NovAccess Global

Dwain Irvin, PHD, MPH

CEO

Virtual Investor Summit

December 2023

Acceleration Through Innovation

MARKET SYMBOL : XSNX

Forward-Looking Statements

This information package contains forward-looking statements, which includes forecasts and timelines. Often, but not always, forward-looking statements can be identified by the use of words such as “plans”, “will”, “proposes”, “expects”, “estimates”, “intends”, “anticipates” or “believes”, or variations of such words and phrases or state that certain actions, events or results “may”, “could”, “would”, “might” or “will” be taken, occur or be achieved. Forward looking statements involve known and unknown risks, uncertainties and other factors which may cause the business to have actual results, performance, or developments, to be materially different from any future results, performance or developments expressed or implied by the forward-looking statements. Although the company has attempted to identify important factors that could cause actual results, performance, or developments, to differ materially from those described in forward-looking statements, there may be other factors that cause results, performance or developments not to be as anticipated, estimated or intended. There can be no assurance that forward-looking statements will prove to be accurate, as actual results, performance, or developments, could differ materially from those anticipated in such statements. All nominal figures will be presented in USD amounts.

Accordingly, readers should not place undue reliance on forward looking statements, as the company can make no guarantee of future results.

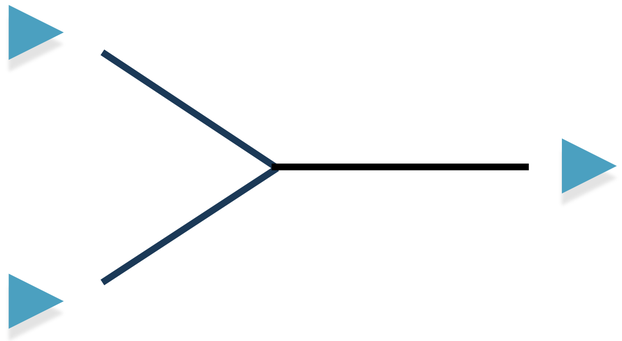
About Us

- Pre-IND stage biotech company developing novel, personalized immunotherapies for brain cancers, glioblastoma
- Orphan drug-designation, all malignant brain tumors, TLR-AD1
- Glioblastoma, 2027, $2.9 Billion Market Size (GlobalData Inc. 2019)
- An expert scientific and managerial team focused on bringing novel cancer therapeutics to market through innovation

Our Focused Mission

Growth by acquisition of cutting-edge assets

Utilization of our expert executive and scientific advisory board



Enhance and accelerate bringing to market novel brain tumor immunotherapies

Glioblastoma Facts

- More than 20,000 brain tumors diagnoses are estimated annually in the U.S.
- Glioblastoma is the most common primary adult brain tumor (e.g. Ted Kennedy, John McCain)
- Five-year survival rates are less than 5% for Glioblastoma
- Despite 40-year advances in Chemotherapy and Radiation, no change in patient survival

Immunotherapy for Glioblastoma

Problem: ***No brain cancer immunotherapy in market, to date***

- Standard of Care: Surgical resection followed by radiation and chemotherapy
- 15-month median survival
- No Cures: Significant unmet need

Opportunities:

- Immunotherapy: 3 Major Types
  1. Dendritic Cell (DC)
  2. Checkpoint Inhibitors
  3. T-Cell

▷ All immunotherapy approaches have been associated with enhanced immunity against cancer

Immunotherapy for Glioblastoma

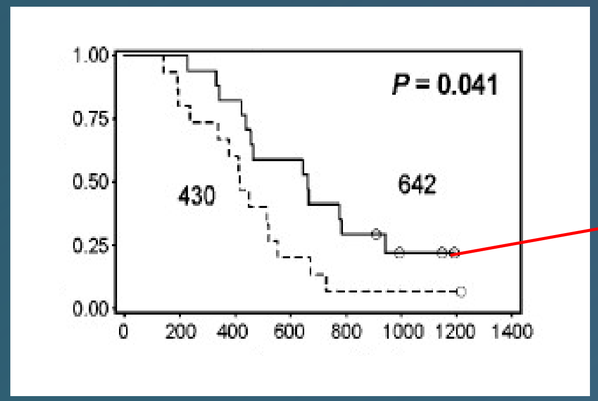
Dendritic Cell Vaccine (1st Generation)

