AUMBIOSCIENCES

Precision. By design.

September 2023

September 2023

AUM Overview

AUM is a global clinical-stage oncology company focused on advancing a pipeline of precision therapeutics designed to deploy multi-faceted inhibition strategies to reverse cancer resistance. The management team has an extensive track record of developing distinctive early-stage assets with successful exits in virtual biotech models, including several currently marketed treatments with annual peak sales up to $3B.

Below are key pipeline updates:

- Tinodasertib (mRNA translation inhibitor targeting MNK 1/2): enrolling patients in a global Phase II in colorectal cancer with Merck's Keytruda.
- Boditrectinib (Pan-TRK inhibitor): Phase 2 Ready; Awarded an Orphan Drug Designation for NTRK-related cancers.AUM302 (PIM/PI3K/mTOR inhibitor): IND submission expected in 2023; Awarded an Orphan Drug Designation for neuroblastoma, and the FDA granted rare paediatric disease designation for future PRV eligibility (valued at ~110M USD).
- Raised $31M since inception including $27M Series A (2021) led by Everstone Capital ($6B AUM) and multiple strategic investors.
  - Available cash or cash equivalents of ~$18M driving major milestones through 2023 (including access to $15m drawdown facility backed against the R&D rebate in Australia).
- Management team has a strong track record of >50 INDs, >150 clinical programs, commercialization track record of drugs over $3bn in sales, and successful exits (e.g. $2.1B sale of Corvidia to Novo Nordisk, $1.9B Sirtex sale to China Grand).
- Expected to receive up to $25M in non-dilutive funds over the next 36-48 Months from the Australian Tax Office as we have received an approval for an overseas finding for Tinodasertib and Boditrectinib
- Clinical trial collaboration agreements with Merck and Roche to conduct global clinical trials for its Lead asset.
- Through China out-licensing partnership of Tinodasertib, AUM003 and AUM302 with Newsoara (backed by Qiming Ventures and Sequoia), up to $135M in potential milestones.

Focused on Reversing Cancer Resistance

1. Drawback to many of the current cancer therapies is that they target surface pathways which over a period of time develop resistance

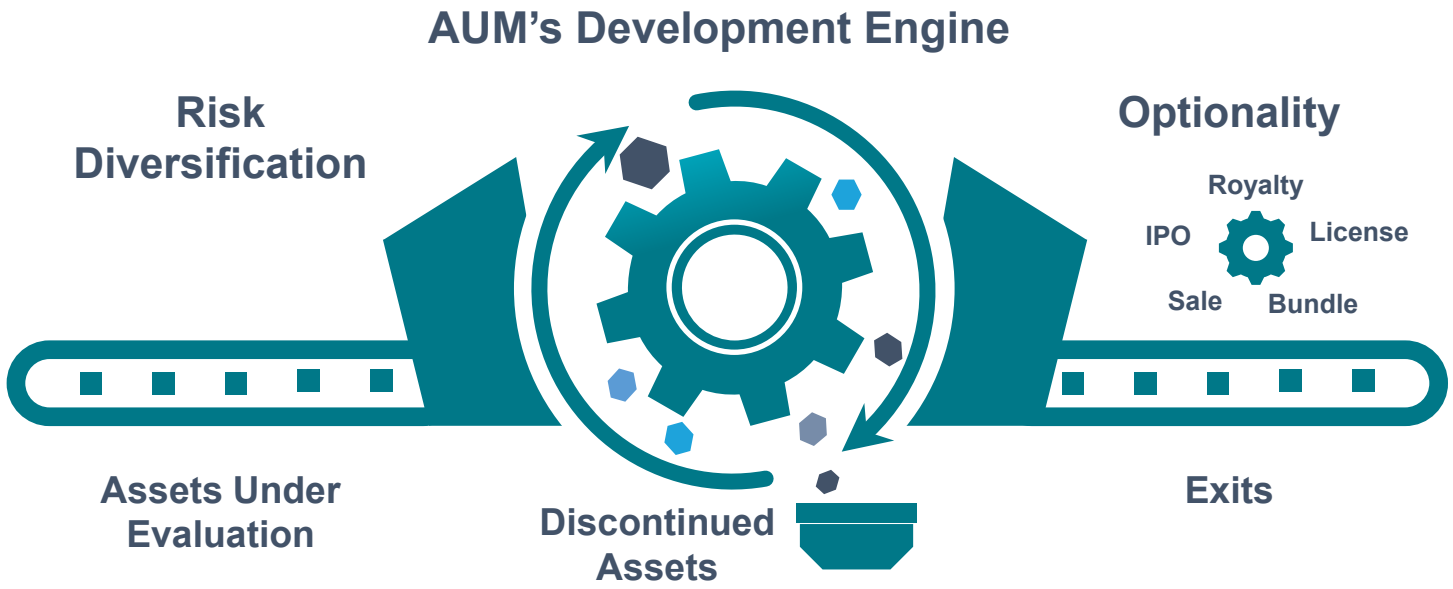
2. AUM Biosciences targets intracellular pathways to overcome such resistance

3. In most cases, a chain of reactions transmits signals from the cell surface to a variety of intracellular targets

4. Intracellular signalling pathways thus connect the cell surface to the nucleus, leading to changes in gene expression in response to extracellular stimuli

5. Small molecule therapies present a UNIQUE opportunity, both standalone and in combination with other therapies targeting surface proteins

AUM's Business Model – "Sweet Spot" of Investment



Diversity Risk

- Applying modern day portfolio theory to oncology drug development
- Distribute risk through creation of diversified portfolio of early-stage oncology therapeutics

Cost Efficient Model

- External network of strategic vendors maintains lean infrastructure & expedites development
- Leverage Australian R&D rebates of 48.5c to $1 in cash

Optionality

- Range of options exist to monetize assets
- Look to exit at proof-of-mechanism (PoM) or proof-of-concept (PoC)
- Typical investment horizon of 3 – 5 years

Global Pipeline Designed to Reverse Resistance

	INDICATION	DISCOVERY	PRECLINICAL	PHASE 1	PHASE 2	RIGHTS
Tinodasertib +Keytruda mRNA translation inhibitor Target: MNK1/2	MSS Colorectal Cancer				MERCK	Global
Tinodasertib +Tecentriq mRNA translation inhibitor Target: MNK1/2	NSCLC, Urothelial Cancer			Roche collaboration		Global
Boditrectinib Pan-specific kinase inhibitor Target: pan TRK	NTRK Naïve and resistant mutation cancers					Global
AUM302 Macrocyclic multi-kinase inhibitor Target: PIM/PI3K/mTOR	Neuroblastoma, PIK3CA Mutant cancer					Global
AUM003 BBB penetrating mRNA translation inhibitor Target: MNK1/2	Glioblastoma, Sarcoma					Global

Journey to Date

2018 - 2019

- Seed funding of ~$3M USD
- Global rights acquired for AUM001, and AUM003 from A* Star
- Global rights acquired for AUM302 from Inflection Biosciences

