## **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 22 January 2026.

Name of proxy:	
Personal identity number:	
Address:	
Telephone number during office hours:	
Note that the Power of Attorne	v must be dated and signed.
Name of the shareholder:	
Name of the shareholder:  Personal identity number/Reg. No. of the shareholder:	
Personal identity number/Reg. No. of the	
Personal identity number/Reg. No. of the shareholder:	

For information on how your personal data is processed, see <a href="https://www.euroclear.com/dam/ESw/Legal/Privacy-notice-bolagsstammor-engelska.pdf">https://www.euroclear.com/dam/ESw/Legal/Privacy-notice-bolagsstammor-engelska.pdf</a>.