2026

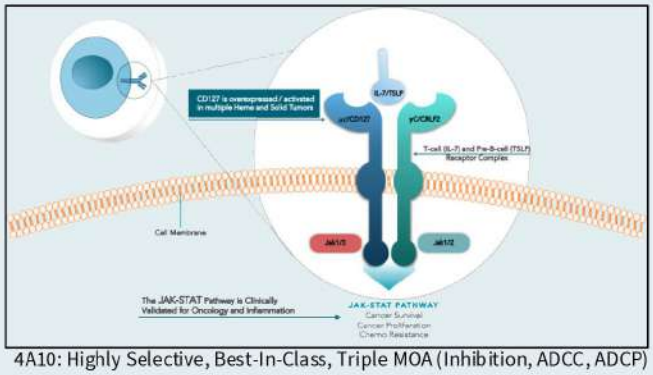
Advancing the Next Generation of Best-In-Class Precision Oncology and Inflammation Therapeutics

ALLTERUM

THE ALLTERUM STORY

Allterum Therapeutics, Inc. is advancing 4A10, a first-in-class monoclonal antibody targeting CD127 (IL-7Rα) for the treatment of CD127-positive cancers.

- 4A10 was discovered by Dr. Scott Durum at the NCI
- Preclinical data suggests robust preclinical efficacy, favorable safety profile
- CD127 has limited expression in normal tissues – hence, attractive as a therapeutic target
- The phase 1, First-In-Human, clinical trial – scheduled to begin in 1H2026
- Initial clinical focus is on patients with relapsed or refractory (R/R) acute lymphoblastic leukemia (ALL) and lymphoblastic lymphoma (LL)
- Broader expansion is planned into additional CD127-positive hematologic malignancies, including other lymphomas, acute myeloid leukemia (AML), and chronic myeloid leukemia (CML)
- Allterum is supported by grant funding from the Cancer Prevention and Research Institute of Texas (CPRIT) and the NCI
- Allterum received FDA Orphan Drug and Fast Track designations, eligible for the recently renewed Pediatric Priority Review Voucher.
- Led by Dr. Yan Moore, an industry-recognized drug development expert, supported by an experienced team with a proven track record of success.



4A10: Highly Selective, Best-In-Class, Triple MOA (Inhibition, ADCC, ADCP)

MARKET AND UNMET NEED

ALL remains a high-unmet-need indication, with most patients showing high CD127 expression and therefore potential to benefit from 4A10.

The initial commercial focus is the R/R ALL setting, representing ~700 patients annually in the United States (~1,400 globally) who have exhausted available treatment options.

Front-line expansion in combination with standard chemotherapy could add ~6,500 US patients per year, supporting peak annual sales potential of $300–500M in the United States and $800M–1B globally.

The program may also qualify for the recently renewed Pediatric Rare Disease Priority Review Voucher program, historically valued at approximately $200M.

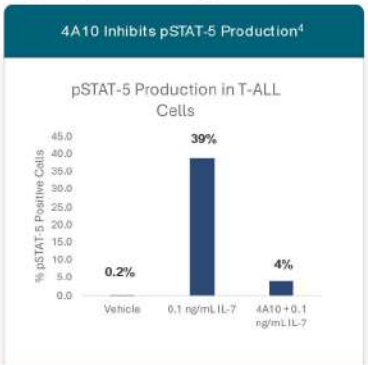
Beyond ALL, 4A10 has shown strong preclinical activity in lymphomas, AML, and CML – all expressing CD127. This represents ~30,000 new US cases annually and more than additional $1B in incremental peak sales potential.

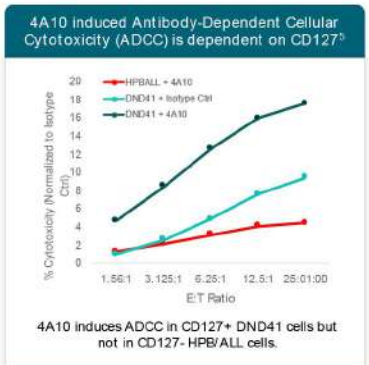
CD127-positive major solid tumors, represent additional untapped commercial opportunity that accounts for more than 50,000 new diagnoses annually and represent a multi-billion-dollar market opportunity.

CD127 inhibition has also been clinically validated in several major autoimmune diseases, including ulcerative colitis, representing another multi-billion-dollar market opportunity.

