



AGM Presentation

James Bonnar
Managing Director and CEO

12 November 2025 | Sydney, Australia

Improving Lives, Offering Hope

ASX:NYR

Authorised by Mr. John Moore, Non-Executive Chair,
on behalf of the Board.



Important Notice and Disclaimer



This presentation has been prepared by Nyrada Inc (**"NYR"** or **"Company"**). It should not be considered as an offer or invitation to subscribe for, or purchase any securities in NYR, or as an inducement to purchase any securities in NYR. No agreement to subscribe for securities in NYR will be entered into on the basis of this presentation or any information, opinions or conclusions expressed in the course of this presentation.

This presentation is not a prospectus, product disclosure document, or other offering document under Australian law or under the law of any other jurisdiction. In particular, this presentation may not be released to US wire services or distributed in the United States.

This presentation does not constitute an offer to sell, or a solicitation of an offer to buy, securities in the United States or to, or for the account or benefit of, US persons. The Company's CDIs have not been, and will not be, registered under the US Securities Act or the securities laws of any state or other jurisdiction of the United States. The CDIs may not be offered, sold or otherwise transferred in the United States except in a transaction exempt from, or not subject to, the registration requirements of the US Securities Act of 1933 and the applicable securities laws of any state or other jurisdiction in the United States. No person in the United States may, directly or indirectly, participate in the Company's Security Purchase Plan.

It has been prepared for information purposes only. This presentation contains general summary information and does not take into account the investment objectives, financial situation and particular needs of an individual investor. It is not a financial product advice, and the Company is not licensed to, and does not provide, financial advice.

This presentation may contain forward-looking statements which are identified by words such as 'may', 'could', 'believes', 'estimates', 'targets', 'expects', or 'intends' and other similar words that involve risks and uncertainties. These statements are based on an assessment of past and present economic and operating conditions, and on a number of assumptions regarding future events and actions that, as at the date of this presentation, are expected to take place.

Such forward-looking statements do not guarantee of future performance and involve known and unknown risks, uncertainties, assumptions and other important factors many of which are beyond the control of the Company, its Directors and management.

Although the Company believes that the expectations reflected in the forward-looking statements are reasonable, none of the Company, its Directors or officers can give, or gives, any assurance that the results, performance or achievements expressed or implied by the forward-looking statements contained in this document will actually occur or that the assumptions on which those statements are based are exhaustive or will prove to be correct beyond the date of its making.

Readers are cautioned not to place undue reliance on these forward-looking statements. Except to the extent required by law, the Company has no intention to update or revise forward-looking statements, or to publish prospective financial information in the future, regardless of whether new information, future events or any other factors affect the information contained in this presentation.

Readers should make their own independent assessment of the information and take their own independent professional advice in relation to the information and any proposed action to be taken on the basis of the information. To the maximum extent permitted by law, the Company and its professional advisors and their related bodies corporate, affiliates and each of their respective directors, officers, management, employees, advisers and agents and any other person involved in the preparation of this presentation disclaim all liability and responsibility (including without limitation and liability arising from fault or negligence) for any direct or indirect loss or damage which may arise or be suffered through use of or reliance on anything contained in, or omitted from, this presentation. Neither the Company nor its advisors have any responsibility or obligation to update this presentation or inform the reader of any matter arising or coming to their notice after the date of this presentation document which may affect any matter referred to in the presentation.

Nyrada Overview

- › Clinical-stage biotech company developing TRPC ion channel inhibitors to treat a range of medical conditions
- › Lead drug candidate – Xolatryp (formerly NYR-BI03).
 - › Potent 3rd generation TRPC 3, 6 and 7 channel inhibitor
 - › Novel and well-understood mechanism of action
 - › Solid scientific foundation
 - › Preclinical efficacy across multiple therapeutic areas
- › Progressing Clinical Development
 - › Phase I completed (safety, tolerability, PK)
 - › Progressing into Phase IIa - acute myocardial infarction targeting ischemia reperfusion injury



Company Snapshot

Company Structure

ASX:NYR Overview at 6 November 2025

CDIs on Issue (m)	239.5
Share Price at close 5 Nov. 2025 (AU\$)	\$0.90
Market Capitalisation (AU\$m)	\$215.5
Options and Performance Rights (m)*	49.4
Board and Staff Holding (%)	10.3

* Excludes options to be considered at 12 November 2025 Annual General Meeting

Leadership

Nyrada Leadership

Non-Executive Chair	Mr. John Moore
Managing Director and Chief Executive Officer	Mr. James Bonnar
Chief Scientific Officer	Dr. Benny Evison
Chief Financial Officer	Mr. Cameron Jones
Scientific Advisory Board Chair	Prof. Garry Housley

