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biopharmaceuticals

Developing Transformative, Accessibly-Priced, Small Molecule Immunotherapy Medicines

December 2021

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Forward-Looking Statements

The information in this presentation may include "forward-looking statements," within the meaning of U.S. securities legislation, relating to the business of Provectus Biopharmaceuticals, Inc. and its affiliates (Provectus or the Company), which are based on the opinions and estimates of Company management and are subject to a variety of risks and uncertainties and other factors that could cause actual events or results to differ materially from those projected in the forward-looking statements. Forward-looking statements are often, but not always, identified by the use of words such as "seek," "anticipate," "budget," "plan," "continue," "estimate," "expect," "forecast," "may," "will," "project," "predict," "potential," "targeting," "intend," "could," "might," "should," "believe," and similar words suggesting future outcomes or statements regarding an outlook.

The safety and efficacy of the agents and/or uses under investigation have not been established. There is no guarantee that the agents will receive health authority approval or become commercially available in any country for the uses being investigated or that such agents as products will achieve any particular revenue levels.

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Risks, uncertainties, and assumptions include those discussed in the Company's filings with the U.S. Securities and Exchange Commission (SEC), including those described in Item 1A of Provectus' Annual Report on Form 10-K for the period ended December 31, 2020 and the Company's Quarterly Report on Form 10-Q for the period ended September 30, 2021, and also on slide no. 26 of this presentation (A Discussion of Potential Risks).

Executive Summary

Developing transformative, accessibly-priced, small molecule immunotherapy medicines for different diseases

- **Provectus Biopharmaceuticals (PVCT):** A clinical-stage biotechnology company developing a pipeline of next-generation immunotherapy drug product candidates and potential targets based on a class of small molecules called halogenated xanthenes.

- **Medical science:** Innovative, versatile, consistent, and reproducible science drives clinical, product, and financial value compared to standard-of-care treatments. Provectus' investigational immunogenic-small molecule therapy for solid tumor cancers may halt disease progression, improve survival, and increase the durability of current treatments via combination therapy.

- **Oncology business plan:** Pursuing regulatory, clinical, and commercial milestone achievements from clinical- and pre-clinical-stage drug candidates and potential targets for the treatment of solid tumor cancers that contemplate approximately $125 billion in total addressable markets.

- **Additional drug pipeline value:** A medical science platform and drug pipeline that support a clinical-stage dermatology candidate, several discovery-stage targets in dermatology, ophthalmology, infectious diseases, and animal health, and two currently proprietary medical applications.

Disruptive Medical Science

Provectus' scientific platform, the foundation of the Company's drug pipeline, can transform disease treatment. Affordable pricing of Provectus drug candidates can change the paradigm of drug accessibility and, thus, health equity.

Safety: Proprietary lead molecule rose bengal sodium, a new molecular entity, has a tolerability and a versatility that leverage rose bengal's 50+ years of multi-purpose use as an FDA-accepted diagnostic for the eye in adults and as an FDA-approved diagnostic for liver function in adults, pregnant women, and neonatal infants. With a half-life of ~30 minutes, the molecule quickly exits the body unmetabolized after therapeutic treatment.

Selectivity: Targets and/or binds to diseased or abnormal tissues, cells, and proteins. Uniquely activates certain immune system signaling pathways. Generates specific, functional immune responses.

Effectiveness: Directly kills disease or binds to abnormal proteins; generates multivariate immune activation and response. Treatment trains the immune system against future disease and biological abnormality.

Cost: Significantly more affordable than approved 1st-line treatments, with the potential to dramatically expand global market access in a highly-profitable manner.

Product features: Developing for out-patient settings. Shippable, storable, and useable at room temperature. Does not require special preparation or safeguards. Readily visualized during administration.

The Business Plan for Provectus' Cancer Immunotherapy Drug

A 3-prong oncology strategy pursuing advancements that can be widely recognized by the medical, regulatory, and investment communities

A

Rapid Regulatory Validation

Melanoma and Neuroendocrine Cancer

Achieve drug approval in Australia for intralesional (IL) PV-10 treatment of:

- In-transit metastases in melanoma, and
- Refractory neuroendocrine cancer.

Success here could, among other things, validate Provectus' science platform and drug pipeline, generate sales, pave the way for global drug approvals of these initial indications, and catalyze pharmaceutical company partnerships.

$225MM NPV In-transit Melanoma

$560MM NPV Neuroendocrine Cancer

B

High-Profile Product Wins

Breast and Pancreatic Cancers

Achieve interim analyses of:

- An IL PV-10 Phase 2 trial of neoadjuvant-to breast conservation surgery, and
- A combination therapy PV-10 + chemotherapy Phase 1b/2 trial of 1st-to-3rd line pancreatic cancer metastatic to the liver.

Success here could advance PV-10 into late-stage development for these indications, plausibly open the door for treating earlier stages of disease (eg, breast cancer), and potentially further validate PV-10's synergy with standard-of-care drugs (eg, pancreatic cancer).

$2.2B TAM Breast Cancer

$2.5B TAM Pancreatic Cancer

C

The Big Story: Immunotherapy 3.0

All Solid Tumor Cancers

Achieve in vivo proof-of-concept for oral PV-10 as a treatment for high-risk and refractory adult solid tumor cancers, followed by making an IND filing and initiating a Phase 1b/2 clinical trial for:

- Breast cancer,
- Colorectal cancer,
- Head and neck cancer, and
- Testicular cancer.

Success here could potentially establish oral PV-10 as Immunotherapy 3.0 – a complement to and/or, eventually, a replacement for current cancer immunotherapy treatments.

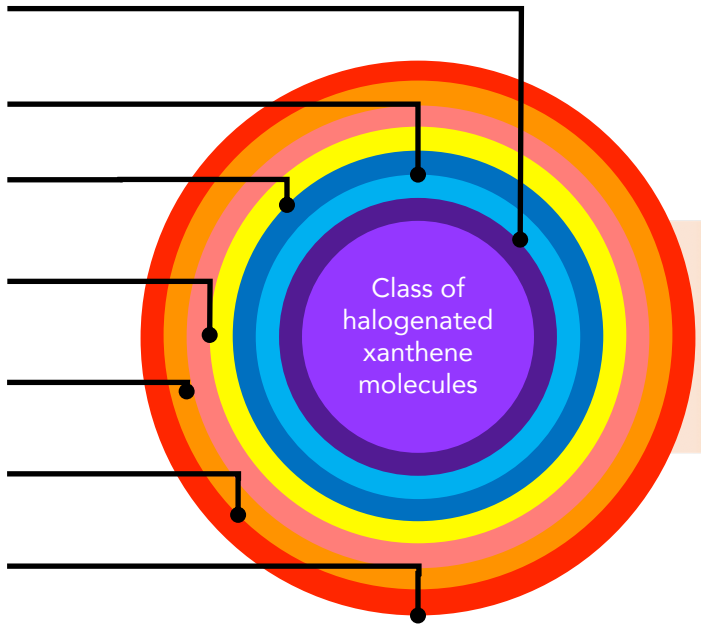
$120B+ TAM

* NPV = Net Present Value. NPV figures are from current Provectus business plan and financial modeling. TAM =Total Addressable Market. IND = Investigational New Drug. TAM figures are from a 2019 Grand View Research report on the 2018 global breast reconstruction market, a Research and Markets 2021 report on the 2019-2029 global pancreatic cancer market, and a Research and Markets 2019 report on the 2019-2027 global solid tumor cancer treatment market.

