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Zacks Small-Cap Research

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CytoSorbents Corporation (NASDAQ: CTSO)

CTSO: CytoSorbents Announces 3rd Quarter Financial Results and Reaches Important Milestone of Generating Positive Operating Cash Flow.

Utilizing a DCF valuation process containing conservative estimates combined with other valuation methodologies, we believe CTSO could be worth $50.00 per share.

Current Price (11/16/26)	$4.50
Valuation	**$50.00**

OUTLOOK

CytoSorbents markets its EU-approved CytoSorb blood purification technology for critical care and cardiac surgery. In Q3 2026, gross margin grew to 75%, expenses fell 11%, with positive operating cash flow, excluding restructuring payments. Distributor sales rose 18% yoy, while the plan to recover German sales could drive growth and operating leverage. A planned early-2027 FDA De Novo resubmission for DrugSorb-ATR could enable 2027 U.S. sales if approved, while HemoDefend-BGA offers strategic upside. At a $15M market cap and $26.5M enterprise value, CTSO trades <1x TTM sales of $37.4M. We believe this valuation discounts improving financial performance, profitable growth potential, and regulatory/strategic catalysts.

SUMMARY DATA

52-Week High	**$17.00**
52-Week Low	**$2.84**
One-Year Return (%)	**-63.4**
Beta	**1.48**
Average Daily Volume (sh)	**35,970**
Shares Outstanding (mil)	**3.146**
Market Capitalization ($mil)	**$15.4**
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)
2024	$9.0 A	$8.8 A	$8.6 A	$9.2 A	$35.6 A
2025	$8.7 A	$9.6 A	$9.5 A	$9.2 A	$37.0 A
2026	$8.9 A	$9.6 A	$9.7 A	$9.9 E	$38.1 E
2027					$40.9 E

EPS / Loss Per Share

	Q1 (Mar)	Q2 (Jun)	Q3 (Sep)	Q4 (Dec)	Year (Dec)
2024	*-$0.11 A*	*-$0.08 A*	*-$0.05 A*	*-$0.14 A*	*-$0.38 A*
2025	-$0.49 A	$0.58 A	-$1.01 A	-$1.75 A	-$2.67 A
2026	-$1.64 A	-$1.03 A	-$0.58 A	-$0.47 E	-$3.72 E
2027					-$1.16 E

Quarterly revenues may not equal annual revenues due to rounding. Quarterly EPS may not equal annual EPS due to rounding, dilution, or intangibles. 2024 numbers are not split adjusted.

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WHAT'S NEW



Source: CytoSorbents investor presentation

3rd Quarter 2026 Financial Results

On November 12, 2026, CytoSorbents released 3rd quarter financial and operating results which were largely in line with our expectations. **The company achieved an important milestone as they generated positive operating cash flow totaling $43,000.**

The company reported 3rd quarter revenue of $9.7 million, up 3% from $9.5 million in Q3 2025, driven by a 16% increase in distributor and strategic partner sales. International sales outside Germany grew 4%. Those two channels accounted for 76% of third quarter sales. Germany represents the remaining 24% and declined approximately 20%-21% year-over-year. This was driven by the reduction of the sales force in that territory during the restructuring period. The large market opportunity is believed to still be intact.

Gross margin improved to 75% from 70% a year earlier, while operating expenses declined 11% to $8.5 million (13% excluding $250,000 in restructuring charges). As a result, the operating loss improved to ($1.2) million. The net loss improved 42% to ($1.8) million, or ($0.58) per share, compared to ($3.2) million, or ($1.01) per share, in the prior-year period. The adjusted EBITDA loss improved to ($0.3) million from ($2.0) million.

Importantly, the company achieved its goal of operating cash flow breakeven, generating approximately $43,000 in positive operating cash flow during the quarter (excluding $251,000 in restructuring-related payments). Total cash burn, including these payments, was approximately $200,000. Management attributed the improvement to disciplined execution, higher gross margins, and a more efficient cost structure, noting that continued reductions in operating cash burn should lower future financing requirements and improve the company's ability to capture the benefits of expected revenue growth.

Total cash and equivalents (including restricted cash) were approximately $5.7 million on September 30, 2026 compared to $5.9 million on June 30, 2026. Going forward, we expect the quarterly cash burn in the near term to be approximately $200,000 per quarter.

