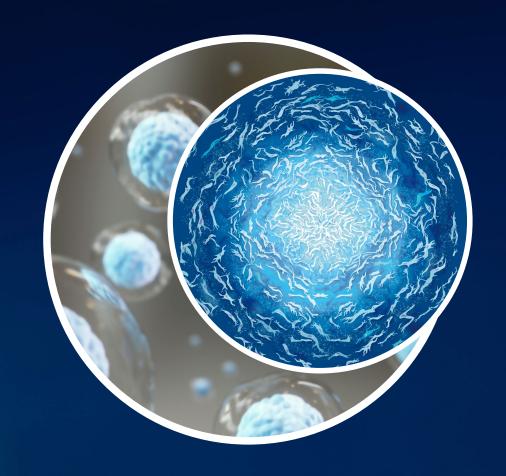


A Clinical Stage Next Generation Stem Cell Therapeutics Company





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Company highlights

Revolutionary Cymerus™ manufacturing platform

- Mesenchymal stem cells (MSCs)¹ have shown potential to treat a wide range of illnesses²
- However, standard manufacture requires ongoing supply of donors and extensive MSC culture expansion

 → challenges with consistency, potency and scale
- The induced pluripotent stem cell (iPSC)-based Cymerus™ platform overcomes these challenges by enabling production of an effectively limitless number of consistent MSC doses from a single blood donation

Cynata leads the burgeoning iPSC-derived therapy field

- First completed iPSC clinical trial worldwide
- US FDA Orphan Drug Designation³ and cleared IND⁴
- Compelling clinical data in acute graft versus host disease (aGvHD)⁵ and diabetic foot ulcer (DFU)⁶
- Four active clinical programs (including ongoing Phase 2 and Phase 3 trials)
- Three randomised controlled clinical trial readouts upcoming between late 2024 and early 2026



- . Also known as mesenchymal stromal cells
- 2. Zhou J, Shi Y. Cell Mol Immunol 20, 555–557 (2023)
- CYP-001 granted Orphan Drug Designation for treatment of aGvHD qualifies Cynata for incentives including extended marketing exclusivity, tax credits and fee waivers
- IND = Investigational New Drug application the clearance required from FDA to conduct clinical trials
- Completed Phase 1 clinical trial in steroid-resistant aGvHD;
- Initial data in first 16 patients (n=8 per group) after 10 weeks; final results in all 30 patients expected in Q4 2024/Q1 2025

Advanced and diverse clinical pipeline

Indication	Trial phase	Upcoming catalysts*	Market opportunity
cute Graft vs Host Disease (aGvHD) YP-001 OA Orphan Designation	Phase 2 ongoing	Enrolment completion – Q4 2024 Results – 2H 2025	US\$600m ¹
iabetic Foot Ulcers (DFU) YP-006TK	Phase 1 ongoing (enrolment complete)	Results – Q4 2024/Q1 2025	US\$9.6bn ²
steoarthritis (OA) YP-004	Phase 3 ongoing	Results – 1H 2026	US\$11.6bn ³



(managed by USYD, funded by NHMRC)

Kidney Transplantation

CYP-001

(managed and funded by LUMC)

