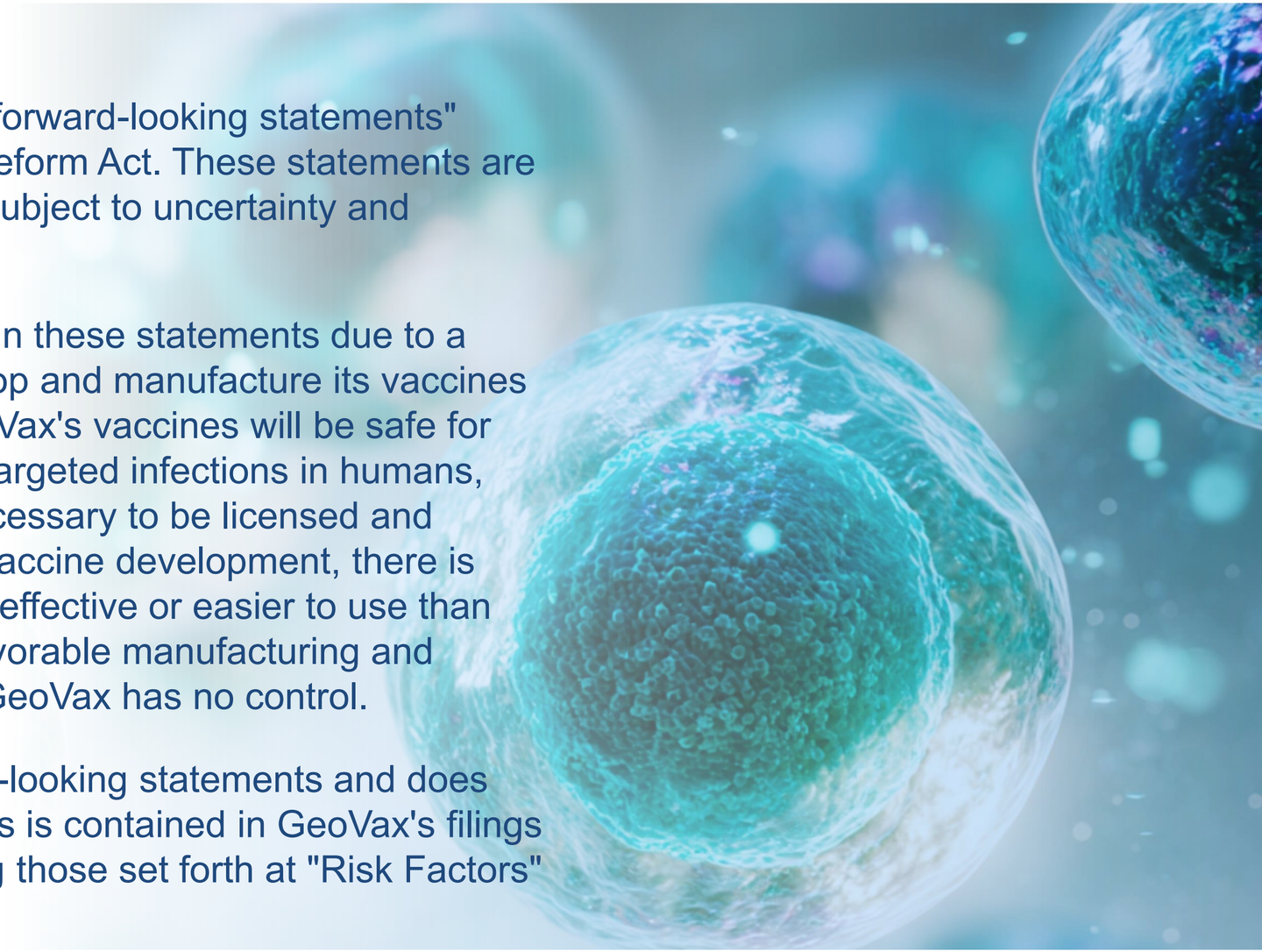
GeoVax Corporate Overview

August 2026

Nasdaq: GOVX

Forward Looking Statements



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Actual results may differ materially from those included in these statements due to a variety of factors, including whether: GeoVax can develop and manufacture its vaccines with the desired characteristics in a timely manner, GeoVax's vaccines will be safe for human use, GeoVax's vaccines will effectively prevent targeted infections in humans, GeoVax's vaccines will receive regulatory approvals necessary to be licensed and marketed, GeoVax raises required capital to complete vaccine development, there is development of competitive products that may be more effective or easier to use than GeoVax's products, GeoVax will be able to enter into favorable manufacturing and distribution agreements, and other factors, over which GeoVax has no control.

