

# Artelo

BIOSCIENCES®

June 2026

Corporate  
Presentation

Nasdaq:ARTL



Pioneering the Science of Lipid Signaling  
Modulation to Develop Novel Therapeutics

# Forward Looking Statements

**Artelo Biosciences, Inc.** (the “Company”) cautions you that statements contained in this presentation regarding matters that are not historical facts are forward-looking statements. These statements are based on the Company’s current beliefs and expectations. Such forward-looking statements include, but are not limited to, statements regarding: those relating to the Company’s product development, clinical and regulatory timelines, market opportunity, competitive position, possible or assumed future results of operations, business strategies, ESG performance, potential growth opportunities and other statements that are predictive in nature. These forward-looking statements are based on current expectations, estimates, forecasts and projections about the industry and markets in which we operate and management’s current beliefs and assumptions. The inclusion of forward-looking statements should not be regarded as a representation by the Company that any of its plans will be achieved. Actual results may differ from those set forth in this presentation due to the risks and uncertainties inherent in the Company’s business, including, without limitation: potential delays in the commencement, enrollment and completion of clinical trials; disruption to the Company’s operations, including clinical trial delays; the success of any of the Company’s clinical trials and preclinical studies for its product candidates; regulatory developments in the United States and foreign countries; unexpected adverse side effects or inadequate efficacy of our product candidates that may limit their development, regulatory approval and/or future commercialization; the Company’s ability to obtain and maintain intellectual property protection for its product candidates; the Company may use its capital resources sooner than it expects; and other risks described in the Company’s prior communications and the Company’s filings with the Securities and Exchange Commission (the “SEC”). You are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date hereof, and the Company undertakes no obligation to update such statements to reflect events that occur or circumstances that exist after the date hereof. All forward-looking statements are qualified in their entirety by this cautionary statement, which is made under the safe harbor provisions of the Private Securities Litigation Reform Act of 1995. This presentation includes statistical and other industry and market data that we obtained from industry publications and research, surveys and studies conducted by third parties as well as our own estimates of potential market opportunities. Industry publications and third-party research, surveys and studies generally indicate that their information has been obtained from sources believed to be reliable, although they do not guarantee the accuracy or completeness of such information. Our estimates of the potential market opportunities for our products include several key assumptions based on our industry knowledge, industry publications, third-party research and other surveys, which may be based on a small sample size and may fail to accurately reflect market opportunities. While we believe that our internal assumptions are reliable, such assumptions have not been verified by any third party. The industry in which we operate is subject to a high degree of uncertainty and risk due to a variety of important factors that could cause results to differ materially from those expressed in the estimates made by third parties and by us. Trademarks in this presentation are the property of their respective owners and used for informational and education purposes only. Pipeline programs are under investigation and have not been proven to be safe or effective. There is no guarantee any product will be approved or meet any developmental milestones indicated above.

**The Company’s SEC filings are available at [artelobio.com](http://artelobio.com)**

**Artelo Biosciences is a clinical-stage biopharmaceutical company advancing a broad platform of lipid signaling modulation drug candidates to treat pain, cancer, anxiety, depression, and other conditions**



