ASX Release

11 January 2016

PTX to present at Biotech Showcase 2016 in San Francisco

Melbourne, Australia 11 January 2016: Clinical stage oncology company, Prescient Therapeutics Ltd (PTX) advises that it will be presenting at the Annual Biotech Showcase in San Francisco, USA this week. Biotech Showcase is a respected investor and networking conference devoted to providing private and public biotechnology and life sciences companies with an opportunity to present to, and meet with, investors and pharmaceutical executives in one place during the course of one of the industry's largest annual healthcare investor conferences.

A copy of the Company's presentation is attached to this announcement.

ENDS.

About Prescient Therapeutics Limited (PTX)

PTX is a clinical stage oncology company developing novel compounds that show great promise as potential new therapies to treat a range of cancers that have become resistant to front line chemotherapy.

Lead drug candidate PTX-200 inhibits an important tumor survival pathway known as Akt, which plays a key role in the development of many cancers, including breast and ovarian cancer, as well as leukemia. This highly promising compound is now the focus of three current clinical trials. The first is a Phase Ib/II study examining PTX-200 in breast cancer patients at the prestigious Montefiore Cancer Center in New York. A Phase 1b/2 trial of the compound in combination with current standard of care is also underway in patients with recurrent or persistent platinum resistant ovarian cancer at Florida's H. Lee Moffitt Cancer Center. These trials are funded in part by grants from the U.S. National Cancer Institute. In addition, PTX has recently received IND allowance for a Phase Ib/II trial evaluating PTX-200 as a new therapy for Acute Myeloid Leukemia.

PTX's second novel drug candidate, PTX-100, is a first in class compound with the ability to block an important cancer growth enzyme known as geranylgeranyl transferase (GGT). It also blocks the Ral and Rho circuits in cancer cells which act as key oncogenic survival pathways, leading to apoptosis (death) of cancer cells. PTX-100 was well tolerated and achieved stable disease in a Phase I trial in advanced solid tumors.

Further Inquiries:

Steven Engle
Chairman
+1 858 922 7768 (US)

Paul Hopper
Executive Director
+61 406 671 515

Rudi Michelson
Monsoon Communications
+61 3 9620 3333

Blue chip US science yielding a deep clinical pipeline

- *Phase Ib/II Breast cancer*
- *Phase Ib Ovarian cancer*
- *…and soon Phase Ib AML*

Biotech Showcase, San Francisco
January 2016

Disclaimer and Safe Harbor

Certain statements made in this presentation are forward-looking statements within the meaning of the safe harbour provisions of the United States Private Securities Litigation Reform Act of 1995. These forward-looking statements are not historical facts but rather are based on Prescient's current expectations, estimates, assumptions, and projections about the industry in which Prescient operates. Material referred to in this document that use the words 'estimate', 'project', 'intend', 'expect', 'plan', 'believe', 'guidance', and similar expressions are intended to identify forward-looking statements and should be considered an at-risk statement. These forward-looking statements are not a guarantee of future performance and involve known and unknown risks and uncertainties, some of which are beyond the control of Prescient or which are difficult to predict, which could cause the actual results, performance, or achievements of Prescient to be materially different from those which may be expressed or implied by these statements. These statements are based on our management's current expectations and are subject to a number of uncertainties and risks that could change the results described in the forward-looking statements. Risks and uncertainties include, but are not limited to, general industry conditions and competition, general economic factors, the impact of pharmaceutical industry development and health care legislation in the United States and internationally, and challenges inherent in new product development. Investors should be aware that there are no assurances that results will not differ from those projected and Prescient cautions shareholders and prospective shareholders not to place undue reliance on these forward-looking statements, which reflect the view of Prescient only as of the date of this presentation. Prescient is not under a duty to update any forward-looking statement as a result of new information, future events or otherwise, except as required by law or by any appropriate regulatory authority.

Certain statements contained in this presentation, including, without limitation, statements containing the words "believes," "plans," "expects," "anticipates," and words of similar import, constitute "forward-looking statements." Such forward-looking statements involve known and unknown risks, uncertainties and other factors that may cause the actual results, performance or achievements of Prescient or Prescient. (collectively, "Prescient" or the "Company") to be materially different from any future results, performance or achievements expressed or implied by such forward-looking statements. Such factors include, among others, the following: the risk that our clinical trials will be delayed and not completed on a timely basis; the risk that the results from the clinical trials are not as favorable as we anticipate; the risk that our clinical trials will be more costly than anticipated; and the risk that applicable regulatory authorities may ask for additional data, information or studies to be completed or provided prior to their approval of our products. Given these uncertainties, undue reliance should not be placed on such forward-looking statements. The Company disclaims any obligation to update any such factors or to publicly announce the results of any revisions to any of the forward-looking statements contained herein to reflect future events or developments except as required by law.