- Improves survival in responders (Phase I and II)
- Reduces chance of Glioblastoma recurrence
- 3rd gen in development – improvement in survival & outcome

TLR-AD1 3rd Gen vs. 1st Gen Vaccine

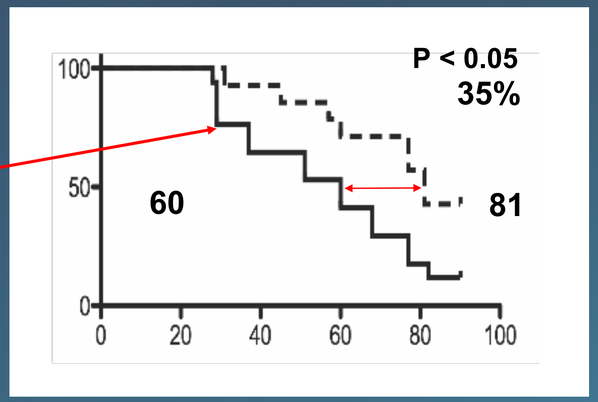
Preclinical Survival Optimization of 3rd Gen TLR-AD1 Vaccine

Human Clinical trial on 1st Gen



*Wheeler et.al. Cancer Res. 2008;68(14):5955-64.

TLR-AD1 vs 1st gen



Preclinical study (not yet published).

Median Survival

- 1st/2nd Gen: 6-7 months longer life
- 3rd Gen TLR-AD: 13-25 months longer life!

For illustrative purposes only. Past performance is not indicative of future results. An Investment in the Company's securities is speculative, illiquid and there may be a total risk of loss. There is no guarantee that any specific outcome will be achieved.

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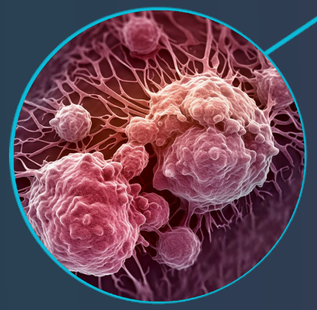
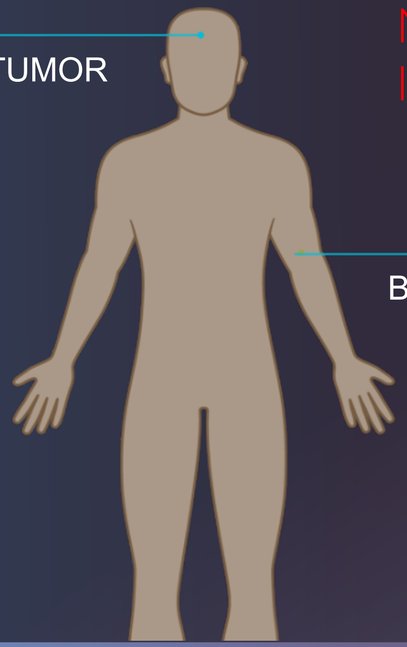
TLR-AD1 Immunotherapy for Glioblastoma

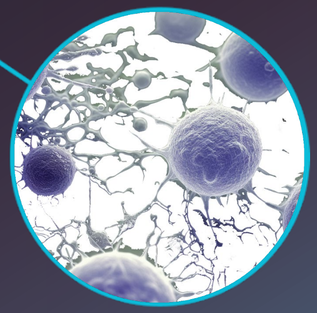
Clinical Procedure:

TUMOR ANTIGEN CELLS





Neurosurgeon isolates Tumor and Immune Cells - Sends to Lab



ANTIGEN-PRESENTING CELLS

(Dendritic Immune Cells)

