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Clinical stage anti-inflammatory drug development

to solve the unmet needs of an ageing population

Pre-IPO Capital Raise - August 2024

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Diseases of ageing are overwhelmingly associated with chronic inflammation – a natural response to a lifetime of 'wear and tear'

The biology of these diseases is complex, typically involving the misbehaviour of dozens, even hundreds, of different genes

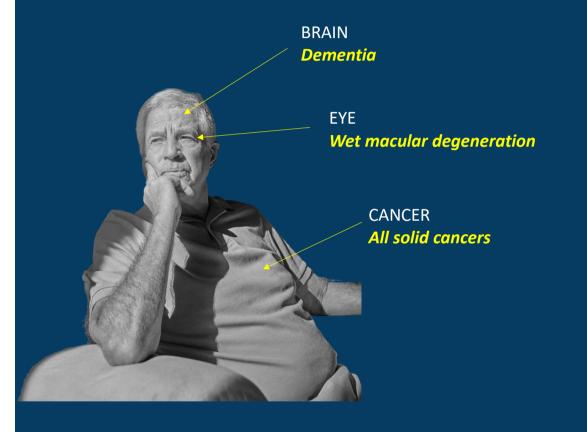
Current anti-inflammatory drugs mostly have been designed to target single genes, making them too limited in their actions to provide more than temporary relief of symptoms at best. As the disease progresses, these drugs usually lose their effectiveness

Filamon is developing first-in-class anti-inflammatory drugs that target multiple misbehaving genes

The aim is a family of next generation anti-inflammatory drugs providing more potent and longer-lasting benefits for many of the common age-related diseases.

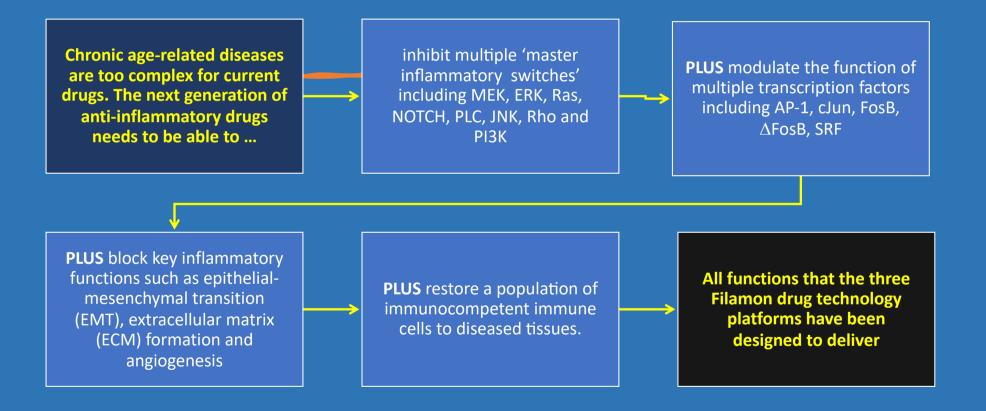
Age-Related Chronic Inflammatory Disease

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Filamon is focused on developing the **next generation of antiinflammatory drugs** for 3 of the most pressing, most under-treated disease states facing an increasingly ageing world

What distinguishes Filamon drugs from the current generation of anti-inflammatory drugs



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USE CASE – CANCER

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Five decades of development of chemotherapy, radiotherapy and immunotherapy have bought undoubted survival benefits for cancer patients.

But ... not all cancer types have benefited.

And regardless of cancer type, once the cancer becomes aggressive and spreads, patients have few effective treatment options.

With the result that cancer remains one of the top 3 causes of death of the elderly.

The one area of cancer therapy that has <u>not</u> progressed in 50 years is in blocking the role of inflammation in cancer.

Inflammation is responsible for the establishment of the **tumour micro-environment (TME)**, with the **TME** being the key driver of cancer growth and spread.

Despite this, a drug that successfully shuts down all key aspects of the TME has yet to be developed.

