UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 OR 15(d) of The Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): August 10, 2020

Arbutus Biopharma Corporation
(Exact name of registrant as specified in charter)

British Columbia, Canada	**001-34949**	**98-0597776**
(State or other jurisdiction of incorporation)	(Commission File Number)	(IRS Employer Identification No.)

701 Veterans Circle Warminster, Pennsylvania	**18974**
(Address of principal executive offices)	(Zip Code)

(267) 469-0914
Registrant's telephone number, including area code

(Former name or former address, if changed since last report.)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ Written communication pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communication pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communication pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	**Trading Symbol(s)**	**Name of each exchange on which registered**
Common Shares, without par value	ABUS	The Nasdaq Stock Market LLC

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).
Emerging growth company ☐

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. o

Item 8.01. Other Events.

On August 10, 2020, Arbutus Biopharma Corporation posted an updated corporate presentation on its website at www.arbutusbio.com. A copy of the presentation is filed herewith as Exhibit 99.1 and is incorporated by reference herein.

Item 9.01. Financial Statements and Exhibits.

(d) Exhibits.

Exhibit Number	Description
99.1	Corporate Presentation, dated August 10, 2020
104	Cover page interactive data file (formatted as inline XBRL)

SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Arbutus Biopharma Corporation

Date: August 10, 2020

By: /s/ David C. Hastings
Name: David C. Hastings
Title: Chief Financial Officer

Arbutus BIOPHARMA

Curing Chronic Hepatitis B

Corporate Presentat

August 2020

NASDAQ: ABUS www.arbutusbio.com

Forward-Looking Statements

This presentation contains forward-looking statements within the meaning of the U.S. Private Securities Litigation Reform Act of 1995 and Canadian s laws. All statements that are not historical facts are hereby identified as forward-looking statements for this purpose and include, among others, sta relating to: the potential for HBV to have a larger market opportunity than HCV; Arbutus' ability to meet a significant unmet medical need; the suffi Arbutus' cash and cash equivalents to extend into mid 2021; Arbutus' expectation for multiple 60 mg dose and 90 mg single-dose data in the secon 2020; Arbutus' expectation to dose two 90 mg multi-dose cohorts in the second half of 2020; the potential for an oral HBsAg reducing agent and pot oral combination therapy; Arbutus' objective to complete IND enabling studies for AB-836 in the second half of 2020; the potential for AB-836 to be with a greater therapeutic window and to address known capsid resistant variants T33N and I105T; the potential for AB-836 to be once daily do expectations regarding the timing and clinical development of Arbutus' product candidates; the timeline to a combination cure for HBV; Arbutus' co strategy; Arbutus' expectations regarding its technology licensed to Genevant; and other statements relating to our future operations, future performance, future financial condition, prospects or other future events.

With respect to the forward-looking statements contained in this presentation, Arbutus has made numerous assumptions regarding, among other th timely receipt of expected payments; the effectiveness and timeliness of preclinical studies and clinical trials, and the usefulness of the data; the time regulatory approvals; the continued demand for Arbutus' assets; and the stability of economic and market conditions. While Arbutus conside assumptions to be reasonable, these assumptions are inherently subject to significant business, economic, competitive, market and social uncertai contingencies including uncertainties and contingencies related to the ongoing COVID-19 pandemic. Forward-looking statements herein involve kn unknown risks, uncertainties and other factors that may cause the actual results, events or developments to be materially different from any futur events or developments expressed or implied by such forward-looking statements. Such factors include, among others: anticipated pre-clinical an trials may be more costly or take longer to complete than anticipated, and may never be initiated or completed, or may not generate results that future development of the tested drug candidate; changes in Arbutus' strategy regarding its product candidates and clinical development activities; may not receive the necessary regulatory approvals for the clinical development of Arbutus' products; economic and market conditions may wor market shifts may require a change in strategic focus; and the ongoing COVID-19 pandemic could significantly disrupt our clinical development prog more complete discussion of the risks and uncertainties facing Arbutus appears in Arbutus' Annual Report on Form 10-K, Quarterly Report on Form 1 Arbutus' periodic disclosure filings which are available at www.sec.gov and at www.sedar.com.

