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PATENT ASSIGNMENT COVER SHEET

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NATURE OF CONVEYANCE:	ASSIGNMENT

CONVEYING PARTY DATA

Name	Execution Date
JOHN M. LINCECUM	12/07/2015
BINGBING JIANG	08/07/2015
STEVEN N. PERRIN	09/14/2015
ALAN GILL	09/16/2015
CYNTHIA A. GILL	09/14/2015
FERNANDO G. VIEIRA	09/16/2015

RECEIVING PARTY DATA

Name:	ALS THERAPY DEVELOPMENT INSTITUTE
Street Address:	300 TECHNOLOGY SQUARE
Internal Address:	SUITE 400
City:	CAMBRIDGE
State/Country:	MASSACHUSETTS
Postal Code:	02139

PROPERTY NUMBERS Total: 1

Property Type	Number
Application Number:	16125317

CORRESPONDENCE DATA

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ATTORNEY DOCKET NUMBER:	224823-436510
NAME OF SUBMITTER:	CYNTHIA M. BOTT, PH.D.
SIGNATURE:	/Cynthia M. Bott/
DATE SIGNED:	09/24/2018

505108606 PATENT STANDARD REEL: 046953 FRAME: 0001

Total Attachments: 9 source=2224823-436510_Assignment#page1.tif source=2224823-436510_Assignment#page2.tif source=2224823-436510_Assignment#page3.tif source=2224823-436510_Assignment#page4.tif source=2224823-436510_Assignment#page5.tif source=2224823-436510_Assignment#page6.tif source=2224823-436510_Assignment#page7.tif source=2224823-436510_Assignment#page8.tif source=2224823-436510_Assignment#page8.tif

PATENT REEL: 046953 FRAME: 0002

ASSIGNMENT

I/We,

- (1) JOHN M. LINCECUM, of Jamaica Plain, MA:
- (2) BINGBING JIANG, of Boston, MA;
- (3) STEVEN N. PERRIN, of Newbury, MA;
- (4) ALAN GILL, of Reading, MA;
- (5) CYNTHIA A. GILL, of Reading, MA; and
- (6) FERNANDO G. VIEIRA, of Quincy, MA

for good and valuable consideration, receipt of which is hereby acknowledged, have assigned, sold and transferred to, by virtue of our agreement with ALS Therapy Development Institute and do hereby assign, sell and transfer to, ALS Therapy Development Institute, a registered 501(c)3 nonprofit organized and existing under the laws of The Commonwealth of Massachusetts and having an office and a place of business at 300 Technology Square, Suite 400, Cambridge, MA 02139, its successors and assigns, all hereinafter referred to as the ASSIGNEE:

- (1) the entire right, title and interest in the United States and in all countries throughout the world in and to any and all of our inventions and discoveries disclosed in the United States Provisional Application for Patent entitled ANTI-CD40L ANTIBODIES AND METHODS FOR TREATNG CD40L-RELATED DISEASES OR DISORDERS, and filed in the United States Patent and Trademark Office on February 3, 2015, under Application Number 62/111,261 and to any applications claiming priority therefrom;
- (2) the full and complete right to file patent applications in the name of the ASSIGNEE, its designee, or in my/our names at the election of the ASSIGNEE or its designee, on the aforesaid inventions, discoveries and applications in the United States and in any other country of the world:
- (3) the entire right, title and interest in and to any Letters Patent which may issue thereon in the United States or in any other country of the world, and in and to any renewals, revivals, reissues, reexaminations, extensions, continuations and divisions thereof; and
- (4) the entire right, title and interest in and to all Convention and Treaty Rights of all kinds thereon, including without limitation all rights of priority in any country of the world, in and to the above inventions, discoveries and applications.

I/We hereby authorize and request the competent authorities to grant and to issue any and all such Letters Patent in the United States and throughout the world to the ASSIGNEE of the entire right, title and interest therein, as fully and entirely as the same would have been held and enjoyed by me/us had this assignment, sale and transfer not been made.

I/We agree, at any time, upon the request of the ASSIGNEE to execute and to deliver to the ASSIGNEE any additional applications for patents for said inventions and discoveries, or any part or parts thereof, and any applications for patents of confirmation, registration and importation based on any Letters Patent issuing on said inventions, discoveries or applications, and divisions, continuations, renewals, revivals, reissues, reexaminations and extensions thereof.

I/We further agree at any time to execute and to deliver upon request of the ASSIGNEE such additional documents, if any, as are necessary or desirable to secure patent protection on said inventions, discoveries and applications throughout all countries of the world, and otherwise to do the necessary to give full effect to and to perfect the rights of the ASSIGNEE under this Assignment, including the execution, delivery and procurement of any and all further documents evidencing this assignment, transfer and sale as may be necessary or desirable.

