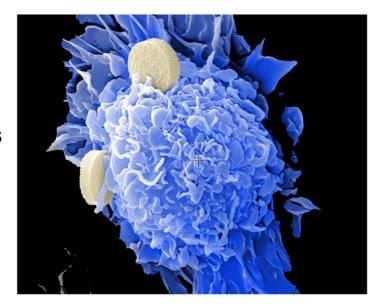


Heat Biologics

Corporate Presentation April 20, 2018





Forward Looking Statements

This presentation includes statements that are, or may be deemed, "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995, as amended. In some cases, these forward-looking statements can be identified by the use of forward-looking terminology, including the terms "believes," "estimates," "anticipates," "expects," "plans," "intends," "may," "could," might," "will," "should," "approximately" or, in each case, their negative or other variations thereon or comparable terminology, although not all forward-looking statements contain these words. They appear in a number of places throughout this presentation and include statements regarding our intentions, beliefs, projections, outlook, analyses or current expectations concerning, among other things, our ongoing and planned discovery and development of drugs targeting cancer, the strength and breadth of our intellectual property, our ongoing and planned preclinical studies and clinical trials, the timing of and our ability to complete clinical trials and make regulatory filings and obtain and maintain regulatory approvals for our product candidates, our ability to partner our product development, the degree of clinical utility of our products, particularly in specific patient populations, expectations regarding clinical trial data, our results of operations, financial condition, liquidity, prospects, growth and strategies, the length of time that we will be able to continue to fund our operating expenses and capital expenditures, our expected financing needs and sources of financing, the industry in which we operate and the trends that may affect the industry or us.

By their nature, forward-looking statements involve risks and uncertainties because they relate to events, competitive dynamics, and healthcare, regulatory and scientific developments and depend on the economic circumstances that may or may not occur in the future or may occur on longer or shorter timelines than anticipated. Although we believe that we have a reasonable basis for each forward-looking statement contained in this presentation, we caution you that forward-looking statements are not guarantees of future performance and that our actual results of operations, financial condition and liquidity, and the development of the industry in which we operate may differ materially from the forward-looking statements contained in this presentation as a result of, among other factors, the factors referenced in the "Risk Factors" section of our Annual Report on Form 10-K for the year ended December 31, 2017 and our quarterly report on Form 10-Q for the subsequent quarters (collectively, our "SEC Filings"). In addition, even if our results of operations, financial condition and liquidity, and the development of the industry in which we operate are consistent with the forward-looking statements contained in this presentation, they may not be predictive of results or developments in future periods. Any forward-looking statements that we make in this presentation speak only as of the date of such statement, and we undertake no obligation to update such statements to reflect events or circumstances after the date of this presentation, excent as required by law.

You should read carefully the factors described in the "Risk Factors" sections of our SEC Filings to better understand the risks and uncertainties inherent in our business.



Free Writing Prospectus Statement

This presentation highlights basic information about us and the offering. Because it is a summary, it does not contain all of the information that you should consider before investing.

We have filed a registration statement (including a preliminary prospectus) with the SEC for the offering to which this presentation relates. The registration statement has not yet become effective. Before you invest, you should read the preliminary prospectus in the registration statement (including the risk factors described therein) and other documents we have filed with the SEC for more complete information about us and the offering.

You may access these documents for free by visiting EDGAR on the SEC Web site at http://www.sec.gov. The preliminary prospectus, dated April 19 2018, is available on the SEC Web site at http://www.sec.gov. Alternatively, we or any underwriter participating in the offering will arrange to send you the prospectus if you contact A.G.P./Alliance Global Partners, offering securities through Euro Pacific Capital, Inc., 590 Madison Avenue, 36th Floor, New York, NY 10022 or via telephone at 212-624-2006 or email: prospectus@allianceg.com.

This presentation shall not constitute an offer to sell, or the solicitation of an offer to buy, nor will there be any sale of these securities in any state or other jurisdiction in which such offer, solicitation or sale would be unlawful prior to the registration or qualification under the securities laws of such state or jurisdiction. The offering will only be made by means of a prospectus pursuant to a registration statement that is filed with the SEC after such registration statement becomes effective.



