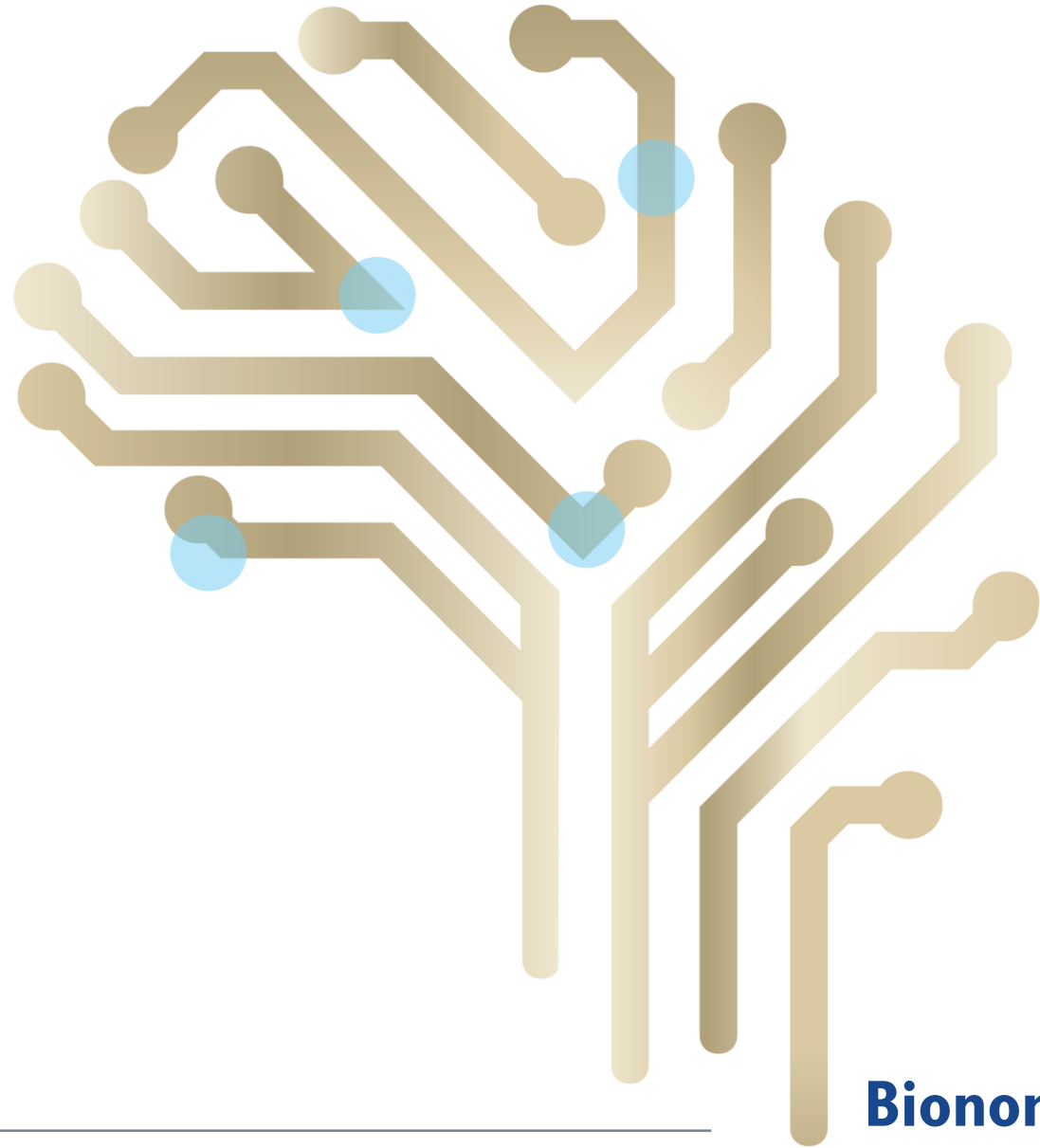

TO IMPROVE THE LIVES OF PATIENTS WITH SERIOUS **CNS DISORDERS**

Corporate Presentation

ASX: BNO
Nasdaq: BNOX

April 2022



Factors Affecting Future Performance

This presentation may contain "forward-looking" statements within the meaning of the United States' Private Securities Litigation Reform Act of 1995. Any statements contained in this presentation that relate to prospective events or developments, including, without limitation, statements made regarding Bionomics' drug candidates (including BNC210, BNC105, BNC101 and BNC375), its licensing agreement with Merck & Co. and any milestone or royalty payments thereunder, drug discovery programs, ongoing and future clinical trials, and timing of the receipt of clinical data for our drug candidates are deemed to be forward-looking statements. Words such as "believes," "anticipates," "plans," "expects," "projects," "forecasts," "will" and similar expressions are intended to identify forward-looking statements.

There are a number of important factors that could cause actual results or events to differ materially from those indicated by these forward-looking statements, including unexpected safety or efficacy data, unexpected side effects observed in clinical trials, risks related to our available funds or existing arrangements, delays or difficulties associated with conducting clinical trials, our failure to introduce new drug candidates or platform technologies or obtain regulatory approvals in a timely manner or at all, regulatory changes, inability to protect our intellectual property, risks related to our international operations, as well as other factors. Results of studies performed on our drug candidates and competitors' drugs and drug candidates may vary from those reported when tested in different settings. The inclusion of forward-looking statements should not be regarded as a representation by Bionomics that any of its expectations, projections or plans will be achieved. Actual results may differ from those expectations, projections or plans due to the risks and uncertainties inherent in Bionomics business and other risks described in Bionomics' filings with the SEC. New risk factors emerge from time to time and it is not possible for our management to predict all risk factors, nor can we assess the impact of all factors on our business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in, or implied by, any forward-looking statements. You should not rely upon forward-looking statements as predictions of future events. Although we believe that the expectations reflected in the forward-looking statements are reasonable, we cannot guarantee future results, levels of activity, performance or achievements. Except as required by law, we undertake no obligation to update publicly any forward-looking statements for any reason after the date of this presentation.

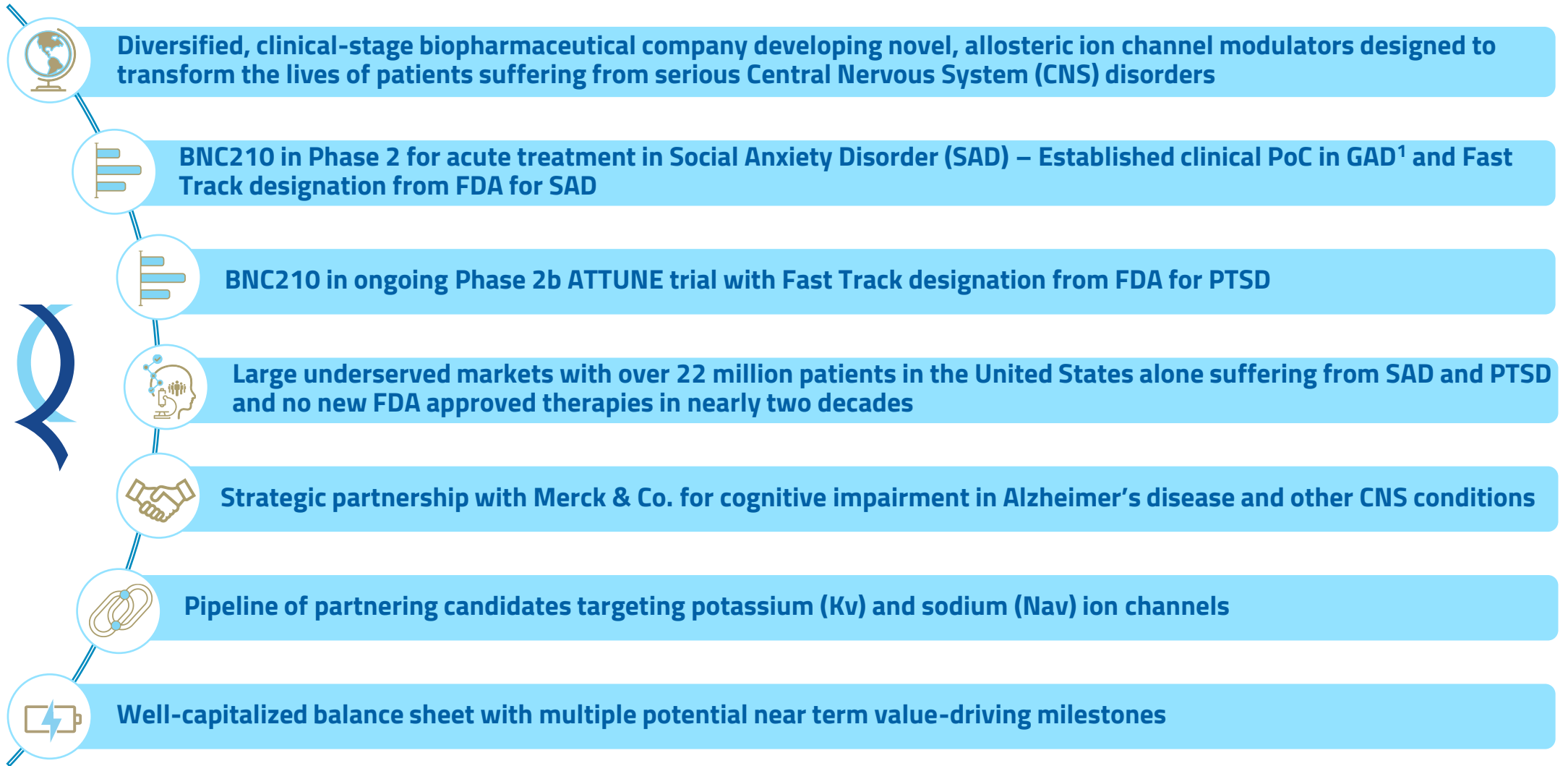
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Bionomics



Bionomics







PoC = Proof of Concept

GAD = Generalized Anxiety Disorder

PTSD = Post-Traumatic Stress Disorder

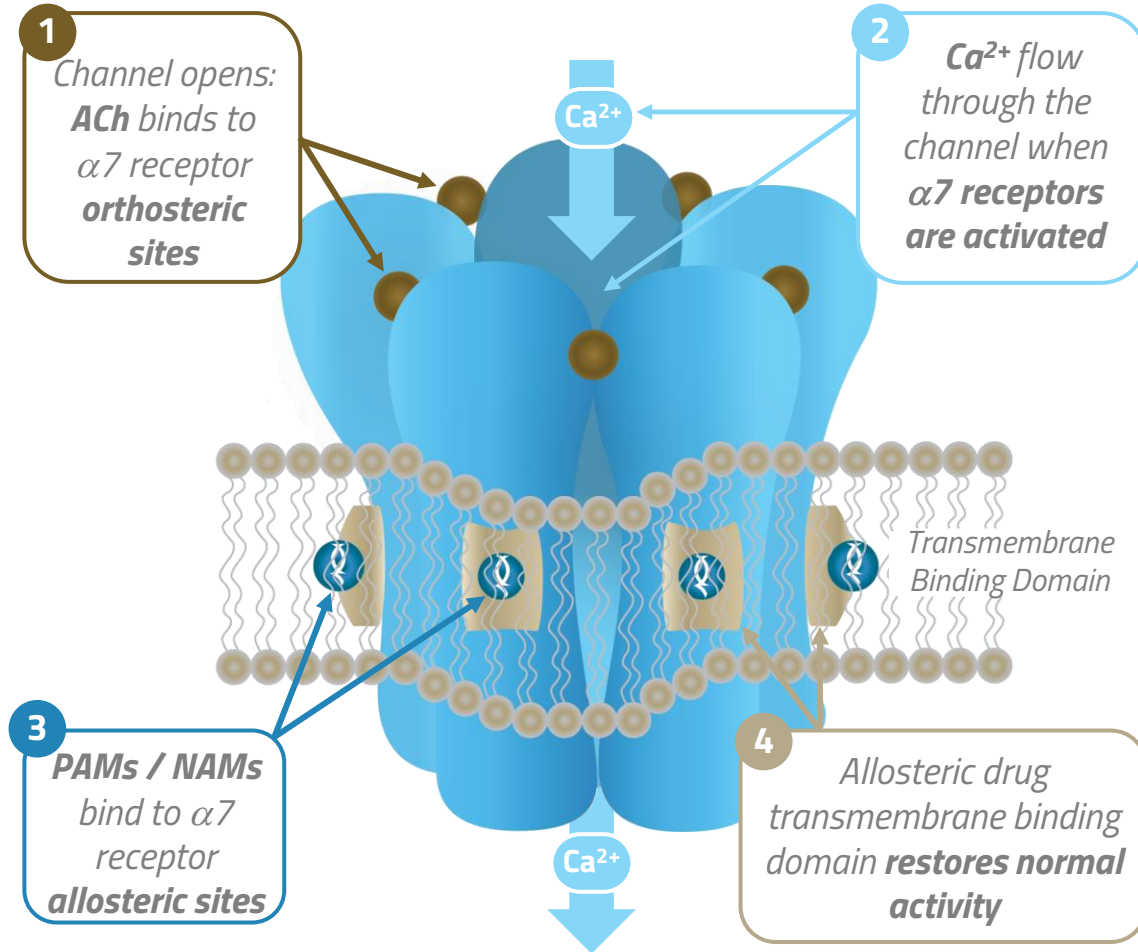
1. Wise et al 2020, *Biological Psychiatry*; Perkins et al 2021, *Molecular Psychiatry*



