



**H.C. Wainwright
NASH Investors Conference
New York City
April 3, 2017**

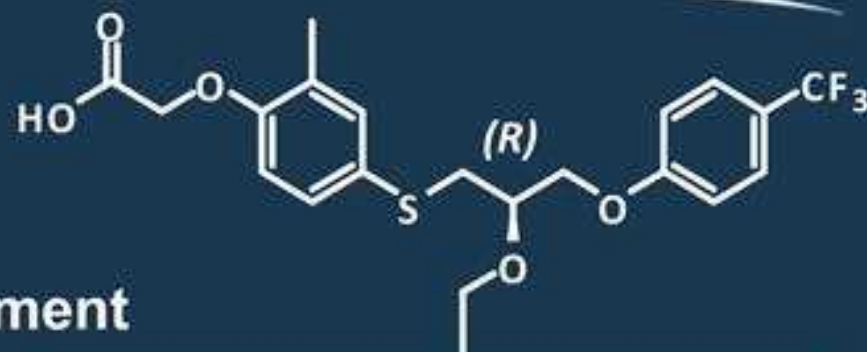
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This presentation contains "forward-looking" statements that involve risks, uncertainties and assumptions, and actual results may differ substantially from those projected or expected in the forward-looking statements. Forward-looking statements include, but are not limited to: any projections of financial information; any statements about future development, clinical or regulatory events; any statements concerning CymaBay's plans, strategies or objectives; and any other statements of expectation or belief regarding future events. These statements are based on estimates and information available to CymaBay at the time of this presentation and are not guarantees of future performance. Actual results could differ materially from CymaBay's current expectations as a result of many factors including, but not limited to: CymaBay's ability to obtain additional financing to fund its operations; unexpected delays or results in clinical trials; uncertainties regarding obtaining regulatory approvals; uncertainties regarding the ability to protect CymaBay's intellectual property; uncertainties regarding market acceptance of any products for which CymaBay is able to obtain regulatory approval; the effects of competition; and other market and general economic conditions. You should read CymaBay's Annual Report on Form 10-K filed with the SEC on March 23, 2017, especially under the caption "Risk Factors," which is available on the SEC web site at <http://www.sec.gov>, for a fuller discussion of these and other risks relating to an investment in CymaBay's common stock. CymaBay assumes no obligation for and does not intend to update these forward-looking statements, except as required by law.

Seladelpar as a Potential Agent to Treat NASH

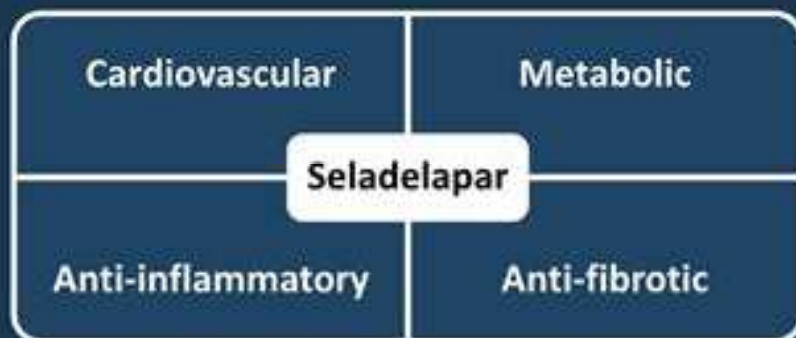
Seladelpar (MBX-8025)

- Once daily orally administered
- Only truly selective PPAR δ in development
- PPAR δ profile ideal for liver disease
 - Hepatocytes, Kupffer and stellate cells
- 90-fold more potent than elafibranor



EC ₅₀	PPAR δ	PPAR α	PPAR γ	FXR
nM	2	1,630	Inactive	Inactive

Potency for PPAR δ drives potential as foundational therapy:



PPAR δ Mediated Pharmacological Actions

Multiple potential benefits in NASH

Cardiovascular & Metabolic Effects

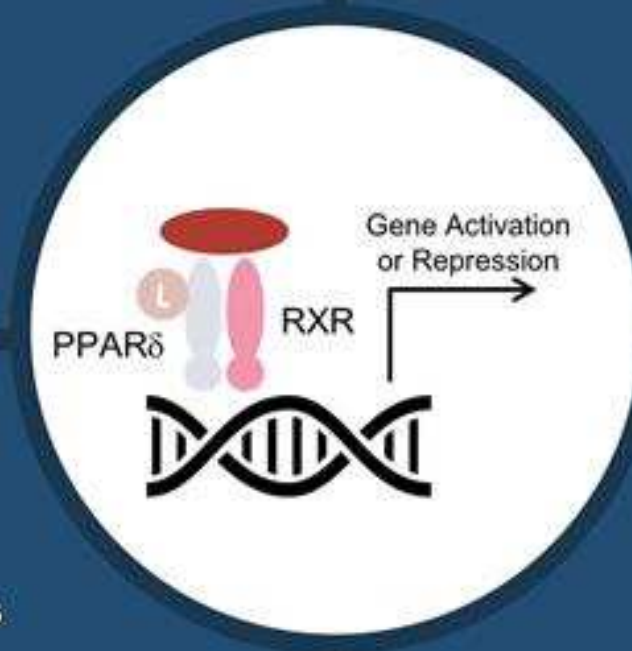
- ↓ LDL-C, TG and Fatty acids
- ↑ Insulin sensitivity
- ↑ Hepatic lipid metabolism

Fibrosis

- ↓ Connective Tissue Growth Factor (CTGF), TIMP, α SMA
- ↓ Stellate cells
- ↓ Collagen deposition

Inflammation

- ↑ Anti-inflammatory (M2) Kupffer cells
- ↓ NF κ B-dependent cytokines
- ↓ ALT
- ↓ hs-C-Reactive Protein (CRP)



