



Presenters



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Proposed Dual Listed Trust (DLT) restructure

VITAL HAS ANNOUNCED A CONSULTATION PROCESS REGARDING A PROPOSAL TO SEPARATE INTO TWO LEGAL ENTITIES, WHILE FUNCTIONING AS A SINGLE ECONOMIC ENTITY THROUGH EQUALISATION ARRANGEMENTS

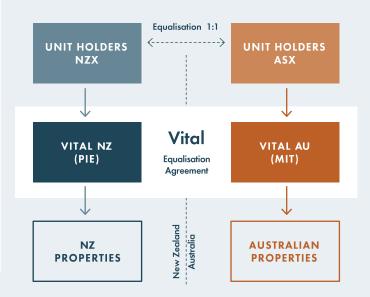
DLT structure overview

The DIT structure addresses various inefficiencies such that:

- ▶ Vital NZ remains a NZ PIE Fund with Vital's NZ assets listed on the NZX
- Vital AU, an Australian Managed Investment Trust, to list Vital's Australian assets on the ASX
- Higher AFFO and distributions achieved through the removal of inefficiencies at entity and Unit Holder level
- Unit Holders retain economic exposure to all of the assets of Vital NZ and Vital AU investors via Equalisation arrangements

- An exchange facility is expected to result in potential liquidity event for new ASX investors
- ASX listing expected to improve Vital's access to capital and liquidity through access to a larger range of investors, ASX index inclusion and broader analyst and broker coverage
- ▶ Index implications:
 - Vital NZ maintains S&P/NZX50 inclusion
 - Vital AU to be eligible for S&P/ASX 300 index which is expected to generate demand from Australian and offshore investors

Vital's proposed DLT structure(1)



Why invest in Vital



25-year business experience in Australian & NZ health system



Experienced and stable management team with majority independent board



NZ\$3.2bn high quality, pure healthcare portfolio diversified across NZ & Aus



Long term valuation and revenue stability due to defensive sector and Vital's market-leading 19.4yr WALE



Diversified tenant base (largest tenant 20% by income) and low capex portfolio (ave. building age 9.5yrs)



~NZ\$2b potential development pipeline (split one third NZ & two thirds Aus),



Strong ESG Leadership



Current Unit Price trading at a ~29% discount to 30 September 2024 NTA of \$2.60 per unit

Vital Healthcare Property Trust (Vital) is:

- Externally managed by a subsidiary of Torontolisted, global healthcare real estate owner and manager, Northwest Healthcare Properties REIT (TSX ticker: NWH);
 - Northwest is highly aligned with investors with a 28.4% stake in Vital.
- Underpinned by rental income that tracks inflation with ~84% of lease income indexed to CPI in some way; and
- Targeting 2–3% AFFO and DPU growth per annum over the medium term, whilst retaining a conservative pay-out ratio.

FY24 Highlights

NON-CORE ASSET SALES AND DEVELOPMENTS HAVE HELPED IMPROVE THE RESILIENCE OF THE PORTFOLIO



18.3

year WALE versus 18.1years in FY20 despite 5 years passing; increased further to 19.4 years at 30 Sept 2024



