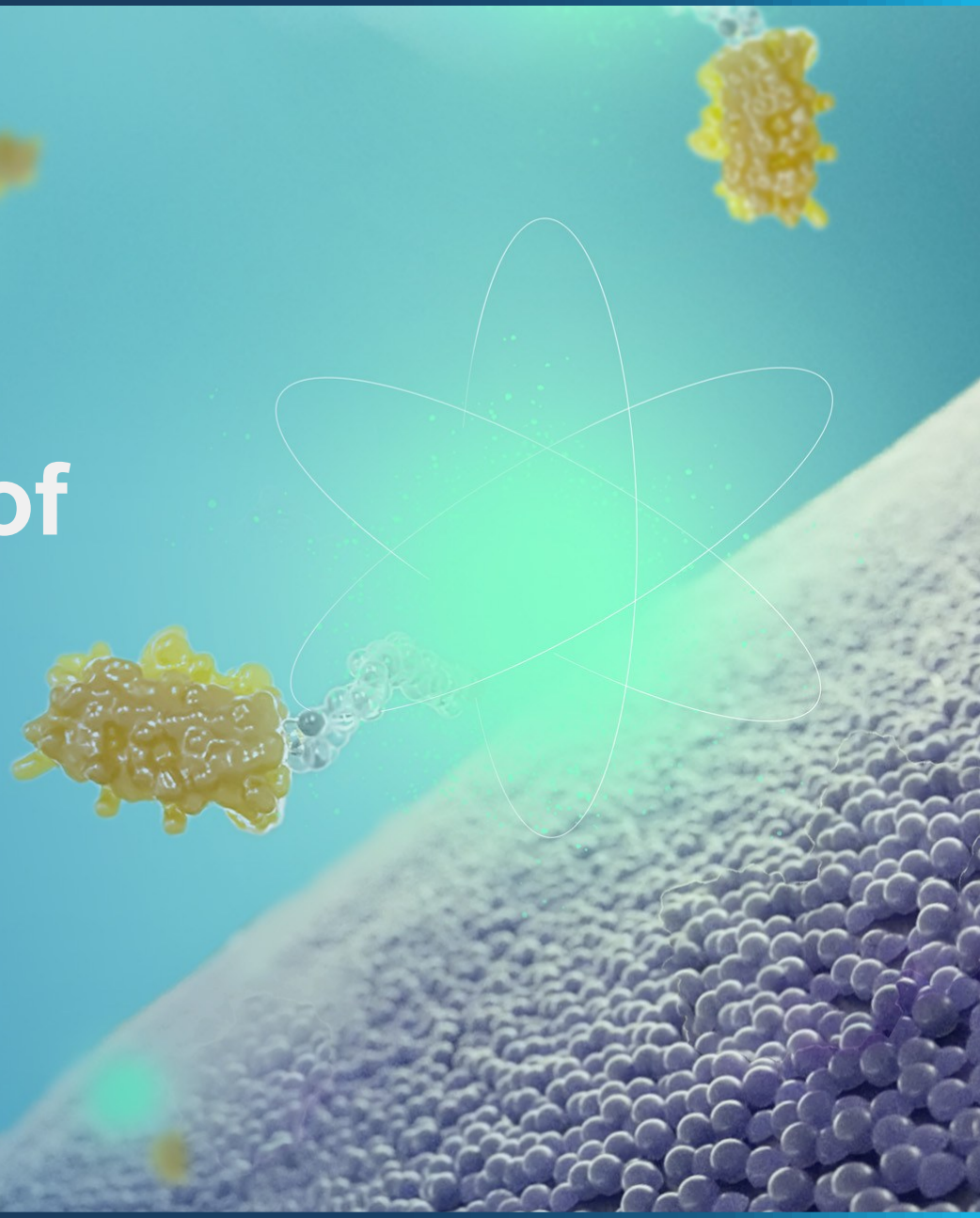
MOLECULAR partners

Extending the Boundaries of Targeted Cancer Therapies

Company Presentation & H1 Financials

Patrick Amstutz, CEO

August 25, 2026



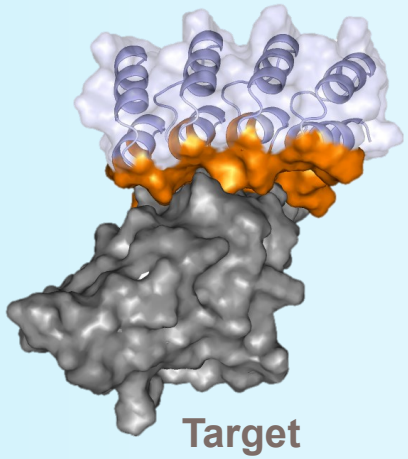
Disclaimer

This presentation contains forward looking statements. Any statements contained in this presentation that do not describe historical facts may constitute forward-looking statements as that term is defined in the Private Securities Litigation Reform Act of 1995, as amended, including without limitation: implied and express statements regarding the clinical development of Molecular Partners' current or future product candidates; expectations regarding timing for reporting data from ongoing clinical trials or the initiation of future clinical trials; the potential therapeutic and clinical benefits of Molecular Partners' product candidates and its RDT and Switch-DARPin platforms; the selection and development of future programs; Molecular Partners' collaboration with Orano Med including the benefits and results that may be achieved through the collaboration; and Molecular Partners' expected business and financial outlook, including anticipated expenses and cash utilization for 2026 and its expectation of its current cash runway. These statements may be identified by words such as "aim", "anticipate", "expect", "guidance", "intend", "outlook", "plan", "potential", "will" and similar expressions, and are based on Molecular Partners' current beliefs and expectations. These statements involve risks and uncertainties that could cause actual results to differ materially from those reflected in such statements. Some of the key factors that could cause actual results to differ from Molecular Partners' expectations include, but are not limited to, those set forth in under the heading "Risk Factors" in Molecular Partners' Annual Report on Form 20-F for the year ended December 31, 2025 and other filings Molecular Partners makes with the SEC from time to time. These documents are available on the Investors page of Molecular Partners' website at www.molecularpartners.com. In addition, this presentation contains information relating to interim data as of the relevant data cutoff date, results of which may differ from topline results that may be obtained in the future.

Any forward-looking statements speak only as of the date of this presentation and are based on information available to Molecular Partners as of the date of this release, and Molecular Partners assumes no obligation to, and does not intend to, update any forward-looking statements, whether as a result of new information, future events or otherwise.

Extending the Boundaries of Targeted Cancer Therapies

DARPin
Designed Ankyrin Repeat Protein



Our Company

- Clinical-stage biotech company, founded 2004
- Operations & listing in Switzerland (SIX, 2014) and US (Nasdaq, 2021)
- Financed (USD ~84 M / CHF ~68 M*) to capture upcoming catalysts into late 2027

Our Capabilities

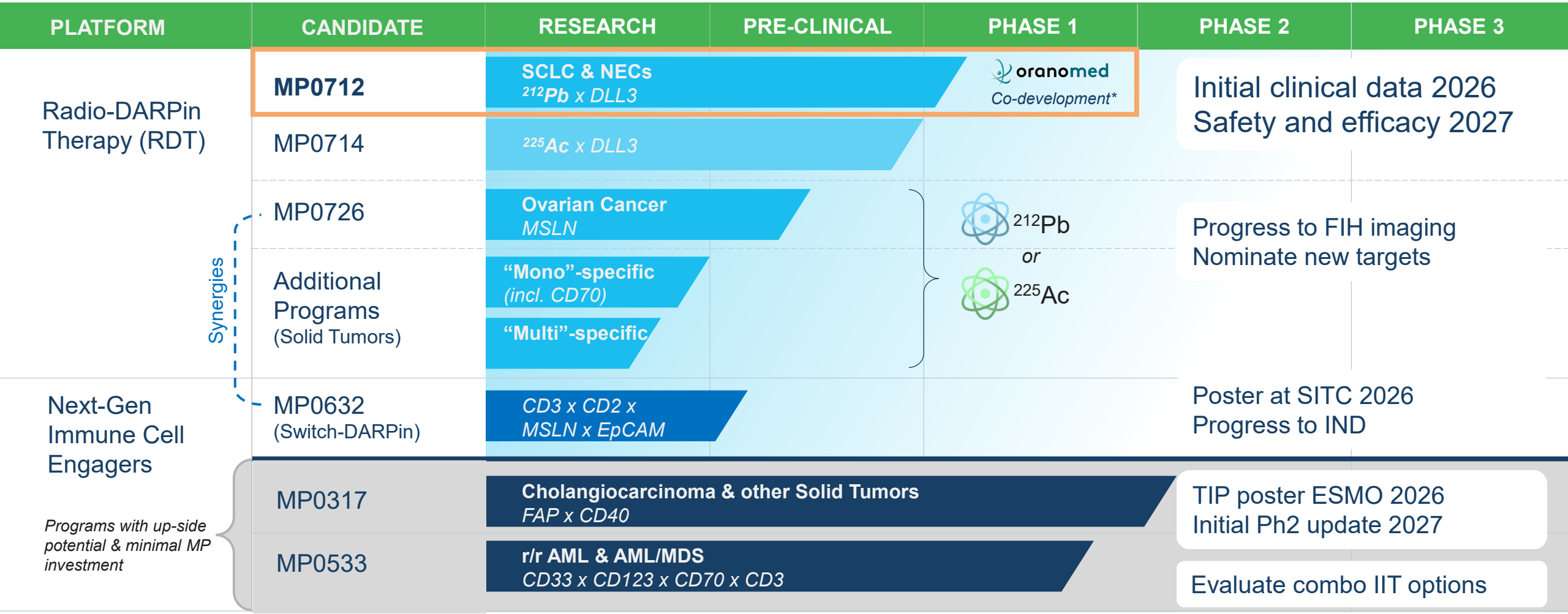
- **DARPin therapeutics**: novel class of medicines, proprietary & clinically-validated
- Strong team to innovate and execute up to clinical POC
- Partnerships with world-class experts to maximize patient value

Our Pipeline

- **Radio-DARPins as isotope-agnostic vector for targeted alpha therapeutics**
- Switch-DARPins for logic-gated, next-gen immune cell engagers
- Early clinical readouts for patient value across indications with high unmet need

*Financials as of June 30, 2026.
POC, proof of concept.

Our Pipeline & Upcoming Catalysts



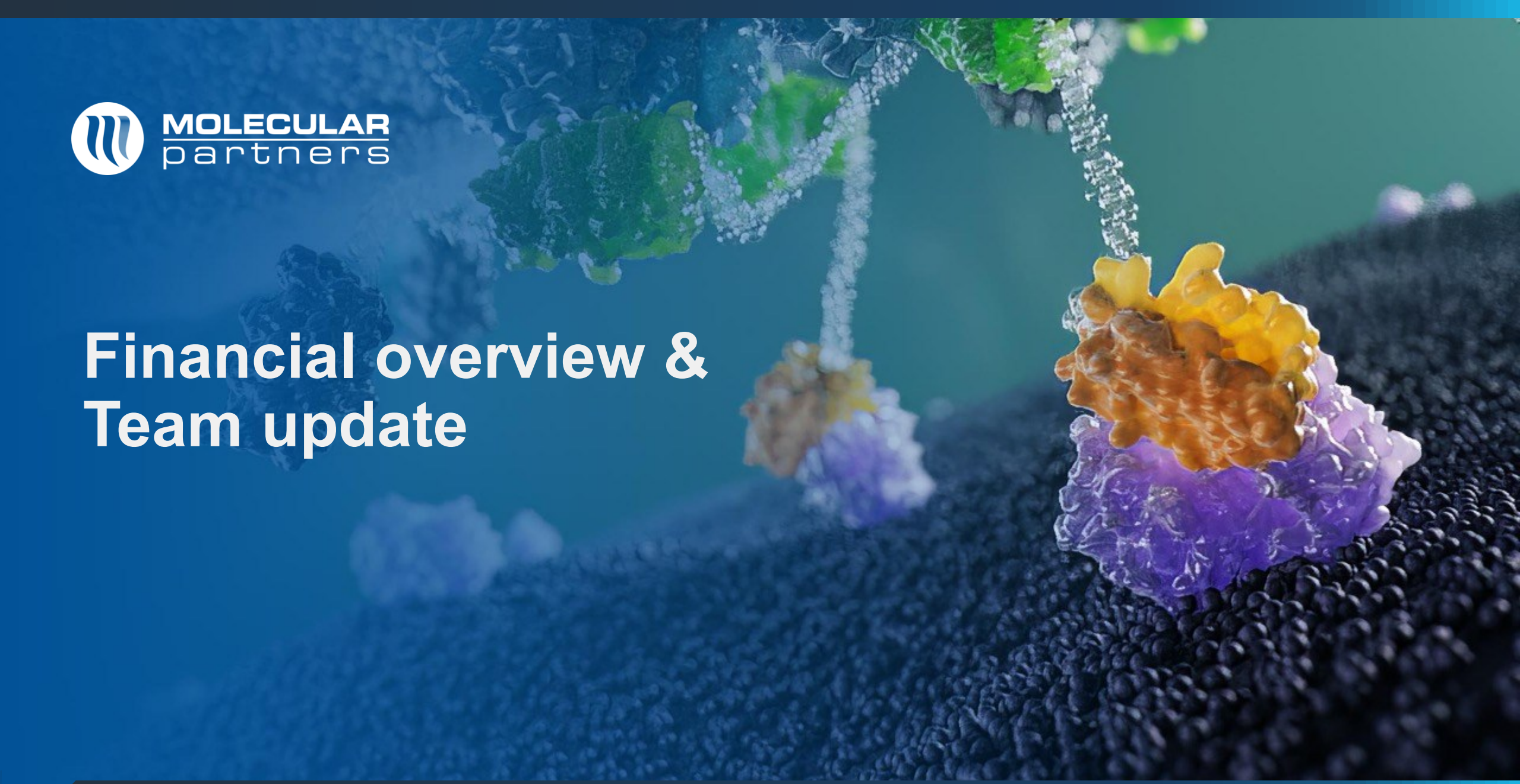
*The co-development agreement with Orano Med includes up to 10 targeted radiotherapy programs, including MP0712 and MP0726.

AML, acute myeloid leukemia; DLL3, Delta-like ligand 3; EpCAM, epithelial cell adhesion molecule; FIH, first in human; IIT, investigator-initiated trial; IND, investigational new drug; MDS, myelodysplastic syndrome; MSLN, mesothelin; NEC, neuroendocrine cancer; r/r, relapsed/refractory; SCLC, small cell lung cancer; TIP, trial in progress.

Corporate Highlights H1 2026

MP0712	• **Initiated US Phase 1/2a study of MP0712, ^{212}Pb-based DLL3-targeting Radio-DARPin candidate** for SCLC and other neuroendocrine cancers; dose level (DL1) fully recruited, DL2 now open • **Precise targeting of tumor lesions in patients** shown with ^{203}Pb-labeled MP0712 (TWC 2026)
Radio-DARPin Therapy (RDT)	• NuMeRI initiated early-access clinical program with MP0714 (DLL3 DARPin x ^{225}Ac) in South Africa • CD70 selected as new RDT target • **Isotope-agnostic** DARPins support interchangeability of therapeutic payloads (RDS 2026) • Development and supply agreements signed with Eckert & Ziegler and PanTera, respectively
MP0317	• **Started Phase 2 randomized IIT** of tumor-localized CD40 agonist MP0317 for cholangiocarcinoma
MP0533	• Mutation-agnostic clinical benefit of novel TCE MP0533 for AML presented at ASH 2025
Switch-DARPin	• **MP0632 selected as lead candidate**, pre-clinical logic-gated T cell activation presented at AACR 2026
Operations	• **Cash position** of USD ~84 M / CHF ~68 M* funds operations into late 2027 • Clare Fisher elected as new member of the Board of Directors

*Financials as per June 30, 2026.
FIH, first in human; TWC, Theranostics World Congress.