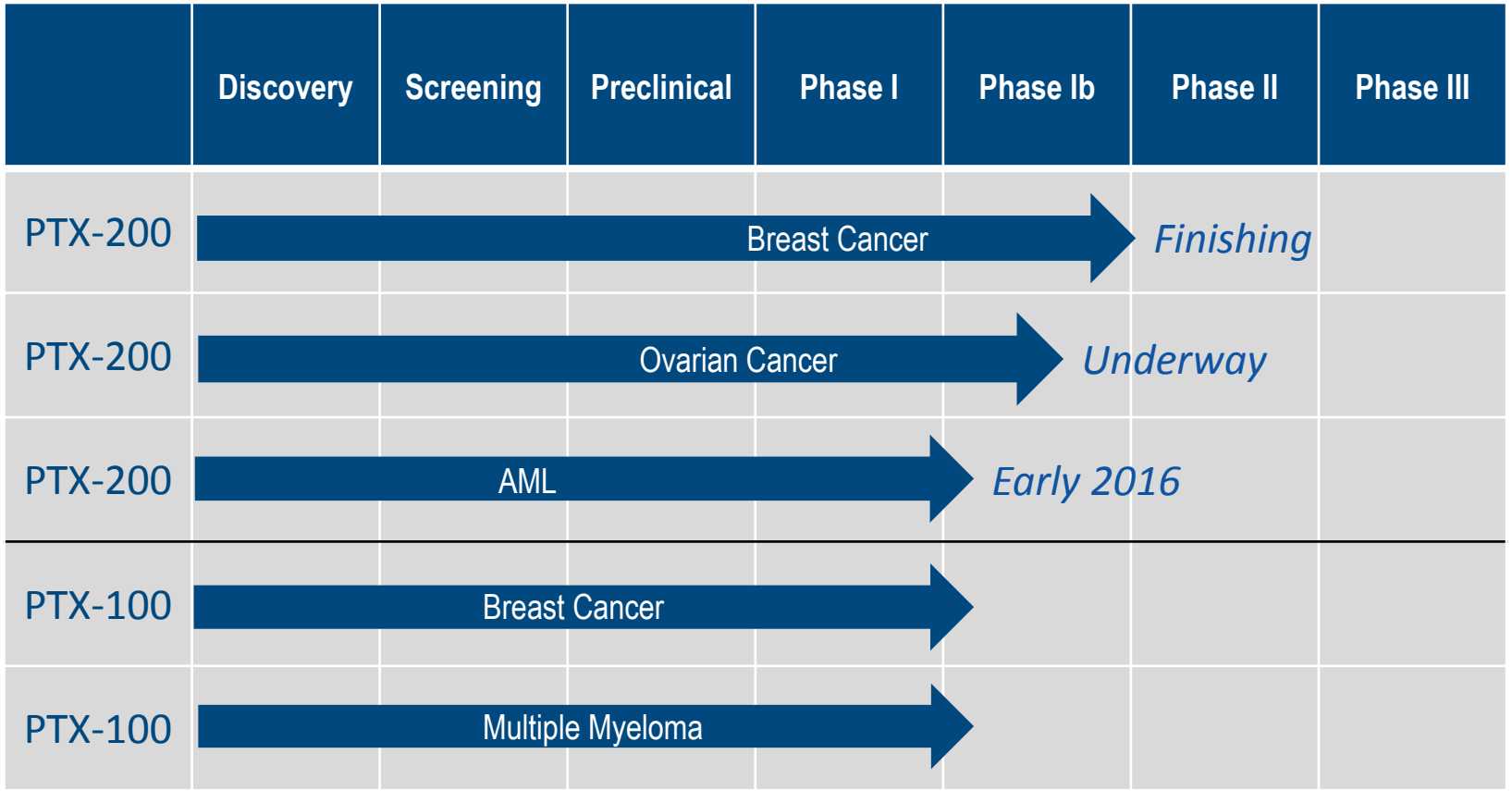
This presentation may not contain all the details and information necessary for you to make a decision or evaluation. Neither this presentation nor any of its contents may be used for any other purpose without the prior written consent of the Company.

