MARKER THERAPEUTICS
CORPORATE PRESENTATION

December 2024

NASDAQ: MRKR

MARKER Therapeutics

Forward Looking Statements

Certain statements contained herein are forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended, and Section 27A of the Securities Act of 1933, as amended, that involve risks and uncertainties. All statements other than statements relating to historical matters including statements to the effect that we "believe", "expect", "anticipate", "plan", "target", "intend" and similar expressions, including without limitation statements regarding Marker Therapeutics, Inc.'s ("Marker" or the "Company") intentions, beliefs, projections, outlook, analyses or current expectations are "forward-looking statements". Forward-looking statements include statements concerning, among other things: the Company's research, development and regulatory activities and expectations relating to its non-engineered multi-tumor associated antigen (multiTAA)-specific T cell therapies; the effectiveness of the Company's programs or the possible range of application and potential curative effects and safety in the treatment of diseases; the timing, conduct and success of the Company's clinical trials of its product candidates, including MT-401 for the treatment of patients with Acute Myeloid Leukemia ("AML") or Myelodysplastic Syndrome ("MDS"), MT-401 Off-the-Shelf ("OTS") for the treatment of patients with AML, and MT-601 for the treatment of patients with relapsed lymphoma; the Company's long-term stability and cash runway; the Company's optimized manufacturing process; and the future development of multiTAA-specific T cells. Forward-looking statements are by their nature subject to risks, uncertainties and other factors which could cause actual results to differ materially from those stated in such statements. Such risks, uncertainties and factors include, but are not limited to the risks set forth in the Company's most recent Forms 10-K, 10-Q and other SEC filings which are available through EDGAR at WWW.SEC.GOV. No representation or warranty (expressed or implied) is made as to, and no reliance should be placed on, the fairness, accuracy or completeness of the information contained herein. Accordingly, none of the Company, or any of its principals, partners, subsidiaries or affiliates, or any of such person's board members, officers or employees accepts any liability whatsoever arising directly or indirectly from the use of this presentation. Certain information set forth herein includes estimates, projections and targets and involves significant elements of subjective judgement and analysis, which may or may not be correct. No representations are made as to the accuracy of such estimates, projections or targets or that all assumptions relating to such estimates, projections or targets have been considered or stated or that such estimates, projections or targets will be realized. This presentation does not purport to contain all of the information that may be required to evaluate the Company and any recipient hereof should conduct its own independent analysis of the Company and the data and information contained herein. Any forward-looking statements are not guarantees of future performance and actual results may differ materially from estimates in the forward-looking statements. Unless otherwise stated, all information in this presentation is as of the date of the cover page of this presentation, and the Company undertakes no obligation to revise these forward-looking statements to reflect events or circumstances that arise after the date hereof.

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Chief Medical Officer

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Head of Regulatory Affairs

Patricia Allison
Head of Clinical Operations

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The University of Texas MD Anderson Cancer Center

Marker Therapeutics – Value Proposition

MAR-T Cell Platform

MAR-T (Multi-Antigen Recognizing T cell, formerly known as multiTAA) technology was developed at Baylor College of Medicine and, we believe, offers key therapeutic and manufacturing advantages over traditional T cell therapies

MT-601 - APOLLO Study

MT-601 in Phase 1 clinical trial has shown 78% response rates in patients with lymphoma who relapsed after anti-CD19 CAR-T cells or where CAR-T cell therapy is not an option

Attractive Safety Profile

MAR-T cells are non-genetically engineered and were well-tolerated in clinical trials to date, with a favorable safety profile and no observation of immune-effector cell associated neurotoxicity syndrome (ICANS) attributed to MAR-T cell technology

Multiple INDs & Strong IP Position

FDA cleared INDs for three MAR-T based clinical programs

Strong IP position and world-wide exclusive license on MAR-T technology from Baylor College of Medicine