2021

- $27M Series A closed
- AUM001 Phase I Completed
- AUM601 Global rights acquired from Handok/CMG

everlife SPRIM

2022

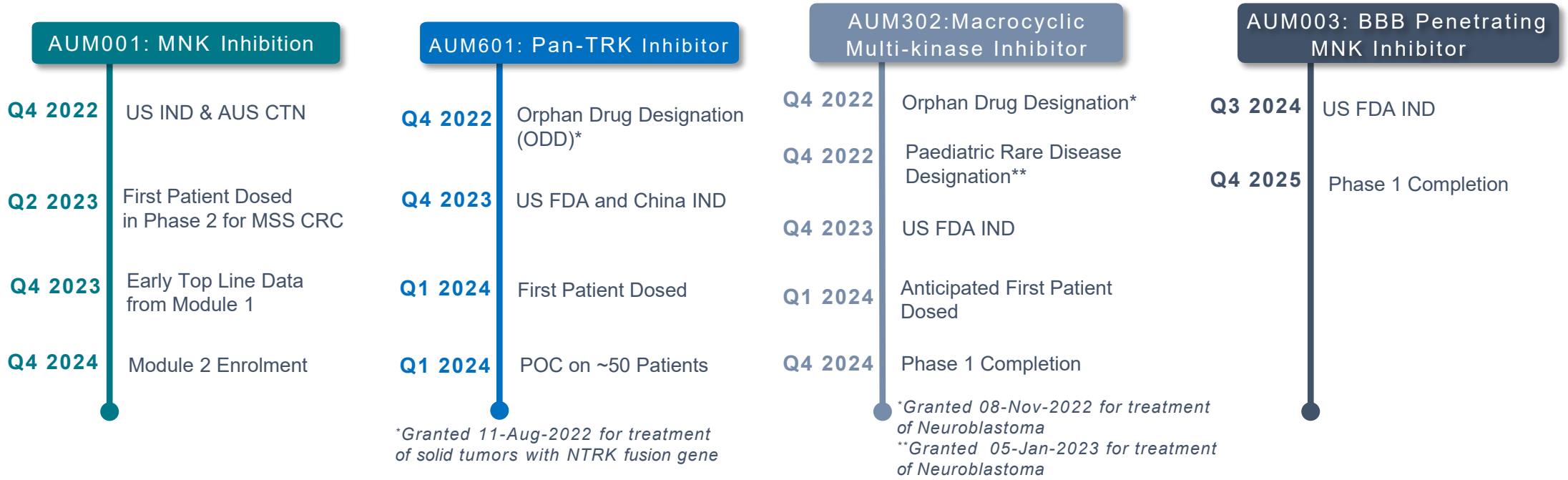
- 2 Strategic Investors acquired $1.5M in Equity
- Clinical collaborations with Merck and Roche
- AUM601 Orphan Drug Designation (ODD) granted
- AUM302 ODD granted
- AUM302 Paediatric Rare Disease Designation

2023

- First patient in (FPI) for Phase 2 completed for AUM001
- US IND Approval AUM601
- US IND for AUM302 by Q4 2023

Journey to a Complete Clinical Stage Portfolio

With the completion of this round, AUM will be able to complete key value inflection points in our existing portfolio to become a “fully clinical stage portfolio” by December 2024. This will give some meaningful exit options which can be materialised in Q4 2024.



Exit options	Precedent
Strategic buy-out ‘trade sale”	$4.1B Buyout of Turning Point Tx by BMS
IPO	Comparable with current market cap: **Zentalis ($1.8B), Revolution ($3.1B), Ideaya ($1.4B)**
Larger Series B round	Uptick in current valuation
Out-License ”A” portfolio candidate	Average deal value in oncology at Phase II is projected to be a $1.5-2B

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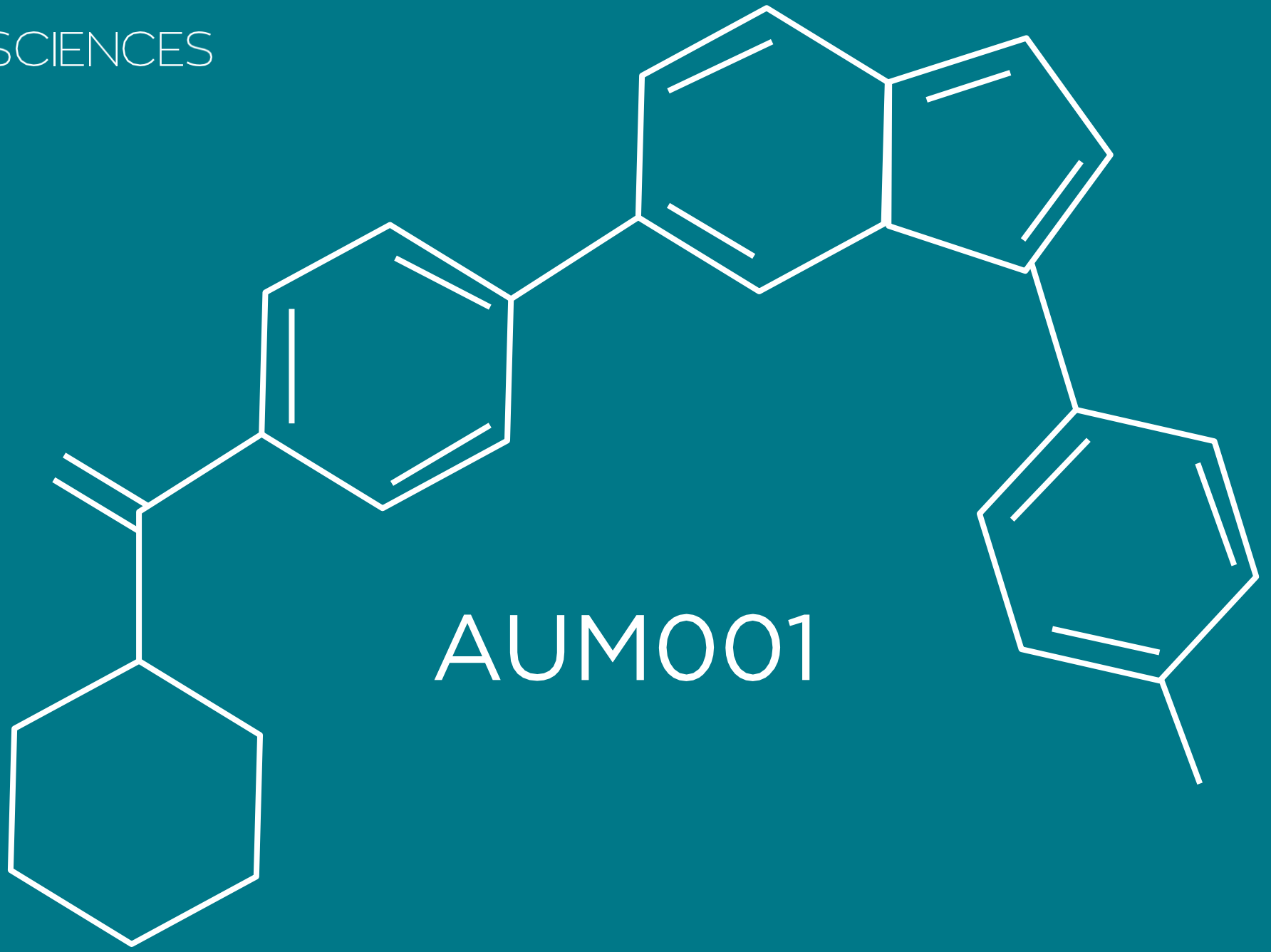


