NASDAQ: CYTH
cyclotherapeutics.com

06/21
Corporate Presentation

Forward-Looking Statements

Some of the information in this presentation relates to future events or future business and financial performance. Such statements constitute forward-looking information within the meaning of the Private Securities Litigation Act of 1995. Such statements can be only predictions and the actual events or results may differ from those discussed due to, among other things, the risks described in the public filings and other publications of Cyclo Therapeutics, Inc. Forward-looking statements are identified by words such as “anticipates”, “projects”, “expects”, “plans”, “intends”, “believes”, “estimates”, “target”, and other similar expressions that indicate trends and future events.

The market data and certain other statistical information used throughout this presentation are based on independent industry publications, governmental publications, reports by market research firms or other independent sources. Some data are also based on the Company’s good faith estimates. In addition, this presentation includes summaries of scientific activities and outcomes that have been condensed to aid the reader in gaining general understanding.

The information about Cyclo Therapeutics, Inc. and its subsidiaries is solely for information purposes and is not to be construed as an offer to sell or the solicitation of an offer to buy any security in any state.

Factors that could cause the Company’s results to differ materially from those expressed in forward looking statements include, without limitation, the Company’s need for additional capital; the Company’s reliance on its Trappsol® Cyclo™ product, which may never receive regulatory approval; the Company’s ability to commercialize any of its proposed drug products if it receives regulatory approval; the outcome of the Company’s clinical trials, which may not support the Company’s product claims or may result in adverse side effects; the cost and timing of the Company’s clinical trials; the Company’s reliance on third parties to conduct clinical trials and to produce its products; and other risks associated with being a clinical stage biotechnology company.

Investment Opportunity

Deep expertise with Cyclodextrins with over 10 years of patient exposure

Lead program, Trappsol® Cyclo™ demonstrated to be safe and effective in multiple clinical studies in NPC

Significant market opportunity in high value indications

Leadership team with proven expertise

Manufacturing at commercial scale inclusive of 60-month stability and 96hr In-use stability

Currently Targeting 2 Serious Diseases with Unmet Medical Need

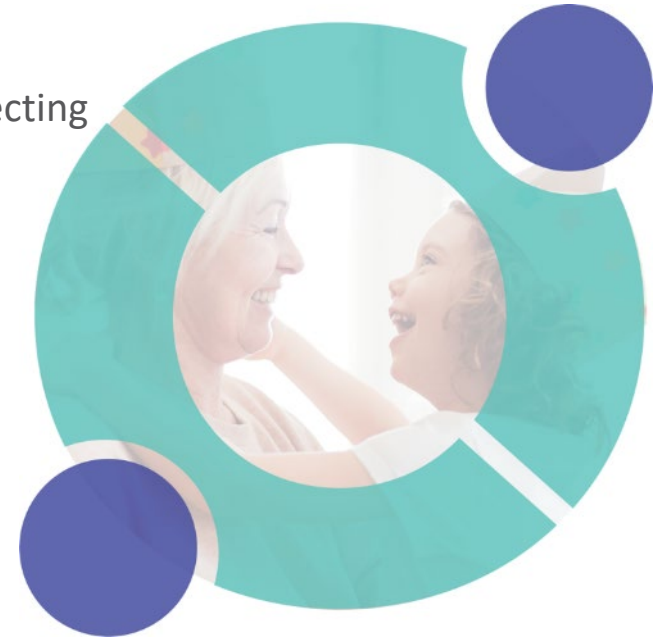
Niemann Pick Disease Type C

Fatal and progressive genetic disorder
Orphan indication affecting >9,000 in 80 countries (~400 in U.S. / 320 EU5) [1]

Alzheimer's Disease

6th leading cause of death affecting 5 million people in the U.S.[2]

