



We want to save patients with severe cancer and autoimmune diseases

Liselotte Larsson, COO
18 Oct 2022

NASDAQ STOCKHOLM MAIN LIST (CANTA.ST)

Safe Harbor 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 forward-looking statements will prove to be correct. Prospective investors should not place undue reliance on forward-looking 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.

Cantargia – focus on IL1RAP



FIRST IN CLASS INNOVATIVE ANTIBODY THERAPIES AGAINST NOVEL IL1RAP TARGET

- Strong clinical interim results
- Next step randomized/registration trials based on more than 200 patients
- Target IL1RAP found on most solid tumor forms and leukemias



PLATFORM WITH BROAD POTENTIAL TO ADDRESS HIGH UNMET NEEDS

- IL1RAP signalling key in large number of inflammatory diseases beyond oncology
- Platform to fill pipeline
- Robust patent portfolio on antibody target in oncology (to 2032) and lead asset (to 2035)



INGREDIENTS FOR SUCCESS

- Solid cash position (350 MSEK, 33 MUSD end Q2 2022), plus rights issue for 250 MSEK
- Clear development plan with multiple upcoming catalysts
- Strong management team with experience in bringing products through development to market

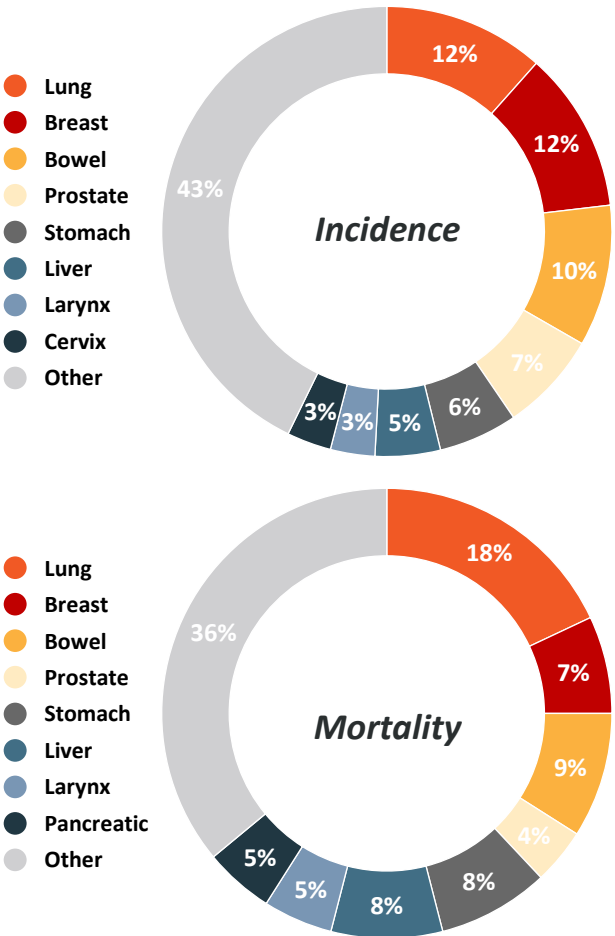
Cantargia – save lives and create value through IL1RAP

Project	Disease	Type of treatment	Discovery phase	Preclinical phase	Clinical phase I	Clinical phase II	Clinical phase III	Commercial phase
CAN04 Nadunolimab	PDAC	1 st line	<i>Gemcitabine/nab-paclitaxel</i>					
			<i>FOLFIRINOX</i>					
	NSCLC/ non-squamous NSCLC	1 st /2 nd line	<i>Platinum doublets</i>					
		2 nd /3 rd line	<i>Docetaxel</i>					
	TNBC	1 st /2 nd line	<i>Carboplatin/gemcitabine</i>					
	Solid tumors	1 st line	<i>Cisplatin/gemcitabine or FOLFOX</i>					
		ICI combo	<i>Pembrolizumab</i>					
CAN10	Myocarditis; Systemic sclerosis							
CANxx	New opportunities within IL1RAP platform							

■ active, recruiting; ■ active, not recruiting; ■ non-clinical project; PDAC, pancreatic cancer; NSCLC, non-small cell lung cancer; TNBC, triple-negative breast cancer; ICI, immune checkpoint inhibitor

- Potentially more effective treatment against novel target in clinically validated pathway
- First in class platform technology against novel target
- Well-financed to build a broad, diversified pipeline
- Right team and clear plan to position our projects and maximize value

