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): December 13, 2018

CATALYST BIOSCIENCES, INC.
(Exact name of registrant as specified in its charter)

Delaware	**000-51173**	**56-2020050**
(State or other jurisdiction of incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**

611 Gateway Blvd., Suite 710
South San Francisco, California **94080**
(Address of principal executive offices) **(Zip Code)**

(650) 871–0761
Registrant's telephone number, including area code

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 communications 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 communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

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

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. ☐

Item 1.01 Entry into a Material Definitive Agreement

On December 13, 2018, Catalyst Biosciences, Inc., a Delaware corporation (the "Company"), entered into an Amended and Restated License Agreement (the "A&R License Agreement"), effective as of December 17, 2018, with ISU Abxis ("ISU"). The A&R License Agreement amends and restates in full the Company's License and Collaboration Agreement with ISU, dated as of September 16, 2013, as amended (the "Original Agreement"), to, among other things, revise the rights granted and financial obligations of the partiers thereunder.

Pursuant to the A&R License Agreement, ISU will receive commercialization rights in South Korea to Dalcinonacog alfa ("DalcA") (formerly CB 2679d/ISU304), Catalyst's next-generation engineered coagulation Factor IX being developed for the treatment of severe hemophilia B, and the Company will receive clinical development and commercialization rights in the rest of world (excluding South Korea) and manufacturing development and manufacturing rights worldwide (including South Korea). The A&R License Agreement eliminates the profit sharing arrangement in the Original Agreement and provides for a low single-digit royalty payment to ISU, on a country-by-country basis, for net product sales of DalcA by the Company or its affiliates in each country other than South Korea. Pursuant to the A&R License Agreement, the Company will also make up to an aggregate of $2.5 million in regulatory and development milestone and up to an aggregate of $17 million in commercial milestone payments to ISU, if the applicable milestones are met.

The A&R License Agreement contains customary representations, warranties, covenants and indemnification provisions. The A&R License Agreement may be terminated by either party, subject to applicable notice and/or cure periods, upon a material breach by or an event of bankruptcy relating to the other party or by mutual consent of both parties.

The foregoing is a summary description of the material terms of the A&R License Agreement, is not complete and is qualified in its entirety by reference to the text of the A&R License Agreement, a copy of which the Company expects to file as an exhibit to the Company's Annual Report on Form 10-K for the fiscal year ended December 31, 2018. The Company expects to seek confidential treatment of certain terms of the A&R License Agreement at the time it is filed.

Item 7.01 Regulation FD Disclosure

On December 18, 2018, the Company delivered a presentation at its Research and Development Day (the "R&D Day") in New York, New York to provide updates on its Factor IX ("FIX") dalcinonacog alfa ("DalcA") and Factor VIIa ("FVIIa") marzeptacog alfa (activated) ("MarzAA") hemophilia programs. A copy of the presentation, dated December 18, 2018, is attached as Exhibit 99.1 to this Current Report on Form 8-K and is incorporated herein by reference.

The information in this Item 7.01 of this Current Report on Form 8-K (including Exhibit 99.1) is being furnished and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that Section. The information in this Current Report shall not be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such a filing.

Item 8.01 Other Events

In connection with the R&D Day, on December 18, 2018, the Company issued a press release announcing that it is hosting the R&D Day and providing updates on its FIX DalcA and FVIIa MarzAA hemophilia programs. A copy of the press release, dated December 18, 2018, is attached as Exhibit 99.2 to this Current Report on Form 8-K and is incorporated herein by reference.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

Exhibit No.	Description
99.1	Presentation at the Research and Development Day in New York, New York by Catalyst Biosciences, Inc. on December 18, 2018.
99.2	Press Release, dated December 18, 2018.

SIGNATURES

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.

CATALYST BIOSCIENCES, INC.

Date: December 18, 2018

/s/ Fletcher Payne
Fletcher Payne
Chief Financial Officer

CATALYST BIOSCIENCES

December 18th 2018

Research & Development Day

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, the potential benefits of subcutaneous administration of dalcinonacog alfa (formerly CB 2679d/ISU304) and marzeptacog alfa (activated), the potential for long-term dosing of dalcinonacog alfa to maintain FIX activity in the high-mild hemophilia range, statements relating to Catalyst's clinical trial timelines, including plans for a Phase 2b clinical trial of dalcinonacog alfa, including initiation in the first quarter of 2019 and presentation of data at ISTH, plans for a Phase 3 trial of dalcinonacog alfa, plans for the completion of the ongoing clinical trial of marzeptacog alpha (activated) and presentation of data at EAHAD and ISTH and for a Phase 3 trial of marzeptacog alfa (activated), and the potential market opportunities for these products. Actual results or events could differ materially from the plans and expectations and projections disclosed in these forward-looking statements.

Various important factors could
to differ materially from the forw
Catalyst makes, including, but n
initiation or enrollment may be d
future trials may not achieve the
clinical trials will not replicate the
studies on small numbers of pat
effects may arise from the testin
products, including the generati
the risk that costs required to de
Catalyst's products will be highe
competition from other hemophi
in development, Catalyst's abilit
intellectual property rights, and
"Risk Factors" section of Catalys
10-Q for the quarter ended Sept
filed with the Securities and Exc
November 1, 2018. Forward loo
presentation speak only as of th
not assume any obligation to up
statements, except as required

Catalyst Biosciences: CBIO

We are working to establish a new standard of care in hemophilia prophylaxis by developing highly potent subcutaneous treatments that improve the quality of life for patients with hemophilia with inhibitors, acquired hemophilia & hemophilia B

catalystbiosciences.com

Investment highlights

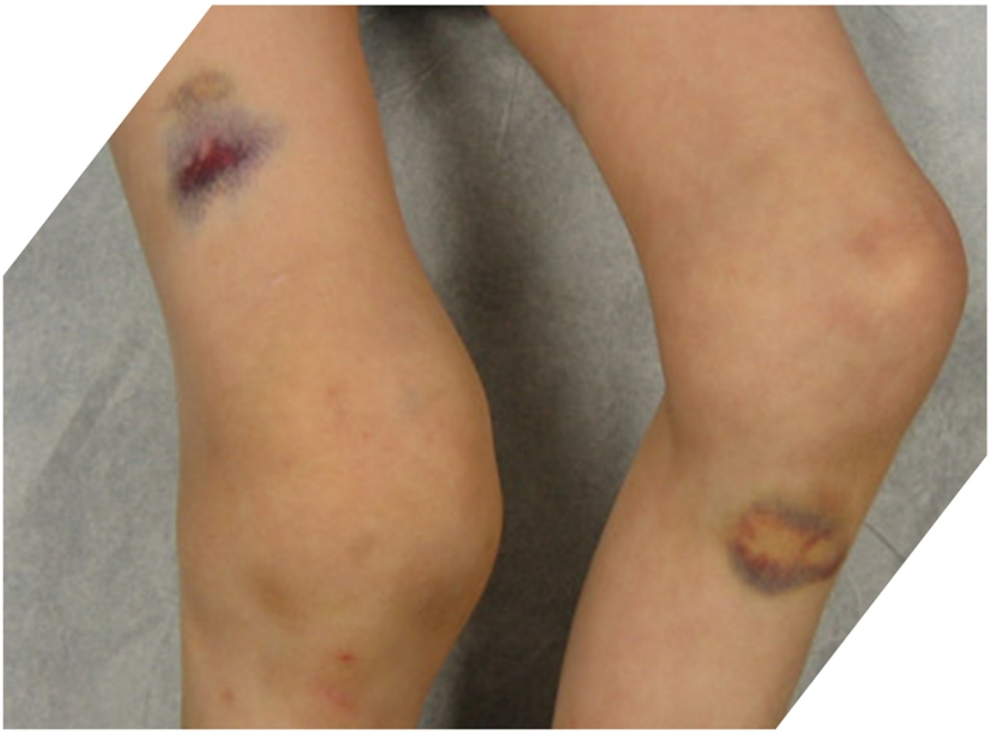
Novel subcutaneous compounds with orphan drug designation

2018

FVIIa & FIX SQ efficacy clinically demonstrated

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

Life with hemophilia



Hemophilia A or B -

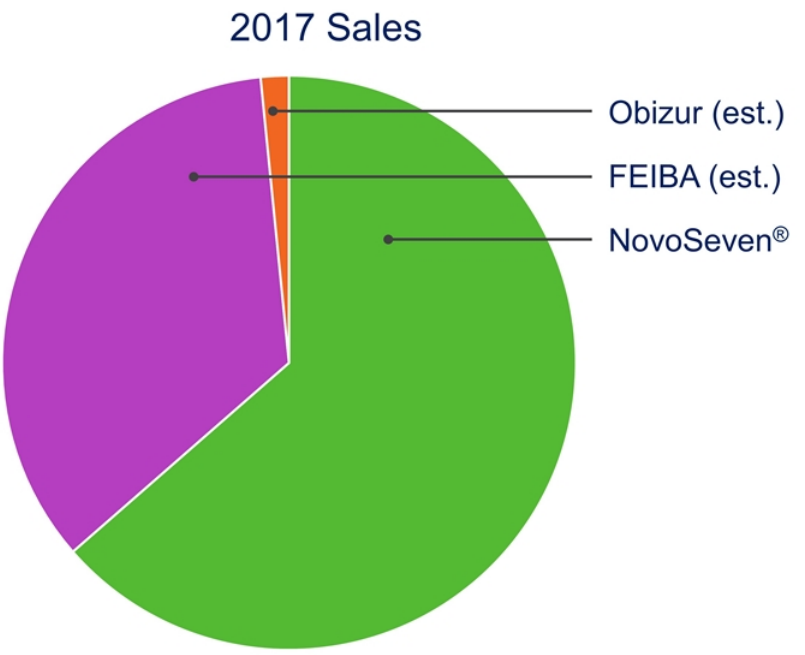
- A complication in fa
  replacement therap
  neutralizes the trea
- 30% of Hem A (FV
  and 5% of Hem B (
  patients develop inh
- Patients are at high
  hemorrhagic stroke
  premature mortality

Acquired Hemophil

- Rare disorder, occu
  caused by anti-FVI
- Currently treated wi
  IV bypass agents (F
- Unmet need to ade

Market

FVIIa & Bypassing Agents: $2.2B market



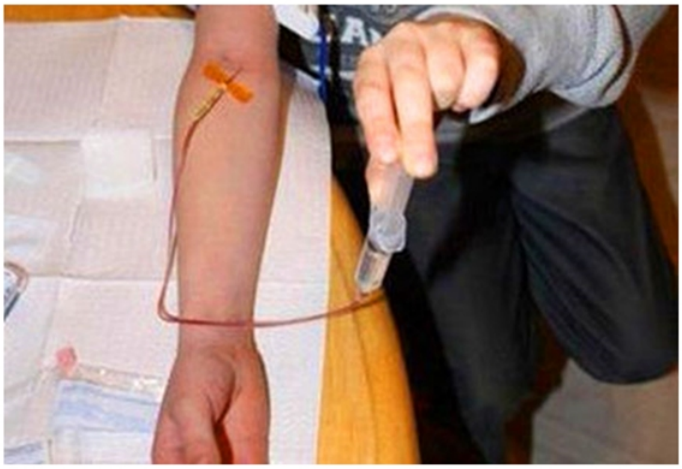
In 2017 over 2,400 US and EU5 patients were treated with FVIIa and bypassing agents for hemophilia with inhibitors, acquired hemophilia and factor VII deficiency

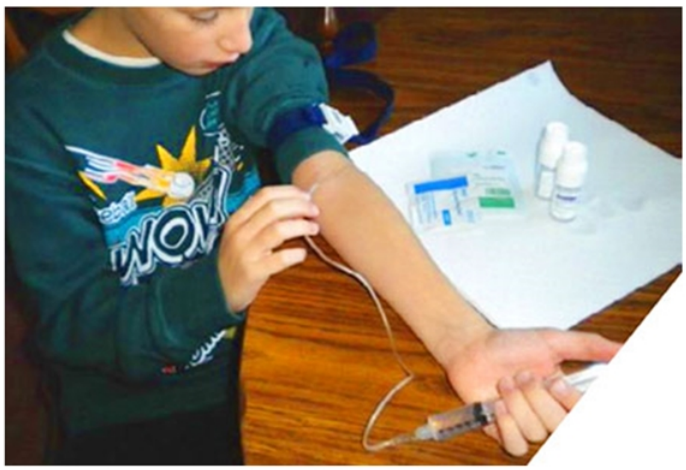
Hemop

In 2017 o patients

Sources: WFH Annual Global Survey, GlobalData, Roche, Novo Nordisk, Aptevo, SOBI, Bioverativ. *Hemlibra® h

