



Investor Presentation

Gary Phillips CEO

23 October 2017

Forward looking statement

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 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. Except as required by law we undertake no obligation to update these forward-looking statements as a result of new information, future events or otherwise.

Pharmaxis overview

Pharmaxis is a global leader in drug development for fibrosis & inflammation

- Pharmaxis has built a **successful platform of small molecule drugs targeting fibrosis and inflammation** across various stages of development and approval
- Proven track record of **early stage partnering** and taking products **through to commercialisation** – delivered two products to market
- **Potential to receive total up front and milestone payments of A\$625m** plus further sales based payments (% and milestones) from first deal – A\$68m already received
- **Strong discovery pipeline targeting high value indications** - one drug in 2 phase 2 trials, one drug program to start phase 1 in 2017, three compounds in development
- **Growing revenues from approved product sales (A\$4.8m in FY17) & milestones (A\$27m FYTD 2018)**
- **Strong balance sheet - A\$22m** at 6/17 plus **A\$27m** milestone received Q3 2017 and **A\$15m** milestone expected H2 2017
- Purpose built **manufacturing and research facility** in Sydney
- **Strong institutional share register**; including offshore specialist biotech funds

Shareholders & trading



| Financial Information | |
|--|--------------|
| ASX Code | PXS |
| Market Cap ¹ | \$85m |
| Shares on Issue | 320m |
| Employee Options | 13m |
| Liquidity (2017 turnover YTD) ¹ | 62m shares |
| Cash Balance (proforma) | \$49m |

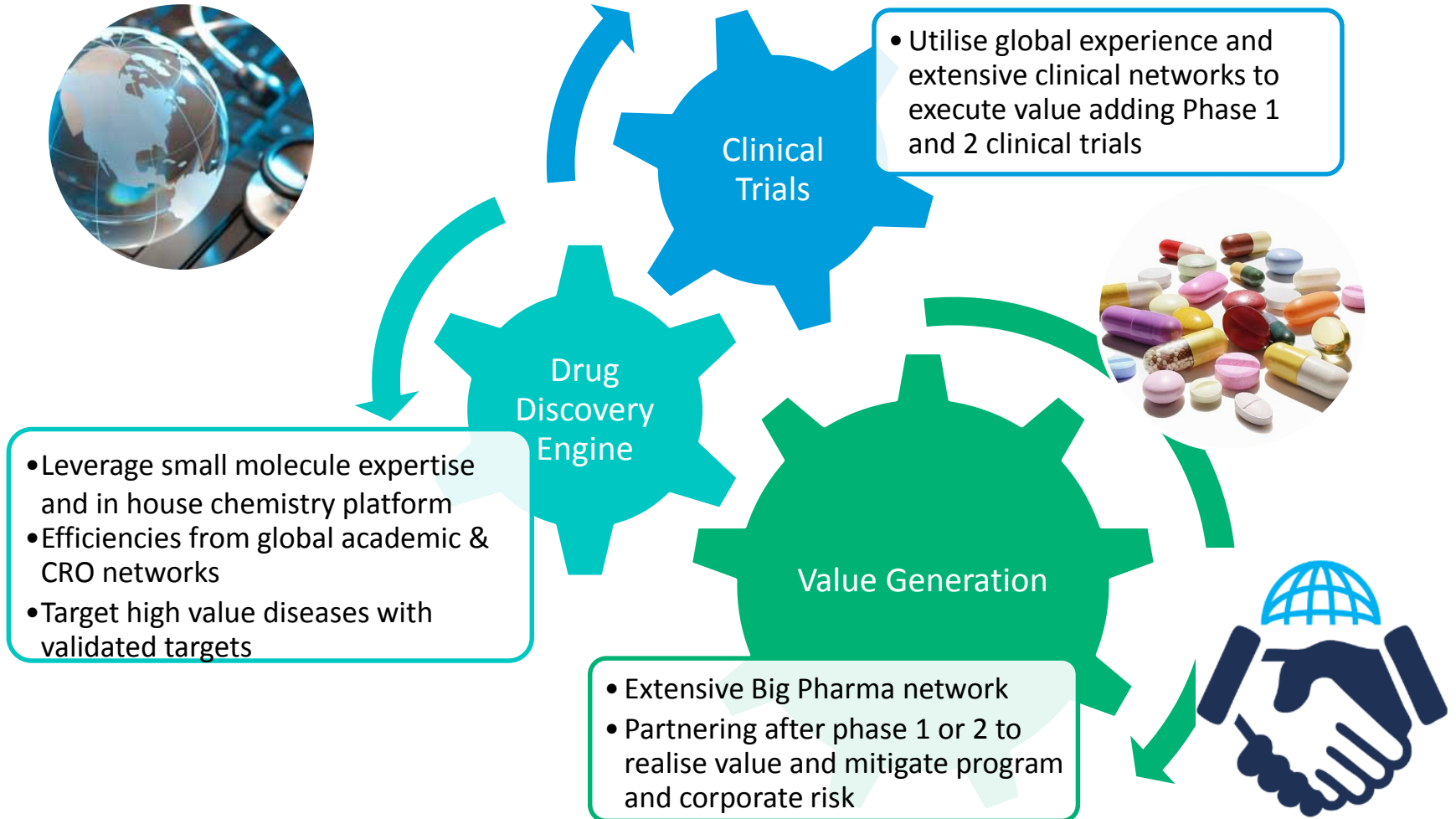
| Institutional Ownership | % |
|--------------------------------------|------------|
| BVF Partners (US) | 20% |
| Australian Ethical | 10% |
| Allan Gray | 7% |
| Montoya Investments (UK) | 6% |
| Other Institutions | 8% |
| Total Institutional Ownership | 51% |

