
**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION**
Washington, D.C. 20549

FORM 6-K

**REPORT OF FOREIGN PRIVATE ISSUER
PURSUANT TO SECTION 13a-16 OR 15d-16
UNDER THE SECURITIES EXCHANGE ACT OF 1934**

For the Month of January 2022

Commission File Number: 001-41157

BIONOMICS LIMITED
(Exact Name of Registrant as Specified in Its Charter)

200 Greenhill Road
Eastwood SA 5063
Australia
Tel: +618 8150 7400
(Address of principal executive offices)

Indicate by check mark whether the registrant files or will file annual reports under cover of Form 20-F or Form 40-F.

Form 20-F Form 40-F

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(1):

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(7):

INFORMATION CONTAINED IN THIS REPORT ON FORM 6-K

On January 9, 2022, Bionomics Limited (the "Company") lodged a presentation with the Australian Securities Exchange (the "ASX"), as required by the laws and regulations of Australia, that it presented at the H.C. Wainwright BioConnect Conference. The presentation is furnished herewith as Exhibit 99.1 to this report on Form 6-K.

The information set forth in the paragraph above shall not be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or under the Securities Exchange Act of 1934, whether made before or after the date hereof, except as expressly provided by specific reference in such a filing.

The furnishing of the attached presentation is not an admission as to the materiality of any information therein. The information contained in the corporate presentation is summary information that is intended to be considered in the context of more complete information included in the Company's filings with the Securities and Exchange Commission (the "SEC") and other public announcements that the Company has made and may make, by press release or otherwise, from time to time. The Company undertakes no duty or obligation to update or revise the information contained in this report, although it may do so from time to time as its management believes is appropriate. Any such updating may be made through the filing or furnishing of other reports or documents with the SEC, through press releases, by updating its website or through other public disclosures.

Exhibits

99.1 [Bionomics Presentation for H.C. Wainwright BioConnect 2022](#)

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, as amended, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Bionomics Limited

Date: January 12, 2022

By: /s/ Errol De Souza

Name: Errol De Souza, Ph.D.

Title: Executive Chairman

TO IMPROVE THE LIVES OF PATIENTS WITH SERIOUS CNS DISORDERS

Corporate Presentation

Nasdaq: BNOX
ASX: BNO

H.C. Wainwright BIOCONNECT Virtual Conference
January 10 - 13, 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.

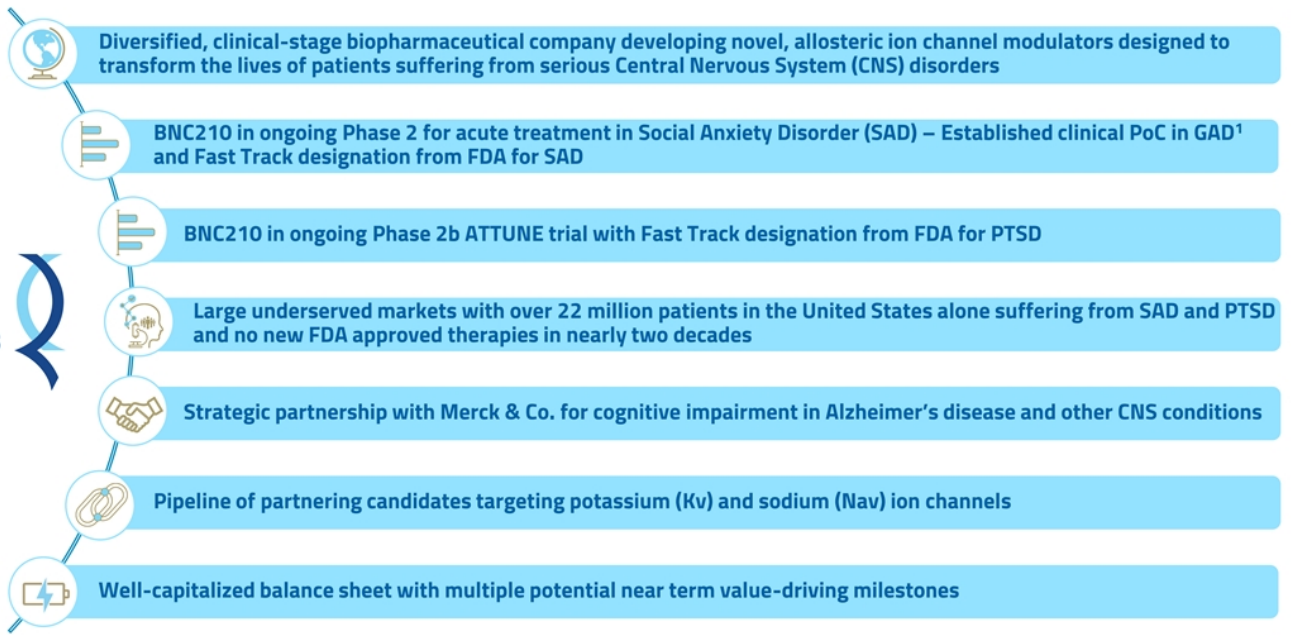
Subject to the requirements of any applicable legislation or the listing rules of any stock exchange on which our securities are quoted, we disclaim any intention or obligation to update any forward-looking statements as a result of developments occurring after the date of this presentation.

