

ALLIGATOR BIOSCIENCE AB (PUBL)

SEPTEMBER 2, 2020

A REVOLUTION FOR LIFE

ALLIGATOR 
bioscience

Disclaimer

FORWARD LOOKING STATEMENTS

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Company highlights



1

Advanced immuno-oncology company with an innovative technology platform that has produced 4 clinical-stage programs to date

2

ATOR-1015: first-in-class tumor-localizing antibody with potential to replace current CTLA-4 treatment

3

ATOR-1017: best-in-class tumor-directed 4-1BB antibody

4

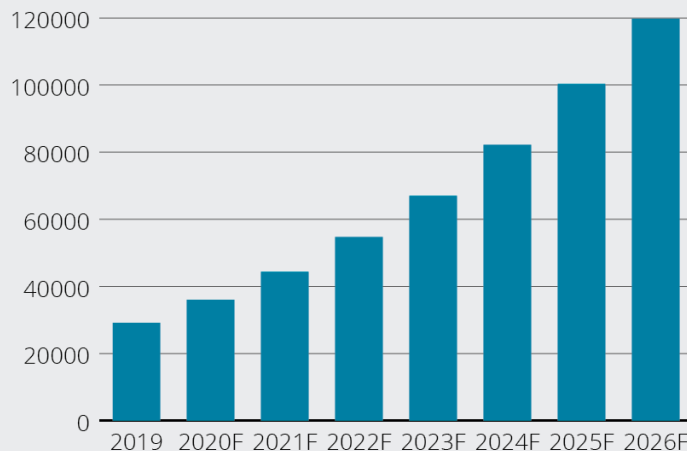
Mitazalimab: Phase II ready CD40 antibody, target validated in pancreatic cancer

