

23 October 2024

Australian Securities Exchange
20 Bridge Street
Sydney NSW 2000

2024 Annual General Meeting Chair Address and Presentation

Melbourne, Australia – Alcidion Group Limited (ASX: ALC) (**Alcidion** or **Company**) advises in accordance with ASX Listing Rule 3.13.3, a copy of the address by Chair, Rebecca Wilson and slides to be presented at today's Annual General Meeting are attached.

ENDS

Authorised for ASX release by the Board of Alcidion Group Limited.

For further information, please contact:

Investor Relations

investor@alcidion.com

About Alcidion

Alcidion Group Limited has a simple purpose, that is, to transform healthcare with proactive, smart, intuitive technology solutions that improve the efficiency and quality of patient care in healthcare organisations, worldwide.

Alcidion offers a complementary set of software products and technical services that create a unique offering in the global healthcare market. Based on the flagship product, Miya Precision, the solutions aggregate meaningful information to centralised dashboards, support interoperability, facilitate communication and task management in clinical and operational settings and deliver Clinical Decision Support at the point of care; all in support of Alcidion's mission to improve patient outcomes.

Since listing on the ASX in 2011, Alcidion has acquired multiple healthcare IT companies and expanded its foothold in the UK, Australia, and New Zealand to now service over 400 hospitals and 95 healthcare organisations, with further geographical expansion planned.

With over 20 years of healthcare experience, Alcidion brings together the very best in technology and market knowledge to deliver solutions that make healthcare better for everyone.

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Chair's Address

As Chair of the Board, I'm pleased to stand before you today to reflect on our year and share our vision and optimism for the future.

The fundamentals of Alcidion's business remain strong and highly relevant in an environment of continued and growing pressures on healthcare systems worldwide. The core themes that led to the founding of Alcidion are more pertinent today than ever. An aging population, thanks largely to innovations in healthcare, has resulted in increasing demands on healthcare services, a shift towards healthcare intervention and prevention, workforce capacity, and funding constraints.

A cornerstone of Alcidion's technology solutions is our ability to inform clinical decisions and provide information that reduces medical errors and medication mistakes, which today is a leading cause of death in the US, Australia, UK and many other countries.

Our Purpose and Profitability

At Alcidion, our purpose is clear: we aim to make a meaningful impact on patients' health and wellbeing through innovative, intuitive technology that helps clinicians achieve better outcomes. However, we also recognise that this must be balanced with the need to grow a sustainable, profitable business.

At the start of the last financial year, we believed we were on track to achieve profitability. We had a strong pipeline and a solid revenue base. But as you're aware, we didn't reach that goal. While business success is rarely straightforward, we acknowledge the disappointment in our financial performance this year and its impact on our valuation.

Encouraging Progress

Importantly, the underlying fundamentals of our business remain strong. As we shared with our shareholders, the revenue shortfall was due to extended procurement cycles, particularly in the UK—a challenge affecting the entire industry—rather than any decrease in demand for our Miya platform.

Despite this, we made significant progress in the second half of the year, tightening our cost base and benefiting from a more favourable sales environment. As a result, we improved our Underlying EBITDA position by \$2.2m in H2 compared to H1 and delivered a positive H2 cash flow which gives me and the Board confidence that we are now on the right path to profitability.

Expanding Our Footprint

Alcidion is a trusted partner for hospitals in the UK, Australia, and New Zealand, helping them tackle some of their most pressing challenges. Our unique Miya Precision platform, with its modular and interoperable design, is allowing healthcare providers to create truly integrated systems that deliver meaningful, actionable data to clinicians.

We continued to expand our reference sites and build relationships with existing customers. South Tees in the UK remains a critical global reference site for us, and we were pleased to extend our contract with them during the year. Hampshire Hospitals Trust recently went live with our emergency department module—the first rollout of this new solution, which was a significant milestone for us.

New Contract Wins

We've already secured several new and highly significant contracts this financial year. North Cumbria Integrated Care NHS Foundation Trust selected Alcidion as the preferred supplier for its new Electronic Patient Record (EPR) system. This 10-year contract, valued at up to \$40M, is a major milestone, reinforcing our EPR strategy alongside customers like South Tees. We are moving positively toward finalising this contract and signing in the new year.

In July we signed a \$4M contract with Hume Rural Health Alliance for the use of Miya Precision as an enterprise digital platform with a focus on patient flow and virtual care. This is a significant deal in that it is regional, covering 15 hospitals. I'm pleased to report that we are on track to go live imminently, which for a hospital deployment of this scale is rapid.

In this climate, what is truly exciting, is the collective movement of healthcare administrators to move beyond "platform thinking" to action. In hospitals all around the world – which are now in a recovery and preparation phase, post-pandemic – is a genuine acknowledgement that accurate information flow and its close connection to clinical decision making can genuinely improve, or even save, lives.

