

ASX RELEASE

10 November 2021

## **KAZIA ANNUAL GENERAL MEETING MATERIALS**

Sydney, 10 November 2021 – Kazia Therapeutics Limited (ASX: KZA; NASDAQ: KZIA), an Australian oncology-focused biotechnology company, is pleased to provide the Chairman’s Address and CEO presentation which will be discussed at our Annual General Meeting at 10am this morning.

[ENDS]

### **About Kazia Therapeutics Limited**

Kazia Therapeutics Limited (NASDAQ: KZIA; ASX: KZA) is an oncology-focused drug development company, based in Sydney, Australia.

Our lead program is paxalisib, a brain-penetrant inhibitor of the PI3K / Akt / mTOR pathway, which is being developed to treat glioblastoma, the most common and most aggressive form of primary brain cancer in adults. Licensed from Genentech in late 2016, paxalisib commenced recruitment to GBM AGILE, a pivotal study in glioblastoma, in January 2021. Eight additional studies are active in various forms of brain cancer. Paxalisib was granted Orphan Drug Designation for glioblastoma by the US FDA in February 2018, and Fast Track Designation for glioblastoma by the US FDA in August 2020. In addition, paxalisib was granted Rare Pediatric Disease Designation and Orphan Designation by the US FDA for DIPG in August 2020.

Kazia is also developing EVT801, a small-molecule inhibitor of VEGFR3, which was licensed from Evotec SE in April 2021. Preclinical data has shown EVT801 to be active against a broad range of tumour types and has provided compelling evidence of synergy with immunology agents. A phase I study commenced recruitment in November 2021.

For more information, please visit [www.kaziatherapeutics.com](http://www.kaziatherapeutics.com) or follow us on Twitter @KaziaTx.

This document was authorized for release to the ASX by James Garner, Chief Executive Officer, Managing Director.

### **Board of Directors**

**Mr Iain Ross** Chairman, Non-Executive Director

**Mr Bryce Carmine** Non-Executive Director

**Mr Steven Coffey** Non-Executive Director

**Dr James Garner** Chief Executive Officer, Managing Director

## **KAZIA ANNUAL GENERAL MEETING 10 NOVEMBER 2021**

### **CHAIRMAN'S ADDRESS**

Ladies and Gentlemen,

I am delighted to welcome you to the Annual General Meeting for Kazia Therapeutics Limited. Once again, the AGM is being conducted in a virtual format this year due to the ongoing COVID-19 pandemic. I am sure I echo the sentiments of many shareholders when I say that I very much hope for some return to normality in the year ahead.

When I spoke to you this time last year, I referred at length to the imminent commencement of the GBM AGILE pivotal study for paxalisib. We have since done exactly as we said we would do, and the study began recruitment in January. As you know, GBM AGILE will serve as the pivotal study for registration of paxalisib in the most common form of brain cancer, glioblastoma. Commencement of recruitment therefore marks a watershed moment for Kazia. We are now a late-stage oncology company, with a lead program potentially just a few years away from a marketing approval. Indeed, we are one of only a few companies in the world to have reached such an advanced stage in the fight against glioblastoma. The journey is far from over, but we take great satisfaction in the extraordinary progress that has been made with paxalisib over the past five years.

We expect that we will shortly be able to share final data from the phase II study of paxalisib in glioblastoma. In addition, there are no fewer than eight other clinical trials of paxalisib currently in various stages of operation. It therefore goes without saying that we will continue to report a regular flow of data as these studies progress.

However, both the company and its shareholders must begin to focus their attention on more practical questions. Whether paxalisib works is no longer the primary consideration for investors. For now, that question has been answered to the best of our ability, and the answer is unambiguously positive. We must now all address ourselves to the question of how paxalisib will be brought to market. You will hear much from us in the year ahead about our

plans and objectives in this area, as Kazia moves inexorably from a development-stage company to a profitable commercial organisation.

We took one of the first significant steps in this transition in March of this year, when we licensed the Greater China rights for paxalisib to Simcere Pharmaceutical. Simcere is one of China's most dynamic pharmaceutical companies. Our partnership with them will substantially accelerate the entry of paxalisib into the world's second-largest pharmaceutical market. The Kazia and Simcere teams have already been working closely together to submit the initial regulatory application to the Chinese agency. We expect that GBM AGILE will open there next year. In the meantime, the upfront payment from the transaction has provided valuable and largely non-dilutive funds which are being invested directly into the broader paxalisib program.

The timing of future partnering transactions will be driven by a careful consideration of how to maximise value for shareholders. In China, the unique regulatory environment has made it appropriate to move early. In other territories, a later transaction may achieve superior economics. The Board will continue to diligently evaluate all options. We can take great confidence in the fact that paxalisib has already been highly valued by very experienced and well-established partners in a highly competitive process. We retain approximately 90% of the drug's global economic opportunity, and we will continue to evaluate opportunities to partner other territories in due course.

It is fitting that this rapid progress of our lead asset is mirrored by other key developments in the company this year. When we licensed paxalisib from Genentech in 2016, we did not fully anticipate what a large role it would play in the company's evolution. That it has done so is a reflection of its exceptional pedigree and the enormous potential that the drug has since demonstrated. Quite simply, it has proven to be a much more promising asset than even we realised at the time. Nevertheless, we always envisaged a diversified pipeline of high-quality clinical assets. With paxalisib safely launched into a pivotal study, it seemed timely for Kazia to revisit those aspirations. The Board considers it vital that the company not become a 'one trick pony', even if that pony is in fact a thoroughbred racehorse.

To that end, we have brought a second asset into the company: EVT801. You will be familiar by now with the history of this drug candidate. It was invented by Sanofi, one of the top five pharmaceutical companies in the world, and its early development has been steered by Evotec, an organisation which partners

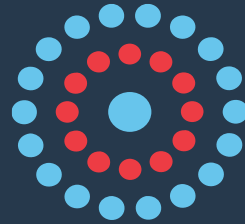
with many large pharmaceutical companies to support the development of their pipeline. For those who are familiar with Evotec and their outstanding reputation, it is no surprise at all that the work which has been done to date on EVT801 is absolutely first-class.

Our task is now to take it through clinical development, and to bring to that project all the creativity, expertise, and passion that we have brought to the development of paxalisib. As you will have seen, the phase I study of EVT801 is now underway, with the first patient successfully enrolled to the study just six months or so after completion of our in-licensing transaction. EVT801 is now a clinical stage oncology asset. No less importantly, Kazia is now a diversified clinical stage oncology company, with two world-class assets in human trials.

Any commentary on our pipeline would be incomplete without noting a final transaction that was accomplished this year. In March, we licensed Cantrixil to Oasmia Pharmaceutical of Sweden, and in doing so closed the last chapter of Kazia's Novogen legacy. We remain strong believers in Cantrixil, and our conviction has been strengthened by the very encouraging final data from the phase I study. We could not have found a better partner than Oasmia, whose achievements and credentials in this disease area are first-class. We will continue to follow their progress with great interest and pride, and we very much hope that Cantrixil will ultimately make a substantial difference in the lives of patients with ovarian cancer.

As I noted last year, it is pleasing to see these many achievements reflected in the company's share price. On the day of our AGM last year, the company's stock closed at \$0.82 on the ASX. Yesterday, it was at \$1.575, representing a 92% appreciation in twelve months. We are grateful to all our shareholders for their ongoing support and, as significant shareholders ourselves, the Board is committed to driving fundamental shareholder value as the company matures.

In conclusion, I want to commend once again our CEO, James Garner, and his management team, for all their efforts and achievements throughout the year. Kazia today is hardly recognisable from the company it was just one year ago. We have become a diversified, clinical-stage oncology company, with two world-class assets in our pipeline. Our lead program, paxalisib, is rapidly approaching potential commercialisation and the company itself has been validated by multiple international partnering transactions. The year ahead provides many, many reasons for optimism.



**KAZIA**  
THERAPEUTICS



## Presentation to Annual General Meeting of Shareholders

Dr James Garner  
Chief Executive Officer

Sydney, NSW  
10 November 2021

# Forward-Looking Statements

This presentation contains **forward-looking statements** within the meaning of the safe-harbor provisions of the Private Securities Litigation Reform Act of 1995. Such statements involve substantial risks and uncertainties, not all of which may be known at the time. All statements contained in this presentation, other than statements of historical fact, including statements regarding our strategy, research and development plans, collaborations, future operations, future financial position, future revenues, projected costs, prospects, plans, and objectives of management, are forward-looking statements. Not all forward-looking statements in this presentation are explicitly identified as such.

Many factors could cause the actual results of the Company to differ materially from the results expressed or implied herein, and you should not place undue reliance on the forward-looking statements. Factors which could change the Company's expected outcomes include, without limitation, our ability to: advance the development of our programs, and to do so within any timelines that may be indicated herein; the safety and efficacy of our drug development candidates; our ability to replicate experimental data; the ongoing validity of patents covering our drug development candidates, and our freedom to operate under third party intellectual property; our ability to obtain necessary regulatory approvals; our ability to enter into and maintain partnerships, collaborations, and other business relationships necessary to the progression of our drug development candidates; the timely availability of necessary capital to pursue our business objectives; and our ability to attract and retain qualified personnel; changes from anticipated levels of customer acceptance of existing and new products and services and other factors.

