15/07/2026

EMVision Medical Devices Ltd
ACN 620 388 230
Level 10, 12 Creek Street,
Brisbane Qld 4000

ASX Release

APPENDIX 4C – 30 JUNE 2026 QUARTERLY ACTIVITIES & CASHFLOW REPORT

Highlights:

- *Pivotal (Validation) Trial, has surpassed key enrolment milestones, building momentum toward FDA De Novo clearance for EMVision's emu™ point-of-care brain scanner*
- *Preparations advancing to add an acute ischaemia detection endpoint to the Pivotal (Validation) Trial, expanding clinical utility and commercial opportunity from first product release, with FDA meeting and protocol amendment planned.*
- *Successful First Responder aeromedical feasibility and usability study with Royal Flying Doctor Service (RFDS) completed, with flight nurses and patients rating the prototype device favourably in real-world operation.*
- *First Responder Mobile Stroke Unit Study (Stage 1) nearing completion and reporting.*
- *emu™ Regional Benefits Study progressing toward 2H CY26 launch. The study is designed to demonstrate the real-world benefits of the emu™ brain scanner in regional hospitals.*
- *Grant funding milestones met during the quarter resulted in $2.0m of non-dilutive funding being received ($1.17m Industry Growth Program payment, $0.4m CRC-P grant payment, and $0.4m final Australian Stroke Alliance payment).*
- *Strong balance sheet position maintained, with cash reserves of $17.1m as at 30 June 2026 and $4.6m in non-dilutive funding remaining under current grant programs.*

EMVision Medical Devices Limited (ASX:EMV) ("EMVision" or the "Company") is pleased to lodge the following update and attached Appendix 4C Quarterly Cashflow Report for the period ended 30 June 2026.

EMVision is an Australian company developing and commercialising innovative neurodiagnostic technology. The Company's focus is portable, cost-effective, easy-to-use, non-ionising brain scanners, including a bedside device (emu™) and an ultra-lightweight pre-hospital device (First Responder). EMVision's first target indication is acute stroke care, with a second planned indication in traumatic brain injury. Both conditions impose substantial societal and health economic burdens. Portable brain scanners can address a critical unmet need by enabling timely triage, transfer and treatment decisions that improve patient outcomes.

Clinical and Regulatory Activities – emu™ Brain Scanner

Pivotal (Validation) Trial

EMVision continued to progress the Pivotal (Validation) Trial during the quarter, with recruitment now past key enrolment milestones across the training and primary analysis cohorts. Recruitment momentum continues to build across all active US and Australian hospitals, supported by acceleration initiatives

introduced during the quarter. The emu™ device continues to integrate seamlessly into hospital code stroke workflows, with no device-related adverse events reported to date.

Trial ramp-up, protocol enhancements and active FDA engagement support a path to full enrolment from late CY2026 / early CY2027, with sequential cohort readouts to follow shortly thereafter.

Princess Alexandra Hospital, a participating site in EMVision's Continuous Innovation Study, is transitioning into the Pivotal (Validation) Trial, leveraging existing site readiness, trained staff, and clinical familiarity with the technology. EMVision is also in advanced preparations to onboard further leading US academic medical centres that have been referred to the Company, reflecting growing clinical interest in the Pivotal (Validation) Trial and our technology.

The leading academic, tertiary and teaching hospitals currently recruiting into the trial are as follows:

- Mayo Clinic, Jacksonville (Florida, USA)
- Mt Sinai Hospital (New York, USA)
- Mt Sinai West (New York, USA)
- Ronald Reagan UCLA Medical Center (California, USA)
- Memorial Hermann – Texas Medical Centre (Texas, USA)
- Memorial Hermann – Memorial City (Texas, USA)
- Royal Melbourne Hospital (Victoria, Australia)
- Liverpool Hospital (New South Wales, Australia)

The Pivotal (Validation) Trial is a multi-centre, prospective, blinded diagnostic performance study designed to support FDA De Novo clearance for EMVision's first generation commercial product, the emu™ point-of-care brain scanner. The primary objective of the Trial is to demonstrate haemorrhage detection sensitivity and specificity of greater than 80%. EMVision remains blinded to certain study data until study recruitment is completed and data is independently analysed. Data is being collected in a manner that allows validation and read-outs of additional diagnostic features without the need to undertake a supplementary full validation trial.

