



INTERIM REPORT Q2 2023 | ACTIVE BIOTECH AB

Successful first half of the year

SECOND QUARTER IN BRIEF

- Safety and preliminary efficacy of naptumomab in combination with durvalumab presented at AACR 2023 (April 19)
- Positive interim data from the ongoing study of tasquinimod in heavily pre-treated patients with relapsed and refractory multiple myeloma presented at ASCO 2023 (May 26)
- Positive safety and tolerability in clinical phase I study and preclinical ocular biodistribution data supporting the further development of laquinimod eye drops for inflammatory eye diseases were established (May 30)
- New preclinical data regarding tasquinimod's anti-fibrotic effects in myelofibrosis were presented at EHA 2023 (June 10)

EVENTS AFTER THE END OF THE PERIOD

- Collaboration agreement for clinical study with tasquinimod in myelofibrosis signed (July 31)
- As communicated previously in the Q1, 2023 Interim Report, various sources of future financing are being explored, including partnering the company's development programs, directed share issues to new investors, rights issue to current investors as well as other types of financing alternatives. These explorations remain ongoing. To secure the continued operations of Active Biotech, two major shareholders have provided a financing commitment to the Company of approximately 20 MSEK, to enable the time necessary to conclude on the ongoing opportunities being explored

FINANCIAL SUMMARY

SEK M	Apr-Jun		Jan-Jun		Full-year 2022
	2023	2022	2023	2022	
Net sales	-	-	-	-	-
Operating profit/loss	-11.3	-14.0	-23.1	-29.3	-57.9
Profit/loss after tax	-11.2	-14.3	-22.7	-30.0	-58.4
Earnings per share (SEK)	-0.04	-0.07	-0.09	-0.14	-0.25
Cash and cash equivalents (at close of period)			15.7	21.9	41.8

The report is also available at www.activebiotech.com

This information is information that Active Biotech is obliged to make public pursuant to the EU Market Abuse Regulation and the Securities Markets Act. The information was submitted for publication, through the agency of the contact persons set out below, at 2023-08-24 08:30 CEST.



The progress of our clinical projects during the first half of 2023 has secured us several opportunities

COMMENTS FROM THE CEO

All our established clinical projects advanced well in the quarter, with positive clinical results. For naptumomab and tasquinimod, new data were presented at three prestigious scientific conferences, AACR, ASCO and EHA. For laquinimod, the results from the phase I study of the proprietary eye drop formulation will be summarized at the IOIS meeting in September.

Safety and preliminary efficacy data from the phase Ib trial of naptumomab were presented in April at the American Association for Cancer Research (AACR) annual meeting in Orlando, Florida. The data, which are based on 59 patients with previously treated advanced or metastatic disease, demonstrate that naptumomab in combination with durvalumab is well tolerated, with limited toxicity at the recommended phase II dose. Durable, including complete, treatment responses were seen in patients where response to checkpoint inhibitor alone was not expected. In addition, the results indicate that pre-treatment with obinutuzumab, a B-cell therapy, reduces the formation of anti-drug antibodies against naptumomab. As a next step, a cohort expansion of this trial with patients suffering from esophageal cancer is planned.

The phase IIa study with naptumomab in combination with docetaxel in patients with lung cancer is ongoing. Enrollment to the study is completed, and results are expected by the end of 2023 at the earliest. In parallel, our partner NeoTX is planning a new phase I study with naptumomab combined with the checkpoint inhibitor pembrolizumab in patients with urothelial cancer. This study is expected to start enrollment next in the USA in the coming year.

Interim data from the phase Ib/IIa study of tasquinimod in multiple myeloma were presented in June at the annual meeting of the American Society of Clinical Oncology (ASCO) in Chicago. Tasquinimod, as monotherapy or in combination with lenalidomide, ixazomib and dexamethasone (IRd-combination), has a favorable safety profile in heavily pretreated patients with treatment resistance to standard myeloma therapy.

In the monotherapy part with tasquinimod, three patients with progressive disease at the start of the study had a stabilization of the disease during the study. 20% of the patients so far treated with tasquinimod and the IRd-combination (1 patient of 5 in total) has a durable partial response since April 2022, despite that the patient was previously resistant to similar combinations. Recruitment to the study is ongoing.

At the annual meeting of the European Hematology Association (EHA) in Frankfurt in June, new data that provide a deeper understanding of tasquinimod's effects in the rare blood cancer myelofibrosis were presented.

Preparations are also underway to start a European clinical proof-of-concept study with tasquinimod in myelofibrosis, which is mainly funded by the Oncode Institute. The study will be conducted in the Hovon research network at clinics in Holland and Germany, and enrollment is projected for start of 2024. Our preclinical research collaboration on tasquinimod in myelofibrosis with the MD Anderson Cancer Center in Texas continues according to plan.

In the laquinimod project, the phase I eye drop formulation study in healthy subjects is now fully analyzed, and a clean safety profile has been confirmed also at repeated dose levels well above the projected therapeutic daily dose. Data from this study, along with preclinical data documenting laquinimod distribution within the eye upon application of eye-drops, will be presented at a poster session at the International Ocular Inflammation Society (IOIS) 2023 meeting in Berlin, September 6-9.

To ensure that laquinimod reaches parts of the eye where inflammation occurs, and to support the further development of this formulation in patients with uveitis, a clinical ocular biodistribution study of the eye drop formulation will be conducted. The study is planned to start in the latter part of 2023 and will be performed in collaboration with researchers at the Byers Eye Institute in Stanford University, USA. In parallel, commercial activities will be initiated with the aim of establishing a partnership for the continued development of laquinimod in patients with uveitis.

The progress of all our clinical projects during the first half of 2023 has secured Active Biotech several opportunities and choices for the further development activities. Following a strategic review of the possible clinical programs and their financing, we have decided to focus our main activities on the ongoing programs with tasquinimod in myelofibrosis. Currently, the ongoing study with tasquinimod in multiple myeloma will be completed, and from a safety and efficacy perspective, the data achieved will complement the data package for myelofibrosis, and thus strengthen tasquinimod's therapeutic potential in hematological cancers. Operations will focus on preparations for start of the externally funded phase II study in Europe in the beginning of 2024. In addition, the preclinical program within myelofibrosis designed together with MD Anderson will advance.