GeoVax assumes no obligation to update these forward-looking statements and does not intend to do so. More information about these factors is contained in GeoVax's filings with the Securities and Exchange Commission including those set forth at "Risk Factors" in GeoVax's Form 10-K.

Addressing Critical Unmet Medical Needs and Large Commercial Opportunities

Product	Indication	Pre-clinical/IND-enabling	Phase 1	Phase 2	Phase 3	Global Market Opportunity
GEO-MVA	Mpox & Smallpox		n/a	n/a		$2B+
Gedeptin®	Solid tumor therapy/Head & Neck Cancer					$15B+
Hemorrhagic Fever Viruses	Ebola-Zaire Ebola-Sudan Marburg					$3B+

Global Development & Commercialization via Collaborations/Partnerships

Strong IP Estate, 130 patents across 22 families

Upcoming Clinical Catalysts

Program			Milestones
GEO-MVA (mpox/smallpox vaccine)	**First U.S.-sourced** U.S.-sourced MVA vaccine against Mpox & Smallpox; will expand global supply	**Expedited Development Path** Ph 1 and Ph 2 trials waived by EMA; only non-inferiority of immune comparison between GEO-MVA and MVA-BN (current approved MVA-vaccine) required for licensing	**Pivotal Ph 3 trial commencing Q4'26; Rapid enrollment & completion w/in 3 months; data readout mid-2027**
Gedeptin® (solid tumor therapy)	**Tumor Agnostic** Targeting multiple solid-tumor indications	**Enhancing Cancer Therapy** Combination of Gedeptin® and ICIs will enhance tumor therapies	**Ph 2 trial in 1st line head & neck cancer (Gedeptin® + ICI) initiation targeted for H2'27**

Capital Strategy

Non-dilutive funding (BARDA, HHS, DoD, CEPI)

Strategic partnerships

Reduced equity-sourced capital needs post-Ph 3 (GEO-MVA) de-risking

GeoVax Investment Thesis

- Near-term regulatory catalysts
- Structural monopoly break
  - Single global MVA supplier → U.S. sovereign alternative
  - National Security Asset: Only U.S.-based, scalable MVA manufacturing platform addressing a recognized biodefense and pandemic preparedness gap
- De-risked platform with multi-program leverage
- Clear government & stockpile demand vectors
- Multiple partnering paths → non-dilutive capital

Corporate

Leadership with Proven Results in Driving Shareholder Value

Kelly McKee, MD, MPH
Chief Medical Officer

Mark Newman, PhD
Chief Scientific Officer

Mark Reynolds
Chief Financial Officer

John Sharkey, PhD
VP, Business Dev

Senthil Ranganathan, PhD
VP, Tech Dev & CMC

John Niles
VP, Commercial Dev

Susan Hensley, MS, RAC
VP, Regulatory Affairs

Tom O'Brien
VP, Qual & Compliance

Jeff Welch
Head, Process Dev & Mfg

J. Marc Pipas, MD
Exec Medical Dir, Oncology

Mary J. Hauser, PhD
Dir, Preclinical Research

Ashley Zuniga, PhD, PMP
Director, Project Mgt

Erica Raiden
Dir, Clinical Operations

Arban Domi, PhD
Dir, Vector Development

Sreenivasa Oruganti, PhD
Senior Scientist

LEADERSHIP

Proven Execution in Biopharma & Vaccine Development

- **David A. Dodd — Chairman & CEO**
  - 40+ years biopharma leadership; transaction oriented
  - Former CEO, Serologicals
    - Market value (6-years): $80M → $1.5B acquisition (Millipore)
  - Former CEO, Solvay Pharmaceuticals, Inc.
    - Enterprise value (5-years): $100 Million → $2.5B
  - Former SVP, Wyeth; US Pharma/Vaccines
- **Experienced Leadership Team; Execution-Focused**
  - Vaccine development & biosecurity expertise
  - Regulatory (FDA / EMA) experience
  - Manufacturing scale-up capability
  - Public/Private company leadership

