Positive FDA review of amsulostat Phase 2b trial plan

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April 2026

INVESTMENT HIGHLIGHTS

Australian-founded **clinical stage drug developer.**

Backed **by specialist healthcare investors** – 44% institutional.

Multiple shots on goal from additional Phase 2, Phase 1 and preclinical assets.

Funded through 2027 with **near term data to drive value** over the next 12-18 months. (Proforma Mar 26; $16.9m[1]).

Focus on first-in-class and best-in-class drugs backed by **in house long-life patent portfolio.**

Experienced team with **proven track record** in licensing deals – $100m raised.

Three Phase 2 studies in **blood cancer indications** with addressable market value >$4.5 bn.

$11.5m in non-dilutive grant funding awarded in last 3 years.

POSITIVE 52 WEEK TOP LINE DATA FROM PHASE 2 BLOOD CANCER TRIAL

Safety and tolerability of amsulostat, together with the increasing size and durability of clinical benefit seen beyond 24 weeks, compares favourably with other drugs in clinical development.

[1] Includes $8m Placement proceeds (before costs) assuming Tranche 2 of the Placement is approved by shareholders from April 2026 capital raise

AMSULOSTAT:

LEAD ASSET AND A KEY DRIVER OF VALUE

- FDA IND and orphan drug designation in myelofibrosis.
- First and best in class pan-LOX inhibitor.
- Long patent life.
- Multiple Nature publications.
- Final Phase 2a trial data in combination with ruxolitinib presented at ASH 2025.
- Clearly differentiated and competitive safety and efficacy profile with potential for breakthrough therapy in myelofibrosis patients with an inadequate response to standard of care.
- FDA review of Phase 2b trial protocol potentially triggers next stage of clinical development / partner engagement.

