Amplia THERAPEUTICS

Capital Raising Presentation

July 2025

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EXECUTIVE SUMMARY

Developing a pipeline of small molecule inhibitors of FAK – a validated cancer target

- Lead compound Narmafotinib is the best-in-class Focal Adhesion Kinase (FAK) inhibitor in development
- Promising clinical safety and tolerability positions Narmafotinib as the preferred agent to enhance activity of drugs for treatment of pancreatic cancer and other solid tumours
- Ongoing Phase 1b/2a ACCENT trial is evaluating Narmafotinib in combination with the chemotherapies gemcitabine and Abraxane® in patients with advanced pancreatic cancer
- Compelling pre-clinical data in ovarian cancer, idiopathic pulmonary fibrosis (IPF) and other solid tumours
- Orphan Drug and Fast Track Designations granted by US FDA – eligible for accelerated approval and Priority Review Voucher

Ongoing Phase 2a ACCENT trial in pancreatic cancer has achieved superiority over chemotherapy alone

- Positive interim data released in May 2025 showed that Narmafotonib is well tolerated and promising efficacy materially exceeding the current standard of care
- Pathological complete response and complete response announced in June 2025 - extremely rare in advanced pancreatic cancer where the disease has metastasised
- Key milestone already achieved with 17 confirmed partial responses recorded, demonstrating that the combination of Narmafotinib and chemotherapy is superior to chemotherapy alone
- Trial is fully recruited with top-line data (PFS) expected in late July/early August 2025
- Further mature data is expected in 1H 2026

Partnership Ready

- Amplia's partnering interest from global pharmaceutical companies has materially increased following recent interim data and patient updates in the ACCENT clinical trial
- Management are in ongoing discussions with potential partners around regional licensing agreements

Other opportunities

- Amplicity Phase 2 trial currently recruiting under approved FDA IND - Narmafotinib in combination with FOLFIRINOX (standard-of-care therapy for advanced pancreatic cancer in US)
- Examining opportunities to combine Narmafotinib with kRAS inhibitors via a US investigator-initiated trial (IIT)
- Ovarian cancer combination trial with standard-of-care intended to commence in 1H26 - promising preclinical data and enthusiastic support from key opinion leaders in US

Strong period of expected upcoming news flow

- ACCENT top-line data (July/August 2025)
- Amplicity first patient dosed (Q3 2025)
- ACCENT request FDA type C meeting to discuss Phase 2b/3 pivotal trial design (Q3 2025)
- ACCENT mature data (1H2026)
- kRAS and Ovarian clinical trials commence (1H 2026)
- ACCENT ongoing patient updates, approximately 20 patients remain on trial
- ACCENT commence potential pivotal Phase 2b/3 trial (2H 2026)
- Potential updates on licensing/partnering discussions

Capital raising of approximately $27.5 million

- Undertaking a capital raising of $27.5 million via a two-tranche placement of $25.0m and a $2.5m share purchase plan
- The Amplia directors will subscribe for $235,000 worth of shares (in total) under the placement, subject to shareholder approval
- Following the capital raising, the company will be funded into 2027

EXPERIENCED BOARD + MANAGEMENT

Combined >120 years of drug development experience bringing 4 FDA approved drugs to market

BOARD

Warwick Tong

MB ChB MPP GAICD

Chair

Robert Peach

PhD

Director

Jane Bell AM

LLB, LLM (Lond), FAICD

Director

Chris Burns*

PhD GAICD FAHMS

CEO and MD

** Co-recipient of 2024 PM's Prize for Innovation*

SENIOR MANAGEMENT

Rhiannon Jones

PhD GAICD

COO

Jason Lickliter

MBBS FRACP

CMO

Tim Luscombe

BCom CA GIA(Cert)

CFO

Background on pancreatic cancer and Focal Adhesion Kinase (FAK)

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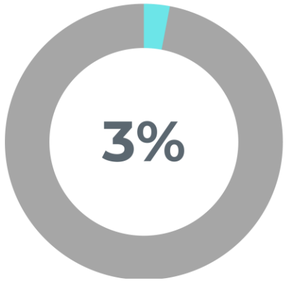
PANCREATIC CANCER

Increasing prevalence with limited innovation or new therapies approved beyond traditional chemotherapy in recent decades

Increasing Prevalence

Estimated 67,440 diagnoses and 51,980 deaths in US this year*

4,641 estimated diagnoses in AU in 2024**



5 year survival

(advanced disease)

Difficult-to-treat: typically detected late in disease progression**

Market size

Global treatment market estimated at ~US$2.65 billon in 2024†

Projected to grow to ~US$9.57 billion by 2034†

* American Cancer Society: https://cancerstatisticscenter.cancer.org/

** Cancer Australia: https://www.canceraustralia.gov.au/cancer-types/pancreatic-cancer/statistics

† Towards Healthcare:

https://www.towardshealthcare.com/insights/pancreatic-cancer-market

CURRENT STANDARD OF CARE

Current standard-of-care for advanced pancreatic cancer remains chemotherapy. Amplia aims to demonstrate that addition of Narmafotinib will enhance durability of response

Chemotherapy	mPFS‡	mOS‡	Comments
Gemcitabine and nab-paclitaxel (Abraxane®)	5.5 months	8-9 months	• Regarded as better tolerated (lower adverse events), but durability less than FOLFIRINOX • Abraxane® coming off patent soon – owned by Bristol Myers Squibb
FOLFIRINOX	7.2 months	11.1 months	• Regarded as more toxic and less well tolerated (more AE's*) , but more durable than gem/nab-P • Off patent. New variant NALIRIFOX (Ipsen/Servier) has had poor uptake since approval

‡ mPFS = Median Progression free survival; mOS = Median Overall Survival
* AE's = Adverse Events

FOCAL ADHESION KINASE (FAK)

FAK is a key driver of cancer progression and fibrosis, offering broad clinical potential across multiple therapeutic areas

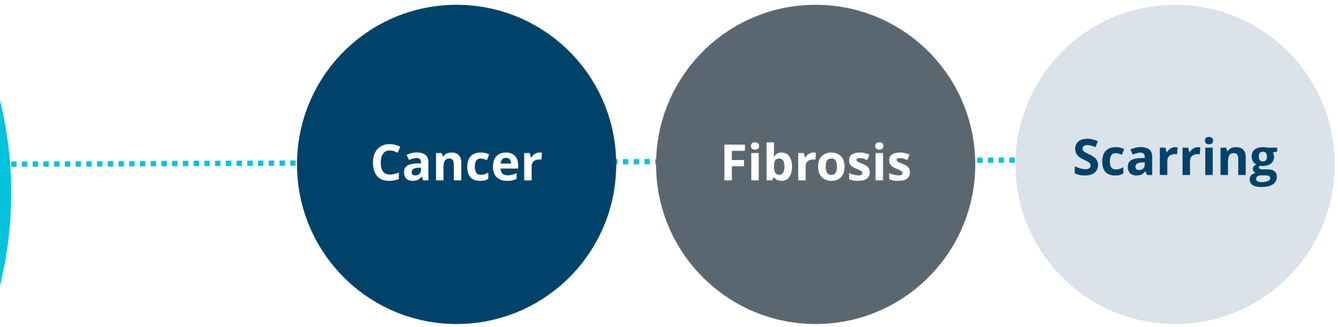
FAK is a critical protein in cancer growth and spread, and in formation of fibrotic (scar) tissue

Potential applications extend beyond pancreatic cancer

Capital raising to rapidly advance applications into other indications

Amplia's drugs potently and selectively block the activity of the FAK protein

Broad clinical potential



FAK INHIBITION IN CANCER

FAK overactivation is driving poor patient outcomes — Narmafotinib delivers an effective targeted response

FAK over-expressed and over-active in many cancers

Higher FAK levels correlate with worse patient outcomes

Narmafotinib potently inhibits FAK and thereby reduces cancer growth

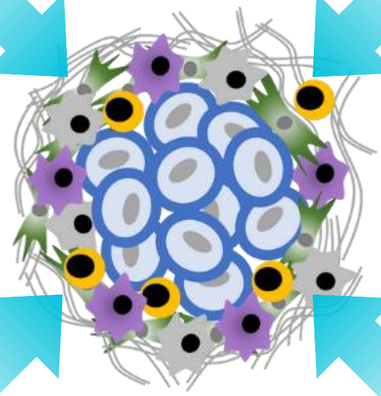
- within cancer cell
- in tumour microenvironment

Narmafotinib blocks critical pathways supporting tumour growth

Multi-action of Narmafotinib

Anti-proliferative
Reduces cells' ability to proliferate and migrate

Synergy with chemotherapies
Enhances activity of drugs and other therapies



Tumour (blue - cancer cells; green- fibroblasts; purple, grey and yellow - suppressive immune cells)

Anti-fibrotic
Reduces scar-tissue in TME, improving permeability to drugs

Immunomodulatory
Improves immune cell reactivity to tumour cells

LIMITED COMPETING FAK INHIBITORS

Amplia is one of only 3 companies with bona fide FAK inhibitors in development

Verastem

VSTM.NASDAQ, Mkt Cap ~US$260m

- Co-development with a second drug (avutometinib)
- Targeting low-grade serous ovarian cancer (LGSOC) (~10% patients)
- **Accelerated FDA approval obtained in May 2025 following Phase 2 clinical trial**
- Confirmatory Phase 3 underway

Inxmed (private)

- Early data in high-grade serous ovarian cancer (HGSOC) study
- High percentage patients on trial presenting with proteinuria possibly indicating off-target drug effect to kidneys
- Phase 2 combination studies underway in Non-Small Cell Lung Cancer (NSCLC), Platinum-Resistant Ovarian Cancer (PROC), Colorectal Cancer (CRC) and Small Cell Lung Cancer (SCLC)

Narmafotinib has an excellent selectivity profile, improved PK and excellent tolerability in patients

ACCENT Trial in Advanced Pancreatic Cancer

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PHASE 1B/2A TRIAL DESIGN

Fully recruited with top-line data expected in late July/early August 2025

An open-label trial of Narmafotinib in combination with gemcitabine + nab-paclitaxel in first-line patients with advanced pancreatic cancer

