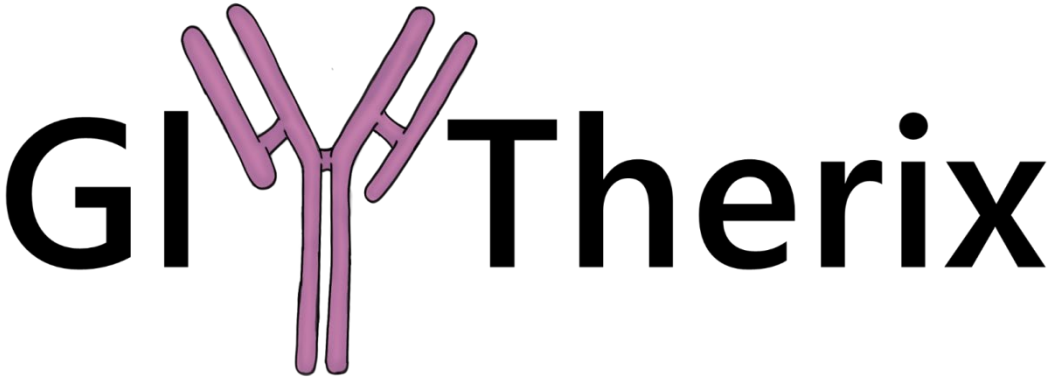

Contact: Dr Brad Walsh
Mobile: +61 413 231 296
Suite 2, Ground Floor, 75 Talavera Rd Macquarie Park, NSW 2113
www.glytherix.com

Forward Looking Statements

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Investment Highlights

- **Huge Potential Market –** immuno-oncology US$51Billion market
- **Strong IP position for Glypican-1 –** demonstrated role in aggressiveness and spread of cancer
- **Multiple targets –** Glypican-1 known to be expressed in prostate, bladder, pancreatic, breast, ovarian, glioblastoma cancers as well as mesothelioma
- **Strong early licensing prospects** - good early engagement with a number of large pharma companies
- **Influential thought leadership** - Clinical Advisory Panel membership by world renowned clinicians and academics
- **Strong safety profile** - drug already administered to 12 human patients with no drug related adverse events and no off-target binding

GlyTherix

Capital raising

- Current capital raise Series A - US$20M being raised (pre-money valuation US$40M)
- Series A investors will have 33 1/3% shareholding of enlarged capital ie US$20M/(US$20M + US$40M)
- Funds raised will be used to:
  - Manufacture GMP humanized MIL-38 Ab for US clinical trials
  - Conduct Phase 1 trial with ^{177}Lu radiolabeled chimeric MIL-38 Ab
  - Perform further pre-clinical experiments with other mechanisms of action
- Existing number of Ordinary Shares on issue 252 million, ie before Series A round
- No other classes of share, options, etc. on issue. Approx. 240 shareholders
- Company will be eligible for 43.5% cash rebate from government for eligible R&D spend

  – this extends funding runway

The Opportunity

- Raise $20M to fund commercialization of unique antibody (Miltuximab®) targeting cancers with a major underserved need in high value market
- Miltuximab® **is a first-in-class treatment for certain solid tumors** that can address the growing US$51B immuno-oncology market for cancer treatment
- Interim results from first-in-human clinical trials demonstrate promising cancer targeting and an excellent safety profile
- Commercialization of this exciting technology is enhanced by a strong propriety knowledge of the target, Glypican-1 – which is present in a number of different solid tumor types

Pathway to Shareholder Returns

- GylTherix intends to commercialize Miltuximab®, either by licensing or trade sale to a large pharmaceutical or biotech company capable of taking Miltuximab® through regulatory approvals and into the global market
- GylTherix continues to engage with Key Opinion Leaders (KOLs) and potential licensees ensuring Miltuximab® development meets clinical, commercial and patient expectations
- Funding will enable GlyTherix to make Miltuximab® "IND Ready" by completing pre-clinical studies designed to demonstrate the use of Miltuximab® with different mechanisms of action – recognizing pharma licensees will focus on different mechanisms of action
- GylTherix will produce sufficient clinical grade drug to commence US Phase 1 trial(s) - a compelling value proposition for potential licensees and partners
- Additional Clinical and Pre-Clinical data generated will be used to support US IPO (planned c.2020)

