Oculis

Rethinking Ophthalmology

INVESTOR WEBCAST

April 13, 2023

Safe Harbor Statements

Cautionary Note on Forward-looking Statements

These slides and the accompanying oral presentation contain forward-looking statements and information. The use of words such as "may," "might," "will," "should," "expect," "plan," "anticipate," "believe," "estimate," "project," "intend," "future," "potential," or "continue," and other similar expressions are intended to identify forward-looking statements. For example, all statements we make regarding the initiation, timing, progress and results of our preclinical studies, our clinical studies, our research and development programs, our regulatory strategy, our future development plans, our ability to advance product candidates into, and successfully complete, and the timing or likelihood of regulatory filings and approvals and statements regarding the potential therapeutic benefits of our product candidates are forward looking. All forward-looking statements are based on estimates and assumptions by our management that, although we believe to be reasonable, are inherently uncertain. All forward-looking statements are subject to risks and uncertainties that may cause actual results to differ materially from those that we expected. Factors that may cause actual results to differ materially from current expectations include, but are not limited to: the possibility that Oculis may be adversely affected by economic, business, and/or competitive factors; Oculis' estimates of expenses and profitability; Oculis' ability to develop, manufacture and commercialize the product candidates in its pipeline; actions of regulatory authorities, which may affect the initiation, timing and progress of clinical studies or future regulatory approvals or marketing authorizations; the ability of Oculis or its partners to enroll and retain patients in clinical studies; the ability of Oculis or its partners to gain approval from regulators for planned clinical studies, study plans or sites; Oculis' ability to obtain and maintain regulatory approval or authorizations of its products, including the timing or likelihood of expansion into additional markets or geographies; the success of Oculis' current and future collaborations, joint ventures, partnerships or licensing arrangements; the ongoing and evolving COVID-19 pandemic on Oculis' business, financial position, strategy and anticipated milestones; and other risks and uncertainties set forth in the sections entitled "Risk Factors" and "Cautionary Note Regarding Forward-Looking Statements" in documents that Oculis may from time to time file or furnish with the SEC. Any forward-looking statement speaks only as of the date on which it was made. We undertake no obligation to update or revise any forward-looking statement, whether as a result of new information, future events or otherwise, except as required by law.

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INVESTOR WEBCAST

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Inventor webcast agenda

Opening remarks	Sylvia Cheung, CFO
Company presentation	Dr. Riad Sherif, CEO Sylvia Cheung, CFO
Discussions with KoL's	Dr. Pravin Dugel Dr. Arshad Khanani Dr. Eric Donnenfeld
Q&A	Pall Johannesson, CSO
Closing remarks	Riad Sherif, CEO

Our Purpose

To drive innovation to save sight and improve eye care

Unmet needs and substantial rise in visual impairments

Underpinning demand for ophthalmic innovations

"At least 2.2 billion people have a vision impairment, and of these, at least 1 billion people have a vision impairment that could have been prevented or is yet to be addressed."

