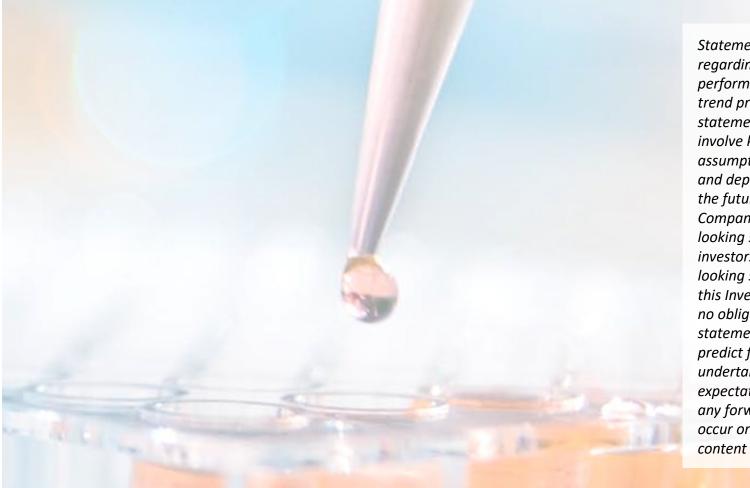


We want to save patients with severe cancer and autoimmune diseases Clinical investigations with our lead antibody CAN04 to our proprietary target

> Göran Forsberg, CEO NOVEMBER 2020

Safe Harbour Statement



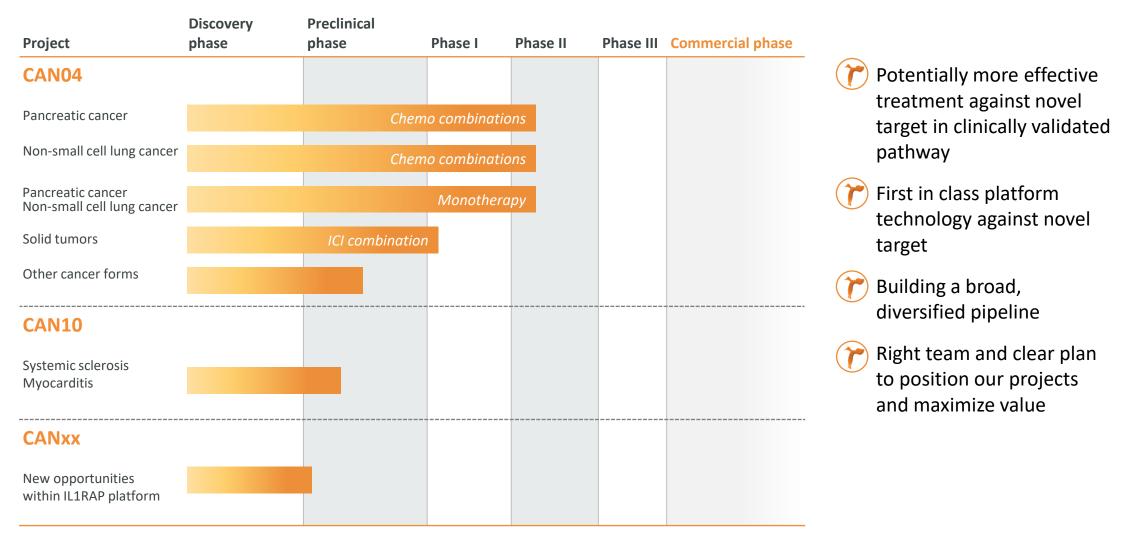
Statements in the Investor Presentation, including those regarding the possible or assumed future or other performance of the Company or its industry or other trend projections, constitute forward-looking statements. By their nature, forward-looking statements involve known and unknown risks, uncertainties, assumptions and other factors as they relate to events and depend on circumstances that will or may occur in the future, whether or not outside the control of the Company. No assurance is given that such forwardlooking statements will prove to be correct. Prospective investors should not place undue reliance on forwardlooking statements. They speak only as at the date of this Investor Presentation and the Company undertakes no obligation to update these forward-looking statements. Past performance does not guarantee or predict future performance. Moreover, the Company undertakes no obligation to review, update or confirm expectations or estimates or to release any revisions to any forward-looking statements to reflect events that occur or circumstances that arise in relation to the content of the Investor Presentation.





