CATALYST BIOSCIENCES

Corporate Overview

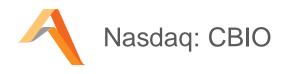
9 April 2019



Forward looking statements

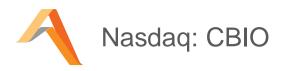
This presentation includes forward-looking statements that involve substantial risks and uncertainties. All statements, other than statement of historical facts, included in this presentation are forward-looking statements. Examples of such statements include, but are not limited to potential markets for MarzAA and DalcA, plans for clinical trials of MarzAA, presentation of MarzAA SQ Phase 2 data in Q3 2019 and initiation of a Phase 3 SQ trial of MarzAA in 2020, the potential benefits of SQ administration of MarzAA and DalcA, the potential for long-term dosing of DalcA to maintain FIX activity in the high-mild hemophilia range, plans for clinical trials of DalcA and presentation of Phase 2b clinical trial data in Q3 2019, and the potential uses and benefits of CB 2679d-GT for gene therapy. Actual results or events could differ materially from the plans, expectations and projections disclosed in these forward-looking statements.

Various factors could cause actual results or events to differ materially from the forward-looking statements, including, but not limited to, the risk that clinical trial initiation or enrollment may be delayed and that ongoing or future trials may not achieve their endpoints, that subsequent clinical trials will not replicate the results from earlier clinical studies on small numbers of patients, that potential adverse effects may arise from the testing or use of Catalyst's products, including the generation of antibodies or inhibitors, the risk that costs required to develop or manufacture Catalyst's products will be higher than anticipated, the risk of competition from other hemophilia treatments, including those in development, the risk of Catalyst's ability not to infringe third party intellectual property rights, and other factors described in the "Risk Factors" section of Catalyst's Quarterly Report on Form 10-K for the year ended December 31, 2018, which was filed with the Securities and Exchange Commission on March 8, 2019. Forward looking statements in this presentation speak only as of the date hereof. Catalyst does not assume any obligation to update any forward-looking statements, except as required by law.



Catalyst Biosciences: CBIO





Investment Highlights



Novel subcutaneous factors with orphan drug designation, MarzAA & DalcA



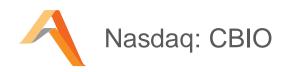
MarzAA & DalcA SQ clinical efficacy demonstrated



~134 worldwide patents – CBIO retains full ownership of all compounds







\$3.7B market opportunity

Experienced team

Well funded ~\$120 M cash (Q4 2018)



Addressing unmet needs in orphan bleeding disorders

Hemophilia A

- Congenital lack of functional FVIII
- Treatments: IV FVIII or SQ Hemlibra®

SQ treatment of bleeds

Hemophilia A with inhibitors

Antidrug antibodies that neutralize replacement clotting factor

- 30% of Hem A patients
- Treatments: SQ Hemlibra, IV FVIIa

SQ treatment of bleeds on Hemlibra

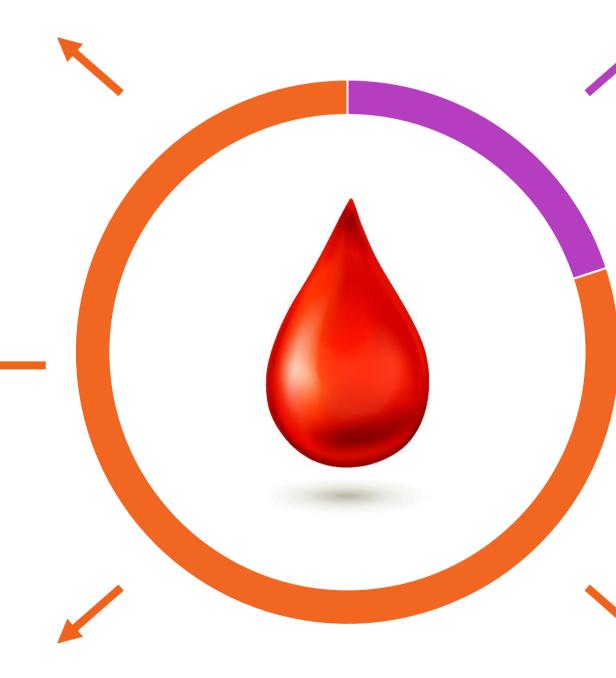
Factor VII deficiency

Congenital lack of FVII

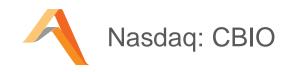
- Treatments: IV plasma FVII or FVIIa

SQ prophylaxis in severe patients

MarzAA & DalcA



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Hemophilia B

Congenital lack of functional FIX

- Treated with IV FIX products

SQ prophylaxis

Hemophilia B with inhibitors

Antidrug antibodies that neutralize replacement clotting factor

- 5% of Hem B patients
- Treated with IV bypass agents (FVIIa, FEIBA®)

SQ prophylaxis

Acquired Hemophilia

Rare disorder, caused by anti-FVIII nAbs

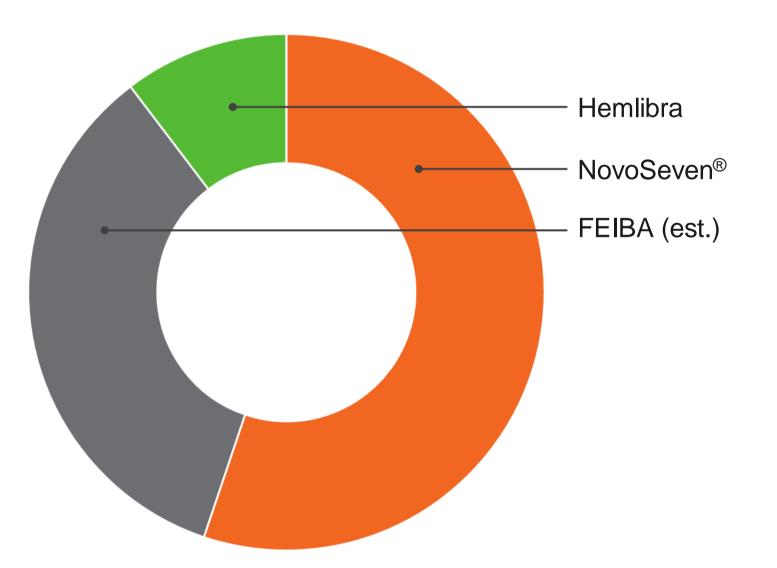
Treated with immunosuppressants + IV
bypass agents (FVIIa, FEIBA or Obizur[®])

