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Key Messages



- Developed a clear Vision and Strategy to be leader in personalised predictive genomics.
- Our journey from R&D → Commercialisation and the pathway to profitability
- Identified the Drivers of Revenue and Pathway to Profitability by the middle of FY25
- Strong momentum in commercial operations with +29% growth in customer receipts
- We have a global operation, a comprehensive human and animal health portfolio
- Engaged with leading global collaborations
- Begun our journey with a strong commitment to ESG principals
- Have a well-defined strategic plan to execute on a multi brand strategy in key regions

VISION



World leader in personalised predictive genomics Empowering individuals to take control of their health

UNIQUE VALUE PROPOSITION

Turning cutting-edge science into personalised, predictive tests driven by AI & machine learning techniques

Backed by over 20 years of experience, our scientific and clinical teams are translating genetics and clinical information into absolute risk tests that predict risk of chronic diseases before onset

Empowering physicians to improve health outcomes for people around the world enabling a new era of personalised medicine.



World leading portfolio

Most comprehensive guideline driven portfolio for human and animal health.

- Patented GeneType Multi Risk Test
- Non-Invasive Prenatal Testing (NIPT)
- Carrier screen testing
- Pharmacogenomics
- Oncogenetic & Monogenic diseases
- Pet care

Revenues anchored by our 3 brands to seize a multi Billion-dollar opportunity.



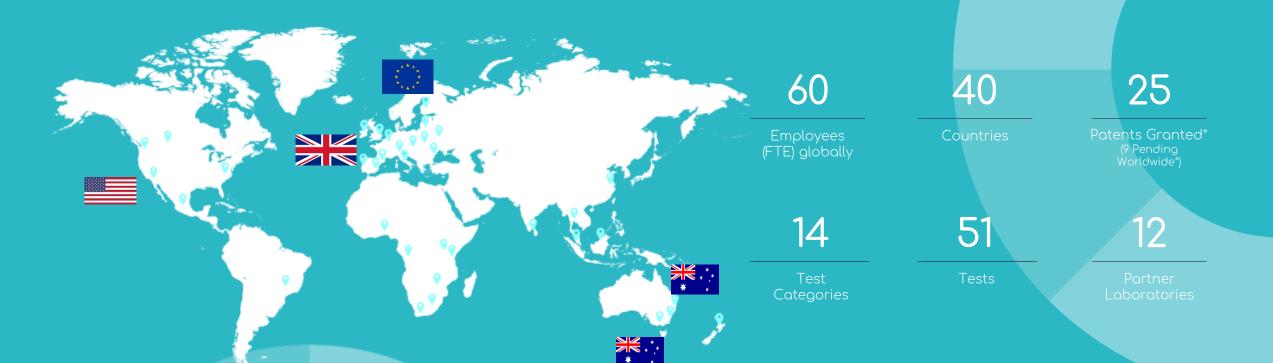






Global Overview







Collaborations

Professor Bernard Rosner



Brigham & Women's
Hospital and Harvard
Medical School, Boston,
Massachusetts, USA –
Principal Investigator of
the Nurses' Health Study
(International expert in
Biostatistics and breast
cancer epidemiology).

Collaborating on a project to improve the GeneType Breast Cancer Test and to Cross-validate the Ovarian cancer test in the Nurses Health Study

Professor Graham Colditz

Washington University in St. Louis
Institute for Public Health

Deputy Director, Institute for Public Health. Washington University School of Medicine, St. Louis, Missouri (International expert in Biostatistics and breast cancer epidemiology).

Collaborating on a project to validate the GeneType for Breast Cancer Test in African American patients

Professor John Hopper



Professorial Fellow at the Centre for Epidemiology and Biostatistics in the School of Population Global Health, Melbourne University

Collaborating on a project to improve the Genetype for Breast Cancer Test and on a joint project with Prof Emery to develop clinical utility evidence for the GeneType tests

Professor Jon Emery



Professor of Primary Care Cancer Research at the University of Melbourne, and the Victorian Comprehensive Cancer Centre

Collaborating on a joint project with Prof Hopper to develop clinical utility evidence for the GeneType tests

Memorial Sloane Kettering Cancer



Collaborating on a project to investigate modification of risk in BRCA-positive patients by polygenic risk scores