EMVision is preparing to add an acute ischaemia detection endpoint to the Pivotal (Validation) Trial following significant progress on the feature’s development in the Continuous Innovation Study.

As ischaemic stroke patients are already being enrolled in the Pivotal (Validation) Trial, modifications are expected to be incremental, leveraging the data already collected and existing workflow integrations. This may include minor adjustments to the required sample to ensure the ischaemic sub-cohort meets statistical objectives. EMVision intends to engage with the FDA through an upcoming pre-submission (Q-Sub) meeting, covering the proposed clinical claims and performance thresholds.

Validation of an ischaemia detection feature is expected to strengthen the emu™ device's clinical and commercial value proposition significantly. Because stroke interventions are highly time-dependent, the ability to rapidly detect and classify both stroke types in one scan has the potential to reduce intervention delays and improve patient outcomes. Generating ischaemia performance data on the emu™ also builds the clinical and regulatory foundation for the Company's second generation First Responder device in pre-hospital settings.

Importantly, successful validation of both haemorrhage and acute ischaemia detection in the initial commercial product has the potential to materially expand its clinical utility from launch, strengthen the product’s commercial value proposition and further differentiate EMVision from other point-of-care technologies.

EMVision remains focused on the successful completion of the Pivotal (Validation) Trial, while continuing to build clinical awareness and momentum ahead of its planned FDA De Novo submission.

Continuous Innovation Study

The emu™ Continuous Innovation Study, a strategic complement to the Pivotal (Validation) Trial, continued to progress during the quarter. The Study supports AI model refinement and feature development through

generation of proprietary datasets from suspected stroke and traumatic brain injury (TBI) patients. This data strengthens EMVision's competitive positioning and facilitates ongoing platform development in features including acute ischaemia and large vessel occlusion (LVO) detection.

The Study's clinical footprint continues to evolve, with Box Hill Hospital joining the Study in lieu of Princess Alexandra Hospital, which is transitioning into the Pivotal (Validation) Trial. Additional site activations are underway to enable efficient clinical data generation.

Regional Benefit Study

The CRC-P grant-funded emu™ Regional Benefit Study, in partnership with the Australian Stroke Alliance, Titan Pre-Hospital Innovation and South Australia's Rural Support Service, is progressing towards launch in the second half of CY26. Site selection is at an advanced stage, and workstreams across protocol development, hospital deployment and telehealth integration are on track. During the quarter, EMVision met applicable milestones and received a further $0.4 million non-dilutive instalment under the CRC-P grant program. The Study targets regional locations underserved by current stroke diagnostic practices, where patients may travel for hours before a diagnosis is made and treatment can begin. Deploying the emu™ Brain Scanner at the point of care, with stroke neurologists engaged via telemedicine, presents a major opportunity to expedite patient management and improve outcomes for regional Australians suffering stroke.

This diagnostic bottleneck is shared by regional populations worldwide, positioning the Study as a blueprint for future global deployment.

Peer-reviewed publication in npj Digital Medicine (Nature portfolio)

Subsequent to quarter end, research into EMVision's portable radio-frequency (RF) brain scanning technology and proprietary deep learning models was published in the peer-reviewed journal *npj Digital Medicine*, part of the Nature portfolio and recognised as one of the world's highest impact journals in digital health (refer ASX announcement 14 July 2026). The paper, "Portable RF brain scanner enables deep-learning-based stroke type detection and ordering of brain-event dielectric permittivity" (Khandan, Xu et al. 2026), draws on data from the Company's EMView study with the emu™ brain scanner, and details the advanced machine learning techniques developed by EMVision to extract robust signals from limited datasets.