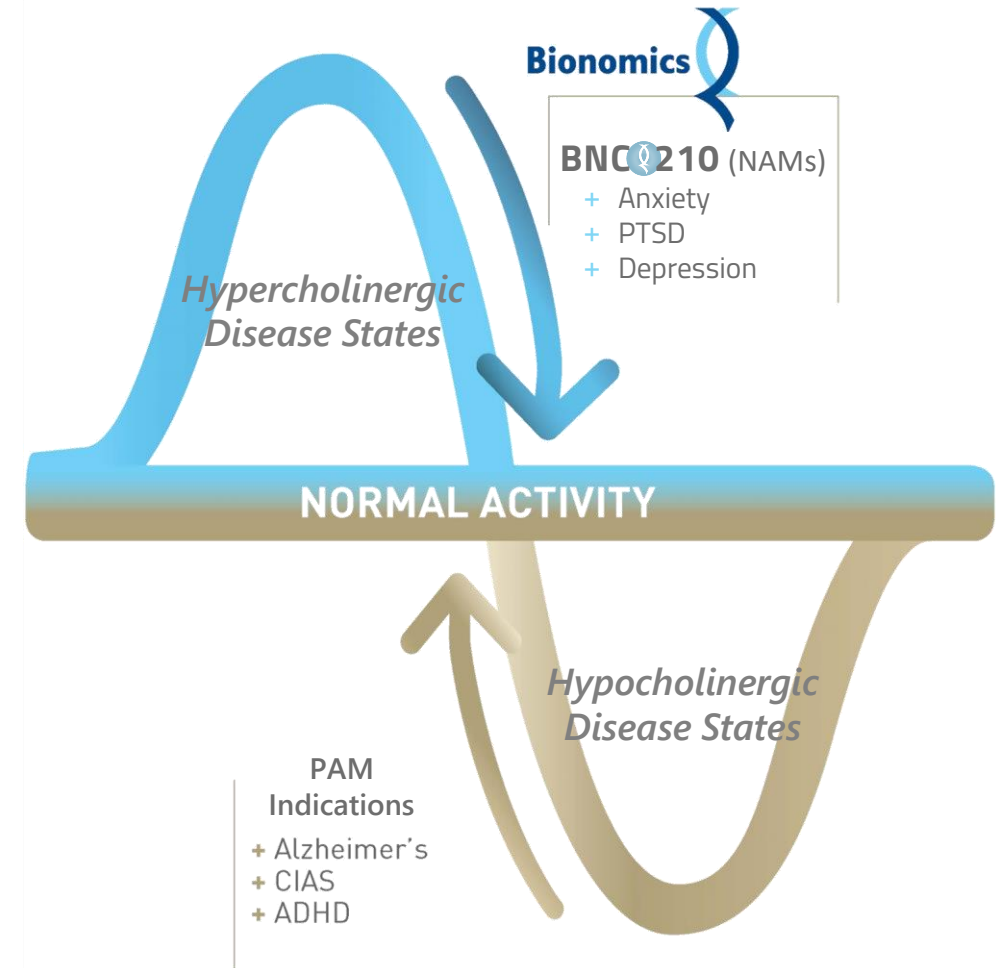
PROGRAM	PRECLINICAL	PHASE 1	PHASE 2	PHASE 3	EXPECTED TIMING
BNC210 α 7 receptor NAM 	Social Anxiety Disorder (SAD) 150 patients across 15-20 centers in US				<i>Study underway</i> <i>Topline Data: YE'22</i>
	Post-Traumatic Stress Disorder (PTSD) 200 patients across ~25 centers in US				<i>Study underway</i> <i>Topline Data: 1H'23</i>
	+MDMA derivative EMP-01 (PTSD)	<i>Memorandum of Understanding to explore combination treatment regimen for PTSD</i>			<i>Ongoing</i>
 α 7 receptor PAM	2 candidates for cognitive deficits in Alzheimer's disease				<i>Phase 1 safety & biomarker studies ongoing</i>
PAIN Nav1.7/1.8 Inhibitors	Candidate				<i>Ongoing</i>
COGNITION Kv3.1/3.2 Activators	Series Lead				



Normalizing Effect Utilizing *Allosteric Modulation*

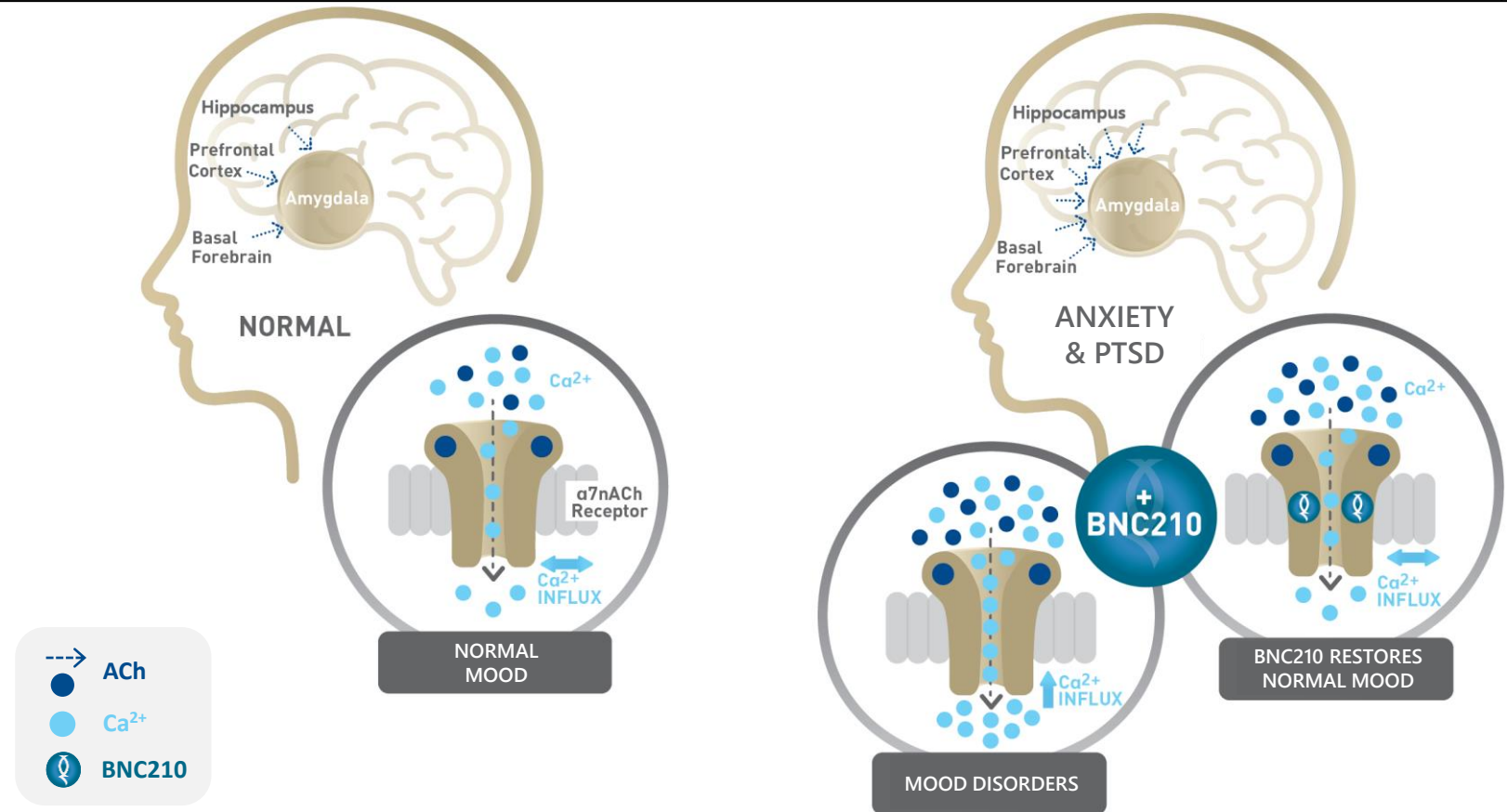


Targeting *Distinct CNS Conditions* with *Neurotransmitter Imbalance*





Action of **BNC210**
depends on
Acetylcholine
neurotransmission
and **Allosteric**
Modulation of
 $\alpha 7$ nAChR



NAMs have **self-limiting activity** determined by the **cooperative interaction** between BNC210 and Acetylcholine **binding at the allosteric and orthosteric sites, respectively**





BNC210 in Social Anxiety Disorder



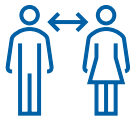
Acute Anxiety in SAD Represents a Significant Unmet Need



Social Anxiety Disorder (SAD), or Social Phobia, is a significant and persistent fear of social and performance-related situations

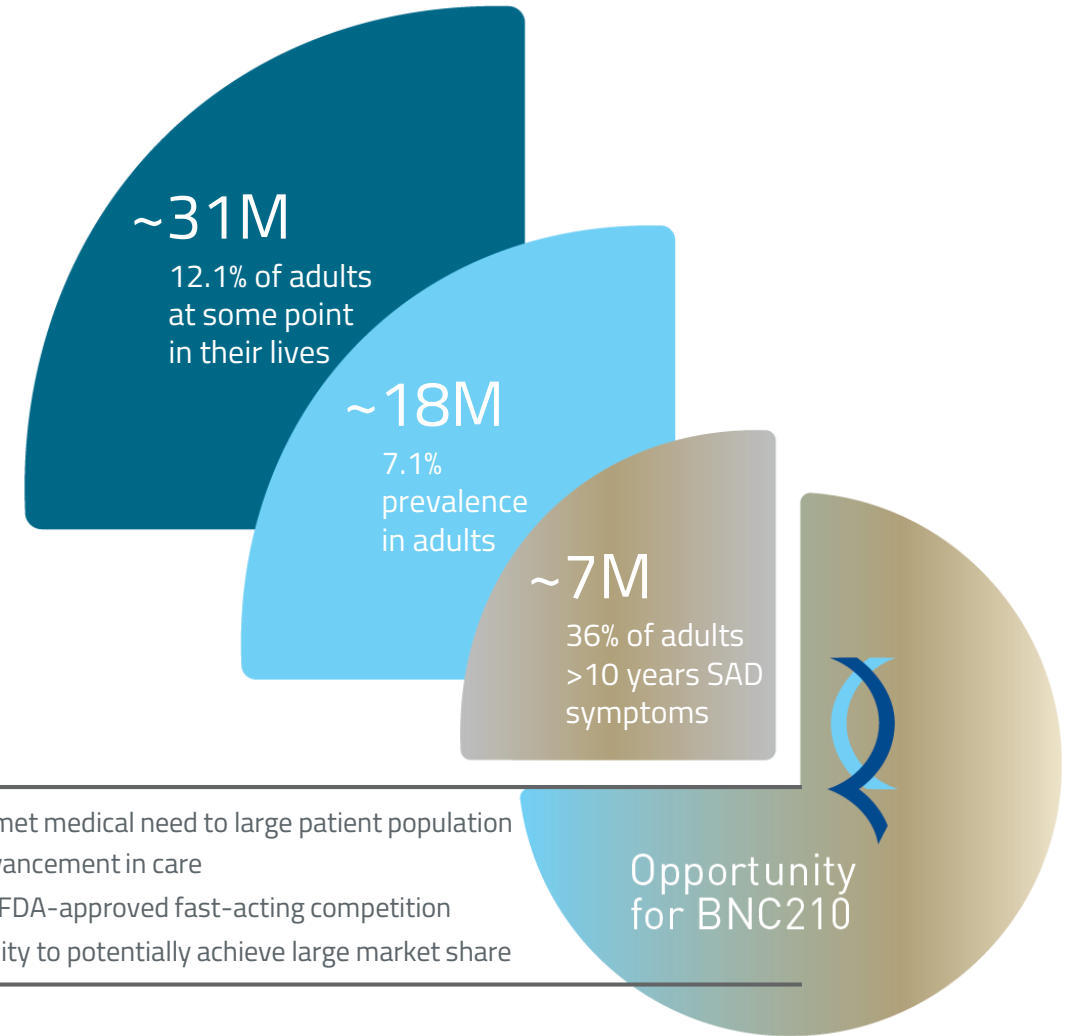


Includes anxiety from everyday social situations as well as "Fear of Public Speaking"