Cantargia addresses NSCLC & PDAC



Non-Small Cell Lung Cancer



2.1m Annual global incidences

12% Fraction of cancer incidence

1.8m Annual global mortalities

18% Fraction of cancer mortality

19% Five-year survival rate

Treatment: Surgery, Radiation, Chemotherapy, Immunotherapy

Pancreatic cancer



0.5m Annual global incidences

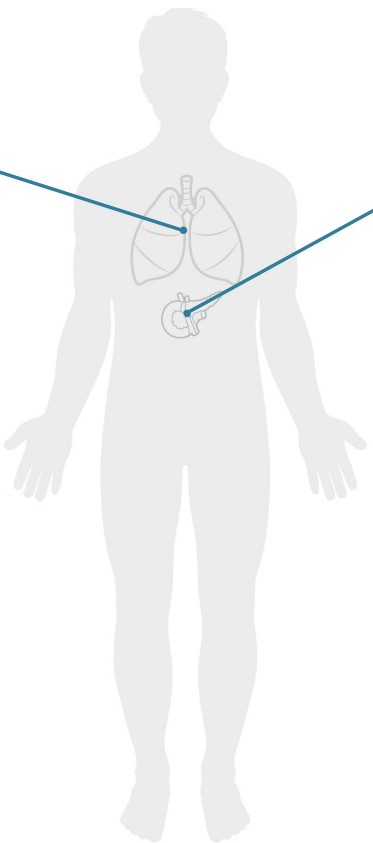
3% Fraction of cancer incidence

0.4m Annual global mortalities

5% Fraction of cancer mortality

9% Five-year survival rate

Treatment: Chemotherapy, Surgery, Radiation

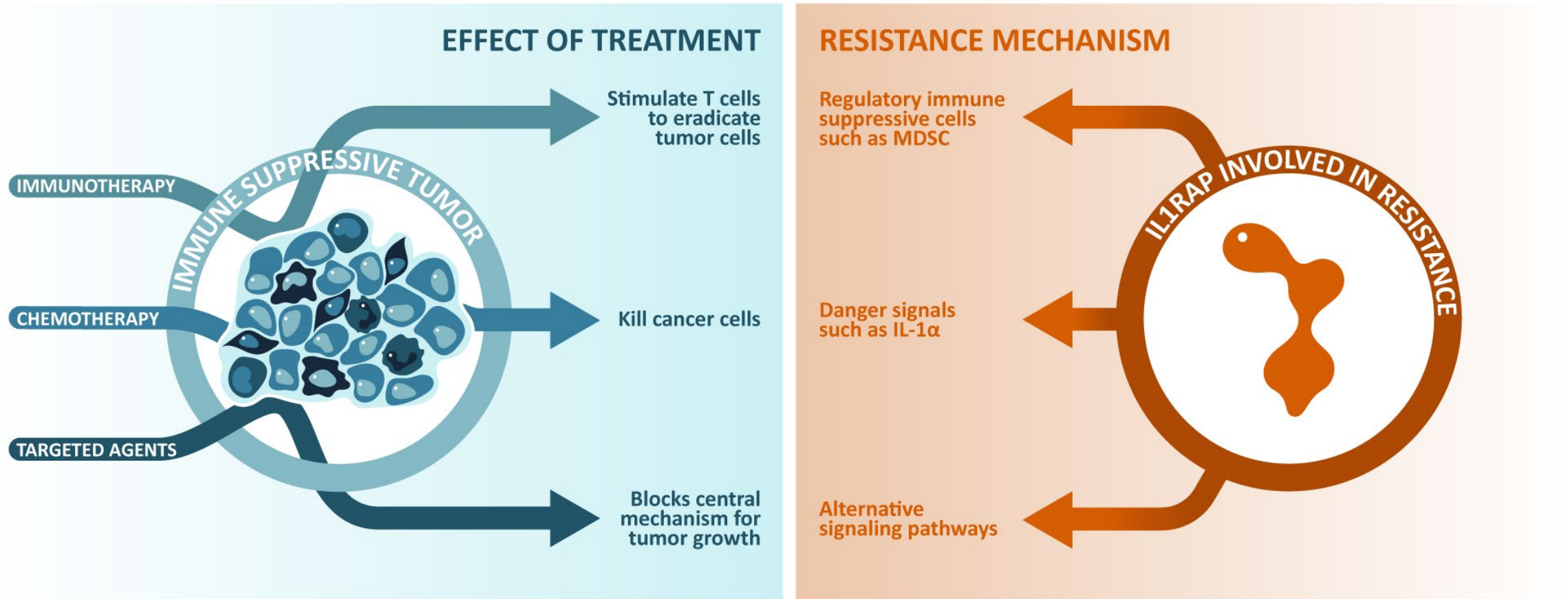


SIGNIFICANT UNMET NEEDS IN LUNG AND PANCREATIC CANCER
BILLION DOLLAR MARKETS IN CANTARGIA SEGMENTS

A microscopic image of cells, possibly cancer cells, with a blue overlay. The cells are spherical and have a textured, fibrous surface. The background is a soft, out-of-focus blue.

CAN04 NADUNOLIMAB AND BIOLOGICAL CONTEXT

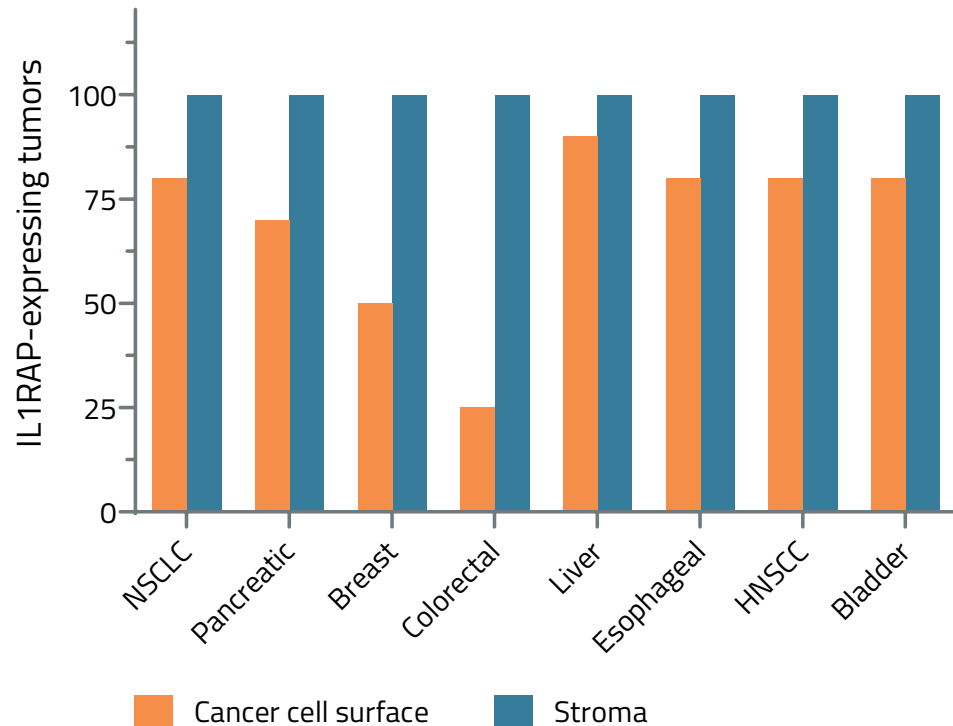
Cantargia - strategy to improve current cancer therapies



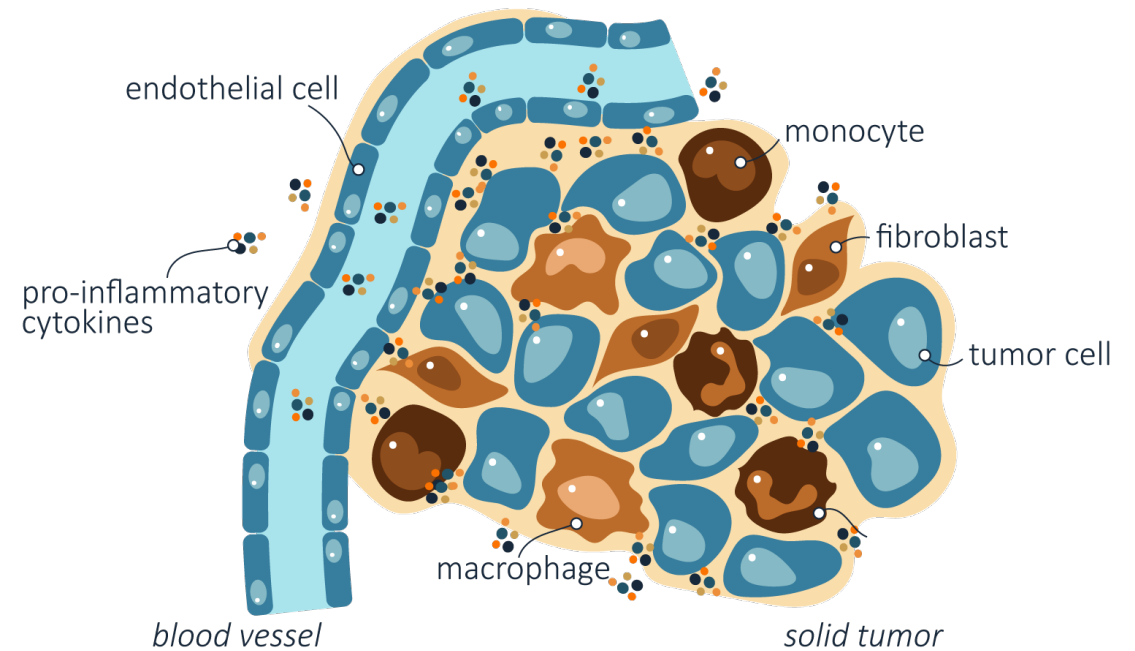
IL1RAP - A NOVEL TARGET WITH SEVERAL OPPORTUNITIES