Financial overview & Team update

H1 2026 Financial Highlights

- Strong financial position with CHF 68 million in cash (incl. short term deposits) as of June 30, 2026
- Net cash used in operating activities of CHF 25.0 million for the six months ended June 30, 2026
- Operating loss of CHF 27.0 million for the six months ended June 30, 2026
- Company expects to be funded into late 2027

Key Figures first half year 2026

(CHF million, except per share and FTE data)	*H1 2026*	*H1 2025*	*Change*
Revenues	**-**	**-**	**-**
Total operating expenses	**(27.0)**	**(33.5)**	**6.5**
Operating result	**(27.0)**	**(33.5)**	**6.5**
Net financial result	**0.3**	**(3.7)**	**4.0**
Net result	**(26.7)**	**(37.2)**	**10.5**
Basic net result per share (in CHF)	**(0.70)**	**(1.00)**	**0.30**
Net cash from / (used in) operations	**(25.0)**	**(30.2)**	**5.2**
Cash balance (incl. s.t. deposits) as of June 30	**67.9**	**114.5**	**(46.6)**
Number of FTEs as of June 30	**116.7**	**153.0**	**(36.3)**

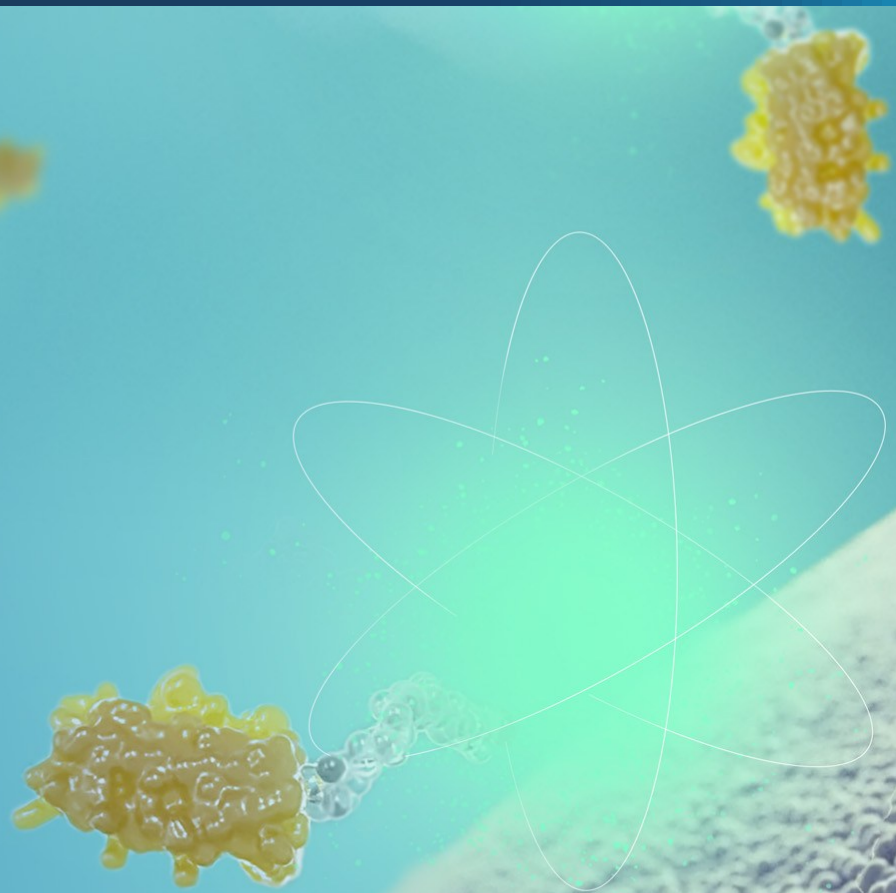
Clare Fisher – New BoD Member

- Elected as new member of the Board of Directors of Molecular Partners in April 2026
- SVP for Global BD and M&A at BeOne Medicines
- >20 years healthcare experience in leadership roles, incl. corporate and business development, mergers and acquisitions, strategy:
  - CBO, Kaleido
  - Group VP, Global Head of Transactions and BD, Interim Head Corp Dev, Shire (now Takeda)
- B.S. Biochemistry, University of Bath, UK
- M.B.A Henley Management College, UK

MOLECULAR partners

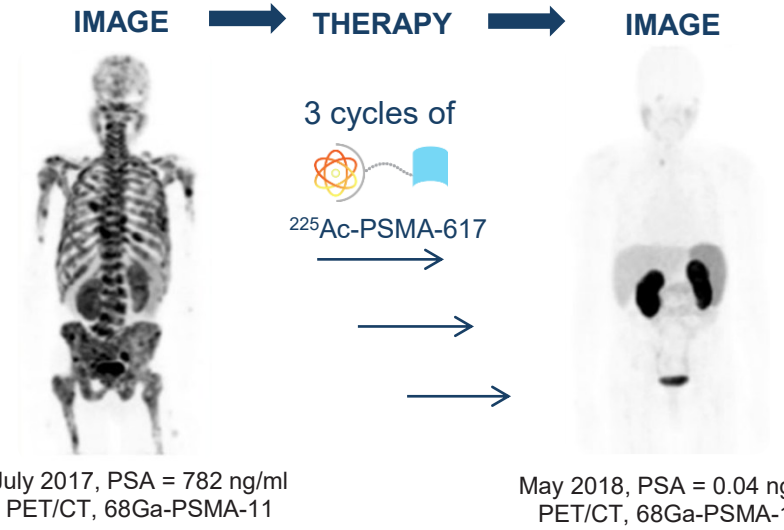
Radio-DARPins

- Isotope-agnostic vectors for precise delivery of potent radio-isotopes
- Potential to unlock broad target space across solid tumor indications



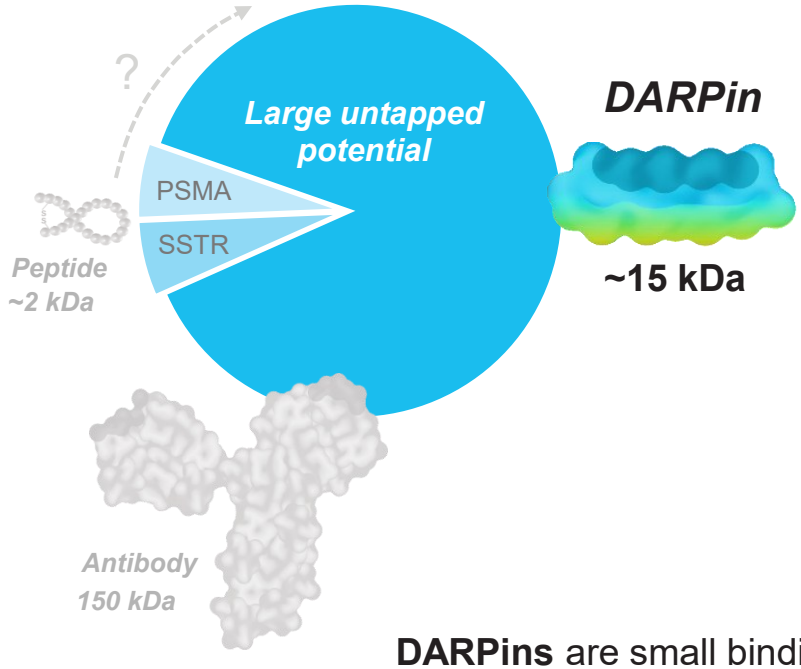
Targeted Alpha Radiotherapeutics – Clinical Benefit Proven, Rising Opportunity

"See what you treat and treat what you see"



- ✓ **Precise** delivery of potent radioisotopes to tumor lesions
  - ➢ *Spare healthy tissues*
- ✓ **Irreversible** killing of cancer cells
  - ➢ *Independent from immune cells or chemo resistance*
- ✓ **Patient benefit** demonstrated
  - ➢ *Survival and quality of life*

DARPin Potential



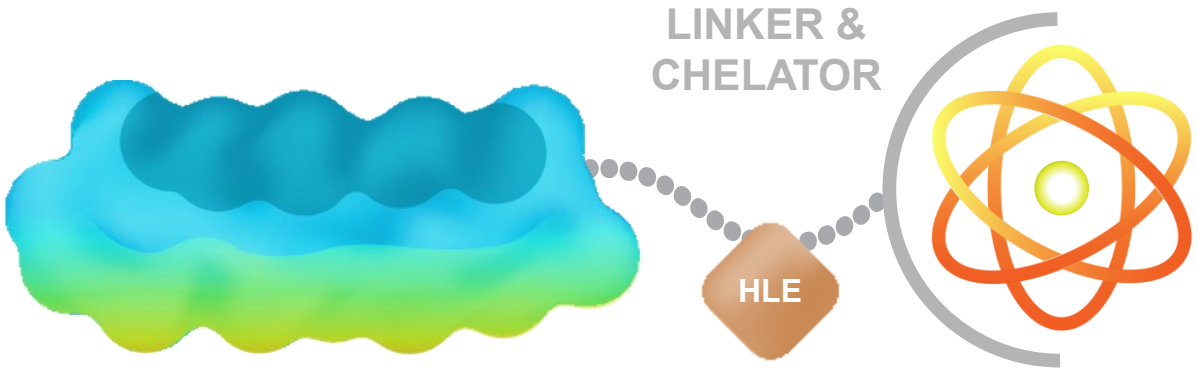
DARPins are small binding proteins derived from natural ankyrin repeat proteins

SSTR; somatostatin receptor; PSMA, prostate-specific membrane antigen.
PET/CT scan pictures adapted from Sathekge M, et al. ^{225}Ac-PSMA-617 in chemotherapy-naive patients with advanced prostate cancer: a pilot study. Eur J Nucl Med Mol Imaging 46, 129–138 (2019). https://doi.org/10.1007/s00259-018-4167-0.

Radio-DARPins for Next-Gen Targeted Alpha Therapy

DARPin: ISOTOPE-AGNOSTIC VECTOR FOR RADIOPHARMACEUTICALS

- Proven selective targeting
- High affinity, tumor retention
- Broad target space
- Small size



ALPHA-EMITTING THERAPEUTIC ISOTOPES

- Proven clinical efficacy
- High energy deposition
- Lead-212 (^{212}Pb)
- Actinium-225 (^{225}Ac)

oranomed
PANTERA
A BETTER FIGHT FOR LIFE
Eckert & Ziegler

SURFACE ENGINEERING

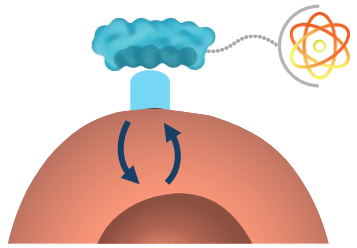
- Enabled by high stability
- Reduce kidney accumulation

HALF-LIFE EXTENDER

- Tailored systemic exposure
- Promote tumor uptake

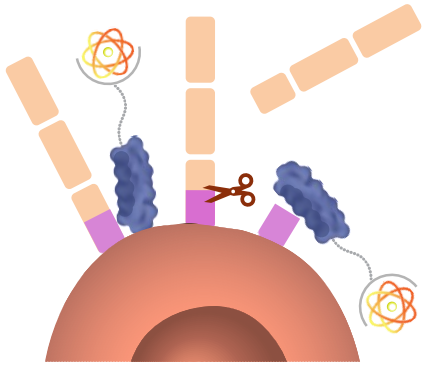
DARPins to Expand Target and Indication Space

Low density – rapid internalization & replenishment antigens



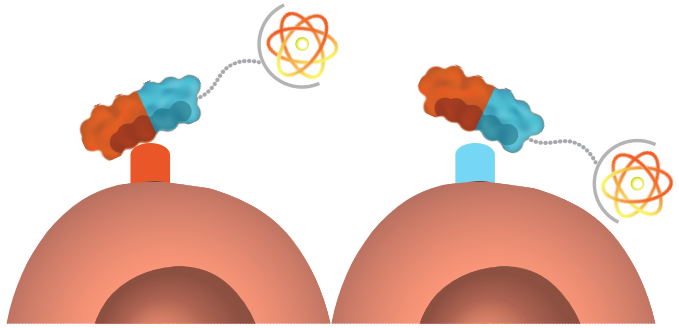
MP0712 (DLL3)

Shedding of Targets



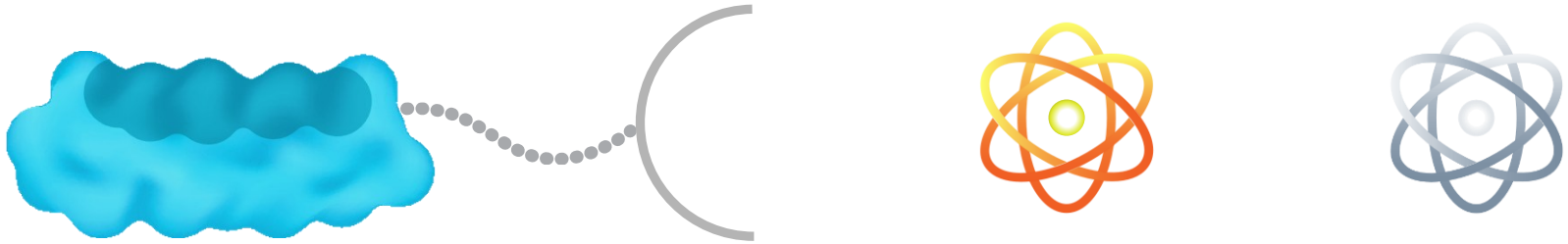
MP0726 (MSLN)

Bi-specific DARPins – cover 2 antigens with 1 DARPin (2-in-1 DuoDARPin)



Showcased at GRC in July 2026

Radio-DARPins Enable Chelator and Isotope Flexibility

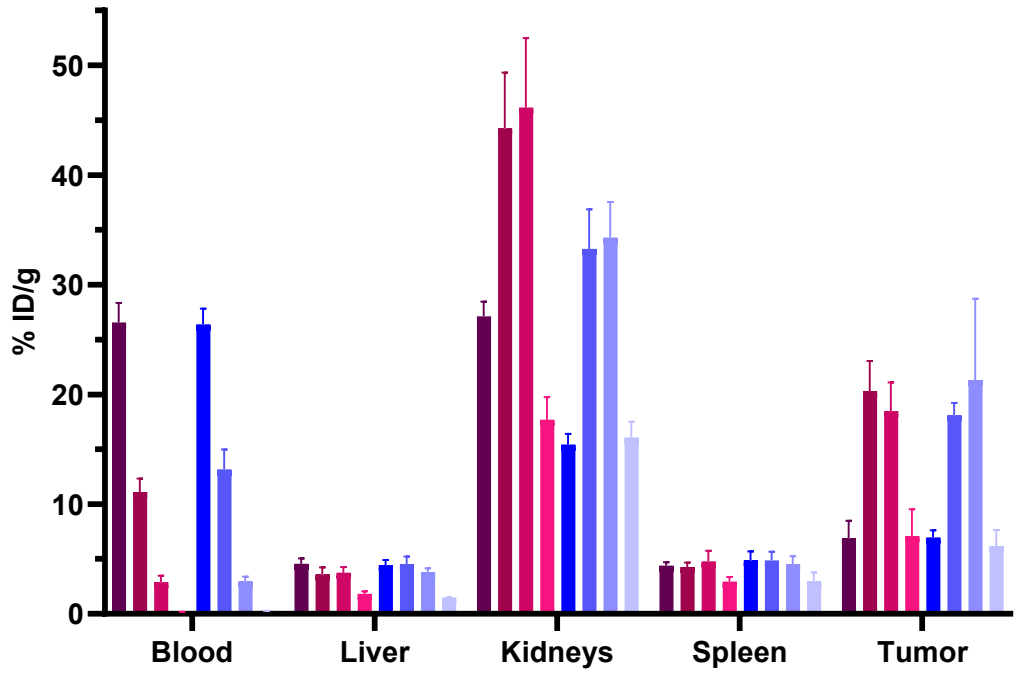


DARPIN	CHELATOR	ISOTOPE	
		Therapeutic	Imaging
Examples	DOTAM DOTA …	^{212}Pb ^{225}Ac …	^{203}Pb ^{177}Lu …

