LEADING THE WAY IN
BREAKTHROUGH
IMMUNE THERAPIES

Faron Corporate Presentation

16 September 2021

FARON

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Faron is Focused on Building the Future of Immunotherapy

1. A unique macrophage focused therapy targeting CLEVER-1 with demonstrated single agent activity in multiple advanced solid tumors
2. 30%+ clinical benefit positions macrophage-targeting *Bexmarilimab* to change the treatment paradigm in difficult to treat cancers
3. Favorable safety profile of *Bexmarilimab* allows for further expansion and dose confirmation trials
4. Worldwide rights to all indications for *Bexmarilimab* with strong IP coverage through at least 2037
5. Multiple near-term value inflection points in the next 18 months for *Bexmarilimab*
6. Other macrophage targets (e.g., CD47) attract significant attention from investors and pharma companies
7. Additional pipeline assets focused on organ protection and regenerative medicine show early signs of preclinical and clinical efficacy

Harness the Power of the Immune System

Modulating the immune system is key to tackling cancer and inflammation

Programs (Target)	Indication(s)	Phase of Development	Anticipated Key Milestones
Immuno-Oncology Bexmarilimab (anti-CLEVER-1 mAb)	Solid Tumors (MATINS)	Phase 2	▪ Additional data will be presented at ESMO Congress 2021 in mid-September ▪ Pivotal cohorts to begin recruitment H1 ’22
	NSCLC (MATINS-05 LUNG)	Phase 1	▪ First-patient-in expected in Q4 ‘21
	Neoadjuvant in Solid Tumors (RENACOL)	Phase 1	▪ First-patient-in expected in Q4 ‘21
	Hematological Malignancies (MATINAML)	Phase 1	▪ First-patient-in expected in Q4 ‘21 ▪ Phase 1 data in Q3 ’22
Organ Protection Traumakine (Intravenous IFN beta-1a)	ARDS & COVID-19 (HIBISCUS)	Phase 2	▪ First patient dosed August ’21
	ARDS & COVID-19 (REMAP-CAP)	Phase 2	▪ Additional data expected Q4 2021
Regenerative Medicine Haematokine (A0C3 Inhibitor)	Hematological Malignancies	Preclinical	▪ Anticipated IND submission in 2022
	Bone Marrow Failure	Preclinical	

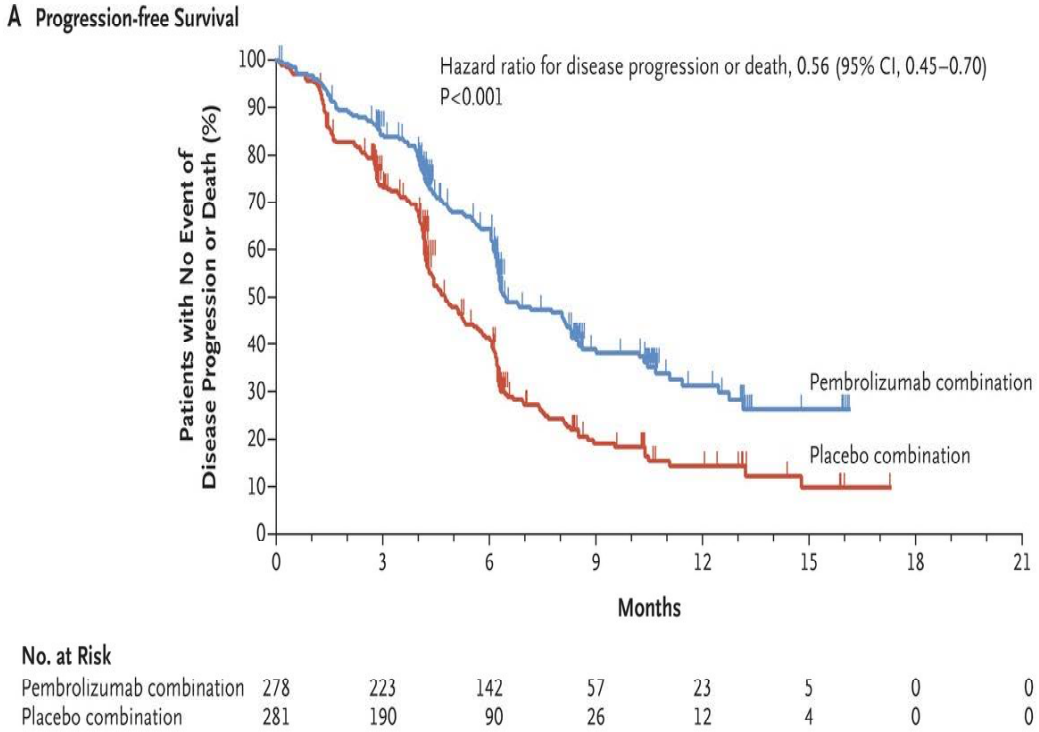

Bexmarilimab
(anti-CLEVER-1 mAb)

Bexmarilimab Opportunity

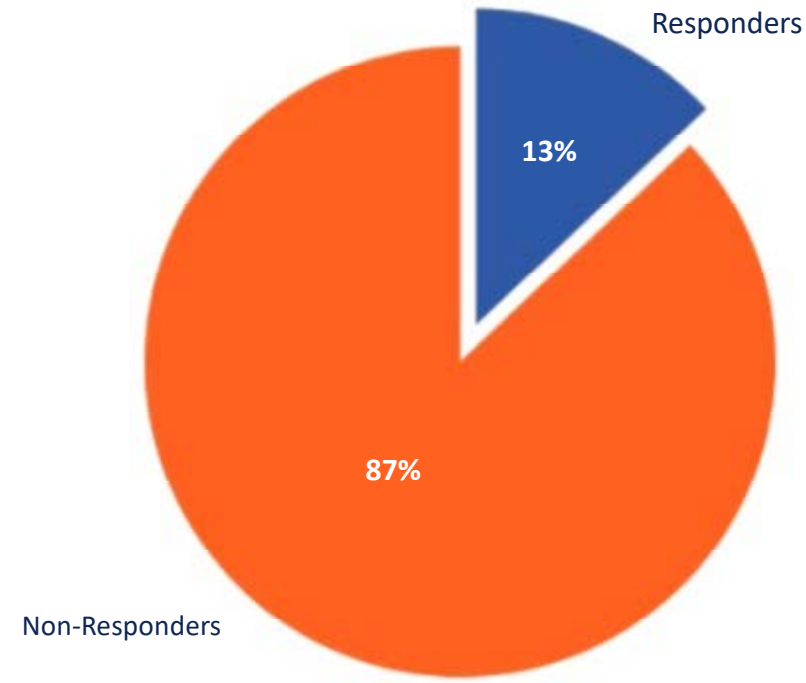
Benefiting those who do not respond to checkpoint inhibition

CPIs were among the first drugs to significantly impact survival in metastatic melanoma and lung cancer, which were in-curable before this

The adoption of CPIs has occurred very quickly due to their success in improving overall survival, despite poor response rates[1]



Kaplan-Meier Curver from: KEYNOTE-407 Pembrolizumab and Chemotherapy for NSCLC
Paz-Ares. et al. (2018) *NEJM*. 379: 2040-2051



1) O'Connor et al. (2018) JAMA Oncol.;4(8):e180798.

