ZENITH EPIGENETICS

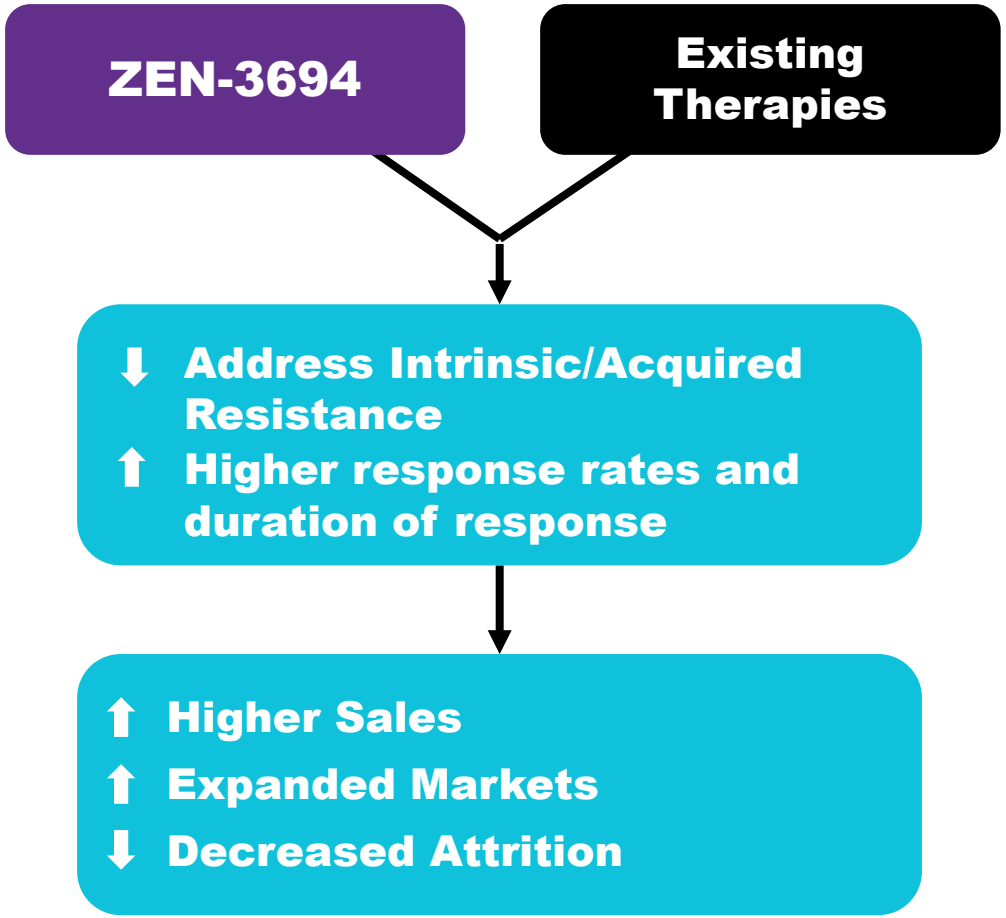
AGM Corporate Strategy

Saving Lives On The Way To Value Creation

October 26, 2023

ZEN-3694: Market Positioning Strategy

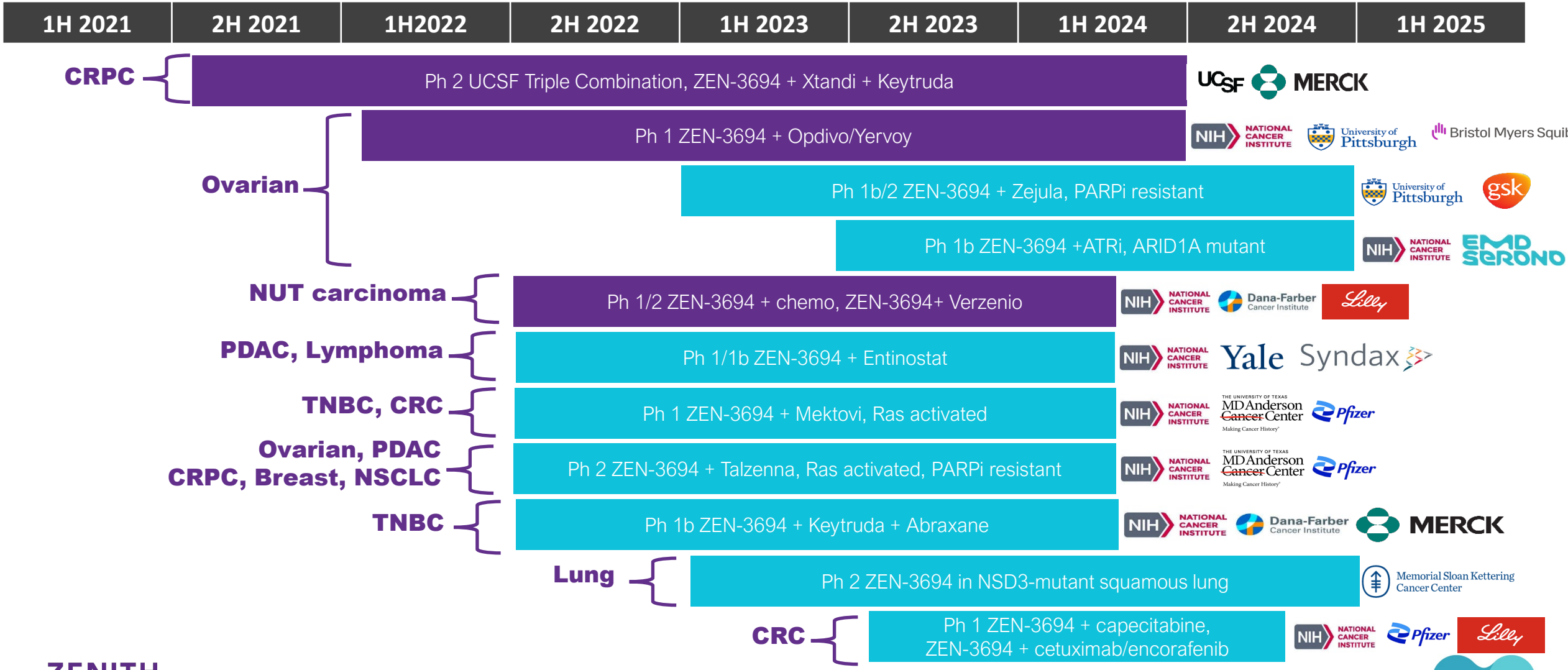
Combinations with Existing Therapies to Address Unmet Need in High-value Markets



