing connected with the research fellow's doctoral work.

The Group has recognised NOK 1.2 million in Q4 2020 (Q4 2019: NOK 0.0 million) classified partly as reduction of payroll and related expenses and partly as a cost reduction of other operating expenses.

SkatteFunn:

R&D projects have been approved for SkatteFunn (a Norwegian government R&D tax incentive programme designed to stimulate R&D in Norwegian trade and industry) for the period from 2018 until the end of 2020. The Group has recognised NOK 4.8 million in 2020 (2019: NOK 8.0 million) classified partly as reduction of payroll and related expenses and partly as a cost reduction of other operating expenses.

Innovasjon Norge:

BerGenBio has been awarded a NOK 24 million (USD2.85m) grant from Innovasjon Norge to support the clinical development of BGB324 in combination with Merck & Co.'s KEYTRUDA® (pembrolizumab) in patients with advanced lung cancer.

The grant from Innovasjon Norge is an Industrial Development Award (IFU). The IFU program is directed to Norwegian companies developing new products or services in collaboration with foreign companies. BerGenBio received NOK 7.2 million in 2017 of this grant and further NOK 12 million in 2019 and NOK 4.8 million in 2020. The grant may be withdrawn under certain circumstances. The Group has recognised NOK 5.1 million in 2020 (2019: NOK 6.3 million) classified as cost reduction of other operating expenses.

R&D tax grants UK:

BerGenBio Limited, a 100% subsidiary of BerGenBio ASA, has been granted R&D tax grants in the UK for 2017 and 2018. R&D grants are approved retrospect by application. Grants for 2017 and 2018 have been approved and received in 2019. Application for R&D grants are expected to be approved for 2019. The Group has in 2019 recognised NOK 3.2 classified as reduction of payroll and related expenses for the years 2017, 2018 and 2019. The Group has in 2020 recognised NOK 2.8 classified as reduction of payroll and related expenses for the year 2020.

Note 8 - Property, plant and equipment

Year ended 31 December 2020 Parent/Group	Furnitures	Equipment/ fittings	Right to use property	Total
Cost at 1 January 2020	70	1,632	1,178	2,880
Additions in the year	67	0	2,016	2,083
Disposals in the year	0	0	0	0
Cost at 31 December 2020	**136**	**1,632**	**3,195**	**4,963**
Accumulated depreciation at 1 January 2020	(22)	(1,264)	(620)	(1,906)
Depreciation in the year	(17)	(151)	(558)	(726)
Accumulated depreciation at 31 December 2020	**(39)**	**(1,414)**	**(1,178)**	**(2,632)**
Net carrying amount at 31 December 2020	**97**	**218**	**2,016**	**2,332**
Estimated useful life	5 years	5 years	2–5 years	
Depreciation method	Straight-line	Straight-line	Over right of use time	

Notes to the Financial Statements continued

Note 8 - Property, plant and equipment continued

Addition to Right to use property is related to extension of existing lease agreement.

Year ended 31 December 2019 Parent/Group	Furnitures	Equipment/ fittings	Right to use property	Total
Cost at 1 January 2019	70	1,632	1,178	2,880
Additions in the year	0	0	0	0
Disposals in the year	0	0	0	0
Cost at 31 December 2019	**70**	**1,632**	**1,178**	**2,880**
Accumulated depreciation at 1 January 2019	(8)	(1,113)	0	(1,121)
Depreciation in the year	(14)	(151)	(620)	(785)
Accumulated depreciation at 31 December 2019	**(22)**	**(1,264)**	**(620)**	**(1,906)**
Net carrying amount at 31 December 2019	**48**	**369**	**558**	**974**
Estimated useful life	5 years	5 years	2 years	
Depreciation method	Straight-line	Straight-line	Over right of use time	

Research & Development

Expenses for research and development for the financial year 2020 for Parent/Group was gross NOK 225.5 million (net NOK 206.9 million reduced of grants NOK 18.6 million) of which gross NOK 218.4 million (net NOK 201.8 million) was classified as other operating expenses and gross NOK 7.0 million (net NOK 5.0 million) was classified as payroll.

For 2019 gross NOK 163.4 million (net NOK 140.6 million reduced of grants NOK 22.9) was expensed for research and development, of which gross NOK 158.8 million (net NOK 139.1 million) was classified as other operating expenses and gross NOK 3.6 million (net NOK 1.5 million) was classified as payroll.

The figures are net of government grants that have been recognised in the profit or loss as a reduction of related expense.

