Caribou Biosciences Announces Late-Breaking Presentations at the 2026 Tandem Meetings of ASTCT® and CIBMTR®

February 4, 2026

- *Clinical data disclosed in November 2025 to be presented at medical meeting with new supportive translational data for both programs*
    - *Vispa-cel (CB-010) ANTLER phase 1 translational and clinical data demonstrate efficacy and durability that is on par with autologous CAR-T cell therapy in 2L LBCL patients*
    - *CB-011 CaMMouflage phase 1 translational and clinical data correlate CAR-T cell expansion with deep, durable responses and support the regimen selected for dose expansion*

BERKELEY, Calif., Feb. 04, 2026 (GLOBE NEWSWIRE) -- Caribou Biosciences, Inc. (Nasdaq: CRBU), a leading clinical-stage CRISPR genome-editing biopharmaceutical company, today announced presentations at the 2026 Tandem Meetings of ASTCT® and CIBMTR® taking place February 4-7 in Salt Lake City, UT. Clinical data disclosed in November 2025 will be presented with new supportive translational data in a poster presentation on the vispa-cel ANTLER phase 1 clinical trial in relapsed or refractory B cell non-Hodgkin lymphoma (r/r B-NHL) and in an oral presentation on the ongoing CB-011 CaMMouflage phase 1 clinical trial in relapsed or refractory multiple myeloma (r/r MM).

“Selection of both of Caribou’s allogeneic CAR-T cell programs as late-breaking presentations underscores the strength of the safety, efficacy, and durability data and the potential impact these off-the-shelf CAR-T cell therapies can have in addressing urgent patient need,” said Rachel Haurwitz, PhD, Caribou’s president and CEO. “Together, these data reinforce our belief that vispa-cel and CB-011 are best-in-class allogeneic CAR-T cell therapies for second-line large B cell lymphoma and relapsed or refractory multiple myeloma, respectively, with the potential to improve access to the benefits of cellular therapy.”

The Tandem abstracts are now available at www.tandemmeetings.com and presentations will be available on Caribou’s Scientific Publications webpage following the event. Details of the presentations:

Poster Session: Late-breaking poster abstracts
Title: Vispa-cel, an allogeneic anti-CD19 CAR-T cell therapy with a PD-1 knockout, in patients with relapsed/refractory B cell non-Hodgkin lymphoma (r/r B-NHL): updated results from the ANTLER phase 1 clinical trial
Presenting author: Mehdi Hamadani, MD, professor of medicine and section chief of hematologic malignancies at Medical College of Wisconsin and investigator for the ANTLER trial
Poster ID: 29592
Date and time: Thursday, February 5, 2026 at 6:30-8:00 PM MST
Location: Hall AB

The ANTLER data to be presented show that vispa-cel drives outcomes that are on par with autologous CAR-T therapies.

Oral Session: Late-breaking abstracts
Title: CB-011, an allogeneic anti-BCMA CAR-T cell therapy with immune cloaking, for patients with relapsed/refractory multiple myeloma (r/r MM): dose escalation results from the CaMMouflage phase 1 trial
Presenting author: Adriana Rossi, MD, director of CAR-T and stem cell transplant clinical program at the center of excellence for multiple myeloma at Mount Sinai and investigator for the CaMMouflage trial
Presentation ID: LBA-2
Date and time: Saturday, February 7, 2026 at 3:15 PM MST
Location: Ballroom AB

The CaMMouflage data to be presented correlate CAR-T cell expansion with deep, durable responses and support the regimen selected for dose expansion.

About vispacabtagene regedleucel
Vispacabtagene regedleucel (vispa-cel; formerly known as CB-010) is an allogeneic anti-CD19 CAR-T cell therapy being evaluated in patients with relapsed or refractory B cell non-Hodgkin lymphoma (r/r B-NHL). To Caribou’s knowledge, vispa-cel is the first allogeneic CAR-T cell therapy in the clinic with a PD-1 knockout, a genome-editing strategy designed to enhance CAR-T cell activity by limiting premature CAR-T cell exhaustion. The FDA granted vispa-cel Regenerative Medicine Advanced Therapy (RMAT), Orphan Drug, and Fast Track designations for B-NHL.

About the ANTLER phase 1 clinical trial
The ANTLER clinical trial is a multicenter, open-label phase 1 trial evaluating vispa-cel in adult patients with r/r B-NHL. Eighty-four patients have been treated in the ANTLER clinical trial as of September 2, 2025. Using a 3+3 enrollment strategy, safety and efficacy were assessed in 16 patients in dose escalation evaluating $40x10^6$, $80x10^6$, and $120x10^6$ CAR-T cell dose levels with a lymphodepletion (LD) regimen of cyclophosphamide at 60 mg/kg/day for 2 days followed by fludarabine at 25 mg/m^2/day for 5 days. Forty-one second-line large B cell lymphoma (2L LBCL) patients were enrolled in the dose expansion portion, and $80x10^6$ CAR-T cells was selected as the recommended phase 2 dose (RP2D). An additional 22 2L LBCL patients were enrolled in the confirmatory cohort, which prospectively evaluated the Company’s partial HLA matching strategy. Five patients were enrolled in a cohort of 3L+ LBCL patients with prior exposure to CD19-targeted therapy. Additional information on the ANTLER trial (NCT04637763) can be found at clinicaltrials.gov.

