



15 June 2026

Investor Briefing: Business Update

Control Bionics Limited (ASX: CBL), an Australian leader in Electromyography (EMG) medical device technology, is pleased to announce that it will hold an investor webinar on 18 June 2026, to present to shareholders our recently announced strategic repositioning. Management will discuss the attached presentation and recent progress in delivering against our strategic objectives.

Control Bionics, CEO, Jeremy Steele, and Chairman, Stephen Rix, will provide a short presentation which will then be followed by Q&A.

Webinar Details: 12:00pm Melbourne time, Thursday 18 June 2026.

Link to register to attend the presentation:

<https://events.teams.microsoft.com/event/8fbc8887-df54-4fb5-999b-b31b83dc3059@20926d7b-eefe-49da-8d7a-95543dfa2f2f>

After registering, you will receive a confirmation email containing information about joining the webinar as well as dial-in details for those that wish to join by phone.

Questions can be submitted on the day or sent in advance to jsteele@controlbionics.com.

This ASX announcement has been approved for release by the CEO of Control Bionics Limited.

About Control Bionics:

Control Bionics is a medical device company that has more than 20 years' experience in the development and use of surface Electromyography (EMG) devices.

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About NeuroNode:

Our core patented NeuroNode technology is a wireless wearable device that detects minute signals sent from the brain to any skeletal muscle and is captured as EMG output. This output is then sent wirelessly via the NeuroNode to a personal computer, enabling speech and other computer-controlled functions like email and texting. Our technology is integrated with eye gaze technology whereby the eye gaze enables a cursor to be moved about a computer screen, driven much like a mouse, and the NeuroNode acts as like the mouse button. Control Bionics is the only such product to harness three modalities – touch, eye and NeuroNode control – which combined yield unique benefits in terms of the ability of patients to express themselves with significantly faster speed and less fatigue.

About NeuroStrip:

Control Bionics is currently commercialising its most recent advancement in its technology, the NeuroStrip. This wearable, miniaturised EMG device provides the business with the opportunity to enter new markets such as health diagnostics, sports performance and rehabilitation to name only a few potential markets.

Control Bionics operates in North America, Australia, Singapore and Japan.

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For further information visit the website: <https://www.controlbionics.com/>

EMPOWERMENT THROUGH PROVEN NEUROTECHNOLOGY

Converting high-fidelity muscle signals into communication, performance and clinical data.

Investor Presentation June 2026



Disclaimer

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One proven sEMG platform. Three commercial revenue pillars.

Control Bionics captures the body's electrical signals generated by muscles and converts them into actionable inputs and data.

What the technology does?

Surface EMG sensors capture neuro-muscle intent. Proprietary signal processing converts that intent into communication commands, performance feedback and longitudinal data.

25+
years R&D

A\$40m+
capital invested

9
patent families + provisionals

FDA / TGA / CE
registered devices

A\$6.1m
FY25 revenue +15% YoY

>75%
revenue currently US-based

Commercial pillars



1 Assistive communication

- \$1B+ global augmentative and alternative communication (ACC) market
- Funded device sales through wholesale partners



2 Sports & rehabilitation

- >\$4.2B addressable market
- Hardware + subscription analytics for organisations



3 Platform, tech & data

- Apple BCI, APIs, research and data partnerships
- Capital-light high-margin revenue option

Hardware captures the signal; software and cloud turn it into applications

A single neural-signal platform powering communication, sport, rehabilitation and research.



1 Signal capture through hardware

sEMG + motion sensors capture neuro-muscle intent through NeuroNode™ and NeuroStrip™ devices

A photograph showing two NeuroStrip sensors attached to a person's lower legs, demonstrating the hardware used for signal capture.

2 Signal processing

Proprietary algorithms clean, classify and translate signals

A photograph of a person sitting at a desk, using a laptop. The laptop screen displays a software interface with a graph showing signal processing results.

3 Cloud / data layer

Longitudinal datasets, APIs and application workflows

A photograph of a laptop displaying a software interface with various data visualizations, including line graphs and bar charts, representing the cloud/data layer.

