



Dedicated to the development and commercialization of innovative transdermal pharmaceutically-produced cannabinoid treatments for rare and near-rare neuropsychiatric conditions in patients with high unmet medical needs

January 2018



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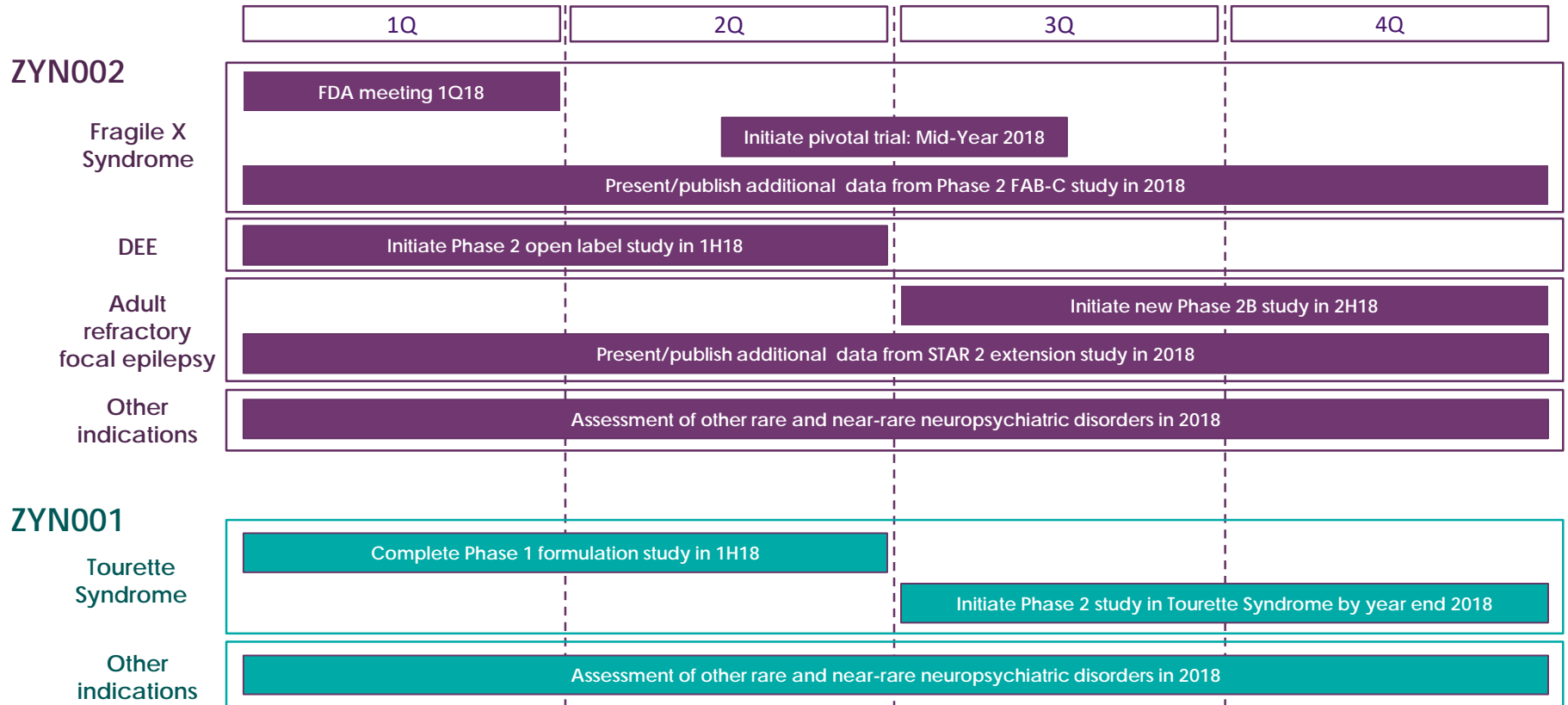


Zynerba Pharmaceuticals

A Rare/Near-Rare Neuropsychiatric Company

- Two patent protected compounds: ZYN002 (CBD gel) and ZYN001 (THC pro-drug patch)
- Focused on high unmet medical needs
 - Fragile X syndrome (FXS): ~71K US patients; no approved products
 - Developmental and epileptic encephalopathies (DEE): ~45K US patients
 - Adult refractory focal epilepsy: ~500K US patients remain uncontrolled on existing AEDs
 - Tourette Syndrome (TS): ~200K US patients have the most severe form of TS
- Opportunities for efficient development and commercialization strategy
 - Orphan drug designation provides opportunity for rapid development/approval
 - Other regulatory designations available; if granted, can accelerate approval of drugs meeting criteria
 - Targeted physician audience = modest commercial investment
 - Potential for consistent Orphan drug pricing across indications (>\$25K per patient per year for ZYN002)
- Experienced team with proven development and commercialization track record in transdermal delivery, orphan diseases, neurology, and psychiatry
- Well capitalized with cash runway well into 2019
- Multiple expected near term milestones

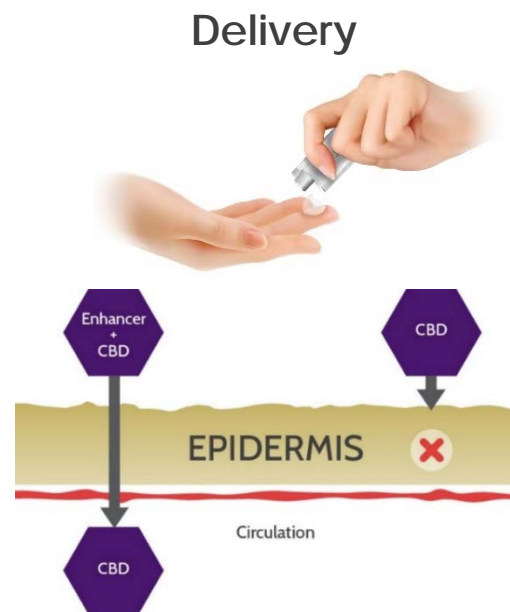
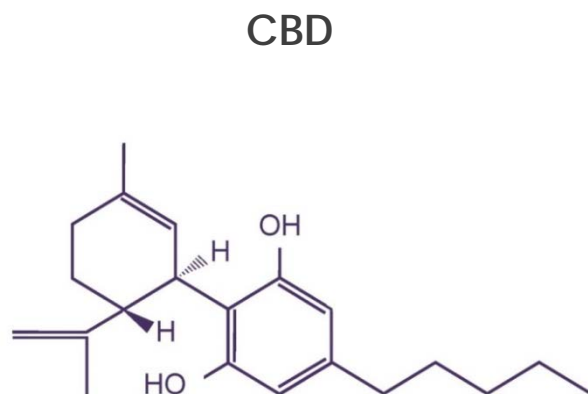
Expected 2018 Milestones



ZYN002

Cannabidiol (CBD) Gel

- First and only patent-protected permeation-enhanced pharmaceutically-produced cannabidiol (CBD) gel formulated for transdermal delivery
 - CBD binds to multiple receptors and may mediate a number of pathways, including the endocannabinoid pathway
 - Patented formulation increases the delivery of CBD through the layers of the epidermis and into the circulatory system



Fragile X Syndrome (FXS)

Pivotal-Ready Program

FXS

- Inherited autism spectrum disorder found in ~71,000 U.S. patients
- Most common inherited intellectual disability
- Symptoms including significant social, behavioral, and cognitive deficits
- Symptoms linked to deficiencies in the endocannabinoid system caused by FMR1 mutation

- Positive open label Phase 2 data (Sept. 2017):
 - Achieved primary and numerous secondary endpoints with statistical significance vs. baseline
 - Extremely well tolerated
- U.S. Orphan Drug Designation for use of CBD as a treatment of Fragile X (Feb. 2016)
- Meeting scheduled with FDA in 1Q2018 to discuss development strategy including clinical pivotal program
- Expect to initiate pivotal Phase 2/3 program in pediatric and adolescent FXS patients mid-year 2018
- Results expected in 2019

