



Sebastian BioPharma

Unlocking Immunotherapy Resistance in Colorectal Cancer

Targeting the two key drivers of resistance using a single drug formulation

January 2026

Executive Summary



- **Sebastian BioPharma** is a preclinical oncology company developing a **tumor-targeted, multi-pathway RNA therapeutic** for colorectal cancer (CRC), addressing significant unmet need despite existing immunotherapies.
- **SBP-001** is an **industry-compliant dual-payload antibody–oligonucleotide conjugate (dpAOC)** designed for **tumor-specific delivery and simultaneous modulation of two key intracellular pathways**, targeting major drivers of tumor resistance while minimizing systemic toxicity.
- The company has completed **target discovery, validation, and feasibility**, demonstrating **strong human-relevant biology, in-vitro potency, supportive in-vivo efficacy signals**, and **early indicators of favorable tolerability**.
- **Discovery Optimization** is the next value inflection point, focused on selecting **2–4 pre-candidates** using **human cell and organoid validation** with **early CMC feasibility**.
- The development strategy is **milestone-gated**, with a **two-phase plan** to achieve **SBP-001 candidate nomination over ~12–18 months**.
- **Founder capital has been deployed**, providing operational runway **through August 2026**.
- The company is raising a **Pre-Seed round in two tranches**:
\$870K–1M to complete **Discovery Optimization** (Tranche 1), and **\$1.9–2.5M** to advance SBP-001 through **Lead Characterization and Candidate Nomination** (Tranche 2).



Founder Team with Proven Execution



Exclusive academic IP plus company-owned platform patents



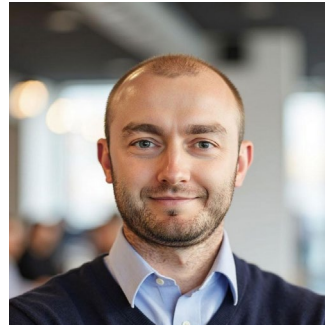
Eli Gilboa, PhD
CSO & Founder

- Pioneer in RNA therapeutics; founder of Argos Therapeutics
- Decades of leadership in tumor immunology and translational discovery



Greta Garrido, PhD
CEO & Co-Founder

- Advanced IO programs from discovery through IND and early clinical
- Proven translational execution, fundraising, and partnerships



Brett Schrand, PhD
R&D, Associate Director

- Oligonucleotide therapeutics discovery and development
- Hands-on CRO execution across *in-vitro* and *in-vivo* studies

Sebastian BioPharma *Launched in January 2025*

- **Founder-led**, capital-efficient execution
- **\$630K founder-funded Pre-Pre-Seed**
- **Incubated** at InnoVenture Lab (Beverly, MA)
- **Exclusive IP licensed** from University of Miami
- **Platform patent owned** by Sebastian BioPharma
- **Multiple non-dilutive funding applications** under review
- Graduate, **SCBio Drive Accelerator 2025**; Selected, **Nucleate Cohort 2026**
- Strategic advisory support in **Business Strategy & Commercialization**



Pre-Seed Milestones (Two-Tranche Structure)



Pre-Pre-Seed

(Founder-Funded | Completed) ~630K deployed

- ✓ **Completed** target discovery, validation, and biology
- ✓ **Feasibility established** for dual-payload AOC delivery
- ✓ Early **in vitro potency** and **supportive in vivo efficacy** signals
- ✓ **Lab operations** and **workflows established**
- ✓ Core **IP portfolio expanded** (University of Miami)

Pre-Seed

(Milestone-Gated)

Tranche 1: Discovery Optimization (\$870K–1M | ~6 months)

- ☐ Advance 2–4 pre-candidates
- ☐ Human cell + organoid validation
- ☐ Early CMC feasibility
- ☐ Pre-candidate selection (**Gate 1**)

Tranche 2: Lead Characterization & Candidate Nomination (\$1.9–2.5M | ~12 months)

- ☐ In vivo PK/PD and biodistribution
- ☐ Early safety and tolerability signals
- ☐ Manufacturability feasibility
- ☐ SBP-001 candidate nomination (**Gate 2**)

Founder-funded Pre-Pre-Seed de-risked biology and feasibility; Pre-Seed capital drives candidate nomination.

