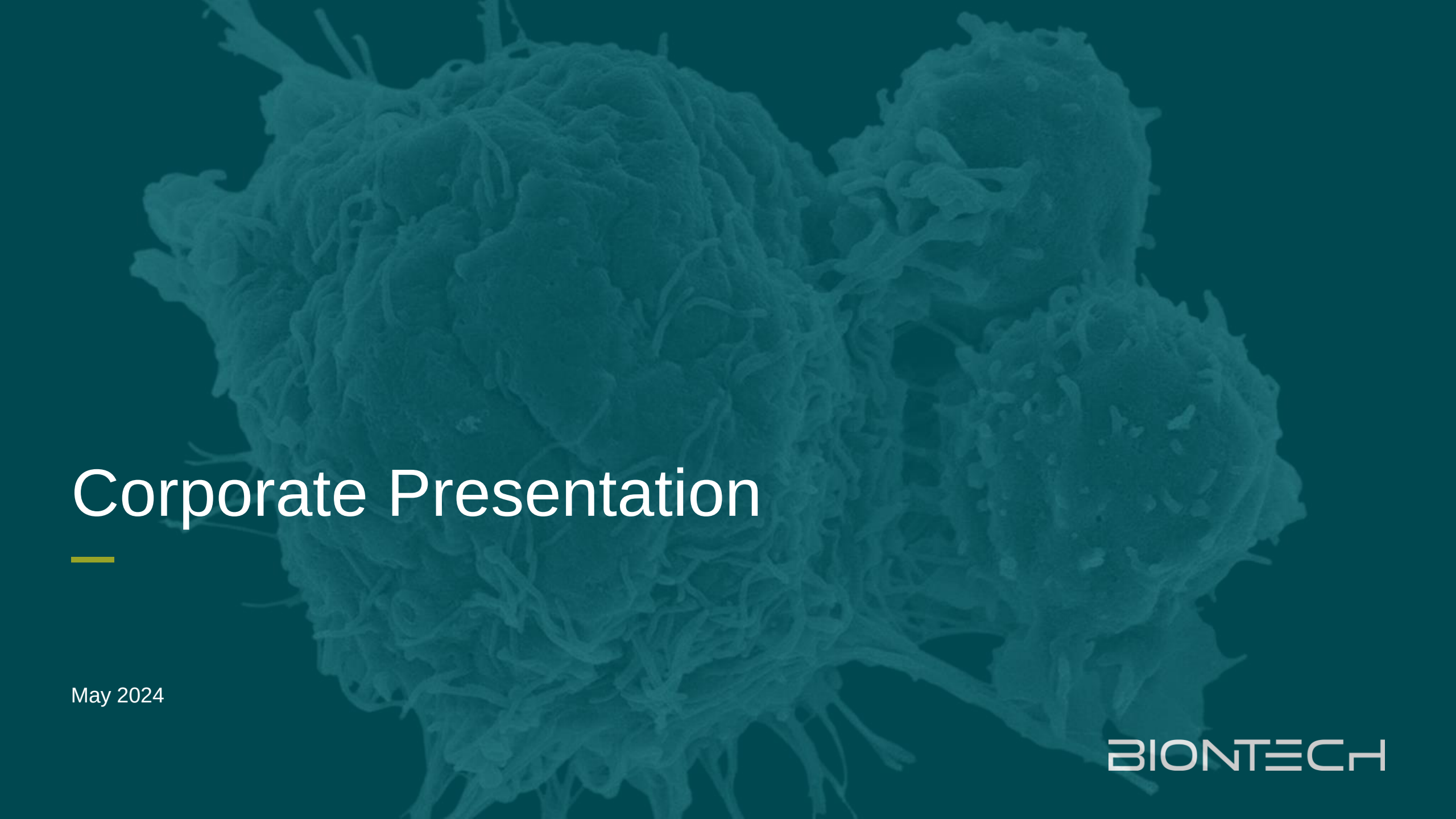

Corporate Presentation

May 2024

BIONTECH

This Slide Presentation Includes Forward-Looking Statements

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, as amended, including, but not limited to, statements concerning: BioNTech's expected revenues and net profit/(loss) related to sales of BioNTech's COVID-19 vaccine, referred to as COMIRNATY where approved for use under full or conditional marketing authorization, in territories controlled by BioNTech's collaboration partners, particularly for those figures that are derived from preliminary estimates provided by BioNTech's partners; the rate and degree of market acceptance of BioNTech's COVID-19 vaccine and, if approved, BioNTech's investigational medicines; expectations regarding anticipated changes in COVID-19 vaccine demand, including changes to the ordering environment and expected regulatory recommendations to adapt vaccines to address new variants or sublineages; the initiation, timing, progress, results, and cost of BioNTech's research and development programs, including BioNTech's current and future preclinical studies and clinical trials, including statements regarding the timing of initiation, enrollment, and completion of studies or trials and related preparatory work and the availability of results, and the timing and outcome of applications for regulatory approvals and marketing authorizations; the targeted timing and number of additional potentially registrational trials, and the registrational potential of any trial BioNTech may initiate; discussions with regulatory agencies; BioNTech's expectations with respect to intellectual property; the impact of BioNTech's acquisition of InstaDeep Ltd. and its collaboration and licensing agreements; the development, nature and feasibility of sustainable vaccine production and supply solutions; and BioNTech's estimates of revenues, research and development expenses, selling, general and administrative expenses, and capital expenditures for operating activities. In some cases, forward-looking statements can be identified by terminology such as "will," "may," "should," "expects," "intends," "plans," "aims," "anticipates," "believes," "estimates," "predicts," "potential," "continue," or the negative of these terms or other comparable terminology, although not all forward-looking statements contain these words.