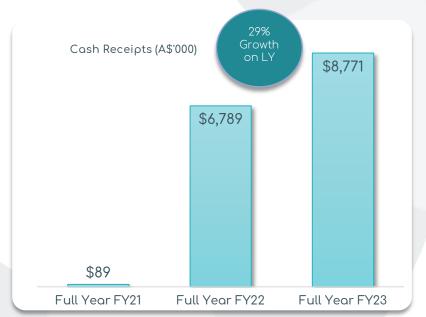
Ohio State University



Collaborating on a project to investigate modification of risk in BRCA-positive patients by polygenic risk scores



Delivering Revenue and Growth





cash balance A\$7.9m*

GROSS MARGIN

A\$4.2m

gross margin
47%

Strategic & Operational Highlights:

- Group receipts from customers A\$8.8m to 30 June 2023, up 29%.
- June Quarter FY23 receipts were A\$2.1 million.
- GeneType test growth +250% growth in commercial samples
- 20 Medical practices in the U.S. and Australia now repeatedly referring samples for geneType testing growing weekly
- Launched a National Television campaign in the U.S. for Genetype
- Presented at The American Society of Clinic Oncologists (ASCO) in Chicago
- Attended the Biotechnology Innovation Organisation (BIO) conference in Boston
- Publications validating the use of geneType; identifying those at elevated risk
 - Melanoma, Pancreatic and Prostate Cancer



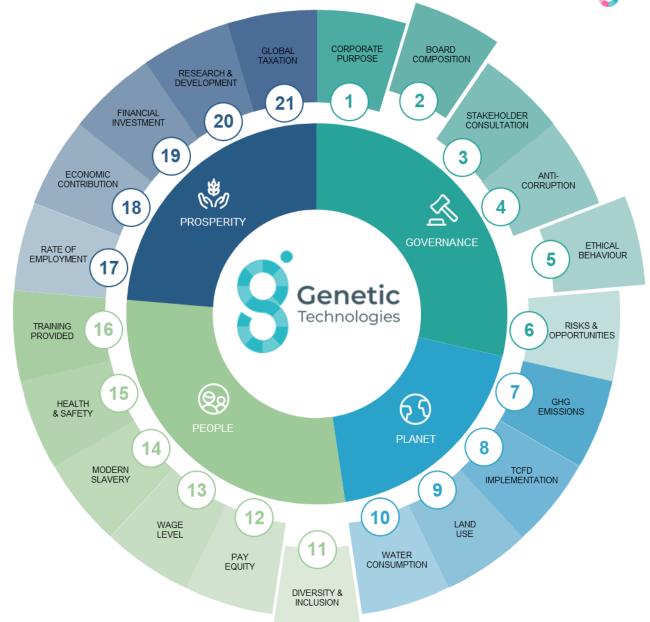
ESG UPDATE Q4 2023

Highlights Q4:

- Board and Executive teams clearly defined our vision and purpose
- Introduced updated Maternity Leave Policy exceeding mandatory level, addressing Pay Equity
- Conducted Cybersecurity Training, addressing Risks and Opportunities

Focus areas for Q1FY24

- Board Composition
- Ethical Behaviour (policy review)
 - Code of conduct
 - Whistle Blower
 - Antibribery
- Diversity & Inclusion
 - Culture and Engagement Survey



SOCIALSUITE



Snapshot and Achievements last 12 months

GeneType & Commercialisation

- ✓ FY23 Group Receipts A\$8.8 million, up 29%
- ✓ GeneType risk test: +250% in commercial samples received in June quarter
- √ 9 Tests NOW commercially available in the US the geneType Multi-Risk test
- √ >100 medical practices on-boarded launching the foundation of geneType Hubs
- ✓ Launched U.S TV campaign

Partnerships and Conferences Clinical Validi

- ✓ Partnerships with Australian Breast Care Centre and Dr Nicole Yap
- Screening for breast cancer risk with Prof Bruce Mann at Royal Women's Hospital in Melbourne
- ✓ The American Society of Clinic Oncologists (ASCO) in Chicago
- ✓ Biotechnology Innovation Organisation (BIO) conference in Boston
- ✓ International Congress of Genomics (ICG)

EasyDNA & Affinity DNA

- ✓ Integrated 2 Acquisitions
- ✓ NEW EasyDNA Website ready for launch
- ✓ NEW eCommerce Platform ready to launch
- ✓ Launch Carrier Testing and Non-Invasive Prenatal Tests (NIPT) into Europe
- ✓ Launch DNA storage solution in GTG NATA approved facility