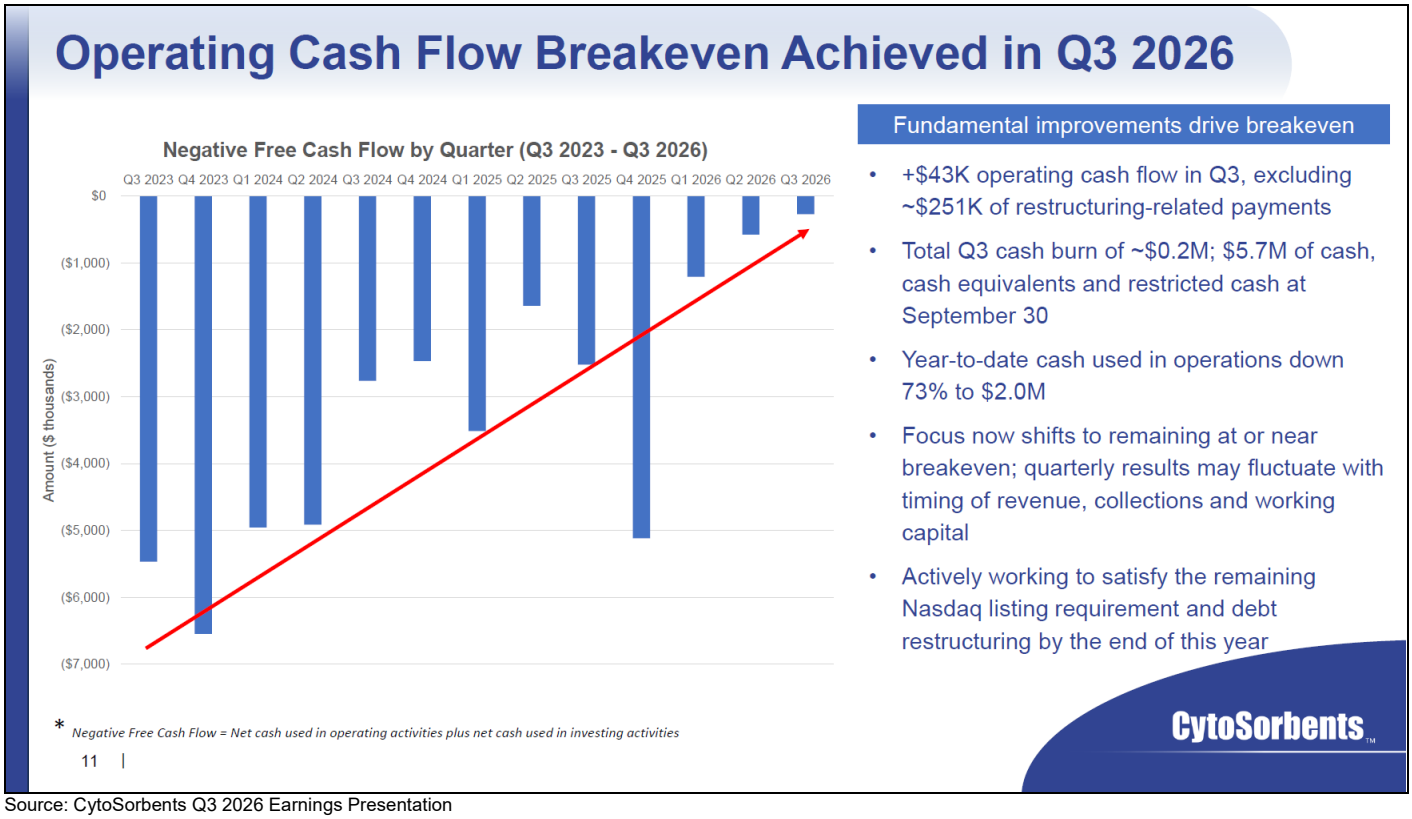
Value Drivers

The company reiterated four important value drivers that management believes will drive shareholder value going forward.

1. Achieving Operating Cash Flow Breakeven

This was achieved in the 3rd quarter. The company generated approximately $43,000 in positive operating cash flow (excluding $251,000 in restructuring-related payments), compared with operating cash burn of approximately $200,000 in Q2 2026 on the same basis and $2.7 million in Q3 2025. The improvement reflects a broad-based effort to streamline operations and strengthen financial performance. Manufacturing efficiencies and improved sourcing increased product gross margin 500 basis points to 75% from 70% a year ago, while a 24% reduction in headcount since September 2025 and disciplined expense management significantly lowered the company's overall cost structure. Working

capital also improved, with inventory declining from $5.3 million at year-end 2025 to $3.2 million as of September 30, 2026.



Source: CytoSorbents Q3 2026 Earnings Presentation

Going forward, management's priority is to sustain operating cash flow at or near breakeven while selectively investing to accelerate sales growth, which has historically been constrained by limited resources. With a leaner cost structure and healthy gross margins, the company believes it is better positioned to capitalize on growth opportunities and generate operating leverage as revenues increase. While quarterly cash flow may fluctuate due to the timing of revenue, collections, and working capital, management remains focused on financial discipline and converting incremental sales growth into improved profitability and long-term shareholder value.

2. Returning CytoSorb to Sustainable, Profitable Growth

The company’s 2nd key value driver is restoring profitable growth in its core CytoSorb franchise. Third-quarter distributor and strategic partner sales increased 18% year-over-year and 10% sequentially, while direct sales outside Germany grew 4%, collectively representing 76% of revenue. These gains were partially offset by a 20% decline in Germany, reflecting reduced sales force capacity and territory coverage following the commercial restructuring. To address this, the company is rebuilding its German sales organization, adding five representatives through early 2027, and recently appointed Alex Tiefenbacher as SVP of Direct Sales to lead its German and international direct sales operations. Management believes these investments in leadership and sales capacity will improve execution, expand market coverage and support a return to sustained revenue growth.

The company's "*Right Patient, at the Right Time, with the Right Dose*" commercial strategy continues to gain traction, supported by its PuriFi® pump platform and HotSwap® technology, which simplify treatment delivery and encourage earlier, more consistent CytoSorb use. The company is also expanding its clinical evidence base, highlighted by new data presented at the European Association for Cardio-Thoracic Surgery (EACTS) Annual Meeting covering blood thinner removal, post-operative shock, VA-ECMO support, and heart transplantation, as well as findings from the international COSMOS critical

care registry presented at the European Society of Intensive Care Medicine (ESICM) LIVES 2026 congress addressing sepsis, liver support, and VV-ECMO. Management believes renewed growth in Germany, continued international momentum, an expanding clinical evidence base, and a leaner cost structure position the core CytoSorb franchise to accelerate revenue growth, leverage attractive gross margins, and translate higher sales into improved profitability and cash flow.