Filamon believes that **inflammation** is the **missing link in cancer therapy** and sees two Filamon drugs offering ground-breaking opportunities to treat this neglected area of cancer.

KS-c2

successfully passes a first-inhuman study in patients with advanced prostate cancer.

IMP-2

is built on 2 decades of clinical research involving hundreds of cancer patients.

60 patients to be part of the next Phase I/II study scheduled to commence in 2025. A ground-breaking trial that will test for the first time in cancer patients a drug able to shut down vimentin-driven ECM and EMT inflammatory processes

A first-in-class inhibitor (action CONFIDENTIAL) of the inflammatory processes driving cancer growth, the TME, metastasis, immune dysfunction and chemo-resistance.



CANCER KS-c2

Clinical stage

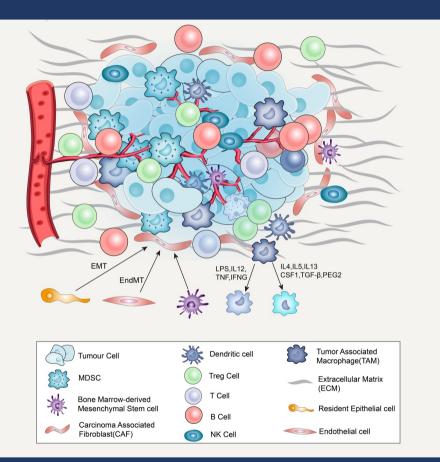
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A tumour is ~50% cancer cells.

The other 50% is a wide range of normal cells all hijacked by cancer cells to support cancer growth.

This is the **TUMOUR MICRO-ENVIRONMENT** (TME) and is the result of **INFLAMMATION**.

Current anti-inflammatory drugs have little or no effect on the TME.



The TME is a key **Missing Link** in cancer treatment

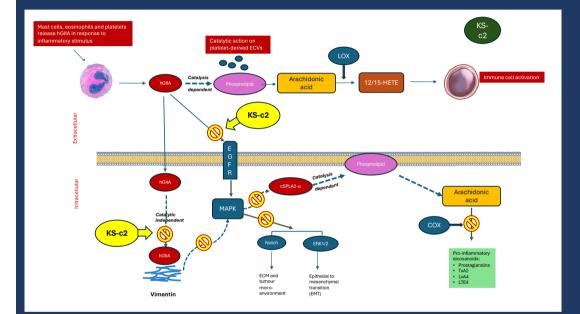
- KS-c2 is the first vimentin inhibitor to reach the clinic, creating a firstin-class inhibitor of
- extracellular matrix formation
- epithelial-mesenchymal transition.

The purpose of the drug is to inhibit the major components of the TME, depriving the cancer cells of their support structure and leaving them more susceptible to the effects of chemotherapy and immunotherapy

CANCER KS-c2

Clinical stage





KS-c2 works by blocking the activation of proteins including vimentin and EGFR by inflammatory ligands such as hGIIA. The inhibitory effect on EGFR importantly occurs despite common EGFR mutations. KS-c2 has successfully undergone a first-inhuman study in late-stage cancer patients confirming oral bioavailability and safety.

An upcoming adaptive Phase I/II study (ADVICE Study) in up to 60 patients with late-stage cancer will be an important world-first study combining a comprehensive anti-TME drug with standard anti-cancer therapy.

USE CASE - OPHTHAMOLOGY

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The major cause of blindness in elderly people is neovascular (wet) age-related macular degeneration. This chronic inflammatory disease affects the macular region of the retina, the region responsible for central vision.

Loss of central vision progresses from age of about 60 to eventual blindness.

Current treatment involves the injection directly into the eyeball of anti-inflammatory drugs on a monthly, rest-of-life basis.

The limitations of current treatment are:

- Failure to work in 1 in 3 people
- Slow, rather than stop, disease progression
- Uncomfortable/painful treatment
- Treat-associated side-effects
- Inconvenience/cost of monthly clinic visits.

LK-BT2 is being developed as a breakthrough oral or eyedropper treatment.

