

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 well-considered, but the audience should note that, as with all prospective assessments, they are associated with risks and uncertainties.



Cantargia at a glance

- Specialized in antibody therapy/immunology, with initial focus on oncology
- Lead antibody CAN04 (nidanilimab) in clinical development, pathway clinically validated
- Platform around IL1RAP, lead candidate for autoimmunity and inflammatory disease 2019
- Granted IP therapeutic target IL1RAP and CAN04
- Strong management team with proven track record in clinical development and business development
- Listed on Nasdaq Stockholm
- Approximately 5000 shareholders
- Based in Lund, Sweden

Financial highlights

- Share price: 15.20 SEK (1.70 USD), Jan 14, 2019
- Market cap: 1006 MSEK (112 MUSD), Jan 14 2019
- Cash: 191 MSEK (21.3 MUSD), Sep 30 2018

Current owners (Sep 30, 2018)				
Sunstone	9.0%			
1st AP fund	6.9%			
Avanza Pension	5.2%			
4th AP fund	4.6%			
2nd AP fund	3.3%			
Öhman Bank S.A.	3.3%			
SEB S.A. clients	3.2%			
Mats Invest AB	2.0%			
Tibia konsult	1.9%			
Kudu AB	1.9 %			
Others	58.6%			

Tumor inflammation – key to cancer features

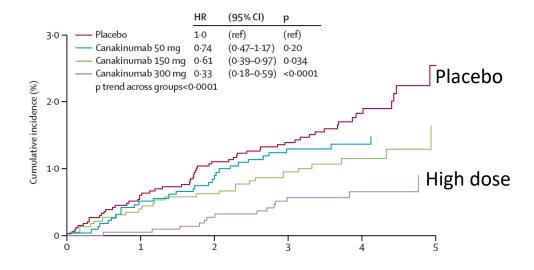
Intrinsic pathway Genome instability Tumor-promoting and mutation inflammation

Extrinsic pathway

IL-1 blockade in cancer- validating clinical data

CANTOS trial (n=10061)

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



- Clinical validation of IL-1 pathway
- Cantargia's CAN04 has broader MOA

Canakinumab phase 3 trials

(compl 20121/2022)

Adjuvant NSCLC (CANOPY-A)

After surgery, no mets, placebo control 1500 patients, recruitment ongoing

First line (CANOPY-1)

Untreated locally advanced/metastatic Combination Pembro/Platinum doublet 627 patients

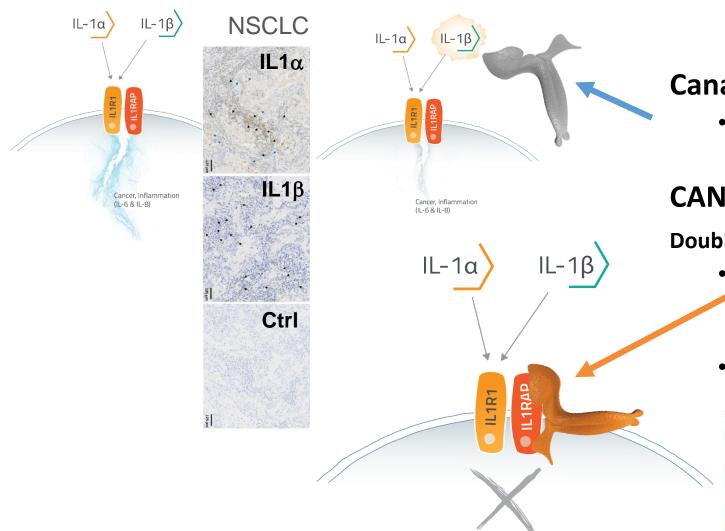
Second line metastatic (CANOPY-2)

Previously treated loc adv/metastatic Combination Docetaxel 240 patients, recruitment ongoing

Source clinicaltrials.gov



CANO4 (nidanilimab) added value vs canakinumab



Canakinumab

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

CAN04:

Double mechanism

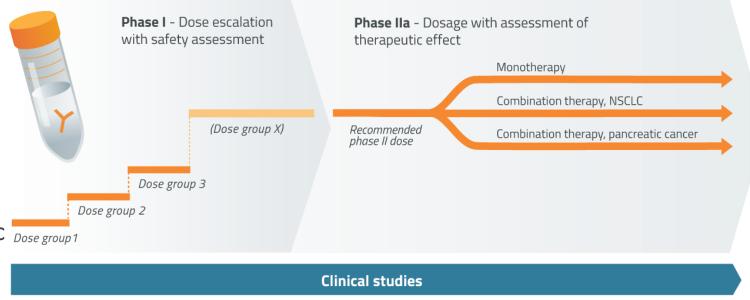
- Binds the common signaling receptor and counteracts both ligands
- Induce killing via the immune system (ADCC)



CANO4 - CANFOUR clinical trial

Phase I/IIa trial - NSCLC and pancreatic cancer

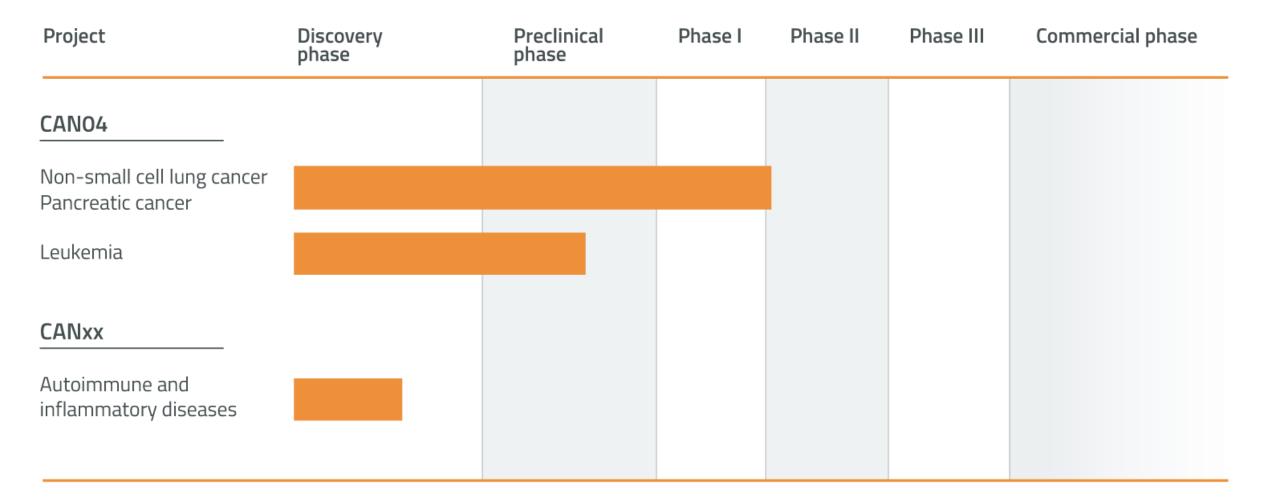
- Jules Bordet, Brussels; Erasmus Rotterdam,
 NKI, Amsterdam; Rigshospitalet,
 Copenhagen; Radiumhospitalet, Oslo
- 22 patients treated:
 - Good safety up to 10 mg/kg
 - Significant effect on relevant biomarkers (IL-6, CRP)
 - 5/13 pts had stable disease up to 6 months
 - NSCLC, pancreatic cancer, colon cancer
- Phase IIa: focused on NSCLC and pancreatic Dose group 1 cancer (appr 20 centres)
 - Monotherapy (appr 20 pat)
 - Combination with standard therapy (appr 30 pat per arm)
 - NSCLC Cisplatin/Gemcitabine
 - Pancreatic cancer Gemcitabine/nab-paclitaxel



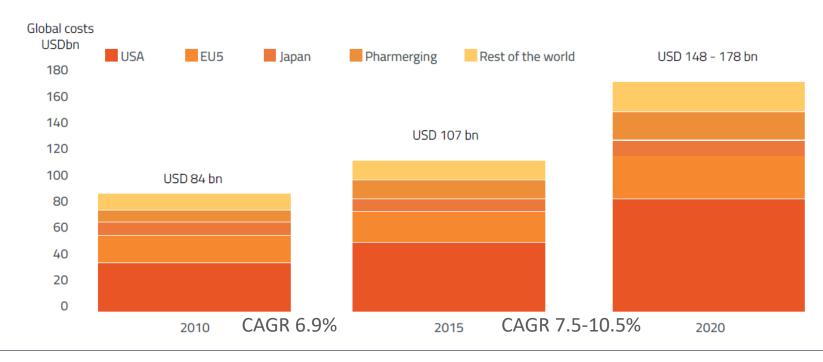
Dec 2018 Early 2020



Cantargia pipeline



Lead project CAN04 in the highest growth segment— Oncology antibodies



Sales cancer therapeutic 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)

