

BELL POTTER HEALTHCARE CONFERENCE 2023



IMPORTANT NOTICE AND DISCLAIMER

The information in this presentation does not constitute personal investment advice. The presentation is not intended to be comprehensive or provide all information required by investors to make an informed decision on any investment in Radiopharm Theranostics Ltd ACN 647 877 889 (Company). In preparing this presentation, the Company did not take into account the investment objectives, financial situation and particular needs of any particular investor. Further advice should be obtained from a professional investment adviser before taking any action on any information dealt with in the presentation. Those acting upon any information without advice do so entirely at their own risk.

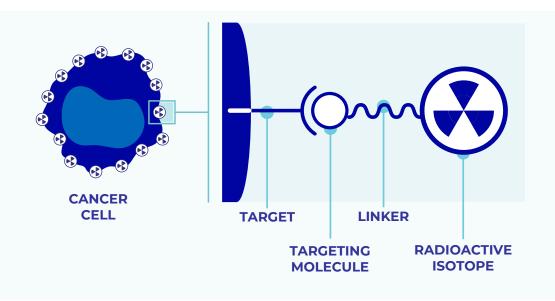
Whilst this presentation is based on information from sources which are considered reliable, no representation or warranty, express or implied, is made or given by or on behalf of the Company, any of its directors, or any other person about the accuracy, completeness or fairness of the information or opinions contained in this presentation. No responsibility or liability is accepted by any of them for that information or those opinions or for any errors, omissions, misstatements (negligent or otherwise) or for any communication written or otherwise, contained or referred to in this presentation. Neither the Company nor any of its directors, officers, employees, advisers, associated persons or subsidiaries are liable for any direct, indirect or consequential loss or damage suffered by any person as a result of relying upon any statement in this presentation or any document supplied with this presentation, or by any future communications in connection with those documents and all of those losses and damages are expressly disclaimed.

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 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 favourable 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 is not a prospectus or other disclosure document under the *Corporations Act 200*1 (Cth) and will not be lodged with the Australian Securities and Investments Commission. This presentation is for information purposes only and is not an invitation or offer of securities for subscription, purchase or sale in any jurisdiction. The distribution of this presentation (including electronically) outside Australia may be restricted by law. If you come into possession of this presentation, you should observe such restrictions as any non-compliance with these restrictions could contravene applicable securities laws (see the section captioned 'International offer restrictions'). In particular, this document does not constitute an offer to sell, or a solicitation of an offer to buy, securities in the United States. The New Shares have not been, and will not be, registered under the US Securities Act of 1933 and may not be offered or sold in the United States except in transactions exempt from, or not subject to, the registration requirements of the US Securities Act and applicable US state securities laws.

Any opinions expressed reflect the Company's position at the date of this presentation and are subject to change.

RADIOPHARMACEUTICALS DELIVER RADIATION THERAPY DIRECTLY TO CANCER CELLS



Building Blocks of Radiopharmaceuticals



TARGETING MOLECULE

High affinity, specific to cancer cells small molecule, peptide or antibody



RADIOACTIVE ISOTOPE

Imaging Isotope to **SEE** the Cancer Cells Therapeutic Isotope to **TREAT** Cancer



LINKER

Joins Targeting Molecule and Radioactive Isotope

Imaging

SEE and measure disease with radioactive isotopes

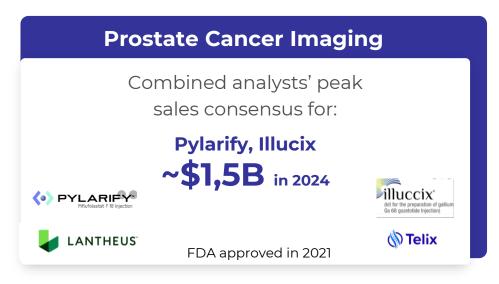
Imaging compounds specifically deliver radioactive isotopes to detect and image cancer cells

