CNS Pharmaceuticals

NASDAQ: CNSP

October 2024

Forward Looking Statements

This presentation incorporates information from materials filed with the SEC and contains forward-looking statements. All statements contained herein other than statements of historical fact, including statements regarding our future results of operations and financial position, our business strategy and plans, and our objectives for future operations, are forward-looking statements. The words “believe,” “may,” “will,” “estimate,” “continue,” “anticipate,” “intend,” “expect,” and similar expressions are intended to identify forward looking statements. We have based these forward-looking statements largely on our current expectations and projections about future events and trends that we believe may affect our financial condition, results of operations, business strategy, short-term and long-term business operations and objectives, and financial needs.

These forward-looking statements are subject to a number of risks, uncertainties and assumptions, including those described in the “Risk Factors” section of most recent Form 10-K as updated by any subsequent Form 10-Q filings. It is not possible for our management to predict all risks, nor can we assess the impact of all factors on our business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in any forward-looking statements we may make. In light of these risks, uncertainties and assumptions, the future events and trends discussed in this presentation may not occur and actual results could differ materially and adversely from those anticipated or implied in the forward looking statements.

Company Overview

Lead Program: Berubicin, a Novel Anthracycline

- First drug of its kind to appear to cross the blood brain barrier
- Fully-enrolled **designed-to-be-pivotal** clinical trial with top-line data 1st half 2025
- No evidence of cardiotoxicity in hundreds of patients
- Developed at **MD Anderson Cancer Center – Ranked #1 Canter Center**

Pipeline Expansion with In-License of TPI 287

- Late-stage, novel, blood brain barrier permeable abeotaxane for treatment of brain malignancies
- Studies in over 350 patients to date, including clinical trials as monotherapy and combination with temozolomide and bevacizumab
- Orphan Designation for 7 years US marketing exclusivity

CNS Pharmaceuticals

A Focused and Targeted CNS Oncology Pipeline

Program	Indications	Preclinical	Phase 1	Phase 2	Phase 3	Highlights
Berubicin	Glioblastoma Multiforme (GBM)	**Potentially Pivotal**				• Study Fully Enrolled • Topline Data Expected H1 2025
TPI 287	Glioblastoma Multiforme (GBM)					• Recently in-licensed • Plan to engage with regulators to design potential registration study

CNS Pharmaceuticals

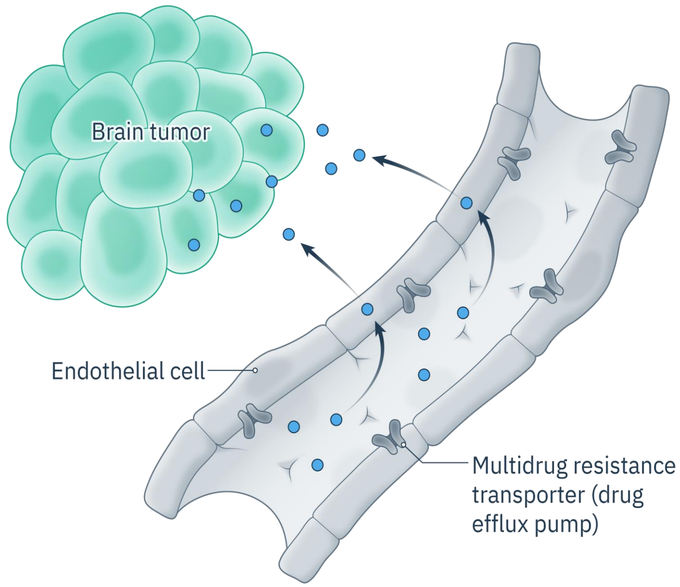
Glioblastoma Multiforme (GBM)

Most Aggressive, Deadly and Currently Incurable Brain Cancer

12 – 18 MONTHS
Average life expectancy[1]

>50,000
New cases in the 8 Major Markets[2] each year[3]