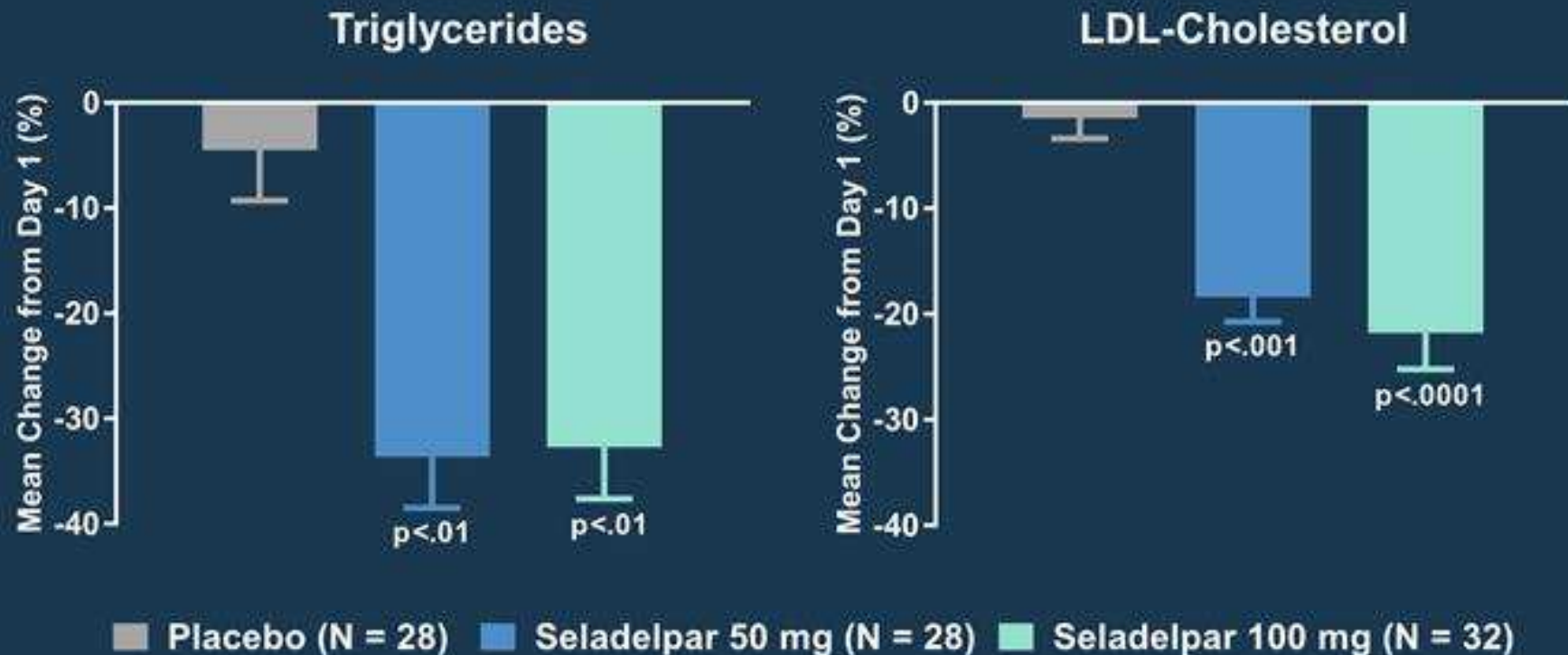
Peripheral Metabolic Effects

- ↑ Lipid metabolism
- ↑ Insulin sensitivity
- ↓ Cholesterol absorption

8-Week Phase 2 Study of Seladelpar in Mixed Dyslipidemia

Cardiovascular, metabolic and anti-inflammatory activity

- Obese patients with elevated TG, LDL-C and insulin resistance (“NAFLD”)
- Decreases in hs-CRP, HOMA-IR, Free FA, small dense LDL, GGT and ALP



Bays et al. (2011) *J Clin Endocrinol Metab*, 96: 2889-2897; Choi et al. (2012) *Atherosclerosis*; 220: 470-477

Evaluation of Seladelpar in the *foz/foz* Obese Diabetic Mouse Model for NASH

- **Geoff Farrell & Fahrettin Haczeyni, Australian National University**
- **Matthew Yeh & George Haigh, UW Seattle**
- **Genetic loss of function mutation in *alms1* gene produces hyperphagic mice¹**
 - Obese
 - Insulin resistant and diabetic
 - Hyperlipidemic
 - Hepatic steatosis and lipotoxicity
 - Inflammation and hepatocellular damage
 - NASH established by 20 weeks
 - Liver fibrosis