IL1RAP is overexpressed in most solid tumors

IL1RAP EXPRESSION IN SOLID TUMOR TYPES

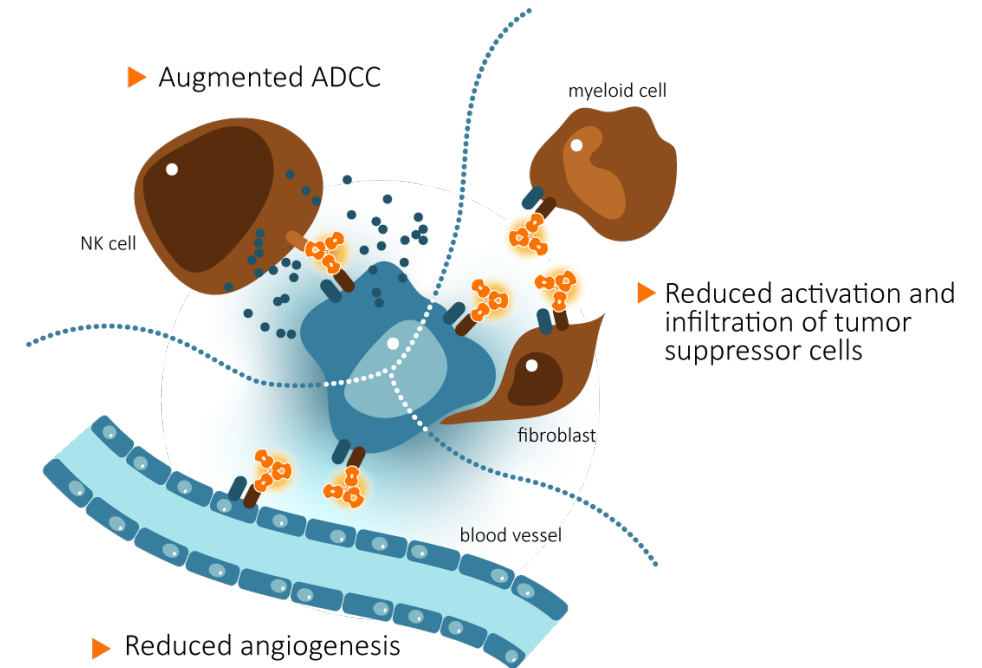
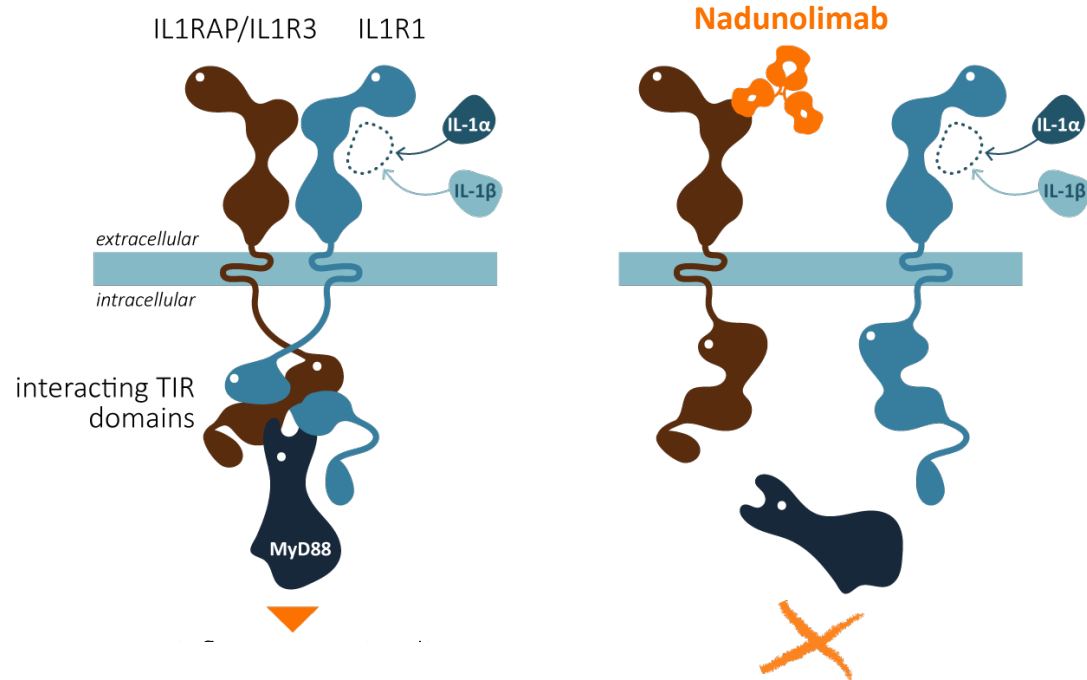


IL1RAP-EXPRESSING CELLS IN TUMOR MICROENVIRONMENT



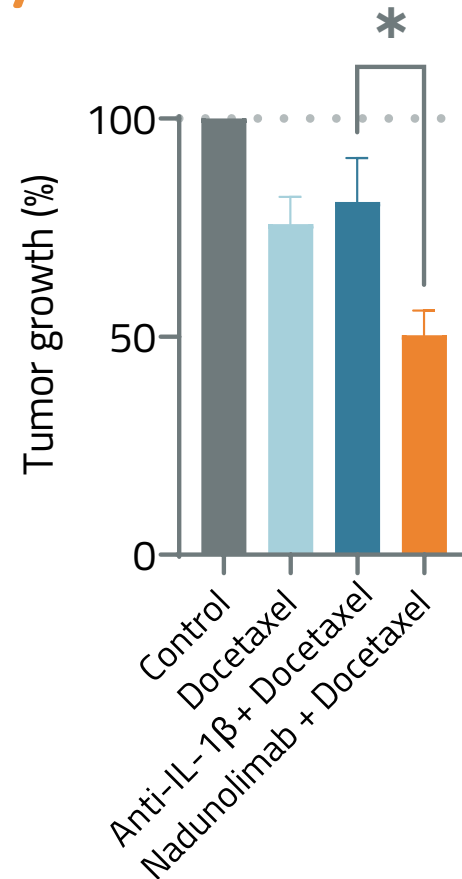
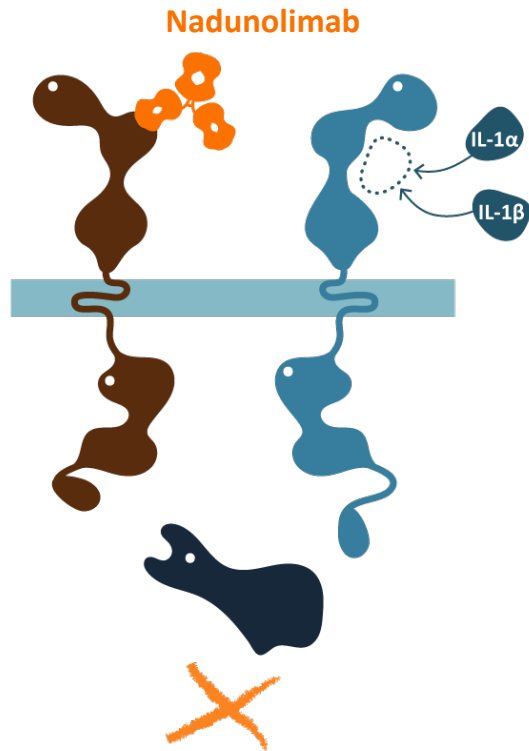
OVEREXPRESSION OF IL1RAP IN TUMORS AND LOW NORMAL TISSUE REACTIVITY