NZ\$251m

asset sales over FY24 at a 7.5% discount to book value



3.7%

increase in like-for-like net property income²



NZ\$225m

of development and capital expenditure works undertaken in FY241



5

Developments completed for a total cost of ~NZ\$197m



1 st

place for listed healthcare (both globally & in Oceania) in developments



VITAL HEALTHCARE PROPERTY TRUST | NON-DEAL ROADSHOW | DECEMBER 2024

 $^{^{\}rm 1}$ Includes ~\$220.5m of developments and ~\$3.7m of value add capex

 $^{^{2}}$ On a same property, constant currency basis

Portfolio overview

AUSTRALASIA'S HIGHEST QUALITY LISTED HEALTHCARE PORTFOLIO

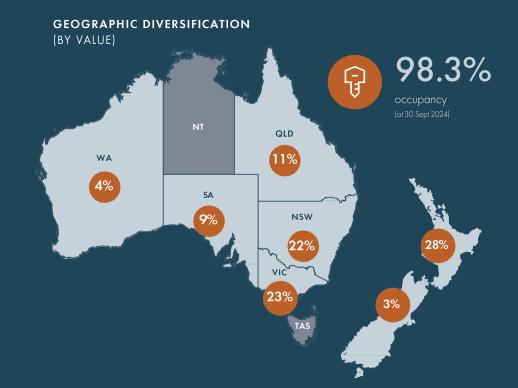
CPI aligned leases support income growth

3.7% growth over FY24 for same properties on a like-for-like and constant currency basis.

- ~84% of Vital's rent is linked to CPI of which 70% has a cap with aweighted average of 3.59%
- ► AFFO lags CPI increases due to:
 - CPI being a backward measure for future rent; and
 - Vital's rent reviews are weighted towards the second half of the financial year

TOP TEN TENANTS

| Aurora Healthcare | 20% |
|-------------------------|-----|
| Healthe Care Surgical | 16% |
| Epworth Healthcare | 15% |
| Evolution Healthcare | 14% |
| Southern Cross | 4% |
| Burnside | 3% |
| Mercy Ascot | 3% |
| GenesisCare | 2% |
| Boulcott Hospital | 2% |
| I-Med Radiology Network | 1% |
| Other | 20% |





Vital's tenants include some of the largest healthcare operators across Australia and New Zealand

Portfolio continues to be strengthened

CONTINUING TO BUILD A RESILIENT PORTFOLIO THROUGH THE SALE OF NON-CORE ASSETS

Non-core asset sales

NZ\$59m + NZ\$251m + NZ\$180m

FY23

FY24

In due diligence

= NZ\$490m

Since March 2023

- ► Enhanced focus on core metro and precinct locations
- ► Concentration of relationships with operators at their core hospitals
- Maximise investment in the highest performing assets with significant opportunities for growth

Sales have helped achieve:

1.9 years

0.9 years

99.99%

Avive Clinic, VIC VITAL HEALTHCARE PROPERTY TRUST I NON-DEAL ROADSHOW | DECEMBER

Vital's development pipeline

CURRENT COMMITTED DEVELOPMENTS ARE ON TRACK; NEW DEVELOPMENTS WILL ONLY TO BE COMMITTED TO WHERE MARKET CONDITIONS ARE SUPPORTIVE



NZ\$106.1m

remaining to be spent on committed development pipeline



5.6%

weighted average development yield (current committed developments)



~NZ\$2b

potential development pipeline on existing land holdings



Why are developments important?

- ▶ Delivers incremental unitholder value (income and capital)
- ► Newer buildings with reduced operating and maintenance expenses
- ► Enhanced tenant covenants
- Greener, more sustainable, and resilient assets
- Increased exposure to core and emerging healthcare precincts
- Support operator partners by enhancing & growing their businesses

Vital's development performance (last 3 years)¹

NZ\$330.1m

Total development spend

5.8%

Yield on cost on completed projects

20.2%

Development margin



Australian Private Healthcare Landscape

PRIVATE HEALTHCARE PLAYS AN ESSENTIAL, AND GROWING ROLE, IN THE DELIVERY OF HEALTHCARE IN AUSTRALIA

The Australian Healthcare System delivers some of the best healthcare outcomes in the world

The healthcare sector is adequately resourced; however, it comes at a high cost, and there is limited availability of beds.

| Metric | AUS | OECD Average |
|------------------------------------------------------------------------|-----------------------------|-------------------------------|
| Average Healthcare Expenditure | \$6,370 USD per Capita | \$4,910 USD per Capita |
| Below Average Bed Supply | 3.8 Beds per 1000 | 4.3 Bed per 1000 |
| High Demand Driven by Older Population and High Comorbidities | 17% Aged +65 31% Obesity | 18.0% Aged +65 25% Obesity |

