

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE

In re: Orexigen Therapeutics, Inc.

Case No. 18-10518

Debtor(s)

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§

Jointly Administered

Post-confirmation Report

Chapter 11

Quarter Ending Date: 12/31/2022

Petition Date: 03/12/2018

Plan Confirmed Date: 05/17/2019

Plan Effective Date: 05/31/2019

This Post-confirmation Report relates to: Reorganized Debtor

Other Authorized Party or Entity: Wind-Down Administrator

Name of Authorized Party or Entity

/s/ Aaron H. Stulman

Signature of Responsible Party

01/20/2023

Date

Aaron H. Stulman

Printed Name of Responsible Party

Potter Anderson & Corroon LLP
1313 N. Market St., 6th Floor,
Wilmington, DE 19801-6108

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.



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Debtor's Name Orexigen Therapeutics, Inc.

Case No. 18-10518

Part 1: Summary of Post-confirmation Transfers

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	\$30,055	\$10,644,443
b. Non-cash securities transferred	\$0	\$0
c. Other non-cash property transferred	\$0	\$0
d. Total transferred (a+b+c)	\$30,055	\$10,644,443

Part 2: Preconfirmation Professional Fees and Expenses

a.			Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
	Professional fees & expenses (bankruptcy) incurred by or on behalf of the debtor <i>Aggregate Total</i>			\$0	\$100,985	\$0
<i>Itemized Breakdown by Firm</i>						
	Firm Name	Role				
i	Potter Anderson & Corroon LL	Special Counsel	\$0	\$16,280	\$0	\$16,280
ii	Quinn Emanuel Urquhart & Sul	Special Counsel	\$0	\$84,705	\$0	\$84,705
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Debtor's Name Orexigen Therapeutics, Inc.

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			Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
b.	Professional fees & expenses (nonbankruptcy) incurred by or on behalf of the debtor		\$0	\$0	\$0	\$0
	<i>Aggregate Total</i>					
	<i>Itemized Breakdown by Firm</i>					
		Firm Name	Role			
	i	N/A		\$0	\$0	\$0
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Debtor's Name Orexigen Therapeutics, Inc.

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Debtor's Name Orexigen Therapeutics, Inc.

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Debtor's Name Orexigen Therapeutics, Inc.

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c.	All professional fees and expenses (debtor & committees)			\$0	\$100,985	\$0	\$100,985

Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

	Total Anticipated Payments Under Plan	Paid Current Quarter	Paid Cumulative	Allowed Claims	% Paid of Allowed Claims
a. Administrative claims	\$0	\$0	\$0	\$192,468	0%
b. Secured claims	\$1,228,942	\$0	\$8,537,068	\$165,000,000	5%
c. Priority claims	\$90,795	\$0	\$90,795	\$0	0%
d. General unsecured claims	\$586,925	\$0	\$464,225	\$93,109,625	0%
e. Equity interests	\$0	\$0	\$0		

Part 4: Questionnaire

- a. Is this a final report? Yes No
- If yes, give date Final Decree was entered: _____
- If no, give date when the application for Final Decree is anticipated: 12/31/2023
- b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes No

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Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee'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. 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 Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

