

ASX Announcement

Investor presentation for Australian Microcap Conference

18 October 2022 – Race Oncology Limited ("Race") is pleased to release a copy of the presentation that will be delivered to investors today at the 11th Annual Australian Microcap Investment Conference, and through investor briefings this week.

The Australian Microcap Conference is the largest in Australia focused on the microcap sector and enables the investment community to hear first-hand from a range of leading microcap CEOs about their business strategy and growth prospects.

Presentation details

Date/time: Tuesday, 18 October, from 11:15am

Location: Sofitel on Collins, Melbourne

Presenting: Phil Lynch, CEO and Managing Director

A copy of the Race presentation is attached.

-ENDS-

About Race Oncology (ASX: RAC)

Race Oncology is an ASX listed precision oncology company with a Phase 2/3 cancer drug called Zantrene[®].

Zantrene is a potent inhibitor of the Fatso/Fat mass and obesity associated (FTO) protein. Overexpression of FTO has been shown to be the genetic driver of a diverse range of cancers. Race is exploring the use of Zantrene as a new therapy for melanoma and clear cell renal cell carcinoma, which are both frequent FTO over-expressing cancers.

In breakthrough preclinical research, Race has also discovered that Zantrene protects from anthracycline-induced heart damage, while in tandem acting with anthracyclines and proteasome inhibitors to improve their ability to target cancer.

The Company also has compelling clinical data for Zantrene as a chemotherapeutic agent and is in two clinical trials in Acute Myeloid Leukaemia (AML).

Race is pursuing outsized commercial returns for shareholders via its 'Three Pillar' strategy.

Learn more at https://www.raceoncology.com



Race encourages all investors to go paperless by registering their details with the Company's share registry, Automic Registry Services, at www.automicgroup.com.au

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DISCLAIMER



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RACE ONCOLOGY LIMITED (ASX:RAC) INVESTOR PRESENTATION

2020-2022 A PIVOTAL PERIOD FOR ZANTRENE



June 2020

Impressive 40% response in Phase II AML trial

March 2021

Multiple pre-clinical FTO-directed programs initiated

September 2021

Preclinical results show Zantrene to be highly effective at killing a diverse range of high FTO producing melanoma cell subtypes

December 2021

Zantrene found to protect heart muscle cells from a new class of anti-cancer drug (carfilzomib) induced cell death while improving the carfilzomib-mediated killing of cancer cells

April 2022

Human ethics approval received for Race's Phase 2 extramedullary AML and EMD trial

June 2022

Melanoma preclinical research shows Zantrene in combination with BRAF and MEK kinase inhibitors improves killing of human melanoma cells

September 2022

Race develops improved IV formulation of Zantrene & extends IP life

June 2020
Zantrene highlighted as potent
inhibitor of FTO in
Cancer Cell – COH /
Prof Chen

August 2021

First patient dosed in Phase 2 AML trial – Israel

November 2021

Zantrene shown preclinically to protect heart muscle cells from anthracycline (doxorubicin) induced cell death while improving the killing of breast cancer cells

December 2021

SPP closes heavily oversubscribed, Race raises \$29.7m

June 2022

Commence Phase 2 Extramedullary AML Trial in Australia

September 2022

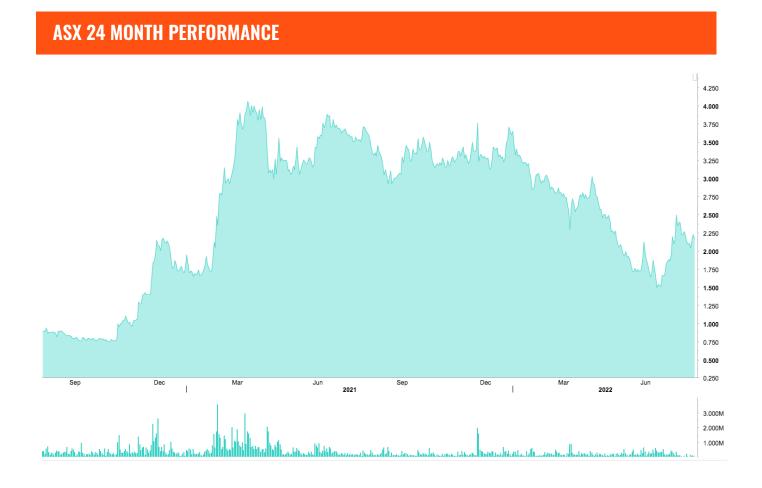
Race initiates new m⁶A RNA targeted drug discovery program

