The Power of Information

July 7, 2017

OTCQB: GBSN

GREAT BASIN SCIENTIFIC

Regarding forward-looking statements

All statements in this presentation that are not statements of historical fact are forward-looking statements, including statements about any of the following: any projections of earnings, revenue, sales, profit margins, cash, working capital, or any other financial terms; the plans, strategies and objectives of management for future operations or prospects for achieving such plans; statements regarding new, existing or improved products, including but not limited to, expectations for sales and marketing, expectations for success of new, existing or improved products or government approval of new or improved products; future economic conditions or size of market opportunities; expected costs; statements of belief, including as to achieving 2017 and 2018 plans; expected regulatory activities and approvals, product launches, and any statements of assumptions underlying any of the foregoing.

Forward-looking statements are based on expectations and assumptions as of the date of this presentation and are subject to numerous risks and uncertainties, which could cause actual results to differ materially from those described in the forward-looking statements. These risks and uncertainties include the following: our limited capital resources and limited access to financing; the discretion of regulatory agencies to approve or reject new, existing or improved products or to require additional actions before approval or to take enforcement action; research and developments efforts will not be successful or may be delayed in delivering products for launch; the purchasing patterns of our customers; and the willingness of hospitals and laboratories to adopt a new or improved product.

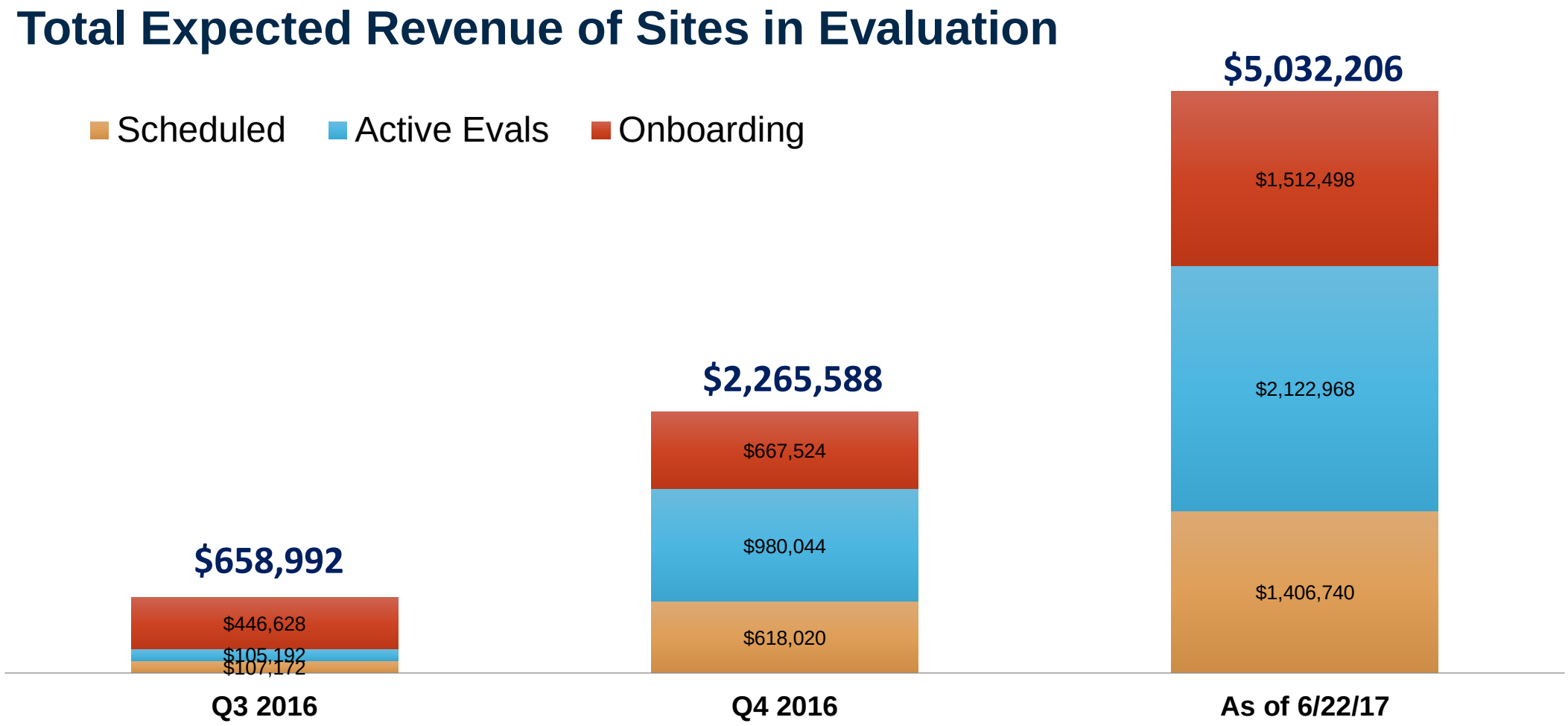
Important additional factors that could cause actual results to differ materially from those indicated by such forward-looking statements are set forth in the Company's Annual Report on Form 10-K for the year ended December 31, 2016 and in the Company's Quarterly Report on Form 10-Q for the quarter ended March 31, 2017, under the caption "Risk Factors," both of which are on file with the Securities and Exchange Commission and available on the Company's website, www.gbscience.com/investors. We disclaim any intention or obligation to update or revise any financial projections or forward-looking statements due to new information or events.

