



ARGENICA THERAPEUTICS

**SHAREHOLDER
PRESENTATION
ASX: AGN**

ANNUAL GENERAL MEETING
16 NOVEMBER 2021



DISCLAIMER

This presentation has been prepared by Argenica Therapeutics Limited and its related entities (the “Company”) and is not an offer document. It does not purport to contain all the information that a prospective investor may require in connection with any potential investment in the Company. You should not treat the contents of this presentation, or any information provided in connection with it, as financial advice, financial product advice or advice relating to legal, taxation or investment matters.

No representation or warranty (whether express or implied) is made by the Company or any of its officers, advisers, agents or employees as to the accuracy, completeness or reasonableness of the information, statements, opinions or matters (express or implied) arising out of, contained in or derived from this presentation or provided in connection with it, or any omission from this presentation, nor as to the attainability of any estimates, forecasts or projections set out in this presentation.

This presentation is provided expressly on the basis that you will carry out your own independent inquiries into the matters contained in the presentation and make your own independent decisions about the affairs, financial position or prospects of the Company. The Company reserves the right to update, amend or supplement the information at any time in its absolute discretion (without incurring any obligation to do so).

Neither the Company, nor its related bodies corporate, officers, their advisers, agents and employees accept any responsibility or liability to you or to any other person or entity arising out of this presentation including pursuant to the general law (whether for negligence, under statute or otherwise), or under the Australian Securities and Investments Commission Act 2001, Corporations Act 2001, Competition and Consumer Act 2010 or any corresponding provision of any Australian state or territory legislation (or the law of any similar legislation in any other jurisdiction), or similar provision under any applicable law. Any such responsibility or liability is, to the maximum extent permitted by law, expressly disclaimed and excluded.

Nothing in this material should be construed as either an offer to sell or a solicitation of an offer to buy or sell securities. It does not include all available information and should not be used in isolation as a basis to invest in the Company.

***Future matters:** this presentation contains reference to certain intentions, expectations, future plans, strategy and prospects of the Company. Those intentions, expectations, future plans, strategy and prospects may or may not be achieved. They are based on certain assumptions, which may not be met or on which views may differ and may be affected by known and unknown risks. The performance and operations of the Company may be influenced by a number of factors, many of which are outside the control of the Company. No representation or warranty, express or implied, is made by the Company, or any of its directors, officers, employees, advisers or agents that any intentions, expectations or plans will be achieved either totally or partially or that any particular rate of return will be achieved. Given the risks and uncertainties that may cause the Company’s actual future results, performance or achievements to be materially different from those expected, planned or intended, recipients should not place undue reliance on these intentions, expectations, future plans, strategy and prospects. The Company does not warrant or represent that the actual results, performance or achievements will be as expected, planned or intended.*



COMPANY SNAPSHOT

OUR VISION

Commercialise “best in class” novel neuroprotective therapeutics to reduce brain cell death following stroke and other brain injuries.

PROGRESS LEAD DRUG CANDIDATE

ARG-007

Neuroprotective peptide that is progressing to Phase 1 clinical trials in healthy volunteers. Continuing to explore potential in a number of indications of brain injury.

TIER 1 PARTNERS



STRONG IP

GRANTED PATENTS

Granted in the EU, Japan and China, and a US national filing in progress.

FREE OF ENCUMBRANCES

IP 100% owned by Argenica and free of royalties or other encumbrances.