Available treatments



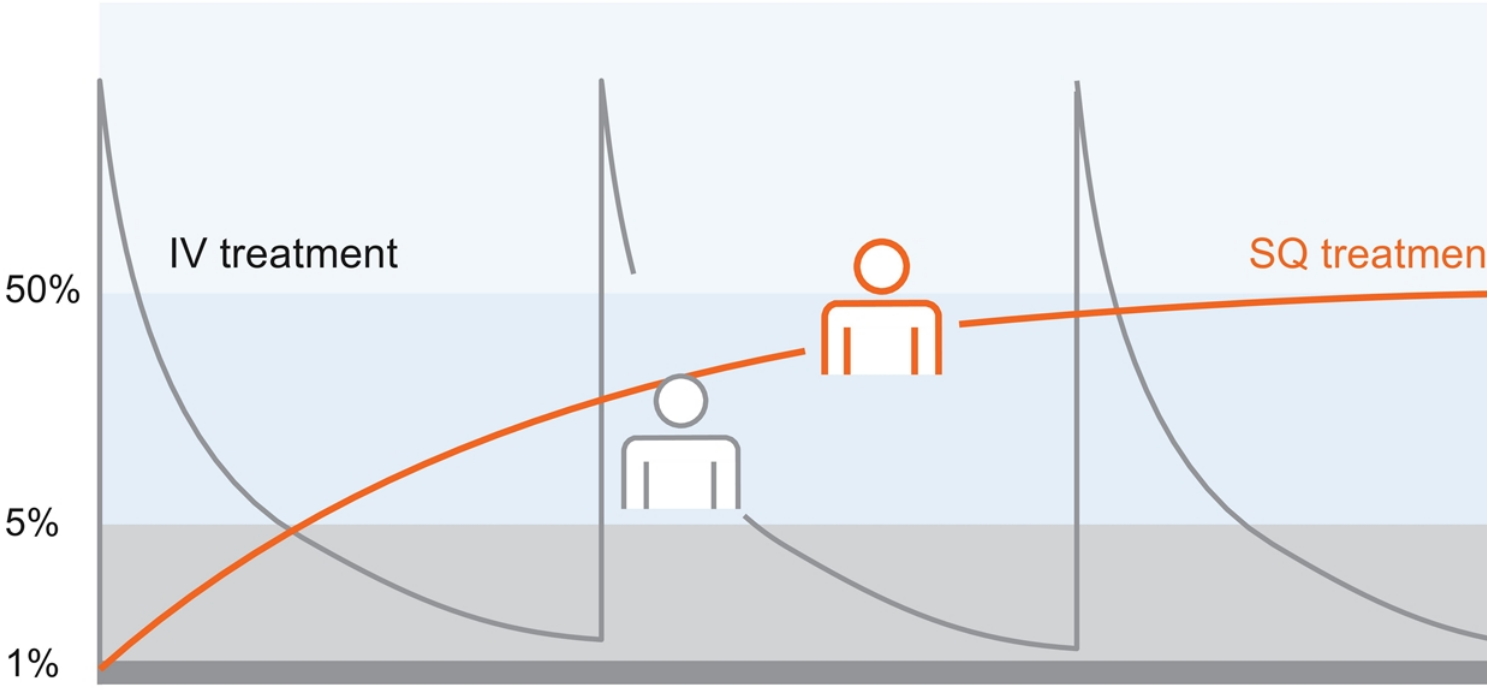


The Catalyst Biosciences solution

catalystbiosciences.com

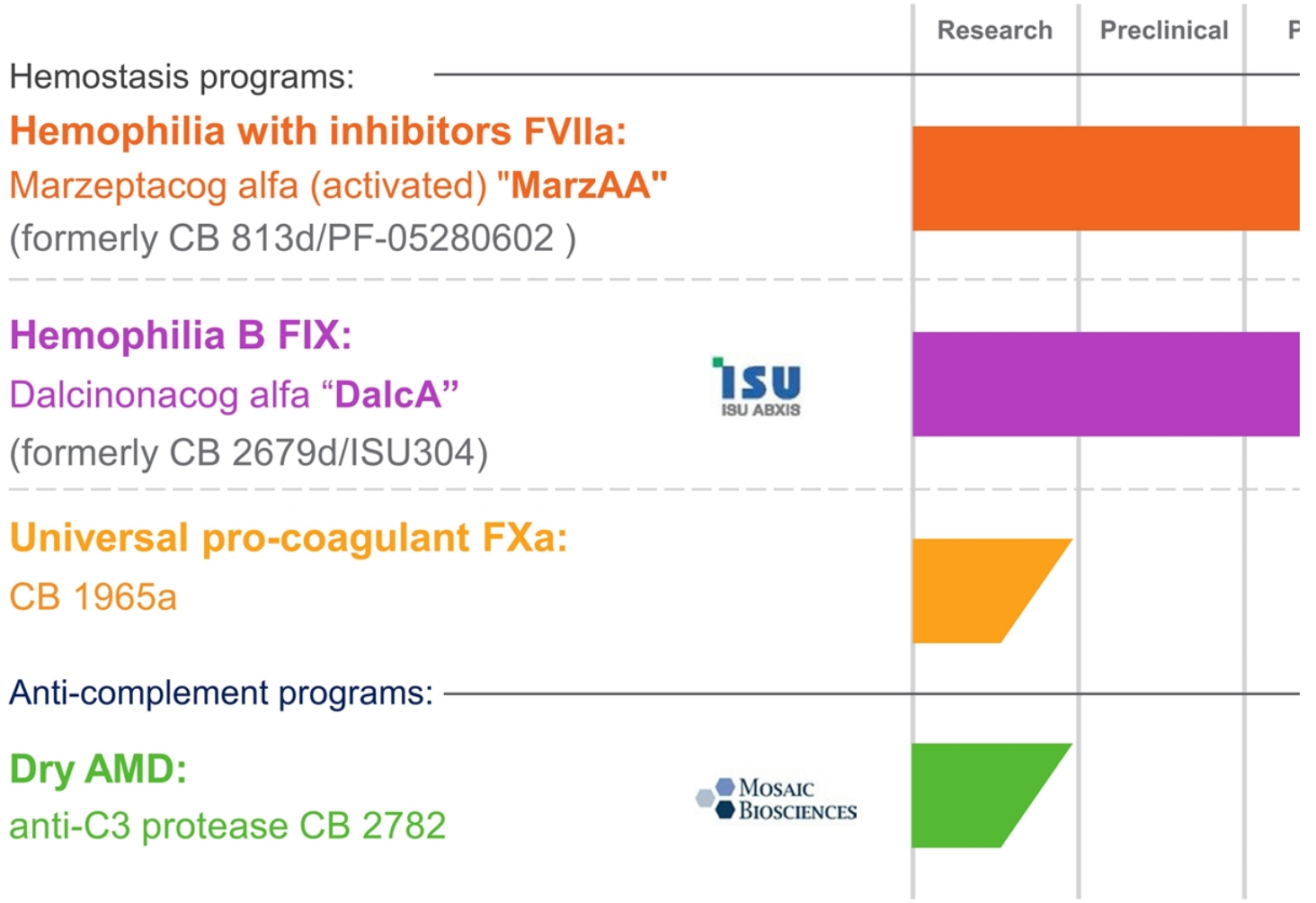
The new standard in hemophilia prophylaxi

Patients in high mild range are protected from spontaneous



- The concept of prophylactic treatment is to keep severe & moderate hemophilia patients in the high mild range
- Our subcutaneous treatment has the ability to build up over time, offering long-term stability in clotting levels

Pipeline


Research
Preclinical
Hemostasis programs:
Hemophilia with inhibitors FVIIa:
Marzeptacog alfa (activated) "MarzAA"
(formerly CB 813d/PF-05280602)
Hemophilia B FIX:
Dalcinonacog alfa "DalcA"
(formerly CB 2679d/ISU304)
ISU ABXIS
Universal pro-coagulant FXa:
CB 1965a
Anti-complement programs:
Dry AMD:
anti-C3 protease CB 2782
Mosaic Biosciences

Team

President & CEO

Nassim Usman, Ph.D.

Massachusetts Institute of Technology · RPI · Sirna Therapeutics

26 years in biotech

SVP, Technical Operat

Andrew Hetherington, M.I

gsk · Bayer · NOV

Chief Medical Officer

Howard Levy, M.B.B.Ch., Ph.D., M.M.M.

Sangart · novo nordisk · CSL · Lilly · Inspiration Biopharmaceuticals

18 years in hematology

VP, Translational Rese

Grant Blouse, Ph.D.

novo nordisk · Catalyst Biosciences · Aarhus University

Chief Financial Officer

Fletcher Payne

RNAT · Cell Genesys · DYNAVAX Innovating Immunology · IBM · CytomX Therapeutics · Plexxikon · Abgenix

26 years in biotech

VP, Business Develop

Jeffrey Landau, M.B.A.

Jazz Pharmaceuticals · Lilly · Thresh Pharmaceutical

CATALYST BIOSCIENCES

December 18th 2018

Dalcinonacog alfa

Dalcinonacog alfa

Dalcinonacog alfa, a novel clinical stage SQ FIX product candi
differentiated from IV market leaders:

- + Simpler, less painful, small dose
- + SQ enhances pharmacokinetics
- + Potential to maintain continuous protective levels
- + Disruptive to all current intravenous products
- + Especially well suited for children

Three point mutations in two loops within the FIX protein:

- + Catalytic activity increased
- + Affinity for activated factor VIII increased
- + Resistance to inhibition by antithrombin improved

Best-in-class high-potency recombinant FIX product

- + 22-fold more potent than BeneFIX in man

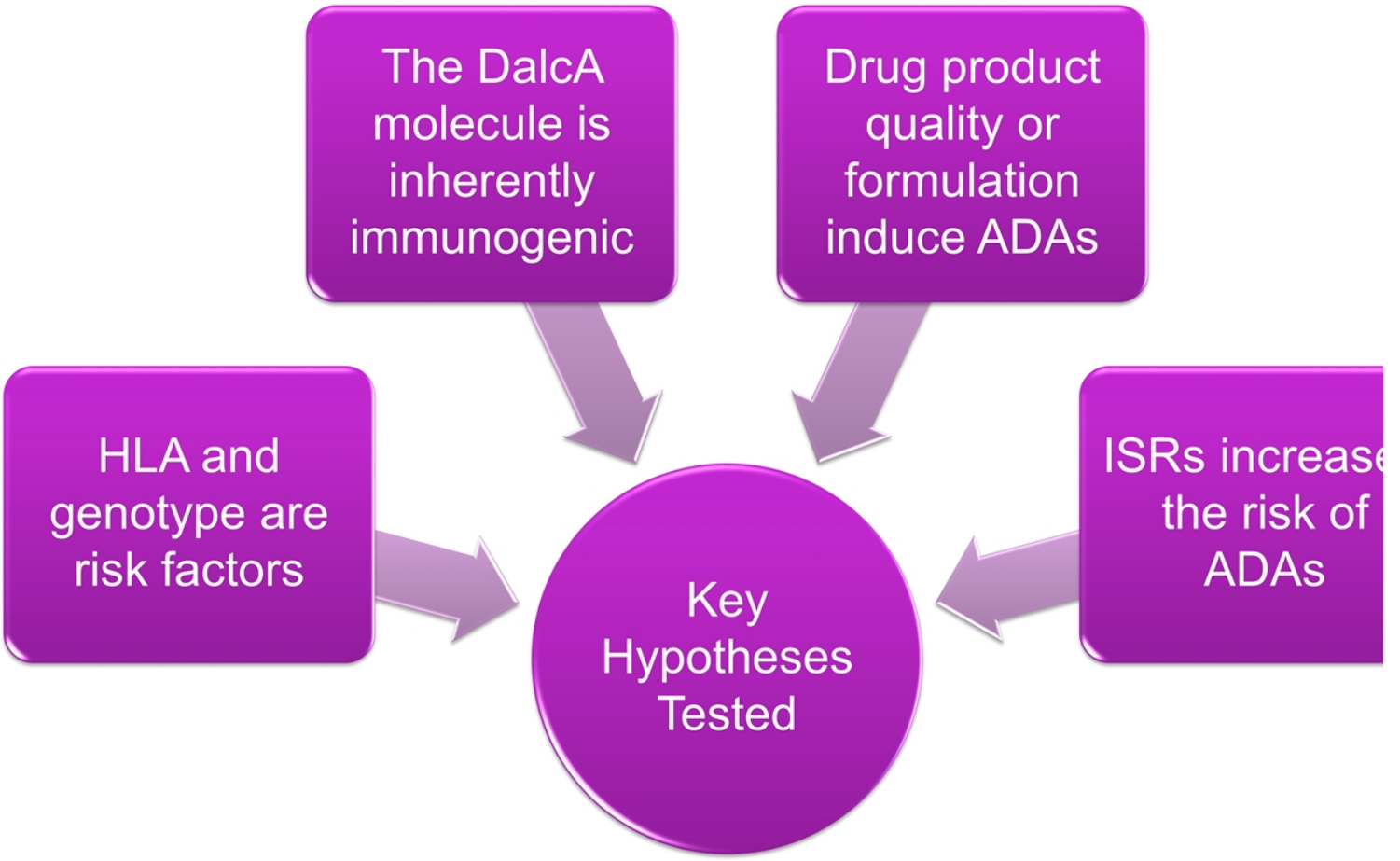
Orphan Drug Designation in US & EU

R31
Resistan
antithro

In
&

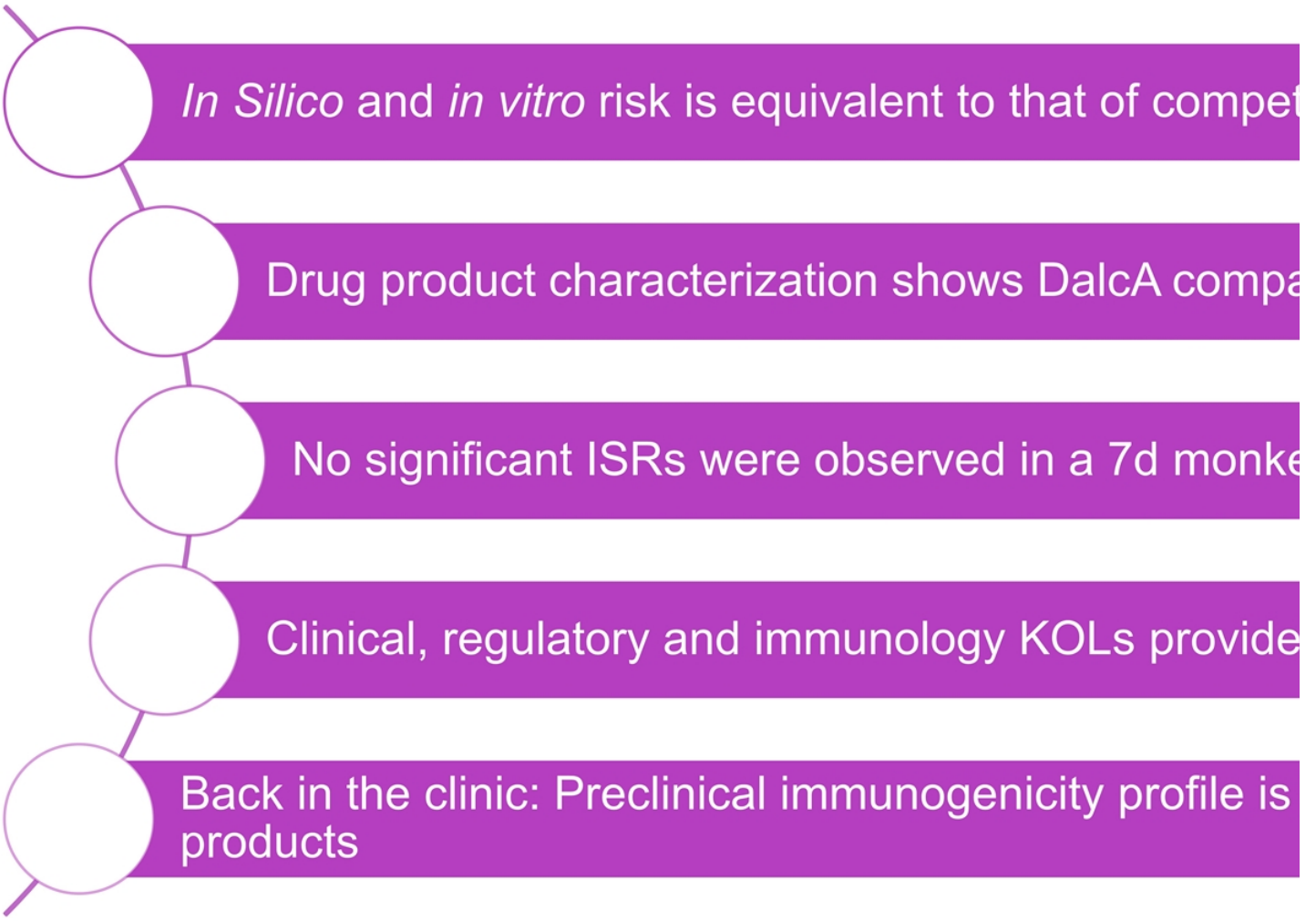
Retrospective immunogenicity assessment

A comprehensive assessment of immunogenicity addresse



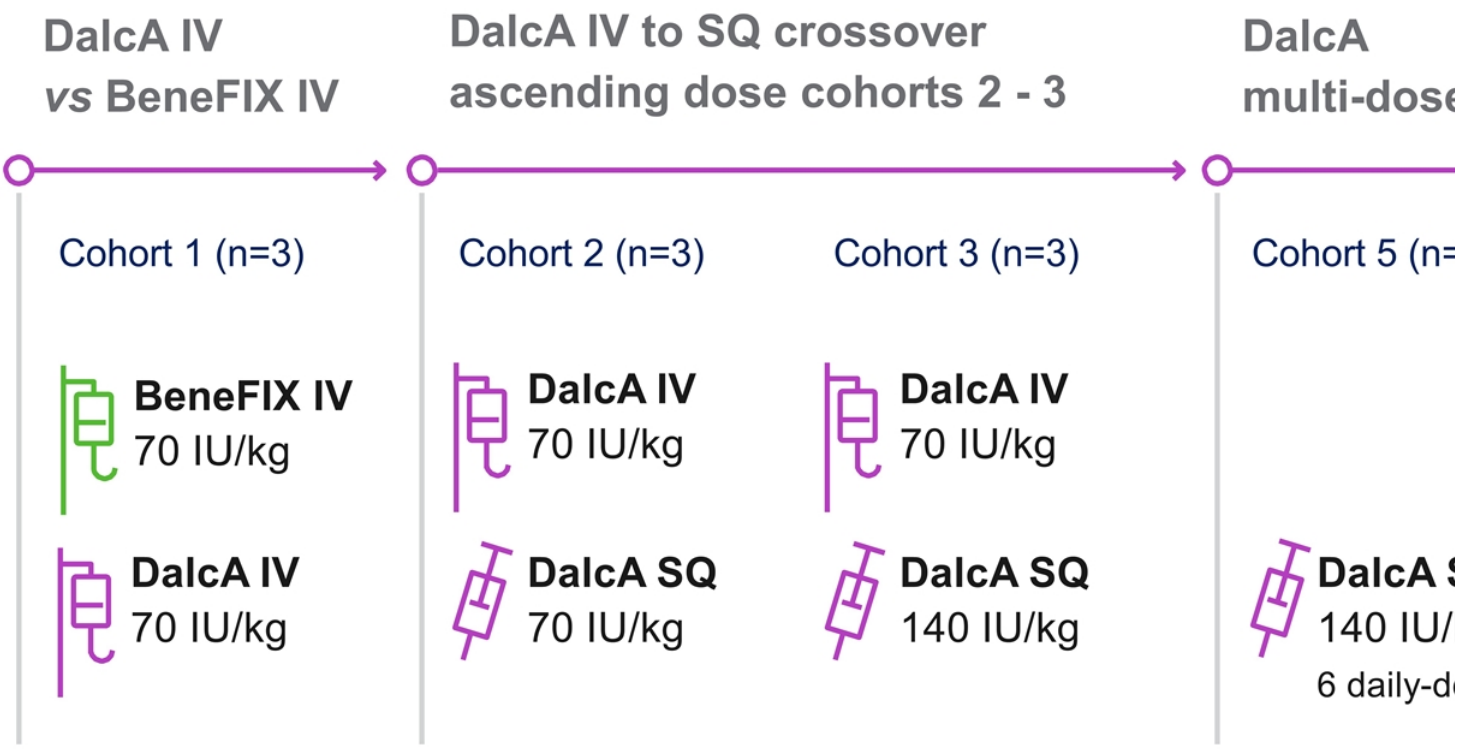
DalcA has low immunogenicity & should pr

