

## ARGENICA RECEIVES \$3.97M R&D TAX INCENTIVE CASH REBATE FOR FY25

**Perth, Australia; 17 MARCH 2026** – Argenica Therapeutics Limited (Argenica or Company) (ASX: AGN) is pleased to advise that it has received a cash rebate of \$3,974,973 from its R&D tax incentive claim for the financial year ending 30 June 2025. The Australian Federal Government's R&D Tax Incentive Program provides a cash refund on eligible research and development activities performed by Australian companies. The Company's R&D application includes overseas activities newly approved via the program's Overseas Advance Finding.

Including the R&D rebate, Argenica had a proforma cash balance of \$9.0m as at 31 December 2025. The Company remains well funded to continue to advance preparatory activities for a targeted Phase 2b AIS trial in consultation with its global stroke Clinical Advisory Group and potential pharmaceutical partners.

Dr Liz Dallimore, Argenica's Managing Director, commented "The R&D Tax Incentive Program is an important Federal Government program that strongly supports Australian innovation. These funds will be applied to further developing the Company's lead neuroprotective peptide candidate, ARG-007, a product of Australian research."

*This announcement has been approved for release by the Managing Director & Company Secretary.*

For more information please contact: [info@argenica.com.au](mailto:info@argenica.com.au)

### ABOUT ARGENICA

Argenica (ASX: AGN) is developing novel therapeutics to reduce brain tissue death after stroke and other types of brain injury and neurodegenerative diseases to improve patient outcomes. Our lead neuroprotective peptide candidate, ARG-007, has been successfully demonstrated to improve outcomes in pre-clinical stroke models, traumatic brain injury (TBI) and hypoxic ischaemic encephalopathy (HIE). The Company has completed a Phase 1 clinical trial in healthy human volunteers to assess the safety and tolerability of a single dose of ARG-007. Argenica has now initiated a Phase 2 clinical trial in acute ischaemic stroke patients, as well as continuing to generate preclinical data in other neurological conditions.