



NASDAQ: TELO



Oral Epigenetic Therapy for Triple-Negative Breast Cancer (TNBC)



FDA IND CLEARED

Phase 1/2 Ready

Forward Looking Statements

This presentation contains "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995. These forward-looking statements generally can be identified by the use of words such as "anticipate," "expect," "plan," "can," "could," "would," "may," "will," "believe," "estimate," "forecast," "goal," "project," "guidance," "potential," "intend," "seek," "target" and other words of similar meaning, although not all forward-looking statements include these words. Forward-looking statements may include, but are not limited to, statements regarding the therapeutic potential, mechanism of action, development plans, regulatory pathway, safety profile, clinical utility, market opportunity, and future development of Telomir-Zn, and the Company's other product candidates. These forward-looking statements are based on current expectations, estimates, forecasts, and projections, as well as management's beliefs and assumptions, and are subject to significant risks and uncertainties that could cause actual results to differ materially from those expressed or implied by such statements. These risks and uncertainties include, among others, risks related to preclinical and clinical development, the ability to obtain regulatory approvals, the outcome of future studies, reliance on third parties, intellectual property protection, financing needs, market conditions, and the other risks identified under the "Risk Factors" section contained in the Company's Annual Report on Form 10-K and the Company's other filings with the SEC. Forward-looking statements contained in this presentation speak only as of the date hereof, and the Company undertakes no obligation to update or revise such statements, whether as a result of new information, future events, or otherwise, except as required by applicable law.

We caution investors not to place undue reliance on the forward-looking statements contained in this presentation. You are encouraged to read our filings with the SEC, available at SEC website and in the "Investors" section of our website, for a discussion of these and other risks and uncertainties.

Preclinical and early-stage data, including cell line, xenograft, and animal model results referenced in this presentation, may not predict clinical safety or efficacy outcomes in humans.

Why Telomir-Zn

A differentiated oncology program entering the clinic

NOVEL MECHANISM



Oral Epigenetic Reprogramming via Metal Modulation

Telomir-Zn is an oral metal-modulating therapy designed to restore normal gene regulation by targeting iron-dependent epigenetic pathways implicated in tumor growth and treatment resistance.



CLINICAL CATALYST



IND Cleared by FDA for Telomir-Zn in TNBC

Complete GLP safety package. No significant treatment-related toxicity across cardiovascular, respiratory, and repeat-dose tox studies.



UNMET NEED



TNBC Remains a High Unmet Need Setting

Median OS ~11–13 months for patients with metastatic TNBC¹. Recent approvals are gated by biomarker status and immunotherapy eligibility. Most patients still rely on chemotherapy.



BROAD ONCOLOGY POTENTIAL



Beyond TNBC

A focused TNBC program supported by broad preclinical activity across multiple tumor models.



¹ Kesireddy M, et al. *Cancers*. 2024.

Triple-Negative Breast Cancer

No estrogen receptor. No HER2 overexpression. Limited targeted treatment options for most patients.

~10-15%



of all breast cancer diagnoses¹

Median OS
11-13 months²
(metastatic)

1. American Cancer Society. *Breast Cancer Facts & Figures 2026*.
2. Kesireddy M, et al. *Cancers*. 2024.
3. DelveInsight. *Triple-Negative Breast Cancer Market Insights*. 2025.

TNBC Represents a Significant Unmet Medical Need

Aggressive Disease Biology

Characterized by early recurrence, rapid disease progression, and limited durable treatment responses.

Genomically Complex

TNBC lacks a single dominant oncogenic driver, limiting the applicability of targeted therapies across the broader patient population.

Multi-Billion Global TNBC Market Opportunity³

Why Current Options Fall Short



Recent therapeutic advances have expanded treatment options for selected patients. However, treatment remains dependent on disease stage, biomarker status, and prior therapy. Chemotherapy continues to play an important role, and recurrence, progression, and treatment resistance remain major clinical challenges.

The Epigenetic Angle



Epigenetic dysregulation contributes to tumor progression and treatment resistance in TNBC. Telomir-Zn is designed to reprogram iron-dependent epigenetic pathways through metal modulation.

Telomir-Zn: Epigenetic Reprogramming via Metal Homeostasis

MECHANISM

Telomir-Zn modulates intracellular metal homeostasis, including iron and copper, to influence iron-dependent epigenetic pathways associated with tumor growth and treatment resistance.