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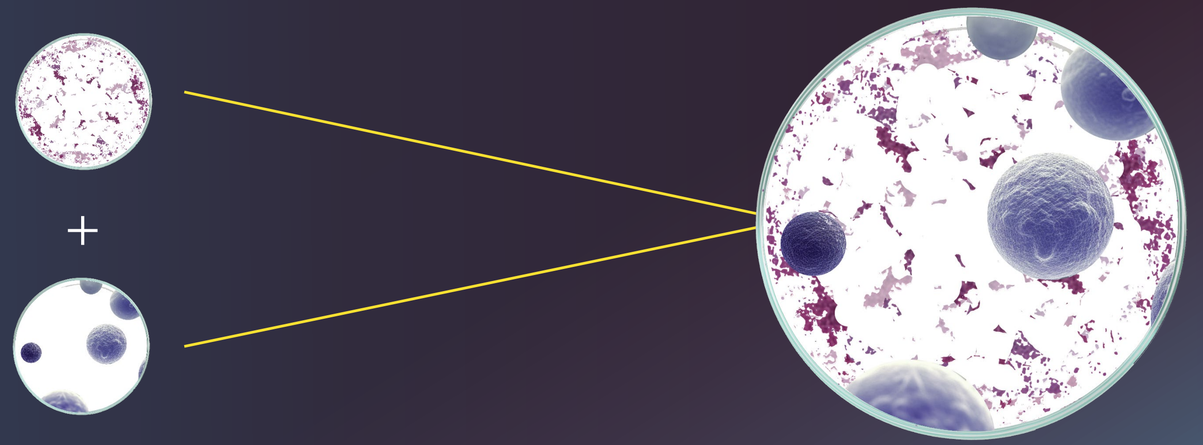
TLR-AD1 Immunotherapy for Glioblastoma

Generation 1

TUMOR CELL FRAGMENTS
(*Bulk Tumor Lysate Antigen*)

IMMUNE CELLS
(*Dendritic, APC Cells*)



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TLR-AD1 Immunotherapy for Glioblastoma

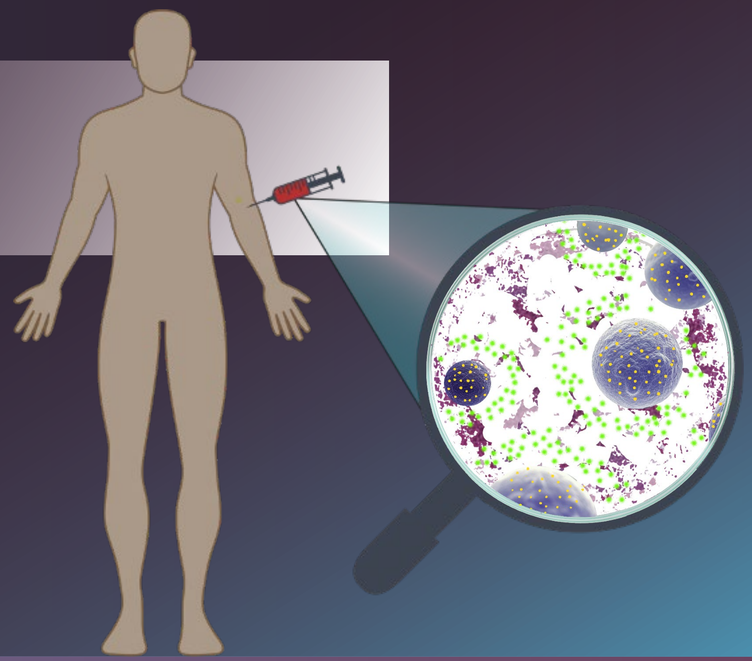
Step 3:

1st Generation Glioblastoma Vaccine Administered

Glioma Tumor Cell Lysate
Antigen specific or antigens derived from bulk lysate combined.

