RespireRx Pharmaceuticals Inc. CFO and CEO Issue Letter to Stockholders, Stakeholders, Strategic and Potential Strategic Partners and Other Interested Parties

Glen Rock, N.J., August 4, 2026 (Globe Newswire) – RespireRx Pharmaceuticals Inc. ("RespireRx" or the "Company"), a leader in the discovery and development of innovative and revolutionary treatments to combat diseases caused by disruption of neuronal signaling, today provides a progress and status report to its stockholders, stakeholders, strategic partners as well as other interested parties.

Dear Stockholders, Stakeholders, Strategic and Potential Strategic Partners and Other Interested Parties:

As we are in the third quarter of 2026, we would like to provide you with this open letter summarizing our accomplishments, goals and the challenges we currently see for the rest of 2026 and into early 2027. We last wrote a letter to you, our stockholders, stakeholders, strategic and potential strategic partners and other interested parties on November 20, 2025 and prior to that on February 10, 2025, and we issued three press releases on November 18th and 19th, 2025. Of course, we can provide no assurance that we will achieve our goals (see cautionary note about forward-looking statements near the end of this letter), but we believe that they are based on realistic assumptions and are reasonably achievable. We will certainly work hard on your behalf to try to achieve what we lay out here.

The Take Home Message – a Brief Summary

While we continue to experience a number of challenges, we also have had important successes, particularly with our science and preclinical development and have laid the groundwork for potential future successes in preclinical and clinical research and development operations. These are listed and described below in reverse chronological with the most current first and covers material items after November 20, 2025. Our main challenge continues to be access to adequate amounts of capital which we are in the process of solving with our placement agent via a 506(c)(3) offering of up to $45 million and via grant pre-applications and applications.

The 2026 BioPharma/Biotechnology/Life Sciences Macro-Environment

As seems to be the case every year, the market is divided into a small number of transaction types, namely, equity or equity-linked financings, M&A or strategic licensing/joint venture type transactions. In early 2026, investor capital was concentrated in a generally smaller number of larger size rounds. Early-stage companies attracted less capital compared to the comparable prior year period. Deals have been harder and take longer to close and syndicate formation has been difficult. While mid/late-stage companies are having a better experience with fund raising, investors are still being very selective by seeking de-risked assets with clear regulatory pathways and near-term value-added inflection points. The IPO market seems to be opening but the companies achieving success are more likely to do so if they have done a prior crossover round of substantive size to validate valuation and begin the process of building a book.

On the other hand, the strategic deal market has been more robust with large pharma entering earlier than in previous cycles. They seem to be moving to earlier-stage opportunities to avoid bidding wars for later stage assets and are currently seeking platforms more so than individual assets. They are also looking at

novel mechanisms and multi-indication opportunities. In addition to the common historical M&A or licensing/sublicensing structures, co-development structures and option deals are attractive.

Our Challenges

Capital raising has been particularly challenging. We are addressing that in part with a 506(c)(3) private placement with Castle Placement as our placement agent. That offering is up to $45 million across any or all three of our entities, RespireRx Pharmaceuticals Inc., ResolutionRx Ltd and EndeavourRx LLC. While the raise is intended to be an equity raise, we are also looking at strategic deal making and synthetic royalty structures.

We are also pursuing non-dilutive finance through grants, having received an award totaling $2,999,738 over two years, the first year of which is currently funding and which is described below. We have also filed two pre-applications which may result in an invitation to file full grant applications, one of which is for approximately $9.8 million for central sleep apnea in chronic opioid patients which was filed July 15, 2026, and the other for spinal cord injury for approximately $4.8 million which was filed on August 3, 2026. Both of these pre-applications were filed under the CDMRP (Congressionally Directed Medical Research Programs) and both are described in more detail below. On July 31, 2026 we signed an agreement to supply our drug candidate CX1739 to the sponsor of a spinal cord injury study that was awarded an approximately $1.8 million Department of Defense grant (this program was previously described in press releases and similar letters to stockholders et al). In September 2025, we filed an NIH SBIR grant application requesting $2.8 million for a clinical trial in ADHD patients.