SQ prevention of re-bleeds

Addressing multi-billion dollar markets – 2018 sales

MarzAA

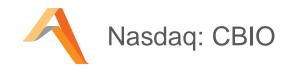
FVIIa & Bypassing Agents: \$2.2B market



Sources: WFHAnnual Global Survey, GlobalData, Roche, Novo Nordisk, SOBI, Bioverativ, Sanofi, Pfizer

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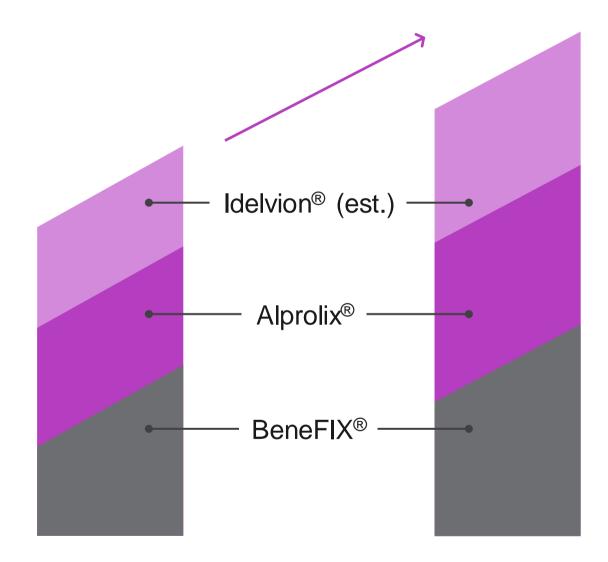




DalcA

Hemophilia B, FIX: \$1.5B market

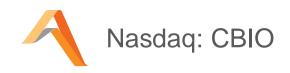
25% YoY growth



The Catalyst Biosciences subcutaneous solution



catalystbiosciences.com

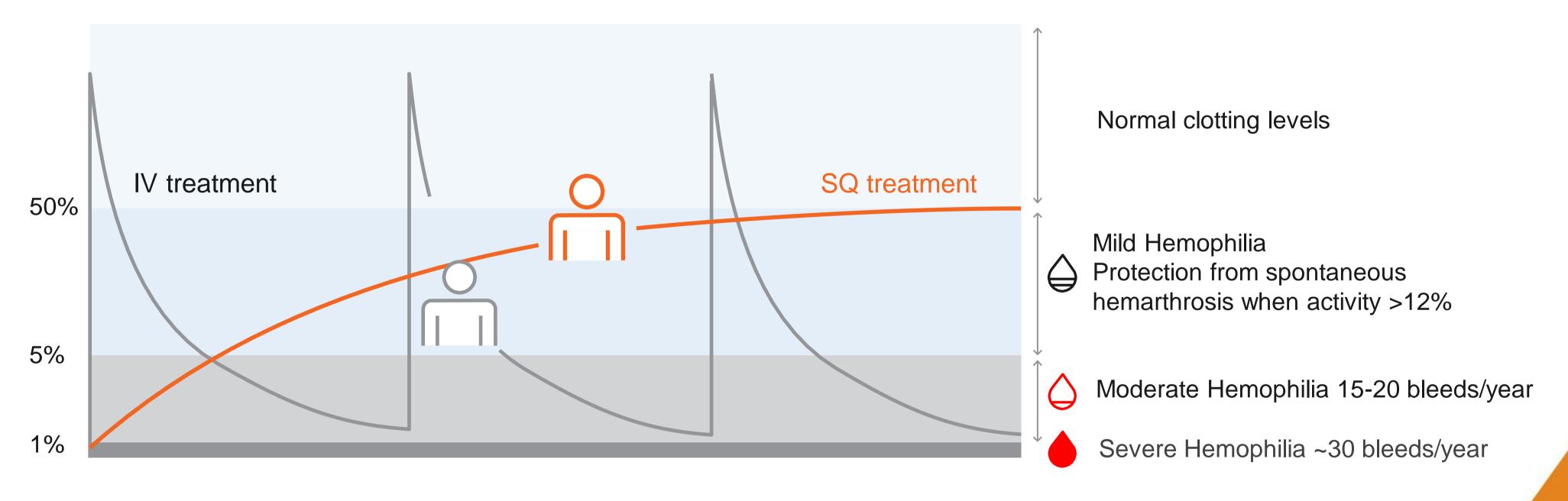


Our highly potent candidates

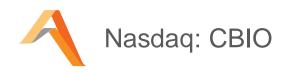
- Quick & simple SQ Injection +
- Allows for self-administration +
- Ideal for pediatric patients +
- Much higher & more stable + factor levels
- + Keeps patients at protective levels continuously

The new standard in hemophilia prophylaxis

Patients in high mild range are protected from spontaneous bleeds

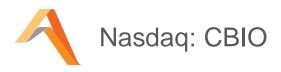


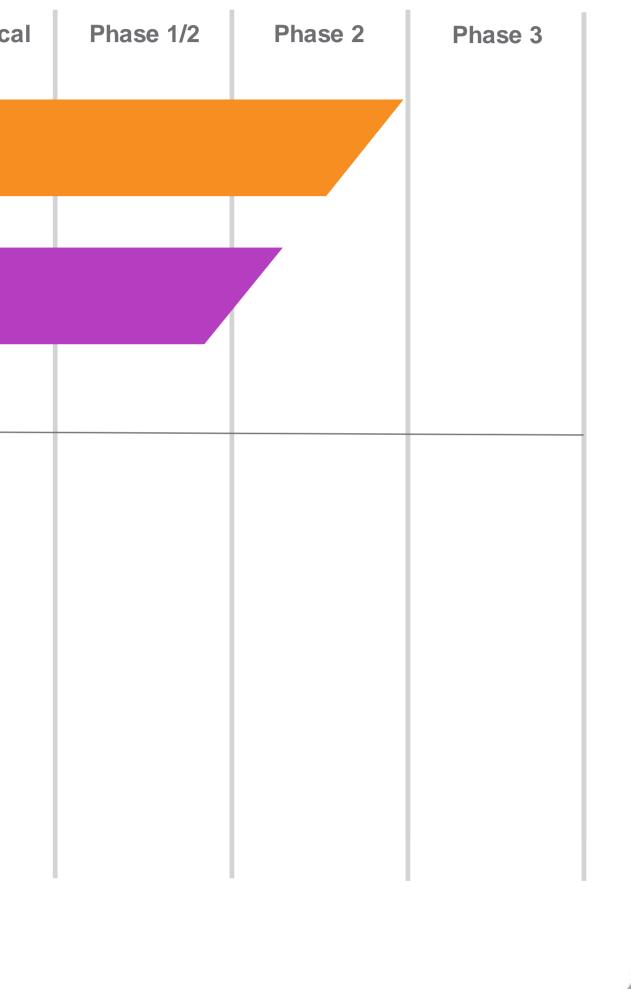
- Our concept of prophylactic treatment is to keep severe & moderate +hemophilia patients in the high mild range
- Subcutaneous factor treatments build up over time, offering long-term + stability in clotting levels



