



ASX and Media Release

VIRALYTICS INVESTOR PRESENTATION

Viralytics to Present at Australian Microcap Investment Conference

21 October 2014, Sydney, Australia: Viralytics Limited (ASX: VLA, OTC: VRACY) will participate later today at the 5th Annual Australian Microcap Conference in Melbourne.

Managing Director Dr Malcolm McColl will present at the event at 12.15pm.

“Viralytics is pleased to be able to showcase the company’s recent achievements, present an update on the further clinical development of CAVATAK, and describe the substantial potential market opportunity for new agents in the cancer immunotherapy field” said Dr McColl.

The event is the largest in Australia focussing on the microcap sector and will be attended by representatives from over 130 investor groups.

The presentation, which is attached, outlines CAVATAK’s potential in a range of cancer types and provides an update on the company’s clinical trial programme, specifically:

- the successful Phase 2 CALM trial in melanoma patients in the US;
- the Phase 1 / 2 STORM trial in solid cancer patients underway in the UK;
- plans for combination trials involving CAVATAK in late stage melanoma patients; and
- an upcoming Phase 1 clinical trial in non-muscle invasive bladder cancer patients in the UK.

About Viralytics Ltd:

Viralytics is developing oncolytic immunotherapy treatments for a range of cancers. Viralytics’ lead investigational product, CAVATAK™, is a proprietary formulation of the common cold Coxsackievirus Type A21 (CVA21). CVA21 binds to specific ‘receptor’ proteins highly expressed on multiple cancer types including, but not limited to: melanoma; prostate, lung, breast and bladder cancers; and multiple myeloma. CAVATAK™ acts to kill both local and metastatic cancer cells through cell lysis and the potential generation of an immune response against the cancer cells. Together this mechanism of action is known as oncolytic immunotherapy. CAVATAK™’s preferential targeting of cancer cells creates the potential for a more tolerable cancer treatment.

The company has completed enrolment in a single arm Phase 2 clinical trial of intratumourally administered CAVATAK™ in the treatment of Late-stage Melanoma (the CALM study), at multiple prestigious cancer clinics in the US. The study is being conducted in patients with late stage (IIIC and IV) malignant melanoma.

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In addition, Viralytics is progressing a Phase 1/2 trial of CAVATAK™ delivered systemically (intravenously). This trial, referred to as the STORM (Systemic Treatment Of Resistant Malignancies) study, is enrolling patients with melanoma, prostate, lung or metastatic bladder cancers. The second stage of the STORM trial will include combination treatments with existing chemotherapies in one of the above cancer types. The STORM trial is being conducted at three UK cancer centres.

Based in Sydney Australia, the company is listed on the Australian Securities Exchange (ASX: VLA) while Viralytics' ADRs also trade under VRACY on the US OTCQX International market.

Enquiries:

Dr Malcolm McColl
Chief Executive Officer
02 9988 4000

Mr Rudi Michelson
Monsoon Communications
03 9620 3333

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Oncolytic Immunotherapies for Difficult-to-Treat Cancers

OCTOBER 2014

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Disclaimer

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Positioned for Growth

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- Lead product CAVATAK™ with demonstrated potential in a range of indications and treatment settings
- Opportunity for use as monotherapy or in combination with new 'blockbuster' agents
- Transformational \$27M capital raise in 2014 from international healthcare institutions
- Resources to conduct key global clinical trials
- Corporate strategy to license, partner or sell at key value point

CALM:
Success in Phase 2
melanoma clinical
trial (US)

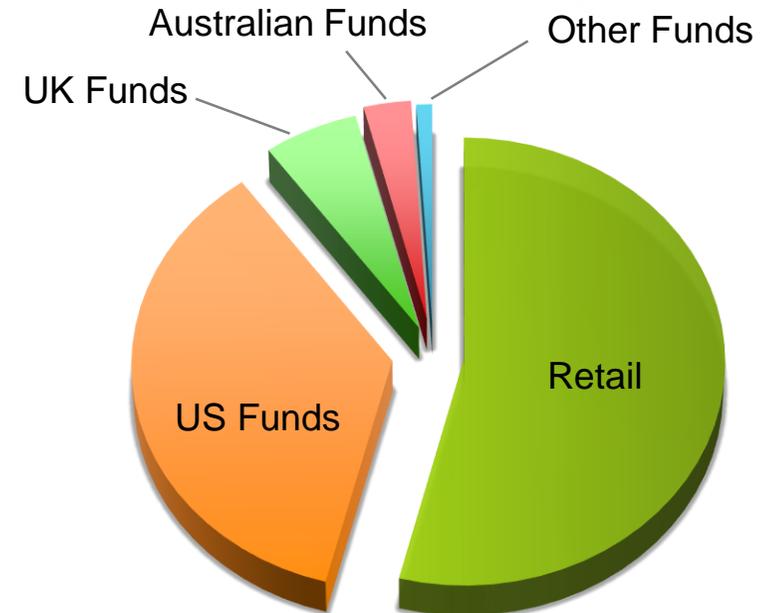
STORM:
Initiated Phase 1/2
in solid tumour
cancers (UK)

**Next Phase 2
melanoma trial:**
Late Planning Stage

Strong Financial Foundation

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Key Statistics	
Ticker Code	ASX: VLA OTCQX: VRACY
Share Price (October 15)	A\$0.28
Market Capitalisation	A\$51.5M
Trading Range (12 month)	A\$ 0.26-0.37
Institutional investors	45%
Cash position (June 30, 2014)	A\$24.3M
Net operating cashburn 2013/14	A\$5.5M



- Strong institutional register
- Leading specialist healthcare institutional investors

Cancer Immunotherapy: Emerging, High-Value Therapeutic Platform

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- Rapidly emerging field, transforming cancer therapy
- Value highlighted by Amgen acquisition of Biovex (TVec™) in 2011
 - US \$425 million cash upfront
 - US \$575 million future milestone payments
- Multiple recent commercial transactions and collaborations
- Roche, GSK, Astra Zeneca, BMS, Merck all active in this field
- Cancer immunotherapy annual revenues could exceed US \$35 billion by 2023*

Opportunities for CAVATAK™ in multiple settings including combination with new agents

Leerink Swann
October 2013 review:
“50% of all cancer treatment could involve immunotherapy within the next decade.”