Capital raising in Australia for our subsidiary ResolutionRx Ltd continues to prove difficult. While we have capital commitments in place, receipt of funding by ResolutionRx Ltd is subject to certain conditions precedent to closing that have not yet been met.

Our 2026 Accomplishments

We filed a pre-application on August 3, 2026 for a potential grant application under the CDMRP pursuant to a Program Announcement for the Defense Health Agency – Spinal Cord Injury Research Program Clinical Trial Award, Funding Opportunity Number: HT942426SCIRPCTA (https://cdmrp.health.mil/funding/pa/HT942526SCIRPCTA_GG.pdf). The potential award amount is up to $4.8 million. Our hypothesis is that our AMPAkine, CX1739 will produce a dose-dependent restoration of central respiratory drive in patients with spinal cord injury (SCI). The primary objective proposed is to determine the efficacy of acute CX1739 administration in reducing breathing impairments. There are four proposed secondary objectives which are (a) determine the dose-response relationship of CX1739 in treating respiratory insufficiency in cervical spinal cord injured patients, (b) evaluate the safety and tolerability of subchronic CX1739 administration in SCI patients, (c) characterize changes in depression ratings, motivation and pain scores; and (d) provide correlation analysis of the relationships and relative impacts of these disease symptoms with one another. We will be notified if we are invited to submit a full application on September 18, 2026. If invited, of which no assurance can be provided, we must submit the full application by November 12, 2026. Peer review would be in January 2027 and Programmatic review would be in March 2027. The CDMRP is located within the Department of Defense (DOD) which is referred to by its secondary title, the Department of War (DOW) in the application solicitation document.

On July 31, 2026, after a very long negotiation, we signed a consulting services and supply agreement with the Rehabilitation Institute of Chicago d/b/a Shirley Ryan AbilityLab (SRAL). Pursuant to this agreement, RespireRx will supply our AMPAkine CX1739, a copy of our investigator brochure, a right of reference to our investigational new drug application (IND) (which will need to be activated so that SRAL will be able to file their own IND) to commence a human clinical trial in spinal cord injured patients under a project

entitled “Safety and Efficacy of Ampakines for Improvement of Bladder functions in individuals with SCI” which is referenced as Award HT9425-24-1-0497 and CFDA #12.420 funded by the Department of Defense, Grant-000934), certain reports and analyses, consultation and review, among other things. RespireRx will receive fees associated with the achievement of certain milestones associated with RespireRx deliverables upon delivery. The agreement defines ownership of Background Intellectual Property, RespireRx Materials and Study Intellectual Property. SRAL granted RespireRx, subject to any United States government rights in any Study Intellectual Property, an exclusive fully paid-up, irrevocable, royalty-free, worldwide license to use the Study Intellectual Property for non-commercial and commercial purposes. SRAL retains the right to use the Study Intellectual Property for its own research, educational, and publication purposes. Subject to any United States government rights, SRAL shall own all data, results, observations and records generated and collected as part of the study and reserves the right to use such study data for its own research, educational, and publication purposes. SRAL granted to RespireRx subject to any United States government rights in any study data, an exclusive fully paid-up, irrevocable, royalty-free, worldwide license to use the study data for non-commercial and commercial purposes. RespireRx retains certain pre-publication manuscript review rights. The related grant was described in earlier press releases and in a Current Report on Form 8-K dated May 29, 2024.

