



Second Quarter 2026 Financial Results

August 13, 2026

Forward-Looking Statements

This presentation contains forward-looking statements regarding Kyntra Bio's strategy, future plans and prospects, including statements regarding its commercial products and clinical programs and those of its partners Fortis and UCSF. These forward-looking statements include, but are not limited to, statements regarding the efficacy, safety, and potential clinical or commercial success of Kyntra Bio products and product candidates, statements under the caption "Recent and Near-Term Catalysts", statements about regulatory interactions, statements regarding cash, such as the expectation that cash, cash equivalents and accounts receivable will be sufficient to fund Kyntra Bio's operating plans into 2028, and statements about Kyntra Bio's plans and objectives. These forward-looking statements are typically identified by use of terms such as "may," "will", "should," "on track," "could," "expect," "plan," "anticipate," "believe," "estimate," "predict," "potential," "continue" and similar words, although some forward-looking statements are expressed differently. Kyntra Bio's actual results may differ materially from those indicated in these forward-looking statements due to risks and uncertainties related to the continued progress and timing of its various programs, including the enrollment and results from ongoing and potential future clinical trials, and other matters that are described in Kyntra Bio's most recent Annual Report on Form 10-K and Quarterly Report on Form 10-Q, each as filed with the Securities and Exchange Commission (SEC), including the risk factors set forth therein. Investors are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date of this release, and Kyntra Bio undertakes no obligation to update any forward-looking statement in this press release, except as required by law.

KYNB Investment Highlights

Advancing mid- and late-stage assets in prostate cancer and rare disease; cash runway into 2028

FG-3246 & FG-3180: Attractive Assets in Prostate Cancer, Phase 2 Trial Enrolling

- FG-3246, a potential first-in-class, CD46 targeting ADC, with a validated payload, clinically meaningful responses in previous mCRPC trials and a well-characterized safety profile
- FG-3180, a PET imaging agent with demonstrated uptake in CD46 positive tumors, in development as potential novel patient selection biomarker
- Currently enrolling Phase 2 monotherapy trial of FG-3246 and FG-3180 in mCRPC, post-ARPI / pre-chemo setting; interim analysis expected in 4Q 2026

Roxadustat: A Phase-3 Ready Development Opportunity

- Approved in > 40 countries and commercialized by AstraZeneca and Astellas for anemia associated with CKD; >1 million patients treated worldwide since 2019
- Compelling wholly owned, Phase 3-ready U.S. development opportunity in anemia due to LR-MDS and high red blood cell transfusion burden
- Reached agreement with the FDA on important Phase 3 clinical trial design elements, providing a regulatory pathway forward
- Orphan Drug Designation in MDS granted by FDA in December 2025