We are living in a time that demands much more than EPRs – Alcidion is a great example of a "platform solution, in action" – and we remain focused on the future and continuously innovating – and I am proud to see such a diverse group of customers collaborating with us to deliver technology that meets their evolving needs.

Looking Forward

With these recent wins and improvement to our cost base, we enter the new financial year with optimism and confidence. We're focused on rebuilding shareholder value and taking advantage of both short- and long-term opportunities that will allow Alcidion to reach its full potential. This will be achieved through the delivery on our new contract deployments, continuing to provide excellent customer experience and service, and maintaining strong stewardship of our finances.

I'd like to take a moment to thank our CEO, Kate Quirke, for her leadership, and the entire Alcidion team for their unwavering commitment to our mission and the role they play individually to our success. Their hard work and dedication continue to build trust with our customers and support our progress.

I'd also like to thank my fellow board members, especially Simon Chamberlain, who retires today after five years of service on the Alcidion board. Simon, your expertise and contributions have been invaluable, and we wish you all the best.

I'm pleased to formally welcome Will Smart to our board. Will is standing for election today. Will's proximity in the UK comes at an important time of continuing to increase our presence in this key market and given his digital health leadership and demonstrable executive and non-executive experience in our industry, we are looking forward to his contribution to the board in the coming years.

Finally, to you, our shareholders, thank you for your continued loyalty and patience. We share your frustration with this year's results as stewards of your business and as fellow shareholders, but we are steadfast in our commitment to building a stronger, more valuable company—one that drives sustainable growth for the future.

Thank you.



ALCIDION

Annual General Meeting

23 OCTOBER 2024





INTRODUCTION



ACKNOWLEDGEMENT OF COUNTRY

Alcidion acknowledges the Traditional Custodians
of the land we live and work upon and pay our
respects to Elders past and present.

Alcidion Group Board



Rebecca Wilson
Non-Executive Chair



Kate Quirke
Group Managing Director | CEO



Daniel Sharp
Non-Executive Director



Simon Chamberlain
Non-Executive Director
(retiring at the conclusion of today's AGM)



Victoria Weekes
Non-Executive Director



William Smart
Non-Executive Director

Format of Meeting

01

Chair Address

02

Annual General Meeting
Presentation

03

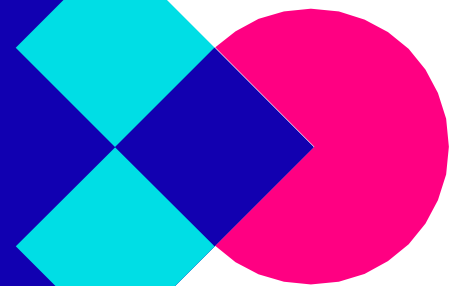
Q&A / Voting Procedure
Overview

04

Formal Business of the
Meeting

05

General Questions





01

Chair Address

A photograph of two healthcare professionals, a man and a woman, in blue scrubs. They are standing in a brightly lit room, possibly a hospital hallway or office, and are looking intently at a tablet computer held by the man. The woman is pointing at the screen. Both have identification badges. The background is slightly blurred, showing large windows and other people in the distance. A decorative graphic on the left side of the image consists of a blue square with a white circle and a pink circle, partially overlapping the text area.

02

**Annual General
Meeting
Presentation**



ALCIDION

FY24 AGM Presentation

Presenting:

Kate Quirke - Group MD & CEO

Nick White - CMO

23 October 2024



Smarter Solutions for Clinicians



Powering Smarter Care
At the core of the Alcidion solution is our FHIR-based interoperability platform for smarter decision support

Miya Precision Platform
Data to FHIR,
Ontology Mapping,
CDS Engine

Patient Flow
Industry leading digital patient flow journey boards

Virtual Care
Virtual care and remote patient management

Operations Centre
Integrated Operations Centre enablement

Specialised Care
Emergency Department and Specialised Care

Data & Analytics
Real-time data replication, insights and predictive analytics

Integrated Care Record
Longitudinal patient health record

Modern Modular EPR
Modular cloud-native Electronic Patient Record and Patient Administration System

Clinical Workflow
NLP enabled noting, assistive workflow tasking, clinical comms, and mobility

A sample of our customers . . .