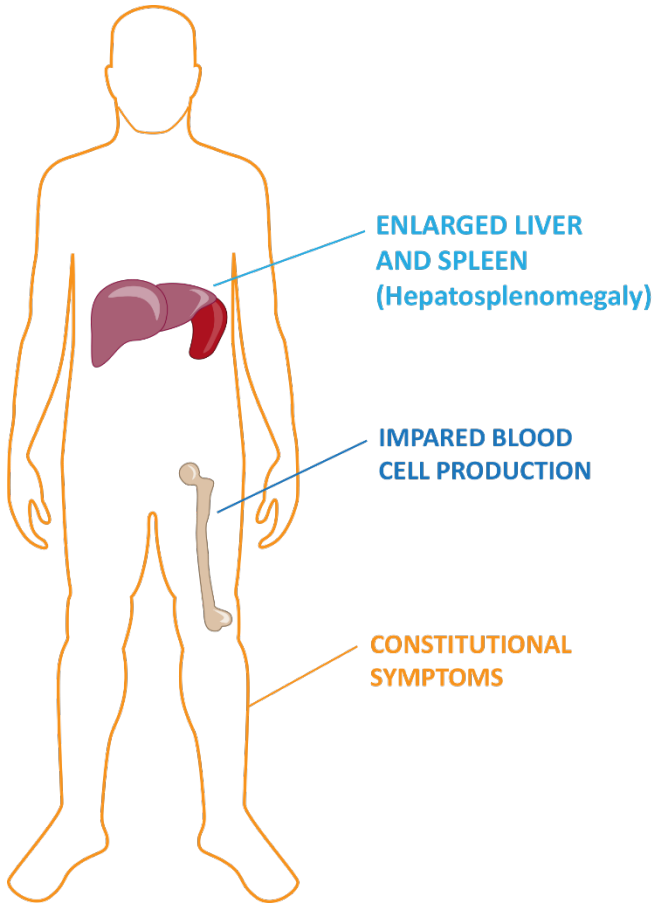
MYELOFIBROSIS

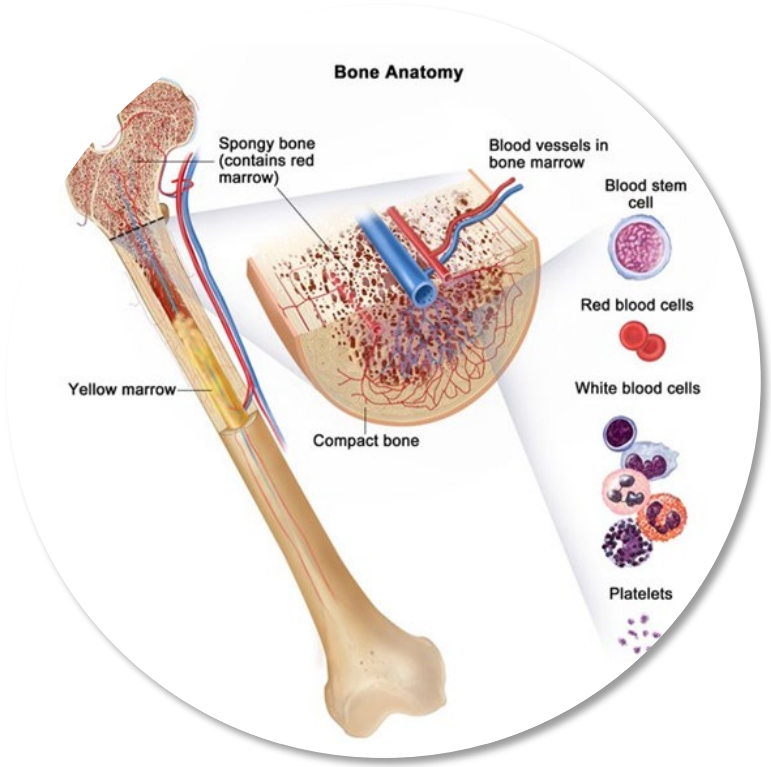
KEY FACTS

- Orphan disease affects ~55k people in 7MM (USA, Japan, 5EU); USA ~ 20,000 patients.
- Age of onset typically from age 50; 5 years median survival.
- 11% transformation to leukemia.
- Reduced red blood cells can cause extreme tiredness (fatigue) or shortness of breath.
- Reduced white blood cells can lead to an increased number of infections.
- Reduced platelets can promote bleeding and/or bruising.
- Enlarged spleen due to insufficient healthy blood cell production from the bone marrow causing abdominal pain.
- Other common symptoms include fever, night sweats, and bone pain.

A rare type of bone marrow cancer that disrupts the body's normal production of blood cells.

Myelofibrosis characterised by a build up of scar tissue (fibrosis) in bone marrow and abnormal proliferation of blood precursor cells reducing the production of blood cells.



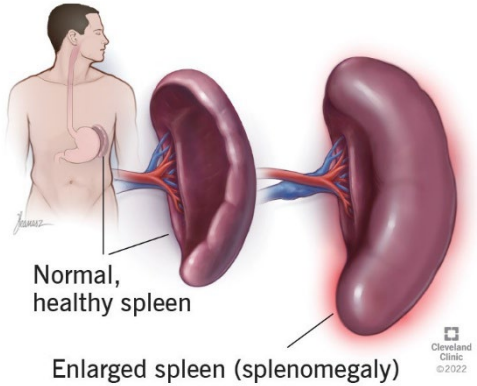


MYELOFIBROSIS

Limited treatment options currently

Current standard of care (SoC): JAK inhibitors

- Class of drugs used in the management of splenomegaly (enlarged spleen) and other constitutional symptoms.



- Symptom improvement assessed using patient reported questionnaire that provides **Total Symptom Score (TSS)**
- CT or MRI scan used to measure **spleen volume reduction (SVR)**

JAK inhibitors have significant limitations

- Offer limited survival benefits and are associated with significant dose-limiting tolerability issues including cytopenias and increased risk of infection.
- 75% discontinuation at 5 years.
- Median overall survival only 14 – 16 months after discontinuation .

Amsulostat

In contrast to SoC, amsulostat intervenes at the source, inhibiting the family of lysyl oxidase enzymes that cause increased bone marrow fibrosis and growth factor activity; both of which have detrimental effects on the production of healthy blood cells.

Clinical positioning:

- ✓ Distinct mode of action
- ✓ Improved tolerability
- ✓ Profile suitable for combination with SoC
- ➢ Potential for disease modification and treatment of earlier stage disease.