A disorder that substantially impacts many people's daily lives

- Amongst the largest mental health conditions with lifetime prevalence affecting >31M Americans
- No FDA-approved fast-acting medications for as-needed treatment
- Medications with the right pharmacokinetic profile and a novel mechanism are needed

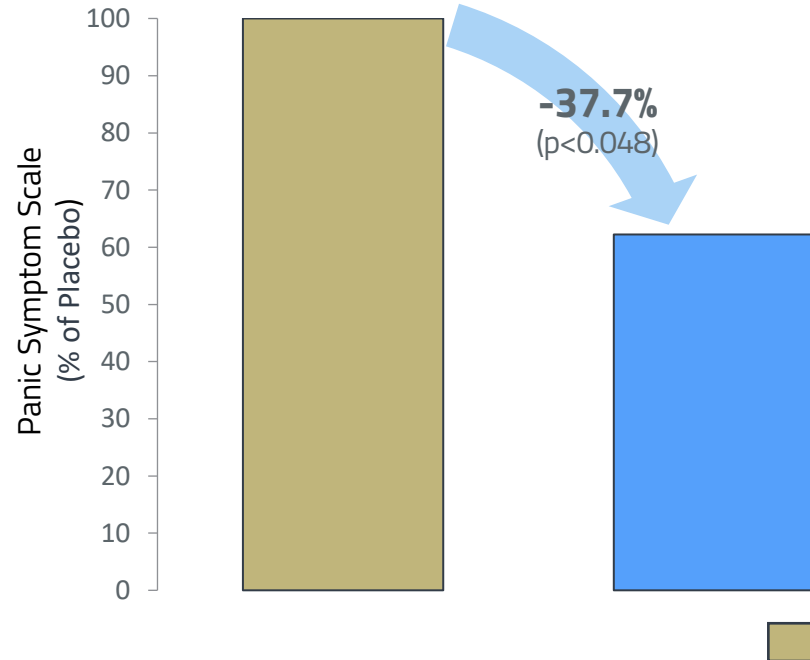




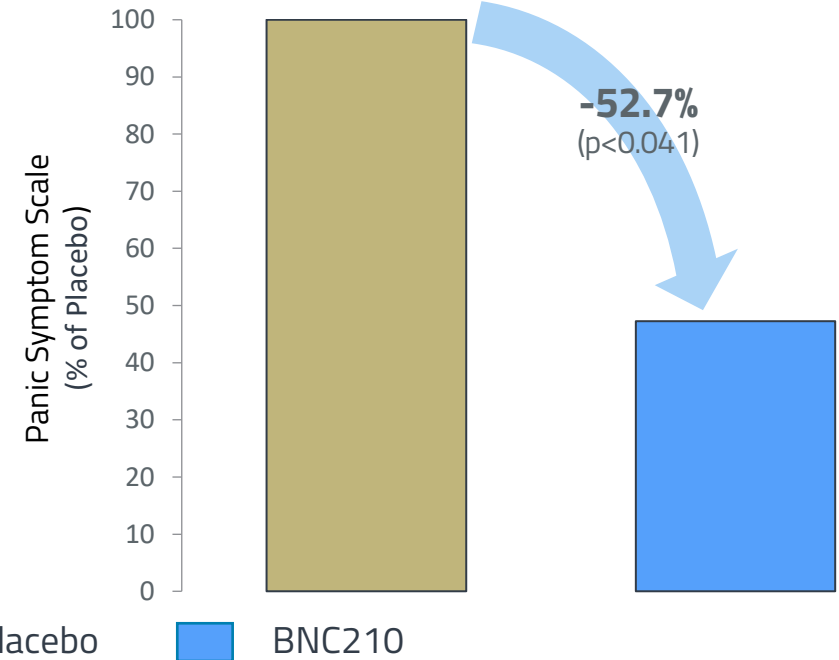
*Placebo-
controlled study
in 15 healthy
volunteers who
experienced a
CCK-4-induced
panic attack*



Total # of Panic Symptoms

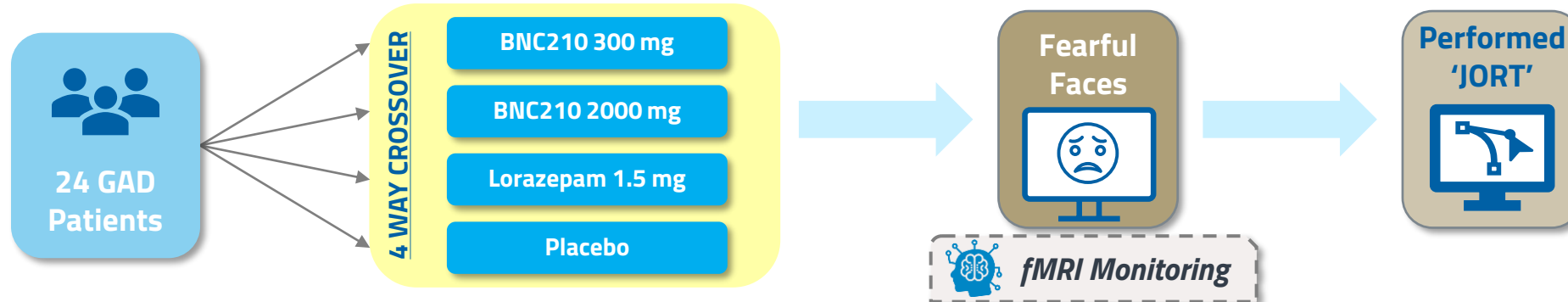


Panic Symptom Intensity



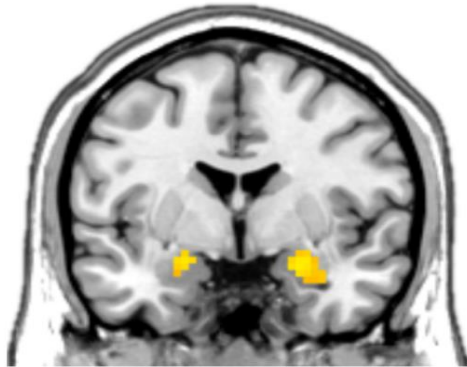
BNC210 demonstrated **reduction in panic symptoms and intensity** as measured with the Panic Symptom Scale



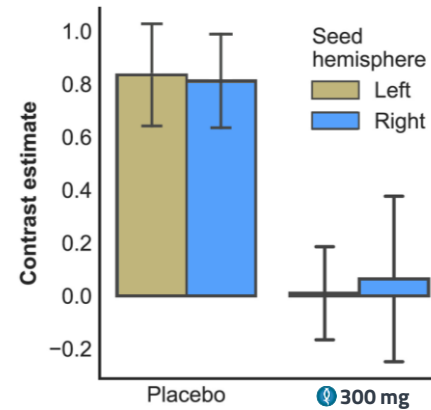


Significantly reduced activation of L & R amygdala caused by viewing fearful faces (L: $p < 0.05$; R: $p < 0.01$)

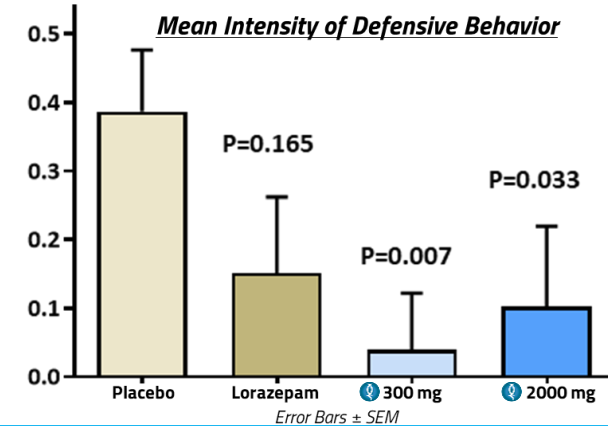
300 mg



Significantly reduced connectivity between amygdala and ACC while viewing fearful faces ($p < 0.05$)

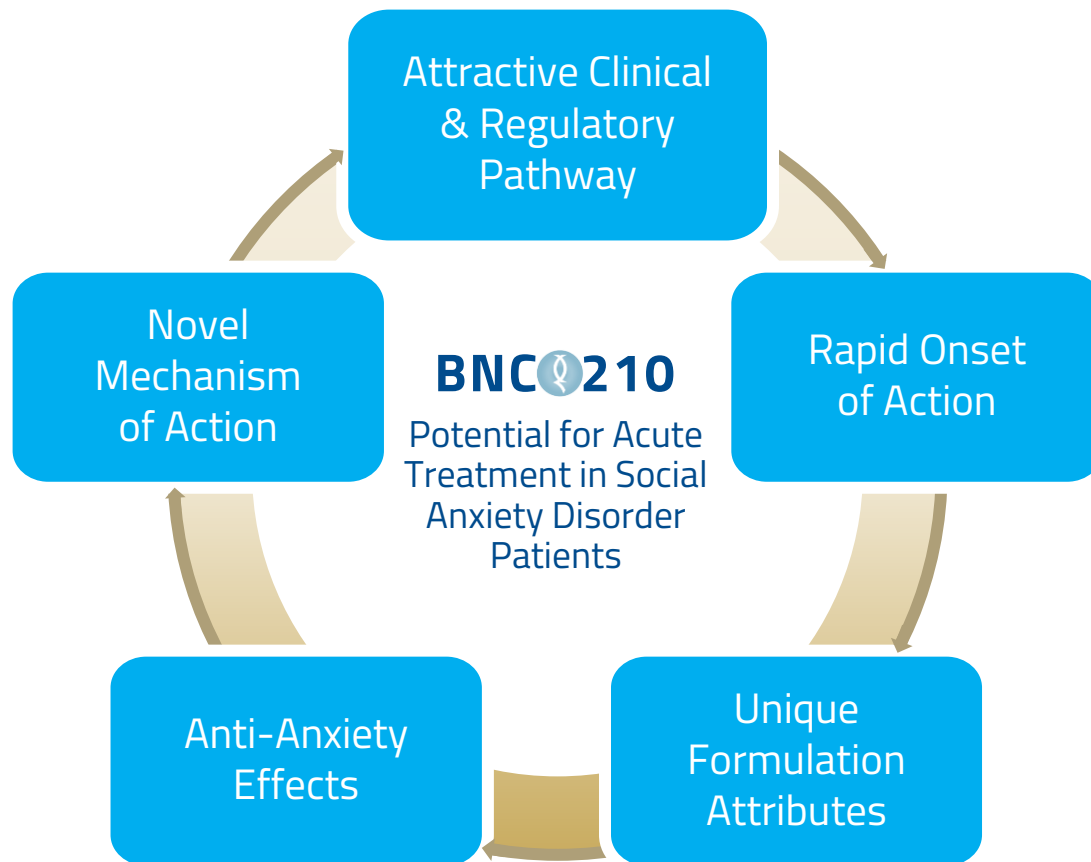


Significantly reduced threat avoidance behavior of anxious subjects in the JORT behavioral task