$1B+
Global annual sales TMZ
Only approved first line drug (off patent 12 years)



The Blood Brain Barrier Limits the Ability of Cancer Therapeutics to Gain Access to Brain Tumors

- Passive: Tight junctions protect the brain from harmful substances while allowing essential nutrients to pass through
- Active: Efflux transporters actively pump many drugs back into the bloodstream, limiting concentration in the brain

CNS Pharmaceuticals

Berubicin: Targeted Chemotherapy Results

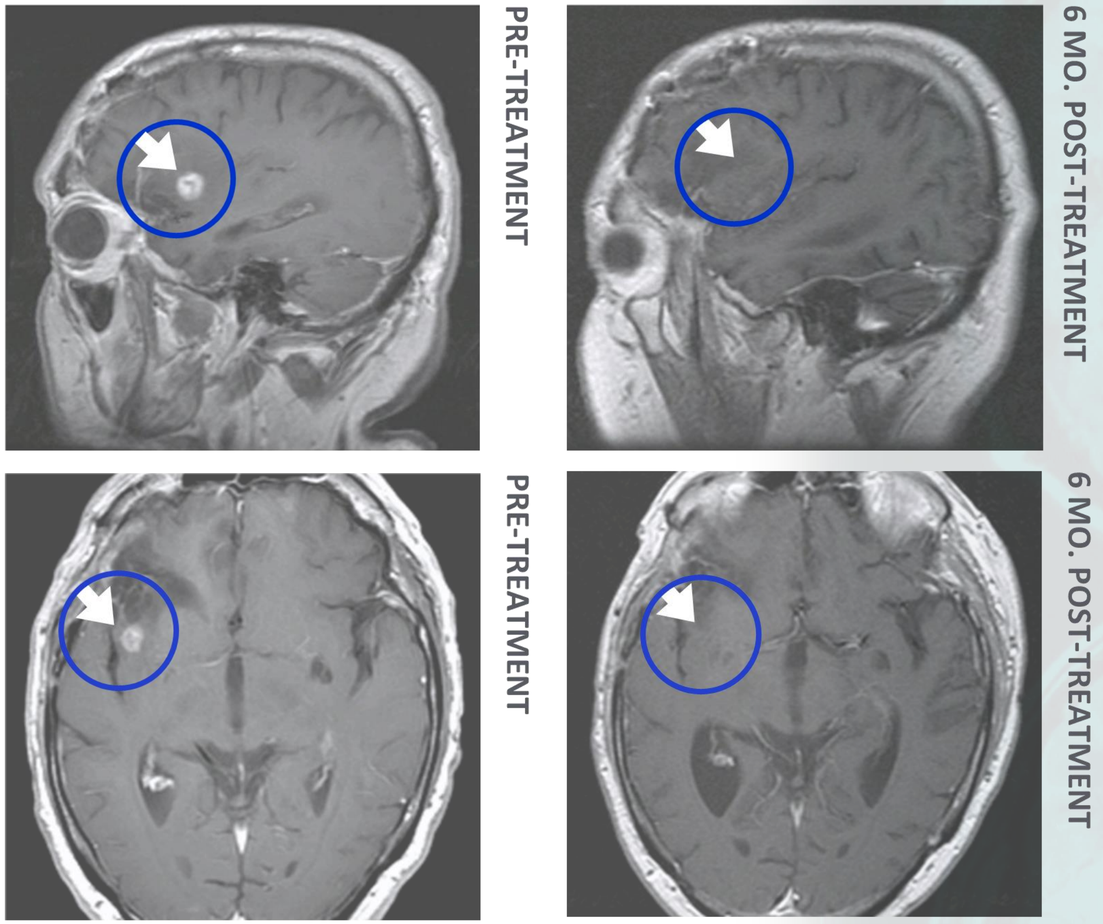
44%
of subjects demonstrated “stable disease or better”

Two partial responses with up to **80%** tumor shrinkage

Extremely well tolerated with a good safety profile **(no off-target toxicities)**