I. INTRODUCTION

Cantargia – Opportunity to save lives and create value





Cantargia highlights



UNIQUE IMMUNOTHERAPY ANTIBODY CAN04 IN PHASE IIA CLINICAL DEVELOPMENT

• Positive interim data set - response rates higher than historical control



PLATFORM WITH MANY POTENTIAL THERAPEUTIC AREAS

- Target IL1RAP found on most solid tumor forms and leukemia
- IL1RAP signalling (IL-1, IL-33 and IL-36) in large number of diseases



VISION OF BECOMING AN IMPORTANT PART IN FUTURE CANCER TREATMENTS

• Combination strategy based on synergies with established therapies



HIGHLY RELEVANT RESEARCH WITHIN CLINICALLY VALIDATED MECHANISMS

Focus on opportunities with major unmet medical need



ROBUST PATENT PORTFOLIO

 Global patent families on IL1RAP as antibody target in oncology until 2032 and CAN04 until 2035



NASDAQ STOCKHOLM'S MAIN LIST >8,000 SHAREHOLDERS AND LONG TERM INVESTORS

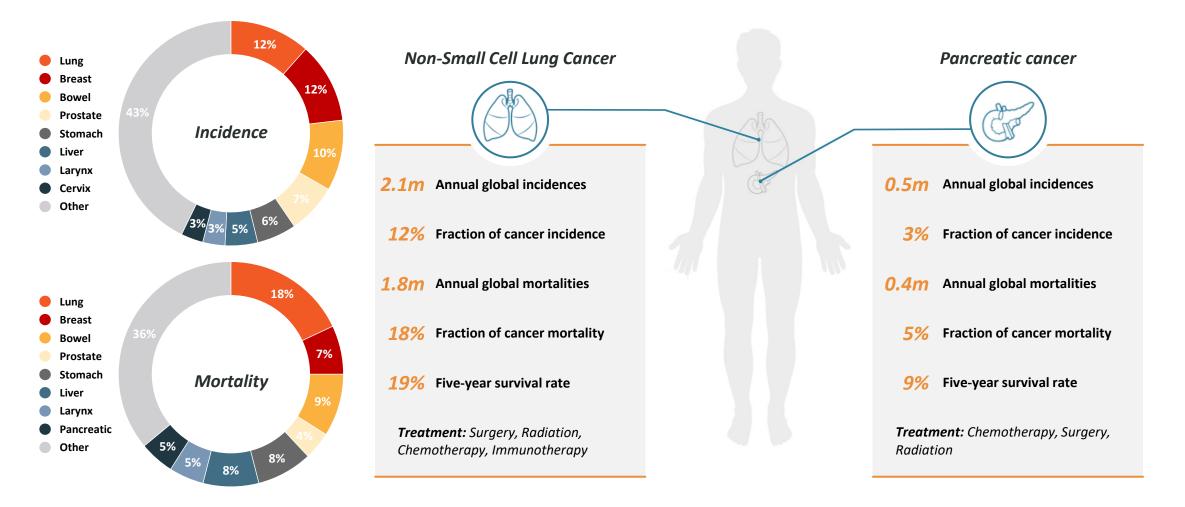
- Market cap: SEK 6.1bn (USD ~710m) (19 Nov-20)
- Cash: SEK 417m (USD 48m) (30 Sep-20)

Current owners (30 Sep 2020)

Swedbank Robur Funds	9.6%
4th AP fund	7.7%
Alecta	6.6%
1st AP fund	6.3%
Öhman Bank S.A.	5.0%
Avanza Pension	4.4%
Sunstone	3.8%
Handelsbanken fonder	3.8%
Morgan Stanley (HBM)	2.5%
SEB S.A. (Nordic Cross)	1.9%
Others	48.3%



