

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 OR 15(d)
of The Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): August 13, 2026

Vivani Medical, Inc.
(Exact name of registrant as specified in its charter)

Delaware
(State or other jurisdiction of
incorporation)

001-36747
(Commission
File Number)

02-0692322
(IRS Employer
Identification No.)

1350 S. Loop Road
Alameda, California
(Address of principal executive offices)

94502
(Zip Code)

Registrant's telephone number, including area code: (415) 506-8462

(Former name or former address, if changed since last report.)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

- ☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- ☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- ☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- ☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common Stock, par value \$0.0001 per share	VANI	The Nasdaq Capital Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company ☐

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 2.02 Results of Operations and Financial Condition.

On August 13, 2026, Vivani Medical, Inc. (the “Company”) issued a press release entitled “*Vivani Medical Reports Second Quarter 2026 Financial Results and Provides Business Update*” which is attached to this Current Report on Form 8-K as Exhibit 99.1 and is incorporated by reference herein.

The information contained in this Item 2.02 and Exhibit 99.1 hereto shall not be deemed “filed” for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the “Exchange Act”), or incorporated by reference in any filing under the Securities Act of 1933, as amended (the “Securities Act”), or the Exchange Act, whether made before or after the date hereof, except as shall be expressly set forth by reference in such a filing.

Item 7.01. Regulation FD Disclosure

The Company from time to time presents and/or distributes to the investment community at various industry and other conferences slide presentations to provide updates and summaries of its business. These slides are attached to this Current Report on Form 8-K as Exhibit 99.2 and are incorporated by reference herein. The Company is also posting to the “Investors” portion of its website a copy of its current corporate slide presentation. The slides speak as of the date of this Current Report on Form 8-K. While the Company may elect to update the slides in the future or reflect events and circumstances occurring or existing after the date of this Current Report on Form 8-K, the Company specifically disclaims any obligation to do so.

The information contained in this Item 7.01 and Exhibit 99.2 hereto shall not be deemed “filed” for purposes of Section 18 of the Exchange Act, or incorporated by reference in any filing under the Securities Act, whether made before or after the date hereof, or the Exchange Act, except as shall be expressly set forth by reference in such a filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

Exhibit No.	Description
99.1	Press Release issued August 13, 2026.
99.2	Vivani Medical, Inc. slide presentation dated August 13, 2026.
104	Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned thereunto duly authorized.

VIVANI MEDICAL, INC.

Date: August 13, 2026

By: /s/ Donald Dwyer
Name: Donald Dwyer
Title: Chief Business Officer



Vivani Medical Reports Second Quarter 2026 Financial Results and Provides Business Update

All participants successfully dosed in SLIM-1™, the Company's first-in-human Phase 1 trial of NPM-139, a miniature, ultra long-acting semaglutide implant for chronic weight management; top-line data expected in November 2026

Company entered into non-exclusive agreement with Novo Nordisk to evaluate NPM-139 and Vivani's proprietary NanoPortal™ technology

Completion of the Cortigent-ClearOne merger into Cortigent Holdings and initiation of trading on the Nasdaq exchange under ticker symbol CRGT anticipated in the third quarter of 2026

ALAMEDA, Calif., August 13, 2026 (GLOBE NEWSWIRE) -- Vivani Medical, Inc. (Nasdaq: VANI) ("Vivani" or the "Company"), a clinical-stage biopharmaceutical company developing miniature, ultra long-acting drug implants utilizing its proprietary NanoPortal™ technology, today reported financial results for the second quarter ended June 30, 2026, and highlighted recent business progress.

"I am very pleased with the progress and achievements that Vivani made in all aspects of our business during the second quarter of 2026. We accelerated clinical development of lead asset NPM-139 (semaglutide implant), entered into a non-exclusive agreement with Novo Nordisk enabling them to evaluate NPM-139, and signed a merger agreement with Nasdaq-listed ClearOne which, upon successful closing, would finance and establish our neurostimulation subsidiary Cortigent as a stand-alone publicly traded company," said Adam Mendelsohn, Ph.D., CEO of Vivani Medical. "We enrolled and dosed all 20 SLIM-1 participants ahead of schedule, with every insertion procedure completed successfully. We expect to be able to share top-line data in November, an exciting milestone that we anticipate will support advancing NPM-139 into a Phase 2 dose-ranging trial in 2027. Combined with the agreement with Novo Nordisk announced in July, these positive developments further strengthen our conviction in the potential of our pipeline to transform chronic disease management for the roughly half of patients who struggle with medication adherence. Today, Vivani remains the only developer of convenient, ultra-long-acting and reversible GLP-1 candidates with the potential for administration once- or twice yearly during a routine primary care office visit."

Vivani's NanoPortal implant technology has the potential to enable patients to maintain continuous and therapeutic drug exposure levels with convenient once or twice-yearly administration while still enabling the ability to rapidly reverse GLP-1 drug exposure in patients when cessation of therapy is needed or desired. Reversibility can be an important clinical consideration in certain situations including when a woman becomes pregnant or when patients undergoing surgery have an increased aspiration risk.

Recent Business Highlights

On August 6, 2026, Vivani announced full enrollment and successful initial dosing of all participants in its SLIM-1™ Phase 1 trial for NPM-139, a miniature, subdermal semaglutide implant designed to provide six- to twelve-months of continuous drug delivery utilizing its proprietary NanoPortal™ technology. The trial of 20 GLP-1 naïve participants in Australia includes low-doses of NPM-139 and Wegovy® to assess safety, tolerability, and pharmacokinetics. Changes in weight will be measured. Top-line data from SLIM-1 are expected in November 2026, which the Company anticipates will pave the way for initiation of a Phase 2 dose-ranging trial in 2027.

On July 7, 2026, the Company announced the signing of an agreement with Novo Nordisk to enable Novo Nordisk to evaluate NPM-139, the Company's semaglutide drug implant. NPM-139, which utilizes Vivani's NanoPortal™ platform technology, is under development for chronic weight management. There are no exclusivity provisions for NPM-139, or Vivani's proprietary NanoPortal technology associated with this agreement.