Investment Highlights

Therapeutic focus – curing chronic Hepatitis B Virus (HBV) Infection

Significant Unmet Medical Need in HBV	Goal of HBV Functional Cure	Broad HBV Portfolio	Coronavirus Research Initiative	Team with Antiviral Expertise & Proven Track Record	16 Owner Gene
Global HBV prevalence double that of HCV, potential for larger market opportunity	Undetectable HBV DNA and HBsAg delivered through finite duration treatment with a combination of drugs with different modes of action	HBV assets include: RNAi, Capsid Inhibitors, PD-L1, HBV RNA Destabilizers	Focused on direct acting antivirals targeting the viral polymerase and protease	Applying knowledge gained from HIV and HCV success to HBV and Coronaviruses	Rights to p future ro and subl revenu LNP Tech

HCV: Hepatitis C Virus | **HIV** Human Immunodeficiency Virus

Proven Leadership Team

Successful track records in the discovery, development, and commercialization of multiple antivirals including sofosbuvir, etravirine, rilpivirine, telaprevir and simeprevir

William H. Collier

President and CEO

ViiV Healthcare · gsk

Michael J. Sofia, PhD

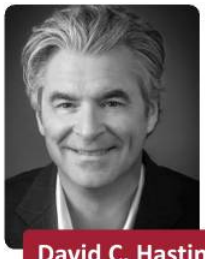
Chief Scientific Officer

PHARMASSET · OnCore Biopharma, Inc. · GILEAD · Bristol-Myers Squibb

Gaston Picchio, PhD

Chief Development Officer

janssen



David C. Hastings

Chief Financial Officer

Incyte · ARQULE · UNILIFE

Elizabeth Howard, PhD, JD

EVP, General Counsel and Chief Compliance Officer

orrick

Michael J. McElhaug

Chief Business Officer

OnCore Biopharma, Inc. · Bristol-Myers Squibb · PHARMASSET

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HBV Presents a Significant Unmet Medical Need

~900k
people die every year as a consequence despite the availability of effective vaccines and antivirals.

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Sources: Global Hepatitis Report and Hepatitis B Fact Sheet, WHO (2017) http://www.who.int/mediacentre/factsheets/fs204/en/
Kowdley et al. Hepatology (2012) Prevalence of Chronic Hepatitis B Among Foreign-Born Persons Living in the US by Country of Origin

Significant Opportunity to Improve HBV Cure Rates

HBV cures are achievable with today's SOC in **<5% of patients**. **Sustained** HBsAg and HBV DNA loss after end-of-treatment* is rare.

*undetectable HBsAg and HBV DNA 6 months after end-of-treatment accepted as a functional cure..

STANDARD OF CARE THERAPIES FOR CHRONIC HBV

	PegIFN	Entecavir	Tenofovir
Dosing Duration	48-weeks	Chronic	Chronic
HBV DNA Undetectable *(<60-80 IU/ml)*	7-19%	67-90%	76-93%
HBsAg Loss	~3-7%	~1-2%	~1-3%

New HBV Therapies

rate of **Undetectable HBV D**

\+

rate of **HBsAg Loss**

=

HIGHER **CURES RATES**

Achievable **HBV Cure Rates** with Current SOC

SOC: Standard Of Care | **HBsAg**: HBV Surface Antigen | **PegIFN:** Pegylated Interferon
Source: EASL HBV Clinical Practice Guidelines, 2017 - Pegasys, PEG-Intron, Baraclude and Viread Package Inserts

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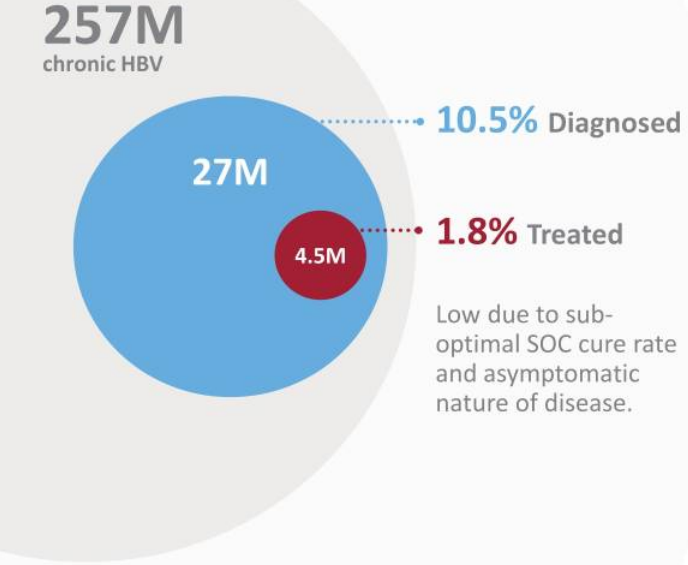
Compelling Growth Opportunity in the **HBV Market**