WHAT MAKES IT DIFFERENT

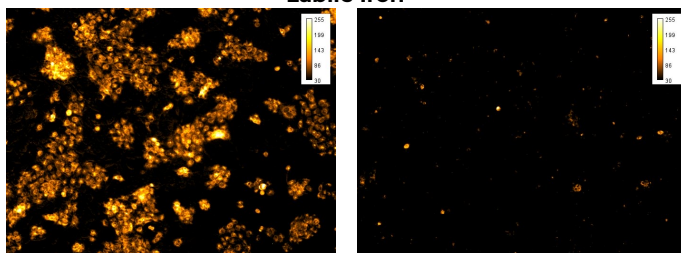
Rather than targeting a single epigenetic enzyme, Telomir-Zn is designed to influence multiple iron-dependent epigenetic pathways through a differentiated upstream mechanism.

REGULATORY STATUS

FDA IND
CLEARED ✓

Phase 1/2
READY

FerroOrange Assay Demonstrates Reduced Intracellular Labile Iron



No Treatment

Telomir-Zn at 1 μ M


**Oral Metal-Modulating
Epigenetic Therapy**

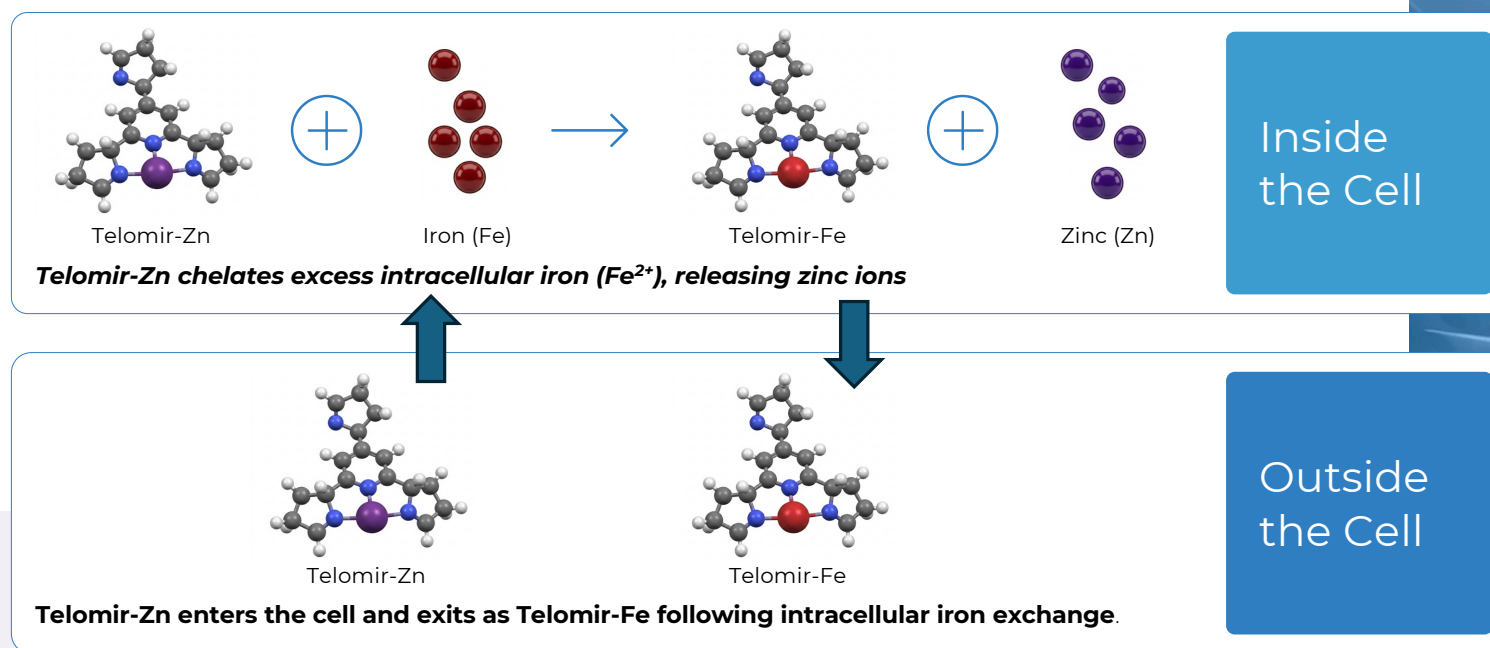

**Completed GLP
Nonclinical Safety
Package**

No treatment-related AEs


IC₅₀ = 0.87 μ M
Anti-tumor activity in
HCC1806 TNBC cell line

Direct measurements in HaCat cells of the effects of Telomir-Zn on intracellular iron, as stained with FerroOrange at 24 hours.

Mechanism of Action: Epigenetic Modulation via Metal Homeostasis



Telomir-Zn is designed to modulate intracellular metal homeostasis, influencing iron-dependent epigenetic pathways involved in tumor growth and treatment resistance.

