Advancing Neuroscience Transforming Lives

Neurotech International

Dr Anthony Filippis
Chief Executive Officer & Managing Director

Presentation to 2025 Annual General Meeting

Melbourne, VIC
20 November 2025

Forward-Looking Statements

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Year in review

Key progress in CY2025 to drive growth in CY2026		
February 2025 March 2025 October 2025	**Regulatory progress in US and Europe** • Positive opinion on OMPD for NTI164 in Europe • European Commission grants NTI164 Orphan Drug Designation for Rett syndrome • US FDA Rare Paediatric Disease Designation in Rett syndrome	
February – November 2025	**Strong Investor Relations and awareness campaign to build profile of company and its pipeline** • Investor and partnering outreach and attendance, presentations at industry events and meetings	
May 2025 June 2025	**Non-clinical data for NTI164** • Completion of 28-day GLP toxicology study • Completion of first-in-human PK study	
June 2025	**Recruitment of highly-credentialed clinician** • Bonni Goldstein, MD joins as Chief Medical Advisor (USA)	
June 2025	**Attendance at international conferences** • International Rett syndrome Foundation annual conference, Boston USA • BIO International Convention (partnering conference), Boston USA	
March 2025 June 2025	**Publication of clinical data in peer-reviewed journals** • Phase I/II autism spectrum disorder clinical trial results published • Phase I/II Rett syndrome clinical trial results published	
September 2025	**Initiate NTI164 Authorised Prescriber program** • Provides a pathway for access and collection of real-word data	
November 2025	**R&D Tax Incentive** • Received refundable tax offset of $4.73m	

Targeting high impact indications where there is a clear unmet market need

autism spectrum disorder (ASD)

- 1 in 31 children (US)
- Boys 4x more likely to be diagnosed
- Global ~62M[1]

- High unmet need for safe, effective treatments for core symptoms
- Current market ~US$3B[2] and growing
- Growing recognition by regulators

Rett syndrome

- Rare disease ~1 in 10,000-15,000 girls
- ~6,000-9,000 in US alone
- Global ~350,000[3]

- High value orphan indication
- One FDA-approved drug (Daybue) with US$375k/year pricing[4]
- Net product sales US$348M[5]
- Accelerated regulatory pathways

PANS/PANDAS

- Emerging diagnosis
- ~1 in 200 in US alone
- Global cases not well defined

- No approved treatments
- Often misdiagnosed; high severity and family impact
- Fast-track potential if recognised

[1] The global epidemiology and health burden of the autism spectrum: findings from the Global Burden of Disease Study 2021
[2] Research and Markets Autism Spectrum Disorders Market Report 2025
[3] Rett Syndrome: Crossing the Threshold to Clinical Translation
[4] Neuren Pharmaceuticals 2022 Annual Report
[5] Acadia Pharmaceuticals Full Year 2024 financial results 26 Feb 2025

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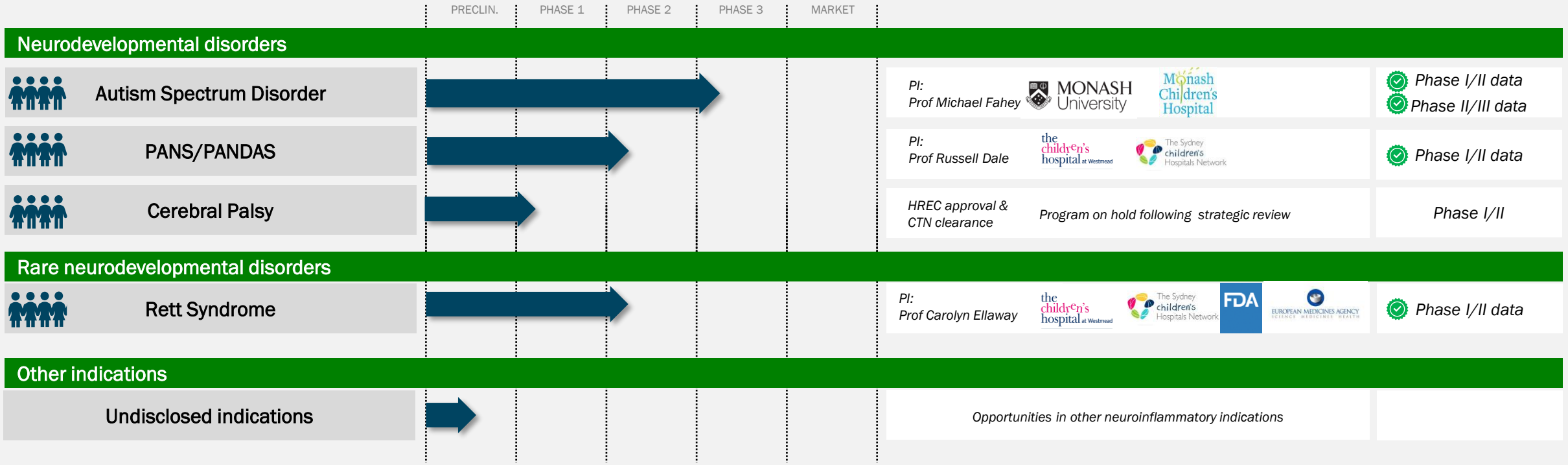
Neurotech's pipeline comprises clinical programs in neurodevelopmental disorders of children where neuroinflammation is involved