AUM001

(AUM001) Tinodasertib: Key Highlights

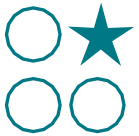
SELECTIVE INHIBITOR AND VALIDATED TARGET ENGAGEMENT

- ~99% selectivity to MNK
- Targets eIF4E overexpression

RECRUITING GLOBAL PHASE II

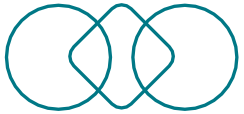
- Global clinical collaborations with Merck and Roche
- 12 patients recruited/identified in Phase 2 trial in MSS CRC
- Preliminary Clinical Data available for review

MERCK Roche



DIFFERENTIATED FROM CURRENT TREATMENT OPTIONS

- In Phase 1 Trial, No Grade 3 or higher Aes
- Longer t1/2 & AUC compared to Tomivosertib
- Monotherapy activity in CRC, ALL, and Pancreatic Cancer



TARGETING 80-85% CRC POPULATION

- Strong data to support further development in providing a meaningful treatment option for 80-85% of CRC patients

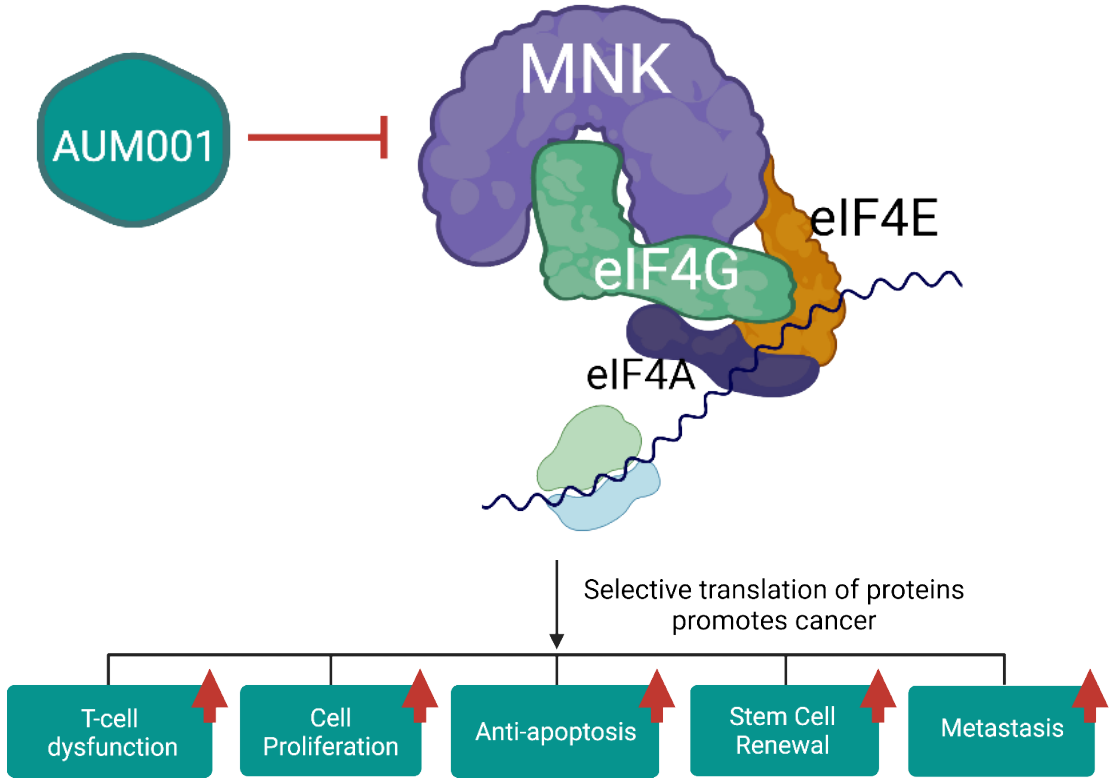
AUM001: Tinodasertib

PROPOSED MECHANISM OF ACTION

eIF4E overexpression is associated with cellular transformation, tumorigenesis and metastatic progression

MNK phosphorylates eIF4E, which facilitates the translation of mRNAs of specific growth signal and oncoproteins

MNK inhibition targets eIF4E to block key oncogenic and resistance mechanisms

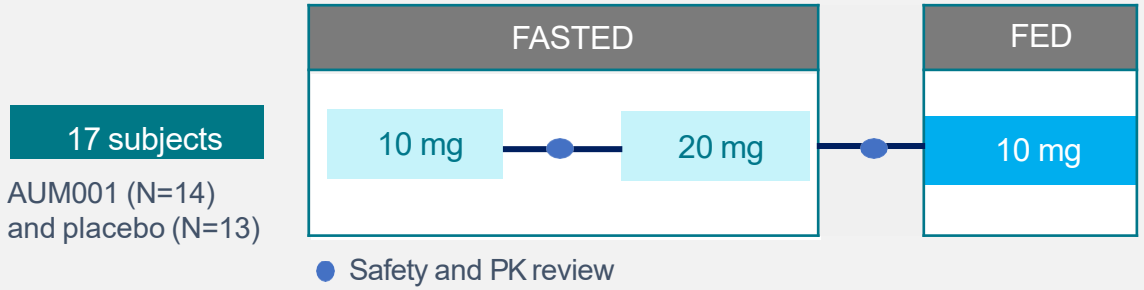


Glossary: MNK - Mitogen-activated protein kinase (MAPK) interacting protein kinases; mRNA – Messenger ribonucleic Acid (responsible for protein synthesis); eIF4E – critical component of translation machinery

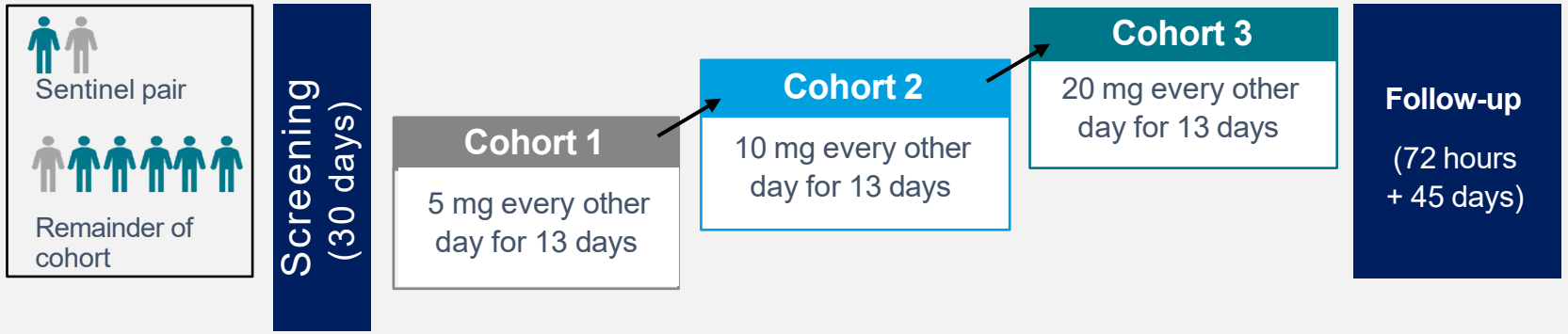
AUM001: Tinodasertib Two Phase 1 Trials Completed