CAPITAL STRUCTURE

Total Shares on issue	73,172,250
Shares subject to escrow for 12 months ¹	3,322,500
Shares subject to escrow for 24 months ²	22,625,752
Options on issue (escrow for 24 months) ^{2 & 3}	8,300,000
Options on issue ⁴	800,000
Cash Balance ⁵	Circa \$5.9m
Market Capitalisation @ \$0.495 ⁶	Circa \$36.2m
Enterprise Value (EV) @ \$0.495 ⁶	Circa \$30.3m

1. 12 months from the date of issue of the securities | 1.6m – 17th December 2021 | 1.7m – 31st December 2021

2. 24 months from the date of commencement of Official Quotation on ASX – 11th June 2023

3. Option Terms – Exercise price \$0.30, expiry 30 Sept 2024

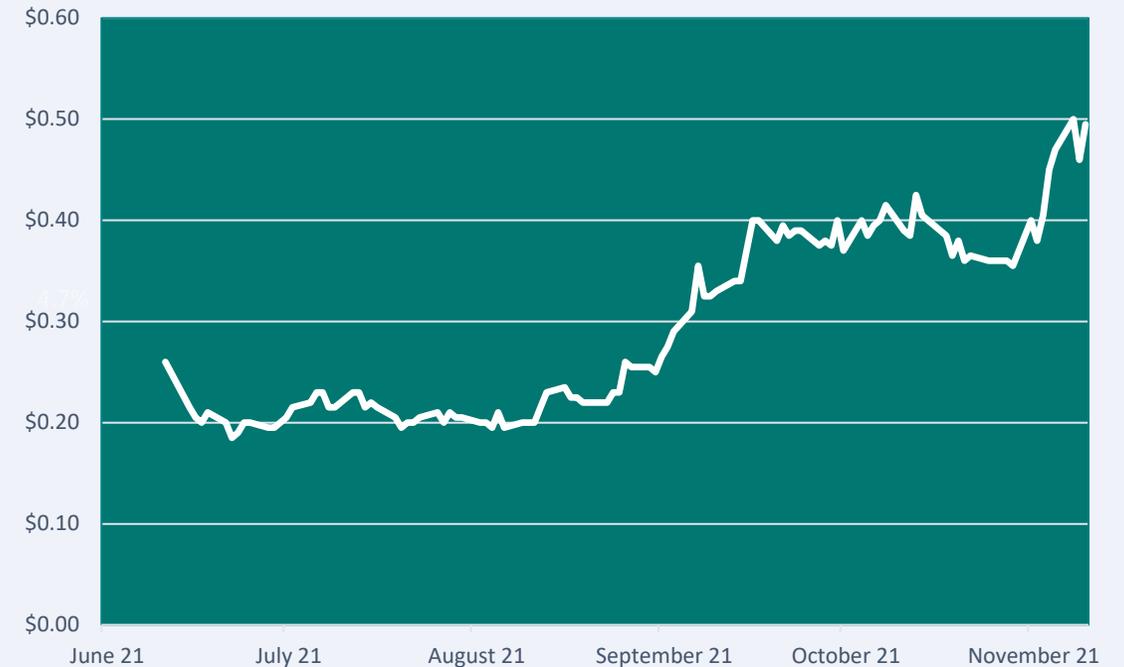
4. Option Terms – Exercise price \$0.30, expiry 6 August 2023.

5. As @ 30 September 2021

6. Closing price as @ 10th November 2021

7. Percentages are estimates only and subject to slight variation

SHARE PRICE MOVEMENT



ACHIEVEMENTS SINCE LISTING

Highly encouraging results from pilot pre-clinical pharmacokinetics study

**NO ADVERSE EFFECTS
WERE OBSERVED**

1 JUL 2021

A\$290,000 grant secured to advance pre-clinical research of ARG-007 in preparation for Phase 1 trials

21 JUL 2021

Argencia partners with Linear for Phase 1 clinical trial, initiates trial pre-activities

30 SEP 2021

12 JUL 2021

Study showed ARG-007 **does not** degrade when co-administered with ischemic stroke therapeutics

14 SEP 2021

Scaled up batches of ARG-007 manufactured to Good Manufacturing Practice (GMP) requirements

03 NOV 2021

Positive pre-clinical data shows ARG-007 offers neuroprotection in **HIE**



POTENTIAL BENEFITS OF ARG-007

INTRAVENOUS INJECTION

Simple injection for paramedics to use in emergency stroke scenarios

ALLOWS MORE TIME

Extends the treatment window for stroke patients who have to travel significant distance for treatment

REDUCES BRAIN INJURY

Protects the brain against the damaging effects of stroke

IMPROVES LIVES

Reduces special care requirements and intensive rehabilitation time. Increased likelihood of preserving functionality.