1. At 19 October 2017



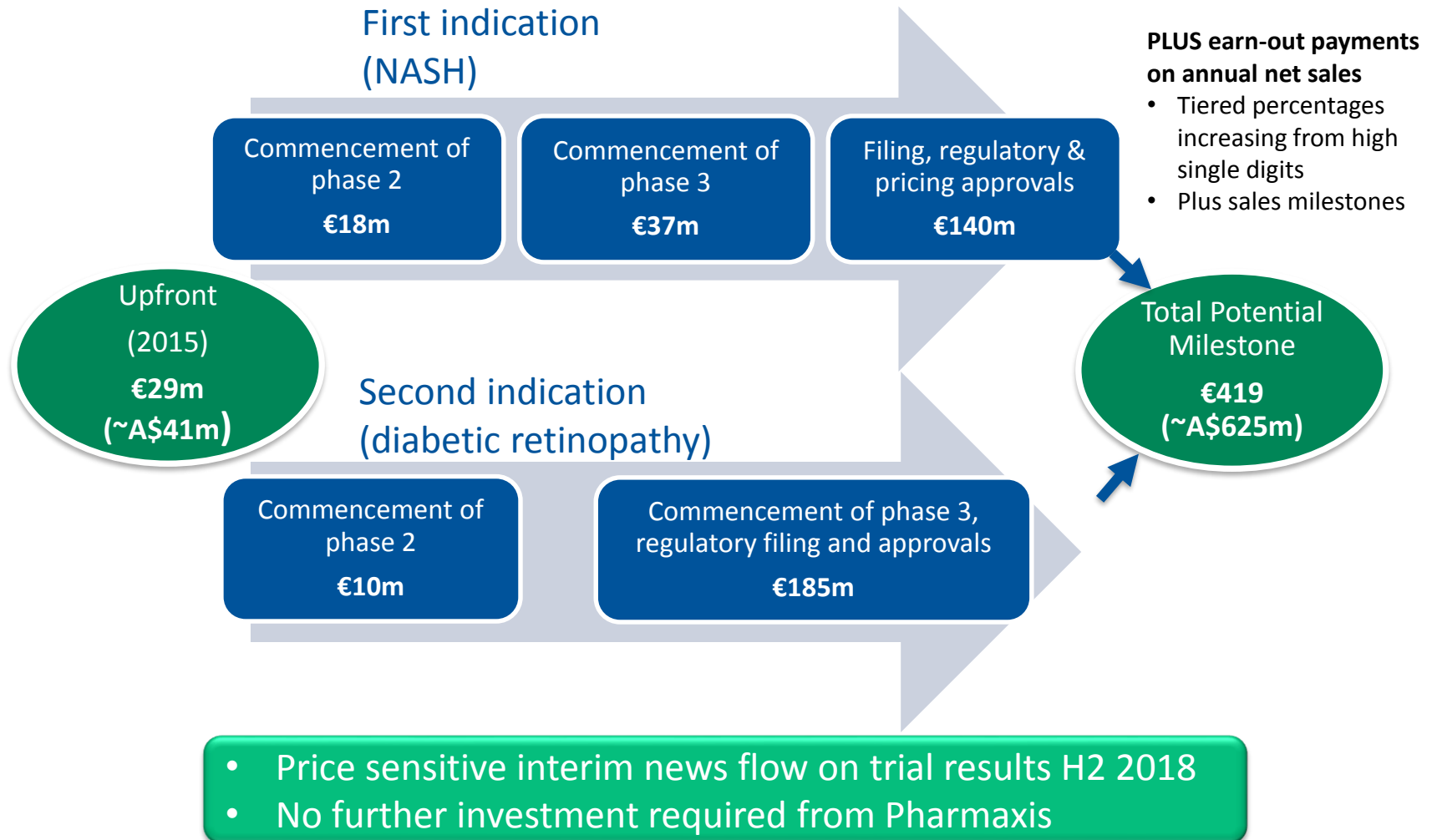
pharmaxis

Pharmaxis has a successful track record of research, development and commercialisation of human healthcare products for the treatment and management of fibrotic and inflammatory diseases




Boehringer Ingelheim deal

Deal structure illustrates value generating potential of Pharmaxis business model



Pharmaxis portfolio

| | Indication | Discovery | Lead Optimisation | Pre Clinical | Phase I | Phase II | Phase III | Marketed |
|----------------------|---|--|-------------------|--------------|---------|---|-----------|---|
| Commercial | | | | | | | | |
| Bronchitol® US | Cystic fibrosis | Phase 3 trial met primary endpoint in 2017. Subject to FDA approval launch commercially in the US in 2018. Chiesi has responsibility (incurring all costs) for completing the New Drug Application with the FDA and US commercialisation. | | | | | |  |
| Bronchitol RoW | Cystic fibrosis | Bronchitol is currently sold in the UK and Germany by Chiesi and recently added Italy (launch H2 17). Recently approved for sale in Russia. Bronchitol & Aridol business segment expected to transition to profitability over the next 12 to 24 months irrespective of any approval in the US. A\$2.8m revenue in FY17 | | | | | | Distributors |
| Aridol® | Asthma diagnosis | Aridol is approved and sold in Australia, South Korea and a number of European countries. A\$2m revenue in FY17. | | | | | | Direct & Dist |
| In the clinic | | | | | | | | |
| SSAO (PXS-4728A) | NASH | Sold to Boehringer Ingelheim in May 2015. PXS received payments of A\$68m to date. Total potential milestone payments of A\$290m during development program and further royalties and sales related milestones following approval. | | | |  | | |
| SSAO (PXS-4728A) | Diabetic retinopathy | Boehringer Ingelheim commenced a Phase 2 trial in September 2017. Dosing of first patient triggers a €10m (A\$15) to Pharmaxis. Total potential milestone payments of A\$290m during development and further royalties and sales related milestones following approval. | | | |  | | |
| Discovery | | | | | | | | |
| LOXL-2 | NASH, fibrosis - liver, pulmonary, kidney | Cleared preclinical development and set to enter phase 1 trials Q4 2017. Expected to partner at end of Phase 1 – H2 2018. | | | | synairgen | | |
| SSAO/MPO | Respiratory & cardiovascular | Dual inhibitor with potential anti-inflammatory applications. Targeting Phase 1 trial in 2018 | | | | | | |
| LOX | Scarring; cancer | Anti-fibrotic. Commencing formal pre-clinical tox studies H2 2017. Targeting Phase 1 trial in 2018 | | | | | | |

