

Form **8937**  
(December 2017)  
Department of the Treasury  
Internal Revenue Service

### Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

▶ See separate instructions.

#### Part I Reporting Issuer

1 Issuer's name <b>CYPRIMUM THERAPEUTICS, INC.</b>		2 Issuer's employer identification number (EIN) <b>47-1202840</b>	
3 Name of contact for additional information <b>ROBYN HUNTER</b>	4 Telephone No. of contact <b>781-652-4507</b>	5 Email address of contact <b>RHUNTER@FORTRESSBIOTECH.COM</b>	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact <b>2 GANSEVOORT STREET, 9TH FLOOR</b>		7 City, town, or post office, state, and ZIP code of contact <b>NEW YORK, NY 10014</b>	
8 Date of action <b>SEE STATEMENT 1</b>	9 Classification and description <b>9.375% SERIES A CUMULATIVE REDEEMABLE PERPETUAL PREFERRED STOCK</b>		
10 CUSIP number <b>N/A</b>	11 Serial number(s) <b>N/A</b>	12 Ticker symbol <b>N/A</b>	13 Account number(s) <b>N/A</b>

#### Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ **CYPRIMUM THERAPEUTICS, INC. ("CYPRIMUM") PAID CASH DISTRIBUTIONS TO ITS 9.375% SERIES A CUMULATIVE REDEEMABLE PERPETUAL PREFERRED STOCK ("SERIES A PREFERRED STOCK") SHAREHOLDERS ON SEPTEMBER 30, OCTOBER 31, NOVEMBER 30, AND DECEMBER 31, 2020.**

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ▶ **CYPRIMUM PAID MONTHLY CASH DISTRIBUTIONS OF \$0.1953125 PER SHARE OF SERIES A PREFERRED STOCK ON SEPTEMBER 30, 2020, OCTOBER 31, 2020, NOVEMBER 30, 2020, AND DECEMBER 31, 2020. CYPRIMUM DID NOT HAVE CURRENT OR ACCUMULATED EARNINGS AND PROFITS AS OF DECEMBER 31, 2020. THE DISTRIBUTIONS CONSTITUTED RETURN OF CAPITAL TO THE EXTENT OF THE SHAREHOLDER'S TAX BASIS. TO THE EXTENT THAT THE DISTRIBUTIONS EXCEEDED THE SHAREHOLDER'S TAX BASIS, THE SHAREHOLDER WOULD RECOGNIZE A GAIN.**

**THE RETURN OF CAPITAL TO THE EXTENT OF THE SHAREHOLDER'S TAX BASIS IS AS FOLLOWS:**  
**DISTRIBUTIONS PAID ON:** **PER SHARE REDUCTION OF BASIS IN SERIES A PREFERRED STOCK:**  
**9/30/2020, 10/31/2020, 11/30/2020, 12/31/2020** **\$0.1953125**

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ **THE SHAREHOLDER'S TAX BASIS IS REDUCED BY \$0.1953125, MULTIPLIED BY THE NUMBER OF SHARES OF SERIES A PREFERRED STOCK THE SHAREHOLDER OWNS.**

**Part II Organizational Action** (continued)

**17** List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ INTERNAL REVENUE CODE IRC SECTIONS 301(c), 316(a) AND 1016.

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**18** Can any resulting loss be recognized? ▶ THE DISTRIBUTION ON A PER SHARE BASIS REDUCED THE SHAREHOLDER'S TAX BASIS OF EACH SHARE HELD ON THE DATE OF DISTRIBUTION TO THE EXTENT OF THE SHAREHOLDER'S TAX BASIS. UPON DISPOSITION OF ALL OR A PORTION OF THE SHARES, THE SHAREHOLDER SHOULD RECOGNIZE GREATER TAX GAIN OR LESS TAX LOSS.

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**19** Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ THE REPORTABLE TAX YEAR FOR THE DISTRIBUTION FOR EACH SHAREHOLDER IS THE TAXABLE YEAR THAT INCLUDES DECEMBER 31, 2020.

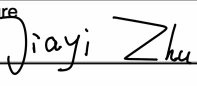
THE INFORMATION CONTAINED ON THIS FORM DOES NOT CONSTITUTE TAX ADVICE. SHAREHOLDERS OF SERIES A PREFERRED STOCK ARE URGED TO CONSULT THEIR OWN TAX ADVISORS WITH RESPECT TO THEIR INDIVIDUAL TAX CONSEQUENCES OF THE DISTRIBUTIONS.

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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here** Signature ▶  Date ▶ 06.29.2021

Print your name ▶ Robyn M. Hunter Title ▶ Secretary & Treasurer

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	<u>JIAYI ZHU</u>		<u>6/30/2021</u>		<u>P02018609</u>
	Firm's name ▶ <u>MOFFETT &amp; ASSOCIATES, INC.</u>	Firm's EIN ▶ <u>84-4073328</u>		Phone no. <u>310-820-1025</u>	
Firm's address ▶ <u>P.O. BOX 67 EL SEGUNDO, CA 90245</u>					

**Cyprium Therapeutics, Inc.**  
**FEIN: 47-1202840**  
**Attachment to and Made Part of Form 8937**

**PART I: Reporting Issuer**

Box 9 *Date of action:*

September 30, 2020, October 31, 2020, November 30, 2020 and December 31, 2020