Certain information contained in this presentation relates to, or is based on, studies, publications, surveys and other data obtained from third party sources and Bionomics' own internal estimates and research. While we believe these third party sources to be reliable as of the date of this presentation, we have not independently verified, and make no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third party sources. In addition, all of the market data included in this presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while we believe our own internal research is reliable, such research has not been verified by any independent source.









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

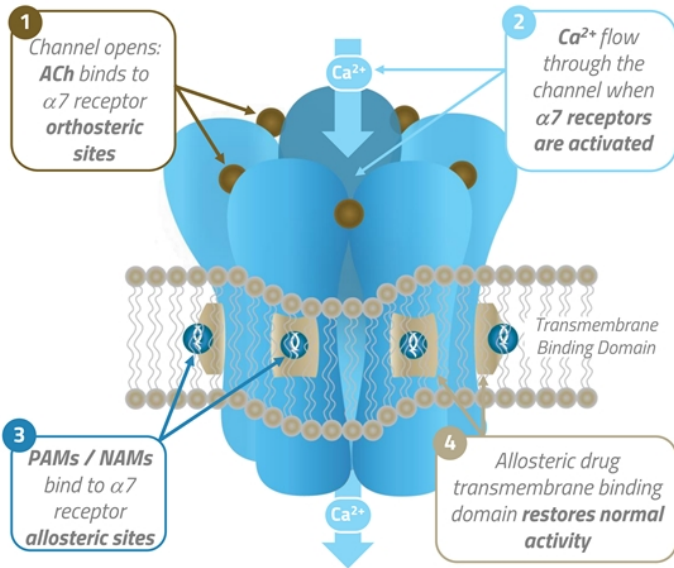


PROGRAM	PRECLINICAL	PHASE 1	PHASE 2	PHASE 3	EXPECTED TIMING
BNC210 α7 receptor NAM 	Post-Traumatic Stress Disorder (PTSD)  200 patients across ~25 centers in US				<i>Study underway Topline Data: 1H'23</i>
	Social Anxiety Disorder (SAD)  150 patients across ~15 centers in US				<i>Study underway Topline Data: YE'22</i>
	+MDMA derivative EMP-01 (PTSD)	<i>Memorandum of Understanding to explore combination treatment regimen for PTSD</i>			<i>Ongoing</i>
 α7 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				

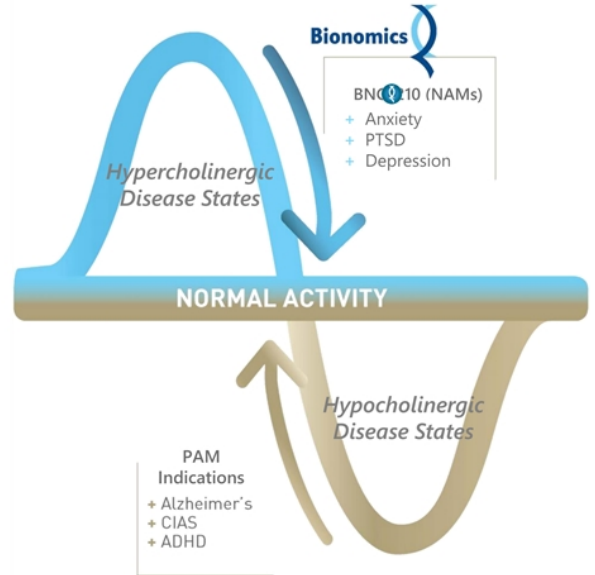




Normalizing Effect Utilizing Allosteric Modulation



Targeting **Distinct CNS Conditions** with **Neurotransmitter Imbalance**




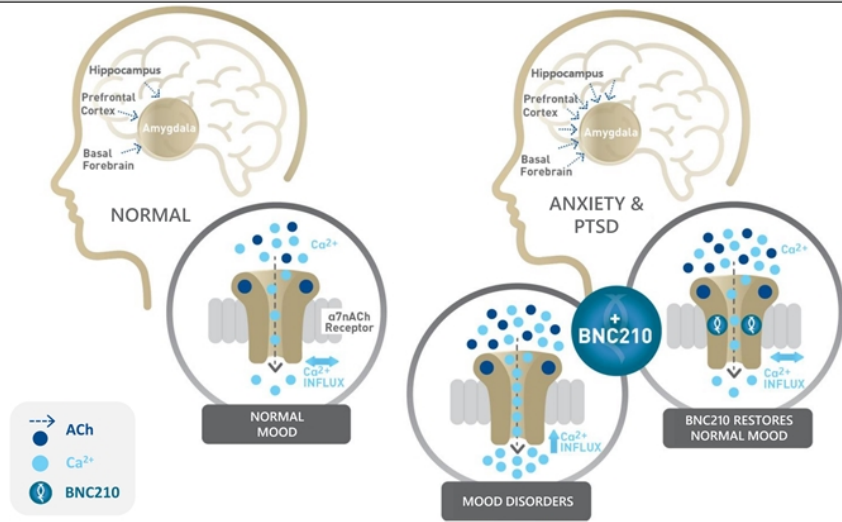
Bionomics


Ca^{2+} = Calcium ions
 ACh = Acetylcholine
 NAM = Negative Allosteric Modulator
 PAM = Positive Allosteric Modulator
 Cholinergic = System associated with memory, selective attention, and emotional processing cognitive functions
 PTSD = Post-Traumatic Stress Disorder
 CIAS = Cognitive Impairment Associated with Schizophrenia
 ADHD = Attention Deficit Hyperactivity Disorder