Therapeutics

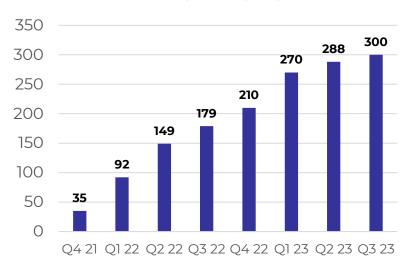
TREAT cancer with high energy particle emitters

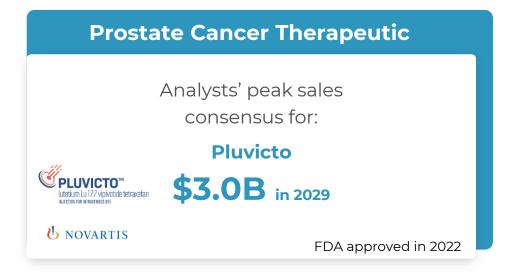
Extreme selectivity to cancer cells while limiting damage to healthy tissues

SECTOR EXCITEMENT DRIVEN BY FDA-APPROVED RADIOPHARMACEUTICAL DRUGS BEATING EXPECTATIONS

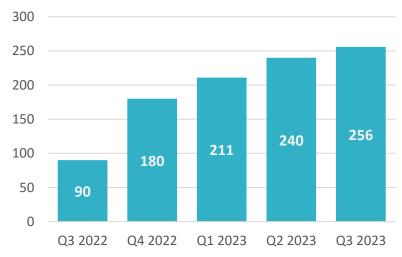


USD\$ m - quarterly sales - Pylarify + Illucix





USD\$ m - quarterly sales -Pluvicto





COMPANY VISION & STRATEGY

SUCCESSFULLY FIGHT CANCER THROUGH INNOVATIVE RADIOPHARMACEUTICAL THERAPIES



Unique Business Model

- High resource allocation to R&D
- Low resource allocation to G&A small team of 11 FTE.
- Expanded partnerships and strategic alliances



Intellectual Property

Extensive Patient portfolio for targets through 2040



Differentiated Targeting Molecules

- Radiopharm is in a unique space where other radiopharmaceutical companies are not known to be focused
- Proprietary molecules designed to identify and attack a broad range of malignancies



Deep Expertise in Radiopharmaceuticals

- All team members with previous Imaging or Therapeutic radiopharmaceutical experience
- Extensive team of accredited multinational researchers

