Cereno Scientific

Our vision is to develop innovative treatments to prolong life and increase quality of life for people with common and rare cardiovascular disease.

Annual report 2022

Contents

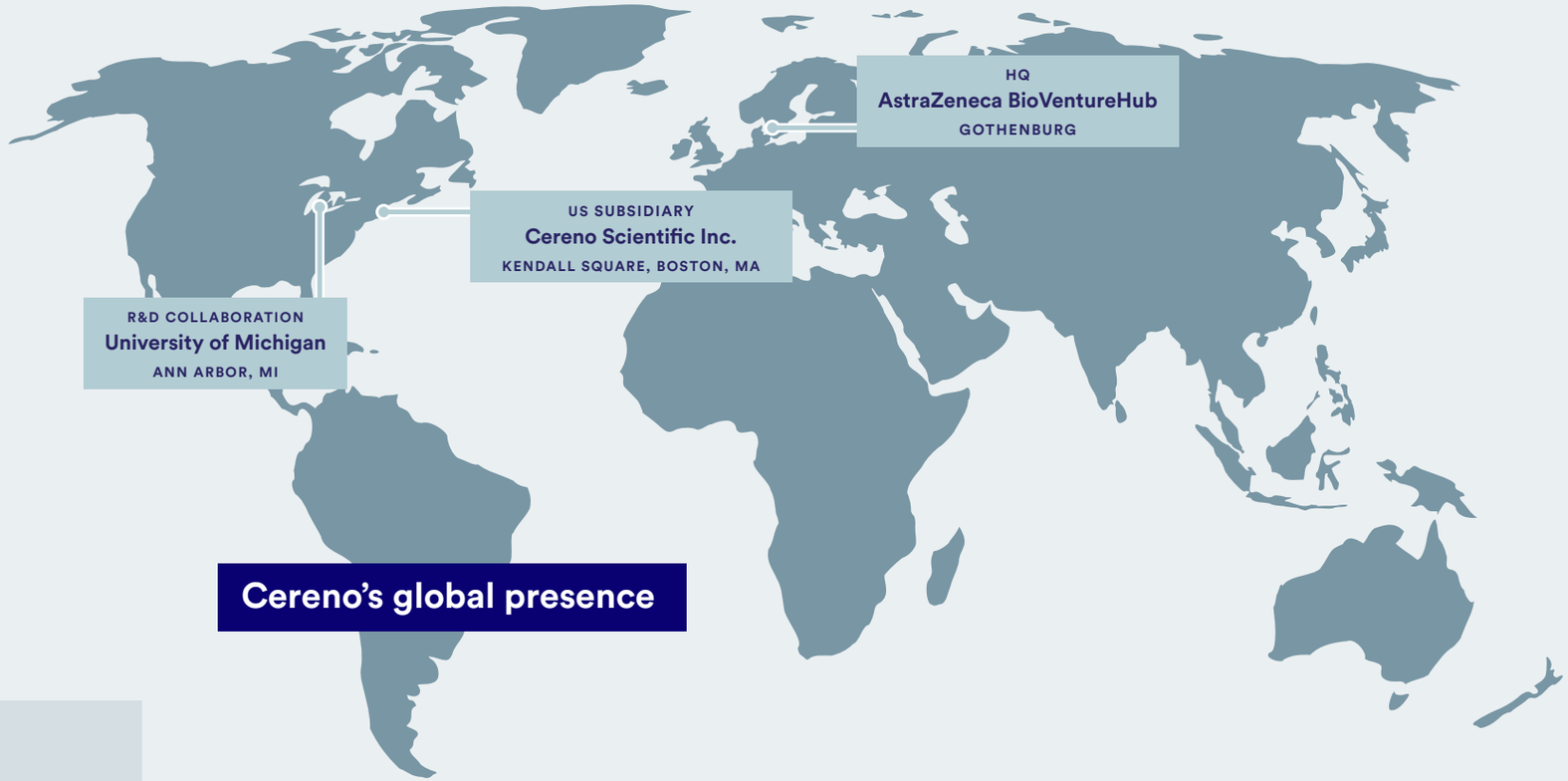
Annual general meeting
The annual general meeting is planned to be held on 1 June 20232 in Gothenburg. The location of the AGM will be published at the latest in connection with the notice to the AGM.

Upcoming financial reports
Interim report for quarter 1 ..... 25 April 2023
Annual General Meeting ..... 1 June 2023
Interim report for quarter 2 ..... 25 August 2023
Interim report for quarter 3 .....17 November 2023

Cereno Scientific in brief

Cereno Scientific is a clinical-stage biotech company focusing on developing innovative, effective, and safe treatments for patients affected by common and rare cardiovascular disease where great unmet medical needs persist.

Cardiovascular disease is the number one cause of death globally, killing nearly twice as many people as cancer. The term cardiovascular disease includes all diseases which involve the heart and/or the blood vessels. A majority of the complications associated with cardiovascular disease are caused by a blocking blood clot in a vein or artery in the body. Many people affected by a blood clot have as a consequence, for example, a heart attack, secondary heart failure, cardiac arrhythmias, stroke or other direct manifestations of blood clots in lungs or peripheral vessels.



Cereno's global presence

Cereno's pipeline comprises:

- **Drug candidate CS1 in Phase II** is being developed as a treatment of the rare disease pulmonary arterial hypertension (PAH).
- **Drug candidate CS014 in late preclinical phase** is being developed as a treatment for thrombosis prevention.
- **Drug candidate CS585 in preclinical phase** is being evaluated as a treatment for cardiovascular disease.

June 2016

Listed on Spotlight Stock Market

(CRNO B)

Financial overview

	Group		Parent Company	
(SEK)	Jan-Dec 2022	Jan-Dec 2021	Jan-Dec 2022	Jan-Dec 2021
Net sales	-	-	-	-
Loss after financial items	-27 648 649	-16 254 890	-27 747 301	-16 576 604
Earnings per share before dilution	-0,20	-0,15	-0,20	-0,16
Earnings per share after dilution*	-0,19	-0,11	-0,19	-0,12
Equity/assets ratio %	93.4 %	94.1 %	93.5 %	94.1 %
Cash and bank balance	67 045 679	89 634 757	67 012 503	89 594 519

Earnings per share: Earnings for the period divided by 137,514,844 shares as of 2022-12-31 and 105,261,782 shares as of 2021-12-31.

*Earnings per share after dilution: Earnings for the period divided by the number of outstanding shares and the number of shares that can be subscribed for with outstanding options as of the balance sheet date 12/31/2022 and 12/31/2021, respectively.

Year of 2022

Q1 First quarter

- In January, Cereno obtains additional patent protection for Phase II drug candidate CS1 in Japan. The patent is part of the third patent family which now has protection in Russia as well as Japan. It adds to the growing IPR portfolio for CS1 covering almost all global markets.

- Late January, it was announced that a milestone has been reached as part of preclinical CS014 program. The progress made in the preclinical program triggered an undisclosed milestone payment to Emeriti Bio from which CS014 was acquired in 2019. Based on this progress a new patent application has been filed. CS014 is currently undergoing a preclinical development program in a research collaboration with the University of Michigan, Ann Arbor, USA.

- In mid-February, the company held a webcast focused on the Phase II study with drug candidate CS1 in PAH. Presentations were held on the background, design, and plan for the Phase II study by CEO Sten R. Sörensen, CMO Dr. Björn Dahlöf, Dr. Raymond Benza, Principal Investigator for the study, Dr. Michael Holinstat, lead of Cereno's development programs at University of Michigan and Dr. Philip Adamson, Vice President and Chief Medical Officer at study collaborator Abbott. A link to the recording is available on Cereno's website.

- In February, it was made public that Cereno strengthens its Executive Management Team with a Head of Clinical Operations. Fredrik Frick will be responsible for all Cereno's clinical activities globally, providing leadership, project management and program oversight for the preparation and execution of international clinical development programs. Frick starts the role in May.

- In March, it was announced that the European Patent Office (EPO) has granted a patent for CS1's second patent family. The new patent adds to the existing intellectual property rights (IPR) for this strategically important market which now covers two of Cereno's three patent families.

Q2 Second quarter

- In late April, the company nominates a drug candidate in the preclinical CS585 program for continued development in cardiovascular disease after completing initial preclinical studies. The drug candidate was nominated after demonstrating highest potential in cardiovascular disease among a set of similar molecules. CS585 will continue its preclinical development program, which is executed as a research collaboration with the University of Michigan.

- In early May, the nomination of drug candidate CS014 was announced for continued development in cardiovascular disease. After completing the first half of the preclinical development program, CS014 was nominated after demonstrating highest potential in cardiovascular disease among a set of similar molecules. The preclinical development program for CS014 is currently ongoing in a research collaboration with the University of Michigan, Ann Arbor, USA.

- In May, Cereno announced that an abstract on preclinical drug candidate CS585 has been accepted as an oral presentation by the Scientific Program Committee at the European Hematology Association (EHA) 2022 Hybrid Congress in Vienna, Austria, on June 9-12, 2022. The abstract: "CS585 is a first-in-class compound targeting the IP receptor for prevention of thrombosis without increased risk of bleeding" will be presented by Dr. Michael Holinstat, lead of Cereno's preclinical development programs at University of Michigan and Director of Translational Research at Cereno.

- In mid-May, it was announced that an abstract regarding the design of the Phase II study with drug candidate CS1 in pulmonary arterial hypertension (PAH) was accepted as a poster presentation at the 15th Annual World Congress on Pulmonary Vascular Disease in Athens, Greece, on June 22-26, 2022. The abstract was a collaboration between Dr. Raymond Benza, principal investigator (PI) for the Phase II study, global partner Abbott and Cereno.

- Also in May, an abstract on preclinical drug candidate CS014 was accepted at the ESC Congress 2022 hosted by the European Cardiology Society in Barcelona, Spain, on August 26-29. The abstract was selected for an oral moderated poster presentation and is titled "CS014 is a novel HDAC inhibitor regulating platelet activity, fibrinolysis and clot stability for prevention of thrombosis

Third quarter

without increased risk of bleeding." It will be presented by Dr. Michael Holinstat, lead of Cereno's preclinical development programs at University of Michigan and Director of Translational Research at Cereno.

- In May, it was announced that a Head of Preclinical Development was recruited to strengthen Cereno's Executive Management Team. Nick Oakes was appointed Head of Preclinical Development bringing significant experience within preclinical research and development in cardiovascular disease, a key factor for the success of Cereno's continued pipeline development.

- Early July, Cereno shared that the first patient was enrolled in the Phase II study in PAH with drug candidate CS1. Based on the timing of enrollment and several factors mainly related to the activation of clinical sites, the study timeline was adjusted by about a quarter and topline results are thus estimated for Q1 2023. The number of study sites has been increased to include about 10 clinics across the US with potential for further expansion to facilitate meeting the timeline.

- In August, Cereno's innovative Phase II study design in PAH with CS1 was accepted for presentation at the CHEST annual meeting on Oct 16-19 in Nashville, US. The abstract was selected for an oral presentation and is titled "An innovative Phase 2 clinical trial design for the assessment of CS1 – a novel therapy in the treatment of pulmonary arterial hypertension." It was presented by Dr. Raymond Benza, the study's Principal Investigator (PI) and Chair of its Clinical Steering Committee and Professor and Director of the Division of Cardiovascular Diseases at the Ohio State University Wexner Medical Center.

- In mid-August, Cereno reported that two new patents were granted in drug candidate CS1's second and third patent families, respectively, in the US.

- On August 26, Cereno reported that the first patient received their first dose of drug candidate CS1 in the Phase II study in pulmonary arterial hypertension (PAH). Prior to the dosing, the patient has undergone a screening process, implantation of the CardioMEMS HF System to monitor lung pressure during the study, and a full baseline evaluation including a 6-minute walk test, echocardiography, and MRI to enable exploration of CS1's efficacy. Each patient undergoes a 12-week drug treatment period and a two-week follow-up period.

- At the end of August, Dr. Michael Holinstat, lead of Cereno's preclinical development programs at University of Michigan and Director of Translational Research at Cereno, presented an abstract at the ESC Congress 2022 in Barcelona, Spain. The abstract was selected for an oral moderated poster presentation and is titled "CS014 is a novel HDAC inhibitor regulating platelet activity, fibrinolysis and clot stability for prevention of thrombosis without increased risk of bleeding."

- On August 30, Cereno held its inaugural Capital Markets Day in central Stockholm. The program provided an update on the pipeline, clinical and preclinical development, and growth strategy from both the company as well as external collaborators. A recording of the event is available on the company website, www.cerenoscientific.com, in the Investors section.

- In early September, Cereno's patent protection for drug candidate CS1 was expanded through its second patent family by a granted patent in Mexico.

- In early September, a patent was granted in the second patent family for the preclinical Prostacyclin Receptor Agonist (PCA) Program, which includes drug candidate CS585. This broadened the patent protection and strengthened CS585's future commercial position in the US.

- In September, Cereno's drug candidate CS1 obtained strengthened patent protection through its third patent family with issued patents in Australia and South Korea.

- In late September, Cereno obtained the first patent in Europe, in the second patent family, for the preclinical Prostacyclin Receptor Agonist Program, which includes drug candidate CS585. The patent expands the intellectual property rights (IPR) for CS585 to Europe, one of the largest markets in cardiovascular disease.

- At the end of September, it was concluded that the warrants of series TO2 were subscribed to approximately 93.4 percent. Cereno received approximately SEK 61.3 million before issue costs during the month of October.

Q4 Fourth quarter

- In mid-October, Cereno expanded patent protection for drug candidate CS1 through its second patent family by obtaining patents in Israel and in Malaysia.
- In October, a loan of 5 MSEK was amortized according to the terms. This is the second and last installment on the loan from 2020.
- In November, the Nomination Committee was presented consisting of the following members: Cihan Punar, representing the Company's largest group of shareholders (per May 31, 2022); Sverker Jern, representing the Company's founders and Catharina Bäärnhielm, convening member and Chair of the Board of Cereno.
- Early December, Cereno participated at the 19th Global Cardiovascular Clinical Trialists (CVCT) Forum 2022, in Washington D.C., US, discussing clinical trials in cardiovascular disease with top thought leaders. The Forum brings together the top thought leaders in cardiovascular clinical trials and is co-chaired by Dr Bertram Pitt and Dr Faiez Zannad, both part of Cereno' Scientific Advisory Board. Cereno's Chief Medical Officer (CMO), Dr. Björn Dahlöf, was invited to speak and participate in several program sessions providing an industry perspective on significant topics such as patient benefit, clinical outcomes and trial design in both thrombosis and PAH, including the innovative design of the CS1-PAH Phase II trial.
- In December, changes to the company's Executive Management Team were announced with the expansion of Dr. Björn Dahlöf's role and the appointment of a Head of IR & Communications. Dr. Björn Dahlöf who has been the company's Chief Medical Officer (CMO) since 2018 also took on the roles of Chief Scientific Officer (CSO) and Head of Clinical Development. Josefine Göranson was appointed Head of IR & Communications.

