ARCTURUS THERAPEUTICS

Building the Next Generation of RNA Medicines

BUILDING INNOVATIVE RNA MEDICINES

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Company Highlights



Arcturus is a Clinical-Stage mRNA Medicines and Vaccines Company

Publicly Traded (NASDAQ:ARCT)

Headquarters: San Diego, CA

Number of Employees: 90

Founded: 2013

Strong Intellectual Property Technology Portfolio

- 187 Patents & Patent Applications
- LUNAR® Delivery Technology
- STARR™ RNA Manufacturing Process
- Drug Product (LUNAR® + STARR™) Manufacturing Process



Arcturus Technologies Validated by Multiple Strategic Partners











LUNAR® Delivery Technology



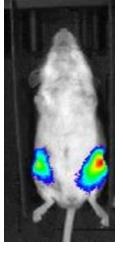


BUILDING INNOVATIVE RNA MEDICINES

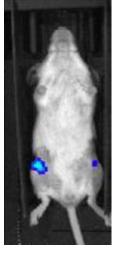
STARR™ mRNA Superior to Conventional mRNA

Self-Transcribing and Replicating mRNA (STARR) delivered with LUNAR® provides higher protein expression and potentially longer-lasting duration of protein expression in mouse

STARR™ Technology 30-Fold Higher Protein Expression



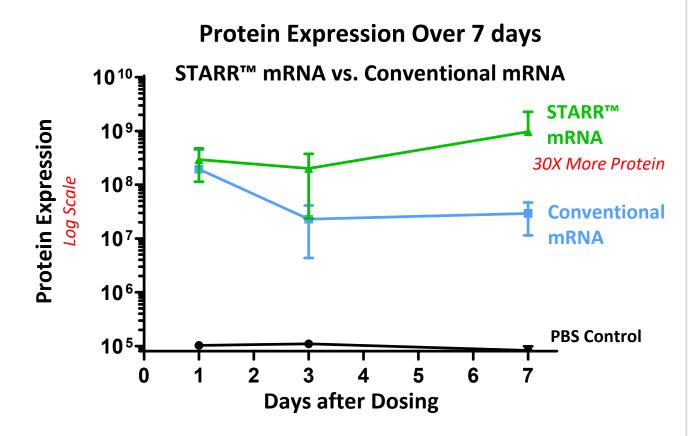
STARR™ Technology



Conventional mRNA



PBS Control



Single Dose of STARR™ mRNA with LUNAR® Delivery Provides Enhanced Protein Expression



Arcturus Pipeline of mRNA Medicines

Name	Indication	IND/CTA Estimated Timing	Clinical Stage	Route of Administration	Target Organ	Target Cells	Prevalence Worldwide
LUNAR-OTC (ARCT-810)	Ornithine Transcarbamylase (OTC) Deficiency	IND & CTA: Trials Allowed to Proceed	U.S. Phase 1b N.Z. Phase 1	Intravenous (i.v.)	Liver	Hepatocytes	> 10,000
LUNAR-COV19	COVID-19 Vaccine	CTA Summer 2020	Preclinical	Intramuscular (i.m.)	Muscle	Myocytes Dendritic Cells	Global
LUNAR-CF	Cystic Fibrosis	IND 2021	Preclinical	Inhaled Aerosol	Lung	Bronchial Epithelial Cells	> 70,000
LUNAR-CV	Rare Cardiovascular Disease	IND 2022	Preclinical	Intravenous (i.v.)	Liver	Hepatocytes	Undisclosed
LUNAR-MD	Rare Metabolic Disease	IND 2022	Preclinical	Intravenous (i.v.)	Liver	Hepatocytes	Undisclosed

- LUNAR-OTC (ARCT-810): Phase 1b & Phase 1 Clinical Trials Allowed to Proceed Under IND & CTA, Respectively
- LUNAR-COV19: CTA Filing Target Summer 2020
- LUNAR-CF: IND Application Filing Target 2021

