

Redefining Treatment for Neurodevelopmental Disorders

Corporate Overview



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Chief Executive Officer & Managing Director

March 2026 | ASX: NTI



Forward-Looking Statements

This presentation includes forward looking statements. Forward looking statements can generally be identified by the use of the words “anticipate”, “believe”, “expect”, “project”, “forecast”, “estimate”, “likely”, “intend”, “should”, “could”, “may”, “target”, “plan” “guidance” and other similar expressions. Indications of, and guidance on, future earning or dividends and financial position and performance are also forward-looking statements.

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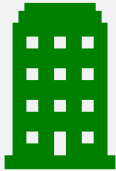
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Neurotech: a high value investment opportunity



Neurotech is an ASX-listed (ASX: NTI) clinical-stage biotech company

Market cap of ~\$18m and cash at 31 Dec 2025 of \$6.3m

Phase 3 clinical trial program in autism spectrum disorder (ASD)

Placement to raise ~\$4m in Dec 2025

R&D Tax rebate \$4.73m in Nov 2025



Neurotech is developing NTI164 as a novel therapy for childhood neurological and neurodevelopmental disorders (NDD)

NTI164 targets neuroinflammation

It modulates microglia (the immune cells of the brain) to dampen their overactive inflammatory state in NDD

Data published in peer-reviewed scientific journals

Demonstrated clinical safety and efficacy in ASD, Rett syndrome and PANS



With four completed clinical trials across three indications, NTI164 moves into a Phase 3 clinical trial in ASD

Orphan drug and rare pediatric disease designations granted by US FDA and European EMA

Competitive landscape not crowded with few approved therapies in our target indications

Progressing global regulatory plans and partnering discussions

Targeting areas of significant unmet medical need. Epidiolex selling ~\$1b per year for two forms of epilepsy^[1]

^[1] [Jazz Pharmaceuticals full year 2025 financial results](#)

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^[6]
- 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](#)

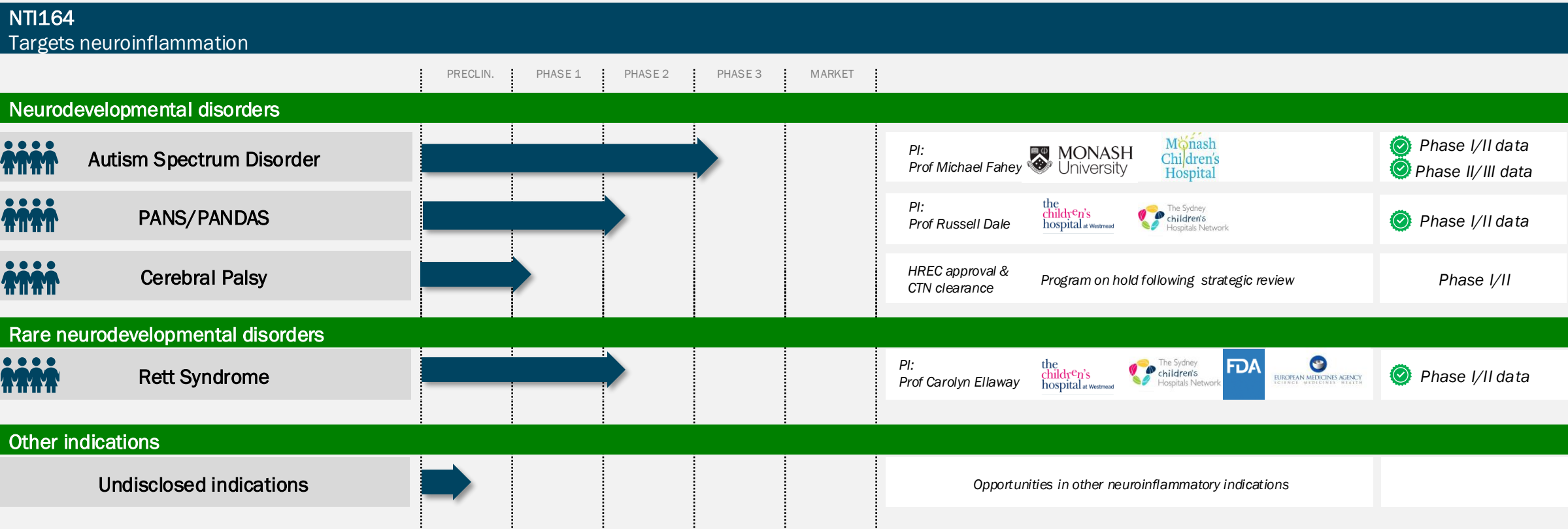
^[3] [Rett Syndrome: Crossing the Threshold to Clinical Translation](#)