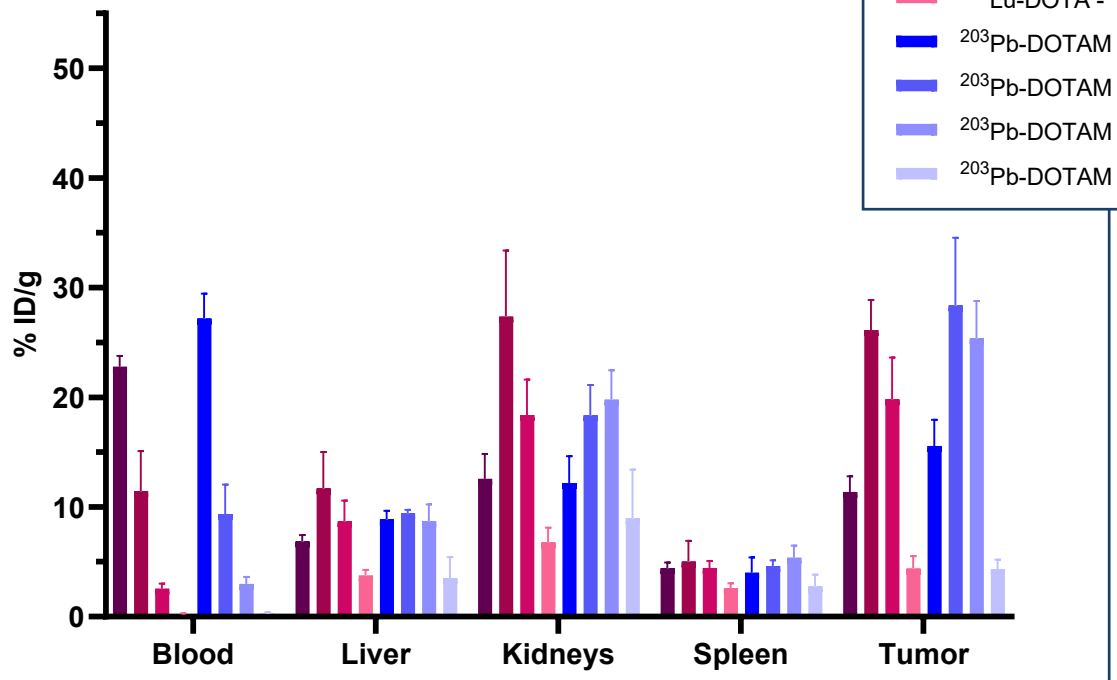
Pick and choose chelator/isotope to achieve the desired drug profile

Radio-DARPins Enable Chelator and Isotope Flexibility

Radio-DARPin against Target A



Radio-DARPin against Target B



- Comparable BioD profile using ^{203}Pb-DOTAM and ^{177}Lu-DOTA with similar uptake and washout rates
- Assumption: ^{203}Pb-DOTAM and ^{177}Lu-DOTA can be used as surrogates for the therapeutic candidates (^{212}Pb / ^{225}Ac)
- Flexibility to select therapeutic isotope based on pre-clinical and/or early human imaging data

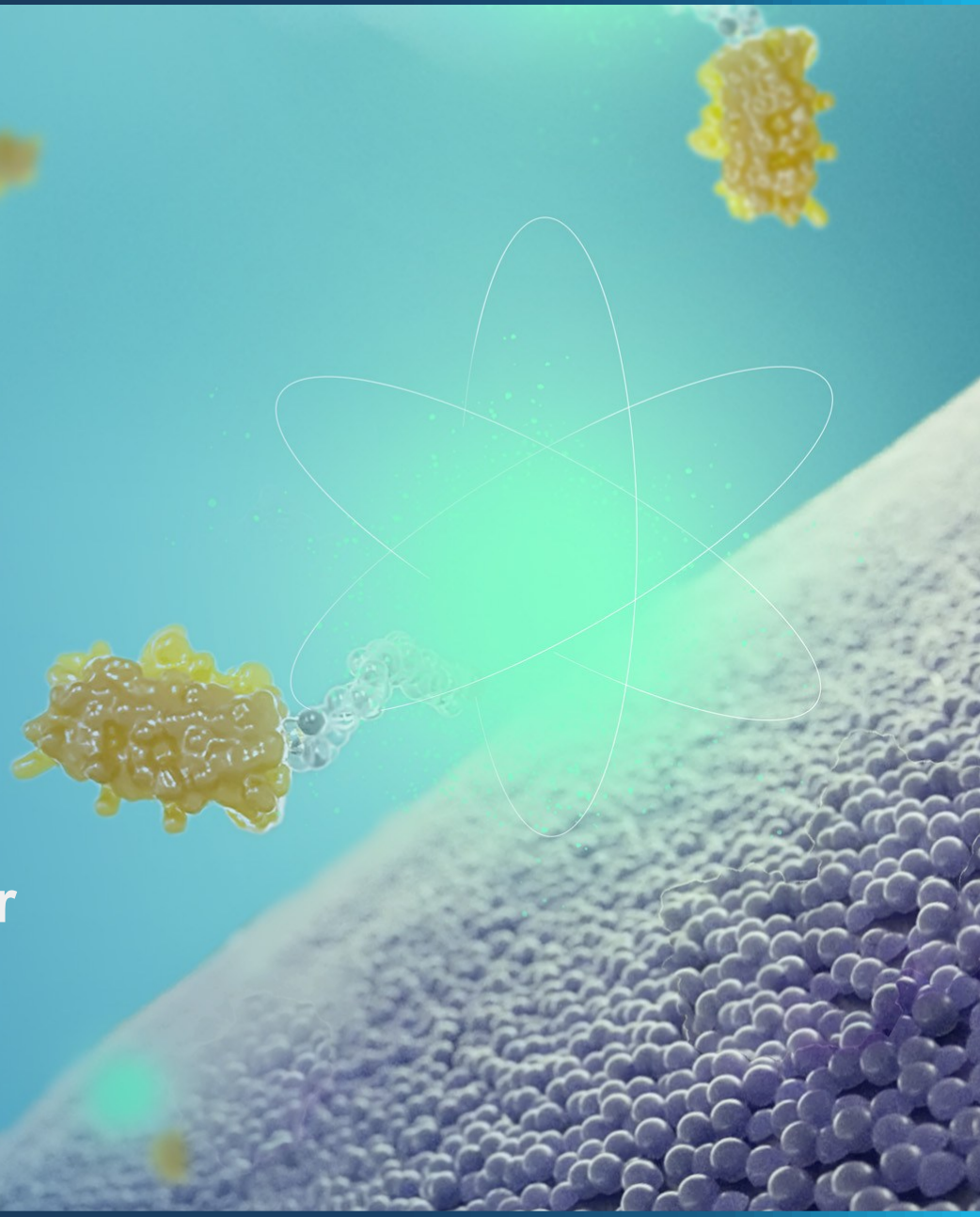
Biodistribution (BioD) studies done in different mouse models expressing respective tumor target.
Target A: ^{203}Pb-DOTAM-DARPin injected 1 x 20mCi at 0.01mg/kg and ^{177}Lu-DOTA-DARPin injected 1 x 50µCi at 0.01mg/kg.
Target B: ^{203}Pb-DOTAM-DARPin injected 1 x 4mCi at 0.01mg/kg and ^{177}Lu-DOTA-DARPin injected 1 x 4µCi at 0.01mg/kg.

MOLECULAR partners

MP0712 (DLL3 x ^{212}Pb)

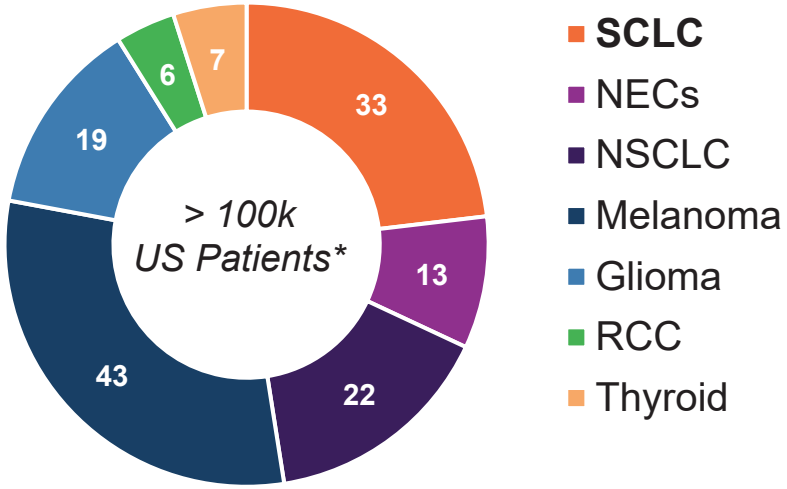
Targeted Alpha Radiotherapy for Lung Cancer

- Specific tumor uptake reported in initial human images
- Phase 1/2a in US dosing patients, early data in 2026



MP0712: DLL3 Targeted Radiotherapy for SCLC and other NECs

DLL3 – Validated Target with Large Addressable Patient Population



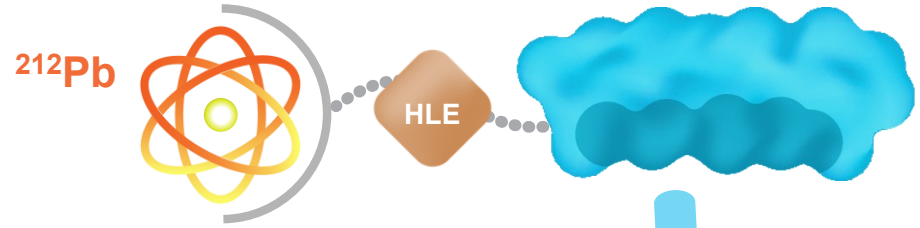
- Tarlatamab (TCE) approved: 35% RR; ~7 months DoR; risk of substantial side effects
- ADCs in Phase 1/2: 50-70% RR; 5–6 months DoR; manageable side effects

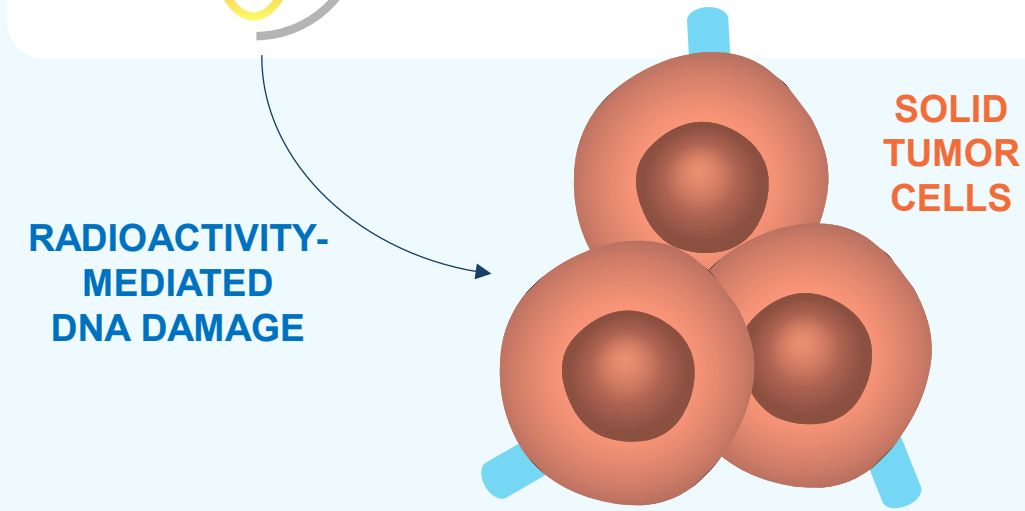
SCLC – Critical Unmet Need

- mPFS: ~4 months[1] (2L); 5-year OS: ~7–9%[2,3]

MP0712

- ✓ SCLC highly radio-sensitive
- ✓ DLL3 internalization to drive activity
- ✓ Combinable with other MoAs



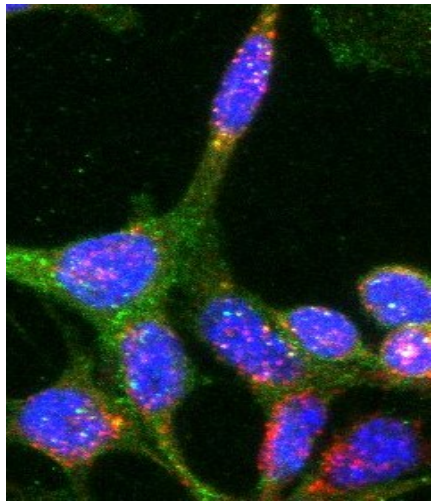


*Figures depict incidence of US patients (in 1000s) in the year 2004, which express DLL3 as assessed by RNA expression and other methods (see Cantor 2025).

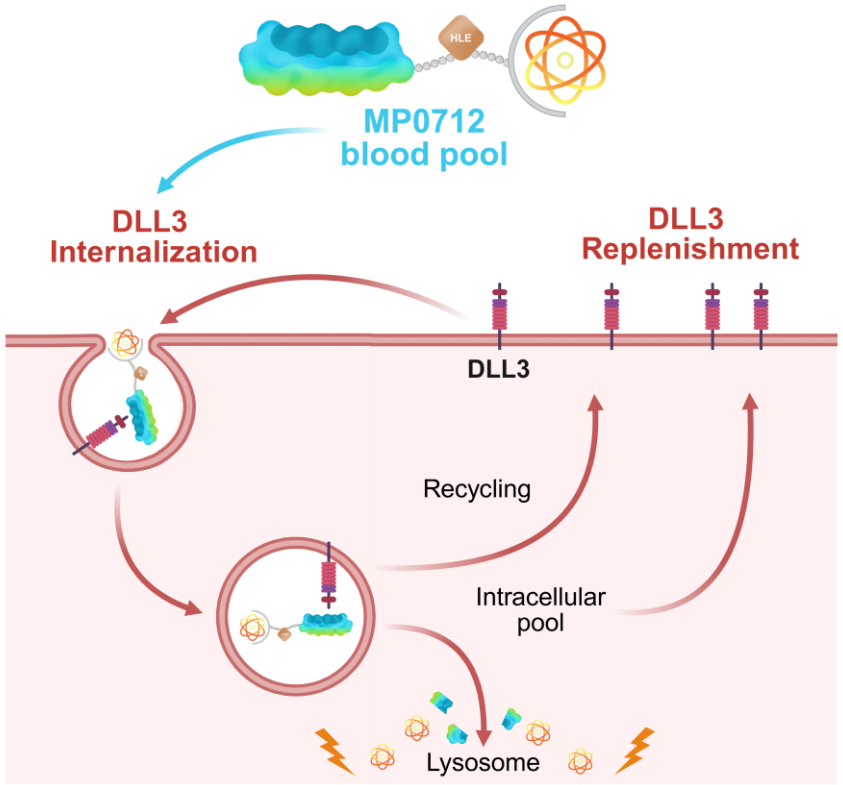
1. Mountzios et al., NEJM 2025; 2. SEER; 3. American Cancer Society.