NTI164
Targets neuroinflammation



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What is NTI164?

1. Disease-modifying and transformative therapy in paediatric neurodevelopmental disorders

2. Full-spectrum, low-THC (<0.3%) cannabinoid formulation

3. Rich in CBDA, with minor cannabinoids (including CBD)

4. Orally administered, pharmaceutical-grade oil

5. Unique anti-inflammatory, neuroprotective, and epigenetic effects

6. Patents cover composition of matter, methods of use and formulations

7. Safe and effective in non-clinical and clinical studies

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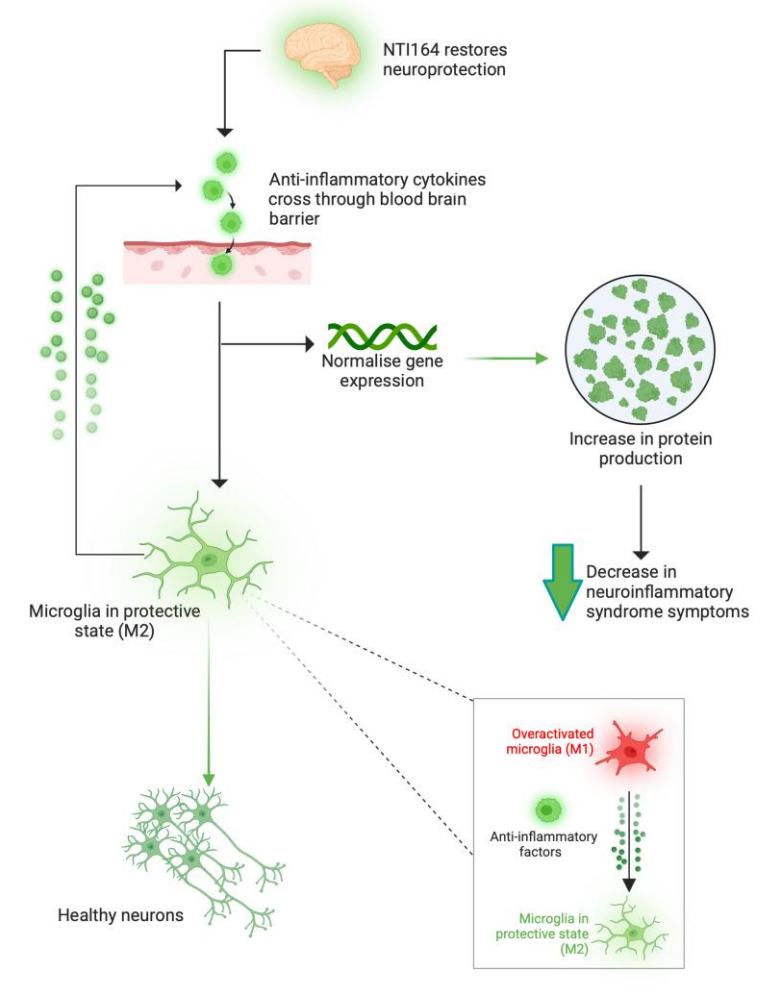
NTI164's mechanism of action is to reduce neuroinflammation



Inflammatory cytokines are down-regulated by NTI164 in *in vitro* models	
Cytokine	**% reduction**
iNOS	38%
COX2	62%
TNF-α	72%
IL-5	32%
IL-1β	47%
TGF-β	27%