Australian
National
University

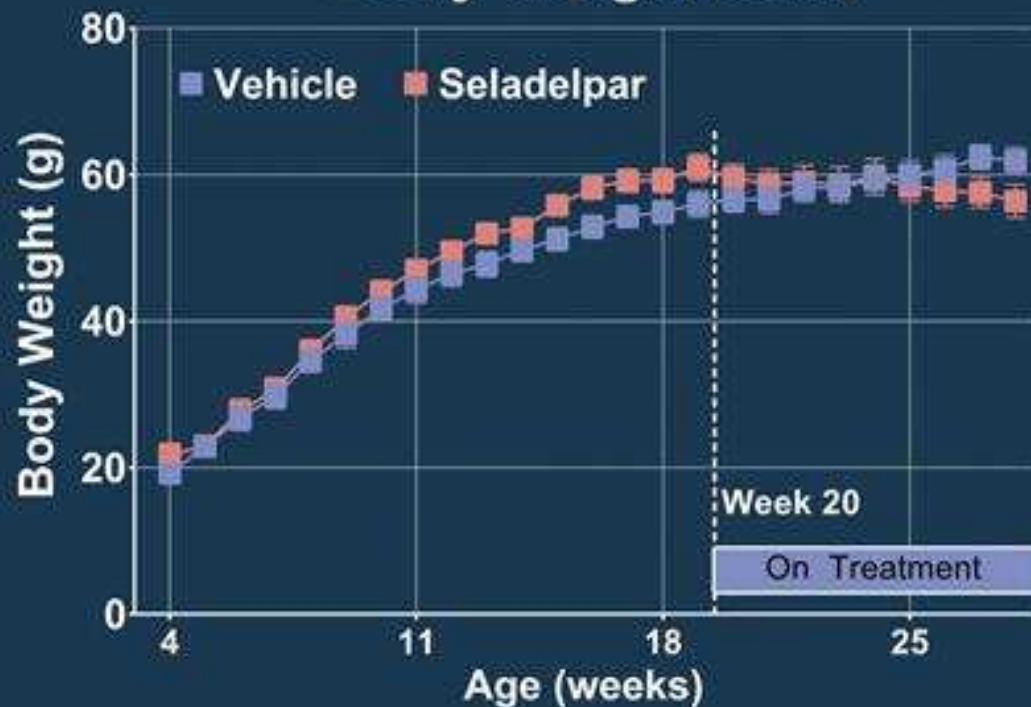
UW Medicine
PATHOLOGY

- **Groups: Seladelpar 10 mg/kg & Vehicle oral, once daily**

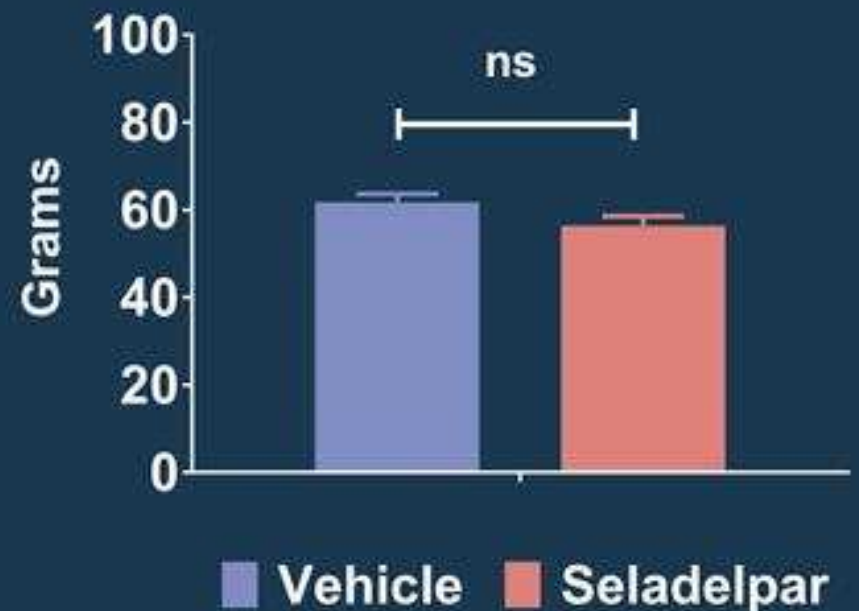


Effects of Seladelpar on Body Weight

Body Weight Gain

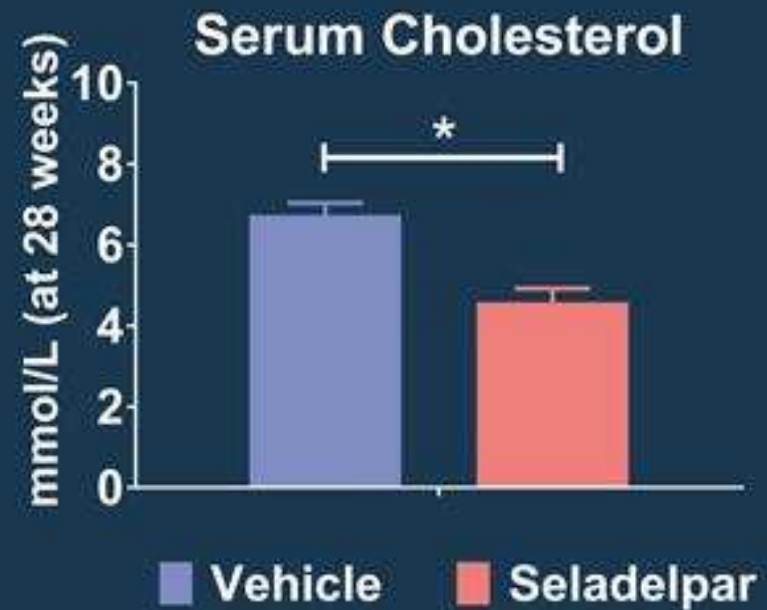
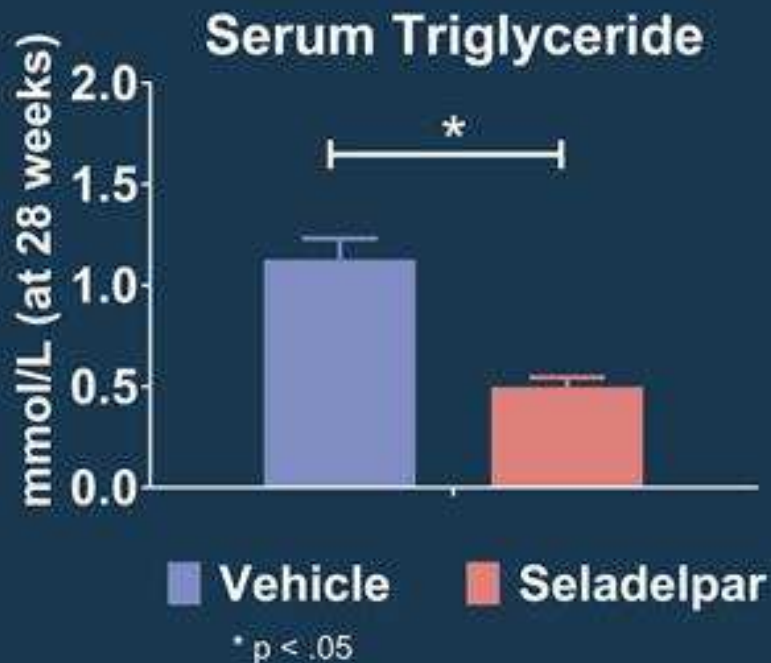