2L, 2nd line; ADC, antibody-drug conjugate; DoR, duration of response; MoA, mode of action; mPFS, median progression-free survival; NEC, neuroendocrine cancer; NSCLC, non-small call lung cancer; OS, overall survival; RCC, renal cell carcinoma; RR, response rate; SCLC, small cell lung cancer; TCE, T cell engager.

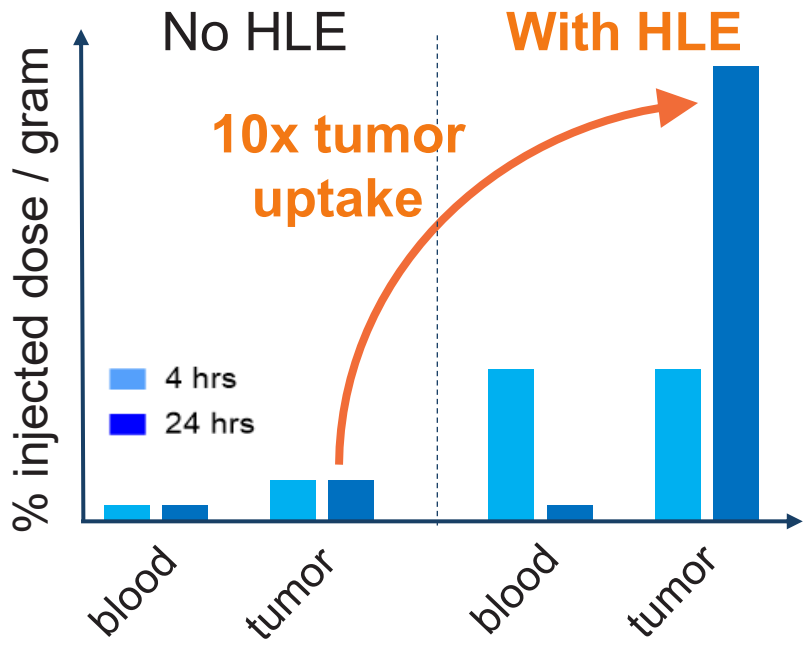
MP0712: High Tumor Uptake via DLL3 Replenishment and Half-Life Engineering



- DARPin
- Nucleus
- Endosome



Optimal half-life for tumor uptake of MP0712



DARPin half-life optimization allows to leverage rapid internalization & replenishment of DLL3 for high MP0712 accumulation in tumors

Riesenberg et al., AACR 2026.

Immunofluorescence co-staining of anti-DARPin antibody, an early endosomal marker (EEA1) and cell nucleus marker (DAPI) after 3 h incubation. Schematic for uptake in blood and tumors with and without HLE in mice – data presented at multiple conferences in 2024.

SPECT/CT Imaging with ^{203}Pb-MP0712 in a Patient with Metastatic Small Cell Lung Cancer (mSCLC)

Patient characteristics

- 69-year-old male (smoker)
- Small cell neuroendocrine carcinoma of the lung
- Stage III at referral (mediastinal lesion)

Treatment history

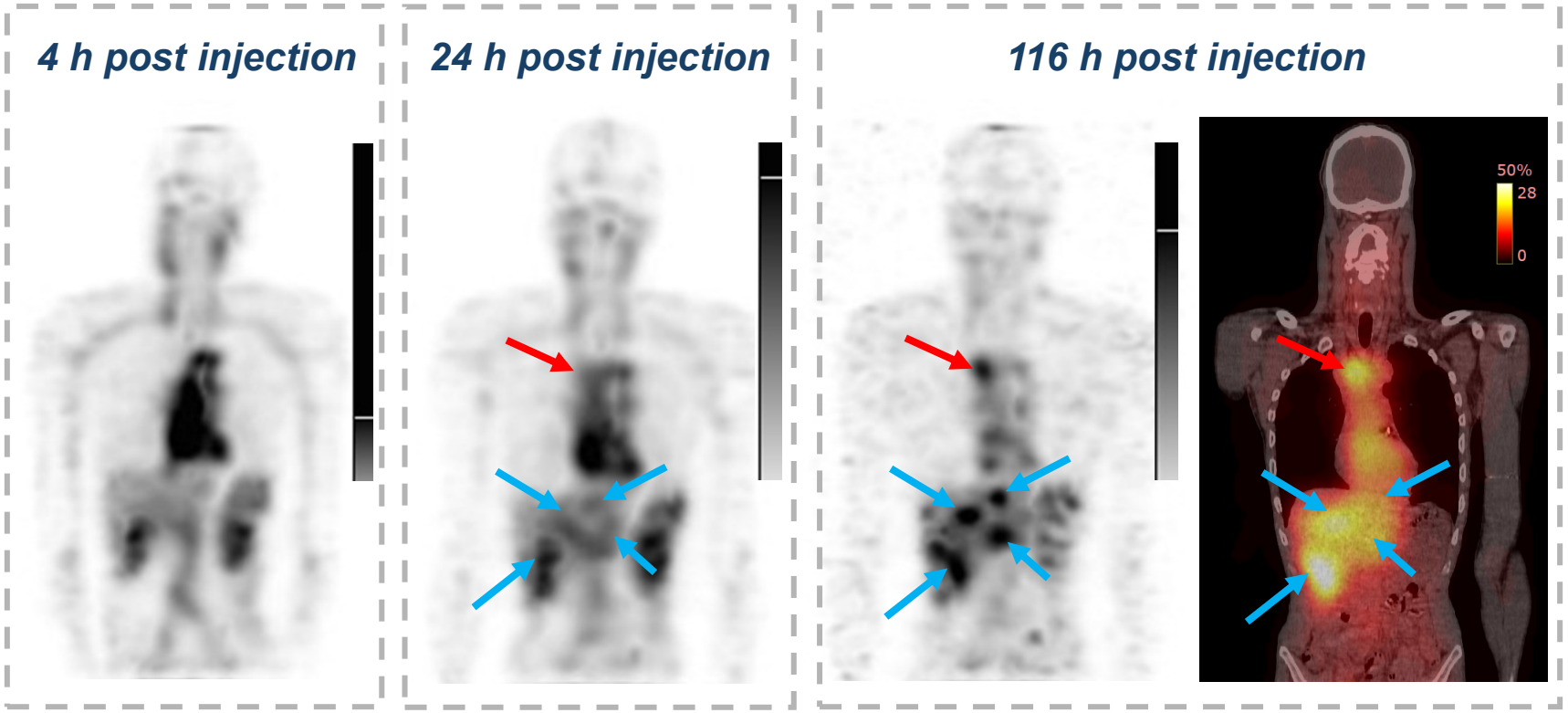
- Radio- & chemotherapy

Dosing

- 185 MBq of ^{203}Pb-MP0712

Result

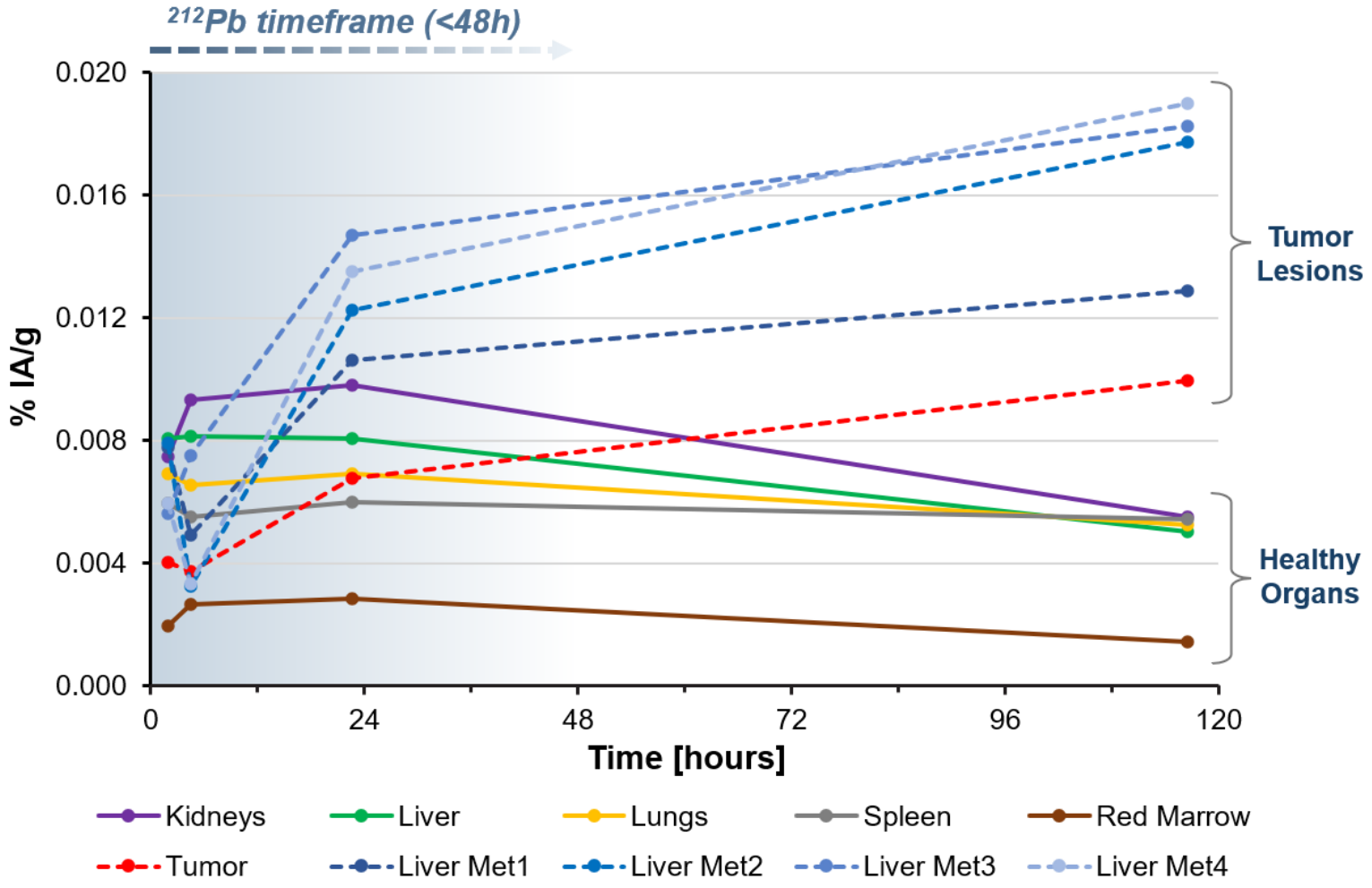
- Stage IV by MP0712 - SPECT with 4 liver mets



Initial high blood pool, followed by specific uptake in primary & metastatic lesions over time in line with MP0712 MoA

Patient imaged as part of a Named Patient Access Program at NuMeRI, Pretoria, South Africa.
Example of patient case series presented with courtesy of Prof. Dr. M. Sathekge, NuMeRI.
Complete SPECT/CT imaging data set presented at TWC 2026 (Kabunda et al.).

Biodistribution Profile of ^{203}Pb-MP0712 in a Patient with mSCLC



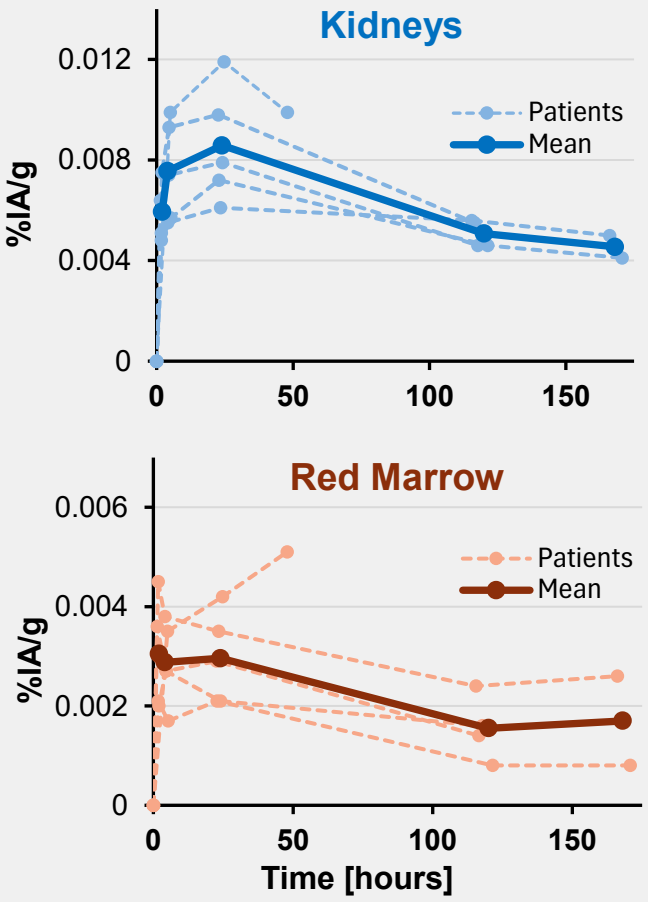
- **Continued tumor uptake** during imaging period (up to 116 h)
- **Higher uptake in liver metastases** as compared to primary lesion
- **Washout from healthy organs** visible from 24 h onwards
- Healthy organ profile consistent with profile observed in other patients

Lizak et al. TWC 2026.

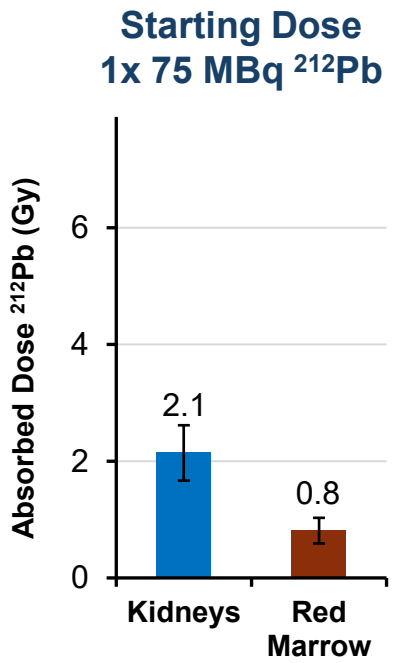
Quantitative image analysis performed by RAPID, LLC.
mSCLC, metastatic small cell lung cancer.