**NOVEL SCIENCE  
PORTFOLIO**



**NEAR-TERM  
CATALYSTS**



**BILLION DOLLAR  
MARKETS**



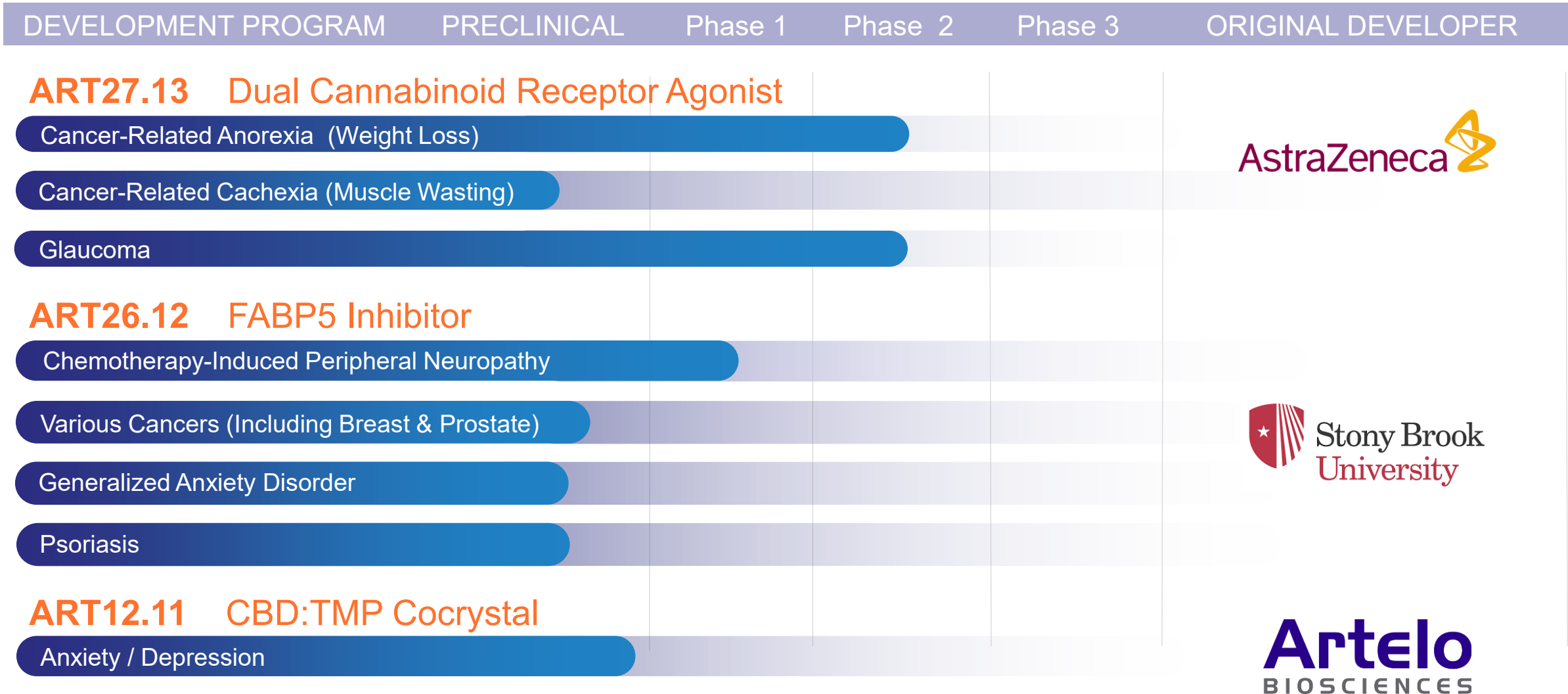
**ROBUST PATENT  
ESTATE**



**PROVEN  
LEADERSHIP**

# Lipid Signaling Modulation Pipeline

Multiple value-driving milestones expected over the next 12 -18 months



FABP5=Fatty Acid Binding Protein 5; CBD=Cannabidiol; TMP=Tetramethylpyrazine

# **ART27.13**

**Dual Cannabinoid Receptor Agonist for  
Cancer-Related Anorexia and Cachexia**

# ART27.13 Addressing a Significant Need

Target Indication: Cancer Anorexia Cachexia Syndrome (CACS)

**CACS** is marked by a loss of appetite and weight loss, along with a reduction in muscle mass and fatty tissues affecting up to 80% of advanced cancer patients\* with no FDA-approved treatment

“ *When you pull a pair of trousers up and they just fall right back down again, it sort of hits home how quickly the weight dropped off. That was scary.* ”

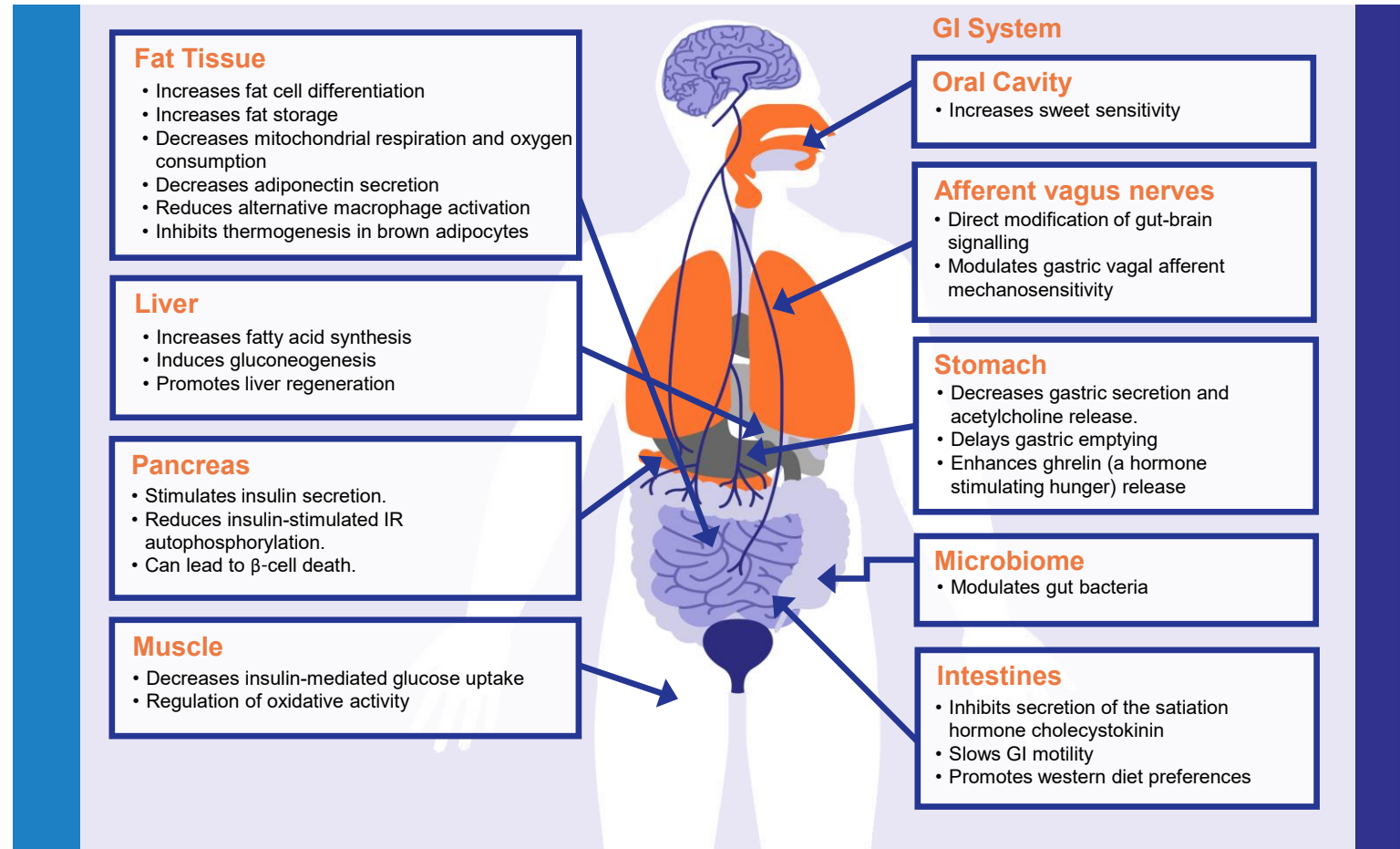
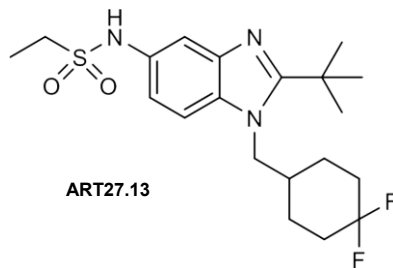