Indications	
mCRPC (ARSi Combo)	$9.4B mCRPC market by 2027. Dominated by androgen receptor signaling inhibitors (ARSi) (Xtandi, Zytiga, Erleada)
CRPC/Pancreatic/Ovarian (PARPi Combo)	Tumors resistant to PARPi, RAS mutated tumors PARPi market expected to reach $8.4B sales by 2026
PD-1 mAb Resistant Tumors (Checkpoint Inhibitor Combo)	$40B market for checkpoint inhibitors by 2025, Develop ZEN-3694 in PD-1 mAb resistant tumors
Ras Activated Tumors (MEKi Combo)	RAS activated tumors that can't be treated by Amgen's/Mirati's RASi (multibillion $ market). Combination with MEKi
Other Solid Tumors (Multiple Combos)	CDK4/6 inhibitors in breast cancer, HDACi in pancreatic cancer
Ultra Orphan Indications (Multiple Combos)	No standard of care in NUT carcinoma - BRD4 driven, Proof of concept shown by BETi

Multiple Shots on Goal: Investigator Sponsored and National Cancer Institute Trials

Advance to Registration Enabling Studies in Multiple Additional Indications and Combinations Upon Proof-of-Concept



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Program Overview

mCRPC

Metastatic Castration Resistant Prostate Cancer

Stage:

Phase 2b

Combination(s):

Xtandi
(Astellas/Pfizer)

Partner(s):

Astellas
&
Newsoara

Target Population: Androgen receptor (AR) independent mCRPC patients

Standard of Care: Symptomatic, ARSi non responders, or aggressive disease patients are treated with cytotoxic therapies

Product Profile: ZEN-3694 + Enzalutamide, with its well-tolerated safety profile, is positioned for patients not expected to respond to a second ARSi (AR independent disease) and who are not candidates for cytotoxic therapy

Parameter	Value
Total Market Size	>40,000 (1^{st} + 2^{nd} Line) (AR independent)
Est. Market Entry	2027
Upcoming Milestones:	Phase 2b data readout and Phase 3 startup

Metastatic Prostate Cancer (mCRPC) Program Overview

Phase 2a Completed and Phase 2b Randomized Study Initiated

Ph 1 completed:
(ZEN-3694 single agent)
(N=25)

Safety profile

Single agent recommended Phase 2 dose

PK/PD

Ph 1b/2a Completed:
ZEN-3694 + enzalutamide 2nd line mCRPC, Patients with prior progression on abiraterone and/or enzalutamide (n=75)

Prolonged radiographic progression-free survival (rPFS) of 39 weeks with ZEN-3694 + enzalutamide compared to expected rPFS of 12-24 weeks with single agent enzalutamide

Significant benefit in patients with poor response to prior abiraterone (these AR independent patients typically respond poorly to single agent enzalutamide)

Randomized Ph 2b ongoing:
ZEN-3694+enzalutamide vs enzalutamide
1st line and 2nd line mCRPC
Patients with poor prior response to abiraterone (n=200)

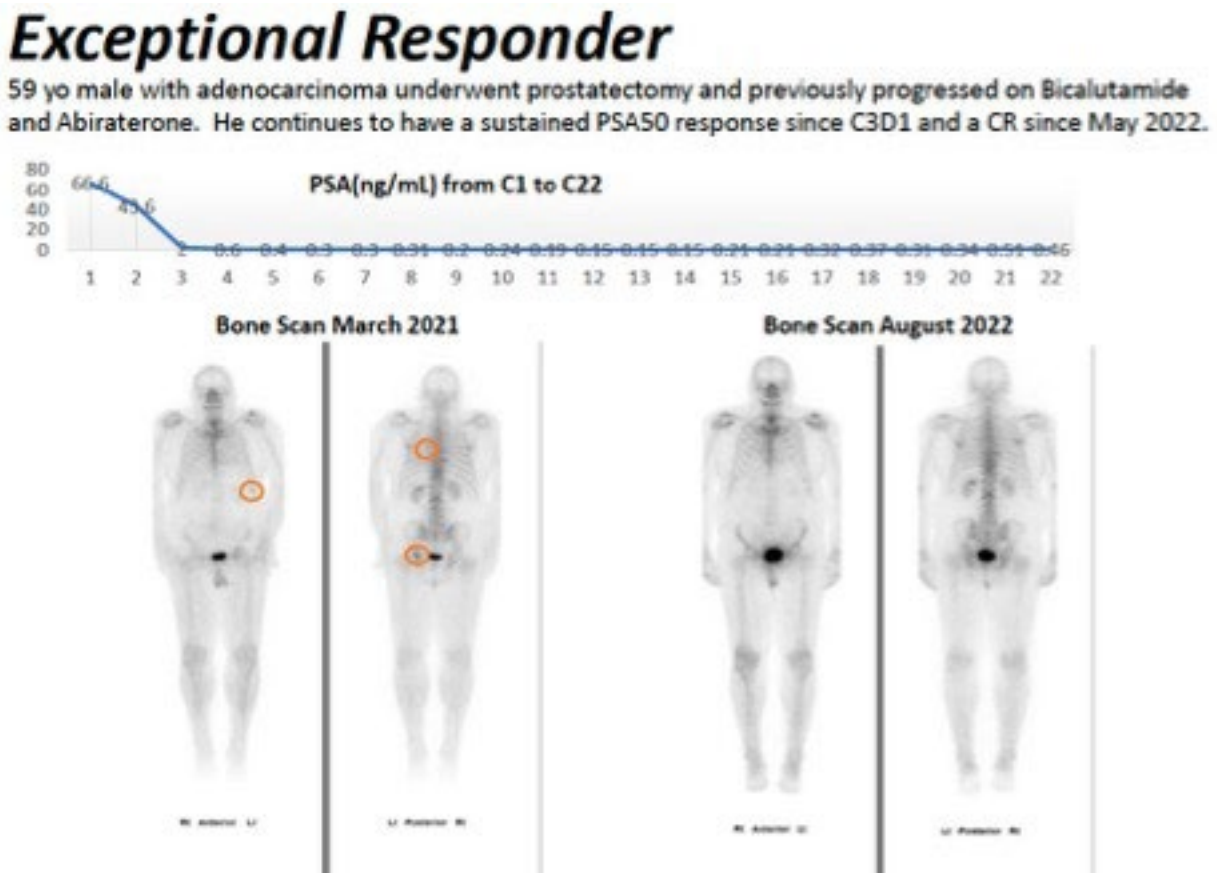
rPFS primary endpoint

OS secondary endpoint

Testing hypothesis that ZEN-3694 can resensitize AR independent tumors to enzalutamide