Share Register – 6 November 25

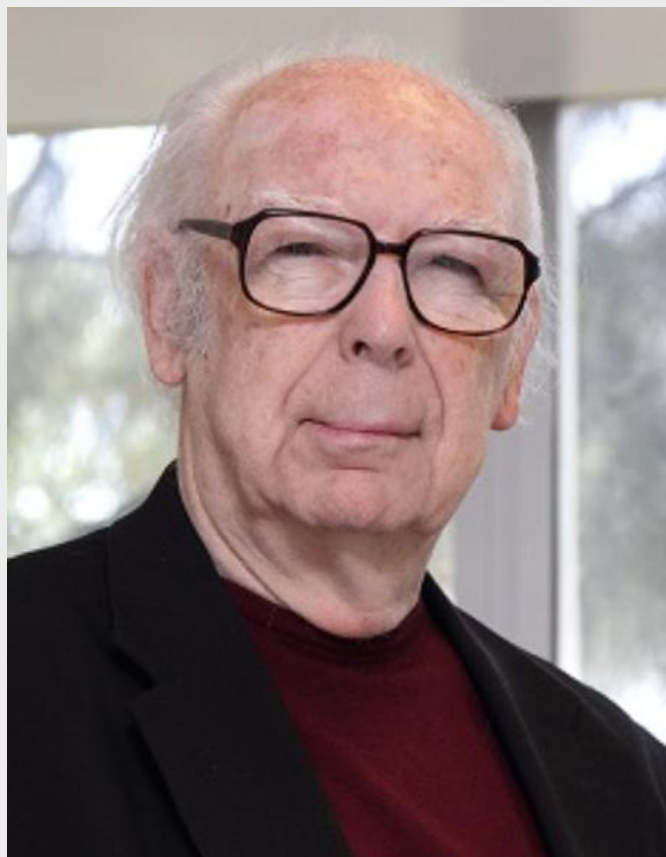
Position	Holder Name	Holding	% IC
1	MR MARK AZZI	39,666,809	16.56%
2	MATT CORP WA PTY LTD	11,408,580	4.76%
3	ALTNIA HOLDINGS PTY LTD	9,921,725	4.14%
4	KYRIACO BARBER PTY LTD	7,503,106	3.13%
5	MR JOHN MOORE	7,072,756	2.95%
6	CELTIC FINANCE CORP PTY LTD	4,700,000	1.96%
7	HARLUND INVESTMENTS PTY LTD	4,150,000	1.73%
8	CELTIC CAPITAL PTE LTD	4,000,000	1.67%
9	CITICORP NOMINEES PTY LIMITED	3,592,561	1.50%
10	MS ROCHELLE SEMAAN	3,109,684	1.30%
Total		95,125,221	39.72%
Total issued capital - selected security class(es)		239,497,037	100.00%