3. Opening the North American Market Through DrugSorb-ATR

An important third value driver is obtaining FDA marketing authorization for DrugSorb-ATR, which is designed to remove commonly prescribed blood thinners during cardiopulmonary bypass in patients requiring urgent coronary artery bypass graft (CABG) and other cardiac surgeries, with the goal of reducing serious bleeding complications. Management estimates an initial addressable market of approximately $300 million in the U.S. and Canada, with potential expansion to $1–$2 billion through additional blood thinners and surgical indications.

During the quarter, the company advanced preparations for a new De Novo submission related to the blood thinner, Brilinta, expected in early 2027, supported by an independent patient-matched analysis of 587 patients that demonstrated a statistically significant 37% reduction in severe bleeding with intraoperative CytoSorb use among patients recently exposed to Brilinta (21.8% versus 34.5% for the control group; p=0.002). The findings also showed significant reductions in chest tube drainage and red blood cell transfusions, with no serious device-related adverse events. The results indicate it would only require 8 patients treated with CytoSorbent's technology to prevent one serious bleed, consistent with the 6 patients needed to be treated with DrugSorb-ATR to see a similar benefit observed in the STAR-T trial. The analysis, proposed by FDA in last year's appeal meeting, is expected to form the core of additional data to support probable benefit of the device in a new De Novo submission, increasing the number of CABG patients on Brilinta to nearly 700, including both treated and control patients from both the STAR-T randomized controlled trial and these new data. Meanwhile, the company is working with the FDA on an additional animal study to provide mechanistic data for this submission. In parallel, the company is advancing a separate De Novo pathway for removing direct oral anticoagulants, including Eliquis and Xarelto. Together, the Brilinta and direct oral anticoagulant programs represent two distinct potential pathways to U.S. commercialization and significant market expansion.

4. Unlocking the Strategic Value of HemoDefend-BGA

The company's fourth value driver is realizing the strategic importance of HemoDefend-BGA, a differentiated blood purification technology developed with approximately $16 million in prior non-dilutive U.S. government funding. The technology is designed to remove anti-A and anti-B antibodies from plasma and platelet products, potentially enabling universal blood products that can be transfused regardless of recipient blood type without the need for electricity, specialized equipment or complex processing. This could simplify hospital inventory management, reduce waste and costs, and ultimately enable first responders, military units and ambulances to carry freeze-dried universal plasma without refrigeration or blood typing.

Following favorable FDA feedback in July regarding the anticipated clinical development pathway, the company is evaluating opportunities to advance HemoDefend-BGA through additional government funding, commercial partnerships, licensing arrangements and other strategic alternatives. Management believes the technology represents an underrecognized asset with meaningful potential to create shareholder value without requiring substantial cash investments.

Valuation and Estimates

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. As previously guided, the company has now achieved operating cash flow breakeven in the third

quarter of 2026, hitting $43,000 of positive operating cash flow after restructuring costs, and plans to maintain the business within a range of operating breakeven moving forward, subject to quarter-to-quarter variability.

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. Although the rebuilding phase of the German sales team is ongoing, the company remains confident it will lead to stronger execution, improved performance, and better sales growth in the region.

We adjust our price target to **$50.00** per share due to the uncertainty of the timing of the DrugSorb-ATR submission and subsequent approval (if approved) in 2027, the timeline for positive organic revenue growth in Germany, as well as higher interest rates.

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 2027.

OTHER RECENT NEWS

DrugSorb®-ATR Regulatory Update

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

The FDA's request for mechanistic data typically means it wants more evidence of how the device works biologically to corroborate the observed clinical effect. DrugSorb-ATR is presumed to work by removing Brilinta, an anti-platelet drug that prevents platelets from sticking together, thereby reducing the drug's inhibitory effect on platelets. Clinical effect is generally what matters most in treating patients, and many FDA-approved drugs and devices with clear clinical benefit have been approved without a clear mechanism of action. The company has evaluated options to generate the data on an expedited basis and expects to finalize its testing protocol following a pre-submission meeting with the FDA in the next few months, which may require an additional meeting. Completion of testing and submission of a new De Novo application is anticipated in early 2027, later than previously expected, though the company now has clearer direction and is committed to filing as soon as reasonably possible. Following submission, a decision would generally be expected within the FDA's targeted 150-day MDUFA review timeline, although the actual period may be shorter or longer depending on the extent of interactive review questions.

In the meantime, the U.S. and Canadian pivotal STAR-T randomized controlled trial results have 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 article's central message that, "Intraoperative DrugSorb-ATR use for ticagrelor

