

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF DELAWARE

In Re. INVIVO THERAPEUTICS CORPORATION §  
§  
§  
§  
Debtor(s)

Case No. 24-10137

Lead Case No. 24-10137

Jointly Administered

**Monthly Operating Report**

Chapter 11

Reporting Period Ended: 03/31/2024

Petition Date: 02/01/2024

Months Pending: 2

Industry Classification: 

5	4	1	7
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Reporting Method: Accrual Basis

Cash Basis

Debtor's Full-Time Employees (current): 3

Debtor's Full-Time Employees (as of date of order for relief): 3

**Supporting Documentation** (check all that are attached):

(For jointly administered debtors, any required schedules must be provided on a non-consolidated basis for each debtor)

- Statement of cash receipts and disbursements
- Balance sheet containing the summary and detail of the assets, liabilities and equity (net worth) or deficit
- Statement of operations (profit or loss statement)
- Accounts receivable aging
- Postpetition liabilities aging
- Statement of capital assets
- Schedule of payments to professionals
- Schedule of payments to insiders
- All bank statements and bank reconciliations for the reporting period
- Description of the assets sold or transferred and the terms of the sale or transfer

/s/ Joshua B. Brooks

Signature of Responsible Party

04/22/2024

Date

Landis Rath & Cobb LLP

Printed Name of Responsible Party

919 N. Market St., Ste. 1800, Wilmington, DE 19801

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore § 1320.4(a)(2) applies.



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Debtor's Name INVIVO THERAPEUTICS CORPORATION

Case No. 24-10137

<b>Part 1: Cash Receipts and Disbursements</b>		<b>Current Month</b>	<b>Cumulative</b>
a.	Cash balance beginning of month	\$5,183,979	
b.	Total receipts (net of transfers between accounts)	\$19,275	\$45,104
c.	Total disbursements (net of transfers between accounts)	\$344,226	\$537,233
d.	Cash balance end of month (a+b-c)	\$4,859,027	
e.	Disbursements made by third party for the benefit of the estate	\$0	\$0
f.	Total disbursements for quarterly fee calculation (c+e)	\$344,226	\$537,233
<b>Part 2: Asset and Liability Status</b>		<b>Current Month</b>	
<b>(Not generally applicable to Individual Debtors. See Instructions.)</b>			
a.	Accounts receivable (total net of allowance)	\$0	
b.	Accounts receivable over 90 days outstanding (net of allowance)	\$0	
c.	Inventory (Book <input checked="" type="radio"/> Market <input type="radio"/> Other <input type="radio"/> (attach explanation))	\$0	
d.	Total current assets	\$6,233,147	
e.	Total assets	\$6,289,549	
f.	Postpetition payables (excluding taxes)	\$523,819	
g.	Postpetition payables past due (excluding taxes)	\$0	
h.	Postpetition taxes payable	\$0	
i.	Postpetition taxes past due	\$0	
j.	Total postpetition debt (f+h)	\$523,819	
k.	Prepetition secured debt	\$0	
l.	Prepetition priority debt	\$0	
m.	Prepetition unsecured debt	\$171,926	
n.	Total liabilities (debt) (j+k+l+m)	\$695,744	
o.	Ending equity/net worth (e-n)	\$5,593,805	
<b>Part 3: Assets Sold or Transferred</b>		<b>Current Month</b>	<b>Cumulative</b>
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	\$0	\$0
b.	Total payments to third parties incident to assets being sold/transferred outside the ordinary course of business	\$0	\$0
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$0	\$0
<b>Part 4: Income Statement (Statement of Operations)</b>		<b>Current Month</b>	<b>Cumulative</b>
<b>(Not generally applicable to Individual Debtors. See Instructions.)</b>			
a.	Gross income/sales (net of returns and allowances)	\$0	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	\$0	
c.	Gross profit (a-b)	\$0	
d.	Selling expenses	\$0	
e.	General and administrative expenses	\$437,897	
f.	Other expenses	\$103,133	
g.	Depreciation and/or amortization (not included in 4b)	\$416	
h.	Interest	\$15,580	
i.	Taxes (local, state, and federal)	\$0	
j.	Reorganization items	\$0	
k.	Profit (loss)	\$-525,867	\$-1,238,905

Debtor's Name INVIVO THERAPEUTICS CORPORATION

Case No. 24-10137

**Part 5: Professional Fees and Expenses**

			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
a.	Debtor's professional fees & expenses (bankruptcy) <i>Aggregate Total</i>		\$160,702	\$160,702	\$111,659	\$111,659
	<i>Itemized Breakdown by Firm</i>					
	Firm Name	Role				
i	Landis Rath & Cobb LLP	Lead Counsel	\$78,231	\$78,231	\$78,231	\$78,231
ii	Wilmer Cutler Pickering Hale a	Special Counsel	\$49,043	\$49,043	\$0	\$0
iii	Sonoran Capital Advisors, LLC	Financial Professional	\$8,428	\$8,428	\$8,428	\$8,428
iv	SSG Advisors, LLC	Other	\$25,000	\$25,000	\$25,000	\$25,000
v	Kurtzman Carson Consultants L	Other	\$0	\$0	\$0	\$0
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			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative	
b.	Debtor's professional fees & expenses (nonbankruptcy) <i>Aggregate Total</i>		\$0	\$0	\$0	\$0	
	<i>Itemized Breakdown by Firm</i>						
		Firm Name	Role				
	i	WilliamsMarston LLC	Other	\$0	\$0	\$0	\$0
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c.	All professional fees and expenses (debtor & committees)			\$160,702	\$160,702	\$111,659

Part 6: Postpetition Taxes		Current Month	Cumulative
a.	Postpetition income taxes accrued (local, state, and federal)	\$0	\$0
b.	Postpetition income taxes paid (local, state, and federal)	\$0	\$0
c.	Postpetition employer payroll taxes accrued	\$0	\$0
d.	Postpetition employer payroll taxes paid	\$7,445	\$19,691
e.	Postpetition property taxes paid	\$0	\$0
f.	Postpetition other taxes accrued (local, state, and federal)	\$0	\$0
g.	Postpetition other taxes paid (local, state, and federal)	\$0	\$470

**Part 7: Questionnaire - During this reporting period:**

- a. Were any payments made on prepetition debt? (if yes, see Instructions) Yes  No
- b. Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions) Yes  No
- c. Were any payments made to or on behalf of insiders? Yes  No
- d. Are you current on postpetition tax return filings? Yes  No
- e. Are you current on postpetition estimated tax payments? Yes  No
- f. Were all trust fund taxes remitted on a current basis? Yes  No
- g. Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions) Yes  No
- h. Were all payments made to or on behalf of professionals approved by the court? Yes  No  N/A
- i. Do you have:
  - Worker's compensation insurance? Yes  No
  - If yes, are your premiums current? Yes  No  N/A  (if no, see Instructions)
  - Casualty/property insurance? Yes  No
  - If yes, are your premiums current? Yes  No  N/A  (if no, see Instructions)
  - General liability insurance? Yes  No
  - If yes, are your premiums current? Yes  No  N/A  (if no, see Instructions)
- j. Has a plan of reorganization been filed with the court? Yes  No
- k. Has a disclosure statement been filed with the court? Yes  No
- l. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes  No