Moving forward with dalcinonacog alfa after preclinical imm



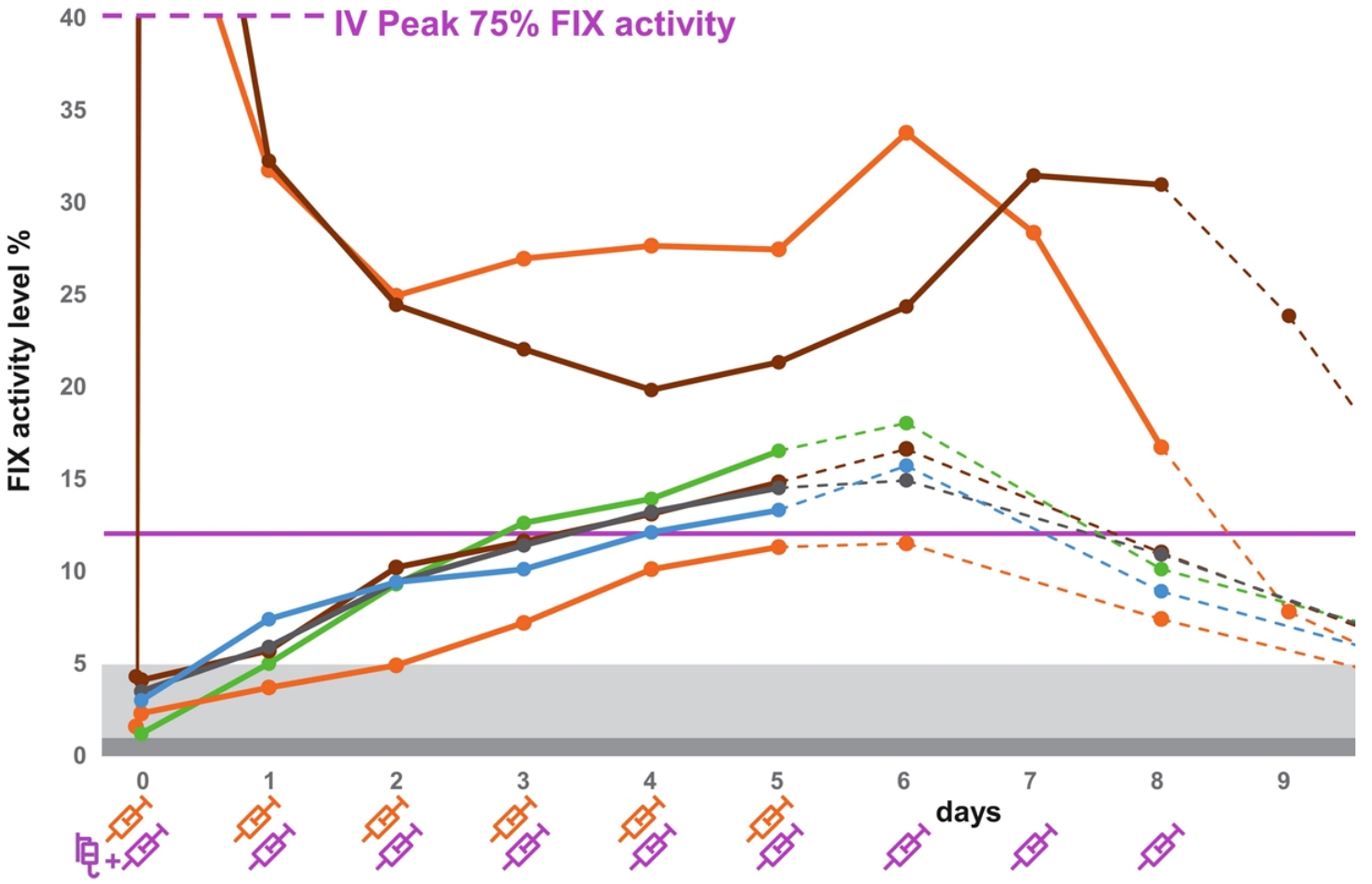
Dalcinonacog Phase 1/2 open label design

Subcutaneous treatment of hemophilia B



Phase 1/2: Cohort 5 & 6 FIX activity results

6/7 patients had trough levels >12%, sufficient to protect ag



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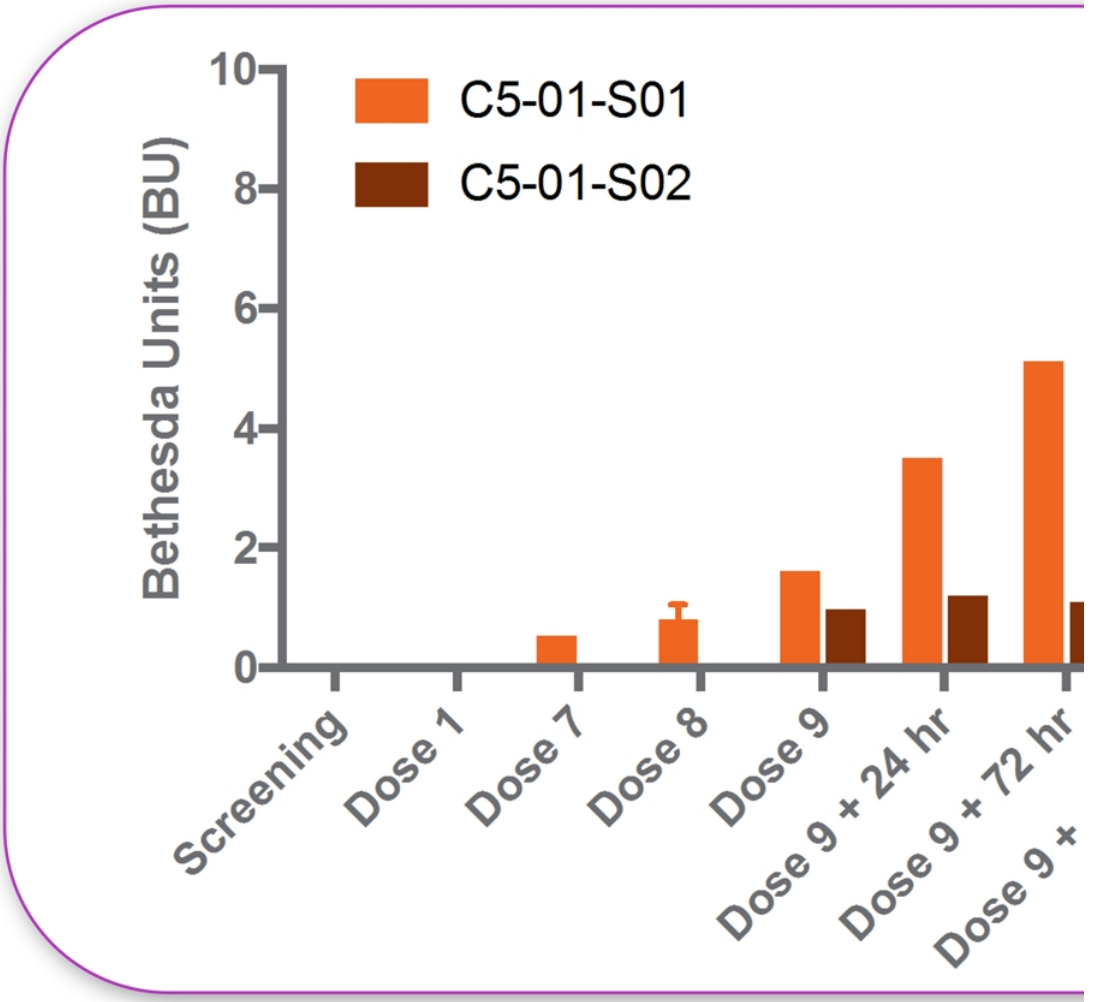
Phase 1/2: Cohort 6 FIX nAb development t

Time course of neutralizing antibody development after pri



The DalcA drug product is not inherently in

Investigation Hypothesis

In Silico & *In vitro* Immunogenicity (Molecule is inherently immunogenic)	Same pr
HLA Typing / Immunogenicity (Certain HLA types increase risk of ADAs)	Restrict gen
DP Quality Characterization (Drug quality induces ADAs)	Same
DP Formulation Characterization (Formulation induces ADAs)	No consisten
SQ Dosing (Route of Administration induces ADAs)	No issues dosing & Id

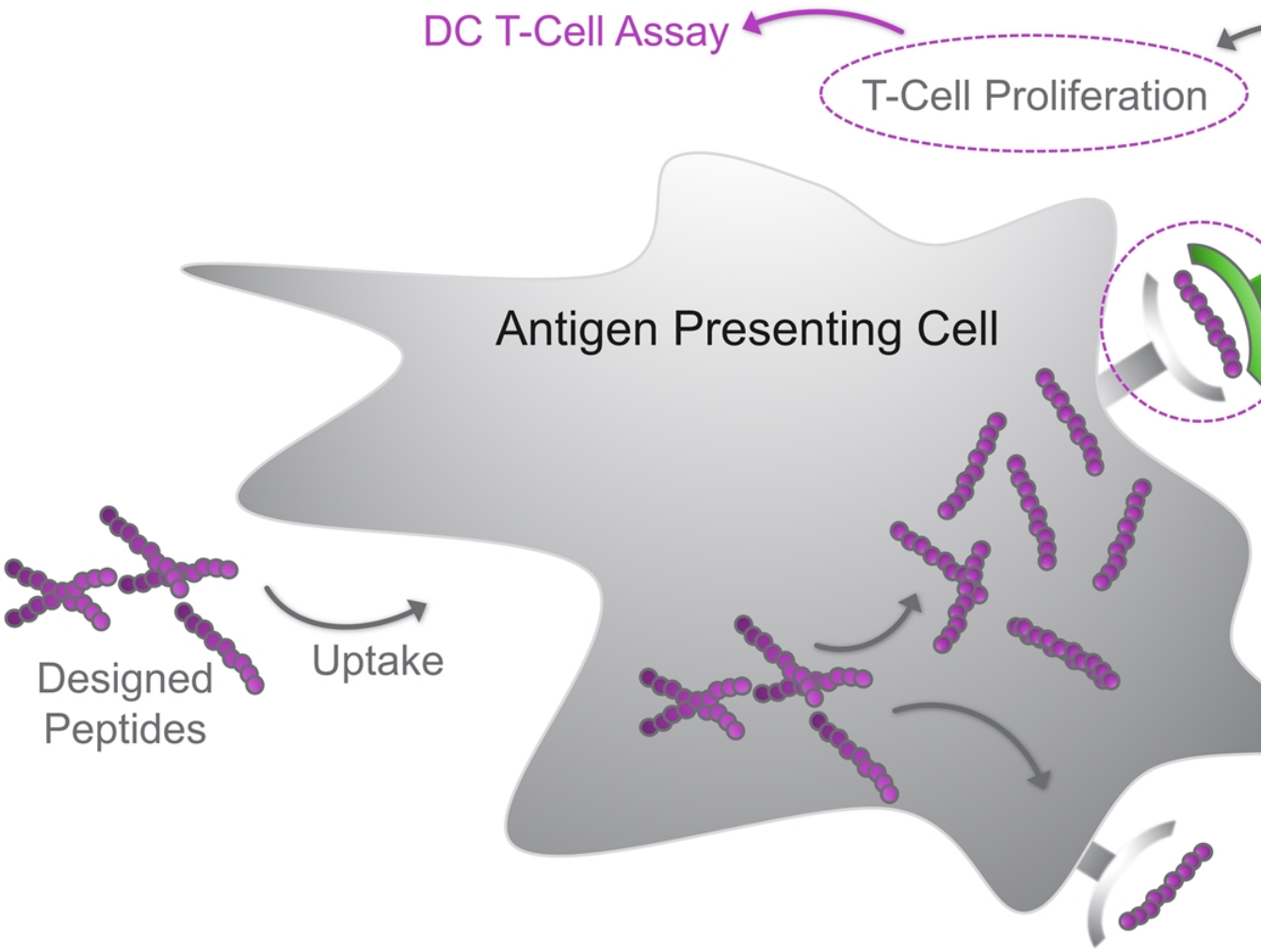
HLA and genotyping

HLA and genotyping of 7/11 Korean subjects in the P1/2 tri

Subject ID	DRB1		DPB1		DQA1		DQ
C5-01-S01	03:01	04:01	02:01	02:01	03:01	05:01	02:01
C5-01-S02	01:01	13:01	02:01	04:01	01:01	01:01	05:01
C4-01-S02	01:01	08:01	02:01	05:01	01:01	01:01	05:01
C4-01-S07	08:01	12:01	02:01	05:01	03:01	05:01	03:01
C2-03-S01	04:01	13:01	04:01	05:01	01:01	03:01	03:01
C3-02-S03	11:01	15:01	05:01	05:01	01:01	05:01	03:01
C3-02-S04	09:01	09:01	02:01	05:01	03:01	03:01	03:01

+ The two subjects in cohort 6 that developed the nAbs are cousins and h
  - Genotype is an Arg to Gln mutation at amino acid -4 (defective prope
+ Only common HLA type is DPB1 02:01