Multiple applications enabled by the same platform

Communication access

Augmentative and alternative communication switching, tablets and Apple-device control

Sports analytics

Activation profiling, performance and return-to-play

Rehabilitation

Clinic workflows and objective muscle recruitment data

Research / APIs

Clinical studies, third-party integrations and datasets

Why surface EMG wins

It reads intent at the surface: no surgery, low setup burden and repeatable data in real-world clinical, sports and rehab environments.

sEMG is the practical neural-interface entry point.

Surface EMG is non-invasive, fast to set up and commercially deployable today.



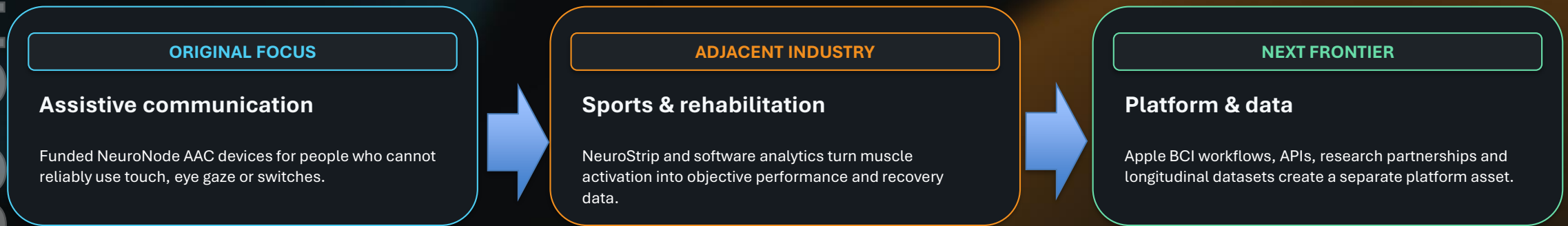
CBL's competitive advantage is practical deployment: the platform is already commercial in AAC and is extending into sport, rehabilitation and research without surgery or lab infrastructure.

	Surface EMG (CBL)	Eye Gaze	ECG	Implantable BCI
Invasive?	No	No	No	Yes
Set up time	~2 minutes	5-10 minutes	15+ minutes	Surgical
Ease of use	Self-calibrating	Sensitive to lighting	Requires technician	Post-op + training
Cost	~USD\$4,300 (reimbursed)	\$7-9k	~\$12k	\$100k
Insurance reimbursement	Yes (AAC)	Partial	None	None

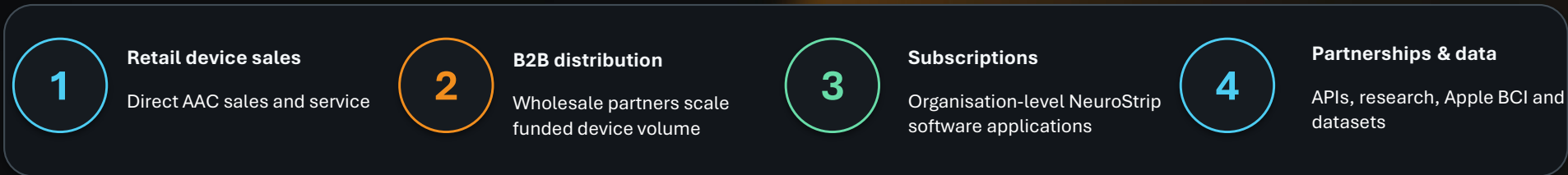
Personal use only

From a specialist AAC device business to a scalable neurotechnology platform.

The original assistive-communication business remains the foundation; the same core platform now expands into sports, rehabilitation, research, Apple BCI and data.



Revenue model evolution



Personal use only

Assistive communication.

Helping people with complex motor conditions communicate

Assistive communication snapshot

WHAT IT IS

Speech-generating devices that let users choose words, symbols and controls.