MT-601 – Lead Clinical Product

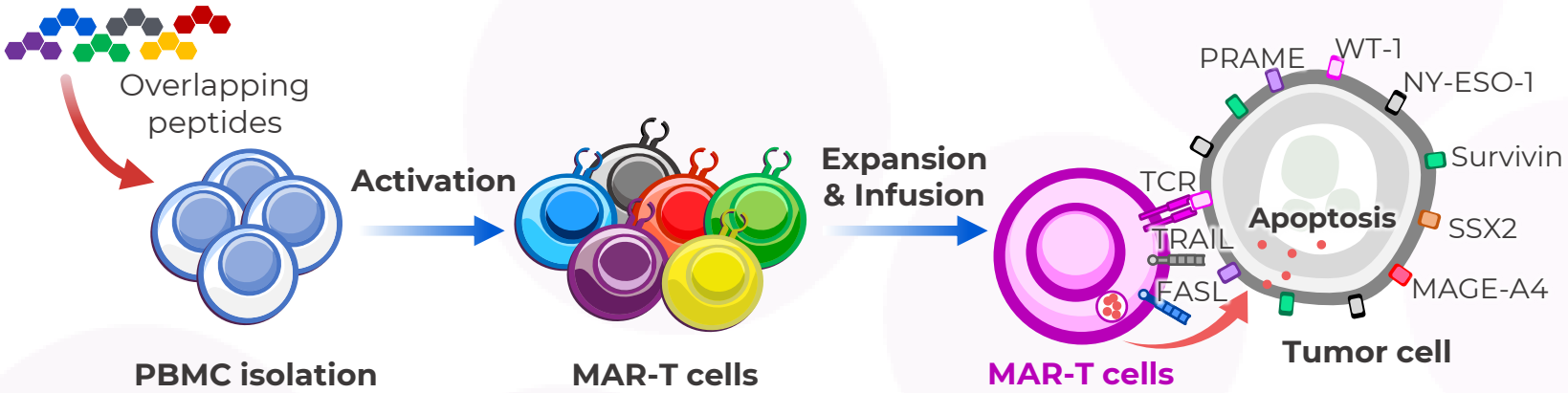
Marker's lead product, MT-601, targets 6 tumor-specific antigens (Survivin, PRAME, NY-ESO-1, MAGE-A4, SSX2, WT-1) for a broad tumor recognition

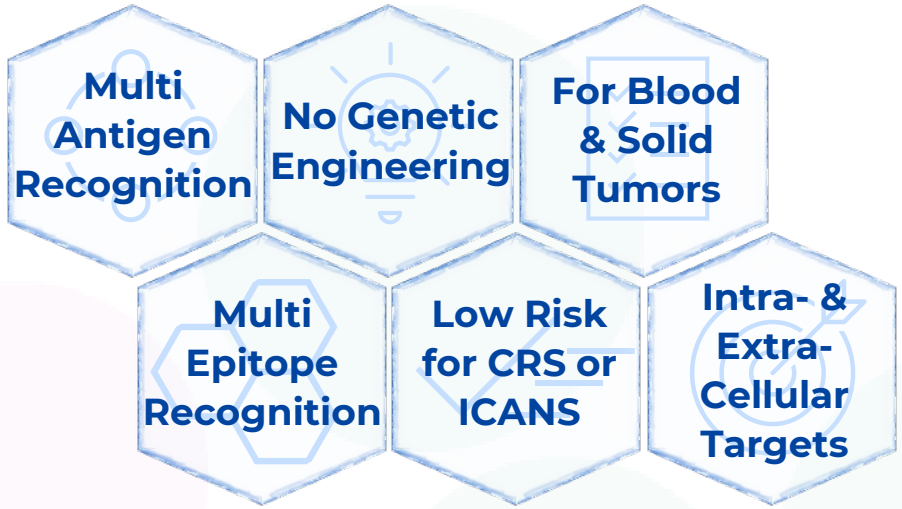
Cash Position & Balance Sheet

Ongoing efforts to obtain non-dilutive funding; to date Marker was awarded over $30 million non-dilutive funding (NIH, FDA, CPRIT)