Pie Chart adapted from: Haslam and Prasad (2019) JAMA Netw Open. 2019 May; 2(5): e192535.

Macrophages: The Next Breakthrough in Oncology

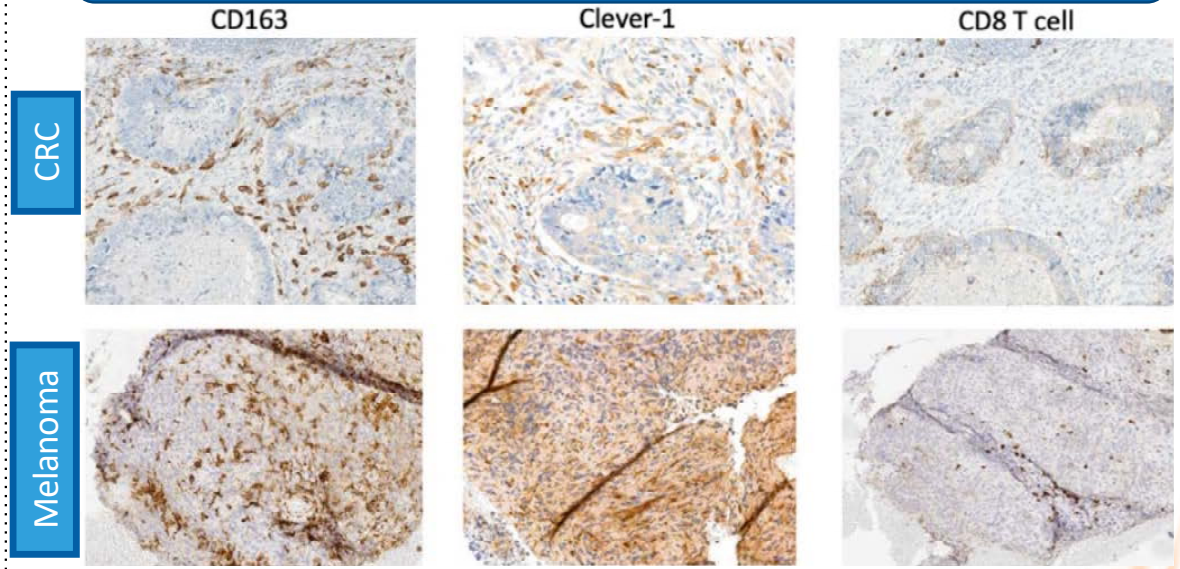
Myeloid cell produced "**Hide me – signal**" is essential for tumor cells to grow and spread

Why Macrophages?

- Macrophages promote tumor growth and metastases
- Macrophages create a highly immunosuppressive environment
- Targeting tumor associated macrophages (TAMs) has shown promising preclinical results [1,2]
- Continued evidence shows that macrophages are key in treatment resistance [3]
- Repolarisation of pro-tumoral M2 macrophages to anti-tumor M1 macrophages causes a tumor suppressive effect [3,4]
- Activating macrophages has shown to remove resistance against the current regime of targeted therapies across indications [4,5,6]

Macrophages make up nearly 50% of cancer mass [7]

M2, but not M1 macrophages play a central role in promoting proliferation, colony formation, migration and treatment resistance [5]



Tumors high in macrophages impede the entrance of effector T-cells limiting the effect of current checkpoints therapies [6]

Tumor samples from MATINS Patients [8]

1) Jahchan et al (2019) Front Immunology. 10:1611
2) Cassetta and Pollard (2018) Nature Reviews: Drug Discovery 17(12) 887-904
3) Guerriero (2018) Trends in Molecular Medicine. 24 (5) 472-489
4) Duan & Luo (2021) Signal Trans and Targ. Ther. 6 (127)
5) Dong et al (2019) BJC. 121 22-33
6) Peranzoni et al (2018) PNAS. 115 (17) E4041-4050
7) Vinogradov et al (2014) Nanomedicine. 9(5) 695-707
8) Virtakoivu et al. (2021) Clin Cancer Res June 2, 2021, DOI: 10.1158/1078-0432.CCR-20-4862

The Most Promising Macrophage Strategy: Reprogramming [1]

Novel and diverse antibody with broad applicability

CLEVER-1

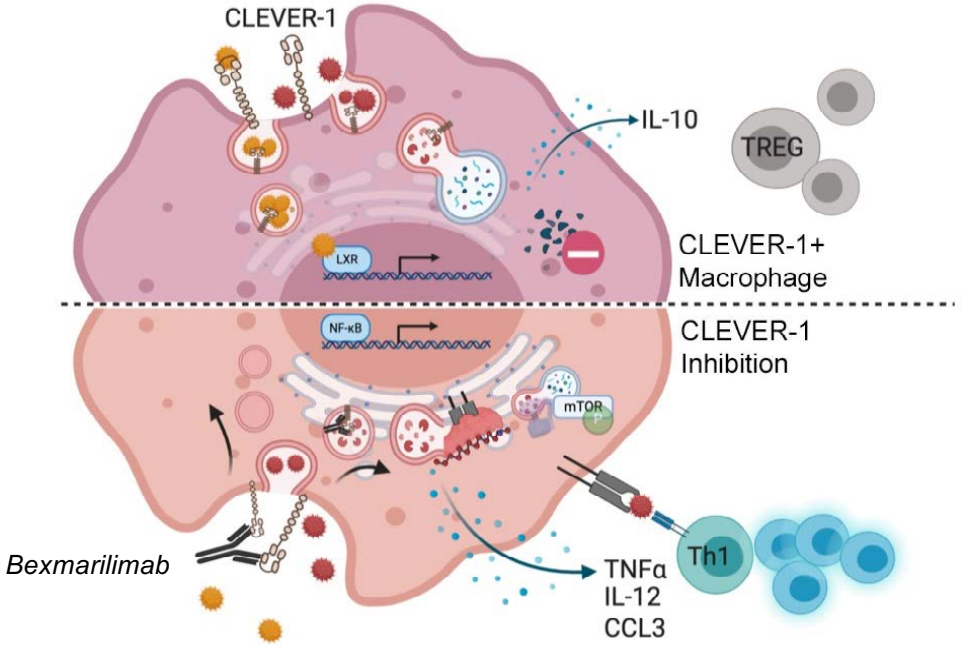
- A large glycoprotein receptor that is expressed on the surface of immunosuppressive macrophages [2]
- As a scavenger receptor it is known to bind to a wide range of ligands and therefore central to tissue homoeostasis and tolerance [2]
- CLEVER-1 positive macrophages are highly immunosuppressive; high expression levels are only seen in cancer and pregnancy [3]
- CLEVER-1 has been shown to be central to treatment resistance in both solid and liquid tumors alike [4,5,6,7]
- CLEVER-1 is a multifaceted molecule with a major impact on tumor immune response [2]

Bexmarilimab

Bexmarilimab is a humanised anti-CLEVER-1 IgG4 antibody currently in clinical trials for solid tumors and expanding into hematological malignancies. [2]

Faron holds the worldwide rights to the *Bexmarilimab* program in all indications.