Debtor's Name INVIVO THERAPEUTICS CORPORATION

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**Part 8: Individual Chapter 11 Debtors (Only)**

- a. Gross income (receipts) from salary and wages \$0
- b. Gross income (receipts) from self-employment \$0
- c. Gross income from all other sources \$0
- d. Total income in the reporting period (a+b+c) \$0
- e. Payroll deductions \$0
- f. Self-employment related expenses \$0
- g. Living expenses \$0
- h. All other expenses \$0
- i. Total expenses in the reporting period (e+f+g+h) \$0
- j. Difference between total income and total expenses (d-i) \$0
- k. List the total amount of all postpetition debts that are past due \$0
- l. Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)? Yes  No
- m. If yes, have you made all Domestic Support Obligation payments? Yes  No  N/A

**Privacy Act Statement**

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: [http://www.justice.gov/ust/eo/rules\\_regulations/index.htm](http://www.justice.gov/ust/eo/rules_regulations/index.htm). Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

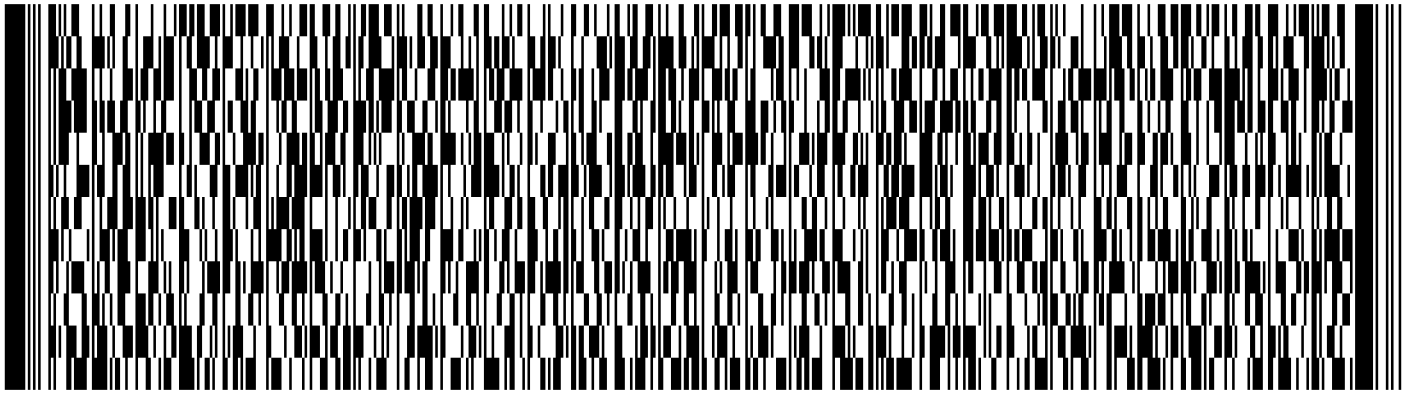
**I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.**

/s/ Richard Christopher  
 Signature of Responsible Party  
Chief Financial Officer  
 Title

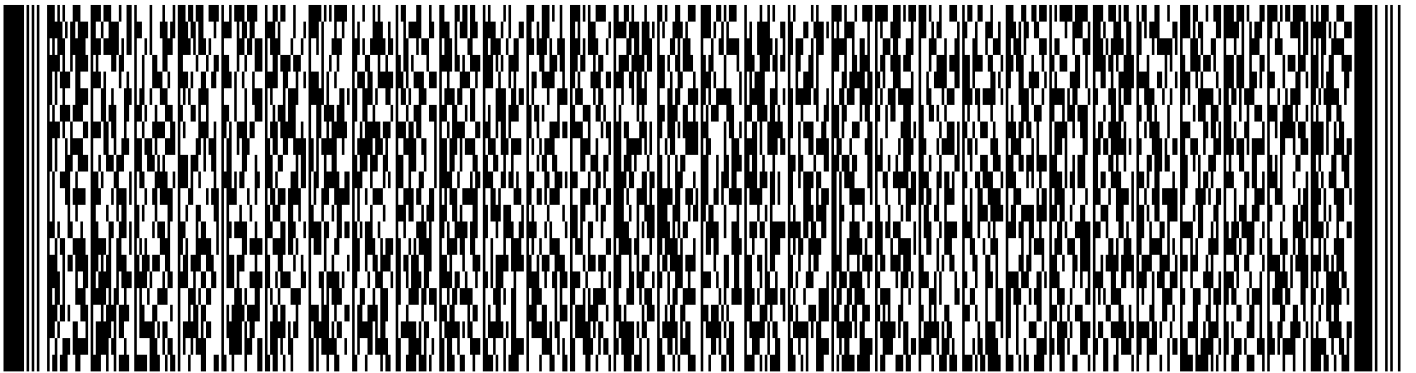
InVivo Therapeutics Corporation  
 Printed Name of Responsible Party  
04/22/2024  
 Date