Validated amine oxidase chemistry platform

Pharmaxis has developed a commercial pipeline of small molecule drugs against high value targets

| Active Program Target Indications |
|-----------------------------------|
| Cardiac Fibrosis |
| COPD / Asthma |
| Kidney fibrosis |
| NASH / Liver fibrosis |
| Pancreatic cancer & myelofibrosis |
| Pulmonary Fibrosis |
| Scarring |
| Diabetic retinopathy |

Pharmaxis Drug Discovery

Amine oxidase enzymes are well validated as targets in diseases with a high unmet medical need:

- Pharmaxis are global leaders in amine oxidase enzyme inhibition
- Pharmaxis owned IP
- Since 2015 the platform has delivered:
 - 1 compound in 2 phase 2 trials
 - 2 compounds to enter phase 1 in 2017
 - 2 compounds planned to enter phase 1 in 2018

Key areas of current focus are NASH and Pulmonary Fibrosis

Senior management

Significant experience in drug development, commercialisation and partnering



Gary Phillips – CEO

- more than 30 years of operational management experience in the pharmaceutical and healthcare industry in Europe, Asia and Australia
- joined Pharmaxis in 2003 and was appointed Chief Executive Officer in March 2013 at which time he was Chief Operating Officer
- previously held country and regional management roles at Novartis – Hungary, Asia Pacific and Australia



Wolfgang Jarolimek – Drug Discovery

- more than 18 years' experience in pharmaceutical drug discovery and published more than 30 peer reviewed articles.
- previously Director of Assay Development and Compound Profiling at the GlaxoSmithKline Centre of Excellence in Drug Discovery in Verona, Italy
- spent 8 years as post-doc at the Max-Planck Institute in Munich, Germany; Baylor College of Medicine, Houston, Texas; Rammelkamp Centre, Cleveland Ohio; and University of Heidelberg, Germany



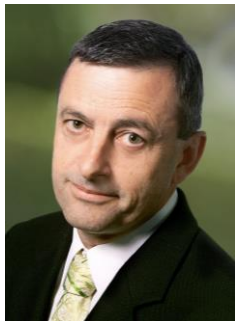
David McGarvey – CFO

- more than 30 years' experience building and funding Australian based companies from inception to globally successful enterprises
- joined Pharmaxis as Chief Financial Officer and Company Secretary in December 2002
- previously Chief Financial Officer of the Filtration and Separations Division of US Filter (1998-2002), and Memtec Limited (1985-1998)
- commenced career at PriceWaterhouseCoopers



Kristen Morgan – Alliance Management

- responsibility for alliance management and medical and regulatory affairs
- more than 19 years' experience in the pharmaceutical industry having previously held a senior role in medical affairs at Sanofi-Aventis, and a commercial sales role at GlaxoSmithKline.



Brett Charlton - Medical

- more than 25 years experience in clinical trial design and management
- author of more than 80 scientific papers
- founding Medical Director of the National Health Sciences Centre
- previously held various positions with the Australian National University, Stanford University, the Baxter Centre for Medical Research, Royal Melbourne Hospital, and the Walter and Eliza Hall Institute

Board of Directors

- Malcolm McComas – Chair**
 - former investment banker at Grant Samuel, County Natwest and Morgan Grenfell
- Will Delaat – Non executive director**
 - former CEO of Merck Australia
 - former chair of Medicines Australia
- Simon Buckingham – Non executive director**
 - former President Global Corporate and Business Development at Actellion
- Gary Phillips – Chief executive officer and managing director**
- Kathleen Metters – Non executive director**
 - former head of global research at Merck

Drug discovery capability

Significant experience in drug development, commercialisation and partnering

Drug discovery leadership



Wolfgang Jarolimek – Head of Drug Discovery, Pharmaxis

- Previously Director of Assay Development and Compound Profiling at the GlaxoSmithKline Centre of Excellence in Drug Discovery in Verona, Italy; Max-Planck Institute in Munich, Germany; Baylor College of Medicine, Houston, Texas; Rammelkamp Centre, Cleveland Ohio; and University of Heidelberg, Germany



Dieter Hamprecht – Head of Chemistry, Pharmaxis

- Previously Managing Director – Boehringer Ingelheim’s research group in Milan; senior medicinal chemistry positions at GSK

Scientific Advisory Board



Prof Jacob George

Professor of Hepatic Medicine – Westmead Millennium Institute, University of Sydney; Head of Dept of Gastroenterology and Hepatology – Westmead Hospital



Prof Carol Pollock

Chair, NSW Cardiovascular Research Network; Chair, Research Advisory Committee of ANZ Society of Nephrology, Chair, Northern Sydney Local Health District Board



Prof Andrew Boyle

Professor of Cardiovascular Medicine, Director of Priority Clinical Centre for Cardiovascular Health, University of Newcastle and John Hunter Hospital



Prof Darren Kelly

Associate Dean (Innovation and Enterprise), The University of Melbourne; Director of Innovation and Enterprise, Centre for Eye Research Australia; Director of Biomedical Research, Department of Medicine, St Vincent’s Hospital Melbourne. Former CEO of Fibrotech Ltd, CEO of OccuRx.



Dr Kathleen Metters

Formerly Senior Vice President and Head of Worldwide Basic Research for Merck & Co. Non executive Director, Pharmaxis Ltd



Dr Alan Robertson

Medicinal chemist with extensive global drug development experience including GSK, Faulding and Amrad. Inventor of migraine drug Zomig. CEO of Pharmaxis 2000 to 2013

