ÆOLUS PHARMACEUTICALS

protecting healthy tissue

Overview

- Over \$150MM in contracts and grants from US Government
- Efficacy established in Acute Radiation Syndrome
- Near-term potential sales to US Strategic National Stockpile
- Large commercial markets driven by data from biodefense
- Two additional compounds to enter clinic in 2017
- No debt and sufficient cash for multiple years of operation

COMMERCIAL

Compound	Indication	Pre-Clinical	Phase 1	Phase 2	Phase 3
10150	Pulmonary Fibrosis	~	2016		
10150	Radiation Therapy	✓	2016		
20415	Infectious Disease	✓	2017		
11114B	Parkinsons Disease	✓	2017		

BIODEFENSE

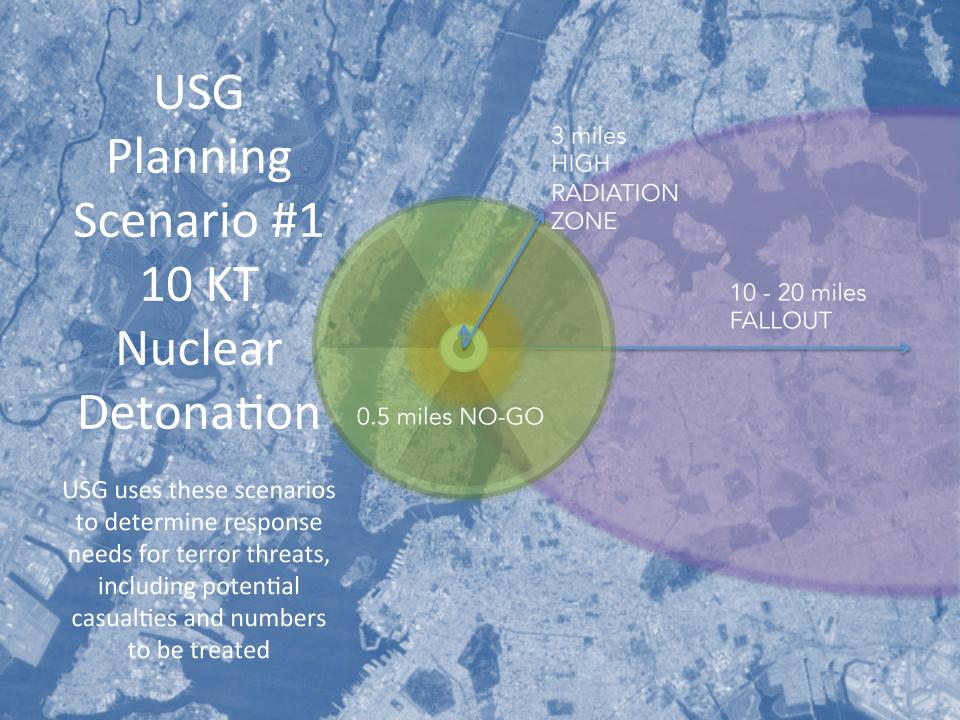
Compound	Indication	Model Development	CMC	Efficacy	Safety	Procurement
10150	ARS	✓	✓	V	2016	2016-2017
10150	Chemical Gas	✓	✓	~	2016	
10150	Nerve Gas	✓	✓		2016	
20415	Infectious Disease	✓	✓		2017	

BIODEFENSE MARKETS

- Strategic National Stockpile
 - Sales prior to FDA Approval through EUA
 - Potential sales in USG FY 2017
- Foreign Governments
 - After US sales
 - Israel, Japan, South Korea
- State & Local Responders
 - ChemPaks for chemical and nerve gas

Aeolus BARDA contract

- \$118.4MM for Advanced Development of 10150
 - Cost plus contract
- Funds all efficacy, human safety, regulatory and manufacturing costs
- Funds portion of corporate overhead
- Benefits both fibrosis & oncology programs
 - CMC
 - Human Safety

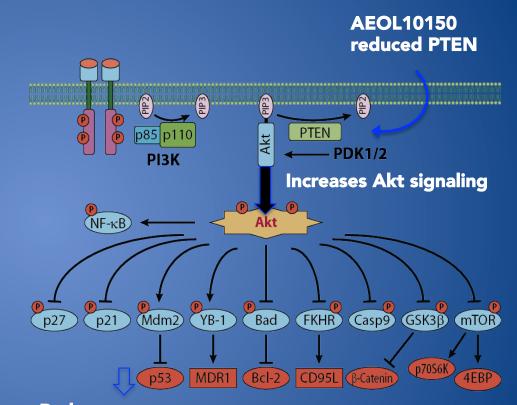


ACUTE RADIATION SYNDROME

	Gastrointestinal	Hematopoietic	Lung
Onset	Acute: 1-48 Hours	Acute: 2-7 days	Long Term: 2-3 months
Effects	Damages mucosal lining of gut, infection, loss of nutrition, death 3-10 days	Severe damage to bone marrow & immune system, infection, death 3 - 4 weeks	Inflammation of lung, scarring of lung tissue, major cause of death after GI ARS & H ARS
Treatment	Supportive care only: fluids, antibiotics	Neupogen (Amgen) approved by FDA March 2015, supportive care	NO CURRENT TREATMENT