Also in July 2026, Vivani announced that its wholly owned subsidiary Cortigent, Inc., a developer of brain-computer interface devices based on precision neurostimulation technology, entered into a definitive merger agreement with Nasdaq-listed ClearOne, Inc. The transaction, which is expected to close in the third quarter of 2026 subject to customary closing conditions, is designed to establish Cortigent as a separately listed public company, reduce Vivani's direct expenditures related to Cortigent, and enable the Vivani team to focus fully on advancing its portfolio of miniature, ultra long-acting drug implants.

On June 26, 2026, the Company announced the appointment of August J. Moretti to its board of directors. Mr. Moretti joins the board with extensive operating and financial executive experience spanning all phases of company growth. Mr. Moretti served as CFO of 4D Molecular Therapeutics from 2019 until his retirement. Prior to this he held CFO positions at Assertio Therapeutics until its acquisition by Zydus Lifesciences; Alexza Pharmaceuticals until its acquisition by Ferrer Pharmaceuticals; and Alavita, Inc. Mr. Moretti holds a B.A. in Economics from Princeton University and a J.D. from Harvard Law School.

On June 25, 2026, Vivani announced that it had received approval from Bellberry, a human research ethics committee (HREC) in Australia to initiate SLIM-1™, a Phase 1 clinical trial of NPM-139, a semaglutide implant.

Upcoming Anticipated Milestones

Completion of SLIM-1, the on-going Phase 1 study of low-dose NPM-139, Vivani's miniature, ultra long-acting semaglutide implant under development for chronic weight management, and anticipated reporting of top-line results in November 2026.

Preparation, and submission of an Investigational New Drug ("IND") Application for NPM-139 to support initiation of a proposed Phase 2 dose-ranging study of this semaglutide implant planned for 2027.

Transition of Cortigent into an independent, publicly traded company following completion of all customary closing and related financing activities. We anticipate establishment of the post-merger company, renamed Cortigent Holdings (d/b/a Cortigent), to be traded on the Nasdaq exchange under the ticker CRGT in the third quarter of 2026.

Second Quarter 2026 Financial Results

Cash: As of June 30, 2026, Vivani had cash, cash equivalents and restricted cash totaling \$20.8 million, compared to \$17.6 million as of December 31, 2025. The increase of \$3.2 million is primarily attributed to tranche closings associated with share purchase agreements entered into in 2025 with an entity affiliated with one of our independent directors and a private placement and registered direct offering completed in January, 2026, offset by net loss for the six months ending June 30, 2026, of \$13.2 million.

Research and development expense, net of grants: Research and development expense, net of grants, during the three months ended June 30, 2026 was \$4.5 million, compared to \$4.8 million during the three months ended June 30, 2025. The decrease of \$0.3 million, or 6%, was primarily attributable to the decrease in both the clinical trial related expense and development expense from our Biopharm Division.

General and administrative expense, net of grants: General and administrative expense, net of grants, during the three months ended June 30, 2026 was \$2.4 million, compared to \$2.7 million during the three months ended June 30, 2025. The decrease of \$0.3 million, or 11%, was primarily attributable to the decrease in the professional services from our Neurostimulation Division and our Biopharm Division.

Other income, net: Other income, net during the three months ended June 30, 2026 was \$0.5 million, compared to \$0.3 million during the three months ended June 30, 2025. The increase of \$0.2 million was primarily attributable to the derecognition of a contract liability previously held by the Neurostimulation Division, offset by lower interest income earned during the period

Net loss: For the foregoing reasons, we had a net loss of \$6.4 million during the three months ended June 30, 2026 compared to \$7.1 million during the three months ended June 30, 2025.

About SLIM-1™ Trial

SLIM-1 is an open-label, active-controlled trial evaluating a low-dose NPM-139 (semaglutide implant) given to 10 participants, and the starting dose of Wegovy (0.25mg/week semaglutide injection) is also given to 10 participants, over a four-week duration. The trial is designed to evaluate the safety, tolerability and pharmacokinetic profile in overweight or obese participants who are otherwise healthy. Top-line results from SLIM-1 are expected to be available in November.

About Vivani Medical, Inc.

Leveraging its proprietary NanoPortal™ platform, Vivani develops miniature, biopharmaceutical implants designed to deliver drug molecules steadily over extended periods of time with the goal of guaranteeing adherence and improving patient tolerance to their medication. Vivani is developing a portfolio of GLP-1 based implants for metabolic diseases including obesity and type 2 diabetes. These NanoPortal implants are designed for once- or twice-yearly administration to provide patients with the opportunity to realize the full potential benefit of their medication by avoiding the numerous challenges associated with the daily or weekly administration of orals and injectables, including tolerability issues and loss of efficacy. Medication non-adherence occurs when patients do not take their medication as prescribed. This affects an alarming number of patients, approximately 50%, including those taking daily pills. For more information, please visit: www.vivani.com.

About Cortigent, Inc.

Cortigent, Inc., a wholly owned subsidiary of Vivani, is developing brain implant devices to help patients recover critical body functions. Its patent-protected precision neurostimulation technology platform leverages neuroscience and proprietary microelectronics to create advanced medical devices. Vivani's predecessor, Second Sight Medical Products, previously marketed Argus® II, the first and only medical device to obtain FDA approval to treat a rare form of blindness. This innovative device has helped hundreds of profoundly blind patients to achieve meaningful visual perception. Cortigent's next generation investigational system, the Orion® cortical stimulation system, has been designed to treat blindness caused by common conditions including glaucoma and diabetic retinopathy. Orion has an FDA Breakthrough Device designation, completed a 6-year Early Feasibility Study in 2025 with promising safety and efficacy results and is covered by an extensive intellectual property estate. Cortigent is also applying its core technology to improving recovery of arm and hand motion in patients with paralysis due to stroke. For more information and patient videos, please visit: www.cortigent.com.

