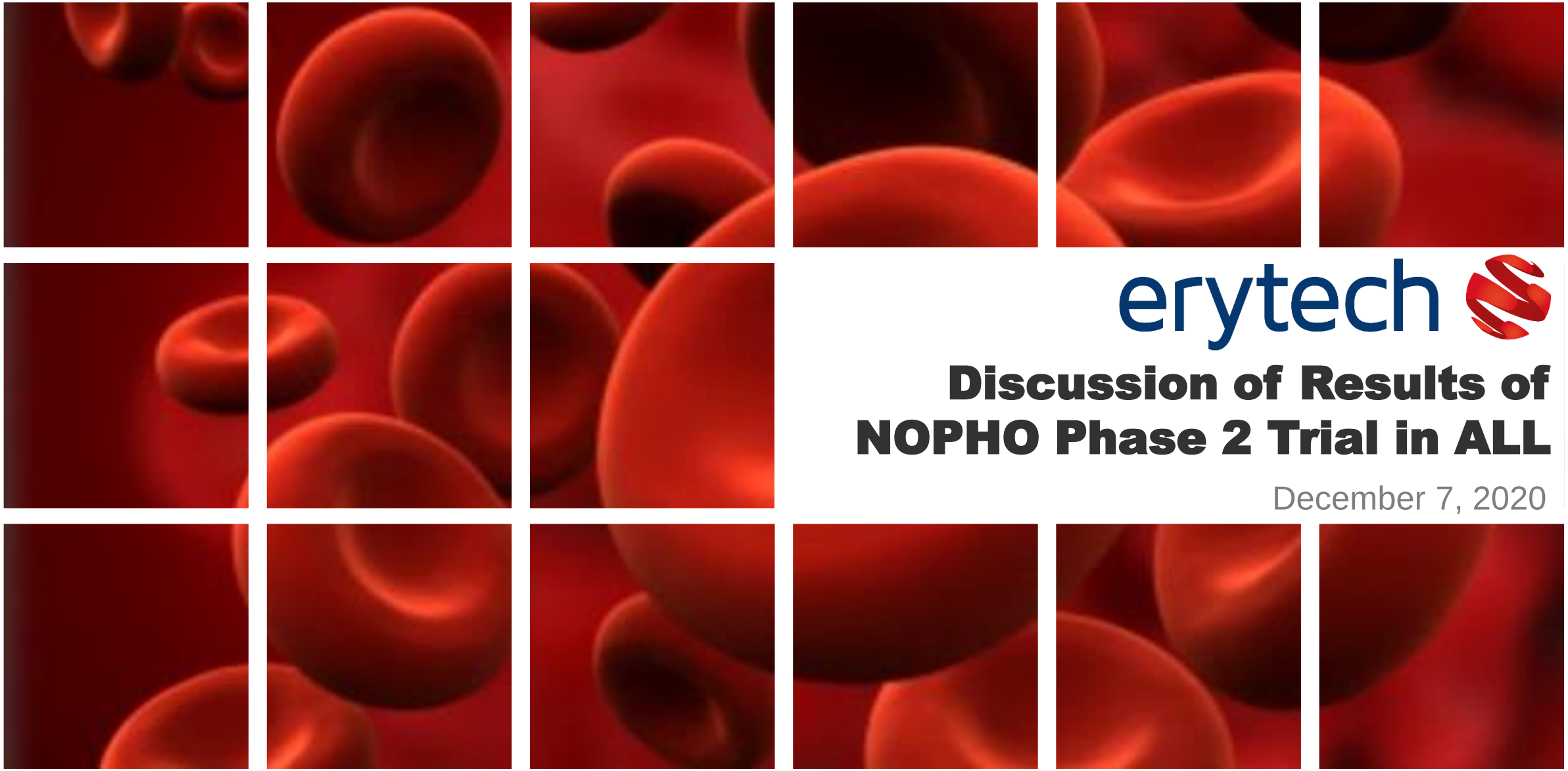

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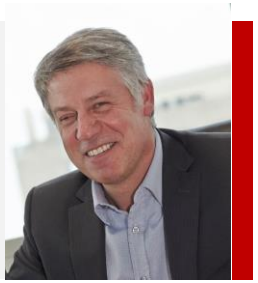
Discussion of Results of NOPHO Phase 2 Trial in ALL

