Investor Presentation

December 2024

EyePoint®

Legal Disclaimers

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, are forward-looking statements , including but not limited to statements regarding: our expectations regarding the timing and clinical development of DURAVYU™ in Wet AMD and DME, our expectations regarding the enrollment, dosing and data readouts for the LUGANO trial and the LUCIA trial; our optimism that that DURAVYU has the potential to change the current treatment paradigm and revolutionize real-world outcomes for patients suffering from serious retinal diseases; our belief that DURAVYU has the potential to maintain a majority of patients with active disease with no supplemental anti-VEGF therapy for six months or longer; and our expectations regarding the timing and clinical development of our other product candidates, including EYP-2301. Forward-looking statements by their nature address matters that are, to different degrees, uncertain. Uncertainties and risks may cause EyePoint's actual results to be materially different than those expressed in or implied by EyePoint's forward-looking statements. For EyePoint, these risks and uncertainties include the timing, progress and results of the company's clinical development activities; uncertainties and delays relating to the design, enrollment, completion, and results of clinical trials; unanticipated costs and expenses; the company's cash and cash equivalents may not be sufficient to support its operating plan for as long as anticipated; the risk that results of clinical trials may not be predictive of future results, and interim and preliminary data are subject to further analysis and may change as more data becomes available; unexpected safety or efficacy data observed during clinical trials; uncertainties related to the regulatory authorization or approval process, and available development and regulatory pathways for approval of the company's product candidates; changes in the regulatory environment; changes in expected or existing competition; the success of current and future license agreements; our dependence on contract research organizations, and other outside vendors and service providers; product liability; the impact of general business and economic conditions; protection of our intellectual property and avoiding intellectual property infringement; retention of key personnel; delays, interruptions or failures in the manufacture and supply of our product candidates; the availability of and the need for additional financing; our ability to obtain additional funding to support our clinical development programs; uncertainties regarding the timing and results of the August 2022 subpoena from the U.S. Attorney's Office for the District of Massachusetts; uncertainties regarding the FDA warning letter pertaining to our Watertown, MA manufacturing facility; and other factors described in our filings with the Securities and Exchange Commission (SEC). More detailed information on these and additional factors that could affect our actual results are described in our filings with the SEC, including our Annual Report on Form 10-K for the fiscal year ended December 31, 2023, as revised or supplemented by its Quarterly Reports on Form 10-Q and other documents filed with the SEC. 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. EyePoint undertakes no obligation to update or revise any forward-looking statement, whether as a result of new information, future events, or otherwise.

Committed to Developing Innovative Therapeutics to Improve the Lives of Patients with Serious Retinal Diseases

Phase 3 Clinical Stage Biotech Company Well-Positioned as the Leader in Sustained Drug Delivery for Retinal Diseases

Phase 3 Asset

DURAVYU™ (vorolanib intravitreal insert) in two global phase 3 wet AMD clinical trials

Focused Pipeline

Multi-billion-dollar market opportunities in wet AMD and DME

Supported by positive phase 2 clinical trials

Best In-Class

Proprietary Durasert E™ IVT drug delivery technology

Strong Balance Sheet

~$400M[1] of cash and investments on October 31, 2024

Cash runway into 2027

IVT, intravitreal

DURAVYU™ has been conditionally accepted by the FDA as the proprietary name for EYP-1901. DURAVYU is an investigational product; it has not been approved by the FDA. FDA approval and the timeline for potential approval is uncertain.

1. unaudited estimate, inclusive of net proceeds from October 2024 equity financing.

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Pipeline Leveraging Innovative Drug Delivery Technology

Durasert E™ Programs	Indication	Discovery	Pre-Clin	Phase 1	Phase 2	Phase 3	Anticipated Next Milestone
DURAVYU™ – vorolanib (tyrosine kinase inhibitor) (f/k/a EYP-1901)	**Wet AMD**	**PIVOTAL TRIALS UNDERWAY**					Enrollment completion in 2H 2025
	DME	**POSITIVE INTERIM BCVA AND CST DATA**					Full dataset in Q1 2025
EYP-2301 – razuprotafib (TIE-2 agonist)	**serious retinal diseases**						Pre-clin tox and PK data
Complement inhibition	**GA**						Formulation and target ID

non-clinical *trial underway*

wet AMD = wet age-related macular degeneration; DME = diabetic macular edema; PK, pharmacokinetic; GA = geographic atrophy

EYEPOINT

TECHNOLOGY

BIOERODIBLE DURASERT E™

1/5000 of Vitreous Volume

Sustained-Release Drug Delivery with favorable safety profile

- Delivered via a **standard in-office IVT** injection
- **Continuous** dosing from insert with **zero-order kinetics** drug release

Bioerodible Durasert E™:

- Solid insert
- Drug formulated within a **bioerodible** matrix
- Designed to deplete drug load before **matrix fully erodes**
- **Favorable safety profile** across multiple indications

