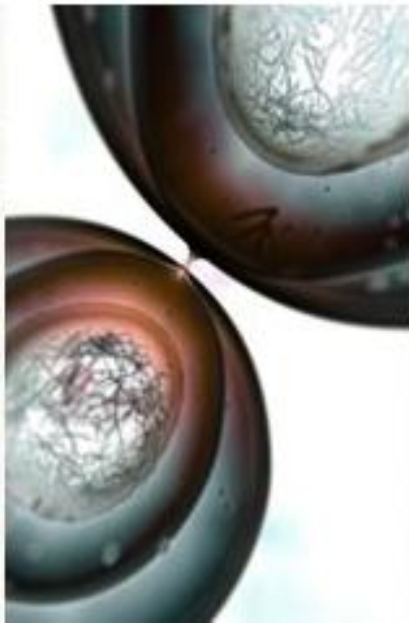
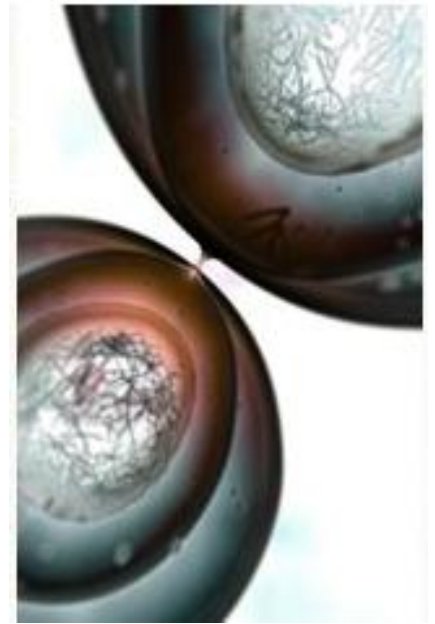




Advanced Cell Technology



Corporate Presentation
September 2010



Cautionary Statement Concerning Forward-Looking Statements

This presentation is intended to present a summary of ACT's ("ACT", or "Advanced Cell Technology Inc", or "the Company") salient business characteristics.

The information herein contains "forward-looking statements" as defined under the federal securities laws. Actual results could vary materially. Factors that could cause actual results to vary materially are described in our filings with the Securities and Exchange Commission.

You should pay particular attention to the "risk factors" contained in documents we file from time to time with the Securities and Exchange Commission. The risks identified therein, as well as others not identified by the Company, could cause the Company's actual results to differ materially from those expressed in any forward-looking statements.

State of the Company

- Phase I/II ESC trial fully-funded (and not affected by court ruling)
- “Embryo-safe” cell lines may qualify for federal funding, despite recent court ruling
- Actively pursuing alternatives to accelerate development of programs

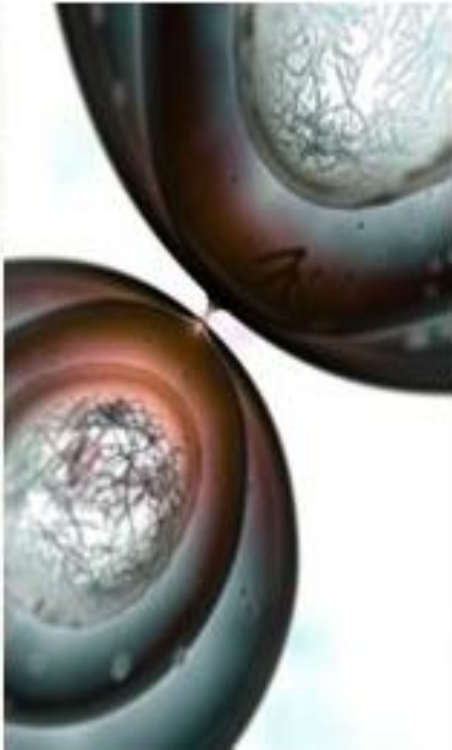
ACT Therapeutics

ACT Proprietary Human Therapeutic Programs	Treatment	Clinical Stage
Blastomere Program	Development of embryonic stem cell lines without destruction of embryo	Pre-Clinical
Retinal Pigment Epithelium (RPE) Program	Treatment of Age-related Macular Degeneration (AMD) and Retinal Degenerative Diseases	Clinical IND awaiting FDA approval
Myoblast Program	Treatment of Heart Disease, Heart Attack and Heart Failure	Phase II
Hemangioblast program	Treatment of Diseases and Disorders of the Blood, Circulatory and Vascular Systems	Pre-Clinical

