ASX ANNOUNCEMENT

Benitec Biopharma Presents at Biotech Showcase™ Conference in San Francisco

Sydney, Australia - 12 January, 2016 - Benitec Biopharma Limited (ASX: BLT; NASDAQ: BNTC; NASDAQ: BNTCW), a clinical-stage biotechnology company developing innovative therapeutics based on its gene silencing technology, DNA-directed RNA interference (ddRNAi), is pleased to announce that Chief Business Officer, Carl Stubbings will provide a corporate update at the Biotech Showcase™ Conference held in San Francisco this week. Mr Stubbings’s presentation will occur at 2.30pm Pacific Time on Tuesday, 12 January, 2016 at the Parc 55 San Francisco Hotel.

A copy of the presentation is included in this announcement.

The Biotech Showcase Conference coincides with the J.P. Morgan Healthcare Conference held between 11 – 14 January, 2016 in San Francisco.

For further information regarding Benitec and its activities, please contact the persons below, or visit the Benitec website at www.benitec.com

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About Benitec Biopharma Limited:
Benitec Biopharma Limited (ASX: BLT; NASDAQ: BNTC; NASDAQ: BNTCW) is a clinical-stage biotechnology company developing innovative therapeutics based on its patented gene-silencing technology called ddRNAi or 'expressed RNAi'. Based in Sydney, Australia with labs in Hayward, CA (USA) and collaborators and licensees around the world, the company is developing ddRNAi-based therapeutics for chronic and life-threatening human conditions including hepatitis C and B, wet age-related macular degeneration and OPMD. Benitec has also licensed ddRNAi to other biopharmaceutical companies for applications including HIV/AIDS, Huntington's Disease, chronic neuropathic pain and retinitis pigmentosa.

Safe Harbor Statement:
This press release contains "forward-looking statements" within the meaning of section 27A of the US Securities Act of 1933 and section 21E of the US Securities Exchange Act of 1934. Benitec has tried to identify such forward-looking statements by use of such words as "expects," "intends," "hopes," "anticipates," "believes," "could," "may," "evidences" and "estimates," and other similar expressions, but these words are not the exclusive means of identifying such statements. Such statements include, but are not limited to, any statements relating to Benitec's pipeline of ddRNAi-based therapeutics, including the initiation, progress and outcomes of clinical trials and any other statements that are not historical facts. Such forward-looking statements involve risks and uncertainties, including, but not limited to, risks and uncertainties relating to the difficulties or delays in our plans to develop and potentially commercialize our product candidates, the timing of the initiation and completion of preclinical and clinical trials, the timing of patient enrolment and dosing in clinical trials, the timing of expected regulatory filings, the clinical utility and potential attributes and benefits of ddRNAi and our product candidates, potential future out-licenses and collaborations, our intellectual property position and duration of our patent portfolio, the ability to procure additional sources of financing and other risks detailed from time to time in filings that Benitec makes with US Securities and Exchange Commission, including our most recent annual report on Form 20-F and our reports on Form 6-K. Such statements are based on management’s current expectations, but actual results may differ materially due to various factors, including those risks and uncertainties mentioned or referred to in this press release. Accordingly, you should not rely on those forward-looking statements as a prediction of actual future results.
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Benitec Biopharma (ASX:BLT; NASDAQ:BNTC) is a clinical-stage, biotechnology company developing therapeutics based on its patented gene-silencing platform technology called DNA Directed RNA Interference (ddRNAi)

Benitec’s unique therapies target specific genes that cause genetic disorders including:

• Wet Age-related Macular Degeneration (AMD)
• Oculopharyngeal Muscular Dystrophy (OPMD)
• Infectious diseases including hepatitis C and B

**Benitec’s technology can be applied to nearly any disease with a well defined genetic basis**
Company Overview

**NOVEL GENE SILENCING PLATFORM**
ddRNAi combines RNAi with gene therapy delivery to potentially provide “one shot” treatments and cures for a variety of diseases.

