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CORPORATE PRESENTATION

MAY 16, 2018

NASDAQ: ATOS

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Atossa Genetics (NASDAQ: ATOS)

- Clinical-stage company
- Novel pharmaceuticals
- Novel drug delivery methods
- Breast cancer, gynecomastia
 & other breast conditions







Seasoned Management





Steven Quay, MD, PhD *Chairman, CEO and President*



Kyle Guse, CPA, ESQ, MBA CFO and General Counsel



Janet R. Rea, MSPH, RAC SVP Regulatory, Quality and Clinical Affairs



Corporate Summary



Atossa Genetics Inc. (NASDAQ: ATOS)		
Develop novel pharmaceuticals and delivery systems to treat breast cancer and other breast conditions		
None		
\$4.8 million		
2.65M common shares; no preferred stock 883K warrants exercisable at \$3.78 31k warrants exercisable at >\$225.00		
Seattle, Washington		





Drug Programs Using our Proprietary Endoxifen:

- Topical Endoxifen
 ♦ Mammographic breast density (MBD) reduction
 ♦ Gynecomastia (male)
- Oral Endoxifen Adjuvant therapy in breast cancer patients

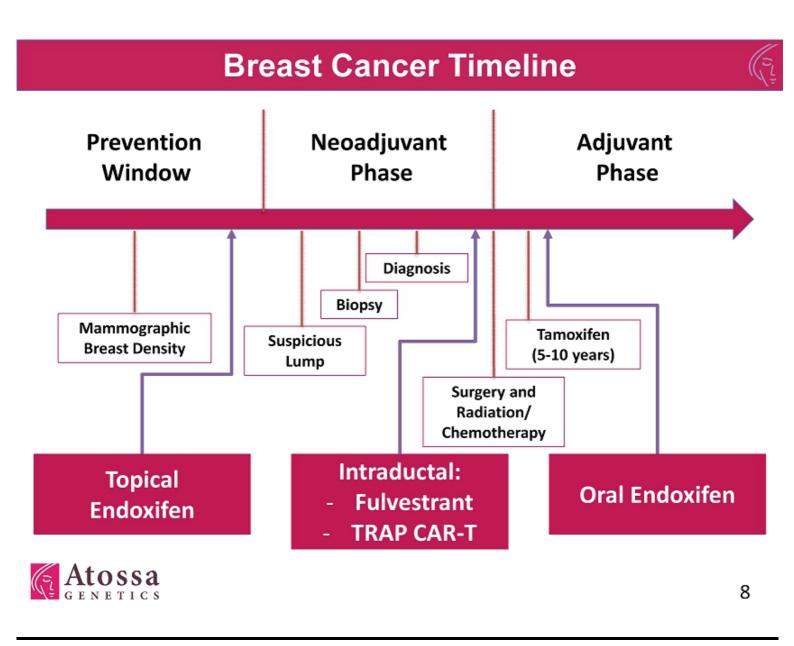




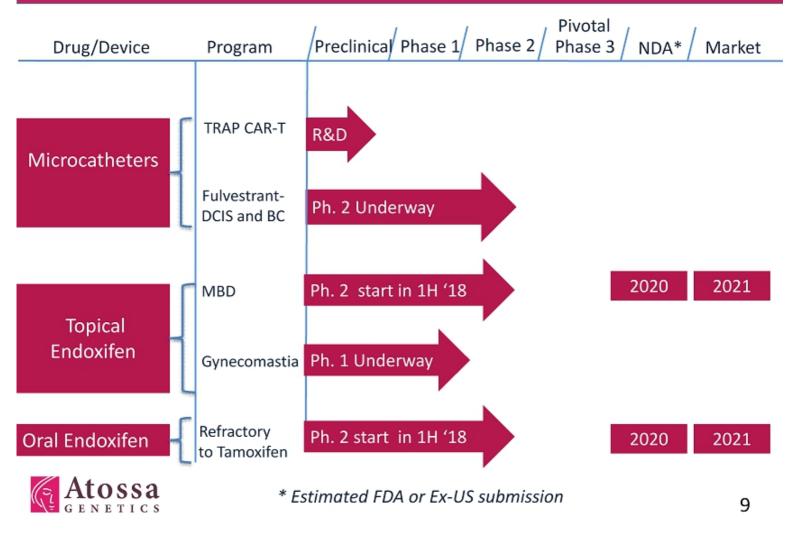
Programs Using Proprietary Microcatheter Technology:

- Microcatheters for Transpapillary CAR-T Delivery (TRAP CAR-T) - R&D program
- Intraductal Microcatheters for Drug Delivery -Phase 2 study underway





Program Pipeline



Large Market Opportunities

Program	Opportunity
Topical Endoxifen	10M High MBD (BI-RAD C/D) ⁽¹⁾ 10M Gynecomastia (25% of all 50-69 yrs) ⁽²⁾
Oral Endoxifen	1M ER ⁺ Survivors/5 Yrs ⁽³⁾
Intraductal Fulvestrant	\$800M U.S. sales for pre-surgery and surgery replacement therapy ⁽⁴⁾
TRAP-CAR-T	35K Triple Negative Breast Cancer/Yr. ⁽⁵⁾

(1) Nat'l Cancer Inst.: Prevalence of Mammographically Dense Breasts in the United States (Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4200066/)

(2) Mayo Clinic (retrieved from: https://www.mayoclinic.org/diseases-conditions/gynecomastia/symptoms-causes/syc-20351793)

(3) American Cancer Society, Inc: <u>https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2018/estimated-number-of-new-cancer-cases-and-deaths-by-sex-us-2018.pdf</u>. See also Nat'l Cancer Inst.: https://www.cancer.gov/types/breast/breasthormone-therapy-fact-sheet

(4) Data from Defined Health: SERM Report January 2017

(5) Data from Breastcancer.org (Retrieved from: http://www.breastcancer.org /diagnosis/tripneg/behavior)



The Unmet Need				
 <u>Topical Endoxifen for MBD</u> No approved treatment 	 Intraductal Microcatheters Provides alternative to systemic delivery, which can have: 			
 Oral Endoxifen for Refractory Up to 500k tamoxifen patients have low Endoxifen^(1, 2) Tamoxifen delay (50-200 days)⁽³⁾ 	 Systemic adverse effects Limited tumor drug level ATOS microcatheter technology may: 			
 <u>Gynecomastia</u> No approved treatment 	 Increase drug to tumor ratio Improve efficacy Reduce toxicity CAR-T cells may follow lymphatic migration of cancer 			

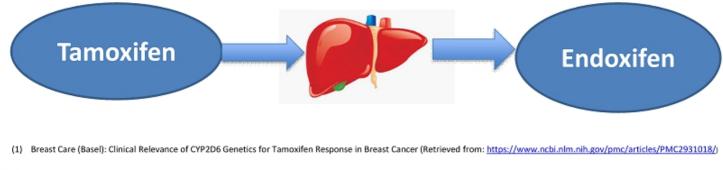
(1) Patient reluctance toward tamoxifen for breast cancer primary prevention, Ann. Surg Oncol, 2001 Aug 8(7):580-5

- (2) Breast Care (Basel): Clinical Relevance of CYP2D6 Genetics for Tamoxifen Response in Breast Cancer (Retrieved from: https://www.ncbi.plm.nib.gov/oper/articles/PMC2031018/)
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2931018/)
 (3) Source: Nat'l Cancer Inst.; retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3357105/



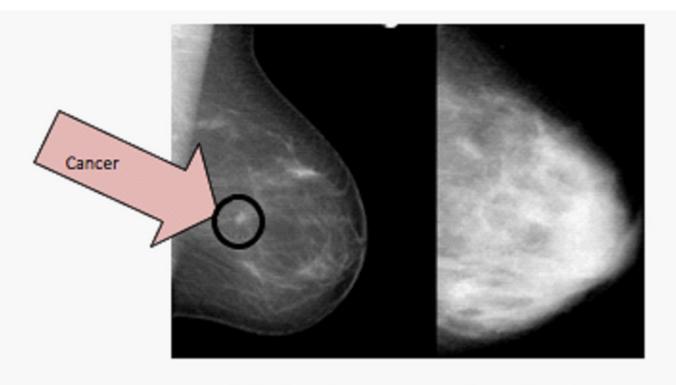
Endoxifen - Overview

- Most active metabolite of tamoxifen
- Tamoxifen has been widely studied
- Tamoxifen is a pro-drug
- Up to 50% of patients can't make enough Endoxifen⁽¹⁾