An HBV curative regimen

would substantially increase **diagnosis** and **treatment** rates to unlock significa **market growth opportunities.**

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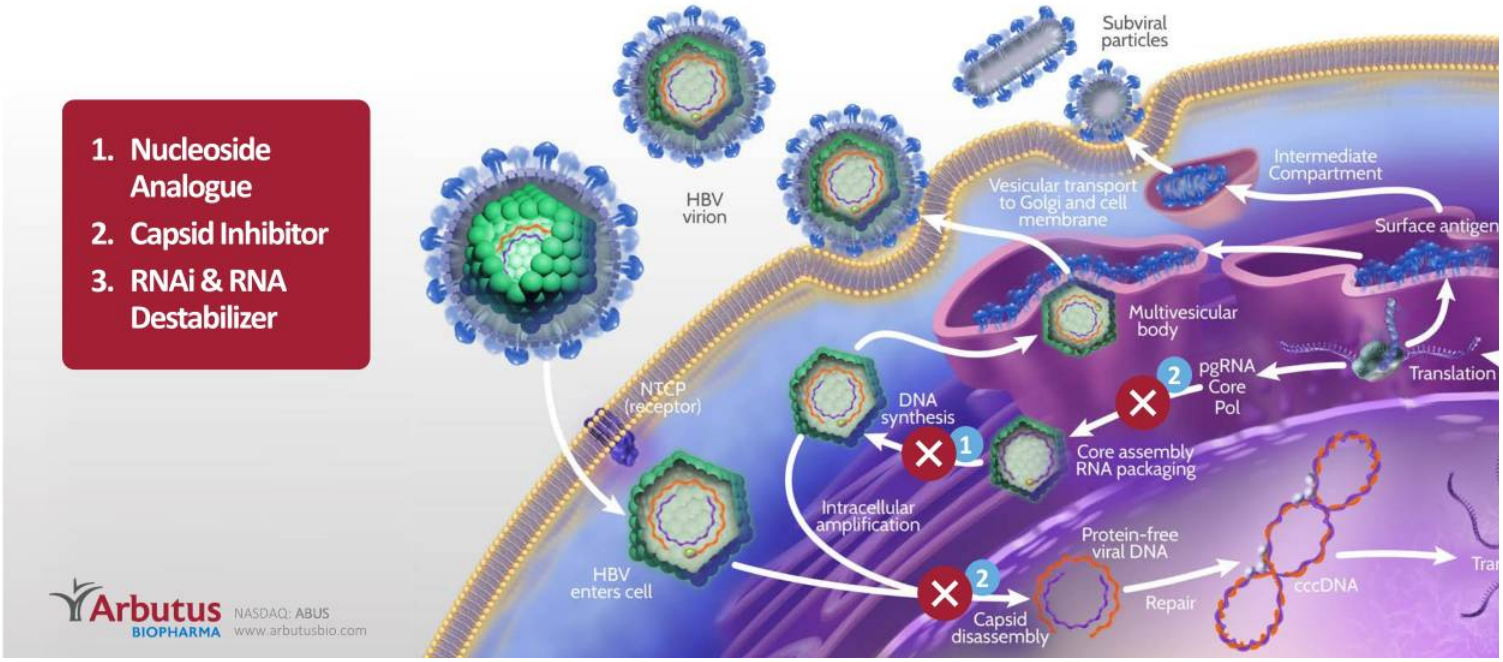
SOC: Standard Of Care
Source: Global Hepatitis Report and Hepatitis B Fact Sheet, WHO (2017) http://www.who.int/mediacentre/factsheets/fs204/en/