Why Colorectal Cancer First



Clear & High-Need Patient Population

#2 cause of cancer death worldwide

Fastest-growing incidence in patients under 50

~85% fail immunotherapy

Standard of care: chemotherapy ± targeted agents

Clear failure of current therapies

High Probability of Success

Well-characterized resistance biology

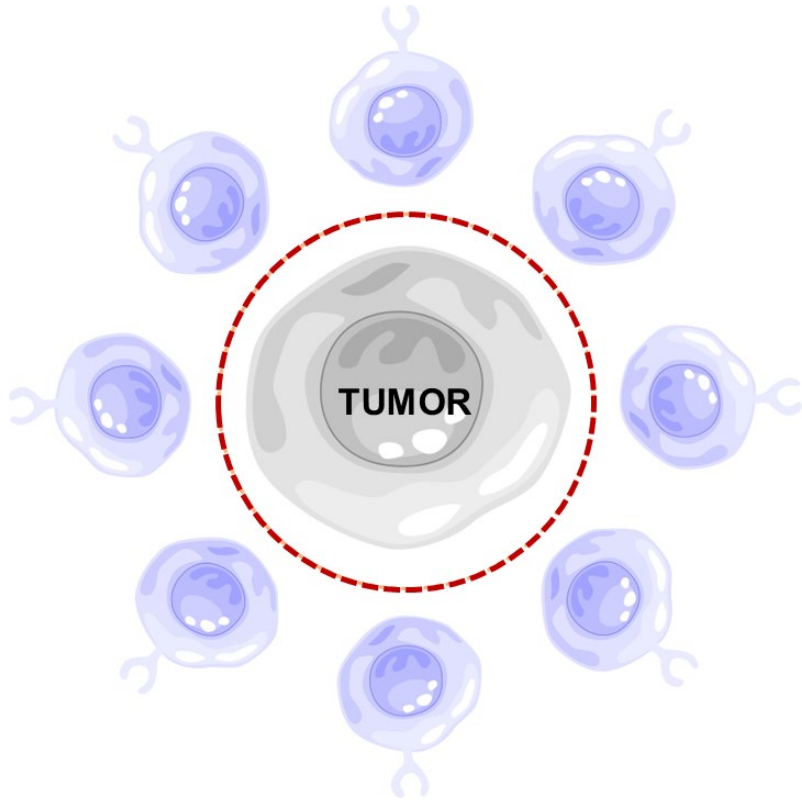
Established biomarker frameworks

Short PFS & OS → rapid readouts

Efficient patient stratification

The most informative indication to prove our first-in-class asset.

Why Immunotherapy Fail in Colorectal Cancer



☒ No response to immunotherapy

CRC Immune Resistance Is Driven by Two Barriers:

1. Tumor invisibility

- Lack of antigen presentation
- Immune system cannot recognize tumor

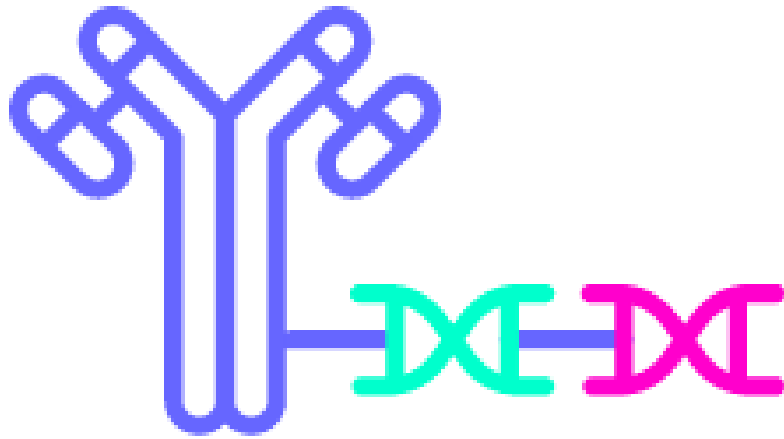
2. Immune exclusion

- Hostile tumor microenvironment
- T cells cannot infiltrate tumors

Current therapies address these barriers independently or not at all.

