



Revolutionising prenatal genetic screening

IPO INVESTOR PRESENTATION
OCTOBER 2026

Identifai Genetics Limited (ASX CODE: ID1)



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Introducing Identifai Genetics

Developing a non-invasive way to identify congenital and genetic disorders earlier and more comprehensively

- Identifai is developing a comprehensive, early and risk-free approach to detecting the full spectrum of genetic anomalies
- Our initial product offering, Windrose™, is supported by a completed US-Israel Analytic Validity Clinical Trial, which demonstrated **100%** accuracy for disease status
- A larger clinical study is pending and the Company's partnership network continues to expand

- The technology was originally developed by Prof. Noam Shomron and Tom Rabinowitz, MD-PhD, at Tel Aviv University and licensed in 2021
- Identifai has built a strong intellectual property position, supported by 11 patent families and 10 years of accumulated know-how and trade secrets



Prof. Shomron and
Dr. Tom Rabinowitz, TAU



The quest to non-invasively identify all genetic disorders



identifai

Genetic Disease – A Global Concern

3–6%

of all newborns worldwide are affected by a serious congenital or genetic disorder

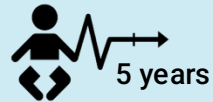
Up to 41%

of infant deaths are linked to single-gene (monogenic) disorders

Alignment to UN Sustainable Development Goals



TARGET 3.2



End all preventable deaths under 5 years of age

By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births.

TARGET 3.7



Universal access to sexual and reproductive care, family planning and education

By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Genuine unmet clinical need



¹ NIPT – Non-Invasive Prenatal Testing

² ACMG – American College of Medical Genetics and Genomics

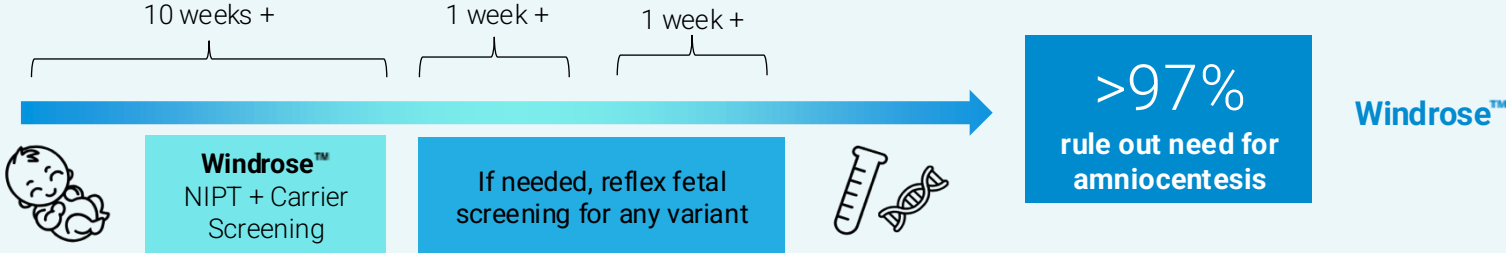
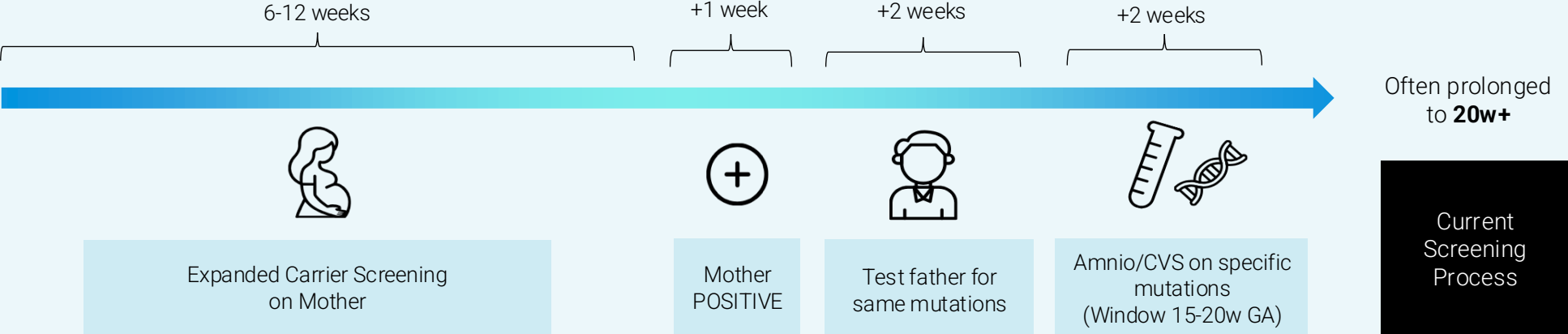
What is the problem with genetic disease screening and intervention today?