DURABLE COMPLETE RESPONSE (CR) - One subject remains cancer-free ~17 years following treatment

Complete Response at 6-month Post Treatment*



* This does not always mean the cancer is cured. Also called a complete remission: www.cancer.gov/publications/dictionaries/cancer-terms/def/complete-response

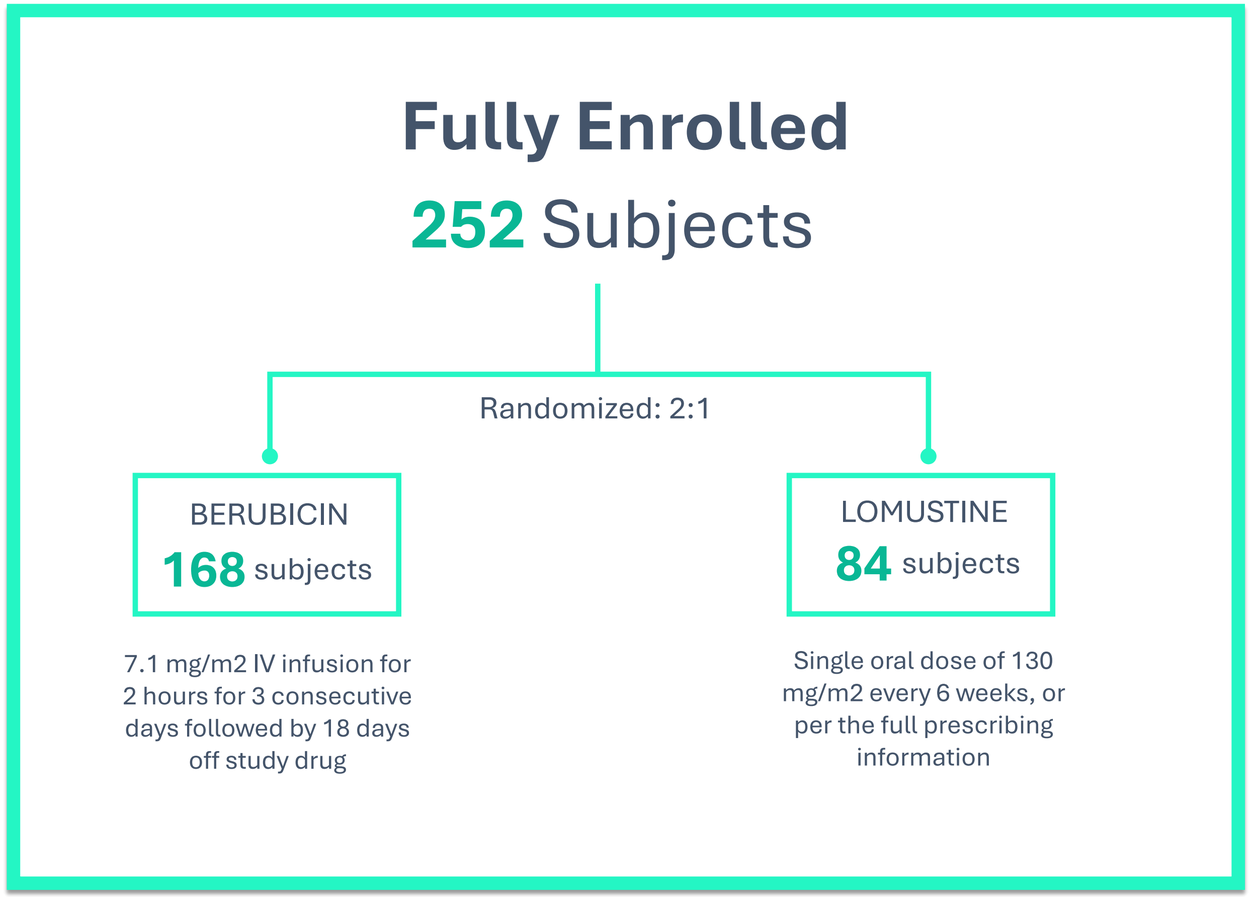
CNS Pharmaceuticals

De-Risked

- ✓45 Centers in 8 countries
- ✓All 252 patients dosed
- ✓All drug supply in hand
- ✓Pivotal endpoint 6-12 months