‘Science’ Magazine
Cancer immunotherapy –
Breakthrough of the
Year 2013

* Citigroup report 2013

CAVATAK™

Lead Product, Many Potential Indications

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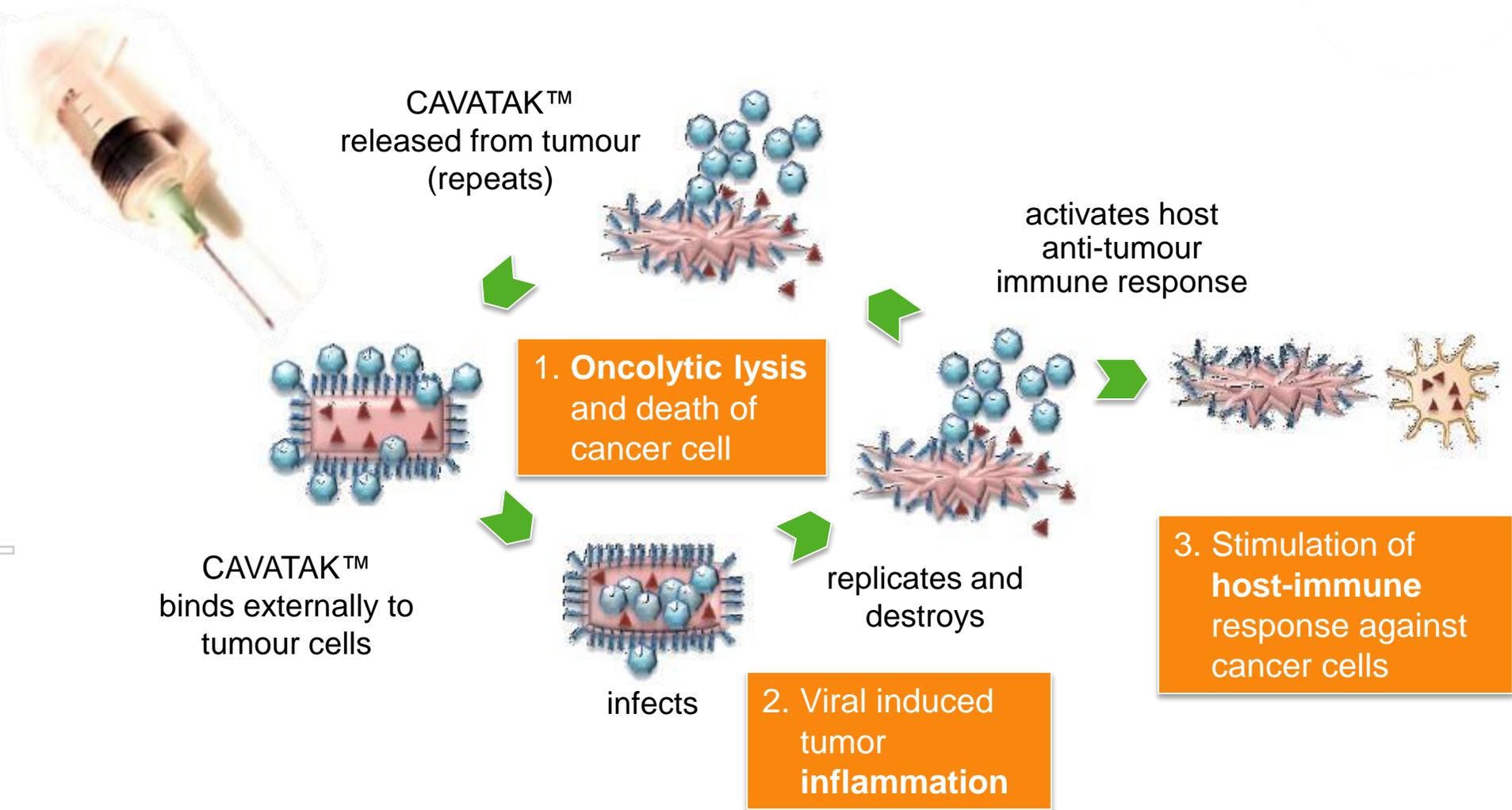
- Proprietary formulation of Coxsackievirus A 21
- Targeted to specific receptor overexpressed on cancer cells (ICAM-1)
- Kills local and metastatic cells by both oncolytic *and* immunotherapeutic activity
- Potential application across a range of cancer types:
 - Intratumoural – melanoma
 - Intravenous – melanoma, prostate, lung, metastatic bladder
 - Intravesical – non-muscle invasive bladder cancer
- Well tolerated in patients - no treatment-related grade 3 or 4 adverse events
- Potential as monotherapy or with other agents
- Manufactured under cGMP at SAFC, California



CAVATAK™

Local and Systemic Activity

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Melanoma – First Target for CAVATAK™

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- Melanoma - potentially fatal malignant skin tumour that can spread throughout the body
- Ranked 5th in US for new cases per annum
- Promising new agents approved BUT sub-optimal activity, drug resistance and toxicity remain issues
- Big pharma race to find complementary agents
- Unmet need for well tolerated agents as monotherapy for earlier stage disease

Opportunities for effective, well tolerated products with potential monotherapy or combination use

STRONG OPPORTUNITIES FOR BRANDED PRODUCTS:

BMS Yervoy™
2011 launch –
\$960M sales in 2013

Roche Zelboraf™
2011 launch –
\$400M sales in 2013

Merck Keytruda™
US launch September 2014
- forecast sales of \$6Bn by 2025[#]