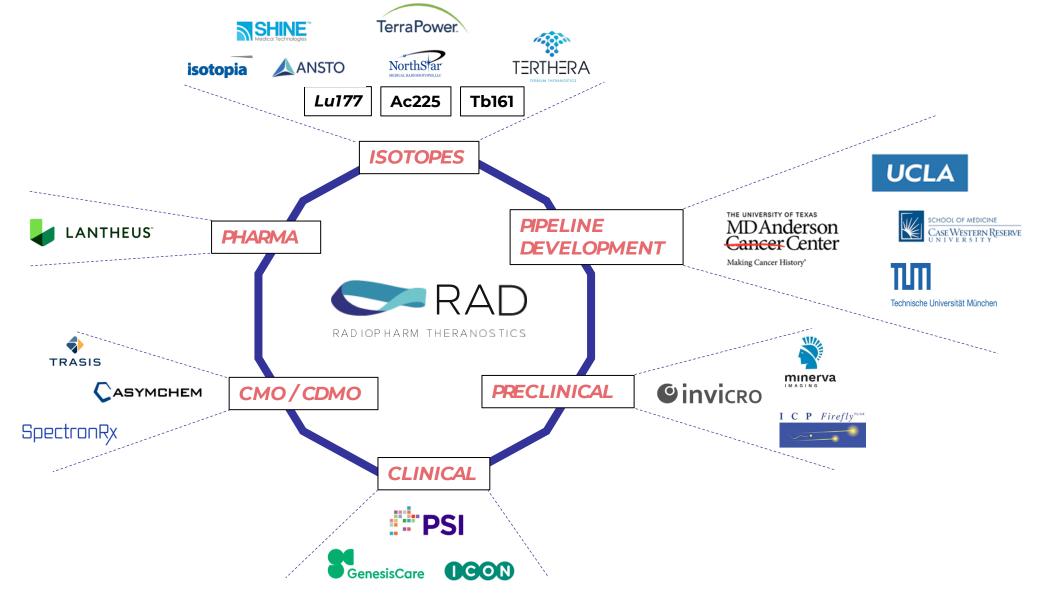


Timely, Accurate & Rich News Flow Expected in the Next 6-12 Months

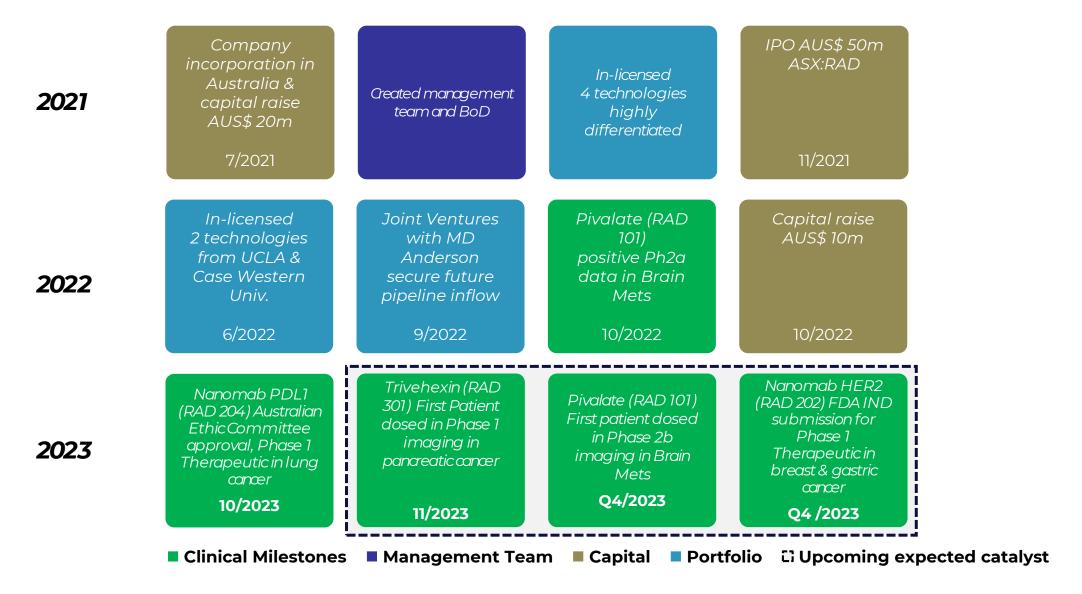
Transitioning four different molecules from pre-clinical to clinical stage