**BROAD PIPELINE**
Programs in indications with high unmet clinical need or large patient populations such as hepatitis B and C, OPMD and AMD.

**COMMERCIAL STRATEGY**
Three-pronged approach – commercialize, out-license, partner.

**STRONG INTELLECTUAL PROPERTY POSITION**
Portfolio of patents, patent applications, and rights to intellectual property directed to our ddRNAi platform and each product candidate.
## Company Financial Snapshot

<table>
<thead>
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<th>Key Financial Details</th>
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ddRNAi Technology:
A long-lasting method for turning off disease-associated genes
ddRNAi Technology – One Shot Cure

- DNA construct is delivered by gene therapy vectors which provide months or years of expression from one administration

- Uses cells own transcriptional machinery to continuously produce short hairpin RNAs (shRNAs) in nucleus which are processed by the cell into siRNAs

- siRNAs are incorporated into the RISC complex which silence the target gene
## Pipeline Programs

<table>
<thead>
<tr>
<th>Focus</th>
<th>Indication</th>
<th>Product Candidate</th>
<th>Preclinical</th>
<th>Phase I/IIa</th>
<th>Phase IIb/III</th>
<th>Anticipated Milestones</th>
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<tr>
<td><strong>Infectious Disease</strong></td>
<td>Hepatitis C</td>
<td>TT-034</td>
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<td></td>
<td></td>
<td>Completion of Phase I/IIa trial Q4 2016 Initiation of Phase IIb/III trial Q2 2017</td>
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<td></td>
<td>Hepatitis B</td>
<td>Hepbarna®</td>
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<td></td>
<td>Completion of <em>in vivo</em> PoC study Q2 2016 IND filing Q1 2017 Initiation of Phase I/IIa trial Q2 2017</td>
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<td><strong>Ocular Disease</strong></td>
<td>AMD</td>
<td>TT-211</td>
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<td>OPMD</td>
<td>Pabparna™</td>
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<td>Completion of pre-clinical PoC study Q3 2016</td>
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<td>Focus</td>
<td>Indication</td>
<td>Product Candidate</td>
<td>Company</td>
<td>Discovery</td>
<td>Preclinical</td>
<td>Phase I/IIa</td>
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<tr>
<td>Infectious Disease</td>
<td>HIV/AIDS</td>
<td>Cal-1</td>
<td>Calimmune</td>
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<td>Cancer</td>
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<td>dCellVax</td>
<td>Regen Biopharma</td>
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<td>Ocular Disease</td>
<td>Retinitis Pigmentosa</td>
<td>RhoNova</td>
<td>Genable</td>
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<td>Genetic Disease</td>
<td>Huntington’s Disease</td>
<td>uniQure</td>
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<td>Central Nervous System</td>
<td>Intractable Neuropathic Pain</td>
<td>Circuit Therapeutics</td>
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## Investment Opportunity

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<thead>
<tr>
<th>Company</th>
<th>Technology</th>
<th>Stage</th>
<th>Market Cap¹</th>
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<tr>
<td>Alnylam</td>
<td>siRNA</td>
<td>Phase III</td>
<td>$8B</td>
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<td>Ionis (previously Isis)</td>
<td>Antisense</td>
<td>Marketed</td>
<td>$7B</td>
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<tr>
<td>Arrowhead</td>
<td>siRNA</td>
<td>Phase II</td>
<td>$350M</td>
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<td>Dicerna</td>
<td>siRNA</td>
<td>Phase I</td>
<td>$223M</td>
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<tr>
<td>Silence</td>
<td>siRNA</td>
<td>Phase II</td>
<td>$210M</td>
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<tr>
<td>Benitec</td>
<td>ddRNAi</td>
<td>Phase I/IIa</td>
<td>$29M²</td>
</tr>
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1. As of January, 2016  
2. Converted into US$
Pipeline Programs
ddRNAi-based Therapeutic to Treat Hepatitis C: TT-034