Pipeline

Clinical assets	Research	Preclinica
Hemophilia with inhibitors rFVIIa SQ Marzeptacog alfa (activated) "MarzAA"		
Hemophilia B rFIX SQ Dalcinonacog alfa "DalcA"		
Additional assets		
Hemophilia B FIX Gene Therapy CB 2679d-GT		
Dry AMD anti-C3 protease CB 2782-PEG		
Universal pro-coagulant FXa CB 1965a		





Marzeptacog alfa (activated) – MarzAA

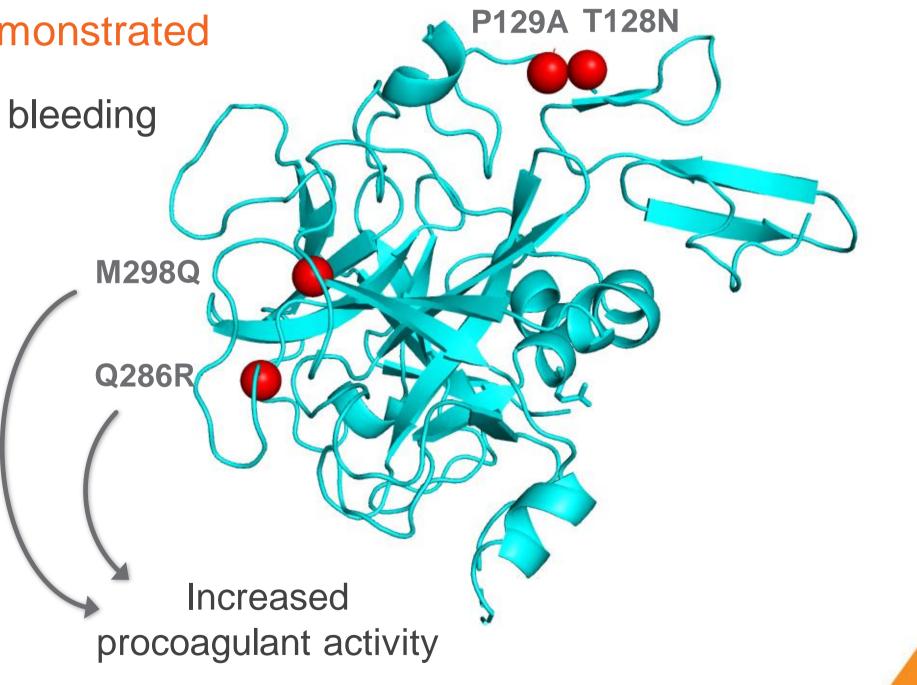
Marzeptacog alfa (activated), a novel best in class SQ FVIIa product candidate

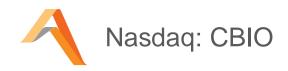
- P2 completed efficacy, safety and tolerability demonstrated
- + One drug solution for prophylaxis and treatment of bleeding
- + Maintains continuous protective levels
- Disruptive to current intravenous bypass products
- + Especially well suited for children

Four engineered substitutions

- + Catalytic activity & half-life increased
- + 9-fold more potent than NovoSeven RT

Orphan Drug Designation in US & EU

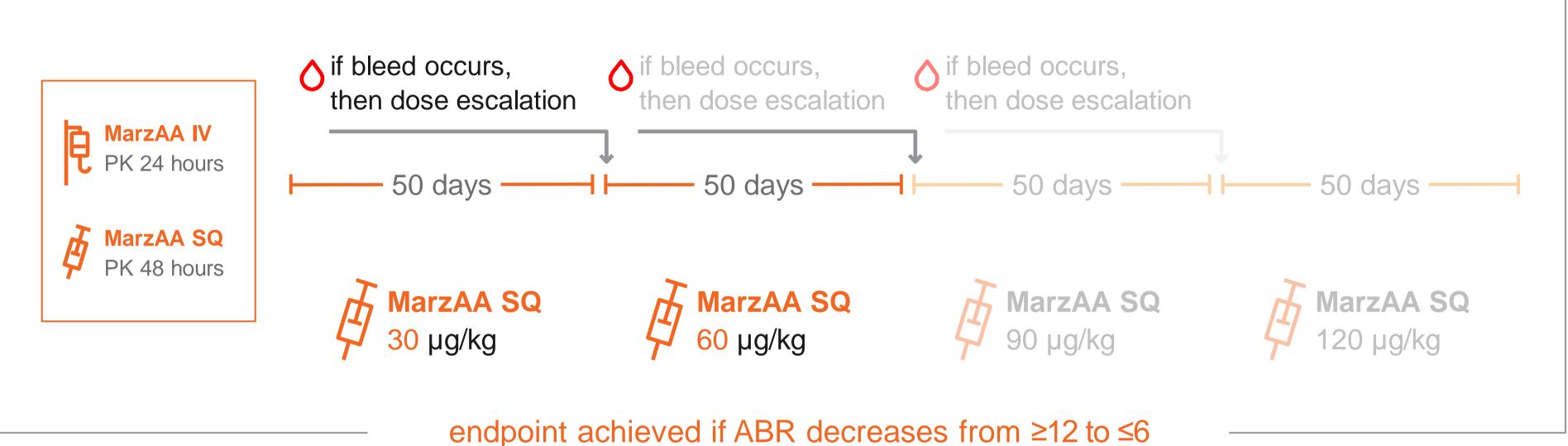




Hyperglycosylation site

MarzAA phase 2/3 SQ clinical trial design

Individualized dose escalation if needed +

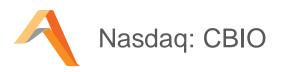


- Open label SQ study with individual dose + escalation if needed
- Hemophilia A or B with inhibitors +
- Patients with documented annual +bleeding rate (ABR) >12