Investment Highlights

One of Deepest Clinical Pipelines on ASX	**3 clinical trials**: 2 underway and 1 on track to initiate 1H 2016, all under IND
Two Clinical Stage Oncology Drugs	2 drug candidates targeting key cancer pathways » Akt (PTX-200) and Ras (PTX-100)
Distinguished Scientific Provenance	Compelling science from leading US institutions – Yale University & Moffitt Cancer Center
Significant investment already made	**Over $20 M invested to date** » Technologies have been awarded multiple prestigious US government grants
Proven Leadership & Management	Experienced and **proven drug development team** on board to aggressively drive product development
Rich Upcoming News Flow	**Multiple milestone announcements** and valuation inflection points across all clinical programs over next 12 to 18 months
Robust IP	**Patents granted in major jurisdictions** extending to **2030**

Deep, Clinical Stage Product Pipeline

PTX has one of the **deepest** and **most mature** product pipelines on ASX

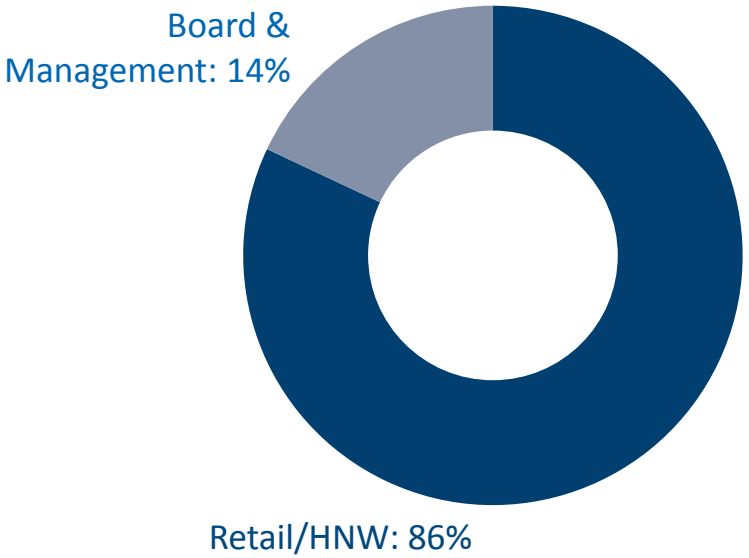


Corporate Snapshot

Key Metrics

ASX Ticker	PTX
Total Issued Capital	93.7 M shares
Options	4.3 M (ex A$0.10; exp 12 Oct 2017)
Share Price[1]	A$0.09
Market Capitalisation[1]	A$8.3 M
Cash Position[2]	A$2.4 M
Top 20 Own	33%
6 month turnover[1]	22.4 M shares

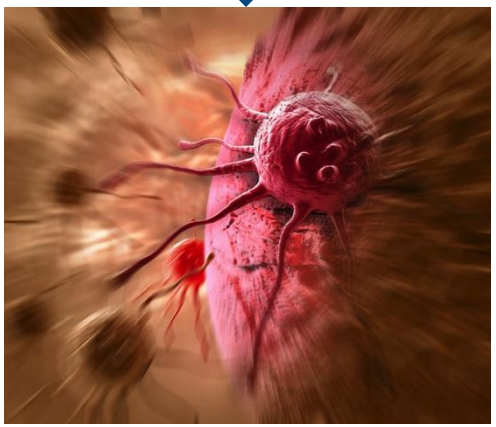
Shareholder Base



1 - As at 23/12/2015

How Our Drugs Work: “Molecular Switches”

Akt & Ras are growth factors found in cancer cells – when they are turned on, they send a signal to the cancer cell to grow



PTX’s drugs block the Akt & Ras growth signals, switching the growth signals off and **causing the cancer cell to die**

PTX-100 + chemo

PTX-200 + chemo

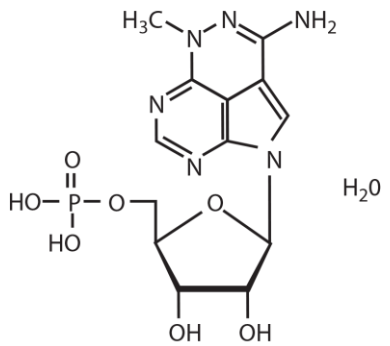
PTX-200: Novel Akt inhibition

- Hyperactive Akt signaling:
  - » Plays key role in many cancers including breast, ovarian, colorectal, prostate, pancreatic and hematologic cancers
  - » Confers resistance to chemotherapy
  - » Strong pharma interest in Akt as a drug target