NTI164 works on core neurological mechanisms:

- reduces neuroinflammation by suppressing pro-inflammatory cytokines
- enhances neuronal viability through modulation of microglial activity, promoting a shift from a pro-inflammatory (M1) to an anti-inflammatory (M2) protective state
- improves overall neuronal health, contributing to better cognitive and behavioural outcomes in neurodevelopmental disorders
- Overall, based on multi-omic and epigenetic studies, and cytokine assays, NTI164 reduces neuroinflammation, protects neurons, rebalances immune function, and resets gene regulation to restore healthy neurological activity

Biomolecules 2024 Nov 11;14(11):1434. doi: 10.3390/biom14111434. See ASX Release dated 12/11/2024.

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NTI164: Robust non-clinical safety and pharmacology profile

Non-clinical data summary

Category	Key Findings
Source & Composition	Full-spectrum Cannabis sativa extract, <0.3% THC, rich in CBDA + minor cannabinoids
Safety	Safe in animals (rat and dog) with no toxic effects at any dose (28-day study)
Toxicology	No signs of liver, brain, or reproductive toxicity (longer term chronic tox ongoing)
Genotoxicity & Immunotoxicity	No DNA damage or cancer risk in standard lab tests; no immunogenicity
Pharmacokinetics (PK)	Oral absorption confirmed; steady levels in bloodstream; no buildup over time
Mechanism of Action	Reduces brain inflammation and protects nerve cells in lab studies
Relevance	Supports use in long-term treatment of paediatric neurological conditions

Significance of non-clinical data

Category	Key Insights
Regulatory Readiness	Meets non-clinical safety standards for paediatric use; supports ongoing human trials; phase I human PK complete
Dosing Confidence	High NOAEL (100mg/kg/day) provides a wide therapeutic margin, meaning low risk of toxicity at clinical doses
Full CMC control	Batch-to-batch GMP manufacturing shown to be consistent; important for pharmaceutical registration
No Psychoactivity	<0.3% THC ensures no intoxicating effects, even at high doses
Botanical Drug Pathway	Complies with global botanical drug guidelines (e.g. FDA, EMA), aiding future registration efforts
Intellectual Property	Unique proprietary strain and formulation protected by IP

Biomolecules 2024 Nov 11;14(11):1434. doi: 10.3390/biom14111434
NTI164 shows excellent tolerability in key preclinical toxicology studies
Positive Human PK Study Results for NTI164

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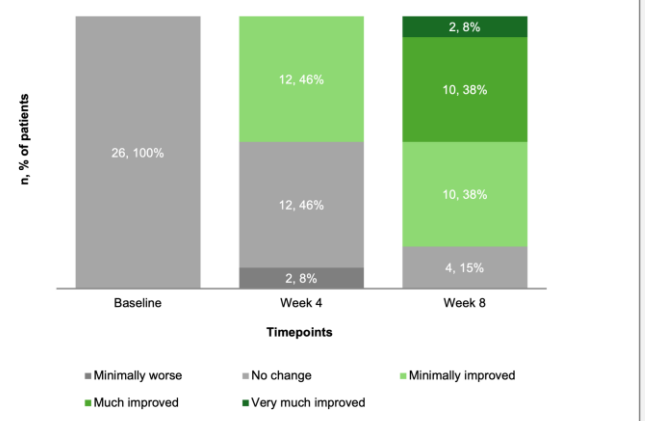
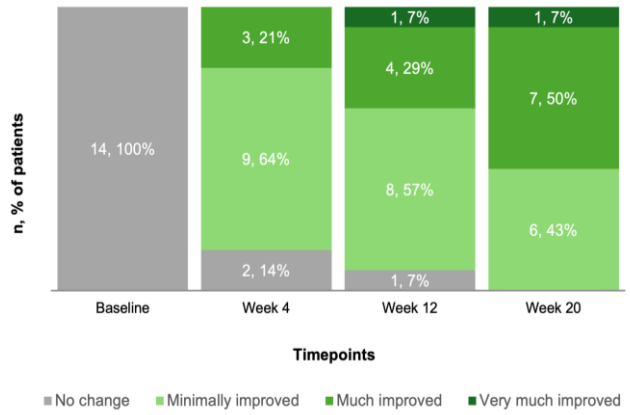
NTI164 has shown compelling evidence of clinical efficacy