- **Amygdala activation** is an imaging **surrogate for anxiety**
- Connectivity between the **amygdala** and **Anterior Cingulate Cortex (ACC)** is **very strong in high anxiety**





CURRENT TREATMENTS FOR SOCIAL ANXIETY DISORDER

DRUG	FAST ACTING	NO SEDATION	NO WITHDRAWAL SYNDROME	NO MEMORY IMPAIRMENT	NO MOTOR IMPAIRMENT
Benzodiazepines ¹	✓	X	X	X	X
SSRIs / SNRIs ²	X	✓	X	✓	✓

BNC210 IS DESIGNED TO PROVIDE ADVANTAGES COMPARED TO CURRENT THERAPIES*

DRUG	FAST ACTING	NO SEDATION	NO WITHDRAWAL SYNDROME	NO MEMORY IMPAIRMENT	NO MOTOR IMPAIRMENT
BNC210	✓	✓	✓	✓	✓





✓ Emerging Regulatory Landscape & Unmet Need

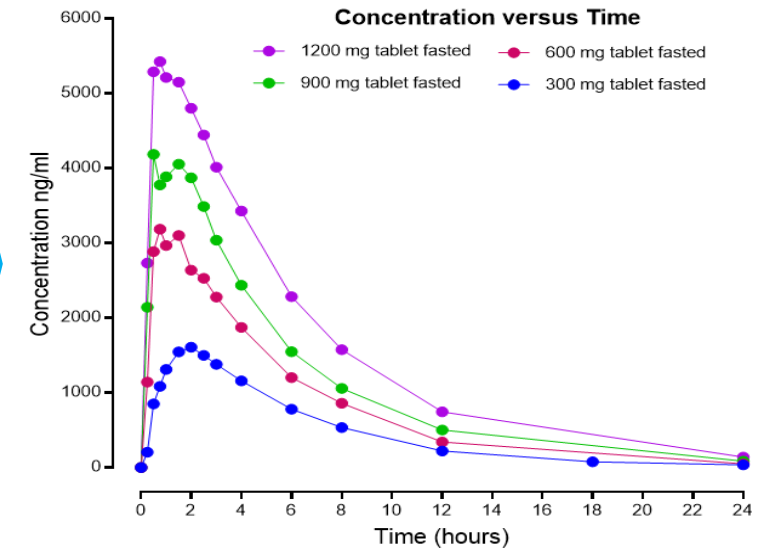
- Benzodiazepines prescribed off-label have significant side effects of sedation, cognitive impairment and potential for addiction
- Growing unmet need based on improving awareness and evolving regulatory dynamics
- FDA precedent on simplified public speaking challenge endpoint for acute anxiety reduction vs. placebo*

✓ Rapid Onset of Action with BNC210 Formulation

- Clinically demonstrated potential for reducing anxiety in acute treatment of GAD patients and following panic induction
- Observed acute anxiolytic efficacy of BNC210 similar to lorazepam without sedative properties and addiction liability
- Formulation well-suited for acute dosing – Rapidly absorbed to high concentrations within a short period of time



**Maximum
concentrations
reached in
~45 – 105 min.
across the
dose range**

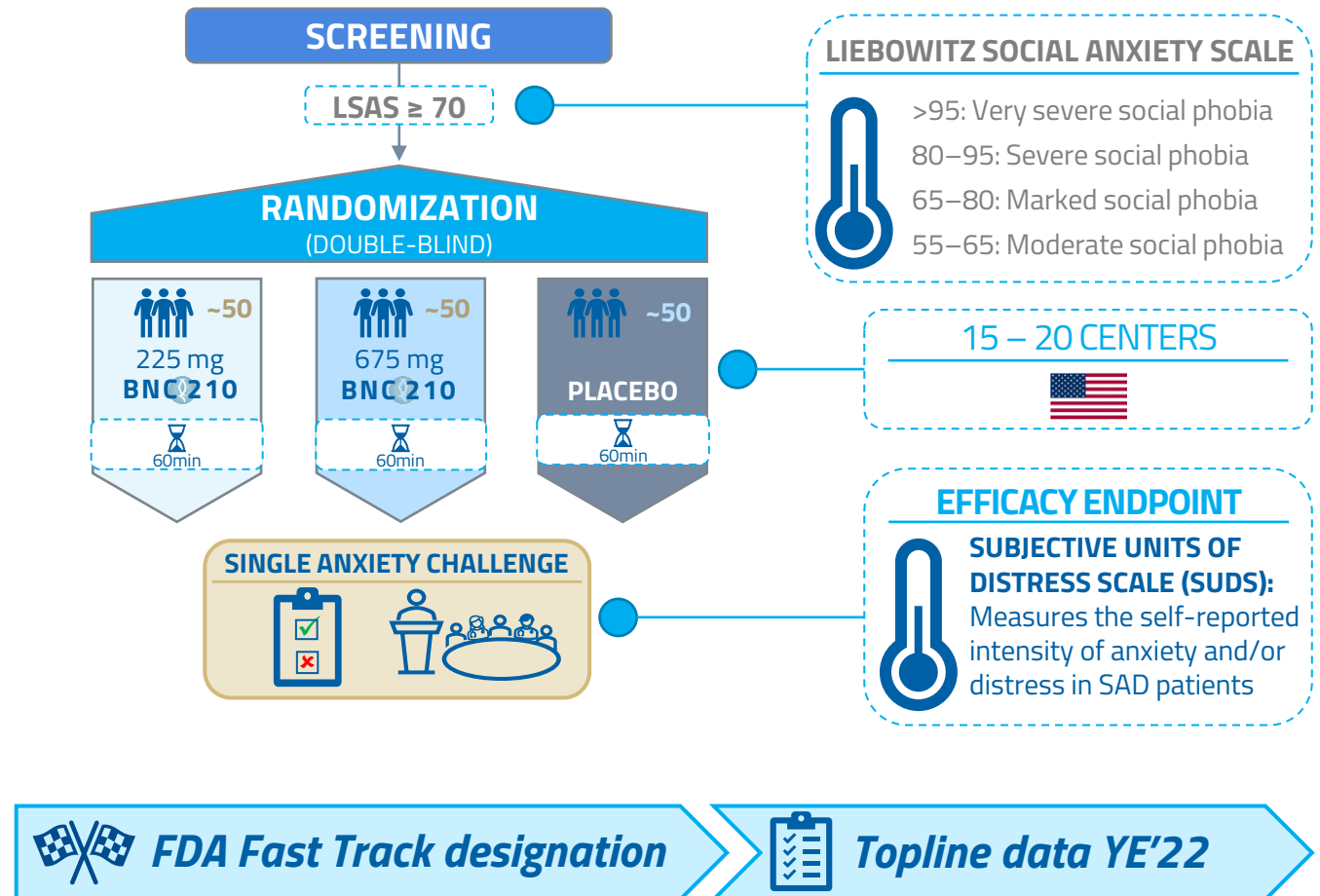




Acute Social Anxiety Disorder Study Highlights

- ✓ Cost-effective trial with an efficacy endpoint conducive to rapid data generation
- ✓ Ability to leverage VistaGen's development plan and trial design for Social Anxiety Disorder
- ✓ Received FDA clearance for IND filing and ***FDA Fast Track designation***
- ✓ Phase 2 trial underway and will read out topline data by end of 2022

Phase 2 PREVAIL Study Design



LSAS = Liebowitz Social Anxiety Scale



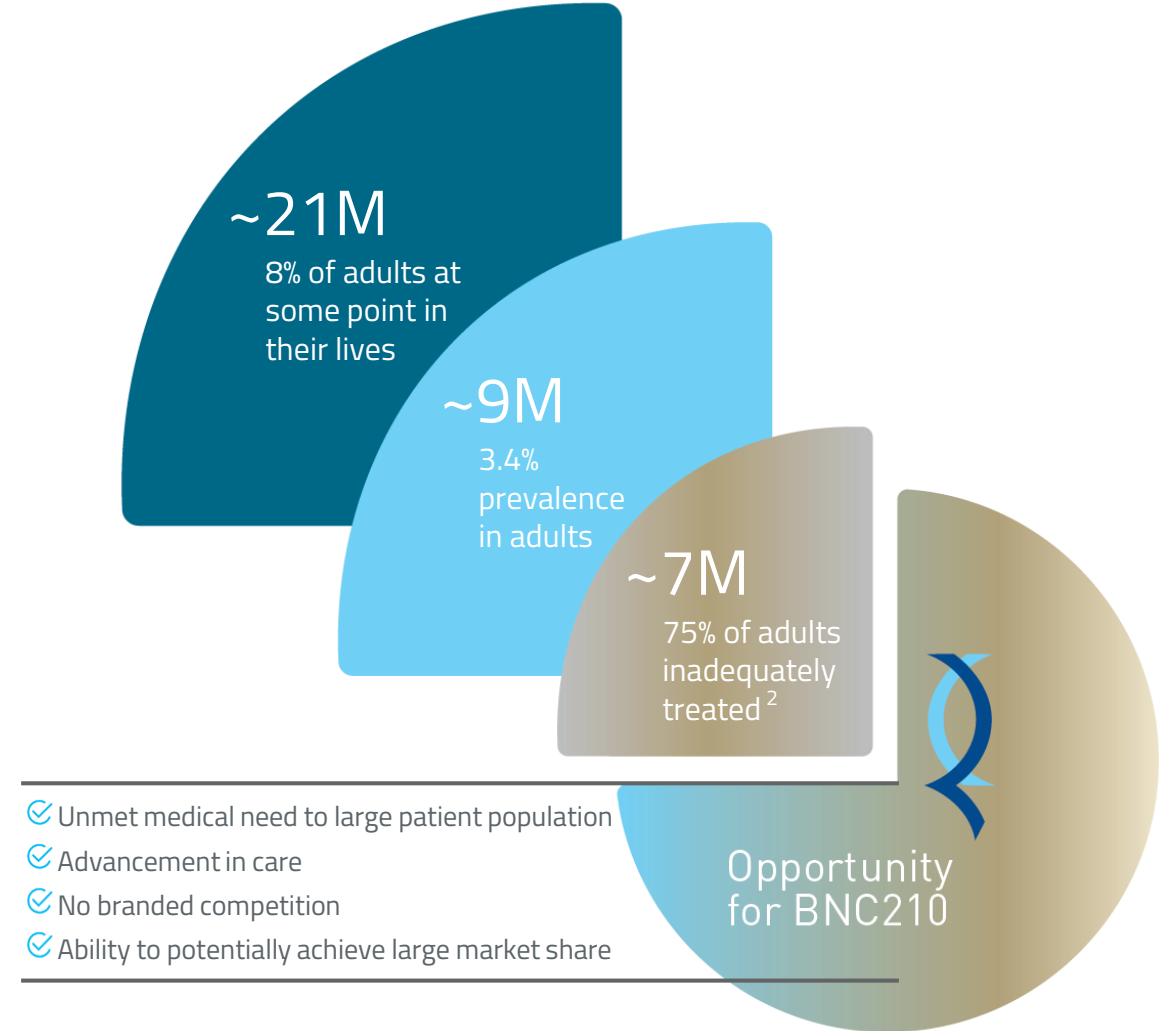


BNC210 in Post-Traumatic Stress Disorder



PTSD Represents a Significant Unmet Need

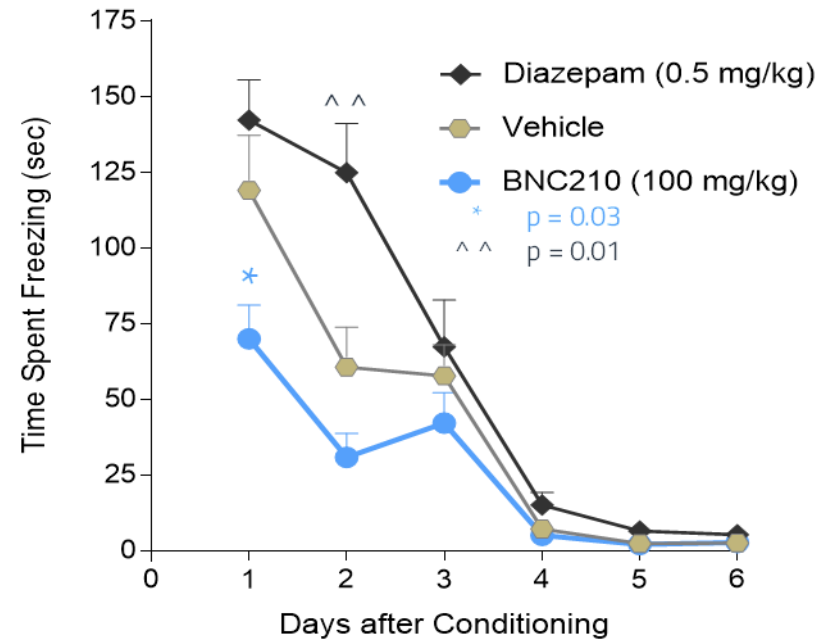
- ✓ 70% of people will experience a traumatic event in their lifetime, but most people recover normally
- ✓ PTSD results from exposure to actual or threatened death, serious injury or sexual violence
- ✓ Affects up to 8% of adults during their lifetime¹
- ✓ PTSD is a global mental health problem that is associated with significant morbidity and mortality and shows up in all facets of peoples' lives
- ✓ No newly approved pharmacotherapy in almost two decades
- ✓ ***Medications with a novel mechanism of action that can address the pathophysiology of PTSD are needed***





