28 AUGUST 2026

ASX RELEASE

CEO & MANAGING DIRECTOR'S PRESENTATION TO ANNUAL GENERAL MEETING

Melbourne, Australia: Amplia Therapeutics Limited (ASX:ATX; OTCQB:INNMF), ("Amplia" or the "Company"), is pleased to release the CEO & Managing Director's presentation to the Company's Annual General Meeting (YE 31 March 2026) to be held today.

This ASX announcement was approved and authorised for release by the Board of Amplia Therapeutics.

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About Amplia Therapeutics Limited

Amplia Therapeutics Limited is an Australian pharmaceutical company advancing a pipeline of Focal Adhesion Kinase (FAK) inhibitors for cancer and fibrosis. FAK is an increasingly important target in the field of cancer and Amplia has a particular development focus in fibrotic cancers such as pancreatic and ovarian cancer. FAK also plays a significant role in a number of chronic diseases, such as idiopathic pulmonary fibrosis (IPF). For more information visit www.ampliatx.com and follow Amplia on X (@ampliatx) and LinkedIn.

About Narmafotinib

Narmafotinib (AMP945) is the company's best-in-class inhibitor of FAK, a protein over-expressed in multiple cancers and a drug target gaining increasing attention for its role in solid tumours. The drug, which is a highly potent and selective inhibitor of FAK, has shown promising data in a range of preclinical cancer studies. Narmafotinib is currently being investigated in the ACCENT trial in advanced pancreatic cancer where it is dosed in combination with the chemotherapies gemcitabine and nab-paclitaxel (Abraxane®) in first-line patients. The trial has achieved its desired outcome in achieving a response rate of 36%, superior to chemotherapy alone as reported for the benchmark MPACT study. A median Overall Survival (mOS) of 11.1 months has been reported along with an unprecedented complete response rate of 7.8%. A second trial (AMPLICITY) is being run at sites in Australia investigating the combination of narmafotinib with the chemotherapy mFOLFIRINOX in advanced pancreatic cancer patients, and a third trial in ovarian cancer (the PRROSE trial) is scheduled to begin recruiting later this year.

AGM Presentation

Progress in the development of narmafotinib

Dr Chris Burns CEO and MD

28 August 2026

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ASX: ATX | OTCQB: INNMF

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Amplia THERAPEUTICS

Introduction

Highlights and Strategy

Amplia THERAPEUTICS

Development Highlights

Outstanding results across a range of activities and therapeutic areas

Preclinical data illustrating narmafotinib's efficacy in combination with chemotherapy and targeted drugs, in a range of cancer models including pancreatic, ovarian and lung cancer

Clinical evidence in advanced pancreatic cancer trial in combination with chemotherapy: unprecedented complete response rate when combined with chemotherapy, and superiority to chemotherapy alone across all measures in ACCENT Trial, with favorable tolerability profile

Registrational pathway being finalized - aligned with FDA* input - with first stage of 3-part pivotal study initiated

Collaboration and supply agreement with Lilly expands commercial potential with study in NSCLC**; ANZGOG† partnership** explores clinical opportunity in ovarian cancer

* Food and Drug Administration; † Australia New Zealand Gynaecology Oncology Group

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Development Strategy

Building a robust dataset demonstrating narmafotinib's benefit

What we have achieved

Clinical Trials
Demonstrating benefit in defined patient population

Preclinical studies
Therapeutic efficacy with defined mechanism

Where we are currently

Registrational trial
aligned with regulators for potential product approval

Trial Collaborations
to expand clinical and commercial opportunity

What we are building towards

Product Licence
to third party/ies for commercialization

or

Co-development

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ACCENT Trial in pancreatic cancer

Excellent tolerability and responses observed

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ACCENT Pancreatic Cancer Trial

Narmafotinib + gemcitabine and Abraxane in first-line advanced pancreatic cancer

7.8%

Complete response rate

Chemo alone (~0.2%)

70%

Disease control rate

Chemo alone - 50%

11.1 months

Median overall survival

Chemo alone - 8.5 mos.

