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Zacks Small-Cap Research

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CytoSorbents Corporation (NASDAQ: CTSO)

CTSO: CytoSorbents reports 1st quarter 2026 results and updates investors on the DrugSorb-ATR De Novo submission to the FDA.

Utilizing a DCF valuation process containing conservative estimates combined with other valuation methodologies, we believe CTSO could be worth **$5.00** per share.

Current Price (5/20/26)	$0.47
Valuation	**$5.00**

OUTLOOK

CytoSorbents is commercializing its E.U. approved CytoSorb blood purification technology to treat life-threatening conditions in the intensive care unit and cardiac surgery. The company also seeks U.S. and Canadian approval of a second product, DrugSorb-ATR, to reduce perioperative bleeding risk in patients on blood thinners in cardiac surgery. After FDA denial in April 2025, the company plans to submit a new De Novo application to the FDA in late 2026 or early 2027. Based on $37.1 million in high margin 2025 revenue and the DrugSorb-ATR potential in 2027, we believe CTSO stock to be significantly undervalued at this time.

SUMMARY DATA

52-Week High	**$1.61**
52-Week Low	**$0.60**
One-Year Return (%)	**23.7**
Beta	**1.33**
Average Daily Volume (sh)	**112.8**
Shares Outstanding (mil)	**62.5**
Market Capitalization ($mil)	**$45.0**
Short Interest Ratio (days)	**N/A**
Institutional Ownership (%)	**36**
Insider Ownership (%)	**7.0**
Annual Cash Dividend	**$0.00**
Dividend Yield (%)	**0.00**
5-Yr. Historical Growth Rates	
Sales (%)	**24.9**
Earnings Per Share (%)	**N/A**
Dividend (%)	**N/A**
P/E using TTM EPS	**N/A**
P/E using 2026 Estimate	**N/A**
P/E using 2027 Estimate	**N/A**

Risk Level	**High**
Type of Stock	**Small-Growth**
Industry	**Medical Device**

ZACKS ESTIMATES

Revenue
(in millions of $)

	Q1 (Mar)	Q2 (Jun)	Q3 (Sep)	Q4 (Dec)	Year (Dec)
2023	$7.9 A	$8.1 A	$7.8 A	$7.3 A	$31.1 A
2024	$9.0 A	$8.8 A	$8.6 A	$9.2 A	$35.6 A
2025	$8.7 A	$9.6 E	$9.5 A	$9.2 A	$37.1 A
2026	$8.9 A	$9.3 E	$9.4 E	$9.6 E	$37.2 E

EPS / Loss Per Share

	Q1 (Mar)	Q2 (Jun)	Q3 (Sep)	Q4 (Dec)	Year (Dec)
2023	-$0.17 A	-$0.14 A	-$0.21 A	-$0.12 A	-$0.64 A
2024	-$0.11 A	-$0.08 A	-$0.05 A	-$0.14 A	-$0.38 A
2025	-$0.02 A	-$0.06 A	-$0.05 A	-$0.09 A	-$0.13 A
2026	-$0.08 A	-$0.05E	-$0.04 E	-$0.03 E	-$0.20 E

Quarterly revenues may not equal annual revenues due to rounding. Quarterly EPS may not equal annual EPS due to rounding, dilution, or intangibles.

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WHAT'S NEW

Source: CytoSorbents investor presentation

1st Quarter 2026 Financial Results

On May 13, 2026, the company announced 1st quarter 2026 financial and operating results.

In the 1st quarter, revenues increased 2.0% to $8.9 million compared to the prior year period. Direct sales outside of Germany grew revenues 13.0%. Distributor sales were flat year-over-year, as progress across several territories was offset by delayed distributor orders of approximately $500,000 in certain areas of the Middle East and neighboring regions due to the current Iran conflict.

Gross margin decreased to 69.2% in the quarter compared to 71.1% in the 1st quarter of 2025. This was primarily driven by the intentional reduction of production volumes with the goal of lowering inventory levels and improving working capital.

Operating loss was ($3.0) million, an improvement from an operating loss of ($3.9) million in the prior year period. Net loss was ($5.1) million or ($0.08). Adjusted net loss, which excludes non-cash changes in foreign currency transactions and stock compensation, was ($3.4) million or ($0.05) per share, compared to an adjusted net loss of ($3.7) million or ($0.06) per share in the 1st quarter of 2025.

The adjusted EBITDA loss, which excludes the impact of non-cash changes in foreign currency transactions and non-cash stock compensation, was ($2.2) million compared to a loss of ($2.7) million in the 1st quarter of 2025.

Total cash balances were $6.4 million on March 31, 2026, compared to $7.8 million as of December 31, 2025. Total debt was approximately $17.0 million.