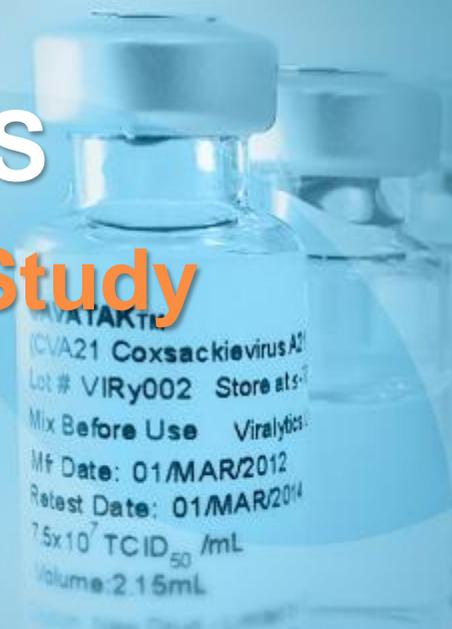
[#] Leerink Swann 2014



CLINICAL TRIAL PROGRESS

CALM Phase 2 Melanoma Study

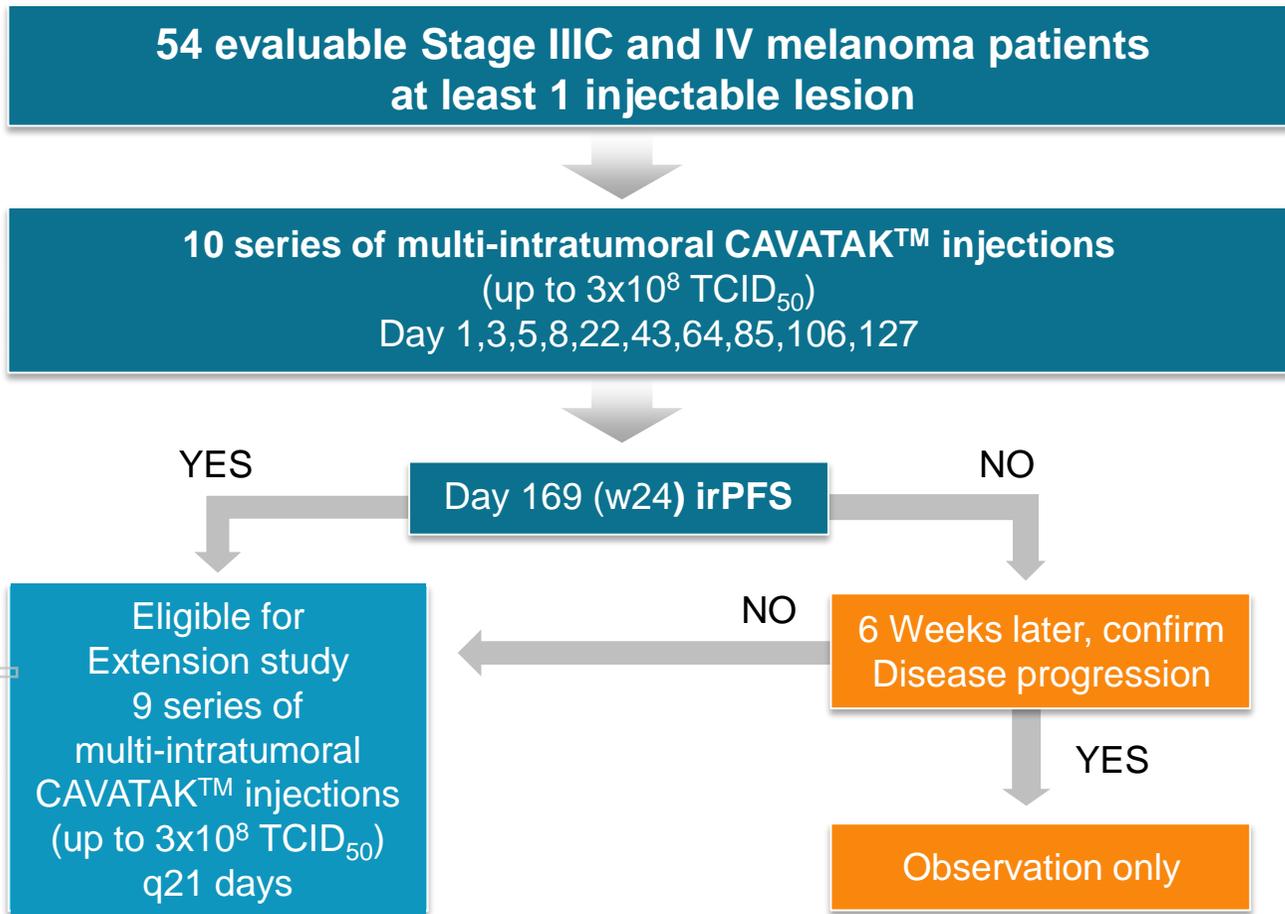
STORM Phase 1/2 Study



CAVATAK™ – Phase 2 CALM Melanoma Study

(CAVATAK IN LATE STAGE MELANOMA)

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- 11 leading US cancer centres. Also participated in Amgen / Biovex studies
- Primary endpoint achieved in first 30 evaluable patients
- Responses in injected and metastatic (non injected) tumours
- Well tolerated
- Results presented to global conferences

CAVATAK™ / Biovex OncoVex™ results

	Viralytics CAVATAK™ Phase 2 CALM Melanoma Interim Data *	Biovex OncoVex™ Phase 2 Melanoma Final Data ^
	September 29, 2014 [#]	
Number of patients	57	50
Stage of Disease	IIIC-IV	IIIC-IV
ir Progression-Free Survival - 6 months	39% (22/57)	Not reported
ir Progression-Free Survival - 3 months	50% [#]	50% ^{^^}
One-year survival rate	73% (33/45)	58%
Overall Response Rate	28% (16/57)	26% (13/50)
Median Time to Response (TTR) Onset	2.8 months	Not reported ^{**}
Activity in injected and non injected lesions	✓	✓
No grade 3 or 4 drug-related adverse events	✓	
Met primary endpoint prior to full enrolment	✓	

* Interim data lodged with ASX and Investigator assessed (refer ASX announcement for full details)

^ Data from Senzer et al, 2009. J. Clin.Oncol., (34):5763-7;

^^ Referred to as Disease control rate in Senzer et al, 2009. J. Clin.Oncol., (34):5763-7;

50% irPFS when assessed in 38 patients in November 2013

** Median TTR reported at 4.1 months in Phase 3 trial ESMO 2013

CAVATAK™ — Well Tolerated in Clinical Testing

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CAVATAK-related adverse events⁺

AE Term	*Grade 1 n(%)	Grade 2 n(%)	Grade 3 n(%)	Grade 4 n(%)
Injection site pain	16 (35%)	2 (4%)		
Tiredness (fatigue)	15 (33%)	2 (4%)		
Chills	15 (33%)			
Pyrexia	7 (15%)			
Injection site erythema	7 (15%)			
Myalgia	6 (13%)			
Headache	5 (11%)			
Hyperhidrosis	5 (11%)			

