

ASX Release

6 October 2026

AROVELLA PRESENTS AT THE CELL AND GENE MEETING IN PHOENIX, ARIZONA

Highlights:

- **Arovella is delivering an “Innovation Spotlight” presentation tomorrow at the Cell and Gene Meeting on the Mesa**

Arovella Therapeutics Ltd (ASX: ALA), advises that tomorrow it will be presenting at the Cell and Gene Meeting on the Mesa in Phoenix, Arizona.

The Cell and Gene Meeting is organised by the Alliance for Regenerative Medicine. It is the leading annual conference for the cell and gene therapy sector, bringing together senior executives and industry leaders to advance the development of innovative therapies. It is a chance for Arovella to present to an estimated 1500 attendees from regulators, investors and like-minded researchers and companies.

Arovella's presentation will be delivered as part of the Innovation Spotlight program, which highlights the latest scientific, clinical, manufacturing, regulatory and commercial advancements from organisations across the advanced therapies ecosystem.

The presentation will be delivered by Arovella's Acting Chief Executive Officer, Dr Nicole van der Weerden. A copy of the presentation is attached to this announcement and is also available on the Company's website at www.arovella.com.au.

Chairman David Williams said, “Nicole and Arovella are on the world stage with the ability to put us on the map. More importantly, she will have one-on-one face-to-face meetings to sell our technology and approach.”

Release authorised by the Board of Directors of Arovella Therapeutics.

FURTHER INFORMATION

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**NOTES TO EDITORS:****About Arovella Therapeutics Ltd**

Arovella Therapeutics Ltd (ASX: ALA) is focused on developing its invariant natural killer T (iNKT) cell therapy platform licensed from Imperial College London to treat blood cancers, solid tumours, and autoimmune disease. Arovella's lead product is ALA-101. ALA-101 consists of CAR19-iNKT cells that have been modified to produce a Chimeric Antigen Receptor (CAR) that targets CD19. CD19 is an antigen found on the surface of numerous cancer types. iNKT cells also contain an invariant T cell receptor (iTCR) that targets glycolipid bound CD1d, another antigen found on the surface of several cancer types. ALA-101 has had its Investigational New Drug application (IND) accepted by the US FDA and is being developed as an allogeneic cell therapy, which means it can be given from a healthy donor to a patient. Arovella is also expanding into solid tumour treatment through its CLDN18.2-targeting technology licensed from Sparx Group. Arovella will also incorporate its IL-12-TM technology into its solid tumour programs.

Glossary: **iNKT cell** – invariant Natural Killer T cells; **CAR** – Chimeric Antigen Receptor that can be introduced into immune cells to target cancer cells; **TCR** – T cell receptors are a group of proteins found on immune cells that recognise fragments of antigens as peptides bound to MHC complexes; **B-cell lymphoma** – A type of cancer that forms in B cells (a type of immune system cell); **CD1d** – Cluster of differentiation 1, which is expressed on some immune cells and cancer cells; **aGalCer** – alpha-galactosylceramide is a specific ligand for human and mouse natural killer T cells. It is a synthetic glycolipid.

For more information, visit www.arovella.com

ASX:ALA



Innovation Spotlight

October 2026

CELL  GENE
MEETING ON THE MESA

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Investment highlights

CAR-iNKT platform designed to support multiple future therapies

Structurally differentiated next-generation cell therapy



Near-term clinical validation

- FDA IND accepted
- Phase 1 expected to start Oct 2026
- Preliminary data expected early CY27



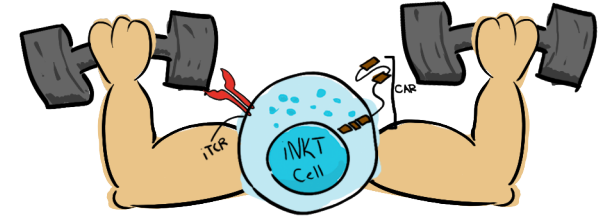
Platform scalability

- Off-the-shelf manufacturing
- Healthy donor starting material
- Multiple doses per batch reduces cost