Participant in Phase 1 Artelo-sponsored study

# ART27.13 Dual Cannabinoid Receptor Agonist

## The many effects of peripheral CB<sub>1</sub> activation in promoting appetite, food storage and weight gain

- Synthetic, dual CB<sub>1</sub>/CB<sub>2</sub> full agonist
- Oral dosing once daily
- Peripherally selective to avoid CNS side effects
- Leverages a well-established appetite pathway
- Dose-dependent increase in body weight evidenced in 3 clinical studies
- New chemical entity, a benzimidazole derivative, originally developed by AstraZeneca

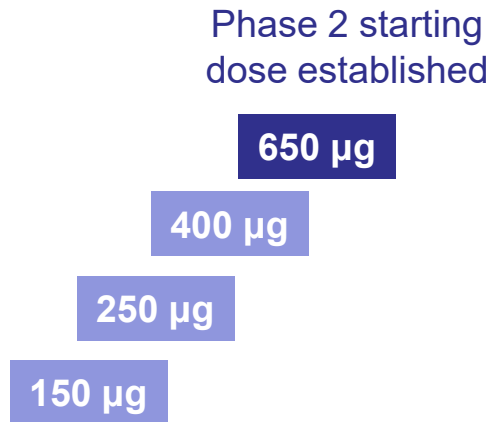


# ART27.13 The CAReS Trial

Establishing safety, optimal dose, and proof-of-concept in cancer patients with anorexia

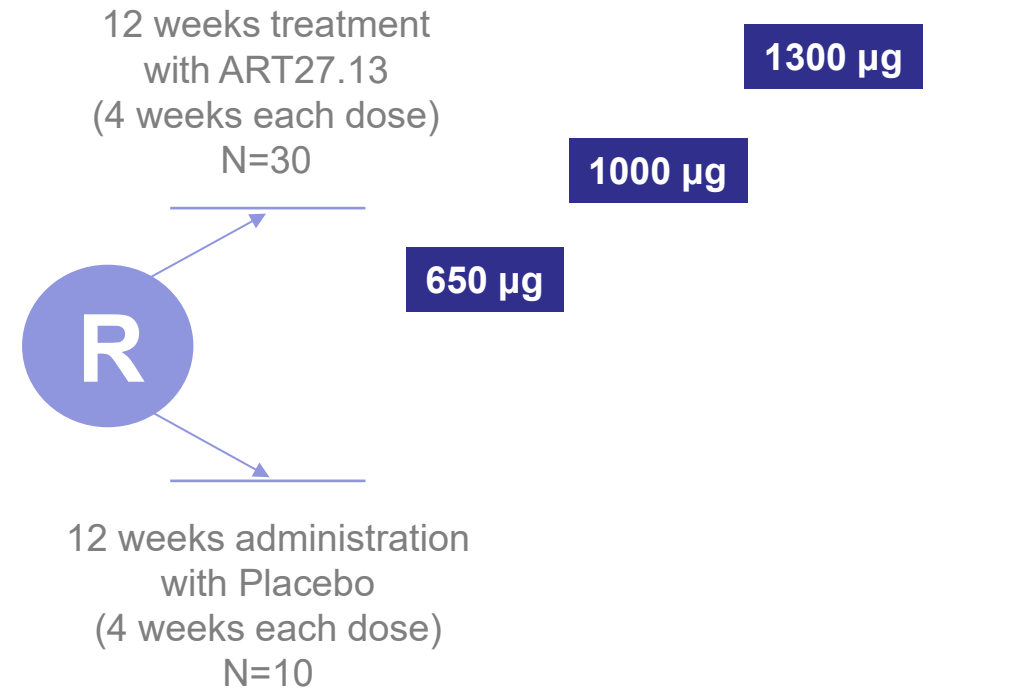
## Phase 1 (Completed)

Cancer patients with anorexia  
N=24 (6 per dose level)



## Phase 2 (Interim data announced)

Cancer patients with anorexia  
N=40 (3:1 randomization)



## Evaluating

- Lean body mass
- Weight gain
- Activity
- Anorexia
- QOL
- Safety

R = Randomization; QOL = Quality of Life

# CAReS Safety Results

**Phase 1:** 27 patients received at least one dose of ART27.13. No events considered as dose limiting toxicities and no fatal AEs related to trial treatment.

