

ASX: ALA

Arovella Therapeutics Limited
ACN 090 987 250



ASX Release

18 November 2025

INVESTOR PRESENTATION

MELBOURNE, AUSTRALIA 18 November 2025: Arovella Therapeutics Ltd (ASX: ALA), a biotechnology company focused on developing its invariant Natural Killer T (iNKT) cell therapy platform, is pleased to provide an update to investors in the form of the attached presentation.

The presentation will be used in Arovella's non-deal investor meetings being conducted this week in Sydney and Melbourne and next week in Hong Kong and Singapore.

The presentation is attached to this announcement and can be viewed on the Company's website www.arovella.com.au.

Release authorised by the Managing Director and Chief Executive Officer of Arovella Therapeutics Limited.

Dr Michael Baker

Chief Executive Officer & Managing Director

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

Arovella Therapeutics Ltd (ASX: ALA) is a biotechnology company focused on developing its invariant natural killer T (iNKT) cell therapy platform from Imperial College London to treat blood cancers and solid tumours. 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 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

This announcement contains certain statements which may constitute forward-looking statements or information ("forward-looking statements"), including statements regarding negotiations with third parties and regulatory approvals. These forward-looking statements are based on certain key expectations and assumptions, including assumptions regarding the actions of third parties and financial terms. These factors and assumptions are based upon currently available information, and the forward-looking statements herein speak only of the date hereof. Although the expectations and assumptions reflected in the forward-looking statements are reasonable in the view of the Company's directors and management, reliance should not be placed on such statements as there is no assurance that they will prove correct. This is because forward-looking statements are subject to known and unknown risks, uncertainties and other factors that could influence actual results or events and cause actual results or events to differ materially from those stated, anticipated or implied in the forward-looking statements. These risks include but are not limited to: uncertainties and other factors that are beyond the control of the Company; global economic conditions; the risk associated with foreign currencies; and risk associated with securities market volatility. The Company assumes no obligation to update any forward-looking statements or to update the reasons why actual results could differ from those reflected in the forward-looking statements, except as required by Australian securities laws and ASX Listing Rules.

ASX:ALA



Investor Presentation

November 2025

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Arovella's Investment Highlights

A high-angle, top-down view of a swimmer in a pool, captured mid-stroke. The swimmer is wearing a black cap and dark swim trunks, with their arms extended forward and legs kicking. The water is a deep blue, and the pool's lane lines are visible. The swimmer is positioned in the lower right quadrant of the frame, moving towards the bottom right corner.

Off-the-Shelf iNKT Cell Platform

Developing off-the-shelf iNKT cell therapies to target blood cancers and solid tumour cancers

Addressing Key Unmet Need

Our iNKT cell platform is well positioned to solve key challenges that hamper the cell therapy sector

Strategic Acquisitions

Focused on acquiring innovative technologies that strengthen its cell therapy platform and align with its focus areas

Strong Leadership Group

Leadership team and Board have proven experience in drug development, particularly cell therapies

Clinic-ready Manufacturing Process

Arovella has successfully developed a proprietary clinic-ready manufacturing process to produce CAR-iNKT cells

Lead Product Advancing to Clinic

ALA-101, potential treatment for CD19-positive blood cancers, progressing to phase 1 clinical trials, expected to commence in early 2026

Strong Leadership Team

SENIOR MANAGEMENT TEAM



Dr Michael Baker
CEO & MANAGING DIRECTOR



Dr Nicole van der Weerden
CHIEF OPERATING OFFICER



Dr Robson Dossa
VP MANUFACTURING & QUALITY



Dr Michelle Ferguson
SENIOR DIRECTOR RESEARCH & DEVELOPMENT



Jacqueline Cumming
SENIOR DIRECTOR CLINICAL DEVELOPMENT

BOARD OF DIRECTORS



Dr Elizabeth Stoner
INTERIM CHAIR



Dr Michael Baker
CEO & MANAGING DIRECTOR



Dr Debora Barton
DIRECTOR



Mr Gary Phillips
DIRECTOR



Dr Andrew Nash
DIRECTOR

Financial overview

Financial Snapshot

ASX CODE	ALA
Market capitalisation ¹	\$107.97 million
Shares on issue	1,199.7 million
52-week low / high	\$0.068 / \$0.210
Cash Balance (30 Sep, 2025)	\$21.9 million

Major Shareholders

Shareholder	Ownership (%) ²
BIOTECH CAPITAL MANAGEMENT ³	68,677,966 (5.78%)
RICHARD JOHN MANN ⁴	68,487,674 (5.76%)
NETWEALTH INVESTMENTS LIMITED WRAP SERVICES A/C	32,788,389 (2.76%)
NETWEALTH INVESTMENTS LIMITED SUPER SERVICES A/C	30,519,572 (2.57%)
UBS NOMINEES PTY LTD	29,070,196 (2.45%)

1. As of 14 November 2025

2. As of 22 August 2025 - Appendix 4E and Annual Report































3. Formerly Merchant Funds Management

4. Holding includes associated entities and parties

ALA Price and Volume - 12 Months¹



Recent cell therapy transactions¹

Date	Type of deal	Acquirer/Licensee	Target/Licensor	Cell Type	Stage	Upfront (US\$M)	Milestones (US\$M)	Total deal value (US\$M)
Oct-25	Acquisition	 Bristol Myers Squibb	 ORBITAL THERAPEUTICS	In vivo CAR	Preclinical	\$1,500	\$0	\$1,500
Aug-25	Acquisition	 Kite <small>A GILEAD Company</small>	 interiūs	In vivo CAR	Phase 1	\$350	\$0	\$350
Jun-25	Acquisition	 abbvie	 capstanTX™	In vivo CAR	Phase 1	\$2,100	\$0	Up to \$2,100
Mar-25	Acquisition	 AstraZeneca	 EsoBiotec	In vivo CAR	Phase 1	\$425	\$575	\$1,000
Nov-24	Acquisition	 Roche	 POSEIDA THERAPEUTICS	Allo T cell	Phase 1	~\$1,038	~\$462	\$1,500
Dec-23	Acquisition	 AstraZeneca	 GRACE CELL	T Cell	Phase 1b	\$1,000	\$200	\$1,200
Aug-23	Licence ³	 IMUGENE <small>Developing Cancer Immunotherapies</small>	 PRECISION BIOSCIENCES	T Cell	Phase 1b	\$21	\$206	\$227
Aug-23	Strategic investment (ROFR) ⁴	 astellas	 POSEIDA THERAPEUTICS	T Cell	Phase 1	\$25	\$0	\$25
May-23	Licence	 janssen	 CBMG <small>Cellular Biomedicine Group</small>	T Cell	Phase 1b	\$245	undisclosed	
Jan-23	Acquisition	 AstraZeneca	 neogene THERAPEUTICS	T Cell	Phase 1	\$200	\$120	\$320
Oct-22	Development collaboration ⁵	 GILEAD	 ARCELLX	T Cell	Phase 2	\$225	undisclosed	
Aug-22	Licence & strategic collaboration	 Roche	 POSEIDA THERAPEUTICS	T Cell	Phase 1	\$110	\$110	\$220
Sep-21	Development collaboration	 Genentech <small>A Member of the Roche Group</small>	 Adaptimmune	T Cell	Preclinical	\$150	\$150	\$300
Aug-21	Research collaboration	 Kite <small>A GILEAD Company</small>	 APPIA BIO	iNKT Cell	Preclinical	undisclosed	undisclosed	\$875
May-21	Acquisition	 Athenex	 kuur THERAPEUTICS	iNKT Cell	Phase 1	\$70	\$115	\$185

1. See the last slide for deal references; 2. Collectis will receive a US\$220m equity investment from Astra Zeneca plus tiered royalties. Milestones are payable for 10 products; 3. Precision is eligible for double digit royalties on net sales and \$145 million in milestone payments and tiered royalties for additional programs; 4. Poseida also received a US\$25m equity investment from Astellas; 5. Arcellx also received a US\$100m equity investment from Gilead

Highlights for CY 2025 to date...



Cash and cash equivalents
at 30 September, 2025 of

**\$21.9
million**



Completed \$15 million placement to fully fund enrolment and report initial safety and efficacy data for the phase 1 trial for ALA-101



Successfully transferred the ALA-101 manufacturing process into cGMP environment in readiness for clinical batches



Held positive Type D meeting with the FDA to discuss analytical testing for a GMP reagent and align on the IND submission pathway



Appointed Dr Andrew Nash, former CSO of CSL, to Arovella's Board of Directors



Generated promising Claudin 18.2-targeting chimeric antigen receptor that effectively eliminates CLDN18.2 positive pancreatic cancer cells



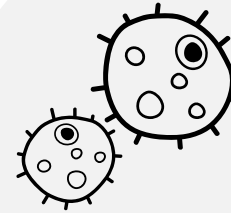
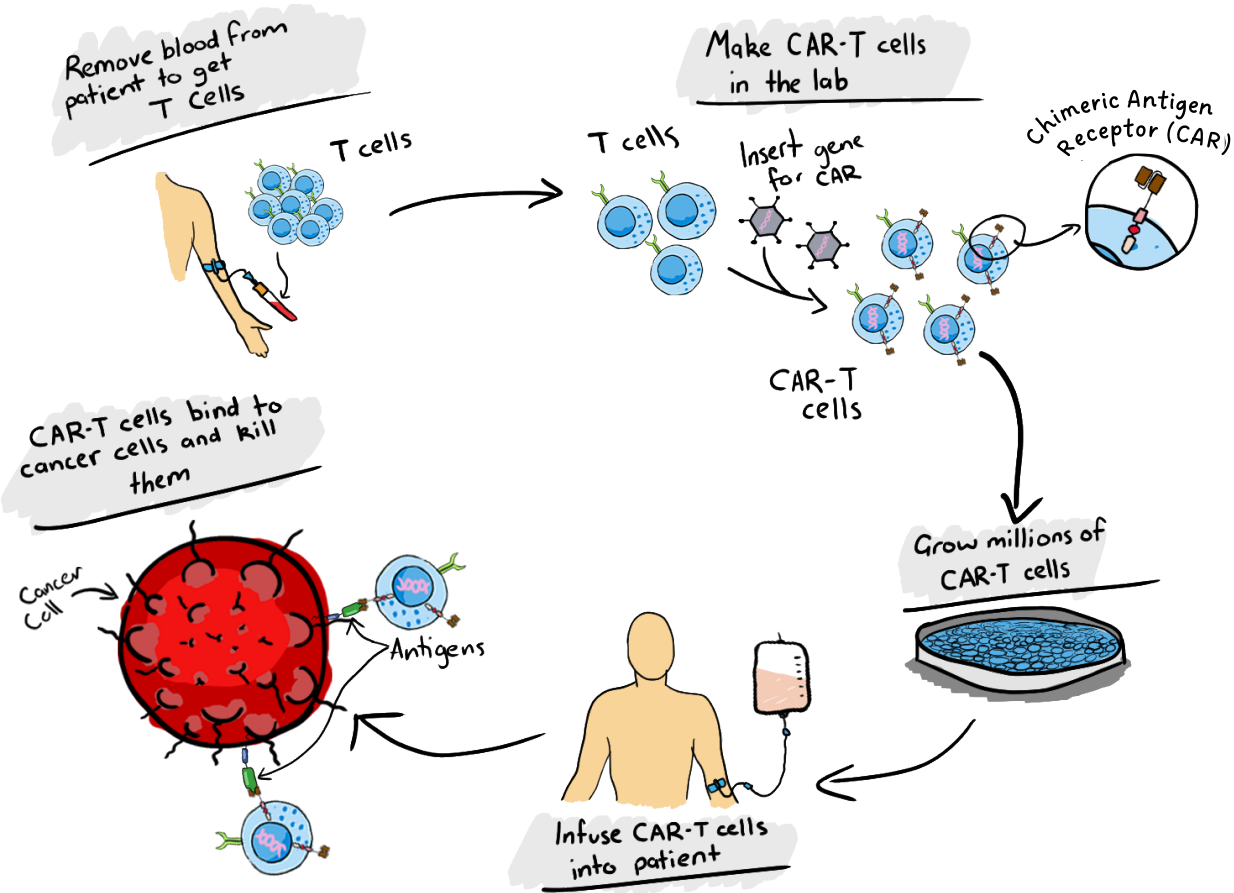
Exercised the exclusive Option for two new CARs targeting neuroblastoma and hepatocellular carcinoma