Dr Tedros Adhanom Ghebreyesus
Director-General WHO
WHO Vision report, 2019

A growing

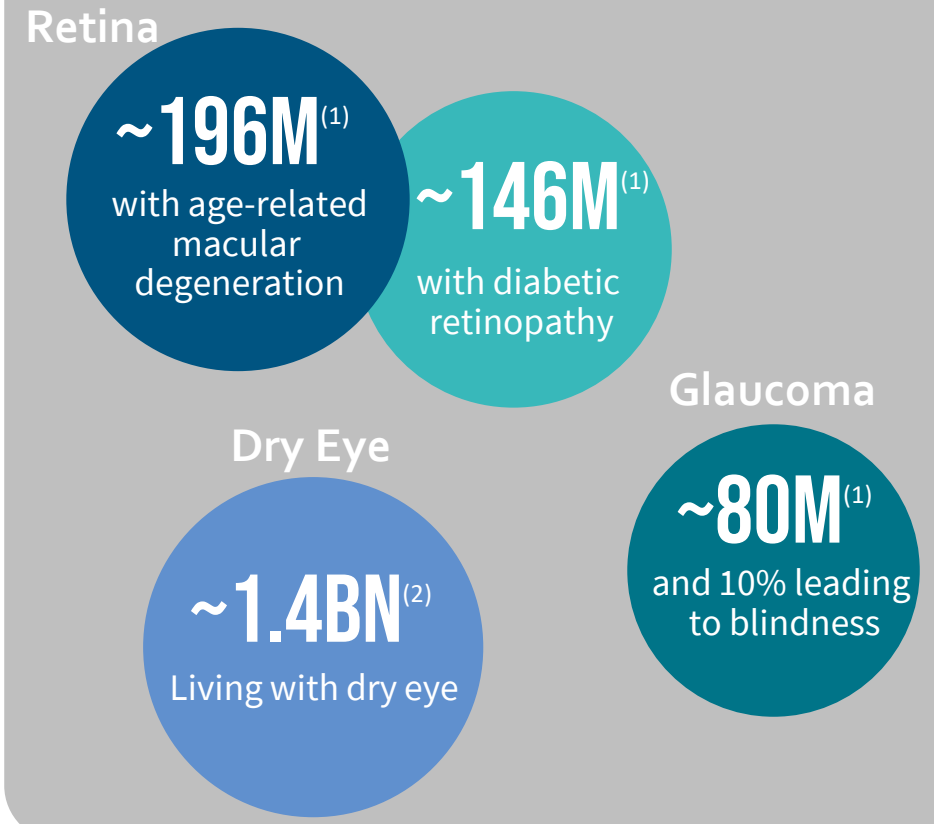
$22+bn

Market

Rising sharply due to changes in:

- Aging Population
- Diabetes Epidemic
- Lifestyle Changes

Driven by three key areas:



(1) WHO: https://apps.who.int/iris/rest/bitstreams/1257940/retrieve.
(2) Source: Market Scope: 2020 Dry Eye Products Market Report.

Building a world leader in ophthalmology

Breakthrough innovations

A leading and differentiated portfolio of **life-changing therapies**

Breakthrough innovations developed specifically to create a step shift in the treatment of ocular disease and vision loss.

Key unmet medical needs

Strategic presence in **key markets** maximizing **success**

Retina

Neuro Ophtha.

DED

Poised to deliver

Ophthalmology experienced and with a **solid track record of success**

Uniquely positioned to build significant value

Oculis

Targeting critical unmet needs in 3 major ophthalmology segments

- OCS-01: 1st Retina eye-drop for Diabetic Macular Edema (DME) in Ph3
- OCS-02: 1st Biologic eye-drop for Dry Eye Disease (DED) in Ph2b

  (upside potential from biomarker-driven precision medicine approach)
- OCS-05: 1st Neuroprotective agent for neuro-retina treatments in PoC

Near-term value inflection points expected

2023

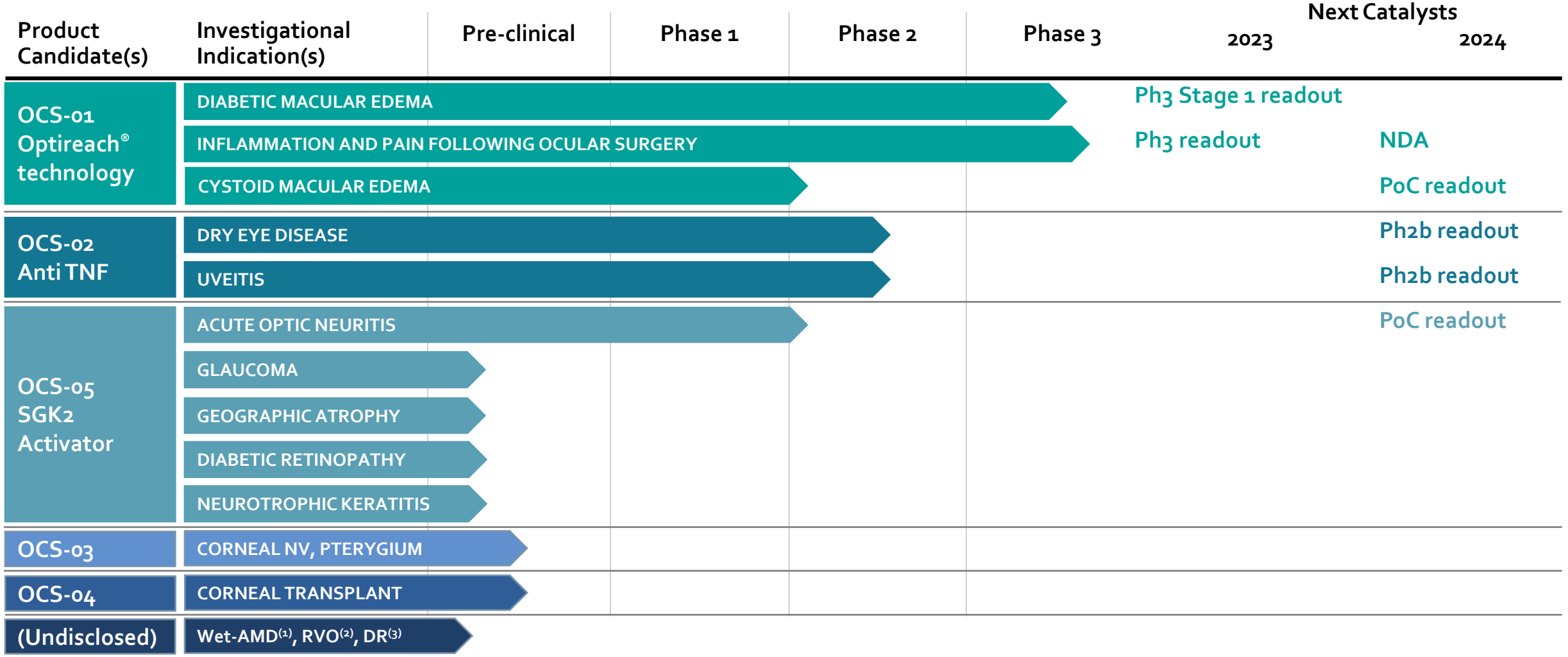
- OCS-01 DME Phase 3 (Stage 1) readout
- OCS-01 Ocular Surgery Phase 3 readout

