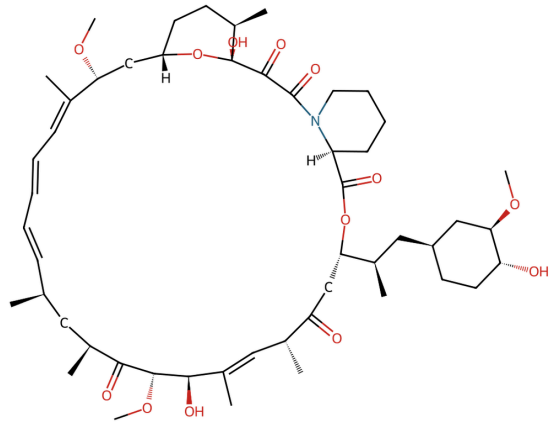


MANA RAPA NUI FOUNDATION

EASTER ISLAND · INDIGENOUS HEALTH & WELLBEING



RAPAMYCIN

RA'AU HENUA

MIRACLE DRUG,

CLAIMING ROYALTY

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Ra'au Henua

“MEDICINE OF THE LAND”

Rapamycin, Responsibility & Global Health Equity

Returning the legacy of a landmark discovery to the island that gave it its name.

INVESTOR & STRATEGIC PARTNERSHIP WHITE PAPER

Mana Rapa Nui Foundation

| 501(c)(3) Nonprofit Organization | Durham, North Carolina, USA

manarapanuifoundation.org ·

Prepared 2026 · Confidential draft for partnership discussion

01 Executive Summary

Rapamycin — one of the most influential compounds in modern medicine — was discovered in the soil of Rapa Nui and carries the island's name around the world. Yet the community whose land yielded it has never shared in its benefit.

Rapamycin underpins organ transplantation, oncology, and the fastest-growing area of aging research. The molecule launched a multibillion-dollar field of medicine and bears the indigenous name of the island where it was found. Today, however, residents of Rapa Nui face persistent gaps in healthcare infrastructure, elder care, and access to basic assistive and medical devices.

The Mana Rapa Nui Foundation invites pharmaceutical, biotechnology, and longevity-sector partners to help close this gap through a transparent, ESG-aligned partnership model that links scientific heritage to measurable community impact. We call this initiative *Ra'au Henua* — “medicine of the land” in the Rapanui language. We propose a two-phase initiative: the immediate delivery of assistive medical equipment to islanders in need, followed by a Wellness Center on Rapa Nui — a home offering hope to the elderly, the handicapped, the bedridden, and other vulnerable people, cared for within their own community. This white paper outlines the opportunity, the evidence, and a clear structure for partnership.

1964

YEAR THE SOURCE SOIL WAS
COLLECTED ON RAPA NUI

~10,000

RAPA NUI RESIDENTS

2

PHASES: EQUIPMENT NOW,
WELLNESS CENTER NEXT

02 The Origin Story

In November 1964, roughly forty doctors and scientists set sail from Halifax, Nova Scotia, aboard a Royal Canadian Navy vessel bound for Rapa Nui. The mission — the Medical Expedition to Easter Island (METEI), backed by the World Health Organization — aimed to study the island's people and environment before a newly built airstrip would connect this remarkably isolated community to the wider world.

Among the team was University of Montreal microbiologist Georges N6gr6dy, who gathered more than two hundred soil samples across the island. Carried back to Canada and shared among colleagues, one sample reached the Ayerst pharmaceutical laboratories in Montreal. There, biochemist Surendra "Suren" Sehgal and bacteriologist Claude V6zina isolated a bacterium — *Streptomyces hygroscopicus* — that produced a powerful new antifungal molecule. They named it **rapamycin**, after Rapa Nui.

The compound nearly disappeared. When Ayerst closed its Montreal facility, the program was slated for cancellation and the samples for destruction. Convinced of its value, Sehgal preserved a sample at home until research could resume — an act of persistence that ultimately brought rapamycin to market in the late 1990s. From the soil of one of Earth's most remote islands, a global medicine was born.