- +

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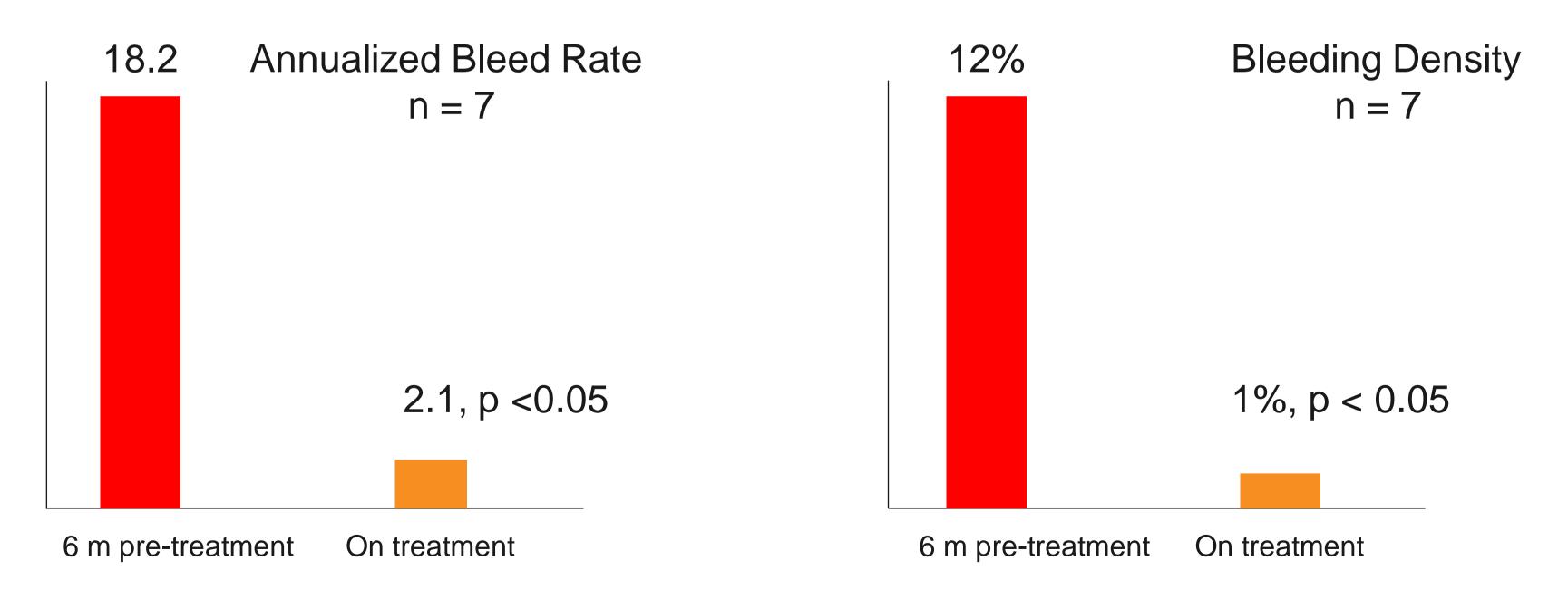
+ Enrollment & dosing completed

+ Primary endpoint: reduction in annualized bleed rate at final dose level

Secondary endpoints: safety and tolerability, no inhibitor formation

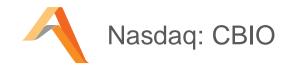
MarzAA P2 clinical efficacy: >90% reduction in bleeding

- Annualized bleeding rates (ABR) reduced from 18.2 to 2.1 (5 of 7, no bleeds for 50 days) +
- Bleed density significantly reduced from 12% to 1% +
- Safe & well tolerated, ~1% ISRs (>450 doses) and no ADAs or nAbs +
- Top dose = 60 μ g/kg (2/7 subjects) +