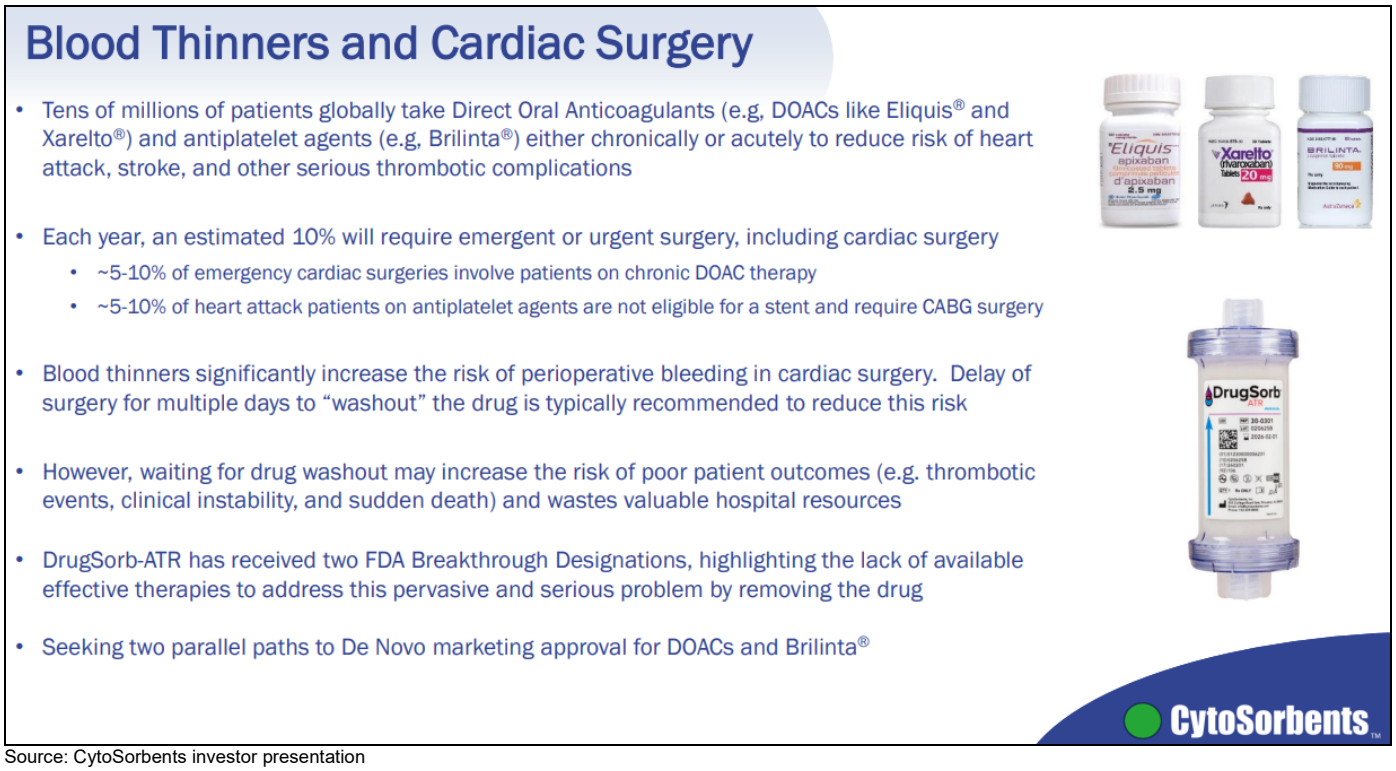
removal is safe and can reduce the severity of bleeding after isolated CABG in patients operated within 2 days of drug discontinuation."

In addition, a comparative real-world analysis, "Intraoperative ticagrelor removal to reduce bleeding after urgent CABG: Matched comparison of patient level observational data," was presented at the European Society of Cardiology's ESC 2026 conference (August 28-31, 2026) in Munich, Germany. This real-world evidence, released at the world's largest cardiovascular conference, will be provided to the FDA in the new De Novo submission, giving investors an opportunity to assess for themselves whether "probable benefit exceeds the probable risk" for the technology. FDA's standard for De Novo marketing approval. The company stated that FDA has previously noted no major safety concerns with DrugSorb-ATR for this indication, satisfying one of the two requirements.

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

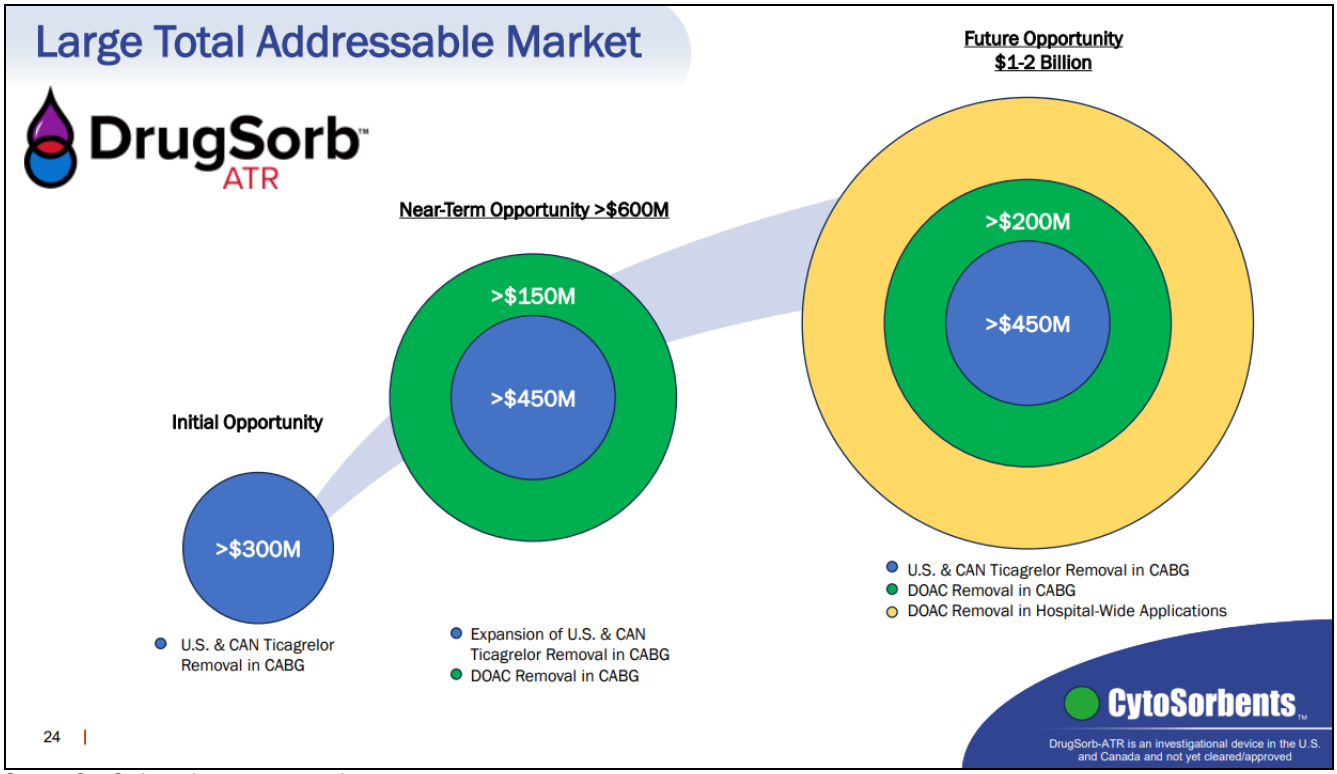
CytoSorbents is also accelerating its strategy to pursue an FDA indication for its DrugSorb-ATR device to remove direct oral anticoagulants (DOACs), which include Eliquis and Xarelto, during cardiac surgery, building on its existing focus on Brilinta removal. The company has a separate pre-submission meeting in August with the FDA to review the data currently available for the DOAC indication that includes drug removal data from benchtop testing and data from real-world use. The company is in discussions with FDA to finalize what additional information may be required to support a parallel De Novo submission for DOAC removal. The company expects to file a separate De Novo submission specifically for DOACs in 2027.