- Existing NIPT only addresses a very limited number of genes
- Risks associated with invasive tests e.g. miscarriage
- Positive carrier screening results (prevalent in over 50% of tests) leading to stressful experience
- Intervention may not be administered at effective stage of gestation/birth

What's the solution?

- Non-invasive, single blood sample taken only from the mother
- Accurate fetal genome reconstruction by means of computational, machine learning based sophisticated algorithm
- Early detection, from 9 weeks gestation
- Option for early intervention or therapy including in utero or immediately post-delivery
- Product market fit – i.e. address ACMG guidelines & actionable conditions

Windrose™ is an agile, all-in-one solution

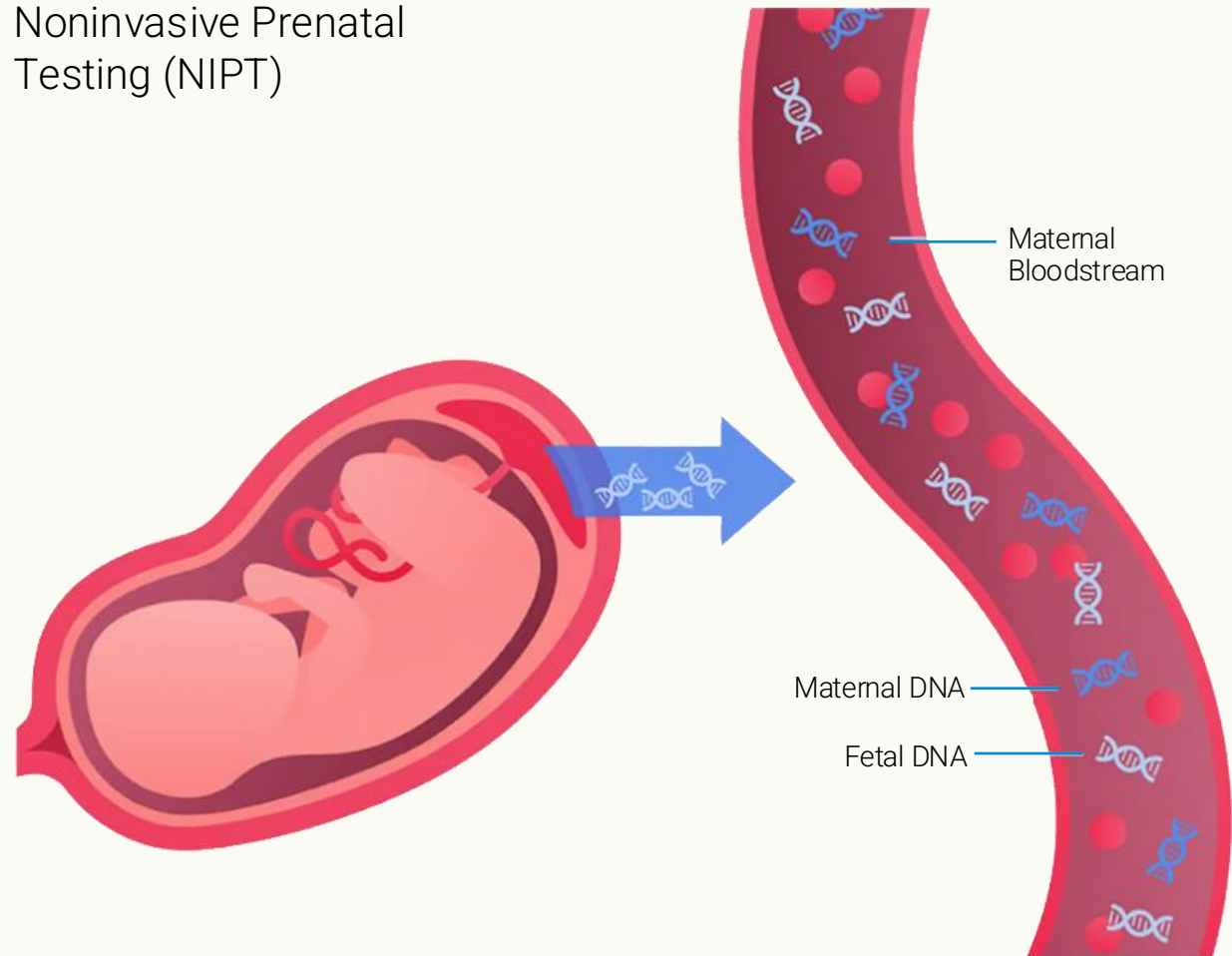


Cell-free DNA in pregnancy

During pregnancy, the maternal bloodstream contains cell-free DNA (cfDNA) which is a mixture of maternal and fetal cfDNA.