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A Global Immunotherapy Leader

COVID-19 VACCINE GLOBAL LEADERSHIP[1]

>50 % Comirnaty **Market Share**[2]

>460 m Doses distributed in 2023

Potential introduction of **combination respiratory vaccines in late 2025 or 2026**, if approved[2]

MULTIPLATFORM ONCOLOGY PORTFOLIO

21 **Clinical programs** across

11 **Technology Platforms**

EXPANDING INFECTIOUS DISEASE PIPELINE

7 **Clinical programs** in high unmet need indications

Growing **proprietary pipeline**

Partnership with Pfizer in respiratory and other high need indications

Aim for 10+ potentially registrational trials ongoing by year end 2024

Yearly oncology launches planned from 2026 onwards[2]

STRONG FINANCIAL POSITION

€ 16.9 bn

total cash plus security investments[3]

BROAD COLLABORATION NETWORK

Pfizer · Genentech (A Member of the Roche Group) · REGENERON · BIOTHEUS · Genmab · DualityBio · OncoC4 · MediLink Therapeutics

LEADER IN ARTIFICIAL INTELLIGENCE

InstaDeep™

Building a multi-product global biotechnology company to address the world's most pressing health challenges with pioneering technologies delivered at scale

1. Partnered with Pfizer; 2. Subject to successful clinical development and regulatory approval; 3. Consists of cash and cash equivalents of €8,976.6 million and security investments of €7,962.7 million, as of March 31, 2024.

Our Vision: Harnessing the Power of the Immune System to Fight Human Disease

Elevating success beyond our historical achievement

Sustainable respiratory vaccine business

Innovative precision medicine pipeline targeting multiple product approvals in oncology in the coming years

Multi-product immunotherapy pioneer addressing medical need worldwide

BioNTech's key objectives for the next phase

Powered by breakthrough science, disruptive technologies & AI

AI = artificial intelligence.

Our Multi-Platform Immuno-Oncology Pipeline Today

Phase 1	Phase 1/2	Phase 2	Phase 3
BNT116 Adv. NSCLC	**BNT142** (CD3xCLDN6) Multiple CLDN6-pos. adv. solid tumors	**BNT111**[2] aPD(L)1-R/R melanoma, + cemiplimab	**BNT316/ONC-392 (gotistobart)**[4] (CTA-4) anti-PD-1/PD-L1 experienced NSCLC
Autogene cevumeran (BNT122)[1] Multiple solid tumors	**BNT151** (IL-2 variant) Multiple solid tumors	**BNT113** 1L rel./met. HPV16+ PDL-1+ head and neck cancer, + pembrolizumab	**BNT323/DB-1303**[5] (HER2) HR+/HER2-low met. breast cancer
BNT152 + BNT153 (IL-7, IL-2) Multiple solid tumors	**BNT211** (CLDN6) Multiple solid tumors	**BNT116**[2] 1L adv. PD-L1 ≥ 50% NSCLC, + cemiplimab	**BNT323/DB-1303**[5] (HER2) PLANNED HER2-expressing rec. endometrial cancer
BNT221 Refractory metastatic melanoma	**BNT311/GEN1046**[3] (acasunlimab; PD-L1x4-1BB) Multiple solid tumors	**Autogene cevumeran (BNT122)**[1] 1L adv. melanoma, + pembrolizumab	
BNT321 (sLea) Metastatic PDAC	**BNT312/GEN1042**[3]* (CD40x4-1BB) Multiple solid tumors	**Autogene cevumeran (BNT122)**[1] Adj. ctDNA+ stage II or III CRC	
BNT322/GEN1056[3] Multiple solid tumors	**BNT313/GEN1053**[3] (CD27) Multiple solid tumors	**Autogene cevumeran (BNT122)**[1] Adj. PDAC, + atezolizumab + mFOLFIRINOX	
BNT326/YL202[6] (HER3) Multiple solid tumors	**BNT314/GEN1059**[3] **(**EpCAMx4-1BB) Multiple solid tumors	**BNT311/GEN1046**[3] (acasunlimab; PD-L1x4-1BB) R/R met. NSCLC, +/- pembrolizumab	
	BNT316/ONC-392 (gotistobart)[4] (CTA-4) mCRPC, + radiotherapy	**BNT316/ONC-392 (gotistobart)**[4] (CTA-4) Plat.-R. ovarian cancer, + pembrolizumab	
	BNT316/ONC-392 (gotistobart)[4] (CTA-4) Multiple solid tumors		
	BNT321 (sLea) adjuvant PDAC, +mFOLFIRINOX		
	BNT323/DB-1303[5] (HER2) Multiple solid tumors		
	BNT324/DB-1311[5] (B7H3) Multiple solid tumors		
	BNT325/DB-1305[5] (TROP2) Multiple solid tumors		
	BNT411 (TLR7) Multiple solid tumors		

Legend

- mRNA
- Cell therapy
- Next generation IO
- ADCs
- Small molecules

1. Partnered with Genentech, member of Roche Group; 2. Partnered with Regeneron; 3. Partnered with Genmab; 4. Partnered with OncoC4; 5. Partnered with DualityBio; 6. Partnered with MediLink Therapeutics.
*Two phase 1/2 clinical trials in patients with solid tumors are ongoing in combination with immune checkpoint inhibitor +/- chemotherapy
NSCLC = non-small cell lung cancer; SCLC = small cell lung cancer; mCRPC = metastatic castration resistant prostate cancer; HPV = human papillomavirus; PDAC = pancreatic ductal adenocarcinoma; CRC = colorectal cancer; CLDN = claudin; IL = interleukin; 1L = first line; R/R = relapsed/refractory; HER2/HER3 = human epidermal growth factor 2/3; sLeA = sialyl-Lewis A antigen; TROP2 = trophoblast cell-surface antigen 2; TNBC = triple negative breast cancer.