In the laquinimod project the planned clinical ocular biodistribution study will be conducted. Beyond that, only commercial activities will be conducted in the project.

The projects have advanced well, and we reported several positive results in the beginning of the year, which makes our scientific platform increasingly stable for further studies. I look back on a successful first half of the year and look forward to updating you on important events in the continued development of the projects.



Helén Tuvešson, CEO

PROJECTS

Active Biotech’s project portfolio includes projects for the development of drugs for the treatment of cancer and inflammatory diseases.

Disease Area	Discovery	Preclinical	Phase I	Phase II	Phase III	Partner	
Hematological malignancies	Tasquinimod Multiple myeloma*						
	Tasquinimod Myelofibrosis**						
Inflammatory eye disorders	Laquinimod Eye drop, safety and tolerability						
	Laquinimod Uveitis**						
Solid tumors	Naptumomab Combination with docetaxel in non-small cell lung cancer						NeoTX
	Naptumomab Combination with anti-PDL1 (durvalumab) in solid tumors						NeoTX AstraZeneca
	Study ongoing * In an academic partnership with the Abramson Cancer Center, Philadelphia, University of Pennsylvania ** Study preparations ongoing						

Tasquinimod

Tasquinimod is an orally active small molecule immunomodulator with a novel mode of action, blocking tumor supporting pathways in the bone marrow microenvironment. Tasquinimod is being developed for the treatment of blood cancers, such as multiple myeloma and myelofibrosis.

This is tasquinimod

The tumor microenvironment in the bone marrow is essential for development of blood cancers and a key driver of disease recurrency as well as resistance to treatment.

Tasquinimod targets cells in the microenvironment of the bone marrow, immunosuppressive myeloid cells, endothelial cells, and mesenchymal cells, which play a central role in the development of blood cancers. Tasquinimod affects the function of these cells, leading to reduced tumor growth, reduced fibrosis, and restored hematopoiesis.

Multiple myeloma

Multiple myeloma is an incurable blood cancer where abnormal plasma cells in the bone marrow grow uncontrollably while other blood forming cells, such as white and red blood cells and blood platelets, are suppressed. This leads to anemia, infections, destruction of bone tissue and progressive loss of renal function. Despite new treatments which have greatly improved survival of multiple myeloma patients, the biological heterogeneity of the disease and the emergence of drug resistance is a major challenge, and the medical need of innovative treatment modalities remains high.

The market for treatment of multiple myeloma

The expected annual incidence of new diagnosed cases of multiple myeloma in the US alone is approximately 30,000 patients. In Europe and Japan approx. 40,000 and 8,000 new patients, respectively, are expected to be diagnosed each year (Global Data Report March 2019, Multiple Myeloma – Global Drug Forecast and Market Analysis to 2027).

The global sales of drugs for the treatment of multiple myeloma is projected at USD 21,6 billion in 2027 (Global Data Report March 2019, Multiple Myeloma – Global Drug Forecast and Market Analysis to 2027).

The market for drugs used in the treatment of multiple myeloma experiences strong growth and is expected to continue to grow strongly due to the greater incidence in an elderly population, longer progression-free and overall survival, and thanks to more treatments and combination options are made available. The US accounts for around 60 percent of the market, the EU for approximately 23 percent and Japan and China for 17 percent of the total market sales (Global Data Report March 2019, Multiple Myeloma – Global Drug Forecast and Market Analysis to 2027).

Current treatments

Multiple myeloma patients undergo several lines of treatment. In both early and later treatment lines, the goal is to reduce tumor burden, improve symptoms and thereby achieve as long a period of effective disease control as possible. To support deeper and durable responses and overcome treatment resistance patients are as standard treated with combinations of drugs from available product classes. Currently, the market is dominated by drugs that can be divided into the following classes: immunomodulatory imides (IMiDs), proteasome inhibitors (PI), monoclonal antibodies, bispecific antibodies, Chimeric Antigen Receptor T- cells (CAR-T) and alkylating agents.

Tasquinimod in multiple myeloma

Tasquinimod is being developed as a new product class with a distinct and novel mechanism of action and thus has the potential to overcome the problem of drug resistance. The clinical safety profile of tasquinimod is well known from previous clinical phase I-III trials. Given the good tolerability and the possibility to combine with available product classes, tasquinimod has the potential to expand over time from an initial position as the 3rd line treatment to earlier lines of treatment, similar to the patient population in the ongoing clinical study. There is a significant market opportunity for a novel drug in a new product class in multiple myeloma.

Ongoing clinical development

Based on preclinical data and the previous clinical experience with tasquinimod, a clinical study was initiated, and the first patient was dosed in August 2020. The study recruits relapsed refractory multiple myeloma patients after at least one prior anti-myeloma therapy and is conducted in two parts:

- First part (A) studying of tasquinimod as a monotherapy
- Second part (B) studying the combination of tasquinimod and an oral standard anti-myeloma regimen (IRd; ixazomib, lenalidomide, dexamethasone)

Primary endpoint in both parts is safety and tolerability, and key secondary endpoint is preliminary efficacy by objective response rate.

Important milestones were reached in October 2021 and February 2022, respectively. Ten patients in part A had been treated with increasing doses of tasquinimod and the safety read-out showed that tasquinimod was generally well tolerated. The optimal dose and schedule of tasquinimod, when used as a single agent in patients with multiple myeloma has been established at 1 mg per day after a one-week run in of 0.5 mg daily. This is similar to the treatment schedule used in previous studies of tasquinimod. The patients included in this study phase were heavily pretreated, and 8 of the 10 patients were triple refractory to IMiDs, proteasome inhibitors, and anti-CD-38 monoclonal antibodies. While none of the patients formally achieved a partial response, 3 patients with documented progressive myeloma at study entry achieved significant periods of stable disease on single agent tasquinimod therapy.

This suggests that tasquinimod has anti-myeloma activity in patients with advanced disease that is resistant to established therapies.

