SYNTARA™

Shareholder Update; Q4 2023

Gary Phillips, CEO

1st February 2024

Forward looking statement

This document contains forward-looking statements, including statements concerning Syntara's future financial position, plans, and the potential of its products and product candidates, which are based on information and assumptions available to Syntara as of the date of this document. Actual results, performance or achievements could be significantly different from those expressed in, or implied by, these forward-looking statements. All statements, other than statements of historical facts, are forward-looking statements.

These forward-looking statements are not guarantees or predictions of future results, levels of performance, and involve known and unknown risks, uncertainties and other factors, many of which are beyond our control, and which may cause actual results to differ materially from those expressed in the statements contained in this document. For example, despite our efforts there is no certainty that we will be successful in developing or partnering any of the products in our pipeline on commercially acceptable terms, in a timely fashion or at all. Except as required by law we undertake no obligation to update these forward-looking statements as a result of new information, future events or otherwise.

Highlights from December Quarter 2023

- Closed sale agreement for mannitol business unit
  - Securing more than $14m reduction in costs per annum
  - Low double digit royalty on profit from mannitol business
- Successful capital raise of $10m
  - Second of two tranche placement approved at Syntara EGM on January 31st
  - Strong support from existing healthcare specialist institutional investors
  - New institutional fund support on the back of previous successful exits in myelofibrosis
- Myelofibrosis phase 2 study starts recruitment
  - 19 trial sites in Australia, Korea, Taiwan and US
  - 25% recruited as at end of January 2024
  - On track to complete recruitment by mid 2024
- iRBD sleep disorder phase 2 study starts recruitment
- Burn injury scar phase 2 study open for recruitment

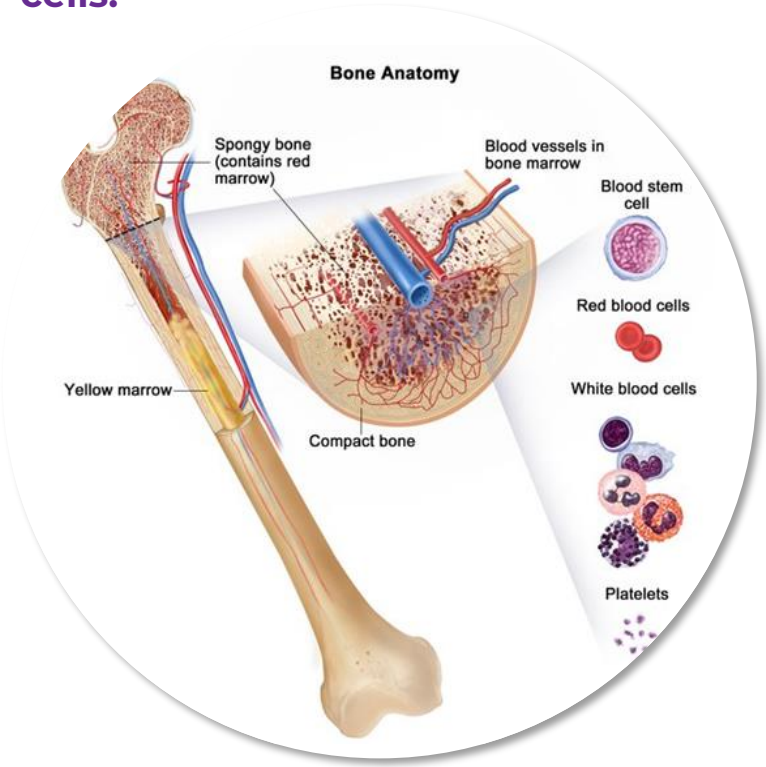
Myelofibrosis

A rare type of bone marrow cancer that disrupts the body's normal production of blood cells

Key Facts

- Affects ~15 in 1m people worldwide
- Age of onset typically from age 50; 5 years median survival
- 11% transformation to leukemia
- Reduced red blood cells can cause extreme tiredness (fatigue) or shortness of breath
- Reduced white blood cells can lead to an increased number of infections
- Reduced platelets can promote bleeding and/or bruising
- Spleen increases blood cell production and becomes enlarged
- Other common symptoms include fever, night sweats, and bone pain.

Primary Myelofibrosis is characterised by a build up of scar tissue (fibrosis) in bone marrow reducing the production of blood cells.



Current standard of care (SoC): JAK inhibition

- Symptomatic relief plus some limited survival improvement.
- 75% discontinuation at 5 years
- Median overall survival is 14 – 16 months after discontinuation

Commercial Opportunity

- Current SoC; revenue ~US$1b per annum
- Recent history of biotech exits in excess of US$1.7b

SNT-5505

In contrast to SoC SNT-5505 intervenes at the source, clearing fibrosis from the bone marrow and enabling the production of healthy blood cells to resume

Clinical positioning

- Distinct mode of action, improved tolerability and a profile suitable for combination with SoC
- In addition to symptomatic relief, potential for disease modification.