Developmental & Epileptic Encephalopathies (DEE) New Phase 2 Program in 2018

DEE

- Category including a number of rare and ultra-rare severe brain disorders that manifest with seizures in children
 - ~45,000 U.S. children with DEE
 - Includes Doose, Dravet, Lennox-Gastaut, and West Syndromes, etc.
 - All highly resistant to treatment
- Third party clinical data show impact of CBD on seizures and behavioral issues in children
 - Expect to initiate Phase 2 study in 1H2018
 - 24 week multi-dose study in 48 DEE patients (3-18 years)
 - Two Australian sites
 - Results expected in 2019

Adult Refractory Focal Epilepsy

Phase 2B Anticipated in 2018

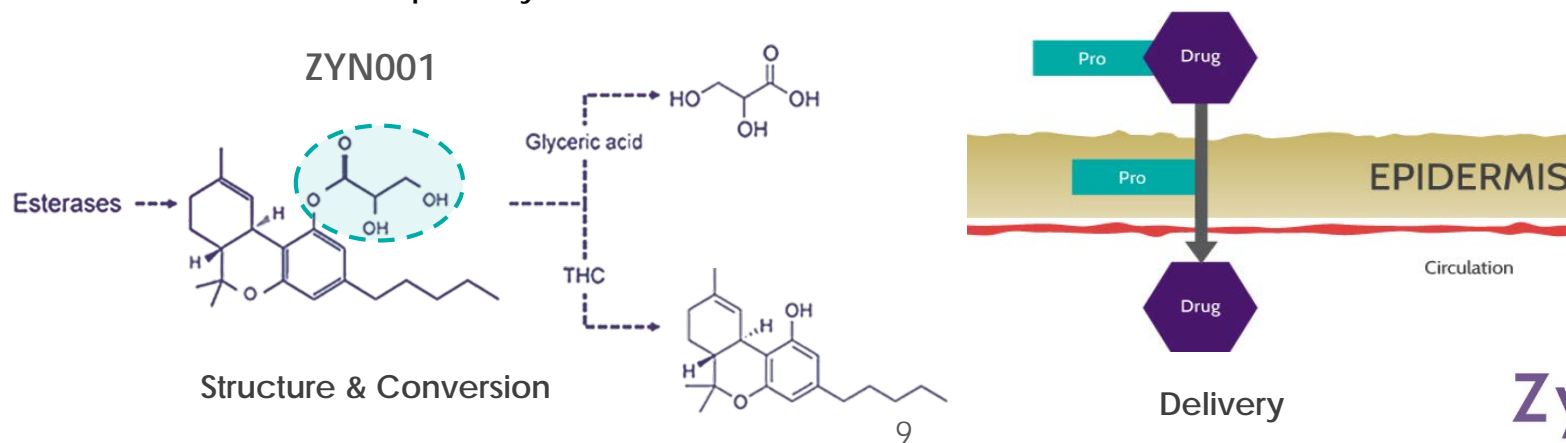
Adult Refractory Focal Seizures

- Focal seizures are the most common epilepsy in adults
 - Substantial US market
 - ~500,000 refractory adults
 - New treatment options with improved quality of life (safety and efficacy) needed
- Learnings from Phase 2 STAR 1 study and open label STAR 2 extension provide input into Phase 2B trial design
 - STAR 2 data suggest clinically meaningful response with longer term use of ZYN002
 - Consistent improvements in median seizure rate at three, six and nine months of treatment with ZYN002
 - Modifications include increased baseline seizure frequency, patient count, and trial duration
 - Expect to initiate ~300 patient double blind placebo controlled study in 2H2018

ZYN001

THC Pro-Drug Patch

- Patent-protected pharmaceutically-produced D-glyceric acid ester- Δ^9 -tetrahydrocannabinol (THC) in a transdermal patch
- ZYN001 is a pro-drug
 - A drug administered in an inactive or less active form, designed to enable more effective delivery, and then converted into a different form through a normal metabolic process
 - Unlike THC, ZYN001 is able to be efficiently absorbed through the skin via transdermal delivery
 - After crossing the stratum corneum, ZYN001 is hydrolyzed to THC and glyceric acid under physiological conditions
 - THC binds multiple cannabinoid receptors and may mediate a number of pathways, including the endocannabinoid pathway

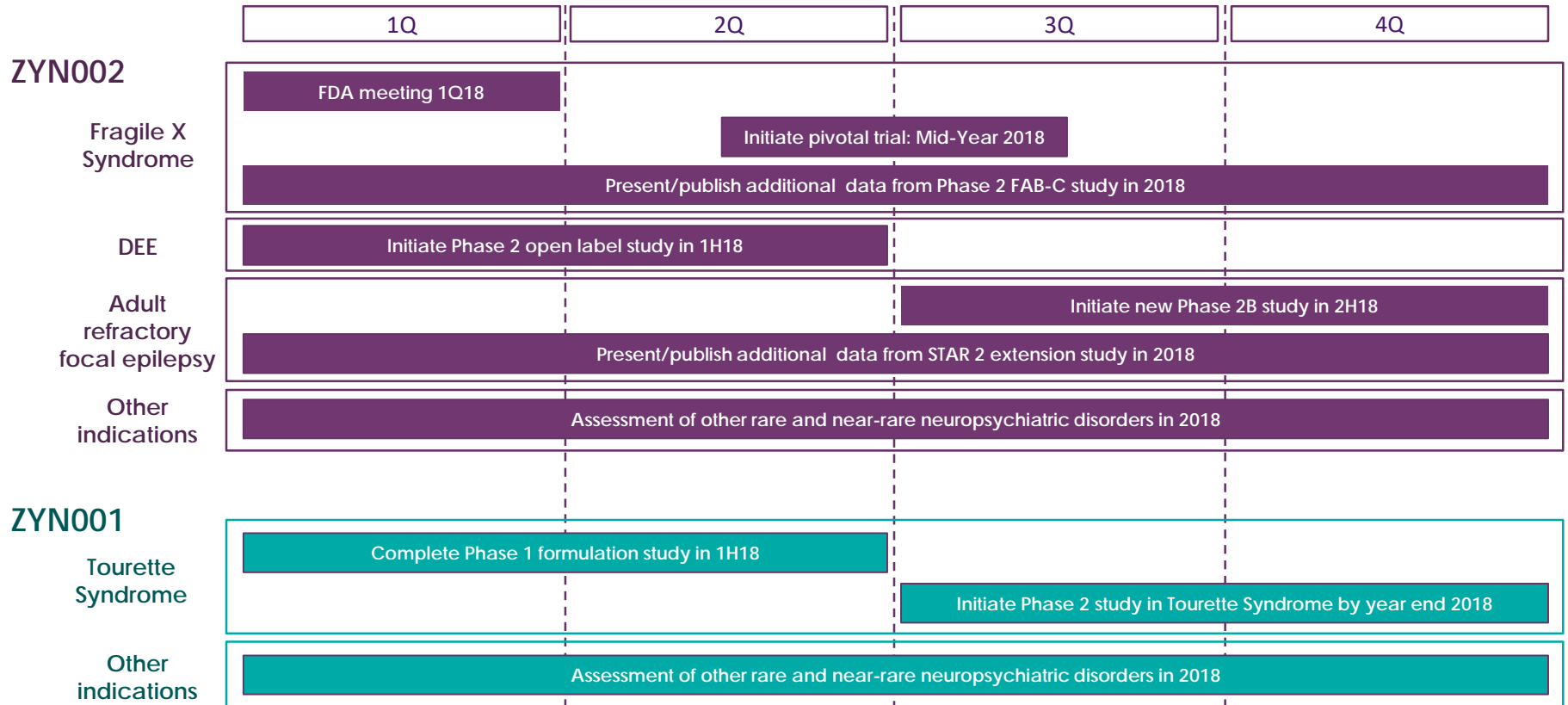


Potential for THC in Tourette Syndrome (TS)