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. CytoSorbents estimates the combined U.S. addressable market for DrugSorb-ATR across both Brilinta and DOAC indications at $500 million - $1 billion annually.



Source: CytoSorbents investor presentation

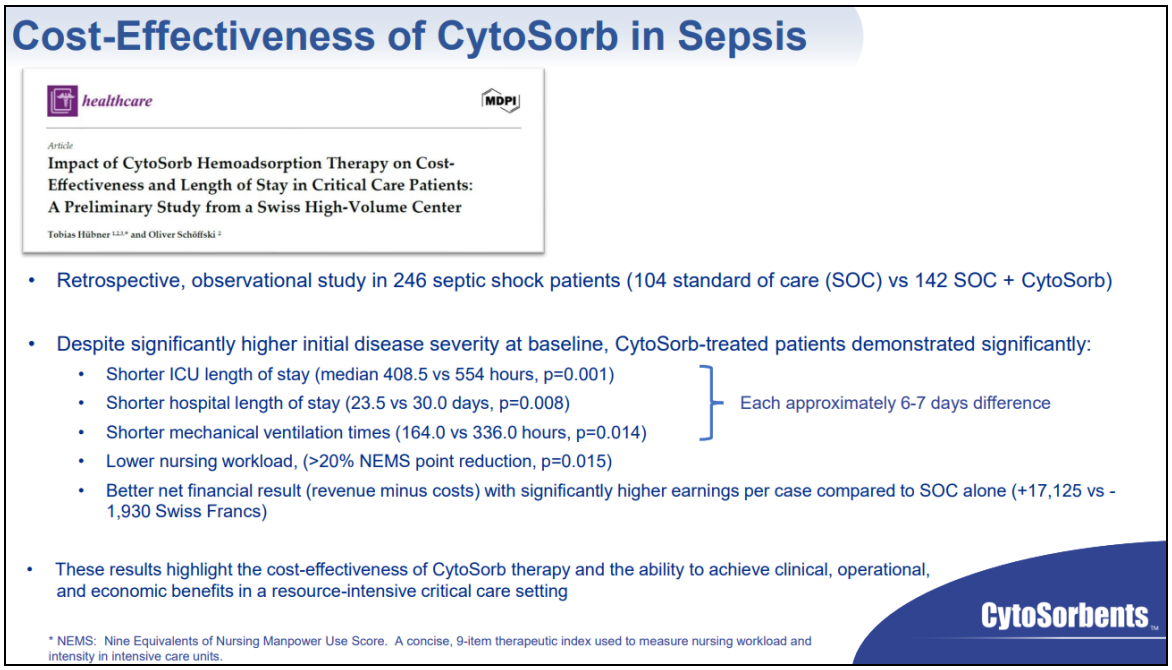
Clinical Updates

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 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, as disclosed by the company in Q2 2026. 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 Liver 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.

New Findings Presented at European Society of Cardiology (ESC) Congress 2026

On September 2, 2026, the company announced an independent new patient-level matched analysis of real-world data demonstrating that intraoperative use of CytoSorb was associated with a significant reduction in severe perioperative bleeding among patients undergoing urgent coronary artery bypass grafting (CABG) surgery on the blood thinner, ticagrelor (Brilinta®/Brilique®, AstraZeneca). The findings were presented at the European Society of Cardiology (ESC) Congress 2026, the world's largest cardiovascular conference, on August 29, 2026.

Patients requiring urgent cardiac surgery after recent exposure to potent blood thinners face substantially higher risks of severe bleeding, transfusions, complications, longer hospital stays, and increased costs, historically necessitating a 3–7 day delay to allow the drugs to clear. CytoSorb offers a potentially significant alternative as the only specifically approved therapy in the E.U. for removing ticagrelor and rivaroxaban during cardiopulmonary bypass. A patient-level matched analysis of 587 urgent CABG patients following recent ticagrelor exposure compared 198 patients treated intraoperatively with CytoSorb in the STAR-T Registry with 389 matched patients from a previously published individual patient data meta-analysis who underwent surgery without the device, with the independent analysis demonstrating meaningful clinical benefits.