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Our Oncology Approach

Goals

Address the continuum of cancer

Bring novel therapies to cancer patients and establish new treatment paradigms

Open up novel options to combine platforms and therapies

Strategy

Portfolio covering compound classes with synergistic mechanisms of action

- Immunomodulators
- Targeted therapies
- Individualized and off-the-shelf mRNA vaccines

Programs across a wide range of solid tumors and stages of treatment

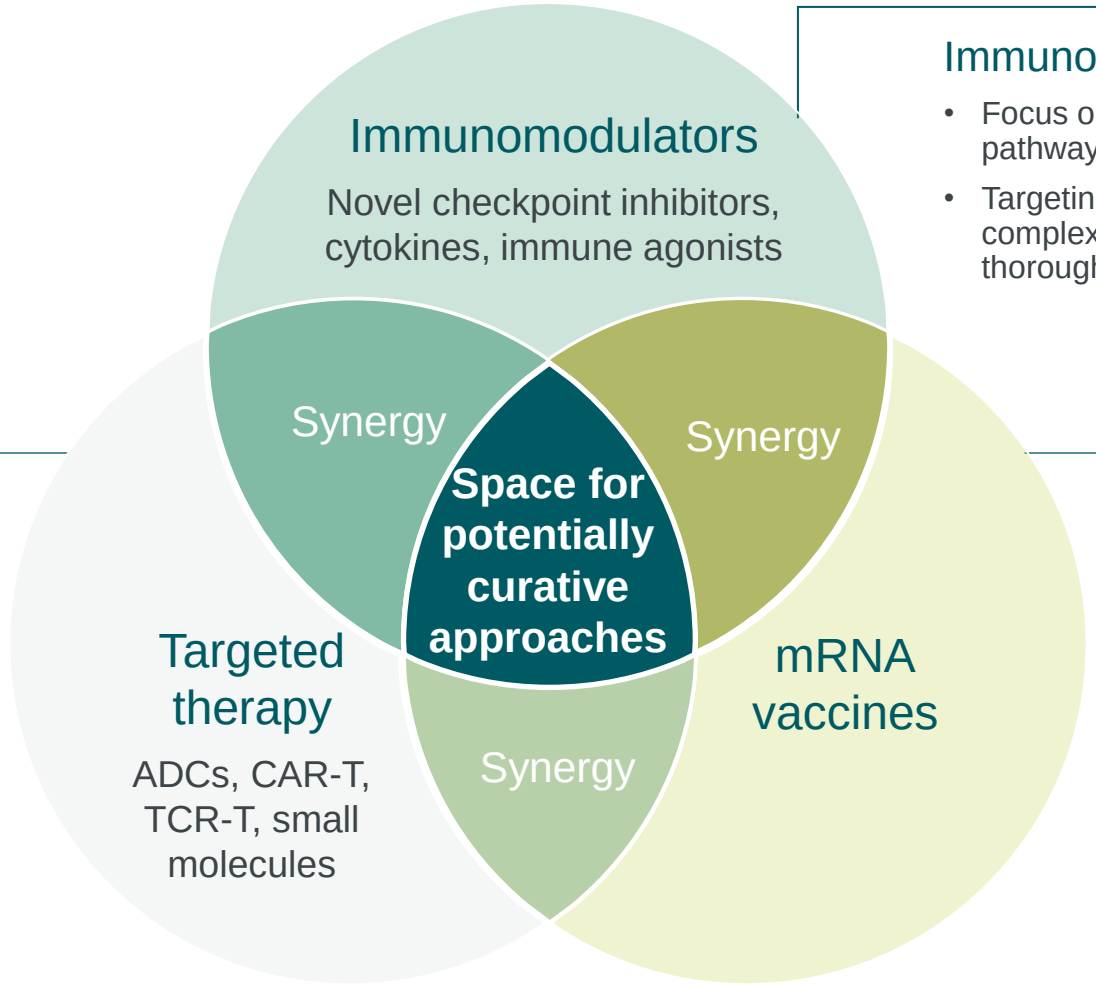
Programs with first-in-class and / or best-in-class potential

Unique therapeutic combinations

Towards a Potentially Curative Approach to Cancer: Differentiated Combinations

Immunomodulators

- Focus on the most relevant and crucial IO pathways
- Targeting different complementary players in the complex cancer immunity cycle may promote a thorough and durable anti-tumor effect



Targeted therapy

- Potent and precise therapies could rapidly reduce tumor burden
- Designed to have clinical efficacy across the entire disease continuum including late lines

mRNA cancer vaccines

- Could eliminate polyclonal residual disease with individualized vaccines for potential long-term impact
- Polyspecific activity by targeting multiple antigens at once

ADC = antibody-drug conjugate; CAR = chimeric antigen receptor; TCR-T = T-cell receptor engineered T cell; IO = immune oncology.