About CAR-T cells

How original CAR-T cell therapies work

CAR-T cell therapy is personalised medicine



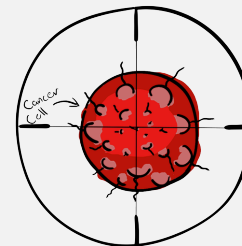
T cells = immune cell

T cells are a common type of immune cell that fight infections and can help fight cancer.



T cells from patient 'reprogrammed'

To generate autologous CAR-T cells, T cells are taken from a patient with blood cancer and 'reprogrammed' to produce a Chimeric Antigen Receptor (CAR). The CAR can recognise cancer cells through a target antigen.

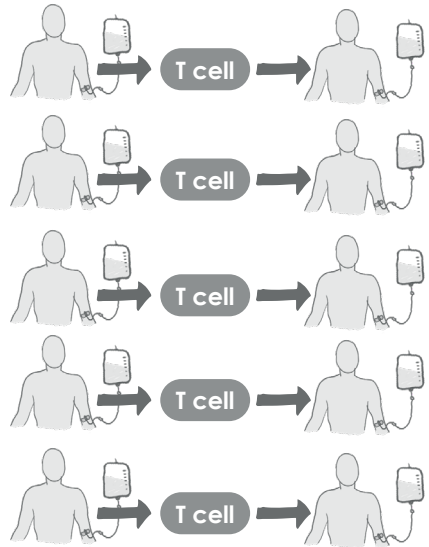


CAR-T cells find & kill tumour cells

CAR-T cells are administered to the patient to find and kill the cancer cells. Once the CAR recognizes and binds to the target antigen on the cancer cell, the CAR-T cell is activated to kill the cancer cell.

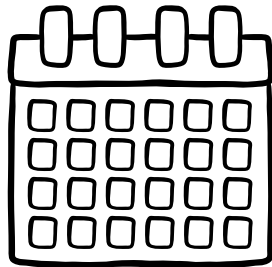
Current CAR-T technology challenges

One CAR-T product **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 are high



T cells can be compromised due to disease



Limited centres can collect and manufacture



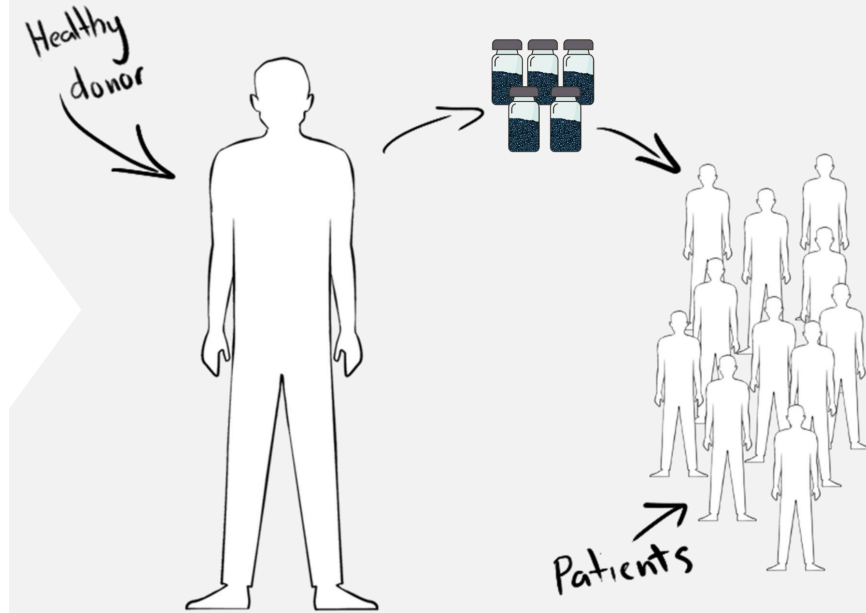
Time is an issue for patients with aggressive disease



Manufacturing run failures can occur

ALA's solution:

One CAR-iNKT batch from **a healthy donor** treats multiple patients



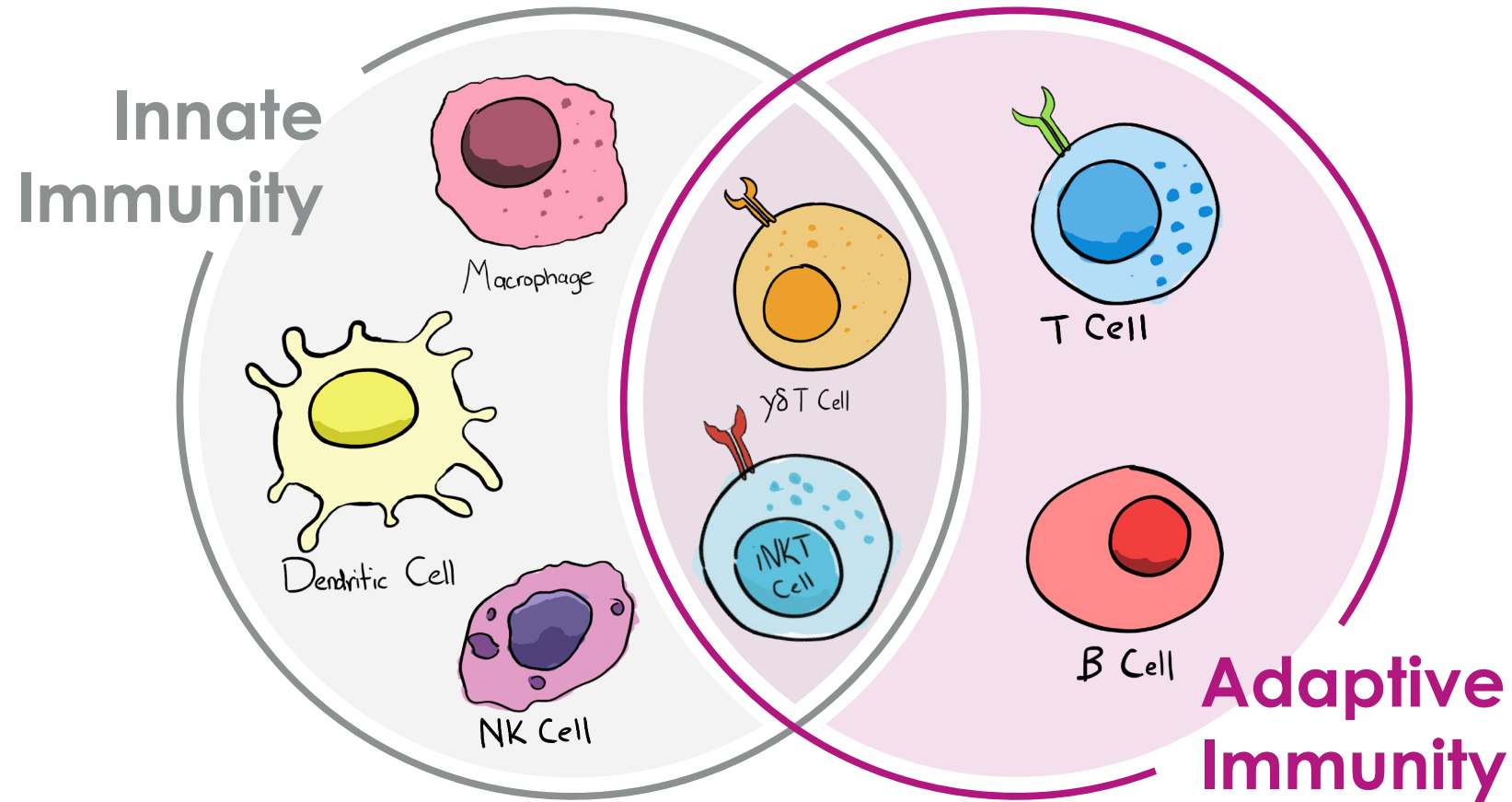
1 week

Patients ready to dose within 1 week



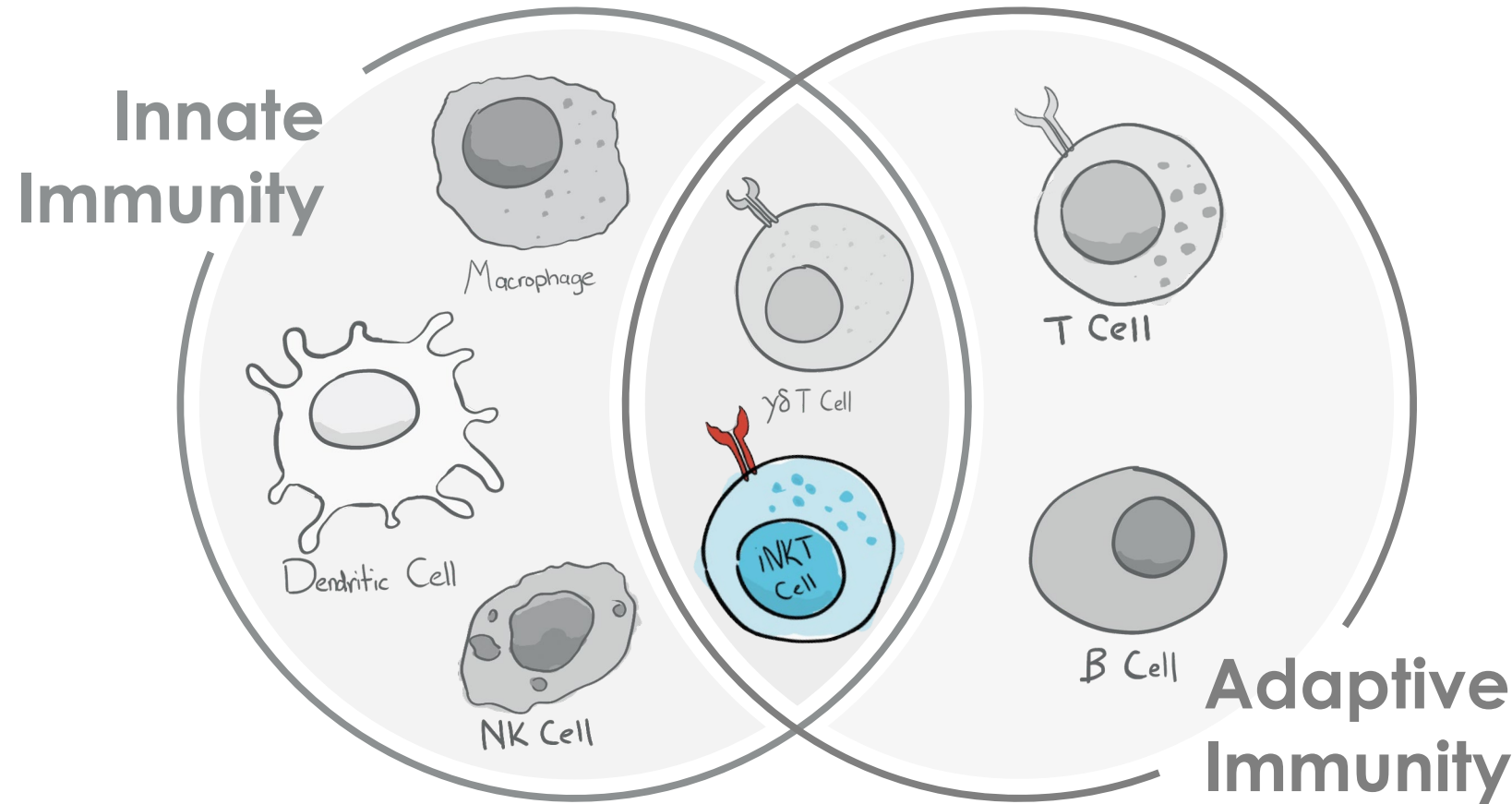
Introducing invariant Natural Killer T (iNKT) cells

Bridging the innate and adaptive immune system



iNKT cells represent a next-generation cell therapy

Properties make them ideal for use in cell therapy



Strong safety profile

- Invariant receptor recognizes the same molecule (CD1d) in all people
- Don't cause graft versus host disease (GvHD)¹

Front line of the human immune system

- Bridge the rapid innate & long lasting adaptive immune responses²
- Contain both T cell & NK cell killing mechanisms³
- Naturally target & kill cancers that express CD1d⁴

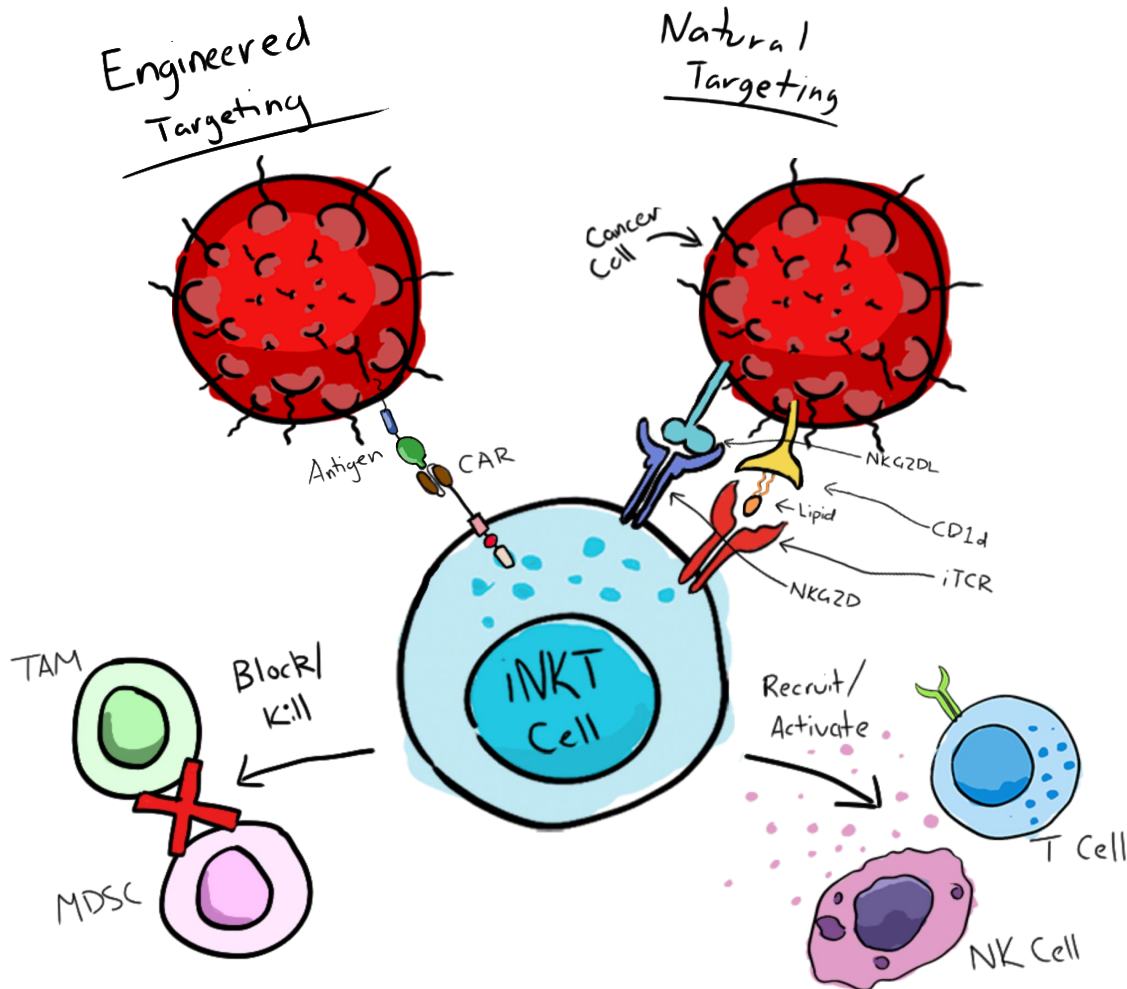
Multiple anti-cancer properties

- Shape the tumour microenvironment by blocking/killing pro tumour cells (TAMs & MDSCs)^{5,6}
- Infiltrate tumours & secrete signaling molecules to activate other immune cells to kill cancer cells^{6,7}
- CAR-iNKT cells outperform conventional CAR-T cells when tested against blood cancers and solid tumours^{8,9}

1. <https://www.frontiersin.org/journals/immunology/articles/10.3389/fimmu.2024.1436968/full>; 2. <https://link.springer.com/article/10.1007/s00441-010-1023-3>; 3. <https://www.mdpi.com/2218-273X/13/2/348>;
4. <https://www.frontiersin.org/journals/medicine/articles/10.3389/fmed.2022.897750/full>; 5. <https://doi.org/10.1016/j.celrep.2018.02.058>; 6. <https://www.nature.com/articles/s43018-024-00830-0>; 7. <https://pmc.ncbi.nlm.nih.gov/articles/PMC12291068/#B19>; 8. <https://linkinghub.elsevier.com/retrieve/pii/S1535610818303775>; 9. https://www.science.org/doi/10.1126/sciimmunol.abn6563?url_ver=Z39.88-2003&rft_id=ori:rid:crossref.org&rft_dat=cr_pub%20%20pubmed

CAR-iNKT cells have multiple ways to kill cancer cells

Also recruit 'good' immune cells and block 'bad' immune cells



Multiple ways to kill cancer cells

1

ENGINEERED TARGETING

Via the CAR: Specific target depending on tumour type

2

NATURAL TARGETING

Via the NKG2D pathway: NKG2D ligands are upregulated in cancer cells

Via lipid-bound CD1d: Several cancers naturally express CD1d

3

REMODULATE THE TUMOUR MICROENVIRONMENT

By blocking or killing tumour associated macrophages and myeloid derived suppressor cells

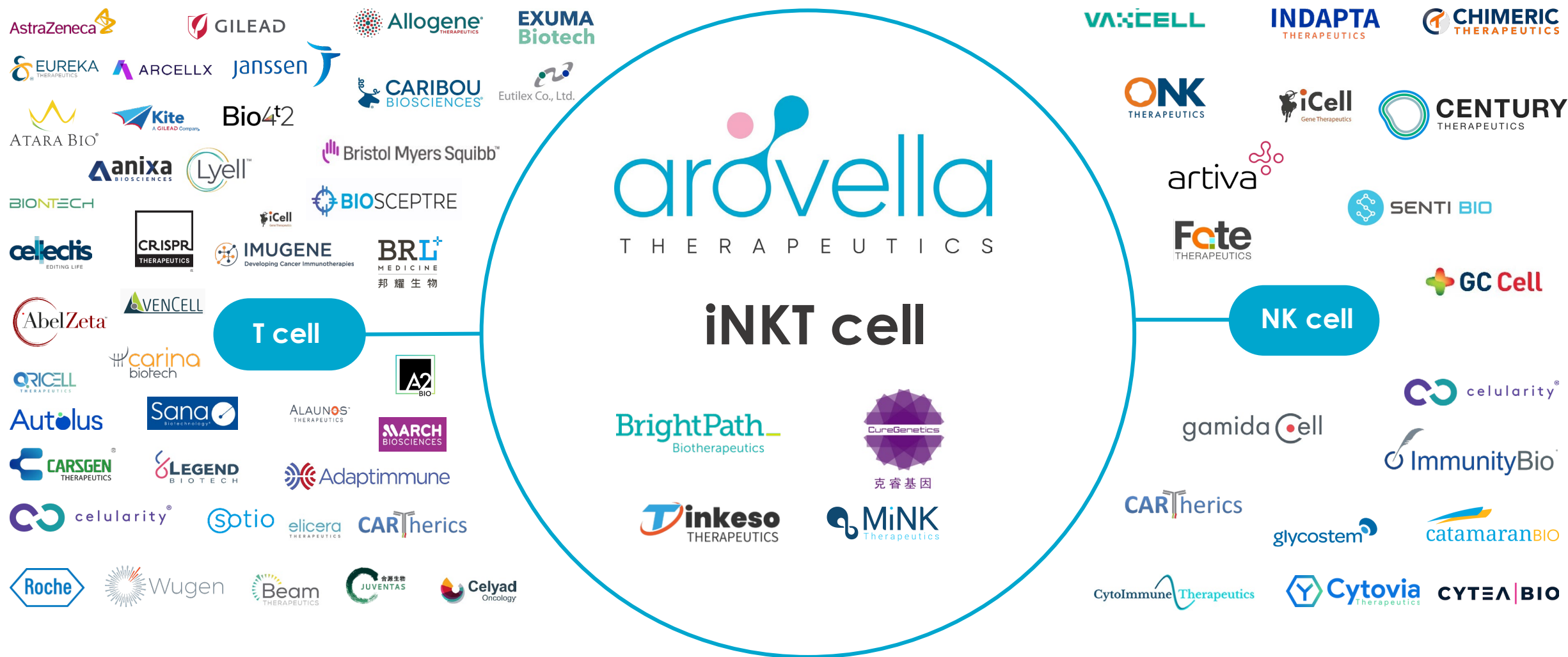
4

ACTIVATE T AND NK CELLS

iNKT cells release cytokines that cause activation of cytotoxic T and NK cells to start eliminating tumour cells and promote the cross-priming of T cells