The most common (> 1 patient) AEs related to trial drug were somnolence (11%) and dry mouth (11%).

	150 µg	250 µg	400 µg	650 µg
Somnolence	0	1	1	1
Dysaesthesia	0	2	0	0
Disturbance in attention	0	1	0	0
Memory Impairment	0	0	1	0
Dry mouth	0	0	2	1
Diarrhea	0	1	0	0
Dyspepsia	0	1	0	0
Fatigue	0	0	0	1
Overdose	0	1	0	0

All data collected over and up to 12-week dosing period

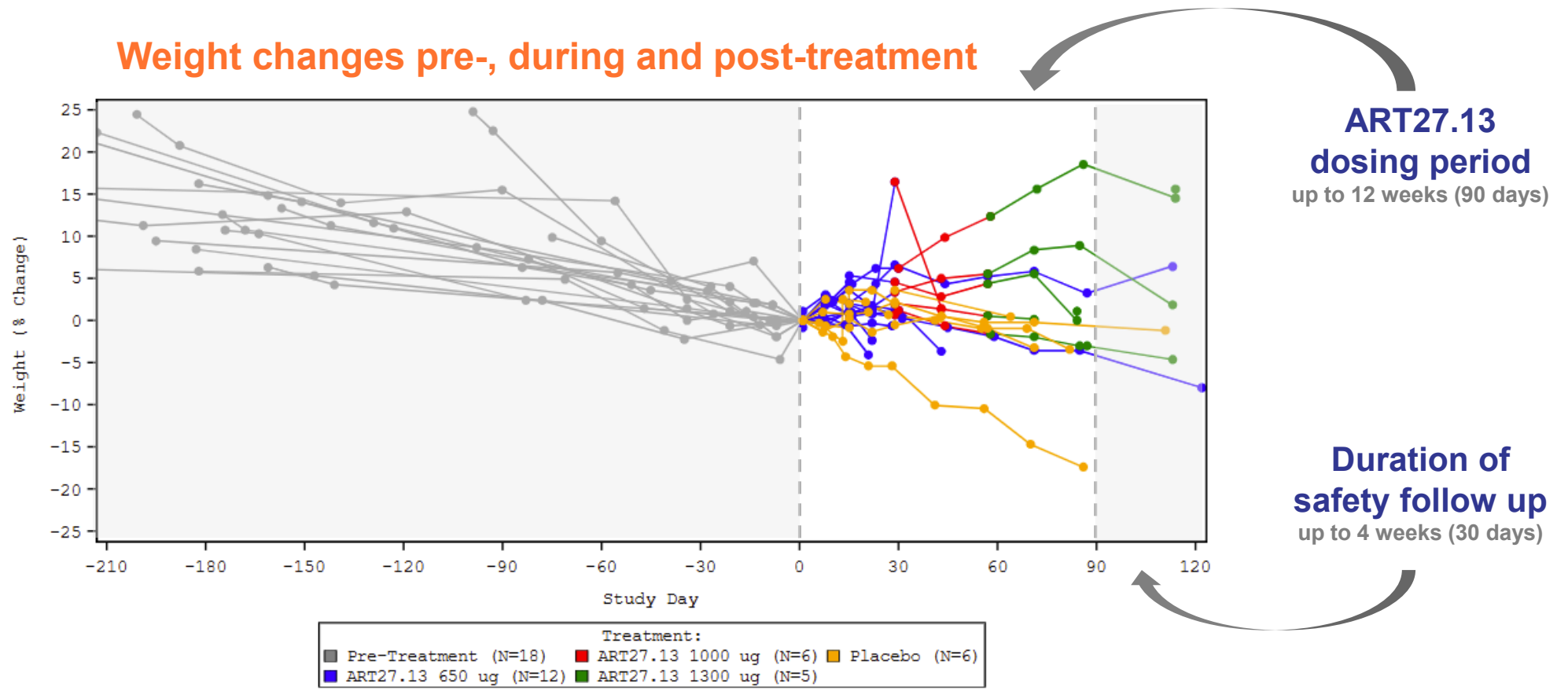
CAReS = Cancer Appetite Recovery Study

**Phase 2:** At interim analysis, 25 patients had received at least one dose of ART27.13. Seven (32%) had AEs considered related to study drug compared to 8 (30%) in Phase 1.

