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High precision diagnostics for high precision medicine

Idylla™

- ‘First time right’ molecular diagnostic system
- Combining advantages of point of care testing with quality of lab reference testing

THERAPY SELECTION
- Treatment guidance
- Companion diagnostics

PATIENT MONITORING
- Monitoring of treatment progress
- Early detection of relapse

EARLY DIAGNOSIS
- Rapid diagnosis
- High sensitivity
- Comprehensive panels
Idylla™ best-in-class

- Accurate results at right sensitivity
- Fully automated sample-to-result
- Any clinical sample type
- High levels of multiplexing
- Short turnaround time
- Modular and scalable
- Data connectivity
Limitation of erroneous results due to **standardized** cartridge

- Any sample type
- No sample pre-treatment
- All reagents on board
- No PCR lab infrastructure
- No cold chain
- Stable at room temperature

Offering potential for CLIA waiver
Excellent **performance** in comparative studies

<table>
<thead>
<tr>
<th>Comparative studies 2016 – 2017YTD*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>By test</strong></td>
</tr>
<tr>
<td>5x KRAS</td>
</tr>
<tr>
<td>2x BRAF</td>
</tr>
<tr>
<td>2x EGFR</td>
</tr>
<tr>
<td>1x NRAS</td>
</tr>
<tr>
<td><strong>By channel</strong></td>
</tr>
<tr>
<td>ESMO</td>
</tr>
<tr>
<td>3x</td>
</tr>
<tr>
<td>AstraZeneca</td>
</tr>
<tr>
<td>1x</td>
</tr>
<tr>
<td>ASCO</td>
</tr>
<tr>
<td>1x</td>
</tr>
<tr>
<td>ACR</td>
</tr>
<tr>
<td>1x</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Key takeaways</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Superior <strong>sensitivity</strong> compared to competing NGS and qPCR technologies</td>
</tr>
<tr>
<td>• Unrivalled <strong>ease of use</strong></td>
</tr>
<tr>
<td>• <strong>Shorter turnaround times</strong></td>
</tr>
<tr>
<td>• <strong>Flexibility towards different sample types</strong></td>
</tr>
<tr>
<td>• Suitable for both <strong>solid</strong> and <strong>liquid</strong> biopsies</td>
</tr>
</tbody>
</table>

AstraZeneca study confirms best-in-class status Idylla™

**Background**

- Comparative study organized by AstraZeneca
- Comparison of 12 different KRAS mutation detecting technologies:
  - 5x NGS
  - 3x qPCR
  - 2x mass spec.
  - 1x ddPCR
  - 1x Sanger sequencing
- Focused on detection of KRAS mutations in lung cancer based on blinded samples

**Conclusions**

<table>
<thead>
<tr>
<th>Technology</th>
<th>Overall sensitivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idylla™ KRAS</td>
<td>96%</td>
</tr>
<tr>
<td>Other qPCR (cobas/therascreen)</td>
<td>46-52%</td>
</tr>
<tr>
<td>Mass-spectrometry</td>
<td>58-92%</td>
</tr>
<tr>
<td>NGS</td>
<td>48-100%</td>
</tr>
<tr>
<td>ddPCR</td>
<td>56%</td>
</tr>
<tr>
<td>Sanger sequencing</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Sensitivity**

- Highest score for Idylla™ KRAS technology:
  - Lowest number of manual handling steps in sample preparation (1 to 2 steps versus 3 to > 20 steps)
  - Requires lowest level of expertise (1 versus 2-4 for others*)

**Ease-of-use**

- Highest score for Idylla™ KRAS technology on total turnaround time (2 to 4 hours versus 1 day to 3 weeks)

---

* One being the lowest level of expertise and four the highest
** TaT = total turnaround time

Source: poster by James L. Sherwood et al., presented at 2016 ESMO conference Copenhagen (Denmark)
Rapidly expanding test menu
Menu for **oncology** and **infectious diseases**

**Oncology – primary focus**

- **Fastest growing** segment of the MDx market\(^1\) - CAGR of 17% between 2016-2021

- FFPE*-based sample to result solutions
- Solid and liquid biopsy testing on same platform
- Reduction of time to result from weeks to hours
- Proprietary assay content within immuno-oncology
- Gateway to Next-Generation Sequencing