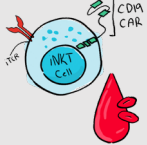
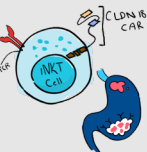

A differentiated position

T cell and NK cell sectors are competitive



Arovella's path to patient



PRODUCT	TECHNOLOGY ACQUISITION	PRE-CLINICAL CONFIRMATION	LENTIVIRUS MANUFACTURING	MANUFACTURING PLATFORM	FDA (IND)	PHASE 1 CLINICAL TRIAL	PHASE 2 CLINICAL TRIAL
CD19 CAR-iNKT Lymphoma ALA-101 	✓	✓	✓	✓		Early 2026	
CLDN18.2 CAR-iNKT Gastric cancer and pancreatic cancer ALA-105 	✓			✓			
CAR-iNKT Other cancers (i.e. GD2, GPC3) 				✓			

ALA-101 Pre-IND FDA meeting **completed**, and clinic-ready manufacturing process **established**

Arovella held a **positive Type D meeting with the FDA** and based on feedback intends to **file its IND** in CY2025

Acceptance of the IND for ALA-101 **provides the roadmap** for all future CAR-iNKT products targeting different cancers



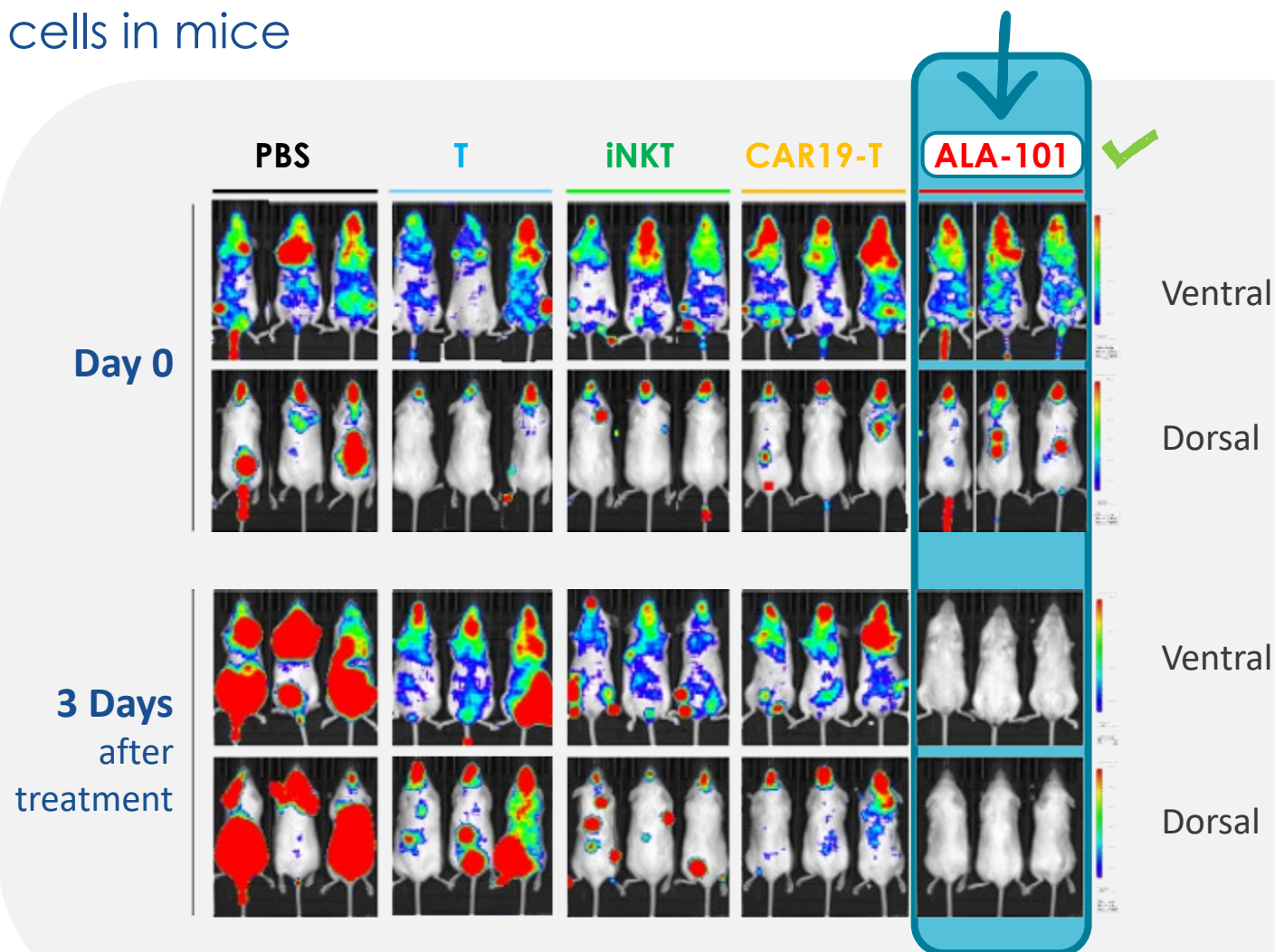
ALA-101 (CAR19-iNKT cells)

A next generation **off-the-shelf**
cell therapy for CD19
expressing cancers

ALA-101: enhanced tumour killing *in vivo*

ALA-101 rapidly eradicates tumour cells in mice

- Tumour cells expressing **CD19** and **CD1d** were intravenously delivered into mice
- Mice were treated with:
 - PBS (saline)
 - Unmodified T cells (T)
 - Unmodified iNKT cells (iNKT)
 - CAR19-T cells
 - **ALA-101 (CAR19-iNKT cells)**
- After three days, ALA-101 resulted in significant regression of tumour cells
- In all other treatments, there was strong tumour cell persistence
- ALA-101 displays swift action

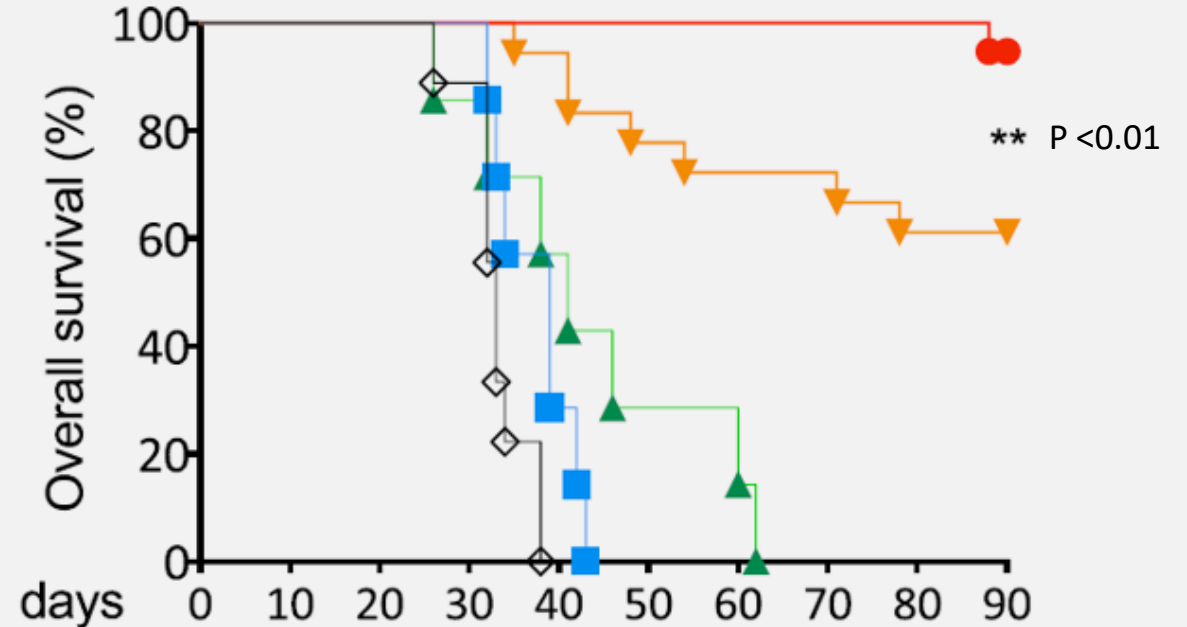


Rotolo *et al.*, Cancer Cell (2018)

ALA-101: next generation cell therapy

ALA-101 significantly increased survival in mice versus treatment with CAR19-T cells

- Tumour cells positive for **CD19** and **CD1d** were intravenously delivered into mice
- Mice were treated with:
 - PBS (saline)
 - Unmodified T cells (T)
 - Unmodified iNKT cells (iNKT)
 - CAR19-T cells
 - ALA-101 (CAR19-iNKT cells)
- After 90 days, only mice treated with CAR19-T cells or ALA-101 remained alive
- 1.5x more mice treated with ALA-101 remained alive after 90 days relative to CAR19-T cells
- ALA-101 has the potential to be an effective, off-the-shelf cell therapy for the treatment of CD19-positive cancers