After end of year

- In January, it was announced that an abstract on preclinical drug candidate CS585 had been accepted as a moderated poster presentation at ACC.23/WCC. The scientific congress is hosted by the American College of Cardiology Together With WCC (World Congress of Cardiology), in New Orleans, US, on March 4-6, 2023. The abstract titled "CS585 is a novel orally available prostacyclin receptor agonist with long-term in vivo inhibition of platelets and thrombosis formation in mouse without increased risk of bleeding" will be presented by Dr. Michael Holinstat, lead of Cereno's development programs at the University of Michigan and Director of Translational Research at Cereno.
- At the end of January, the company announced the appointment of Etienne Adriansen to the newly created position as Chief Business Officer, as of March 1, 2023.This appointment adds commercial expertise and capacity to Cereno's Executive Management Team as business development is an active and important component of the company's growth strategy.
- In early February, Cereno launched an Insights Series providing a unique view into different aspects of cardiovascular disease treatment landscape through interviews and conversations with Cereno's leadership, collaborative partners, and global thought leaders. The videos were mainly recorded in conjunction with the European Society of Cardiology (ESC) Congress in Barcelona late August 2022, and are centered around PAH and thrombosis.
- In February, Cereno announced the progress with its CS1 Phase II trial in PAH. All 9 clinical sites have been activated and the protocol changed to broader patient inclusion criteria and three patients were reported to be randomized and have entered the treatment period. Top-line results are expected end of 2023.
- In February it was announced that Cereno's preclinical drug candidate CS014 will continue toward clinical development for thrombosis prevention. CS014 has, in preclinical studies, demonstrated anti-thrombotic properties without bleeding, supporting the selection of target indication with the aim of preventing thrombosis. The drug candidate is currently in the final stages of its preclinical development program, and a Phase I study is expected to start in 2024.
- In early March, it was announced that Cereno's drug candidate CS585's second patent family has obtained a formally issued patent in Europe, one of the largest markets in cardiovascular disease. This strengthens and broadens the intellectual property rights (IPR) for CS585 which currently is in a preclinical development program in collaboration with the University of Michigan.
- In early April, it was announced that Cereno has signed a license agreement for the drug candidate CS585 with the University of Michigan. The signed agreement provides Cereno the exclusive rights to CS585 for further development and commercialization. Cereno also extends the preclinical collaboration agreements it has with UoM for the two programs CS585 and CS014.
- In early April, Cereno announced significant progress in the recruitment of patients into the study in the rare disease PAH with its lead candidate drug CS1. Now, a total of 10 patients have been enrolled into the study which plans to study 30 patients.

CEO letter

2022 has indeed been a fruitful and productive year for Cereno filled with milestones in our clinical and preclinical development as well as in the development of our operational business. I am pleased to see that our organization has continued to mature with the addition of several experienced experts to our management team adding important knowledge and capacity to be able to work strategically and operationally according to our ambitions, and drive steady growth for the company.

Our vision is to develop novel treatments to prolong life and improve the quality of life for people with common and rare cardiovascular disease. Cereno is pursuing development of new innovative drug therapies to meet significant unmet needs which exist among patients suffering from rare and common cardiovascular disease. Thrombosis, underlying e.g., MI, stroke and venous thrombo-embolism, is the most common cause of death in the world, among non-communicable diseases, and there is a significant unmet need for new drug alternatives in this major market, effective in offering prevention of thrombosis without causing an increased risk of bleeding.

In 2022, we made great progress developing Cereno and identifying opportunities to improve and strengthen the value we could bring to people living with cardiovascular disease. Our project portfolio now consists of three promising drug candidates with the potential to help patients who need safer and more effective therapeutic options. CS1, CS014 and CS585, all in various stages of development and all of them have shown significant progress over the past year, generating increased exposure in the scientific world.CS1 has gained attention for the innovative study design of the ongoing Phase II study in PAH, CS014 as the novel HDAC inhibitor for prevention of thrombosis, and CS585 as the novel prostacycline receptor agonist (PRA) with great potential in both PAH and thrombosis.

We are continuously working to strengthen patent protection for all candidates in our portfolio. It is often a crucial factor in the long-term success of a drug, especially from a commercial perspective, and I am pleased that during the year we have seen significant progress on our patents for all three programs.

I am also grateful for the continued strong support for our company which was expressed by a subscription rate of 94% in the TO2 warrant program in September. By steadily developing our clinical and preclinical programs and consistently delivering valuable advances, we are well positioned to increasingly attract interest from both scientific and commercial stakeholders.

The Phase II study of CS1 in the rare disease PAH

Our progress during the year is driven by deep insights into patient needs and market conditions based on dialogue with global opinion leaders, physicians and patients.

There is a significant need for better treatments for the fatal rare disease PAH. The need is especially high for treatments that not only alleviate the symptoms but that can potentially stop or delay the disease progression, such as our drug candidate CS1, and not only alleviate the symptoms like the alternatives available on the market.

A key milestone for Cereno was achieved when the first patient with PAH was enrolled in the Phase II study with CS1. This was a significant step in our progress toward demonstrating that our drug can-

A key milestone for Cereno was achieved when the first patient with PAH was enrolled in the Phase II study with CS1. This was a significant step in our progress toward demonstrating that our drug candidate CS1, with its unique efficacy profile, has the potential to offer a safe, efficacious, and disease-modifying treatment option for patients suffering from the devastating disease PAH.

- Sten R. Sörensen, CEO

didate CS1, with its unique efficacy profile, has the potential to offer a safe, efficacious, and disease-modifying treatment option for patients suffering from the devastating disease PAH. In early 2023, all sites were activated and in the beginning of April we could announce that 1/3 of the patients entered the study with a successful first visit. We now look forward to completing the study and reporting top-line results by the end of 2023.

Our preclinical programs

Two significant milestones during the year were the nomination of our two drug candidates CS014 and CS585 for continued development towards the clinic. CS014, an innovative HDAC inhibitor for epigenetic modulation, was nominated from our HDAC inhibitor program, and CS585 was nominated from our prostacyclin receptor agonist program.

A major challenge for current treatments that prevent thrombosis is the increased risk of bleeding. The results from our two preclinical programs have documented the ability to prevent thrombosis without any increased risk of bleeding, with two different therapeutic modes of action. The results have been presented at several medical congresses during the past year and received great interest.

Outlook

To summarize, we have achieved several important milestones in 2022. Now we continue to deliver on our vision to develop innovative treatments for common and rare cardiovascular diseases where great medical need exists.

I am also happy to announce that we at the beginning of April signed a license agreement for the drug candidate CS585 with the University of Michigan which gives us exclusive rights to CS585 for further development and commercialization. Cereno also extended the preclinical collaboration agreements it has with UoM for the two programs CS585 and CS014.

2023 will be a very exciting and important year for us at Cereno, and I look forward to continuing to deliver on our ambition and drive our strategy forward together with our unique team of experts, advisors and partners. With this, I would like to finally extend my gratitude towards the employees for their effortless work, our excellent collaborators, and partners for their invaluable contributions to our development. Last but not least, to our shareholder community for your continued support of our mission.

Sten R. Sörensen, CEO

Goals and strategy

Cereno's strategy, business model, and organization are shaped to support the overarching goal of developing innovative treatments for common and rare cardiovascular disease where great unmet medical needs persist. The company has attracted competent employees, consultants, advisors, and collaboration partners that combine decades of experience in areas that are crucial for drug development and commercialization. The company's strategy aims to leverage the full potential of the project portfolio in profitable markets within the cardiovascular disease space and provide significant value to both patients and shareholders.

Cereno focuses on discovering and developing drug candidates for cardiovascular disease with great unmet medical needs where existing treatments are insufficient. Cereno's project portfolio has a broad therapeutic potential with two possible pathways to market: in-house development within rare disease or through partnership for a broader indication. For a drug that received an orphan drug designation (ODD) as CS1 within PAH, there is the opportunity to first establish the drug candidate in rare disease, which allows for smaller studies, market exclusivity, and certain monetary reliefs. Alternative paths for development within common cardiovascular disease are provided through partnership with resourceful pharmaceutical companies.

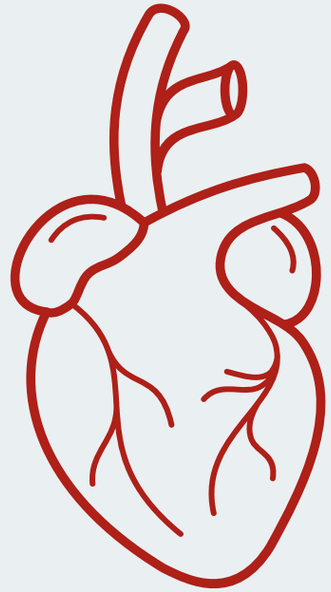
In a future out-licensing or deal with a major pharmaceutical company, the primary factors are compelling preclinical and clinical data, the patent portfolio and potential regulatory market exclusivity. The possibilities to increase the commercial value of the drug candidates and thus the company is therefore continuously evaluated through evaluation of further secured market exclusivity with expanded patent protection and other regulatory pathways such as orphan drug designation.

Cereno is a research and development company without current income. The company is mainly financed via the capital market or through future out-licensing or sale of projects. Activities to achieve financing via the capital market is ongoing parallel and in interaction with processes to be able enter into agreements for out-licensing or sale of projects.

I look forward to leveraging my previous experience in driving business growth and commercial collaborations to support Cereno's three promising programs that are in development at high speed. I think that a clear growth strategy and plan is crucial to the success of all companies within pharmaceutical development, at the company, portfolio, and project level. I am very pleased to lead this work forward as part of the Cereno team and contribute to the company's vision of developing new treatments for patients where major medical needs exist.

- Etienne Adriansen, Chief Business Officer (CBO)

Cardiovascular diseases



Cardiovascular disease is the most common cause of death in the world, killing nearly twice as many people as cancer every year. These disease manifestations have in common that today's treatment options are often insufficient and can lead to serious side effects. Cereno develops innovative treatments in cardiovascular disease that potentially can offer better efficacy and less serious side effects compared with today's available medicines.

Cardiovascular diseases are a collective term for all diseases involving the heart and/or blood vessels. This includes both common and rare diseases, which often lead to great morbidity, reduced quality of life for the patient, and premature death. A majority of the complications that occur in cardiovascular disease are caused by an occluding blood clot in a vein or artery in the body that can lead to a heart attack, secondary heart failure, arrhythmia, stroke, or direct manifestations of blood clots in the lungs and peripheral vessels.

Every year, nearly 18 million people die from cardiovascular disease, which is about a third of all deaths worldwide. The number of deaths is expected to increase due to an aging population, lifestyle factors, inadequate medicines, and steady patient growth globally. Heart attack and stroke are two of the most common cardiovascular complications and account for 85 percent of all deaths in cardiovascular disease.

Despite improved treatments and new treatment alternatives, it is estimated that approximately 22 million people will die annually from cardiovascular disease by 2030.

Cardiovascular diseases represent a great economic burden for society and great suffering for the individual. The associated economic societal burden of cardiovascular disease is estimated at an annual cost of EUR 210 billion in Europe and USD 555 billion in the United States.

There is a great need for new, more effective and safe treatment options that can contribute to an improved quality of life and increased survival in patients affected by cardiovascular disease.

Global leaders driving the future of PAH trials

The annual Cardiovascular Clinical Trialists' Forum (CVCT) brings together global experts from academia, industry, regulatory authorities, patient groups and, many others, to discuss the latest within clinical trials in the cardiovascular disease space. CVCT is co-chaired by Dr. Faiez Zannad and Dr. Bertram Pitt, two members of Cereno's scientific advisory board. At the 2021 virtual event, Cereno was invited to participate in the session "The Evolving Landscape Of Pulmonary Arterial Hypertension Phase 3 Trials Part 2 - Redefining Clinically Meaningful Endpoints." CMO Björn Dahlöf presented Cereno's innovative and cost-effective Phase II study with CS1 in the growing field for PAH treatments and studies. Other industry participants included global life science companies Merck and Abbott who are also active in the area.

At the 2021 virtual edition, Cereno was invited to participate in the session "The Evolving Landscape Of Pulmonary Arterial Hypertension Phase 3 Trials Part 2- Redefining Clinically Meaningful Endpoints." CMO Björn Dahlöf presented Cereno's innovative and cost-effective Phase II trial with CS1 in context of the evolving field of PAH therapy and trials. Other industry participants were the global life sciences companies Merck and Abbott that also are active in the space.

Pulmonary arterial hypertension (PAH)

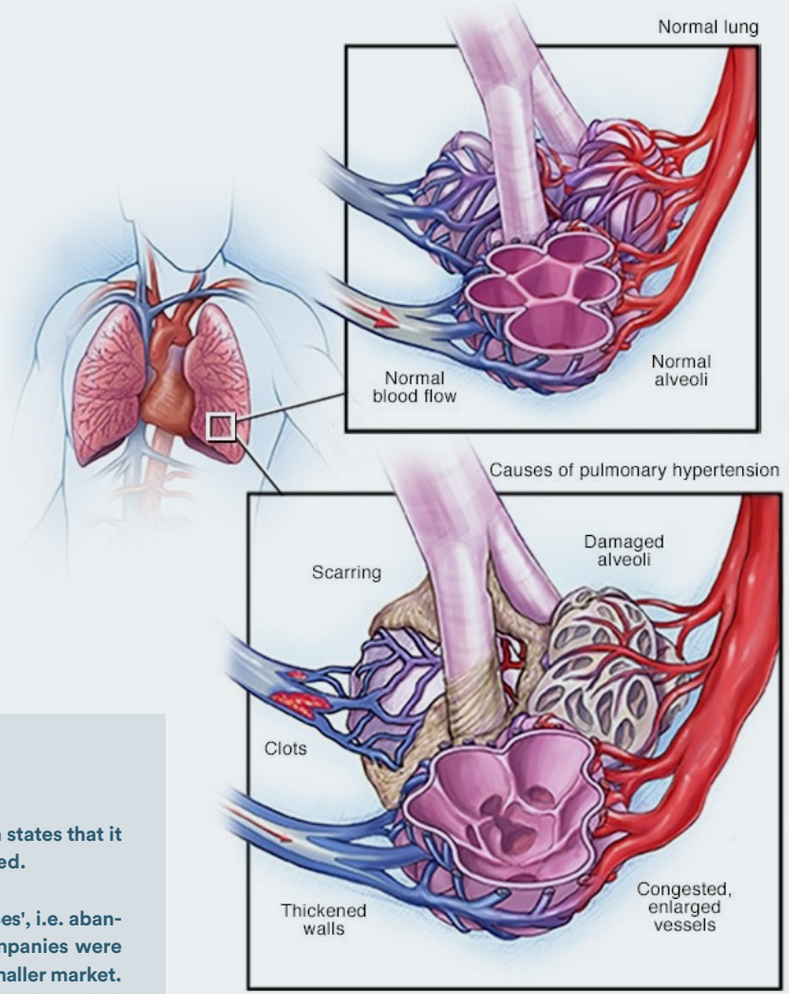
Pulmonary arterial hypertension (PAH) is a rare disease and a specific form of high blood pressure in the pulmonary circulation. The disease is characterized by an increase in the pulmonary pressure secondary to a thickening of the walls of the pulmonary arteries, i.e. the blood vessels that lead from the right side of the heart to the lungs. This impedes blood flow and causes high blood pressure in the lungs, at later stages local blood clots (so-called thromboses) are also formed.