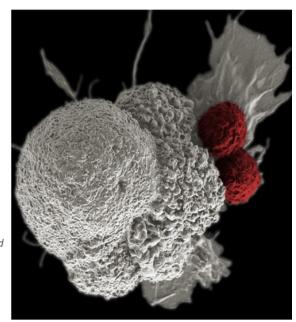
Heat Biologics, Inc.			
Exchange Ticker	NASDAQ: HTBX		
Offering Size	Approximately \$15,000,000 (100% Primary)		
Over Allotment	15% (100% Primary)		
Use of Proceeds	To fund our and our subsidiaries' clinical and preclinical programs and for working capital and general corporate purposes		
Sole Book-Running Manager	A.G.P./ Alliance Global Partners (Offering securities through Euro Pacific Capital Corp)		
Co-Manager	CIM Securities, LLC		



Our Mission

To activate CD8+ "Killer" T-cells to turn "COLD" tumors "HOT"

We seek to combine with checkpoint inhibitors and other immunotherapies to dramatically increase their effectiveness







- > Tumors that have not been subject to robust CD8+ "Killer" T-cell attack
- Biopsied tumors contain minimal CD8+ T-cells

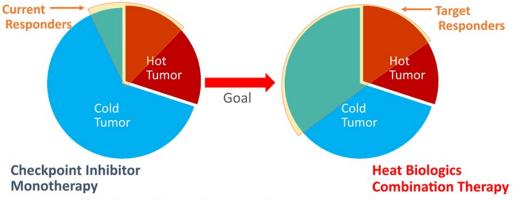
- Tumors that have been subject to robust CD8+ "Killer" T-cell attack
- Biopsied tumors are loaded with CD8+ T-cells

HOT tumors are associated with clinical response



Current NSCLC checkpoint inhibitor treatment Unmet medical need in 2nd line NSCLC

17% - 20% response rate in a PD-L1 unselected population*



Combination therapies can improve patient outcomes

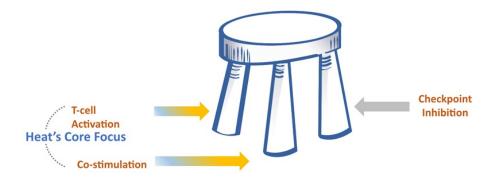
*Borghaei H, et al. NEJM 2015;373:1627-39

*Nishio M, et al. JCO 2015; 33:15_suppl, 8027-8027



Immuno-Oncology Combination Therapy

The three legs of an Immuno-Oncology Stool

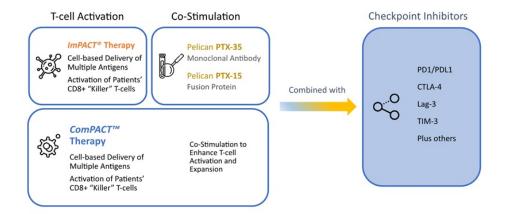


Heat's goal is to dramatically increase the number of patients responding to checkpoint inhibitors



Combination Therapies

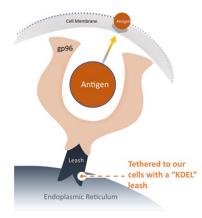
Unlocking the Body's Natural Defenses with a Broad Range of Combination Therapies





Introducing gp96

The Immune System's "Swiss Army Knife"*



"Molecular Warning System"

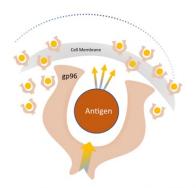
- Natural biological process to deliver proteins (antigens) & gp96 adjuvant to our immune system
- Gp96 "chaperones" newly-created proteins to the cell membrane where they are released and embedded
- Activates a cytotoxic T-cell response to the antigen it is carrying when cells die through necrosis
 - Enables MHC I antigen cross-presentation to CD8+ T-cells
- Gp96 + protein are only naturally released via necrosis
 - Exposure of gp96 outside the cell activates an immune response to the antigen it is carrying
 - Enables MHC I antigen cross-presentation specifically to CD8+ T-cells
- Among the most powerful adjuvants and the only adjuvant to show exclusive specificity to CD8+ ("killer") T-cells
 - Provides long-term immunity against the infectious agent