Metal Homeostasis → Epigenetic Modulation → Restoration of Gene Regulation → Anti-Tumor Activity

Broad Preclinical Anti-Tumor Activity Across Multiple Tumor Types

Triple-Negative Breast Cancer

Demonstrated anti-tumor activity across multiple TNBC models, including paclitaxel-resistant HCC1806 xenografts.

IC₅₀: 0.87 μ M in HCC1806 cells and 1.4 μ M in MDA-MB-468 cells.

Prostate Cancer

Single-agent anti-tumor activity demonstrated in PC-3 prostate cancer xenografts.

~50% tumor volume reduction with oral Telomir-Zn.



Leukemia (HL-60)

Concentration-dependent anti-proliferative activity demonstrated in HL-60 leukemia cells



Pancreatic (PANC-1)

Concentration-dependent anti-tumor activity in treatment-resistant PANC-1 cells.



Outperformed DFO

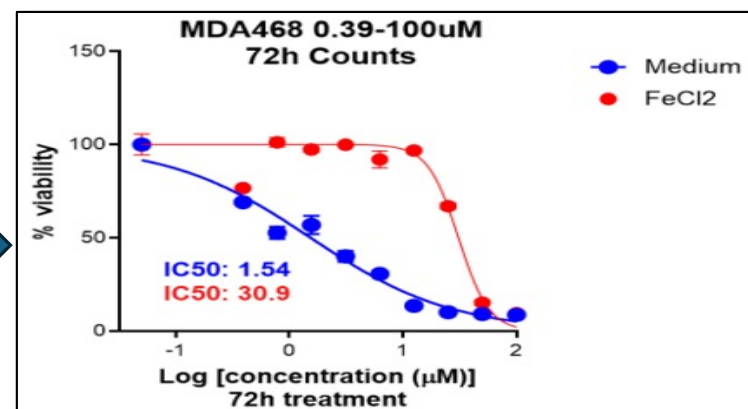
Reduced intracellular labile iron more rapidly than deferoxamine (DFO) at the 6-hour time point.

Iron Rescue Demonstrates Iron-Dependent Activity

Key Takeaways

- FeCl₂ partially rescued Telomir-Zn-induced loss of cell viability.
- FeCl₂ shifted the IC₅₀ from ~1.5 μ M to ~31 μ M (**~20-fold**).
- These findings support an iron-dependent mechanism of action.

Iron-addicted tumors are selectively vulnerable, while normal cells with lower labile iron remain comparatively spared.



Cell Line Used	Cancer Type	Telomir-Zn IC ₅₀ (μ M)
HCC 1806	TNBC	0.87
MDA-MB-468		1.5
HCC 70		3.6
HL 60	Leukemia	1.6
PC3	Prostate (androgen-independent)	14.3
LNCap	Prostate (androgen-dependent)	21.3
PANC-1	Pancreatic	38.6
HaCat	Normal keratinocytes	>50

Source: AACR Annual Meeting 2026 (TNBC data); Data on file, Telomir Pharmaceuticals.

Oral Telomir-Zn Reduces Tumor Growth in PC-3 Xenografts

STUDY DESIGN

- PC-3 androgen-independent prostate xenograft
- Daily oral dosing for 21 days
- Vehicle and active comparator controls

KEY RESULTS

10 mg/kg

Statistically significant tumor suppression from Day 10 ($p<0.05$) — earlier onset, sustained throughout study

100 mg/kg

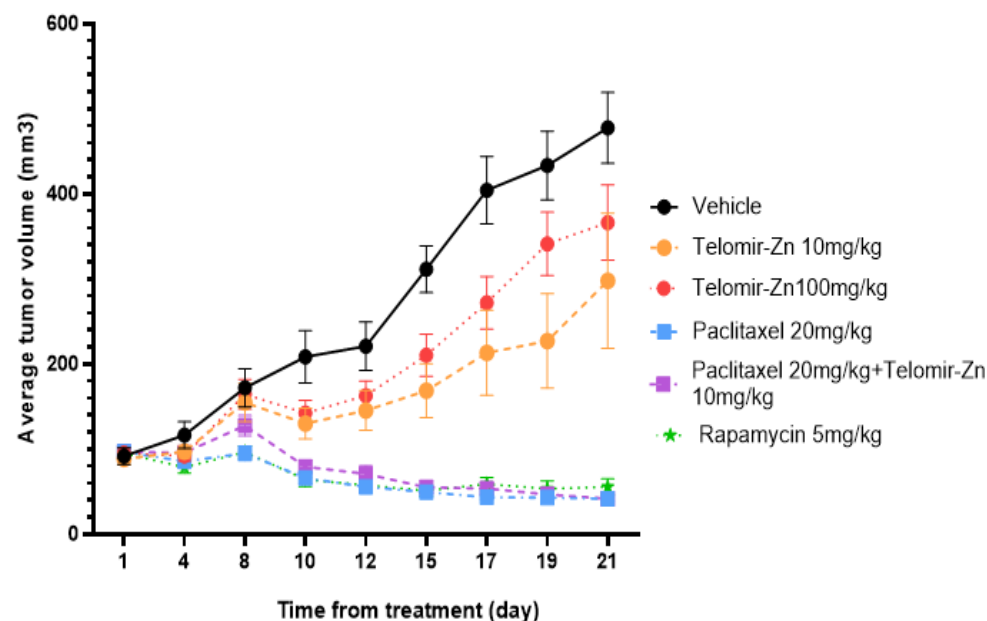
Statistically significant tumor suppression from Day 15 ($p<0.05$)

