



Caladrius Biosciences, Inc. is a clinical-stage biopharmaceutical company dedicated to the development of cellular therapies designed to reverse disease. We are developing first-in-class cell therapy products based on the finely tuned mechanisms for self-repair that exist in the human body. Our technology leverages and enables these mechanisms in the form of specific cells, using formulations and modes of delivery unique to each medical indication.

The Company's current product candidates include: **CLBS16**, the subject of both a recently completed positive Phase 2a study and a newly initiated Phase 2b study in the U.S. for the treatment of coronary microvascular dysfunction ("CMD"); **HONEDRA® (CLBS12)**, recipient of orphan designation for Buerger's disease in the U.S. as well as SAKIGAKE designation and eligible for early conditional approval in Japan for the treatment of critical limb ischemia ("CLI") and Buerger's disease based on the results of an ongoing clinical trial; **CLBS201**, designed to assess the safety and efficacy of CD34+ cell therapy as a treatment for diabetic kidney disease; and **OLOGO™ (CLBS14)**, a Regenerative Medicine Advanced Therapy ("RMAT") designated therapy for which the Company is in discussion with the FDA to finalize a Phase 3 protocol of appropriate and practical size and scope for a confirmatory trial in subjects with no-option refractory disabling angina ("NORDA").

CD34+ CELL THERAPY PIPELINE

PRODUCT/INDICATION	DEVELOPMENT STAGE	KEY MILESTONE TARGETS
CLBS16 CORONARY MICROVASCULAR DYSFUNCTION	FREEDOM PHASE 2B TRIAL (USA; ONGOING)	- Complete enrollment: 4Q2021 - Top-line data: 3Q2022
HONEDRA® (CLBS12) *SAKIGAKE DESIGNATED (JAPAN) CRITICAL LIMB ISCHEMIA + BUERGER'S DISEASE	REGISTRATION ELIGIBLE TRIAL (JAPAN; ONGOING)	- Complete enrollment: TBD - Top-line data: 2022 - J-NDA filing: 2022 - Approval: 2023
CLBS201 DIABETIC KIDNEY DISEASE	PHASE 2 (USA; INITIATION PENDING)	- File IND: 2Q2021 - Initiate enrollment: 3Q2021 - Complete enrollment: 2Q2022 - Top-line data: 4Q2022
OLOGO™ (CLBS14) *RMAT DESIGNATED NO-OPTION REFRACTORY DISABLING ANGINA	PHASE 3 (USA; INITIATION PENDING)	- Complete development: Pending FDA discussions completion