- Three independently transcribed RNAi elements target three separate, well-conserved regions of the HCV genome; helps prevent the generation of viral escape mutants
- Delivered with AAV8 using intravenous infusion
- Goal is to achieve complete and sustained elimination of virus with a single infusion
TT-034: AAV Viral Vector for Delivery

- Non-integrating, non-pathogenic viral delivery system
- To date, AAV has been used in 117 clinical trials with excellent safety record
- Sustained expression (months/years) following single injection
- Complete transduction of liver hepatocytes with serotype 8 (AAV8)
AAV Provides Broad Hepatocyte Coverage and Durable Expression

<table>
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<tr>
<th>shRNA-6</th>
<th>60 days post dosing</th>
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<td>saline</td>
<td>1x10^11</td>
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<td>1x10^12</td>
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<td>1x10^13</td>
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<table>
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<th>shRNA-19</th>
<th>180 days post dosing</th>
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<tr>
<td>saline</td>
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<td>1x10^12</td>
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<td>1x10^13</td>
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<table>
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<tr>
<th>shRNA-22</th>
<th>180 days post dosing</th>
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<tbody>
<tr>
<td>saline</td>
<td>1x10^11</td>
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<tr>
<td>1x10^12</td>
<td></td>
</tr>
<tr>
<td>1x10^13</td>
<td></td>
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</tbody>
</table>

TT-033 treated | Saline Treated
Primary Endpoints (Safety):
- Incidence of adverse events
- Changes in clinical parameters

Secondary Endpoints (Efficacy):
- Sustained reduction in HCV viral load in the blood
- Assessment of TT-034 levels in day 21 liver biopsy
- Assessment of shRNA expression in liver biopsy

Trial sites
- Duke Clinical Research Unit, Durham, North Carolina
- University of California, San Diego, California
- Texas Liver Institute, San Antonio, Texas
- Methodist Health System Clinical Research Institute, Dallas, Texas
Hepatic Transduction and shRNA Expression Levels in TT-034 Treated Subjects

TT-034 DNA levels

Anti-HCV shRNA levels

Subject ID: 1007, 1030, 1040, 1045, 1048, 1051, 1053

Dose: 4e10 vg/kg, 1.25e11 vg/kg, 4e11 vg/kg

*Sample above LOD but outside range of std curve
Preliminary Data: TT-034

- No reported serious adverse events related to administration of the study drug
- Cohort two biopsies detected levels of TT-034 in the hepatocytes, the predominant cell type in the liver, yielding 0.48, 3.65 and 10.44 copies of TT-034 DNA per cell
- The first subject administered with the third dose (4.00E11 vg/kg) had 17.74 copies of TT-034 per cell, indicating that a significant portion of their hepatocytes may have been transduced
- At higher doses, substantial portions of hepatocytes are transduced and result in concurrent dose-dependent expression of anti-HCV shRNAs
- Completion of Phase I/IIa clinical trial Q4 2016
ddRNAi-based Therapeutic for Hepatitis B: Hepbarna®

- Swap of 3 anti-HBV shRNA into anti-HCV shRNA positions
- May be able to fast track REG/TOX studies using TT-034 data as part of IND package
- TT-034 clinical data guides HBV Protocol development and simplifies regulatory path
- Goal is to achieve complete and sustained elimination of virus with a single infusion
Potential One Shot Cure for Hepatitis B

- Hepatitis B is a small DNA virus with an unmet medical need
- 240 million infected worldwide, resulting in up to 780,000 deaths per year
- Hepatitis B virus causes 60-80% of the world’s primary liver cancers
- Existing therapies have low cure rates, require frequent dosing and usually life long treatment duration
Preliminary Preclinical Hepbarna® Data

- The data demonstrates that Hepbarna® can effectively suppress multiple aspects of the hepatitis B virus (HBV) in infected human liver cells
- Treatment with Hepbarna® resulted in a 90% reduction in the levels of hepatitis B surface antigen (HBsAg) and e-antigen (HBeAg), as compared to untreated controls or liver cells
- Hepbarna® treated cells showed at least an 85% reduction of intracellular hepatitis B DNA after 23 days
- The positive data strongly supports progression of Hepbarna® into further *in vivo* testing
- Completion of *in vivo* PoC study Q2 2016
Relative Positioning of Anti-HBV shRNA Produced from Hepbarna®

