

Microbion strategy validated through \$67M in non-dilutive grants and equity

\$27 million in non-dilutive grant funding to-date



\$10.3M from CARB-X to fund pre-clinical and clinical studies for treatment of cystic fibrosis-related lung infections

NIH provides unlimited, zero-cost preclinical/clinical services to Microbion as a CARB-X awardee



\$7.6M from Cystic Fibrosis Foundation to fund pre-clinical/clinical studies treating cystic fibrosis-related lung infections

\$2M – U.S. Navy/MTEC funding next study for treatment of biofilm-related infections, specifically moderate to severe diabetic foot ulcer infections



\$2M – National Institute of Health provided direct funding and research

\$5M - U.S. Army Institute of Surgical Research funded first clinical study for orthopedic infection treatment, Congressionally Directed Medical Research Program funded a second clinical study for orthopedic infection treatment

\$40 million in equity investments to-date



\$25M Series A investment by Quark Venture and GF Securities through the Global Health Sciences Venture Fund in 2016



\$2M cash investment by 5N Plus; also providing up to \$2M supply of drug substance (GMP or R&D) and in-kind manufacturing development services through strategic partnership established in January 2021

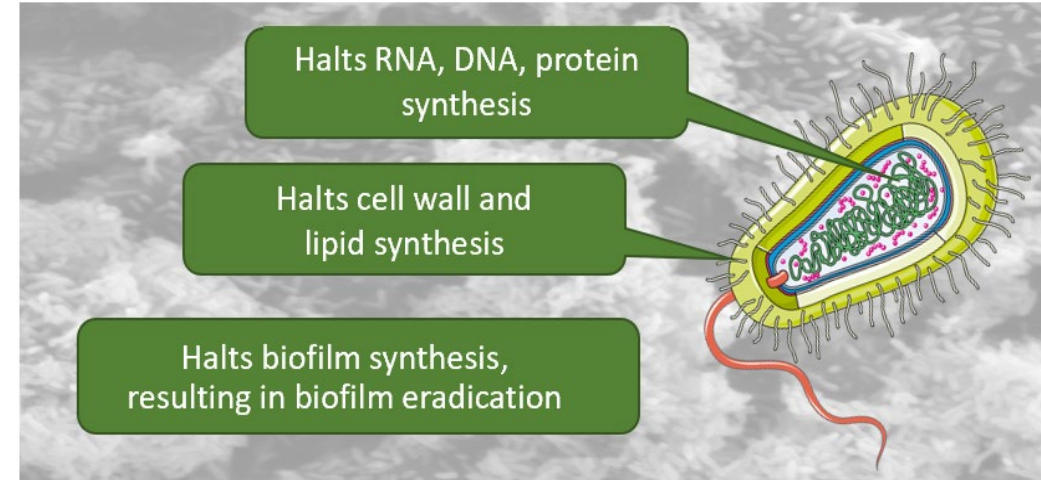


5N PLUS

\$2.5M investment by Growing Impact Ventures in March 2021

Pravibismane: First-in-class with a unique antimicrobial strategy to overcome multi-drug resistant infections

- ❑ First in a new class (-bismane) of synthetic compounds; structurally-unrelated to all other known antibiotics
- ❑ Novel mechanism of action
- ❑ Unprecedented ability to prevent and eradicate bacterial biofilms
- ❑ Broad spectrum potency against MDR bacterial, mycobacterial, *and* fungal pathogens (incl. *C. auris*)
- ❑ Extremely low resistance and cross-resistance potential
- ❑ Safe and well-tolerated in over 325 humans across five clinical trials



Gram-positive Aerobes	
Organism (phenotype) (N)	MIC range (µg/mL)
MRSA (57)	0.5*
CA-MRSA (50)	0.5*
<i>E. faecalis</i> (VAN ^R) (53)	1*
<i>E. faecium</i> (VAN ^R) (52)	2*
<i>S. pneumoniae</i> (MDR) (6)	0.25 – 1.0
<i>S. pyogenes</i> (Macrolide ^R) (4)	0.03 – 0.5
<i>S. agalactiae</i> (Macrolide ^R) (5)	0.25 – 1.0

Gram-Negative Aerobes	
Organism (phenotype) (N)	MIC range (µg/mL)
<i>A. baumannii</i> (MDR) (15)	0.5 – 1.0
<i>E. coli</i> (MDR) (15)	0.5 – 2.0
<i>K. pneumoniae</i> (MDR) (19)	1.0 – 8.0
<i>P. aeruginosa</i> (MDR) (31)	2
<i>N. gonorrhoeae</i> (MDR) (16)	≤0.06 – 0.12

Pravibismane demonstrates potent activity against drug resistant priority pathogens and roughly equivalent potency against both planktonic MDR bacteria and the biofilms they produce

Pravibismane MIC generally $\leq 2 \mu\text{g/ml}$ in MDR *P. aeruginosa*, including carbapenem-R