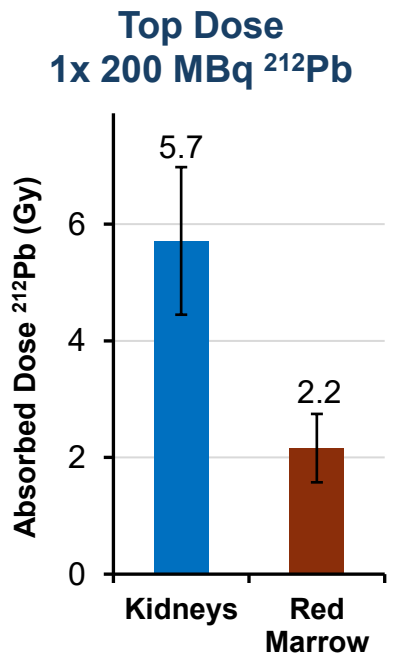
MP0712 Organ Dosimetry and Projection to Phase 1

^{203}Pb Time-Activity Curves



Dosimetry extrapolations





External Beam Radiation (EBRT) limit:

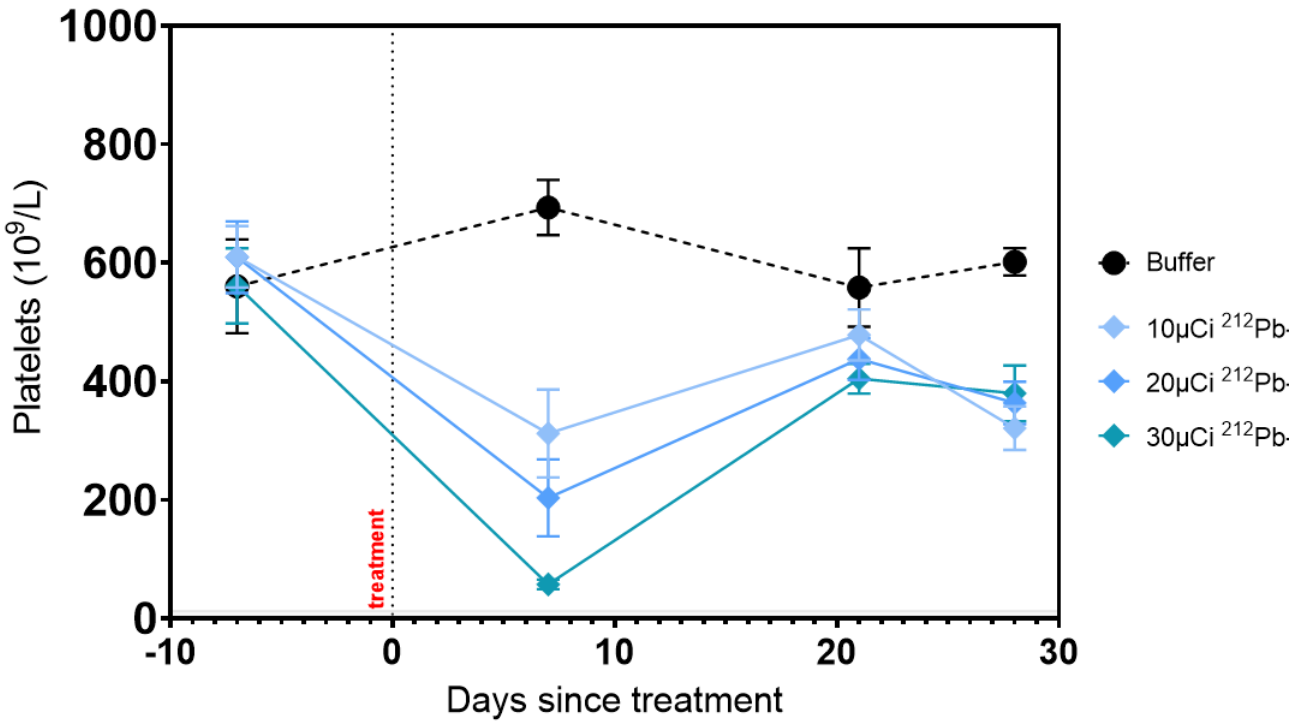
- Kidney 23 Gy – cumulative
- Red Marrow 2 Gy – non-cumulative

- All healthy organs within EBRT limits for Phase 1 starting and top single doses
- Kidneys & red marrow potentially dose-limiting → Monitor hematologic recovery to guide repeated dosing strategies

Dosimetry calculations for ^{212}Pb performed by RAPID, LLC on 5 evaluable patients; RBE = 5.
Complete dosimetry dataset presented at TWC 2026 (NuMeRI / Ramonaheng et al.).

EBRT, external beam radiation therapy; RBE, relative biologic effectiveness.

MP0712 Preclinical Safety Data Support Heme Recovery Hypothesis



Preclinical Data

- Recovery of hematologic profile after 28 days
- MP0712 treatment up to 30 µCi well tolerated
- 10 µCi corresponds to ~75 MBq in human
- 30 µCi corresponds to ~225 MBq in human

Croset et al. AACR 2025.

MP0712 dose-range finding (DRF) study done in wild-type mice. ^{212}Pb-DOTAM-DARPin injected once from 10 to 60 µCi.

MP0712 Phase 1/2a Study for SCLC and other NECs

- **First-in-human, US multicenter, Phase 1/2a study of MP0712 monotherapy (NCT07278479)**
  - SCLC patients after ≥2 prior systemic therapies or not eligible for standard 2L therapy; lung LC NEC patients after ≥1 prior systemic therapy
  - 5 of 9 centers currently open

Phase 1: Dose Escalation

Main objectives: safety, RP2D

N =15–39 patients SCLC and lung LC NEC; N = 9–39 patients epNEC

Phase 2a: Dose Expansion and PoC

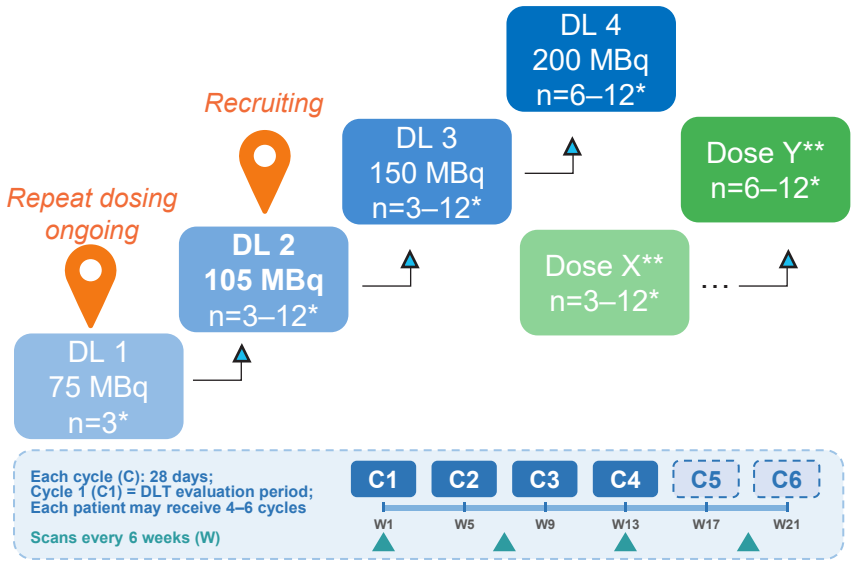
Main objectives: efficacy signals, confirm safety and RP2D

N = up to 5 x 20-30 patients

^{203}Pb-MP0712

Imaging / dosimetry (SPECT)

^{212}Pb-MP0712 (treatment)



RP2D

1) 3L SCLC post tarlatamab

2) 2L SCLC tarlatamab-naive

3) 2L+ epNEC

4) Combo with TCE in R/R SCLC

5) Combo with TCE in R/R epNEC

Confirmatory signals

Registration studies 2L & 1L

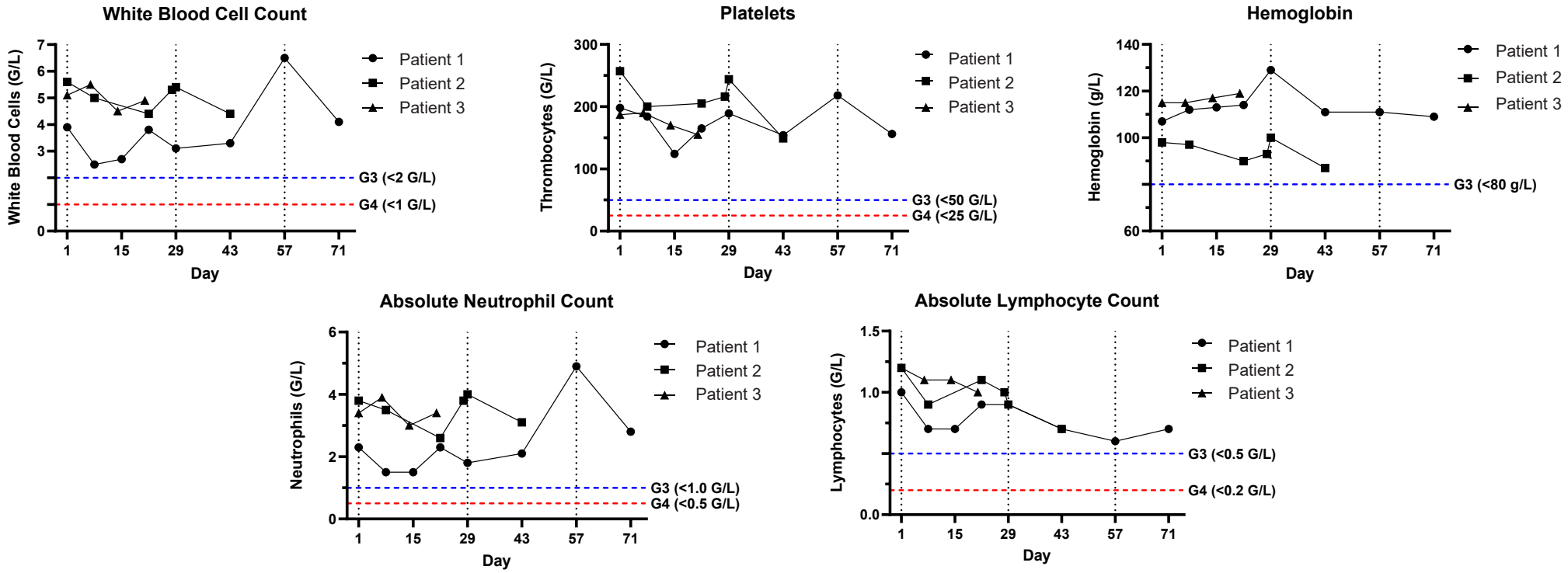
* Evaluable patients (Bayesian Logistic Regression Model guided dose escalation)

**epNEC to start at a dose level previously tested in SCLC or LC NEC of lung at which a first signal of pharmacological activity is detected. RP2D for epNEC is anticipated to be same as RP2D for SCLC/LC NEC of lung. Pre-selection on DLL3 expression foreseen.

1/2/3L, 1st/2nd/3rd line; DL, dose level; epNEC, extrapulmonary NEC; LC NEC, large cell NEC; PoC, proof-of-concept; RP2D, recommended phase 2 dose.

MP0712 Phase 1 Early Safety Signals Provide Confidence for Therapeutic Window

BLOOD markers



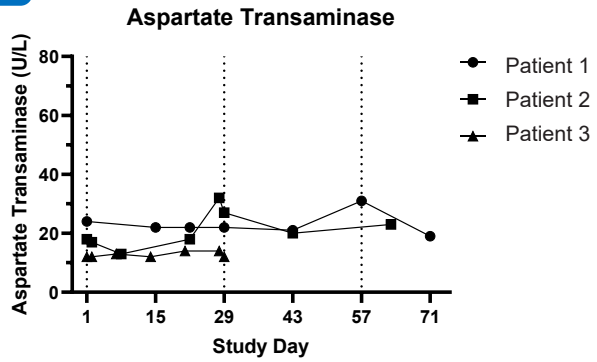
- No dose-limiting toxicity (DLT) reported in fully recruited dose level 1 (75 MBq / dose)
- Emerging blood counts show mild, transient mid-cycle decreases with full recovery by cycle end to-date

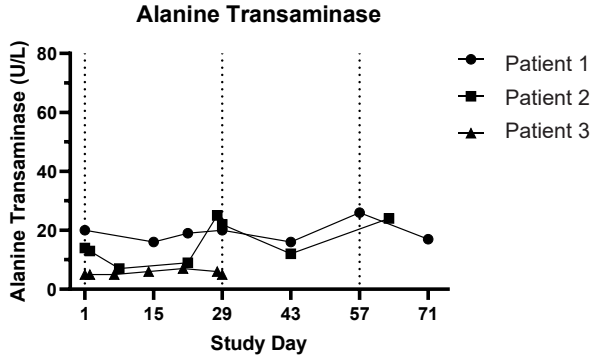
Preliminary data; results may change upon ongoing review and database cleaning.

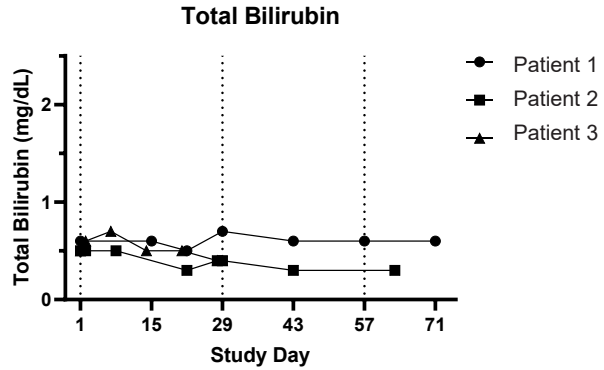
G3/4; threshold for Grade 3/4 adverse event.

MP0712 Phase 1 Early Safety Signals Provide Confidence for Therapeutic Window

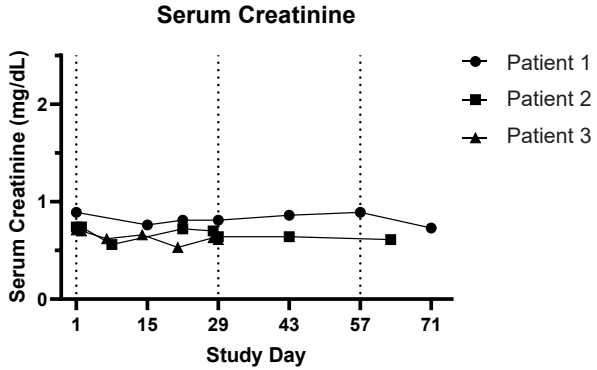
LIVER markers

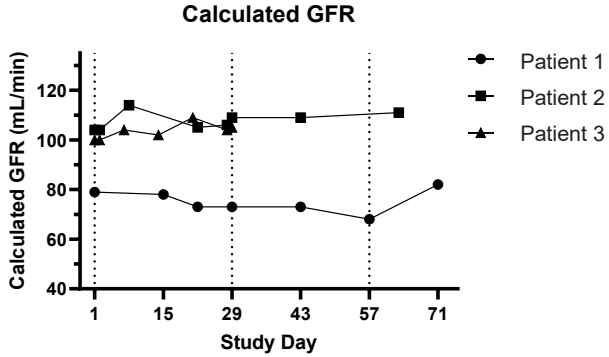






KIDNEY markers





- No dose-limiting toxicity (DLT) reported in fully recruited dose level 1 (75 MBq / dose)
- No evidence of hepatic or renal toxicity to-date

Preliminary data; results may change upon ongoing review and database cleaning.

MP0712 Conclusions and Outlook

Summary

- Patients continuing treatment per protocol at dose level 1 (75 MBq / dose)
  - ✓ Cohort fully recruited at first dose level
  - ✓ No dose-limiting toxicity (DLT) reported
  - ✓ All organs of concern well within safety parameters (blood, kidneys, liver)
  - ✓ All 3 patients having received multiple doses of MP0712
- DERC approval granted to initiate enrollment for dose level 2 (105 MBq / dose)
  - Treatment initiation expected in September 2026

Outlook

- Initial data expected before year end 2026
- Comprehensive safety and efficacy data in 2027

DERC, dose escalation review committee.