Preclinical toolkit for evaluation of immuno

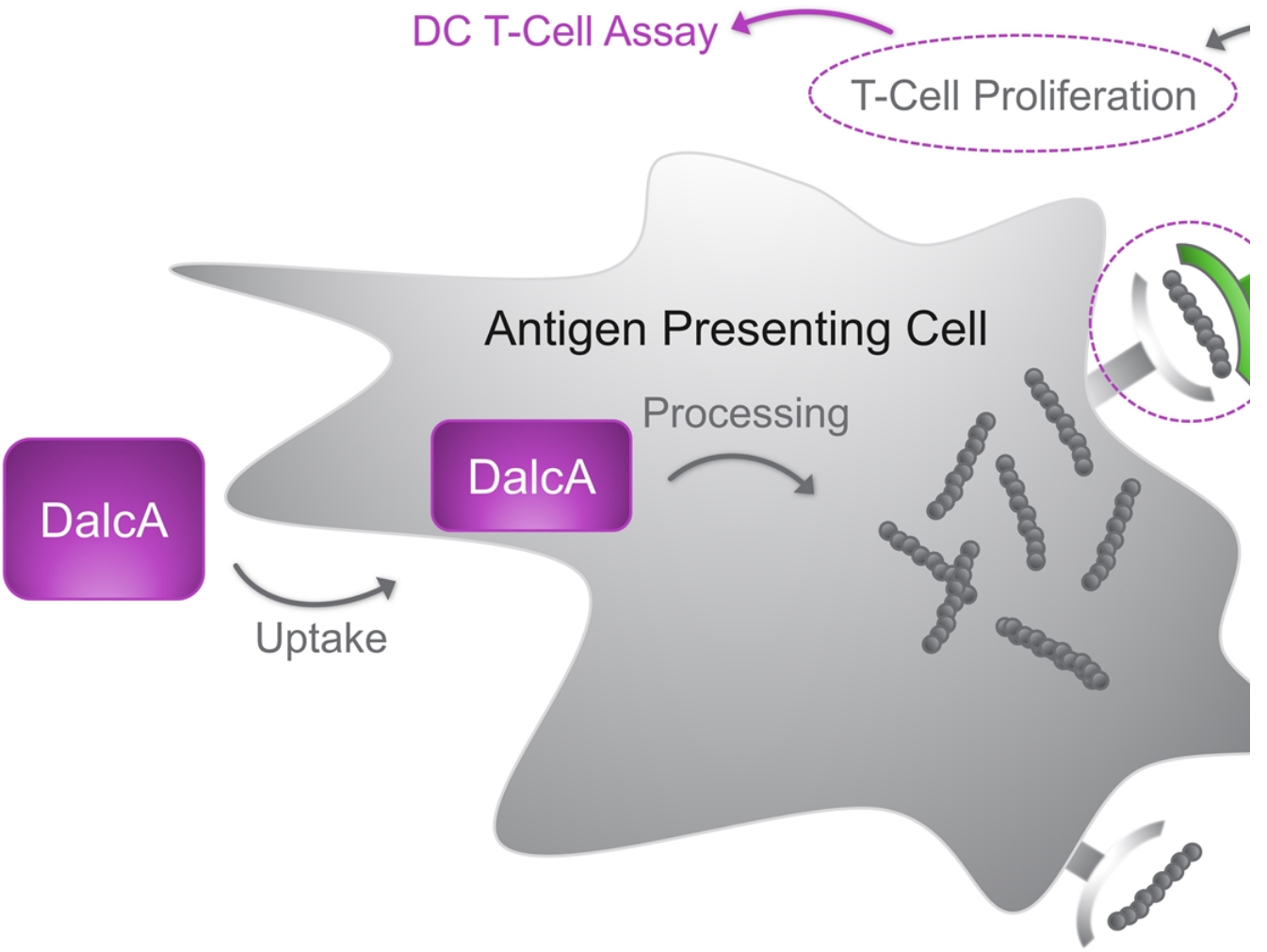


EpiVax

PROIMMUNE
www.proimmune.com

catalystbiosciences.com

Preclinical toolkit for evaluation of immuno



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PROIMMUNE
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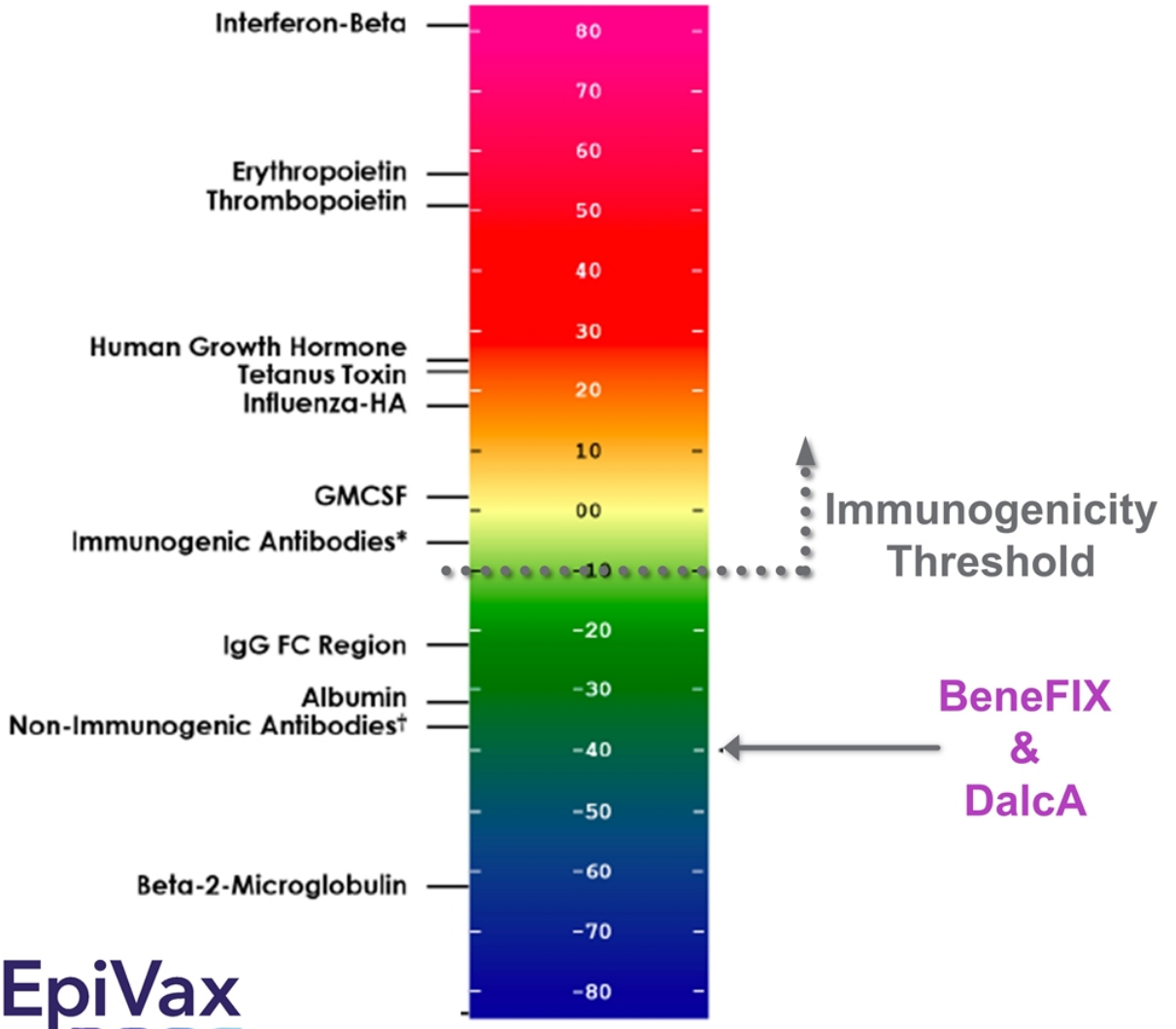
The *in silico* immunogenicity assessment s



EpiVax

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In Silico

+ Overall
  par wit
+ Factor
  putative
  be exp
  sequer
  (BeneF
+ These
  scale, i
  immun

DalcA shows a similar *in silico* risk as Bene

In Silico immunogenicity assessment at the R318Y site

	Frame Start	AA Sequence	Frame Stop	Hydro-phobicity	DRB1*0101 Z-Score	DRB1*0301 Z-Score	DRB1*0401 Z-Score	DRB1*0701 Z-Score	DR Z
BeneFIX	310	WGRVFHKGR	318	-1.2	0.99	0.51	0.61	1.26	
	311	GRVFHKGRS	319	-1.19	-0.35	0.22	-0.25	-1.09	
	312	RVFHKGRSA	320	-0.94	0.55	0.03	0.50	0.85	
	313	VFHKGRSAL	321	-0.02	0.74	1.71	-0.63	1.41	
	314	FHKGRSALV	322	-0.02	2.73	2.29	2.67	2.59	
	315	HKGRSALVL	323	0.09	1.24	-0.06	0.30	1.33	
	316	KGRSALVLQ	324	0.06	-0.20	0.84	0.26	0.21	
	317	GRSALVLQY	325	0.34	0.37	1.27	0.87	0.23	
	318	RSALVLQYL	326	0.81	0.04	0.72	-0.64	0.17	
DalcA	310	WGRVFHKGY	318	-0.84	0.93	0.59	0.53	1.02	
	311	GRVFHKGYS	319	-0.83	-0.54	0.03	-0.43	-1.28	
	312	RVFHKGYSA	320	-0.59	0.37	-0.11	0.71	0.88	
	313	VFHKGYSAL	321	0.33	0.76	0.59	-0.63	1.42	
	314	FHKGYSALV	322	0.33	2.58	2.13	2.52	2.44	
	315	HKGYSALVL	323	0.44	0.61	-0.06	0.47	1.36	
	316	KGYSALVLQ	324	0.41	-0.49	0.55	-0.02	-0.07	
	317	GYSALVLQY	325	0.7	0.01	0.90	0.52	-0.13	
	318	YSALVLQYL	326	1.17	1.45	1.30	0.73	1.56	

EpiVax

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DalcA shows a similar risk as BeneFIX at R

In Silico immunogenicity assessment at the R338E site

	Frame Start	AA Sequence	Frame Stop	Hydro-phobicity	DRB1*0101 Z-Score	DRB1*0301 Z-Score	DRB1*0401 Z-Score	DRB1*0701 Z-Score	DR Z
BeneFIX	330	LVDRATCLR	338	0.32	0.41	-0.46	-0.64	0.26	
	331	VDRATCLRS	339	-0.19	0.47	1.26	1.99	0.42	
	332	DRATCLRST	340	-0.73	-0.11	-0.93	-0.47	0.32	
	333	RATCLRSTK	341	-0.78	-1.52	-0.63	-1.28	-1.76	
	334	ATCLRSTKF	342	0.03	0.71	0.43	0.91	1.02	
	335	TCLRSTKFT	343	-0.24	0.46	-2.06	-0.18	0.54	
	336	CLRSTKFTI	344	0.33	0.67	1.45	-1.15	0.53	
	337	LRSTKFTIY	345	-0.09	0.58	1.21	0.37	0.78	
	338	RSTKFTIYN	346	-0.9	-0.90	-0.66	-0.70	-0.56	
DalcA	330	LVDRATCLE	338	0.43	-0.21	-0.86	-0.99	0.03	
	331	VDRATCLES	339	-0.08	0.23	1.02	1.76	0.18	
	332	DRATCLEST	340	-0.62	-0.43	-1.01	-0.51	0.17	
	333	RATCLESTK	341	-0.67	-2.31	-1.39	-1.28	-1.89	
	334	ATCLESTKF	342	0.14	0.43	0.15	0.64	0.74	
	335	TCLESTKFT	343	-0.13	0.78	-1.21	0.84	0.65	
	336	CLESTKFTI	344	0.44	0.21	0.99	-1.59	0.08	
	337	LESTKFTIY	345	0.02	0.07	0.69	-0.13	0.27	
	338	ESTKFTIYN	346	-0.79	-0.82	-1.30	-0.62	-0.48	

EpiVax

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DalcA shows a similar risk as BeneFIX at T

In Silico immunogenicity assessment at the T343R site

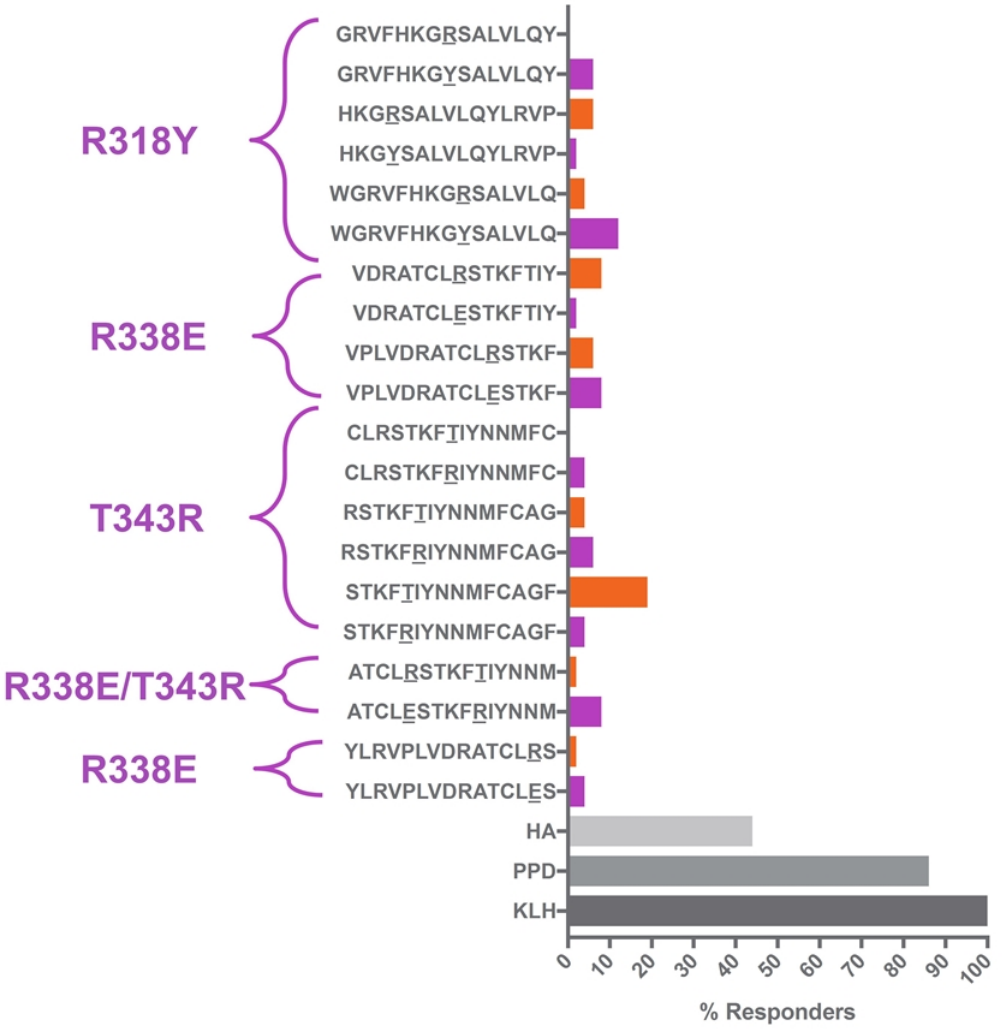
	Frame Start	AA Sequence	Frame Stop	Hydro-phobicity	DRB1*0101 Z-Score	DRB1*0301 Z-Score	DRB1*0401 Z-Score	DRB1*0701 Z-Score	DR Z-
BeneFIX	335	TCLRSTKFT	343	-0.24	0.46	-2.06	-0.18	0.54	
	336	CLRSTKFTI	344	0.33	0.67	1.45	-1.15	0.53	
	337	LRSTKFTIY	345	-0.09	0.58	1.21	0.37	0.78	
	338	RSTKFTIYN	346	-0.9	-0.90	-0.66	-0.70	-0.56	
	339	STKFTIYNN	347	-0.79	-0.98	-1.59	-0.09	-0.20	
	340	TKFTIYNNM	348	-0.49	0.53	-0.35	-0.47	1.00	
	341	KFTIYNNMF	349	-0.1	0.50	0.57	1.19	1.15	
	342	FTIYNNMFC	350	0.61	1.21	0.24	1.37	1.14	
	343	TIYNNMFCA	351	0.5	-0.19	-0.66	-0.87	-0.72	
DalcA	335	TCLRSTKFR	343	-0.67	0.10	-0.91	-0.47	-0.12	
	336	CLRSTKFRI	344	-0.09	0.80	1.58	-1.02	0.66	
	337	LRSTKFRIY	345	-0.51	0.72	1.28	0.34	0.98	
	338	RSTKFRIYN	346	-1.32	-1.16	-0.40	-2.08	-0.83	
	339	STKFRIYNN	347	-1.21	-0.76	-1.38	0.12	0.01	
	340	TKFRIYNNM	348	-0.91	0.52	-0.48	-1.03	0.52	
	341	KFRIYNNMF	349	-0.52	0.98	1.05	1.66	1.62	
	342	FRIYNNMFC	350	0.19	1.46	0.51	1.62	1.39	
	343	RIYNNMFCA	351	0.08	-0.30	-0.02	-0.97	-0.82	

EpiVax

catalystbiosciences.com

Peptides from DalcA show low immunogen

% Responding Donors

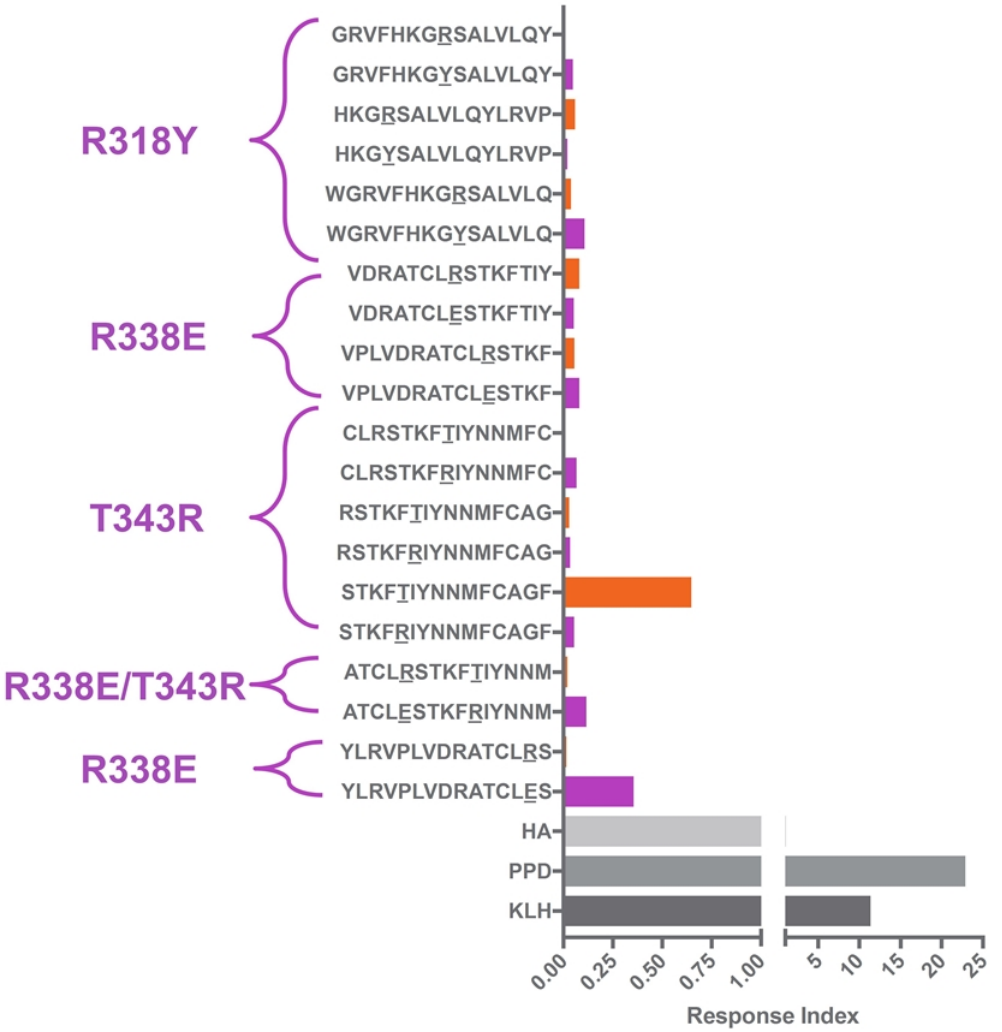


DC-T cell s

+ Overall in
individual
BeneFIX
+ Peptides
substituti
+ Peptides
partial or

Peptides from DalcA show low immunogen

Response Index



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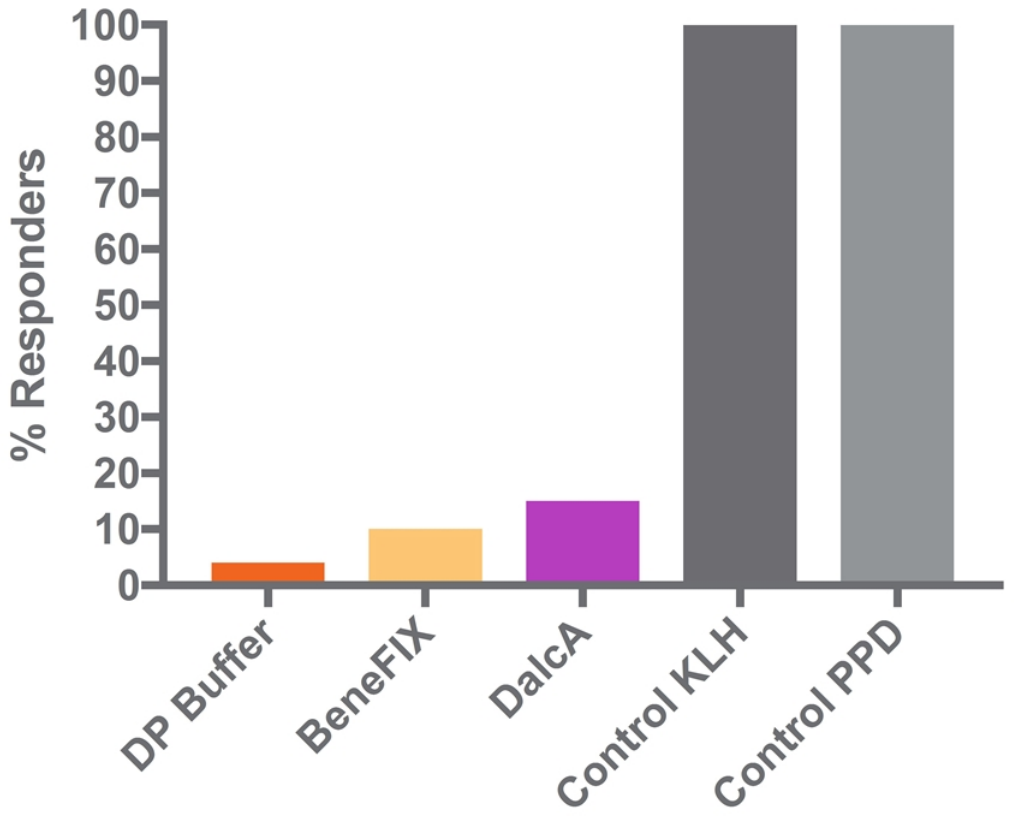
The DalcA drug product shows low immun