Intellectual Property (IP) and IP Protection

A expanding IP moat supports our vision of transformative, accessibly-priced, immunotherapeutic disease treatments conducive to global market access

- Lead molecule rose bengal sodium: a new molecular entity
- Composition of matter and synthesis patents
- Manufacturing trade secrets
- Combination therapy patents and patent applications
- New routes of administration patent applications
- New disease area patent applications
- Novel drug delivery patent applications



IP and IP protection support the business plan

A Rapid Regulatory Validation

In-transit melanoma and neuroendocrine cancer

B High-Profile Product Wins

Breast cancer, combination therapy with chemotherapy for pancreatic cancer, and combination therapy with immune checkpoint blockade for advanced melanoma

C The Big Story: Cancer Immunotherapy 3.0

Potential 1st-to-2nd line complement and competitor for the treatment of all solid tumor adult cancers

+ Additional Drug Pipeline Value

☆ To date, current Provectus leadership has been awarded six patents from the U.S. Patent and Trademark Office, has made 10 patent applications in 10 patent areas (including 9 new), with more in progress, and is pursuing a lengthened patent runway from the early-2030s to at least the early-2040s.

Additional Drug Pipeline Value

Provectus' drug development and regulatory strategy for solid tumor cancer treatment represents near-term steps for increasing market value. The Company's science platform supports a drug candidate pipeline that can pursue numerous multi-billion dollar total addressable markets.

Additional Drug Pipeline Value

Disease	Pre-clinical Data	Clinical Data
Dermatological disorders	✓	✓
Corneal health	✓	✓
Drug-resistant antibiotics	✓	
Animal health	✓	✓
Currently proprietary	✓	

Treatments for Other Diseases: Market Sizing

Disease areas driven by existing and ongoing Provectus clinical and preclinical data and research

$34B TAM
Dermatological disorders

$23B TAM
Corneal health

$41B TAM
Drug-resistant antibiotics

$50B TAM
Animal health

$47B TAM
Currently proprietary

$100B+ TAM
Currently proprietary

* TAM figures are from a Research and Markets 2021 report on the 2020 global dermatology drug market, a 2021 Glaukos (GKOS) investor presentation, a 2021 Grand View Research report on the 2020 global antibiotics market, a 2020 Mordor Intelligence report on the 2021-2026 global veterinary medicine market, a 2019 Markets and Markets report on the 2019-2024 proprietary market, and a 2021 Market Data Forecast report on the 2021-2026 global proprietary market.

Science Platform

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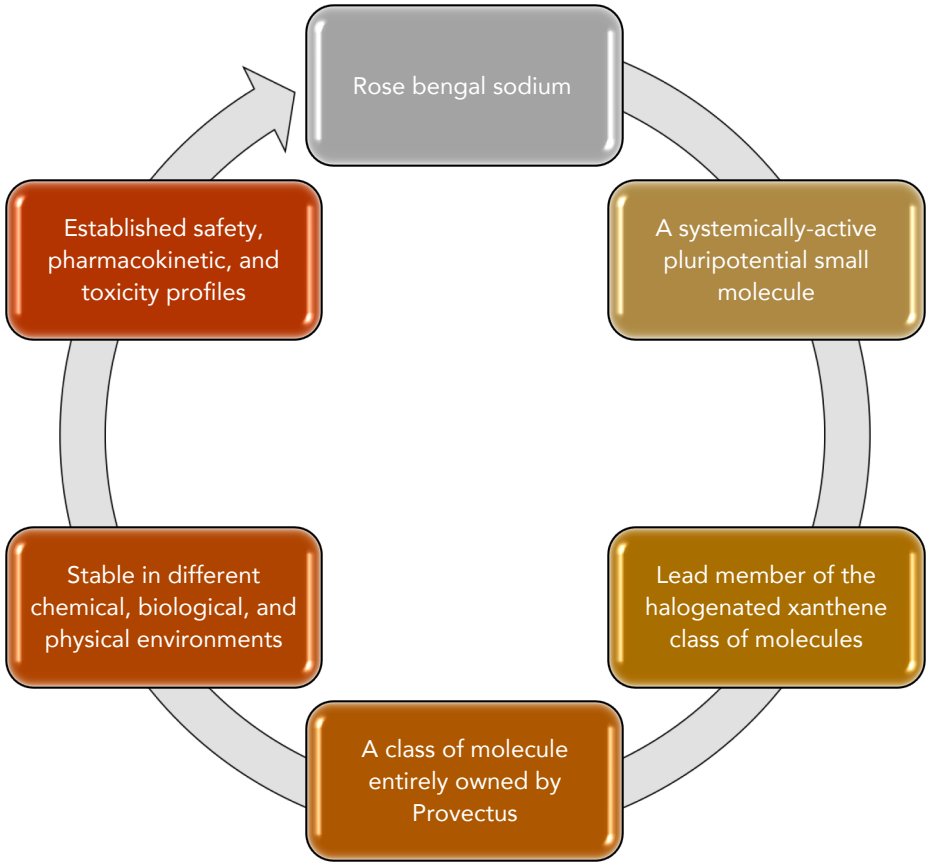
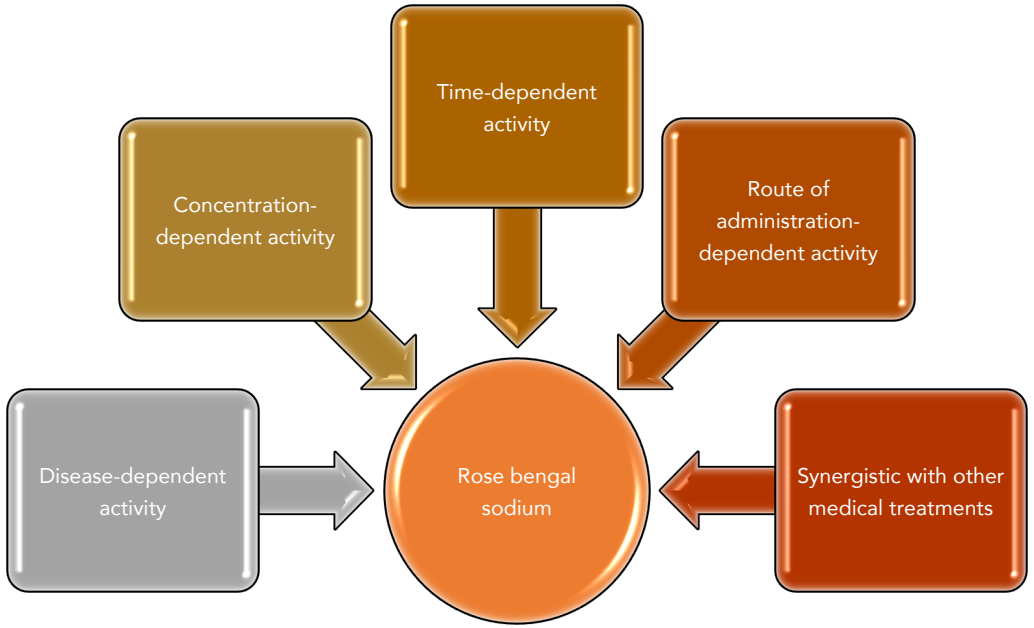
A Validated Multi-Disease Treatment Platform

- Rose bengal sodium, a halogenated xanthene, possesses unique physical chemistry science
  - Broad-spectrum prophylactic and therapeutic medical applications
- Prerequisite mechanistic step: contact between rose bengal sodium and disease, leading to:
  - Immunogenic disease death,
  - Rose bengal sodium-based treatment-specific innate immune activation, and
  - A disease-specific functional adaptive immune response
- Rose bengal sodium displays consistent mechanistic behavior across different indications of a disease and across different disease areas
  - A validated multi-disease treatment platform
  - Potentially, a universal contributor to different medical treatments in combination therapies