Pipeline expansion

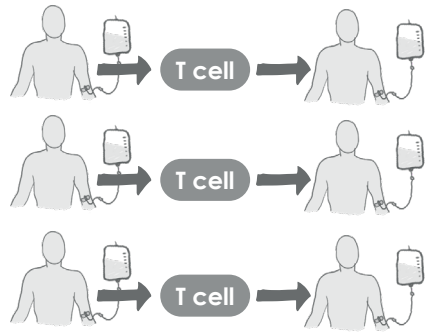
- Blood cancers
- Solid tumours
- Autoimmune disease



Arovella is not one product — building a platform that could support multiple future therapies.

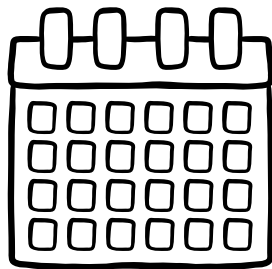
CAR-T technology challenges

Only treats the patient who supplied the T cells



Each manufacturing batch is **patient-specific**

Patient must wait **3-4 weeks** for therapy



Manufacturing & supply chain costs high, failures can occur



T cells can be compromised by disease

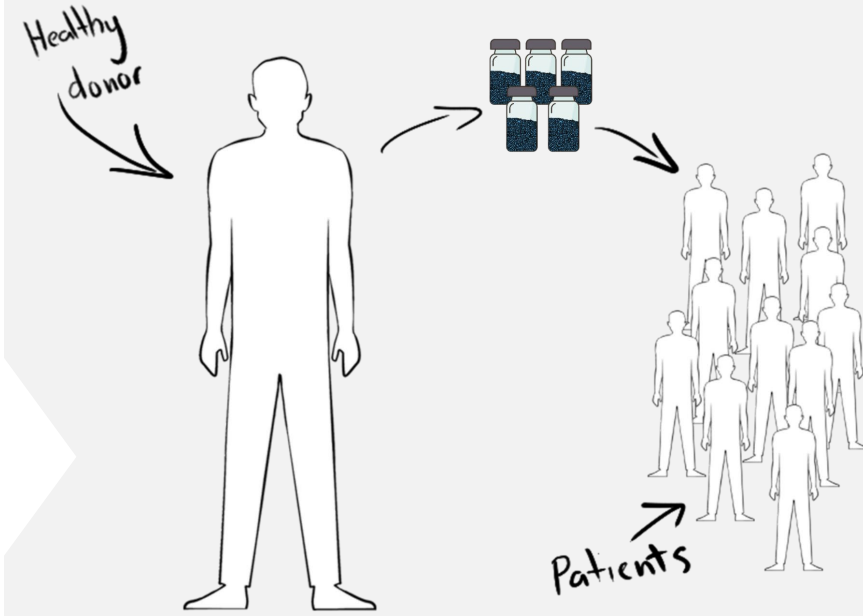


Limited centres can collect and manufacture



Time is an issue for patients with aggressive disease

ALA's off-the-shelf solution:



One CAR-iNKT batch **treats multiple patients**



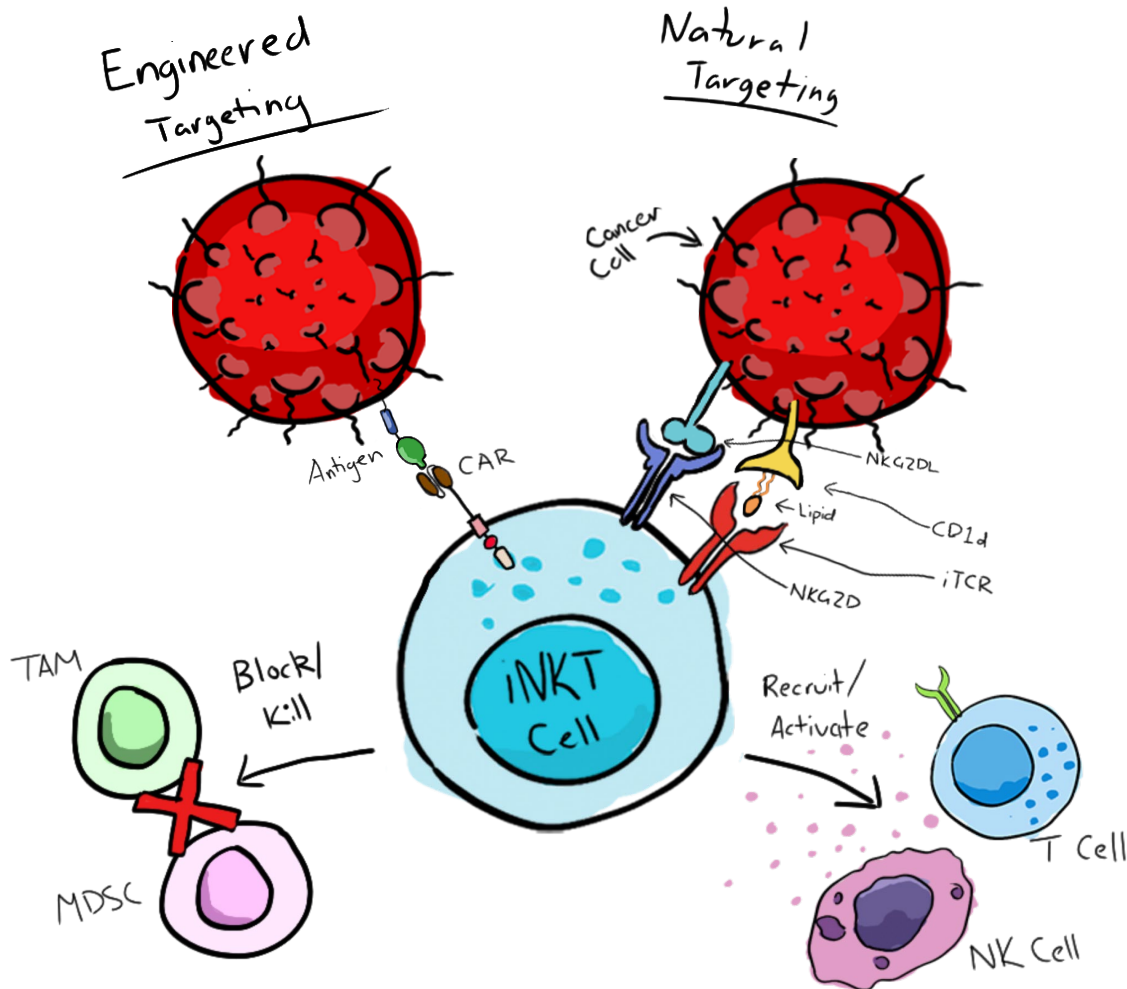
1 week

Patients ready to dose within 1 week



CAR-iNKT cells – a differentiated immune cell

Unique biology with potential to overcome core limitations of CAR-T



Multiple ways to attack tumours

1

ALLOGENEIC WITHOUT GENE EDITING

Off-the-shelf solution; no gene editing required (preserves cell fitness)

2

MULTIPLE WAYS TO KILL CANCER CELLS

Reduces the likelihood of antigen escape; potential for better efficacy

3

INFILTRATE TUMOURS

Potential for better efficacy than CAR-T for solid tumours

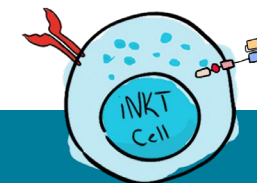
4

MODULATE THE TME AND IMMUNE SYSTEM

Shape the tumour microenvironment to block and kill pro tumour cells; secrete signalling molecules to activate other immune cells