RACE ONCOLOGY LIMITED (ASX:RAC) INVESTOR PRESENTATION

CORPORATE SNAPSHOT



ISSUED CAPITAL	
Shares ¹	158.9m
Options ¹	13.4m
Shareholders ²	9,302
MARKET CAPITALISATION	
Share price ¹	\$2.20
Market value ¹	\$349.6m
Cash ²	\$33.5m
Enterprise value	\$316.1m
SIGNIFICANT SHAREHOLDERS	
Dr Daniel Tillett (Director & CSO)	8.6%
Dr John Cullity (Chairman)	5.1%
Merchant Opportunities Fund	4.8%



^{1.} As at 13 October 2022 2. As at 30 June 2022

WHY INVEST IN RACE ONCOLOGY NOW?





2

3



Race is the **first company** in the clinic targeting the m⁶A RNA (FTO) opportunity.

Independent opportunity for Zantrene preventing heart damage caused by chemotherapy

Extensive clinical history that derisks clinical development

Robust and growing IP from improved formulation and use

FTO is over- produced in ~15% of all cancers. Total cancer drug market
US\$272b by 2030¹

>A significant and uncrowded market

Zantrene is known to be safe and effective in cancer **Growing** patent portfolio.

^{1.} https://www.globenewswire.com/en/news-release/2021/12/17/2354510/0/en/Cancer-Drugs-Market-Size-Worth-Around-US-272-Billion-by-2030.html

THREE HEROES



- 1 The drug
- 2 The team
- 3 The three pillar strategy

THE DRUG. HISTORY



Zantrene (bisantrene)

Derisked by extensive prior clinical development as an anthracycline alternative

- > 1500 patients
- > 50 clinical trials
- > Received US Orphan Drug designation

(7 years exclusivity)

> Successfully manufactured

the GMP drug

> 6 issued US patents

Bisantrene dihydio Mulvalent to 250mg of Guiton New Drug New Drug New House only

The original plan

Bring Zantrene back as an alternative chemotherapeutic for Acute Myeloid Leukaemia

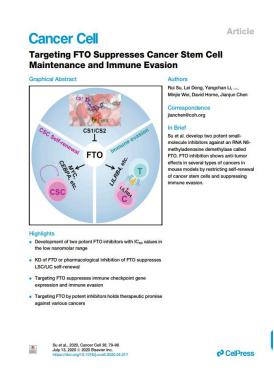
THE DRUG. TODAY



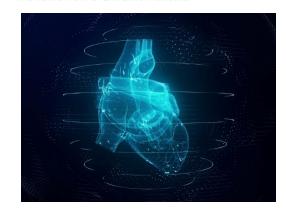
Zantrene sits across several hot areas of cancer research

Zantrene can

- 1. Inhibit FTO. Leukaemias, solid tumours, immune checkpoint therapy resistance
- 2. Provide cardioprotection together with improved anti-cancer activity



The Role of Anthracyclines – today's Cancer Patients Are tomorrow's Cardiac Patients



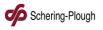
RACE ONCOLOGY LIMITED (ASX:RAC) 8 INVESTOR PRESENTATION