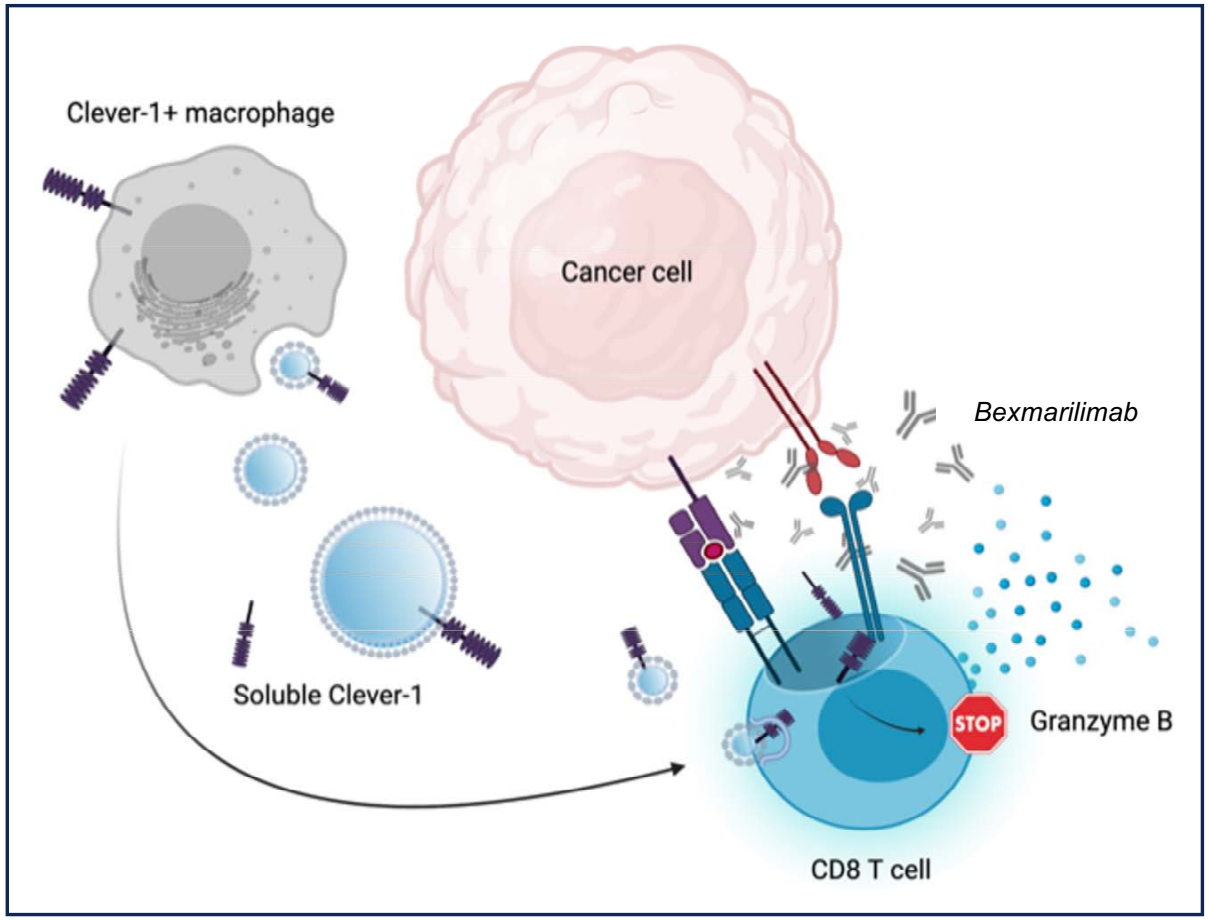
Proposed mechanism of action

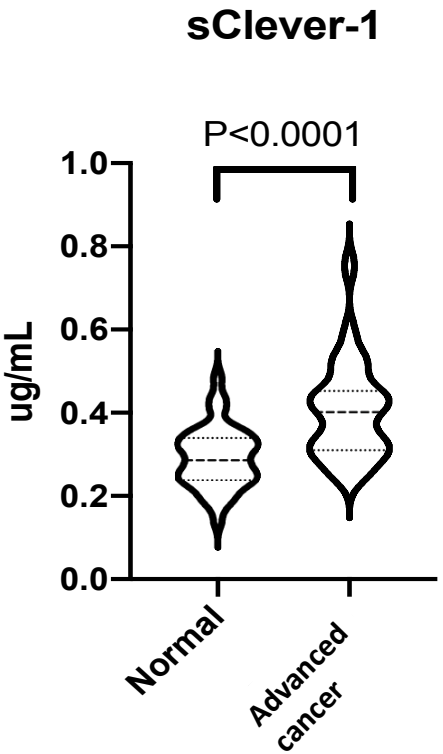


1) Li et al (2021) JITC. 9: e001341
2) Hollmen et al., (2020) BJC. 123. 501-509
3) Palani et al., (2011) Eur. J. Immunol. 41 2052-2063
4) Kwon et al., (2019) Head Neck. 41 2058-2064
5) Yin et al., (2020) Oncol. Lett. 19(3)2404-2412
6) Dong et al (2019) BJC. 121 22-33
7) Lin et al (2019) Mol. Ther. Nuc. Acids. **18** 476-484

CLEVER-1: a Master T Cell Suppressor

Tackling both immunosuppressive macrophages and soluble protein that inactivates T-cells





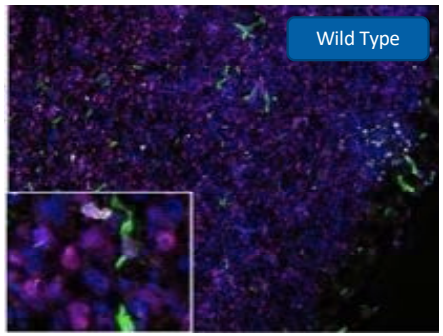
Advanced cancer patients have elevated levels of CLEVER-1 macrophages and the soluble form

Bexmarilimab inhibits soluble CLEVER-1 from interfering with the immunological synapse and T-cell activation, a tool for cancer to create systemic immune suppression