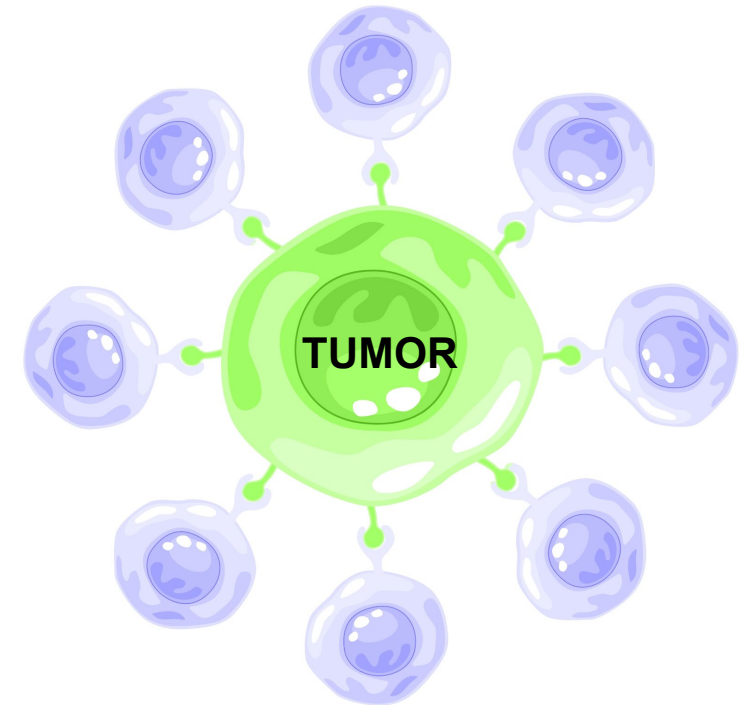
SBP-001: A Single-Drug Solution to Dual Resistance

• Dual-Payload Antibody-Oligonucleotide Conjugate (AOC) •



- Tumor-targeted AOC delivering two RNA payloads to overcome immune resistance
- Industry-compliant, GMP-aligned construct