TRIAL DESIGN

Single Ascending Dose - Double blind, randomized, within subject placebo-controlled SAD study (Singapore)



Multiple Ascending Dose - Sentinel pairing, double blind, placebo-controlled MAD study (Australia)



KEY CONCLUSIONS

- Highly favourable safety profile and no AUM001 related SAEs
- Dose Dependent Target engagement

- No Grade 3 events or SAEs
- No evidence of cardiotoxicity or hepatic toxicity
- No observable difference in safety between any arm and Placebo subjects
- No observable dose dependence in incidence of treatment emergent adverse events (TEAE)

AUM001: Tinodasertib Global Phase 2 in MSS CRC

Key milestones

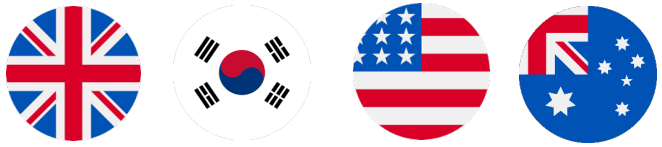
Q2 2022
US IND

Q4 2022
AUS CTN

Q2 2023
FPI
(Module 1 Monotherapy)

Q4 2023
Topline readout
(Module 1 Monotherapy)

International clinical trial sites



Module 1
Run-In

Monotherapy

Start Q2 2023

Combination
(AUM001+Pembrolizumab)

Combination
(AUM001+Irinotecan)

Start Q2 2023

Module 2
Cohort Expansion
(AUM001+Keytruda)

MSS CRC
AUM001+
Pembrolizumab

MERCK
INVENTING FOR LIFE

mCRC (All)
AUM001 + Irinotecan

Start Q1 2024

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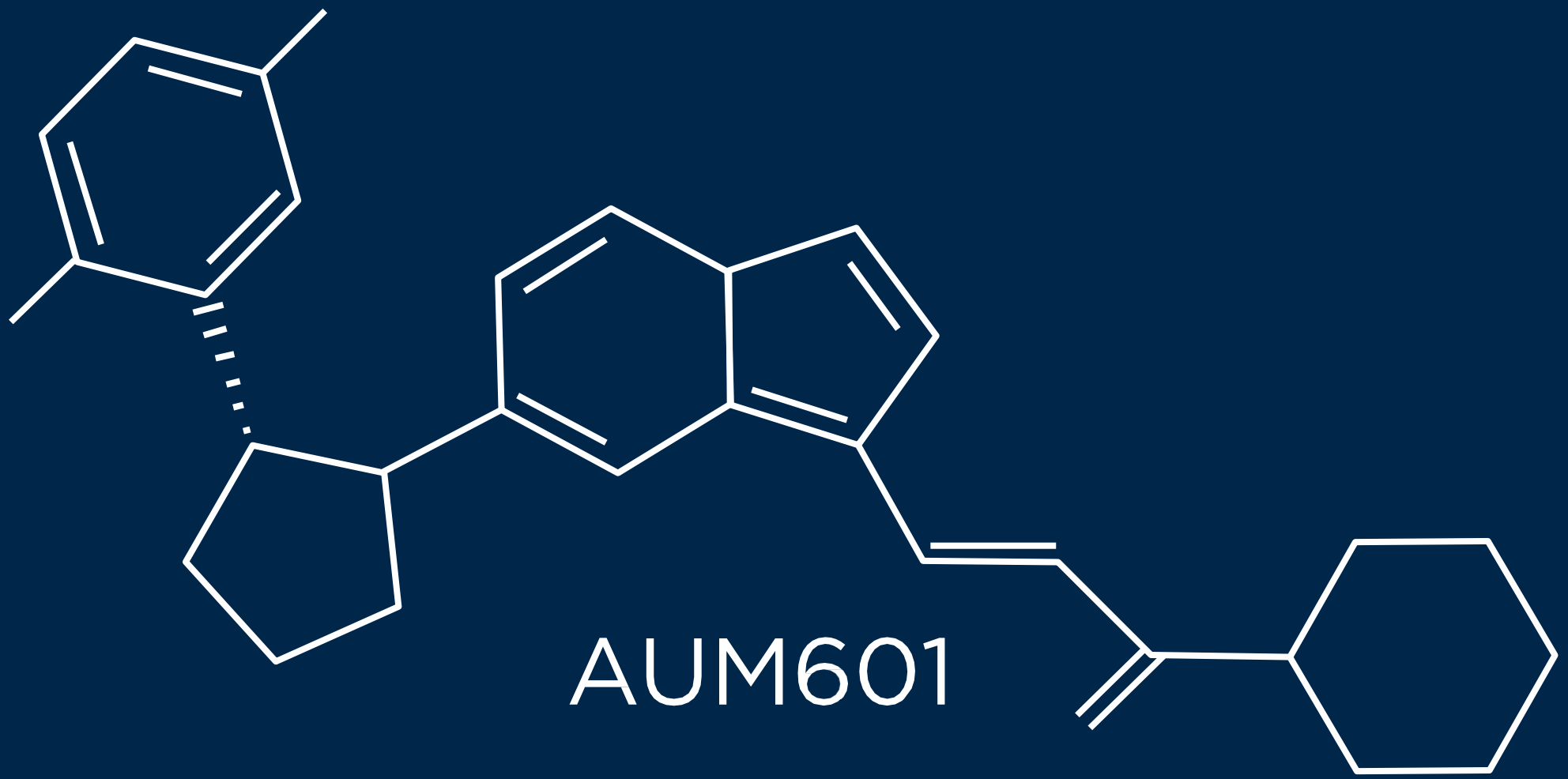
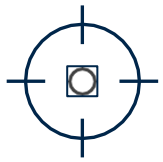


AUM601

(AUM601) Boditrectinib: Key Highlights

DIFFERENTIATED FROM CURRENT TREATMENT OPTIONS

- Orphan Drug Designation granted
- No neurotoxicity observed to date
- Once daily dosing
- Highly selective and potent against TRK (281 Kinases)
- Potential superiority to larotrectinib, selitrectinib, entrectinib & repotrectinib



TARGETING FUSIONS AND MUTATIONS

- Inhibits TRKA/B/C fusion, and solvent front, gatekeeper and xDFG mutations of TRKs
- Robust activity in preclinical models at well-tolerated doses

OPTIMIZED PK PROFILE - PRECLINICAL

- 22X higher concentration of drug in tumors as compared to plasma. Higher tumor exposure in vivo(1)
- Superior PK compared to Larotrectinib(1)
- Favorable AE profile (no DLTs)
- Established dose dependency