Identifai is able to leverage small differences between maternal and fetal cfDNA to detect disease-causing mutations across the entire fetal genome

Noninvasive Prenatal Testing (NIPT)



Identifai addresses actionable conditions | American College of Medical Genetics guidelines

Cohen et al. (The American Journal of Human Genetics, 2025) identified **296 actionable genes** relevant to fetal, delivery, or neonatal intervention.

"many of the disorders included in newborn screening (NBS) programs can cause morbidity or mortality shortly after birth before the receipt of results at 5–7 days of life"

Source: Cohen et al., AJHG, 2025



Time-sensitive intervention



Effective treatment available



Strong gene-disease validity

296

Actionable genes

54

Treatable in utero

267

actionable in the **first week** of life

Review

Advancing precision care in pregnancy through a treatable fetal findings list

Jennifer L. Cohen,¹ Michael Duyzend,^{2,3,4} Sophia M. Adelson,^{5,6} Julie Yeo,⁷ Mark Fleming,⁸ Rebecca Ganetzky,^{9,10} Rebecca Hale,¹¹ Deborah M. Mitchell,¹² Sarah U. Morton,^{13,14} Rebecca Reimers,¹⁵ Amy Roberts,^{14,16} Alanna Strong,^{10,17,18} Weizhen Tan,^{14,19} Jay R. Thiagarajah,^{14,20} Melissa A. Walker,^{2,1} Robert C. Green,^{22,23,24} and Nina B. Gold^{7,14,*}

Pompe disease case study – early information can alter the care pathway

A high-conviction example of how comprehensive fetal genomic information can support clinical action before symptoms emerge.

Why Pompe is an ideal indicative case study

- Well-characterized autosomal recessive disorder: Pathogenic GAA variants cause acid α -glucosidase deficiency, leading to glycogen accumulation and progressive cardiac and skeletal muscle damage.
- Time-critical disease: In severe infantile-onset Pompe disease, disease progression often begins in utero, making prenatal identification important before irreversible organ damage occurs.
- Actionable diagnosis: Early diagnosis enables planning for prompt postnatal enzyme replacement therapy (ERT) and specialized neonatal care.
- Emerging prenatal treatment: Investigational in utero ERT highlights the increasing value of identifying affected fetuses as early as possible.
- Added value beyond newborn screening: Prenatal diagnosis provides additional time for counseling, delivery planning, and preparation for early treatment.

Identifai proof point: prenatal Pompe detection

Two affected pregnancies were identified by maternal blood cfDNA analysis and confirmed by CVS.

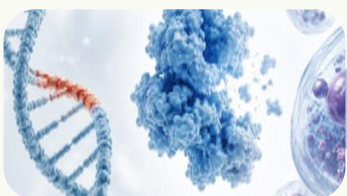


Columbia University Irving Medical Center

Family	#1	#2
Gestational age	10 weeks	12 weeks
Fetal fraction	18.06%	8.64%
Maternal variant	c.-32-13T>G	c.2237G>A (p.W746*)
Paternal variant	c.693-2A>G	c.2132C>G (p.T711R)
Validation	CVS	CVS
Predicted genotype	1/1	1/1

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Realistic clinical visual story



Variant biology and enzyme deficiency



Cardiac / skeletal muscle involvement



Neonatal care and treatment readiness

Identifai is moving actionable disease intelligence into the first trimester. ————— One blood draw can resolve recessive disease risk into actionable fetal genotype information.

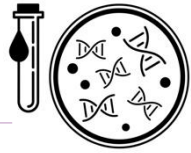
Sources: Identifai internal Pompe case data; FDA prescribing information for approved Pompe therapies; GeneReviews Pompe Disease; Cohen et al., AJHG 2025 actionability framework.

A woman with long blonde hair, wearing a grey sweater, is holding a newborn baby in her arms. They are positioned in front of a large window that looks out onto a green landscape. The woman is looking down at the baby with a gentle smile. The baby is wearing a light-colored long-sleeved shirt and patterned pants. A blue semi-transparent box is overlaid on the left side of the image, containing white text. On the right side of the image, there are several horizontal bars of different colors (purple, blue, red, grey) of varying lengths, some with small colored dots at their ends.

Identifai's Windrose™
a machine-learning
approach to prenatal
detection of disorders

identifai

Windrose™ process



Simple blood draw at
week 9 or after



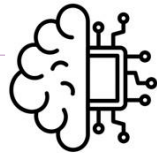
Machine Learning
Core Algorithm

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cfDNA Sequencing



Clinical report



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Windrose™ Basic

1

Chromosomal and Sub-chromosomal Conditions

T13,T18,T21, 22q11.2, SCA, fetal sex

81420 Reimbursement - **\$784**

2

Maternal Expanded Carrier Screening

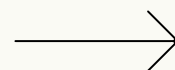
300 genes

ACMG Tier III recommendation and actionable conditions

Basic Carrier Screening Panel – A set of 14 CPT codes, total of **\$3,948**

81443 – Genetic testing for severe inherited conditions **\$2,448**

To be released in Nov-2026



Positive Carrier
Screening/
Post IVF

Windrose™ Monogenic Disorders

3

Fetal Genetic Screening for Recessive Disorders (Inherited)