HBV Lifecycle Illustrates Key Points for Intervention

A combination of agents with complementary MOA **is needed to cure HBV**

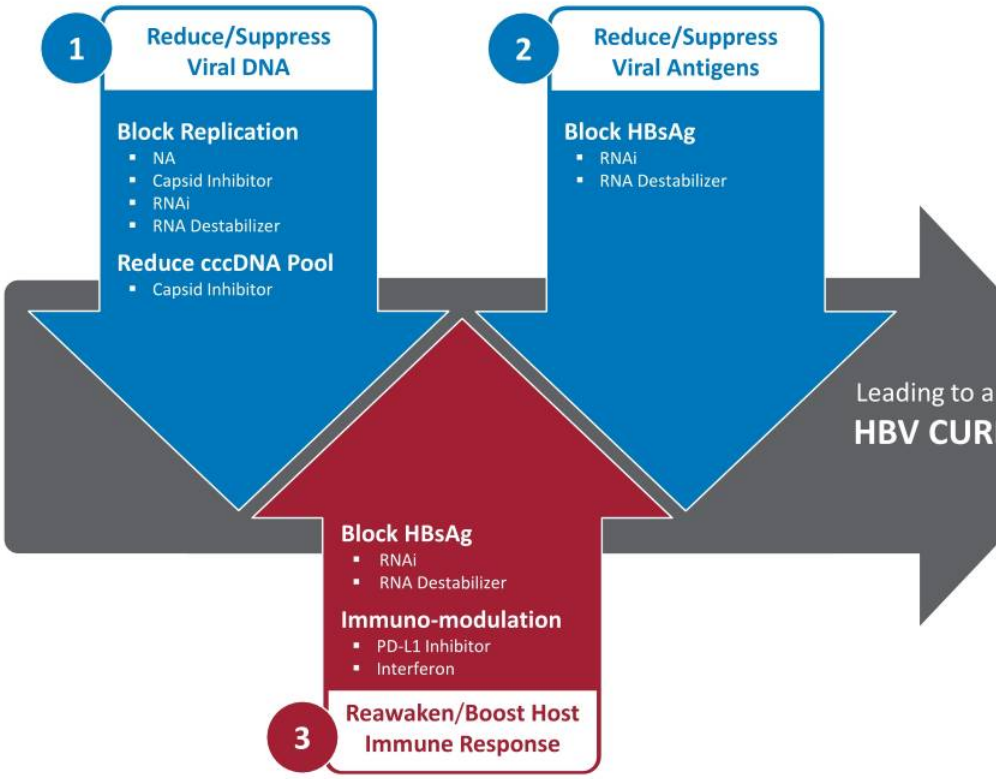


Keys to Therapeutic Success

Suppress HBV DNA and viral antigens

Reawaken host immune response

Therapeutic success will **require a combination of agents** with complementary MOAs



MOA: Mechanism Of Action | **NA:** Nucleoside Analogue | **HBsAg:** HBV Surface Antigen

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Arbutus HBV Pipeline

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AB-729

RNAi Therapeutic

Proprietary GalNAc-conjugate delivery technology provides liver targeting and enables **subcutaneous dosing**

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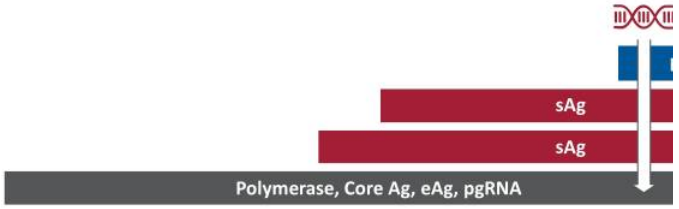
- Single trigger RNAi agent targeting all HBV transcripts
- Inhibits HBV replication and lowers all HBV antigens
- Pan-genotypic activity across HBV genotypes
- Demonstrated complementarity with capsid inhibitors
- Actively targets the liver
- Active against cccDNA derived and integrated HBsAg transcripts
- Clean profile in long term preclinical safety studies



AB-729
RNAi Therapeutic

In May 2020,
Arbutus announced additional positive single-dose Phase 1a/1b clinical trial results for AB-729