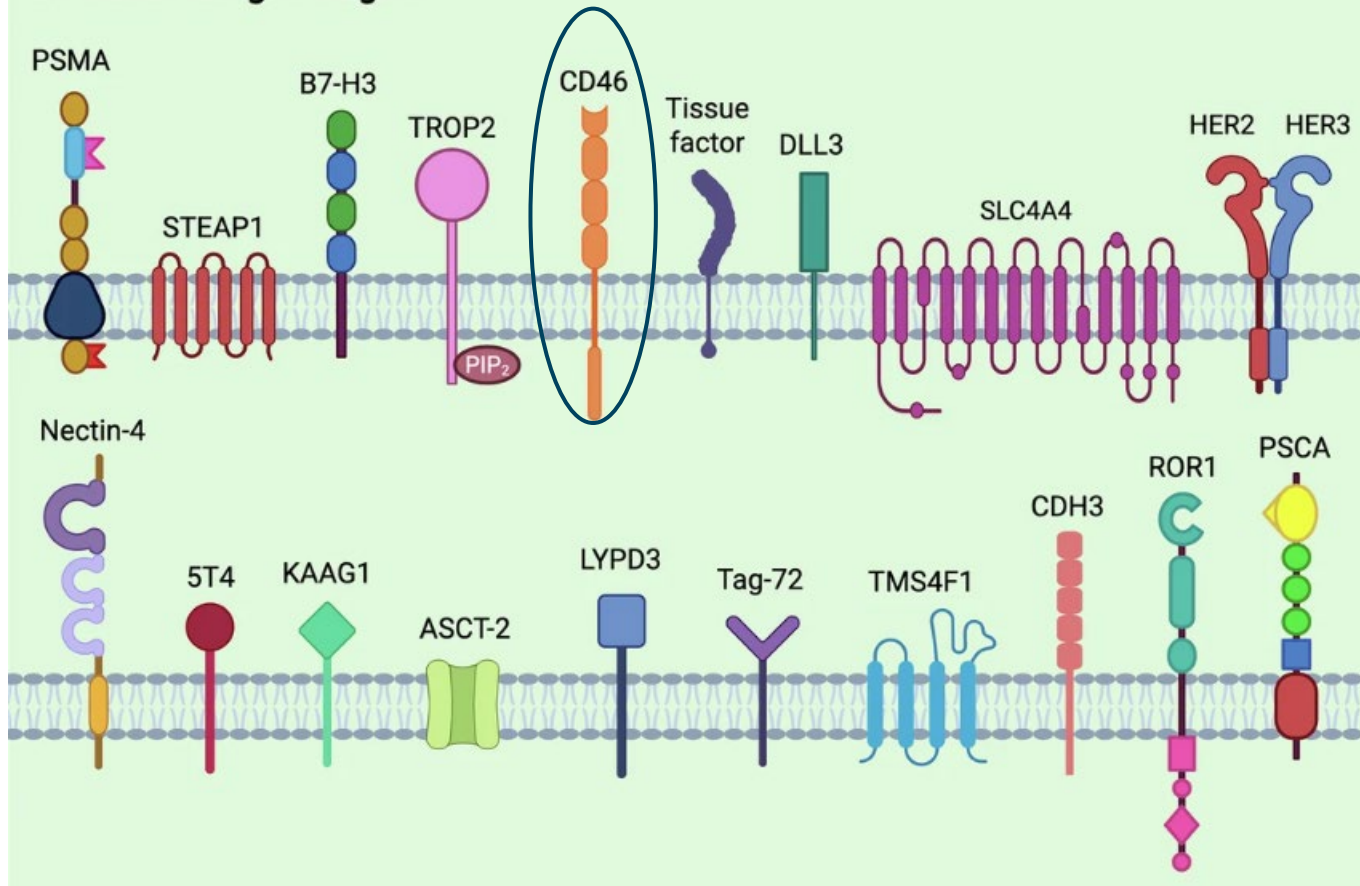
Recent and Near-Term Catalysts

- FG-3246 Phase 2 monotherapy trial interim results expected in 4Q 2026
- Goal of initiating Roxadustat Phase 3 LR-MDS trial in 4Q 2026*

**FG-3246 &
FG-3180 Program**

CD46 as a Novel Tumor Selective Target in mCRPC

B. Tumor Antigen Targets



CD46

- Multi-functional protein, overexpressed in cancer
- Negatively regulates the complement system and helps tumors evade complement-dependent cytotoxicity
- Highly expressed in mCRPC and other solid tumors with limited expression in normal tissues
- Expression is up-regulated as prostate cancer progresses from localized castration-sensitive prostate cancer to mCRPC
- 50%-70% of mCRPC patients are estimated to have high expression of CD46
- Expressed more homogenously and at higher levels compared to PSMA

Targeting a Novel Epitope of CD46 Has Therapeutic and Diagnostic Potential

FG-3246 Therapeutic

Targeting antibody + MMAE payload

YS5 antibody: Offers an androgen receptor agnostic and non-PSMA approach

MMAE: a potent anti-microtubule agent (validated chemotherapy)

Payload and linker approved in five marketed ADCs, generating ~\$5 billion in 2025 net revenue



YS5 is a fully-human, full length, IgG1 mAb to tumor-selective epitope of CD46 that is:

Less accessible on most normal cells

Does not interfere with complement system regulation

FG-3180 PET Imaging Agent

Targeting antibody + ⁸⁹Zr tracer

Demonstrated specific uptake in CD46 positive tumors

Potential to inform patient selection

PET-based biomarker currently considered superior to CD46 IHC in prostate cancer

Development strategy aims to achieve **clinically differentiated profile** in competitive yet dissatisfied mCRPC market

FG-3246 Demonstrated Compelling Monotherapy and in Combination Activity in mCRPC

FG-3246 Monotherapy

Phase 1 dose escalation and expansion study results in **biomarker unselected** and **heavily pre-treated** patient population (5L+)¹