Targeting IL1RAP provides unique opportunities to treat cancer



NADUNOLIMAB COUNTERACTS SIGNALS RELATED TO IMMUNE SUPPRESSION AND RESISTANCE TO THERAPY

Nadunolimab mechanism uniquely enhances docetaxel antitumor activity

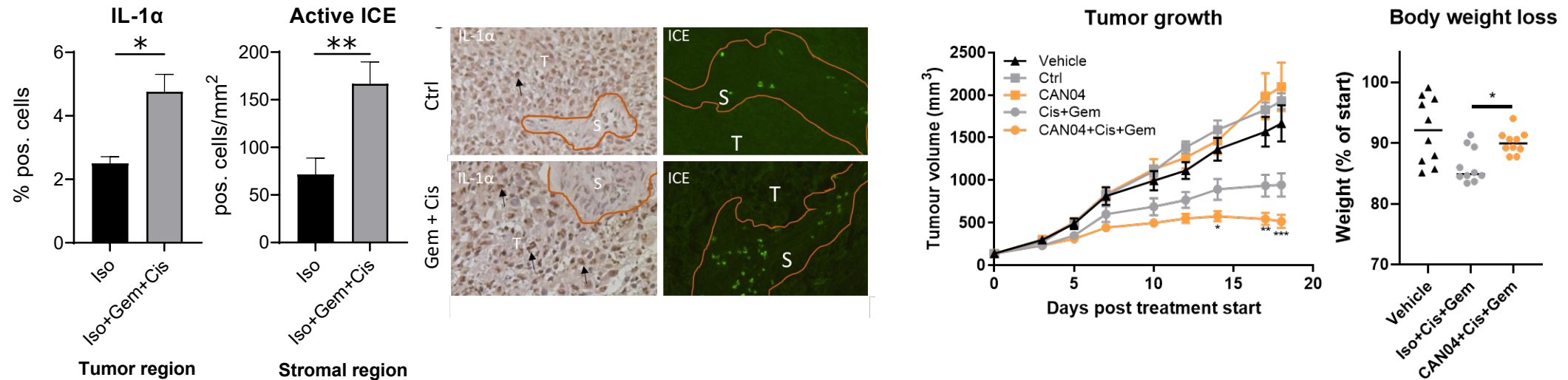


Nadunolimab with docetaxel in MC38 syngeneic model:

- Nadunolimab increases efficacy of docetaxel
- Docetaxel increases IL-1 α production in vitro
- Nadunolimab blocks both IL-1 α and IL-1 β and has ADCC activity
- Control antibody blocking only IL-1 β does not have the same effect
- Highlights importance of blocking both forms of IL-1 to increase docetaxel efficacy

IN CONTRAST TO ONLY IL-1 β BLOCKADE - NADUNOLIMAB INCREASES DOCETAXEL EFFICACY

Targeting IL1RAP allows unique synergistic effects with chemotherapy



- Upregulation of both forms of IL-1 in PDX-model in response to Gem/Cis
- IL-1 α (DAMP) on cancer cells trigger inflammasome activation in tumor microenvironment (e.g. IL-1 β)

- Nadunolimab increases efficacy of platinum-based chemotherapy regimes
- Nadunolimab counteracts weight loss after chemotherapy

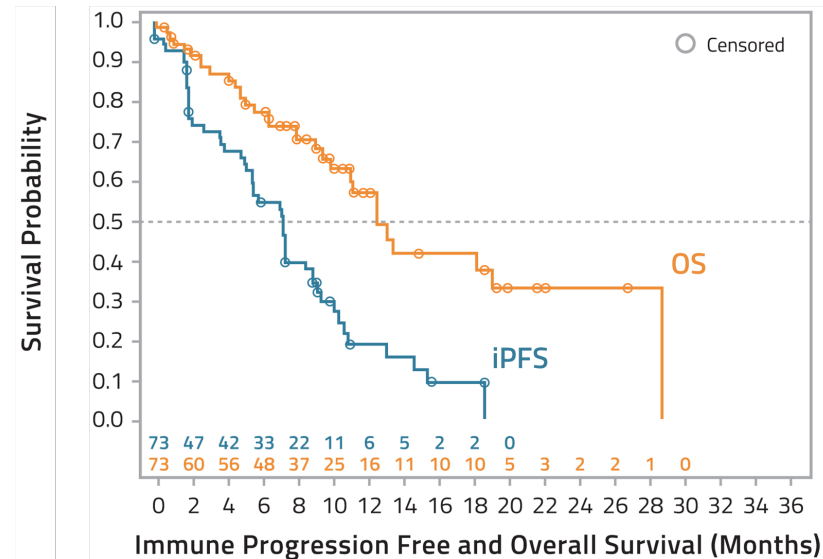
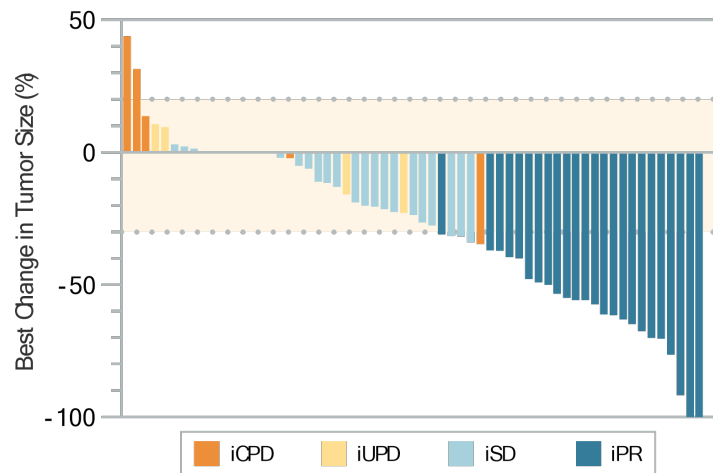
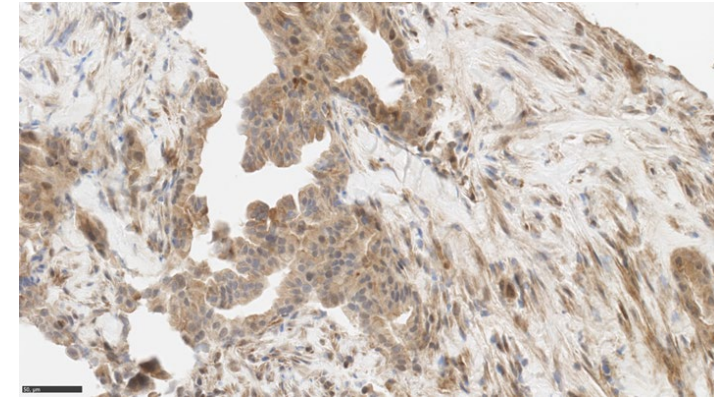
SYNERGY WITH CHEMOTHERAPY IN LINE WITH CURRENT DEVELOPMENT STRATEGY