ALS Therapy Development Institute Morney Docket No.: 224823-365289 1) John M. Lincecum

Commonwealth of Massachusetts County of Middlesex

On this 7th day of <u>Lecenber</u>, 20/5, before me, the undersigned notary public, personally appeared **John M. Lincecum**, proved to me through satisfactory evidence of identification which was/were: ☐ personal knowledge of identity, ☐ a driver's license, ☐ other (please identify) 5 1104 9092, to be the person whose name is signed on this document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief.

Notary Public
My Commission Expires: Qug7 2023.

	<u> Alaghang Stang</u>
	(2) Bingbing Jiang
	Date: <u>August 1 3015</u>
Commonwealth of Massachusetts County of Middlesex	*
appeared <i>Bingbing Jiang</i> , proved to was/were: □ personal knowledge of ####################################	, 20/5, before me, the undersigned notary public, personally me through satisfactory evidence of identification which identity, \(\square \text{a} \) a driver's license, \(\square \text{other} \) other (please identify) whose name is signed on this document, and who swore or
affirmed to me that the contents of the knowledge and belief.	he document are truthful and accurate to the best of his/her
GGC) 1/24/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4	
Notary Public	
My Commission Expires 1114 L. 200	0.5

	(3) Steven N. Perrîn
	Date: Lighten ber 14 2015
Commonwealth of Massachusetts County of Middlesex	
appeared Steven N. Perrin, proved to m was/were: personal knowledge of ide	Display before me, the undersigned notary public, personally a through satisfactory evidence of identification which entity. To driver's license. other (please identify) se name is signed on this document, and who swore or locument are truthful and accurate to the best of his/her
<u>Vaces & La CY</u> Notary Public My Commission Expires: <u>Magast Se</u>	

	alan Gell
	(4) Alan Gill
	Date: 16 SEP 2015
Commonwealth of Massachusetts County of Middlesex On this 1/2 day of Apple . 3 appeared Alan Gill, proved to me through	20/5, before me, the undersigned notary public, personally ugh satisfactory evidence of identification which
was/were: personal knowledge of ic	dentity, [a] a driver's license, [a] other (please identify) ose name is signed on this document, and who swore or
	document are truthful and accurate to the best of his/her
Vocas - W. U. C. C. C. V. Notary Public My Commission Expires: Ung 7 2020.	
My Commission Expires: 444 7 8000	

(5) Cynthia A. Gill

Date: \(\sum_{\text{QConstant}} \sum_{\text{M}} \)

Commonwealth of Massachusetts

County of Middlesex

On this \(\frac{14}{10} \) day of \(\frac{\text{QConstant}}{\text{QOS}} \), before me, the undersigned notary public, personally appeared \(\frac{Cynthia}{20} \) A. \(\frac{Gill}{6} \), proved to me through satisfactory evidence of identification which was/were: \(\sum_{\text{personal}} \text{personal knowledge of identity, } \sum_{\text{a}} \sum_{\text{driver's license.}} \(\sum_{\text{other the person whose name is signed on this document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief.

\(\sum_{\text{Acc} \text{QCOMB}} \)

\(\sum_{\text{Otary Public}} \)

My Commission Expires: \(\sum_{\text{Cagual}} \sum_{\text{QCOMB}} \)

(6) Fernando G. Vieira Date: 9/14/2015 On this 16th day of 1016. 2015, before me, the undersigned notary public, personally appeared Fernando G. Vieira, proved to me through satisfactory evidence of identification which was/were: ☐ personal knowledge of identity, ☐ a driver's license, ☐ other (please _____, to be the person whose name is signed on this document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of

his/her knowledge and belief.

Commonwealth of Massachusetts

County of Middlesex

Care Constant Constant Public

My Commission Expires: 7* (1980)

ACKNOWLEDGMENT OF ASSIGNEE

ALS Therapy Development Institute
By: Steven N. Perrin CEO/CSO/President
Date: <u>Option bed 14 2015</u>
Commonwealth of Massachusetts County of Middlesex
On this day of, 20 /, before me, the undersigned notary public, personally appeared Steven N. Perrin, proved to me through satisfactory evidence of identification which was/were: \(\subseteq \text{ personal knowledge of identity.} \subseteq a driver's license. \subseteq \text{ other (please identify)}, to be the person whose name is signed on this document, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his/her knowledge and belief.
Notary Public My Commission Expires: *** (Internal Commission Comm