No drug-related grade 3 or 4 or serious adverse events



Toxicity is a well recognized shortcoming of both existing therapies and new cancer immunotherapies

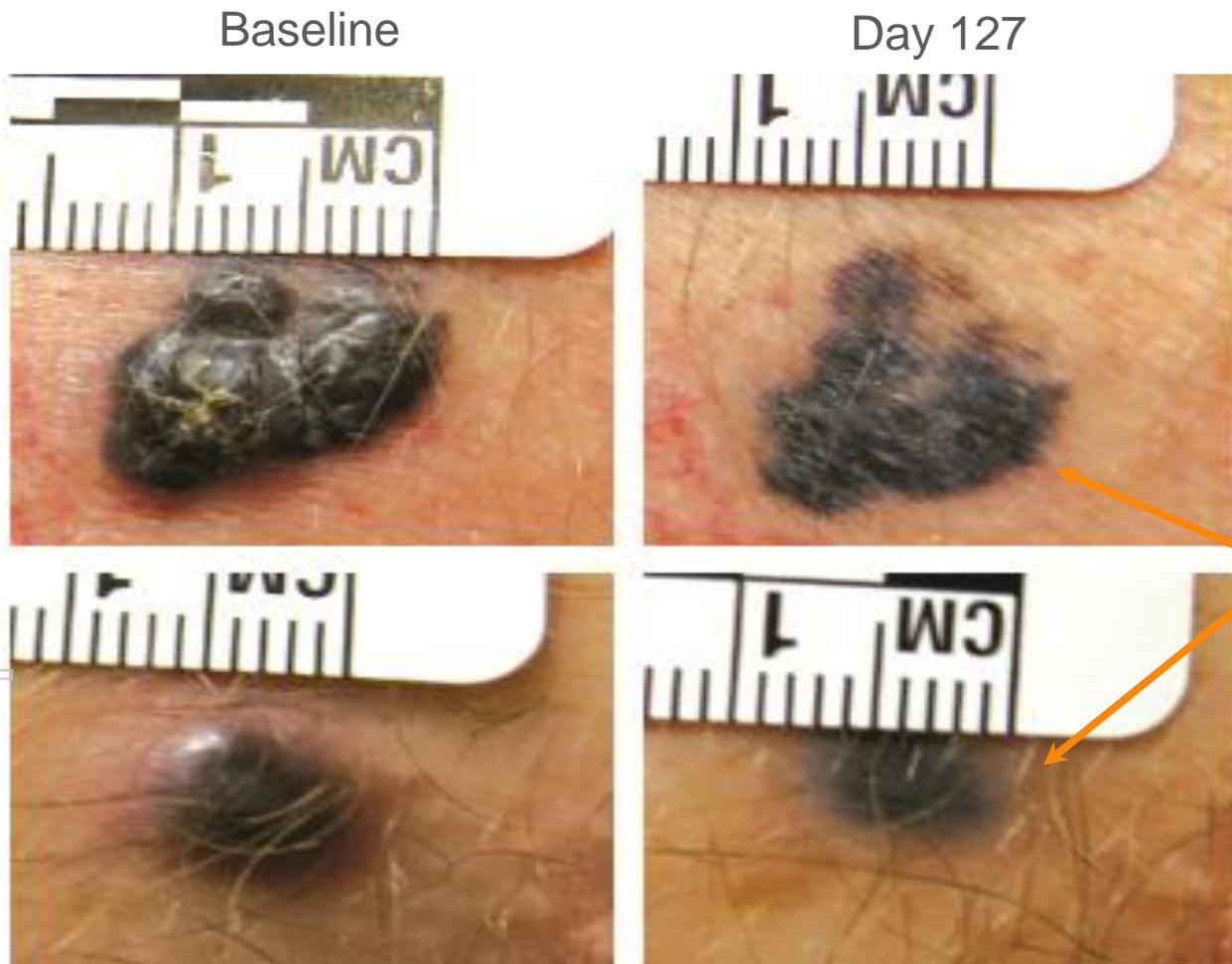
⁺ Preliminary analysis, adverse events from 46 of the 57 treated patients;

* Only Grade 1 AE's occurring in $\geq 10\%$ of patients are listed.

CALM Phase 2 trial

LOCAL-INJECTED LESION RESPONSES

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Male with cutaneous melanoma on the chest. Injection in chest lesions.

Histopathological analysis confirmed complete melanoma regression

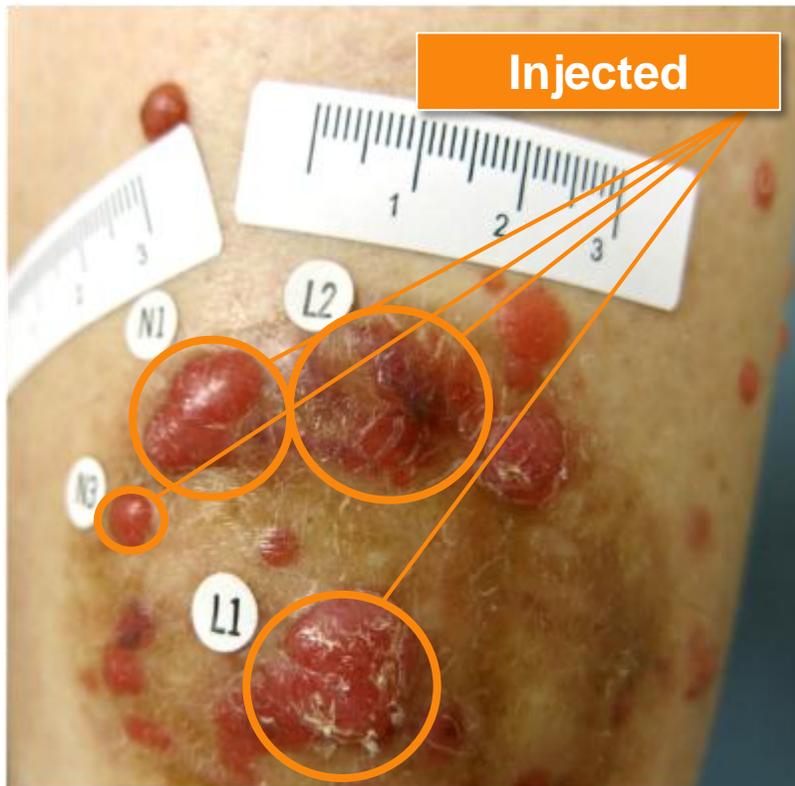
CALM Phase 2 trial

LOCAL INJECTED AND NON-INJECTED LESION RESPONSES

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Baseline

Day 85



Male with metastatic melanoma to the leg. Injection in leg lesions.

