

Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to exercise my/our rights at the extraordinary general meeting in Immunovia AB (publ), Reg. No. 556730-4299, on 29 October 2026.

Name of proxy:

Personal identity number:

Address:

Telephone number during
office hours:

Note that the Power of Attorney must be dated and signed.

Name of the shareholder:

Personal identity
number/Reg. No. of the
shareholder:

Place and date:

Signature of the shareholder:

Clarification of signature:

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<https://www.euroclear.com/dam/ESw/Legal/Privacy-notice-bolagsstammor-engelska.pdf>.