

Platform Therapy for Neurodegenerative Disease
TBI | Stroke | Alzheimer's Disease

Cerebral Protection & Neurologic Repair

LG3: Designed by Evolution *Developed by Stream*

September 2025

Non-Confidential Deck

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Impact of Traumatic Brain Injury

TBI - Urgent Unmet Medical Need

- No approved pharmaceutical treatment to accelerate recovery from TBI
- Children aged (0-4) and adults > 75 have highest rates of TBI Related hospitalization and death
- Traumatic brain injury is perhaps the best established environmental risk factor for dementia
- Road Traffic Accidents is the leading cause of TBI
- >\$4 Trillion Direct and indirect economic burden of TBI

>2.8M Traumatic Brain Injuries (TBI) annually in US *

69k TBI related deaths annually in US *^

282k hospitalized for TBI related injuries in US *^

69M annual global incidence of TBI**

- * PLOS One May 9, 2019 https://doi.org/10.1371/journal.pone.0216743
- *^ CDC https://wonder.cdc.gov/mcd.html
- ** JNS 2018; 130(4): 1080-1097

2-4X increased risk of dementia after mod/severe TBI*

5.3M individuals living with disability from TBI in US**

>200k veterans living with TBI related disability in US #

*Arch. Neurology: 2012: 69(10):1245-1251

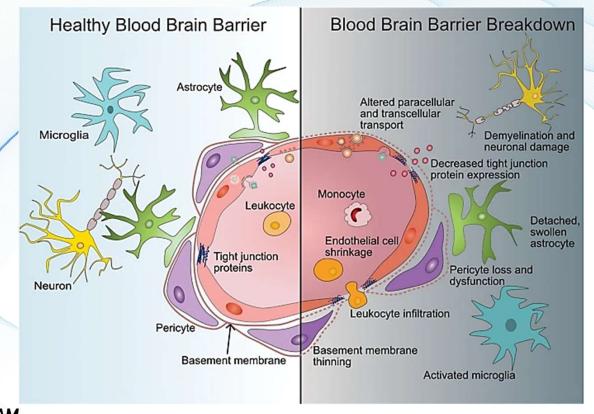
*^Arch. Phys Med Rehab 2003 84(2) 242-248

#,Matney C, Bowman K, Berwick D, National Academies Press (US); 2022 Feb 1.



The Challenge: Blood-Brain Barrier Breakdown in TBI

Induces multiple pathologic effects in TBI and across other neurodegenerative diseases



INITIAL INDICATIONS

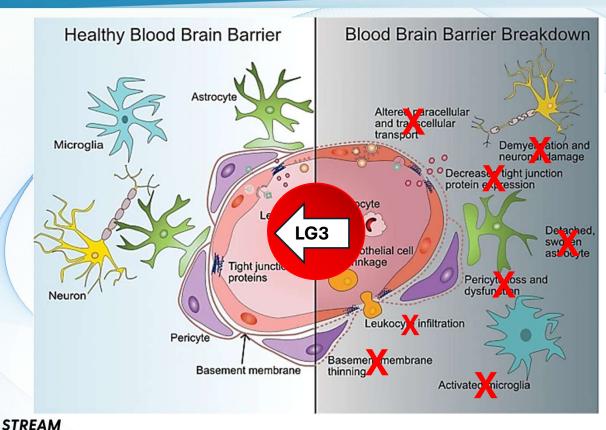
- Traumatic brain injury
- Acute ischemic stroke
- Alzheimer's disease
- Other neurodegenerative diseases



Source: Knox EG, et al. The blood-brain barrier in aging and neurodegeneration. Mol Psych 2022; 27(6):2659-2673

Stream's Solution: Perlecan Domain V LG3 ("LG3")

Reverses blood-brain barrier breakdown and restores homeostasis to the entire neurovascular unit



BIOMEDICAL

- Seals the BBB
 - Restores endothelial tight junctions
 - Mobilizes pericytes
- Reduces tissue inflammation
- Anti-apoptotic for neurons
- Induces neurogenesis
- Induces angiogenesis
- Upregulated only following injury,
 - hypoxia, mechanical trauma
- Binds to upregulated integrin receptors
- Crosses the BBB
 - through active transport (caveolin)

Stream Scientists Developed LG3 To Generate A Novel, Powerful, Disruptive, 1st in class Neuroprotective Agent Stream has exclusive intellectual property rights to LG3 and other matrikines

Translational Stroke Research (2023) 14:941–954 https://doi.org/10.1007/s12975-022-01089-2