Combo+PTX

Marked tumor suppression

SIGNIFICANCE

Demonstrates in vivo proof-of-concept for oral metal-modulating epigenetic therapy



~50% Tumor Volume Reduction vs. Vehicle

Telomir-Zn Reverses DNA Hypermethylation of Key Tumor-Suppressor Genes In Vivo

WHY THIS MATTERS

Untreated tumors progressively silence tumor-suppressor genes through promoter hypermethylation.

Telomir-Zn reversed this silencing *in vivo* in a dose-dependent manner.

These findings provide mechanistic evidence that Telomir-Zn acts to restore tumor-suppressor pathways within growing tumors.

Inhibition of DNA methylation— Day 21 vs. Vehicle

CASP8

Mediates death-receptor-dependent apoptosis. Reduced methylation observed with Telomir-Zn.

TMS1

Regulates programmed cell death and immune-mediated tumor destruction. Significantly reduced methylation by Telomir-Zn + PTX.

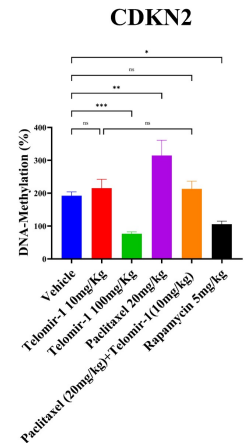
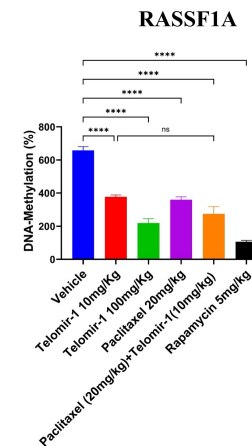
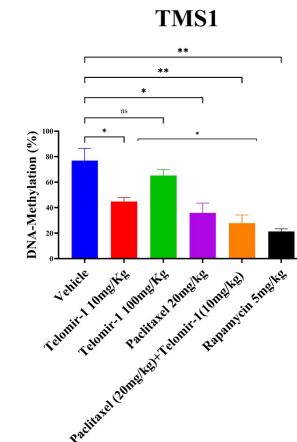
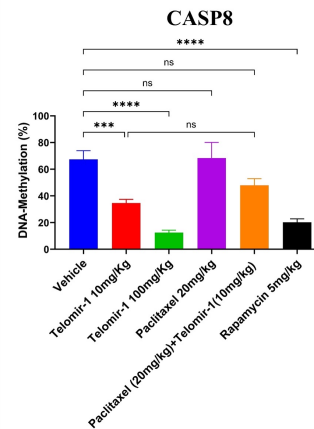
RASSF1A

Most potent effect ($p < 0.0001$). Dose-dependent. Regulates apoptosis & mitosis; frequently silenced in TNBC & prostate cancer.

CDKN2A

Dose-dependent. Encodes p16INK4A cell-cycle regulator; loss drives uncontrolled proliferation.

Telomere length: NOT affected at either dose — demonstrating epigenetic specificity



Source: Data on file, Telomir Pharmaceuticals. PC-3 prostate cancer xenograft study.

Intellectual Property: Strong Global IP Position With Exclusive Worldwide Rights

PATENT ESTATE	EXCLUSIVITY	DEVELOPMENT READINESS
- Published PCT application (WO2024/191676 A1). - Patent estate includes composition-of-matter, formulation, and method-of-use claims. - National phase filings submitted across major commercial territories.	Exclusive worldwide rights to develop and commercialize Telomir-Zn across all therapeutic indications.	- IND-cleared oncology program. - Completed GLP safety package with Phase 1/2 readiness.

Published PCT · Worldwide Exclusivity · FDA IND CLEARED

Source: WO 2024/191676 A1; National Phase Filings; Telomir Pharmaceuticals.

