

Second Quarter and First Half Year 2026 Financial Results Conference Call

22nd of July 2026

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H1 2026 Conference Call: Agenda

22nd of July, 2026



CEO Remarks



Renée Aguiar-Lucander

CEO

Operational Update

Maria Törnsén

COO, President US

Clinical Update

Richard Philipson

Chief Medical Officer

Financial Results

Adam Cutler

Chief Financial Officer

Close and Q&A

Renée Aguiar-Lucander

CEO

Key Achievements in Q2 2026

Business Overview

Improvement in Q2 revenues as predicted.
Impact from Out-licensing: Q2 revenues: 48.1 MSEK vs 49.1 MSEK Q2 25

New CFO and VP BD hired: Adam Cutler & Fredrik Rööf

Capital Markets Day: CMD in New York and virtually with highly regarded medical experts

€115m out-licensing transaction to SERB Pharmaceuticals: Europe, the UK and Middle East and Africa (MENA).

Pipeline & Regulatory Update

PAES successful topline data: European confirmatory trial reported positive results of 92% graft survival and 98% patient survival at 12 months

ConfideS abstract oral presentation at ATC
Abstract related to Phase 3 data set presented by Dr Montgomery at ATC

HNSA-5487: Ongoing interactions with the FDA regarding GBS clinical trial design

Transaction Overview:

€115 million licensing agreement for Idefirix

Transaction Scope

Exclusive out-licensing of Idefirix for transplantation in EU, UK, Switzerland, Norway, Liechtenstein, Iceland and Middle East and North Africa (MENA) to SERB Pharmaceuticals.

Agreement closed July 1st, 2026.

Transaction Financials

- €110 million paid upon closing.
- Upon acceptance by EMA of filing for full approval, additional payment of €5 million

Transition and Next Steps

- Transfer of European MAH to SERB to be initiated immediately post-closing
- Transfer of certain European staff to take place during a transition period, subject to consultation process
- Hansa and SERB to focus on ensuring a smooth, well-coordinated handover

Partnership Responsibilities

SERB Pharmaceuticals

- **Commercialization & medical affairs** across licensed territories from closing
- **Post closing transfer of Marketing Authorization Holdership (MAH):**
 - Filing and obtaining full marketing authorization with EMA
 - Sponsorship of long-term PAES follow-up and pediatric study

Hansa Biopharma

- Preparation of submission dossier to **EMA for conversion to full approval**
- Hansa to initiate **transfer of MAH** to SERB
- **Support SERB** in its EMA submission for full marketing authorization of Idefirix, and the EMA review process
- **Supply of Idefirix** to the licensed region

General Outlook 2H 2026

- **Corporate transition** now completed; senior leadership team in place bringing relevant and significant expertise across all critical business areas.
- **Significant focus and resources** required for the successful and smooth transition of the European commercial business leadership to SERB. Transfer of MAH next critical milestone for transition.
- Gene therapy collaboration opportunities will be explored starting in 2H as well as potential other out licensing opportunities. European commercial results will run through Hansa's P&L until effective transfer of the MAH.
- Full focus on **FDA review process and potential approval** by year end. Pre commercial preparations ongoing in the US at high level of intensity.
- **The successful outcomes of PAES and ConfldeS** we believe will provide a basis for fruitful interactions with physicians across both Europe and the US which should positively impact uptake and awareness, respectively.
- **Strong balance sheet** with cash balance proforma for SERB transaction of SEK 1.8b at the end of Q2 ensures runway into 2028 excluding any future potential revenues.
- **Capital Markets Day on June 25, 2026** provided valuable insights into how physicians perceive the utility of Idefirix and the unmet medical need for imlifidase.