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

Source IMS Health & company reported sales



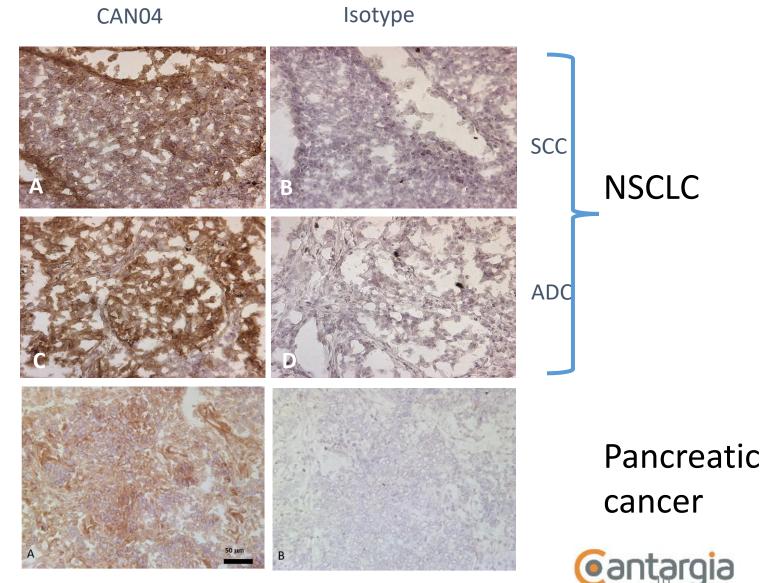
CAN04 bind tumor cells and microenvironment

Several cells in the tumor overexpress II 1RAP and bind CANO4:

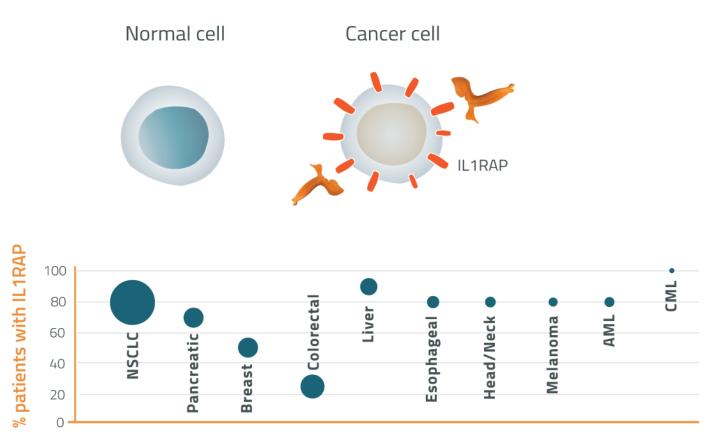
- Cancer cells
- Stroma cells
- Myeloid cells

IL1RAP found in several cancer forms

- NSCLC
- Pancreatic cancer
- Colorectal cancer
- Breast cancer
- Liver Cancer
- HNSCC
- Esophagael cancer
- Melanoma
- Leukemia



Medical need and IL1RAP



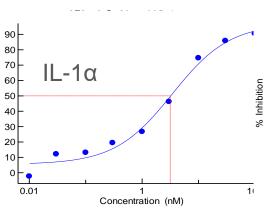
- Cantargia founded based on:
 - Discovery of IL1RAP on cancer cells
 - Antibodies against IL1RAP antitumor effects
 - Patents on antibody therapy against IL1RAP
- Primary indications. NSCLC and pancreatic cancer
- Biomarker studies ongoing, identify patients most likely to respond
- Opportunity to expand development in additional cancer forms
- Cantargia has granted patent on antibody therapy against IL1RAP

