# **Cardiol Therapeutics Inc.**

Canada, USA, Germany / Biotechnology Nasdaq, US; TSX, Canada; FSE, Germany Bloomberg: CRDL US ISIN: CA14161Y2006

Pipeline update & FY 2024 results

RATING	BUY
PRICE TARGET	USD 8.50
Return Potential	755.0%
Risk Rating	High

# **MAVERIC KICKS OFF, FINAL STRETCH TOWARD FDA APPROVAL IN RP**

Cardiol Therapeutics (Cardiol) announced that the first patient has been enrolled in the pivotal MAVERIC phase III study evaluating its oral drug candidate CardiolRx<sup>™</sup> for the treatment of recurrent pericarditis (RP), a painful and debilitating heart condition. This is good news as it marks the start of a pivotal phase III trial, an important milestone that brings CardiolRx<sup>™</sup> closer to potential FDA approval. The study, led by leading cardiovascular experts and initiated at Northwestern University, is a randomised, double-blind, placebo-controlled trial that will enrol 110 patients at 20 sites in the US, Canada and Europe. The drug addresses a clear unmet need in RP with a promising, non-immunosuppressive oral option. Backed by an orphan drug designation and strong phase II data in RP, we believe the programme has a good chance of success in the phase III trial, and we also see significant commercial potential in this indication. If successful, this study will support submission of a new drug application to the FDA. The next significant catalyst will be the headline results of the multi-national, randomised, placebo-controlled ARCHER phase II study in acute myocarditis (AM), which we expect within the next one to two months. We have updated our SOTP valuation model, which yields an unchanged price target of USD 8.50. We reiterate our Buy recommendation.

**First patient enrolled in the pivotal phase III trial called MAVERIC** Cardiol has enrolled the first patient in its pivotal phase III MAVERIC trial, evaluating its oral drug CardiolRx<sup>™</sup> indicated for RP in patients who are at risk of recurrence following discontinuation of interleukin-1 (IL-1) blocker therapy (i.e. third-line therapy with either ARCALYST/rilonacept or KINERET/anakinra). The trial, which initiated at Northwestern University in Chicago under the direction of Dr Paul Cremer, will be led by additional top international cardiovascular experts from renowned centres, including Dr Allan Klein from the Cleveland Clinic, Dr Massimo Imazio from the University of Udine in Italy, Dr Allen Luis from the Mayo Clinic in Rochester, Dr Antonio Abbate from the University of Virginia and Dr Stephen Nicholls from Monash University in Melbourne, Australia. (p.t.o.)

# **FINANCIAL HISTORY & PROJECTIONS**

	2022	2023	2024	2025E	2026E	2027E
Revenue (CAD m)	0.0	0.0	0.0	0.0	0.0	5.9
Y-o-y growth	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
EBIT (CAD m)	-41.3	-29.8	-40.3	-27.0	-24.0	-11.7
EBIT margin	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Net income (CAD m)	-30.9	-28.1	-36.7	-25.8	-23.0	-10.9
EPS (diluted) (CAD)	-0.49	-0.44	-0.51	-0.31	-0.96	-0.12
DPS (CAD)	0.00	0.00	0.00	0.00	0.00	0.00
FCF (CADm)	-27.3	-25.2	-25.1	-22.0	-19.5	-8.2
Net gearing	-113.9%	-123.7%	-123.7%	-218.6%	-149.2%	-1017.6%
Liquid assets (CAD m)	59.5	34.9	30.6	8.5	13.9	5.6

# **RISKS**

Risks include, but are not limited to development, regulatory, competition and financial.

# **COMPANY PROFILE**

Founded in 2017, Cardiol Therapeutics Inc is a Canadian biotech company focused on the research and development of new drugs to treat heart diseases. The lead drug candidate, CardiolRx (cannabidiol) oral solution, is being evaluated in the MAVERIC clinical programme for recurrent pericarditis and the ARCHER clinical programme for acute myocarditis.