*Schild, H. & Rammensee, H. Gp-96 – The Immune System's Swiss Army Knife. Nature Immunology 2, 100-101 (2000)



ImPACT Platform

"Severing the Leash"



Heat BiologicsImPACT® technology reprograms cancer cells to continuously secrete their own antigens bound to heat shock protein gp96 to seek out and destroy a variety of tumors

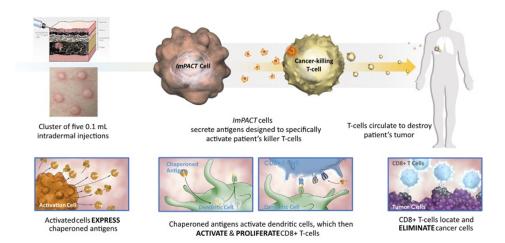
- •Genetically modify tumor cells by "severing the leash" that binds the gp96 to the endoplasmic reticulum of the cell and replacing it with a sequence that pumps gp96 out of the cell
- •Enables living cancer cells to "pump-out" their own surface antigens along with their gp96 chaperone
 - -Mimics necrotic cell death
- •Activates a powerful pan-antigen cytotoxic T-cell immune response



Heat Biologics ImPACT technology removes the leash that binds gp96 to the cell, replacing with a sequence that allows cells to continually secrete gp96 along with their "chaperoned" antigen



ImPACT[®]: Immune Pan-antigen Cytotoxic Therapy

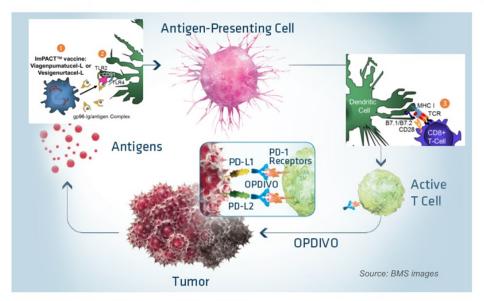


Heat's unique cell-secreted gp96 drives activation of <u>dendritic cells</u> via TLR signaling and <u>CD8+ T cells</u> via antigen cross presentation



ImPACT + Opdivo Combination Therapy

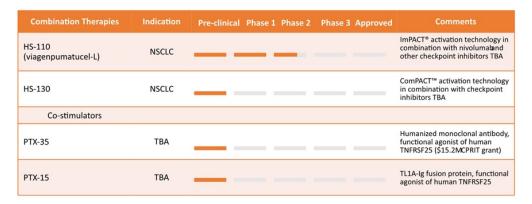
Potential to improve clinical responses and survival, without additional toxicity





Product Pipeline

Combination Therapies Designed to Activate CD8+ T-cells to Fight Cancer



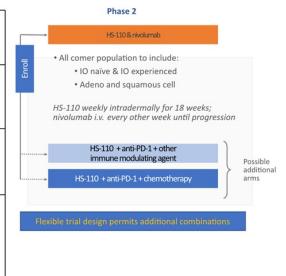
- > Clinical proof of mechanism activating an immune response
- > Activated T-cell immune response seen at 10 weeks
- > T-cell infiltration seen deep inside tumors
- Positive safety profile, to-date



HS-110 (DURGA) Phase 2 Master Protocol: Design

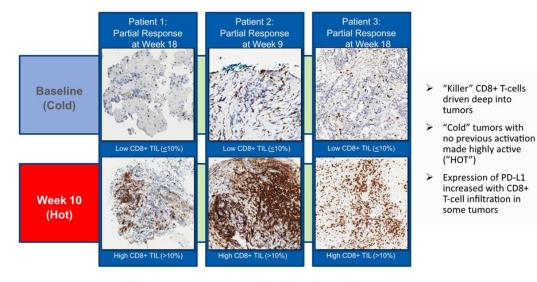
A Phase 1b/2 study of Viagenpumatucel-L (HS-110) in Combination with Multiple Treatment Regimens in Patients with Non-Small Cell Lung Cancer (The "DURGA" Trial)