THE TEAM: SEASONED BOARD AND EXECUTIVE





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HaemaLogiX_____

Dr John Cullity, Non-Executive Chairman



Mr Phil Lynch,

Johnson-Johnson





NUCLEICS





TXONE





Dr Daniel Tillett. CSO and Executive Director

Mary Harney Non-Executive Director

MANAGEMENT

BOARD











CEO and Managing Director

















Mr Phil Lynch, CEO and Managing Director

Dr Daniel Tillett, PhD CSO and Executive Director

Dr David Fuller Chief Medical Officer

Dr Marinella Messina, PhD Clinical Program Director

Professor Michael Kelso, PhD Principal Scientist

BUILDING SHAREHOLDER VALUE. THREE PILLAR STRATEGY



Three derisked pillars with new formulations & new IP.

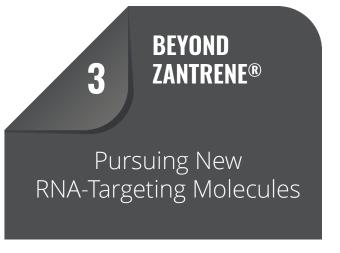
Develop each program to proof of concept for pharma partnership/transaction



- Extramedullary AML provides pathway to initial regulatory approval
- Proof-of-principle FTO program
- US IND in 2022
- Cardio-protection program



- Improved IV formulation(s) for FTO-targeting solid tumours
- Potential oral formulation
- New IP
- Large addressable market



• Internal development, partnership and/or acquisitions

EXPANDED PIPELINE TARGETING m⁶A RNA METHYLATION (FTO) & CARDIO-PROTECTION



	PRECL	PRECLINICAL		CLINICAL		
DISCOVERY	IN VITRO	IN VIVO	PHASE I	PHASE II	REGISTRATION	



EMD AML (stratum 1)	High Dose Zantrene + cytarabine	US IND 2022
EMD AML/MDS (stratum 2)	Low Dose Zantrene + decitabine	
Cardio-protection (breast cancer)	Zantrene + doxorubicin	

Zantrene + fludarabine + clofarabine, Chaim Sheba Israel



Melanoma	Zantrene + BRAF/MEK Inhibitors
Clear cell renal cell carcinoma	Zantrene + Kinase Inhibitor

Zantrene

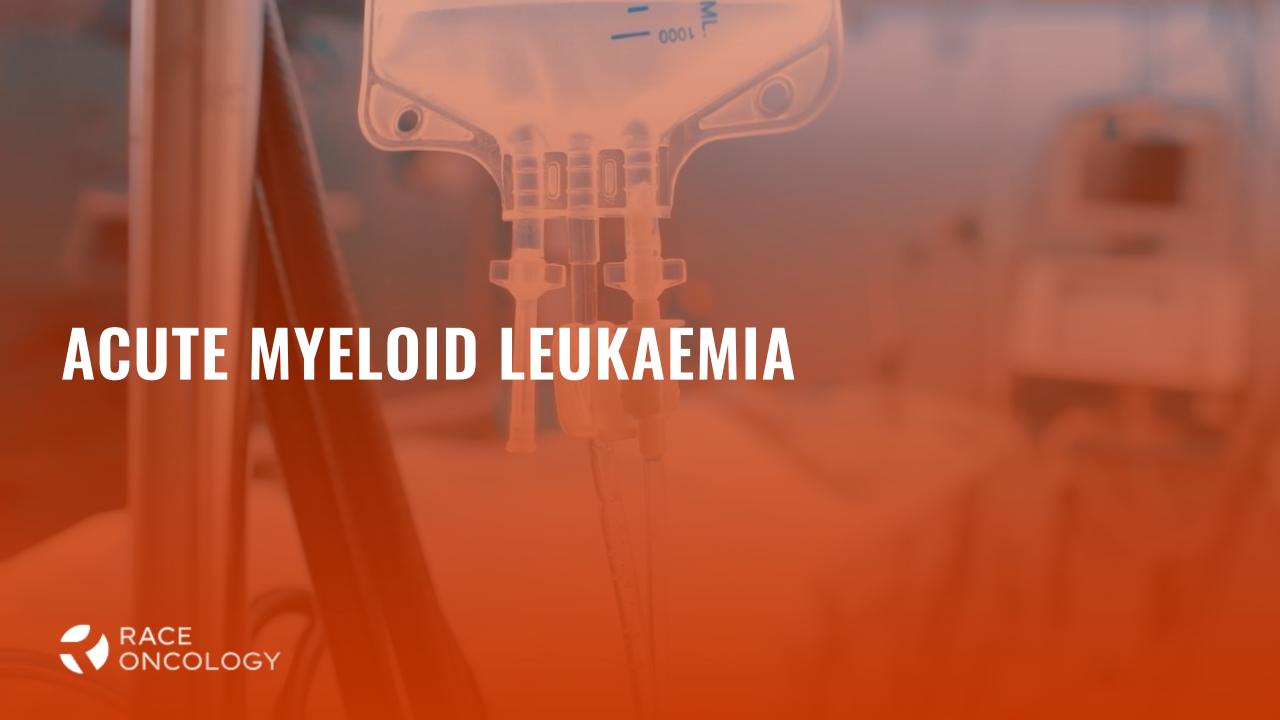
New formulation IV	Multiple programs
Companion diagnostic	Genomic + Protein