NON-DISRUPTIVE

Does not require any changes to current stroke **treatment protocols**

LOWERS COSTS

Reduces hospitalisation time and post-care hospital costs. Puts less pressure on the healthcare system.





ENCOURAGING RESULTS TO DATE



REDUCES BRAIN TISSUE DEATH

ARG-007 showed a **67% reduction in brain tissue death** (infarct volume) for at least 28 days after stroke¹.



POTENTIAL TO ADMINISTER IN THE FIELD

Pre-clinical studies showed ARG-007 does not exacerbate bleeding in hemorrhagic stroke model, meaning it could be **safe to administer in the field** by first responders².



SAFE WITH NO ADVERSE EFFECTS

No adverse effects were observed in a PK animal study, indicating that ARG-007 is potentially safe and well-tolerated at the relevant doses³.

OFFERS NEUROPROTECTION EVEN WHEN CO-ADMINISTERED WITH CLOT DISSOLVING DRUGS ⁴

These findings are preliminary in nature. A larger dataset will be required for clinical validation.

[1] Preclinical animal stroke model

[2] Preclinical study

[3] ASX Announcement 'Argenica completes pilot pre-clinical pharmacokinetics study' 01 July 2021

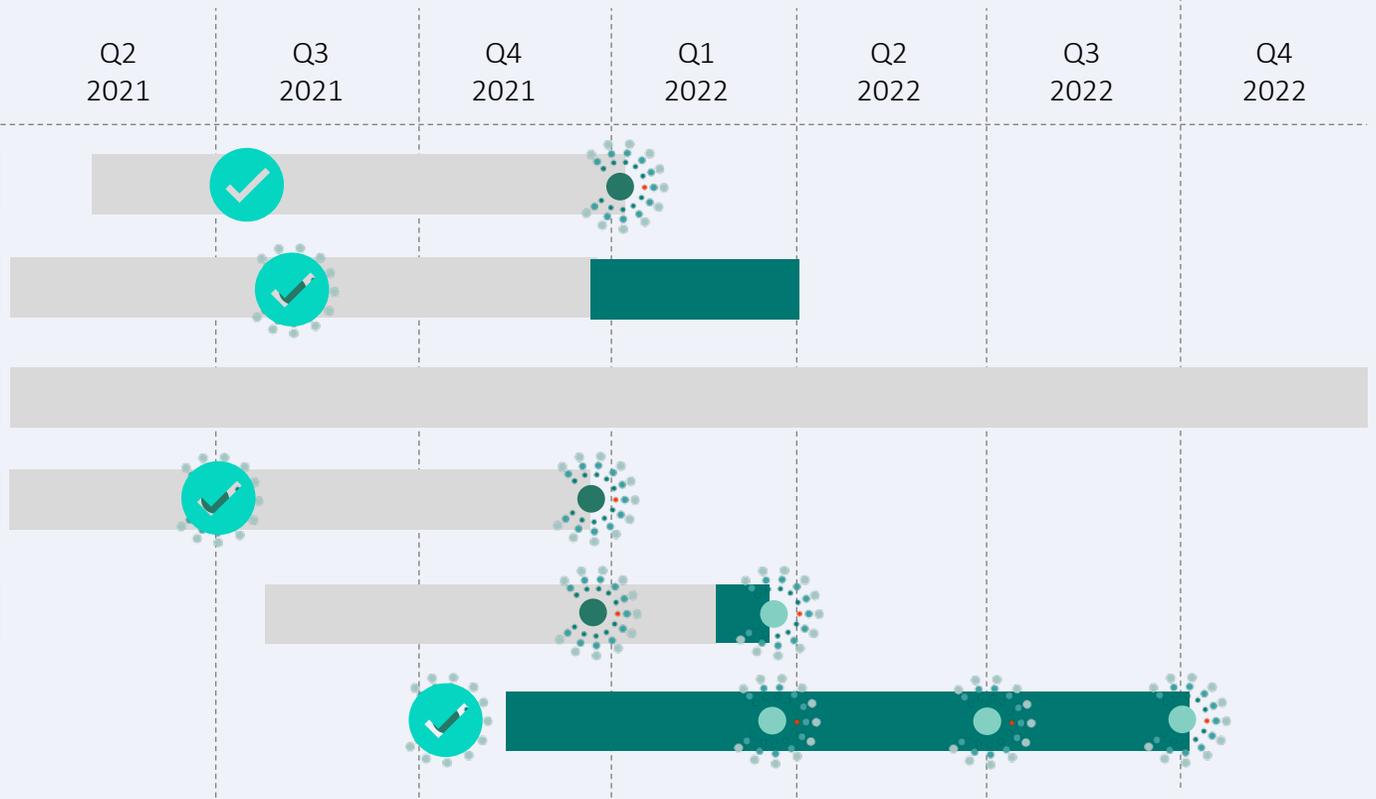
[4] ASX Announcement 'Study shows arg-007 does not degrade when co-administered with ischemic stroke therapeutics' 12 July 2021