Price Chart



Origins of TRPC Channel Inhibition

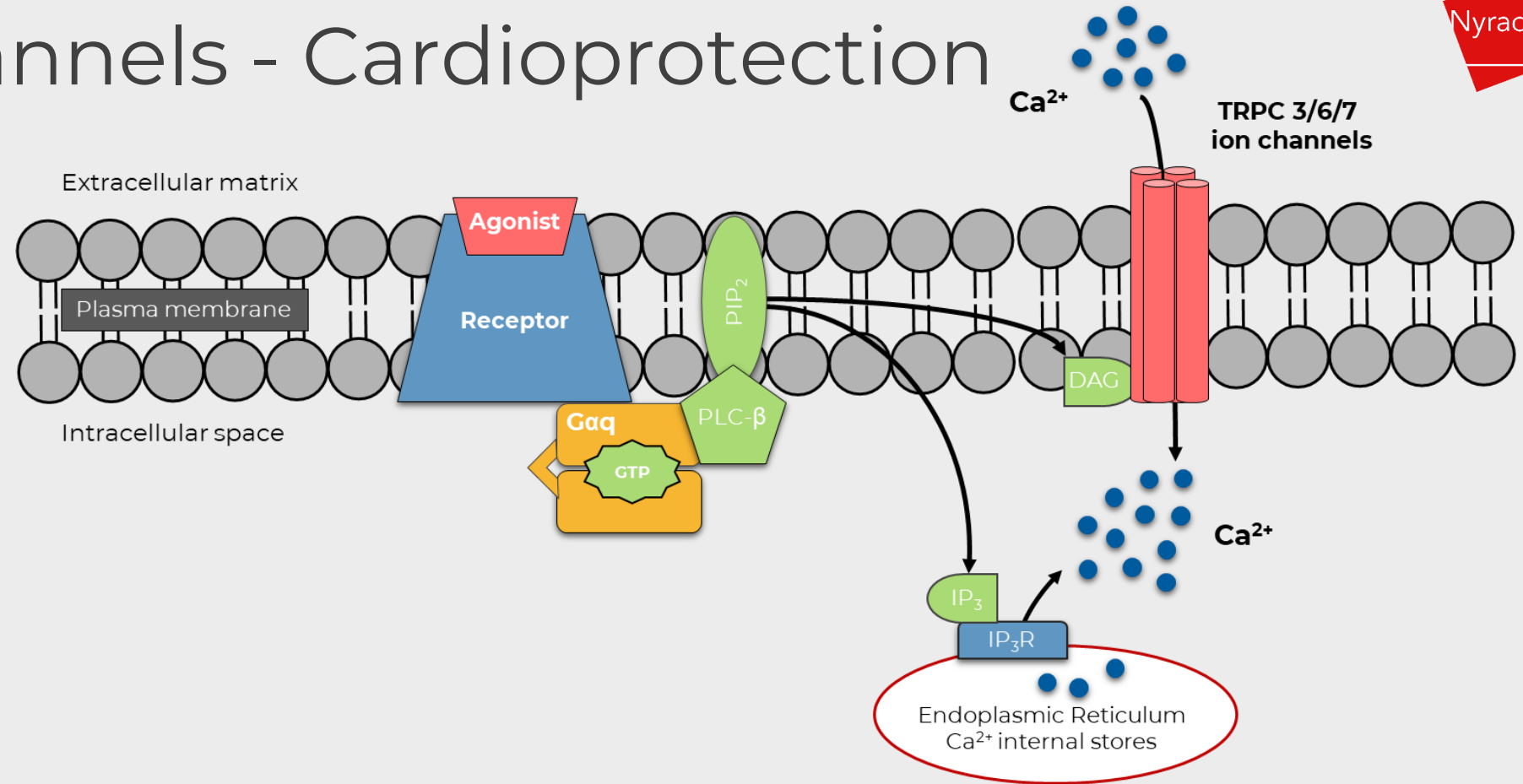
Lutz Birnbaumer



Birnbaumer's Mice



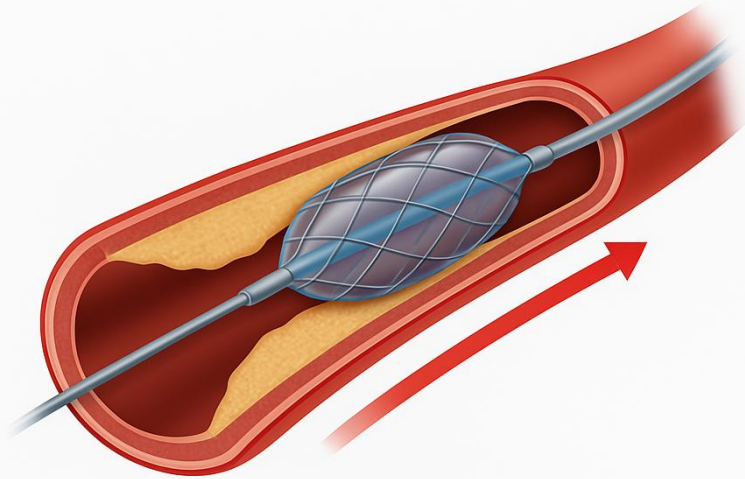
TRPC Channels - Cardioprotection



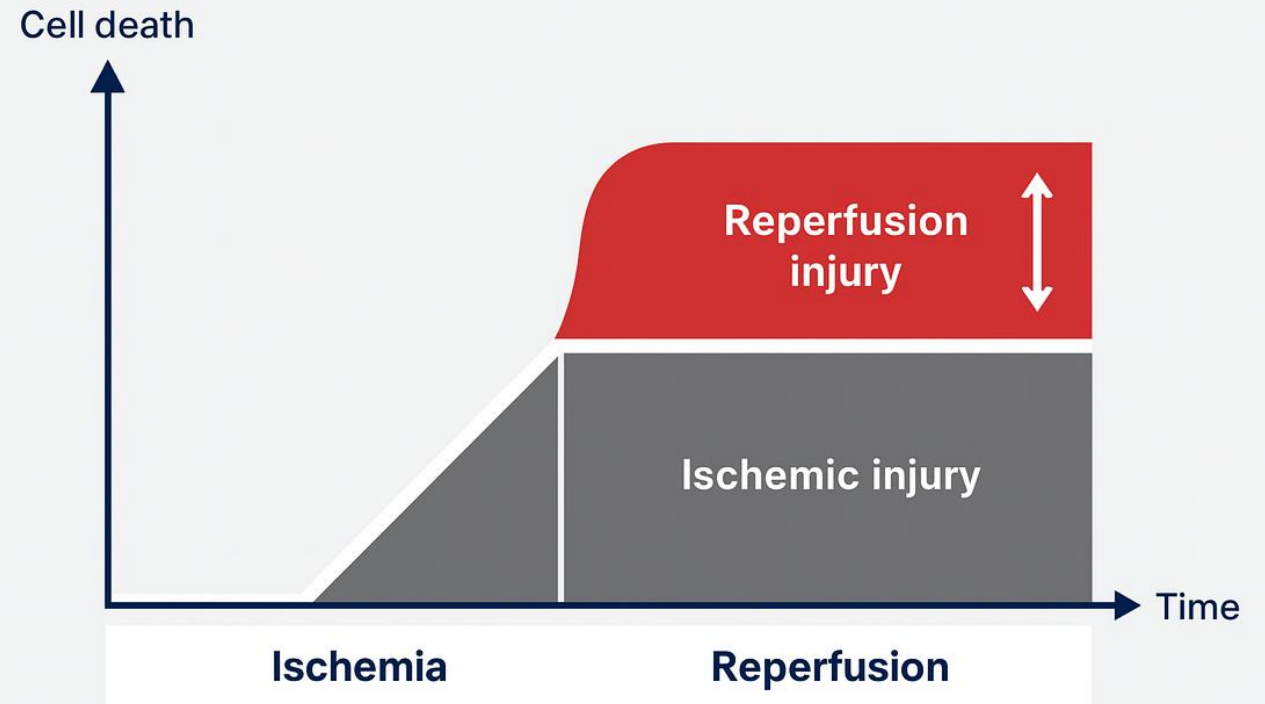
Cell Type	TRPC Activation Effect	Xolatryp Inhibition Effect
Cardiomyocytes	Calcium overload → cell death	Prevents damage, preserves function and contractility
Endothelial	Impaired repair → poor blood flow	Enhances vessel repair, reduces inflammation
Fibroblasts	Excessive scarring → stiff heart	Limits scarring, preserves flexibility

Ischemia Reperfusion – Last Cardiac Frontier

Coronary PCI (angioplasty)



Blood flow restoration



PCI (Balloon Angioplasty):

- First procedure in 1977, stents in 1994,
- Standard of care for STEMI by early 2000s

Large Market Opportunity – Myocardial Ischemia Reperfusion Injury

Globally:

~15-20 million
people suffer heart
attack annually

~15%
mortality within 30
days

No current FDA approved treatments

Effective treatment will improve patient outcomes and reduce high costs associated with long-term care of brain injury survivors.