Independent Data Safety Monitoring Board (DSMB) Recommended on 12/18/24 Continuation of Clinical Trial of Berubicin Without Modification

Phase 2/3 Clinical Trial Data Expected 1st Half 2025



A Much Bigger Story beyond GBM

INDICATION	PATIENT POPULATION	EST. U.S. NEW PATIENTS ANNUALLY	COMMENTS
Primary Brain Tumors	**Relapsed High Grade Gliomas**	**15,000 $2.3B Market in 2022**	**Existing data in this population**
High Grade Gliomas in Pediatrics	High Grade Gliomas	6,000	High Grade Gliomas are the most common malignant brain tumors in children, and represent the greatest cause of cancer-related deaths under the age of 19
Brain Metastases - Combination with Radiation Therapy	Metastatic Breast Cancer	45,000	Anthracyclines are highly effective against breast cancer and historically used first line Growing trend to treat Her-2+ women with Herceptin without anthracycline to minimize cardiotoxicity Success could drive off-label use in breast cancer patients at risk of developing brain metastases
Primary CNS Lymphoma (PCSNL)	2nd Line After Methotrexate Failure	1,200	Accelerated approval opportunity (no 2nd line therapy) Anthracycline sensitive Small population would make trial a challenge

CNS Pharmaceuticals

Intellectual Property

Orphan Drug

Orphan Drug Designation gives marketing exclusivity in US market for 7-years from approval

New Chemical Entity

CNS is exploring potential new patent filings covering manufacturing and other areas and additional Orphan indications

Upcoming filing after final data in the E.U. for Orphan Drug Designation may provide 10-years of protection in Europe

CNS Pharmaceuticals

TPI 287

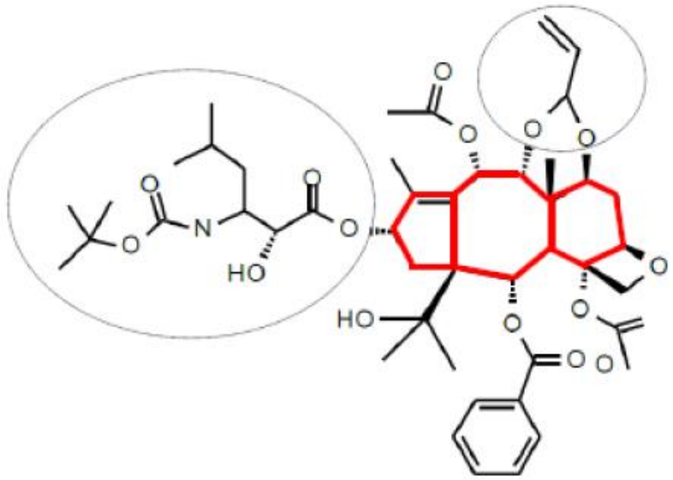
Late Stage, Novel Blood Brain Barrier Permeable Abeotaxane for Treatment of Brain Malignancies

TPI 287: Targeting GBM

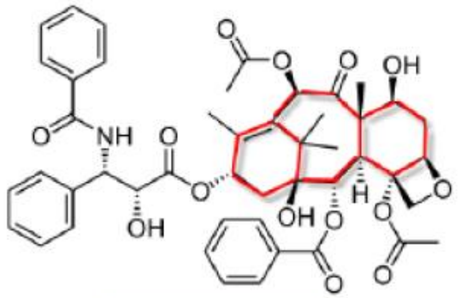
Has Shown Efficacy Data and Safety Profile in Prior Trials