GlyTherix Executive Management

Dr Brad Walsh *CEO*

Brad founded Minomic to bring to market an innovative biomarker for prostate cancer. Under his leadership Minomic has generated a pipeline of new diagnostics and therapeutics in development for prostate, bladder and pancreatic cancer. Brad has a background in commercialization of products in diagnostics and proteomics and continues to be active in research collaborations. He was a joint recipient of the Eureka Prize for Interdisciplinary Research in 2015

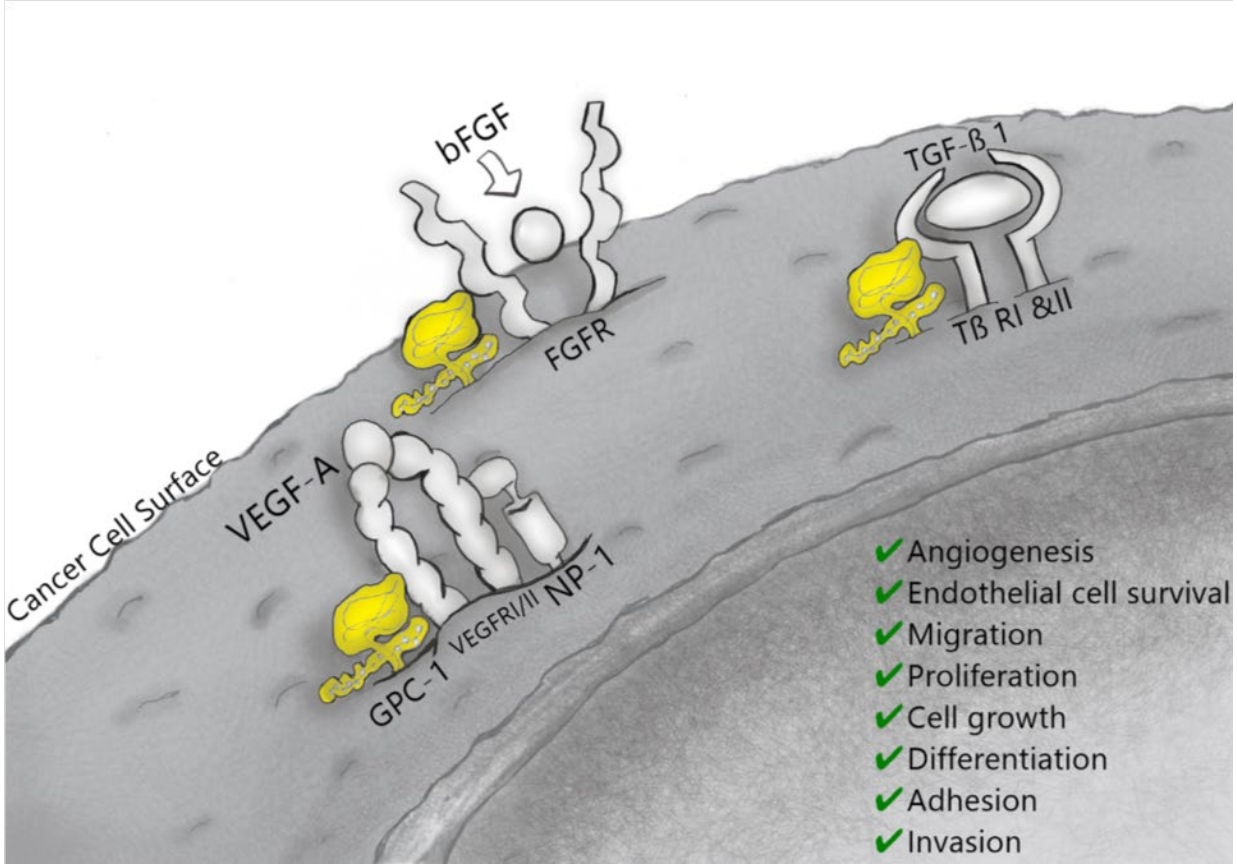
David Burdis *CFO / Company Secretary*

David is a qualified accountant and has worked in the chemical, telecommunications, and financial services industries. He has held various senior/board positions, for both listed and unlisted companies, in Australia, the UK and Hong Kong, including Swire Blanch Limited and OAMPS Limited.