Cantargia addresses NSCLC & PDAC



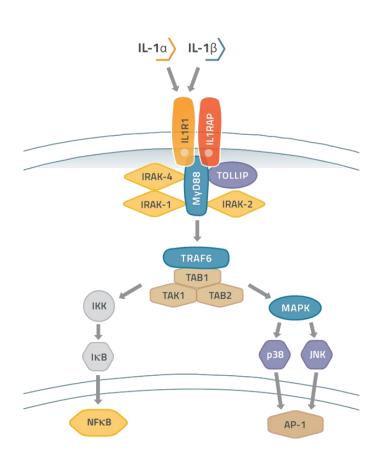
SIGNIFICANT UNMET NEEDS IN LUNG AND PANCREATIC CANCER





II. LEAD ANTIBODY CAN04

CAN04 – Superior IL-1 blocking approach

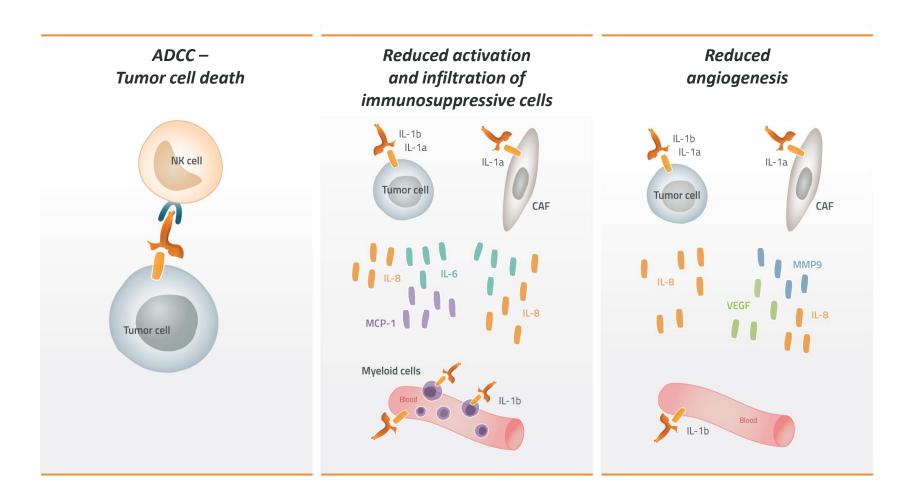


Company	Compound	IL-1α	IL-1β	ADCC	Indication/dev phase
Cantargia	CAN04	++	++	++	Pancreatic cancer, NSCLC phase IIa
Xbiotech/ Janssen	Xilonix	++	-	+	 Autoimmunity, dermatology Pancreatic cancer, phase I
Novartis	Canakinumab Gevokizumab	-	++	-	 Autoimmunity, registered NSCLC, phase III Cancer comb, phase II
Flame Bioscience	FL-101	-	++	-	• NSCLC
Buzzard	Isunakinra	++	++	-	Cancer phase I
SOBI	Kineret	++	++	-	• Autoimmunity, reg
Regeneron/ Kiniksa	Rilonacept	++	++	-	Autoimmunity, regPericarditis
IP - IL1RAP AS TARG HEMATOLOGICAL C/		IP - IL1RAP A SOLID TUMO	AS TARGET FO	DR	IP - PRODUCT CANDIDATE CAN04
 Two families Valid until 2029/ Granted (EPO, U China) 		 Valid unti Granted (China) 	il 2032 (EPO ¹ , Japar	ı, USA,	 Valid until 2035 Granted (EPO, USA, China)

CANTARGIA HAS STRONG IP AND SUPERIOR MOA IN CAN04

CAN04 – Mechanism of action

9



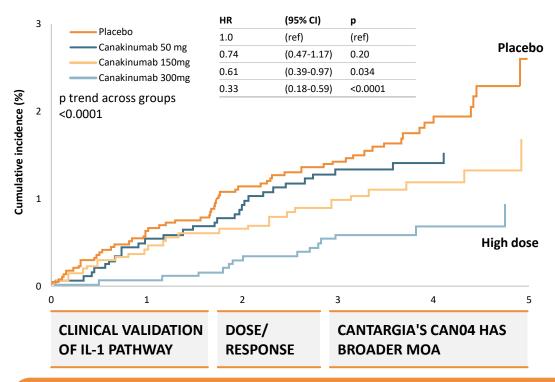


Counteracting tumor inflammation (IL-1 pathway)