/s/ Peter Kravitz

Signature of Responsible Party

Wind Down Administrator

Title

Peter Kravitz

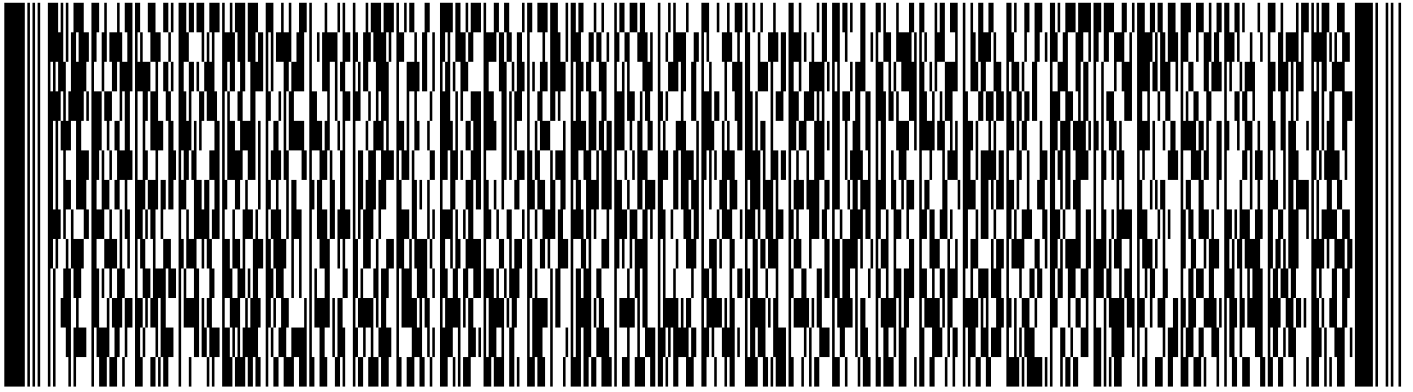
Printed Name of Responsible Party

01/20/2023

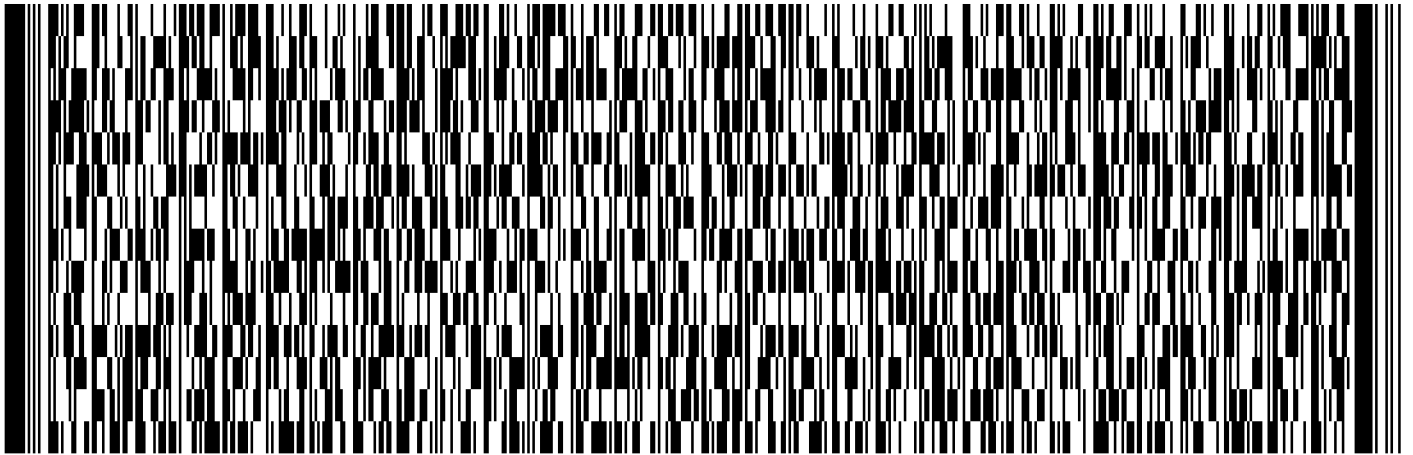
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Debtor's Name Orexigen Therapeutics, Inc.

