



ADXS

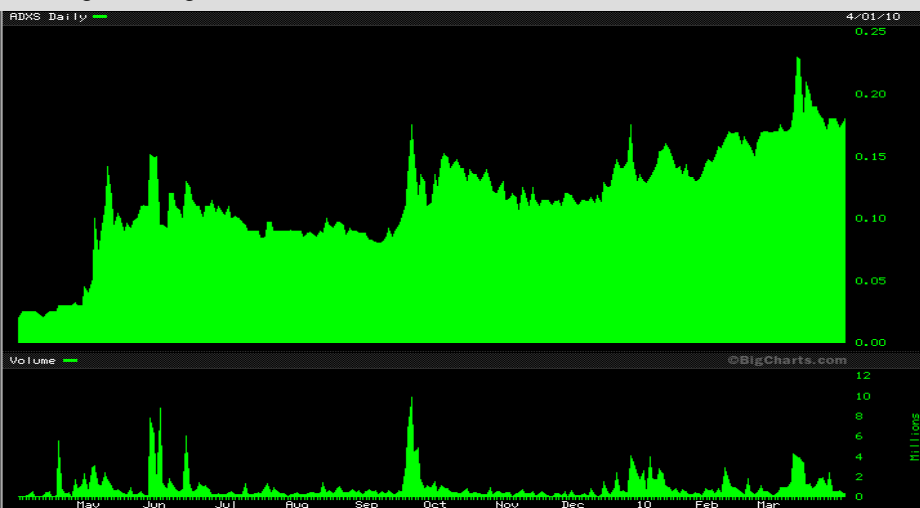
Market Capitalization (\$, M) 22.90
 Average Volume (3-month, M) 1.30
 Shares Outstanding (M) 127.20
 52-Week Hi – Lo (\$) .26 - .02

\$.18

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Advaxis is a biotechnology company developing proprietary, live, attenuated *Listeria monocytogenes* (*Listeria*) immunotherapeutics that deliver bioengineered tumor antigen-adjuvant proteins, which stimulate multiple, simultaneous, immunological mechanisms to fight cancer. The proprietary platform technology was developed by Dr. Yvonne Paterson, professor of microbiology at the University of Pennsylvania and chair of Advaxis' Scientific Advisory Board. The Company has nine (9) distinct, cancer-fighting constructs in various stages of development, directly and through strategic collaborations.



| OVERVIEW | | |
|-----------------------|------|------------|
| (As of 30-March-2010) | | |
| Float | (M) | 112.21 |
| Exchange | | OTCBB |
| 200-Day Moving Ave | (\$) | 0.14 |
| Insider Shares | (%) | 17.25 |
| Fiscal Year | | 31-October |
| Total Cash | (M) | 1.11 |
| Total Debt | (M) | 3.80 |
| Current Ratio | | 0.16 |

| EXECUTIVES | |
|-------------------|--------------------|
| Thomas A. Moore | Chair/CEO |
| Dr. John Rothman | COO |
| Mark J. Rosenblum | CFO |
| Conrad F. Mir | Executive Director |

| BOARD OF DIRECTORS | |
|-----------------------------------|--|
| <u>Thomas A. Moore, Chair/CEO</u> | |
| Richard Berman | |
| Dr. James Patton | |
| Dr. Thomas McKern | |
| Roni A. Appel | |

| SCIENTIFIC ADVISORY BOARD | |
|---|--------------------|
| <u>Yvonne Paterson, PhD Chair/Founder</u> | |
| Carl June, MD | Mark Einstein, MD |
| Pramod Srivastava, PhD | Bennett Lorber, MD |
| David B Weiner, PhD | |

| ANALYST COVERAGE | |
|----------------------|-------------------|
| Stonegate Securities | M. Rodriguez, CFA |