- A significant 37% relative reduction in BARC-4 severe bleeding with CytoSorb use (21.8% vs 34.5% in controls; p=0.002).

- Number of patients needed to be treated (NNT) with CytoSorb to prevent one severe bleeding event after urgent CABG was eight (8).

- Significant reductions in 24-hour chest tube drainage (p=0.039) and red blood cell transfusions (p=0.003) with CytoSorb use were also observed.

- No serious device-related adverse events were reported.

Prof. Dr. Uwe Zeymer, Vice Director of the Institute for Heart Attack Research in Ludwigshafen, Germany and Co-Principal Investigator of the STAR-T (**S**afe and **T**imely **A**ntithrombotic **R**emoval **– T**icagrelor) Registry stated, *"Today's presentation at the ESC meeting using robust statistical adjustments, demonstrates that in real world patients on ticagrelor undergoing urgent CABG, the use of CytoSorb is associated with significant reductions in severe bleeding rates compared with rates observed when patients on ticagrelor are operated without the device. Based on these results, the number of patients needed to be treated with the device to prevent a severe bleeding event after urgent CABG is 8, which is a clinically important result and is highly consistent with the NNT of 6 to prevent a major bleeding event demonstrated in the double-blind randomized STAR-T trial published earlier this year. Therefore, these results validate the testimonials from cardiac surgeons throughout Europe who have made CytoSorb their standard of care when operating urgently on patients on blood thinners. We plan to continue building the evidence base on antithrombotic removal during cardiac surgery beyond ticagrelor to include the direct oral anticoagulants, like apixaban and rivaroxaban, that are also very frequently present in patients requiring urgent cardiac surgery."*

Phillip Chan, CEO of CytoSorbents stated, *"These real-world findings are highly encouraging and provide important new evidence of CytoSorb's performance in routine clinical practice in CABG patients facing this critical clinical dilemma. Importantly, we expect this new analysis to serve as a core component of additional clinical evidence - initially proposed by the FDA as part of last year's appeal - in a new De Novo submission for DrugSorb-ATR to help support its probable benefit in reducing the severity of perioperative bleeding in patients on Brilinta® undergoing urgent cardiac surgery. These data have not yet been submitted or reviewed by the Agency but are expected to increase approximately five-fold the number of patients treated with our technology in a new De Novo submission, to roughly 250 patients. We believe this substantially expanded body of clinical evidence will further strengthen the case for DrugSorb-ATR and help address the FDA's prior requests for additional supportive data."*

FDA Pre-Submission Meetings with FDA

CytoSorbents reported continued constructive engagement with the FDA regarding DrugSorb-ATR and its potential use in cardiac surgery patients taking ticagrelor (Brilinta). Recent pre-submission discussions helped align the Company and FDA on the mechanistic data and evaluation model needed to support the application. CytoSorbents plans to incorporate the FDA's feedback and conduct the study, with a new De Novo submission targeted for early 2027 under its Breakthrough Device designation. The submission is expected to include data from the STAR-T randomized trial, patient-level real-world evidence, new mechanistic and usability data, benchtop testing, and previously generated safety data, for which the FDA has identified no major safety concerns.

In parallel, the Company is pursuing a second regulatory pathway for DrugSorb-ATR in cardiac surgery patients taking direct oral anticoagulants (DOACs), including Eliquis and Xarelto. A recent FDA meeting addressed a number of questions and provided further clarity on the potential regulatory path, with a follow-up meeting expected in the near term. Management believes the combination of real-world evidence, consistent STAR-T trial results, and progress with the FDA provides a stronger foundation for future De Novo submissions and could ultimately support U.S. availability of DrugSorb-ATR for patients

CytoSorb Published Literature

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 EuroPCR meeting in Paris in May 2026, the company featured two oral presentations within the scientific program:

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

- Professor Matthias Thielmann presented 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.

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In October 2026, new data was presented at the European Association for Cardio-Thoracic Surgery (EACTS) Annual Meeting highlighting applications in blood thinner removal, post-operative shock, VA-ECMO support, and heart transplantation. In addition, new findings from the international COSMOS critical care registry were presented at the European Society of Intensive Care Medicine (ESICM) LIVES 2026 congress addressing sepsis, liver support, and VV-ECMO.

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.

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 of the core CytoSorb franchise going forward, the potential for a favorable FDA review of DrugSorb-ATR by mid-2027, unlocking the value of the HemoDefend-BGA asset, and importantly the achievement of positive operating cash flow, less restructuring costs, in Q3 2026. 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., Latin America, and Southeast Asia including Taiwan, as well as potential recovery of the Middle East. 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 on 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 analysis of real-world data 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.

Finally, we view HemoDefend-BGA as an exciting wild-card for investors, as it clearly has made significant progress from the last time we were updated on the program, and the importance of universal blood products like plasma and platelets that can be given to any patient regardless of blood type, has grown more visible with the war in Iran. The company noted that the first FDA approval of freeze dried plasma technology occurred in July 2026, which when potentially combined with low-titer “universal” plasma produced by HemoDefend-BGA, would create “freeze dried universal plasma”. This is the “holy grail” of plasma that can be stored and stockpiled without the need for refrigeration and then given on demand simply by adding water. The company highlights the potential for non-dilutive government

funding to fund clinical trials through FDA approval. We agree this asset has high strategic potential for the company and could be a significant value driver for investors.