H2 2026 Conference Call: Agenda

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Q2 European Performance: 39% increase vs Q1



Performance

46.8M SEK product sales

Strong performance in Spain, following the recently secured reimbursement in Catalonia

Continued strong performance in France, solid contributions from other major European markets



Operational activities

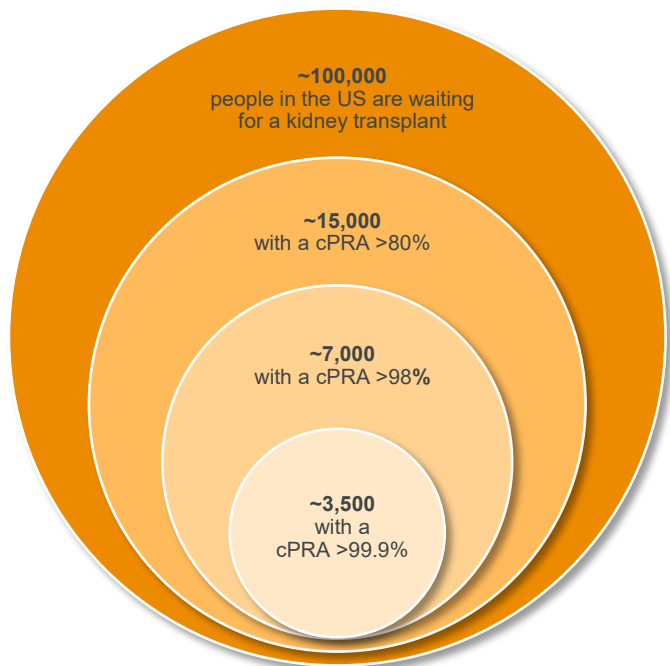
Secured reimbursement in Catalonia, Spain

Publication of the German expert consensus recommendations

Independent German law firm published article with legal analysis, clarifying desensitization is permitted under German law

US Kidney Transplant: A Growing Market with High Unmet Needs

Significant unmet medical need with thousands of highly sensitized patients waiting for a transplant



Calculated Panel Reactive Antibodies (cPRA) is a measure for HLA-sensitization

US Kidney Transplant Waitlist is growing

~27,000

transplants/year with 80% being deceased donor organs

~45,000

added to the waitlist each year

~10,000

die or become too sick to transplant each year

7+ years

time on waitlist for patients with a cPRA >99.9%

~9,000

recovered kidneys are discarded and 60%, or >5,000, due to a recipient not located and list exhausted

~\$2Bn

estimated market opportunity for cPRA>98%

Launch Preparations Ongoing: Focused and Led by an Experienced US Team

1

Market Research Insights*

- **Strong clinical need** for a quick and effective product that can enable HLAi transplants; **imlifidase's profile is viewed positively**
- **Patients' perception of the product profile is positive**, citing lack of alternatives and poor prognosis remaining on the waitlist
- **Most centers do not use experimental desensitization approaches**; perception of being ineffective, logistically not feasible for diseased donors and burdensome
- **KAS and KPD have not addressed the need** for highly sensitized patients

2

Market Development

- **Fully staffed market access and medical affairs teams**; full commercial build in Q4
- **Scientific Exchange and presentation of ConfldeS data** at Medical conferences in H2: TTS, ASN and ASHI
- Engagement with key **Patient Advocacy Groups**
- **Disease awareness education** focused on unmet medical need in highly sensitized patients
- **Significant clinical experience from ConfldeS** creates foundation for launch

3

Transplant Center Readiness

- **Concentrated market** with 200 transplant centers: initial focus on **~100 centers that represent 80% of US transplant volume**
- **Transplant Center profiling**: current management of highly sensitized patients; financial and operational profile; mapping of key stakeholders
- Site readiness: **clinical and operational readiness**

*Source: Hansa market research

HLA= Human Leukocyte Antigen; KAS=Kidney Allocation System; KPD=Kidney Paired Donation; TTS=The Transplantation Society; ASN=American Society of Nephrology; ASHI=American Society for Histocompatibility and Immunogenetics

Financial Stakeholders Recognize the Value of Imlifidase: Reimbursement precedence exists from other therapies

Majority of patients have Medicare; however opportunity also exists with Commercial plans