Note: NSCLC PDX (patient-derived xenograft)
with 10 mice per group

Positive interim data in pancreatic cancer

Nadunolimab combination with Gem/Abraxane in 1st line (ASCO 2022), n=73:

- 33% response rate with durable responses
- Pseudoprogression-like response in 5 (7%) additional patients
- Promising PFS (7.2 mo) and OS (12.7 mo, 42 % events)
- 12 pts on treatment



PFS AND OS LONGER THAN EXPECTED GIVEN HISTORICAL CONTROL

Safety profile is manageable and supports MOA

	Grade 3-4 (n=76)	All grade (n=76)
Hematological TEAE; n (%)		
Neutropenia	49 (65%)	57 (75%)
Leukopenia/WBC decreased	18 (24%)	23 (30%)
Thrombocytopenia	11 (15%)	31 (41%)
Anemia	10 (13%)	37 (49%)
Febrile neutropenia	10 (13%)	10 (13%)
Non-hematological TEAE; n (%)		
GGT increased	13 (17%)	16 (21%)
Hypertension	7 (9%)	10 (13%)
ALT increased	6 (8%)	16 (21%)
Fatigue	6 (8%)	41 (54%)
AST increased	5 (7%)	14 (18%)
Vomiting	5 (7%)	27 (36%)
Cholestasis	4 (5%)	4 (5%)
Hypokalemia	4 (5%)	12 (16%)

- G-CSF is an approved therapy to counteract neutropenia; Incidence of grade 3-4 neutropenia was only 16 % in pts receiving prophylaxis
- Notably, only 1 % peripheral neuropathy grade 3-4 was observed, vs 17% in historical controls. Fit with mechanism of action

ADDING NADUNOLIMAB TO THE CHEMOTHERAPY APPEAR SAFE

Note: Median duration of treatment 5.5 months (ref 3.9 months); most common reasons for termination: gastrointestinal events or general health deterioration. No patients discontinued due to neutropenia.

Promising efficacy in NSCLC

Efficacy parameter*	All (n=30)**	Non-squamous (n=16)	Squamous (n=13)
ORR [95% CI]	53% [34-72]	56% [30-80]	46% [19-75]
Disease control rate*** (CR+PR+SD) [95% CI]	83% [65-94]	75% [48-93]	92% [64-100]
Median duration of response [95% CI]	5.8 months [3.7-11.2]	11.2 months [NA]	4.1 months [3.4-5.8]
PFS [95% CI]	6.8 months [5.5-8.8]	7.3 months [5.3-13.0]	5.8 months [3.7-7.4]
Median OS [95% CI]	13.7 months**** [NA]	NA	NA
1-year survival [95% CI]	53%**** [26-73%]	NA	NA

*Responses according to RECIST1.1 criteria

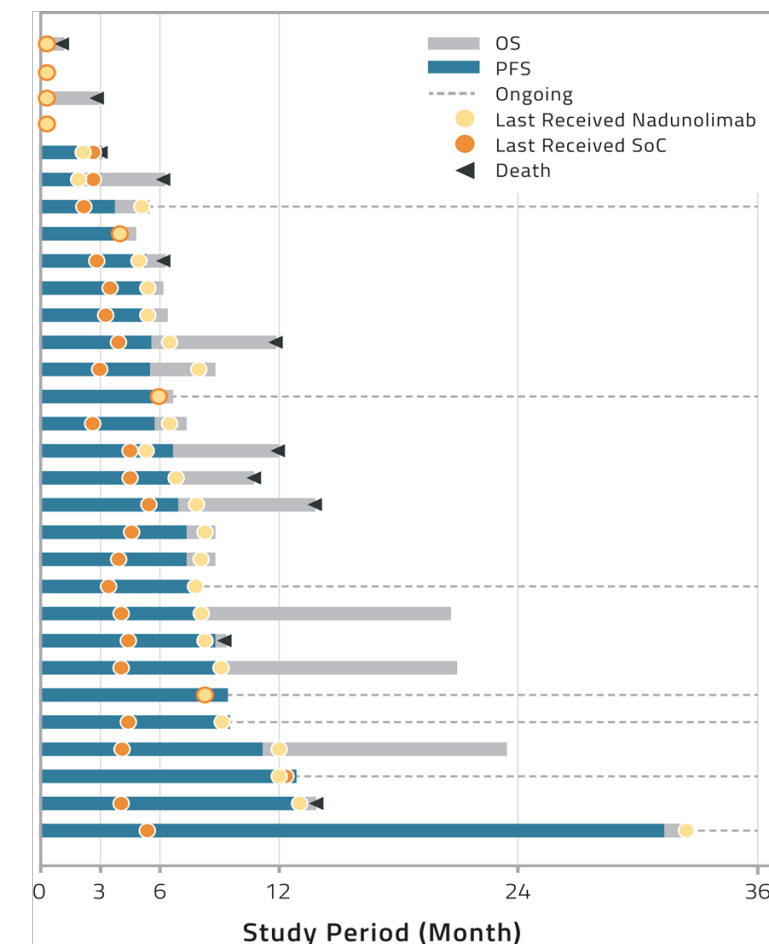
**One tumor of unknown histology

***Two patients withdrew early in association with COVID-19

****Based on 37% of events

Nadunolimab combination with Gemcitabine/Cisplatin in 1st line:

- 16/30 patients showed objective response including 1 complete response (ORR 53% vs historical control data of 22-28%), 7pts still on treatment
- No major side effects observed except those from chemotherapy or nadunolimab alone. *Neutropenia frequency higher than expected from chemo (but can be treated with dose reductions or G-CSF)*
- Trial expanding - additional patients with non-squamous NSCLC