Note 9 - Leases

The Group (the company) as a leasee

The company rents premises in Bergen, Norway, for office and laboratory purposes under two rental agreements. The rental agreements expired on 1 December 2020, and were extended for an additional five plus five years. The rental agreements can be terminated by either party with a 12 months notice period. In addition, the Group rents office premises in the UK. The rental agreement can be terminated by either party with a one month notice period. The two rental agreements in Bergen are recognised on the statement of financial position, while the rental agreement in the UK is considered a short term lease recognised directly in profit or loss.

Right-of-use assets

The Group (the company) leases offices. The Group's (the company's) right-of-use assets are categorised and presented in Note 8.

Lease liabilities

Summary of the lease liabilities	Total
At initial application 01.01.2019	1,178
New lease liabilities recognised in the year	0
Cash payments for the principal portion of the lease liability	(593)
Cash payments for the interest portion of the lease liability	(55)
Interest expense on lease liabilities	55
Currency exchange differences	0
Total lease liabilities at 31 December 2019	**585**
Total lease liabilities at 1 January 2020	585
New lease liabilities recognised in the year	2,016
Cash payments for the principal portion of the lease liability	(585)
Cash payments for the interest portion of the lease liability	(19)
Interest expense on lease liabilities	19
Currency exchange differences	0
Total lease liabilities at 31 December 2020	**2,016**
Current lease liabilities (note 18)	**650**
Non-current lease liabilities	**1,366**
Total cash outflows for leases	**585**

The leases do not contain any restrictions on the Group's dividend policy or financing. The Group does not have significant residual value guarantees related to its leases to disclose. Cash flow for lease recognised as operation expenses is 1,582 for 2020.

Undiscounted lease liabilities and maturity of cash outflows	2020	2019
Less than 1 year	681	604
1–5 years	1,381	0
Total undiscounted lease liabilities at 31 December 2020	**2,062**	**604**

Summary of other lease expenses recognised in profit or loss	2020	2019
Variable lease payments expensed in the period	0	0
Operating expenses in the period related to short-term leases (including short-term low value assets)	1,582	1,232
Operating expenses in the period related to low value assets (excluding short-term leases included above)	26	26
Total lease expenses included in other operating expenses	**1,608**	**1,258**

Notes to the Financial Statements continued

Note 9 - Leases continued

Practical expedients applied

The Group has a lease agreement for offices in Oxford. The lease agreement is short term and is renewed at one months basis.

The Group also leases printers with contract terms of five years. The Group has elected to apply the practical expedient of low value assets for some of these leases and does not recognise lease liabilities or right-of-use assets. The leases are instead expensed when they incur. The Group has also applied the practical expedient to not recognise lease liabilities and right-of-use assets for short-term leases, presented in the table above.

Extension options

The Group's lease of buildings expires in 2025 however the rental agreements include the option to extend (five plus five years). The Group (the company) has not recognised lease liability corresponding to the option period, as the Group (the company) do not consider it reasonable certain that extension rights will be executed. The Group's potential future lease payments not included in the lease liabilities related to extension options is MNOK 1.8 (gross) at 31 December 2020.

Note 10 - Pensions

BerGenBio ASA is required to have an occupational pension scheme in accordance with the Norwegian law on required occupational pension ("lov om obligatorisk tjenestepensjon"). The company has a contribution pension scheme which complies with the Act on Mandatory company pensions.

Note 11 - Financial income and expense

Parent 2019	Parent 2020		Group 2020	Group 2019
		Financial income		
28	55	Interest income on tax repaid	55	28
2,236	4,367	Interest income on bank deposits	4,367	2,236
9,023	14,390	Other finance income	15,077	9,265
11,288	**18,812**	**Total financial income**	**19,499**	**11,530**

Parent 2019	Parent 2020		Group 2020	Group 2019
		Financial expense		
90	26	Other interest expense	32	109
6,170	14,707	Other finance expense	15,405	6,325
6,261	**14,733**	**Total financial expense**	**15,437**	**6,434**
5,027	**4,079**	**Net financial income**	**4,062**	**5,096**