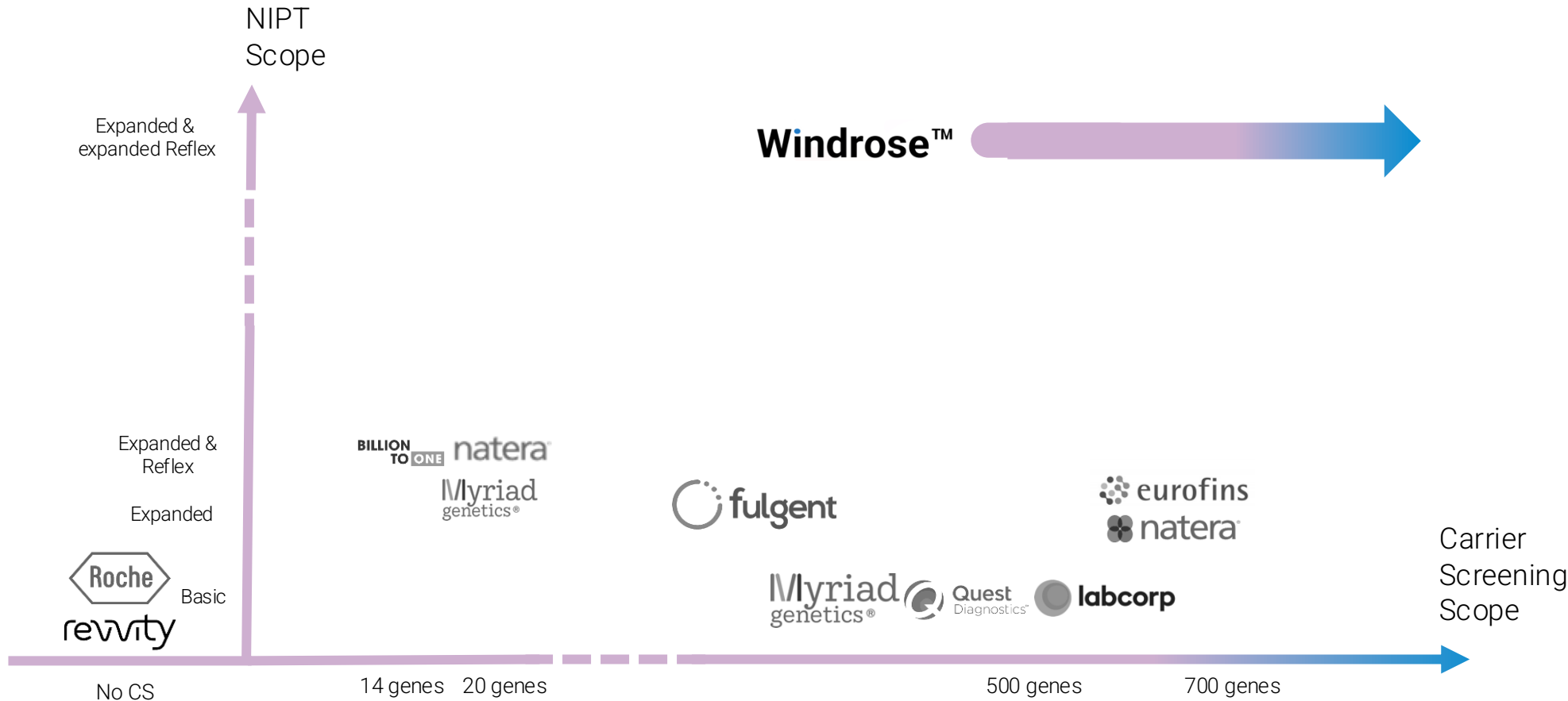
Same 300 genes

Including ACMG Tier III recommendation
and actionable genes

To be released in Jan-2027



Windrose Market Positioning 2026



Validation efforts
are ongoing;
patent family
already in place



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Analytic Validity Clinical Trial



Recruiting Sites (US) 



Recruiting Sites (IL) 