Objective	 Evaluate objective response rate of HS-110 and anti-PD-1 immune checkpoint inhibitor and other agents 		
4534000000 SIR	• NSCLC		
Patient Population	 Adenocarcinoma and squamous cell carcinoma 		
	• 2 nd line therapy or greater		
Endpoints	 Safety and tolerability, immune response, objective response rate, duration of response, overall survival and progression -free survival 		
Enrollment	● Up to 25 U.S. sites		
	 Up to 120 patients TBD by iDMC 		
	 Partnership with Yale Cancer Center on TIL analysis 		





Clinical Evidence that HS-110 is Turning COLD Tumors HOT



TIL Infiltration Associated with Clinical Response



Pre-Specified Patient Populations Analyzed

ITT (n=35)

The Intent-to-Treat Population includes all patients enrolled into the study



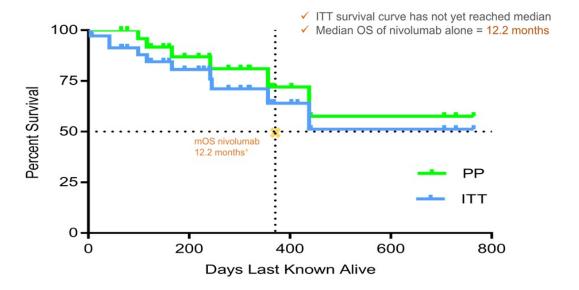
PP (n=26)

The Per Protocol Population includes patients who have received at least 6 doses of HS-110 and a pre/post treatment tumor assessment

- Non-drug related 2 patient deaths (PE and MI)
- 2 AEs discontinuing treatment (Fever and Rash)
- 5 patients with clinical or radiographic progression before completing 6 doses of treatment or post-treatment scan

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HS-110 Overall Survival

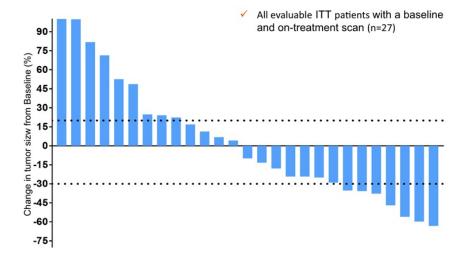


*N Engl J Med 2015; 373: 1627-1639

PP (n=26) is a subset of the ITT population (n=35)



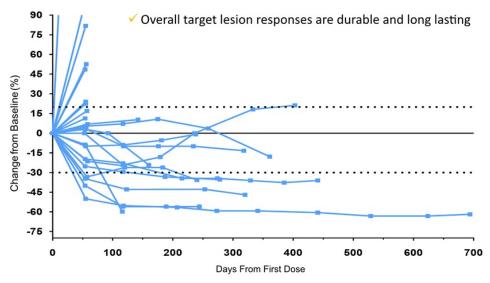
Best Target Lesion Response



All enrolled patients (ITT) with a baseline and on-treatment scan

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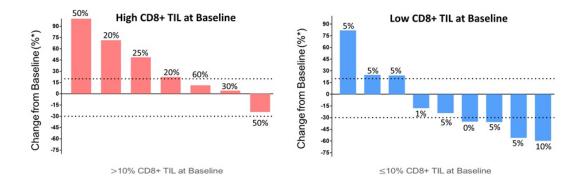
Durability of Target Lesion Response



All enrolled patients (ITT) with a baseline and on-treatment scan

Target Lesion Response Based on Initial CD8+ TIL Status

HS-110 shows effect in "cold tumor" patients who typically do not respond well to PD-1 inhibitors



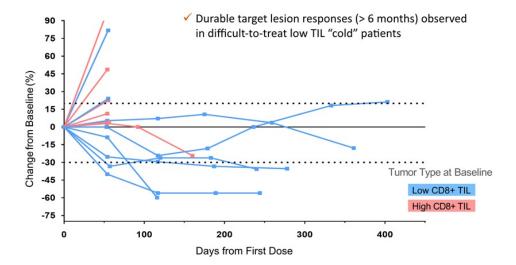
4 of 9 low CD8+ TIL achieved a partial clinical response

