A new source of hope for 2.5 million people with Multiple Sclerosis

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What is Multiple Sclerosis (MS)?

- MS is an unpredictable, but progressive, disease of the central nervous system.
- MS is an autoimmune disease that attacks the protective covering (myelin) over nerve cells in the brain & spinal cord.
- Normally when myelin is lost or damaged, the body has the ability to replace damaged cells and create new myelin. However, MS prevents this repair from taking place.
- The resulting exposed axons atrophy over time, causing irreparable damage that results in the permanent loss of physical or mental capabilities.

**MS is a disease that strikes young adults, typically between the ages of 20 and 40, and results in continuous decline in both capabilities and quality of life.**

Common symptoms include:

- **Vision loss**
- **Numbness**
- **Loss of memory and concentration**
- **Paralysis**
- **Fatigue**
- **Many other debilitating effects**
How many people are affected by MS?

- 2.5 Million people worldwide have been diagnosed with MS.

- 100,000 new cases are diagnosed every year.

- However, the actual number is much higher because MS is a very underreported disease. Why?
  - **Difficult to diagnose** – Generally a patient must exhibit two or more classical symptoms or episodes. The only definitive diagnostic test is a MRI scan of the brain and spinal column.
  
  - **Reluctance to diagnose** - Since there are no effective treatments, physicians are reluctant to diagnose MS until all other possibilities have been ruled out, especially in countries with nationalized medicine.
  
  - **Social stigma** – Lack of public understanding about the disease prevents many people from revealing they have MS until their physical limitations become apparent.
  
  - **Misdiagnosed** - Especially in women, MS is frequently misdiagnosed as chronic fatigue syndrome.
  
  - **Demographics** – MS is 2.5 times more prevalent in women. MS is most common in regions farthest from the equator and has the highest rate of occurrence in Caucasians.
  
  - **No effective treatments** – Drugs currently prescribed for MS have a limited ability to slow the progress of the disease.
  
  - **No reporting requirement** – Since MS is not considered an infectious disease the government does not require physicians to report the number of patients diagnosed with MS.

- Every person diagnosed with MS affects the lives of 5-10 others in their immediate family, on the job and in their community.

In developed countries 1 in 400 people will be diagnosed with MS in their lifetime

1 The Lancet, Vol. 359, April 6, 2002
Treatments vs. Cure

What has been done to cure MS?

At the current rate of research funding, leading experts estimate finding a cure will take another 30-50 years and cost another $1.5 Billion.

- For the past 50 years MS research has focused on understanding the causes of MS and trying to find a cure.

- MS is a very complex disease. Although genetics, infection and environmental factors may all contribute to the disease, the causes and pathology remain largely unknown.

- Even though MS affects millions, it has a relatively low priority for government research funding (67th in 2001).

- To date no cure has been found for any neurological disease.

Unfortunately a cure will not help those who already have MS, or the 3-5 Million additional people who will suffer the effects of the disease, by the time a cure is found.
Why do we need a new approach?

- Treatments are effective in improving the “quality of life” for many other diseases. For example, insulin does not cure diabetes but it arrests the progress of the disease and allows diabetics to lead normal, productive lives.

- While there are currently several drugs being prescribed for MS, none was developed specifically for the disease and they have limited effect. Unfortunately there are still no effective treatments for MS.

- For many years, neurologists believed that once the brain and spinal cord were formed, no new neurological pathways were created. Thus their conclusion was that damage caused by MS and related diseases could not be repaired.

- Recently neurobiologists have proven that the brain does generate new neural pathways and replaces cells that are damaged or age and die. This means that the body has a natural ability to repair damaged myelin that is being blocked by MS. Thus there is strong evidence that reactivating the body’s ability to repair the myelin damaged by MS may be possible.

- For 50 years, MS research has focused almost exclusively on finding the causes and a cure. Subsequently, it is only in the last few years that even 3% of MS research funding has been spent looking for treatments.

- Perhaps most encouraging is the fact that reactivating the body’s natural repair mechanism is a considerably less complex task than curing MS. Thus finding myelin repair treatments that arrest or reverse the effects of MS is a finite problem.

- The Myelin Repair Foundation’s effort to find new treatments complements existing research by the National Institutes of Health (NIH), the National Multiple Sclerosis Society (NMSS) and others who continue to the search for a cure.

Developing treatments should be easier, faster, cheaper
Why Myelin Repair?

Myelin (mi-el-in) -
A lipid based protective sheath covering nerve fibers.