Arcturus Platform: Enabling Genetic Medicines



Program	Partner	Indication	Arcturus Chemistry	Arcturus Delivery	Program Status
LUNAR-GSD3	ultrageny	Glycogen Storage Disease Type III	mRNA	LUNAR® Hepatocytes	Target IND 2021
LUNAR-RARE	ultrageny	Undisclosed Rare Disease	mRNA	LUNAR [®] Hepatocytes	Preclinical
LUNAR-HBV	Johnson-Johnson	Hepatitis B	RNA	LUNAR [®] Hepatocytes	Preclinical
LUNAR-NASH	Takeda	NASH	RNA	LUNAR® Stellate Cells	Preclinical
LUNAR-RPL	Large Pharma	Infectious Disease Prophylactic Vaccines	SGI's Replicon RNA	LUNAR®	Preclinical
LUNAR-AH	Large Animal Health Pharma	Infectious Disease Prophylactic Vaccines	SGI's Replicon RNA	LUNAR®	Preclinical

- Greater than \$1 Billion in Potential Milestones & Royalties
- Enabling Different Types of RNA Messenger RNA, Gene Editing RNA, Replicon RNA
- Multiple Cell Types Targeted
- LUNAR-GSD3 (UX053) partnered with Ultragenyx IND Target 2021

BUILDING INNOVATIVE RNA MEDICINES

Arcturus Developing COVID-19 Vaccine with Duke-NUS

Arcturus Duke-NUS Partnership Initiated March 4, 2020

- Duke-NUS Medical School is an academic world leader in coronaviruses and infectious diseases
- Funded, up to \$10M



Arcturus COVID-19 Vaccine Benefits From Duke-NUS Genetic Correlation System

- Helps Arcturus learn more quickly about the LUNAR-COV19 efficacy and safety profile
- Specific gene changes correlate with efficacy and safety
 - Level of neutralizing antibody titers
 - Safety-related adverse events (headache, fever)
- Gene expression changes can be measured within the first 5 days following vaccination

The data generated from the Duke-NUS system gives Arcturus the ability to more efficiently select the dose and streamline the vaccine development program, and potentially accelerate timeline

Arcturus COVID-19 Vaccine has Significant Advantages



Very Low Dose

- Result of combining Arcturus' LUNAR® and STARR™ technologies
- Means potentially more people vaccinated per manufactured batch

Potential Single Shot

- Small, single intramuscular injection
- Simpler logistics for vaccinating large populations

Utilizes STARR™ mRNA

- STARR™ mRNA produces 30X more protein than conventional mRNA
- Lasts longer, booster shot may be unnecessary

Contains No Viruses or Viral Material

- No dead viruses, no attenuated viruses, no virus or viral vectors (AAVs) used to deliver the RNA vaccine
- LUNAR® Delivery Technology is Non-Viral

Readily Manufactured

- Arcturus Proprietary Processes
- Proven; Scalable; High yields; High purities

OTC Deficiency Market Opportunity





Ornithine Transcarbamylase (OTC) Deficiency: The most common urea cycle disorder

- The urea cycle converts neurotoxic ammonia to water-soluble urea that can be excreted in urine
- Deficiency in OTC causes elevated blood ammonia, which can lead to neurological damage, coma, and death
- 10,000 worldwide prevalence



Unmet Medical Need

- Present standard of care involves a strict diet (low protein, high fluid intake) plus ammonia scavengers (sodium phenylbutyrate)
- Present standard of care does not effectively prevent life-threatening spikes of ammonia
- Severe OTC Deficiency patients are typically referred for liver transplant, currently the only cure



LUNAR-OTC Aims to Restore Enzyme Function

 Expression of OTC enzyme in liver has potential to restore normal urea cycle activity to detoxify ammonia, preventing neurological damage and removing need for liver transplantation

LUNAR-OTC (ARCT-810) Clinical Plan



Two Single Dose Studies to Initiate in 2020

- Phase 1b clinical trial in up to 12 stable OTC-deficient patients IND allowed to proceed in the U.S.
- Phase 1 clinical trial in up to 30 healthy volunteers Clinical Trial Application (CTA) approved in New Zealand

Primary Goal: Identify safest doses to take forward into multiple dose clinical trials

Primary Endpoints: Safety and tolerability

Exploratory Endpoints: Biomarkers include ureagenesis, plasma ammonia levels and OTC enzyme activity, urine orotic acid levels

Dosing

- Single ascending dose (SAD) studies; randomized, placebo controlled and blinded
- Healthy volunteer study up to 5 dose levels; Patient study up to 3 dose levels
- All doses are within the anticipated range for therapeutic biological effect

Timing of Enrollment (dependent on COVID19 status)

