



A company developing innovative, high-impact drugs for cancer

Presentation to Switzer Small & Microcap Conference 2019

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Sydney, Australia

3 December 2019

Forward-Looking Statements

This presentation contains "forward-looking statements" within the meaning of the "safe-harbor" 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

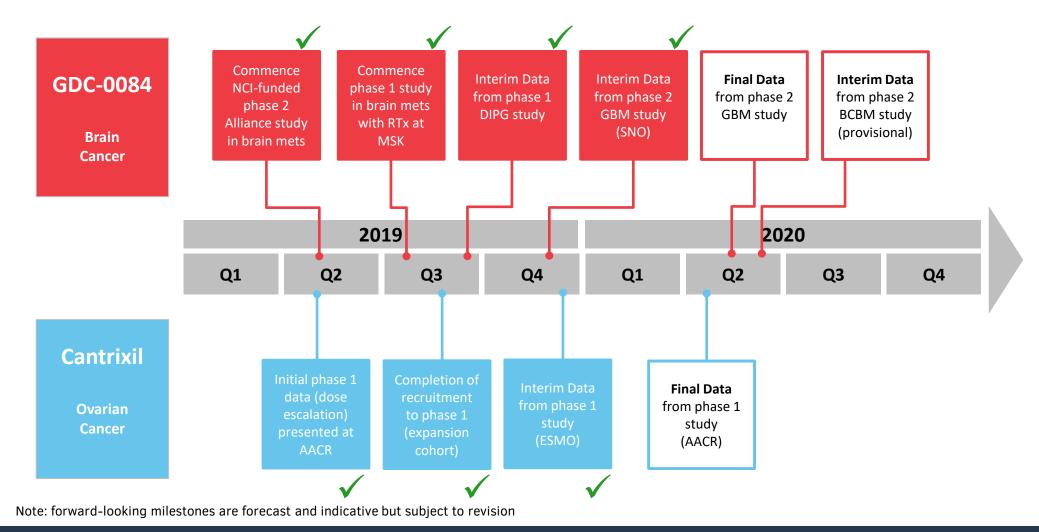
Cantrixil GDC-0084 **Ovarian Primary Brain Cancer Secondary Brain Cancer** (brain cancer that begins in the brain) (brain cancer that spreads from elsewhere in the body) Cancer Glioblastoma **DIPG Brain Brain** Platinum-**Breast Metastases** Resistant Metastases Cancer Ovarian Ca. **Brain Mets** Cancer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

Funded by Kazia

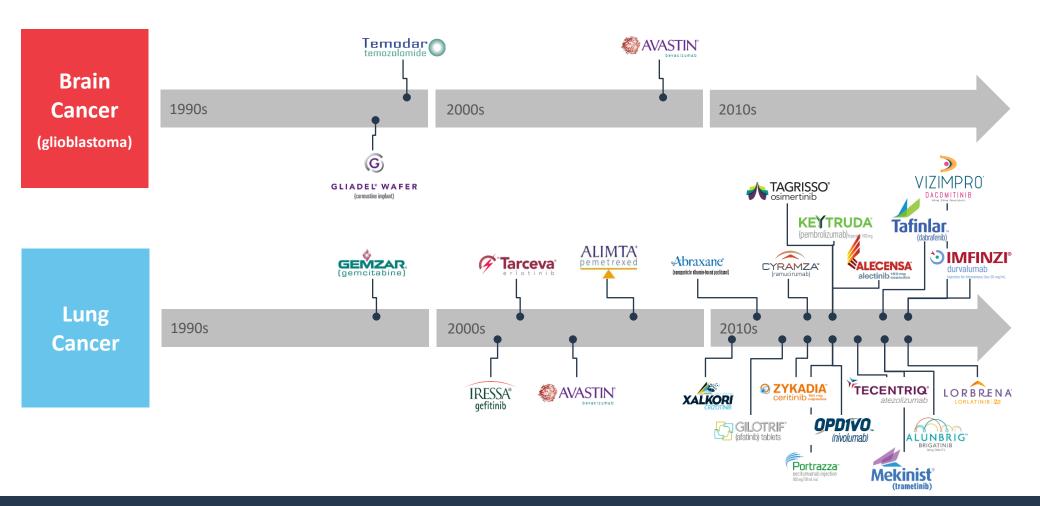
Funded Primarily Through Partnerships and External Funding