Repair –
1. Restore to a sound or healthy state
2. Replacement of destroyed cells or tissues by new formations
3. Fix that which is broken.

The “wiring” of the brain and spinal cord is made up of millions of axons. Myelin protects these axons in much the same way as the wiring in your home is covered with insulation to prevent short circuits. When MS damages the protective myelin covering, exposed axons cannot function normally.

Ordinarily cells are replaced as they age and die. This is true of myelin producing cells under normal conditions. MS disrupts this natural replenishment process and the body is unable to repair the damage to the myelin.

The objective of the Myelin Repair Foundation (MRF) is to understand how MS disrupts the body’s normal myelin replenishment process and find therapeutic agents that can restore this capability.

While the biological interactions that govern these processes are complex, they are well defined, giving MRF researchers concrete objectives in the search for more effective treatments. By employing the Collaborative Research Process ©, MRF researchers believe they can reduce the time to discover new treatment targets to 5 years instead of the 15-20 years it will take under the current system.

MRF GOAL:
Find treatments to restore the body’s natural ability to repair myelin within 5 years.
Scott Johnson was diagnosed with MS while in college. After receiving a degree in civil engineering from the University of California, Davis he received his MBA from the University of California, Berkeley.

For 15 years he enjoyed a successful business career with the Boston Consulting Group, FMC Corporation and as President of three start-ups.

Scott’s MS finally progressed to the point where physical limitations forced him to retire from corporate life.

Since 2001, Scott has been committed full-time to understanding what is being done to combat MS and improve the quality of life for those affected by this disease. He began by identifying recent scientific breakthroughs in medical research that could lead to effective MS therapies.

When he discovered that very little focus or funding was being given to new work on repairing damage caused by MS, he spent months identifying and recruiting the most respected and visionary scientists in the field to work together.

In late 2002, Scott founded the Myelin Repair Foundation (MRF) a 501(c)(3) non-profit organization to develop a new research model. MRF will use this model to fund and manage a collaborative research process that accelerates promising new research focused on reactivating the body’s natural ability to repair damaged myelin and arrest or reverse the progress of MS.

Mission: Find effective treatments for MS, fast
Why do we need a new research process?

The current proposal, peer review and grant system has evolved over decades to ensure that public funds are used solely for quality science. Unfortunately, the processes that ensure high quality have also resulted in:

- **Incremental experiments** –
  If experiments fail, investigators risk not receiving future funding. Creativity and risk taking has been stifled.

- **Inefficient communication process within the scientific community** –
  Publication is the currency of science, thus discoveries are closely guarded until they can be published. The time from proposal to publication frequently exceeds two years.

- **Scientists do not specialize in diseases** –
  Research scientists specialize by scientific discipline (i.e. molecular biology) and seek funding for experiments by relating them to a disease. Experiments are not designed to address a specific problem relative to treating a given disease. Unlike physicians, scientists tend to read publications and attend conferences based on their scientific field rather than those focused on a specific disease.

- **Competition** –
  There is stiff competition for basic research funding. Only the top 20% of all proposals receive grants. As a result, coordination and collaboration between scientists in the same field, and even between scientists in different disciplines, is severely limited.

- **Chaotic progress**-
  Because there is no overall disease-based research roadmap provided by the funding sources, scientists are free to propose and pursue experiments based solely on their scientific interests.

- **Intellectual property is not always protected**-
  In many cases researchers are unconcerned about potential commercial use of their discoveries. Discoveries that could lead to new therapies may not get developed because they lack the patent protection necessary to interest biopharmaceutical companies in commercial development.

All of these factors slow the pace of discovery

*A new, more efficient research model is needed*
A New Model for finding effective treatments for MS

- Repairing damaged myelin may arrest or reverse the effects of MS.
  Restoring the protective coating around the axons not only shields them from further attack by MS, but also provides a critical environment for their survival and function.

- MRF will conduct research in an area largely ignored by non-profits and government.
  Our efforts will supplement and compliment the continued search for a cure, without duplicating those efforts.

- MRF will target a treatment - not a cure.
  Our mission is to help improve the quality of life for those affected by MS until a cure can be found.

- MRF will maintain a narrow focus – myelin repair.
  While the search for a cure continues to focus on understanding the genetics and immunology of the disease, and how to use this information to affect a cure, we will focus our energy and resources on the less complex problem of rapidly identifying treatment targets to improve the quality of life for those with MS.