The Company

Low-Cost, Versatile Solution for Infectious Disease MDx Market

- We are the only provider of low- and mid-plex systems in the molecular diagnostics market for infectious disease
  - Low-cost, ASP-focused model improves the reimbursement result for customers, making our system more attractive than those of many of our competitors
- We focused on product menu and customer acquisition in 2015-2016
  - Menu of FDA-cleared assays grew from 2 to 6
  - Over 400 systems were placed, with 230+ customers using our solution
- We are focused on accelerating revenue growth in 2017-2018
  - New business pipeline exceeds $5.0 million, with an 82% historic win rate
  - We are introducing high-value panels that have greater gross margins
- We have restructured our capitalization and eliminated variable price instruments

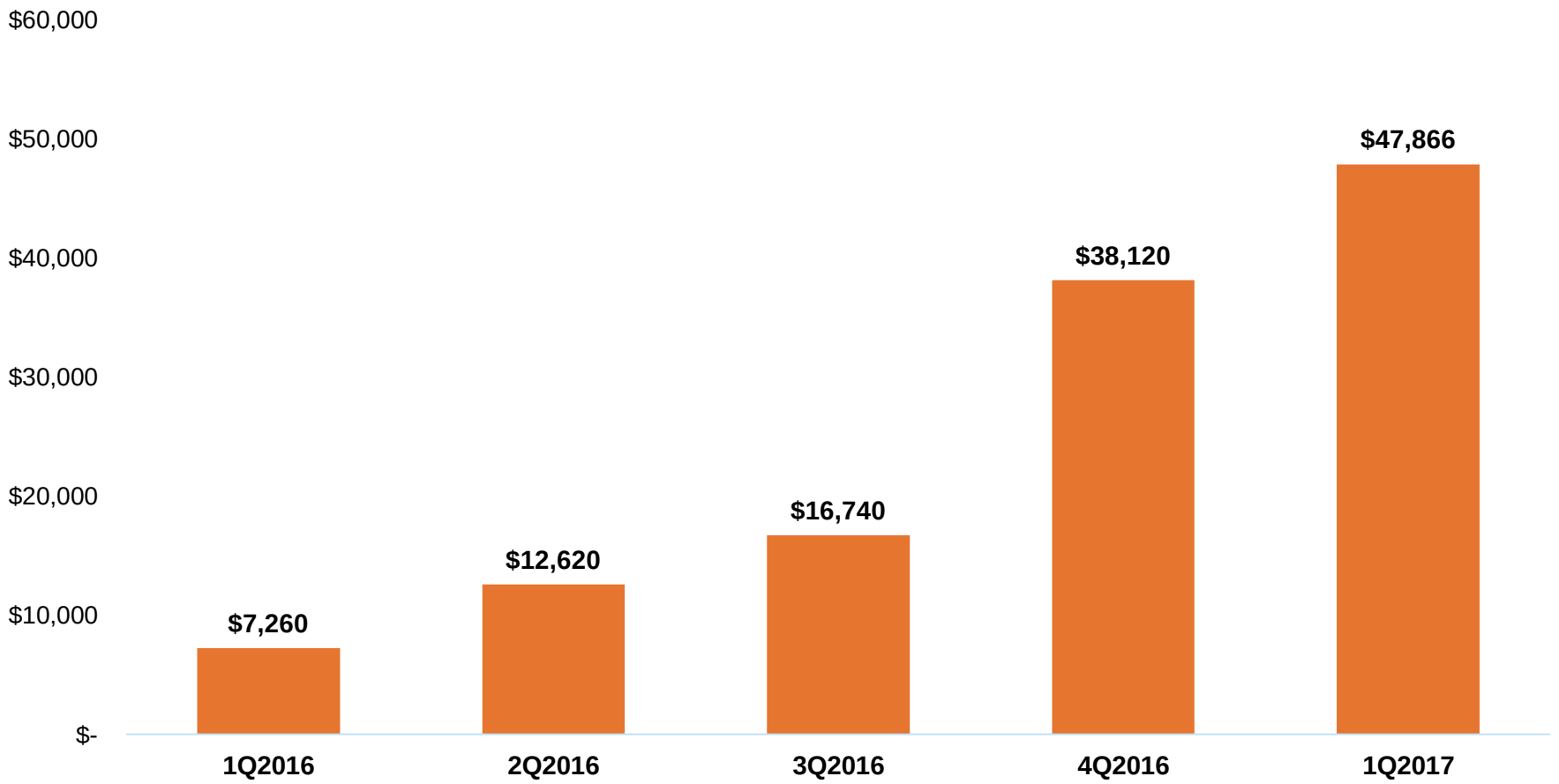
Expanded Menu Driving Pipeline of New Business



