



A company developing innovative, high-impact drugs for cancer

Presentation to Switzer Small & Microcap Conference 2019

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Sydney, Australia

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Forward-Looking Statements

This presentation contains "forward-looking statements" within the meaning of the "safeharbor" provisions of the Private Securities Litigation Reform Act of 1995. Such statements involve known and unknown risks, uncertainties and other factors that could cause the actual results of the Company to differ materially from the results expressed or implied by such statements, including changes from anticipated levels of customer acceptance of existing and new products and services and other factors. Accordingly, although the Company believes that the expectations reflected in such forward-looking statements are reasonable, there can be no assurance that such expectations will prove to be correct. The Company has no obligation to sales, future international, national or regional economic and competitive conditions, changes in relationships with customers, access to capital, difficulties in developing and marketing new products and services, marketing existing products and services update the forward-looking information contained in this presentation.



Investment Rationale



Our lead program, GDC-0084, was **designed by Genentech**, and is being developed for glioblastoma, the most common form of brain cancer, where the only available drug is ineffective for two-thirds of patients



GDC-0084 has shown strong evidence of efficacy in an ongoing phase II human trial in the United States; a pivotal study for registration is planned to commence in CY 2020



Four other clinical trials of GDC-0084 are currently underway at leading US hospitals, all primarily funded by external parties, covering a broad range of primary and secondary brain cancers to provide **multiple shots on goal**



Company is **well-financed**, following a recent institutional placement, with multiple value-driving data read-outs expected during the early part of CY 2020 and high potential to partner with big pharma



Six ongoing clinical trials across two assets, lead program covers full range of brain cancers

GDC-0084				Cantrixil	
Primary Brain Cancer (brain cancer that begins in the brain)		Secondary Brain Cancer (brain cancer that spreads from elsewhere in the body)			Ovarian Cancer
Glioblastoma	DIPG	Brain Metastases	Breast Cancer Brain Mets	Brain Metastases	Platinum- Resistant Ovarian Ca.
Most common and most aggressive brain tumour	Highly aggressive childhood brain tumour	Cancer that has spread from any primary tumour	(combination with Herceptin®)	(combination with radiotherapy)	(combination with chemotherapy)
Phase II	Phase I	Phase II	Phase II	Phase I	Phase I
NCT03522298	<u>NCT03696355</u>	<u>NCT03994796</u>	<u>NCT03765983</u>		NCT02903771
KAZIA	St. Jude Children's Research Hospital	NIH NATIONAL CANCER INSTITUTE	DANA-FARBER	Memorial Sloan Kettering Cancer Center	KAZIA
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Funded by Kazia	Funded Primarily Through Partnerships and External Funding Funded by Kazia				Funded by Kazia



Kazia has delivered all milestones to date, with multiple data read-outs expected over 6-12 months



Note: forward-looking milestones are forecast and indicative but subject to revision



Treatment of brain cancer has improved little in recent decades, unlike other cancers



THERAPEUTICS

Glioblastoma (GBM) is the most common and most aggressive form of primary brain cancer





Temozolomide is only FDA-approved drug for GBM; it is ineffective in \sim 65% of cases



~65% of patients don't respond to temozolomide

Extends overall survival from 12 to 13 months

For these patients, there is no effective pharmacological treatment currently available

Source: ME Hegi, A-C Diserens, T Gorlia, et al. (2005). N Engl J Med 352:997-1003

Note: Temozolomide is only approved therapy for newly-diagnosed patients; Avastin (bevacizumab) is approved for use in recurrent setting



PI3K class is well-validated, but GDC-0084 is unique in its ability to cross the blood-brain barrier





In GDC-0084 phase 1, 7 / 27 patients (26%) showed a 'metabolic partial response' on FDG-PET



Analysis courtesy of Professor Ben Ellingson, UCLA Brain Tumor Imaging Laboratory



In an ongoing phase II study, GDC-0084 shows evidence of delaying tumour progression



Note: figures for existing therapy are for temozolomide, per Hegi et al. (2005); comparison between different studies is never perfectly like-for-like



Brain cancer represents a significant commercial opportunity for GDC-0084, with limited competition





Recent institutional placement leaves the company well funded for next round of data read-outs







The partnering market for new oncology drugs is active and driven by emerging data

Select CY2019 Licensing Transactions

Licensee	icensee Licensor		Asset(s)	Deal Value (US\$)
GILEAD		Discovery	Lipid kinase inhibitors	\$470M
Johnson-Johnson	Genmab	Preclinical	Anti-CD38 antibody	\$275M
Jazz Pharmaceuticals	Red 🛛 Pharma	Preclinical	RAS-RAF-MAPK inhibitors	\$207M
Boehringer Ingelheim	LUPIN	Clinical	MEK inhibitor	\$700M
Mallinckrodt Pharmaceuticals	SILENCE THERAPEUTICS	Discovery	Complement modulator	\$2.0B

Select CY2019 M&A Transactions

Acquirer	Target	Stage	Asset(s)	Deal Value (US\$)
Pfizer	ARRAY BIOPHARMA	Commercial	BRAF inhibitors	\$11.0B
MERCK		Clinical	HIF-2 α inhibitors	\$2.2B
AMGEN		Discovery	Discovery platform	\$167M
Boehringer Ingelheim	ATTAL Therapeutics	Clinical	Cancer vaccine platform	\$367M



The next six months will be an exciting period for Kazia, and a crucial inflection point for our programs

November 2019	Initial interim data from ongoing phase 2 study of paxalisib in glioblastoma	
December 2019	Extraordinary General Meeting (EGM) of shareholders	
February 2020	Half-Year Report	
1Q CY2020	Completion of patient dosing in Cantrixil phase 1 study	
1Q CY2020	Announcement of phase 3 strategy for paxalisib	
2Q CY2020	Potential initial efficacy data from St Jude paxalisib DIPG study	
2Q CY2020	Potential initial efficacy data from Dana-Farber paxalisib breast cancer mets study	
2Q CY2020	Further efficacy data from ongoing phase 2 study of paxalisib in glioblastoma	

Note: all milestones are indicative and subject to periodic revision in light of operational factors and emerging data



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