SYNTARA™

Quarterly Shareholder Update: March 2024

Gary Phillips, CEO

30th April 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 March Quarter 2024

- Myelofibrosis phase 2 study recruiting on schedule
  - 19 trial sites in Australia, Korea, Taiwan and US
  - **60% recruited as at end of April 2024**
  - On track to complete recruitment by mid 2024
  - Interim data at American Society of Hematology Dec 2024
- Myelodysplastic Syndrome study receives government grant
  - Nature publication demonstrating clear pre clinical evidence for efficacy now followed through with funded phase 1c/2 study
  - Collaboration with University of Newcastle and Australasian Leukemia and Lymphoma Group
  - Study to commence recruitment in H2 2024.
- Transition period for sale of mannitol business unit on schedule
  - $14m per annum cost reduction on track
  - Full direct responsibility for all costs of the MBU other than the facility lease transferred to Arna Pharma
  - Facility lease expected to transfer in the current quarter

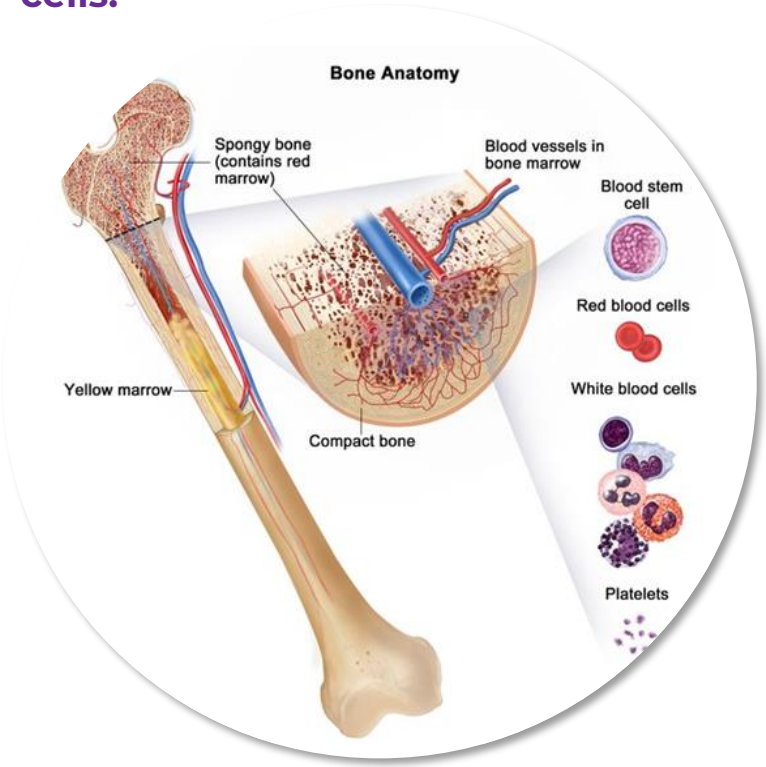
Myelofibrosis

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.

SNT-5505 Phase 2a trial (INTERIM results)

Demonstrates improvements in fibrosis grade, excellent safety profile and promising signs of clinical activity

Study status

- 100% of target (24 pts) enrolled
- 11 patients having completed 24 weeks of treatment

Safety

- SNT-5505 has been well tolerated with no serious treatment related adverse events reported
- Majority of AEs were mild and not related to treatment
- 11 patients have dropped out of the study, none treatment related

Efficacy

- 5/ 10 evaluable patients* had improved bone marrow fibrosis scores of ≥1 grade
  - 4 out of 5 fibrosis responders demonstrating stable/improved haematological parameters
  - 3 out of 5 patients reporting symptomatic improvement
- 4 had an improvement in symptom score of >20%
- 7 had stable/improved hemoglobin (Hb) counts
- 8 had stable/improved platelet counts;
  3 of these 8 patients entered the study with Grade 4 (potentially life-threatening) thrombocytopenia
- No spleen volume response (SVR35) was identified
  - Patients had a relatively smaller spleen size# at baseline
  - Majority of patients stopped JAKi treatment less than 1 month before commencing treatment

*One of the 10 patients who completed the 6 months treatment could not be evaluated for bone marrow fibrosis grade due to an insufficient sample at baseline
#Median spleen volume of 1495ml versus COMFORT-1 (ruxolitinib) of 2598ml

Phase 2a study; 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

	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

Targeting 19 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

- 19 clinical trial sites
- Recruitment started 13 Dec 2023
- **60% recruited April 30th**
- Full recruitment scheduled for H1 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	Upcoming Milestones	Addressable market (US$)
SNT-5505	Myelofibrosis (MF)	Phase 2	Interim 6 month data Q4 2024	**~$1 billion[1]**
	Myelodysplastic Syndrome (MDS)	Phase 1c/2	Data H1 2025	**~$3.2 billion[2]**
Oral and Topical Pan-LOX inhibitors	Scar prevention	Phase 2	Data H1 2025	**~$3.5 billion[3]**
	Modification of scarring process	Phase 1 /Preclinical	Plan update mid 2024	**~$3.5 billion[4]**
SNT-4728	IRBD and Parkinson's Disease	Phase 2	Data 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/