**Infectious diseases**

- **Largest segment** of the MDx market\(^1\) – 43% of total in 2016

- Ability to offer syndromic panels that include quantitation, RNA and DNA combinations
- Short turn around times combined with ease of use and high sensitivity
- Broad sample type and volume capabilities
- Sample enrichment technology for sepsis and other bloodstream infections

**Focus**

- Solid biopsies and liquid biopsies
- Clinically proven and reimbursed biomarkers
- Proprietary content in second wave

- Syndromic panels
- Bloodstream infections (including sepsis)
- Infectious disease strategy going forward could include more partnership elements

**Menu partners**

- **Johnson & Johnson** (Strategic partnership)
- **Abbott Molecular** (Focus on CDx development)
- **AMGEN** (Focus on mCRC)
- **Microbiome** (Diagnostic test development partnerships)

---

2. FFPE is abbreviation of Formalin-Fixed Paraffin Embedded, see appendix for details
### Our Idylla™ menu

<table>
<thead>
<tr>
<th>Area</th>
<th>On market end 2016</th>
<th>2017</th>
<th>2018</th>
<th>Focus as from 2019 (indicative)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorectal</td>
<td>KRAS CE</td>
<td>ctNRAS/BRAF/EGFR492 RUO</td>
<td>MSI</td>
<td>Additional assays to be launched for CRC and lung cancer menus</td>
</tr>
<tr>
<td></td>
<td>NRAS-BRAF CE</td>
<td>NRAS CE</td>
<td></td>
<td>Expansion into major oncology areas:</td>
</tr>
<tr>
<td></td>
<td>NRAS/BRAF/EGFR492 RUO</td>
<td>ctKRAS CE</td>
<td></td>
<td>o Breast</td>
</tr>
<tr>
<td></td>
<td>ctKRAS RUO</td>
<td>ctNRAS-BRAF CE</td>
<td></td>
<td>o Urology</td>
</tr>
<tr>
<td></td>
<td>EGFR RUO</td>
<td>EGFR CE</td>
<td>ctEGFR CE</td>
<td>o Immunotherapy</td>
</tr>
<tr>
<td></td>
<td>BRAF CE</td>
<td>ctBRAF RUO</td>
<td>GeneFusion Panel</td>
<td>o DNA repair*</td>
</tr>
<tr>
<td>Melanoma</td>
<td>BRAF CE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>ctBRAF RUO</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CDx</td>
<td>IFV-RSV Panel CE+</td>
<td>IFV-RSV Panel 510k+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infectious</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>infectious</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>diseases</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>IFV-RSV Panel</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CE = CE-marked tests. RUO = Research Use Only. EUA = Emergency Use Authorization label. * JnJ test. ** Fast-track Diagnostics development.**

Note: overview is subject to changes in prioritization of test development driven by several factors such as commercial and operational considerations. Overview excludes regional expansion, life cycle management and potential partner tests.
Powerful tests for colorectal and lung cancer

**Metastatic colorectal cancer**

<table>
<thead>
<tr>
<th>Assay</th>
<th>Solid RUO</th>
<th>Solid CE</th>
<th>Liquid RUO</th>
<th>Liquid CE</th>
</tr>
</thead>
<tbody>
<tr>
<td>KRAS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NRAS-BRAF</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Colorectal cancer is the second most common cancer worldwide, estimated incidence of over 1.36 million new cases annually\(^1\)
- Complete mCRC\(^2\) test offering for clinical use on market, as recommended by most recent clinical guidelines
- Allows for simultaneous detection of 44 clinically actionable targets
- Ability to enable same-day results could open routes towards faster treatment selection for mCRC patients

**Lung cancer**

<table>
<thead>
<tr>
<th>Assay</th>
<th>Solid RUO</th>
<th>Solid CE</th>
<th>Liquid RUO</th>
<th>Liquid CE</th>
</tr>
</thead>
<tbody>
<tr>
<td>EGFR</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Lung cancer is the most common cancer worldwide, accounting for 13% of all cancer types\(^3\)
- Test designed to detect over 50 EGFR mutations on the basis of only a single slice of FFPE tumor tissue
- Its extreme ease-of-use allows for testing, irrespective of location or laboratory expertise level and, as such, has the potential to enable more wide-spread testing of lung cancer specimens

