Stockholm, Sweden **April 9, 2024**

Calliditas Therapeutics to Attend Conferences in April

Calliditas Therapeutics AB (Nasdaq: CALT, Nasdaq Stockholm: CALTX) ("Calliditas"), a commercial biopharma company focused on rare diseases today announced that its management will be attending the following upcoming investor and industry conferences:

Van Lanschot Kempen Life Sciences Conference Amsterdam, Tuesday, April 16, 2024. Renée Aguiar-Lucander, CEO, will be available for one-on-one meetings.

World Orphan Drug Congress, Thursday, April 25, 2024, in Boston, MA. Maria Törnsén, President North America, will be moderating a panel, entitled "Partnering in the rare disease space - industry perspective".

LSX World Congress, Monday, April 29, 2024, in London. Maria Törnsén, President North America, will participate in a panel discussion entitled "Commercial Models of The Future and How the Biopharma Launch Landscape Is Changing: Expert Panel Discussion".

The same day, Renée Aguiar-Lucander, CEO, will participate in a panel discussion entitled "The Inflation Reduction Act and its Potential Impact on EU Biotech & Pharma Companies: Demystifying the Future".

Additionally, Calliditas' Group General Counsel, Brian Gorman, will participate in a panel discussion entitled "Importance of IP Due-Diligence in Deals Within the US".
One-on-one meetings with management will be available.

For further information, please contact:
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The information was sent for publication, through the agency of the contact persons set out above, on April 9, 2023, at 13.00 p.m. CET.

About Calliditas
Calliditas Therapeutics is a biopharma company headquartered in Stockholm, Sweden, focused on identifying, developing, and commercializing novel treatments in orphan indications, with an initial focus on renal and hepatic diseases with significant unmet medical needs. Calliditas is listed on Nasdaq Stockholm (ticker: CALTX) and the Nasdaq Global Select Market (ticker: CALT).

Visit Calliditas.com for further information.

Forward-Looking Statements
This press release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, as amended, including, without limitation, statements regarding Calliditas' strategy, business plans, regulatory submissions, and focus. The words "may," "will," "could," "would," "should," "expect," "plan," "anticipate," "intend," "believe," "estimate," "predict," "project," "potential," "continue," "target," and similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words. Any forward-looking statements in this press release are based on management's

current expectations and beliefs and are subject to a number of risks, uncertainties, and important factors that may cause actual events or results to differ materially from those expressed or implied by any forward-looking statements contained in this press release, including, without limitation, any related to Calliditas' business, operations, the potential to achieve full approval of Kinpeygo from the EC and MHRA, market acceptance of TARPEYO, clinical trials, supply chain, strategy, goals and anticipated timelines, competition from other biopharmaceutical companies, and other risks identified in the section entitled "Risk Factors" in Calliditas' reports filed with the Securities and Exchange Commission. Calliditas cautions you not to place undue reliance on any forward-looking statements, which speak only as of the date they are made. Calliditas disclaims any obligation to publicly update or revise any such statements to reflect any change in expectations or in events, conditions, or circumstances on which any such statements may be based, or that may affect the likelihood that actual results will differ from those set forth in the forward-looking statements. Any forward-looking statements contained in this press release represent Calliditas' views only as of the date hereof and should not be relied upon as representing its views as of any subsequent date.