EyePoint Pharmaceuticals

INVESTOR DAY 2022

UNIVERSITY CLUB | NEW YORK CITY | JULY 18, 2022

EyePoint PHARMACEUTICALS

Forward-Looking Statements

Various statements made in this presentation are forward-looking, within the meaning of the U.S. Private Securities Litigation Reform Act of 1995, and are inherently subject to risks, uncertainties and potentially inaccurate assumptions. All statements that address activities, events or developments that we intend, expect, plan or believe may occur in the future, including but not limited to statements about our expectations regarding the potential benefits of our partnerships and strategic alliances with other companies, as well as the timing and clinical development of our product candidates, including EYP-1901; the potential for EYP-1901 as a sustained delivery treatment for wet age-related macular degeneration and non-proliferative diabetic retinopathy; and our longer term financial and business goals and expectations, are forward-looking statements. Some of the factors that could cause actual results to differ materially from the anticipated results or other expectations expressed, anticipated or implied in our forward-looking statements are risks and uncertainties inherent in our business including, without limitation: the effectiveness and timeliness of clinical trials, and the usefulness of the data; the timeliness of regulatory approvals; the extent to which COVID-19 impacts our business; our ability to achieve profitable operations and access to needed capital; fluctuations in our operating results; our ability to successfully produce sufficient commercial quantities of YUTIQ® and DEXYCU®; the success of current and future license agreements, including our agreements with Ocumension Therapeutics, Equinox Science and Betta Pharmaceuticals; termination or breach of current license agreements; our dependence on contract research organizations, co-promotion partners, and other outside vendors and service providers; effects of competition and other developments affecting sales of products; market acceptance of products; effects of guidelines, recommendations and studies; protection of intellectual property and avoiding intellectual property infringement; retention of key personnel; product liability; industry consolidation; compliance with environmental laws; manufacturing risks; risks and costs of international business operations; volatility of our stock price; possible dilution; absence of dividends; and other factors described in our filings with the Securities and Exchange Commission. We cannot guarantee that the results and other expectations expressed, anticipated or implied in any forward-looking statement will be realized. A variety of factors, including these risks, could cause our actual results and other expectations to differ materially from the anticipated results or other expectations expressed, anticipated or implied in our forward-looking statements. Should known or unknown risks materialize, or should underlying assumptions prove inaccurate, actual results could differ materially from past results and those anticipated, estimated or projected in the forward-looking statements. You should bear this in mind as you consider any forward-looking statements. Our forward-looking statements speak only as of the dates on which they are made. We do not undertake any obligation to publicly update or revise our forward-looking statements even if experience or future changes makes it clear that any projected results expressed or implied in such statements will not be realized.

INTRODUCTIONS AND AGENDA

Nancy Lurker| President and Chief Executive Officer

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Investor Day: Speakers - Management

Nancy Lurker

CEO

3x CEO with 30 years biopharmaceutical experience across multiple therapeutic areas; she has a proven record of generating revenue growth and facilitating strategic partnerships

Jay Duker, MD

COO

30 years managing retinal diseases and is a 12-time clinical trial investigator/co investigator; he has started 3 companies, ~345 ophthalmic publications, and extensive drug delivery, target identification and validation knowledge

George O. Elston

CFO

20 years of C-Level experience with strong and established relationships across wall street, buy-side, venture capital and pharma/biotech resulting in transformative company-building and M&A transactions covering a wide range of financing and partnering

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Investor Day: Speakers - Management

Dario Paggiarino, MD

CMO

>20 years of ophthalmic small molecule, biologic, and device clinical development and medical affairs; has led >100 Phase I - IV development programs leading to several FDA and ex- US approvals

Said Saim, Ph.D.

CTO

>25 years of pre-formulation, formulation, process development and tech transfer experience resulting in several FDA approvals and >20 patents and 20 publications

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Investor Day: KOL Guest Speakers

Carl D. Regillo

MD, FACS

Professor of Ophthalmology, Thomas Jefferson University Chief of the Retina Service, Wills Eye Hospital Founder, Wills Eye Clinical Retina Research Unit in Philadelphia

Charles C. Wykoff

MD, Ph.D.

Director of Research, Retina Consultants of Texas, Chairman of the Research and Clinical Trials Committee, Retina Consultants of America, Deputy Chair of Ophthalmology, Blanton Eye Institute at Houston Methodist Hospital

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Investor Day: Agenda

	PRESENTATION SPEAKER
Introductions	Nancy Lurker
EyePoint Overview	Nancy Lurker
Durasert® and EYP-1901 Overview	Jay Duker, M.D.
EYP-1901: Development and Formulation	Said Saim, Ph.D.
EYP-1901: DAVIO 12-Month Data	Carl Regillo, M.D.
EYP-1901: Treat to Maintain	Jay Duker, M.D. Charlie Wykoff, M.D.

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Investor Day: Agenda

	PRESENTATION SPEAKER
EYP-1901: Phase 2 Plans	Dario Paggiarino, M.D.
YUTIQ Clinical Update	Dario Paggiarino, M.D.
Financial Update	George Elston
Q&A	All
Closing Remarks	Nancy Lurker

EyePoint PHARMACEUTICALS

COMPANY OVERVIEW

Nancy Lurker| President and Chief Executive Officer

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Compelling Pipeline Leverages Proven Durasert® Technology

EYP-1901 is key pipeline program

- Vorolanib, a TKI in bioerodible Durasert
- Positive safety and efficacy data from Phase 1 DAVIO clinical trial
- Phase 2 clinical trials in wet AMD and in non-proliferative diabetic retinopathy (NPDR) expected to begin in Q3 2022

Durasert® - proven intravitreal (IVT) drug delivery

- Sustained ocular drug delivery
- Constant (zero-order kinetics) stable release of drug
- Safely administered to over 80,000 patient eyes across four FDA approved products

Strong balance sheet with growing revenue

- $171 million in cash and investments on June 30, 2022
- Cash runway into 2H 2024
- Commercial franchise positioned for 2022 break-even

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PLATFORM TECHNOLOGY

DURASERT®

Jay Duker, M.D. | Chief Operating Officer

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TECHNOLOGY

DURASERT®

Safe Sustained Intravitreal Drug Delivery

- Used in four of six FDA approved intravitreal sustained delivery products
- Delivered by a single in-office intravitreal injection
- Continuous, stable release of drug

Non-Erodible Products

- YUTIQ® (EyePoint)
- ILUVIEN® (Alimera)
- RETISERT® (B&L)
- VITRASERT® (B&L)

Bioerodible: EYP-1901

- Polyimide coating eliminated
- Initial drug burst from insert surface
- Constant, zero-order kinetic release over months

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EYP-1901

OVERVIEW

Jay Duker, M.D. | Chief Operating Officer

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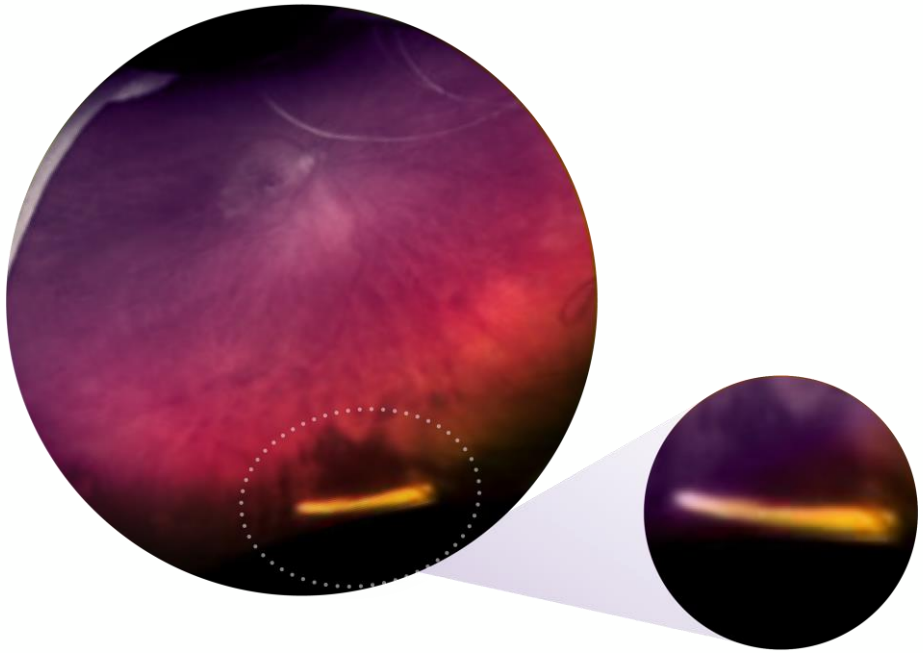
EYP-1901: Vorolanib in Bioerodible Durasert®



EYP-1901 insert at month 5 post-injection

EYP-1901

- Single IVT injection of up to 3 inserts
- Bioerodible formulation of Durasert
- Initial drug burst from surface of insert to rapidly reach therapeutic levels in ocular tissues
- Zero order kinetics release

Vorolanib

- Receptor-binding tyrosine kinase inhibitor (TKI)
- Binds receptors of all VEGF growth factors
- Oral formulation studied in Phase 1 and Phase 2 wet AMD clinical trials[1,2]

1. Jackson et al. JAMA Ophthalmol 2017. 2. Cohen MN et al. Br J Ophthalmol. 2021.

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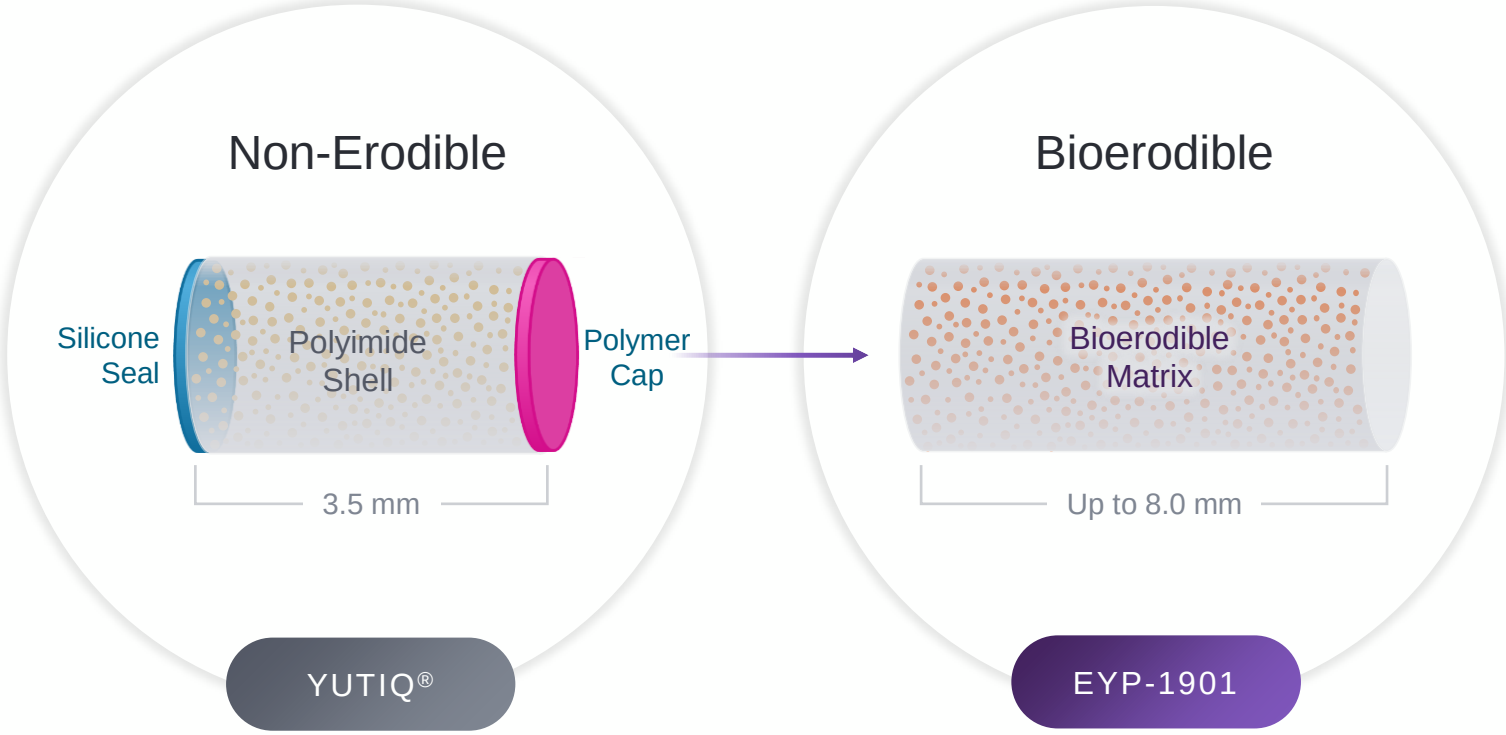
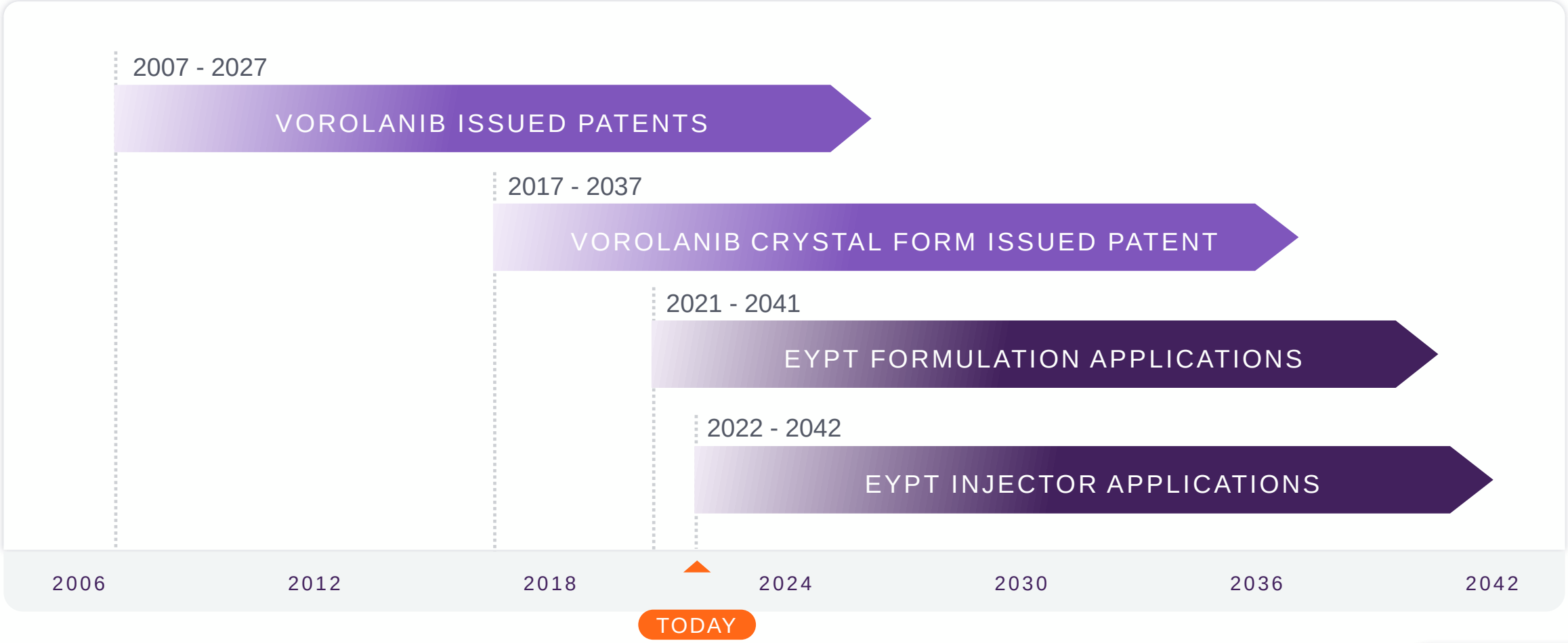
EYP-1901 utilizes a bioerodible formulation of Durasert for repeated IVT injections

