KIADIS PHARMA | 1H'19 FINANCIAL RESULTS | SEPTEMBER 10, 2019

EURONEXT: KDS

Leveraging the natural strengths of humanity and our collective immune systems to source the best cells for life

Cell therapy to treat cancer, combining innate and adaptive immune system

Kiadis pharma

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Agenda

Welcome	Amy Sullivan, SVP Corporate Affairs
Opening remarks; business highlights from 1H2019	Arthur Lahr, CEO
Financial highlights for six months ended June 30, 2019	Scott Holmes, CFO
Kiadis milestones and closing remarks	Arthur Lahr, CEO

Acquisition of Cytosen positions Kiadis with novel T-cell and NK-cell platforms to treat cancer

Cell therapy to treat cancer, combining innate and adaptive immune system

Revolutionize haploidentical HSCT with combination of T-cell and NK-cell therapies

Develop cancer cell-therapies with NK-cells (e.g., treat AML R/R)

ATIR101: allodepleted T-cells

CSTD002: potent high dose NK cells

ATIR101: phase 3 enrolling; MAA on file in EU (based on phase 2)

CSTD002: clinical trials to start in 2020

Strong US presence, e.g., BMT-CTN and SAB, medical and finance functions

US/EU Orphan drug designations and US FDA RMAT for ATIR101

HSCT: hematopoietic stem cell transplantation; Haplo: haploidentical (genetically half matched); allodepleted T-cells: T-cells without patient specific T-cells that could cause GVHD; GVHD: Graft versus Host disease; RMAT: Regenerative Medicine Advanced Therapy ('breakthrough designation'); PTCy: post transplant cyclophosphamide

Kiadis: Cell-based cancer immunotherapy with proprietary and synergistic NK-cell and T-cell platforms

	INDICATION	PRECLINICAL UP TO PHASE 2	PHASE 3	FILING	CATALYSTS	COMMER-CIAL RIGHTS	STATUS
ATIR101 'Safe' T-cells	Adjunct to HSCT (EU)				Potential EU conditional approval and initial launch (2020)	Kiadis Pharma	EMA MAA on file (based on phase 2; 37 patients)
	Adjunct to HSCT (US)				Phase 3 enrollment and interim read out (2021)	Kiadis Pharma	FDA RMAT 'breakthrough' designation
CSTD002 Potent NK-cells	Adjunct to HSCT				Start trial with BMT-CTN (2020)	Kiadis Pharma	Proof-of-concept at MDACC (25 patients)
	Cancer treatment				Start AML R/R trial (2020) Start programs in new cancer indications	Kiadis Pharma	Proof-of-concept at MDACC for AML R/R (8 patients)

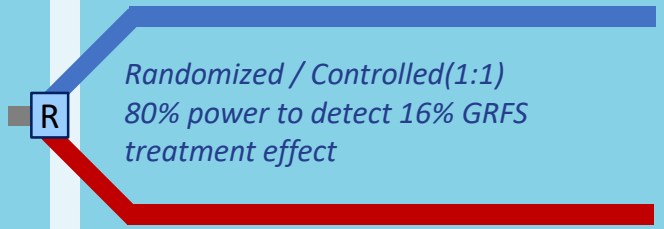
ATIR101 – Regulatory Process

- EMA's review of the MAA for ATIR101 continues

ATIR101 Phase 3: Clinical benefit versus standard-of-care Haploidentical HSCT with PTCy

~50
CENTERS
EU, US, CANADA AND ISRAEL

250
PATIENTS
AML / ALL / MDS



Haplo HSCT (TCD) plus ATIR:
T-cell deplete CD34+HSCT plus ATIR 2 mln cells/kg at 30 days

Haplo HSCT with PTCy:
T-cell replete HSCT with 50 mg/kg cyclophosphamide at days 3 and 5 post HSCT & prophylactic immunosuppressants

PRIMARY ENDPOINT:
GVHD-Free & Relapse-Free Survival (GRFS)
- Primary analysis: at 156 events (11,4% GRFS treatment effect)
- Interim analysis: at 105 events (17,6% GRFS treatment effect, hazard ratio 0.61)

SECONDARY ENDPOINTS:
Overall Survival (OS), Progression Free Survival (PFS), Relapse, Non Relapse Mortality (NRM)

OTHER:
Randomized at enrollment; Balanced conditioning regimens; Stratification for Disease Risk Index, disease and treatment site

ATIR101: EU Launch Preparation

EMA FILING AND LAUNCH PREPARATION

- MAA filed based on Phase 2 (treatment effect over historical 'placebo' control); currently under review
- Building medical and commercial infrastructure
  - Medical affairs
  - Account management, marketing, market access
  - Patient specific supply chain
- Developing reimbursement dossiers (limited to countries where possible on Phase 2 data)

LAUNCH COUNTRIES

CSTD002: NK-REALM preliminary Phase 1/2 trial design in collaboration with BMT-CTN* to begin in 2020

HAPLO-IDENTICAL NK-CELLS TO PREVENT POST-TRANSPLANT RELAPSE IN AML AND MDS (NK-REALM)

- Study designed with and to be conducted with in collaboration with the US BMT-CTN
- Single arm, open label multicenter trial investigating use of CSTD002 for treatment of approximately 63 patients with high-risk AML or MDS undergoing a haploidentical HSCT using PTCy protocol
- First cohort of patients to be evaluated during a safety lead-in phase
- Primary endpoint: cumulative incidence of relapse at 1-year post transplant
- Dosing: 1 x 10^8 NK cells per kg on days -2, +7 and +28 after transplant graft infusion