\(^3\) Navani et al. Lancet Respir Med (2015)
Continued expansion **global** commercial footprint*

Over **60 countries** covered through three sale channels:

1. **Direct sales force** covering Western European countries

2. **Distributor contracts** in place covering approx. 45 countries
   - US commercialization partnership signed in November 2016
   - Announcement commercialization strategy **China** in 2017
   - Announcement commercialization strategy **Japan** in 2017/2018

3. **Global pharma collaborations** (e.g. Merck and Amgen)

* Situation as per end March 2017
US commercialization partnership with Thermo Fisher

**Description partnership**

- Partnership signed with Fisher Healthcare, a division of Thermo Fisher Scientific
- Thermo Fisher to act as distributor in the US\(^1\) Biocartis retains right to sell directly
- Initial focus on distribution of Idylla™ oncology products
- 5 year initial term
- Biocartis to establish a US subsidiary and local team to support US commercialization in H1 2017 - commercial roll-out expected in H2 2017

<table>
<thead>
<tr>
<th>US expected to account for the largest proportion of the MDx market for oncology (expected market size of $1.45B by 2020) and infectious disease (expected market size of $1.07B by 2020)(^2)</th>
</tr>
</thead>
</table>

**Background Thermo Fisher Scientific\(^3\)**

- World leader in serving science
- Annual revenues of approx. $17 billion
- Approximately 50,000 employees in 50 countries
- Experienced nationwide sales team in place

---

1. Exclusive for Biocartis' Idylla™ assays; non-exclusive for Idylla™ instruments.
Growing interest from pharmaceutical and biotech companies

Rationale

• Timely information on presence of mutations is critical in treatment selection; testing needed for patients to be eligible for targeted therapies

• In case of mCRC, testing of RAS genes is required for anti-EGFR therapies (e.g. Vectibix® of Amgen and Erbitux® of Merck)

• Technologies currently used are complex and often require several weeks¹

• This could result in situations where patients are not in the position to benefit from targeted therapies as oncologists often don’t want to wait before initiating a treatment

Current collaborations

• Collaboration aimed to offer Idylla™ RAS testing for rapid decentralized testing

• Initiated in February 2016 with sites in 7 countries²

• Significantly expanded in Europe end of 2016 adding several dozen sites

• Collaboration aimed at improving patient access to ctRAS testing by leveraging the advantages of Idylla™

• Development of CE-IVD Idylla™ liquid biopsy tests for KRAS and NRAS/BRAF tests

• Subsequent implementation of tests in numerous medical centers across the world³

---

¹. Amgen data.
². Focused on selected reference hospitals in Brazil, Canada, Colombia, Mexico, Saudi Arabia, Spain and Turkey.
³. US, China and Japan are excluded from this collaboration. Commercialization of assays under the collaboration is on a non-exclusive basis.
Q1 2017 business update and outlook
Key messages Q1 2017 business update

Commercial
- Commercial cartridge volume Q1 2017 over 4.5 times Q1 2016 volume
- Idylla™ installed base expansion further continued in Q1 2017
- US commercialization: Biocartis US Inc. established, US General Manager appointed and training Fisher Healthcare sales force initiated
- Launch Companion Diagnostics (CDx) business with signing first CDx partnership

Menu
- Continued progress made in expansion of oncology menu
- CE-marking Idylla™ EGFR solid biopsy test (lung cancer menu) expected in Q2 2017

Financial
- Approx. EUR 750k grant received from VLAIO, the Flanders organization for Innovation & Entrepreneurship, for the development of a fully automated MSI test
- Cash position end Q1 2017 amounted to approx. EUR 70m (unaudited figure)
Idylla™ follows a razor-razorblade model

- Cartridge consumption on Idylla™ instruments will be the key value driver of Biocartis

- A broad installed base of Idylla™ instruments with expanding Idylla™ test menu facilitates cartridge consumption

An increasing installed base will:
- Grow consumption of existing Idylla™ tests
- Accelerate market adoption of new Idylla™ tests
Idylla™ installed base more than doubled to 389 in 2016