- Sustained, zero-order kinetics drug release over 6-9 months in bioerodible
- High drug load per insert
- Insert is ~1/5,000 the volume of the vitreous



EYP-1901, vorolanib and new injector hold strong patents and patent applications for long term value



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EYP-1901

VOROLANIB OVERVIEW

Said Saim, Ph.D. | Chief Technology Officer

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Vorolanib is a specifically designed TKI for reduced off-target binding

Vorolanib selected after evaluation of over 100 small molecule TKIs

- Previously studied in Phase 1 and Phase 2 clinical trials as an oral therapy with compelling efficacy data and no ocular toxicity
- Intracellular binding of all VEGF receptors thereby blocking receptors of all VEGF family of growth factors with strong affinity to VEGF receptor 2
- Reduced off-target binding of receptors associated with TKI systemic side effects

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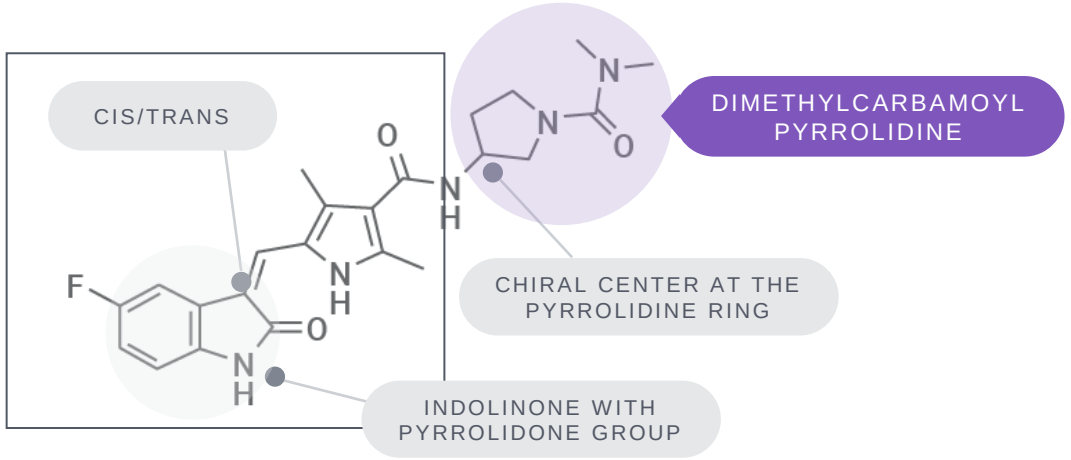
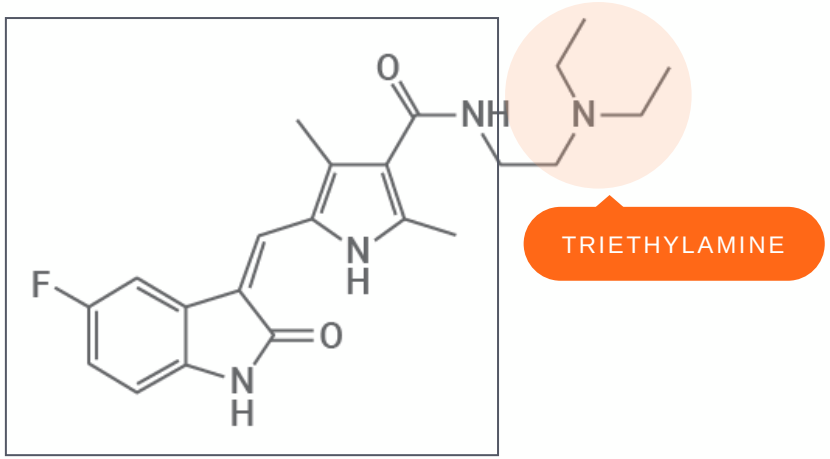
Vorolanib was specifically designed to reduce off target binding that may lead to an improved safety profile

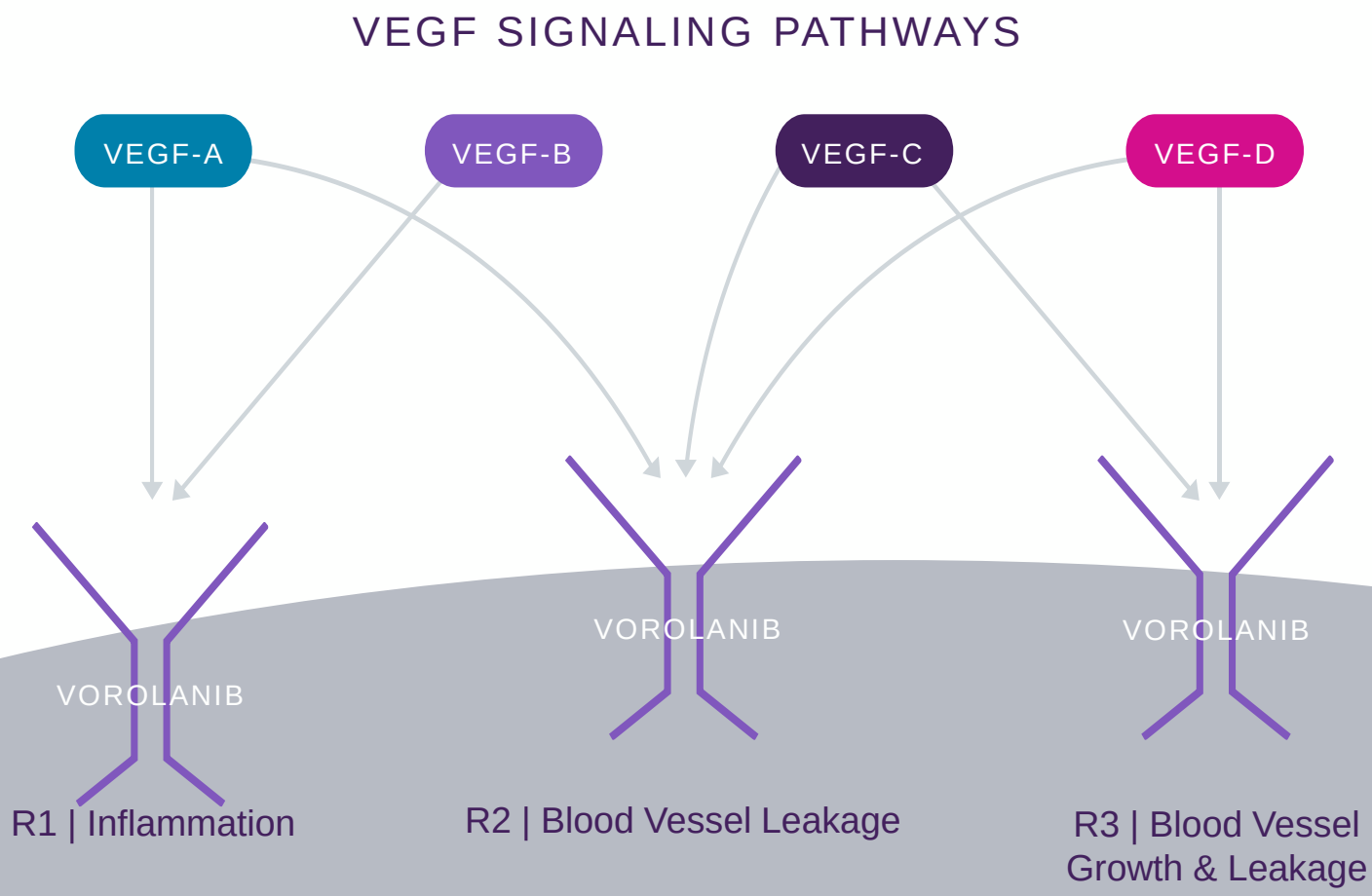
vorolanib



sunitinib



Vorolanib binds receptors of all VEGF growth factors with strong affinity to VEGF receptor 2 - a receptor associated with blood vessel leakage



VOROLANIB INHIBITS VEGFR

- Binds to the intracellular domain of tyrosine kinases
- Targets the angiogenic VEGF receptors R1, R2 and R3 with high potency

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EYP-1901

VOROLANIB PRE-CLINICAL POC PHARMACOLOGY STUDIES

Said Saim, Ph.D. | Chief Technology Officer

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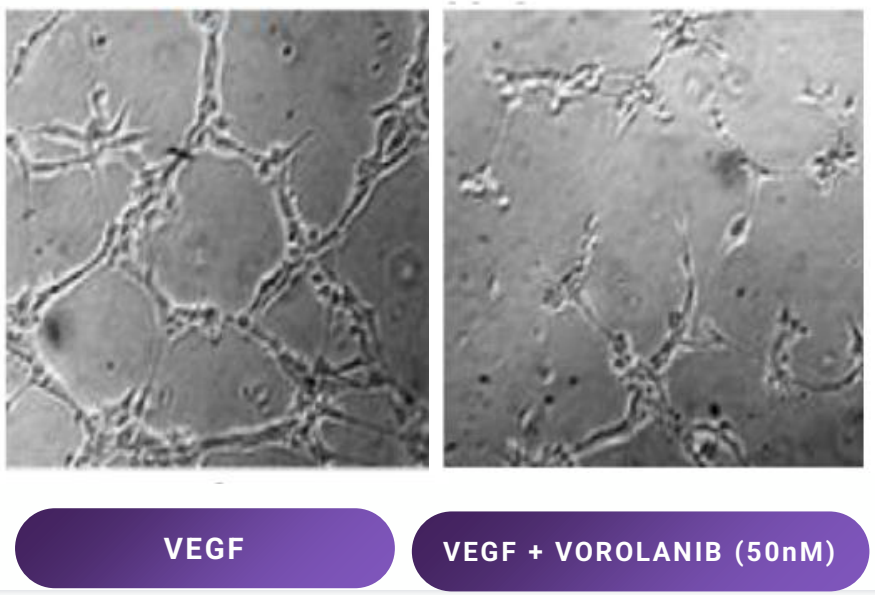
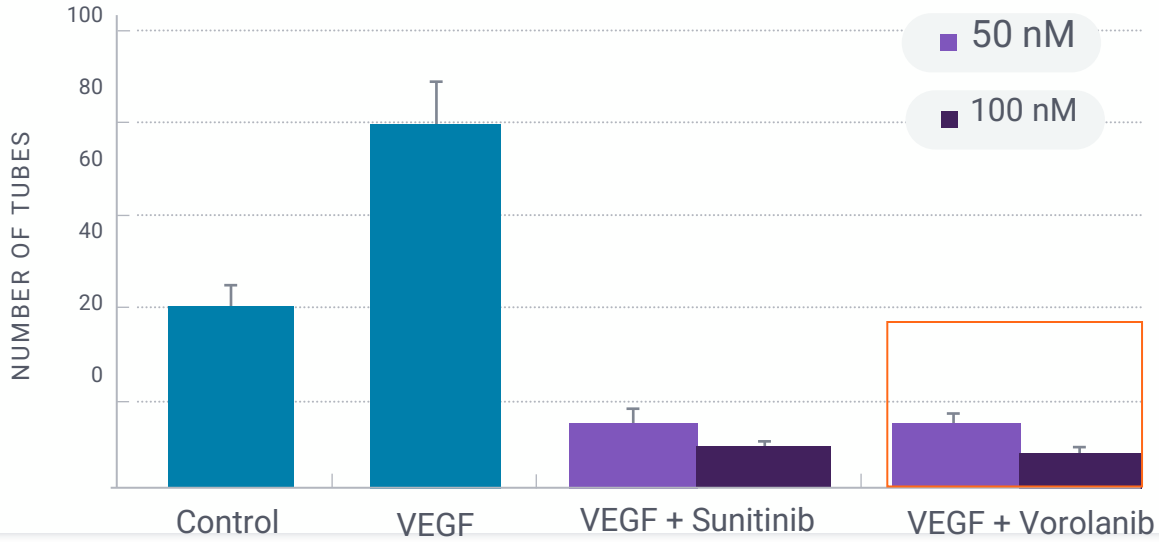
Vorolanib significantly reduces new blood vessel formation in an established cell model

Tube formation in cultured HUVEC cells



Effect on HUVEC tube formation induced by VEGF



Vorolanib inhibited blood vessel tube formation at very low concentrations of 50 to 100 nM (IC50 is 52 nM; equivalent to 0.052 µM or 22.9 ng/g) in a dose dependent manner

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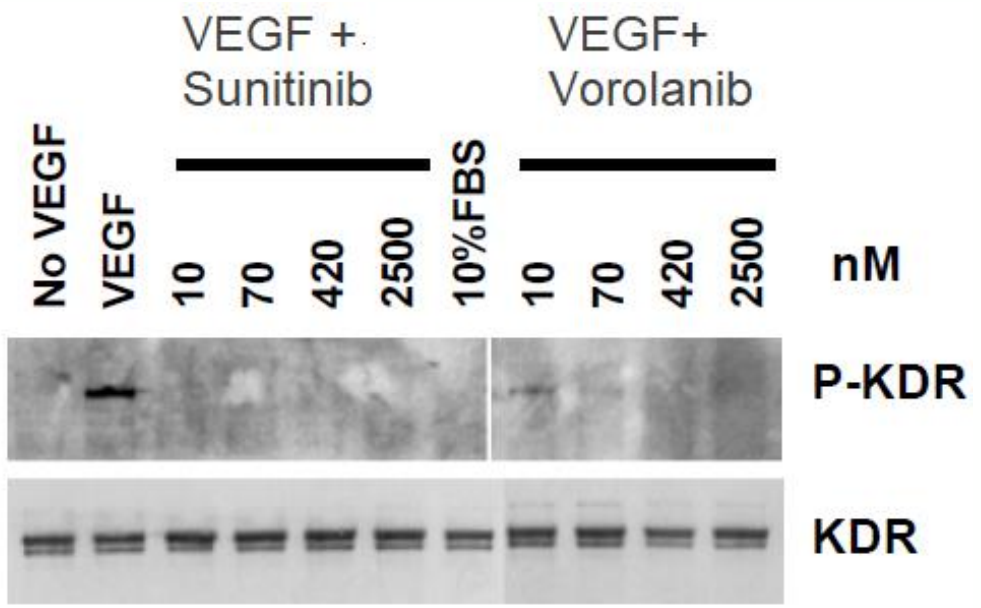
Vorolanib concentrations at only 20% of IC50 induced significant inhibition of VEGFR phosphorylation