Although the Company believes that the expectations reflected in such forward-looking statements are reasonable, there can therefore be no assurance that such expectations will prove to be correct. The Company has no obligation as a result of this presentation to clinical trial outcomes, sales, partnerships, future international, national or regional economic and competitive conditions, changes in relationships with customers, access to capital, difficulties in developing and marketing new products and services, or marketing existing products.

In addition, the extent to which the COVID-19 outbreak continues to impact our workforce and our discovery research, supply chain and clinical trial operations activities, and the operations of the third parties on which we rely, will depend on future developments, which are highly uncertain and cannot be predicted with confidence, including the duration and severity of the outbreak, additional or modified government actions, and the actions that may be required to contain the virus or treat its impact.

Any forward-looking statements contained in this presentation speak only as of the date this presentation is made, and we expressly disclaim any obligation to update any forward-looking statements, whether because of new information, future events or otherwise.

# 2021 in Review

## *A Year of Achievements*

**3**

Major cross-border  
licensing deals in  
FY2021

**\$15M**

Revenue in FY2021

**11**

Ongoing clinical  
studies across two  
clinical programs

**179%**

Total shareholder  
return (TSR)  
(Jul 20 to Jun 21)

**Phase III**

Paxalisib pivotal  
study commenced  
in Jan '21

**3**

New paxalisib trial  
partnerships  
executed in FY2021

**>200**

Patients now  
treated with  
paxalisib

**Phase I**

EVT801  
commenced human  
trials in Nov 2021

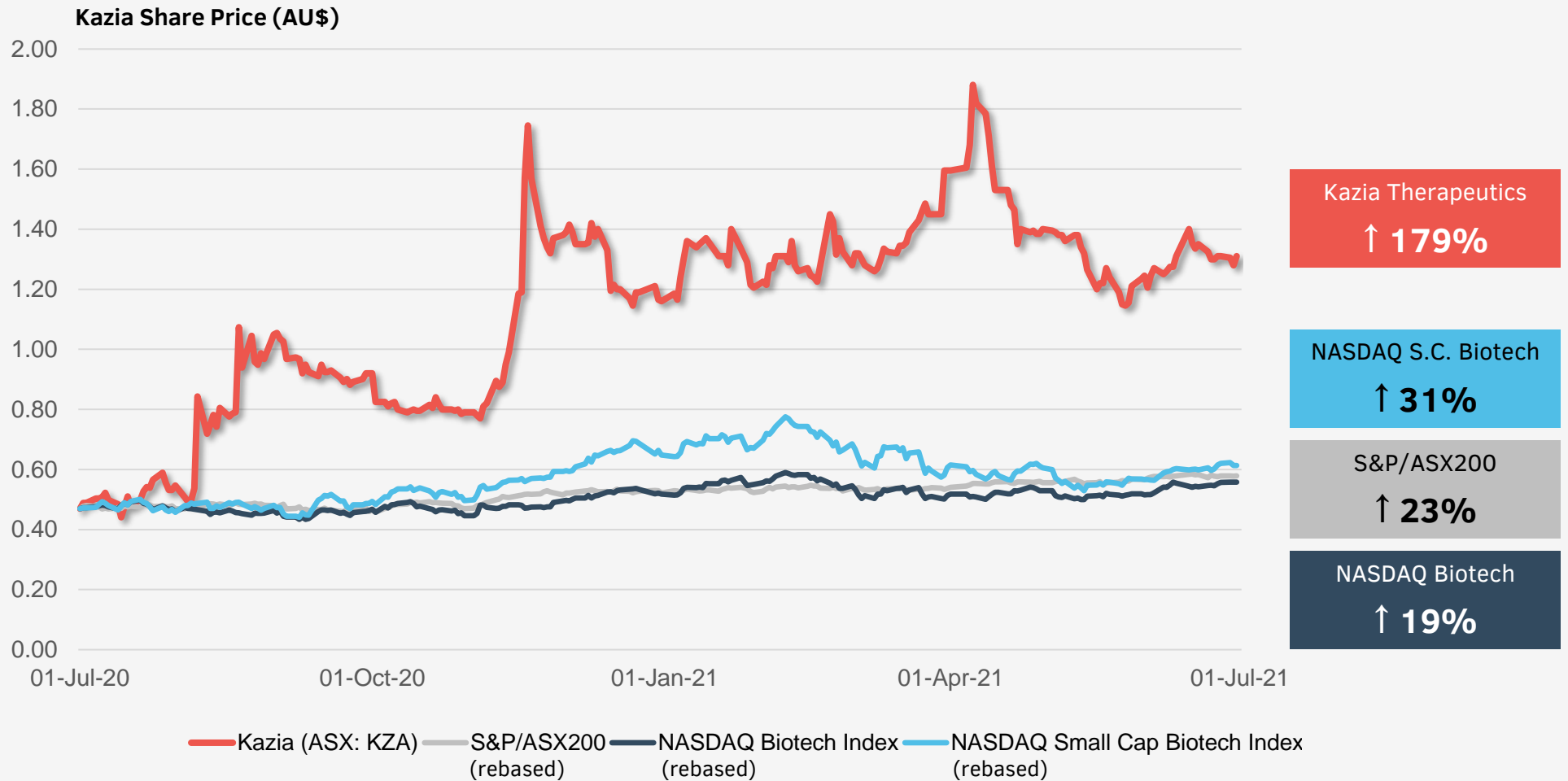
# Financial Performance

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*Building sustainable  
shareholder value*