Studied in Over 350 Patients to Date

- Evaluated in multiple Phase 1 and Phase 2 studies with favorable efficacy data in GBM in combination with bevacizumab
  - **60% overall response rate (3 CR; 9 PR)**
  - **96% disease control rate (CR+PR+SD)**
  - **13.4 mo. median and 64% 1-year OS**
- Engaging with regulators to advance into registrational study as quickly as possible
- Orphan Drug Designation with 7 years market exclusivity in the US



TPI 287



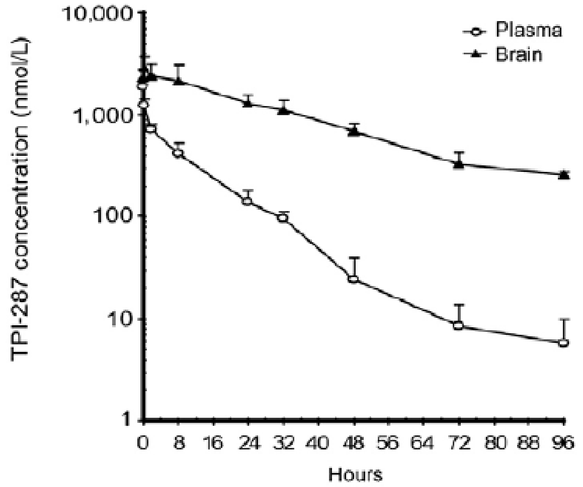
paclitaxel

Readily Penetrates the Blood Brain Barrier in Animal Models

	COMPOUND	Blood ug*hr/ml	Brain ug*hr/g	Brain:Blood
Wild-type	paclitaxel	3.2	1.6	0.5
	docetaxel	8.7	2.5	0.3
	TPI 287	16.8	65.9	3.9
Pgp knock-out	paclitaxel	4.7	18.6	4.0
	docetaxel	9.0	15.4	1.7
	TPI 287	N/A	N/A	

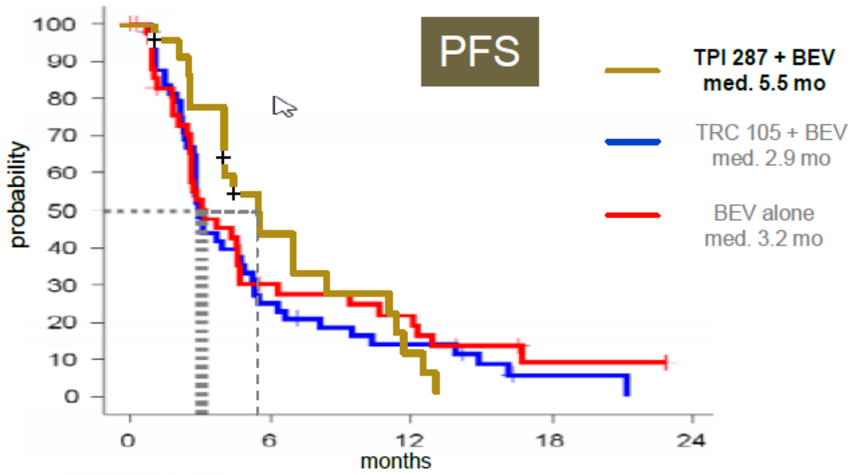
Single-dose IV bolus:
paclitaxel dosed 10 mg/kg AUC cal. 0-8 hr blood, 0-12 hr. brain (*Clin Can Research.* 9:2849. 2003).
docetaxel dosed 33 mg/kg AUC cal. 0-8 hr blood, 0-12 hr. brain (*Eur J Can.* 40:1269. 2004).
TPI 287 dosed 20 mg/kg AUC cal. 0-96 hr blood and brain (*Mol Can Ther.* 11:1959. 2012).