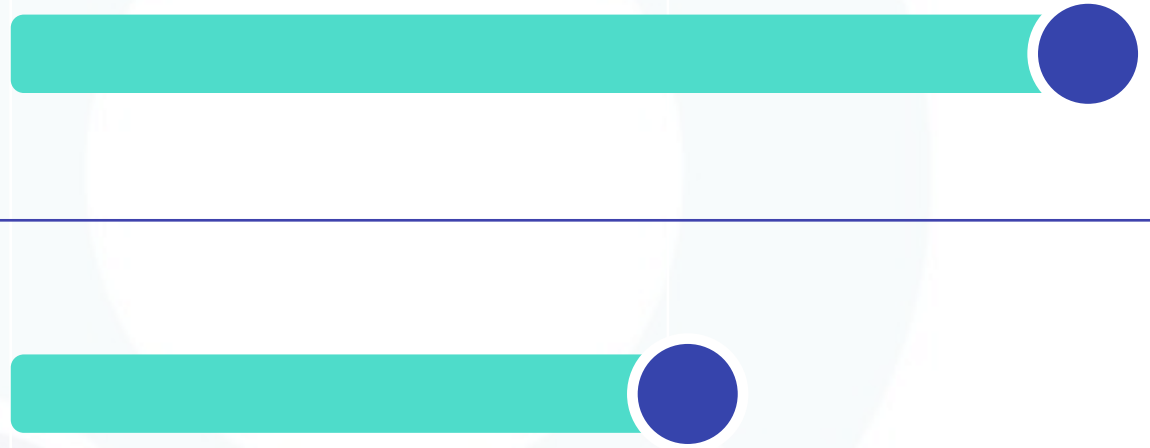
Platform technology has potential to fuel pipeline expansion opportunities



1. April 2021, Tessellon Inc. (former Kantar Health experts with 25+ years of epidemiology and forecasting experience), (www.Tessellon.com); Exhaustive literature search with a broad range of MESH terms in United States + 79 other countries.
2. https://www.alz.org/alzheimers-dementia/facts-figures

Pipeline

Program	Indication	Preclinical	Phase 1	Phase 2	Phase 3	Milestones
Trappsol® Cyclo™	Niemann-Pick Disease Type C					TransportNPC **(Pivotal Phase 3 Study)** Site activation underway, commencing enrollment
Trappsol® Cyclo™	Alzheimer's Disease					FDA feedback from Type B meeting supports Phase 2 development strategy Expected Filing IND in H2 2021



Leadership Team with Proven Experience

N. Scott Fine
Chief Executive Officer & Director

Green Mountain Coffee · Keurig · GVN Global Virus Network

Joshua M. Fine
Chief Financial Officer

ICAGEN (a Ligand company) · EGE

Gerald F. Cox, M.D., Ph.D.
Acting Chief Medical Officer

editas MEDICINE · SANOFI GENZYME · Cerezyme imiglucerase for injection · elaprase (idursulfase) · ALDURAZYME (LARONIDASE)

Michael Lisjak
Chief Regulatory Officer

Pfizer · SANOFI GENZYME · accenture

Sharon H. Hrynkow, Ph.D.
Chief Scientific Officer

NIH · GVN Global Virus Network

Russ Belden
Acting Chief Commercial Officer

Genentech

Jeffrey L. Tate, Ph.D.
Chief Operating Officer, Chief Quality Officer & Director

University of Minnesota · PULSE Combustion Systems · natural biologics

Lori McKenna Gorski
Global Head of Patient Advocacy

SANOFI GENZYME · IONIS · PTC Therapeutics

Niemann-Pick Disease Type C

Site activation underway,
commencing enrollment in
pivotal Phase 3 study, TransportNPC

Niemann-Pick Disease Type C (NPC)

Rare, fatal and progressive genetic disorder characterized by a defect in the NPC1 protein causing cholesterol and lipids to accumulate in cells of major organs leading to cell and tissue dysfunction.

Average Life Expectancy:

Before age 5 if symptoms appear in infancy

Age 20 in juvenile onset

Increasing diagnosis in later onset disease

Symptomology Inclusive of Systemic and Neurological Manifestations

- Enlarged liver and spleen (hepatosplenomegaly)
- Severe liver disease and dysfunction
- Respiratory infections and lung disease
- Loss of cognitive skills
- Difficulty with speech
- Seizures
- Difficulty with swallowing and feeding
- Difficulty coordinating movement (ataxia)
- Abnormal eye movements (vertical supranuclear gaze palsy)
- Poor muscle tone (hypotonia)

No U.S. Approved NPC Therapies
Only 1 E.U. Approved Therapy

Significant Competitive Advantages

Company	Product / Route	Descriptor	Potential Indication
cyclo therapeutics	Trappsol® Cyclo™ (Intravenous every 2 weeks, Home infusions)	Met all primary endpoints of the Phase 1 and Phase 1/2 studies showing favorable safety and efficacy. Site activation underway, commencing enrollment in pivotal Phase 3 study, TransportNPC.	Systemic and Neurological
ACTELION	Zavesca* (Oral 3 times daily)	EU and other international countries approved. Off-label in the US.	Neurological
ORPHAZYME	Arimoclomol (Oral 3 times daily)	FDA provided a Complete Response Letter June 17, 2021 citing additional qualitative and quantitative evidence was needed to show the drug's effectiveness. EMA submission completed November 2020, expected feedback H2 2021.	Neurological
IntraBio	IB1001 (Oral 3 times daily)	Phase 2 study active, patients 6 years of age and older.	Neurological

*Only approved Treatment (non-US)

NPC Prevalence

Incidences

1/100,000
(~35 per year in U.S.)