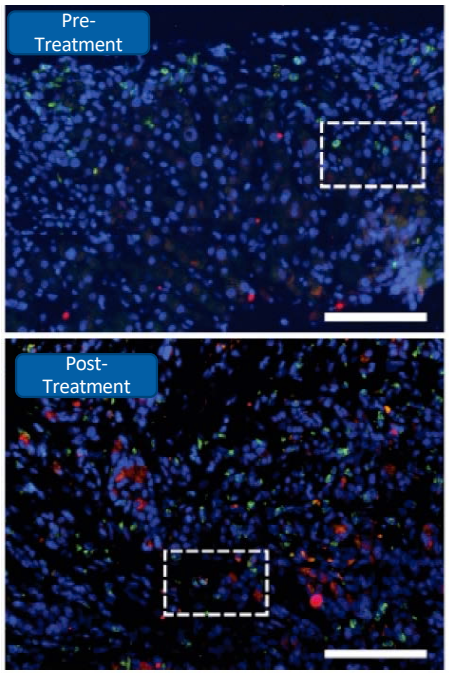
Bexmarilimab's Ability to Turn Cold Tumors Hot

23% of immune suppressed cancer patients show an IFNy response during dose finding

Mice [1]

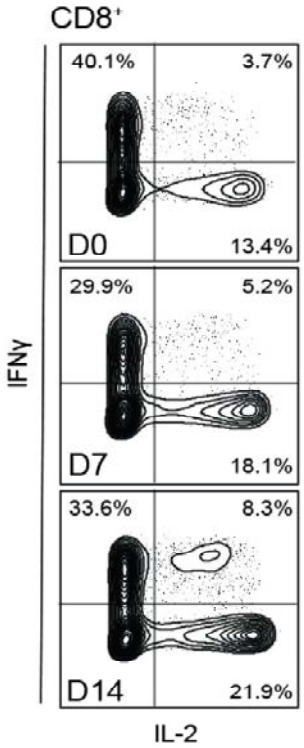


MATINS patient [2]

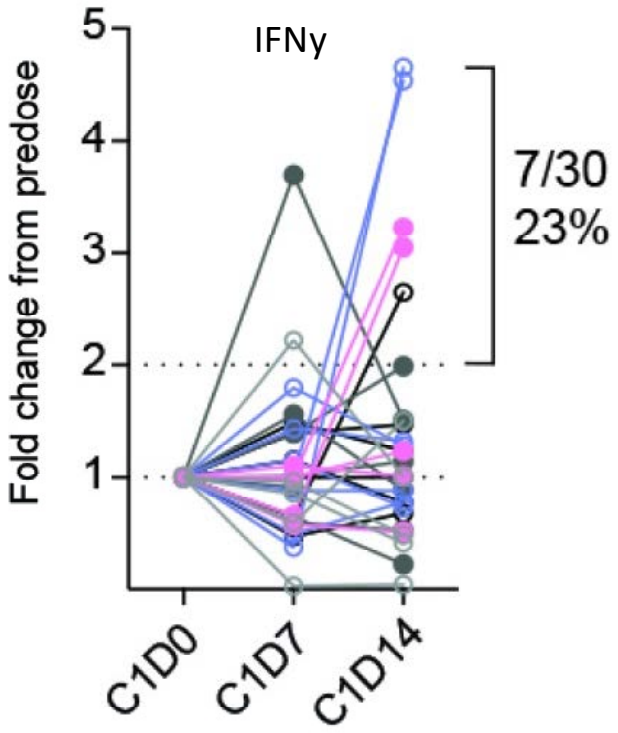


Cytotoxic granzyme B positive CD8 T cells can be seen in green and red

Robust T-Cell Activation [2]



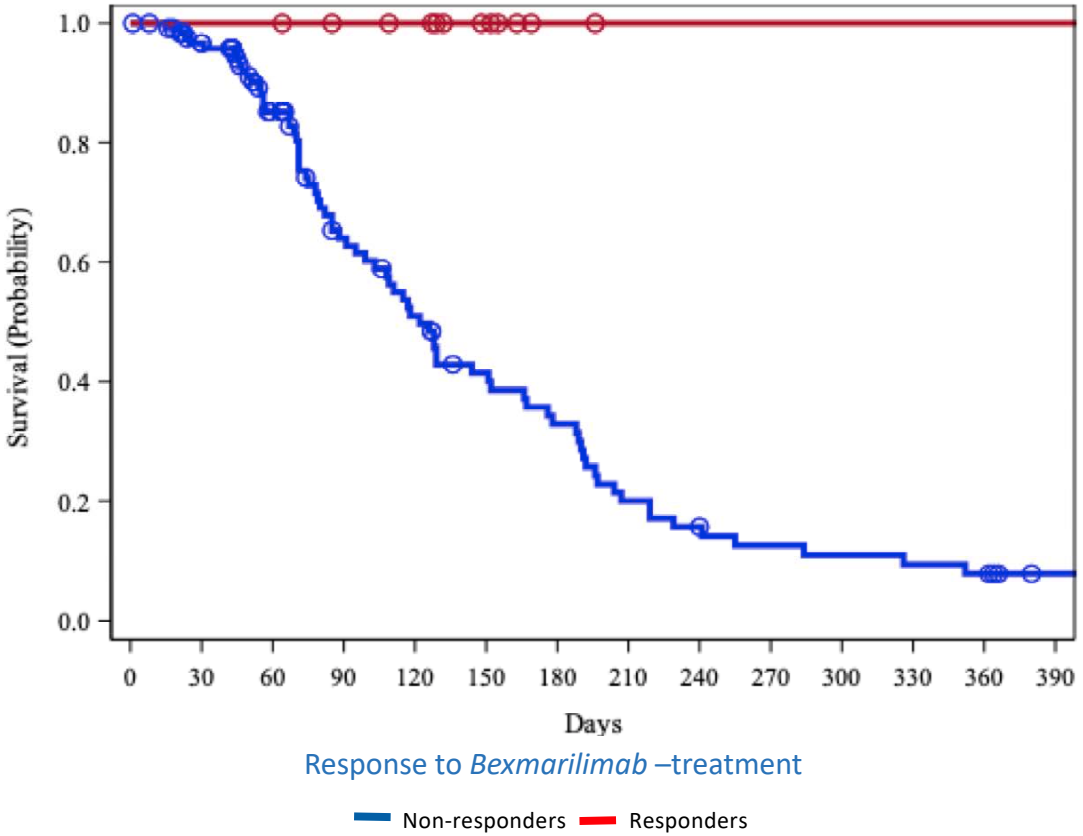
Restoration of Pro-Inflammatory IFNy Response [2]



1) Viitala et al. (2019) Clin Cancer Res 25: 3289-3303
2) Virtakoivu et al. (2021) Clin Cancer Res 27: 4205-4220