PTX-200

- A small molecule inhibitor of the Akt signaling pathway
- **Anti-proliferative** AND **pro-apoptotic**
- Novel mechanism of action
  - » NOT an ATP mimic; not a direct kinase inhibitor
  - » Inhibits Akt by preventing Akt binding to the membrane
  - » Huge advantage in MoA; **avoids off target effects** of most kinase inhibitors
- PTX-200 synergistic with chemotherapy and biologics
- Overcomes chemotherapy resistance and causes cancer cells to die
- Completed Phase I trials demonstrated it is well tolerated, AML patients achieved stable disease

PTX-200 (TCN-P)



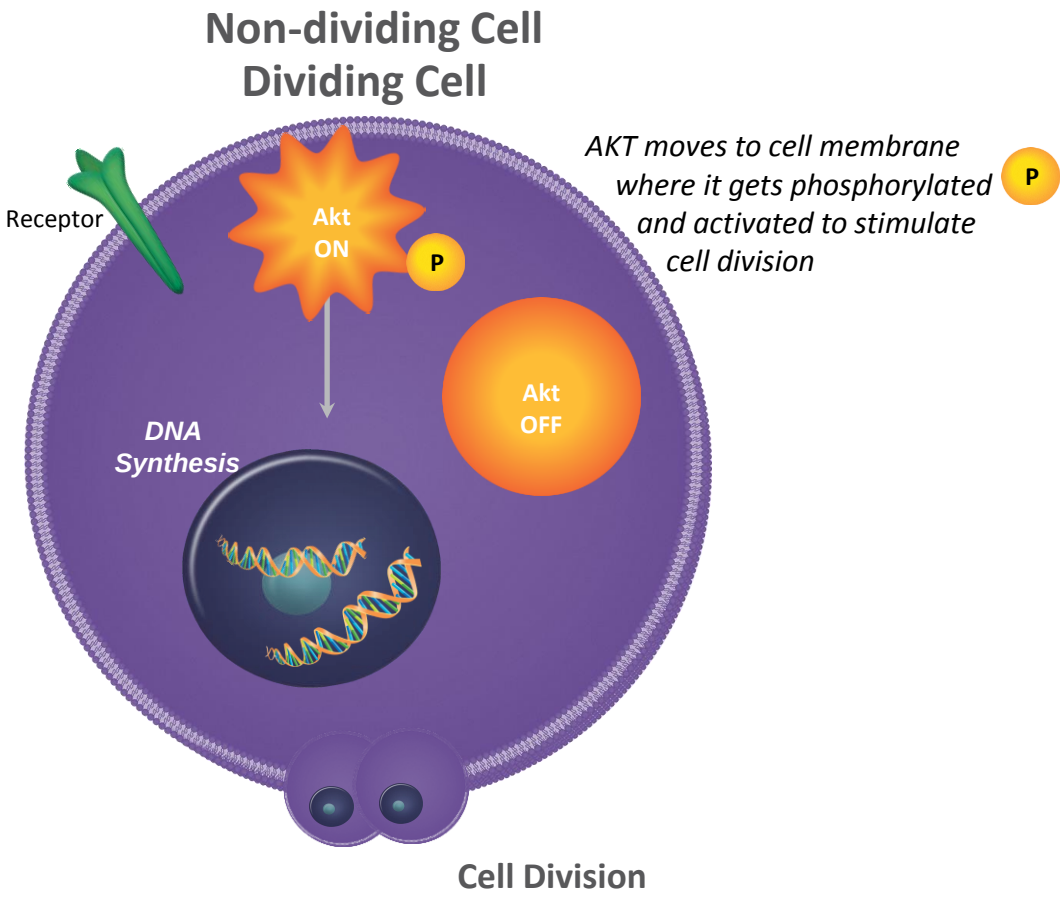
MOFFITT CANCER CENTER

PTX-200: Mechanism of Action – Normal Cell

AKT is an ON/OFF switch that controls normal cell division

Add Growth Factor

AKT is **ON** when phosphorylated and **OFF** when not



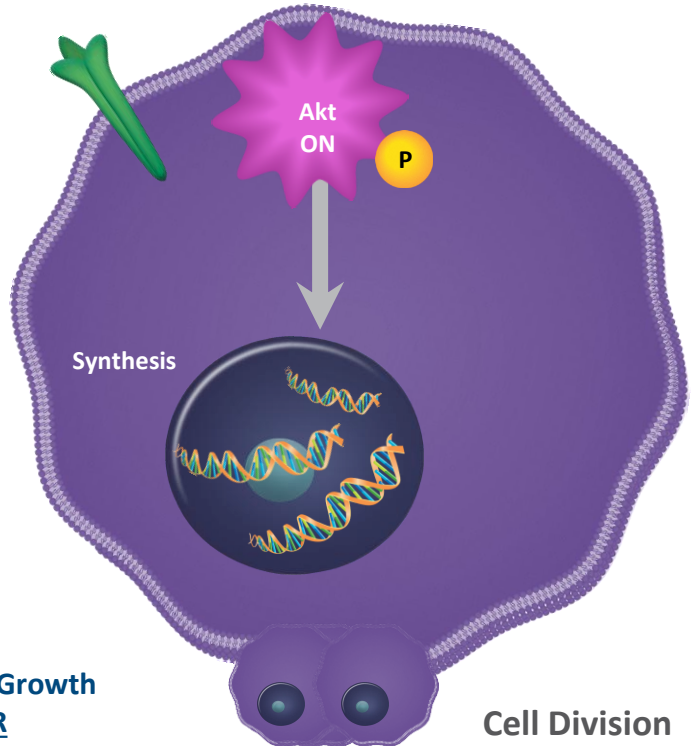
Controlled Growth

PTX-200: Mechanism of Action – Cancer Cell

Some cancer cells contain Akt that is always phosphorylated* stimulating cells to divide forever

Akt is stuck in the **ON** position

Untreated Cancer Cell



Uncontrolled Growth
TUMOR

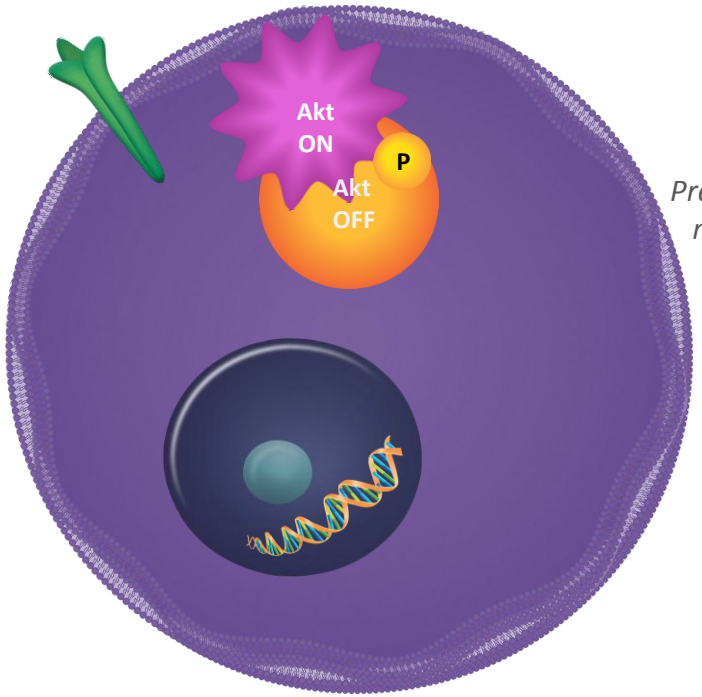
Cell Division

* (Switch in ON position)