Rose Bengal Sodium

- A small molecule and active pharmaceutical ingredient
  - Stable; biochemically environmentally-adaptive
  - Nominal formula: 4,5,6,7-tetrachloro-2′,4′,5′,7′-tetraiodofluorescein disodium[1]
- Highly-pure, pharmaceutical-grade, rose bengal drug substance (RB DS) is produced by Provectus' Quality-by-Design manufacturing process
  - Avoids the formation of uncontrolled substance-related contaminants present in commercial grades of rose bengal; together with other contaminants, this commercial material fails to meet global regulatory CMC thresholds
  - RB DS manufacture follows ICH Guidelines for pharmaceutical ingredients and cGMP regulations[2]
  - Multiple Provectus cGMP RB DS lots have surpassed multi-year stability testing
- Currently protected by global intellectual property[3] into the 2030s (see slide #6)
  - Composition of matter
  - Manufacturing methods and techniques
  - Pharmaceutical synthesis standards
  - Trade secrets
  - Combination therapy use for different disease areas



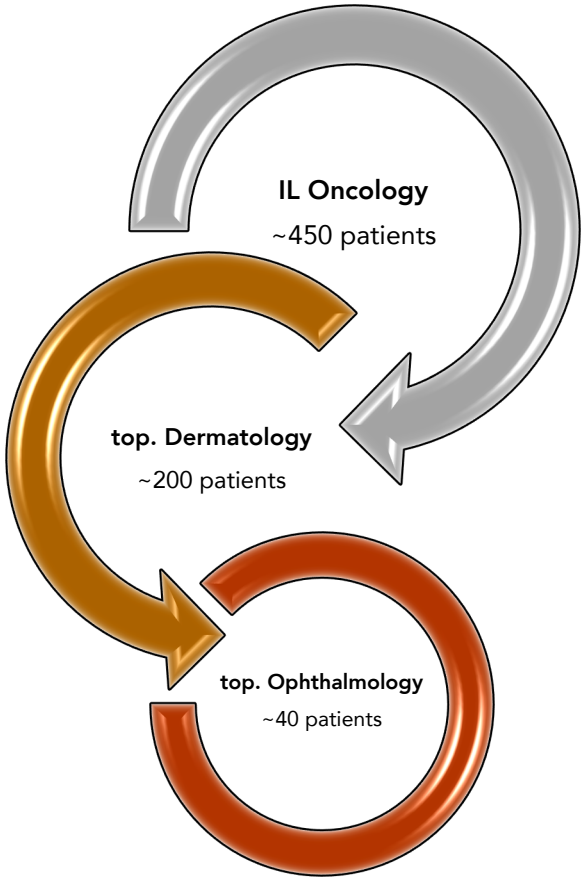
* FDA = U.S. Food and Drug Administration. CMC = Chemistry, Manufacturing, and Control. cGMP = current Good Manufacturing Practices.

[1] The first version of rose bengal, created in the 1880s by Gnehm, had 2 iodine atoms.

[2] International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) Guidelines.

[3] International patent awards have been received in Canada, China, Hong Kong, India, Japan, South Korea, Mexico, and EPO (Austria, Belgium, Switzerland, Germany, France, Spain, United Kingdom, Greece, Ireland, Italy, Netherlands).

PV-10

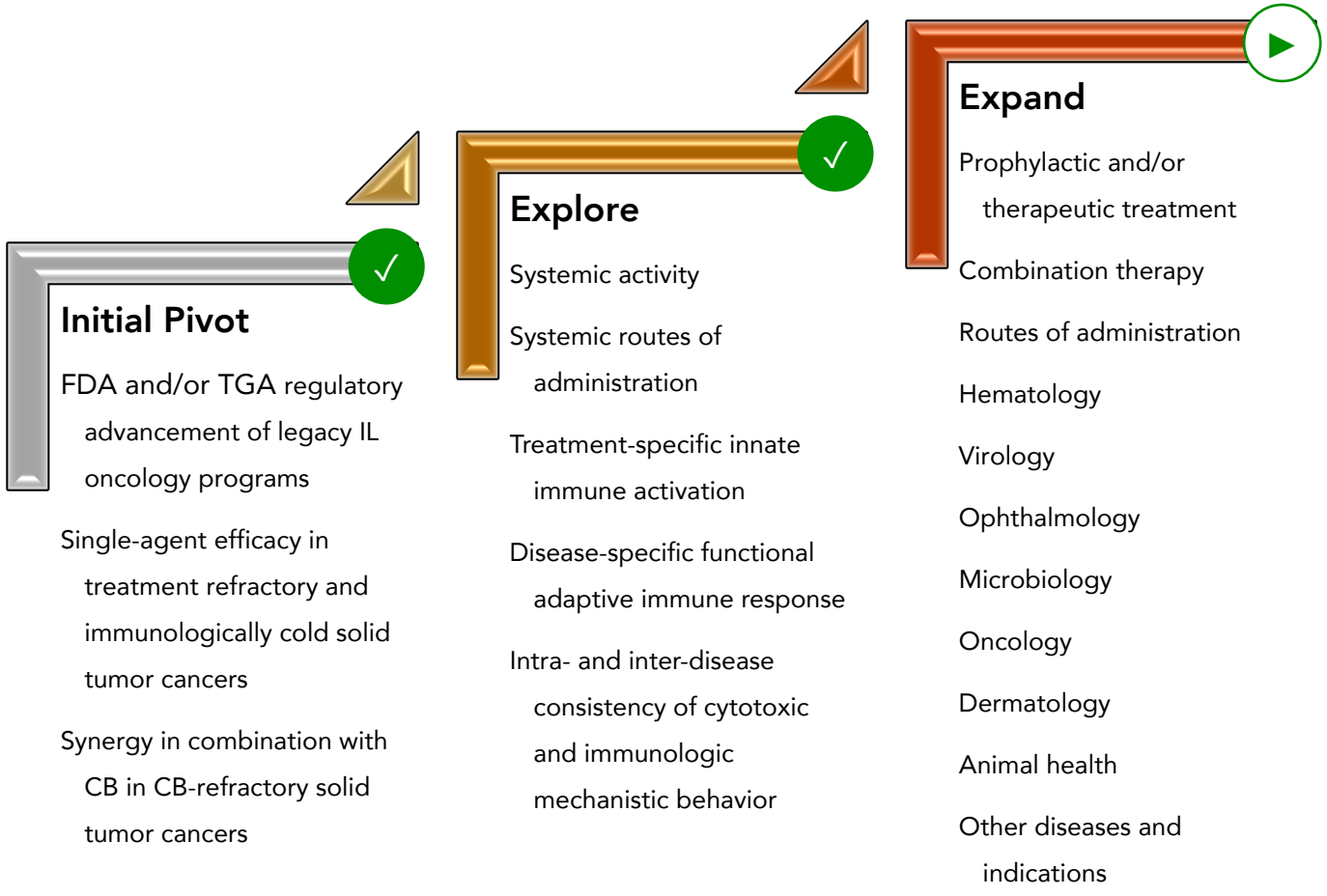


- PV-10 is a systemically-active injectable pharmaceutical formulation of Provectus' rose bengal sodium
  - Registration study-ready investigational drug product (PV-10 DP)
  - Multiple lots of PV-10 DP have surpassed multi-year stability testing
  - Shipped, stored, and used at room temperature
- Provectus has developed two clinical-stage investigational formulations of PV-10; a third is under development
  1. Intralesional administration for oncology (10% rose bengal sodium): skin and liver cancers
  2. Topical administration for dermatology (0.01%): inflammatory dermatoses (psoriasis and atopic dermatitis)
  3. Topical administration for ophthalmology (0.1%)
- Research into new routes of administration and formulations is ongoing
  - Oral, inhaled, intranasal, top., and/or intravenous for hematology, oncology, virology, microbiology, animal health, and other diseases

	completed (✓)
PO Hematology	• *In vitro* ✓ • *In vivo* ✓
PO Oncology	• *In vitro* ✓ • *In vivo* ongoing
PO, inh. & IN Virology	• *In silico* ✓ • *In vitro* ✓ • In vivo ongoing
top. and PO Microbiology	• *In vitro* ✓ • top., PO, and IV admin contemplated
top. Ophthalmology	• *In vitro* ✓ • *In vivo* ✓ • Additional studies contemplated

* IL = intralesional (aka intratumoral). top. = topical. PO = oral. inh. = inhaled. IN = intranasal. IV = intravenous.