Debtor's Name INVIVO THERAPEUTICS CORPORATION

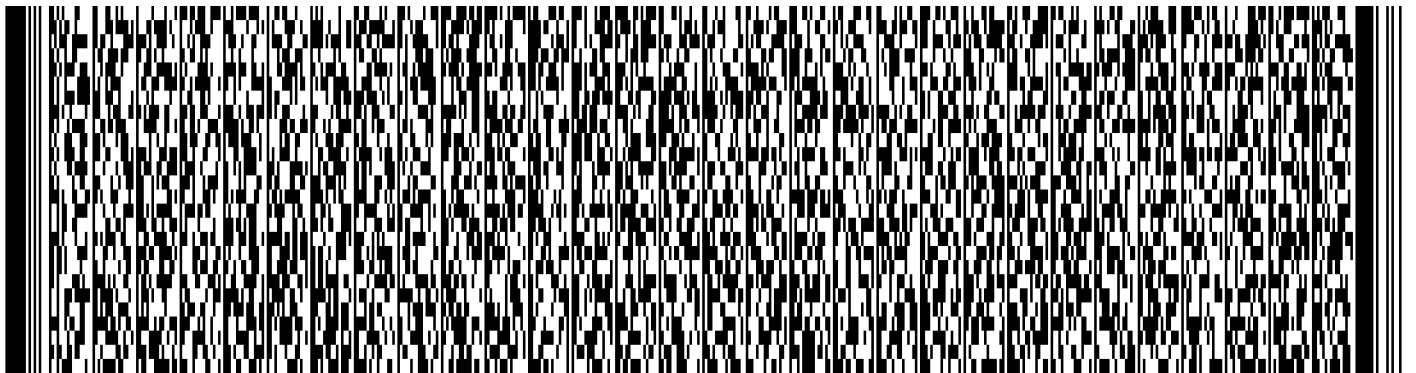
Case No. 24-10137



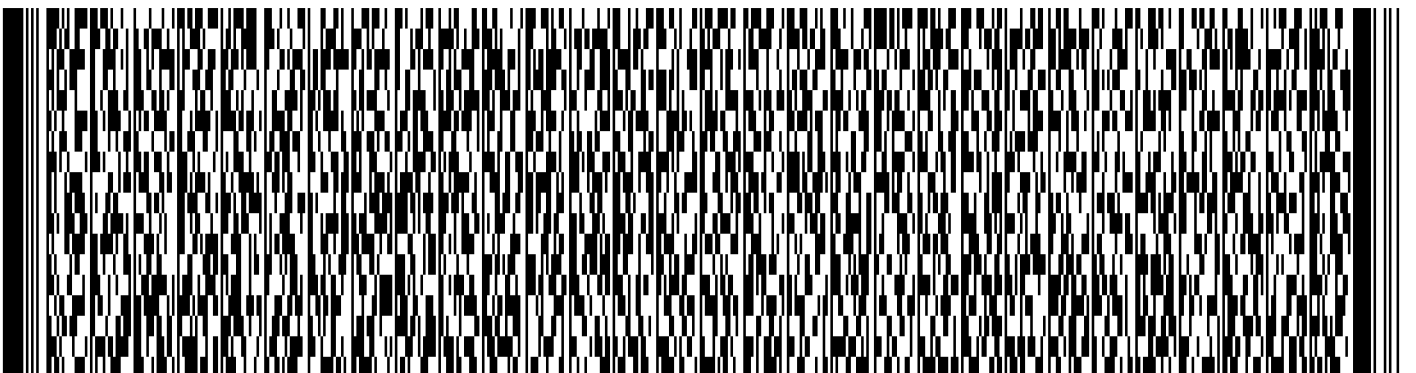
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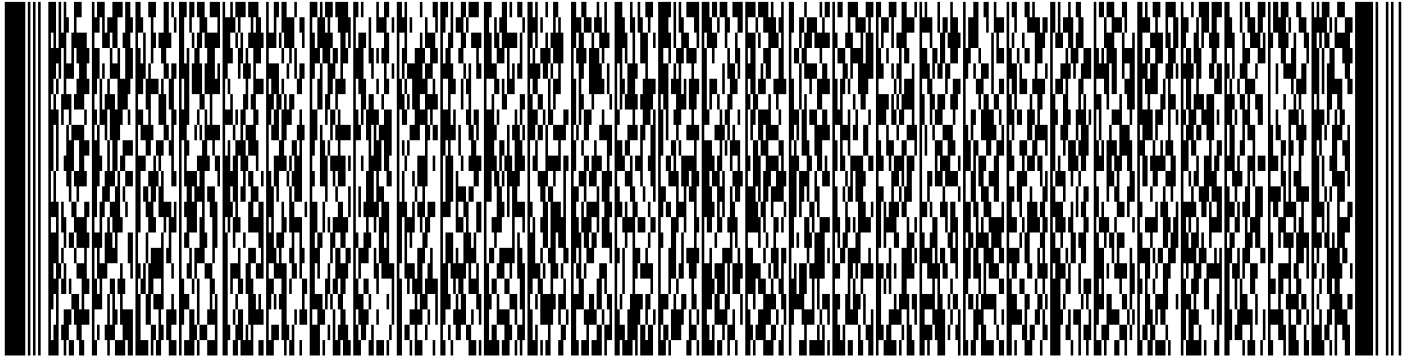
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Debtor's Name INVIVO THERAPEUTICS CORPORATION