HBV proteins

HBV genome

HBV Transcripts

HBV circular genome (ayw 3182 nucleotides)

1787 Cap⁺
1820 Cap⁺
2812 Cap⁺
3196 Cap⁺
1352 Cap⁻

shRNA-4

shRNA-8

shRNA-9

preC, core
preS1, preS2, S
X
poly(A), nt 1919
PRE
poly(A), nt 1919

HBV Transcripts

PreCore RNA (precRNA)
Pregenomic RNA (pgRNA)
PreSurface RNA (preS1 RNA)
Surface RNA (preS2/S RNA)
X RNA

1923 3.5kb
1923 3.5kb
1923 2.3kb
1923 2.1kb
1923 0.7kb
Knockdown of HBV-Specific Parameters \textit{In Vitro}

- 90% drop extracellular HBsAg at day 11
- 90% drop extracellular HBeAg at day 11
- 85% drop intracellular HBV DNA at day 11
- 66% drop in cccDNA at day 11
TT-211 and TT-231: ddRNAi based Therapeutic for Age Related Macular Degeneration

- Designed to provide sustained inhibition of VEGF-A from a single intravitreal injection

- Two shots on goal:
  - TT-211 is being developed for wet AMD
  - TT-231 is being developed for wet and dry AMD

- TT-231 is a second generation product candidate designed to target three different genes, VEGF receptor 2, PDGF-β and human complement factor B, all of which play a role in progression of AMD

- Developing intravitreal delivery vector (AAV) in collaboration with 4D Molecular Therapeutics

- *In vivo* PoC study Q2 2016
**AMD: TT-211 and TT-231**

**Mechanism of Action**

**TT-211:**
A single hairpin ddRNAi construct targeting VEGF-A for treatment of wet AMD

**TT-231:**
Triple hairpin ddRNAi construct targeting VEGFR2, PDGF-β and Complement Factor B for treatment of wet and dry AMD

![Diagram showing the structure of TT-211 and TT-231 constructs](image_url)
Benitec has an exclusive license for RNAi applications from 4DMT

Vectors developed using a directed evolution screen

Intravitreal is more commercially viable than a subretinal injection (typically used by most gene therapy vectors for ocular diseases)

A single injection is anticipated to provide years of shRNA expression
Pabparna™: ddRNAi based for Therapeutic Oculopharyngeal Muscular Dystrophy

- Pabparna™ is a ddRNAi-based therapeutic for the treatment of OPMD, a rare genetic disease
- OPMD is an autosomal-dominant inherited, slow-progressing, late-onset degenerative muscle disorder
- Benitec utilizes a “silence and replace” approach designed to silence the expression of mutant PABPN1 gene and replace the mutant gene with the normal PABPN1
- Monotherapy delivered via intramuscular injection using an AAV vector
- Collaborating with Royal Holloway University of London
- Completion of preclinical PoC study Q3 2016
Genetic basis of OPMD: Expansion of the Poly-Alanine Tract Within PABPN1

**PABPN1:**

- An ubiquitous factor that promotes interaction between the poly(A) polymerase and CPSF (cleavage and polyadenylation specificity factor) and thus controls the length of mRNA poly(A) tails, mRNA export from the nucleus, and alternative poly(A) site usage

**In OPMD:**

- A genetic mutation results in trinucleotide repeat expansion within exon 1 of PABPN1 and results in an expanded poly-alanine tract at the N-terminal end of PABPN1

```
WT     ATG (GCG)₆  ---------(GCA)₃  GCG GGG GCT GCG...
MUT     ATG (GCG)₆  (GCG)₁₇  (GCA)₃  GCG GGG GCT GCG....
```
Clinical Features of OPMD