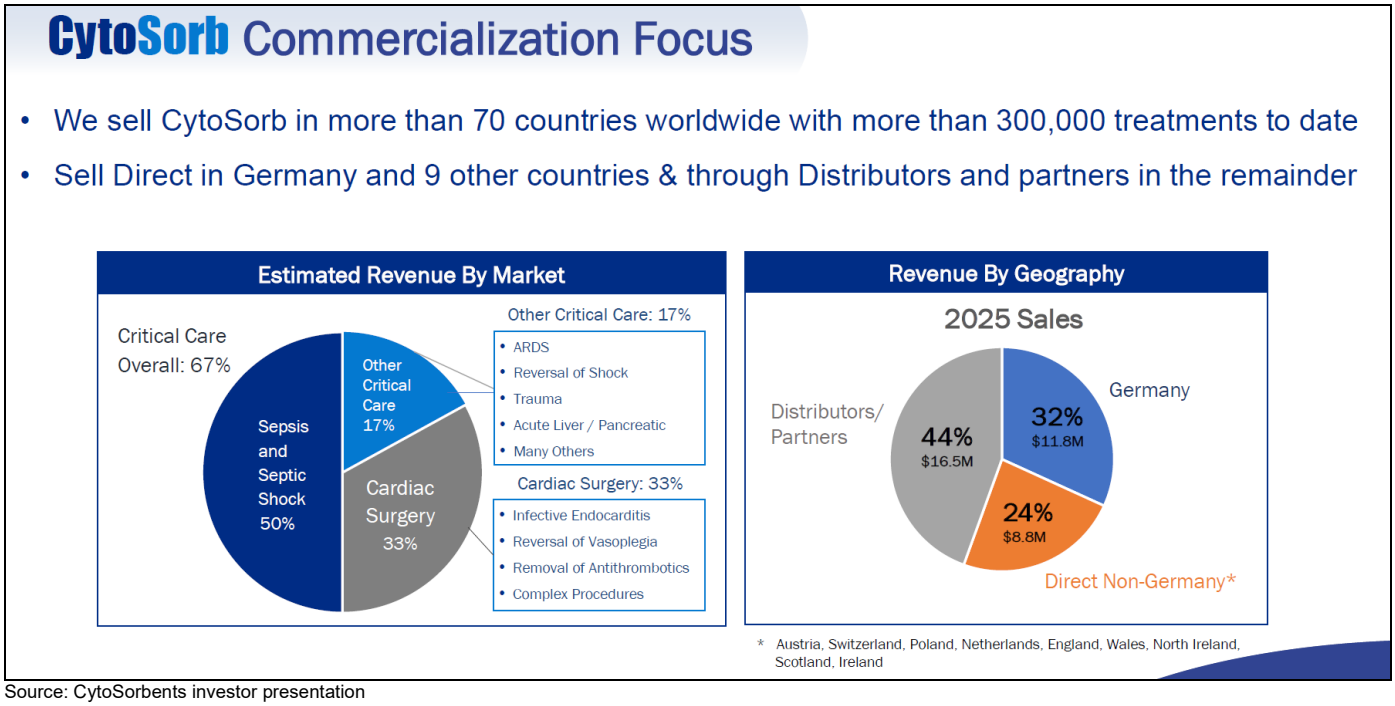
Workforce and cost reduction program has lowered our cash burn, and we are continuing to lower operating and production spend in 2026

- $6.4 million in cash, cash equivalents and restricted cash* (3/31/26) compared to $7.8 million (12/31/25)
- $1.1 million cash burn, net of $0.3 million of restructuring-related payments in the quarter
  - $1.3 million improvement in net working capital including sequentially lower inventory and accounts receivable
- Continuing to cut costs and drive improvements which we believe will support our goal of achieving operating cash flow breakeven in the second half of the year

Source: CytoSorbents investor presentation

In the 4th quarter of 2025, the company implemented a strategic workforce and cost reduction program which reduced headcount by 10% while also lowered expenses and realigned operating and production

spend. These production efficiencies resulted in an increased inventory buffer which enables a reduction in 2026 production expenditures which should help reduce the cash burn this year. CytoSorb still anticipates achieving operating cash flow breakeven in the 2nd half of 2026 while maintaining adequate cash balances.



Source: CytoSorbents investor presentation

DrugSorb®-ATR Regulatory Update

In January 2026, the company had a formal pre-submission meeting with the FDA and continued to actively engage with the FDA to clarify and confirm the requirements for a new De Novo submission (see below for details and background on DrugSorb-ATR regulatory events). Based on these interactions, the FDA has requested additional mechanistic data to be included alongside of the previously requested analysis of real-world evidence that was intended to support the De Novo standard that "probable benefit exceeds probable risk" within a new De Novo submission. FDA has already acknowledged the safety of DrugSorb-ATR for this application, hence a low probable risk.

The request for additional mechanistic data typically means the FDA wants more evidence explaining how the device works biologically to corroborate the observed positive clinical effect. The blood thinning drug Brilinta works as an anti-platelet drug that prevents platelets from sticking to each other, thereby preventing blood clotting. The presumed mechanism of action of DrugSorb-ATR is to remove the drug and reduce the inhibitory effect on platelets. It is generally well-accepted that the clinical effect of a drug or device is what is critical in the treatment of patients. Many FDA approved drugs and devices with a clear clinical benefit have been approved without a clear mechanism of action.

The company is currently evaluating various options to produce the additional mechanistic data on an expedited basis and expects to schedule another pre-submission meeting with the FDA, if needed, to discuss and align on the proposed approach. Once alignment is achieved, the company anticipates completing the required work and submitting a new De Novo application in late 2026 or early 2027.

This submission timeline is later than previously expected, however, the company now has a clearer direction and is committed to obtaining the new information and filing a new De Novo submission as soon as reasonably possible. Following submission, a regulatory decision would generally be expected within