Existing Cases

>9,000 in 80 countries
(~400 in U.S. / 320 EU5)

Of Diagnosed Patients

~ 3% are age 3 and below
~ 97% are age 3 and above
~ 60% age 16 and above

Median Survival

Early Infantile (2m-2): 4.6y
Late Infantile (3-6): 9.4y
Juvenile (7-15): 15.4y
Adolescent/Adult (16+): 12.2y

*Scope: United States + 79 other countries; *Commissioned Tessellon Inc – former Kantar Health experts with 25+ years of epidemiology and forecasting experience, (www.Tessellon.com); *Exhaustive literature search with a broad range of MESH terms.

Cyclo Therapeutics Scientific Rationale for NPC

Mechanistic attributes of Trappsol® Cyclo™

- Trappsol® Cyclo™ is a hydroxypropyl-beta-cyclodextrins (HPBCDs) and has an affinity for cholesterol. What distinguishes the clinical program is the Intravenous Route of Administration allowing the drug to reach major peripheral organs; clearing cholesterol from cells peripherally…

Figure 1: Mechanism of Action

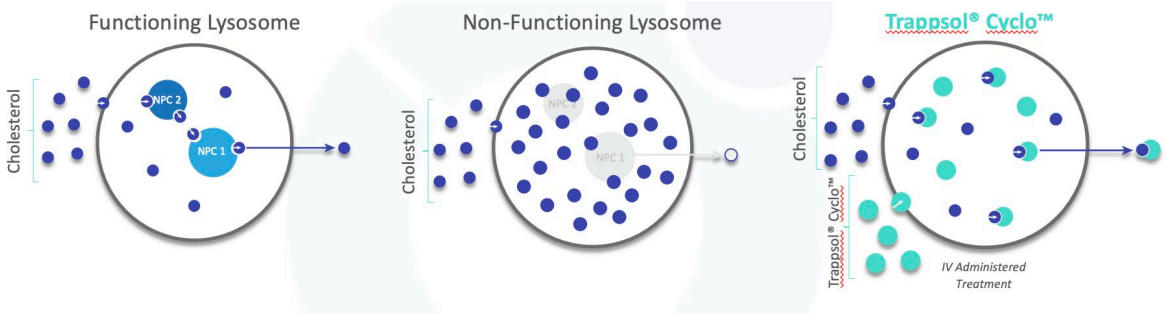
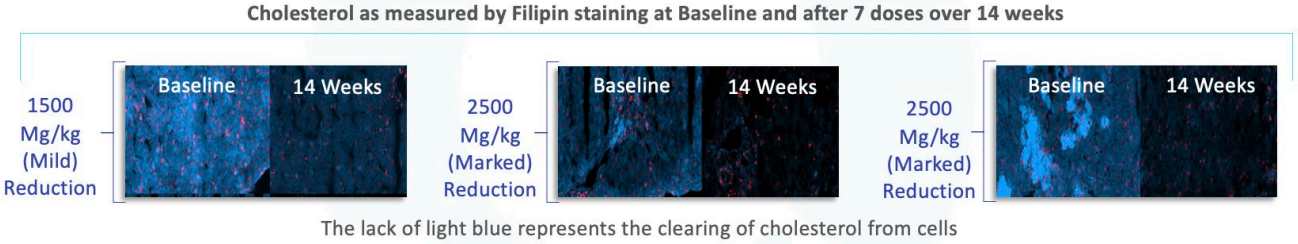


Figure 2: Cholesterol Clearance from Liver cells



- and centrally, affects CNS biomarkers and underpin neurologic outcomes as demonstrated in our current data from our completed and ongoing studies.

Figure 3: Reduction in Brain Cholesterol

24S-hydroxycholesterol, a cholesterol metabolite from the CNS transported across the BBB, increases in serum following IV administration of HPβCD. Shown here are data after 1st dosing and 7th dosing. 24S-hydroxycholesterol increases in serum following IV infusion of HPβCD, signaling removal of excess cholesterol from the brain.