- There were no SAEs and no fatal AEs related to trial treatment
- 4 patients discontinued study drug due to AEs compared to 8 in Phase 1
- The most common (> 2 patients) AEs related to trial drug were vomiting (12%) and dry mouth (12%)
- The safety profile observed in Phase 2 is very similar to that observed in Phase 1, despite doses of up to 1300 µg being administered
- **ART27.13 is well-tolerated with an attractive safety profile supporting continued development**

# ART27.13 CAReS Phase 2 Results

CAReS inclusion criteria required a documented  $\geq 5\%$  weight loss during the prior 6 months

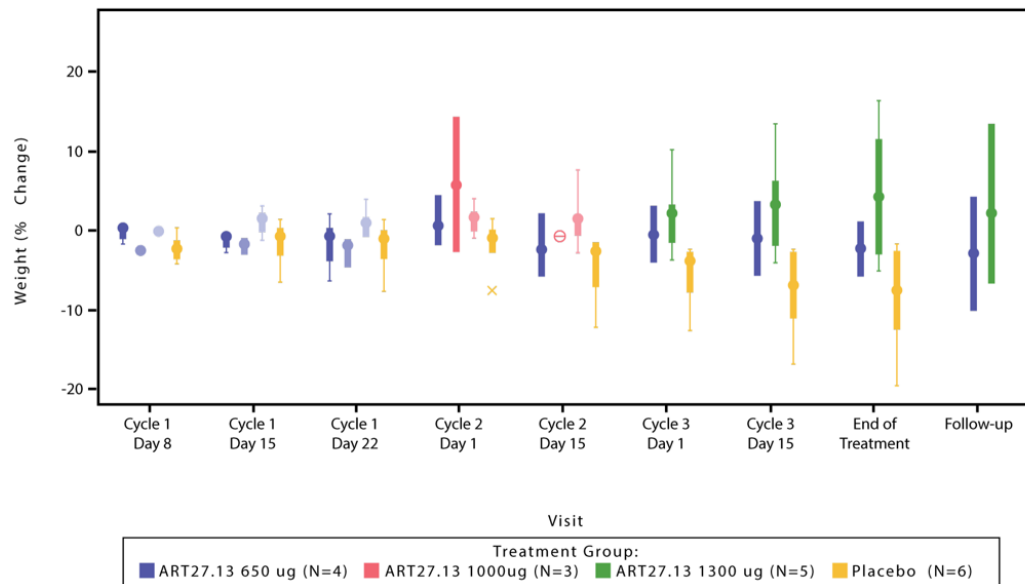


CAReS = Cancer Appetite Recovery Study

# ART27.13 CAReS Phase 2 Results

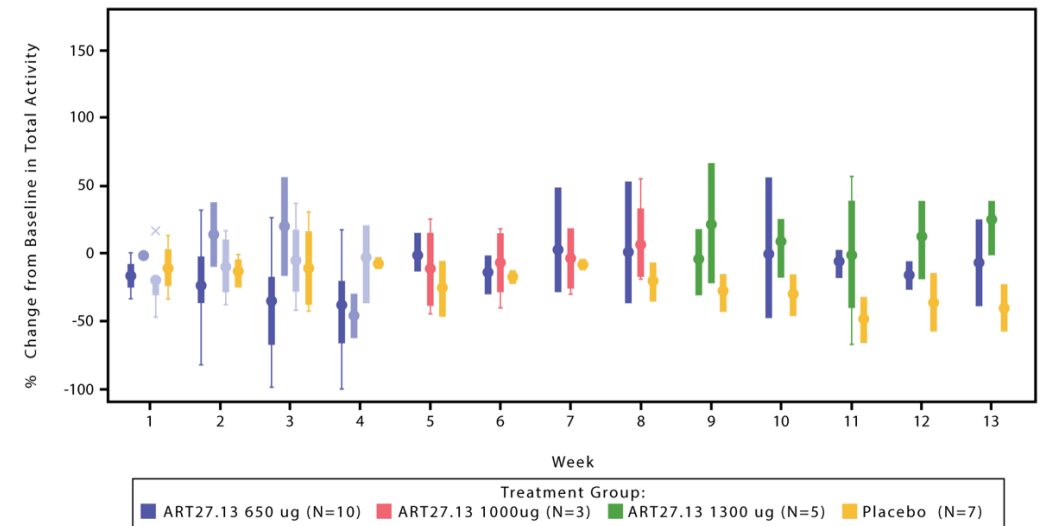
Efficacy versus placebo in lean body mass, weight gain, activity, and well-tolerated up to 1300 µg per day

## Change in Weight



At end of treatment there was an average 6% increase in weight in patients who escalated to 1300 ug and a 5% decrease in patients who received placebo

## Change in Activity



Activity data captured by *MotionWatch* showed an increase in total activity for patients on active treatment compared to those on placebo