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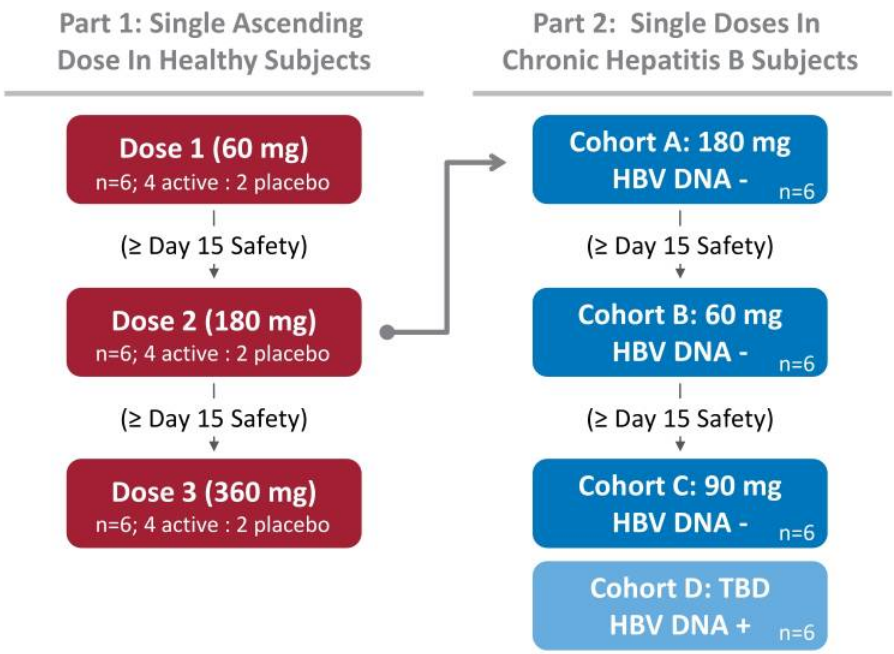
Continuous HBsAg decline with a single 60 mg dose through week 12 with mean HBsAg decline of approximately 1.0 log matching the 180 mg cohort at week 12.

All subjects responded to therapy with everyone achieving at least a -0.62 log reduction in HBsAg at week 12 in the 60 mg dose group with a maximum decline of -2.14 log.

All subjects had normal ALTs/ASTs throughout the 12 week follow up period.

AB-729 may provide a competitive advantage through low dose and reduced frequency of injections.

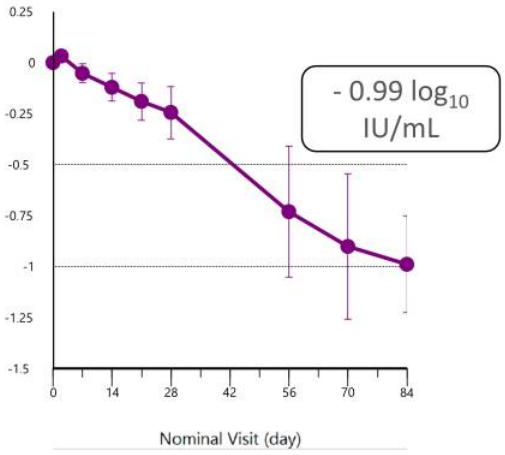
AB-729-001 Study Design



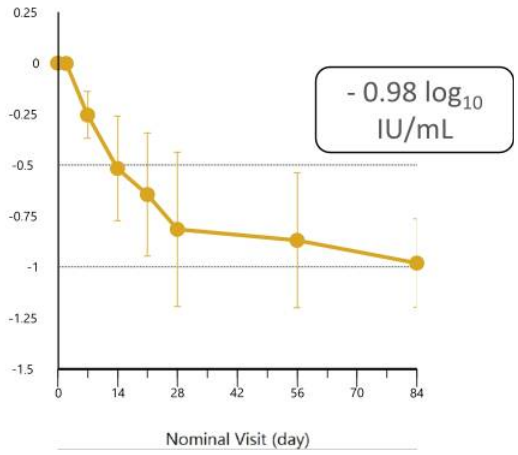
HBV: Hepatitis B Virus | TDF: tenofovir disoproxil fumarate | TBD: to be determined

Continuous Mean HBsAg Decline of ~1 log_{10} with a Single 60 mg Dose Matching HBsAg Decline of 180 mg at Week 12

AB-729 60 mg (N=6)