Key catalysts

Pharmaxis platform is built to deliver strong news flow

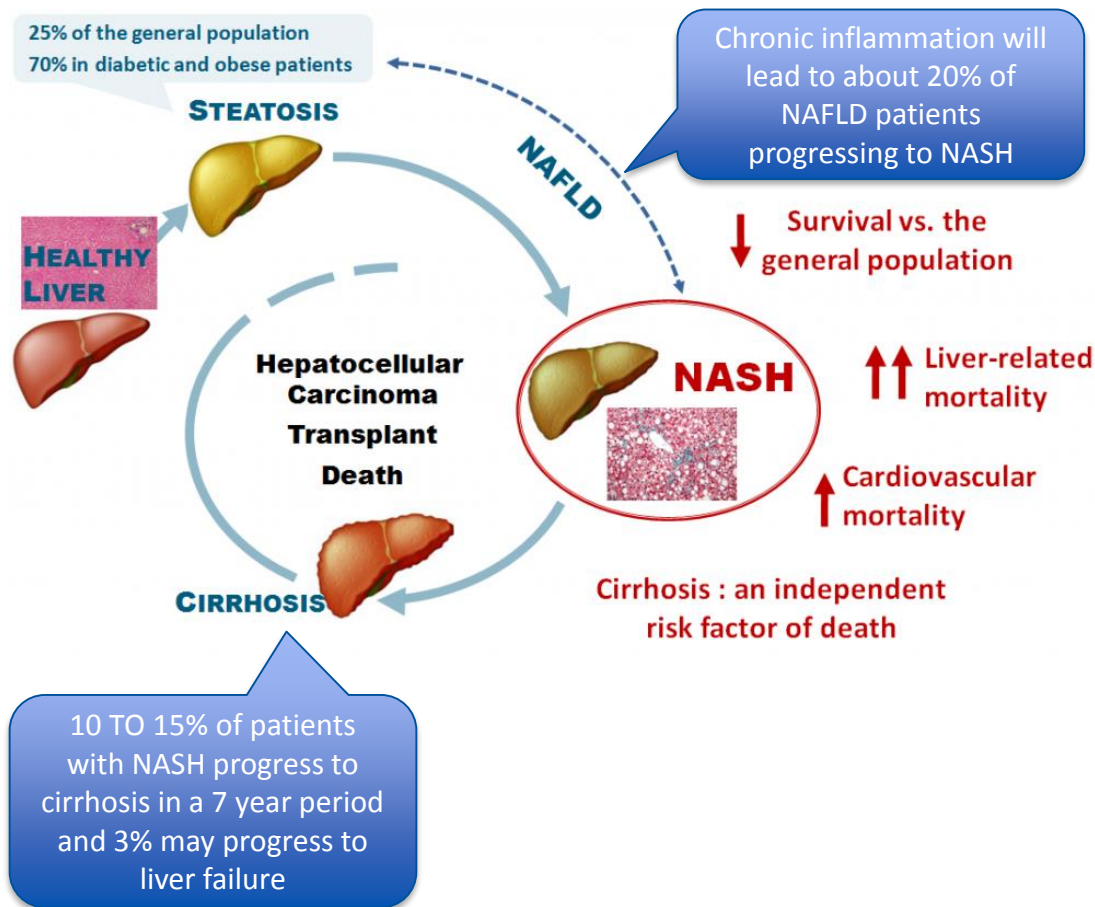
- Phase 2a SSAO (PXS-4728A) NASH trial commenced with first dosing in third quarter 2017 triggering €18m milestone payment (A\$27m) from Boehringer Ingelheim. Trial to reports H2 2018
- Boehringer Ingelheim developing SSAO (PXS-4728A) for second indication (diabetic retinopathy). Phase 2 trial initiated in September 2017 – first patient dosed will trigger a milestone payment of €10m (A\$15m). Trial to report H2 2018
- LOXL-2 program completed preclinical development, set to begin Phase 1 clinical trials in second half of 2017 and targeting partnering deal H2 2018
- Two further compounds with potential as first in class drugs in diseases with high unmet need planned to progress to Phase 1 in 2018
- Bronchitol FDA re-submission by Chiesi in 2018
- Productive R&D engine currently working on new drug discovery technologies
- Evaluating external opportunities for in-license or acquisition



Key markets

NASH, Idiopathic Pulmonary Fibrosis and Diabetic Retinopathy

Disease focus - NASH

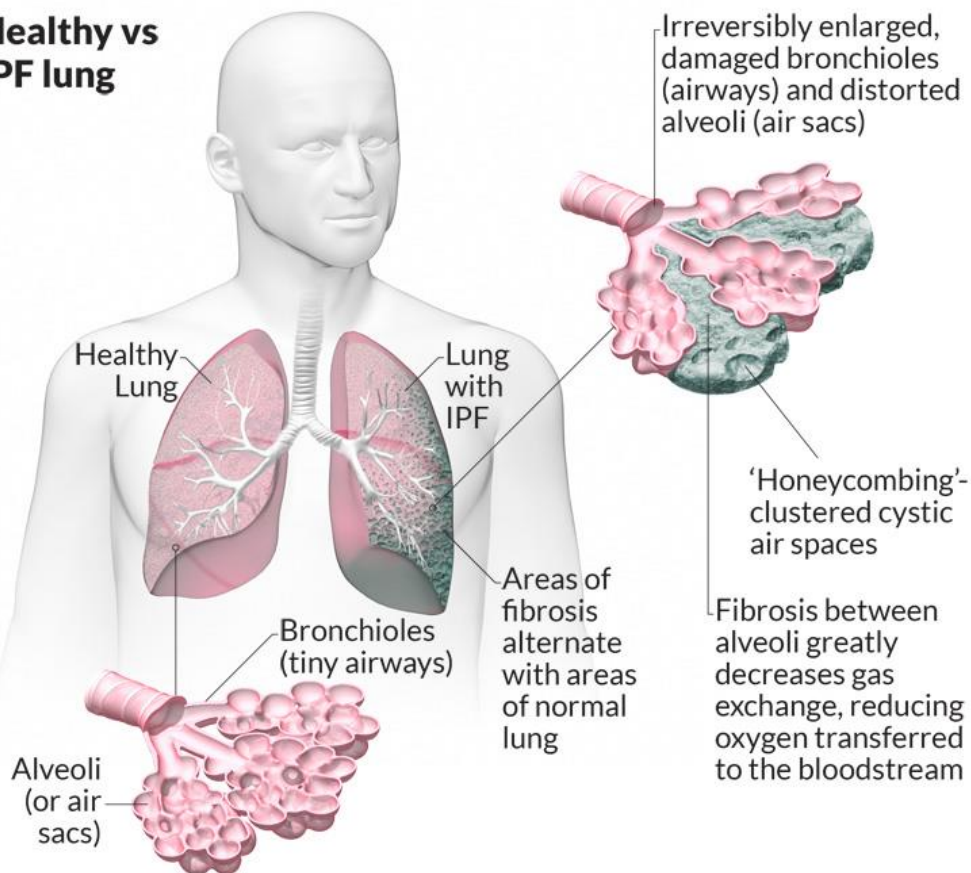


Nonalcoholic steatohepatitis

- NASH is a liver disease characterised by fat deposits, inflammation and tissue damage
- Risk factors are insulin resistance, type 2 diabetes, obesity, hypertension, high blood lipid levels and age
- Up to 16% of liver transplants in the US are due to NASH and by 2020 will overtake hepatitis C as the leading cause of liver transplant
- There no approved drugs
- Deutsche Bank predicts a global market >US\$35b by 2025.