As previously reported, performance of the emu™ on unseen data in the EMView study was 92% sensitivity (95% CI: 66.1%–98.2%) and 85% specificity (95% CI: 73.8%–92.4%) for haemorrhagic versus non-haemorrhagic episodes, and 95% sensitivity (95% CI: 75.1%–99.9%) and 80% specificity (95% CI: 66.3%–90%) for ischaemic versus non-ischaemic.[1] Beyond classification, the study identified a consistent ordering of relative dielectric properties across haemorrhagic, ischaemic, stroke mimic and healthy states, providing new scientific insight into the dielectric basis of stroke and challenging historic assumptions about the dielectric behaviour of brain tissue.

The publication provides independent, peer-reviewed validation of the artificial intelligence foundations underpinning the emu™ Brain Scanner and the same algorithm pipeline supporting the second-generation First Responder Brain Scanner. EMVision's research and development has generated new intellectual property, for which a patent application has been filed.

Clinical and Regulatory Activities – First Responder Program

EMVision continued to advance its First Responder program during the quarter, with multiple pre-hospital feasibility and usability studies completed or nearing completion.

The First Responder device is a miniaturised, highly portable evolution of the emu™ bedside brain scanner, designed for use in pre-hospital settings including road ambulance, aeromedical retrieval and austere environments. The device is intended to support earlier assessment, triage, transfer and treatment decisions, at the scene, for suspected stroke and traumatic brain injury patients.

1 Headline performance previously reported in ASX announcements 'Algorithms Deliver Excellent Results In EMView Study' (November 2024) and 'Enhanced Algorithm Performance From Continuous Innovation' (May 2025). Diagnostic performance metrics from a development study using a constrained dataset may differ from results obtained in larger, prospective, controlled clinical validation.

Air Deployment Clinical Study

During the quarter, the Air Deployment Study, conducted in partnership with the Royal Flying Doctor Service (RFDS), Australian Stroke Alliance (ASA) and South Australian Ambulance Service (SAAS), concluded enrolment. The study demonstrated the First Responder scanner's compatibility across varied real-world operational environments, including in clinics, on-board aircraft, on tarmacs, in hangars and on remote runways. Flight compatibility was confirmed across all 14 aeromedical transfers spanning 12 airstrips located 125–371km from Adelaide Airport. Scans were concluded rapidly and well tolerated by patients. Following enrolment completion, preparations of a manuscript for peer-reviewed publication are progressing. In addition, learnings from the study are being incorporated into the First Responder production design.

The tyranny of distance has long shaped stroke outcomes. Rural and remote patients wait longer for the definitive neuroimaging that determines treatment, and are far less likely to receive time-critical interventions such as thrombolysis or endovascular thrombectomy for ischaemic stroke, or urgent blood pressure management and neurosurgical intervention for intracerebral haemorrhage, within the treatment window. These results provide real-world evidence that the First Responder brain scanner can be operated effectively in the demanding aeromedical environment, directly addressing this gap and validating an important target use case and future commercial opportunity for the device.

Mobile Stroke Unit (MSU) Clinical Study

Stage 1 of EMVision's Mobile Stroke Unit Study with Ambulance Victoria (AV), Royal Melbourne Hospital (RMH) and the Australian Stroke Alliance (ASA) is expected to complete recruitment and reporting this quarter, adding a further important dataset to the First Responder's growing body of pre-hospital evidence.

The study represents a rare and strategically significant opportunity, with EMVision's prototype First Responder being evaluated within one of the few Mobile Stroke Units in the world that is involved in conducting clinical research at the forefront of hyperacute stroke care. Stage 1 of the study will provide valuable real-world feedback on workflow integration to support expanded research onboard the MSU and usability during in-field pre-hospital patient encounters where the First Responder is designed to deliver meaningful clinical value.

Encouragingly, preliminary insights are consistent with the themes observed in the recently completed Air Deployment Study, while offering unique perspectives on the complexities of urgent stroke response in urban pre-hospital environments. Together, these programs continue to build the evidence base for the First Responder across the full spectrum of emergency stroke care settings, from high density metropolitan areas to remote and regional Australia.