5

Well capitalized to execute on plan into Q4 2021

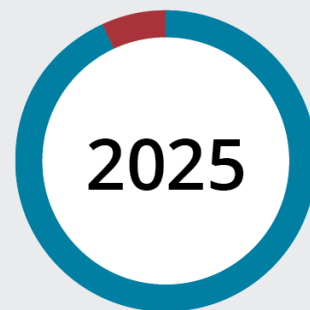
Immuno-oncology, a fast-growing segment

Sales of immuno-oncology treatments, USD million



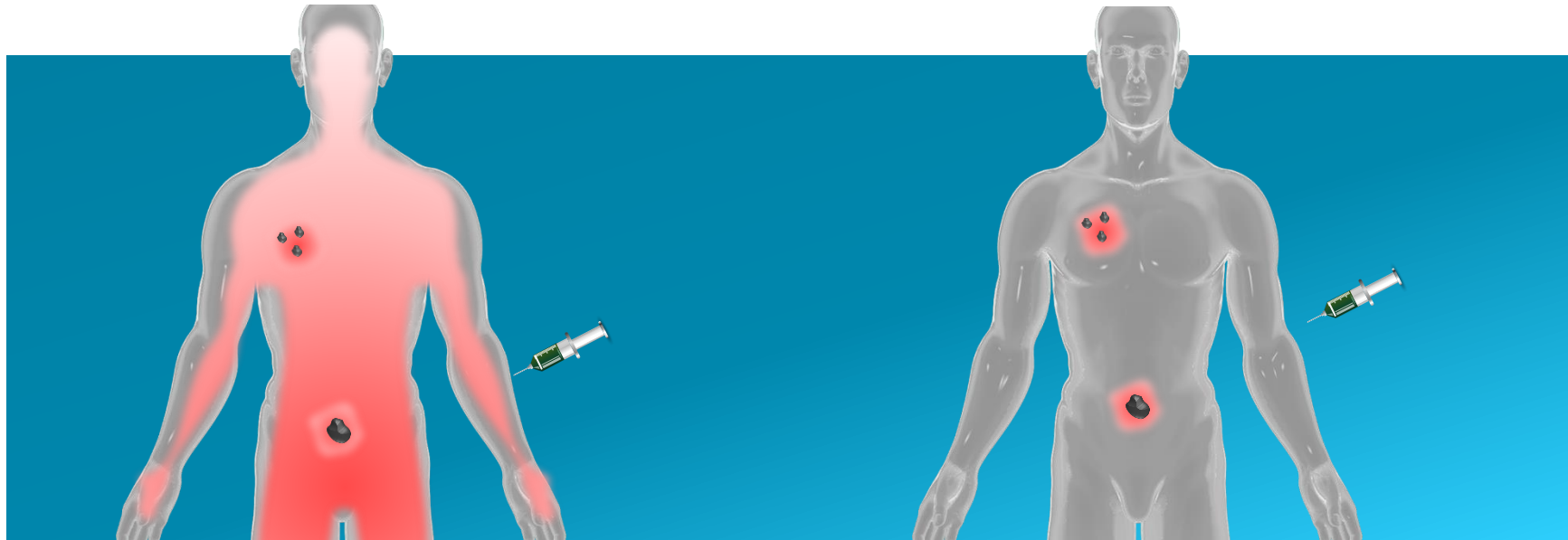
Source: GlobalData

Sales distribution between immuno-oncology and chemotherapy



- All immuno-oncology, 93.3%
- Chemotherapy, 6.7%

Tumor-directed immuno-oncology



**General immune activation -
associated with risk of severe
adverse effects**

**Selective activation –
systemic immunity with
limited toxicity**

Strong clinical immuno-oncology pipeline



Planned clinical readouts through 2022

2020

- ✓ Interim safety data readout for Phase I **ATOR-1015** study (Q2 2020)
- ✓ Interim readout **ATOR-1017** (Q3 2020)
- ❑ Readout for Phase I **ATOR-1015** study (Q4 2020)

2021

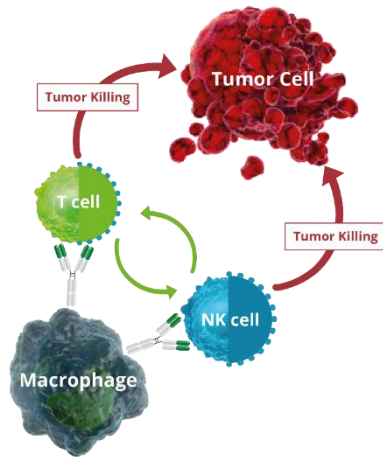
- ❑ Readout for Phase I **ATOR-1017** study (H1 2021)
- ❑ Efficacy data readout for Phase Ib **ATOR-1015** study in melanoma (H2 2021)
- ❑ Interim efficacy readout Phase II **mitazalimab** (H2 2021)

2022

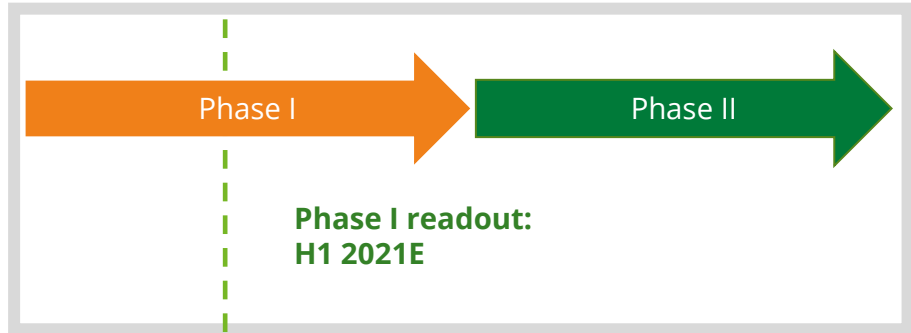
- ❑ Interim efficacy readout for Phase II **ATOR-1015**/PD-1 study in melanoma
- ❑ Efficacy data readout for Phase II **mitazalimab** study in pancreatic cancer

ATOR-1017: Designed for optimal efficacy and safety

A tumor-directed 4-1BB antibody



- > Activates 4-1BB expressing T cells and NK cells
- > Dependent on FcγR-mediated crosslinking
- > Co-localized expression of 4-1BB and FcγRs in tumors results in a tumor-directed effect



Best-in-class

- Superior safety/efficacy profile vs other 4-1BB antibodies

Unique design

- Unique 4-1BB domain
- IgG4 for tumor-directed effect

Target indications

- Head&Neck and gastric cancer

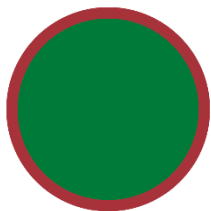
IP

- Patent exclusivity until 2037

ATOR-1017: The optimal 4-1BB mAb

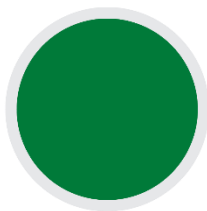
ATOR-1017 was designed to overcome limitations observed with other 4-1BB antibodies