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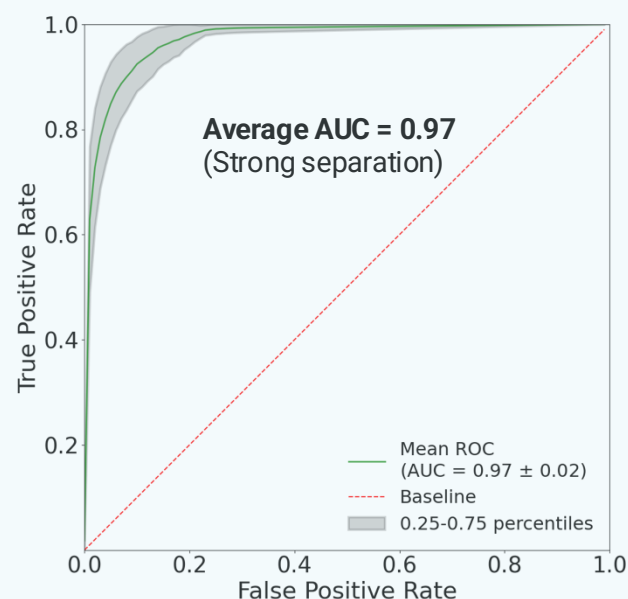


High performance vs diagnostic gold standard (N=50)

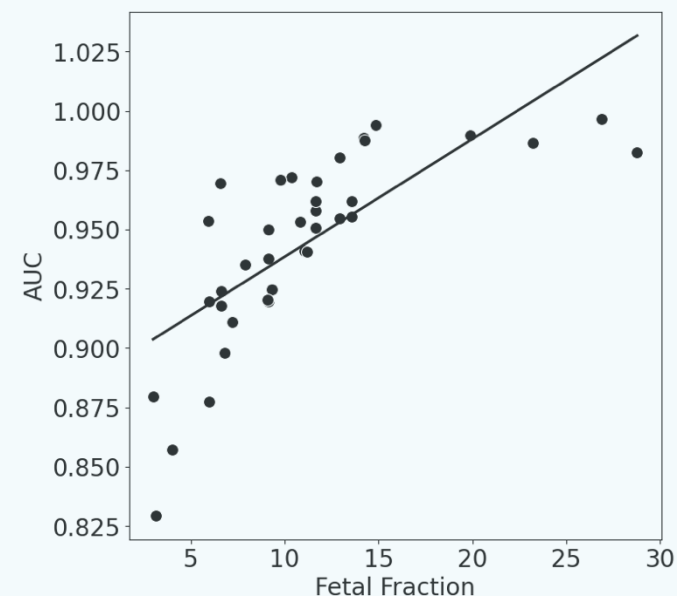
Study design reflected commercial lab process and workflows

100% overall accuracy in detecting inherited disease status (vs gold-standard diagnosis) + Genome-wide approach (not limited to a small gene panel)

Correctly separates affected vs unaffected pregnancies



Works even when fetal DNA signal is low (early pregnancy)



A Comprehensive IP Portfolio



Basic Technology Patent
(US20210340601A1)

Accuracy Boosting and
Specific Solutions
(Haplotypes, Fragmentomics,
AI, more)

11 Patent Families

Granted patents in US, China and
Israel, 3 families at NP, 5 PCTs, 3
Provisionals