EXPANDED PARTNERSHIPS & STRATEGIC ALLIANCES

- UNIQUE BUSINESS MODEL: LOW CAPITAL INTENSITY, FLEXIBLE RESOURCE ALLOCATION



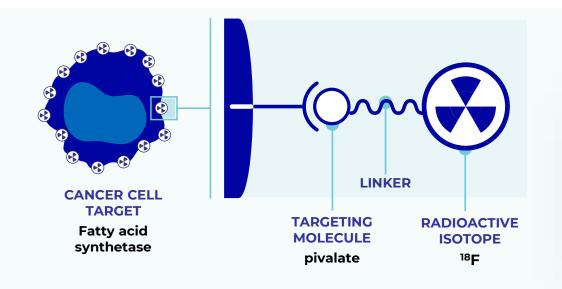
TRANSITION FROM PRECLINICAL TO CLINCAL STAGE COMPANY IN ONLY TWO YEARS

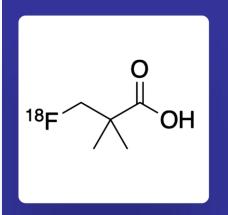


PORTFOLIO PRIORITIES – Two Imaging & Two Therapeutics

RAD CODE	MOLECULE & TARGET	INDICATION	ISOTOPE	PRECLINICAL PI	HASE I	PHASE IIA	PHASE IIB	PHASE III	NOTES
				IM	AGING				
RAD101	Pivalate (Fatty Acid Synthetase)	BRAIN METS	F18						Phase 2b first patient expected in Q4 IND approval after USA Tech transfer completion in Q4
RAD301	Trivehexin ($\alpha V \beta 6$ Integrin)	PANCREATIC	Ga68						ODD received May 2023 FDA IND received 9 patient Ph 1 trial: first patient expected in November, last patient by Dec 2023
				THE	RAPEUT	'IC			
RAD204	Sd mAb (PD-L1)	NSCLC	Lu177						Australian Ethics approval received 10/2023. First patient in Q4
RAD 202	Sd mAb (HER 2)	BREAST GASTRIC	Lu177						FDA IND submission in Q4, first patient in Q1 2024

RAD 101 Imaging: F18-PIVALATE





F18-PIVALATE

Selectively targets fatty acid synthetase which is overexpressed in tumours but not normal brain cells

BRAND VISION:

BECOME THE LEADING PET AGENT FOR IMAGING BRAIN METASTASIS

- 300,000 new patients every year in USA only
- MRI current standard of care, but has limitations in patient post surgery or post stereotactic radiation surgery (pseudo-progression)

RAD 101 Imaging: F18-PIVALATE

CLINICAL DEVELOPMENT & REGULATORY STRATEGY

- Ongoing Tech transfer from UK to USA. IND approval after Tech transfer finalized
- 21 months to complete late-stage development (Phase IIb + Phase III)
- ~30 months to anticipated NDA Approval and first commercial sales
- USD 364m peak yearly sales potential (Jones Group independent report)
- Only 1 expected competitor: Axumin (Bracco) currently in Phase III

PRECLINICAL	PHASE I	PHASE IIa	PHASE 2b	PHASE 3	APPROVAL & COMMERCIAL LAUNCH
	24 pts	17 pts	30 pts	150 pts	
$\sqrt{}$	V	√	Q4 – Q2 2024	Q3 2024 – Q2 2025	1H 2026

Pivalate Delivers Positive Phase II Data in Brain Metastasis Trial

RAD101 Phase IIa Clinical Trial: F18-pivalate PET/MRI Imaging

Patients with one or more cerebral metastases from different primary tumours of origin; breast, lung, melanoma & colorectal cancer

TRIAL ANALYSED:

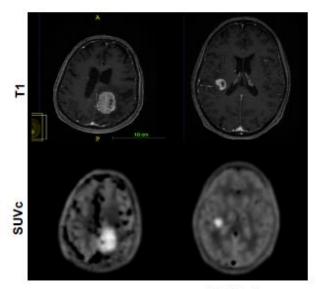
- Selective F18-pivalate uptake in cerebral metastases
- Impact of Stereotactic Radiosurgery (SRS)
 on F18-pivalate uptake at early time points
 (4-8 weeks)
- 2 cohorts of patients: 11 treatment naïve & 6 SRS treated (4-8 weeks post treatment)

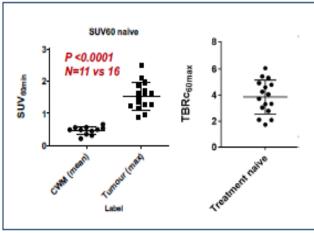
RESULTS

F18-pivalate PET showed high uptake regardless of origin of primary tumour

Indicates that pivalate can be used to detect & monitor cerebral metastases

- Patients without previous external beam radiation showed higher tumour uptake of radiopharmaceutical
- Previously treated patients show trend towards lower radiopharmaceutical uptake



