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March 13, 2026

Open Letter to the Application Review Subcommittee

Re: CLIN2-19191 – TriLeukeVax (TLV)

Dear Members of the Application Review Subcommittee,

I am writing to express my support for the TriLeukeVax (TLV) clinical program proposed by Dr. Karin Gaensler and colleagues at the University of California, San Francisco. As Director of the Hematologic Malignancies Research Institute at City of Hope and a long-standing investigator in immunotherapy leukemia therapeutics, I would like to emphasize the importance of continuing to advance innovative cellular and immune-based therapies for patients with acute myeloid leukemia (AML).

Despite important progress in AML treatment over the past decade, relapse remains the central challenge in the management of this disease. Although many patients achieve remission with modern therapies, a substantial proportion ultimately experience relapse, particularly older adults who are not candidates for stem cell transplantation. For these patients, the ability to maintain durable remission remains one of the most significant unmet needs in leukemia care.

Developing strategies capable of eliminating residual leukemic blasts and stem cells and sustaining remission therefore represents a major priority within the AML research community. Approaches that harness immune mechanisms to recognize and control leukemia have shown great promise in a variety of hematologic malignancies, and continued innovation in this area is essential.

The TriLeukeVax program represents a thoughtful and innovative attempt to address this challenge. By engineering autologous leukemia cells to stimulate anti-leukemic immune responses, this approach seeks to activate immune surveillance mechanisms capable of targeting residual leukemic stem cells that may persist following remission. Importantly, such a strategy has the potential to be broadly applicable and may be combined with existing or emerging therapies aimed at improving long-term outcomes for patients with AML, including patients undergoing transplant.

Programs such as TLV also align with the broader mission of the California Institute for Regenerative Medicine to advance transformative cellular and regenerative medicine approaches for serious diseases. From its earliest days, CIRM has played a critical role in supporting pioneering cellular therapy programs that have helped establish California as a global leader in regenerative medicine. Continued support for innovative programs that apply cellular and immune-engineering strategies to difficult diseases—including hematologic malignancies—remains an important component of that vision.

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Within the AML research community, there is strong recognition that relapse prevention represents one of the most important frontiers in leukemia therapy. The TLV program reflects a creative and scientifically grounded effort to address this challenge through a novel cellular immunotherapy strategy. Advancing early-phase clinical investigation of such approaches is essential if we are to continue making progress against this difficult disease.

For these reasons, I believe the TriLeukeVax program represents an important and innovative effort to develop new strategies capable of improving long-term remission and survival for patients with AML. I appreciate the Committee's consideration of this proposal and its potential impact for patients affected by this serious disease.

Sincerely,

A handwritten signature in black ink, appearing to read 'Stephen J. Forman', with a stylized flourish at the end.

Stephen J. Forman, MD

Director, Hematologic Malignancies Research Institute

Director, T Cell Therapeutics Research Institute

Professor, Department of Hematology & Hematopoietic Cell Transplantation and

Department of Medical Oncology and Therapeutics Research