Oral formulation	Multiple programs
Lung cancer	Zantrene + anti-PD1

New m⁶A regulating molecules

r/r AML (combination)

Solid tumours





CLINICAL PHASE 1B/2 - R/R AML STATUS





2020 Phase 2 trial demonstrated an impressive 40% overall response rate for Zantrene as a single agent in R/R AML¹



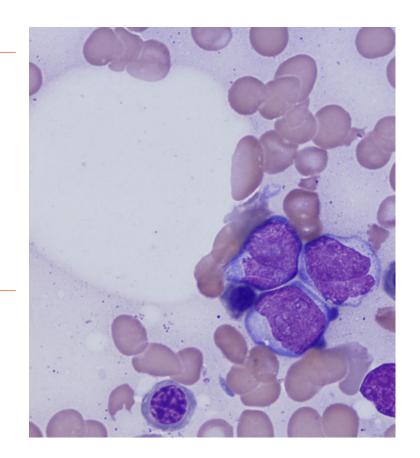
CURRENT R/R AML PHASE 1B/2 TRIAL

- Phase 1b/2 combination study in up to 29 R/R AML patients (NCT04989335)
- Regimen. Zantrene + fludarabine + clofarabine
- Pl. Prof Arnon Nagler, Chaim Sheba, Israel
- First patient treated Aug. 2021, Phase 1b completed in May.
 2022



PHASE 1B TRIAL HIGHLIGHTS

- Encouraging clinical responses in heavily pre-treated patients: 3/6 patients successfully bridged to stem cell transplant
- Now advancing to Phase 2 efficacy stage
- Open label study results to be reported in stages



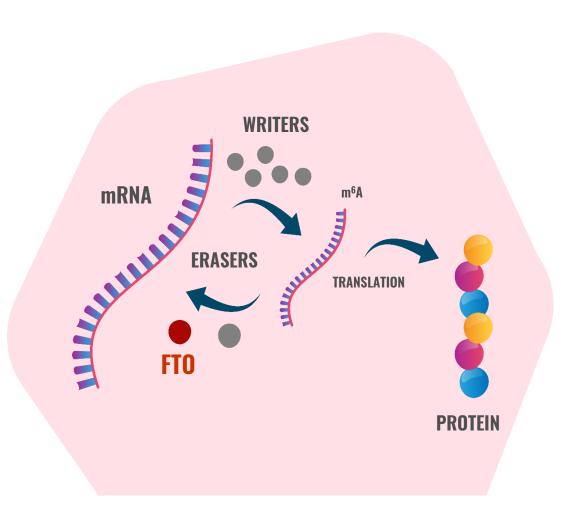
^{1.} Canaani J et al. A phase II study of bisantrene in patients with relapsed/refractory acute myeloid leukemia Eur J Haematol. 2020;00:1–7.