Trial Read-outs: Safety and Tolerabilty; Preliminary efficacy

Phase 1b (Australia)

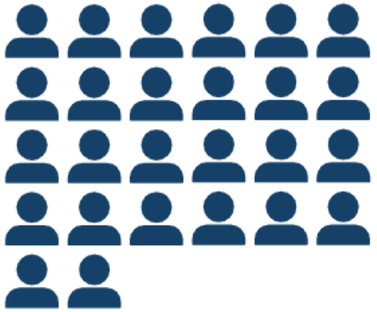
14 patients

COMPLETED

Dose Selected

Phase 2a (Australia and South Korea)

26 patients



Interim Analysis

≥6 PR

Phase 2a (cont) (Australia and South Korea)

24 patients

FULLY RECRUITED

* Chosen dose for Phase 2a study

PHASE 1B – OCTOBER 2023

Excellent safety profile established, allowing highest dose to be selected for Phase 2A and positive efficacy signals

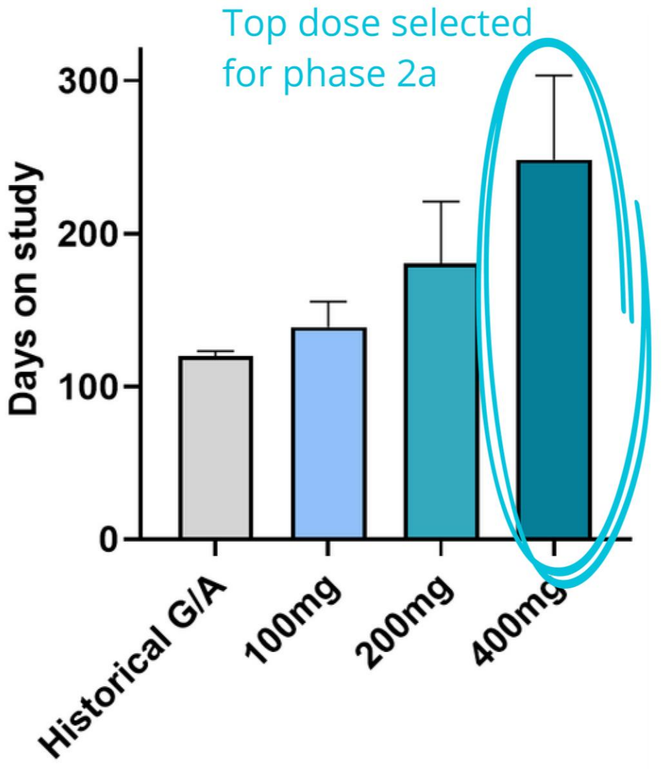
Release October 2023 - Narmafotinib safe and well tolerated

- All 14 patients elected to stay on drug post cycle 1
- One DLT*: uncontrolled nausea
- Fatigue (Grade 3 or below) in more than 1 patient likely drug related

Three dose levels examined

- Taken as capsule for 4 days prior to chemotherapy
  - Chemotherapy given i.v. (3 doses every month)
- Narmafotinib 400 mg dose (oral, once-a-day) identified as appropriate for Phase 2a study

Duration on trial



* Dose-limiting toxicity

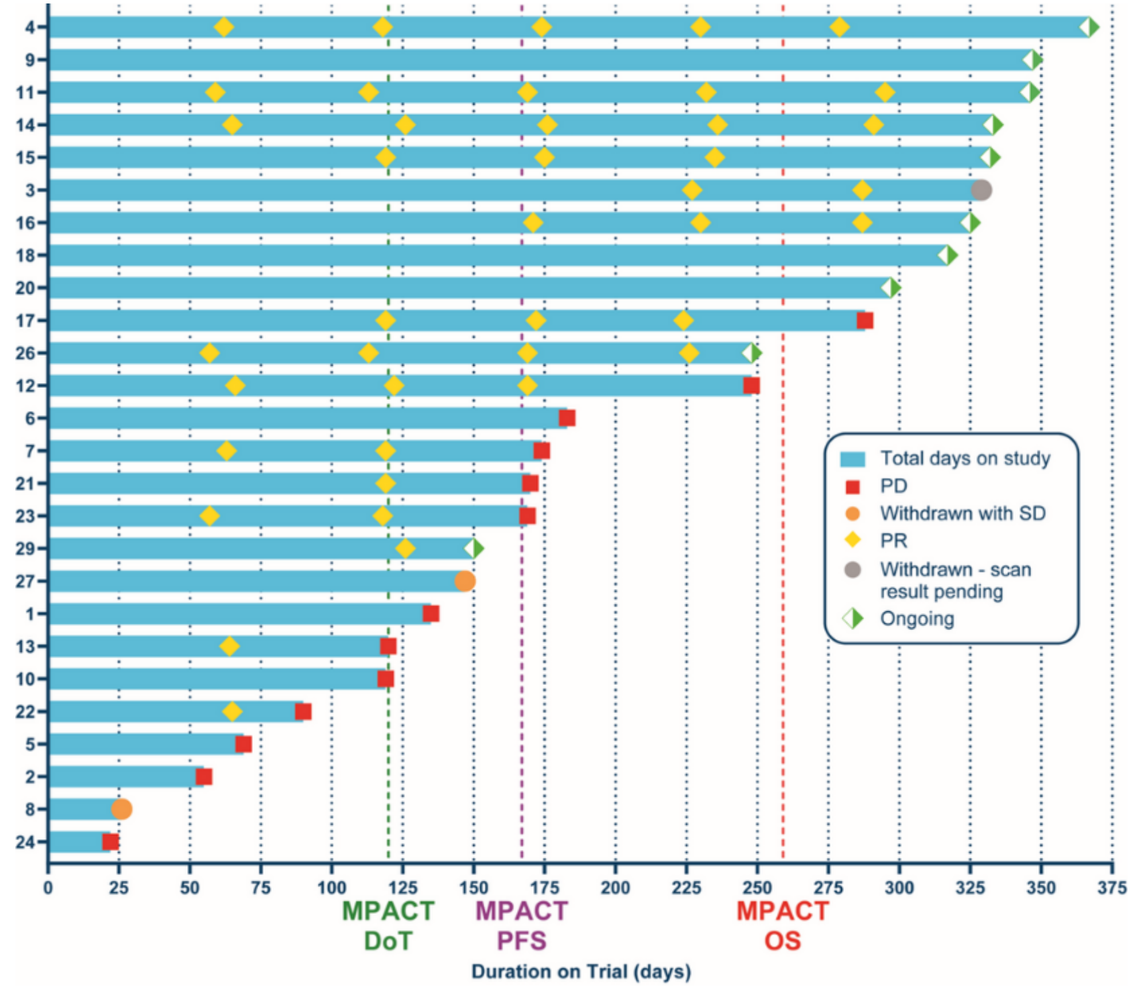
PHASE 2A INTERIM DATA – MARCH 2025

Released in March 2025. Showed longer duration and median survival than chemotherapy alone and no serious adverse events

High-level data (first 26 patients)*

- Duration on trial average ~7 months (208 days)
  - Historical median duration of treatment for gemcitabine + nab-paclitaxel: 3.9 - 4.1 months
- 10/26 patients on trial longer than historical mOS of 8.5-9.2 months for gem/Nab-P
  - Historical reference data based on MPACT and NAPOLI-3 phase 3 trials with Gem/Nab-P in mPDAC patients

Duration on Trial*



*Based on data available March 7, 2025; responses are investigator read; analysis may change as data matures. PR = Partial response, SD = Stable Disease, PD = Progressive Disease.

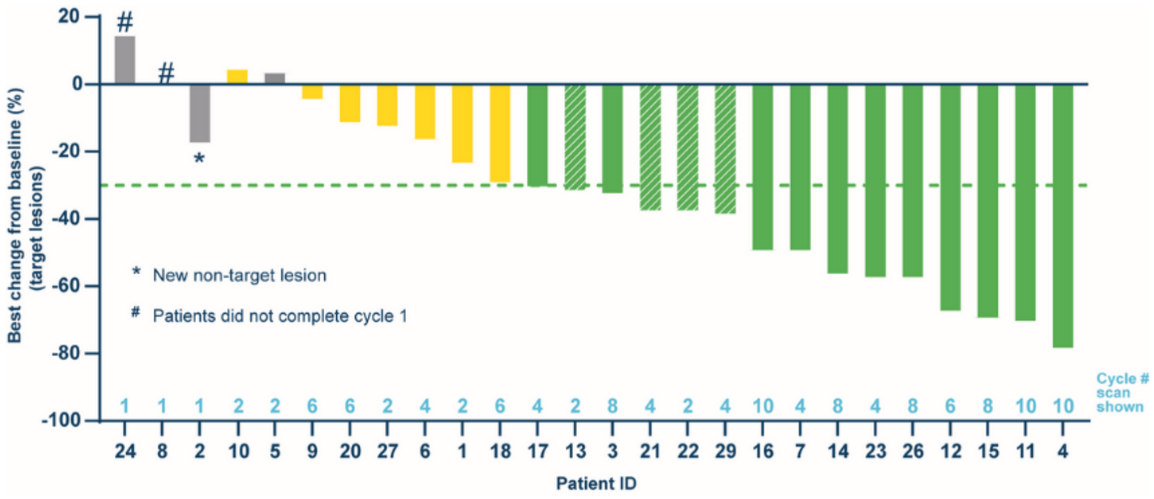
PHASE 2A INTERIM DATA – MARCH 2025

38% response rate compares favourably to other historical trials at 23%

Collated data of ‘best response’ at any scan indicates promising activity

- 26 evaluable patients
- 15 patients recorded decrease in tumor size >30%
- 11 as confirmed PRs (38% response rate)
  - Compares favorably to historical data of 23%

Best Response (evaluable patients)*



Color indicates best response by RECIST (target & non-target lesions): Grey = progressed; Yellow = stable disease; Green (hash) = PR (≥30% decrease from baseline); Green (solid) = confirmed PR

*Based on data available in trial database on Mar 7, 2025; responses are investigator read; analysis may change as data matures.