- ✓ Approximately **2/3 of transplant patients are Medicare beneficiaries**
- ✓ Dialysis prolongation represents a meaningful patient burden & **significant cost to payors**
- ✓ Medicare covers kidney transplant via **DRG plus Outlier payments and NTAP**; commercial plans cover kidney transplant through contracted rates or single case agreement.
- ✓ Hansa already applied for imlifidase specific inpatient billing codes and will **apply for NTAP in October 2026**
- ✓ Hansa market access team will **provide education to support formulary inclusion** by health systems P&T committees and coverage decision by commercial payors

Early adoption likely to come from large volume, operationally sophisticated transplant centers

- ✓ **Stakeholders recognize imlifidase's value:** enabling a transplant that would otherwise likely not occur
- ✓ High dialysis burden and limited alternatives create **urgency across stakeholders**
- ✓ One-time inpatient administration simplifies **operational execution** and **limits** budget impact
- ✓ Early adoption will likely come from transplant centers with **high clinical sophistication, transplant volume and managed care capability**
- ✓ Volume expected to scale post NTAP, similar to **other NTAP eligible therapies**

Source: Hansa Market Research

DRG= Diagnosis Related Group; NTAP= New Technology Add on Payment; P&T = Pharmacy and Therapeutics

Imlifidase Has the Potential to Change the Treatment Paradigm*

Addresses one of the most challenging unmet needs in kidney transplantation

- Thousands of highly sensitized patients remain unable to access a compatible donor despite years on the waitlist

Enables transplantation where it was previously not possible

- Significantly and predictably reduces donor-specific antibodies (DSAs) to allow the transplant to take place

Delivers consistent and reproducible clinical benefit

- Clinical safety and efficacy which has been consistent across ConfideS, PAES and European Real-World Evidence