Globally, the disease affects approximately 10 in 100 000 people. It is a severe, progressive disease with various etiologies that ultimately leads to heart failure and poor lung function. Patients with PAH have a severe prognosis, with inadequate treatment options, with more than 50 percent of patients dying within 5 years with a reduced quality of life throughout the course of the disease. In 2022, the life expectancy of a person with PAH was about 2.5 years without any treatment, which with current medical interventions can be extended up to 7.5 years.

In most cases, there is no known cause of PAH. There is no cure and most patients die from the right side of the heart eventually giving up.

PAH has a major impact on the individuals' level of functioning and causes shortness of breath, fatigue, chest pains, reduced ability to work, unnatural swelling, fainting and heart palpitations. This has significant implications for a patient's physical, mental, and social well-being.

The global market for PAH drugs is estimated to amount to nearly 12 billion dollars by 2027; among the three central markets, US, EU4 + UK and Japan, the US accounts for 60 percent. There is currently no cure available for PAH with the exception of lung transplantation, which patients are often too seriously ill to undergo. The treatments offered today are focused on improving the patient's functional level and involve, at best, a moderate slowing of the disease progression. There is therefore a great need for novel disease-modifying treatments that address the underlying causes of PAH that can give patients an increased opportunity for an improved and longer life.



Rare disease

There are approximately 6,000–8,000 rare diseases affecting more than 300 million people worldwide. Despite this, approximately 95 percent of these diseases have no approved treatment to offer those affected. There is not even a common global definition of what a rare disease is, but different regions have created their own. In the US, it is considered a rare disease if it affects fewer than 200,000 people, while in Europe the definition is that there should be fewer than 1 in 10,000 people affected.

There is not even a common global definition of what a rare disease is, but different regions have created their own. In the US, it is considered a rare disease if it affects fewer than 200,000 people while in Europe, the definition states that it should be fewer than 1 in 10,000 people affected.

Rare diseases came to be called 'orphan diseases', i.e. abandoned diseases, because pharmaceutical companies were not interested in developing treatments for a smaller market. In the US, therefore, the 'Orphan Drug Act' was launched to create financial incentives to encourage companies to develop novel treatments for rare diseases.

More than 300 million people worldwide have a rare disease.

Thrombosis

A dangerous thrombosis occurs when a blood clot blocks a blood vessel and it can occur in many different places in the body. There are two different forms of thrombosis; venous thrombosis and arterial thrombosis. Venous thrombosis is when the blood clot blocks a vein that carries blood from the body to the heart, and an arterial thrombosis is when the blood clot blocks an artery that carries oxygen-rich blood from the heart to the body. An occluding thrombosis is a serious complication that contributes to nearly 85 percent of all deaths in cardiovascular disease, with heart attacks and strokes being two of the most common complications. Many who have suffered a blood clot are prescribed drug treatment to prevent recurrent blood clots. In some cases, preventive drug treatment is initiated to prevent thrombosis even for those who never before suffered a blood clot when the risk is considered to be high in this individual.

Venous thrombosis consists of two types of venous thromboembolism, including the conditions deep vein thrombosis and pulmonary embolism, and stroke prevention in atrial fibrillation. Over 3.5 million cases of venous thromboembolism were diagnosed in 2021 and are considered a significant health burden, claiming over 800,000 lives each year in Europe and the US. The most common forms of arterial thrombosis include ischemic stroke and myocardial infarction, which kill more than one in four people globally. An arterial thrombotic event can also lead to poor blood flow to the extremities, which is a complication of peripheral artery disease. It is more common in the legs than in the arms because atherosclerosis is often found to a greater extent in the legs than in the arms due to higher blood pressure in the legs. About 8 million people, in the US alone, have peripheral artery disease.

Treatment for the prevention of thrombosis is a type of maintenance treatment where medicines are primarily prescribed to prevent recurrent thrombosis during different treatment periods depending on which type of thrombosis is involved. There are many anti-thrombotic drugs, so-called blood thinners on the market, which are used to prevent the formation of blood clots. These existing drugs have all different mechanisms of action, however, all have the serious and unwanted side effect of an increased risk of bleeding that can cause hospital stays and lead to death.

This is the main reason why antithrombotic drugs are not optimally used, but rather underutilized, i.e. not prescribed to all needing it, underdosed or used for a too short time. It is estimated that as many as 40–50 percent of people who would need antithrombotic drugs do not receive appropriate treatment. An effective drug without the high risk of bleeding that today's available treatments have is sought-after and could completely change the current approach to thrombosis prevention.

> As a practicing physician, I meet patients every day who are affected by debilitating cardiovascular disease. Unfortunately, this is an area where we are experiencing steady patient growth and where current medications are inadequate. There is a great need for more effective, tolerable, and simple treatments.
>
> **- Niklas Bergh, consultant cardiology, senior advisor, co-founder of Cereno**

Project portfolio

Cereno has a promising project portfolio of innovative drug candidates focused on developing effective and safe treatments for rare and common cardiovascular disease with major unmet medical needs. The company's portfolio includes a Phase II program and two preclinical programs.

Clinical phase
Tolerability, safety and efficacy studies

CS1
The drug candidate CS1 is an HDAC (histone deacetylase) inhibitor that acts as an epigenetic modulator through pressure-reducing, "reverse-remodeling", anti-fibrotic, anti-inflammatory and anti-thrombotic properties. CS1 is undergoing a Phase II clinical trial for the treatment of the rare disease PAH.

Preclinical phase
Studies in the laboratory to fulfill requirements to start clinical studies

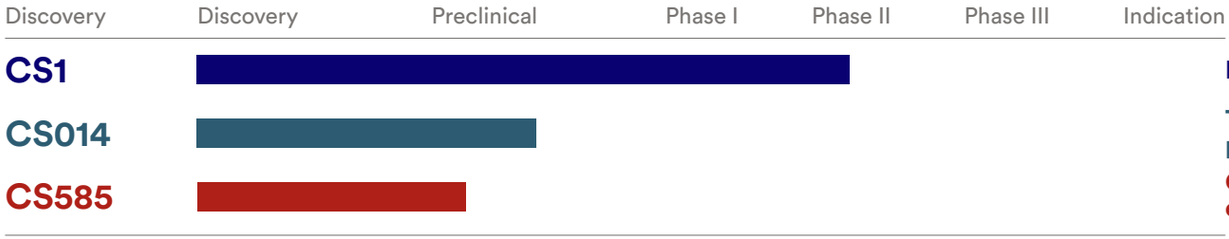
CS014
Drug candidate CS014 is an HDAC inhibitor with epigenetic effects that is being developed as a treatment to effectively prevent thrombosis without increased risk of bleeding.

CS585
The drug candidate CS585 is being evaluated as a treatment for cardiovascular disease and further studies are ongoing to confirm an indication for clinical studies in cardiovascular disease.

CS014 has shown promising anti-thrombotic properties in the ongoing preclinical program. Further clinical development will therefore continue in thrombosis prevention, where both venous thrombosis and arterial thrombosis may become relevant. In preclinical studies, the safety profile of CS014 has been shown to be favorable as it does not increase the risk of bleeding. This is a highly sought-after feature for antithrombotic treatments as there is currently no such drug available on the market.

– Björn Dahlöf, Chief Medical Officer (CMO)

Drug candidates in the portfolio



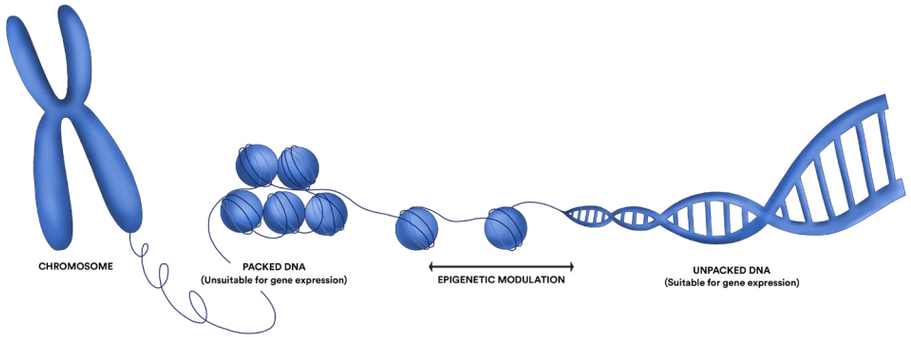
Epigenetic modulation

Cereno has two drug projects based on HDAC inhibition with epigenetic effects – the clinical drug candidate CS1 and the preclinical drug candidate CS014. The company is one of the first to develop treatments for cardiovascular disease through the application of epigenetic modulation. This provides the opportunity to develop safe and better treatments for cardiovascular diseases in a completely new way.

Epigenetic modulation can be described as changing gene expression without actually changing the genetic code, which is a new way to treat cardiovascular diseases. One of the most common epigenetic modulators is a class of enzymes called histone deacetylase, abbreviated HDAC. HDACs are found in most cells throughout the body and stimulation of these can lead to changes in how an individual's DNA is interpreted (translated into the production of proteins) within the cells. This can affect important cellular mechanisms and thus increase the risk of disease.

In recent years, epigenetic modulation has played an important role in new treatments for cancer, however, research into the use of epigenetic modulation in cardiovascular disease is just beginning. Scientists have discovered ways to regulate certain disease-causing epigenetic changes as a form of treatment through the use of HDAC inhibitors, among other things. HDAC inhibitors are epigenetic modulators that have been shown to have a full spectrum of potentially disease-modifying effects, with Cereno being among the first biotech companies to exploit its effects for the development of innovative drugs for the treatment of cardiovascular disease.

Simplified illustration of epigenetic modulation



Cereno is one of the first to develop treatments for cardiovascular diseases through the application of epigenetic modulation. This provides the opportunity to develop safe and better treatments for cardiovascular diseases in a completely new way.

– Björn Dahlöf, Chief Medical Officer (CMO)

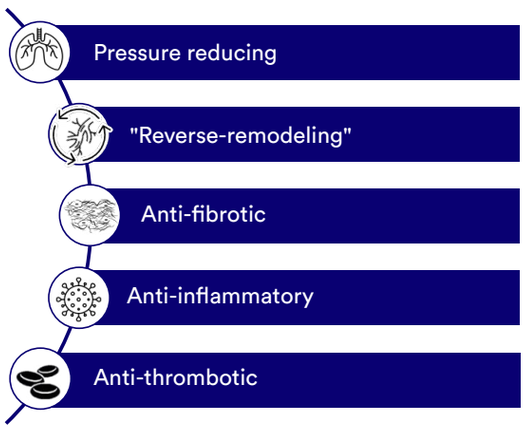
Clinical drug candidate CS1

The drug candidate CS1 is being developed as a treatment for the rare disease pulmonary arterial hypertension (PAH). The aim of CS1's development is to offer a disease-modifying drug that potentially can slow down, or reverse, the course of disease and thus improve the patient's quality of life and prolong the patients' life. A Phase II study with nine clinics in the US is ongoing in collaboration with the global healthcare company Abbott.

CS1 is an innovative formulation of valproic acid (VPA) and is an HDAC inhibitor that has received orphan drug designation for the treatment of PAH. CS1's active substance VPA works through epigenetic modulation with a multifold efficacy profile that is pressure-reducing, "reverse-remodeling" and has anti-fibrotic, anti-inflammatory, and anti-thrombotic properties. CS1 has the potential to offer an effective, safe and disease-modifying PAH treatment through epigenetic modulation and thus be able to offer improved quality of life and increased survival. CS1, therefore, has the potential to completely change the treatment options for PAH patients.

The documentation of CS1's properties has been demonstrated through in vitro models, animal models, human physiological data, independent epidemiological studies and a successfully completed Phase I study. In preclinical studies and clinical studies of the anti-thrombotic effect, CS1 showed an improvement of the endogenous fibrinolytic system by supporting thrombolysis with impending occlusive thrombosis through the effect on local release of t-PA and reduction of the blood levels of PAI-1. With the Phase I clinical trial, CS1 demonstrated good safety and tolerability, robust reduction of PA-1 and no problems with bleeding.

Overall, CS1 shows promising potential with a multifold efficacy profile with properties such as:



CS1 is being developed as a treatment for the rare disease PAH with the aim of offering patients a better and safer disease-modifying drug. CS1's unique efficacy profile fits well with the pathogenetic mechanisms of rare disease PAH and is believed to be able to address today's major unmet need for better treatment alternatives.

Phase II study in PAH

CS1's unique efficacy profile has been shown to be a good match with the pathogenetic mechanisms of the rare disease PAH and is believed to have potential as a disease-modifying treatment in the future.