AEOL 10150: Catalytic Scavenger of Reactive Oxygen Species and Reactive Nitrogen Species

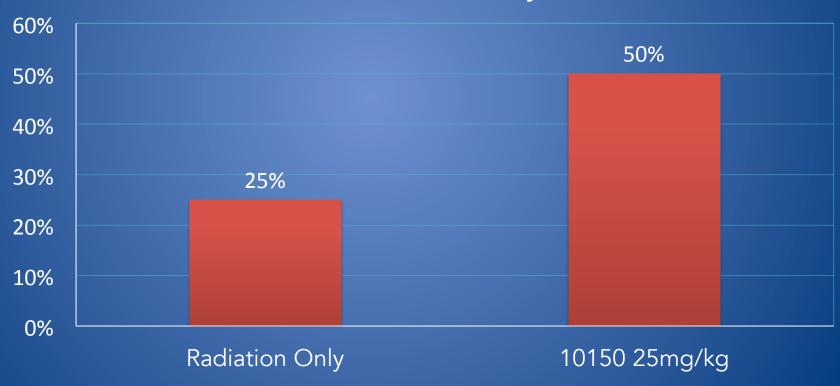
- In animal models treatment with AEOL10150 after irradiation:
- Decreased oxidative stress
 - Reduced 8-OHdG staining
 - Reduced Nox4
- Decreased PTEN signaling
 - Increased Akt signaling
 - Reduction in p53 and Bax
- Decreased number of apoptotic cells
 - TUNEL staining
- Decreased TGF-b1
- Reduction of oxidative stress in initial period after radiation exposure may play a role in preventing the cell death observed in delayed effects



Reduces overexpression of p53

10150 Survival Advantage Monkey LD 75 – 10.74Gy

Survival at 180 days



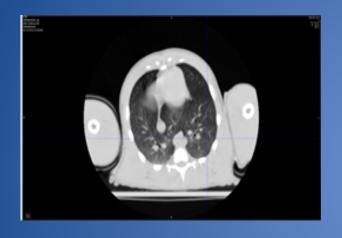
Secondary Endpoints Monkey LD75 – 10.74 Gy

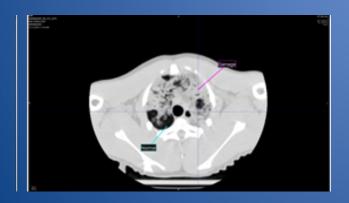
- Reduction in pneumonitis and fibrosis
 - In-life CT scan
 - Histology post-mortem
- Improved clinical measures of lung function
 - Increased p02 levels
 - Lowered breathing rates
- Treated animals showed no evidence of molecular biomarkers for lung injury

CT Scans – Monkey LD75

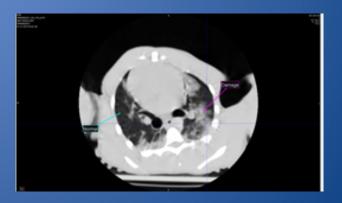
Control Lung – 10.74 Gy

AEOL10150 Treated Lung – 10.74 Gy









Claire L Carter, Ph.D.; Maureen A. Kane, Ph.D.; Thomas MacVittie, Ph.D.; Ann Farese, M.S.; et al.

Histology – Monkey LD75

Control Lung – 10.74 Gy



Gross anatomy shows clear signs of hemorrhage; dark focal nodules

AEOL10150 Treated Lung – 10.74 Gy



Gross anatomy shows areas of slight discoloration

Emergency Use Authorization

- Allows use prior to FDA approval in declared emergency
- BARDA has made majority of procurements after pre-EUA application

	AEOL 10150
1. life threatening disease	✓
2. no adequate alternatives	✓
3. safety data in humans	
4. manufacturing capacity	✓
5. demonstrated efficacy	✓

AEOL 10150 Human Clinical Data

- Phase 1 Chronic (7 day) Dosing Study in ALS Patients Completed with No Severe or Clinical Adverse Events
 - Six patients per dose: 4 drug/2 placebo
 - Three doses: 40 mg bid (80 mg total per day), 60 mg bid (120 mg total per day), 2mg per kg (body weight) continuous infusion pump
- Phase 1 Single Dose Escalating Study in ALS Patients Completed with No Severe or Clinical Adverse Events
 - One dose per patient, 28 patients received drug
 - Doses escalated: 3 mg, 12 mg, 30 mg, 45 mg, 45 mg, 60 mg & 75 mg
- Physician-Sponsored Long Term Safety Study in ALS Patient at UCLA
 - One patient received drug for 28 days
 - 75 mg bid, subcutaneous injections
 - No serious adverse events