WHO IT HELPS

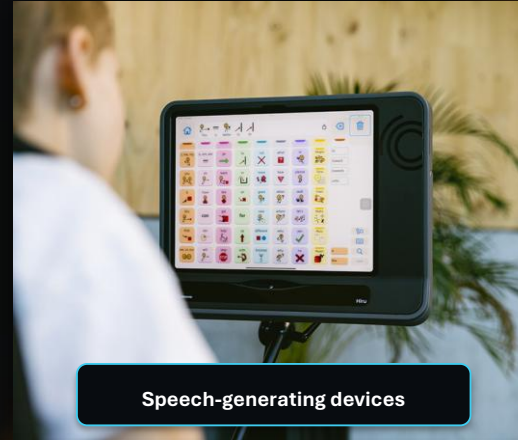
People with ALS/MND, cerebral palsy, SMA, SCI, TBI, stroke or locked-in conditions.

WHAT CBL SELLS

A product ladder using touch, eye gaze, switches and NeuroNode sEMG/spatial control.

WHY IT MATTERS

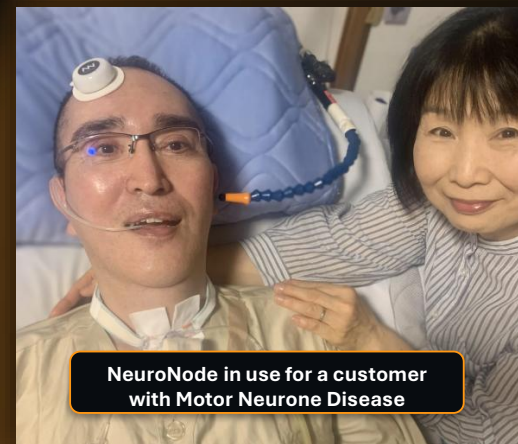
Reliable access when hands, eyes or conventional switches are not enough.



Speech-generating devices



Cerebral Palsy communication device



NeuroNode in use for a customer with Motor Neurone Disease



Assistive communication for all age groups

AAC product ladder: restoring communication through the right access method.

CBL matches each user to the access method they can control: touch, eye gaze, NeuroNode EMG/spatial or a combination, then converts selections into spoken output.

Who they help

People who cannot rely on natural speech or standard computer access.

- **PROGRESSIVE NEURO**
ALS / MND, SMA, MS, muscular dystrophy
- **COMPLEX MOTOR**
Cerebral palsy, spasticity, fatigue
- **ACQUIRED INJURY**
SCI, TBI, stroke / locked-in presentations
- **OTHER CONDITIONS**
Friedreich's Ataxia, Guillain-Barre

The common need: reliable selection with less fatigue.

What the products do

NeuroNode Trilogy

TOUCH + EYEGAZE + NEURONODE

Flagship multimodal speech-generating system with three ways to select words and symbols.

Best fit: complex or changing needs; fatigue with one method.

EyeGaze Duo

TOUCH + EYE GAZE

Camera tracks where the user is looking; a held gaze selects letters, symbols and controls.

Best fit: reliable eye control but limited hand access.

NeuroNode Duo

TOUCH + NEURONODE

Wearable sensor detects small muscle activation or spatial movement and turns it into selection.

Best fit: minimal movement, fatigue or poor fit for eye gaze.

Uno Touch

TOUCH

Robust, lightweight speech-generating device with communication software, speaker and strap.

Best fit: direct-touch users needing a mobile voice.



Uno Touch - iOS tablets

Speech-generating software running on Apple iOS tablets. Same intuitive touch interface as the Uno Touch — optimised for Apple iPad.

A \$1 billion market with a structural path to scale.

NeuroNode gives distributor partners a differentiated access method for people who are not well served by touch screens, eye-gaze cameras or conventional switches.



NeuroNode™ access method

Non-invasive muscle-signal control for AAC

Market

- \$1B+ global AAC market, growing >10% p.a.
- CBL holds <1% share today with funding pathways in the US, Australia, UK and Germany.

SIGNIFICANT HEADROOM FOR GROWTH

Why CBL wins?

- NeuroNode is a patent-protected EMG + spatial AAC switch with a dedicated US HCPCS reimbursement pathway and 25+ years of clinical validation.