MARKET DA	ГА	As of 2	2 Apr 2025			
Closing Price		USD 0.99				
Shares outstand	ding	82.61m				
Market Capitalis	USE	) 82.12m				
52-week Range	USD 0.	81 / 2.97				
Avg. Volume (12	381,671					
Multiples	2024	2025E	2026E			
	2024	ZUZJE	2020E			
P/E	n.a.	n.a.	n.a.			
EV/Sales	n.a. n.a					
EV/EBIT	n.a.	n.a.				
		0.0% 0.0%				

# **STOCK OVERVIEW**



COMPANY DATA	As of 31 Dec 2024
Liquid Assets	CAD 30.58m
Current Assets	CAD 31.67m
Intangible Assets	CAD 0.00m
Total Assets	CAD 31.86m
Current Liabilities	CAD 7.01m
Shareholders' Equity	CAD 24.73m
SHAREHOLDERS	
Management and Directors	4.7%
Tejara Capital Ltd	3.8%
Advisorshares Investments LLC	1.1%
MMCAP International Inc	1.0%
Freefloat & others	89.4%

Focus on MAVERIC phase III trial for prevention of RP, which could potentially enrol very quickly Cardiol recently decided to focus the development strategy for CardiolRx<sup>™</sup> in RP on one pivotal phase III RP trial called MAVERIC. MAVERIC is a randomised, doubleblind, placebo-controlled phase III study that aims to enrol 110 patients across sites in the US, Canada and Europe, and is designed to demonstrate CardiolRx<sup>™</sup>'s efficacy in maintaining freedom from recurrence over a 24-week period. The study design was developed in collaboration with Cardiol's top lead investigators and KOLs, and aligned with the FDA in a recent End-of-Phase 2 meeting. Therefore, if successful, this study will support a new drug application for submission to the FDA. Importantly, enrolment for this trial could progress rapidly due to the following reasons:

- Patients who experience a recurrence of pericarditis after discontinuation of IL-1 blockers are in urgent need of an alternative. Immunosuppressants have significant drawbacks, including their high cost (list price of >USD 200k p.a.), high risk of disease recurrence when discontinued, the method of administration (injection), and in particular risk of infection. CardioIRx<sup>™</sup> represents a potentially effective, more patient-friendly and cost-effective treatment alternative for these patients with dependence on IL-1 blockers;
- Patients taking immunosuppressive IL-1 blocker treatment are already known to trial sites, and this pool of eligible patients should facilitate fast recruitment. About 20 participating recruitment centres are prepared to start enrolling patients.

In a blue-sky scenario, enrolment could complete in the first half of 2026, with headline results due by mid-2026. A potential approval could take place in H2 2026, which assumes the FDA grants CardiolRx<sup>™</sup> an accelerated Fast Track pathway. We conservatively assume a drug approval in 2027.

Given the unmet need, potential for Orphan Drug exclusivity, and the limitations of existing IL-1 blockers, there is a large market opportunity for a differentiated, nonimmunosuppressive option in RP such as CardiolRx<sup>™</sup> CardiolRx<sup>™</sup> is targeting ~38,000 patients (US alone) with recurrent pericarditis. The MAVERIC study is designed to show CardiolRx prevents recurrence in a patient population at high risk for relapse after discontinuation of IL-1 blocker therapy (~75% of patients relapse within 12 weeks of IL-1 blocker discontinuation). The IL-1 blocker RP market is valued at >USD500M in 2025 in the US alone, with the IL-1 blocker ARCALYST currently capturing only ~11% of the 14,000 patients who suffer from multiple recurrences due to the above-mentioned therapy drawbacks. CardiolRx<sup>™</sup> is positioned as a more convenient, accessible, non-immunosuppressive oral therapy with disease-modifying potential.