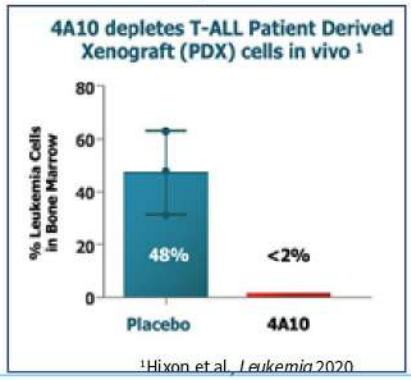
THE SCIENCE

- CD127 is a shared component of the IL-7 and TSLP receptors, expressed across multiple cancers, and has limited expression in normal tissues.
- The IL-7/TSLP axis is a well-validated pathway in cancer and inflammation biology, with more than 20 approved anticancer drugs targeting downstream effectors such as JAK, RAS, RAF, MEK, ERK, PI3K, mTOR, and BCL-2.
- 4A10 binds CD127 with high affinity and drives antitumor activity through: IL-7 pathway inhibition, ADCC, and ADCP. It has shown potent single-agent activity across chemo-naïve, chemo-resistant, and steroid-resistant cancers, as well as additive activity with chemotherapy.





4A10 induces ADCC in CD127+ DND41 cells but not in CD127- HPB/ALL cells.



[1]Hixon et al., *Leukemia* 2020

ALLTERUM

ALLTERUM THERAPEUTICS:

A Clinical Staged Biotech Developing Treatments for CD127+ (IL-7Rα) Expressing Cancers

EXTERNAL VALIDATION

4A10's preclinical efficacy has been demonstrated by leading collaborators, including the NCI, Boldrini Research Center, and CHOP.

The program has also been validated through peer-reviewed funding, including major grants from the NCI and CPRIT, as well as selection into the NCI PIVOT and NExT programs.

Allterum has received FDA Orphan Drug and Fast Track designations.

DEVELOPMENT PROGRAM (USE OF PROCEEDS)

Funding and Advancement
Supported by competitive grants and matching equity, Allterum's ALL program is funded through completion of the planned Phase 2a trial.

Clinical Development Path
The Phase 1/2a trial was designed with leading experts based on pre-IND FDA guidance and is being conducted at top pediatric and adult oncology centers, including MD Anderson Cancer Center and the NCI. Subject to clinical data, a single-arm pivotal Phase 2 study could support accelerated approval in ALL and eligibility for a Pediatric Rare Disease Priority Review Voucher.

Hematologic Expansion
Beyond ALL, 4A10 has shown promising preclinical activity in lymphoma, AML, and CLL. Successful completion of the Phase 1 trial could enable rapid Phase 2 expansion into these indications, representing more than $1B in potential peak annual sales.

Solid Tumor Pipeline
CD127 is also expressed in subsets of major solid tumors, including lung, breast, colorectal, esophageal, and head and neck cancers. 4A10 has demonstrated target-specific preclinical activity and is planned to enter a Phase 1 basket trial in 1H 2027.

COMPETITIVE LANDSCAPE

The ALL competitive landscape remains relatively open. There are no approved second-line targeted therapies for T-ALL and only a limited development pipeline. In B-ALL, approved targeted agents and CAR-T therapies are available, but about one-third of these patients may still relapse and have poor outcomes.

4A10 Differentiation
4A10 has a differentiated triple mechanism of action, combining IL-7 signaling inhibition, ADCC, and ADCP, and is currently the only CD127-targeted therapy in development that integrates all three mechanisms, supporting its potential as a best-in-class anti-CD127 therapy. Combined with a favorable safety profile, it is well positioned for heavily pretreated patients and for combination use with existing therapies without substantial added toxicity.

IP and Market Access
4A10 is protected by broad issued and pending patents exclusively licensed to Allterum, covering composition of matter and method of use. FTO analyses indicate no blocking IP, and the program is expected to benefit from biologics and Orphan Drug exclusivity. Based on comparable oncology biologics, Allterum expects pricing of approximately $10,000 per weekly dose, or $80,000–160,000 per patient, with no anticipated reimbursement barriers from CMS or private insurers.

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NEXT STEPS

Clinical and Regulatory Path Forward: Should the Phase 1/2a trial prove successful, Allterum plans to advance directly into a single pivotal Phase 2 trial that could serve as the basis for accelerated or full FDA marketing approval. There is strong regulatory precedent and established FDA guidance supporting single-arm studies and defined clinical endpoints in acute leukemia. Given that ALL qualifies as an ultra-orphan indication, the program benefits from a clear and streamlined development pathway. The company will also evaluate strategic partnership opportunities following completion of Phase 2a, particularly if such collaborations could accelerate commercialization and expand patient access.

Future Development Plans: Following the completion of a Series A financing, Allterum intends to initiate additional clinical trials in lymphoma and potentially acute myeloid leukemia (AML) and chronic myeloid leukemia (CML). In parallel, the company plans to advance its CD127-drug conjugate (CD127-DC) program through preclinical and IND-enabling studies, with the goal of entering the clinic for CD127-positive solid tumors and potentially autoimmune disorders.