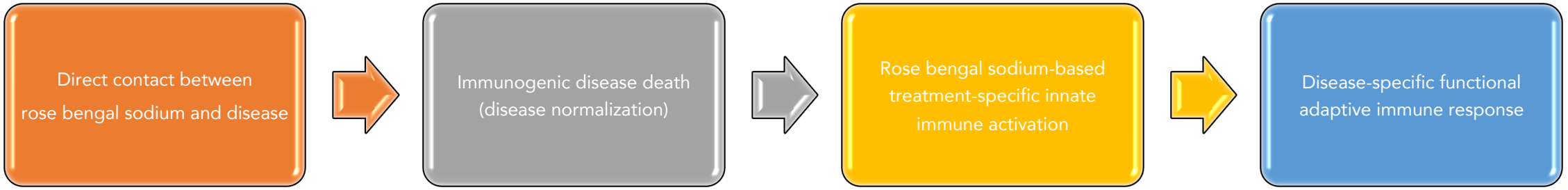
Provectus Drug Discovery and Clinical Development



- Our science platform has demonstrated PV-10's innovative, multi-faceted, single-agent strengths
  - Systemic activity
  - Treatment-specific innate immune activation
  - Disease-specific functional adaptive immune response
  - Systemic deliverability
  - Consistent mechanistic behavior
- In solid tumor cancers, PV-10 can be the key contributor to immune checkpoint blockade (CB) treatment for immunologically cold and CB-refractory disease
  - Reproducible clinical outcomes
  - Treatment synergy: improved efficacy, orthogonal mechanisms, and non-overlapping adverse event profiles
  - Restoration of CB drug function in CB-refractory disease

* FDA = US Food and Drug Administration. TGA = Australia's Therapeutics Good Administration.

The Rose Bengal Sodium Effect



- Oncology[P,C]
- Dermatology[C]
- Virology[P]
- Microbiology[P]
- Ophthalmology[P,C]
- Pulmonology[P,C]
- Neurology[P]

- Oncology[P,C]
- Dermatology[C]
- Hematology[P]
- Virology[P]

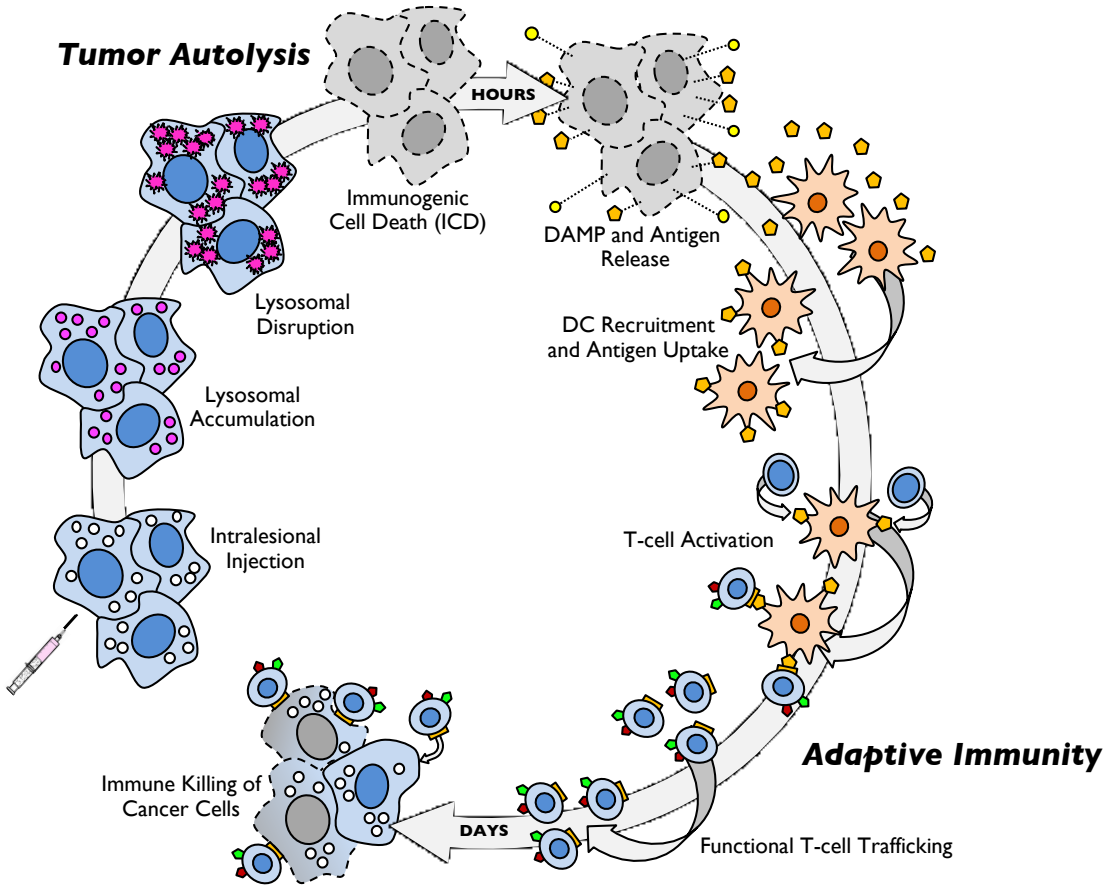
- Oncology[P,C]
- Dermatology[C]
- Hematology[P]

- Oncology[C]
- Dermatology[P]

Prerequisite step	Initial contact between rose bengal sodium and disease (e.g., cancer cells, psoriatic cells, virus-infected host cells, etc.)	✓
Disease death or repair	Immunogenic cell death (e.g., melanoma, colon cancer, pancreatic cancer); disease normalization	✓
Innate immune activation	Treatment-specific (e.g., DAMPs in oncology; STING in hematology; IL-17A, IL-22, IL-26, IL-36, and other interleukins in dermatology)	✓
Adaptive immune response	Disease-specific functional T cell responses (eg, CD8+, CD4+, NKT, and NK in oncology)	✓

* Provectus, affiliated research collaborator, or third-party data: [P] Pre-clinical. [C] Clinical. DAMP = danger-associated molecular pattern. STING = stimulator of interferon genes. On this slide, IL = interleukin.

PV-10 Immuno-Oncology Cycle: Monotherapy



- Injection of PV-10 into tumor tissue
  - Rapid PV-10 uptake into tumor lysosomes destabilizes them, triggers lysosomal disruption, leading to functional immunogenic cell death (ICD)
  - This process can occur within hours of tumor injection
- ICD causes the release of DAMPs and tumor antigens
  - ICD also yields STING activation
  - Dendritic cell (DC) recruitment and antigen uptake
- Antigen presentation to immature T cells serves to activate, educate, and mature these T cells into functional ones: primarily CD8 cytotoxic T cells, and also CD4 and NKT cells
  - Initiation of adaptive immunity occurs within the first week of tumor injection by PV-10