BARDA Procurement

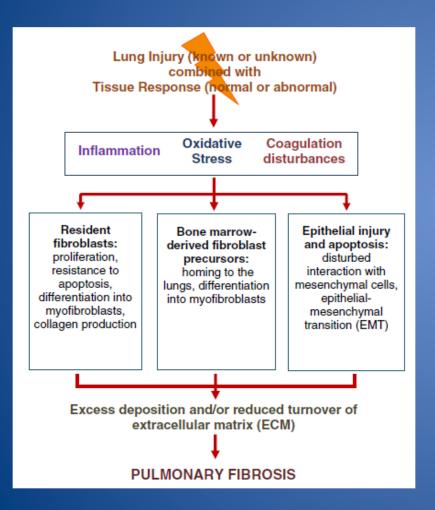
- pre-EUA filing after completion of Phase 1 study
- BARDA would issue RFP for Lung-ARS after pre-EUA filing
 - 10150 only compound in advanced development for Lung-ARS
 - 10150 only compound to have demonstrated efficacy when administered after exposure to radiation.
- USG total requirement estimated at 100,000 to 300,000 courses of treatment based on RFP for G-CSF to treat H-ARS.
- Funding for procurement comes from Special Reserve Fund
 - Managed by BARDA
 - Successor to Project BioShield
- Projected pricing for full course of treatment for 10150 \$3,000

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Manufacturing

- BARDA Contract funds all CMC work necessary for New Drug Application for for Lung-ARS and commercial applications
- Johnson-Matthey Pharma Services is manufacturing partner
 - Reduced cost of producing 10150 by >85%
 - New formulation work generated new patent for 10150
 - Completion of large-scale GMP production by 2017
- Pilot scale batches have been manufactured with stability out to 3 years

Commercial Development Idiopathic Pulmonary Fibrosis



- IPF is a chronic, progressive fibrosing interstitial pneumonia of unknown cause.
- Median survival after diagnosis is 3 to 4 years.
- Pathologically characterized by accumulations of extracellular matrix (ECM) and remodeling of the lung architecture resulting in a scarring fibrosis.
- Alteration to the lung is due to three mechanisms, inflammation, oxidative stress and coagulation disturbances

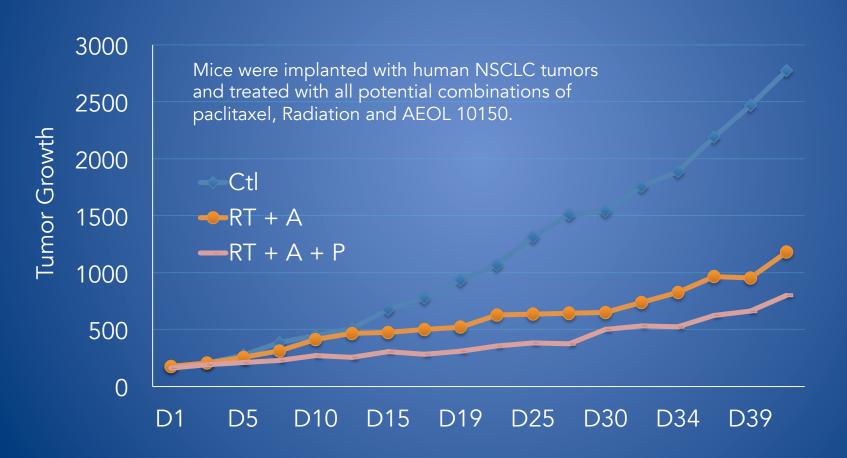
Commercial Development Idiopathic Pulmonary Fibrosis

- Animal models for Lung-ARS are also excellent models for lung fibrosis
- Consistent data from both mouse and monkey radiation studies showing anti-fibrotic effect
 - Efficacy also demonstrated in bleomycin rodent studies
- FDA granted Orphan Drug designation for use in IPF in early 2015
- Scientific Advisory Board with experience in successful drug development in IPF (Esbriet) to be announced in October
- Pre-IND meeting and IND filing expected in 2016 phase 1 clinical study to follow

Commercial Development Radiation Therapy

- 10150 did not interfere with lung tumor kill when administered with radiation and/or chemo
 - Data in multiple pre-clinical studies at FDA request
- Two potential development pathways
 - Reduction in side effects from radiotherapy
 - Increased tumor control as a third agent with chemo

Commercial Development Radiation Therapy



Pipeline

- AEOL 11114 Parkinson's Disease
 - Developed with Michael J. Fox Foundation
 - IND-enabling work underway
 - Explore partnering opportunities
- AEOL 20415 Infectious Disease
 - Novel approach to anti-microbial therapy
 - IND-enabling work underway
 - Biodefense applications

Financial Information

Balance Sheet at 6/30/2016		
Cash	\$3.8MM	
Debt	<u>-</u>	
Capitalization		
Common Shares Outstanding	152.1MM	
Warrants	53.1MM	
Options	12.7MM	
Series C Preferred Shares	20.5MM	
Fully Diluted Shares	238.4MM	

MILESTONES

- File IND for IPF H2 2016
- File IND for Radiation Oncology H2 2016
- Additional Option Exercise from BARDA H2 2016
- Initiate IPF Study H2 2016

MILESTONES

- Initiate Radiation Oncology Study H2 2016
- File Pre-EUA Application H1 2017
- File IND for Parkinson's Disease H1 2017
- File IND for Infectious Disease H2 2017
- Potential RFP from US Government for 10150 mid-2017