Phase 2a study cohort added to trial SNT-5505 in patients on a stable dose of JAK inhibitor

Fastest route to meaningful data with no dose escalation and utilizing existing trial infrastructure

Study Population	Design	Treatment Cohort	Endpoints
• DIPSS Int-2/high risk PMF or post-ET/PV MF • BMF grade 2 or higher • Symptomatic disease (≥ 10 on the MFSAF v4.0) • Treated with RUX ≥12 weeks (stable background dose for ≥8 weeks) and not achieved CR by IWG criteria	Phase 2a open label study to evaluate safety, PK/PD, and efficacy	SNT-5505 200mg BID + stable dose of RUX n = 15 subjects 52 weeks	**PRIMARY** Safety TEAEs **SECONDARY** PK/PD BMF Grade IWG Response SVR Hematology Symptom score Platelet response RUX dose modifications

FDA granted orphan drug designation July 2020 and IND approved August 2020

20 sites across 4 countries to enhance trial recruitment (USA, South Korea, Taiwan, Australia)

No dose escalation step required

ClinicalTrials.gov ID NCT04676529

*Unsuitable = ineligible for JAKi treatment, intolerant of JAKi treatment, relapsed during JAKi treatment, or refractory to JAKi treatment. JAKi – Janus Kinase inhibitor, RUX – Ruxolitinib, MF myelofibrosis, ET Essential Thrombocythaemia, PV polycythaemia vera, INT intermediate, BMF bone marrow fibrosis, RP2D recommended phase 2 dose, TEAE treatment emergent adverse event, PK pharmacokinetics, PD pharmacodynamics, SVR spleen volume response, IWG International Working Group Myeloproliferative Neoplasms

Study Plan

- 20 clinical trial sites scheduled to be open for recruitment by end Q4 2023
- FPFV scheduled for Q4 2023
- Full recruitment scheduled for Q2 2024
- **Interim data for 15 patients with 6 months data scheduled for Q4 2024**
- Full data set by mid 2025

Interim data to drive FDA discussion on pivotal study design and partnering interest

Potential to deliver near term value

Pipeline creates multiple opportunities in high value markets

Drug Candidate	Indication	Phase	Trial design	Status	Upcoming Milestones	Addressable market (US$)
SNT-5505	Myelofibrosis (MF)	Phase 2	• Open label 12 month study (n=15) • MF patients receiving a stable dose of ruxolitinib (JAK inhibitor)	First patient Q4 2023	H2 2024: Interim 6 month data	~$1 billion[1]
	Myelodysplastic Syndrome (MDS)	Phase 1c/2	• Protocol development underway • * Clinical development subject to funding	Planning	-	~$1 billion[2]
Oral and Topical Pan-LOX inhibitors	Scar prevention	Phase 1c	• 6 month placebo controlled trial • Independent investigator trial • Patients with scarring subsequent to burn injury (n=60)	First patient Q1 2024	H1 2025	~$3.5 billion[3]
	Modification of scarring process	Phase 1 /Preclinical	Independent investigator trial Hypertrophic or other problematic scarring Clinical plan under development	Planning	-	~$3.5 billion[4]
SNT-4728	IRBD and Parkinson's Disease	Phase 2	• Double blind, placebo controlled • Patients with Isolated REM sleep behaviours disorder IRBD (n=40) • Majority funded by Parkinson's UK	Recruiting	H1 2025	~$3.5 billion[5]

1) MF: Addressable market, The Myelofibrosis market size across the 8MM was valued at $2.39 billion in 2021 : https://www.globaldata.com/store/report/myelofibrosis-market-analysis/
2) MDS: Addressable market, MYELODYSPLASTIC SYNDROME TREATMENT MARKET ANALYSIS, https://www.coherentmarketinsights.com/market-insight/myelodysplastic-syndrome-treatment-market-775
3) Scar Prevention: Global Scar Market 2020 page 40 and 71; Total scar treatment market in 2019 exceeded US$19b. Keloid and hypertrophic scar segment ~US$3.5b
4) Scar modification: Addressable market, Global Scar Market 2020 page 40 and 71. Total scar treatment market in 2019 exceeded US$19b. Keloid and hypertrophic scar segment ~US$3.5b
5) IRBD / Parkinson's Addressable market, Parkinson's Disease market size across the 7MM was valued at $3.4 billion in 2019 and is expected to achieve a CAGR of more than 6% during 2019-2029. https://www.globaldata.com/store/report/parkinsons-disease-major-market-analysis/

News flow

Recent and anticipated news flow

Strong and growing pipeline with advancement in studies expected to provide value inflection points

Q4 2023

- SNT-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) commenced recruitment (12 December 2023)
- SNT-4728 iRBD / neuro inflammation study commenced recruitment (8 November 2023)
- SNT-5505 phase 2a myelofibrosis study (monotherapy) completed and reports safety and efficacy data at ASH (10 December 2023)

H1 2024

- Pan-LOX scar prevention for burn injuries- clinical trial commences recruitment
- SNT-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) completes recruitment
- Syntara skin scarring clinical development plan announced

H2 2024

- SNT-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) interim data with 6 months treatment.
- SNT-5505 phase 2a myelofibrosis study combination study reports safety and efficacy data target ASH

Shareholders & Cash

Financial Information	31 Jan 24[2]
ASX Code	SNT
Share price	$0.019
Market Cap	A$16m
Proforma cash balance (31 December 2023)[1]	A$13m
Enterprise value	A$3m

Clinical development program supported by:
- R&D tax credits
- Strategy of partnering deals with pipeline assets
- Note there are reduced future cash expenditures and additional cash inflows arising from the sale of the MBU.

1. Proforma cash: Cash $6m plus $7m proceeds of placement second tranche
2. Second tranche of placement and SPP will increase total shares issued, institutional ownership and other market measures

Institutional Ownership[2]	31 Jan 24
BVF Partners LP	12%
D&A Income Limited	10%
Platinum Investment Management Limited	8%
Total Institutional Ownership	**47%**

Share Price

SYNTARA

Syntara Limited ABN 75 082 811 630

Gary Phillips
Chief Executive Officer
gary.phillips@syntaraTX.com.au

David McGarvey
Chief Financial Officer
david.mcgarvey@syntaraTX.com.au

www.syntaraTX.com.au