ARG-007 DEVELOPMENT ROADMAP



- Contra-indication Assessment
- GMP Manufacturing
- Formulation & Stability
- Pharmacokinetics
- Safety & Toxicology
- Phase 1 Clinical Trial**



Funded pre-IPO raise
 To be funded from IPO
 Key progress milestones



NEAR-TERM CLINICAL TRIAL CATALYSIS



FINAL PHARMACOKINETIC STUDIES

ANIMAL STUDY

Determines how **ARG-007** is absorbed, distributed, metabolised, and excreted by the body, and is essential for establishing dosing regimes for the Phase 1 clinical trial.

Q4 CY21



SAFETY & TOXICOLOGY STUDIES

ANIMAL STUDY

Characterise the safety profile of **ARG-007** by identifying its impact on organ structure and / or functionality at a range of doses, including maximum tolerated dose.

Q4 CY21 – Q1 CY22

PRE-STUDY ACTIVITIES

Completion of preliminary study activities, including clinical site management setup, preparation of ethics submission and healthy volunteer patient recruitment.

Q4 CY21 – Q1 CY22



PHASE 1 CLINICAL TRIAL

IN-HUMAN STUDY

Confirmation of safety, such as adverse side effects, in a small number of healthy persons.

TRIAL INITIATED – Q1 CY22



PROPOSED TRIAL DESIGN*

PARTICIPANTS

4 cohorts, with each cohort receiving a different dose of **ARG-007** (8 participants in each cohort, 2 placebo and 6 receiving **ARG-007**).

LOCATION

Single site study conducted at the Linear Clinical Research facility in Western Australia.

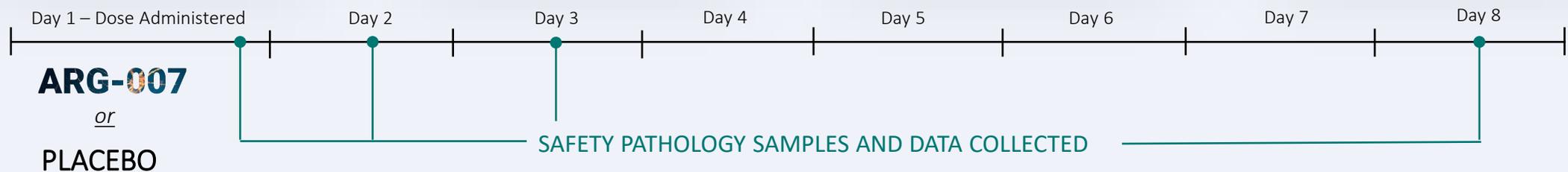
DURATION

Estimated 6 months, with preliminary findings expected following completion of volunteer dosing.