* % of CD8+ T-cells in tumor tissue at baseline

CD8+ TIL Evaluable ITT Population



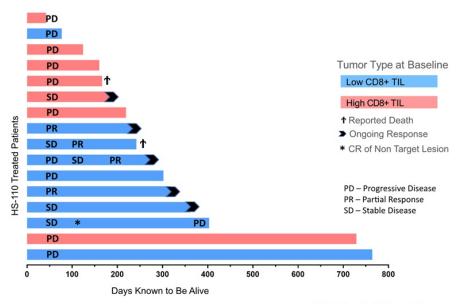
Durable Target Lesion Responses Based on Initial CD8+ TIL Status



CD8+ TIL Evaluable ITT Population



Encouraging Overall Survival Based on CD8+ TIL Status

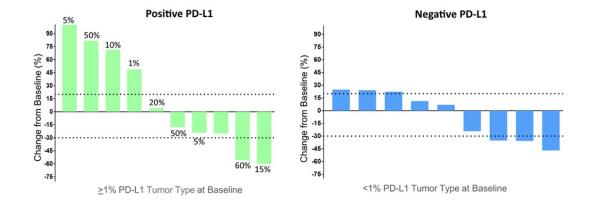


TIL Evaluable ITT Population



Target Lesion Response Based on Initial PD-L1 Status

HS-110 shows effect in low PD-L1 patients who typically do not respond to checkpoint inhibitors

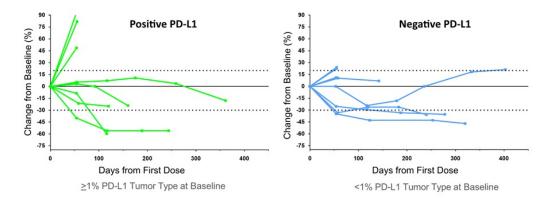


PD-L1 Evaluable ITT Population



Durable Target Lesion Responses Based on Initial PD-L1 Status

Durable target lesion responses observed in difficult-to-treat low PD-L1 patients



PD-L1 Evaluable ITT Population

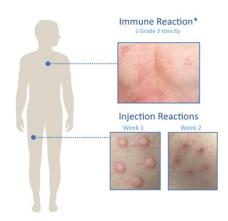


HS-110 Safety Profile to Date

~1,000 HS-110 Doses - No Serious Adverse Reactions

Favorable Safety Profile To Date

- > ~1,000 doses administered to ~100 patients
- Only one patient ended treatment due to a non-serious adverse reaction*
- No systemic use of steroids required to treat reactions
- No serious adverse reactions beyond those seen with standard of care
- > No additive toxicities to standard of care



*Represents the only patient of ~100 patients dosed with HS-110 who discontinued treatment for a study related adverse event



Summary of Phase 2 Interim Data

- Tumor shrinkage and disease control demonstrated in a majority of evaluable patients
 - Overall responses are durable and long lasting
 - > Median overall survival has not yet been reached
- ➤ HS-110 shows effect in difficult-to-treat low TIL and low PD-L1 patients who typically do not respond to checkpoint inhibitors
 - > HS-110 shows durable responses in low TIL "cold tumor" patients
 - ➤ HS-110 shows durable responses in low PD-L1 patients
- A trend of survival benefit is observed with higher ELISPOT activity reflective of tumor antigen-specific immune response



Trial Learnings to Enhance Current Design

ImPACT provides a nurturing tumor antigen-specific T cell environment to support more responsive IO-driven therapy

- ► Enroll patients with low CD8+ TIL
- Enroll earlier in the treatment course or as front-line maintenance therapy
 - Clinical settings that provide maximal time to respond to HS-110
- Explore potential benefits to anti-PD-1 pre-conditioned treatment environment
- Modify current trial to identify and characterize patient population to carry forward to registrational trial

Trial modifications in progress



Heat Biologics Acquires Pelican Therapeutics



Unlocking the Body's Natural Defenses with a Broad Range of Combination Therapies