Alfred Health
Journey Boards & Operations Management



Western Health
Patient Flow, Capacity Management



NT Health
Patient Flow & Command Capability



South Tees NHS Trust
Miya Electronic Patient Record (EPR)



Australian Defence Force
Longitudinal Health Record

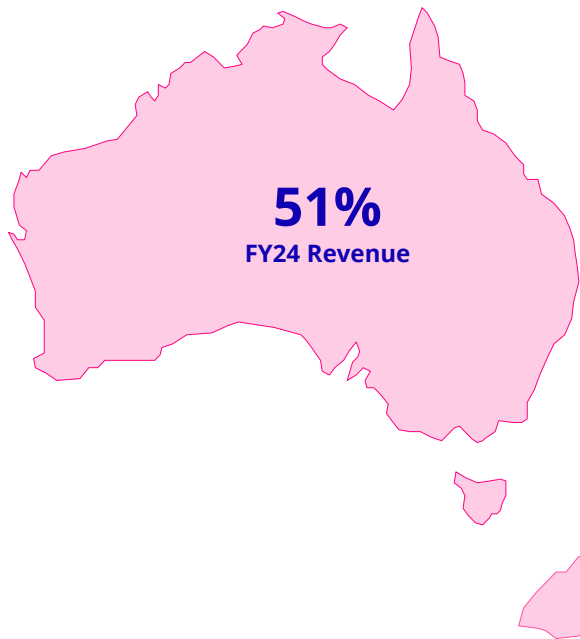


Dartford & Gravesham NHS
Miya Electronic Patient Record (EPR)

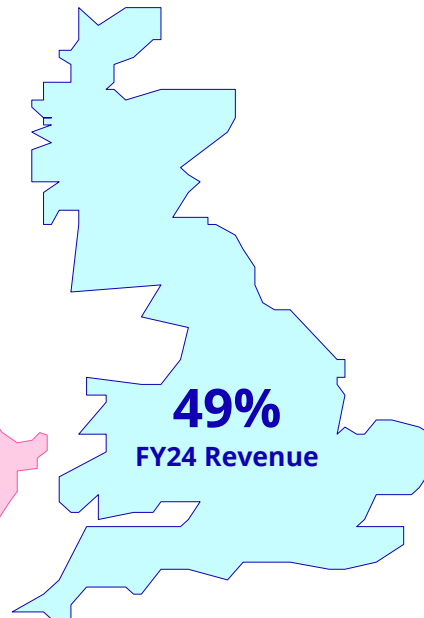
Global Operations...

Current Operations

Australia & New Zealand



United Kingdom



Future Geographical Expansion

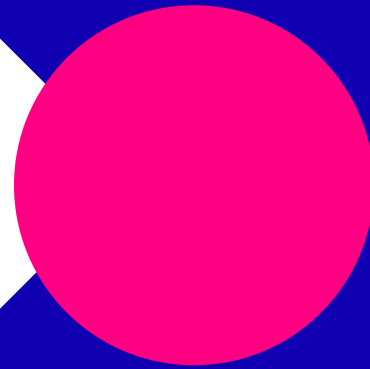
Key Criteria:

- Sizable market
- English speaking (reduced development spend)
- Healthcare structure similar to UK / Australia
- Access to digital healthcare data

Target location:

- North America (initial focus on Canada)
- Europe – Nordics priority
- United Arab Emirates (UAE)
- Southeast Asia

Customer Success



Notable Contract Wins & Renewals



New contracts reinforce modular strategy, catering to needs of customers as they enhance their digital maturity



Hume Rural Health Alliance (AUS)

- TCV of \$4.0m over 5 years
- Miya Precision deployed as an enterprise digital platform across multiple sites in regional Victoria with a focus on patient flow and virtual care
- Potential for module expansion in future



South Tees NHS Trust (UK)

- Signed \$23.3M contract extension for an additional 8 years (to 2033 with 2 years remaining on current contract) for Miya Precision Electronic Patient Record (EPR)
- Further options to extend to 2038 and add further modules which if taken would result in total TCV of up to \$54M over the next 15 years



Dartford & Gravesham NHS (UK)

- TCV of \$3.4m over 3 years
- Renewed Miya Precision contract building upon existing 5 years relationship
- D&G was first Miya Precision site in UK
- Success of modular approach strategy positions D&G well for future enhancements



Tameside and Glossop Integrated Care NHS Foundation Trust (UK)

- 3 year initial term with the option to extend for 2 years
- The Contract provides the trust with a licence for Miya Observations and Assessments in inpatient settings
- Across Adults, Maternity, and Paediatric areas, Assessments, & integration to Tameside PAS

EPR Validation: North Cumbria



Selected as Preferred Supplier by North Cumbria Integrated Care NHS Foundation Trust (NCIC) for new EPR platform solution

Preferred Supplier - Overview

- Selected following a competitive tender process
- Deploy Miya Precision encompassing full suite offering incl. Silverlink PCS
 - NCIC is an existing Alcidion customer utilising Silverlink PCS Patient Administration System (PAS)
- Solution will provide clinicians real-time access to patient records while streamlining patient flow & improving clinical decision-making processes

