

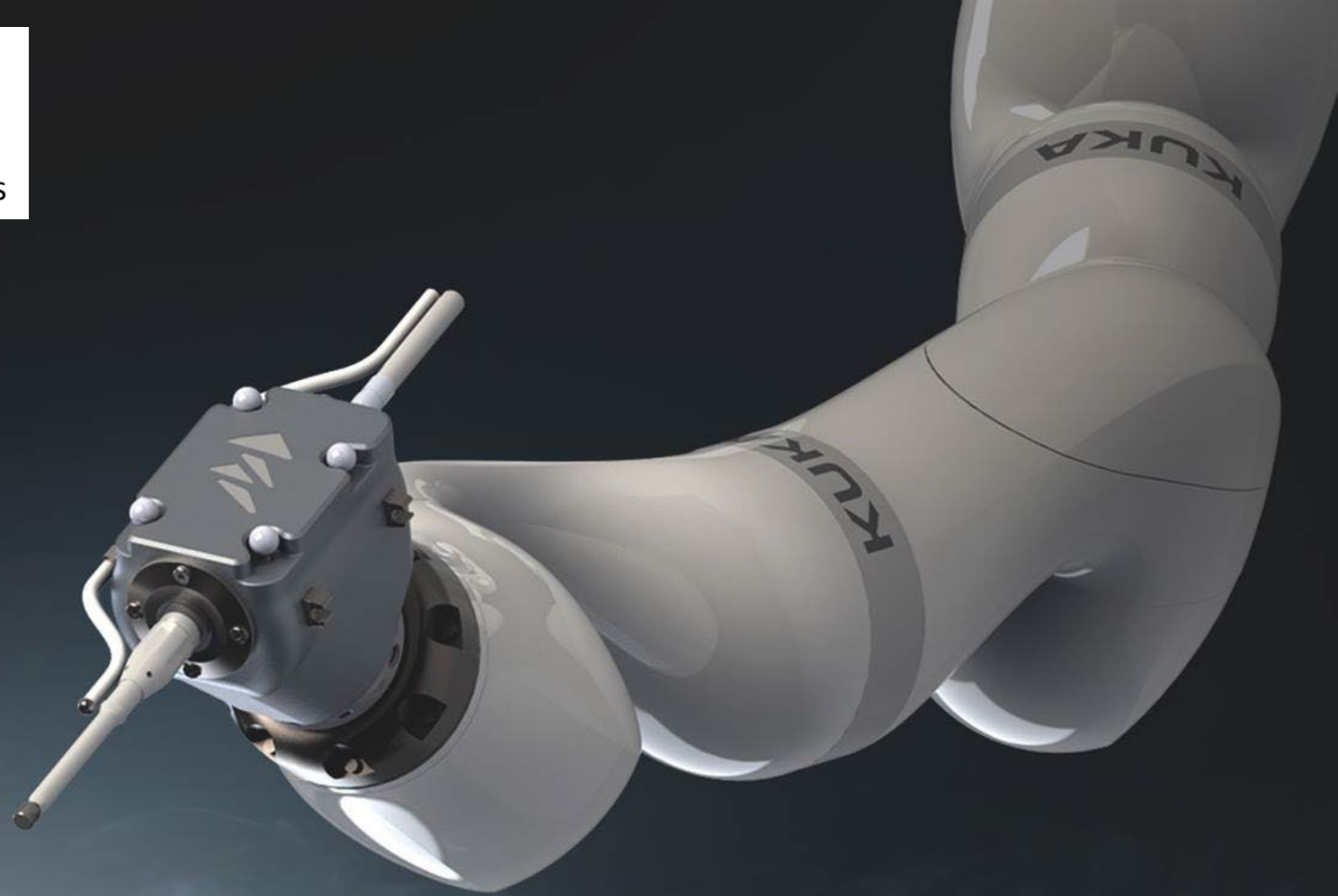
Public Listing

NASDAQ: MGRM

Offering 4,137,931 shares at \$7.25 per share

Purchase shares at: www.monogramorthopedics.com/investors

THE FUTURE
IS NOW.



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Although Monogram believes that the expectations reflected in these forward-looking statements are based on reasonable assumptions, there are a number of risks and uncertainties that could cause actual results to differ materially from such forward-looking statements. You are urged to carefully review and consider any cautionary statements and other disclosures, including the statements made under the heading "Risk Factors" and elsewhere in the offering statement filed with the SEC. Forward-looking statements speak only as of the date of the document in which they are contained, and Monogram does not undertake any duty to update any forward-looking statements except as may be required by law.