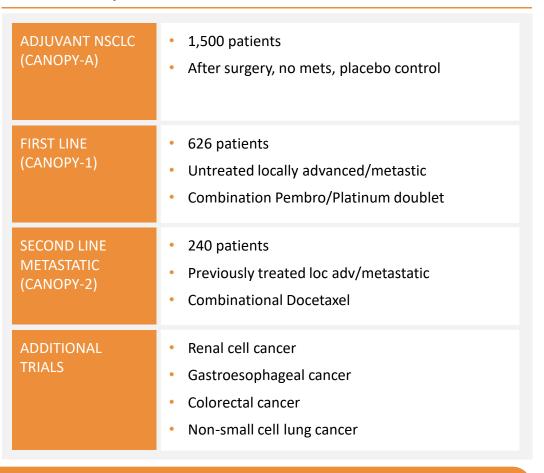
- validated in 10.000 patient study

Cantos trial (n=10,061)

- Canakinumab (Novartis)
- Reduced lung cancer incidence by 67% and death by 77%
- Reduced non-lung cancer death by 37%



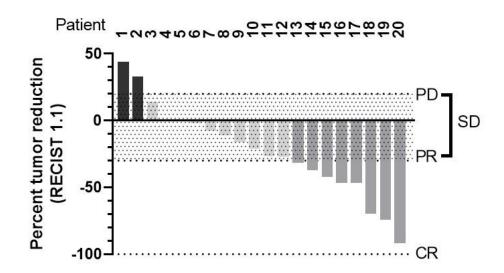
Canakinumab phase iii trials



CANTOS DATA SUPPORT CAN04 AS WELL AS BROADER IL1RAP PLATFORM ACTIVITIES

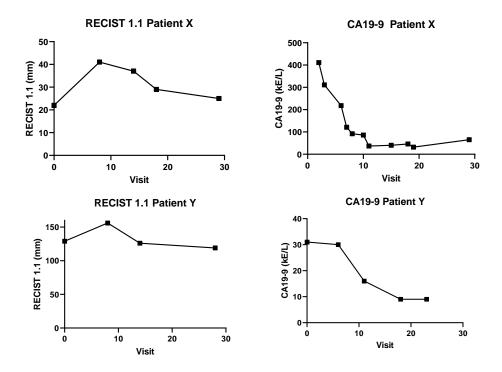


Positive interim data-pancreatic cancer



- \rightarrow CAN04 combination with gemcitabine/abraxane in 1st line PDAC
- → 8 out of 20 evaluable patients with metastatic PDAC showed response (40% vs historical control data 23%). Two responses durable for 12 months
- → No major side effects were observed apart from those expected with chemotherapy or CAN04 alone. Neutropenia frequency higher than expected from chemo (treated with dose reductions/GCSF), fatigue and neuropathy lower than expected

FULLY RECRUITED -31 PATIENTS FOR PRIMARY ANALYSIS EXTENSION PHASE IN 20–40 PATIENTS TO STUDY DOSE/RESPONSE PREPARATIONS FOR LATE STAGE DEVELOPMENT INITIATED

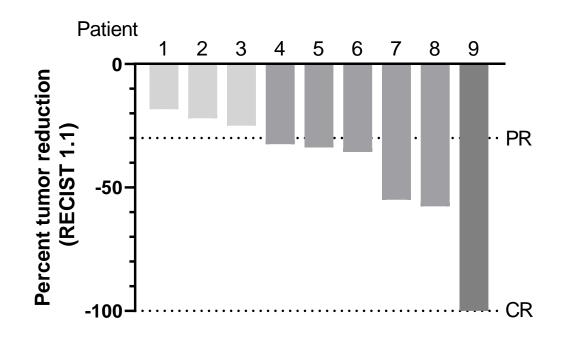


- Two patients had tumor shrinkage of 39% and 24% after initial PD.
 Both recorded as SD
- → CA19-9 decreased by 92% and 71%. CA19-9 is a biomarker for tumor burden