In February 2022, the trial subsequently advanced to the previously planned combination part of the phase Ib/IIa study in which treatment with tasquinimod is tested in patients with multiple myeloma together with the orally administered anti-myeloma agents ixazomib, lenalidomide, and dexamethasone (IRd). Interim data from the study were presented at the annual meeting of the American Society of Clinical Oncology (ASCO), in June 2023 in Chicago. The data showed that tasquinimod alone and in combination with IRd was well tolerated. Three patients in the monotherapy part with progressive disease at study entry had a stabilization of the disease during the study. These three patients had 6-12 prior lines of therapy before entering the study. Of the patients so far treated with tasquinimod and IRd, 1 patient in 5 (20%) has a durable partial response that has been ongoing since April 2022, despite the patient previously being resistant to similar combinations. Recruitment to the combination part of the study is ongoing.

The study is carried out in an academic partnership with Abramson Cancer Center in Philadelphia, PA, US, with Dr. Dan Vogl as the principal investigator. More information about the study design is available at clinicaltrials.gov (NCT04405167).

Myelofibrosis

Myelofibrosis is a rare (orphan) blood cancer belonging to a group of disorders called myeloproliferative neoplasms with an estimated annual incidence of 0.4-1.3 cases per 100 000 people in Europe.

The underlying cause of myelofibrosis is unknown. Patients with myelofibrosis have an abnormal production of blood-forming cells leading to the replacement of healthy bone marrow with scar tissue (fibrosis). Due to the lack of normal blood cell production, patients typically show laboratory value abnormalities, such as anemia and changes in white blood cell counts, and blood cell-differentiation. Later symptoms include enlargement of the spleen, an increased risk for infections, night sweats and fever. Myelofibrosis is associated with shortened survival and causes of death include bone marrow failure and transformation into acute leukemia.

Current treatments and market

Myelofibrosis can be treated with bone marrow transplantation for eligible individuals, erythropoietin to manage anemia and JAK2 inhibitors to reduce spleen size. Today the following drugs are approved for these patients as symptom-directed therapy: Hydroxy-urea, ruxolitinib, fedratinib and pacritinib (the latter three are JAK inhibitors). At present there are no approved therapies that would reverse bone marrow fibrosis in myelofibrosis, and there are only limited treatment options available for myelofibrosis patients whose disease progress during JAKi treatment or cannot tolerate JAKi. The projected sales in the 8 major markets (US, 5EU, Japan and China) is USD 2,9 billion by 2031 (Global Data Report May 2023 – Myelofibrosis – Market Forecast 2021-2031).

Tasquinimod in myelofibrosis

In collaboration with a research group at Erasmus MC, the Netherlands, Active Biotech will explore myelofibrosis as a new high value orphan indication for tasquinimod within blood cancers. In February 2022, a global patent license agreement was signed with Oncode Institute, acting on behalf of Erasmus MC, for tasquinimod in myelofibrosis. Under the agreement, Oncode Institute grants to Active Biotech a global exclusive license to develop and commercialize tasquinimod in myelofibrosis. A proof-of-concept phase II study with tasquinimod in myelofibrosis patients previously treated with JAK inhibitor (JAKi) or ineligible to JAKi is planned to start enrolling in early 2024. The study is funded by Oncode Institute. Active Biotech also has a collaboration with a research group at MD Anderson, Texas, US with a current focus on preclinical experiments. In May 2022 FDA granted orphan drug designation for tasquinimod in myelofibrosis.

Previous clinical experience of tasquinimod

Tasquinimod has been in development for the treatment of prostate cancer and has completed a phase I-III clinical development program. While the results from the phase III trial in prostate cancer showed that tasquinimod prolonged progression-free survival (PFS) compared to placebo, tasquinimod did not extend overall survival (OS) in this patient population and the development for prostate cancer was discontinued. Tasquinimod was studied in both healthy subjects and cancer patients. Clinical effects and a favorable safety profile have been demonstrated in more than 1,500 patients, equivalent to more than 650 patient-years of exposure to tasquinimod. Extensive datasets including a regulatory package of preclinical and clinical safety and full commercial scale CMC documentation has been generated.

EVENTS DURING THE SECOND QUARTER

- Positive interim data from the ongoing study of tasquinimod in heavily pre-treated patients with relapsed and refractory multiple myeloma presented at ASCO 2023 (May 26)
- New preclinical data regarding tasquinimod's anti-fibrotic effects in myelofibrosis were presented at EHA 2023 (June 10)

EVENTS AFTER THE SECOND QUARTER

- Collaboration agreement for clinical study with tasquinimod in myelofibrosis signed (July 31)

Laquinimod

Laquinimod is a first-in-class immunomodulator with a novel mode of action for the treatment of severe inflammatory eye diseases such as non-infectious uveitis.

This is laquinimod

It has been shown in experimental models of autoimmune/inflammatory diseases that laquinimod targets the aryl hydrocarbon receptor (AhR) that is present in antigen-presenting cells and involved in the regulation of these cells. By targeting the AhR, antigen presenting cells are re-programmed to become tolerogenic, so that instead of activating pro-inflammatory T cells, regulatory T cells with anti-inflammatory properties are activated leading to dampening of the inflammation.

Non-Infectious Uveitis

Non-infectious uveitis (NIU) is the inflammation of the uveal tract (iris, ciliary body, and choroid), but can also lead to inflammation of nearby tissues, such as the retina, the optic nerve, and the vitreous humor, in the absence of an infectious cause. The uvea is crucial for the delivery of oxygen and nutrients to the eye tissues, and inflammation of the uvea can cause serious tissue damage to the eye, with symptoms including general vision problems and a risk of blindness. Furthermore, floater spots in the eye, eye pain and redness, photophobia, headache, small pupils, and alteration of iris color are common symptoms.

If left untreated, uveitis can lead to severe eye problems, including blindness, cataract, glaucoma, damage to the optic nerve, and detachment of the retina. Non-infectious uveitis often occurs in connection with systemic autoimmune diseases such as sarcoidosis, multiple sclerosis and Crohn's disease. Uveitis can be divided into subtypes depending on the location of the inflammation. Intermediate, posterior and panuveitis (non-anterior non-infectious uveitis, NA-NIU) are the most severe and highly

recurrent forms which can cause blindness if left untreated. Laquinimod will be developed as a new treatment option for non-infectious uveitis.