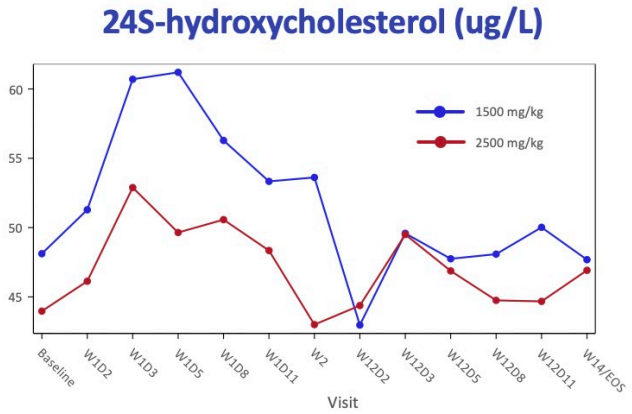
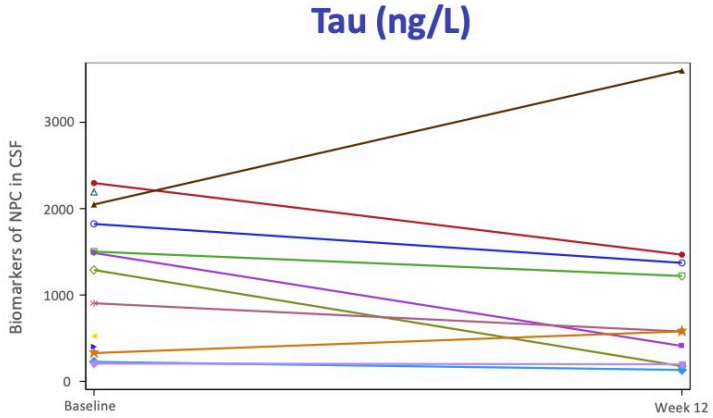
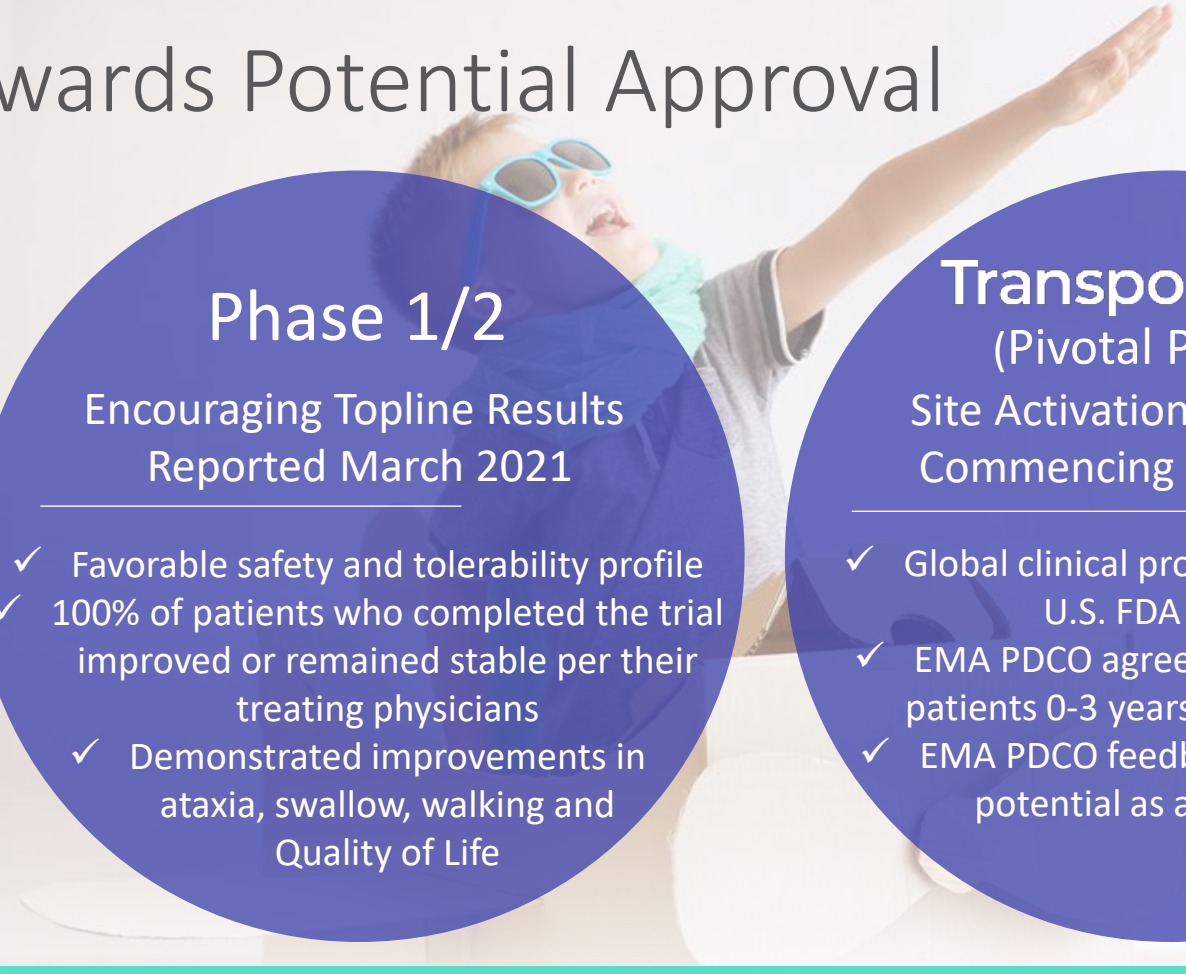