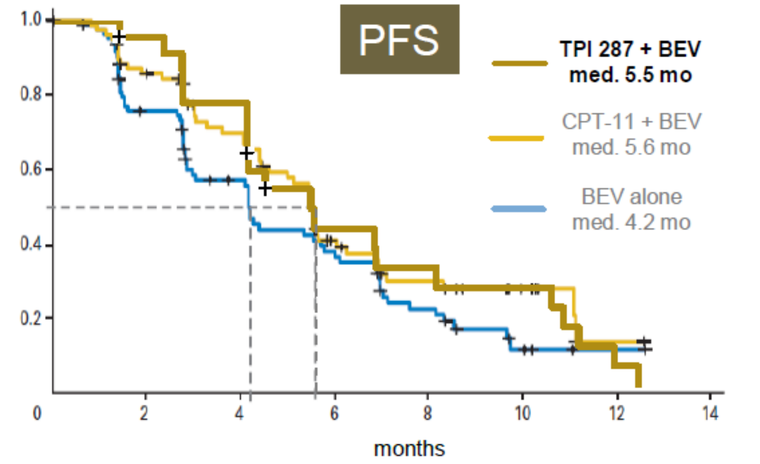
~ 64x greater concentration in brain vs plasma 4 days after single dose in mouse.

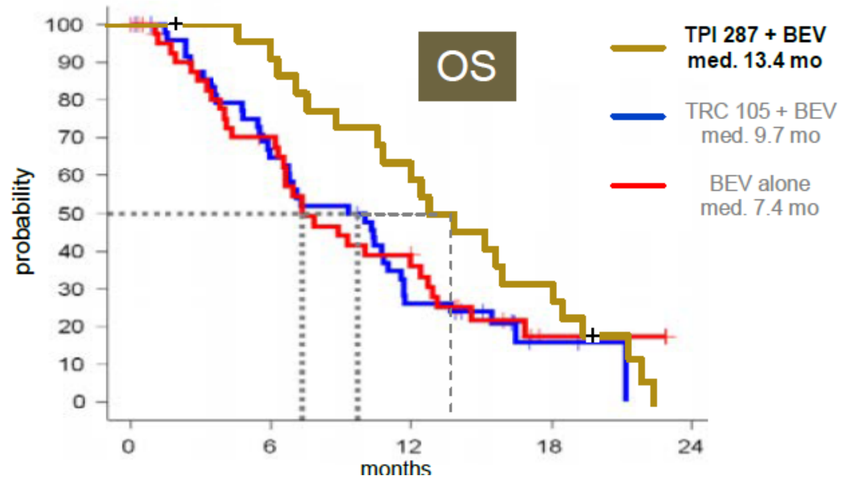


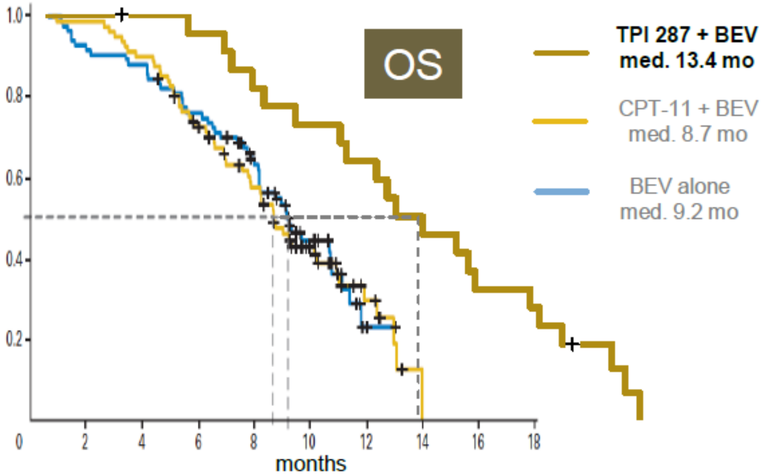
CNS Pharmaceuticals

Improved GBM Survival In Combination with Bevacizumab









* Graphs represent aggregate data from multiple studies

Management Team

John M. Climaco, Esq

PRESIDENT & CHIEF EXECUTIVE OFFICER

Twenty-one years experience managing the operations, strategies and finances of public and private lifescience companies.