2024

- OCS-01 Ocular Surgery NDA
- OCS-01 CME(1) PoC readout
- OCS-02 DED Phase 2b readout
- OCS-02 Uveitis Phase 2b readout
- OCS-05 AON(2) PoC readout

(1) Cystoid Macular Edema (CME).
(2) Acute Optic Neuritis (AON).

Innovative, diversified and late-stage pipeline



OCS-01 is based on the OPTIREACH® technology, OCS-02 is a single chain antibody fragment (ScFv) against TNFα and OCS-05 is a SGK-2 activator peptidomimetic small molecule with novel MoA targeting the activation of the trophic factor pathways.
(1) Age-related macular degeneration (AMD).
(2) Retinal Vein Occlusion (RVO).
(3) Diabetic Retinopathy (DR).

Oculis leadership team with successful track record

Committed to build an industry leader in ophthalmic innovation

- ✓ Highly experienced leadership team
- ✓ **Expertise in drug development** leading to approvals and launches with > 40 approved drugs globally
- ✓ **Expertise in public company management** and launching new classes of therapeutics

Riad Sherif M.D.
Chief Executive Officer

Sylvia Cheung
Chief Financial Officer

Pall Johannesson
Chief Strategy Officer

Bastian Dehmel M.D.
Head of Development

Joanne Chang M.D.
Head of medical Affairs

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OCS-01 in Diabetic Macular Edema (DME)

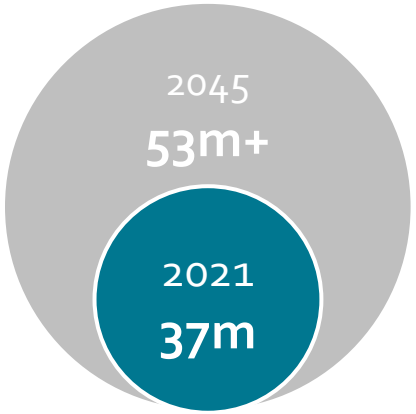
Normal Vision

Effects of DME

DME is a large and growing market with critical unmet needs

Growing DME patient population size[1]

Global DME Patients (7% of diabetics[2])



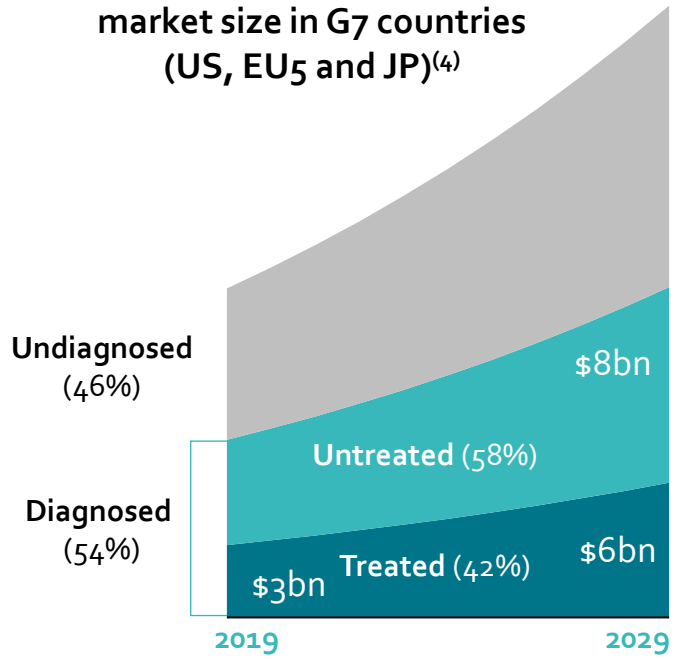
A leading cause of new cases of blindness in US adults[3]

Only invasive treatments approved

1. **High burden of treatment**
2. **Not appropriate for early intervention**

Late start of treatment

DME – Treatment rate and market size in G7 countries (US, EU5 and JP)[4]