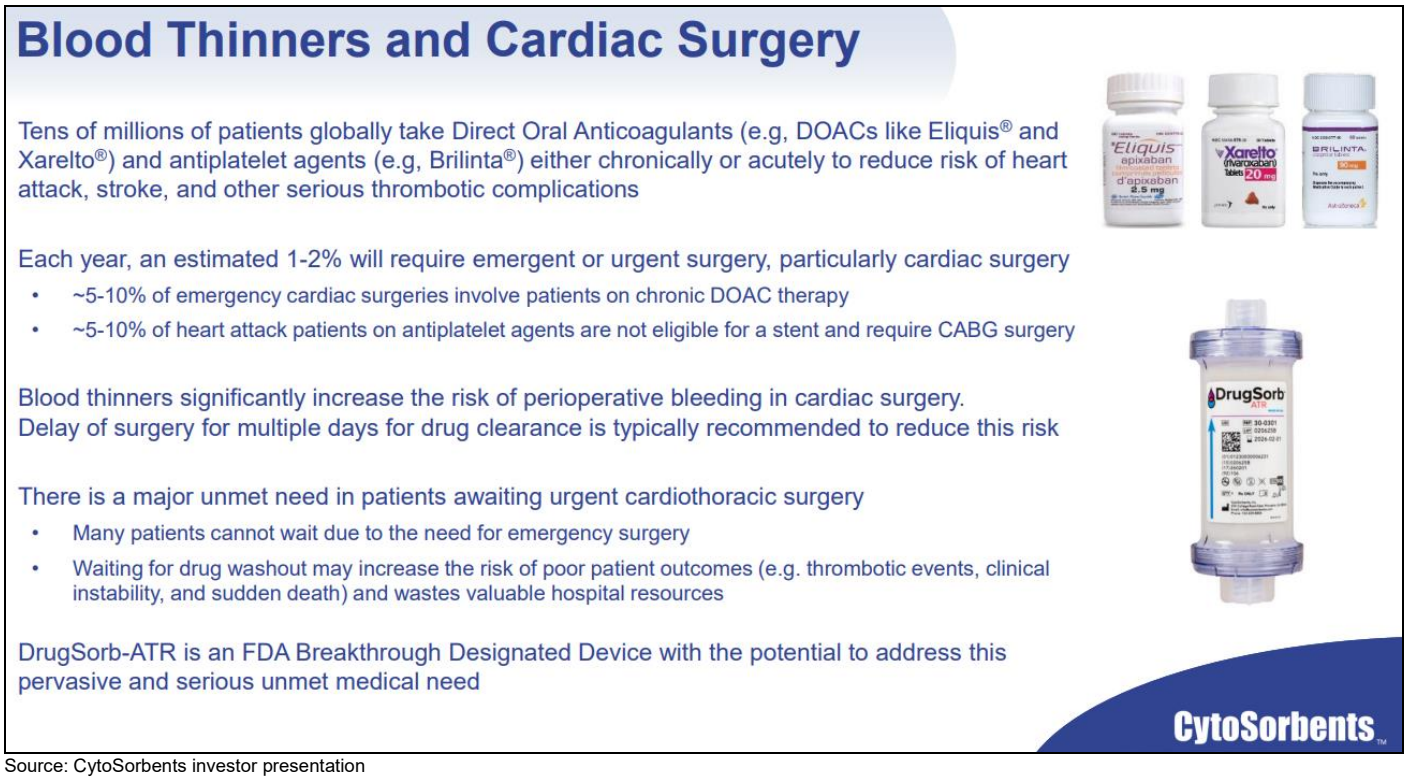
the FDA's targeted 150-day MDUFA review timeline, although the actual review period may be shorter or longer depending on the nature and extent of interactive review questions from the FDA.

In the meantime, the U.S. and Canadian pivotal STAR-T randomized, controlled trial results have now been published in the Journal of Thoracic and Cardiovascular Surgery (2026), which is the leading peer-reviewed cardiothoracic surgery journal in the U.S. The authors summarized the results in the graphical abstract and concluded in the central message of the article that, *"Intraoperative DrugSorb-ATR use for ticagrelor removal is safe and can reduce the severity of bleeding after isolated CABG in patients operated within 2 days of drug discontinuation."*

DOAC Update: A Potential Parallel Path to DrugSorb-ATR FDA Marketing Approval

CytoSorbents is also accelerating its strategy to pursue an FDA indication for its DrugSorb-ATR device to remove direct oral anticoagulants (DOACs), which include Eliquis and Xarelto, during cardiac surgery, building on its existing focus on Brilinta removal. The company plans to submit a pre-submission request to the FDA within 30 days, sharing available data from lab testing and real-world use to determine what additional evidence may be needed for a formal De Novo submission.

This effort is backed by the company's FDA Breakthrough Device Designation for DOAC removal and is driven by a clear clinical need. An estimated 5%-10% of emergent cardiac surgery cases involve patients actively on DOAC therapy, putting them at serious risk of life-threatening bleeding. Real-world adoption of the technology for this purpose is already growing, reflecting broad global demand given that tens of millions of patients are on long-term DOACs for conditions like atrial fibrillation, deep vein thrombosis, and pulmonary embolism.



Source: CytoSorbents investor presentation

The commercial opportunity is substantial. Eliquis alone generated roughly $14.4 billion in global sales in 2025, ranking among the world's top-selling drugs, while Xarelto added another $5.1 billion. . Serious or life-threatening perioperative bleeding of patients on DOACs who require emergent cardiac surgery is a routine and major problem. With the voluntary withdrawal of Andexxa by AstraZeneca from the U.S. market in December 2025 after failing to get full FDA approval due to serious adverse events, there is no

approved reversal agent for the DOACs in the U.S. Importantly, Andexxa was never indicated to reverse DOAC bleeding risk in cardiac surgery patients. CytoSorbents estimates the combined U.S. addressable market for DrugSorb-ATR across both Brilinta and DOAC indications at $500 million - $1 billion annually.

Nasdaq Minimum Bid Price Requirement Compliance

On April 1, 2026, the company received a 180-day extension from the Listing Qualifications Staff of the Nasdaq Stock Market, to regain compliance with the Nasdaq requirement to maintain a minimum bid price of $1.00 per share for continued listing on the exchange, by September 28, 2026, If at any time prior to September 28, 2026, the bid price of the company's common stock closes at $1.00 per share or more for a minimum of 10 consecutive trading days, the company will regain compliance with the Minimum Bid Price Requirement. The stock will continue to be listed on Nasdaq during this period, and the company will continue to have reporting requirements with the SEC.