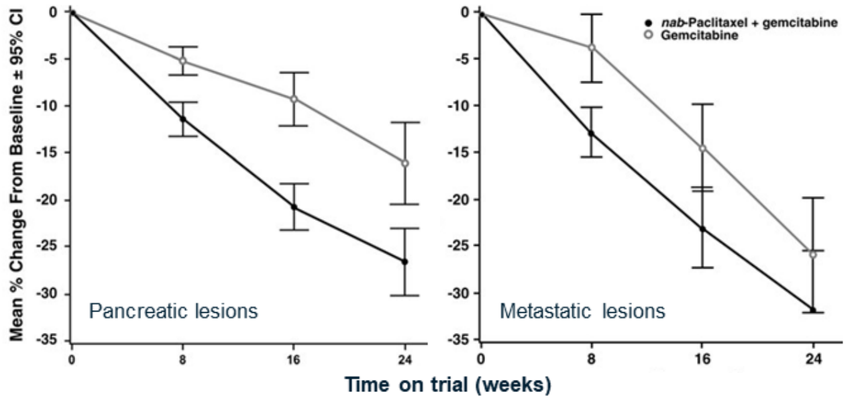
PHASE 2A INTERIM DATA – MARCH 2025

Combination with gem + Abraxane leads to faster and more sustained response. If approved as a combination therapy by FDA, it has the potential for Narmafotinib combination to become far more appealing

Comparison with historical gemcitabine+ Abraxane data suggests combination with Narmafotinib leads to:

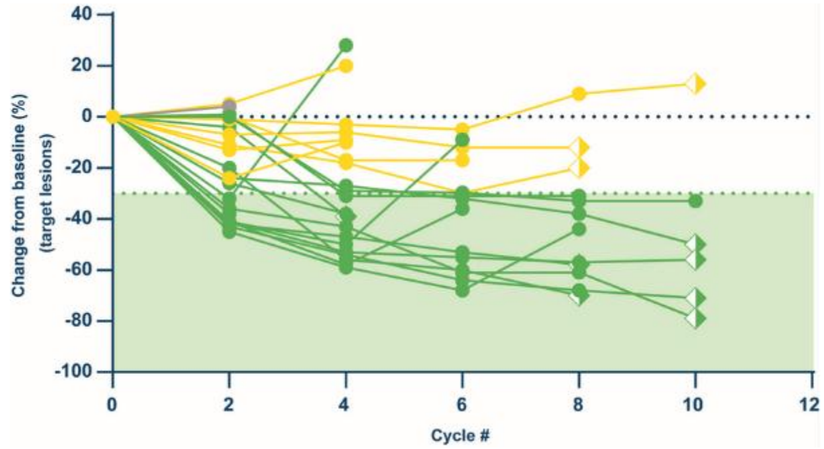
- Faster response
- Longer/sustained response

Historical gemcitabine+Abraxane data §



§ Pancreas 2017: 46; 203

Response over time (all lesions)*



*Based on data available in trial database on Mar 7, 2025; responses are investigator read; analysis may change as data matures

PHASE 2A UPDATE – JUNE/JULY 2025

17 Partial Responses, including 2 Complete Responses, from 55 patients* with 20 patients remaining on trial and awaiting results

Response rate sufficient to demonstrate superiority of Narmafotinib combination over gem/Nab-P alone

- 17/55 patients (31%) better than 23% ORR in MPACT* study
- 20 patients still on study: anticipate additional PR

2 Complete Responses recorded

- 1 pathological CR - surgery followed by pathology of removed tissue
- 1 confirmed CR - by CT scan, over 2 months
- Both patients were existing PR patients; on trial >12 months
  - Confirmed CR patient remains on trial

Extremely rare in metastatic advanced cancer

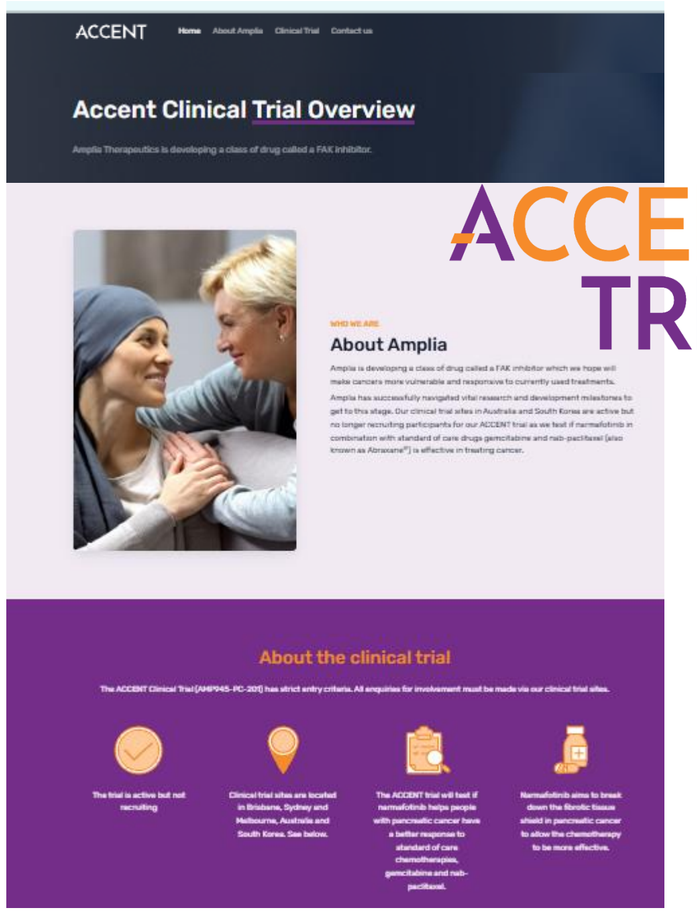
- 1 CR from 431 patients in benchmark MPACT study†
- Pathological CRs occur in ~5% of locally advanced disease
  - Associated with improved overall survival

17 confirmed PRs recorded (as of July 2025)

- >30% reduction in tumor size sustained >2 months
- No new lesions

PFS to be reported end July

- Sufficient patients on study for >6 months



ACCENT TRIAL

www.accenttrial.com

* The Phase 2a trial successfully recruited 55 patients in total, consisting of the primary 50-patient group and 5 additional participants to compensate for non-evaluable cases

† New England Journal of Medicine 2013; 369: 1691 – 703

PATIENT CASE STUDY

Rare pathological Complete Response in ACCENT study

Patient diagnosed with stage 4 pancreatic cancer and joined ACCENT study

Most patients who are diagnosed at this stage will not survive 12 months

After 12 months, patient's pancreatic tumour and liver metastases reduced in size

- Surgically resectable (able to be removed by surgery)
- No live cancer cells detected upon analysis

Patient has recovered from surgery

"I don't know really what to say except that I'm just so happy… I was given the opportunity to have a go of it, and it's actually worked"

* Source: The Australian July 5 2025

TOP-LINE DATA PREVIEW

Data comparison with previous gem/nab-P data from prior MPACT and NAPOLI-3 trials

Full data expected to be available end of July / early August 2025

Aiming to see:

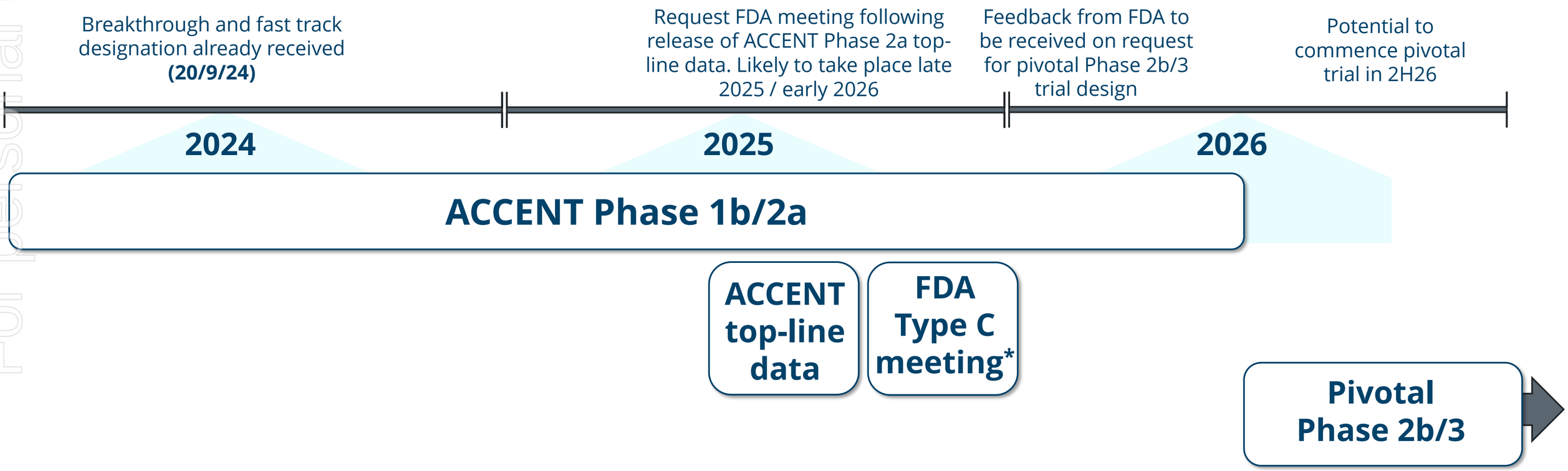
- Progression free survival (PFS) and Days on trial (DOT) superior to existing chemotherapy
- Continued positive safety and tolerability
- Similar or improved ORR and DCR

	MPACT (n=431)	NAPOLI (n=383)
Overall survival (mo)	8.5	9.2
Progression free survival (mo)	5.5	5.6
DOT (days)	117	123
CR	0.20%	0.30%
PR	23%	36%
SD	27%	26%
PD	20%	14.5%
Not evaluable	30%	23%
Confirmed Objective (Overall) response rate (ORR) (% CR, PR)	23%	36%
Confirmed Disease control rate (DCR) (% CR, PR, or SD)	48%	62%

Potential regulatory pathway

Potential for Narmafotinib to receive accelerated approval following a pivotal Phase 2b/3 clinical trial