Commercial Opportunity

- Current SoC; revenue ~US$1.9b per annum
- Recent biotech exits after Phase 3 in excess of US$1.7b

POSITIVE TOP LINE PHASE 2A DATA HIGHLIGHTS AMSULOSTAT'S POTENTIAL IN MYELOFIBROSIS

Improvements of 50% or more in total symptom score (TSS50)

were observed quickly (as early as 12 weeks) and were sustained, with 73% (8/11) of patients achieving TSS50 at Week 24 or beyond.

Meaningful spleen volume reductions (SVR) were observed

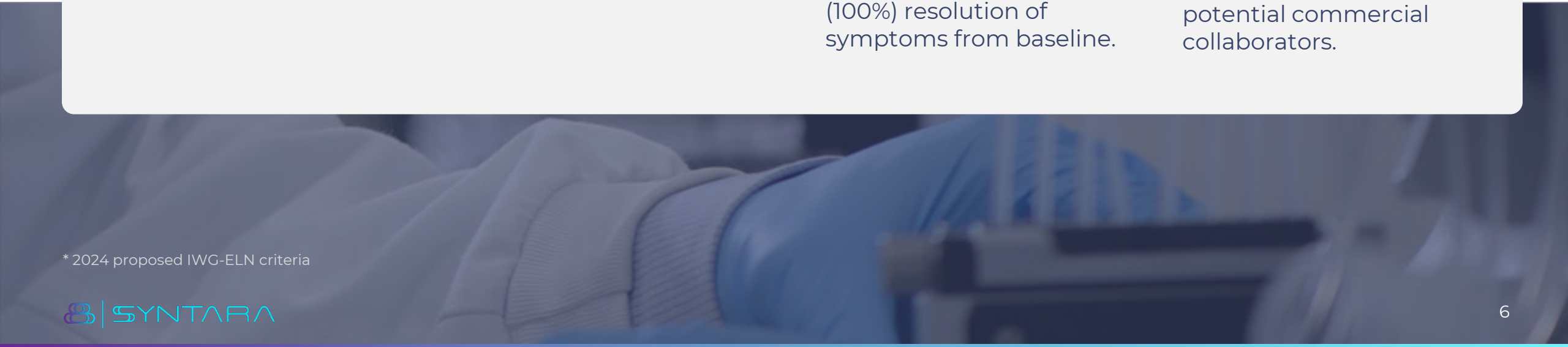
at 24 weeks and maintained thereafter, with 44% (4/9) of patients achieving SVR25 at Week 24 or beyond.

Of the 7 patients that completed 52 weeks of treatment

- 6 chose to continue on amsulostat through named patient supply.
- 3 of these patients had a minor anaemia response*
- 2 achieved a complete (100%) resolution of symptoms from baseline.

Next stage of amsulostat clinical and commercial development triggered

- FDA feedback on phase 2b protocol following review of phase 2a data
- Drug development activities to support late stage clinical trials
- Engagement with potential commercial collaborators.



* 2024 proposed IWG-ELN criteria

FDA ALIGNMENT ON AMSULOSTAT PATHWAY

- Positive Type C meeting outcome with the U.S. FDA for amsulostat in myelofibrosis.
- FDA supports the overall Phase 2b study design and broader development pathway.
- Planned Phase 2b study: approximately 100 patients, double-blind, placebo-controlled, amsulostat added to standard JAK inhibition.
- Primary endpoint: 50% reduction in total symptom score (TSS50) after 9 months of treatment.
- **Outcome provides a clear path to advance amsulostat into late-stage clinical development.**

PHASE 2B CLINICAL TRIAL DESIGN – SUBJECT TO FDA REVIEW

Trial Design

Main Cohort A

- Patients with MF on ruxolitinib for min 3 months
- Current inadequate response to ruxolitinib (TSS and spleen size)
- Historical inadequate response to ruxolinitib (spleen response)