The offering will be made only by means of an offering circular. An offering statement on Form 1-A relating to these securities has been filed with the U.S. Securities and Exchange Commission and has become qualified. The securities offered by Monogram are highly speculative. Investing in shares of Monogram involves significant risks. The investment is suitable only for persons who can afford to lose their entire investment. Furthermore, investors must understand that such investment could be illiquid for an indefinite period of time. No public market currently exists for the securities, and if a public market develops following the offering, it may not continue.

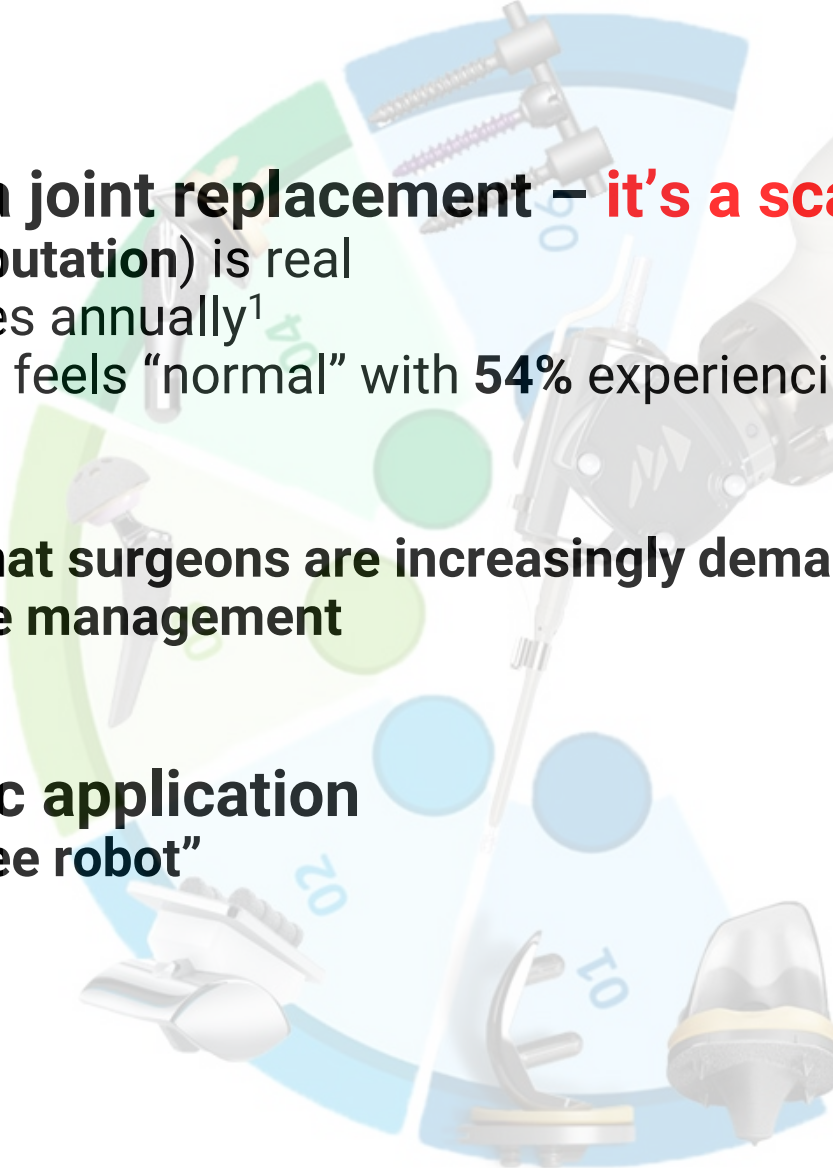
Monogram intends to list its securities on a national exchange and doing so entails significant ongoing corporate obligations including but not limited to disclosure, filing and notification requirements, as well compliance with applicable continued quantitative and qualitative listing standards. For additional information on Monogram, the offering and any other related topics, please review the Form 1-A offering circular that can be found at the following location EDGAR Entity Landing Page ([sec.gov](https://www.sec.gov)). Additional information concerning Risk Factors related to the offering, including those related to the business, government regulations, intellectual property and the offering in general, can be found in the risk factor section of the Form 1-A offering circular.

DealMaker Securities, LLC is being compensated a 4% commission from the lead Selling Agent engaged by Monogram Orthopaedics Inc. in regards to advertising of this investment. The Company has engaged Digital Offering, LLC ("Digital Offering") to act as lead selling agent (which we sometimes refer to as the "Selling Agent") to offer the shares of our common stock, par value \$0.001 (the "Common Stock") to prospective investors in this offering on a "best efforts" basis, which means that there is no guarantee that any minimum amount will be received by the Company in this offering. The Company will pay a cash commission of 7.00% to Digital Offering on sales of the shares of Common Stock. See "Plan of Distribution" in the Offering Circular for details of compensation payable to the Selling Agent in connection with the offering.