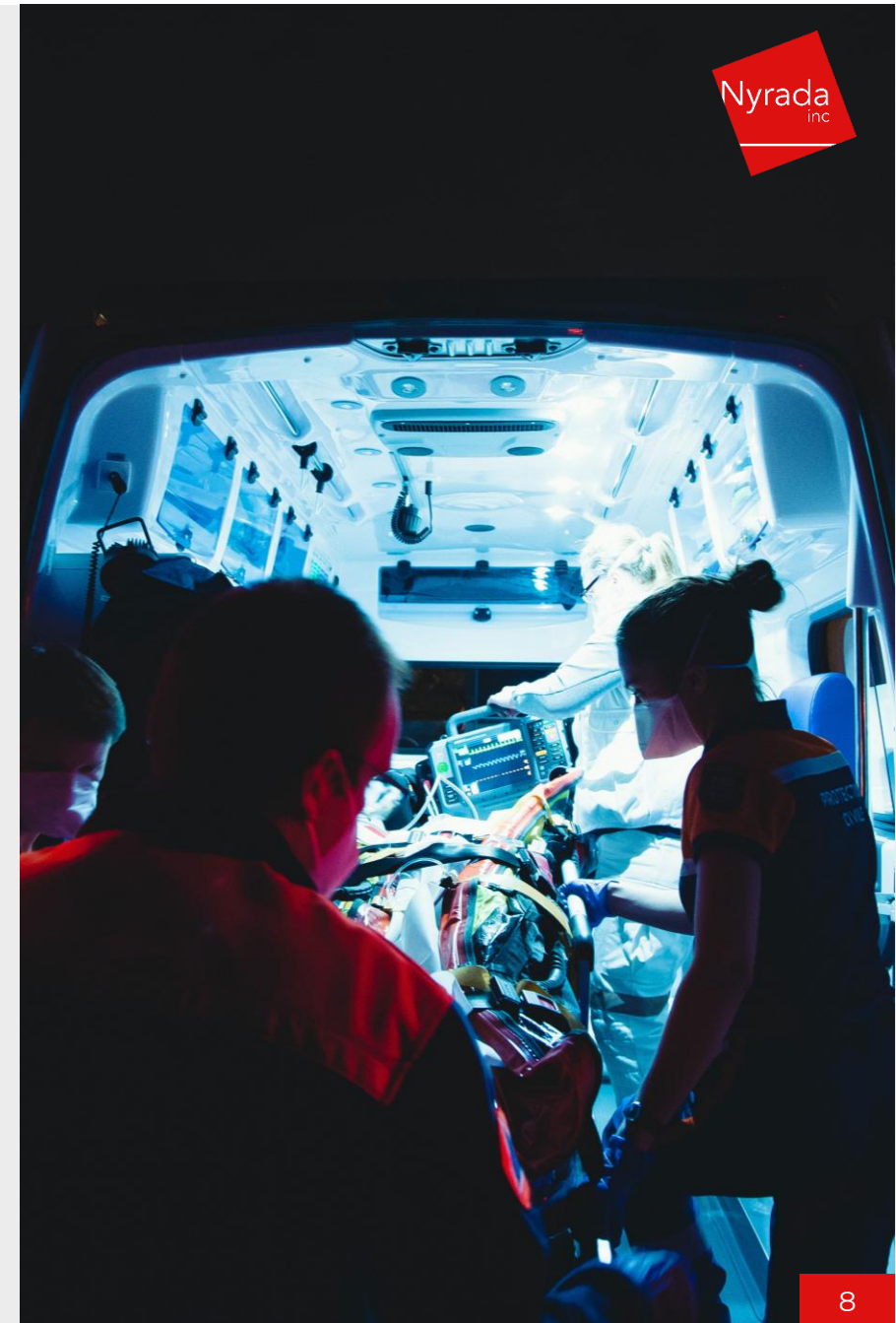
Large and growing treatment market*:

Currently
~US\$1.7 billion

Growing
~7.7% CAGR

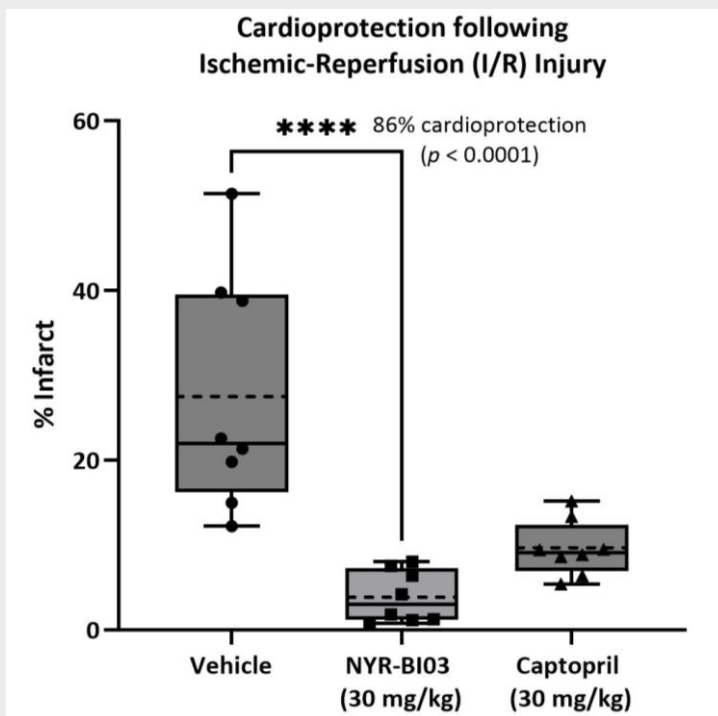
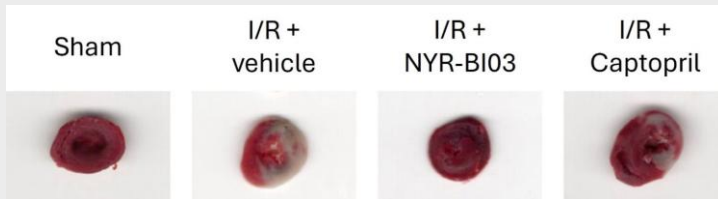
Forecast
**~US\$2.3 billion by
2029**

* Research and Markets - www.researchandmarkets.com/reports/6089883/ischemia-reperfusion-injury-market-report



Preclinical Study 1

Key Preclinical Results:



Xolatryp showed strong efficacy limiting cardiovascular damage resulting from myocardial ischemia-reperfusion (IR) injury