Anticipated Contract Terms

10 years

Contract duration

A\$30-40M

Total Contract Value (TCV) under negotiation

Q3 FY25

Targeted deployment

Traction in UK EPR Market

- 2nd UK EPR contract following 10 year \$23m extension of South Tees contract signed in Dec-23.
 - Optionality for additional modules; if selected would add TCV of \$10m+ and thus similar size to NCIC
- NCIC and South Tees provides two good reference points as to the shape and size of various EPR contracts



NCIC - Overview

- Provides care for approx. half a million people in the North of the UK
- Hospital & community care provided across:
 - 2 acute care hospitals
 - 8 community-based hospitals
 - 8 Integrated Care Communities (ICC)



Successful Deployments in FY24



Product Implementation and technical services have always been a strength of the Alcidion business



Herefordshire and Worcestershire NHS (UK)

- First deployment of Miya Precision for Flow and Bed Management into community and mental health trust
- Provides reference site for new market segment



Hampshire Hospitals NHS (UK)

- 1st site using Miya Emergency (ED) module
- 2,700+ docs created across 3 locations in the first 12 hours demonstrating Miya's ability to support high demand healthcare services
- Highlight's ability to innovate and commercialise new functionality
- Expands footprint within same Integrated Care System (ICS) as UHS



Bolton NHS (UK)

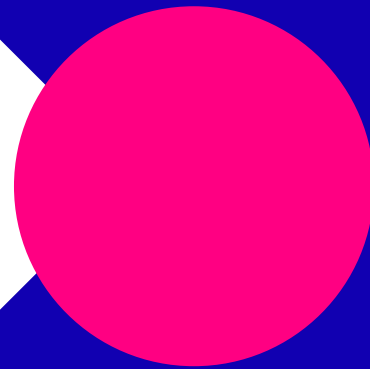
- 'Live' with Flow, Access and Command modules
- Replaced the Extramed solution and created another new Miya Precision site in the UK
- Validation of progressive strategy to upgrade ExtraMed sites to Miya Precision



Calvary Health (AUS)

- Our data and analytics team worked with Calvary Health to deliver the Calvary Data Hub
- Currently encompassing 28 live dashboards and ingesting 38 data sources, across 7 years of data
- Providing a centralised view as a single source of truth across Calvary Health