STRUCTURAL BARRIER

Reputable model

- Funded per-device sales via wholesale partners: US\$4,300 NeuroNode HCPCS price plus ~US\$3,000 iOS tablet wholesale add-on.

WHOLESALE LOWERS COGS

Wholesale partners create salesforce leverage.

CBL is moving internal sales effort toward clinical enablement behind distributors rather than relying solely on a direct retail sales model.

Commercial agreements

- ✓ **Tobii Dynavox** #1 global AAC player; initial US pilot across five states; c. 170 US salespeople.
- ✓ **PRC-Salttillo** #2 US AAC player; formal US distribution agreement executed; onboarding underway - 70 US sales people added.
- ✓ **Smartbox** UK & Ireland wholesale distribution.
- ✓ **Germany HMV** Funding approved; distributor identification underway.
- ✓ **iOS tablet agreement** Expands the partner bundle and distribution offering.

Route to market:

- Transition CBL sales staff to clinical support roles for distributors - our people become the expert layer behind their sales force
- Onboard, train and support distributor sales reps to sell the NeuroNode and our iOS tablets
- Ensure distributors and their customers have early success with our technology - retention depends on it
- Identify and appoint German distributor to unlock the approved HMV funding pathway

Near-term AAC milestones

- Enhanced NN Controller App release
- German distributor appointment
- New US distribution contracts
- Expansion of existing partner contracts

Personal use only

Sports & rehabilitation.

Objective muscle data for performance, recovery and return-to-play.

Sports and rehab snapshot

WHAT IT IS

Wearable sensors and software that measure muscle activation in real-world settings.

WHO IT HELPS

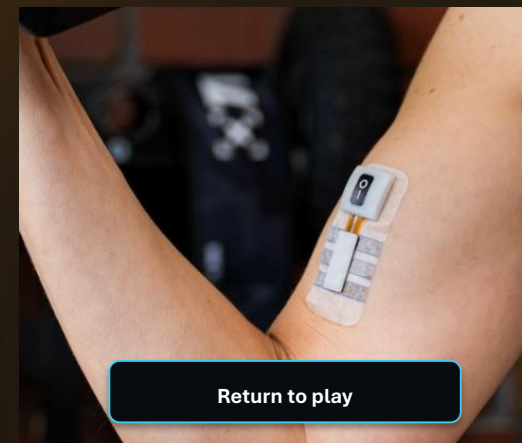
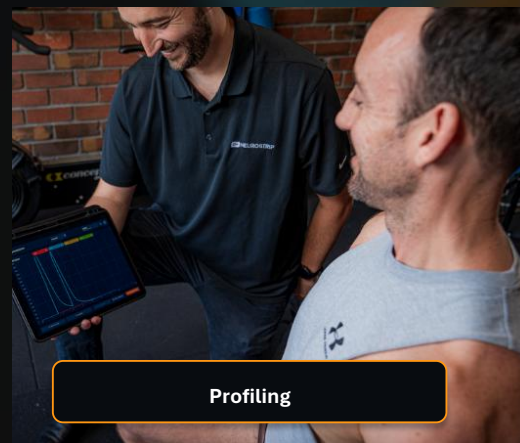
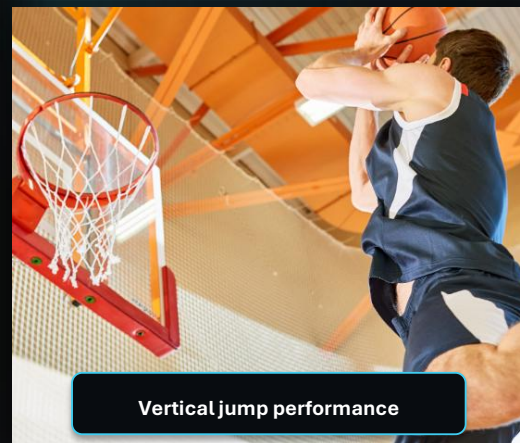
Athletes, teams, physio clinics, sports scientists, researchers and partners.

WHAT CBL SELLS

NeuroStrip sensor + patch + app for live data, video review, reports and exports.