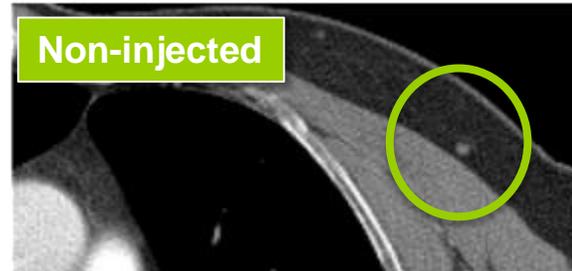
CALM Phase 2 trial

NON-INJECTED CHEST WALL DISTANT LESION RESPONSE

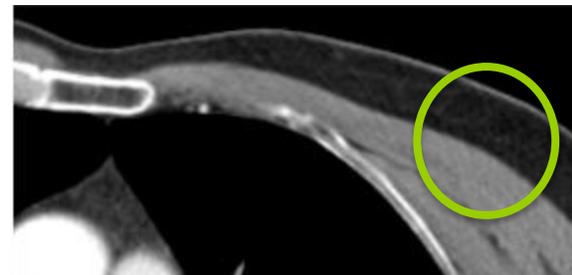
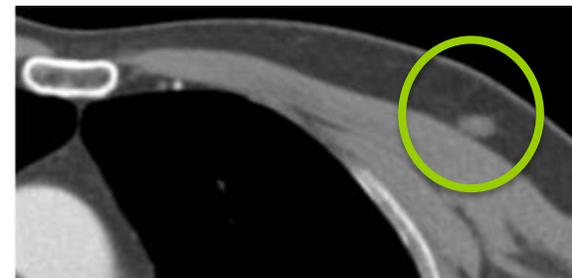
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Male with metastatic melanoma to the chest. Injection in cutaneous metastatic arm lesion



Screening
0.6 cm



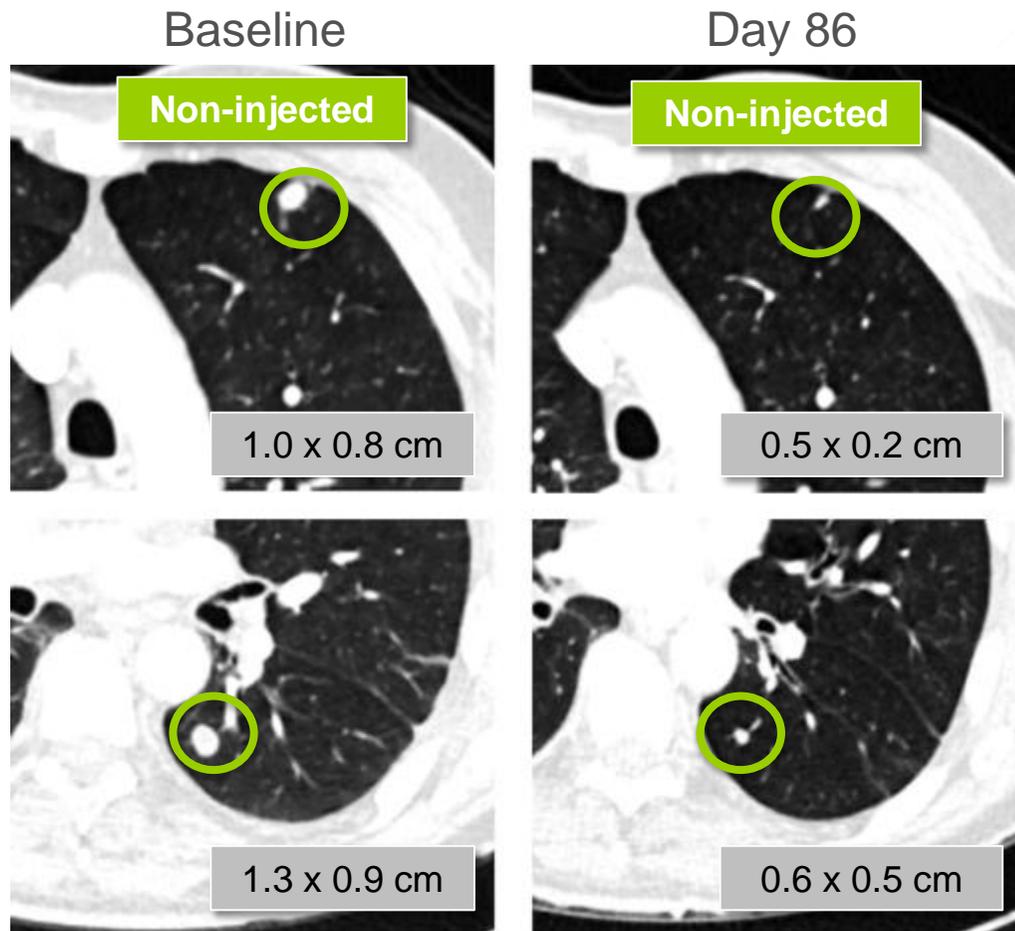
CALM Phase 2 trial

NON-INJECTED DISTANT VISCERAL LESION RESPONSE

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Male with metastatic melanoma to left neck and lungs. Injection in left neck.