^[4] [Neuren Pharmaceuticals 2022 Annual Report](#)

^[5] [Acadia Pharmaceuticals Full Year 2024 financial results 26 Feb 2025](#)

^[6] [PANDAS network](#)

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



What is NTI164?

① Disease-modifying transformative therapy in neurodevelopmental disorders

② Standardised, pharma-grade CNS modulator, targeting neuroinflammation

③ Multi-small molecule profile with CBDA dominance, pharma-grade oil

④ Orally administered,
Twice daily, 5mg/kg/day

⑦ Safe and effective in non-clinical and clinical studies; backed by clinical data and open to partnering opportunities

⑥ Patent applications cover composition of matter, methods of use and formulations

⑤ Unique anti-inflammatory, neuroprotective, and epigenetic effects



NTI164 – Clinical Data Demonstrated Improvements

Across three clinical studies in Autism and Rett syndrome, NTI164 consistently improved the outcomes that matter most to families.

THE FOUR PILLARS OF CHANGE

Phase II/III HARMONY Autism Spectrum Disorder Clinical Trial

GLOBAL SYMPTOM SEVERITY

84%

of patients showed improvement within the first 8 weeks of NTI164 treatment

- Children moved down in illness severity ratings.
- Clinicians rated clinically meaningful overall improvement.

Measured by the Clinical Global Impression of Improvement (CGI-I) scale

COMMUNICATION & COGNITIVE ENGAGEMENT

- Better engagement.
- More alertness.
- More expressive behaviour.

Measured by the Vineland-3

+3.23

in the Vineland-3 - a meaningful improvement in communication ability

-3.064

reduction in social challenges – a meaningful improvement in social responsiveness

SOCIAL ENGAGEMENT

- Improved social responsiveness and interaction.
- Greater engagement with caregivers.

Measured by the SRS-2

ANXIETY REDUCTION

- Reduced anxiety.
- Improved mood regulation.
- Fewer behavioural disturbances.