Road Ambulance Clinical Study

Preparations advanced during the quarter for an upcoming study that will evaluate the production equivalent First Responder device in road ambulance operations, extending the pre-hospital testing beyond the aeromedical and Mobile Stroke Unit settings to the highest volume emergency response environment. A key step was a usability workshop which provided valuable operator feedback on device set-up and scanning within the constraints of a road ambulance, and is informing study design. Together with insights from the completed Air Deployment Study and the concluding Mobile Stroke Unit Study, this work positions EMVision to evaluate the First Responder across the full spectrum of pre-hospital care settings.

First Responder Product Development

As the First Responder prototype device concludes its feasibility and usability studies across various pre-hospital settings, EMVision continues to incorporate the operational learnings and end user feedback on device design. This workstream will finalise the production equivalent commercial design of the First Responder, which will support upcoming clinical studies and regulatory testing. This work includes maximising the diagnostic performance potential of the hardware, alongside targeted weight and cost reduction initiatives that deliver a materially lower component count and simplified assembly. These design optimisations are expected to result in a high-performance system that is lighter, more robust and more cost effective, purpose built to meet the demands and scale of global road ambulance, aeromedical and broader pre-hospital markets.

Clinical Community Engagement

Military Health Applications

During the quarter, EMVision participated in the Medical Technology Enterprise Consortium (MTEC), a biomedical technology consortium that partners with the US Department of Defense to accelerate the development and deployment of medical solutions for service members. Participation provided a valuable opportunity to engage directly with the military health community, where traumatic brain injury represents a significant clinical priority and where care is frequently delivered in field, austere and pre-hospital environments without access to conventional neuroimaging. These settings align closely with the intended use of EMVision's First Responder brain scanners, and the Company will continue to explore opportunities within the defence and military health sector with its clinical collaborators.

Further supporting its engagement with the defence health sector, EMVision has had an abstract accepted for the 2026 Military Health System Research Symposium (MHSRS), the US Department of Defense's premier scientific meeting focused on the unique medical needs of service members, to be held 3–6 August 2026 in Kissimmee, Florida.

ICEM 2026

EMVision also participated in the 25th International Conference on Emergency Medicine (ICEM 2026) in Germany, which included a presentation on the role of EMVision's portable brain scanners in closing the diagnostic gap in stroke and traumatic brain injury, building on the Company's 2025 IFEM VITA Award (International Federation for Emergency Medicine's Visionary Industry Technology Award to recognise pioneering innovation) and extending clinical awareness among the global emergency medicine community.

Strong financial position supports execution through key clinical and regulatory milestones

The Company is well funded with cash reserves of $17.1 million as at 30 June 2026. Additional non-dilutive funding is available from existing grant programs ($4.6m).

The Company enters the second half of CY2026 with multiple clinical studies in progress, a pivotal FDA-enabling trial building momentum, and a balance sheet capable of supporting continued execution across both the emu™ and First Responder programs.

During the quarter, the Company received a $1.17 million Industry Growth Program milestone payment, a $0.4 million CRC-P grant payment, and a final $0.4 million Australian Stroke Alliance payment.

Net operating cash outflows for the quarter were $1.267 million and included expenditure on research and development (R&D) activities totalling $1.027 million (Q3 FY26: $1.083 million), staff costs $1.871 million (Q3 FY26: $1.836 million) and corporate administration costs of $0.712 million (Q3 FY26: $0.504 million). Staff costs include EMVision's in-house product development and research teams. External R&D expenditure includes payments to third party regulatory, research and engineering contractors, components and materials for clinical trial devices and ongoing prototyping and product development, and costs for clinical trial activities. R&D costs reduced in the quarter with the prior period including start-up CRO & site costs associated with the emu™ Pivotal (Validation) Trial and completion of device manufacturing for the trial.

EMVision acknowledges the financial and collaborative support from its grant programs, which have supported commercialisation of the emu™ and First Responder devices. The current grant programs are as follows:

Grant Program	Total Funding	Funding Remaining as at 30 June 2026
Industry Growth Program	$5.0 million	$2.8 million[1]
CRC-P Program	$3.0 million	$1.8 million[2]
Total	$8.0 million	$4.6 million

[1] Refer to ASX Announcement "EMVision Awarded $5m Non-Dilutive Government Grant" on 16 June 2025 for further details. Grant payments will be paid quarterly in advance, based on forecast eligible expenditure, adjusted for unspent amounts from previous payments. Payments are subject to satisfactory progress on the project against agreed activities.