Note 12 - Income tax

Parent 2019	Parent 2020		Group 2020	Group 2019
(200,696)	**(258,563)**	**Profit before tax**	**(257,029)**	**(199,278)**
(44,153)	(56,884)	Income taxes calculated at 22%	(56,546)	(43,841)
		Adjustment in respect of current income tax of previous years		
		Changes in unrecognised deferred tax asset		
(918)	577	Non deductible expenses	577	(918)
		Non-taxable income		
		Change in temporary differences		
		Effect of change in tax rate		
45,071	56,307	Change in deferred tax asset not recognized	55,970	44,759
(0)	**(0)**	**Tax expense**	**0**	**0**
0	0	Income tax expense reported in income statement	0	0

Deferred tax and deferred tax assets

Parent 2019	Parent 2020		Group 2020	Group 2019
		Deferred tax assets (22% of temporary differences)		
(208,456)	(263,898)	Tax losses carried forward	(263,560)	(208,150)
(42)	(49)	Property, plant and equipment	(49)	(42)
(456)	(1,322)	Other	(1,322)	(456)
208,955	265,268	Deferred tax asset not recognized	264,931	208,649
		Deferred tax asset not recognized in other comprehensive income (OCI)		
0	**0**	**Deferred tax assets – gross**	**0**	**0**

The company has a tax loss of NOK 252.0 million in 2020, and in total a tax loss carried forward as of 31 December 2020 on NOK 1,199.5 million. There are no timing restrictions on carrying forward the tax loss, and it can be carried forward indefinitely.

The deferred tax asset has not been recognised in the statement of financial position, as the company does not consider that taxable income in the short-term will sufficiently support the use of a deferred tax asset.

Notes to the Financial Statements continued

Note 13 - Other operating expenses

Parent 2019	Parent 2020		Group 2020	Group 2019
141,630	163,442	Programme expenses, clinical trials and research	163,442	141,630
855	752	Office rent and expenses	2,364	2,087
23,467	31,150	Consultants R&D projects	21,792	21,225
3,810	6,041	Patent and licence expenses	6,041	3,810
43,555	41,880	Other operating expenses	23,766	28,748
(20,727)	(16,616)	Government grants	(16,616)	(20,727)
192,589	**226,648**	**Total**	**200,788**	**176,773**

Specification auditor's fee

Parent 2019	Parent 2020		Group 2020	Group 2019
284	233	Statutory audit	336	383
196	248	Other assurance services	248	196
0	0	Other non-assurance services	68	60
20	12	Tax consultant services	69	67
500	**493**	**Total**	**721**	**706**

Amounts are excluding VAT

The fees to Wellers, the statutory auditors of BerGenBio Limited, UK, amounted to NOK 104 for statutory audit, NOK 68 other non-assurance services, and NOK 47 for tax consultancy services out of a total audit fee for the Group of NOK 721.

Note 14 - Earnings per share

Parent 2019	Parent 2020		Group 2020	Group 2019
(200,696)	(258,563)	Profit after tax	(257,029)	(199,278)
58,030,714	74,919,830	Weighted average number of outstanding shares during the year	74,919,830	58,030,714
(3.46)	**(3.45)**	**Earnings (loss) per share – basic and diluted (NOK)**	**(3.43)**	**(3.43)**

Share options issued have a potential dilutive effect on earnings per share. No dilutive effect has been recognised as potential ordinary shares only shall be treated as dilutive if their conversion to ordinary shares would decrease earnings per share or increase loss per share from continuing operations. As the Group is currently loss-making an increase in the average number of shares would have anti-dilutive effects.

Note 15 - Other current assets

Parent 2019	Parent 2020		Group 2020	Group 2019
10,564	7,892	Government grants	12,135	13,202
1,996	772	Refundable VAT	772	1,996
371	726	Pepaid expenses	726	371
3,991	595	Other receivables	595	249
16,923	**9,985**	**Total**	**14,228**	**15,818**

Note 16 - Cash and cash equivalents

Parent 2019	Parent 2020		Group 2020	Group 2019
861	1,016	Employee withholding tax	1,016	861
251,792	217,515	Short-term bank deposits	217,994	252,725
0	502,631	Money market funds	502,631	0
252,653	**721,161**	**Total**	**721,641**	**253,586**

Of the total balance in cash and cash equivalents, NOK 1.0 million (2019: NOK 0.9 million) relates to restricted funds for employee withholding taxes.

The Group's short-term bank deposits are on variable rate terms.

Money market funds are classified as Cash and cash equivalents as this is short term placement held for the purpose of meeting short-term cash commitments. Risk is low and the fund is highly liquid.

Note 17 - Share capital and shareholder information

The Group has one class of shares and all shares carry equal voting rights.