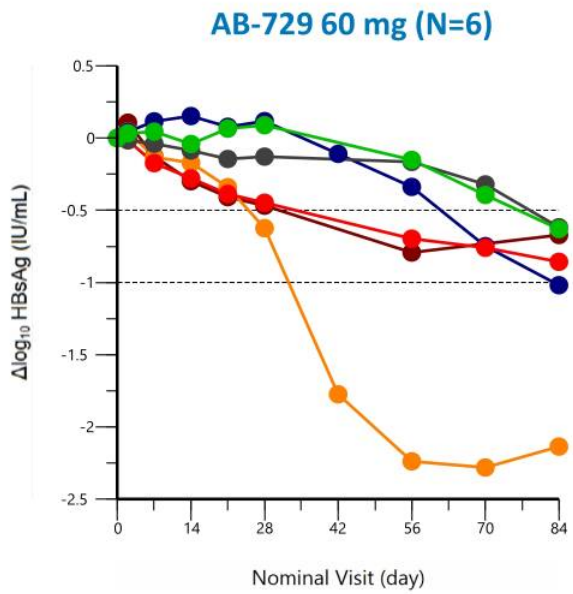
AB-729 180 mg (N=4)

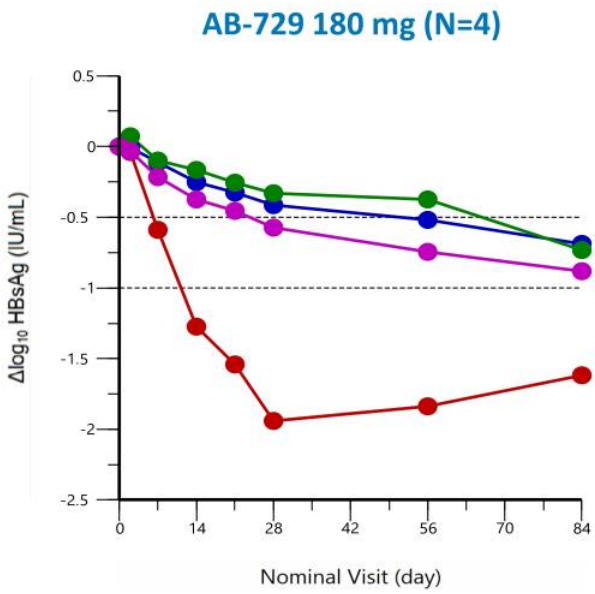


60 mg week 6 data (N=2) excluded for consistency as Week 6 not collected in 180 mg cohort

All Subjects Responded in the 60 mg Single-Dose Cohort

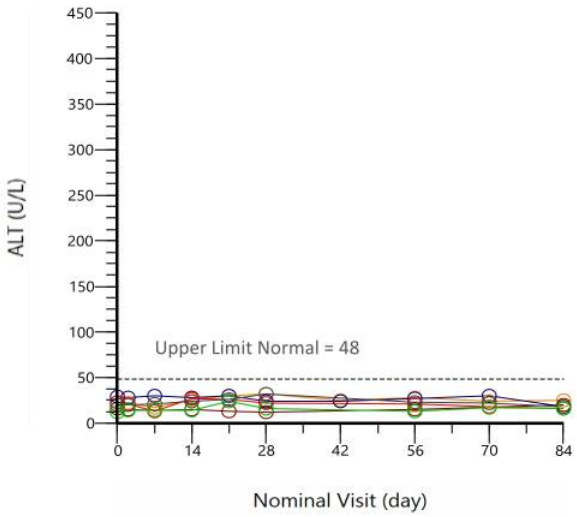
Minimum HBsAg decline of -0.62 log10 and maximum HBsAg decline of -2.14 log10 at week 12



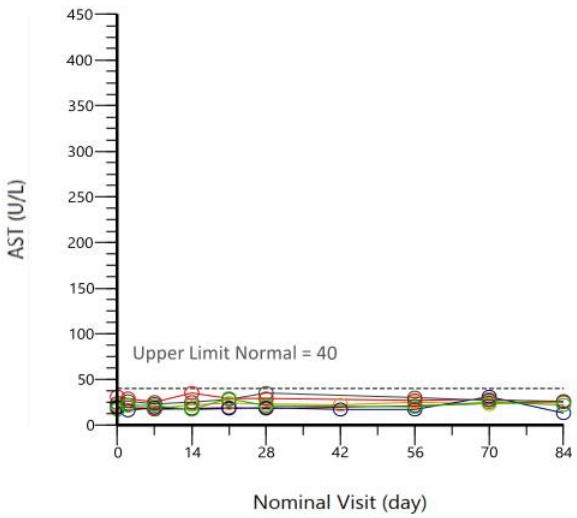


AB-729 60 mg Single-Dose Generally Safe and Well Tolerated with Normal ALT/AST Through 12 Weeks