**ART26.12**

**Fatty Acid Binding Protein 5 (FABP5) Inhibitor**

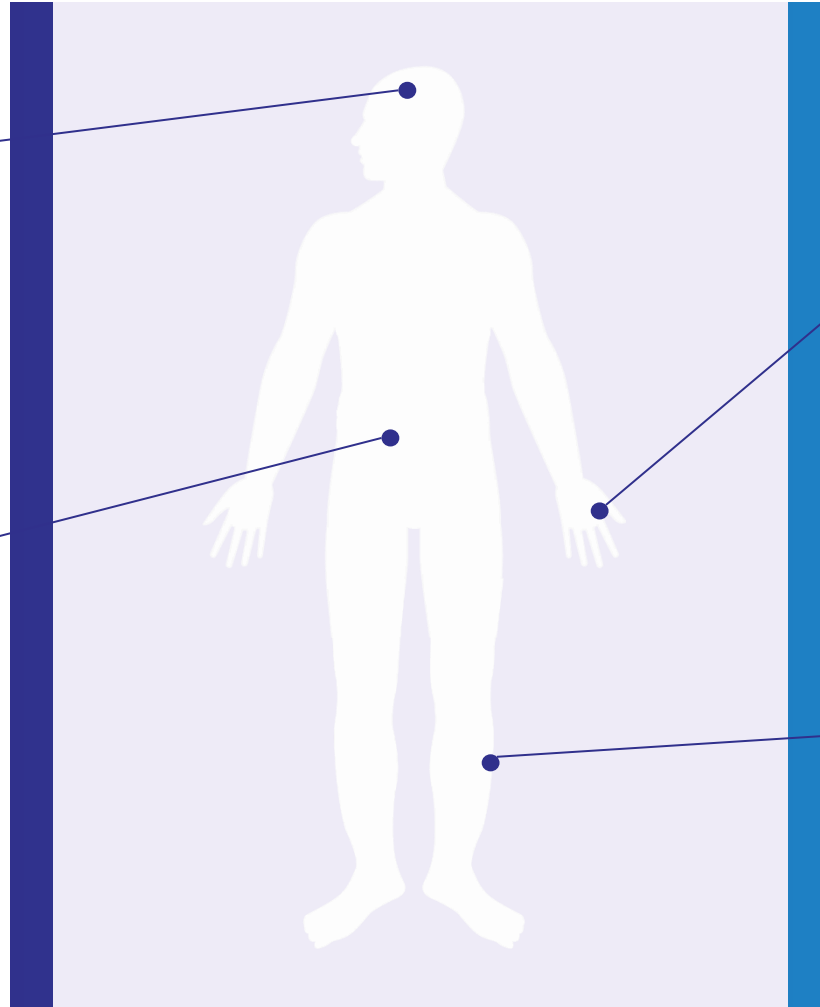
Fatty Acid Binding Proteins are a validated target with potential in multiple therapeutic areas. Artelo has a worldwide exclusive license from Stony Brook University, NY for multiple generations of FABP inhibitors.

## Anxiety Disorders

- Generalized Anxiety Disorder
- Depression
- PTSD

## Cancer

- Prostate cancer
- Breast cancer
- Colon cancer
- Various other cancers



## Pain and Inflammation

- Osteoarthritis
- Chemotherapy Induced Peripheral Neuropathy (CIPN)
- Diabetic neuropathy
- Cancer bone pain

## Dermatology

- Psoriasis

# ART26.12 Our Lead FABP5 Inhibitor

Target Indication: Chemotherapy-Induced Peripheral Neuropathy (CIPN)

**CIPN** affects up to 40% of all treated cancer patients\* and is marked by extreme nerve pain causing delays, disruption or discontinuation of essential cancer treatment with no currently available FDA approved therapy

**Fatty Acid Binding Protein 5 (FABP5) Inhibitor** offers potential as a first-in-class, non-opioid, non-psychoactive approach to pain and inflammation