- Heat acquired 80% controlling interest in Pelican
- Pre-clinical synergy with Heat's ImPACT® and checkpoint therapy
- ➤ \$15.2M grant award from the Cancer Prevention Research Institute of Texas (CPRIT) propels PTX-35 through a ~70-patient, first-in-human clinical program
- PTX-35 is a potential best-in-class, T-cell co-stimulator specific to "killer" CD8+ "memory" T-cells

Pre-clinical studies highlight advantages over competing T-cell co-stimulator programs based on CD8+ T-cell specificity



Only Pelican is targeting TNFRSF25, an emerging target in immuno-oncology

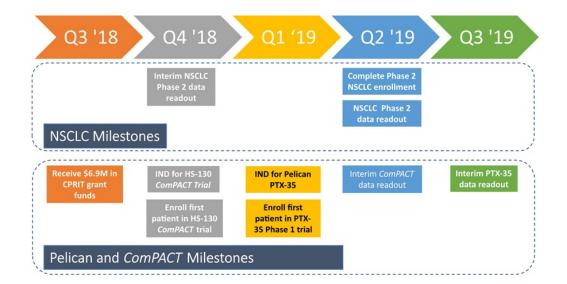


Highlights from Pelican Pre-clinical Studies

- TNFRSF25 is preferentially expressed on CD8+ T-cells compared to other T-cell costimulators
 - > Co-stimulation occurs only in the context of TCR recognition of antigen
 - Drives the development of antigen-specific CD8+ T-cells (mimics TL1A, the specific ligand of TNFRSF25)
- Superior activity is seen with TNFRSF25 in stimulating memory CD8+ cells relative to OX40, 4-1BB and GITR
- Agonism with TNFRSF25 mAb increases:
 - > Effector cytokine function
 - > Effector immune function
 - Survival in mouse models
- TNFRSF25 mAb results in increased survival compared to agonism of OX40, GITR, 4 -1BB with respective agonist mAbs in mouse melanoma models,



Corporate Milestones





Corporate Highlights

Nasdaq **HTBX** Shares Outstanding 5.66M

\$1.22¹

\$7.0M¹

\$9.8M²

Grant Funds \$15.2M

Capitalization table (as of 3.31.2018)	Shares	WAEP	% of Fully Diluted
Common shares outstanding	5,663,919		87.6%
Warrants	310,397	\$14.60	4.8%
Outstanding stock options	426,393	\$12.71	6.6%
Unvested restricted stock	63,287	\$0.00	1.0%
Fully Diluted Shares Outstanding	6,463,996		100%

Closing price as of April 18, 2018
 Reported as of December 31, 2017



Investment Highlights

Potential Best in Class Oncology Treatment - T-cell activating platform (TCAP) produces allogeneic, off-the-shelf therapies designed to activate the immune system to turn immunologically "cold" tumors "hot"

Combination Effect - Our therapies are designed to be administered with checkpoint inhibitors and other immuno-modulators to enhance immune response

Off-the-shelf Therapies - We can administer drug immediately without extracting patient material, simplifying treatment and substantially lowering cost of goods sold

Clinical Data with Checkpoint Inhibitors - Positive interim data from ongoing Phase 2 trial of HS-110 + checkpoint inhibitor in non-small cell lung cancer (NSCLC)

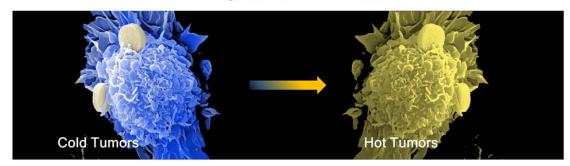
Diverse Technology Platforms - Multiple complementary platform technologies

Strong Management Team - Senior team with broad experience in biotech, pharma, clinical development and research





Turning COLD Tumors HOT





Appendix



Management and Advisors

Management















Jeff Wolf Jeff Hutchins, Ph.D. George Peoples, MD Founder & CEO cso/coo Chief Medical Advisor

Ann Rosar VP of Finance

Janice McCourt VP of Business Devt. VP of Clinical Dev.