FY24 Financials

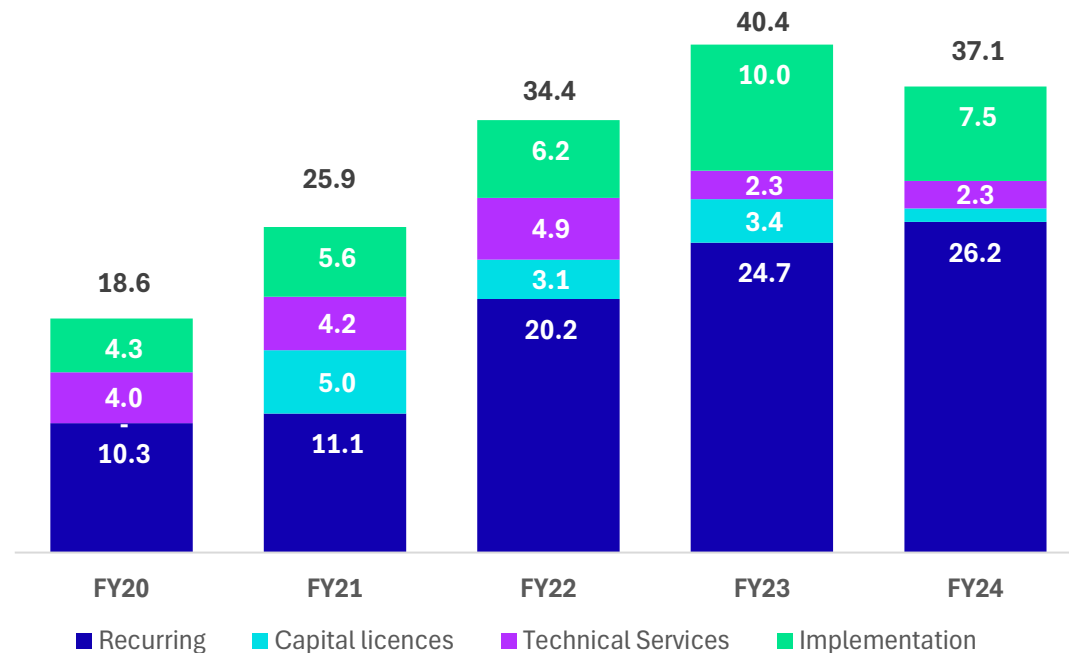


Revenue Dashboard



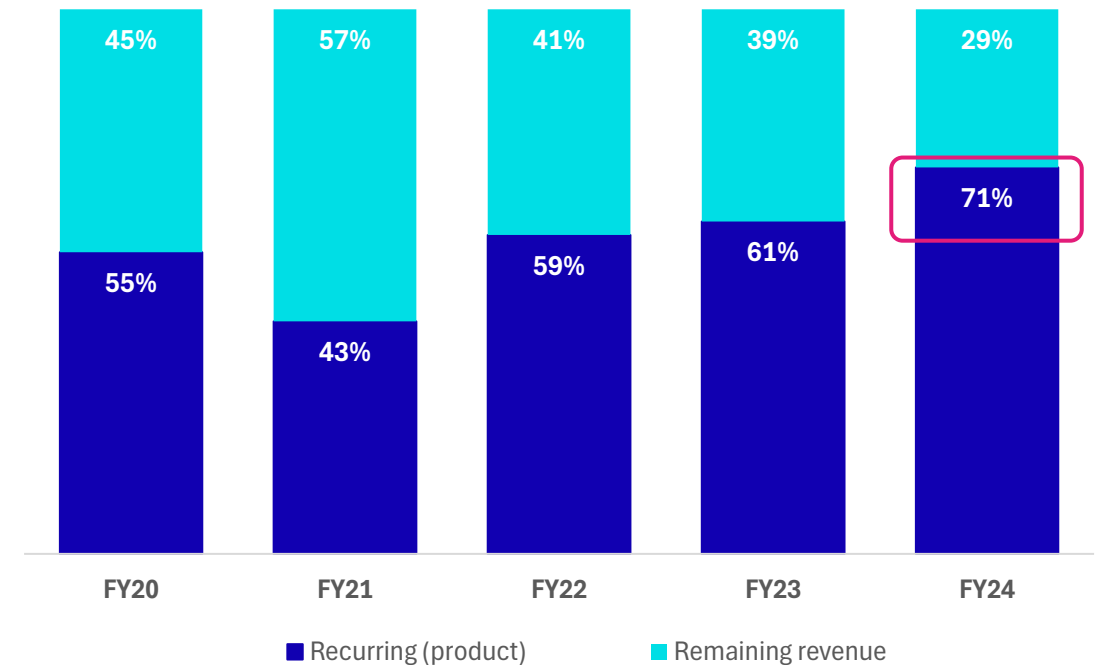
Revenue Category Breakdown (\$M)

- **Recurring product** revenue (ARR) of \$26.2M, up 6% on pcp
 - Includes: Annual Maintenance & Support (M&S); Annual recurring licence fee; or Annual subscription fee (bundled M&S + licence fee)
- **Capital licenses** includes revenue received for licence fees which are recognised upfront that cover a multi-year period



Recurring ARR (product) % vs. Total Revenue (%)

- 71% of FY24 revenue classified as ARR
 - Highest percentage in Alcidion history



Profit & Loss (H1 vs H2 FY24)



Significant impact of cost saving initiatives implemented in H2; Alcidion on clear path to profitability

Profit & loss (A\$000)	H1'24	H2'24	% change
Total revenue	19,059	17,998	(6%)
Direct costs	(2,322)	(2,815)	21%
Gross profit	16,737	15,183	(9%)
<i>Gross profit %</i>	87.8%	84.4%	
Salaries & wages	(16,137)	(13,099)	(19%)
Professional fees	(541)	(400)	(26%)
Marketing	(456)	(472)	4%
Other operating expenses	(2,391)	(1,818)	(24%)
Operating expenses	(19,525)	(15,789)	(19%)
Underlying EBITDA	(2,788)	(606)	na
Restructure & related costs	-	(1,033)	
Share based payments	(136)	(16)	na
EBITDA	(2,924)	(1,655)	na

- 1 19% reduction in staff costs in H2 vs H1
 - Tightened cost base throughout FY24 which resulted in ~\$6.4m of annualised savings, predominantly related to staffing
 - Due to timing of cost initiatives being implemented, H2 includes \$0.9M of staff costs that will not be incurred in future periods
 - Q4'24 exit staff costs were approximately \$6.2M per quarter
- 2 24% reduction in other operating expenses in H2 vs H1
- 3 H2 EBITDA loss of \$0.6M, an improvement of \$2.2M over H1

Run-rate EBITDA breakeven sales of ~\$36m¹

1. Approximate EBITDA breakeven point based on Q4 exit run-rate fixed cost base assuming gross profit margin of ~90%



The Impact of Miya

DELIVERING MEASURABLE BENEFITS FOR
CUSTOMERS

Calculating the impact of Miya

Our objective:

To create a **business case template...**

which **supports our customers...**

to **understand and communicate** the proven impact of Miya Precision...

in a manner which **respects healthcare workers...**

and aligns to **healthcare economics.**



PART 1

Recap the DHCRC/Monash study of Miya Precision at Alfred Health.