No Extra Burden

Safety & tolerability

Over chemo alone

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ACCENT registration pathway

A three-part registration pathway designed around FDA feedback

Underway

ACCENT Mini

Daily dosing at two dose levels
GnP combination
12 patients across 2 cohorts
3–4 Australian sites
Safety, tolerability, PK + efficacy
Biomarker + fibrosis endpoints

Targeting completion

First patient dosing October 2026
Safety and PK review complete Q1 27

ACCENT Reg - P2b

Builds on ACCENT Mini data to compare the two daily dosing levels head-to-head to **identify the optimal dose of narmafotinib** ahead of the Phase 3 study

Following *Project Optimus* principles[1]

Details to be finalized

ACCENT Reg - P3

Pivotal registrational study conducted with the dose selected from P2b

Designed to support FDA submission for narmafotinib approval in pancreatic cancer

Details to be finalized

1. https://www.fda.gov/about-fda/oncology-center-excellence/project-optimus.

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PRROSE Trial in Ovarian Cancer

Building on promising preclinical studies and literature data

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PRROSE Trial

Combining narmafotinib with standard-of-care chemotherapy

An investigator-initiated pilot study led by Dr Gwo Yaw Ho of Monash Health and Monash University, and **sponsored and coordinated through ANZGOG**

~25 Patients
HGSOC
poor chemo response

→

Treatment
Narmafotinib +
Carboplatin / paclitaxel

→

Surgery
interval debulking
surgical resection

→

Endpoints
Safety, surgical eligibility tissue + biomarkers

TRIAL PARTNER ANZGOG

Australia New Zealand Gynaecological Oncology Group is the peak national gynaecological cancer research organisation in Australia and New Zealand, and includes a cooperative trials network spanning major hospitals and leading clinicians across the region

kRAS Inhibitors

An exciting new class of anti-cancer therapies - well suited for FAK inhibitor combination

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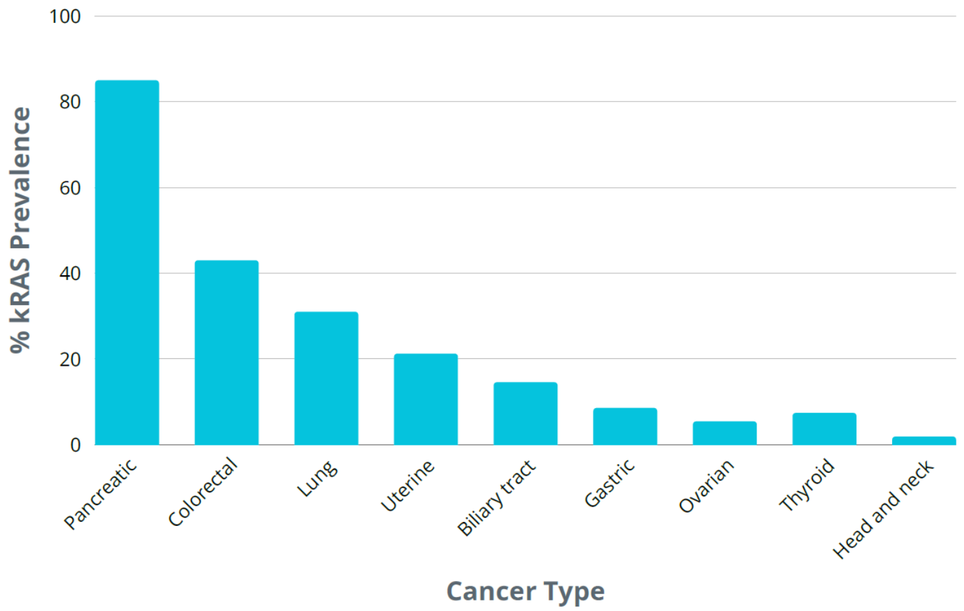
kRAS mutations prevalent in cancer