The Vision



- **We all know someone with a joint replacement – it's a scary surgery**
 - Apotemnophobia (**fear of amputation**) is real
 - **100,000 failed TKA** procedures annually¹
 - **Only 66%** of patients felt knee feels “normal” with **54%** experiencing residual symptoms²
- **We will solve this with:**
 - **Advanced surgical robotics that surgeons are increasingly demanding**
 - **Improved navigation and case management**
 - **Personalized implants**
- **One robot for any orthopedic application**
 - **No more “spine robot” or “knee robot”**



Large Market Opportunity



TAM	2022	2025	CAGR
Joint Recon + Spine ¹⁰	\$29.9B	\$32.8B	3.1%

● 4 companies **80% of knee market**³

Knee Market	2022	2025	CAGR
Total Knees ¹¹	\$9.1B	\$10.0B	2.9%
Robotic Knees ¹²	\$1.1B	\$2.3B	29.0%
Cementless Knees ^{13,14}	\$1.0B	\$1.8B	22.1%
Robotics & Cementless	\$2.1B	\$4.2B	25.8%

● **786K vs. 1.27M TKA** procedures⁴

● Only **12% of knees are robotic**; 3% of hips, 3% of shoulders

● First target market could **double** in the next 3 years

- Stryker (Mako) **90% of robot cases + 70% cementless knee market share** (even w/ higher ASP)⁵
- **400,000/year more cementless procedures by 2024**; rapid change in mix cementless vs. cemented expected like hips (cemented hips **54% to 85%** in 10 years)^{6,7}
- Clinical data should drive robotic adoption:
 - 90-day global expenditures **\$4,049 less for robotic TKA** vs. Manual⁸
 - Functional/Kinematic Alignment Benefits⁹

The Problem



- Surgeons aren't using robots (**88% of cases are still manual**)¹⁵
 - Manual cutting with “one size fits none” implants leading to poor patient satisfaction
 - Extremely inefficient; industry avg inventory turns **only 1.2 times** (SYK, ZBH, SNN)¹⁶
- Current Robotic Solutions also do not meet customer demands
 - Robots are too slow (**30 min longer** than manual; can add **\$3K/case**)¹⁷
 - Technology may be outdated and not harnessing full potential of robotics
 - not active • no AR integrations • limited reach • slow registration • limited clinical applications



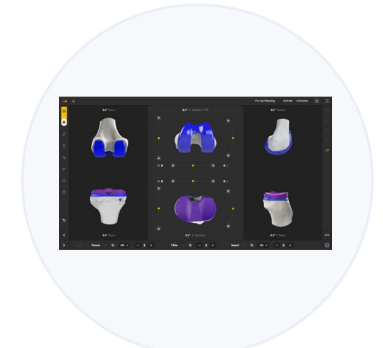
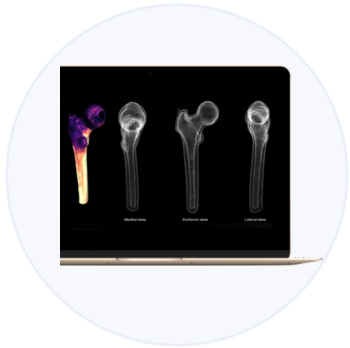
- Manual TKA surgery requires **6 to 12 trays**³²
 - Per case only 13-22% of instruments in tray are used³³
- Monogram target: **≤3 instrument trays** for the robotic system
 - Reduce wasted sales rep time to focus on selling³⁶
 - Reduce working capital inventory burden
 - Cutting 6 trays with 40 instruments used twice/day could save hospitals \$21,000 to \$30,600 annually.³⁴⁻³⁵

The Solution (Short Term)



● Advanced Navigated Active Robotics ●

● 7 joints for improved reach ● sagittal cutting ● variable speed full surgeon control ● integrated augmented reality ● advanced soft tissue assessment

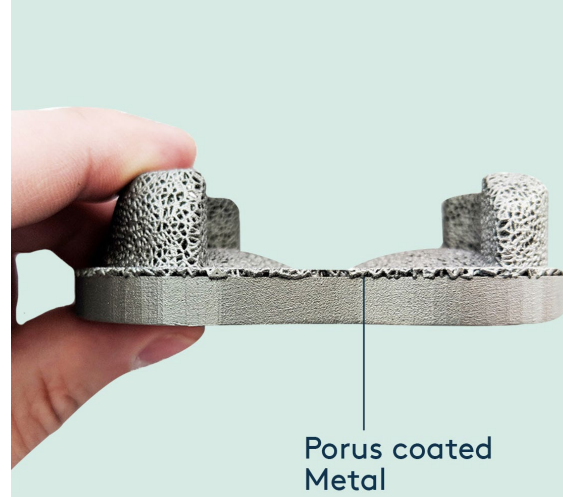


- Focus is significantly faster surgical times to drive adoption
 - We estimate Mako has **90% market** share because of efficient cutting
 - Manual TKA average procedure time **70 minutes**¹⁹
 - Stryker: 11.1 min registration, 11.8 min bone prep (**22.9 minutes**)¹⁸
 - Monogram target: 1 min registration, <5 min bone prep (**<6 minutes**)
 - Quick setup and minimal repositioning
- Autonomous path planning and execution could enable more clinical applications and improved surgical efficiency with uncompromised accuracy
- First mover advantage with active sagittal cutting