Body Weight at 28 Weeks



Evaluation of Seladelpar in the *foz/foz* NASH Model

Reductions in mice parallel clinical observations

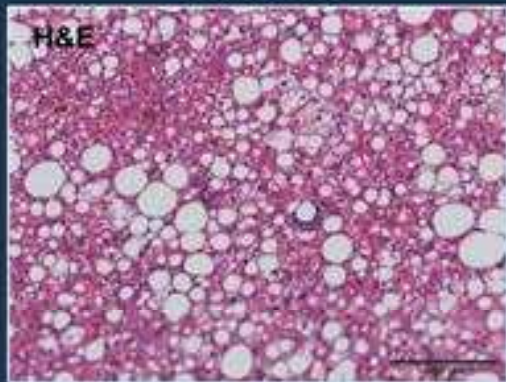


Evaluation of Seladelpar in the *foz/foz* NASH Model

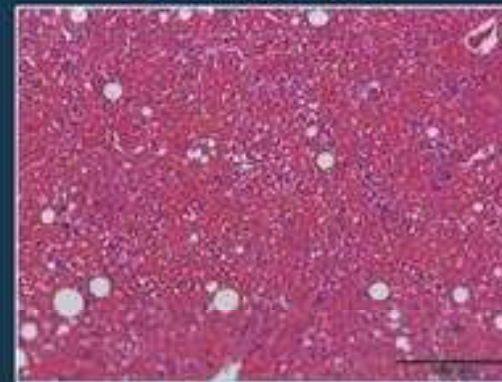
Liver parameters and histopathology



Vehicle

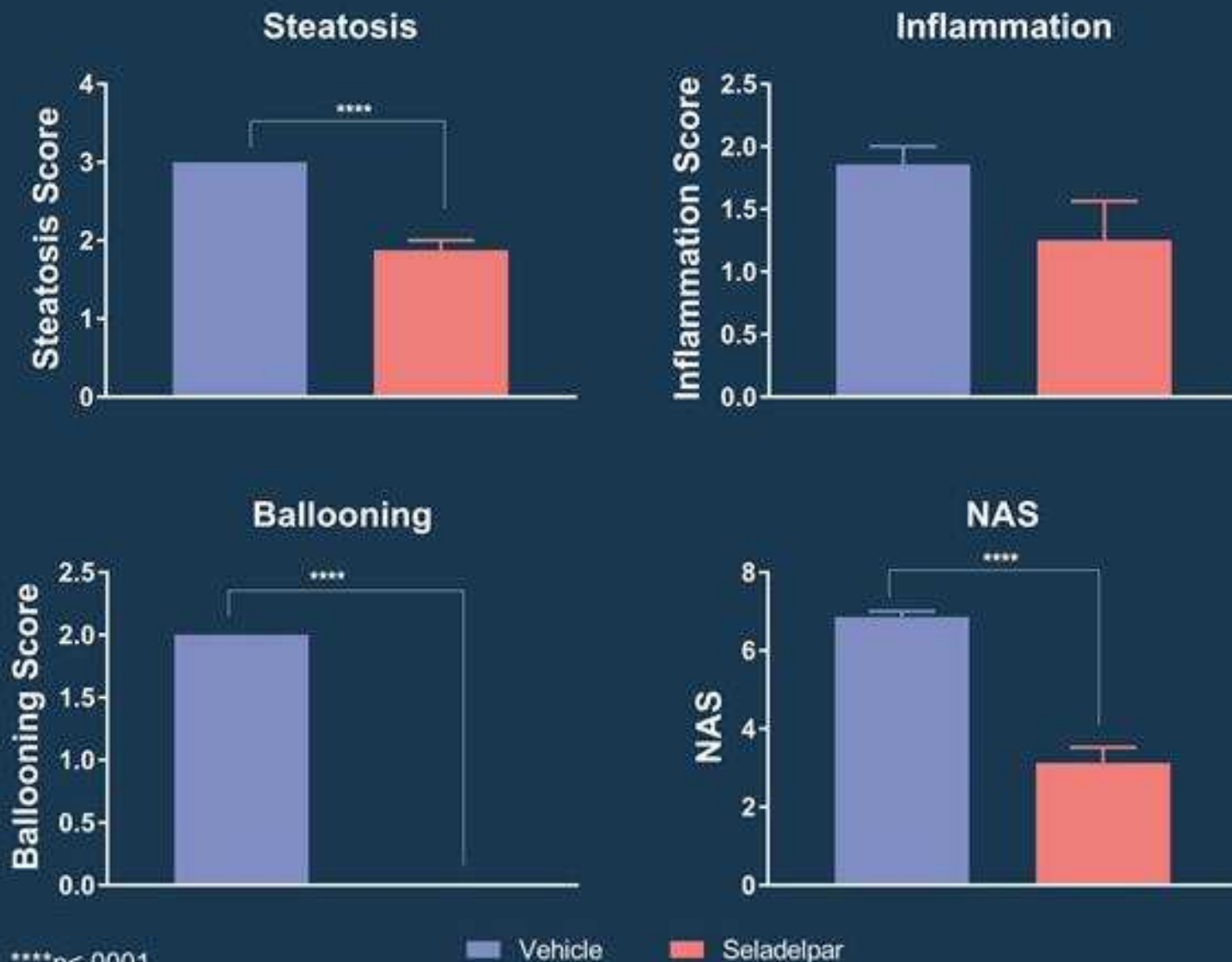


Seladelpar



Evaluation of Seladelpar in the *foz/foz* NASH Model

