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Quarterly update

Gary Phillips, CEO

October 2023

Forward looking statement

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This document contains forward-looking statements, including statements concerning Pharmaxis' future financial position, plans, and the potential of its products and product candidates, which are based on information and assumptions available to Pharmaxis as of the date of this document. Actual results, performance or achievements could be significantly different from those expressed in, or implied by, these forwardlooking 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 we undertake no obligation to update these forward-looking statements as a result of new information, future events or otherwise.



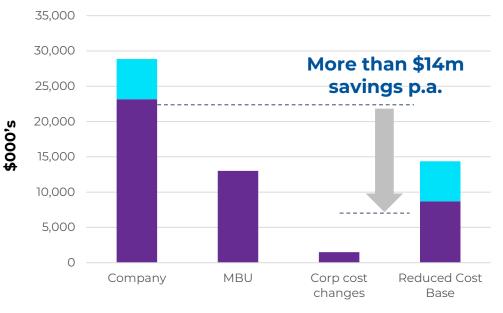
Pharmaxis evolves to Syntara: Cost savings and clear focus energise Syntara clinical programs

The main factors impacting cash from separation of the mannitol business unit are:

- Employee numbers dropping from ~70 to ~25
- Much reduced new lease for research labs and a small corporate office
- Downsized Corporate and Administration requirements
- Removal of all direct and indirect costs associated with operating a manufacturing and global pharma distribution business

Core expenses (excluding external clinical trial and drug discovery costs) cut by more than 60%²

- Cash expenses excluding clinical trials drops from ~\$23m to \$9m
- More corporate & admin savings to be realized after the separation is complete



Proforma Cash Expenses 2023

Core expenses External research

Core expenses include employee costs, rent, utilities, manufacturing, regulatory and admin expenses

^{1.} Change of name from Pharmaxis Ltd to Syntara Limited subject to shareholder approval at the Pharmaxis annual general meeting to be held in Sydney on Tuesday 28 November 2023.



Quarterly Shareholder Update - the launch of Syntara

- Smaller and very focused Board under new leadership
- A science platform that leads the world in its field and has been internationally acclaimed with three recent Nature publications
- A strong pipeline of clinical stage assets with a lead program in haematological malignancies
- Potential for 5 phase 1c/2 studies in areas of high unmet need, significant market potential and high value exit opportunities, with data arriving in a 9 month window from Q4 2024 to Q2 2025
- The lead phase 2 trial of PXS-5505 with ruxolitinib in myelofibrosis due to start recruitment imminently after receiving the go ahead from the FDA in Q3 2023



Phase 2a study cohort added to trial PXS-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 | PXS-5505 200mg BID + stable dose of RUX n = 15 subjects 52 weeks | PRIMARY Safety TEAEsSECONDARY 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



Strong interest in myelofibrosis assets from strategic

| Target / Acquiror | | SIERRA / GSK | CELLENKOS / Incyte | | FORBIUS / Ulli Bristol Myers Squibb | Contraction of the second of t |
|--|-------------|-------------------------------------|--|--------------------------|-------------------------------------|--|
| Date of Announcement | June-2023 | July-2022 | December-2020 | November-2022 | September-2020 | January-2018 |
| Drug Name | Pacritinib | Momelotinib | Combination of Ruxolitinib & CK0804 | Bomedemstat | AVID200 | Fedratinib |
| Lead Indication / Phase (at transaction) | qas | Myelofibrosis (FDA Filed – June) | Myelofibrosis (Phase 1b) | Haematology (Phase 2) | Myelofibrosis (Phase 1) | Myelofibrosis & Polycythemia vera (Successful Phase 3 Trials) |
| Deal Type | Acquisition | Acquisition | Licensing | Acquisition | Acquisition | Acquisition |
| Upfront / Milestones (USD) | US\$1.7B | US\$1.9B | If option exercised US\$20m Licensing fee Sales Milestone up to US\$294.5m | US\$1.35B | Undisclosed but present | US\$1.1B / US\$1.25B |
| Earnout Payments / Royalty Rate (%) | None | None | Tiered royalties Mid single to low double digits | None | Undisclosed | None |



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Potential for five trials 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\$) |
|--|------------------------------------|-------------|--|-----------------------------|-------------------------------------|------------------------------|
| PXS-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 | 2H 2024: Interim 6 month data | ~\$1 billion |
| | Myelodysplastic Syndrome (MDS) | Phase 1c/2 | Protocol development underway | TBD | TBD | ~\$1 billion |
| 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 Q4 2023 | H1 2025 | ~\$3.5 billion |
| | Modification of established scars | Preclinical | Plan to initiate Phase 1/2 trial Independent investigator trial Patients with keloid or hypertrophic scars Protocol under development | TBD | TBD | ~\$3.5 billion |
| PXS-4728 | IRDB 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 | First patient Q4 2023 | H1 2025 | ~\$3.5 billion |



News flow

Recent and anticipated news flow

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



- PXS-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) commences recruitment
- Pan-LOX scar prevention for burn injuries- clinical trial commences recruitment
- PXS-4728 iRBD / neuro inflammation study commences recruitment
- PXS-5505 phase 2a myelofibrosis study (monotherapy) completed and reports safety and efficacy data at ASH



- PXS-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) completes recruitment
- PXS-5505 Phase 1c myelodysplastic syndrome study commences recruitment
- Syntara skin scarring clinical development plan announced

H2 2024

- PXS-5505 phase 2a myelofibrosis combination study (add on to JAK inhibitor) interim data with 6 months treatment.
- PXS-5505 phase 2a myelofibrosis study combination study reports safety and efficacy data at ASH
- Topical pan LOX inhibitor scar revision study commences recruitment



Shareholders & Cash WASX

| Financial Information | 30 Sept 23 | | | |
|---|-------------|--|--|--|
| ASX Code ¹ | PXS | | | |
| Share price | \$0.033 | | | |
| Liquidity (turnover last 12 months) | 124m shares | | | |
| Market Cap | A\$26m | | | |
| Cash balance (30 September 2023) ² | A\$7m | | | |
| Enterprise value | A\$19m | | | |
| Clinical development program supported by: • R&D tax credits • Strategy of partnering deals with pipeline assets | | | | |
| Syntara ASX code will be SNT Note there are reduced future cash expenditures and additional cash inflows arising from the sale of the MBU. | | | | |

| Institutional Ownership | 30 Sept 23 |
|---|---------------------------|
| BVF Partners LP | 14% |
| Karst Peak Capital Limited | 12% |
| D&A Income Limited | 11% |
| Platinum Investment Management Limited | 8% |
| Total Institutional Ownership | 50% |
| Share Price | |
| Volume (M) MarketVolume Close Price | Share Price (\$)\$0.10 |





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