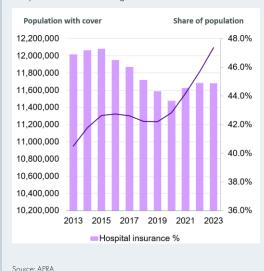
However, Australians are living longer lives

| Highest Quality | 3.3 | OECD Avg: 6.0 |
|-----------------|------------------------------------------|------------------------------------------|
| Oulcomes | (30-Day Acute Care Mortality Rate) | (30-Day Acute Care Mortality Rate) |

Source: OECD

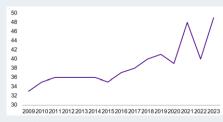
45% of Australia's population have private health insurance coverage with hospital cover

Hospital Insurance coverage



The pressure on the system is mounting, with future demand outpacing supply

Public hospital waitlists have surged to unprecedented levels, indicating a system under strain. This overflow tends to naturally shift towards the more efficient private sector.



Source: AIHW

Governments are adding capacity to the system, but investment lags population growth & demand

2030 Bed Supply Uplift

2030 Population Growth

Available beds per 1,000 people will further decrease

Source: CBRE

Market Dynamics in Australian Private Hospitals

DESPITE THE RECENT PRESSURES, WE REMAIN OPTIMISTIC ABOUT THE LONGER-TERM PROSPECTS OF THE AUSTRALIAN PRIVATE HOSPITAL SECTOR

Market Context

- During and post COVID the financial pressure of lower-than-expected admissions growth, compounded by limited growth in private health insurance rebates (increasing by 2% each year since 2019) and rising operating costs, primarily driven by higher nursing salaries and increased reliance on agency staff.
- Despite these challenges, the sector has reasons to be confident about its longer-term prospects, especially for larger, well-located assets with high quality tenants.

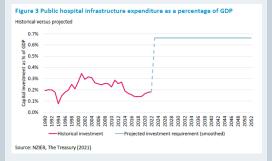
Positive signs

| há | Strong demand fundamentals | Australians 65+ projected to reach 6.7 million by 2042; nearly 50% report chronic disease; 1 million more have private health insurance post-pandemic. |
|-----|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| O S | Recovered demand pipeline | GP consultations grew 1% in H1 2024, reversing a 3% decline in H2 2023; specialist visits increased. |
| | Growth in private hospital admissions | Admissions rose by 4% in FY24, after a 5% increase in FY23; growth in every FY24 quarter. |
| | Public sector struggles to meet demand | Public sector growth rates are declining due to funding cuts, labour issues, and productivity drops. |
| | Private health sector profitability | Record profits for insurers driven by membership growth and reduced payouts; \$4 billion in member rebates. |
| | Positive pricing trends in private health | Hospital treatment benefits up 8% in FY24 vs. FY23, indicating faster pricing growth than CPI. |
| | Hospitals are still in demand over same day | Day surgeries in multi-day facilities grew 2.9% vs. 1.9% in day-only facilities, driven by doctor preferences. |

New Zealand Hospital Landscape

PRIVATE HOSPITALS ARE AN IMPORTANT ASSET FOR HEALTHCARE DELIVERY IN NEW ZEALAND FOR BOTH PUBLIC AND PRIVATELY FUNDED PATIENTS
AS THE PUBLIC SYSTEM UNDERGOES THE SECOND MAJOR HEALTH REFORM IN TWO YEARS

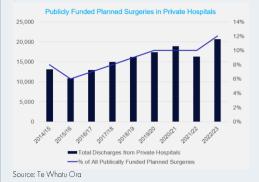
The NZ Public Hospital System requires significant capital expenditure to correct for decades of under-investment



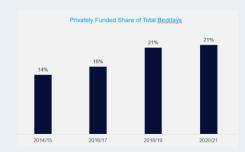
The projected investment to replace and renew assets and meet population demand continues to grow. The estimated average annual requirement for new hospital buildings is almost equivalent to a new c.NZ\$1.4bn, 400-bed hospital every year from 2033 to 2052.