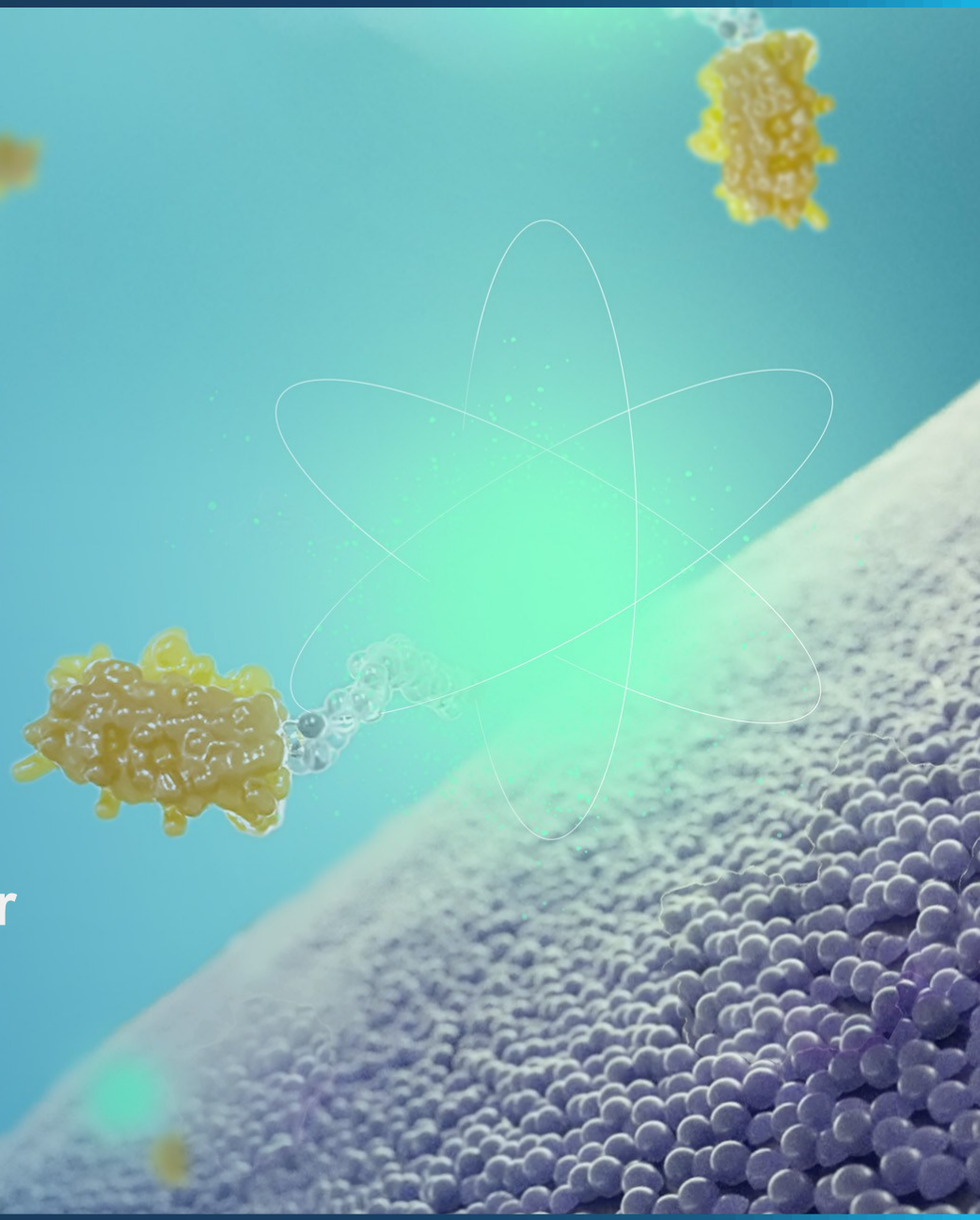
MOLECULAR partners

NUCLEAR MEDICINE RESEARCH INFRASTRUCTURE
NuMeRI

MP0714 (DLL3 x ^{225}Ac)

Targeted Alpha Radiotherapy for Lung Cancer

- Compassionate care just initiated in South Africa
- Request by Dr. Mike Sathekge of NuMeRI



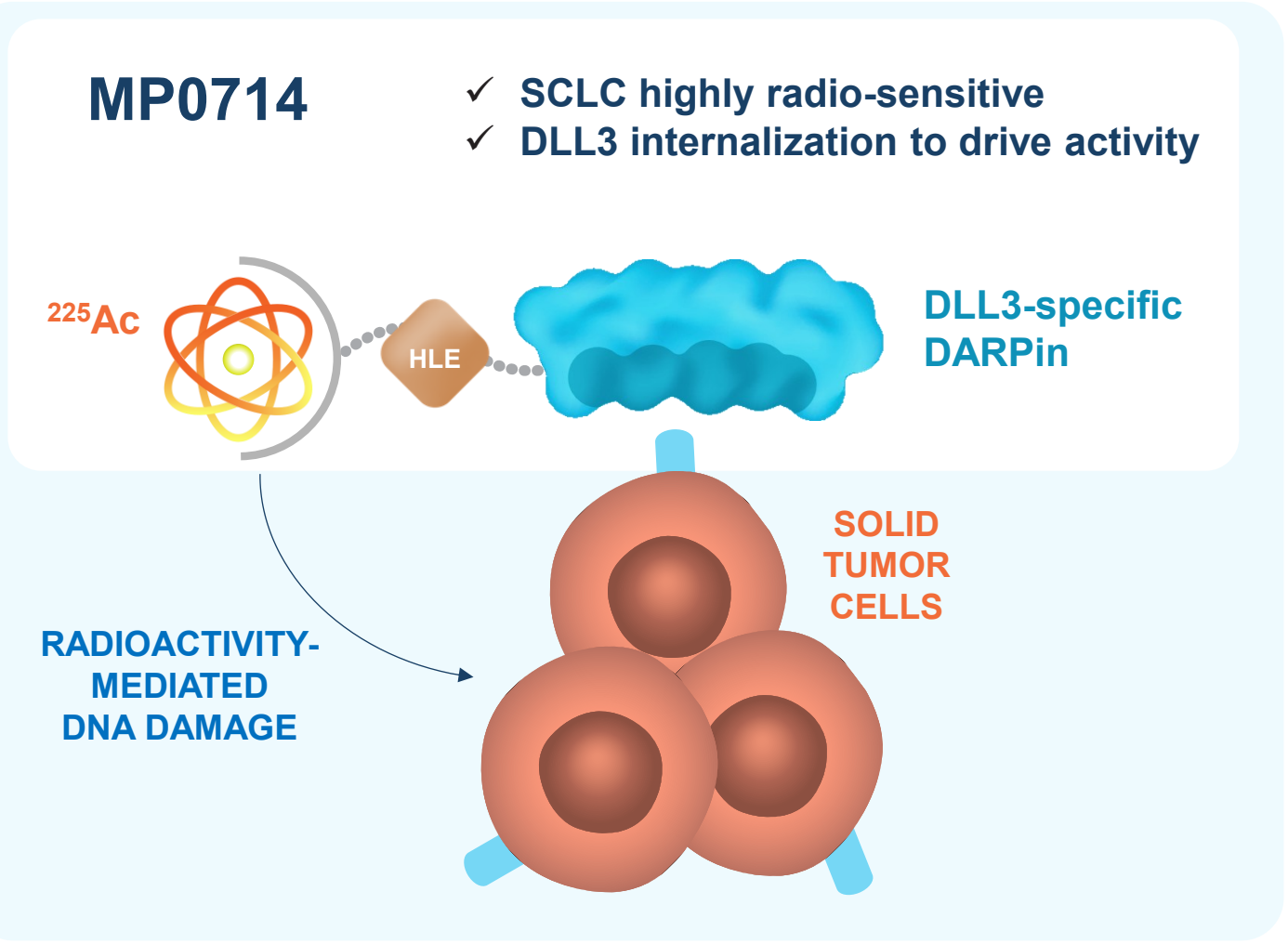
MP0714: DLL3 Targeted Radiotherapy for SCLC and epNECs

MP0714

- Same DLL3-specific DARPin as in MP0712
- DOTA as chelator
- ^{225}Ac as therapeutic isotope
  - ^{177}Lu used for imaging

Compassionate care initiated

- Request by Dr. Mike Sathekge of NuMeRI
- Patient treatment ongoing
- For patients with SCLC and epNECs

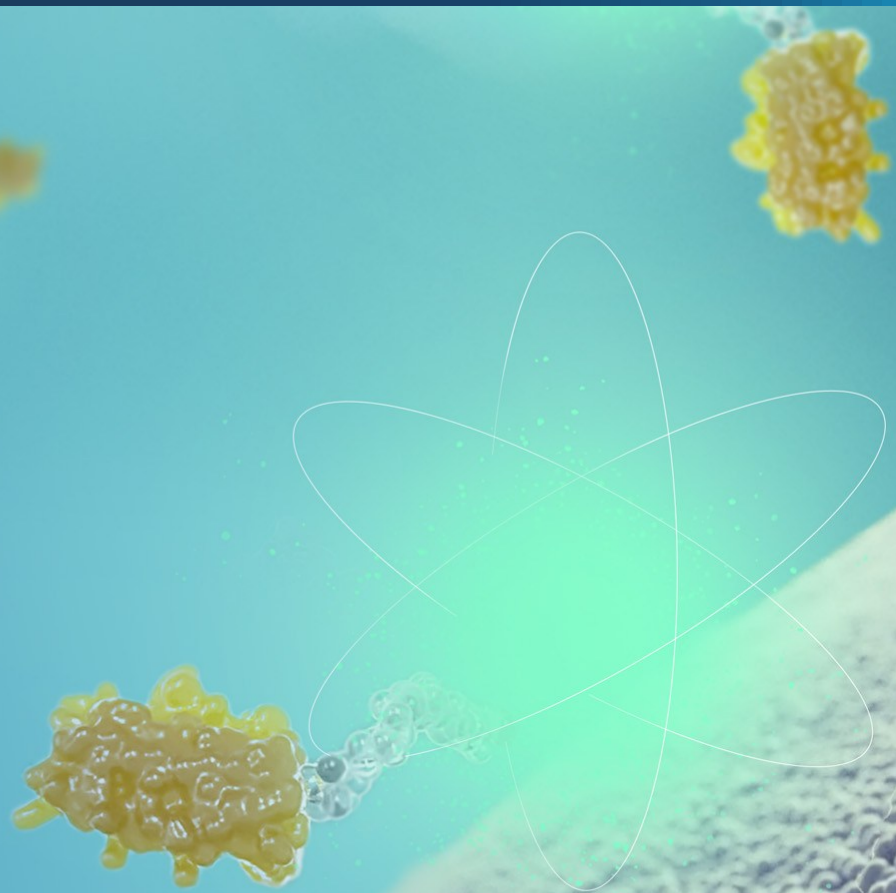


MOLECULAR partners

MP0726

Targeted Alpha Radiotherapy for Ovarian Cancer

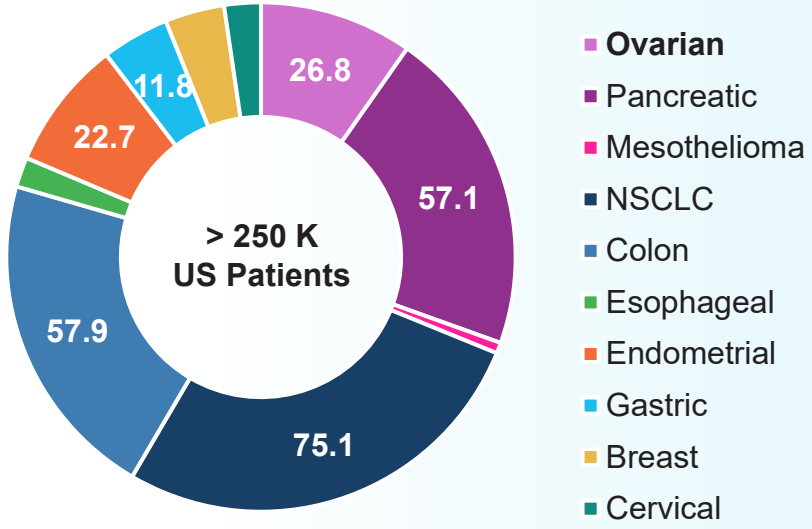
- Targeting membrane-bound MSLN
- Progress to FIH imaging in 2026



MP0726: Targeted Alpha Radiotherapy for Ovarian and Other Cancers

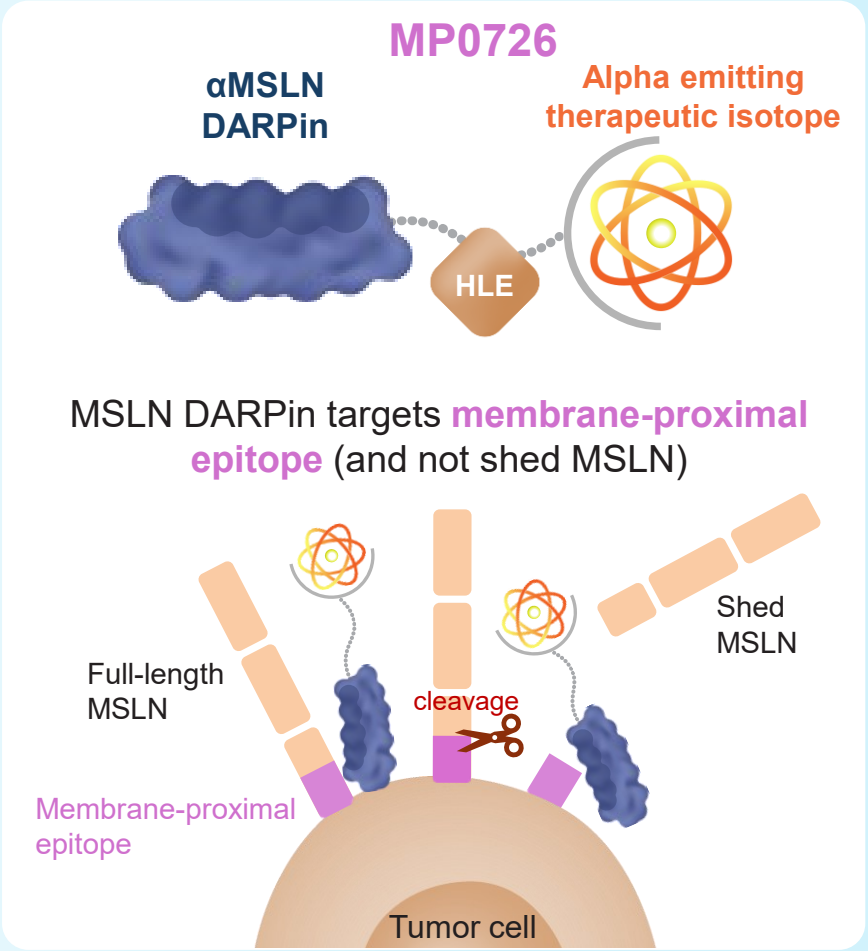
MSLN – highly expressed target across multiple solid cancers

- >80% prevalence in ovarian cancer
- Maintained in metastases
- Shed MSLN in patient serum, might limit efficacy of MSLN-targeted therapies[1-4]



Ovarian Cancer – high medical need, marginal progress

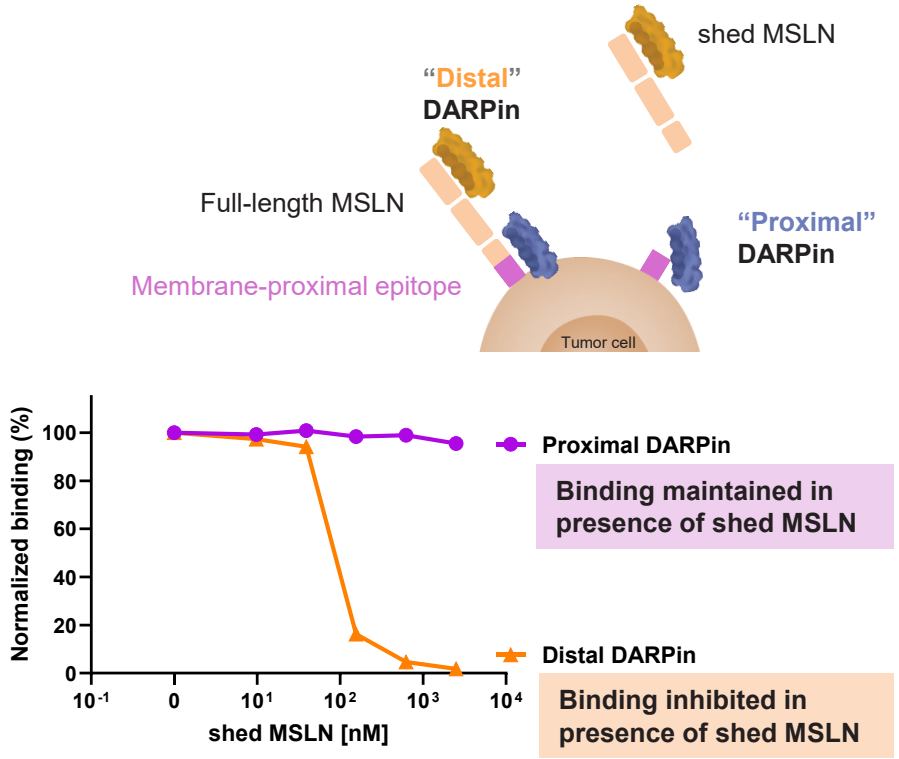
- > 50% patients die within 5 years post-diagnosis
- Poor treatment options: ~80% recurrence rate post 1L chemo, limited 2L options (FRα-targeted Tx relevant for only 40% patients)



1. Awuah et al. Mol Cancer Ther 2016; 2. Zhang et al. Cancer Sci 2011; 3. Smith et al. ASCO 2024; 4. Liu et al. PNAS 2024.
FRα, folate receptor alpha; MSLN, mesothelin; NSCLC, non-small cell lung cancer; Tx, treatment.