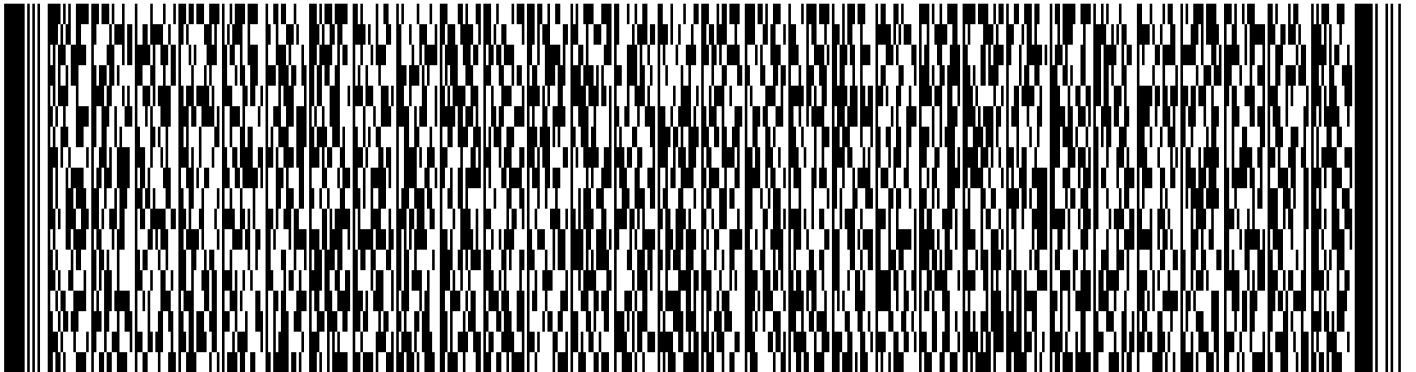
Case No. 24-10137



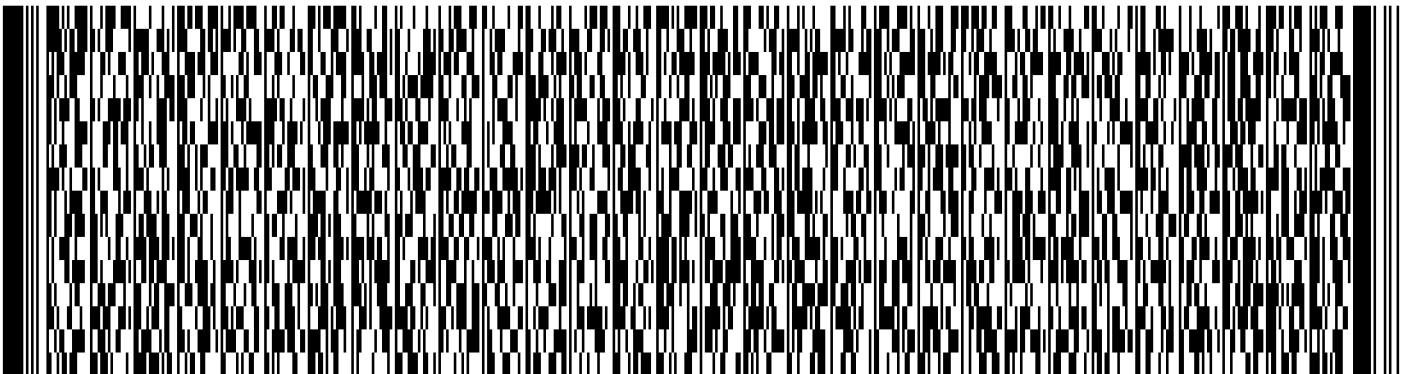
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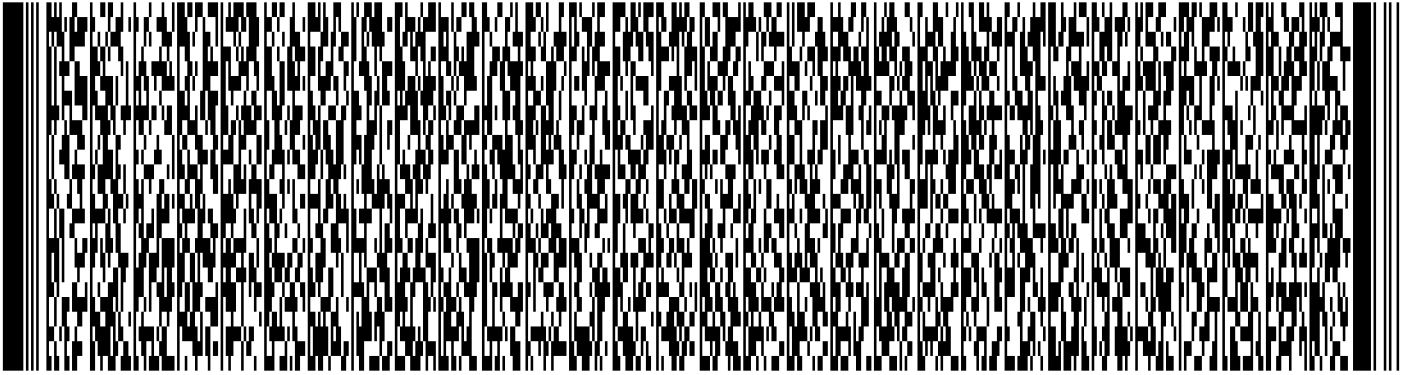
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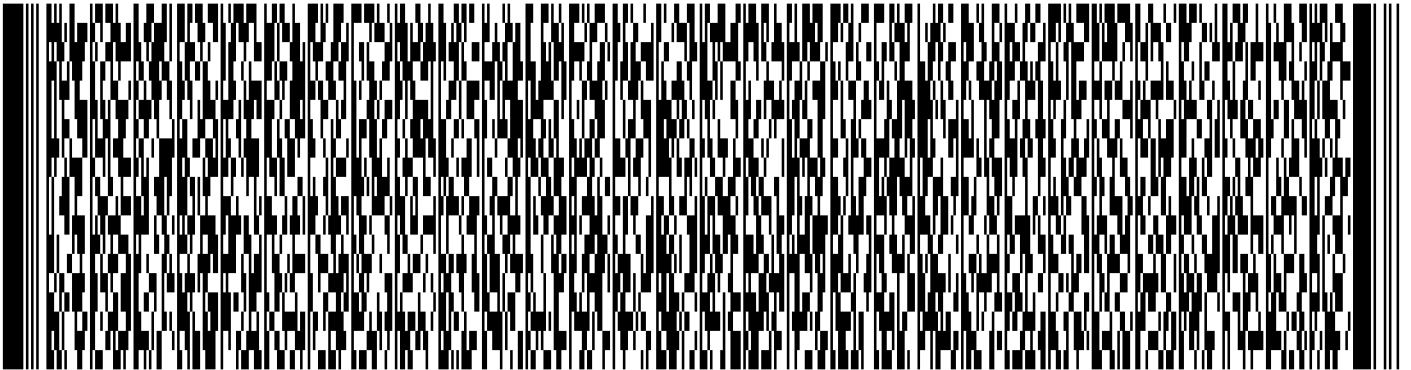
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Debtor's Name INVIVO THERAPEUTICS CORPORATION

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PageThree



PageFour



Statement of cash receipts disbursements

March  
2024

Operating Disbursements

Payroll, benefits and related taxes	\$ 193,474	
Severance	-	
Consulting	1,755	
Clinical Trial Costs	8,664	
Rent	383	
Investor Relations	8,772	
Legal Fees	-	
Audit and Tax Fees	-	
Board of Directors Fees	-	
Dues and Subscriptions	13,693	
Insurance	-	
Software	2,500	
Mailing and Shipping	-	
Telephone	217	
Parking	48	
Travel	319	
Meals and Entertainment	116	
Payroll processing fees	619	
Office supplies	832	
Bank fees	1,177	
Miscellaneous expense	-	
Taxes - Franchise	-	
Total Operating Disbursements	232,567	-

Process Related Disbursements

<u>Debtor's Professionals</u>		
Landis Rath & Cobb	78,231	
Sonoran	8,428	
SSG	25,000	
Wilmer-Hale	-	
Claims agent - KCC	-	
Total Debtor's Professionals	111,659	-
<u>Additional Professional/Costs</u>		
Committee Professionals	-	
UST Fees	-	
Total Process Related Disbursements	-	-

Total Disbursements	\$ 344,226	-
Beginning Cash	\$ 5,183,979	-
Interest	19,275	-
Collections/Refunds	-	-
Total Disbursements	(344,226)	-
Ending Cash	\$ 4,859,027	-



## Balance Sheet

	<u>3/31/24</u>
ASSETS:	
Current assets:	
Cash and cash equivalents	\$ 4,859,027
Prepaid expenses and other current assets	1,374,120
Total current assets	<u>6,233,147</u>
PP&E, net	6,402
Restricted cash - non current	50,000
Total assets	<u>\$ 6,289,549</u>
Current liabilities:	
Accounts payable	419,798
Accrued expenses	275,947
Total current liabilities	<u>695,744</u>
Other liabilities	-
Total liabilities	<u>695,744</u>
Stockholders' equity:	
Total stockholders' equity	<u>5,593,805</u>
Total liabilities and stockholders' equity	<u>\$ 6,289,549</u>
	-



## Statement of Operations

	<u>March</u> <u>2024</u>
Operating Expenses:	
Research and development	\$ 103,133
General and administrative	438,314
Total operating expenses	<u>541,447</u>
Operating loss	<u>(541,447)</u>
Other income/(expense):	
Other income	15,580
Other income/(expense), net	<u>15,580</u>
Net loss	<u><u>\$ (525,867)</u></u>

InVivo Therapeutics  
 Cash Reconciliation  
 03/31/24





<u>Account Type</u>	<u>Acct #</u>	<u>Total Per Bank Statement</u>	<u>Uncashed Checks</u>	<u>Acct Transfer In Transit</u>	<u>Other Assets Restricted Cash</u>	<u>Cash Balance</u>
Operating	XXXXXX4583	\$ 250,000	\$ (2,438)	\$ -	\$ -	\$ 247,563
Sweep	XXXXXX0747	4,753,794	-	(142,330)	-	4,611,464
Security Deposit	XXXXXX0116	50,000	-	-	(50,000)	-
<b>Total</b>		<b>\$ 5,053,795</b>	<b>\$ (2,438)</b>	<b>\$ (142,330)</b>	<b>\$ (50,000)</b>	<b>\$ 4,859,027</b>