As of 31 December	Number of authorised shares	Nominal value (NOK)	Book value (NOK)
Ordinary shares 2020	87,259,983	0.10	8,725,998.30
Ordinary shares 2019	61,076,590	0.10	6,107,659.00

Changes in the outstanding number of shares

	2020	2019
Ordinary shares at 1 January	61,076,590	54,711,446
Issue of ordinary shares	26,183,393	6,365,144
Ordinary shares at 31 December	**87,259,983**	**61,076,590**

Notes to the Financial Statements continued

Note 17 - capital and shareholder information continued

Ownership structure 31.12.2020

Shareholder		Number of shares	Percentage share of total shares
METEVA AS		23,041,253	26.4%
INVESTINOR AS		7,270,780	8.3%
FJARDE AP-FONDEN		3,623,698	4.2%
SARSIA SEED AS		2,117,900	2.4%
VERDIPAPIRFONDET ALFRED BERG GAMBA		1,918,329	2.2%
BERA AS		1,712,426	2.0%
MP PENSJON PK		1,572,983	1.8%
VERDIPAPIRFONDET KLP AKSJENORGE		1,540,000	1.8%
VERDIPAPIRFONDET NORDEA KAPITAL		1,524,740	1.7%
VERDIPAPIRFONDET NORDEA AVKASTNING		1,510,174	1.7%
VERDIPAPIRFONDET NORDEA NORGE VERD		1,212,488	1.4%
SARSIA DEVELOPMENT AS		1,175,000	1.3%
VERDIPAPIRFONDET ALFRED BERG NORGE		1,106,606	1.3%
VERDIPAPIRFONDET NORDEA NORGE PLUS		854,160	1.0%
MOHN MARIT		850,000	1.0%
MARSTIA INVEST AS		850,000	1.0%
VERDIPAPIRFONDET ALFRED BERG AKTIV		768,198	0.9%
J.P. Morgan Bank Luxembourg S.A.	NOM	740,428	0.8%
MOHN LOUISE		509,676	0.6%
VERDIPAPIRFONDET KLP AKSJENORGE IN		497,699	0.6%
Top 20 shareholders		**54,396,538**	**62.3%**
Total other shareholders		32,863,445	37.7%
Total number of shares		**87,259,983**	**100.0%**

The Board of Directors has been granted a mandate from the general meeting held on 16 March 2020 to increase the share capital by up to NOK 732,919 by subscription of new shares. The power of attorney was granted for the purpose of issuance of new shares in accordance with the company's share incentive programme and is valid until the earlier of the annual general meeting in 2021 and 30 June 2021. In May 2020 there was issued 102,500 new shares under this proxy at a nominal value of NOK 10,250. See note 4 for more information about the share incentive programme and number of option granted.

The Board of Directors has been granted a mandate from the general meeting held on 16 March 2020 to increase the share capital by up to NOK 1,465,838 by subscription of new shares. The proxy is valid until the earlier of the annual general meeting in 2021 and 30 June 2021. In May 2020 there was issued 13,325,000 shares under this proxy at a nominal value of NOK 1,332,500.

The Board of Directors has been granted a mandate from the extraordinary general meeting held on 19 June 2020 to increase the share capital with up to NOK 1,764,516 by subscription of new shares. The proxy is valid until the earlier of the annual general meeting in 2021 and 30 June 2021.

Ownership structure 31.12.2019

Shareholder		Number of shares	Percentage share of total shares
METEVA AS		16,458,750	26.9%
INVESTINOR AS		7,270,780	11.9%
VERDIPAPIRFONDET ALFRED BERG GAMBA		2,474,793	4.1%
SARSIA SEED AS		2,117,900	3.5%
VERDIPAPIRFONDET KLP AKSJENORGE		1,937,484	3.2%
KOMMUNAL LANDSPENSJONSKASSE		1,378,322	2.3%
VERDIPAPIRFONDET NORDEA KAPITAL		1,278,740	2.1%
VERDIPAPIRFONDET NORDEA AVKASTNING		1,228,174	2.0%
BERA AS		1,204,800	2.0%
SARSIA DEVELOPMENT AS		1,175,000	1.9%
MP PENSJON PK		1,045,555	1.7%
VERDIPAPIRFONDET NORDEA NORGE VERD		1,039,488	1.7%
VERDIPAPIRFONDET ALFRED BERG NORGE		921,160	1.5%
NORSK INNOVASJONSKAPITAL II AS		806,170	1.3%
ALTITUDE CAPITAL AS		715,000	1.2%
VERDIPAPIRFONDET ALFRED BERG AKTIV		639,296	1.0%
VERDIPAPIRFONDET NORDEA NORGE PLUS		623,060	1.0%
Morgan Stanley & Co. LLC	NOM	535,000	0.9%
Skandinaviska Enskilda Banken AB	NOM	500,000	0.8%
J.P. Morgan Bank Luxembourg S.A.	NOM	482,541	0.8%
Top 20 shareholders		**43,832,013**	**71.8%**
Total other shareholders		17,244,577	28.2%
Total number of shares		**61,076,590**	**100.0%**