VEGFR-2 PHOSPHORYLATION IN HUVEC CELLS STIMULATED WITH VEGF



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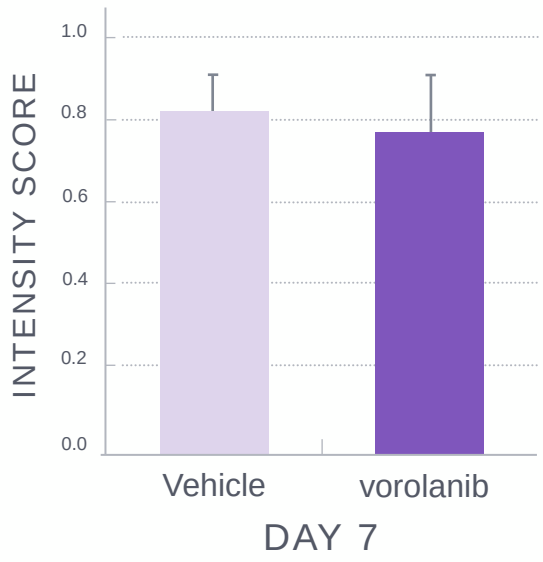
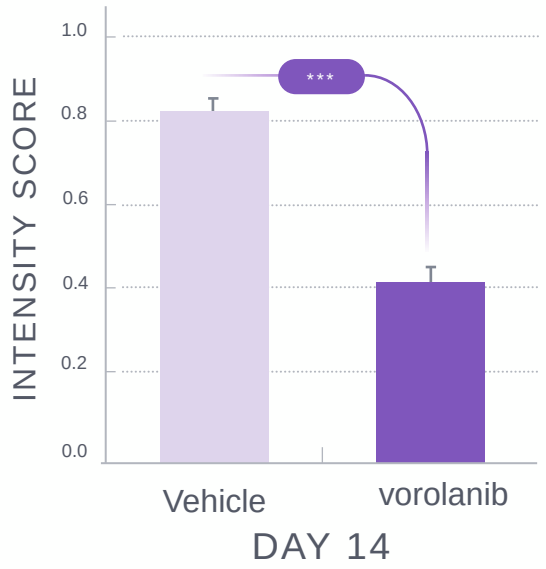
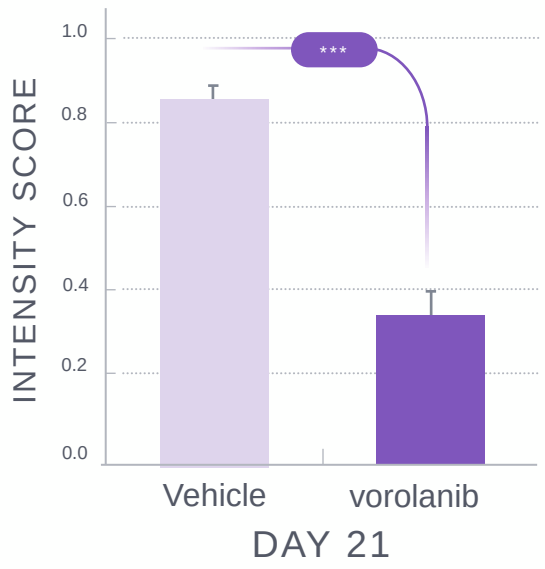
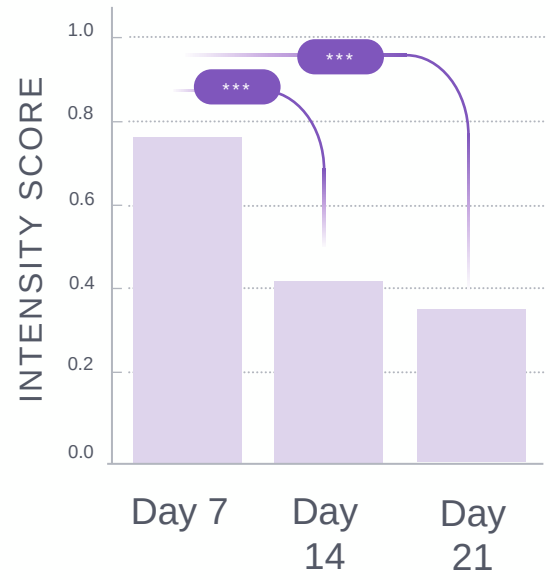
In a validated laser CNV animal study vorolanib demonstrated significantly lower vascular leakage suggesting activity in wet AMD

TREATMENT STARTED AT DAY 7 AFTER LASER INJURY | 30 MG/KG/D









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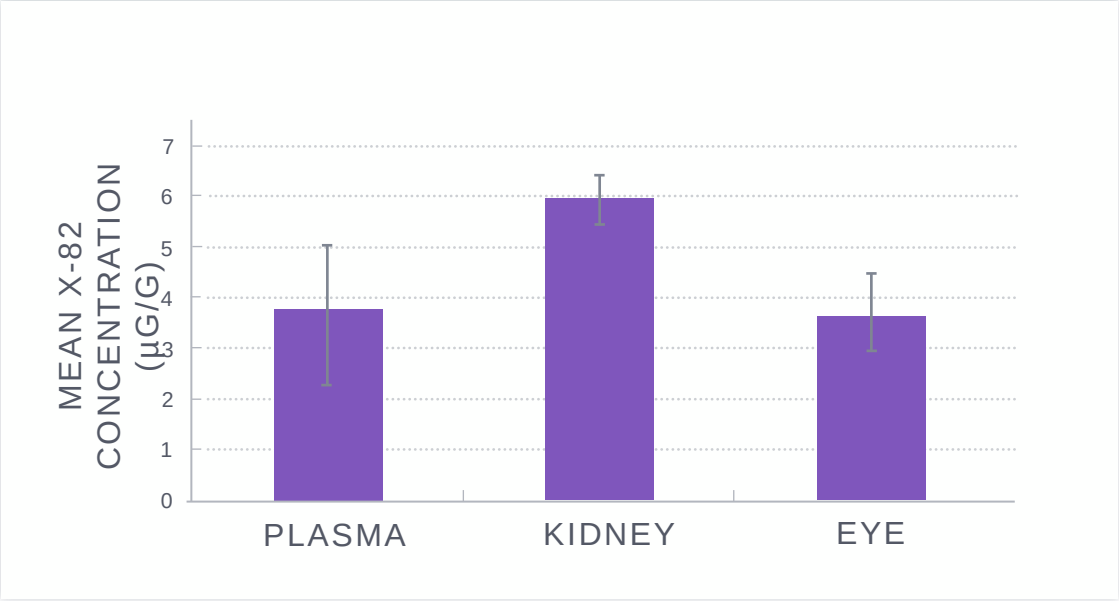
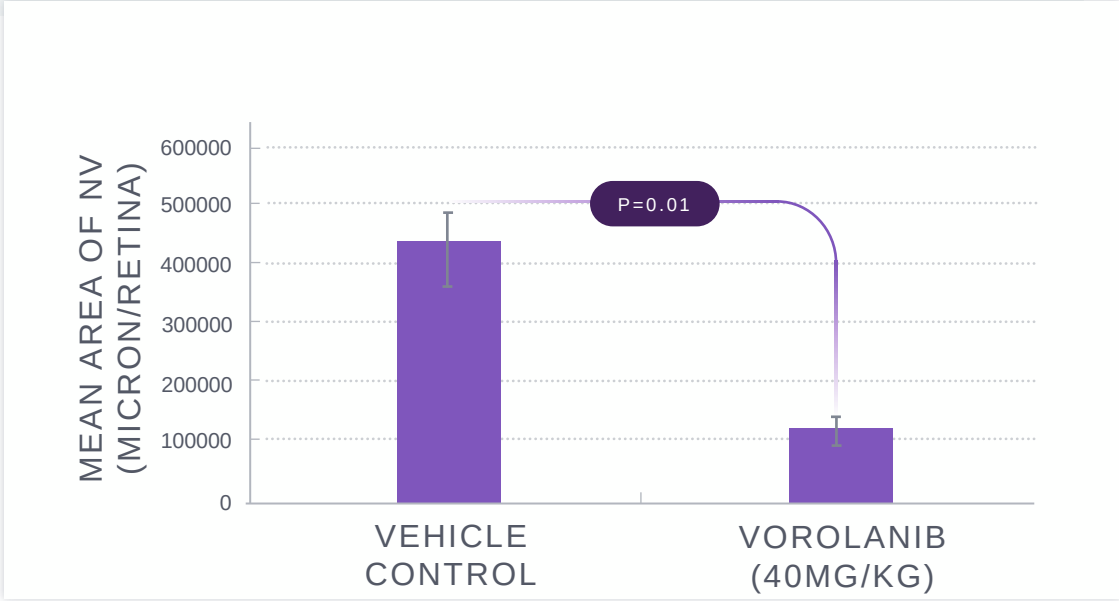
Vorolanib demonstrated inhibition of retinal neovascularization in an animal study suggesting activity in diabetic retinopathy

LEVELS IN EYE SIMILAR TO LEVELS IN PLASMA



HIGH EFFICACY (~71% REDUCTION IN NV AREA)



Hu Huang, Effects of X-82 on retinal neovascularization (NV) in a murine model of oxygen-induced retinopathy (OIR) (X-82-NCL-033) ; 40 mg/kg/d in solution/IP injection; 75% O2 from day 1 to Day 12; Room air from Day 12-17; X-82 at Day 12.

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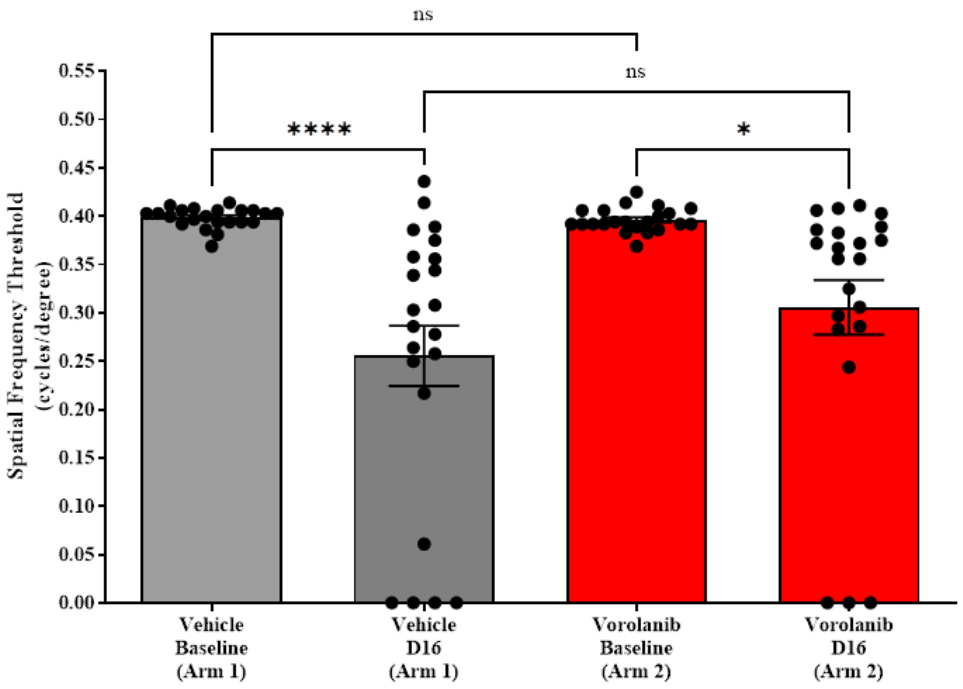
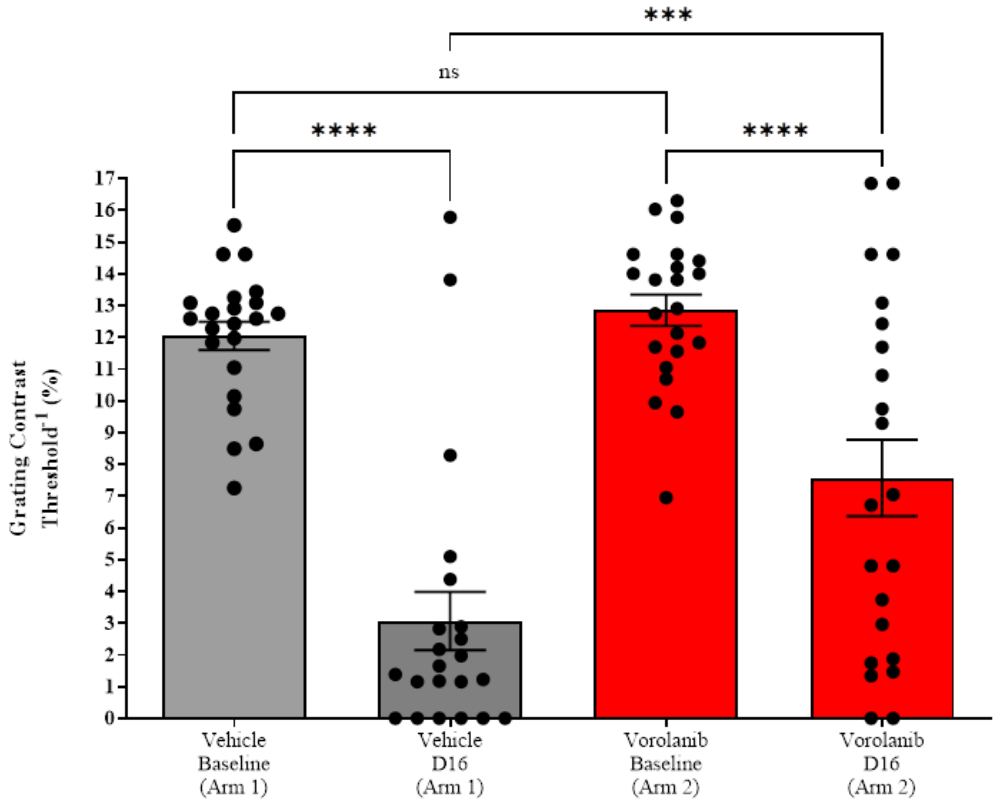
Optokinetic tracking in validated retinal detachment mouse model suggests that vorolanib has neuroprotective properties

Visual Acuity



Contrast Vision



- Higher visual acuity function in vorolanib treated mice vs vehicle
- Significantly higher contrast vision in vorolanib treated mice vs vehicle

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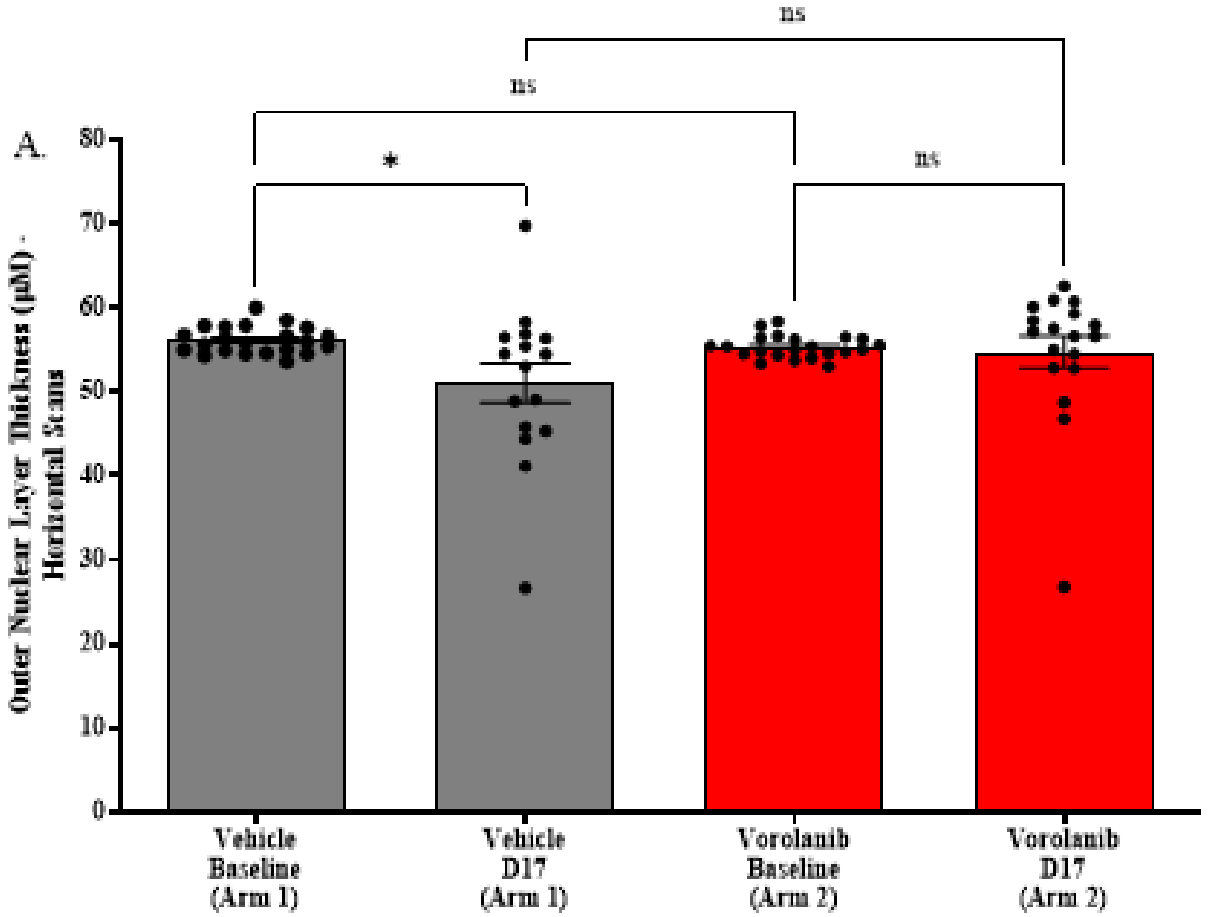
OCT in validated retinal detachment mouse model further suggests that vorolanib has neuroprotective properties