Reduction in steatosis, inflammation and ballooning

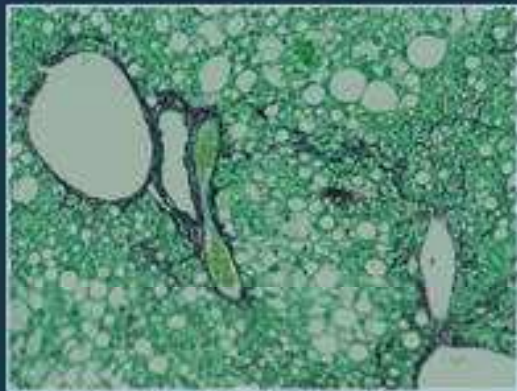


Evaluation of Seladelpar in the *foz/foz* NASH Model

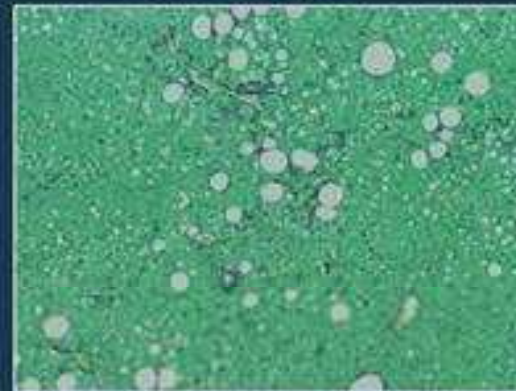
Reduction in fibrosis



Vehicle

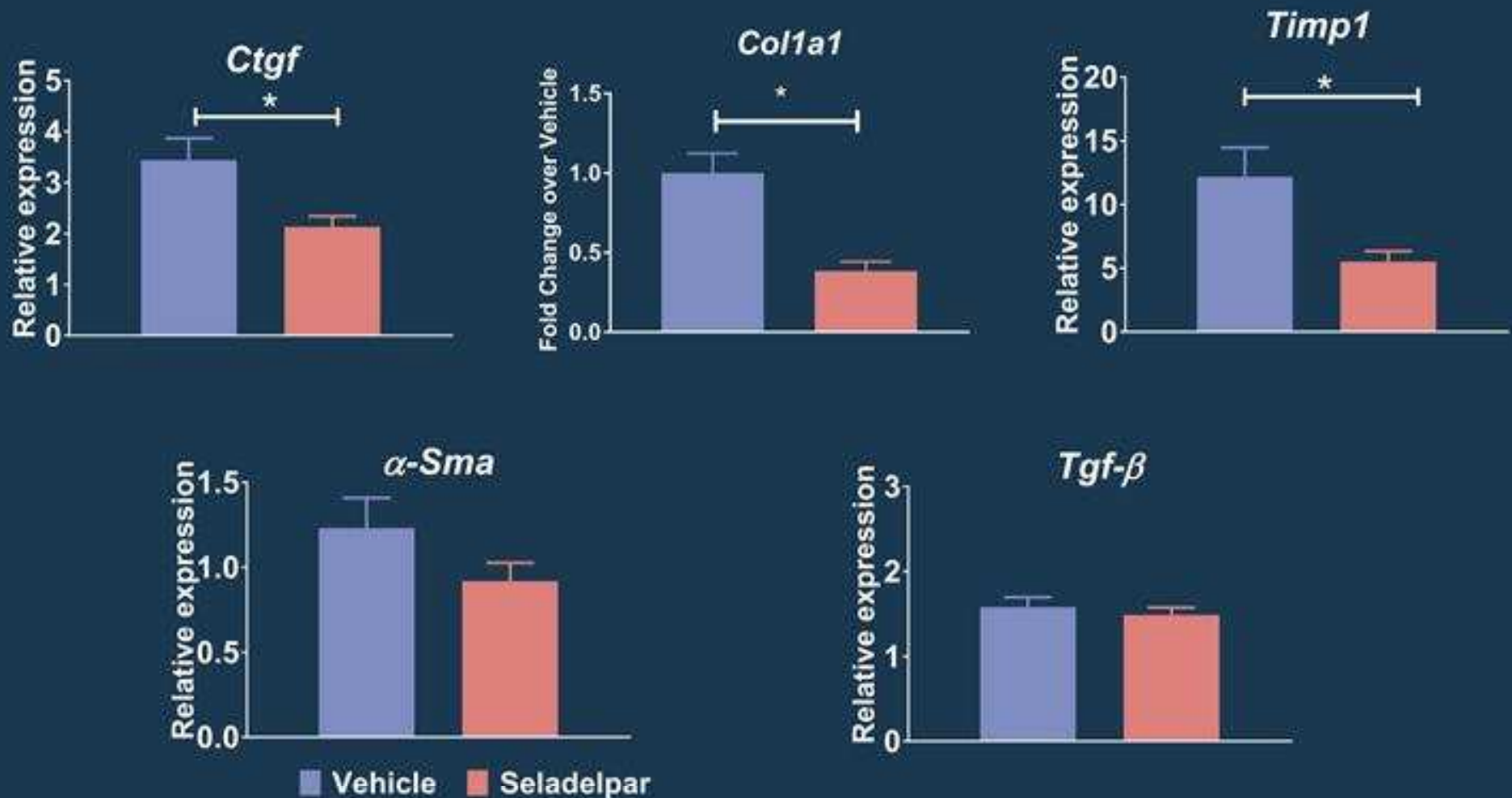


Seladelpar



Evaluation of Seladelpar in the *foz/foz* NASH Model

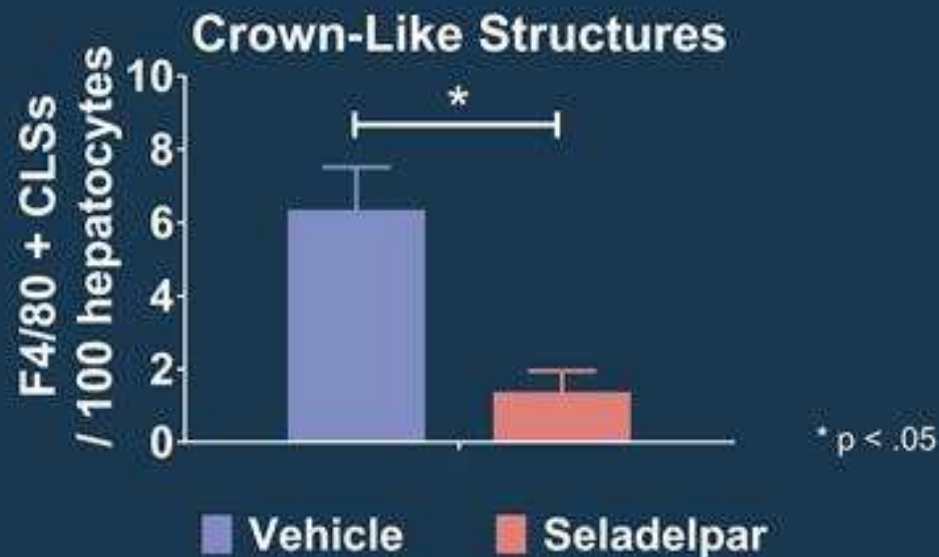
Changes in expression of genes associated with fibrosis