PTX-200: Mechanism of Action – Treated Cancer Cell

Prevents AKT from anchoring to membrane and causing cancer

Treated Cancer Cells

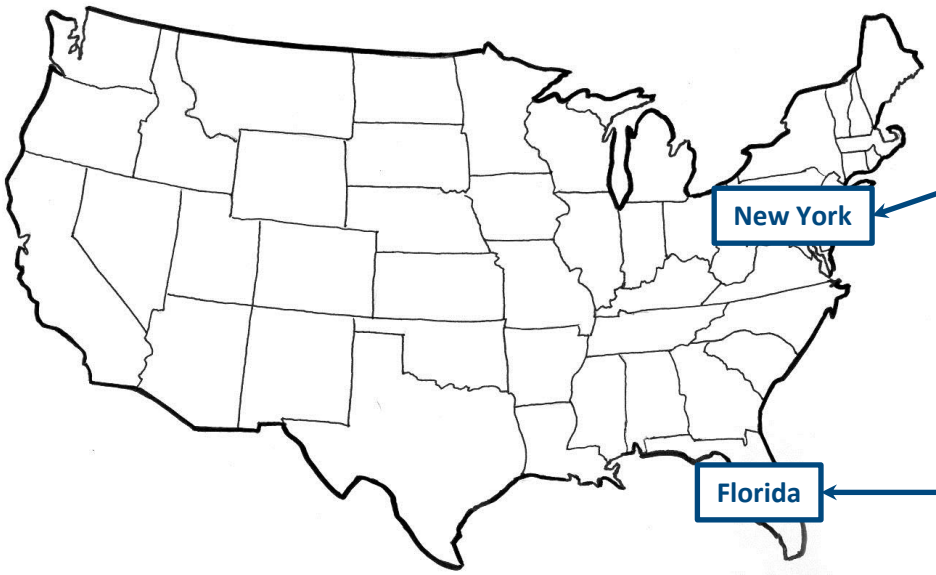


Treatment
With PTX-200

Prevents Akt from moving to membrane keeping it in the OFF position

Tumor Cells Stop Dividing

World Class Centers & Collaborations



EINSTEIN
Albert Einstein College of Medicine
OF YESHIVA UNIVERSITY

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Previous clinical trials conducted at:

THE UNIVERSITY OF TEXAS
MD Anderson Cancer Center
Making Cancer History

NATIONAL CANCER INSTITUTE

DEPARTMENT OF DEFENSE · UNITED STATES OF AMERICA

MEMORIAL SLOAN-KETTERING CANCER CENTER · ESTABLISHED 1884 ·

Memorial Sloan Kettering Cancer Center

INDIANA UNIVERSITY

Penn
University of Pennsylvania

ptx

Drugs Don't Develop Themselves!

Said Sebti, PhD

Chief Scientific Officer

- Professor and Chair, Department of Drug Discovery - Moffitt Cancer Center
- Co-Program Leader, Chemical Biology and Molecular Medicine - Moffitt Cancer Center
- Inventor of PTX-100 & PTX-200
- **Named among top 20 Translational Researchers in the world by Nature Publishing Group**

Terry Chew, M.D.

Chief Medical Officer

- Hematologist/oncologist with 20 years experience in biotech & pharma
- Formerly with Argos and Peregrine Pharmaceuticals
- **5 New Drug Applications** including DaunoXome, Taxotere and DepoCyte
- **PTX is only 1 of only 2 ASX biotechs with a CMO that has successfully approved drugs!**

Chaline Strickland, Pharm.D.

Clinical & Regulatory Affairs

- VP Clinical & Regulatory Affairs at Ground Zero Pharmaceuticals

FDA

U.S Food and Drug Administration

Clinical Advocates Driving Our Programs

Breast Cancer

Joseph Sparano, M.D.

- Prof. of Medicine & Obstetrics, Gynecology, & Women's Health - Albert Einstein College of Medicine
- Assoc. Chairman for Clinical Research - Montefiore Medical Center Dept of Oncology

Heather Han, M.D.

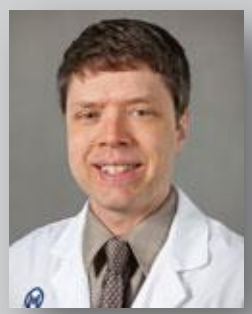
- Assistant Prof. of Medicine at University of South Florida College of Medicine
- Medical oncologist, specializing in breast cancer
- The Center for Women's Oncology - Moffitt Cancer Center

Ovarian Cancer

Robert Wenham, M.D.

- Section Head, Gynecologic Cancer Research
- Principal investigator Total Cancer Care Protocol

Acute Myeloid Leukemia



Jeff Lancet, M.D.

- Prof. of Oncologic Sciences, Moffitt Cancer Center and University South Florida
- Section Chief of Leukemia in the Department of Malignant Hematology at Moffitt

Board of Directors

- Experienced, complementary, and collaborative

 **Steve Engle** *Non-Executive Chairman*	• Former Chairman and CEO of US-listed XOMA (NASDAQ:XOMA) and La Jolla Pharmaceuticals (NASDAQ: LJPC) • Currently CEO of Averigon Consulting, an advisory firm to life science industry
 **Paul Hopper** *Executive Director*	• 25 years experience in international public company markets with a focus on life science and biotechnology • Chairman of Viralytics Ltd. and Executive Chairman of Imugene Ltd. • Former Director of Somnomed, pSivida, Fibrocell and Founder of Polynoma
 **Steven Yatomi-Clarke** *Non-Executive Director*	• Director of Corporate Finance at Patersons Securities specializing in healthcare and biotechnology • Collaborator on clinical trials conducted in Australia and the US in cancer immunotherapy
 **James Campbell, PhD** *Non-Executive Director*	• CEO of Patrys Limited (ASX:PAB) • Previously CFO and COO of Chemgenex Pharmaceuticals • Non-Executive Director of Invion (ASX:IVX), Medibio Limited (ASX:MEB)