Historical installed base development

<table>
<thead>
<tr>
<th>Year</th>
<th>Increase 2015</th>
<th>31-Dec-15</th>
<th>Increase 2016</th>
<th>31-Dec-16</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>82</td>
<td>165</td>
<td>224</td>
<td>389</td>
</tr>
</tbody>
</table>

2017 growth drivers

1. Continued menu expansion:
   - CE-marked offering for metastatic colorectal cancer (mCRC)
   - Expansion lung cancer menu with CE-marking Idylla™ EGFR Mutation Test and launch ctEGFR Mutation Assay

2. Ongoing geographical expansion: US commercialization to start in H2 2017

3. Growing interest from pharmaceutical and biotech companies

4. Increased awareness by end customers on excellent performance Idylla™ technology

* The Idylla™ EGFR Mutation Assay is intended for Research Use Only, not for diagnostic procedures. Not for sale in the USA and Canada.
Continued exponential increase of cartridge volume

<table>
<thead>
<tr>
<th>2015 end of the year</th>
<th>2016 end of the year</th>
<th>Cartridge volume</th>
</tr>
</thead>
<tbody>
<tr>
<td>Installed base 165</td>
<td>Installed base 389</td>
<td>Commercial cartridge volume</td>
</tr>
<tr>
<td>Idylla™ tests 5</td>
<td>Idylla™ tests 9</td>
<td>2016 over 7.5 times 2015 volume</td>
</tr>
<tr>
<td>Of which CE-marked tests 3</td>
<td>Of which CE-marked tests 4</td>
<td>2016 volume approx. 25,000 cartridges</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Commercial cartridge volume Q1 2017 over 4.5 times Q1 2016 volume</td>
</tr>
</tbody>
</table>
## Summary 2016FY financials

### Breakdown total operating income

<table>
<thead>
<tr>
<th>In EUR 1,000</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cartridge sales</td>
<td>4,015</td>
<td>1,294</td>
</tr>
<tr>
<td>Idylla™ system sales</td>
<td>2,752</td>
<td>2,299</td>
</tr>
<tr>
<td><strong>Product sales revenue</strong></td>
<td><strong>6,767</strong></td>
<td><strong>3,593</strong></td>
</tr>
<tr>
<td>R&amp;D services</td>
<td>255</td>
<td>662</td>
</tr>
<tr>
<td>Upfront license revenues</td>
<td>4,691</td>
<td>5,025</td>
</tr>
<tr>
<td>Milestone revenues</td>
<td>332</td>
<td>4,000</td>
</tr>
<tr>
<td><strong>Collaboration revenue</strong></td>
<td><strong>5,278</strong></td>
<td><strong>9,686</strong></td>
</tr>
<tr>
<td>Service revenue</td>
<td>53</td>
<td>54</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td><strong>12,098</strong></td>
<td><strong>13,334</strong></td>
</tr>
<tr>
<td>Grants and other income</td>
<td>1,674</td>
<td>1,617</td>
</tr>
<tr>
<td><strong>Total operating income</strong></td>
<td><strong>13,772</strong></td>
<td><strong>14,951</strong></td>
</tr>
</tbody>
</table>

### Condensed cash flow statement

<table>
<thead>
<tr>
<th>In EUR 1,000</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Result for the period</td>
<td>(49,777)</td>
<td>(39,797)</td>
</tr>
<tr>
<td>Depreciation and amortisation</td>
<td>5,055</td>
<td>5,094</td>
</tr>
<tr>
<td>Other adjustments</td>
<td>109</td>
<td>(172)</td>
</tr>
<tr>
<td><strong>Operational burn rate</strong></td>
<td><strong>(44,613)</strong></td>
<td><strong>(34,875)</strong></td>
</tr>
<tr>
<td>Working capital changes</td>
<td>(8,699)</td>
<td>7,540</td>
</tr>
<tr>
<td><strong>CF operating activities</strong></td>
<td><strong>(53,312)</strong></td>
<td><strong>(27,335)</strong></td>
</tr>
<tr>
<td>CF investing activities</td>
<td>(9,342)</td>
<td>(5,436)</td>
</tr>
<tr>
<td>CF financing activities</td>
<td>41,804</td>
<td>125,943</td>
</tr>
<tr>
<td><strong>Total net cash flow</strong></td>
<td><strong>(20,850)</strong></td>
<td><strong>93,172</strong></td>
</tr>
<tr>
<td>Cash and cash equivalents¹</td>
<td>83,247</td>
<td>104,087</td>
</tr>
<tr>
<td>Financial debt</td>
<td>31,407</td>
<td>10,815</td>
</tr>
</tbody>
</table>