URELUMAB



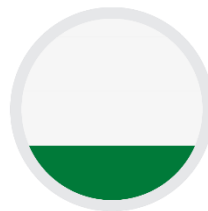
Toxicity issues*
MTD ~ 0.1 mg/kg

ATOR-1017



Good efficacy
Good tolerability

UTOMILUMAB



Poor efficacy
Well tolerated
MTD ≥ 10 mg/kg


Efficacy


Toxicity

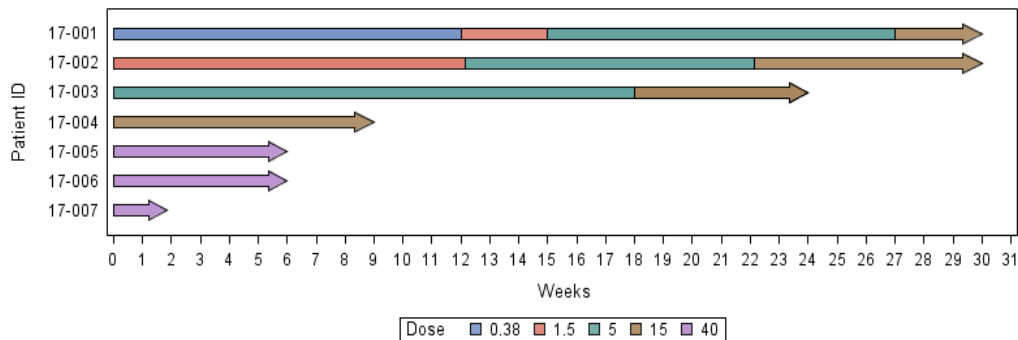
Clinical development with **urelumab was discontinued in phase II, due to liver toxicity at doses above 0.3 mg/kg and poor efficacy at MTD at 0.1 mg/kg (8 mg flat dose)*

ATOR-1017: Phase I interim readout

Encouraging safety profile

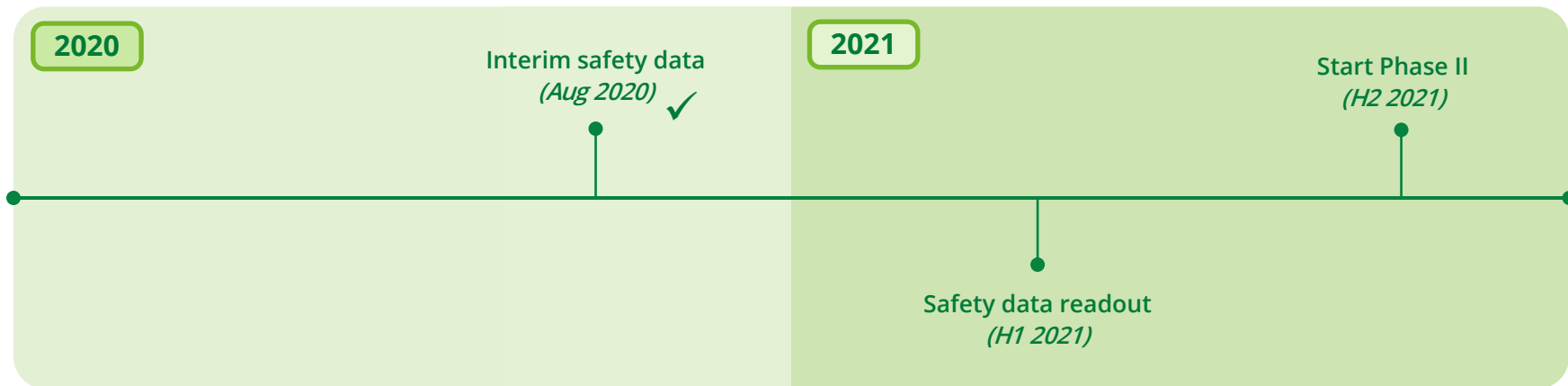
- > Dose-escalation ongoing, 40 mg flat dose has been cleared, next dose is 100 mg
- > 7 patients have been dosed and all are still on-study
- > Few drug related adverse events have been observed and all were mild or moderate (grade 1 or 2).