- Expected revenue from evaluations, scheduled evaluations and onboarding accounts are based on customer estimate of testing volume multiplied by the assay price quoted.
- Onboarding accounts have placed at least one paid order and stated their intent to use the GBSN assay for reporting patient results

Expected Average Customer Size has Increased

Rapidly Growing New Customer Annual Revenue Projections



Our Markets

MDx Testing Improves Patient Outcomes & Lowers Cost of Care

Example: Blood Sepsis

Problem

- Leading cause of morbidity & mortality
- Culture takes ~ 3 days for a result
- Increased cost, delayed treatment, higher patient risk

Solution

- MDx reduces Time to Result to 1 day
- Length of stay reduced by 6.2 days
- Average savings is ~ $7,000 per incident

Our Markets

Our Tests Target an Estimated $1.75B Addressable U.S. Market

Gastro Intestinal Distress	$800MM*
Blood Sepsis	$200MM
Whooping Cough	$250MM
Group B Strep (Neo-natal Meningitis)	$200MM
Products in Development Pipeline	$300MM+

* Company estimates

Our System

Great Basin's Affordable Solution Designed for Small-Medium Hospitals

Analyzer

- Works with all Great Basin assays
- Does not require special staffing to read results
- Small footprint – requires little bench space
- No CapEx, value proposition

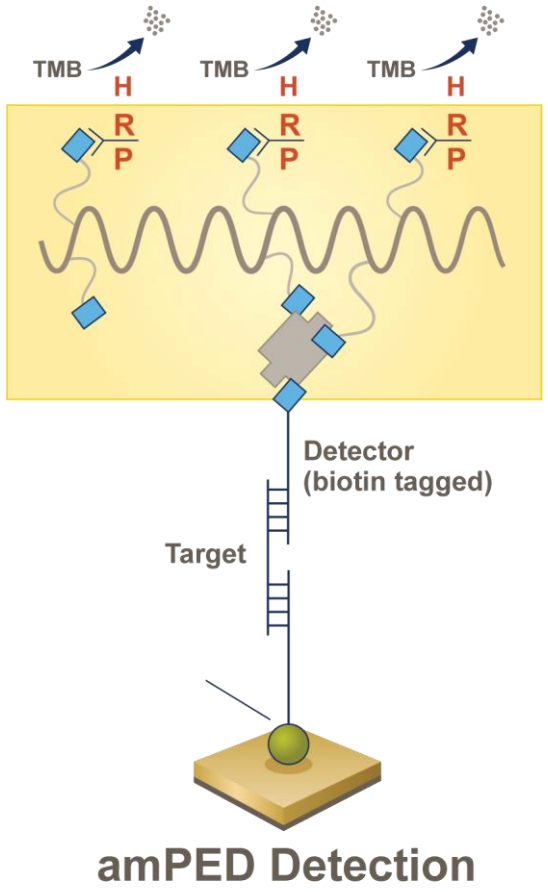
Cartridges

- Single-use, minimal steps to prep
- Up to 5 answers per specimen
- Same cartridge design for all assays
- Designed for cost and manufacturability