Notes to the Financial Statements continued

Note 17 - capital and shareholder information continued

Shares in the Group held by the management group

	Current position within the company	Employed since	2020	2019
Richard Godfrey[18]	Chief Executive Officer	January 2009	21,005	215,449
James Bradley Lorens	Chief Scientific Officer	January 2009	280,039	280,039
Endre Kjærland	Associate Director Contracts and IP	July 2011	3,262	3,262
Total shares held by management			**304,306**	**498,750**

18. Richard Godfrey holds 21,005 shares in the company through Gnist Holding AS

Shares in the Group held by members of the Board of Directors

	Position	Served since	Served until	2020	2019
Sveinung Hole[19]	Chairman	September 2010	–	107,394	107,394
Stener Kvinnsland	Board Member	February 2015	–	104,444	104,444
Total shares held by members of the Board of Directors				**211,838**	**211,838**

19. Sveinung Hole holds 104,444 shares in the company through Svev AS, a wholly owned company of Sveinung Hole, and 2,950 shares directly

Note 18 - Other current liabilities

Parent 2019	Parent 2020		Group 2020	Group 2019
1,630	1,784	Unpaid duties and charges	1,753	653
1,390	1,736	Unpaid vacation pay	1,736	1,390
585	650	Current lease liabilities	650	585
17,296	30,908	Other accrued costs	33,908	19,175
20,902	**35,078**	**Total**	**38,046**	**21,803**

Note 19 - Provisions

	Social security contributions on share options	Total
Balance at 1 January 2020	2,074	2,074
Additional provisions recognised	3,934	3,934
Balance at 31 December 2020	**6,008**	**6,008**
Current	**6,008**	**6,008**
Non-current	0	0

The provision for social security contributions on share options is calculated based on the number of options outstanding at the reporting date that are expected to be exercised. The provision is based on the difference between market price and strike price. The market price of the shares at the reporting date is the best estimate of market price at the date of exercise.

Note 20 - Financial instruments and risk management objectives and policies

The Group's activities are exposed to certain financial risks including foreign exchange risk, credit risk and liquidity risk. The risk is however of such character that the Group has chosen not to put in place any measures to mitigate the potential unpredictability of the financial markets. The Group has NOK 721.6 million in cash and cash equivalents at year end. The main purpose of this is to finance the Group's activities and ongoing clinical trials. The Group has various assets and liabilities such as receivables and trade payables, which originate directly from its operations. All financial assets and liabilities are carried at amortised cost. All financial assets and liabilities are short-term in nature and their carrying value approximates fair value. The cash and cash equivalent and account payable is in entire financial instruments measured at amortised cost, except money market fund which is recognised at fair value through profit and loss.

The Group does currently not use financial derivatives.

Foreign currency risk

The value of non-Norwegian currency denominated revenues and costs will be affected by changes in currency exchange rates or exchange control regulations. The Group undertakes various transactions in foreign currencies and is consequently exposed to fluctuations in exchange rates. The exposure arises largely from research expenses. The Group is mainly exposed to fluctuations in euro (EUR), pounds sterling (GBP) and US dollar (USD).

The Group has chosen not to hedge its operational performance as the Group's cash flow is denominated in several currencies that change depending on where clinical trials are run. The foreign currency exposure is also mostly linked to trade payables with short payment terms. The Group might consider changing its current risk management of foreign exchange rate if it deems it necessary.

Interest rate risk

The Group holds NOK 721.6 million in cash and cash equivalents and does not have any borrowings. The Group's interest rate risk is therefore in the rate of return of its cash on hand. Bank deposits are exposed to market fluctuations in interest rates, which affects the financial income and the return on cash. The Group had NOK 4.4 million in interest income in 2020 (NOK 2.2 million 2019).