MAR-T Technology

Mechanism of Action of MAR-T Cells



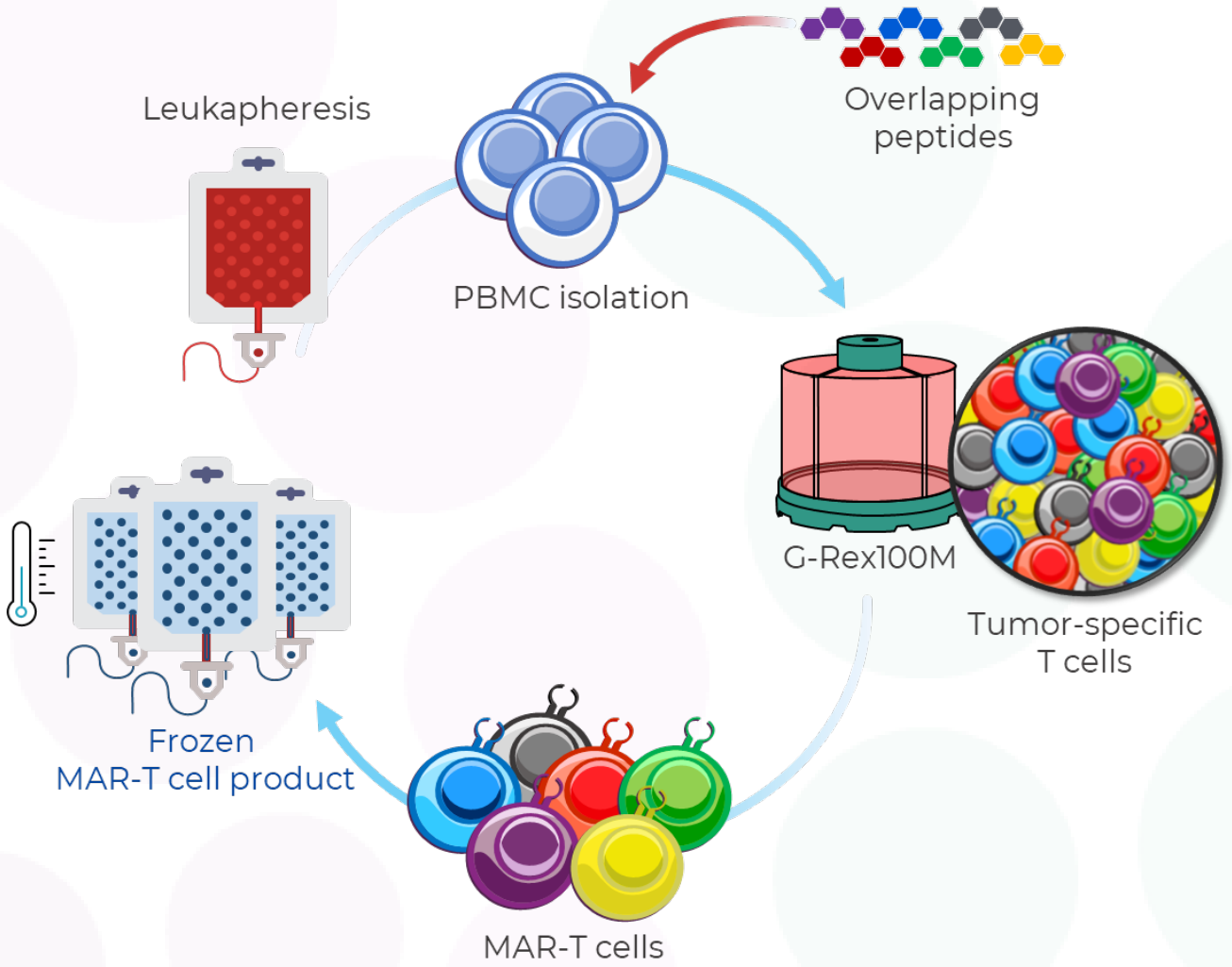


- MAR-T cells recognize up to 6 antigens[1, 2] for a more potent, durable anti-tumor response.
- MAR-T cells lack genetic modification; Natural T cells expanded ex vivo pose no mutagenesis risk.
- MAR-Ts intend to address challenges faced by Bispecific Antibodies, CAR-T and TCR approaches.