Patients on study



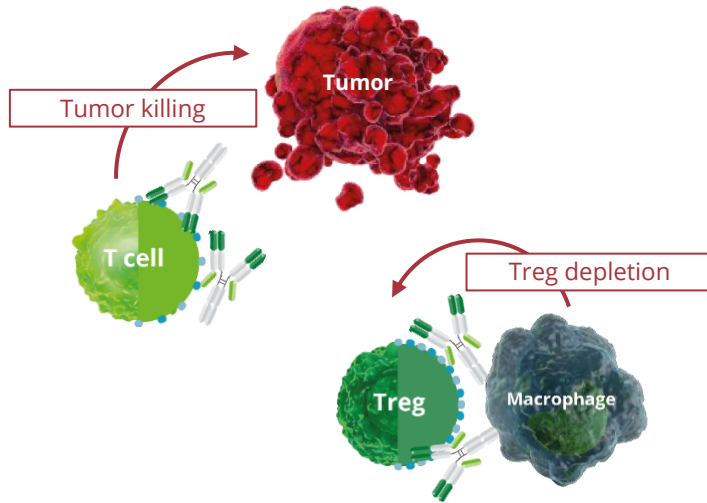
ATOR-1017: Clinical development plan

- > Phase I open-label dose escalation study ongoing with safety data readout H1 2021E
- > Expected to enrol up to 50 patients with metastatic cancer at three Swedish clinics
- > Patients will be receiving ATOR-1017 every 3 weeks
- > Primary endpoints: safety & tolerability, recommended Phase II dose
- > Secondary endpoints: pharmacokinetics, immunogenicity and efficacy



ATOR-1015: First-in-class tumor-localizing CTLA-4 x OX40 bispecific

A safer and more efficacious CTLA-4 targeting antibody



Clinical opportunity

Clinical Status

Phase I started in March 2019. Currently evaluating doses of 12 mg/kg

Clinical Development

Efficacy readout Phase Ib mono study H2 2021E

Opportunity

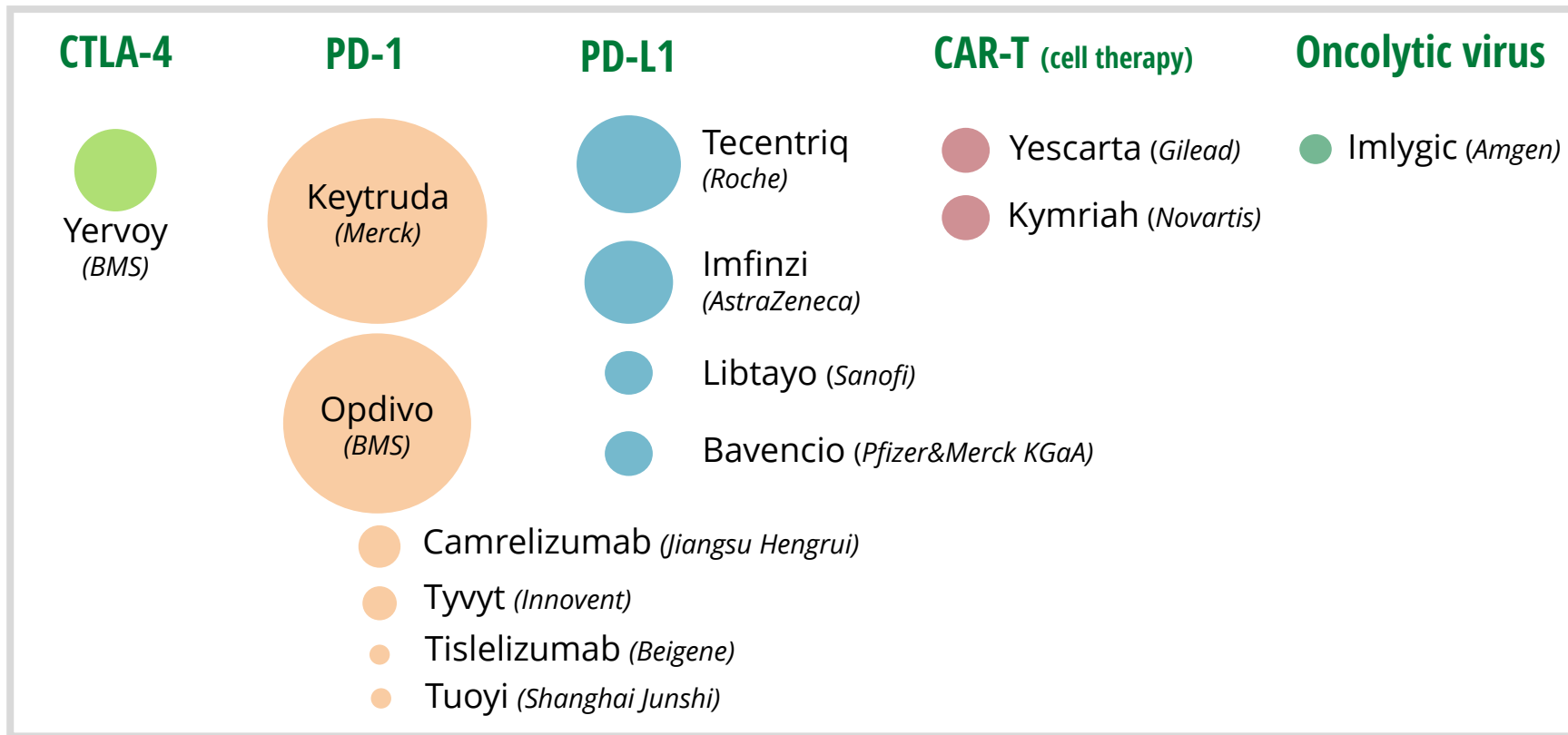
Renal cell carcinoma, colorectal cancer and non-small cell lung cancer