DESIGN

Double-blind, randomised study where participants either receive a dose of **ARG-007** or a placebo.

PROCEDURE OUTLINE FOR EACH PARTICIPANT



**the trial design is subject to approval by a Human Research Ethics Committee (HREC). Trial design documentation and preclinical safety and toxicology data will be submitted to a HREC in Q1 CY22.*



PRIMARY OBJECTIVES OF PHASE 1

1. IMPROVE THE **UNDERSTANDING** OF HOW **ARG-007** EFFECTS THE BODY
2. EVALUATE THE **SAFETY OF ARG-007** WHEN ADMINISTERED
3. DETERMINE THE **IDEAL SAFE DOSAGE**
4. IDENTIFY ANY POSSIBLE **ADVERSE REACTIONS**



ADVANCING TO PHASE 2 STUDIES



Data collected from the Phase 1 clinical trial will be critical to progress into Phase 2 trials, where **ARG-007** will be administered to stroke patients.



While stroke is the current corporate and commercial focus, safety data from the Phase 1 clinical trial can potentially be used to move directly into other Phase 2 trials in other types of brain injury, including;

- **Hypoxic ischemic encephalopathy (HIE)** - A type of brain dysfunction that occurs when the brain doesn't receive enough oxygen or blood flow for a period of time.
- **Traumatic brain injury (TBI) & concussion** - An injury resulting from a violent blow or jolt to the head or body.
- **Surgically induced stroke** – including strokes sustained during endovascular aneurysm repair and transcatheter aortic valve implantation.



CREDENTIALLED & EXPERIENCED TEAM



Geoff Pocock
Non-Executive Chairman

- 20 years' experience in commercialisation of emerging technologies and capital markets
- Non-Executive Director of EMVision Medical Devices Ltd (ASX:EMV)
- Co-Founder / Former Managing Director of Hazer Group (ASX: HZR)
- Former Executive Director, Osteopore Ltd (ASX:OSX)



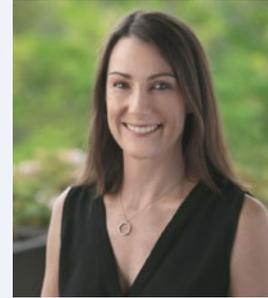
Dr Samantha South
Executive Director

- Extensive background in CNS medical research at Weill Medical College at Cornell University (NY), The University of Queensland and The Garvan Institute
- 10 years of Director experience at multiple companies
- Over 15 years' experience in preclinical CRO and technology transfer in medtech / biotech sector, at UQ, QUT and UWA.



Emma Waldon
Company Secretary

- Experienced Company Secretary with ASX listed and private companies
- Over 18 years' corporate advisory, capital markets and corporate governance experience
- Current co-sec of medical device developer EMVision (ASX: EMV) and previous co-sec of Hazer Group (ASX: HZR)



Dr Liz Dallimore
CEO

- Over 20 years' experience in R&D, technology commercialisation and management consulting, including at KPMG, EY and PWC
- Extensive background in stroke and spinal cord regeneration research at the Australian Neuromuscular Research Institute, UWA and Oxford University
- PhD in Neuroscience (UWA) and an MBA (AGSM)



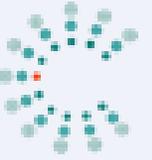
Liddy McCall
Non-Executive Director

- Over 25 years' experience of senior Board and Management roles and has a strong history of success with early-stage Biotechnology companies
- Co-founded 3 biotechnology companies which have successfully achieved 3 FDA drug registrations and 1 FDA/CE Mark medical device approval
- Co-founder of iCeutica Inc group (acquired in 2011 achieving a ten-fold uplift on the valuation) and Dimerix Limited (ASX:DXB)