Demonstrates durable transplant outcomes

- 5-year outcomes from phase 2 published in 2025

Creates a new clinical paradigm for desensitization

- Rapid and reliable reduction of antibodies, to enable a transplant

Launch Ready at PDUFA and imlifidase potentially available to order in Q1 2027*

*Subject to FDA approval

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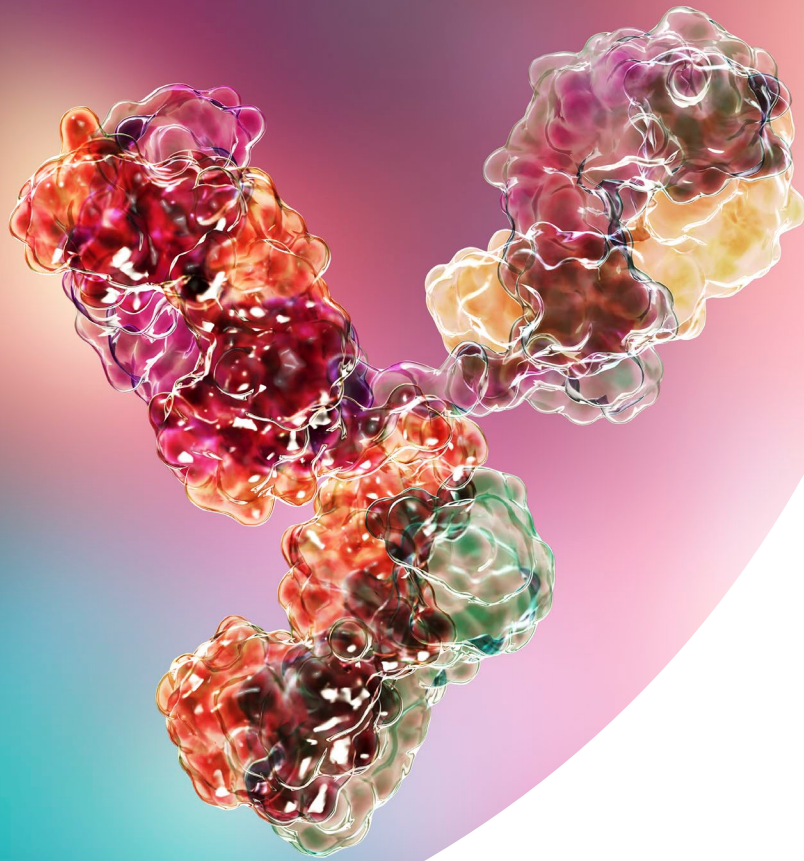
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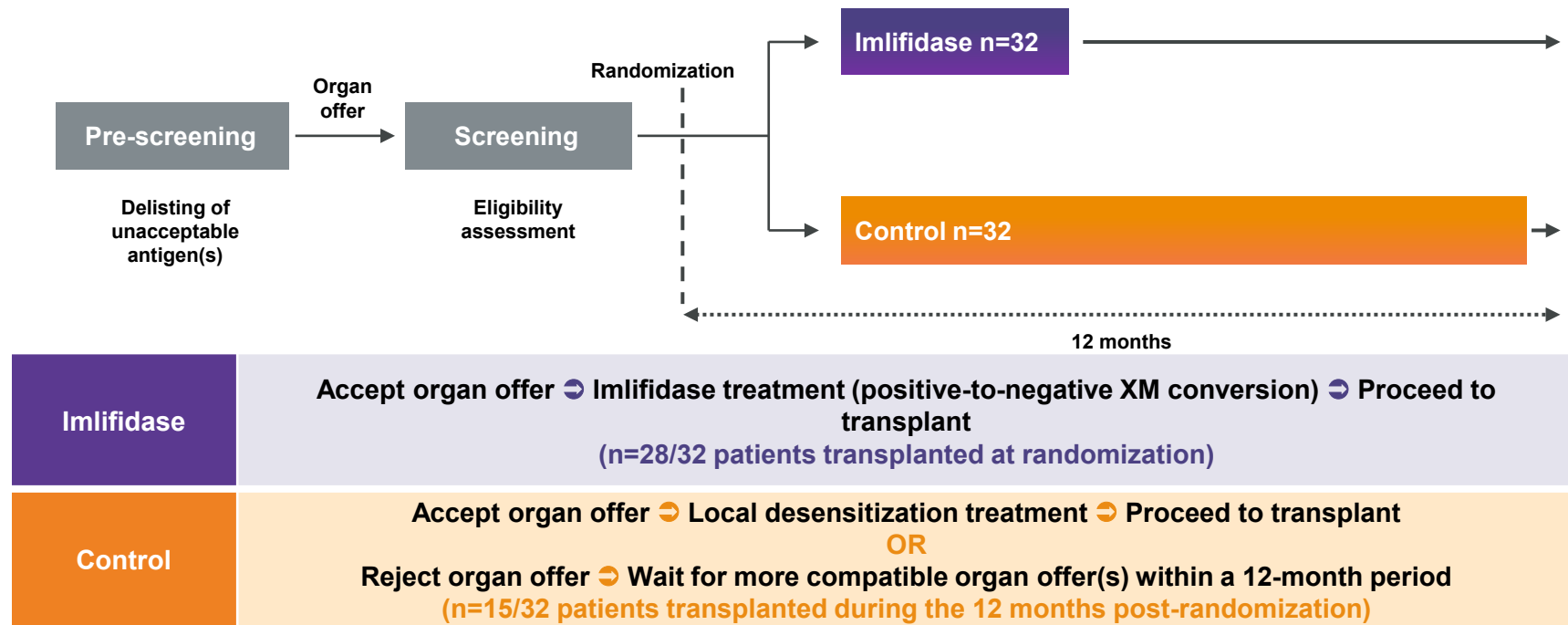
Report from ConfldeS, a Randomized Desensitization Trial

Superior 1-year eGFR Among Highly-Sensitized
Patients Desensitized with Imflifidase Compared
with the Control Arm



ConfldeS Trial Design

Randomized controlled trial in highly sensitized patient population with a cPRA value $\geq 99.90\%$