[2] Refer to ASX Announcement "$3m CRC-P Grant Executed and First Payment Received for Emu Regional Benefits Study" on 14 October 2025 for further details. Payment of grant instalments is subject to satisfactory progress on the project and compliance by EMVision with its obligations under the Grant Agreement.

As required by ASX Listing Rule 4.7C3, the Company notes that $0.206 million was paid to related parties during the quarter (as noted in section 6 of the attached Appendix 4C) and these payments were salaries, Directors fees and superannuation paid to Directors.

Authorised for release by the Board of the Company.

[ENDS]

For further information, media or investor enquiries, please contact:

Melanie Singh
NWR Communications
+61 (0) 439 748819
melanie@nwrcommunications.com.au

Scott Kirkland
CEO and Managing Director
+61 2 8667 5337
skirkland@emvision.com.au

About EMVision Medical Devices

EMVision Medical Devices Limited (ASX:EMV) is an innovative Australian medical device company developing a novel approach to looking inside the human body. Our product pipeline includes portable, non-invasive, affordable and safe neurodiagnostic devices.

Our vision is to help transform and improve the timely diagnosis and treatment of stroke and other time sensitive medical emergencies, at the point-of-care.

EMVision has offices in Sydney and Brisbane www.emvisionmedical.com

About Stroke

Stroke is a medical emergency that occurs when blood flow to part of the brain is interrupted, either by a blocked vessel (ischemic stroke) or bleeding into the brain (hemorrhagic stroke). The resulting lack of oxygen and nutrients can rapidly damage brain tissue, leading to disability or death if not treated promptly. Different stroke types require different types of care. Early recognition and fast access to diagnosis and appropriate care are critical, as timely intervention can significantly improve outcomes.

Forward-looking Statements

This release may contain certain forward-looking statements with respect to matters including but not limited to the financial condition, results of operations and business of EMVision and certain of the plans and objectives of EMVision with respect to these items. These forward-looking statements are not historical facts but rather are based on EMVision's current expectations, estimates and projections about the industry in which EMVision operates, and its beliefs and assumptions. Words such as "anticipates," "expects," "intends," "plans," "believes," "seeks," "estimates", "guidance" and similar expressions are intended to identify forward looking statements and should be considered an at-risk statement. Such statements are subject to certain risks and uncertainties, particularly those risks or uncertainties inherent in the process of developing technology and in the endeavour of building a business around such products and services. These statements are not guarantees of future performance and are subject to known and unknown risks, uncertainties and other factors, some of which are beyond the control of EMVision, are difficult to predict and could cause actual results to differ materially from those expressed or forecasted in the forward-looking statements. EMVision cautions shareholders and prospective shareholders not to place undue reliance on these forward-looking statements, which reflect the view of EMVision only as of the date of this release. The forward-looking statements made in this announcement relate only to events as of the date on which the statements are made. EMVision will not undertake any obligation to release publicly any revisions or updates to these forward-looking statements to reflect events, circumstances or unanticipated events occurring after the date of this announcement except as required by law or by any appropriate regulatory authority.

Inherent risks of Investment in Medical Device development Companies

There are a number of inherent risks associated with the development of new medical device products to a marketable stage. The clinical trial process, which is often lengthy, is designed to assess the safety and efficacy of a device prior to commercialisation and there is no guarantee of achieving the outcomes necessary to generate a viable commercial product. Other risks include uncertainty of patent protection and proprietary rights, the obtaining of necessary regulatory authority approvals and the evolving competitive landscape. Companies such as EMVision are dependent on the success of their research and development projects, product development and on the ability to attract funding to support these activities. Investment in research and development and novel product development cannot be assessed on the same fundamentals as trading and manufacturing enterprises. Therefore investment in Companies specialising in such development must be regarded as speculative. EMVision recommends that professional investment advice be sought prior to such investments and cautions investors that the risks of an investment in an entity such as EMVision is not limited to the risks disclosed in this announcement.
closed in this announcement.