- Healthy volunteers in New Zealand Soon
- OTC-deficient patients in the U.S. Q3/Q4 2020

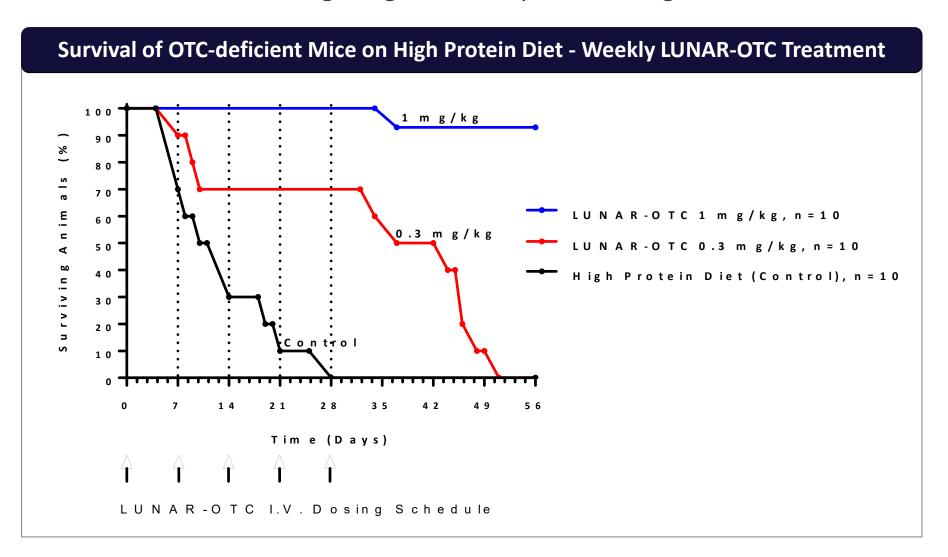
Timing of Human Data (dependent on COVID19 status)

- Phase 1 healthy volunteer study
 - First results will be safety within ~6 weeks after dosing each cohort
 - Study targeted to complete in Q4 2020
- Phase 1b patient study
 - Longer to recruit typical for rare disease studies
 - Estimated timing of data to be provided when study initiates

LUNAR®-OTC



Disease Normalization Following Single and Repeat Dosing in OTC Mouse Model

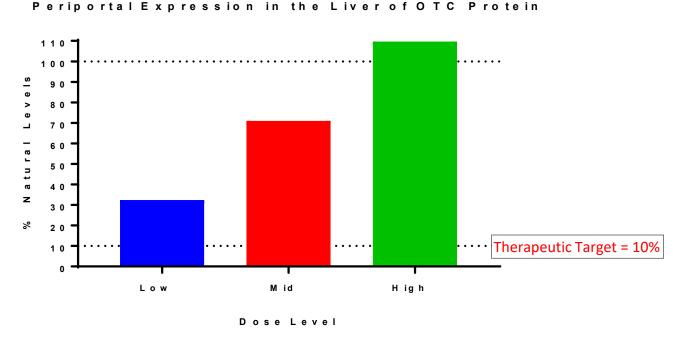


LUNAR-OTC



Exceeds Therapeutic Target of 10% Enzyme Replacement at all Doses in OTC-Deficient Mouse Model

- OTCD impacts ureagenesis (ammonia detoxification)
- The main site of ureagenesis is the periportal region of the liver*
- Establishing 10% of natural enzyme levels is expected to be therapeutically significant



*Li, L. et al. PGC-1α Promotes Ureagenesis in Mouse Periportal Hepatocytes through SIRT3 and SIRT5 in Response to Glucagon. Scientific Reports. 6:24156 | DOI: 10.1038/srep24156, April 2016 *Lamers, W.H., Hakvoort, T.B.M., and Köhler, E.S. 'Molecular Pathology of Liver Diseases' in Monga S.P.S. (ed.), MOLECULAR PATHOLOGY LIBRARY SERIES, Springer Publishing, New York, pp. 125-132 | DOI: 10.1007/978-1-4419-7107-4

LUNAR-OTC treatment increases OTC expression in mouse periportal hepatocytes (main site of ureagenesis)

Cystic Fibrosis Market Opportunity





Cystic Fibrosis: The most common rare disease in the United States

- Caused by genetic mutations in the CFTR gene, resulting in aberrant flux of ions in and out of cells, causing thick mucus buildup in lung airways
- Chronic airway obstruction leads to infection and inflammation, which causes permanent tissue scarring and respiratory failure
- 70,000 worldwide prevalence