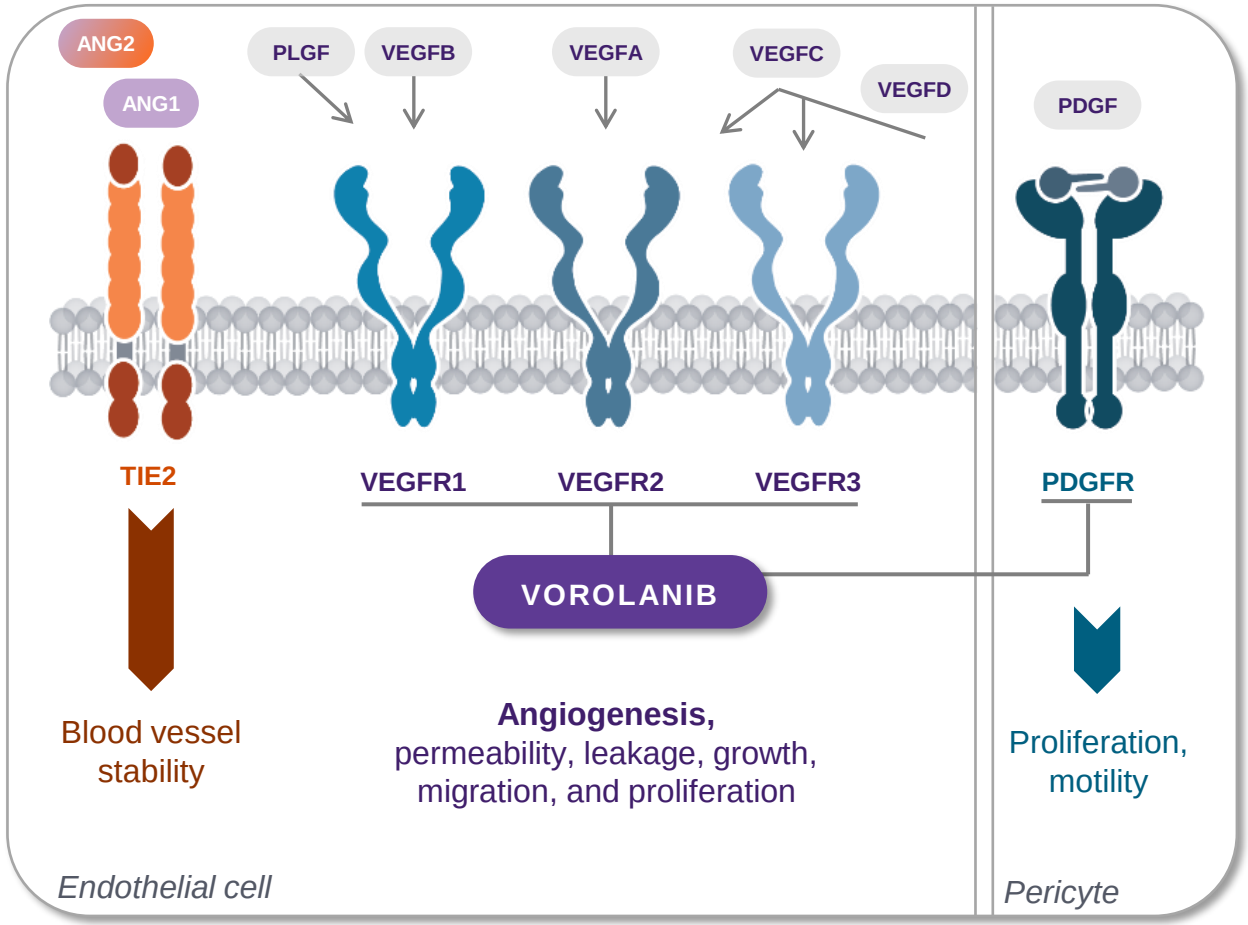
IVT, intravitreal

Vorolanib is a Potent and Highly Selective Pan-VEGF Receptor Inhibitor

Vorolanib is a best-in-class TKI that selectively inhibits all VEGF signaling

- Composition of matter **patent into 2037**
- **Immediately bioavailable**
- Acts intracellularly to prevent pro-angiogenic signaling
- Demonstrated **neuroprotection**
- Potential **antifibrotic**
- Does **not inhibit TIE2**[1]

Pathological angiogenesis and vascular instability underlie wet AMD



1. Bakri SJ, et al. PLoS One. 2024;19(6):e0304782 [CC BY 4.0].

TKI tyrosine kinase inhibitor; AMD, age-related macular degeneration; Ang, angiopoietin; FGF(R), fibroblast growth factor (receptor); PDGF(R), platelet-derived growth factor (receptor); PLGF, placental growth factor; TKI, tyrosine kinase inhibitor; TIE2, tyrosine-protein kinase receptor TIE-2; VEGF(R), vascular endothelial growth factor (receptor); VE-PTP, vascular endothelial cell-specific protein tyrosine phosphatase.

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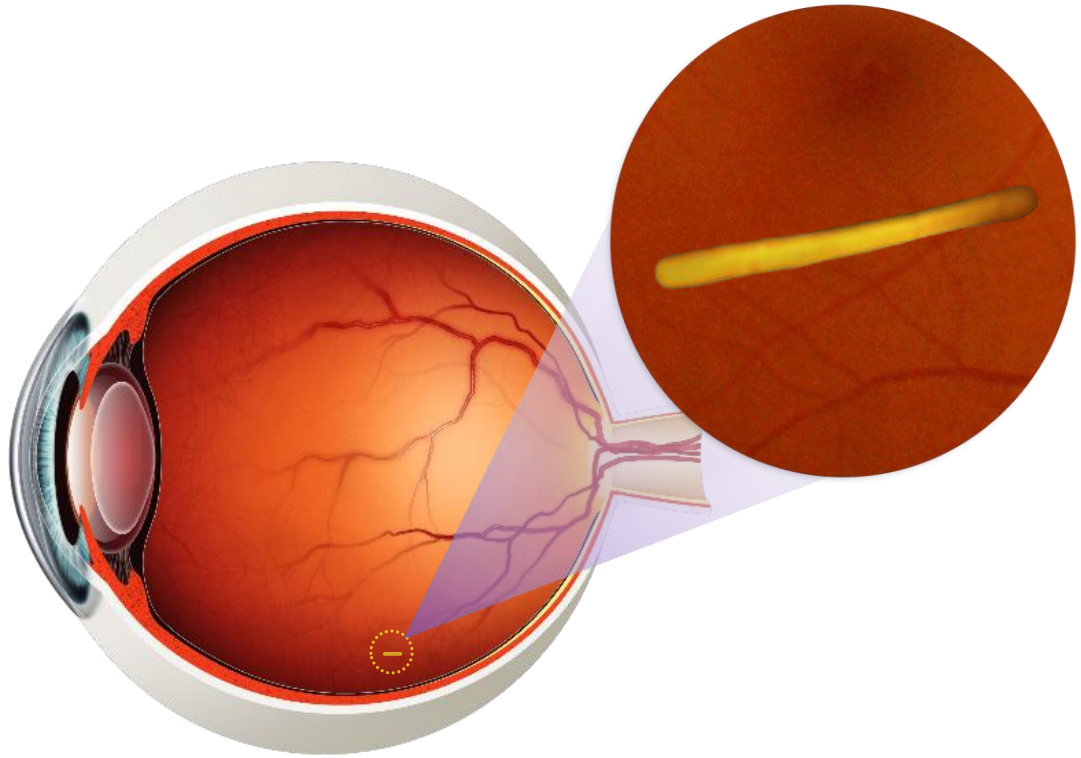
DURAVYU: Vorolanib in Bioerodible Durasert E™



Insert is 94% drug and 1/5000 of vitreous volume

- **Immediately bioavailable** – reaches therapeutic levels within hours
- **Constant dosing** – zero-order kinetics release for at least six months
- **Controlled drug release** – bioerodible matrix controls drug release; **no free-floating drug**
- **Preloaded** sterile syringe injector system
- Shipped and stored at **ambient temperature**

DURAVYU Demonstrated Positive Clinical Activity and Favorable Safety Profile Across Multiple Clinical Trials and Indications

DURAVYU Has Been Evaluated in Over 190 Patients to Date Across Multiple Indications

Clinical Trial	Indication	Safety	Key Efficacy Outcomes
DAVIO	wet AMD	No DURAVYU related ocular or systemic SAEs	• Stable BCVA and CST • 74% reduction in treatment burden
DAVIO 2	wet AMD		• Statistically non-inferior BCVA vs on-label aflibercept • >80% reduction in treatment burden • Stable anatomy (CST)
PAVIA	NPDR		• Stable or prevention of worsening disease severity
VERONA[1]	DME		• Improvement in BCVA and CST vs. aflibercept control at 16 weeks

1. Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received fully evaluated.

Wet AMD, wet age-related macular degeneration; NPDR, non-proliferative diabetic retinopathy; DME, diabetic macular edema; SAEs, serious adverse events; BCVA, best-correct visual acuity; OCT, optical coherence tomography.

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LUGANO/LUCIA Phase 3 Pivotal Trials Design in wet AMD

NON-INFERIORITY VERSUS AN AFLIBERCEPT CONTROL

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DURAVYU Phase 3 Trials in Wet AMD Initiated as Phase 2 DAVIO 2 Clinical Trial Met All Primary and Secondary Endpoints

Endpoint	2mg	3mg
☑ **Primary**: Non-inferior change in BCVA vs. aflibercept	- 0.3 letters	- 0.4 letters
☑ **Secondary:** Favorable safety profile[1]	No DURAVYU-related SAEs	
☑ **Secondary:** Reduction in treatment burden vs. 6 mos. prior	89%	85%
☑ **Secondary:** Reduction in treatment burden vs. aflibercept	82%	76%
☑ **Secondary:** Supplement-free up to 6 months	63% 88% of eyes had 0 or 1 supplemental injections	63% 83% of eyes had 0 or 1 supplemental injections
☑ **Secondary:** Anatomical control vs. aflibercept	+12.4um	+5.2um

Phase 3 Trials are Designed to Enable Global Regulatory Approval of DURAVYU

LUGANO AND LUCIA TRIALS: GLOBAL, RANDOMIZED, DOUBLE-MASKED, AFLIBERCEPT CONTROLLED

OBJECTIVE

Demonstrate DURAVYU, when administered **every six months**, achieves similar visual outcomes to **on-label aflibercept** while **reducing treatment burden**