- ✓ Restores tumor visibility
- ✓ Overcomes immune exclusion



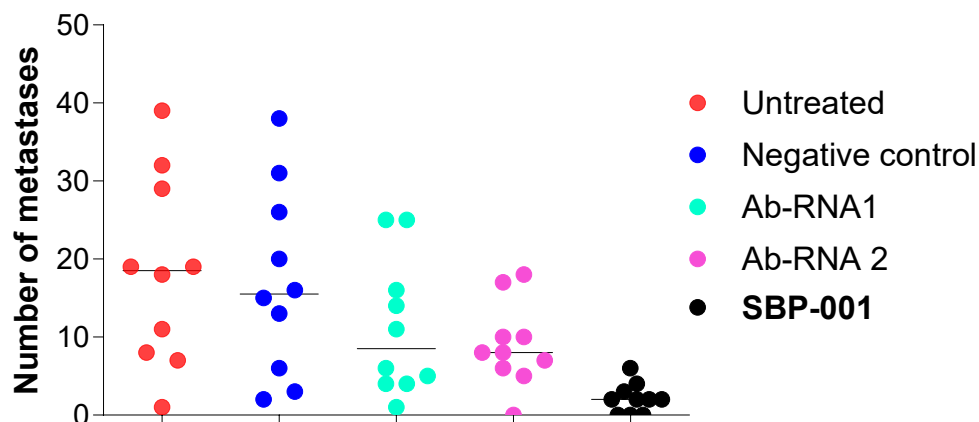
✓ **Response to immunotherapy**

SBP-001: Exploratory Biology & Feasibility Validation



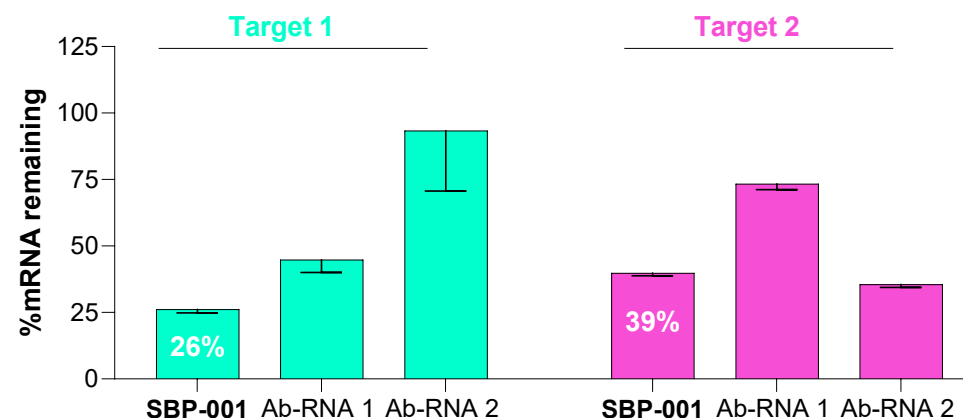
Mouse efficacy shown using a murine surrogate construct; feasibility confirmed in human-relevant systems

Exploratory Biology: *In-Vivo* Efficacy (Murine Surrogate)



Near-complete elimination of CRC liver metastases

Feasibility: Human *In-Vitro* Proof of Concept



Simultaneous knockdown of both resistance pathways in human CRC cells

Exploratory Biology & Feasibility Outcomes

- *In-vivo* biology validated (murine surrogate)
- Dual-siRNA delivery confirmed in human CRC cells
- Early tolerability acceptable
- **Ready for Discovery Optimization**

Data support advancement of **SBP-001** into **Discovery Optimization** toward **Candidate Nomination**.

Scientific and Intellectual Property Foundation



These publications and patents directly inform the design, mechanism, and delivery strategy of SBP-001

Publications

- **4 peer-reviewed publications** in high-impact journals
- **+10 publications** supporting pipeline expansion
- *All work authored by founding scientists*



Patents

- **Exclusive IP licensed from University of Miami**

1 patent application under review

(Application No.: 18/906,621 | Priority date: June 9, 2017)

Claims covering method-of treatment & composition related to intracellular targets.

- **1 company-owned patent application filed by Sebastian BioPharma**

(Application No.: 63/956,351; Filing Date: January 8, 2026)

Claims covering platform technology.



IP strategy expansion informed by ongoing landscape of competitors.