WHY IT MATTERS

Performance profiling, symmetry/fatigue, rehab progress and return-to-play.



Sports & rehab product ladder: turning muscle activation into decisions.

CBL packages NeuroStrip hardware, patches and software into practical workflows for professional sports teams, clinicians and researchers.

Who they help?

People making training, therapy or return-to-play decisions without objective neuromuscular data.

- ATHLETES & TEAMS**
Performance, profiling and return-to-play
- PHYSIO & REHAB CLINICS**
Movement quality, activation and progress tracking
- SPORTS SCIENTISTS**
Lab-quality insights in field or gym settings
- RESEARCHERS & PARTNERS**
Clinical studies, wearables and remote monitoring

The common need: objective muscle data outside the lab.

What the products do

NeuroStrip

WIRELESS SEMG + SPATIAL SENSOR

4g wearable sensor records high-fidelity muscle activation and telemetry data without lab setup.

Best fit: performance, therapy, return-to-play and research.

NeuroStrip App

LIVE VIEWS, VIDEO + REPORTING

Streams data by BLE, supports multi-strip comparisons, session review, video capture, notations and exports.

Best fit: recruitment, symmetry and fatigue analysis.

NeuroStrip Patch

DIRECT-TO-SKIN ELECTRODE INTERFACE

Adhesive patch lets NeuroStrip be placed almost anywhere and capture clean signal before visible contraction.

Best fit: gyms, clinics and field environments.

Performance & rehab programs

PROFILING + RETURN-TO-PLAY WORKFLOWS

Structured programs use NeuroStrip data to guide neuromuscular training and track intervention response.

Best fit: athletes, teams and PT clinic workflows.

Large, under-instrumented markets for objective muscle data.

Sport, return-to-play and rehab decisions still rely heavily on subjective observation; NeuroStrip brings practical sEMG into gyms, clinics and field environments.

>\$2B

Sports performance & return-to-play addressable market

>\$2.2B

Rehabilitation addressable market*

>\$4.2B

Combined opportunity*

A\$5–50k

Target annual revenue per organisation

What the industry lacks

Live operant conditioning

Patients need real-time feedback on muscle activation so they can adjust effort, timing and recruitment during rehab — rather than after the session.

Return-to-play decisions

Teams need evidence on activation, symmetry, fatigue and compensation — but most decisions still combine observation, athlete feedback and periodic strength testing.

Rehab progress tracking

Clinicians need objective feedback between assessment points, especially where movement quality or muscle recruitment is hard to see externally.

Legacy EMG does not scale

Traditional EMG can be wired, specialist-led, noisy and impractical outside a lab — limiting use in clinics, gyms and live training environments.

Significant opportunity for Control Bionics to partner with organisations who already have distribution into sports and teams

Mountain Land Physical Therapy



Control Bionics continues to engage with Mountain Land Physical Therapy, a US rehabilitation and sports performance provider with approximately 70 clinics in the US. Mountain Land is active across rehabilitation and sports performance use cases, and Control Bionics is progressing a case study for its “Super Bridge” application.

“Super Bridge” is a prevention program designed for athletes of all sports above the age of 13 who want to improve their performance and reduce their risk of injury by using EMG biofeedback to firstly detect, then strengthen their muscular weaknesses. It is a 12-session program using the Control Bionics NeuroTech to work on the areas of concern, billed to their insurance with a specific biofeedback code. For the clinic, this means more revenue and more client sessions, as who would typically attend two to three sessions now attend all 12 with the new program offering. Some of the outcomes can be seen below:

\$US1,175–\$1,375

Revenue Per Client

3–9 inches

Improved Jump Height

Upto 15 inches

Increased Lateral Jump

Mountain Land case studies: measurable recovery with NeuroStrip

Three real-world examples show live sEMG feedback driving activation and functional gains.

CASE STUDY 1

Chronic ACL recovery

- A patient two years after ACL surgery still had pain, instability and difficulty with sport-specific movement, despite completing traditional rehab.
- NeuroStrip showed that the injured leg was not activating properly during jumping.
- With live feedback, the patient quickly improved muscle control, reduced pain and regained confidence in sport movement.