Preservation of Structure:
Significant loss of
ONL thickness in vehicle eyes
but not in vorolanib eyes
suggesting that vorolanib
protects photoreceptors

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VOROLANIB

Summary and Key Takeaways

- Binds intracellular domain of receptors
- Compelling efficacy data as an oral therapy in Phase 1 and 2 clinical trials
- Levels as low as 20% of IC50 show significant inhibition of VEGFR2 phosphorylation
- Retinal detachment model indicates potential neuroprotection by vorolanib

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EYP-1901

PRECLINICAL PK DATA

Said Saim, Ph.D. | Chief Technology Officer

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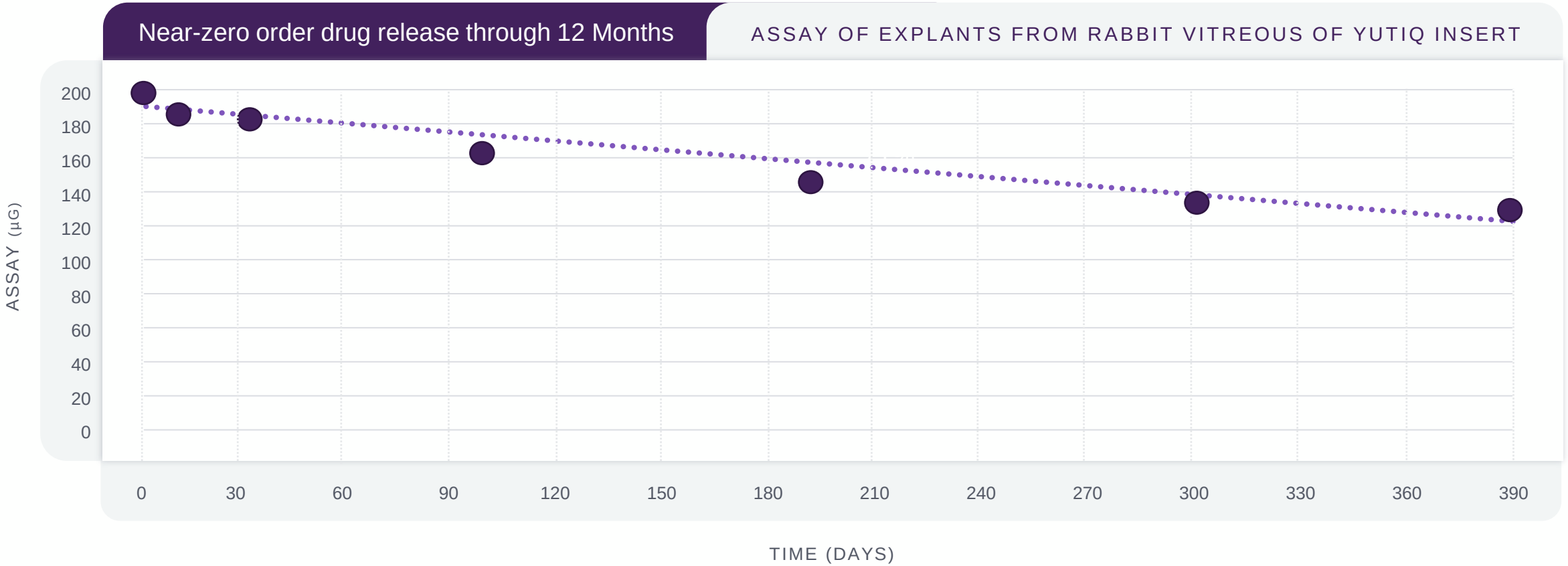
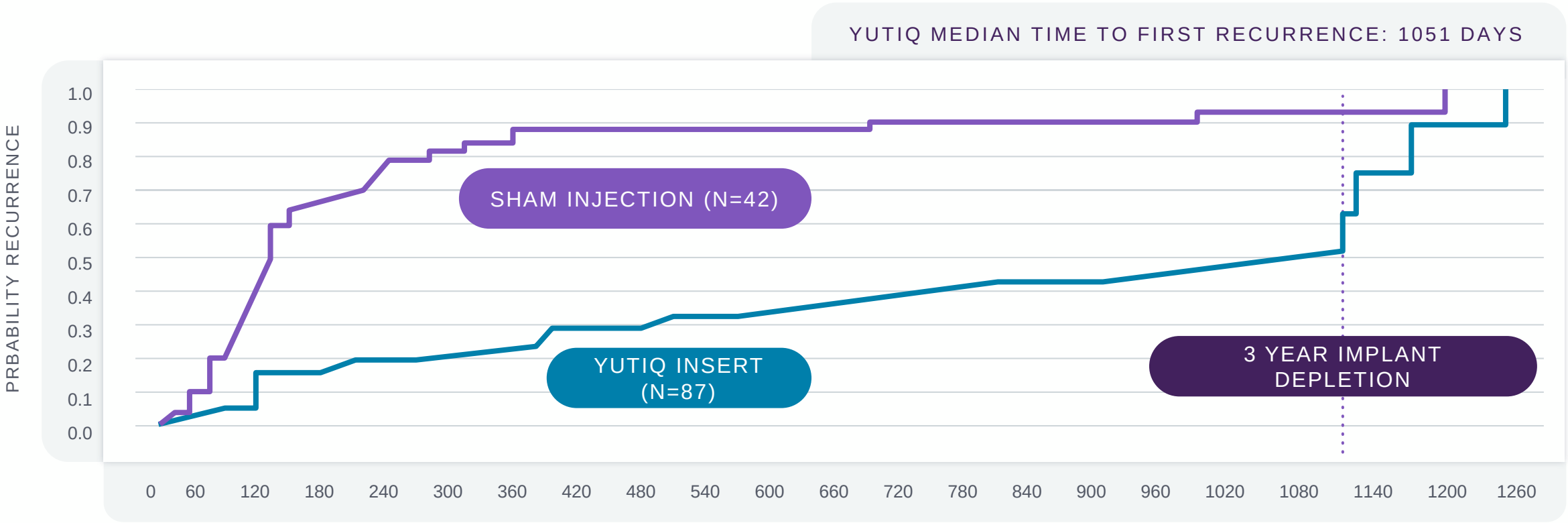
YUTIQ provides a benchmark for zero-order kinetics release over 12 months in non-erodible Durasert



YUTIQ demonstrates continuous 3-year delivery and efficacy in non-erodible Durasert



US Phase 3 Trial

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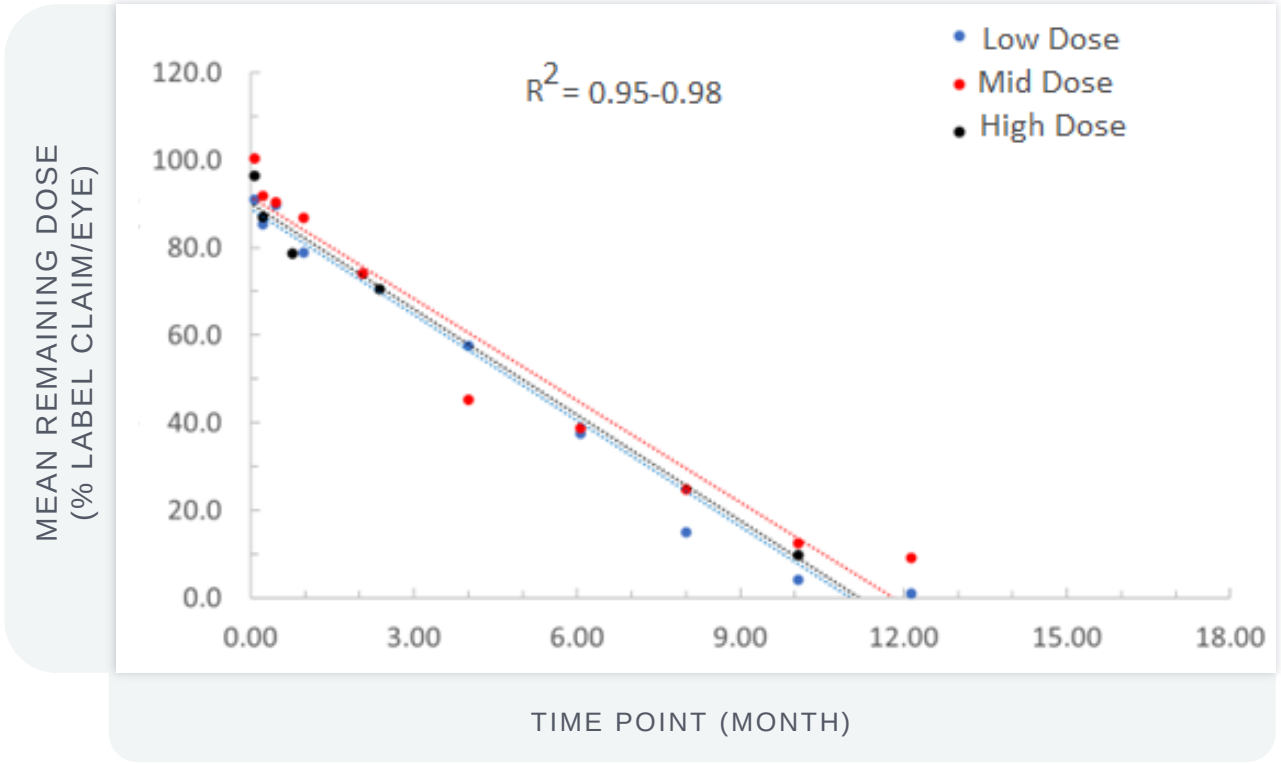
EYP-1901 reflects near zero-order drug release across multiple doses in a rabbit model



- Near zero-order drug release is observed over 8-10 months
- Inserts are essentially depleted past 8 months, confirming observed pharmacokinetics in ocular tissues
- Release rate is dose proportional
- Consistent release of micrograms levels of drug per day

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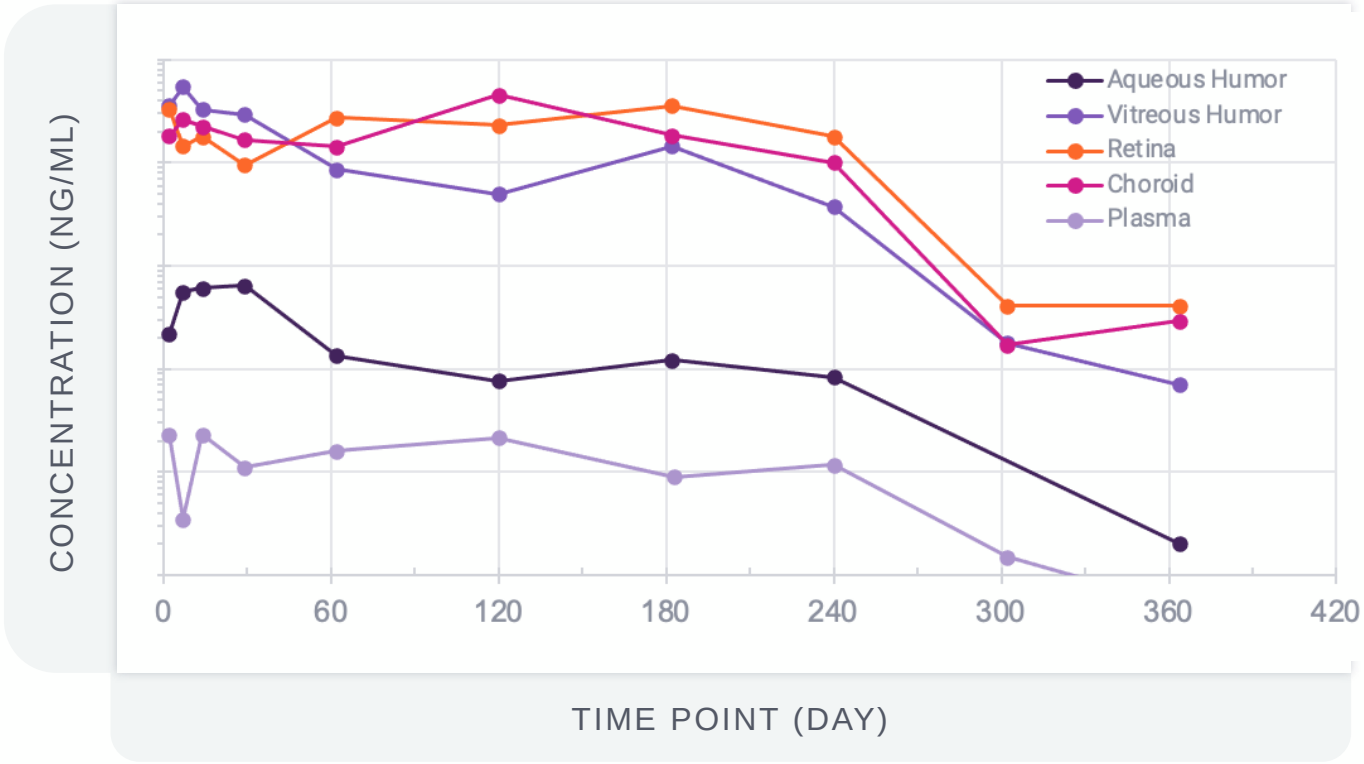
Pharmacokinetic profile of EYP-1901 in local tissues supports zero-order kinetics release and sustained receptor binding above IC50 in a rabbit model



- Initial burst followed by steady state levels of vorolanib in all ocular tissues
- Levels approximately an order of magnitude higher than IC50 observed at steady state in retina and choroids
- Low levels in plasma and aqueous humor

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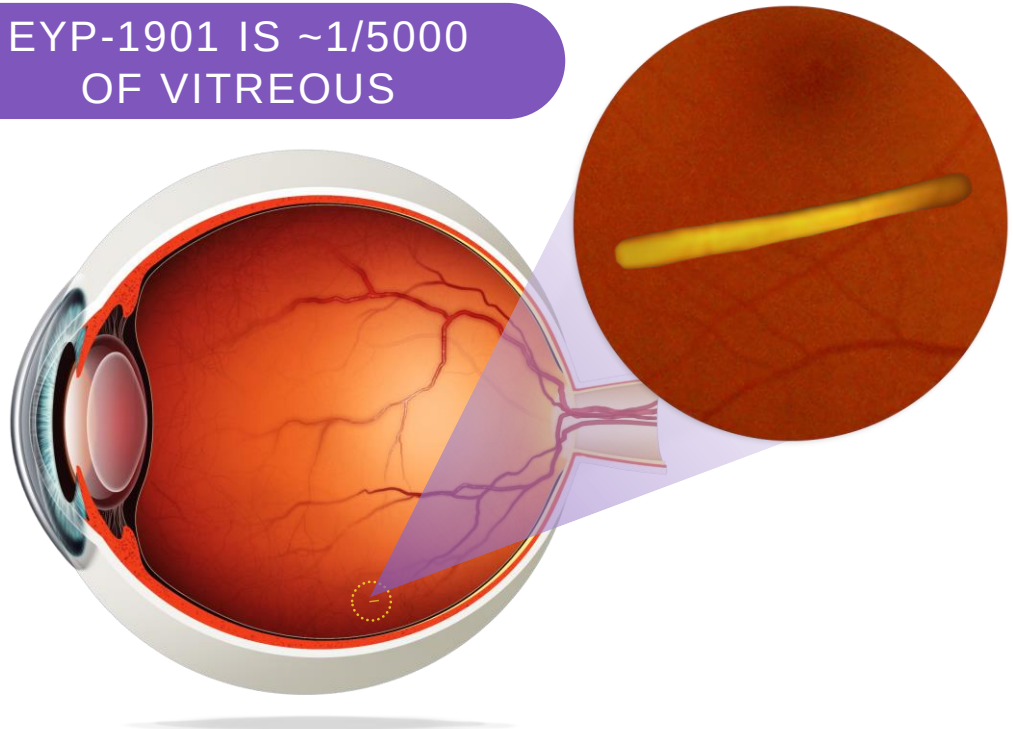
EYP-1901 bioerodible formulation supported by in-vitro dissolution model

EYP-1901 IS ~1/5000 OF VITREOUS



INSERT AT 12 MONTHS AND DAY 0

Enlarged for illustrative purposed

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EYP-1901 PRECLINICAL PK AND SAFETY DATA

Summary and Key Takeaways

- Consistent, zero order release of µgs/day through 9 months
- Steady state levels in ocular tissues for 8-9 months at levels higher than IC50 for VEGFR2 inhibition
- Release is dose proportional
- Inserts are bioeroded over time

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EYP-1901

VOROLANIB ORAL FORMULATION CLINICAL TRIALS

Jay Duker, M.D. | Chief Operating Officer

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Oral vorolanib phase 1 clinical trial results

Demonstrated clinical activity in wet AMD in oral formulation

Trial Design

- Open label, 24 weeks, dose escalation, no control, oral delivery
- N=25

Phase 1: Results

- BCVA maintained to within 4 letters of baseline or improved in all but 1 participant
- 60% (15/25) of patients required no supplemental anti-VEGF injection while on oral vorolanib
- Excluding the low dose, 72% of patients required no supplemental anti-VEGF injection
- Mean OCT thickness was reduced by -50 +/- 97 µm
- Mean OCT thickness in treatment-naïve patients was reduced by ~80 µm

BCVA: best corrected visual acuity OCT: ocular coherence tomography.
Study performed by Tyrogenix.