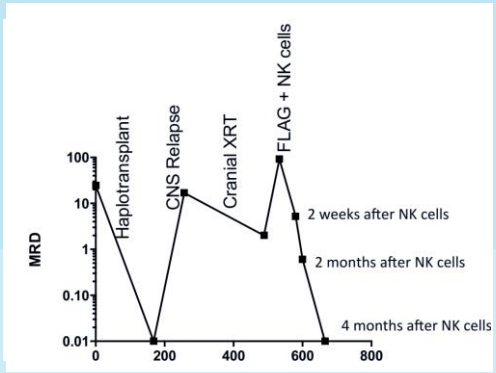
*Pending discussion with FDA

CSTD002: Clinical proof-of-concept* for treatment of AML R/R 2nd line salvage – Plan to initiate phase 1/2 study in 2020

	SIZE	PATIENTS: AML R/R 2ND LINE SALVAGE	DOSING	FOLLOW UP	OUTCOMES
MD Anderson Cancer Center	n=8	• 4 median prior treatments • 3/8 prior HSCT • 43% median BM blasts	6 doses (11 days)	329 days (71-730)	• CR/CRi: 75% (day 30) • HSCT: 50% • Survival: 37,5% (1 year)
MD Anderson Cancer Center and Brazil	N= 13	• 4 median prior treatments • 7/13 prior HSCT • 45% median BM blasts	6 doses (11 days)	202 days (39-590)	• CR/CRi: 69%

CASE EXAMPLE (AML, MALE, 25 YRS):

- 8 lines of prior treatment, incl prior failed HSCT
- Active disease, 90% BM blasts
- Treated with NK cells plus FLAG, no subsequent HSCT
- No treatment side effects
- Complete response
- Ongoing MRD decrease and immunologic activity (at 120 days)
- Alive at 1 year; Relapsed/ death at 2 years



* NK-cells produced with feeder cells expressing mbIL21 and 41bbl, not with nanoparticles; Ciurea SO, et. al. ASCO June2018; Ciurea SO Haplo2018. Nov2018

NK cells: clinical validation in solid and blood cancers in combination with MAbs

STARTING RESEARCH IN NEW CANCER INDICATIONS, E.G. WITH MAbs

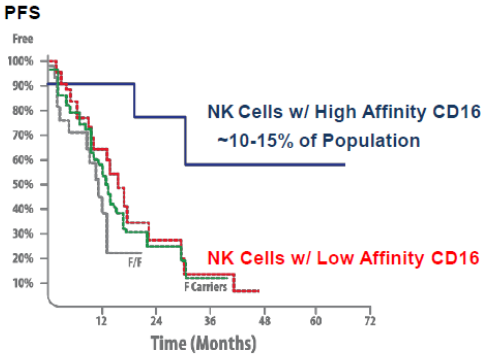
DARZALEX (daratumumab)

Herceptin trastuzumab

ERBITUX Cetuximab

Herceptin

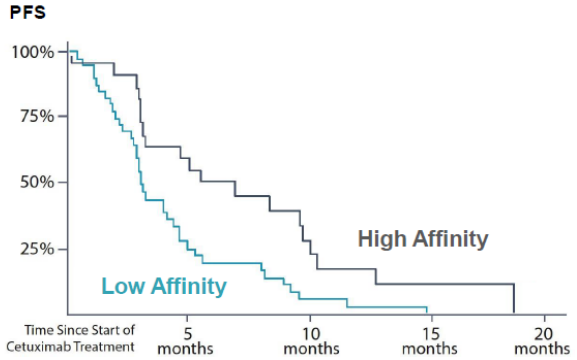
Metastatic Breast Cancer



Musolino et al, J. Clin Oncol, 26, 1789, 2008

Erbitux

Colorectal Cancer



Bibeau et al, J. Clin Oncol, 27, 1122, 2009

CLINICAL DATA: TREATMENT BENEFIT OF NK-CELL ACTION WITH MABS

Financial Highlights 1H2019

Financial highlights for the six months ended June 30, 2019

(Amounts in EUR million, except per share data)	1H2019	1H2018	Change
Total revenue and other income	-	-	-
Total operating expenses	(25.7)	(11.1)	(14.6)
Research and development	(16.2)	(7.7)	(8.5)
General and administrative	(9.5)	(3.4)	(6.1)
Operating result	(25.7)	(11.1)	(14.6)
Net financial result	(0.2)	(3.0)	2.8
Net result	(25.9)	(14.1)	(11.8)
Net operating cash flow	(21.4)	(10.6)	(10.8)
Cash position at end of period	62.7	60.3	2.4
Equity	59.7	44.1	15.6
Earnings per share before dilution (EUR)	(1.03)	(0.74)	(0.29)

Kiadis anticipated news flow

2019

- Continued enrollment in Phase 3 for ATIR101
- Establish Scientific Advisory Board

2020

- Potential EMA approval and launch of ATIR101
- Continued enrollment in Phase 3 for ATIR101
- Initiate clinical trial of CSTD002-NK in HSCT
- Initiate clinical trial of CSTD002-NK in AML R/R
- Initiate additional trials with ATIR and/or CSTD002-NK

2021

- Complete enrollment in Phase 3 for ATIR101
- Interim data for Phase 3 for ATIR101 (upon 105 events)
- Interim data for clinical trial(s) with CSTD002-NK
- Continued launch of ATIR101 in EU
- Initiate additional trials with ATIR and/or CSTD002-NK

Kiadis pharma

When it comes to life-threatening diseases, we are one family.

Kiadis is leveraging the natural strengths of humanity and our collective immune systems to source the best cells for life.

Our uncompromising approach to serve patients, their families and care givers aims to minimize harm and maximize help – delivering personalized treatments for every single patient to offer hope, reduce suffering and provide new life.