Clinical Validity and IP Strategy

- ✓ 6 Peer reviewed publication in 7 months
- ✓ Submitted geneType risk test to NCCN Guidelines
- ✓ Publications:
 - ✓ PLOS ONE
 - ✓ Journal or Precision Medicine
 - ✓ European Journal of Cancer prevention
 - ✓ Journal Breast Cancer Research and Treatment
- √ 25 Patents granted or pending

Reimbursement activation

- ✓ Independently developed Budget Impact Model (BIM) identifies US\$1.4 billion dollars in annual saving by ALVA 10
- ✓ Active payer and distribution conversations
- ✓ Progress on US Payer meetings to enable coverage across millions of lives

Laboratory Capability

- ✓ Gained NATA and CMS-CLIA accreditation and certification for 6 polygenic risk score tests
- ✓ Successful ARTG notification to TGA for company IVDs for all tests on the multi-risk test



Pathways to Market

Executing a multi-brand strategy

Medical & Payer Business to Business (B2B)





Oncology – GTG Cardiovascular Prenatal NIPT Carrier testing Clinical & Molecular Metabolic

Consumer initiated testing (CIT)

with medical supervision





Expanded Carrier testing & NIPT Oncology – MultiTest Cardiovascular – MultiTest Metabolic – MultiTest COVID Risk Test Pharmacogenomics

Direct to Consumer Testing (DTC)

with no medical supervision







Ancestry
Paternity
Health & Wellbeing
Pharmacogenetics

Animal Drug testing Relationship DNA Storage



Our Innovation – Multi-Risk Test

GeneType can identify patients 'at risk' before onset and aid in the early detection and treatment.

GeneType Risk assessment test for breast cancer has demonstrated improved early stage detection by 18% and saving approx. US\$1.4B per annum⁴ for the US payer

Diseases Areas

Oncology

Breast Cancer Colorectal Cancer Prostate Cancer Melanoma Pancreatic Cancer Ovarian Cancer Cardiovascular

Atrial Fibrillation Coronary Artery Disease

Metabolic Type 2 Diabetes

Phase 2 Launch ³

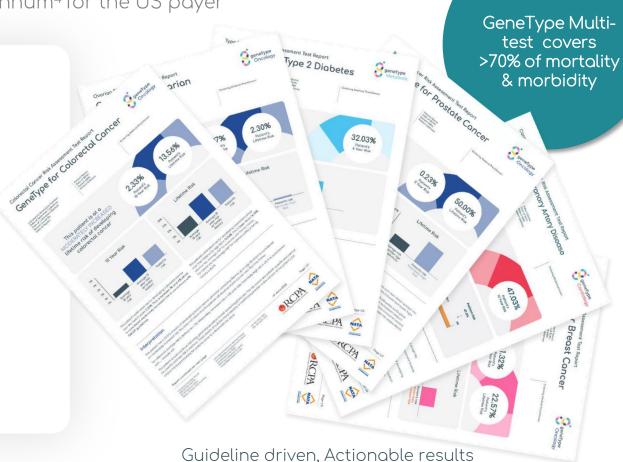




Commercial availability

3. Commercial availability in the US and upon regulatory approval for AUS

4. Budget Impact Model prepared by Alva10





NEW Comprehensive Breast and Ovarian Cancer test

Evaluates a woman's risk of developing Breast and/or Ovarian Cancer in women 30 years+

5% - Hereditary Cancer with known pathogenic variant BRCA1/2



10% - Familial cancer with no known pathogenic variant



85% - GeneType Patented integrated Breast and Ovarian Risk test





- The test evaluates a women's risk of developing Breast and/or Ovarian Cancer either from a hereditary genetic mutation or from the far more common familial or sporadic cancer.
- GTG's unique approach "appends" the detection of the 13 major "actionable" Breast and Ovarian cancer susceptibility genes to the GeneType test platform.
- Advances the goal of providing population-based genetic screening where up to 85% of cancers diagnosed do not have hereditary or family history





DTC - Growth strategy for EasyDNA

PHASE 1 Brand Re-Ignition



Brand Refresh

Multi-brand Portfolio

EasyDNA Brand Refresh

Test Rationalization





Website Refresh

Website Development

First-party data collection

Targeted Messaging

Improve User experience and engagement

PHASE 2 Revenue and Growth Focus



Improved Lead Gen

Google Ads Facebook Ads

Content & Email Marketing

Influencer Marketing & Testimonials



New Sales Channels

Amazon store front

Target B2B customer segments

New Markets





Our Journey from Extensive R&D to Revenue and Profitability



Pioneers in Genomics, participating in the very 1st International Human Genome.