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Vorolanib Phase 2 Clinical Trial Results

Reduced supplemental therapy versus anti-VEGF PRN for all doses with no ocular toxicity

For subjects followed ≥ 6 months	Placebo n=33	50 mg n=34	100 mg n=30	200 mg n=26
Median number of anti-VEGF injections*	9.0	6.1	5.8	4.6
Percent of Patients w/ no supplemental anti-VEGF therapy	2.6	7.5	10.3	20.5

Strict pre-defined supplement criteria with anti-VEGF therapy:

- Any increase in fluid on OCT compared to screening visit (~14 days after an IVT injection)
- New or increased macular hemorrhage by fundus photography

* Normalized for number of months on study. Study performed by Tyrogenix.

Oral vorolanib clinical trials showed well controlled fellow eye conversion to wet AMD

Phase 1 trial:

- **No** participant among the 25 completers developed new neovascular AMD in the fellow eye*

Phase 2 trial:

- Placebo group (PRN intravitreal Anti-VEGF)
  - **12.5% -** (3/24) of subjects with unilateral disease at baseline developed exudative AMD in their fellow eyes by 52 weeks
- Treated group (vorolanib at 50mg, 100mg, 200mg daily)
  - **1.3%** - (1/26), (0/27) and (0/23) in the 50 mg, 100 mg, and 200 mg, respectively developed exudative AMD in their fellow eye by 52 weeks

* Study performed by Tyrogenix.

* One participant (receiving 50 mg daily) developed new exudation from a previously treated fellow eye CNV

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EYP-1901

PHASE 1 DAVIO CLINICAL TRIAL 12 MONTH RESULTS

Carl Regillo, M.D.

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EYP-1901 Phase 1 DAVIO Clinical Trial – “Durasert® and Vorolanib In Ophthalmology”

PROTOCOL SUMMARY

Enrollment

- Previously treated wet AMD eyes
- No exclusion for presence of fluid

Criteria for Supplemental Anti-VEGF Therapy*

- New fluid > 75 microns on OCT
- Loss of ≥ 2 lines of BCVA secondary to wet AMD
- New macular hemorrhage secondary to wet AMD

Methodology

- All patients received SoC anti-VEGF at screening
- All patients received a single dose of EYP-1901 at baseline (Day 0) ranging from 440 (µg) to 3090 (µg)
- No EYP-1901 redosing for duration of the study
- Clinical assessments and evaluation for supplemental anti-VEGF therapy every 4 weeks through month 12

Phase 1 Trial: A 12-month, multicenter, open-label, dose escalation, no control arm study of EYP-1901 in subjects with Wet AMD

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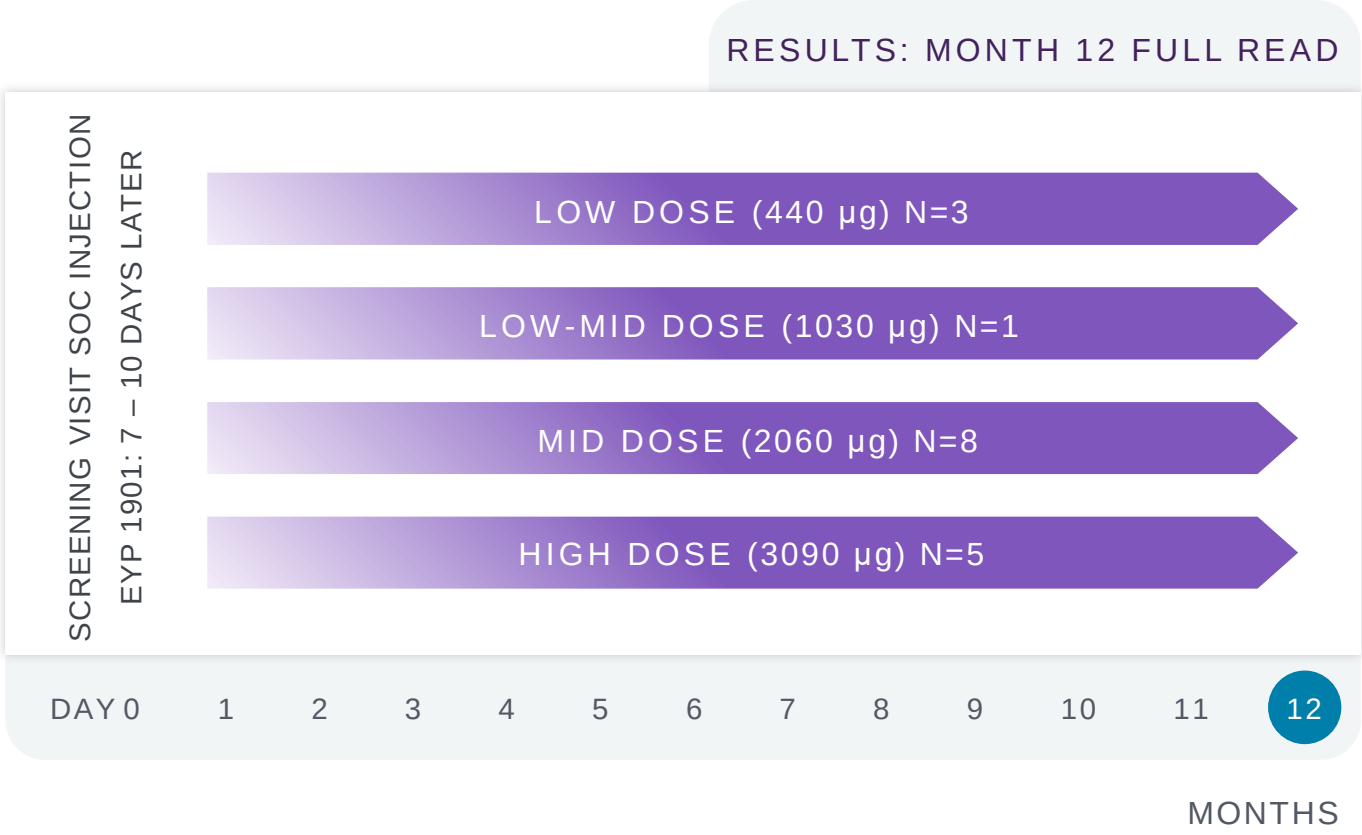
EYP-1901 Phase 1 DAVIO clinical trial enrolled 17 patients over four different dosages

Primary Endpoint: Safety

- Ocular and non-ocular TEAEs through month-12

Secondary Endpoints

- Supplemental anti-VEGF therapy through 6-months
- Change in BCVA from baseline
- CST as measured by OCT



EYP-1901 Phase 1 DAVIO clinical trial participant overview

BASELINE CHARACTERISTICS

Mean age, range (years)	77.4
Female (n)	13/17
Mean BCVA, range (ETDRS letters)	69 letters
Mean CST, range (microns)	299 microns
Median length of time for Wet AMD Diagnosis	17
Mean # of anti-VEGF injections per year prior to enrollment	**8.0 injections/year**

BCVA: best corrected visual acuity; ETDRS: Early Treatment Diabetic Retinopathy Study; CST: central subfield thickness

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EYP-1901 Phase 1 DAVIO clinical trial demonstrated favorable overall safety data at 12-months meeting primary endpoint

Ocular AEs of particular interest:

- No vitreous floaters
- No endophthalmitis
- No retinal detachment
- No implant migration in the anterior chamber
- No retinal vasculitis
- No posterior segment inflammation

- No ocular serious adverse events (SAEs)
- No drug-related systemic SAEs
- No evidence of vorolanib-related ocular or systemic toxicity
- No Durasert-related toxicity or tolerance issues
- No dose limiting toxicity

Ocular AEs observed:

- One eye: mild asymptomatic anterior chamber cell/flare;
  - treated with Maxitrol® eyedrops – resolved in 8 days – no sequelae or recurrence
- One eye: asymptomatic vitreous hemorrhage from injection; observed

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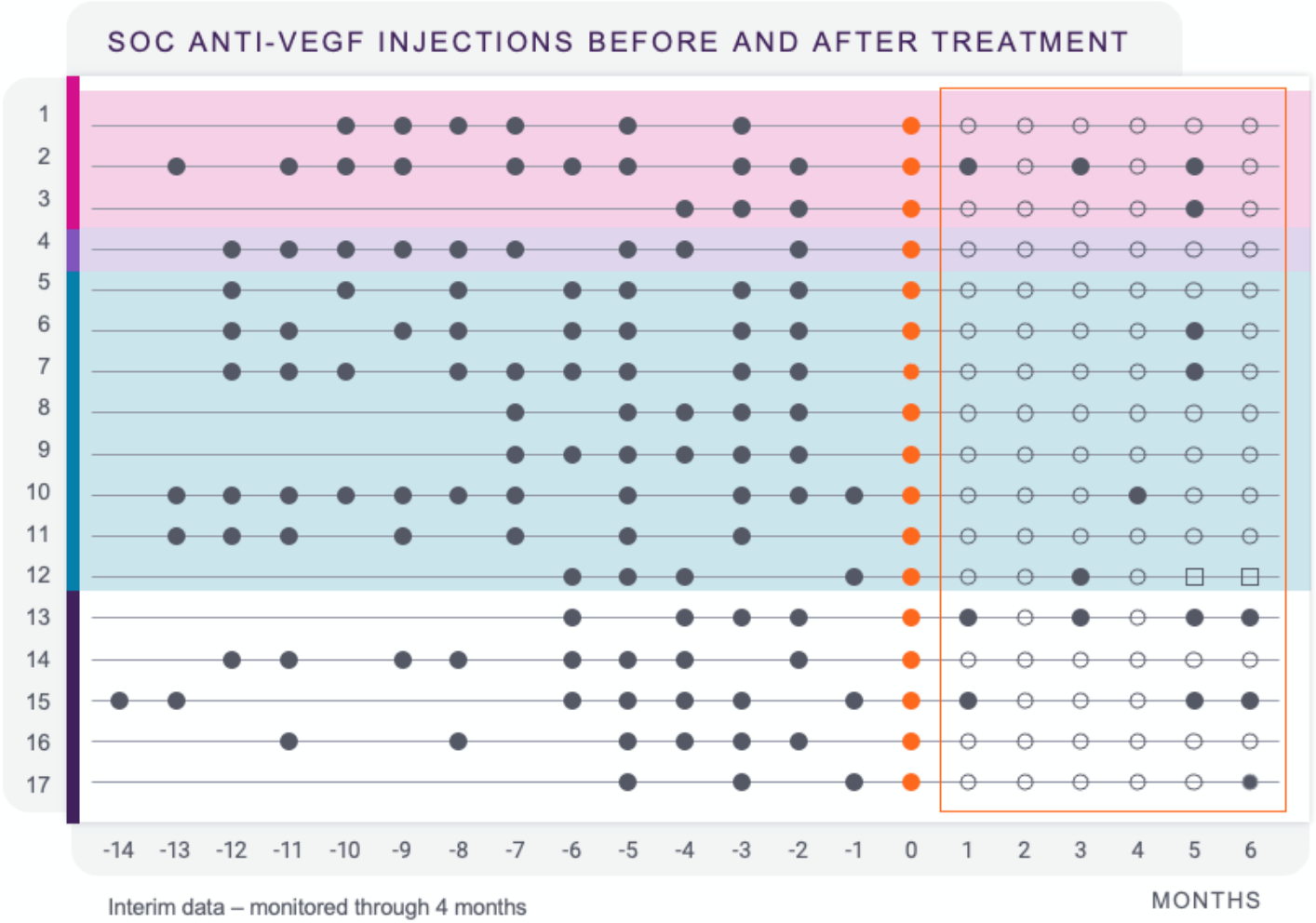
EYP-1901 phase 1 DAVIO clinical trial demonstrated clinically significant reduction in treatment burden of 79% at 6-months