Credit risk

Credit risk is the risk of a counterparty's default in a financial asset, liability or customer contract, giving a financial loss. The Group's receivables are generally limited to receivables from public authorities by way of government grants. The credit risk generated from financial assets in the Group is limited since it is cash deposits. The company only places its cash in bank deposits and limited risk money market fund in recognised financial institutions to limit its credit risk exposure.

The Group has not suffered any loss on receivables during 2020 and the Group considers its credit risk as low.

Change in liabilities arising from financing activities

	Current lease liabilities (Note 9)	Non-current lease liabilities (Note 9)
1 January 2020	585	0
Cash flows	(585)	0
New leases	650	1,366
Other	0	0
31 December 2020	**650**	**1,366**

	Current lease liabilities (Note 9)	Non-current lease liabilities (Note 9)
1 January 2019	627	551
Cash flows	(593)	0
New leases	0	0
Other	551	(551)
31 December 2019	**585**	**0**

Notes to the Financial Statements continued

Note 20 - Financial instruments and risk management objectives and policies continued

Liquidity risk

Liquidity is monitored on a continual basis by Group management. Management considers the Group's liquidity situation to be satisfactory. The Group raised total NOK 740 million in equity funding during 2020. The cash position of the Group at year end 2020 was NOK 721.6 million, compared to NOK 253.6 million in 2019.

Capital management

The Board of Directors' goal is to maintain a strong capital base in order to preserve the confidence of investors, creditors and to develop business activities.

Note 21 - Subsidiary

The Group's subsidiary at 31 December 2020 is set out below. The share capital consists solely of ordinary shares that are held directly by the Group, and the proportion of ownership interests held equals the voting rights held by the Group.

Name of entity	BerGenBio Limited
Place of business	Oxford, UK
Ownership interest held by the Group	100%
Principal activities	Management of clinical studies

Note 22 - Intercompany

BerGenBio ASA have entered into an intercompany management agreement with BerGenBio Limited. Services are delivered from BerGenBio Limited to BerGenBio ASA.

	Parent 2020	Parent 2019
Purchase from BerGenBio Limited (included in other operation expenses)	48,077	33,860
Receivables BerGenBio Limited, included in other current assets	0	3,742
Payable BerGenBio Limited, included in current liabilites	1,075	0

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INDEPENDENT AUDITOR'S REPORT

To the Annual Shareholders' Meeting of BerGenBio ASA

Report on the audit of the financial statements

Opinion

We have audited the financial statements of BerGenBio ASA, which comprise the financial statements for the parent company and the Group. The financial statements for the parent company and the Group comprise the statements of financial position as at 31 December 2020, the income statements and the statements of other comprehensive income, the statements of cash flows and changes in equity for the year then ended and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the financial statements have been prepared in accordance with laws and regulations and present fairly, in all material respects, the financial position of the Company and the Group as at 31 December 2020 and their financial performance and cash flows for the year then ended in accordance with International Financial Reporting Standards as adopted by the EU.

Basis for opinion

We conducted our audit in accordance with laws, regulations, and auditing standards and practices generally accepted in Norway, including International Standards on Auditing (ISAs). Our responsibilities under those standards are further described in the *Auditor's responsibilities for the audit of the financial statements* section of our report. We are independent of the Company and the Group in accordance with the ethical requirements that are relevant to our audit of the financial statements in Norway, and we have fulfilled our ethical responsibilities as required by law and regulations. We have also complied with our other ethical obligations in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Key audit matters

Key audit matters are those matters that, in our professional judgment, were of most significance in our audit of the financial statements for 2020. We have determined that there are no key audit matters to communicate in our report.

Other information

Other information consists of the information included in the Company's annual report other than the financial statements and our auditor's report thereon. The Board of Directors and Chief Executive Officer (management) are responsible for the other information. Our opinion on the financial statements does not cover the other information, and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information, and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed on the other information obtained prior to the date of the auditor's report, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

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Responsibilities of management for the financial statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with International Financial Reporting Standards as adopted by the EU, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with law, regulations and generally accepted auditing principles in Norway, including ISAs, we exercise professional judgment and maintain professional scepticism throughout the audit. We also

- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control;
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control;
- evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management;
- conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern;
- evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation;
- obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the Group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit opinion.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

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Report on other legal and regulatory requirements

Opinion on the Board of Directors' report and on the statements on corporate governance and corporate social responsibility

Based on our audit of the financial statements as described above, it is our opinion that the information presented in the Board of Directors' report and in the statements on corporate governance and corporate social responsibility concerning the financial statements, the going concern assumption, and proposal for the allocation of the result is consistent with the financial statements and complies with the law and regulations.