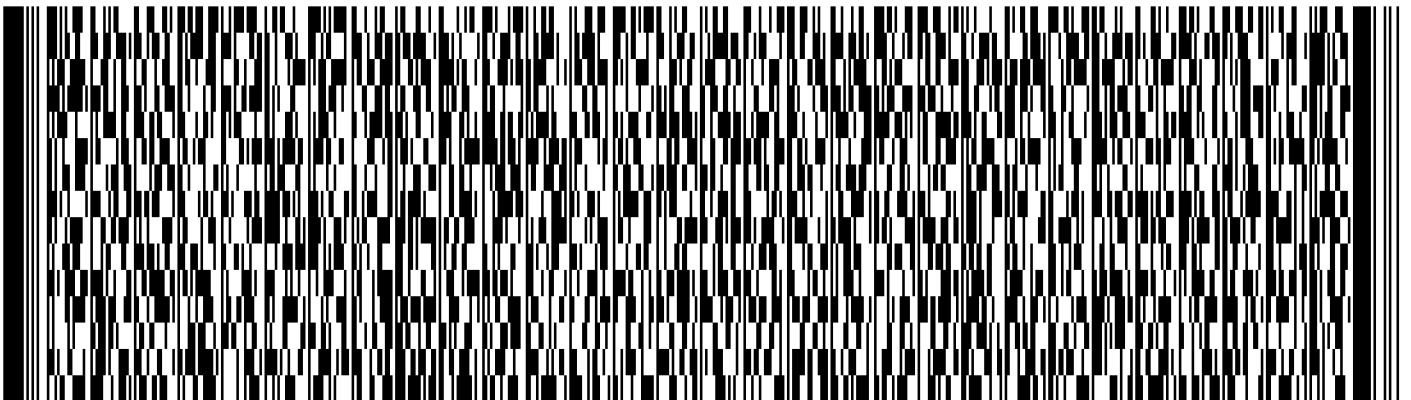
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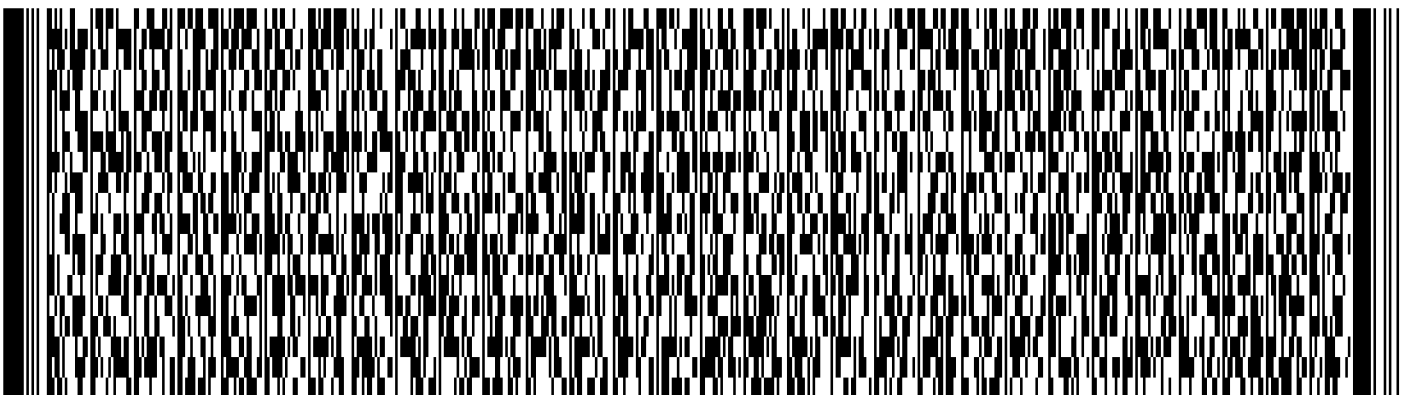
Page 1