Investing more than 20 years in extensive R&D and

Launched Patented
Genetype Multi Risk Test
covering 9 diseases and up
to 70 annual Mortalities and
Morbidities

Acquired EasyDNA Global
Direct to consumer
genomics

Acquired Affinity DNA Global Direct to consumer genomics

Developed commercial Pathways for the whole portfolio

Delivering revenues of AUD \$6.8m year ending June 30 2022

Developing Building our the US and Australian B2B markets for GeneType

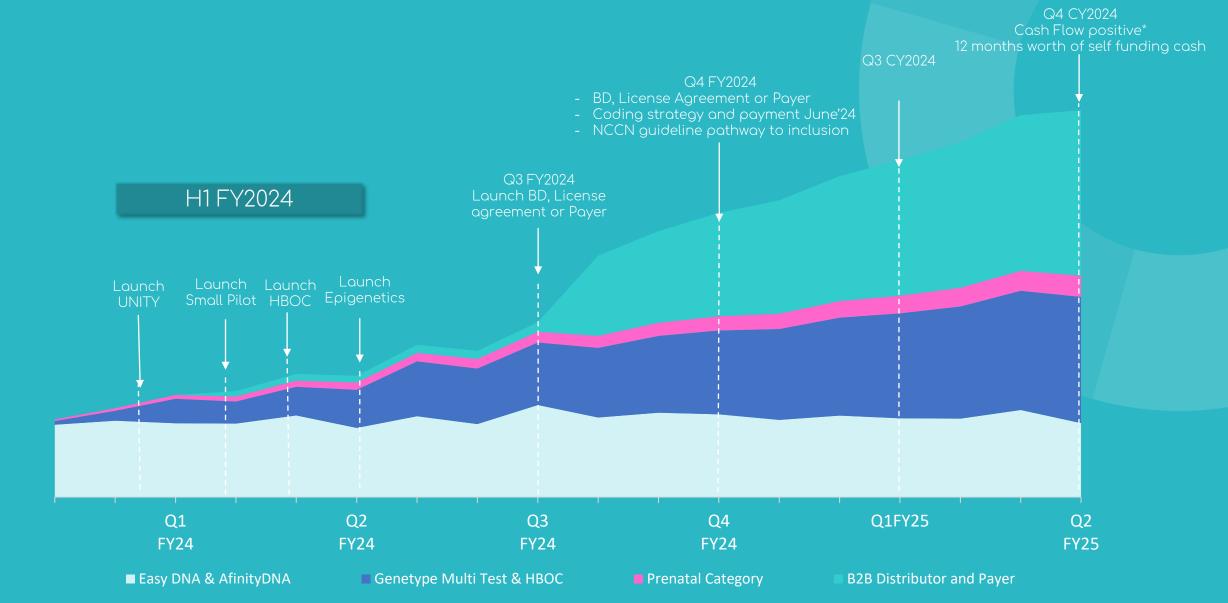
Delivering revenues of AUD \$8.9m* year ending June 30 2023

Our Pathway to profitability Executing on our 5 strategic Pillars

People and Culture Whole of Life Portfolio Engaging our Stakeholders Sales and Marketing Excellence Systems and Processes

Revenue Drivers and our Pathway to Profitability







Summary

- Developed a clear Vision and Strategy to be leader in personalised predictive genomics
- Identified the Drivers of Revenue and pathway to profitability by the middle of FY25
- Strong momentum in commercial operations with +29% growth in customer receipts
- We have a global operation, a comprehensive human and animal health portfolio
- Engaged with leading global collaborations
- Begun a journey with a strong commitment to ESG principals
- Have a well-defined strategic plan to execute on a multi brand strategy in key regions



Thank you

Investor Relations
Adrian Mulcahy
Market Eye – Automic Group
M: +61 438 630 422
E: adrian.mulcahy@automicgroup.com.au



www.linkedin.com/company/genetype-limited

www.genetype.com

Appendices



Board and Management: Sales and Scientific expertise leading GTG



Mr. Peter Rubinstein
BEc, LLB
Chairman
Non – Executive Director



Dr. Lindsay WakefieldMBBS
Non – Executive Director



Mr Nick Burrows
B.Comm, FAICD, FCA,
FGIA, FTIA, F Fin
Non – Executive Director



Simon Morriss
GAICD
Chief Executive Officer



Dr. Jerzy "George"