Bottom line: Experienced team positioned to execute and scale

GEO-MVA

(Mpox & Smallpox vaccine)

MVA: Modified Vaccinia Ankara

- **MVA is the vaccine that allowed smallpox to be eradicated worldwide**
  - The only vaccine that is safe in all patient populations, indicated for mpox and smallpox

- **Single supplier (monopoly) worldwide: Bavarian-Nordic (MVA-BN)**
  - Limited supply capability – can't meet global demand
    - 2025 sales of MVA-BN: $500 Million USD
    - 2025 unmet demand of MVA-vaccine: ~15 million doses → $1.3 Billion USD

- **GEO-MVA is "essentially identical" to MVA-BN**

Why GEO-MVA is Critical Today

- **Unmet Market Opportunity**
  - Supply-constrained market with approximately $1.3 billion in unmet demand (2025)
  - Single commercial supplier of MVA-vaccine worldwide: Bavarian-Nordic (MVA-BN)
  - GEO-MVA expands the MVA supply, addressing growing preparedness demand

- **De-risked Development Program**
  - Proven MVA vaccine platform preferred for use across all patient populations, including immunocompromised individuals
  - GEO-MVA is considered **"essentially identical"** to MVA-BN by regulatory authorities
  - Expedited EMA regulatory pathway through a single 500-patient**, Ph 3** immune-bridging study vs. MVA-BN

- **Near-Term Value Creation**
  - Ph 3 initiation expected in Q4 2026
  - Mid-2027 pivotal data readout
  - Potential for expedited regulatory licensing, positioning GEO-MVA for procurement opportunities

Mpox Is Becoming a Persistent Global Threat
Vaccine Supply Is Far-Short of Need

Disease Is Escalating

- Multiple Mpox variants now circulating globally
- Increasing virulence and mortality signals
- Sustained transmission across US, EU, and Africa

Vaccination Is Essential but Constrained

- Vaccination remains the primary tool for outbreak prevention & disease control
- Global supply insufficient for sustained or repeat outbreaks
- Limited surge capacity during periods of rapid spread

Manufacturing Is the Bottleneck

- Reliance on a single commercial MVA vaccine supplier
- Limited access in high-burden regions, especially Africa
- Need for scalable, localized vaccine manufacturing

Mpox control depends on vaccination, but current manufacturing capacity is insufficient for a persistent global threat

GeoVax®

GEO-MVA Investment Highlights

GEO-MVA is positioned to expand the supply of MVA-vaccine in a supply-constrained global preparedness market through a capital-efficient regulatory pathway and procurement-driven commercial model

- ✓ **Large Existing Procurement Market**
- ✓ **Supply-Constrained Competitive Landscape**
- ✓ **Capital Efficient Regulatory Strategy**
- ✓ **Clear Mid-2027 Value Inflection Point**
- ✓ **Procurement-Driven Commercial Model**
- ✓ **Experienced Vaccine Leadership**

GEO-MVA combines an established vaccine platform, expedited regulatory pathway and procurement-driven commercial model, creating a differentiated investment opportunity with multiple near-term value catalysts

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Rapid, Capital-Efficient Path to Clinical Validation

500-Patient Immune-bridging Study with Mid-2027 Readout

- 500 participants
- Neutralizing antibody endpoints
- Direct comparison to MVA-BN
- Enrollment: 8-12 weeks
- Mid-2027 readout