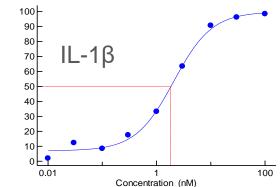


CAN04 -Dual anticancer mechanism



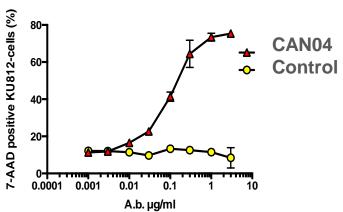
Blocking IL-1 signaling



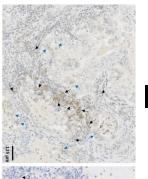


ADCC

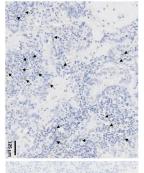




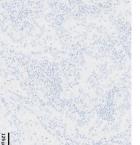
NSCLC



IL1α



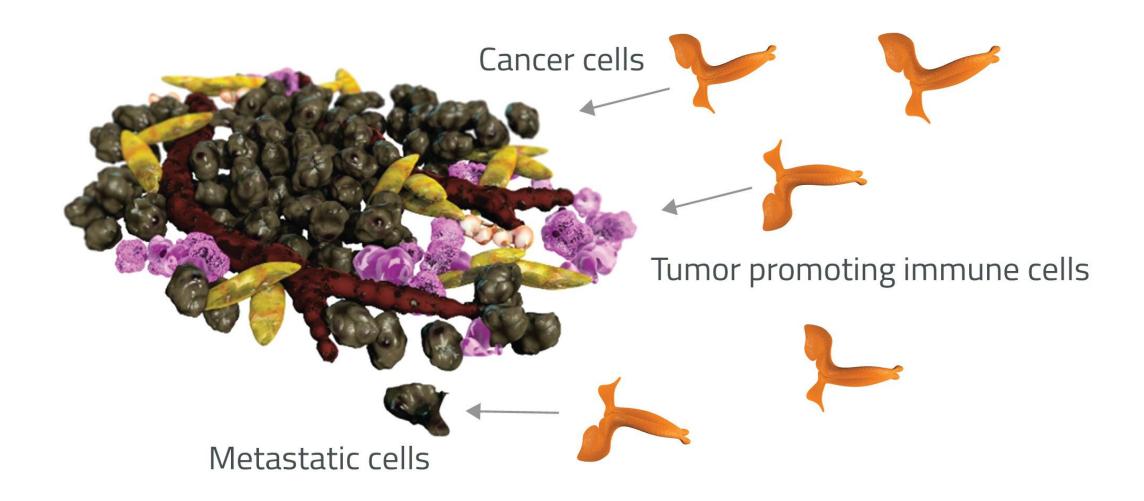
IL1β



Ctrl

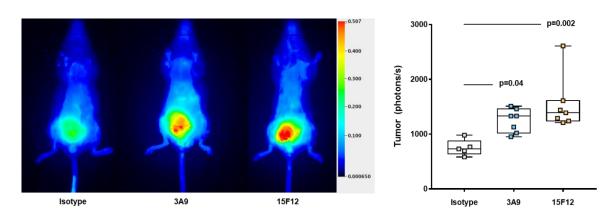


CANO4 attacks several cell types in the tumor

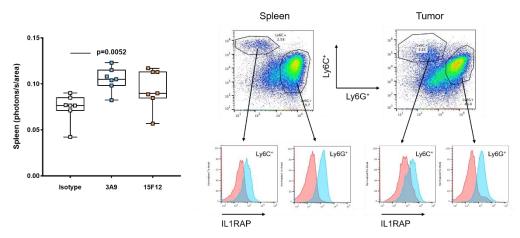


CANO4 surrogate antibody binds to myeloid cells

Localizatition to tumor (4T1) with low IL1RAP



Myeloid cells in spleen and tumor overexpress IL1RAP

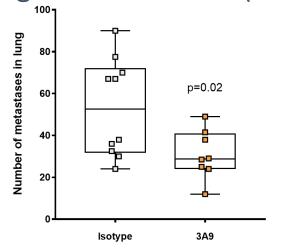


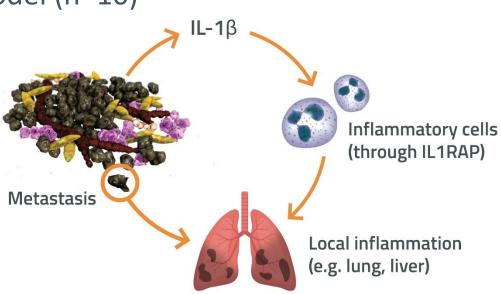


Inflammation and metastasis

- Cancer cells (seeds) needs a good soil to form a metastasis
- The IL-1 system (inflammation) can provide such environment (soil)