Levy et al. EAHAD 2019

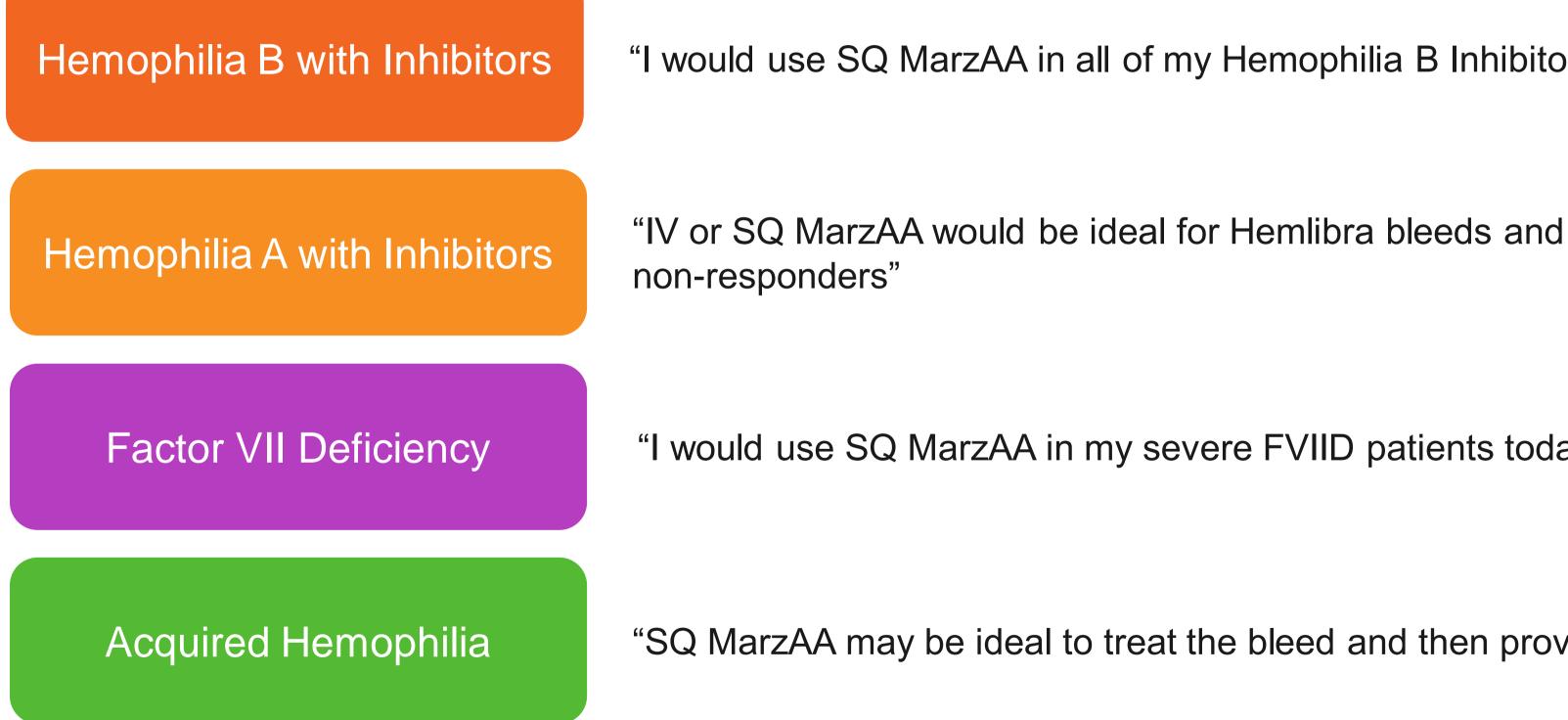






MarzAA Revenue Forecast >\$400M Worldwide

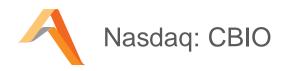
Target Product Profile Resonates Strongly Across Multiple Indications with US & EU KOLs



ADIVO ASSOCIATES

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"I would use SQ MarzAA in all of my Hemophilia B Inhibitor patients"

"I would use SQ MarzAA in my severe FVIID patients today"

"SQ MarzAA may be ideal to treat the bleed and then provide prophylaxis"

Marzeptacog alfa (activated)

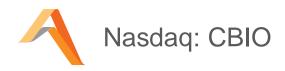
Phase 3 registration study to initiate in 2020

Clinical efficacy & tolerability demonstrated

Final clinical data at ISTH, July 2019

Subcutaneous PK study initiated, final data in Q4

Pivotal trial guidance obtained from EMA & MHRA – FDA end-of-phase 2 meeting in late 2019





Dalcinonacog alfa – DalcA

Novel clinical stage SQ FIX product candidate differentiated from IV market leaders

Phase 1/2 completed

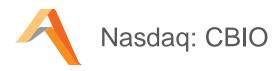
- + 22-fold more potent than BeneFIX in man
- Haintains continuous protective FIX activity levels of 12 30%
- + 2 nAbs observed that are <u>non-cross-reactive</u> to FIX, both returned to previous FIX therapy, no safety issue
- + Disruptive to all intravenous products

Immunogenicity assessment completed

- + Similar low potential risk as for BeneFIX
- + Drug product quality is comparable to commercial FIX products
- + KoL & regulatory agreement on proceeding to Phase 2b

Phase 2b study initiated

Orphan Drug Designation in US & EU



R318Y Resistance to antithrombin

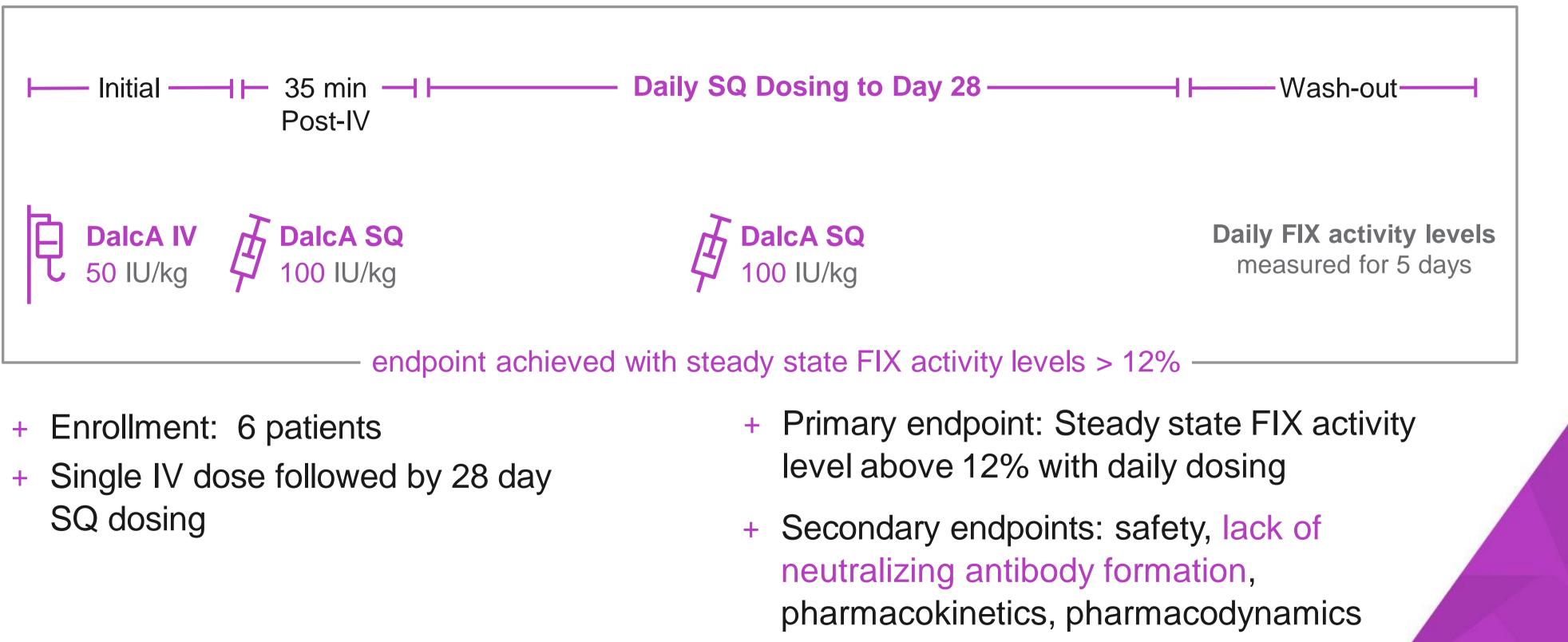
T343R

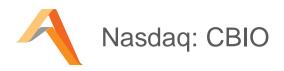
R338E

Increased FVIIIa affinity & procoagulant activity

Dalcinonacog alfa phase 2b SQ clinical trial design

DLZ-201 enrolling





CB 2679d-GT for gene therapy in hemophilia B

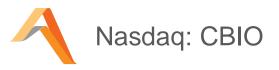
Strategic asset for long-term portfolio development Superior preclinical efficacy of CB 2679d-GT vs Padua