ADDRESS SERVICE REQUESTED

>003913 5779250 0001 092196 10Z  
 INVIVO THERAPEUTICS CORPORATION  
 1500 DISTRICT AVENUE  
 BURLINGTON, MA 01803

Managing Your Accounts

-  Phone: (408) 654-4636
-  Toll-Free: (800) 774-7390
-  Email: clientsupport@svb.com
-  Online: www.svb.com

Summary of Accounts

Account Type	Account Number	Ending Balance
Analysis Checking	XXXXXX4583	\$250,000.42
<b>Total Balance</b>		<b>\$250,000.42</b>

Analysis Checking - XXXXXX4583

Account Summary

Date	Description	
03/01/2024	Beginning Balance	\$250,000.40
03/31/2024	Ending Balance	\$250,000.42
	Total debits this period	\$346,154.60
	Total credits this period	\$346,154.62
	Service Charge	\$0.00

Account Activity

Transaction Date	Description	Debits	Credits	Balance
03/01/2024	Beginning Balance			\$250,000.40
03/01/2024	CASH SWEEP PURCHASE	-\$0.40	\$0.00	\$250,000.00
03/05/2024	HEALTH EQUITY INC HealthEqui 81795 InVivo Therapeutics Co	-\$76.13	\$0.00	\$249,923.87
03/05/2024	WIRE OUT 240305L1B77D1C001192 202406505318;BNF BCBSMA HMO BL UE DEPOSITORY;OBI INVIVO ACCOU	-\$8,568.26	\$0.00	\$241,355.61
03/05/2024	CASH SWEEP REDEMPTION	\$0.00	\$8,644.39	\$250,000.00
03/07/2024	HEALTH EQUITY INC HealthEqui 81795 InVivo Therapeutics Co	-\$75.34	\$0.00	\$249,924.66
03/07/2024	CASH SWEEP REDEMPTION	\$0.00	\$75.34	\$250,000.00



CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION		
DATE OR #	AMOUNT	DATE OR #	AMOUNT	DATE OR #	AMOUNT			
						ENTER BALANCE THIS STATEMENT	\$	
						ADD RECENT DEPOSITS (NOT CREDITED ON THIS STATEMENT)	\$	
						SUBTOTAL	\$	
						SUBTRACT TOTAL ITEMS OUTSTANDING	\$	
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest-ADD Overdraft-DEDUCT Automatic Payment-DEDUCT Automatic Advance-ADD Service Charge-DEDUCT						<b>BALANCE</b>	\$	

PLEASE REPORT ANY ERRORS OR OMISSIONS PROMPTLY TO US. ERRORS OR OMISSIONS THAT ARE REPORTED WITHIN THE FIRST 30 DAYS FROM THE DATE OF THE LAST STATEMENT CYCLE ARE USUALLY RESOLVED MUCH MORE QUICKLY THAN DATED REQUESTS. As a fraud prevention measure, you need to review your statements and report unauthorized use or errors to us, as explained in more detail below.

If your checkbook and statement do not balance have you:

- Accounted for bank charges?
  Verified additions and subtractions in your checkbook?
  Compared canceled checks to check stub?
  Compared deposit amounts on statement to your checkbook?

Any charges for imprinted checks include state sales tax computed at the current rate, when applicable. You can call (800) 774-7390 to request an item or substitute check, or a legible copy. We will without charge provide at least two items (or substitute checks or legible copies) upon request, with respect to each statement.

**IN CASE OF ERRORS OR QUESTIONS CONCERNING YOUR ELECTRONIC TRANSFERS  
(For Consumer Clients)**

Telephone Silicon Valley Bank at (800) 774-7390 or write us at: Silicon Valley Bank, Attn: Client Services, 3003 Tasman Drive, Santa Clara, CA 95054, as soon as you can, if you think your statement or your receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number (if any).
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe this is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

For questions about preauthorized transfers, please contact us at (800) 774-7390.

**IN CASE OF UNAUTHORIZED USE OF YOUR CHECKS OR ACCOUNTS**

You agree to review your statement and to report unauthorized use (checks or other charges that are forged, altered or other unauthorized use) or error immediately. Your deposit agreement sets specific times within which you must report unauthorized use or errors to us. In summary (and subject to special rules that may apply to consumers), if you fail to report unauthorized use or errors to us within 30 days after your statement is available, you may be liable for subsequent unauthorized use by the same wrongdoer. If you fail to report within 60 days, you may also be precluded from asserting the unauthorized use or other error against us. Your statement is deemed "available" when made available in paper or electronic form. Your deposit agreement or Related Agreements may set shorter reporting requirements, such as for ACH services.

**FAIR CREDIT REPORTING ACT**

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

**Analysis Checking - XXXXXX4583** (continued)

**Account Activity** (continued)

Transaction Date	Description	Debits	Credits	Balance
03/08/2024	WIRE OUT 240308L1B77D1C001026 202406804159;BNF ADP, LLC.;OBI NET PAY AND TAX - PAYDATE 3.1	-\$79,531.59	\$0.00	\$170,468.41
03/08/2024	CASH SWEEP REDEMPTION	\$0.00	\$79,531.59	\$250,000.00
03/11/2024	IRON MOUNTAIN RECRD MGMT 6763639 INVIVO THERAPEUTICS *C	-\$129.00	\$0.00	\$249,871.00
03/11/2024	IRON MOUNTAIN RECRD MGMT 7342386 INVIVO THERAPEUTICS *C	-\$129.00	\$0.00	\$249,742.00
03/11/2024	IRON MOUNTAIN RECRD MGMT 7094888 INVIVO THERAPEUTICS *C	-\$129.00	\$0.00	\$249,613.00
03/11/2024	BASIC BENEFITS PAYMENTS 32132341 170583 INVIVO THERAPEU	-\$47.63	\$0.00	\$249,565.37
03/11/2024	CASH SWEEP REDEMPTION	\$0.00	\$434.63	\$250,000.00
03/12/2024	WIRE IN 240312L3LF151C000472 202407203670;ORG INVIVO THERAP EUTIC;REF 240312B008WD	\$0.00	\$3,694.72	\$253,694.72
03/12/2024	IRON MOUNTAIN RECRD MGMT 7587453 INVIVO THERAPEUTICS *C	-\$129.00	\$0.00	\$253,565.72
03/12/2024	CASH SWEEP PURCHASE	-\$3,565.72	\$0.00	\$250,000.00
03/13/2024	IRON MOUNTAIN RECRD MGMT 7902488 INVIVO THERAPEUTICS *C	-\$129.00	\$0.00	\$249,871.00
03/13/2024	HEALTHEQUITY INC HealthEqui 81795 InVivo Therapeutics Co	-\$279.47	\$0.00	\$249,591.53
03/13/2024	CASH SWEEP REDEMPTION	\$0.00	\$408.47	\$250,000.00
03/15/2024	ADP PAYROLL FEES ADP FEES 791071272031 656236912INVIVO THERAP	-\$619.05	\$0.00	\$249,380.95
03/15/2024	WIRE OUT 240315L1B77D1C000993 202407505172;BNF ORACLE AMERIC A, INC.;OBI INVOICE 1822499	-\$11,871.53	\$0.00	\$237,509.42