FTO. CENTRAL ROLE IN CANCER



- Scientific discoveries over the last decade have identified dysregulation (loss of control) of m⁶A RNA methylation as a key driver of cancer development and other disease¹
- Changes in m⁶A RNA methylation control the expression of key genes in cancer development and growth²
- Fatso/ Fat mass- and obesity-associated Protein (FTO) is one of only two m⁶A RNA demethylase found in humans¹
- Increases in the expression of FTO drive cancer development, treatment resistance and metastasis
- Reduction of FTO activity kills or slows the growth of a wide range of cancers including leukaemia, breast, lung, ovarian, gastric, brain, melanoma, pancreatic, etc – difficult to find a cancer where FTO is not an important cancer driver
- Zantrene® has been independently confirmed as the first-in-class, best-in-class FTO inhibitor³



^{1.} Deng, X., Su, R., Stanford, S., & Chen, J. (2018). Critical Enzymatic Functions of FTO in Obesity and Cancer. Frontiers in Endocrinology, 9, 724–7

^{2.} Huang, H., Weng, H., & Chen, J. (2020). m6A Modification in Coding and Non-coding RNAs: Roles and Therapeutic Implications in Cancer. Cancer Cell, 37(3), 270–28 3. Su, R. et al. Targeting FTO Suppresses Cancer Stem Cell Maintenance and Immune Evasion. (2020) Cancer Cell 38, 79-96.e11.



EMD AML. FTO CLINICAL PROOF-OF-CONCEPT





WHY EXTRAMEDULLARY (EMD) AML?

- High unmet medical need with no stand-of-care therapy
 - EMD prevalence > 20% AML patients¹ with poor prognosis
- Initial registrational path with likely FDA 505(b)(2) approval
- Small number of patients needed for registrational trial





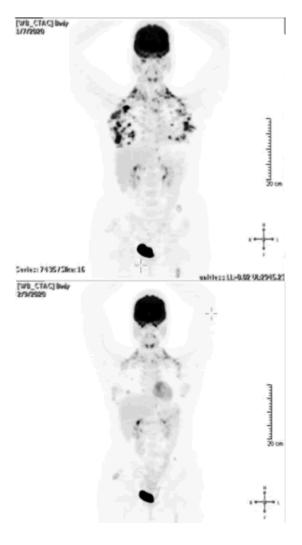
PHASE 2 TRIAL WITH TWO STRATA (ARMS)

- **Stratum 1 traditional use:** high dose Zantrene + cytarabine
- Stratum 2 FTO targeting: low dose Zantrene plus oral decitabine
 - Decitabine up-regulates FTO expression ² + synergy
 - Designed for AML & MDS patients that can not tolerate high intensity chemotherapy
- 10 sites Australia + Europe:
- US IND filing expected CY 2022



^{2.} Su, R. et al. Targeting FTO Suppresses Cancer Stem Cell Maintenance and Immune Evasion. (2020) Cancer Cell 38, 79-96.e11







MELANOMA & ZANTRENE IMPROVING IMMUNO-ONCOLOGY THERAPY





- One of the most lethal and treatment resistant cancers with 5-year survival rate for advanced melanoma around 25%¹
- FTO is overexpressed in ~50% of all metastatic melanomas and inhibition of FTO overcomes immune (checkpoint) resistance²



PRECLINICAL (MOUSE) DATA HIGHLIGHTS

- Zantrene with immuno-oncology therapy shrinks melanoma tumours that do not respond to immunotherapy alone
- Activates immune cells in a manner consistent with better targeting of tumours
- Reduces the expression of immuno-oncology therapy resistance genes in human melanoma tumour cells
- Supports future clinical trials using Zantrene with immunooncology therapy in melanoma patients



^{1.} www.cancer.net/cancer-types/melanoma/statistics

^{2.} Yang, S., Wei, J., Cui, Y.-H., Park, G., Shah, P., Deng, Y., et al. (2019). m6A mRNA demethylase FTO regulates melanoma tumorigenicity and response to anti-PD-1 blockade. Nature Communications, 10(1), 1131–14.

