Imbrium Therapeutics L.P.

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Disclaimer

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The results of early clinical trials may not be indicative of the results of later clinical trials. Moreover, nonclinical and clinical data are often susceptible to varying interpretations and analyses, and many companies that have believed their product candidates performed satisfactorily in nonclinical and clinical trials have nonetheless failed to obtain marketing approval of their products from the FDA or other regulatory bodies.

What We'll Cover

- About Imbrium
- Imbrium Pipeline
  - Sunobinop
  - Tinostamustine
- Upcoming Milestones
- Partnership Opportunities
- Contact Information

About Imbrium

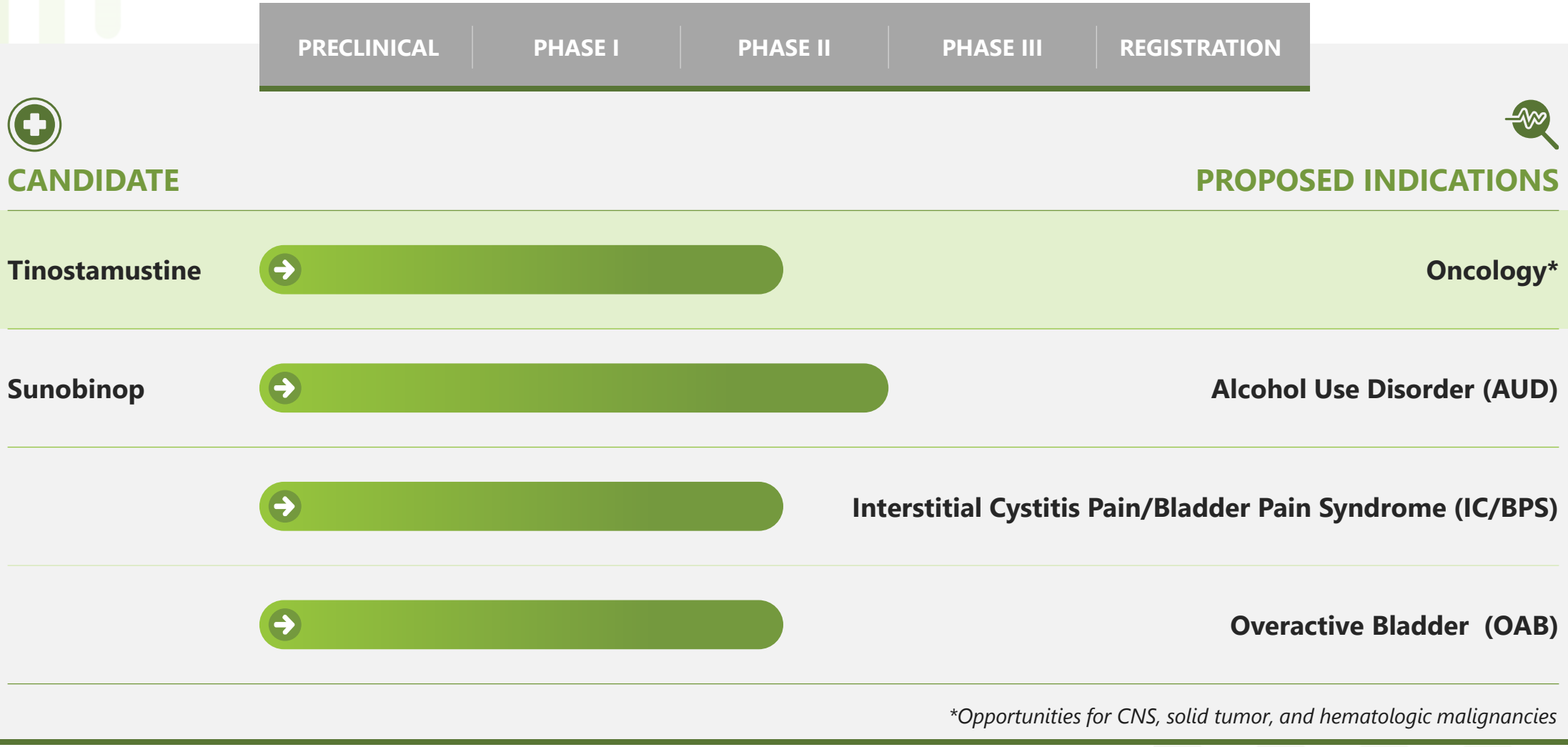
Company Overview

- A clinical-stage biopharmaceutical company dedicated to empowering better health through the development of important new therapeutics
- Developing a novel pipeline of potentially first-in-class medicines for multiple indications
- Actively collaborating with industry and academic partners to identify and advance solutions for serious conditions

Our Focus

- **Non-opioid approaches in pain management**
- **Substance use disorders**
- **Oncology**
- **Central nervous system (CNS) disorders**
- **Genitourinary disorders**