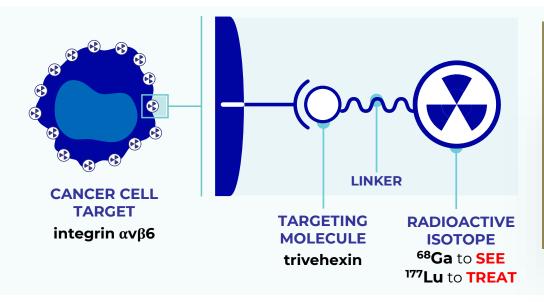


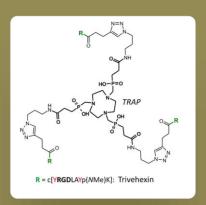
Pre Treat

Post Treat

The RAD101 Phase II results were presented at a Joint Meeting of the European Organisation for Research and Treatment of Cancer (EORTC), the (USA) National Cancer Institute (NCI), and the America Association for Cancer Research (AACR) in Barcelona, Spain, 26-28 Oct 2022

RAD 301 Imaging: Ga68-TRIVEHEXIN





TRIVEHEXIN

RGD peptide (arginylglycylaspartic acid)

Integrin $\alpha \vee \beta 6$ receptor antagonist

Marker for tumour invasion and metastatic growth

Expression correlates with decreased survival in numerous carcinomas

BRAND VISION: FIRST TO MARKET PET AGENT FOR IMAGING PANCREATIC CANCER

- High unmet need in detecting and monitoring pancreatic cancer
- Current standard of care (FDG & MRI) have significant limitations
- FDA IND approval received; Orphan drug Designation granted (5/2023)
- Multi-indication potential beyond PDAC (Head & Neck, NSCLC, TNBC, Colorectal)

RAD 301 Imaging: Ga68-TRIVEHEXIN

CLINICAL DEVELOPMENT & REGULATORY STRATEGY

- 66 patients already dosed under compassionate use (solid safety profile)
- 33 patients dosed under Pilot Study (presented at EANM 9/2023)
- IND approved Phase I start imminent, followed by registrational trial (leveraging RWE data)
- USD 240m peak yearly sales potential in PDAC only (Bell Potter independent report)
- Only 1 expected competitor: Integrin $\alpha \vee \beta 6$ $\alpha \vee \beta 1$ (UC Davis) currently in Phase I

COMPASSIONATE USE (Germany)	Pilot study in PDAC + H&N	PHASE I	PHASE II	PHASE III	APPROVAL & COMMERCIAL LAUNCH
66 pts	33pts	9 pts	30 pt	IS .	
	V	Fully recruited by Dec 2023	Apr 2024 – April 2025		1H 2026

RAD301 Clinical Development Began Under German Medical Drug Act, supported by European partner TRIMT

68Ga-trivehexin PET/MRI Imaging Patients with Pancreatic Tumours

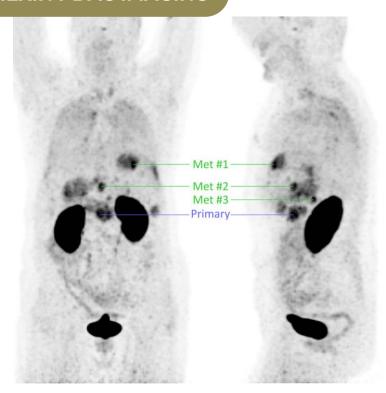
TRIAL ANALYSED:

- Selective detection of $\alpha\nu\beta6$ integrin-expressing tumour lesions in patients with PDAC
- 66 patients administered RAD301 (as of 2022)
 - 60 pancreatic cancer and GI tumours
 - 5 with head and neck cancer
 - 1 patient with tumour of unknown origin

Results Indicate that RAD301 can be used to detect and monitor pancreatic cancer

- Rapid and specific accumulation in many target PDAC primary lesions and metastases
- Low background accumulation and purely renal elimination

68Ga-TRIVEHEXIN PDAC IMAGING



from Quigley NG Notni J. Eur J Nucl Med 2021



RAD301 Clinical Development: Investigator Initiated Trial at Fortis Medical Center, supported by TRIMT

68Ga-trivehexin PET/CT Imaging vs F18-FDG

TRIAL ANALYSED:

- Selective detection of $\alpha \nu \beta 6$ integrin-expressing tumour lesions in patients with PDAC & HNSCC
- 33 patients administered RAD301

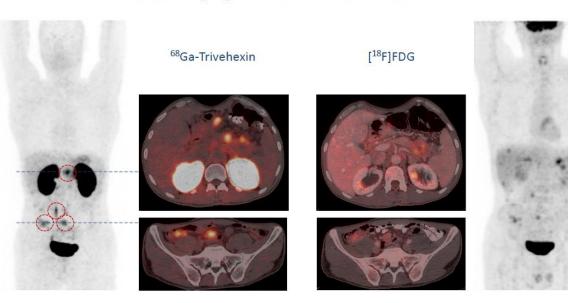
Data presented at World Theragnostic Congress 2022 (Wiesbaden, Germany) & follow up presented at EANM 9/2023 (Vienna)

Results Indicate that RAD301 shows incremental value over F18-FDG in PDAC & HNSCC

- Favorable tumour-to-background contrast vs F18-FDG
- Sharper images and practically no uptake in the surrounding normal tissue

68Ga-trivehexin PDAC imaging shows superior resolution vs F18-FDG

⁶⁸Ga-Trivehexin vs. [¹⁸F]FDG—Metastatic PDAC in the Pancreatic Tail



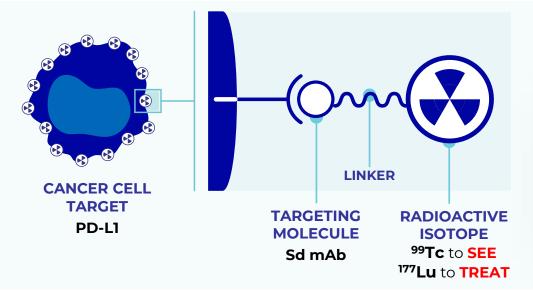
Images courtesy of Dr. Ishita Sen, Fortis Medical, New Delhi, India

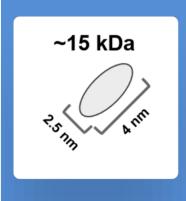


TWO IMAGING ASSETS: PROJECTED REVENUE OPPORTUNITIES

Cancer Type	New US Cases Per Annum	Eligible New Patients Per Annum	Price Per Dose	Revenue Opportunity Per Annum
<i>Imaging</i> Brain Metastasis	300,000 Source: SEER database US incidence	88,000	USD \$4,730 Source: Jones Group analyst rep	USD 364m
<i>Imaging</i> Pancreatic Cancer	124,000 Source: SEER database US incidence	99,000	USD \$5,000 Source: Bell Potter analyst report	USD 240m

RAD 204 Therapeutic: NANOMAB PD-L1





PD-L1 NANOMAB

Single domain monoclonal antibody (Sd mAb)

PD-L1 Immune Checkpoint Protein

Overexpression mediates evasion of immune responses by cancer cells

Blockade by antibodies leads to tumour regression

BRAND VISION:

FIRST TO MARKET CHECKPOINT INHIBITOR-RADIOPHARMACEUTICAL COMBINATION

- Lead Indication: non-small cell lung cancer
- 200,000 new patients every year in USA only
- ~70% patients refractory to Check Point Inhibitors regimen

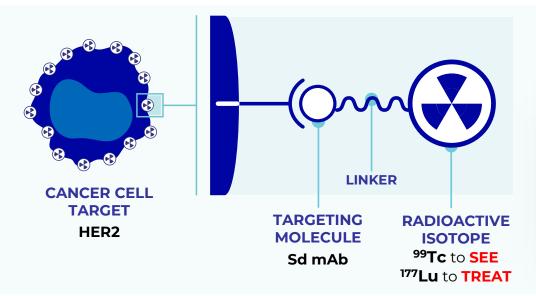
RAD 204 Therapeutic: NANOMAB PD-L1

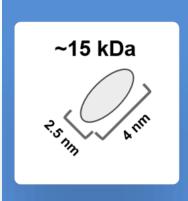
CLINICAL DEVELOPMENT & REGULATORY STRATEGY