The market

There are limited treatment options for patients with NA-NIU. The drug of choice for most patients remains long term high dose corticosteroid therapy. Still, about 40 percent of patients fail in achieving disease control, or cannot continue with high dose corticosteroids due to side effects (Rosenbaum JT. Uveitis: treatment. In: Post TW, ed. UpToDate. Waltham (MA): UpToDate; 2021).

Recently, intra-ocular corticosteroid injections have been introduced with benefit for some patients and may limit the systemic corticosteroid-related side effects. However, the procedure of injecting a sustained release depot directly in the eye is associated with risks such as cataract and increased intraocular pressure.

Approximately 1.7 million patients in the nine major markets were diagnosed with uveitis 2020, whereof approx. 600,000 patients received treatment. Of these about 205,000 will fail corticosteroids and are candidates for the 2nd line of treatment (Global Data Report June 2021, Uveitis – Market Forecast 2019-2029).

The global sales of drugs for uveitis totaled approx. USD 300 million in 2020, and sales are expected to reach approximately USD 0.8 billion by 2029 (Global Data Report June 2021, Uveitis – Market Forecast 2019-2029).

Current treatments

The current standard treatment for patients with non-infectious uveitis is high-dose oral corticosteroids or injections of corticosteroids in or around the eye. Immunosuppressants, such as methotrexate or cyclosporin, are used as corticosteroid-sparing regimen in the 2nd line of treatment, whereas anti-TNF antibodies (Humira) are used as a 2nd or 3rd line of treatment.

There is a high unmet medical need for new effective and safe therapies for non-infectious non-anterior uveitis:

- approximately 35 percent of patients suffer from severe visual impairment with the risk of blindness
- approximately 40 percent of patients fail on corticosteroids therapy
- long-term treatment of corticosteroids in high doses is associated with severe side effects
- currently no topical treatment options are available

Therefore, there is a need for new treatments with additive effects to corticosteroids to limit failures in the 1st line of treatment. Furthermore, there is a need for safer therapies that can reduce or replace long-term use of steroids and a treatment that could be administered topically and reach to the back of the eye to minimize systemic adverse effects and to reduce injection-related risks.

Laquinimod in non-infectious uveitis

Laquinimod will be developed as a new treatment for non-infectious uveitis and has the potential to be used in the 1st line of treatment as an add on to corticosteroids as well as in the 2nd line of treatment for patients that have failed corticosteroid treatment.

Clinical development

An eye drop formulation of laquinimod has been developed and a preclinical safety and toxicity bridging program for topical treatment has been completed. A phase I study of laquinimod eye drops in healthy subjects started in December 2021 and the study was completed in January 2023. The study enrolled a total of 54 healthy subjects. Subjects received laquinimod eye drops as a single ascending dose in part 1 and as repeated doses up to 21 days in part 2.

The primary objective of the study was safety and tolerability of laquinimod eye drops and the secondary readouts included ocular toxicity, pharmacokinetics, and plasma exposure. More information

about the study design is available at clinicaltrials.gov (NCT05187403). The eye drop formulation of laquinimod was well tolerated showing a beneficial safety and tolerability profile at dose levels where we expect to achieve therapeutic concentrations. No serious adverse events were reported. Data from this study, along with preclinical data documenting laquinimod distribution within the eye upon application of eye-drops, will be presented at a poster session at the International Ocular Inflammation Society (IOIS) 2023 meeting in Berlin, September 6-9. To ensure that laquinimod reaches the posterior chamber of the eye to support further development in patients with non-anterior uveitis, a clinical ocular biodistribution study of the eye drop formulation will be conducted. The study is planned to start in the latter part of 2023 and it will be conducted in collaboration with researchers at the Byers Eye Institute, Stanford University (Palo Alto, California,, USA) with the Principal Investigator Quan Dong Nguyen, MD, MSc, FAAO, FARVO, FASRS, Professor of Ophthalmology, Medicine, and Pediatrics, Stanford University School of Medicine.

A phase II clinical study of oral and eye drop formulations of laquinimod in patients with non-infectious uveitis is prepared. Start of the study is subjected to collaboration with a partner.

Previous clinical experience with laquinimod

During its years of advanced product development, clinical efficacy and safety data on oral laquinimod was established in more than 5,000 patients, primarily in multiple sclerosis (MS) patients, representing more than 14,000 patient-years of exposure. Extensive datasets have also been generated, including regulatory package of preclinical and clinical safety and full commercial scale CMC documentation.

EVENTS DURING THE SECOND QUARTER

- Positive safety and tolerability in clinical phase I study and preclinical ocular biodistribution data supporting the further development of laquinimod eye drops for inflammatory eye diseases were established (May 30)

Naptumomab

Naptumomab estafenatox (naptumomab) is a tumor targeting immunotherapy that enhances the ability of the immune system to recognize and kill the tumor. Naptumomab is developed for treatment of solid tumors by Active Biotech's partner NeoTX.

This is naptumomab

Naptumomab, a Tumor Targeting Superantigen (TTS), is a fusion protein containing the Fab-fragment of an antibody that targets the tumor-associated 5T4 antigen which is expressed in a high number of solid tumors. The antibody part of naptumomab is fused with an engineered bacterial superantigen that activates specific T cells expressing a particular set of T cell receptors. In short, naptumomab functions by activating T cells and re-direct them to 5T4-expressing tumors. This leads to a massive infiltration of effector T cells into the tumor and tumor cell killing.

Solid tumors

Cancer is a collective name for a large group of diseases characterized by the growth of abnormal cells, which can invade adjacent parts of the body or spread to other organs. Cancer is the second most common cause of death in the world. Lung, prostate, rectal, stomach and liver cancer are the most common types of cancer among men, while breast, rectal, lung, cervical and thyroid cancer are the most common types among women (www.who.int/health-topics/cancer).