Product revenues increased with **88%** in 2016

Cash position end of 2016 of EUR **83.2m**
Guidance 2017

250 - 275 expected installed base expansion in 2017
Forecasted total installed base of Idylla™ instruments around 640 by year-end

Commercial cartridge volume in 2017 to be at least three times 2016 volume

Guidance target cash position by end 2017 of around EUR 40m
Expected menu newsflow 2017

- CE-marking Idylla™ EGFR Mutation Test (Q2 2017)
- CE-marking Idylla™ NRAS Mutation Test (Q2 2017)
- CE-marking Idylla™ ctKRAS Mutation Test (H2 2017)
- CE-marking Idylla™ ctNRAS-BRAF Mutation Test (H2 2017)
- Launch Idylla™ ctEGFR Mutation Assay (RUO, H2 2017)
- US FDA 510(k) approval of the Idylla™ platform in conjunction with Idylla™ IFV-RSV Panel Test
Financial calendar 2017

- Annual General Meeting           12 May 2017
- H1 2017 results                  7 September 2017
- Q3 2017 business update          16 November 2017
Shareholders, stock performance and coverage

Shareholder overview (as per 19 April 2017)

<table>
<thead>
<tr>
<th>Shareholder</th>
<th># shares</th>
<th>% shares</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson &amp; Johnson Innovation</td>
<td>6,107,518</td>
<td>13.7%</td>
</tr>
<tr>
<td>Debiopharm Diagnostics</td>
<td>4,749,707</td>
<td>10.6%</td>
</tr>
<tr>
<td>RMM</td>
<td>3,989,058</td>
<td>8.9%</td>
</tr>
<tr>
<td>Benaruca</td>
<td>2,542,408</td>
<td>5.7%</td>
</tr>
<tr>
<td>BIOSPV</td>
<td>539,834</td>
<td>1.2%</td>
</tr>
<tr>
<td>Sycomore Asset Management</td>
<td>2,301,126</td>
<td>5.2%</td>
</tr>
<tr>
<td>PMV-TINA</td>
<td>1,840,861</td>
<td>4.1%</td>
</tr>
<tr>
<td>Participatie-Maatschappij Vlaanderen</td>
<td>428,000</td>
<td>1.0%</td>
</tr>
<tr>
<td>Topbio1</td>
<td>1,804,644</td>
<td>4.0%</td>
</tr>
<tr>
<td>Hitachi Chemical</td>
<td>1,417,346</td>
<td>3.2%</td>
</tr>
<tr>
<td>Other institutional and retail investors</td>
<td>18,927,603</td>
<td>42.4%</td>
</tr>
<tr>
<td><strong>Total outstanding shares (non-diluted)</strong></td>
<td><strong>44,648,105</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

Share performance last 12 months*

Coverage

Note: see website Biocartis for more details

* Source: Euronext
Appendix
Unsurpassed ease of use and fast time-to-result

Offering potential for CLIA waiver

35 to 150 minutes
FFPE (formalin-fixed and paraffin-embedded) sample

Step 1: tissue macroscopy
- A laboratory technician cuts the tissue into smaller pieces

Step 2: formalin-fixing
- This incubate overnight in formalin for optimal conservation while maintaining the fixation of the morphology

Step 3: paraffin-embedding
- The next day, the tissue is embedded in fluid paraffin

Step 4: microtome cutting
- The paraffin block is then cut into thin slices (tissue sections), suitable for (microscopic) analysis

FFPE is the gold standard sample type within oncology
What is Microsatellite Instability?