FDA IND Cleared. Phase 1/2 Ready.

3+3

Dose Escalation Design
(Ph 1) for Oral, once-daily
monotherapy



Simon 2- Stage

ORR Primary Endpoint
(Ph 2)



Top Centers

Lead Clinical Site
Established with Top
Cancer Center and
Expansion Discussions
Ongoing



Secondary Endpoints

Duration of Response
(DoR), Progression-Free
Survival (PFS), and
continued safety
monitoring



GLP Safety
Package: Complete

Cardiovascular, respiratory, phototoxicity, and repeat-dose toxicology studies complete — no treatment-related adverse events, no dose-limiting toxicities. Package supports IND clearance and Phase 1 initiation.

Focused Clinical Strategy

Asset	Indication	Preclinical	IND Filed	Phase 1/2	Phase 3	WW Rights
Telomir-Zn	Triple-Negative Breast Cancer (TNBC)	✓	✓	IND Cleared		TELO



Telomir-Zn is a focused clinical-stage oncology program for Triple-Negative Breast Cancer (TNBC).

Completed GLP safety package, FDA IND clearance, and exclusive worldwide rights position the program for Phase 1/2 clinical development.

Clinical Development Milestones



FDA IND Submission Completed

FDA IND submission completed following completion of the GLP safety package



FDA Clearance

Completed

IND clearance received. The program is eligible to proceed to Phase 1/2 clinical evaluation.



Phase 1/2 Initiation

Subject to operational readiness and site activation

Planned Phase 1 dose escalation followed by Simon two-stage Phase 2 design in TNBC.



First Patient Enrollment

Following site activation

Enrollment will begin after site activation and study initiation.



A Mechanistically Distinct Approach to Epigenetic Oncology

Attribute	Telomir-Zn	Direct KDM Inhibitors	Iron Chelators (DFO)	PD-L1 Inhibitors
 Mechanism	Metal-mediated epigenetic modulation	Direct enzyme inhibition	Systemic iron depletion	Immune checkpoint
 Selectivity	Broad KDM modulation with minimal GCN5L2 activity	Generally target-specific	Non-selective	T-cell dependent
 TNBC Efficacy	IC₅₀ 0.87 µM; demonstrated in vivo xenograft activity	No clinical data	Systemic iron depletion	Primarily indicated in PD-L1-selected populations
 Systemic Toxicity	Completed GLP safety studies; no DLTs observed	Class-related risks	Chronic systemic iron depletion	Immune-related adverse events (irAEs)
 Oral Administration	Yes	Varies	Mainly IV/SC	IV
 Clinical Stage	FDA IND Cleared	Preclinical/Early Ph1	Not oncology-focused	FDA Approved (subset)

Comparisons are based on published literature, regulatory status, and class characteristics and are not based on head-to-head studies.

Clinical Stage Oncology Program

Positioned for Clinical Execution

Clinical Outlook



FDA IND clearance establishes Telomir-Zn as a clinical-stage oncology program. The completed GLP safety package and Phase 1/2 protocol provide the foundation for advancing into clinical evaluation in triple-negative breast cancer, subject to operational readiness.



Forward-looking statements and risk factors are described in the Company's SEC filings.

Leadership Team & Scientific Advisors



Chief Executive Officer & Executive Chairman

Leads corporate strategy, financing, business development, and execution of Telomir's clinical programs.

Erez Aminov



Chief Scientific Advisor

40+ years of drug discovery and translational pharmacology. Former Head of Pharmacology at Sanofi/Synthelabo. Scientific architect of the Telomir-Zn program.

Itzhak Angel, PhD



Chief Financial Officer

20+ years of SEC reporting, public company finance, compliance, and capital markets experience.

Andriy Mushak, CPA



Scientific Advisor

30+ years leading CMC, regulatory strategy, and clinical development across multiple therapeutic areas.

Alex Weisman, PhD

Scientific Advisory Board

Francis O'Donnell, MD

Drug Development · 40 Patents

Distinguished clinical development advisor.

Peter McDonnell, MD

Wilmer Eye Institute, Johns Hopkins

Strategic advisor

Michael Roizen, MD

Cleveland Clinic

Chief Wellness Officer Emeritus. Strategic visibility and medical communications.



Telomir Pharmaceuticals, Inc.

NASDAQ: TELO

Oral Epigenetic Therapy for
Triple-Negative Breast
Cancer

FDA IND Cleared

telomirpharma.com

This presentation is for informational purposes only and does not constitute an offer to sell or solicitation of an offer to buy any securities.

TELOMIR[®]
Pharmaceuticals, Inc.

17

Appendix

Supporting Preclinical Data

Telomir Pharmaceuticals, Inc.