Exceptional Responders in Triple Combo (ZEN-3694 + Enzalutamide + Keytruda) mCRPC Study

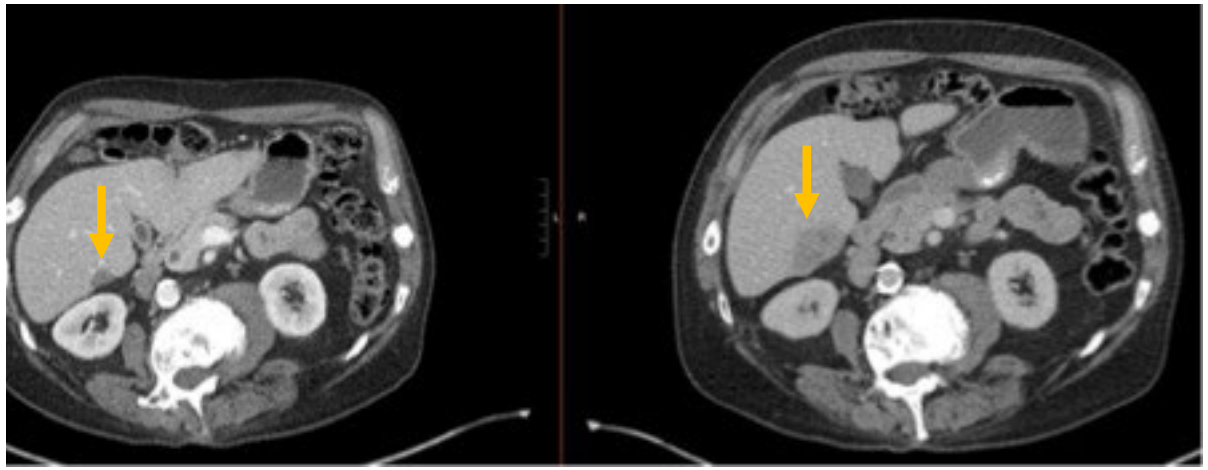
Cohort B patient CR: Disappearance of bone lesions



Cohort A patient PR: 60% decrease in liver lesions

- T-NEPC, RB1 loss

Post cycle 3 | Baseline



2nd PR in patient with liver lesions (data not shown)

- T-NEPC

Program Overview

mOvCa

Metastatic Ovarian Cancer

Stage: **Phase 1/2a**

Combination(s): **Opdivo** & **Yervoy** (BMS)

Partner(s): **NCI** , **BMS** & **U Pitt**

Target Population: 2nd and 3rd line mOvCa patients that do not respond or become resistant to platinum

Standard of Care/Unmet Need: There is no standard of care for OvCa patients who are resistant to platinum

Product Profile: ZEN-3694+ Opdivo/Yervoy, with its well-tolerated safety profile, is positioned for mOVCa patients who develop rapid resistance to platinum

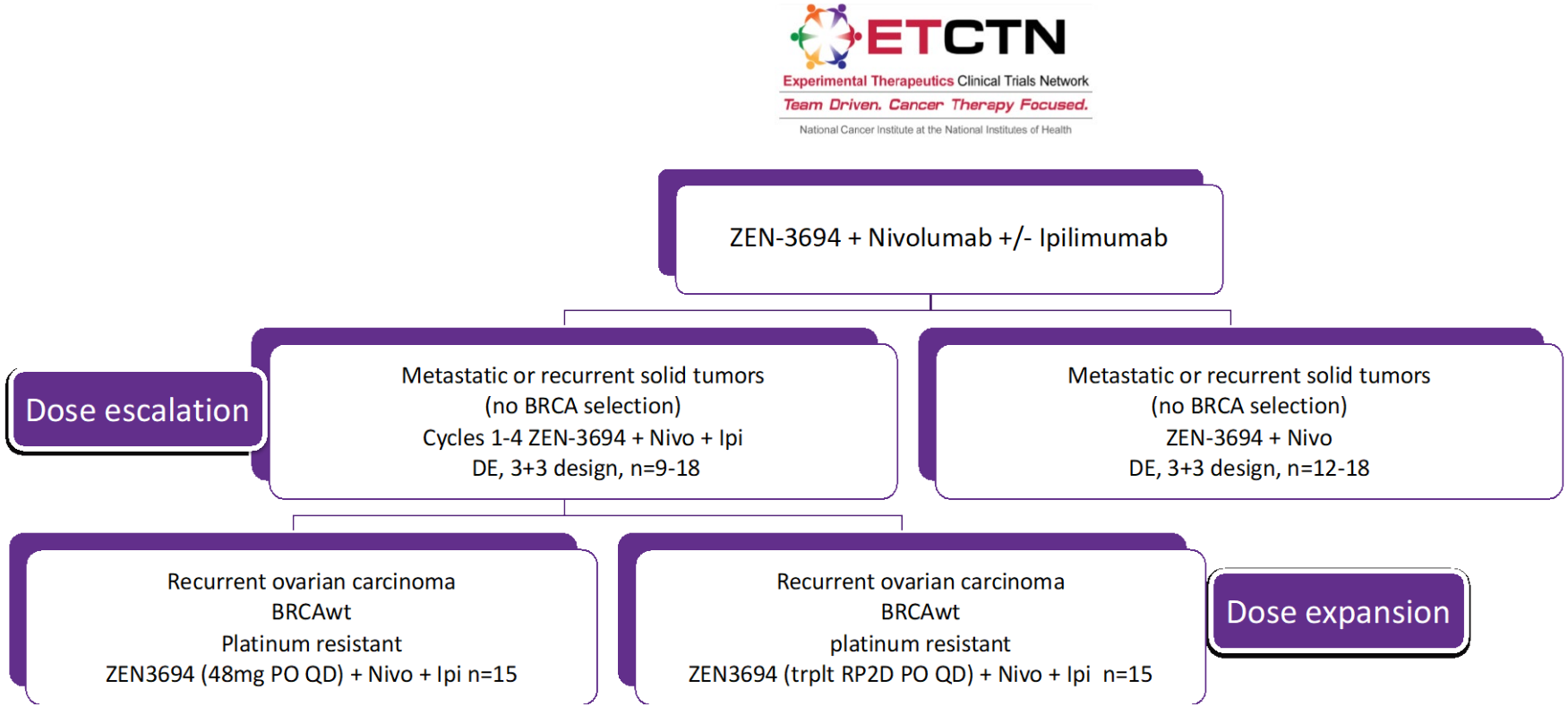
Parameter	Value
Total Market Size	>28,000 (2nd Line, plat resistant)
Est. Market Entry	2027
Upcoming Milestones:	Phase 1/2 data readout and Phase 3 start

