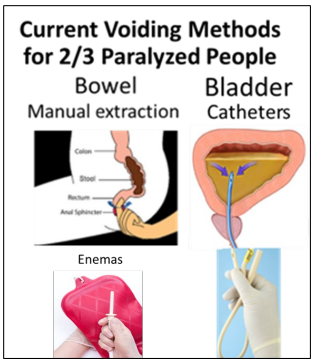
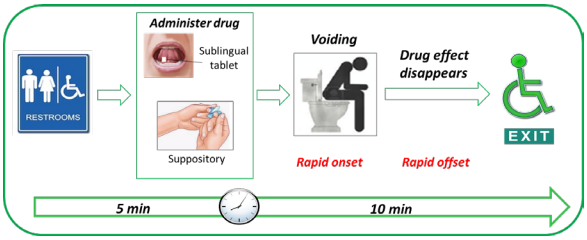
Dignify Therapeutics, LLC
2 Davis Drive
Research Triangle Park, NC 27709

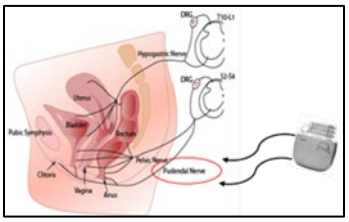
DIGNIFY THERAPEUTICS, LLC



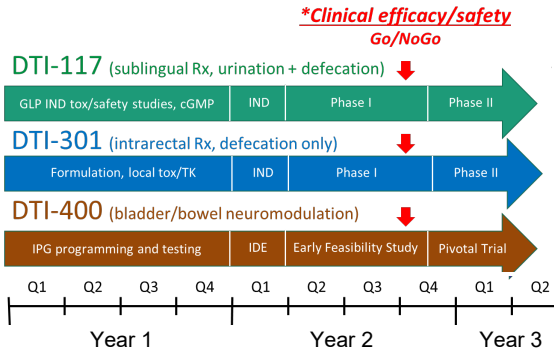
- **Mission statement:** Dignify Therapeutics develops novel drug and medical device therapies to restore voluntary control of bladder/bowel function and eliminate manual bowel programs, bladder catheters, and adult diapers.
- **Severe, unmet medical need:** Bladder and bowel dysfunction are terrible problems for people with neurologic injury or disease (2 MM) and diabetic neuropathy (4 MM). Inability to control voiding is the number 1 reason for institutionalization of the elderly (1 MM). NIH, Veterans Administration Medical Centers, and patient advocacy groups strongly support our programs. Fast-Track FDA designations are expected. No FDA-approved competition exists for any Dignify program (i.e. all are "first-in-indication" therapies).
- **Reimbursement, pricing, and market opportunity:** 3rd party analysis of defecation drug products indicates Tier 2 placement, $7,000-8,000/year price point, and ~ $1B/year peak US sales for each with COGS < 10% of sale price. Device program estimates $500-$800K/year.
- **Highly de-risked, rapid, inexpensive clinical development:** Clinical evidence supports all therapies, and translational animal models in SCI, diabetes, and aging are highly predictive of clinical responses. Clinical proof-of-concept (POC) is immediately established in Phase 1 trials for drugs and Early Feasibility Studies for the device, which occurs within 2 years of funding for 3 of 4 programs. Clinical protocols are written; and investigators, sites, and CROs are engaged for patient studies, which occurs within 2 years of funding. FDA-approved partners engaged to provide drug substances, drug products, and devices for clinical development. Simple phase 3 trials for drugs and pivotal trials for devices use inexpensive diary and QoL.
- **IP:** Issued patents for 3 programs.
- **On-demand, rapid-onset, short-duration, drug-induced voiding therapy:** There are no safe, efficacious, and convenient drug therapies available for inducing micturition or defecation. Current treatments include bladder catheterization, manual bowel programs, enemas, laxatives, and diapers. Two distinct drug programs (DTI-117 – sublingual, DTI-301 - suppository) are ready for IND-enabling studies with positive pre-IND meeting with FDA for DTI-117, while DTI-301 is a drug with 505(b)(2) path to IND.



- **Medical devices:** Positive feedback was obtained at our Q-sub meeting from the FDA for DTI-400, which will be the first FDA approved neuromodulation device for neurogenic bladder/bowel dysfunction, and publications indicate it is superior to Medtronic sacral neuromodulation for non-neurogenic dysfunctions. DTI-600 preclinical efficacy studies are funded by the NIH.



- **Financial support:** $3.4 M seed (Founders, RA Capital, Eshelman Ventures); > $15 M non-dilutive grant funding (NIH).
- **Community support:** NIH, Veterans Administration Medical Centers, and patient advocacy groups.
- **Use of $20 M Series A Proceeds:** DTI-117 and DTI-301 drug programs through clinical POC in patients.



- **Team:** Edward Burgard, PhD, Pres
  Karl B. Thor, PhD, CSO
  Anthony Ditonno, Exec Chair
  Dan Ricca, PhD, VP Chem
  Lesley Marson, PhD, VP Preclin

Contact:
Karl Thor, PhD Chief Scientific Officer kthor@dignifytherapeutics.com
Ed Burgard, PhD President eburgard@dignifytherapeutics.com
www.dignifytherapeutics.com