Figure 4: Reduction in Tau

Tau levels as measured in the CSF are shown here for 10 NPC patients who had lumbar punctures prior to treatment with HPβCD and after seven doses. **Six of 10 patients** showed a reduction in Tau levels, two remained stable, and two increased, no dose-response relationship.



Trappsol® Cyclo™
Development Path Towards Potential Approval



Phase 1

Completed May 2020

- ✓ Favorable safety and tolerability profile
- ✓ Removal of trapped cholesterol
- ✓ Drug present in CSF
- ✓ Increase in 24S biomarker
- ✓ Decrease in Tau

Phase 1/2

Encouraging Topline Results Reported March 2021

- ✓ Favorable safety and tolerability profile
- ✓ 100% of patients who completed the trial improved or remained stable per their treating physicians
- ✓ Demonstrated improvements in ataxia, swallow, walking and Quality of Life

Transport NPC (Pivotal Phase 3)

Site Activation Underway, Commencing Enrollment

- ✓ Global clinical protocol agreed with U.S. FDA and EMA
- ✓ EMA PDCO agreed to Sub-study in patients 0-3 years of age in EU only
- ✓ EMA PDCO feedback stated it has potential as a preventative

Orphan Drug Designation in U.S. | Fast Track Status in U.S.| Potential for Priority Review Voucher (PRV) in U.S

Rare Pediatric Disease Designation | Orphan Designation in EU | EMA Pediatric Investigational Plan Adopted

Applying Development Insights to Ph3 Program

Clinical Attributes for Trappsol® Cyclo™

- Has a favorable safety profile, no permanent hearing losses associated, high patient acceptability and is able to be used in a Home setting

Data represented:

- The data presented are from Topline results from our 201 study and a data cut from September 2020 from our 102 study. This data has not been formally QC'd.
  - A Zero (0) or Negative number represents stabilization or improvement

Summary for applying to Ph3 Study:

- Primary Endpoint is the mean change from baseline to 48wks or 96wks as measured by improvement in the NPC-SS of Trappsol® Cyclo™ over Placebo
- Designed with FDA and EMA feedback to deliver higher probability of clinical and regulatory success:
  - Increased Patient Size for increased power of study
  - Included ASIS scoring within inclusion criteria to have a more accurate view of patient trajectory
  - Increased Study duration to 2-years with a 1-year Interim Analysis to capture disease progression
  - Finalized Primary Endpoints with 4D-NPC-SS (AM, FM, SP and SW) for United States and 5D-NPC-SS (AM, FM, SP, SW and CO) for Non-US.

Based on natural history data with no intervention, patients would be expected to decline on average by +1.5 points per year.