‘Intelligence-Briefed’ Immune Cells Introduced into Bloodstream

T-Cells Trained to Identify Tumor and Anti-Tumor Response Initiated



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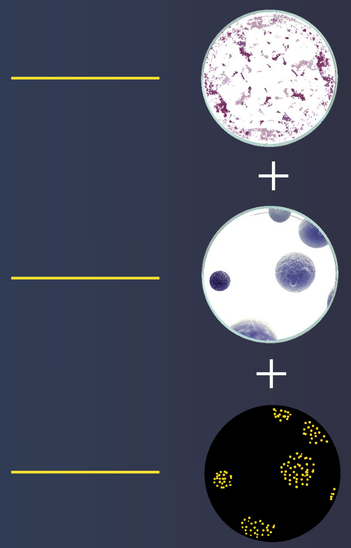
TLR-AD1 Immunotherapy for Glioblastoma

Generation 3

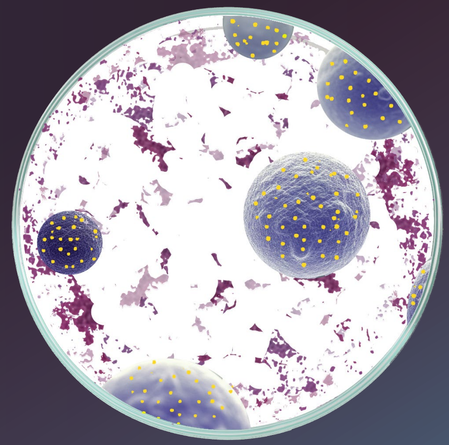
TUMOR CELL FRAGMENTS
(*Bulk Tumor Lysate Antigen*)

IMMUNE CELLS
(*Dendritic, APC Cells*)

IMMUNE BOOSTERS
(*Proprietary TLR-AD1*)



TLR-AD1



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TLR-AD1 Immunotherapy for Glioblastoma

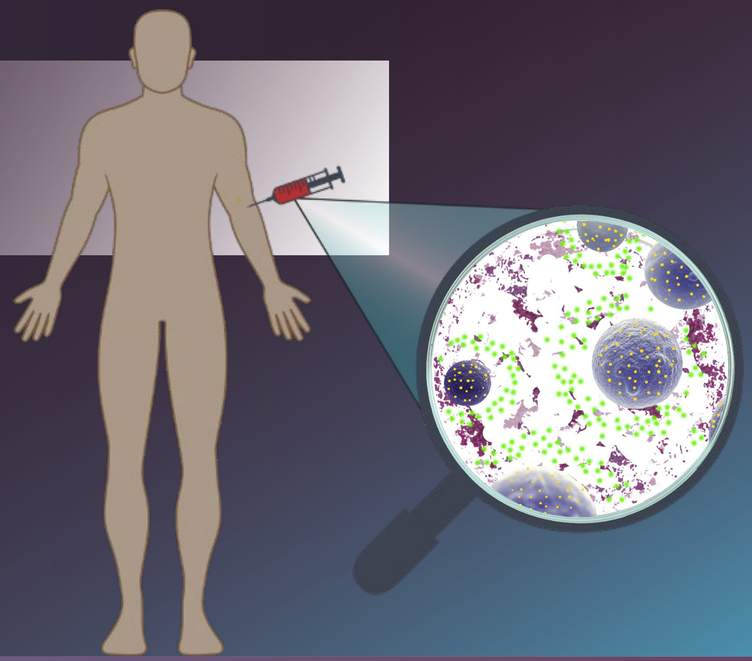
Step 3:

TLR-AD1 Glioblastoma Vaccine Administered

Glioma Tumor Cell Lysate
Antigen specific or antigens derived from bulk lysate combined with Toll-like receptor (TLR) adjuvants