 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

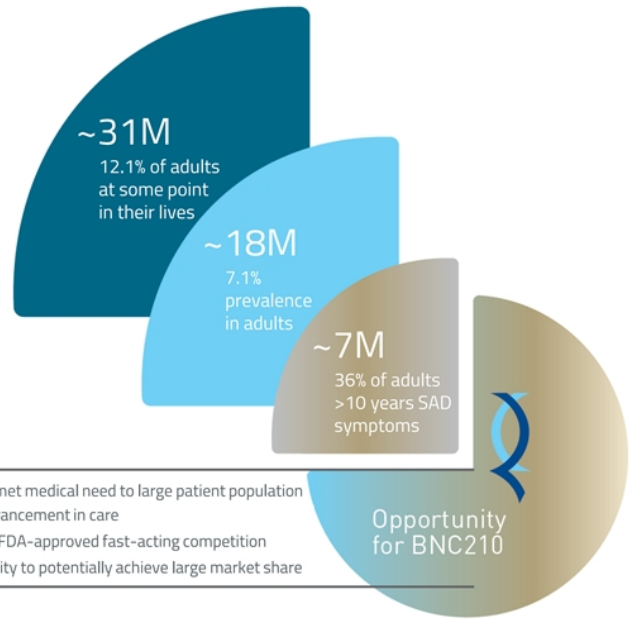


Includes anxiety from everyday social situations as well as "Fear of Public Speaking"



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



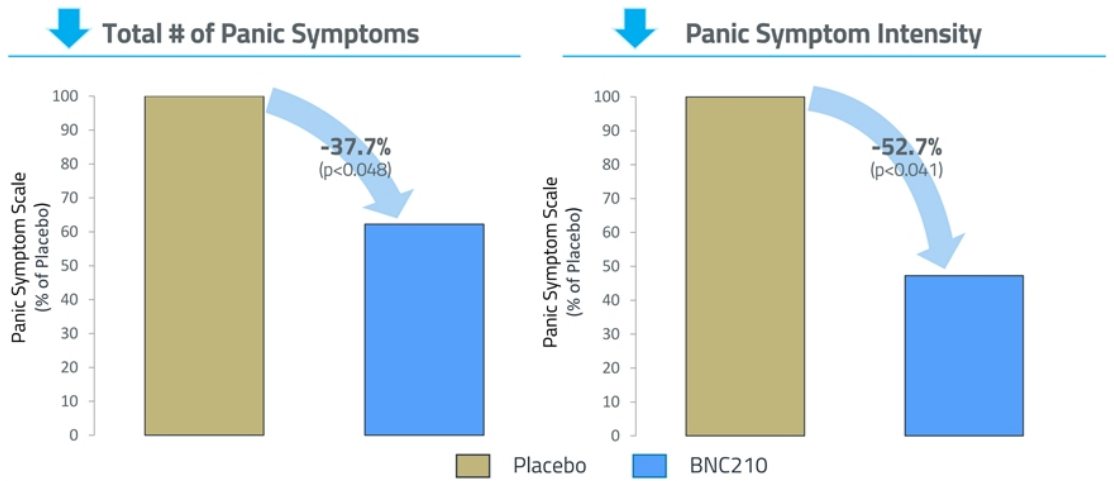
Bionomics

Sources:
 US Census Bureau. <https://www.census.gov/library/stories/2021/08/united-states-adult-population-grew-faster-than-nations-total-population-from-2010-to-2020.html>
 NIMH. "Social Anxiety Disorder" data from 2017 National Comorbidity Survey (NCS). <https://www.nimh.nih.gov/health/statistics/social-anxiety-disorder.shtml>
 Anxiety and Depression Association of America (ADAA). "Social Anxiety Disorder - Understand the Facts" <https://adaa.org/understanding-anxiety/social-anxiety-disorder>





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

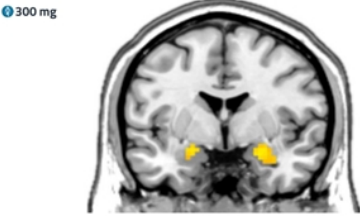


BNC210 demonstrated **statistically significant reduction in both number and intensity of panic symptoms** measured with the Panic Symptom Scale

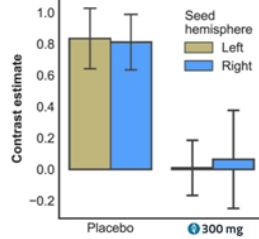




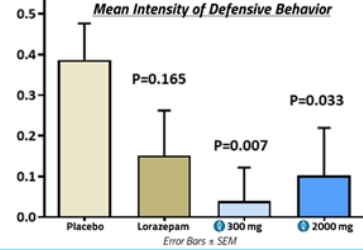
Significantly reduced activation of L & R amygdala caused by viewing fearful faces (L: $p < 0.05$; R: $p < 0.01$)