- Human pharmacokinetic and Biodistribution proven with Imaging agent (positive Phase I in 16pts in 2019
- Strategic Collaboration with Lantheus for the PDL-1 Imaging agent
- Phase I therapeutic dose escalation in Australia (approval to start received in October)
- Phase II combo therapy trial with checkpoint inhibitor
- Blockbuster sales potential (Company assessment ongoing)
- No other PDL1 radiopharmaceuticals in preclinical or clinical development

PRECLINICAL	Imaging PHASE I	Therapeutic PHASE I	PHASE II
	16pts	27 pts	50 pts
V	√	Q4 2023- Q1 2025	Q3 2025 – Q3 2027

RAD 202 Therapeutic: NANOMAB HER-2





HER 2 NANOMAB

Single domain monoclonal antibody (Sd mAb)

HER 2 pathway proven in Oncology

Overexpression in Breast Cancer and
Gastroesophageal cancers

BRAND VISION:

BREAST & GASTRIC HER2+ THERAPY FOR PATIENTS REFRACTORY to TRASTUZUMAB / DERUXTECAN

- 47,000 new patients every year in USA only
- Suboptimal toxicity profile ADCs (2nd line metastatic cancer) opens opportunity for new agents

RAD 202 Therapeutic: NANOMAB HER-2

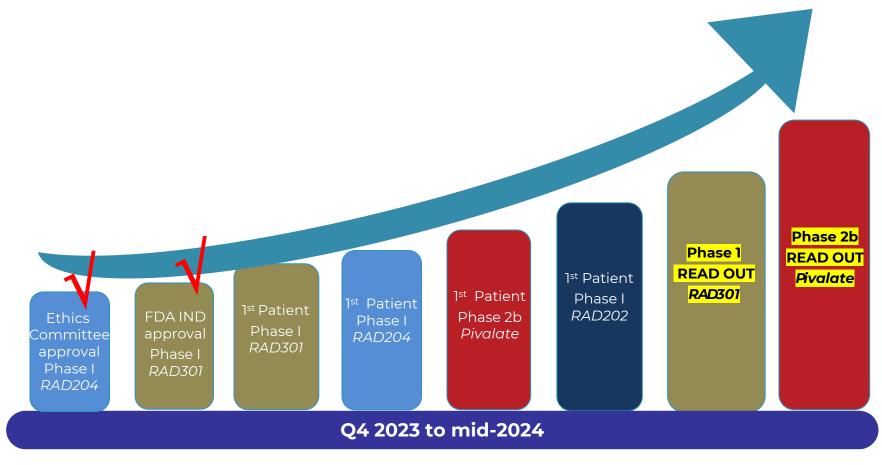
CLINICAL DEVELOPMENT & REGULATORY STRATEGY

- Human pharmacokinetic and Biodistribution proven with Imaging agent (positive Phase I in 10pts in 2021, follow by IIT in Germany in additional 6 pts.
- Phase I therapeutic dose escalation in USA (approval to start expected in Q4) in Breast / Gastric Cancers
- Phase II therapy trial in the Breast or Gastric (depending on Phase I data)
- Blockbuster sales potential (Company assessment ongoing)
- Only 1 competitor (Precirix private company) currently in Phase I

PRECLINICAL	Imaging PHASE I	Therapeutic IND Approval	PHASE I	PHASE II
	10pts + IIT in 6pts		21 pts	50 pts
V	√	Q4 2023	Q1 2024 – Q3 2025	Q4 2025 – Q4 2027

TRANSITION FROM PRECLINICAL TO CLINICAL STAGE COMPANY WITH 4 MOLECULES - 2 READ OUTS BY MID 2024 -

RAD CODE	MOLECULE & INDICATION TARGET		ISOTOPE
RADI01	Pivalate (Fatty Acid Synthetase)	BRAIN METS	F18
RAD301	Trivehexin (α <i>Vβ6</i> Integrin)	PANCREATIC	Ga68
RAD204	Sd mAb (PD-L1)	NSCLC	Lu177
RAD 202	Sd mAb (HER 2)	BREAST GASTRIC	Lu177