MBD Can Mask Tumors



Fatty Breast

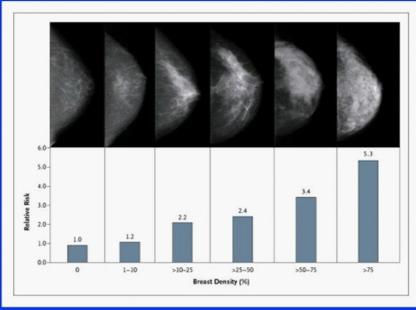
Dense Breast

Source: http://woodtv.com/2015/05/11/are-you-dense-know-your-numbers/



MBD Correlates with Cancer Incidence

A Newly Recognized Breast Cancer Risk Factor: Mammographic Density



Several states have now mandated reporting of high breast density as seen on mammograms to both patient and primary care provider



Source: http://slideplayer.com/slide/1557508/

Endoxifen – Phase 1 Clinical Trial

- Female Phase 1: Completed Q3 2017
- Pharmacokinetics; safety and tolerability
- Placebo controlled, double-blinded
- 49 female volunteers
- Oral (single and repeat dose) and topical (28-day repeat dose) arms at varying dose levels







- Safety: no clinically significant safety signals and no clinically significant adverse events.
- Tolerability: tolerated at each dose level through out the study.
- Pharmacokinetics:
 - <u>Topical</u> crossed the skin barrier when applied daily to the breast, as demonstrated by low but measurable Endoxifen blood levels detected in a dose-dependent fashion.
 - <u>Oral</u> demonstrated blood levels that have been associated with a therapeutic effect in the adjuvant setting in women with breast cancer.



- Underserved markets in Gynecomastia
- Gynecomastia (breast enlargement and pain):
 - Affects 25% of men ages 50-69^{(1),} approx. 10m men
 - Causes: androgen deprivation therapy to treat prostate enlargement and prostate cancer; antianxiety medications; cancer treatments (chemotherapy), and some heart medications
 - Treatments: breast bud irradiation, compression garments and plastic surgery
 - No FDA-approved therapeutic



Cohort	Dose Level		Number of I	Participants
	(mg/breast)	(Total mg)	(Z)-Endoxifen	Placebo
1	1	2	6	2
2	3	6	6	2
3	5	10	6	2



Atossa Oral Endoxifen May Solve the "Tamoxifen Delay"

Endoxifen Source	Time to Steady State	
Oral Tamoxifen (daily)	Approx. 50 to 200 days ⁽¹⁾	
Atossa Oral Endoxifen (daily)	7 days	



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Pharmacokinetics Summary – Oral Study

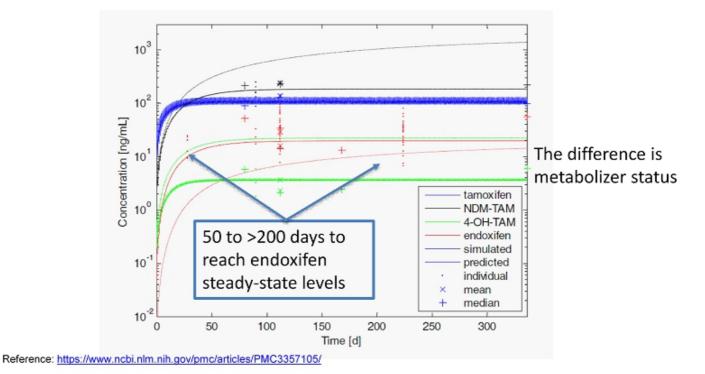


Single Dose Pharmacokinetics



Oral Tamoxifen Pharmacokinetics

Oral Tamoxifen Yields Much Slower Blood Levels of Endoxifen





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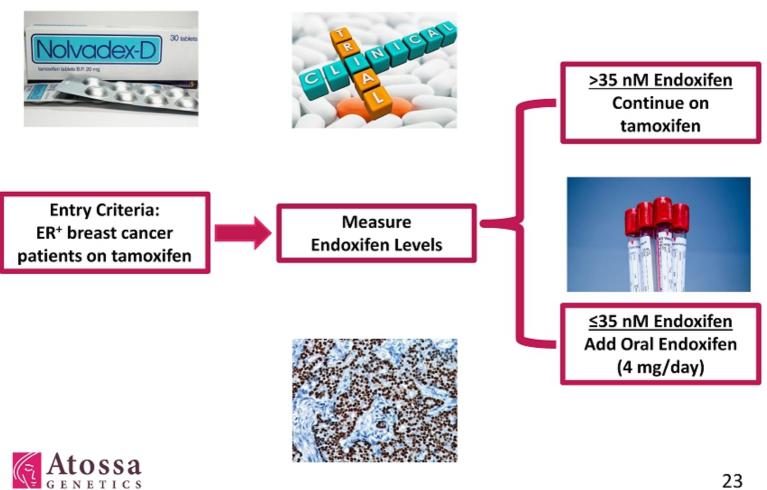
Endoxifen/Tamoxifen – Treatment Timeline