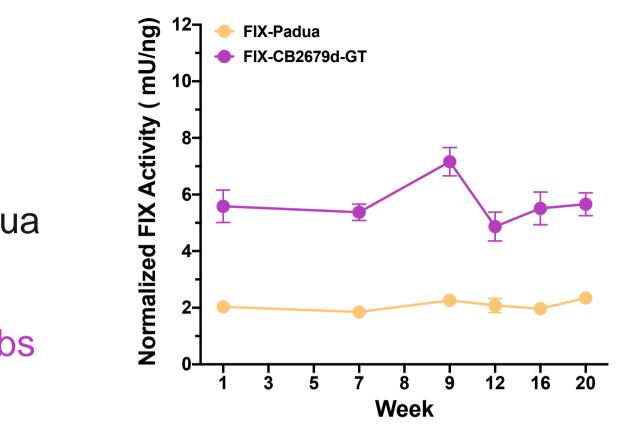
Compared AAV gene therapy efficacy of CB 2679d-GT vs FIX-Padua in hemophilia B mice

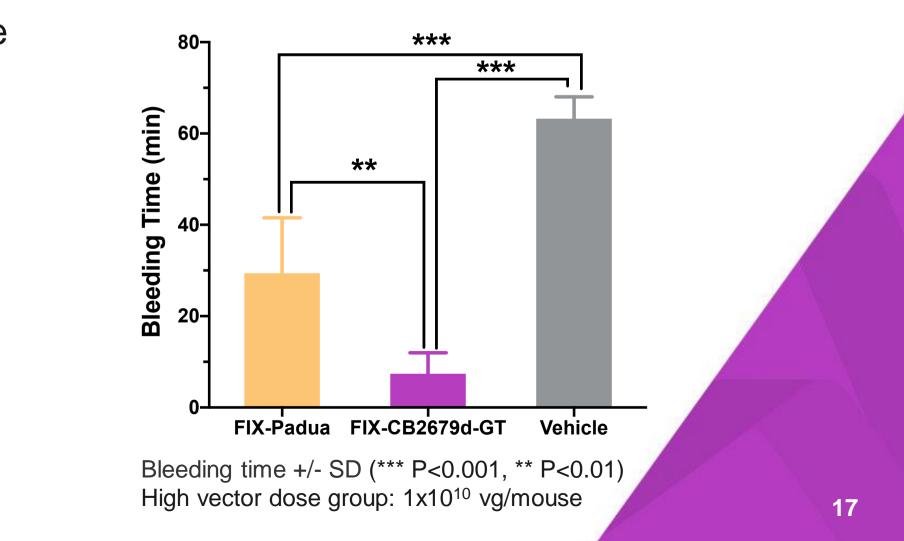
- + Antigen and activity levels elevated throughout the study, no nAbs
- + 3-fold superior FIX activity
- + 4-5 fold reduction in bleeding time, more rapid and robust hemostatic correction of bleeding with reduction in bleeding time
- + Potential for higher activity levels & lower vector dose could improve efficacy, safety & manufacturing cost

Wholly-owned & issued patents

Optimizing construct in 2019







Dalcinonacog alfa – DalcA

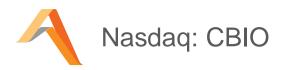
Phase 2b clinical development initiated

P1/2 clinical efficacy & tolerability demonstrated

Interim Phase 2b data in Q3 2019

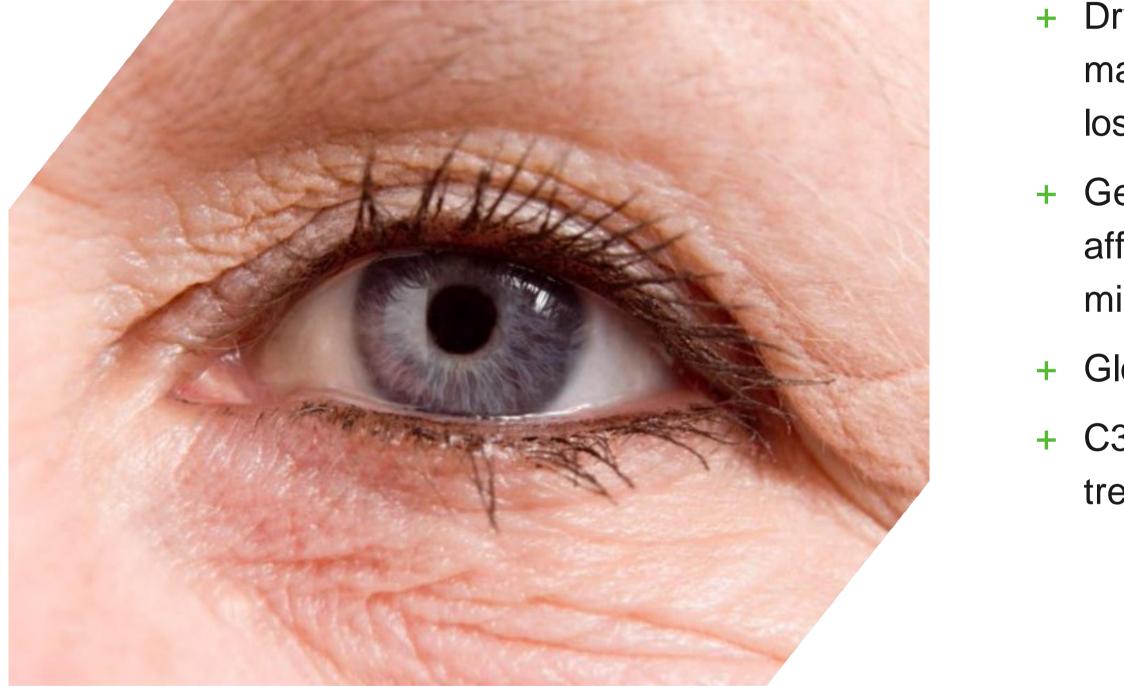
KOLs & subject experts agree with low immunogenicity risk assessment