Phase 1/1b ZEN003694 + Nivolumab +/- Ipilimumab in Solid Tumors and Ovarian Cancer: 2/5 PRs, Ovarian, CRC

Mahdi, U Pitt

NCT04840589

6/6 dosed in DL1 ZEN + Nivo
1 confirmed PR in platinum resistant OC pt,
1 confirmed PR in CRC MSS patient
moving to dose level 2 and triple combo



Primary: Safety and tolerability, RP2D
Secondary: ORR, PFS, OS, AEs, CBR

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Program Overview

NUT Carcinoma

Aggressive Squamous Carcinoma

Stage: **Phase 1/2a**

Combination(s): **Multiple**

Partner(s): **NCI Dana-Farber & Lilly**

Target Population: Patients with metastatic or unresectable NUT carcinoma and other solid tumors

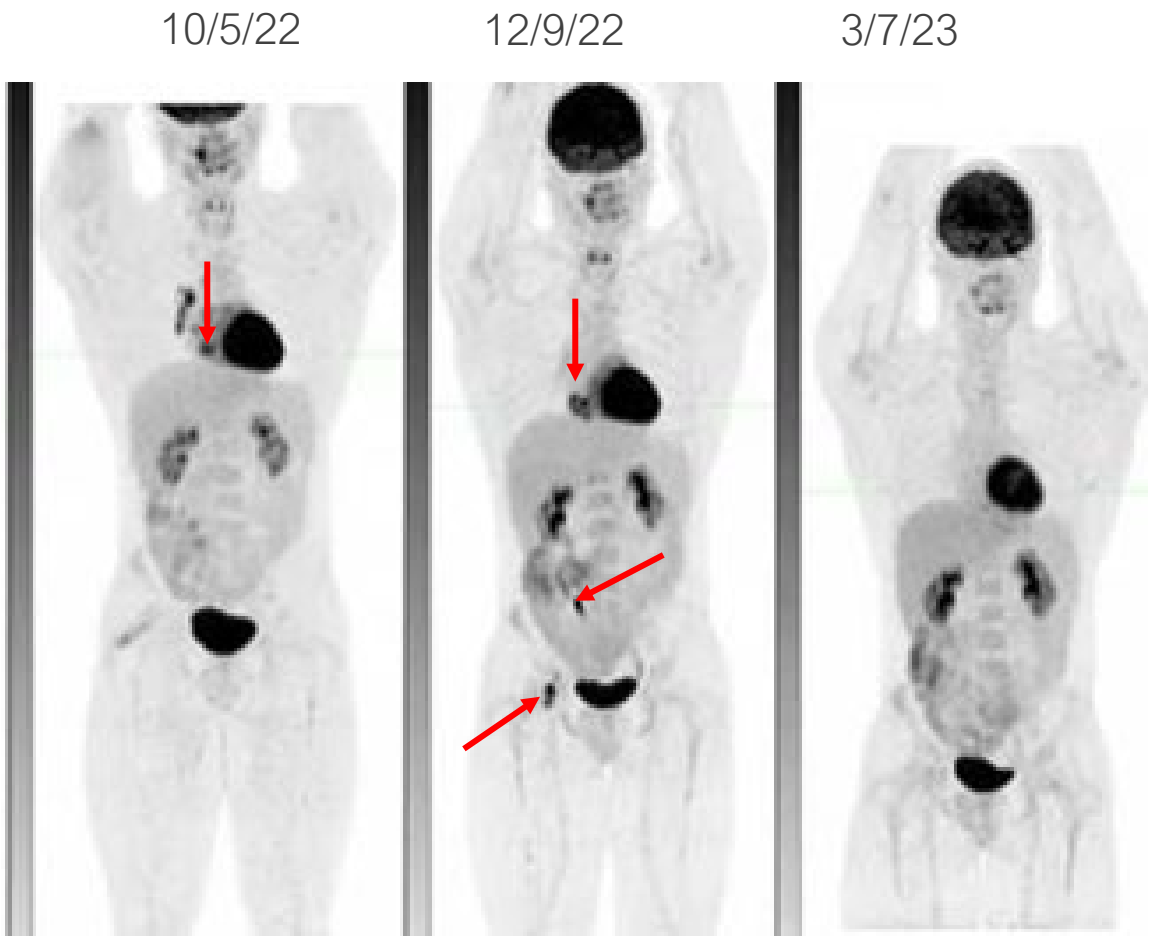
Standard of Care: There are currently **no approved therapies** for NUT carcinoma.
Patients are treated with chemotherapy (etoposide and cisplatin) and radiation, with a median survival of only six to nine months

Product Profile: ZEN-3694 + CDK4/6i, or etoposide and cisplatin, is positioned for 1st line treatment of NUT carcinoma patients as it disrupts the interaction of the BRD4-NUT oncoprotein and chromatin