- MRF has created a unique, Collaborative Research Process© to accelerate discovery.
  Using the conventional research process and funding sources would take 15-20 years to identify and validate new treatment targets. MRF recruited an interdisciplinary research team of the top scientist in the field of myelin biology and led this team in developing a collaborative process to facilitate cooperation, coordination and communication. Using the MRF Collaborative Research Process®, the same goals can be achieved in five years.

A New Model. A Narrow Focus. A 5-Year Timeline.
**Myelin Repair Foundation - Vision of the Future**

Building a bridge from scientific discovery to treatments

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**Silos of Scientific Discovery**

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**Critical Success Factors for MRF**

- Interdisciplinary Research Team
- “Best of the Best” Principal Investigators and Scientific Advisory Board
- Jointly Developed Research Process
- Jointly Developed Research Plan
- Professional Management Team with “Start-Up” Experience
- Run like a “Start-Up” Business
- Partner with biopharmaceutical companies for rapid drug development, clinical trials and commercialization

**A New Model. A Narrow Focus. A 5-Year Timeline.**
Scientific “A” Team

Principal Investigators- “The Best of the Best”

Discovery biology is a talent-centric process; a small team with a comprehensive set of complementary skills, team chemistry, and a common mission is critical to a successful collaboration.

MRF spent months polling peers to identify both the most skilled and accomplished scientists in the field and those who could and would work collaboratively. The result is a team of tenured professors with a track record of scientific achievement and recognition. Because of their accomplishments, their research has been well funded by NIH, NMSS, and other organizations. They are frequently published in prestigious scientific journals and invited to speak at international conferences. Each has a world-class laboratory at a leading research institution.

MRF looked beyond excellence in these quantitative criteria. The foundation wanted innovators who demonstrated a history of breakthrough thinking and with the vision to be dissatisfied with the status quo. Each investigator had to be willing to embrace a new paradigm, -open collaboration-, to join the MRF team.

These principal investigators (PIs) have accepted the challenge to join MRF.

Ben A. Barres, M.D., Ph.D. Stanford University
David R. Colman, Ph.D. Montreal Neurological Institute at McGill University
Robert H. Miller, Ph.D. Case Western Reserve University
Stephen D. Miller, Ph.D. Northwestern University
Brian J. Popko, Ph.D. University of Chicago

Scientific Advisory Board –

Only those who are similarly skilled and knowledgeable can evaluate the research plans and investigations proposed by the research team. The search for a scientific advisory board (SAB) to provide technical oversight to the research process required similar diligence. In addition to embracing the values of the MRF, SAB members had to be respected both by the PIs and in the scientific community at large.

MRF is pleased to welcome these eminent scientists to our SAB.

John W. Griffin, M.D. Johns Hopkins Medical School
Stephen Hauser, M.D. University of California, San Francisco
William C. Mobley, M.D., Ph.D. Stanford University Medical School.
Martin Raff, M.D. University College, London
Louis Reichardt, Ph.D. University of California, San Francisco
Gary Westbrook, M.D. Oregon Health Sciences University
**Bringing Business Discipline to Basic Research**

1. The process began with the identification of critical scientific skill sets and the recruitment of top neuroscientists from each discipline, who were leading world-class laboratories at leading research institutions.

2. In order to maximize the results of the collaboration and minimize the cycle time, a Collaborative Research Process© was developed by MRF that documents how research plans are developed and executed. This process provides the framework for a "virtual" institute by identifying interdependencies between laboratories, coordinating experiments and fostering collaboration. Since discovery biology is unpredictable, this process was designed with well-defined objectives and success criteria but is flexible in execution, with regular reviews and decision gates for resource allocation.

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*This model was developed with one goal in mind → Treatments for MS*
3. With this structure in place, MRF worked with the research team to construct a five-year research outline that identified the key biological interactions to be investigated within the scope of the project. From this overall roadmap, investigations were prioritized and lead laboratories selected for each project. Collaborating laboratories were also identified, and a Phase I research plan was developed.

4. To facilitate collaboration and accelerate communication, the labs will be connected via an information technology infrastructure designed to facilitate daily interaction and data exchange. The objective of this technology is to provide an audio/video/data platform for the daily, informal exchange of ideas and information, as well as regularly scheduled research reviews, without the expense and lost productivity of physical travel. The IT infrastructure will also allow MRF to archive critical data and document discoveries for patent protection.

5. A Scientific Advisory Board of eminent scientists in related fields was selected to ensure that the research plan is appropriately designed and focused to achieve the objectives of the MRF. This group has responsibility for approving the annual research plan before it is sent to the Board of Directors for funding.