‘Intelligence-Briefed’ Immune Cells Introduced into Bloodstream

T-Cells Trained to Identify Tumor and Anti-Tumor Response Initiated



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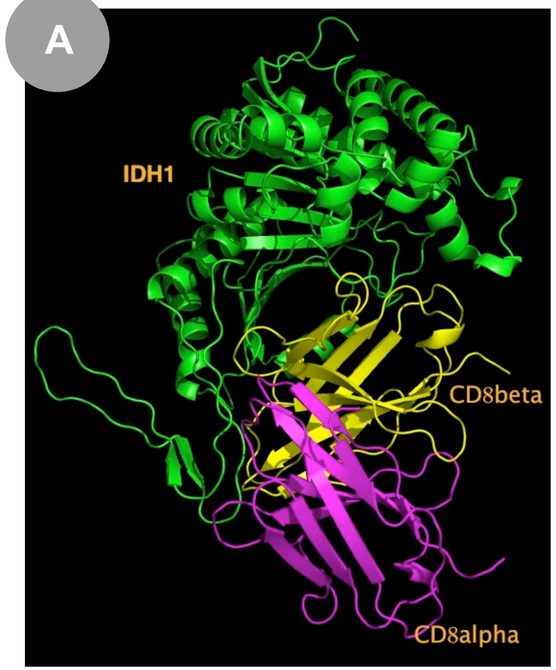
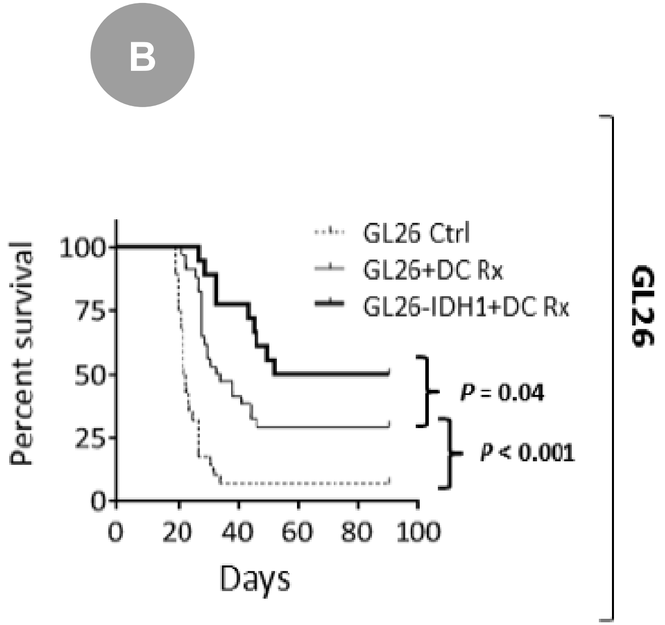
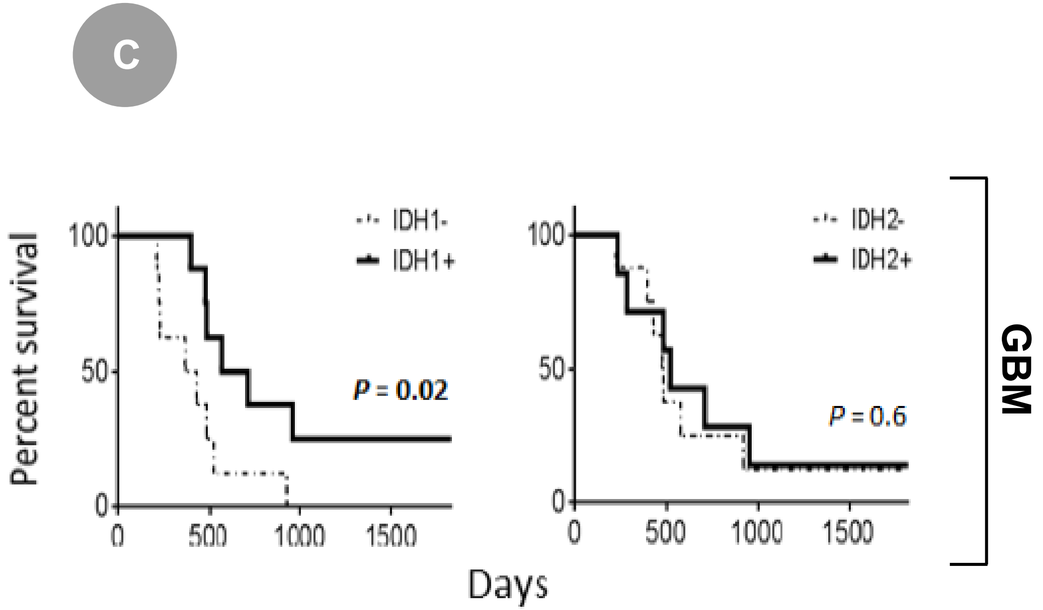
TLR-AD1