This is 25th percentile on breast cancer growth rate in women 50-59, as measured by mammography⁽¹⁾ 29 Days 29 Days 29 Days 29 Days +29 Days Cral Endoxifen Cral Endoxifen Cral Tamoxifen



Oral Endoxifen – Refractory Clinical Trial



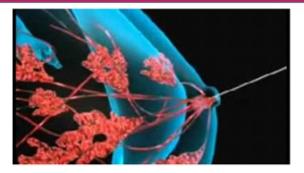
Program could qualify for designation under the 505(b)(2) status. Advantages:

- A single clinical study of safety and efficacy
- Limited additional clinical or pre-clinical studies
- Multi-year market exclusivity possible



Intraductal Microcatheters

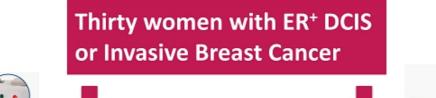


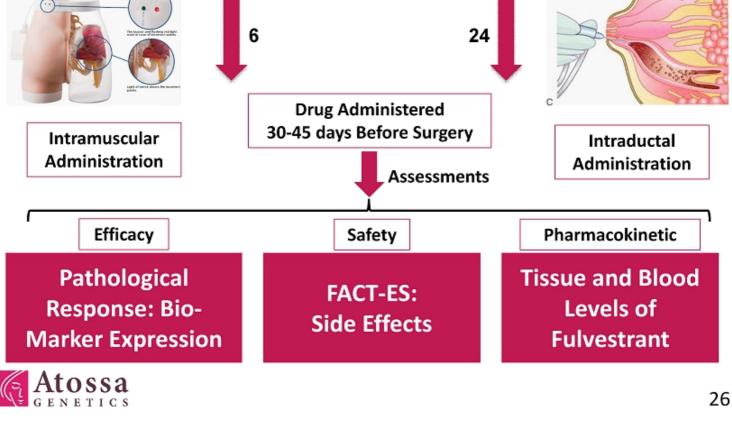


- Potential advantages higher local drug/CAR-T exposure; lower systemic concentrations (lower toxicity) vs systemically delivered agents; potential for lymphatic migration of T-cells
- Recent Activity Kite Pharma acquisition by Gilead; Juno acquired by Celgene; FDA approved Novartis's Kymriah[™] for B-cell Acute Lymphoblastic Leukemia
- Phase 2 study fulvestrant for DCIS or breast cancer (Montefiore)
- Fulvestrant FDA approved (AstraZeneca); opportunities with other drugs and immunotherapies



Microcatheter Fulvestrant - Clinical Trial Study





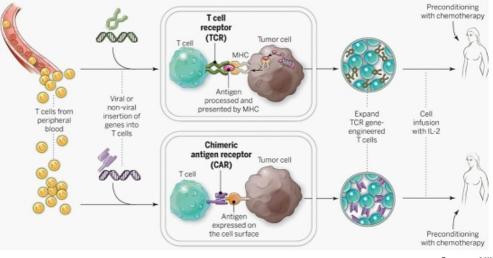
Local Delivery of CAR-T for Breast Cancer

- <u>Safety</u>: Reduced risk of systemic complications
- <u>Efficacy</u>: Delivery of CAR-T cells to the site of the cancer cells. Greater CAR-T to cancer cell ratio.
- <u>Dose</u>: Fewer cells would be required
 - Reduced cost
 - Increased access (due to production, cost)
- Indication: Disease localized to the breast



Microcatheters – TRAP CAR-T

<u>Step 1</u>: Remove blood and genetically modify T-cells to kill cancer

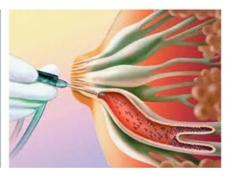


Source: NIH

<u>Step 2</u>: Atossa's Transpapillary (TRAP) microcatheters deliver CAR modified T-cells to breast ducts containing cancer cells







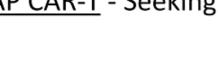
Upcoming Milestones

Oral Endoxifen: 2Q 2018 - Open Phase 2 study in patients refractory to Tamoxifen

Topical Endoxifen:

- (1) 2Q 2018 Open Phase 2 study for MBD (Sweden)
- (2) 2Q 2018 Complete enrollment in Phase 1 study in men

TRAP CAR-T - Seeking partners











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