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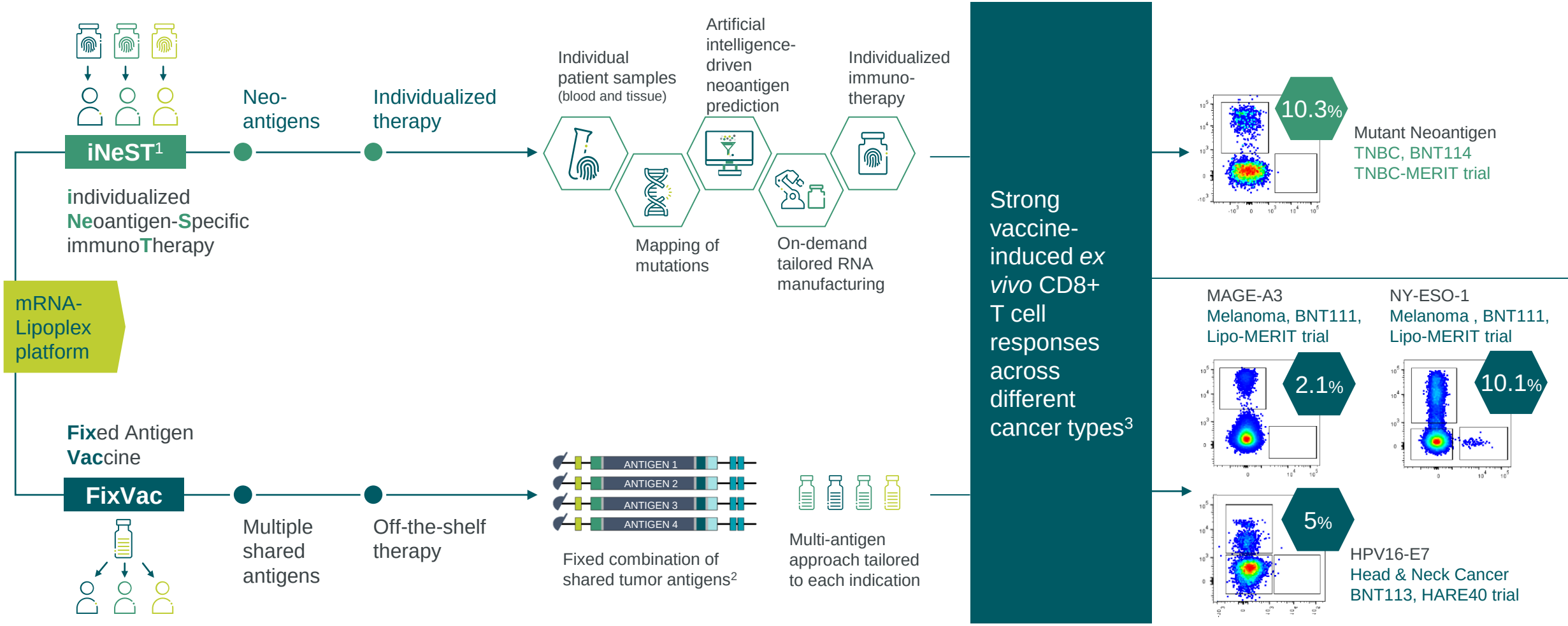
BioNTech – Full Exploration of Cancer Vaccine Target Space



1. iNeST, or autogene cevumeran (BNT122), is being developed in collaboration with Genentech, a member of the Roche Group. 2. Amount of tumor antigens varies across programs; 3. T cell responses analyzed by ex vivo multimer staining analysis in blood.
TNBC = triple-negative breast cancer; MAGE = melanoma-associated antigen; NY-ESO-1 = New York esophageal squamous cell carcinoma-1; HPV = human papillomavirus E7.

Growing Portfolio of Cancer Vaccine Candidates Across Multiple Solid Tumors

Six ongoing Phase 2 trials with cancer vaccine candidates in multiple disease settings

Individualized vaccine: iNeST[1]				**FixVac**				
Adjuvant		**1L**	**R/R**	**R/R**	**Post-adj.**	**Neo-adj, mCR**	**1L**	**Multiple settings**
CRC **Phase 2**	PDAC **Phase 2**	Melanoma **Phase 2**	Solid Tumors Phase 1	Melanoma **Phase 2**	TNBC Phase 1	Prostate Cancer Phase 1/2	HPV16+ HNSCC **Phase 2**	NSCLC Phase 1 & **2**
Autogene cevumeran (BNT122) Monotherapy	**Autogene cevumeran (BNT122)** + Atezolizumab	**Autogene cevumeran (BNT122)** + Pembrolizumab	**Autogene cevumeran (BNT122)** + Atezolizumab	**BNT111** +/- Cemiplimab	BNT114	**BNT112** Monotherapy & + Cemiplimab + ADT	**BNT113 +** Pembrolizumab vs. Pembrolizumab	**BNT116** Monotherapy & Cemiplimab or CTx
Study ongoing	Study ongoing Data presented from investigator-initiated Ph 1 study at ASCO 2022 & AACR 2024 and published (Rojas et al. Nature.2023)	Enrollment completed, study is ongoing Analysis of PFS as primary endpoint will be based on events and define when we will report results	Enrollment completed, study is ongoing Data presented at AACR 2020 Manuscript in preparation	Enrollment completed, study is ongoing Data presented from Ph1 at SITC 2021 and published (Sahin et al., Nature 2020)	Study completed Data presented at SITC 2020 Manuscript in preparation	Discontinued Data presented at SITC 2021	Study ongoing Data presented at ESMO-IO 2022	Ph 1 study in multiple settings ongoing Data presented at SITC 2023 and AACR 2024 Ph 2 study in 1L NSCLC ongoing[2]