- MAR-T platform technology developed at Baylor College of Medicine.

(1) MT-601 targets six tumor antigens (Survivin, PRAME, NY-ESO-1, WT-1, MAGE-A4, SSX2).
(2) MT-401 targets four tumor antigens (Survivin, PRAME, NY-ESO-1, WT-1).

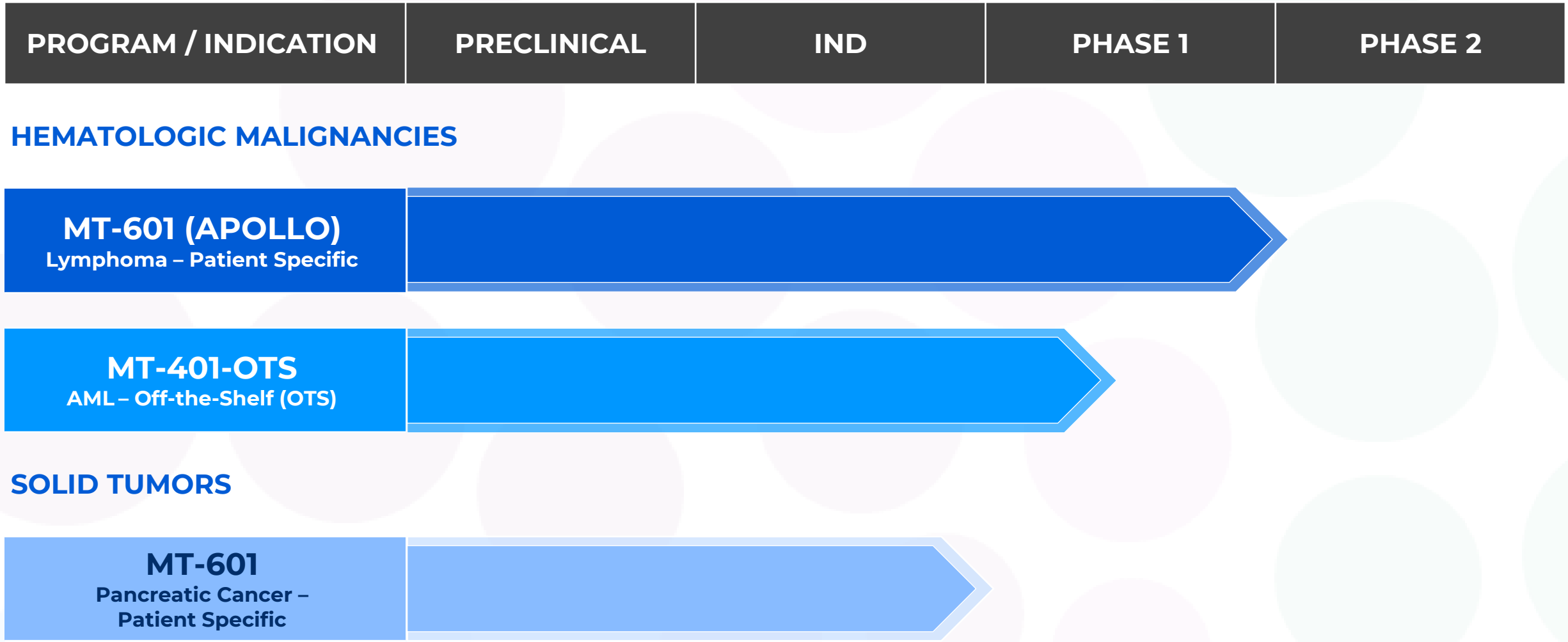
MAR-T Cells are Generated in a Simple Manufacturing Process