Solid data from phase II pilot RP study underscores the good prospects for success of the phase III study The company has completed a phase II open-label pilot study (MAVERIC-Pilot) in 27 RP patients, which showed compelling clinical results. Patients experienced rapid and sustained reductions in pericarditis pain (mean reduction of 3.7 points from 5.8 at baseline to 2.1) and inflammation, with 93% reporting pain improvement by week 8, and normalisation of C-reactive protein in 80% of those with elevated baseline levels. The study also demonstrated a significant drop in annual recurrence rates, from 5.8 episodes to 0.9 during treatment. CardiolRx<sup>™</sup> was well tolerated, and most patients (89%) transitioned successfully into the 18-week extension phase during which CardiolRx<sup>™</sup> was administered as a monotherapy. On the strength of these data, we see good chances of success for the phase III pivotal MAVERIC RP study (further details on this trial can be found in the appendix).

CardiolRx<sup>TM</sup>'s multi-national, randomised, double-blind, placebo-controlled ARCHER phase II study in acute myocarditis (AM) is on track to report results within the next one or two months The proof-of-concept ARCHER phase II study is investigating the safety, tolerability and efficacy of CardiolRx<sup>TM</sup> in 100 AM patients at major cardiac centres in North America, Europe, and Israel. Cardiol reached its target of enrolling the 100 patients by 24 September 2024. The primary endpoint of the trial will be the assessment of two cardiac magnetic resonance (CMR) imaging measures after 12 weeks of therapy, each of which has been shown to predict the long-term prognosis of patients with acute myocarditis: (1) left ventricular function, which measures myocardial shortening from base to apex, and (2) myocardial edema/fibrosis also known as extra-cellular volume – this is the gold standard and measures scar tissue outside the heart cells following long term inflammation. The goal would be to show a positive change in extra cellular volume, which would be the first ever evidence of anti-fibrotic effect in the heart. We anticipate that the company will report headline results within the next one or two months, and full data will probably be presented at the ESC Congress 2025 from 29 August - 1 September in Madrid.





## Source: First Berlin Equity Research, Cardiol Therapeutics Inc

Solid phase II ARCHER data could potentially lead to rapid commercialisation of the drug in AM without the need for phase III trials If the data are conclusive, i.e. if this study provides the first clinical evidence of an antifibrotic effect in the heart, we believe the company will not plan a phase III study, but pursue orphan drug status and in combination with the phase II data have the product incorporated into the AM treatment guidelines. The members of the Clinical Steering Committee (CSC) of the ARCHER study are renowned specialists and KOLs who have been involved in the development of international guidelines for the treatment of myocarditis in the past. The treatment guidelines are usually endorsed by the American Heart Association (AHA) and the European Society of Cardiology (ESC). For this route, CardiolRx<sup>™</sup> must first be an FDA-approved drug, in this case for the RP indication. We note that other products are currently being recommended off-label under treatment guidelines, such as steroids for RP or AM therapy. This would be a major value inflection point, as it would allow dual use of CardiolRx<sup>™</sup> in both RP and AM, potentially simultaneously with RP approval. If the results from ARCHER require additional clinical evidence, we expect the company may out-licence the drug to a pharmaceutical partner who will conduct the phase III trial.

**Pre-clinical Heart Failure (HF) Subcutaneous Formulation CRD-38 making progress towards IND. Recent research demonstrates that CRD-38 provides cardioprotection** Cardiology (JACC). The preclinical study, conducted by researchers from Tecnológico de Monterrey and the DeBakey Heart and Vascular Center, highlights the potential of CRD-38 in improving cardiac function and reducing key pathological features such as hypertrophy, remodelling, inflammation, and cell death. The research demonstrates that subcutaneous administration of cannabidiol provides cardioprotection in preclinical models of heart failure. These findings from multiple models indicate that it reduces cardiac fibrosis and preserves

mitochondrial function (which is crucial for heart cell energy production and survival) by enhancing calcium handling in heart cells. Mechanistic studies suggest that this cardioprotective effect is mediated through PPAR-γ activation, which prevents mitochondrial dysfunction and preserves cardiac muscle cell function. These findings provide a deeper understanding of CRD-38's mode of action, how it sustains cardiomyocytes (muscle cells of the heart) and prevents structural deterioration of the heart, reinforcing its potential as a novel treatment for heart failure. They will be incorporated into the company's CRD-38 development programme to complete the IND-enabling work required to progress toward clinical trials.