A Dramatic Turnaround for Last Line Patients

Overall survival in all MATINS patients



Response to *Bexmarilimab* –treatment

Patients who are at the end of life have a significant survival benefit

- In all comers, last line, unoptimized setting, the strongest disease control rate, DCR (30.0% — 40.0%) was observed in cutaneous melanoma, gastric cancer, cholangiocarcinoma and hepatocellular carcinoma patients. [1,2, 3]
- Patients who benefit (PR or SD) from *Bexmarilimab* **have 100% 6-month survival estimate** [4]
  - Compared to 30% survival in non-responding patients
  - This almost **doubled** the survival of advance cholangiocarcinoma patients, when comparing to historical survival [5]
- Progression free survival was the same in non-responding and responding patients prior to treatment with *Bexmarilimab*

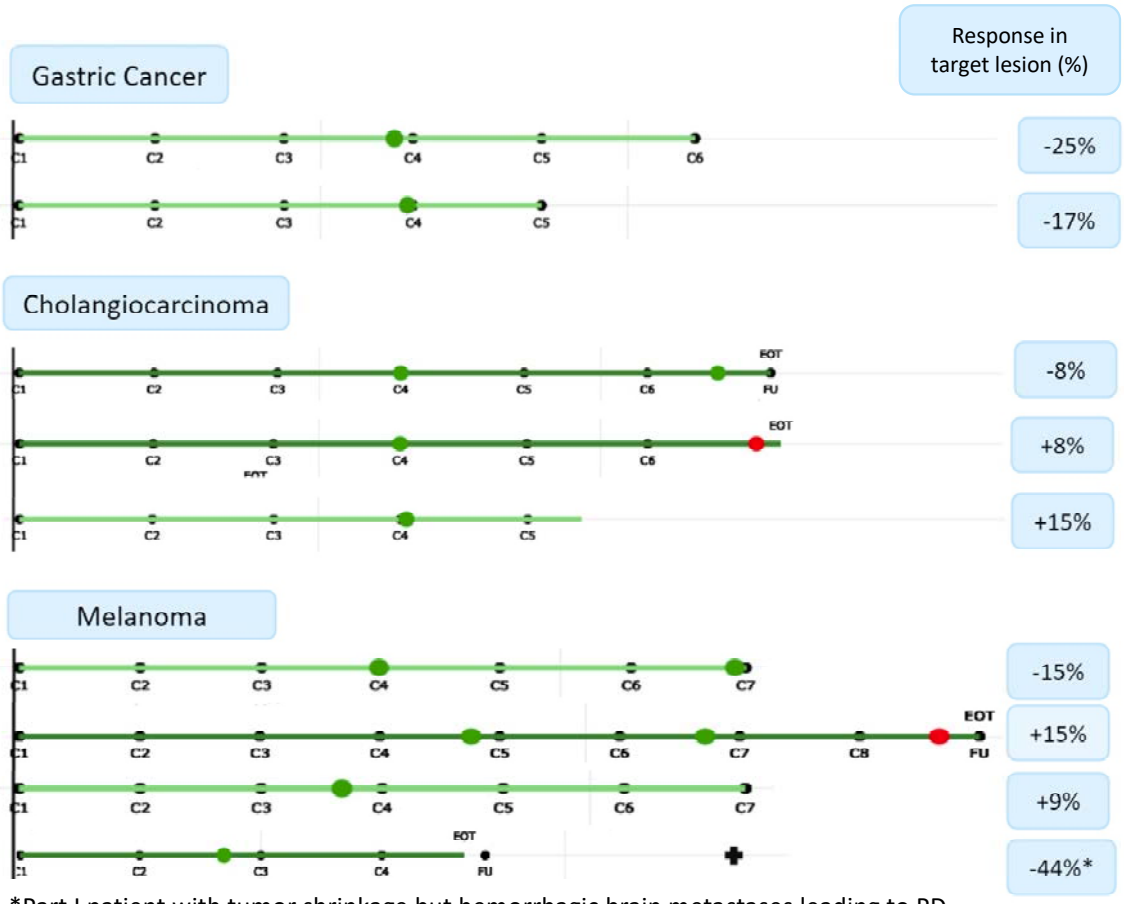
Data available from company press release [1,2,3,4]

1)Faron Pharmaceuticals Ltd (2021 May 17th) Bexmarilimab monotherapy shows promising anti-tumour activity in multiple advanced solid tumours. [Press release] https://www.faron.com/news-events/news-and-press-releases?rnsid=1476431&cid=2223 2) Faron Pharmaceuticals Ltd (2021 June 22nd) Updated corporate presentation 3) Faron Pharmaceuticals Ltd (2021 August 26th) Faron Reports Half-Year Financials, January 1 - June 30, 2021. [Press release] https://www.faron.com/news-events/news-and-press-releases?rnsid=1502976&cid=2223 4) Faron Pharmaceuticals Ltd (2021 March 22nd) *Bexmarilimab* (Clevegen) development update. [Press release] https://www.faron.com/news-events/news-and-press-releases?rnsid=1462608&cid=2223 5) Smyth and Moehler (2019) Ther Adv Med Oncol.

MATINS Phase I/II Top Line Data

Safety and efficacy data from over 140 patients

Top Line Efficacy Data



*Part I patient with tumor shrinkage but hemorrhagic brain metastases leading to PD
EOT = end of treatment

Subsequent expansion and dose confirmation cohorts based on the responses seen in first 10 patients/indications include:
Gastric cancer, cholangiocarcinoma, cutaneous melanoma, and hepatocellular carcinoma

Treatment-related adverse events (147 patients dosed as of 29th of April)	**Grade 1-2** [n (%)]	**Grade 3-4** [n (%)]
Acute kidney disorder	1 (0.7%)	0
Aminotransferase increased	0	2 (1.4%)
Biliary stent occlusion	0	1 (0.7%)
Drug-induced hepatitis	0	1 (0.7%)
Fatigue	2 (1.4%)	0
Infected seroma	0	1 (0.7%)
Pyrexia	2 (1.4%)	0
Tumor necrosis	0	1 (0.7%)

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Indications Chosen for MATINS Expansion