Dr Douglas Campbell *Head of Research and Development*

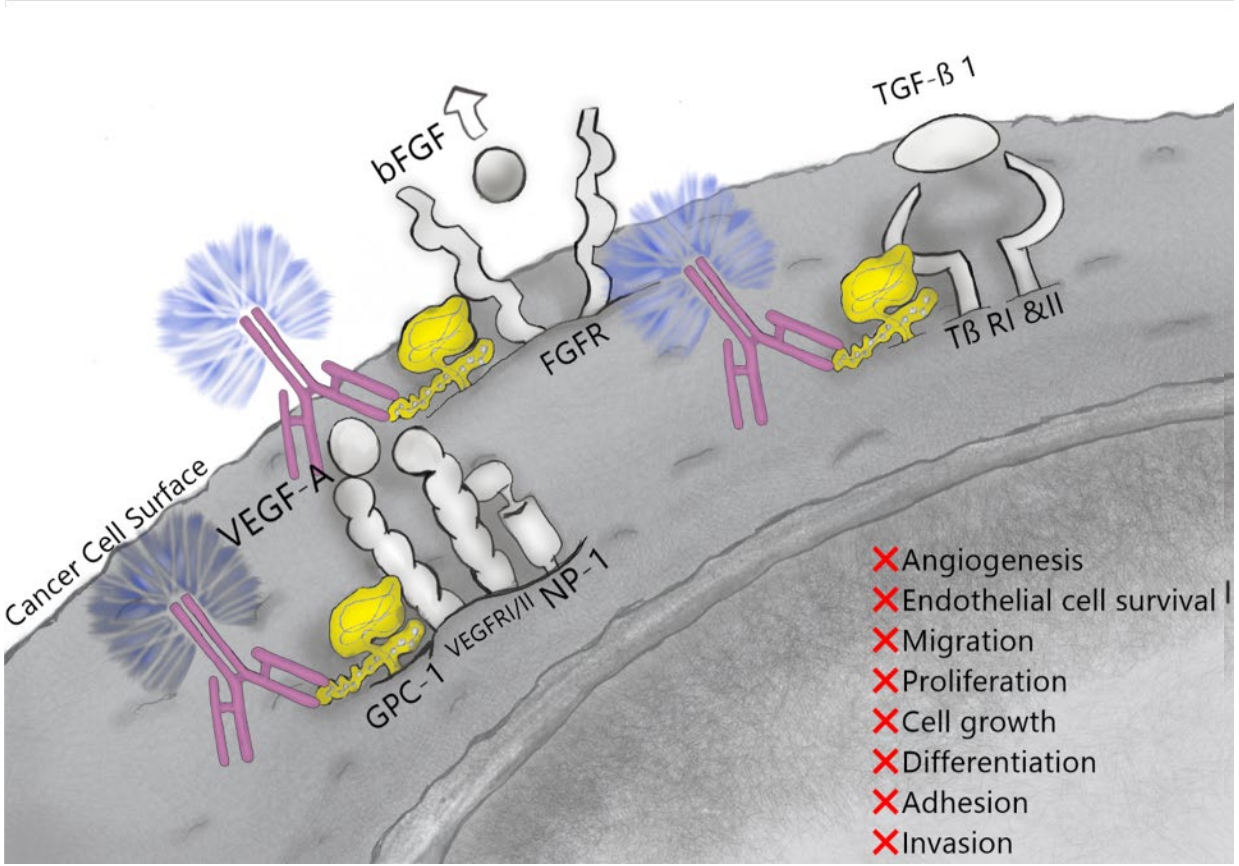
Douglas is the Head of Research and Development and leads Glytherix's scientific team. He has nearly 20 years of experience in biomedical research with a particular focus on drug development and oncology. Most recently, he was involved in the development of a novel antibody (MDX-1097) from pre-clinical to Phase 2 clinical trials