Overcoming limitations of existing cell therapies

CAR-iNKT cells are uniquely positioned for cell therapy applications

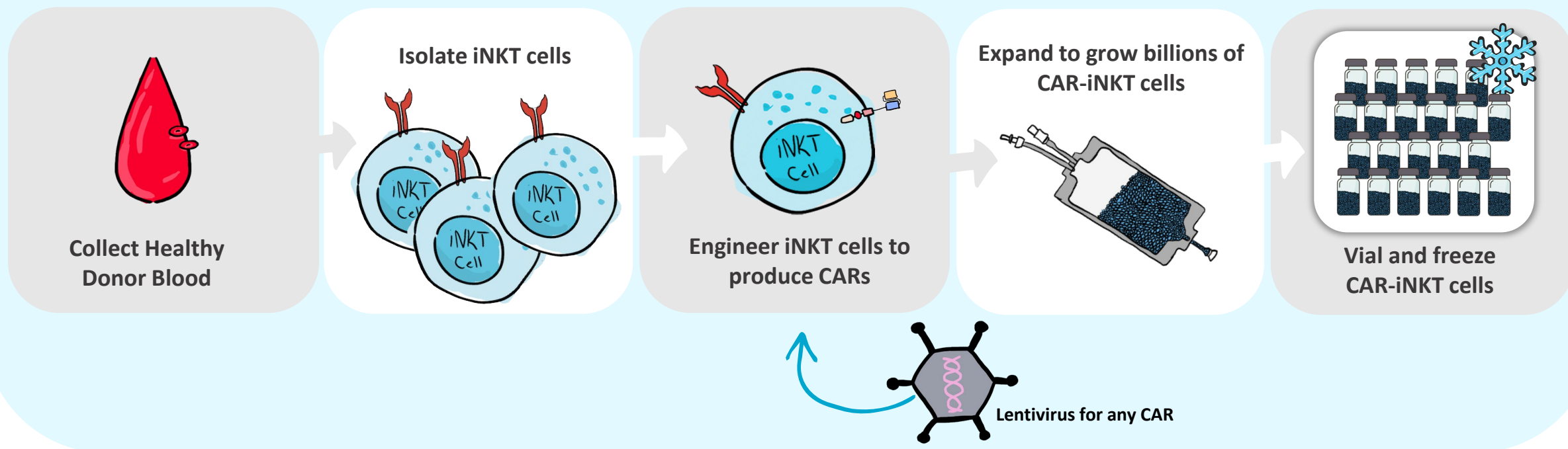


Modality	Key Limitations	Arovella CAR-iNKT Advantage
Autologous CAR-T	- Relies on fitness of patient's own T cells - Complex, costly manufacturing - Limited efficacy in solid tumours	- Healthy donor cells with better fitness - Off-the-shelf supply with lower cost of goods - iNKT cells penetrate tumours and modify the tumour microenvironment
Allogeneic CAR-T (T cells)	- GvHD risk requires complex genome editing - Single targeting mechanism - Demonstrated limited efficacy in solid tumours	Allogeneic without the need for genome editing Multiple targeting mechanisms Better infiltration into solid tumours
CAR-NK	- Limited persistence and expansion - Limited efficacy in clinical trials	- Combines NK + T cell features - Combines innate speed with adaptive durability
In vivo CAR-T	- Early-stage; safety profile not yet clear - Relies on fitness of patient's own T cells - Limited ability for genome editing to improve efficacy	- Does not rely on fitness of patient's own T cells - Leverages the unique biology of iNKT cells Controlled product with defined release criteria
iPSC-derived	- Manufacturing complexity and inconsistency - Reduced functional diversity	Natural immune development and cell function

World-class CAR-iNKT manufacturing platform

Semi-automated process suitable for large-scale and late-phase clinical development

Arovella Manufacturing Platform



Arovella believes it has one of the most advanced donor-derived CAR-iNKT development programs*, with an FDA-accepted IND