Dose	Age	Study	Patient ID	17D-NPC-SS (201 Primary was -1pt reduction in ≥ 2 Domains)	Change Total Score (17D)	Change Total Score (5D)
1,500	15	201	301-02	Withdrawn before wk 12	-	-
1,500	34	201	001-01	Withdrawn after wk24	6	5
1,500	6	201	302-02*	Withdrawn after wk36	8	4
2,000	39	201	201-01	Week 48 (EM-1, FM-1,D7-1)	-3	-1
1,500	2	201	301-04	Week 48 (AM-3,FM-1)	-2	-3
1,500	4	201	003-03	Week 48 (MM-1,D1-1,D6-1)	-2	0
2,000	11	201	301-03*	Week 48 (AM-1,SW-2,D1-2,D2-1,D3-1,D4-1,D5-1)	-4	0
2,000	2	201	301-05	Week 48 (EM-1,CO-2)	-1	-1
2,000	2	201	003-02	Week 48 (FM+1,CO+2,D2+1)	4	3
2,500	21	201	001-02	Week 48 (SW-1,SZ-2,D1-1,D4-1)	-3	1
2,500	3	201	302-01	Week 48 (EM-1,SP-1)	1	0
2,500	8	201	003-01*	Week 48 (D1-1,D4-1)	3	2
1,500	37	102	001-01	10 months	0	0
1,500	30	102	001-02*	10 months	0	-1
1,500	69	102	001-07*	7 months	0	0
1,500	64	102	001-08*	6 months	0	0
1,500	20	102	001-09*	8 months	-3	0
1,500	60	102	001-11*	8 months	-2	0
2,500	21	102	001-04*	10 months	-3	0
2,500	18	102	001-10*	5 months	-2	0
				Mean Change: All patients for 201 = 11	**0.64**	**0.91**
				Mean Change: All patients for 201 (11) and enrolled 102 (8) = 19	**-0.16**	**0.47**
				Mean Change: Patients who completed 201 = 9	**-0.78**	**0.11**
				Mean Change: Patients who completed 201 (9) and enrolled in 102 (8) = 17	**-1.00**	**0.0**
				Mean Change: Patients not on miglustat who completed 201 (2) and enrolled in 102 (7) = 9	**-1.22**	**0.11**
				Percentage of all paitents who have Improved or Stabilized from total of 19	**74%**	**74%**

* No Miglustat

AM, ambulation; FM, fine motor; SP, speech; SW, swallow; CO, cognition; EM, saccadic eye movement; MM, memory; SZ, seizure management
D = modifier domains, including cataplexy, narcolepsy, behavioral issues, respiratory, incontinence.

Transport NPC

Pivotal Phase 3 Study in Niemann-Pick Disease Type C

Site Activation Underway, Commencing Enrollment

Double-blind, Randomized, Placebo-controlled, Parallel-group study

Number of Subjects	93	
Current Sites	23 across 9 countries	United States, United Kingdom, Italy, Germany, Spain, France, Poland, Israel, and Australia
Duration	96-week trial, with Interim Analysis at 48 weeks	
Dose	2000 mg/kg via IV infusion	
Primary Endpoint	NPC Composite Severity Score	
Secondary Endpoints	SCAFI, Swallow, Vineland-2	
Exploratory Endpoints	Inclusive of Speech, Liver and Lung function	

Patient Progress: A Case Study

61-year-old patient with NPC: Improvements with intravenous (IV) Trappsol® Cyclo™ over 15 months

Diagnosed at age 59 years: slurred speech, ataxia, vertical gaze palsy, mild dysmetria/dystonia, mild hearing loss, mild short term memory loss with intact cognition, cough with eating

Completed Phase 1 trial and received 7 infusions IV Trappsol® Cyclo™; no toxicities

Currently enrolled on extension protocol and receives IV Trappsol® Cyclo™, 1500 mg/kg every 2 weeks at home

Patient and spouse see notable improvements in speech and swallow, seen within hours of the infusion and maintained for 5-10 days

- Increased speech fluency and word finding, more comfortable to communicate, more interactive and happy, positive impact on quality of life
- Takes solids and un-thickened liquids without cough; rare cough on saliva every few weeks
- Clinical severity score improved by 1 point due to change in cough; scale for speech does not include changes in speech fluency/word finding
- Cognition remains stable

Alzheimer's Disease

Filing IND in H2 2021 for potential Phase 2 study

Alzheimer's Disease
The Most Common Form of Dementia

An irreversible, progressive neurologic disorder that slowly degrades memory, thinking and social skills that affects a person's ability to function independently.

Similarities with NPC

Cognitive decline

Elevated levels of tau

Amyloid plaques

- Affects more than 5 million people in the U.S.[1]
- 6th leading cause of death in the U.S. [1]
- 500,000 new cases every year[2]
- 13.8 million cases projected by 2050[1]

1. https://www.alz.org/alzheimers-dementia/facts-figures
2. https://www.brightfocus.org/alzheimers/article/alzheimers-disease-facts-figures

Trappsol® Cyclo™ for the Treatment of Alzheimer's Disease

Targeting Reduction of Amyloid Beta and Tau

FDA feedback from Type B meeting supports Phase 2 development strategy for Alzheimer's Disease asset; IND filing on track for H2 2021