INFLECTION POINTS

BACK UP

SUMMARY

FOUR PRIORITY ASSETS LEADING THE ONGOING COMPANY TRANSFORMATION TO CLINICAL STAGE COMPANY

ISOTOPE <u>SUPPLY CHAIN SECURED</u> WITH MULTIPLE CONTRACTS SIGNED FOR Lu177, Ac225, Tb161

ACHIEVEMENT OF MULTIPLE INFLECTION POINTS:

RAD 101 Phase 2b read out

RAD 301 Phase 1 read out

RAD 204 Phase 1 At ~50% recruitment

RAD 202 Phase 1 at ~33% recruitment

KEY MANAGEMENT TEAM



Paul Hopper
Executive Chairman

- Founder of Radiopharm Theranostics LTD.
- 25 years experience as a life-sciences entrepreneur
- Founder, Chairman, nonexecutive director or CEO of more than fifteen companies in the US, Australia and Asia
- Previous and current Boards include Imugene, Chimeric Therapeutics, Viralytics, Prescient Therapeutics, Polynoma and Arovella Therapeutics



Riccardo Canevari
Chief Executive Officer

- Radiopharm Theranostics CEO since September 2021
- Previously, Chief Commercial Officer of Novartis Company Advanced Accelerator Applications S.A.
- Lead for Lutathera inmarket growth strategy & Pluvicto launch strategy
- Senior Vice President & Global Head, Breast Cancer Franchise, for Novartis Oncology since 2017



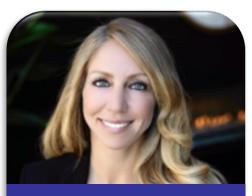
Vittorio Puppo Chief Operating Officer

- Has served as Chief Operating Officer since June 2022.
- Previously, Chief Marketing Officer at Bracco Imaging, a world leader in diagnostics
- Managed businesses in Europe and Asia for Accuray, Covidien, Mallinckrodt and Amersham
- Board member of Life Sciences Capital



Dr. Antje Wegener VP, Clinical Development

- Served in the role since March 2022.
- Previously, Senior
 Development Medical
 Director at AAA / Novartis
- Global Clinical Program Leader at Advanced Accelerator Applications.
- Global Head of Development at Nanobiotix, International Project Director at Servier and Global Clinical Lead at Novartis



Dr. Sherin Al-Safadi VP, Medical Affairs

- Served in the role since Aug 2023.
- Previously, VP Medical Affairs at Point Biopharma
- Lead Strategic & Tactical planning radiopharmaceutical Phase III programs
- Global Director, Medical Affairs at Bayer

GLOWING RADIOPHARMA DEAL SPACE (2018 TO PRESENT) HIGHLIGHTS GROWING STRATEGIC AND INVESTOR INTEREST

Selected Recent Strategic Agreements

- POINT/LLY ('23) \$1.4B acquisition
- Roche/Genentech/PeptiDream ('23) \$40MM upfront (PD)
- Bayer/Bicycle ('23) \$45MM upfront (product)
- Bicycle/Novartis ('23) \$50MM upfront (PD)
- Actinium/Immedica ('22) \$35MM upfront/commercial
- Lantheus/POINT ('22) \$260MM upfront (product)

Selected Recent Financing Deals

- RayzeBio IPO nets \$269.8MM IPO ('23)
- Mariana Oncology nets \$175MM Series B ('23)
- ITM nets €255M financing ('23)
- POINT Biopharma nets \$117.6MM Public Offering ('22)
- Curie Therapeutics raises \$75MM Series A ('21)
- Ablaze Pharmaceuticals raises \$75MM Series A ('21)

Public companies: 14, \$12B combined Cap

Private Companies: 25+, \$5.4B combined Cap

40+ public financings raised >\$3.5B

100+ Acquisitions or Alliances
Provided \$37B in Payments