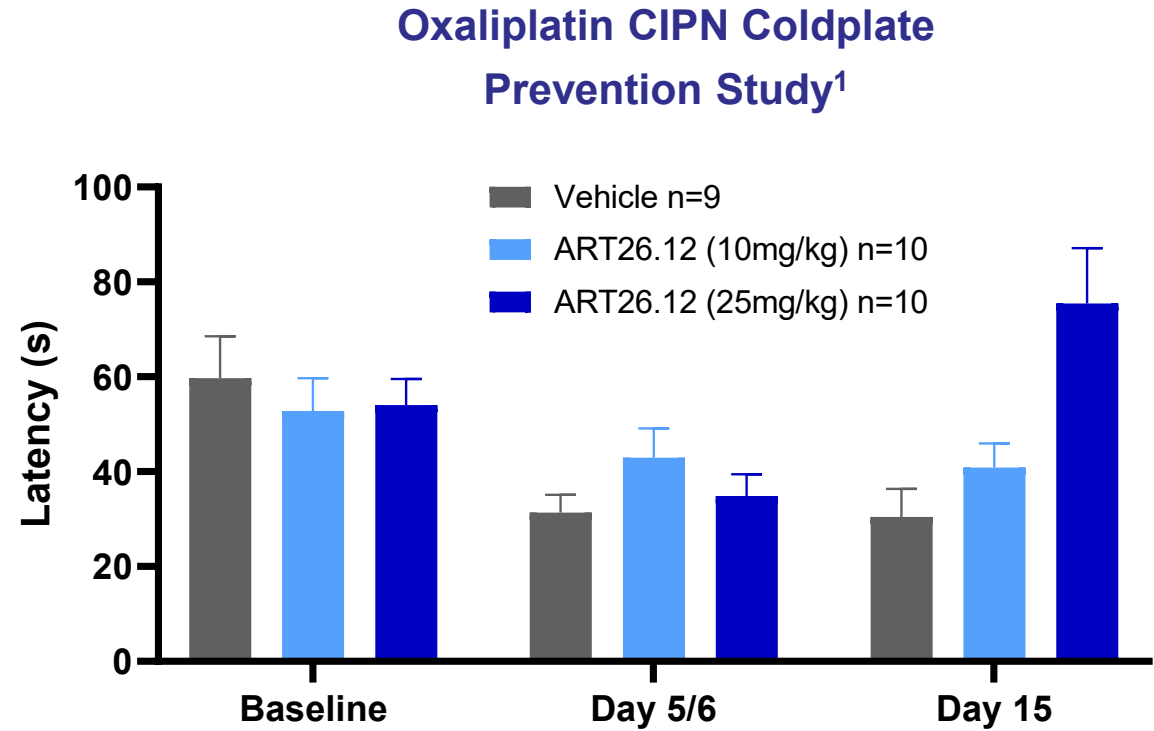


# ART26.12 Strong Pre-Clinical Evidence from Multiple Studies

Evidence from five animal studies in peripheral neuropathy with ART26.12 supports Artelo's development strategy for the FABP5 inhibitor as a potential preventative therapeutic for CIPN

ART26.12 administered as a prophylactic dose of 25 mg/kg orally twice daily in multiple CIPN animal studies

- **Significantly reversed cold allodynia** latencies in oxaliplatin induced CIPN by day 15<sup>1</sup>
- **Reduced mechanical and cold allodynia** associated with paclitaxel induced CIPN by day 15<sup>2</sup>



Values are presented as mean ± s.e.m. (n=9-11).  
Study was performed in male Sprague Dawley Rats.

<sup>1</sup> [https://www.jpain.org/article/S1526-5900\(24\)00345-6/fulltext](https://www.jpain.org/article/S1526-5900(24)00345-6/fulltext)

<sup>2</sup> [The Effects of the FABP5 Inhibitor ART26.12 in Paclitaxel-Induced Neuropathy](#) S.E. O'Sullivan, A. Pereira, M. Kaczocha, I. Ojima and A. Yates presented at International Cannabinoid Research Society annual meeting 2023

# ART26.12 Phase 1 Study Results

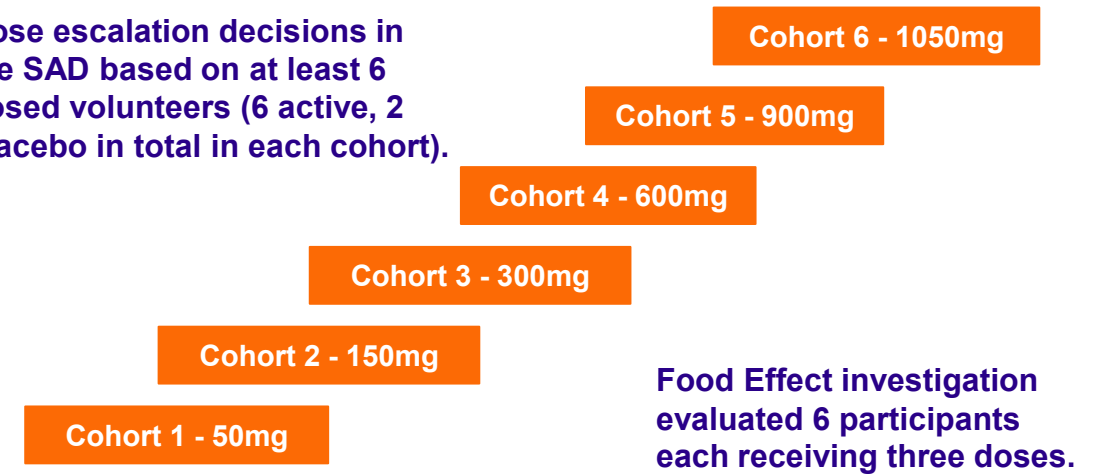
The Phase 1 Single Ascending Dose (SAD) & Food Effect (FE) study was designed to assess the safety, tolerability, and pharmacokinetics of ART26.12 in healthy volunteers. The SAD/FE study enrolled 55 subjects.

## Clinical data from completed SAD and preliminary Food Effect study demonstrated:

- **Excellent Safety Profile:** All adverse events (AEs) were mild, transient, and self-resolving and believed by medical staff not related to study drug
- **Predictable Pharmacokinetics:** Plasma analysis confirmed dose-dependent linear absorption
- **Therapeutic Window:** A wide safety margin was observed between estimated therapeutic plasma concentrations and the highest exposure levels achieved.
- **Potential for fed or fasted dosing**

## Study Design

Dose escalation decisions in the SAD based on at least 6 dosed volunteers (6 active, 2 placebo in total in each cohort).