Tourette Syndrome

- Neurodevelopmental disorder characterized by motor / vocal tics
 - Evident in early childhood
 - ~200K US pts have most severe form (National Institute of Neurological Disorders and Stroke)
 - Up to 1:100 exhibit milder and less complex symptoms
- Central cannabinoid receptor system believed to play role in Tourette Syndrome pathology
- Third party double blind, placebo controlled studies show activity of THC in TS
- Phase 1 formulation work expected to be completed in 1H2018
- Phase 2 study in Tourette Syndrome expected to initiate in late 2H2018

Expected 2018 Milestones





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January 2018



ZYN002
CBD Gel Clinical Program
Fragile X Syndrome

Fragile X Syndrome (FXS)

The Endocannabinoid (EC) System is a Critical Pathway

- Inherited autism spectrum disorder with symptoms linked to deficiencies in the endocannabinoid system
 - ECs form system of neurotransmitters regulating emotional responses, behavioral reactivity to context, social interaction
 - FMR1 mutation in FXS causes dysregulation of the EC system resulting in significant social, behavioral, and cognitive deficits
 - Modulation of EC system with CBD may have therapeutic potential in ameliorating some of those symptoms
 - Strong scientific rationale in FXS validated by Phase 2 FAB-C clinical data

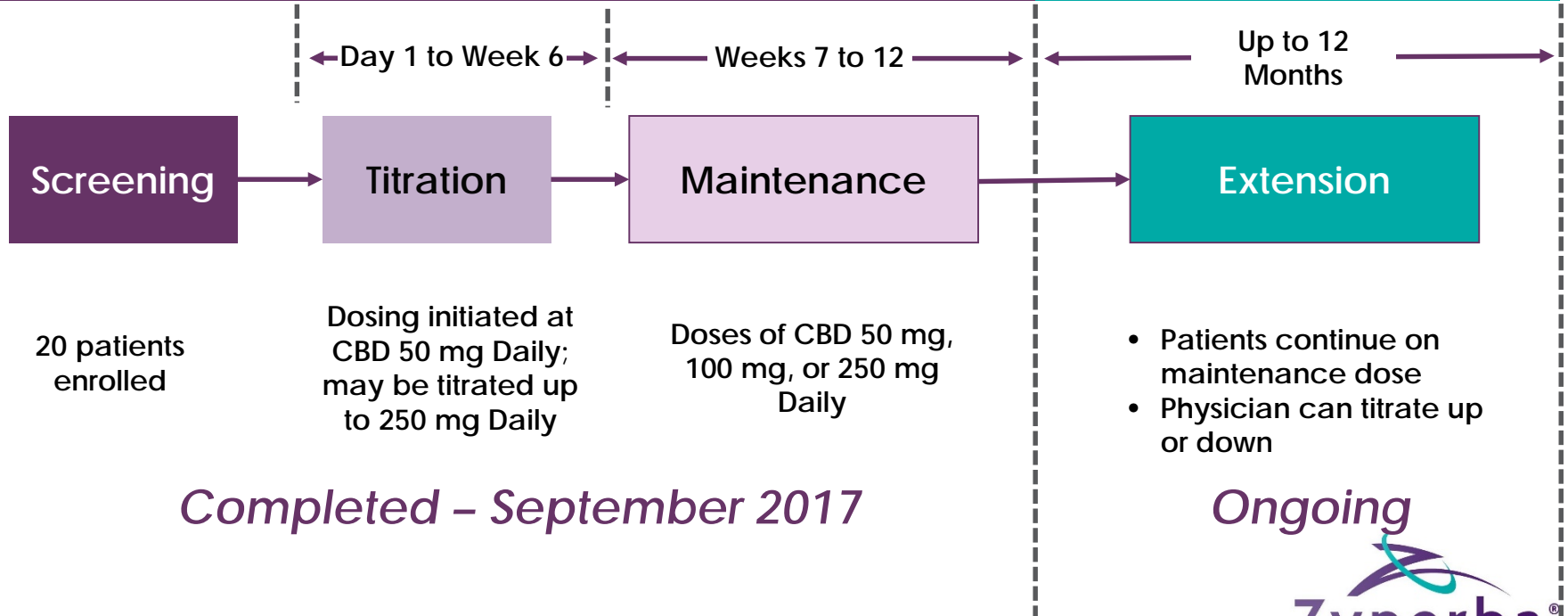
U.S. Orphan Drug Designation for use of CBD as a treatment of Fragile X syndrome has been granted by the FDA (Feb. 2016)

Fragile X Syndrome Open Label Phase 2 Trial Design

Treatment of **F**ragile X Syndrome **A**nxiety and **B**ehavioral Challenges with **C**BD (FAB-C)

FAB-C Trial – Period 1

FAB-C Trial – Period 2



Completed – September 2017

Ongoing



Positive FAB-C Open Label Phase 2 Efficacy Data

Primary Endpoint: ADAMS Total Score

| ADAMS total score | Improvement vs. baseline (N=20) |
|---|---------------------------------|
| Changes in Anxiety, Depression and Mood | 46% (<i>p</i> <0.0001) |

| ADAMS subscales | Improvement vs. baseline (N=20) |
|----------------------------|---------------------------------|
| General Anxiety | 54% (<i>p</i> <0.0001) |
| Social Avoidance | 53% (<i>p</i> <0.0002) |
| Compulsive Behavior | 50% (<i>p</i> =0.0262) |
| Manic/Hyperactive Behavior | 35% (<i>p</i> =0.0003) |
| Depressed Mood | 29% (<i>p</i> =0.1417) |

Positive FAB-C Open Label Phase 2 Efficacy Data

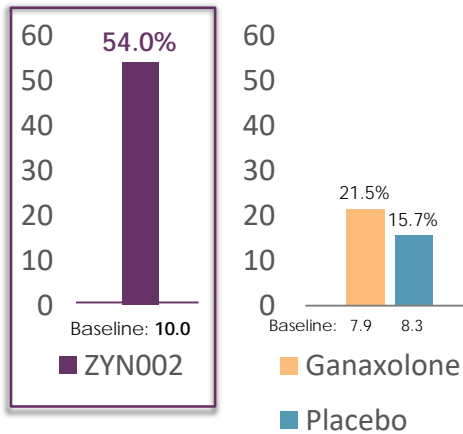
Key Secondary Endpoint: ABC-FXS

| ABC-FXS subscale | Improvement vs. baseline (N=20) |
|--|-----------------------------------|
| Stereotypy: "Repetitive Movements" | 59% (<i>p</i> =0.0006) |
| Social Avoidance: "Seeks Isolation" | 55% (<i>p</i> =0.0005) |
| Socially Unresponsive/Lethargic: "Does Not Pay Attention" | 53% (<i>p</i> =0.0034) |
| Inappropriate Speech: "Repeats Words or Phrases" | 43% (<i>p</i> =0.0018) |
| Irritability: "Has Temper Tantrums" | 42% (<i>p</i> =0.0096) |
| Hyperactivity: "Disrupts Group Activities" | 33% (<i>p</i> =0.0194) |