6. The MRF provides a small professional staff to support the research team and coordinate the business activities of the foundation. The support activities include tracking the progress of the research team against the plan, capturing, documenting and protecting intellectual property and coordinating the interaction with the participating Universities. Additional support activities include planning and executing regular progress reviews and the annual conference, and coordination of research support services. Business functions include fundraising, contributor relations, accounting, coordination of professional services and communications.

7. The Board of Directors provides management oversight for the MRF staff and is the final authority with regard to the annual budget. The Board is also responsible for assisting the staff in fundraising activities.

8. The MRF expects that research on myelin repair will generate numerous discoveries, and other intellectual property, that should be protected to ensure rapid commercial development of new MS therapies. One of the principal functions of MRF management is to identify commercialization partners in the biopharmaceutical industry and negotiate license and royalty agreements for patents pertaining to MRF therapeutic targets. This process will hasten the transition from the lab to the clinic.

9. The MRF also expects to receive future royalty income from this patent portfolio. Based on agreements with the participating universities, part of the income generated by patents will go back to the Universities and the investigators. The remainder will be used by the MRF to fund future research in MS or other neurological diseases.
Management Team

Bringing business discipline to a heretofore academic research environment is a daunting challenge. MRF is committed to providing a professional staff with the background, knowledge, experience and temperament to work effectively with the research team to meet objectives while remaining focused, motivated and on task.

As with any business activity, leadership is the key to success. From the beginning MRF has been committed to maintaining a small but highly qualified professional staff, supplemented with established business leaders willing to volunteer their time and talent to help MRF achieve success. This combination allows the MRF to accomplish its objectives while minimizing operating expenses in order to maximize research funding.

Scott Johnson – President and Founder

His career spanned 15 years of success at Boston Consulting Group, FMC and as an entrepreneur CEO in three start-ups. Scott received a BS in engineering from the University of California, Davis and his MBA from University of California, Berkeley. He spent over two years evaluating various medical research models before founding the Myelin Repair Foundation.

Russell (Rusty) Bromley – Chief Operating Officer,

In 17 years as an executive with both American Hospital Supply and Baxter Healthcare, he developed new businesses worth in excess of $100 million in the high tech and research markets. Rusty also served as CEO of two companies serving hi tech, pharmaceutical and life science research markets. He holds a BA in biochemistry from Rice University.

Volunteer Directors

Planning - Debra Normington – 10 years as Executive VP of Service Sales and Finance for Cisco Systems
Partnering- Ron Roth – Co-chairman, tax department, Wilson, Sonsini, Goodrich, and Rosati (retired)
Marketing- Ed Murphy – Marketing and Communications Executive with Adobe, Borland and Grid Systems
Volunteers- Yolanda Gonzalez – Human Resources Executive with CenterBeam, AMD, NEC and Honeywell-Bull
IT Systems- Paul Aviles – Application Engineer with Ultimate Software, previously CIO Shula’s Steak Houses, and Technology Director, Arthur Andersen LLP

A lean professional management team-supplemented by volunteers... Ensures maximum funding for research
An Achievable Timetable

2002 - Feasibility
- Formed initial team for feasibility assessment
- Assessed research landscape
- Developed collaboration model
- Identified candidates and recruited leading scientists
- Obtained 501(c)(3) not for profit status
- Recruited expert assistance

2003 - Preparation
- Completed strategic plan
- Developed business plan
- Developed the Collaborative Research Process®
- Developed research plan
- Identified and recruited Scientific Advisory Board (SAB)
- Developed and implemented intellectual property protection plan
- Developed information technology plan
- Created support infrastructure
  - Corporate partner strategy

2004 - 2009 Execution Cycle
- Plan approval
- Budget approval
- Research projects allocated
- Experiments begin
- Monthly videoconferences
- 4-month progress reviews
- Annual conference

A New Model. A Narrow Focus. A 5 Year Timeline.
Research Plan Summary

The Myelin Repair Foundation (MRF) research plan was designed to act as a roadmap that guides the identification, execution and coordination of projects necessary to:

- Understand the myelination process in the central nervous system (CNS)
- Understand how normal myelination is corrupted by multiple sclerosis (MS)
- Identify therapeutic targets and agents to effectively restore normal levels of remyelination
- Validate therapeutic targets and agents in both animal models and in vitro against human cells
- Have validated targets and agents ready for transfer to commercialization partners within 5 years

The MRF uses a grant process that allows each investigator a great deal of flexibility in the design and execution of their research, within a well defined and structured framework.