Our Technology

Highly Sensitive Multi-Plex Detection

- First U.S. Patent issued 2013
- $0.23 per chip
- Up to 64 target array
- Sensitivity for direct-from-specimen detection



Our Product Offering

Great Basin Product Menu

Commercially Available Products	Launch Date
• Toxigenic *C. difficile* Test	November 2012
• Group B *Streptococcus* Test	May 2015
• Shiga Toxin Direct Test	September 2016
• Staph ID/R Blood Culture Panel	October 2016
• Bordetella Direct Test	April 2017
Awaiting FDA Clearance	
• Stool Bacterial Pathogens Panel	Feb 2017 (Investigation Use Only)
In Development	**Expected Clinical Trial Start**
• CT/NG/TV Test	2018
• Stool Parasite Pathogens Panel	2018
• Candida Blood Infections Panel	2018
• SA Nasal Screen Test	TBD

The Competition

Only Great Basin Offers a Single Capital Solution vs. Requiring *Two* Capital Expenditures from *Two* Vendors

1-2 pathogen **tests** that answer: “Is it X?”

Lower Reimbursement
Lower Cost

- *C. diff*
- MRSA
- Sexually transmitted disease

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Meridian Bioscience, Inc.
Cepheid

5-25 pathogen **panels** that answer: “What is causing it?”

Higher Reimbursement
Higher Cost

- Diarrhea
- Blood sepsis
- Respiratory

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GenMark Dx
BIOFIRE DIAGNOSTICS

Market Dynamics

The Competitive Advantages of Mid-Plex over Mega Panels

Mid-Plex

- 3-6 pathogens
- Reasonable cost
- Single syndrome per panel (leverages empirical diagnosis)
- Cover 90%-95% of likely cause of disease
- Answers drive therapy

Mega Panels

- 10-25 pathogens in a single assay
- High cost
- Multi-syndromic (include more than one disease state)
- Contain obscure, rarely seen pathogens
- Not therapy oriented

The Mid-Plex to Mega Panel Difference

Stool Bacterial Pathogens Panel Competitive Analysis

Comparative features	GREAT BASIN SCIENTIFIC	Mega Panels
Targets	5 (Bacterial)	22 (Bacterial, Viral, Protozoa)
Panel pricing	**$60 - $75**	$120 - $130
Reimbursement	~$134 to $290	~$134 to $290*
2015 Payor rejection rate	**6.5%**	19.5 %+ **

*Mega-panel providers suggest their customers use CPT codes that allow for higher reimbursement rates. However, Great Basin's surveys of hospitals indicate a lack of success with that tactic, as well as a growing challenge by hospitals to get reimbursement adequate to cover the fully-burdened costs associated with running mega panels.

**Source: CodeMap and CMS

Market Dynamics

Growing Clinical and Payor Resistance to Larger Panels:

- **Palmetto Local Coverage Determination Draft**
  - Panel must be “reasonable and necessary”
  - Targets must represent a common syndrome (i.e. truly syndromic)
  - There must be broad applicability (pathogens found in only select populations not appropriate)
  - Must aid physician in directing therapy; not just identify what pathogen is present
    - Reimbursement not appropriate for epidemiological studies
    - Reimbursement not appropriate for confirmatory testing or screening

“[For] most patients, negative test results for common pathogens should precede testing for uncommon pathogens in the interest of controlling the cost of testing for both the patient and the institution.”

-Dr. Alexander McAdam, MD, PhD, Harvard Med School and Boston Children’s Hospital JCM, 2015 53:10

“A panel that includes pathogens that are very rare, or a panel in which all pathogens do not cause overlapping clinical syndromes, or when some pathogens are found only in specific patient populations (immunocompromised patients) is not reasonable and necessary.”

