FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Typ	pe Response:	s)																
1. Name and Address of Reporting Person* Keyes Jeffry R.				2. Issuer Name and Ticker or Trading Symbol CNS Pharmaceuticals, Inc. [CNSP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O CNS PHARMACEUTICALS, INC., 100 WEST LOOP SOUTH, SUITE 900					3. Date of Earliest Transaction (Month/Day/Year) 03/07/2022						-	Office	r (give title belo	w)	Other (specify l	pelow)		
(Street) HOUSTON, TX 77027				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person							
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
(Instr. 3) Da		2. Transaction Date (Month/Day/Year)		Execu any	Deemed cution Date, if	(Instr. 8)		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			O)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership or Form:	Beneficial	
					(Mon	th/Day/Year)	Co	de	V	Amount	(A) or (D)	Pri	ice	(Instr. 3 a	:. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		03/07	//2022			A	L		11,100	A	\$ 0.29 (1)	968	11,100			D	
Reminder: I	Report on a s	eparate line i	for each	Table II -	Deriv	ative Securit	ies Ac	equire	Person the	sons whatained in form dis	no responded the responding the responding to the responding term of the responding terms of the respo	form a cu Benefi	are irrent	not requ tly valid		ormation pond unle	ss	1474 (9-02)
					(e.g.,]	outs, calls, w		ts, op				_					.	
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day	/Year)	Execution D any	4. Transaction Code Year) (Instr. 8)	5. Numb of Deriv Secur Acqu (A) or Dispo of (D) (Instr 4, and	rative rities ired rosed) . 3,	and Expiration Date (Month/Day/Year) Am Une Sec		Amou Under Secur (Instr.	rlying ities . 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivati Security Direct (or Indire	Benefici Ownersi (Instr. 4			
						Code V	(A)	(D)	Dat Exe	e ercisable	Expira Date	ition	Title	Amount or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Keyes Jeffry R. C/O CNS PHARMACEUTICALS, INC. 100 WEST LOOP SOUTH, SUITE 900 HOUSTON, TX 77027	X					

Signatures

/s/ Jeffry Keyes	03/09/2022	
**Signature of Reporting Person	Date	

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- This transaction was executed in multiple trades at prices ranging from \$0.2685 to \$2999. The price reported above reflects the weighted average purchase price. The (1) reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.