03 Scientific Importance

Rapamycin's first major role was as an immunosuppressant: approved in the late 1990s as sirolimus (Rapamune), it became essential in preventing organ-transplant rejection and in drug-eluting coronary stents. Today rapamycin and its analogs are approved for transplant medicine and for treating seizures associated with tuberous sclerosis complex.

Its deeper significance lies in *how* it works. Rapamycin inhibits a master regulatory pathway named after the drug itself — **mTOR** (the mechanistic target of rapamycin) — which governs cell growth, metabolism, and survival. Because mTOR sits at the heart of so many biological processes, rapamycin has become one of the most studied molecules in biology and a central tool in the science of aging.¹

An honest view of the longevity evidence

In animal studies, reducing mTOR activity has extended lifespan, and an overactive mTOR pathway is linked to many age-related conditions. These findings have made rapamycin a leading candidate in longevity research. In the interest of credibility with scientific partners, we state the evidence plainly: as of 2025, the dramatic lifespan results seen in animals have **not yet been demonstrated in healthy humans**. Early clinical trials suggest low-dose rapamycin can be reasonably well tolerated and may produce modest changes in markers of biological aging, but long-term human benefits remain unproven, and larger trials are needed.²

WHY THIS MATTERS TO PARTNERS

This initiative does not depend on rapamycin's longevity promise being proven. It rests on the molecule's established scientific stature and its undisputed origin in Rapa Nui. Honesty about the science strengthens — rather than weakens — a partner's reputational position.

04 The Ethical Gap

A molecule drawn from Rapa Nui's soil launched a major pharmaceutical industry and an entire field of research. It carries the island's name into laboratories and hospitals on every continent. Yet the people of Rapa Nui shared in none of its proceeds, and many islanders today lack access to basic assistive devices and medical equipment.

This is not a grievance the Foundation invented; it is a question now being raised within the scientific community itself — namely, what researchers and companies owe the Indigenous communities and lands from which discoveries are drawn. Recent scholarship, including medical historian Jacalyn Duffin's account of the METEI expedition, has reopened this conversation among scientists who built careers on rapamycin.³

We frame this not as a debt to be demanded, but as a **leadership opportunity**: a chance for a forward-looking partner to be the organization that closes the loop — connecting scientific heritage to tangible benefit for the originating community.

05 Why Now

Three forces converge to make this a uniquely timely opportunity for pharmaceutical and longevity-sector leadership:

- **Heightened ESG and impact expectations.** Investors, regulators, and the public increasingly expect demonstrable, authentic social commitment — not symbolic gestures. A direct line from a company's scientific heritage to community benefit is exactly the kind of story that withstands scrutiny.
- **A renewed scientific spotlight on rapamycin.** The molecule is at the center of one of the most active areas in aging and longevity research, keeping its name — and its origin — in public and scientific view.
- **A documented, unresolved ethical question.** The conversation about benefit-sharing with Indigenous communities is live in the scientific literature. The first major partner to act will define what responsible leadership looks like here.

06 The Solution: A Two-Phase Initiative

PHASE 1 · IMMEDIATE

Assistive Equipment Deployment

A Foundation community survey identified roughly 100 residents lacking essential assistive devices. Phase 1 delivers approximately 300 devices — including 50 manual and 20 power wheelchairs, 40 prosthetics, 40 hearing aids, 20 clinical beds, plus canes, braces, orthopedic boots, and consumables.

Est. cost: ~US\$550,000 all-in via ocean freight (recommended) or ~US\$607,000 expedited by air, sourced in the US and shipped door-to-door via Miami–Santiago–Rapa Nui. Preliminary; device pricing being confirmed with suppliers.

PHASE 2 · LONG-TERM

Wellness Center: *Kimi Ora Mo Kua Koro*

Today, Rapa Nui has no home for those who need care; the elderly, the handicapped, and the bedridden are sent 3,700 km to mainland Chile, separating families and interrupting culture. The Center answers with what the community calls *Kimi Ora Mo Kua Koro* — “Hope for Survival”: a true home for the island’s most vulnerable, where they are cared for among family and culture. A home, not a hospital.

Scope: 35 care homes, 15 accessible residences, a holistic health center, cultural and ceremonial spaces, and 45+ local jobs. **Est. cost:** ~US\$8–8.25M over a multi-year build. Conceptual; subject to detailed design.