A De-Risked Path to a First-in-Class Drug



Innovation at the system level, risk reduced at the component level

De-risked at the component level

Validated antibodies, siRNA chemistry, and conjugation technologies

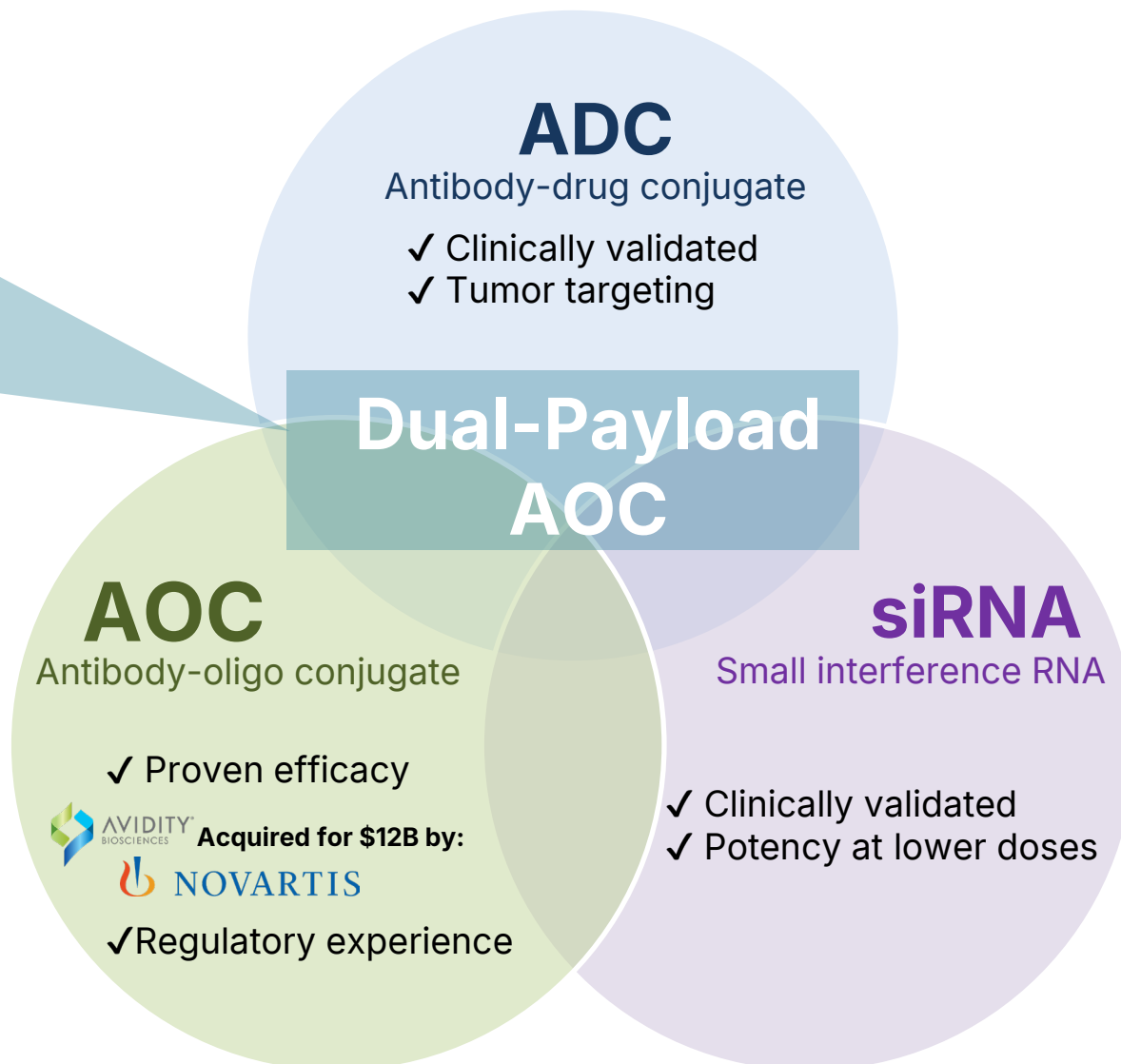
First-in-class at the system level

Dual RNA payloads integrated into a single tumor-targeted drug

Differentiation driven by architecture

Not new modalities — a new way to combine them

Risk reduced where possible. Innovation applied where it creates value.



Breaking the Multi-Specific Tradeoff



Features	Sebastian BioPharma	Dual payload ADC	Small molecules	Bispecific antibodies	LNP-RNA
	Dual payload AOC				
Tumor-specific delivery	✓	✓	✗	✓	✗
Intracellular targeting	✓	✓	✓	✗	✓
Multiple target modulation	✓	✓	✗	✓	✓
Programmability & payload flexibility	✓	✗	✗	✗	✓
Systemic toxicity risk	LOW	HIGH	HIGH	MODERATE	MODERATE
Stage	Preclinical	Preclinical/Early clinical	Clinical/Approved	Clinical/Approved	Clinical

Sebastian BioPharma's value proposition:
Single architecture. Multi-pathway control. Low toxicity.