Alanine Aminotransferase

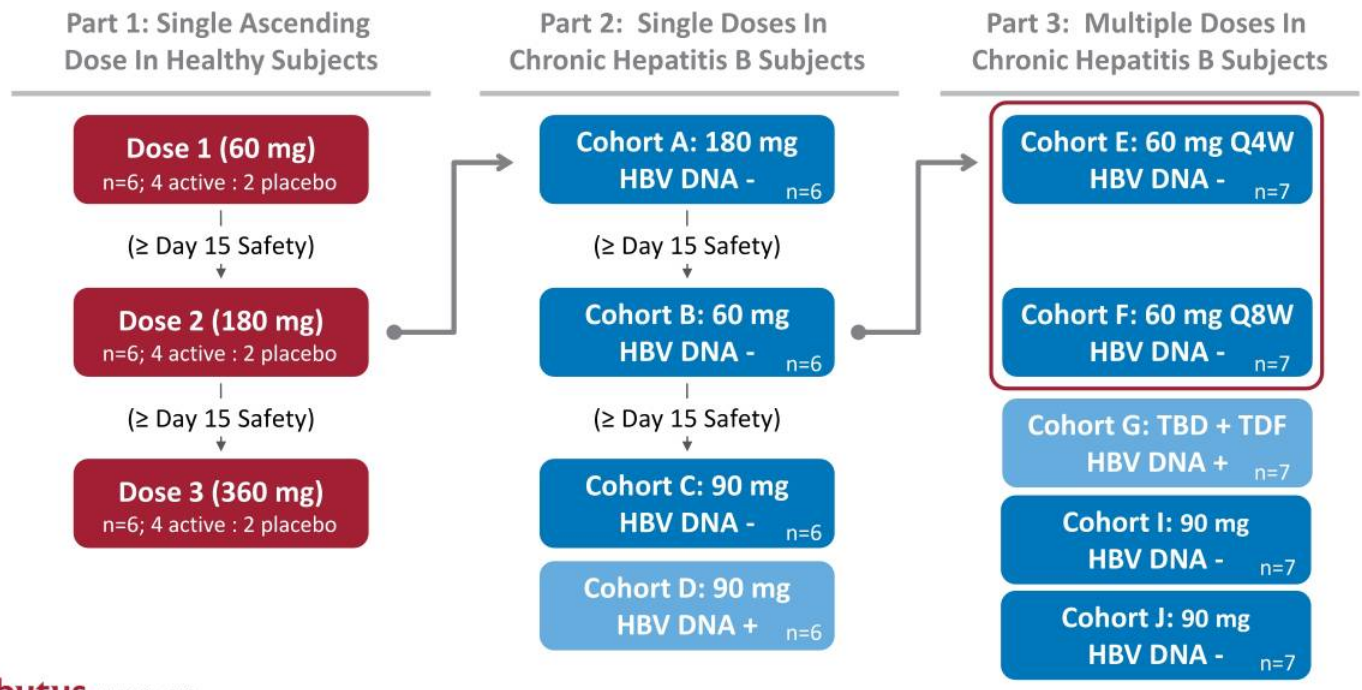


Aspartate Aminotransferase



Samples from week 8 and week 12 from one subject collected by local lab where Upper Limit Normal = 34 U/L for bo

AB-729-001 Study



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HBV: Hepatitis B Virus | TDF: tenofovir disoproxil fumarate | TBD: to be determined

AB-836
Capsid Inhibitor

IND enabling studies ongoing

Potential for increased potency and enhanced resistance profile

- Novel chemical series differentiated from AB-506 and other competito compounds in the Class II capsid inhibitor space
- Leverages a novel binding site within the core protein dimer-dimer inte
- Improved intrinsic potency with EC50 $\leq$ 10 nM
- Active against NA resistant variants
- Potential to address known capsid resistant variants T33N and I105T
- Provides the potential for low dose and wide therapeutic window
- Projected to be once daily dosing
- Pangenotypic
- Combinable with other MOA agents