Significant cancer driver in multiple cancers; multiple drugs in development



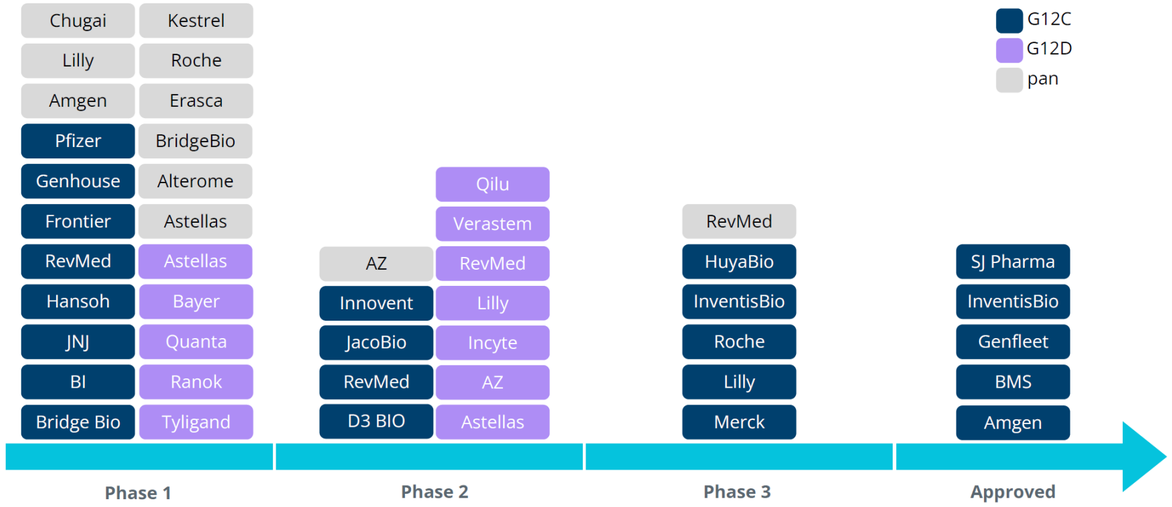


Chart: See Trends in Canc. 2025, 11, 91-116.

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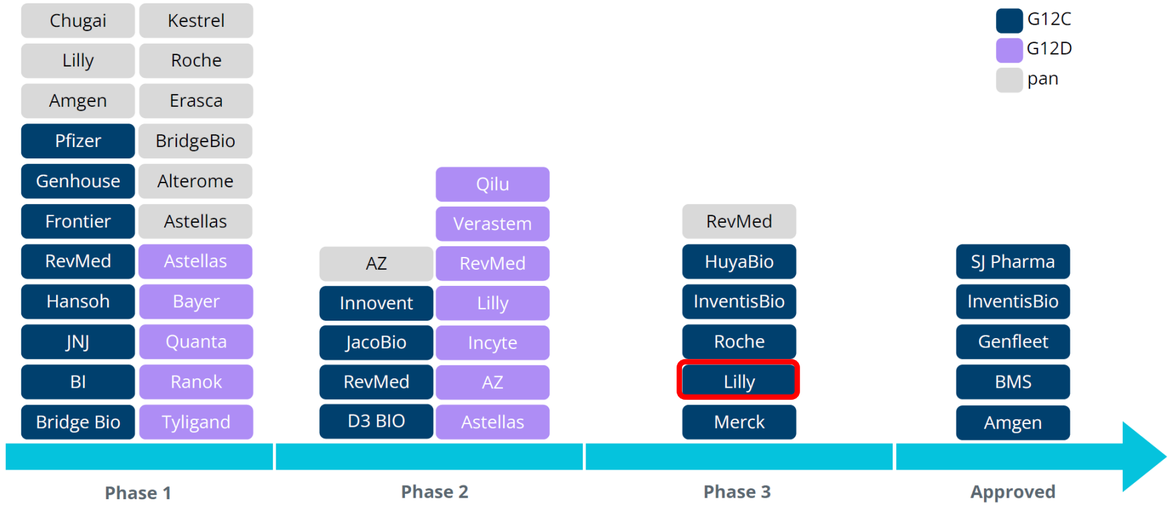
kRAS mutations prevalent in cancer

Significant cancer driver in multiple cancers; multiple drugs in development

Clinical studies demonstrating good activity but **resistance and tolerability a significant issue**[1]

60+ kRAS drugs now in clinical development[2]
Across pancreatic cancer, NSCLC, colorectal cancer and others



"It is now generally accepted that the long-term effectiveness of KRAS inhibitors will not be achieved through mono-therapy, but rather through combination therapy."

Trends in Cancer 2025, 11, 91

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Narmafotinib and kRAS inhibition

Overcoming acquired resistance to kRAS inhibitors

FAK signaling is an escape mechanism to blockade of RAS pathway[1]

Growing evidence for benefit of FAK + kRAS inhibition

- Multiple preclinical studies, including Amplia's own work, showing improved efficacy in combination[2]
- Clinical evidence recently published from small study in China[3]

1. Nat. Rev. Canc. 2021, 21, 313-324; 2. J. Thorac. Oncol. 2026, doi.org/10.1016/j.jtho.2026.103991; Adv. Sci. 2021, 2100250; 3. Lancet Respir. Med. 2026, doi.org/10.1016/S2213-2600(26)00142-6