Parameter	Value
Total Market Size	>5,000 cases/year (Est.)
Est. Market Entry	2025 (accelerated approval potential)
Upcoming Milestones:	Phase 1/2 data readout

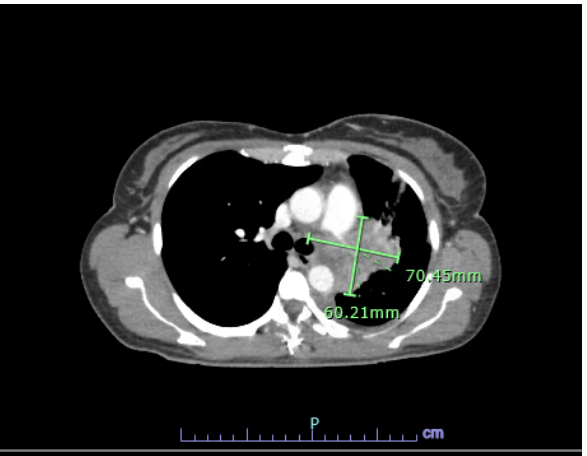
Compassionate Use Patient

Near CR with Single Agent ZEN-3694 in NC Patient

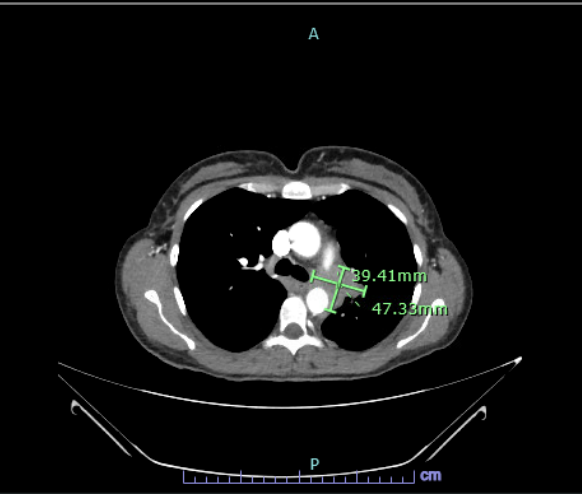


- Progressing on bone and lung lesions prior to treatment
- 12/18/22 : Single agent ZEN-3694 treatment started at 48mg/qd
- Dose interruption due to diarrhea in Cycle 1
- ~2/2/23 : ZEN-3694 dose increased to 48mg BID – is being tolerated
- 3/7/23: Scans show a near complete response in thoracic lesion, hip and abdomen lesions were irradiated
- 4/25/23 Patient continuing on 48mg BID
- 6/15/23 Patient progressed but continuing on ZEN-3694 as deriving clinical benefit, lesion near heart still under control

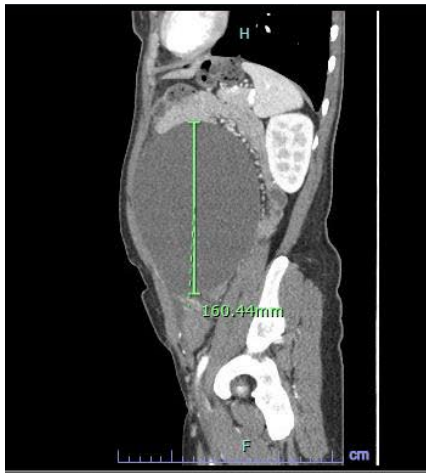
Thoracic NUT Carcinoma Patient on compassionate use ZEN-3694