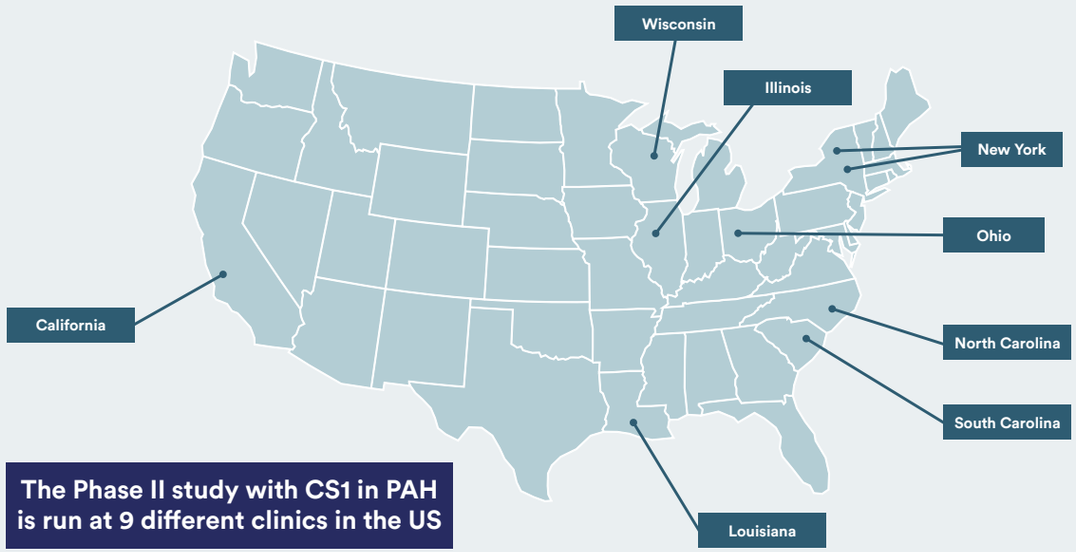
The development program for CS1 in PAH is anchored in the orphan drug designation (ODD) granted by the US FDA in March 2020. The FDA grants national orphan drug designation to encourage the development of drugs intended for the treatment of rare diseases in the US. Several incentives are associated with orphan drug status to facilitate drug development and they include, among other things, seven years of market exclusivity in the US from approval, assistance from the FDA in the design of clinical studies, and tax credits for qualified study costs. Through the granted orphan drug status, the FDA has also indicated that they believe that CS1 has the potential to offer patients with PAH a significantly improved treatment.

A Phase II clinical trial is ongoing to confirm CS1's safety, tolerability and efficacy in patients with PAH. A collaboration agreement with the global healthcare company Abbott is the basis for Cereno to be able to use Abbott's pioneering technology, the CardioMEMS HF System, in the study. The technology will be used to daily monitor pulmonary pressure and other cardiopulmonary function in patients in the Phase II study. The primary objective of the study is to evaluate the safety and tolerability of the drug candidate CS1. All relevant standard endpoints used in previous PAH studies for this patient group will be evaluated and a validated estimate of risk is calculated and various biomarkers, quality of life and various aspects of cardiac function are evaluated. Cereno expects that the optimal dose for later clinical trials will be able to be determined from the study. The study is being conducted at nine different specialist clinics in the USA and includes 30 patients. Patient recruitment for the study is ongoing and top-line results are expected by the end of 2023.

In early April 2023, Cereno announced significant progress in the recruitment of patients into the study in the rare disease PAH with its lead candidate drug CS1. Now, a total of 10 patients have been enrolled into the study which plans to study 30 patients.

Patent overview

Cereno has three patent families in relation to the drug candidate CS1. In these three patent families, there are a total of approved patents in the most important global markets, including Australia, Europe, Israel, Japan, Canada, Malaysia, Mexico, the USA, Russia and South Korea. Additional patent applications are undergoing national registration processes in other strategically selected markets, which, if approved, could provide additional market exclusivity.



The Phase II study with CS1 in PAH is run at 9 different clinics in the US

The collaboration with the global healthcare company Abbott allows Cereno to use Abbotts pioneering implantable technology CardioMEMS HF System in the ongoing Phase II-study with CS1 in PAH.

The technology is used to be able to monitor the lung pressure of patients in the study on a daily basis. Through the continuous monitoring, a smaller patient population than would otherwise be necessary can be used, which means that the study can be conducted more resource-efficiently. In addition, the function of the heart can be measured to see an effect of the medication with CS1.

CardioMEMS is a safe method already approved for monitoring in heart failure. With the current Phase II study, Abbott also gets the opportunity to test its system on a new disease indication. The study has received recognition for its innovative study design and has been presented at significant scientific congresses.

CS1 definitely needs to be tested in PAH, it could be game-changing for patients.

- Dr. Raymond Benza, Professor;
Network Director for Advanced Heart Failure and Pulmonary Vascular Diseases and Associate Chief Academic Officer at Catholic Health Network, St. Francis Hospital and Heart Center, Long Island, New York; principal investigator of Cereno's Phase II study with CS1 in PAH and member of Cereno's scientific advisory board and senior advisor.

Preclinical programs

Cereno has two preclinical development programs with novel drug candidates for the treatment of cardiovascular disease. The aim is for these to meet all the requirements to be allowed to start clinical studies.

CS014

The drug candidate CS014 belongs to the preclinical HDAC inhibitor program consisting of HDAC inhibitors that act through epigenetic modulation. In March 2019, CS014 was acquired from Emeriti Bio and has since been developed in a collaboration between Cereno and Emeriti Bio. The drug candidate CS014 is being developed as a future treatment to effectively prevent thrombosis without increasing the risk of bleeding.

CS014 as an HDAC inhibitor with epigenetic effects is a completely new approach to thrombosis prevention with the potential to effectively reduce the risk of developing thrombosis without increased bleeding risk. Given the potential for the additional disease-modifying properties seen with HDAC inhibition (see details under CS1), additional benefit may be expected from treatment with CS014 in thrombosis prevention in cardiovascular disease as inflammation, fibrosis, vascular changes and elevated blood pressure are common in these conditions. HDAC inhibition as thrombosis prevention has the opportunity to fundamentally change the treatment landscape and meet a major unmet medical need.

In preclinical studies, CS014 has, in both vein and arterial sides, shown to reduce the formation of thrombosis by inhibiting platelet activity and increase the fibrinolytic capacity.

Research collaboration with the University of Michigan

The University of Michigan is a top-ranked public research university in Ann Arbor, Michigan, USA with an extensive track record of successful collaborations with the pharmaceutical industry. The university has one of the largest annual academic research budgets of any university in the United States. Over US$1.6 billion is spent each year on research and development across the 2.8 million square meter laboratory area. The university has 6,200 faculty members and approximately 38,000 employees. Dr. Michael Holinstat leads work on Cereno's two preclinical programs at the University of Michigan. Dr. Michael Holinstat received his PhD in pharmacology from the University of Illinois at Chicago and completed postdoctoral training at Vanderbilt University in Nashville. His research areas have included thrombosis, pharmacology and hematology. Dr. Holinstat is an associate professor of pharmacology and leads the translational programs in drug development in hemostasis and thrombosis at the Department of Pharmacology at the University of Michigan. Dr. Holinstat has built a "state of the art" laboratory to investigate the effects of various pharmacological principles on platelets and coagulation both in vitro and in vivo.

Preclinical data were presented at the scientific congress ESC in August 2022 where these anti-thrombotic effects in both the vein and arterial side without increased bleeding risk were well received by the scientific community. This shows that CS014 has the potential to become a treatment option in both forms of thrombosis: venous thrombosis and arterial thrombosis. With the help of HDAC inhibitor CS014 and epigenetic modulation, it would be possible in the clinic to prevent thrombosis without an increased risk of bleeding. Additional preclinical and clinical studies will be conducted to determine the first indication where CS014 has the greatest potential as a treatment to prevent thrombosis.

The preclinical development program with CS014 is ongoing in collaboration with the University of Michigan. This program is now in its final phase with mandatory safety studies, including toxicity studies, while preparations to start clinical studies are at full pace. Cereno aims to be able to start a Phase I study with CS014 in the first half of 2024 in the indication thrombosis prevention.

CS585

The drug candidate CS585 belongs to the preclinical prostacyclin receptor agonist (PRA) program. CS585 has, in initial in vivo animal models, demonstrated the potential to significantly improve disease mechanisms relevant to selected cardiovascular diseases. The drug candidate CS585 has not yet been assigned a specific indication for clinical development as evaluation in the preclinical program is still ongoing.

In preclinical studies, CS585 has shown efficacy by stimulation of the prostacyclin (IP) receptor and thus prevents thrombosis without increased risk of bleeding. Preclinical data were presented at the scientific congress EHA 2022 and the US-based scientific congress ACC.23/WCC in March 2023. These preclinical data demonstrate that CS585 may have the potential to become one of the most effective PRA treatment for the indications PAH and thrombosis prevention.

In early April 2023, Cereno signed a license agreement for drug candidate CS585 with the University of Michigan. The agreement provides Cereno exclusive rights to further development and commercialization of CS585. In conjunction, the company extends the preclinical development collaboration agreements with University of Michigan for the two preclinical programs CS585 and CS014.

Market

The World Health Organization (WHO) states that cardiovascular disease is a global epidemic, which is only expected to increase. About one-third of all deaths in the world can be attributed to cardiovascular disease, with many of the resulting complications being caused by an occluding blood clot. Due to the high death rates and reduced quality of life caused by cardiovascular disease, a significant pharmaceutical market exists.

Today, more than 200 million people are at high risk of suffering from cardiovascular complications. Most complications resulting from cardiovascular disease occur due to a blood clot forming in the body's cardiovascular system and obstructing blood flow – so-called thrombosis. Almost 85 percent of all deaths from cardiovascular disease are due to heart attack or stroke. Other common types of cardiovascular complications include heart failure, arrhythmia, peripheral vascular disease, venous thrombosis, and pulmonary embolism. However, there are many more types of common and rare conditions included in the field of cardiovascular disease. With the rapidly growing number of people affected by cardiovascular diseases around the world, the need for new innovative treatments that are better and safer than current options is increasing.

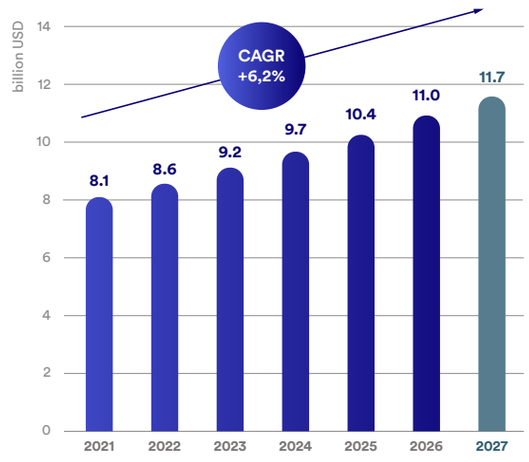
Market for Cereno's clinical drug candidate CS1

CS1 is being developed to treat patients with the rare disease PAH. There is currently no cure for PAH with the exception of lung transplantation, which patients often are too ill to undergo. Today, the life expectancy of a person with PAH is about 2.5 years without any treatment, with current medical interventions, the life expectancy can be extended up to 7.5 years.

The global market for PAH drugs is estimated to amount to nearly 12 billion USD in 2027. Among the three central markets, US, EU4 + UK and Japan, the US accounts for 60 percent of sales. Most of today's available treatments only offer an approximately 11 percent improvement in the patient's functional level and involve, at best, a moderate slowing of disease progression. There is therefore a great need for new disease-modifying treatments addressing the underlying causes of PAH, which can give patients an increased opportunity for an improved and longer life.

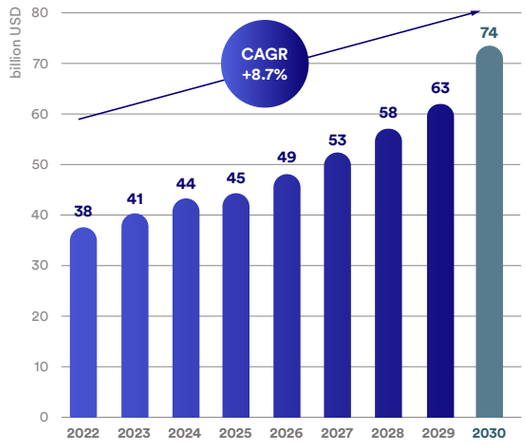
CS1 has the potential through epigenetic modulation to completely change the treatment options for PAH patients with improved quality of life and extended life.

Market size for PAH



Source: Infogence Global Research (2021) “Global Pulmonary Arterial Hypertension (2021-2027)

Global market size for Thrombosis prevention



Source: https://finance.yahoo.com/news/global-anticoagulants-market-reach-74-124400338.html)

Market for the drug candidate CS014

The drug candidate CS014 is being developed as a treatment to prevent thrombosis. There are two types of thrombosis, vein thrombosis and arterial thrombosis. Just over 3.5 million cases of venous thromboembolism were diagnosed in 2021 and considered a significant health burden, taking over 800,000 lives every year in Europe and the USA. The most common forms of arterial thrombosis include ischemic stroke and heart attack, which kills more than one of four people globally. An arterial thrombotic event can also lead to poor blood flow to the extremities, which is a complication of peripheral arterial disease, which affects approximately 8 million people in the US alone.

There are many antithrombotic drugs on the market used to prevent the formation of blood clots, so-called blood thinners. These existing drugs have all different mechanisms of action, however, they all also have the serious and unwanted side effect of an increased risk of bleeding that can cause hospitalizations and lead to death. The global market for antithrombotic drugs is expected to grow beyond 70 billion USD by 2030.

It is estimated that as many as 40–50 percent of the people needing blood thinning medication receive inadequate or no treatment due to the fear of bleeding. The need for new effective treatments with less risk of bleeding is therefore large and sought-after in the field. CS014 thus has the potential to become a new treatment in thrombosis prevention with its favorable efficacy and safety profile.

Market for the drug candidate CS585

Drug candidate CS585 has not yet been assigned a specific indication for clinical development, as evaluation in the preclinical program is still ongoing. In preclinical studies, CS585 has shown efficacy by stimulation of the prostacyclin (IP) receptor and prevents thrombosis without increased risk of bleeding. These preclinical data demonstrate that CS585 may have the potential to become one of the most effective prostacyclin receptor agonists (PRA) treatments for the indications PAH and thrombosis prevention. Market estimates for these two indications can be seen above in the section on CS1 and CS014 respectively.

Patent portfolio

Cereno is continuously working actively with securing patents for the company's three development projects in order to optimally acquire a competitive position before a potential market launch or partnership agreement. In addition to the already granted patents below, there are additional patent applications for all drug candidates undergoing national registration processes in strategically selected markets, which, if approved, could provide additional market exclusivity. The company's IP assets are continuously evaluated based on new data from preclinical and clinical studies that may represent an opportunity for further extended patent protection.

Patent for drug candidate CS1

Cereno has three patent families in relation to the drug candidate CS1. In these three patent families, there are a total of approved patents in the most important global markets, including Australia, Europe, Israel, Japan, Canada, Malaysia, Mexico, the US, Russia and South Korea. This gives CS1 patent protection up to 2035 and 2037, respectively, depending on the patent family.

Patent for drug candidate CS014

Drug candidate CS014 currently has pending patent applications, which are being processed by the authorities of selected markets. If this is approved, there will be patent protection until at least 2042.

Patent for drug candidate CS585

Drug candidate CS585 has two patent families that have patents granted in Europe and in the US. Based on these, the CS585 has patent protection until at least 2039.