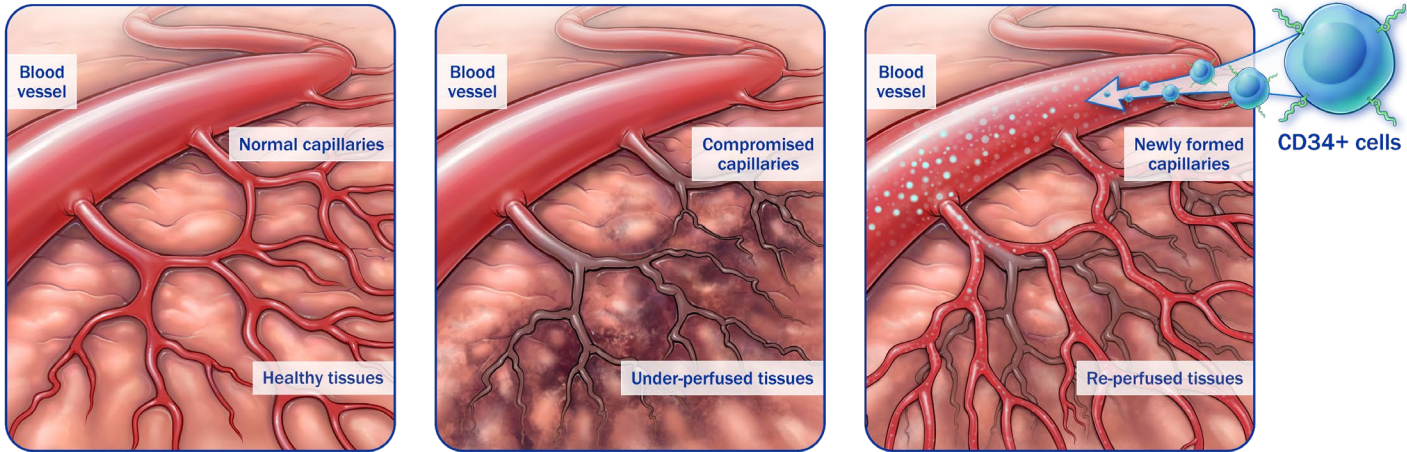
INVESTMENT HIGHLIGHTS

- CD34+ cell therapy platform yielding a multi-product development pipeline with 2 clinical programs having regenerative medicine "breakthrough" designation
- Proprietary field-leading technology in lucrative global indications backed by a strong IP portfolio
- Multiple potential value creating events in the next 12-24 months based on milestones across the pipeline
- Strong balance sheet; ~\$112 million in cash & investments (3/31/2021) with no debt and cash runway projected to fund operations for several years
- Seasoned management with noteworthy domain expertise along with big pharma and emerging biotech experience

MARKET SNAPSHOT

TICKER SYMBOL	CLBS
EXCHANGE	NASDAQ
52-WEEK PRICE RANGE	\$1.25 - \$4.89
SHARES OUTSTANDING (3/31/2021)	59.5 million
CASH & INVESTMENTS (3/31/2021)	~\$112 million
FISCAL YEAR-END	December 31

CD34+ CELL THERAPY PLATFORM



NORMAL MICROVASCULATURE

COMPROMISED MICROVASCULATURE

AUGMENTED MICROVASCULATURE

- Naturally occurring endothelial progenitor cells that re-establish blood flow to under-perfused tissues
- Possess pre-programmed pro-angiogenic and anti-inflammatory tissue repair properties

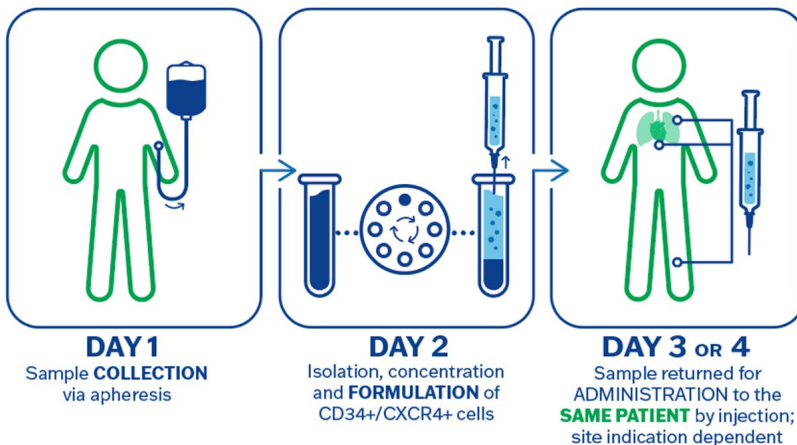
CD34+ cell therapy is extensively studied/clinically validated

- CD34+ cells have been studied clinically in a variety of ischemic disease indications by numerous investigators across many sites and countries
- CD34+ cells repeatedly demonstrated vascular repair in multiple organs
- Consistent and compelling results of rigorous clinical studies comprising >1,000 patients have been published in peer reviewed journals
- A single treatment has elicited durable therapeutic effect
- No cell-related adverse events reported to date

Caladrius' CD34+ cell process is rapid/economical/scaled

DAY -5 TO 0

GCSF mobilization of patient's CD34+ cells from the bone marrow to the peripheral circulation



- Drug induced mobilization eliminates need for surgical bone marrow aspiration
- No genetic manipulation or ex vivo expansion of cells
- Four days or less from donation to treatment
- Cost-of-goods an order of magnitude less expensive than CAR-T therapies

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