No nAbs in gene therapy expression of the DalcA sequence



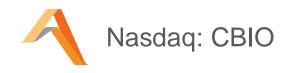
CB 2782-PEG anti-complement factor 3 (C3) protease

Geographic Atrophy associated Dry AMD



Sources: National Eye Institute. Facts About Age-Related Macular Degeneration, Tufail 2015, The Eye Diseases Prevalence Research Group 2004, GlobalData

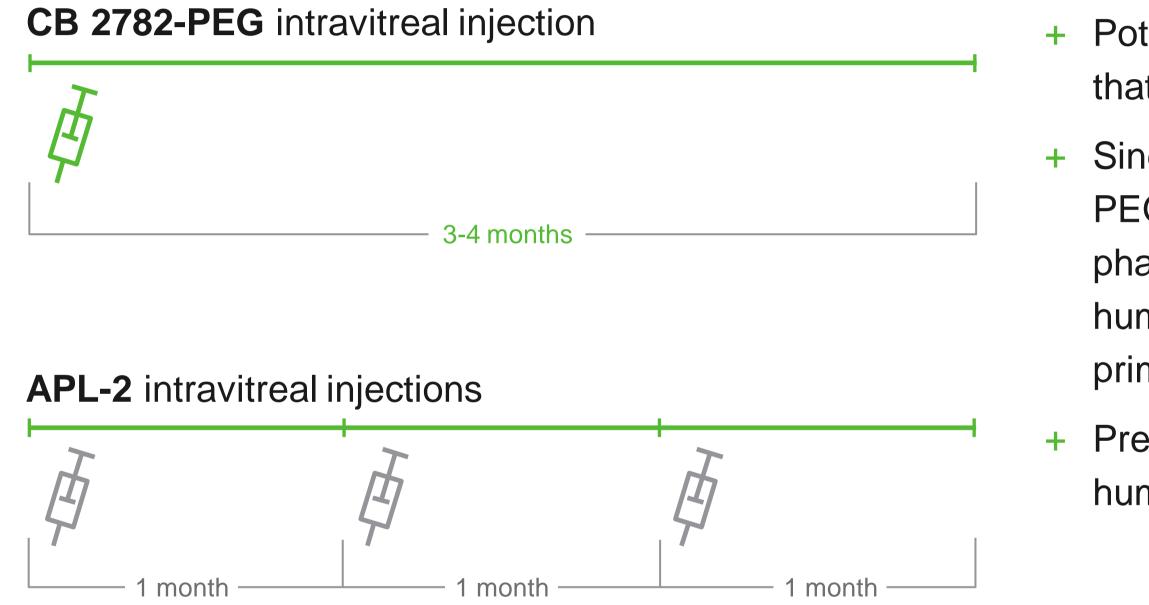




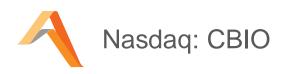
- + Dry AMD is an advanced form of age-related macular degeneration that results in the irreversible loss of retina and leads to blindness;
- + Geographic atrophy, an advanced form of dry AMD, affects over five million people worldwide and a million people in the United States
- + Global market is >\$5B with no approved drugs;
- + C3 is the only clinically validated target for the treatment of Dry AMD

CB 2782-PEG long acting anti-C3 protease

Best-in-class anti-C3 profile for the treatment of geographic atrophy in dry AMD







- + Potent and selective long acting anti-C3 protease that degrades C3 into inactive fragments
- + Single 125 µg intravitreal injection of CB 2782-PEG achieved complete, rapid and sustained pharmacodynamic inhibition (>99%) of vitreous humor C3 for at least 28 days in non-human primates
- + Preclinical PK and PD data predict best-in-class human intravitreal dosing three or four times a year

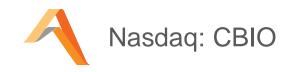
Financial information

Selected data

Financial results	Q4 2018	2018 Full Ye
Cash & Cash Equivalents	\$120.1 M	\$120.1
Operating Expense	\$11.7 M	\$33.8
Net Loss	(\$10.9M)	(\$30.1
Net Loss per share	(\$0.93)	(\$2.6

Financial results	Q4 2018	2018 Full Year
Cash & Cash Equivalents	\$120.1 M	\$120.1 M
Operating Expense	\$11.7 M	\$33.8 M
Net Loss	(\$10.9M)	(\$30.1 M)
Net Loss per share	(\$0.93)	(\$2.68)
Share data		
Common Stock Outstanding		
Officer & Director ownership		8.1%
Fully Diluted Shares*		14,628,625
Average Volume		
Market Capitalization as of 5 April 2	2019	\$126.8M
* Includes ~1M ontions available for issuance		