Problem definition: understanding the systems biology of myelination

The MRF research planning process began with the selection of Principal Investigators (PI) knowledgeable in neurobiology, with experience and expertise with myelin, and a broad, complimentary range of scientific backgrounds and specialties. As a team they were asked to develop a map of the biological interactions likely to play key a role in the processes listed above. In addition, they catalogued unanswered questions that must be resolved in order to understand how MS disrupts myelination and how it can be repaired. The scope of the project was defined from these critical questions and the associated map of biological interactions created (page 17).

Developing a collaborative research plan

Once the scope of the project was defined, each investigator was asked to outline a sequence of research projects in their areas of expertise, to be led by their laboratory. Each was asked to identify projects that must be started immediately, in Phase I, to facilitate the achievement of the overall plan. In some cases these projects will provide critical research tools that do not exist commercially. This includes new animal models that more closely mimic human MS, imaging systems to measure and monitor myelination in vivo, and novel cellular co-culture systems that allow the study of binary interactions to evaluate drug targets.
Throughout this process, the team evaluated each proposed research project to ensure maximum contribution to achieving project objectives, against both the overall roadmap and the key unanswered questions. Once the team had agreed on the Phase I projects, the team leader for each project identified the collaboration support required from other laboratories. It is the responsibility of MRF management to provide the tools, support and accounting to ensure that these collaborations run smoothly and that effective coordination between labs is achieved.

The collaboration schematic illustrates the areas of contribution by each PI and lab.

**Collaboration Schematic**

Key:
- **BB** - Barres lab, Stanford
- **BP** - Popko lab, Univ. Chicago
- **DC** - Colman lab, McGill Med
- **RM** - R Miller lab, Case Western
- **SM** - S Miller lab, Northwestern

**A New Model. A Narrow Focus. A 5 Year Timeline**
A flexible process with clear objectives

Because this effort involves basic discovery research it is difficult if not impossible to predict an exact timeframe for individual projects. Furthermore, the MRF encourages its investigators to try high-risk experiments, since more is often learned by failure than by success. Since relative priorities and future investigative sequences will be in large part determined by the results of current investigations, the MRF planning process is flexible by design. The research plan will be reviewed and adjusted based on results, every 4 months by the Principal Investigators. Proposed modifications will be approved by the SAB.

Since understanding the sequence requirements and interdependencies of these projects is critical to effective coordination and resource utilization, progress will be tracked via a project table rather than a timetable. In this manner, rate limiting steps can be identified early in the process and additional resources focused on timely completion of experiments or projects that are key to the next project in sequence. It will be the responsibility of the Principal Investigators to evaluate the performance of each participating laboratory during the 4-month review process.

Myelin Repair Research Strategy

Phase I – Understand processes of normal myelination, create assays and animal models
1. Identify or develop suitable animal models of myelination that mimic human biology.
2. Identify or develop cell culture models for future rapid screening.
3. Develop and validate quantitative in vivo assays for remyelination.
4. Understand the normal biology of myelin repair and the relationship between developmental myelination and remyelination.

Phase II – Understand How MS Disrupts Normal Myelination
5. Identify the pathogenic mechanisms that prevent remyelination.
6. Determine whether local, environmental factors in the central nervous system prevent myelin repair.
7. Confirm effects in animal models and cell culture.
8. Determine whether Multiple Sclerosis symptoms correlate with diagnostic criteria (ie, extent of demyelination). Understand the role of axon loss in functional capability.

Phase III – Identify Targets for Remyelination Process
9. Determine whether endogenous cells can be stimulated to enhance remyelination.
10. Ascertain whether normal cellular interactions can be restored or disrupted interactions can be blocked.
11. Ascertain whether remyelination restores functional capacity and investigate effects of timing and extent of remyelination.
12. Test efficacy, toxicity and pharmacokinetics.
**Annual Funding Requirements**

**Research Funding:**

– Direct research funding to PIs - $1.5 Million to $4.0 Million per year

MRF will provide research grants to each laboratory sufficient to execute the projects in the annual research plan. Each university will provide annual accounting by project. Budgets will be adjusted based on changes to the research plan.

– Additional research services – 500K to $1 Million per year

The MRF will contract with laboratories outside the research consortium for research and services that may not be available within the participating institutions. (i.e. high throughput screening of drug targets)

– Intellectual property protection costs - $200K to $500K per year

The MRF will identify discoveries that warrant patent protection, coordinate and fund patent filings and defense for intellectual property created by MRF funded research.