Responding Donors



DC-T cell s

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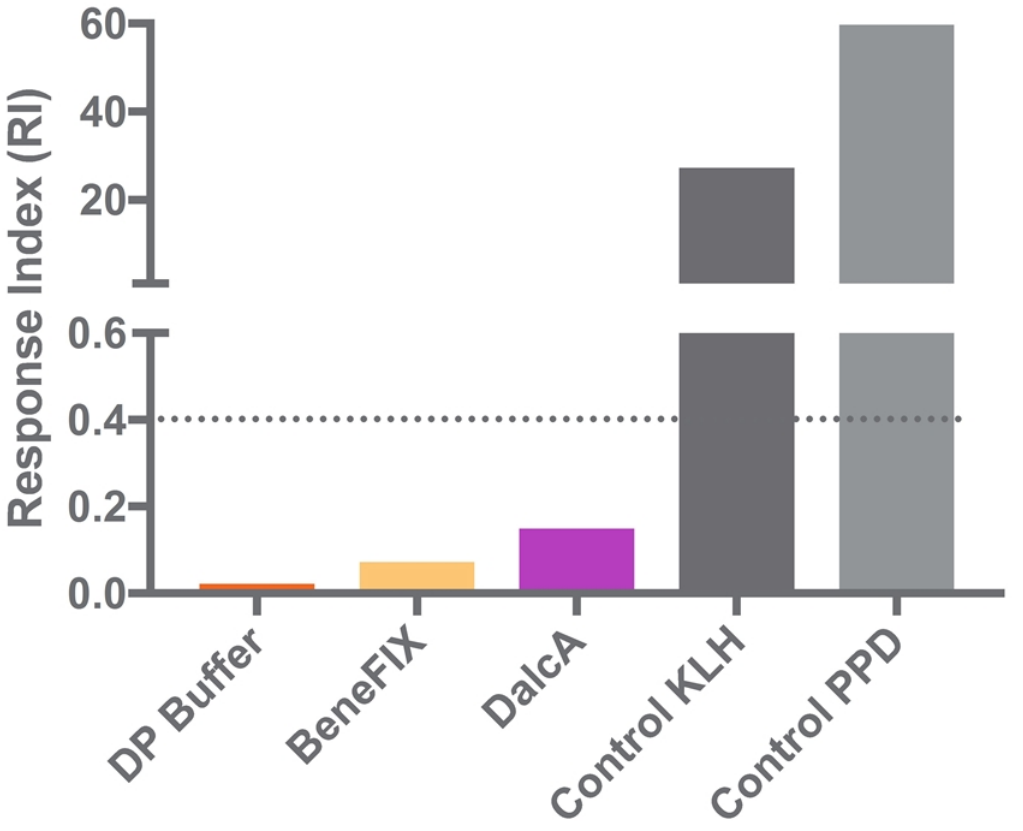
The DalcA drug product shows low immun

Response Index



DC-T cell s

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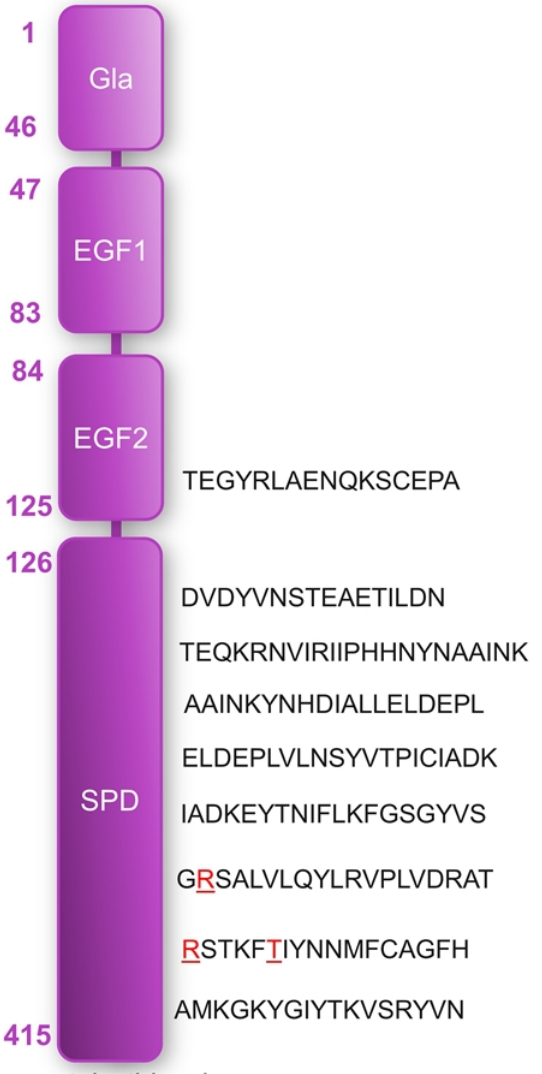
Presented peptides are comparable for Dal

BeneFIX HLA-DR



catalystbiosciences.com

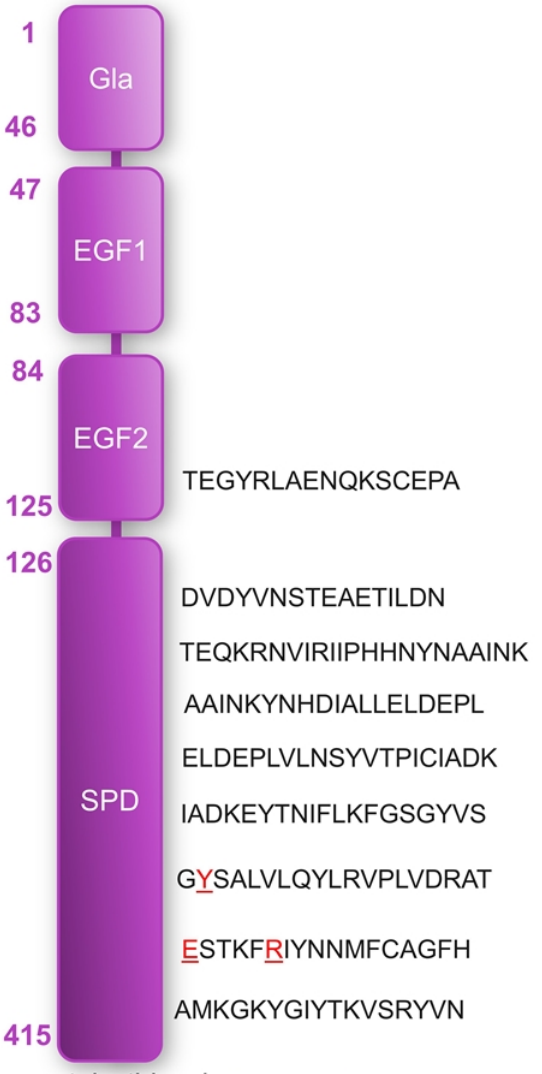
Donors

D1581	D1714	D1837	D1842	D1858	D1863	D1867

No peptides identified from

Presented peptides are comparable for Dal

DalcA HLA-DR



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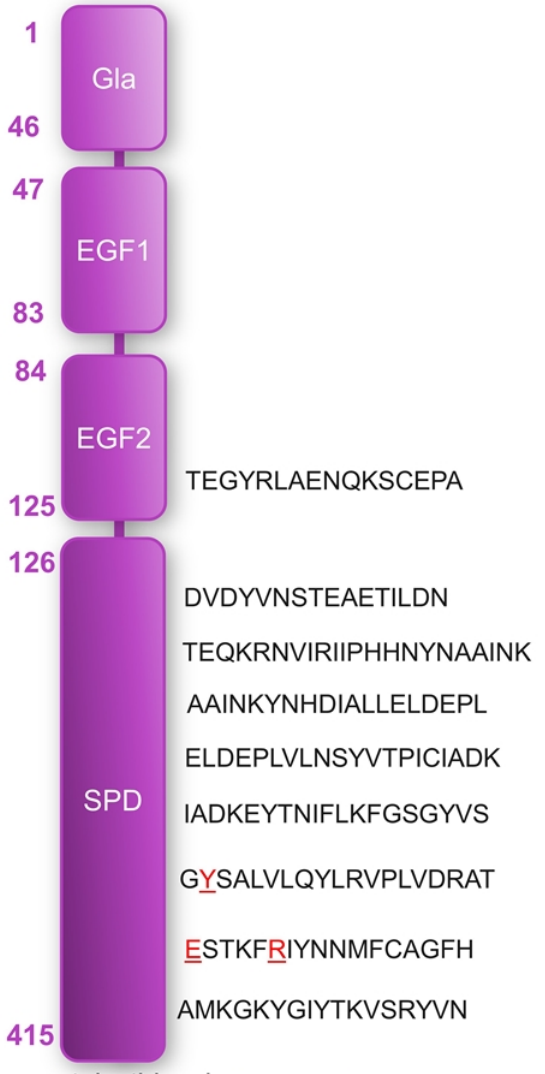
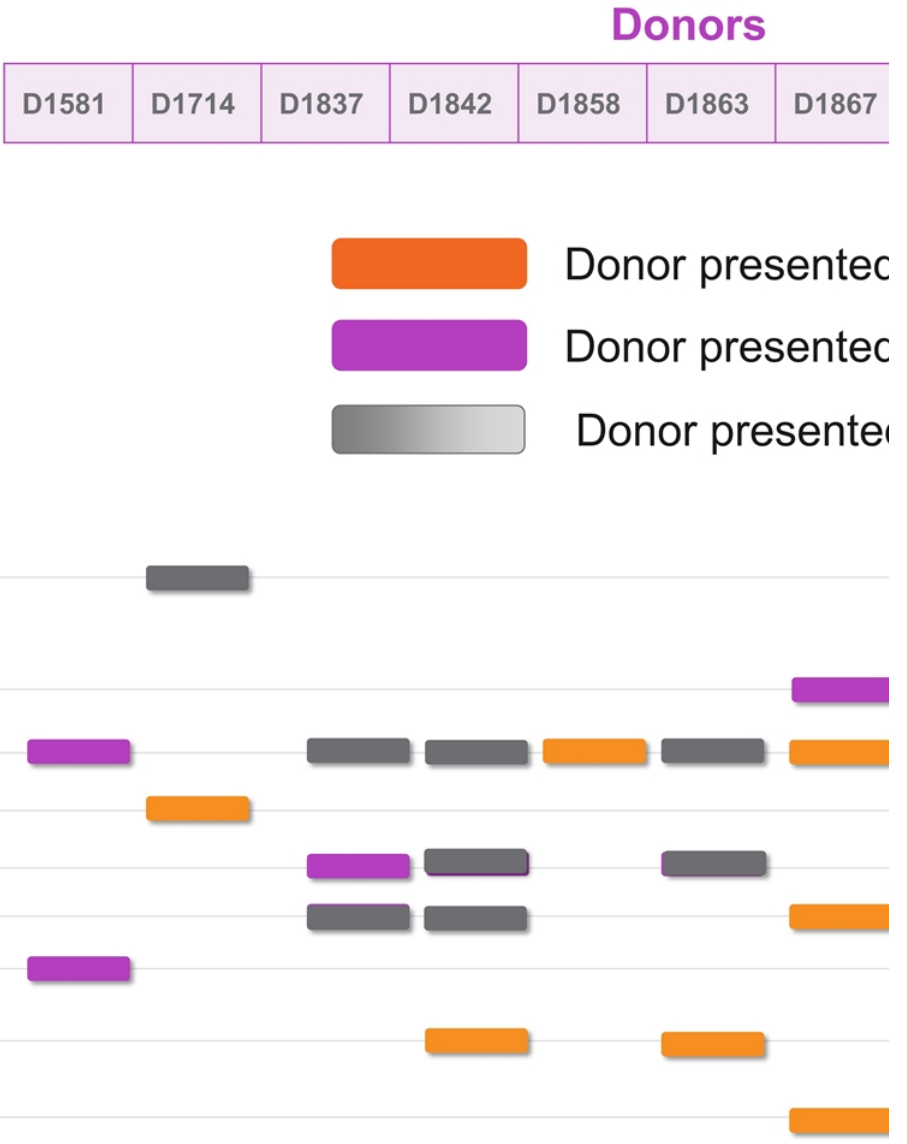
Presented peptides are comparable for Dal

Overlap HLA-DR





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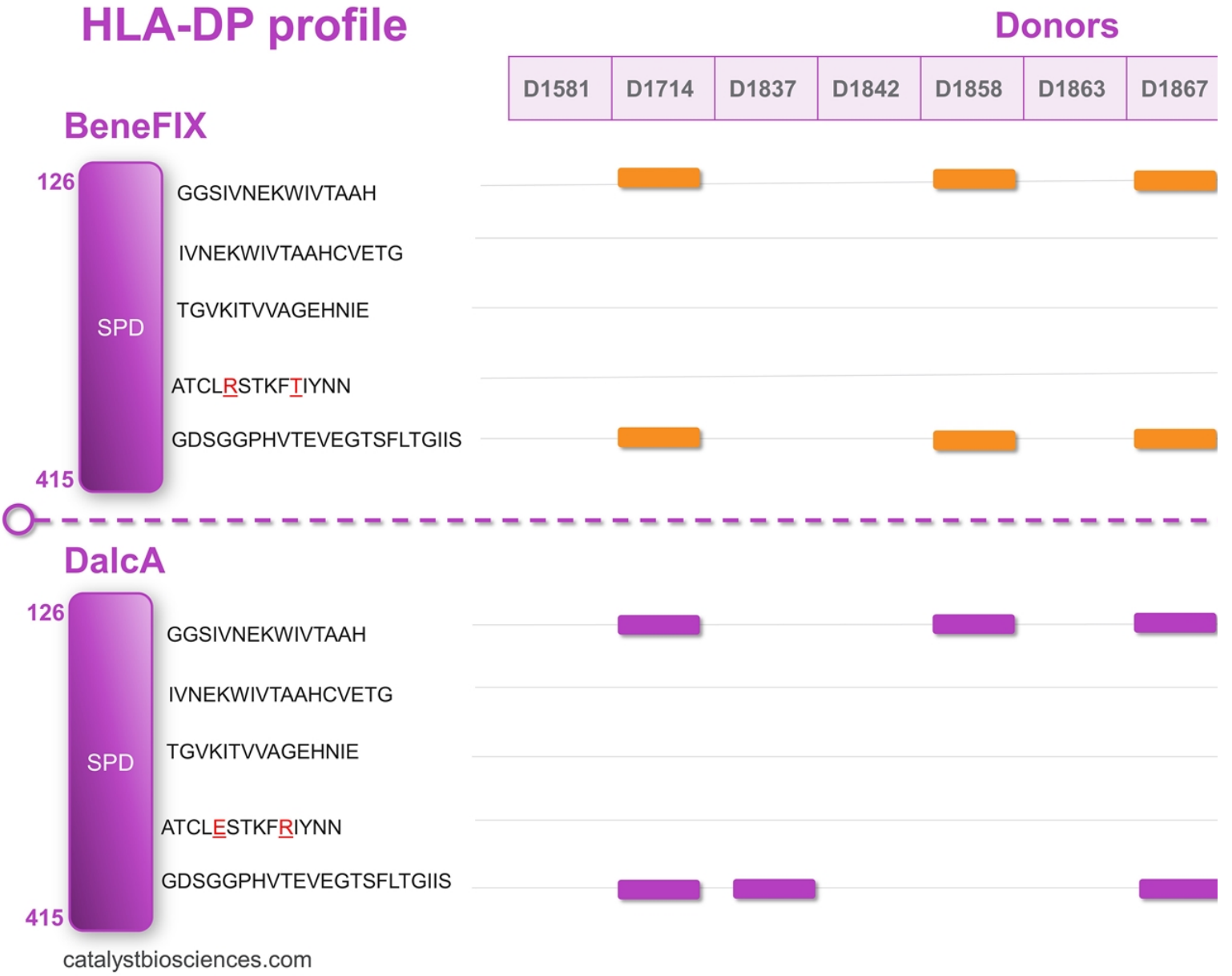
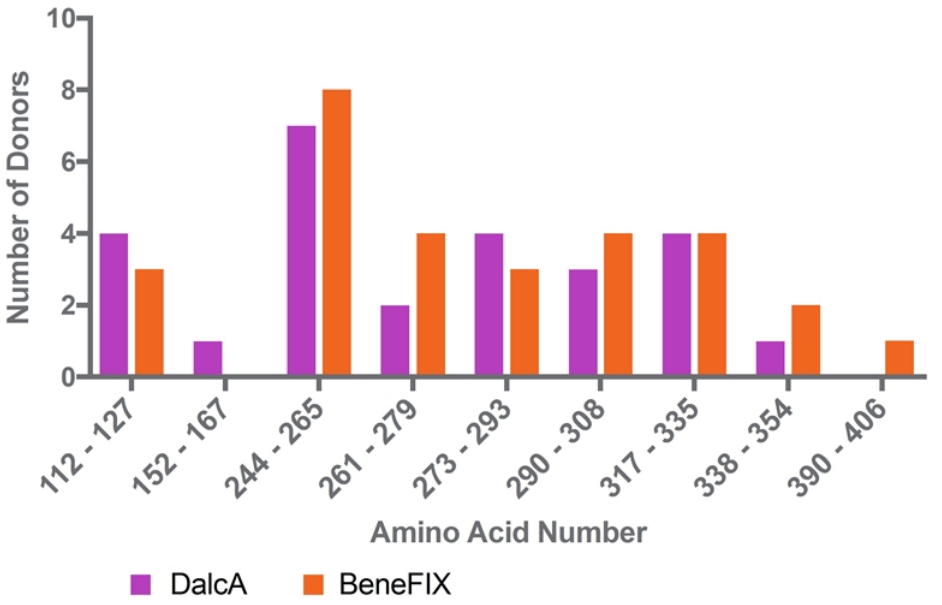
Presented peptides are comparable for Dal