- Amplia's Narmafotinib has potential for an accelerated path to market in in advanced pancreatic cancer following a Phase 2b/3 pivotal trial – as per Verastem, Inc
- Verastem's FAK inhibitor received FDA approval from its 184 patient Phase 2 RAMP 201 trial in recurrent Low-Grade Serous Ovarian Cancer (LGSOC)
- Amplia intends to commence a Phase 2b/3 clinical trial in 2H 2026



*Type C, Type D or end-of-phase meeting

ADDITIONAL OPPORTUNITIES

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AMPLICITY TRIAL

Combining Narmafotinib with most common chemotherapy for advanced pancreatic cancer in US

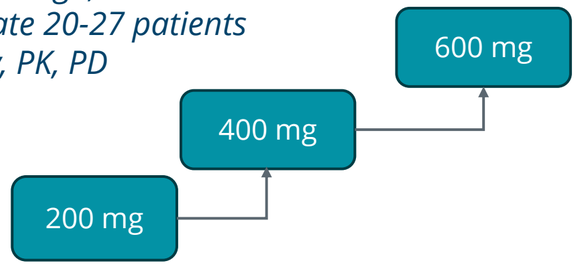
Phase 2 clinical study of Narmafotinib in combination with FOLFIRINOX

- Strong pre-clinical evidence
- FDA has cleared IND
- Use modified FOLFIRINOX (better tolerability)
- Protocol revision cleared by FDA (Type D meeting)
  - Project Optimus* compliant dose-escalation and 2 dose expansion
    - Part A: is expected to include 20-27 patients and is already fully funded
    - Part B will include 40 patients (two cohorts of 20 patients)
- Part A commencing in Q3 2025

amplicity

Protocol design

Part A:
- BOIN design;
estimate 20-27 patients
- Safety, PK, PD



Part B:
- 20 patients per cohort
- Safety and efficacy

* www.fda.gov/about-fda/oncology-center-excellence/project-optimus
§ Maximum tolerated dose

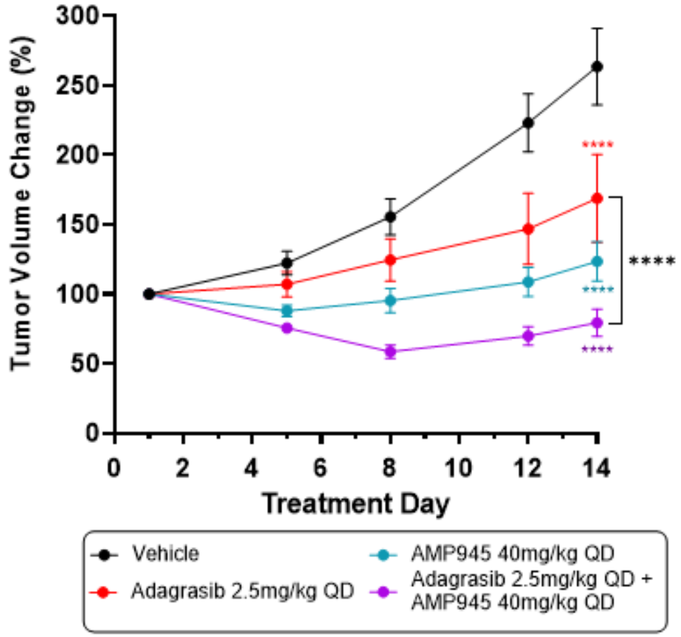
kRAS Inhibitor Combinations

Narmafotinib to be explored with selected kRAS inhibitor in pancreatic cancer trial

kRAS inhibitors represent exciting new drug class for pancreatic, lung and colorectal cancer

- Highly competitive - multiple drugs in clinical development by Pharma/Biotech worldwide
- Development of resistance and product differentiation are major concerns
- FAK inhibition enhances response to kRAS inhibitors in animal models (internal and published data)
- Verastem's 'AVMAPKI FAKZYNJA CO-PACK' is validation that FAK inhibition enhances Ras pathway inhibition in kRAS mutant cancer
- IIT* concepts in discussion with pancreatic specialists
- Clinical trial expected to commence in 1H 2026

FAK inhibition enhances efficacy of kRAS inhibitor



Mouse model of pancreatic cancer
Narmafotinib and Adagrasib (kRASi) alone and in combination

* Investigator Initiated Trial

OVARIAN CANCER

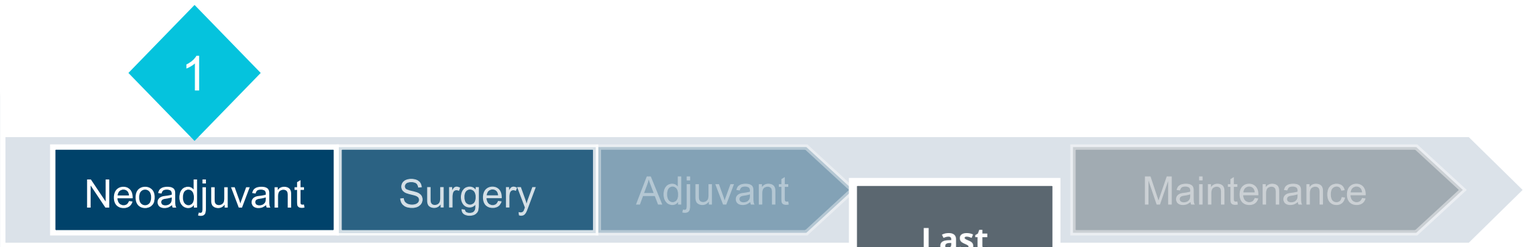
IIT's for clinical study of Narmafotinib plus standard-of-care therapy in ovarian cancer submitted for funding and in discussion

Opportunities in:

- First-line therapy as a chemo-sensitiser in platinum-resistant cancer (neoadjuvant) 1
- In recurrence and acquired resistance 2
- In sub-type, ovarian clear cell carcinoma (~25% in Japan)

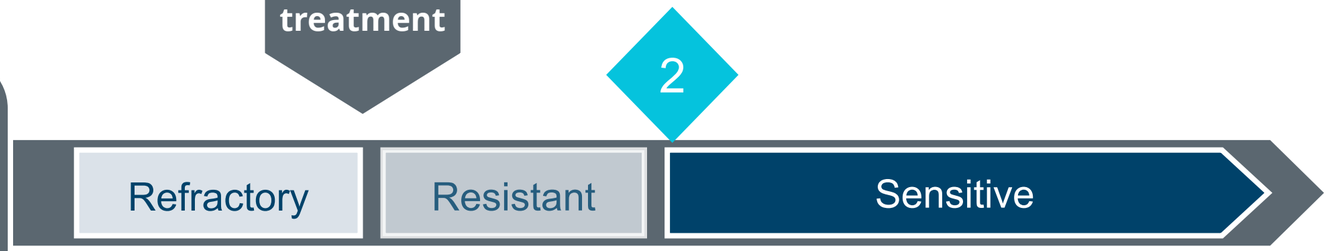
Investigator initiated trial (IIT) expected to commence in 1H 2026

All new patients receiving chemotherapy



Last platinum treatment

Patients with recurrence or non-responsive to chemotherapy



Outlook & catalysts

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PARTNERING OPPORTUNITIES

Significant new partnering interest following highly prospective ACCENT clinical trial data

- Amplia's partnering interest from global pharmaceutical companies has materially increased following recent interim data and patient updates in the ACCENT clinical trial
  - Heightened focus in Narmafotinib as the **best-in-class** Focal Adhesion Kinase (FAK) inhibitor in development
- Strengthened balance sheet following the capital raising will ensure the company retains flexibility to progress its clinical program and is in a position of strength when negotiating with potential license partners
- Amplia's management are in ongoing discussions with potential partners around regional licensing agreements, including:
  - Pharmaceutical companies with focus on orphan indications / GI cancer focus
  - Strategic partners with focus on drug development in precision medicine
  - Pharmaceutical companies with chemotherapy treatments coming off patent or seeking differentiation
- Preference is to work with license partners who have specialist knowledge and capability in Amplia's key modalities

UPCOMING CATALYSTS

Significant pipeline of expected news flow with key catalysts imminent

- **Q3 2025**
  - ✓ ACCENT top-line data including progression free survival **(Late July/early August 2025)**
  - ✓ ACCENT request FDA type C meeting to discuss Phase 2b/3 pivotal trial design
  - ✓ Amplicity first patient dosed (part A dose escalation begins)
  - ✓ ACCENT further patient updates
- **Q4 2025**
  - ✓ ACCENT further patient updates
  - ✓ Amplicity first safety and efficacy data
  - ✓ FDA meeting and minutes on ACCENT trial pathway
  - ✓ Possible EU regulatory filings (Prime, Orphan)
- **1H 2026**
  - ✓ ACCENT further mature data
  - ✓ Amplicity part A dose escalation completed and further data
  - ✓ kRAS clinical trial commences
  - ✓ Ovarian cancer investigator initiated trial (IIT) commences
- **2H 2026**
  - ✓ Amplicity Part B commences and patient response updates
  - ✓ ACCENT Phase 2b/3 trial commences
- **Potential updates on partnering / licensing agreements**

Capital raising overview

CAPITAL RAISING OVERVIEW

Amplia is undertaking a capital raising of $27.5m via a placement and share purchase plan