**MRF Administration:** $300 K to $500K per year

Administrative expense covers all non-research related activities including fundraising, external communications and accounting. Administrative staff will be limited to no more than three full-time employees.

**5 year total required: $20 to 25 Million**

**Funding Plan and Sources**

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<th>2004</th>
<th>2005</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
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<tr>
<td>$5M</td>
<td>$5M</td>
<td>$15M</td>
<td>$20M</td>
<td>$25M</td>
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**Phase 1**

- Charter Sponsors

**Phase 2**

- Private donors & foundations
- Grass roots
- Public sources (NIH, NMSS, Etc.)
- Universities

**Phase 3**

- Private donors & foundations
- Grass roots
- Public sources (NIH, NMSS, Etc.)
- Universities
- Corporate Grants

**Finite research goals, Finite funding requirements**
**Risks & Mitigations**

Risks were assessed and evaluated throughout the strategic and business planning process. Similar attention was given to the risks inherent in the Collaborative Research Process® and Research Plan. As with any start-up venture, innovation involves a certain degree of risk. MRF management, investigators, scientific advisors and directors have made every effort to identify and mitigate these risks.

Feedback from business leaders, venture capitalists and eminent scientists who have reviewed our plans has been overwhelmingly positive and their valuable input has been incorporated. This table summarizes areas we have identified as being most critical to our success and how we will address the risks on an ongoing basis.

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<tr>
<th>Risk</th>
<th>Mitigation</th>
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<tr>
<td>Innovative new research model</td>
<td>Input and support from researchers</td>
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<td></td>
<td>Input and support from industry</td>
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<tr>
<td></td>
<td>Input and support from people with MS</td>
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<tr>
<td>MRF has a new business model</td>
<td>Best practices from industry and academia</td>
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<td></td>
<td>Management team experience</td>
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<td></td>
<td>Copyrighted Collaborative Research Process</td>
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<tr>
<td>Keeping research on-time and on-task</td>
<td>Research roadmap and 5-year plan</td>
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<td></td>
<td>Active Scientific Advisory Board oversight</td>
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<td></td>
<td>Active management team participation</td>
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<tr>
<td>Geographically dispersed team</td>
<td>Virtual institute via IT infrastructure</td>
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<tr>
<td></td>
<td>Research team training and team building</td>
</tr>
<tr>
<td></td>
<td>Annual research meeting &amp; conference</td>
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<tr>
<td>Discoveries not commercialized</td>
<td>Intellectual property protection process</td>
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<td></td>
<td>Corporate partnerships</td>
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<td>Proactive marketing &amp; licensing of drug targets</td>
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<tr>
<td>Timely availability of funding</td>
<td>Results based funding phases</td>
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<td></td>
<td>Multi-threaded funding strategy</td>
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<td>Accountable management team</td>
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Why Support the Myelin Repair Foundation?

- **MS treatments are needed NOW!** Over 2.5 million people suffer the effects of MS today and millions more will suffer before a cure is found.

- **Designed for success** – We have applied the best principles of business and academic science to create a new model that is simple, straightforward and makes good intuitive sense. Our objectives are clearly defined, finite and focused and we have commitment from all participants.

- **Not investing in bureaucracy** – MRF is committed to minimizing operating expenses and maximizing research results. Once the job is completed, the MRF may be disbanded or if future royalty revenues warrant, MRF could become a source of funding for other research efforts.

- **Results documented for donors** – Donors to MRF will be able to see the direct results of their contributions through our annual reports, annual research conferences or by visiting our investigators.

- **Patented discoveries drive rapid drug development** – By rigorously protecting discoveries, MRF will build a patent portfolio that will make development of targets financially attractive to commercialization partners. In addition to financial incentives, MRF will provide partners with development tools and support from thousands in the MS community to accelerate clinical trials and reduce costs.

- **Patent portfolio funds future research**- Unlike other not for profit organizations, once our goal of developing treatment targets is achieved MRF will not continue to ask donors for financial support. If MRF patents result in future revenue, MRF will supply the Collaborative Research Process® and funding to other research efforts
  
  o **Invitation to the MRF annual conference** – By becoming a MRF sponsor you will be invited to attend the Annual Research Conference where members of the MRF research team will present their finding from the previous year’s research, along with presentations from other leading scientists working on MS research.

  o **Acknowledgement in MRF communications**

  
  Your contribution will **directly improve the quality of life for millions with MS in this generation!**