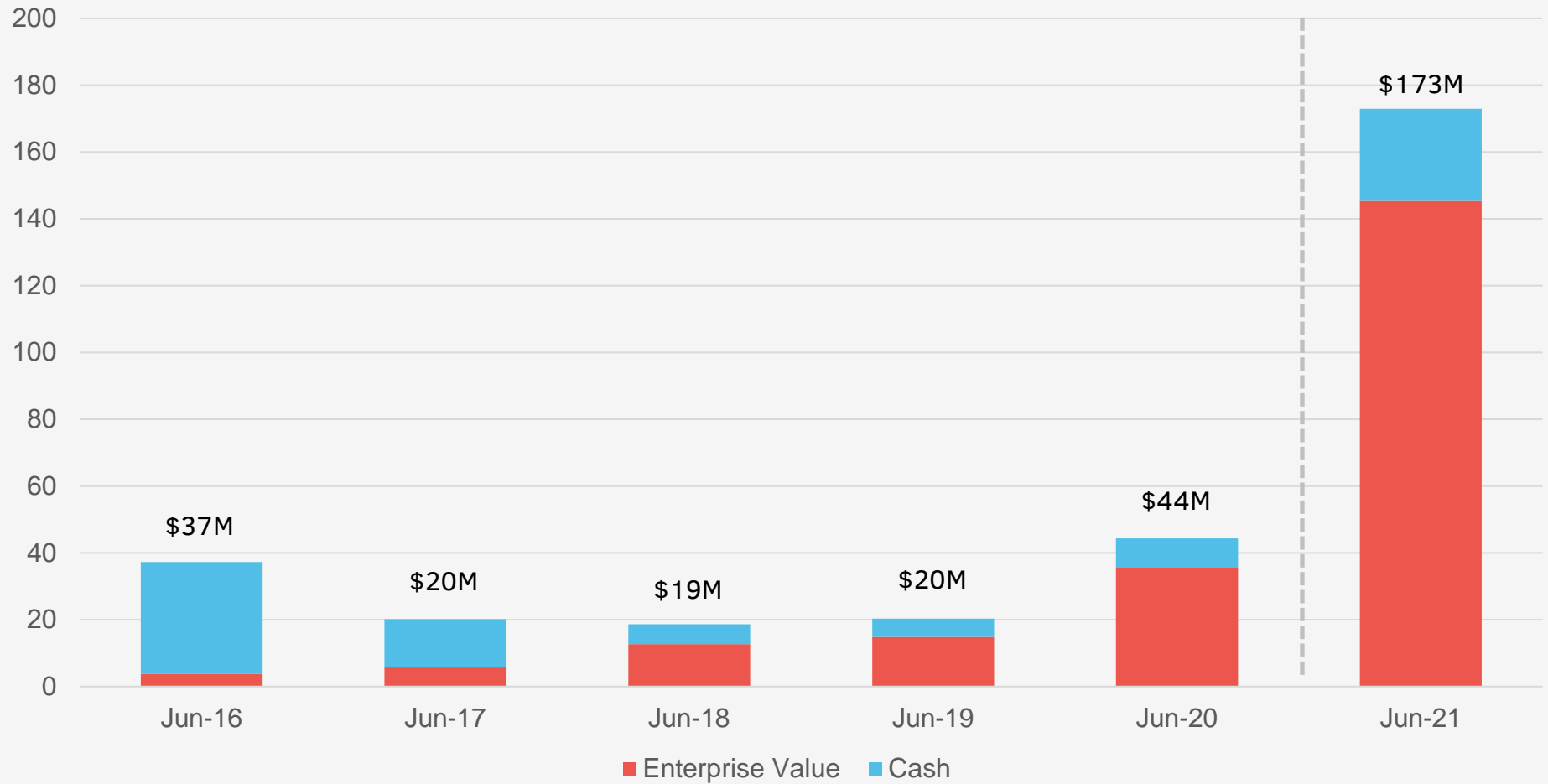


# Share price performance has begun to reflect Kazia's value proposition



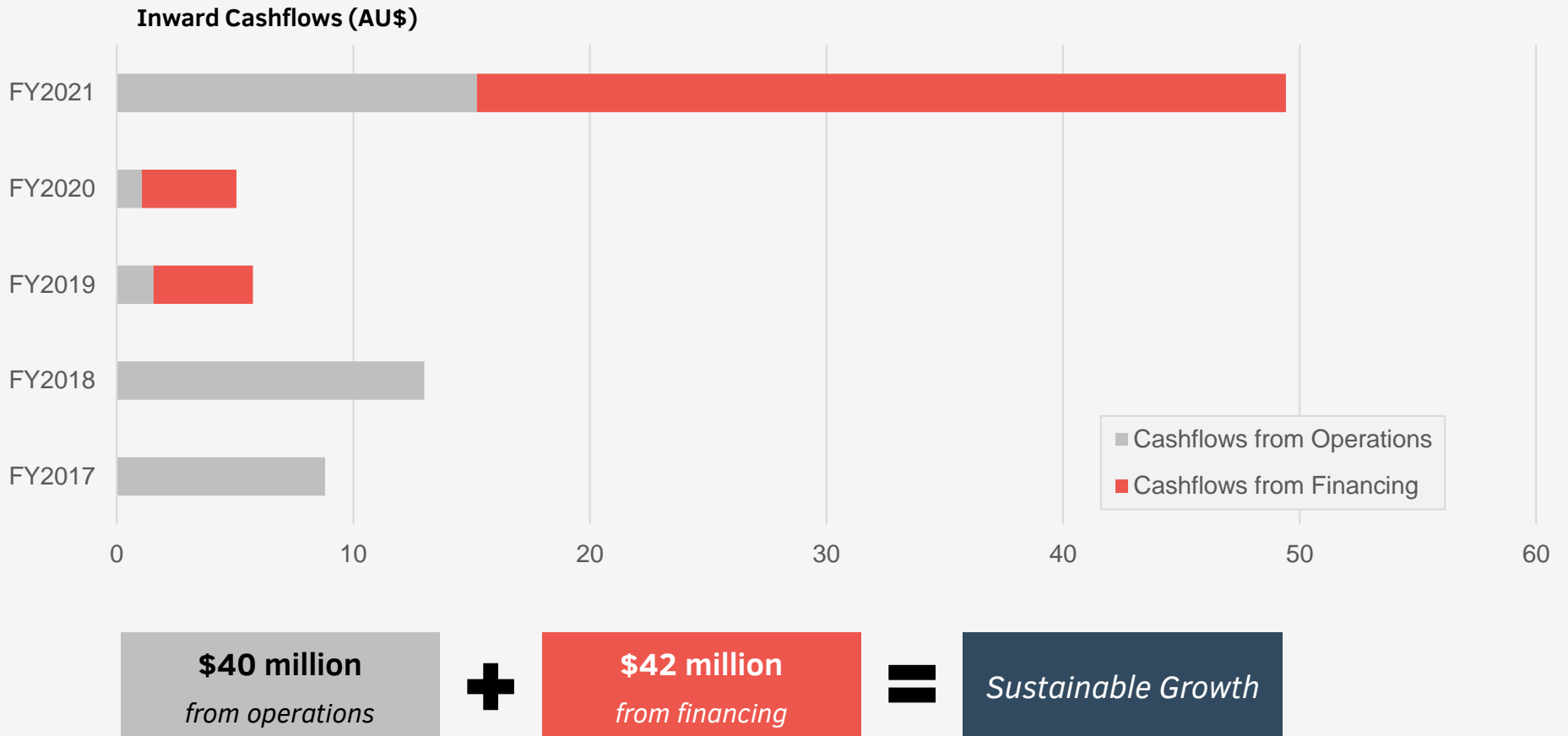
Source: Marketwatch

# Kazia's enterprise value has increased by approximately 37x in the last five years



Source: Company Annual Reports; Marketwatch

# Financing cashflows have been essentially matched by non-dilutive income from other sources



Source: Company Annual Reports

Note: Income includes partnering revenue, Australian Government R&D tax rebate, IP settlement with Noxopharm Limited

**Research coverage has deepened, with five analysts now following Kazia's progress**

# Paxalisib

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*Progressing towards  
commercialisation*

# Primary market research suggests strong clinician support for paxalisib, if successful in clinical trials

## Unmet Need in Glioblastoma



Average Rating by US Clinicians (n=15)

“Current treatment options for GBM patients do a mediocre job at best of taking care of the disease; it’s universally fatal and rapidly progresses.”

US Neuro-Oncologist

“I would rate this an 8 [out of 7] if I could. Treatment has very little variations and patients die quickly.”

US Medical Oncologist

## Paxalisib Mechanism of Action



Average Rating by US Clinicians (n=15)

“This is a known pathway in GBM treatments – it makes sense.”

US Neuro-Oncologist

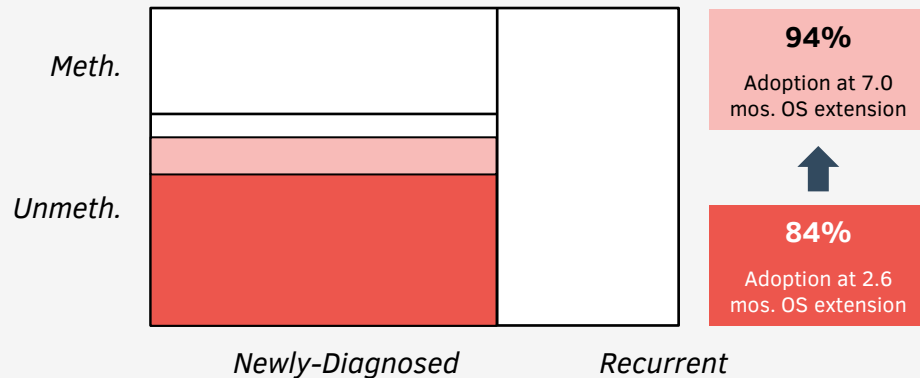
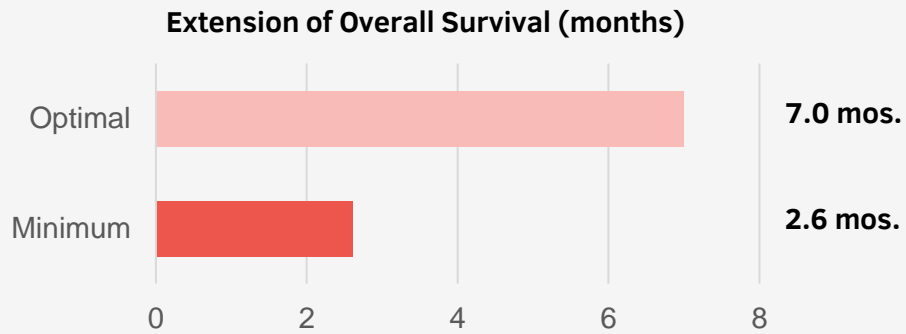
“The MOA is very interesting; I would like to know why this molecule is so effective for the [PI3K/mTOR] target.”

US Medical Oncologist

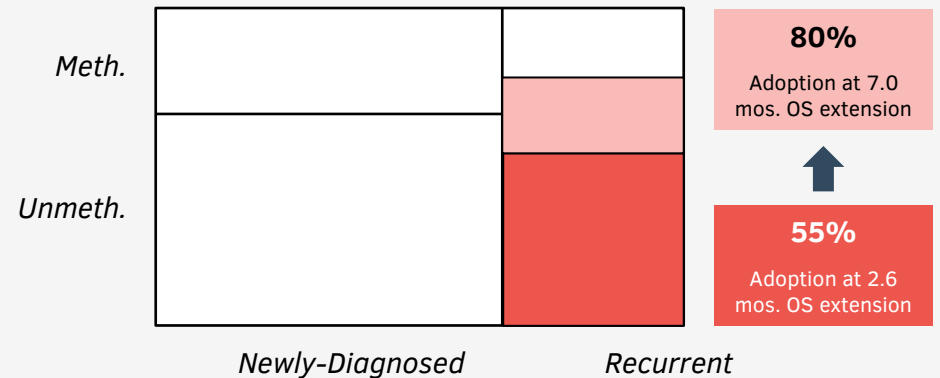
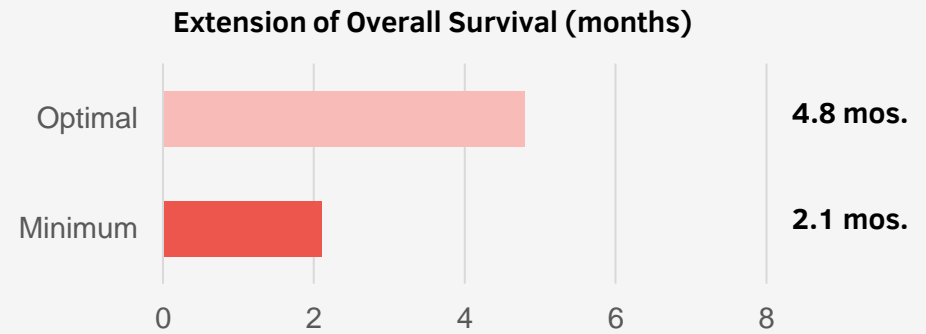
Source: Triangle Insights market research, commissioned by Kazia Therapeutics