Opinion on registration and documentation

Based on our audit of the financial statements as described above, and control procedures we have considered necessary in accordance with the International Standard on Assurance Engagements (ISAE) 3000, *Assurance Engagements Other than* Audits *or Reviews of Historical Financial Information*, it is our opinion that management has fulfilled its duty to ensure that the Company's accounting information is properly recorded and documented as required by law and bookkeeping standards and practices accepted in Norway.

Bergen, 25 February 2021
ERNST & YOUNG AS

Jørn Knutsen
State Authorised Public Accountant (Norway)

About the Report, Data Summary Overview and WEF Index

About the report

The enclosed Financial statements and Board of Directors' report, together with the accompanying notes, fulfils BerGenBio's Norwegian statutory requirements for annual reporting. The remainder of the annual report includes additional information about BerGenBio's business, financial and operating performance, shareholder information and ESG performance including corporate governance.

The report contains disclosures from the World Economic Forum's core set of ESG metrics, in addition to specific pharma indicators from sector organisations such as Good Pharma and Pharmaceutical Supply Chain Initiative and rating agencies.

Data summary overview and WEF Index

ESG Aspect	Metric	Unit	Result 2020	Report reference	Disclosure reference
Governing Purpose	Setting purpose	Qualitative			The British Academy and Colin Mayer, GRI (102-26), EPIC
Stakeholder engagement	Impact of material issues on stakeholders	Qualitative			GRI (102-21), GRI (102-43), GRI (102-47)
Risk and opportunity oversight	Integrating risk and opportunity into business processes	Qualitative			EPIC, GRI (102-15), World Economic Forum Integrated Corporate Governance, IR (4D)
Business ethics	Percentage of employees receiving Code of conduct training	%	0	For information on CoC reference page 51, 61, 62 and 64	Industry best practice
	Confirmed incidents of corruption	#	0	Page 62	GRI(205-2), GRI(205-3)
Innovation	R&D spend	NOK Million	225.5	Page 86	US GAAP ASC 730
	Number of patents granted	#	10	Page 26 and 60	Pharma Indicator, Industry best practice
	Number of peer-reviewed publications BGB has contributed to	#	2	Page 26	Pharma Indicator, Industry best practice
	Number of international presentations	#	9	Page 26	Pharma Indicator, Industry best practice
Economic	Revenues	NOK Million	0.6	Page 60, 68, 74 and 79	
	Operating Cost	NOK Million	261,7	Page 60	
	Employee wages and benefits	NOK Million	60.18	Page 46, 47, 52, 54, 55, 78, 80, 81	
	Payments to government (other than taxes)	NOK Million	0		GRI (201-1), GRI (201-4)
	Financial assistance from the government	NOK Million	21.4	Page 60, 74, 80, 84, 85, 86, 90 and 91	
	Total taxes paid	NOK Million	5.8	For information on taxes reference page 68, 77, 78, 80, 88, 89 and 90	

ESG Aspect	Metric	Unit	Result 2020	Report reference	Disclosure reference
Clinical trial conduct	Number of clinical trials registered and initiated during the year	#	1		SASB (HC-BP-210a.1.)
	Total number of discontinued clinical trials due to non-compliance	#	0	For information on clinical trial conduct reference page 38, 39 and 62	Adapted from SASB (HC-BP-210a.1.)
	Critical inspection findings	#	0		Adapted from SASB (HC-BP-210a.2.)
	Total amount of monetary losses as a result of legal proceedings associated with clinical trials	NOK Million	0		Adapted from SASB (HC-BP-210a.3.)
Board governance	Total number of Board members	#	5		
	Board diversity (men/women)	%	60/40	For information on Board governance reference page 53–55 and 62	GRI (102-22), GRI (405-1a), IR (4B)
	Number of non-executive Board members	#	5		
	Number of independent Board members	#	3		
Patient safety	Total number of substantiated complaints received with regard to patient personal data breach	#	0		GRI (418-1)
Talent attraction and retention	Total number of employees	#	42		GRI (102-8)
	Employee diversity (Men/women)	%	41/59		GRI (405-1.b)
	Number of interns/postgraduate students/PhD students employed	#	2	For information on talent attraction and retention reference page 62 and 63	BerGenBio indicator
	New employees hired	#	14		Adapted, to include other indicators of diversity, from GRI 401-1 (a & b)
	New employees diversity (men/women)	%	21.5/78.5		
	Employee turnover rate	%	10		
	Employees regularly receiving performance and development evaluation	%	100		
	Personnel with PhD		16		BerGenBio indicator
Responsible sourcing	Number of material suppliers who undertook supplier ESG self-assessment	#	0	For information on supplier ESG self-assessment reference page 64	Own indicator, adapted from GRI (408-1.b), GRI (409-1)
Wellbeing of employees	Employee survey response rate and engagement score	% and %	85% response, 84% engagement	Page 63	BerGenBio indicator
Occupational health and safety	Number of Injuries	#	0	For information on occupational health and safety reference page 63	GRI (403-9.a & .b)
	Injury rate	Per million work hours	0		
	Sick-leave	%	2		Norwegian Accounting Act
Protection of human and labor rights	Confirmed incidents of discrimination	#	0	Page 62, 64	GRI (408-1.b), GRI (409-1)