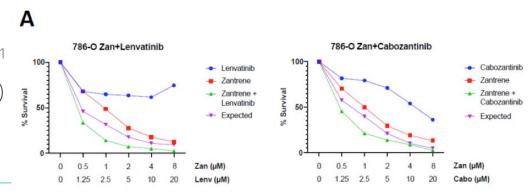


CLEAR CELL RENAL CELL CANCER





- 10th most common cancer with 12% 5-year survival rate¹
- 90% of ccRCC have mutations in von Hippel-Lindau (VHL) tumour suppressor gene²
- Inhibition of FTO was found to kill VHL(-) ccRCC cancers³





RACE ONCOLOGY PROGRAM

- Prof Nikki Verrills, University of Newcastle
- Recently reported preclinical program identified robust synergy between Zantrene and a range of anti-kidney cancer drugs (ASX: March 10, 2022)



SIGNIFICANT COMMERCIAL VALUE / OPPORTUNITY

786-O					
Zan (µM)	Lenv (µM)	Webb Result	Zan (μM)	Cabo (µM)	Webb Result
0.5	1.25	-0.125	0.5	1.25	-0.120
0.5	2.5	-0.274	0.5	2.5	-0.254
0.5	5	-0.333	0.5	5	-0.314
0.5	10	-0.348	0.5	10	-0.237
0.5	20	-0.470	0.5	20	-0.156
1	1.25	-0.067	1	1.25	-0.078
1	2.5	-0.173	1	2.5	-0.185
1	5	-0.223	1	5	-0.202
1	10	-0.235	1	10	-0.142
1	20	-0.330	1	20	-0.093
2	1.25	0.030	2	1.25	-0.042
2	2.5	-0.048	2	2.5	-0.081
2	5	-0.103	2	5	-0.072
2	10	-0.111	2	10	-0.065
2	20	-0.173	2	20	-0.046
4	1.25	0.064	4	1.25	-0.007
4	2.5	0.007	4	2.5	0.001

1. www.cancer.net/cancer-types/kidney-cancer/introduction | 2. Young, A. C., Craven, R. A., Cohen, D., Taylor, C., Booth, C., Harnden, P., et al. (2009). Analysis of VHL Gene Alterations and their Relationship to Clinical Parameters in Sporadic Conventional Renal Cell Carcinoma. Clinical Cancer Research, 15(24), 7582–7592. | 3. Xiao, Y., Thakkar, K. N., Zhao, H., Broughton, J., Li, Y., Seoane, J. A., et al. (2020). The m6A RNA demethylase FTO is a HIF-independent synthetic lethal partner with the VHL tumor suppressor. Proceedings of the National Academy of Sciences, 117(35), 21441–21449. | 4. ASX Release 10 March 2022





ANTHRACYCLINE CARDIOPROTECTION





- Heart damage from cancer therapies is a major and increasing issue as cancer patients live longer
- Anthracyclines, anti-HER2, targeted agents and immunotherapies can all cause heart damage
- New & emerging field of cardio-oncology
- Limited effective therapies



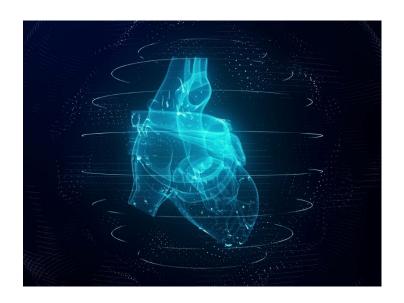
- Zantrene known to have lower cardiotoxicity
- Zantrene found to protect from anthracycline induced cardiac damage while providing anti-cancer synergy¹
- Effect independent of FTO inhibition!