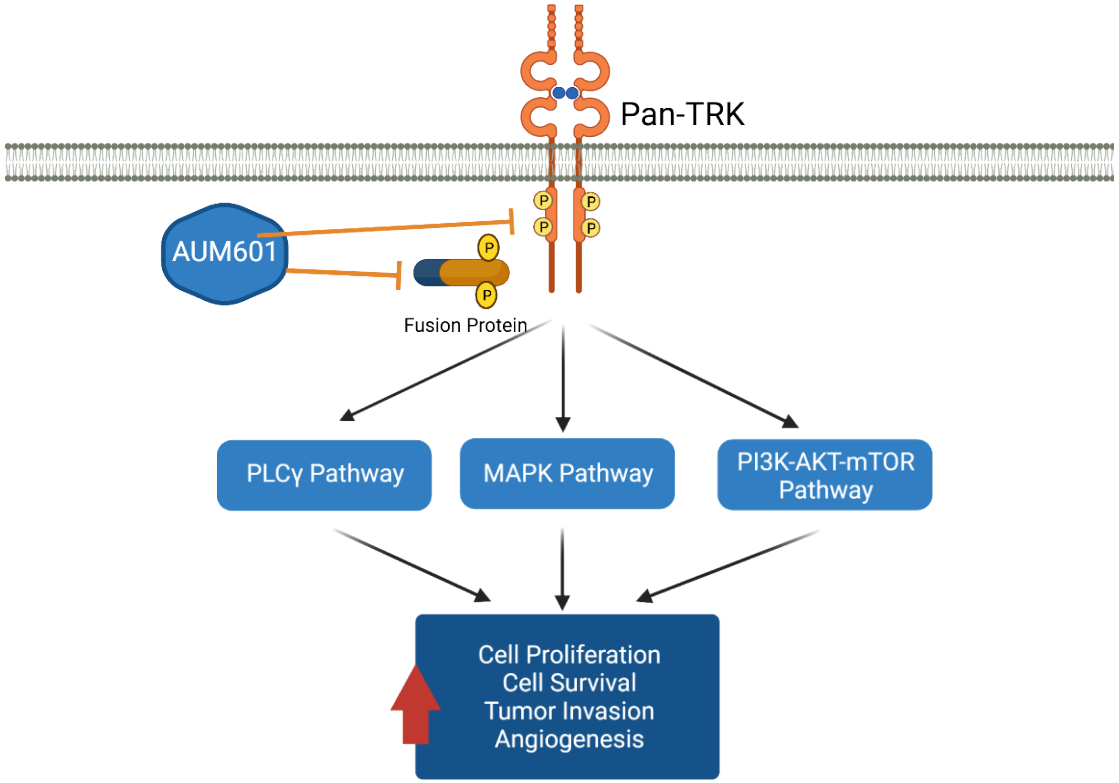
(AUM601) Boditrectinib

PROPOSED MECHANISM OF ACTION

TRK fusions are strongly associated with tumorigenesis

Resistance emergence has been observed through solvent front, gatekeeper and xDFG mutations

AUM601 is believed to selectively inhibits both fusion and resistance mutations



Glossary: MNK - Mitogen-activated protein kinase (MAPK) interacting protein kinases; mRNA – Messenger ribonucleic Acid (responsible for protein synthesis); eIF4E – critical component of translation machinery

(AUM601) Boditrectinib : Addressing Current Challenges

Larotrectinib

- Long treatment duration
- Potential neurotoxicity concerns
- 32% of patients in larotrectinib clinical trials acquired resistance with treatment(1)

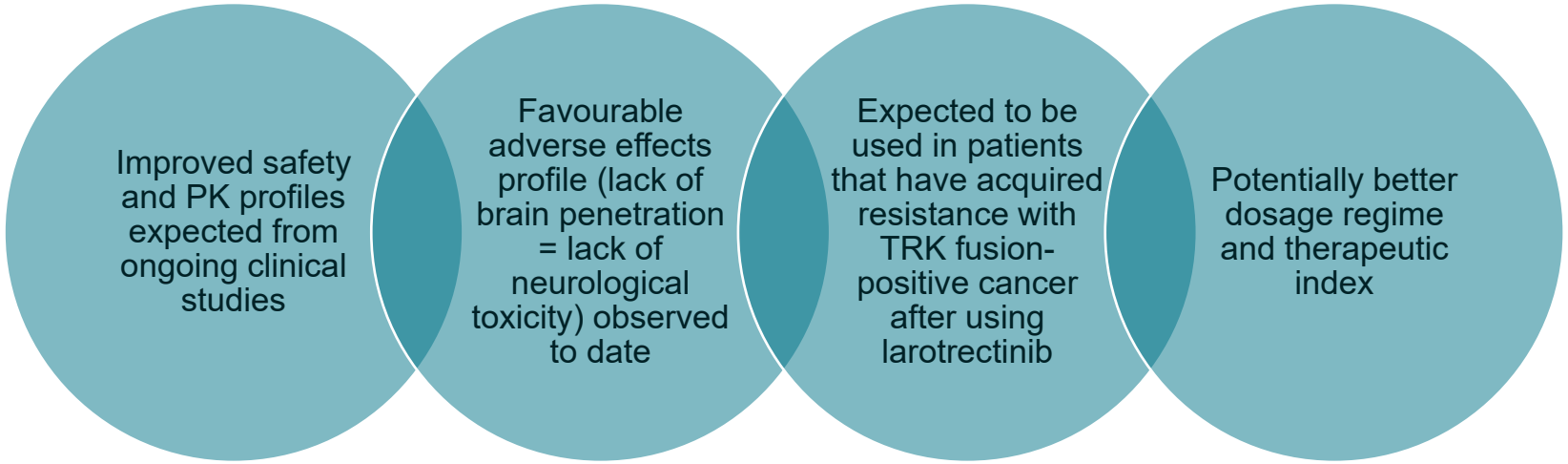
Selitrectinib

- 65% patients in Selitrectinib program were observed with more CNS related side effects including dizziness(2)
- Some patients may have tolerability issues with Selitrectinib, which can contribute to clinical trial drop out

Repotrectinib

- 65% patients in Selitrectinib program were observed with more CNS related side effects including dizziness(2)
- Some patients may have tolerability issues with Selitrectinib, which can contribute to clinical trial drop out

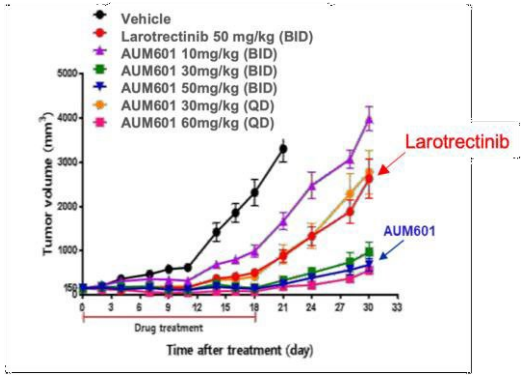
(AUM601) Boditrectinib



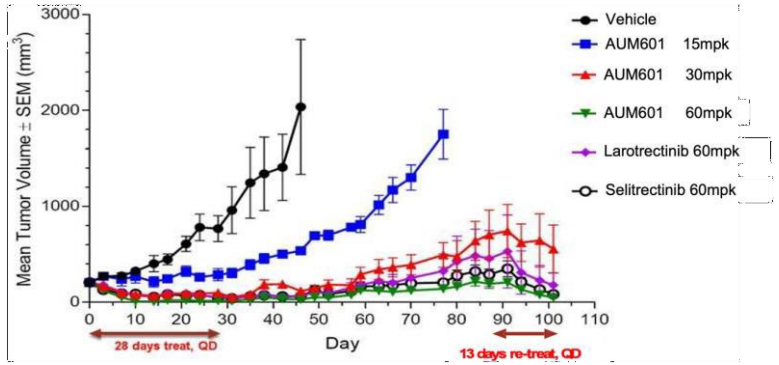
(1) Via Drilon A, et al. Efficacy of Larotrectinib in TRK Fusion-Positive Cancers in Adults and Children. N Engl J Med. 2018 Feb 22;378(8):731-739.
(2) Via Hyman D, Kummar S, Farago A, et al. Abstract CT127: Phase I and expanded access experience of LOXO-195 (BAY 2731954), a selective next-generation TRK inhibitor (TRKi). Cancer Res. 2019;79:CT127; Lim JSJ, Tan DSP. TRK inhibitors: managing on-target toxicities. Ann Oncol. 2020 Sep;31(9):1109-1111.