Comparable peptide presentation by HLA-D

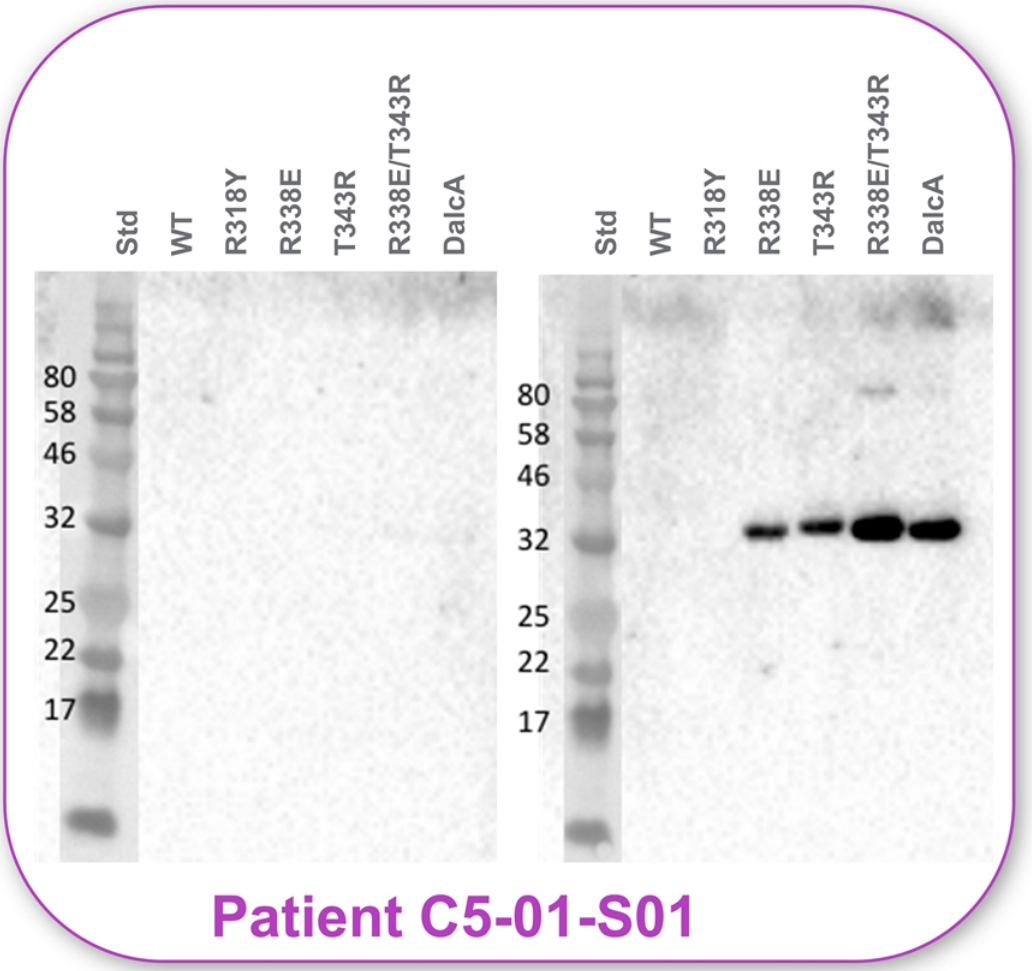
Peptide presentation by HLA-DR



Pepti

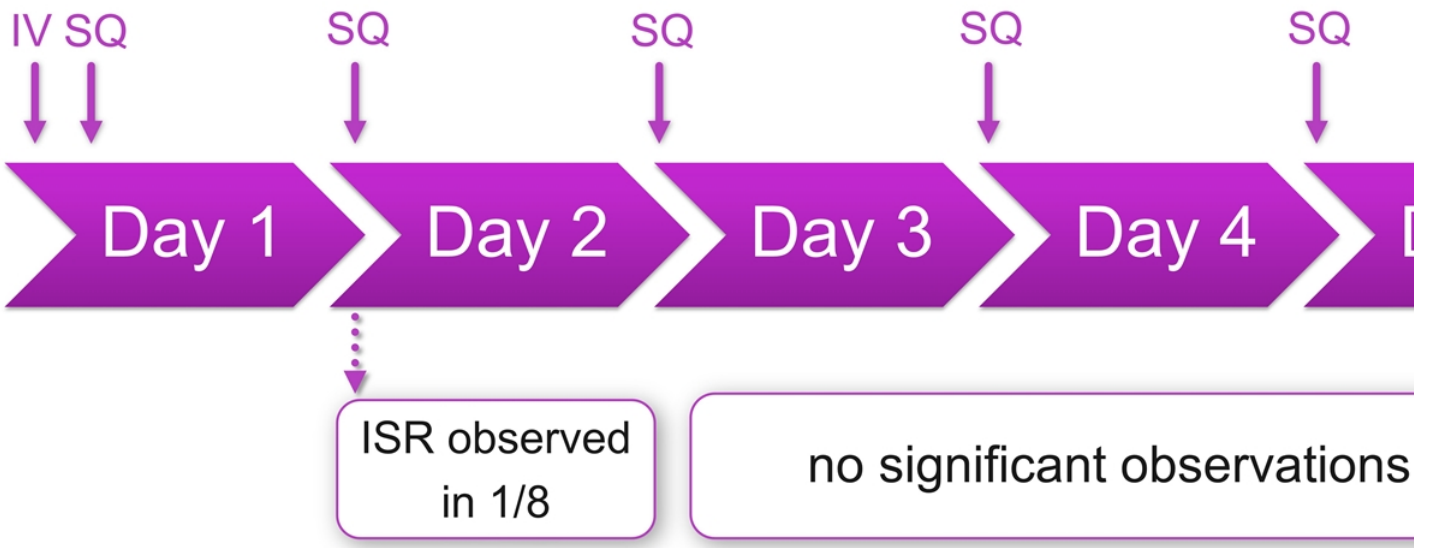
Epitope mapping identified nAb binding to

Overview of native western blot analysis



+ Neutralizing antibody epitopes are centered on R338E and T343R

Consistent ISRs were not observed in the 7

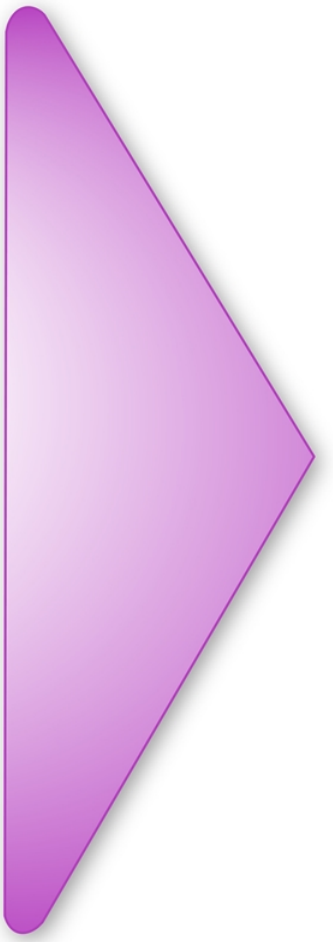


+ Lack of consistent response across sites within an animal and betw
  monkey model does not show ISRs as recorded in ISU 304 P1/2 tri
+ No ISRs were observed in a previous minipig SQ multidose study
+ One observed mild ISR in >325 doses of MarzAA in man and no IS

DalcA is comparable to BeneFIX & RIXUBIS

Multiple industry standard characterizations performed

- Potency
- Biological Activity
- Product Purity
- Biophysical and Structural Properties
- Chemical Modifications
- Post Translational Modifications
- Host Cell Impurities
- Product and Process Related Impurities
- Thermal Stability upon Reconstitution



What may have led to the development of n

The DalcA molecule is not inherently immunogenic – What

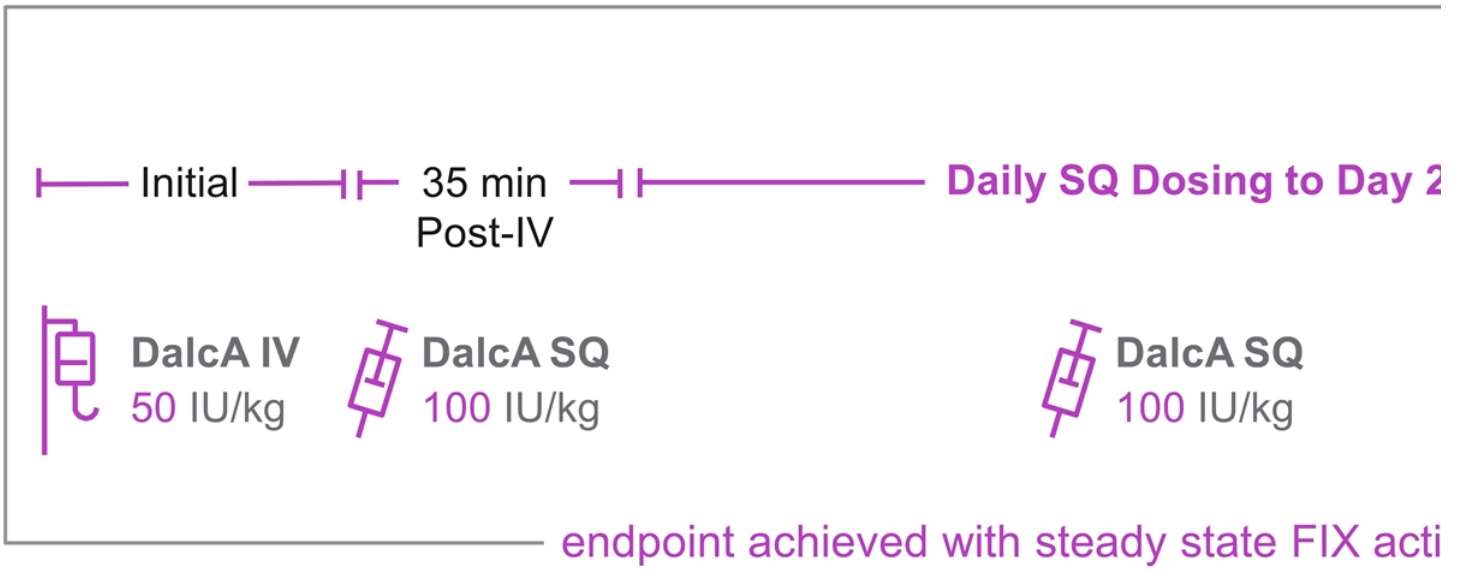
- The nAbs were associated with the rare genotype and/or ce
- The nAbs did not cross-react with BeneFIX or RIXUBIS so
- The nAbs were a rare event observed early in the trial withi

Conclusion – Evaluate further safety & efficacy in a Phase

+ Broaden the subject population to have a diverse ethnic an
+ Exclude the rare genotype of the two subjects who develop
+ Consider HLA profile and exclude those with HLA types tha
+ Execute the P2b trial (28 days of dosing) with careful monit nAbs

DalcA Phase 2b SQ clinical trial design: DL

Moving forward with the phase 2b study: DLZ-201



+ Enrollment: 6 patients
+ Single IV dose followed by 28 day SQ dosing

+ Primary enc level above
+ Secondary e formation, p pharmacody

DalcA regulatory next steps

Next steps to Phase 3 & agency approvals

CBIO has obtained the perspective of ex-FDA experts on nAb

+ Proceed with care with Phase 2b in 6 patients
+ Preclinical immunogenicity assessment was comprehensive – nc
    - Complementary on the completeness of CBIO's investigation

CBIO received scientific advice from MHRA

+ Additional data (Phase 2b) is needed to assess nAb
+ Global Phase 3 clinical study design:
    - 20 adult patients with Hemophilia B
    - 6 months prophylactic dosing
+ Toxicology package is sufficient

Pre-IND meeting with FDA will be scheduled after completion of the

Final Phase 3 clinical study design will incorporate EMA, MHRA an

Conclusions on the dalcinonacog alfa prog

Moving forward in clinical development after an extensive i

Preclinical immunogenicity assessment shows tha
equivalent to that of competitors such as BeneFIX

A comprehensive evaluation of the drug product s
quality to marketed rFIX products

KOLs and subject experts agree with the immuno
assessment and proceeding with the P2b to evalu
efficacy of dalcinonacog alfa

CATALYST BIOSCIENCES

December 18th 2018

Marzeptacog alfa (activated)

Marzeptacog alfa (activated)

Marzeptacog alfa (activated), a novel clinical stage SQ FVII differentiated from IV market leaders:

+ Simpler, less painful, small dose
+ SQ enhances pharmacokinetics
+ Potential to maintain continuous protective levels
+ Disruptive to current intravenous bypass products
+ Especially well suited for children

Four point mutations within the FVIIa protein

+ Catalytic activity increased

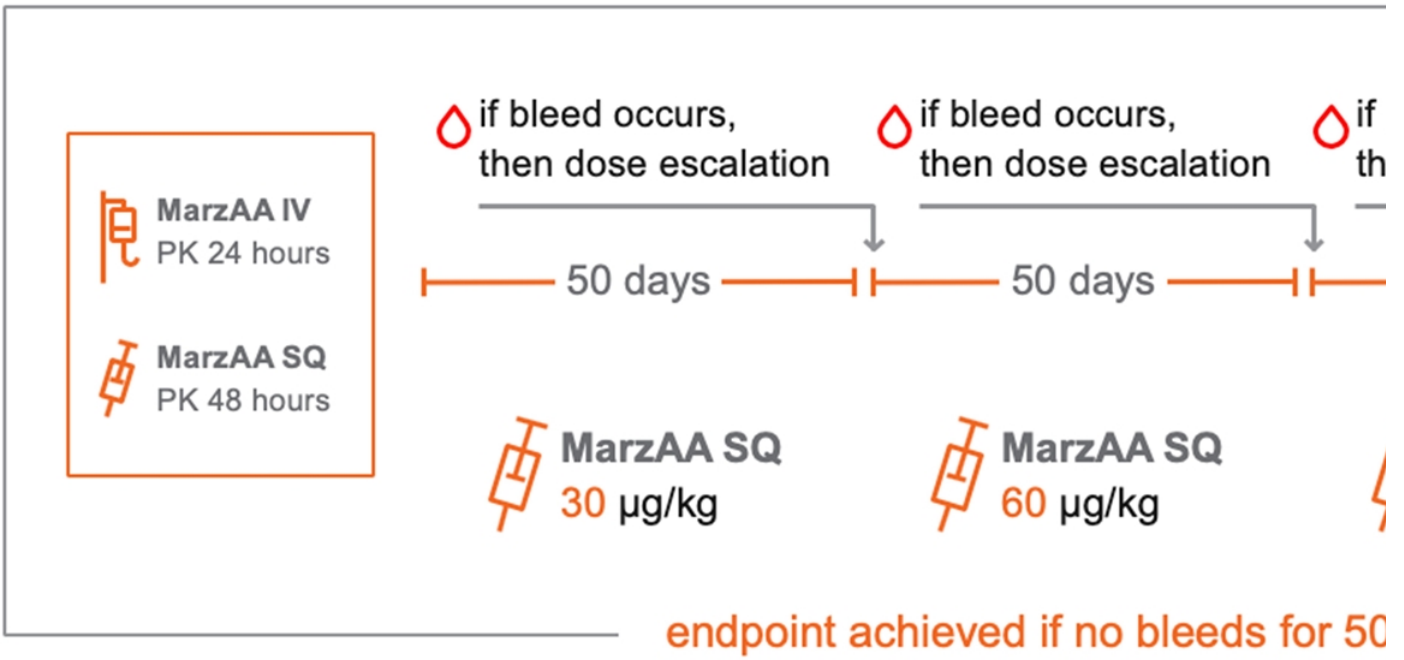
Best-in-class high-potency rFVIIa product