Unmet Medical Need

- No CFTR functional corrector is approved for treatment of all patients
- Present standard of care does not effectively prevent long-term effects of mucus accumulation.
 CF patients with late-stage loss of respiratory function require lung transplant



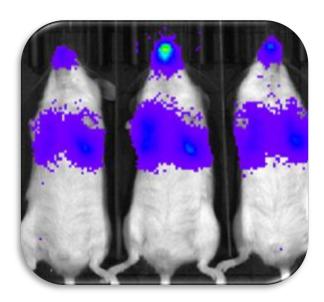
LUNAR-CF Aims to Restore CFTR Function

- An mRNA replacement therapy has the potential to deliver a new copy of CFTR into the lungs of CF patients, independent of any genotype
- A functional CFTR protein can restore chloride channel efflux in the airways, reducing mucus accumulation, tissue scarring and minimizing the progressive respiratory dysfunction observed in CF patients

LUNAR® Delivery of mRNA to Lung (Mouse)

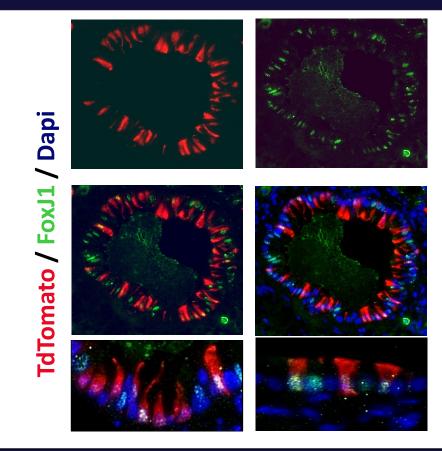


Nebulization



LUNAR® + Luciferase mRNA

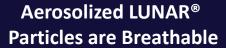
LUNAR® Delivery of mRNA into Bronchial Epithelial Cells (BECs)



Functional Nebulized Delivery of LUNAR®+ mRNA into Lung Epithelial Cells

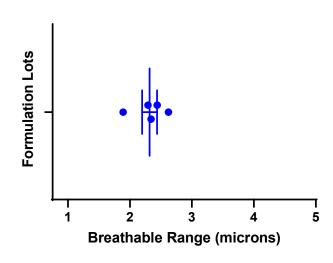
Aerosolized LUNAR®

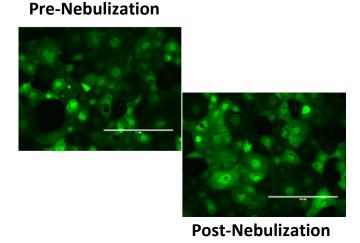


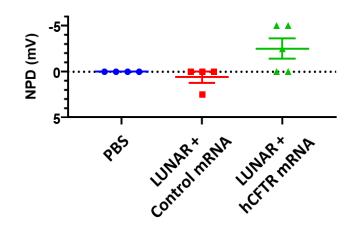


Aerosolized LUNAR® -mRNA (GFP) maintains activity

Aerosolized LUNAR®-CF is functional *in vivo* (mouse)







Aerosolized LUNAR® Droplets are in the Optimal Breathable Range (2-3 microns)

Aerosolized LUNAR® Maintains Function as Measured by GFP Protein Expression & Nasal Potential Difference (NPD)

Arcturus Safety Profile



External Validation

 Multiple strategic partnerships over many years confirms the positive safety profile of Arcturus LUNAR® and mRNA

Arcturus is committed to developing safe mRNA products

15 studies over several years with strategic partners

Top Safety Concern for RNA Medicines is Delivery





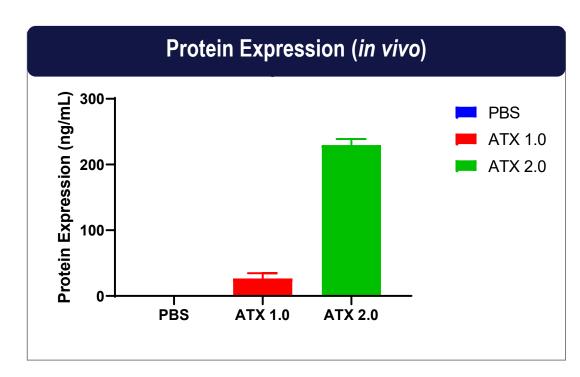
- √ @ 15 mg/kg single dose of non-coding siRNA
- ✓ @ 3 mg/kg x eight (8) weekly doses of non-coding siRNA (total of 24 mg/kg over 2 months)