> Our patent portfolio is an important tool for securing a strong competitive position before a potential market launch or partnership agreement. At Cereno, we continuously work to evaluate our assets in pace with new data from preclinical and clinical studies obtained.
>
> **- Jonas Faijerson Säljö, Chief Intellectual Property Officer (CIPO)**

Organization

Today, Cereno is led by a management team with broad experience in all areas of development and commercialization of pharmaceuticals. Cereno has prioritized securing the key competence needed to deliver on the company's vision of developing medicines that can improve both quality of life and survival for patients with cardiovascular disease. Research and development (R&D) of pharmaceuticals is a multidisciplinary approach that also often requires collaborations and partnerships to achieve success. Collaborations within both academia and industry are therefore important components for optimizing R&D strategies and driving development forward with the right skills and high productivity.

Cereno has an international presence with a base both in Sweden and the US with the headquarters based in AstraZeneca's BioVentureHub in Gothenburg and an American subsidiary Cereno Scientific Inc. located in the biotech center Kendall Square in Boston, US.

Cereno has built a significant group of advisors who bring preclinical and clinical expertise, extensive drug development experience, and a strong global network to the company. These thought leaders in the field of cardiovascular diseases, contribute with their expertise regarding the definition of clinical strategy, design of specific programs or studies for optimal drug development for the development projects in the company's portfolio. This integrated form of collaboration enables close contact with clinical reality, ongoing research and opens doors to a large network of researchers, other opinion leaders and industry contacts which are very valuable for the company's development.

Cereno’s collaboration partners

Cereno has well-established collaboration partners within both the preclinical and clinical development programs. Parts of the preclinical development programs for CS014 and CS585 in preparation for Phase I studies are conducted in collaboration with the University of Michigan. For other developments, such as safety studies, pharmacokinetic evaluation and formulation work, collaboration takes place with established contract research organizations (CRO). The Phase II study with CS1 in PAH is being conducted in collaboration with the global healthcare company Abbott as well as with an established CRO for conducting clinical studies.

The University of Michigan is a top-ranked public research university in Ann Arbor, Michigan, USA with an extensive track record of successful collaborations with the pharmaceutical industry. The university has one of the largest annual academic research budgets in the US. Dr. Michael Holinstat leads work on Cereno's two preclinical programs at the University of Michigan. Dr. Holinstat is Associate Professor of Pharmacology in the Department of Pharmacology at the University of Michigan and has extensive experience leading translational programs in drug development in hemostasis and thrombosis.

The collaboration with the global hralthcare company Abbott means that Cereno can use Abbott's pioneering implantable technology, the CardioMEMS HF System, in the ongoing Phase II study with CS1 in PAH.

Partners for drug development

Cereno works with several carefully selected partners to be able to carry out research and development and operationally drive the company forward.

Preclinical development	ApconiX
	Cyprotex
	Emeriti Bio
	University of Michigan
Formulation development and manufacturing	Galenica
Pharmaceutical synthesis	GVK
	Red Glead Discovery
Clinical studies	Abbott
	TFS
	Worldwide Clinical Trials
IPR strategy	Cozen O'Connor
	Synergon
Regulatory strategy	NDA Regulatory Service
US regulatory agent	Cardinal Health
Business development and strategy	Hibiscus BioVentures
	MSC Nordics
Business administration	Business Sweden
	Frejs Revisorer
	MAQS Advokatbyrå
	Nestil
	RSM
	Söderberg & Partner

Cereno's scientific advisory board

Dr. Bertram Pitt

Professor Emeritus in Medicine, University of Michigan School of Medicine

Dr. Pitt is a Professor Emeritus in Medicine at the University of Michigan School of Medicine, US. Pitt assumed directorship of the division of Cardiology at the University of Michigan School of Medicine in 1977. Among his achievements, he has been awarded the James B Herrick award from the American Heart Association as well as life-time achievement awards from the Heart Failure Society of America and the European Heart Failure Society. He has served on the editorial boards of several cardiovascular journals and has published over 750 articles, chapters and books. Co-chairman, CVCT Global Forum.

Dr. Raymond Benza

Professor, Network Director for Advanced Heart Failure and Pulmonary Vascular Diseases and Associate Chief Academic Officer at Catholic Health Network, St. Francis Hospital and Heart Center, Long Island, New York

Benza is currently Professor and Network Director of the Division of Cardiovascular Diseases at St. Francis Hospital and Heart Center Long Island New York. He has extensive clinical trial experience with involvement in just over 60 different clinical trials. Benza has also been involved in around 325 publications, and written 6 books of which 3 are focused on pulmonary hypertension.

Dr. Deepak Bhatt

Director at Mount Sinai Heart, Dr. Valentin Fuster, Professor of Cardiovascular Medicine

Dr. Deepak Bhatt was Professor of Medicine at Harvard Medical School between 2012-2022. He has been listed in *Best Doctors in America* from 2005 to 2020. Dr. Bhatt has authored or co-authored over 1900 publications and has been listed by the Web of Science Group as a Highly Cited Researcher from 2014 to 2022. He is the Editor of *Cardiovascular Intervention: A Companion to Braunwald's Heart Disease and of Opie's Cardiovascular Drugs: A Companion to Braunwald's Heart Disease.*

Dr. Gunnar Olsson

MD & Ph.D. in Medical Sciences, Karolinska Institute

Olsson is an MD, PhD in Medical Sciences at the Karolinska Institute. He was previously Adjunct Professor at the Karolinska Institute, and has extensive experience from leading R&D positions in the pharmaceutical industry. He has over 20 years of experience in different Global R&D management positions at AstraZeneca, and contributed to more than a dozen successful global product registrations for medicines in cardiovascular, vascular and gastrointestinal indications.

Dr. Gordon Williams

Professor of Medicine at Harvard Medical School

Dr. Williams is a Professor of Medicine at Harvard Medical School since 1981, and was the founder and Director of its Scholars in Clinical Science Program until 2008. A lifelong interest of Williams' has been to understand the mechanisms by which aldosterone participates in cardiovascular diseases. He has published more than 600 original articles, reviews, chapters and books, including co-editing his seminal textbook "Clinical and Translational Science."

Dr. Faiez Zannad

Professor emeritus of Therapeutics and Cardiology, Université de Lorraine

Dr. Zannad is a Professor Emeritus of Therapeutics and Cardiology at Université de Lorraine, France. Zannad is involved in a number of major cardiovascular clinical trials, as a Principal Investigator and/or as a chair or member of several Steering Committees, Critical Event Committees and Data Safety and Monitoring Boards. Founder & chairman, CVCT Global Forum.

Board of Directors

Catharina Bäärnhielm

Chairman of the Board since 2015
Born 1952

Catharina Bäärnhielms has a long experience from a variety of senior positions in the pharmaceutical industry, e.g., as Vice President and Global Project Director at AstraZeneca. Her experience covers all phases of the drug development process, from idea to finished drug. Catharina Bäärnhielm has extensive knowledge in global research and development strategies for both small molecules and biologics in various disease areas and extensive experience of running collaborations between industry and academia.

Education: Catharina Bäärnhielm is a pharmacist and holds a Ph.D. in pharmacokinetics and drug metabolism from Uppsala University.

Other board assignments: Member of the Board of Råövind AB.

Principal activities outside of Cereno: -

Björn Dahlöf

Member of the Board since 2012
Born 1953

Björn Dahlöf is Cereno's Chief Medical Officer since 2022 and has for many years been an adviser to small and large pharmaceutical companies regarding drug development in all phases from preclinical development to larger lifecycle management studies after registration. Björn Dahlöf has extensive experience in cardiovascular research, pharmacology, drug development, and clinical trials (all phases) and has lectured in these areas internationally. He has also initiated and led several major national and multinational mortality and morbidity studies that have had significance for guidelines in cardiovascular prevention and authored over 400 scientific publications.

Education: Björn Dahlöf is medical doctor from the University of Gothenburg, internal medicine physician and is associate professor at Sahlgrenska University Hospital, University of Gothenburg.

Other board assignments: Member of the Board of PEXA AB, Goldwater Sweden AB. Chairman of the Board of BD Medical Consulting AB.

Principal activities outside of Cereno: Owner of BD Medical Consulting AB.

Sverker Jern

Member of the Board since 2012
Born 1954

Sverker Jern is one of the founders of Cereno Scientific AB. He is a physician and Professor of Cardiovascular Physiology at the University of Gothenburg. It is Sverker Jern's research at the Wallenberg Laboratory for Cardiovascular and Metabolic Research at the Sahlgrenska Academy, Gothenburg, which discovered the molecular mechanisms that control the body's inherent protection against blood clots. These basic research findings are utilized in Cereno's development programs. Sverker Jern has also been in charge of ECG analysis in several of the largest international cardiovascular intervention studies.

Education: Sverker Jern holds a B.A., M.D., Ph.D., and is a Specialist in Clinical Physiology, Associate professor, Professor and a University Hospital Chief Physician at Sahlgrenska University Hospital, University of Gothenburg.

Other board assignments: -

Principal activities outside of Cereno: CEO of Jern Medical AB and Jern Diagnostics AB.

Lena Mårtensson Wernrud

Member of the Board since 2022
Born 1954

Lena Mårtensson Wernrud has been working in the Life Science area in different management level positions since 1984 and has also been a tutor of several doctoral candidates. Among her positions include Head of Preclinical Unit at Gambro AB, Director and Head of Clinical Operations at Perstorp Pharma, Global Director of Project Management at Pharmacia/Pfizer, Director & Head of Business Development Discovery Respiratory and Inflammation at AstraZeneca, as well as Senior Director and Head of Pipeline Sourcing at LEO Pharma.

Education: Lena Mårtensson Wernrud holds a Ph.D. and is associate professor at Lund University.

Other board assignments: Chairman of the board of Xinnate AB and Transient Pharma AB.

Principal activities outside of Cereno: -

Rein Piir

Member of the Board since 2021
Born 1958

Rein Piir has many years of experience in business and acquisition analysis, capital market matters, investor relations and alliance management towards global companies. He is also an advisor to listed life science companies in business planning, strategy development, financing, and transactions and has been involved in the IPO of several Life Science companies. Previously, he has been Head of Analysis at Carnegie Investment Bank, CFO/Head of Investor Relations at listed Medivir and auditor at PriceWaterhouseCoopers.

Education: Rein Piir holds a Bachelor of Economics from Uppsala University.

Other board assignments: Member of the Board of Piir & Partner AB. Member of the board of IRLAB Therapeutics AB. Member of the board of L. E. Svensson Snickeri Aktiebolag.

Principal activities outside of Cereno: Owner of Piir & Partner AB with focus on advice and strategic support for companies.

Anders Svensson

Member of the Board since 2018
Born 1951

Anders Svensson is a licensed physician, medical doctor, and lecturer with over 20 years of experience in academic medicine; his scientific focus is cardiovascular diseases. He has extensive experience in international pharmaceutical development after almost 20 years in leading positions within the global pharmaceutical industry such as F. Hoffmann-LaRoche where he was responsible for the global clinical development of diabetes and cardiovascular. Prior to that he was working as Vice President and responsible for the clinical development of cardiovascular and later gastrointestinal drugs at AstraZeneca. Anders Svensson has almost 100 publications to his name.

Education: Anders Svensson holds a MD, Ph.D. from the University of Gothenburg.

Other board assignments: Member of the board of Tikomed AB.

Principal activities outside of Cereno: Founder of C Anders Svensson Consulting.

Klementina Österberg

Member of the Board since 2014
Born 1975

Klementina Österberg is the CEO of GU Ventures, the University of Gothenburg's holding company that incubates and invests in new innovations, of which one is Cereno. Previous assignments include the business plan competition, Venture Cup, various Volvo companies, DaimlerChrysler, and Geveko Industries.

Education: Klementina Österberg holds a master's degree in business administration pharmacist from the University of Gothenburg.

Other board assignments: Chairman of the Board of Aprit Biotech AB, MIVAC Development AB, GOKAP Invest AB and Vasa Angels I AB. Member of the Board of AB Svenska Stjärnor, Biomatcell AB, Destination Invest I Göteborg AB, GU Executive Education AB, and OnDosis AB.

Principal activities outside of Cereno: CEO of GU Ventures AB.

Niklas Bergh

Deputy member since 2015
Born 1979

Niklas Bergh is Cereno's Senior Advisor for the preclinical and clinical programs and works as a senior consultant at the department of cardiology at Sahlgrenska University Hospital and is an expert on the body's defense system against blood clots and advanced heartfailure/transplantation. He has extensive experience from experimental and clinical research with a primary focus on understanding and stimulating the body's own defense system against blood clots as well as heart failure. Niklas Bergh is one of the founders of Cereno Scientific AB.

Education: Niklas Bergh is specialist in internal medicine and cardiology and associate professor in experimental cardiology at the Sahlgrenska Academy, University of Gothenburg.

Other board assignments: -

Principal activities outside of Cereno: Owner of Glasögonfyndet Fastighets AB, Johan Ringius KB, Glasögonnetto AB and Knippla Consulting AB.

Jonas Faijerson Säljö

Member of the Board since 2012
Born 1977

Jonas Faijerson Säljö is Cereno's Chief Intellectual Property Officer since 2019 and has a research background in the stroke area with wide-ranging experience in the commercialization of medical innovations. Jonas Faijerson Säljö has significant expertise in intellectual property and business development experience, from a large number of companies in the life science area. Currently employed as Senior IP Business Consultant and CEO of Synergon AB.

Education: Jonas Faijerson Säljö holds a Ph.D. in Neurobiology and is a licensed pharmacist from the University of Gothenburg.

Other board assignments: Member of the board of Synergon AB and Innovaurum AB.

Principal activities outside of Cereno: CEO of Synergon AB and founder of Innovaurum AB.

Management

Sten R. Sörensen
CEO since 2015
Born 1959

Sten Sörensen has extensive experience from the pharmaceutical, biotech, and finance industries. Before working at Cereno he was Head of International Marketing Operations at Monsanto (GD Searle) and Global Marketing Director for Secondary Prevention Products, Cardiovasculars at AstraZeneca. Sten has previously initiated two groundbreaking preventive survival studies in heart failure: MERIT-HF and RALES and led them to global commercial success.

Education: Sten R. Sörensen hold a bachelor's degree in chemistry from Lund University.

Etienne Adriansen
Chief Business Officer since 2023
Born 1964

He has more than 30 years of experience from the life science industry, working in various commercial roles with strategy, planning, portfolio management and all aspects of business development in Scandinavian companies such as Lundbeck, Nycomed and LEO Pharma.

Education: Etienne Adriansen holds a M.Sc. in Business Administration and Commercial Law from the University of Aarhus, Denmark.