Median rPFS

8.7

months

95% CI: 5.49 - 11.14



~36%

PSA Decline
by >50%



~20%

ORR

Median DOR

7.5

months

Range: 4.53 - 9.69

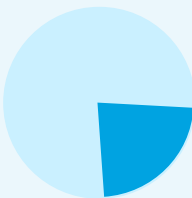
FG-3246 in Combination with Enzalutamide

Phase 1b/2 results in **biomarker unselected** patients, majority of who progressed on **≥2 prior ARPIs**

Median rPFS

7.0

months



22%

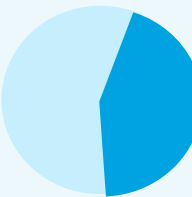
PSA50

Phase 1b/2 results in patients who progressed on **1 prior ARPI**²

Median rPFS

10.1

months

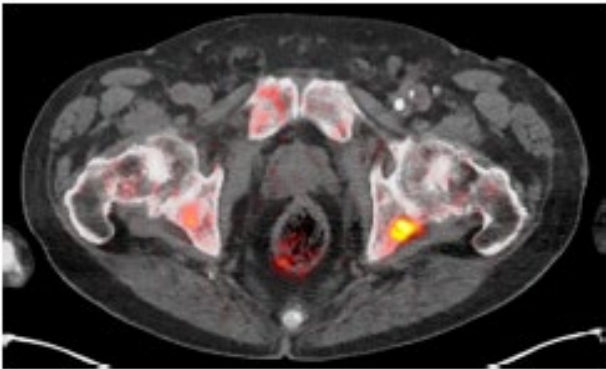


40%

PSA50

Higher Tumor Uptake of FG-3180 (PET46) was Associated with PSA50 Response

	PSA50 Response		P-value
	Yes (n=7)	No (n=16)	
SUV _{max-ave}	11.68 [9.91-13.88]	9.24 [7.98-10.64]	0.109
SUV _{max-ave} / SUV _{mean blood pool}	9.57 [9.24-11.93]	7.58 [6.66-9.80]	0.053