Full Freedom to
Operate Analysis
Completed

10 years of
accumulated know
how trade secrets

18

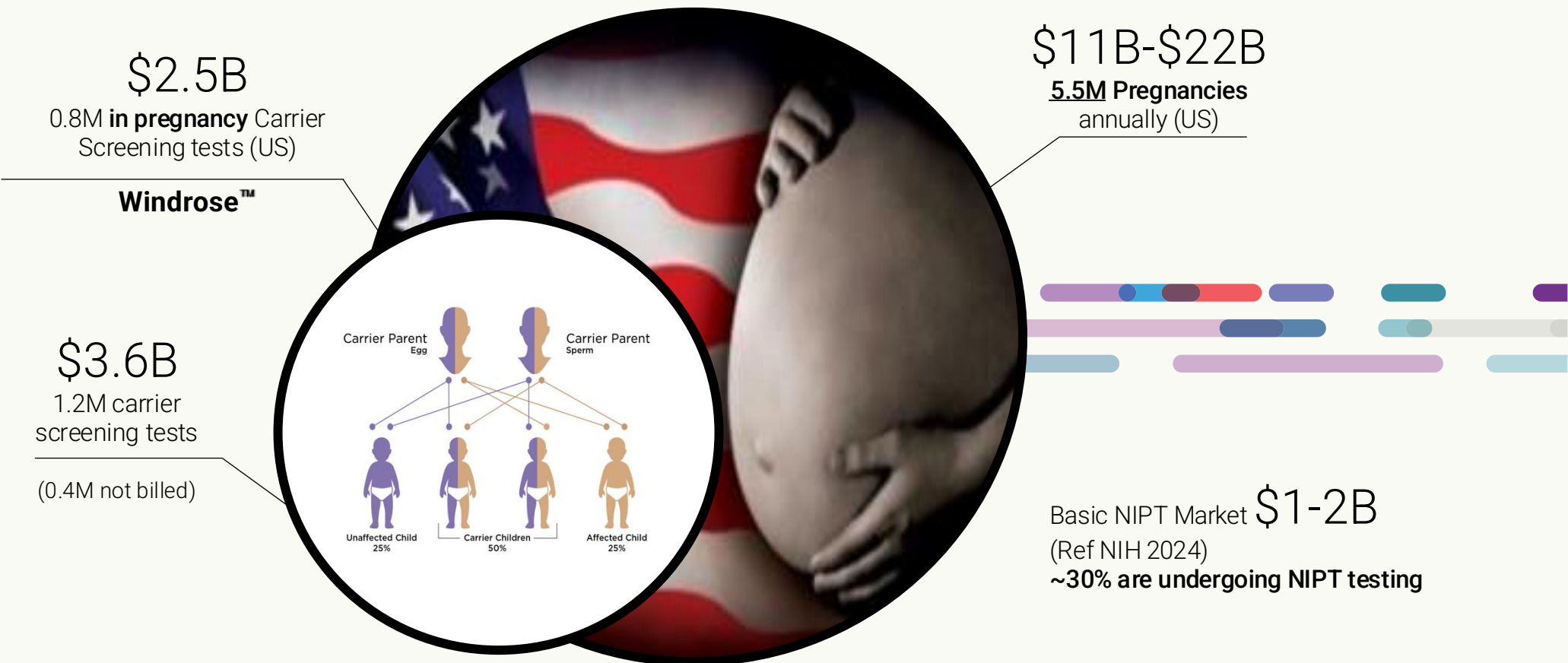


The target
addressable
market is large



identifai

Windrose™ US Market



Windrose™ Market Positioning

Current rate of
identification out of total
genetic conditions

Market Leader
24.6%

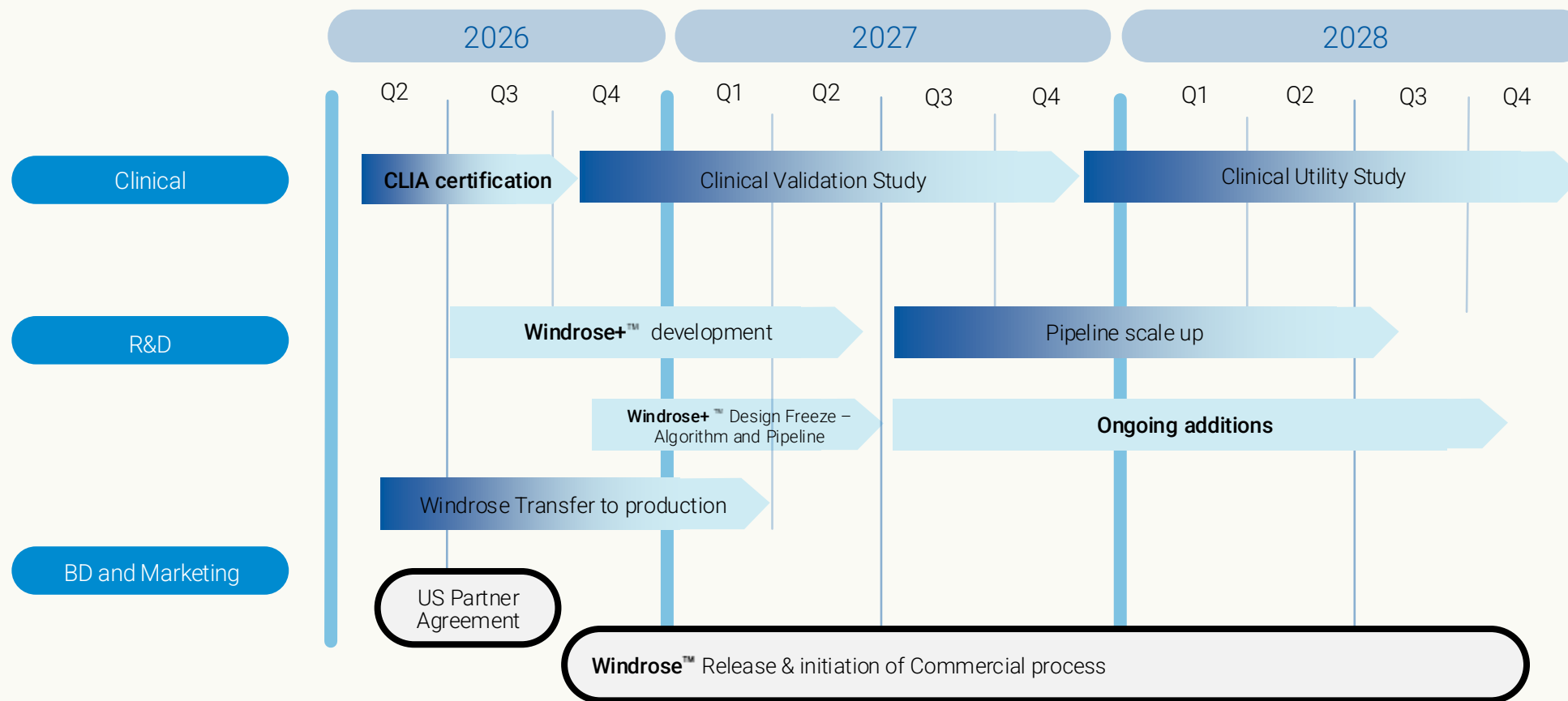
Windrose™
>72.5%

Identifai's development road map and go-to-market plan



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Identifai's 2026-2028 Road Map