Optional Cohort B

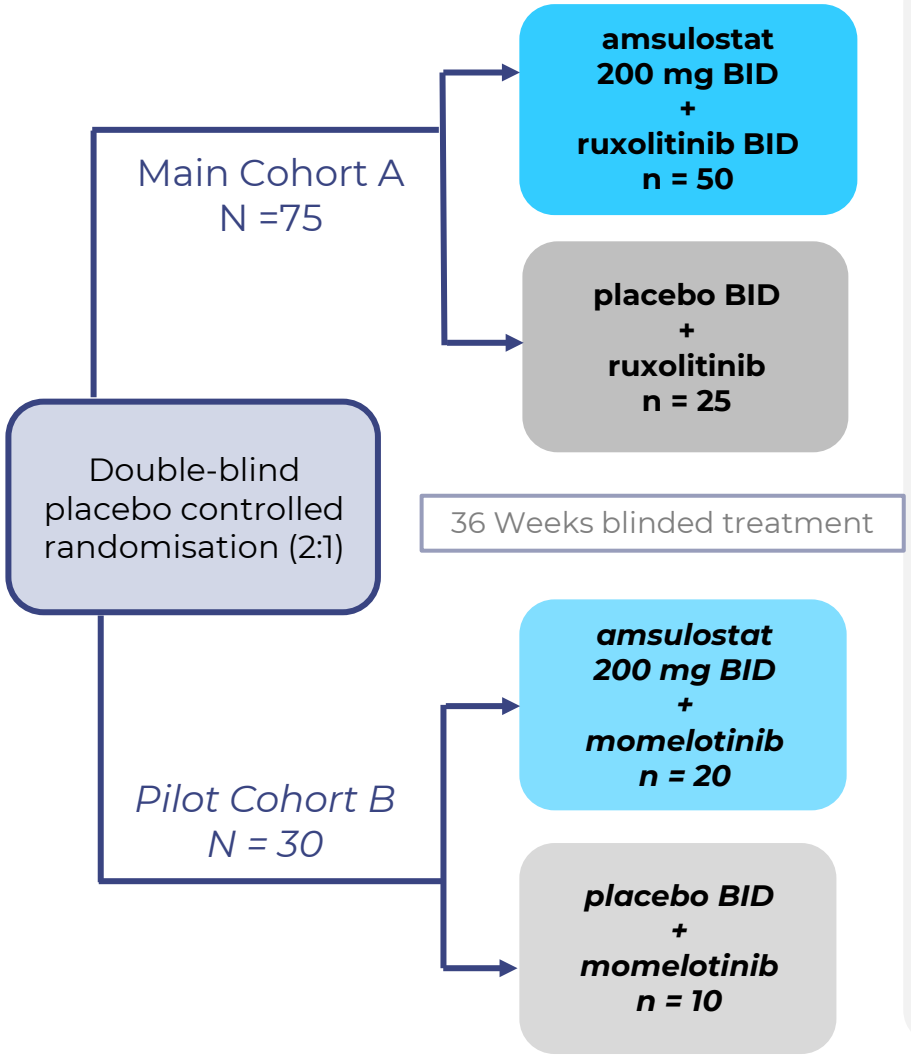
- Patients with MF with inadequate response to momelotinib

Primary Endpoint

- TSS50 at Week 36

Secondary Endpoints

- Spleen size (SVR 25 and 35)
- Other symptom assessments
- Overall Survival
- Safety, PK/PD



Timeline of Activities

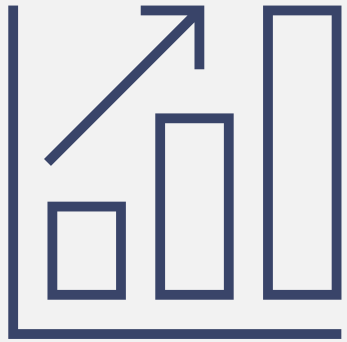
Preparation Phase

- Protocol finalisation
- CRO selection
- Trial site negotiations
- Formulation development and clinical trial supplies

Trial progression

- Commencement: Q4 2026
- Recruitment: 18 months
- Treatment duration: 9 months

WHY THIS MILESTONE MATTERS



- Formal FDA alignment de-risks the regulatory and development pathway.
- Strengthens amsulostat's value ahead of potential partnering discussions.
- Reinforces amsulostat's differentiated position in myelofibrosis, with Fast Track and Orphan Drug Designations already secured.
- Additional upside through two ongoing myelodysplastic syndrome studies and other 2026 clinical catalysts across the pipeline.
- **A validated strategy, a clearer path to value creation, and multiple near-term catalysts for shareholders.**