Gary Vinson VP of Manufacturing

Scientific Advisors

Robert Levy, Ph.D. Roger Cohen, MD

University of Pennsylvania University of Miami

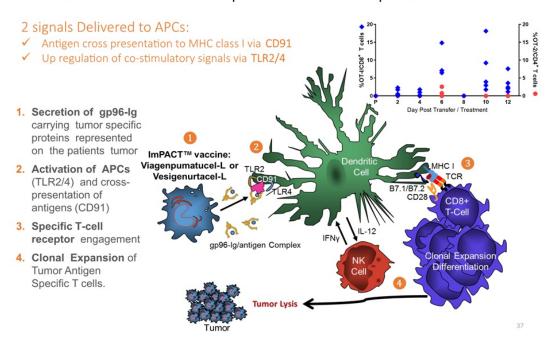
Robert Negrin, MD Llew Keltner, MD, Ph.D.

Stanford University **Epistat**

Anthony Tolcher, MD Gary Acton, MD

Next Oncology Advisor Heat Biologics

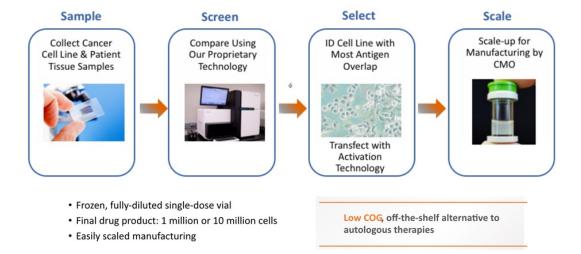
ImPact Generates an Adaptive Immune Response





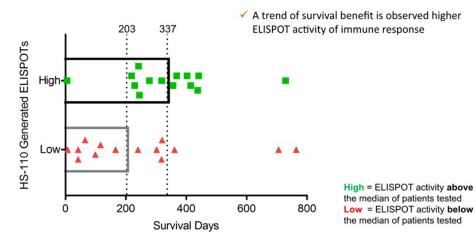
ImPACT® Manufacturing

Robust, Multi-antigen T-cell Activation





ELISPOT Activity and Survival

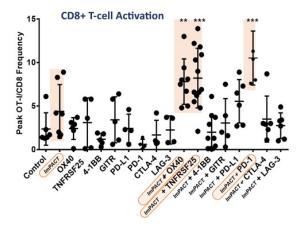


ELISPOT Evaluable ITT Population



Pre-clinical Data

Strong supporting pre-clinical data

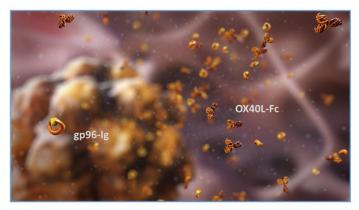


- Higher T-cell responses observed in mice treated with *ImPACT* alone
- ImPACT® boosted CD+ T-cells to even higher levels when combined with co-stimulator agonist antibodies: OX40, TNFRSF25, PD-1
- Findings suggest synergies when combining ImPACT with Pelican's TNFRSF25 antibody

Source: Fromm et al. Society for Immunotherapy of Cancer Annual Meeting, 2016



ComPACT™ Platform Technology

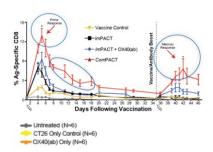


The first potential dual-acting immunotherapy designed to deliver T-cell activation and co-stimulation in a single product – combination therapy without additive costs

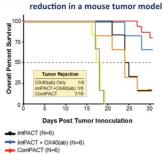


ComPACT™ Outperforms OX40 Monoclonal Antibodies in Pre-clinical Models

Superior primary and memory T-cell response in mouse model



Translates into increased overall survival and tumor

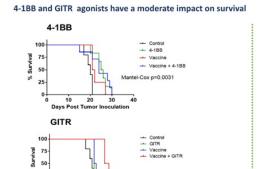


ComPACT generates ~50% complete tumor rejection compared to ~16% with OX40 agonist antibody combinations