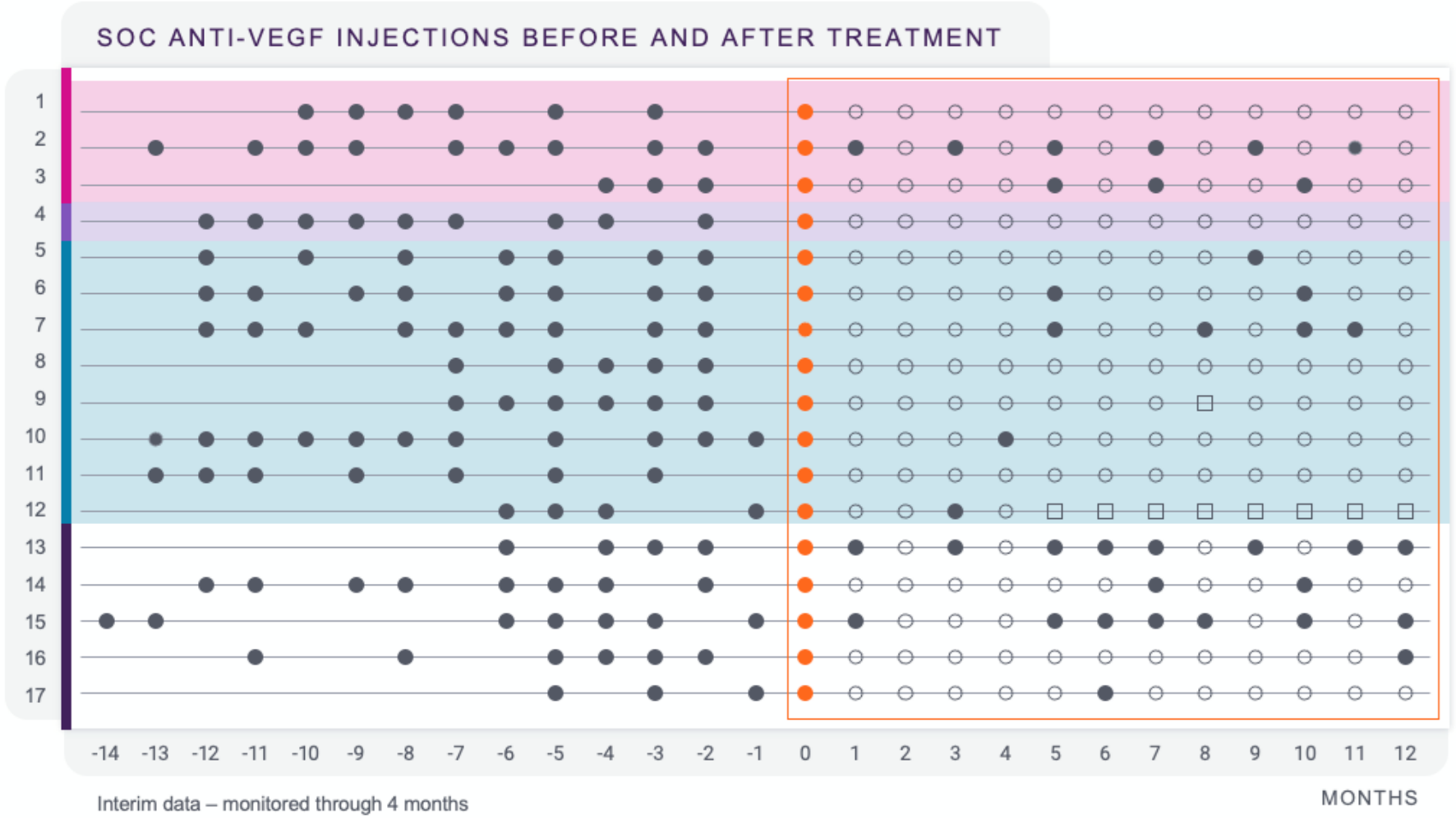
REDUCTION IN AVERAGE MONTHLY TX BURDEN

DOSE	%
LOW DOSE (N=3)	-70%
LOW MID DOSE (N=3)	-100%
MID DOSE (N=3)	-89%
HIGH DOSE (N=5)	-55%

● Anti-VEGF ● SoC (Anti-VEGF)+ EYP1901
○ No rescue injection given ☐ Missed visit

EyePoint PHARMACEUTICALS

EYP-1901 Phase 1 DAVIO clinical trial continues clinically significant reduction in treatment burden of 74% at 12-months



REDUCTION IN AVERAGE MONTHLY TX BURDEN

DOSE	12 MOS
LOW DOSE (N=3)	-66%
LOW MID DOSE (N=1)	-100%
MID DOSE (N=8)	-88%
HIGH DOSE (N=5)	-47%

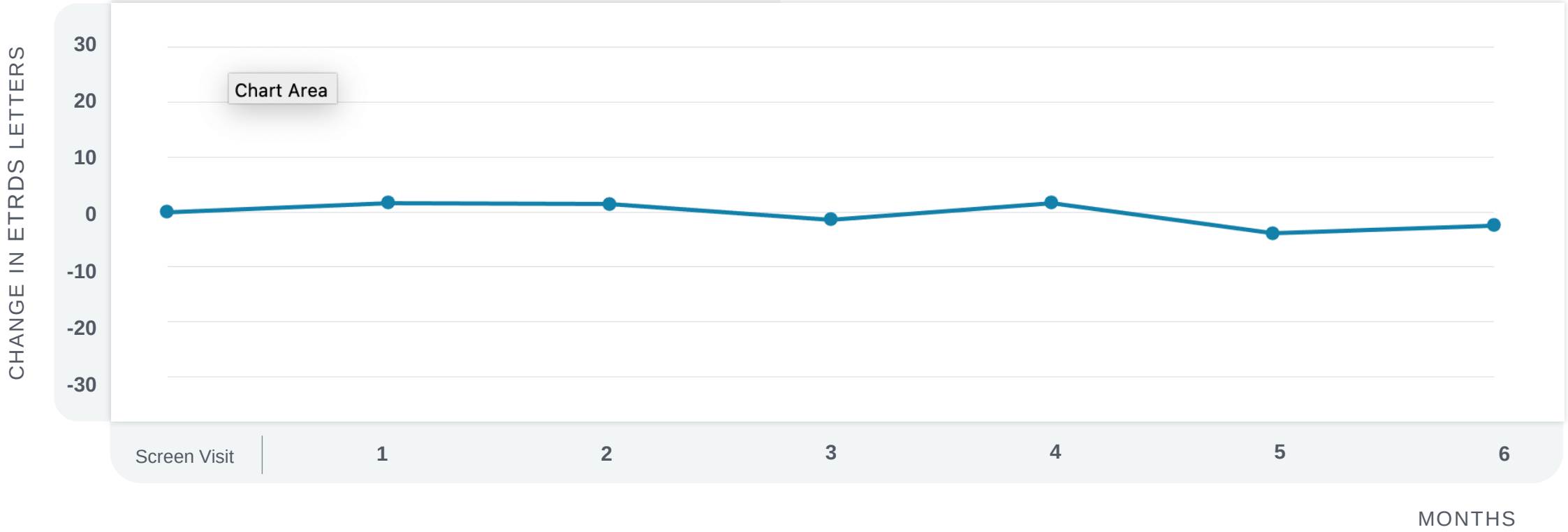
● Anti-VEGF ● SoC (Anti-VEGF)+ EYP1901
○ No rescue injection given ☐ Missed visit

EyePoint PHARMACEUTICALS

EYP-1901 Phase 1 DAVIO clinical trial results at 6-months: mean BCVA is stable after single treatment

MEAN CHANGE IN BCVA FROM SCREENING VISIT

For all 17 eyes at 6 months | *BCVA = -2.5 letters*



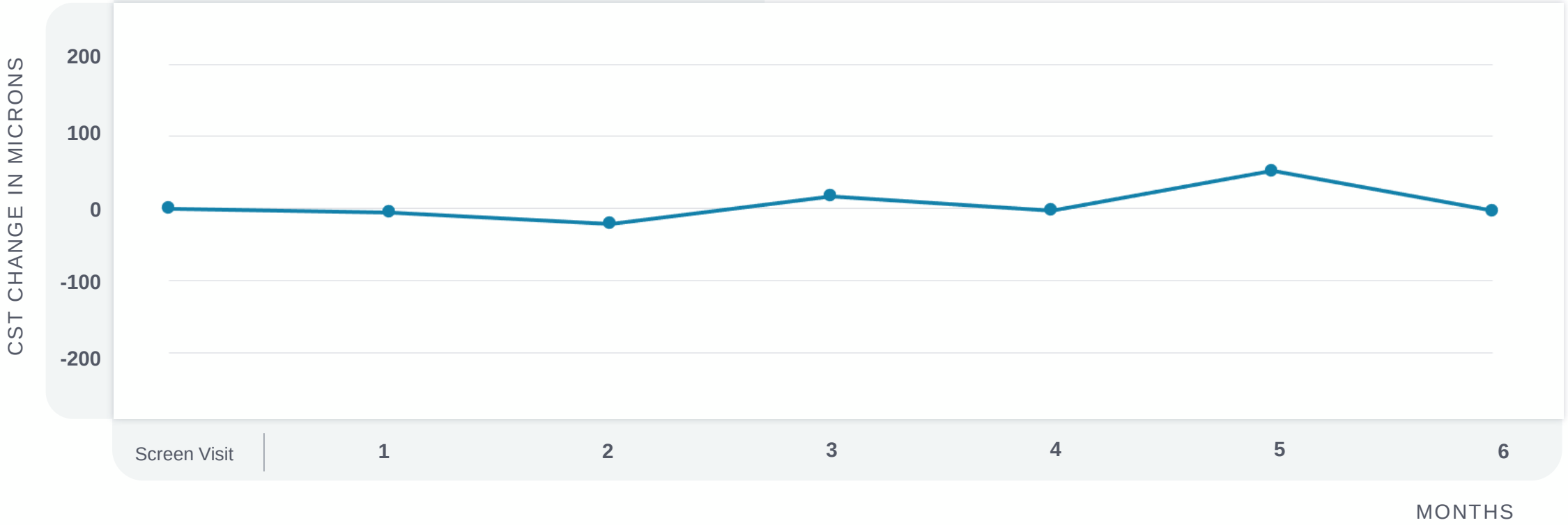
BCVA: best corrected visual acuity

EyePoint PHARMACEUTICALS

EYP-1901 Phase 1 DAVIO clinical trial results at 6-months: mean CST is stable after single treatment

MEAN CHANGE IN CST FROM SCREENING VISIT

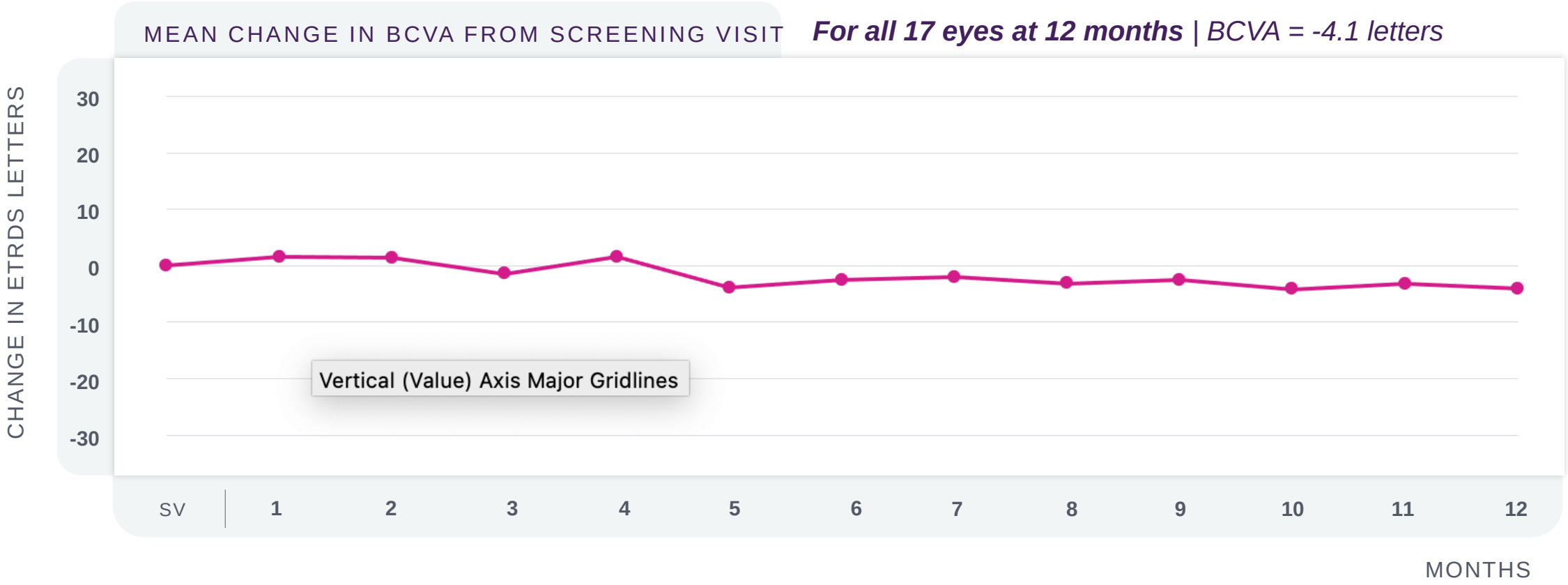
For all 17 eyes at 6 months | *CST on OCT = -3.4 microns*



OCT: optical coherence tomography; CST: central subfield thickness

EyePoint PHARMACEUTICALS

EYP-1901 Phase 1 DAVIO clinical trial results at 12-months: mean BCVA is stable after single treatment

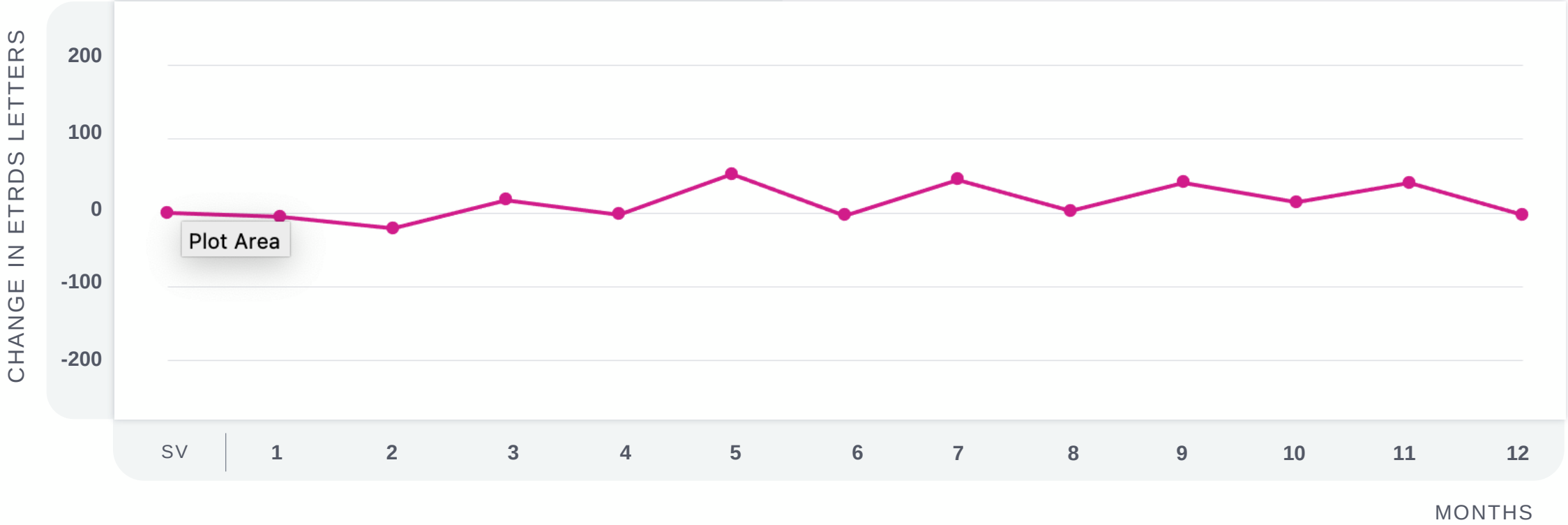


BCVA: best corrected visual acuity; SV: screening visit

EYP-1901 Phase 1 DAVIO clinical trial results at 12-months: mean CST is stable after single treatment