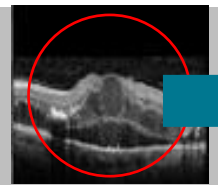


(1) International Diabetes Federation – diabetesatlas.org Estimated diabetes around the world in 2021: 537m, reaching 783m in 2045
(2) Yau et al. Global Prevalence and Major Risk Factors of Diabetic Retinopathy, Diabetes Care 2012 Mar; 35(3): 556-564.
(3) https://preventblindness.org/diabetic-macular-edema-dme/
(4) DRG Diabetic Macular Edema / Diabetic Retinopathy Disease Landscape & Forecast 2020
(5) Gonzalez 2016 Early and Long-term Responses to VEGF Therapy in DME: Analysis of protocol I data

OCS-01 | Current DME treatment paradigm leaves two patient segments undertreated and losing vision

Oculis

Patient presents with DME symptoms
➡ Diagnosed by OCT(1)



24% DME recent onset (2)

43% DME with mild visual impairment (2)

33% DME with moderate to severe visual impairment (2)

DME Disease Progression and Treatment Landscape

Current Treatment

1st line
Observation → Laser

1st line
Anti-VEGF → Laser / Steroid implant

Unmet Needs

1 ✗ **Lack of pre-invasive treatment**

- ~ 19% of patients with good vision experience deterioration by ≥ 5 letters over 2 years(3)

2 ☑ **60% Adequate response**

3 ✗ **40% Inadequate response**

- Low anti-VEGF response rate(5)
- Combination to drive efficacy and or durability

Addressable US patient population: 1.2 million(4)(6)

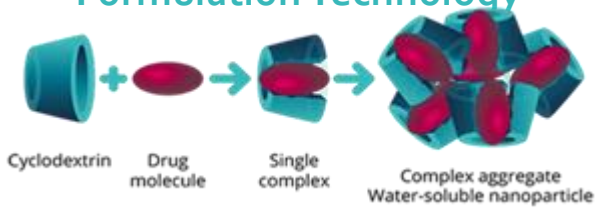
(1) Optical coherence tomography (OCT) imaging.
(2) Baseline Demographics and Clinical Characteristics of Treatment-Naïve Patients with Diabetic Macular Edema Listed in the IRIS Registry (Table S1) www.aao.org
(3) Baker, Carl W., et al. "Effect of initial management with aflibercept vs laser photocoagulation vs observation on vision loss among patients with diabetic macular edema involving the center of the macula and good visual acuity: a randomized clinical trial." Jama 321.19 (2019): 1880-1894.
(4) Gonzalez 2016 Early and Long-term Responses to VEGF Therapy in DME: Analysis of protocol I data
(5) Kiss 2014 ; Berenger and Kiss, Feb. 2016, Real-world Utilization of VEGF agents (DME section), Review of Ophthalmology https://www.reviewofophthalmology.com/article/realworld-utilization-of-antivegf-agents
(6) Decision Resources Group: DME – DR Landscape Forecast – Disease Landscape Forecast 2020

OCS-01 | First eye drop for DME

Unique product candidate

OCS-01 is a unique high-concentration nanoparticle formulation of Dexamethasone (15mg/ml)

OPTIREACH®
Formulation Technology



Positive results in exploratory and Phase 2 studies in DME

DME Exploratory 1
19 pts Tanito Study
successfully completed

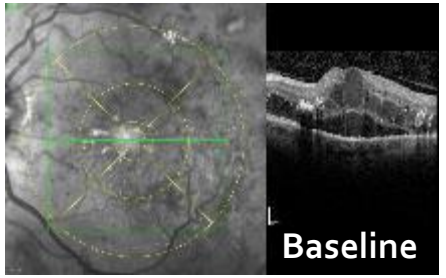
DME Exploratory 2
22 pts Ohira Study
successfully completed

DME Phase 2
144 pts
Randomized & double-masked
successfully completed

Phase 3 program initiated after positive Phase 2 results and EoP2 meeting

Patient Case (Phase 2 DX211)[3]
OCS-01 showed biological effect in CMT[1] reduction and BCVA[2] improvement

Age	55
Treatment Group	OCS-01
DME Dur.	4 m
Prior DME Tx	No
Baseline CMT[1]	765
Week 12 CMT[1]	328
Baseline BCVA[2]	40
W12 BCVA[2]	56

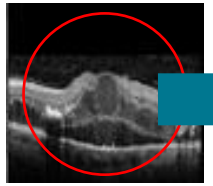


Exploratory 1: Investigator-initiated, open-label, single-center study. Tanito M, et al. Invest Ophthalmol Vis Sci. 2011;52:7944-7948
Exploratory 2: Ohira A, et al. Acta Ophthalmologica. 2015;93:610-615. Ohira A, et al. Acta Ophthalmologica. 2015;93:610-615.
DME Phase 2: Note: Data presented at Angiogenesis, Exudation and Degeneration, 2020 by KOL (Dugel P.)
(1) Central macular thickness (CMT)
(2) Best-corrected visual acuity (BCVA)
(3) Dugel PU. The Oculis OCS-01 phase 1/2 study: an effective topical therapeutic for DME. Presented at: Angiogenesis, Exudation, and Degeneration 2020; Feb. 8, 2020; Miami.