One platform: three value-creation pathways

Value creation via three workstreams



Core platform: healthy-donor iNKT cells + modular CAR backbone + scalable manufacturing



Blood cancer validation -> solid-tumour expansion -> autoimmunity expansion

1

CD19+ blood cancers (ALA-101)

- CD19 is a validated target for blood cancers
- Proves safety, dosing & persistence of CAR-iNKT cells
- Creates regulatory & CMC precedent
- Generates B cell depletion data

2

CLDN18.2+ solid tumours (ALA-105)

- Gastric first; pancreatic later
- Tests iNKT solid-tumour biology
- Leverages armouring technology
- Supports expansion to future solid tumour CAR targets

3

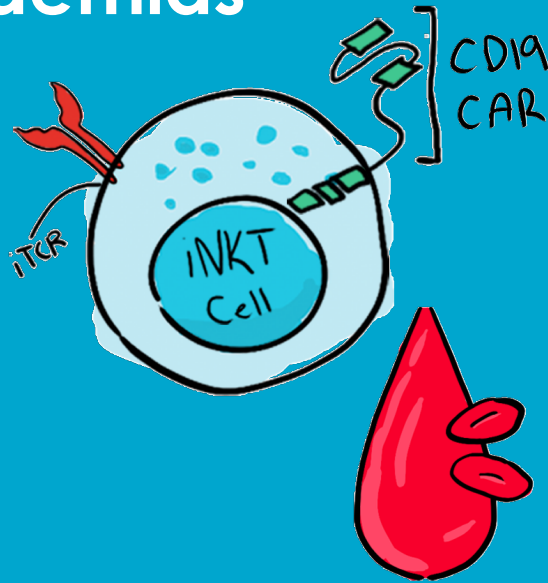
CD19+ autoimmune disease (ALA-101)

- Leverages B cell depletion data from ALA-101 phase 1 trial
- Indications prioritized based on emerging CAR-T clinical data

ALA-101: an off-the-shelf solution for CD19+ blood cancers

Phase 1 first-in-human study expected to commence next month

FDA IND accepted for CD19+ lymphomas and leukaemias



Validated target with potential for indication expansion

Possibility to expand into autoimmunity if phase 1 trial supports B cell depletion



Addresses key CAR-T challenges

- **Safety** - Low risk of GvHD; properties of iNKT cells may decrease toxicity
- **Scalability and cost** - Allogeneic, off-the-shelf manufacturing produces multiple doses/batch
- **Patient access** – Potential for improved safety may allow for outpatient administration
- **Healthier starting material** – Avoids T cell dysfunction and exhaustion seen in heavily pre-treated patients

ALA-101-001 Phase 1 study; Blood Cancer

Study population ▶ Adults with relapsed/refractory CD19-positive B cell cancers ▶ **NHL (DLBCL • FL • MZL • MCL) Leukaemia (CLL • HCL)**

Patient journey

1. Screening

Confirm eligibility, disease status + baseline samples

2. Lymphodepletion

Conditioning chemotherapy prepares immune space

3. ALA-101 infusion

Single dose of healthy donor CD19 CAR-iNKT cells

4. On-study follow-up

Safety, response + biology through Month 24

5. Long-term follow-up

Continued monitoring after end-of-study visit

Study design: dose escalation with backfill / expansion

Dose escalation

Up to 4 dose levels;
~13–21 participants

Backfill / expansion

Further efficacy + biology
Up to 25 additional participants

≤46 total

Planned participants

DLT review Safety + tolerability

Backfill can occur in multiple dose levels to better assess dose-response

Goal: Identify a recommended Phase 2 dose based on safety, pharmacology, expansion, persistence and preliminary efficacy

Outcome measures

If successful, ALA-101 could demonstrate:

- ✓ CAR-iNKT cells are safe in humans
- ✓ Donor-derived CAR-iNKT cells can expand and persist
- ✓ CD19-expressing blood cancers can be controlled
- ✓ ALA-101 can deplete B cells

Study results inform development of Arovella's future products

CD19 blood cancers

Defines dose, safety profile and first efficacy signals for next-stage of development.