Measurable gains

- +9 inch single-leg hop
- Sprint 7.26s → 6.0s
- Knee Outcome Survey (KOS) 62 → 68

CASE STUDY 2

ACL + BFR acceleration

- An ACL patient had similar difficulty activating the right muscles during sport movements.
- NeuroStrip was used alongside blood-flow restriction training to help the patient see and improve muscle activation in real time.
- Within a few sessions, the patient improved jumping, sprinting and confidence, then transitioned to independent gym training.

Measurable gains

- +6 inch single-leg hop
- Sprint 6s → 5s
- KOS 77 → 84

CASE STUDY 3

Stroke rehabilitation

- A stroke patient had made limited progress after months of conventional therapy and remained wheelchair-bound.
- NeuroStrip helped the patient relearn how to activate the leg muscles needed for standing and walking.
- Over time, the patient progressed from assisted transfers to walking with support, then became an independent ambulator using a quad cane.

Measurable gains

- Full weight-bearing
- Walked 20 feet
- Independent quad-cane ambulator

Customer update: trials broadening across sport and rehab.

NeuroStrip is being assessed across elite teams, national institutes, rehabilitation networks and international sporting groups.

AUSTRALIA: SPORT TEAMS

- Sydney-based AFL team: 3-month return-to-play and player profiling trial
- Melbourne-based AFL team: 4-month return-to-play trial
- Queensland Rugby League team: 3-month return-to-play decision trial
- Validates NeuroStrip in elite athlete management and readiness decisions

AUSTRALIA: ORGANISATIONS

- Australian Institute of Sport: athlete rehabilitation trial
- Royal Rehab: 3-month clinical and at-home trial across a 50+ location network
- National governing body for a major winter sport: 3-month return-to-play trial
- Extends opportunity from elite sport into clinical rehabilitation pathways

INTERNATIONAL SPORTS

- Major international football club: Europe engagement pursuing sEMG use
- International Rugby Federation: mid-June onboarding for performance, profiling and return-to-play
- International Rugby League team: player readiness assessments
- Demonstrates interest beyond core US and Australian markets

Customers, trials and prospects separated clearly.

The conversion path is explicit: prove outcomes in pilots, then move the best opportunities into annual recurring contracts.

CURRENT / ACTIVE

- Mountain Land PT signed (70 sites)
- Stroke Lab Japan active deployment
- Ohio University profiling underway
- Utah Prep, SEDA, Nets on Fire and Hoop Hall programmes completed



TRIALS / PILOTS

- Australian Institute of Sport trial underway
- Bay State PT trial (160 sites)
- AFL clubs, sports institutes and AU sporting entities in pilot discussions
- Leading Australian rehab institutions in pilot phase



NEXT COMMERCIAL ACTION

- Finalise next five targeted sport groups for 3-month pilots
- Convert proof-of-concept into contracted revenue
- Princeton trial completed; conversion follow-up
- Appoint BD/Growth leads in Australia and the US



Japan – Stroke Lab



Control Bionics is working closely with Stroke Lab in Japan, a specialist neurological rehabilitation clinic dedicated to treating clients with complex neurological conditions.

A patient recovering from a serious brain bleed had been left with significant walking difficulties, repeated stumbling that made independent mobility unsafe and traditional rehabilitation approaches were struggling to pinpoint the exact muscle dysfunction driving the problem. By introducing the Control Bionics NeuroTech, clinicians were able to visualise the over-contraction of the patient’s right gastrocnemius in real time, giving them the precision to target the root cause of the instability and adapt treatment as progress was made. The outcomes can be seen below:

163.9→99.8µV

Gastrocnemius Peak Activity

Reduced

39%

Reduction in Muscle

Overactivity

0 Falls

Post-Intervention Walking

Round Trip

Apple BCI, research and data.

The same neural-signal platform supports technology partnerships, clinical research, APIs and data products.