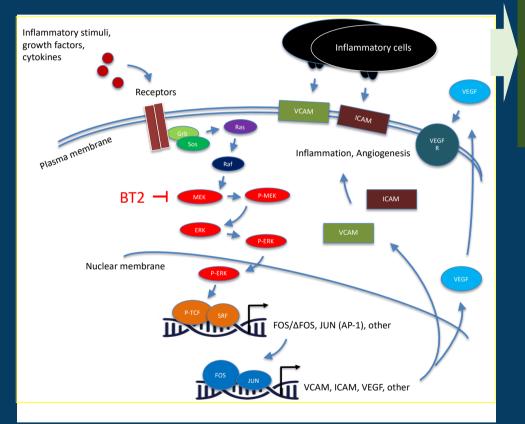
The Federal Government and UNSW are helping Filamon develop LK-BT2 as a result of its potential to become the market leader in a current **A\$15 billion** p.a. **market**

OPHTHAMOLOGY

LK-BT2

Pre-clinical

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LK-BT2 is the first known inhibitor of the MEK-ERK-FOS-cJUN signaling pathway

LK-BT2 not only inhibits VEGF genes, but also inhibits multiple other proinflammatory genes including VCAM-1, ICAM-1, IL-6, IL-1 β , CXCL-1, CXCL-3, CXCL-8 and CCL-20.

LK-BT2 in animal models of macular degeneration outperforms the current lead drug, aflibercept, by a factor of up to 3x.

LK-BT2 is a small molecule with the ability to be dosed as an oral pill or eyedropper. Both are under development.





DEMENTIA

Drug discovery

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WHO Key Facts

- An estimated 55 million people are believed to have dementia worldwide, with ~ 10 million new cases believed added each year.
- Dementia is caused by a variety of diseases and injuries affecting the brain.
- Alzheimer's Disease accounts for 60-70% of all cases of dementia.
- Women are disproportionately affected by dementia, and it is now the major cause of death in older women.
- The cost of caring for dementia patients requiring 24-hour care and supervision is predicted to become a major burden on national health budgets and on families providing at-home care.

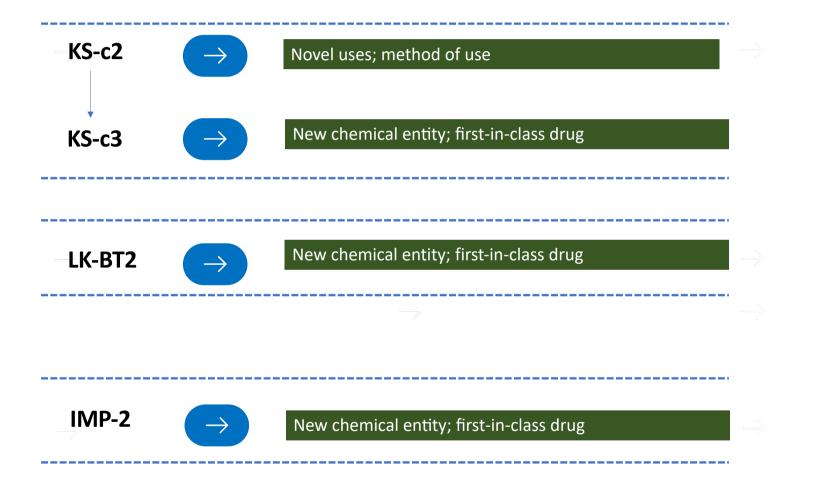
Filamon is bringing two unique approaches to the treatment of dementia involving tau pathology based on the following drug actions:

- Blocking the role of aberrant vimentin behaviour in creating instability of microtubules in brain cells.
- Blocking the prion-like (mis-folding) behaviour of PrP^{Sc}, tau and amyloid-β.



IP Protection

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A GROWING PROBLEM

THE SILVER TSUNAMI

The 'silver tsunami' or 'grey wave' has arrived and with it a dramatic rise in the need for medicines for diseases of ageing.

AGEING POPULATION

The WHO states that by 2030, 1 in 6 people globally will be aged 60+, equating to a populus of 1.4 billion. This figure grows to 2.1 billion by 2050, highlighting the growing addressable market and problem.