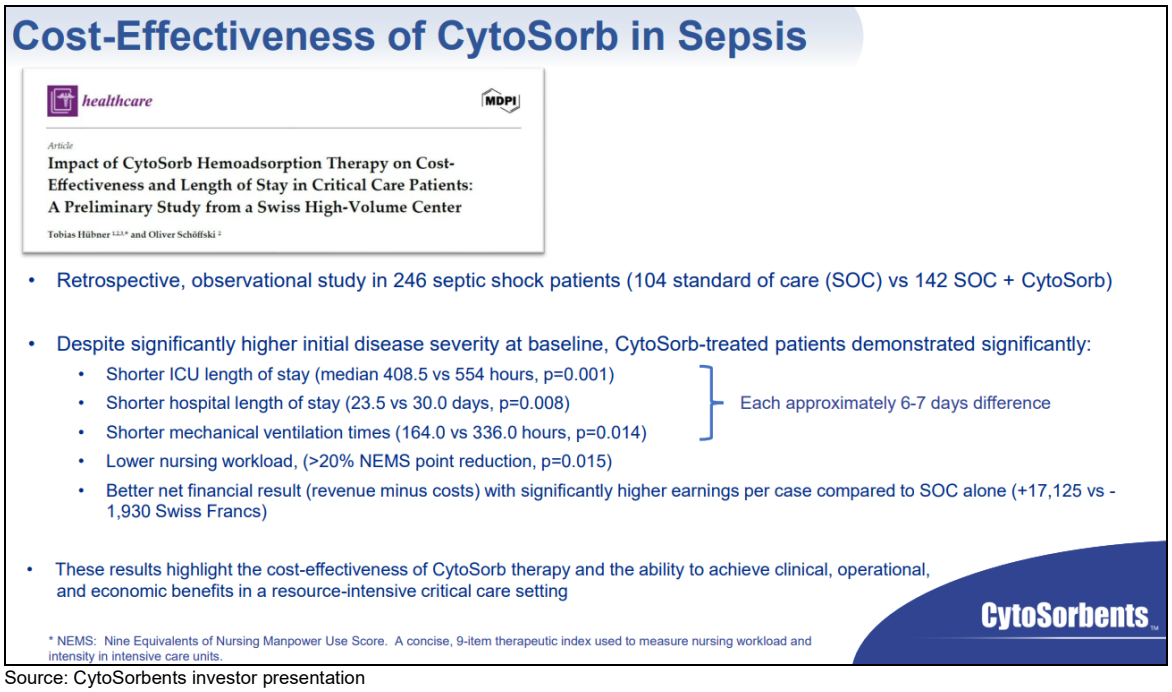
Clinical Updates

In 2025, the company reached a key milestone of more than 300,000 cumulative CytoSorb® treatments delivered globally. This is an increase of more than 50% over the past few years which highlights the broad and growing adoption of CytoSorb therapies across more than 70 countries and a across a wide range of clinical applications.

Recently, a steady stream of new clinical data continues to support the use of CytoSorb across multiple critical care indications. Sepsis and septic shock remain among the leading use cases.

- A recent multinational survey of 442 physicians and published in Intensive Care Medicine Experimental (2026), found that more than three-quarters of respondents use extracorporeal blood purification primarily for refractory septic shock, with broad-spectrum hemoadsorption such as CytoSorb identified as the most commonly used and preferred modality (43%).

- During World Sepsis Day and Sepsis Awareness Month in September 2025, the company hosted a webinar entitled, *"Turning the Tide in Sepsis and Septic Shock"* highlighting why and how CytoSorb is used to control deadly inflammation, stabilize patients, reverse capillary leak, and facilitate fluid removal from patients.



Source: CytoSorbents investor presentation

- Interim results from the septic shock cohort of the prospective COSMOS registry, published in Annals of Intensive Care (2026), showed CytoSorb treatment was associated with significant reductions in interleukin-6 and vasopressor use, improved fluid balance, oxygenation, and organ function.

- These findings are consistent with a large meta-analysis published in the Journal of Clinical Medicine (2025), which compared 449 CytoSorb-treated patients plus standard of care to 295 control patients. CytoSorb use was associated with improved hemodynamics, reduced vasopressor needs, lower in-hospital mortality (p=0.04), and a halving of 28 - 30 day mortality (p=0.003).

- Additional retrospective data published in the Journal of Intensive Care Medicine (2025) demonstrated that early and intensive use of CytoSorb was associated with nearly doubled survival rates (70% observed vs. 37% predicted). These findings align with prior research published in the Journal of Critical Care (2021), showing that higher treatment volumes and longer duration correlate with improved survival outcomes.

By treating the "*Right Patients, at the Right Time, with the Right Dose*," the company believes it can improve sepsis outcomes even more. To support earlier and more effective treatment and to remove the therapy from dependence on other extracorporeal machines, the company is scaling up the distribution of PuriFi® hemoperfusion pumps, with now more than 100 pumps placed internationally. These efforts expand an easy-to-use blood purification infrastructure that we expect will fuel device and disposables usage in the future. In addition, the company also recently announced the launch and immediate availability of HotSwap™, an innovative solution designed to enable rapid and seamless exchange of CytoSorb adsorbers during the treatment of critically ill patients, ensuring the “right dose”. HotSwap is also expected to facilitate the safe return of valuable blood from used devices back to the patient, while streamlining workflows for busy ICU staff, reducing nursing burden, and improving treatment consistency.

Other Critical Conditions

Beyond sepsis, a growing body of evidence supports the use of CytoSorb in other critical conditions. These include Acute Live Failure, Cardiogenic Shock, and Cardiac Surgery. We believe CytoSorb is uniquely positioned as one of the only therapies (drug, biologic, or device) that can broadly address key drivers of critical illness, including massive inflammation and cytokine storm, toxin overload, capillary leak, shock, and other serious complications.

Source: CytoSorbents investor presentation

A full description of these potential uses in other critical conditions can be found here.

Valuation and Estimates

Based on 1st quarter 2026 results and management commentary, we adjust our full year 2026 revenue estimate to $37.2 million and adjust our 2026 loss per share to ($0.20). We believe 2027 revenues can reach over $40.,0 million without the commercialization of DrugSorb-ATR.

In the 4th quarter of 2025, the company implemented a strategic workforce and cost reduction program which reduced headcount by 10% while also lowering expenses and realigning operating and production spend. According to the company's recent earnings call, it continues to expect to achieve breakeven in the second half of 2026. We expect to see the benefit of these actions in lowered cash burn in the first half of 2026 and believe the core business (i.e. the existing CytoSorb business) could reach cash flow breakeven at some point in the 2nd half of 2026.

Beginning in 2025, the company began a significant reorganization of the direct sales team and strategy in Germany (its largest market for the CytoSorb device). This includes the rebalancing of territories and hospital accounts with the goal of restoring sales growth through deeper customer engagement, more effective market development, and improved sales representative productivity. The company is pleased with the initial progress of this reorganization and remains confident it will lead to stronger execution, improved performance, and better sales growth in the region.

We maintain our price target of **$5.00** per share. We believe the company has adequate liquidity and funding options to support its business model through the expected regulatory approval of DrugSorb-ATR and the subsequent commercial launch in late 2026 or 2027.