Up titration over 4 weeks starting at 5mg/kg/day up to 20mg/kg/day MTD

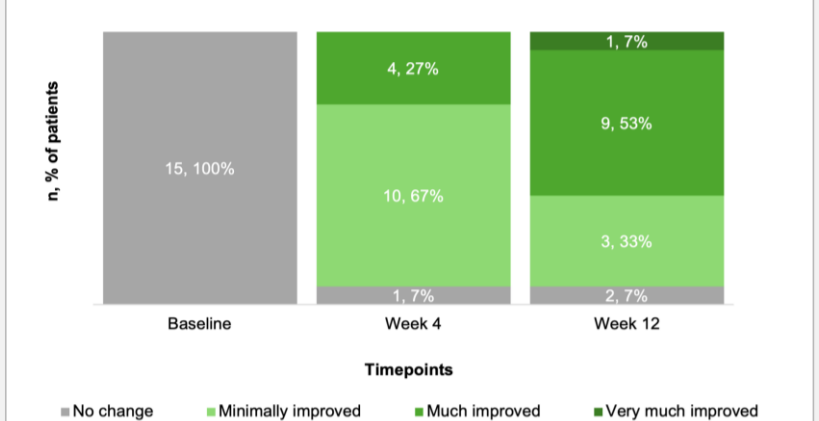
ASD HARMONY Phase 2/3 CGI-I Total Score+



Rett Syndrome Phase 1/2 CGI-I Total Score^#



PANS Phase 1/2 CGI-I Total Score#



Clinical trial results	ASD	Rett	PANS
CGI-I (improvement)	84%* ↑	93%* ↑	93%* ↑
CGI-S (severity of illness)	32%* ↓	24%* ↓	18%** ↓

+ Randomised, double-blind placebo-controlled HARMONY Phase II/III clinical trial completed; manuscript in preparation. Refer to ASX releases dated 17/04/24,17/06/2024, 10/07/2024 & 18/07/2024.
^ 4 core domains of interest (communication skills, mental alertness, socialisation/eye contact and anxiety). Refer to ASX Releases dated 6/05/24 and 31/07/24
*p<0.001; total number of patients with improvement and reduction in severity of illness. **p<0.001; total reduction in severity of illness
#Open label, single arm Phase I/II clinical trial completed. For PANS Phase 1/2 results – refer to ASX releases dated 6 October 2023, 21 February 2024 and 6 June 2024.

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Impressive data-points across all indications

Clinical Trial data					
Indication	**Key Outcome Measures**	**Results**	**Statistical Significance**	**Duration**	**Safety**
ASD[1]	Vineland-3	↑ 3.23 points (clinically meaningful)	$p = 0.024$	8 weeks	No serious AEs; mild GI complaints in few cases
	SRS-2 (Social Responsiveness Scale)	↓ 3.064 points (improved social behaviour)	$p = 0.028$	8 weeks	Excellent tolerability, no sedation or weight gain
	CGI-I (Clinical Global Impression-Improvement)	46% rated as *much improved* or *very much improved* 38% rated as *minimally improved*	$p < 0.001$	8 weeks	Sustained benefit over 2 years and 3 months
Rett Syndrome[2]	RSBQ (Rett Syndrome Behaviour Questionnaire)	↓ 10.533 points (improved mood, communication and autonomic stability)	$p < 0.001$	20 weeks	Well tolerated in severe disability group
	CGI-I – Total Score	50% *much improved* 43% *minimally improved*	$p < 0.001$	20 weeks	Good compliance, no sedation or worsening behaviours
	Socialisation and Eye Contact	43% *much improved* or *very much improved*	$p < 0.001$	20 weeks	Well tolerated despite complex comorbidities
PANS/PANDAS[3]	CY-BOCS (Children's Yale-Brown Obsessive-Compulsive Scale)	↓ 3.0 points (clinically significant reduction in OCD behaviours)	$p < 0.001$	12 weeks	No immunosuppressive events; no serious AEs
	RCADS-P (Revised Children's Anxiety and Depression Scale)	↓ 25.5 points (clinically significant reduction in anxiety and depression)	$p < 0.001$	12 weeks	Improved ability to reduce steroids in responders
	CGI-I	60% *much improved* or *very much improved* 33% *minimally improved*	$p < 0.001$	12 weeks	High adherence; no withdrawal due to AEs