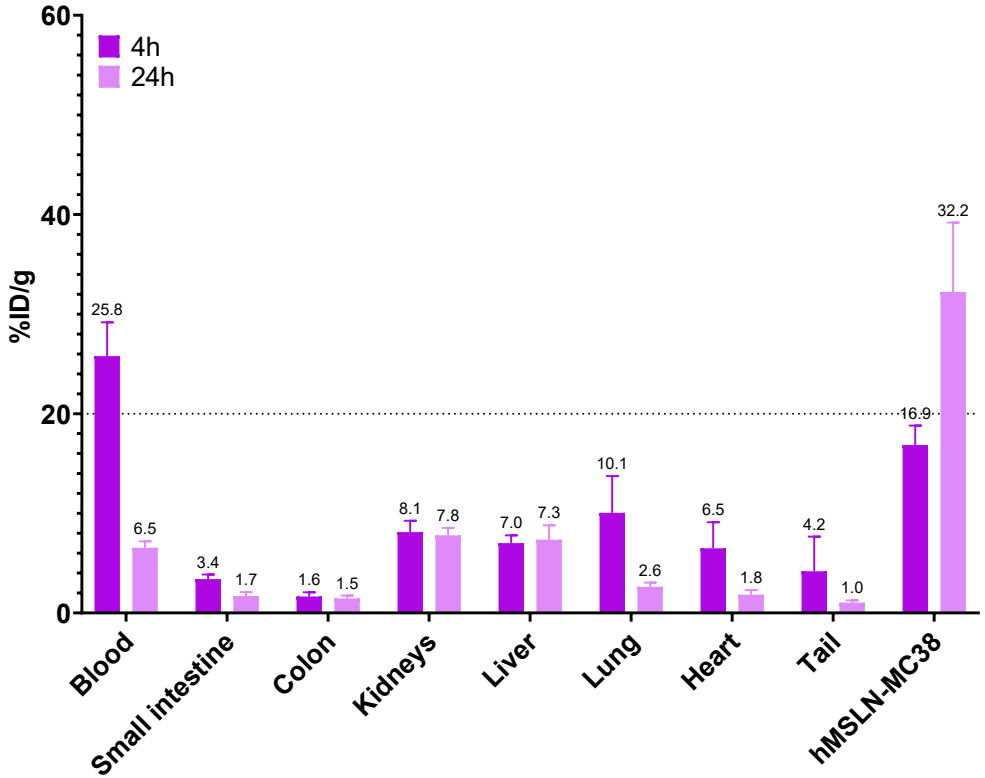
MP0726: MSLN-Targeting Radio-DARPin for Ovarian Cancer

Cell binding maintained despite shed MSLN



Favorable biodistribution

in hMSLN-MC38 tumor model



Outlook: Progressing MP0726 to FIH imaging in 2026

Wullschleger, et al., AACR 2025.

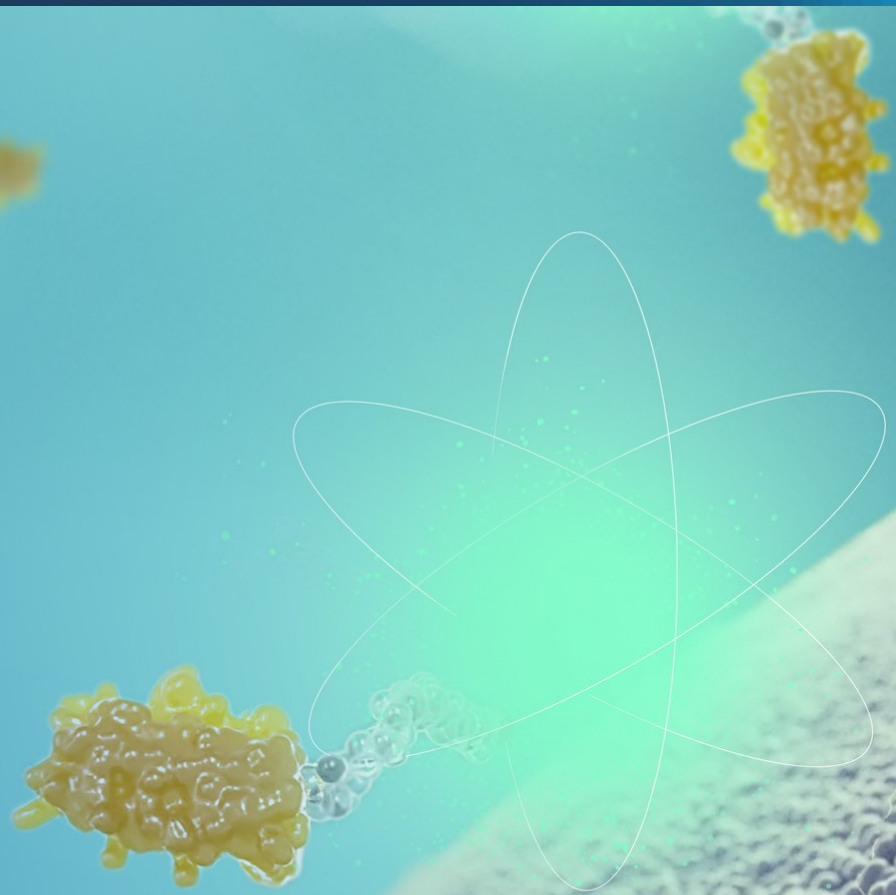
OVCAR-8 Cell binding competition assay (100nM DARPin with increasing concentration of shed MSLN). Mice xenografted s.c. with hMSLN-MC38 (Biocytogen). Dose: 10 µCi of ^{212}Pb at 0.01 mg/kg of MSLN DARPin. FIH, first in human.

MOLECULAR partners

CD70 x RDT

Targeted Alpha Radiotherapy for kidney cancer and beyond

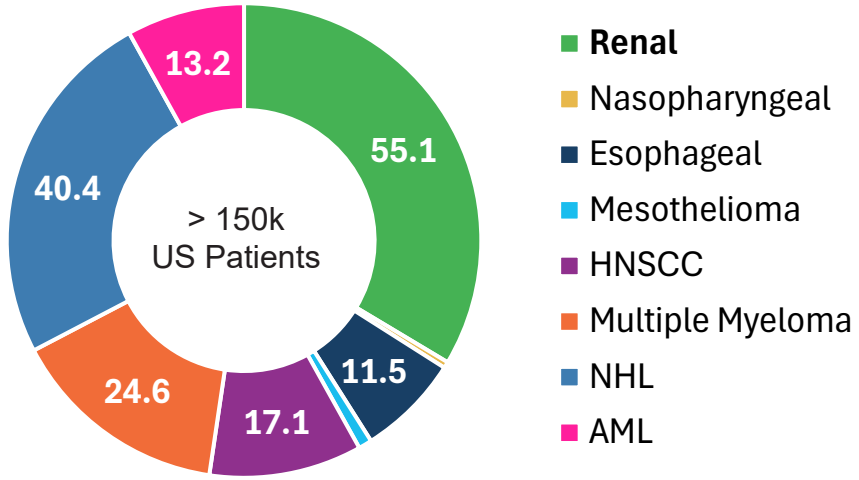
- Lead candidate nomination H2 2026
- Clinical program start expected 2027



CD70-Targeting Alpha Radiotherapy for RCC & Beyond

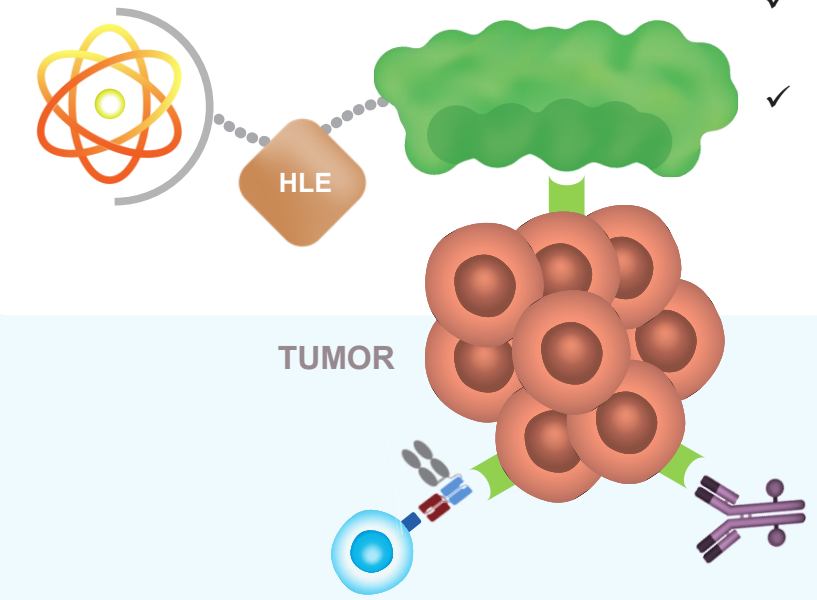
CD70 – Validated Target with Broad Expression

- >80% in kidney cancer (ccRCC), NHL, MM patients[4,5]
- Limited / no expression in healthy tissues; transient on activated immune cells & regenerating epithelia[6,7]
- Tumor-targeting shown with CD70 radio-diagnostics[8-12]
- Clinical validation through CAR-T responses[13,14]



RCC: Critical Unmet Need (2/3L)

- mPFS: ~5–7 months[1-3] ; 5-year OS: ~18–25%[2]



- ✓ **RCC sensitive to high-dose SBRT**
- ✓ **Avoids GI tox. from CAIX targeting**
- ✓ **Differentiation in RCC beyond HIF-2α / TKI / IO**

CD70 TCE (Ph1, Incyte): no data
CD70 CAR-T/NK: 25–50% ORR[13,14]
(Ph1, Allogene), CGC729 (Curegenetics)

CD70 ADC (Ph1, J&J): 26–23% ORR[15]

Other RLTs (CAIX): Ph3 Telix (heme tox); Ph1/2 ITM, Peptidream; high GI uptake

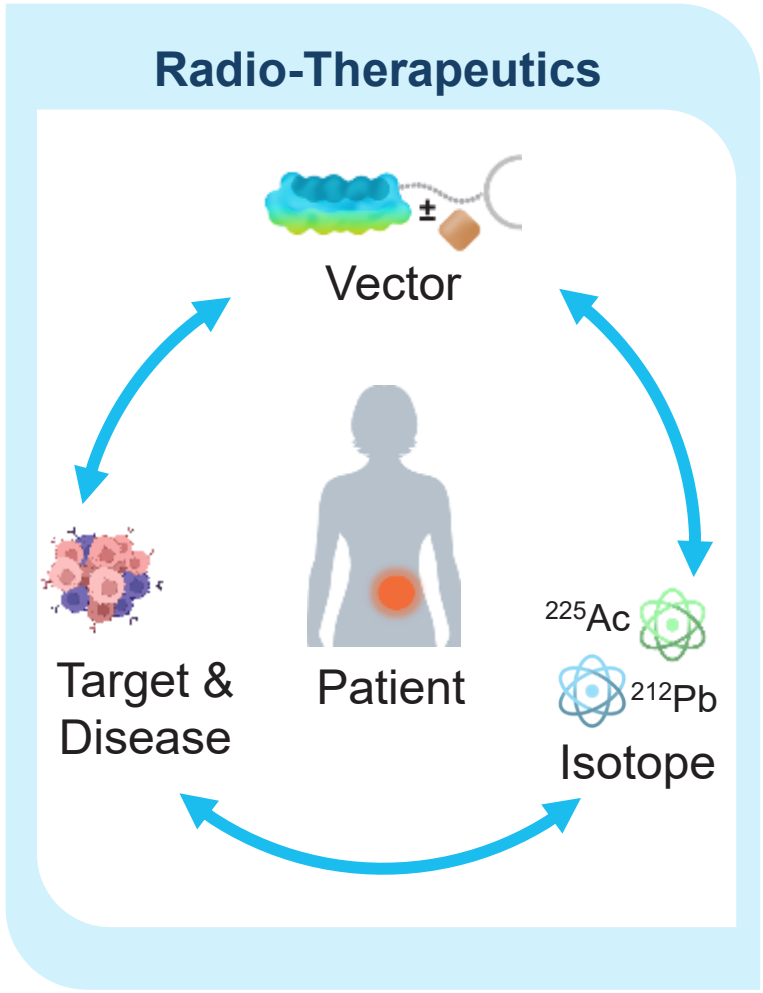
MOLECULAR partners

CAIX, carbonic anhydrase IX; CAR-T, chimeric antigen receptor T cell; (cc)RCC, (clear cell) renal cell carcinoma; GI, gastro-intestinal; HIF-2α, hypoxia-inducible factor 2 alpha; HNSCC, head and neck squamous cell cancer; IO, immuno-oncology; MM, multiple myeloma; MoA, mechanism of action; NHL, non-Hodgkin lymphoma; NK, natural killer cell; SBRT, stereotactic body radiotherapy; TKI, tyrosine kinase inhibitor. References: see slide notes.

MOLECULAR partners

Concluding Remarks & Outlook

Our Radio-DARPin Pipeline – News Flow in 2026



CANDIDATE	RESEARCH	PRE-CLINICAL	PHASE 1
MP0712	SCLC & NECs *212Pb x DLL3*		Initial data 2026 Efficacy 2027
MP0714	*225Ac x DLL3*		
MP0726	Ovarian Cancer *MSLN*	212Pb or 225Ac	Progress to FIH imaging
Additional Programs (Solid Tumors)	"Mono"-specific *(incl. CD70)* "Multi"-specific		Nominate new RDT targets Evaluate candidates in alpha-agnostic manner

The co-development agreement with Orano Med includes up to 10 targeted radiotherapy programs, including MP0712 and MP0726.
DLL3, Delta-like ligand 3; FIH, first-in-human; MSLN, mesothelin; NEC, neuroendocrine cancer; RDT, Radio-DARPin Therapeutic; SCLC, small cell lung cancer.