(AUM601) Boditrectinib : Comparison of Activity Versus Larotrectinib & Selitrectinib(1)

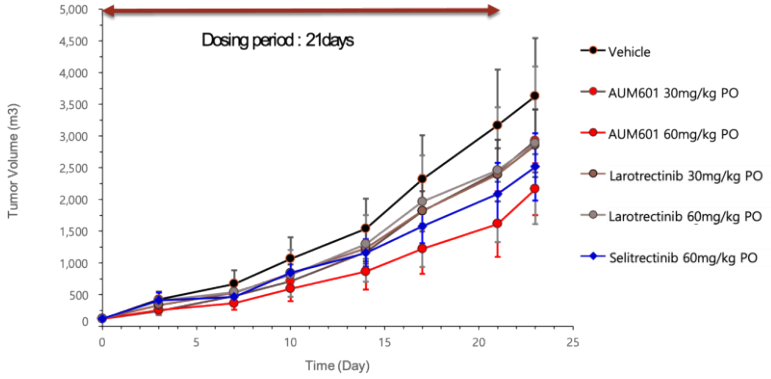
TPM3-NTRK1 Fusion



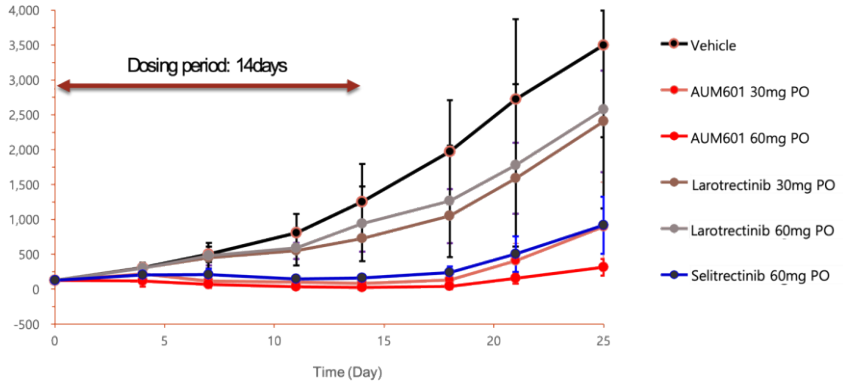
ETV-NTRK3 Fusion



NTRK Gatekeeper Mutation



NTRK Solvent Front Mutation



(1) Based on AUM pre-clinical results

(AUM601) Boditrectinib : Phase 2 Plan

Phase 1 Completed

- Long treatment duration
- Potential neurotoxicity concerns
- 32% of patients in larotrectinib clinical trials acquired resistance with treatment(1)

All comers

Phase 2

- First patient to enroll in 2023
- TRK fusion and mutation patients
- Basket trial

- Multinational trial in ~25 sites
- 1st line ex US and EU
- 2nd line in US and EU

- Orphan designation Q3 2022*
- CN and US IND 2023

** Granted 08/11/2022 for treatment of solid tumors with NTRK fusion gene*

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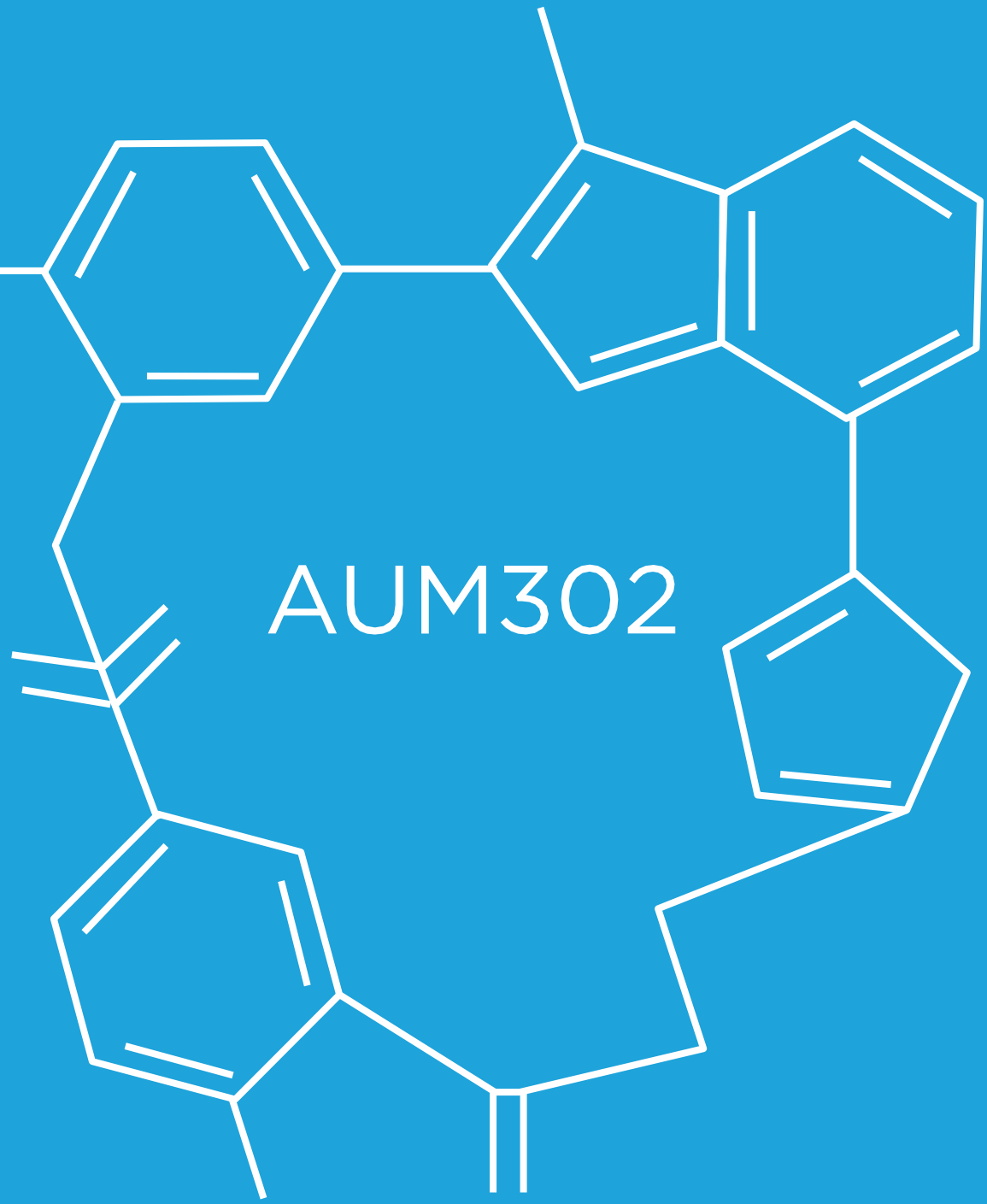