Lilly Collaboration

kRAS G12C - FAK inhibitor combination

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Lilly Collaboration

Enhancing efficacy for next-generation kRAS G12C inhibitor olomorasib

Previously treated KRAS G12C-mutant advanced or metastatic NSCLC

Phase 1b/2b study

- Australian and US sites
- Approx. 60 patients
- Scheduled to start late 2026

Contractual

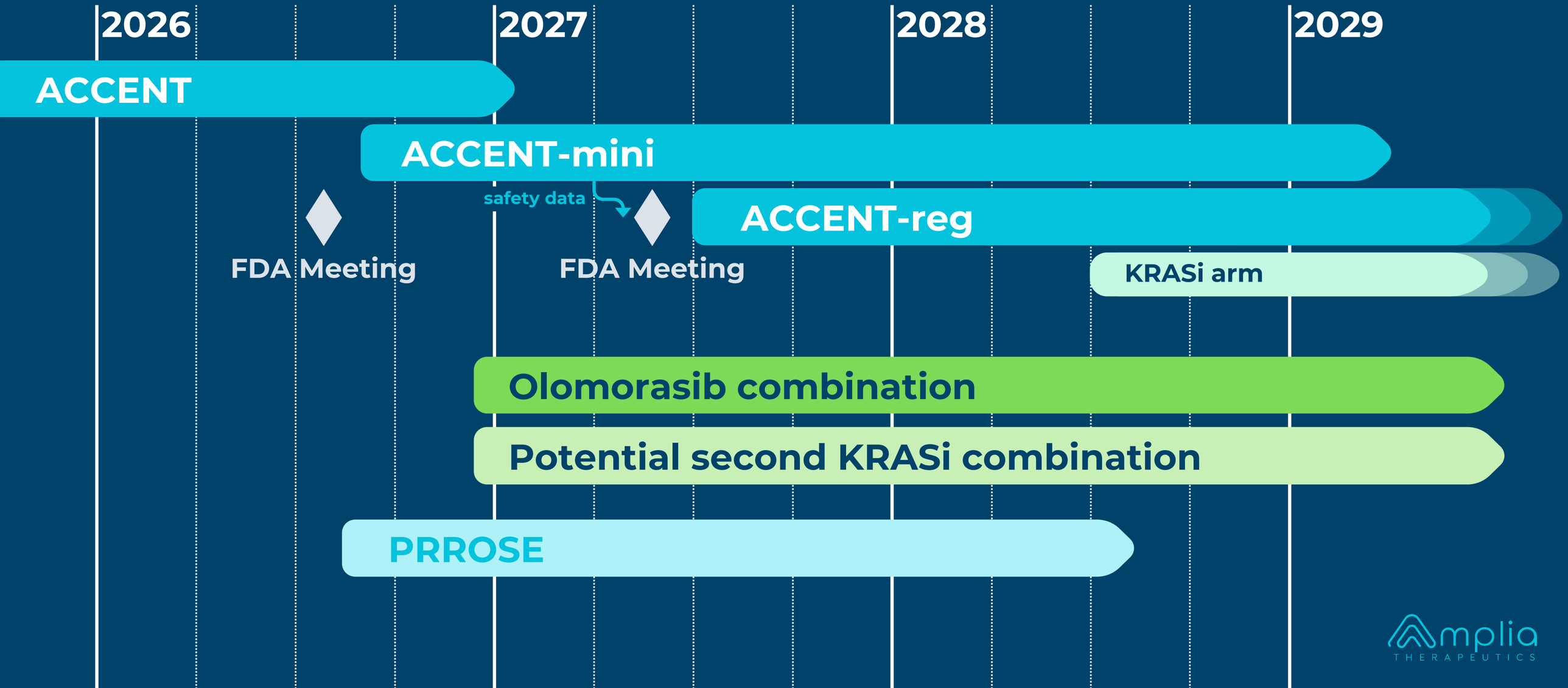
- Amplia to sponsor and fund study using existing funds
- Lilly to supply olomorasib in-kind for use in the study
- Resulting data to be shared between both parties
- Non-exclusive

Olomorasib - a next-generation kRAS G12C inhibitor[1]

- Improved potency and selectivity c/f approved drugs
- Promising P1/2 data has supported further development
- Currently undergoing two global Phase 3 studies in 1L NSCLC

1. Nature Comm. 2026, 17, 3834

Estimated Development Timeline



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