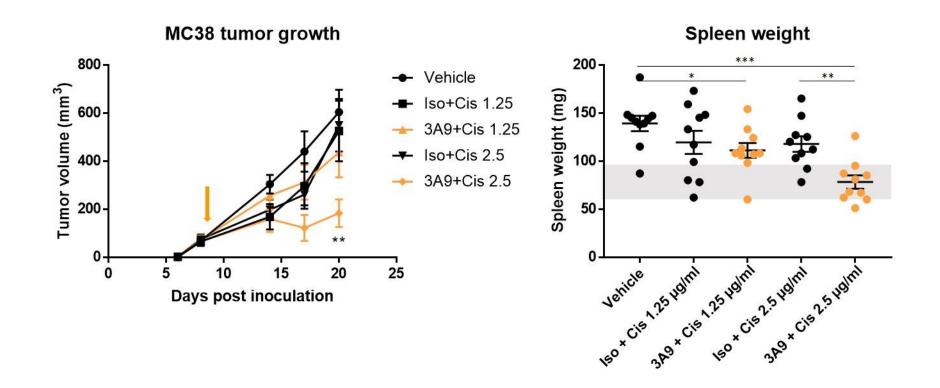
Data generated in 4T1 (TNBC) model (n=10)







Targeting both tumor and endogenous IL1RAP allows synergistic effects with Cisplatin





Cantargia pipeline

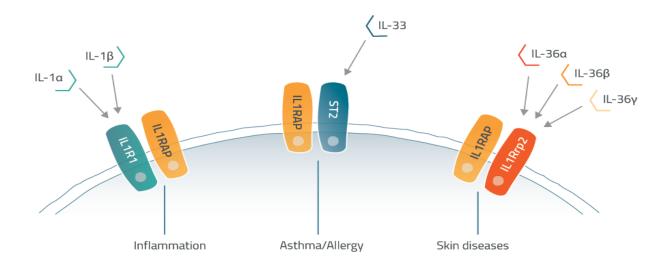
Discovery phase	Preclinical phase	Phase I	Phase II	Phase III	Commercial phase
	Discovery phase	Discovery phase Preclinical phase	Discovery phase Preclinical phase I	Discovery phase I Phase II Phase II	Discovery phase I Phase II Phase III Phase III

CANTOS additional findings (from Novartis IL-1\beta antibody)

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				
Cardiovascular	12%	P=0.02				
Biomarker levels (reduction)						
CRP	26-41%	P<0.0001				
IL-6	25-43%	P<0.001				

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



Cantargia IP

Use of IL1RAP as target for hematological cancers

Valid until 2030

Granted (EPO, USA, Japan, China)

Use of IL1RAP as target for solid tumors

Valid until 2032

Granted (EPO, Japan, USA, China)

The product candidate CAN04

Valid until 2035

Granted EPO, USA, China

New IL1RAP antibodies (e.g. CAN03)

Valid until 2035

Granted USA





Management



Göran Forsberg CEO since 2014, born 1963

Göran Forsberg has a PhD in biochemistry, and is an associate professor and the author of over 40 scientific publications. He has worked for pharmaceutical and biotechnology companies for more than 30 years in various positions, including at KabiGen, Pharmacia, Active Biotech and the University of Adelaide, Australia. Forsberg's most recent position was Chief Business Officer at Active Biotech AB. He has a large amount of drug development experience, with a special focus on oncology. Since 2011, Forsberg is a board member of Isogenica Ltd. Shares in Cantargia: 77,648

VP Clinical Development since 2015, born 1961



VP Cancer Research since 2015, born 1969

VP Operations since 2014, born 1963

management. Shares in Cantargia: 24,000

Liselotte Larsson has a PhD in biotechnology, and has more than 20

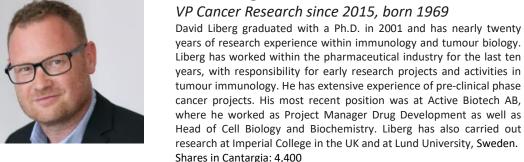
years of experience in various management positions in pharmaceutical