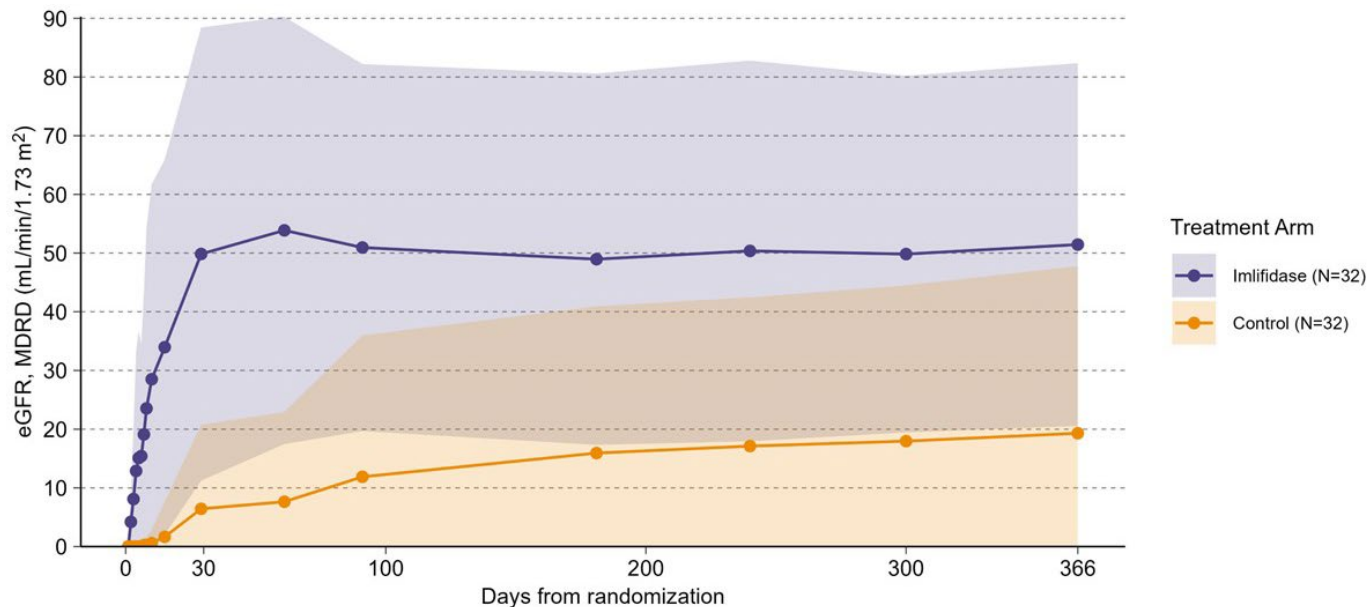
Demographics & Baseline Characteristics

Characteristics	Imlifidase (n=32)	Control (n=32)	p-values
Mean patient age (SD) — yr	45.8 (12.3)	44.7 (12.5)	ns
Female — no. (%)	18 (56.3)	15 (46.9)	ns
Race — no. (%)			
Asian	1 (3.1)	2 (6.3)	ns
Black	16 (50.0)	14 (43.8)	
White	14 (43.8)	13 (40.6)	
Other	0 (0)	2 (6.3)	
Mixed	1 (3.1)	1 (3.1)	
Mean time on waitlist (SD) — yr	7.3 (6.8)	5.2 (3.7)	ns
Previous transplant — no. (%)	30 (94)	23 (72)	ns
Median baseline sum DSA (range) — MFI	33,452 (2190–157,217)	21,860 (4465–86,154)	ns
Mean cold ischemia time (SD) — h	25.2 (9.5)	19.6 (7.4)	ns
Delayed graft function — no. (%)	10 (36)	6 (47)	ns

DSA, donor-specific antibody; h, hours; MFI, mean fluorescence intensity; ns, not significant; SD, standard of deviation; yr, years.