- **Lack of genetic engineering**
- **Natural T cell expansion**
- **Uninterrupted cell expansion**
- **Reproducible process**
- **Cost-effective process**

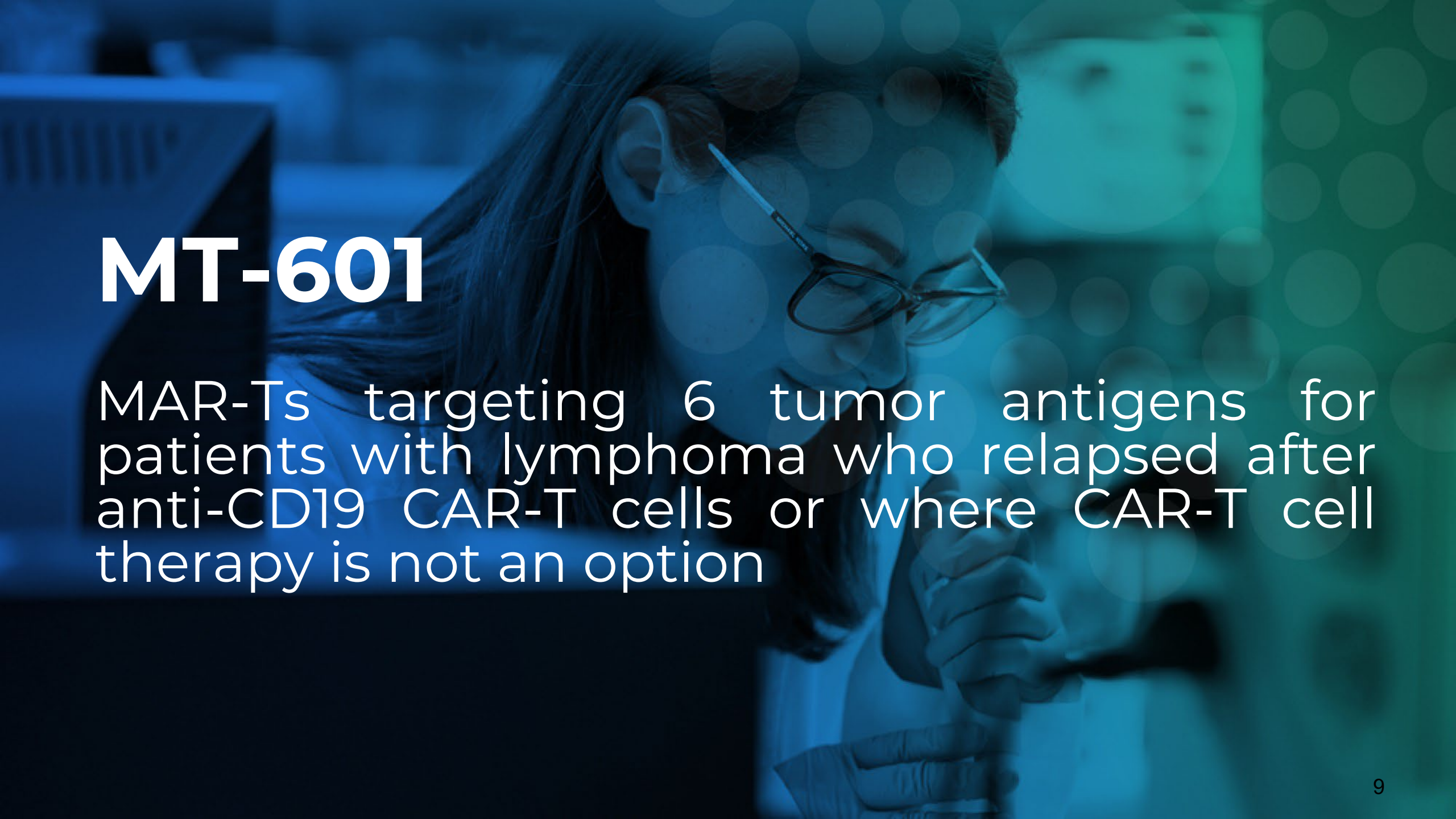


PBMC, peripheral blood mononuclear cells.

MAR-T Pipeline for Hematologic Malignancies and Solid Tumors



