

Debtor name Orexigen Therapeutics, Inc.  
United States Bankruptcy Court for the: District of Delaware  
Case number (If known): 18-10518

Check if this is an amended filing

**Official Form 206Sum**

Summary of Assets and Liabilities for Non-Individuals

12/15

**Part 1:** Summary of Assets

**1. Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)**

**1a. Real property:**

Copy line 88 from Schedule A/B.....

\$0.00  
+ Undetermined

**1b. Total personal property:**

Copy line 91A from Schedule A/B.....

\$157,588,427.45  
+ Undetermined

**1c. Total of all property:**

Copy line 92 from Schedule A/B.....

\$157,588,427.45  
+ Undetermined

**Part 2:** Summary of Liabilities

**2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)**

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$165,227,954.00  
+ Undetermined

**3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)**

**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$0.00  
+ Undetermined

**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

\$107,002,999.41  
+ Undetermined

**4. Total liabilities.....**

Lines 2 + 3a + 3b

\$272,230,953.41  
+ Undetermined



**Fill in this information to identify the case:**

f 5

Debtor name Orexigen Therapeutics, Inc.

United States Bankruptcy Court for the: District of Delaware

Case number (If known): 18-10518

Official Form 206E/F

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**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

**1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).**

- No. Go to Part 2.
- Yes. Go to line 2. *No amendments to Schedule E.*

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**

**Amount of claim**

3.136 **Nonpriority creditor's name and mailing address**

**As of the petition filing date, the claim is:**

\$16,099.33

Veeva Systems, Inc.  
 P.O. Box 740434  
 Los Angeles, CA 90074-0434

- Check all that apply.
- Contingent
  - Unliquidated
  - Disputed

**Date or dates debt was incurred**

**Basis for the claim:**

Trade Payable

**Last 4 digits of account number**

**Is the claim subject to offset?**

- No
- Yes

**Amount of claim**

3.137 **Nonpriority creditor's name and mailing address**

**As of the petition filing date, the claim is:**

\$3,006.21

Verizon Wireless  
 P.O. Box 660108  
 Dallas, TX 75266-0108

- Check all that apply.
- Contingent
  - Unliquidated
  - Disputed

**Date or dates debt was incurred**

**Basis for the claim:**

Trade Payable

**Last 4 digits of account number**

**Is the claim subject to offset?**

- No
- Yes

**Amount of claim**

3.138 **Nonpriority creditor's name and mailing address**

**As of the petition filing date, the claim is:**

\$7,903,843.44

VML, LLC  
 14229 Collection Center Drive  
 Chicago, IL 60693-0142

- Check all that apply.
- Contingent
  - Unliquidated
  - Disputed *AMENDED*

**Date or dates debt was incurred**

**Basis for the claim:**

Trade Payable

**Last 4 digits of account number**

**Is the claim subject to offset?**

- No
- Yes

			<b>Amount of claim</b>
3.142	<b>Nonpriority creditor's name and mailing address</b> _____ Wilmington Trust, National Association _____ Indenture Trustee _____ 1100 Market Street _____ Wilmington DE 19890 _____  <b>Date or dates debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> 2.75% convertible senior notes due 2020 _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$25,536,663.49 _____

			<b>Amount of claim</b>
3.143	<b>Nonpriority creditor's name and mailing address</b> _____ Young & Rubicam, Inc. _____ P.O. Box 751731 _____ Charlotte, NC 28275-1731 _____  <b>Date or dates debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <i>AMENDED</i>  <b>Basis for the claim:</b> Trade Payable _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$10,825,617.38 _____

			<b>Amount of claim</b>
3.144	<b>Nonpriority creditor's name and mailing address</b> _____ ZB Global _____ c/o Victoria Tucker _____ P.O. Box 231069 _____ Encinitas CA 92023-1069 _____  <b>Date or dates debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Trade Payable _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$752.50 _____

**Fill in this information to identify the case:**

**Debtor name** Orexigen Therapeutics, Inc.  
**United States Bankruptcy Court for the:** District of Delaware  
**Case number (If known):** 18-10518

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

**12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in  
 I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)*
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)*
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)*
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)*
- Schedule H: Codebtors (Official Form 206H)*
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)*
- Amended Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)*

*Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)*

Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

**Executed on** 12/18/2018

**x** /s/ Thomas Lynch  
 Signature of individual signing on behalf of the debtor

Thomas Lynch  
 Printed name

Chief Administrative Officer, General Counsel & Secretary  
 Position or relationship to debtor