PART 2

Present Alcidion customer reported benefits from Miya and Smartpage deployments



PART 3

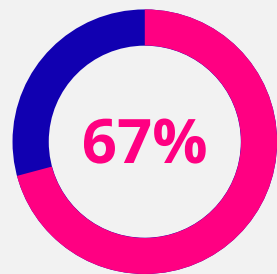
Using health economics to translate these benefits into a business case for Miya

Alfred Health – Independent Study on Miya Precision Benefits



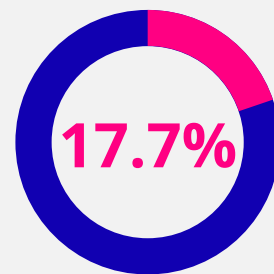
In 2023, Alfred Health introduced electronic patient journey boards (EPJBs) to 38 inpatient wards across 3 hospitals. The Digital Health CRC and Monash University used the deployment to conduct an 18-month study on the benefits of EPJBs.

1. Efficiency in bed allocation



Digital bed allocation **decreased call duration by 67%**, highlighting transparency, process simplification, capacity improvements and freeing up resources for additional tasks.

2. Reduction in outliers



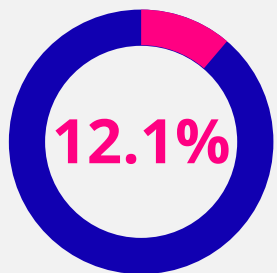
The study identified a **17.7% reduction in the number of outliers** at the point of admission, indicating improved availability of beds and visibility of both incoming patient demand and bed capacity in target wards.

3. Real-time patient information



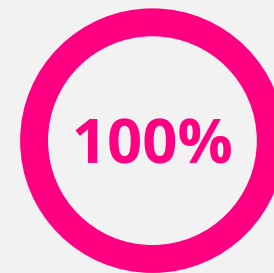
100% Alignment of Patient Information
FHIR-based two-way real-time integration **eliminated a 25-40% discrepancy** between EMR data and traditional whiteboards, enhancing patient safety and streamlining clinical updates.

4. Reductions in length of stay



During the course of the study, a consistent decline in patient length of stay (LoS) was observed, **decreasing by 12.1%** over an 18-month period from 3.15 days to 2.77 days.

5. Discharge planning improvement



100% of patient records now include an Estimated Date of Discharge (EDD), up from a baseline of 61%. Changes to EDDs require a reason, aiding analysis of discharge forecast accuracy and continuous improvement.

6. Consistency in ways of working




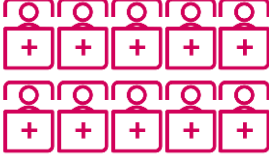

From 30 different ways of working



To 9 variations of EPJB tailored to the clinical workflow (with 80% commonality)

Customer reported benefits



	 Released Nursing Time	 Released Physician Time	 Released Non-clinical Time	 Released Capacity	 Released Operational Cost
Miya Observations & Assessments (Patientrack)	20 mins / admission 1 min / observation				975 documents per day
Smartpage	4 mins p/transfer	20 mins p/hr	13% efficiency saving		
Miya Noting		60 mins p/round			2500 documents per day
Miya Flow	75 mins p/shift	← also releases nurses	67% shorter bed allocation calls	17.7% fewer outliers 12.1% lower length of stay	
Miya Virtual Care				1 for 1 release in bed capacity	20% reduction in cost of care
Miya Emergency					4750 documents per day

For an 800-bed healthcare system...



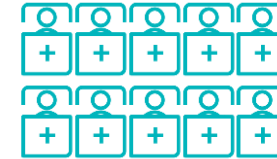
Released
Nursing Time



Released
Physician Time



Released
Non-clinical Time



Released
Capacity



Released
Operational Cost

How much capacity
have we released?

321,235 hours
(165 FTEs)

408,220 hours
(209 FTEs)

27,397 hours
(14 FTEs)

35,375
bed days
(97 beds)

3,002,125
docs digitised

Estimating how much
that worth in theoretical
dollars

\$8.2m

\$17.7m

\$0.8m

\$42.4m

\$0.85m

Grand Total: \$70.1m

**Estimated value of annual benefits for an
800-bed provider using all Alcidion modules**



More than 1000
trees saved

Alcidion delivers over \$1bn of value to the global healthcare economy



As a theoretical exercise, we looked at each of our customers and applied the benefits model to estimate Alcidion's global impact on the healthcare economy:

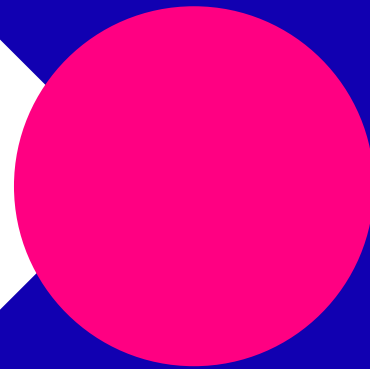
How big could this impact be if all our customers adopted all our modules....