OCS-01 | Data support OCS-01 to address large DME patient pool

A potential effective and versatile option to treat all DME patients

Patient presents with DME symptoms
➡ Diagnosed by OCT



- 24% DME recent onset (1)
- 43% DME with mild visual impairment (1)
- 33% DME with moderate to severe visual impairment (1)

OCS-01 Topical Treatment Covers Entire Continuum of DME Care

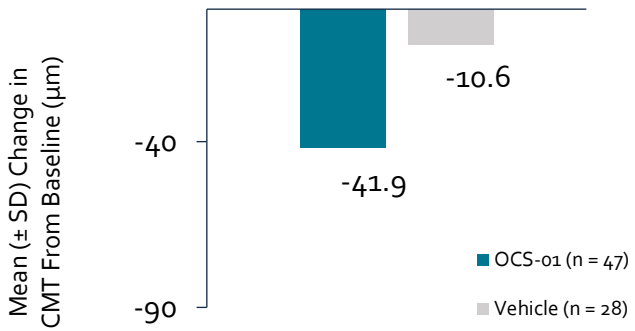
Expands patient and prescriber base

Physicians

General Ophthalmologist & *Retina Specialists*

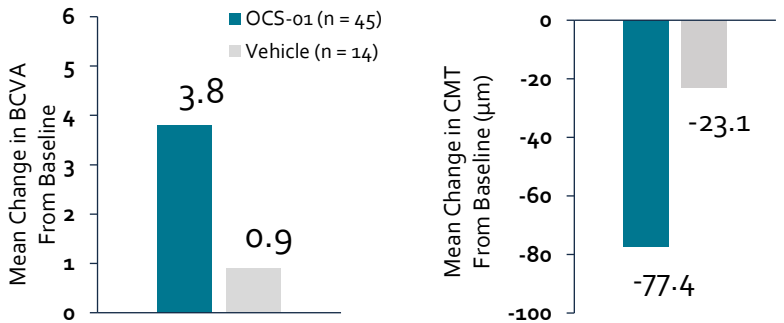
☑ Early intervention

Change in OCT among patients with baseline BCVA > 65(2)



☑ Standalone/Combination treatment

Change in OCT & BCVA among patients with baseline BCVA ≤ 65



(1) Baseline Demographics and Clinical Characteristics of Treatment-Naïve Patients with Diabetic Macular Edema Listed in the IRIS Registry (Table S1) www.aao.org
(2) Dugel PU. The Oculis OCS-01 phase 1/2 study: an effective topical therapeutic for DME. Presented at: Angiogenesis, Exudation, and Degeneration 2020; Feb. 8, 2020; Miami.

OCS-01 | Phase 3 DME study post positive EoP2 FDA meeting

Protocol with loading dose & enriched population to drive probability of success

Successful EoP2 meeting with FDA supporting Phase 3 program

Phase 3 study design:

- Multicenter, randomized, double-masked, vehicle-controlled
- Stage 1: selection of dose regimen with better efficacy, 130 patients
- Stage 2: two global Phase 3 with ~350-450 pts each

Primary Endpoints (EoP2 meeting w/FDA):

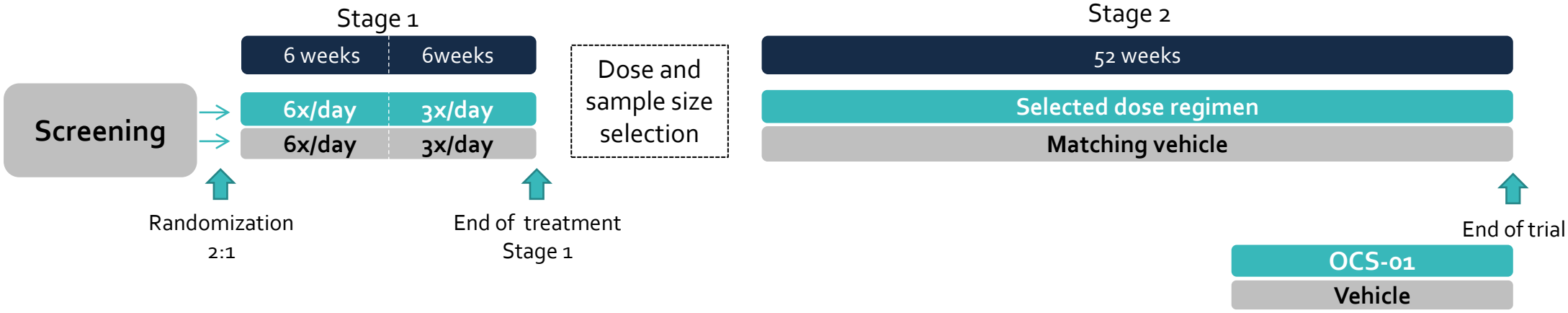
- Mean change in BCVA vs baseline at 52 weeks