Forward-Looking Statements

This press release contains certain “forward-looking statements” within the meaning of the “safe harbor” provisions of the U.S. Private Securities Litigation Reform Act of 1995. Forward-looking statements can be identified by words such as: “target,” “believe,” “expect,” “will,” “may,” “anticipate,” “estimate,” “would,” “positioned,” “future,” and other similar expressions that are used in this press release, including statements regarding Vivani's business, products in development, including the therapeutic potential or the planned development thereof, and its technology, strategy, cash position and financial runway. Forward-looking statements are neither historical facts nor assurances of future performance. Instead, they are based only on Vivani's current beliefs, expectations, and assumptions. Because forward-looking statements relate to the future, they are subject to inherent uncertainties, risks and changes in circumstances that are difficult to predict and many of which are outside of Vivani's control. These statements involve risks and uncertainties that could cause actual results to differ materially from those reflected in such statements, including, without limitation, risks of unexpected costs or delays, and risks and uncertainties associated with the development and commercialization of products and product candidates that may impact or alter anticipated business plans, strategies and objectives. Actual results and outcomes may differ materially from those indicated in the forward-looking statements. Therefore, you should not rely on any of these forward-looking statements. The foregoing sets forth many, but not all, of the factors that could cause actual results to differ from Vivani's expectations in any forward-looking statement. There may be additional risks that the Company considers immaterial, or which are unknown. A further list and description of risks and uncertainties are more fully described in periodic filings with the U.S. Securities and Exchange Commission (the “SEC”) including the factors described in Vivani's most recent Quarterly Report on Form 10-Q filed with the SEC on May 13, 2026, as updated by future filings with the SEC. Any forward-looking statement made by Vivani in this press release is based only on information currently available to the Company and speaks only as of the date of this press release. The Company undertakes no obligation to publicly update any forward-looking statement, whether written or oral, that may be made from time to time, whether as a result of added information, future developments or otherwise, except as required by law.

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AND SUBSIDIARIES

Condensed Consolidated Balance Sheets (Unaudited)
(In thousands, except per share data)

	June 30, 2026	December 31, 2025
ASSETS		
CURRENT ASSETS:		
Cash and cash equivalents	\$ 19,894	\$ 16,232
R&D tax credit incentive receivable	709	654
Prepaid expenses and other current assets	1,032	1,012
Total current assets	21,635	17,898
Property and equipment, net	2,850	2,879
Operating lease right-of-use assets, net	16,169	17,230
Restricted cash	892	1,338
Deposits and other assets	93	48
TOTAL ASSETS	\$ 41,639	\$ 39,393
LIABILITIES AND STOCKHOLDERS' EQUITY		
CURRENT LIABILITIES:		
Accounts payable	\$ 1,195	\$ 1,032
Accrued expenses	1,629	1,736
Litigation accrual	1,675	1,675
Accrued compensation expense	317	365
Lease liability, current portion	1,843	1,794
Total current liabilities	6,659	6,602
Lease liability, noncurrent portion	16,013	17,061
TOTAL LIABILITIES	22,672	23,663
Commitments and contingencies (Note 12)		
Stockholders' equity:		
Common stock, par value \$0.0001 per share; 300,000 shares authorized; shares issued and outstanding: 0 and 76,428 at June 30, 2026 and December 31, 2025, respectively	9	8
Additional paid-in capital	180,609	164,225
Accumulated other comprehensive income	32	30
Accumulated deficit	(161,683)	(148,533)
TOTAL STOCKHOLDERS' EQUITY	18,967	15,730
TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY	\$ 41,639	\$ 39,393

**VIVANI MEDICAL, INC.
AND SUBSIDIARIES**

Condensed Consolidated Statements of Operations (Unaudited)
(In thousands, except per share data)

	Three Months Ended June 30,		Six Months Ended June 30,	
	2026	2025	2026	2025
Operating expenses:				
Research and development, net of grants	\$ 4,456	\$ 4,759	\$ 8,957	\$ 8,976
General and administrative, net of grants	2,418	2,703	4,864	5,044
Total operating expenses	6,874	7,462	13,821	14,020
Loss from operations	(6,874)	(7,462)	(13,821)	(14,020)
Other income, net	504	318	671	574
Net loss	\$ (6,370)	\$ (7,144)	\$ (13,150)	\$ (13,446)
Net loss per common share - basic and diluted	<u>\$ (0.07)</u>	<u>\$ (0.12)</u>	<u>\$ (0.16)</u>	<u>\$ (0.23)</u>
Weighted average common shares outstanding - basic and diluted	<u>87,090</u>	<u>59,244</u>	<u>84,196</u>	<u>59,240</u>



Vivani Medical, Inc.

Guaranteed Adherence.
Better Outcomes.

www.vivani.com



August 2026

Disclaimers

The following slides and any accompanying oral presentation contain forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended, which are intended to be covered by the "safe harbor" created by those sections. All statements in this release that are not based on historical fact are "forward looking statements." These statements may be identified by words such as "estimates," "anticipates," "projects," "plans" or "planned," "strategy," "goal," "seeks," "may," "will," "expects," "intends," "believes," "should," and similar expressions, or the negative versions thereof, and which also may be identified by their context. All statements that address operating performance or events or developments that Vivani Medical, Inc. ("Vivani", the "Company", "we" or "us") expects or anticipates will occur in the future, such as stated objectives or goals, our products and their therapeutic potential and planned development, the indications that we intend to target, our technology, our business and strategy, milestones, addressable markets, or that are not otherwise historical facts, are forward-looking statements. While management has based any forward-looking statements included in this presentation on its current expectations, the information on which such expectations were based may change. Forward-looking statements involve inherent risks and uncertainties which could cause actual results to differ materially from those in the forward-looking statements as a result of various factors. These risks and uncertainties include, but are not limited to, that we may fail to commence our planned future clinical trials for products under development; conduct any pre-clinical activities of our other products; our products may not demonstrate safety or efficacy in clinical trials; we may fail to secure marketing approvals for our products; there may be delays in regulatory approval or changes in regulatory framework that are out of our control; our estimation of addressable markets of our products may be inaccurate; we may fail to timely raise additional required funding; more efficient competitors or more effective competing treatment may emerge; we may be involved in disputes surrounding the use of our intellectual property crucial to our success; we may not be able to attract and retain key employees and qualified personnel; earlier study results may not be predictive of later stage study outcomes; and we are dependent on third-parties for some or all aspects of our product manufacturing, research and preclinical and clinical testing. Additional risks and uncertainties are described in our Annual Report on Form 10-K filed on March 26, 2026, our Quarterly Report on Form 10-Q filed on August 13, 2026, and our subsequent filings with the U.S. Securities and Exchange Commission. We urge you to consider those risks and uncertainties in evaluating our forward-looking statements. We caution readers not to place undue reliance upon any such forward-looking statements, which speak only as of the date made. Except as otherwise required by the federal securities laws, we disclaim any obligation or undertaking to publicly release any updates or revisions to any forward-looking statement contained herein (or elsewhere) to reflect any change in our expectations with regard thereto, or any change in events, conditions, or circumstances on which any such statement is based.