-Palmetto GBA (Medicare contractor), Local Coverage Determinations (LCDs), June 14, 2017, www.cms.org

The Great Basin Mid-Plex Advantage

Great Basin Mid-Plex Meets Palmetto and Clinical Preference

- ✓ Contains only targets likely after physician provides empirical diagnosis
- ✓ Targets represent a single syndromic group
- ✓ No confusing, statistically unlikely or unnecessary information
- ✓ Answers limited to those that guide patient therapy
- ✓ Reimbursement above cost of test
- ✓ Lower rate of payment denial post-testing

The Winning Solution

Great Basin's Low/Mid-Plex Advantage

	GREAT BASIN SCIENTIFIC	Meridian Bioscience, Inc.	Cepheid	GenMark Dx	BIOFIRE	Nanosphere
Sample to Result	**Yes**	No	Yes	Yes	Yes	No
Menu	**Low-Plex Mid-Plex**	Low-Plex	Low-Plex	Mega-Plex	Mega-Plex	Low-Plex Multi-Plex
CapEx Required	**No**	No	Yes	Yes	Yes	Yes

The Solution

What our customers are saying

A panel like this is what we need for a limited micro staff in terms of numbers and experience reading culture plates. [SBPP] will primarily do away with our stool bench.

- Micro Biology Supervisor

We actually had 2 patients this past week which were Negative by the Meridian kit. One was a child and the other an adult. We ran your assay [STEC] and got Positive results for both. How timely. Glad we switched.

-Microbiology Supervisor

I love this system. So easy to run and easy to adopt since we don't have capital equipment to purchase. We'll use every test you have.

- Lab Director

My techs were unanimous the Great Basin assays were easier to use than our current platform for CDIFF, GBS and MRSA.

- Microbiology Supervisor

Commercially-Focused Management Team

A Track Record of Success

Ryan Ashton **President, CEO & Director**	• Operational, transactional & commercialization expertise • Prior: CEO of Printelligent; VP Sales/Marketing of Inari; Sr. VP Sales/Marketing of Megahertz
Rob Jenison **CTO & SVP of R&D**	• Creator of molecular diagnostic testing platforms, expertise in clinical microbiology • Prior: Assoc. Dir/R&D – Inverness Medical/Biostar; Sr. Researcher & Scientist – NexStar & Isis Pharmaceuticals
Jeff Rona **CFO**	• Financial, transactional & business development expertise • Prior: CBO – GlobeImmune; CFO – AlgoRx Pharmaceuticals; Dir/Finance – Antigenics; IB – UBS Warburg
Sandra Nielsen **SVP Sales, Marketing & HR**	• Product portfolio, commercialization, sales strategy, branding & communications expertise • Prior: Sr. Marketing positions at Pearson, Omniture, iBAHN, Inari, Viewpoint

Board of Directors

Diversified and Experienced

David Spafford **Executive Chairman**	• Founding investor of GBSN; Chairman since inception • Founder track record, operations and transaction expertise • Co-founder of Megahertz, sold to US Robotics for $450M; angel investor & philanthropist.
Ron Labrum **Director**	• GBSN director since 2014 • Private equity partner at Linden Capital Partners – investing in healthcare & life sciences • Past CEO of several HC companies; current director of Wright Medical Group (Nasdaq: WMGI)
Sam Chawla **Director**	• GBSN director since 2014 • Portfolio manager Perceptive Advisors – healthcare-focused investment fund • UBS Securities & Credit Suisse IB experience; current director of VBI Vaccines (Nasdaq: VBVI)
Kirk Calhoun **Director**	• GBSN director since 2015 • Audit and accounting expertise; deep knowledge and experience in pharmaceutical industry • Current director of Ryerson Holding Corp (NYSE:RYI) & NanHealth (OTC: NH) + 3 private cos.

Capital Structure

Restructured Capitalization

- Common shares & equivalents outstanding–11.6MM (incl. shares from Series K Warrants)
- No variable priced instruments
- $20.3 million Series A Convertible Note
  - Convertible at $3.00 a share, no resets or variable rate conversions, 6.8 million shares
  - Not convertible for 6 months from issuance (April 17, 2017)
- Other debt of $1.8MM, including $0.1MM Series B Convertible Note, convertible at $1.10
- Enterprise value of approximately $26.7MM
- Series J warrants are exercisable into 22.4MM shares until August 21, 2017
  - Exercise price of $0.30 (subject to adjustment by the Company)

Investment Highlights

Summary

- One of only 4 pure plays in infectious disease molecular diagnostics market
- Expanded menu and installed customer-base provide a strong foundation to accelerate revenue growth
- $5.05MM New Business Pipeline with historical 82% new customer conversion rate validates our competitive advantage
- Our no capex model, exceptionally low-ASP and strong reimbursement profile can make testing profitable for our customers' labs
- Only provider of low- and mid-plex sample-to-result solution—only one system needed to meet all MDx needs
- Restructured capitalization/no variable priced instruments

Thank you

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