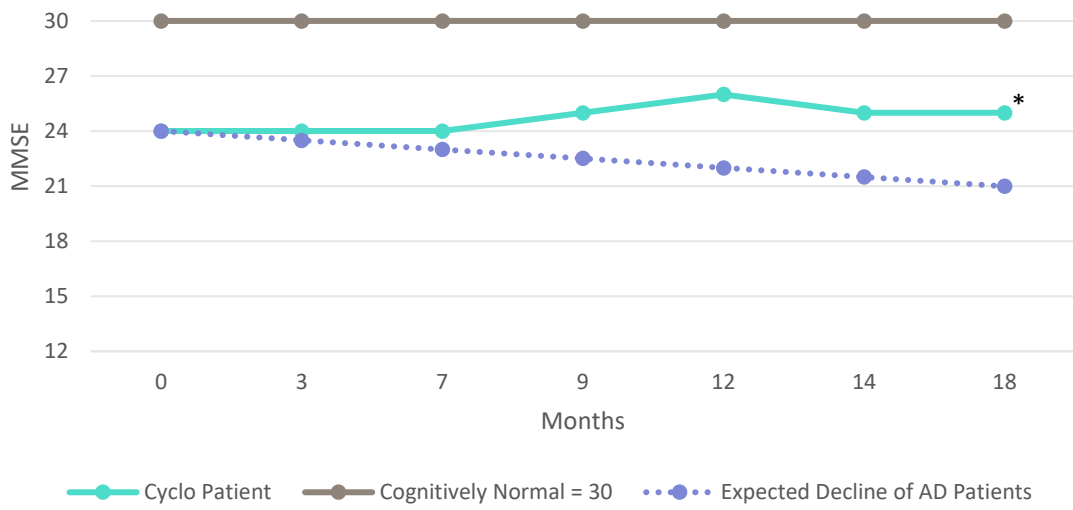
Positive Results in Alzheimer Patient Under Compassionate Use Program

FDA authorized use of Trappsol® Cyclo™ in geriatric patient

- 18 months of monthly IV infusion
- Disease did not progress
- Family reported less volatility and greater word-finding ability

18 months of data has led to development of Phase 2 protocol

Alzheimer's Mini-Mental State Evaluation Performance[1]



"The patient has shown cognitive and neurologic stability in serial examinations during this study that indicates possible benefit as there would be an expected measurable cognitive and functional decline over an 18-month period in persons with Alzheimer's disease dementia"
Treating Physician

*Treating physician reported the 18-month score as a range between 24-26

1: Rate of MMSE decline in AD patients: Eldholm, RS et al, J. Alz. Disease, 61: 1221, 2018. Suh, GH et al., Intl. J. Geriatric Psychiatry, 19(9): 817, 2004.