Funded by Kazia

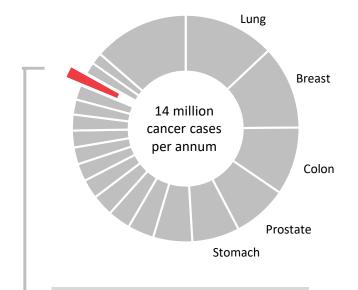
Kazia has delivered all milestones to date, with multiple data read-outs expected over 6-12 months



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



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



No clear cause or strong risk

factors

3-4 monthsuntreated
survival

12-15 months

average survival with treatment

Glioblastoma Multiforme

133,000 cases per annum worldwide

Indicative Market Opportunity

US\$ 1.5 billion

Any age, but most common in Five-year survival

3 - 5%

(breast cancer: 90%)



Sen. John McCain
US politician



Matt Price ABC journalist



Stan Zemanek Media personality



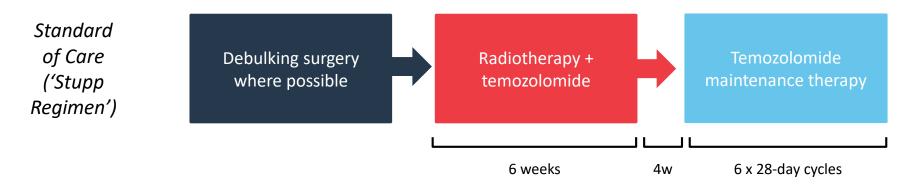
Andrew Olle ABC journalist

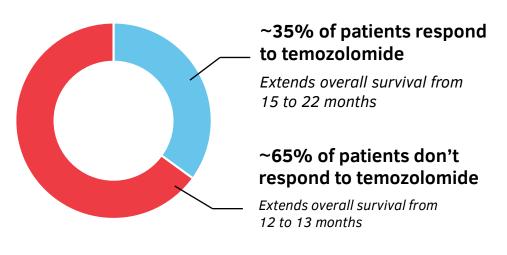


Chris O'Brien, AO Surgeon



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





GDC-0084 is being developed for the ~65% of newly-diagnosed GBM patients who will not respond to existing chemotherapy with temozolomide

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



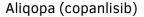








Zydelig (idelalisib)



Copiktra (duvelisib)

Piqray (alpelisib)

GDC-0084











FDA Approved

July 2014

(blood cancers)

[accelerated approval]

FDA Approved
September 2017
(blood cancers)
[accelerated approval]

FDA Approved

October 2018
(blood cancers)

[accelerated approval]

FDA Approved

May 2019

(breast cancer)

[accelerated approval]

In phase II human trials under US FDA oversight (brain cancer)