RESEARCH

Recombinant Human Perlecan DV and Its LG3 Subdomain Are Neuroprotective and Acutely Functionally Restorative in Severe **Experimental Ischemic Stroke**

Ifechukwude Joachim Biose¹ · Ibolya Rutkaj^{1,2} · Bryan Clossen³ · Gary Gage³ · Kenneth Schechtman⁴ · H. Davis Adkisson IV³ Gregory J. Bix^{1,2,5}

Received: 13 June 2022 / Revised: 1 September 2022 / Accepted: 20 September 2022 / Published online: 12 December 2022 © The Author(s) 2022

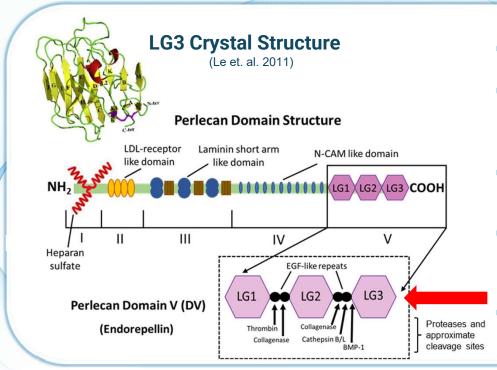
Despite recent therapeutic advancements, ischemic stroke remains a major cause of death and disability. It has been previously demonstrated that ~85-kDa recombinant human perlecan domain V (rhPDV) binds to upregulated integrin receptors (α2β1 and $\alpha5\beta1$) associated with neuroprotective and functional improvements in various animal models of acute ischemic stroke.





LG3: An Endogenous Repair Protein for the Brain and Vasculature

Designed by Evolution, Developed by Stream



- New therapeutic class: Vascular Matrikines
- 550M year-old protein highly conserved throughout all species
 - Fundamental to all vascular systems
- Elevated in the brain only following injury or ischemia
 - Critical role in the repair of the CNS/brain vasculature
- Endogenously produced in the brain from perlecan
 - Stream manufactured via microbial expression at Cytovance Biologics
 - Clinical-stage asset: Phase 1 NHV Study Q2 2026
 - GMP Manufacturing/GLP Tox studies complete



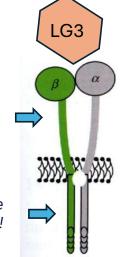
LG3 Targets Upregulated Integrin Receptors

Affects multiple NVU cell types - Paracrine signaling distance ≤25 microns

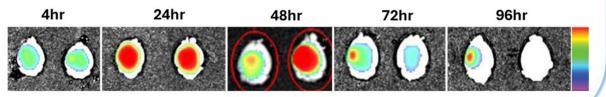
LG3 activates pro-survival pathways

Integrins are heterodimeric cellsurface molecules that mediate cell-ECM interactions

Interactions with all cell types of the neurovascular unit!



- Homes to, engages, and persistently occupies integrin receptors upregulated in response to tissue injury (see data below)
- Mediates cell survival and/or neurotrophic factor production via integrin-mediated signaling
- Net effect is restoration of NVU homeostatic function
- Integrin R-expressing cell types: vascular endothelial cells, astrocytes & microglia, pericytes, and neurons

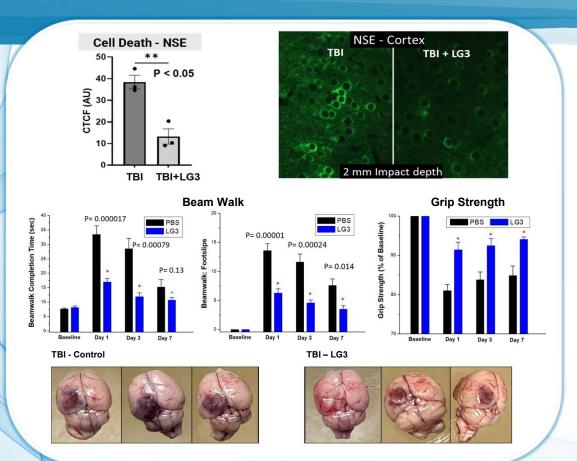


In-vivo imaging (IVOIS) of fluorescent-LG3 in mouse brains following stroke (left hemisphere)



LG3 Effective in Traumatic Brain Injury

Dramatic effects in multiple preclinical models and studies



- Improves Function & Saves Brain following impact traumatic bain injury (TBI)
- Highly efficacious with a single dose
- Reduces cell death (NSE quantification)
- Rapidly improves functional performance
 - Beam walk/coordination
 - 4-limb grip strength
- Improves BBB integrity in impact region
- Improves function in <u>repeat mild blast</u> <u>injury</u> (data not shown)