# Adoption rate for the commercial product is expected to be very high, due to scarcity of existing treatment options

## Newly-Diagnosed Unmethylated



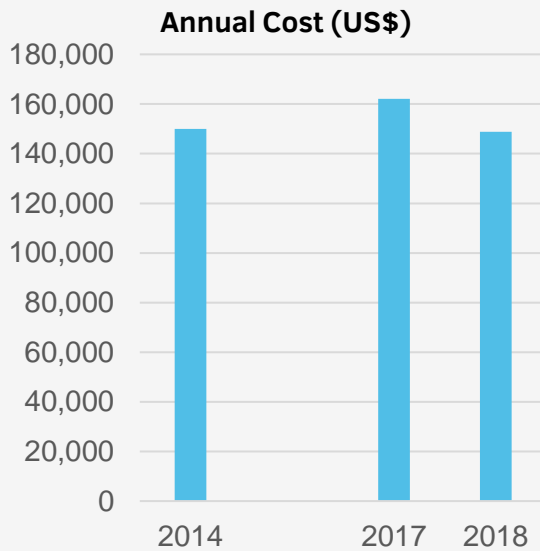
## Recurrent



Source: Triangle Insights market research, commissioned by Kazia Therapeutics

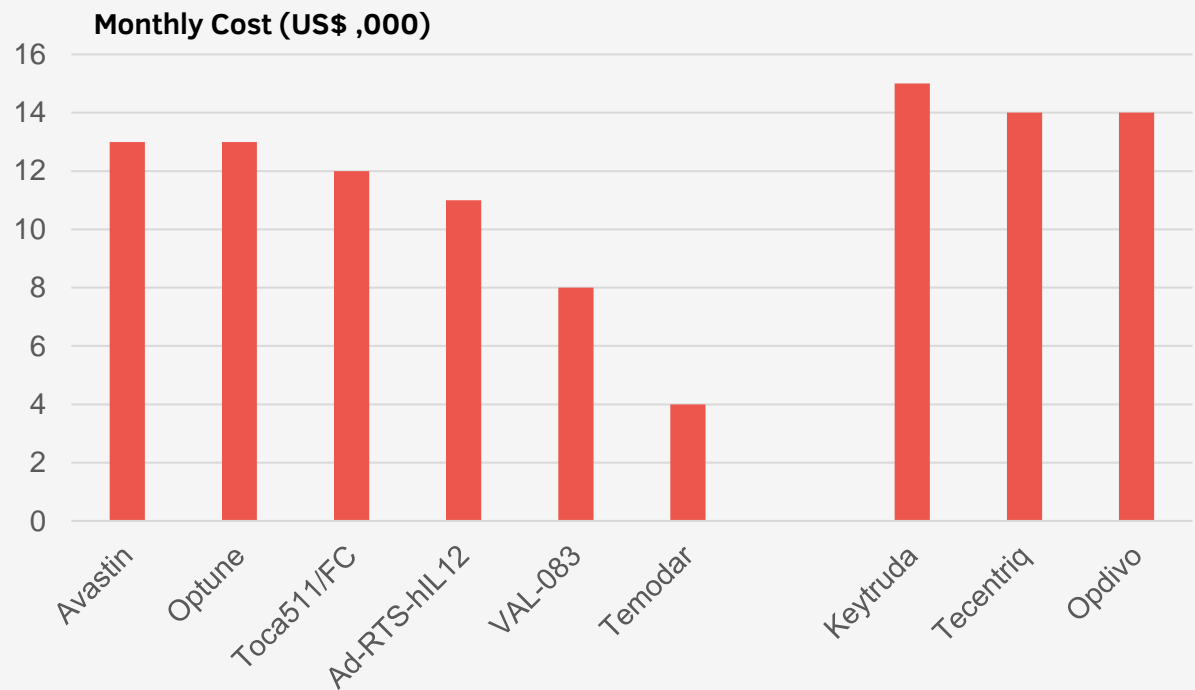
# Pricing comparators indicate monthly treatment costs for paxalisib around US\$ 12K in United States

## Median Annual Cost of New Oncology Products at Launch (United States)



**US\$ 148,800 pa in 2018**

## Current or Forecast Monthly Pricing of Select Comparator Products (United States)



Source: IQVIA Institute (2018); Triangle Insights market research, commissioned by Kazia Therapeutics