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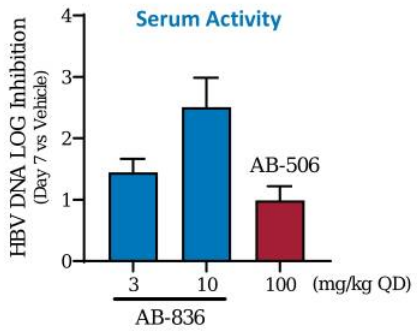
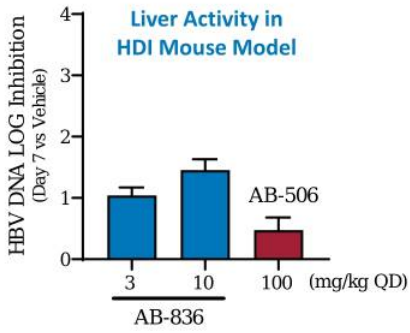
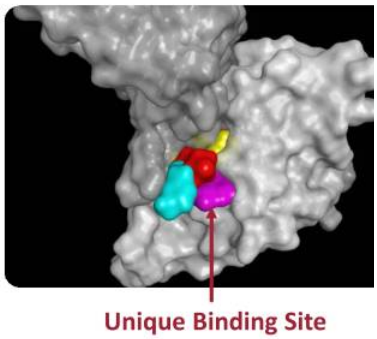
AB-836: A Next Generation Capsid Inhibitor

	HBV DNA / 1° Mechanism				cccDNA Formation / 2° Mechanism	Huma Serum
Compound	HepDE19 (EC_{50} µM)	HBV infected PHH (EC_{50} µM)	HBV infected HepG2-NTCP-C4 (EC_{50} µM)	Core I105T Mutation (EC_{50} mM)	HBV infected HepG2-NTCP-C4 (HBsAg EC_{50} µM)	(FC in EC_{50} Human S
AB-506	0.077	0.032	0.101	1.26	1.430	6x
AB-836	0.010	0.002	0.012	0.118	0.196	2x







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HAP: Heteroaryldihydropyrimidine | **SBA:** Sulfamoylbenzamide **I PHH:** Primary Human Hepatocytes

Next Gen RNA Destabilizer Program

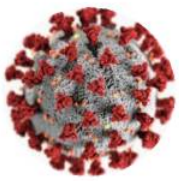
Offers a novel mechanism of action to reduce HBsAg and other viral proteins and viral RNA

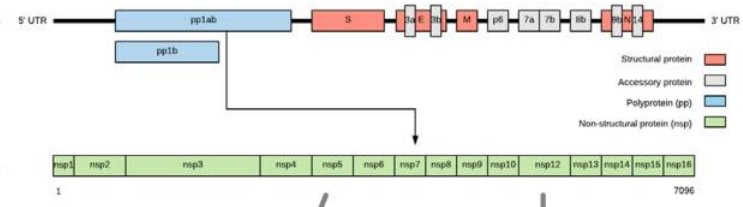
Continuing active research and development of a next generation small molecule

We believe this approach offers potential for an oral HBsAg reducing agent and all oral combination therapy

Coronavirus Strategy

Leveraging our proven expertise and capabilities in antiviral drug discovery and development

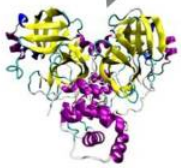




+RNA Virus

31 kb Genome

nsp5 protease & nsp12 polymerase essential enzymes for replication



COVID-19 Virus nsp5 / 3CLpro

Viral Protease

COVID-19 Virus nsp12

Viral Polymerase

Long term commitment

Pan-coronavirus focused

Small Molecule Direct-Actir Antivirals

Directed Effort

- nsp12 Viral Polymerase - nucleosid(t)es
- nsp5 Main Viral Protease denovo design

Screening Effort

- Proprietary library screer through COVID R&D consortium

Key Objectives for 2020

Cash balance of $115M as July 31, 2020, cash runway into mid-2022

Objective	Anticipated Timing
AB-729 preliminary phase 1a/1b single-dose data	✓ Late 1Q 2020
AB-729 additional week 12 60 mg single-dose data	✓ May 2020
AB-729 multi-dose 60 mg data (4 and 8 wk dosing intervals)	2H 2020
AB-729 week 12 single-dose 90 mg data (in HBV DNA positive and negative subjects)	2H 2020
Initiate two AB-729 90 mg multi-dose cohorts	2H 2020
Complete AB-836 IND enabling studies	2H 2020

Arbutus received $36.5 million of net proceeds under the ATM program during July 2020