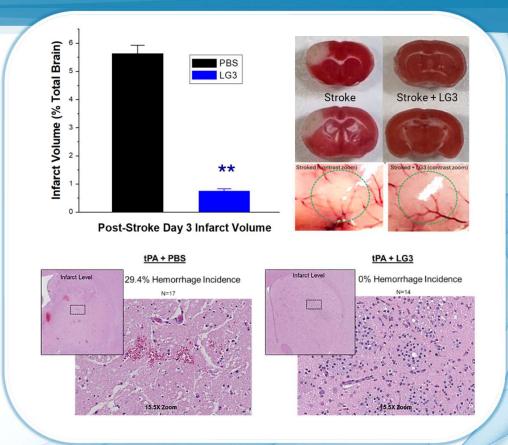




LG3: Demonstrates Efficacy in Acute Stroke and tPA-induced Hemorrhage

- Highly efficacious neuroprotection with single dose
- Directly homes to site of injury
- Reduces mortality & brain damage preclinically
- Improves tPA (tissue plasminogen activator) safety by reducing hemorrhage risk
- Compatible with commonly prescribed medications
- Multiple Indications: Positive data in preclinical TBI and Alzheimer's studies
- >25 Patents issued with global coverage



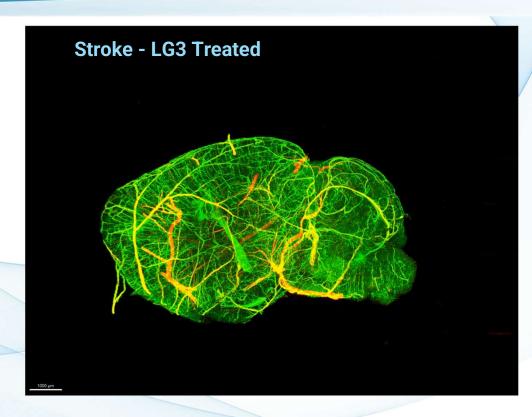


Biose et. al., 2022. Translational Stroke Res; Stream internal data. Preclinical observations and data- (top) young adult male mice, 60' dMCAO; (bottom) aged M&F rats, 90' MCAO.

LG3 Restores Stroke-Injured Vasculature

A single dose after reperfusion provides profound clinical benefit



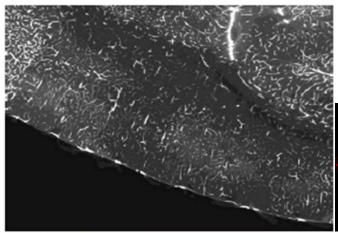




LG3 Restores Stroke-Injured Vasculature

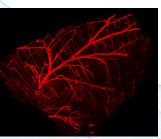
A single dose after reperfusion preserves vascular network in infarct region