+ 9-fold more potent than NovoSeven RT

Orphan Drug Designation in US

MarzAA phase 2 SQ clinical trial design

Hemophilia with inhibitors: FVIIa



+ Open label SQ study with individual dose escalation if needed
+ Hemophilia A or B with inhibitors
+ Up to 12 adult patients with documented annual bleeding rate (ABR) >12
+ Primary endp bleed rate
+ Secondary en tolerability, nc

Subject demographics & disposition

High pre-treatment ABRs reduced to a median of 0

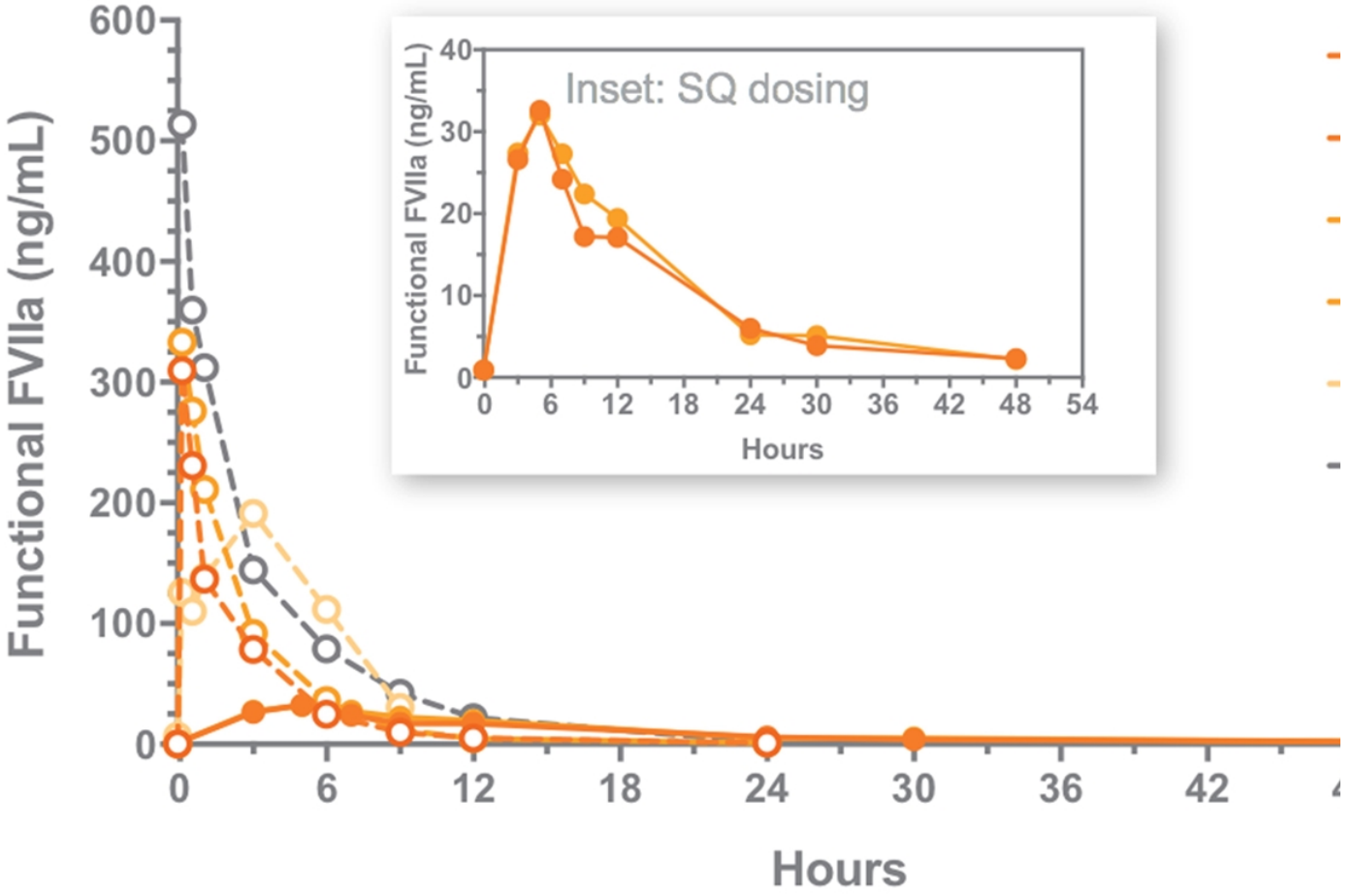
+ 13 subjects have been consented and 9 enrolled (Median AB
+ 5 subjects have completed dosing with clinically significant re
+ 4 subjects had no bleeds at their final dose level
+ IV half-life of 3.9 hours was increased to SQ half-life of 13.1 h
+ No anti-drug antibodies have been detected to date
+ After more than 325 SQ injections, only one injection site rea
  without sequelae

Subject demographics & disposition

Subject ID	Age	Highest Inhibitor level BU	Age when inhibitor diagnosed	Hemophilia A or B	ABR	ABR on tre
2680101	36	16	15	A	12.2	Revoked c
2680301	18	5	14	A	26.7	Zero at 60 3.8 ove
2680302	30	2.7	26	A	18.3	Fatal unrela
6430201	29	4.2	27	A	15.9	Zero
6430202	35	4.7	35	A	16.6	Zero
0510101	43	5.5	39	A	22.2	Untreated tr hematoma Da 7.3
0510104	31	1.73	31	B	27.7	Dosin
6430204	18	56	6	A	15.9	Dosin
6430203	23	4.5	21	A	15.2	Zero
7100101	23	2.94	19	A		In scree

MarzAA Phase 2 study interim PK results

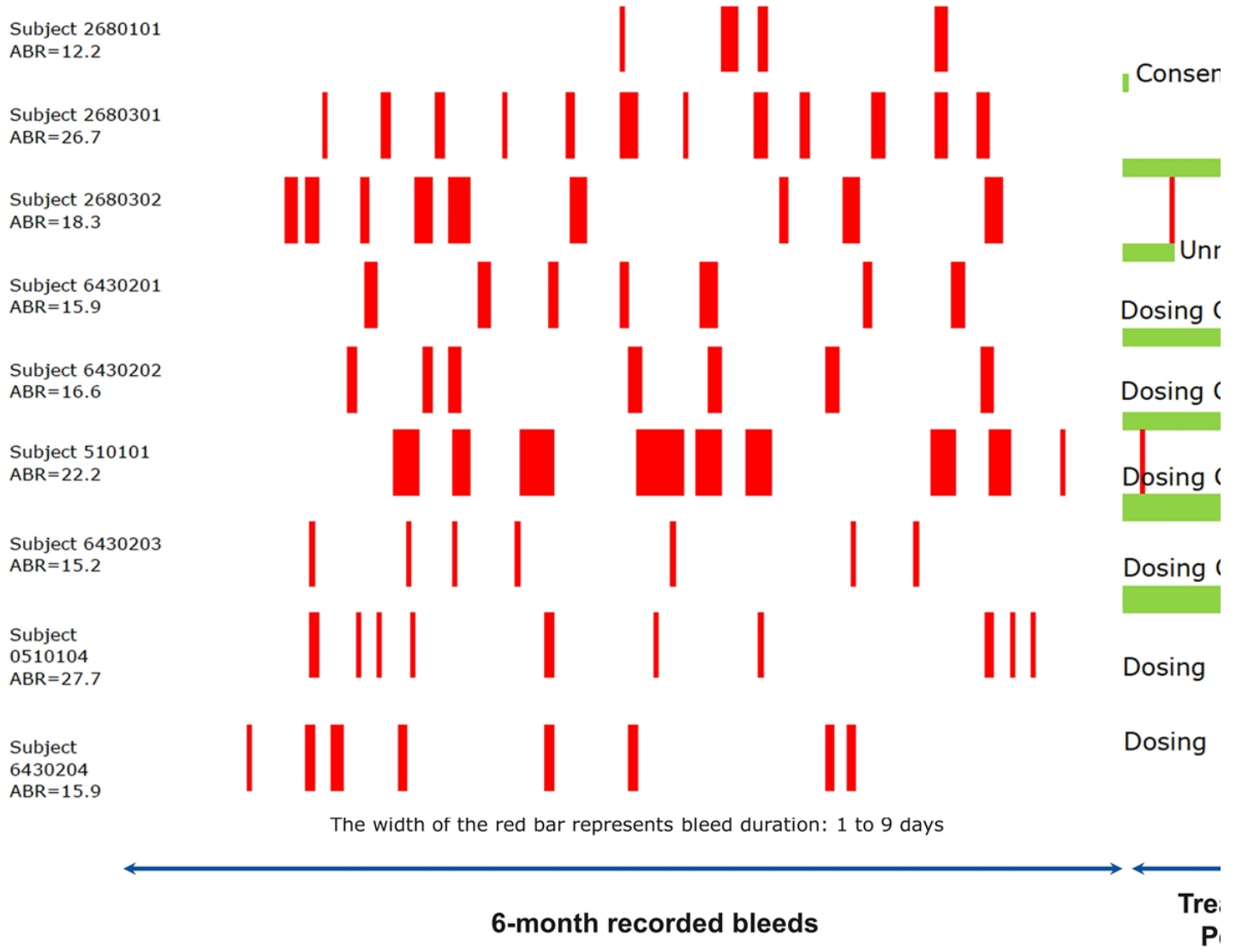
FVIIa functional activity after IV or SQ administration



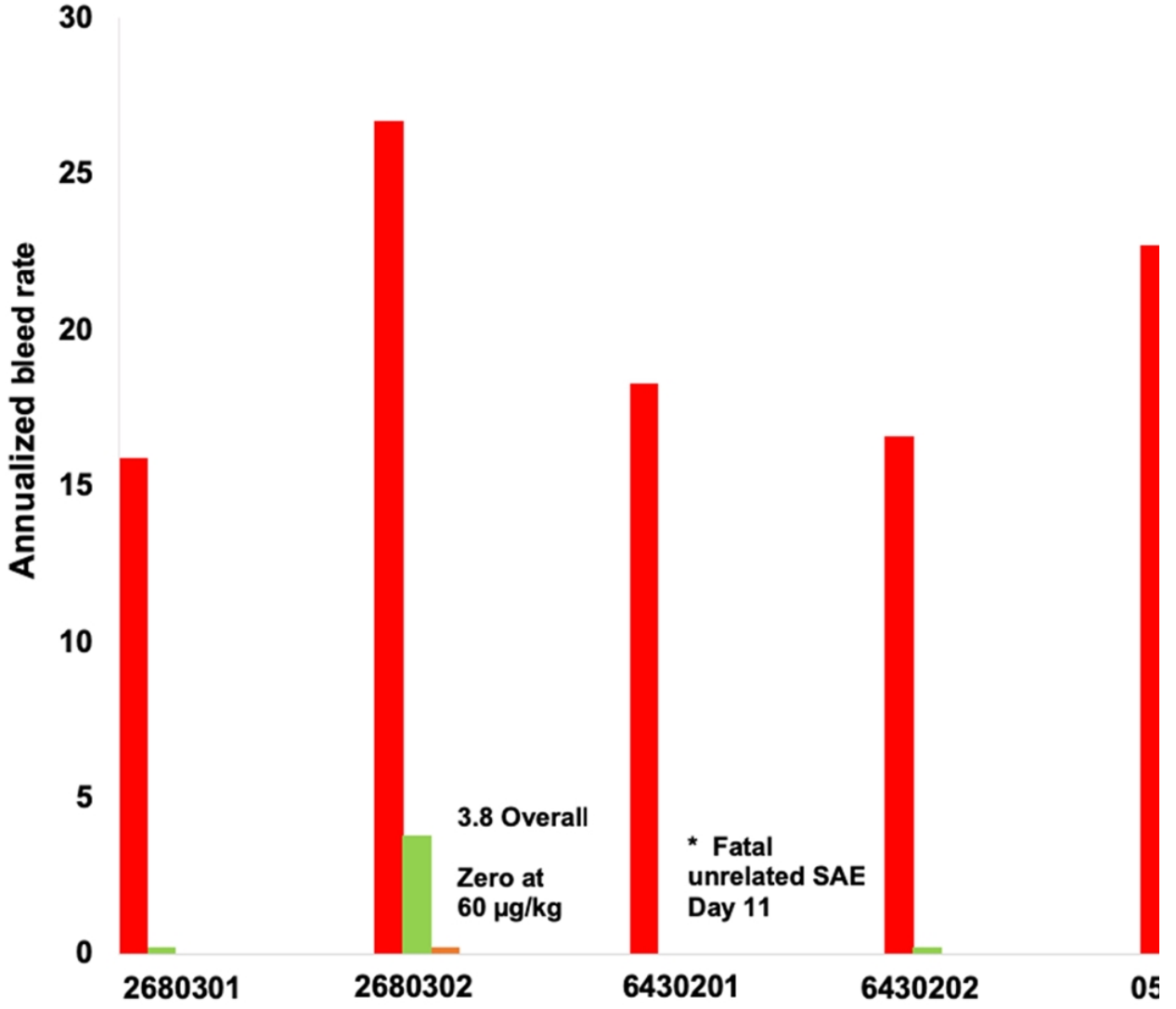
MarzAA pharmacokinetics

Route	Half-life alpha (hr)	Half-life beta (hr)	Mean Residence Time (hr)	Cmax (ng/mL)	Tmax (hr)	
IV Median ± Interquartile Range	1.1 ± 1.2	3.9 ± 1.4	4.5 ± 2.5	309.5 ± 267.0	0.083 ± 1.5	10
SQ Median ± Interquartile Range		13.1 ± 12.2	20.6 ± 16.5	22.0 ± 20.3	6 ± 3.5	3

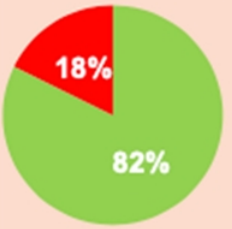
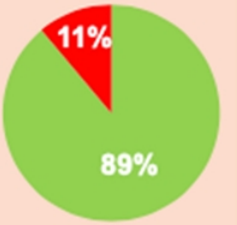
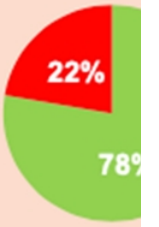
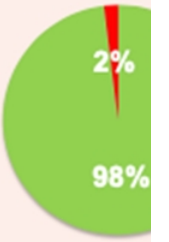
MarzAA reduces annualized bleed rate (AB



Pre-treatment ABR & ABR during treatment



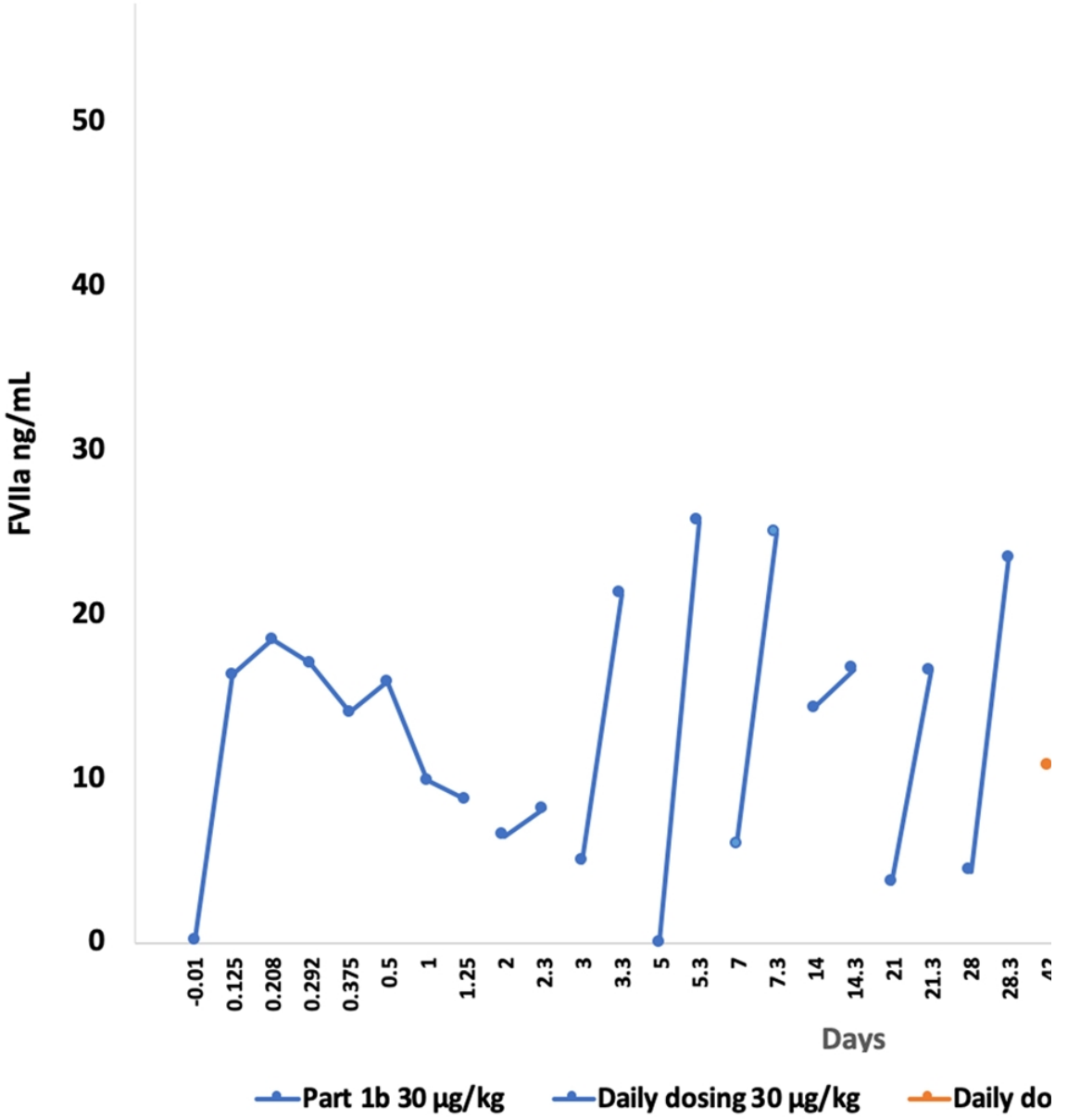
Pre- and on-treatment proportion of bleedir