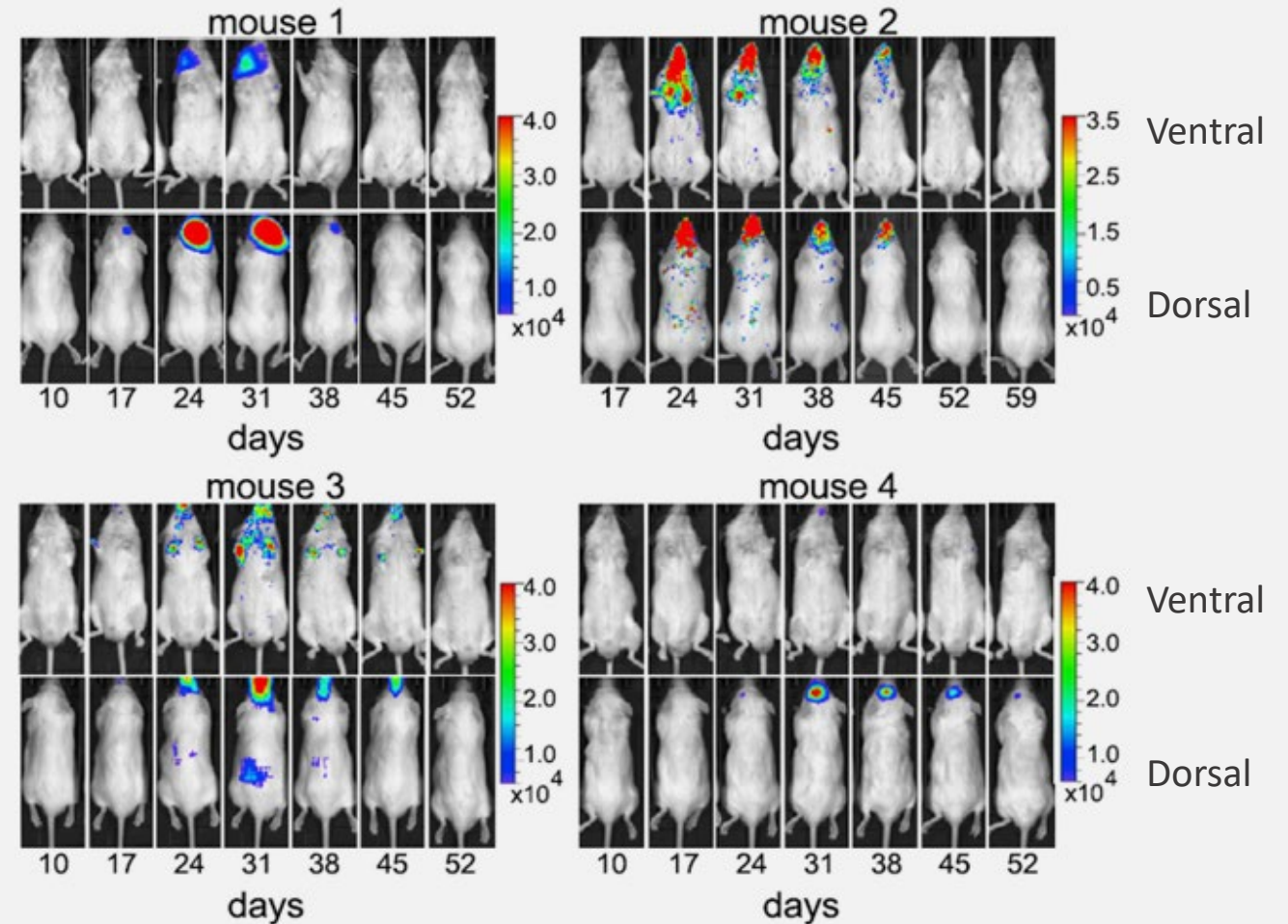
- PBS (saline) (n=12)
- T cell (n=7)
- iNKT cell (n=7)
- CAR19-T cell (n=19)
- ALA-101 (n=19)

Rotolo *et al.*, Cancer Cell (2018)

ALA-101: spontaneous secondary remission

ALA-101 activity may persist to eradicate tumour cells following relapse

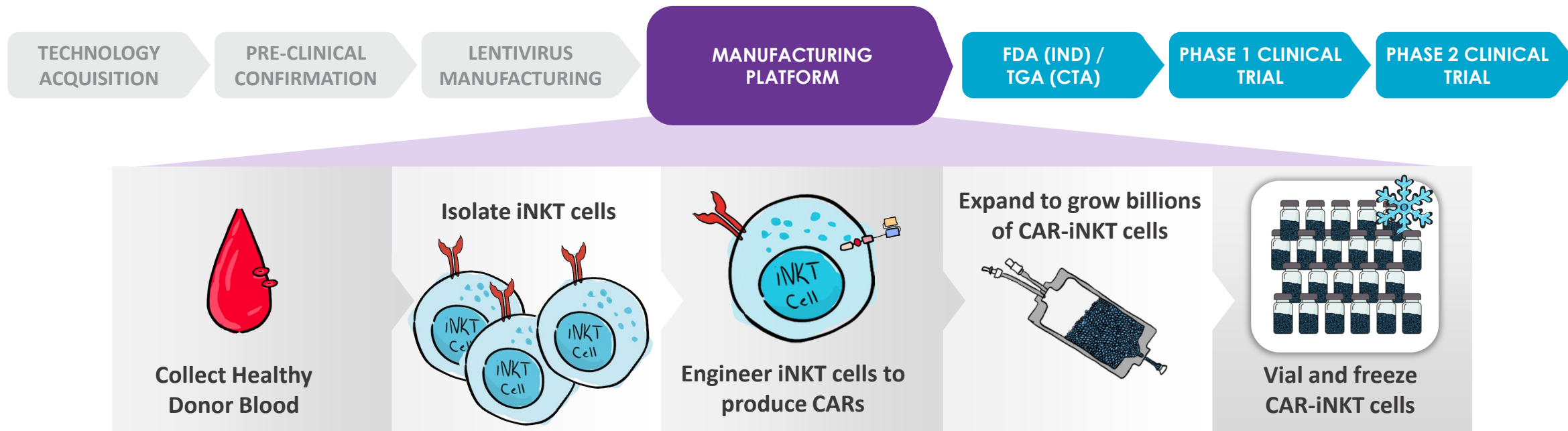
- Four mice treated with ALA-101 had the cancer return to the brain
- In all four mice, the cancer was eliminated a second time with no additional dosing
- This provides evidence that CAR19-iNKT cells can survive and continue to protect against cancer cells in vivo
- Potential to use ALA-101 to treat central nervous system lymphoma or brain metastases



Rotolo *et al.*, Cancer Cell (2018)

Clinic-ready manufacturing process developed

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

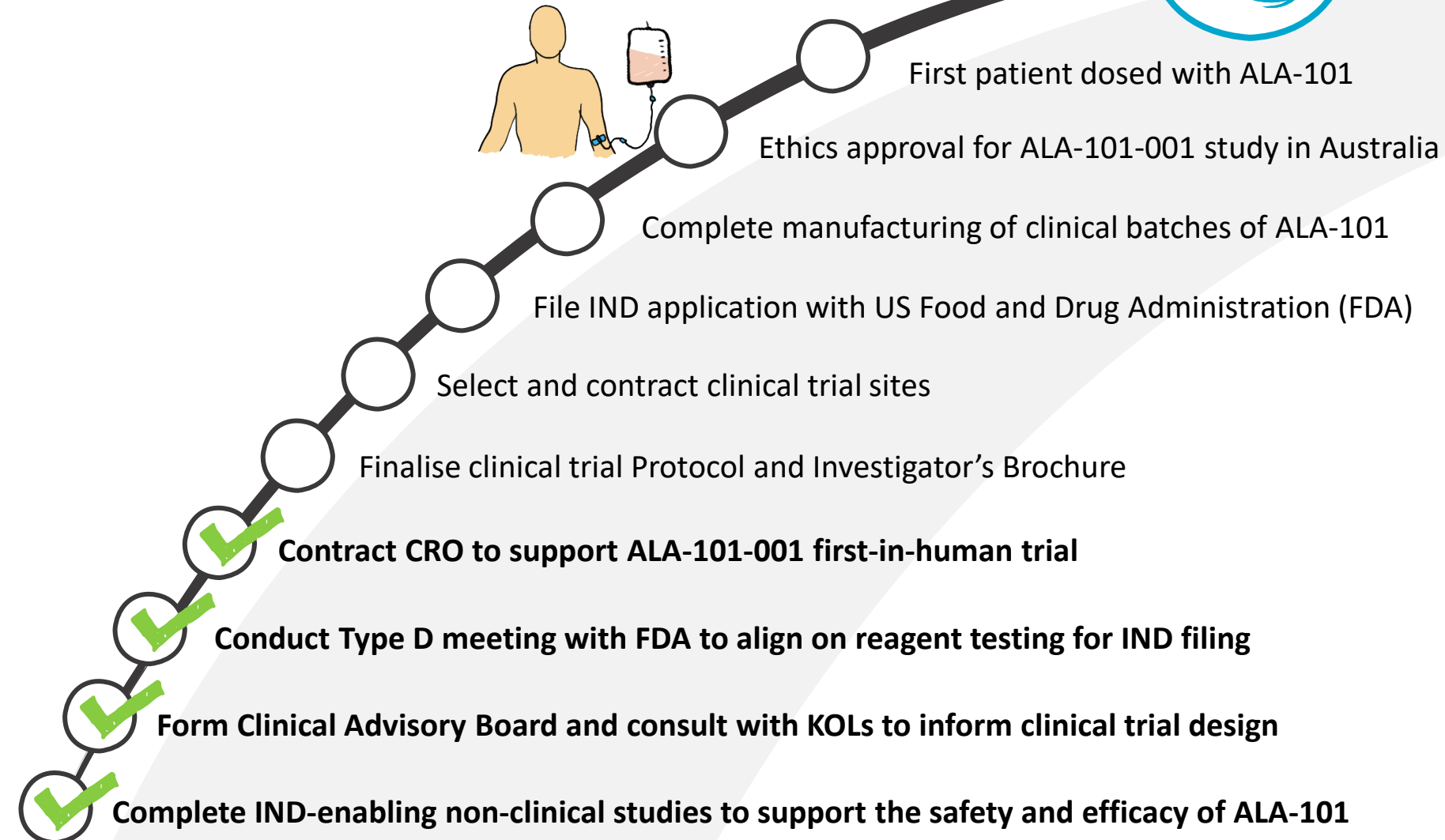


Progressed tech transfer to the GMP suites for clinical manufacturing

- **High yield**, >5,000-fold expansion of CAR-iNKT cells
- **>99% purity** of iNKT cells with a **balance of CD4- and CD4+ cells**
- **Semi-automated**, suitable for **large-scale production**
- Runs now being completed in the **GMP suites** using **GMP reagents**
- New knowledge becomes Arovella **trade secret** and **IP**
- New products can be **created plug and play** by substituting the lentivirus