NOTABLE RESPONSE PROFILE DEVIATING FROM CHEMO ALONE SUGGEST ADDITIONAL EFFECT FROM CAN04



Tumor shrinkage – NSCLC combination



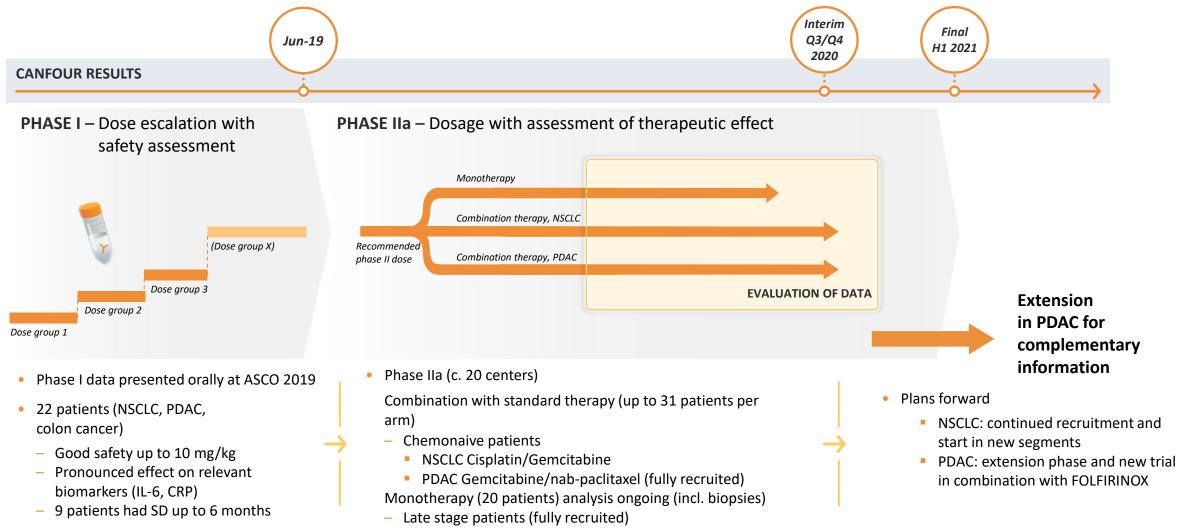
- \rightarrow CAN04 in combination with gem/cis in 1st line chemotherapy
- 6 of 9 evaluable patients with metastatic non-small cell lung cancer (NSCLC) showed objective response including 1 complete response (67% vs historical control data 22–28%)
- \rightarrow The complete response has lasted more than 1 year
- 5 patients were second line to pembrolizumab monotherapy,
 4 patients first line
- → No major side effects observed except those from chemotherapy or CAN04 alone. Neutropenia frequency higher than expected from chemo (treated with dose reductions/GCSF)



POSITIVE INTERIM DATA, RECRUITMENT CONTINUE FOR PRIMARY ANALYSIS BROADENING OF NSCLC DEVELOPMENT INTO ADDITIONAL MARKET SEGMENTS