1. Partnered with Genentech, member of Roche Group; 2. Sponsored by Regeneron.
iNeST = individualized Neoantigen Specific Immunotherapy;1L = first line; R/R = relapsed/refractory; CRC = colorectal cancer; PDAC = pancreatic ductal adenocarcinoma; TNBC = triple-negative breast cancer; HPV = human papillomavirus; HNSCC = head and neck squamous carcinoma; NSCLC = non-small cell lung cancer; ADT = androgen deprivation therapy; CTx = chemotherapy; PFS = progression-free survival; ASCO = American Society of Clinical Oncology; AACR = American Association for Cancer Research; SITC = Society for Immunotherapy of Cancer; ESMO-IO = European Society for Medical Oncology Immuno-Oncology.

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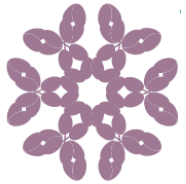
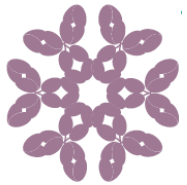
Therapeutic IO Candidates with Novel Modes of Action Across Multiple Solid Tumors

BNT316/ ONC-392[2] (gotistobart)	BNT311/ GEN1046[1] (acasunlimab)	BNT312/ GEN1042[1]	BNT313/ GEN1053[1]	BNT314/ GEN1059[1]	BNT315/ GEN1055[1]	BNT327/ PM8002[3]
Anti-CTLA4	Anti-PD-L1 Anti-4-1BB	Anti CD40 Anti-4-1BB	Anti-CD27	Anti-EpCAM Anti-4-1BB	Anti-OX40	Anti-VEGF
						
Optimized Fc	Inert Fc	Inert Fc	Inert Fc	Inert Fc	Inert Fc	Anti-PD-L1 VHH
Clinical status • Ph1/2 in multiple solid tumors • Ph2 in PROC • Ph3 in 2L+ mNSCLC	**Clinical status** • Ph1/2 in multiple solid tumors • Ph2 in mNSCLC	**Clinical status** • Ph1/2 trials in multiple solid tumors	**Clinical status** • Ph1/2 in multiple solid tumors	**Clinical status** • IND approved • FPD achieved in FIH in Q1 2024	**Clinical status** • IND approved • FIH planned	**Clinical status** • Several Ph2/3 in patients in China ongoing • Investigational New Drug Application accepted for further studies in the U.S.

Additional trial starts and data readouts planned in 2024

1. Partnered with Genmab; 2. Partnered with OncoC4; 3. Partnered with Biotheus. CTLA4 = Cytotoxic T-Lymphocyte-Associated Protein 4; CD27, CD40, 4-1BB = members of the tumor necrosis factor receptor superfamily; PDL-1 =Programmed cell death ligand 1; HER2 = human epidermal growth factor receptor 2; ADCC = Antibody dependent cell-mediated cytotoxicity; ADCP = Antibody dependent cellular phagocytosis; PROC = platinum-resistant ovarian cancer; NSCLC = non-small cell lung cancer; EC = endometrial cancer APC = antigen presenting cells; VEGF = vascular endothelial growth factor; TME = tumor microenvironment; CTx = chemotherapy; IND = investigational new drug application; FIH = first in human.

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ADC Portfolio Constructed with Thoughtful Considerations

Expression level by indication[1]

Target	NSCLC	SCLC	HER2+ BC	HR+ BC	TNBC	CRC	Gastric	Ovarian	PDAC	HNSCC	Prostate
HER2											
TROP2											
B7-H3											
HER3											

High | Medium / / Low | Very low / No-expression

Target	Program	Stage	Indications	Partner
HER2	BNT323/DB-1303[2]	Ph1/2 → Ph3	HR+ HER2-low mBC	DualityBio
		Ph1/2 → Ph2	HER2-expressing mEC, 2L+	
		Ph1/2	Solid tumors with HER2 expression	
TROP2	BNT325/DB-1305[2]	Ph1/2	Solid tumors	DualityBio
B7H3	BNT324/DB-1311[2]	Ph1/2	Solid tumors	DualityBio
HER3	BNT326/YL202	Ph1/2	Solid tumors	MediLink[3]

Advanced asset on path to registration

- BNT323/DB-1303[2] in multiple pivotal studies

Unique indication selection strategy

- Four clinical stage ADCs with broad, yet minimal overlapping, indication opportunities
- Innovative trial designs planned to open leapfrog path
- Fast-follower potential in large indications

Wider therapeutic window may enable novel combinations in earlier lines

- ADC combinations that are based on non-overlapping tumor antigens and different payload MoAs

1. RNAseq data from AACR Project GENIE; 2. Partnered with DualityBio; ADC = antibody-drug conjugate; MoA = mode of action; HR = hormone receptor; HER2/3 = human epidermal growth factor receptor 2/3; TROP2 = trophoblast cell-surface antigen; (N)SCLC = (non-)small cell lung cancer; BC = breast cancer; TNBC = triple-negative breast cancer; CRC = colorectal cancer; PDAC = pancreatic ductal adenocarcinoma; HNSCC = head and neck squamous cell carcinoma; EC = endometrial cancer.