AML, Acute Myeloid Leukemia.



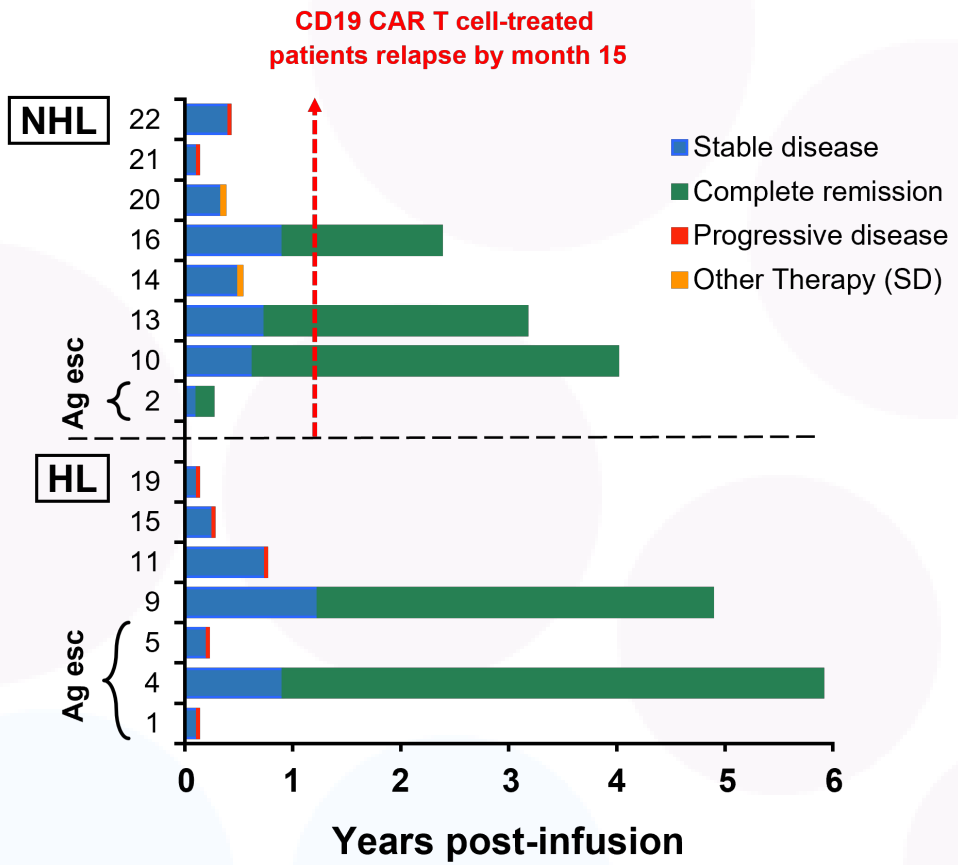
MT-601

MAR-Ts targeting 6 tumor antigens for patients with lymphoma who relapsed after anti-CD19 CAR-T cells or where CAR-T cell therapy is not an option

Previous Phase 1 Study using MAR-Ts Showed Durable Responses in Patients with Lymphoma