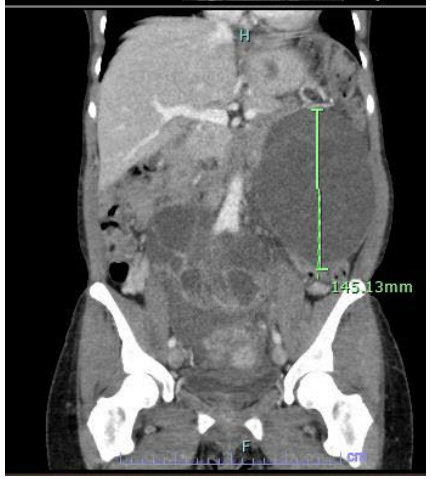
09/18/22
Lung
lesion:70.45mm



02/07/23
Lung
lesion:47.33mm



12/01/22
Abdominal
lesion:160mm



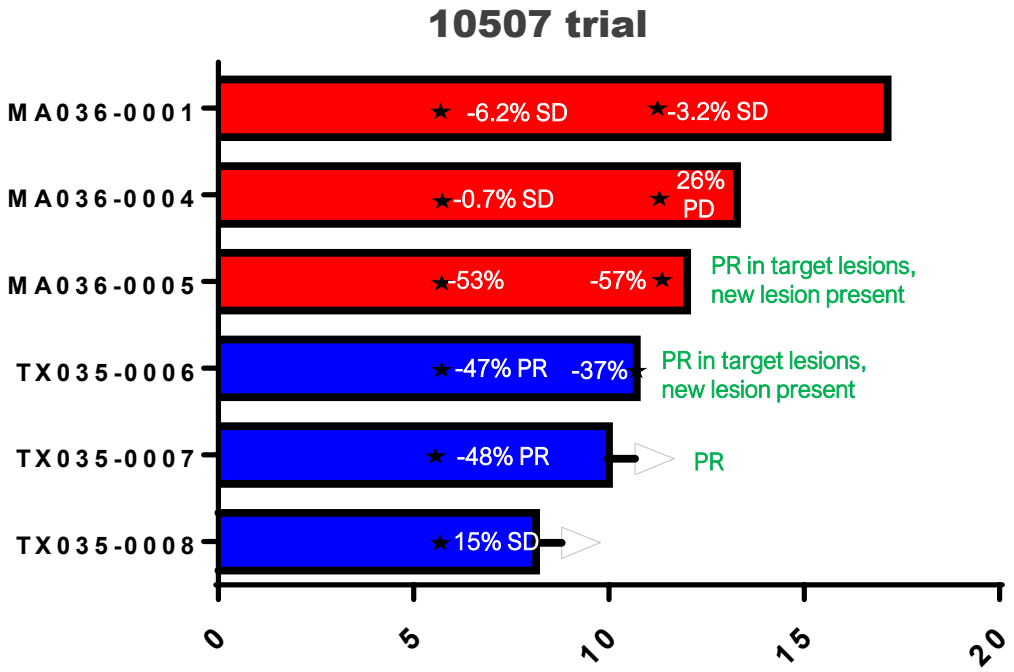
02/23/23
Abdominal
lesion:145mm

Clinical History: PDL1+, Thoracic NUT carcinoma

- Started cis/etop 10/4/22
- Added ZEN-3694 on cycle 2 (48mg) 10/25/22
- ZEN increased to 60 5:2 11/15/22
- Completed 6 cycles of cis/etop and 5 cycles ZEN-3694 on 1/19/23
- Started pembrolizumab+ ZEN (60 5:2) on 2/7/23
- Surgical resection of abdominal and liver mass 2/28/23
- Resumed pembro + ZEN

ZEN-3694 + Etoposide Cisplatin in NC Patients

Luo/Shapiro DFCI



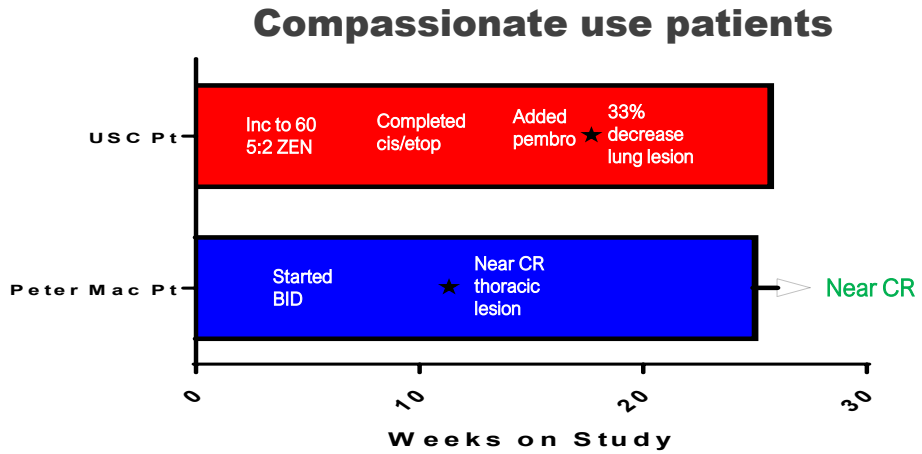
[NCT05019716 (NCI-CTEP 10507)]

Cohort 1 (48 mg ZEN D1-14)

Cohort 2 (60 mg ZEN 5:2, D1-14)