Source: CytoSorbents investor presentation

ANNUAL FINANCIAL PROJECTIONS

Income Statement	Dec-23	Dec-24	Dec-25	Dec-26	Dec-27
Product Sales	***31,084,953***	***35,594,520***	**37,063,238**	**37,855,720**	**40,884,178**
Growth	*5.9%*	*14.5%*	*4.1%*	*2.1%*	*8.0%*
Cost of Goods Sold	***7,672,650***	***8,898,425***	**9,338,000**	**8,586,451**	**8,946,294**
%	*24.7%*	*25.0%*	*25.2%*	*22.7%*	*21.9%*
Depreciation & Amort	***1,459,066***	***1,570,104***	**1,234,000**	**1,545,950**	**1,545,950**
Gross Profit	***21,953,237***	***25,125,991***	**26,491,238**	**27,723,319**	**30,391,934**
Margin	*70.6%*	*70.6%*	*71.5%*	*73.2%*	*74.3%*
SG&A Expenses	***38,307,415***	***34,995,749***	**35,645,000**	**30,272,920**	**26,942,899**
% of sales	*123.2%*	*98.3%*	*96.2%*	*80.0%*	*65.9%*
Other	***0***	***0***	**510,000**	**0**	**0**
% of sales	*0.0%*	*0.0%*	*1.4%*	*0.0%*	*0.0%*
Research & Development	***15,594,442***	***6,916,181***	**5,085,000**	**4,653,500**	**3,955,475**
% of sales	*50.2%*	*19.4%*	*13.7%*	*12.3%*	*9.7%*
Amortization	***0***	***0***	**0**	**0**	**0**
% of sales	*0.0%*	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Operating Income	***(31,948,620)***	***(16,785,939)***	**(14,748,762)**	**(7,203,101)**	**(506,440)**
Margin	*-102.8%*	*-47.2%*	*-39.8%*	*-19.0%*	*-1.2%*
EBITDA	***(30,489,554)***	***(15,215,835)***	**(13,514,762)**	**(5,657,151)**	**1,039,510**
Margin	*-98.1%*	*-42.7%*	*-36.5%*	*-14.9%*	*2.5%*
Other Expenses/(Income)	***(2,046,012)***	***4,224,751***	**(8,762,000)**	**1,001,000**	**0**
%	*-6.6%*	*11.9%*	*-23.6%*	*2.6%*	*0.0%*
EBIT	***(29,902,608)***	***(21,010,690)***	**(5,986,762)**	**(8,204,101)**	**(506,440)**
%	*-96.2%*	*-59.0%*	*-16.2%*	*-21.7%*	*-1.2%*
Total Interest Exp (net)	***157,981***	***1,399,092***	**2,612,134**	**3,474,000**	**3,126,600**
%	*0.5%*	*3.9%*	*7.0%*	*9.2%*	*7.6%*
Net Profit Before Tax	***(30,060,589)***	***(22,409,782)***	**(8,598,896)**	**(11,678,101)**	**(3,633,040)**
%	*-96.7%*	*-63.0%*	*-23.2%*	*-30.8%*	*-8.9%*
Income Tax	***(813,739)***	***(1,690,825)***	**(401,000)**	**0**	**0**
% Effective Rate	*2.7%*	*7.5%*	*4.7%*	*0.0%*	*0.0%*
% Cash Tax Rate	*2.7%*	*7.5%*	*4.7%*	*0.0%*	*0.0%*
Minority Interests or Preferred Stock					
Net Profit	***(29,246,850)***	***(20,718,957)***	**(8,197,896)**	**(11,678,101)**	**(3,633,040)**
%	*-94.1%*	*-58.2%*	*-22.1%*	*-30.8%*	*-8.9%*
Non-recurring income (expense)				(1,181,000.0)	
Average Diluted Shares Outstanding	*44,656,391*	*54,441,811*	3,066,800	3,136,941	3,136,941
Reported FD EPS				(4.10)	
Zacks Cash EPS	***(0.65)***	***(0.38)***	**(2.67)**	**(3.72)**	**(1.16)**
Zacks EPS	***(0.65)***	***(0.38)***	**(2.67)**	**(3.72)**	**(1.16)**