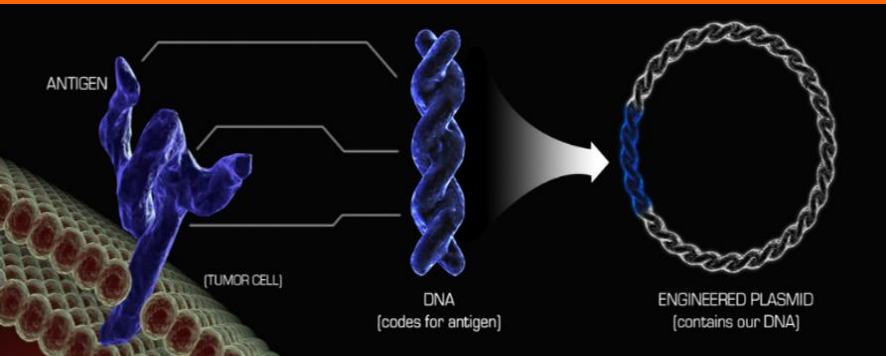
- ### INVESTMENT HIGHLIGHTS
- o Patented immunotherapeutic platform based on the bioengineering and attenuation of a bacterium (*Listeria*) that secretes a tumor-specific antigen *fused* to an LLO- protein, which is delivered in-situ and elicits a comprehensive immune-response
 - o Exclusive licensee of broadly enabling technology platform, which is easy to manufacture and cost competitive
 - o Strategic collaborations with recognized sites of excellence such as the *City of Hope*, the *Roswell Park Cancer Institute*, the *National Cancer Institute*, the University of Pittsburgh and *Cancer Research – UK*

- ### INVESTMENT HIGHLIGHTS
- o 03/25/2010 Advaxis to Present at the 6th Annual Spring Growth Stock Conference
 - o 03/22/2010 Advaxis Immunotherapeutic ADXS11-001 Phase 1 Survival Data Extended
 - o 03/18/2010 Advaxis Research In ActA Shows Therapeutic Anti-Cancer Response
 - o 03/17/2010 Advaxis Schedules Annual General Meeting
 - o 03/11/2010 Advaxis Develops Room Temperature Formulation of ADXS11-001

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LISTERIA PLATFORM MECHANICS



Stage 1: A plasmid is created containing a gene for a specific tumor antigen fusion protein that will target one or more cancers.

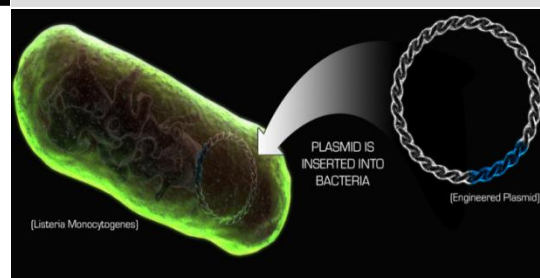
Stage 2: About a dozen or so bioengineered plasmids are inserted into an attenuated *Listeria* bacterium.

Stage 3: Patient is given 3 doses of the bacteria-based immunotherapeutic system one month apart.

Stage 4: Immune system takes the antigen and directs a comprehensive immunoresponse developed for *Listeria* against the tumor.

Results:

- ✓ an immediate, simultaneous, robust innate and adaptive immune response
- ✓ rapid and prolonged **immune memory**
- ✓ increase in intratumoral cytotoxic T-cells BUT reduction of regulatory T-cells, MDSC



CANCER INDUSTRY

Cancer is the second largest cause of death in the United States, exceeded only by heart disease. The cost of treating cancer patients in 2007 is estimated to be \$219.2 billion in healthcare costs and another \$18.2 billion in indirect costs resulting from morbidity and lost productivity (Source: Facts & Figures 2008, American Cancer Society).

The NIH estimates the overall cost for cancer in the year 2005 at \$209.9 billion: \$74.06 billion for direct medical costs, \$17.5 billion for indirect morbidity costs (loss of productivity due to illness) and \$118.4 billion for indirect mortality costs (cost of lost productivity due to premature death). (Source: Cancer Facts & Figures 2006, American Cancer Society).

The incidence of newly diagnosed cervical cancer in the US in 2007 was 11,070 (ibid) and numbers for newly diagnosed cervical dysplasia (CIN) was about 250,000 patients per year based on 3.5 million abnormal Pap smears. (Source: Jones HW, Cancer 1995:76:1914-18; Jones BA and Davey, Arch Pathol Lab Med 2000; 124:672-81).

PIPELINE

| VACCINES | INDICATION | PRE-CLINICAL | PHASE I | PHASE II | PHASE III | | |
|-------------|--|---|---------|----------|-----------|--|---|
| ADXS 11-001 | HPV related cancer (cervix,CIN, head & neck) | [Progress bar spanning Pre-clinical, Phase I, and Phase II] | | | | | 1 CIN & 2 cervix studies to start 2009 (1 with GOG/ NCI), |
| ADXS31-142 | Prostate | [Progress bar spanning Pre-clinical and Phase I] | | | | | Phase 1 in planning |
| ADXS31-164 | Breast | [Progress bar spanning Pre-clinical and Phase I] | | | | | Phase 1 in planning |