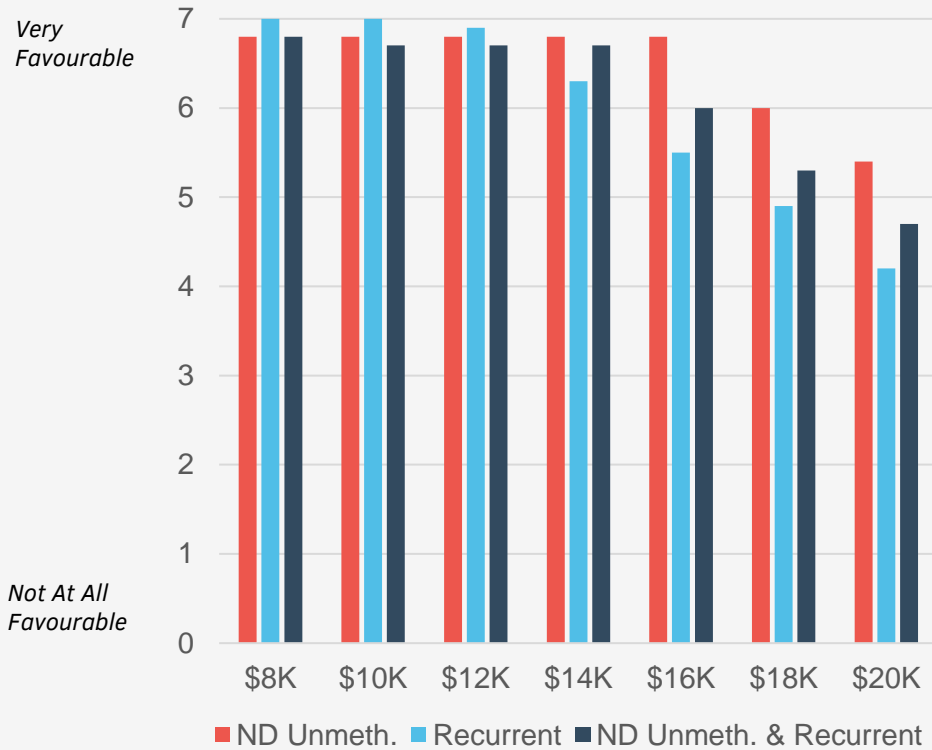


# Payer interviews support willingness-to-pay up to US\$ 20K in US and up to ~\$10K in EU5



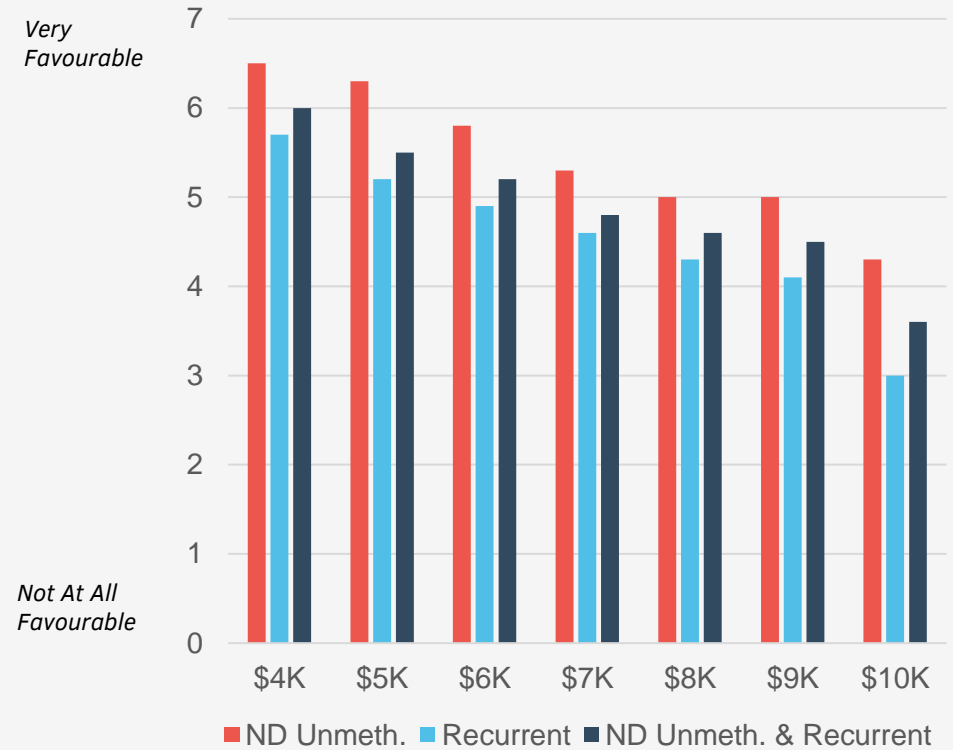
## United States

Likelihood of Coverage for Paxalisib



## European Union

Likelihood of Coverage for Paxalisib



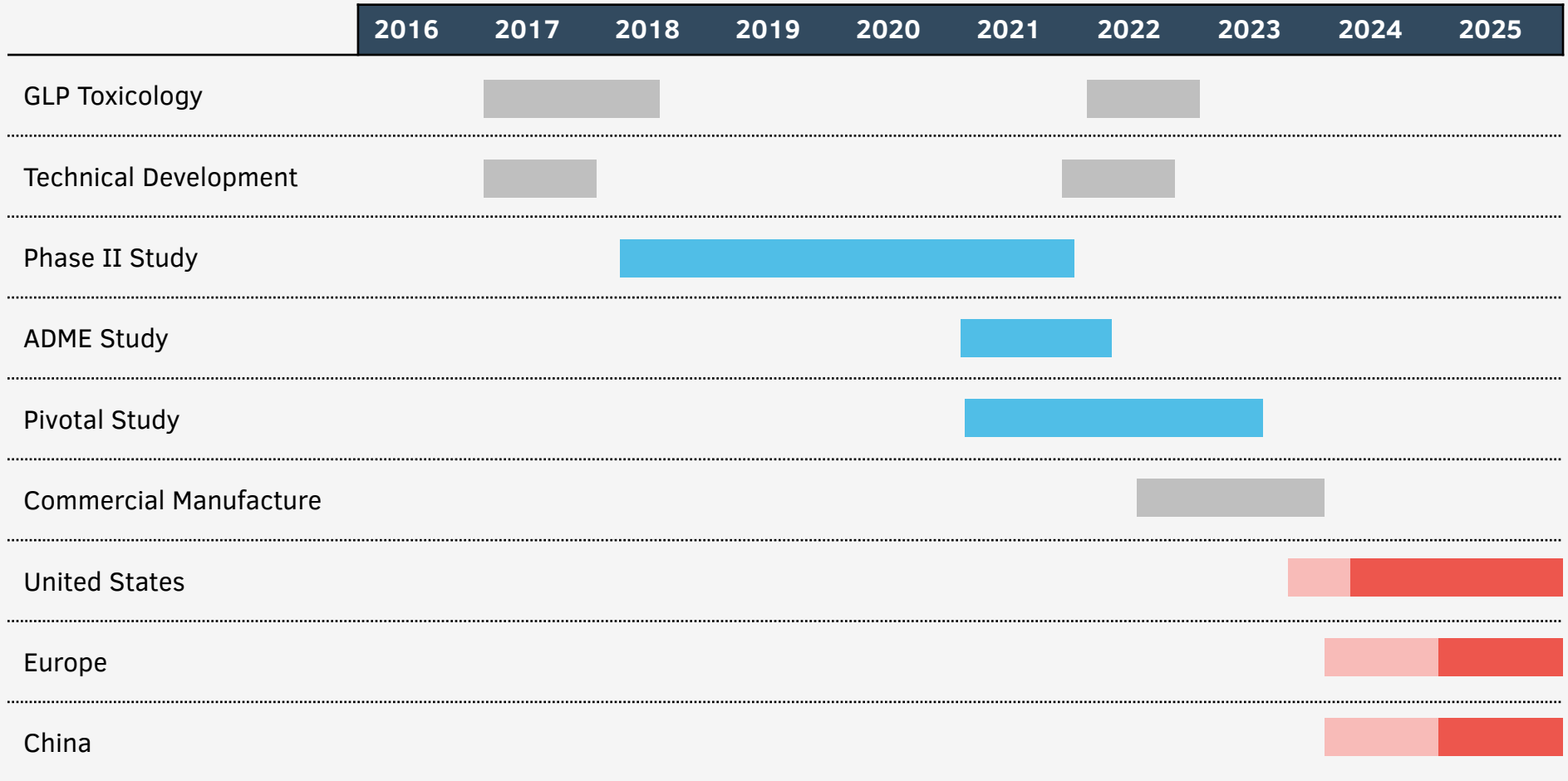
Source: Triangle Insights market research, commissioned by Kazia Therapeutics

# Paxalisib

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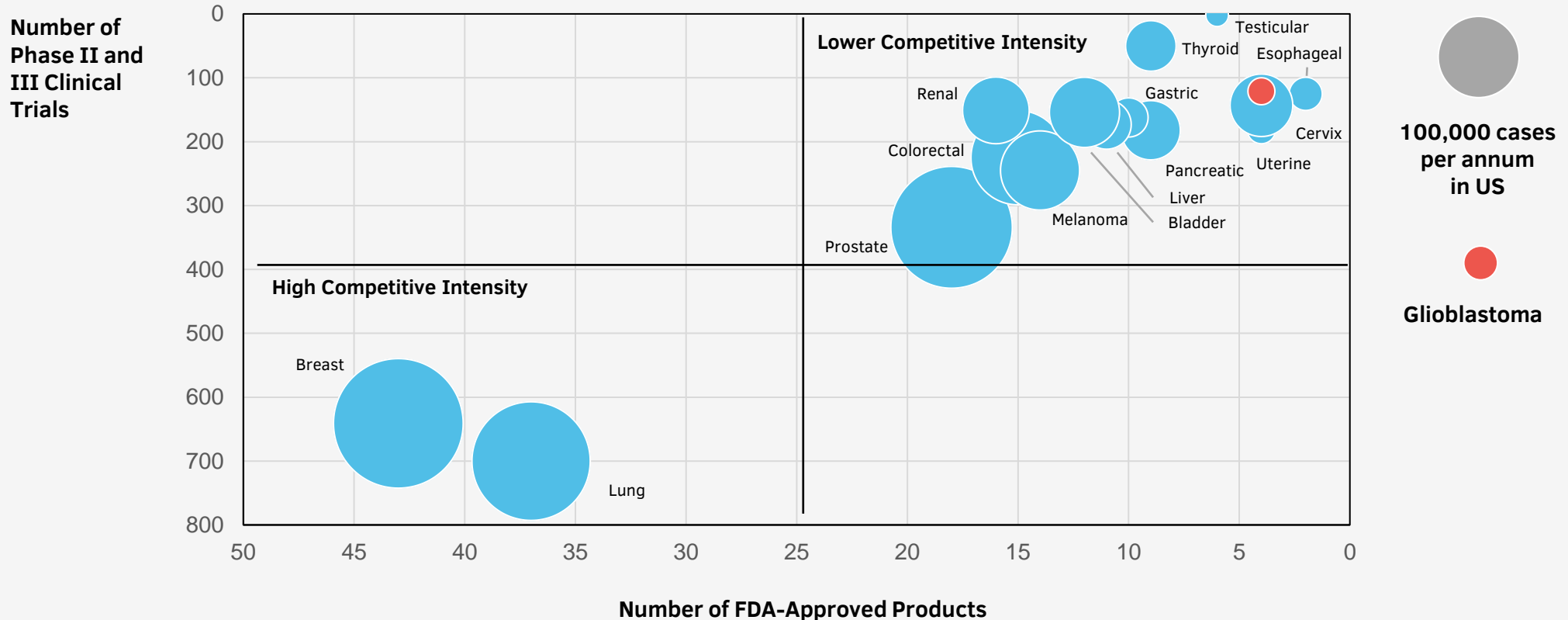
*A strong competitive position*

# Paxalisib could be ready for commercial launch in CY2024



Note: Actual timelines will depend on clinical trial performance, emergent results, and other variables that may be outside of Kazia's control












# Glioblastoma is a less competitive indication, in terms of number of approved products and number of ongoing trials



Source: National Cancer Institute, clinicaltrials.gov, SEER

Note: Number of trials denotes all ongoing industry-sponsored trials captured in clinicaltrials.gov under high level search term (e.g. 'lung cancer')