The Solution (Long Term)



● Patient Optimized 3D printed press-fit implants ●



- Studies with UCLA Orthopaedic Institute for Children and UNMC
- No cement (also “press-fit”) is better for younger active patients²⁰⁻²⁶
- Goal is improved initial stability and bone conservation
- Aim to explore full clinical potential of patient-optimized 3D printed implants²⁶⁻³⁰
- Novel robots enable novel implants
- Just in time business model vs. expensive one size fits none generic model

Proven Business Model



- Stryker (Mako) **90%** of robot cases + **70% cementless knee market share** (even w/ higher ASP)
- Safe and efficient cutting is the innovation

Mako Surgical (2006 – 2012)

Year	Revenue
2006	\$62,571
2007	\$717,798
2008	\$2,944,000
2009	\$34,208,000
2010	\$44,296,000
2011	\$84,507,000
2012	\$102,719,000
CAGR	243%

Feb '08 IPO

\$1.65B Acquisition

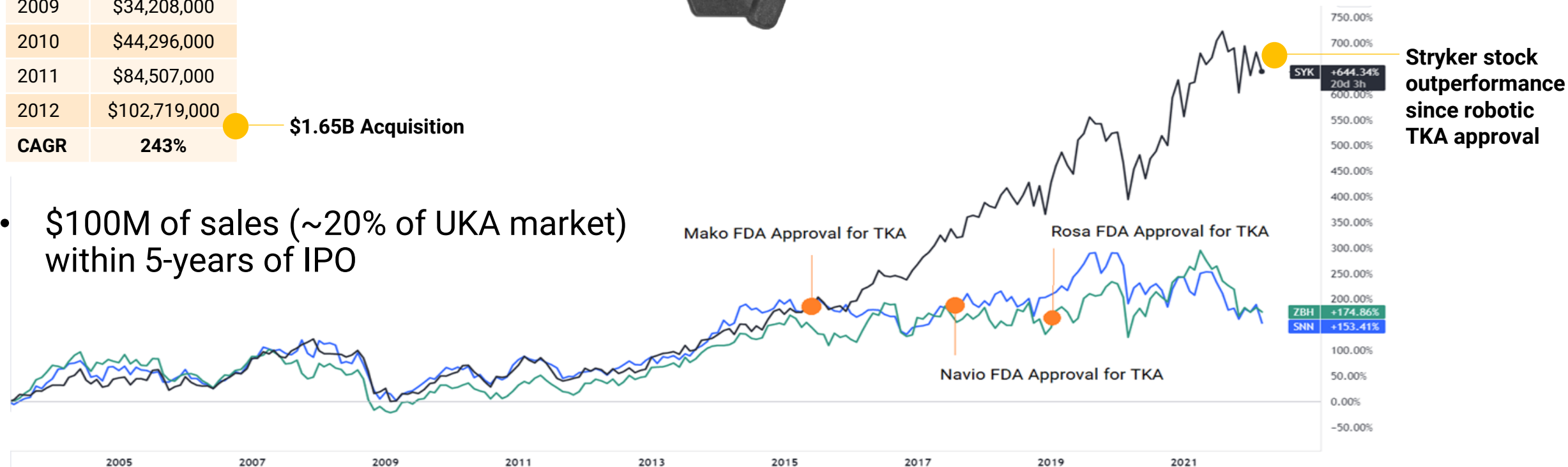


Novel robotics drive implant sales (razor/razorblade)

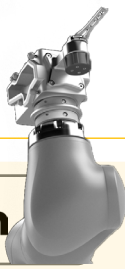
“They [Mako] went from essentially **nowhere** to over **20% market share** with an implant that had **no clinical heritage, that nobody had ever heard about...**”

David K. Floyd, Stryker President of Orthopedics

- \$100M of sales (~20% of UKA market) within 5-years of IPO



Competitive Summary



monogram

stryker

Smith+Nephew

 **ZIMMER BIOMET**

 **DePuy Synthes**

CUREXO

Efficient Case Planning



Fast Registration



Fast Cutting



Advanced Imaging



Platform Capability



AR Integration



Discussion Points

- Active sagittal cutting with surgeon gas pedal (first mover)
- CT based (will likely benefit from trend to more personalized alignment) with AI based case planning
- Proprietary AR based registration (<20 points unordered points for femur and tibia combined)
- Navigated
- Advanced soft tissue balancing
- Platform system could be application rich and enable custom implants (optimal for additional applications)
- May address the time and efficiency constraints of Mako vs. manual
- Will be compatible with custom implants