Disease focus - IPF

Healthy vs IPF lung

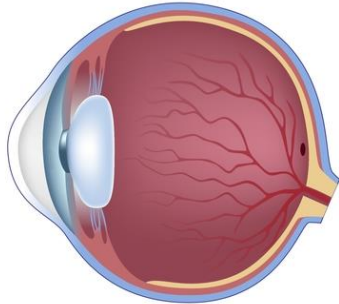


Idiopathic Pulmonary Fibrosis

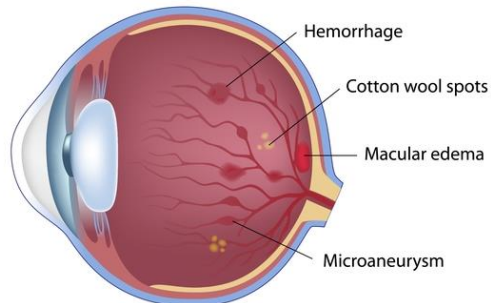
- IPF primarily affects people over the age of 50
- 5,000 IPF patients in Australia
- 100,000 IPF patients in the US
- Prognosis is worse than that of many cancers
- Two drugs approved recently
 - Nintedanib (Boehringer Ingelheim)
 - Pirfenidone (Roche)
- Need for new therapies
- Current products expected to produce global revenues > \$1.1 billion by 2017

Disease focus – diabetic retinopathy

Normal

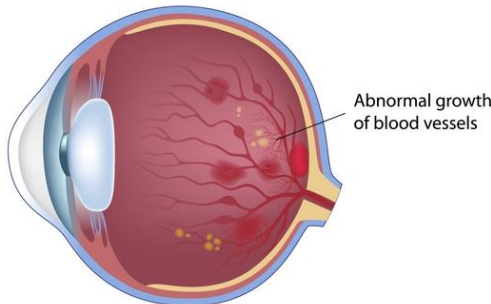


Diabetic Retinopathy



Nonproliferative Retinopathy

Proliferative Retinopathy

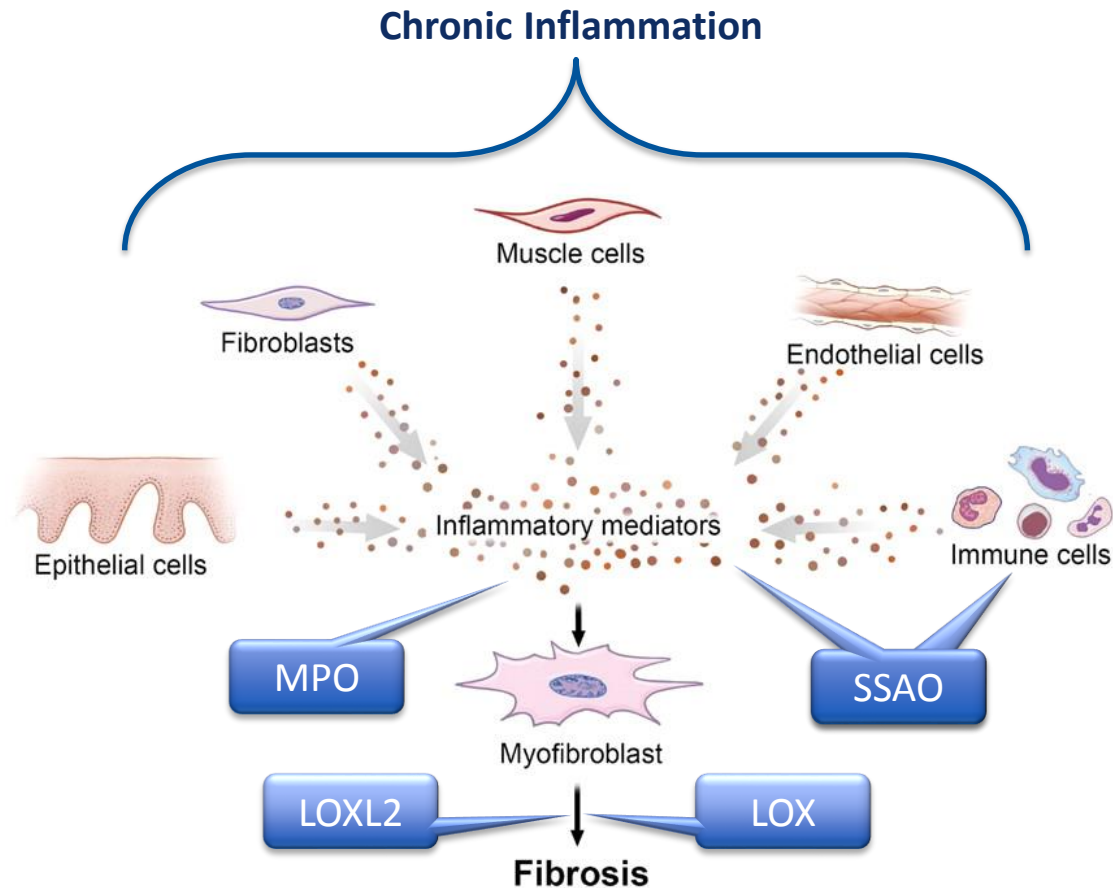


Diabetic retinopathy

- DR is the leading cause of vision-loss in adults aged 20-74
- Progresses from mild non-proliferative DR through to proliferative DR.
- Characterised by growth of new blood vessels on retina
- Diabetic macular oedema (DMA) can develop at all stages of DR
- Estimated 95 million people worldwide have DR – vision threatening to 1/3rd
- Urgent need for new therapies