Key Secondary Endpoints:

- Mean change in central retinal thickness assessed by SD-OCT
- % of patients with +15 ETDRS letters vs baseline

Key Enrollment Criteria:

- Diabetes mellitus 1 and 2
- ETDRS BCVA letter score between 65 and 24
- Macular thickness (CST) of ≥ 310 µm



OCS-01 | Recap - first retina eye-drop for DME

TRANSFORMATIVE THERAPY

- First Eye drop in DME expected to address broad DME population
- Total addressable US patient population for DME ~1.2M[(1)(2)]

IN PHASE 3

- Phase 2 in **DME**: CMT & BCVA endpoints reached with statistical significance, 144 pts
- Phase 2 in **Ocular Surgery**: Pain and inflammation endpoints reached, 150 patients
- **On-going Phase 3 programs** in both indications

UPCOMING DME READOUT

- Milestone: Phase 3 Stage 1 readout expected in Q2 2023
- Regulatory success case: statistical significance in mean BCVA change
- Next steps: commencement of Phase 3 Stage 2 studies in 2H 2023

FURTHER OCS-01 MILESTONES

- Phase 3 in Ocular **Surgery**: Readout expected in Q3 2023
- PoC in **CME**: Readout expected in 2H 2024
- Ocular Surgery **NDA** application: Application in late 2024

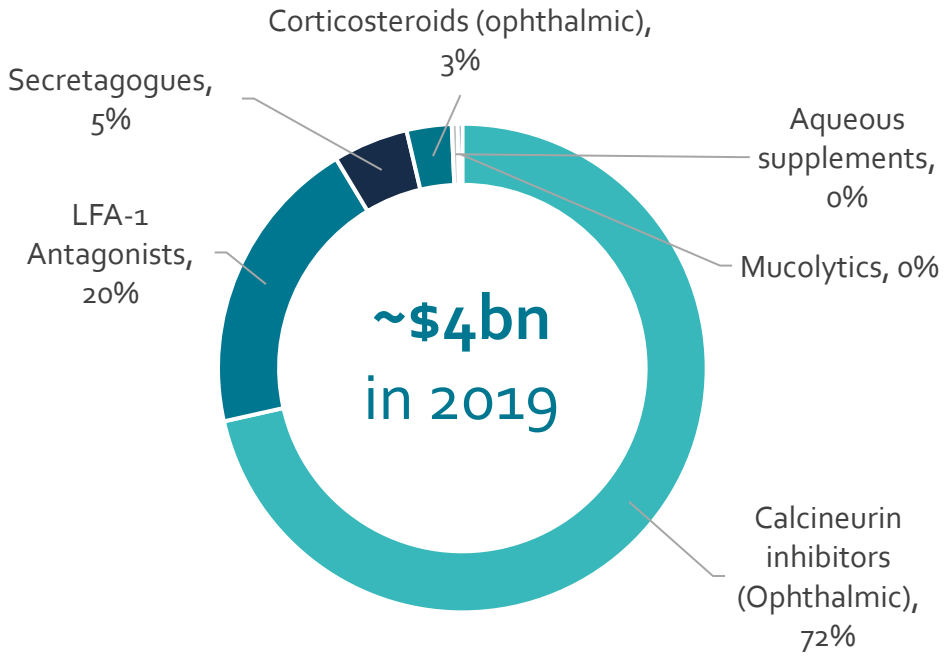
(1) ARVO Annual Meeting Abstract, June 2021, Hennings et al. Prognostic determinants of postoperative pseudophakic macular oedema in a tertiary hospital setting.
(2) Data on file, Skyggn phase 2 study.