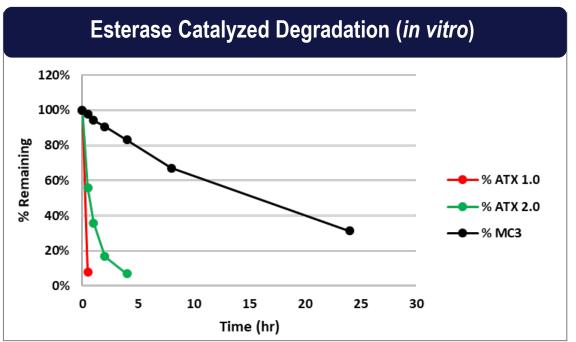
Arcturus mRNA chemistry shows promising efficacy and tolerability data

Efficacy of OTC mRNA in mouse model @ 0.1 – 1 mg/kg

ATX Lipids are Effective and Degrade Rapidly



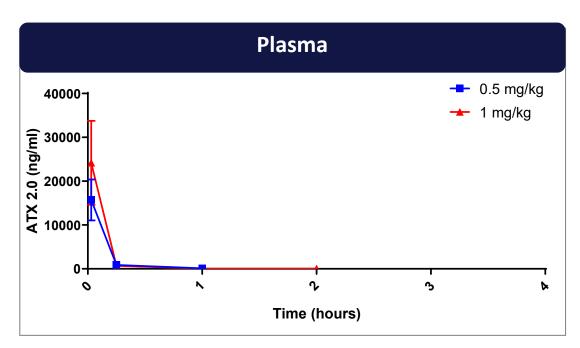


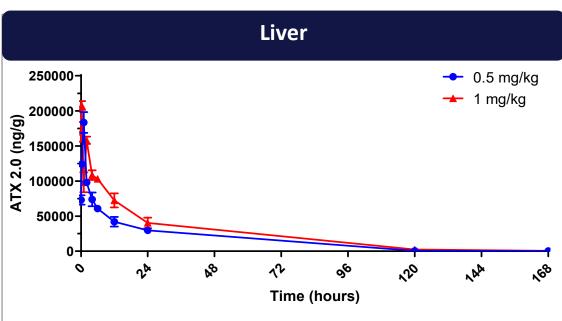


Next Generation ATX Lipids Retain Degradability & Improve Delivery Efficiency



ATX 2.0 Lipid Rapidly Clears in vivo





- ATX Lipid (the major component in LUNAR® technology) is rapidly degraded in vivo
- ATX Lipid Half-Life in the Liver is Approximately 20 hours

Drug Substance: mRNA Design



Arcturus' proprietary mRNA optimization platform

Sustained hEPO activity in NHPs upon repeat dosing

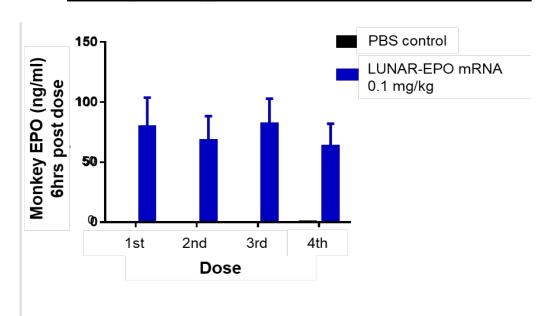
Optimize mRNA sequence Protein Expression

Chemistry Duration
Process Function

Functional Activity



Weekly Dosing in Non-Human Primates (NHPs)



Proprietary mRNA Optimization Platform Demonstrates Sustained Activity Upon Repeat Dosing in NHPs