Daniel Brodén
Chief Financial Officer since 2019
Born 1986

Before joining Cereno, Daniel Brodén was working as Financial Manager for GU Ventures portfolio companies and prior to that he was working as an auditor at Frejs Revisorer and PwC's Financial services department.

Education: Daniel Brodén holds a bachelor's degree in business and economics from Uppsala University and a master's degree in accounting from the University of Gothenburg.

Björn Dahlöf
CMO, CSO, Head of Clinical Development since 2022, joined Cereno 2012.
Born 1953

Björn Dahlöf has extensive experience in cardiovascular research, pharmacology, drug development, and clinical trials (all phases) and has lectured in these areas internationally. Adviser to small and large pharmaceutical companies regarding drug development in all phases from preclinical development to larger lifecycle management studies after registration. Björn Dahlöf has initiated and led several major national and multinational mortality and morbidity studies that have had significance for guidelines in cardiovascular prevention and authored over 400 scientific publications.

Education: Björn Dahlöf is medical doctor from the University of Gothenburg, internal medicine physician and associate professor at Sahlgrenska University Hospital, University of Gothenburg.

Josefine Göranson
Head of IR & Communications since 2022
Born 1982

Josefine Göranson has an extensive experience in the life sciences sector having held a variety of communications and marketing roles at the global MedTech company Atos Medical and most recently as Communication Leader at IKEA of Sweden in the Inter IKEA Group.

Education: Josefine Göranson holds a bachelor's degree in media & communication from Lund University.

Nicholas Oakes
Head of Preclinical Development since 2022
Born 1961

He has more than 20 years of experience working in the pharmaceutical industry with both efficacy and safety-related aspects of preclinical research to discover and develop new effective and safe medicines in metabolic, cardiovascular, and renal disease areas.

Education: Nicholas Oakes holds a Ph.D. in cardiovascular and metabolic research from the University of New South Wales, Sydney, Australia.

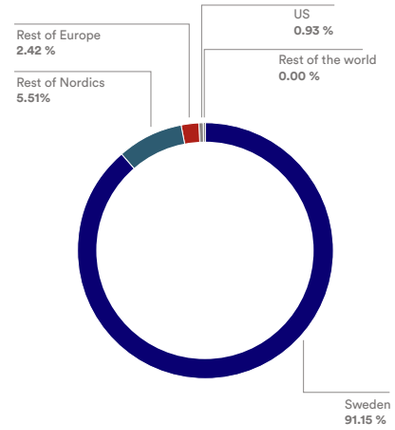
The share

Cereno's share has been listed on the Spotlight Stock Market since June 22, 2016. At the turn of the year, the share capital in Cereno amounted to SEK 10 526 178.2 divided into 137,514,844 shares, of which 722,248 Class A shares. The shares have a ratio value of SEK 0.10. All shares carry one vote where the Class A share gives ten (10) votes per share and one (1) vote per Class B share. The number of shareholders on December 31, 2021 was approximately 4,971. The five largest owners held approximately 24 percent of the share capital.

Size per class on December 31, 2022

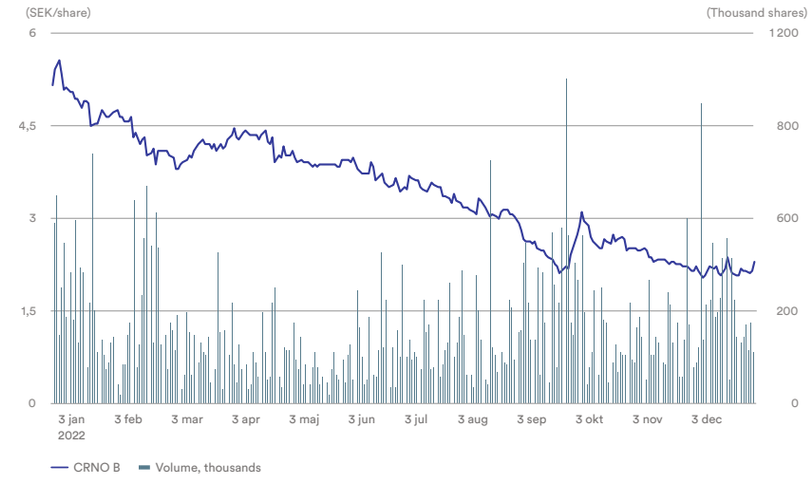
Holding	Number of shareholders	Quantity A shares	Quantity B shares	Holding (%)	Votes (%)	Market value (KSEK)
1 - 500	1 235	0	229 371	0.17 %	0.16 %	518
501 - 1 000	513	0	413 642	0.30 %	0.29 %	935
1 001 - 2 000	1 396	0	3 622 673	2.63 %	2.52 %	8 187
5 001 - 10 000	526	0	3 952 254	2.87 %	2.74 %	8 932
10 001 - 15 000	244	0	3 082 528	2.24 %	2.14 %	6 967
15 001 - 20 000	177	0	3 148 044	2.29 %	2.19 %	7 115
20 001 -	718	722 248	122 344 084	89.49 %	89.97 %	276 498
Total	**4 809**	**722 248**	**136 792 596**	**100.00 %**	**100.00 %**	**309 151**

Shares per regions on December 31, 2022



Source: Euroclear Sweden AB

Share development



Administration Report

The Board of Directors and the CEO of Cereno Scientific AB (556890-4071) hereby submit the Annual Report for the fiscal year 2022-01-01 - 2022-12-31. The Annual Report is prepared in Swedish kronor, SEK.

Operations

Cereno Scientific is a clinical stage biotech company within cardiovascular diseases. The lead drug candidate, CS1, is a Phase II candidate in development for the treatment of the rare disease pulmonary arterial hypertension (PAH) and thrombotic indications. CS1 is an HDAC (Histone DeACetylase) inhibitor that acts as an epigenetic modulator with anti-thrombotic, anti-inflammatory, anti-fibrotic and pressure-relieving properties, all relevant for PAH. In addition, Cereno has two promising preclinical development programs targeted at treating cardiovascular diseases. The CS585 program consists of stable, selective, and potent IP (prostacyclin) receptor agonists and the CS014 program comprises HDAC inhibitors with epigenetic effects. The company is headquartered in AstraZeneca's BioVenture Hub, Sweden, and has a US subsidiary Cereno Scientific Inc. based in Kendall Square in Boston, Massachusetts, US.

Financial performance

During the year 2022, the company mainly invested in the conduct of the clinical Phase II study with CS1 in PAH, in the production of clinical supplies, in the development of its patent portfolio and in preclinical studies with CS585 and CS014. A share issue was done in September with subscription to new shares through the exercise of warrants of series TO2, which provided the company with approximately SEK 61.3 million before deduction of transaction costs. At the end of the year, the group had a cash balance of approximately SEK 67 million and an equity/assets ratio of 93.4 %.

Risk factors

A number of risk factors can have a negative impact on Cereno Scientific's operations. It is therefore of great importance to take into account relevant risks in addition to the company's growth opportunities. These risks are described without mutual arrangement and without claims to be comprehensive in the company's prospectus issued in connection with the rights issue in May 2019 and which can be read on the Company's website.

Company structure and shareholding

Cereno Scientific Group comprises parent company Cereno Scientific AB and its US subsidiary Cereno Scientific Inc. The US subsidiary was formed on 20 December 2019, and is wholly owned by Cereno Scientific AB.

Company share

Cereno Scientific's B shares were listed on Spotlight Stock Market on 22 June 2016. Spotlight Stock Market is an affiliate of ATS Finance AB, which is a securities company under the supervision of Finansinspektionen, the Swedish financial supervisory authority. Spotlight Stock Market operates a multilateral trading facility (MTF), which is not a regulated market.

Share capital

On 31 December 2022, the share capital was divided across 137 514 844 shares. The company has two classes of shares of which 722 248 are Class A shares. The Class A share carries the right to ten (10) votes per share. Each Class B share carries the right to one (1) vote per share. Each share gives equal rights to the company's assets and earnings. The quote value (share capital divided by number of shares) amounts to SEK 0.10.

Warrants of convertible loans

The financing agreement concluded with the European High Growth Opportunities Securitization Fund on 1 March 2019 and consisted of convertible loans and associated warrants. The company no longer has any outstanding convertible loans. During December 2021 Cereno Scientific repurchased 1 105 262 warrants. The number of warrants that remain outstanding after the repurchase amounts to 1 142 307. After the completed share issue in September 2022, the restated number of Class B shares that the options give entitlement to is 1 622 075. The subscription price for the new shares that the warrants can be used to subscribe to have been recalculated after the directed issue in September 2020 and is SEK 1.90. The warrants have a maturity of five years from their respective registration dates.

Warrants of series OP 2018/2022

The Extraordinary General Meeting on 23 October 2018 resolved to issue 30 000 warrants and/or employee warrants (series OP 2018/2022) entitled to subscription of Class B shares. After the completed share issue in September 2022, the restated number of shares that the warrants give entitlement to is 44 359. Of the warrants outstanding, half of them now have a restated subscription price of SEK 10.15 and the other half have a restated subscription price of SEK 20.29. The warrants could beused for subscribing Class B shares during the period 24 July 2022 – 23 October 2022.

Warrants of series 2019/2023 N01 and series 2019/2023 S01

The Extraordinary General Meeting on 28 August 2019 resolved to issue 650 000 warrants, of which 450 000 relate to key persons (series 2019/2023 N01) and 200 000 relate to operational Board members (series 2019/2023 S01). After the completed share issue in September 2022, the restated number of Class B shares that the warrants give entitlement to is 907 071 with a subscription price of SEK 10.94. The warrants can be used for subscribing for Class B shares during the period 1 April – 31 October 2023.

Warrants of series 2019/2023 SAB01

On 6 September 2019, the Board of Directors of Cereno Scientific resolved to issue 300,000 warrants to members of the company's Scientific Advisory Board (series 2019/2023 SAB01). After the completed share issue in September 2022, the restated number of Class B shares that the warrants give entitlement to is 418 648 with a subscription price of SEK 10.94. The warrant can be used for subscribing for Class B shares during the period from 1 April 2023 to 31 October 2023.

Warrants of series TO1 B and TO2 B

On 30 September 2020, the Board of Directors, based on the authorization granted by the Annual General Meeting on 10 June 2020, resolved on a directed issue of shares and warrants. The Board of Directors also resolved on an issue of warrants to existing shareholders as well as to the lender that was part of the loan financing agreement that the company entered into.

In total, 34 519 281 warrants of series TO1 B and 34 519 281 warrants of series TO2 B were issued.

The warrants of series TO1 B were used for subscription to new shares in September 2021. In total, 33 442 470 warrants were exercised for subscription of 33 442 470 shares of series B, meaning that approximately 96.9 percent of all outstanding warrants of series TO1 were exercised for subscription of shares. No warrants of series TO1 B are now outstanding.

The warrants of series TO2 B were used for subscription to new shares in September 2022. In total, 32 253 062 warrants were exercised for subscription of 32 253 062 shares of series B, meaning that approximately 93.4 percent of all outstanding warrants of series TO2 were exercised for subscription of shares. No warrants of series TO2 B are now outstanding.

Long-term employee stock option program (qualified employee stock options) for employees

The Extraordinary General Meeting on 28 February 2022 resolved to implement a long-term incentive program for employees of the company, through the issue of not more than 3,000,000 qualified employee stock options, which will be granted to the participants without consideration. Each stock options entitles the participant to acquire one new share of series B in the company at an exercise price amounting to SEK 0.10, equivalent of the share's quota value. Allocation of stock options to the participants shall be made no later than 31 December 2022. The allocated stock options vest during 36 months and may only be utilized to acquire new shares if the participant still is an employee of the company and all other requirements for qualified employee stock options under the Swedish Income Tax Act are fulfilled. The participant may utilize allocated and vested stock options from the end of the vesting period up to and during the entire tenth year calculated from the date of allocation. The Meeting also resolved to issue not more than 3,000,000 warrants to enable delivery of new shares to the participants of the program. After the completed issue in September 2022, the total number of shares to which the options entitle amounts to 3,252,519. Of these, 2,498,378 had been allocated as of 31 December 2022.

Long-term employee stock option program (qualified employee stock options) for board members

The Extraordinary General Meeting on 28 February 2022 resolved to implement a long-term incentive program for board members of the company, through the issue of not more than 1,111,111 qualified employee stock options, which will be granted to the participants without consideration. Each stock options entitles the participant to acquire one new share of series B in the company at an exercise price amounting to SEK 0.10, equivalent of the share's quota value. Allocation of stock options to the participants shall be made no later than 31 December 2022. The allocated stock options vest during 36 months and may only be utilized to acquire new shares if the participant still is a board member or otherwise remain engaged in the company and all other requirements for qualified employee stock options under the Swedish Income Tax Act are fulfilled. The participant may utilize allocated and vested stock options from the end of the vesting period up to and during the entire tenth year calculated from the date of allocation. The Meeting also resolved to issue not more than 1,111,111 warrants to enable delivery of new shares to the participants of the program. After the completed issue in September 2022, the recalculated number of shares to which the options entitle amounts to 1,204,637, all of which have been allocated as of December 31, 2022.