Seminal references to date

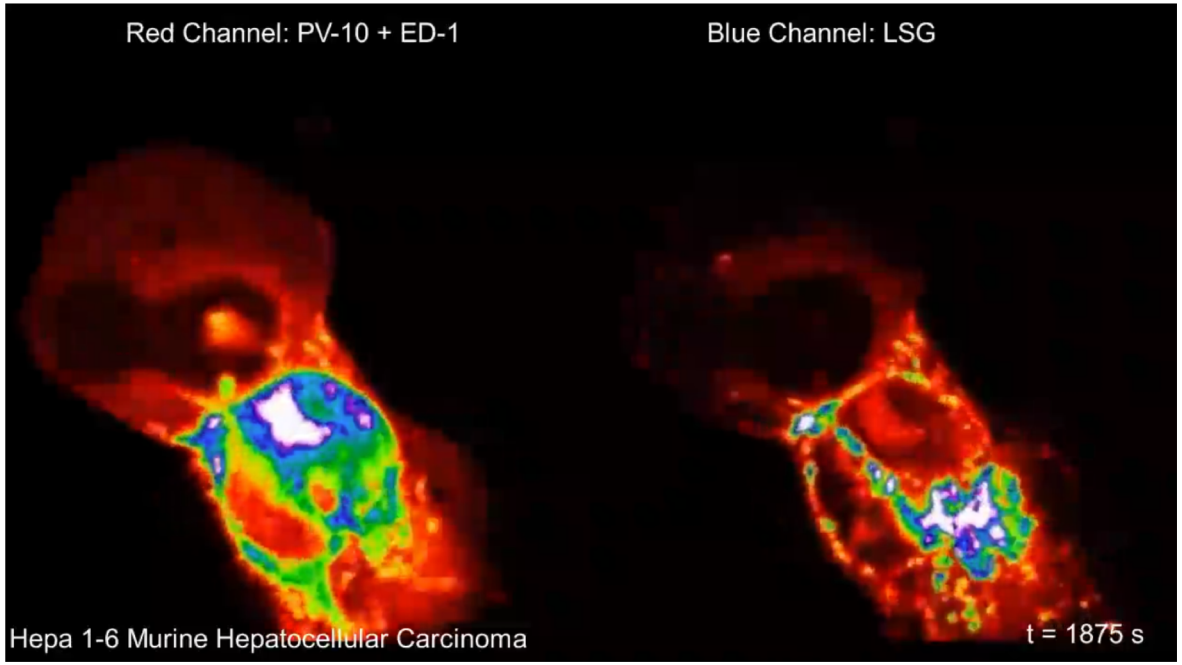
(1) Wachter et al. Functional Imaging of Photosensitizers using Multiphoton Microscopy. *Proceedings of SPIE* 4620, 143, 2002.

(2) Liu et al. Intralesional rose bengal in melanoma elicits tumor immunity via activation of dendritic cells by the release of high mobility group box 1. *Oncotarget* 7, 37893, 2016.

(3) Qin et al. Colon cancer cell treatment with rose bengal generates a protective immune response via immunogenic cell death. *Cell Death and Disease* 8, e2584, 2017.

Lysosomal Targeting: Cancer Cell Death via Rose Bengal Sodium

- Rose bengal sodium-induced autolytic cell death (death by self-digestion) in Hepa1-6 murine hepatocellular carcinoma cells in this Provectus video of the process; video of individual cells in tissue culture is provided in 30-second frames (~1 hour of elapsed time)
  - Ethidium homodimer 1 (ED-1) stains DNA, but is excluded from intact nuclei
  - Lysosensor green (LSG) stains intact lysosomes
  - Exposure to rose bengal sodium triggers the disruption of lysosomes, followed by nucleus failure and autolytic cell death
- Identical responses have been shown in HTB-133 human breast carcinoma, seen in this Provectus video of the process (a duration of ~2 hours), and H69Ar human MDR small cell lung carcinoma[1]
- Cancer cell autolytic cell death was reproduced in neuroblastoma cells by Provectus research collaborators
  - Lysosomes are disrupted upon exposure to rose bengal sodium[2]



[1] Wachter et al. Functional Imaging of Photosensitizers using Multiphoton Microscopy. *Proceedings of SPIE* 4620, 143, 2002.

[2] Swift et al. Potent in vitro and xenograft antitumor activity of a novel agent, PV-10, against relapsed and refractory neuroblastoma. *OncoTargets and Therapy* 12, 1293, 2019.

Consistency: The Rose Bengal Sodium Effect across Disease Areas

	Oncology		Dermatology	Hematology	Virology	Microbiology	Ophthalmology
Route of administration	IL	PO	top.	PO	PO, inh., IN	top., PO, IV	top.
Most recent stage of work	Clinical	in vivo	Clinical	in vivo	in vivo	in vitro	in vitro/in vivo
Prerequisite step	✓	✓	✓	✓	✓	✓	✓
Disease death or repair	✓	✓	✓	✓	✓	✓	✓
Innate I/S activation	✓	TBD	✓	✓	TBD	TBD	TBD
Adaptive I/S response	✓	TBD	TBD	TBD	TBD	TBD	TBD

- Some examples of the consistent Rose Bengal Sodium effect across disease areas and indications:
  - Cytotoxic: All National Institutes of Health's (NIH's) National Cancer Institute (NCI)-60 human tumor cell lines; 11 primary or relapsed pediatric leukemia cell lines[1]; SARS-CoV-2 (NIH's National Center for Advancing Translational Sciences [NCATS] COVID-19 OpenData Portal); bacterial, viral, and fungal keratitis, and drug-resistant keratitis[2]
  - ICD is disease- and concentration-dependent in oncology and hematology
  - PV-10-treatment causes the release of DAMPs in melanoma (CB-naïve single-agent, CB-naïve PV-10-CB combination, and CB-refractory PV-10-CB combination)[C,3], colorectal cancer[P,4], and pancreatic cancer[P,6]
  - STING is an important anti-cancer and anti-viral innate immune signaling pathway; PV-10-specific activation of this innate immune signaling has been shown in hematology[6]

* IL = intralesional (aka intratumoral). top. = topical. PO = oral. inh. = inhaled. IN = intranasal. IV = intravenous. SARS-CoV-2 = Severe acute respiratory syndrome coronavirus 2 (COVID-19). DAMP = danger-associated molecular pattern. STING = stimulator of interferon genes. [P] Pre-clinical. [C] Clinical.

[1] Swift et al. In Vitro Activity and Target Modulation of PV-10 Against Relapsed and Refractory Pediatric Leukemia. 60th American Society of Hematology (ASH) Annual Meeting and Exposition, 2018.

[2] Arboleda et al. Assessment of Rose Bengal vs. Riboflavin Photodynamic Therapy for Inhibition of Fungal Keratitis Isolates. *Am J Ophthalmol* 158(1): 64–70.e2, 2014.

[3] Liu et al. Intralesional rose bengal in melanoma elicits tumor immunity via activation of dendritic cells by the release of high mobility group box 1. *Oncotarget* 7, 37893, 2016; Zager et al. Response for combination of PV-10 autolytic immunotherapy and immune checkpoint blockade in checkpoint-refractory patients. Melanoma Bridge, 2020.

[4] Qin et al. Colon cancer cell treatment with rose bengal generates a protective immune response via immunogenic cell death. *Cell Death and Disease* 8, e2584, 2017.

[5] Innamarato et al. Intralesional injection of Rose Bengal augments the efficacy of gemcitabine chemotherapy against pancreatic tumors. Society for Immunotherapy of Cancer (SITC) Annual Meeting 2020.

[6] Thakur et al. Association of Heat Shock Proteins as Chaperone for STING: A potential link in a key immune activation mechanism revealed by a novel anticancer agent PV-10. American Association for Cancer Research (AACR) Virtual Annual Meeting 2020.