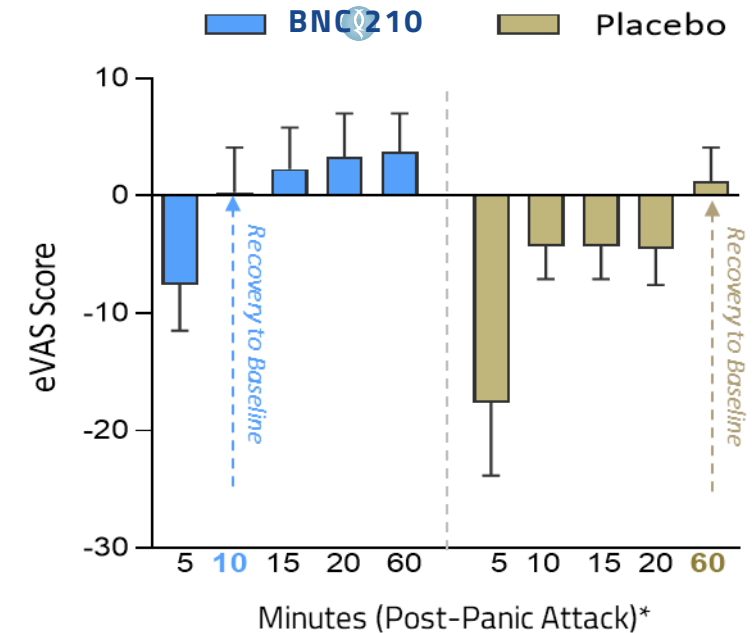
People with **anxiety disorders** and **PTSD** have **amplified fear responses** to trauma- or stress-related stimuli and **impaired fear extinction**

Conditioned Fear Extinction Model



BNC210 **enhanced fear extinction** following conditioned response training

Emotional Visual Analog Scale (eVAS)



BNC210 **enhanced emotional recovery** following a CCK-induced panic attack



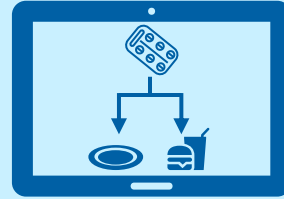


- ✓ Anti-depressant and anti-anxiety trends seen at earlier time points
- ✓ Safety profile generally well tolerated

Did not meet primary endpoint*; lower than expected exposure of liquid suspension formulation



- ✓ Pharmacometric analysis of Phase 2 PTSD data
- ✓ Predicted significant efficacy potential with adequate drug exposure achieved



- ✓ New tablet formulation overcomes food effect of suspension formulation
- ✓ Achieved exposure target predicted from pharmacometric analysis
- ✓ Extended IP coverage



- ✓ Type C meeting with FDA
- ✓ FDA granted Fast Track designation in PTSD



- ✓ Phase 2b ATTUNE trial started in July 2021
- ✓ Topline data expected 1H 2023

*Primary endpoint of CAPS-5 total symptom severity score at 12 weeks





PMX modelling
on prior Phase 2
PTSD trial identified
liquid suspension
under-exposure

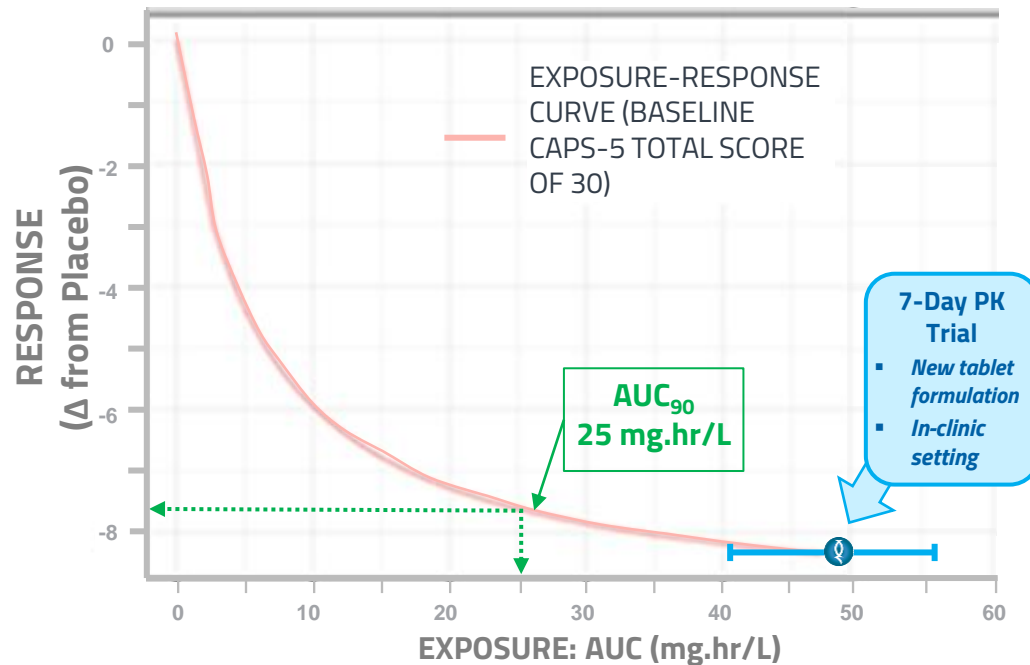


**BNC210 tablet
formulation**

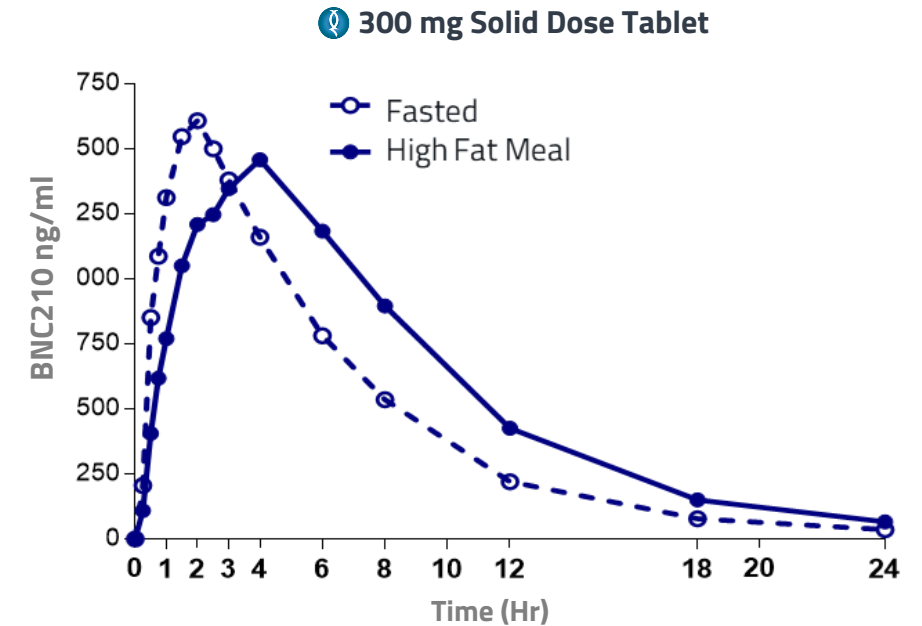


**New formulation
achieves target AUC
>25 mg.hr/L
with 900 mg dose
b.i.d.**

Pharmacometric (PMX) Analysis Target Exposure



BNC210 Novel Spray Dry Dispersion Formulation



**AUC Values
(plasma exposure)**

=

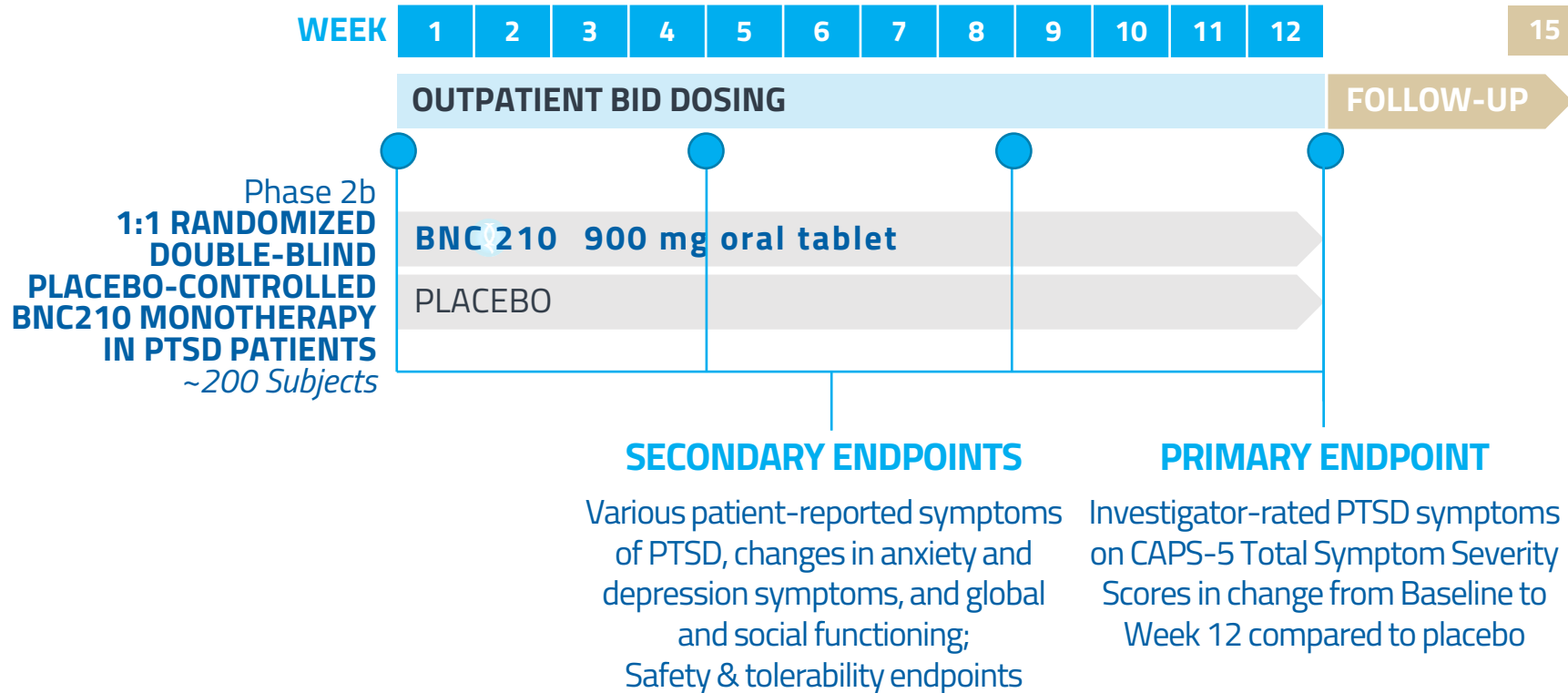


**CAPS-5 Score
(PTSD symptoms)**



Novel tablet **overcomes food effect**
and has **dose linear exposure**





PHASE 2b

Single potential registrational-supporting trial for monotherapy treatment in PTSD