* Includes ~1M options available for issuance

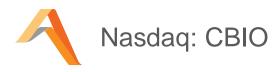


2019 Estimate

~\$70M ~\$56M

2019 Milestones

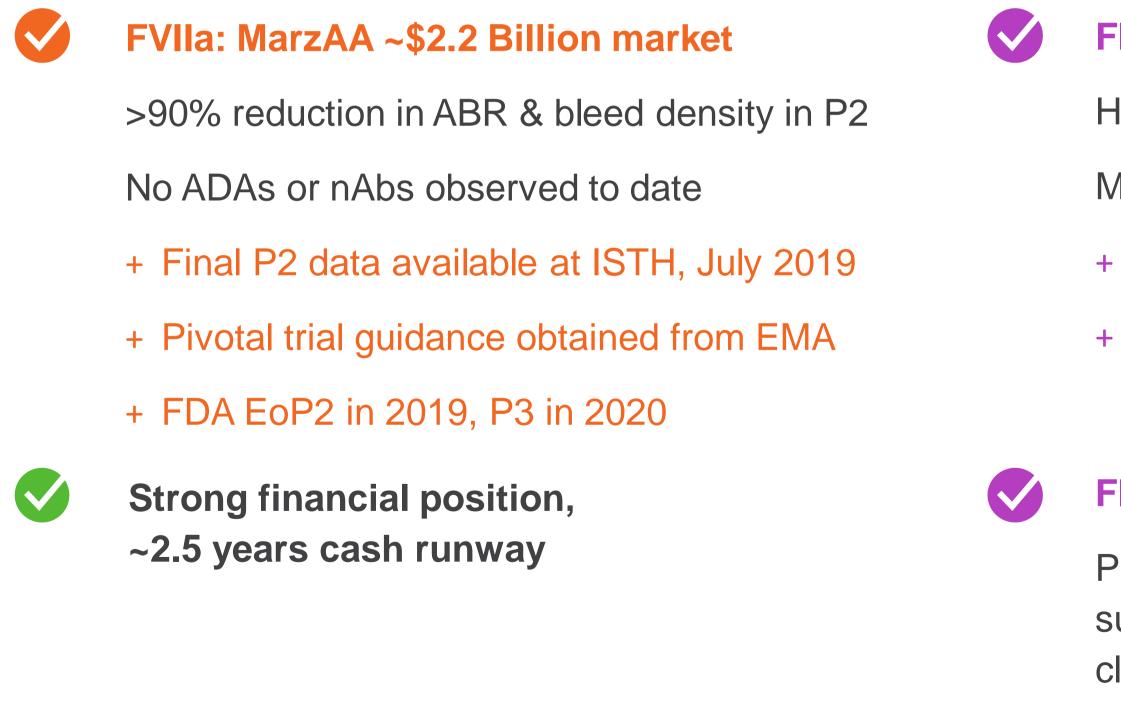
	Q1	Q2	Q3	Q4
MarzAA (FVIIa)	P2 efficacy Enrollment complete	Initiate P1 PK/PD	Final P2 Data	P1 PK/PD data FDA EoP2 A/B Inhibitors
DalcA (FIX)	Initiate P2b		P2b data	Final P2b data
CB 2679d-GT (FIX)	Preclinical efficacy			
CB 2782-PEG (dAMD)		Ocular EHL PK/PD		

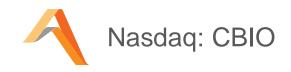


Summary

Disruptive approach to a \$3.7 billion market

Subcutaneous prophylactic dosing of novel factors is less painful, more convenient and potentially more efficacious, especially for children – Clinical efficacy demonstrated for both MarzAA & DalcA





FIX: DalcA >\$1.5 billion market

- High mild, >30% activity levels achieved
- Most advance SQ FIX in the clinic
- + Phase 2b initiated
- + Phase 2b safety & efficacy data in Q3/Q4 2019

FIX: CB 2679d-GT

Preclinical gene therapy asset with superior activity compared with current clinical constructs

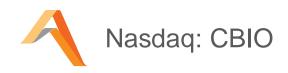
THANK YOU

Nasdaq: CBIO

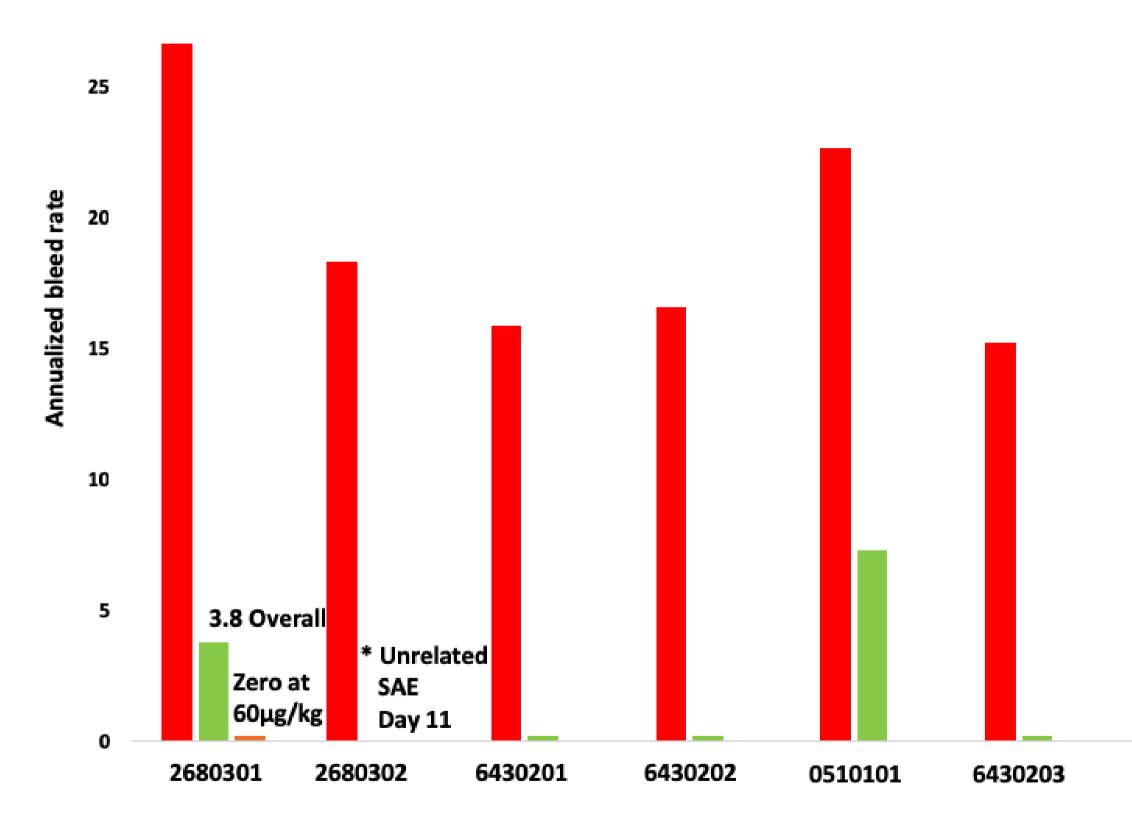


Team

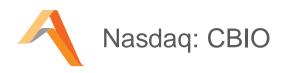


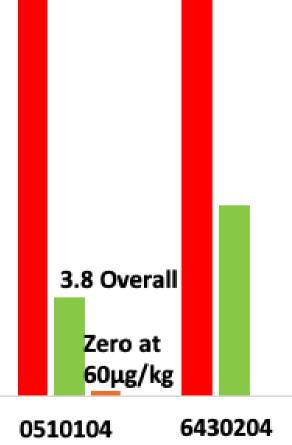


MarzAA – Significant reduction in ABR on-treatment



Levy et al. EAHAD 2019





DalcA Phase 1/2 clinical trial FIX activity results

Trough levels >12% are sufficient to protect against spontaneous joint bleeds