Inocras Partnership model

- Inocras Lab's focus is on whole genome sequencing
- It specializes in Cancer and Rare disease, with more than 15,000 patient cases with 3 CAP/CLIA assays
- CAP accredited, CLIA certified and ISO-certified San-Diego lab
- Partners will **collaborate** to bring the "Windrose" test under Identifai Genetics own **CLIA Lab**
- Identifai will run the **Algorithm**/Software part and Inocras will run "**wet-Lab**" infrastructure
- **Establishment of Identifai Inc. in San Diego** Identifai Inc. will lead the U.S. regulatory and CLIA laboratory process, as the **sole license holder**

Locations



Partners



Go-To-Market – US Clinical Validity study

Sample size: 600 Patients

- 50–100 patients per site, results report to patients



*Additional leading
US hospitals



- **GTM** – US market
- **CLIA certification** with Inocras Lab, San Diego for the Laboratory Developed Test ("LDT") expected to commence in **August 2026**
- **US clinical validation study** in planning with **4 hospital sites** secured and another **4 in process**
- **Testing expected from Q4 2026 through Q4 2027**
- Identifai was accepted into the **Mayo Clinic's Berg Innovation Exchange** to develop additional clinical collaborations

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Pro forma
capital structure,
IPO timetable
and comparable
ASX-listed peers

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Pro-Forma Capital Structure

DESCRIPTION	AMOUNT
Total Pre-IPO shares on issue	141,979,023
Total Pre-IPO options on issue	10,954,616
Initial Public Offer (IPO) shares	50,000,000
Price	\$0.20
IPO amount raised	\$10,000,000
Total shares on issue post-IPO	191,979,023
Total options on issue post-IPO	21,109,586
Market Capitalisation on listing (undiluted)	\$38,395,805
Cash	\$10,000,000
Enterprise Value	\$28,395,805
Performance Rights – Tranche 1*	12,884,285
Performance Rights – Tranche 2**	12,884,275

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*Performance Milestone 1 – conversion of the rights into ordinary shares on a 1:1 basis, conditional upon completion of the CLIA certification process via the LDT pathway by 31st December 2026 and 25 cent share price over a 20 day VWAP

**Performance Milestone 2 - conversion of the rights into ordinary shares on a 1:1 basis, achievement of \$3M ARR by 31st July 2028, within 12 months of full commercial launch of Windrose+ and 25 cent share price over a 20 day VWAP
Terms and issue of Performance Rights are subject to ASX approval and amendment

Identifai IPO Timetable

EVENT	DATE
Lodgement of Prospectus with ASIC	Wednesday 2 nd September 2026
Exposure Period begins ²	Wednesday 2 nd September 2026
Opening Date of the Public Offer	Tuesday 8 th September 2026
Closing Date of the Offer ³	Tuesday 29 th September 2026
Receipt of ASX conditional listing letter ⁴	Friday 2 nd October 2026
Allotment and issue of Shares under the Public Offer	Tuesday 6 th October 2026
Expected dispatch of holding statements	Tuesday 6 th October 2026
Shares to begin trading on the ASX	Friday 16 th October 2026

- Notes:
1. Timetable is indicative only
 2. ASIC can extend the exposure period from a 7 day period to a period of 14 days if it has concerns about the document or if it is deemed necessary. We have prepared the table using a 14 day exposure period.
 3. Allowing a 2 week offer period.
 4. Allowing for a 6 week review period for the issue of the ASX conditional listing letter

ASX-listed Peers

Companies developing and commercialising AI-driven diagnostics and targeting the US market

COMPANY	MARKET CAPITALISATION	FIELD/REGULATORY	COMMERCIALIZATION
 ASX proposed: ID1	A\$37.8 million (A\$10 million IPO raise)	Genetic disease (in utero) - LDT CLIA Certification complete October 2026	Commercial launch Q4 2026 CPT/reimbursement codes available
 ASX Code: BB1	A\$95 million	Autism/ADHD - Q1 2027: Outcome from FDA of 510(k) study	Target H1 2027 launch
 ASX Code: AYA	A\$898 million	Coronary Artery Disease FDA Clearance Salix CP Module August 2025	FDA approval Aug 25 First revenues Dec 25 (Tanner Health)
 ASX Code: 4DX	A\$2.27 billion	Pulmonary & Cardiothoracic imaging 9 FDA approved products CTVQ FDA approval Sep 25	FY25 revenue \$5.9 million Underlying SaaS rev up 94% YoY Signed reseller agreement with Phillips