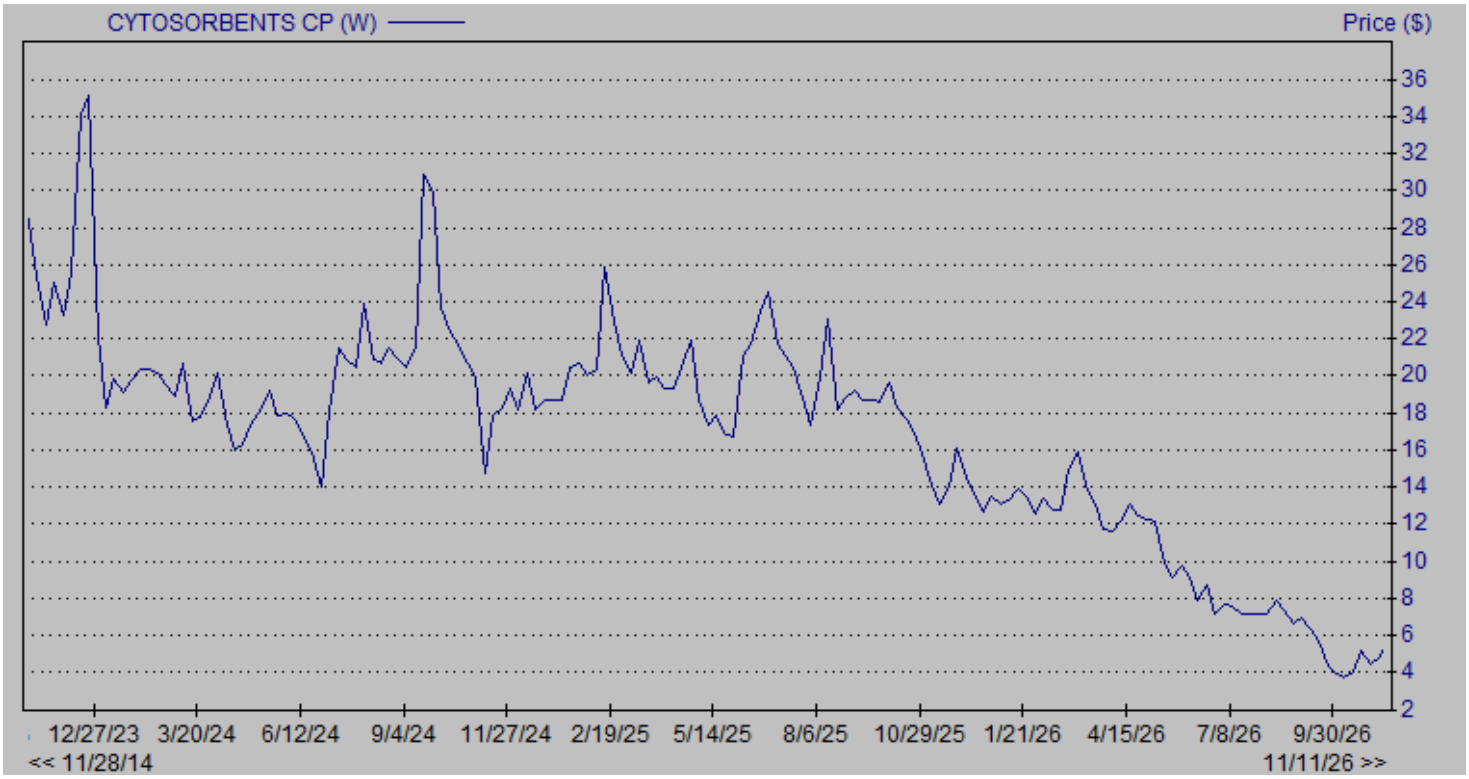
Source: Zacks analyst. 2023 & 2024 results are not split adjusted.

QUARTERLY FINANCIAL PROJECTIONS

	Q1/26A	Q2/26A	Q3/26A	Q4/26E
Product Revenues	**8,864,000**	**9,633,000**	**9,728,000**	**9,630,720**
Cost of Goods Sold	**2,384,000**	**2,182,000**	**1,998,000**	**2,022,451**
%	*22.3%*	*22.8%*	*23.3%*	*21.0%*
Depreciation	**350,000**	**402,000**	**402,000**	**391,950**
Gross Profit	**6,130,000**	**7,049,000**	**7,328,000**	**7,216,319**
%	*69.2%*	*73.2%*	*75.3%*	*74.9%*
SG&A Expenses	**8,149,000**	**7,964,000**	**7,352,000**	**6,807,920**
%	*91.9%*	*82.7%*	*75.6%*	*70.7%*
Other Expenses/(Income)	**0**	**0**	**0**	**0**
%	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Research & Development	**1,025,000**	**1,453,000**	**1,145,000**	**1,030,500**
%	*16.7%*	*20.6%*	*15.6%*	*14.3%*
Amortization	**0**	**0**	**0**	**0**
%	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Operating Income	**(3,044,000)**	**(2,368,000)**	**(1,169,000)**	**(622,101)**
%	*-34.3%*	*-24.6%*	*-12.0%*	*-6.5%*
EBITDA	**(2,694,000)**	**(1,966,000)**	**(767,000)**	**(230,151)**
%	*-30.4%*	*-20.4%*	*-7.9%*	*-2.4%*
Other Expenses/(Income)	**1,228,000**	**0**	**(227,000)**	**0**
%	*13.9%*	*0.0%*	*-2.3%*	*0.0%*
EBIT	**(4,272,000)**	**(2,368,000)**	**(942,000)**	**(622,101)**
%	*-48.2%*	*-24.6%*	*-9.7%*	*-6.5%*
Total Interest Exp. (net)	**857,000**	**868,000**	**892,000**	**857,000**
%	*9.7%*	*9.0%*	*9.2%*	*8.9%*
Net Profit Before Tax	**(5,129,000)**	**(3,236,000)**	**(1,834,000)**	**(1,479,101)**
%	*-57.9%*	*-33.6%*	*-18.9%*	*-15.4%*
Income Tax	**0**	**0**	**0**	**0**
% Effect Rate	*0.0%*	*0.0%*	*0.0%*	*0.0%*
Minority Interest & Preferred Stock	**0**	**0**	**0**	**0**
Net Profit	**(5,129,000)**	**(3,236,000)**	**(1,834,000)**	**(1,479,101)**
%	*-57.9%*	*-33.6%*	*-18.9%*	*-15.4%*
Non-recurring income (expense)		(1,181,000)		
Shares Outst.	3,136,941	3,140,335	3,146,710	3,146,710
Reported FD EPS		**(1.41)**		
Fully Diluted EPS	**(1.64)**	**(1.03)**	**(0.58)**	**(0.47)**

Source: Zacks analyst

HISTORICAL STOCK PRICE



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