Certain information contained in this presentation relates to or is based on studies, publications, surveys and other data obtained from third party sources and the Company's own internal estimates and research. While we believe these third-party sources to be reliable as of the date of this presentation, we have not independently verified, and make no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third-party sources. Finally, while we believe our own internal research is reliable, such research has not been verified by any independent source. All of our therapies are still investigational and have not been approved by any regulatory authority for any use.

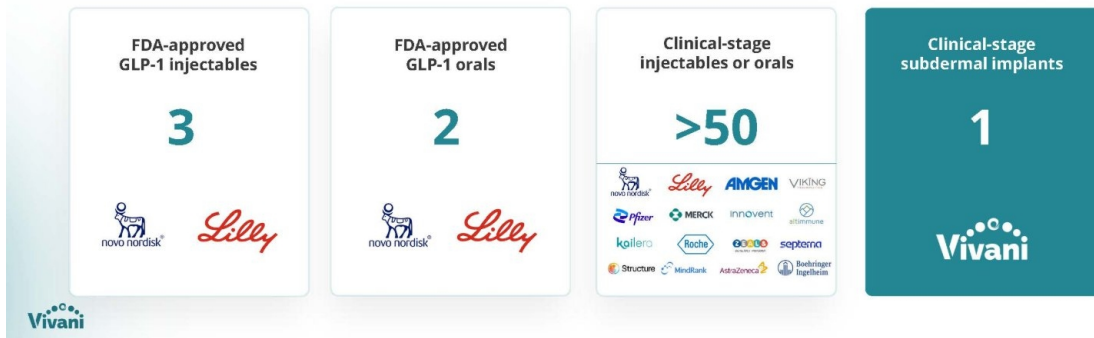


The obesity market is evolving

What will it take to be successful in the future?

In addition to the currently FDA-approved products on the market, there are over 50 in clinical development. All of these are injectables or orals. Vivani's implant uniquely combines infrequent (e.g., once- or twice-yearly) administration with the ability to stop treatment quickly, if necessary.

A differentiated route of administration presents opportunities to access untapped segments of this market, transition experienced patients to a longer-acting option, and help patients struggling with adherence to have access to a guaranteed-adherence option.



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Vivani's differentiated product candidates are designed to address unmet needs and expand the market

Market Challenges

- ✓ **Suboptimal outcomes**
Poor medication adherence (<50%) leads to loss of efficacy and rapid weight rebound
- ✓ **Tolerability issues**
Dose fluctuations and pharmacokinetic (PK) variability provoke side effects
- ✓ **Underserved & unaddressed populations**
Current options not ideal for hard-to-reach, difficult-to-manage, discretion- or convenience-seeking patients

The NanoPortal™ Promise

- ✓ **Convenient, guaranteed adherence**
Designed to maintain therapeutic effect and deliver medical and pharmacoeconomic outcomes
- ✓ **Stable delivery**
Expected to reduce side effects associated with fluctuating drug plasma levels
- ✓ **Differentiated modality**
Infrequent, in-office administration by primary care professionals solves logistical impasse for underserved populations

Vivani Medical, Inc.

A clinical stage innovator uniquely positioned to address the future challenges and opportunities of an evolving obesity market



Our focus: Enhance patient outcomes and GLP-1 market uptake in chronic diseases via unique route of administration, improved patient adherence, tolerability, and convenience



Technology: NanoPortal ultra long-acting, miniature drug implants designed to enable very infrequent dosing, including every 6 months, 12 months, or longer



Lead program: NPM-139 is a miniature, subdermal, semaglutide implant for chronic weight management in obese and overweight individuals



Clinical catalysts ahead: SLIM-1 (semaglutide implant) rapidly enrolled with all patients dosed; top-line data expected in Nov 2026; Phase 2 design underway for anticipated 2027 start



Platform Proof of Concept: Preclinical weight loss of ~20% sustained for a full year



*Morgan Stanley Research published in April 2026 estimates the global GLP-1 market could reach approximately \$190 billion by 2035 across obesity and diabetes, with an obesity-only TAM of approximately \$150 billion. Current eligible-patient penetration in the U.S. is estimated at approximately 6%; a bull-case projection is approximately \$240 billion. <https://www.morganstanley.com/insights/articles/gli1-weight-loss-market-may-double-190-billion-2035>

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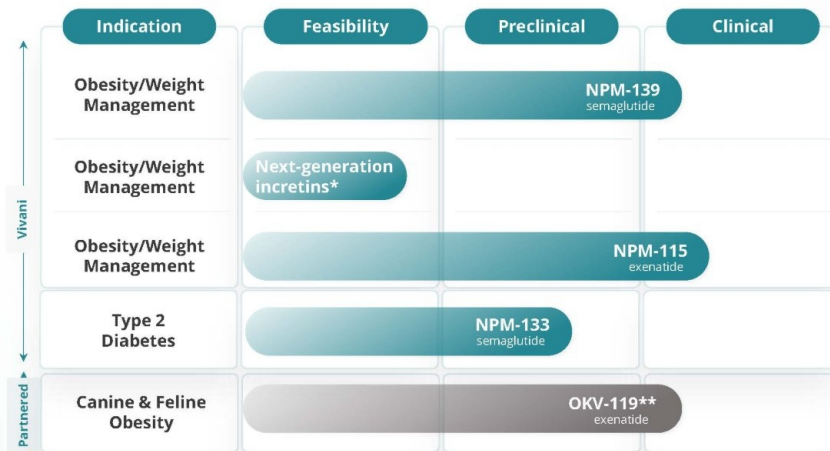
Nasdaq: VANI

- ✓ Cash runway expected to fund current operating plan, including completion of key milestones, through 1H2027
- ✓ SLIM-1 clinical study (NPM-139, semaglutide implant) and Novo Nordisk evaluation ongoing
- ✓ Highly specialized & proprietary manufacturing operations in Alameda, CA

GLP-1 market expected to grow to \$190B by 2035*

Company pipeline utilizing NanoPortal platform

If approved, Vivani products would provide a differentiated ultra long-acting option for patients



*This includes a number of next-generation incretins (i.e., more potent and/or multi-agonists), including retatrutide. Early retatrutide implant PK data is featured later in this presentation.