Offer Structure	• Amplia is undertaking a capital raising (the "**Offer**") of approximately $27.5 million comprising: - an institutional placement ("**Tranche 1 Placement**") to raise approximately $22.3 million utilising Amplia's existing placement capacity under Listing Rules 7.1 and 7.1A; - an institutional placement ("**Tranche 2 Placement**") to raise approximately $2.5 million subject to shareholder approval; - a placement to Amplia's Directors to raise a total of $0.2 million, subject to shareholder approval (**"Director Placement"**, together the "**Placement**"); and - a Share Purchase Plan (**"SPP"**) to be made available to certain eligible shareholders to raise approximately $2.5 million, subject to shareholder approval. • Up to approximately 119.6 million new fully paid ordinary shares in Amplia ("**New Shares**") to be issued under the Offer, representing approximately 30.8% of Amplia's current shares on issue.
Placement Price	• New Shares issued under the Placement will be issued at a price of A$0.23 per New Share ("**Placement Price**"). • The Placement price represents a: - 19.3% discount to the last close price on Friday, 18 July 2025 of $0.285 - 22.8% discount to 5 trading day VWAP on Friday, 18 July 2025 of $0.298; and - 0.6% premium to 30 trading day VWAP on Friday, 18 July 2025 of $0.229;
Share Purchase Plan	• A Share Purchase Plan (SPP) will also be offered to eligible shareholders, with Applications up to a maximum of $100,000. • Amplia is targeting to raise approximately $2.5 million under the SPP. • New Shares will be issued under the SPP at the lower of: • The Placement price of $0.23 per New Share; or • 5.0% discount to the VWAP of the Company's shares traded on the ASX during the 5 trading days up to the closing date of the SPP, rounded to the nearest half cent. • A transaction-specific prospectus (SPP Booklet) containing further details about the SPP, including the scale-back policy, will be made available to eligible shareholders. • Record date for determining eligibility for the SPP is 7:00pm (AEST) on Tuesday, 22 July 2025. • The Company has received binding commitments ("**SPP Shortfall Commitment**") from institutional investors to subscribe for up to $2.5 million of new, fully paid ordinary shares if the SPP is not fully subscribed by eligible shareholders, subject to shareholder approval. • The Company reserves the right to accept over subscriptions under the SPP, subject to ASX Listing Rules and Corporations Act 2001 (Cth).
Director Placement	• Amplia's directors have committed to subscribe for $235,000 worth of New Shares pursuant to the Director Placement, as follows (subject to shareholder approval): - Dr Robert Peach $150,000 worth of New Shares; - Dr Chris Burns - $20,000 worth of New Shares; - Dr Warwick Tong - $35,000 worth of New Shares; and - Jane Bell -$30,000 worth of New Shares
Prospectus	• The SPP will be undertaken pursuant to a transaction-specific prospectus.
Record Date	• The Record Date for the SPP is 7pm (AEST), Tuesday 22 July 2025.
Ranking	• All New Shares issued under the Offer will rank equally with existing Amplia shares from the date of issue.
Sole Lead Manager	• Bell Potter Securities Limited ("**Bell Potter**") is acting as Sole Lead Manager and Bookrunner to the Offer.

SOURCES AND USE OF FUNDS

Following the capital raising, Amplia will be funded into 2027

SOURCES OF FUNDS	AUD ($m)
Cash Balance (at 30 June 25) [1]	$7.0
Expected FY25 and FY26 R&D Tax Refunds[2]	$8.2
Capital raise	$27.5
Total Sources	**$42.7**

[1] Unaudited – based on 31 March 2025 Appendix 4C and management accounts
[2] FY25 R&D tax refund expected August 2025 and FY26 R&D tax refund expected August 2026

PURPOSE	AUD ($m)
ACCENT trial • Completion of Phase 2a • Foundational work for Phase 2b/3 trial	$6.0
Amplicity trial • Dose escalation • 2 Dose comparison	$19.0
KRAS and/or OVARIAN trial	$5.0
CMC (manufacturing)	$6.0
Operations, preclinical, working capital and offer costs	$6.7
Total Uses	**$42.7**

OFFER TIMETABLE

Record Date for SPP	7.00pm (AEST), Tuesday, 22 July 2025
Trading resumes, Announcement of Capital Raising	Wednesday, 23 July 2025
Settlement of New Shares under Placement	Monday, 28 July 2025
Allotment of New Shares under Placement	Tuesday, 29 July 2025
SPP Opens	Friday, 1 August 2025
SPP Closes	Friday, 22 August 2025
Announcement of results of SPP	Tuesday, 26 August 2025
AGM to approve SPP and Director Placement	Wednesday, 27 August 2025
Commencement of trading of New Shares issued under the SPP and Director Placement	Monday, 1 September 2025

The timetable is indicative only and dates and times are subject to change without notice.

Amplia
THERAPEUTICS

Amplia Therapeutics Limited
ABN 16 165 160 841
ASX: ATX
info@ampliatx.com

ampliatx.com

Appendix

Amplia THERAPEUTICS

COMPANY SUMMARY (ASX:ATX)

Founded in 2016

- Reverse-listed onto ASX in 2018

Developing assets discovered at Australian industry - academic collaboration

- CRC for Cancer Therapeutic

Based in Melbourne, Australia

- 8 local staff
- Worldwide network of collaborators, consultants and contractors

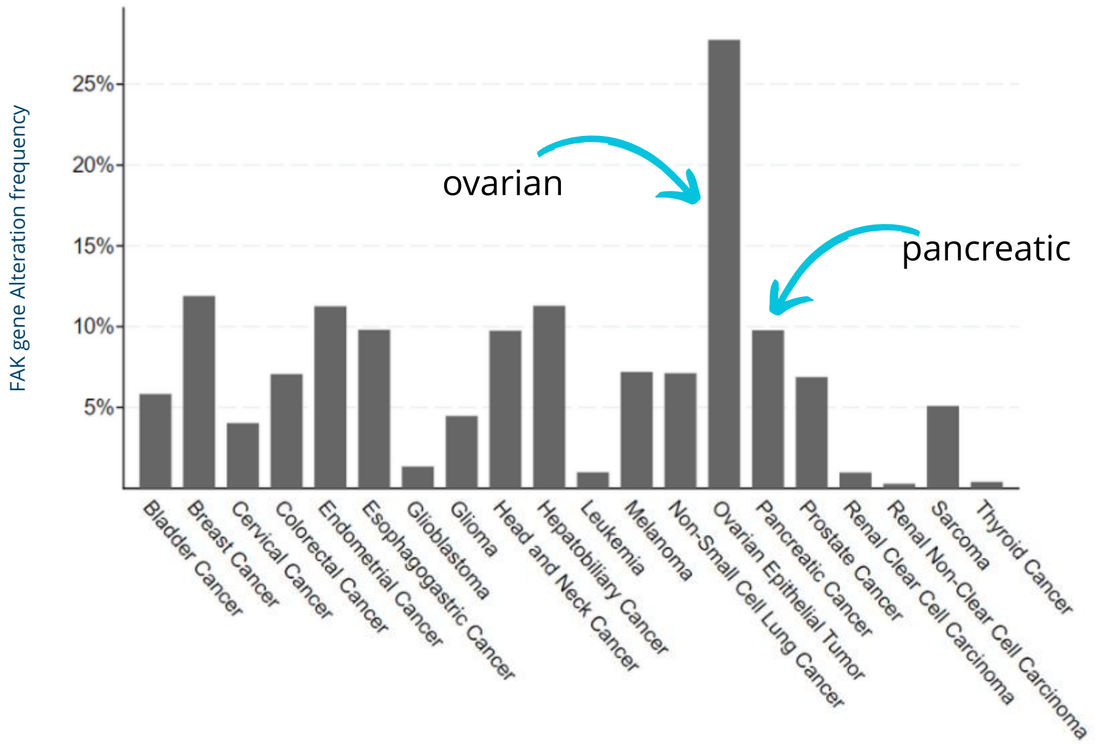
12 month share price chart

Share price (as at 18/07/25)	A$0.285
Shares on issue	388.7m
Market cap (as at 18/07/25)	A$110.8M
Cash (30-Jun-2025)	A$7.0m
Large Shareholders	Platinum Investment Management Ltd **(10.1%)** Acorn Capital Ltd **(9.2%)** Blueflag Holdings Pty Ltd **(5.1%)** Pengana Capital **(3.9%)** Board + Management **(5.8%)**

FAK INHIBITION IN CANCER

FAK is over-expressed and over-active in many cancers

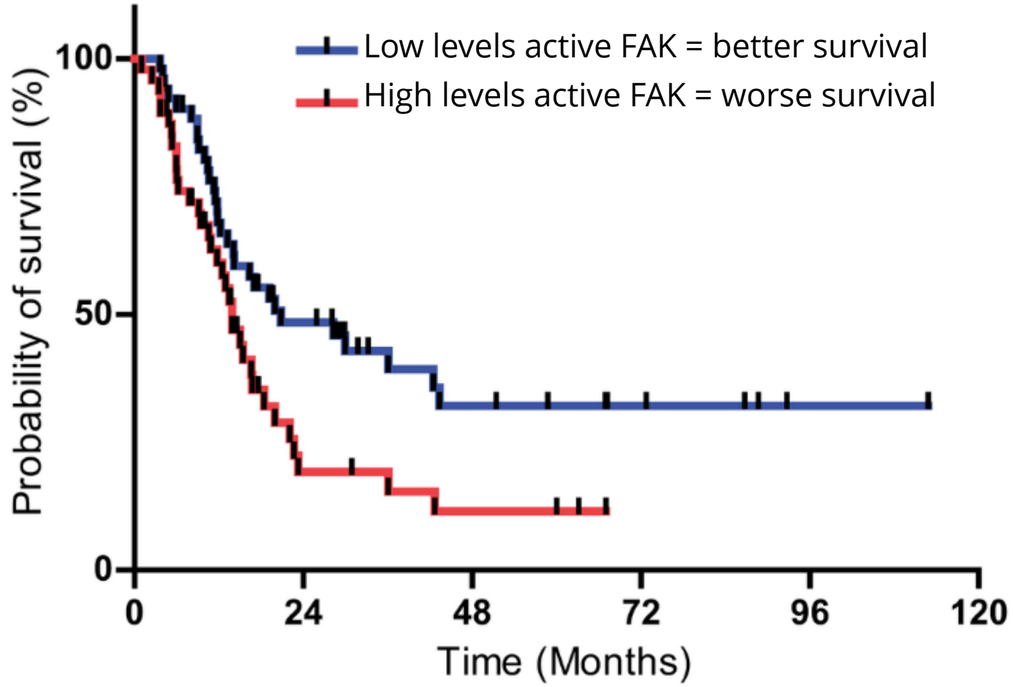
Over-expression and increased FAK activity