\$1.059 billion



\$3.342 billion

Outlook



Outlook



Increased procurement activity has continued, with re-aligned cost base positioning business well for profitability

- As of August 2024, \$28.0M of contracted and renewal revenue expected to be recognised in FY25
 - Excludes any potential revenue from NCIC (North Cumbria) which would be material depending on final contract structure
 - Excludes revenue from other deals expected to be signed from the pipeline
- Run-rate EBITDA breakeven revenue of approximately \$36.0M¹
- Targeting EBITDA positive in FY25
- Increased market activity over the past 6 months with several opportunities progressing to selection stage of procurement cycle
- ~\$130M of contract and renewal revenue able to be recognised from FY25 to FY29, representing significant long-term value (excluding upside expansion from existing contracts or impact of preferred supplier contract with North Cumbria)
- Cash balance of \$11.8m and no debt as of 30 June 2024
- Appointed global digital health leader Will Smart (based in UK) as Non-Executive Director from 1 October 2024
 - Recently stepped down as the Global Director of External Relations, Dedalus Group, a global digital health company
 - Currently Digital NED, Great Western Hospitals NHS Foundation Trust & previously CIO for Health and Social Care for England

1. Approximate EBITDA breakeven point based on Q4 exit run-rate fixed cost base assuming gross profit margin of ~90%

Investment Highlights



Large Addressable Market

- ~146 Acute UK NHS Trusts; ALC with foothold in only ~27%
- Focus on management of patient flow creating increasing opportunities
- AUS opportunities exist in clinical decision support, operational efficiency using EMR data
- Geographical expansion on radar

Product Offering

- Cloud native, modern modular platform improving hospital efficiencies and clinical decision-making
- Highly interoperable and built on open standards
- Designed to be an active participant in health care rather than passive data store

Strong Financial Profile

- ~71% recurring product revenue, supported by multi-year contracts
- Gross profit margins ~90%
- Run-rate EBITDA breakeven revenue of approximately \$36M
- \$28.0M contracted/renewal revenue in FY24

Long-term Contracts

- Long-term customer contracts (typically 3-10 years) with ongoing options for renewal
- Critical nature of software results in negligible churn
- Enterprise healthcare organisations (NHS Trusts, State health, private health)

Marquee Customers

- Selected as preferred supplier for new EPR to North Cumbria; TCV \$30-40m over 10 yrs
- \$31.7M over 5.5 years with Leidos (Aus) to assist Australian Defence Force with health record
- \$23M over 10 years (to 2033) with South Tees NHS (UK) for full Miya Precision suite

Market Tailwinds

- Health systems stretched with limited bed availability & under-resourced clinical staff seeking improved tech solutions for efficiency
- UK Government remaining committed to their pursuit of modernising the NHS, significant funding being allocated

Disclaimer



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Financial data

All financial amounts contained in this presentation are expressed in Australian dollars (unless otherwise stated). Any discrepancies between totals and sums of components in tables, figures and body content contained in this presentation are due to rounding. Tables, figures and body content contained in this presentation have not been amended by ALC to correct immaterial summation differences that may arise from this rounding convention.

Investors should also be aware that certain financial data included in this presentation including underlying NPAT and underlying EBIT/EBITDA and measures described as "pro-forma", are "non-IFRS financial information" under ASIC regulatory Guide 230 (disclosing non-IFRS financial information). The non-IFRS financial information financial measures do not have a standardised meaning prescribed by Australian International Reporting Standards (AIFRS) and, therefore, may not be comparable to similarly titled measures presented by other companies, nor should they be construed as an alternative to other measures determined in accordance with AIFRS. Investors are cautioned, therefore, not to place undue reliance on any non-IFRS financial measures included in this presentation.

A healthcare professional, likely a nurse or doctor, is shown in a clinical setting. She is wearing blue scrubs and has a stethoscope around her neck. She is looking down at a tablet computer she is holding in her hands. In the background, there is a computer monitor displaying a data table with multiple columns and rows of text. The overall scene is brightly lit, typical of a hospital or clinic.

03

**Q&A / Voting
Procedure
Overview**

A man and a woman in blue scrubs are standing in a hospital hallway, looking at a tablet together. The man is on the left, gesturing with his hands as they both look at the screen. The woman is on the right, holding the tablet. In the background, another person in white scrubs is visible, and there are large windows and a door. A blue and pink graphic overlay is on the left side of the image.