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

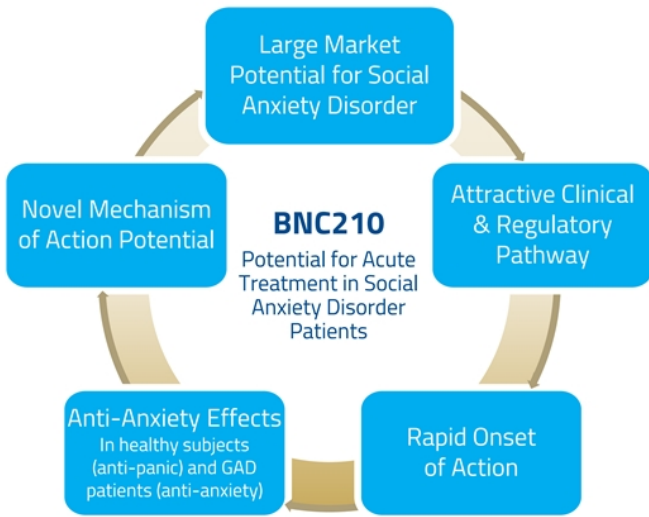


- **Amygdala activation is an imaging surrogate for anxiety**
- **Connectivity between the amygdala and Anterior Cingulate Cortex (ACC) is very strong in high anxiety**

Bionomics

© = BNC210
 Wise T. et al, Biological Psychiatry 2020 (<https://doi.org/10.1016/j.biopsych.2019.12.013>); Perkins A. et al, Translational Psychiatry 2021 (<https://doi.org/10.1038/s41398-020-01141-5>)
 GAD = Generalized Anxiety Disorder
 JORT = Joystick Operated Runway Task
 fMRI = Functional Magnetic Resonance Imaging





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

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	☑	☑	☑	☑	☑

Bionomics

* Potential benefits based on analysis of data from separate studies and not on results that might have been obtained from head-to-head studies. Such data may not be directly comparable due to differences in study protocols, conditions and patient populations. Accordingly, cross-trial comparisons may not be reliable predictors of the relative efficacy or other benefits of BNC210 compared to existing therapies or other product candidates that may be approved or are in development for the treatment of PTSD or SAD.
 1. Includes Valium and certain other benzodiazepines
 2. Includes Prozac and certain other SSRIs (Selective Serotonin Reuptake Inhibitors) / SNRIs (Serotonin-Norepinephrine Reuptake Inhibitors)






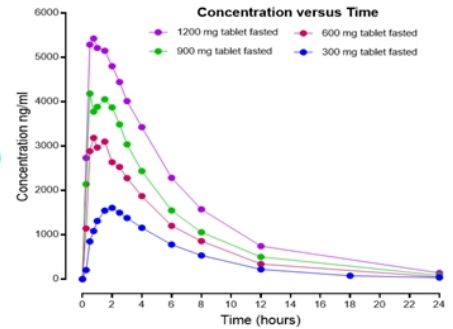
✓ **Emerging Regulatory Landscape & Unmet Need**

- No fast-acting FDA-approved medications for as-needed treatment of SAD
- 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 social 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

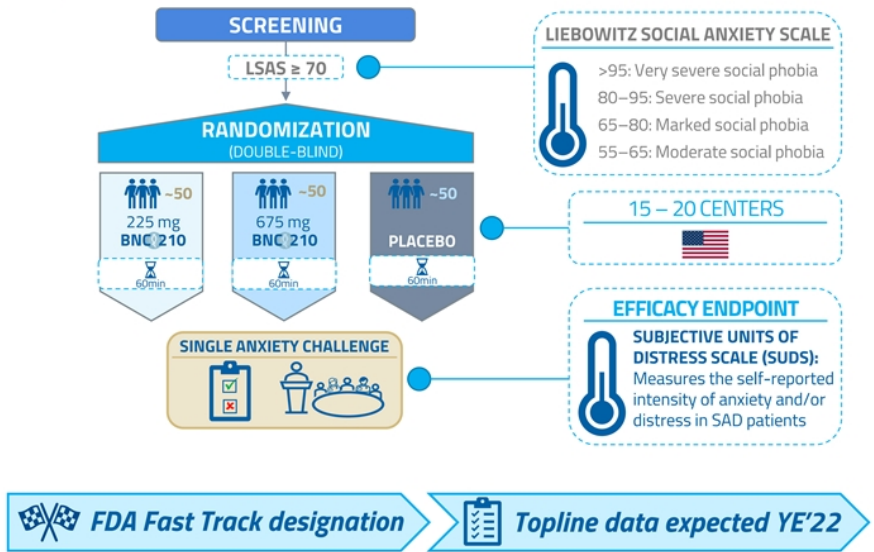

Maximum concentrations reached in ~45 – 105 min. across the dose range



Acute Social Anxiety Disorder Study Highlights

- ✓ Potential to conduct a cost-effective trial with an efficacy endpoint conducive to rapid data generation
- ✓ Ability to leverage development strategies of other Social Anxiety Disorder public CNS trial designs
- ✓ 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



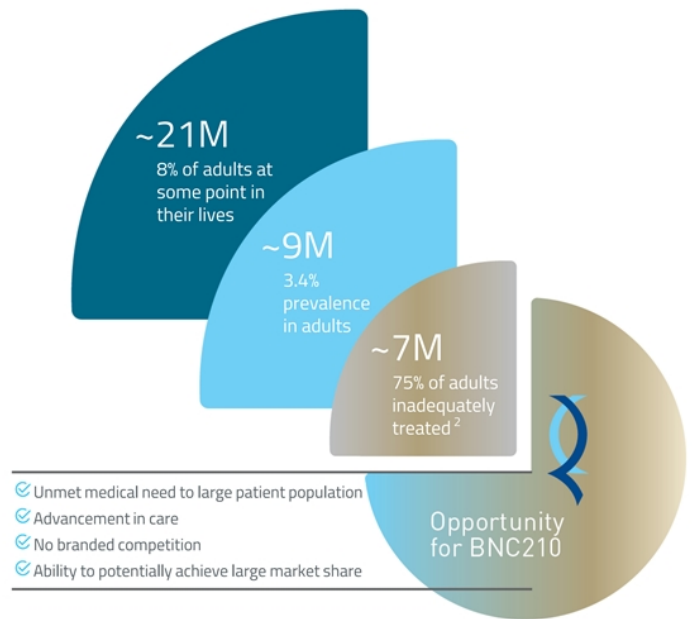


BNC210 in Post-Traumatic Stress Disorder



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
- ✓ PTSD 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