- Successful study with primary endpoint achieved
- Significantly exceeded target endpoints
- Extension study to enhance understanding of immunotherapeutic activity
- Survival data on all patients in Q1 2015
- Follow-on trials in late planning stage

Strong data flow to drive partnering discussions



CAVATAK™ — STORM Phase 1/2 Study

(SYSTEMIC TREATMENT OF RESISTANT MALIGNANCIES)

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- Trial Initiated. Planned ~30 late stage cancer patients
 - Advanced melanoma, prostate, lung and metastatic bladder cancers
- Leading oncologists at prestigious UK cancer centres
- Multiple intravenous dosing *with* and *without* standard chemotherapy (e.g. docetaxel)
- Well tolerated in first two cohorts (6 patients)
- Third cohort (highest dose level) underway
- Preliminary results from early 2015 through early 2016

Cancer Type	Rank *	Estimated New Cases in the US in 2014 *
Prostate	1 st	233,000
Lung	3 rd	224,210
Melanoma	5 th	76,100
Bladder	6 th	74,690

* USA National Cancer Institute, 2014

Potential to significantly broaden applications and expand partnering discussions

Deep Clinical Development Experience

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Dr Darren Shafren
*Chief Scientific Officer,
inventor of CAVATAK™*

25 years' experience in
oncolytic virotherapy and
cancer cell interactions

Dr Leonard Post
Director

Biomarin CSO
formerly Onyx, Biovex

Extensive experience including
Nexavar™ from IND through
FDA approval for kidney cancer

Dr Robert Andtbacka
*CALM Phase 2
Principal Investigator*

Huntsman Cancer Institute,
University of Utah

Dr Keith Flaherty
Scientific Advisory Board

Massachusetts General
Hospital Cancer Center

Professor Merrick Ross
*Independent Clinical
Consultant*

MD Anderson Cancer Center,
Houston, Texas

Professor Kevin Harrington
STORM trial Investigator

The Royal Marsden, London

Dr Brendan Curti
*CALM Phase 2
Investigator*

Providence Cancer Center
Portland, USA

Professor Hardev Pandha
*STORM trial
Principal Investigator*

University of Surrey

FUTURE CLINICAL PROGRAM

- **Melanoma – Multiple Opportunities**
- **Bladder – CANON Trial**

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- Build on CALM study results
- Trial options
 - Combination with new agents in *late-stage* patients
 - Checkpoint inhibitors (anti-CTLA-4 and /or anti- PD1)
 - Targeted molecules (BRAF/ MEK inhibitors)
 - Administration prior to surgery in *early-stage* patients
- Strong pharma interest in new combinations and well tolerated monotherapy
- Clinical studies in late planning stage

“CAVATAK™’s activity and tolerability in these late-stage melanoma patients is impressive. Given this growing body of clinical and pre-clinical data, CAVATAK™ appears to be an excellent candidate for development, either as a single agent in earlier disease, or in combination with other new therapies, including anti-PD-1 and other checkpoint inhibitors. I look forward to contributing to the further clinical development of this promising immunotherapy agent.”

Dr Robert Andtbacka Huntsman Cancer Institute

“Given the activity and tolerance profile witnessed to date, the combination of CAVATAK™ with other new targeted therapies has exciting potential in advanced stage melanoma patients. I look forward to seeing what CAVATAK can add to our current treatment standards in randomized trials.”

Dr Keith Flaherty – Massachusetts General Hospital Cancer Center

Preclinical Assessment of Combination of Intratumoural CAVATAK and Anti-PD-1 Antibody in mice

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Implant B16-ICAM-1* melanoma cells into left flank

Treatment with CAVATAK or saline intratumoural (i.t) + anti-PD-1 or control mAb intraperitoneal (i.p)

Implant B16 melanoma cells into right flank

Treatment with i.t CAVATAK or saline

Treatment with i.t CAVATAK or saline

Day 0

6

9

12

15

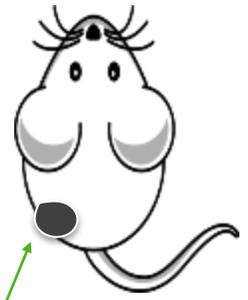
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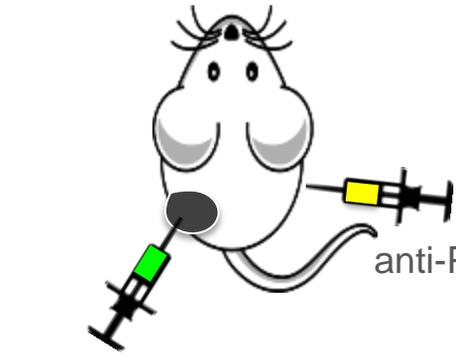
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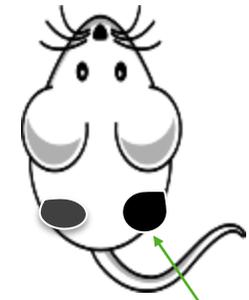


B16-ICAM-1 melanoma cells (Primary tumor)



CAVATAK i.t

anti-PD-1 mAb



B16 cells re-challenge (Secondary tumor)

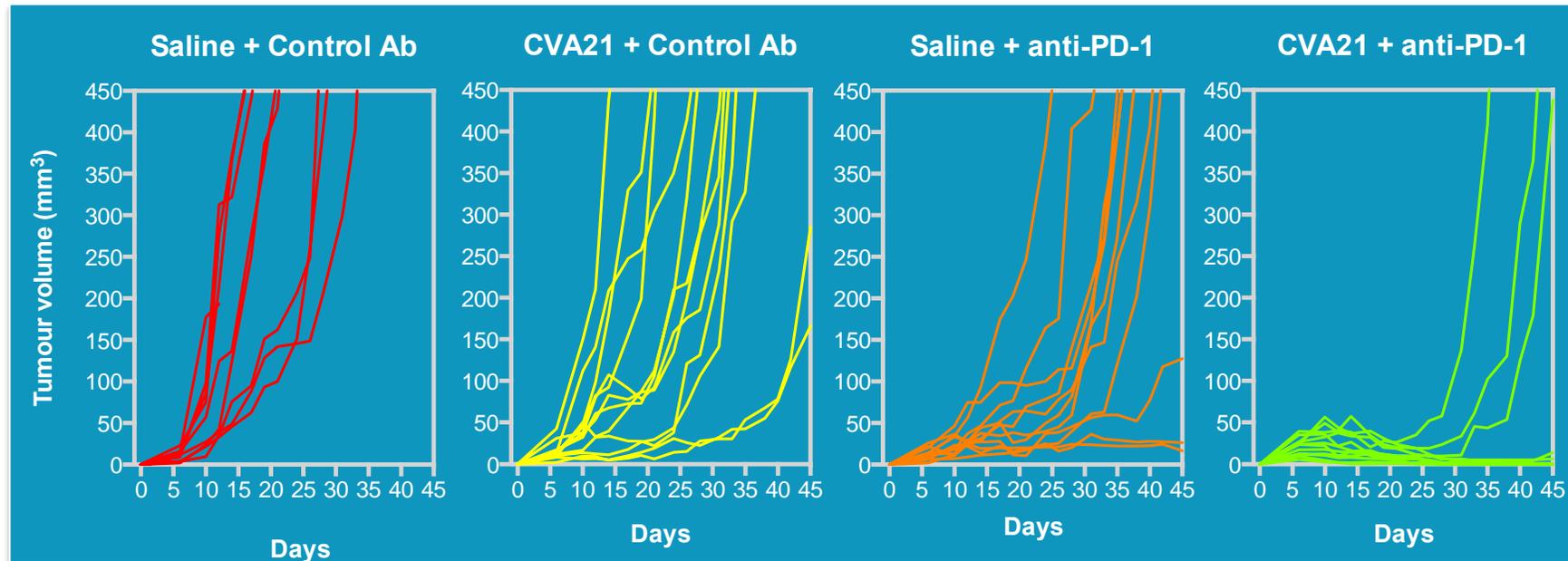
* B16-ICAM-1 cells are murine melanoma B16 cells stably transfected to express human ICAM-1 to allow CVA21 binding and cell infection