KEY INCLUSION CRITERIA

- Female and male (18 – 75 years)
- Current PTSD diagnosis
- CAPS-5 ≥ 30 (Screening & Baseline)
- (& ≤ 25% decrease Screening to Baseline)

~25 Sites



Fast Track designation from FDA



Topline data expected 1H'23





CNS-focused Collaborations



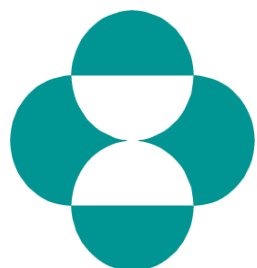
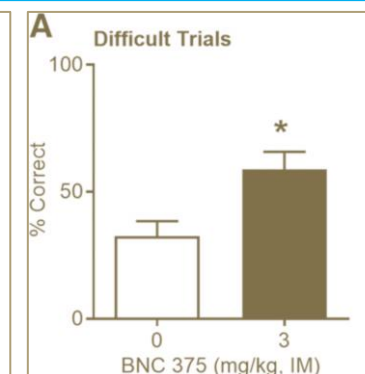
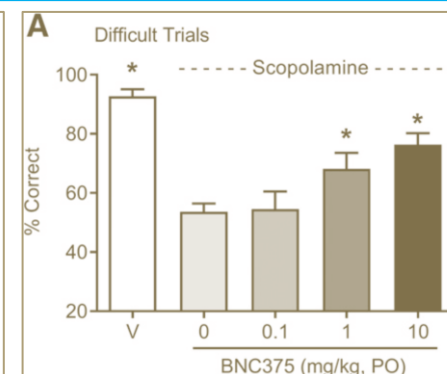
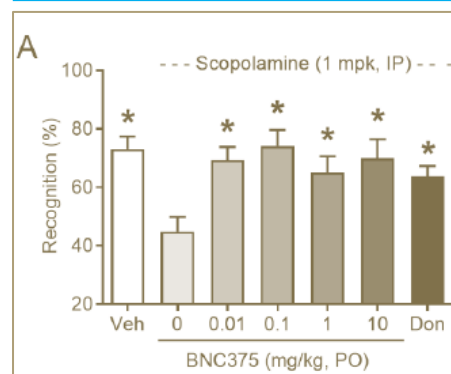
MSD Collaboration Overview

- Entered into in 2014 to develop $\alpha 7$ receptor PAMs targeting cognitive dysfunction associated with Alzheimer's disease and other central nervous system conditions
- Merck funds all R&D activities including clinical development and WW commercialization of any products from collaboration
- Milestone payments of **US\$20M upfront** and **US\$10M in 2017** when 1st compound entered Phase 1 clinical trials
- Eligible to receive **up to US\$465M in additional development and commercial milestone payments plus royalties**

Development Updates

- Includes 2 candidates which are PAMs of the $\alpha 7$ receptor in early-stage Phase 1 safety and biomarker clinical trials for treating cognitive impairment
- The 1st compound has completed Phase 1 safety clinical trials in healthy subjects and there are ongoing plans for further biomarker studies*
- In 2020, a second molecule that showed an improved potency profile in preclinical animal models was advanced by Merck into Phase 1 clinical trials*

Snapshot of Early BNC375 Studies



MERCK
PARTNERSHIP

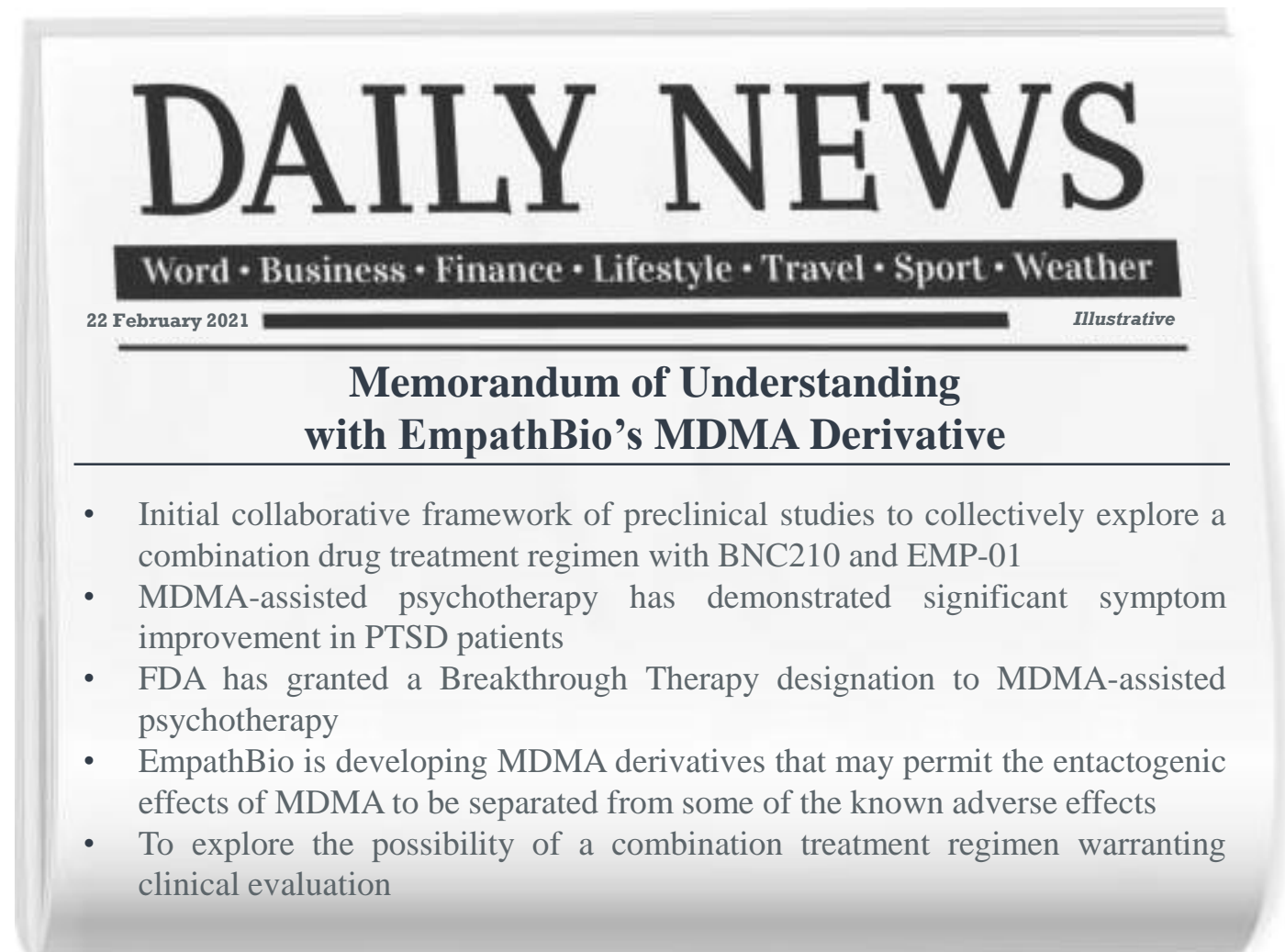


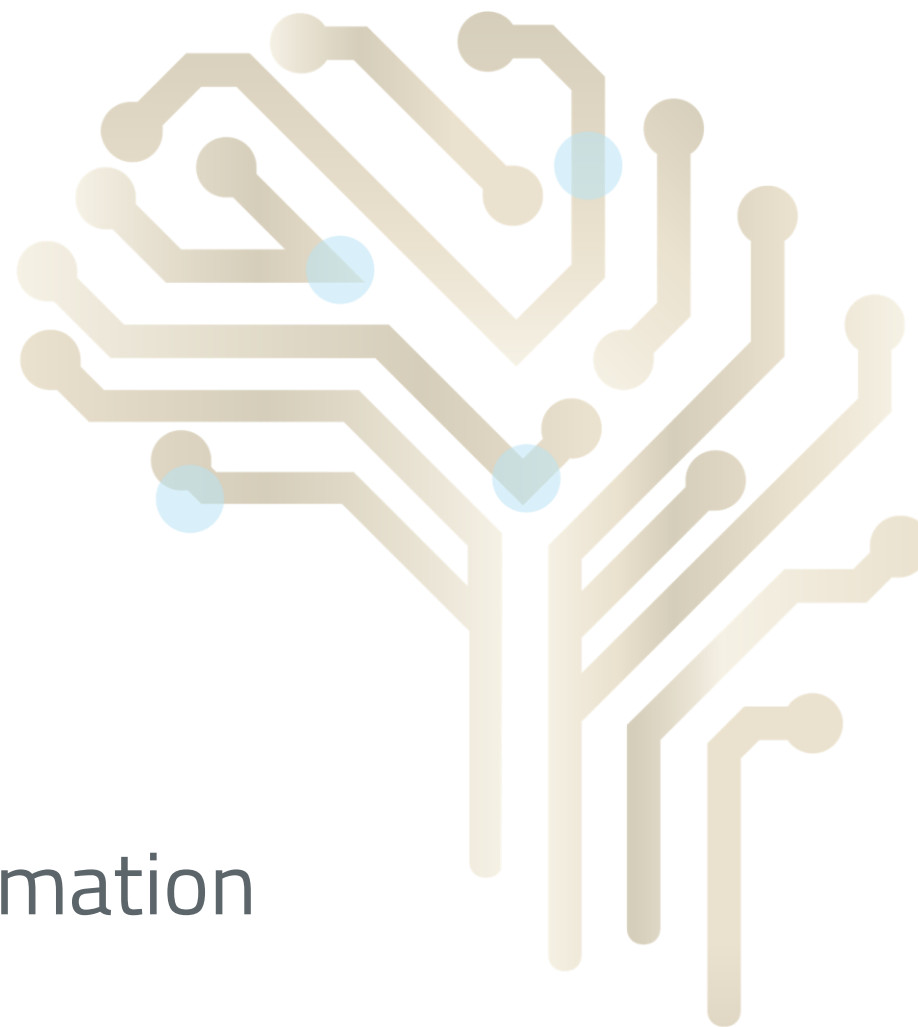


Joint Feasibility Assessment with:



EMP-01 = 3,4-Methylenedioxymethamphetamine
(MDMA) derivative





Investment Highlights & Stock and Financial Information



- ✓ Listing on two global exchanges
- ✓ Lean operations with modest burn
- ✓ Well-capitalized through CY2023
- ✓ A\$40.4M (US\$29.2M) of net cash

- Leading Significant Investors:

PEIRON
INVESTMENT GROUP

BVF
PARTNERS L.P.