Primary Endpoint – eGFR at 12 Months

eGFR was 51.5 mL/min/1.73 m² in imlifidase arm compared with 19.3 mL/min/1.73 m² in the control arm, resulting in a clinical and significant difference of 32.2 mL/min/1.73 m² (p<0.0001)



eGFR, estimated glomerular filtration rate; MDRD, modification of diet in renal disease.

Dialysis Dependency & CKD at 1 Year

Dialysis dependency was lower in the imlifidase arm (5 patients) than in the control arm (17 patients) ($p=0.0007$)

CKD stage at 12 months for transplanted patients

eGFR (mL/min/1.73 m ²)	Imlifidase (n=28) no. (%)	Control (n=15) no. (%)
>90	4 (14)	0
≥60	8 (28)	4 (27)
30–59	14 (50)	5 (33)
15–29	1 (4)	1 (7)
<15	1 (4)*	5 (33)

*Patient died

CKD, chronic kidney disease; eGFR, estimated glomerular filtration rate.

Patient Survival & AEs

Patient survival was 97% with imlifidase compared with 100% in the control arm

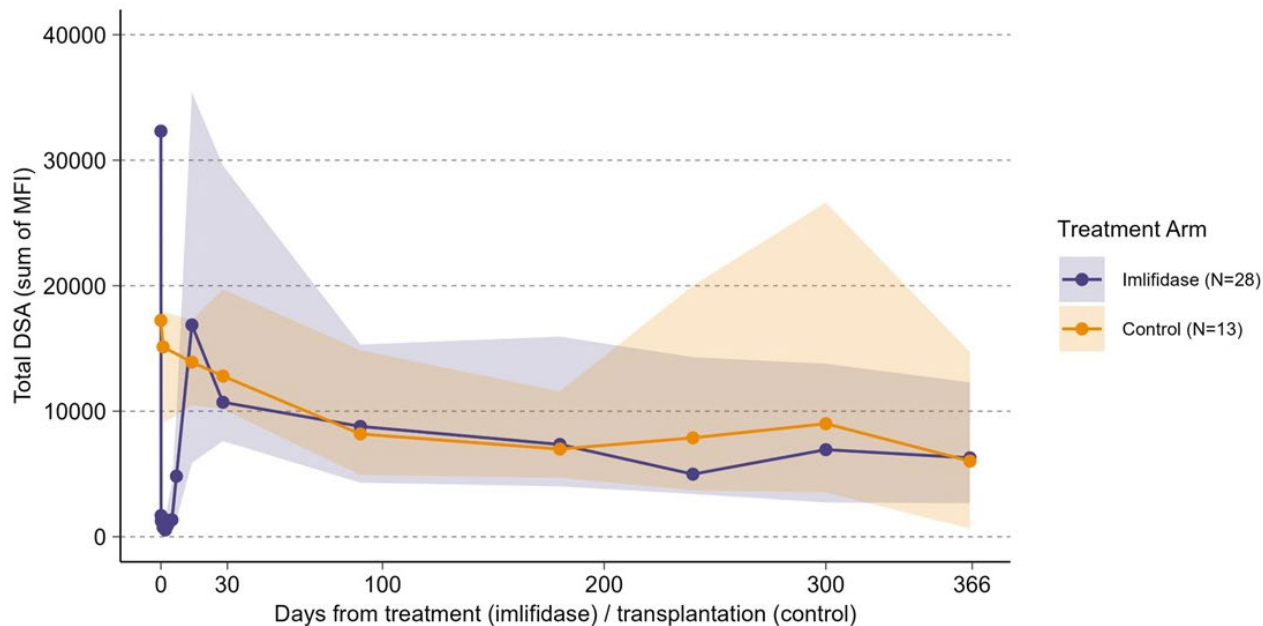
AEs and SAEs reflect post-transplant complications per current immunosuppressive practice and are consistent with previous clinical trial experience

No imlifidase infusion was discontinued due to an AE

No new safety signals were detected in the trial

DSA Over Time

Patients in the imlifidase arm maintained a low DSA during the first week; DSA peaked on day 15, then decreased thereafter