The preclinical programme CRD-38 is targeting a very attractive market We note that if ARCHER data confirms an anti-fibrotic effect, this HF programme will become particularly compelling, tapping into a multi-billion USD market with broad potential in heart failure with preserved ejection fraction (HFpEF; sometimes also referred to as diastolic heart failure), a major unmet need. CardiolRx<sup>™</sup> could become an attractive partnering opportunity for big pharma players targeting cardiovascular diseases.

# **P&L KPI OVERVIEW OF FY 2024 RESULTS**

**FY 2024 financial results were broadly in line with our expectations** Cardiol reported EBIT of CAD -40.3m (FBe: CAD -39.2m; FY/23: CAD -29.8m), reflecting continued R&D investment and an increase in G&A expenses. Operating expenses rose year-over-year, largely due to a significant increase in general and administrative (G&A) costs, which reached CAD 26.3m (FBe: CAD 27.0m; FY/23: CAD 15.6m). The increase was primarily attributable to higher share-based compensation and the expansion of IR activities following the capital increase in Q4 2024. Research and development expenses came in at CAD 14.0m (FBe: CAD 12.2m; FY/23: CAD 14.2m), remaining relatively flat compared to the previous year. The company advanced its clinical pipeline with significant progress in both the ARCHER and MAVERIC trials. The net financial result amounted to CAD 3.3m (FBe: CAD 1.6m; FY/23: CAD 1.3m), driven by strong interest income and foreign exchange gains. Non-operating income amounted to CAD 0.3m (FBe: CAD -0.9m; FY/23: CAD 0.3m). Consequently, Cardiol recorded a net loss of CAD -36.7m for the year (FBe: CAD -38.5m; FY/23: CAD -28.1m), slightly lower than our forecast.

in CAD'000	2024A	2024E	Delta	2023	Delta
Revenue	0	0	-	0	-
General & Administrative	26,265	27,000	-3%	15,561	<b>69%</b>
Research & Development	14,012	12,200	15%	14,224	-1%
OPEX	40,277	39,200	3%	29,786	35%
EBIT	-40,277	-39,200	-	-29,786	-
Net financial result	3,333	1,600	108%	1,326	151%
Non-operating income/expenses	266	-900	-	331	-20%
Net income	-36,677	-38,500	-	-28,128	-

# Table 1: P&L FY 2024 reported figures vs FB estimates and FY 2023 (KPIs)

Source: First Berlin Equity Research, Cardiol Therapeutics Inc

**Revising financial forecasts for 2025 and the following years following development strategy changes** Given the change in Cardiol's development strategy for CardiolRx<sup>TM</sup> for RP to focus on one pivotal phase 3 RP trial instead of two as previously planned, and the delay in the development timeline, we have lowered our R&D/OPEX forecasts for 2025 and subsequent years and pushed back our assumption for a potential approval and launch to 2027 (previously: 2026). The changes to our forecasts are summarised in table 2 overleaf.

# Table 2: Changes to our forecasts (KPIs)

		2025E			2026E			2027E	
Figures in CAD'000	Old	New	Delta	Old	New	Delta	Old	New	Delta
Revenue	0	0	-	4,510	0	-100%	114,831	5,905	-95%
OPEX	40,000	27,000	-33%	40,000	24,000	-40%	24,000	17,600	-27%
EBIT	-40,000	-27,000	-	-35,490	-24,000	-	90,831	-11,695	-
Net financial result	1,200	1,200	0%	1,000	1,000	0%	800	800	0%
Non-operating income/expenses	0	0	-	0	0	-	0	0	-
Net income	-38,800	-25,800	-	-34,490	-23,000	-	91,631	-10,895	-