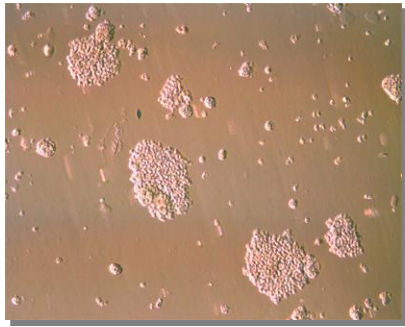
Blastomere Program: Synthesizing Stem Cells without Harm to the Embryo

Single Blastomere Technology

- Company scientists successfully generate stem cell lines without destruction of embryo
- Utilizes PGD extraction of single blastomere
- PGD is routine - used in about 1000 pregnancies per year in United States and Europe
- Technology has been reproduced and peer-reviewed on several occasions.
- Cell lines retain potential to form all cells in the human body.
- Resulting human ES cell lines are more robust and reproducible than traditional ICM-derived lines.
- National Institute of Health (NIH) proposing expanded funding regulations to accommodate ACT's lines.



First Proven Alternative hESC Method



**Hemangioblasts
Differentiated from
Blastomere hESC Lines**

- **Enables Derivation of New hESC Lines via Pre-implantation Genetic Diagnosis (PGD) Method, Preserving Development Potential of the Embryo**
 - Offers source of autologous ES cells for donor during his/her life
- 4 hESC lines awaiting NIH approval for funding – embryos from which these lines were derived were not destroyed. Outside scope of court's original injunction.
- Technology is used to develop RPE cells for our clinical trials for Stargardt's disease

Current Challenge to hESC Federal Funding

Timeline: Sherley vs. Sebelius

August 19, 2009 – Complaint filed

October 27, 2009 – Suit dismissed by Judge Lamberth for lack of standing by Plaintiffs

June 25, 2010 – Court of Appeals upholds standing of two plaintiffs, remands to district court

August 23 – Judge Lamberth ruled that President Obama's expansion of federal financing for hESC research violated federal law

Issued preliminary injunction enjoining federal funding of human ES cell research under the 2009 guidelines promulgated by NIH

September 1 – Government requests stay of injunction

September 7 – Judge denies request for stay. Indicates that Summary Judgment motions will be heard very soon – could lead to Permanent Injunction (Plaintiffs win without a trial)

September 10 – Federal Court of Appeals stays injunction >> BUT, Summary Judgment process marches on. Plaintiff's file motions for permanent injunction; Government's response is due in 10 days.

Has anything really changed to alter Lamberth's thinking when he hears the summary judgment arguments?

Should Scientists Have Been Surprised?

"The NIH was frankly, I was stunned - as was virtually everyone here at NIH - by the judicial decision yesterday".
– Francis Collins, NIH Director

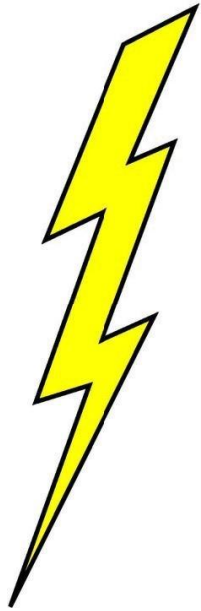
ACT was prepared ...

- Have been paying careful attention to this case
- Have been meeting with members of Congress regarding the very issue of Dickey-Wicker Amendment
 - Circulated a memo to members of Congress during meetings in DC on July 28th which specifically warned of this consequence

The Federal Injunction Against hESC Funding

Each party using stem cell research as an election “Lightning Rod”

Post-election legislation does not address reality of Dickey-Wicker



ACT's Solutions and Recommendations for Congressional Action:

- ***Amend Dickey-Wicker***
- ***Reinforce H.R. 4808 and other stem cell research bills***

With Crisis, Comes Opportunity

CRISIS

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A time of danger;

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A time of opportunity;

- The Sherley v Selebius case presents a major challenge for the regenerative medicine sector, without a doubt.
 - **However**, ACT has anticipated this development for some time
- ACT has been taking high-level, face-to-face meetings in DC with all the relevant players, in both houses and on both sides of the aisle, as well as with NIH and HHS.
 - ACT's Single Blastomere technique for isolating hESC's is likely not subject to the language Judge Lamberth used in Preliminary Injunction.
 - ACT stands ready to make these cells available to the research community, if approved.