Does <u>not</u> cross blood-brain barrier

<u>Does</u> cross blood-brain barrier

Potentially fatal liver toxicity and diarrhoea

Potentially fatal infections

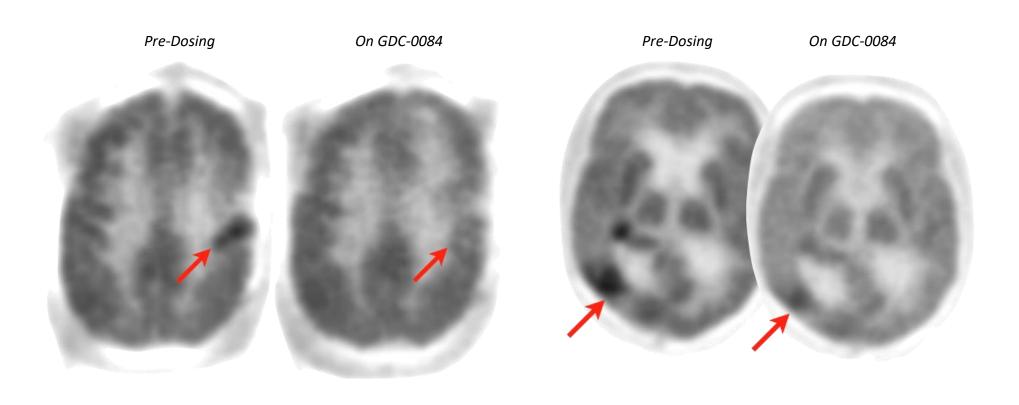
Potentially fatal infections & diarrhoea

Limited toxicities to date

Appears generally safe and well-tolerated thus far

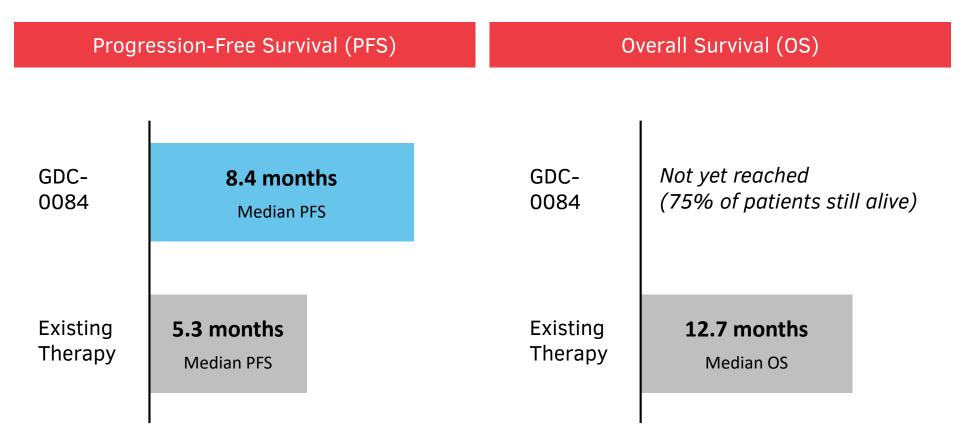


In GDC-0084 phase 1, 7 / 27 patients (26%) showed a 'metabolic partial response' on FDG-PET



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





12,500

patients p.a. in the US

~\$1.5B+

market opportunity

Expansion Opportunities

Brain Metastases (secondary brain cancer)

Other Adult Primary Brain Cancers

Childhood Brain Cancers

'Blue Sky' Potential



Other Cancers with Disordered PI3K Pathway

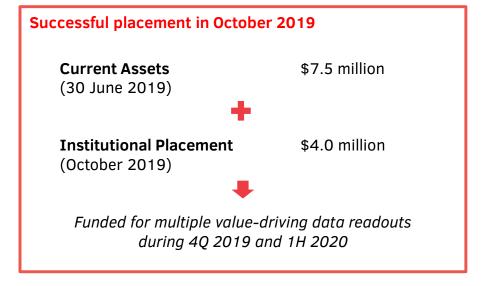
(e.g. breast, lung, blood)



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	Licensor	Stage	Asset(s)	Deal Value (US\$)
GILEAD	CARNA BIOSCIENCES	Discovery	Lipid kinase inhibitors	\$470M
Johnson Johnson	Genmab	Preclinical	Anti-CD38 antibody	\$275M
Jazz Pharmaceuticals	Red	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	Peloton Therapeutics	Clinical	HIF-2 α inhibitors	\$2.2B
AMGEN	NUEVOLUTION	Discovery	Discovery platform	\$167M
Boehringer Ingelheim	ATTA L 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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