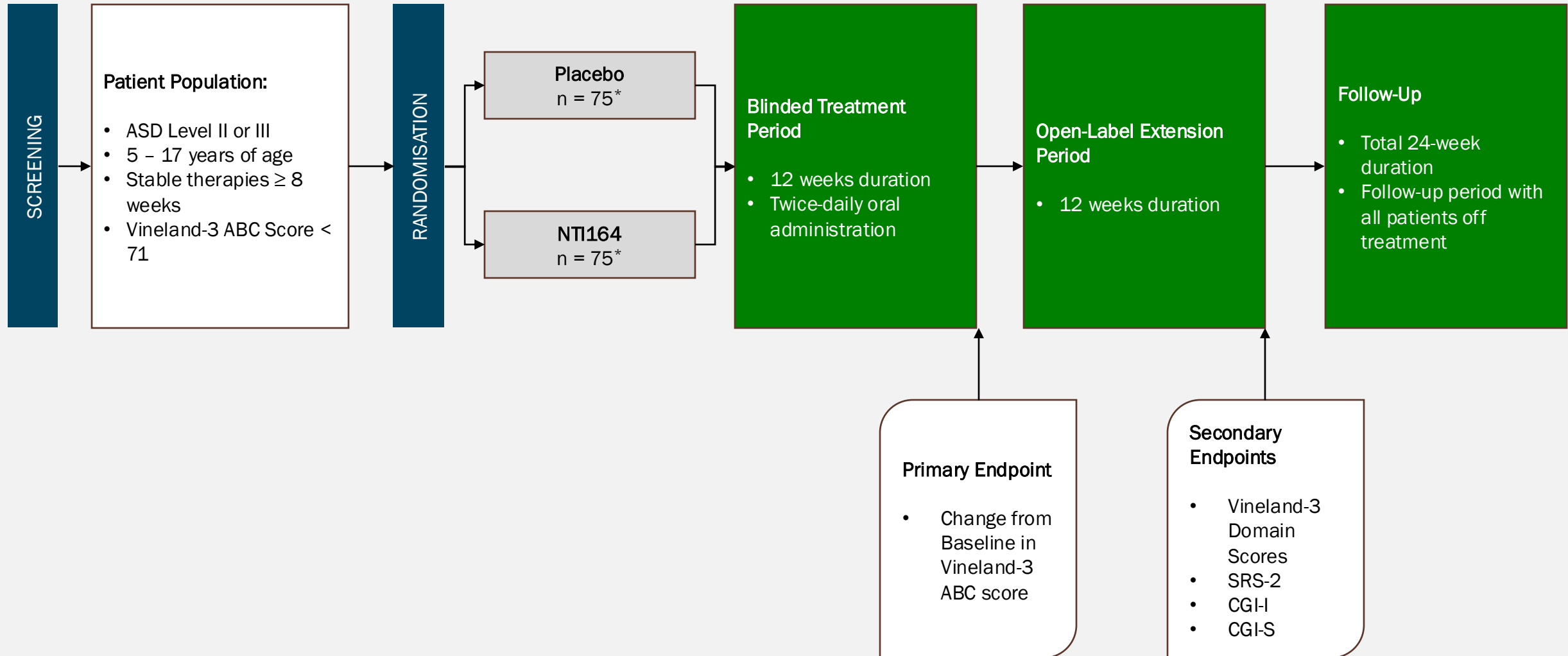
Measured by the ADAMS scale

39%

improvement in anxiety scores

When communication improves, anxiety decreases, and families feel relief – that is significance.

Approval for Phase III BEYOND HARMONY clinical trial in ASD



*Adaptive design

ASD Phase III roadmap and value inflection points



Phase III program supported by clinical data:

- Statistically significant and clinically meaningful Phase II/III efficacy signals
- Consistent safety profile across prior clinical exposure
- TGA/FDA-aligned registration endpoints
- Large unmet market need – no approved therapies for core ASD symptoms
- Scalable, commercially viable formulation
- Partnering discussions with pharmaceutical and biotechnology companies ongoing

Note: The above roadmap is a statement of current intentions as at the date of this presentation. Intervening events may alter the timing, sequence or feasibility of the matters described. Accordingly, there can be no assurance that the milestones outlined will be achieved within the anticipated timeframes, or at all.

NTI164 – Clinical Data Demonstrated Improvements

Across three clinical studies in Autism and Rett syndrome, NTI164 consistently improved the outcomes that matter most to families.

THE FOUR PILLARS OF CHANGE

Phase I/II Rett Syndrome Clinical Trial

GLOBAL SYMPTOM SEVERITY

93%

showed overall
clinical
improvement

- Children moved down in illness severity ratings.
- Clinicians rated clinically meaningful overall improvement.

Measured by the Clinical Global Impression scales

COMMUNICATION & COGNITIVE ENGAGEMENT

-10.53

point reduction in
communication and
cognitive engagement
difficulties

- Better engagement.
- More alertness.
- More expressive behaviour.

Measured by the RSBQ subdomains

86%

showed
improvement in
social interaction
or eye contact

Measured by the Socialisation/Eye-contact CGI-I sub-domains

SOCIAL ENGAGEMENT

- Improved social responsiveness and interaction.
- Greater engagement with caregivers.

ANXIETY REDUCTION

56%

- Reduced anxiety.
- Improved mood regulation.
- Fewer behavioural disturbances.