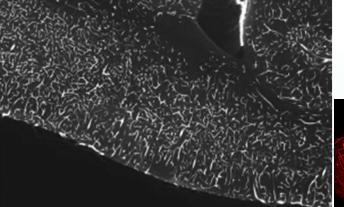
Stroke - Saline Treated



Vessel Density: 4.20%

Penumbral Core Focus





Stroke - LG3 Treated

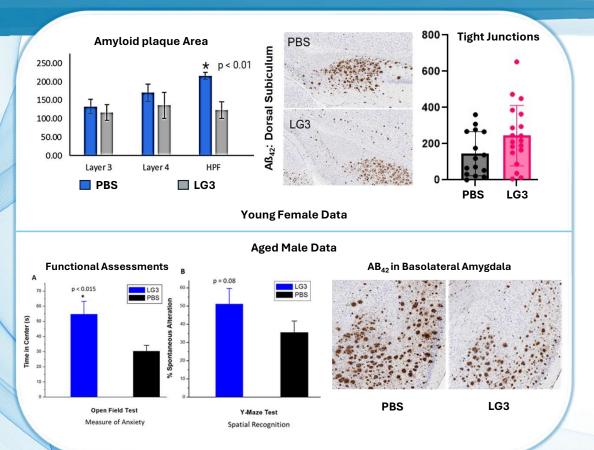
Penumbral Core Focus

Vessel Density: 7.11%



LG3 Effective in Alzheimer's Model

Consistent with neurovascular hypothesis of cause of AD

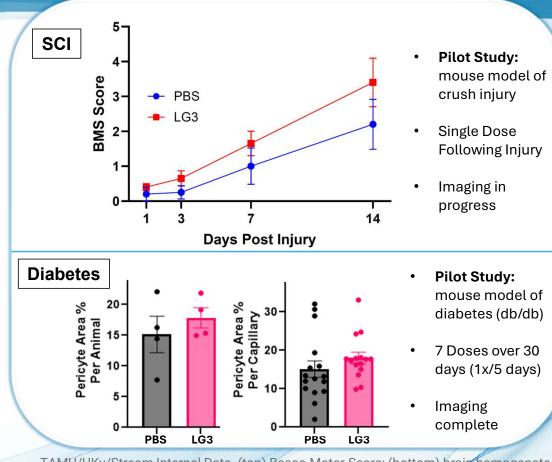


- Reduces Alzheimer's (AD) plaque burden in key brain structures
 - **Brain-wide effect in Young Females**
 - Greatest effect in Hippocampus
 - Amygdala specific in Aged Males
- Improves blood-brain barrier integrity (tight junction protein expression)
- Improves Alzheimer's-related behavioral and functional deficits
 - Rescues exploratory behavior
 - Improves spontaneous alternation
 - Trend toward improved object memory
 - (small n= for memory assessments)
- Reduces amyloid burden in amygdala



LG3 Effective in SCI and Diabetes Models

- Improves Limb Function & Weight Support following Impact Spinal Cord Injury (SCI)
- Accelerates Recovery Trajectory in SCI
- Enhances NVU Function via improved pericyte coverage of capillaries in Diabetes
- Repair and protection of NVU Function is reoccurring observation across indications
- Continuing research for these and other indications with serious unmet need





TAMU/UKy/Stream Internal Data. (top) Basso Motor Score; (bottom) brain homogenate

Stream's Development Timeline and Capital Raise (\$10MM)

First-in-Man Studies (NHV and TBI) Establish Initial Safety and Efficacy



PRIOR TO 2020 \$4.1M - Angel Investment

NHV = Normal human volunteer Phase 1 safety trial (N=40); 5 ascending doses TBI = Placebo controlled, randomized Phase 2 safety with preliminary efficacy (N=40)

- Completed Pre-IND Meeting for Stroke
- Completed Pre-IND Meeting for TBI
- Clinic-Ready, P1 trials starting Q1 2026
- Market Impact >\$10B
- Multiple Indications beyond TBI
- Potential Acquisition 2027+



TBI Clinical Trial: Establish Initial Safety / Efficacy

Trial Design

- Initial assessment of safety; pharmacokinetics; efficacy
- Design / Inclusion criteria:
 - Patients with moderate-to-severe TBI (Glasgow Coma Scale 3-12; one reactive pupil)
 - Placebo-controlled, N=40 (10 placebo; 30 drug). Single-ascending dose, 2 sites
- Dose regimen: n= 5 ascending dose-cohorts
 - 0.075 mg/kg; 0.15 mg/kg; 0.30 mg/kg; 0.60 mg/kg; 1.2 mg/kg
 - Single –dose administered in emergency room following diagnosis
- Outcome measures:

Safety and Tolerability: adverse events

Pharmacokinetics:

Efficacy:

- 1. Clinical outcomes: Extended Glasgow Coma Scale
- 2. Radiographic outcomes: BBB Permeability/Damage
 - DCE-MRI K-trans; baseline / post-treatment
- 3. Serum biomarkers: neuroprotective & anti-inflammatory effects
 - 1. Nf-L, GFAP, PDGFRβ, TNF-α, pro-inflammatory cytokines...

Strengths of the Study

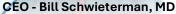
- Using highly sensitive outcome measures (DCE-MRI* scans, serum biomarkers)
- Single-dose intravenous administration
- Results will provide basis for additional studies in other neurodegenerative diseases, e.g., acute Ischemic stroke, Alzheimer's disease, etc.

*Ware et al, Neuroimage Clin. 2022 Oct 17;36: 10326



We are experts in drug development, translational neuroscience, protein biochemistry, and regulatory affairs







CSO - Davis Adkisson, PhD



Dir. Research - Bryan Clossen, PhD



Dir. Manufacturing - Seth Fisher, BA

Field-Leading Neurodegeneration Collaborators:

Bix Lab - Tulane University Medical Center

University of Kentucky Stroke Core

Hubbard Lab – University of Kentucky

McCreedy Lab – Texas A&M University





Soto Lab - University of Texas Health Science Center



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