We filed a pre-application on July 23, 2026 for a grant under the CDMRP pursuant to a Program Announcement for the Defense Health Agency – Peer Reviewed Medical Research Program Clinical Trial Award, Funding Opportunity Number: HT942426PRMRPCTA (https://cdmrp.health.mil/funding/pa/HT942526PRMRPCTA_GG.pdf). The potential award is $9,841,500. Our hypothesis is that acute administration of our AMPAkine CX1739 will produce dose-dependent restoration of central respiratory drive in patients with opioid-associated central sleep apnea (CSA), resulting in significant reductions in central apnea burden while preserving opioid-mediated analgesia and demonstrating an acceptable safety and tolerability profile. The primary objective is to determine safety, tolerability, efficacy and PK/PD (pharmacokinetic/pharmacodynamic) profile of acute and chronic (14 day) CX1739 administration in reducing CSA severity in adults with opioid-associated CSA versus placebo. There are two secondary objectives: (a) characterize the effects of CX1739 on respiratory physiology, oxygenation, and sleep architecture and (b) determine the dose-response relationship between CX1739 low dose, mid dose and high dose of CX1739 in reducing CSA severity with acute and chronic dosing. We will be notified if we are invited to submit the full application on August 24, 2026. If invited, of which no assurance can be provided, we must submit the full application by September 22, 2026. Peer review would take place November/December 2026 and Programmatic review in February/March 2027. The CDMRP is located within the Department of Defense (DOD) which is referred to by its secondary title, the Department of War (DOW) in the application solicitation document.

On July 15, 2026, we filed our Progress Report 1 with respect to our SBIR NIH NINDS award number 5R44NS143576-02 for the project/grant reporting period September 23, 2025-August 31, 2026. We previously described this grant in our press release of November 19, 2025. This award is now funding and we are approaching the end of the first year. We achieved some significant accomplishments and milestones and the program is moving forward on a daily basis. The first challenge met was to scale up the manufacture of KRM-II-81, our GABAkine epilepsy compound from academic bench scale to commercial scale capabilities. While this was difficult it was accomplished by our contract development and manufacturing organization (CDMO) and they have scaled from milligram quantities to gram quantities and now are beginning to run kilogram batches. The initially manufactured material and the second larger batch of this material has been provided to our pre-clinical contract research organization (CRO) which has accomplished several milestones. Development of quality-control analytical methods is underway and are progressing well. Animal in-life PK studies have been completed in two species. Samples have been frozen and analysis is pending completion of analytical method development mentioned in the previous sentence. The 10-day dose escalation studies have been completed in one species. Dose range finding studies are ongoing.

Our private placement pursuant to Rule 506(c) has taken longer than we had hoped but is progressing satisfactorily. We have reached out to numerous potential institutional investors, family offices, potential strategic investors, advocacy groups and governmental agencies and have several in due diligence and a number that have expressed interest as followers if a lead investor were to be identified. The offering is up to $45 million across all three entities: RespireRx, ResolutionRx Ltd and EndeavourRx LLC. The offering was described in more detail in our press release of November 18, 2025.

We have continued to assess novel imidazodiazapines for their antiseizure properties as part of our backup strategy for the development of KRM-II-81 for pharmacoresistant epilepsy. We have recently completed a comprehensive evaluation of bromine-substituted analogs and identified SAR (structure-activity relationship) properties, including pharmacokinetic, that predict in vivo efficacy. One of these new compounds was characterized in brain tissue from a patient with recurrent seizures even in the presence of standard of care antiseizure drugs. Our new bromine-analog suppressed seizures in this pharmacoresistant brain tissue.

We remain scientifically active and have published multiple discoveries in the areas of AMPA receptor and $GABA_A$ receptor pharmacology in late 2025 and early 2026 and have several draft manuscripts in process. Below is a list of publications in late 2025 and early 2026.

Radin DP, Cerne R, Smith JL, Witkin JM, Lippa A. Antipsychotic-like pharmacological profile of the low impact ampakine CX691 (farampator): Implications for the use of low impact ampakines in the treatment of schizophrenia. J Psychiatr Res. 2025 Jun;186:145-153. doi: 10.1016/j.jpsychires.2025.04.019. Epub 2025 Apr 11. PMID: 40245529.

Radin DP, Cerne R, Smith JL, Witkin JM, Lippa A. Low-impact ampakine CX717 exhibits promising therapeutic profile in adults with ADHD - A phase 2A clinical trial. Eur J Pharmacol. 2025 Oct 15;1005:178047. doi: 10.1016/j.ejphar.2025.178047. Epub 2025 Aug 7. PMID: 40783159.