showed reduction
in anxiety-related
behaviours

Measured by Anxiety and Mood sub-domains in Rett trial

US EU
Granted Orphan
Drug Designation

US
Granted Rare
Pediatric Disease
Designation

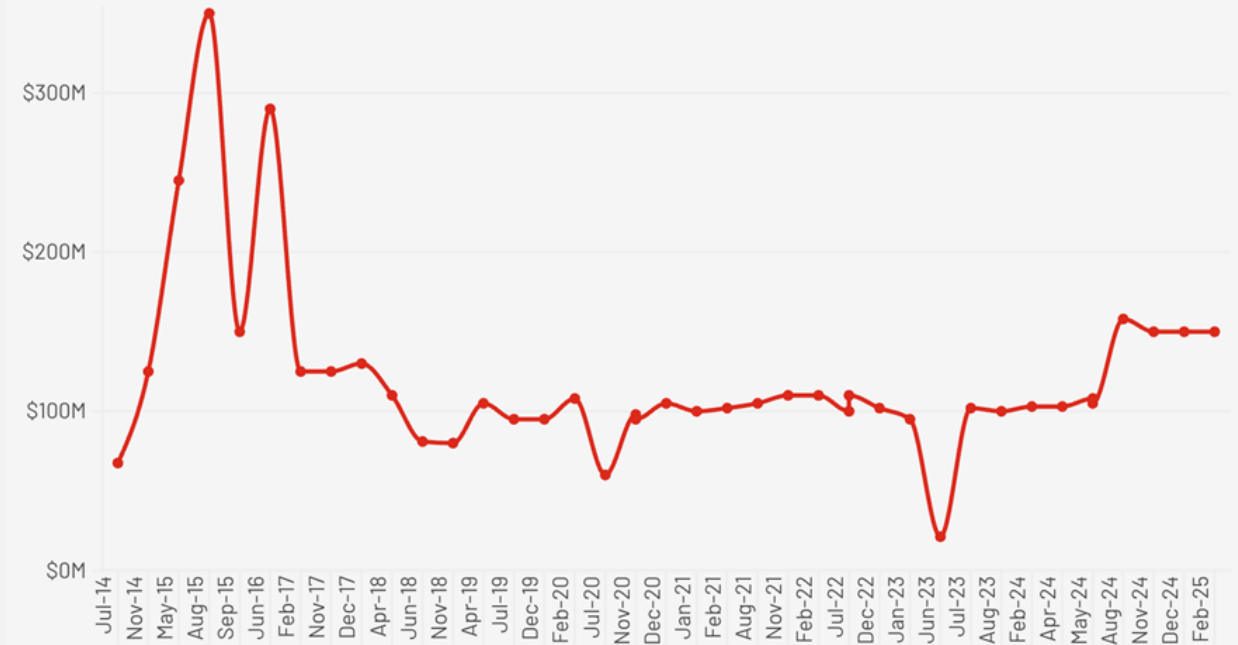
When communication
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Rare paediatric disease Priority Review Voucher re-instated

Priority Review Voucher Program

- The Rare Pediatric Disease Priority Review Voucher (PRV) program sunset on 20 December 2024, causing a period of uncertainty for rare disease drug developers
- Companies could still apply for Rare Pediatric Disease Designation (RPDD) and sell previously obtained PRV
- RPDD is one of the eligibility requirements that must be satisfied before a sponsor may be eligible to receive a PRV following FDA approval of a qualifying product.
- Other key eligibility requirements to obtain a PRV include:
 - FDA approval of a New Drug Application (NDA) or Biologics License Application (BLA)
 - The drug must contain a new active ingredient not previously approved
- NTI164 obtained RPDD for Rett syndrome in October 2025
- On 3 February 2026, the Rare Pediatric Disease PRV program was re-instated
- Established in 2012, 63 Rare Pediatric Disease PRV have been awarded across 47 rare diseases^[1]
- Publicly reported Priority Review Voucher transaction prices over time are illustrated in the chart.

Priority Review Voucher Open Market Sales



Source: FDA, Federal Register, Company Reports, SEC, GAO • Chart by Annalee Armstrong/ BioSpace

The above chart illustrates publicly reported historical Priority Review Voucher transaction prices based on available market data. For details, refer to: <https://www.biospace.com/business/priority-review-vouchers-by-the-numbers>

^[1] Impact of the Rare Pediatric Disease Priority Review Voucher Program on Drug Development From 2012 – 2025 <https://rarediseases.org/wp-content/uploads/2025/08/NRD-2342-PRV-Policy-Report-November-2025.pdf>
While there is no assurance that NTI164 will obtain PRV, Neurotech notes that obtaining RPDD is part of the eligibility criteria an applicant for PRV must first satisfy. If eligible, Neurotech intends to seek a PRV in connection with NTI164, subject to FDA approval of a qualifying product and satisfaction of all applicable eligibility requirements. Neurotech also notes that the price of PRV is subject to consistent fluctuation and there is no guarantee that a specific price could be obtained by Neurotech in the event it obtained a PRV.