[1] Phase II/III randomised, double blind, placebo-controlled data. Manuscript in preparation. Phase I/II data published: El-Sukkari, D., et al. Adv Complement Altern Med. 21 March 2025 *10.31031/ACAM.2025.08.000693*
Refer to ASX releases dated 17/04/24,17/06/2024, 10/07/2024 & 18/07/2024.
[2] Keating BA, et al. J Paediatr Child Health. 26 June 2025. https://doi.org/10.1111/jpc.70122. Refer to ASX Releases dated 6/05/24 and 31/07/24
[3] ASX announcement 31/07/2024; ASX announcement 06/10/2023 . Phase I/II data. Manuscript submitted. Awaiting review

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Clinical Trial data – Autism Spectrum Disorder Phase II/III (The HARMONY Study)

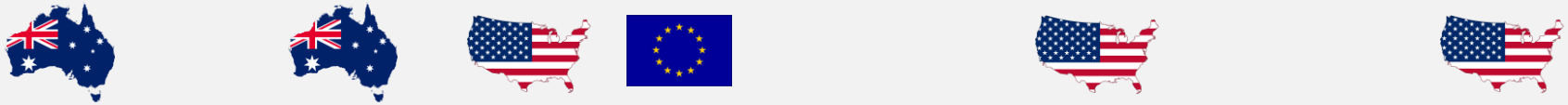
Assessment	Subdomain	Results	Statistical Significance	Duration	Safety
Vineland-3	Total score (Adaptive behaviour composite)	↑ 3.23 points (clinically meaningful improvement in Total score, active vs placebo)	p = 0.024	8 weeks	No SAEs, mild GI upset in a few patients which settled with either time or slight dose reduction. Excellent tolerability, no sedation or weight gain. Sustained benefit
	Communication (ability to understand and express oneself)		p = 0.047		
	Daily living skills (eating, dressing, self care managing money)		p = 0.021		
	Socialisation (interacting; understanding social prompts)		p = 0.048		
CGI	CGI–S measures severity of illness (1=not ill; 7=extremely ill)	32% improvement in disease severity	p < 0.001		
	CGI–I measures overall improvement over the course of treatment (1=very much improved; 7=very much worse)	46% rated as *much improved* or *very much improved*	p < 0.001		
SRS-2	Total score	↓ 3.064 points (improved social behavior from Total score, active vs placebo)	p = 0.028		
	Social awareness (ability to pick up on social cues)		No change		
	Social cognition (ability to interpret social cues once picked up)		p = 0.029		
	Social communication (both verbal and non-verbal)		No change		
	Social motivation (indicates motivation for social engagement)		No change		
	Restricted interest and repetitive behaviour		p = 0.026		
	Social communication and interaction		No change		
ADAMS	Total score	↓ 19.01 points (improvement in anxiety and depression-related symptoms, from Total score, active vs placebo)	p < 0.001		
	Manic/hyperactive behaviour		No change		
	Depressed mood		p = 0.004		
	Social avoidance		p = 0.008		
	General anxiety		p < 0.001		
	Obsessive/compulsive behaviour		p = 0.001		

Refer to ASX releases dated 17/04/2024, 18/07/2024

Pivot company towards regulatory & commercialisation path to grow shareholder value

Autism spectrum disorder	Authorised Prescriber program	TGA	IND submission

Rett syndrome	Authorised Prescriber program	TGA	Orphan Drug Designation	Rare Paediatric Disease Designation	IND submission