MEAN CHANGE IN CST FROM SCREENING VISIT

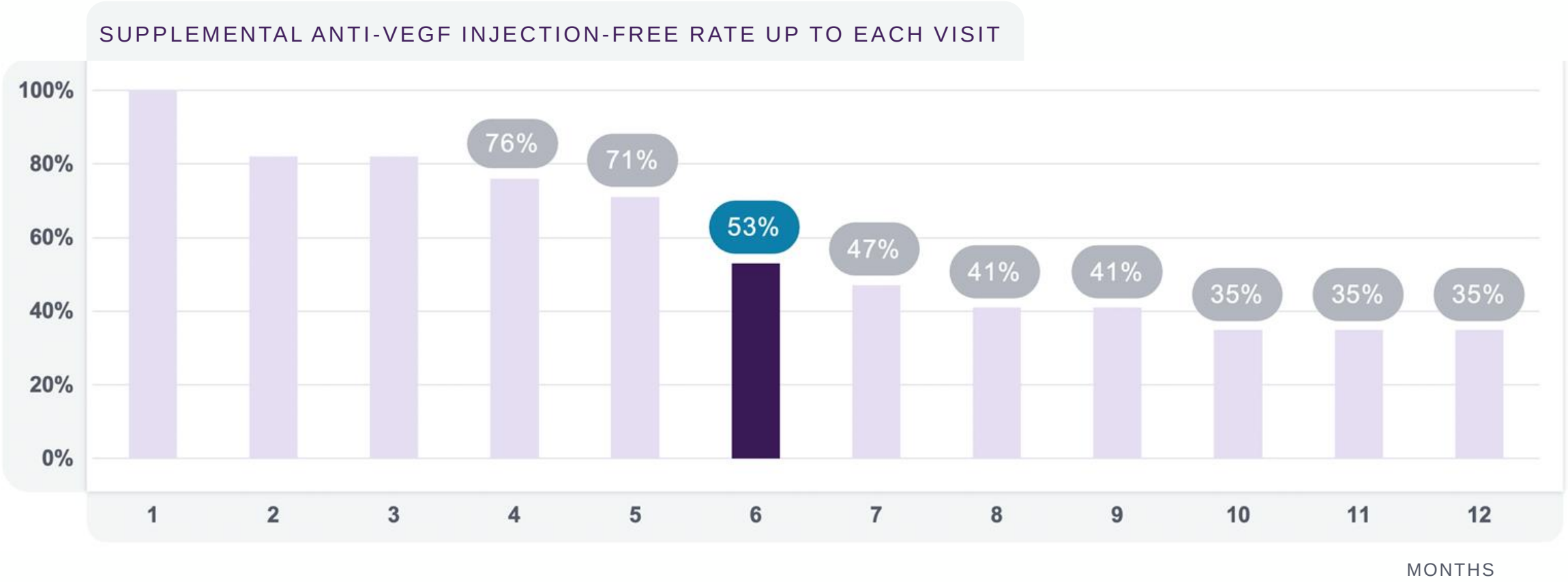
For all 17 eyes at 12 months | *CST on OCT = -2.8 microns*



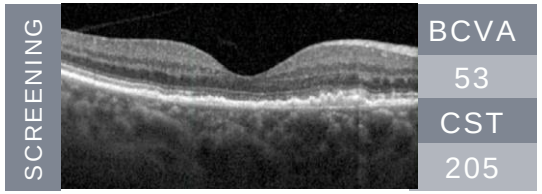
OCT: optical coherence tomography; CST: central subfield thickness

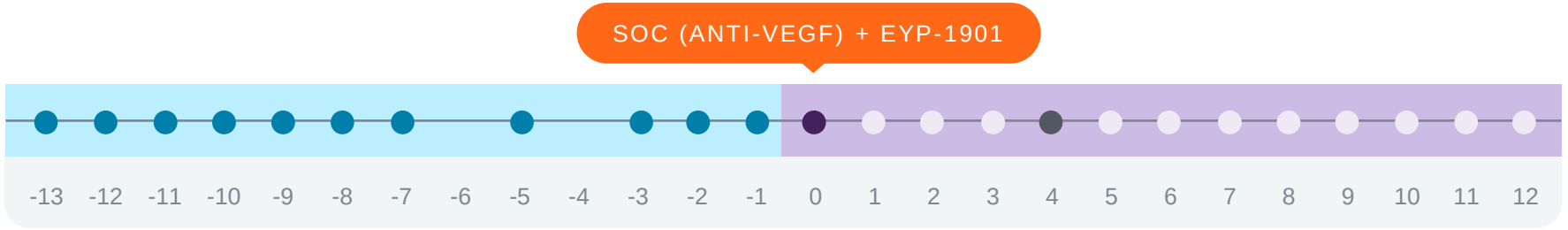
EyePoint PHARMACEUTICALS

EYP-1901 Phase 1 DAVIO clinical trial demonstrated that 53% of patients did not require supplemental anti-VEGF treatment at 6-months



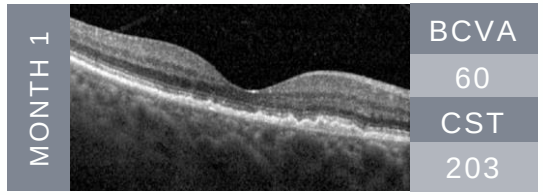
EYP-1901 Phase 1 DAVIO clinical trial case study, a mid-dose cohort patient remained dry after only one supplemental injection

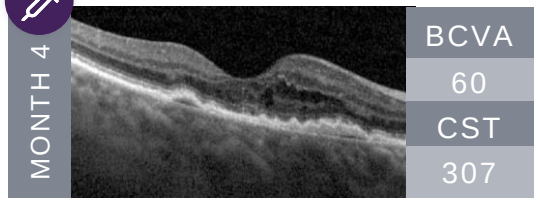


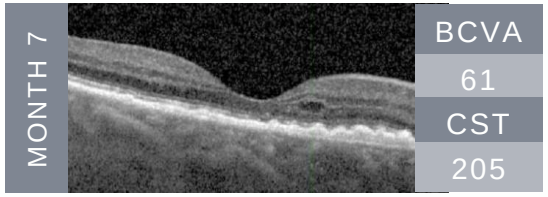


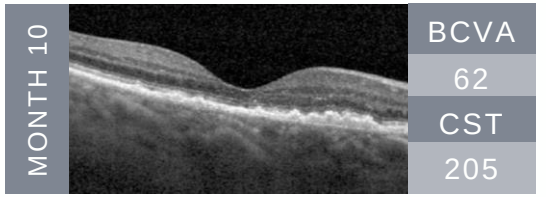
DAY 0

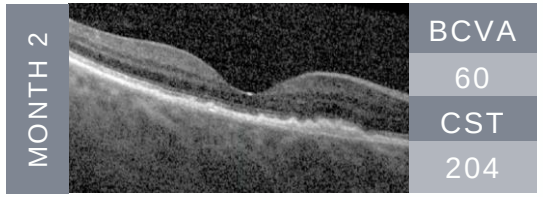
Case 1: SOC Anti-VEGF Injections Before and After Treatment

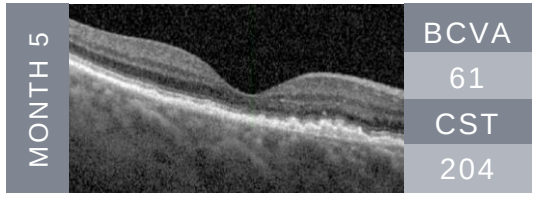


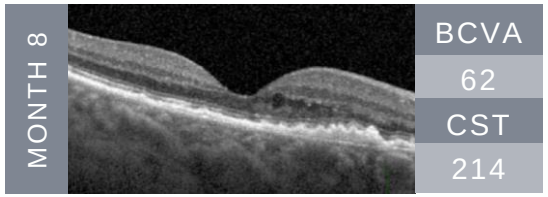


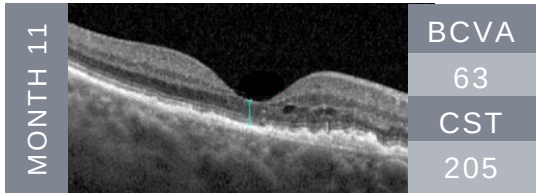


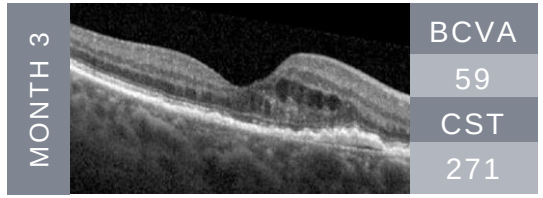


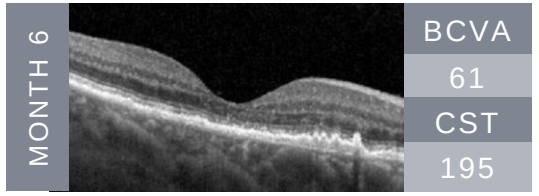


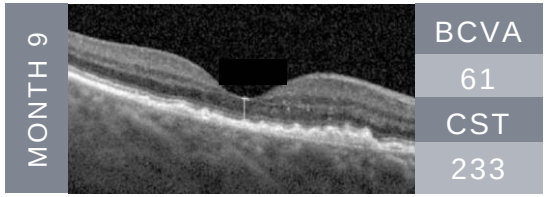


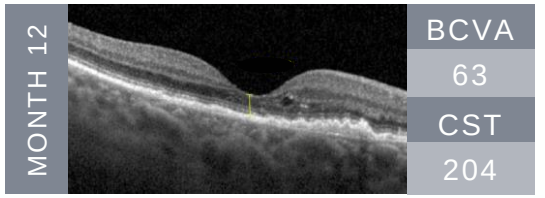










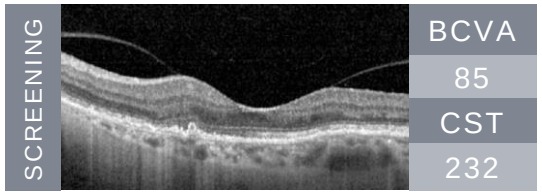


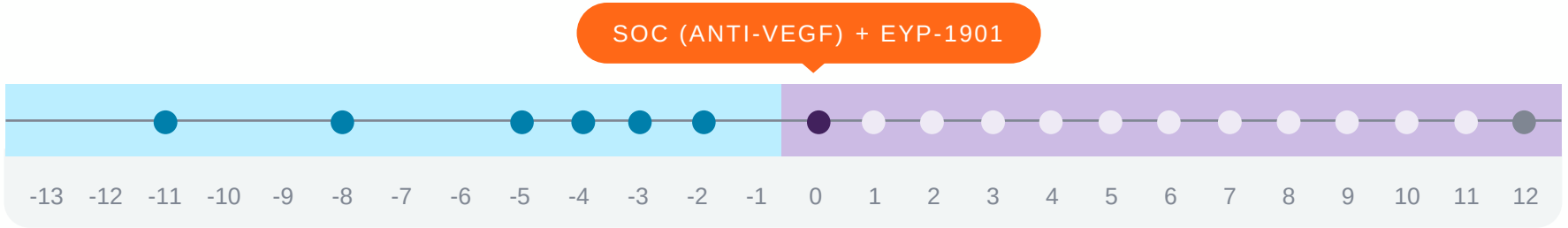
Indicates administration of EYP-1901

Indicates administration of supplemental injection

EyePoint Pharmaceuticals

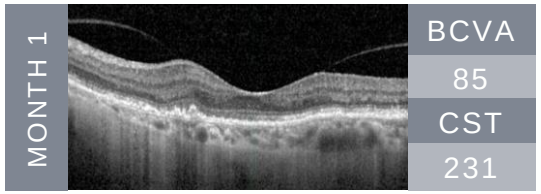
EYP-1901 Phase 1 DAVIO clinical trial case study 2, a high-dose cohort patient remained dry after single EYP-1901 treatment

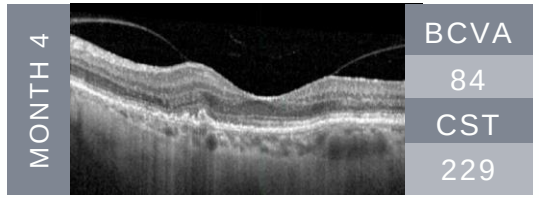


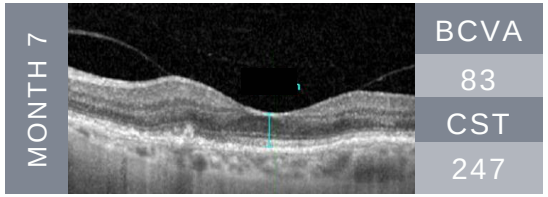


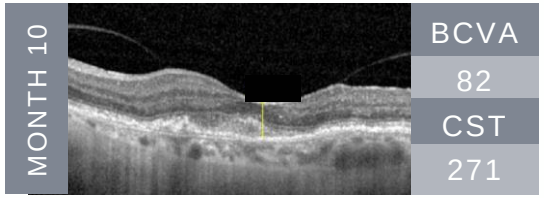
DAY 0

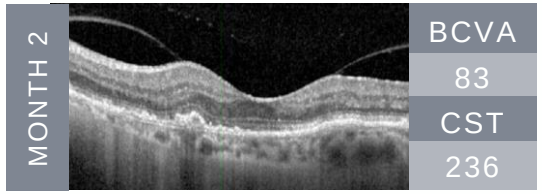
Case 2: SOC Anti-VEGF Injections Before and After Treatment

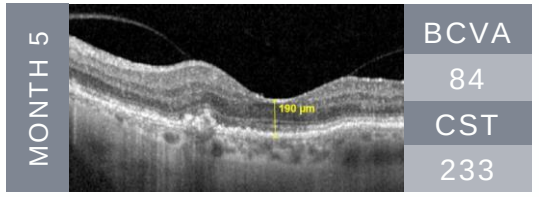


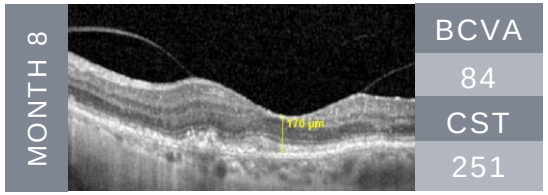


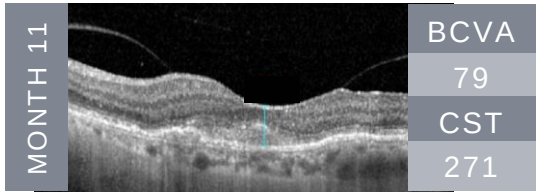


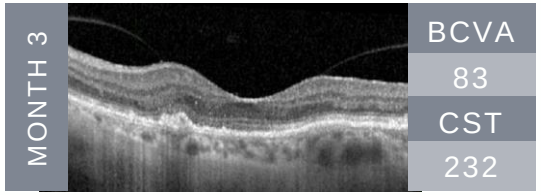


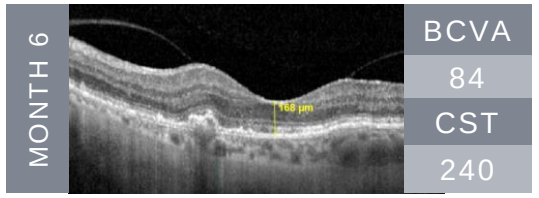


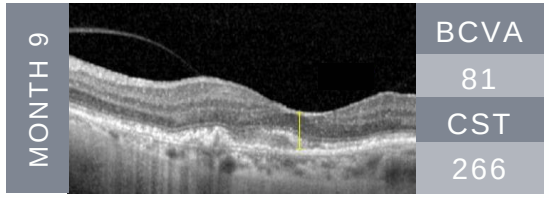


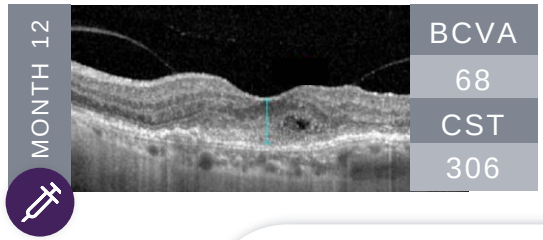












Indicates administration of EYP-1901

Indicates administration of supplemental injection

EyePoint Pharmaceuticals

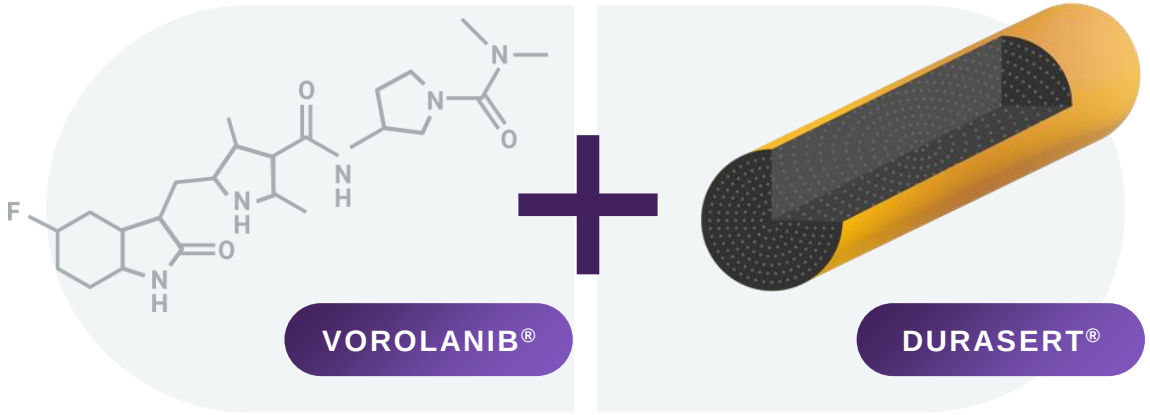
EYP-1901 Phase 1 DAVIO clinical trial met all objectives