OCS-02 in Dry Eye Disease

OCS-02 | DED a large, underpenetrated and growing market

USD 4bn Market – 13% of patients experience lasting relief after 12 months of treatment

Dry Eye Rx drug market G7 countries, 2019 (1)



Significant market opportunity

- Large and growing market forecasted to **reach $7.3bn** in 2029(1)
- Underpenetrated - **only 9%** of diagnosed patients in the US **receiving treatment** (1)
- **Despite current options an under-addressed patient population** with only 13% of patients achieving lasting relief(2)
- Vast majority of treated patients are receiving **anti-inflammatory drugs**(1)
- Next generation anti-inflammatory drug with **novel MoA**(1) remains key unmet medical need

(1) DRG Dry Eye Disease Landscape and Forecast 2020
(2) Mukamal, R. Why is Dry Eye So Difficult to Treat? 2021 https://www.aao.org/eye-health/tips-prevention/fix-dry-eye-treatment-eyedrops

OCS-02 | First topical treatment candidate for DED

Clinically proven MoA with potential transformative impact in Ocular Inflammatory Diseases

Topical Biologic Candidate

OCS-02 is an **anti-TNFα antibody fragment** formulation with potential to become the first approved topical biologic for DED

✓ **Clinically proven MoA**

Anti-inflammation and anti-necrosis MoA approved as systemic treatment for ocular disease and with **transformative impact** in other areas

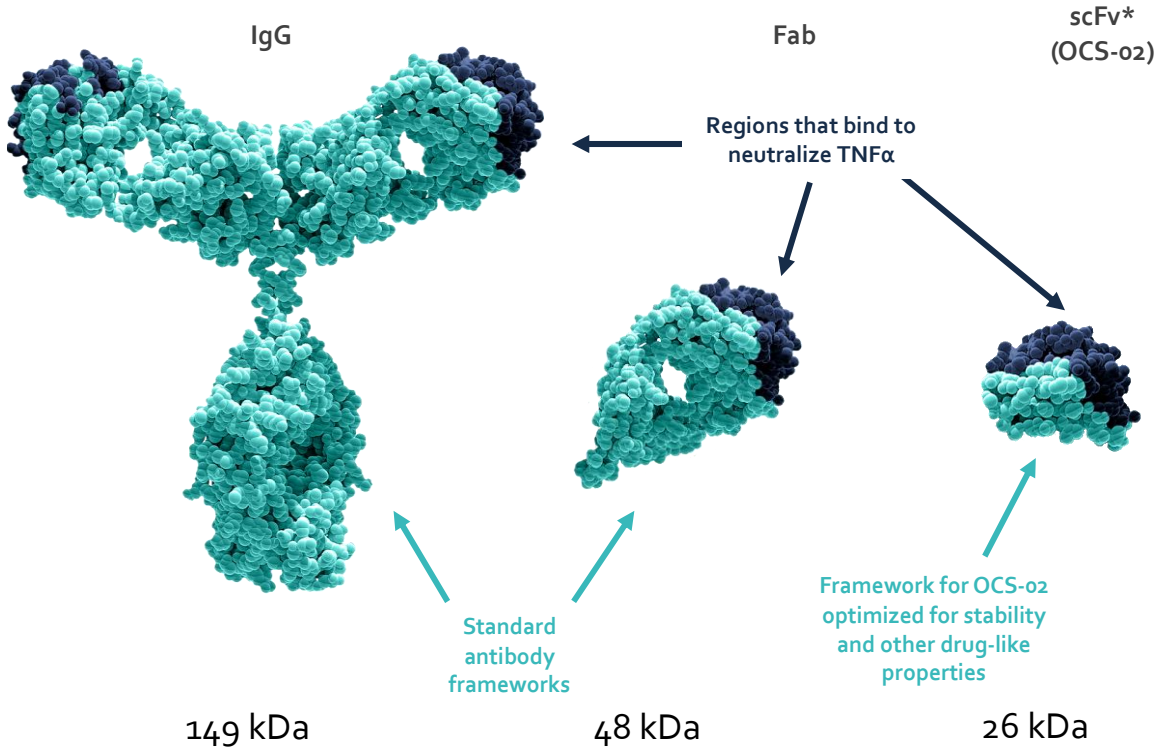
✓ **Enhanced ocular penetration**

Lower molecular weight, **enhanced ocular penetration and higher concentration**

✓ **Proprietary genetic biomarker**

Associated with OCS-02 response highlighting opportunity for a **precision treatment** in DED