Longer term chronic toxicology program

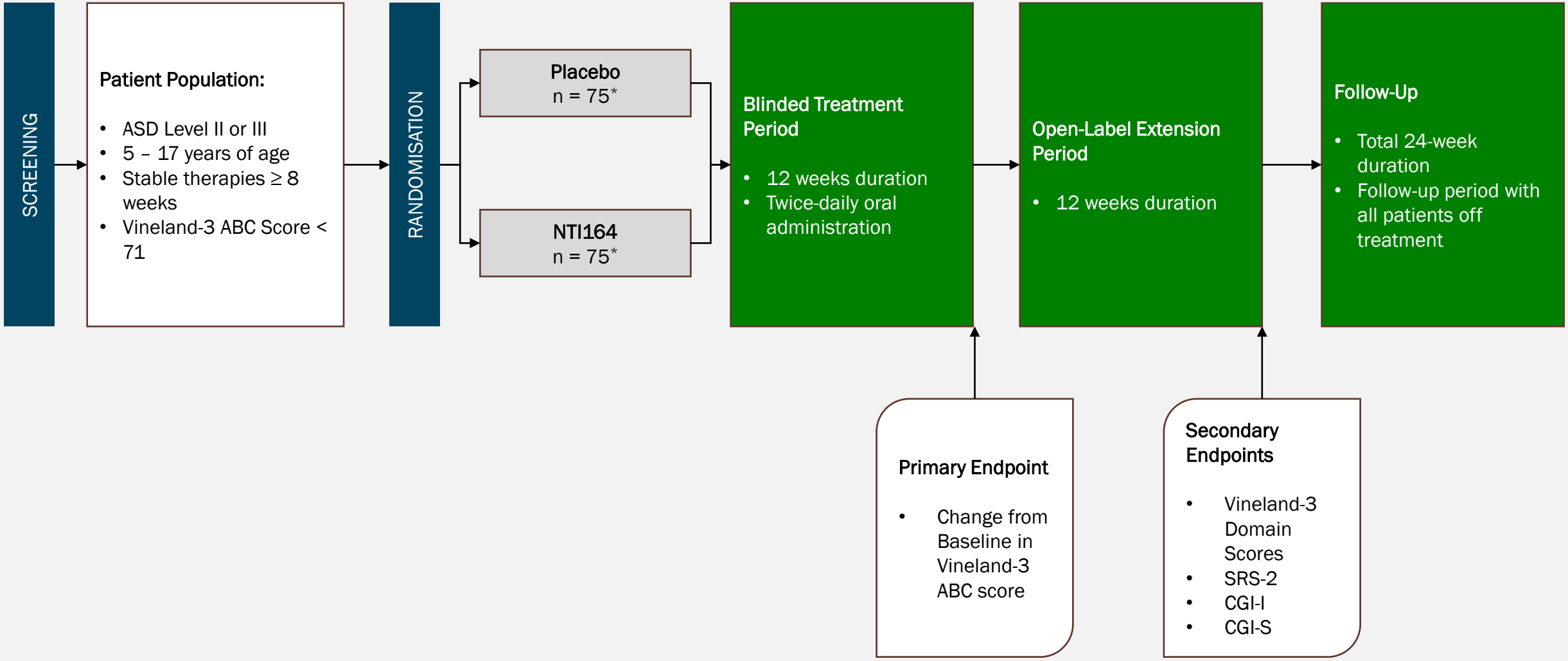
Pursue clinical development & partnering strategy

EU regulatory discussions will take place in CY2026

Authorised Prescriber (AP): Enabling NTI164 demand

- Commercial access and registration strategy
- Rationale for AP program was due to demand for NTI164
- Scalable access through NTI-selected Australian registered medical practitioners under supervised environment
- Authorised Prescribers can prescribe NTI164 to multiple patients
- Faster adoption
  - Patients gain access immediately once an AP is in place, accelerating uptake across key indications
- Generate real-world evidence
  - Expanding AP use generates valuable safety and effectiveness data to strengthen advocacy, regulatory, payer and partnering discussions
- Strategic platform
  - Establishes early adoption and market presence for NTI164 ahead of pivotal trials and potential registration

First Phase III registration clinical trial in ASD has been designed



*NTI planning, final numbers to be confirmed, statistical analysis pending

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The competitive landscape is not crowded with few approved therapies

	Early Development	Late Development	Approved
Autism Spectrum Disorder *Several off-label use of other neuropsychiatric drugs which have side effects*	Roche ALLOS PHARMA JAGUAR GENE THERAPY NeurXstem	Neurotech International NTI164 CUREMARK Jazz Pharmaceuticals Roche YAMO PHARMACEUTICALS abbvie	Johnson&Johnson Risperdal Bristol Myers Squibb ABILIFY (aripiprazole)
Rett Syndrome *Only a few Phase I/II clinical trials underway, with late development failure*	Neurotech International NTI164 NEUROGENE Taysha GENE THERAPIES	anavex LIFE SCIENCES Corp. Blarcamesine	ACADIA Daybue (trofinetide)
PANDAS/PANS *Emerging area, strong patient advocacy*	Neurotech International NTI164	octapharma Panzyga	No approved drugs

Not exhaustive list, NTI internal analysis, BioKnow ASD landscape Feb 2025

Risperdal firstly developed by Janssen-Cilag & Ablify by Otsuka

Originally approved for Schizophrenia, now used for irritability and aggression in children > 5-6 yrs with ASD