TRIAL DESIGN

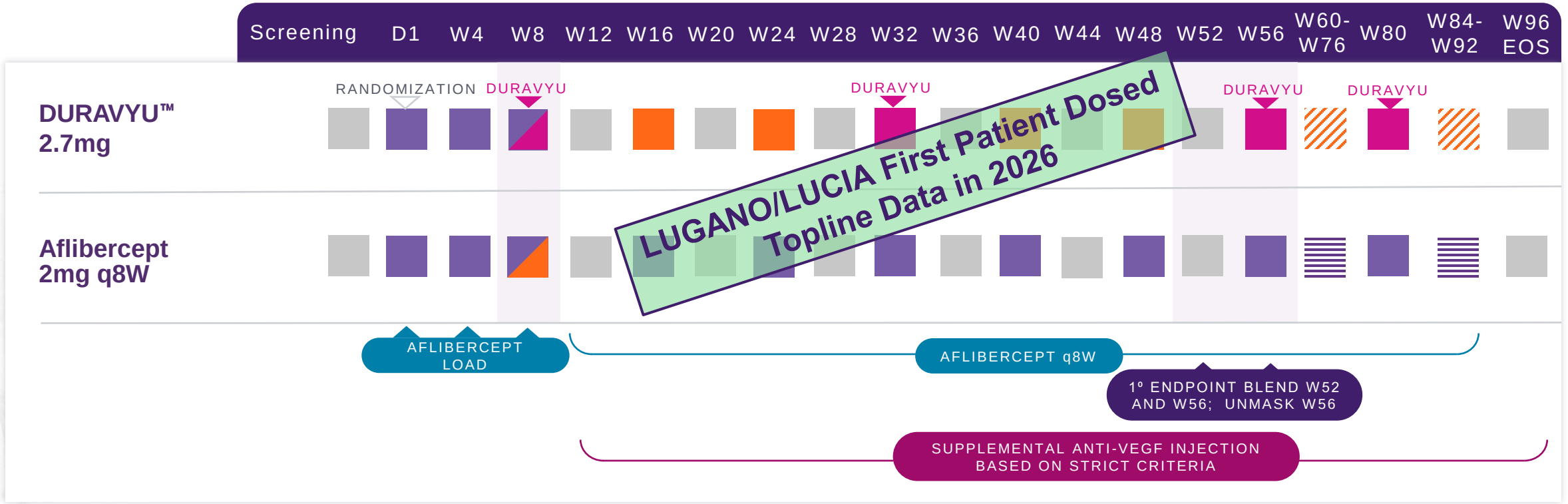
- **~400** patients per trial
- **Two arms**
  - 2.7mg DURAVYU
  - Aflibercept on-label control
- DURAVYU dosing every **6-months**
- One-year efficacy and safety endpoint for NDA submission

ENDPOINTS

Primary Endpoint: difference in mean change in BCVA from Day 1 to Week 52 and 56 (blended) versus aflibercept control

Secondary endpoints: safety, reduction in treatment burden, percent of eyes supplement-free, anatomical stability

DURAVYU™ in Wet AMD Phase 3 Pivotal Trial Design



- REQUIRED AFLIBERCEPT INJECTION VISIT
- VISIT SCHEDULED
- DURAVYU™ DOSE
- SHAM INJECTION FOR MASKING
- AFLIBERCEPT Q8W
- SHAM INJECTION FOR MASKING

Commercial Manufacturing Facility Opened in October 2024

- New manufacturing site for commercial production of DURAVYU
- Located in Northbridge, MA
- Built to EYPT specifications by landlord preserving upfront cash investment
- Built to US FDA and EU EMA standards
- 40,000sf cGMP manufacturing facility

FDA, Federal Drug Administration; EMA, European Medicines Agency; cGMP, current good manufacturing practice

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Phase 2 VERONA Clinical Trial in DME – 16-Week Interim Results

ALL PATIENTS HAVE COMPLETED THE WEEK 16 VISIT

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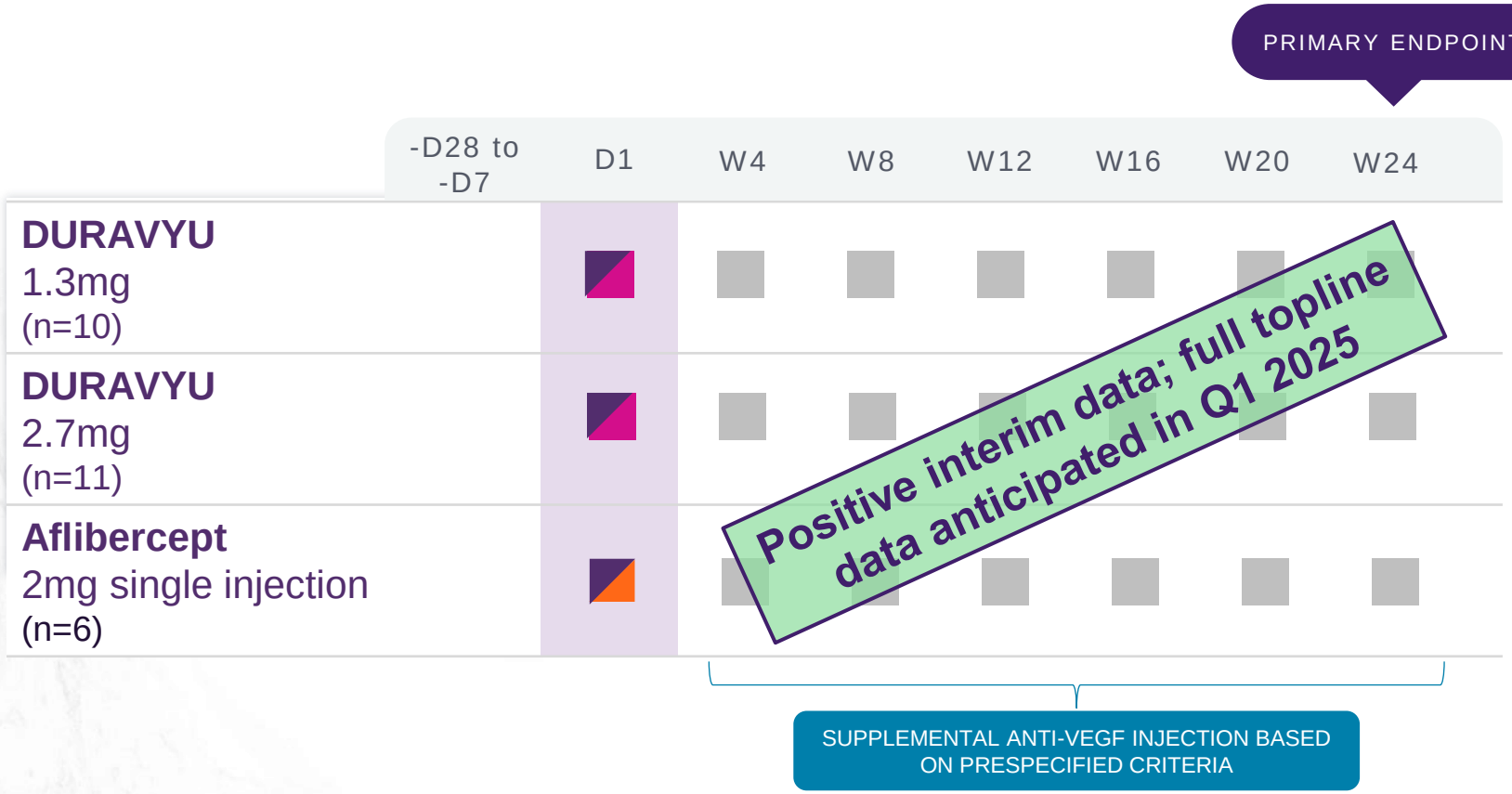
DME, diabetic macular edema
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

Phase 2 VERONA Clinical Trial is a Randomized, Open-Label, Aflibercept Controlled Trial as a Potential Treatment for DME