Sebastian BioPharma 's Pipeline



Large cancer patients populations, high unmet clinical need

Assets/ Candidates	Programs/ Indications	Early discovery/ Target selection	Lead candidate optimization	Preclinical	Phase I	Phase II	Phase III	Regulatory approval	Comm.
Asset 1 SBP-001	Colorectal	<div></div>							
Asset 2 SBP-002	Endometrial & Ovarian	<div></div>							
Asset 3 SBP-003	Gastric	<div></div>							
Future Assets SBP-00X	Other	<div></div>							

Global Annual New Cancer Cases	Tumor indication	Estimated new cases (year)	Immunotherapy resistant (% of patients)
	Colorectal	~1.9–2.0 million	~85%
	Endometrial	~420,000	~70%
	Gastric	~1.1 million	~80%

[39-all-cancers-fact-sheet.pdf](#)

TAM/SAM/SOM: SBP-001 Market Opportunity

TAM=Total Available Market

\$59.08 Billion

Immunotherapy resistant tumors potentially addressed by SBP-001 globally: colorectal, endometrial, gastric and other cancers.

Total TAM: \$59.08B (3.16M new cases/year)

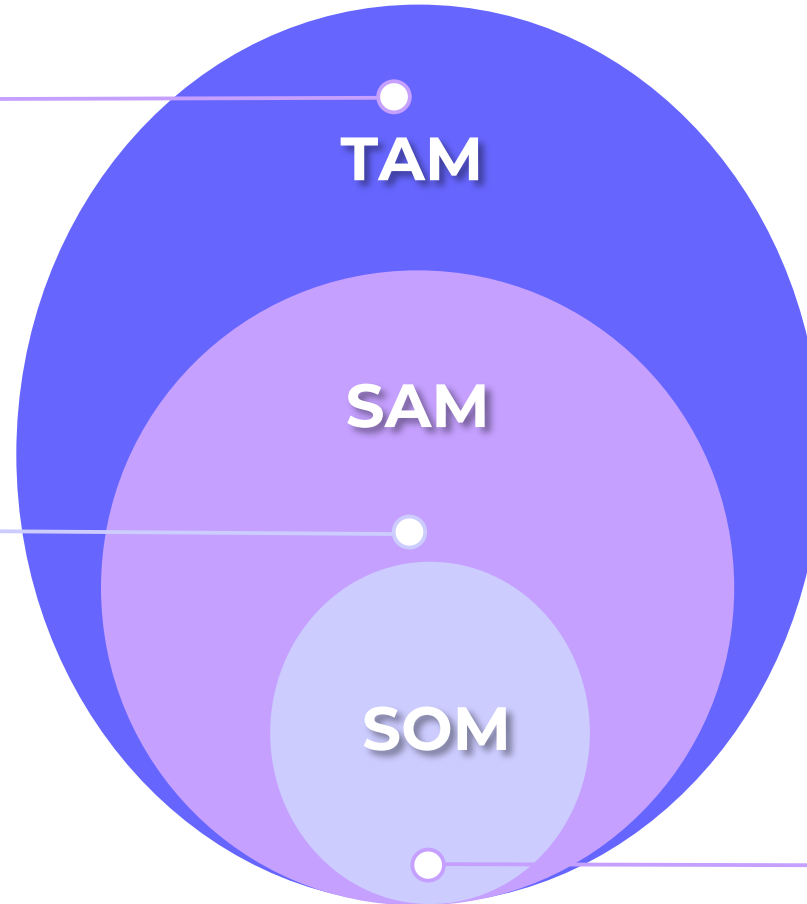
SAM=Serviceable Addressable Market

\$6.4 Billion

Focused on immunotherapy resistant colorectal patients in the US & EU (82.5% of CRC cases). Market share allocated using percentages: 27% US, 31% EU.