About CB-011
CB-011 is an allogeneic anti-BCMA CAR-T cell therapy being evaluated in patients with relapsed or refractory multiple myeloma (r/r MM) in the CaMMouflage phase 1 clinical trial. To Caribou’s knowledge, CB-011 is the first allogeneic CAR-T cell therapy in the clinic that is engineered to enable

activity through an immune cloaking strategy with a B2M knockout and insertion of a B2M–HLA-E fusion protein to blunt immune-mediated rejection. CB-011 has been granted Fast Track and Orphan Drug designations by the FDA.

About the CaMMouflage phase 1 clinical trial
The CaMMouflage clinical trial is a multicenter, open-label phase 1 trial evaluating CB-011 in adults with r/r MM who have been treated with three or more prior lines of therapy. Using a 3+3 dose escalation design, safety and efficacy of CB-011 were evaluated in 48 patients at multiple dose levels and two different lymphodepletion (LD) regimens. Thirteen patients were treated with a single dose of CB-011 ($50x10^6$ [N=3], $150x10^6$ [N=7], and $450x10^6$ [N=3] CAR-T cells) with an LD regimen of 300 mg/m^2 cyclophosphamide and 30 mg/m^2 fludarabine daily for 3 days, and 35 patients were treated with a single dose of CB-011 ($150x10^6$ [N=6], $300x10^6$ [N=13], $450x10^6$ [N=13], and $800x10^6$ [N=3] CAR-T cells) with an LD regimen of 500 mg/m^2 cyclophosphamide and 30 mg/m^2 fludarabine daily for 3 days. The dose expansion portion of the trial will evaluate safety and efficacy of CB-011 at $450x10^6$ CAR-T cells with the selected LD of 500 mg/m^2 cyclophosphamide and 30 mg/m^2 fludarabine daily for three days. Additional information on the CaMMouflage trial (NCT05722418) can be found at clinicaltrials.gov.

About Caribou Biosciences, Inc.
Caribou is a clinical-stage CRISPR genome-editing biopharmaceutical company dedicated to developing transformative therapies for patients with devastating diseases. The Company's genome-editing platform, including its Cas12a chRDNA technology, enables superior precision to develop cell therapies that are armored to potentially improve activity against diseases. Caribou is focused on vispacabtagene regedleucel (vispa-cel) and CB-011 as off-the-shelf CAR-T cell therapies that have the potential to provide broad access and rapid treatment for patients with hematologic malignancies. Follow the Company @CaribouBio and visit www.caribou bio.com.

Forward-looking statements and important information
This press release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. In some cases, you can identify forward-looking statements by terms such as "may," "will," "should," "expect," "plan," "anticipate," "could," "intend," "target," "project," "contemplate," "believe," "estimate," "predict," "potential," or "continue," or the negative of these terms or other similar expressions, although not all forward-looking statements contain these words. These forward-looking statements include, but are not limited to, any statements regarding the initiation, timing, progress, strategy, plans, objectives, expectations (including as to the results) with respect to the Company's CAR-T cell therapy product candidate clinical trials, including the ability to successfully develop its CAR-T cell therapy product candidates and to obtain and maintain regulatory approval for these product candidates; the likelihood of its clinical trials demonstrating safety and efficacy of its CAR-T cell therapy product candidates; the beneficial characteristics, safety, efficacy, therapeutic effects, and potential advantages of its CAR-T cell therapy product candidates; and the likelihood of regulatory filings and approval for its CAR-T cell therapy product candidates. Management believes that these forward-looking statements are reasonable as and when made. However, such forward-looking statements are subject to risks and uncertainties, and actual results may differ materially from any future results expressed or implied by the forward-looking statements. Risks and uncertainties include, without limitation, risks inherent in the development of allogeneic CAR-T cell therapy products; uncertainties related to the initiation, cost, timing, progress, and results of its current and future clinical trials; the risk that initial, preliminary, or interim clinical trial data will not ultimately be predictive of the safety and efficacy of its CAR-T cell therapy product candidates or that clinical outcomes may differ as patient enrollment continues and as more patient data becomes available; the risk that different conclusions or considerations are reached once additional data have been received and fully evaluated; the ability to obtain key regulatory input and approvals; and risks related to the Company's limited operating history, history of net operating losses, financial position, and its ability to raise additional capital as needed to fund its operations and CAR-T cell therapy product candidate development, including the ability to fully fund its pivotal phase 3 clinical trial for vispa-cel; as well as other risk factors described from time to time in the Company's filings with the Securities and Exchange Commission (SEC), including its Annual Report on Form 10-K for the year ended December 31, 2024, and subsequent SEC filings. In light of the significant uncertainties in these forward-looking statements, you should not rely upon forward-looking statements as predictions of future events. Except as required by law, the Company undertakes no obligation to update publicly any forward-looking statements for any reason.

Caution should be exercised when interpreting results from separate trials involving commercially approved autologous CAR-T cell therapies. The results of autologous CAR-T cell therapies referenced in this press release have been derived from publicly available reports of clinical trials not conducted by the Company, and the Company has not performed any head-to-head trials comparing any of these autologous CAR-T cell therapies with vispa-cel. As such, the results of these autologous CAR-T cell therapy clinical trials may not be comparable to clinical results for vispa-cel. The autologous CAR-T cell therapy clinical trials vary in material ways from the ANTLER clinical trial for vispa-cel including with respect to trial design and duration, patient population, patient characteristics, clinical trial phase, treatment protocols, investigators, and other important factors. As a result, cross-trial comparisons may have no interpretive value on the Company's existing or future clinical results. For further information and to understand these material differences, you should read the reports for the autologous CAR-T cell therapy clinical trials and the sources included in the Company's corporate presentations on its website.

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