OTHER RECENT NEWS

Regulatory and Clinical Update on DrugSorb-ATR

Following a formal July 2025 appeal meeting regarding the initial April 2025 De Novo denial, the FDA, in an appeal decision issued in August 2025, confirmed there were no concerns regarding device safety – an essential factor for De Novo authorization, which is based on a favorable benefit-to-risk profile. However, the FDA upheld its denial, citing the need for additional information to support our proposed label indication. Based on subsequent FDA feedback, the Company elected to not pursue further appeals with the CDRH Director's office but rather submit a new De Novo application incorporating additional information, including accumulating real-world data from the expanding use of the device for blood thinner removal worldwide that are captured with high fidelity in the international STAR Registry. The Company believes these new real-world data, combined with the recently published results from the STAR-T trial and the already-established safety profile of DrugSorb-ATR, will further support a favorable benefit-to-risk profile consistent with De Novo authorization standards. Additionally, the FDA indicated its openness to focusing the review of a new submission on the remaining open items, potentially providing a more streamlined and efficient regulatory pathway forward.

The company held a formal pre-submission meeting with the FDA in late-January 2026 and continues to actively engage with the Agency to clarify and confirm the requirements for a new De Novo submission, including whether all information would be required within a new DeNovo submission or as a post marketing requirement. On May 13th the company further clarified that the FDA has requested additional mechanistic data to be included alongside the real-world evidence with a new DeNovo submission. The company is currently evaluating options to generate the additional mechanistic data on an expedited basis and expects to schedule an additional pre-submission meeting with the FDA, if needed, to discuss

and align on the proposed approach. Once alignment is achieved the company will complete the work and submit a new DeNovo application in late 2026 or early 2027. Following submission, a regulatory decision is typically expected within a 150-day review period, although the timeline may be accelerated or extended based on the nature and scope of FDA interactions during the review process.

Meanwhile, the U.S. and Canadian pivotal STAR-T randomized, controlled trial results have now been published in the Journal of Thoracic and Cardiovascular Surgery (2026) - the leading peer-reviewed cardiothoracic surgery journal in the U.S.. The authors summarized the results in the graphical abstract and concluded in the central message of the article that, "*Intraoperative DrugSorb-ATR use for ticagrelor removal is safe and can reduce the severity of bleeding after isolated CABG in patients operated within 2 days of drug discontinuation.*"

Dr. Phillip Chan, CEO of CytoSorbents, stated*, "We have made progress with the FDA to align on the content and timing of a new De Novo submission for DrugSorb-ATR™, and we continue to have confidence in the performance and clinical value of DrugSorb-ATR for this major unmet medical need and the importance of making this FDA Breakthrough Designated Device available to the American public."*

Additionally, the company had previously disclosed that it had filed a Level 1 "Request For Reconsideration" with Health Canada. However, following interactive discussions with the Medical Devices Directorate Bureau Director and the company's Canadian regulatory counsel, it was recommended that any subsequent review of DrugSorb-ATR in Canada be delayed until better clarity was received from the U.S. FDA. The company has withdrawn the Request for Reconsideration and will provide a new MDL application to Health Canada with improved visibility from the FDA.

DrugSorb-ATR, designated an FDA Breakthrough Device, addresses a large and growing unmet need: tens of thousands of U.S. heart attack patients requiring urgent coronary artery bypass graft (CABG) surgery each year while on ticagrelor currently face the choice of delaying surgery or risking severe, life-threatening bleeding. With millions of patients worldwide on blood thinners, the market for effective perioperative bleeding solutions is substantial and expanding. Already in use internationally, DrugSorb-ATR positions CytoSorbents to capture a major market opportunity in the U.S. and Canada, with the potential to deliver both significant patient impact and long-term shareholder value.

Source: CytoSorbents investor presentation

In addition, a growing body of published literature highlights consistent findings from real-world use of CytoSorb®, which is approved in the European Union for the intraoperative removal of both Brilinta®/Brilique® and Xarelto® (rivaroxaban, Janssen/Johnson & Johnson) during cardiac surgery. The use of CytoSorb for antithrombotic removal (ATR) is increasingly being adopted as a standard-of-care practice at leading cardiac surgery centers worldwide. At the same time, the evidence supporting the clinical and economic value of reducing bleeding in patients on blood thinners continues to expand.

- Real-world evidence from the international Safe and Timely Antithrombotic Removal (STAR) Registry, recently published in Cardiovascular Revascularization Medicine (2026) and the Journal of Cardiothoracic Surgery (2025), demonstrates CytoSorb's ability to reduce perioperative bleeding risk in patients receiving antithrombotic therapies. Across more than 160 patients undergoing CABG or valve surgery while on direct oral anticoagulants (DOACs), such as Eliquis® (apixaban, Bristol Myers Squibb/Pfizer) and Xarelto®, or on Brilinta®, studies report low rates of severe bleeding (approximately 3-15%), minimal reoperations, and no device-related adverse events - even when surgery is performed within 24 hours of the last drug dose.

- Landmark data presented at the 2025 European Association for Cardio-Thoracic Surgery (EACTS) Annual Meeting included randomized data on the intraoperative removal of Eliquis® and Xarelto® during urgent cardiac surgery, presented by Professor Richard Whitlock. Additional data presented by Professor Matthias Thielmann demonstrated that intraoperative removal of ticagrelor during urgent CABG was associated with significantly reduced bleeding compared with Plavix® (clopidogrel, Bristol-Myers Squibb/Sanofi).

- Similarly, at the annual meeting of the German Society of Thoracic and Cardiovascular Surgery (DGTHG) earlier this year, multiple presentations reinforced the dominant value proposition of our technology in cardiac surgery. These findings showed not only improved clinical outcomes, but also meaningful improvements in care delivery that translate into substantial cost savings. At this meeting, Professor Michael Schmoeckel, co-principal investigator of the international STAR Registry, presented pooled data from the STAR-T trial and STAR Registry demonstrating that reductions in bleeding among ticagrelor-treated patients undergoing urgent CABG were consistently observed in both controlled clinical trials and real-world clinical practice.

For DrugSorb-ATR, continued evidence generation, thought leadership, and visibility within the cardiovascular community remain key pillars of our anticipated launch strategy. The Company is maintaining this momentum with multiple new analyses and data presentations at major cardiovascular conferences throughout the year, further underscoring the clinical benefits of antithrombotic removal in cardiac surgery.