Bionomics

¹ Kilpatrick, D., Resnick, H., Milanak, M., Miller, M., Keyes, K. and Friedman, M., 2013. National Estimates of Exposure to Traumatic Events and PTSD Prevalence Using DSM-IV and DSM-5 Criteria. *Journal of Traumatic Stress*, 26(5), pp.537–547; 2 Mayo LM, Asratian A, Lindé J et al. Elevated Anandamide, Enhanced Recall of Fear Extinction, and Attenuated Stress Responses Following Inhibition of Fatty Acid Amide Hydrolyase: A Randomized, Controlled Experimental Medicine Trial. *Biol Psychiatry*, 2020 Mar 15; 87(6): 538-54

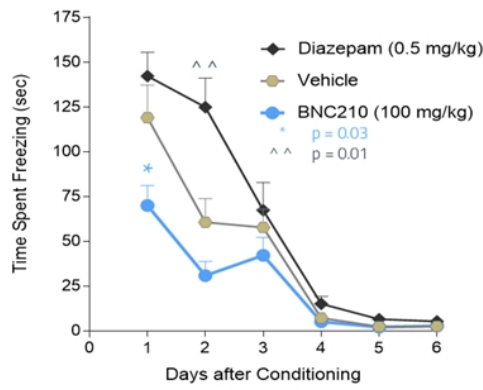
² Only 20 to 30% of PTSD patients achieve clinical remission on SSRI therapies.
US Census Bureau. <https://www.census.gov/library/stories/2021/08/united-states-adult-population-grew-faster-than-nations-total-population-from-2010-to-2020.html>





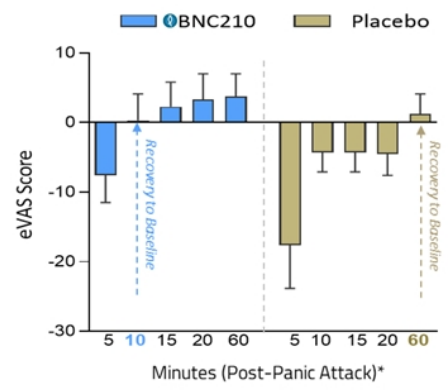
 People with **anxiety disorders and PTSD** have **amplified fear responses** to trauma- or stress-related stimuli and **impaired fear extinction**

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

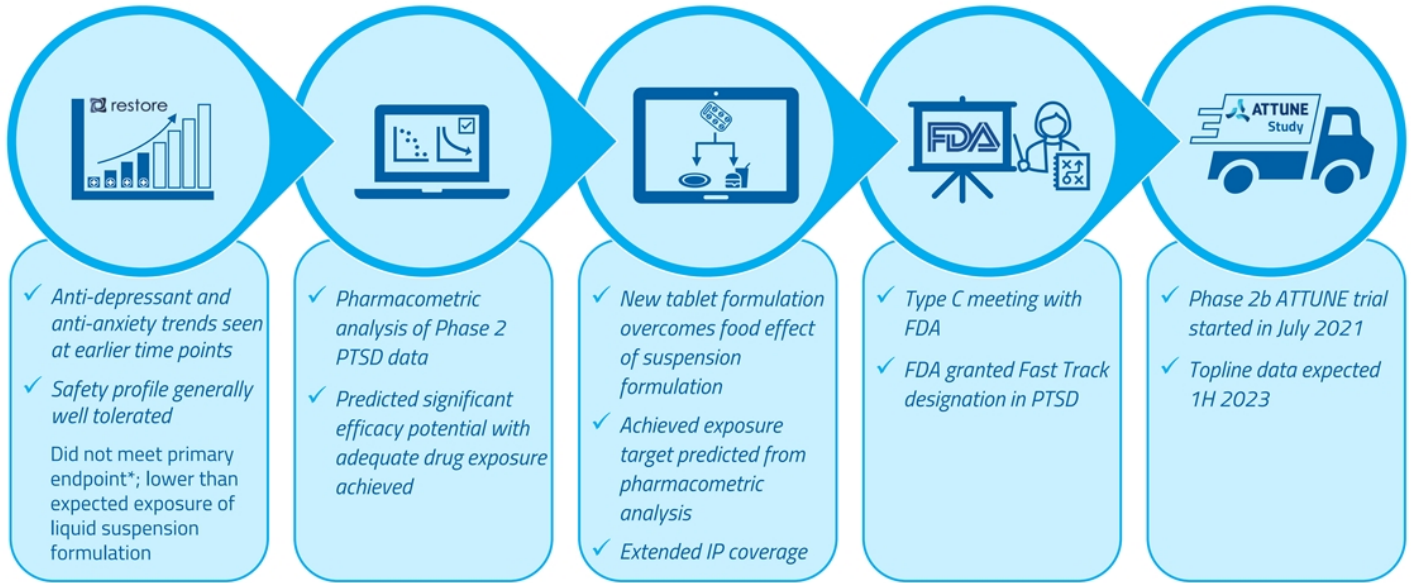
Bionomics

*Time in minutes after CCK-4 injection

CCK-4 = Cholecystokinin Tetrapeptide (a peptide that induces anxiety and panic symptoms)