Phase 1/2 approved

Enrolment start - Q4 2024

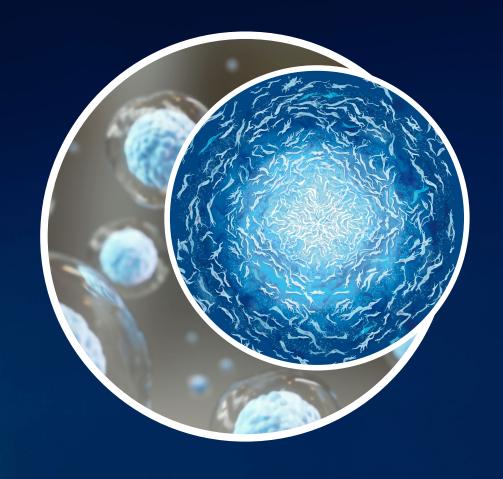
Cohort 1 results - Q1 2025

US\$5.9bn4

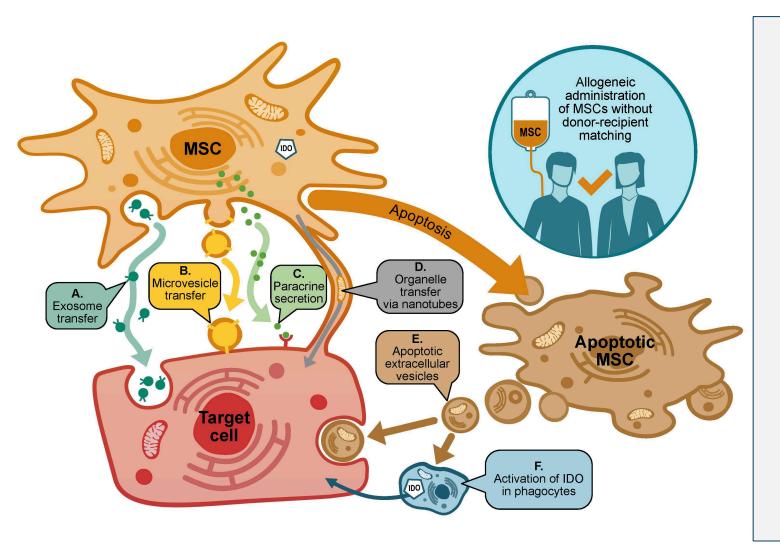


1. Global Graft versus Host Disease Market 2019-2029 (Reflects forecast market in 2026); 2. Zion Market Research, 2019 (represents global treatment market in 2025); 3. Persistence Market Research 2018 research report: "Osteoarthritis Treatment Market: Global Industry Analysis (2012-2016) and Forecast (2017-2025) (Reflect OA market by 2025); 4. Organ Transplant Immunosuppressant Drugs Market in 2026, Grand View Research, Inc., 2019

Revolutionary iPSC-based Cymerus™ Manufacturing Platform



Therapeutic potential of MSCs



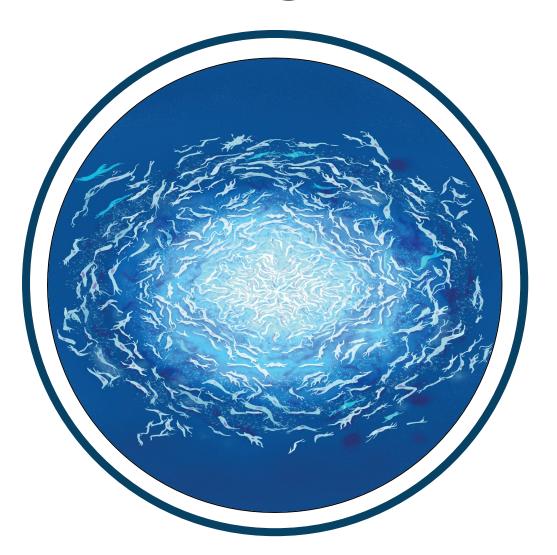
Mesenchymal stem cells¹ (MSCs):

- Promote an immunomodulatory environment²
- The "sensor and switcher of the immune system"³
- Promote tissue repair and regeneration
- Can be used without matching donors to recipients
- Can be engineered to express other functional/therapeutic molecules
- However, with conventional manufacturing methods, there are consistency, potency and scalability challenges



- 1. Also known as mesenchymal stromal cells
- 2. Kelly and Rasko, Front. Immunol. 12:761616 (2021)
- Sarsenova et al. Front. Immunol.13:1010399 (2022)

Advantages of iPSC-based platform



Induced pluripotent stem cells (iPSCs):

- Mature adult cells reprogrammed to become pluripotent, which means:
 - Effectively limitless proliferation capacity
 - Potential to differentiate into any adult cell type (including MSCs)
- Similar properties to embryonic stem cells ...
 but iPSCs are derived from adult donors, so
 they avoid ethical controversy associated with
 embryonic stem cells
- → iPSCs are **ideal** starting material for commercial production of cellular products



Conventional MSC process

Ongoing need for new donors



Substantial interdonor variability MSC isolation



Small number of MSCs per donation

Culture expansion



Extensive MSC culture expansion required

Major challenges:

- MSCs undergo functional changes and loss of potency during extensive culture expansion
- Continuously finding and testing new donors is logistically challenging
- Inter-donor variability –
 inconsistent activity in MSCs from
 different donors

Cymerus™ iPSC-based process

One donor, one time



Avoids inter-donor variability

Reprogramming & iPSC expansion



Effectively **limitless** expansion potential

Robust patent protection

Differentiation into MSCs & culture expansion



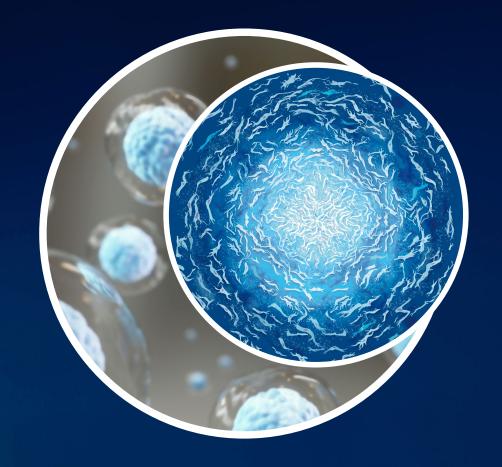
Minimal MSC culture expansion

Advantages of **Cymerus™** platform:

- expansion potential
- Avoids need for new donors
- Avoids inter-donor variability
- Avoids extensive MSC culture expansion
- High level of potency, consistency and scalability

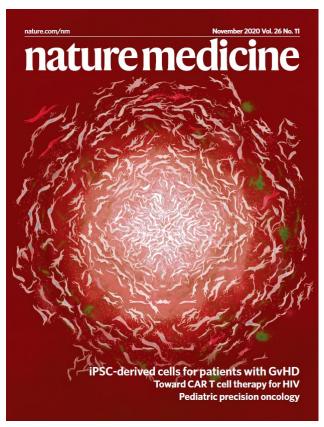


Compelling Clinical Data



CYP-001: Two Nature Medicine publications

- CYP-001 has been granted Orphan Drug Designation by the US FDA for the treatment of GvHD
- Phase 1 trial of CYP-001 was the first completed clinical trial worldwide with any iPSC-derived product





LETTERS

https://doi.org/10.1038/s41591-020-1050-x

Nature Medicine 26, 1720–1725 (2020)

Production, safety and efficacy of iPSC-derived mesenchymal stromal cells in acute steroid-resistant graft versus host disease: a phase I, multicenter, open-label, dose-escalation study

Adrian J. C. Bloor 1,2 Amit Patel 1, James E. Griffin, Maria H. Gilleece 4, Rohini Radia, David T. Yeung, Diana Drier, Laurie S. Larson, Gene I. Uenishi, Derek Hei, Kilian Kelly 1, Igor Slukvin 9 and John E. J. Rasko 1,13,14 Amid

nature medicine

Nature Medicine 30, 1556–1558 (2024)

https://doi.org/10.1038/s41591-024-02990-z

Two-year safety outcomes of iPS cell-derived mesenchymal stromal cells in acute steroid-resistant graft-versus-host disease

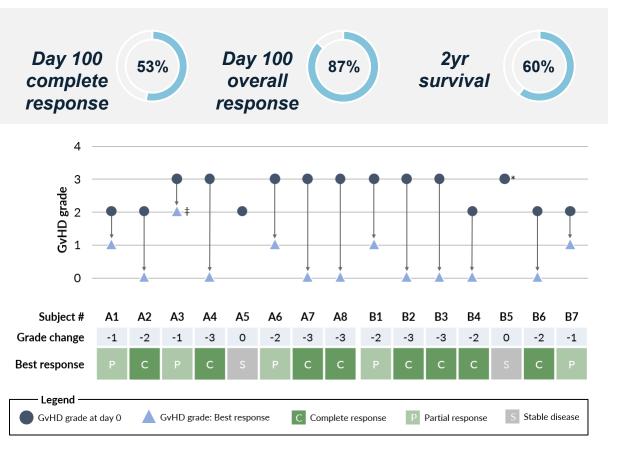
Kilian Kelly ¹, Adrian J. C. Bloor ², James E. Griffin³, Rohini Radia⁴, David T. Yeung ^{5,6} & John E. J. Rasko ^{7,8,9} □



aGvHD | Phase 1 clinical trial - results

Product: CYP-001 (Cymerus™ MSCs for intravenous infusion)