STRONG INTERIM RESULTS, UPDATE AT ASCO 2022

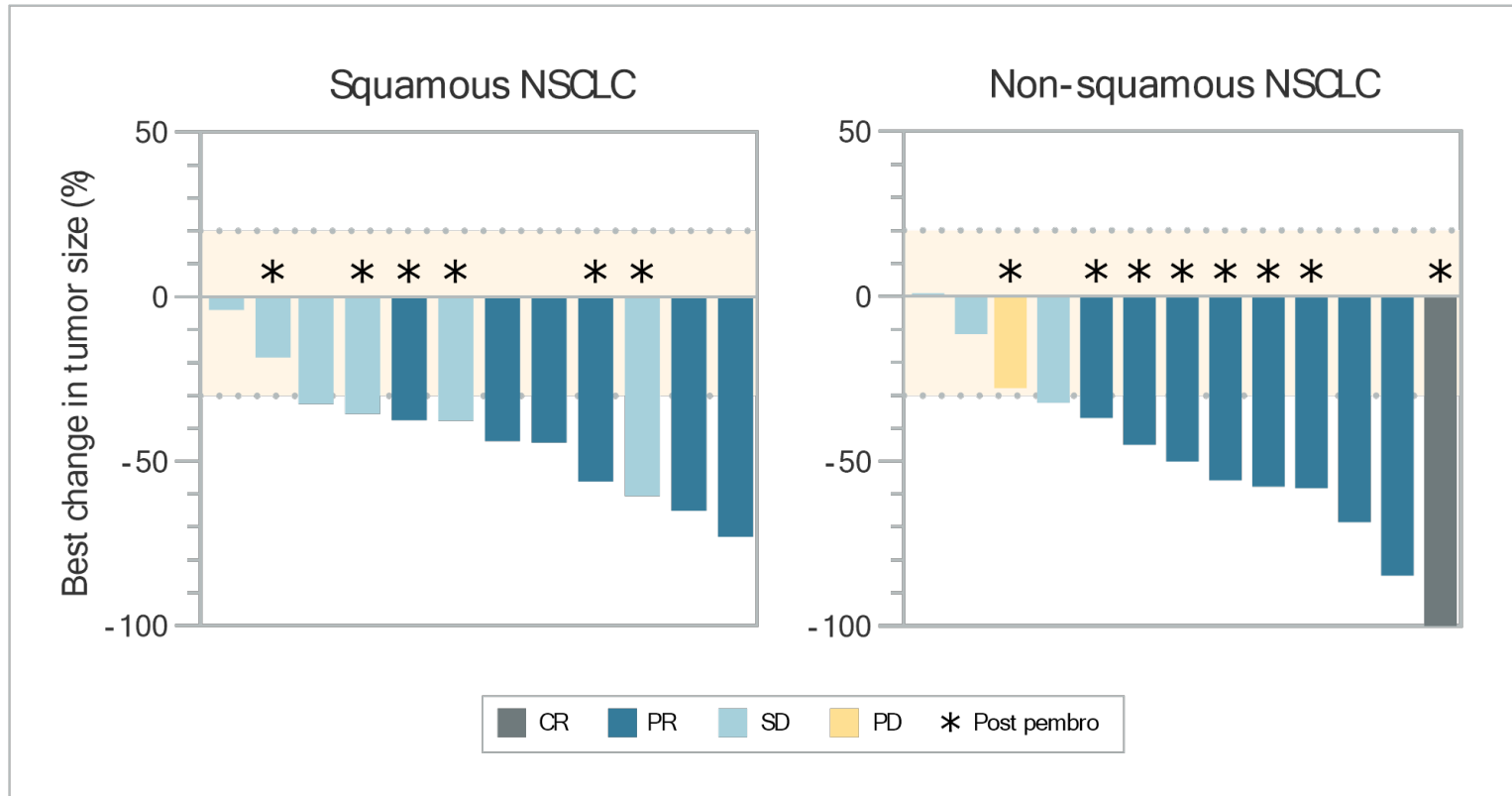
¹ Schiller et al, N Engl J Med 2002

³ Gandhi et al, N Engl J Med 2018

² Scagliotti et al, J Clin Oncol 2008

⁴ Paz-Ares et al, N Engl J Med 2018

Strong signal in non-squamous NSCLC



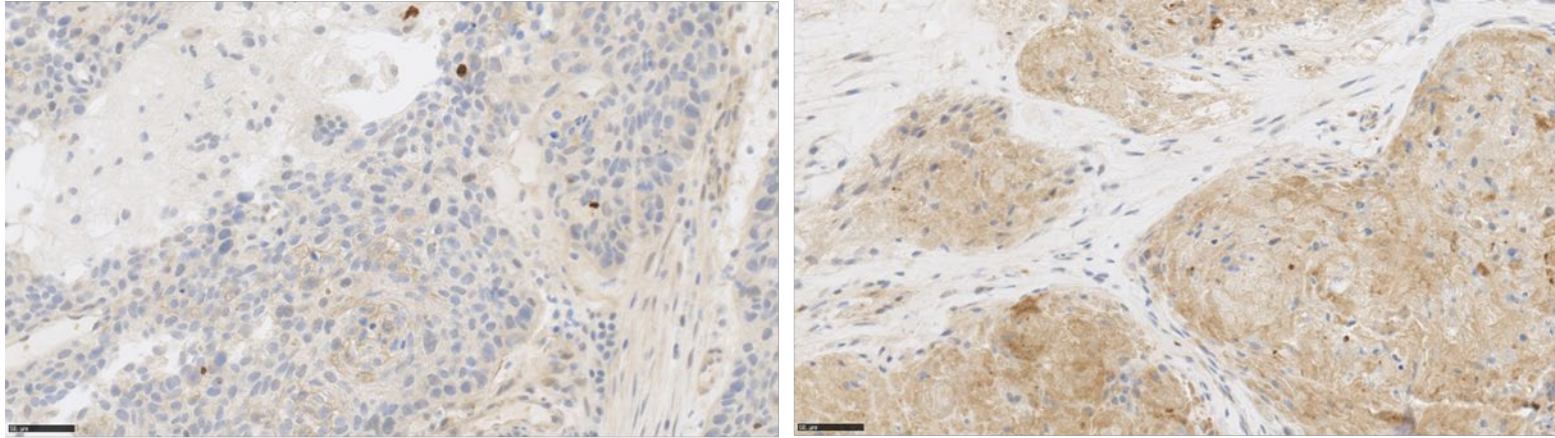
Nadunolimab combination with Gem/Cis in 1st line:

- Non-squamous NSCLC comprises approx. 75% of NSCLC cases
- 9 of 16 evaluable patients had objective response including 1 complete response (ORR 56% vs historical control data of 19%)
- 8 patients were 2nd line to pembrolizumab monotherapy, with 7 responses
- 40 additional patients to be recruited (combination with carboplatin/pemetrexed)