eVAS = Emotional Visual Analog Scale





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



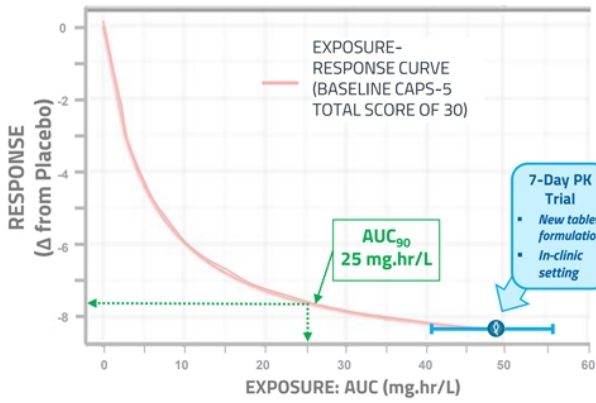


PMX modelling on prior Phase 2 PTSD trial identified liquid suspension under-exposure

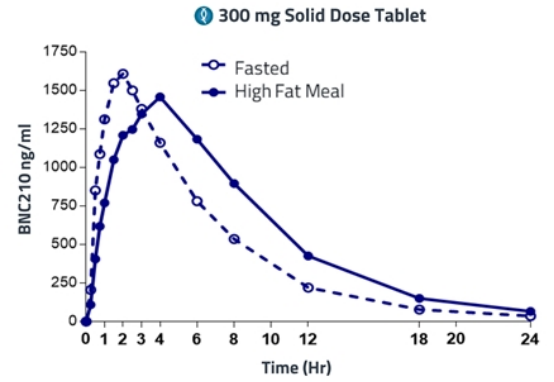
BNC210 tablet formulation

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

Pharmacometric (PMX) Analysis Target Exposure



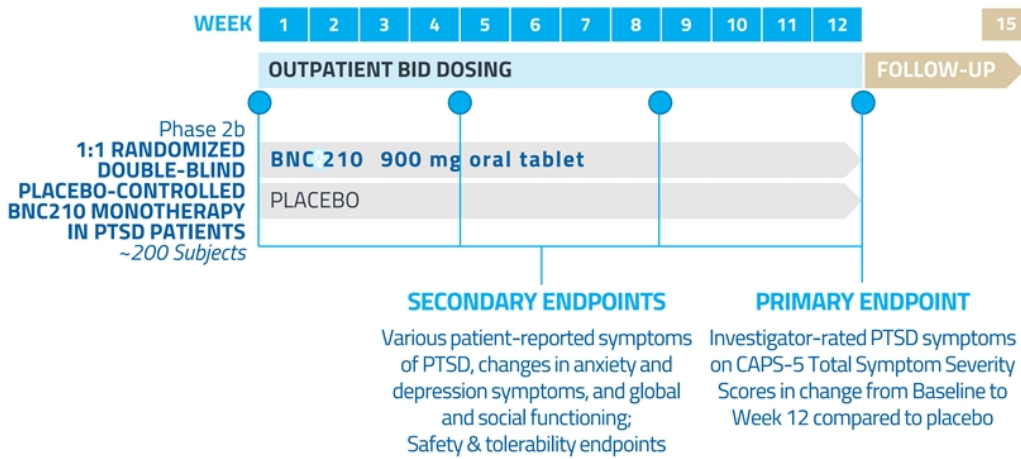
BNC210 Novel Spray Dry Dispersion Formulation



↑ **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

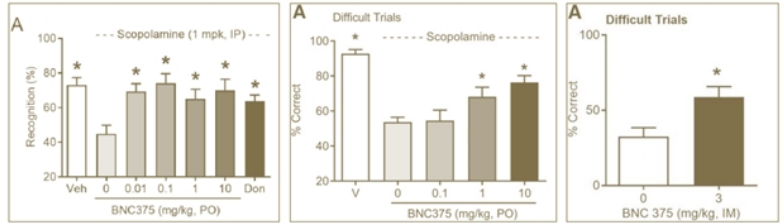
- Entered into in 2014 to develop $\alpha 7$ receptor PAMs targeting cognitive dysfunction associated with Alzheimer’s disease and other central nervous system conditions
- Merck funds all R&D activities including clinical development and WW commercialization of any products from collaboration
- Milestone 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



Bionomics

Wang et al. J Pharmacol Exp Ther 373:311–324, May 2020 <https://pubmed.ncbi.nlm.nih.gov/32094294/>
PAM = Positive allosteric modulator
MSD = A trademark of Merck & Co., Inc., Kenilworth NJ USA





Joint Feasibility Assessment with:



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

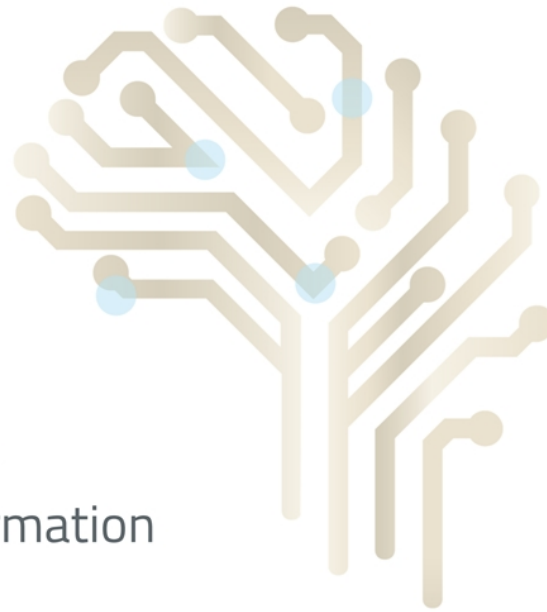
DAILY NEWS
Word • Business • Finance • Lifestyle • Travel • Sport • Weather
22 February 2021 Illustrative

**Memorandum of Understanding
with EmpathBio's MDMA Derivative**

- Initial collaborative framework of preclinical studies to collectively explore a combination drug treatment regimen with BNC210 and EMP-01
- MDMA-assisted psychotherapy has demonstrated significant symptom improvement in PTSD patients
- FDA has granted a Breakthrough Therapy designation to MDMA-assisted psychotherapy
- EmpathBio is developing MDMA derivatives that may permit the entactogenic effects of MDMA to be separated from some of the known adverse effects
- To explore the possibility of a combination treatment regimen warranting clinical evaluation

Bionomics





Investment Highlights & Stock and Financial Information

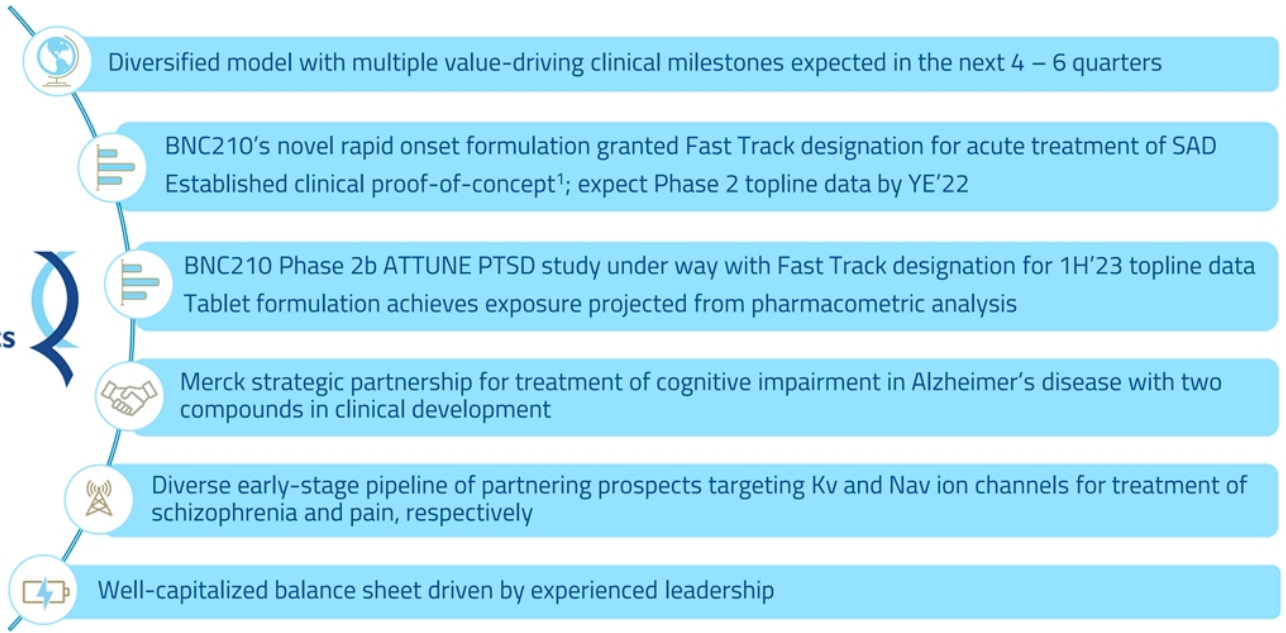




- Cash: US\$40.4M / A\$53.9M
- Debt: \$0
- Shares Outstanding: ~1,310M (NASDAQ:BNOX | ASX:BNO)
- Warrants Outstanding: 142M (WAEP = US\$0.04 / A\$0.06)
- Significant Investors:
 - Biotechnology Value Fund
 - Apeiron Investment Group Ltd.
 - Merck & Co



Bionomics



Bionomics

SAD = Social Anxiety Disorder
PTSD = Post-Traumatic Stress Disorder
1. Wise T. et al, Biological Psychiatry 2020 (<https://doi.org/10.1016/j.biopsych.2019.12.013>); Perkins A. et al, Translational Psychiatry 2021 (<https://doi.org/10.1038/s41398-020-01161-5>)





APPENDIX:
Management Team & Board of Directors





Errol De Souza, PhD
Executive Chairman



Connor Bernstein
VP Strategy & Corporate Development



Liz Doolin
VP Clinical Development



Adrian Hinton
Interim Chief Financial Officer

BOARD OF DIRECTORS¹

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



¹ Logos reflect experience in current and/or past roles.