**In partnership with Okva Pharmaceuticals, Inc.

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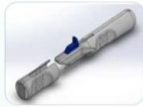
Good things come in small packages

01

GLP-1 implant & applicator



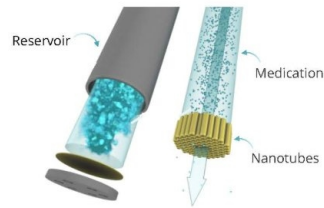
- ✓ Simple administration, in-office procedure to insert the implant comfortably under the skin for twice-yearly dosing designed to produce Wegovy®-level efficacy



02

NanoPortal device elements

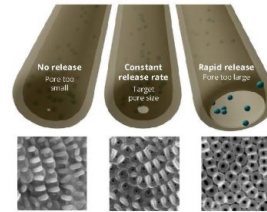
- ✓ Designed to assure adherence
- ✓ Long-term delivery
- ✓ Stable and tunable release profile



03

NanoPortal technology

- ✓ Nanotube pore size is precisely tunable to achieve near-constant release profiles

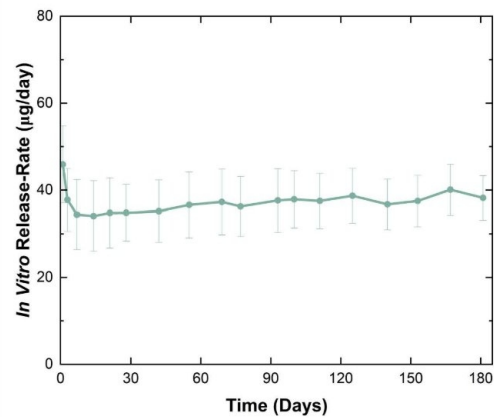


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NanoPortal delivers smooth, near-constant drug release

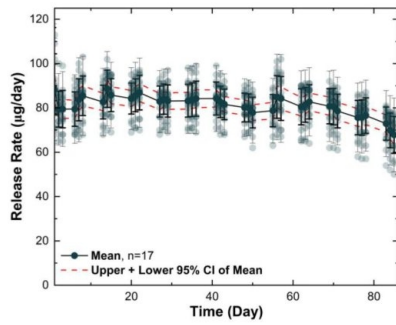
Day 1 timepoint includes cumulative release over the first day including a separately measured 1st hour of release, which was ~7 µg for the high-dose and ~4 µg for the low-dose. Values are mean ± SD.

*Release-rates include exenatide and related substances.

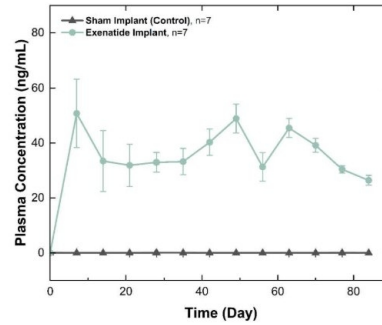


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In vitro and in vivo performance of 12-week GLP-1 implant configuration



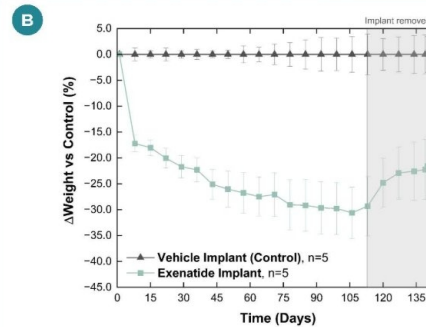
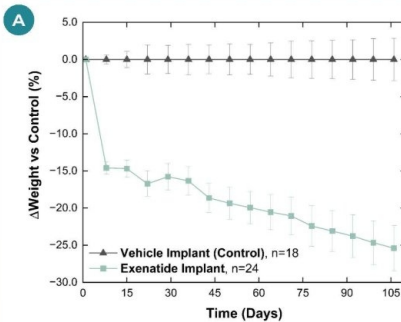
In vitro release-rate of exenatide implant (n=17). Individual values are included for each timepoint. Each week consists of two 24-hour intervals and a 5-day interval. Values are mean $\pm$ 1 SD (bold) and $\pm$ 2 SD. Release-rates include exenatide and related substances.



In vivo pharmacokinetics of 12-week exenatide implant and sham implant in high fat diet-induced obese mice (n=7 per group). Values are mean $\pm$ SE.

Day 56 values reported as measured, but sample handling error suspected to have occurred.

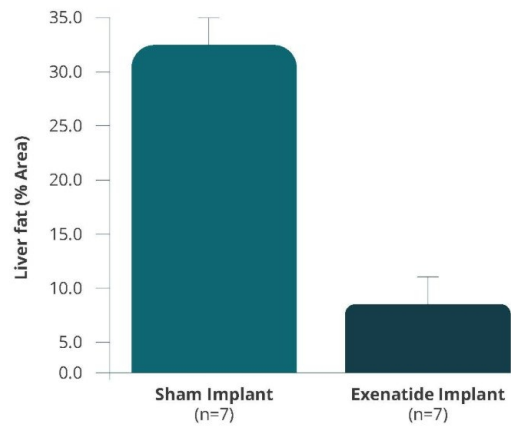
Preclinical GLP-1 NanoPortal implant is associated with durable body weight effects



Weight difference from control in healthy Sprague-Dawley Rats. % weight change from baseline for a single administration of exenatide implant in a study associated with NPM-119 (~320 nmol/kg/day) corrected to control (vehicle implant). (A) All animals measured through 105 days of treatment; (B) 5 animals measured in each group through 112 days of treatment followed by a 28-day recovery period. Values are mean $\pm$ SE.