Preclinical Assessment of Combination of Intratumoural CAVATAK and Anti-PD-1 Antibody In mice



B16-ICAM-1 melanoma (Primary treated tumor)

Spider plots of individual primary B16-ICAM-1 tumor growth



Study Day 45

0% Tumor-free

0% Tumor-free

0% Tumor-free

75 % Tumor-free

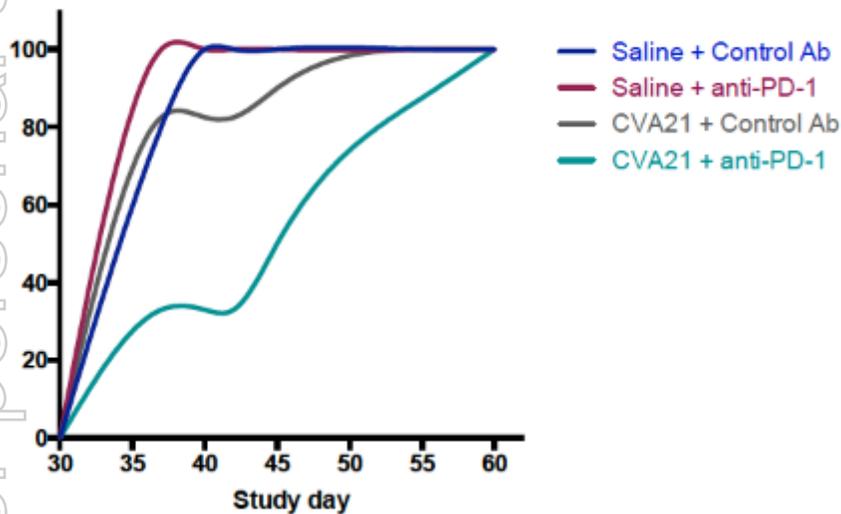
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Preclinical Assessment of Combination of Intratumoural CAVATAK and Anti-PD-1 Antibody in mice

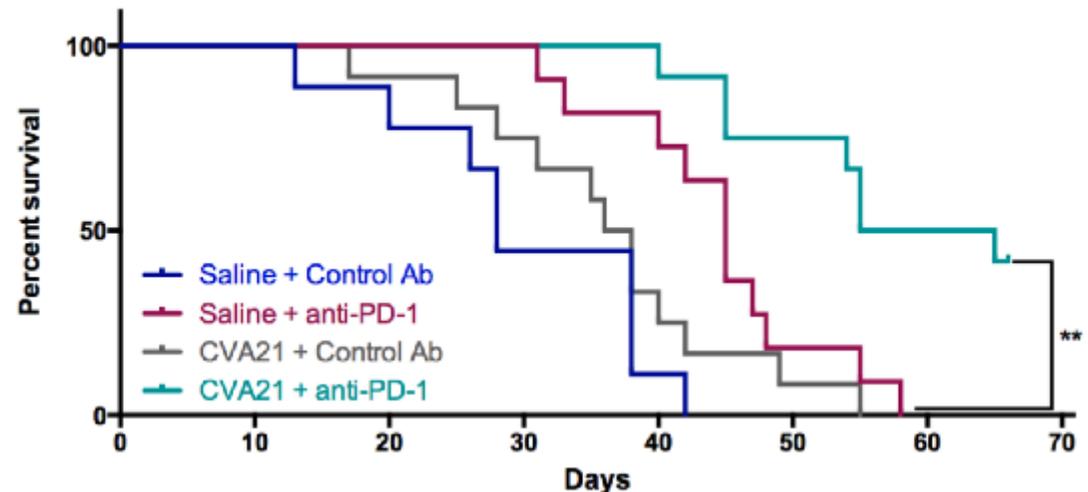


B16 cell re-challenge
(Secondary tumor
Non-treated)

Incidence of palpable secondary B16 tumor *



Survival



Similar responses seen when CAVATAK used in combination with anti-CTLA4 antibody (murine form of ipilimumab - Yervoy™)

*Preliminary on-going analysis

CAVATAK Combined with Checkpoint Inhibitors

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- Combination of CAVATAK and anti-PD1 or anti-CTLA-4 mAb is well tolerated
- Significant anti-tumor activity using a combination of CAVATAK and anti-PD-1 or anti-CTLA -4 in a pre-clinical mouse model
- Evaluation of a combination of CAVATAK and anti-PD-1 or anti-CTLA-4 mAb in advanced melanoma patients is warranted
- Checkpoint inhibitors, likely backbone of immunotherapy with forecast annual sales of \$35Bn by 2023 (Citibank)
- Checkpoint inhibitors active across a range of cancer types, including melanoma, lung and bladder cancer and potential synergy with CAVATAK