Source: First Berlin Equity Research

**Balance sheet FY/24 – Cash runway extended into Q3 2026** By the end of FY/24, the cash position declined to CAD 30.6m (FY/23: CAD 34.9m) due to funding of ongoing operations. Company's cash burn was offset by proceeds from the October 2024 capital increase, which raised USD15.5m (CAD ~21.4m) before issuance costs. These funds have extended the cash runway into Q3 2026. Cardiol's equity position dropped from CAD 28.2m at FY/23 to CAD 24.7m at FY/24, reflecting the impact of the annual net loss, partially offset by equity financing and the exercise of performance and restricted share units. The equity ratio (ER) increased slightly to 78% at FY/24 (FY /23 ER: 77%).

**FY 2024 cash flow** Operating cash outflow was stable at CAD -25.1m (FY/23: CAD -25.2m), despite higher non-cash expenses from share-based compensation (CAD 14.3m vs. CAD 4.2m in FY/23). Financing cash flow reported net proceeds of CAD 18.8m, which will support the company's runway into Q3 2026, as guided.

# **VALUATION MODEL**

**Buy rating and price target confirmed** We maintain our positive view on Cardiol following the release of FY/24 results, which came in broadly in line with our expectations. Our confidence is underpinned by the continued progress of the clinical pipeline, most notably the positive data from the pilot MAVERIC phase II study in RP and the recently announced enrolment of the first patient for the pivotal MAVERIC phase III trial, as well as the imminent top-line data readout from the multinational ARCHER phase II study in AM expected in the next one to two months. We expect these catalysts to further validate CardiolRx<sup>™</sup>'s efficacy in inflammatory cardiac conditions and support a significant re-rating of the shares. Following update of our financial forecasts, our SOTP valuation model yields an unchanged price target of USD8.50. We therefore reiterate our Buy rating on Cardiol.

# Table 3: "Sum-of-the-parts" valuation model

Compound	Project <sup>1)</sup>		esent alue	Patient Pop (K)	Treatment Cost (USD)	Market Size (USDM)	Market Share (%)	Peak Sales (USDM)	PACME Margin <sup>2)</sup> (%)	Discount Factor (%)	Market Exclusivity <sup>3)</sup> (years)	Time to Market (years)
CardiolRx™	RP-3L - US	USD	179.9M	14K	52,000	728.0M	24%	221.3M	30%	16.0%	7	3
CardiolRx™	RP-3L - EU	USD	92.2M	25K	18,000	450.0M	24%	131.7M	30%	16.0%	7	3
CardiolRx™	RP-2L - US	USD	246.7M	26K	52,000	1,352.0M	24%	390.5M	30%	16.0%	7	5
CardiolRx™	RP-2L - EU	USD	132.9M	47K	18,000	846.0M	24%	257.5M	30%	16.0%	7	5
CardiolRx™	AM - US	USD	134.3M	54K	52,000	2,808.0M	18%	652.1M	20%	16.0%	7	5
CardiolRx™	AM - EU	USD	50.7M	72K	18,000	1,296.0M	18%	322.9M	20%	16.0%	7	5
PACME PV		USD	836.7M			7,480.0M		1,976.0M				
Costs PV <sup>4)</sup>		USD	51.0M									
NPV		USD	785.7M									
Milestones P	V	USD	0.0M									
Net cash (pro	forma)	USD	40.5M									
Fair Value		USD	826.2M									
Share Count	(proforma)	97,237	7K									
Price Target		USD 8	3.50									
Price Target		EUR 7	7.50	(based or	EUR-USD	exchange rat	e of 1.13	)				

1) A project typically refers to a specific indication or, where necessary or relevant, a combination between indication and geographic market

2) PACME (Profit After Costs and Marketing Expenses) reflects the company's profit share on future revenues.