AMR Status & Effect on eGFR at 12 Months

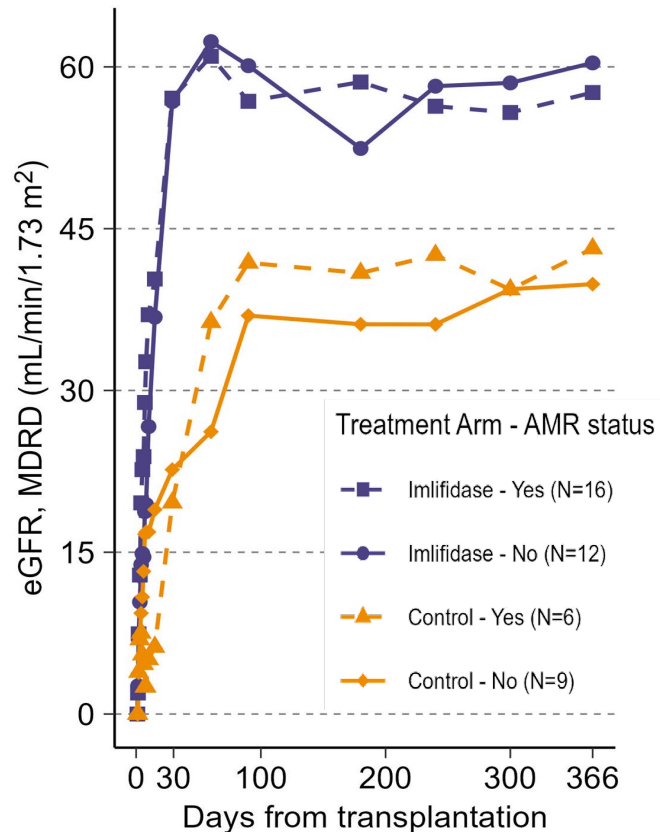
AMR occurred in 16/28 patients in the imlifidase arm (57%) vs. 6/13 in the control arm (46%)



No grafts in the imlifidase arm were lost due to AMR



AMR did not impact kidney function



Conclusion

At 1-year post-randomization, desensitization with imlifidase was associated with clinically meaningful and statistically significant improvement in kidney function as measured by eGFR

- 51.5 mL/min/1.73 m² which was superior to 19.3 mL/min/1.73 m² in control arm (p<0.0001)

Imlifidase enabled successful transplantation and resulted in a higher transplant rate compared with control

1-year dialysis dependency: 5 patients in imlifidase arm vs. 17 patients in control arm (p=0.0007)

No imlifidase grafts were lost due to AMR

Imlifidase treatment was well tolerated with a safety profile typical of transplant recipients

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Q2 2026 Idefirix Sales Performance

Product Sales

46.8 MSEK

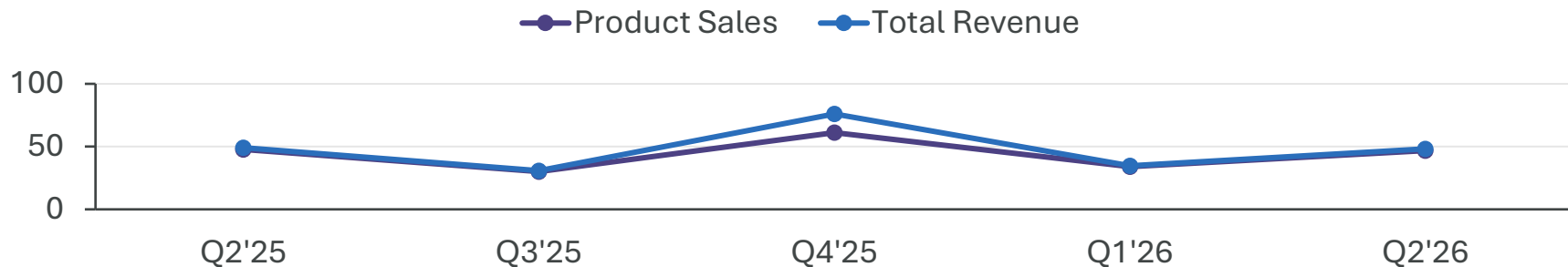
Total Revenue

48.1 MSEK

Product Sales TTM

171.9 MSEK

Quarterly Revenue & Product Sales (MSEK)



TTM = trailing twelve months. Figures in MSEK.