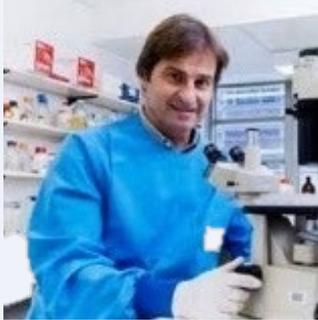


Terry Budge
Non-Executive Director

- 25 years with National Australia Bank in senior executive roles before serving as managing Director of Bankwest from 1997 to 2004
- Previously a member of the Fundraising Committee of the Perron Institute, and is currently an independent director for Westoz Investment Company (ASX:WIC)



LEADING RESEARCH & CLINICAL TEAM



Prof. Bruno Meloni
CSO & Research Lead

Head of Stroke Laboratory Research at UWA and the Perron Institute. Professor Meloni has over 25 years experience as a research scientist, the last 20 in the field of stroke/cerebral ischaemia. Research in the stroke/cerebral ischaemia field has focused on understanding the mechanisms associated with ischaemic brain injury, the identification of potential neuroprotective targets and the development of new therapies. A/Prof Meloni has experience with designing preclinical stroke trials, and the use of peptides as neuroprotective agents.



Geoffrey Donnan
Member - CAC

Professor of Neurology at The University of Melbourne and former Director of The Florey Institute of Neuroscience and Mental Health. His research interest is clinical stroke management. He was co-founder, with Professor Stephen Davis, of the Australian Stroke Trials Network (ASTN) within which there have been conducted numerous investigator driven and other stroke trials. He was Editor-in-Chief of the International Journal of Stroke and is Past President of the World Stroke Organization.



Dr David Blacker
Chairman - CAC

Acute stroke clinician/neurologist who has previous experience initiating neuroprotection clinical stroke trials in Western Australia and being the local Principal Investigator of a number of national and international acute and secondary prevention stroke studies. Prof Blacker is the Perron Institute Medical Director and consultant neurologist and stroke physician.



Paul Bailey
Member - CAC

Medical Director for St John Ambulance Western Australia. Paul's research focus has been in the areas of out of hospital cardiac arrest, anaphylaxis, emergency department systems and trauma - with 29 papers published in the scientific literature since 2015. Paul and his team are active participants in the WA Stroke Advisory Group - which has transformed the clinical approach to stroke patients in the prehospital environment in WA.



Prof. Neville Knuckey
Clinical Lead

Head of Stroke Research at the Perron Institute. Professor Knuckey is a neurosurgeon, whose interest for medical research began in the United States over 20 years ago. Prof Knuckey's main area of expertise is the development and use of stroke, global cerebral ischaemia and more recently perinatal hypoxia and traumatic brain injury models to explore neuronal ischaemic damaging events, and for the assessment of potential neuroprotective therapies.



Tim Phillips
Member - CAC

Dr Tim Phillips is an Interventional Neuroradiologist with 15 years' experience, currently working at the Neurological Intervention and Imaging Service of Western Australia (NIIS WA) and the Perth Children's Hospital. Prior to returning to Perth he undertook post-specialist fellowship training at the Royal Melbourne Hospital, The Royal London Hospital, Queens Hospital Romford, The National Hospital for Neurology and Neurosurgery, and Great Ormond Street Hospital in London.



INVESTMENT HIGHLIGHTS

1# CLEAR PATHWAY TO TRIALS

Clear clinical pathway and robust capital position to execute Phase 1 clinical trials.

2# UNMET CLINICAL NEED

There is an urgent unmet need and priority to search for widely applicable and effective neuroprotective solution.

3# PRE-CLINICAL DATA

Positive pre-clinical results provide encouraging dataset leading into in-human trials.

4# EXCEPTIONAL TEAM

An exceptional team with expertise in drug development commercialisation and capital markets.

5# NEAR TERM CATALYSIS

Value enhancing milestones expected in the near term including, results required before the beginning of Phase 1 trials.



ARGENICA THERAPEUTICS

For further information please contact:

Dr Liz Dallimore

CEO

E: info@argenica.com.au