This share may be derived in the form of royalties (outsourced marketing/manufacturing) or operating EBITDA margin (in-house model),

or some mix of both (depending on the specific parameters of partnership agreements)

3) Remaining market exclusivity after the point of approval

4) Includes company-level R&D, G&A, Financing Costs and CapEx; COGS and S&M are factored into the PACME margin for each project

# **APPENDIX**

# **MAVERIC-PILOT RP STUDY – HEADLINE RESULTS**

# Figure 2: Overview of the phase II MAVERIC-Pilot RP study design



# Source: First Berlin Equity Research, Cardiol Therapeutics Inc

The primary endpoint: CardiolRx<sup>™</sup> achieved a substantial reduction in pericarditis pain measured with the NRS, which is comparable to rilonacept The patients treated with CardiolRx<sup>™</sup> achieved a mean pain reduction of 3.7 points from 5.8 at baseline (range of 4 to 10) to 2.1 (range of 0 to 6) at 8 weeks. Importantly, CardiolRx<sup>™</sup>'s performance is very similar to that of the immunosuppressive biologic therapy rilonacept (Arcalyst<sup>®</sup>) in its phase II pilot and phase III trials, which is FDA-approved and is used as a third-line treatment for RP. We give an overview of these results in table 4 below.

# Table 4: Patient-reported pericarditis pain: CardiolRx<sup>™</sup> versus rilonacept

n=27	Baseline	Week 8	Difference±	rilonacept	Mean Difference±
Mean	5.8	2.1	-3.7	Phase II (n=9)	-3.8 (ΕοΤΡδ)
Range	4.0-10.0	0.0 -6.0		Phase III (n=82)	-3.9 (Week 8)

Baseline NRS scores for both Phase II and Phase III trials was 4.5

\*numerical rating scale (NRS) is a validated 11-point instrument used to assess patient-reported pericarditis

pain. Zero represents "no pain at all" whereas the upper limit of 10 represents "the worst pain ever possible".

± Negative value indicates an improvement in CRP.

δ End of Treatment Period (~Week 6/8)

Rilonacept trial references:

\* Klein AL, Lin D, Cremer PC, et al. Efficacy and safety of rilonacept for recurrent pericarditis: results from a phase II

clinical trial. Heart. Published online November 23, 2020. doi:10.1136/heartjnl-2020-317928

\* Klein AL, Imazio M, Cremer P, et al . Phase 3 trial of Interleukin-1 Trap Rilonacept in Recurrent

Pericarditis. N Engl J Med. 2021; 384 (1):31-412.doi:10.1056/NEJMoa2027892

Source: First Berlin Equity Research, Cardiol Therapeutics Inc, Allan Klein et al, 2021- phase II & phase III studies

Secondary endpoint of inflammation, as measured by CRP at 8 weeks, also showed **positive results** CardiolRx<sup>TM</sup> also led to a normalisation of inflammation, as measured by C-reactive protein (CRP), in 80% of patients who took part in the study whose CRP was elevated at baseline. Importantly, 89% of patients have continued into the 18-week extension phase of the study which demonstrates CardiolRx<sup>TM</sup> is well-tolerated and that they are satisfied with the pain relief achieved. We give an overview of the CRP results compared to rilonacept (Arcalyst<sup>®</sup>) in table 5 overleaf.

# Table 5: C-reactive protein: CardiolRx<sup>™</sup> versus rilonacept

	Baseline	Week 8	Difference*	rilonacept	Mean Difference
Mean	5.71	0.31	-5.39	Phase II	-4.24 (EoTP)
Mean	0.71	0.51	-0.00	Phase III (n=82)	-3.48 (Week 6)

Baseline CRP values: Phase II = 4.62; Phase III = 3.7

\*Negative value indicates an improvement in CRP.