Trial conducted in 15 patients with steroid-resistant aGvHD (SR-aGvHD)



For further information: https://clinicaltrials.gov/study/NCT02923375

- CYP-001 was shown to be safe and well tolerated, with sustained outcomes up to 2 years after the first infusion
- No serious adverse events or other safety concerns related to CYP-001
- Very encouraging response rates and overall survival



⁻ Subjects received 1x10⁶ cells/kg (max 1x10⁸ cells) or 2x10⁶ cells/kg (max 2x10⁸ cells) by IV infusion on D0 and D7

⁻ Eight subjects were enrolled in each cohort, but one subject in Cohort B withdrew prior to infusion of CYP-001 ‡ Subject A3 showed a PR at Days 14 and 21 but died due to pneumonia on Day 28; * Subject B5 withdrew from the trial on Day 22 to commence palliative care

Ph1 SR-aGvHD results compared to other therapies

	CYP-001 (Ph 1)	Ruxolitinib (Ph 3)	"Best available therapy" controls (Ph 3)
Day 28 Overall Response	67%	62%	39%
Day 56-60* Overall Response	73%	40%	22%
Overall Survival	60% after <u>2 years</u>	38% after <u>18 months</u>	36% after <u>18 months</u>
Safety	No safety concerns related to CYP-001 identified	Serious adverse reactions to ruxolitinib are common	Several other agents investigated for GvHD have poor safety profiles

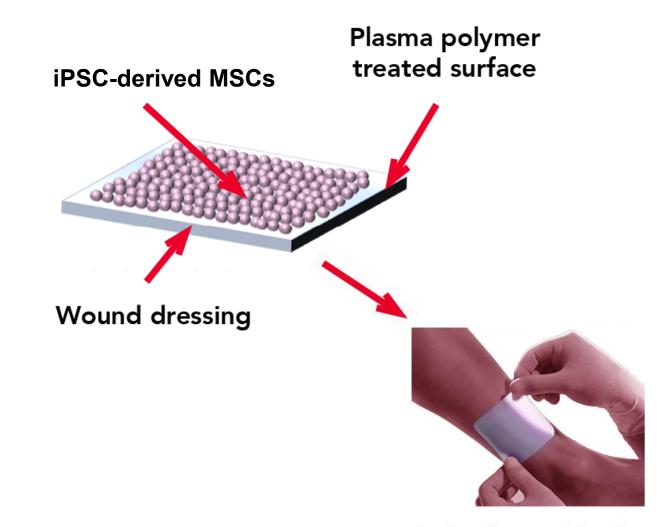
Notes:

- Ruxolitinib is approved for treatment of SR-aGvHD in most jurisdictions
- Comparisons are for illustrative purposes only; data taken from different clinical trials with different sample sizes (BAT: n=155; Rux: n=154; CYP-001: n=15)
- D28/D56-60 time points used for response rate comparison as D28/D56 were the only response rate time points reported in the ruxolitinib/best available therapy clinical trial (NCT02913261); Overall Response at Day 56-60 refers to Day 56 response for ruxolitinib and best available therapy, and Day 60 response for CYP-001.



CYP-006TK – a novel topical MSC product

- CYP-006TK utilises a proprietary surface-coating, optimised for the delivery of MSCs directly to the wound bed
- Technology exclusively licenced to Cynata by Tekcyte Limited (agreement for Cynata to acquire this IP outright announced 1 July 2024)







DFU | Phase 1 clinical trial – initial data

Product: CYP-006TK (topical Cymerus™ MSC wound dressing)

- Ongoing trial in non-healing diabetic foot ulcer (DFU)
- Patients randomised to receive standard of care (SoC) or CYP-006TK for 4 weeks, followed by SoC
- In the first 16 patients enrolled in the trial (8 per group), after 10 weeks' follow-up, the median reduction in wound surface area was:
 - 87.6% in the active CYP-006TK group
 - compared to 51.1% in SoC group

Example of ulcer healing in patient treated with CYP-006TK:

Day 0

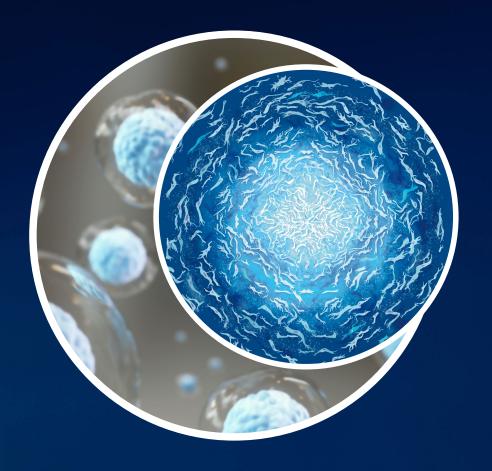


Day 28



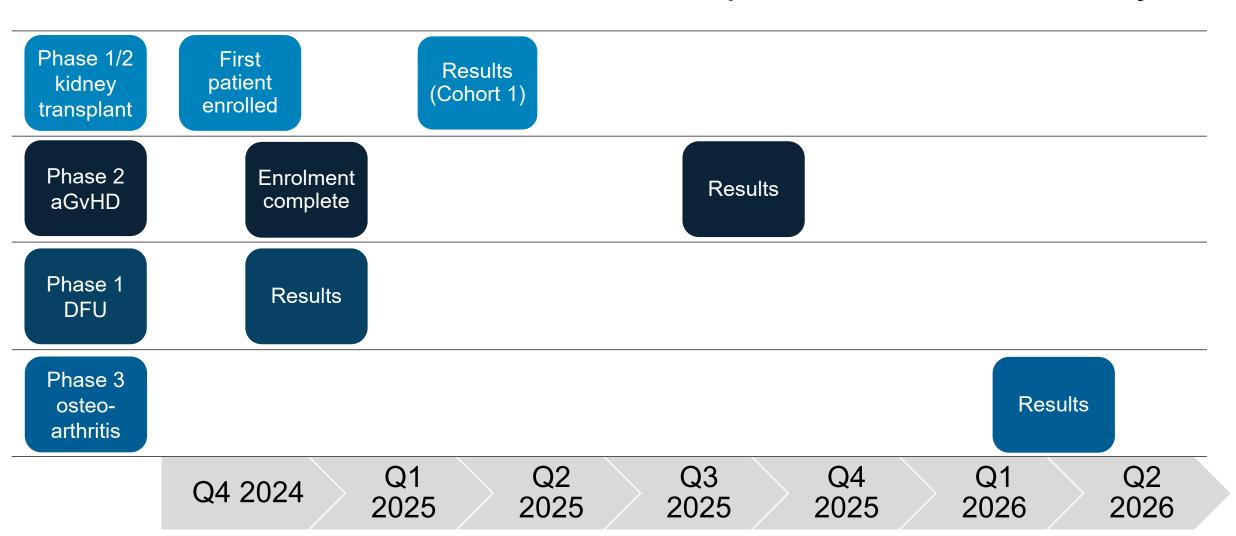


Outlook



Upcoming catalysts*

Results of three randomised controlled clinical trials expected between late 2024 and early 2026





^{*} Timing of events is approximate, based on the Company's information as at the date of this presentation, and subject to change

Summary

K 71	Next generation stem cell company	 Leading platform technology in burgeoning stem cell sector Diverse and highly credentialed leadership team with proven experience 	
!	Scalable manufacturing	 Cymerus™ manufacturing technology protected by robust patent portfolio Enables scalable production of consistent MSCs from a single donation from a single donor, overcoming major challenges with conventional approaches 	
Ô	Compelling clinical data	Very encouraging safety and efficacy results from aGvHD clinical trial (CYP-001) Promising initial data from ongoing DFU clinical trial (CYP-006TK)	
L	Rich clinical pipeline	 Broad pipeline with four active clinical programs FDA orphan drug designation & cleared IND for ongoing Phase 2 aGvHD clinical trial Patient enrolment complete in DFU & OA clinical trials Commencement of kidney transplantation clinical trial imminent 	
	Significant growth potential	 Global estimated market opportunity across targeted indications of ~US\$28bn¹ Focus on indications with significant unmet need Proactive B-2-B outreach to drive partnering strategy 	





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