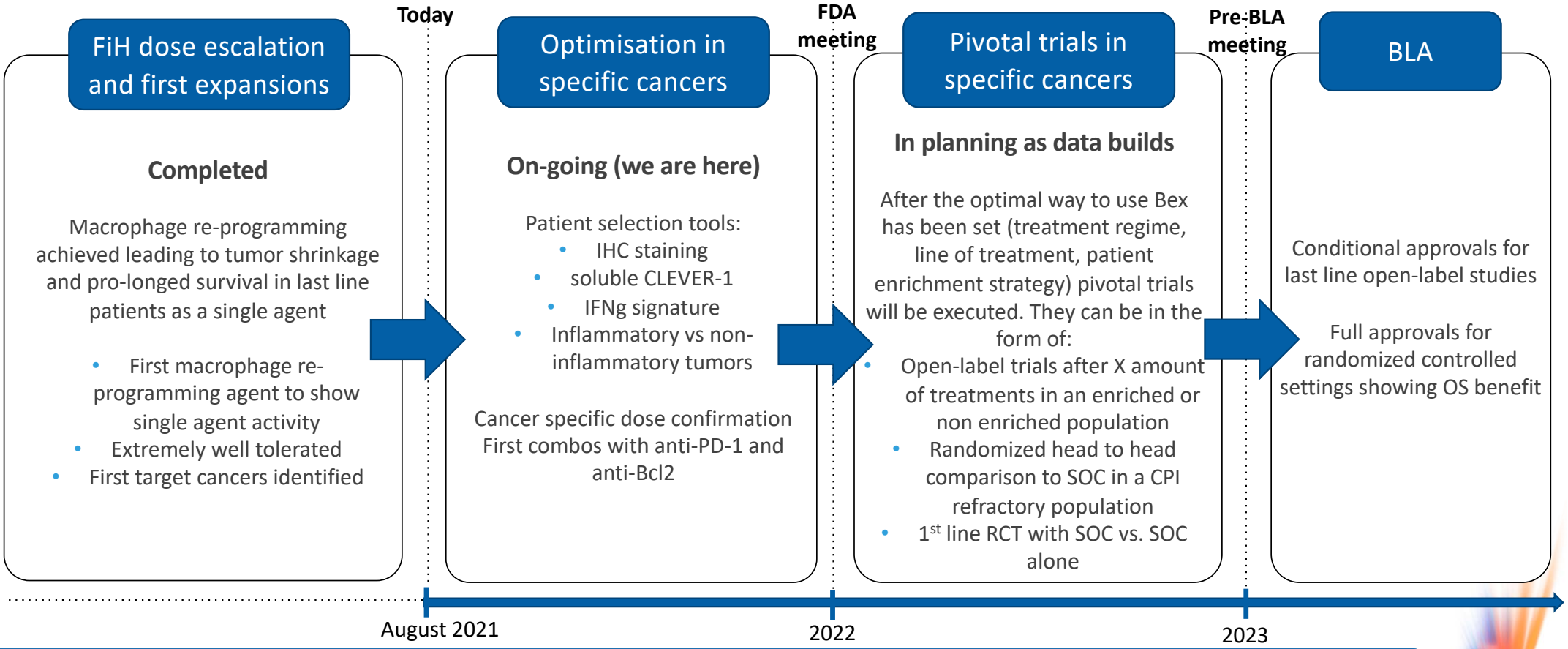
Response Rates, Patient Populations and Annual Incidence

	Annual Incidence [1]	Standard of Care and Refractory Population	*Bexmarilimab* benefit in Refractory Population [10,11,12]
Hepatocellular Carcinoma	USA: 34 500 5EU: 43 500 Japan: 30 500 China: 167 500	Recent approval 1stL SOC to Atezolizumab–Bevacizumab (PD1-VEGF) 75% refractory to combo treatment [2]	40% (4/10)
Cutaneous Melanoma	USA: 98,000 5EU: 77,500 Japan: 13,000 China: 9,500	CPIs as standard of care at 1stL 60-70% refractory to 1stL [3,4]	40% (4/10)
Gastric Cancer	USA: 29,500 5EU: 54,000 Japan: 140,500 China: 478,500	3rdL approval [5] 80% refractory to 3rdL CPIs [6,7]	30% (3/10)
Cholangiocarcinoma	USA: 10,500 5EU: 4,000 Japan: 7,500 China: 48,000	1stL generic chemotherapy No established 2ndL [8] 85% refractory to CPI treatment [9]	30% (3/10)

1) GlobalData Epidemiology and Market Size Database 2) Finn et al (2020) NEJM. 382: 1894-1905 3) Asher et al (2020) Cancers. 12 (8) 2329; 4) Hamid et al (2019) Ann. Onco. 30(4) 582-588; 5) Le et al (2020) CCC. 19(1) 32-38; 6) Magalhaes et al (2018) Can J Gastro Hepatol 2018; 7) Brar and Shah (2019) Ther Adv Gastro 12; 8) Saeed et al (2019) CCR 18(2); 9) Guo and Shen (2020) Onco. Letters 20(6) 10)Faron Pharmaceuticals Ltd (2021 May 17th) Bexmarilimab monotherapy shows promising anti-tumour activity in multiple advanced solid tumours. [Press release] https://www.faron.com/news-events/news-and-press-releases?rnsid=1476431&cid=2223 11) Faron Pharmaceuticals Ltd (2021 March 22nd) *Bexmarilimab* (Clevegen) development update. [Press release] https://www.faron.com/news-events/news-and-press-releases?rnsid=1462608&cid=2223 12) Faron Pharmaceuticals Ltd (2021 June 22nd) Updated corporate presentation

Overall High Level Development Plan

How is Bexmarilimab developed?



Companion Diagnostics is being developed to incorporate into the pivotal expansion of the cohorts into larger trials and larger indications where patient populations are very heterogenic. Current plan is IHC, sCLEVER-1 and other T-cell activation markers.