Total SAM: \$6.4B

(425,911 new neoantigen-deficient CRC cases)



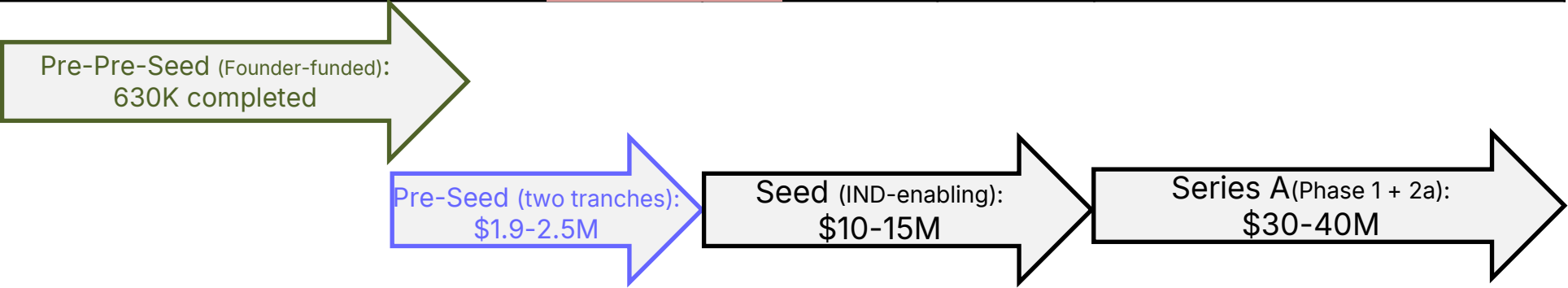
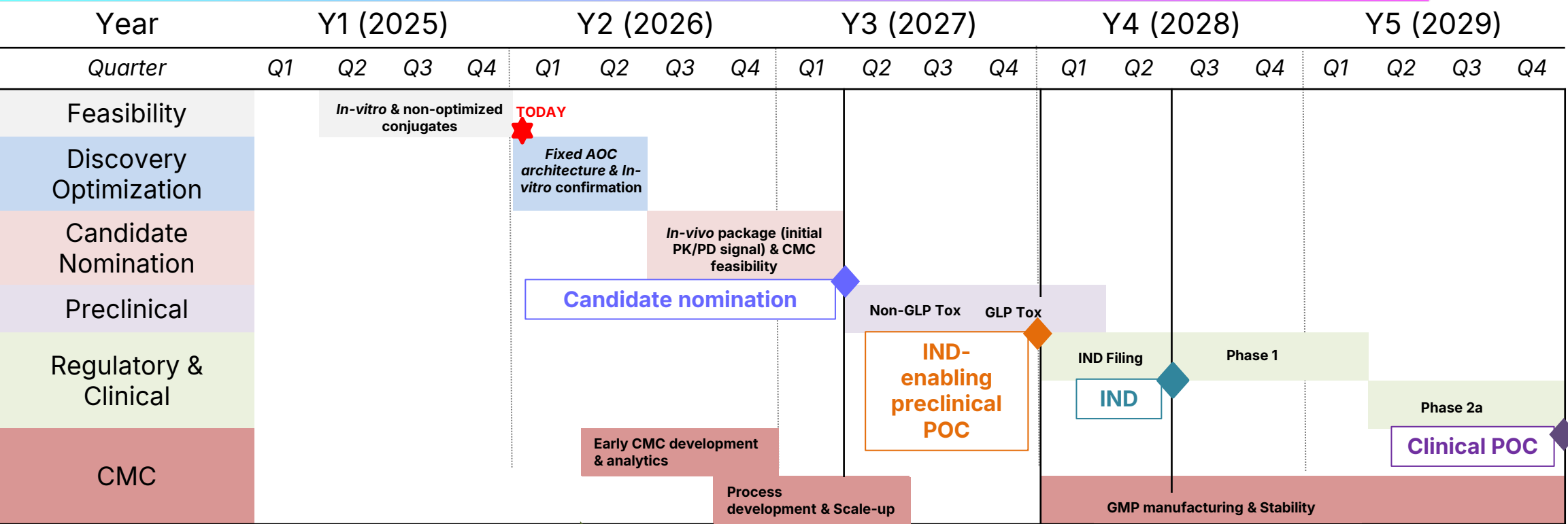
SOM=Serviceable Obtainable Market