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Investing in Our Oncology Growth Through 2030

Mid- and late-stage programs

- BNT323/DB-1303[1]
- BNT316/ONC-392 (gotistobart)[2]
- BNT311/GEN1046 (acasunlimab)[3]
- BNT327/PM8002[4]
- autogene cevumeran/BNT122[5]
- BNT113
- BNT211

2024

Aiming for **10+** potentially registrational trials by end of 2024

Multiple clinical updates planned for 2024

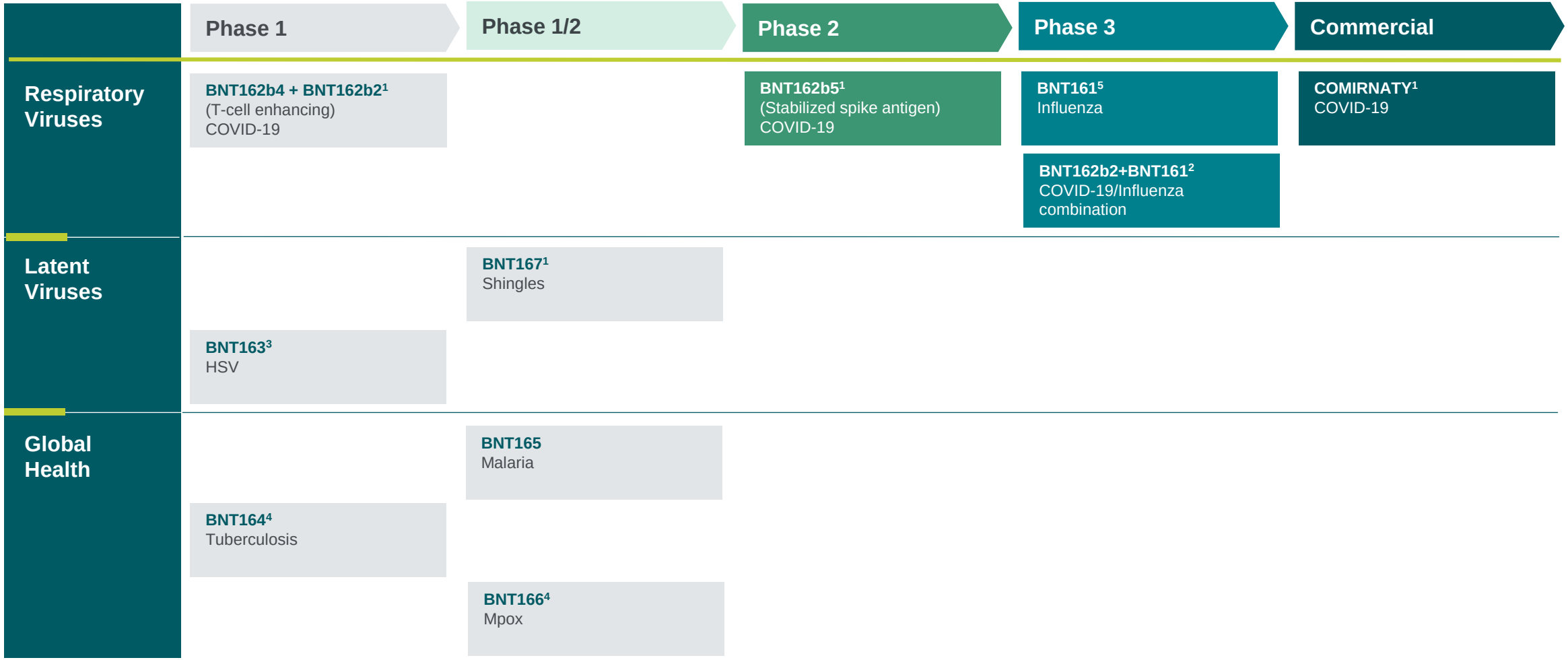
Targets[6]

Yearly oncology launches planned from 2026 onwards

Goal of 10 indication approvals in oncology by 2030

1. Partnered with DualityBio; 2. Partnered with OncoC4; 3. Partnered with Genmab; 4. Partnered with Biotheus; 5. Partnered with Genentech, a member of the Roche group. 6. These targets are subject to the timing and successful outcome of clinical development, and regulatory approvals.

Broad Infectious Disease Pipeline Built on Versatile mRNA Technology



1. Partnered with Pfizer; 2. Collaboration with Pfizer and subject to reaching agreement with our partners; 3. Collaboration with University of Pennsylvania; 4. In collaboration with Bill & Melinda Gates Foundation; 5. Exclusive license to Pfizer.
HSV = Herpes simplex virus.
Please find current product information for Comirnaty at https://www.ema.europa.eu/en/documents/product-information/comirnaty-epar-product-information_en.pdf and https://www.fda.gov/media/151707/download.