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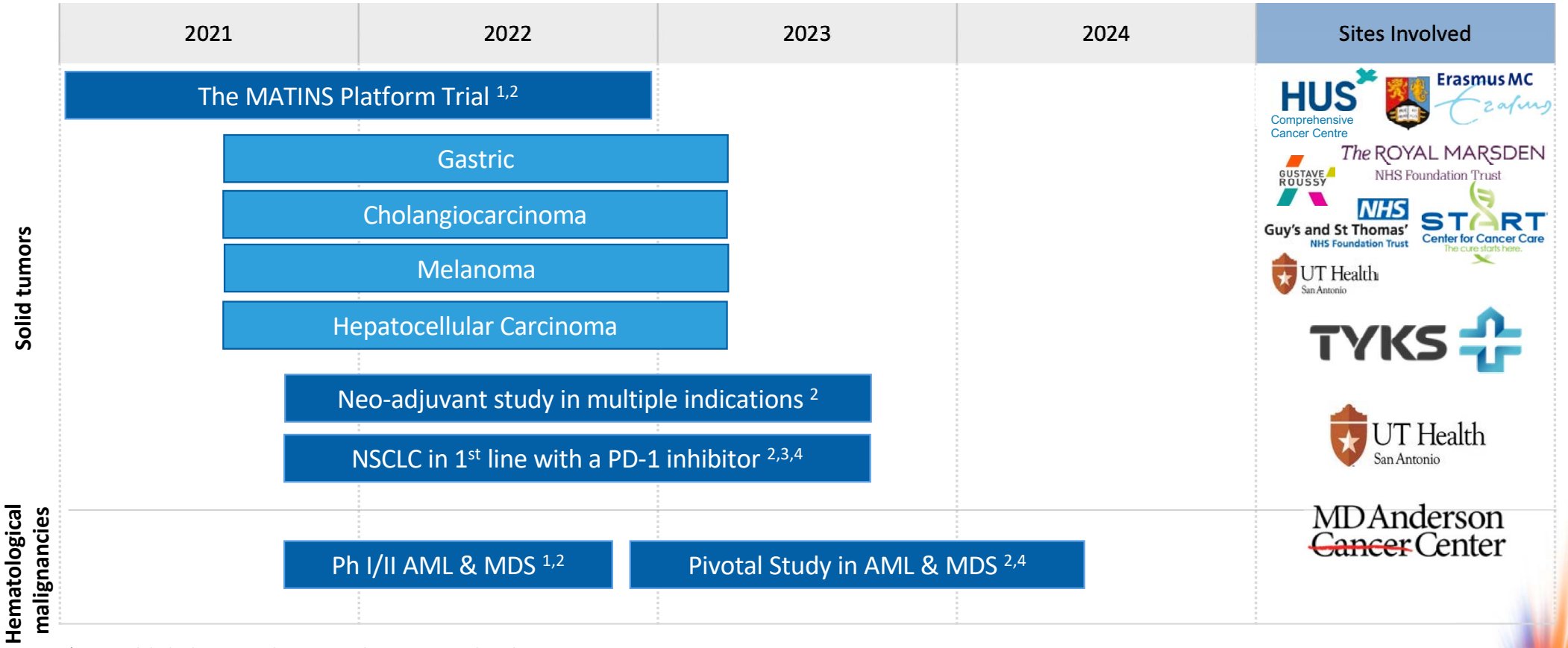
Bexmarilimab Clinical Development Plan

Evidence based clinical trials to allow for registration



1) Open label adaptive trials aiming to become pivotal studies
2) These trials are Faron's future plans and therefore subject to changes depending on multiple factors
3) Investigator sponsored study design
4) RCT in combination with first line standard of care (SOC)

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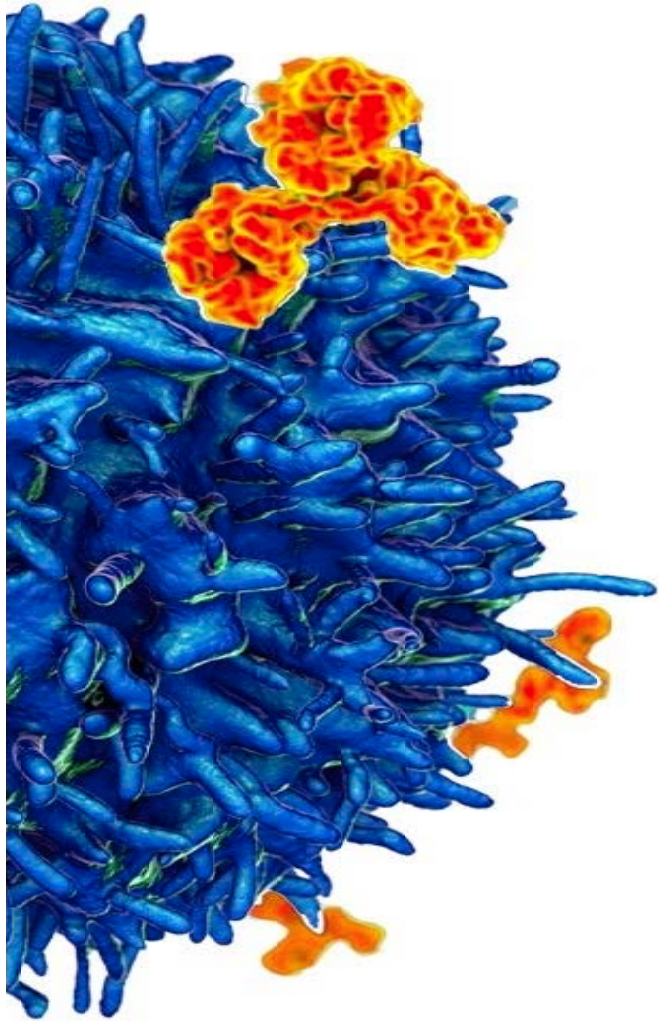
A CLEVER Antibody: Outsmarting Cancer with Early Signs of Efficacy



1. **A unique macrophage focused therapy targeting CLEVER-1 with demonstrated single agent activity** in multiple advanced solid tumors

2. **Favorable safety profile** enables extensive combinations with checkpoint inhibitors

3. **Opportunity to transform the treatment of cancers** that are not responsive to current treatment options

4. **Extensive IP Coverage** through 2037 with further protection being sought via regulatory designations

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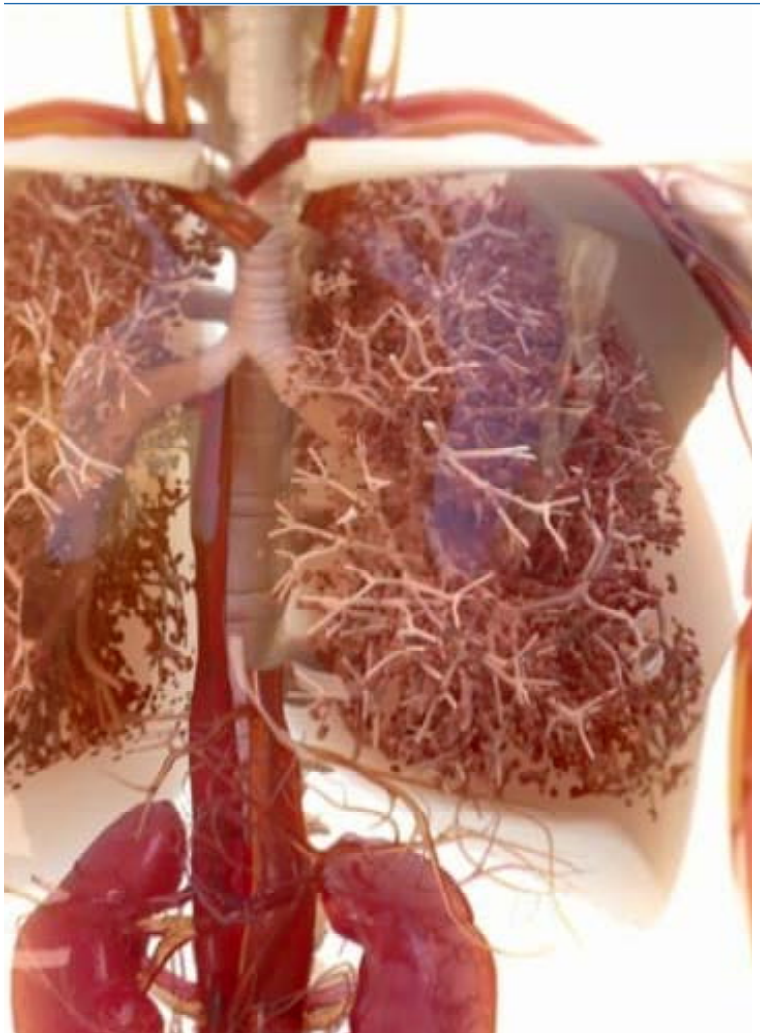
Traumakine
(Intravenous IFN beta-1a)