Other Page 1



Page 2 Minus Tables



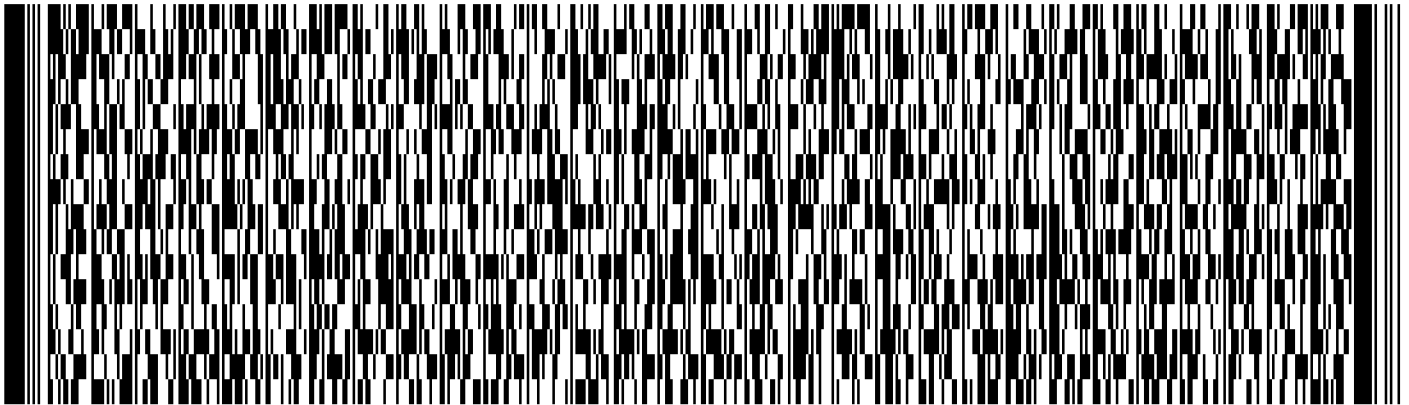
Bankruptcy Table 1-50

Debtor's Name Orexigen Therapeutics, Inc.

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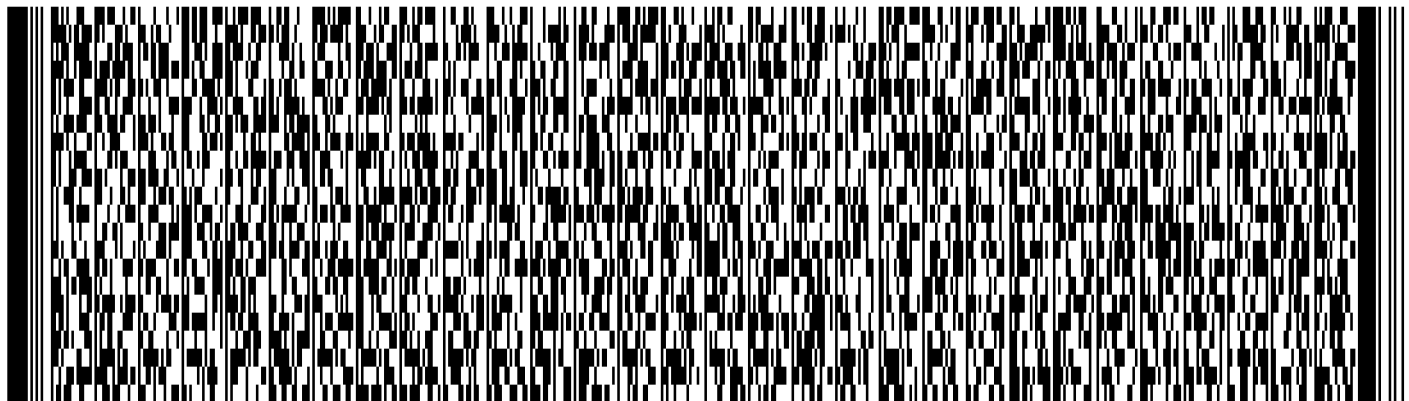
Bankruptcy Table 51-100



Non-Bankruptcy Table 1-50



Non-Bankruptcy Table 51-100



Part 3, Part 4, Last Page

In re Orexigen Therapeutics, Inc
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Notes to Post-Confirmation Report for the Quarter Ended **December 31st**

Part 2b

The Wind Down Administrator has not made any payments on account of pre-confirmation professional fees and expenses.

Part 3

“Total Anticipated Payments Under Plan” reflects amounts paid plus cash on hand as of the date of this report, and is subject to reduction based on, among other things, operating expenses of the Wind Down Administrator and/or the estates. The claims reconciliation process is ongoing and reporting with respect to “Allowed Claims” is premature at this time. Accordingly, all of the amounts listed with respect to “Allowed Claims” of all priority levels reflect the estimates set forth in the Disclosure Statement and any and all amounts are subject to change as the reconciliation process evolves. Therefore, the “% Paid of Allowed Claims” may be inaccurate as a result.