FAK INHIBITION IN CANCER

Higher FAK levels correlate with worse patient outcomes

FAK activity correlates with worse outcome



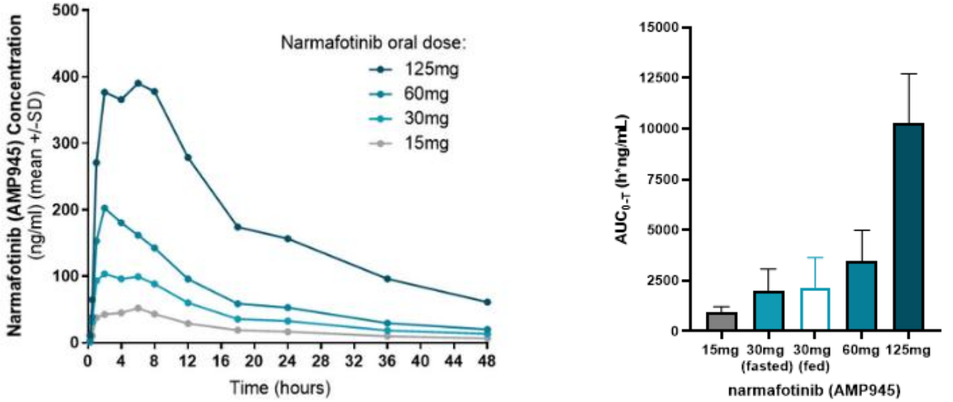
EMBO Mol Med 2020, 12, e12010

EARLY DEVELOPMENT RESULTS

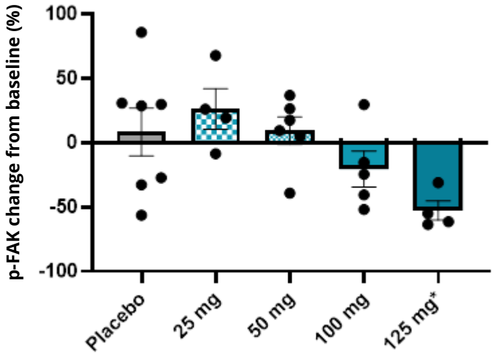
Healthy volunteer study demonstrated excellent clinical profile

- Safety and tolerability
- Once a day dosing
  - No effect of food on drug absorption
  - No accumulation
- Target engagement in skin-punch biopsies

Circulating Narmafotinib levels and FAK inhibition



Circulating levels of Narmafotinib show dose dependence, no food effect and a half life of approximately 20 hours



levels of activated FAK in skin biopsies decrease with increased dose

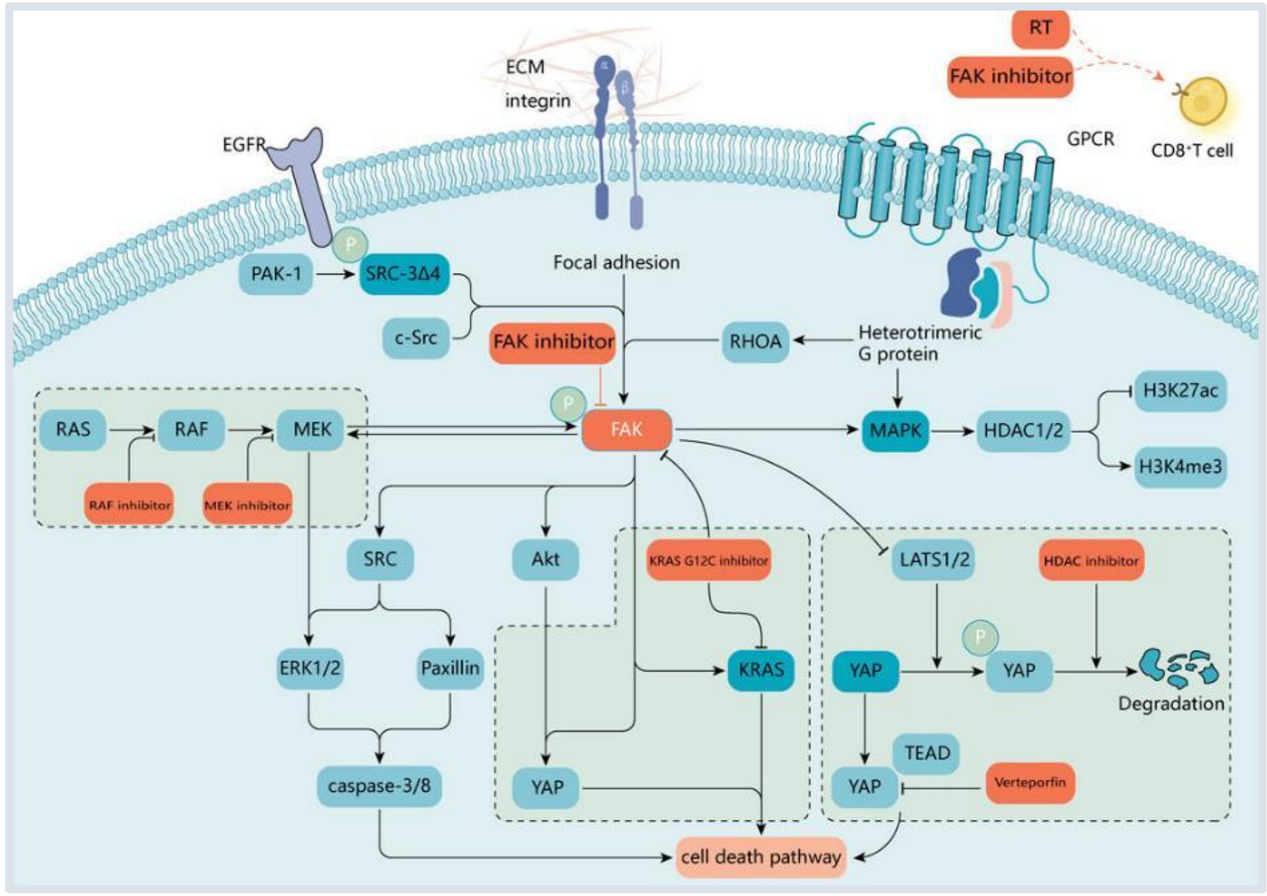
POTENTIAL FOR COMBINATION WITH OTHER THERAPEUTIC APPROACHES

Evidence for synergistic or additive combinations with:

- Raf/Mek and kRas inhibitors
- Wnt inhibitors
- Hippo Pathway inhibitors
- I/O agents
  - anti PD-1 and PD-L1
  - anti-TIGIT

Also:

- Antibody-Drug Conjugates
- Radiation and radiopharmaceuticals



Front. Cell Dev. Biol., 2022, 10

Background on Narmafotinib (AMP945)

Amplia THERAPEUTICS

PRECLINICAL DATA

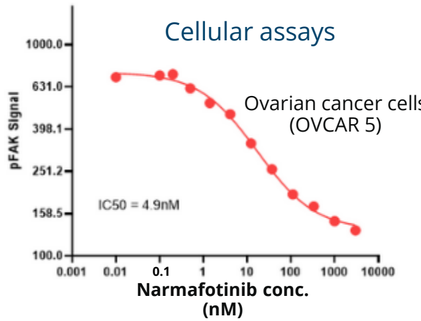
Narmafotinib displays excellent potency and selectivity

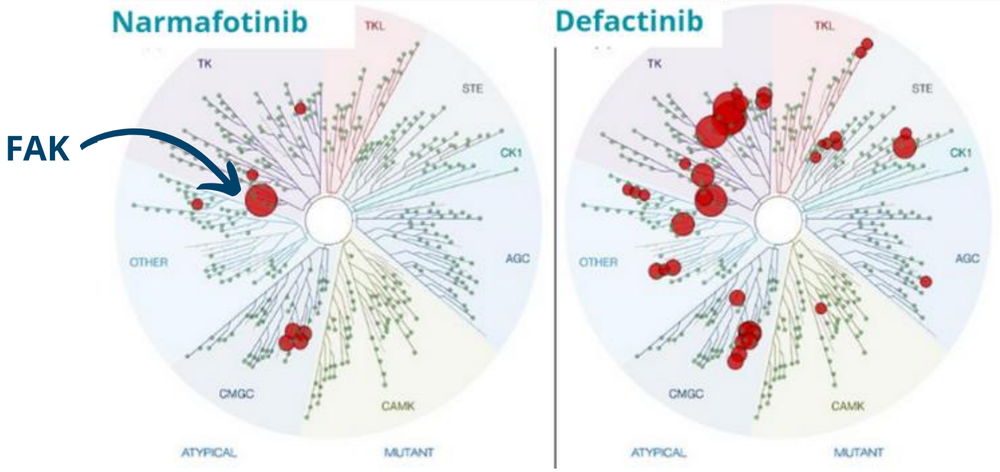
Preclinical profile of Narmafotinib

Biochemical/biophysical assays

IC_{50}	2.2 nM
K_D	29 pM

Cellular assays



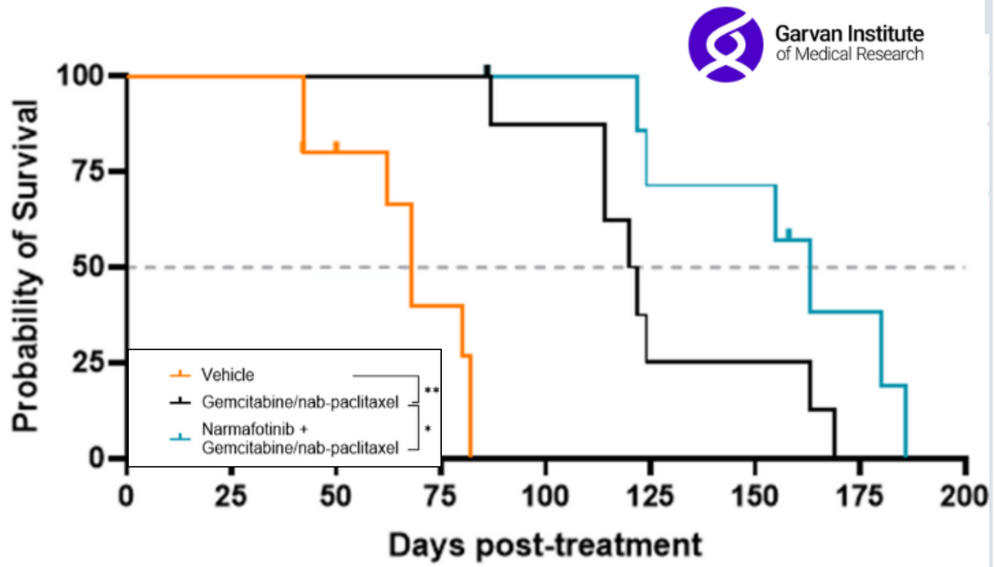


Red circles show inhibition of additional kinases. Size of circle shows extent of inhibition