Taking ALA-101 into first-in-human trials

ALA is progressing towards its ALA-101-001 phase 1 study



ALA-101-001: study design



Part 1

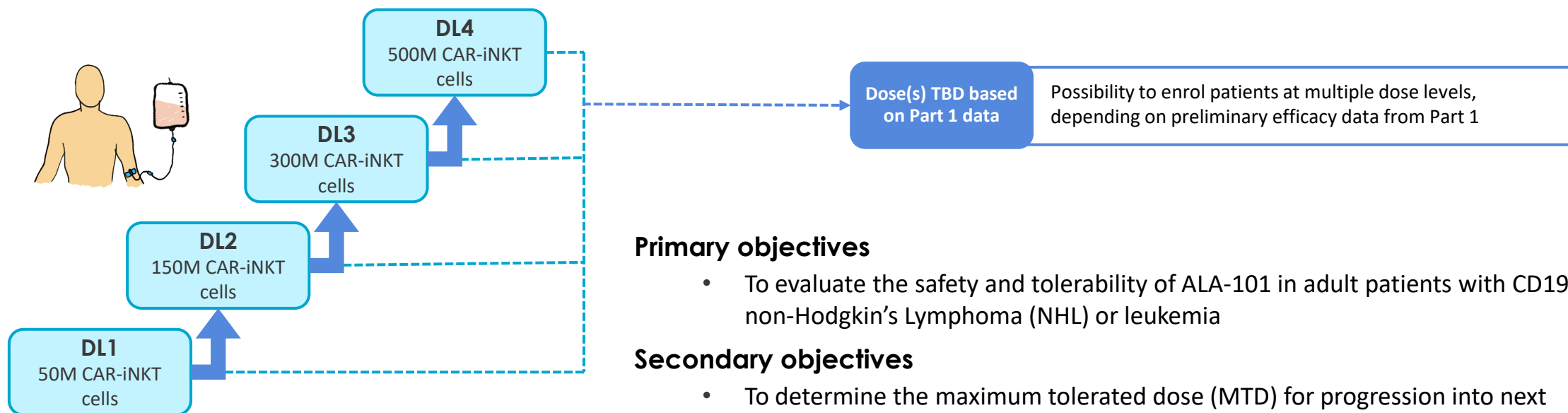
Dose escalation

- 4 dose levels
- 13-21 participants expected
- CD19+ lymphoma

Part 2

Dose expansion

- Dose levels selected from Part 1
- Up to 22 participants
- CD19+ lymphoma and leukaemia



Primary objectives

- To evaluate the safety and tolerability of ALA-101 in adult patients with CD19+ non-Hodgkin's Lymphoma (NHL) or leukemia

Secondary objectives

- To determine the maximum tolerated dose (MTD) for progression into next stages of clinical studies
- To evaluate the preliminary efficacy of ALA-101
- To characterise the pharmacokinetic (PK) profile of ALA-101
- To evaluate the immunogenicity of ALA-101

iNKT cells to target solid tumours

Arovella is implementing its strategy to target and kill solid tumours – 90% of newly diagnosed cancer cases¹

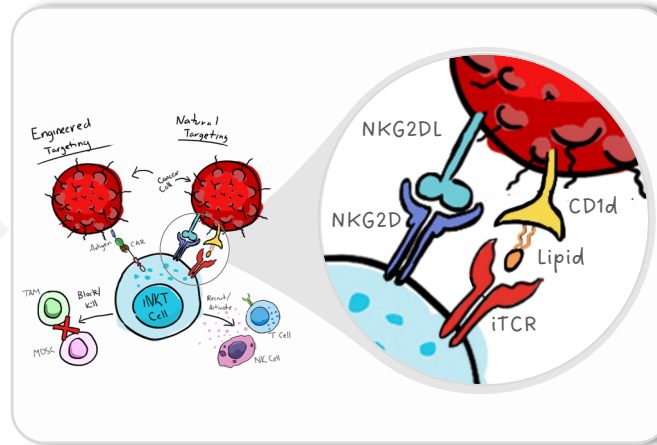
1. <https://www.cancer.gov/types/common-cancers>

iNKT cells are well placed to tackle solid tumours

iNKT cells have features that may make them useful for treating solid tumours

Naturally target cancer markers and are prognostic for survival

iNKT cells naturally target CD1d, NKG2DL and other markers present on some tumour types. iNKT cell levels are prognostic for colorectal cancer and head and neck squamous cell carcinoma.^{1,2}

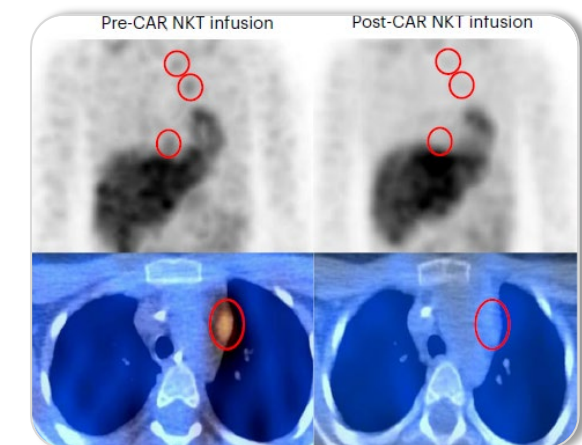
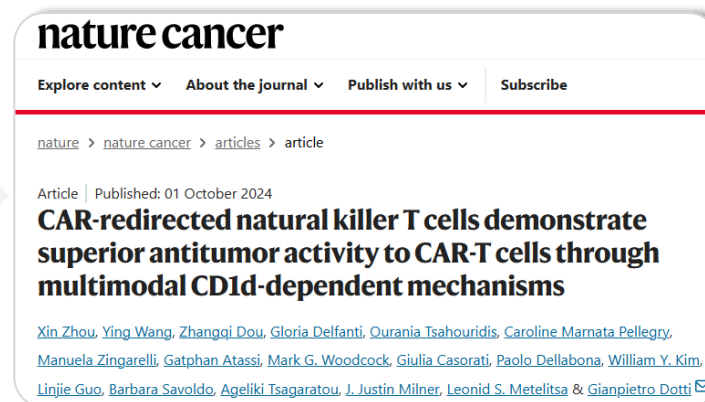


Infiltrate tumours and have shown promising clinical data in human solid tumour studies

iNKT cells have been shown to infiltrate solid tumours and have shown promising data when tested in human clinical studies for a range of solid tumours, including neuroblastoma and renal cell carcinoma.^{5,6}

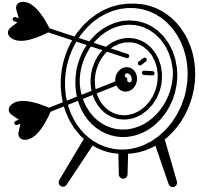
Kill pro-tumour cells, activate helpful immune cells and outperform CAR-T cells

iNKT cells can influence the TME, induce cross-priming of other immune cells³, and CAR-iNKT cells have been shown to outperform CAR-T cells when tested using mouse models.⁴



Arovella's strategies to combat solid tumours

Arovella is using three approaches to expand the iNKT cell platform into solid tumours



License novel cancer targets

Identify and license new targets that are expressed in multiple cancers to incorporate into Arovella's iNKT cell therapy platform



Armour iNKT cells

Enhance the performance of iNKT cells by equipping iNKT cells with novel armouring technologies



Create unique partnerships

Create partnerships to use novel combination therapies with synergistic effects



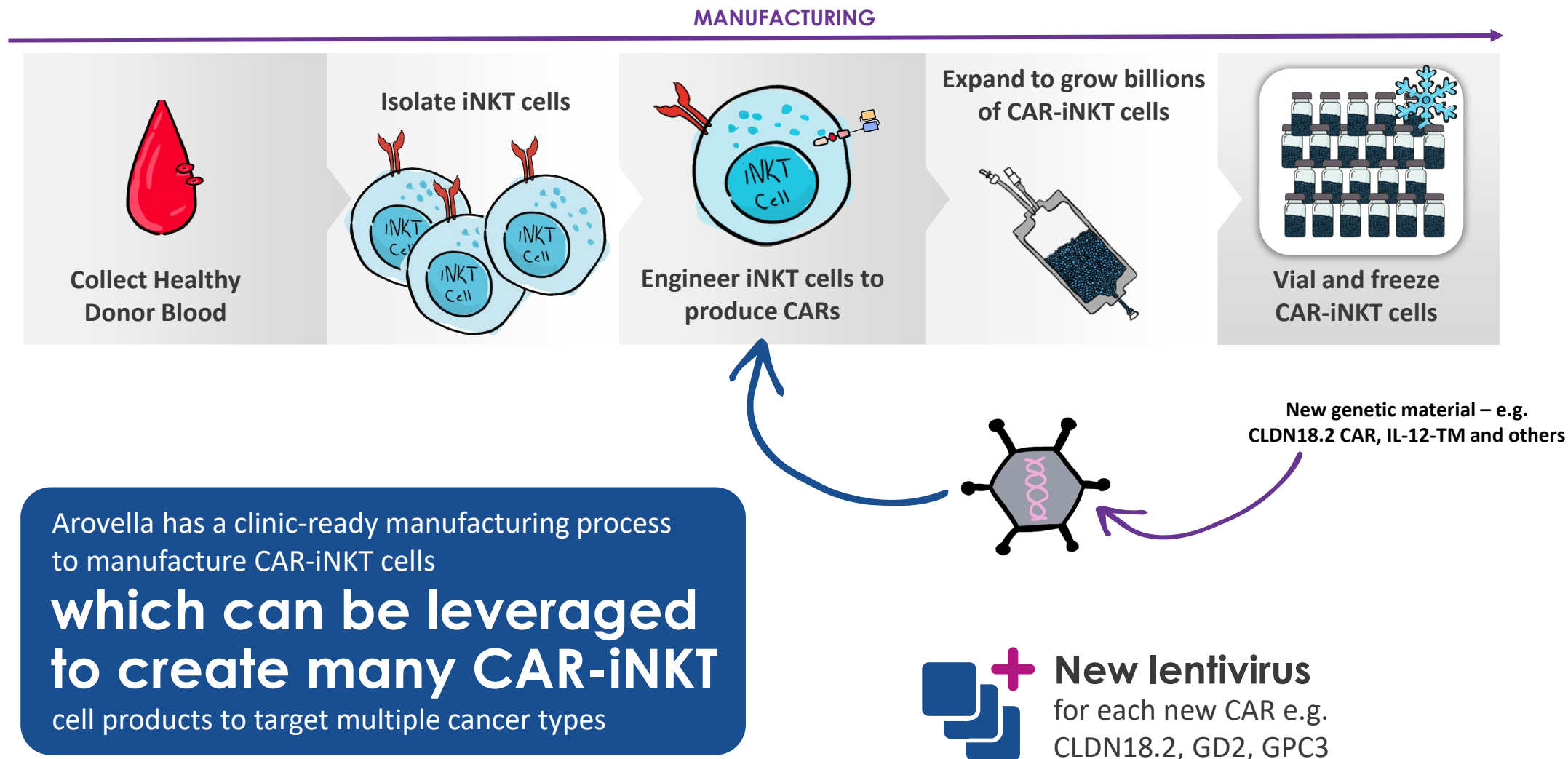
ALA-105 (CLDN18.2 CAR-iNKT)

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

Add additional CARs for novel targets

New CARs

Arovella's manufacturing process can be leveraged for multiple cancer types



Introducing Claudin 18.2 (CLDN18.2)

A promising solid tumour target

CLDN18.2 overexpression has been
**identified in several
types of cancers**

gastric cancer (GC)

gastroesophageal junction cancer (GEJC)

pancreatic cancer (PC)

esophageal cancer (EC)

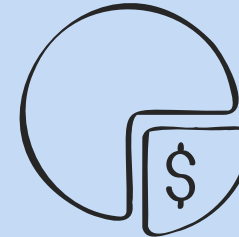
ovarian adenocarcinoma (OAC)

lung cancers (LC)