Christopher S. Downs, CPA

CHIEF FINANCIAL OFFICER

Nearly 20 years of finance and investment banking experience primarily in the healthcare industry

Sandra L. Silberman, MD, PhD

CHIEF MEDICAL OFFICER

Board certified hematologist/medical oncologist with extensive experience in clinical development of novel therapies for the treatment of cancer. Frm Head Global Clinical Development at Novartis.

Donald Picker, PhD

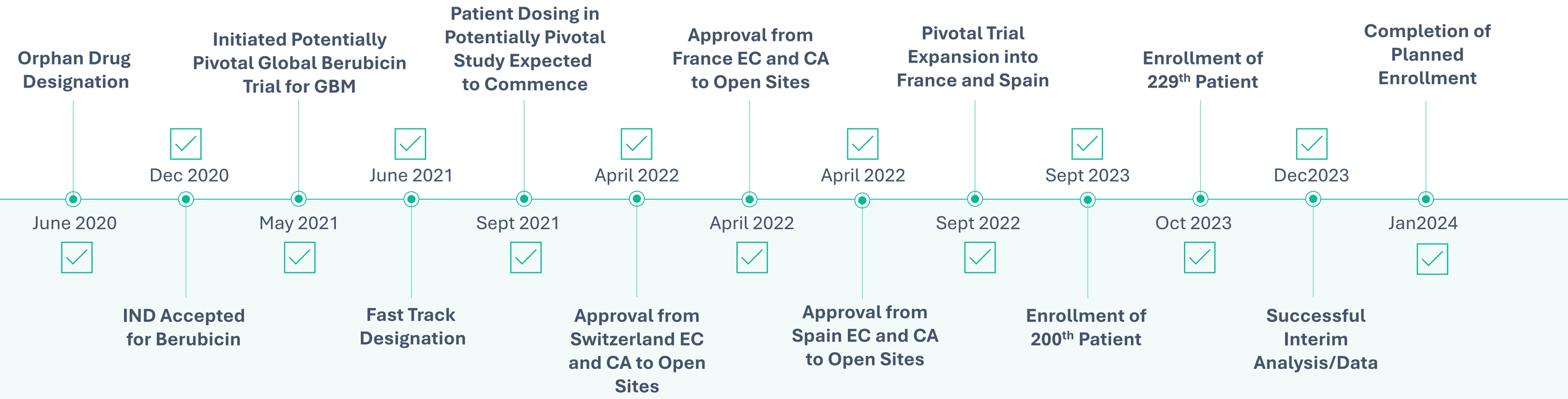
CHIEF SCIENTIFIC OFFICER

Over 35 years of drug development experience and responsible for the development of Carboplatin, one of the world's leading cancer drugs, acquired by Bristol-Myers Squibb and with annual sales of over $500 million.

CNS Pharmaceuticals

Proven Execution and Milestones

Berubicin Development Program



Next Steps	Target Topline Results from Potentially Pivotal Study	H1 2025

Investment Highlights

Lead Program: Berubicin, a Novel Anthracycline

- First drug of its kind to appear to cross the blood brain barrier
- Fully-enrolled **designed-to-be-pivotal** clinical trial with top-line data 1st half 2025
- No evidence of cardiotoxicity in hundreds of patients
- Developed at **MD Anderson Cancer Center – Ranked #1 Canter Center**

Pipeline Expansion with In-License of TPI 287

- Late-stage, novel, blood brain barrier permeable abeotaxane for treatment of brain malignancies
- Studies in over 350 patients to date, including clinical trials as monotherapy and combination with temozolomide and bevacizumab
- Orphan Designation for 7 years US marketing exclusivity

CNS Pharmaceuticals

CNS Pharmaceuticals

Investor & Media Relations:
JTC Team, LLC
Jenene Thomas
908.824.0775
CNSP@JTCIR.com

NASDAQ: CNSP