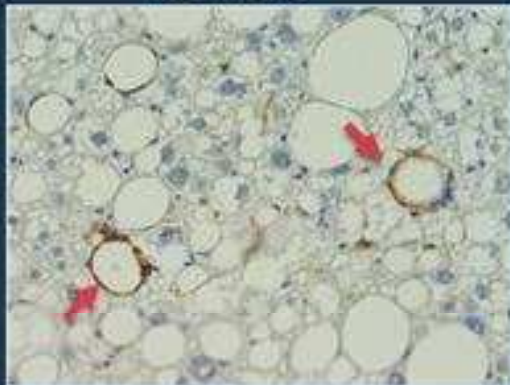
* p < .05

Evaluation of Seladelpar in the *foz/foz* NASH Model

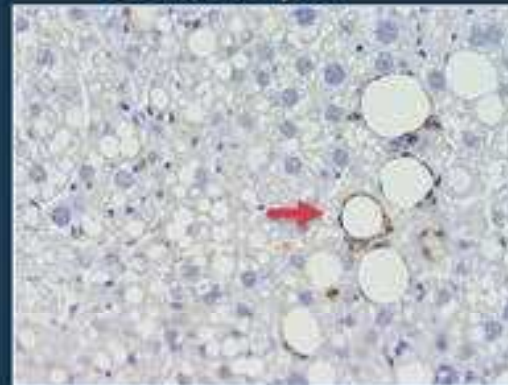
Seladelpar reduces hepatic inflammation



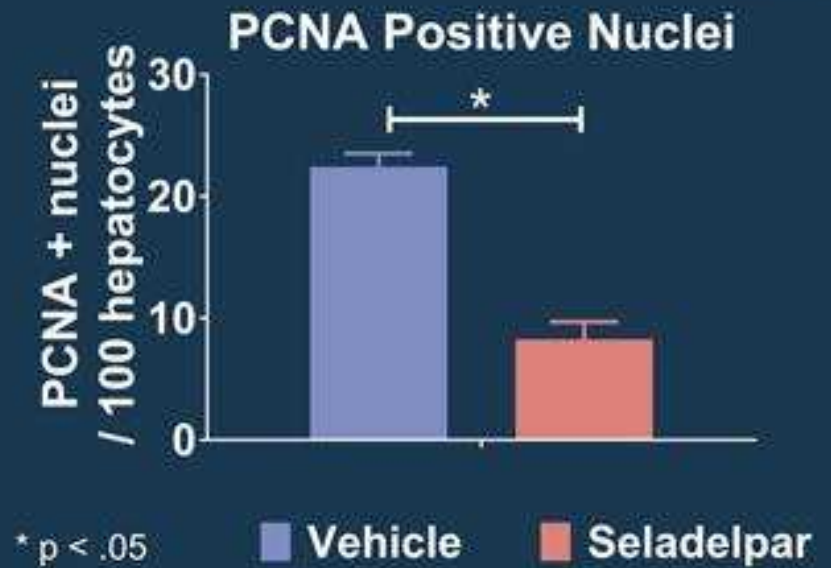
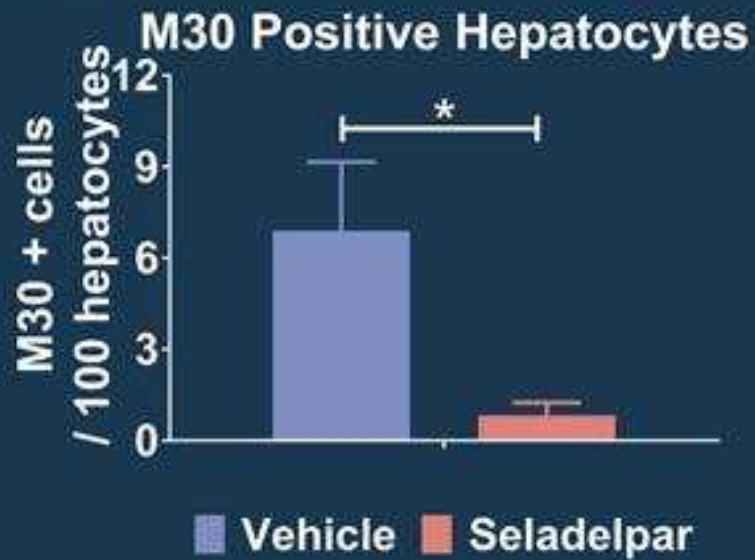
Vehicle



Seladelpar



Seladelpar Decreases Hepatocyte Proliferation and Apoptosis

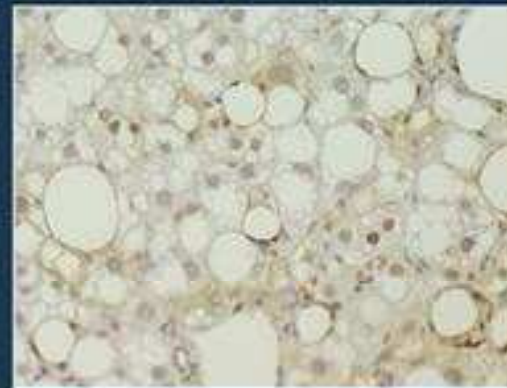
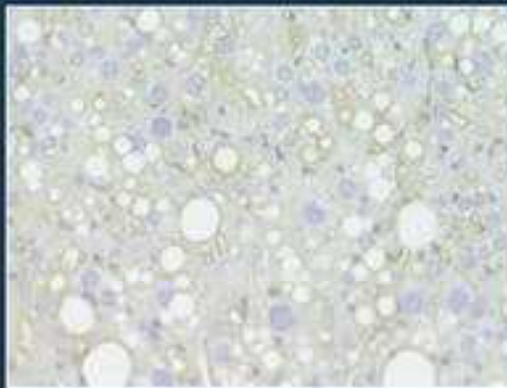