Daybue, the first treatment approved in Rett Syndrome. 61% of patients showed no improvement, with no data on which symptoms improve. Costs ~US$375K, selling US$348M* in 2024

In Jan 2024, Blarcamesine failed to meet primary endpoint in Phase II/III clinical trial

Antibiotics commonly used. IVIG (Panzyga) approved for other indications shown to ease symptoms

Neurotech ahead of the curve in recognising this devastating disorder

*Acadia Pharmaceuticals Full Year 2024 financial results 26 Feb 2025

Market comparators provide a strong precedent for NTI164

Market comparators		
Company	**Comparable pipeline**	**Market Cap**
Jazz Pharmaceuticals	Epidiolex® (cannabidiol) (cannabidiol, approved)	~ US$8.5B
ACADIA	Daybue™ (trofinetide) (approved)	~ US$3.7B
neuren pharmaceuticals	NNZ-2591 Phase 2 data including Angelman, Phelan McDermid, Pitt Hopkins	~AU$2.7B
anavex LIFE SCIENCES Corp.	Anavex 2-73 (Blarcamesine) Phase 2/3 for Rett Syndrome (failed Jan 2024) Phase 2/3 for ASD	~US$856M
HARMONY BIOSCIENCES	Zyn-002 (cannabidiol gel) Phase 3 for Fragile X Syndrome Phase 3 for epilepsy	~US$1.6B
Taysha GENE THERAPIES	Gene therapies for monogenic CNS diseases Phase1/2 for Rett Syndrome	~US$1.3B
NEUROGENE	Phase 1/2 for Rett Syndrome Phase 1/2 for Batten Disease	~US$319M
Neurotech International	Phase 2/3 data in ASD Phase 1/2 data in Rett Syndrome Phase 1/2 data in PANDAS/PANS	~AU$20M

Neurotech has compelling clinical data in ASD, Rett Syndrome and PANDAS/PANS and is valued at ~AU$20M

Non-exhaustive list

The company has commenced a broad outreach program to socialise and nurture potential future partners for NTI164

Typical Structure of Pharma Partnering Transactions

Upfront

- Payment(s) at the time signing a deal
- Usually not 'at risk'
- May include an equity component

Milestones

- Payment(s) during the partnership, linked to pre-defined development and commercial outcomes
- 'At risk' payments – not made if the relevant objectives are not met

Royalties

- A share of net sales (or sometimes profit) that flows from the licensee to the licensor
- Often the greatest source of economic value in the transaction
- Value depends on successful commercialisation of the product

Benchmarks for Phase II/III Neuro Disease Partnering Transactions (2016 – 2025 YTD) (*n*=64)

	Low	Median	High
Upfront Cash/Equity (US$M)	3	40	1000
Milestones (US$M)	120	467	1,900
Royalties	5%	9%	12%

The capability and commitment of a partner to develop and commercialise the product can be as crucial as the financial terms of the transaction

Source: DealForma; Neurotech analysis

Partnering opportunity for NTI164 is substantial, with benchmark transactions suggesting significant value potential

Licensing Transactions						
Licensee	**Licensor**	**Key Asset(s)**	**Key Indication(s)**	**Stage**	**Date**	**Deal Value (US$)**
NOVARTIS	PTC THERAPEUTICS	PTC518	Huntington's disease	Phase II	Nov 2024	$2.9B
ABVC BIOPHARMA	AI BTL BIOPHARMA	ABV-1504/1505	ADHD, depression	Phase II	Nov 2023	$667M
ACADIA	neuren pharmaceuticals	Trofinetide (xUS), NNZ-2591	Rett syndrome (ex-US)	Phase II	Jul 2023	$931M
sanofi	MAZE THERAPEUTICS	MZE-001	Pompe disease	Phase I	May 2023	$750M
ACADIA	saniona	SAN711	Essential tremor	Phase I	Nov 2024	$582M
NS Pharma	Capricor Therapeutics	CAP-1002 (United States)	Duchenne muscular dystrophy	Phase II	Jan 2022	$735M
STALICLA	NOVARTIS	Mavoglurant	Autism, mood disorders	Phase II	Jan 2023	$270M
M&A Transactions						
Acquirer	**Target**	**Key Asset(s)**	**Key Indication(s)**	**Stage**	**Date**	**Deal Value (US$)**
Pfizer	ARENA PHARMACEUTICALS	Olorinab (cannabinoid)	Immuno-inflammatory disorders	Phase II	Dec 2021	$6.7B
Jazz Pharmaceuticals	GW pharmaceuticals	Epidiolex (cannabinoid)	Dravet, Lennox Gastaut syndromes	Approved	Feb 2021	$7.2B
Biogen	REATA PHARMACEUTICALS	Skyclarus	FA, neurological disorders	Approved	Jul 2023	$7.3B