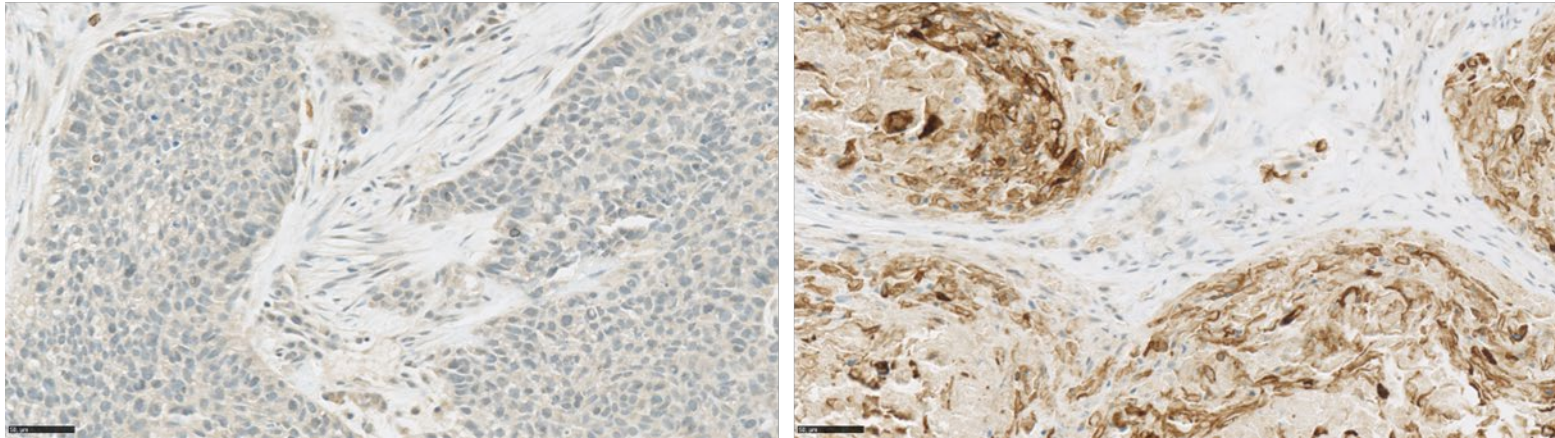
DEVELOPMENT ADVANCING TOWARDS RANDOMIZED TRIAL EARLY 2023

Induction of IL1RAP and IL-1 α with chemotherapy

IL1RAP



IL-1 α

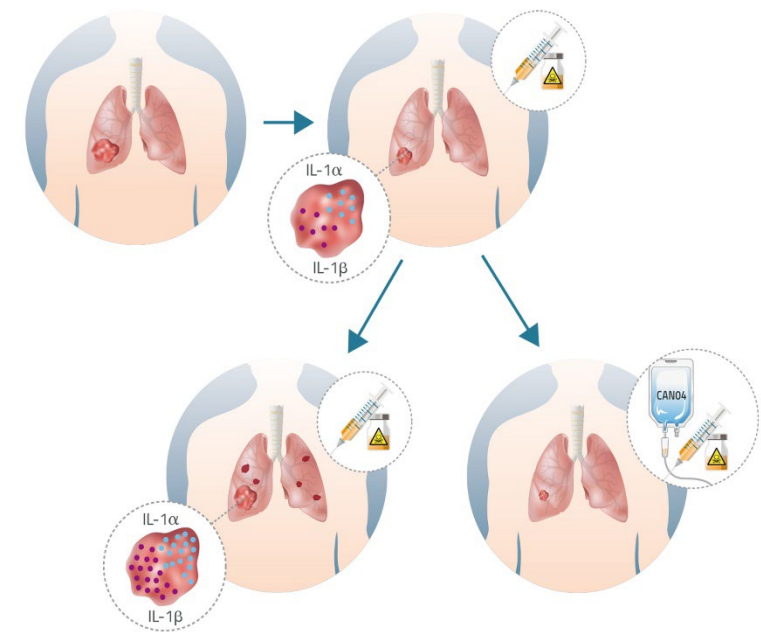


Biopsies from NSCLC patients

IL-1 ALPHA INDUCED BY CHEMOTHERAPY
WELL ESTABLISHED DANGER SIGNAL – ACTIVITY BLOCKED BY NADUNOLIMAB

Summary of nadunolimab cancer therapy

- Most chemotherapies induce chemoresistance already after a few months of therapy. Chemotherapy can upregulate both IL-1 α and IL-1 β
- Nadunolimab blocks IL-1 signalling and improve chemotherapy in preclinical models
- Clinical interim results of the combination in both pancreatic cancer and non-small cell lung cancer superior to historical controls of only chemotherapy
- Cantargia is advancing development of combination therapy in both pancreatic cancer and non-small cell lung cancer