Drug Candidate Pipeline

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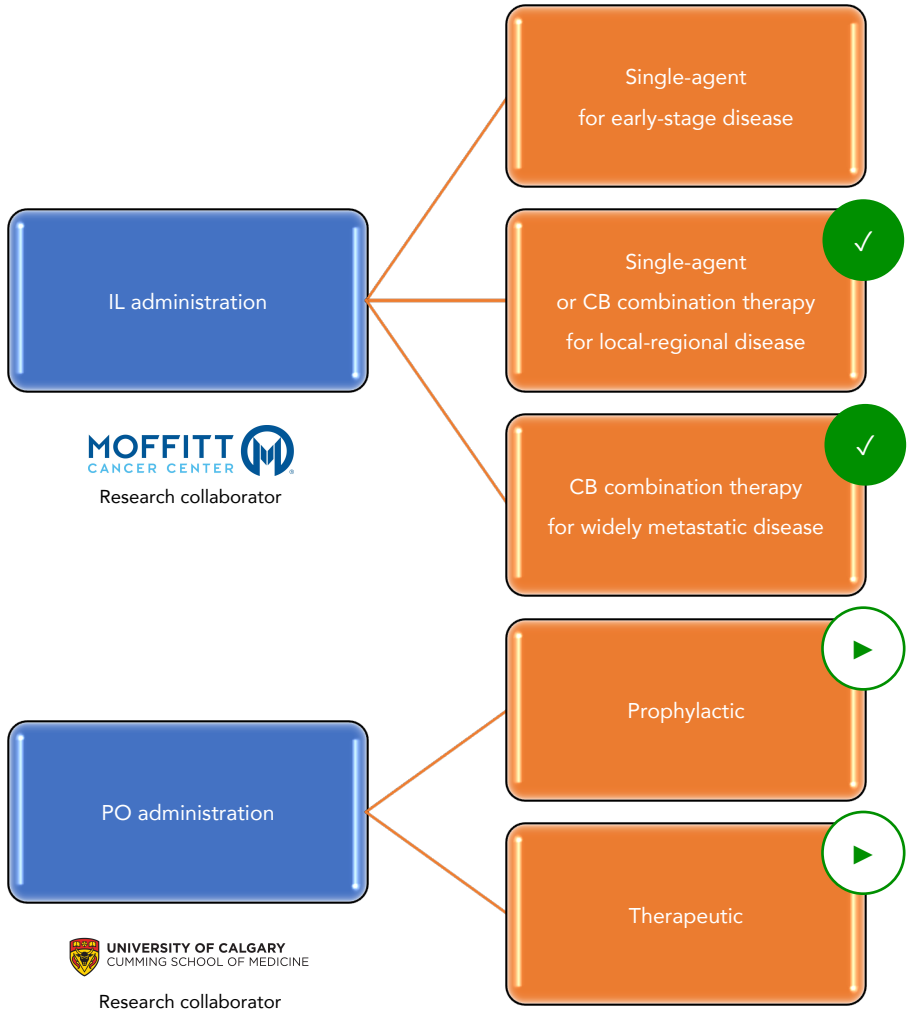
Oncology

- More than 450 patients have been treated with IL PV-10
  - Melanoma and non-melanoma cancers of the skin
  - Cancers of the liver
- IL administration: Elucidated, reproducible cytotoxic and immunotherapeutic mechanisms of action
  - Agnostic to tumor type
  - Innate immune activation (DAMPs, including HMGB1)
  - Functional adaptive immune response (CD8, CD4, NKT, and NK cells)
  - Immunity to re-challenge (*in vivo* proof-of-concept achieved)
  - Transferable immunity (*in vivo* proof-of-concept achieved)
- Developing oral administration for high-risk adult cancers[1]
  - Preliminary *in vivo* proof-of-concept achieved for colon cancer
  - Target cancers: breast, colorectal, head and neck, liver, and pancreatic
  - Positioning: single-agent prophylactic and/or single-agent and combination therapy therapeutic



* DAMP = danger-associated molecular pattern. HMGB1 = High mobility group box 1. IL = intralesional. CB = immune checkpoint blockade.

[1] Current data: Tran et al. Pre-clinical evaluation of PV-10 for in vitro anti-tumor activity in refractory and high-risk adult solid tumors. ASCO 2021. Also: In vitro testing of PV-10 as an anti-cancer agent for solid tumors.

Intralesional PV-10 Monotherapy

Cancer Type	PV-10-Injected Disease			Overall Patient Disease				
	# of Lesions	Response	Response Criteria	# of Patients	Response	Median Durability of Response	Median Survival	Response Criteria
Meta-analysis: In-transit melanoma[1]	774 (median 1 injection)	• 56% CR • 64% ORR • 78% DCR	RECIST	184	Not reported	• TTR: 2.4 months • TTP: Not reached • TTF: Not reached	• OS: 44.9 months • 10-year OS: 21% • DSS: 53.8 months	RECIST
Phase 1: Hepatocellular carcinoma[2]	10 (1 injection)	• 30% ORR • 90% DCR	mRECIST	7	Not reported	Not reported	• OS: Not reached (0-112+ months) • DSS: Not reached • 4 alive	n/a
Phase 1: Colorectal cancer metastatic to the liver[2]	6 (1 injection)	• 67% DCR	mRECIST	6	Not reported	Not reported	• OS: 26.8 months (0-97+ months) • DSS: 26.8 months • 2 alive	n/a
Phase 1: Neuroendocrine cancer metastatic to the liver[3]	19 (median 1 injection)	• 42% ORR	RECIST	12	84% DCR	• PFS: 9.2 months	• 32.2 months • 6 alive	RECIST

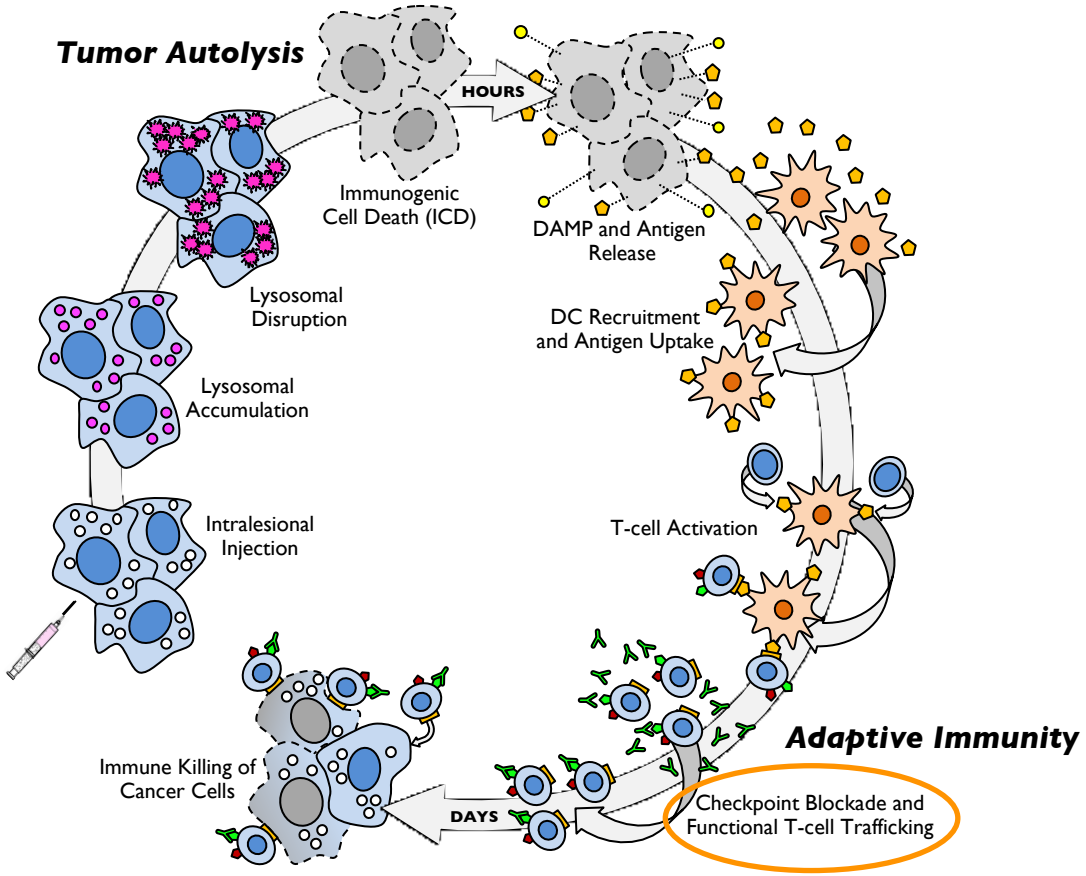
* CR = complete response. ORR = objective response rate. DCR = disease control rate. RECIST = Response Evaluation Criteria in Solid Tumors. mRECIST = modified RECIST. TTR = Time-to-response. TTP = Time-to-progression. TTF = Time-to-treatment failure. PFS = progression-free survival. OS = overall survival. DSS = disease specific survival.