"The molecule carries the name of Rapa Nui worldwide. This initiative ensures its legacy returns through measurable impact."

Strategic value for partners

- **Authentic ESG leadership** anchored to a verifiable scientific narrative, not a generic cause.
- **Global visibility** through association with the rapamycin legacy and the iconic identity of Rapa Nui.
- **Goodwill with the Indigenous community** and a defensible position on benefit-sharing.

● **Potential research and engagement pathways** connected to the longevity and health-equity conversation. 4

07 Phase 1 Budget Detail

The figures below itemize Phase 1 against a community survey of need on Rapa Nui (population ~10,000). Device prices reflect US-market planning averages; logistics reflect actual freight quotes. Final supplier pricing is being confirmed.

ASSISTIVE DEVICE CATEGORY	QTY	UNIT (US\$)	SUBTOTAL (US\$)
Prosthetics (lower-limb)	40	\$8,000	\$320,000
Power / electric wheelchairs	20	\$3,500	\$70,000
Hearing aids	40	\$1,350	\$54,000
Clinical / hospital beds	20	\$2,000	\$40,000
Manual wheelchairs	50	\$500	\$25,000
Diapers (bedridden, annual supply)	—	—	\$8,000
Orthopedic boots	30	\$100	\$3,000
Canes	80	\$30	\$2,400
Orthotic braces	20	\$100	\$2,000
Device Subtotal			\$524,400

Logistics: two delivery scenarios

All devices are sourced in the United States, consolidated in Miami, and shipped to Santiago, then onward to Rapa Nui — the island leg being the principal cost and time constraint.

SCENARIO	FREIGHT (ALL-IN)	BASIS	PHASE 1 TOTAL	LEAD TIME
Ocean (recommended)	Door-to-door ~\$25,400	5-segment, US → island	~\$549,800	~2–3 months
Air (expedited)	Door-to-door ~\$82,400	~3× ocean freight	~\$606,800	~days

The Foundation defaults to ocean freight for cost efficiency, reserving air delivery for time-sensitive cases. Device pricing reflects US-market planning averages and is being confirmed with suppliers; prosthetics, which require individual fitting, may be coordinated as a specialized clinical sub-program.

08 Partnership & Investment Structure

Partnerships are anchored to the Wellness Center build, so every commitment maps to something tangible the partner makes possible. Amounts are indicative; specific deliverables and recognition are confirmed in a written partnership agreement.

PARTNERSHIP TIER	COMMITMENT	WHAT IT BUILDS
Founding Partner	\$8M+	Underwrites and names the entire Wellness Center — the legacy gift that brings care home to the island.
Flagship Partner	\$1M–\$3M	Funds and names a cluster of care homes or the holistic health center; premier recognition and leadership role.
Strategic Partner	\$250K–\$1M	Builds one or more care homes or accessible residences, each named in the partner’s honor.
Supporting Partner	\$50K–\$250K	Endows cultural and ceremonial spaces, or fully funds Phase 1 device categories such as all prosthetics.

Tiers and benefits are indicative and confirmed in a written partnership agreement. Naming and recognition opportunities are offered at the Foundation’s discretion. Phase 1 (assistive devices, ~\$550K) can also be underwritten in full or by category within these tiers.

09 Governance & Accountability

The Mana Rapa Nui Foundation is a registered 501(c)(3) nonprofit organization based in Durham, North Carolina, with deep, direct ties to the Rapa Nui community. We are committed to transparent fund management and measurable, reported outcomes.

- **Legal status:** 501(c)(3) nonprofit · EIN | 33-4549354
- **Leadership:** | Erity Teave Hey, President
- **Reporting:** Partners receive defined impact reporting on funds deployed and outcomes achieved.
- **Community connection:** Direct relationships on Rapa Nui ensure delivery reaches intended recipients.

Join Ra’au Henua

We welcome the opportunity to discuss how your organization can lead in returning rapamycin’s legacy to its origin. Request the full prospectus, or schedule a conversation with our leadership team.

Mana Rapa Nui Foundation | Durham, North Carolina, USA

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