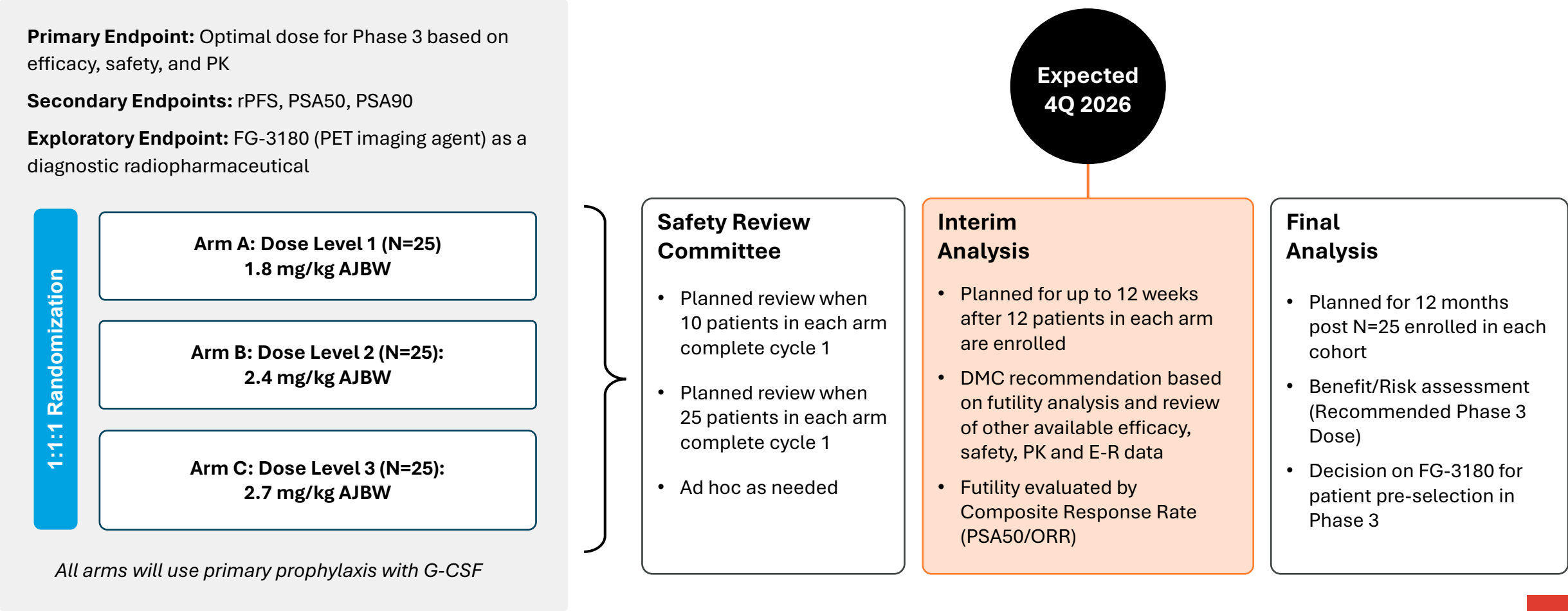


Results demonstrate FG-3180’s potential as PET imaging biomarker for patient selection;
further evaluation ongoing in the Phase 2 monotherapy trial

Ongoing FG-3246 and FG-3180 Phase 2 Monotherapy Trial

Interim results expected in 4Q 2026

Phase 2 - FG-3246 Dose Optimization in Post-ARPI, Pre-Chemo mCRPC, All Comers (US only)



FG-3246 Phase 2 Monotherapy Trial: Three Main Design Elements Driving the Potential for Increasing rPFS versus Phase 1 Monotherapy Study (>8.7 months)

Further validated by Phase 1b/2 Combination IST



Use of three of the highest doses (1.8mg/kg; 2.4mg/kg; 2.7mg/kg), given the exposure response established during the Phase 1 dose escalation and expansion trial



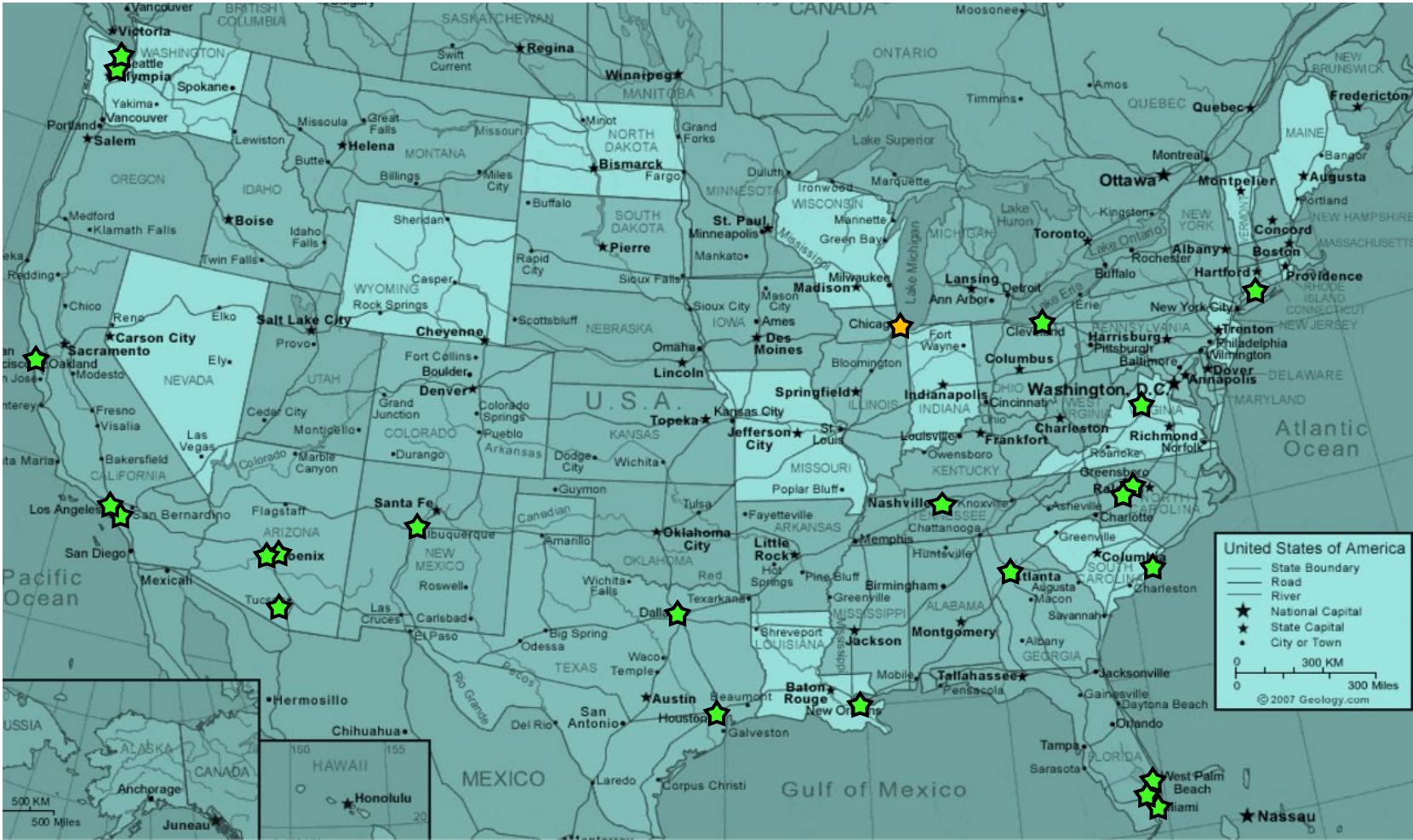
Use of primary prophylaxis G-CSF to help mitigate MMAE-associated adverse events like neutropenia, and maintain patients on their drug regimen longer