Drug Substance (mRNA) Manufacturing



DNA Template Production

IVT and Capping Reaction

Purification Process

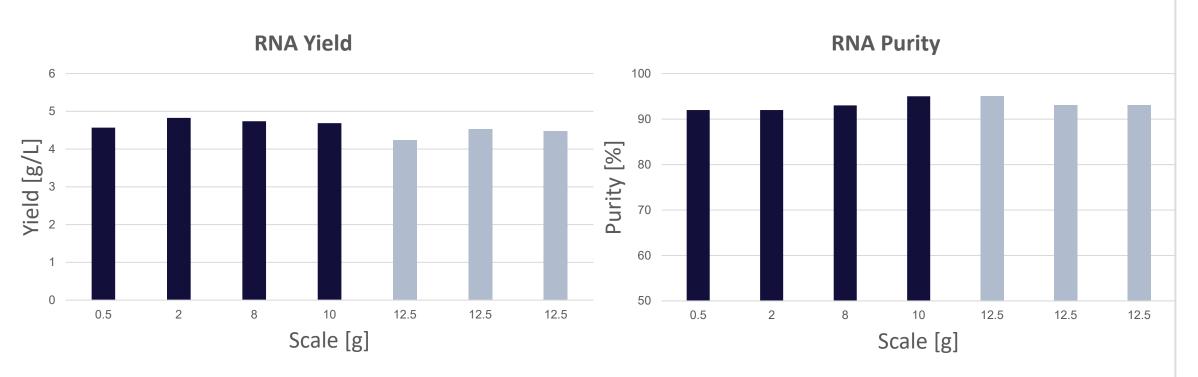
Buffer Exchange & Concentration

Features	Benefits		
Optimized IVT Method	Reduced Cost; Higher Purity		
Improved Capping Reaction	Reduced Cost of Goods		
Proprietary Purification Process	Higher Purity in a Shorter Time		
Efficient	Entire Process Less Than One Week		
Scalable to > 1Kg	Access Large Patient Populations		
Adaptable	Can Utilize a Variety of Modifications		

Arcturus Internal non-GMP mRNA Production Capabilities: Up to 30 g in Less Than One Week

Drug Substance (mRNA) Manufacturing





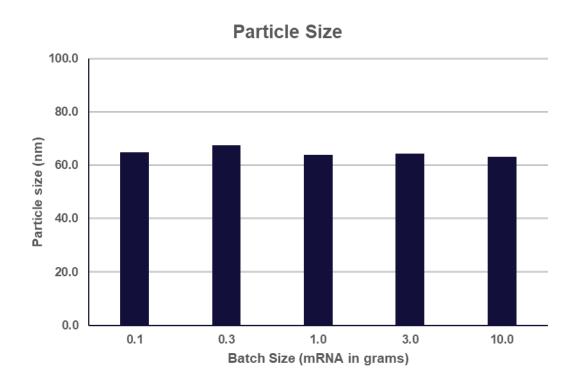
Non-GMP Lots Produced at Arcturus

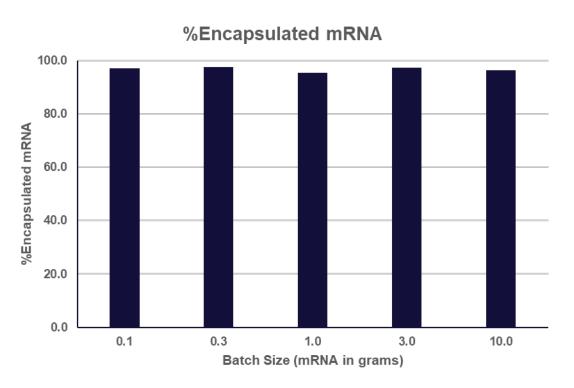
GMP Lots Produced at CMO as part of recent GMP campaign

Three 12.5 g lots produced in recent GMP campaign are of equivalent quality and yield

Drug Product (LUNAR® + mRNA) Manufacturing







- Manufacturing of Drug Product Demonstrated up to Multigram Scale with Yields > 85%
- GMP Batch of LUNAR®-OTC (ARCT-810) Drug Product Manufactured and Released



Board of Directors



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Karah Parschauer, JD Director of the Board



Edward W. Holmes, M.D. Director of the Board



James Barlow, MA Director of the Board



Magda Marquet, Ph.D. Director of the Board



Joseph E. Payne, MSc Director of the Board. President & CEO



Director of the Board. CFO



Andrew Sassine, MBA Emil D. Kakkis, M.D., Ph.D. Board Advisor















Management Team





Joseph E. Payne, MSc
President & CEO



Pad Chivukula, Ph.D. CSO & COO



Andrew Sassine, MBA



Steve Hughes, M.D.Chief Development Officer