Anti- PD1 mAb approved in USA (Keytruda™ Merck) and Japan (Ono Pharmaceutical) in late stage melanoma patients

Merck, Astra Zeneca, BMS and Roche have anti-PD1 / PDL1 mAb in development for melanoma and other cancer types

Anti-CTLA4 mAb approved globally (Yervoy - BMS) in late stage melanoma patients

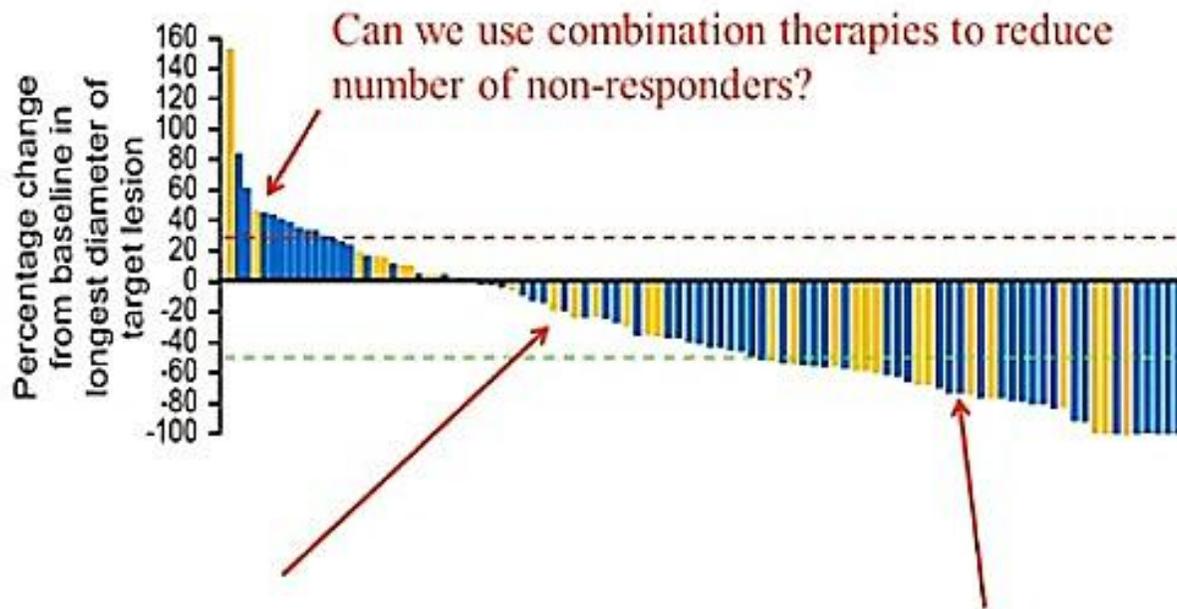
Astra Zeneca has anti-CTLA-4 in development

Checkpoint inhibitors

Room to Improve through Combination with New Therapies

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MK3475 (Pembrolizumab) in Melanoma



Checkpoint inhibitors important new agents in melanoma and other cancer types

Big Pharma focused on improving activity of these agents through combination therapy

Goal: to enhance performance with manageable toxicity

Also potential to enhance activity of targeted agents (BRAF / MEK inhibitors)

CAVATAK™ — CANON Phase 1 study

(CAVATAK in NON-MUSCLE INVASIVE BLADDER CANCER)

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- Common cancer with high unmet need
- Significant costs to health care system - \$200,000/patient
- No treatment advances in the last decade
- Need for non-toxic effective agents
- CAVATAK active in preclinical studies, in particular in combination with chemotherapy
- Phase 1 study initiate in Q1 2015
- Intravesical CAVATAK +/- mitomycin C in frontline NMIBC
- 18 – 30 patients in 2 stages at Royal Surrey Hospital

Cancer Type	Rank *	Estimated New Cases in the US in 2014 *
Prostate	1 st	233,000
Lung	3 rd	224,210
Melanoma	5 th	76,100
Bladder	6 th	74,690

* USA National Cancer Institute, 2014

Potential to broaden partnering discussions

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SUMMARY



Current CAVATAK clinical trial program

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CAVATAK™



Intratumoural

Phase 2: CALM study
Advanced melanoma
N=57



Phase 2: CALM extension cohort
Advanced melanoma
N=12

Intravenous

Phase 1/2: STORM study
Advanced melanoma, NSCLC, Bladder and Prostate cancer
N=30

Intravesicular

Phase 1: CANON study
Non-muscle invasive bladder cancer
N=30

Phase 2 (in final planning)
Monotherapy or combination studies with immune checkpoint inhibitors and/or targeted small molecules

Expected News Flow

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Presentation at AACR, ASCO and ESMO conferences	Achieved
Top-line results CALM Phase 2 melanoma study	Achieved
Initiate extension cohort in CALM study	Achieved
Initiate combination studies in melanoma patients	Q1 2015
Initial results first stage of STORM phase 1/2 study	Q1 2015
Survival data CALM Phase 2 melanoma study	Q1 2015
Initiate CANON Phase 1 bladder cancer study	Q1 2015

Compelling Near-Term Value Builders

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- Lead product CAVATAK™ - potential in a range of cancer types
- Collaborating with leading oncologists in US and Europe
- Well funded following transformational \$27M capital raise
- Impressive activity in CALM Study
- STORM Phase 1/2 trial in patients with solid tumour cancers
- Promising results in preclinical studies with blockbuster new agents
- Pharma company strong interest in combination strategies
- CAVATAK Phase 2 combination study planned for Q1 2015
- CANON Phase 1 bladder cancer trial planned for Q1 2015
- Data from multiple clinical trials to drive partnering discussions and shareholder value
- Recent high value transactions in cancer immunotherapy

Corporate strategy to build value through to licensing or partnering transaction

Success in Phase 2 CALM melanoma trial

- ✓ **Primary endpoint achieved September 2013**
- ✓ **Significantly exceeded key endpoints**
- ✓ **Activity in metastatic (secondary) tumours**
- ✓ **Well tolerated with no drug-related serious adverse events**
- ✓ **Potential application as monotherapy or in combination with blockbuster new agents**



Thank You



Dr Malcolm McColl
Managing Director

Email: malcolm.mccoll@viralytics.com
Web: www.viralytics.com

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