The market

Immunotherapy is one of the major breakthroughs of recent years in cancer therapy, which is reflected in the checkpoint inhibitors Keytruda, Opdivo, Imfinzi and Tecentriq achieving combined global sales of USD 30.7 billion in 2021 (Global Data report 2022). The strong sales development for checkpoint inhibitors is expected to continue and sales are forecasted at USD 60.0 billion in 2028 (Global Data report 2022).

Current treatments

Treatment of solid tumors generally combines several types of therapy, which traditionally may include surgery, chemotherapy, and radiation therapy. Immunotherapy has been of decisive importance for cancer care in recent years and the immunoncology market has demonstrated strong growth. Therapies aimed at targeting immune suppression are dominated by biological drugs classified as checkpoint inhibitors. Several new checkpoint inhibitors have been approved for various types of solid tumors.

Naptumomab in solid tumors

Naptumomab increases the immune system's ability to recognize and attack the tumor and preclinical data from various experimental models show synergistic anti-tumor effects and prolonged overall survival when naptumomab is combined with checkpoint inhibitors.

Checkpoint inhibitors are a group of cancer drugs, which function by unleashing the immune system to attack the tumor. Despite the successes over recent years with these immunotherapies in the treatment of solid tumors, it remains a challenge for the immune system to recognize tumor cells and there is a need to optimize the therapeutic effect of checkpoint inhibitors.

Ongoing clinical development

An open label clinical phase IIa study in US will assess naptumomab in combination with docetaxel in patients who had been previously treated with checkpoint inhibitors and have advanced or metastatic non-small cell lung cancer (NSCLC). The primary endpoint is objective response rate. On October 20, 2021, it was announced that the first patient was enrolled. In June 2022 it was announced that the trial will start enrolling into the second stage, after successful completion of the first stage. To move the study from the first to the second stage, a minimum of two responses out of ten patients was required. For more information about the trial, visit clinicaltrials.gov (NCT04880863) and neotx.com.

An open-label, multicenter, dose-finding clinical phase Ib/II study is ongoing with naptumomab in combination with the checkpoint inhibitor durvalumab. The clinical trial enrolls patients with previously treated advanced or metastatic, 5T4-positive solid tumors and aims to establish the maximum tolerated dose in the phase Ib study before advancing to a phase II cohort expansion study. The trial was initiated in H2 2019 and is performed under an agreement with AstraZeneca. Interim safety and preliminary efficacy data from the study were presented at the American Association for Cancer Research (AACR) annual meeting in Orlando, Florida in April 2023. Data based on 59 patients with previously treated advanced or metastatic disease demonstrate that naptumomab in combination with durvalumab is well tolerated with limited toxicity at the recommended phase II dose. Durable, including complete, treatment responses were seen in patients where response to checkpoint inhibitor alone was not expected. In addition, the results indicate that pretreatment with obinutuzumab, a B-cell therapy, reduces the formation of anti-drug antibodies against naptumomab. A cohort expansion of this trial with patients suffering from esophageal cancer is planned. More information about the study is available at clinicaltrials.gov (NCT03983954) and at neotx.com.

In both ongoing studies patients are pre-treated with obinutuzumab, a B-cell therapy, to lower the levels of anti-drug antibodies (ADA) to naptumomab.

Previous clinical experience with naptumomab

Safety and tolerability of naptumomab as monotherapy and in combination with standard treatment have been established in clinical studies that include more than 300 patients.

Clinical development of naptumomab includes phase I studies in patients suffering from advanced non-small cell lung cancer, renal cell cancer and pancreatic cancer and a phase II/III study in combination with interferon alpha in patients with renal cell cancer.

Combining checkpoint inhibitors with the unique mode of action of naptumomab could be a useful strategy to treat multiple types of cancers, not responding to checkpoint inhibitors alone.

EVENTS DURING THE SECOND QUARTER

- Safety and preliminary efficacy of naptumomab in combination with durvalumab presented at AACR 2023 (April 19)

FINANCIAL INFORMATION

Comments on the Group's results for the period January – June 2023

No sales were recorded during the period. The operational costs totaled SEK 23.1 M (29.3) whereof research and development expenses amounted to SEK 15.4 M (22.2), a 31% decrease in costs reflecting the finalization of the laquinimod phase I study.

The company's research efforts during the reporting period have been focused on the clinical development of tasquinimod in multiple myeloma and the eye drop formulation of laquinimod in eye diseases. Collaborations to expand the preclinical and clinical development of tasquinimod and laquinimod are ongoing.

The financial resources have been allocated to the development of the fully owned projects tasquinimod and laquinimod. The clinical development programs include:

- The ongoing phase Ib/IIa clinical study with tasquinimod for treatment of multiple myeloma initiated in August 2020 in collaboration with Penn University, USA. The study is progressing according to plan
- The planning of a phase II study with tasquinimod in myelofibrosis scheduled to be initiated in 2024, mainly financed by Oncode Institute
- The development of laquinimod as a new product class for treatment of inflammatory eye diseases. The topical ophthalmic formulation of laquinimod was tested in a phase I clinical study, that was concluded in January 2023. The positive study results support the further development of laquinimod for inflammatory eye diseases

Administrative expenses amounted to SEK 7.7 M (7.0). The operating loss for the period amounted to SEK 23.1 M (loss: 29.3), the net financial income for the period amounted to SEK 0.4 M (loss: 0.7) and the loss after tax to SEK 22.7 M (loss: 30.0).

Comments on the Group's results for the period April – June 2023

No sales were recorded during the period. The operational costs totaled SEK 11.3 M (14.0) whereof research and development expenses amounted to SEK 7.3 M (10.5), the decrease in costs is explained by the finalization of the laquinimod phase I study.

Administrative expenses amounted to SEK 4.0 M (3.4). The operating loss for the period amounted to SEK 11.3 M (loss: 14.0), the net financial income for the period amounted to SEK 0.1 M (loss: 0.3) and the loss after tax to SEK 11.2 M (loss: 14.3).

Cash flow, liquidity and financial position, Group, for the period January – June 2023

Cash and cash equivalents at the end of the period amounted to SEK 15.7 M, compared with SEK 41.8 M at the end of 2022. Cash flow for the period amounted to a negative SEK 26.1 M (neg: 31.3). The cash flow from operating activities amounted to a negative SEK 25.3 M (neg: 29.7). Cash flow from investing activities amounted to SEK 0.0 M (neg: 0.2) and financing activities amounted to a negative SEK 0.8 M (neg: 1.3).