At the upcoming EuroPCR meeting in Paris in May 2026, The Company expects to feature two oral presentations within the scientific program:

- Professor Uwe Zeymer will present additional data from the STAR Registry demonstrating bleeding reductions associated with intraoperative removal of DOACs during urgent cardiac surgery.

- Professor Matthias Thielmann will present new data on the impact of P2Y12 inhibitor choice and intraoperative device use on bleeding after CABG. These findings suggest, for the first time, that ticagrelor may offer not only superior efficacy compared with clopidogrel in acute coronary syndromes, but also a potential safety advantage due to its ability to be actively removed during surgery.

Looking ahead, the company has submitted multiple original analyses for presentation at the 2026 European Society of Cardiology (ESC) Congress in Munich in August 2026 and the 2026 EACTS Annual Meeting in Barcelona in October 2026.

Finally, important market dynamics are expected to further support adoption. Since mid-2025, lower cost generic ticagrelor became broadly available in the U.S. from multiple manufacturers. As a result, its use in heart attack patients is expected to increase significantly from its current U.S. market share of approximately 50%, driven by its faster onset of action, more potent platelet inhibition, and improved cost competitiveness relative to generic Plavix® (clopidogrel).

In parallel, the unmet need for effective reversal strategies for blood thinners continues to grow. This need has been further amplified following the withdrawal of Andexxa® (AstraZeneca), previously the only approved reversal agent for certain direct oral anticoagulants such as Eliquis® and Xarelto® in cases of life-threatening bleeding, from the U.S. market in December 2025.

2025 Financial Results & Business Update

On March 25, 2026, the company announced 4th quarter and full year 2025 financial and operating results. In the 4th quarter, revenues increased 1.0% to $9.2 million compared to the prior year period and were down 8.0% on a constant currency basis. Gross margin improved to 74% in the quarter compared to 70% in Q4 2024 due to improved operating efficiencies. The operating loss, which included a restructuring charge of approximately $0.5 million due to workforce and cost reduction programs, was ($4.6) million, compared to ($3.7) million in Q4 2024. Net loss was ($5.5) million or ($0.09) per share, compared to a net loss of ($7.6) million or ($0.14) per share in Q4 2024. Adjusted net loss was ($4.3) million or ($0.07) per share, compared to an adjusted net loss of ($1.7) million or ($0.03) per share in Q4 2024. Adjusted EBITDA loss was ($3.2) million compared to a loss of ($2.4) million in Q4 2024.

For the full year 2025, revenues grew by 4% to $37.1 million led by a 13.0% increase in direct sales outside of Germany to $8.6 million and an 11.4% increase in distributor sales to $16.5 million. Those together accounted for approximately 68% of total sales. This was offset by a 10% reduction in direct Germany sales to $11.8 million which reflects the near-term impact of proactive restructuring of German sales operations and the implementation of strategies that are expected to drive more consistent and scalable growth. These improvements include enhanced customer targeting, structured weekly sales planning, increased focus on new account development, and improved allocation of sales resources. So far In 2026, the company has seen improving commercial activity, including increased customer engagement and new account development in Germany.

Gross margin for the year improved to 71% from 70% in the prior year, reflecting continued strength in product mix and cost discipline. Operating loss narrowed 10% year over year to ($14.7) million from ($16.5) million, indicating improved operating efficiency despite ongoing profitability challenges. Net loss improved to ($8.2) million, or ($0.13) per share, compared to a net loss of ($20.7) million, or ($0.38) per share in 2024. Adjusted EBITDA loss improved to ($10.5) million from ($11.5) million in 2024 as progress continued to narrow core operating losses.

Total cash balances were $7.8 million on December 31, 2025, compared to $9.1 million as of September 30, 2025. Total debt was $16.7 million with no near-term maturities.

RISKS

- The company has experienced substantial operating losses since inception. The losses have resulted principally from costs incurred in the research and development of the company's polymer technology, clinical studies and general and administrative expenses.

- The company is currently well capitalized but may require additional financing in the future to complete additional clinical studies and to support the commercialization of proposed products.

- If users of the company's products are unable to obtain adequate reimbursement from third-party payers, or if reimbursement is not available in specific countries, or if new restrictive legislation is adopted, then market acceptance of products may be limited, and the company may not achieve anticipated revenues and profits.

- Clinical study results for the CytoSorb and/or DrugSorb-ATR device may not be indicative of future clinical study results, and no assurance can be made that any clinical study results will lead to results sufficient for necessary regulatory clearances or product sales.

SUMMARY

The company's current stock price likely does not reflect the potential for strong profitable growth going forward or the potential for a favorable FDA review of DrugSorb-ATR. We believe CTSO stock to be significantly undervalued at this time

We believe CytoSorbents disruptive blood purification technology will provide ample opportunities for high margin, double digit revenue growth going forward. The global addressable market for all of the company's products could exceed $20 billion. This growth will also be driven by the company aggressively investing in therapeutic applications such as sepsis and septic shock, circulatory failure, respiratory failure, liver dysfunction, kidney protection, and organ transplant perfusion and protection.

The company is also seeing positive signs of restored growth of its core CytoSorb device in certain European markets. There is a strong pipeline of positive data on the device from both critical care and cardiac surgery events. The company is also improving cross-functional synergy internally based on new therapy area vertical strategy and leadership. The company is also seeing increased opportunities outside of Germany such as the U.K., Israel, Turkey and Taiwan. Another important component in bottom line growth is the full transition to the new manufacturing facility which will increase total capacity and improve gross margins.

Based upon the positive data from STAR-T supporting a favorable benefit-to-risk profile of the DrugSorb-ATR therapy, its designation as an FDA Breakthrough Device, the major unmet medical need to prevent perioperative bleeding due to ticagrelor in cardiac surgery patients, and the established FDA precedent (see above), we believe CytoSorbents will find a receptive FDA and Health Canada despite missing the original STAR-T pivotal trial primary efficacy endpoint. We believe the data release has increased the visibility and probability of FDA and Health Canada marketing approval of DrugSorb-ATR to reduce the severity of bleeding in isolated CABG patients on Brilinta®.