Longitudinal neuromuscular data

A differentiator for research, pharma, sports and AI models



Devices as platform endpoints

Hardware generates data and unlocks software workflows

Apple BCI relationship

CBL's devices can serve as the neural / motion-based input layer for Apple-device accessibility workflows. This strengthens the core AAC channel and gives distribution partners a clearer Apple-device use case.



Research network

Ohio University, Northeastern University, Boston College, University of Sydney, Mayo Clinic and Barrow Neurological Institute create validation and application discovery pathways.

Data and API layer

As installed devices scale, high-fidelity longitudinal data can be packaged for research, clinical validation, sports performance and third-party integrations.

Open the ecosystem through Apple BCI and APIs.

Clinical research and software integrations create new routes to market from the same hardware and data foundation.

Indicative near-term roadmap



Apple BCI release

Finalise Apple BCI integration for AAC distribution partner rollout.

Clinical partnerships

Announce public clinical and research collaborations.

Software APIs

Enable third-party integrations into CBL's signal and data platform.

Hackathon

Identify consumer, medical and commercial applications for the platform.

Data products

Build towards research, pharma and sports data licensing opportunities.

Clear economics by pillar.

Each pillar now states who pays, what they buy and how revenue scales.

Personal use only

1 Assistive Communication

Customer / payer

Funded AAC customers via distributors

Product / offer

NeuroNode + iOS tablets

Pricing / model

US\$4,300 NeuroNode HCPCS; ~US\$3,000 tablet add-on

Scale lever

Wholesale NeuroNode EBITDA margin 80%+; distributor reps scale volume

2 Sports & Rehabilitation

Customer / payer

Sports teams, colleges and rehab networks

Product / offer

NeuroStrip hardware + analytics app

Pricing / model

A\$5–50k p.a. per organisation initially

Scale lever

Pilots convert to annual software / subscription contracts; gross margin cited at ~78%

3 Platform & Data

Customer / payer

Research, clinical, software and medical-tech partners

Product / offer

Apple BCI, APIs, data and research programmes

Pricing / model

A\$30–100k p.a. per organisation initially

Scale lever

Capital-light option value; margin profile matures with contracts and datasets

Revenue and cash receipts

Historic revenue and customer cash receipts for the Assistive Communication division only

