IGCPHARMA
NYSE American: IGC

Potomac, Maryland 20854

EXECUTIVE SUMMARY

Current market cap ~ $30 million. Topline target: $300-$500M. Near-term valuation bridge:

Catalysts 4-9 months:

i. 90% then 100% enrollment in CALMA trial,
ii. Potential positive Phase 2 readout
iii. AHA workbench deployment

- **The Opportunity**: Agitation in Alzheimer's disease (AD) affects over 11 million people across North America and Europe and it often leads to extreme caregiver burden and institutional care.

- **Our Solution:** IGC-AD1, a rapid-acting therapeutic candidate that addresses agitation in AD
  - IGC-AD1 is in a Phase 2 trial (CALMA) with 80% of patients enrolled.
  - Derisking-Pre-clinical, Phase 1, and interim results from Phase 2 are all positive.

- **Addressable Market:** $1T + global burden. Over 40 million individuals with AD globally, ~76% with agitation.

- **Business Model (3 engines):** Agitation in AD, Sleep in AD, AI-SaaS + data infrastructure.

- **Valuation Gap:** Asymmetric upside - Current $30M to, peers ~ $300M - $2 B.

- **Why now?** Phase 2 nearing completion ~ 80% enrolled / ADDI engagement (Gates ecosystem) / major catalysts in next 4-9 months.

- **Current treatment options are limited.** The commonly prescribed FDA-approved therapy for agitation in Alzheimer's, Brexpiprazole, may take up to 10 weeks to demonstrate benefit and carries a boxed warning, highlighting a need for safer, faster-acting, alternatives.

- **IGC-AD1:** Liquid formulation administered twice a day. Clinical data from completed Phase 1 and interim Phase 2 studies demonstrate a clinically and statistically significant **reduction in agitation within two weeks of treatment**, with a favorable safety profile reported to date; showing meaningful improvements in quality of life for both patients and caregivers. Exploratory endpoints show a meaningful reduction in sleep disturbance in these patients.

- **AI Powered:** Complementing its therapeutic program, IGC Pharma is developing AHA and MINT-AD, an AI-driven platforms to forecast cognitive decline in AD.