December 7, 2020

Forward Looking Statements

The statements made in this presentation may include forward-looking statements regarding the future operations of ERYTECH Pharma S.A., including estimates of target market opportunity, timing of planned clinical trials and results from those trials, regulatory strategy and timing of planned regulatory submissions, manufacturing capabilities and strategy for expansion of the ERYCAPS platform. Although we believe that the expectations contained in this presentation are reasonable, these forward-looking statements are only estimates based upon the information available to ERYTECH Pharma S.A. as of the date of this presentation. The company's expectations regarding the effects of COVID-19 on the Company's trials and development may be incorrect. Except as required by law, we expressly disclaim any responsibility to publicly update or revise our forward-looking statements, whether as a result of new information, future events or otherwise. Thus, the forward-looking statements herein involve known and unknown risks and uncertainties and other important factors such that actual future operations, opportunities or financial performance may differ materially from these forward-looking statements. Undue reliance should not be placed on forward-looking statements, which speak only as of the date hereof. All forward-looking statements contained herein are qualified in their entirety by the foregoing cautionary statement.

AGENDA

Gil Beyen, **ERYTECH** Chief Executive Officer	**10:00-10:05am EST** **4:00-4:15pm CET**	**Introduction**	
Birgitte Klug Albertsen, MD, PhD **Aarhus University Hospital** Principal Investigator	**10:05-10:20am EST** **4:05-4:20pm CET**	**Results of Phase 2 NOPHO trial**	
Iman El-Hariry, MD, PhD **ERYTECH** Chief Medical Officer	**10:20-10:35am EST** **4:20-4:35pm CET**	**Update on eryaspase in ALL**	

Question & Answer Session

AGENDA

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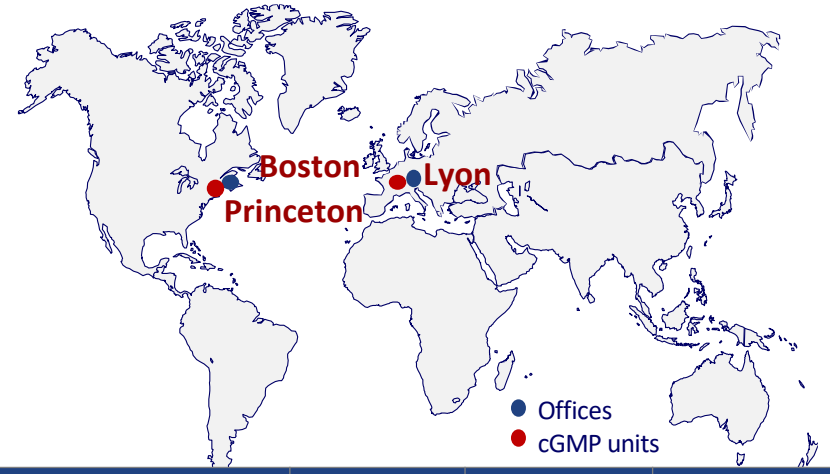
Leader in Red Blood Cell-based Cancer Therapeutics

- Reproducible encapsulation of therapeutic compounds in red blood cells
- Focus on oncology, targeting cancer cells' altered amino acid metabolism through encapsulated asparaginase
- Lead product candidate eryaspase, demonstrated safety and efficacy in multiple clinical trials in ALL and pancreatic cancer
- Two potentially pivotal clinical trials: Phase 3 trial in 2L pancreatic cancer ongoing and Phase 2 IST in ALL completed
- Industrialized production: own cGMP production facilities in the United States and Europe
- Listed on Nasdaq and Euronext
  Strong shareholder base incl. BVF, RA, NEA, ..



Indication	Phase 1	Phase 2	Pivotal
Pancreatic Cancer 2L			
ALL - Allergy to PEG-ASNase		NOPHO IST	
Triple Negative Breast Cancer			
Pancreatic Cancer 1L	IST		

ALL: Acute Lymphoblastic Leukemia; TNBC: Triple-Negative Breast Cancer; IST: Investigator-sponsored trial; cGMP: current good manufacturing practice