Muchnicki

MBBS

Non-Executive Director



Erika Spaeth
PhD
Director of Clinical &
Scientific Affairs



Richard Allman BSc, PhD Scientific Advisor



Tony Di Pietro
B. Comm, CA, AGIA, MAICD
CFO & Company Secretary



Carl Stubbings Chief Commercial Officer



Strong Scientific Leadership: Advisory Board



Professor Jon Emery

MBBCh MA DPhil FRACGP MRCGP Research & Education Lead, Primary Care Integration, Victorian Comprehensive Cancer Centre Herman Chair of Primary Care Cancer Research, University of Melbourne



Professor Finlay Macrae AO

MBBS, MD, FRACP, FRCP, AGAF MWGO is Principal Fellow and Professor, Department of Medicine, University of Melbourne, and Head of Colorectal Medicine and Genetics, The Royal Melbourne Hospital



Ora K. Gordon, M.D.

MD, MS, FACMG
Regional Medical Director,
Center for Clinical Genetics &
Genomics. Clinical Director, PSJH
Population Health Genomics
Program. Chair, Integrated
Network Cancer Program,
Professor of Genetics, St John
Cancer Institute



A.Prof Ron Dick

MBBS, FRACP, FCSANZ, Chairman of Cardiovascular Institute at Epworth Healthcare, an Honorary Cardiologist at the Alfred Hospital and Bendigo Healthcare Group.

Completed his MBBS in 1979 and became a Fellow of the Australian College of Physicians in 1986. His interventional cardiology fellowship was from the University of Michigan Medical Centre USA.



Financial Overview

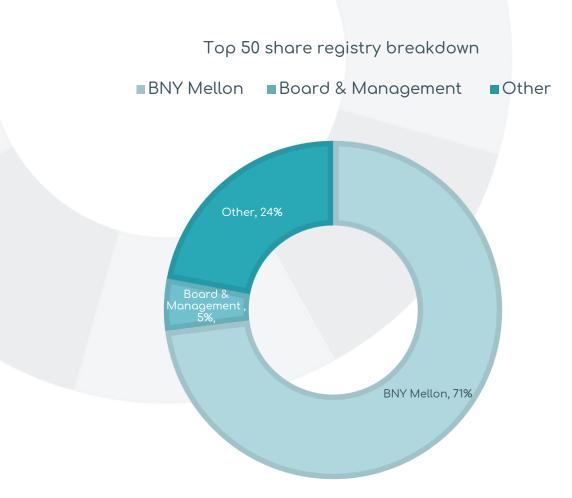
- Net cash outflow of A\$9.9 million for the 12 months to 30 June 2023. We continue to grow EasyDNA and Affinity DNA brand sales and develop and commercialise our geneType tests
- Cash reserves will be directed:
 - to support the commercialisation of the GeneType Multi Risk test through the B2B channels with payers, insurers and employers in the United States and expand into Europe;
 - to drive new market opportunities in reimbursable categories by leveraging our strategic relationship with QIAGEN;
 - for funding product research and development;
 - to increase our sales and marketing presences and drive of its tests via the consumer-initiated testing platforms;
 - to execute the go to market, sales and marketing to launch the Comprehensive Hereditary Breast and Ovarian Cancer Risk Test as part of our germline genetic testing division; and
 - for other working capital and general corporate purposes.

| A\$'000 | 30-June-23 | 30-June-22 | Change |
|-------------------------|------------|------------|--------|
| Net operating cashflow | (9,934) | (5,955) | 67% |
| Receipts from customers | 8,771 | 6,789 | 29% |
| Cash | 7,853 | 11,733 | -33% |
| | | | |

¹ Based on cashflow projections



Corporate Overview



| Dual Listed on the ASX and Nasdaq | |
|---------------------------------------|--------------|
| Financial Information | |
| Share price (AUD) as at 4 August 2023 | 0.2 c |
| ADR price (USD) as at 4 August 2023 | \$0.79 |
| Ord Shares on Issue (M) | 11,542 |
| ASX 52-week trading (AUD low/high) | 0.2/1.3c |
| Nasdaq 52-week trading (USD low/high) | 0.77/2.40 |
| Market Cap (A\$M/US\$M) | 28.9/19.1 |
| Cash at 30 June 2023 | A\$7.9m |
| Cash at 30 June 2022 | A\$11.7m |
| Debt (30 June 2022 and 30 June 2023) | nil |
| | |