04

**Formal Business
of the Meeting**

Receipt and Consideration of Financial & Other Reports



To receive and consider the Financial Report of the Company and the related reports of the Directors (including the Remuneration Report) and Auditors, for the financial year ended 30 June 2024.

Further Information

- ▶ Matt Gepp, Chief Financial Officer of Alcidion Group Limited and Grant Martinella of William Buck, the Company's external Auditor are present and available to answer any queries.
- ▶ Please note there is no vote required for this Item.

Resolution 1 – Adoption of Remuneration Report



To consider and, if thought fit, pass the following as an **ordinary resolution**:

“That for the purpose of Section 250R(2) of the Corporations Act and for all other purposes, the Remuneration Report (included in the Directors' Report) for the financial year ended 30 June 2024 be adopted.”

FOR	AGAINST	PROXY'S DISCRETION	ABSTAIN
280,401,846	6,060,266	34,619,732	508,276
87.32%	1.89%	10.79%	-

Further Information

- › Voting restrictions apply to Key Management Personnel and their closely related parties.
- › The vote on this Resolution is advisory only and does not bind the Directors or Company.
- › The Board recommends that Shareholders vote in **FAVOUR** of this Resolution.
- › The Chair of the Meeting intends to vote undirected proxies in **FAVOUR** of this Resolution.

Resolution 2 – Re-election of Victoria Weekes as a Director of the Company



To consider and, if thought fit, pass the following as an **ordinary resolution**:

“That Victoria Weekes, being a Director who retires by rotation pursuant to Clause 21.1 of the Constitution and Listing Rule 14.4 and who, being eligible, offers herself for re-election, be re-elected as a Director of the Company.”

FOR	AGAINST	PROXY'S DISCRETION	ABSTAIN
333,205,462	138,420,645	34,595,732	1,894,458
65.82%	27.34%	6.84%	-

Further Information

- ▶ The Board (with Victoria Weekes abstaining) recommends that Shareholders vote in **FAVOUR** of this Resolution.
- ▶ The Chair of the Meeting intends to vote undirected proxies in **FAVOUR** of this Resolution.

Resolution 3 – Re-election of Daniel Sharp as a Director of the Company



To consider and, if thought fit, pass the following as an **ordinary resolution**:

“That Danny Sharp, being a Director who retires by rotation pursuant to Clause 21.1 of the Constitution and Listing Rule 14.4 and who, being eligible, offers himself for re-election, be re-elected as a Director of the Company.”

FOR	AGAINST	PROXY'S DISCRETION	ABSTAIN
333,277,948	137,256,857	34,653,438	2,928,054
65.97%	27.17%	6.86%	-

Further Information

- ▶ The Board (with Daniel Sharp abstaining) recommends that Shareholders vote in **FAVOUR** of this Resolution.
- ▶ The Chair of the Meeting intends to vote undirected proxies in **FAVOUR** of this Resolution.

Resolution 4 – Election of William Sharp as a Director of the Company

To consider and, if thought fit, pass the following as an **ordinary resolution**:

“That William Sharp, who was appointed as an addition to the Board since the last Annual General Meeting of the Company and who retires pursuant to Listing Rule 14.4 and Clause 20.4 of the Company’s Constitution, be elected as a Director of the Company.”

FOR	AGAINST	PROXY’S DISCRETION	ABSTAIN
469,302,578	2,542,961	34,595,732	1,675,026
92.66%	0.50%	6.84%	-

Further Information

- ▶ The Board (with William Smart abstaining) recommends that Shareholders vote in **FAVOUR** of this Resolution.
- ▶ The Chair of the Meeting intends to vote undirected proxies in **FAVOUR** of this Resolution.

Resolution 5 – Approval of the Company’s Equity Incentive Plan



To consider and, if thought fit, pass the following as an **ordinary resolution**:

“That, for the purposes of Listing Rule 7.2, Exception 13(b) and sections 259B(2) and 260C(4) of the Corporations Act, Shareholders approve the issue of securities under the Company’s Equity Incentive Plan (EIP) (copies of the Plan Rules are available for inspection at the Company’s registered office) at the discretion of the Board in accordance with the rules of the EIP, and on the terms and conditions as described in the Explanatory Statement.”

FOR	AGAINST	PROXY’S DISCRETION	ABSTAIN
196,942,898	140,500,070	34,830,887	85,170,084
52.91%	37.74%	9.35%	-

Further Information

- ▶ As the Directors of the Company are excluded from voting pursuant to the Listing Rules, they make no recommendation to Shareholders in respect of this Resolution.
- ▶ The Chair of the Meeting intends to vote undirected proxies in **FAVOUR** of this Resolution.



**VOTING CLOSURE AND
END OF FORMAL
BUSINESS**



05

**General
Questions**



THANK YOU

FOR YOUR ATTENDANCE