Subject	2680301	2680302	6430201	6430202	05101
Pre-treatment					
On-treatment		Unrelated SAE			

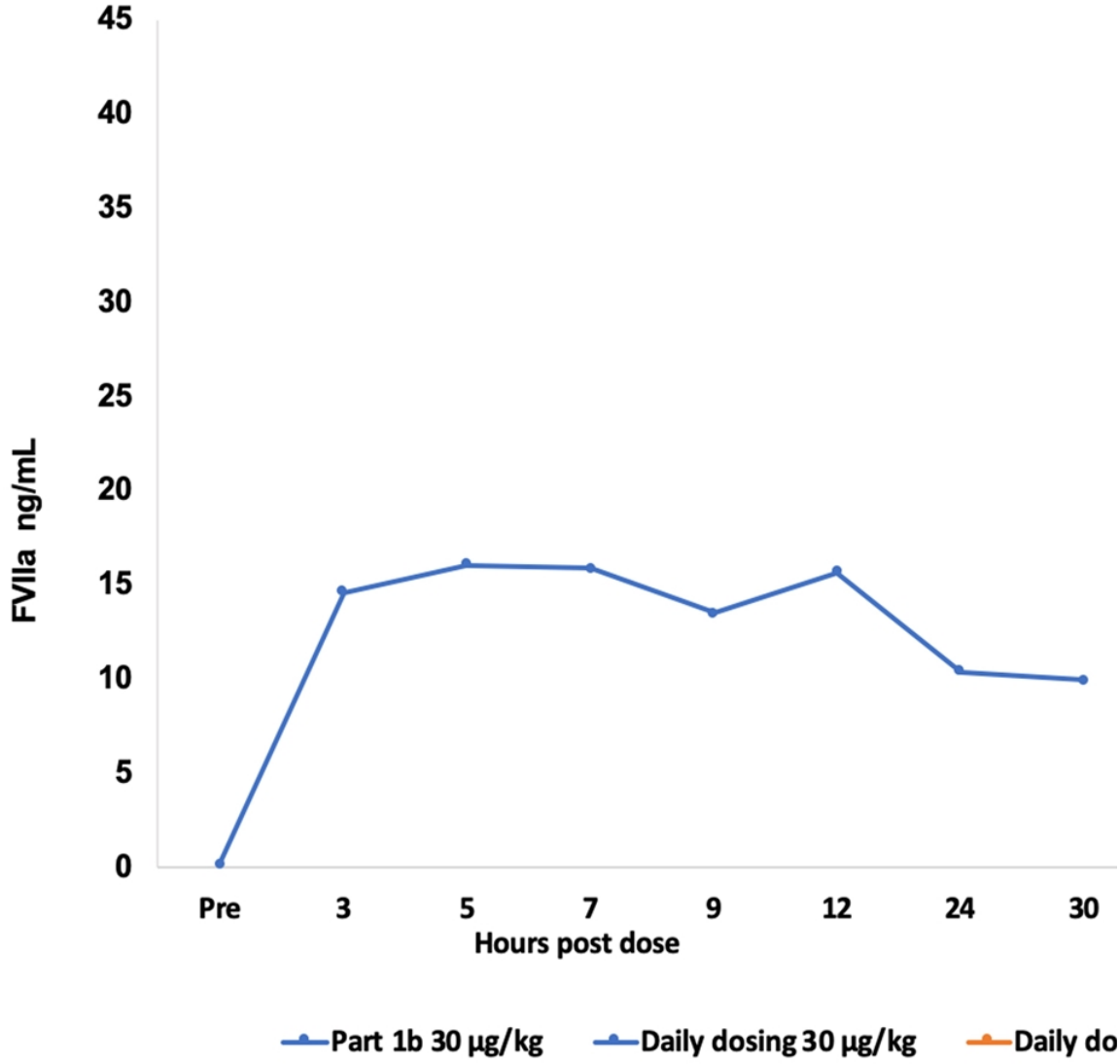
Red denotes the proportion of days with bleeding during observation period

- The average percentage of days of bleeding in the pre-treatment deviation 6.3%) [median 11.9%]
- In the treatment period, these percentages were reduced to 1.9% (sta 0.5%]
- The analysis of these pairwise differences by a randomization (and p=0.036 by Wilcoxon signed-rank test)

Mean First SQ dose PK and trough & 7h po



Mean First SQ dose PK and trough & 7h po level by dose



MarzAA regulatory

Next Steps to Phase 3 & Agency Approvals

MarzAA Phase 3 trial design based on EMA and MHRA feedba

+ An end of Phase 2 meeting with FDA to be scheduled after c

Global Phase 3 clinical study:

+ 20-40 adult patients with Hemophilia
+ 6 Hemophilia B patients
+ 6 months lead in and 6 months treatment
+ The primary end point - significant reduction in ABR and pop

Non-clinical strategy developed with four experts ex CBER revi

A PK/PD clinical study will start in 2019 – based on MHRA feed

Conclusions on the marzeptacog alfa (activ

Moving forward in clinical development after clinical proof

Clinical efficacy and tolerability demonstrated

Additional clinical data at EAHAD 2019 and ISTH

Trial guidance obtained from EMA & MHRA, will c
phase 2 in late 2019

CATALYST BIOSCIENCES

December 18th 2018

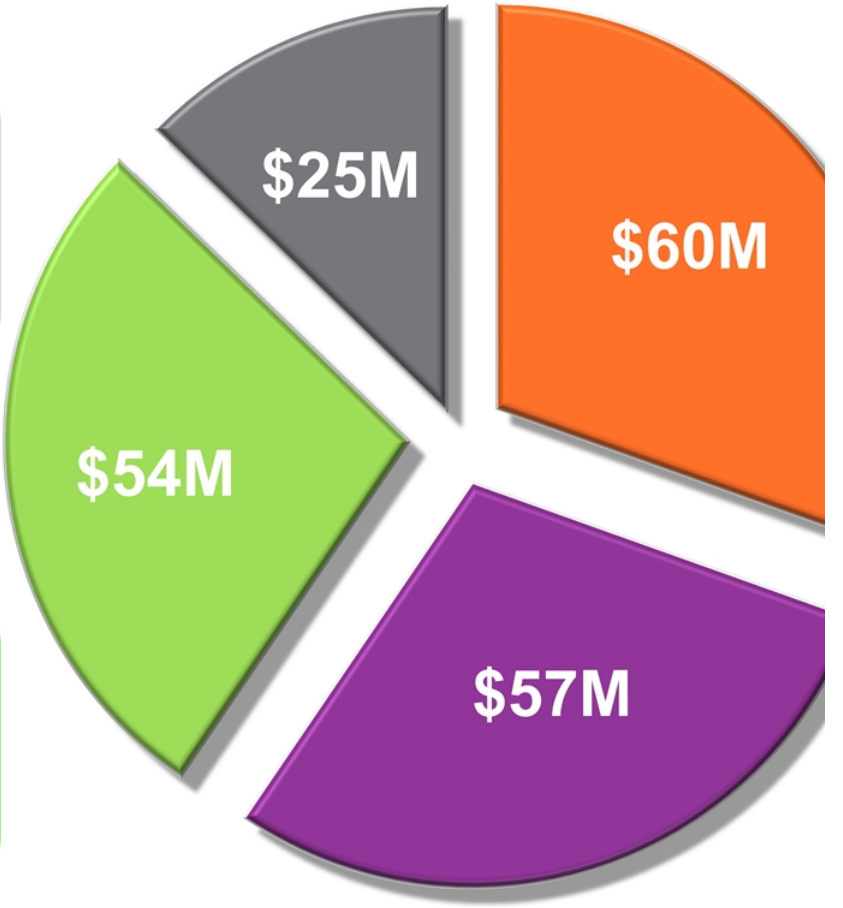
Financial Information

MarzAA US Revenue Forecast $196M (~$40

Target Product Profile Strongly Resonates Across Multiple

Factor VII Deficiency
>50% “very willing” to use MarzAA

Acquired Hemophilia A
>75% “very willing” to use MarzAA



ADIVO ASSOCIAT

Financial information

Selected data

Operating Results	Q3 2018	Q3 YTD
Operating Expense	$8.3 M	$22.1 M
Net Loss	($7.7 M)	($19.2 M)
Net Loss per share	($0.64)	($1.75)

Share Data

Common Stock Outstanding	11,942,729
Fully Diluted Shares	14,623,688
Average Volume	166,084
Market Capitalization as of 17 December 2018	$111 M

Financial Strength

Cash & Cash Equivalents Q3/2018	$129.2 M

Catalyst / ISU DalcA Collaboration

ISU gains Korean commercial rights, CBIO to pay ISU a fix

Prior Agreement

+ ISU had a option for first right of refusal on Korean commerc
+ Catalyst responsible for worldwide development, regulatory a

Restructured Agreement

+ Catalyst maintains global development, regulatory and ex-Ko
+ ISU granted:
  - Korean commercial rights
  - Up to $19.5M in development, regulatory and sales based
  - Single digit net-sales royalty
  - Option for profit share removed

Milestones

2018

	Q1	Q2	Q3	Q4	Q1
MarzAA (FVIIa)	**P2 Initiated** ✓		**ISTH** Interim P2 data ✓	**ASH** P2 data ✓	**EAHAD** P2 data
DalcA (FIX)	**EAHAD** Top-line multidose clinical data (oral) ✓	**WFH** Final Cohort 5 data Initiate Cohort 6 ✓	**ISTH** **Phase 1/2** Cohort 6 data ✓		**Initiate P2b** **EAHAD**
Anti-C3 (dAMD)					**PK/PD**

Summary

Disruptive approach to a $3.5 billion market

Subcutaneous prophylactic dosing designed to be less painful and much more convenient, especially for children

+ Clinical proof of efficacy demonstrated for both Marzeptacog alfa (activated) & Dalcinonacog alfa

FVIIa: Marzeptacog alfa (activated)

~$2.2 Billion market

Phase 2 of a Phase 2/3 program enrolling

90% reduction in ABR on treatment

No ADAs or nAbs observed to date

+ Phase 2 data at EAHAD & ISTH 2019

+ EoP2 in 2019

FIX: Da
~$1.2 b

>30% a
dosing

Potenti
mild he

+ Initia

Anti-C
multi-b

C3 is a
to gene

+ Pre-c

Strong

THANK YOU

Nasdaq: CBIO

catalystbiosciences.com

Exhibit 99.2

Catalyst Biosciences Hosts Research & Development Day Focused on Factor VIIa and Factor IX Hemophilia Programs

SOUTH SAN FRANCISCO, Calif., Dec. 18, 2018 — Catalyst Biosciences, Inc. (NASDAQ: CBIO), a clinical-stage biopharmaceutical company focused on developing novel medicines to address hematology indications, is hosting a Research & Development (R&D) Day today in New York to provide updates on its Factor IX (FIX) dalcinonacog alfa (DalcA) and Factor VIIa (FVIIa) marzeptacog alfa (activated) (MarzAA) hemophilia programs.

Members of the Catalyst management team, including, Nassim Usman, Ph.D., chief executive officer; Howard Levy, M.B.B.Ch., Ph.D., M.M.M., chief medical officer; Fletcher Payne, chief financial officer; and Grant Blouse, Ph.D., vice president of translational research, will be presenting beginning at 12:00 p.m. EST. A live and archived webcast of the event may be accessed here and on the Events and Presentations section of the Catalyst website.

“The results of our extensive DalcA immunogenicity risk assessment revealed a similar low immunogenicity potential compared with BeneFIX and other commercial wildtype FIXs; therefore, we will be moving forward with the clinical development of DalcA,” said Dr. Usman. “We plan to initiate a Phase 2b trial that will include 28 days of daily subcutaneous dosing in the first quarter of 2019. Based on the efficacy data that we have previously shown in which subjects achieved high mild hemophilia FIX activity, we believe that DalcA has the potential to provide a conveniently-dosed subcutaneous prophylactic treatment option for those suffering from hemophilia B.”

Dr. Usman continued, “Given the promising interim results from our Phase 2/3 study of MarzAA, in which all five subjects that have completed dosing experienced clinically significant reductions in their annualized bleed rates, and the results of our commercial assessment, showing a several hundred million dollar revenue forecast globally, we believe that MarzAA has significant clinical and commercial potential.”

Select R&D Day Highlights

DalcA

- A comprehensive immunogenicity risk assessment to investigate the development of neutralizing antidrug antibodies in Cohort 6 of the Phase 1/2 program concluded:
    - The DalcA drug product does not appear to be inherently immunogenic.
    - *In silico*, *in vitro* and *ex vivo* analyses indicate that the immunogenicity risk for DalcA is similar to commercial wildtype recombinant FIX products.
    - The DalcA drug product quality is similar to marketed FIX products.
    - 7-day subcutaneous non-human primate toxicology studies showed that DalcA subcutaneous injections were well tolerated.

- Catalyst plans to move forward with clinical development of DalcA to further evaluate the safety and efficacy of the product in a Phase 2b study that is expected to begin in Q1 2019.

MarzAA

- In the Phase 2 portion of the Phase 2/3 trial of MarzAA for the treatment of hemophilia A or B with inhibitors:
  - Nine subjects have been enrolled to date (median annualized bleed rate of 16.25; range of 12.2-27.7).
  - Of the five subjects that have completed dosing, all had clinically significant reductions in annualized bleed rate (ABR).
  - Two subjects are currently dosing and others are undergoing screening.
  - After more than 325 subcutaneous injections, no antidrug antibodies have been detected, and only one injection site reaction of swelling that resolved without sequelae has occurred.
- Catalyst plans to conduct a global Phase 3 clinical study assessing reductions in ABR in 20-40 patients with hemophilia with six months of daily subcutaneous dosing of MarzAA.

About Catalyst Biosciences

Catalyst is a clinical-stage biopharmaceutical company developing novel medicines to address hematology indications. Catalyst is focused on the field of hemostasis, including the subcutaneous prophylaxis of hemophilia and facilitating surgery in individuals with hemophilia. For more information, please visit www.catalystbiosciences.com.

Forward-Looking Statements

This press release contains forward-looking statements that involve substantial risks and uncertainties. Forward-looking statements include statements about the relative safety of DalcA compared with BeneFIX and other recombinant Factor IX products, Catalyst's plans to commence a Phase 2b clinical trial of DalcA in the first quarter of 2019, the potential for DalcA to provide a conveniently-dosed subcutaneous prophylactic treatment option for patients suffering from hemophilia B, the potential for MarzAA to provide prophylaxis therapy in patients with hemophilia A or B with inhibitors, the potential commercial market for MarzAA, and plans to continue the ongoing Phase 2/3 clinical trial of MarzAA and for a Phase 3 clinical study of MarzAA. Actual results or events could differ materially from the plans, intentions, expectations and projections disclosed in the forward-looking statements. Various important factors could cause actual results or events to differ materially from the forward-looking statements that the Company makes, including, but not limited to, the risk that trials and studies may be delayed and may not have satisfactory outcomes, that additional human trials will not replicate the results from earlier trials, that potential adverse effects may arise from the testing or use of MarzAA or DalcA, including the generation of antibodies, which has been observed in patients treated with DalcA, the risk that costs required to develop or manufacture the Company's products will be higher than anticipated, competition and other factors that affect our ability to establish collaborations on commercially reasonable terms and other risks

described in the “Risk Factors” section of the Company’s Quarterly Report on Form 10-Q for the quarter ended September 30, 2018 filed with the Securities and Exchange Commission on November 1, 2018, and with other filings with the Securities and Exchange Commission. The Company does not assume any obligation to update any forward-looking statements, except as required by law.

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