Characterised by:

- Eyelid drooping (ptosis)
- Swallowing difficulty (dysphagia)
- Proximal limb weakness
- Death due to aspiration pneumonia & malnutrition

Histopathology:

- Decrease of muscle fibre number
- Variation in the size of muscle fibres
- Infiltration (inflammatory cells)
- Fibrosis (connective tissue)

Raz et al., BMC Neurology 2013, 13:70
Pabparna™: A ‘Silence and Replace’ Approach Delivered by AAV

**ITR**

**A** PABPN1 shRNA-1

**B** PABPN1 shRNA-2

**C** PABPN1 shRNA-3

**D** Codon optimized wildtype PABPN1 (insensitive to PABPN1 shRNA cleavage)

**“Silence”**

**“Replace”**

Wildtype AAV
(4.7 Kb packaging capacity)

Recombinant AAV

* http://www.abedia.com/wiley/vectors.php
### Robust Global IP Portfolio

#### ddRNAi Technology
- International coverage for ddRNAi platform technology
- 30 Granted Patents (in-licensed)
- 9 patent applications (in-licensed)
- Expected expiration: 2019

#### Additional IP Portfolio
- Target indications, product candidates, technology improvements
- 32 Granted Patents (owned, co-owned or in-licensed)
- 29 Patent Applications (owned, co-owned or in-licensed)
- Expected expiration for target indications and product candidates at least 2025 and for technology improvements at least 2021
### Key Financial Details

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**Offices:**
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## Management Team

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<tr>
<th>Name</th>
<th>Title</th>
<th>Experience</th>
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| Greg West                | Chief Financial Officer and Interim CEO         | Former CFO, Immune Systems Therapeutics  
• Prior roles at PriceWaterhouse, Bankers Trust, Deutsche Bank and NZI       |
| Dr. David Suhy           | Chief Scientific Officer                        | Former SVP of Research & Development, Benitec Biopharma  
• Prior roles at Antara Biosciences and PPD Discovery                        |
| Carl Stubbings           | Chief Business Officer                          | Former VP of Sales & Marketing, Focus Diagnostics  
• Prior role at PanBio Pty Ltd                                               |
| Georgina Kilfoil         | Chief Clinical Officer                          | Former VP of Clinical Operations, Benitec Biopharma  
• Prior roles at Anthera Pharmaceuticals, InClin and Peninsula Pharmaceuticals |
| Dr. Michael Graham       | Head of Discovery and Founding Scientist        | Discoverer of ddRNAi at CSIRO; Former Senior Research Fellow, University of Queensland  
• Prior roles at Benitec, QDPI and CSIRO                                      |
| Sakura Holloway          | SVP, Corporate Development and IP Counsel       | Former Head of RNAi Commercialization, CSIRO  
• Prior roles at Cephalon Australia (Arana Therapeutics) and Garvan Institute, Sydney |
# Global Board of Directors

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
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<tr>
<td>Peter Francis</td>
<td>Chairman</td>
<td>Partner at Francis Abourizk Lightowlers Lawyers, Former Director, Xceed Capital</td>
</tr>
<tr>
<td>Kevin Buchi</td>
<td>Director</td>
<td>President and CEO, TetraLogic Pharmaceuticals, Director at Stemline Therapeutics, Inc., Forward Pharma A/S, Alexza Pharmaceuticals, Inc., and Epirus Biopharmaceuticals</td>
</tr>
<tr>
<td>Dr. John Chiplin</td>
<td>Director</td>
<td>Director at Cynata Pty, Former CEO at Polynoma, Arana Therapeutics, and ITI Life Science Fund; Former Director at Medistem, Inc.</td>
</tr>
<tr>
<td>Iain Ross</td>
<td>Director</td>
<td>Chairman at Biomer Technology Ltd., and Premier Veterinary Group, plc, Director at Amarantus Bioscience, Inc., Anatara Lifesciences, and Tissue Therapies Ltd</td>
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