## SAD Study Endpoints

- To evaluate the safety and tolerability of QD ascending oral doses of ART26.12 versus placebo in fasted healthy adult volunteers
  - ART26.12 safety profile understood on single dosing
  - DLT defined on single dosing
- To evaluate the PK and PD profile of oral doses of ART26.12
  - Plasma and urine PK
  - Lipidomic and proteomic biomarkers

**ART12.11**

**CBD:TMP Cocystal**

# ART12.11 CBD:TMP Cocrystal

Target indication: Anxiety/Depression

**Anxiety and depression** affects about 20% of adults in the US\* and is often characterized by feelings of sadness, hopelessness, worry, or dread

**Proprietary CBD:TMP Cocrystal** is a combination drug candidate with improved physical properties, pharmacokinetics, and pharmacology



CBD=cannabidiol ; TMP=tetramethylpyrazine

# ART12.11 Multiple Competitive Advantages

CBD:TMP cocrystal solved inherent challenges with CBD in accordance with FDA Guidance



## Physical Properties

Developed as an oral solid with improved melting point, solubility, and dissolution compared to CBD alone

## Pharmacokinetics

Delivers higher plasma levels of CBD and its major metabolite CBD-7COOH compared to CBD alone and less impact of food effect than CBD alone

## Pharmacodynamics

Strong anxiolytic, anti-depressive, and pro-social effects while protecting spatial and short-term memory

## Patent Estate

Composition of Matter & Methods of Use issued in US through December 2038 and National Phase approvals ongoing worldwide

# ART12.11 Promising Anxiety and Depression Data

Superior preclinical efficacy observed in stress-induced anxiety model compared to CBD-alone

Clinical Behavior	Behavioral Test	ART12.11 (3.5 mg/kg CBD + 1.5 mg/kg TMP orally dosed)	CBD-alone (10 mg/kg orally dosed)	
<b>Anxiety</b>	Elevated plus maze	✓ Anxiolytic	✗ No effect	✓ Positive Effect
	Light-dark chamber			
	Open field test			
<b>Depression</b>	Sucrose preference	✓ Anti-depressive (reversed stress effect)	✗ No effect	✗ No Effect
	Forced swim test			
<b>Sociability</b>	Social motivation	✓ Pro-social (reversed stress effect)	✗ No effect	✗ Negative Effect
	Social discrimination			
<b>Cognition</b>	Novel-object recognition	✓ Protected memory (reversed stress effect)	✗ No effect or impaired spatial memory	
	Spontaneous alternation			

Data presented at Society for Neuroscience (SfN) 2023 and available on Artelo's website (artelobio.com).

# Leadership

Proven track record of value creation for shareholders

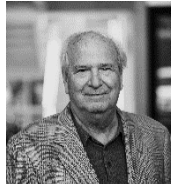
MANAGEMENT TEAM



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Biogen IDEC, Chiron, Cetus,  
Upjohn, MAST



**Mark Spring, CPA**  
**Chief Financial Officer**  
Secura Bio, Prometheus Labs,  
LENZ, MedImmune, Baxter



**Steven D. Reich, MD**  
**Chief Medical Officer**  
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PAREXEL



**Andrew Yates, PhD**  
**Chief Scientific Officer**  
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Bristol Myers



**Saoirse O'Sullivan, PhD**  
**VP, Translational Science**  
Prof., University of Nottingham, UK

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Sciences Institute, Trinity College  
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# Company Capitalization

Capitalization (as of 6/1/2026, except as noted)

<b>Common Shares Outstanding</b>	<b>4,045,540</b>
Warrants (WAEP \$4.13)	<b>7,059,620</b>
Options (Exercisable options WAEP \$15.41)	<b>205,518</b>
<b>Total</b>	<b>11,310,678</b>

**Cash, Cash Equivalents, and Marketable Securities** (as of 3/31/2026): **\$10.3M**

**Convertible Debt** (as of 3/31/2026; repaid in April 2026): **\$0.5M**

**Short-term Debt** (as of 3/31/2026; repaid in April 2026): **\$0.7M**

**Fully diluted ownership of Officers/Directors** (as of 3/31/2026): **0.8%**

*WAEP = Weighted Average Exercise Price*



## NOVEL SCIENCE PORTFOLIO

- **ART27.13** Dual cannabinoid receptor agonist in two Phase 2 studies
- **ART26.12** FABP5 inhibitor in Phase 1
- **ART12.11** CBD:TMP cocrystal in late preclinical



## NEAR-TERM MILESTONES

- **ART27.13** Glaucoma Phase 2
- **ART26.12** MAD (multiple ascending dose)
- **ART12.11** Phase 1
- **ART27.13** CAReS Phase 2



## BILLION DOLLAR MARKETS

- CIPN **\$2B+**
- Cancer anorexia **\$3B+**
- Prostate cancer **\$13B**
- Breast cancer **\$33B**
- Psoriasis **\$31B**
- Anxiety **\$13B**
- Glaucoma **\$9B**



## ROBUST PATENT ESTATE

- **38** patents issued
- **51** patents pending (includes owned, licensed, and partnered)
- Composition of matter and broad method claims ensure strong prospects for meaningful worldwide market exclusivity



## PROVEN LEADERSHIP

- Experienced team of biopharmaceutical executives, drug developers, and top tier researchers
- Proven track records in developing and commercializing high-impact federally regulated therapeutics

# Artelo

BIOSCIENCES®



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## INVESTOR RELATIONS

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