STRONG INTEREST IN MF ASSETS FROM STRATEGICS

Target / Acquiror	中国生物制药有限公司 SINO BIOPHARMACEUTICAL LIMITED / sanofi	KEROS THERAPEUTICS / Takeda	morphosys / NOVARTIS	CTI / sobi rare strength	SIERRA ONCOLOGY / GSK
DATE OF ANNOUNCEMENT	**MARCH-2026**	**DEC-2024**	**FEB-2024**	**JUNE-2023**	**JULY-2022**
Drug Name	Rovadicitinib	Elritercept	Pelabresib	Pacritinib	Momelotinib
Lead Indication / Phase (at transaction)	Myelofibrosis (approved in China)	MDS and MF (ongoing Phase 2 trials)	Myelofibrosis (successful Phase 3 studies)	Myelofibrosis (Marketed)	Myelofibrosis (NDA Filed)
Deal Type	License	License	Acquisition	Acquisition	Acquisition
Upfront / Milestones (US$)	US$135M / US$ 1.395B	US$200M / US$1.1B	US$2.9B	US$1.7B	US$1.9B
Earnout Payments / Royalty Rate (%)	Not disclosed	Not disclosed	Subject to regulatory approvals	None	None

Attractive commercial outcomes for drugs with Phase 2 and 3 data expected to drive interest in amsulostat Phase 2 data

THE YEAR AHEAD - *POISED TO DELIVER NEAR TERM VALUE*

TARGET	DRUG	INDICATION	PARTNERS	PHASE 1	PHASE 2	ANTICIPATED NEWS FLOW	
				HEALTHY PARTICIPANTS	PATIENTS	H1 2026	H2 2026
Pan-LOX	Amsulostat (SNT-5505)	Myelofibrosis		→	→	FDA approved development plan and partner engagement	
		High Risk MDS AZALOX trial	Deutsche Krebshilfe	→	→	Interim safety and efficacy data	Phase 2 initiation
		Low / Int Risk MDS MESSAGE trial	ALLG	→	→		Interim safety and efficacy data
		Pancreatic cancer FALCON trial	Garvan Institute of Medical Research	→	→		Trial initiation
Topical Pan-LOX	SNT-9465	Hypertrophic scarring		→	→	Recruit hypertrophic scar Phase 1b trial	Top Line safety and efficacy data
	SNT-6302	Keloid scarring	The University of Western Australia, Fiona Wood Foundation	→	→	Interim safety and efficacy data	
Dual SSAO & MAO-B	SNT-4728	IRBD / Parkinson's Disease	In partnership with Parkinson's UK	→	→	Phase 2 Top Line data	

SYNTARA

MDS: Myelodysplastic Syndrome; Int: Intermediate; IRBD: Isolated REM sleep Behaviour Disorder

Equity Raising

CAPITAL RAISE OVERVIEW

- Raising A$8.0 million via a committed institutional placement and targeting A$2.0 million via a Share Purchase Plan, for total proceeds of approximately A$10 million before costs.
- Capital raising follows the positive FDA Type C outcome for amsulostat and supports the next phase of execution.
- Placement received strong support from existing and new institutional and sophisticated investors.
- Eligible shareholders in Australia and New Zealand can participate through the SPP at the same issue price.
- Issue price is A$0.027 per new share

USE OF FUNDS AND SHAREHOLDER VALUE

- Extends expected cash runway to Q3, 2027.
- Funds five key clinical trial readouts across CY2026 and supports ongoing licensing discussions across the pipeline.
- Supports Phase 2b myelofibrosis study preparation, including protocol finalisation, CRO selection, site negotiations, formulation work and clinical trial supplies.
- Strengthens Syntara's global pan-LOX patent suite.
- **The objective is to fund clearly defined near-term milestones and position the company to deliver shareholder value through clinical and commercial progress.**