- **86%** Cardioprotection
- **43%** increase in left ventricular ejection fraction
- **50%** increase in fractional shortening

Key blood biomarker markers assessed

- **42%** decrease in AST levels
- **45%** decrease in LDH levels
- **32%** decrease in Troponin I

Superior efficacy compared to FDA-approved, Captopril



Preclinical Study 2

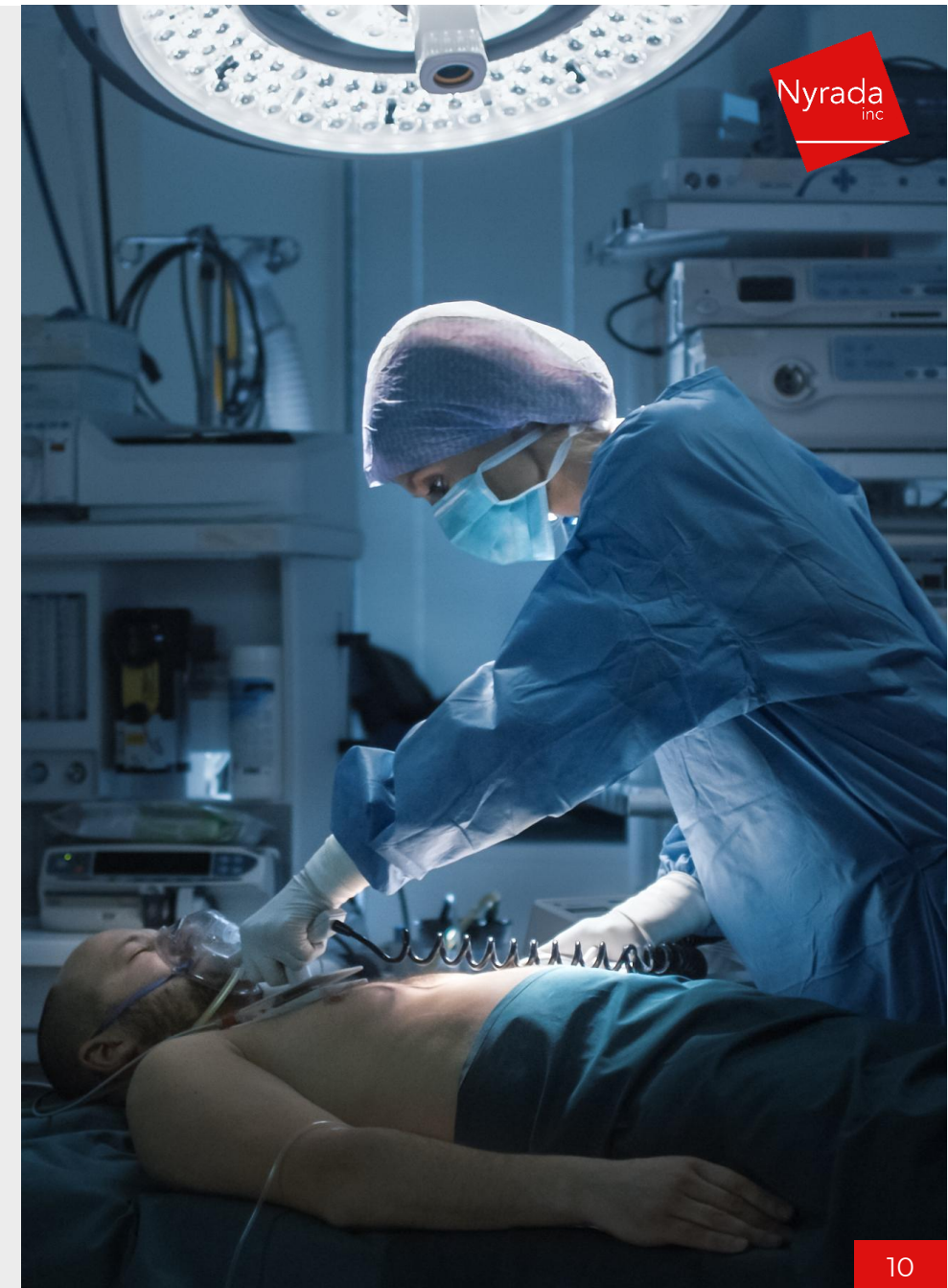
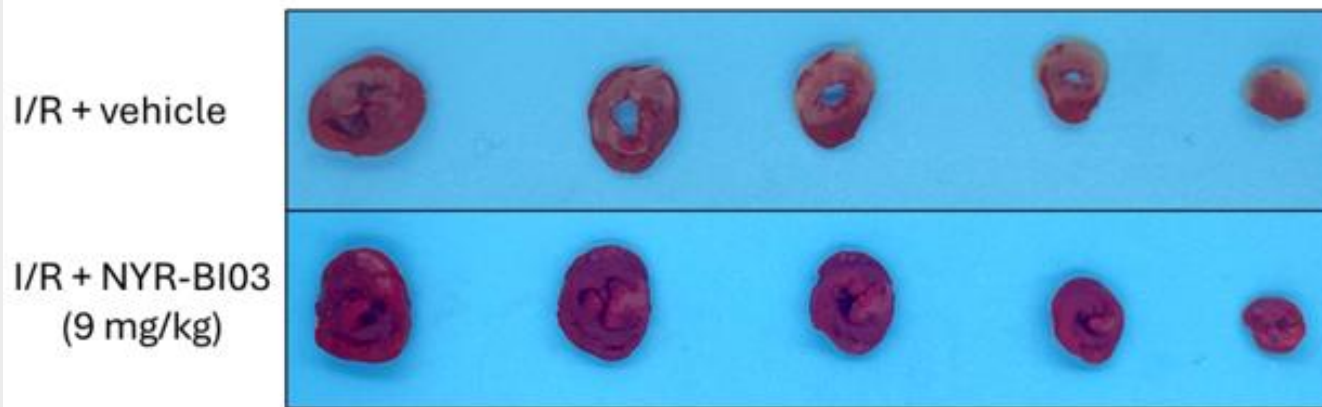
Key Preclinical Results:

Xolatryp showed strong efficacy limiting cardiovascular damage resulting from myocardial ischemia-reperfusion injury when administered as a short-duration intravenous infusion

- **42%** Cardioprotection
- **88%** decrease in arrhythmias at 1 hour
- **90%** decrease in arrhythmias at 3 hours

Key blood biomarker markers assessed

- **32%** decrease in Troponin I
- **21%** decrease in ALT levels

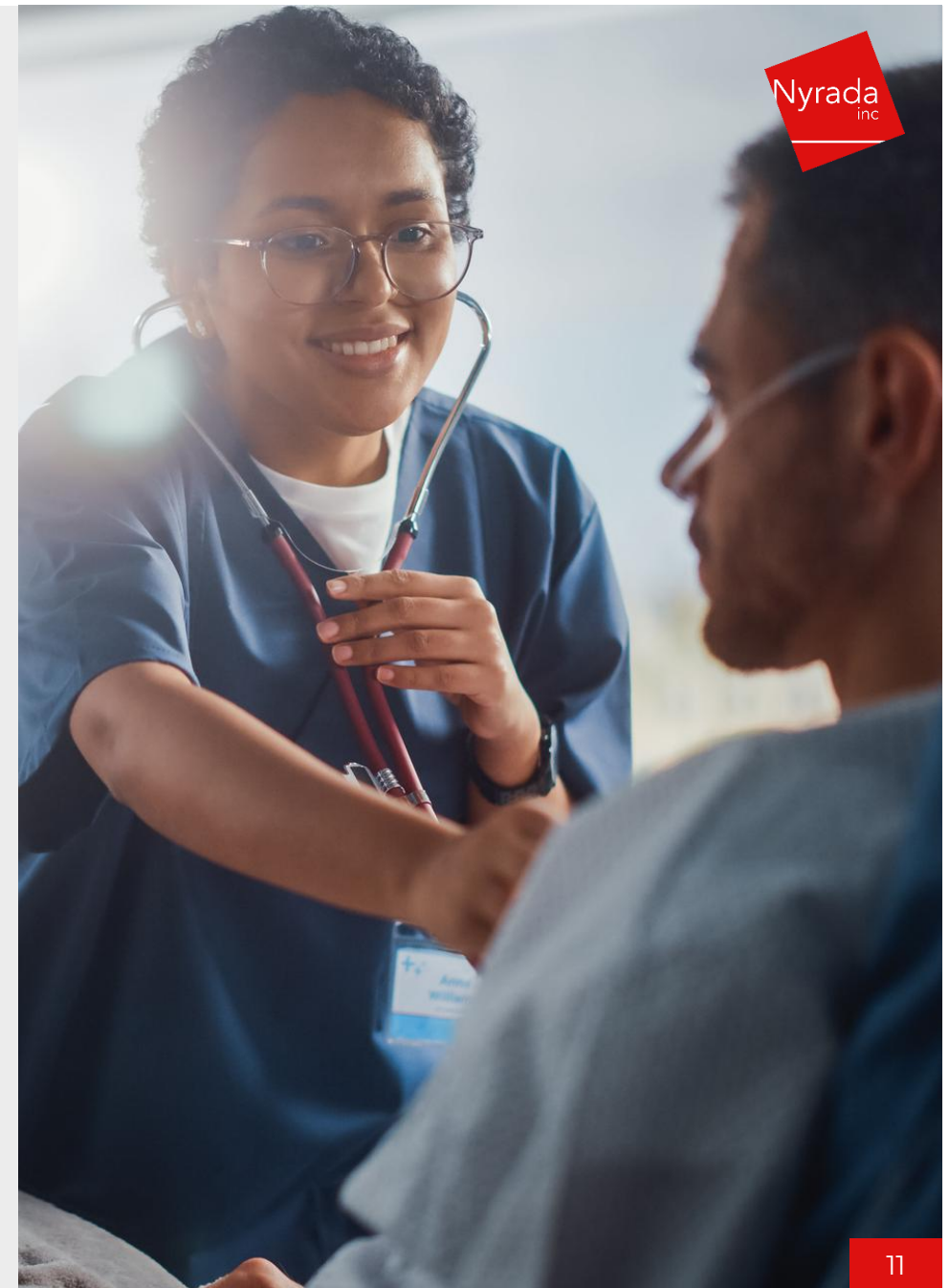
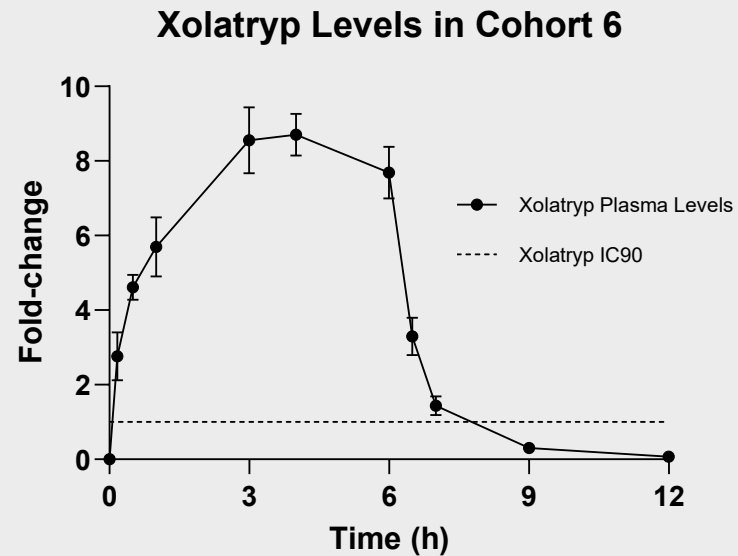


Phase I Clinical Trial

Key Results:

Xolatryp met its Primary Endpoint with all doses safe and well tolerated, with no dose-limiting, or dose-related safety issues.