Interferon Beta: A Well-Known Drug with a Novel Approach



1. **A potential orphan blockbuster** with a path to approval in a critical care discipline
2. **Potentially first innovative drug to be approved in ARDS** to sustain lung function
3. Ability to limit **Cytokine Release Syndrome** may **significantly increase** the adoption of CAR-T therapy
4. **Clear route to market with strong IP** and regulatory protection

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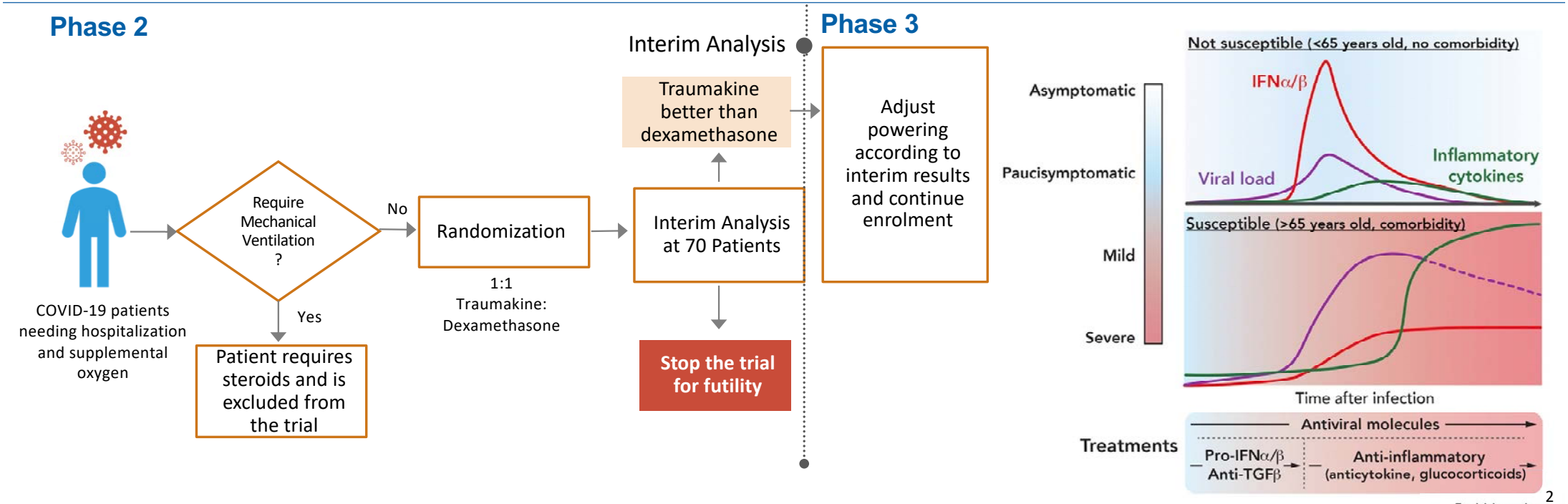
HIBISCUS: A Phase 2/3 Co-funded by the Department of Defence

Supporting Hospitalised COVID-19 Patients to prevent ARDS and admission to the ICU



The HIBISCUS Trial in the US:
An RCT, which aims to prove the superiority of Traumakine against current standard of care (dexamethasone) when given early in hospitalized COVID-19 patients who do not yet require mechanical ventilation

- Primary end-point: Clinical Status at D14
- Secondary end-points: Mortality at D28, ICU free days at D28, Ventilation free Days
- Size of Phase II: 140 patients (Interim readout at 50% enrolment)
- The use of steroids at baseline at baseline, but steroids can be used after IFN beta
- Early Therapy with Interferon Beta is likely to prevent the development of critical disease [1]

1) Lopez et al (2021) J. Exp. Med. 218 (10) e20211211 2) Feuillet et al (2021) Trends Immunol. 42 (1) 31-44

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Corporate Highlights

Multiple Near-Term Catalysts For *Bexmarilimab*

- ☑ Discovery of Soluble CLEVER
- ☑ CMC Commercial Scale Preparation
- ☑ Topline data from MATINS Phase 1
- ☑ Dramatic Survival Benefit was seen in responding patients
- ☑ Selection of Expansion Cohorts (Breast, Cholangiocarcinoma, Gastric, HCCand Melanoma)
- ☑ Key Intellectual Property (Confirmation of Matter) Awarded
- ☑ Major Publication of Phase 1 Data in Clinical Cancer Research
- ☑ Validation of CLEVER-1 Staining Anti-body in patient tissue samples
- ☑ Accepted Oral Presentation at European Society of Medical Oncology
- ☑ Additional data release on MATINS solid tumors in Q3 ’21
- ☐ Confirmation of final dosage and frequency for pivotal expansion
- ☐ Pivotal cohorts to begin recruitment in H1 ’22
- ☐ First-patient-in for neo-adjuvant (RENACOL) study in Q4 ’21
- ☐ First-patient-in for hematological malignancies in Q4 ’21
  - ☐ Phase 1 data in Q3 ’22
- ☐ Investigator Initiated trials to begin
  - ☐ Anti-PD-1 combination

And Across Entire Pipeline

Traumakine

- ☑ CMC commercial scale preparation
- ☑ Poster presentation at Military Health System Research Symposium
- ☑ HIBISCUS first patient dosed August ’21
  - ❑ Interim analysis
- ❑ REMAP-CAP interim readout
- ❑ Organ protection data release with the DoD

Haematokine

- ❑ Ongoing pre-clinical studies with humanized AOC3 mice and with ex vivo human cells
- ❑ Clinical development plan to be announced
- ❑ Anticipated IND submission in 2022

Faron Strategy

Maximal realisation of pipeline potential to harness immune system

- **Promote "Hide me – please" science worldwide**
- **Build a US presence of the Faron Group**
  - Building an outward facing investor and business development team
  - Continuing to collaborate with leading investigators in the United States
  - Enabling more efficient communication with the Food and Drug Administration
- **Maximise pipeline potential**
  - Expand bexmarilimab use to various cancers as a single agent or in combination
  - Target intravenous IFN-beta use in all life threatening conditions involving ischeamia induced cytokine release
- **Build several partnerships with world leading pharma companies**
  - Proactive combination opportunities with most advanced 1st or 2nd line therapies


Thank you
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