Source: Non-exhaustive list, DealForma, company press releases, Neurotech research

Bringing botanical medicines to market: it can be done

FDA-approved botanical prescription drugs					
Drug name	**Active ingredient(s)**	**Botanical source**	**Indication(s)**	**FDA approval**	**Notes**
Veregen®	Sinecatechins	*Camellia sinesis* (green tea)	Genital & perianal warts (HPV)	2006	First FDA approved botanical ointment; standardised polyphenol mixture[1]
Fulyzaq®/Mytesi®	Crofelemer	*Croton lecheri* (dragon's blood)	Non-infectious diarrhea in HIV/AIDS	2012	Rebranded as Mytesi® for chronic diarrhea management[1]
Epidiolex®	Cannabidiol (CBD)	*Cannabis sativa* (hemp)	Epilepsy (Lennox-Gastaut, Dravet syndromes)	2018	First FDA-approved cannabis-derived drug[2]

Several FDA-approved prescription drugs derived from plants					
Drug name	**Active ingredient(s)**	**Botanical source**	**Indication(s)**	**FDA approval**	**Notes**
Taxol®	Paclitexal	*Taxus brevifolia* (Pacific yew bark)	Breast, ovarian, lung cancer	1992	Blockbuster oncology drug, peak annual sales ~US$1.6B[3]
Taxotere®	Crofelemer	Semi-synthetic from Paclitexal precursor	Breast, prostate, lung cancer	1996	Successor to Taxol®

[1] U.S. Food and Drug Administration (2015). *Botanical Drug Review: Overview of FDA's Botanical Drug Development Program*. Presentation by Office of New Drugs, Center for Drug Evaluation and Research. Presented November 17, 2015.
[2] U.S. Food and Drug Administration (2018). *Drug Trials Snapshots: Epidiolex*. FDA Drug Trials Snapshot Series. Published 2018.
[3] Chemical & Engineering News (2000). Paclitaxel sales peaked at nearly $1.6 billion in 2000.

Neurotech Board and management bring extensive international experience in drug development, finance and commercialisation

Mr Mark Davies
Board Chair

Over 25 years experience in trading, finance, investment banking and providing corporate advice

Dr Anthony Filippis
Managing Director & CEO

Over 25 years of life sciences leadership experience, with a focus on BD, corporate strategy, and operations

Mr Max Johnston
Non-Executive Director

Over 40 years pharma leadership. Over 10 years as Chief Executive Officer of Johnson and Johnson Pacific. Sits on several ASX listed Boards

Dr Bonni Goldstein
Chief Medical Advisor

Over 25 years of clinical experience including 17 years exclusively on cannabinoid therapies

Mr Gerald Quigley
Non-Executive Director

Qualified Pharmacist. Leading media health commentator heard each week on television and radio stations across Australia

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Neurotech financial position and value drivers

Corporate Fundamentals	
Market Capitalisation:	~AU$ 20M
Primary Listing:	ASX: NTI
Shares on Issue:	1.05 Billion

Cash Position	
Cash Balance (30 Sep 25):	AU$ 1.775 Million
R&D refund received in Q2 FY26:	AU$4.7 Million

Shareholders	
Top 20	45.22%

Analyst Coverage
MST Financial

Huge Market Potential
Addressing high-growth neurological markets
Proven science and de-risked programs
Positive clinical results supporting efficacy & safety
Clear Commercial Pathway
Strong IP, regulatory and commercial path
Strong Leadership & Vision
Experienced team driving execution

Value-driving catalysts on the horizon

CY2026	
Human Research Ethics Committee approval for ASD registration-enabling study	1Q CY2026
Initiation of clinical sites	1Q CY2026
First patient enrolled in ASD clinical trial	Mid CY2026
Long-term chronic toxicology data	Mid CY2026
IND submission for ASD	1H CY2026
IND submission Rett syndrome	1H CY2026
ASD registration-enabling data readout	Late CY2026

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