- **48 healthy participants** (36 received drug, 12 received placebo).
- **Nil SAEs**
- **10 AEs**
 - All mild or moderate
 - 5 *not related* to Xolatryp, 1 *unlikely related* to Xolatryp.
 - Most frequently reported AE was headache.
- **Pharmacokinetics**
predictable with linear blood concentrations over time.
- **10 minutes** to reach therapeutic levels



Phase IIa Clinical Trial

Key Features:

Xolatryp to be assessed for safety and preliminary efficacy in patients with ST-Elevation Myocardial Infarction (STEMI) who undergo primary Percutaneous Coronary Intervention (PCI)

Primary End Point – Safety

Further End Points – Exploratory efficacy potentially including:

- Cardiac function
- Cardiac injury size
- Biomarkers including Troponin I levels
- Incidence of arrhythmias of interest

Scope (subject to change)

- 200 patients (up to approximately; placebo and drug – 1:1)
- 9 to 18 months (indicative)
- 6 sites (initially)

Key operational risk – recruitment rate impacting duration and number of sites



R&D Activities

Evolving Pipeline:

Xolatryp demonstrated preclinical efficacy:

- Myocardial ischemia reperfusion injury
- Ischemic stroke
- Moderate to severe TBI

Literature suggests **Xolatryp** may have efficacy in:

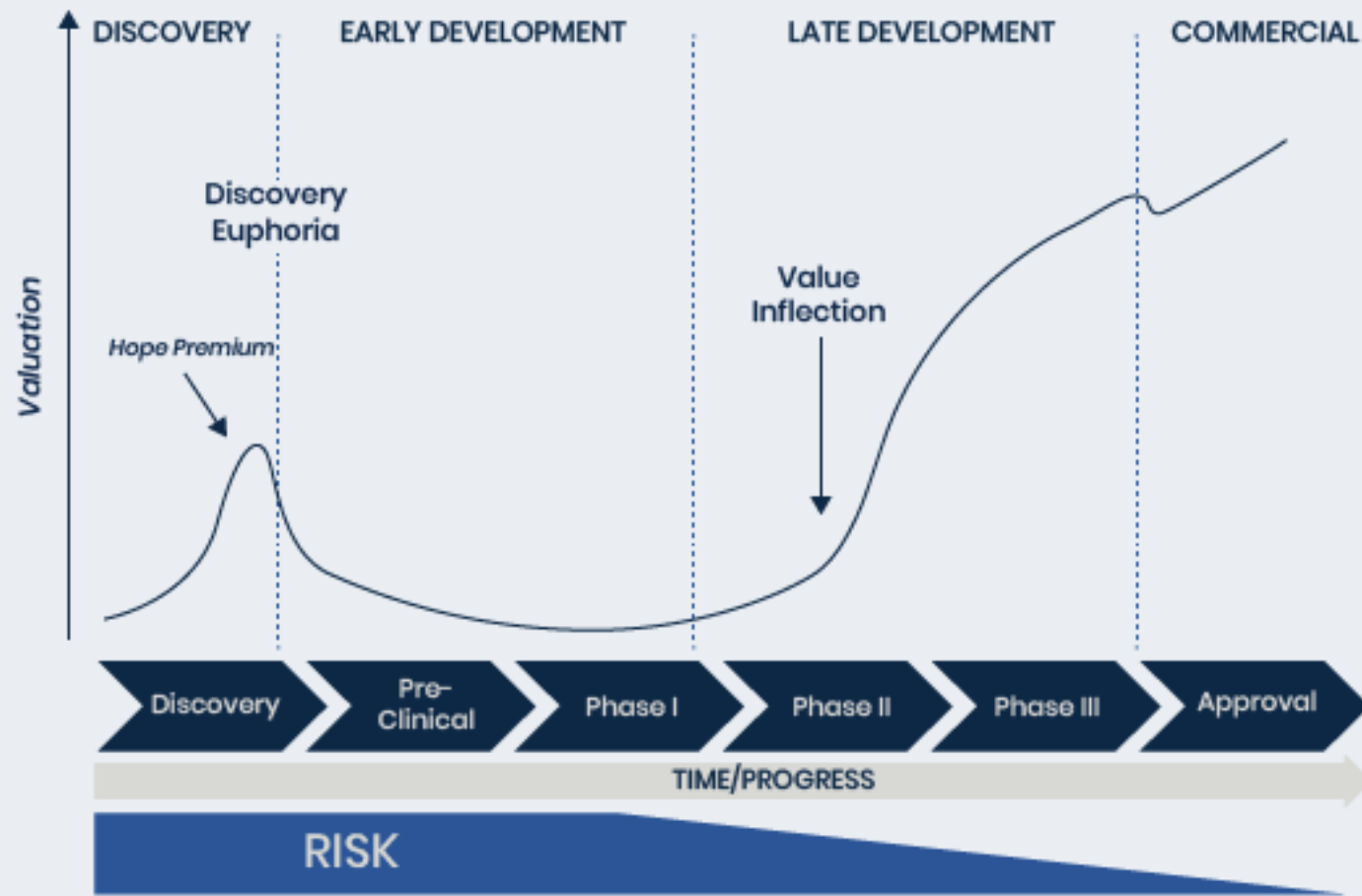
- Protection from cardiotoxicity (induced by anti-cancer drugs)
- Oncology
- Ischemic reperfusion injury – other organs
- Cardiac hypertrophy and fibrosis
- Pain management
- Epilepsy

Xolatryp formulation:

- Current delivery is via intravenous infusion
- Work planned for an oral dose form



Poised for Value Inflection



Source: Karst Peak Rx - www.kp-rx.com



Financial Overview and Outlook



FY2025 Highlights and FY2026 Outlook

› Resources

- › Cash balance of AU\$7.92 million at 30 September 2025
- › Expected R&D rebate of AU\$2.16 million (subject to Government Agency Review)
- › AU\$8.25 million (before costs) in new equity capital raised in August 2025.