- Brilinta®, an FDA-approved antiplatelet therapy widely used as standard of care in the U.S. and Canada, significantly increases the risk of severe perioperative bleeding in patients who require urgent surgery.

- DrugSorb-ATR is an investigational device with FDA Breakthrough Designation for this high-risk setting, underscoring the substantial unmet medical need and the absence of effective alternatives.

- As a De Novo 510(k)–eligible device, DrugSorb-ATR must demonstrate that its "probable benefits outweigh its probable risks" to achieve market authorization.

- While the company's initial De Novo submission was denied due to FDA's request for additional information to support the proposed labeling (interpreted primarily as requiring more efficacy data), the company has resolved most issues. Two important outcomes emerged from the 1st review cycle:

  1) FDA identified no safety concerns with DrugSorb-ATR, materially reducing the "probable risk" side of the De Novo equation. This is critical, as FDA precedent under Breakthrough Device, De Novo, and Least Burdensome guidelines, shows that for safe or low-risk medical devices, additional efficacy requirements can often be addressed post-market (e.g., via a registry) rather than as a condition of pre-market approval, helping avoid unnecessary delays.

  2) In subsequent discussions, based on the company's understanding, FDA agreed to limit its review of the new De Novo submission to only the remaining open items from the prior application. This is expected to expedite the review timeline. A primary remaining item is the need for additional data supporting the intended label indication, which the company was previously unable to include due to FDA submission rules governing new and real-world data.

Source: CytoSorbents investor presentation

ANNUAL FINANCIAL PROJECTIONS

Income Statement	Dec-22	Dec-23	Dec-24	Dec-25	Dec-26
Product Sales	**29,359,910**	**31,084,953**	**35,594,520**	**37,063,238**	**37,159,749**
Growth	*-26.8%*	*5.9%*	*14.5%*	*4.1%*	*0.3%*
Cost of Goods Sold	**0**	**7,672,650**	**8,898,425**	**9,338,000**	**8,930,374**
%	*0.0%*	*24.7%*	*25.0%*	*25.2%*	*24.0%*
Depreciation & Amort	**0**	**1,459,066**	**1,570,104**	**1,234,000**	**1,348,370**
Gross Profit	**0**	**21,953,237**	**25,125,991**	**26,491,238**	**26,881,006**
Margin	*0.0%*	*70.6%*	*70.6%*	*71.5%*	*72.3%*
SG&A Expenses	**0**	**38,307,415**	**34,995,749**	**35,645,000**	**31,709,356**
% of sales	*0.0%*	*123.2%*	*98.3%*	*96.2%*	*85.3%*
Other	**0**	**0**	**0**	**510,000**	**0**
% of sales	*0.0%*	*0.0%*	*0.0%*	*1.4%*	*0.0%*
Research & Development	**0**	**15,594,442**	**6,916,181**	**5,085,000**	**3,566,488**
% of sales	*0.0%*	*50.2%*	*19.4%*	*13.7%*	*9.6%*
Amortization	**0**	**0**	**0**	**0**	**0**
% of sales	*0.0%*	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Operating Income	**0**	**(31,948,620)**	**(16,785,939)**	**(14,748,762)**	**(8,394,837)**
Margin	*0.0%*	*-102.8%*	*-47.2%*	*-39.8%*	*-22.6%*
EBITDA	**0**	**(30,489,554)**	**(15,215,835)**	**(13,514,762)**	**(7,046,468)**
Margin	*0.0%*	*-98.1%*	*-42.7%*	*-36.5%*	*-19.0%*
Other Expenses/(Income)	**0**	**(2,046,012)**	**4,224,751**	**(8,762,000)**	**1,228,000**
%	*0.0%*	*-6.6%*	*11.9%*	*-23.6%*	*3.3%*
EBIT	**0**	**(29,902,608)**	**(21,010,690)**	**(5,986,762)**	**(9,622,837)**
%	*0.0%*	*-96.2%*	*-59.0%*	*-16.2%*	*-25.9%*
Total Interest Exp (net)	**0**	**157,981**	**1,399,092**	**2,612,134**	**3,428,000**
%	*0.0%*	*0.5%*	*3.9%*	*7.0%*	*9.2%*
Net Profit Before Tax	**0**	**(30,060,589)**	**(22,409,782)**	**(8,598,896)**	**(13,050,837)**
%	*0.0%*	*-96.7%*	*-63.0%*	*-23.2%*	*-35.1%*
Income Tax	**0**	**(813,739)**	**(1,690,825)**	**(401,000)**	**(200,000)**
% Effective Rate	*0.0%*	*2.7%*	*7.5%*	*4.7%*	*1.5%*
% Cash Tax Rate	*0.0%*	*2.7%*	*7.5%*	*4.7%*	*1.5%*
Minority Interests or Preferred Stock	**0**				
Net Profit	**0**	**(29,246,850)**	**(20,718,957)**	**(8,197,896)**	**(12,850,837)**
%	*0.0%*	*-94.1%*	*-58.2%*	*-22.1%*	*-34.6%*
	0.0%				
Non-recurring income (expense)	-				
	0				
Average Diluted Shares Outstanding	-	44,656,391	54,441,811	62,231,771	62,738,827
Reported FD EPS					
Zacks Cash EPS	**0.00**	**(0.65)**	**(0.38)**	**(0.13)**	**(0.20)**
Zacks EPS	**0.00**	**(0.65)**	**(0.38)**	**(0.13)**	**(0.20)**