[1] Wachter et al. Lesion-Level Response to Single-Agent PV-10 in Stage III Cutaneous Melanoma. Society for Melanoma Research (SMR) 2021 Congress.

[2] Patel et al. Oncolytic immunotherapy of hepatic tumors with intralesional rose bengal disodium. ePoster Gallery of the canceled Society of Interventional Radiology (SIR) 2020 Annual Scientific Meeting.

[3] Submitted abstract.

PV-10 Immuno-Oncology Cycle: +Checkpoint Blockade



- PV-10 + immune checkpoint blockade (CB)
  - Pembrolizumab[§#], nivolumab[§#], ipilumab+nivolumab[§], and avelumab[#]
- The PV-10-induced, disease-specific, functional T cell response is enhanced and boosted in combination with CB
- In CB-refractory disease, PV-10 restores disease-specific T cell function, which is also prognostic of clinical response
- The systemic immune response to PV-10 treatment has been has been clinically demonstrated and mechanistically identified in multiple studies of cutaneous melanoma
  - CB-naïve Stage III patients treated with single-agent PV-10
  - CB-naïve Stage IV patients treated with PV-10 + PD-1
  - CB-refractory Stage IV patients treated with PV-10 + PD-1

§ Clinical trial. # Expanded access.

Seminal references to date: (1)-(3) on slide #14.

(4) Liu et al. T cell mediated immunity after combination therapy with intralesional PV-10 and blockade of the PD-1/PD-L1 pathway in a murine melanoma model. PLoS One 13, e0196033, 2018.

Additional current references: (•) Agarwala et al. A phase 1b study of rose bengal disodium and anti-PD-1 in metastatic cutaneous melanoma: results in patients naïve to immune checkpoint blockade. ESMO Virtual Congress 2020. (•) Zager et al. Response for combination of PV-10 autolytic immunotherapy and immune checkpoint blockade in checkpoint-refractory patients. Melanoma Bridge 2000.

PV-10 + PD-1 Combination Therapy

Cancer Type	PV-10-Injected Disease			Overall Patient Disease				
	# of Lesions	Response	Response Criteria	# of Patients	Response	Median Durability of Response	Median Survival	Response Criteria
Phase 1b: Checkpoint-naïve Stage IV cutaneous melanoma[1]	28 (median 4 cycles)	75% CR 79% ORR 86% DCR	RECIST	21	10% CR 67% ORR	PFS: 11.7 months	OS: Not reached 62% 2-year OS	RECIST
Phase 1b: Checkpoint-refractory advanced cutaneous melanoma[2]	Not reported	Not reported	RECIST	19	5% CR 21% ORR 53% DCR	PFS: 4.9 months	OS: 34.1 months	RECIST
Phase 1: Checkpoint-naïve and refractory uveal melanoma metastatic to the liver[3]	24 (≥ 1 cycle)	8% CR 37% ORR 83% DCR	2D-EASL	14	Not reported	Not reported	CB-naïve: 11 months CB-refractory: 11.4 months PV-10 monotherapy: 7.9 months	2D-EASL

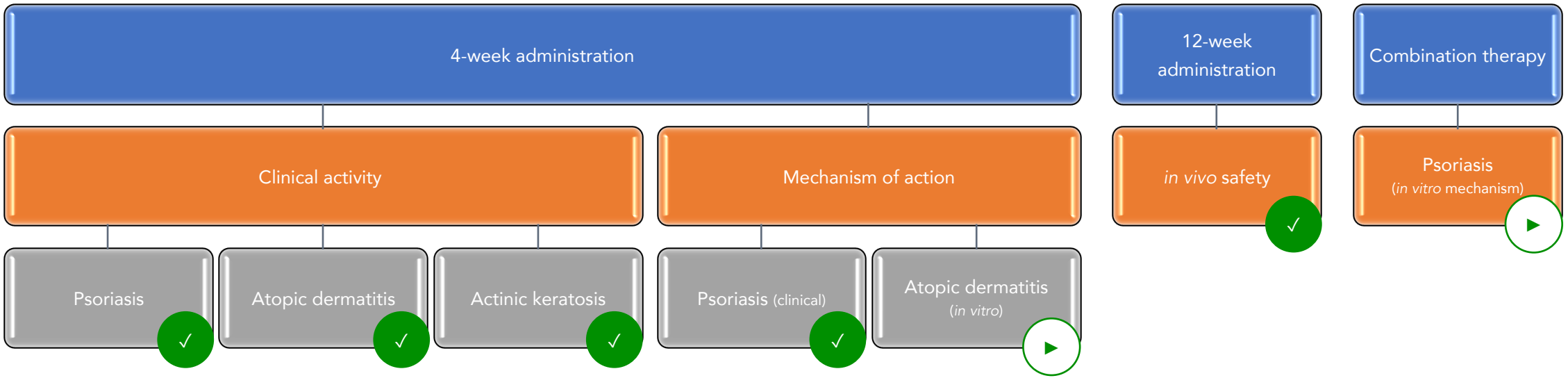
* CB = immune checkpoint blockade.

[1] Agarwala et al. A phase 1b study of rose bengal disodium and anti-PD-1 in metastatic cutaneous melanoma: results in patients naïve to immune checkpoint blockade. ESMO 2020.

[2] Zager et al. PV-10 and anti-PD-1 in cutaneous melanoma refractory to checkpoint blockade. SMR 2021.

[3] Patel et al. Percutaneous hepatic injection of rose bengal disodium (PV-10) in metastatic uveal melanoma. American Society of Clinical Oncology (ASCO) 2020 Virtual Scientific Program.

Dermatology



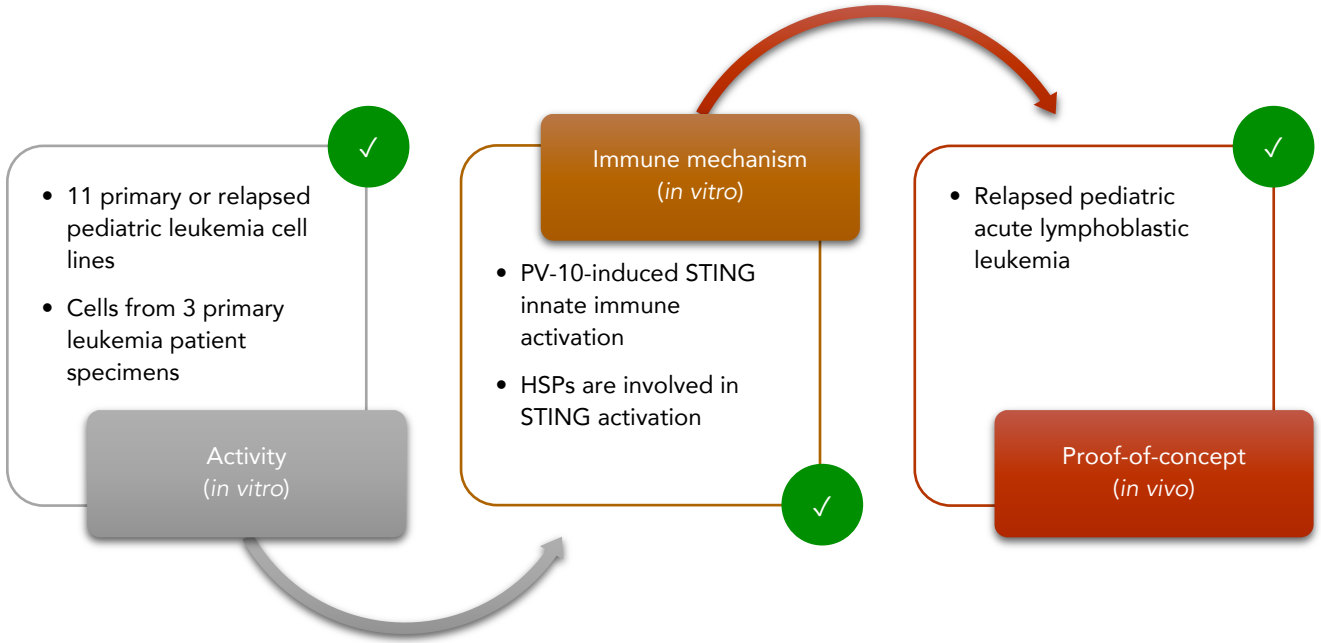
- More than 200 patients have been treated with top. PH-10
- Elucidated direct and immunotherapy mechanisms in psoriasis
  - Reversion of lesional psoriasis skin to non-lesional skin
  - Down-regulation of IL-17A, IL-22, IL-26, IL-36, and keratin 16 genes
  - 27% of genomic responders achieved normalized skin after 4 weeks (22 study patients)
- Currently exploring:
  - *In vitro* immunotherapy mechanisms in atopic dermatitis
  - *In vitro* combination therapy mechanisms in psoriasis for oral biologics