World Class Scientific Advisory Board

- Genuine international authorities, with particularly strong expertise in leukemia

 **Farhad Ravandi, M.D.**	• Professor, Department of Leukemia, Division of Cancer Medicine, The University of Texas **MD Anderson Cancer Center**, Houston, Texas • Chief, Section of Developmental Therapeutics, Texas University MD Anderson Cancer Center, Houston, Texas
 **Jeff Lancet, M.D.**	• Professor of Oncologic Sciences, **H. Lee Moffitt Cancer Center** and University South Florida • Section Chief of Leukemia in the Department of Malignant Hematology at Moffitt
 **Joseph Sparano, M.D.**	• Professor of Medicine and Professor of Obstetrics, Gynecology and Women's Health at **the Albert Einstein College of Medicine**, New York • Associate Director for Clinical Research at the Einstein Cancer Center, New York
 **Douglas Joshua, PhD**	• Emeritus Professor of Hematology at the **Sydney University Medical School** • Consultant Hematologist, Royal Prince Alfred Hospital, Sydney • Member of the International Myeloma Foundation

Breast Cancer Market Overview

- Breast cancer market currently US$10 B; due to double by 2023
- Most breast cancer drug sales are for HER2+ cancers, but this only represents ~20% of all breast cancers
- By contrast, **PTX is targeting "HER2 negative" (HER2-) breast cancer**
- HER2- has "flown under the radar" of drug developers, due to high profile successes in HER2+ drugs…
- …but **~80% of breast cancers are still HER2-**
- Comparative lack of new drug development for HER2- patients, despite the need
- Evidenced by American Society of Clinical Oncology (ASCO) issuing a new practice guidelines in 2014
  - » Concluded that doctors should encourage HER2- patients to enroll in clinical trials for new HER2- drugs

IMS Health

Boyle, et al; Ann Oncol (2012) 23 (suppl 6): vi7-vi12.
Partridge AH, Rumble RB, Carey LA, et al. American Society of Clinical Oncology Clinical Practice Guideline. JCO 2014

Phase Ib Breast Cancer Trial Almost Completed

- PTX-200 plus Taxol in patients with metastatic and locally advanced breast cancer
  - » Phase Ib trial currently underway
  - » Recruiting at Albert Einstein College of Medicine Montefiore Medical Center
  - » Funded by National Cancer Institute grant
- **16 patients already dosed – now in expansion phase**
- **Encouraging early data** (announced 26 Aug 2015)
  - » Evidence of safety & anti-tumor activity
  - » Inhibits important tumor survival pathway (Akt)

Joseph Sparano, M.D.
Principal Investigator

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Phase II Breast Cancer Trial to Commence 1H 2016

- Dr Heather Han at Moffitt to join Phase 2 recruitment
- Phase II to commence 1H 2016
- Patients with metastatic and locally advanced breast cancer
- PTX-200 in combination with paclitaxel, followed by doxorubicin and cyclophosphamide

Joseph Sparano, M.D.
Principal Investigator

EINSTEIN
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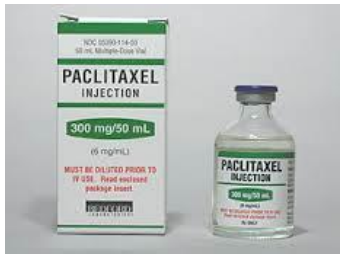
OF YESHIVA UNIVERSITY



Heather Han, M.D.

MOFFITT CANCER CENTER

ptx

Ovarian Cancer Market Overview

- One of the most common cancers in women -increasing with an ageing population
- Due to reach US$1.7 B by 2019
  - » Market size currently constrained by old generic drugs that just aren't good enough
- Standard of care is "platinum based" drugs (often generic paclitaxel & carboplatin)
  - » Initially effective, with 70% of patients entering remission, but…
  - » …almost all patients eventually relapse
  - » They have become chemoresistant
- **There remains a severe gap in the market for new drugs for relapsing patients and platinum resistant patients**
- **This is the gap that PTX is pursuing in ovarian cancer**