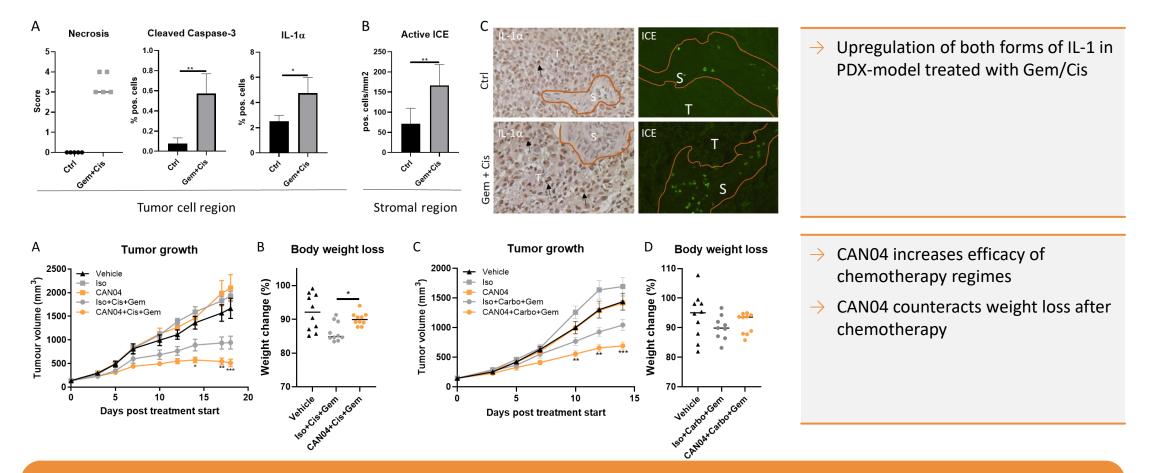
CAN04 – CANFOUR clinical trial



GENERATION OF DATA INSTRUMENTAL FOR NEXT PHASE OF DEVELOPMENT

eigentargia

Targeting IL1RAP allows unique synergistic effects with chemotherapy (AACR 2020)

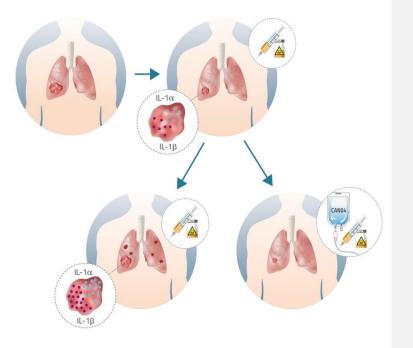


SYNERGY WITH CHEMOTHERAPY IN LINE WITH CURRENT DEVELOPMENT STRATEGY



Chemotherapy resistance

- $\rightarrow\,$ Most chemotherapies induce chemoresistance already after a few months of therapy
- $\rightarrow~$ Chemotherapy can upregulate both IL-1 α and IL-1 β
- \rightarrow Blocking IL-1 signalling counteracts chemoresistance in preclinical models
- → High blood levels of inflammatory cytokines IL-1 and IL-6 leads to poor gemcitabine efficacy in patients
- ightarrow IL-1 mediated chemoresistance for several classes of chemotherapy
 - Platinum based chemotherapy, 5FU, Gemcitabine



SEVERAL LINES OF EVIDENCE SUGGEST CAN04 COUNTERACT CHEMORESISTANCE

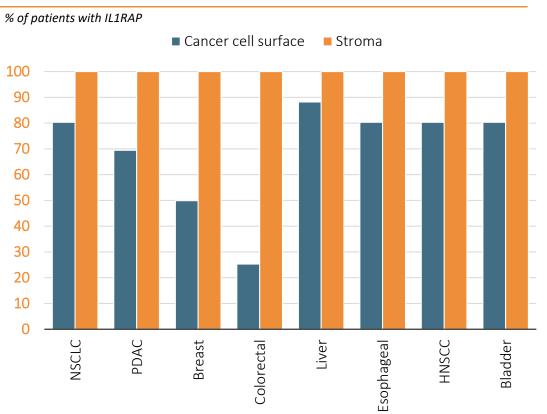




III. CAN04 ONCOLOGY EXPANSION AND NEXT STEPS

IL1RAP in several cancer with high medical need

IL1RAP



CANTARGIA FOUNDATION Discovery of IL1RAP on cancer cells Antibodies against IL1RAP – antitumor effects IP on antibody therapy against IL1RAP PRIMARY INDICATIONS Non-small cell lung cancer – NSCLC Pancreatic cancer – PDAC

- → Biomarker studies ongoing, identify patients most likely to respond
- → Opportunity to expand development in additional cancer forms with high unmet medical need