# Late-stage pipeline remains limited, with paxalisib among leading candidates for first new GBM drug since Temodar®

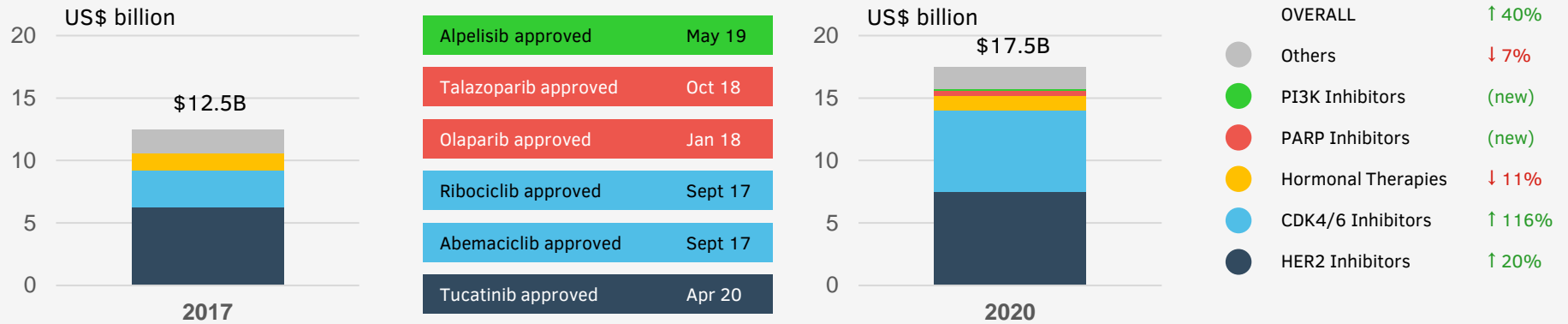
Company	Product	Mechanism	Phase	Population	Efficacy	Safety	Notes
 KAZIA THERAPEUTICS	Paxalisib	PI3K /mTOR inhibitor	III	ND unmeth. Recurrent	OS: ↑4.8 mos. (ND unmeth.)	Rash; mucositis; hyperglycemia	Participant in GBM AGILE
 BAYER	Stivarga® (regorafenib)	Multi-kinase inhibitor	III	ND unmeth. Recurrent	OS: ↑1.6 mos. (Recurrent)	Hepatic dysfunction; Hand-foot reaction	Approved for mCRC Participant in GBM AGILE
 KINTARA Therapeutics	VAL-083	DNA alkylation	III	ND Recurrent	OS: ↑3.8 mos. (ND unmeth.)	Myelosuppression	Participant in GBM AGILE
 NORTHWEST BIOTHERAPEUTICS	DCVax-L	DC cancer vaccine	III	ND unmeth.	OS: ↑ 6.4 mos. (ND)	Limited toxicities reported	Crossover study design hinders interpretation
 Bristol Myers Squibb	Marizomib	Proteasome inhibitor	III	ND	OS: no benefit (ND)	CNS / psychiatric toxicities	Believed to be no longer in development for GBM
 Diffusio <sub>2</sub> n Pharmaceuticals Inc.	Trans-sodium crocetinate	(uncertain)	III	ND	2Y survival: ↑9% (ND)	Limited toxicities reported	Company now appears primarily COVID-focused
 Denovo Biopharma	Enzastaurin	Protein kinase C inhibitor	III	ND Recurrent	OS: no benefit (Recurrent)	Headache; convulsions	Late-stage trial failures in ND and recurrent GBM
 Sumitomo Dainippon Pharma	DSP-7888	WT1 stimulant	II	Recurrent	(unavailable)	(unavailable)	
 ERC Glioblastoma Research Corporation	Gliovac®	T-cell stimulant	II	Recurrent	OS: ↑4.5 mos. (Recurrent)	Headache; injection site reactions	
 INOVIO POWERING DNA MEDICINES	INO-5401 with INO-9012	Cell / gene therapy	I/II	ND unmeth.	OS: ↑5.2 mos. (ND unmeth.)	(unavailable)	Administered with electroporation
 Ziopharm ONCOLOGY	Ad-RTS-hIL-12	IL-12 gene therapy	II	Recurrent	OS: ↑4.2 mos. (Recurrent)	Leucopenia	Intra-tumoural injection

Sources: company press releases; Kazia literature review; Triangle Insights market research, commissioned by Kazia Therapeutics

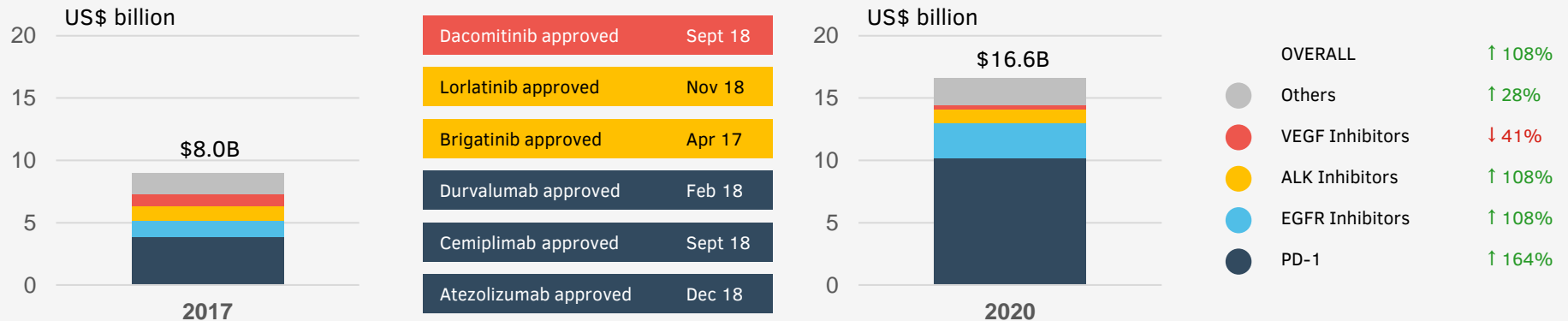
Notes: OS – overall survival; ND – newly-diagnosed

# Launch of new pharmaceutical products typically expands, rather than cannibalises, the class

## Breast Cancer



## Lung Cancer



Source: IQVIA Institute; FDA

# EVT801

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*Entering an exciting and  
rapidly-evolving new domain*

# EVT801 is now a clinical-stage asset

ASX: KZA | NASDAQ: KZIA  
Kazia Therapeutics Limited  
ABN 37 063 259 754



ASX RELEASE  
4 November 2021

## KAZIA ENROLS FIRST PATIENT TO EVT801 PHASE I CLINICAL TRIAL















Sydney, 4 November 2021 – Kazia Therapeutics Limited (NASDAQ: KZIA; ASX: KZA), an oncology-focused drug development company, is pleased to announce that it has commenced enrolment to a phase I clinical trial of EVT801, an investigational cancer therapy that Kazia licensed from Evotec SE in April 2021.

### Key Points

- EVT801 is a small molecule inhibitor of VEGFR3, and acts by inhibiting lymphangiogenesis, the formation of new lymphatic vessels around the tumour. It has shown compelling evidence of activity in a wide range of preclinical cancer models and appears broadly well-tolerated in animal toxicology studies.
- Kazia licensed EVT801 from Evotec SE, an international drug discovery alliance and development partnership company, in April 2021.
- The phase I study will focus primarily on understanding the safety, tolerability, and pharmacokinetics of EVT801 across a range of doses. It is also designed to explore preliminary signals of clinical efficacy, and to investigate the biological activity of the drug via a rich suite of sophisticated biomarker analyses.
- The lead clinical site in the study is L'Institut Universitaire du Cancer de Toulouse Oncopole (IUCT-Oncopole) in Toulouse, France. The lead investigator is Dr Carlos Gomez-Roca, a medical oncologist with a strong background in drug development and early phase clinical trials.
- The phase I study is expected to recruit a maximum of 60 patients, with the actual number dependent on the emergent safety profile of the drug. Timelines to completion will depend on the number of dose levels tested, and Kazia expects to provide further guidance on this as the study progresses.



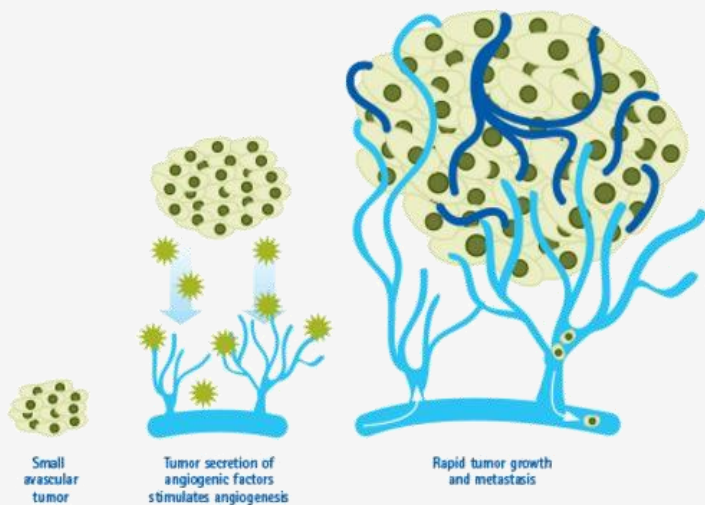
# Targeting angiogenesis is a well-established approach in the treatment of cancer

Product	Company	Target	Indications	Annual Sales (US\$)*
 <p><b>AVASTIN<sup>®</sup></b> bevacizumab 100 MG/4 ML INJECTION FOR IV USE</p>	 <p><b>Genentech</b> A Member of the Roche Group</p>	VEGF-A	<ul style="list-style-type: none"> <li>• Colorectal cancer</li> <li>• Lung cancer</li> <li>• Breast cancer</li> </ul>	<b>\$7 billion</b>
 <p><b>Nexavar<sup>®</sup></b> (sorafenib) tablets</p>	 <p><b>BAYER</b></p>	VEGFR PDGFR RAF kinases	<ul style="list-style-type: none"> <li>• Hepatocellular carcinoma</li> <li>• Renal cell carcinoma</li> <li>• Thyroid cancer</li> </ul>	<b>\$1 billion</b>
 <p><b>SUTENT<sup>®</sup></b> (sunitinib malate) capsules</p>	 <p><b>Pfizer</b></p>	VEGFR PDGFR	<ul style="list-style-type: none"> <li>• Renal cell carcinoma</li> <li>• Gastro-intestinal stromal tumor</li> </ul>	<b>\$750 million</b>
 <p><b>Votrient<sup>®</sup></b> pazopanib tablets (200 mg)</p>	 <p><b>NOVARTIS</b></p>	VEGFR PDGFR c-Kit	<ul style="list-style-type: none"> <li>• Renal cell carcinoma</li> <li>• Soft tissue sarcoma</li> </ul>	<b>\$1 billion</b>
 <p><b>Inlyta<sup>®</sup></b> axitinib 1mg and 5mg tablets</p>	 <p><b>Pfizer</b></p>	VEGFR c-Kit PDGFR	<ul style="list-style-type: none"> <li>• Renal cell carcinoma</li> </ul>	<b>\$400 million</b>
 <p><b>LENVIMA<sup>®</sup></b> (lenvatinib) capsules (10 mg and 4 mg)</p>	 <p><b>Eisai</b></p>	VEGFR	<ul style="list-style-type: none"> <li>• Renal cell carcinoma</li> <li>• Hepatocellular carcinoma</li> <li>• Endometrial carcinoma</li> </ul>	<b>\$300 million</b>
 <p><b>CABOMETYX<sup>®</sup></b> (cabozantinib) tablets</p>	 <p><b>EXELIXIS<sup>®</sup></b></p>	c-Met VEGFR2 RET	<ul style="list-style-type: none"> <li>• Renal cell carcinoma</li> <li>• Hepatocellular carcinoma</li> </ul>	<b>\$750 million</b>