- Objectives:
  - Evaluate the safety and efficacy of DURAVYU in DME
  - Collect dose-ranging data to inform Phase 3 clinical trials
- Primary endpoint: time to supplemental anti-VEGF injection up to week 24
- Key Secondary endpoints: safety, change in BCVA vs. aflibercept control and anatomical control (CST)

AFLIBERCEPT INJECTION DURAVYU DOSING SHAM INJECTION VISIT SCHEDULED

DME, diabetic macular edema; VEGF, vascular endothelial growth factor; BCVA, best corrected visual acuity; OCT, optical coherence tomography; CST, central subfield thickness

VERONA: Positive Interim Data Supports DURAVYU as a Potential Treatment for DME

Data support potential for vision improvement in DME as well as superior dosing intervals

DURAVYU 2.7MG EFFICACY 16-WEEK RESULTS:

- Early and sustained **BCVA improvement**
- Early and sustained **CST improvement**
- Greater proportion of **supplement-free eyes** vs. aflibercept control[1]
  - Improvements in BCVA and CST appear to be driven by treatment with DURAVYU and not supplemental injections

DURAVYU OVERALL SAFETY RESULTS:

- **No ocular or systemic DURAVYU-related SAEs**
- No cases of:
  - Endophthalmitis
  - Retinal vasculitis (occlusive or non-occlusive)
  - Intraocular inflammation (IOI)
  - Insert migration into the anterior chamber

1. Time to aflibercept supplementation and supplement rates will be analyzed once all patients have completed the trial.

DME, diabetic macular edema; BCVA, best-corrected visual acuity; CST, central subfield thickness; SAEs, serious adverse events.

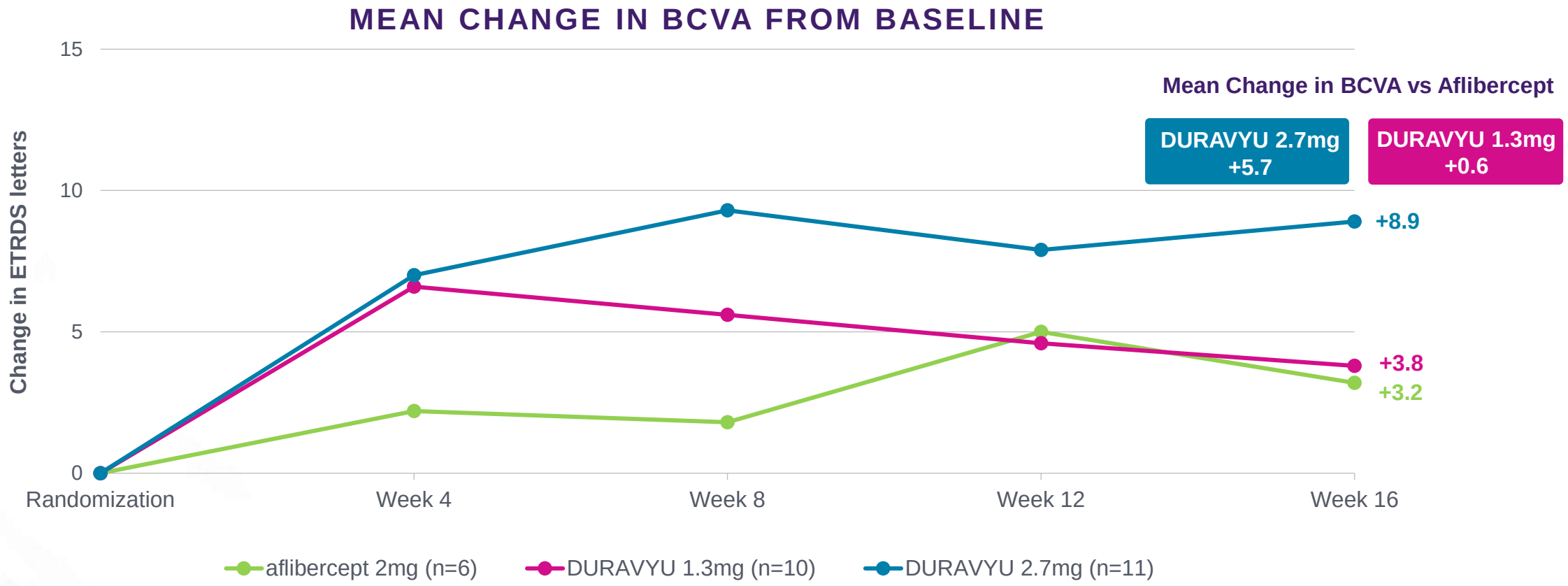
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

VERONA: Baseline BCVA and CST Demonstrate Patients with Active DME (CST >325µm)

	Aflibercept 2mg (n=6)	DURAVYU 1.3mg (n=10)	DURAVYU 2.7mg (n=11)
Mean BCVA, ETDRS letters (range)	67.5 (57-73)	66.9 (53-75)	65.5 (46-75)
Mean CST, µm (range)	400.3 (341-463)	405.2 (342-589)	421.0 (329-557)

BCVA, best-corrected visual acuity; CST, central subfield thickness; DME, diabetic macular edema; ETDRS, Early treatment diabetic retinopathy study
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

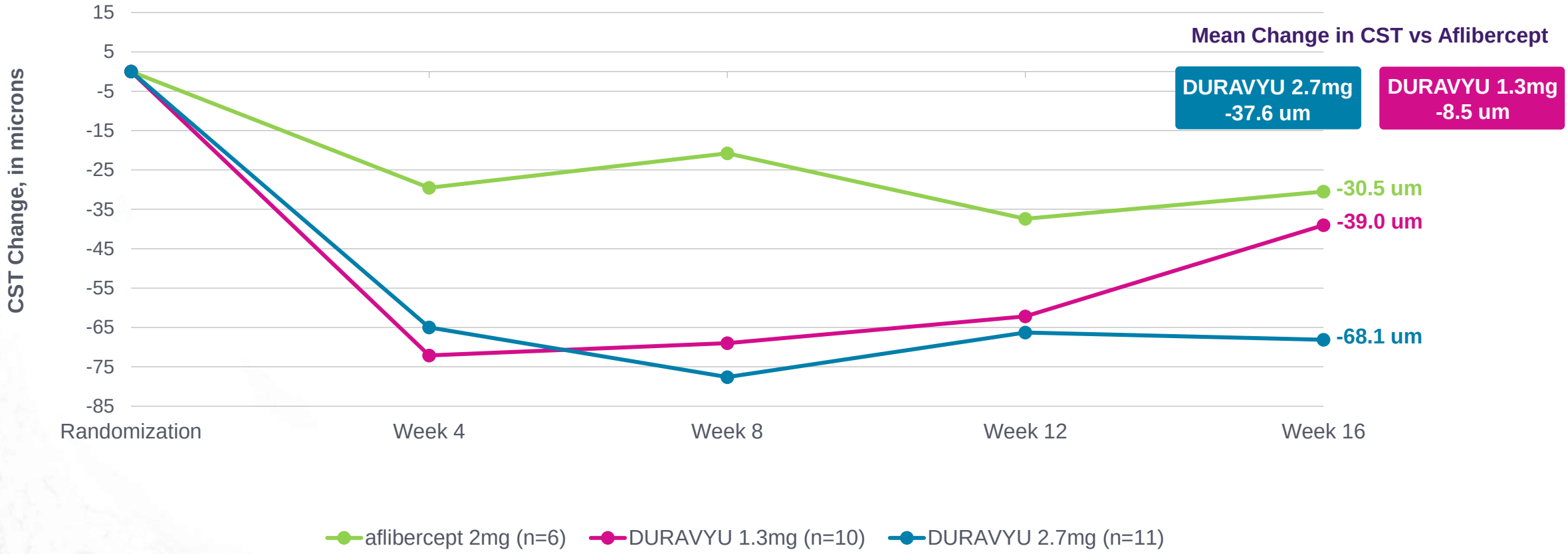
VERONA: DURAVYU 2.7mg Demonstrated Clinically Meaningful Improvement in BCVA at 16 Weeks ~Six Letters Better vs. Aflibercept Control