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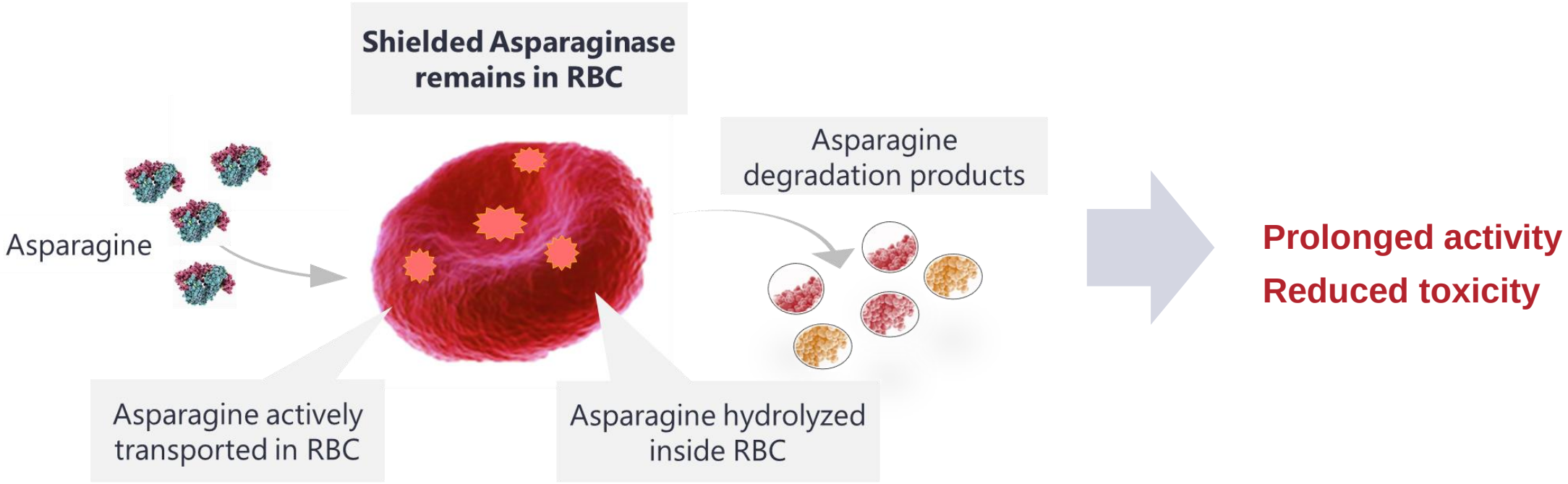
Eryaspase: A Novel Asparaginase with a Unique Therapeutic Profile

An allogeneic therapy leveraging RBC properties to shield and prolong activity of asparaginase



Significant product experience with 600+ patients treated and 3,500+ doses administered

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Opportunity in ALL - Hypersensitivity Segment

- Estimated annual treatable population (US) : ~ 1,000 patients
  - US ALL Incidence[1]: 6,150
  - Est. 15-20% of patients treated with asparaginase and develop hypersensitivity/silent inactivation

- One product approved, Erwinaze, facing supply shortages

- Unmet medical need, confirmed by FDA

- Potential for eryaspase to be positioned favorably vs. Erwinaze :
  - Convenience – once every 2 wk dosing of eryaspase vs. im/iv dosing 3x per week
  - Duration of asparaginase activity
  - Tolerability
  - Cost: Erwinaze treatment can cost more than $100,000 per month (WAC)