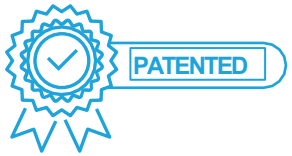
AUM302: Key Highlights

POTENTIALLY DIFFERENTIATED FROM CURRENT TREATMENT OPTIONS

- Potential first-in-class small molecule targeting PIM, PI3K and mTOR
- US FDA Orphan Drug Designation (ODD) granted for treatment of neuroblastoma
- Low nanomolar IC50s in breast cancer (0.03-10) & neuroblastoma (0.01- .8)(1)

TARGETING SOLID TUMORS

- ~100x Sensitivity in lung cancer compared to Alpelisib in in-vitro studies(1)
- ~80% TGI in breast cancer(1)



PROPRIETATRY MACROCYCLIC CHEMISTRY

- A unique and patented macrocyclic structure combining 3 key pharmacophores

FIRST-TO-MARKET REGISTRATION STRATEGY

- Opportunity to be the FIRST multi- kinase inhibitor class of drug in Neuroblastoma
- Superiority to Alpelisib, if proven, may open opens a huge breast cancer opportunity
- Strong data supporting NSCLC development

(AUM302) Macrocyclic Multi-Kinase

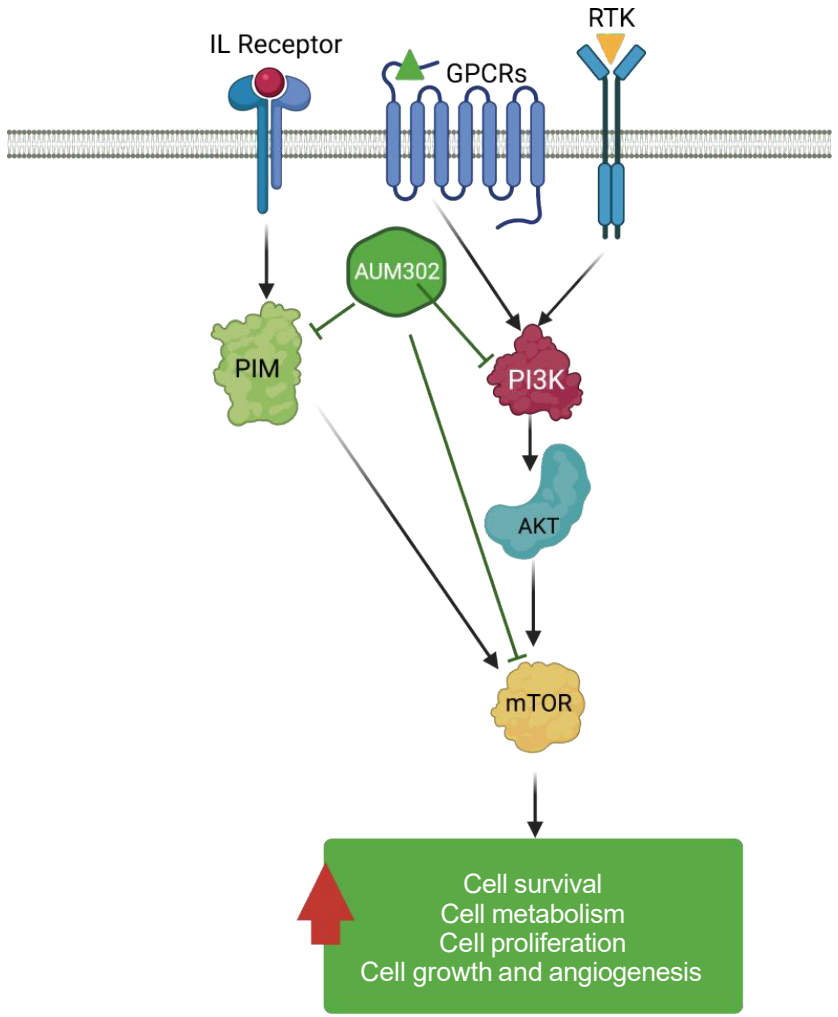
PROPOSED MECHANISM OF ACTION

PI3K, PIM and mTOR are key oncogenic drivers

PIM kinases amplify oncogenic transformation through substrates shared with the PI3K & mTOR pathways

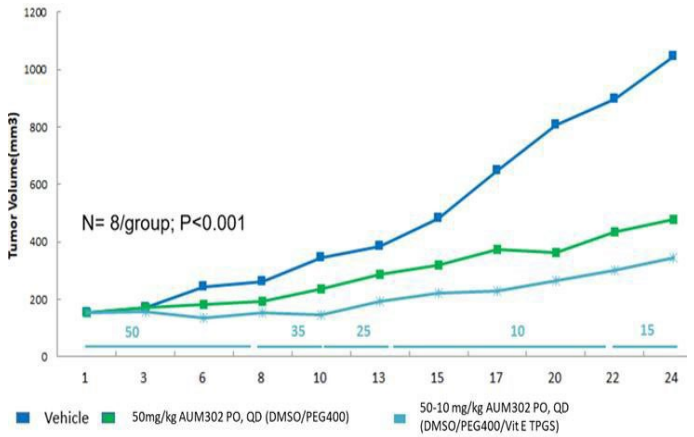
Activation of PIM offers a bypass mechanism for cancers treated with PI3K & mTOR inhibitors

A macrocyclic multi-kinase inhibitor that interferes with key overlapping oncogenic and resistance mechanisms



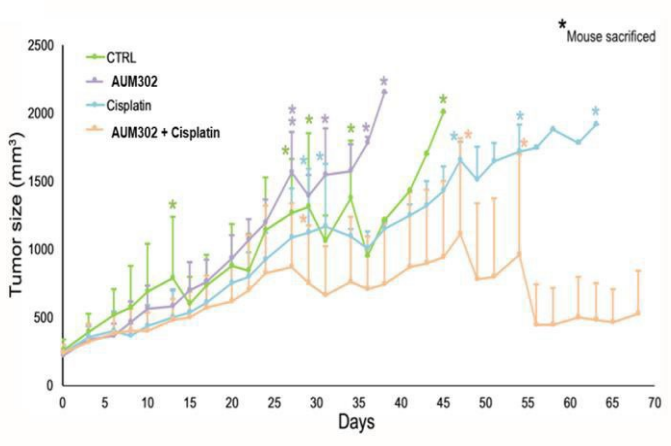
(AUM302) In-Vitro Evidence Suggests More Durable Anti-Tumor Responses(1)

HER2+, PIK3CA Mutant Breast Cancer



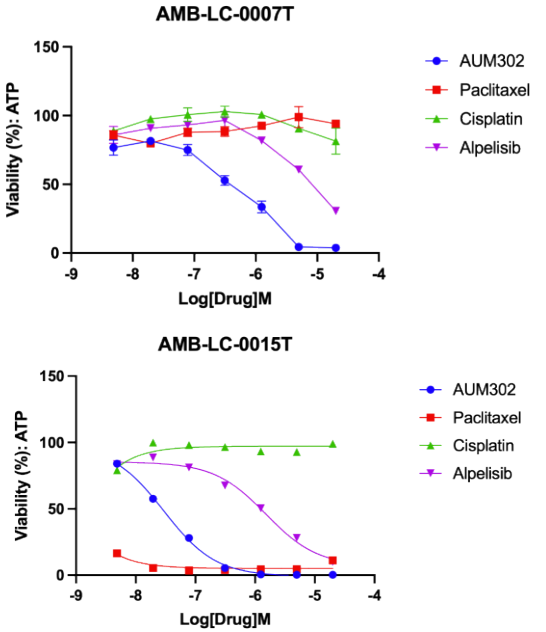
- **Mean TGI was 79%** with AUM302 treatment
- No body weight changes