IP

Patent exclusivity until 2034

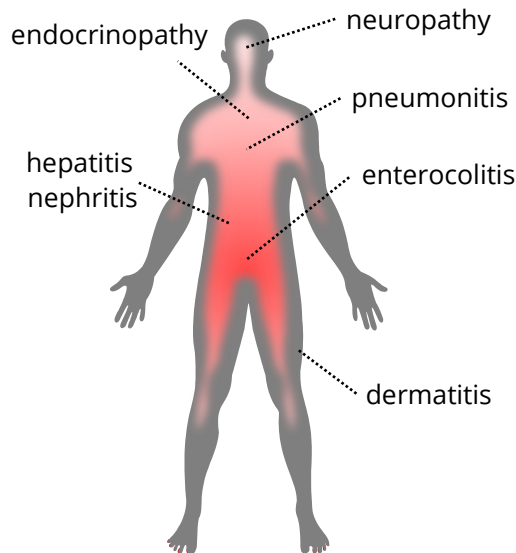


Immunotherapy – USD 20 billion market



ATOR-1015: Medical need for safer CTLA-4 antibodies

Current CTLA-4 drugs cause severe side-effects^{1,2}



- > Yervoy dosing is limited to 4 doses at 3 mg/kg due to toxicities³
- > A safer CTLA-4 therapy may increase utility, reduce discontinuation and increase response⁴
- > Longer duration of CTLA-4 treatment may drive additional efficacy⁵

¹Postow et al. *N Eng J Med*, 2015; ²Wolchok et al. *N Eng J Med*, 2017; ³Yervoy FDA label; ⁴Opdivo FDA label; ⁵Lebbé et al. *J Clin Oncol*, 2019