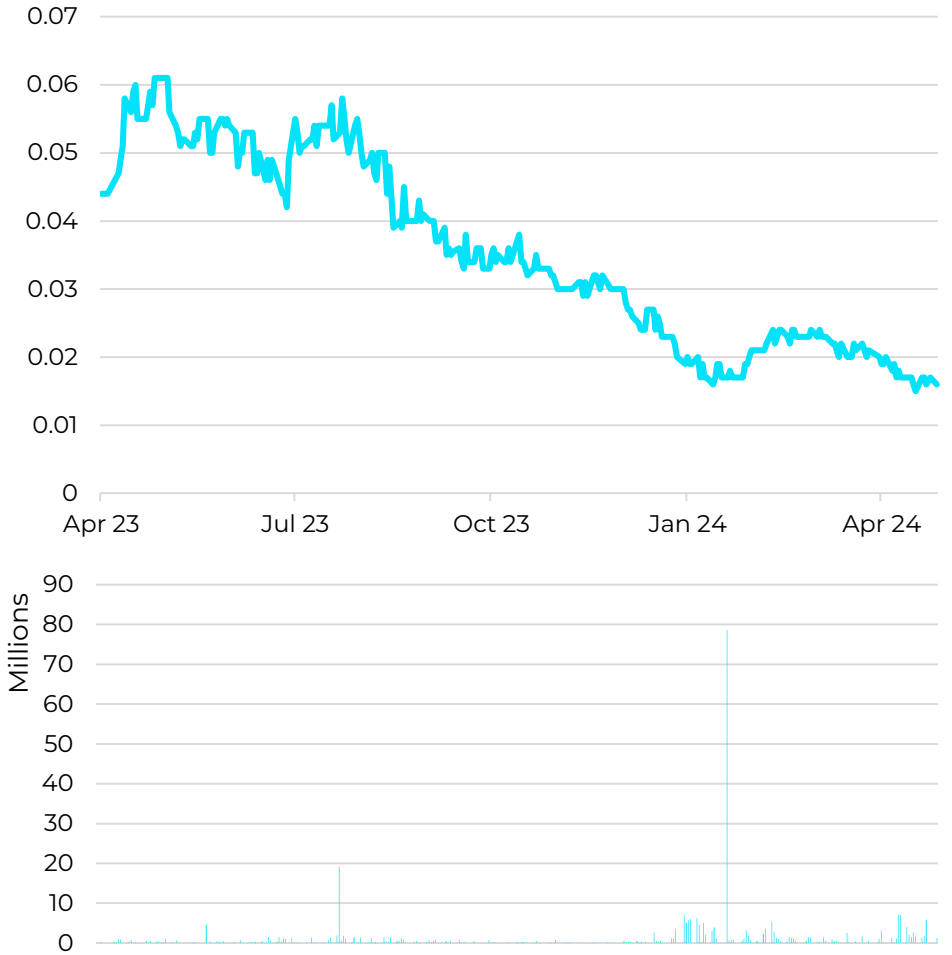
Shareholders & cash

Financial Information (ASX: SNT)	28 April 24
Share price	$0.017
Market Cap	A$20m
Cash balance (31 March 2024)[1]	A$7m
Enterprise value	A$13m

Note:
1. Additional funds expected from acquiror of MBU (~$6m) and returned security deposit ($1m).
2. Clinical development program supported by:
   a. R&D tax credits (FY 2023: $5.2 million)
   b. Strategy of partnering deals with pipeline assets
3. There are reduced future cash expenditures arising from the sale of the MBU - $14m pa

Institutional Ownership	31 Mar 24
D&A Income Limited	20%
Platinum Investment Management Limited	20%
BVF Partners LP	9%
Total Institutional Ownership	**59%**

Share Price & Volume



Recent & upcoming news flow

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

COMPLETED Q4 2023
SNT-4728 iRBD / neuro inflammation study commenced recruitment (8 November 2023)

COMPLETED Q4 2023
SNT-5505 phase 2a myelofibrosis study (monotherapy) completed and reports safety and efficacy data at ASH (10 December 2023)

COMPLETED Q4 2023
SNT-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) commenced recruitment (12 December 2023)

Q2 2024
Pan-LOX scar prevention for burn injuries- clinical trial commences recruitment

Mid 2024
SNT-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) completes recruitment

Mid 2024
Syntara skin scarring clinical development plan announced

Mid 2024
SNT-4728 iRBD / neuro inflammation study recruitment update

H2 2024
SNT-5505 phase 1c/2a myelodysplastic syndrome study to commence recruitment

H2 2024
SNT-5505 phase 2a myelofibrosis monotherapy study publication

Dec 2024
SNT-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) interim data with 6 months treatment reports safety and efficacy data target ASH

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