Glossary

ACCORD	Accelerating COVID-19 Research & Development
ADC	Antibody-drug conjugate
ADCT	ADC Therapeutics SA
AGM	Annual General Meeting
ALK	Anaplastic lymphoma kinase
AML	Acute Myeloid Leukaemia
ASCO	American Society of Clinical Oncology
ASH	American Society of Hematology
AXL	A receptor tyrosine kinase
BGB	BerGenBio
BGBIO	BerGenBio ticker symbol on Oslo Stock Exchange
CAGR	Compound annual growth rate
CAR-T	Chimeric Antigen Receptor T Cells
cAXL	composite AXL
CDx	Companion diagnostics
CLIA	Clinical Laboratory Improvement Amendments
COPD	Chronic obstructive pulmonary disease
CPI	Immune checkpoint inhibitor
CR	Complete response
CRi	Complete response with incomplete recovery of peripheral counts
CRO	Contract research organisation
CSR	Corporate social responsibility
EGFR	Epidermal growth factor receptor
EHA	European Hematology Association
EIR	Effective interest rate
EMA	European Medicines Agency
EMT	Epithelial-mesenchymal transition
ENA	EORTC NCI AACR Symposium
EndMT	Endothelial-mesenchymal transition
ESG	Environmental, Social and Governance
ESMO	European Society for Medical Oncology
EU	European Union
EY	Ernst and Young AS
FDA	Food and Drug Administration
GAS6	Growth arrest-specific 6
GDPR	General Data Protection Regulation
HQ	Headquarters
HR-MDS	High Risk Myelodysplastic Syndromes

IFRS	International Financial Reporting Standards
IHC	Immunohistochemistry
IPF	Idiopathic pulmonary fibrosis
IPO	Initial public offering
IR	Investor relations
IST	Investigator Sponsored Trials
KPI	Key Performance Indicator
LDAC	Low-dose AraC
MaB	Monoclonal antibody
MDS	Myelodysplastic Syndrome
MF	Myelofibrosis
mPFS	median progressive-free survival
mOS	median overall survival
MSD	Merck & Co., Inc., d.b.a. Merck Sharp & Dohme outside the United States and Canada
NASH	Non-alcoholic steatohepatitis
NHS	National Health Service
NSCLC	Non-Small Cell Lung Cancer
OCI	Other comprehensive income
ORR	Overall response rate
OSE	Oslo Stock Exchange
PD-1	Programmed death 1
PD-L1	Programmed death-ligand 1
PDAC	Pancreatic ductal adenocarcinoma
PFS	Progression free survival
PhD	Doctor of philosophy
PR	Partial response
R/R	Relapsed/refractory
R&D	Research & development
SARS-CoV-2	Severe acute respiratory syndrome coronavirus 2
sAXL	Soluble AXL
SDG	Sustainable Development Goals
SITC	Society for Immunotherapy of Cancer
Tilvestamab	Formerly BGB149, BerGenBio's AXL inhibitor antibody, currently completed Phase 1a
TKI	Tyrosine Kinase Inhibitor
UK	United Kingdom
UKRI	UK Research and Innovation
US	United States
WCLC	World Conference on Lung Cancer

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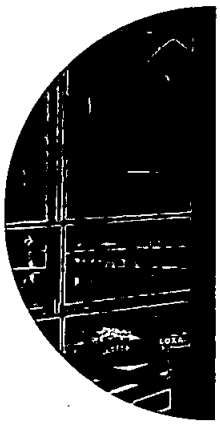

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