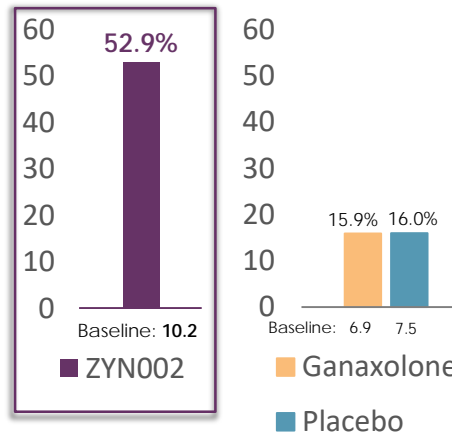
ADAMS Subscales

Week 12: Percent Improvement vs. 3rd party data*

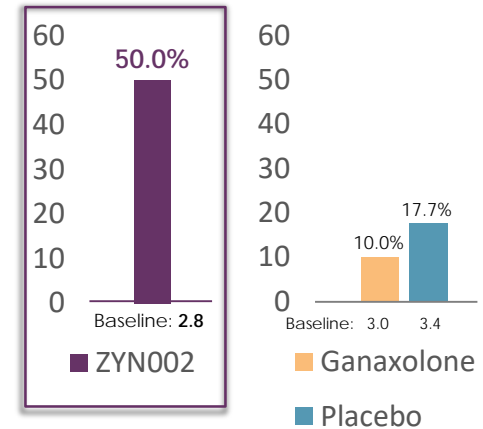
General Anxiety



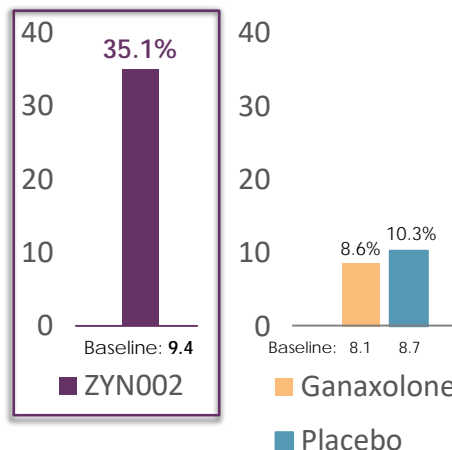
Social Avoidance



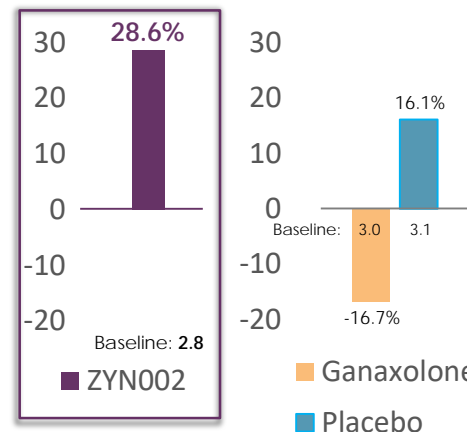
Compulsive Behavior



Manic/hyperactive Behavior



Depressed Mood

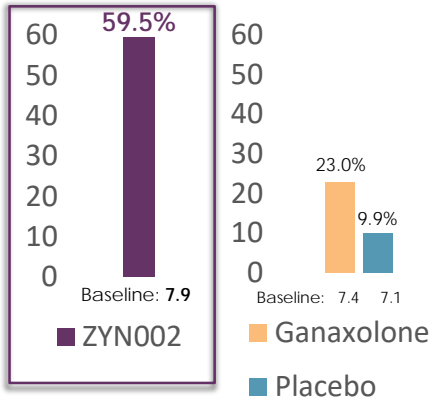


* Ligsay, A., Van Dijk, A., Nguyen, D. V., Lozano, R., Chen, Y., Bickel, E. S., et al. (2017). A randomized double-blind, placebo-controlled trial of ganaxolone in children and adolescents with fragile x syndrome. *Journal of Neurodevelopmental Disorders*, 9:26.

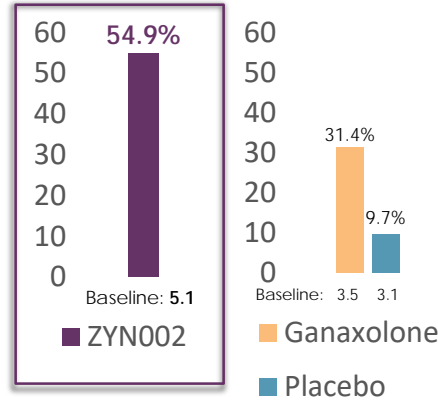
ABC-FXS Subscales

Week 12: Percent Improvement vs. 3rd Party Data*

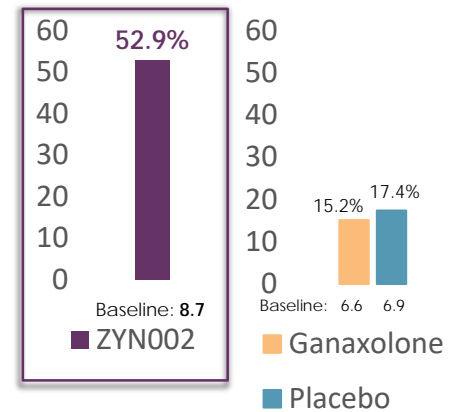
Stereotypy
Repetitive Movements



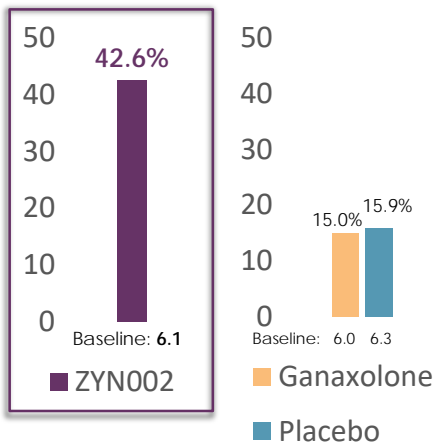
Social Avoidance
Seeks Isolation



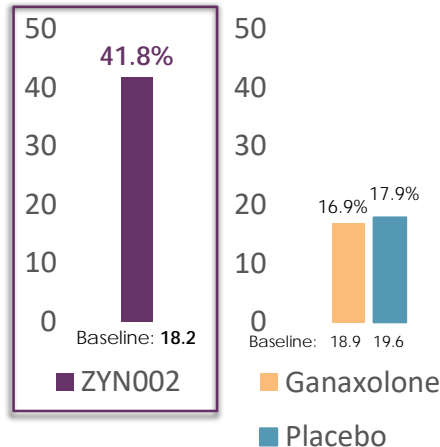
Socially Unresponsive / Lethargic
Does Not Pay attention



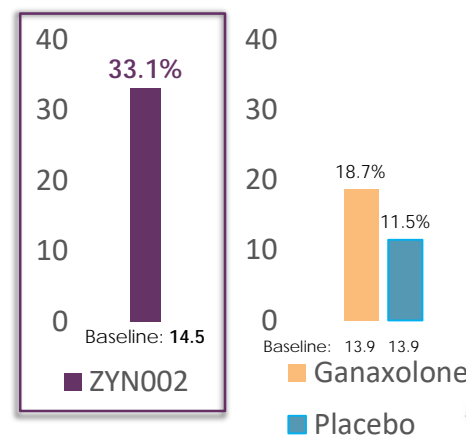
Inappropriate Speech
Repeats Words / Phrases