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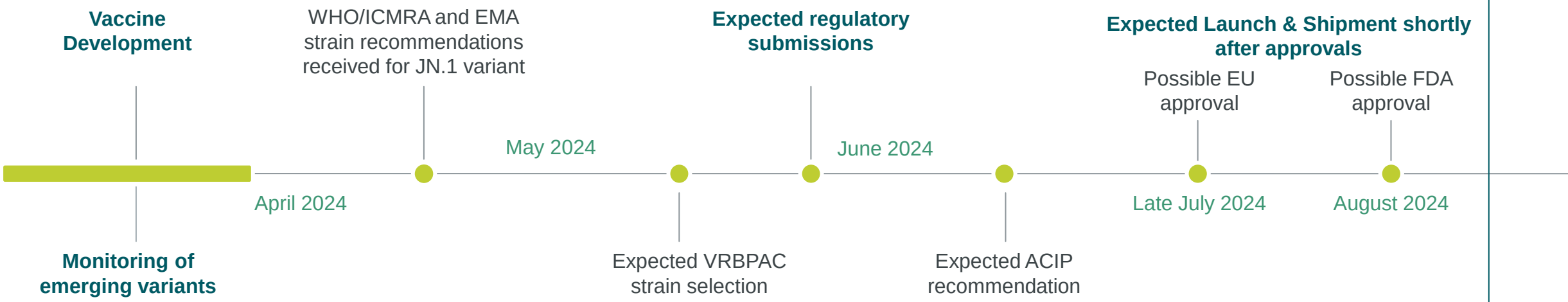
COVID-19 Vaccine Market Dynamics and Outlook[1]

Potential expedited timeline for variant-adapted vaccine development



Planning for:

Late summer launch in over 80 geographies of 2024 seasonally adapted vaccine[2]

Opening of private markets in selected geographies

Significant increases in supply of pre-filled syringe doses

1. Partnered with Pfizer. 2. Subject to regulatory approvals.
WHO = World Health Organisation; ICMRA = International Coalition of Medicines Regulatory Authorities; EMA = European Medicines Agency; VRBPAC = Vaccines and Related Biological Products Advisory Committee; ACIP = Advisory Committee on Immunization Practices; FDA = Food and Drug Administration.

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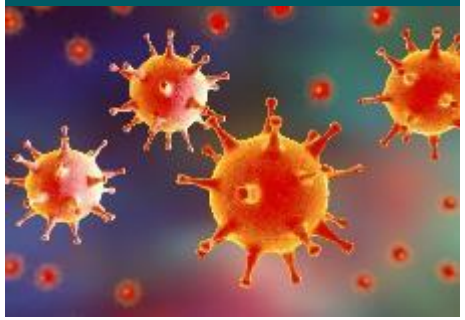
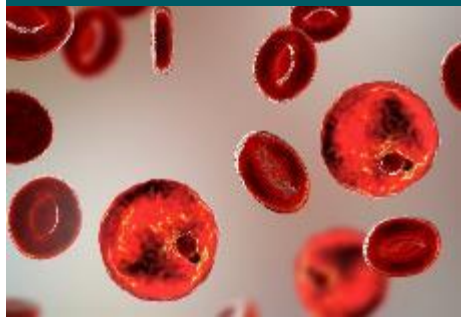
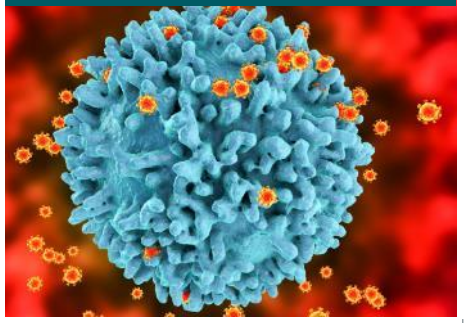
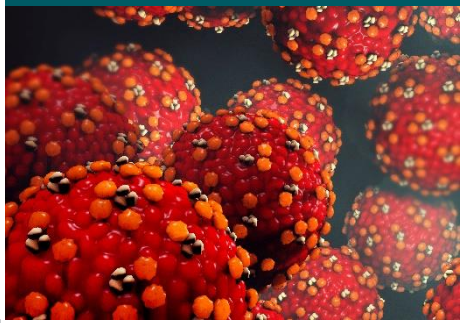
Infectious Diseases: Important Growth Area Addressing High Medical and Global Health Need[1]

HSV	Malaria	Tuberculosis	Mpox	Shingles
				
3.7 billion people under age 50 globally infected with HSV-2 **~491 million** people aged 15-49 infected with HSV-1 worldwide	**~249 million cases** in 2022 **608,000 deaths** in 2022 in 85 countries **Children under 5 accounted for 80%** of all malaria deaths	**10.6 million cases** globally in 2022 **1.3 million deaths** globally in 2022 **2nd leading infectious killer** after COVID-19	**95,000 cases** during 22/24 outbreak[2] WHO warning about **high risk** for the general population **in DRC.**	Individuals who live to 85 years old have **~50% risk** of developing shingles[3] Incidence and severity of shingles **rise with age**, with a marked increase after age 50[4]

Additional preclinical programs to advance to the clinic in 2024 / 2025

1. All figures are from World Health Organization fact sheets unless otherwise referenced https://www.who.int/news-room/fact-sheets (accessed January 04 2024); 2. WHO 2022-24 Mpox outbreak: global trends accessed 09 May 2024 . https://worldhealthorg.shinyapps.io/mpx_global 3. Pan CX, et al. Ther Adv Vaccines Immunother. 2022; 4. Piot P. et al. Nature. 2019.
WHO = World Health Organization; HSV = Herpes Simplex Virus; DRC = Democratic Republic of the Congo.