FAVORABLE SAFETY PROFILE

- No ocular SAEs reported
- No drug-related systemic SAEs reported
- Ocular AEs – majority are mild and expected

POSITIVE EFFICACY & DURABILITY

- Stabilization of mean BCVA and OCT throughout 6 months was achieved
- 53% supplemental anti-VEGF injection free up to 6-months
- 79% reduction in treatment burden at 6-months



SIX MONTHS MEDIAN TIME
TO SUPPLEMENTAL ANTI-VEGF

EYP-1901

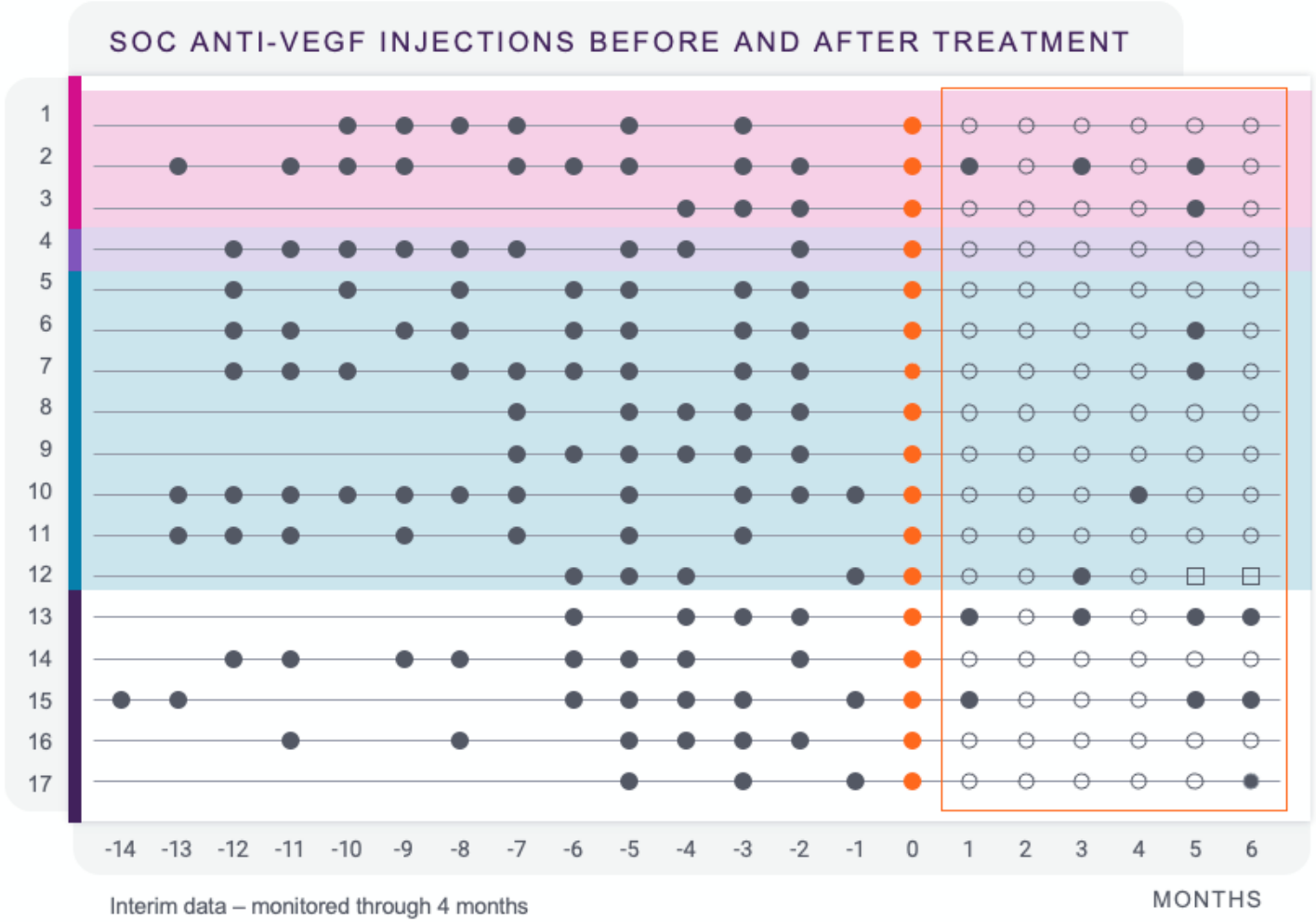
TREAT TO MAINTAIN

Jay Duker, M.D. | Chief Operating Officer

Charlie Wykoff M.D.

EyePoint PHARMACEUTICALS

EYP-1901 demonstrated clinically significant reduction in treatment burden of 79% at 6 months supporting treat to maintain positioning



TREAT TO MAINTAIN WITH EYP-1901

- About half of eyes in DAVIO could go up to 6 months on EYP-1901 alone
- Another ~30% received only a single supplemental anti-VEGF during 6-months
- About 15 % failed both SoC and 1901 and required multiple supplements

● Anti-VEGF ● SoC (Anti-VEGF)+ EYP1901

○ No rescue injection given ☐ Missed visit

EyePoint Pharmaceuticals

EYP-1901 positioned as a potential “Treat-to-Maintain” therapy

- *Treat* initially with current anti-VEGF standard of care until VA is maximally improved and retina is as dry as possible (induction phase)
- *Maintain* with EYP-1901 every six months, supplementing if needed with current anti-VEGF biologic
- Based on DAVIO, we believe over half of all wet AMD eyes may be maintained visually and anatomically with EYP-1901 alone
- Another large segment may require occasional supplemental anti-VEGF but a much-reduced interval

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Discussion on the potential clinical use of 1901 with Charlie Wykoff, M.D.

- If you had EYP-1901 available in your practice, how would you introduce it for your patients with wet AMD?
- What would like to see before you adopt it more broadly?
- Where do you see the value of a “Treat and Maintain” therapy in patients previously treated with an anti-VEGF therapy?
- Where do see the potential for EYP-1901 in the treatment of NPDR where currently approved anti-VEGF therapies are not widely adopted in patients with relatively good vision.
- What do you think about the potential use of EYP-1901 in other indications like DME or other VEGF-dependent conditions?

EYP-1901

PHASE 2 CLINICAL TRIAL PLANS

Wet AMD | NPDR

EyePoint Pharmaceuticals

WET AMD PHASE 2 TRIAL (DAVIO 2)

Dario Paggiarino, M.D. | Chief Medical Officer

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EYP-1901 DAVIO 2 clinical trial is non-pivotal randomized, double-masked, aflibercept controlled

- REQUIRED AFLIBERCEPT INJECTION VISIT
- VISIT SCHEDULED
- EYP-1901 DOSING

EyePoint PHARMACEUTICALS

EYP-1901 DAVIO 2 clinical trial design to evaluate two different doses with BCVA as primary endpoint

Objectives
Evaluate efficacy and safety of a single injection of two different doses of EYP-1901 in wet AMD reported.

01 **Primary Endpoint**
Mean change in BCVA at Week 32 (unmasking 6 months after EYP-1901)

02 **Secondary Endpoints**
CST, time to rescue, rescue-free rates, anti-VEGF injection burden

Duration of Follow-up
12 months following EYP-1901 injection at Week 8 (i.e., Week 56)

Key I/E Criteria

- Diagnosed within past 9 months
- History of response to anti-VEGF
- History of at least 2 injections in last 6 months
- OCT exclusion criteria:
  - Central subfield thickness > 400 µm
  - Intraretinal fluid >25 µm
  - Retinal pigment epithelium detachment thickness > 300 µm

EYP-1901 DAVIO 2 trial to evaluate supplemental anti-VEGF injections under strict criteria

Starting from Week 12

Criteria for supplemental aflibercept injections

- BCVA reduction of > 5 letters from best on study measurement due to wAMD AND Increase in CST of >75 microns on SD-OCT from lowest on study measurement
- BCVA reduction of ≥10 letters from best on study measurement due to wAMD
- Increase in CST of >100 microns on SD-OCT from lowest on study measurement from 2 consecutive visits
- Presence of new or worsening vision-threatening hemorrhage due to wAMD
- Or at the investigator's discretion

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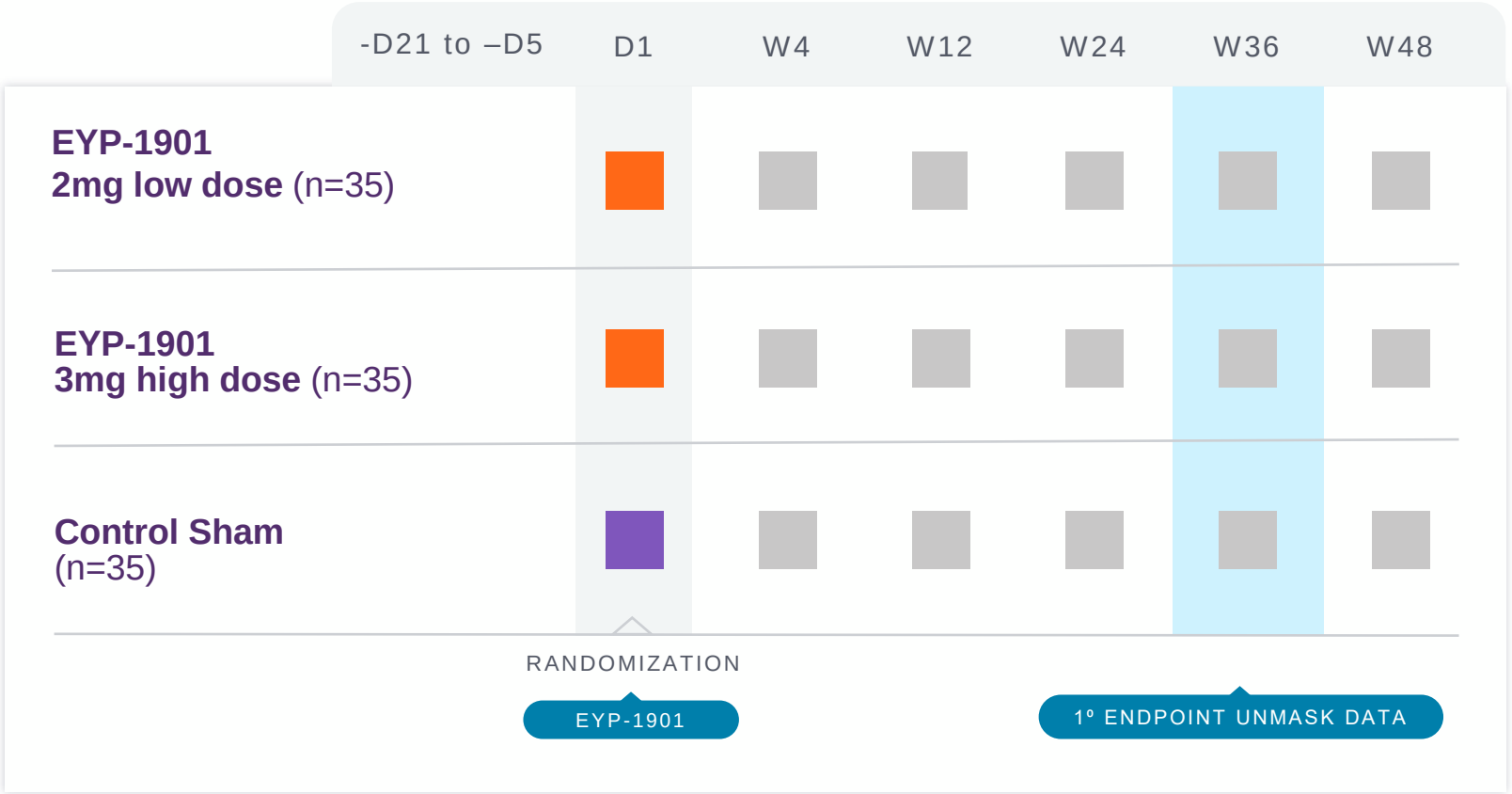
NPDR PHASE 2 CLINICAL TRIAL

Dario Paggiarino, M.D. | Chief Medical Officer

EyePoint PHARMACEUTICALS

EYP-1901 Phase 2 NPDR clinical trial is non-pivotal, randomized double-masked, day-one single injection with sham control



EYP-1901 DOSING

VISIT SCHEDULED

SHAM INJECTION

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EYP-1901 Phase 2 NPDR clinical trial primary endpoint is improvement of at least 2 DRSS* severity levels at week 36

Objectives
Evaluate efficacy and safety of a single injection of two doses of EYP-1901 in NPDR

01 **Primary Endpoint**
Improvement of at least 2 DRSS* severity levels at Week 36

02 **Secondary Endpoints**
Vision-threatening complications, occurrence of DME and/or proliferative disease (PDR), retinal ischemia/nonperfusion

Duration of Follow-up

48 weeks total duration of study

Key I/E Criteria Inclusion:

- Moderately severe to severe NPDR (DRSS 47-53)
- ETDRS letter score in the study eye of ≥69 letters (20/40)
- HbA1c%: ≤12%
- No anti-VEGF injections in the past 12 months

Exclusion:

- Presence of any active CI-DME in the central subfield, with a CST ≥320 microns

*diabetic retinopathy severity scale

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PRODUCTS

YUTIQ CLINICAL UPDATES

Dario Paggiarino, M.D. | Chief Medical Officer

EyePoint PHARMACEUTICALS

YUTIQ commercial franchise supported by ongoing CALM study with real-world data

The CALM study is a retrospective registry study to collect real-world data on patients treated with YUTIQ

Methods

- Data will be collected on up to 500 patients; 150 enrolled to date
- Routine standard of care assessments and adverse events will be recorded from routine visits over 5 years

Status

- Next data presentation updates planned for Retina Society 2022 and AAO 2022

YUTIQ commercial franchise also supported by anticipated Synchronicity phase 4 study

The Synchronicity study is evaluating YUTIQ's ability to attain complete remission of inflammation through control of macular edema

- First patient dosed in Q2 2022
- Initial data anticipated in 2H 2023

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FINANCIAL UPDATE

George O. Elston | Chief Financial Officer

EyePoint PHARMACEUTICALS

FINANCIAL SUMMARY

Solid cash position and growing revenues

Balance Sheet – June 30, 2022*

- $171 million of cash and investments
- $40 million of short and long-term debt

Financial Performance*

- $11.3 million of net product revenues in Q2 2022, a 30% increase over Q2 2021
- Q2 2022 Customer demand
  - ~900 units of YUTIQ a 43% increase over Q1 2022
  - ~14,700 units of DEXYCU consistent with Q1 2022
- Commercial franchise projected to break-even in 2022
- Cash runway into 2H 2024 at current plan

* Q2 2022 financial results were calculated prior to the completion of a review by the Company's independent registered public accounting firm and are therefore subject to adjustment.

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CMS Draft Hospital Outpatient Rule does not extend the pass-through status of expiring drugs impacting DEXYCU

- If draft rule is finalized as is, DEXYCU pass-through status will expire on December 31, 2022
- CMS clarified their intent to offer on-going pass through to non-opioid pain alternatives
- CMS clarified that they will require a pain indication in order for a product to be eligible for ongoing pass through
- Evaluating next steps for a potential DEXYCU pain indication

Q&A

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CLOSING REMARKS

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