Irritability
Temper Tantrums



Hyperactivity
Disrupts Group Activities



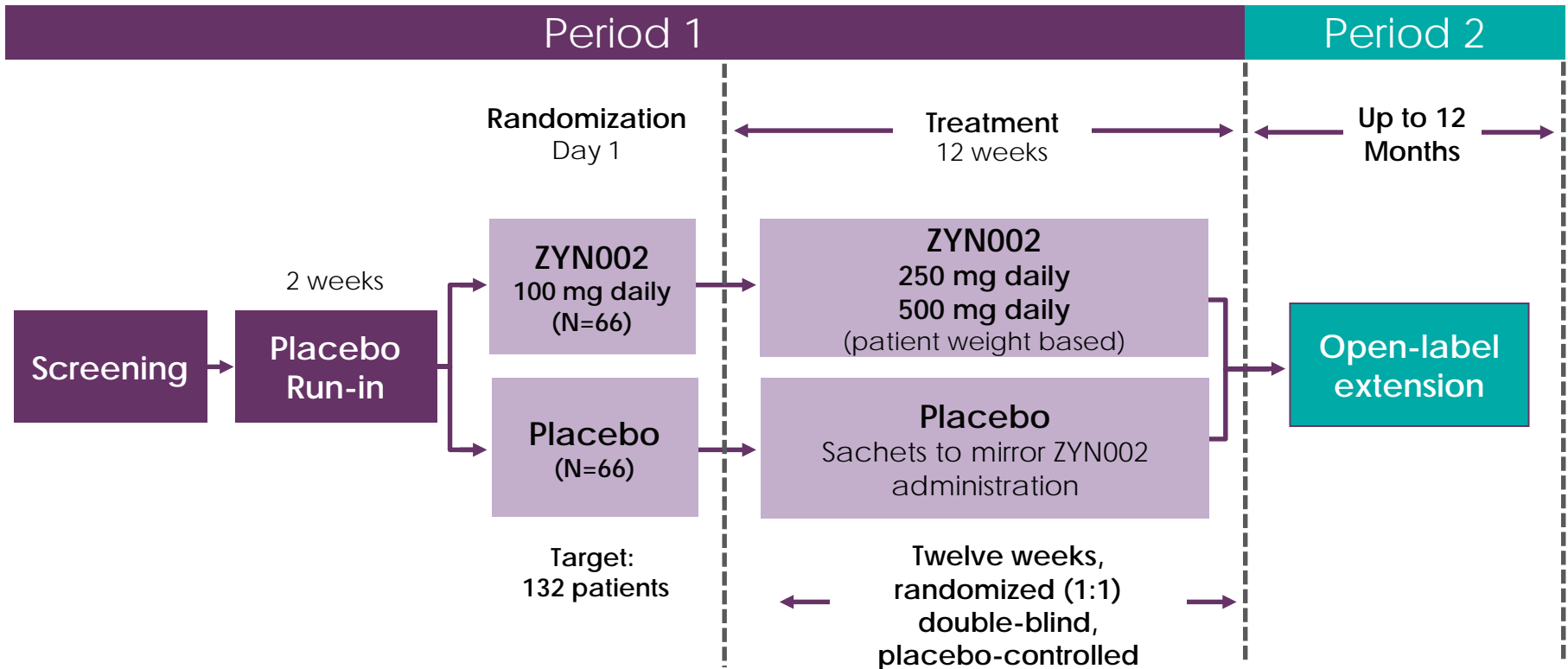
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Positive FAB-C Open Label Phase 2 Safety Data

- Very well tolerated, consistent with previously reported clinical data
- Two sibling patients discontinued due to worsening of pre-existing eczema
- Four other patients experienced an AE; no SAEs
- No drug-related GI events
- No THC was detected in the plasma
- 13 patients continued into open label extension; 12 remain as of 1/30/18
 - Eight patients at 3 months (6 months total on ZYN002)
 - Four patients at 6 months (9 months total on ZYN002)

Fragile X Syndrome Pivotal Phase 2/3 Study

Proposed Trial Design*



ZYN002 in Fragile X Syndrome

Next Steps

- Meeting scheduled with FDA in 1Q2018 to discuss development strategy including clinical pivotal program
- Goal to begin pivotal Phase 2/3 program in pediatric and adolescent patients with FXS mid-year 2018
 - Data expected in 2019
- Assessing opportunity to present / publish full data set as soon as possible in 2018
 - Targeting three FXS meetings June-August 2019
- Evaluating opportunities for FDA fast-track, breakthrough status, and/or priority review

ZYN002
CBD Gel Clinical Program

*Developmental Epileptic
Encephalopathies (DEE)*

Developmental and Epileptic Encephalopathies

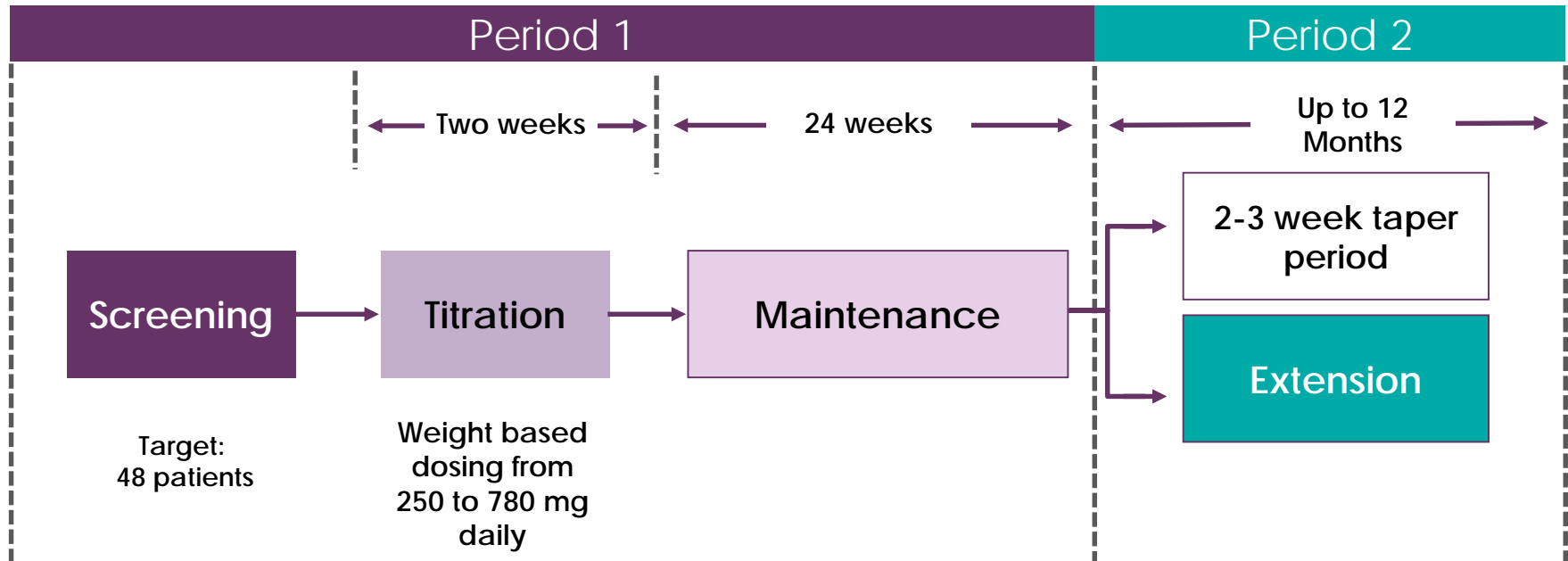
DEE category includes:

Doose Syndrome
Dravet Syndrome
Early Myoclonic Encephalopathy
Epilepsy of Infancy With Migrating Focal Seizures
Epilepsy with Generalized Tonic-Clonic Seizures alone (EGTCS)
Juvenile Myoclonic Epilepsy (JME)
Landau-Kleffner Syndrome
Lennox-Gastaut Syndrome
Ohtahara Syndrome (Early Infantile Epileptic Encephalopathy)
West Syndrome / Infantile Spasms

- Category of rare and ultra-rare severe brain disorders that manifest with seizures or EEG abnormalities that can directly worsen cognition or behavior
- Often progressive; highly resistant to treatment
- Treatment of seizures or EEG abnormalities expected to improve the cognitive or behavioral deficits and reduce the seizures
- Third party clinical data show impact of CBD on seizures and behavioral issues