ATOR-1015: First-in-class tumor-localizing CTLA-4 antibody

CTLA-4 monospecific Ab

 Bristol-Myers Squibb
Yervoy, M

 AstraZeneca
Tremelimumab, Ph III

 agenus
Zalifrelimab, Ph II

2nd gen. CTLA-4 mAbs

 Bristol-Myers Squibb
BMS-986249, Ph II

BMS-986288, Ph I/II

BMS-986218, Ph I/II

 agenus
AGEN-1181, Ph I

CTLA-4 x PD-(L)1 bsAb

 康宁杰瑞
ALPHAMAB ONCOLOGY
KN-046, Ph II

 Akesobio
AK-104, Ph I/II

 AstraZeneca
MEDI-5752, Ph I

 xencor
XmAb-20717, Ph I

 MACROGENICS
MGD019, Ph I

ATOR-1015: Supportive interim Phase I data at AACR/ASCO

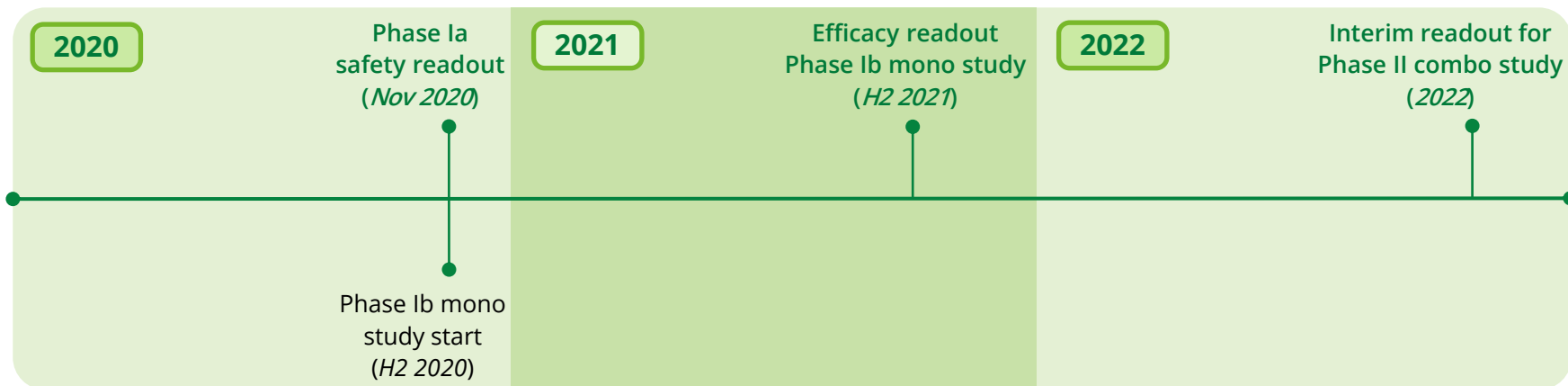
- > **Cancer types:**
 - > Colorectal cancer (n=9)
 - > Uveal melanoma (n=2)
 - > Pancreatic cancer (n=2)
 - > Ovarian cancer (n=2)
 - > Cholangiocarcinoma, Gastric cancer, Cutaneous melanoma, Gallbladder cancer, Cervix cancer, Non small cell lung cancer (n=1 for each)
- > **Adverse events:** No DLTs¹ or severe AEs
- > **Dose:** 750 mg under evaluation
- > **Prior lines of therapy:** median 5
- > **Time on study:** median 8.5 wks (range 2-34)
- > **Best response:** stable disease

¹DLT = Dose limiting toxicity



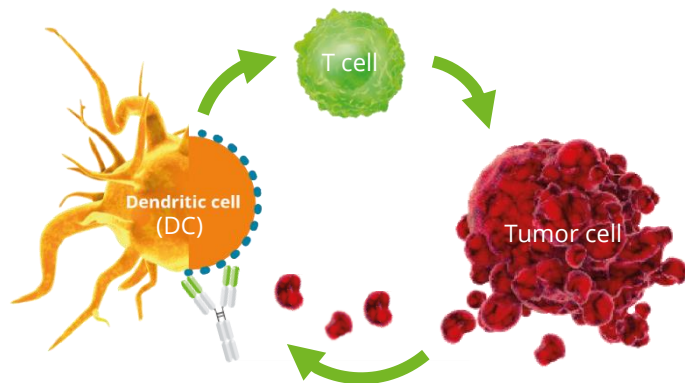
ATOR-1015: Clinical development path

- > Phase I safety ongoing, readout at medical conference in Q4 2020E
- > Phase Ib expansion study to start H2 2020E in melanoma, preliminary efficacy readout H2 2021E
- > Phase II combination study with anti-PD-1 in melanoma with planned efficacy readout 2022E



Mitazalimab: Phase II ready CD40 antibody

Unleashing the power of dendritic cells in IO



- > CD40 the key activating target on dendritic cells
- > CD40 validated clinical effect in pancreatic cancer