Imbrium Pipeline



Sunobinop Potential Indications

What is Sunobinop

First-in-class, investigational new chemical entity that potently and selectively activates NOP receptors after oral administration[1]

AUD

- Chronic, relapsing disorder causing impaired ability to control alcohol use, affecting 30 million individuals[2]
- Increased risk of cancers, liver diseases, brain damage, sleep problems, depression, etc.
- Treatments have limited efficacy and do not address insomnia that may interfere with recovery

IC/BPS

- Chronic disorder affecting up to 8 million women[3] and 4 million men[4]
- Causes bladder pain, discomfort and pressure; frequent and urgent need to urinate (day and night)[5]
- Treatments limited with respect to availability, efficacy, tolerability and long-term compliance

OAB

- Chronic disorder affecting 36 million U.S. adults[6]
- Causes sudden and/or frequent urge to urinate that may be hard to control – day and night
- Existing treatments with limited mechanisms do not work for many

1) Whiteside et al, 2023 2) Choi et al, 2024 3) Berry et al, 2011 4) Suskind et al, 2013 5) Kanter, 2017 6) Reynolds, W et al., 2016

Abbreviations: NOP: nociceptin/orphanin-FQ | AUD: Alcohol Use Disorder | IC/BPS: Interstitial Cystitis / Bladder Pain Syndrome | OAB: Overactive Bladder

Multiple Studies Have Shown Sunobinop Helps Improve Sleep Parameters

Findings in patients with DSM-V insomnia disorder (Phase 1)[1]

- **Well-tolerated** in patients with insomnia disorder; somnolence most frequent TEAE
- Dose-dependent (0.5-10 mg), statistically significant and clinically meaningful **increase in sleep efficiency** compared to placebo
- Dose-dependent, statistically significant and clinically meaningful **improvement in onset** (10 mg) **and maintenance measures of sleep** (0.5-10 mg) compared to placebo

Findings in patients with insomnia who are in recovery from AUD (Phase 2)[2]

- **Well-tolerated** with 3 weeks of daily dosing at bedtime; most frequent TEAE was somnolence (5.3% at 1mg and 25.6% at 2 mg)
- **Improved sleep maintenance and reduced nighttime awakenings** observed with 3 weeks of daily dosing
- Across all studies to date the most common TEAE was **somnolence**

1) *Zhou, M. et al. 2020;* ***2)*** *Sessler, N., et al. 2022*

Abbreviations: DSM-V: 5th edition of the Diagnostic and Statistical Manual of Mental Disorders | TEAE: Treatment Emergent Adverse Event | AUD: Alcohol Use Disorder

Sunobinop Development Snapshot

AUD: Phase 2
Initiated November 2024

- ~200 adult participants with moderate or severe AUD
- Designed to assess craving and alcohol consumption
- Preclinical studies show activation of NOP in AUD models reduces reinforcing and motivating effects of alcohol.[1,2]
- Results expected in 2026

IC/BPS: Phase 1b
Conduct Complete April 2025

- 47 female patients with IC/BPS
- Designed to assess impact on disease symptoms (e.g., bladder pain and discomfort, urinary urgency and frequency)
- Results available in Q3 2025

OAB: Phase 1b
Study Results Available

- 51 female patients with OAB
- Results showed when comparing sunobinop to placebo:
  - Less need to urinate urgently
  - Less need to urinate frequently
  - Fewer incidents of incontinence
- No serious adverse events reported; most common adverse event observed was UTI

1) Ciccocioppo et al, 1999 2) Kuzmin et al, 2003

Abbreviations: AUD: Alcohol Use Disorder | IC/BPS: Interstitial Cystitis / Bladder Pain Syndrome | OAB: Overactive Bladder | NOP: nociceptin/orphanin-FQ | UTI: Urinary Tract Infection

Sunobinop Presents a Potentially Strong Value Proposition in Areas of Unmet Need

AUD

- **Novel, first-in-class mechanism:** potential to be first new modality for AUD in almost 20 years
- **Unique approach intended to address alcohol craving, consumption, and sleep issues associated with AUD**
- National Institute of Drug Abuse identified NOP receptor agonists as **10 most wanted pharmacological mechanisms** to treat **substance use disorders**[1] (future potential expansion)

OAB and IC/BPS

- Sunobinop is a **novel** and **first in class,** investigational oral agent that **targets the sensory nerves** in the bladder to affect **micturition** and **pain** in addition to reducing **nocturia** in OAB and IC/BPS patients

1) Rasmussen K et al, 2019

Abbreviations: AUD: Alcohol Use Disorder | NOP: nociceptin/orphanin-FQ | IC/BPS: Interstitial Cystitis / Bladder Pain Syndrome | OAB: Overactive Bladder