GLP-1 NanoPortal implant reduced liver fat by 82% in preclinical study

Liver fat reduction in high fat diet-induced obese mice. Liver fat % area for exenatide implant vs sham implant 12 weeks after a single administration. Values are mean $\pm$ SE.



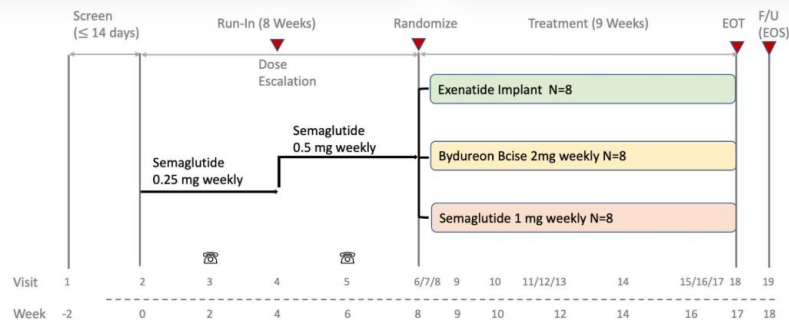
First-in-human GLP-1 NanoPortal clinical trial: LIBERATE-1

Primary Objectives

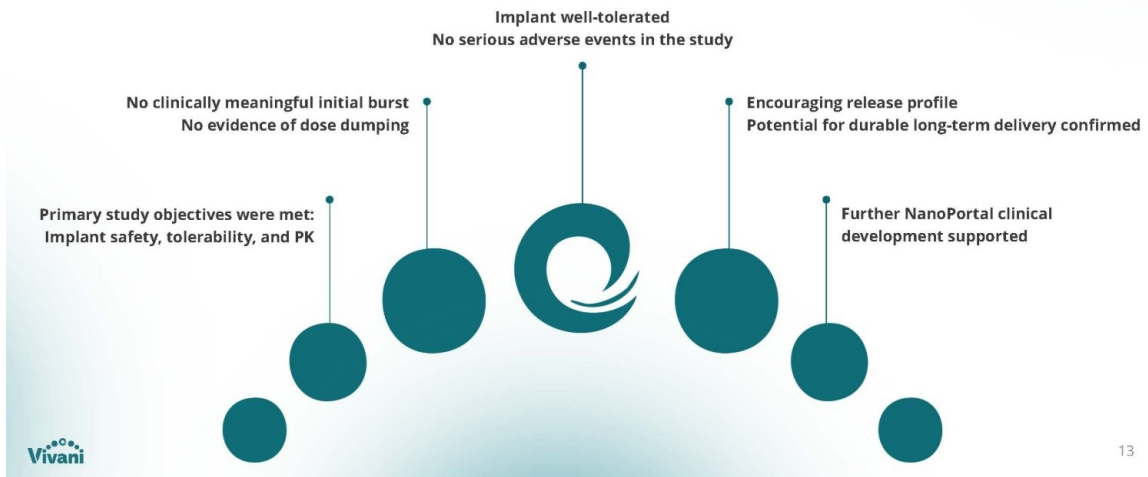
Safety/tolerability assessment and full pharmacokinetic characterization. Changes in weight also assessed.

Key Inclusion/Exclusion Criteria

18-55 years old; overweight or obese (BMI 27-40)
Otherwise healthy (no T2D, normal renal function)



LIBERATE-1 topline results summary



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Vivani Lead Program: NPM-139

SLIM™: Semaglutide ultra Long-acting IMplant in obesity

Vivani

Priority clinical development program: NPM-139

Development of once- or twice-yearly semaglutide implant for chronic weight management in obese or overweight patients



FDA-approved GLP-1 products generated **\$132B** in global sales in 2025. The market for FDA-approved GLP-1 products for weight loss is expected to grow at a 131% CAGR.¹



Based on real-world adherence and persistence data, **>50%** of patients regularly miss doses; **>50%** discontinue by year 1 and **~75%** discontinue by year 2²



The initial program activities are being designed to support additional semaglutide applications such as **type 2 diabetes (NPM-133), CKD in type 2 diabetes, MASH, alcohol and other addictions, etc.**



¹ Morgan Stanley, (2026, April), "Obesity Drugs: Are Scaling Fast," <https://www.morganstanley.com/insights/articles/gli1-weight-loss-market-may-double-190-billion-2035>
² Gleason, P. P., Urick, B. Y., Marshall, L. Z., Friedlander, N., Qiu, Y., & Leslie, R. S. (2024). Real-world persistence and adherence to glucagon-like peptide-1 receptor agonists among obese commercially insured adults without diabetes. *Journal of managed care & specialty pharmacy*, 30(8), 860-867. <https://doi.org/10.18553/jmcp.2024.23332>

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Persistence and adherence are critical to securing desired long-term health outcomes

Persistence data comparing obesity therapies suggest room for improvement across the board, including for semaglutide. The unmet need is significant.