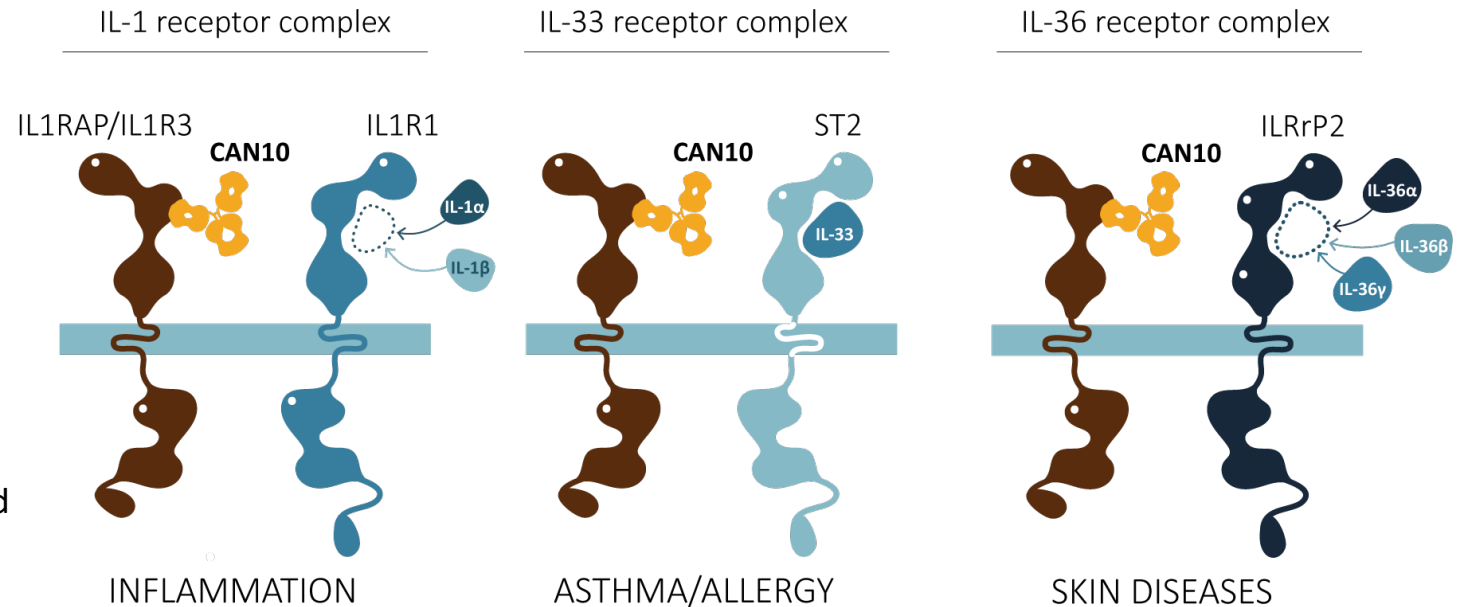
SEVERAL LINES OF EVIDENCE SUGGEST CAN04 COUNTERACT CHEMORESISTANCE

A microscopic image showing several cells with a blue overlay. Two cells are in sharp focus in the upper half, showing a complex, mesh-like internal structure. The lower half is blurred, showing more cells in the background. A semi-transparent dark blue horizontal band spans the middle of the image, containing white text.

CAN10 OPPORTUNITY IN AUTOIMMUNE/INFLAMMATORY DISEASE

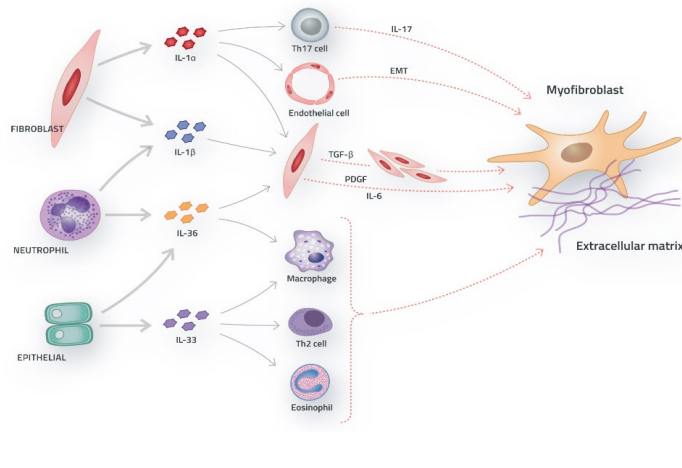
CAN10 – within autoimmunity/inflammation

- IL1RAP binding antibody potentially blocking IL-1, IL-33 and IL-36
- Unique anti-inflammatory activity observed in different mouse models (myocarditis, systemic sclerosis, psoriasis, inflammation)
- Development focusing on unmet medical need in systemic sclerosis and myocarditis. Disease selection in collaboration with experts based on scientific rationale, medical need, development opportunity and competition.
- Clinical trial starts early 2023

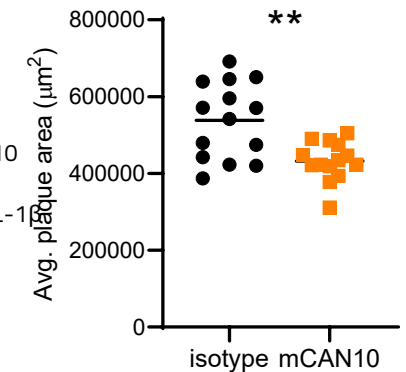
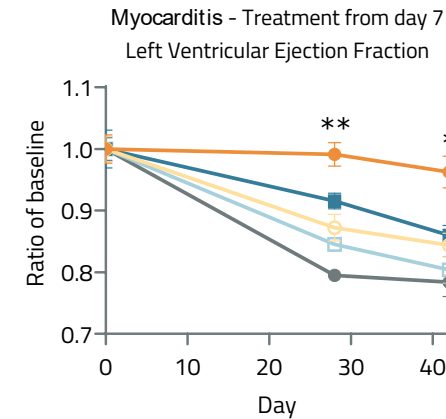
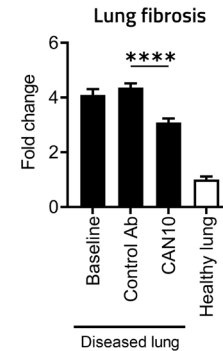
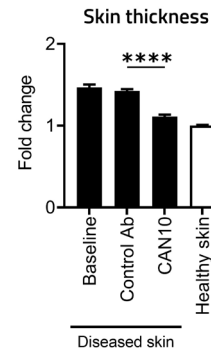


UNIQUE OPPORTUNITY FOR CAN10 IDENTIFIED IN LIFE-THREATENING DISEASES

CAN10 – Unique properties in preclinical disease models



Systemic sclerosis model



CAN10 shows potential in several autoimmune/inflammatory diseases with high medical need
Phase I planned for early 2023



FINANCIALS, MILESTONES & SUMMARY

Several upcoming value inflection points

Newsflow over next 6-9 months

Nadunolimab (CAN04)

- Update of results for PDAC, NSCLC and Keytruda combination
- Phase 2/3 Precision Promise (PDAC)
- New preclinical and translational results
- Interim efficacy and safety
 - CAPAFOUR PDAC FOLFIRINOX
 - CESTAFOUR Basket trial (NSCLC, CRC, BTC)
 - TRIFOUR TNBC

CAN10

- Preclinical progress
- Development milestones
- ...and initiation of clinical trial early 2023



SIGNIFICANT DATA TO SECURE NEWSFLOW

Solid financial position with strong shareholder support

- Cash and cash equivalents SEK 350 M (~\$33M) at end Q2 2022
- Fully guaranteed rights issue of 250 MSEK concluded Aug 2022
- Operating expenses SEK 217.6 M (~\$20M) in H1 2022
 - R&D - 95% of operating expenses
 - 27 full-time employees
 - Market cap appr 0.6 BSEK, 53 MUSD Sep 23 2022
- Capital structure
 - Ordinary shares (thousands) 166,987
 - Options corresponding to (thousands) 5,687 if exercised (3.3% dilution)

Current owners (30 Sep 2022)	
4th AP fund	8.8%
Alecta	7.3%
Avanza Pension	6.9%
1st AP fund	6.3%
Swedbank Robur Funds	4.9%
Six Sis AG	4.7%
Handelsbanken fonder	3.7%
Goldman Sachs	3.1%
SEB AB, Luxemburg	1.8%
Brushamn Invest	1.2%
Other	51.3%

A microscopic image showing several cells with a textured, mesh-like surface. The cells are arranged in a grid-like pattern, with one cell in the top left, one in the top right, and one in the bottom center. The background is a light blue color. A semi-transparent dark blue horizontal band is overlaid across the middle of the image, containing the text "THANK YOU FOR YOUR ATTENTION" in white, uppercase letters.

THANK YOU FOR YOUR ATTENTION