A\$6.1m

FY25 revenue, +15% YoY

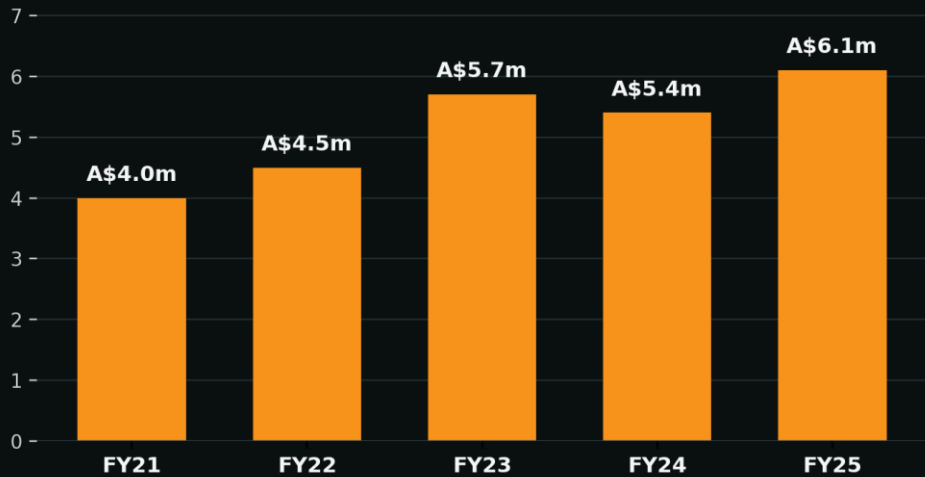
A\$5.7m

FY25 customer cash receipts,
+8% YoY

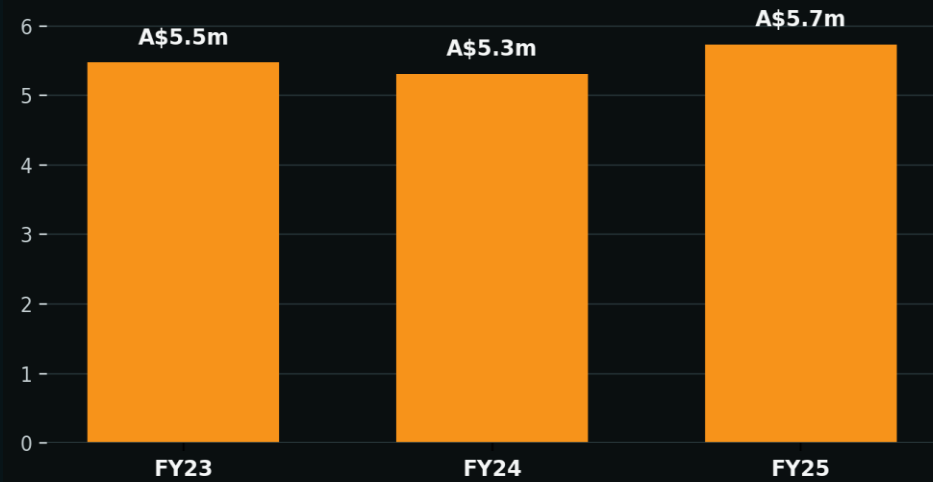
~A\$1.2m

Australian pipeline awaiting
NDIS approval

Historical revenue (A\$m)



Annual cash receipts (A\$m)



LEADERSHIP

Experienced operators. Deep domain expertise.

A compact team with AAC market experience, global healthcare relationships and decades of EMG know-how.

Leadership team



Jeremy Steele

CEO & Managing Director

15+ years in global healthcare; successful investor and operator for more than 25 years.



Shannon Boothroyd

CFO

20+ years in finance across ASX-listed and technology companies. CA (Aus) + CPA (US).



James Schorey

CTO (since 2005)

35 years experience; recognised global leader in EMG applications.



Todd Tyler

VP North America

20+ years in healthcare; former AAC competitor executive with deep market knowledge.

Board of Directors



Stephen Rix

Chair



Prof Rob Heard



Damian Lismore



Prof Nicholas Opie

Prof Nicholas Opie joins CBL's Board and advisory team.

Globally recognised neural-interface founder adds technical, clinical and commercialisation depth as CBL expands its platform.



NON-EXEC DIRECTOR

Professor Nicholas Opie

Non-Executive Director & Strategic Advisor,
appointed 14 May 2026

1

Neural-interface leader

Co-founder / director of Synchron; recognised expert in brain-computer interfaces and endovascular bionics.

2

Medical-device translation

Led development of Stentrode™ and has translated advanced neurotechnology from research into clinical use.

3

Broader platform relevance

Supports CBL as it extends AAC into sports, rehabilitation and broader neurotechnology applications.

Track record

- Head of the Vascular Bionics Laboratory at the University of Melbourne
- Founding director of Ultra Bionics
- 60+ peer-reviewed publications across neural-interface fields

Why it matters for CBL

- Strengthens technical, clinical and strategic capability
- Supports platform roadmap, clinical development and use-case expansion
- Adds globally recognised credibility to the Australian neurotechnology story

Validated platform. Multiple revenue paths.

Near-term catalysts across distribution, pilot conversion, Apple BCI and data partnerships.

CBL has already solved reliable non-invasive muscle-signal capture in the hardest clinical environment; the same platform can now be sold through partners, subscriptions and data/API relationships.

1

Validated technology moat

25+ years R&D, patents + provisionals, FDA/TGA/CE registered devices and field deployment today.

2

Partner-led AAC scale

Major AAC distributors give CBL access to a salesforce far larger than its internal team.

3

Recurring neurotech revenue

Sports and rehab customers can buy hardware and pay monthly application/software subscriptions.

4

Strategic data layer

Apple BCI, APIs and high-fidelity neuromuscular datasets provide long-term option value.

EMPOWERMENT THROUGH
PROVEN NEUROTECHNOLOGY

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