Phase I complete

Phase II/III, pancreatic cancer

Other indications: renal, H&N, bladder, lymphoma

Clinical status

Phase II ready CD40 agonist antibody

Regulatory

Preclinical and clinical data package of Pharma quality

Launch

First launch 2026E, peak sales USD 450 million - 1.5 billion (pancreatic cancer)

IP

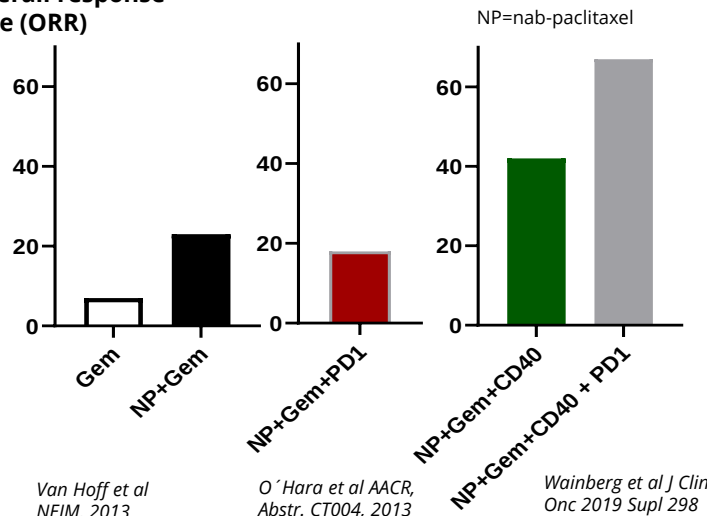
Patent exclusivity until 2032/2035

Pancreatic cancer: clinical validation for CD40



CD40 increases cold tumors' response rates

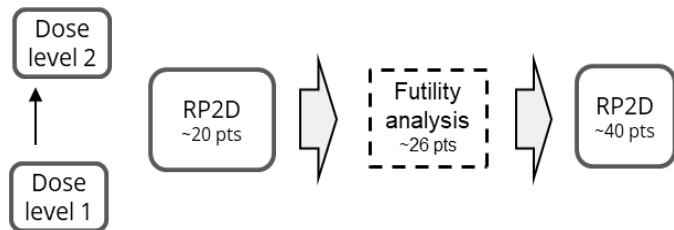
Overall response rate (ORR)



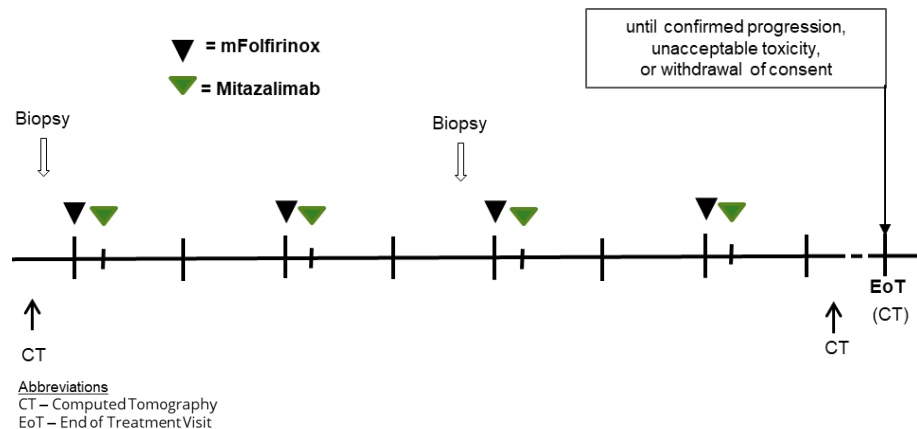
High growth market, with a large unmet medical need for effective treatments