Vehicle

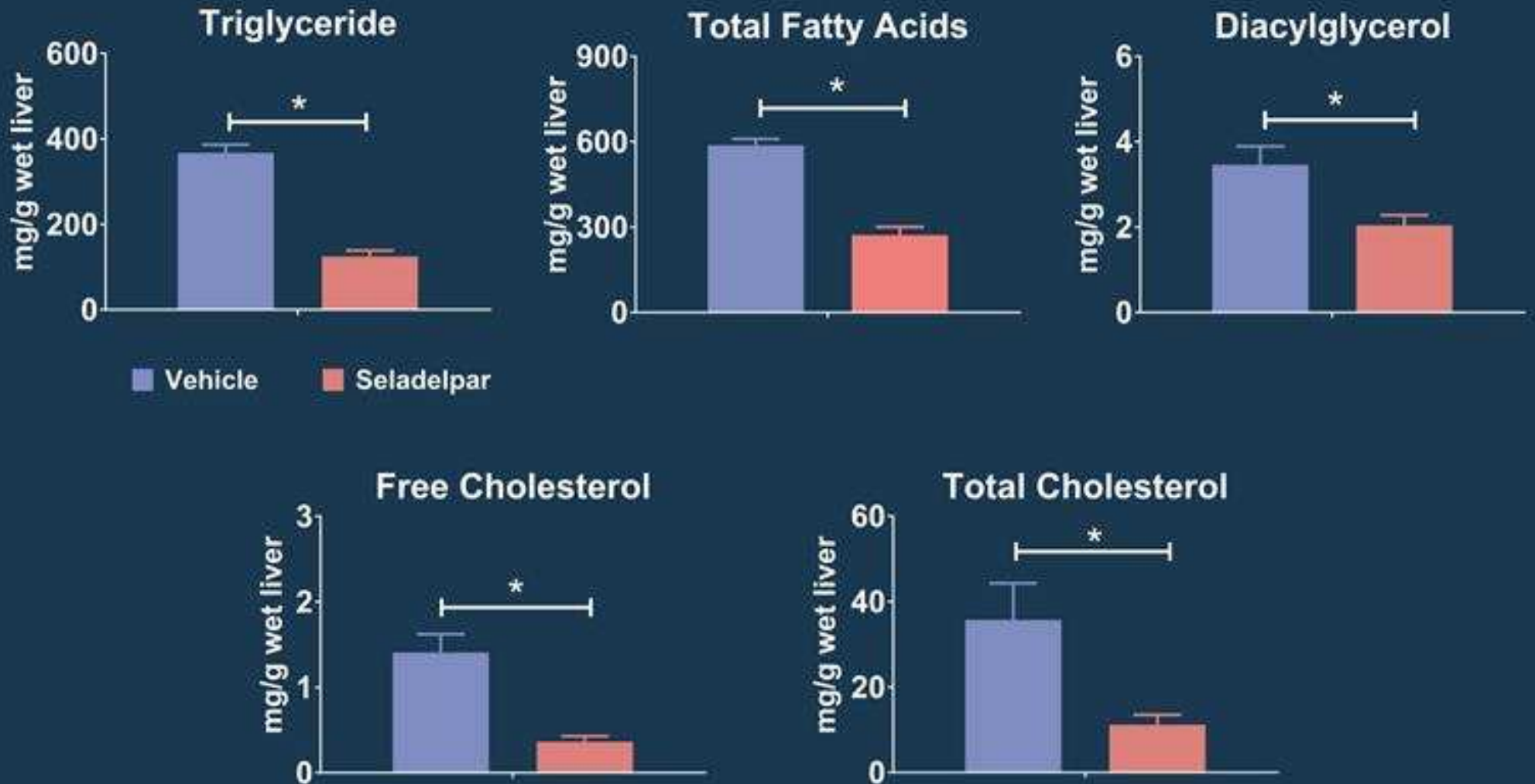
Seladelpar

Vehicle

Seladelpar

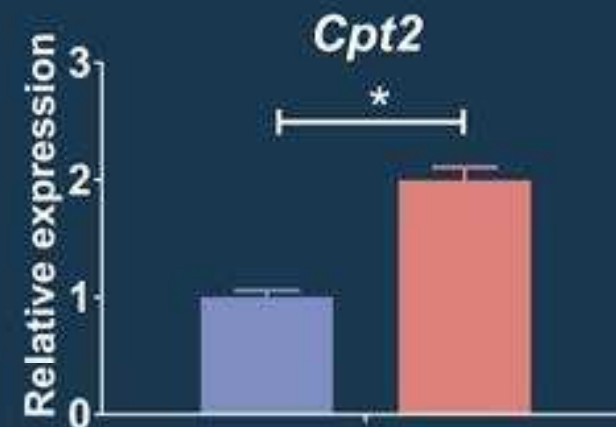
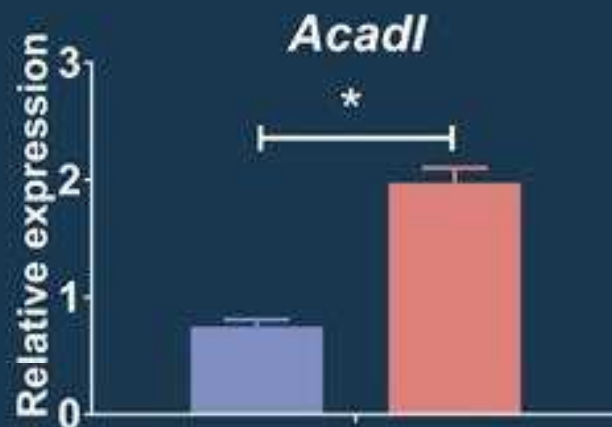
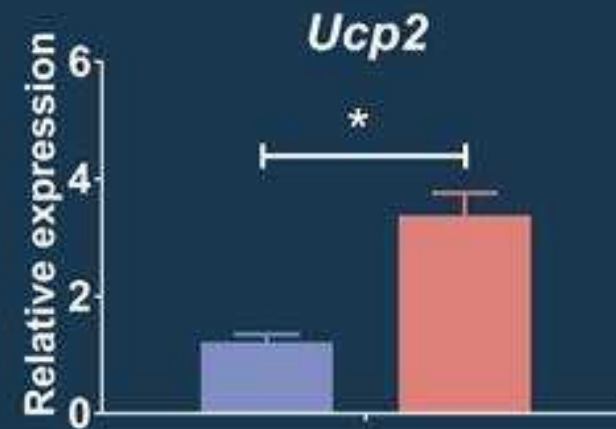
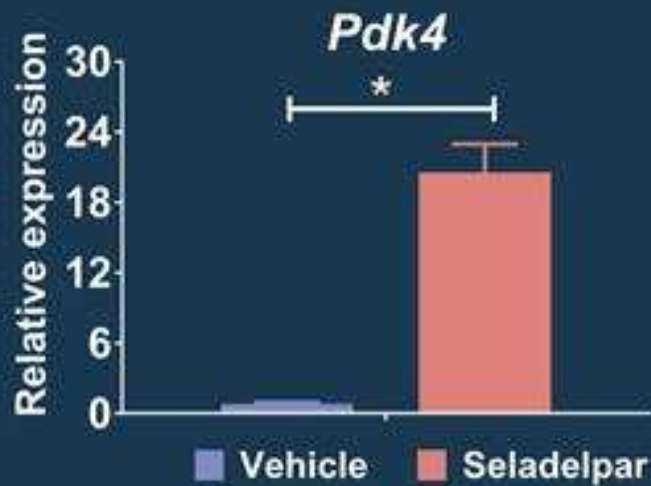


