

Proxy to a person of your choice

Number AGM ticket: _____ Name / Company: _____

Number of shares: _____ First name: _____

Phone number:* _____ E-mail address:* _____

* voluntary information

To be returned **no later than 16 May 2024, 12:00 [midnight] (CEST)**, (receipt) to:

APONTIS PHARMA AG
c/o Better Orange IR & HV AG
Haidelweg 48
81241 Munich
Germany

E-mail: apontis-pharma@linkmarketservices.eu

Note: Proxies may also not attend the Annual General Meeting in person. Please explicitly inform your proxy about the explanations on data protection and the disclosure of personal data.

I/We herewith authorise, if applicable under revoking a former authorisation of a proxy,

First name of proxy *

Last name or Company of proxy *

Street of proxy **

No **

Country **

ZIP Code **

Place of residence of proxy *

E-mail of proxy **

* Mandatory fields

to represent me/us with disclosure of my/our name at the Annual General Meeting of APONTIS PHARMA AG on 17 May 2024 with the power to delegate the authorisation to another person(s) and to exercise my/our voting rights.

**** Recommended data, cf. following note:** After receipt of the power of attorney or the proof of authorisation, individual access data to the password-protected internet service will be created for the proxy. These will be sent directly to the proxy if the address details of the proxy are complete. If the address details of the proxy are incomplete, the individual access data of the proxy to the password-protected internet service shall be transmitted to the grantor of the power of attorney for forwarding to the proxy.

Place Date Signature(s) or Person making the declaration (legible)