As a result of aged infrastructure, a lack of capital investment and pressures on workforce there is an increasing reliance on the private sector to serve public patients

The share of public-funded inpatient surgeries performed in the private sector has doubled since 2015 (from 6% to 12%). To achieve the Government's better health services targets in the reduction of elective, cancer and ED wait times, expanded contract services agreements for additional services and higher volumes are likely between public and private.



Kiwis are also electing to privately fund care in lieu of the public system at a growing rate



Source: Ministry of Health – Manatū Hauora

- ▶ Private Health Insurance is becoming increasingly popular with 37% of Kiwis reported having health insurance in 2023, up 5% from 32% in 2022.
- Share of total hospital activity funded that is privately funded is increasing from 14% in 2014/15 to 21% in 2020/21.



Indicative timetable

VITAL IS TARGETING PRESENTING A FORMAL PROPOSAL TO UNIT HOLDERS IN Q1 2025 AND IF APPROVED BY UNIT HOLDERS, IMPLEMENTING THE DLT STRUCTURE IN MAY 2025

| | INDICATIVE TIMING |
|------------------------------------------------------------------------------------|-------------------------------|
| Initial investor discussions and feedback sought | November – December 2024 |
| Various regulatory discussions (including ASIC, ASX, FMA, NZX, and tax rulings) | November 2024 – February 2025 |
| DLT proposal documentation released to Unit Holders | February / March 2025 |
| Unit Holder vote ^[1] and unit election process | April 2025 |
| Implementation of DLT structure if approved by Unit Holders | May 2025 |





Appendices

Additional property information



Investment properties AS AT 30 SEPTEMBER 2024

~NZ\$3.2B PORTFOLIO OF HEALTHCARE REAL ESTATE COMPRISING 36 INVESTMENT PROPERTIES AND 2,800+ BEDS

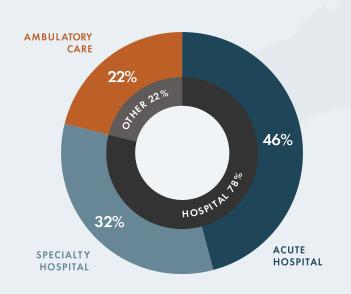
Western Australia (2) New South Wales (8) Queensland (2) ▶ Abbotsford Private Hospital ▶ Belmont Private Hospital ► Hirondelle Private Hospital ▶ Palm Beach Currumbin Clinic ▶ Marian Centre Hurstville Private Hospital ► Kellyville Private Hospital ▶ Linaard Day Centre Lingard Private Hospital Macarthur Health Precinct Stage 1 -GenesisCare Integrated Cancer & NORTHERN Health Centre Maitland Private Hospital QUEENSLAND Toronto Private Hospital WESTERN **AUSTRALIA** SOUTH AUSTRALIA **NEW SOUTH** WALES VICTORIA Victoria (7) ▶ 120 Thames Street ▶ Avive Clinic, Mornington Peninsula South Australia (3) ▶ Ekera Medical Centre ▶ Playford Health Hub - Retail & Carpark Epworth Camberwell ▶ Sportsmed Hospital, Clinic, Consulting & Office Epworth Eastern Hospital ▶ Tennyson Centre ▶ Epworth Rehabilitation Hospital South Eastern Private Hospital

Click on one of the underlined properties to see a fly-through of that property



~NZ\$2.2b Australian portfolio overview

PRECINCT FOCUSED PORTFOLIO WITH A DIVERSE TENANT BASE





SUBSECTOR DIVERSITY (BY VALUE)



PRIVATE HOSPITALS

- ▶ 17 hospitals (acute and specialty - mental health, rehabilitation)
- ▶ 5 hospital operators
- ▶ 78% of AUS portfolio value; 89% of AUS rent
- ► WALE: 21.3 years