PRESIGHT
CAPITAL

MERCK



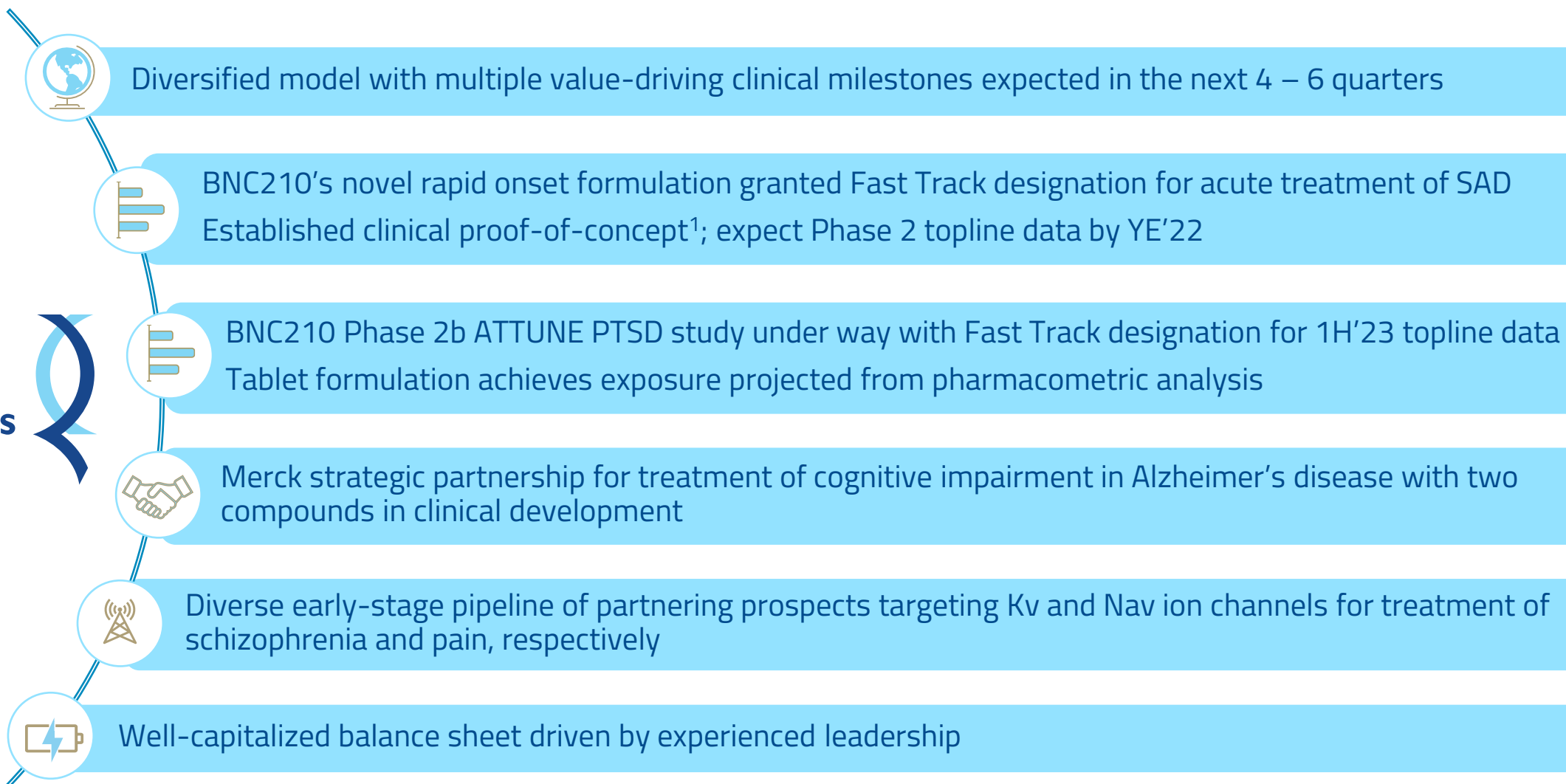
¹Figures as of December 31, 2021.

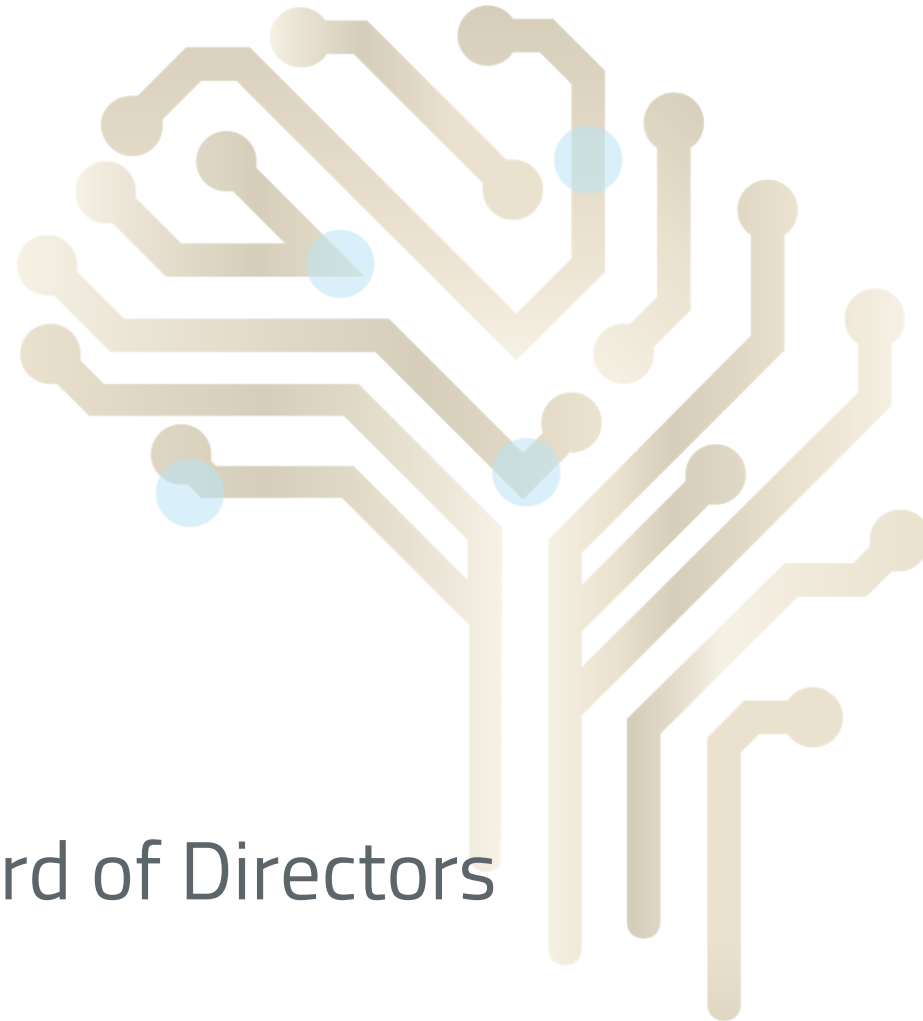
²US dollar figures illustrative- Based on exchange rate of 1.38 as published by the Reserve Bank of Australia as of Dec. 31, 2021.





Bionomics





APPENDIX: Management Team & Board of Directors



Errol De Souza, PhD
Executive Chairman



Connor Bernstein
VP Strategy, Corporate Development & IR



Liz Doolin
VP Clinical Development



Adrian Hinton
Interim Chief Financial Officer

BOARD OF DIRECTORS ¹

Errol De Souza PhD
Executive Chairman



David Wilson
Non-Executive Director



Alan Fisher
Non-Executive Director



Jane Ryan PhD
Non-Executive Director



Aaron Weaver
Apeiron Nominee

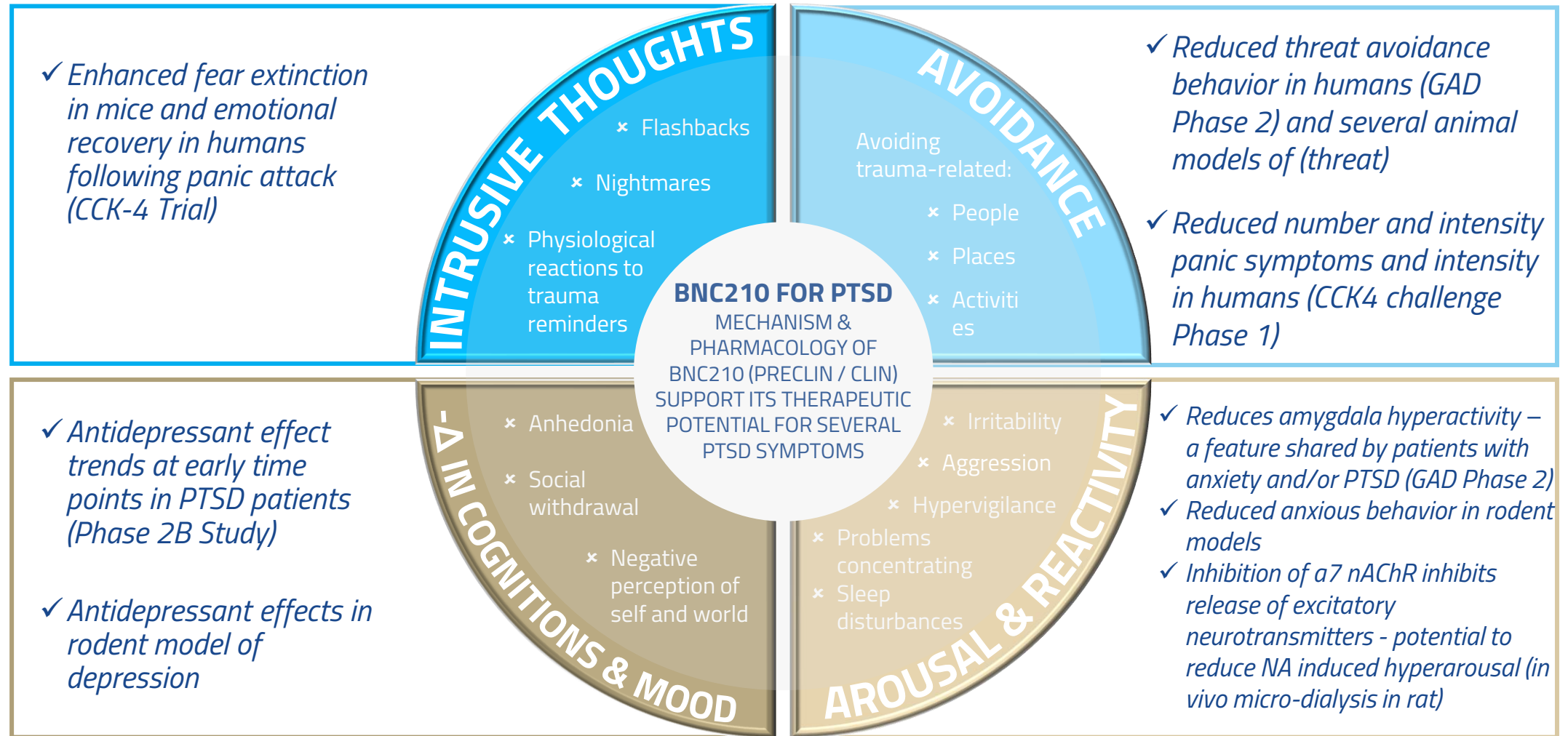


Miles Davies
Apeiron Nominee





APPENDIX: BNC210 Prior Clinical Trial Information





Summary of BNC210 Clinical Trials: Excellent Safety and Tolerability Profile in Healthy Subjects and Patients

Phase	Description	Participants / Setting	Subjects Enrolled / Administered BNC210*	BNC210 Formulation and Doses	Location
1	Single Ascending Dose Safety and PK	Healthy volunteers / In-clinic	32/24	Suspension; single doses (5 to 2000 mg)	Australia
1	Single Ascending Dose Safety and PK; Food Effect	Healthy volunteers / In-clinic	4/3	Suspension; single doses (300 to 2000 mg)	Australia
1	Single Ascending Dose Safety and PK; Food Effect	Healthy volunteers / In-clinic	47/40	Capsule; single doses (300 to 3000 mg)	US
1b	Lorazepam Comparison	Healthy volunteers / In-clinic	24/22	Suspension; single doses (300 and 2000 mg)	France
1b	CCK-4 Panic Attack Model	Healthy volunteers / In-clinic	60/59	Suspension; single doses (2000 mg)	France
1b	Multiple Ascending Dose Safety and PK; Expanded Cohort for EEG Target Engagement	Healthy volunteers / In-clinic	56/44	Suspension; multiple doses (150 to 1000 mg twice daily for 8 days)	France
1	Suspension and Tablet Formulation PK Comparison	Healthy volunteers / In-clinic	6/6	Suspension and tablet; single doses (300 mg)	Australia
1	Single Ascending Dose Safety and PK	Healthy volunteers / In-clinic	5/5	Tablet; single doses (600 to 1200 mg)	Australia
1	Multiple Dosing Safety and PK	Healthy volunteers / In-clinic	10/10	Tablet; multiple doses (900 mg twice daily for 7 days)	Australia
2a	Imaging and Behavioral Study In Generalized Anxiety Disorder	Generalized anxiety disorder patients / In-clinic	27/25	Suspension; single doses (300 and 2000 mg)	UK
2a	Agitation in the Elderly in Hospital Setting	Agitated elderly patients / Hospital	38/18	Suspension; multiple doses (300 mg twice daily for 5 days)	Australia
2	Post-Traumatic Stress Disorder	Post-traumatic stress disorder patients / Out-patient	193/143	Suspension; multiple doses (150, 300 or 600 mg twice daily for 12 weeks)	Australia US
2b	Post-Traumatic Stress Disorder	Post-traumatic stress disorder patients / Out-patient	Ongoing	Tablet; multiple doses (900 mg twice daily for 12 weeks)	US