A pipeline of drugs for inflammation and fibrosis

Targeting multiple different pathways





In the clinic

Anti inflammatory drug PXS-4728A (SSAO inhibitor)

SSAO inhibitor: PXS-4728A

Anti inflammatory oral drug sold to Boehringer Ingelheim in May 2015

SOLD

- Mechanism based inhibitor of SSAO
 - Small molecule oral drug
 - Important pathway in several inflammatory diseases of the liver, kidney, heart, eye and CNS.
- Development status
 - Pharmaxis discovery – patent filed 2012
 - Effective in multiple pre clinical models inflammatory disease such as NASH and airway inflammation
 - Sold to BI in May 2015
 - Phase 2a trial in NASH commenced August 2017 (<https://clinicaltrials.gov/ct2/show/NCT03166735>)
 - Phase 2a trial in diabetic retinopathy initiated September 2017 (<https://clinicaltrials.gov/ct2/show/NCT03238963>)

External validation of PXS drug discovery and ability to negotiate valuable global deals

First indication: Phase 2a NASH study

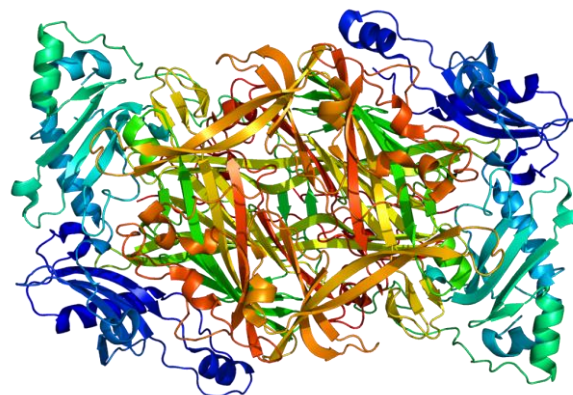
Recruitment open and dosing commenced

Study Design

- 150 patients with moderate to severe steatosis
- 4 doses placebo controlled
- 12 week duration
- Proof of mechanism and support of dose finding
- Safety evaluation in patients with clinical evidence of NASH
- Study expected to report H2 2018

Target Product Profile

- AOC3 (SSAO) inhibitor for the treatment of NASH / liver fibrosis with anti-inflammatory and anti-oxidative stress activities
- Once a day oral dosage
- Indicated for treatment of NASH with liver fibrosis stages 2 & 3, or NAS ≥ 4



Structure of the AOC3 protein

Second indication: Phase 2a diabetic retinopathy study

Phase 2 trial initiated

Study Design

- 100 patients with moderately severe non-proliferative DR without centre involved diabetic macular oedema
- Placebo controlled
- 12 week duration
- Proof of mechanism and support of dose finding
- Safety evaluation in patients
- Study expected to report H2 2018

Target Product Profile

- AOC3 (SSAO) inhibitor for the reduction in retinal oxidative stress, hypoxia, inflammation, angiogenesis, advanced glycation end products, leading to stabilization and/or improvement of DR
- Once a day oral dosage
- Indicated for treatment of moderately severe and severe non-proliferative DR without centrally involved diabetic macular oedema

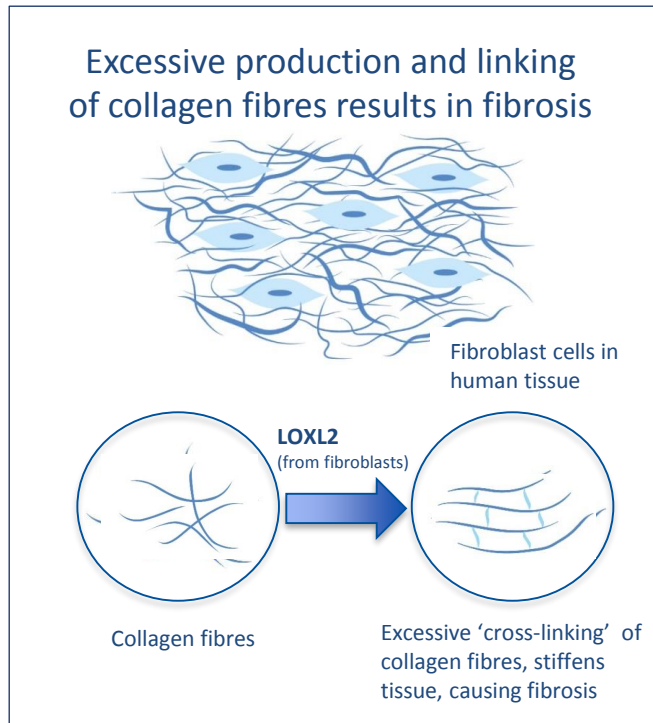


Approaching the clinic

Anti fibrotic program targeting the LOXL-2 enzyme for NASH, IPF and other fibrotic diseases

Pharmaxis LOXL2 inhibition for NASH & other fibrotic diseases

An attractive target and development program



- Potential indications:
 - NASH / Liver Fibrosis
 - Pulmonary fibrosis (IPF)
 - Kidney
 - Cardiac fibrosis
- Significant market opportunity
- Development status:
 - Pharmaxis discovery – patent filed 2016
 - Effective in pre clinical models of fibrosis and cancer
 - 2 candidate compounds completed pre-clinical trials and 28 day toxicity studies
 - Phase 1 clinical study due to commence in Q4 17
 - Competitive profile:
 - Novel target and mechanism of action
 - Once daily oral drug
 - Complete inhibition of LOXL2 enzyme
 - Opportunity to use in combination with other Pharma pipeline drugs