\$960.5 Million

SOM (15% of immunotherapy resistant colorectal patients in US & EU): **63,887 patients, \$960.5M Revenue**

Detailed analysis available upon request.

Capital-Efficient Development Path: Feasibility to Clinical PoC



Lead candidate nomination (Value inflection point) • Clear IND-enabling and clinical path defined.

A two-phase plan to achieve SBP-001 candidate nomination

Including the operational costs required to execute the science, we require **\$870K–1M** to complete **Discovery Optimization** and **\$1.9–2.5M** to advance SBP-001 to a **nomination-ready candidate** over *~12–18 months*

	Tranche 1	Tranche 2
Time (months)	~6	~12
Direct Experimental R&D	Discovery Optimization <ul style="list-style-type: none">•2–4 pre-candidates•Human cell and organoid validation•Early CMC feasibility	Lead Characterization & Candidate Nomination <ul style="list-style-type: none">•1 lead + 1 backup•In vivo PK/PD•Early safety signals•Manufacturability feasibility
Cost	\$0.5–0.6M	\$1.1–1.3M
Program Operations & Enabling Costs	CMC & Technical Ops Team & Consultants IP & Legal Contingency	CMC & Technical Ops Candidate Nomination Package Team & Consultants IP & Legal Contingency
Cost	\$370-400K	\$0.8-1.2M
Total cost per tranche	\$870K – 1M	\$1.9 – 2.5M

Milestone-gated capital deployment with defined go/no-go decision points.

Capital Strategy & Flexible Tranche Structure



- **Pre-Seed raised as a SAFE**, enabling rapid capital deployment and execution.
- **Flexible tranche structure**: capital may be deployed initially to complete **Discovery Optimization (Tranche 1)**, with follow-on capital supporting **Lead Characterization and Candidate Nomination (Tranche 2)** based on data.
- **Founder-funded to date**, demonstrating strong commitment and enabling a **clean, simple cap table**.
- **Multiple non-dilutive funding applications under review.**
- **This strategy materially de-risks the Seed round** by extending runway and increasing data maturity.

Investment Thesis



A differentiated, tumor-targeted RNA therapeutic with a clear, capital-efficient path to value inflection



Founder-led, experienced team with deep expertise in RNA therapeutics, immuno-oncology, and translational drug development.



Strong biological foundation, with target discovery, validation, and feasibility completed using human-relevant systems and supportive in vivo biology.



Differentiated, tumor-targeted dual-pathway approach designed to overcome key mechanisms of resistance in colorectal cancer.



Large unmet clinical need in colorectal cancer, a major solid tumor indication with limited benefit from current immunotherapies.



Capital-efficient, milestone-gated development strategy enabling lead candidate nomination within ~12–18 months and a ~2.5-year path to first-in-human studies.



Clean and expanding intellectual property position, with patents filed and additional filings planned around the platform and lead assets.



Multiple strategic partnership opportunities, spanning RNA, ADC, and immuno-oncology-focused pharmaceutical companies.



Attractive commercial opportunity, with a ~\$6.4B serviceable CRC market, ~\$1B near-term obtainable opportunity, and **clear expansion potential** beyond CRC.

A disciplined, data-driven investment opportunity with a defined path to clinical and strategic value creation.