- Market Leader - Mako accounted for 94% of the robotic cases in ONN hospital network
- Only CT based widely adopted robot on the market (will likely benefit from trend to more personalized alignment)
- Surgeon initiated cutting (haptics) – advantage that could abate with time. Slow registration
- No press-fit partial knee with robot is major product gap
- Could be application limited (slow rollout/utilization for additional applications)

- Underperforming Mako utilization by significant margin
- Hand held rotary tool inefficient at cutting (not a robotic arm)
- Imageless system (no CT) not well suited for personalized alignment
- Slow registration
- Vertical integration of trackers (Atracsys) is interesting
- Navigation enabled partial knee (Engage surgical)
- Intelligence tensioner is compelling

- Underperforming Mako utilization by significant margin
- We are unpersuaded by robotic cut guides
- Reliance on manual
- Imageless system (no CT) not well suited for personalized alignment
- Slow registration

- Limited market history, time will tell market reception
- We are unpersuaded by table mounted cantilever system – appears to compromise rigidity
- Unconstrained depth and lateral movement could be concern
- Surgeon tactile feedback could be concern
- Imageless system (no CT) not well suited for personalized alignment
- Slow registration
- Application limited (only for knees)

- Limited market history, time will tell market reception
- We are unpersuaded by rotary cutting systems – extremely difficult to make time competitive
- Active robot
- Navigated robot
- CT based
- We have limited information on surgeon interaction with the system
- Appears to have many of the building blocks of a competitive system

Commercialization Roadmap



History Summary

- Founded in **2016**
- Over **\$38M raised from 17,000+ unique investors**
- **20 patent filings** for robotics and novel implants, 25 employees
- National Science Foundation (“NSF”) Grant Award
- FDA approved TKA (licensed and improved), UKA and THA implants (licensed)
- Approximately 60 simulated surgeries performed in Monogram cadaver lab
- Achieved 6-minute registration and TKA bone prep with prototype in cadaver lab