DEE Open Label Phase 2 Study

Proposed Trial Design*



- Initiation planned for 1H2018
- Primary endpoints: reduction in seizures at 12 and 24 weeks
- Results expected in 2019

ZYN002
CBD Gel Clinical Program

Adult Refractory Focal Epilepsy

Adult Refractory Focal Epilepsy

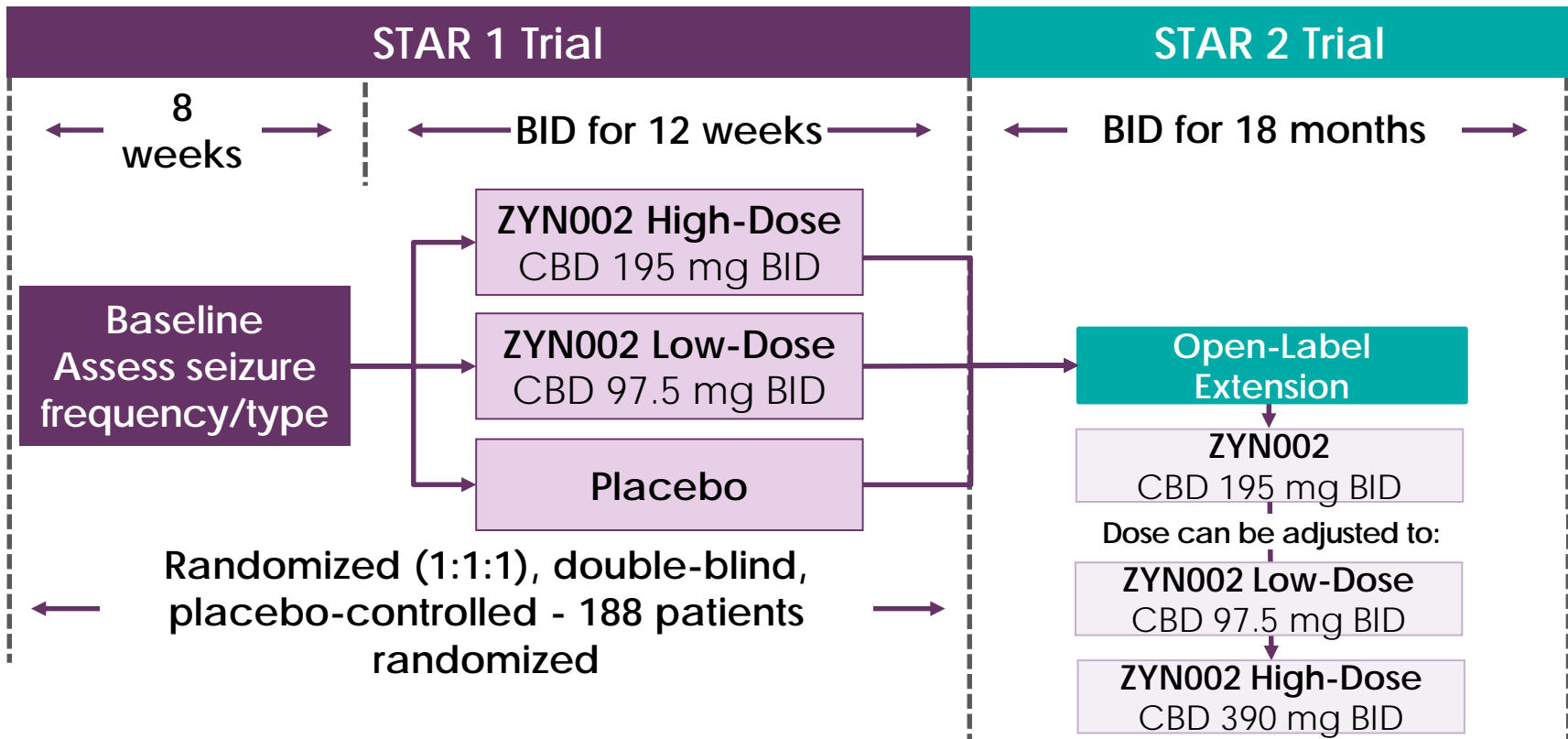
Phase 2B Anticipated in 2018

Adult Refractory Focal Seizures

- Focal seizures are the most common epilepsy in adults
 - Substantial US market
 - ~500,000 refractory adults
 - New treatment options with improved quality of life (safety and efficacy) needed
- Learnings from Phase 2 STAR 1 study and open label STAR 2 extension provide input into Phase 2B trial design
 - STAR 2 data suggest clinically meaningful response with longer term use of ZYN002
 - Consistent improvements in median seizure rate at three, six and nine months of treatment with ZYN002
 - Modifications include increased baseline seizure frequency, patient count, and trial duration
 - Expect to initiate ~300 patient double blind placebo controlled study in 2H2018

Epilepsy Phase 2 Clinical Study Trial Design

Synthetic Transdermal Cannabidiol for the Treatment of Epilepsy



Completed – August 2017

Ongoing

Epilepsy Phase 2 Clinical Study

Demographics and Baseline Characteristics

| STAR 1 patients | Placebo | 195 mg ZYN002 | 390 mg ZYN002 | Total |
|---|------------------------|------------------------|------------------------|--------------------------|
| Pts Randomized | 63 | 63 | 62 | 188 |
| Sex | 43% male 57% female | 51% male 49% female | 42% male 58% female | 45% male 55% female |
| Pts Analyzed for efficacy | 63 | 62 | 61 | 186 |
| Pts completing study | 62 | 57 | 55 | 174 |
| Patients continuing into STAR 2 | | | | 171 |
| Baseline median seizure rate | 10.5 | 14.0 | 10.1 | 10.6 (3-335) |
| AEDs | | | | Median: 3.0 Mean: 2.5 |
| Primary endpoint: Percent reduction in baseline seizures | 8.7% | 18.4% | 14.0% | |

Epilepsy Phase 2 Clinical Study

STAR 1 and STAR 2 Results

STAR 1

- Company believes study missed primary endpoint due to bimodal distribution of placebo patient responses :
 - >50% reductions in focal seizures in ~¼ of placebo patients
 - 13 of these 15 patients were female
- Strong separation from placebo seen at >15 baseline seizures
- Excellent tolerability

STAR 2

- Low dropout rate: 92 patients remain in study vs 126 as of August 8, 2017*
- 75 patients have reached 6 mo. of drug exposure; 35 have reached 9 months*
- Excellent tolerability
- Data suggest clinically meaningful response with longer term use