BCVA, best-corrected visual acuity
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

VERONA: Improved and Controlled Anatomy Demonstrated with DURAVYU 2.7mg and Mirror BCVA Results ~38 Microns Improved vs. Aflibercept Control

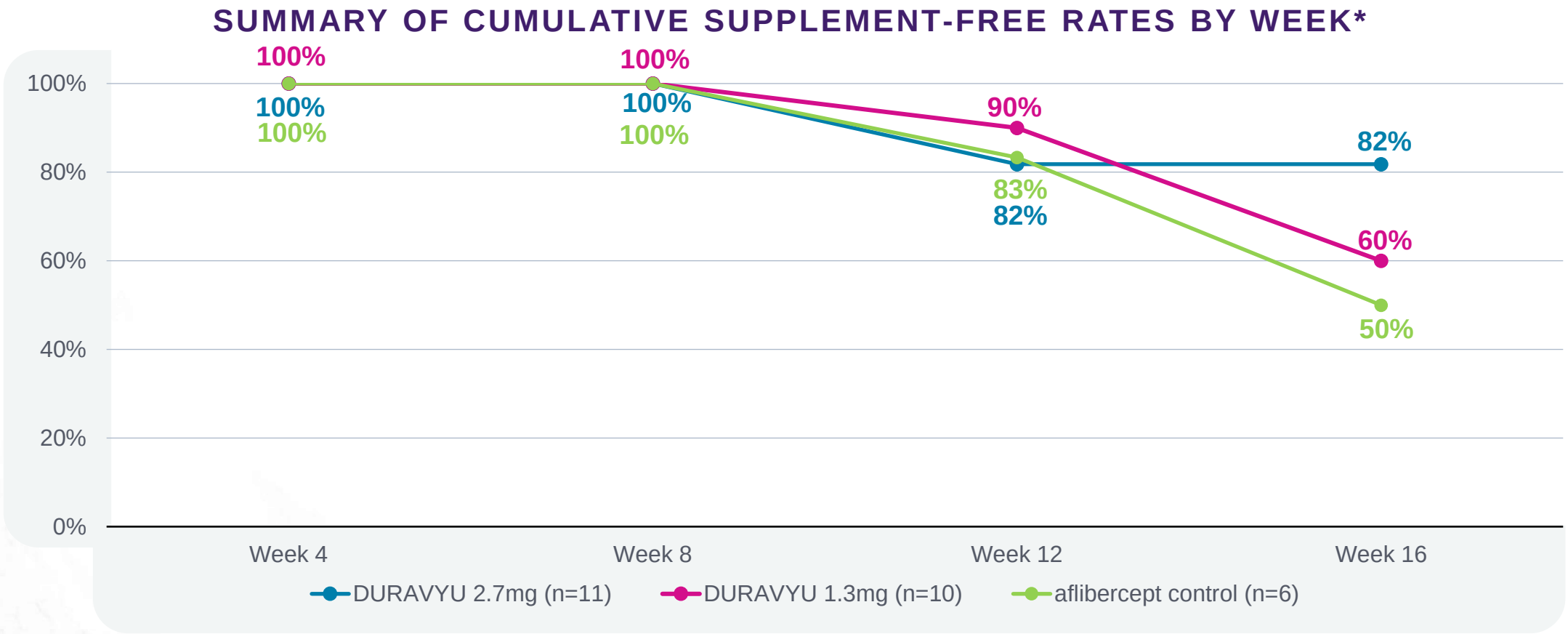
MEAN CHANGE IN CST FROM BASELINE



CST: central subfield thickness
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

EYEPOINT

VERONA: Eyes Treated with DURAVYU had a Greater Proportion of Supplement-Free Eyes vs. Aflibercept Control at 16 Weeks



Majority of the rescue (>80 %) were given due to the lack of 10% reduction in CST from baseline

*Time to aflibercept supplementation and supplement rates will be analyzed once all patients have completed the trial.
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

EyePoint

Positive Interim Data for Ongoing Phase 2 VERONA Clinical Trial –

Data support potential for vision improvement in eyes with active DME as well as superior dosing intervals

DURAVYU 2.7mg demonstrated:

- **Early and sustained improvement** in both BCVA and CST
- **Improvement of nearly six letters more** than aflibercept control
- **Improved anatomy of ~38 microns better** than aflibercept control
- **Immediate bioavailability**
- **A greater proportion of supplement-free eyes** vs. aflibercept control
- Continued **favorable safety profile**

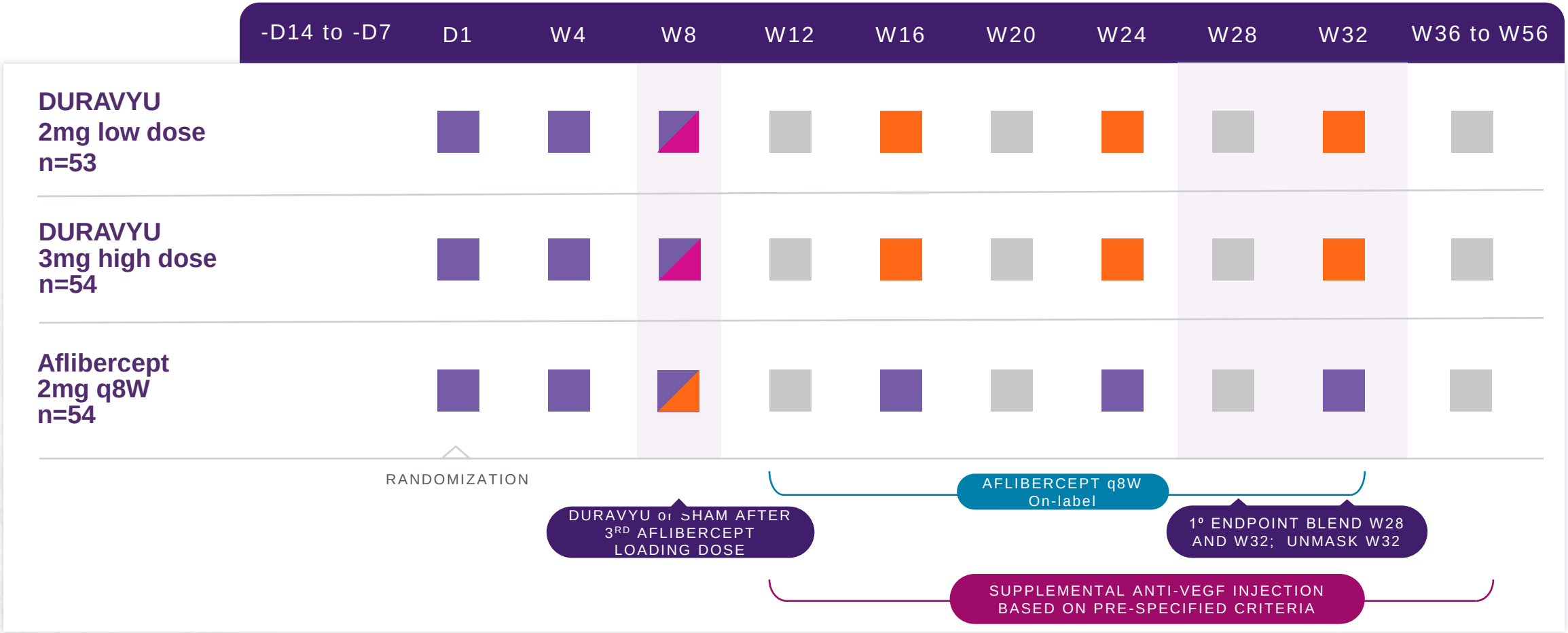
1. Time to aflibercept supplementation and supplement rates will be analyzed once all patients have completed the trial.
DME, diabetic macular edema; BCVA, best-corrected visual acuity; CST, central subfield thickness; SAEs, serious adverse events.
Interim data as of October 1, 2024. Preliminary data which may differ from future results of the same trial, or different conclusions or considerations may qualify such results, once additional data have been received and fully evaluated.