Investments

Investments in tangible fixed assets amounted to SEK 0.0 M (0.0).

Comments on the Parent Company's results and financial position for the period January – June 2023

No sales were recorded during the period. Operating expenses amounted to SEK 23.2 M (29.7).

The Parent Company's operating loss for the period was SEK 23.2 M (loss: 29.7). Net financial income amounted to a SEK 0.5 M (19.3) and the loss after financial items was SEK 22.7 M (loss: 10.4). Cash and cash equivalents including short-term investments totaled SEK 15.5 M at the end of the period, compared with SEK 41.6 M on January 1, 2023.

Comments on the Parent Company's results and financial position for the period April – June 2023

No sales were recorded during the period. Operating expenses amounted to SEK 11.3 M (14.4). The Parent Company's operating loss for the period was SEK 11.3 M (loss: 14.4). Net financial income amounted to a SEK 0.2 M (19.7) and the loss after financial items was SEK 11.2 M (income: 5.3).

Shareholders' equity

Consolidated shareholders' equity at the end of the period amounted to SEK 11.9 M, compared with SEK 34,5 M at year-end 2022.

The number of shares outstanding at the end of the period totaled 265,144,687. At the end of the period, the equity/assets ratio for the Group was 48.2 percent, compared with 67.7 percent at year-end 2022. The corresponding figures for the Parent Company, Active Biotech AB, were 17.9 percent and 39.0 percent, respectively.

Long Term Incentive Programs

The Annual General Meeting on May 19, 2020, resolved to adopt two Long Term Incentive Programs (LTIPs), Plan 2020/2024 to include the employees within the Active Biotech Group and the Board Plan 2020/2023 to include all Board members of Active Biotech.

Employees and Board members acquired in total 871 837 shares (Savings shares) in the market during the period 2020 to June 2023 in the respective incentive programs. Total costs, including social contributions, as of June 30, 2023, amounted to SEK 1775 K.

Detailed terms and conditions for each of the programs are available on the company homepage.

Organization

The average number of employees during the reporting period was 8 (9), of which the number of employees in the research and development organization accounted for 5 (6). The number of employees at the end of the period amounted to 8 whereof 5 in the research and development organization.

Outlook, including significant risks and uncertainties

Active Biotech's ability to develop pharmaceutical projects to the point at which partnership agreements can be secured, and the partner assumes responsibility for the future development and commercialization of the project, is decisive for the company's long-term financial strength and stability. Active Biotech has currently three projects in its portfolio:

- tasquinimod, targeted towards hematological malignancies is in clinical phase Ib/IIa treatment of multiple myeloma and is also in development for a clinical phase II study in Myelofibrosis, the study is scheduled to start 2024 and will mainly be funded by Oncode Institute
- laquinimod, targeted towards inflammatory eye disorders. A clinical phase I trial with a topical ophthalmic formulation was concluded in January, 2023. The planning of a phase I bio-distribution study has been initiated, study start is scheduled late 2023
- naptumomab, a tumor directed immunotherapy, partnered to NeoTX, is in phase Ib/II clinical development in patients with advanced solid tumors and in phase IIa development in combination with docetaxel in NSCLC. All development of naptumomab is financed by NeoTX

The ongoing preclinical and clinical programs are advancing positively. The company regularly receive inbound approaches from scientists who wish to explore the potential of tasquinimod or laquinimod in different disease areas. Active Biotech will maintain focus for for tasquinimod within hematological malignancies and laquinimod within inflammatory eye disorders.

Active Biotech focuses its activities to secure long-term value growth and conduct commercial activities aimed at entering new partnerships for the fully owned clinical assets tasquinimod and laquinimod.

Financing and financial position

The Board and the management team continuously assess the Groups financial viability and access to cash. The available liquidity at June 30 funds continued operations through 2023 and Active Biotech will therefore require access to further growth capital to maintain progress of its unpartnered project portfolio. Various sources of financing are being explored, including partnering the company's development programs, directed share issuances to new investors as well as rights issue to current investors. Given the current macro-economic uncertainties and the projected developments of the company's project portfolio, the Board has decided to keep all options open for the time being. As the company within the next 12 months has additional financing needs that has not yet been secured, the Board is continuously working on evaluating various financing options to ensure continued operation. It is the Board's assessment that the company has good prospects at securing future financing, however the absence of assurance at the time of submission of this report means that there is a significant uncertainty factor regarding the company's ability to continue operation.

As a research company, Active Biotech is characterized by high operational and financial risk, since the projects in which the company is involved have development, regulatory and commercialization risks. In addition, the ability of the company to attract and retain key people with both insights to the field of research, and relevant product development experiences is a significant risk.

In brief, the operation is associated with risks related to such factors as pharmaceutical development, competition, advances in technology, patents, regulatory requirements, capital requirements, currencies and interest rates.

In addition to the industry-specific risk factors described above, there is an added uncertainty related to the situation in Ukraine and through the financial instability with rising inflation and general macro-economic uncertainty. A more detailed description of the exposure to risk, and of the ways in which Active Biotech manages it, is provided in the 2022 Annual Report, see pages 44-46 and 49 and in Note 18 on pages 84-85. The Annual Report is available on the company's website: www.activebiotech.com.