Current Challenge to hESC Federal Funding

Action Plan: NIH

- Current situation: Lawyers controlling actions / trying to maintain status quo
 - Mindful of this as a lightning rod for mid-term elections
- The Reality: NIH is facing a permanent injunction on federal funding, perhaps as early as end of month
- ACT's Blastomere technique may be a fallback until the issue is resolved in Congress.
 - ACT is offering to make its hESC lines available to academic laboratories

Institutional Collaborators



Memorial Sloan-Kettering
Cancer Center



Advanced Cell's Institutional Collaborators include:

Casey Eye Institute

Moran Eye Institute

Harvard

Stanford

University of Florida

University of Illinois

Colorado State University

Mayo Clinic

UCSF

Johns Hopkins

Sloan Kettering

University of Iowa

U.C. Berkeley

Robust Patent Portfolio

- RPE Program
 - Broad protection for production of RPE cells from human ES Cells
 - Includes two issued US Patents
 - Cover use of hESC-derived RPE cells for treatment of retinal degenerative disorders
- Single Blastomere
 - Pending patent application for key technology
- Induced Pluripotency (iPS)
 - ACT has earliest priority date to use of key regulatory factors required for generating iPS cells.
- Transdifferentiation
 - Broad filings directed to transdifferentiation without viral vectors
- SCNT
 - Dominant issued patents
- Parthenogenesis
 - Acquired Infigen patents which are controlling in parthenogenesis

Realizing the fruits of more than a decade of important discoveries....

ACT's RPE Program IND - *Status*



- Received Orphan Indication
- Application for IND Being Reviewed
- Initial IND for Stargardt's Disease
- Trial Design Dovetails Into Second IND, for Dry AMD
- Represents \$25-30 Billion Worldwide Market, With No Effective Therapies Currently Available



ACT's RPE Program IND

- Filed IND with FDA in November 2009
- FDA conveyed concerns in light of Geron's hold
- Geron's hESC trial approved in August; established a bar showing that hESC can move forward
- FDA now focused on not replicating a "Geron-type" situation

Myoblast Program Highlights

Target Market for Myoblast Program

Sufferers of Heart Failure, Chronic Heart Failure and patients with scarred or ischemic (dead) heart tissue caused by or related to heart attack

Program Status

Clearance from FDA to Proceed with Phase II Clinical Trials in the U.S.



Hemangioblast Program: Partnership



- Joint Venture with leading Korean stem cell developer CHA Biotech Co.
- The J.V., 'Stem Cell & Regenerative Medicine International', is focused on the development of human blood cells and related products
- Developing IND submission for red blood cells and/or platelets derived from iPS cells



The Advanced Cell Technology Team

World Class Scientific Team Led By

Dr. Robert Lanza, M.D. – Chief Scientific Officer

Dr. Jonathan Dinsmore, Ph.D. – Myoblast Project Advisor

Matthew Vincent, Ph.D. – Business Development and IP Strategy

Seasoned Management Team

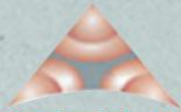
William M. Caldwell IV – Chairman & CEO

Edmund Mickunas – Vice President of Regulatory

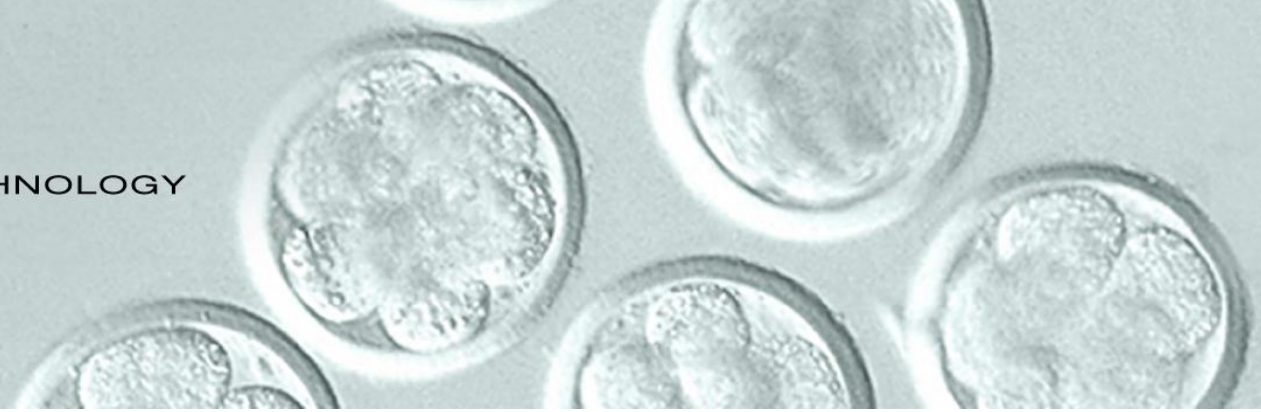
Roger Gay, PhD – Senior Director of Manufacturing

Rita Parker – Director of Operations

Bill Douglass – Director of Corporate Communications & Social Media



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Rodman
& Renshaw®

Thank you for your time

For more information, visit www.advancedcell.com

Advanced Cell Technology is traded on the OTC BB, symbol: ACTC