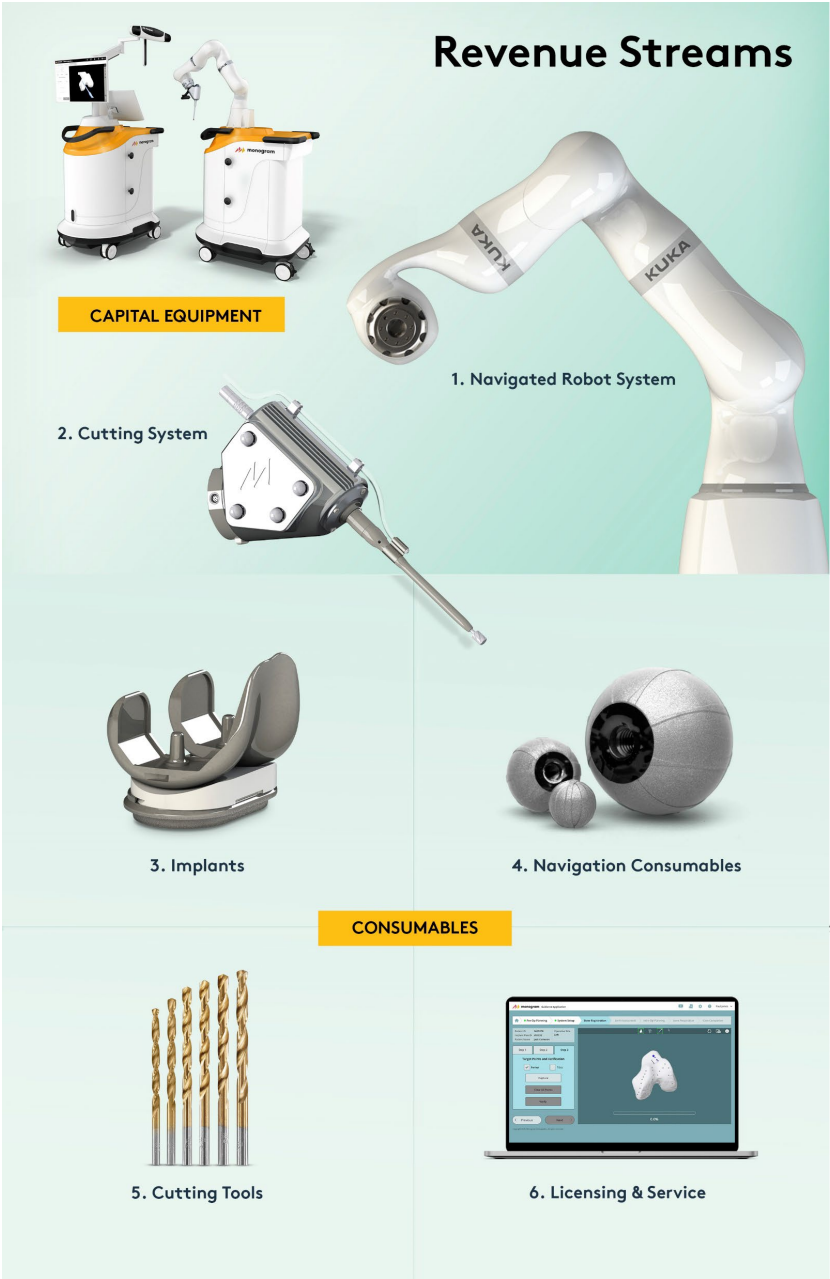
Upcoming Milestones

- Major livestream demo (expected in Q1 2023)
- FDA pre-submission meeting (expected Q1 2023)
- **Public listing on NASDAQ (expected Q2 2023)**
- Partial press-fit knee FDA submission (expected 2023)
- **Expect sales in 2024** (assumes favorable FDA meeting)



Average time to approval per FDA: <4 months³¹

Revenue Model



● Razor Razor-blade Model ●



Capital Equipment (the razor)

- Surgical robot cart and tracking cart
- Cutting system (also called end-effector)
- Surgical instrumentation (offered on consignment not for sale)
- One time sale, capital cost borne by hospital/outpatient clinic
 - Monogram will retain consultants to advise on pricing model
 - Monogram actively exploring financing options for hospitals
 - Focus will be minimizing working capital drag

Consumables (the razorblade)

- Oligopolistic price taker market
- Implants – primary TKA includes femur, tibia and insert
 - Cementless Knee ASP: \$4,427 (per ONN)
- Cutting tools (blades) & Navigation consumables (target ASP: \$600)

Recurring licensing annuity

- Price target 10% of capital equipment cost annually
- Additional extended warranty

What is the payback? Could we give the robots away?

Cases (monthly)	1 month	3 months	1 year
15	(\$354,757)	(\$264,271)	\$142,916
20	(\$339,676)	(\$219,028)	\$323,888
30	(\$309,514)	(\$128,542)	\$685,832
100	(\$98,380)	\$504,860	\$3,219,440
135	\$7,187	\$821,561	\$4,486,244

Calculator Assumptions:

- Note: not a forecast
- \$5,027 consumables ASP
- 60% gross margin (sales commission included)
- \$400,000 placement cost (i.e. giving away robot)

Management Team Overview



Doug Unis, MD
Founder & CMO

- Board Certified Orthopedic Surgeon
- Northwestern University Residency
- Rush University Fellowship
- Chief of Quality Improvement Mount Sinai West
- 19+ years of clinical practice



Ben Sexson, CFA
Co-founder & CEO

- California Institute of Technology
- Chartered Financial Analyst
- Direct of Business Development Pro-dex (ticker: PDEX)
- Vice President PPNR Modeling and Analytics MUFG Americas
- Analyst & Inv. Committee, First Wilshire



Kamran Shamaei, Ph.D.
CTO

- Yale Ph.D. in Robotics & Stanford Postdoctoral Associate
- Sr. Robotics Systems Engineer, Think Surgical, Inc.
- Senior Robotics Software Engineer, Auris Health Inc.
- Director of Platform, Carbon Robotics, Inc.
- Principal Engineer Planning Team Lead, Motion Inc,



Noel Knape, CPA
CFO

- Certified Public Accountant & MBA
- CFO Proflex Technologies
- VP Finance Newpark Fluid Systems
- VP Finance Microseismic
- Bredero Shaw Americas Controller
- Saxon Energy Services Region Controller

Has had wide range of **MedTech experience...**

Johnson & Johnson

stryker®

STERIS

Smith+Nephew

PRO-DEX
POWERED SURGICAL SOLUTIONS

ORCHID

MicroPort

Medtronic

DJO®

AURIS

THINK
SURGICAL

Boston
Scientific

Arthrex®

Highly Experienced Engineering Management



Muhammad Afnan
Director of Software

- San Francisco State University, BCS
- 40 years in software development



Kevin Posey
Director of QA/RA

- University of Texas at Austin, Bsci
- The Pennsylvania State University, MBA



Chris Scifert, Ph.D
Director of Implants

- University of Iowa, PhD
- 20+ years in total knee implants

Strong Surgeon Support



**Edward
Adler, MD**
NYC

- Board Certified Orthopedic Surgeon
- University Hospital in Newark Residency
- The Hospital for Joint Diseases Fellowship
- Heavy Mako user, former Stryker consultant
- Icahn School of Medicine at Mount Sinai