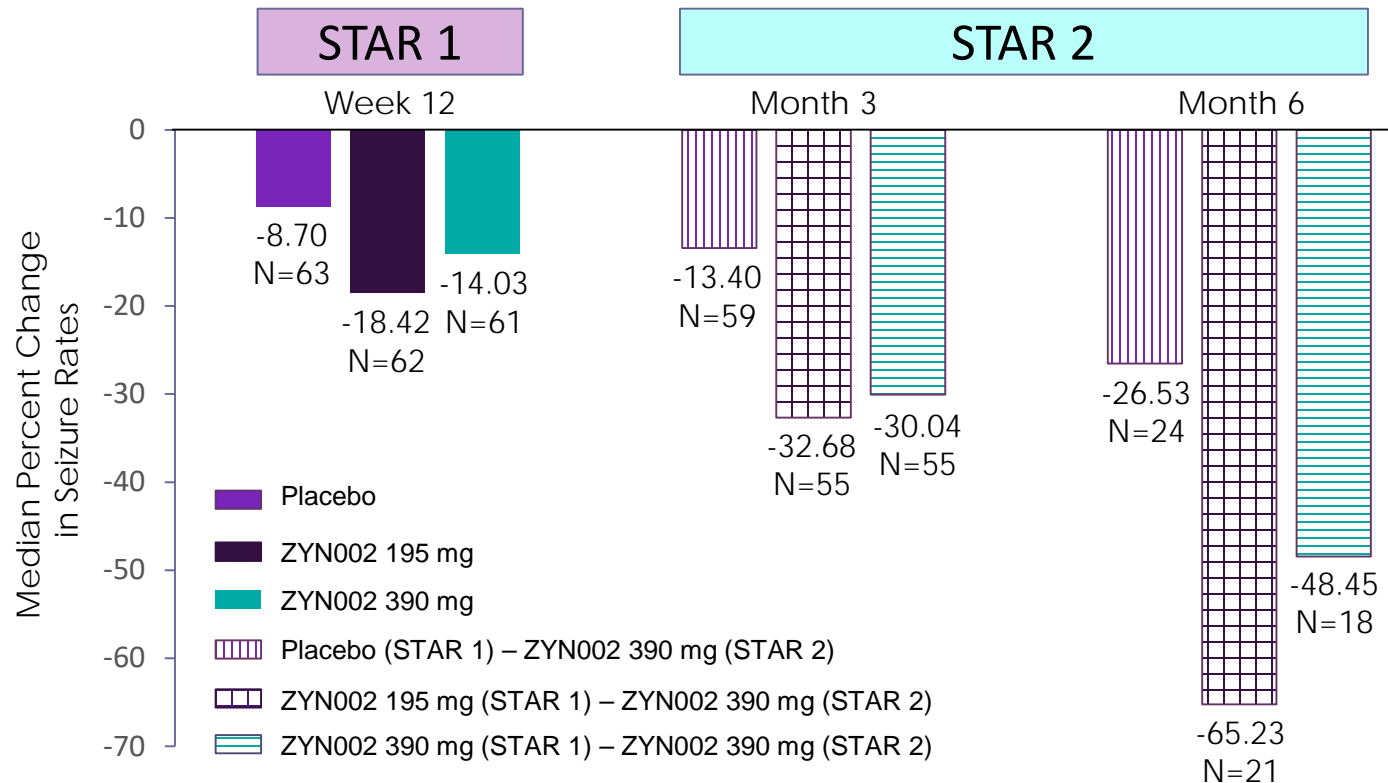
*First cut of STAR 1 and STAR 2 data presented at the 2017 AES Meeting
Additional data cuts to be presented in 2018*

Learnings provide input to revised Phase 2B clinical trial design

New Data Presented at AES

STAR 1 and STAR 2 Efficacy Data

Median Percent Change in Seizure Rates at Week 12 (STAR 1) and Month 3 and 6 (STAR 2)



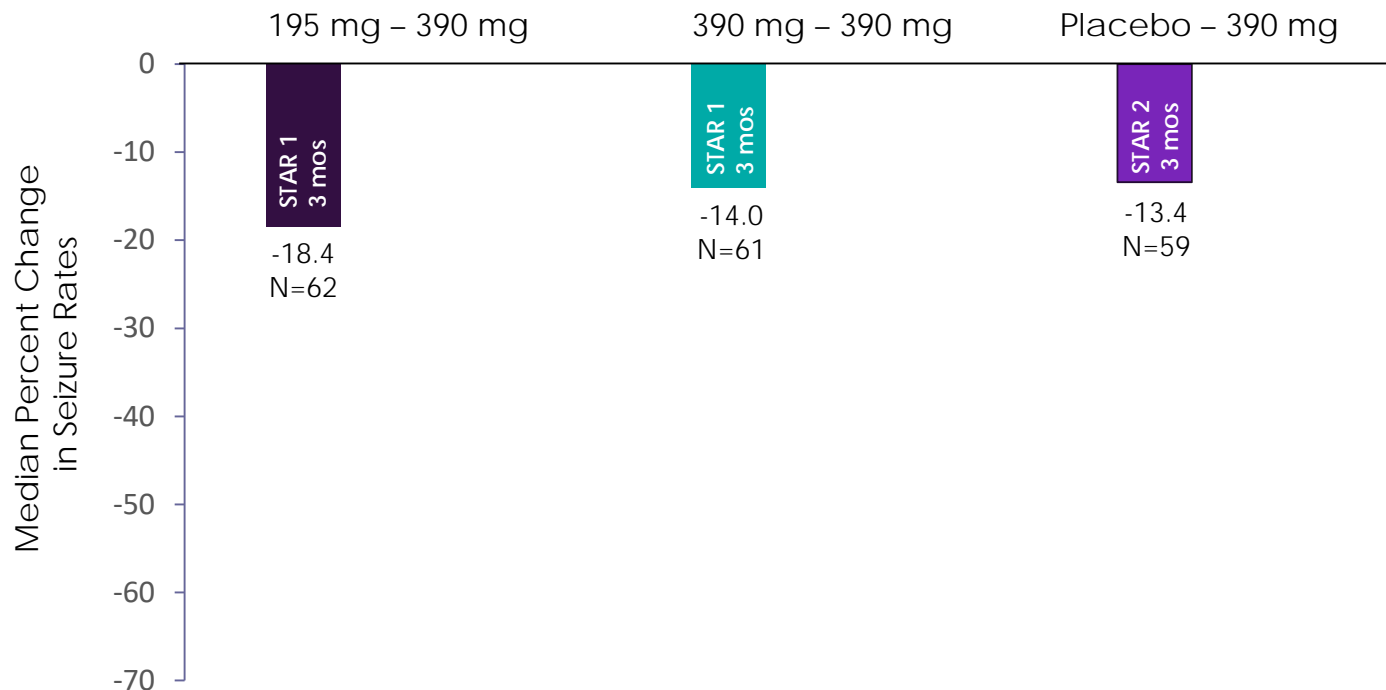
STAR 2 results based on data collected through mid-August 2017 and in patients who reported seizure frequency data during the respective time period.