Implementation of a long-term incentive program (warrants)

The Extraordinary General Meeting on 28 February 2022 resolved to implement a long-term incentive program for certain key individuals in the company that cannot be allocated qualified employee stock options, through the issue of not more than 3,333,333 warrants. After the completed issue in September 2022, the recalculated number of shares to which the options entitle amounts to 3,613,910, of which 831,199 have been allocated as of December 31, 2022.The warrants shall be issued the company and then be transferred to participants in the program at a price corresponding to the warrants' market price at the time of the transfer, calculated pursuant to the Black & Scholes model. Each warrant entitles to subscription for one new share of series B in the company at a subscription price corresponding to 150 percent of the volume-weighted average share price during the fifteen-day period which immediately precedes allocation. Subscription for new shares by virtue of the warrants

Share capital development

Year	Event	Ratio value (SEK)	Difference shares	Change (SEK)	Total number shares	Total share capital (SEK)
2012	Rights issue	1	50 000	50 000	50 000	50 000
2012	Directed issue	1	10 605	10 605	60 605	60 605
2016	Stock dividend issue	1	1 200	1 200	61 805	61 805
2016	Share split 100:1	10		556 245	61 805	618 050
2016	Subdivision A-/B- shares	0.10	6 118 695		6 180 500	618 050
2016	Directed issue	0.10			6 180 500	
2016	Directed issue	0.10	1 420 000	1 420 000	7 600 500	760 050
2016	IPO	0.10	450 000	45 000	8 050 500	805 050
2016	Conversion	0.10	2 940 000	294 000	10 990 500	1 099 050
2018	Conversion	0.10	188 679	18 868	11 179 179	1 117 918
2018	Conversion	0.10	444 444	44 444	11 623 623	1 162 362
2018	Conversion	0.10	540 540	54 054	12 164 163	1 216 416
2018	Conversion	0.10	483 870	4 838 700	12 648 033	1 264 803
2018	Conversion	0.10	419 354	41 935	13 067 387	1 306 739
2018	Conversion	0.10	384 614	38 461	13 452 001	1 345 200
2018	Conversion	0.10	269 230	26 923	13 721 231	1 372 123
2018	Conversion	0.10	307 692	30 769	14 028 923	1 402 892
2018	Conversion	0.10	333 333	33 333	14 362 256	1 436 226
2018	Conversion	0.10	285 714	28 571	14 647 970	1 464 797
2019	Conversion	0.10	533 333	53 333	15 181 303	1 518 130
2019	Conversion	0.10	666 666	66 667	15 847 969	1 584 797
2019	Conversion	0.10	3 333 333	333 333	19 181 302	1 918 130
2019	Rights issue	0.10	19 181 302	1 918 130	38 362 604	3 836 260
2019	Overallotment issue	0.10	1 724 137	172 414	40 086 741	4 008 674
2019	Remuneration issue	0.10	132 571	13 257	40 219 312	4 021 931
2020	Directed issue	0.10	31 600 000	3 160 000	71 819 312	7 181 931
2021	Share issue TO1	0.10	33 442 470	3 344 247	105 261 782	10 526 178
2022	Share issue TO2	0.10	32 253 062	3 225 306	137 514 844	13 751 484
At end of period		**0.10**	**32 253 062**		**137 514 844**	

Share and owners

The largest shareholders by the 31 December 2022

Name	Capital	Votes
Avanza Pension	13.40 %	12.80 %
Cihan Punar	3.60 %	3.40 %
Myrlid AS	2.90 %	2.80 %
Milad Pournouri	2.20 %	2.10 %
Peyman Pournouri	1.90 %	1.80 %
Total five largest owners	**24.0 %**	**23.0 %**
Other shareholders	76.0 %	77.0 %
Total (4 809 ägare)	**100 %**	**100 %**

Annual general meeting

The annual general meeting is planned to be held on 1 June 2023 in Gothenburg. The location of the AGM will be published at the latest in connection with the notice to the AGM.

Upcoming financial reports

Interim report for quarter 1 ..... 25 April 2023
Annual General Meeting ..... 1 June 2023
Interim report for quarter 2 ..... 25 August 2023
Interim report for quarter 3 .....17 November 2023

Development of the group's operations, profit/loss and position*

(SEK)	2022-12-31	2021-12-31	2020-12-31	2019-12-31	2018-12-31
Net sales	-	-	-	-	-
Loss after financial items	-27 648 649	-16 250 680	-16 017 060	-1 043 828	-
Total assets	215 653 647	180 738 186	112 231 644	64 059 182	-
Equity/assets ratio %	93.4	94.1	88.9	93.1	-
Cash and bank balance	67 045 679	89 634 757	66 004 352	26 099 549	-

*The group commenced on 20 December 2019.

Development of the parent company's operations, profit/loss and position*

(SEK)	2022-12-31	2021-12-31	2020-12-31	2019-12-31	2018-12-31
Net sales	-	-	-	-	-
Loss after financial items	-27 747 301	-16 576 604	-16 015 061	-15 279 801	-11 838 887
Total assets	215 606 906	180 729 727	112 159 718	64 060 123	36 836 765
Equity/assets ratio %	93.5	94.1	88.9	93.1	63.5
Cash and bank balance	67 012 503	89 594 519	65 955 827	26 099 549	11 237 141

Proposed disposition of the company's profit or loss

The Board of Directors and the CEO propose that available profits, SEK 46 086 370, be disposed of as follows:

Share premium reserve	55 565 518
Retained earnings	18 268 153
Profit/loss for the year	-27 747 301
Amount	**46 086 370**

Retained in new account	46 086 370
Amount	**46 086 370**

Regarding the company's profit/loss and position in general, reference is made to subsequent income statements and balance sheets with accompanying notes.

Group – Condensed change in equity

2022-01-01 - 2022-12-31	Share capital	Other contributed capital	Other capital including profit/loss for the year
At the start of the period	10 526 178	189 760 849	-30 222 103
Exchange rate differences when translating foreign subsidiaries	-	398 666	-
Resolve of warrant subscription right	-	-	-88 499
New share issue	3 225 306	58 055 512	-
Issue expenses	-	-2 489 995	-
Loss for the period	-	-	-27 654 494
At the end of the period	**13 751 484**	**245 725 032**	**-57 965 096**

Parent company – Condensed change in equity

2022-01-01-2022-12-31	Share capital	Fund for development expenses	Share premium reserve	Retained earning	Net loss for the period
At start of period	10 526 178	84 127 034	88 053 563	3 930 597	-16 576 604
Disposal according to AGM resolution	-	-	-88 053 563	71 476 959	16 576 604
Warrant issued	-	-	-	398 666	-
New share issue	3 225 306	-	58 055 512	-	-
Issue expenses	-	-	-2 489 995	-	-
Redistribution in equity	-	57 538 069	-	-57 538 069	-
Loss for the period	-	-	-	-	-27 747 301
At the end of the period	**13 751 484**	**141 665 103**	**55 565 518**	**18 268 153**	**-27 747 301**

Group - Condensed income statement

(SEK)	Note	1 Jan 2022 31 Dec 2022 12 months.	1 Jan 2021 31 Dec 2021 12 months.
Net sales		-	-
Capitalised work for own account		57 538 069	44 805 361
		57 538 069	**44 805 361**
Operating expenses			
Other external costs	2	-76 619 906	-57 796 949
Personnel costs	3	-7 499 784	-1 774 371
Depreciation of tangible fixed assets		-14 308	-14 308
Other operating items	4	-903 424	-225 814
Operating loss		**-27 499 353**	**-15 006 081**
Loss from financial items			
Interest income and similar income		309 778	1 680
Interest expenses and similar expenses		-459 074	-1 246 279
Loss after financial items		**-27 648 649**	**-16 250 680**
Loss before tax		**-27 648 649**	**-16 250 680**
Income taxes	5.6	-5 845	-4 210
Loss for the period		**-27 654 494**	**-16 254 890**

Group - Condensed balance sheet

(SEK)	Note	31 Dec 2022	31 Dec 2021
ASSETS			
Fixed assets			
Intangible assets			
Capitalised expenditures for development activities	8	135 709 679	80 164 358
Patents, trademarks, licenses and similar rights	9	11 277 224	9 284 476
		146 986 903	**89 448 834**
Tangible assets			
Fixtures, tools and installations	10	28 623	42 931
		28 623	**42 931**
Financial assets			
Other long-term receivables	12	9 602	8 320
		9 602	**8 320**
Total fixed assets		**147 025 128**	**89 500 085**
Current assets			
Current receivables			
Other receivables		1 248 316	1 363 425
Prepaid expenses and accrued income		334 524	239 919
		1 582 840	**1 603 344**
Cash and bank balance		**67 045 679**	**89 634 757**
Total current assets		**68 628 519**	**91 238 101**
TOTAL ASSETS		**215 653 647**	**180 738 186**

(SEK)	Note	31 Dec 2022	31 Dec 2021
EQUITY AND LIABILITIES			
Equity			
Share capital		13 751 484	10 526 178
Other contributed capital		245 725 032	189 760 849
Other capital including loss for the year		-57 965 096	-30 222 102
Equity attributed to the Parent Company's shareholders		**201 511 420**	**170 064 925**
Holdings without controlling influence		-	-
Total equity		**201 511 420**	**170 064 925**
Long-term liabilities			
Other liabilities to credit institutions	13	400 000	400 000
		400 000	**400 000**
Current liabilities			
Accounts payable		9 410 863	2 884 374
Tax liabilities		212 761	32 442
Bridge loan		-	4 800 000
Other liabilities		406 636	201 853
Accrued expenses and deferred income		3 711 967	2 354 592
		13 742 227	**10 273 261**
TOTAL EQUITY AND LIABILITIES		**215 653 647**	**180 738 186**

Group - Condensed cash flow statement

(SEK)	Note	1 Jan 2022 31 Dec 2022 12 months.	1 Jan 2021 31 Dec 2021 12 months.
OPERATING ACTIVITIES			
Loss after financial items		-27 654 494	-16 254 890
Adjustments for items not included in the cash flow			
Depreciations		14 308	14 308
Translation differences		-89 781	-321 410
Accrued expenses for borrowings		200 000	680 000
Accrued interest cost		250 000	550 000
New share issue through offset of liability		-4 210	-898
Income taxes		-27 284 177	-15 332 890
Cash flow from operating activities before changes in working capital		**-27 284 177**	**-15 332 890**
Cash flow from changes in working capital			
Increase (-)/Decrease (+) in operating receivables		20 504	-84 298
Increase (+)/Decrease (-) in operating liabilities		8 648 175	2 280 144
Cash flow from operating activities		**-18 615 498**	**-13 137 044**

(SEK)	Note	1 Jan 2022 31 Dec 2022 12 months.	1 Jan 2021 31 Dec 2021 12 months.
Investing activities			
Acquisition of intangible assets		-57 538 069	-44 805 361
Cash flow from investing activities		**-57 538 069**	**-44 805 361**
Financing activities			
New share issue		61 280 818	95 311 040
Issue expenses		-2 489 995	-3 913 230
Warrants issued		398 666	-
Resolve of warrant subscription right		-	-4 500 000
Amortisation of loans		-5 000 000	-5 000 000
Paid interest costs		-625 000	-325 000
Cash flow from financing activities		**53 564 489**	**81 572 810**
Cash flow for the period		**-22 589 078**	**23 630 405**
Cash and cash equivalents at start of period		**89 634 757**	**66 004 352**
Cash and cash equivalents at end of period		**67 045 679**	**89 634 757**

Parent company - Condensed income statement

(SEK)	Note	1 Jan 2022 31 Dec 2022 12 months.	1 Jan 2021 31 Dec 2021 12 months.
Net sales		-	-
Capitalised work for own account		57 538 069	44 805 361
		57 538 069	**44 805 361**
Operating expenses			
Other external costs	2	-76 718 563	-58 121 192
Personnel costs	3	-7 499 785	-1 774 370
Depreciation of tangible fixed assets		-14 308	-14 308
Other operating cost	4	-903 424	-225 815
Operating loss		**-27 598 011**	**-15 330 325**
Loss from financial items			
Interest income and similar income		309 778	-
Interest expenses and similar expenses		-459 068	-1 246 279
Loss after financial items		**-27 747 301**	**-16 576 604**
Loss before tax		**-27 747 301**	**-16 576 604**
Loss for the period		**-27 747 301**	**-16 576 604**

Parent company - Condensed balance sheet

(SEK)	Note	31 Dec 2022	31 Dec 2021
ASSETS			
Fixed assets			
Intangible assets			
Capitalised expenditures for development activities	8	135 709 679	80 164 358
Patents, trademarks, licenses and similar rights	9	11 277 224	9 284 476
		146 986 903	**89 448 834**
Tangible assets			
Fixtures, tools and installations	10	28 623	42 931
		28 623	**42 931**
Financial assets			
Shares in group company	11	941	941
		941	**941**
Total fixed assets		**147 016 467**	**89 492 706**
Current assets			
Current receivables			
Receivables from group companies		-	39 158
Other receivables		1 243 411	1 363 425
Prepaid expenses and accrued income		334 524	239 919
		1 577 935	**1 642 502**
Cash and bank balance		**67 012 503**	**89 594 519**
Total current assets		**68 590 439**	**91 237 021**
TOTAL ASSETS		**215 606 906**	**180 729 727**

(SEK)	Note	31 Dec 2022	31 Dec 2021
EQUITY AND LIABILITIES			
Equity			
Restricted equity			
Share capital		13 751 484	10 526 178
Fund for development expenses		141 665 103	84 127 034
		155 416 587	**94 653 212**
Unrestricted equity			
Share premium reserve		55 565 517	88 053 563
Retained earnings		18 268 153	3 930 597
Profit/loss for the period		-27 747 301	-16 576 604
		46 086 369	**75 407 556**
Total equity		**201 502 956**	**170 060 768**
Long-term liabilities			
Other liabilities to credit institutions	13	400 000	400 000
		400 000	**400 000**
Current liabilities			
Accounts payable		6 112 278	2 884 374
Tax liabilities		207 073	28 142
Bridge loan		-	4 800 000
Payables to group companies		3 265 996	-
Other liabilities		406 636	201 853
Accrued expenses and deferred income		3 711 967	2 354 590
		13 703 950	**10 268 959**
TOTAL EQUITY AND LIABILITIES		**215 606 906**	**180 729 727**

Parent company - Condensed cash flow statement

(SEK)	Note	1 Jan 2022 31 Dec 2022 12 months.	1 Jan 2021 31 Dec 2021 12 months.
OPERATING ACTIVITIES			
Loss after financial items		-27 747 301	-16 576 604
Adjustments for items not included in the cash flow			
Depreciations		14 308	14 308
Accrued expenses for borrowings		200 000	680 000
Accrued interest cost		250 000	550 000
		-27 282 993	**-15 332 296**
Cash flow from operating activities before changes in working capital		**-27 282 993**	**-15 332 296**
Cash flow from changes in working capital			
Increase (-)/Decrease (+) in operating receivables		64 566	-140 264
Increase (+)/Decrease (-) in operating liabilities		8 609 991	2 343 803
Cash flow from operating activities		**-18 608 436**	**-13 128 757**
Investing activities			
Acquisition of intangible assets		-57 538 069	-44 805 361
Cash flow from investing activities		**-57 538 069**	**-44 805 361**

(SEK)	Note	1 Jan 2022 31 Dec 2022 12 months.	1 Jan 2021 31 Dec 2021 12 months.
Financing activities			
New share issue		61 280 818	95 311 040
Issue expenses		-2 489 995	-3 913 230
Warrants issued		398 666	-
Resolve of warrant subscription right		-	-4 500 000
Amortisation of loans		-5 000 000	-5 000 000
Paid intrest costs		-625 000	-325 000
Cash flow from financing activities		**53 564 489**	**81 572 810**
Cash flow for the period		**-22 582 016**	**23 638 692**
Cash and cash equivalents at start of period		**89 594 519**	**65 955 827**
Cash and cash equivalents at end of period		**67 012 503**	**89 594 519**

Accounting policies and notes

Note 1. Accounting policies

Amounts in SEK unless otherwise indicated.