- MSI evolves as a result of the so-called ‘inactivation of the body’s DNA mismatch repair (MMR) system’
- Consequently, errors that normally spontaneously occur during DNA replication are no longer corrected, resulting potentially in tumor growth
- Tumors can be labeled as MSI-High (MSI-H), MSI-Low (MSI-L) or Microsatellite Stable (MSS)
- MSI is a proven prognostic oncology biomarker included in CRC guidelines and found in different cancer types:

<table>
<thead>
<tr>
<th>Cancer type</th>
<th>% MSI-H</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colorectal</td>
<td>10-20%¹</td>
</tr>
<tr>
<td>Endometrium</td>
<td>± 30%²</td>
</tr>
<tr>
<td>Ovarium</td>
<td>5-10%³</td>
</tr>
<tr>
<td>Melanoma</td>
<td>± 10%⁴⁵</td>
</tr>
<tr>
<td>Lung</td>
<td>± 5%⁶</td>
</tr>
<tr>
<td>Gastric</td>
<td>± 20%⁷</td>
</tr>
<tr>
<td>Pancreas</td>
<td>± 15%⁸</td>
</tr>
</tbody>
</table>

Idylla™ MSI test initially positioned as prognostic biomarker for colorectal cancer

Biocartis’ unique position in MSI

- Exclusive license agreement with the Flemish Institute for Biotechnology for rt-PCR compatible MSI markers
- Strong competitive position of Idylla™ based MSI testing versus current manual and complex procedure using capillary electrophoresis (Bethesda method), requiring multiple days to perform
- Idylla™ MSI test does not require sample control; 1 sample per patient required

References:
Extending scope of Idylla™ MSI test to immunotherapy

Potential to predict immunotherapy response

- Immunotherapies for oncology are shown to have a positive impact on long term survival, especially in combination with targeted oncology therapies
- Immunotherapies focus on fighting cancer cells via the body’s immune system and consist of 3 major approaches:
  - Cancer vaccination
  - CAR-T-cells (manipulation of immune system to recognize and attack cancer)
  - Immune checkpoint blockade (blocking ability cancer cells to downregulate activity immune system)
- Recent data show that a tumour’s MSI status may predict a patient’s response to certain immunotherapies
- Scope of the Idylla™ MSI test will be broadened to capture expected value of MSI for predicting response to certain immunotherapies

Study example (Le et al, NEJM 2015)

Lower progression rate in MSI-H patients to PD-1 immune checkpoint blockade with pembrolizumab (Keytruda)
**Idylla™: first line testing and gateway to NGS in oncology**

**Gene alterations*:**
- Melanoma
  - BRAF
  - NRAS
  - Other
- Colon
  - KRAS
  - NRAS
  - BRAF
  - MSI
  - Other

**Idylla™ positioning:**
- Idylla™ solid and liquid oncology menu guides treatment decisions for majority of cancer patients:
  - Focus on comprehensive panels for actionable biomarkers (linked to gene alterations)
  - Fully automated and fast turnaround times
  - Enables rapid triaging and same-day treatment

- Comprehensive genome profiling techniques like next-generation sequencing (NGS) to be used for detection of less common alterations that can guide alternative treatments or off-label use

- Challenges NGS to be overcome before widespread clinical use:
  - Complex batch-based workflows and high costs
  - Lack of standardisation can lead to wrong treatment decisions, similar to classical qPCR-based testing**

NGS sample and library preparation revisited

**Full NGS prep summary**
- 4 labs
- 6 auxiliary devices
- 6h hands-on
- 3 PCR reactions
- 18 samples/batch
- 12h Turnaround time

**Hands-on TaT**
- Sample prep: 2.5h, 5h
- NGS library prep: 3.5h, 7h
- Sequencing:
  - Typical NGS workflow:
    - Isolate genomic material from clinical sample
    - Quantify genomic material via qPCR
    - Target amplification via PCR
    - Indexing and tagging via PCR
    - Purification
    - Pool libraries
    - Sequencing
    - Data analysis
  - Idylla™ NGS Prep Panels:
    - Standardisation and automation of key sample and library preparatory steps
    - Any sample type
    - Reduction of total hands-on and turnaround time of 50%-75%**

* TaT: total turnaround time
** Based on common NGS workflows and management estimates
Sample to result for every patient

- Idylla™’s comprehensive panels for most commonly mutated genes guide treatment decisions for the majority of cancer patients

- For those cancer patients with more complex genomic alterations, Idylla™ NGS Prep Panels function as a gateway to comprehensive MDx testing

- Like for qPCR-based testing, Idylla™ offers the opportunity to revolutionize NGS workflows by:
  - Standardization
  - Automation
  - Shorter time-to-results
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