Rilonacept trial references:

- Klein AL, Lin D, Cremer PC, et al. Efficacy and safety of rilonacept for recurrent pericarditis: results from
- a phase II clinical trial. Heart. Published online November 23, 2020. doi:10.1136/heartjnl-2020-317928.
- Klein AL, Imazio M, Cremer P, et al. Phase 3 Trial of Interleukin-1 Trap Rilonacept in Recurrent
- Pericarditis. N Engl J Med. 2021;384(1):31-41. doi:10.1056/NEJMoa2027892.

Source: First Berlin Equity Research, Cardiol Therapeutics Inc, Allan Klein et al, 2021- phase II & phase III studies

# **MAVERIC-PHASE III RP STUDY DESIGN**

# Figure 3: Overview of the MAVERIC phase III RP study design



Source: First Berlin Equity Research, Cardiol Therapeutics Inc

# **INCOME STATEMENT**

All figures in CAD'000	2022	2023	2024	2025E	2026E	2027E
Revenue	0	0	0	0	0	5,905
Cost of goods sold	0	0	0	0	0	0
Gross profit	0	0	0	0	0	5,905
General & Administrative	-22,374	-15,561	-26,265	-12,000	-12,000	-9,600
Research & Development	-18,962	-14,224	-14,012	-15,000	-12,000	-8,000
Total operating expenses (OPEX)	-41,336	-29,786	-40,277	-27,000	-24,000	-17,600
Operating income (EBIT)	-41,336	-29,786	-40,277	-27,000	-24,000	-11,695
Net financial result	4,000	1,326	3,333	1,200	1,000	800
Non-operating income/expenses	6,406	331	266	0	0	0
Pre-tax income (EBT)	-30,931	-28,128	-36,677	-25,800	-23,000	-10,895
Income taxes	0	0	0	0	0	0
Net income / loss	-30,931	-28,128	-36,677	-25,800	-23,000	-10,895
Diluted EPS (CAD)	-0.49	-0.44	-0.51	-0.31	-0.96	-0.12
Ratios						
EBIT Margin on Revenue	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Net Margin on Revenue	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Expenses as % of OPEX						
General & Administrative	54.1%	52.2%	65.2%	44.4%	50.0%	54.5%
Research & Development	45.9%	47.8%	34.8%	55.6%	50.0%	45.5%
Y-Y Growth						
Revenue	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Operating income	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Net income/ loss	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.

# **BALANCE SHEET**

All figures in CAD '000	2022	2023	2024	2025E	2026E	2027E
Assets						
Current Assets, Total	61,438	36,153	31,668	10,285	15,810	7,127
Cash and cash equivalents	59,470	34,932	30,580	8,465	13,890	5,627
Accounts receivables	480	280	362	420	420	0
Inventories	0	0	0	0	0	0
Other current assets	1,488	941	727	1,400	1,500	1,500
Non-Current Assets, Total	591	547	196	151	120	101
Property plant and equipment	296	337	196	151	120	101
Intangible assets	295	210	0	0	0	0
Total Assets	62,029	36,701	31,864	10,436	15,930	7,228
Shareholders' Equity & Debt						
Current Liabilities, Total	9,805	8,295	7,010	6,453	6,518	6,585
Accounts payable	9,334	8,041	6,977	6,419	6,483	6,548
Derivative liabilities	420	238	0	0	0	0
Other current liabilities	50	16	33	34	36	37
Longterm Liabilities, Total	22	159	126	112	101	90
Other liabilities	22	159	126	112	101	90
Shareholders Equity	52,202	28,247	24,728	3,872	9,311	553
Total Consolidated Equity and Debt	62,029	36,701	31,864	10,436	15,930	7,228
Ratios						
Current ratio (x)	6.27	4.36	4.52	1.59	2.43	1.08
Quick ratio (x)	6.27	4.36	4.52	1.59	2.43	1.08
Net gearing	-113.9%	-123.7%	-123.7%	-218.6%	-149.2%	-1017.6%
Book value per share (€)	0.84	0.44	0.35	0.05	0.10	0.01
Net debt	-59,470	-34,932	-30,580	-8,465	-13,890	-5,627
Equity ratio	84.2%	77.0%	77.6%	37.1%	58.4%	7.7%