Validated target

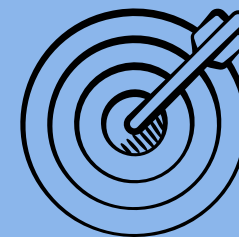
with first monoclonal antibody
approved in Japan and the US in
2024



Gastric cancer

market alone expected to reach

\$10.7 billion by 2031¹



Successfully generated a functional CAR

that targets CLDN18.2

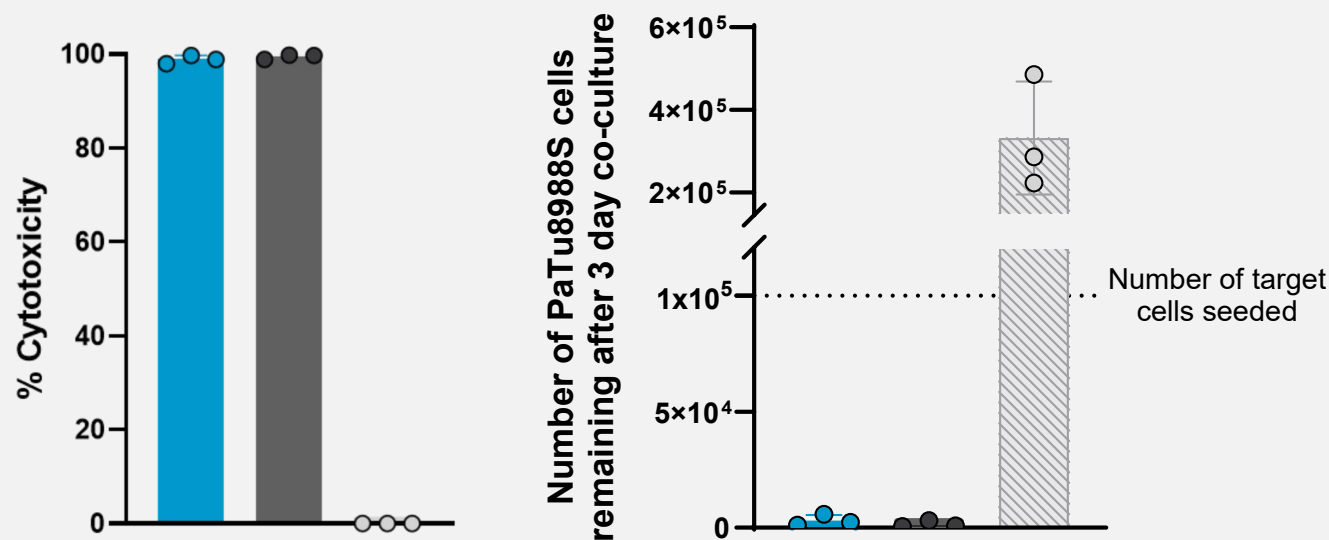
1. <https://www.alliedmarketresearch.com/gastric-cancer-market-A74458#:~:text=The%20global%20gastric%20cancer%20market,cells%20lining%20of%20the%20stomach>

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

The CLDN18.2 CAR derived from SPX-101 mediates potent cytotoxicity in T cells

- The activity of Arovella's newly created CLDN18.2 CAR was tested in T cells for the ability to kill pancreatic cancer cells (PaTu8988S) expressing CLDN18.2 antigen on their surface.
- Arovella's CLDN18.2 CAR demonstrates potent and specific killing of PaTu8988S target cells, equivalent to a control CAR (CT041) expected to display robust killing and currently under clinical evaluation, and relative to T cells lacking a CAR (non-transduced T cells).

- Arovella CLDN18.2 CAR-T
- Control CT041 CAR-T
- Non-transduced T cells

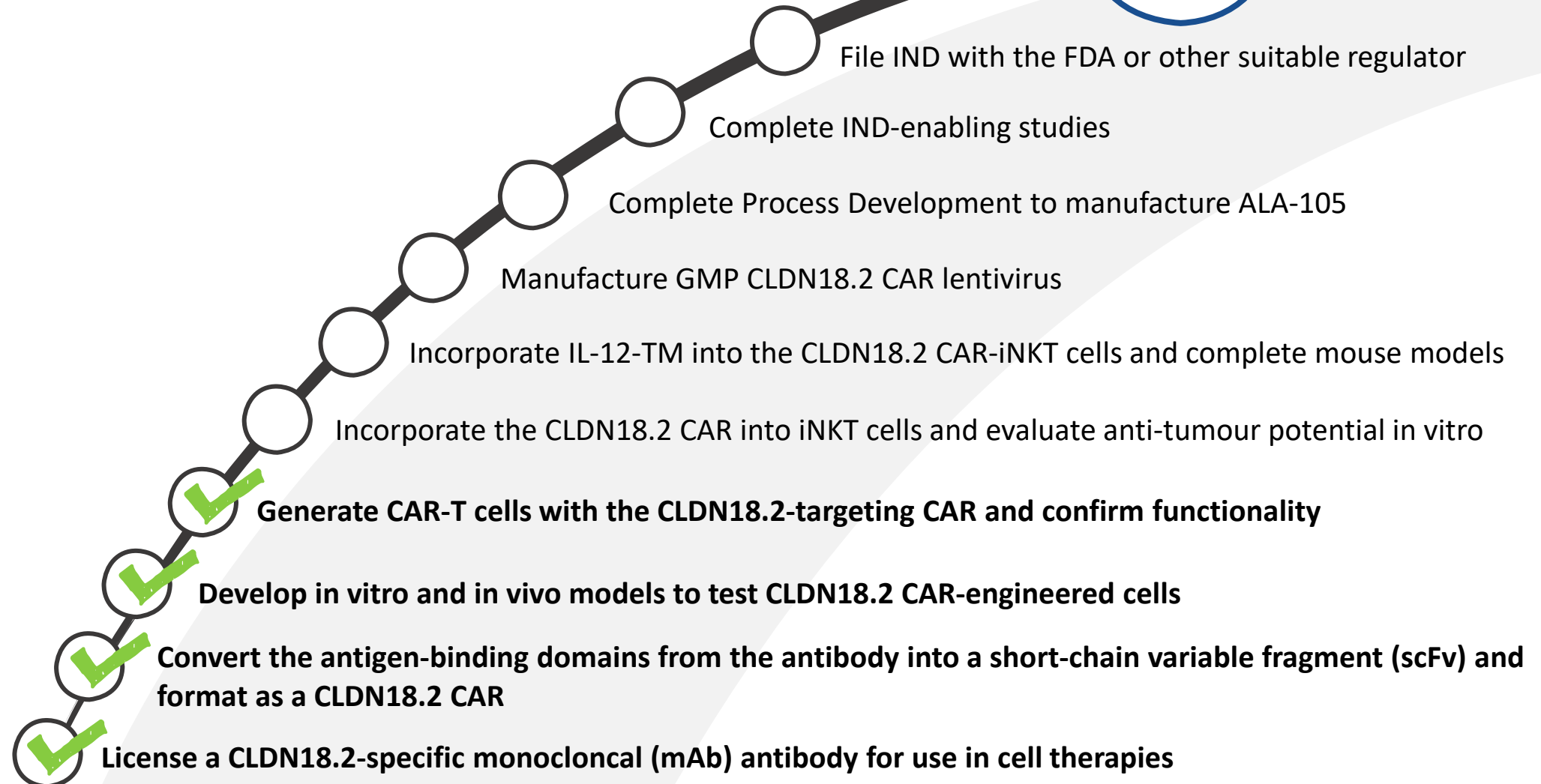


CAR-T cells manufactured from n=3 donors

Next, the CAR will be incorporated into iNKT cells using Arovella's CAR-iNKT cell manufacturing process

Taking ALA-105 to IND filing

ALA is progressing nonclinical development of ALA-105





IL-12-TM (Solid Tumors)

“Armouring” CAR-iNKT cells

“Armouring” CAR-iNKT cells

ARMOURING

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

IL-12-TM

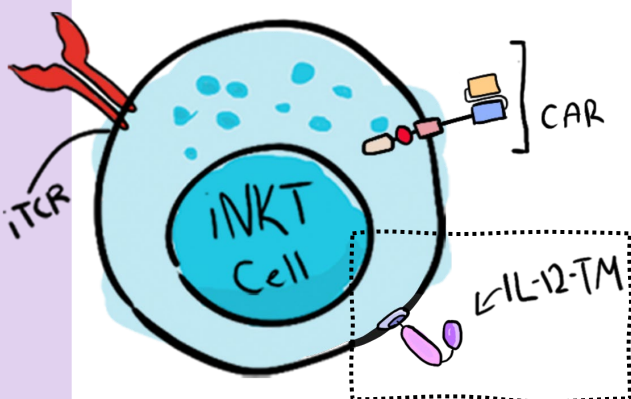
IL-12-TM is a modified version of IL-12

with a membrane anchor that links it to the surface of CAR-iNKT cells. We have designed it to be attached to the surface of iNKT cells so that it can enhance CAR-iNKT cells without being released into the blood stream, making it safer.

The IL-12-TM is incorporated into the lentiviral vector and system and

does not require changes to the manufacturing process

Discover how our IL-12-TM cytokine technology works in our new [IL-12-TM 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

Arovella has entered into a **Sponsored Research Agreement** with Prof. Dotti's group at the University of North Carolina

[nature](#) > [nature communications](#) > [articles](#) > article

Article | [Open access](#) | [Published: 02 January 2024](#)