Our Intellectual Property

4 Patents granted in the US

- Patent No: US 11,257,569, Methods of assessing risk of developing a severe response to Coronavirus infection
- Patent No: US 11,072,830, Methods for breast cancer risk assessment
- Patent No: US 10,683,549, Methods for assessing risk of developing breast cancer
- Patent No: US 10,920,279, Methods for assessing risk of developing breast cancer

2 Patents granted in PRC (China & HK)

- Patent No. 201080033130.5 Methods for Breast Cancer Risk Assessment
- Patent No. 201580063966.2 Methods for assessing risk of developing breast cancer

9 Patent families pending

- Breast concer risk assessment
- Methods for assessing risk of developing prostate cancer
- Methods for assessing risk of developing ovarian cancer
- Methods of assessing risk of developing a severe response to Coronavirus infection
- Methods of assessing risk of developing a disease
- Methods for assessing risk of developing breast cancer
- Improved methods for assessing risk of developing breast cancer
- Methods of assessing risk of developing breast cancer
- Methods for assessing risk of developing colorectal cancer



Defined Terms

Common Complex Diseases (CCP) – A complex disease is caused by the interaction of multiple genes and environmental factors. Complex diseases are also called multifactorial. Examples of common complex diseases include cancer and heart disease.

Polygenic risk score - a number associated with one's disease risk based on the aggregated effects of individual risk variants through a multiplicative algorithm.

Variant - Single Nucleotide polymorphism (SNP), an alteration in DNA that may be a common or rare event.

Genomic - pertaining to function of genetics from structure to relationship between genetic events.

Genetic - pertaining to a gene.

GWAS - genome-wide association studies are large population level studies which enable scientists to identify genes and genetic markers involved in human disease. This method searches the genome for SNPs that occur more frequently in people with a particular disease than in people without the disease. Each study can look at hundreds or many thousands of SNPs at the same time. Researchers use data from this type of study to pinpoint genetic variations that may contribute to a person's risk of developing a certain disease.

SNP - Single nucleotide polymorphisms, frequently called SNPs (pronounced "snips"), are the most common type of genetic variation among people. Each SNP represents a difference in a single DNA building block, called a nucleotide. For example, a SNP may replace the nucleotide cytosine (C) with the nucleotide thymine (T) in a certain stretch of DNA.

Serious Disease Risk (SDR) - Risk associated with acquiring COVID-19 and requiring hospitalisation withs its associated morbidities and mortalities.

Germline Testing – Germline testing is done on cells that do not have cancer. It is done to see if a person has a gene mutation that is known to increase the risk of developing cancers and other health problems. This test uses cells (such as blood or skin cells) that do not have any cancer cells. Germline mutations can sometimes be passed down from parents.

Clinical Laboratory Improvement Amendments (CLIA) - Regulates laboratory testing and require clinical laboratories to be certified by the Center for Medicare and Medicaid Services (CMS) before they can accept human samples for diagnostic testing

National Association of Testing Authorities (NATA) - the authority responsible for the accreditation of laboratories, inspection bodies, calibration services, producers of certified reference materials and proficiency testing scheme providers throughout Australia. It is also Australia's compliance monitoring authority for the OECD Principles of GLP. NATA provides independent assurance of technical competence through a proven network of best practice industry experts for customers who require confidence in the delivery of their products and services.

Next Generation Sequencing (NGS) – Next-generation sequencing (NGS), also known as high-throughput sequencing, is the catch-all term used to describe a number of different modern sequencing technologies. These technologies allow for sequencing of DNA and RNA much more quickly and cheaply than the previously used Sanger sequencing, and as such revolutionised the study of genomics and molecular biology.

Laboratory Developed Tests (LDT) – A type of in vitro diagnostic test that is designed, manufactured and used within a single laboratory.

Consumer Initiated Tests (CIT) - laboratory testing that is initiated by the consumer without a physician order but reviewed and communicated back to the consumer via a physician.

Direct to Consumer (DTC) – laboratory testing that is initiated by the consumer without a physician order. The results are reported back directly to the consumer.

Health Care Professionals (HCP) – physician, GP, or specialist authorized to receive the patient results