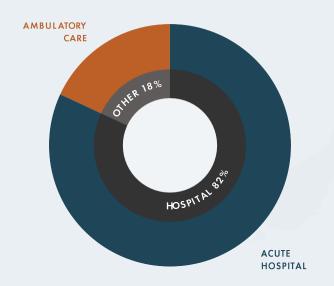


AMBULATORY CARE

- ▶ 5 assets, multiple tenants
- ▶ 22% of AUS portfolio value; 11% of AUS rent
- ► WALE: 9.9 years

~NZ\$1.0b New Zealand portfolio overview

STRONG GROWTH IN NZ PORTFOLIO OVER LAST 5 YEARS
REFLECTING POSITIVE CONDITIONS FOR PRIVATE OPERATORS





SUBSECTOR DIVERSITY (BY VALUE)



PRIVATE HOSPITALS

- ▶ 9 hospitals (all acute)
- ▶ 6 hospital operators
- ▶ 82% of NZ portfolio value; 85% of NZ rent
- ► WALE: 19.7 years



AMBULATORY CARE

- ▶ 5 assets, multiple tenants
- ▶ 18% of NZ portfolio value; 15% of NZ rent
- ► WALE: 10.0 years

Rent reviews undertaken in FY24

HIGH PERCENTAGE OF TOTAL RENT IS REVIEWED ANNUALLY WITH STRUCTURED REVIEW MECHANISMS

| FY24 | | | | | | |
|-------------|-----|-----|---------------------------|---------------------------|-------------------|-------------------------------------|
| | | # | Jun-23 Rent p.a. (NZD) | Jun-24 Rent p.a. (NZD) | Increase (NZD) | Annualised Growth (Stable currency) |
| Australia | AUS | 83 | 87,229,486 | 91,344,228 | 4,114,742 | 4.7% |
| New Zealand | NZ | 74 | 46,992,366 | 49,448,510 | 2,456,144 | 5.2% |
| Total | | 157 | 134,221,852 | 140,792,737 | 6,570,885 | 4.9% |

| | | # | Jun-23 Rent p.a. (NZD) | Jun-24 Rent p.a. (NZD) | Increase (NZD) | Annualised Growth (Stable currency) |
|----------|----------|-----|---------------------------|---------------------------|-------------------|----------------------------------------|
| CPI | CPI | 103 | 119,261,141 | 125,026,410 | 5,765,270 | 4.8% |
| Fixed | Fixed | 40 | 12,513,450 | 13,190,398 | 676,948 | 5.4% |
| Market | Market | 13 | 1,254,890 | 1,335,582 | 80,692 | 6.4% |
| Turnover | Turnover | 1 | 1,192,372 | 1,240,346 | 47,975 | 4.0% |
| Total | | 157 | 134,221,852 | 140,792,737 | 6,570,885 | 4.9 % |



Rent reviews have been completed for 157 leases in FY24



Structured reviews represent 98%¹ of leases by income



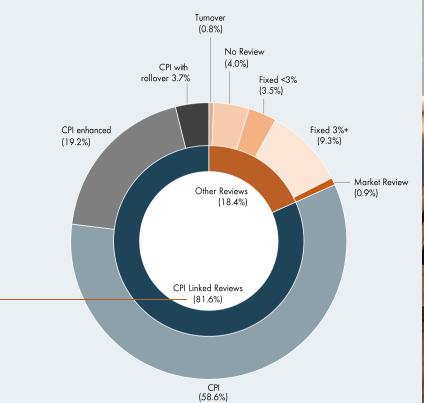
Significant uplift via market and CPI rent reviews

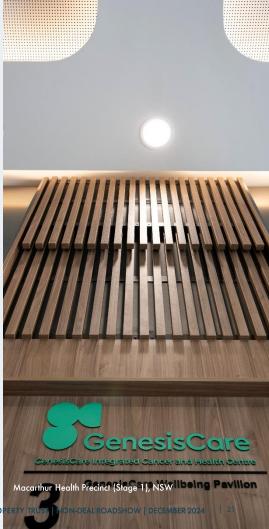
¹ Includes fixed percentage and CPI reviews