PRECLINICAL DATA

Narmafotinib improves survival in pancreatic cancer models when dosed in combination with standard of care therapies

Efficacy with FAK inhibition in preclinical studies



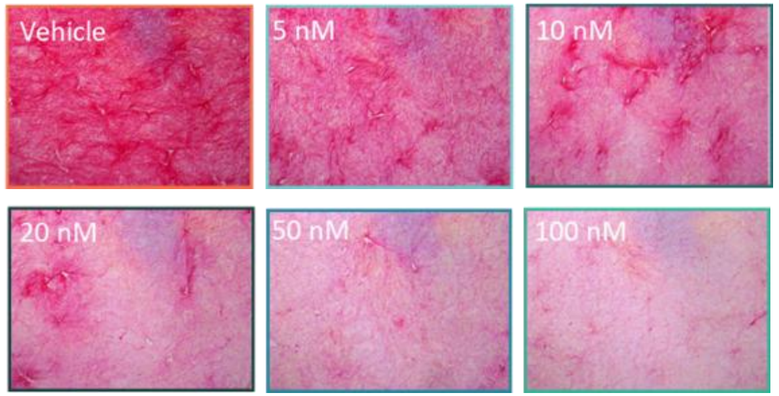
Survival plot from mouse model of human pancreatic cancer, comparing three groups of mice: (i) vehicle (orange), (ii) chemotherapy (black), and (iii) chemotherapy + narmafotinib (blue)

PRECLINICAL DATA

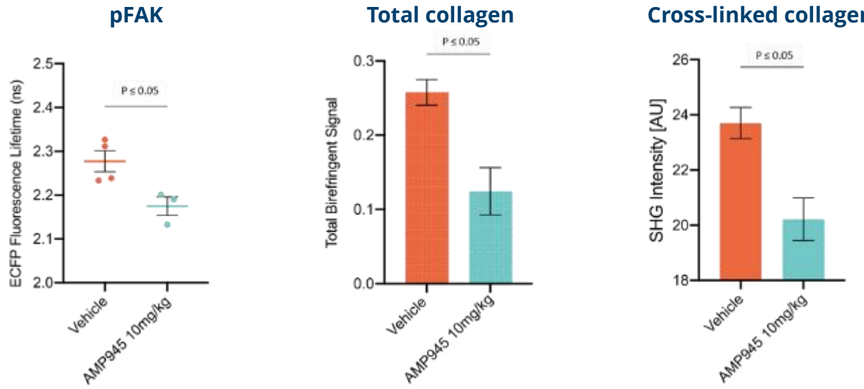
Narmafotinib reduces collagen deposition and cross-linking in vitro and in vivo

- No toxicity to fibroblasts
- Correlates with decreased pFAK
- Shorter collagen fibers

Anti-fibrotic effects of Narmafotinib



Fibroblasts treated with Narmafotinib, 7 days Picrosirius red staining for total collagen



Pancreatic cancer mouse model; Narmafotinib (10 mg/kg, b.i.d., 3 days)
Tumours excised day 4 for analysis

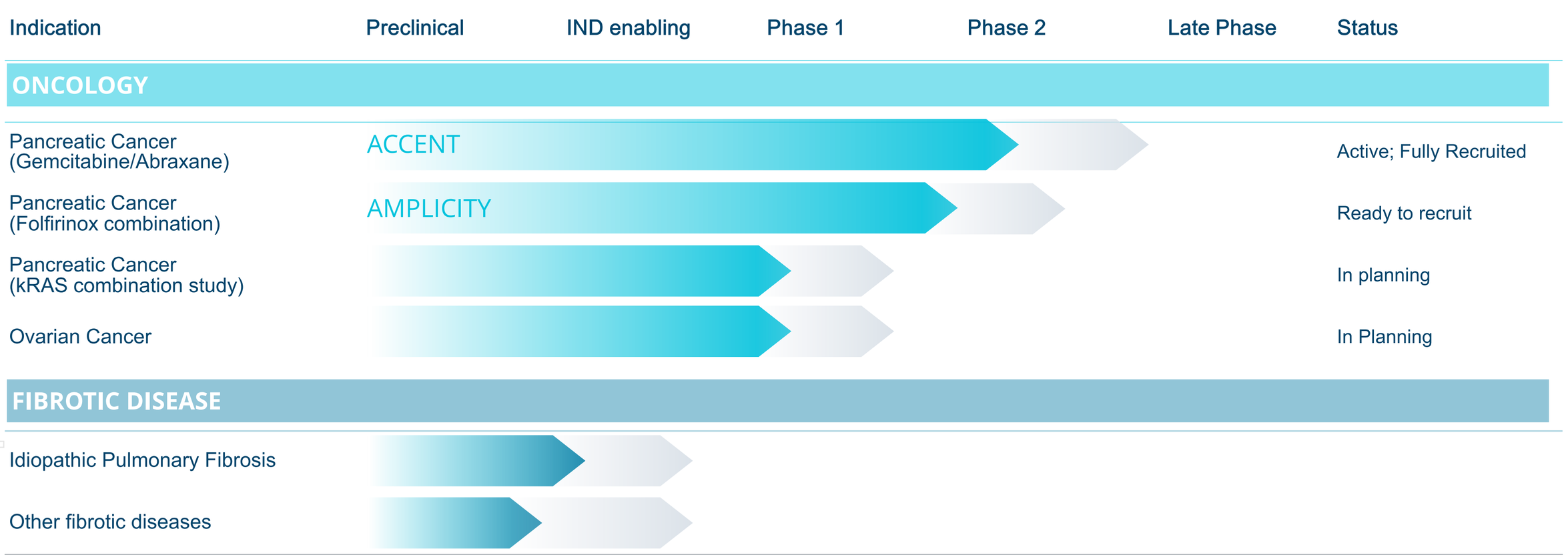
Narmafotinib IP POSITION

FDA Orphan Drug Designation for pancreatic cancer and idiopathic pulmonary fibrosis

	Status	Filing Date
Composition of Matter	Granted	2012
Salt Form	Granted (JP, EU)	2020
Method of Use (IPF)	Filed	2021
Method of Use (PC)	Filed	2023
Additional Filings	Ongoing	

EXTENDED PIPELINE

Extensive pipeline, with lead asset in pancreatic cancer potentially heading towards a Phase 2 registrational trial



Expected developments over the next 12 months

Key Risks

KEY RISKS

RISK	DESCRIPTION
Risks associated with the Offer	The Offer is not underwritten. Accordingly, the amount that will be raised under the Offer is uncertain and as such could be insufficient to meet all of the objectives outlined in the "Sources and Uses of Funds" slide above. If the Offer raises less than the targeted amount, the Company may need to raise additional capital to fund the objectives specified in the "Uses of Funds" outlined in this presentation. See also the "Additional requirements for capital" risk below.
Clinical development risk and risk of adverse mature data	The nature of clinical drug development has inherent risks, with many drug candidates entering clinical trial failing to be successfully developed into marketable products. The Company is currently undertaking a clinical trial with its lead drug Narmafotinib in advanced pancreatic cancer patients. Clinical trials have many associated risks which may impact commercial potential and therefore future profitability. Such trials may fail to recruit patients at a sufficient rate, and a slower than expected recruitment will mean slower than expected data points so a longer period incurring overheads and personnel costs. Clinical trialling may reveal drug candidates to be unsafe or poorly tolerated in the patient population being tested. The drugs may also be shown to be only modestly effective, thereby limiting commercial potential, or ineffective. Any of these outcomes will likely have a significant adverse effect on the Company, the value of its securities and the future commercial development of its drug candidates, including Narmafotinib. For example, the top-line data for the ACCENT trial is expected to be announced in late July / early August 2025 and there is no guarantee or certainty as to what the data will reveal. Clinical trials might also potentially expose the Company to product liability claims in the event its products in development have unexpected effects on clinical subjects.
Regulatory approvals necessary for clinical trials	The Company may be unable to secure and maintain necessary approvals from regulatory agencies and institutional bodies (clinics and hospitals) to conduct its clinical trials. Using funds raised in the Offer, the Company plans to initiate a Phase 2 clinical trial (as an Investigator Initiated Trial) in advanced ovarian cancer patients. There is no assurance that regulatory bodies and local ethics committees will approve the Company's plans to recruit these patients.
Regulatory and reimbursement approvals	The research, development, manufacture, marketing and sale of products developed by the Company are subject to varying degrees of regulation by a number of government authorities in Australia and overseas. Pharmaceutical products under development, such as drug candidate Narmafotinib, must undergo a comprehensive and highly regulated development and review process before receiving approval for marketing. The process includes the provision of clinical data relating to the quality, safety and efficacy of the products for their proposed use. There is no guarantee that such regulatory approvals will be granted. Products may also be submitted for cost reimbursement approval. The availability and timing of that reimbursement approval may have an impact upon the uptake and profitability of products in some jurisdictions. There is no guarantee that such approvals will be granted.