Phase 2 DAVIO 2 Positive Results in wet AMD as a 6-Month Maintenance Therapy

A NON-INFERIORITY TRIAL VERSUS AN AFLIBERCEPT CONTROL

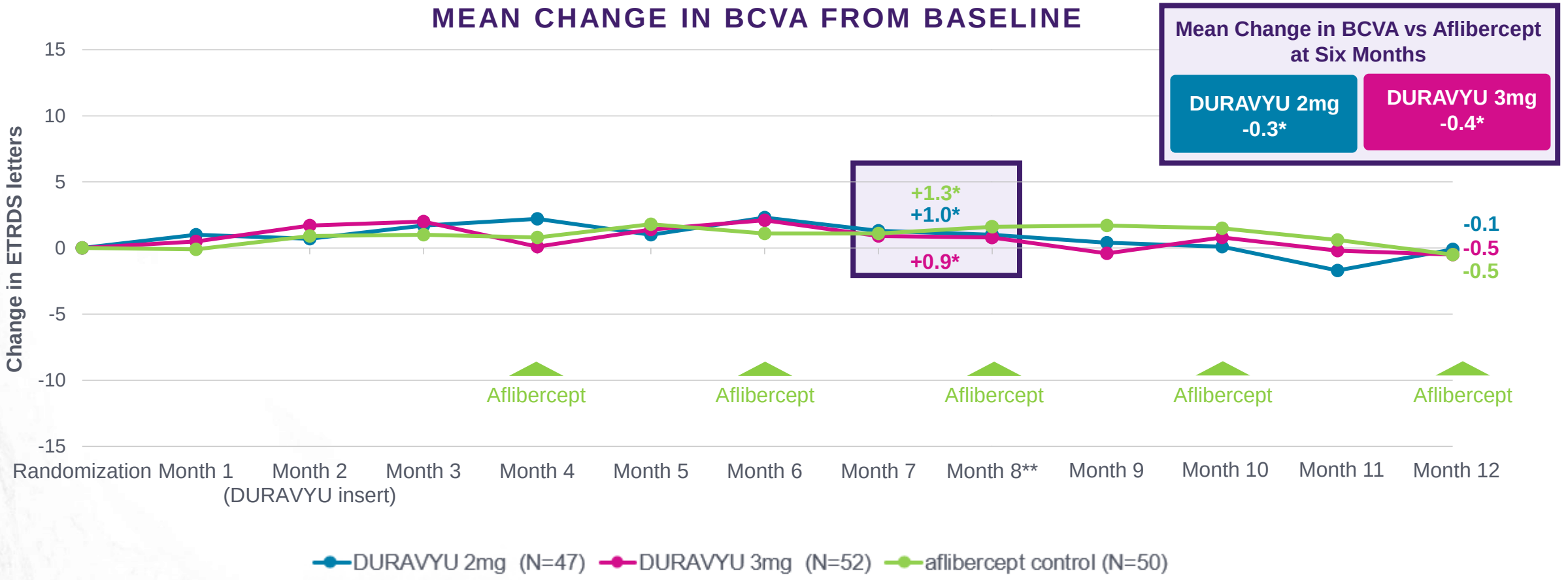
EyePoint

DAVIO 2 is Randomized, Double-Masked, Aflibercept Controlled* Clinical Trial to Assess Efficacy and Safety of DURAVYU at Two Doses



*Aflibercept on-label control required by FDA

DURAVYU was Statistically Non-Inferior in Change in BCVA Compared to the Aflibercept Control



In the Pulsar trial, HD Eylea (16-week 8mg arm) change in BCVA vs. 2mg Eylea was -1.4 letters[1]

1 – AAO 2022 presentation, Paolo Lanzetta, on behalf of the PULSAR study investigators

*Blended week 28 and week 32 change vs. baseline
**Month 8 represents 6 months after DURAVYU injection

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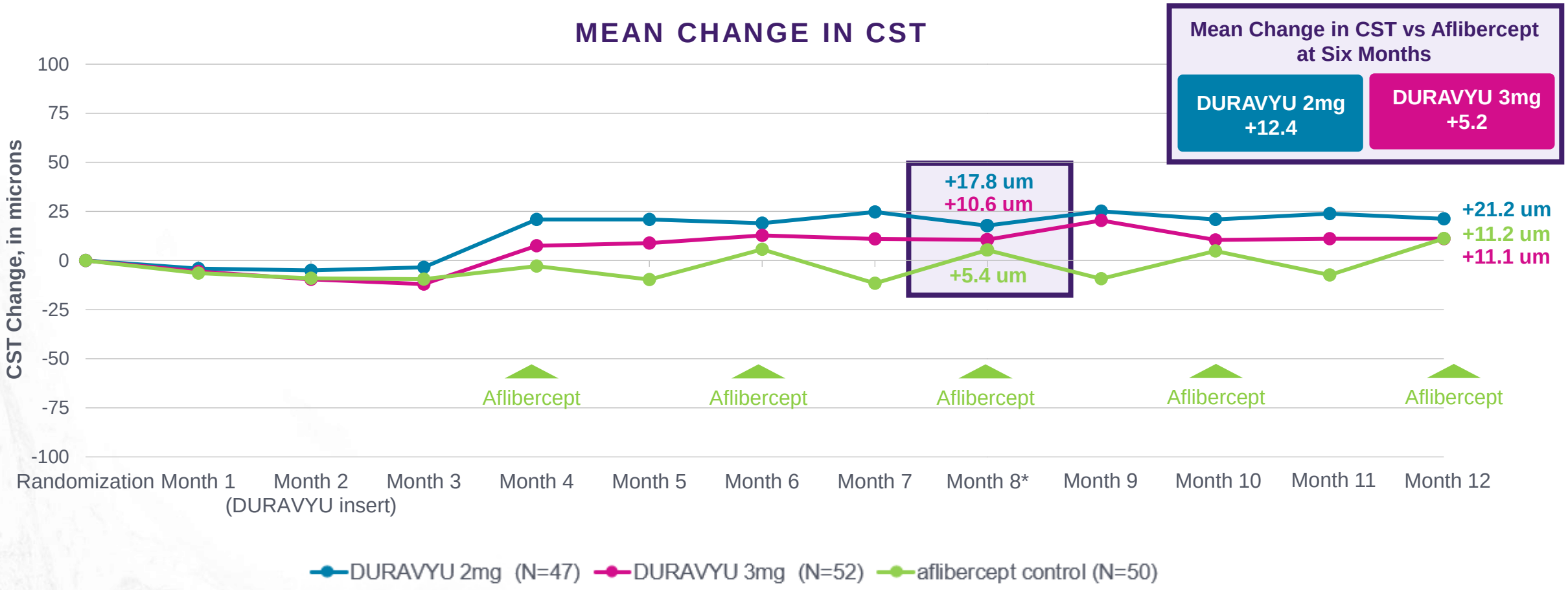
DURAVYU Treated Patients Showed Strong Anatomic Control