\*approximate, based on company filings and market data

# Despite their proven efficacy, angiogenesis inhibitors are limited by several key challenges

Angiogenesis inhibitors work by reducing the formation of **new blood vessels** around the tumor, starving it of vital nutrients needed for tumor growth, and limiting its ability to spread (metastasise) elsewhere in the body



1

## Tumor Hypoxia

Sustained tumor hypoxia activates adaptive mechanisms, leading to secondary resistance and tumor progression



**Limited Duration of Effect**

2

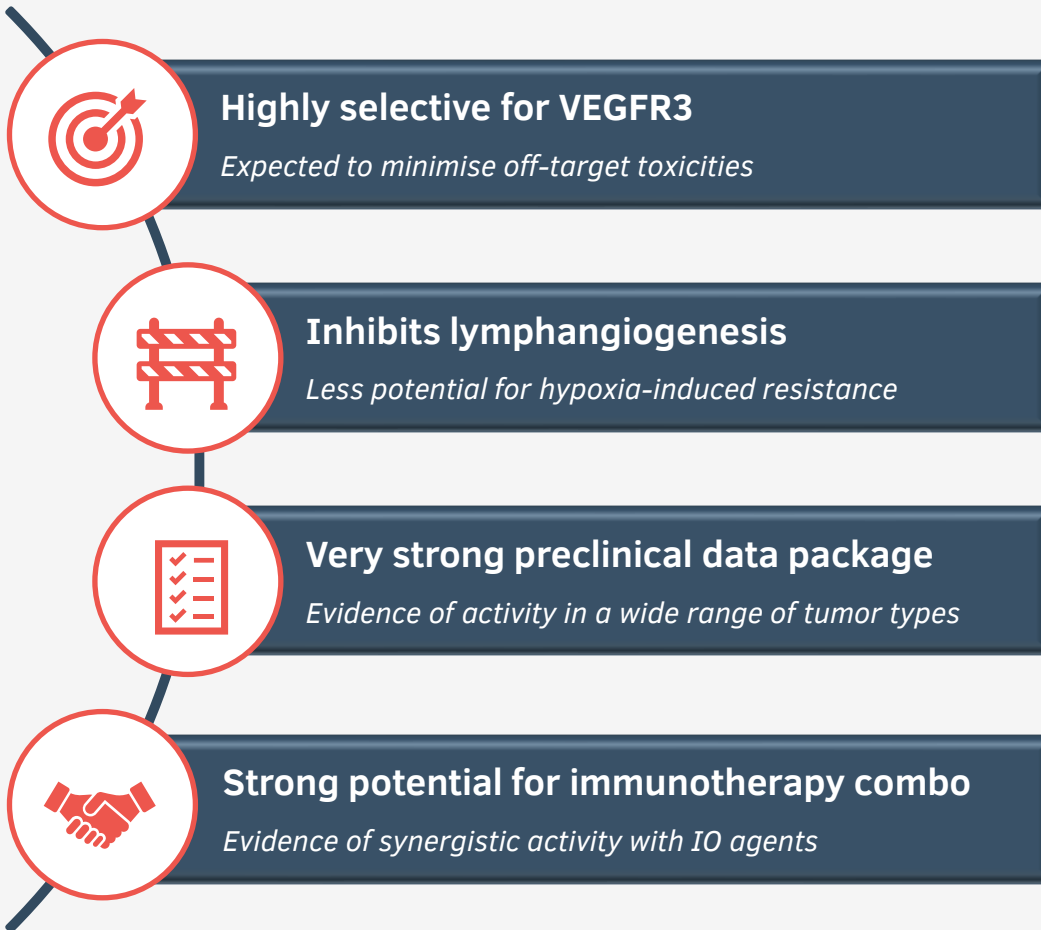
## Off-Target Activity

Most small molecule angiogenesis inhibitors have a broad range of pharmacological activities, leading to substantial toxicity (e.g. hand-foot syndrome)



**Significant Side Effects**

# EVT801 is a selective VEGFR inhibitor, primarily inhibiting lymphangiogenesis (formation of new lymphatic vessels)



## Oral Presentation

Administered by mouth once or twice daily

## Strong IP Protection

Composition-of-matter to 2032 / 2033 in most jurisdictions

## Low Cost of Goods


Straightforward manufacture with excellent stability at controlled ambient

## Favourable Preclinical Toxicology

Limited evidence of toxicity in one-month GLP animal studies

# Focus in the 'angiokinase inhibitor' class has shifted from anti-angiogenic use to immuno-oncology use

Select VEGFR Inhibitors – FDA Approvals – 2012-2021

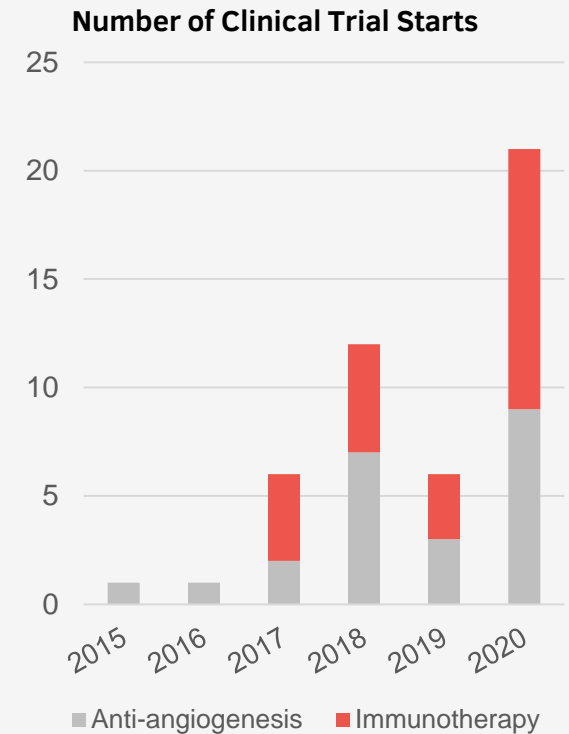
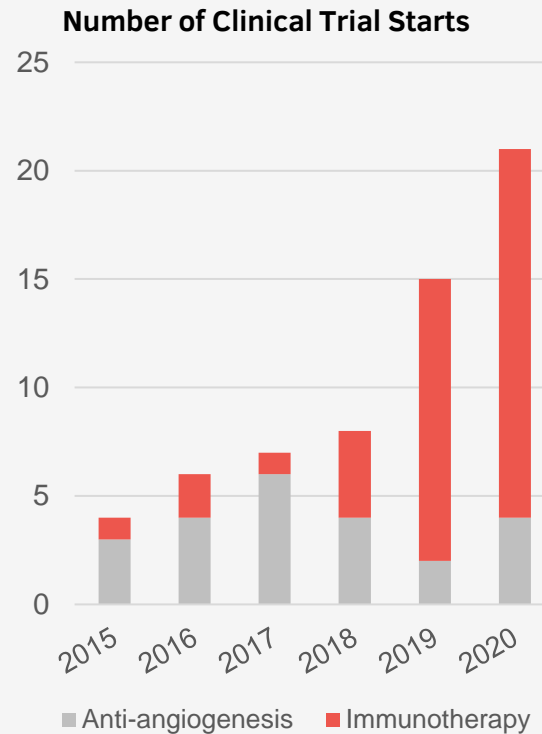
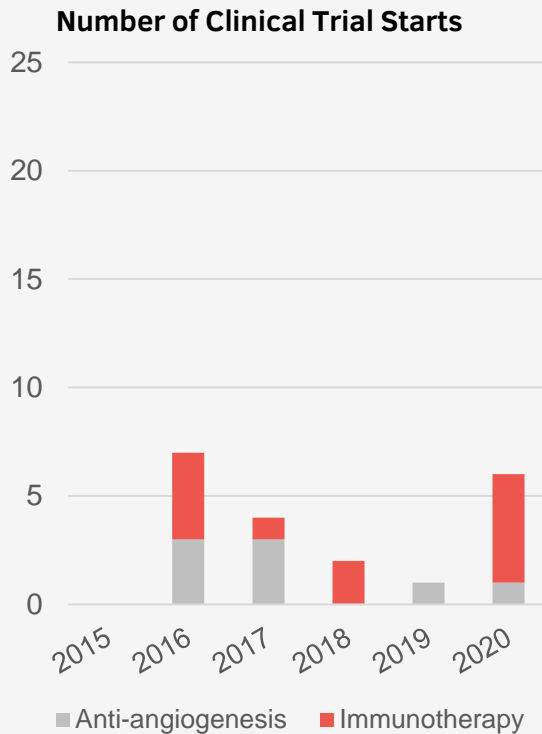
2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Renal Cancer (MonoTx) 							Renal Cancer with <b>KEYTRUDA</b> (pembrolizumab) injection 100 mg		
			Thyroid Cancer (MonoTx)	Renal Cancer (MonoTx)		Liver Cancer (MonoTx)	Endometrial Ca. with <b>KEYTRUDA</b> (pembrolizumab) injection 100 mg		Renal Cancer with <b>KEYTRUDA</b> (pembrolizumab) injection 100 mg
				Renal Cancer (MonoTx)			Liver Cancer (MonoTx)		Renal Cancer with <b>OPDIVO</b> (nivolumab)