Isolate	Resistance / β -lactamase Type	MIC ($\mu\text{g/ml}$)					
		Pravibismane	CAZ	CAZ/CLAV	MEM	LVX	AMK
CDC 231	KPC/OXA	2	>64	>64/4	>8	>8	8
CDC 230	VIM/OXA	0.5	64	32/4	>8	8	>64
CDC 241	IMP/OXA	4	>64	>64/4	>8	8	32
CDC 246	NDM/OXA	2	>64	>64/4	>8	>8	>64
CDC 250	NDM/OXA	2	>64	>64/4	>8	>8	>64
CDC 516	KPC/AmpC	1	64	64/4	>8	0.25	2
CDC 518	KPC/AmpC	1	32	32/4	>8	>8	16

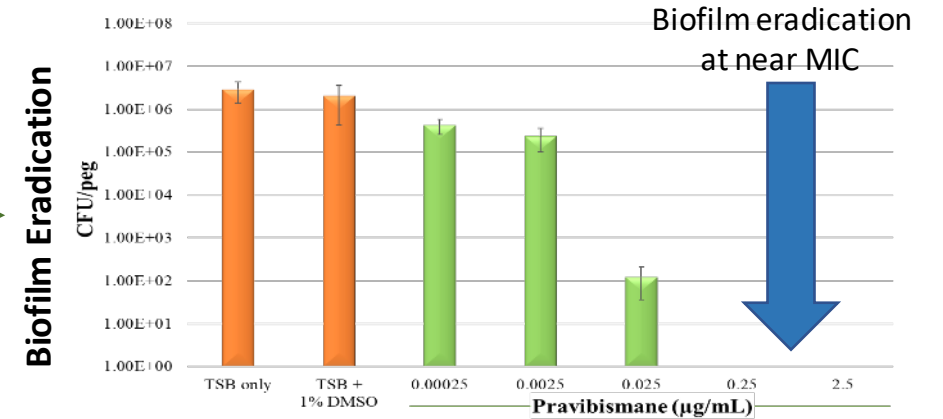
CDC = Centers for Disease Control and Prevention; KPC = *K. pneumoniae* carbapenemase; NDM = New Delhi metallo- β -lactamase; IMP = metallo- β -lactamase; VIM = metallo- β -lactamase; OXA = class D carbapenemases; AmpC = class C cephalosporinase; CAZ = ceftazidime; CLAV = clavulanate; MEM = meropenem, LVX = levofloxacin; AMK = amikacin

Pravibismane demonstrated equipotent MIC/MBEC activity against MDR *P. aeruginosa*

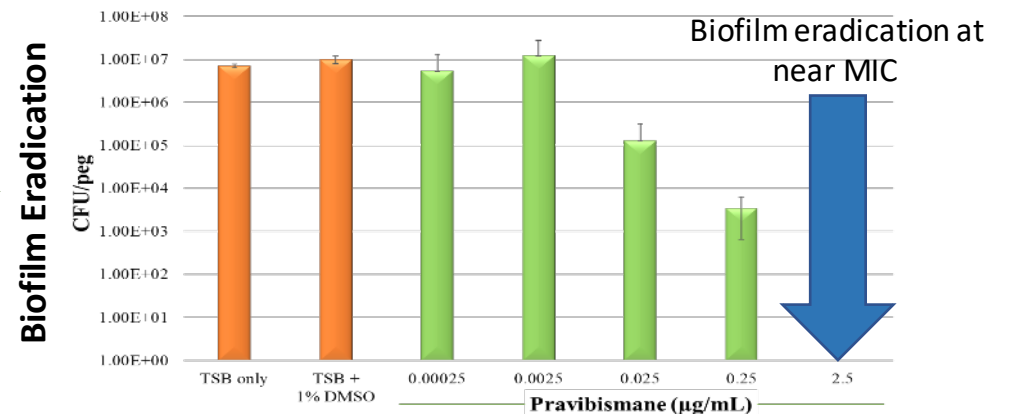
ID#	Type	MIC ($\mu\text{g/ml}$)
MR14	MDR CF-isolate	1
AG14	aminoglycoside ^R CF-isolate	0.5

MIC study conducted at Seattle Children's Research Institute; MBEC study conducted at Univ of Washington.

Pravibismane treatment (24 hr) of 48 hr MDR *P. aeruginosa* (MR14) biofilms



Pravibismane treatment (24 hr) of 24 hr aminoglycoside^R *P. aeruginosa* (AG14) biofilms



Microbion's targeted delivery approach reduces the risk of resistance development while addressing unmet medical needs of chronic, AMR infections

Chronic Wound Infections

Topical Pravibismane



Phase 2

- Moderate and severe Diabetic Foot infections
 - FDA Fast Track and QIDP designations
- Wound size and amputation reduction efficacy signal

Orthopedic Infections

Local Pravibismane



Phase 2

- Orthopedic device infections
 - FDA Fast Track and QIDP designations
- Reduction of treatment failure efficacy signal

Pulmonary Lung Infections

Inhaled Pravibismane



Anticipated to be clinic-ready Q4 2021

- CF and nontuberculous mycobacteria (NTM) lung infections
- FDA Orphan Drug for CF lung infections, Fast Track and QIDP designations
 - GLP-tox near completion

QIDP = Qualified Infectious Disease Product