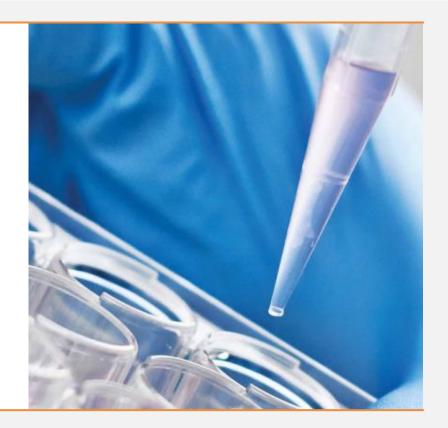
CAN04 DEVELOPMENT CAN BE EXPANDED TO ADDITIONAL INDICATIONS ONWARDS



US Phase I clinical trial

ightarrow First patient started

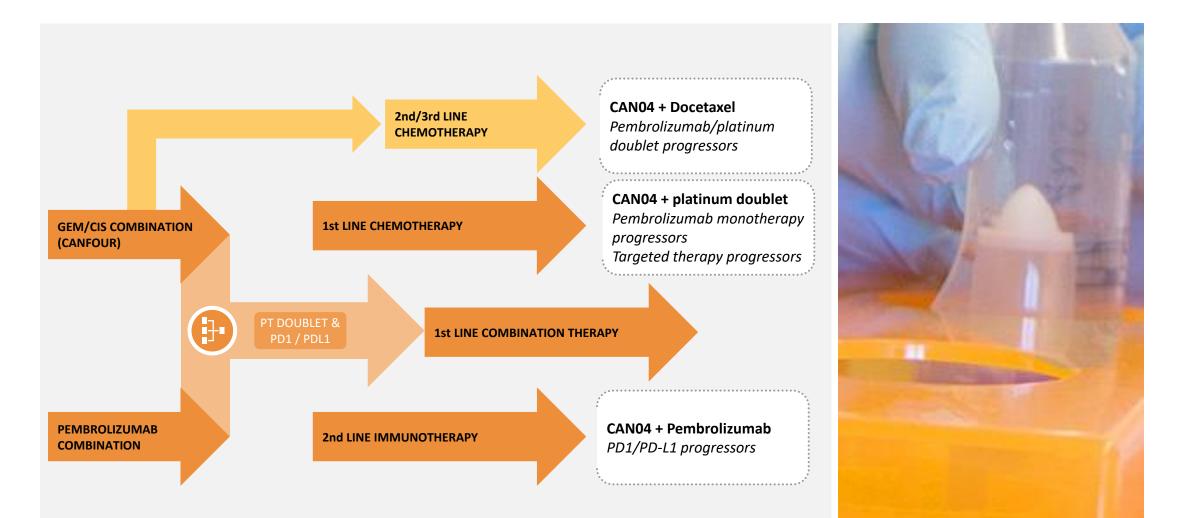
- → Combination with checkpoint inhibitor in patients no longer responding to PD1/PDL-1 therapy
- \rightarrow Primary endpoint safety, secondary endpoints include biomarkers and efficacy
- → Indications include NSCLC, HNSCC, malignant melanoma and bladder cancer (18 patients)
- ightarrow Strong US centers, Coord investigator Prof Roger Cohen, UPenn
- → https://clinicaltrials.gov/ct2/show/NCT04452214



TRIAL DESIGNED TO ADVANCE CAN04 OUTSIDE CHEMOTHERAPY COMBINATIONS IMPORTANT STEP FOR COMBINING CAN04 WITH IO AND CHEMOTHERAPY



CAN04 – NSCLC cancer strategy



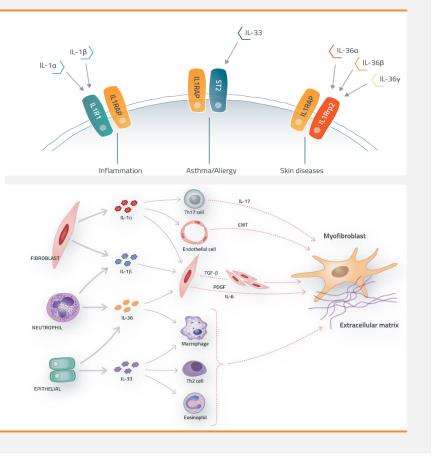




IV. UNTAPPED POSSIBILITIES IN AUTOIMMUNE DISEASES

CAN10 – New development project

- ightarrow IL1RAP binding antibody potently blocking IL-1, IL-33 and IL-36
- \rightarrow Unique anti-inflammatory activity observed in mouse model
- → Development focusing on unmet medical need in systemic sclerosis and myocarditis. Disease selection in collaboration with experts based on scientific rational, medical need, development opportunity and competition
- \rightarrow Clinical trials start early 2022