Authorised Prescribers (AP) Scheme: Enabling NTI164 demand

Authorised Prescribers Scheme

The Authorised Prescriber Scheme allows authorised medical practitioners to prescribe medicines, medical devices or biologicals that are not included in the Australian Register of Therapeutic Goods to a class of patients with a particular medical condition.

- Enabling NTI164 demand
 - Rationale for AP scheme was due to patient/family demand for NTI164
 - Scalable access provided through NTI-selected Australian registered medical practitioners (Authorised Prescribers) who can prescribe NTI164 to multiple patients in a supervised environment
- Generate real-world evidence
 - Patients gain access once an AP scheme is in place, accelerating uptake across key indications
 - Real-world data through the AP scheme generates valuable safety and effectiveness data to strengthen regulatory, partnering, advocacy and payer discussions
- Part of broader commercial access strategy
 - Establishes early adoption and market presence for NTI164 ahead of pivotal trials and potential registration
 - Commercial access and registration strategy

The competitive landscape is not crowded with few approved therapies

	Early Development	Late Development	Approved
Autism Spectrum Disorder <i>Several off-label use of other neuropsychiatric drugs which have side effects</i>	   	 NTI164     	   
Rett Syndrome <i>Only a few Phase I/II clinical trials underway, with late development failure</i>	 NTI164  	 Blarcamesine	 
PANDAS/PANS <i>Emerging area, strong patient advocacy</i>	 NTI164	 Panzyga	No approved drugs

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

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

*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, approved)	~ US\$10.3B
 ACADIA	 Daybue [™] (trofinetide) (approved)	~ US\$4.1B
 neuren pharmaceuticals	NNZ-2591 Phase 2 data including Angelman, Phelan McDermid, Pitt Hopkins	~AU\$1.7B
 anavex [™] LIFE SCIENCES Corp.	Anavex 2-73 (Blarcamesine) Phase 2/3 for Rett Syndrome (failed Jan 2024) Phase 2/3 for ASD	~US\$376M
 HARMONY BIOSCIENCES	Zyn-002 (cannabidiol gel) Phase 3 for Fragile X Syndrome (failed Sep 2025) Phase 3 for epilepsy	~US\$1.9B
 Taysha GENE THERAPIES	Gene therapies for monogenic CNS diseases Phase 1/2 for Rett Syndrome	~US\$1.3B
 NEUROGENE	Phase 1/2 for Rett Syndrome Phase 1/2 for Batten Disease	~US\$285M
 Neurotech International	Phase 2/3 data in ASD Phase 1/2 data in Rett Syndrome Phase 1/2 data in PANDAS/PANS	~AU\$18M

Neurotech is moving forward with a Phase 3 clinical trial in ASD and is valued at ~AU\$18M

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	<i>Camellia sinensis</i> (green tea)	Genital & perianal warts (HPV)	2006	First FDA approved botanical ointment; standardised polyphenol mixture ^[1]
Fulyzaq®/Mytesi®	Crofelemer	<i>Croton lecheri</i> (dragon's blood)	Non-infectious diarrhea in HIV/AIDS	2012	Rebranded as Mytesi® for chronic diarrhea management ^[1]
Epidiolex®	Cannabidiol (CBD)	<i>Cannabis sativa</i> (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®	Paclitaxel	<i>Taxus brevifolia</i> (Pacific yew bark)	Breast, ovarian, lung cancer	1992	Blockbuster oncology drug, peak annual sales ~US\$1.6B ^[3]
Taxotere®	Crofelemer	Semi-synthetic from Paclitaxel 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



Neurotech financial position and value drivers

Corporate Fundamentals

Market Capitalisation:	~AU\$ 18.2M
Primary Listing:	ASX: NTI
Shares on Issue:	1.30 Billion

Cash Position

Cash Balance (31 Dec 25):	AU\$6.3 Million
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Shareholders

Top 40 (31 Jan 26)	54.01%
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Analyst Coverage



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 first clinical site	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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Thank You & Contact Details



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