*Valuations on 17th July 2026



Identifai's leadership team and investment thesis



identifai

A well-respected team of industry professionals



EYAL MILLER
CEO

MBA, MA, with 27 years of global experience in Medtech, he has driven innovation at Stratsys, Common Sense, and Nucleix. Led 3D platforms for medical models (Stratsys), spearheaded a noninvasive diagnostic tool for bladder cancer (Nucleix) and directed pioneering efforts in Dental graft technology as CEO at Ivory Graft



PROF. NOAM SHOMRON PhD
CSO

Head of the Functional Genomics Lab at Tel Aviv University's Medical School. Director of the Djerassi Institute of Oncology. Co-founder of several Biotech companies



NOA LISCOVITCH PhD
Head of R&D

PhD in Computational neuro-genomics with expertise in genome engineering and NGS data analysis. Led impactful projects published in top-tier journals. Winner of highly competitive prizes and grants during post-doctoral studies at NYU and NYGC.



GILAD MAGNAZI
COO

MEng in Systems Engineering, B.Sc. in Biomedical Engineering, MBA. Served as CEO and Board member at Empress Medical, led development projects, operations and clinical validation of innovative products in the biomedical industry.



Scientific, market and regulatory advisors



ELENA ASHKINADZE
Rutgers University

- Specialist in medical genetics and genomic counseling.
- Offers clinical insight on patient needs, reporting standards, and test utility.
- Bridges academic expertise with real-world implementation in clinical settings.



DR. BERT GOLD
Laboratory Director

- Veteran molecular geneticist with decades of leadership in lab program development.
- Provides scientific oversight, assay validation guidance, and quality strategy.



DR. LISA BRAILEY
Physician-Scientist & Laboratory Director

- Deep expertise in clinical genetics, molecular diagnostics, and cytogenomics.
- laboratory operations expert with a focus on assay development, regulatory compliance, and integration of advanced genomic technologies into patient care.



Board Members



YOSEPH BORNSTEIN
Chairman

Founder, President, and CEO of Shizim Group, Yoseph is a pioneer of Israel's biotech sector more than 40 years' experience. He is also Co-Founder of Microbot Medical Inc. (NASDAQ:MBOT) and Director of Can-Fite BioPharma (NYSE:CANF), (TASE:CBFI).



KOBI CASPI

Partner, Director, and CFO of Shizim Group, with more than 40 years of leadership experience across finance, M&A, and global operations. He is also Co-Founder of Identifai and ShizimXL.



LUCY ROBB VUJCIC

A commercial barrister and governance specialist with expertise in corporate law and regulatory risk. A Non-Executive Director at BluGlass Ltd (ASX:BLG) and former director of Amaero International Ltd (ASX:3DA). She brings strong ASX governance experience.



ATA GOKYILDIRIM

Non-Executive Director at BluGlass Ltd (ASX:BLG) and a seasoned commercial executive with strong ASX experience, including as former Chair of Immutept Ltd (ASX:IMM). He is currently CRO at Insait IO, where he focuses on revenue growth, commercialisation, and scaling technology businesses.

Key Factors Underpinning Identifai Genetics' Strong Growth Prospects



Unmatched AI-powered platform, capable of detecting more conditions than any other NIPT in the market.



Non-invasive and early detection, reducing the need for amniocentesis



"Future proof" platform – dynamic and modifiable to clinical guidance updates (ACMG, ACOG, ISPD etc.)



Comprehensive genome analysis - the first and ONLY Genome Wide platform



All In one approach – able to provide maternal carrier screening and fetal screening all at once and at an early pregnancy stage (first trimester)

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Thank You



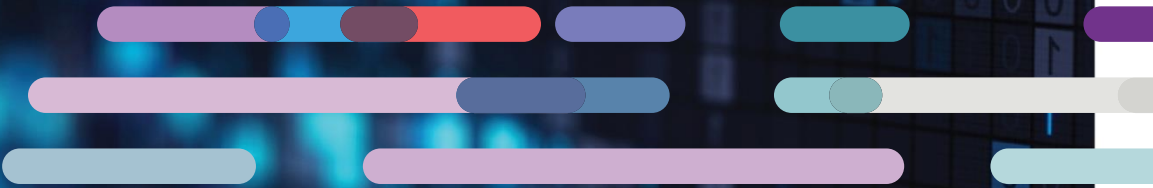
IDENTIFAI GENETICS –
INVESTOR RELATIONS

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IPO INVESTOR PRESENTATION
OCTOBER 2026

Identifai Genetics (ASX proposed: ID1)

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REVOLUTIONISING PRENATAL GENETIC SCREENING