CHRONIC INFLAMMATION

Most diseases of ageing are driven by chronic inflammation as a response to a lifetime of 'wear and tear.' The underlying disease processes are complex, involving hundreds of different genes.

THE UNMET NEED

Current anti-inflammatory drugs have proved inadequate because they have been designed for simple inflammatory diseases. A new generation of anti-inflammatory drugs is needed to handle this multigene complexity.



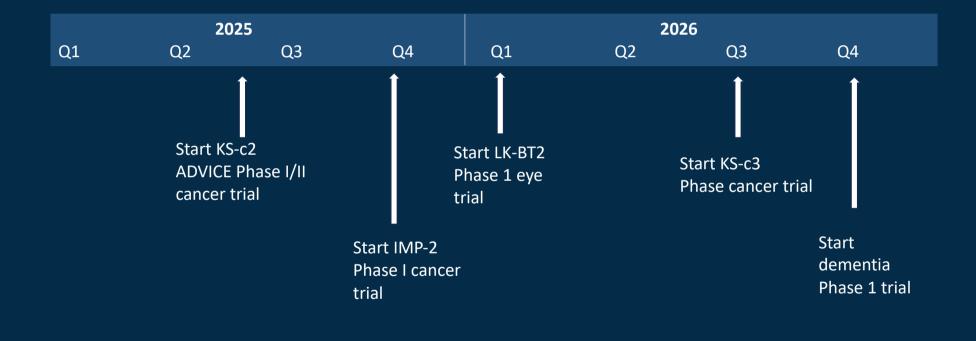
Fillamon brings a significant breakthrough in the treatment of complex chronic inflammatory diseases, underpinned by significant tertiary research.

FILAMON

has curated three drug platforms that it believes will deliver the required next generation of anti-inflammatory drugs able to block the role of inflammation driving cancer aggression and spread, neurological damage including dementia, and loss of vision due to a range of degenerative eye diseases

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KEY PROJECTED UPCOMING CLINICAL MILESTONES



EXECUTIVE SUMMARY

NEWS FLOW



Five R&D programs underway gives rise to a steady stream of news flow starting late-2024 and proceeding through to the projected time of IPO and beyond.

LARGE ADDRESSABLE MARKETS



Every Filamon pipeline drug is targeting large and growing markets all marked by needing more effective treatments, and in some cases, any treatment. Every market is valued in the **US\$10s of billions** and is growing as populations age.

MANAGEMENT INCENTIVISED



The founders are converting 60% of their starting equity to Performance Shares linked to meaningful milestones. They only benefit when the Company makes solid progress in both share value and scientific proof-of-concept.

COMPELLING VALUATION



Post-money of \$9M reflects less than 20% of the money already spent to progress the three drug platforms to their current state.



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CAPITAL STRUCTURE

COMPANY PROFILE	
Existing Shares on Issue	66,501,820
Shares on issue post Conversion	26,082,722
Pre-IPO \$3M @ \$0.22	13,636,363
Shares on Issue @ Pre-IPO	39,719,085
Pre-IPO Market Cap @ \$0.22	\$8,738,199

- 40,419,098 ordinary shares belonging primarily to the three founders will be converted into Performance Shares at completion of the Pre-IPO capital raising.
- These shares will vest in two separate, tranches only following IPO completion, being the commencement of a clinical trial and a share price hurdle.

USE OF FUNDS (PRE-IPO)	\$	%
Clinical trial batch of KS-c2	1.5	50
Working Capital	0.7	29
ASX Listing Costs	0.5	15
Offer Costs	0.2	6
TOTAL	\$3.0	100
USE OF FUNDS (IPO)*	\$	%
Clinical Trials	5.8	48
R&D Studies	2.2	18
Working Capital	3.2	28
Offer Costs	0.8	6
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* A more detailed cost breakdown is available upon request and will be itemised in the Company Prospectus



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DR GRAHAM KELLY info@filamon.com www.filamon.com