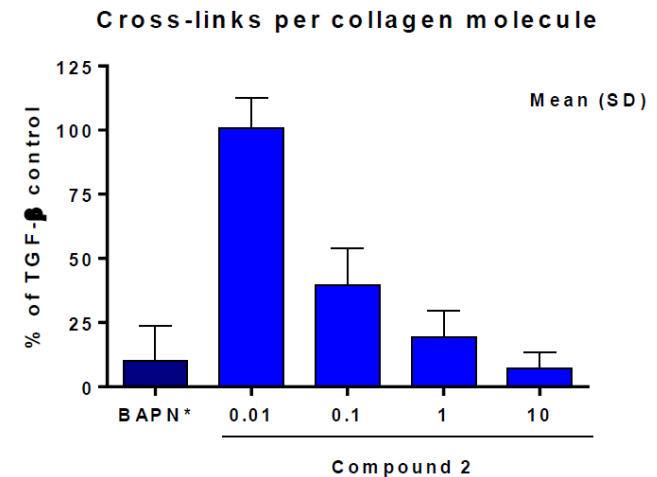
Pharmaxis LOXL2 Synairgen collaboration

Collaboration with Synairgen

- Shares risk and reward based on investment in program
- Access to Synairgen's strength in fibrosis biology and human tissue models technology platform
- Faster time to value appreciation and partnering points of phase 1 or 2a
- Risk share - Synairgen funding pre-clinical tox and phase 1 of first compound
- Revenue share for IPF phase 1 partnering deal: 50/50
- Partnering deal(s) from additional indications (eg NASH) results in larger PXS deal share

synairgen

Treatment of in vitro cultures using cells from IPF patients reduces collagen cross-linking



In Vitro human IPF tissue data supports mechanism of action

Fibrosis and NASH M&A

Attractive deal values for phase 1 and phase 2 clinical assets

| Acquirer | Company | Indication | Deal Type | Stage | Upfront (US\$M) | Potential (US\$M) |
|-------------------------|------------------|----------------------------|-------------------|-----------|-----------------|-------------------|
| < 2 years ago | | | | | | |
| Gilead | Nimbus | NASH - metabolic | Partnership | P1 | 400 | 1,200 |
| Gilead | Phenex | NASH – metabolic | Asset Aqun | P2 | U | 470 |
| Novartis | Conatus | NASH - inflammatory | Option | P2 | 50 | 650 |
| Allergan | Tobira | NASH - inflammatory | Acquisition | P2 | 400 | 800 |
| Allergan | Akarna | NASH - metabolic | Acquisition | Pre | 50 | U |
| BMS | Promedior | IPF+ | Acquisition | P2 | 150 | 1,250 |
| BMS | Galecto | IPF | License | P1 | U | 444 |
| BMS | Nitto Denko | NASH - fibrotic | License | P1 | 100 | U |
| Boehringer | Inventiva | IPF+ | License | Discovery | U | €189+ |
| <i>Boehringer</i> | <i>Pharmaxis</i> | <i>NASH - inflammation</i> | <i>Asset Aqun</i> | <i>P1</i> | <i>A\$40</i> | <i>A\$750+</i> |
| > 2 years ago | | | | | | |
| BMS | Amira | IPF | Acquisition | P1 | 325 | 150 |
| Gilead | Arresto | NASH – fibrosis + | Acquisition | P1 | 225 | 225 |
| Biogen Idec | Stromedix | IPF | Acquisition | P2 | 75 | 487 |
| Shire | Lumena | NASH – inflammatory | License | P1 | 260 | U |
| Shire | Fibrotech | Diabetic nephropathy | Acquisition | P1b | 75 | 482 |
| AZ | Regulus | NASH- metabolic + | License + equity | Pre | U | 500 |

LOXL2 inhibitor deal value drivers

| Feature | What do Pharma value? | Pharmaxis LOXL2 program status |
|-------------------------------|---|---|
| Disease target | Independent validation | Multiple references including Pharma company authored. |
| Pre clinical proof of concept | 2 or more different animal models | 9 different models across 5 different diseases. |
| Drug like qualities | No development flags | Cleared to develop |
| Dosing regimen | Ease of use | Oral once a day tablet or capsule |
| Patent | <ul style="list-style-type: none"> Uncomplicated Composition of matter As long as possible | <ul style="list-style-type: none"> 100% Pharmaxis owned Composition of matter 2016 filing date |
| Cost of Goods | Low | Small molecule with easy synthesis |
| # Compounds | 1 plus backups | 2 lead candidates plus back ups |
| Toxicity | Wide therapeutic window As long as possible | Phase 1 trials will inform 28 day tox studies complete |
| Clinical phase | Phase 1 or 2 | Planned for phase 1 in H2 17 |

LOXL2 program is expected to be partnered at the end of phase 1 - estimated H2 2018



Drug development & other research initiatives

Pharmaxis product portfolio – new opportunities

New compounds expected to enter the clinic in 2018

| | Indication | Discovery | Lead Optimisation | Pre Clinical | Phase I | Phase II | Phase III | Marketed |
|------------------|------------------------------|---|-------------------|--------------|---------|----------|-----------|----------|
| Discovery | | | | | | | | |
| SSAO/MPO | Respiratory & cardiovascular | Dual inhibitor with potential anti-inflammatory applications. Targeting Phase 1 trial in 2018 | | | | | | |
| LOX | Scarring; cancer | Anti-fibrotic. Commencing formal pre-clinical tox studies H2 2017 . Targeting Phase 1 trial in 2018 | | | | | | |

Development strategy

- Identify indications from in-house development programs that have high value potential if developed to phase 2a / 2b
- Evaluate external opportunities for in-license or acquisition:
 - Phase 1 ready
 - Inflammation or fibrosis
 - Small molecule or biologic

Pharmaxis purpose built facility

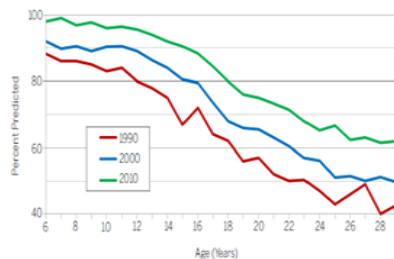
Pharmaxis has a purpose built manufacturing and drug development facility in Sydney

- Manufacturing and research facilities
- Productive R&D drug discovery engine
- Team of 15 scientists specialising in amine oxidase chemistry drug discovery and pre clinical development
- Capability to run global clinical trials
- Manufacturing and exporting approved products:
 - [Bronchitol®](#)
 - [Aridol®](#)
- Capacity for future growth