Continued Investments in R&D & Commercialization

SG&A Expenses

Q2 2026

-119¹ MSEK

Year-over-year

▲ 31%

vs Q2'25 -91² MSEK

R&D Expenses

Q2 2026

-68 MSEK

Year-over-year

▼ 29%

vs Q2'25 -96² MSEK

Operating Loss

Q2 2026

-174 MSEK

Year-over-year

▲ 12%

vs Q2'25 -155² MSEK

¹Q2'26 SG&A included costs associated with the convertible debt and the SERB deal.

²Q2'25 operating loss included 24 MSEK in restructuring expenses (21 MSEK in SG&A and 3 MSEK in R&D).

Summary of Cash & Headcount

Operating Cash Flow

Q2 2026

-104 MSEK

Year-over-year

▼ **8%**

vs Q2'25: -112 MSEK

Cash & Equivalents

Q2 2026

553¹ MSEK

Year-over-year

▲ **56%**

vs Q2'25: 354 MSEK

Employees

Q2 2026

153 FTEs

Year-over-year

▲ **9%**

vs Q2'25: 140 FTEs

Operating Cash Flow & Cash in MSEK; Employees in full-time equivalents (FTEs).

¹Q2 2026 Cash & Cash Equivalents proforma for the 110 million Euro SERB upfront payment received in July would be 1.8 BSEK (~\$185M)

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Summary

Strong foundation and clear roadmap

Robust financial position

Value inflection point in Q4

Execution focus

Experienced team

Experienced and Proven Leadership Team

Proven track record delivering growth, approvals, and launches across renal, rare disease, and immunology



Renée Aguiar-Lucander

Chief Executive Officer

20+ yrs rare disease leader and former investor, took Calliditas to US commercial success and a \$1.1bn exit



Adam Cutler

Chief Financial Officer

Seasoned biotech CFO with significant public company experience, previously with Mural Oncology and Q32 Bio



Hitto Kaufmann, PhD

Chief Scientific and Technology Officer

20+ years of immunology drug development from Sanofi and Boehringer Ingelheim



Frank Bringstrup

Chief Regulatory Affairs Officer

25+ years of pharmaceutical industry experience; successfully filed several BLAs with Novo Nordisk



Maria Törnsén

Chief Operating Officer, President US

Successfully launched multiple orphan drugs in the US. Previous roles at Calliditas, Sarepta Therapeutics, Sanofi Genzyme and Shire plc



Richard Philipson, MD, PhD

Chief Medical Officer

Four approvals over 25+ years incl. rare disease & gene therapy; senior roles at Calliditas, GSK and Takeda



Brian Gorman

Chief Legal Officer and Corporate Secretary

Seasoned life-sciences lawyer at Sinclair, Calliditas, Endo, AstraZeneca; led acquisitions, integrations and global expansion



Sandra Frithiof

Chief Human Resources Officer

25+ years of experience in human resources in different industries

Q&A

Hansa Biopharma contacts and key events

Contacts



Adam Cutler

Chief Financial Officer

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Upcoming Events 2026

- | | |
|---------|--|
| 2 SEP | Pareto Securities' 17th Annual Healthcare Conference 2026, Stockholm |
| 20 SEP | 31st International Congress of The Transplantation Society, Sydney |
| 22 SEP | BioStock - Investing in Life Science |
| 23 SEP | LSX Boston |
| 23 SEP | 2026 Leerink Partners Biopharma Summit |
| 7-8 OCT | 26th Annual Biotech in Europe Forum |