UNIQUE OPPORTUNITY FOR CAN10 IDENTIFIED IN LIFE-THREATENING DISEASES



CAN10 – Systemic sclerosis and myocarditis

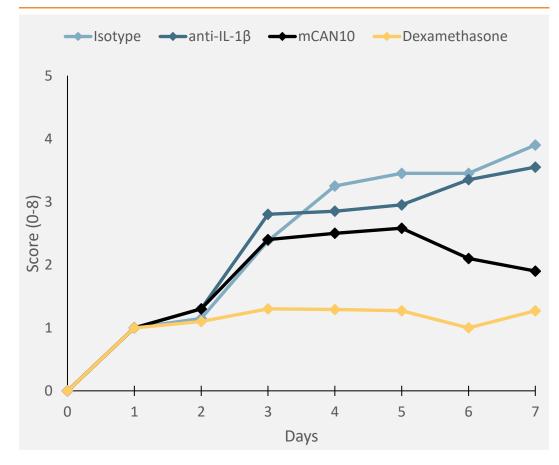
CAN10 METHOD	 → Development process of CAN10 has included independent analysis of potential to treat c. 150 autoimmune and inflammatory diseases → Analysis included statements from key opinion leaders regarding e.g. scientific rationale of the blockade of three inflammatory cytokines, medical need, development opportunities and competition 						
CAN10 FOCUS	Systemic sclerosis Chronic, autoimmune connective tissue disorder characterized by inflammation and fibrosis of the skin and internal organs (e.g., lungs, kidneys, heart, and gastrointestinal tract) The estimated annual incidence is about 4.5 per 100,000 in North America and 1.8 per 100,000 in Europe The leading cause of death – interstitial lung disease and the unmet need is in particularly high in these patients 						
	Myocarditis → Inflammation of muscular tissues of the heart that arise from different etiologies, including genetic and infectious mechanisms that are not well characterized → Characterized by initial acute inflammation that can progress to subacute and chronic stages resulting in tissue remodeling, fibrosis, and loss of myocardium architecture and contractile function → The estimated incidence of myocarditis is approximately 22 per 100,000 and the disease accounts for approximately 0.6 per 100,000 deaths annually worldwide						



CAN10 FOCUSED ON MAJOR UNMET MEDICAL NEED

CAN10 counteract inflammation in disease model

Total back score



- → Mechanistic proof of concept for IL1RAP blockade in inflammatory driven psoriasis model
- ightarrow Effect not dependent on IL-1 β blockade

CAN10 HAS UNIQUE ANTI-INFLAMMATORY PROPERTIES





V. MILESTONES AND SUMMARY

Cantargia has several near-term value inflection points

Newsflow next 6–9 months

CAN04

- ightarrow Phase IIa combination results PDAC and NSCLC
- ightarrow Next steps combination therapy PDAC and NSCLC
- \rightarrow Phase IIa biomarker/biopsy results
- → New clinical trial in disease/combination outside CANFOUR

CAN10

- \rightarrow Preclinical progress
- \rightarrow Production development



SIGNIFICANT DATA TO SECURE NEWSFLOW



Cantargia highlights

 $\widehat{\Sigma}$

UNIQUE IMMUNOTHERAPY ANTIBODY CAN04 IN PHASE IIA CLINICAL DEVELOPMENT

Positive interim data set and further phase II milestones during 2020



PLATFORM WITH MANY POTENTIAL THERAPEUTIC AREAS

• Cancer and large number of autoimmune/inflammatory diseases



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Focus on opportunities with major unmet medical need



ROBUST PATENT PORTFOLIO – GRANTED IP FOR THERAPEUTIC TARGET IL1RAP AND CAN04

Global patent families – antibody target in oncology (2032) and CAN04 (2035)



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