Sharmin D, Kamal P. Pandey, Lalit K. Golani, Sepideh Rezvanian, Md Yeunus Mian, Janet L. Fisher, Arnold Lippa, James M. Cook, Daniel P. Radin, Jodi L. Smith, Jeffrey M. Witkin, Hana Shafique, and Rok Cerne. KRM-II-81, a β3-Preferring $GABA_A$ Receptor Potentiator, Blocks Handling-Induced Seizures in Theiler's Murine Encephalomyelitis Virus-Infected Mice. *Future Pharmacology*, 2025.

Radin DP, Cerne R, Smith JL, Witkin JM, Lippa A. Recovery from AMPA Receptor Potentiation by Ampakines. *Future Pharmacology*, 5(2): 27, 2025

Witkin JM, Shafique H, Mian, Md Y, Sharmin D, Radin DP, Smith JL, Cerne R. Chapter 21. Molecular and clinical pharmacology of GABAergic drugs. Pediatric Pharmacology, American Psychiatric Association, 2026, in press.

We have begun to disclose also our ideas on AMPAkines for the treatment of several interacting processes in spinal cord injury. The encouraging positive clinical trial data on our AMPAkines in a number of therapeutic domains (respiration impairments and ADHD) was also disclosed in the scientific literature.

Our 2026 and early 2027 Goals and Plans Presented as a List (no assurances can be provided for any of the items listed below).

- Work with SRAL to deliver our AMPAkine CX1739 and commence the planned bladder function SCI clinical trial

- Substantially complete the work planned for the first year of GABAkines KRM-II-81grant described above with the goal of ultimately filing an IND for a first human clinical trial.
- Receive an invitation on August 24, 2026 to submit a full grant application for a proposed clinical trial of central sleep apnea in chronic opioid users with our AMPAkine CX1739
- If we receive the invitation noted immediately above, submit the full application by September 22, 2026
- Receive an invitation on September 18, 2026 to submit a full grant application for a proposed clinical trial of respiratory improvement and other endpoints in cervical spinal cord injury patients with our AMPAkine CX1739
- If we receive the invitation noted immediately above, submit the full application by November 12, 2026
- Receive notification from the NIH about our previously filed ADHD grant application
- Achieve a first closing on our private placement
- Achieve at least one strategic deal
- Establish a strategy to extract value from the substantive amounts of data we have historically collected and continue to collect as part of our preclinical and clinical studies
- File Form 10 to register our common stock and take the steps necessary to commence public trading of the stock and continue to make all necessary filings with the Securities and Exchange Commission

We would like to acknowledge and thank our colleagues, Jeffrey Witkin PhD and Rok Cerne PhD, MD, our two Senior Research Fellows, our AMPAKines team leader Dan Radin, MD, PhD, Richard Purcell, our Senior VP of Research and Development, and our Board of Directors, our scientific consultants, especially calling out Jim Cook, PhD and his team at the University of Wisconsin for the invention of KRM-II-81 and their cooperation with our CDMO, our patent counsel, all of our collaborators for all of their energy in advancing the Company and its promising drug candidates. We are very grateful to Jodi L. Smith, PhD, MD, Director of Pediatric Neurosurgery at Peyton Manning Hospital in Indianapolis who continues to partner with us on the discovery and development of improved medicines for neurological and psychiatric patients. And, to our investors and other stakeholders, we thank you and look forward to and rely upon your continued support. We remain optimistic about our future and believe our strategic initiatives, operational focus, and commitment to scientific excellence will enable us to achieve notable milestones in 2026 and 2027.

Together, we can advance life-changing therapies, create value for our investors, and positively impact the lives of patients worldwide.