Appendix 4C

Quarterly cash flow report for entities subject to Listing Rule 4.7B

Name of entity

EMVISION MEDICAL DEVICES LTD

ABN	**Quarter ended ("current quarter")**
38 620 388 230	30 JUNE 2026

Consolidated statement of cash flows		**Current quarter $A'000**	**Year to date (12 months) $A'000**
1.	**Cash flows from operating activities**		
1.1	Receipts from customers	-	-
1.2	Payments for		
	(a) research and development	(1,027)	(3,987)
	(b) product manufacturing and operating costs	-	-
	(c) advertising and marketing	-	-
	(d) leased assets	-	-
	(e) staff costs including research and development staff	(1,871)	(7,430)
	(f) administration and corporate costs	(718)	(2,565)
1.3	Dividends received (see note 3)	-	-
1.4	Interest received	164	421
1.5	Interest and other costs of finance paid	-	-
1.6	Income taxes paid	-	-
1.7	Government grants and tax incentives		
	- R&D Tax Incentive rebate	-	3,821
	- ASA grant income	400	800
	- CRC-P grant income	412	1,237
	- IGP grant income	1,170	1,170
1.8	Other (provide details if material)		
	- Net GST (paid) / received	197	140
1.9	**Net cash from / (used in) operating activities**	**(1,273)**	**(6,393)**

Consolidated statement of cash flows		Current quarter $A'000	Year to date (12 months) $A'000
2.	**Cash flows from investing activities**		
2.1	Payments to acquire or for:		
	(a) entities	-	-
	(b) businesses	-	-
	(c) property, plant and equipment	(26)	(118)
	(d) investments	-	-
	(e) intellectual property	-	-
	(f) other non-current assets	-	-
2.2	Proceeds from disposal of:		
	(a) entities	-	-
	(b) businesses	-	-
	(c) property, plant and equipment	-	-
	(d) investments	-	-
	(e) intellectual property	-	-
	(f) other non-current assets	-	-
2.3	Cash flows from loans to other entities	-	-
2.4	Dividends received (see note 3)	-	-
2.5	Other (provide details if material)	-	-
2.6	**Net cash from / (used in) investing activities**	**(26)**	**(118)**

3.	**Cash flows from financing activities**		
3.1	Proceeds from issues of equity securities (excluding convertible debt securities)	-	14,000
3.2	Proceeds from issue of convertible debt securities	-	-
3.3	Proceeds from exercise of options	-	-
3.4	Transaction costs related to issues of equity securities or convertible debt securities	(1)	(844)
3.5	Proceeds from borrowings	-	-
3.6	Repayment of borrowings	-	-
3.7	Transaction costs related to loans and borrowings	-	-
3.8	Dividends paid	-	-
3.9	Other (provide details if material)	-	-
3.10	**Net cash from / (used in) financing activities**	**(1)**	**13,156**

Consolidated statement of cash flows		Current quarter $A'000	Year to date (12 months) $A'000
4.	**Net increase / (decrease) in cash and cash equivalents for the period**		
4.1	Cash and cash equivalents at beginning of period	18,406	10,505
4.2	Net cash from / (used in) operating activities (item 1.9 above)	(1,273)	(6,393)
4.3	Net cash from / (used in) investing activities (item 2.6 above)	(26)	(118)
4.4	Net cash from / (used in) financing activities (item 3.10 above)	(1)	13,156
4.5	Effect of movement in exchange rates on cash held	(2)	(46)
4.6	**Cash and cash equivalents at end of period**	**17,104**	**17,104**

5.	Reconciliation of cash and cash equivalents at the end of the quarter (as shown in the consolidated statement of cash flows) to the related items in the accounts	Current quarter $A'000	Previous quarter $A'000
5.1	Bank balances	4,239	4,055
5.2	Call deposits	12,500	14,000
5.3	Bank overdrafts	-	-
5.4	Other (provide details) - term deposits for bank guarantees	365	351
5.5	**Cash and cash equivalents at end of quarter (should equal item 4.6 above)**	**17,104**	**18,406**

6.	Payments to related parties of the entity and their associates	Current quarter $A'000
6.1	Aggregate amount of payments to related parties and their associates included in item 1	206
6.2	Aggregate amount of payments to related parties and their associates included in item 2	-

Note: if any amounts are shown in items 6.1 or 6.2, your quarterly activity report must include a description of, and an explanation for, such payments.