and biotechnology companies including BioGaia Fermentation,

Novozymes Biopharma and Camurus. Larsson's main fields of expertise

are business development, marketing & sales/out licensing, ISO

certification, good manufacturing practice (GMP) and overall project

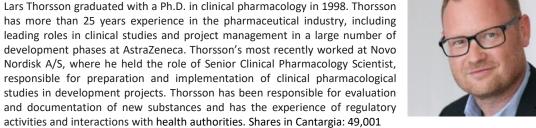


David Liberg

Liselotte Larsson



Bengt Jondell has a BSc in Business Aministration and a MSc in Chemical engineering. Jondell has extensive experience in various executive financial functions such as CFO and Chief Executive Officer at BTJ Group AB, Senior Financial Advisor for BoneSupport, CFO/Administrative manager at Inpac, Business Controller at Pharmacia & Upjohn Consumer Healthcare, Pharmacia, Pharmacia Consumer Pharma and Pharmacia Nicorette. Jondell's most recent position was CFO for Enzymatica AB. Shares in Cantargia 55.999





Lars Thorsson

CFO since May 2017, born 1960.





Board of Directors



Magnus Persson

Chairman of the Board since 2016, born 1960

Magnus Persson is MD and associate professor in physiology at Karolinska Institutet in Stockholm. Persson has a large amount of experience in the fields of medicine, life sciences and biotech-financing. Persson has previously led development teams in clinical phase II and phase III programmes in the pharmaceutical industry and has founded and led private as well as public biotech and medtech companies, either as chairman or member of the board, in Europe and the USA. Persson has also been involved in multiple IPOs. Shares in Cantargia: 44,976 and 85,000 options



Anders Martin-Löf

Board member since 2018, born 1971

Anders Martin-Löf has long experience as CFO for companies listed at the Stockholm stock exchange. He is currently CFO at Wilson Therapeutics and was previously CFO at RaySearch Laboratories. Before that he was responsible for investor relations and had different positions within business development at Swedish Orphan Biovitrum. He has a M.Sc. in Economics and Business from Stockholm University and a M.Sc. in Engineering Physics from the Royal Institute of Technology in Stockholm. Shares in Cantargia 12,000



Corinne Savill

Board member since 2018, born 1959

Corinne Savill has a B.Sc. in Biochemistry from the University of Manchester and did her postgraduate studies at University College, the Middlesex School of Medicine (Ph.D.) and the Charing Cross Sunley Research Centre in London. Corinne is currently Chief Business Officer at oncology-focused Cullinan Pharmaceuticals. Prior to that, she was Head of Business Development and Licensing at Novartis Pharmaceuticals. Shares in Cantargia: 0



Karin Leandersson

Board member since 2016, born 1972

Karin Leandersson is professor in tumour immunology at the medical faculty of Lund University. She has gained a wide range of cancer research experience in the fields of tumour immunology and tumour inflammation in solid tumours, mainly in breast cancer. Leandersson has also authored around 30 scientific publications in international journals. Shares in Cantargia: 0



Claus Asbjørn Andersson

Board member since 2013, born 1968

Claus Asbjørn Andersson is a partner of Sunstone Life Science Ventures, a holding company managing billion-dollar venture funds. He has a Master's degree in Civil Chemical Engineering from Technical University of Denmark and a PhD in Mathematical Statistics from Copenhagen University and Humboldt University of Berlin. Shares in Cantargia: 0



Thoas Fioretos

Board member since 2010, born 1962

Thoas Fioretos is a professor and physician at the Department of Clinical Genetics at Lund University. The focus of his research is molecular and functional studies of genetic changes in leukaemia and how such changes can be used for diagnostic and therapeutic purposes. Fioretos has authored many scientific publications, and is one of the founders of Cantargia AB and bio-IT company Qlucore AB. Shares in Cantargia: 732,600



Patricia Delaite

Board member since 2017, born 1963

Patricia Delaite is MD and MBA from University of Geneva and Lausanne. She is currently the Chief Medical Officer for AMAL Therapeutics in Geneva, and has had leading positions at Incytes International Biosciences, ARIAD Pharmaceuticals, Novartis and Eli Lilly. Patricia has also 10 years previous experience in patient clinical management from the University hospital in Geneva. Shares in Cantargia: 0



Significant value inflection points ahead of CANFOUR results

2019

- US regulatory and clinical strategy
- Clinical progress and initial phase IIa results
- Preclinical progress (immuno-oncology effects, combinations etc)
- CANxx progress

2020

Phase IIa results



Cantargia summary

- Lead candidate antibody CAN04 in clinical trials against cancer
 - Encouraging phase I data, phase IIa initiated
 - Double mechanism of action
 - Synergy with chemotherapy
 - 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.