★ scans

50% ORR



ZEN 48 mg + cisp/etop combo

ZEN 48 mg monotherapy

★ scans

Single Agent ZEN-3694

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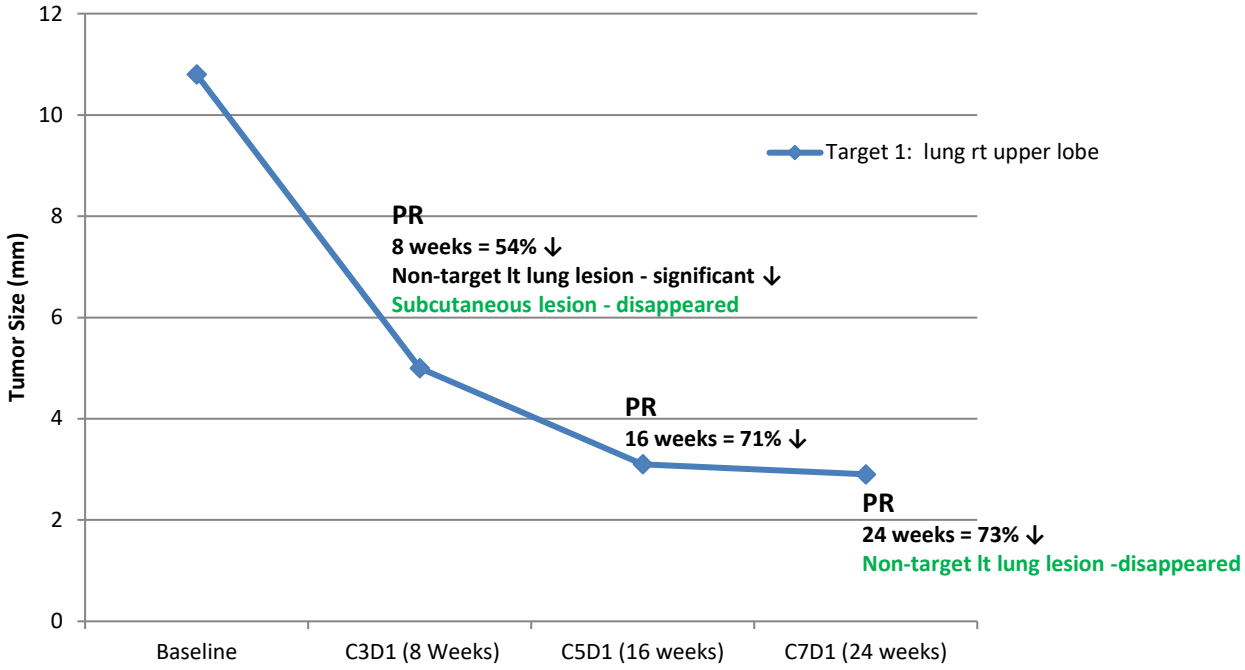
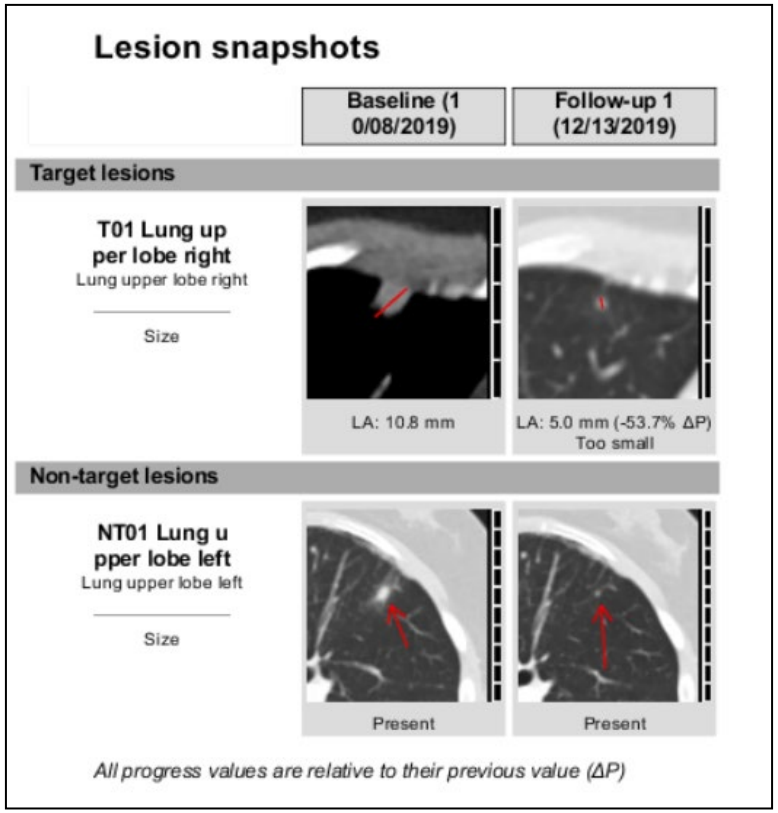
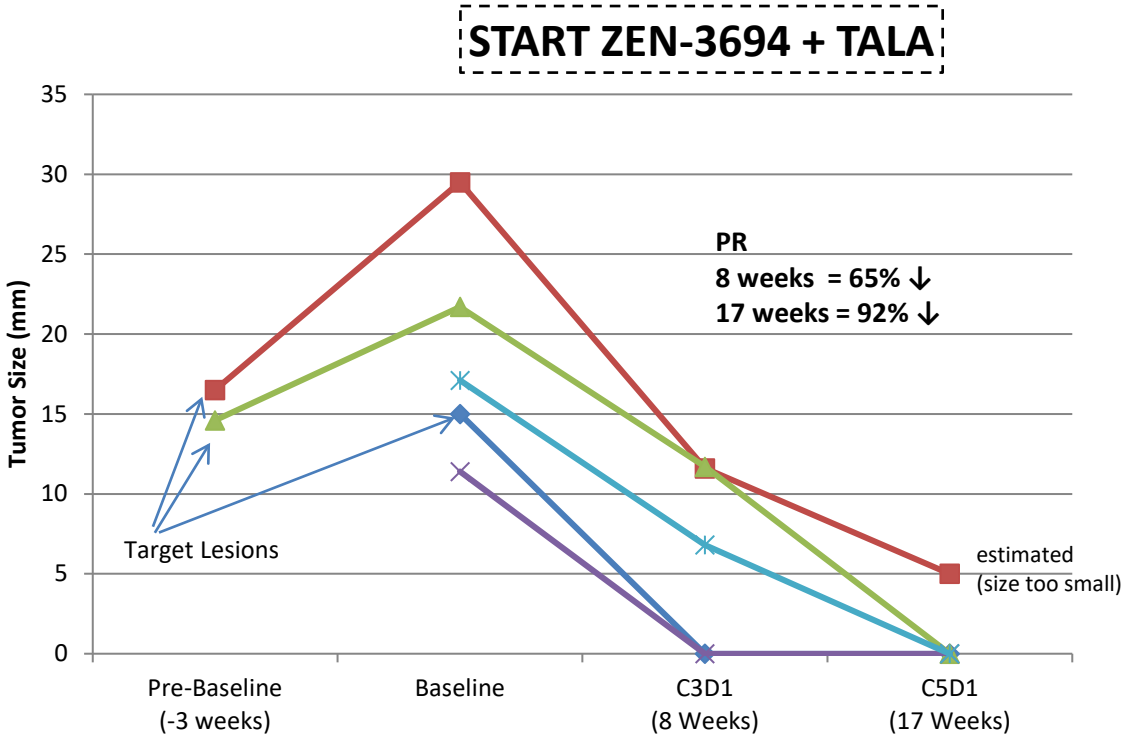
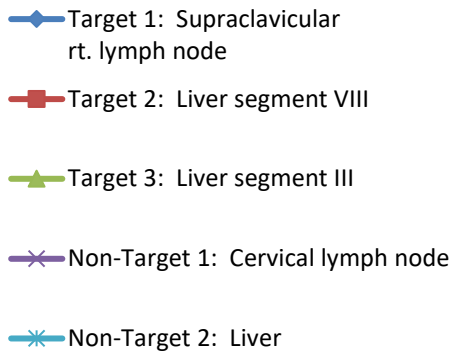
Inhouse Clinical Trial Result - 73% decrease in Lung Lesions (Triple Negative Breast Cancer that metastasized to the Lungs)