NASDAQ: TELO

Preclinical Research: Cell Viability Across Cancer Types

Iron-dependent selectivity confirms mechanistic anti-cancer activity

Preclinical Research

Significant anti-cancer activity across multiple cancer cell lines with iron-dependent selectivity.

Study Summary

- Telomir-Zn tested on 6 cancer cell lines and 1 normal control cell line
- Activity expressed by IC₅₀ (concentration for 50% viability reduction)
- Normal keratinocyte (HaCaT) IC₅₀ > 50 µM — no meaningful toxicity

Key Finding

- Greater than 100-fold therapeutic window between most active cancer line and normal cells
- Drug sensitivity mirrors cellular iron dependence — mechanistically consistent

Cell Line	Cancer Type	Iron Dependency	IC ₅₀ (µM)
HCC1806	TNBC (breast)	Highest	0.87
HL-60	Leukemia	Extreme	1.6
PC3	Prostate (AI)	Moderate	14.3
LNCaP	Prostate (AD)	Low	21.3
PANC-1	Pancreatic	Weak	38.6
HaCaT	Normal keratinocytes	Minimal	>50

>100x

Therapeutic window between TNBC and normal cells

GLP-Cleared

No dose-limiting toxicities in preclinical studies

Significant Anti-Cancer Activity in BT 549 Breast Cancer Model

Zebrafish xenograft | Triple-negative breast cancer | Oral administration daily x3 days

Study Design

- BT549 human triple-negative breast cancer cells in zebrafish xenograft
- Telomir-Zn administered daily for 3 days to zebrafish embryos
- Comparator: Paclitaxel (standard-of-care chemotherapy)

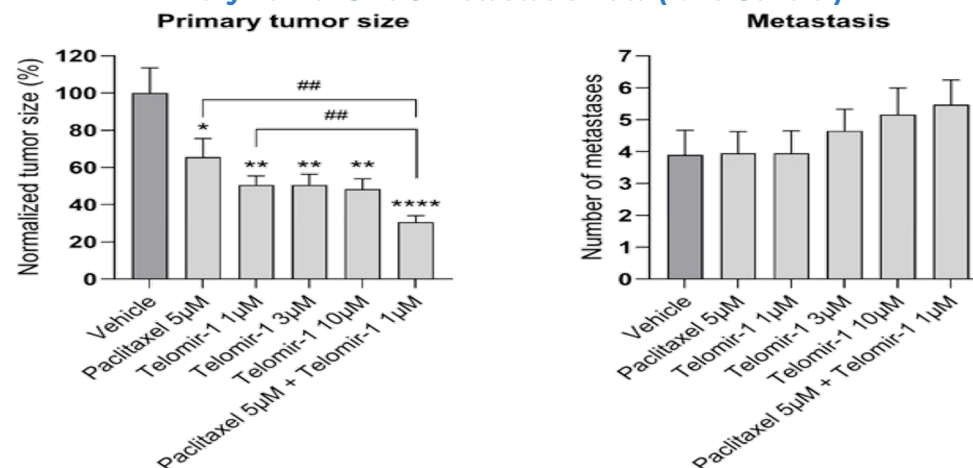
Key Results

- Tumor volume suppression comparable to Paclitaxel at equimolar doses
- Additive anti-tumor effect when combined with Paclitaxel
- No dose-limiting toxicity or off-target effects observed

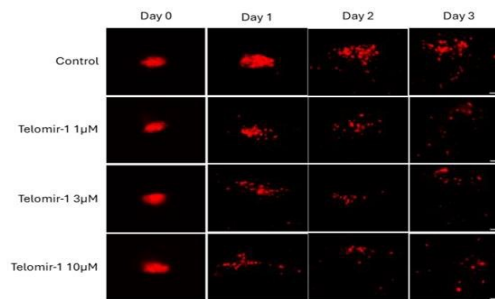
Significance

- First oral small molecule with comparable efficacy to IV chemotherapy in TNBC
- Additive effects enable potential combination therapy strategies

Primary Tumor Size & Metastasis Data (% vs Control)



Fluorescence Microscopy: BT549 Tumor Growth



**~70%
Reduction**

Tumor volume vs. vehicle in combination group

Telomir-Zn Suppresses Tumor Growth & Metastasis

Zebrafish xenograft | Triple-negative breast cancer | Oral administration daily x3 days

Study Design

- HCC1806 chemo-resistant human triple-negative breast cancer cells in zebrafish xenograft
- Telomir-Zn administered daily for 3 days to zebrafish embryos
- Comparator: Paclitaxel (standard-of-care chemotherapy)