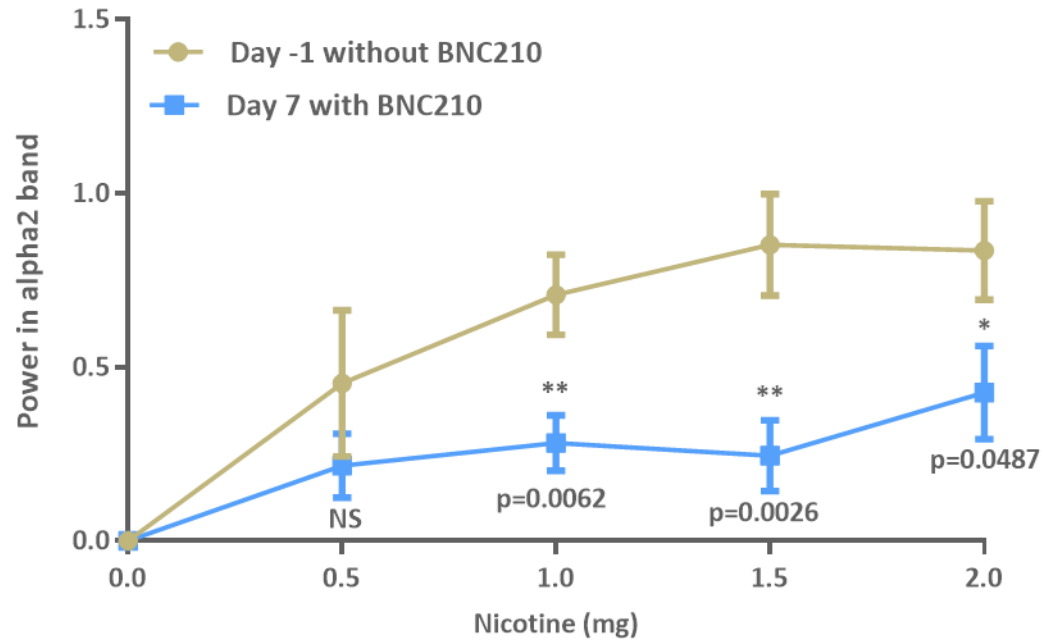
** The number of enrolled subjects who were administered BNC210; other enrolled subjects were administered placebo only*
CCK-4 = Cholecystokinin Tetrapeptide
EEG = Electroencephalography
PK = Pharmacokinetic





BNC210
blood-brain
barrier
penetration and
nicotinic receptor
target
engagement in
humans

BNC210 Reduced Nicotine-induced EEG Responses



Activation of nicotinic receptors
in the brain **induces EEG response**


$\alpha 4 \beta 2$ and $\alpha 7$ receptors are the
major nAChR populations targeted

BNC210 daily oral dosing reduced
nicotine-induced EEG in the $\alpha 2$ band



Observed reduction in EEG response due to BNC210's **negative allosteric modulation** of the $\alpha 7$ receptors





Study Design	<ul style="list-style-type: none">• Multi-center, randomized, double-blind, placebo-controlled• BNC210 150 mg, 300 mg, 600 mg and placebo (1:1:1:1) (liquid suspension formulation taken twice daily, b.i.d.)• 12-week treatment period• 193 participants• 20 US sites / 6 Australian sites
Key Selection Criteria	<ul style="list-style-type: none">• Current diagnosis of PTSD as defined by CAPS-5 (Clinician-Administered PTSD Scale for DSM-5)
Key Study Objectives	<ul style="list-style-type: none">• To assess the effects of BNC210 on investigator-rated symptoms of PTSD measured by CAPS-5• To assess the safety and tolerability of BNC210 in subjects with PTSD



No overall effect on primary endpoint of CAPS-5 total severity score at 12 weeks

Australian patients had a greater improvement over placebo than US patients

- ✓CAPS-5 statistically significant at Week 4 in Australians ($p < 0.05$)

Evidence of antidepressant effect in high dose treatment group in total population

- ✓CAPS-5 Criterion D overall (negative alterations in cognitions and mood) statistically significant at Week 1 ($p < 0.05$)
- ✓CAPS-5 Criterion D, Question 2 (persistent and exaggerated negative beliefs or expectations) statistically significant at Week 1 ($p = 0.001$)
- ✓CAPS-5 Criterion D, Question 4 (persistent negative emotional state) statistically significant at Weeks 4 and 8 ($p < 0.05$)

Trend for anxiolytic effect in high dose treatment group in the total population

- ✓Trend towards improvement on CAPS-5 Criterion E (marked alterations in arousal and reactivity), Question 3 (hypervigilance)
- ✓Trend towards improvement on CAPS-5 Criterion E, Question 4 (exaggerated startle response)

BNC210 was well tolerated in patients with PTSD

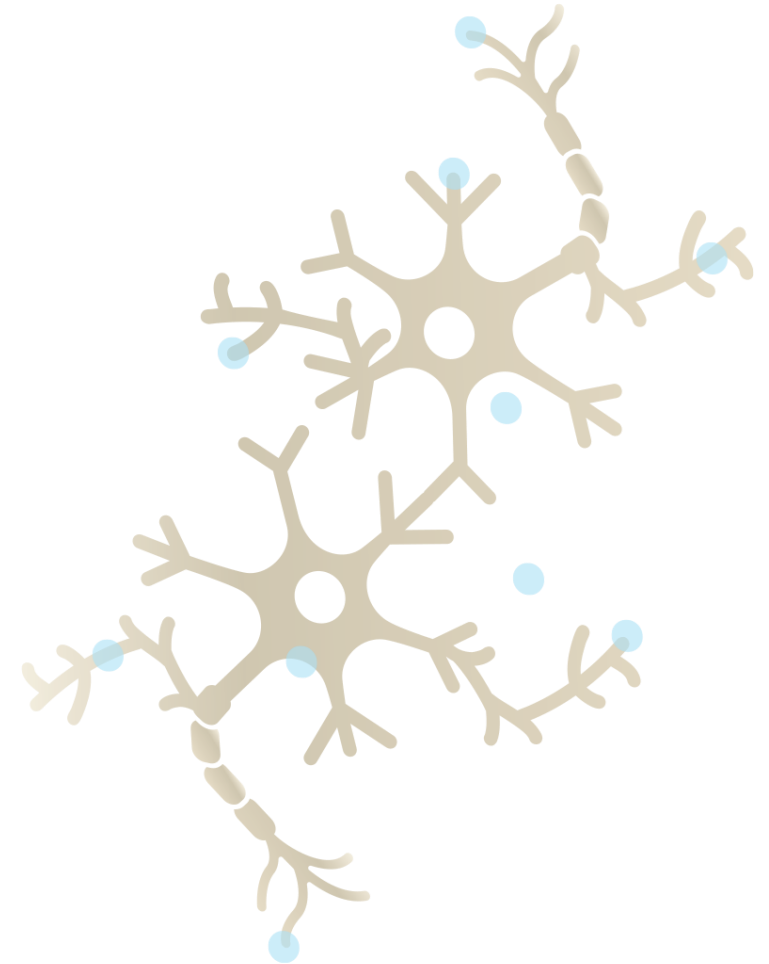
- ✓No trend for increased adverse events with treatment
- ✓No evidence of cognitive impairment
- ✓No evidence of suicidal ideation or behavior worsening

Potential reasons why clinically significant effects and trends seen at early time points did not translate into significant primary endpoint on CAPS-5 at 12 Weeks

- Inadequate overall blood exposure of BNC210
- Lower compliance with liquid suspension formulation which needed to be taken with food



Emerging CNS Pipeline for Partnering





Promising therapeutic strategy for improving cognitive dysfunction and social withdrawal symptoms

Potential in *schizophrenia, Autism Spectrum disorders* and conditions with *cognitive impairments*

**~600 COMPOUNDS
SYNTHESIZED**

2 SERIES PATENTED

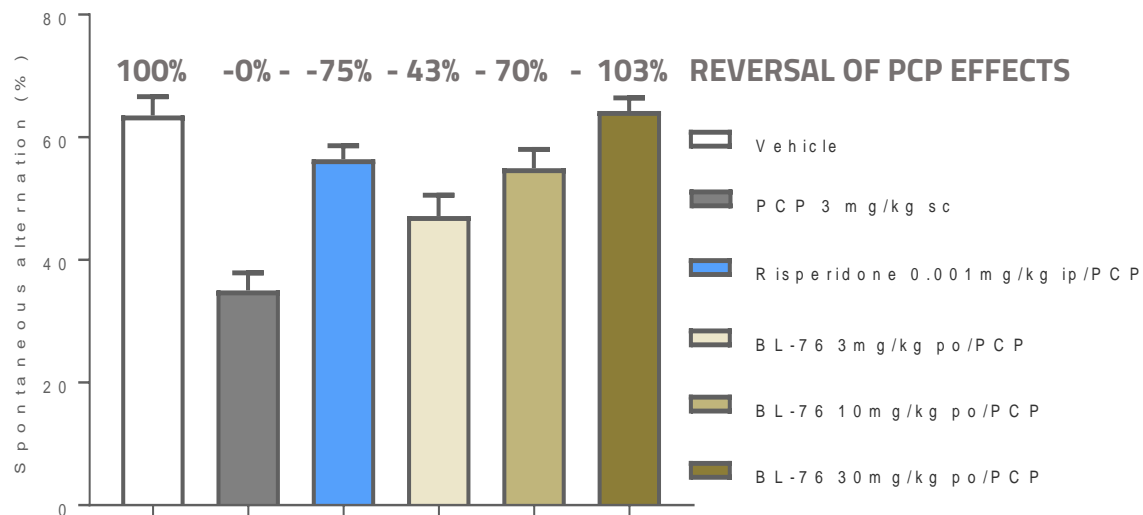
Lead
Compound
BL-76

**Back-up
Compounds**

2 Patents Published

Bionomics' molecules target Kv3.1/3.2 ion channels on parvalbumin positive, gabaergic interneurons in the pre-frontal cortex

Lead Compound BL-76 Fully Reverses PCP-induced Cognitive Deficit in Mice in the T-maze





***Disease-Related
Genetics***

*Gain & Loss-of-function
mutations in Nav1.7, 1.8
and 1.9*

*Associated with human pain
syndromes where extreme
pain or no pain is experienced*

BNO Pan Nav inhibitors

*Small molecules with
functional selectivity for
voltage gated sodium
channels: Nav1.7,
Nav1.8 and potentially
Nav1.9*

**1000+ COMPOUNDS
SYNTHESIZED**

2 SERIES PATENTED

LEAD
COMPOUND
BL-017881

BACK-UP
COMPOUNDS

3 Patents Published

**Lead Candidate
Identified**

BL-017881

**OBSERVED TO
REVERSE PAIN IN
THE FORMALIN PAW
MODEL IN MICE**



APPENDIX: Building Value Through Legacy Oncology Assets





Exclusive BNC101 Oncology License Agreement for the Development of CAR-T Therapeutics



- Exclusive Agreement to license Bionomics' BNC101 oncology drug candidate to Carina Biotech for the development of Chimeric Antigen Receptor T cell (**CAR-T**) therapy, which harnesses the body's immune system to fight cancer.
- Bionomics is eligible to receive up to A\$118 million in clinical & development milestones plus royalty payments if Carina fully develops and markets the new therapy. In the event that Carina sub-licenses the CAR-T treatment, Bionomics is eligible to share in the sub-licensing revenues in early clinical development and receive a substantial double-digit portion of the revenues in later stages of clinical development.
- ***In September 2021, Carina announced that it plans to initiate a clinical trial of BNC101 CAR-T therapy for the treatment of advanced colorectal (bowel) cancer in late 2022***
- Bionomics retains BNC101 for other types of therapies