APPENDIX:
BNC210 Prior Clinical Trial Information





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

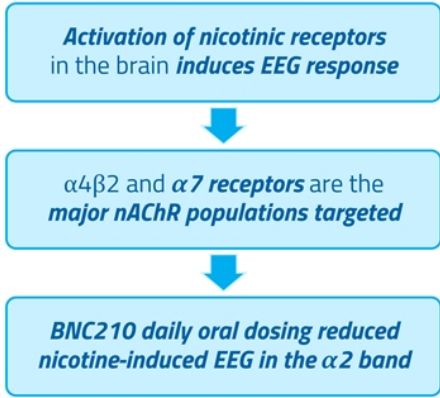
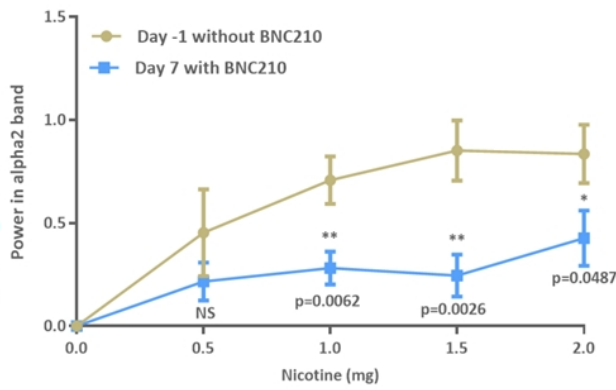
* The number of enrolled subjects who were administered BNC210; other enrolled subjects were administered placebo only
 CCK-4 = Cholecystokinin Tetrapeptide
 EEG = Electroencephalography
 PK = Pharmacokinetic





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

BNC210 Reduced Nicotine-induced EEG Responses



Observed reduction in EEG response due to BNC210's negative allosteric modulation of the α7 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

Bionomics



Emerging CNS Pipeline for Partnering





Promising therapeutic strategy for improving cognitive disfunction and social withdrawal symptoms

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

~600 COMPOUNDS SYNTHESIZED

2 SERIES PATENTED

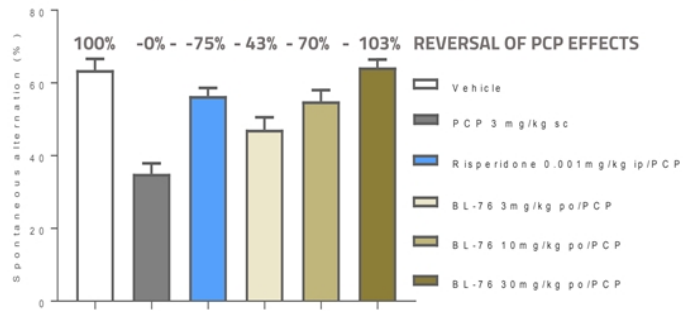
Lead Compound **BL-76**

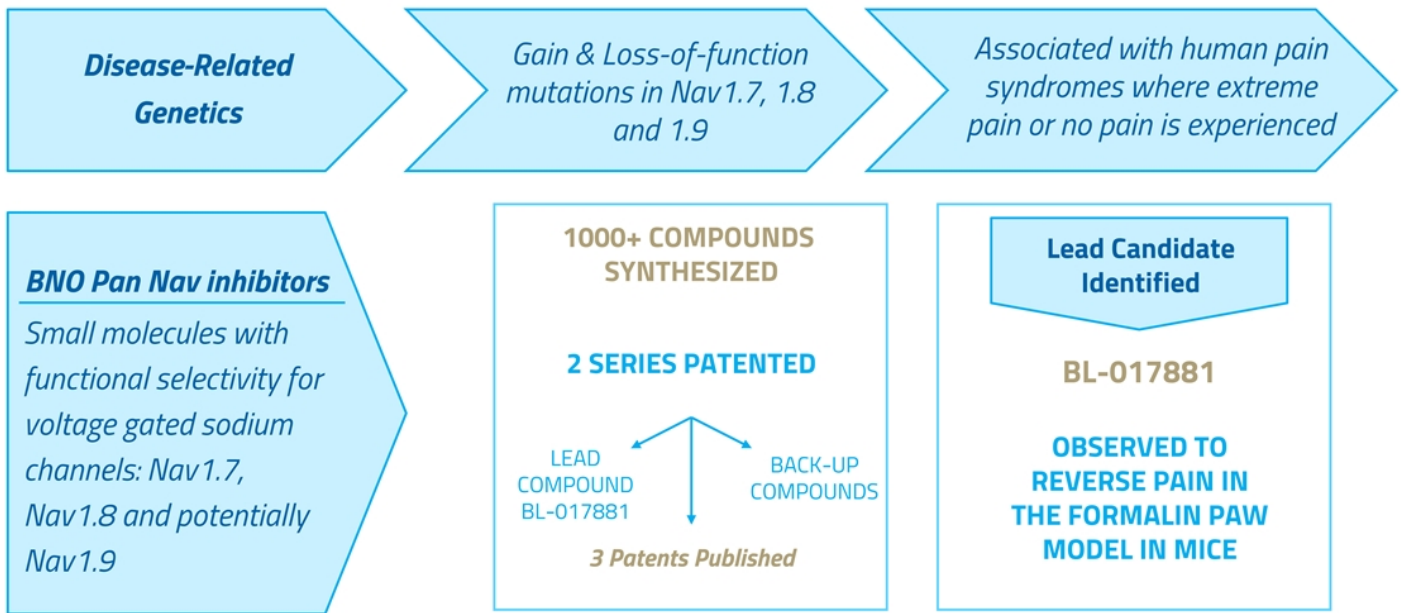
Back-up Compounds

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





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