Sincerely,

Jeff Eliot Margolis
Senior Vice President, Chief Financial Officer, Secretary and Treasurer

Arnold S. Lippa, PhD
Chief Executive Officer, President, Chief Scientific Officer and Chairman of the Board of Directors

About RespireRx Group

RespireRx Pharmaceuticals Inc. and its subsidiaries (RespireRx Group) are discovering and developing medicines for the treatment of psychiatric and neurological disorders, with a focus on treatments that address conditions affecting millions of people, but for which there are few or poor treatment options, including epilepsy, pain, attention deficit hyperactivity disorder (ADHD), recovery from SCI, certain

neurological orphan diseases and obstructive sleep apnea (OSA). The RespireRx Group is developing a pipeline of new and repurposed drug products based on our broad patent portfolios for two drug platforms: (i) neuromodulators, which include GABAkines and AMPAkines, proprietary chemical entities that positively modulate (positive allosteric modulators or "PAMs") $GABA_A$ receptors and AMPA-type glutamate receptors, respectively, and (ii) pharmaceutical cannabinoids, which include dronabinol, a synthetic compound that acts upon the nervous system's endogenous cannabinoid receptors.

The RespireRx Group holds exclusive licenses and owns patents and patent applications or rights thereto for certain families of chemical compounds that claim the chemical structures and their uses in the treatment of a variety of disorders, as well as claims for novel uses of known drugs.

EndeavourRx LLC: Neuromodulators

AMPAkines. Through an extensive translational research effort from the cellular level through Phase 2 clinical trials, RespireRx has developed a family of novel, low impact AMPAkines, including CX717, CX1739 and CX1942 that may have clinical application in the treatment of CNS-driven neurobehavioral and cognitive disorders, SCI, neurological diseases, and certain orphan indications. Our lead clinical compounds, CX717 and CX1739, have successfully completed multiple Phase 1 safety trials. Both compounds have also completed Phase 2 proof of concept trials demonstrating target engagement, by antagonizing the ability of opioids to induce respiratory depression.

AMPAkines have demonstrated positive activity in animal models of ADHD, results that have been extended translationally into statistically significant improvement of symptoms observed in a Phase 2 human clinical trial of CX717 in adult patients with ADHD. Statistically significant therapeutic effects were observed within one week. We believe AMPAkines may represent a novel, non-stimulant treatment for ADHD with a more rapid onset of action than alternative non-stimulants, such as Straterra® (atomoxetine), and without the drawbacks of amphetamine-type stimulants. In a series of important studies funded by grants from the National Institutes of Health and published in a number of peer reviewed articles, Dr. David Fuller (University of Florida), a long-time RespireRx collaborator, has demonstrated the ability of CX1739 and CX717, RespireRx's lead AMPAkines, to improve motor nerve activity and muscle function in a number of animal models of SCI. The DOD has awarded a $1.8 million grant to fund a Phase 2A/2B clinical study of CX1739 in individuals with SCI.

GABAkines. Under a License Agreement with the University of Wisconsin-Milwaukee Research Foundation, Inc. and on behalf of its EndeavourRx business unit, RespireRx has in-licensed rights to certain selectively acting GABAkines because of their ability to selectively amplify inhibitory neurotransmission at a highly specific, subset of $GABA_A$ receptors, thus producing a unique efficacy profile with reduced side effects. Preclinical studies have documented their efficacy in a broad array of animal models of interrelated neurological and psychiatric disorders including epilepsy, pain, anxiety, and depression in the absence of or with greatly reduced propensity to produce sedation, motor-impairment, tolerance, dependence and abuse. EndeavourRx currently is focusing on developing KRM-II-81 for the treatment of epilepsy and pain.

KRM-II-81 has displayed a high degree of anti-convulsant activity in a broad range of preclinical studies, including in treatment resistant and pharmaco-resistant animal models. Not only was KRM-II-81 highly effective in these models, but pharmaco-resistance or tolerance did not develop to its anti-convulsant properties. These latter results are particularly important because pharmaco-resistance occurs when medications that once controlled seizures lose efficacy as a result of chronic use and it is a principal reason some epileptic patients require brain surgery to control their seizures. In support of its potential clinical efficacy, translational studies have demonstrated the ability of KRM- II-81 to dramatically reduce

epileptiform electrical activity when administered in situ to brain slices excised from treatment-resistant epileptic patients who underwent surgery (3 studies). Novel analogs of KRM-II-81 have been shown to produce antiseizure activity in animal models and in pharmacoresistant brain tissue.