MULTI-BILLION DOLLAR ADDRESSABLE MARKET

The Role of Anthracyclines – today's Cancer Patients Are tomorrow's Cardiac Patients

McGowan J et al Anthracycline Chemotherapy and Cardiotoxicity Cardiovasc Drugs Ther (2017) 31:63–75



1. ASX Release: 21 November 2021



ZANTRENE PROTECTS HEARTS FROM DOXORUBICIN CARDIOTOXICITY

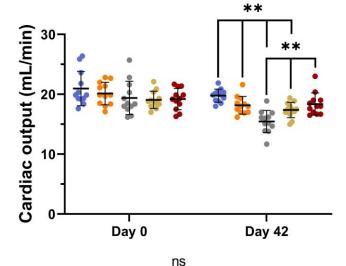




- Zantrene protects the hearts of mice from permanent damage caused by doxorubicin
- Heart protection was achieved using higher levels of chemotherapy treatment with no extra general toxicity

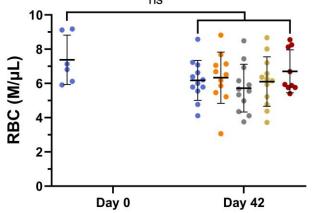


- Supports future clinical trials using Zantrene with anthracyclines
- Promise of better cancer treatment with less serious side effects





- Zantrene
- Doxorubicin
- Dox + Zan 1:1
- Dox + Zan 1:2



- Vehicle
- Zantrene
- Doxorubicin
- Dox + Zan 1:1
- Dox + Zan 1:2





IMPROVED IV FORMULATION EXTENDING AND ENHANCING ZANTRENE





Original Zantrene formulation requires a two hour central line IV infusion due to crystallisation in the blood

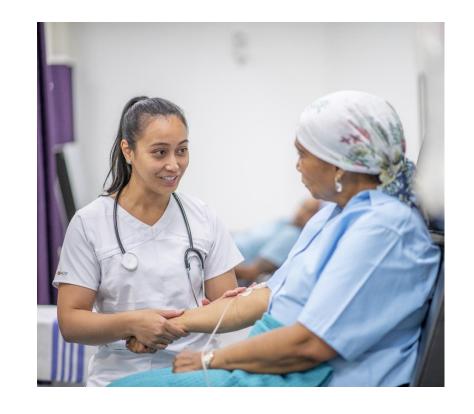
Not optimal for use in patients with solid tumours (most cancers)



Race has developed a new Zantrene peripheral IV formulation that can be given over a shorter time Allows the use of an arm or leg vein in outpatient or the home setting – much greater market potential New IP with patent life to 2043 – reset the patent clock



IMPROVES ZANTRENE UTILITY, IP PROTECTION, PATIENT CONVENIENCE AND COMMERCIAL OPPORTUNITY





NEW m⁶A RNA TARGETING MOLECULES





Recent scientific and clinical discoveries implicate m⁶A RNA methylation in many disease areas including cancer



- Initiated NMR based drug screen program in collaboration with Monash Fragment Platform
- Targeting FTO and other m⁶A RNA regulator proteins
- Addresses cancer and non-cancer indications
- Builds Race beyond Zantrene





PROVIDE NEW IP AND EXTEND APPLICATIONS AND COMMERCIAL OPPORTUNITY BEYOND ZANTRENE

RECENT / EXPECTED NEWS



CY 2022

- ✓ Zantrene IV formulation
- ✓ Collaboration with Monash University to develop new M⁶A RNA targeted drugs.
- IND submission plan CY 2022
- Additional animal data cardioprotection
- Update on cardioprotection clinical trial plan
- First patient dosed in EMD AML (FTO) trial
- Progressing European sites for EMD AML (FTO) trial

CY 2023

- Initiation of solid tumour FTO trial plan
- H1 CY 2023 initial dose expansion read out from Phase 2 AML trial (Israel)