Outlook and Milestones in 2026

MP0712	• **First-in-human (FIH) Phase 1/2a study in US, dosing ongoing and now recruiting at dose level 2** • Full imaging and dosimetry data from South Africa presented at TWC in January 2026 • Initial data from Phase 1 anticipated in 2026, efficacy in 2027
Radio-DARPin Therapy (RDT)	• Progress next RDT candidates, including **MP0726, to FIH imaging** • Nomination of new RDT targets: CD70 for kidney cancer and other indications; candidate selection in H2 2026
MP0317	• Phase 1 results just published in Nature Cancer (Steeghs et al. 2026), strong on-target activity • **Phase 2 combo study dosing patients:** front-line cholangiocarcinoma, up to 75 patients; poster at ESMO 2026
MP0533	• Conclusion of Phase 1/2a dose escalation • **Investigator-initiated combo trials** under discussion
Switch-DARPin	• **MP0632 selected as lead candidate** in H1 2026, moving to IND-enabling studies; poster at SITC 2026

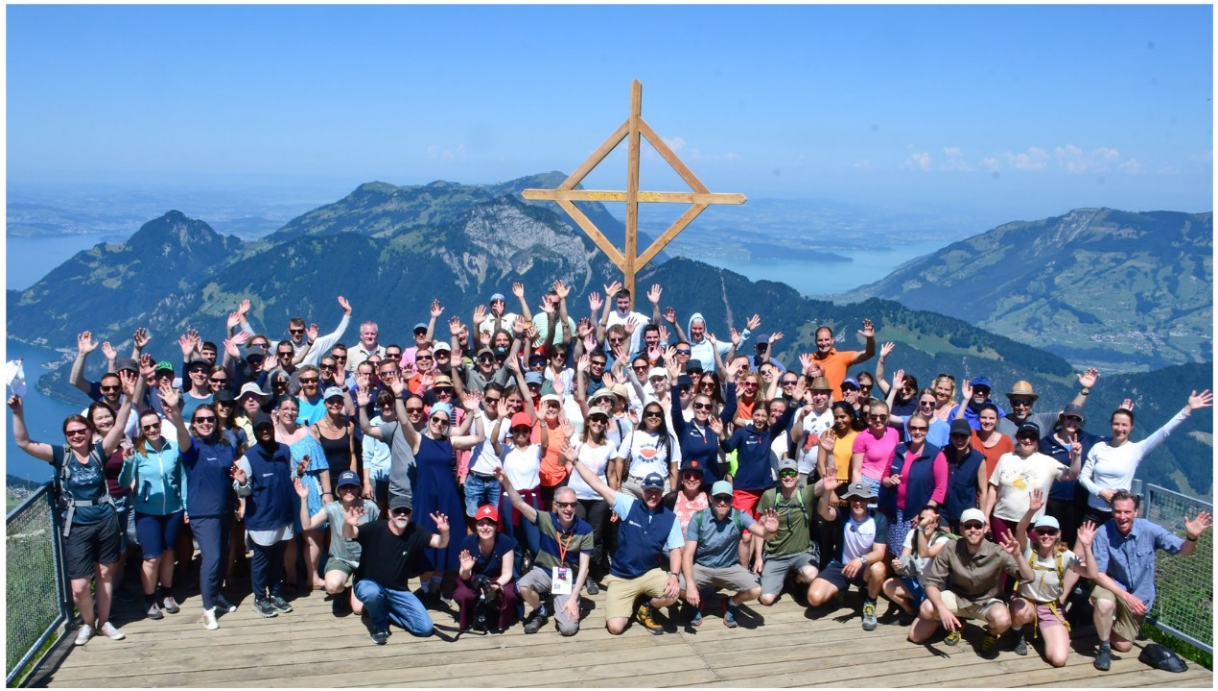
Cash USD ~84 M (CHF 68 M*, incl. short-term time deposits) ensures funding into late 2027

*Financials as per June 30, 2026.
IND, investigational new drug.

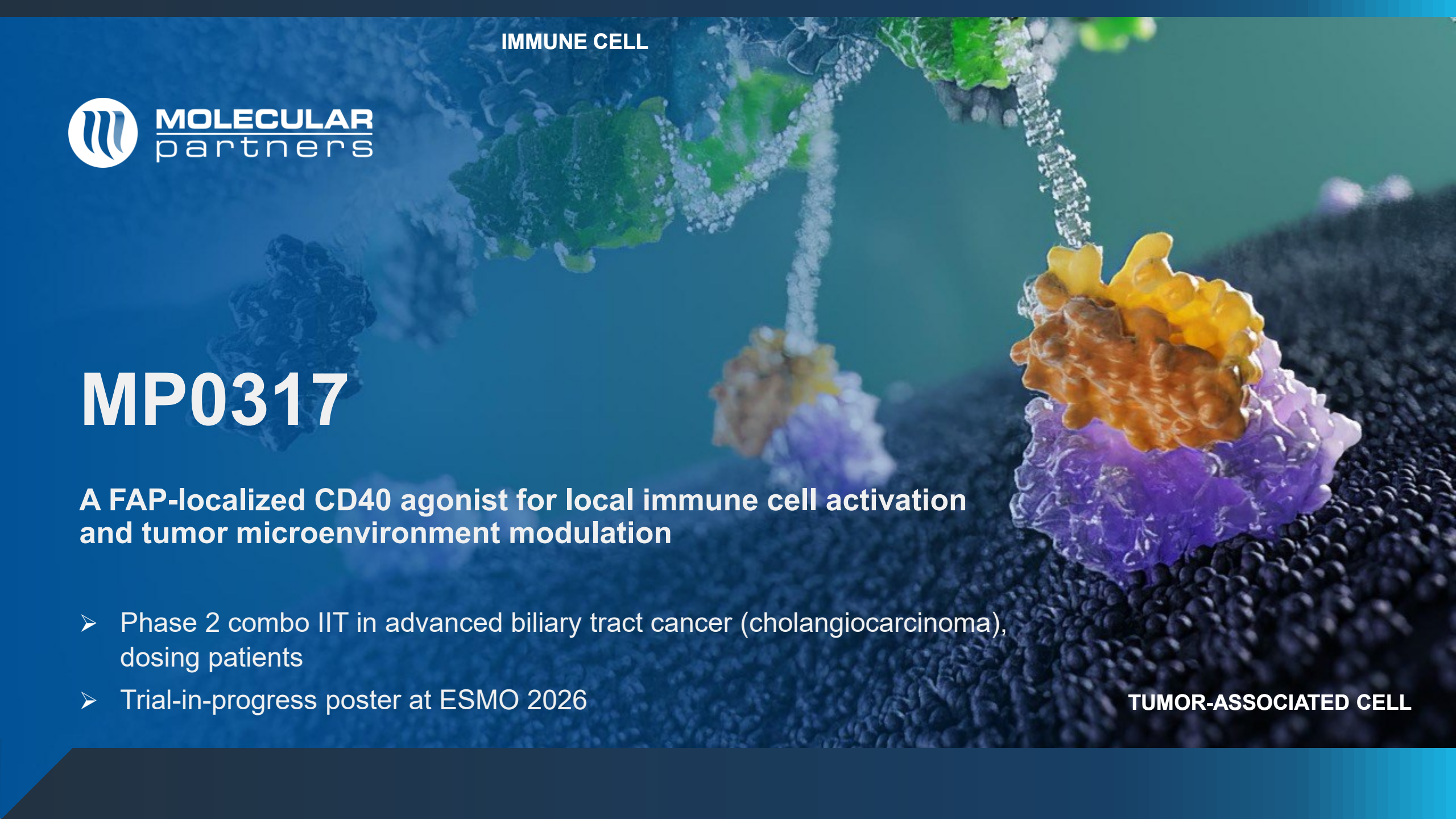
MOLECULAR partners

Twenty Years of Pioneering
DARPin Therapeutics for Patients

Thank You



Our Team, Summer 2025



MOLECULAR partners

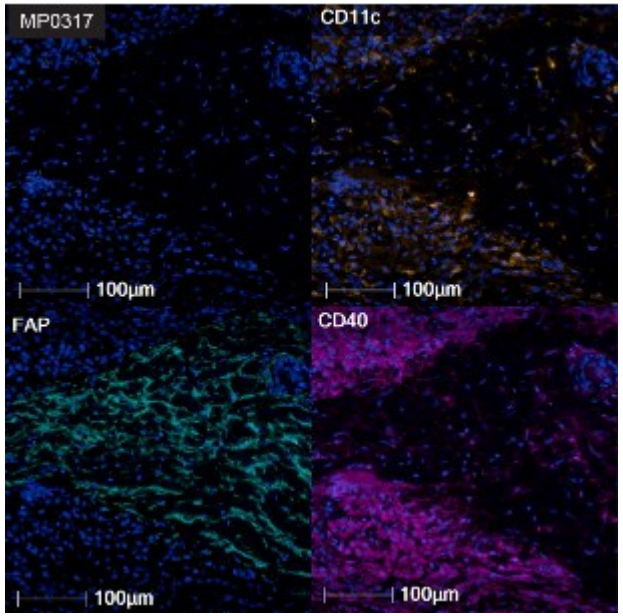
MP0317

A FAP-localized CD40 agonist for local immune cell activation and tumor microenvironment modulation

- Phase 2 combo IIT in advanced biliary tract cancer (cholangiocarcinoma), dosing patients
- Trial-in-progress poster at ESMO 2026

MP0317 Ph1: Biological PoC of Tumor Microenvironment Remodeling

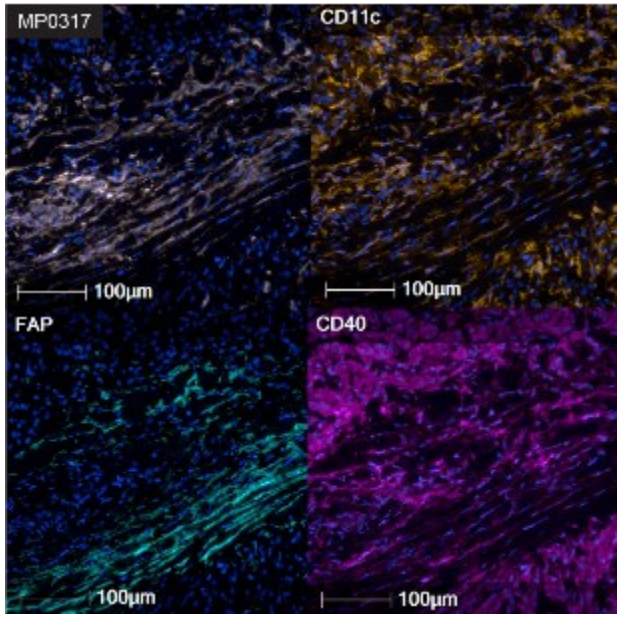
PRIOR TO TREATMENT

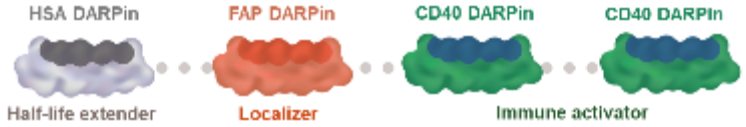


MP0317

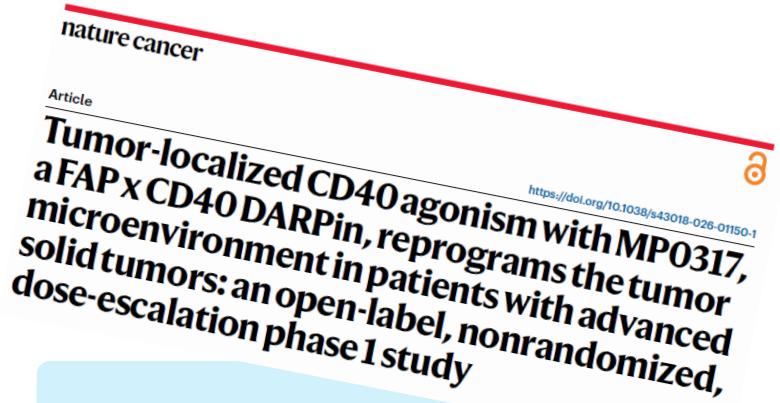
DC infiltration

CYCLE 2 DAY 8





High DC infiltration in FAP-positive tumor area in presence of MP0317


nature cancer

Article

https://doi.org/10.1038/s43018-026-01150-1

Tumor-localized CD40 agonism with MP0317, a FAP x CD40 DARPin, reprograms the tumor microenvironment in patients with advanced solid tumors: an open-label, nonrandomized, dose-escalation phase 1 study

- **46 patients treated** in 9 cohorts
- **Favorable safety profile** across all tested dose cohorts up to highest planned dose (10 mg/kg)
- **Clinical evidence** of tumor-localized CD40 pathway and immune cell activation, leading to **tumor microenvironment remodeling**

Steeghs et al. Nat Cancer 2026.

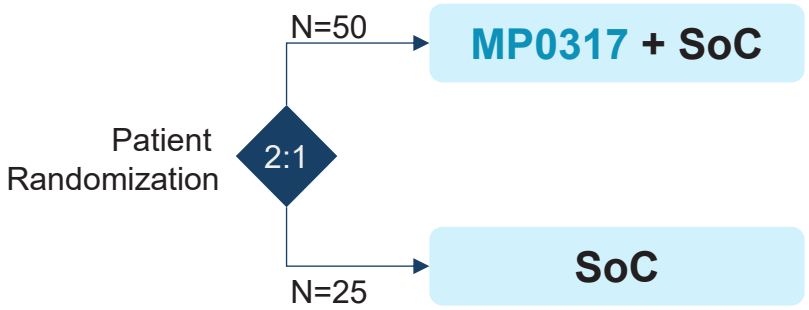
Tumor biopsy of a patient with GIST in Cohort 5b (Q1W); biopsy location: peritoneum.
DC, dendritic cell; FAP, fibroblast activation protein; GIST, gastrointestinal stromal tumor.

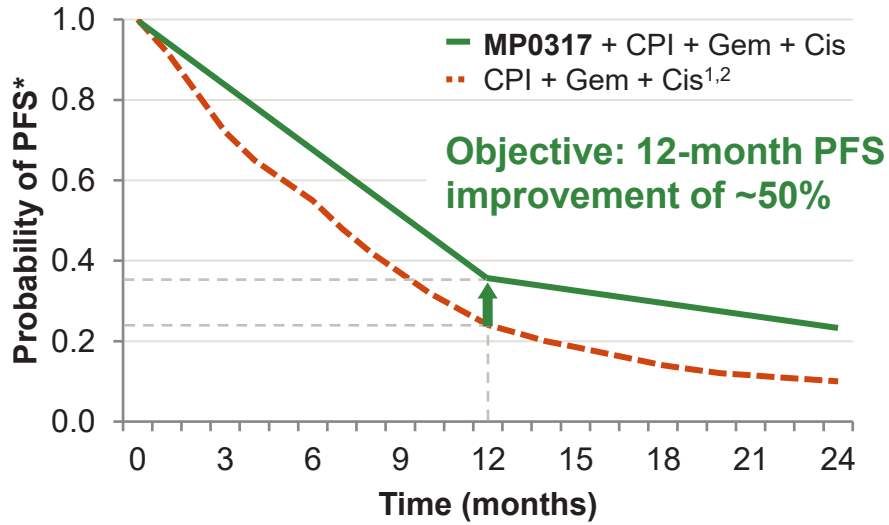
MP0317 Phase 2 Trial in Cholangiocarcinoma, IIT in France

Study Overview

- 1st line adv. biliary tract cancer (cholangiocarcinoma)
- Investigator-initiated, randomized, PoC
- MP0317 combined with SoC: durvalumab & chemo
- Why cholangiocarcioma:
  - High FAP expression
  - Immune suppressive TME

Study Design





Status

- 9 sites actively recruiting
- Patient treatment ongoing
- Trial-in-progress poster at ESMO 2026
- Data update expected in 2027, trial completion in 2028

MOLECULAR partners

Cis, cisplatin; CPI, check-point inhibitor; Gem, gemcitabine; PFS, progression-free survival; SoC, standard of care; TME, tumor microenvironment.

*Probability of PFS figure is a conceptual overview/estimation based on data from 1. TOPAZ-1 study (Oh et al., NEJM Evid 2022) and 2. KEYNOTE 996 study (Kelley et al., Lancet 2023). Expected 12-month PFS with SoC < 24%, MP0317 phase 2 hypothesis to improve by ~50%.