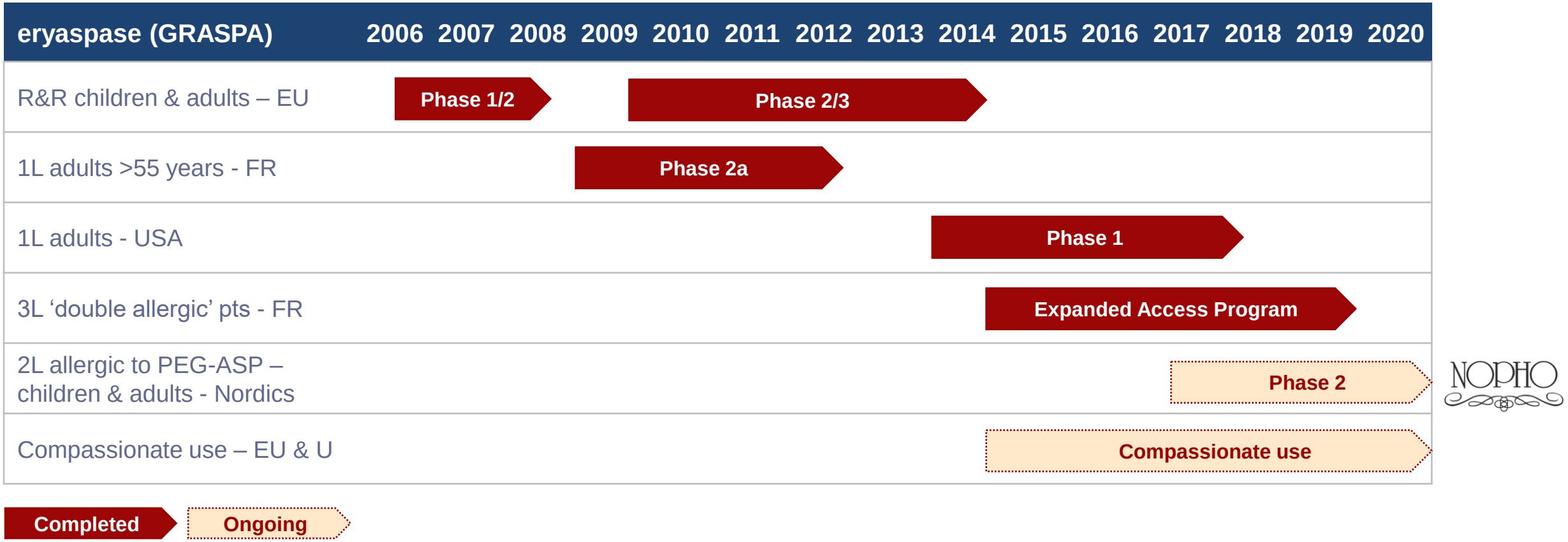
1. American Cancer Society, Cancer Facts and Figures 2020

Eryaspase as a potential replacement therapy

Trial	Erwinaze AALL07P2*	Eryaspase NOR-GRASPALL 2016
n	58	55 (53 pediatric)
Median age (range)	11 (2-18)	6 (1-45)
Dose/Frequency	25000 IU/m2 intramuscularly (6 doses per 2 wk course)	150 IU/kg intravenously (1 dose every 2 wks)
Median doses/courses administered (range)	3 (1-9)	5 (1-6)
Completed planned course of therapy	76%	96%
Asparaginase Enzyme Activity** (% > 100 IU/L)	100% > 100 IU/L after 48 hrs 100% > 100 IU/L after 72 hrs	98% > 100 IU/L after 14 days
% Hypersensitivity (All)	14%	9%

* Erwinaze package insert, FDA BLA Medical Review; Asparaginase Enzyme Activity level observed in AALL07P2 trial supported initial Erwinase approval
** Asparaginase Enzyme Activity for Erwinaze measured post dose 3 of initial 6 dose course (over 2 weeks)

Supported by Several Clinical Trials in >200 ALL Patients



- Approximately 200 ALL patients treated with eryaspase, confirming the concept of prolonged activity, and reduced toxicity and demonstrating clinical benefit

Next Steps

- Continue dialogue with FDA
- Request pre-BLA meeting, if FDA feedback is favorable
- Seek CHMP advice for potential MAA, if FDA feedback is favorable

Question & Answer Session

Gil Beyen,
ERYTECH
Chief Executive Officer

Birgitte Klug Albertsen
Aarhus University Hospital
Principal Investigator

Iman El-Hariry, MD, PhD
ERYTECH
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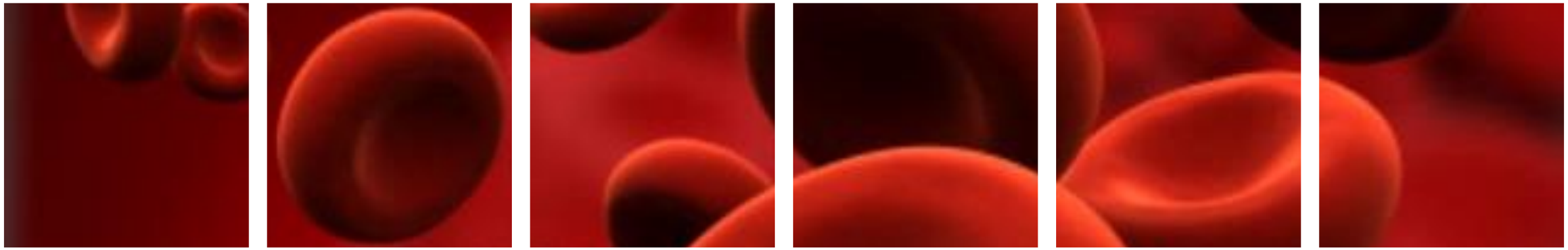

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