*Month 8 represents 6 months after DURAVYU injection

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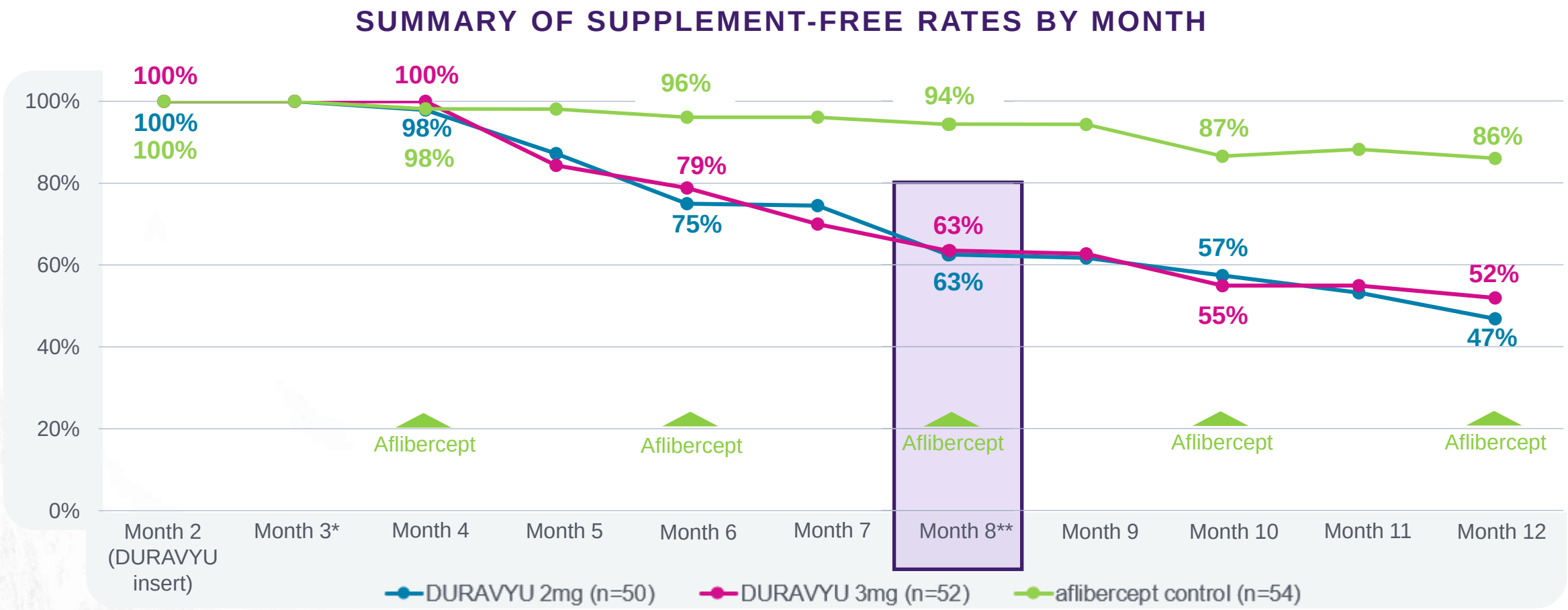
Meaningful Supplement-Free Rates in Eyes Treated with DURAVYU Support DURAVYU as a Potential 6-Month Treatment for Wet AMD



*First visit patients are eligible to be supplemented
**Month 8 represents 6 months post DURAVYU injection

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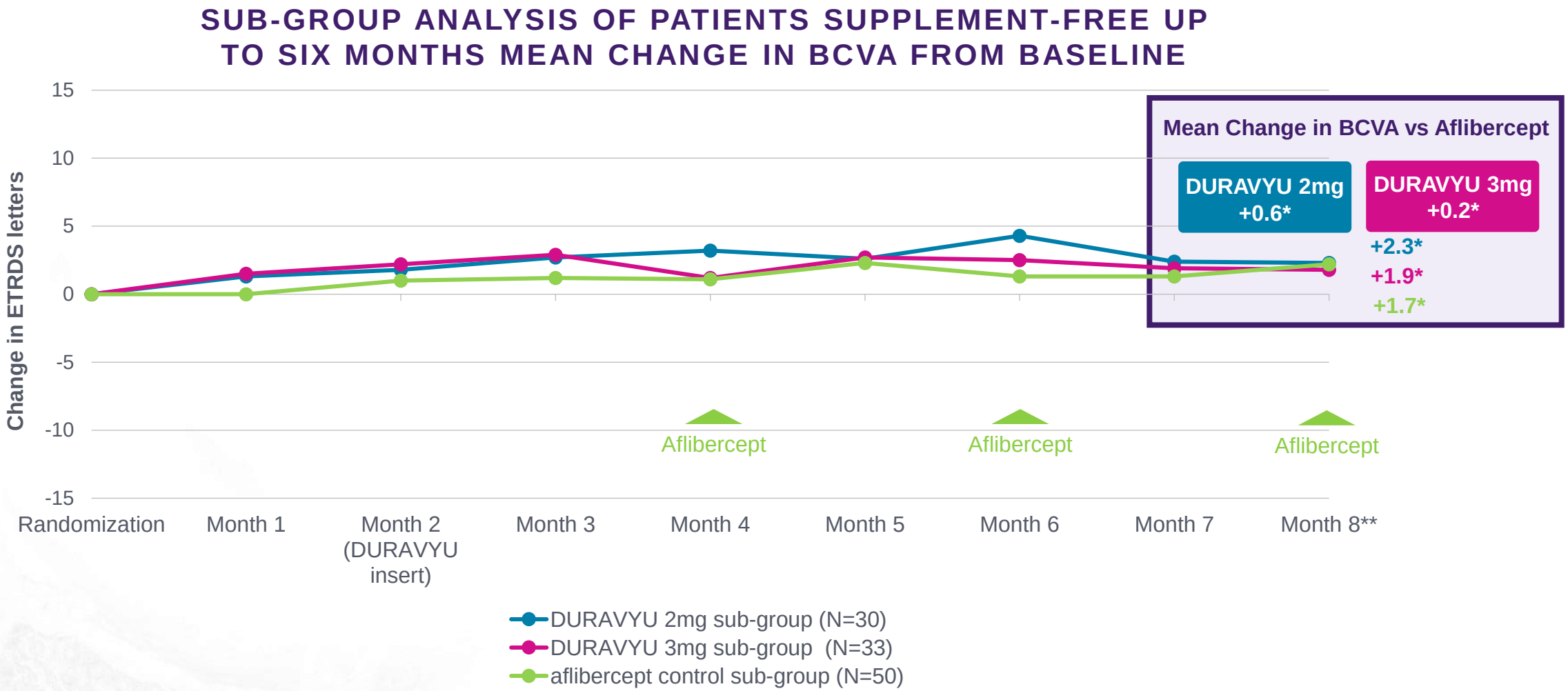
Phase 2 DAVIO 2 Clinical Trial in Wet AMD