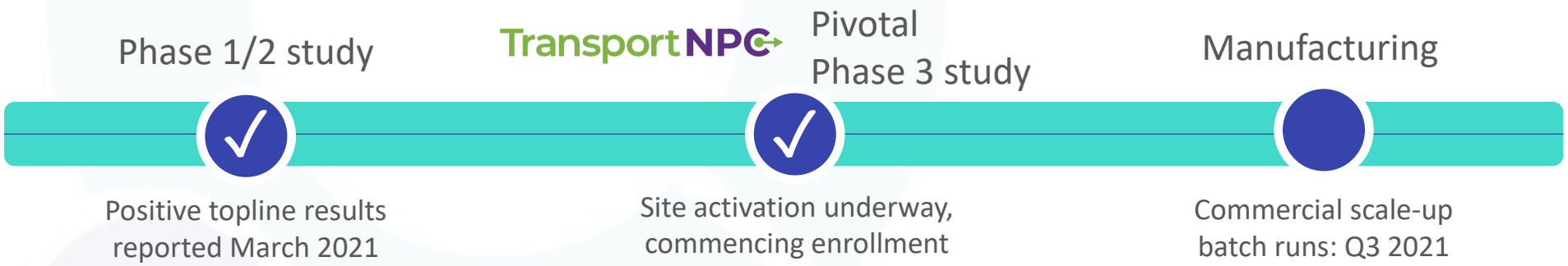
Corporate Overview

Financial and Capital Markets Snapshot

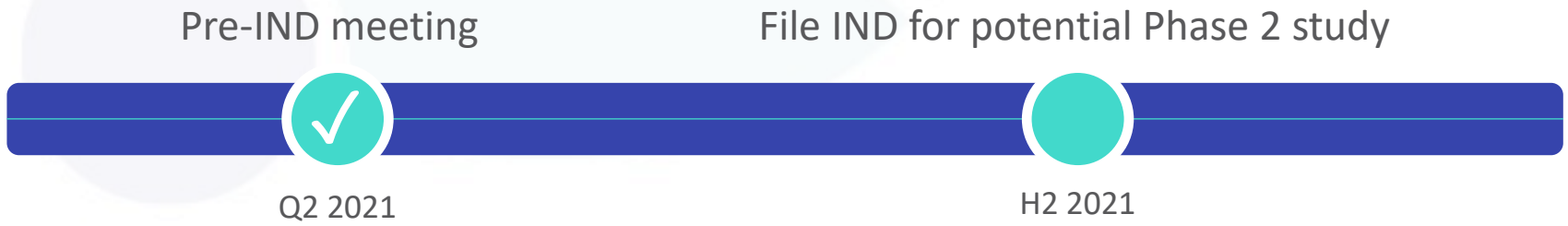
Cash Balance[1]	Market Cap[2]	Shares Outstanding[3]	Average Volume[2]
$15.5M	~$66M	~6.4M	~527K

Target Upcoming Milestones with Potential to Drive Value

Niemann-Pick Disease Type C



Alzheimer's Disease



1: As of March 31, 2021; 2: As of June 15, 2021; 3: As of May 3, 2021

Investment Summary

Leveraging over 3 decades of experience with cyclodextrins to advance clinically de-risked programs towards approval in diseases with unmet medical need

Lead asset demonstrated to be safe and effective with over 10 years of patient exposure

TransportNPC

Site activation underway, commencing enrollment in pivotal Phase 3 study in Niemann-Pick Disease Type C

Significant market opportunity with no approved therapy to treat both systemic and neurological manifestations of NPC

Planning and executing pre-approval commercialization imperatives

Pipeline expansion into Alzheimer's Disease (AD), patent pending

AD IND filing on track for H2 2021

- Multiple value-driving milestones expected throughout 2021
- Platform technology with opportunity to expand into multiple indications
- Leadership team with proven track-record in execution and value creation

Board of Directors

Markus W. Sieger

Chairman

President & CEO of Polpharma Group
Independent Director

F. Patrick Ostronic

Vice Chairman

Officer of US Pharmacia International & CFO of The USP Group
Independent Director

N. Scott Fine

Chief Executive Officer & Executive Director

Jeffrey L. Tate, Ph.D.

Chief Operating Officer, Chief Quality Officer & Executive Director

C.E. “Rick” Strattan

Founder, Former Director of Marketing & Business Development of Pharmatec
Independent Director

William S. Shanahan

Former President & COO of Colgate-Palmolive
Independent Director

Randall M. Toig, M.D.

Associate Professor at Northwestern University, Northwestern Memorial Hospital
OBGYN Surgeon & Serial Entrepreneur
Independent Director

Scientific Advisory Board

Rita Colwell, Ph.D.

Co-Chair

Internationally recognized scientist, microbiologist and founder of CosmosID, a privately held bioinformatics firm.
Distinguished University Professor at U. Maryland and Johns Hopkins University. Former Director, National Science Foundation (1998 - 2006).
National Medal of Science awardee. Member, US National Academy of Sciences.

Sharon H. Hrynkow, Ph.D.

Co-Chair

Neuroscientist with more than 25 years' experience in global health arena, public and private sectors.
Senior executive at NIH.
First president of non-profit Global Virus Network.
Former Member of President's Council of Advisors on Science and Technology.
5 years at Cyclo Therapeutics leading clinical and scientific programs.

M. Flint Beal, M.D.

Key Opinion Leader in Neurodegenerative Diseases

Internationally recognized authority on neurodegenerative diseases. University Professor, Weill Cornell Medical College.
Leads a highly productive research laboratory focused on Alzheimer's Disease, Huntington's Disease, and ALS and published seminal manuscript on use of cyclodextrins to improve memory in an animal model of Alzheimer's Disease.
Member, National Academy of Medicine.

Caroline Hastings, M.D.

Key Opinion Leader in Niemann-Pick Disease Type C

Pediatric hematologist oncologist, Director of NeuroOncology, and Professor of Pediatrics, UCSF Benioff Children's Hospital Oakland.
First physician in US to use cyclodextrins for treatment in NPC, compassionate use.
Advisor to US and Australian NPC Advocacy organizations and to physicians globally on NPC.

Benny Liu, M.D.

Key Opinion Leader in Niemann-Pick Disease Type C

Gastroenterologist at Alameda Healthy System, CA and Highland Hospital. Globally recognized expert in lipid metabolism.
First to discover that cyclodextrins release cholesterol from cells using an animal model.
Assistant Clinical Professor, UCSF.

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Thank you!