OPTIMIZE-1: Mitazalimab in Pancreatic Cancer

Establish safety and efficacy with Folfirinox



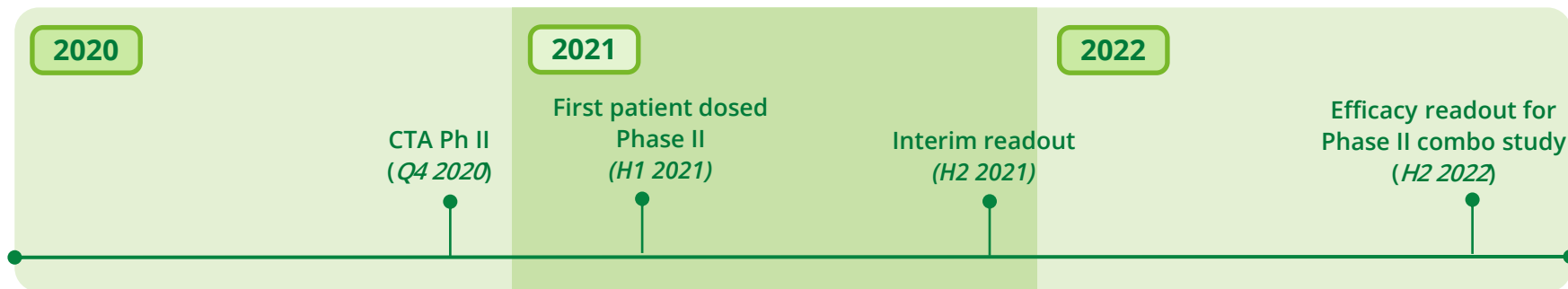
Dosing regimen: Folfirinox 2 days before mitazalimab



- > Run-in part to demonstrate safety of mitazalimab in combination with standard of care
- > Expansion at selected dose (RP2D) with an additional 20 patients for interim efficacy evaluation followed by further expansion upon positive signal
- > Dosing schedule of mitazalimab based on mechanism of action

Mitazalimab: Clinical development path

- > Current status: Phase I completed, Phase II ready
- > Phase II combination with chemotherapy, mFOLFIRINOX, in pancreatic cancer with planned CTA Q4 2020. PD-1 to be added upon efficacy response.
- > Interim readout H2 2021E
- > Efficacy readout, H2 2022



Investment highlights



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Mitazalimab: Phase II ready CD40 antibody, target validated in pancreatic cancer

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Well capitalized to execute on plan into Q4 2021



We fight cancer through
the immune system

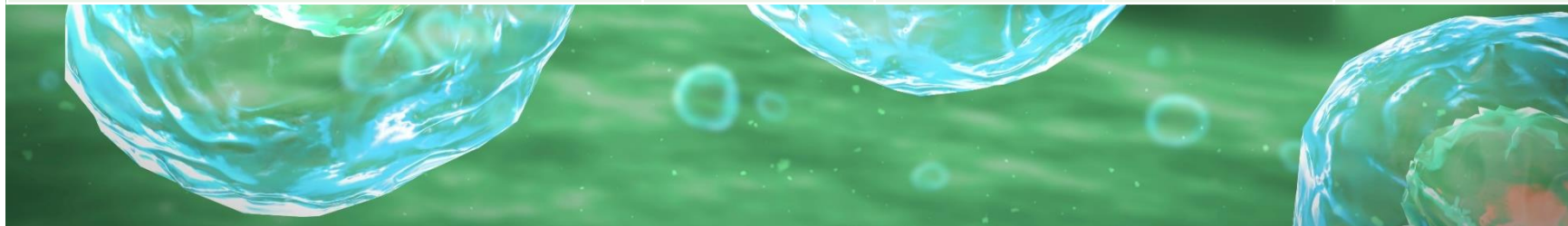
A revolution for life

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Appendix

Financials as End of June 2020

(MUSD)	QUARTER		YEAR	
	Q2 2020	Q2 2019	2019	2018
Net Sales	0.5	0.0	0.5	2.9
Operating result	-8.5	-10.4	-23.0	-16.5
Net Result	-8.3	-10.1	-22.5	-16.2
R&D costs % of operating cost	73%	76%	79%	77%
Liquidity at end of the period (incl bonds)	18.2	38.6		
Equity per share, after dilution (USD)	0.3	0.6		
Number of FTE's at end of the period	56	56		



Largest shareholders 31 July 2020

Shareholder	%
Total Banque Intl. Luxembourg	19.3
Sunstone	8.1
Lars Spånberg	4.5
Johnson & Johnson Innovation	3.8
Avanza pension	3.6
4th AP-fund	3.2
Öhman funds	2.8
Magnus Peterson	2.3
Mikael Lönn	2.0
Stena AB	2.0
10 largest shareholders total	51.5