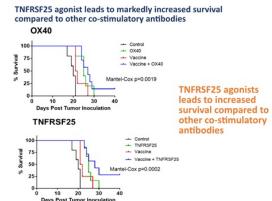


PTX-35 Comparative Pre-clinical Anti-tumor Activity

Activity of agonists TNFRSF25, 4-1BB, OX40 and GITR during nine-day B16-F10 melanoma model





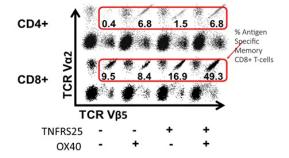




Preferential CD8+ T-cell Induction with TNFRSF25

Pre-clinical studies with murine agonist antibody shows preferential CD8+ T-cell Induction; differentiation from other T-cell co-stimulators

The frequency of antigen-specific memory CD4+ or memory CD8+ T-cells following treatment of mice with *ImPACT™* alone, or in combination with OX40 or TNFRSF25 antibodies



TNFRSF25 preferentially 'boosts' CD8+ T-cell immunity, whereas OX40 is preferential to CD4+ T-cells

Schreiber et al. J Immunol 2012:189(7);3311-8



Emerging Target in T-cell Co-stimulation

Many companies are pursuing co-stimulators with less specificity for CD8+ "memory" activation

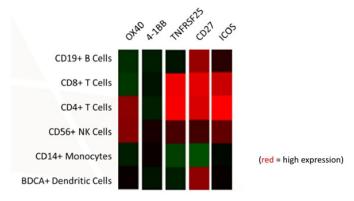
Target	Agonist to Target	Clinical Stage	Company	Comments
2323	PF-05082566 (utomilumab)	Phase 1/2 in solid tumors; Phase 3 with quadruple combination B-cell lymphoma	Pfizer	Phase 3 combination 4-1BB+epigenetic modulator+CD20 mAb and/or chemotherapy in refractory B-cell lymphoma
4-1BB	BMS-663513 (urelumab)	Phase 1/2 in refractory metastatic melanoma	BMS	Combinations with PD-1 inhibitor
CD27	CDX-1127 Anti-CD27	Phase 1/2 combination with checkpoint Pre-clinical	Celldex/BMS Merck/Aduro	Advanced refractory solid tumors; kidney cancer (sunitinab) Shows synergy with checkpoint inhibitors
OX40	MEDI0562 (tavolimab) GSK3174998 INCAGN01949 MOXR0916 PF-04518600 ABBV-368	Phase 1/2 in advanced solid tumors Phase 1/2 in metastatic kidney cancer Phase 1/2 in advanced solid tumors	MedImmune/A Z GSK Incyte Genentech Pfizer AbbVie	Combination with PD-L1 (durvalumab); CTLA-4 (tremelimumab) Combination with PD-1 (keytruda*) in advanced tumors Double/triple combinations: PD-1 and CTLA4; IgG1 Combination with PD-L1 inhibition Combination with Inlyta* (tyrosine kinase inhibitor); NCI and USC collaboration Phase 2 planned in head/neck + nivolumab
GITR	GWN323 INCAGN01876 MED!1873 TRX-518	Phase 1 Phase 1 advanced tumors Phase 1 advanced tumors Phase 1 advanced tumors	Novartis Incyte/Agenus MedImmune/A Z Leap Therapeutics	Advanced tumors/lymphomas: planned combination studies, including PD-1 MOA involves Treg ADCC + co-stimulation Hexameric GITR ligand Fc disabled. Modulates Tregs and T-effector cell ratio
ICOS	JTX-2011	Phase 1/2	Celgene/Jounce	Advanced solid tumors
TNFRSF25	PTX-35	IND filing Q4 2018	Heat-Pelican	Advanced solid tumors

Only Pelican is targeting TNFRSF25, an emerging target in immuno-oncology



Expression of T-cell Co-stimulators

TNFRSF25 is preferentially expressed on CD8+ T-cells compared to other T-cell co-stimulators



Genomics Institute of the Novartis Research Foundation Su et al. PNAS 2004:101(16);6062-7