SCIENCE FOR THE BENEFIT OF HUMANITY

Research collaborator:
The Laboratory for Investigative Dermatology

* top. = topical. IGA = Investigator Global Assessment. On this slide, IL = interleukin.

Hematology



UNIVERSITY OF CALGARY
CUMMING SCHOOL OF MEDICINE

Research collaborator

- The rose bengal sodium effect is playing out
  - Direct contact between rose bengal sodium and leukemic disease
  - *In vitro* observations included disease death that is disease- (cell line-) and concentration-dependent, like in oncology
- Two consequential discoveries[1]
  - A PV-10-induced signaling of the STING innate immune system pathway (compared to other compounds that may only classically activate STING)
  - The involvement of heat shock proteins (HSPs), which play important roles in the survival of cancer cells (and other biological functions), in STING activation
- *In vivo* study is completed
  - Data of mice with acute lymphoblastic leukemia that received oral PV-10 displayed increased survival.
- An IND filing is contemplated

* STING = stimulator of interferon genes. IND = Investigational New Drug.

[1] Current data: Thakur et al. Association of Heat Shock Proteins as Chaperone for STING: A potential link in a key immune activation mechanism revealed by a novel anticancer agent PV-10. AACR 2020.

Virology

- ***Development strategy:*** Build a rose bengal sodium-based pipeline of broad-spectrum anti-viral agents
- Complementary to Provectus' microbiology and ophthalmology programs
- PO, inh., and IN administrations are contemplated
- *In silico* modeling is completed
  - Docking-based binding affinity to SARS-CoV-2's main protease, the virus' spike protein, and different variants (ie, Alpha, Beta, Gamma)
- *In vitro* activity and study of mechanism are completed
  - African green monkey kidney cell (Vero) and human lung epithelial cell (Calu-3) models
  - Synergistic activity with remdesivir (Vero)
  - Biophysical analysis of binding using surface plasmon resonance
- *In vivo* study is ongoing
- A peer-reviewed publication is planned

Microbiology

- ***Development strategy:*** Build a rose bengal sodium-based pipeline of broad-spectrum anti-bacterial and anti-fungal agents
- Complementary to Provectus' virology program
- top., PO, and IV administrations are contemplated
- Initial *in vitro* study is completed
- Two novel discoveries to date; currently proprietary
- A peer-reviewed publication is planned
- Additional studies are contemplated

Ophthalmology

- ***Development strategy:*** Seek approval of an ophthalmic drug product to improve corneal health
- Complementary to Provectus' virology and microbiology programs
- top. administration is contemplated
- *In vitro* study of activity is completed
- *In vivo* study of safety is completed
- Additional studies are contemplated
- An IND filing is contemplated

★ Development program updates will be provided via Provectus communications and SEC filings as data and events warrant.

* top. = topical. PO = oral. inh. = inhaled. IN = intranasal. IV = intravenous. IND = Investigational New Drug.

Animal Health

- ***Development strategy:*** Build a halogenated xanthene-based pipeline of therapeutic agents for treating companion and production animal diseases
- Work currently underway:
  - Provectus' product roadmap and execution strategy
  - Manufacture of a halogenated xanthene drug substance
  - Manufacture of halogenated xanthene drug product candidates
  - University of Tennessee College of Veterinary Medicine student education seminars about animal health drug development and regulatory affairs

Proprietary #1

- Novel discovery based on rose bengal sodium's immunogenic properties
- Initial *in vitro* work completed on multiple targets
- Development and go-to-market strategy work is underway
- A peer-reviewed publication is planned

Proprietary #2

- Prospective strategic business expansion based on Provectus' innovation and intellectual property surrounding the Company's synthesis and manufacturing of rose bengal sodium
- Drug discovery, clinical development, and go-to-market strategy work is underway

★ Development program updates will be provided via Provectus communications and SEC filings as data and events warrant.

A Discussion of Potential Risks

SEC filings describe potential risks, uncertainties, and assumptions in Provectus' Item 1A of the Annual Report on Form 10-K for the period ended December 31, 2020 and the Quarterly Report on Form 10-Q for the period ended September 30, 2021

- We are a clinical-stage drug company, have no prescription drug products approved for commercial sale, have incurred substantial losses, and expect to incur substantial losses and negative operating cash flow for the foreseeable future.
- We need additional capital to conduct our operations and commercialize and/or further develop our prescription drug candidates in 2021 and beyond, and our ability to obtain the necessary funding is uncertain.
- There is substantial doubt as to our ability to continue as a going concern.
- Our investigational drug product candidates are at an early to mid-stage of development and may never obtain U.S. Food and Drug Administration (FDA) or international regulatory approvals required for us to commercialize our investigational drug product candidates.
- Delays in clinical trials are common and have many causes, and any delay could result in increased costs to us and jeopardize or delay our ability to obtain regulatory approval.
- Physicians and patients may not accept and use our prescription drug candidates.
- We have no sales, marketing, or distribution capabilities for our prescription drug candidates.
- Competition in the prescription pharmaceutical and biotechnology industries is intense.
- If we are unable to secure or enforce patent rights, trademarks, trade secrets or other intellectual property (IP), our business could be harmed.
- If we do not update and enhance our technologies, they will become obsolete.
- If we lose any of our key personnel, we may be unable to successfully execute our business plan.
- Anti-takeover provisions in our organizational documents and Delaware law may discourage or prevent a change of control, even if an acquisition would be beneficial to our stockholders, which could affect our stock price adversely and prevent attempts by our stockholders to replace or remove our current management.
- Our stock price is below $5.00 per share and is treated as a "penny stock," which places restrictions on broker-dealers recommending the stock for purchase.
- Future sales by our stockholders may adversely affect our stock price and our ability to raise funds in new stock offerings.
- It is our general policy to retain any earnings for use in our operation.
- In the event of the sale, liquidation or dissolution of the Company or any of our assets, holders of shares of Series D and D-1 Preferred Stock will be entitled to a preference of a multiple of their investment amount, which will reduce the proceeds to be received by holders of our common stock.
- Our business, financial condition and results of operations may be adversely affected by the severe acute respiratory syndrome (SARS)-associated CoV-2 (SARS-CoV-2) pandemic or other similar outbreaks of contagious diseases.