# **CASH FLOW STATEMENT**

All figures in CAD '000	2022	2023	2024	2025E	2026E	2027E
Net income	-30,931	-28,128	-36,677	-25,800	-23,000	-10,895
Interest, net	-4,000	-1,326	-3,333	-1,200	-1,000	-800
Tax provision	0	0	0	0	0	0
Non-operating items	-6,406	-331	-266	0	0	0
EBIT	-41,336	-29,786	-40,277	-27,000	-24,000	-11,695
Depreciation and amortisation	220	248	373	155	147	140
EBITDA	-41,116	-29,537	-39,904	-26,845	-23,853	-11,556
Derivative liability	-6,241	-182	-238	0	0	0
Share & w arrant based payments	6,894	4,173	14,277	4,000	2,500	2,200
Changes in w orking capital	5,748	-546	-932	-1,289	-34	486
Cash interest net	4,000	1,326	3,333	1,200	1,000	800
Other adjustments	3,495	-415	-1,598	1,000	1,000	0
Operating cash flow	-27,220	-25,180	-25,061	-21,934	-19,388	-8,070
СарЕх	-75	-64	-21	-110	-116	-121
Free cash flow	-27,295	-25,245	-25,082	-22,044	-19,503	-8,191
Other investments	0	0	0	0	0	0
Cash flow from investing	-75	-64	-21	-110	-116	-121
Debt Financing, net	0	0	0	0	0	0
Equity Financing, net	0	0	18,882	0	25,000	0
Other financiing activities	-54	-55	-42	-71	-72	-73
Cash flow from financing	-54	-55	18,840	-71	24,928	-73
Net cash flows	-27,349	-25,300	-6,242	-22,115	5,425	-8,264
Cash, start of the year	83,899	59,470	34,932	30,580	8,465	13,890
Impact of exchange rates on cash	2,920	762	1,890	0	0	0
Cash, end of the year	59,470	34,932	30,580	8,465	13,8 <mark>90</mark>	5,627
Y-Y Growth						*****
Operating Cashflow	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.
Free cashflow	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.

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Anschrift: First Berlin Equity Research GmbH Friedrichstr. 34 10117 Berlin Germany

Vertreten durch den Geschäftsführer: Martin Bailey

Telefon: +49 (0) 30-80 93 9 680 Fax: +49 (0) 30-80 93 9 687 E-Mail: <u>info@firstberlin.com</u>

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### Authored by: Christian Orquera, Analyst All publications of the last 12 months were authored by Christian Orquera.

### Company responsible for preparation: First Berlin Equity Research GmbH, Friedrichstraße 69, 10117 Berlin

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# Person responsible for forwarding or distributing this financial analysis: Martin Bailey

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Category Current market capitalisation (in €)		1 0 - 2 billion	2 > 2 billion
Buy	An expected favourable price trend of:	> 25%	> 15%
Add	An expected favourable price trend of:	0% to 25%	0% to 15%
Reduce	An expected negative price trend of:	0% to -15%	0% to -10%
Sell	An expected negative price trend of:	< -15%	< -10%

<sup>1</sup> The expected price trend is in combination with sizable confidence in the quality and forecast security of management

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Report No.:	Date of publication	Previous day closing price	Recommendation	Price target
Initial Report	11 April 2023	USD0.51	Buy	USD3.60
2	24 May 2023	USD0.68	Buy	USD3.60
3	30 August 2023	USD0.98	Buy	USD3.60
4	19 January 2024	USD1.06	Buy	USD3.60
5	27 February 2024	USD1.76	Buy	USD3.60
6	14 June 2024	USD2.36	Buy	USD8.50
7	28 October 2024	USD1.92	Buy	USD8.50
8	Today	USD0.99	Buy	USD8.50

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- key sources of information in the preparation of this research report
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