Solid tumours

Informs persistence, trafficking, immune activation and resistance biology for future CAR-iNKT targets.

Autoimmunity

Builds data on B cell depletion, durability and donor compatibility for future autoimmune indications.



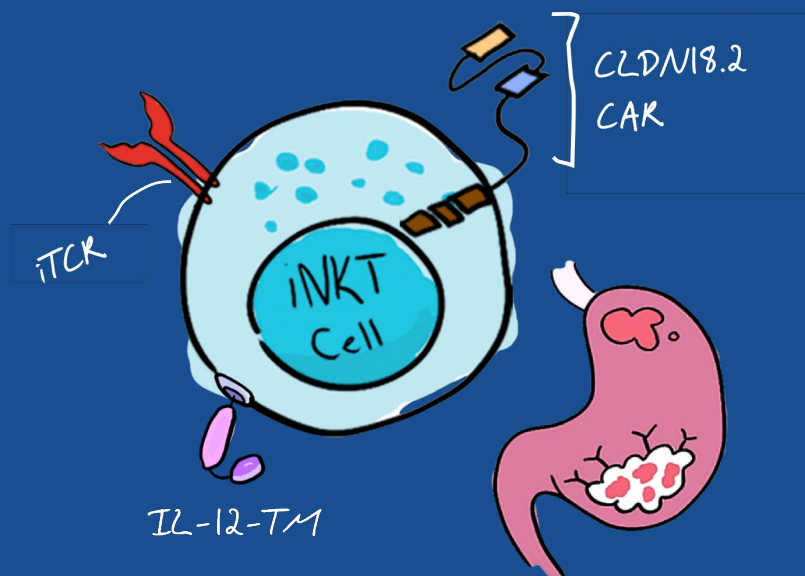
ALA-105 (CLDN18.2 CAR-iNKT)

A clinically validated target
that is expressed in several solid
tumour types

An off-the-shelf solution for solid tumours

With ALA's proprietary cytokine armouring

Novel, proprietary CLDN18.2-targeting CAR



Validated target with high unmet need

Potential to target a broad range of cancers

- gastric, pancreatic, esophageal, GEJC, ovarian



Addresses key CAR-T challenges

- **Efficacy** – iNKT cells:
 - naturally infiltrate tumours better than T cells⁶
 - kill pro-tumour cells and activate helpful immune cells⁷
 - also target NKG2D ligands on tumour cells⁸
- **Safety** – Low risk of GvHD; properties of iNKT cells may decrease toxicity
- **Scalability and cost** - Allogeneic, off-the-shelf manufacturing produces multiple doses/batch



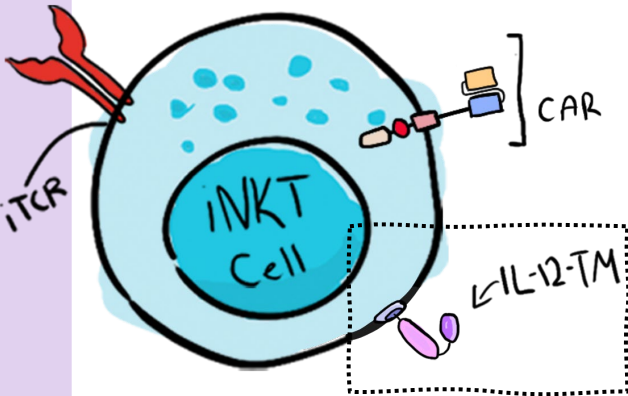
“Armouring” CAR-iNKT cells

IL-12-TM (cytokine technology) enhances CAR-iNKT cell activity in solid tumours

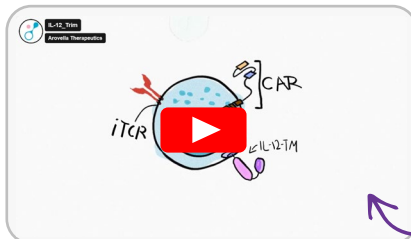
IL-12-TM

IL-12-TM is a modified version of IL-12

with a membrane anchor that links it to the surface of CAR-iNKT cells, preventing release into the blood stream for improved safety.