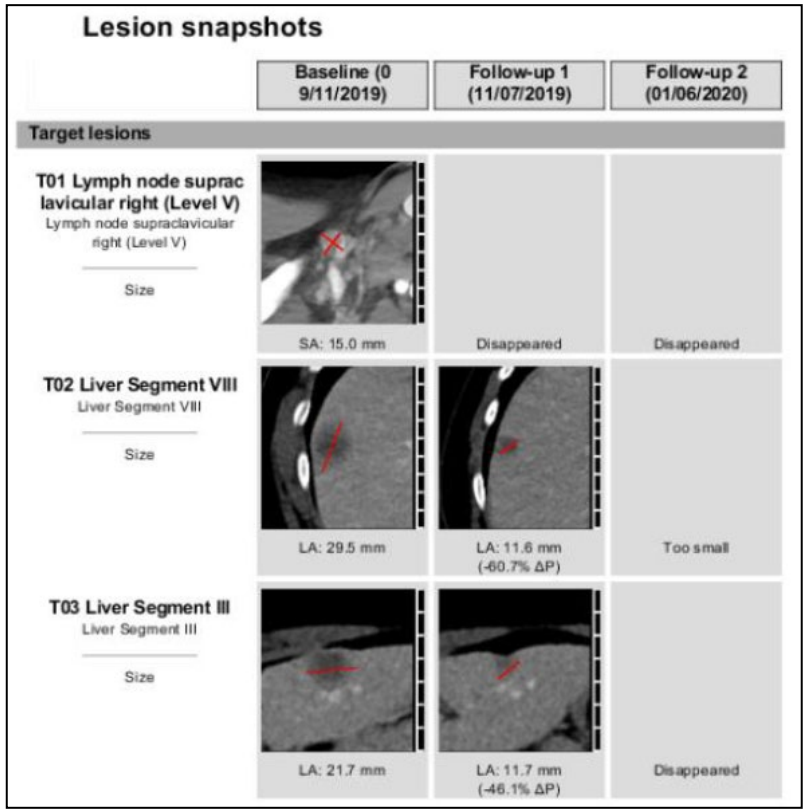




Inhouse Clinical Trial Result - 92% decrease in Liver Lesions (Triple Negative Breast Cancer that metastasized to the Liver)







Corporate Structure – Two Major Assets

Formed in 2013 – Structured for Value Creation

$75MM raised to date in addition to securing an $85MM in clinical trial and drug expenses.

Zenith Capital Corp (Alberta, reporting issuer)

100%

100%

Resverlogix Royalty Preferred Shares (based on future sales by Resverlogix)

In discussions

Zenith Epigenetics Ltd. (Alberta) (ZEN-3694, IP)

$xx valuation for 50%

- **6-12% Ascending Royalty on Global net sales**
- **Funds to be used to finalize RVX Clinical**

$xx very low valuation – discounted

- **Cash (use – final RVX clinical & Dividend)**
- **Continued Value Right (CVR) Potential**
- **8% Royalty**

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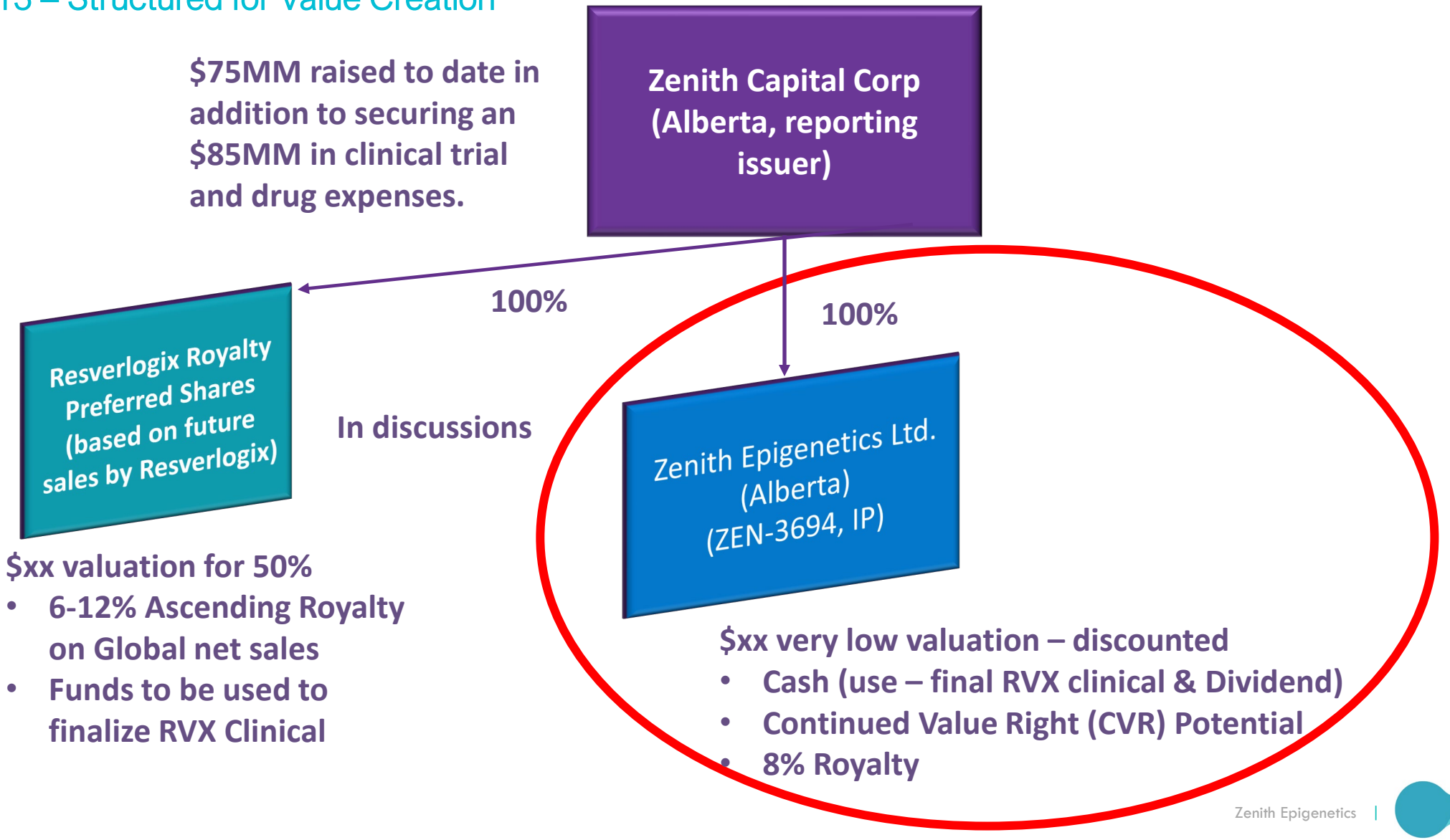
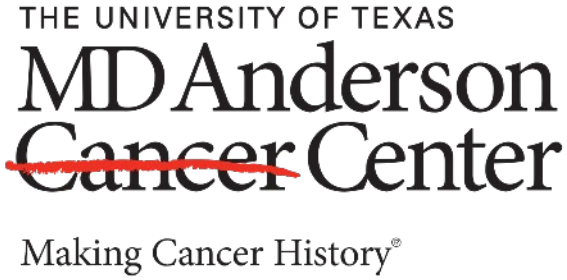


Our Partners



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