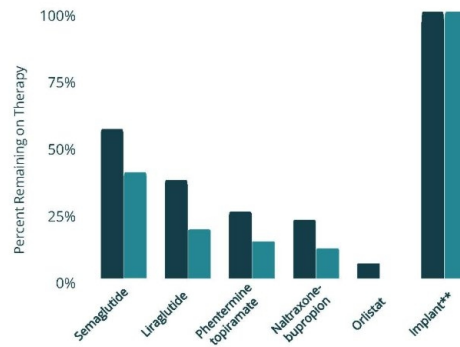
- ✓ The opportunity for an additional 60% improvement in persistence for semaglutide is remarkable and could translate to improved patient outcomes
- ✓ Semaglutide implant is designed to guarantee adherence during the entire once- or twice-yearly dosing interval



* Published in Obesity, December 8, 2023

Large Retrospective Cohort Study* (N=1,911)

■ 6 months ■ 12 months

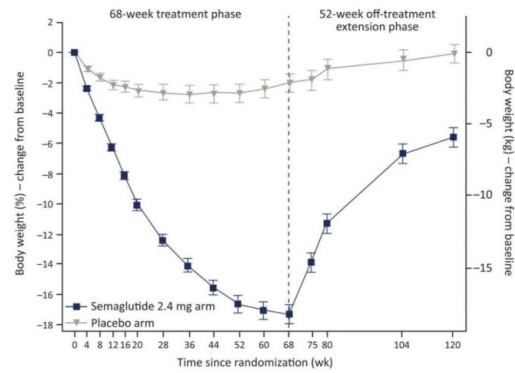


** Implant not included in this Large Retrospective Cohort Study, included for illustrative purposes only; assumes full replacement at 6 months

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Semaglutide discontinuation leads to rapid hunger-induced weight rebound

Sudden GLP-1 withdrawal produces immediate rebound hunger, leading to rapid weight regain mediated by greater food consumption

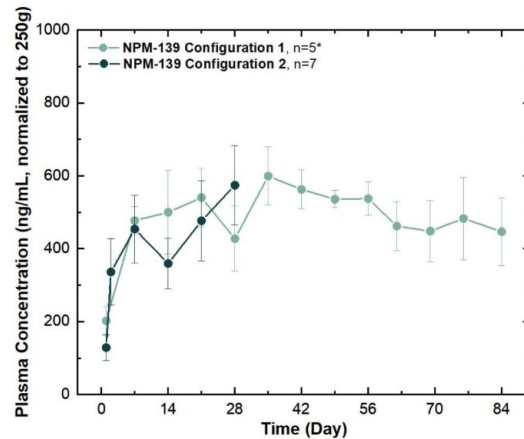


STEP 1 Extension: Semaglutide Withdrawal
From Novo Nordisk Wegovy® Clinical Program

NPM-139 provides steady preclinical pharmacokinetics

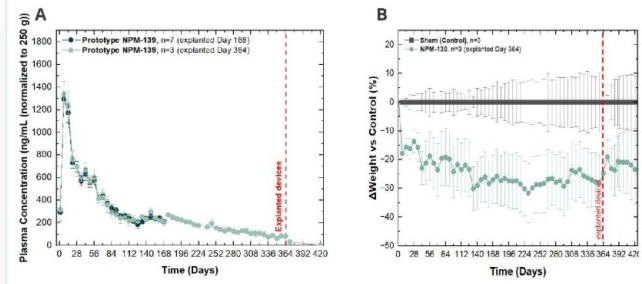
In vivo pharmacokinetics of NPM-139 configurations in Sprague-Dawley rats. Values are mean $\pm$ SE.

*n=5 through day 28; two implants removed at Day 28 for characterization, n=3 thereafter.



Prototype semaglutide NanoPortal implant demonstrates sustained weight loss and delivery for a full year

Prototype NPM-139, prior to PK optimization. *In Vivo* Pharmacokinetics and Weight loss vs. control in Sprague-Dawley Rats (A). % weight loss from baseline normalized to a sham-implant control (B). Values are mean $\pm$ SE.



Normalized semaglutide plasma concentrations remain measurable throughout the entire 364-day duration. Implant removal results in immediate decline in plasma levels, as expected.

Early (2023) patient and (2020) prescriber research suggested strong adoption potential for an ultra-long-acting GLP-1 implant

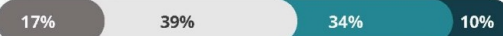
Currently on a GLP-1 therapy (n=324)



Ex-GLP-1 therapy (n=178)



GLP-1 therapy naïve (n=319)



● Definitely not ● Unlikely ● Likely ● Definitely

dQ&A Insights reported market research during FDA Advisory Board to review ITCA 650 (exenatide implant) on September 21, 2023. Research conducted in patients with T2D.

56% of GLP-1 patients responded "likely" or "definitely" to get a GLP-1 implant if FDA approved, prescriber recommended, and covered by insurance

Average prescriber rating of **8.3 on a 10-point scale** regarding likelihood of prescribing a long-acting GLP-1 implant

Vivari sponsored qualitative (n=10) market research of diabetes treating primary care physicians, March 2020. ~90% of patients receive treatment in primary care.

More recent patient research (2026), combined with contraception analog, signals even stronger adoption potential for an ultra-long-acting semaglutide implant

2026 PHYSICIAN SURVEY: INDEPENDENT THIRD PARTY (N=20)



of physicians would consider **recommending a GLP-1 implant** to their patients



of respondents' patients would be **candidates for an implant**

Sources: Physician survey: independent third-party research (Lake Street), 2026 (n=20).
Contraception: Daniele K. Abma J.C. Current Contraceptive Status Among Females Ages 15–49: United States, 2022–2023. NCHS Data Brief No. 539, National Center for Health Statistics, 2025. Organon reported Nexplanon sales, FY 2025.



THE CONTRACEPTION MARKET: AN ANALOG FOR GLP-1s

Both require chronic dosing, with therapeutic options spanning oral pills and long-acting implants. Among U.S. women using a drug or device for contraception:



89–90% of women using prescription contraceptive drugs or devices choose one of these two categories.

*Nexplanon demonstrates commercial potential for a subdermal implant in primary care (**~\$1B in annual sales**).