If Approved, Sunobinop Could Have Significant Revenue Potential

Combined revenue opportunity[1]

~$1.3B Globally for AUD and related sleep disorders

&

~$5.4B Globally for IC/BPS and OAB

Initial U.S. launch expected in **2030**

with patent exclusivity up to *(indication dependent)* **2044**

1) *Internal estimates*

Abbreviations: AUD: Alcohol Use Disorder | IC/BPS: Interstitial Cystitis / Bladder Pain Syndrome | OAB: Overactive Bladder

Tinostamustine Proposed Indication & Unmet Need

What is Tinostamustine

First-in-class, investigational new chemical entity that combines two potentially synergistic mechanisms of action, bifunctional alkylating activity and pan histone deacetylase inhibition

Currently under investigation in patients with glioblastoma multiforme (GBM)

GBM

- 14,000 patients diagnosed with GBM in the U.S. every year
- Highly aggressive brain cancer with one of the highest unmet medical needs in oncology
- Most patients die from progressive disease with a median overall survival of 14.6 months with current treatment[1]
- Majority of patients experience recurrence with standard of care; novel first line therapies with improved survival are needed, particularly for patients with MGMT unmethylated tumors

1) *Stupp, 2005*

Abbreviations: GBM: Glioblastoma | MGMT: O6-Methylguanine-DNA Methyltransferase

Studies Show Tinostamustine Improved Survival in GBM; on Track for Accelerated Development

Glioblastoma Multiforme (Phase 1)

- Tinostamustine was shown to improve survival in two studies of difficult to treat newly diagnosed MGMT unmethylated patients when used in adjuvant setting

GBM AGILE Initiation
Planned Q3 2025

- Planned future evaluation in GBM AGILE
- Premier, fast, efficient and registration ready, Phase 2/3 adaptive clinical trial for glioblastoma patients

GBM AGILE
Adaptive Global Innovative Learning Environment

Combination therapies with Checkpoint Inhibitors (CPI)

- Disease stabilization and objective responses in patients with advanced melanoma SOC
- Improved objective responses in R/R HL in patients with prior CPI suggest opportunity for combination

R/R Hodgkin's Lymphoma, other tumors

- Promising signals in patients with R/R HL that failed multiple other treatments
- Objective responses in R/R CTCL, OvC, and metastatic melanoma

Abbreviations: CPI: Checkpoint Inhibitor | CTCL: Cutaneous T Cell Lymphoma | GBM: Glioblastoma | HL: Hodgkin Lymphoma | MGMT: O6-Methylguanine-DNA Methyltransferase | OvC: Ovarian Cancer | R/R: Relapsed/Refractory | AGILE (Adaptive Global Innovative Learning Environment) | SOC: Standard of Care

IMBRIUM THERAPEUTICS

Tinostamustine Presents a Potentially Strong Value Proposition in an Area of High Unmet Need

Novel, first-in-class mechanism	Potential to be first new chemotherapeutic to treat GBM in ≥ 20 years
Notable disease response in tumors with active DNA repair	Despite multiple programs in development, only three assets have reported median OS > 16 mo. in MGMT unmethylated GBM patients
Planned regulatory path with expedited development	GBM AGILE; a premier, registration ready, Phase 2/3 adaptive clinical trial; potential for orphan designation
Lifecycle opportunities	Potential for tinostamustine to be concomitantly used with checkpoint inhibitors for other tumors

Abbreviations: GBM: Glioblastoma | MGMT: O6-Methylguanine-DNA Methyltransferase | OS: Overall Survival

If Approved, Tinostamustine Could Have Significant Revenue Potential

Tinostamustine glioblastoma revenue opportunity[1] peaking at

~$1.5B

In the US

Expected U.S. Launch in

2031

with patent exclusivity up to

2044

1) *Internal estimate*

Upcoming Milestones

Sunobinop

AUD:
Phase 2 study initiated evaluating the effect of sunobinop on craving and drinking

Topline results 2026

IC/BPS:
Phase 1b results Q3 2025

OAB:
Final clinical study report Q2 2025

Tinostamustine

GBM:
Planned future investigation in **GBM AGILE**

Premier, registration ready, Phase 2/3 adaptive **clinical trial** for glioblastoma patients

Potential Q3 2025 Study Initiation

GBM AGILE
Adaptive Global Innovative Learning Environment

Abbreviations: AUD: Alcohol Use Disorder | IC/BPS: Interstitial Cystitis / Bladder Pain Syndrome | OAB: Overactive Bladder | GBM: Gliobastoma

Partnership Opportunities

All proposed indications for sunobinop and tinostamustine are open to partnering

Sunobinop

Global or regional rights available for partnership

Tinostamustine

U.S. rights available for partnership

Thank you

For more information contact:

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