Rent review profile

BREAKDOWN OF PORTFOLIO CPI REVIEWS

| TYPE | % |
|-----------------------|-------|
| CPI - Un-Capped | 23.1% |
| CPI - 2% Cap | 0.1% |
| CPI - 2.5% Cap | 1.5% |
| CPI - 3% Cap | 4.1% |
| CPI - 3.5% Cap | 1.7% |
| CPI - 4% Cap | 42.9% |
| CPI x 1.5 - 2.5% Cap | 6.0% |
| CPI x 1.5 - 3% Cap | 16.9% |
| CPI x 1.75 - 4% Cap | 3.5% |
| Greater of CPI and 1% | 0.2% |





Core portfolio metrics

5 YEAR TRENDS HIGHLIGHT PORTFOLIO STRENGTH AND UNDERPIN LONG-TERM PERFORMANCE



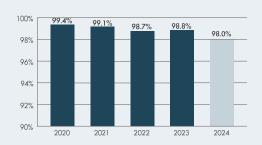
Long-term track record of maintaining

>98% Occupancy

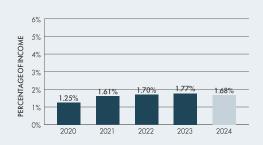


High degree of confidence that future expiries will be renewed or replaced with new tenants in advance of expiry

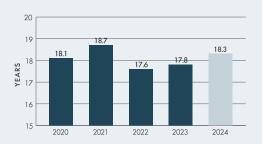
OCCUPANCY



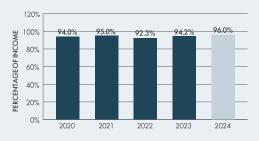
AVERAGE 10 YR LEASE EXPIRY1



WALE



TOTAL INCOME SUBJECT TO STRUCTURED RENT REVIEWS



Reflects the average % of total portfolio income that expires over the next 10 years



Additional development information





Current and potential New Zealand development pipeline in key healthcare precincts with growing populations



Appendices Current structure vs. proposed DLT RDX, QLD VITAL HEALTHCARE PROPERTY TRUST | NON-DEAL ROADSHOW | DECEMBER 2024

Current structure vs. proposed DLT

THE PROPOSED DLT STRUCTURE ALLOWS UNIT HOLDERS TO RETAIN THE SAME ECONOMIC EXPOSURE TO VITAL WHILST ENHANCING THETAX, GOVERNANCE AND LISTING ARRANGEMENTS FOR THE BENEFIT OF ALL UNIT HOLDERS

| | VITAL TODAY | NZX UNIT HOLDER IMPACT | VITAL NZ | VITAL AU |
|-------------------|-----------------------------------------------------|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Listing | Primary NZX | IMPROVED | Primary NZX | Primary ASX |
| Index | NZX50 | IMPROVED | NZX50 | Free float market capitalisation above the current threshold for ASX300 inclusion |
| Governance | Single board and trans-Tasman management team | UPDATED | Board of NZ Manager and Board of Vital AU Responsible Entity to retain an Independent Chair and majority Independent board Continue to have the same management team Required to comply with ASX and NZX listing rules and change to an Equity Issuer | |
| Tax structure | PIE tax treatment | IMPROVED | PIE tax treatment NZ investors can continue to benefit from the PIE regime | Managed Investment Trust ("MIT") regime (1) Investors can benefit from the MIT regime (including tax pass through tax treatment) |
| Economic exposure | Assets across Australia and NZ | UNCHANGED | Assets acr | oss Australia and NZ |

⁽¹⁾ NZ Unit Holders that hold Vital AU units will be subject to tax on the investment in Vital AU units under the Foreign Investment Fund (FIF) regime, which includes the fair dividend rate (FDR) method, or taxed on distributions if the FIF regime does not apply.

Disclaimer

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All references to \$ are to New Zealand dollars unless otherwise indicated.

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December 2024