In addition, KRM-II-81 and other GABAkines in our portfolio have displayed a high degree of analgesic activity in several preclinical studies of chronic and neuropathic pain. In intact animal models of pain, the analgesic efficacy of KRM-II-81 was comparable to or greater than commonly used analgesics. At the same time, KRM-II-81 did not display side effects such as sedation and motor impairment, but even more importantly, it did not produce tolerance, dependence, respiratory depression or behavioral changes indicative of abuse liability, which are produced by opioid narcotics and are at the heart of the opioid epidemic.

ResolutionRx Ltd: Pharmaceutical Cannabinoids.

ResolutionRx Ltd (Australian Company Number a/k/a ACN 664 925 651) was formed in Australia on January 11, 2023 by RespireRx as an unlisted public company. RespireRx has contributed by sublicense and license with ResolutionRx, its sleep apnea drug development program subject to certain liabilities. ResolutionRx now engages in the research and development (R&D) associated with that program, initially for the development of a new formulation of dronabinol for use in a Phase 3 clinical trial and the filing of regulatory approval for the treatment of OSA. The current total budget for that program over the next several years is approximately US$16.5 million, most, but not all of which is expected to be eligible for the Australian R&D Tax Incentive (R&DTI). The R&DTI in the case of ResolutionRx is anticipated to be approximately 43.5% of qualified R&D expenditures. Dronabinol, an endocannabinoid receptor agonist, has already demonstrated significant improvement in the symptoms of OSA in two Phase 2 clinical trials. OSA is a serious respiratory disorder that impacts an estimated 90 million people in the United States, Australia, the United Kingdom and Germany and that has been linked to increased risk for hypertension, heart failure, depression, and diabetes. There are no approved drug treatments for OSA.

Because dronabinol is already FDA approved for the treatment of AIDS related anorexia and chemotherapy induced nausea and vomiting, RespireRx and ResolutionRx further believe that its repurposing strategy would only require, in the United States, approval by the FDA of a 505(b)(2) new drug application (NDA), an efficient regulatory pathway that allows the use of publicly available data.

Additional information about RespireRx and the matters discussed herein can be obtained on the RespireRx website at www.RespireRx.com or RespireRx's filings with the U.S. Securities and Exchange Commission (the SEC) at www.sec.gov. Additional information about ResolutionRx and the matters discussed herein can be obtained on the ResolutionRx website at https://www.resolutionrx.com.au and on the EndeavourRx website at https://endeavourrx.com.

Not a Securities Offering or Solicitation

This communication shall not constitute an offer to sell or the solicitation of an offer to buy any securities, nor shall there be any sales of securities in any jurisdiction in which such offer, solicitation or sale of securities would be unlawful before registration or qualification under the laws of such jurisdiction.

Cautionary Note Regarding Forward-Looking Statements

This press release contains certain forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended (the "Securities Act") and Section 21E of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), and the Company intends that such forward-looking

statements be subject to the safe harbor created thereby. These might include statements regarding the Company's future plans, targets, estimates, assumptions, financial position, business strategy and other plans and objectives for future operations, and assumptions and predictions about research and development efforts, including, but not limited to, preclinical and clinical research design, execution, timing, costs and results, future product demand, supply, manufacturing, costs, marketing and pricing factors.