The Target – Glypican-1 (GPC-1)



GPC-1 acts as a co-receptor with certain growth factor receptors known to play a role in cancer processes

The Target – Glypican-1 (GPC-1)



Miltuximab® binds specifically to GPC-1. Shown here armed with a cytotoxic payload (such as radiation or drug conjugate)

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Drug-related Adverse Events (AEs) per patient

Abnormality		AE Grades	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11	P12
Hematologic	Anemia	1-4	0	0	0	0	0	0	0	0	0	0	0	0
	Leucopenia	1-4	0	0	0	0	0	0	0	0	0	0	0	0
	Thrombocytopenia	1-4	0	0	0	0	0	0	0	0	0	0	0	0
Renal	Electrolyte levels	1-4	0	0	0	0	0	0	0	0	0	0	0	0
	Creatinine level	1-4	0	0	0	0	0	0	0	0	0	0	0	0
Hepatic	Transaminitis	1-4	0	0	0	0	0	0	0	0	0	0	0	0
	Elevated ALP	1-4	0	0	0	0	0	0	0	0	0	0	0	0
Cardiac		1-4	0	0	0	0	0	0	0	0	0	0	0	0
Clinical AE		1-4	0	0	0	0	0	0	0	0	0	0	0	0

Note: no drug-related AEs were noted in any patient

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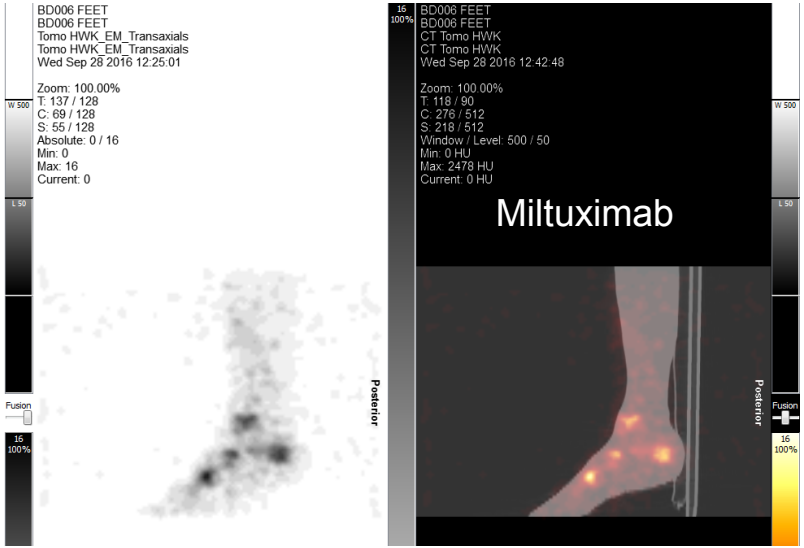
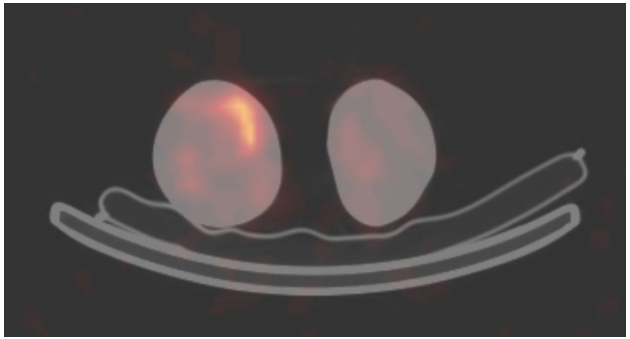
Patient 2: Foot and Knee Uptake in Bone Metastases at 24h



Left Foot



Left Knee – distal view

Spect CT - Clear targeting of prostate cancer metastases by Ga^{67}- Miltuximab®

Addressable Indications

Cancer	New cases diagnosed in 2012	Percent of all cancers (excl. non-melanoma skin cancers)	Mortality Rate
Prostate	1,094,916	15	307,481
Esophagus	323,008	4	281,217
Bladder	330,380	5	123,051
Pancreas	178,161	2	173,827
Brain, nervous system	139,608	2	106,376
Ovary	238,719	3	151,917
Total	2,831,000	31	1,143,869