**Analysis Checking - XXXXXX4583** (continued)

**Account Activity** (continued)

Transaction Date	Description	Debits	Credits	Balance
03/15/2024	WIRE OUT 240315L1B77D1C001296 202407505171;BNF CHARLES SCHWA B;OBI PLAN ACCOUNT 6670-8958IN	-\$12,377.88	\$0.00	\$225,131.54
03/15/2024	CHECK #16898	-\$1,442.05	\$0.00	\$223,689.49
03/15/2024	CASH SWEEP REDEMPTION	\$0.00	\$26,310.51	\$250,000.00
03/19/2024	WAGeworks FSA RECEIVABLE INV6308051 INVIVO THERAPEUTICS HO	-\$227.78	\$0.00	\$249,772.22
03/19/2024	WIRE OUT 240319L1B77D1C001154 202407905142;BNF WCG IRB;OBI I NVOICE 853867.857314.859402	-\$1,464.00	\$0.00	\$248,308.22
03/19/2024	CHECK #16930	-\$115.00	\$0.00	\$248,193.22
03/19/2024	CASH SWEEP REDEMPTION	\$0.00	\$1,806.78	\$250,000.00
03/20/2024	WAGeworks FSA RECEIVABLE INV6317309 INVIVO THERAPEUTICS HO	-\$741.44	\$0.00	\$249,258.56
03/20/2024	WIRE OUT 240800472200 202408004722;BNF SVB CARD OPER ATIONS- ACH PAYMENTS;OBI INVIV	-\$546.06	\$0.00	\$248,712.50
03/20/2024	WIRE OUT 240800472100 202408004721;BNF SVB CARD OPER ATIONS - ACH PAYMENTS;OBI INVI	-\$862.06	\$0.00	\$247,850.44
03/20/2024	CHECK #16929	-\$250.00	\$0.00	\$247,600.44
03/20/2024	CASH SWEEP REDEMPTION	\$0.00	\$2,399.56	\$250,000.00
03/21/2024	CHECK #16927	-\$11.85	\$0.00	\$249,988.15
03/21/2024	CHECK #16931	-\$57.50	\$0.00	\$249,930.65
03/21/2024	CHECK #16933	-\$250.00	\$0.00	\$249,680.65
03/21/2024	CHECK #16928	-\$707.70	\$0.00	\$248,972.95
03/21/2024	CASH SWEEP REDEMPTION	\$0.00	\$1,027.05	\$250,000.00
03/22/2024	WIRE OUT 240322L1B77D1C001890 202408207020;BNF ADP, LLC.;OBI NET PAY AND TAX - PAYDATE 3.2	-\$78,116.27	\$0.00	\$171,883.73
03/22/2024	CASH SWEEP REDEMPTION	\$0.00	\$78,116.27	\$250,000.00
03/25/2024	WAGeworks RECEIVABLE INV6219615 INVIVO THERAPEUTICS HO	-\$24.00	\$0.00	\$249,976.00
03/25/2024	CHECK #16926	-\$212.42	\$0.00	\$249,763.58

**Analysis Checking - XXXXXX4583** (continued)

**Account Activity** (continued)

Transaction Date	Description	Debits	Credits	Balance
03/25/2024	CASH SWEEP REDEMPTION	\$0.00	\$236.42	\$250,000.00
03/26/2024	ANALYSIS SERVICE CHARGE	-\$242.13	\$0.00	\$249,757.87
03/26/2024	CASH SWEEP REDEMPTION	\$0.00	\$242.13	\$250,000.00
03/27/2024	HEALTHEQUITY INC HealthEqui 81795 InVivo Therapeutics Co	-\$41.08	\$0.00	\$249,958.92
03/27/2024	WIRE OUT 240327L1B77D1C002074 202408707496;BNF KORN FERRY (U S);OBI INVOICE 1590130660, 159	-\$855.00	\$0.00	\$249,103.92
03/27/2024	CASH SWEEP REDEMPTION	\$0.00	\$896.08	\$250,000.00
03/28/2024	WIRE OUT 240328L1B77D1C008319 202408829001;BNF ERIKA DAHL;OB I 10	-\$900.00	\$0.00	\$249,100.00
03/28/2024	WIRE OUT 240328L1B77D1C008336 202408829036;BNF SOLIUM CAPITA L LLC;OBI 167622	-\$2,500.00	\$0.00	\$246,600.00
03/28/2024	WIRE OUT 240328L1B77D1C008332 202408829028;BNF CONTINENTAL S TOCK TRANSFER;OBI 91146	-\$2,836.26	\$0.00	\$243,763.74
03/28/2024	WIRE OUT 240328L1B77D1C008333 202408829030;BNF DIGITAL MEDIA INNOVATIONS, LLC;OBI 10000001	-\$4,755.50	\$0.00	\$239,008.24
03/28/2024	WIRE OUT 240328L1B77D1C008334 202408829032;BNF WISE;OBI WISE FBONOUS HEALTHCARE COMMUNICAT	-\$7,200.00	\$0.00	\$231,808.24
03/28/2024	WIRE OUT 240328L1B77D1C008321 202408829003;BNF SONORAN CAPIT AL ADVISORS, LLC;OBI 829	-\$8,428.00	\$0.00	\$223,380.24
03/28/2024	WIRE OUT 240328L1B77D1C008337 202408829038;BNF CHARLES SCHWA B;OBI PLAN ACCOUNT 6670-8958IN	-\$12,377.88	\$0.00	\$211,002.36
03/28/2024	WIRE OUT 240328L1B77D1C008320 202408829004;BNF SSG ADVISORS, LLC;OBI MARCH 2024	-\$25,000.00	\$0.00	\$186,002.36
03/28/2024	WIRE OUT 240328L1B77D1C008335 202408829031;BNF LANDIS RATH A ND COBB LLP;OBI INVIVO THERAPE	-\$78,231.01	\$0.00	\$107,771.35

03913 5779250 022453 044905 0003/0004

**Analysis Checking - XXXXXX4583** (continued)

**Account Activity** (continued)

Transaction Date	Description	Debits	Credits	Balance
03/28/2024	CASH SWEEP REDEMPTION	\$0.00	\$142,228.65	\$250,000.00
03/29/2024	CHECK #16932	-\$101.61	\$0.00	\$249,898.39
03/29/2024	CASH SWEEP REDEMPTION	\$0.00	\$101.61	\$250,000.00
03/29/2024	INT TRANSFER FROM 3301090116	\$0.00	\$0.42	\$250,000.42
03/31/2024	Ending Balance			\$250,000.42