Durability of Response

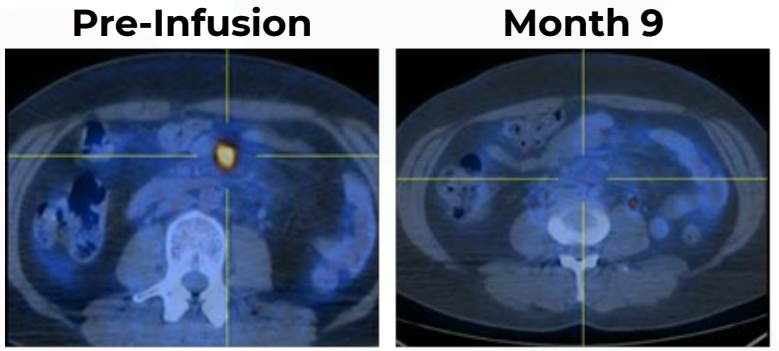
MAR-Ts (targeting 5 tumor antigens) showed durable Complete Responses



HL: Hodgkin's Lymphoma; NHL: Non-Hodgkin's Lymphoma

Potent and Specific

MAR-Ts have shown potent and specific anti-tumor activity



- Study conducted at Baylor College of Medicine
- MAR-Ts targeting 5 tumor-specific antigens
- Excellent Safety Profile
- Lack of CRS and ICANS
- Durable Complete Responses for up to 5 years

Vasileiou S et al. J Clin Oncol 2021.

MT-601 is an Optimized MAR-T Cell Product

BAYLOR STUDY

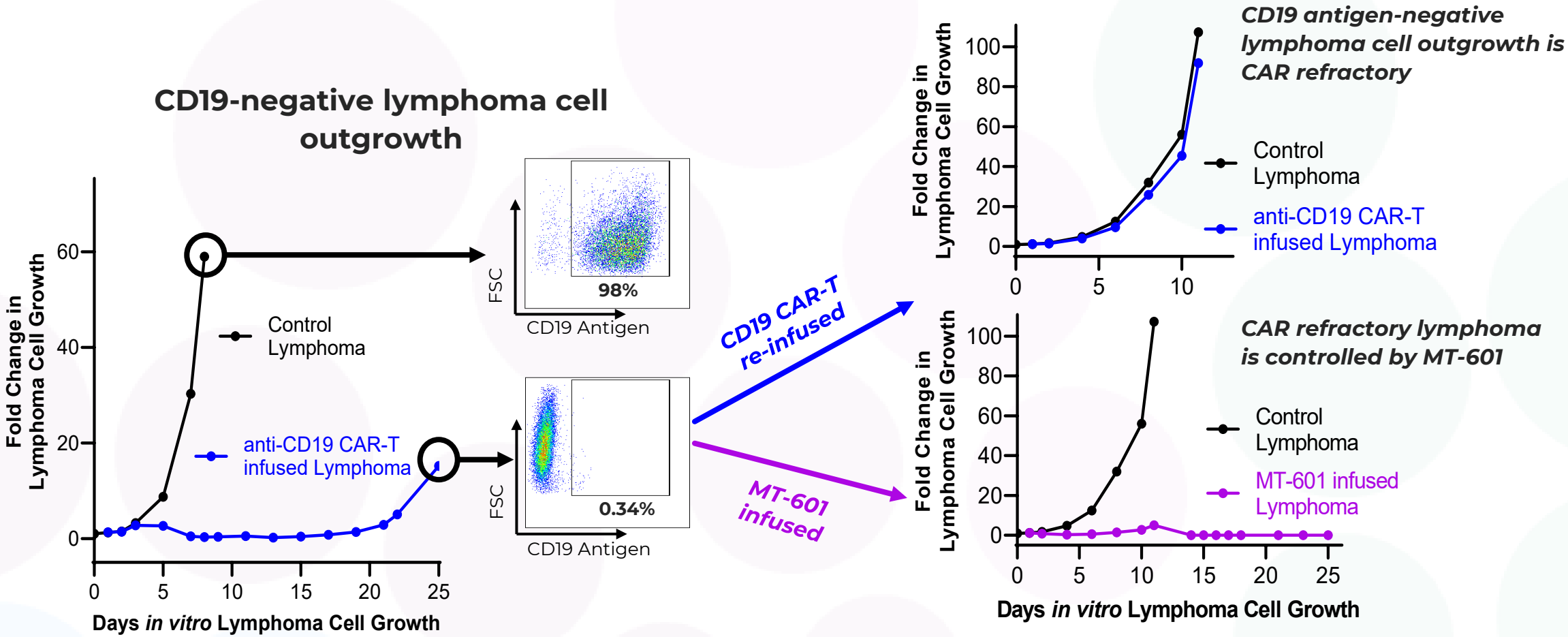
- Study at Baylor College of Medicine targeted **5 tumor antigens** with durable responses for up to 5 years without CRS or ICANS[1]
- Cell Dose: $50x10^6$ – $100x10^6$
- Manufacturing Process:
  - Average Potency: 77 SFU/ $2x10^5$ cells