*Use of VEGFR inhibitors to target angiogenesis as monotherapy agents*

*Use of VEGFR inhibitors to enhance and augment immuno-oncology therapies*

# Recent FDA approvals are mirrored by a striking increase in immunotherapy combination trial activity



Source: clinicaltrials.gov

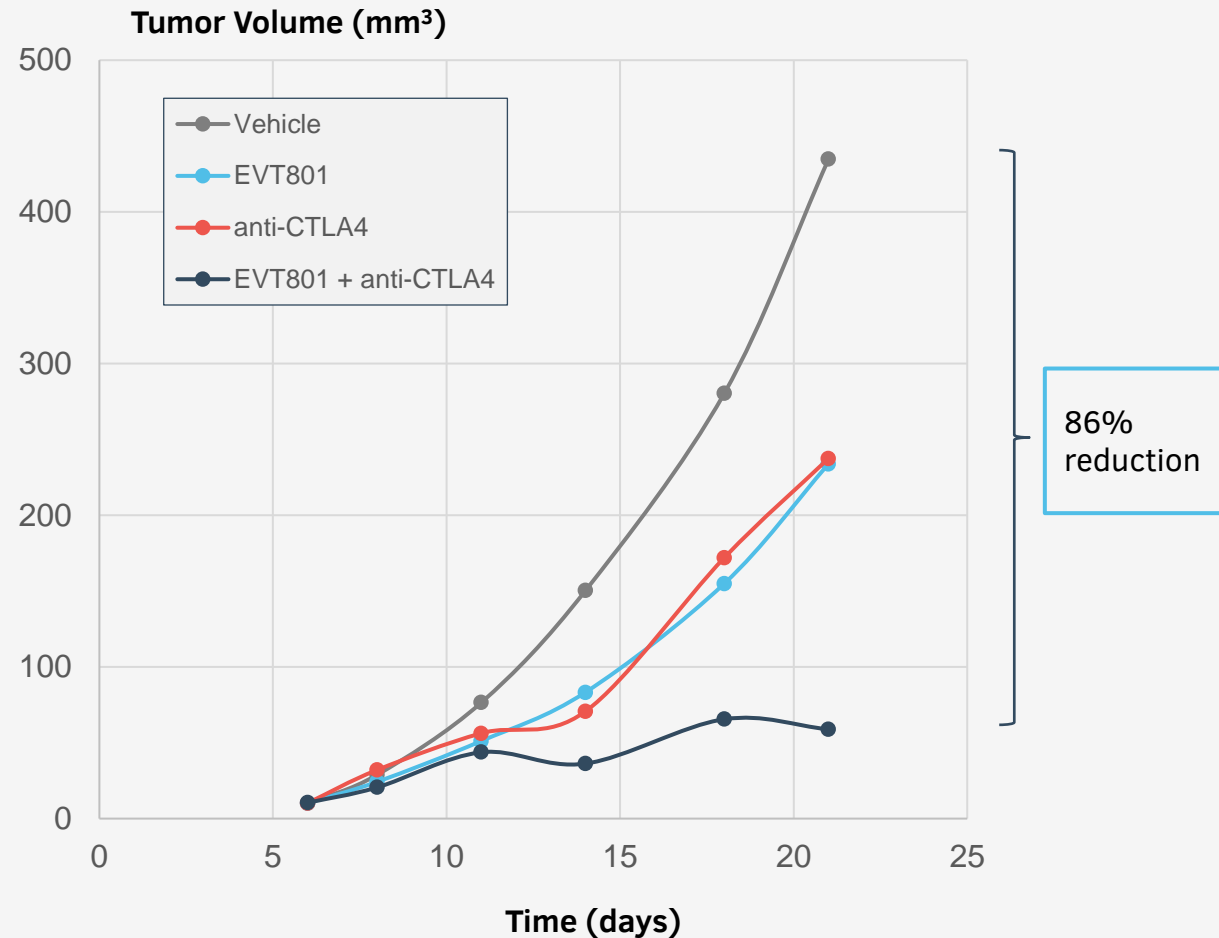
# EVT801 exhibits at least as potent synergy with checkpoint inhibitors as other agents

## Experimental Methods

- Orthotopic mouse model
- 4T1 tumor cells inoculated in BALB/c mice (mammary fat pad)
- Treatment with EVT801 on D7-D21 and with anti-CTLA4 on D7, D14, D21

## Conclusions

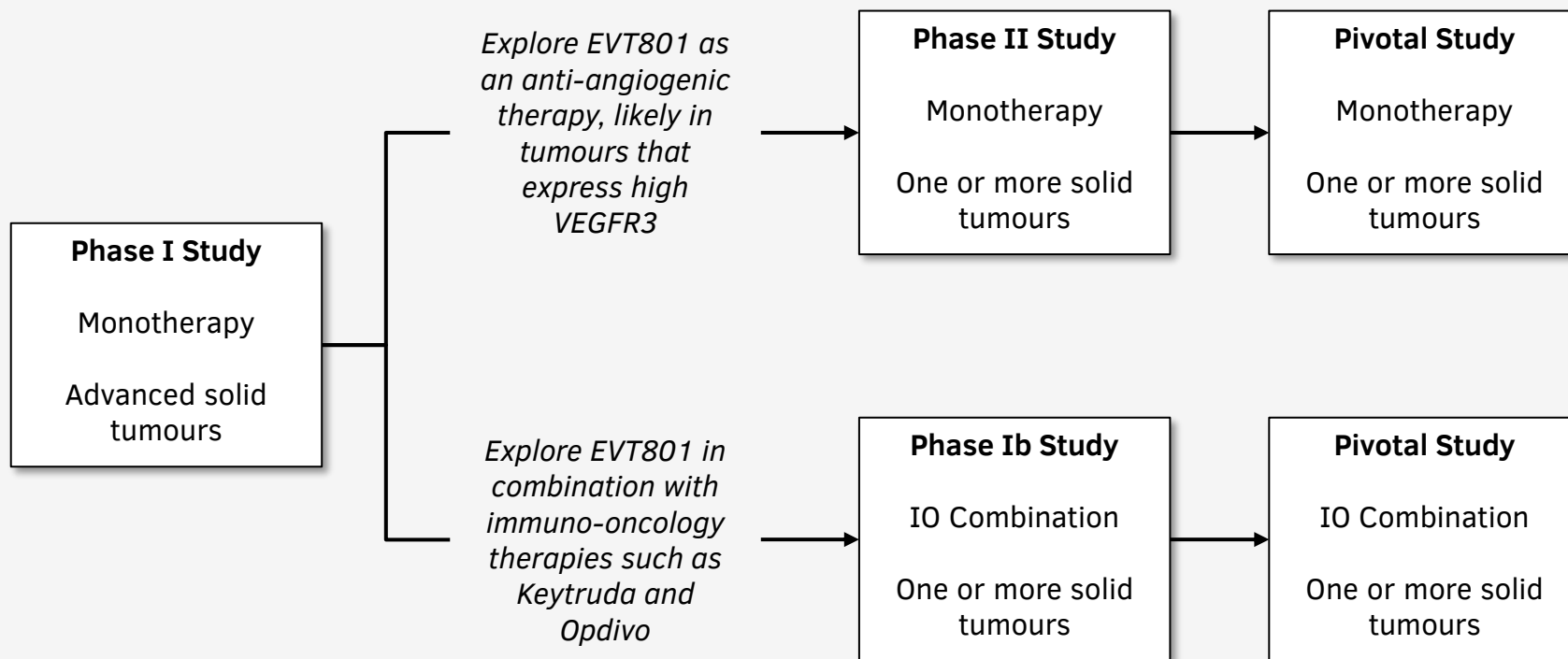
- EVT801 monotherapy has approximately equivalent activity to anti-CTLA4 antibody
- Combination of EVT801 and anti-CTLA4 antibody is highly synergistic



Data on file

Note: CTLA4 is the target of Yervoy® (ipilimumab), an approved immuno-oncology therapy

# Kazia's strategy for EVT801 aims to explore both areas of opportunity for the drug





**KAZIA**  
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