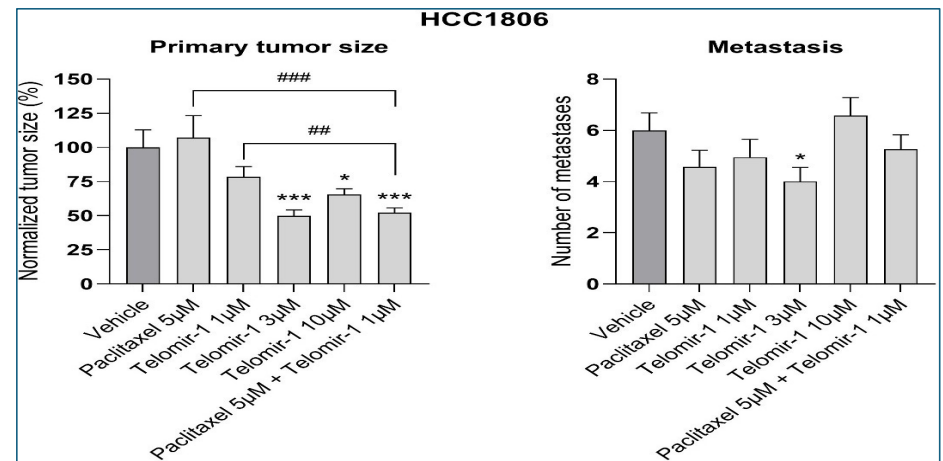
Key Results

- Significant tumor reduction at 3 μM and 10 μM Telomir-Zn ($p < 0.05$ and $p < 0.001$)
- Additive anti-tumor effect when combined with Paclitaxel vs. either monotherapy alone
- Significant reduction of metastasis
- No dose-limiting toxicity or off-target effects observed

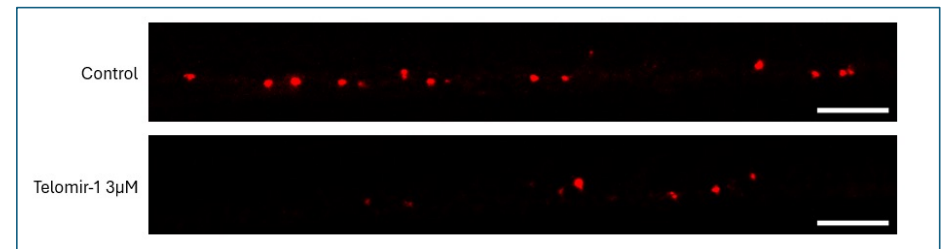
Significance

- Telomir-Zn is the first oral agent to demonstrate both primary tumor suppression and statistically significant reduction of metastatic dissemination in a chemotherapy-resistant TNBC model — a finding not observed with Paclitaxel alone

Primary Tumor Size & Metastasis Data (% vs Control)



Fluorescence Microscopy: HCC1806 Tumor Growth



Telomir-Zn Potently Inhibits Histone Demethylases (KDMs) — KDM2 and KDM6

Key epigenetic enzymes driving cancer growth, inflammation, and aging

KDMs in Cancer Biology

- KDMs remove methyl groups from histones — controlling which genes are active or silenced
- Dysregulated KDMs drive oncogene overexpression and tumor-suppressor silencing
- Iron-dependent enzymes — linking metal biology to epigenetic control

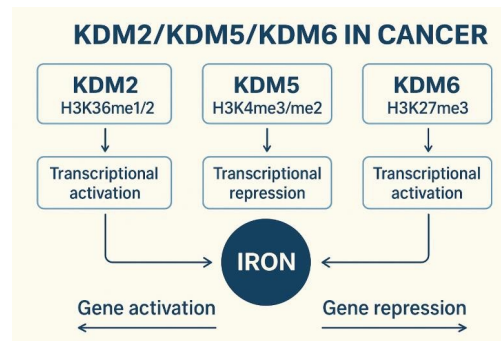
Telomir-Zn IC₅₀ Values (Eurofins in vitro)

- KDM2A (FBXL11): 0.24 μ M — cancer stem-cell and immune evasion driver
- KDM2B (FBXL10): 0.30 μ M — tumor growth and PRC1 silencing
- KDM6A (UTX): 0.39 μ M — removes repressive H3K27me3 marks
- KDM6B (JMJD3): 2.0 μ M — inflammation and metastasis-linked