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NPM-139 clinical and regulatory development: Near-term plan builds on recent wins

Milestone	Status
Reported preclinical proof of concept (~20% weight loss) with NPM-139 (semaglutide implant)	August 2025
Received regulatory approval to initiate SLIM-1 clinical trial	June 2026
Announced Novo Nordisk agreement to evaluate NPM-139	July 2026
SLIM-1 full enrollment and all patients successfully dosed	August 2026
Report SLIM-1™, Phase 1 trial, top-line Results	November 2026 (projected)
Initiation of Phase 2 dose ranging study	2027 (projected)



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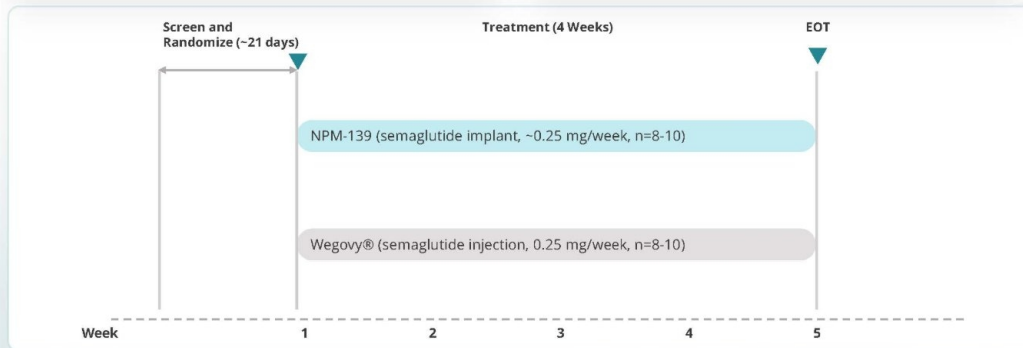
Proposed NPM-139 Phase 1 study design: SLIM-1™

Primary Objectives

Safety/tolerability assessment and pharmacokinetic characterization

Key Inclusion/Exclusion Criteria

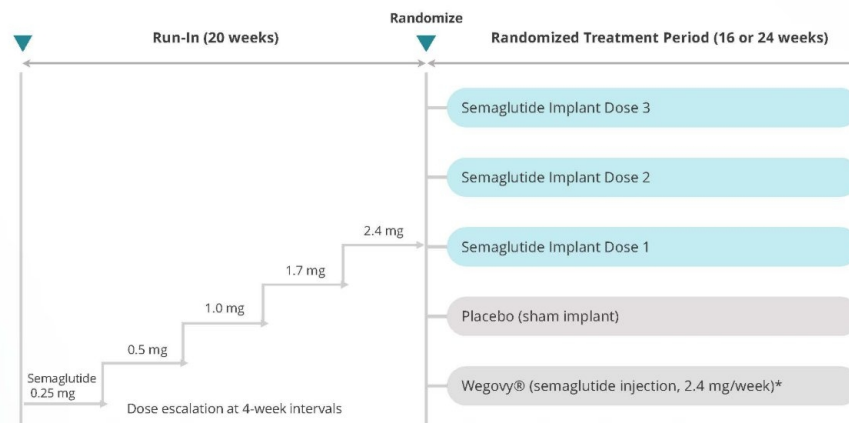
18-55 years old; overweight or obese (BMI 27-40)
Otherwise healthy (no T2D)



T2D = Type 2 Diabetes; EOT = End of Treatment

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Proposed NPM-139 Phase 2 study design: SLIM-2™

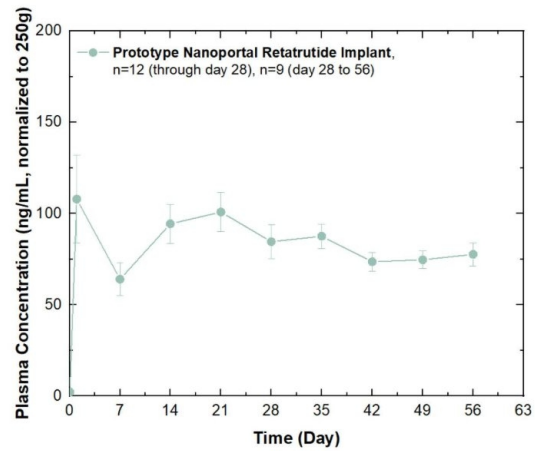


*unblinded

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NanoPortal retatrutide implant provides steady preclinical pharmacokinetics in ongoing study

In vivo pharmacokinetics of prototype NanoPortal retatrutide implant in Sprague-Dawley rats in an ongoing study. Values are mean $\pm$ SE.



Vivani headquarters and GMP manufacturing facility



The Vivani executive leadership team



Adam Mendelsohn PhD
CEO/Director

- ✓ Co-founder/Co-inventor of Vivani technology
- ✓ PhD Bioengineering (UCSF/UC Berkeley)
- ✓ Management of Technology Certificate at Haas School of Business
- ✓ Research focused on diabetes treatment
- ✓ Formerly at Boston Scientific and MiniMed



Donald Dwyer, MBA
Chief Business Officer

- ✓ Former Executive Director at AstraZeneca with leadership roles in regulatory affairs, drug development, commercial and business development
- ✓ Former Vivani Board observer for AZ
- ✓ Former PhaseBio Board observer for AZ (prior to IPO)
- ✓ Former Director at Cephalon and Rhone Poulenc Rorer



Lisa Porter, MD
Chief Medical Officer

- ✓ Former Chief Medical Officer for Eisai BioPharmaceuticals and Dance BioPharm
- ✓ Former VP of Medical Development for Amylin
- ✓ Former Director at GSK, Global Head of Clinical Strategy for Avandia
- ✓ Former Board member of ViaCyte, Inc.



Truc Le, MBA
Chief Operations Officer

- ✓ Numerous COO and Executive Positions at Device and Drug-Device Companies, including:
- ✓ CTO at Dance BioPharm, COO at Avid Bio
- ✓ Exec VP at Prima Biomed, Sr. VP at Nektar Therapeutics (responsible for Exubera approval), and Worldwide VP at Johnson & Johnson



Anthony Baldor, MS, MBA
Chief Financial Officer

- ✓ Former CFO and Head of Business Development at Diakonos Oncology
- ✓ Former VP Corporate Strategy and Development at 4DNT
- ✓ Former Research Analyst at Jefferies
- ✓ Former Venture Capital Principal at BioInnovation Capital and Associate at RMI Partners

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Guaranteed adherence. Improved outcomes.

- ✓ Only GLP-1 implant in development for obesity and chronic weight management
- ✓ Convenient once- or twice-yearly dosing expected to address primary GLP-1 market challenges
- ✓ Unique modality designed to reach underserved & unaddressed populations key to market expansion



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Thank You

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