- IDH1 binds to and enzymatically modifies the CD8 coreceptor on T cells (A), enhancing their killing of tumors.
- IDH1 overexpression by a mouse glioma increases and IDH1 mutation decreases its sensitivity to vaccine treatment (B).
- The level of IDH1 in glioblastoma tumor tissue discriminates patients who survive longer after vaccine treatment (C).
- IDH1 is released from killed tumor cells and enhances responsiveness on the T cell side; expected to complement enhancement to the DC side.

TLR-AD1 Summary

- Parent immunotherapy shows improvement in patient survival over standard of care (chemotherapy and radiation) in Phase I and II Human Clinical trials
- TLR-AD1 out-performs parent immunotherapies in pre-clinical animal trials
- FDA provides Orphan Drug designation for TLR-AD1, covering all malignant brain tumors

Immunotherapy for Glioblastoma

Market Analysis:

- 2018, Global, $700M Glioblastoma Treatment Market, CAGR 9.3% (GlobalData Inc. 2019)
- 2027, $2.9B Glioblastoma Treatment Market (GlobalData Inc. 2019)
- Unmet need - No current immunotherapy for brain tumors
- Presumed significant market opportunity after registration

Investor Highlights

- Orphan Drug-Designation in October 2022
- Announce Manufacturing Partner 2023 (TBD)
- Complete Manufacturing Data for IND Application 2024 (Q3)
- File IND application with FDA in 2024 (TBD)

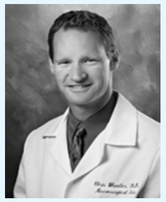
Our Team

Each Contributor, an Expert in their Field - Highly Focused, yet Adaptable

Management

Dwain Irvin Ph.D., MPH
Chief Executive Officer

Neil Laird
Chief Financial Officer



Christopher Wheeler, Ph.D.
President, StemVax Therapeutics
Co-Founder, T-Neuro

Board of Directors

John Cassarini
Portfolio Management Executive, XSNX Board Chairman

Dwain Irvin Ph.D., MPH

Jason Anderson
Life Sciences Executive and Innovator

Scientific Advisory Board

Renard Currie MBA
Manages product portfolio for $11BN company

Laina King Ph.D.
FDA/CDER, FDA/OEA
NIH Director's Office

Lachlan Thompson Ph.D.
Professor of Neuroscience

Andrew Norris Ph.D.
Co-Founder, Midvale Group
Co-Founder, BCN Biosciences
Research Faculty UCLA

Kim Seroogy, Ph.D.
Professor of Neurology, University of Cincinnati

Roscoe Moore, PHD
Government Relations

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Thank You!

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Company Highlights

2023	• Filing IND application to obtain FDA approval for human clinical trial (TBD) • Partners with BCN Biosciences to expand immunotherapy platform • Partners with CKN Ventures to expand new Precision Medicine Division
YE 2022	Partnering with manufacturing company
Q4 2022	FDA provides Orphan Drug Designation for TLR-AD1
Q3 2022	Uplisted on OTC Markets (OTCQB)
Q2 2022	Filed 1st S1 registration statement with SEC

Milestones Achieved

2022	Initiated recapitalization of company; expected to be completed with diversification of shareholder base as XSNX shares are distributed to Innovest shareholders
2021	FDA pre-IND interaction: FDA states that XSNX is not required to do additional pre-clinical R&D studies and provides a road map for an IND clinical trial submission
2020	StemVax acquired by NovAccess Global, an active OTC traded company
2017	Immunotherapy patent issued by USPTO
2008	Patent filed with USPTO
2005 - 2013	Pre-clinical studies, animal studies