Not all patients had reached 3 and 6 months in STAR 2

Consistent Results at Various Timeframes

Three Months on ZYN002

Dose Regimen in STAR 1 and STAR 2

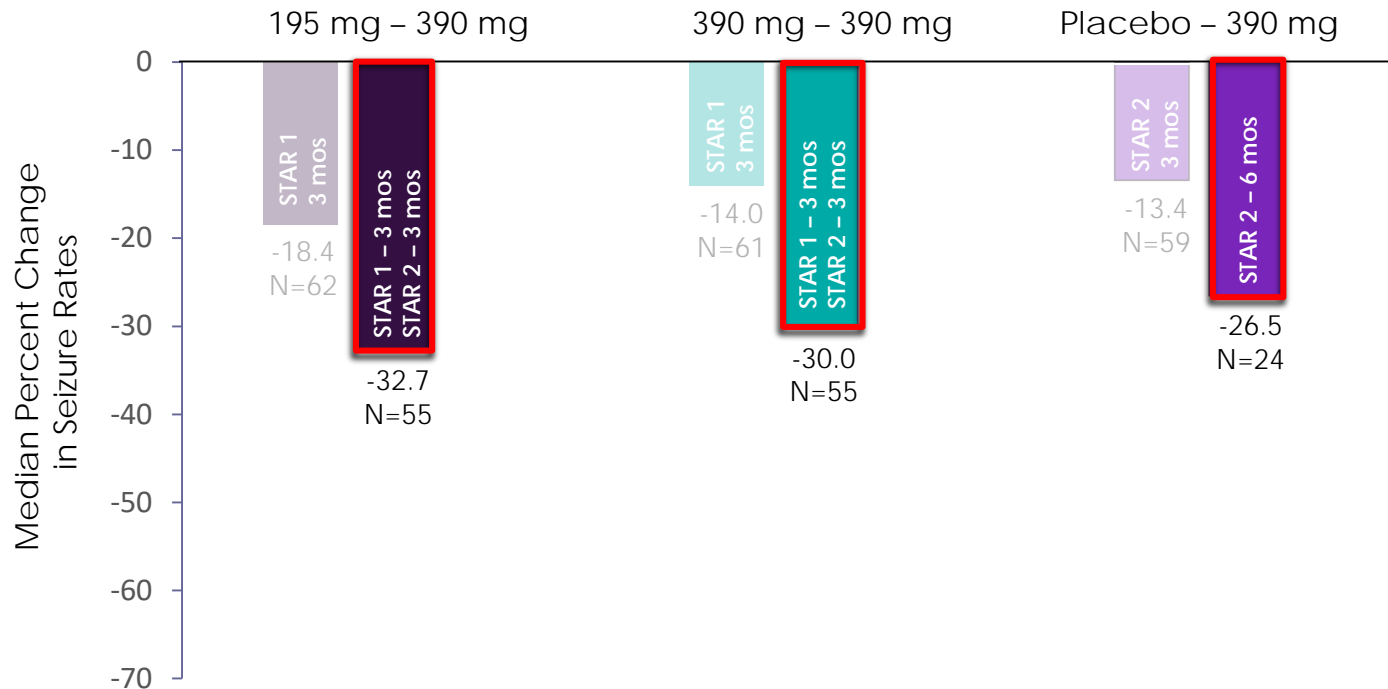


STAR 2 results based on data collected through mid-August 2017 and in patients who reported seizure frequency data during the respective time period.

Not all patients had reached 3 and 6 months in STAR 2 as of mid-August 2017

Consistent Results at Various Timeframes Six Months on ZYN002

Dose Regimen in STAR 1 and STAR 2

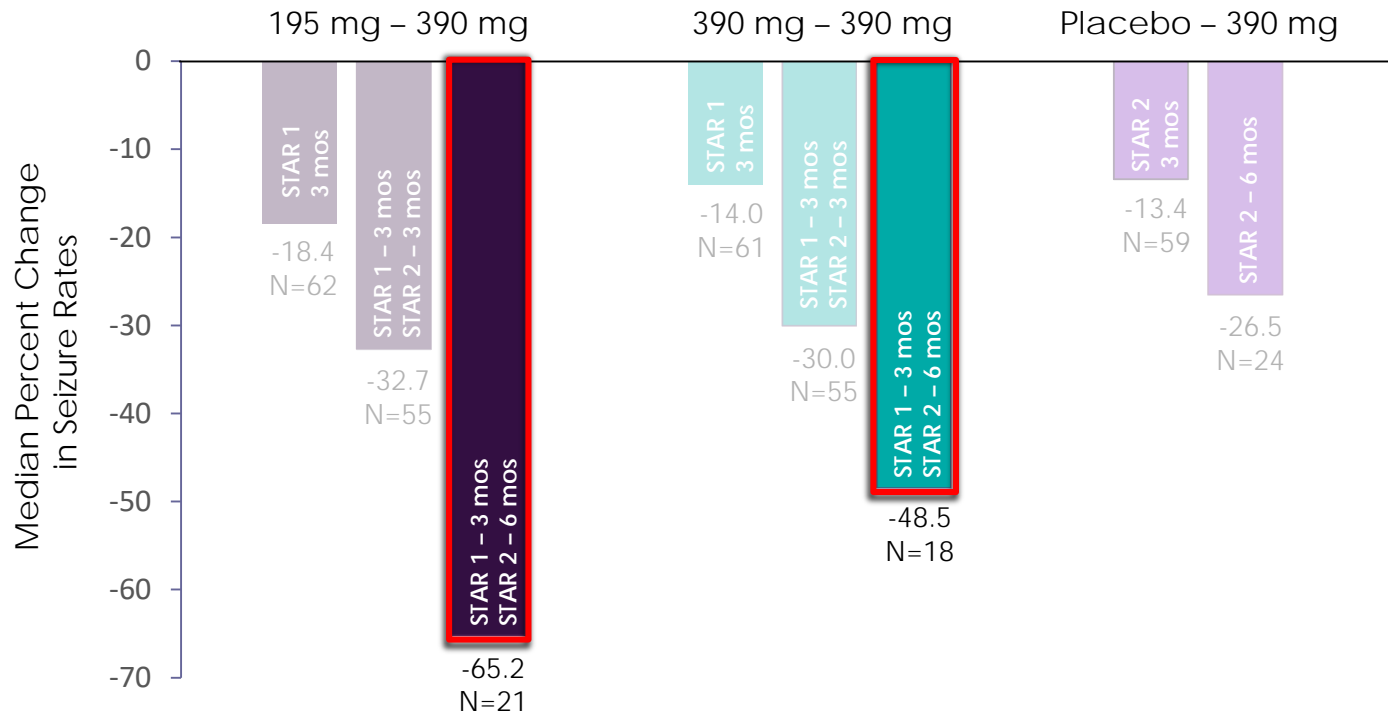


STAR 2 results based on data collected through mid-August 2017 and in patients who reported seizure frequency data during the respective time period.

Not all patients had reached 3 and 6 months in STAR 2 as of mid-August 2017

Consistent Results at Various Timeframes Nine Months on ZYN002

Dose Regimen in STAR 1 and STAR 2



STAR 2 results based on data collected through mid-August 2017 and in patients who reported seizure frequency data during the respective time period.

Not all patients had reached 3 and 6 months in STAR 2 as of mid-August 2017

Proposed Phase 2b Study

Adult Refractory Focal Epilepsy

Trial design*

- ~300 patient double-blind placebo controlled study
- To be conducted in US, Australia and New Zealand
- Primary endpoint: reduction from baseline in focal seizures
- 1:1:1 ratio (195 mg: 780 mg: placebo)

Modifications

Learnings from STAR 1 and STAR 2 experience include:

- Stratified randomization by baseline seizure rate and gender
- Increase in patient count
- Increase trial duration
- Increase in baseline seizure frequency
 - Median seizure target: >15/month vs 10.6 in STAR 1

Expected to initiate in 2H18

Open label extension to follow

Financial Strength

- Cash and cash equivalent position of \$66.3 million (September 30, 2017)
- Additional \$3.0 million in net proceeds from shares sold in September and October 2017 under our ATM program
 - Recorded in the fourth quarter of 2017
- Well capitalized, expect cash to fund operations well into 2019

Scientific Advisory Board

| | |
|---------------------------|--|
| Randi J. Hagerman, MD | Medical Director, UC Davis MIND Institute, Distinguished Professor, Endowed Chair in Fragile X Research, Department of Pediatrics, UC Davis School of Medicine |
| Steven J. Siegel, MD, PhD | Chair, Department of Psychiatry and Behavioral Sciences, Keck School of Medicine, University of Southern California |
| Nicole Tartaglia, MD | Associate Professor, Pediatrics-Developmental Pediatrics, University of Colorado Denver School of Medicine / Children's Hospital of Colorado |
| Dennis Dlugos, MD, MSCE | Professor of neurology and pediatrics at Children's Hospital of Philadelphia (CHOP) and the University of Pennsylvania School of Medicine |
| Jacqueline French, MD | Professor of Neurology, NYU Langone Medical Center |
| Daniel Friedman, MD | Clinical Assistant Professor, Department of Psychiatry, NYU Langone Medical Center |
| John Messenheimer, MD | Consultant, Neurologist/Epileptologist, John Messenheimer PLLC |
| Michael Rogawski, MD, PhD | Professor of Neurology, UC Davis Center for Neuroscience |
| Rodney Radtke, MD | Professor of Neurology, Duke University Medical Center |



Fragile X Syndrome



Epilepsy

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Ladenburg Thalman: Michael Higgins

Canaccord Genuity: Arlinda Lee, PhD

Seaport Global: Corey Davis

Oppenheimer: Derek Archila

Jefferies: Biren Amin, PhD

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