The IL-12-TM is incorporated into the lentiviral vector and **does not require changes to the manufacturing process**



Discover how our IL-12-TM cytokine technology works in our explainer whiteboard video.

iNKT cells + IL-12-TM

Expand more and survive for longer
than CAR-iNKT cells lacking the cytokine

10x more circulating CAR-iNKT cells
4 weeks after treatment in a mouse model

Superior antitumour activity
compared to CAR-iNKT cells lacking the cytokine

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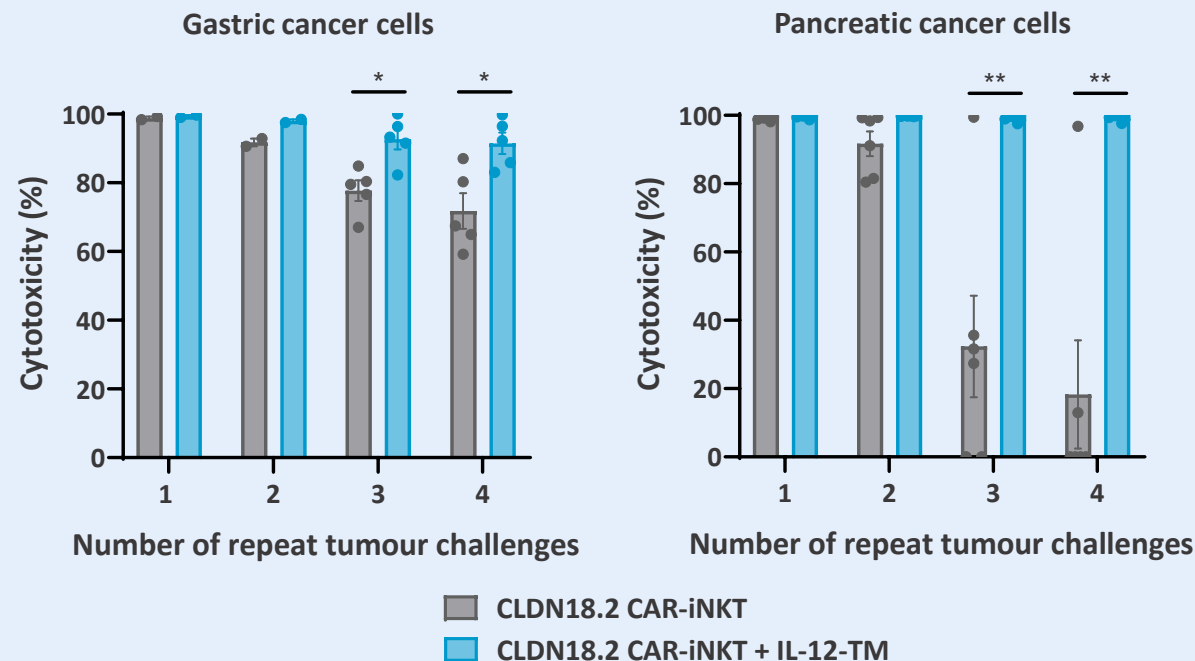
IL-12 reprograms CAR-expressing natural killer T cells to long-lived Th1-polarized cells with potent antitumor activity