**Matthew
Heinrich, MD**
Austin

- Board Certified Orthopedic Surgeon
- Texas Tech School of Medicine
- Baylor College of Medicine Residency
- OrthoAlign
- Orthopaedic Specialists of Austin



**Gregory
Catlett, MD**
Austin

- The University of Texas at Houston Medical School
- The University of Texas at Houston residency
- Duke University fellowship
- Zimmer, OrthoAlign
- Orthopaedic Specialists of Austin



**Bobby
Jamieson, MD**
California

- Board Certified Orthopedic Surgeon
- Kansas City University Medical School
- Michigan State University Residency
- Depuy Synthes
- Orthopedic Specialty Center



**Adam
Cohen, MD**
NYC

- Board Certified Orthopedic Surgeon
- New York Medical College Medical School
- St. Luke's-Roosevelt Hospital Center Residency
- Academic appointments at NYU Langone Health System and the Mount Sinai Health System



**Roshan
Shah, MD**
NYC

- Board Certified Orthopedic Surgeon
- Yale University School of Medicine
- University of Pennsylvania Residency
- Rush University Fellowship
- Zimmer Biomet
- Columbia Orthopedics



**Doug
Unis, MD**
NYC

- Board Certified Orthopedic Surgeon
- Northwestern University Residency
- Rush University Fellowship
- Chief of Quality Improvement Mount Sinai West
- 19+ years of clinical practice



**Darwin
Chen, MD**
NYC

- MBA Stern School of Business
- Columbia University College of Physicians and Surgeons Medical School
- The Mount Sinai Hospital residency
- Former consultant with Smith & Nephew, Stryker & Depuy Synthes
- Icahn School of Medicine at Mount Sinai

Scientific Advisory Board



**Hani
Haider, PhD**
UNMC Biomechanics Lab

- Professor Orthopaedic Surgery Research UNMC
- Director Biomedical Engineering Research and Advanced Surgical Technologies
- President of ISTA



**Sophia
Sangiorgio, PhD**
UCLA Biomechanics Lab

- Adjunct Professor UCLA
- Director Biomechanics Laboratory
- PhD in Biomedical Engineering, UCLA



Comparable Companies Analysis

Company	Valuation	Considerations
Tinavi Medical Technologies (ticker: SHA: 688277)	<ul style="list-style-type: none">• \$790M USD mkt cap (down sharply with sales & currency impact)• 40x price/sales ratio (traded at 67 times sales earlier this year)	<ul style="list-style-type: none">• System is not actively cutting (analog is Zimmer Rosa)• Clinical applications (pelvis surgery/trauma) are not primary markets for Monogram and poor analogs• No implants
Curexo Inc. (ticker: 060280.KQ)	<ul style="list-style-type: none">• \$200M USD mkt cap (down sharply with currency impact)• 4.4x price/sales ratio	<ul style="list-style-type: none">• Rotary tool cutting (extremely slow and inefficient)• Surgeon out-of-the-loop• Poor reputation (affiliation with Think Surgical)• No implants (open platform)
Mako Surgical (ticker: SYK)	<ul style="list-style-type: none">• Acquired by Stryker for 1.7B in Dec 2013	<ul style="list-style-type: none">• Cable driven 4 DOF haptic arm• Primary implant UKA (not TKA)• CT-based• Focused on efficient and accurate cutting as innovation• Currently 99% of robotic utilization*
Intuitive Surgical (ticker: ISRG)	<ul style="list-style-type: none">• \$75B USD mkt cap• 13x price to sales ratio (down from 24 earlier this year)	<ul style="list-style-type: none">• Arm based robotic system• Capture telemedicine market• Similar high value consumables• Significant market premiums for robotics

Fundraise Summary



Listing Terms

- Offering: up to 4,137,931 common shares at \$7.25 per share
- Pre-money valuation: \$246M (\$30M capacity)
- Public listing: Monogram applied to list our Class A Common Stock on NASDAQ^{a,b} under ticker symbol “MGRM”
- Lead investment bank: Digital Offering
- Form 1A Offering Circular has been Qualified on [date] by the U.S. SEC
- Primary Use of Proceeds – development expenses for TKA FDA approval (engineering payroll, materials and overhead)

