

### **ASX Announcement**

22<sup>nd</sup> May 2020

# Successful \$26 million Share Placement

### **Highlights:**

- Binding commitments for a \$26.2 million two tranche share Placement with support from existing and new institutional, professional and sophisticated Australian and overseas investors
- Capital raised will be used to fully fund the planned Phase III Presendin™ registration clinical trial for Idiopathic Intracranial Hypertension (IIH), following the recent publication of successful Phase II results
- Company to commence a second Phase II clinical program, most likely in IIH without papilloedema (IIH-WOP) in 1H CY2021

Invex Therapeutics Ltd (Invex, ASX: IXC, or the Company) today announced a successful \$26.2 million share placement (Placement) to institutional, professional and sophisticated Australian and overseas investors. The Placement was conducted following the release of the Company's Phase II clinical results for Exenatide in the treatment of Idiopathic Intracranial Hypertension (IIH) patients, which showed a statistically significant and clinically meaningful reduction in intracranial pressure (ICP) for all three primary endpoints of the Phase II study at 2.5 hours, 24 hours and 12 weeks. Additionally, there was a statistically significant and clinically meaningful reduction in the number of headache days (7.7 days per month, a 37% reduction) and visual acuity (one line improvement at 12 weeks on a LogMAR eye chart). These key secondary endpoints are important clinical measures of the disease.

The Company received cornerstone commitments totalling \$10.5 million from existing investors, including \$5.0 million from Tattarang (formerly Minderoo Group).

Dr Jason Loveridge, Chairman of Invex Therapeutics said "On behalf of the Board of Directors of Invex, I am delighted with the outcome of our capital raising, which has resulted in the Company raising \$26 million. Our Phase II clinical results for IIH released to the ASX on 20 May highlighted a very significant change in ICP for patients who received Exenatide versus placebo and important secondary clinical measures examining headache and vision loss, which gives the Company confidence in progressing to a single Phase III registration study in 1H CY2021. Additionally, with the capital raised, Invex will fund a second clinical program, most likely in IIH-WOP, a second orphan indication."

Dr Loveridge continued "We are very pleased to welcome a number of new institutional investors onto the share register and thank existing shareholders for their continued support as well. This funding provides the Company with a clear trajectory through to Phase III clinical results in an important orphan disease without any approved treatments in the market. We look forward to updating investors throughout the remainder of 2020 on our progress in achieving these important goals."

#### **Placement**

A total of 20.15 million new fully paid ordinary shares (**New Shares**) will be issued under the Placement at an issue price of \$1.30 per New Share, representing a 4% discount to the volume weighted average price (**VWAP**) of the Company's ordinary shares as traded on the ASX over the 15 days up to and including 15 May 2020 and a 13% discount to the closing share price immediately before the Company's trading halt for purposes of the Phase II results and capital raise.

The first tranche will issue 12.5 million shares at \$1.30 to raise \$16.25 million (**Tranche 1**) utilising the Company's available placement capacity pursuant to ASX Listing Rule 7.1 and 7.1A. Accordingly, no shareholder approval is required for the issue of Tranche 1 shares.

The second tranche will result in the issue of approximately 7.65 million shares at \$1.30 to raise approximately \$9.95 million (**Tranche 2**). The completion of Tranche 2 is subject to obtaining shareholder approval at an Extraordinary General Meeting (EGM) of shareholders expected to be held on or around 29 June 2020.

Dr Jason Loveridge will participate in Tranche 2 of the Placement and for the purposes of Listing Rule 10.11, approval will be sought at the EGM for the Company to issue up to 38,462 Shares to Dr Jason Loveridge (or his nominee).

Bell Potter acted as Sole and Exclusive Lead Manager and Bookrunner for the Placement. Forrest Capital and CPS Securities acted as Co-Managers.

#### **Use of Funds**

Following the completion of the Placement, the Company will be in a strong financial position with approximately \$36.6 million cash (excluding offer costs) to meet its clinical and other objectives, including the completion and publication of top-line results of the Phase III study for Presendin™, drug manufacture and supply for the trials and the commencement of a Phase II study for Presendin™ in a second indication in 1H CY2021. The Phase III study is expected to commence in 1H CY2021. The costs of the offer will be approximately \$1.5 million.

#### Performance Review of the Chairman and Executive Director

In conjunction with the completion of the successful Phase II Clinical Trial and Placement the Company has completed its annual performance review of Directors and associated budgeting process.

The Board previously approved the payment of a \$70,000 bonus to each of Professor Alexander Sinclair and Dr Jason Loveridge based upon achievement of a successful Phase II trial result. That payment will now be made. In addition, having regard to the increased workload as a result of the planned Phase III trial and other activities, effective from 1 July 2020 Professor Alexandra Sinclair and Dr Jason Loveridge will be paid annual remuneration of \$150,000 per annum. Other terms of engagement as disclosed in the 2019 Annual Report continue to apply.

#### **Timetable**

The timetable for the Placement, including the planned EGM is highlighted in the table below. All dates are indicative and subject to change.

Event	Date
Trading Halt	Monday 18 May 2020
ASX Announcement – Clinical Trial results	Wednesday 20 May 2020
Placement Bookbuild Commences	Wednesday 20 May 2020
Allocations and Signed Acceptances	Thursday 21 May 2020
ASX Announcement – Placement, Investor Presentation, Trading Halt Lifted	Friday 22 May 2020
Settlement of Tranche 1 Placement Shares	Wednesday 27 May 2020
Allotment of Tranche 1 Placement Shares on ASX	Thursday 28 May 2020
Extraordinary General Meeting (EGM) to Approve Tranche 2 Placement	On or around 29 June 2020
Settlement of Tranche 2 Placement Shares	On or around 2 July 2020
Allotment of Tranche 2 Placement Shares on ASX	On or around 3 July 2020

This release dated 22nd May has been authorised for lodgement to the ASX by the Board of Directors of Invex Therapeutics and lodged by Narelle Warren, Company Secretary.

#### **ENDS**

### For more information, please contact:

Investors	Media
Dr Thomas Duthy	Margie Livingston
Nemean Group	Ignite Communications
tduthv@nemean.com.au	margie@ignitecommunicat

+61 402 493 727 +61 438 661 131

# **About Invex Therapeutics Ltd**

Invex is a biopharmaceutical company focused on the repurposing of an already approved drug, Exenatide, for efficacious treatment of neurological conditions derived from or involving raised intracranial pressure, such as Idiopathic Intracranial Hypertension (IIH), acute stroke and traumatic brain injury. Invex has trademarked its repurposed Exenatide as Presendin™. www.invextherapeutics.com.

# About Idiopathic Intracranial Hypertension (IIH)

IIH features severely raised intracranial pressure which causes disabling daily headaches and can compress the optic nerve, causing permanent vision loss in 25% of those affected. The usual age of onset is 20-30 years, and it is most common in women who are obese. IIH is a rapidly growing orphan indication: its incidence has increased by more than 350% in the last 10 years.

### **About Exenatide**

Exenatide is a small peptide and a synthetic version of the GLP-1 agonist exendin-4, which received approval in the US and Europe for the treatment of type 2 diabetes in 2005 and 2006 respectively. Professor Alexandra Sinclair's research showed that GLP-1 receptors are expressed in the choroid plexus in the brain and that Exenatide can bind to these receptors and reduce secretion of cerebrospinal fluid. Current Exenatide dosage forms are not optimised for IIH.