Significance

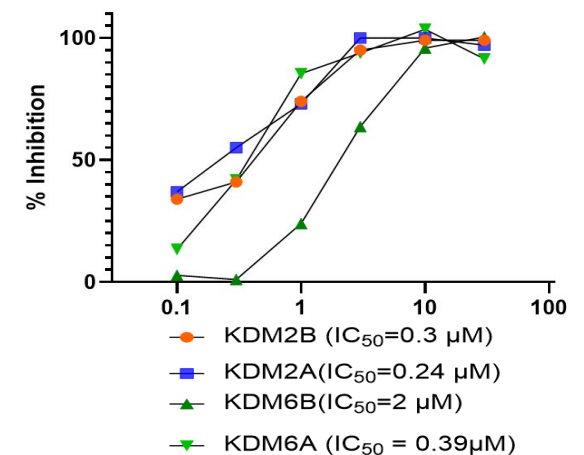
- Reawakens silenced tumor-suppressor genes (STAT1, TMS1)
- Reduces inflammatory signaling and metastatic potential
- Restores healthy epigenetic patterns disrupted in aging and cancer

KDM2/KDM5/KDM6 Iron-Dependent Mechanism



Dose-Response Curves: % Inhibition vs. Concentration (μ M)

Histone demethylases



Telomir-Zn Potently Inhibits Histone Demethylases 5 (KDM5s / JARID1)

Epigenetic erasers silencing tumor-suppressor genes and driving cancer stem-cell survival

JARID1 / KDM5 Family in Cancer

- KDM5 enzymes erase activating H3K4me3 marks — silencing tumor-suppressor and differentiation genes
- Overexpressed in breast, prostate, lung, and other solid tumors
- Drive cancer stem-cell identity and resistance to therapy

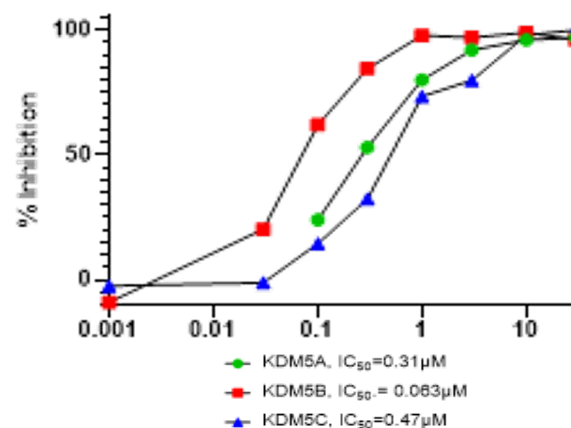
Telomir-Zn IC₅₀ Values (Eurofins in vitro)

- KDM5A (JARID1A): 0.31 μ M — shuts down tumor-suppressor activation marks
- KDM5B (JARID1B): 0.063 μ M — most potent target; cancer stem-cell survival
- KDM5C (JARID1C): 0.47 μ M — chromatin stability and gene regulation

Clinical Implications

- Inhibiting KDM5B (IC₅₀ = 0.063 μ M) may reverse chemo-resistance in breast cancer
- Reactivates tumor-suppressor programs silenced in cancer progression
- Mechanistic synergy with KDM2/KDM6 inhibition for broad epigenetic control

KDM5 Inhibition



0.063 μ M

IC₅₀ KDM5B — among most potent KDM oncology targets identified for Telomir-Zn

Broad KDM Panel

KDM2, KDM5, KDM6 families all inhibited — unique multi-target epigenetic profile

Preclinical Research Summary

Complete preclinical package supporting FDA IND clearance

FDA IND Cleared		GLP Safety Package Complete No DLTs · No treatment-related AEs	Clean Genetic Safety Profile Non-mutagenic · Non-genotoxic · Non-neurotoxic
Domain	Main Characteristics	Details	
Pharmacology	Selective intracellular metal modulation	Affinity order: Cu ²⁺ > Fe ²⁺ >> Zn ²⁺ · Faster and more potent intracellular Fe ²⁺ depletion than DFO (gold-standard chelator) at 3h and 6h timepoints · IC ₅₀ for Fe ²⁺ depletion: Telomir-Zn 1.05 μM at 6h vs. DFO 24.6 μM	
ADME	Absorption & Metabolism	Rapidly absorbed in rat/dog · Plasma stable up to 6h · 67–99% unbound · Low CYP450 metabolism in dog/human hepatocytes — low drug-drug interaction potential	
Selectivity	Target selectivity	No affinity across broad receptor, enzyme, and ion channel panel · Broad KDM modulation with minimal off-target activity · Spares GCN5L2 acetyltransferase · No significant off-target activity identified	
Toxicology	Acute + repeated oral (14-day, 2 species)	Established NOAEL in two species supporting clinical dosing.	
GLP Safety Package Complete · FDA IND Cleared · Oral Dosing · NOAEL Established in Two Species			

Source: FDA IND submission; GLP pharmacology and toxicology studies. Data on file, Telomir Pharmaceuticals.