**Checks Cleared**

Check Date	Check Number	Check Amount	Check Date	Check Number	Check Amount
03/15/2024	16898	\$1,442.05	03/25/2024	16926*	\$212.42
03/21/2024	16927	\$11.85	03/21/2024	16928	\$707.70
03/20/2024	16929	\$250.00	03/19/2024	16930	\$115.00
03/21/2024	16931	\$57.50	03/29/2024	16932	\$101.61
03/21/2024	16933	\$250.00			

\* Indicates skipped check number

**March 2024**

Reporting Activity 03/01 - 03/31

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INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: CMC Advisors, Inc.  
 \$1,442.05

one thousand four hundred forty-two and 00/100

CMC Advisors, Inc.  
 75 Spring Street, 20  
 New York, NY 10004  
 United States

#16898 03/15/2024 \$1,442.05

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: AT&T  
 \$212.42

two hundred twelve and 42/100

AT&T  
 1935 Wynnwood Road  
 Colorado Springs, CO 80906  
 United States

#16926 03/25/2024 \$212.42

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: H2O Energy Services  
 \$11.85

eleven and 85/100

H2O Energy Services  
 1515 S. De Anza Blvd, Ste 100  
 San Jose, CA 95128  
 United States

#16927 03/21/2024 \$11.85

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: The United National Life Insurance Company  
 \$707.70

seven hundred seven and 70/100

The United National Life Insurance Company  
 PO Box 6621  
 Card Stream 1, 60130-6621  
 United States

#16928 03/21/2024 \$707.70

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: Teppan Merrill LLC  
 \$250.00

two hundred fifty and 00/100

Teppan Merrill LLC  
 PO Box 742785  
 Chicago, IL 60674  
 United States

#16929 03/20/2024 \$250.00

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: Verizon  
 \$115.00

one hundred fifteen and 00/100

Verizon  
 PO Box 75062  
 Atlanta, GA 30376  
 United States

#16930 03/19/2024 \$115.00

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: Wibe Service Plus  
 \$57.50

fifty seven and 50/100

Wibe Service Plus  
 Via 11 Serv of Pk 4  
 PO Box 742785  
 Chicago, IL 60674-2788  
 United States

#16931 03/21/2024 \$57.50

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: Veritas Inc.  
 \$101.61

one hundred one and 61/100

Veritas Inc.  
 1524 Transforce Hwy, Suite 10  
 Greenwood, CO 80040  
 United States

#16932 03/29/2024 \$101.61

INVO THERAPEUTICS CORPORATION  
 01415 CALLE DEL SOL, SUITE 4100  
 CARROLL, CA 94708

SLICON VALLEY BANK  
 31717 ZEPHYRUS BLVD  
 SAN JOSE, CA 95134

PAY TO THE ORDER OF: Teppan Merrill LLC  
 \$250.00

two hundred fifty and 00/100

Teppan Merrill LLC  
 PO Box 742785  
 Chicago, IL 60674  
 United States

#16933 03/21/2024 \$250.00

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3003 Tasman Drive, Santa Clara, CA 95054

**March 2024**

Reporting Activity 03/01 - 03/31

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**ADDRESS SERVICE REQUESTED**

INVIVO THERAPEUTICS CORPORATION  
1500 DISTRICT AVENUE  
BURLINGTON MA 01803

DDA #: XXXXXX4583

Target Balance: \$250,000.00

**Managing Your Accounts**

- Phone:** (408) 654-4636
- Toll-Free:** (800) 774-7390
- Email:** clientsupport@svb.com
- Online:** www.svb.com

**Messages/Notifications**

**Month-End Allocation %**



**SVB Cash Sweep Summary - Account XXXXXX0747**

Fund Name	CUSIP	Ticker	Avg. Monthly Balance	Month-End Position	Net Monthly Income Earned*	Avg. Gross Yield**
Western Asset Inst US Treas Res/Inv	52470G684	LTRXX	\$2,429,622.40	\$2,376,897.20	\$9,963.36	5.140%
BlackRock Liquidity:T-Fund Admin	09248U676	BTAXX	\$2,429,614.70	\$2,376,897.20	\$9,859.98	5.080%
<b>Totals</b>				<b>\$4,753,794.40</b>	<b>\$19,823.34</b>	

\* Net Monthly Income Earned represents dividends earned in the current month, which are paid on the first day of the following month, less bank sweep fees.

\*\* Avg. Gross Yield is the annualized average 30 day yield gross of any bank sweep fees.

**MONEY MARKET MUTUAL FUND INVESTMENTS ARE:**

**NOT A DEPOSIT - NOT FDIC INSURED - NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY - NOT GUARANTEED BY THE BANK - MAY LOSE VALUE**

**March 2024**

Reporting Activity 03/01 - 03/31

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**SVB Cash Sweep Activity - Western Asset Inst US Treas Res/Inv**

Date	Transaction Description	Transaction Amount	Price	Investment Balance
03/01/2024	Redemption	(\$6,239.12)	\$1.00	
03/01/2024	Fee Charged	(\$469.94)	\$1.00	
03/01/2024	Dividend Reinvest	\$7,832.41	\$1.00	\$2,475,218.58
03/04/2024	Redemption	(\$39.63)	\$1.00	\$2,475,178.95
03/06/2024	Redemption	(\$4,322.20)	\$1.00	\$2,470,856.75
03/08/2024	Redemption	(\$37.66)	\$1.00	\$2,470,819.09
03/11/2024	Redemption	(\$39,765.80)	\$1.00	\$2,431,053.29
03/12/2024	Redemption	(\$217.32)	\$1.00	\$2,430,835.97
03/13/2024	Purchase	\$1,782.86	\$1.00	\$2,432,618.83
03/14/2024	Redemption	(\$204.23)	\$1.00	\$2,432,414.60
03/18/2024	Redemption	(\$13,155.25)	\$1.00	\$2,419,259.35
03/20/2024	Redemption	(\$903.40)	\$1.00	\$2,418,355.95
03/21/2024	Redemption	(\$1,199.78)	\$1.00	\$2,417,156.17
03/22/2024	Redemption	(\$513.52)	\$1.00	\$2,416,642.65
03/25/2024	Redemption	(\$39,058.14)	\$1.00	\$2,377,584.51
03/26/2024	Redemption	(\$118.20)	\$1.00	\$2,377,466.31
03/27/2024	Redemption	(\$121.07)	\$1.00	\$2,377,345.24
03/28/2024	Redemption	(\$448.04)	\$1.00	\$2,376,897.20

MONEY MARKET MUTUAL FUND INVESTMENTS ARE:

NOT A DEPOSIT - NOT FDIC INSURED - NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY - NOT GUARANTEED BY THE BANK - MAY LOSE VALUE