This Annual Report has been prepared in accordance with the Annual Accounts Act and the Swedish Accounting Standards Board BFNAR 2012:1 Annual Report and Consolidated Accounts (K3).

The accounting policies are unchanged from the previous year.

Assets, provisions and liabilities have been measured at cost unless otherwise indicated below.

Consolidated financial statement

Subsidiaries

Subsidiaries are companies in which the Parent Company directly or indirectly holds more than 50 per cent of the voting rights or otherwise exercises a controlling interest. A controlling interest entails the right to design a company's financial and operational strategies for the purpose of obtaining financial benefit. The recognition of business acquisitions is based on the economic entity approach, which means that an acquisition analysis is prepared as of the point in time when the acquirer obtains a controlling interest. As of that point in time, the acquirer and the entity acquired are regarded as a single economic entity. Furthermore, the application of the economic entity approach means that all assets (including goodwill) and liabilities, as well as revenue and costs, are taken into account in their entirety, even for partially owned subsidiaries.

The cost of subsidiaries is calculated as the sum of fair value on the acquisition date for assets paid for plus liabilities that have arisen or were taken over, as well as equity instruments issued, expenditures directly attributable to the business acquisition and any purchase considerations. The acquisition analysis establishes the fair value on the acquisition date, with a few exceptions, of identifiable assets acquired and liabilities taken over as well as minority interests. Minority interests are measured at fair value on the acquisition date. As of the acquisition date, the consolidated financial statement includes the company's revenue and costs, identifiable assets and liabilities, and any goodwill or negative goodwill that has arisen.

Elimination of intra-Group transactions

Intra-Group receivables and liabilities, revenue and costs, and unrealised gains or losses that arise in conjunction with intra-Group transactions are eliminated in their entirety. Unrealised losses are eliminated in the same manner as unrealised gains, but only to the extent that there is no indication of a need for impairment.

Intangible fixed assets

Intangible fixed assets are recognised at cost less accumulated amortisations and impairments. In addition to the purchase price, the costs includes expenditures directly attributable to the acquisition.

Research and development expenditures

When recognising expenditures for development, the capitalisation model is applied. This means that expenses that arose during the development phase are recognised as assets when all the conditions below have been met:

- Completion of the intangible fixed asset is possible so that it can be used or sold.
- The intent is to complete the intangible fixed asset, either to use it or to sell it.
- The conditions exists to use or sell the intangible fixed asset.
- It is probably that the intangible fixed asset will generate future financial benefit.
- The necessary technological, financial and other resources are adequate for completing development and for using or selling the intangible fixed asset.
- The expenditures attributable to the intangible fixed asset can reliably be calculated.

Amortisations

The asset is amortised on a straight-line basis over its estimated useful life. The amortisation is recognised as a cost in profit or loss. No intangible assets were amortised during the year. Amortisations will take place when the products are commercialised.

Impairments

At every balance sheet date, the asset is assessed to determine whether there is any indication that its value is less than its carrying amount. If there is such an indication, the recoverable amount of the asset is calculated.

The recoverable amount is the higher of fair value less selling costs and value in use. Calculation of value in use estimates the present value of future cash flows that the asset is expected to give rise to in operating activities, and when it is sold or disposed of. The discount rate used is before tax, and reflects the market assessments of the time value of the money and the risks pertaining to the asset. A prior impairment is cancelled only if the reasons that formed the basis for calculating the recoverable amount at the most recent impairment have changed.

Tangible fixed assets

Tangible fixed assets are recognised at cost less accumulated depreciation and impairments. In addition to the purchase price, the costs includes expenditures directly attributable to the acquisition.

Depreciation

The asset is depreciated on a straight-line basis over its estimated useful life, since this reflects the expected use of the asset's future financial benefit. The depreciation is recognised as a cost in profit or loss.

The estimated residual value, established at the time of purchase at the price level then prevailing, is taken into account.

Equipment, tools, fixtures and fittings

Useful life.....5 years

Leases (lessees)

All leases have been classified as finance or operating leases. A finance lease is a lease under which the risks and benefits associated with owning an asset are essentially transferred from the lessor to the lessee. An operating lease is a lease that is not a finance lease.

Finance leases

Rights and obligations under finance leases are recognised as assets and liabilities in the balance sheet. At initial recognition, the asset and liability are measured at the lesser of the asset's fair value and the present value of the minimum lease payments. Expenditures directly attributable to signing and arranging the lease are added to the amount recognised as an asset.

Operating leases

Lease payments under operating leases, including increased initial rent but excluding expenditures for services such as insurance and maintenance, are recognised as a cost on a straight-line bases over the term of the lease.

Foreign currency

Monetary items in foreign currency are restated at the exchange rate on the balance sheet date. Non-monetary items are not restated, but are recognised at the exchange rate on the date of purchase.

Exchange rate differences arising from the settlement or restatement of monetary items are recognised in profit or loss for the financial year in which they occur.

Financial assets and liabilities

Financial assets and liabilities are recognised in accordance with Chapter 11 (Financial instruments measured on the basis of cost) of BFNAR 2012:1.

On initial recognition, financial assets are measured at cost including any transaction expenditures directly attributable to the acquisition of the asset.

Non-current financial liabilities are recognised at amortised cost. Expenditures directly attributable to raising loans have adjusted the cost of the loan.

Bridge loan

Outstanding bridge lon are recognised at amortised cost. The costs for loans raised are recognised as an adjustment of the cost of the loan and are allocated over the term of the bridge loan.

Government grants

A government grant that is not linked with requirements for future performance is recognised as revenue when the conditions for winning the assignment have been met.

A government grant that is linked with requirements for future performance is recognised as revenue when performance is complete. If the grant has been received before the conditions for reporting it as revenue are met, the grant is recognised as a liability.

A government grant attributable to the acquisition of a fixed asset is recognised as a reduction in the cost of the asset.

Income tax

Total tax consists of current tax and deferred tax. Current tax refers to income tax for the current financial year and the proportion of income tax for previous financial years which is yet to be reported. Deferred tax is income tax which refers to future financial years as a result of previous events.

Note 2. Operating leases (leeses)

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Rent for premises	182 387	177 038	126 500	126 500
Total	**182 387**	**177 038**	**126 500**	**126 500**

Future rent for premises totals SEK 182 387 per year.

Note 3. Employees

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Average no. employees	4	1	4	1
Total	**4**	**1**	**4**	**1**

Note 4. Other operating costs

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Foreign exchange losses	-903 424	-225 814	-903 424	-225 815
Total	**-903 424**	**-225 814**	**-903 424**	**-225 815**

Note 5. Income tax

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Current taxes	-5 845	-4 210	-	-
Deferred taxes	-	-	-	-
Total	**-5 845**	**-4 210**	**0**	**0**

Note 6. Reconciliation of effective tax

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Result before taxes	-27 654 494	-16 250 680	-27 747 302	-16 576 604
Tax calculated at applicable tax rate for the parent company	5 696 826	3 347 640	5 715 944	3 414 780
Nondeductible expenses	-25 459	-11 849	-25 459	-11 849
Other adjustments for tax purposes	512 939	806 125	512 939	806 125
Loss carryforward for which no corresponding tax asset was recognized	-6 184 306	-4 141 916	-6 203 424	-4 209 056
Effect of other tax rates on foreign subsidiaries	-5 845	-4 210	-	-
Reported effective tax	**-5 845**	**-4 210**	**-**	**-**

Note 7. Loss carryforward

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Total unutilised taxable loss carryforwards	-119 838 509	-89 744 008	-119 838 509	-89 744 008
Total	**-119 838 509**	**-89 744 008**	**-119 838 509**	**-89 744 008**

Deferred tax assets on the taxable loss carryforward are not recognised, based on the precautionary principle.

Note 8. Capitalised expenditures for development activities

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Opening cost	80 164 358	37 451 534	80 164 358	37 451 534
Capitalisation for the year	55 545 321	42 712 824	55 545 321	42 712 824
Closing carrying amount	**135 709 679**	**80 164 358**	**135 709 679**	**80 164 358**

Note 9. Patents

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Opening cost	9 284 476	7 191 939	9 284 476	7 191 939
New purchases	1 992 748	2 092 537	1 992 748	2 092 537
Closing carrying amount	**11 277 224**	**9 284 476**	**11 277 224**	**9 284 476**

Note 10. Equipment, tools and installations

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Opening cost	71 547	71 547	71 547	71 547
New purchases	-	-	-	-
Closing accumulated costs	**71 547**	**71 547**	**71 547**	**71 547**
Opening depreciation	-28 616	-14 308	-28 616	-14 308
Depreciation for the year	-14 308	-14 308	-14 308	-14 308
Closing accumulated depreciation	**-42 924**	**-28 616**	**-42 924**	**-28 616**
Closing carrying amount	**28 623**	**42 931**	**28 623**	**42 931**

Note 11. Shares and participations in Group companies

			Parent Company	
			31 Dec 2022	31 Dec 2021
Opening cost			941	941
Purchases			-	-
Closing accumulated costs			**941**	**941**
Closing carrying amount			**941**	**941**

Information on the corporate identity numbers and domiciles of subsidiaries is indicated below.

Company, domicile	Antal andelar	Andel (%)	Redovisat värde
Cereno Scientific Inc., Cambridge, MA, USA	**100**	**100**	**941**

Pertains to owner share of capital, which also corresponds with the share of votes for the total number of shares.

Note 12. Other long-term receivables

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Opening value	7 534	7 534	-	-
Additional receivables	-	-	-	-
Exchange rate differences	2 068	786	-	-
Closing carrying amount	**9 602**	**8 320**	**0**	**0**

Deposits in the USA.

Note 13. Non-current liabilities

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Swedish Agency for Economic and Regional Growth	400 000	400 000	400 000	400 000
Total	**400 000**	**400 000**	**400 000**	**400 000**

The loan is a conditional loan, and no amortisation plan exists. The obligation to repay the loan arises only in conjunction with the project reaching the commercial phase and generating revenue.

Note 14. Securities pledged and contingent liabilities

	Group		Parent Company	
	31 Dec 2022	31 Dec 2021	31 Dec 2022	31 Dec 2021
Securities pledged	None	None	None	None
Contingent liabilities	None	None	None	None

Note 15. Significant events after the end of the fiscal period

- In January, it was announced that an abstract on preclinical drug candidate CS585 had been accepted as a moderated poster presentation at ACC.23/WCC. The scientific congress is hosted by the American College of Cardiology Together With WCC (World Congress of Cardiology), in New Orleans, US, on March 4-6, 2023. The abstract titled “CS585 is a novel orally available prostacyclin receptor agonist with long-term in vivo inhibition of platelets and thrombosis formation in mouse without increased risk of bleeding” will be presented by Dr. Michael Holinstat, lead of Cereno’s development programs at the University of Michigan and Director of Translational Research at Cereno.

- At the end of January, the company announced the appointment of Etienne Adriansen to the newly created position as Chief Business Officer, as of March 1, 2023.This appointment adds commercial expertise and capacity to Cereno's Executive Management Team as business development is an active and important component of the company’s growth strategy.

- In early February, Cereno launched an Insights Series providing a unique view into different aspects of cardiovascular disease treatment landscape through interviews and conversations with Cereno’s leadership, collaborative partners, and global thought leaders. The videos were mainly recorded in conjunction with the European Society of Cardiology (ESC) Congress in Barcelona late August 2022, and are centered around PAH and thrombosis.

- In February, Cereno announced the progress with its CS1 Phase II trial in PAH. All 9 clinical sites have been activated and the protocol changed to broader patient inclusion criteria and three patients were reported to be randomized and have entered the treatment period. Top-line results are expected end of 2023.

- In February it was announced that Cereno’s preclinical drug candidate CS014 will continue toward clinical development for thrombosis prevention. CS014 has, in preclinical studies, demonstrated anti-thrombotic properties without bleeding, supporting the selection of target indication with the aim of preventing thrombosis. The drug candidate is currently in the final stages of its preclinical development program, and a Phase I study is expected to start in 2024.

- In early March, it was announced that Cereno’s drug candidate CS585’s second patent family has obtained a formally issued patent in Europe, one of the largest markets in cardiovascular disease. This strengthens and broadens the intellectual property rights (IPR) for CS585 which currently is in a preclinical development program in collaboration with the University of Michigan.

- In early April, it was announced that Cereno has signed a license agreement for the drug candidate CS585 with the University of Michigan. The signed agreement provides Cereno the exclusive rights to CS585 for further development and commercialization. Cereno also extends the preclinical collaboration agreements it has with UoM for the two programs CS585 and CS014.

- In early April, Cereno announced significant progress in the recruitment of patients into the study in the rare disease PAH with its lead candidate drug CS1. Now, a total of 10 patients have been enrolled into the study which plans to study 30 patients.

Signatures

The date shown in the respective executive's electronic signature

Catharina Bäärnhielm
Chair of the board

Björn Dahlöf
Board member

Sverker Jern
Board member

Lena Mårtensson Wernrud
Board member

Rein Piir
Board member

Anders Svensson
Board member

Klementina Österberg
Board member

Sten R. Sörensen
Chief Executive Officer

Our audit report has been submitted on the date indicated by my electronic signature

Frejs Revisorer AB

Mikael Glimstedt
Chartered Accountant

Cereno Scientific

Cereno Scientific is a clinical stage biotech company within cardiovascular diseases. The lead drug candidate, CS1, is a Phase II candidate in development for the treatment of the rare disease pulmonary arterial hypertension (PAH). CS1 is an HDAC (Histone DeACetylase) inhibitor that acts as an epigenetic modulator with pressure-reducing, reverse-remodeling, anti-fibrotic, anti-inflammatory and anti-thrombotic properties, all relevant for PAH. A clinical Phase II study is ongoing to evaluate CS1's safety, tolerability and efficacy in patients with PAH. A collaboration agreement with global healthcare company Abbott allows Cereno to use their cutting-edge technology CardioMEMS HF System in the study. Cereno also has two promising preclinical drug candidates in development for cardiovascular disease through research collaborations with the University of Michigan. Drug candidate CS014 is a novel HDAC inhibitor with epigenetic effects, selected for prevention of thrombosis as target indication. In preclinical studies it has been documented to regulate platelet activity, fibrinolysis and clot stability for prevention of thrombosis without increased risk of bleeding. Drug candidate CS585 is a stable, selective, and potent prostacyclin receptor agonist. It has been documented in preclinical studies to target the IP receptor for prevention of thrombosis without increased risk of bleeding.

The company is headquartered in Gothenburg, Sweden, and has a US subsidiary Cereno Scientific Inc. based in Kendall Square in Boston, Massachusetts, US. Cereno is listed on the Swedish Spotlight Stock Market (CRNO B). More information on www.cerenoscientific.com.

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