Moving upline to patients who have progressed on one prior ARPI – 1L or 2L mCRPC treatment as opposed to 5L+ in the Phase 1 monotherapy trial

Strong Enrollment Momentum and Highly Engaged Sites in the Phase 2 Monotherapy Study

Clinical Sites Currently Activated and in Startup



Interim analysis
expected in 4Q 2026

Activated	23	★
In Startup	1	★



Roxadustat Program

Anemia Associated with Lower-Risk MDS Represents a Significant Opportunity

Anemia is the hallmark symptom of MDS that gives rise to significant morbidity

~74K

patients live with MDS in the U.S.

~90% suffering from anemia and its negative impact on quality of life

Current 1L agents are **effective in <50%** patients and relief is often temporary with **limited treatment options in 2L+**

Standard of care therapies are **challenging to dose-calibrate** and can only be administered through in-practice IV infusion or subQ injection

Prevalence, United States, 2025

~74K

Diagnosed with MDS

~50K

Patients with anemia in LR-MDS

90% diagnosed with anemia

~55K

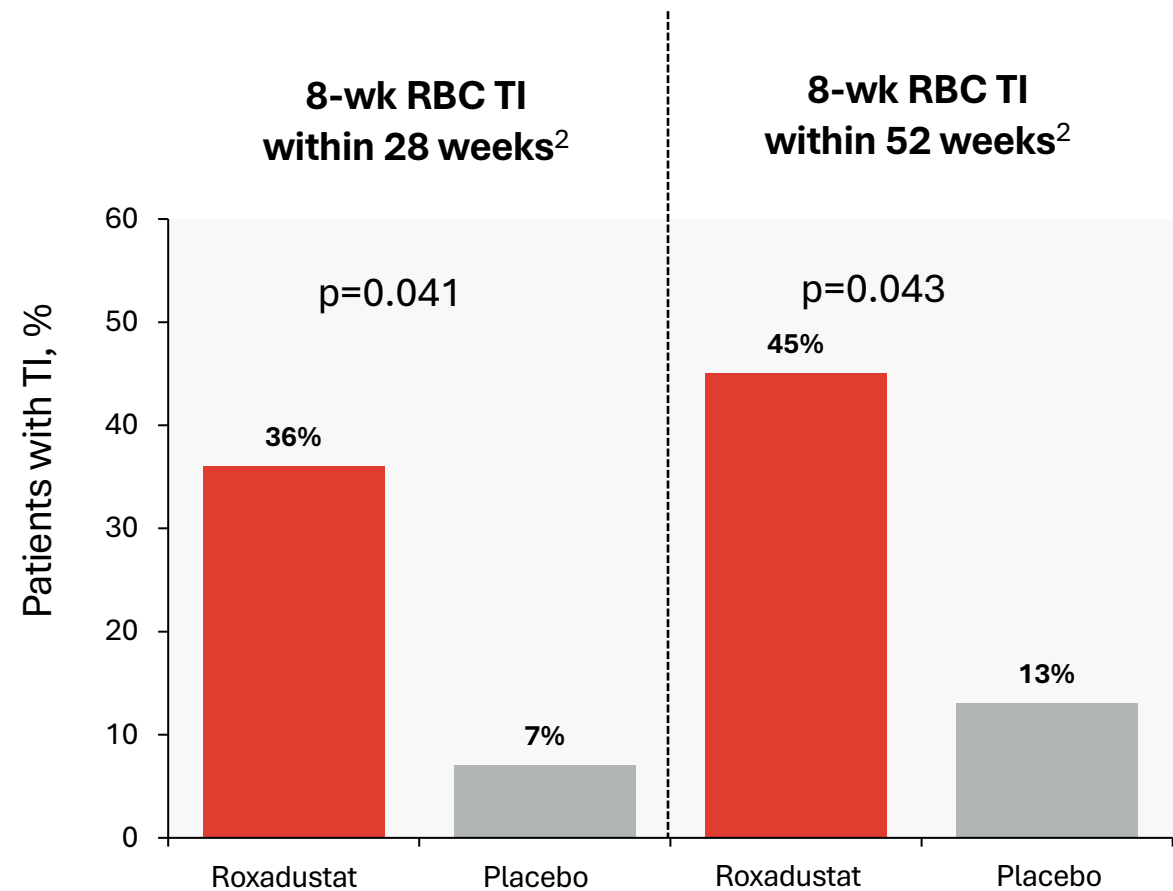
Patients are LR-MDS

~75% diagnosed with LR-MDS

Despite recent approvals, there remains a significant unmet need in the refractory population for additional treatments that provide durable response and the convenience of oral administration

Anemia of LR-MDS: Phase 3 Development Opportunity Based on Post Hoc Subgroup Results from MATTERHORN Phase 3 Trial

In patients with high transfusion burden¹, roxadustat showed promising TI benefits compared to placebo



No. of patients with response (% [95% CI])	Roxadustat (n=22)	Placebo (n=15)
8-wk RBC TI within 28 weeks ²	8 (36% [17-59])	1 (7% [0-32])
8-wk RBC TI within 52 weeks ²	10 (45% [24-68])	2 (13% [2-40])

Final analysis data cut-off date: Aug 2, 2023

Full analysis population (all randomized patients who received ≥1 dose of study drug and had ≥1 corresponding on-treatment Hb assessment)

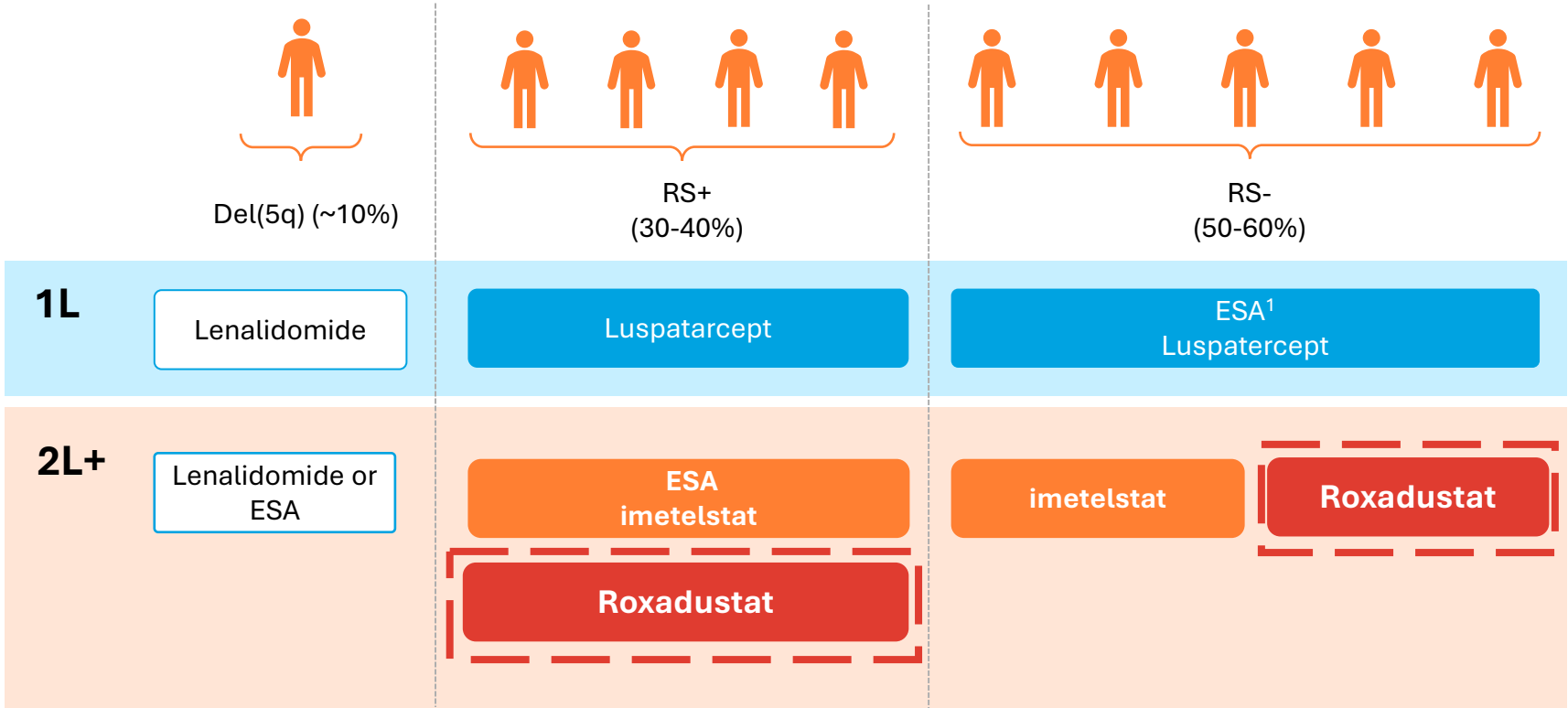
¹High transfusion burden at baseline defined by IWG2018: ≥4 pRBC units in two consecutive 8-week periods prior to randomization