7.	**Financing facilities** *Note: the term "facility' includes all forms of financing arrangements available to the entity.* *Add notes as necessary for an understanding of the sources of finance available to the entity.*	**Total facility amount at quarter end $A'000**	**Amount drawn at quarter end $A'000**
7.1	Loan facilities	-	-
7.2	Credit standby arrangements	-	-
7.3	Other (please specify)	-	-
7.4	**Total financing facilities**	-	-

7.5	**Unused financing facilities available at quarter end**	
7.6	Include in the box below a description of each facility above, including the lender, interest rate, maturity date and whether it is secured or unsecured. If any additional financing facilities have been entered into or are proposed to be entered into after quarter end, include a note providing details of those facilities as well.	

8.	**Estimated cash available for future operating activities**	**$A'000**
8.1	Net cash from / (used in) operating activities (item 1.9)	(1,273)
8.2	Cash and cash equivalents at quarter end (item 4.6)	17,104
8.3	Unused finance facilities available at quarter end (item 7.5)	-
8.4	Total available funding (item 8.2 + item 8.3)	17,104
8.5	**Estimated quarters of funding available (item 8.4 divided by item 8.1)**	13.44

Note: if the entity has reported positive net operating cash flows in item 1.9, answer item 8.5 as "N/A". Otherwise, a figure for the estimated quarters of funding available must be included in item 8.5.

8.6 If item 8.5 is less than 2 quarters, please provide answers to the following questions:

8.6.1 Does the entity expect that it will continue to have the current level of net operating cash flows for the time being and, if not, why not?

Answer: N/A

8.6.2 Has the entity taken any steps, or does it propose to take any steps, to raise further cash to fund its operations and, if so, what are those steps and how likely does it believe that they will be successful?

Answer: N/A

8.6.3 Does the entity expect to be able to continue its operations and to meet its business objectives and, if so, on what basis?

Answer: N/A

Note: where item 8.5 is less than 2 quarters, all of questions 8.6.1, 8.6.2 and 8.6.3 above must be answered.

Compliance statement

1 This statement has been prepared in accordance with accounting standards and policies which comply with Listing Rule 19.11A.

2 This statement gives a true and fair view of the matters disclosed.

Date: ....15 July 2026.....

Authorised by: ....By the Board of the Company.....
(Name of body or officer authorising release – see note 4)

Notes

1. This quarterly cash flow report and the accompanying activity report provide a basis for informing the market about the entity's activities for the past quarter, how they have been financed and the effect this has had on its cash position. An entity that wishes to disclose additional information over and above the minimum required under the Listing Rules is encouraged to do so.

2. If this quarterly cash flow report has been prepared in accordance with Australian Accounting Standards, the definitions in, and provisions of, *AASB 107: Statement of Cash Flows* apply to this report. If this quarterly cash flow report has been prepared in accordance with other accounting standards agreed by ASX pursuant to Listing Rule 19.11A, the corresponding equivalent standard applies to this report.

3. Dividends received may be classified either as cash flows from operating activities or cash flows from investing activities, depending on the accounting policy of the entity.

4. If this report has been authorised for release to the market by your board of directors, you can insert here: "By the board". If it has been authorised for release to the market by a committee of your board of directors, you can insert here: "By the [*name of board committee – e.g. Audit and Risk Committee*]". If it has been authorised for release to the market by a disclosure committee, you can insert here: "By the Disclosure Committee".

5. If this report has been authorised for release to the market by your board of directors and you wish to hold yourself out as complying with recommendation 4.2 of the ASX Corporate Governance Council's *Corporate Governance Principles and Recommendations*, the board should have received a declaration from its CEO and CFO that, in their opinion, the financial records of the entity have been properly maintained, that this report complies with the appropriate accounting standards and gives a true and fair view of the cash flows of the entity, and that their opinion has been formed on the basis of a sound system of risk management and internal control which is operating effectively.