MARKER'S MT-601 STUDY

- **Broader Target Specificity**: Marker's process targets **6 tumor antigens**
- Higher Cell Dose: $200x10^6$ – $400x10^6$
- Improved Manufacturing Process:
  - 4x increased potency (Average Potency: 1,200 SFU/ $2x10^5$ cells)

[1] *Vasileiou S et al. J Clin Oncol 2021. TACTAL study, ClinicalTrials.gov Identifier: NCT01333046.*

MT-601 Demonstrates Anti-Tumor Activity in CAR Relapsed Lymphoma Cells *In Vitro*



MT-601 kills CD19 CAR-T refractory lymphoma cells

Study Participants show Early Objective Responses

At first response assessment, 7 out of 9 patients achieved objective responses (78%) with 4 patients demonstrating complete response (CR; 44.4%)

MT-601 shows objective responses at first disease assessment*

Longest Follow-Up	No. of Patients	Clinical Response
≥ 12 months	1	CR
≥ 6 months	2	CR, PR
1-4 months	4	CR, PR

Duration of patient follow-up in Phase 1 APOLLO study*

No. of Patients Treated*	No. Prior Lines of Therapy	Response Rate at First Assessment	CR at First Assessment
9	3 - 12	78%	44.4%

*CR, Complete Response; PR, Partial Response; * Data as of September 10, 2024.*

Future Developments

MT-401-OTS & MT-601 – Advancing Allogeneic and Solid Tumor Programs

MT-401 Off-the-Shelf

- Manufactured from healthy donors; Marker has cellular inventory with plans to expand
- PoC studies completed with data supporting clinical benefits of technology
- IND to investigate MT-401 in an “Off-the-Shelf” setting (MT-401-OTS) in AML or Myelodysplastic Syndrome (MDS) granted by FDA
- Orphan Drug Designation granted by FDA and the European Medicines Agency (EMA)
- Non-dilutive funding from FDA, CPRIT and NIH to support clinical investigation of MT-401-OTS in patients with AML

MT-601 in Pancreatic Cancer

- FDA has granted an IND to investigate MT-601 in patients with metastatic pancreatic cancer in combination with front-line chemotherapy
- Clinical advancement pending on additional financial support from non-dilutive grant activities

PoC, Proof-of-Concept.

Key Takeaways

In contrast to single antigen-targeting T cell therapies, MAR-Ts target multiple epitopes within up to 6 tumor-specific antigens, thereby reducing the possibility of tumor escape

MAR-Ts do not require genetic engineering

APOLLO study highlights:

- MT-601 was well-tolerated with no signs of ICANS.
- First dose cohort: 7 out of 9 patients (78%) achieved objective responses at first response assessment, with 4 complete responses.

THANK YOU

MARKER Therapeutics