Bronchitol for cystic fibrosis

Overview



Median FEV₁ % Predicted versus Age



Cystic fibrosis

- Patients
 - US: 30,000;
 - Europe: 37,000;
 - Rest of world: 21,000
- Disease characterised by poorly hydrated, tenacious, thick mucus
- Rapid decline in lung function
- Frequent infections

Bronchitol

- Active ingredient mannitol delivered as an inhalable dry powder
- Restores airway surface liquid
- Mucus clearance enhanced
- Improves lung function
- Reduces incidence of lung infections

Business model - RoW

- Global Bronchitol distributors responsible for promotion & support
 - Chiesi in UK, Germany and Italy
 - Other distributors in Russia, Eastern Europe, Middle East
- PXS revenue share ~50%+

Business model - US

- Phase 3 trial (CF303) reported June 2017
- Chiesi responsible for regulatory filing & commercialisation
- File updated NDA - 2018
- ~A\$13m milestone payment on launch, plus sales milestones
- PXS supplies US market from Sydney factory
- PXS receives high mid teens % of in-market sales plus cost of goods

Summary

Pharmaxis is a global leader in drug development for fibrosis & inflammation

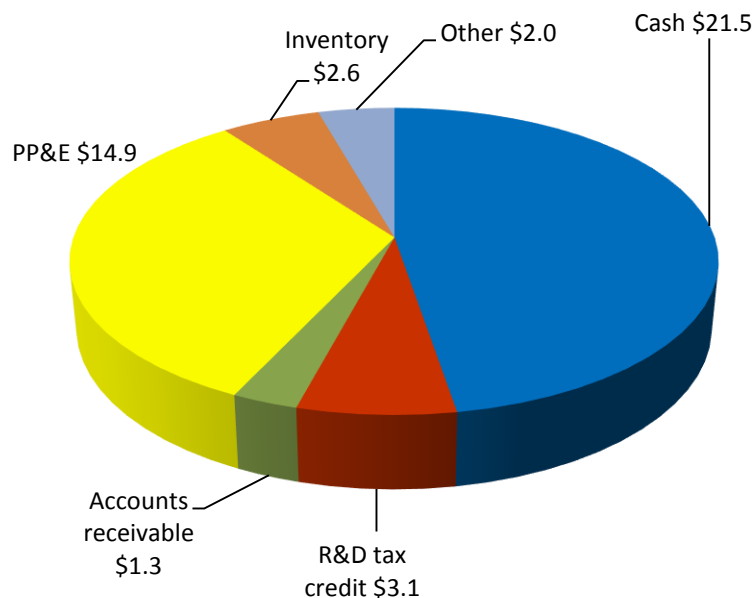
- Pharmaxis have built a **successful platform of small molecule drugs targeting fibrosis and inflammation** across various stages of development and approval
- Proven track record of **early stage partnering** and taking products **through to commercialisation** – delivered two products to market
- **Potential to receive total up front and milestone payments of A\$625m** plus further sales based payments from first deal – A\$68m already received
- **Strong balance sheet - \$22m** at June 2017 plus **\$27m** milestone received Q3 2017 and **A\$15m** milestone expected H2 2017
- **Discovery pipeline targeting high value indications** - one drug in 2 phase 2 trials, one drug program to start phase 1 in 2017, three compounds in development
- **Numerous catalysts over the next 18 months**

Financials highlights

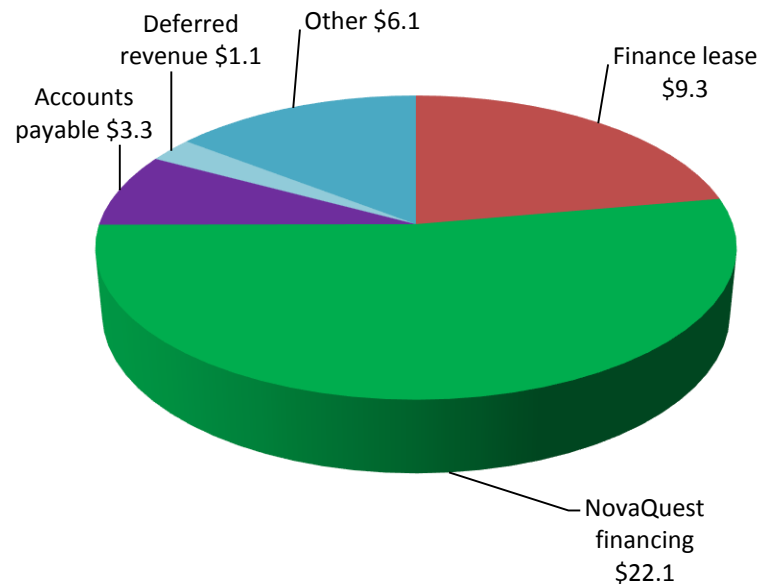
| (unaudited) | Twelve months ended | |
|---|---------------------|-----------------|
| | A\$'000 | |
| | 30-June-17 | 30-June-16 |
| Income statements | | |
| Sales | 4,823 | 6,135 |
| Total revenue | 18,001 | 19,020 |
| Total expenses | (36,347) | (35,476) |
| Net profit (loss) after tax | (18,346) | (16,463) |
| Segment results – adjusted EBITDA | | |
| Bronchitol & Aridol | (7,100) | (8,228) |
| <i>Bronchitol & Aridol – excluding net clinical trial costs</i> | <i>(5,546)</i> | <i>(5,228)</i> |
| New drug development | (4,114) | (2,625) |
| Corporate | (4,017) | (3,988) |
| Total | (15,231) | (14,841) |
| Statement of cash flows | | |
| Cash inflow/ (outflow) from: | | |
| Operations | (15,181) | (11,989) |
| Investing activities | (725) | (1,381) |
| Financing activities | (1,721) | (1,714) |
| Total cash used | (17,627) | (15,084) |
| Foreign currency exchange rate changes impact on cash | (78) | 155 |
| Cash at bank | 21,504 | 39,209 |

Balance sheet – 30 June 2017

Assets (\$45m)



Liabilities (\$42m)



- Finance lease over 20 Rodborough Rd (to 2024)
- NovaQuest financing – not repayable other than as % of Bronchitol revenue



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