Q4 2026 Start

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Rapid Enrollment

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Day 42 Readout

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EMA/WHO Pathway

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Procurement Eligibility

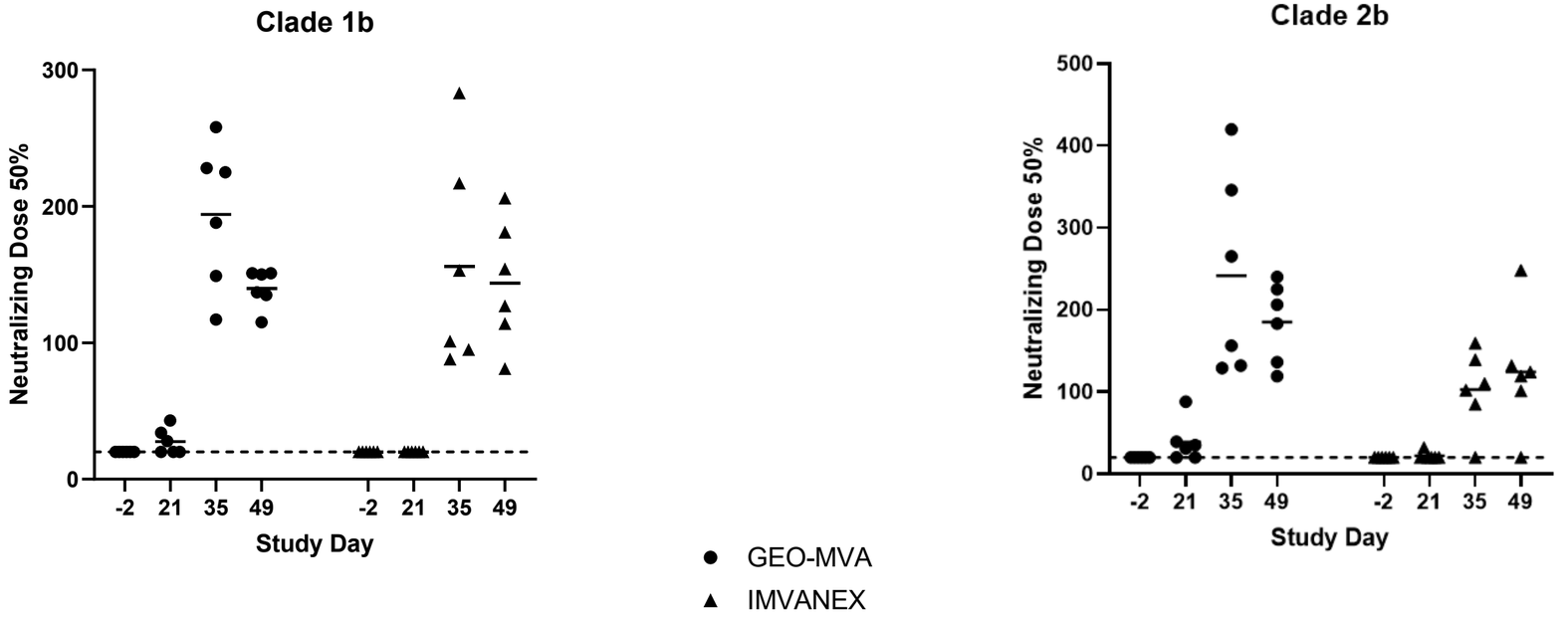
GEO-MVA - A De-Risked Development Program

Genetics	Manufacturing	Regulatory	Clinical
Shared MVA lineage	Similar MVA process	Expedited EMA immune bridging pathway	EMA Ph3 immune bridging pathway
100% Region of Interest (ROI) sequence identity	Same dose & route	Ph1 & Ph2 waived	500 patient design

Supporting Scientific Context

- Established MVA vaccine platform
- Known orthopox immune correlates
- Historical >95% seroconversion

Preclinical Immunogenicity: GEO-MVA vs MVA-BN



Neutralizing antibodies (PRNT assay)

One Commercial Supplier → Significant Unmet Demand

Region / Organization	Estimated Additional Need*
Africa CDC	10M doses
European Preparedness Programs	3M doses
Global Health Agencies (Gavi / UNICEF, etc.)	2M doses
Total Unmet Demand	**15M doses = ~$1.3B**

Vaccine Sales	2025 Est. Market ($ USD)*
Current Vaccine Procurement	$0.7B
Unfulfilled MVA Demand	$1.3B
Total Current Demand	**$2.0B**

Source: global procurement data and outbreak-driven demand estimates

GEO-MVA Positions GeoVax to Expand MVA-vaccine Supply in a Constrained Market

Current Market Is Highly Concentrated

Vaccine	Supplier	Platform	Est. 2025 Sales	Key Limitation
MVA-BN	Bavarian Nordic	Non-replicating MVA	~$500M	Capacity constrained
ACAM2000	Emergent	Replicating vaccinia	~$150M	Safety concerns
LC16m8	KM Biologics	Attenuated vaccinia	~$50M	Limited global supply

~$700M current global procurement market

Significant Unmet Demand Exists

15M doses ($1.3B) of unmet global demand driven by:

- Africa CDC procurement gap
- European stockpile expansion
- Global health agency demand (UNICEF / GAVI)

$1.3B in Unmet Demand - GEO-MVA is Positioned to Supply

Procurement-Driven Commercial Opportunity

Unlike traditional vaccine launches, GEO-MVA is expected to generate revenue through relatively few large government procurement contracts.