Arovella's novel CLDN18.2-targeting CAR is highly active

Potent cytotoxicity in iNKT cells improved by armouring with IL-12-TM

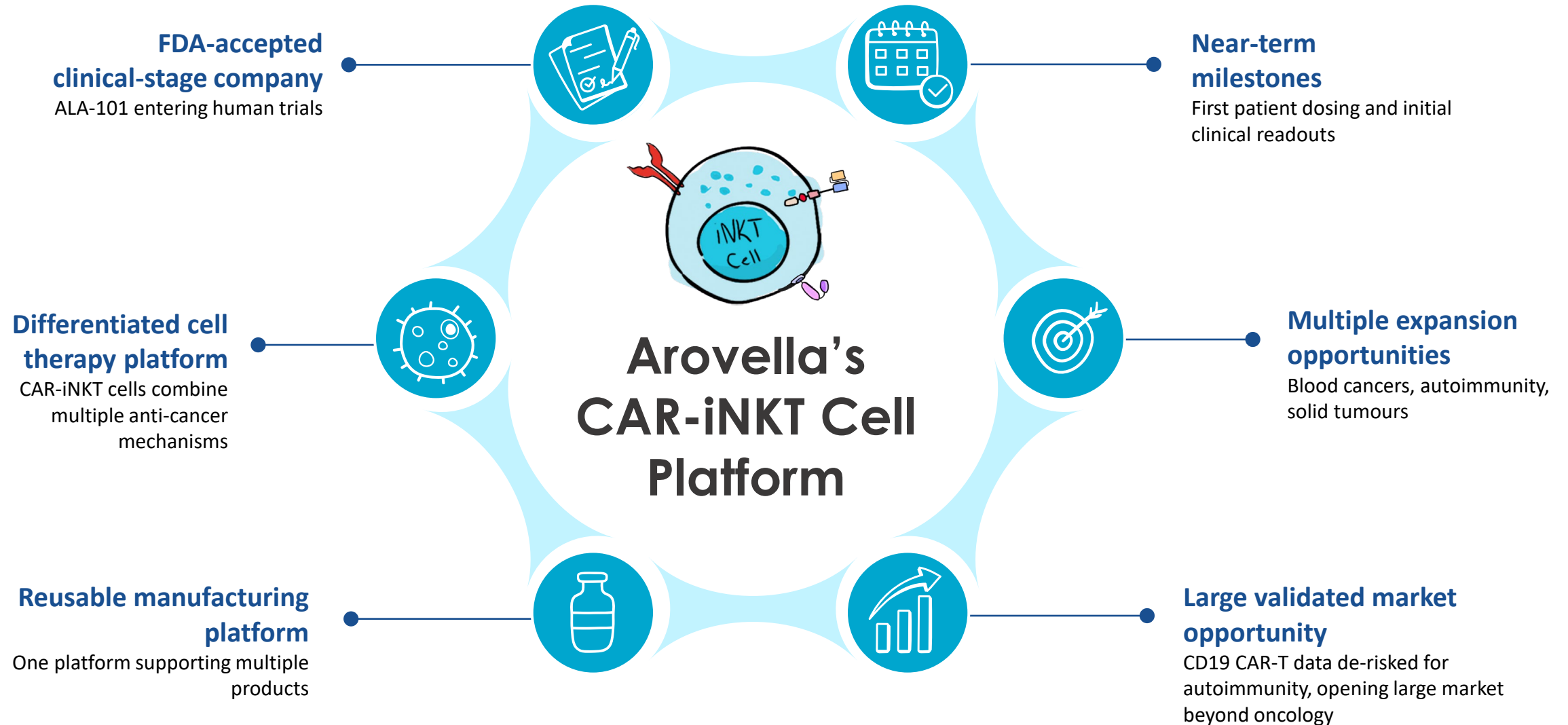
- **CLDN18.2 CAR in iNKT cells**
 - Leads to **strong killing of tumour cells** after multiple rounds of re-challenge
- **IL-12-TM armouring**
 - Enhances killing, with armoured CAR-iNKT cells **eradicating tumour cells** even after four rounds of re-challenge

Killing of Gastric and Pancreatic Cancer



Killing of tumour cells by iNKT cells expressing Arovella's novel CLDN18.2-targeting CAR; with and without IL-12-TM armouring

Summary



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Thank You

Arovella Therapeutics

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