Seladelpar Reduces Hepatic Lipids



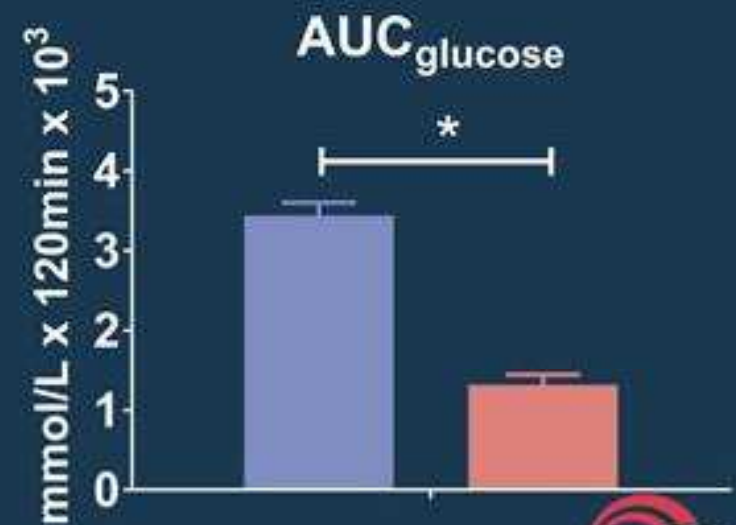
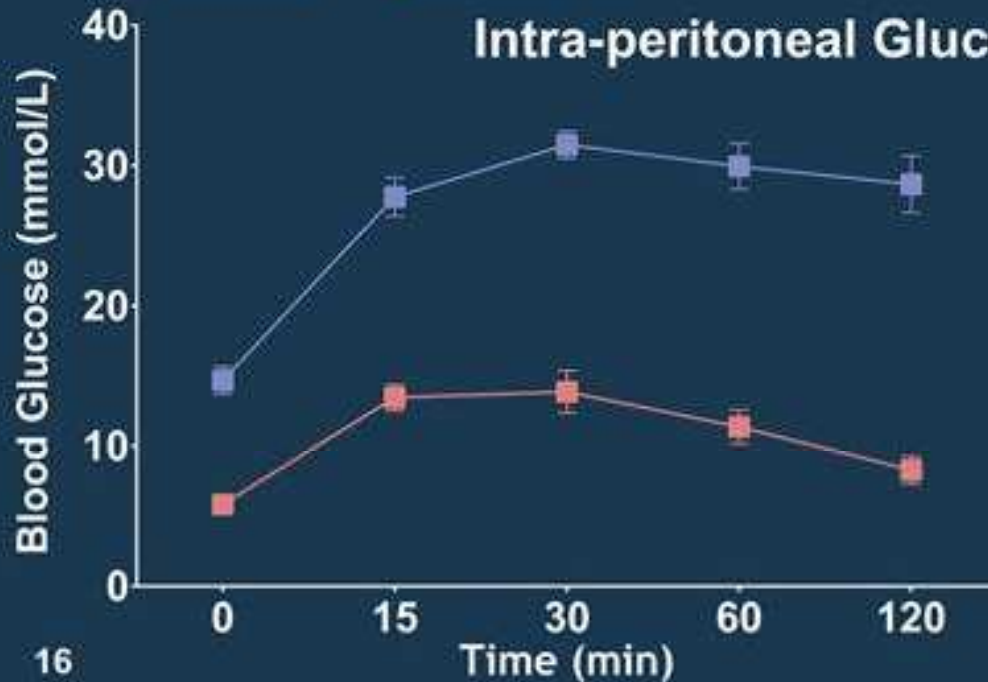
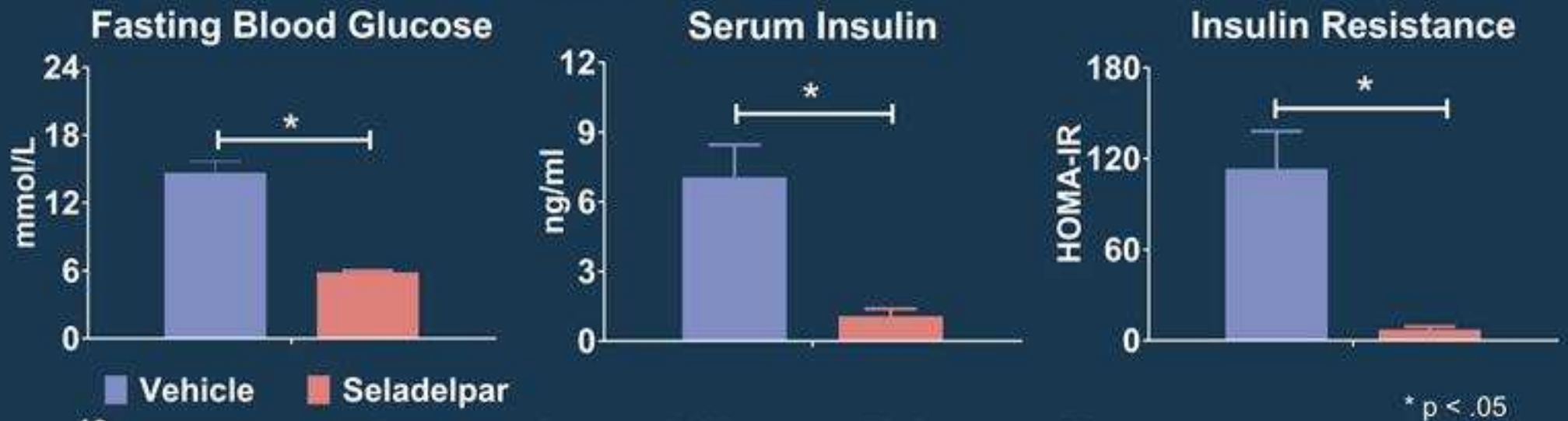
* p < .05

Seladelpar Increases Mitochondrial Fatty Acid Oxidation



* $p < .05$

Effects of Seladelpar on Glycemic Control



Evaluation of Seladelpar in the *foz/foz* NASH Model

Summary

- **Seladelpar reverses NASH, blocks fibrosis and provides multiple metabolic benefits**
 - Decreases inflammation
 - Macrophage infiltration and liver enzymes
 - Blocks inflammatory gene expression
 - Inhibits fibrosis
 - Strong reductions in collagen deposition
 - Reduced expression of fibrotic genes
 - Reduces hepatic lipid pools, free cholesterol and lipotoxic lipids
 - Improves fasting and prandial glucose
 - Reverses insulin resistance

CymaBay's Development Strategy for Seladelpar

- **Second-line therapy for Primary Biliary Cholangitis**
 - Anti-cholestatic activity and profile potential for best in class
 - Inhibition of bile acid and cholesterol synthesis
 - Anti-inflammatory
 - PRIME designation in EU
 - Phase 2 study (26 weeks) to select Phase 3 doses in progress
 - Interim results early 3Q
- **Results provide a strong rationale for development of seladelpar as a foundational therapy for NASH**
 - Planning for a Phase 2 proof-of-concept study in NASH
 - Discussing with FDA and thought leaders