› Programs

- › Progressing Xolatryp into Phase IIa clinical trial
 - › Targeted HREC submission November 2025
 - › Targeted first patient dosing March 2026

Operating Results Summary

	FY2025 (AU\$)	FY2024 (AU\$)
R&D Costs	4,376,215	2,030,502
Corporate and admin expenses	1,061,480	577,842
Share-based payment expense	177,218	358,074
Professional services expense	381,618	477,948
Employment benefits expense	1,225,077	1,127,500

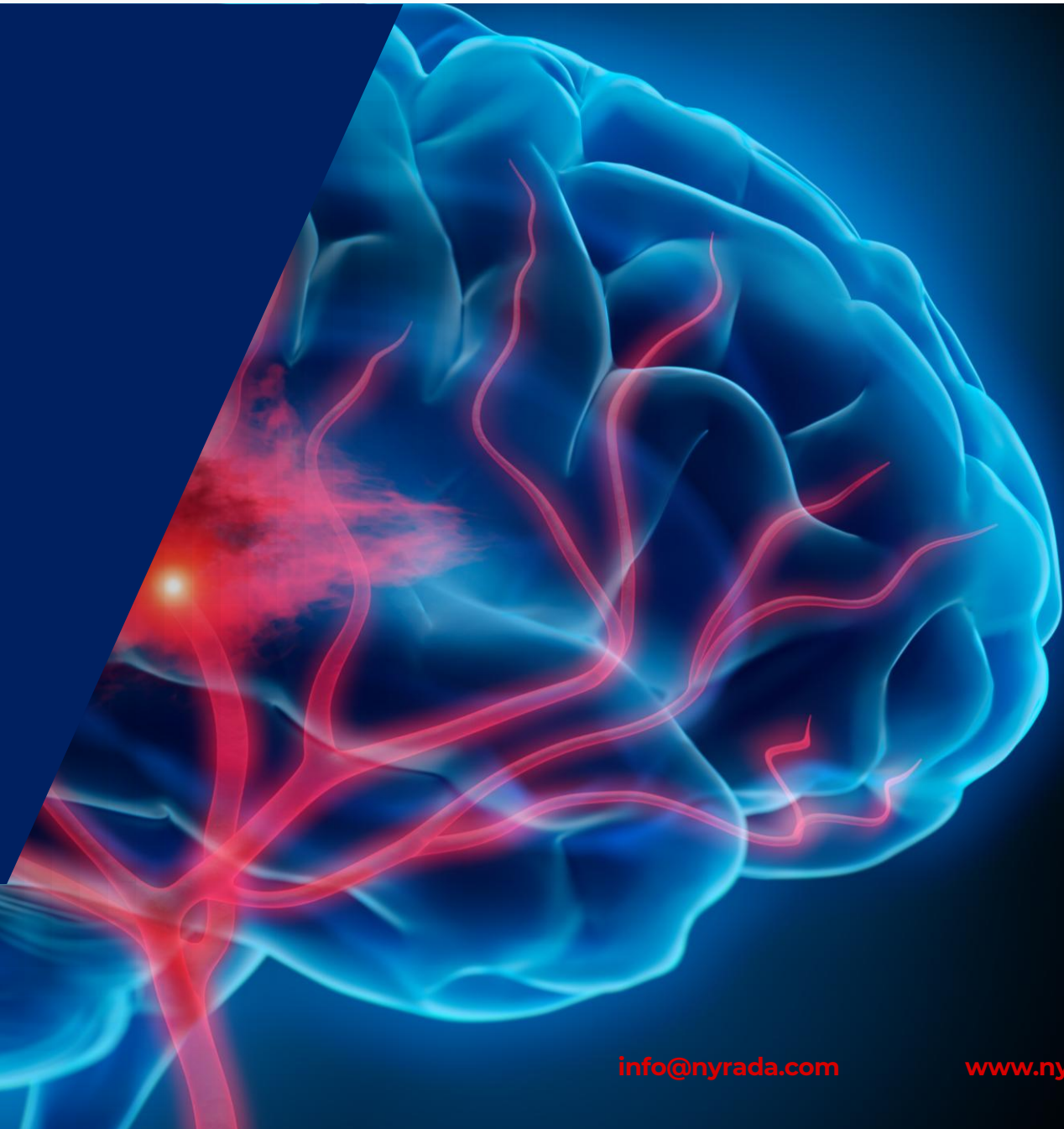
Conclusion

› **Nyrada – the company**

- › Pioneering TRPC channel inhibition therapies to treat a range of medical conditions
- › AU\$7.92 million cash position at end Sep 2025
- › AU\$8.25 million capital raised in Aug 2025
- › AU\$2.16 million R&D rebated expected in Dec 2025

› **Xolatryp – the lead drug asset**

- › Solid scientific foundations and well understood mechanism of action
- › Composition of matter patent pending
- › Preclinical efficacy demonstrated in AMI, ischemic stroke, and traumatic brain injury (TBI)
- › Phase I (safety, tolerability, PK) clinical trial completed
- › Phase IIa (safety and efficacy) clinical trial pending



@nyrada_inc



@nyrada_inc

info@nyrada.com

www.nyrada.com