

We want to save patients with severe cancer and autoimmune diseases Entering clinical phase with our lead antibody CAN04 to our proprietary target

Göran Forsberg, CEO

Safe Harbour Statement

The following presentation may include predictions, estimates or other information that might be considered forward-looking. The statements regarding the surrounding world and future circumstances in this presentation reflect Cantargia's current thinking with respect to future events and financial performance. Prospective statements only express the assessments and assumptions the company makes at the time of the presentation. These statements are wellconsidered, but the audience should note that, as with all prospective assessments, they are associated with risks and uncertainties.



CANTOS IL-1ß blockade - Recent strong clinical data

CANTOS trial

- Canakinumab (Novartis)
- 10 061 patients
- Designed to reduce cardiovascular events in patients with previous myocardial infarction
- Reduced lung cancer incidence by 67 % and death by 77 %.
- Clinical validation of IL-1 pathway
- Novartis to start 3 phase trials in NSCLC
- Cantargia's CAN04 has higher potential than Canakinumab

CANTOS: Additional Non-Cardiovascular Clinical Benefits Incident Lung Cancer





CANTOS additional findings

CANCER decreased risk of death with treatment (high dose)					
Lung cancer	77 %	P=0.0002			
Non-lung cancer	37 %	P=0.06			
Decreased incidence of inflammatory disease (all doses)					
Arthritis	32%	p<0.0001			
Ostheoartritis	28%	P=0.0005			
Gout	53%	p<0.0001			
Biomarker levels (reduction)					
CRP	26-41%	P<0.0001			
IL-6	25-43%	P<0.001			



CAN04 vs Canakinumab



Canakinumab

 Antibody directed against one of the two IL-1 ligands, IL-1β

CAN04:

- Binds the common signaling
 receptor and counteracts both
 ligands
- Induce killing via the immune system (ADCC)

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Medical need and IL1RAP



- Based on in house data, external data, medical need and market size, NSCLC and pancreatic cancer are primary indications.
- Biomarker studies ongoing, to identify patients most likely to respond
- Low levels of IL1RAP in normal tissue (analyzed following FDA and EMA guidelines)

Size of each indication corresponds to annual deaths in USA



Cantargia at a glance

- Specialized in antibody therapy/immunology, with initial focus on oncology
- Granted IP around therapeutic target and drug candidate
- Lead antibody CAN04 in clinical development
- Strong management team with proven track record in clinical development and business development
- IPO March 2015 (Nasdaq First North, Stockholm), preparations for listing on main market ongoing
- More than 3000 shareholders
- Based in Lund, Sweden
- New share issue of 232 MSEK Dec 15 2017

Financial highlights

- Share price: 8.04 SEK (0.98 USD), Mar 16, 2018
- Market cap: 532 MSEK (64.8 MUSD), Mar 16, 2018
- Cash: 269.8 MSEK (32.7 MUSD), Dec 31 2017

Current owners (Mar 2, 2018)

Sunstone	9.0%	
1st AP fund	6.9%	
Avanza Pension	6.4%	
4th AP fund	4.2%	
SEB S.A. clients	3.4%	
2nd AP fund	3.3%	
Tibia konsult	2.1%	
Mats Invest AB	2.0%	
Kudu AB	1.9 %	
Brushamn Invest	1.9%	
Nordnet Pension	1.6%	
SHB Pharm Fund	1.5%	
Others	55.9%	



Cantargia pipeline





Tumor inflammation – key to cancer progression





Non-small cell lung cancer (NSCLC)



NormalCancer

Herfs et.al, Proinflammatory Cytokines Induce Bronchial Hyperplasia and Squamous Metaplasia in Smokers, Am J Respir Cell Mol Biol 2012



CAN04 - immuno-oncology mechanism with antitumor effect



- Antitumor effects in NSCLC PDX models
- CAN04 stimulates immune cells to infiltrate tumor



Cantargia - Press release March 15, 2018

.30 AM CET / 15-Mar-2018 / Cantargia AB (SEMM:CANTA

Cantargia presents new data at AACR on inhibition of metastasis by antibodies against IL1RAP.