²Post-hoc analysis with nominal p-values

CI, confidence interval; pRBC, packed red blood cells; TI, transfusion independence

Roxadustat May Elevate the Standard of Care in 2L+ LR-MDS-Anemia

Target indication:
Treatment of anemia in patients with LR-MDS who are refractory to, intolerant to, or ineligible for, prior ESA treatment



Potential Pivotal Phase 3 Trial Overview

Currently exploring the opportunity to develop internally or with a strategic partner

Patient Population

- High transfusion burden: Patients requiring ≥ 4 pRBC units in two consecutive 8-week periods prior to randomization
- Refractory to, intolerant to, or ineligible for prior ESAs



Safety

Management of potential thrombotic risk through:

- Eligibility criteria
- Dose modification criteria
- Discontinuation criteria



Efficacy

- Primary endpoint: ≥ 8 -week RBC-TI response rate
- Key secondary endpoints: ≥ 12 - and ≥ 16 -week RBC-TI response rate
- Final analysis will be performed when all participants have completed ~ 12 months of treatment or discontinued



Dose Regimen

- Oral route of administration, three times per week
- Starting dose of 2.5 mg/kg with potential for stepwise dose titration to a maximum of 3.5 mg/kg



Phase 3 protocol finalized with the goal of initiating trial in 4Q 2026

Significant Opportunity for Roxadustat in Anemia Associated with LR-MDS

Substantial unmet need in LR-MDS anemia

- Significant unmet need despite recent approvals
- Opportunity for new therapeutic agents that are more effective in RS- patients
- No other oral treatments for anemia of LR-MDS commercially available or in late-stage development

Highly differentiated profile

- Differentiated profile with potentially superior tolerability and convenient dosing and administration
- Targeted Phase 3 program could enable an approval in anemia associated with LR-MDS
- Granted FDA Orphan designation, which provides 7 years of regulatory exclusivity in the U.S.
- Additional data presented at European Hematology Association (EHA) annual meeting in June 2026

Large market opportunity

- Worldwide LR-MDS market is expected to exceed \$4B in 5 years
- Attractive pricing opportunity combined with efficient commercial model
- Potential for >\$500M in peak U.S. sales

Financial Results

A man in a red long-sleeved shirt is kayaking on the ocean. He is holding a black paddle with orange blades. The kayak is yellow. The background is a clear blue sky and ocean. There are several colored squares (orange, red, yellow, blue, teal) overlaid on the image.

Thank You

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NASDAQ: KYNB