SUB-GROUP ANALYSIS OF PATIENTS ANTI-VEGF SUPPLEMENT-FREE UP TO 6 MONTHS

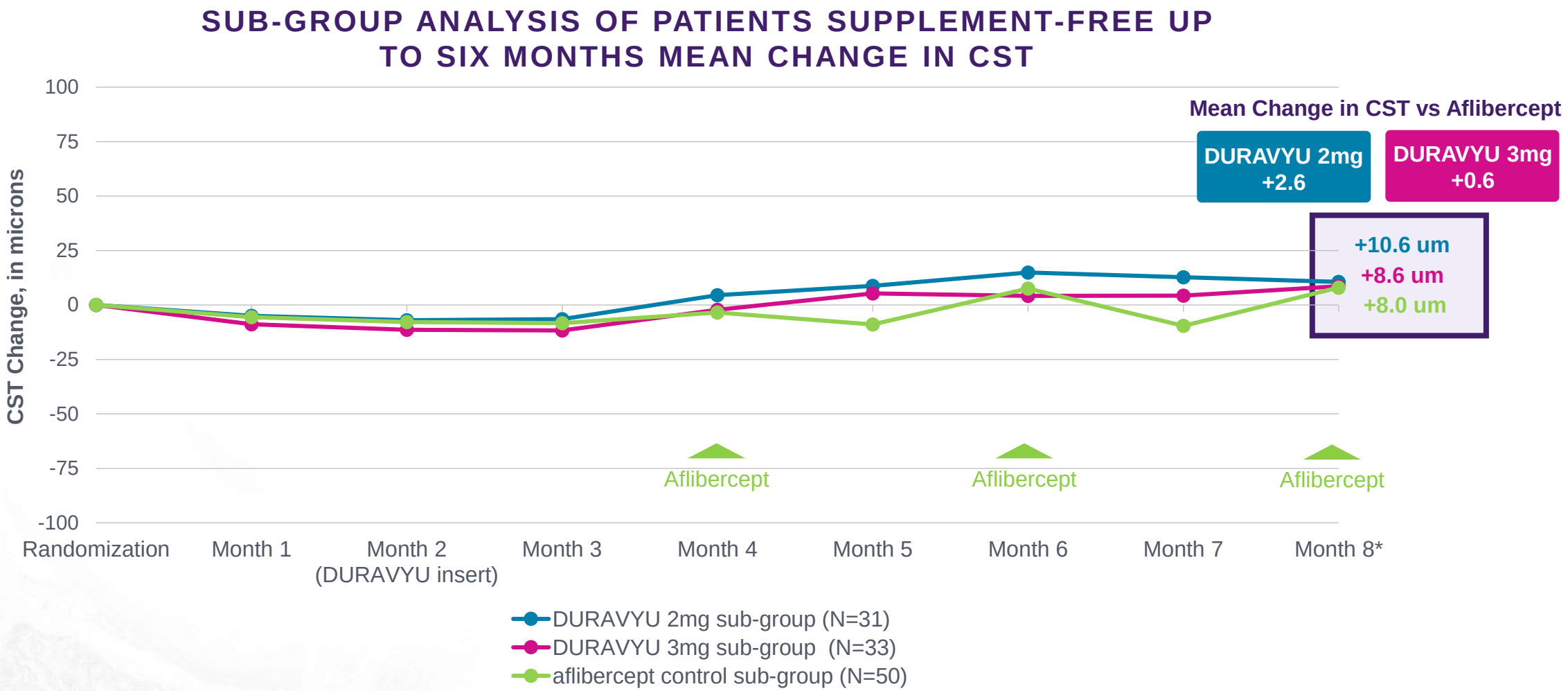
EYEPOINT

DURAVYU Treated Patients had Numerically Better Visual Acuity vs. Aflibercept On-Label Control Patients in Supplement-Free Sub-Group



*Blended week 28 and week 32 change vs. baseline
**Month 8 represents 6 months after DURAVYU injection

DURAVYU Treated Patients had Strong and Sustained Anatomic Control vs. Aflibercept On-Label Control Patients in Supplement-Free Sub-Group



*Month 8 represents 6 months after first DURAVYU injection

EYP-2301: razuprotafib in Durasert E™

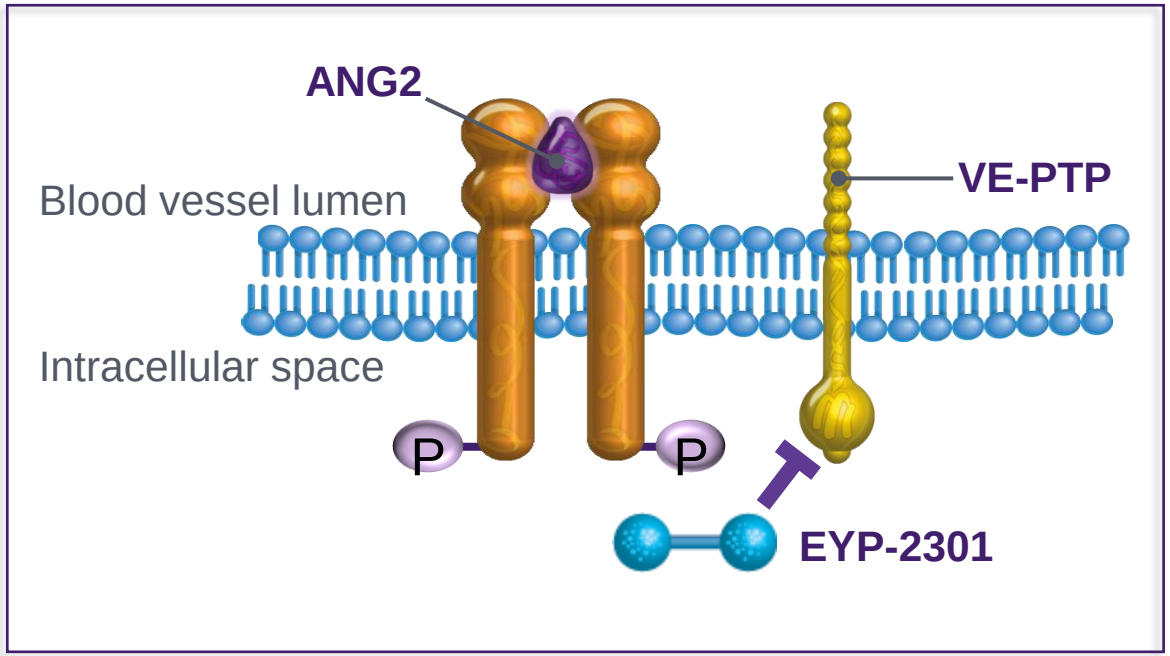
A SUSTAINED DELIVERY TIE-2 AGONIST FOR SEVERE RETINAL DISEASES

EyePoint

EYP-2301: Razuprotafib in Durasert E™ is a Patented TIE-2 Agonist as a Potential New MOA for Treating Serious Retinal Diseases

EYP-2301 targets vascular endothelial protein tyrosine phosphatase (VE-PTP) activating TIE-2 and downregulating ANG2 to maintain vascular stability in the retina

- Tie-2 activation combined with VEGF inhibition has the potential to **enhance efficacy and extend durability**[1] of treatment
- Razuprotafib (f/k/a AKB-9778) delivered subcutaneously demonstrated preclinical and **clinical proof of concept** in posterior segment disease [2,3]
- In a Phase 2 clinical trial, razuprotafib combined with ranibizumab, was **more effective** than ranibizumab alone at **reducing macular edema** with a **favorable safety** and tolerability profile[4,5]



1. Heier et al. Retina, 2021;41:1-19. and Joussen et al. Eye 2021; 35:1305-1316.; 2. Hammes, et. Al – Diabetes.2011 Jan 1; 3. Shen et al. JCI, 2014; 124:4564; 3. Campochiaro et al. Ophthalmology, 2016; 123:1722-1730; 4. Phase 2 TIME 2a clinical trial conducted by Aerpio. 5.Campochiaro et al. PubMed 2016 123(8):1722-1730. DOI: 10.1016/j.ophtha.2016.04.025

On Track for Continued Execution And Well-Funded Through Key Anticipated DURAVYU Milestones

DURAVYU™	
✓ Positive EOP2 meeting with FDA for wet AMD	Q2 2024
✓ PAVIA for NPDR topline data	Q2 2024
✓ DAVIO 2 12-month data	Q2 2024
✓ Positive interim VERONA data	Q4 2024
✓ First patient dosed – LUGANO –Phase 3	Q4 2024
✓ First patient dosed – LUCIA – Phase 3	Q4 2024
☐ **VERONA Phase 2 DME full topline data**	**Q1 2025**

Corporate	
✓ Expanded SAB with world-renowned retina specialists	April 2024
✓ R&D Day - NYC	June 2024
✓ Fred Hassan appointed to Board of Directors	September 2024
✓ Northbridge manufacturing facility grand opening	October 2024
✓ Completed $161M oversubscribed financing; cash runway into 2027	October 2024

DME, diabetic macular edema; EOP2, End of Phase 2; wet AMD, wet age-related macular degeneration; SAB, Scientific Advisory Board

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Investor Presentation

December 2024

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