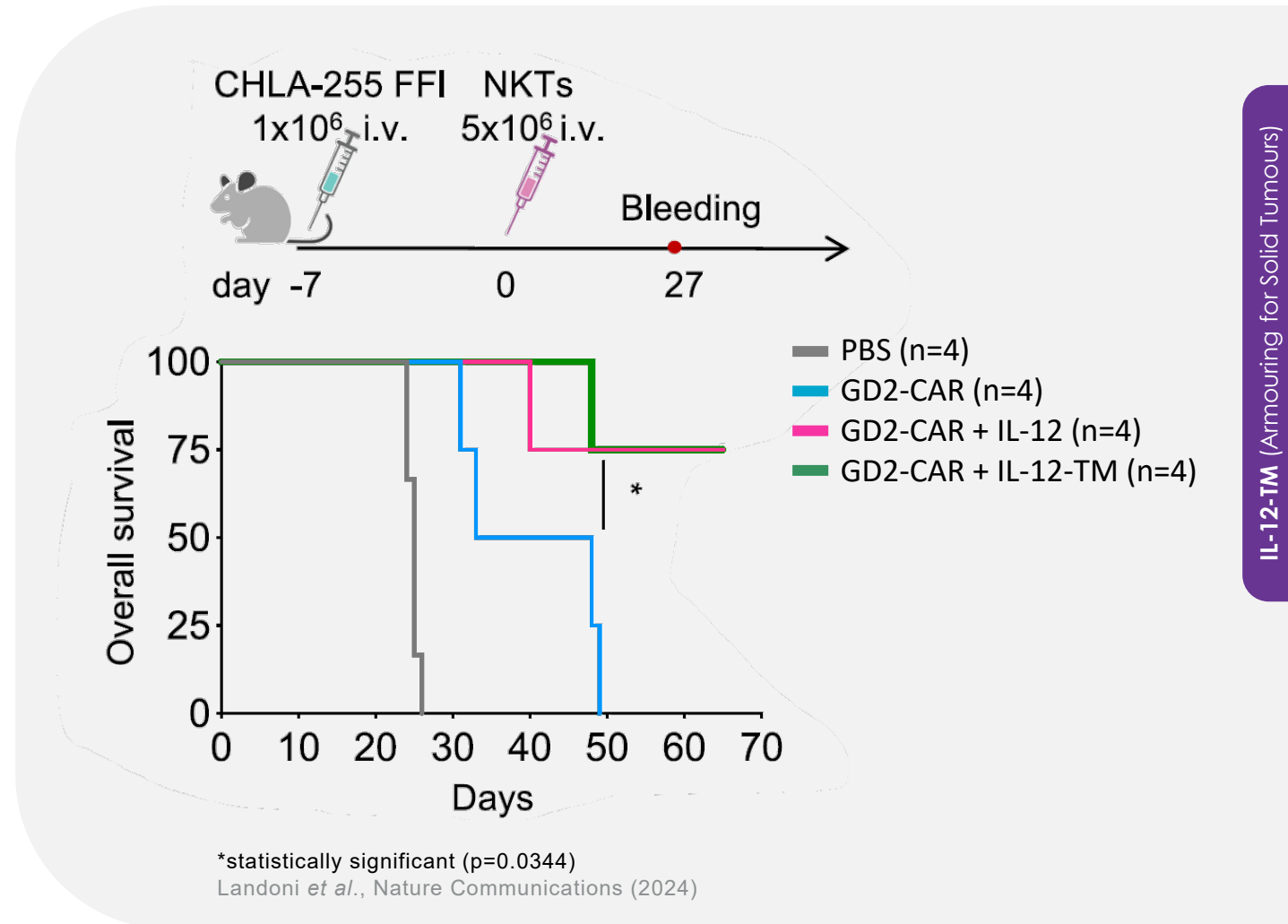
IL-12 reprograms CAR-expressing natural killer T cells to long-lived Th1-polarized cells with potent antitumor activity

IL-12-TM (Armouring for Solid Tumours)

Key benefits of IL-12-TM for CAR-iNKT cells

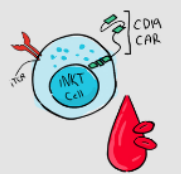

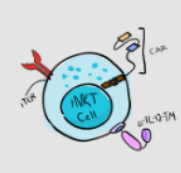
IL-12-TM enhances antitumor activity of CAR-iNKT cells

- Tumour cells positive for GD2 and were intravenously delivered into mice before treatment with CAR-iNKT cells
- Mice were treated with:
 - PBS (saline)
 - GD2-CAR
 - GD2-CAR + IL-12
 - GD2-CAR + IL-12-TM
- After 60 days, only mice treated with GD2-CAR + IL-12 or IL-12-TM remained alive
- IL-12-TM enhances CAR-iNKT cell numbers and antitumour activity

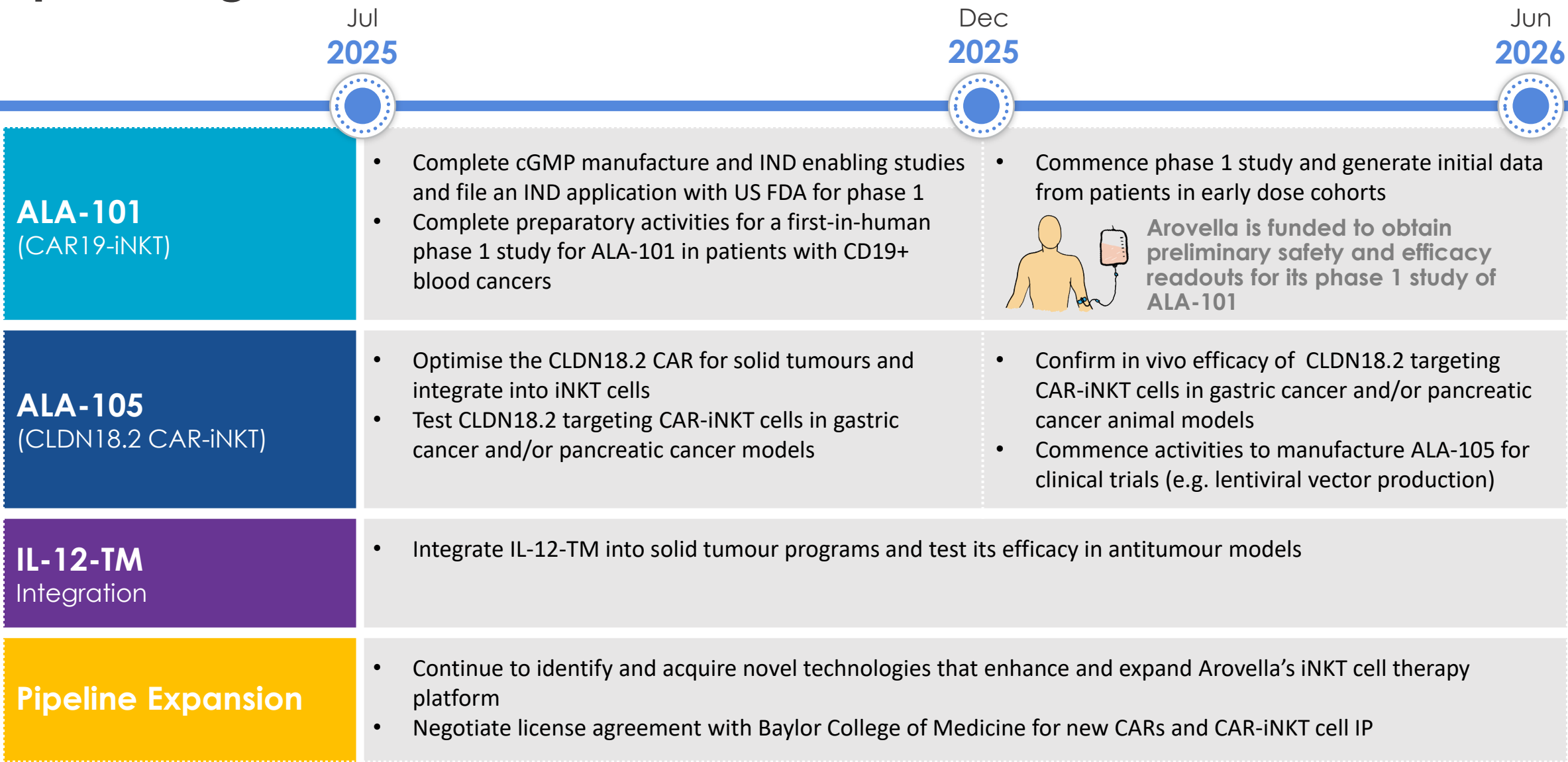


Arovella's expanding pipeline

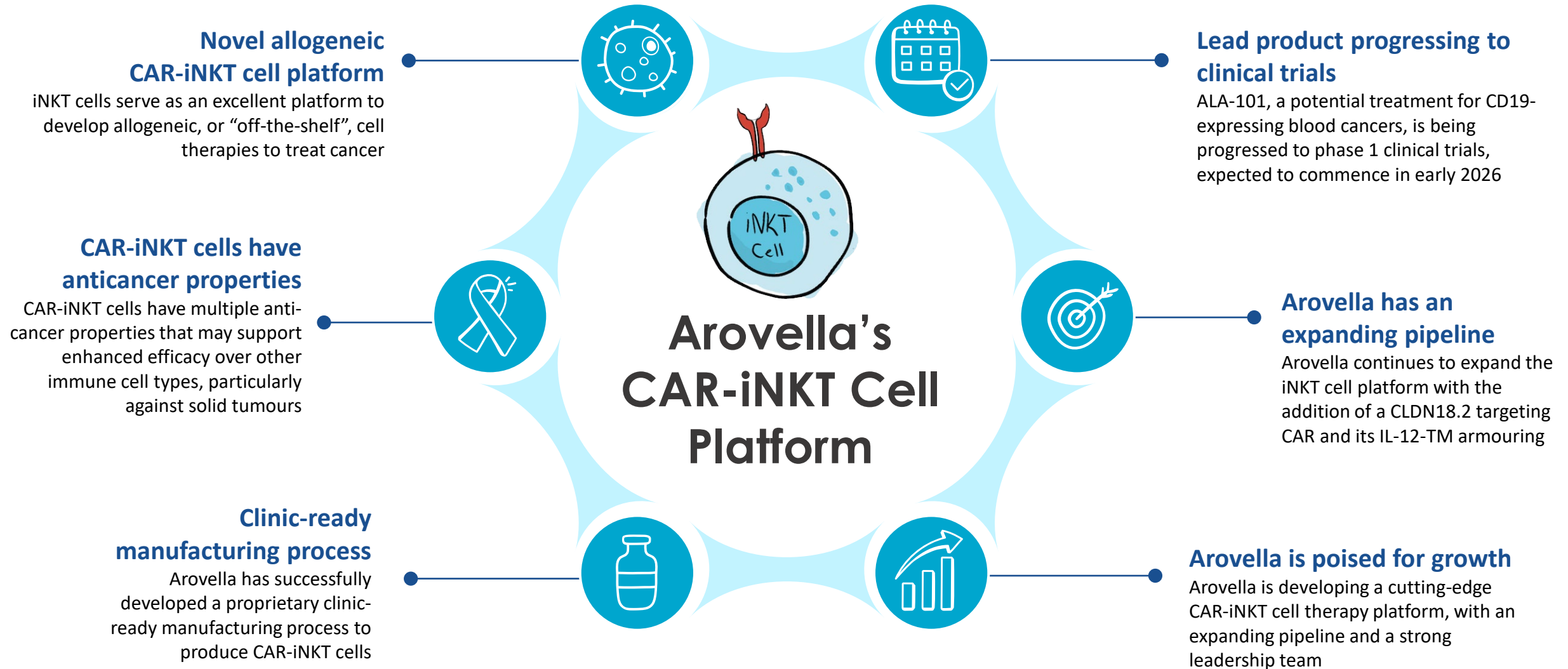


PRODUCT	INDICATION	PRECLINICAL	IND-ENABLING	PHASE 1
ALA-101 (CD19 CAR-iNKT) 	CD19-positive cancers	CD19-positive Lymphoma		
ALA-105 (CLDN18.2 CAR-iNKT) 	CLDN18.2-positive solid tumours	Gastric & Pancreatic Cancers		
IL-12-TM 	Solid tumours	Solid Tumours		

Upcoming milestones for FY2026



Summary



ASX:ALA



Thank You

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Cell therapy deal references



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