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

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting Iss	uer		<u> </u>				
1 Issuer's name			2 Issuer's employer identification number (EIN)				
CYPRIUM THERAPEUTICS, IN		47-1202840					
3 Name of contact for additio	nal information	4 Telephone No. of contact	5 Email address of contact				
DAVID JIN		212-574-2810	DJIN@FORTRESSBIOTECH.COM				
6 Number and street (or P.O.	box if mail is not						
		,,,					
1111 KANE CONCOURSE, SU	ITE 301	BAY HARBOR ISLANDS, FL 33154					
8 Date of action							
SEE STATEMENT 1			REDEEMABLE PERPETUAL PREFERRED STOCK				
10 CUSIP number 11 Serial number		12 Ticker symbol 13 Account number(s)					
N/A Part II Organizationa	N/A	N/A	See back of form for additional questions.				
			date against which shareholders' ownership is measured for				
			2024, CYPRIUM THERAPEUTICS, INC. ("CYPRIUM")				
		ERIES A CUMULATIVE REDEEMABL	LE PERPETUAL PREFERRED STOCK ("SERIES A				
PREFERRED STOCK") SHARE							
			OF THE CLOSE OF BUSINESS ON JANUARY 15, 2024,				
			S, WERE ELIGIBLE TO RECEIVE CASH				
DISTRIBUTIONS OF \$0.195312	25 FOR EVERY	SHARE HELD.					
	_		curity in the hands of a U.S. taxpayer as an adjustment per				
share or as a percentage	of old basis $\triangleright$ $\underline{C}$	YPRIUM PAID CASH DISTRIBUTIONS	OF \$0.1953125 PER SHARE OF SERIES A PREFERRED				
STOCK ON JANUARY 31, 202	4, FEBRUARY 2	9, 2024, AND MARCH 31, 2024.					
CYPRIUM DOES NOT HAVE A	CCUMULATED	EARNINGS AND PROFITS ("AE&P")	AS OF JANUARY 1, 2024 AND DOES NOT BELIEVE IT				
WILL HAVE CURRENT YEAR	E&P ("CE&P") E	SASED ON THE LATEST FINANCIALS	S AVAILABLE. HOWEVER, 2024 CE&P CANNOT BE				
FINALLY DETERMINED UNTIL	THE 2024 TAX	YEAR IS CLOSED. IF CYPRIUM LATI	ER DETERMINES THAT IT HAS 2023 CE&P, CYPRIUM WILL				
FILE A CORRECTED FORM 89							
			TIONS DESCRIBED ABOVE CONSTITUTE A RETURN				
OF CAPITAL TO THE EXTENT OF THE SHAREHOLDER'S TAX BASIS. TO THE EXTENT THAT THE DISTRIBUTION EXCEEDS							
THE SHAREHOLDER'S TAX BASIS, THE SHAREHOLDER MAY BE REQUIRED TO RECOGNIZE A TAXABLE GAIN.							
40 December the color letters	Cilia di Santa da I	and a second than shall a though a constraint a thin second	to take a contract the contract of a configuration				
	•	• •	lculation, such as the market values of securities and the				
			3125, MULTIPLIED BY THE NUMBER OF SHARES OF				
SERIES A PREFERRED STOC	K THE SHAREH	OLDER OWNS.					

Part		<b>Organizational Action</b> (co	ntinued)		
<b>17</b> Li	st the	applicable Internal Revenue Cod	le section(s) and subsection(s) upon w	hich the tax treatment is based	<b>&gt;</b>
INTERN	IAL R	EVENUE CODE IRC SECTIONS	301(c), 316(a) AND 1016.		
<b>18</b> C	an any	resulting loss be recognized? ►	THE DISTRIBUTION ON A PER SE	HARE BASIS SHOULD REDUC	E THE SHAREHOLDER'S TAX
BASIS	OF EA	CH SHARE HELD ON THE DAT	TE OF DISTRIBUTION. UPON DISPO	SITION OF ALL OR A PORTIC	N OF THE SHARES,
THE SH	IAREH	HOLDER SHOULD RECOGNIZE	GREATER TAX GAIN OR LESS TAX	K LOSS.	
<b>19</b> Pi	rovide	any other information necessary	to implement the adjustment, such as	s the reportable tax year $ ightharpoonup$	REPORTABLE TAX YEAR FOR
THE DIS	STRIB	UTION FOR EACH SHAREHOL	DER IS THE TAXABLE YEAR THAT	INCLUDES DECEMBER 31, 20	024.
THE IN	FORM	ATION CONTAINED ON THIS F	ORM DOES NOT CONSTITUTE TAX	ADVICE. SHAREHOLDERS O	F SERIES A PREFERRED STOCK
ARE UF	RGED	TO CONSULT THEIR OWN TAX	ADVISORS WITH RESPECT TO TH	IEIR INDIVIDUAL TAX CONSE	QUENCES OF THE
DISTRII	BUTIC	NS.			
	Unde	r penalties of perjury, I declare that I	have examined this return, including acco	mpanying schedules and statement	s, and to the best of my knowledge and
	belief	, it is true, correct, and complete. Dec	claration of preparer (other than officer) is b	ased on all information of which pre	parer has any knowledge.
Sign					
Here	Signa	uture David Jis	r	Date ► 4/15/24	
	Jigilio				
	Print	your name ► DAVID JIN		Title ► TREASU	RER
Del I	1 11111	Print/Type preparer's name	Preparer's signature	Date	- PTIN
Paid		JIAYI ZHU	1 Tions Thu	4/16/24	Check if self-employed P02018609
Prepa		Firm's name ► WILLIAMSMA	PSTONLI C 1 VM 1 — 1 M		Firm's EIN ► 46-4311251
Use C	nly		IGTON STREET 9TH FLOOR, BOST	ON MA 02108	Phone no. 310-820-1025
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Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

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

**PART I: Reporting Issuer** 

Box 9 **Date of action:** 

January 31, 2024, February 29, 2024, and March 31, 2024.