SECOND QUARTER IN BRIEF

- Safety and preliminary efficacy of naptumomab in combination with durvalumab presented at AACR 2023 (April 19)
- Positive interim data from the ongoing study of tasquinimod in heavily pre-treated patients with relapsed and refractory multiple myeloma presented at ASCO 2023 (May 26)
- Positive safety and tolerability in clinical phase I study and preclinical ocular biodistribution data supporting the further development of laquinimod eye drops for inflammatory eye diseases were established (May 30)
- New preclinical data regarding tasquinimod's anti-fibrotic effects in myelofibrosis were presented at EHA 2023 (June 10)

EVENTS AFTER THE END OF THE PERIOD

- Collaboration agreement for clinical study with tasquinimod in myelofibrosis signed (July 31)
- As communicated previously in the Q1, 2023 Interim Report, various sources of future financing are being explored, including partnering the company's development programs, directed share issues to new investors, rights issue to current investors as well as other types of financing alternatives. These explorations remain ongoing. To secure the continued operations of Active Biotech, two major shareholders have provided a financing commitment to the Company of approximately 20 MSEK, to enable the time necessary to conclude on the ongoing opportunities being explored

CONSOLIDATED PROFIT AND LOSS

SEK M	Apr-Jun		Jan-Jun		Full Year 2022
	2023	2022	2023	2022	
Net sales	-	-	-	-	-
Administrative expenses	-4.0	-3.4	-7.7	-7.0	-15.1
Research and development costs	-7.3	-10.5	-15.4	-22.2	-42.8
Operating profit/loss	-11.3	-14.0	-23.1	-29.3	-57.9
Net financial items	0.1	-0.3	0.4	-0.7	-0.5
Profit/loss before tax	-11.2	-14.3	-22.7	-30.0	-58.4
Tax	-	-	-	-	-
Net profit/loss for the period	-11.2	-14.3	-22.7	-30.0	-58.4
Comprehensive profit/loss attributable to:					
Parent Company shareholders	-11.2	-14.3	-22.7	-30.0	-58.4
Non-controlling interest	-	-	-	-	-
Net profit/loss for the period	-11.2	-14.3	-22.7	-30.0	-58.4
Comprehensive profit/loss per share before dilution (SEK)	-0.04	-0.07	-0.09	-0.14	-0.25
Comprehensive profit/loss per share after dilution (SEK)	-0.04	-0.07	-0.09	-0.14	-0.25

STATEMENT OF PROFIT AND LOSS AND CONSOLIDATED COMPREHENSIVE INCOME

SEK M	Apr-Jun		Jan-Jun		Full Year 2022
	2023	2022	2023	2022	
Net profit/loss for the period	-11.2	-14.3	-22.7	-30.0	-58.4
Other comprehensive income	-	-	-	-	-
Total comprehensive profit/loss for the period	-11.2	-14.3	-22.7	-30.0	-58.4
Total other comprehensive profit/loss for the period attributable to:					
Parent Company shareholders	-11.2	-14.3	-22.7	-30.0	-58.4
Non-controlling interest	-	-	-	-	-
Total comprehensive profit/loss for the period	-11.2	-14.3	-22.7	-30.0	-58.4
Depreciation/amortization included in the amount of	0.4	0.6	0.8	1.0	1.5
Investments in tangible fixed assets	-	-	-	-	-
Weighted number of outstanding common shares before dilution (000s)	265,059	218,055	265,059	218,027	233,652
Weighted number of outstanding common shares after dilution (000s)	265,059	218,055	265,059	218,027	233,652
Number of shares at close of the period (000s)	265,145	218,055	265,145	218,055	264,887

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

SEK M	Jun 30		Dec 31
	2023	2022	2022
Intangible fixed assets	0.2	0.2	0.2
Tangible fixed assets	5.4	6.6	6.3
Long-term receivables	0.4	0.4	0.4
Total fixed assets	6.0	7.2	6.9
Current receivables	2.9	3.7	2.3
Cash and cash equivalents	15.7	21.9	41.8
Total current assets	18.6	25.6	44.1
Total assets	24.6	32.8	51.0
Shareholders equity	11.9	16.9	34.5
Long-term liabilities	3.7	4.8	4.4
Current liabilities	9.1	11.1	12.1
Total shareholders equity and liabilities	24.6	32.8	51.0

CONSOLIDATED STATEMENT OF CHANGES IN SHAREHOLDERS EQUITY

SEK M	Jun 30		Dec 31
	2023	2022	2022
Opening balance	34.5	46.7	46.7
Loss for the period	-22.7	-30.0	-58.4
Other comprehensive income for the period	-	-	-
<i>Comprehensive profit/loss for the period</i>	-22.7	-30.0	-58.4
Share-based payments that are settled with equity instruments, IFRS2	0.1	0.2	0.7
New share issue	0.0	0.0	45.5
Balance at close of period	11.9	16.9	34.5

CONDENSED CONSOLIDATED CASH-FLOW STATEMENT

SEK M	Jan-Jun		Full Year
	2023	2022	2022
Loss after financial items	-22.7	-30.0	-58.4
Adjustment for non-cash items, etc.	0.9	1.2	2.2
Cash flow from operating activities before changes in working capital	-21.8	-28.8	-56.2
Changes in working capital	-3.5	-0.9	1.3
Cash flow from operating activities	-25.3	-29.7	-54.8
Investments in intangible assets	-	-0.2	-0.2
Cash flow from investments	-	-0.2	-0.2
New share issue	0.0	0.0	45.5
Loans raised/amortization of loan liabilities	-0.8	-1.3	-1.8
Cash flow from financing activities	-0.8	-1.3	43.8
Cash flow for the period	-26.1	-31.3	-11.3
Opening cash and cash equivalents	41.8	53.1	53.1
Closing cash and cash equivalents	15.7	21.9	41.8

KEY FIGURES

	Jun 30		Dec 31
	2023	2022	2022
Shareholders equity, SEK M	11.9	16.9	34.5
Equity per share, SEK	0.04	0.08	0.13
Equity/assets ratio in the Parent Company	17.9 %	22.9 %	39.0 %
Equity/assets ratio in the Group	48.2 %	51.5 %	67.7 %
Average number of annual employees	8	9	9

The equity/assets ratio and equity per share are presented since these are performance measures that Active Biotech considers relevant for investors who wish to assess the company's capacity to meet its financial commitments. The equity/assets ratio is calculated by dividing recognized shareholders' equity by recognized total assets. Equity per share is calculated by dividing recognized shareholders' equity by the number of shares.