Neuroblastoma (2)



- **Significant inhibition of tumor growth** with AUM302 and cisplatin combined in sub-therapeutic doses
- No body weight changes

Patient Derived Lung Cancer Data



IC_{50}	Cell Line	AUM302	Paclitaxel	Cisplatin	Alpelisib
	AMB-LC-0007T	**2.942.E-07**	1.120.E-12	1.035.E-04	**7.938.E-06**
	AMB-LC-00015T	**2.706.E-08**	N/A	3.665.E-09	**9.853.E-07**

(1) Based on AUM pre-clinical results
(2) Via Mohlin, S; Hansson, K; Radke, K, et al. Anti-tumor effects of PIM/PI3K/mTOR triple kinase inhibitor IBL-302 in neuroblastoma. EMBO Mol Med (2019)11:e10058 https://doi.org/10.15252/emmm.201810058

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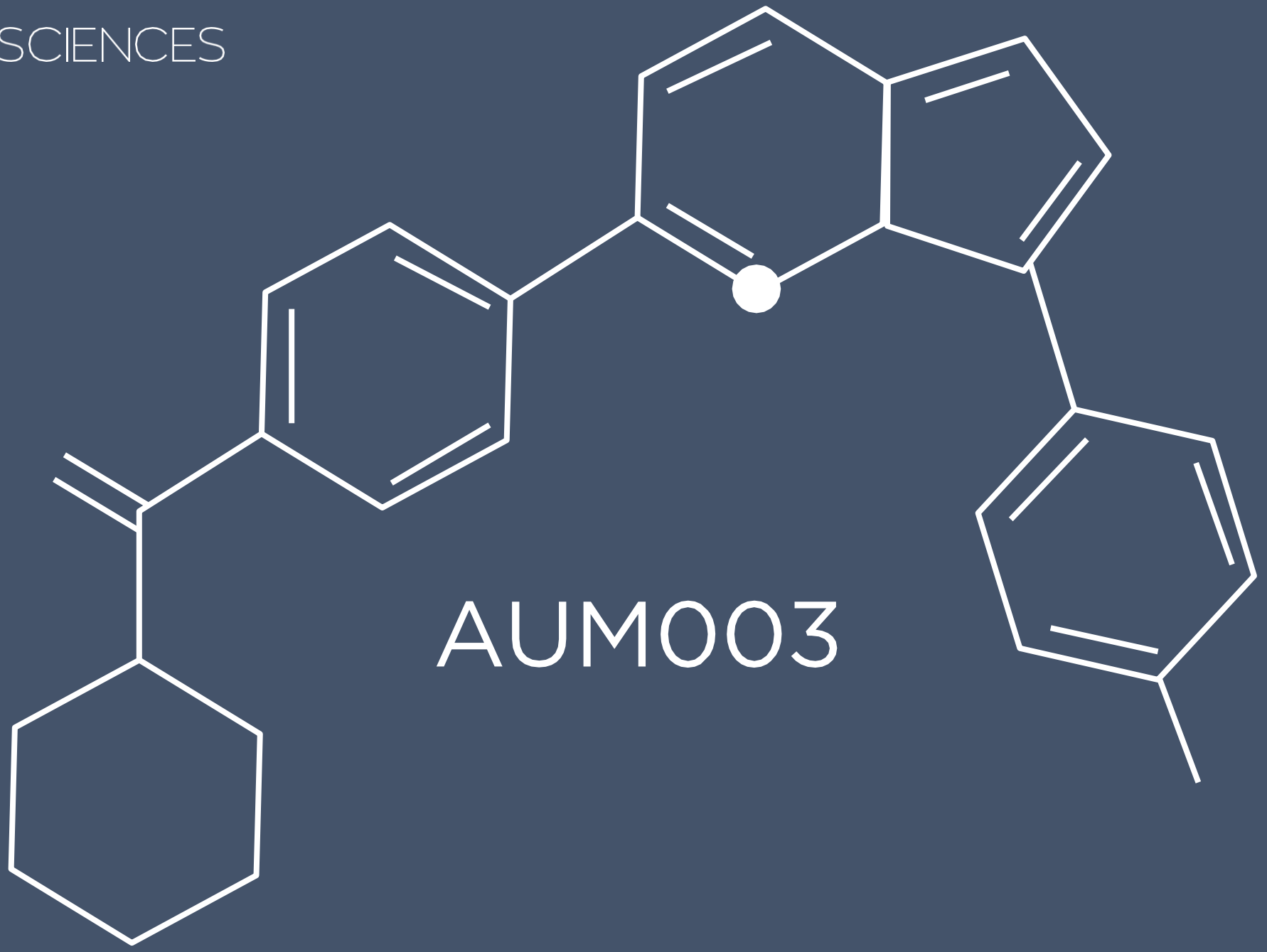
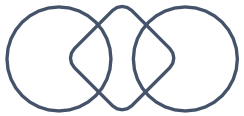


AUM003

AUM003: BBB Penetrating mRNA Key Highlights

DIFFERENTIATED APPROACH FROM CURRENT TREATMENT OPTIONS

- BBB-penetrating
- Potentially superior cytotoxicity with current MNK inhibitors
- Monotherapy in glioblastoma with low nM IC50
- Potentially strong synergistic effects with temozolomide



POTENTIALLY APPLICABLE AS COMBINATION THERAPHY

- A targeted approach for >65% of glioblastoma (GBM) patients with limited response to temozolomide
- Synergy with MCL1 inhibitor in LPS cell line

AUM Has Build a Resilient Company

- Asset Lite organisation with low overheads
- Founder track record of existing virtual biotech models
- Strong board governance driving the capital efficiency fabric of the business
- Strong CRO relationships and track record
- Run a capital efficient business with the following characteristics:
  - Existing investors have shown continued support
  - CRO contracts negotiated with ***low burn rate but high in milestone achievements***
  - Operational overheads managed strictly to reduce burn rate
  - Leveraged Aus R&D rebates of 48.5c to $1 in cash. (Received $5M since 2018). We have an approval from the ATO to received 48.5c to a $1 for Tinodasertib and Boditrectinib

Experiences Leadership

Management

Vishal Doshi, MSC
Chairman & Chief Executive Officer
Founding member | Board of Directors

Sunil Peter, CPA
VP, Finance and Shared Services

Harish Dave, MB, ChB, MBA
Chief Medical Officer
Founding member | Board of Directors

Scott Jordan, MBA
Head, Corporate Development

John Patava, PhD
Chief Operating Officer

Harven DeShield, PhD, JD
Head, IP & Strategy

Board of Directors

Arjun Oberoii, MD
Managing Director,
Everstone

Matt Devalaraja, PhD
Founder, CEO Nipuna Therapeutics

Ross Horsburgh, MB ChB
Head of Development Abbvie, JAPAC

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Precision. By design.

THANK YOU