Source: http://globocan.iarc.fr

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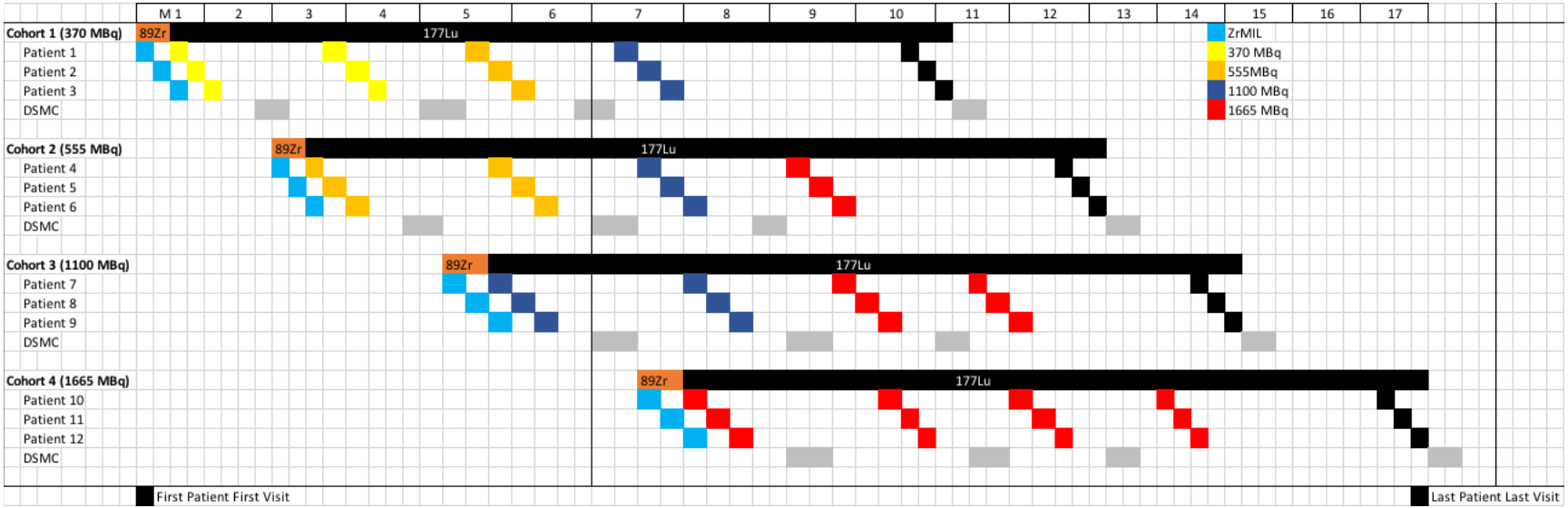
Indicative Dose Escalation Plan for Australian Phase 1 Trial



- Patients will be monitored for 6-12 weeks following last treatment
- If patients still meet initial eligibility requirements, can be offered re-treatment at same or higher dose
- All patients receive 24mg of unlabeled Miltuximab® 1 hour prior to treatment

Use of Funds

Clinical and Pre-Clinical Programs	Stage	Cost (US$ 000)
Pre-clinical program	Preclinical	2,250
Radio-immunotherapy program	Phase I trial	2,750
Humanized antibody engineering program	GMP batch	5,250
	Sub Total	10,250
Other Expenditure		
Staff, space, KOLs, administration, etc. for 2 years		5,500
Unallocated Funds (Runway) †		4,250
	Grand Total	**20,000**

† Runway excludes receipts from the Australian Tax Office re R&D Tax Incentive. These are forecast to total US$6M, ie additional funds available.

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QR Link to GlyTherix IM

- Please point your QR reader at the icon to download the IM or go to https://minomic.box.com/s/mfbeucslzcbprxfdndhnx9s5y5uifton