KEY RISKS

RISK	DESCRIPTION
Chemistry, manufacturing and controls	The ACCENT clinical trial currently underway requires supply of Narmafotinib drug product (capsules). There are risks to production of drug substance in a timely manner should supply chains be affected. There are also risks associated with shipment, storage and handling of drug product that may render the material unavailable or inappropriate for clinical usage. For clinical trial sites in South Korea, supplies of the chemotherapies gemcitabine and Abraxane are also required. There are risks in the supply, shipment, storage and handling of drug product that may delay delivery or render the material unavailable or inappropriate for clinical usage.
Commercialisation of products and potential market failure	The Company has not yet commercialised any products and as yet has no revenues. The Company is also dependent on commercially attractive markets remaining available to it during the commercialisation phase and there is a risk that, once developed and ready for sale, commercial sales may not be achieved. Furthermore, any products developed by the Company may prove to be uneconomical to market or compete with alternative products marketed by third parties, or not be as attractive or efficacious as alternative treatments.
Competition and regulation	The biotechnology and pharmaceutical industries are intensely competitive and subject to rapid and significant change. A number of companies, both in Australia and abroad, may be pursuing the development of products that target the same markets and/or diseases that the Company is targeting. The Company's products may compete with existing products that are already available to customers. The Company may face competition from parties who have substantially greater resources than the Company. Competing products may be superior to the Company's products, which would adversely impact the commercial viability of the Company's products.
Dependence upon key personnel	The Company's ability to attract and retain personnel will have a direct impact on its ability to deliver its project commitments. The Company depends on the talent and experience of its personnel as an important asset. There may be a negative impact on the Company if any of its key personnel leave. It may be difficult to replace them, or to do so in a timely manner or at comparable expense. Additionally, any key personnel of the Company who leave to work for a competitor may adversely impact the Company. Additionally, increases in recruitment fees, wages and contractor costs may adversely impact upon the financial performance of the Company.

KEY RISKS

RISK	DESCRIPTION
Growth	There is a risk that the Company may be unable to manage its future growth successfully. The ability to hire and retain skilled personnel as outlined above may be a significant obstacle to growth.
Commercial partners	The Company's growth strategy may be impacted if it is unable to find suitable commercialisation partners. The Company's due diligence processes may not be successful and a commercial partnership may not perform to the level expected.
Intellectual property	The Company's ability to commercialise any product depends upon its ability to protect its intellectual property and any improvements to it. The intellectual property may not be capable of being legally protected, it may be the subject of unauthorised disclosure or be unlawfully infringed, or the Company may incur substantial costs in asserting or defending its intellectual property rights.
Revenues and profitability	The Company does not currently generate revenue from product sales nor are revenues anticipated in the short to medium term. The Company's ability to achieve both revenues and profitability is dependent on a number of factors, including its ability to complete successful clinical trials, obtain regulatory approval for its products and successfully commercialise those products. There is no guarantee that the Company's products (including the drug Narmafotinib) will be commercially successful.
Research & Development (R&D) Tax Rebate	The Company is currently entitled to receive an R&D rebate on part of its expenditure in research and development. There is a risk that the Australian Government may make material changes to the rebate scheme, which may adversely impact the funding available to the Company to fund its operations. In order to obtain an R&D rebate on that part of its expenditure that is incurred out of Australia the Company must first gain approval for that expenditure from the Australian Government. Such an approval is called an Advanced Finding. The Company has received Advanced Findings for R&D work which is planned for its lead assets Narmafotinib and AMP886.

GENERAL RISKS

RISK	DESCRIPTION
Economic	General economic conditions, movements in financial markets, interest and inflation rates and currency exchange rates may have an adverse effect on the Company's business and production activities, as well as on its ability to fund those activities.
Market conditions	Share market conditions may affect the value of the Company's quoted shares (and options to acquire quoted shares) regardless of the Company's operating performance. Share market conditions are affected by many factors such as: a) general economic outlook; b) introduction of tax reform or other new legislation; c) interest rates and inflation rates; d) changes in investor sentiment toward particular market sectors; e) the demand for, and supply of, capital; and f) terrorism or other hostilities. The market price of securities can fall as well as rise and may be subject to varied and unpredictable influences on the market for equities in general and pharmaceutical stocks in particular. Neither the Company nor the Directors warrant the future performance of the Company or any return on an investment in the Company.
Litigation	There is a risk that the Company may in future be the subject of or required to commence litigation. There is, however, no litigation, mediation, conciliation or administrative proceeding taking place, pending or threatened against the Company.
Tax risks	Changes to the rate of taxes imposed on the Company (including in overseas jurisdictions in which the Company operates now or in the future) or tax legislation generally may affect the Company and its shareholders. In addition, an interpretation of Australian tax laws by the Australian Taxation Office that differs to the Company's interpretation may lead to an increase in the Company's tax liabilities and a reduction in shareholder returns. Personal tax liabilities are the responsibility of each individual investor. The Company is not responsible either for tax or tax penalties incurred by investors.
Additional requirements for capital	The Company's capital requirements depend on numerous factors. The Company may require further financing in addition to amounts raised under the capital raising. Any additional equity financing will dilute shareholdings, and debt financing, if available, may involve restrictions on financing and operating activities. If the Company is unable to obtain additional financing as needed, it may be required to reduce the scope of its operations, its production levels, or scale back its research and development and/or clinical trials as the case may be. There is no guarantee that the Company will be able to secure any additional funding or be able to secure funding on terms favourable to the Company.

International Selling Restrictions

INTERNATIONAL SELLING RESTRICTIONS

This document does not constitute an offer of New Shares in any jurisdiction in which it would be unlawful. In particular, this document may not be distributed to any person, and the New Shares and Attaching Options may not be offered or sold, in any country outside Australia except to the extent permitted below.

Hong Kong

WARNING: This document has not been, and will not be, registered as a prospectus under the Companies (Winding Up and Miscellaneous Provisions) Ordinance (Cap. 32) of Hong Kong, nor has it been authorised by the Securities and Futures Commission in Hong Kong pursuant to the Securities and Futures Ordinance (Cap. 571) of the Laws of Hong Kong (the "SFO"). Accordingly, this document may not be distributed, and the New Shares may not be offered or sold, in Hong Kong other than to "professional investors" (as defined in the SFO and any rules made under that ordinance).

No advertisement, invitation or document relating to the New Shares has been or will be issued, or has been or will be in the possession of any person for the purpose of issue, in Hong Kong or elsewhere that is directed at, or the contents of which are likely to be accessed or read by, the public of Hong Kong (except if permitted to do so under the securities laws of Hong Kong) other than with respect to New Shares that are or are intended to be disposed of only to persons outside Hong Kong or only to professional investors. No person allotted New Shares may sell, or offer to sell, such securities in circumstances that amount to an offer to the public in Hong Kong within six months following the date of issue of such securities.

The contents of this document have not been reviewed by any Hong Kong regulatory authority. You are advised to exercise caution in relation to the offer. If you are in doubt about any contents of this document, you should obtain independent professional advice.

New Zealand

This document has not been registered, filed with or approved by any New Zealand regulatory authority under the Financial Markets Conduct Act 2013 (the "FMC Act").

The New Shares are not being offered to the public within New Zealand other than to existing shareholders of the Company with registered addresses in New Zealand to whom the offer of these securities is being made in reliance on the Financial Markets Conduct (Incidental Offers) Exemption Notice 2021.

Other than in the entitlement offer, the New Shares may only be offered or sold in New Zealand (or allotted with a view to being offered for sale in New Zealand) to a person who:

- is an investment business within the meaning of clause 37 of Schedule 1 of the FMC Act;
- meets the investment activity criteria specified in clause 38 of Schedule 1 of the FMC Act;
- is large within the meaning of clause 39 of Schedule 1 of the FMC Act;
- is a government agency within the meaning of clause 40 of Schedule 1 of the FMC Act; or
- is an eligible investor within the meaning of clause 41 of Schedule 1 of the FMC Act.

INTERNATIONAL SELLING RESTRICTIONS

Singapore

This document and any other materials relating to the New Shares have not been, and will not be, lodged or registered as a prospectus in Singapore with the Monetary Authority of Singapore. Accordingly, this document and any other document or materials in connection with the offer or sale, or invitation for subscription or purchase, of New Shares, may not be issued, circulated or distributed, nor may the New Shares be offered or sold, or be made the subject of an invitation for subscription or purchase, whether directly or indirectly, to persons in Singapore except pursuant to and in accordance with exemptions in Subdivision (4) Division 1, Part 13 of the Securities and Futures Act 2001 of Singapore (the "SFA") or another exemption under the SFA.

This document has been given to you on the basis that you are an "institutional investor" or an "accredited investor" (as such terms are defined in the SFA). If you are not such an investor, please return this document immediately. You may not forward or circulate this document to any other person in Singapore. Any offer is not made to you with a view to the New Shares being subsequently offered for sale to any other party in Singapore. On-sale restrictions in Singapore may be applicable to investors who acquire New Shares. As such, investors are advised to acquaint themselves with the SFA provisions relating to resale restrictions in Singapore and comply accordingly.

United Kingdom

Neither this document nor any other document relating to the offer has been delivered for approval to the Financial Conduct Authority in the United Kingdom and no prospectus (within the meaning of section 85 of the Financial Services and Markets Act 2000, as amended ("FSMA")) has been published or is intended to be published in respect of the New Shares.

The New Shares may not be offered or sold in the United Kingdom by means of this document or any other document, except in circumstances that do not require the publication of a prospectus under section 86(1) of the FSMA. This document is issued on a confidential basis in the United Kingdom to "qualified investors" within the meaning of Article 2(e) of the UK Prospectus Regulation. This document may not be distributed or reproduced, in whole or in part, nor may its contents be disclosed by recipients, to any other person in the United Kingdom.

Any invitation or inducement to engage in investment activity (within the meaning of section 21 of the FSMA) received in connection with the issue or sale of the New Shares has only been communicated or caused to be communicated and will only be communicated or caused to be communicated in the United Kingdom in circumstances in which section 21(1) of the FSMA does not apply to the Company. In the United Kingdom, this document is being distributed only to, and is directed at, persons (i) who have professional experience in matters relating to investments falling within Article 19(5) (investment professionals) of the Financial Services and Markets Act 2000 (Financial Promotions) Order 2005 ("FPO"), (ii) who fall within the categories of persons referred to in Article 49(2)(a) to (d) (high net worth companies, unincorporated associations, etc.) of the FPO or (iii) to whom it may otherwise be lawfully communicated ("relevant persons"). The investment to which this document relates is available only to relevant persons. Any person who is not a relevant person should not act or rely on this document.

United States

This document does not constitute an offer to sell, or a solicitation of an offer to buy, securities in the United States. The New Shares have not been, and will not be, registered under the US Securities Act of 1933 or the securities laws of any state or other jurisdiction of the United States. Accordingly, the New Shares may not be offered or sold in the United States except in transactions exempt from, or not subject to, the registration requirements of the US Securities Act and applicable US state securities laws.