Phase Ib Ovarian Cancer Trial Already Underway

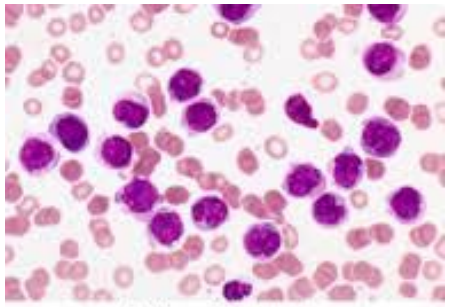
- PTX-200 plus Carboplatin in platinum resistant ovarian cancer
- Significant need for new products to treat platinum-resistant ovarian cancer
- **Phase Ib already underway**
- **IND transferred to PTX** (announced 29 June 2015)
- Currently recruiting at H. Lee Moffitt Cancer Center
- **6 patients already dosed**

Robert Wenham, M.D.
Principal Investigator

MOFFITT CANCER CENTER

Acute Myeloid Leukemia Market Overview

- AML is a type of cancer that affects the blood and bone marrow.
  - » Patient cannot produce normal blood cells
  - » Blood cells cannot function properly nor fight disease
- Progresses very quickly & 5-year survival is a dismal 25%
- More common in adults over 60 years old, so the market is growing rapidly in developed economies
  - » 50% increase in incidence since 2013 in the US alone!
- After initial chemo, most patients relapse
- There are poor options for relapsing and refractory AML patients
- So, these ingredients add up to massive interest in relapsing & refractory AML
  - » A growing ageing disease in rich countries
  - » Dismal survival
  - » No treatment options
- **PTX's AML program was a clear focus of interest from both clinicians and specialist biotech funds in the US this year**


Acute myeloid leukemia

PTX-200: Completed Phase I in AML

Patients	32
Trial Centers	MD Anderson & Moffitt
Patient Inclusion	Advanced hematologic malignancies (mainly AML)
Methods	Administration 1 hour IV infusion on days 1, 8, and 15. Cycles repeated every 21 days.
Study Objectives	To establish dosing regime and biological dose
Summary	• 17 out of 32 patients had stable disease after one cycle of treatment • 3 patients with AML achieved >50% bone marrow blast reduction • Further investigation of PTX-200 alone or in combination in patients with high Akt levels is warranted

THE UNIVERSITY OF TEXAS MD Anderson Cancer Center

MOFFITT CANCER CENTER

Published Leuk Res. 2013 Nov;37(11):1461-7

Planned Phase Ib Trial: Acute Myeloid Leukemia

- PTX-200 plus cytarabine in refractory or relapsed acute leukemia
- Phase I results very encouraging
- Phase Ib/II now planned
- Protocol complete
- Moffitt Cancer Center ready to recruit
- IND in final stages of preparation for submission to FDA
- Ready to initiate trial 1H 2016
- Recently bolstered PTX's Scientific Advisory Board with world class leukemia expertise

Jeffrey E Lancet, M.D.
Principal Investigator

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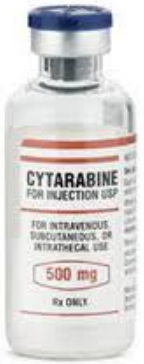

Catalysts To Watch Out For

		1H 2016	2H 2016
Breast cancer	Phase Ib expansion		
	Complete Phase Ib		
	Initiate Phase II		
Ovarian cancer	Initiate Phase Ib		
	Transfer Ovarian Cancer IND		
	Phase Ib dose escalation and interim analysis		
	Complete Phase Ib		
Acute Myeloid Leukemia	IND allowed by US FDA		
	Initiate Phase Ib		
	Dose escalation and interim analysis		
	Complete Phase Ib		
Other	Ongoing BD initiatives		

Investment Summary

- **Two clinical stage cancer drugs** from top US institutions (Yale and Moffitt)
- **Two clinical trials currently** underway:
  - Breast cancer
  - Ovarian cancer
- 3rd trial starting early 2016 in Acute Myeloid Leukemia
  - A massive unmet market
  - Intense market interest
- Gives Prescient one of the **deepest clinical pipelines on ASX**
- Proven team who have **successfully developed and approved cancer drugs**, and built and sold companies before
- Over $20 M already invested to date, including prestigious US grants
- **Stock is pregnant with value-accretive news** (investors don't have to wait years)
- Re-focussed strategy and communication

Contact

Steven Yatomi-Clarke
Director
Prescient Therapeutics Limited

M: +61 417 601 440
E: sclarke100@hotmail.com

prescienttherapeutics.com