Cyclacel is a biopharmaceutical company developing innovative medicines that target the various phases of cell cycle control for the treatment of cancer and other serious diseases. Cyclacel is an oncology pioneer with a vision to improve patient healthcare by translating insights in cell cycle biology in cancer into medicines. The Company’s strategy is to build a diversified biopharmaceutical business focused in hematology and oncology based on a development pipeline of novel drug candidates. Cyclacel retains virtually all worldwide marketing rights to its compounds.

A PIONEER IN CELL CYCLE BIOLOGY

Applying its core strength in cell cycle biology, Cyclacel is advancing a pipeline of small molecule drugs designed to stop uncontrolled cell division including three clinical stage compounds. The Company’s founder, Professor Sir David Lane, is a leading authority in cell cycle biology credited with the discovery of p53, one of the most commonly mutated tumor suppressor genes in patients with cancer. Cyclacel’s first Chief Scientist, Professor David Glover, is a recognized leader in mitosis biology and discoverer of the aurora and polo mitotic kinase families, which are essential cell cycle control mechanisms that regulate cancer cell division.

FINANCIAL HIGHLIGHTS (as of March 31, 2019)

- Cash and Equivalents (Q3 ’18): $17.9 million
- Est. 2019 operating cash burn ~$10.0 million
- Est. funding to Q4 ’20
- Common Shares Outstanding: 17.2 million

KEY COMPANY HIGHLIGHTS

- Announced a 3-year strategic alliance agreement with MD Anderson Cancer Center
- First patients dosed in CYC065 Phase 1b in R/R CLL patients in combination with venetoclax
- First patients dosed in Phase 1b/2 IST of sapacitabine and olaparib combination in BRCA mutant breast cancer patients
- First patients dosed in first-in-human study for CYC140 PLK1 inhibitor
- Data presented at the 2019 AACR Annual Meeting from the sequential regimen of sapacitabine and seliciclib in BRCA mutant metastatic breast cancer.
- Completed meetings with 3 European regulatory authorities regarding sapacitabine in elderly AML
- Appointed Robert J. Spiegel, M.D. to the Board of Directors

ANALYST COVERAGE

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<table>
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<th>Program CYC...</th>
<th>Description</th>
<th>Preclinical</th>
<th>Phase 1</th>
<th>Phase 2</th>
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<th>Rights</th>
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<td>065</td>
<td>Solid tumors (FIH)</td>
<td>Part 2</td>
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<td></td>
<td>2L R/R CLL (Ph 1b) + Bcl-2 inhibitor</td>
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<td>065 + venetoclax</td>
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<td>Solid tumors</td>
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<td>Ph 1/2</td>
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<tr>
<td></td>
<td>Cyc E, MYCN, Mcl-1</td>
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<tr>
<td></td>
<td>Oral formulation</td>
<td></td>
<td>CMC</td>
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<td></td>
<td>sapacitabine</td>
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<td>DDR: BRCA +ve Breast cancer + PARP</td>
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<td>sapa + olaparib Ph 1b</td>
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<td>140</td>
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Current: December 2019
Planned: December 2020
This document contains forward-looking statements with respect to business conducted by Cyclacel Pharmaceuticals, Inc. By their nature, forward-looking statements and forecasts involve risks and uncertainties because they relate to events and depend on circumstances that will occur in the future. There are a number of factors that could cause actual results and developments to differ materially. A discussion of those risks and uncertainties are more fully discussed under “Risk Factors” in the registration statements on Form 10-K and in the other reports of Cyclacel filed with the SEC. The compounds mentioned in this document including but not limited to CYC065, sapacitabine, CYC140 and seliciclib are experimental drugs only for investigational use and are not approved for human use.

**CYC065 CLINICAL PROGRESS**

*Small molecule targeting cyclin-dependent kinases CDK2 & CDK9*

**Phase 1 CYC065 data highlight potential best-in-class MCL1 suppression.** Prolonged reduction of MCL1 expression (>24 hours) was observed in 11 out of 13 patients treated at the recommended Phase 2 dose (RP2D) as reported at AACR 2018. Anticancer activity observed in 6 patients treated with a single dose of CYC065.

**CYC065 could help overcome resistance to available cancer treatment by suppressing pro-survival proteins.** Preclinical data of a CYC065-venetoclax combination reported at AACR 2018 showed activity in CLL samples which were resistant to either agent alone. These findings support the hypothesis that dual targeting of MCL1- and Bcl-2-dependent mechanisms could induce synergistic cell death. We anticipate other mechanistically-led opportunities to address treatment resistance caused by amplification of MCL1, MYC or Cyclin E in various cancers, including acquired resistance to approved CDK4/6 inhibitors in ER +ve, HER2 -ve breast cancer. Phase 1 study of a CYC065-venetoclax combination in R/R AML enrolling patients.

**SAPACITABINE CLINICAL PROGRESS**

*Oral pro-drug with unique DNA damage response (DDR) mechanism*

**BRCA +ve solid tumors:** Data presented at ASCO 2016 and AACR 2019 with an all-oral combination of sapacitabine and seliciclib (Cyclacel CDKi). Showed durable clinical benefit (PRs & prolonged SD) in BRCA +ve patients with breast, ovarian and pancreatic cancers and in a breast cancer expansion cohort a clinical benefit rate of 30%. A Phase 1b/2 IST in combination with the PARP inhibitor olaparib has started enrollment in BRCA mutant patients with breast cancer.

**Sapacitabine in AML:** Completed meetings with three EU national regulatory authorities to discuss data from Phase 3 study of sapacitabine in elderly patients with AML. Evaluating potential request for scientific advice.

**CYC140 CLINICAL PROGRESS**

*Internally discovered, Polo-like-kinase 1 (PLK1) inhibitor. A first-in-human study has been activated and is open for enrollment of patients with advanced leukemias. CYC140 has promising preclinical activity also in solid tumors.*

**MD ANDERSON – CYCLACEL ALLIANCE**

This three-year strategic alliance with MD Anderson will enable evaluation of CYC065, CYC140 and sapacitabine either as single agents or in combination with approved drugs in four clinical studies enrolling up to 170 patients in total. The collaboration leverages MD Anderson’s expertise in development of drugs for hematological malignancies and Cyclacel’s novel drug portfolio and knowledge of cell cycle biology and mechanisms of cancer cell resistance.