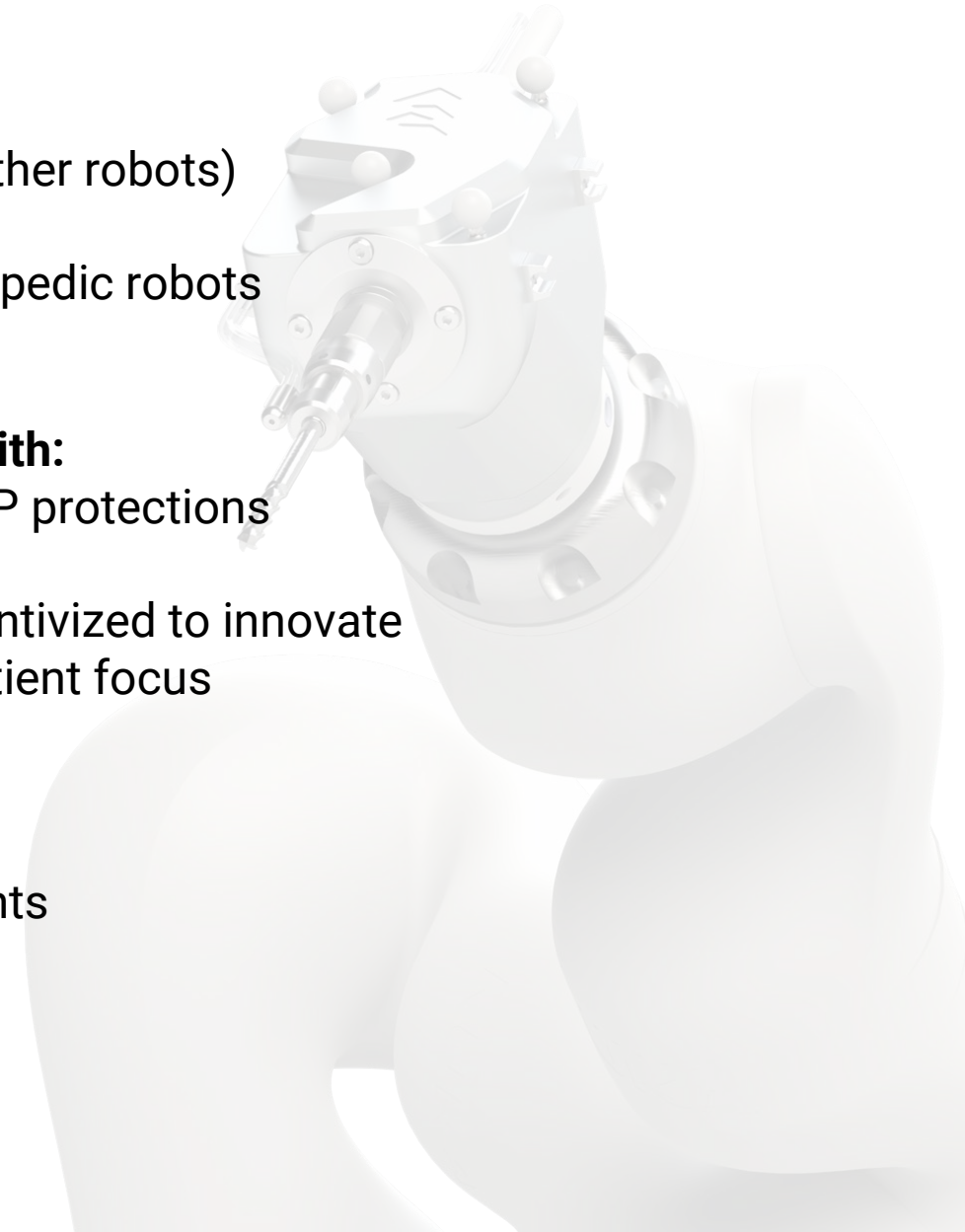


(a) Successful listing on the NASDAQ exchange is subject to meeting specific requirements and completing the offering.

(b) Monogram Orthopaedics, Inc. intends to list its securities on a national exchange and doing so entails significant ongoing corporate obligations including but not limited to disclosure, filing and notification requirements, as well compliance with applicable continued quantitative and qualitative listing standards.



- **We aim to accelerate robot adoption with:**
 - **Speed** – our goal is to be faster than manual surgery (and other robots)
 - **Simplicity** – Enable complex surgical techniques
 - **Utility** – Have wider clinical applications than existing orthopedic robots
 - **Adaptability** – Enable patient optimized implants
- **We aim to capture a significant share of this robotic adoption with:**
 - **Patents** – with 20 patent filings we believe we have strong IP protections
 - **First mover advantage**
 - **Incentivized R&D** – highly productive engineering team incentivized to innovate
 - **Patient first focus** – no market share today frees us to a patient focus
- **Favorable macro tailwinds:**
 - **Large and growing market**
 - **High growth target segment** – robotics and press-fit implants
 - **Trend to personalization is disruptive**
 - **Opportunities for technological differentiation**



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