**March 2024**

Reporting Activity 03/01 - 03/31

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**SVB Cash Sweep Activity - BlackRock Liquidity:T-Fund Admin**

Date	Transaction Description	Transaction Amount	Price	Investment Balance
03/01/2024	Fee Charged	(\$464.86)	\$1.00	
03/01/2024	Dividend Reinvest	\$7,747.66	\$1.00	
03/01/2024	Redemption	(\$6,239.11)	\$1.00	\$2,475,138.92
03/04/2024	Purchase	\$40.03	\$1.00	\$2,475,178.95
03/06/2024	Redemption	(\$4,322.19)	\$1.00	\$2,470,856.76
03/08/2024	Redemption	(\$37.68)	\$1.00	\$2,470,819.08
03/11/2024	Redemption	(\$39,765.79)	\$1.00	\$2,431,053.29
03/12/2024	Redemption	(\$217.31)	\$1.00	\$2,430,835.98
03/13/2024	Purchase	\$1,782.86	\$1.00	\$2,432,618.84
03/14/2024	Redemption	(\$204.24)	\$1.00	\$2,432,414.60
03/18/2024	Redemption	(\$13,155.26)	\$1.00	\$2,419,259.34
03/20/2024	Redemption	(\$903.38)	\$1.00	\$2,418,355.96
03/21/2024	Redemption	(\$1,199.78)	\$1.00	\$2,417,156.18
03/22/2024	Redemption	(\$513.53)	\$1.00	\$2,416,642.65
03/25/2024	Redemption	(\$39,058.13)	\$1.00	\$2,377,584.52
03/26/2024	Redemption	(\$118.22)	\$1.00	\$2,377,466.30
03/27/2024	Redemption	(\$121.06)	\$1.00	\$2,377,345.24
03/28/2024	Redemption	(\$448.04)	\$1.00	\$2,376,897.20

**MONEY MARKET MUTUAL FUND INVESTMENTS ARE:**

**NOT A DEPOSIT - NOT FDIC INSURED - NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY - NOT GUARANTEED BY THE BANK - MAY LOSE VALUE**



**March 2024**

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**MONEY MARKET MUTUAL FUND INVESTMENTS ARE:  
NOT A DEPOSIT - NOT FDIC INSURED - NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY - NOT GUARANTEED BY THE BANK - MAY LOSE VALUE**

ADDRESS SERVICE REQUESTED

>049696 5770612 0001 092196 10Z  
 INVIVO THERAPEUTICS CORPORATION  
 1500 DISTRICT AVENUE  
 BURLINGTON, MA 01803

Managing Your Accounts

-  Phone: (408) 654-4636
-  Toll-Free: (800) 774-7390
-  Email: clientsupport@svb.com
-  Online: www.svb.com

Summary of Accounts

Account Type	Account Number	Ending Balance
Collateral MMA	XXXXXX0116	\$50,000.00
<b>Total Balance</b>		<b>\$50,000.00</b>

Collateral MMA - XXXXXX0116

Account Summary

Date	Description	
03/01/2024	Beginning Balance	\$50,000.00
03/31/2024	Ending Balance	\$50,000.00
	Total debits this period	\$0.42
	Total credits this period	\$0.00
	Service Charge	\$0.00

Interest Summary

Description	
Interest Earned From 03/01/2024 Through 03/31/2024	
Annual Percentage Yield Earned	0.01%
Interest Days	31
Interest Earned	\$0.42
Interest Paid This Period	\$0.42
Interest Paid Year-to-Date	\$1.24
Interest Withheld Year-to-Date	\$0.00

Account Activity

Transaction Date	Description	Debits	Credits	Balance
03/01/2024	Beginning Balance			\$50,000.00
03/29/2024	INTEREST PAYMENT	\$0.00	\$0.42	\$50,000.42
03/29/2024	INT TRANSFER TO 3301084583	-\$0.42	\$0.00	\$50,000.00
03/31/2024	Ending Balance			\$50,000.00

Interest Rate Summary

Date	Rate
03/01/2024	0.01%

CHECKS OUTSTANDING						CHECKBOOK RECONCILIATION		
DATE OR #	AMOUNT	DATE OR #	AMOUNT	DATE OR #	AMOUNT			
						ENTER BALANCE THIS STATEMENT	\$	
						ADD RECENT DEPOSITS (NOT CREDITED ON THIS STATEMENT)	\$	
						SUBTOTAL	\$	
						SUBTRACT TOTAL ITEMS OUTSTANDING	\$	
BALANCE should agree with your checkbook balance after deducting charges and adding credits not shown in your checkbook but included on this statement as follows: Interest-ADD Overdraft-DEDUCT Automatic Payment-DEDUCT Automatic Advance-ADD Service Charge-DEDUCT						<b>BALANCE</b>	\$	

PLEASE REPORT ANY ERRORS OR OMISSIONS PROMPTLY TO US. ERRORS OR OMISSIONS THAT ARE REPORTED WITHIN THE FIRST 30 DAYS FROM THE DATE OF THE LAST STATEMENT CYCLE ARE USUALLY RESOLVED MUCH MORE QUICKLY THAN DATED REQUESTS. As a fraud prevention measure, you need to review your statements and report unauthorized use or errors to us, as explained in more detail below.

If your checkbook and statement do not balance have you:

- Accounted for bank charges?
  Verified additions and subtractions in your checkbook?
  Compared canceled checks to check stub?
  Compared deposit amounts on statement to your checkbook?

Any charges for imprinted checks include state sales tax computed at the current rate, when applicable. You can call (800) 774-7390 to request an item or substitute check, or a legible copy. We will without charge provide at least two items (or substitute checks or legible copies) upon request, with respect to each statement.

**IN CASE OF ERRORS OR QUESTIONS CONCERNING YOUR ELECTRONIC TRANSFERS  
(For Consumer Clients)**

Telephone Silicon Valley Bank at (800) 774-7390 or write us at: Silicon Valley Bank, Attn: Client Services, 3003 Tasman Drive, Santa Clara, CA 95054, as soon as you can, if you think your statement or your receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number (if any).
- Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe this is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

For questions about preauthorized transfers, please contact us at (800) 774-7390.

**IN CASE OF UNAUTHORIZED USE OF YOUR CHECKS OR ACCOUNTS**

You agree to review your statement and to report unauthorized use (checks or other charges that are forged, altered or other unauthorized use) or error immediately. Your deposit agreement sets specific times within which you must report unauthorized use or errors to us. In summary (and subject to special rules that may apply to consumers), if you fail to report unauthorized use or errors to us within 30 days after your statement is available, you may be liable for subsequent unauthorized use by the same wrongdoer. If you fail to report within 60 days, you may also be precluded from asserting the unauthorized use or other error against us. Your statement is deemed "available" when made available in paper or electronic form. Your deposit agreement or Related Agreements may set shorter reporting requirements, such as for ACH services.

**FAIR CREDIT REPORTING ACT**

We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.