Procurement Channel	Typical Contract Size
U.S. BARDA/SNS/DoW	$25M–$200M+
Europe/HERA/Canada	$25M–$100M+
UNICEF/GAVI/Africa CDC	$10M–$100M+

Commercialization resembles government defense procurement more than traditional pharma launch dynamics:

- Large, episodic contracts
- Multi-year supply agreements
- Recurring stockpile replenishment

Projected year 1 procurement revenue: $50M-$100M

Scalable MVA Platform for Infectious Disease Commercialization

MVA Platform Advantages (Infectious Diseases)

- Excellent safety profile; non-replicating in humans
- Large genetic payload enables multi-antigen vaccines
- Clinically validated across Mpox/Smallpox and COVID programs

Why MVA Historically Failed to Scale

- Reliance on chicken embryo fibroblasts (CEFs)
- Fragile, non-scalable supply chain
- Specialized manufacturing infrastructure requirements

GeoVax Breakthrough: Commercial Scale Manufacturing

- Continuous avian cell-line manufacturing eliminates CEF dependence
- Compatible with standard biologics facilities
- Enables domestic, surge-capable production aligned with biodefense needs

GeoVax®

Gedeptin®

(Solid Tumor Therapy)

Gedeptin®: A Gene-Directed Enzyme Prodrug Therapy for Solid Tumors

Gedeptin® Platform

- Gene-directed enzyme prodrug therapy enabling localized tumor cell killing
- Intratumoral delivery minimizes systemic toxicity
- Applicable across multiple needle-accessible solid tumors

Clinical Validation

- Completed Ph 1/2 study in advanced head & neck cancer
- Demonstrated safety & evidence of tumor shrinkage
- Peer-reviewed preclinical data demonstrate enhanced checkpoint inhibitor activity and systemic anti-tumor immunity.
- Orphan Drug Designation in head & neck cancer

Mechanistic Differentiation

- Converts a systemically administered prodrug into a cytotoxic agent *within the tumor*
- Effective in refractory tumors with limited response to standard therapies
- Potential to modulate the tumor microenvironment
- Suitable for combination with standard oncology regimens, including checkpoint inhibitors
- Designed for partner-led development and commercialization

GeoVax®

Gedeptin® Mechanism of Action

Tumor-Targeted Gene Delivery
A therapeutic gene is delivered directly into tumor cells.
Localized, intratumoral administration

Enzyme Expressed Only in Tumor
Tumor cells begin producing a foreign enzyme not found in healthy tissue

Prodrug Activated Inside Tumor
A systemically administered prodrug is converted into a potent toxin only inside the tumor.

Cancer Cell Death + Bystander Effect
Activated drug kills treated cancer cells and neighboring tumor cells

- Tumor-Selective Activation only in gene-expressing tumor cells
- Platform-Agnostic Application across multiple solid tumors
- Human Clinical Ph1/2 evidence of tumor-killing activity
- Combination optionality with Immune Checkpoint Inhibitors

Tumor-selective gene therapy evaluated in solid tumors, with potential applicability across indications and in combination regimens

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Oncology – Next Steps

- **Advance Gedeptin® into Ph 2** in selected, needle-accessible solid tumors (initial focus: head & neck), leveraging orphan designation and prior safety/tumor-shrinkage data
- **Initiate combination strategy development** pairing Gedeptin® with ICIs to enhance inhibitor response
- **Generate partner-ready translational data** (immune activation, tumor microenvironment modulation) to support pharma collaboration discussions
- **Pursue oncology development primarily through strategic partnerships**, minimizing internal capital deployment while retaining platform upside
- **Evaluate non-dilutive funding opportunities** (grants, academic collaborations, foundation support) to offset development costs

Oncology programs are being advanced to value-inflection points through partnerships, preserving upside while maintaining capital discipline

Thank you!!

David Dodd, CEO

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www.geovax.com