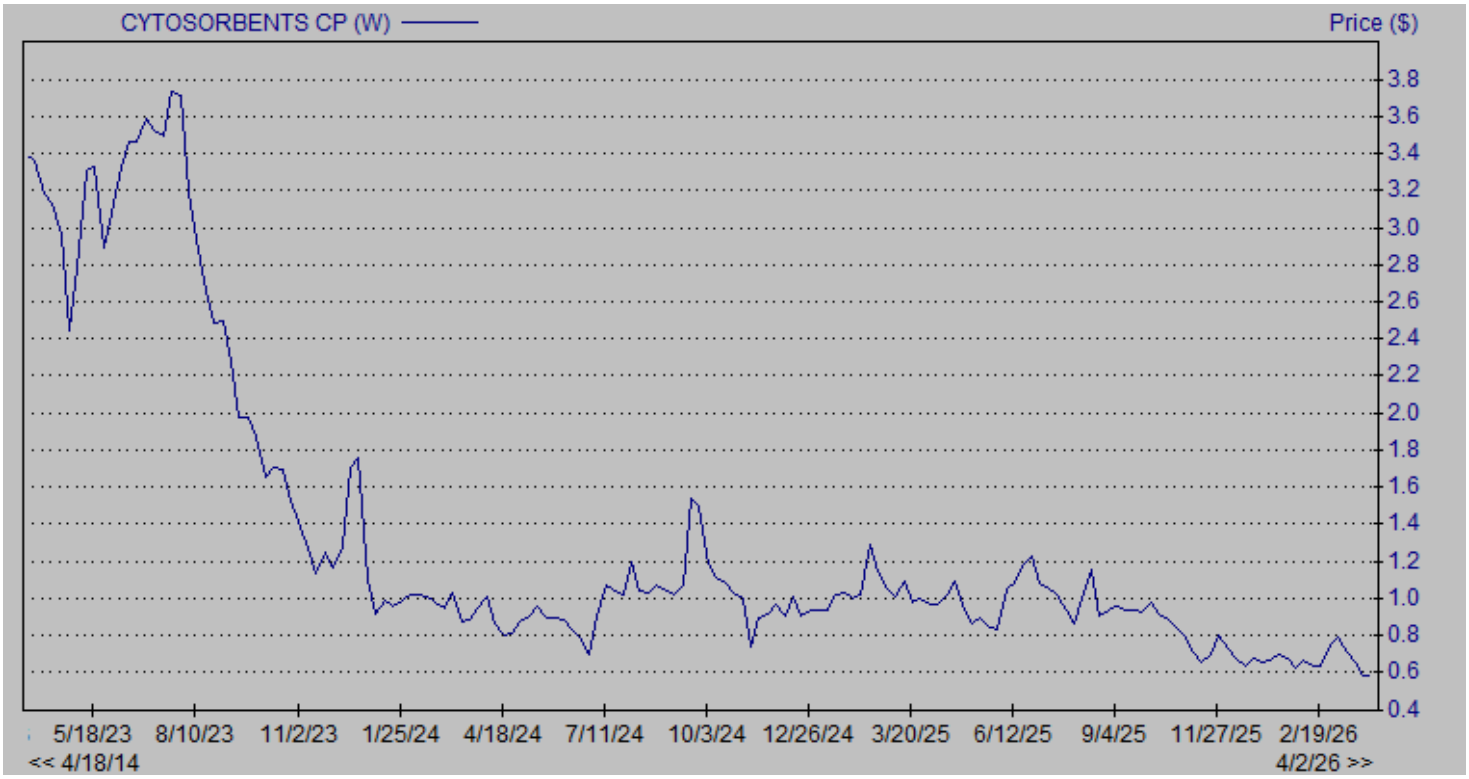
Source: Zacks analyst

QUARTERLY FINANCIAL PROJECTIONS

	Q1/26A	Q2/26E	Q3/26E	Q4/26E
Product Revenues	**8,864,000**	**9,307,200**	**9,400,272**	**9,588,277**
Cost of Goods Sold	**2,384,000**	**2,122,042**	**2,190,263**	**2,234,069**
%	*22.3%*	*22.8%*	*23.3%*	*23.3%*
Depreciation	**350,000**	**341,250**	**332,719**	**324,401**
Gross Profit	**6,130,000**	**6,843,908**	**6,877,290**	**7,029,808**
%	*69.2%*	*73.5%*	*73.2%*	*73.3%*
SG&A Expenses	**8,149,000**	**7,986,020**	**7,826,300**	**7,748,037**
%	*91.9%*	*85.8%*	*83.3%*	*80.8%*
Other Expenses/(Income)	**0**	**0**	**0**	**0**
%	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Research & Development	**1,025,000**	**922,500**	**830,250**	**788,738**
%	*16.7%*	*13.5%*	*12.1%*	*11.2%*
Amortization	**0**	**0**	**0**	**0**
%	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Operating Income	**(3,044,000)**	**(2,064,612)**	**(1,779,260)**	**(1,506,966)**
%	*-34.3%*	*-22.2%*	*-18.9%*	*-15.7%*
EBITDA	**(2,694,000)**	**(1,723,362)**	**(1,446,541)**	**(1,182,565)**
%	*-30.4%*	*-18.5%*	*-15.4%*	*-12.3%*
Other Expenses/(Income)	**1,228,000**	**0**	**0**	**0**
%	*13.9%*	*0.0%*	*0.0%*	*0.0%*
EBIT	**(4,272,000)**	**(2,064,612)**	**(1,779,260)**	**(1,506,966)**
%	*-48.2%*	*-22.2%*	*-18.9%*	*-15.7%*
Total Interest Exp. (net)	**857,000**	**857,000**	**857,000**	**857,000**
%	*9.7%*	*9.2%*	*9.1%*	*8.9%*
Net Profit Before Tax	**(5,129,000)**	**(2,921,612)**	**(2,636,260)**	**(2,363,966)**
%	*-57.9%*	*-31.4%*	*-28.0%*	*-24.7%*
Income Tax	**0**	**0**	**0**	**(200,000)**
% Effect Rate	*0.0%*	*0.0%*	*0.0%*	*8.5%*
Minority Interest & Preferred Stock	**0**	**0**	**0**	**0**
Net Profit	**(5,129,000)**	**(2,921,612)**	**(2,636,260)**	**(2,163,966)**
%	*-57.9%*	*-31.4%*	*-28.0%*	*-22.6%*
Non-recurring income (expense)				
Shares Outst.	62,738,827	62,804,088	62,804,088	62,804,088
Reported FD EPS				
Fully Diluted EPS	**(0.08)**	**(0.05)**	**(0.04)**	**(0.03)**

Source: Zacks analyst

HISTORICAL STOCK PRICE



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