In some cases, forward-looking statements may be identified by words including "assumes," "could," "ongoing," "potential," "predicts," "projects," "should," "will," "would," "anticipates," "believes," "intends," "estimates," "expects," "plans," "contemplates," "targets," "continues," "budgets," "may," or the negative of these terms or other comparable terminology, although not all forward-looking statements contain these words, and such statements may include, but are not limited to, statements regarding (i) future research plans, expenditures and results, (ii) potential collaborative arrangements, (iii) the potential utility of the Company's product candidates, (iv) reorganization plans, and (v) the need for, and availability of, additional financing. Forward-looking statements are based on information available at the time the statements are made and involve known and unknown risks, uncertainties and other factors that may cause our results, levels of activity, performance or achievements to be materially different from the information expressed or implied by the forward-looking statements in this press release.

These factors include but are not limited to, regulatory policies or changes thereto, available cash, research and development results, issuance of patents, competition from other similar businesses, interest of third parties in collaborations with us, and market and general economic factors, and other risk factors disclosed in "Item 1A. Risk Factors" in the Company's Annual Report on Form 10-K for the fiscal year ended December 31, 2022, as filed with the SEC on April 17, 2023 (the 2022 Form 10-K). We have not filed our Annual Report on Form 10-K for the years ended December 31, 2023, December 31, 2024 or December 31, 2025 nor have we filed our quarterly Current Reports on Form 10-Q as of March 31, 2024, June 30, 2024, September 30, 2024 or any quarterly periods thereafter up to and including June 30, 2026.

You should read these risk factors and the other cautionary statements made in the Company's filings as being applicable to all related forward-looking statements wherever they appear in this press release. We cannot assure you that the forward-looking statements in this press release will prove to be accurate and therefore current and prospective investors, as well as current and potential collaborators and other current and potential stakeholders, are encouraged not to place undue reliance on forward-looking statements. You should read this press release completely. Other than as required by law, we undertake no obligation to update or revise these forward-looking statements, even though our situation may change in the future.

We caution current and prospective investors, as well as current and potential collaborators and other current and potential stakeholders, not to place undue reliance on any forward-looking statement that speaks only as of the date made and to recognize that forward-looking statements are predictions of future results, which may not occur as anticipated. Actual results could differ materially from those anticipated in the forward-looking statements and from historical results, due to the risks and uncertainties described in the 2022 Form 10-K, in our quarterly reports on Form 10-Q, in our Current Reports on Form 8-K, and other reports that we file with or furnish to the SEC and in this press release, as well as others that we may consider immaterial or do not anticipate at this time. These forward-looking statements are based on assumptions regarding the Company's business and technology, which involve judgments with respect to, among other things, future scientific, economic, regulatory and competitive conditions, collaborations with third parties, and future business decisions, all of which are difficult or impossible to predict accurately and many of which are beyond the Company's control.

Although we believe that the expectations reflected in our forward-looking statements are reasonable, we do not know whether our expectations will prove correct. Our expectations reflected in our forward-looking statements can be affected by inaccurate assumptions that we might make or by known or unknown risks and uncertainties, including those described in the 2022 Form 10-K, in our quarterly reports on Form 10-Q, in our Current Reports on Form 8-K, and other reports that we file with or furnish to the SEC and in this press release. These risks and uncertainties are not exclusive and further information concerning us and our business, including factors that potentially could materially affect our financial results or condition, may emerge from time to time. For more information about the risks and uncertainties the Company faces, see "Item 1A. Risk Factors" in our 2022 Form 10-K. Forward-looking statements speak only as of the date they are made. The Company does not undertake and specifically declines any obligation to update any forward-looking statements or to publicly announce the results of any revisions to any statements to reflect new information or future events or developments. We advise current and prospective investors, as well as current and potential collaborators and other current and potential stakeholders, to consult any further disclosures we may make on related subjects in our annual reports on Form 10-K and other reports that we file with or furnish to the SEC including but not limited to our most recent Form 10-Q as of September 30, 2023 filed with the SEC on November 17, 2023. As noted above, we have not filed our Annual Report on Form 10-K for the year ended December 31, 2023, nor have we filed our quarterly Current Reports on Form 10-Q as of March 31, 2024, June 30, 2024, September 30, 2024, or any quarterly periods thereafter up to and including June 30, 2026.

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