CONSOLIDATED PROFIT AND LOSS

SEK M	2019				2020				2021				2022				2023	
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
Net Sales	5.5	1.1	0.9	0.9	0.5	-	-	6.2	-	-	-	-	-	-	-	-	-	-
Administration expenses	-2.8	-3.6	-2.7	-3.2	-3.4	-3.8	-2.9	-3.4	-3.3	-3.5	-3.5	-5.0	-3.6	-3.4	-3.0	-5.0	-3.8	-4.0
Research and development costs	-9.1	-5.2	-5.3	-8.8	-6.8	-6.3	-5.5	-7.0	-6.4	-9.2	-7.8	-11.2	-11.7	-10.5	-10.3	-10.3	-8.1	-7.3
Other operating expenses/income	-	2.2	-2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Operating profit/loss	-6.4	-5.4	-9.3	-11.2	-9.7	-10.1	-8.3	-4.1	-9.7	-12.6	-11.3	-16.1	-15.3	-14.0	-13.4	-15.2	-11.8	-11.3
Net financial items	-1.7	0.0	0.0	-0.1	-0.4	0.3	0.1	0.0	0.0	0.0	0.0	0.0	-0.4	-0.3	0.0	0.3	0.3	0.1
Profit/loss before tax	-8.1	-5.5	-9.3	-11.2	-10.1	-9.8	-8.2	-4.1	-9.8	-12.6	-11.2	-16.2	-15.7	-14.3	-13.4	-15.0	-11.5	-11.2
Tax	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Net profit/loss for the period	-8.1	-5.5	-9.3	-11.2	-10.1	-9.8	-8.2	-4.1	-9.8	-12.6	-11.2	-16.2	-15.7	-14.3	-13.4	-15.0	-11.5	-11.2

ACTIVE BIOTECH PARENT COMPANY – INCOME STATEMENT, CONDENSED

SEK M	Apr-Jun		Jan-Jun		Full Year 2022
	2023	2022	2023	2022	
Net Sales	-	-	-	-	-
Administration expenses	-4.0	-3.4	-7.8	-7.1	-15.0
Research and development costs	-7.3	-11.0	-15.4	-22.6	-42.9
Operating profit/loss	-11.3	-14.4	-23.2	-29.7	-57.9
<i>Profit/loss from financial items:</i>					
Result from participations in group companies	-	20.0	-	20.0	20.0
Interest income and similar income-statement items	0.2	0.0	0.5	-	0.0
Interest expense and similar income-statement items	0.0	-0.3	0.0	-0.7	-0.3
Profit/loss after financial items	-11.2	5.3	-22.7	-10.4	-38.2
Tax	-	-	-	-	-
Net profit/loss for the period	-11.2	5.3	-22.7	-10.4	-38.2
Statement of comprehensive income parent company					
Net profit/loss for the period	-11.2	5.3	-22.7	-10.4	-38.2
Other comprehensive income	-	-	-	-	-
Total comprehensive profit/loss for the period	-11.2	5.3	-22.7	-10.4	-38.2

ACTIVE BIOTECH PARENT COMPANY – BALANCE SHEET, CONDENSED

SEK M	Jun 30		Dec 31 2022
	2023	2022	
Intangible fixed assets	0.2	0.2	0.2
Financial fixed assets	40.9	40.9	40.9
Total fixed assets	41.1	41.1	41.1
Current receivables	3.4	3.7	2.7
Short-term investments	10.0	20.1	39.5
Cash and bank balances	5.5	1.5	2.1
Total current assets	18.8	25.4	44.4
Total assets	59.9	66.5	85.5
Shareholders equity	10.8	15.2	33.4
Current liabilities	49.2	51.3	52.1
Total equity and liabilities	59.9	66.5	85.5

Any errors in additions are attributable to rounding of figures.

NOTE 1: ACCOUNTING POLICIES

The interim report of the Group has been prepared in accordance with IAS 34 Interim Financial Reporting and applicable parts of the Annual Accounts Act. The interim report of the Parent Company has been prepared in accordance with Chapter 9 of the Annual Accounts Act. For the Group and the Parent Company, the same accounting policies and accounting estimates and assumptions were applied in this interim report as were used in the preparation of the most recent annual report.

NOTE 2: FAIR VALUE OF FINANCIAL INSTRUMENTS

SEK M	Jun 30, 2023 Level 2	Dec 31, 2022 Level 2
Short-term investments	10.0	39.5

LEGAL DISCLAIMER

This financial report includes statements that are forward-looking and actual results may differ materially from those anticipated. In addition to the factors discussed, other factors that can affect results are developments in research programs, including clinical trials, the impact of competing research programs, the effect of economic conditions, the effectiveness of the company's intellectual patent protection, obstacles due to technological development, exchange-rate and interest-rate fluctuations, and political risks.

FINANCIAL CALENDAR

- Interim reports 2023: November 9 (Q3)
- Year End Report 2023: February 8, 2024

This interim report is unaudited.

The reports will be available from these dates at www.activebiotech.com

The interim report for the January – June period 2023 provides a true and fair view of the Parent Company's and the Group's operations, position and results, and describes significant risks and uncertainties that the Parent Company and Group companies face.

Lund August 24, 2023

Michael Shalmi
Chairman

Uli Hacksell
Board Member

Aleksandar Danilovski
Board Member

Peter Thelin
Board Member

Axel Glasmacher
Board Member

Helén Tuve
President and CEO

Active Biotech AB (publ) (NASDAQ Stockholm: ACTI) is a biotechnology company that deploys its extensive knowledge base and portfolio of compounds to develop first-in-class immunomodulatory treatments for specialist oncology and immunology indications with a high unmet medical need and significant commercial potential. Following a portfolio refocus, the business model of Active Biotech aims to advance projects to the clinical development phase and then further develop the programs internally or pursue in partnership. Active Biotech currently holds three projects in its portfolio: The wholly owned small molecule immunomodulators, tasquinimod and laquinimod, both having a mode of actions that includes modulation of myeloid immune cell function, are targeted towards hematological malignancies and inflammatory eye disorders, respectively. Tasquinimod, is in clinical phase Ib/IIa for treatment of multiple myeloma. Laquinimod is in clinical development for treatment of non-infectious uveitis and a clinical phase I study with a topical ophthalmic formulation has been concluded. Naptumomab, a targeted anti-cancer immunotherapy, partnered to NeoTX Therapeutics, is in a phase Ib/II clinical program in patients with advanced solid tumors. Please visit www.activebiotech.com for more information