Cantargia AB ("Cantargia") today announces that data on the anti-metastatic properties of an antibody against interleukin 1 receptor accessory protein (IL1RAP) has been selected for poster presentation at the 2018 Annual Meeting of the American Association for Cancer Research, April 14-18 in Chicago.

The poster "Antibody blockade of IL1RAP signaling reduces metastasis in a breast cancer model" by David Liberg, Per-Ola Önnervik, Matteo Riva, Liselotte Larsson, Göran Forsberg and Karin von Wachenfeldt will be presented at 08.00 local time on April 16, 2018 in the session "Therapeutic Antibodies, Including Engineered Antibodies 1". The abstract is available at <u>www.abstractsonline.com/pp8/#!/4562/presentation/8455</u>. The data show that targeting of IL1RAP with an antibody can, in addition to induce killing of tumor cells and blocking their response to IL-1, also inhibit metastasis by affecting the tumor microenvironment. In parallel to the presentation, the poster will also be published on <u>www.cantargia.com</u>.



Inflammation and metastasis

- Cancer cells (seeds) needs a good soil to form a metastasis
- The IL-1 system (inflammation) can provide such environment (soil)
- Cantargia antibody block metastases (to be presented at American Association of Cancer Research April 16)



A tumor can create its own "seed and soil"



Targeting inflammatory cells and microenvironment – opportunity to treat more patients





CAN04 – CANFOUR clinical trial

- Phase I/IIa trial NSCLC and pancreatic cancer
 - Recruitment in Norway, Denmark Netherlands and Belgium
 - Well renowned centres (Jules Bordet, Brussels; Erasmus Rotterdam, NKI, Amsterdam; Rigshospitalet, Copenhagen; Radiumhospitalet, Oslo)
 - Dose group 1, safety evaluation completed
 - Phase I: carried out in NSCLC, pancreatic cancer, colon cancer, triple negative breast cancer
 - Phase IIa: focused on NSCLC and pancreatic cancer
 - Monotherapy
 - Combination with existing therapy



IL1RAP - additional potential indications to leverage the value of our asset

- Three different systems signal through IL1RAP
- These systems contribute to various inflammatory diseases
- Can be blocked by Cantargia's antibodies against IL1RAP



Cantargia partnership with Panorama Res Inc (Sunnyvale, CA) Selection of clinical candidate 2019



Significant value inflection points ahead

2018

- Preclinical data on combination therapy
- Clinical progress
- Preclinical studies
- Phase I clinical data (summer 2018)
- Initiation of Phase IIa portion of the clinical trial (summer 2018)
- US regulatory and clinical strategy
- Application for listing on main market



Lead project CAN04 in the highest growth segment– Oncology antibodies



World's most sold cancer drugs are antibodies 2017 (2016)

Immuno-oncology driving market growth 2017 (2016)

Rituxan/MabThera	\$7.87bn	(\$8.58bn)
Avastin	\$7.13bn	(\$6.75bn)
Herceptin	\$7.47bn	(\$6.75bn)

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7.47bn	(\$6.75bn)

Opdivo	\$4.95bn	(\$3.77bn)
Keytruda	\$3.81bn	(\$1.40bn)



Source IMS Health & company reported sales

Cantargia IP

Use of IL1RAP as target for hematological cancers Filed 2009 – Valid to 2030 Granted (EPO, USA, Japan, China) Use of IL1RAP as target for solid tumors Filed 2011 – Valid to 2032 Granted (EPO, Japan, USA, China) The product candidate CAN04 Filed 2014 – Valid to 2035 Granted EPO, USA New IL1RAP antibodies (e.g. CAN03) Filed 2014





Why invest in Cantargia?

- Focus on immuno-oncology the strongest growing pharmaceutical segment
 - Taking advantage of established antibody technology to design novel pharmaceuticals
- Lead candidate antibody CAN04 with double mechanism of action in clinical trial with multiple value inflection points 2018-2019
 - Initial development in NSCLC and pancreatic cancer (cancer forms with poor prognosis)
 - Direct effects on tumor cells and tumor microenvironment
 - Recent external validation of pathway
- Second generation antibodies for autoimmune disease
- Unique and strong IP
- Strong lead investors with high competence and well known track record
 - Funding through phase IIa until mid 2020.
- Preparations for listing on main market

