

Allogene Therapeutics Presents Preclinical Data Demonstrating the Potential of AlloCAR T[™] Therapy in Renal Cell Carcinoma (RCC) at the 2019 AACR Annual Meeting

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- Anti-CD70 AlloCAR T[™] Could Be Optimized to Eliminate Both CD70 Low and High Expressing Target Cells, and Manufactured in a Large-Scale Process
- CD70, Present on Both Hematologic Malignancies and Solid Tumors, May Facilitate Translation of AlloCAR T[™] to Solid Tumors

SOUTH SAN FRANCISCO, Calif., April 01, 2019 (GLOBE NEWSWIRE) -- Allogene Therapeutics, Inc. (Nasdaq: ALLO), a clinical-stage biotechnology company pioneering the development of allogeneic CAR T (AlloCAR TTM) therapies for cancer, today announced results from a preclinical study of its AlloCAR T program targeting CD70, a cancer target that is expressed on both hematologic and solid tumor cells. The data were presented today in a poster session at the 2019 American Association for Cancer Research (AACR) Annual Meeting in Atlanta.

"While our initial focus is on our programs targeting CD19 and BCMA for hematologic malignancies, Allogene's portfolio includes an additional 15 pre-clinical AlloCAR T[™] cell therapy assets targeting a vast array of tumor types," saidDavid Chang, M.D., Ph.D., President, Chief Executive Officer and Co-Founder of Allogene. "CD70, which is expressed on both hematologic malignancies and solid tumors, may bridge the gap toward unlocking the potential of AlloCAR T therapy in solid tumors. Based on the encouraging early-stage research presented at AACR, our goal is to select and advance an anti-CD70 AlloCAR T candidate into IND-enabling studies for the treatment of renal cell carcinoma."

RCC is a highly T-cell infiltrated tumor type. However, despite demonstrated responsiveness to immuno-oncology agents, the overall rates of complete response are very low with yet unknown durability.^{i,ii,iii} In this study, a large panel of single-chain variable fragments of an antibody that bind to CD70 were generated and formatted into CARs. Anti-CD70 AlloCAR T cells were identified, selected and studied in short- and long-term cytotoxicity assays, which confirmed their ability to kill RCC cells in vitro and in multiple in vivo models. Anti-CD70 AlloCAR T therapy candidates were ranked based on tonic signaling, transduction efficiency, phenotype, activation status and expansion. The pre-clinical study also found that anti-CD70 AlloCAR T cells could be successfully manufactured in a large-scale process.

The anti-CD70 AlloCAR T program was progressed under a joint research collaboration with Cellectis and is directed at a target licensed exclusively from Cellectis. Allogene holds global development and commercial rights to any anti-CD70 AlloCAR T program candidate.

About Renal Cell Carcinoma

Renal cell carcinoma (RCC) accounts for nine of 10 kidney cancers and is one of the 10 most common cancers in the United States.^{iv} RCC is diagnosed in approximately 65,000 people in the United States each year, and caused an estimated 15,000 deaths in 2018.^v The five-year survival rate for metastatic RCC is only 12 percent.^{vi}

About Allogene Therapeutics

Allogene Therapeutics, with headquarters in South San Francisco, is a clinical-stage biotechnology company pioneering the development of allogeneic chimeric antigen receptor T cell (AlloCAR T[™]) therapies for cancer. Led by a world-class management team with significant experience in cell therapy, Allogene is developing a pipeline of "off-the-shelf" CAR T cell therapy candidates with the goal of delivering readily available cell therapy faster, more reliably and at greater scale to more patients.

AlloCAR T cell therapies are engineered from cells of healthy donors, which is intended to allow for creation of inventory for on-demand use in patients. This approach is designed to eliminate the need to create personalized therapy from a patient's own cells, simplify manufacturing, and reduce the time patients must wait for CAR T cell treatment. The Allogene portfolio includes rights to 16 pre-clinical AlloCAR T cell therapy assets in addition to AlloCAR T therapy candidates ALLO-501 and UCART19. Allogene is the sponsor of the ALLO-501 program, which is expected to begin Phase 1 in the first half of 2019 for the treatment of relapsed/refractory non-Hodgkin lymphoma (NHL). Servier is the sponsor of the UCART19 program, which is currently in Phase 1 for the treatment of relapsed/refractory acute lymphoblastic leukemia (ALL). For more information, please visit www.allogene.com, and follow @AllogeneTx on Twitter and LinkedIn.

Cautionary Note on Forward-Looking Statements

This press release contains forward-looking statements for purposes of the safe harbor provisions of the Private Securities Litigation Reform Act of 1995. The press release may, in some cases, use terms such as "predicts," "believes," "potential," "proposed," "continue," "estimates," "anticipates," "expects," "plans," "intends," "may," "could," "might," "will," "should" or other words that convey uncertainty of future events or outcomes to identify these forward-looking statements. Forward-looking statements include statements regarding intentions, beliefs, projections, outlook, analyses or current expectations concerning, among other things: the ability to further research and develop an anti-CD70 AlloCAR T[™] candidate, the potential benefits of anti-CD70 AlloCAR T therapy, the ability to manufacture anti-CD70 AlloCAR T cells, the timing and ability to initiate and progress the ALLO-501 clinical trial, the ability to initiate and progress additional clinical trials of AlloCAR T therapies, and the potential benefits of AlloCAR T therapy. Various factors may cause differences between Allogene's expectations and actual results as discussed in greater detail in Allogene's filings with the Securities and Exchange Commission (SEC), including without limitation in its Form 10-K for the year ended December 31, 2018. Any forward-looking statements that are made in this press release speak only as of the date of this press release. Allogene assumes no obligation to update the forward-looking statements whether as a result of new information, future events or otherwise, after the date of this press release.

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ⁱ Geissler, K., Fornara, P., Lautenschläger, C., Holzhausen, H. J., Seliger, B., & Riemann, D. (2015). Immune signature of tumor infiltrating immune cells in renal cancer. Oncoimmunology, 4(1), e985082. doi:10.4161/2162402X.2014.985082

ⁱⁱ Motzer, R., et al. (2015) Nivolumab versus Everolimus in Advanced Renal-Cell Carcinoma. N Engl J Med; 373:1803-1813

ⁱⁱⁱ Rini, B. I. et al. (2019) Pembrolizumab plus Axitinib versus Sunitinib for Advanced Renal-Cell Carcinoma. N Engl J Med; 380:1116-1127 ^{iv}American Cancer Society. Key Statistics About Kidney Cancer. <u>https://www.cancer.org/cancer/kidney-cancer/about/key-statistics.html</u>. Accessed

March 11, 2019.

^v Siegel et al. in CA Cancer J Clin 68(1):7, 2018

^{vi}American Cancer Society. Survival Rates for Kidney Cancer? <u>https://www.cancer.org/cancer/kidney-cancer/detection-diagnosis-staging/survival-rates.html</u>. Accessed March 11, 2019.



Source: Allogene Therapeutics, Inc.