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2024 Financial Year Guidance[1]

		FY 2024 Guidance
FY 2024 revenues	Total revenues	**€2,500 – €3,100 m**
FY 2024 expenses, operating income and capex[4]	R&D expenses[2]	**€2,400 – €2,600 m**
	SG&A expenses[3]	**€700 – €800 m**
	Capital expenditure for operating activities	**€400 – €500 m**
Revenue guidance considerations: Top-line sensitivity mainly dependent on the following factors	• Vaccination rates and price levels in markets where significant Comirnaty sales are expected • Inventory write-downs • Anticipated revenues related to service businesses, including InstaDeep, JPT Peptide Technologies, IMFS and from the German pandemic preparedness agreement	

1. Excluding external risks that are not yet known and/or quantifiable, including, but not limited to, the effects of ongoing and/or future legal disputes or related activity.
2. Numbers include effects identified from additional in-licensing arrangements, collaborations or potential M&A transactions to the extent disclosed and are subject to update due to future developments.
3. Anticipated expenses related to external legal advice in connection with legal litigations is not reflected in SG&A but in other operating expenses for the 2024 financial year. Guidance does not include and may be impacted by potential payments resulting from the outcomes of ongoing or future legal disputes or related activity, such as judgments or settlements.
4. The Company does not expect to report a positive net income figure for the 2024 financial year and expects the majority of our 2024 global revenues for Comirnaty to be recorded in the second half of the year.
IMFS = BioNTech's Innovative Manufacturing Services

Profitable COVID-19 Vaccine Business Supports Investment in Growth Drivers

COVID-19 Vaccine Business – major value contributor	Innovative Oncology Pipeline – potential future value driver
FY 2023 • Revenue of €3.8 bn • Gross Profit of €3.2 bn • COVID-19 associated R&D costs ~ €0.3 bn • S&M costs < €0.05 bn • COVID-19 vaccine business with lean cost structure expected to generate positive cash flows going forward	• Aiming for 10+ potentially registrational trials ongoing by the end of 2024 • First potential oncology launch estimated for 2026 • Diversified clinical pipeline offers multiple potential growth opportunities for the years to come

COVID-19 vaccine franchise and innovative oncology pipeline driving long-term value creation

Innovative and Diversified Pipeline Poised to Drive Long-Term Growth

Investing in innovative therapies across drug classes with blockbuster potential

Drug Class	Data Update(s) Expected in 2024 or 2025	Potential First Submission Year	Potential Market Opportunity[1]
mRNA cancer vaccines	✓	**2027**	Establish new pillar of individualized and off-the-shelf treatments with potential to address adjuvant and metastatic stage cancers, incl. CRC, PDAC, melanoma and NSCLC
Immunomodulators	✓	**2027**	Multiple potential next generation checkpoint immunomodulator backbones with potential to address NSCLC, HNSCC, TNBC, and SCLC
ADCs	✓	**2026**	Multiple fast follower and first-to-market opportunities with potential to address BC, NSCLC, EC, and PROC patients
Cell Therapies[2]	✓	**2027**	First-in-class potential for CAR-T + mRNA vaccine combination therapy with potential to address CLDN6+ testicular, ovarian and lung cancers
Infectious Disease (Non-COVID)	✓	**2028**	Infectious Disease vaccines with potential to address shingles, HSV, malaria, TB, mpox and HIV

1. Listed indications reflect indications currently included in ongoing or planned clinical trials conducted by BioNTech or partners, including some indications only in Phase 1/2 clinical trials. Potential commercial opportunities of investigational programs are subject to the timing and successful outcome of clinical development, regulatory approval, and commercialization. BNT programs considered in each drug class: mRNA cancer vaccines: autogene cevumeran (BNT122), BNT116, BNT111, BNT113; Immunomodulators: BNT316, BNT311, BNT312, BNT327, BNT321; Antibody Drug Conjugates (ADCs): BNT323, BNT325, BNT324, BNT326; Cell Therapies: BNT211; Non-Covid ID: BNT163, BNT164, BNT165, BNT166, BNT167.

Investing Through Waves of Innovation with the Aim to Transform Medicine

Near Term

10+ mid- to **late-stage trials** in **2024**

Build out **commercial organization** ahead of potential launches

Mid Term

1st wave of **oncology launches** planned from **2026** onwards

Unlock value with **initial combination trials**

Long Term

Goal of **10 indication approvals** in oncology by **2030**

Initial launches of **2nd wave** products

Expanding across indication and treatment lines

Multi-product immunotherapy Company

Contact: Investors@biontech.de

Appendix

Advancing our Pipeline: Select Data Milestones in 2024

	Program	Indication	Targeted Milestone
Oncology	BNT311/GEN1046 (acasunlimab)[1]	R/R met. NSCLC, +/- pembrolizumab	Phase 2 data
	BNT312/GEN1042[1]	Multiple solid tumors	Ph1/2 expansion cohort data
	BNT316/ONC-392 (gotistobart)[2]	Multiple solid tumors	Ph1/2 expansion cohort data
	BNT323/DB-1303[3]	Multiple solid tumors	Ph1/2 expansion cohort data
	BNT325/DB-1305[3]	Multiple solid tumors	Ph1/2 data
	BNT327/PM8002[4]	Multiple solid tumors	Phase 2 data
Infectious Disease	BNT162b2[5]	COVID-19, Omicron XBB.1.5 monovalent vaccine	Phase 2/3 data
	BNT167[5]	Shingles	Phase 1 trial update

1. Partnered with Genmab; 2. Partnered with OncoC4; 3. Partnered with DualityBio; 4. Partnered with Biotheus; 5. Partnered with Pfizer.
NSCLC = non-small cell lung cancer, R/R = relapsed/refractors.

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