Innovative Antibody Fragment Technology



OCS-02 | Anti-TNFα biologic Eye Drop

Advancing into Phase 2b for DED & Uveitis

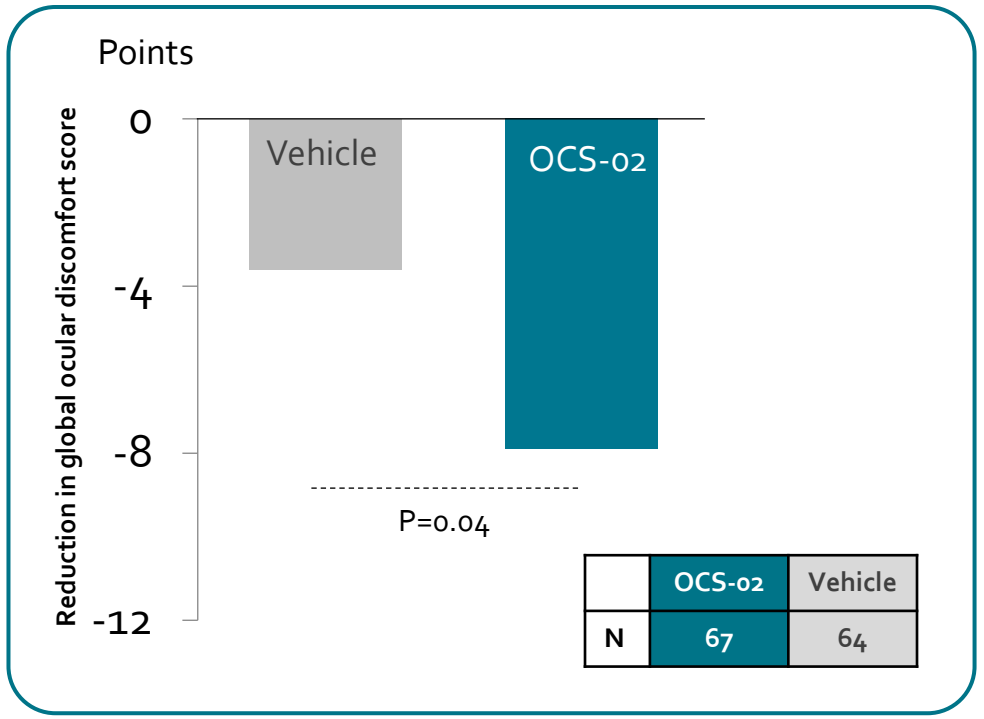
Positive Phase 2 / PoC in DED and Uveitis	Advancing into Phase 2b for both indications	Significant market opportunity
DED#1 85 pts Phase 2 POC successfully completed	OCS-02 in Phase 2b to evaluate signs in DED (with **secondary endpoint in symptoms**)	Potential to become the **FIRST precision medicine** in Dry Eye Disease – de-risks clinical trial and creates potential market pricing upside
DED#2 131 pts Phase 2 POC successfully completed	Stratification to **validate genetic biomarker in severe** DED population	A unique benefit in DED given **its multifactorial nature** and **heterogenous** patient population **~10m patients**(1) Addressable US patient segment **for DED**
Uveitis 32 pts Phase 2 POC successfully completed	Advance OCS-02 in Phase 2b as **steroid-sparing alternative** for chronic and recurring Non-Infectious Anterior Uveitis	

(1) DED Disease and Landscape – DRG Report, Dec. 2020

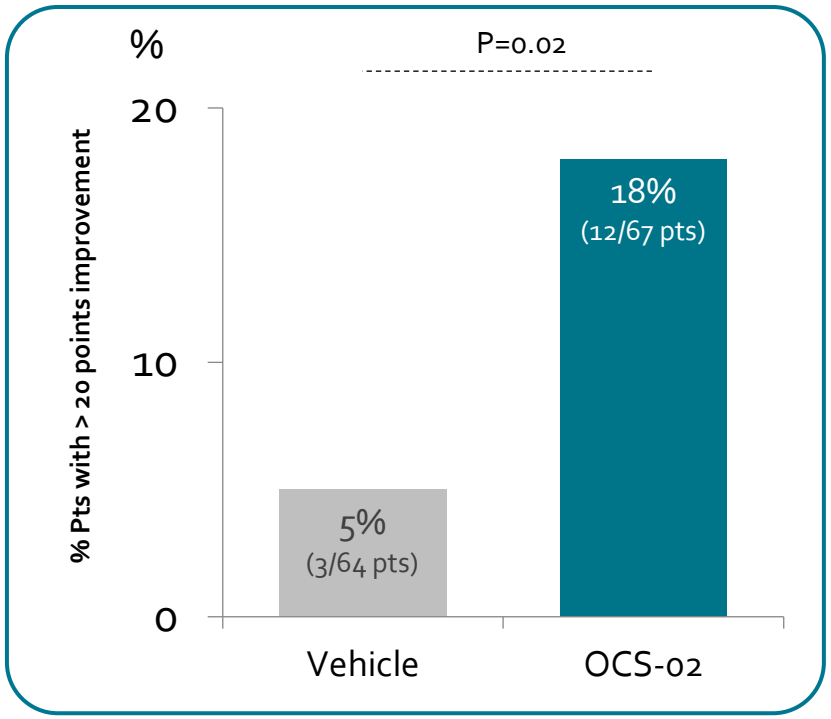
OCS-02 | Phase 2a positive results in DED

Proof-of-Concept Phase 2 trial evaluating symptoms demonstrated statistically significant reduction in symptoms and well-tolerated profile[1]

Full study population



High responders



Safety:

- No meaningful safety findings
- Well tolerated

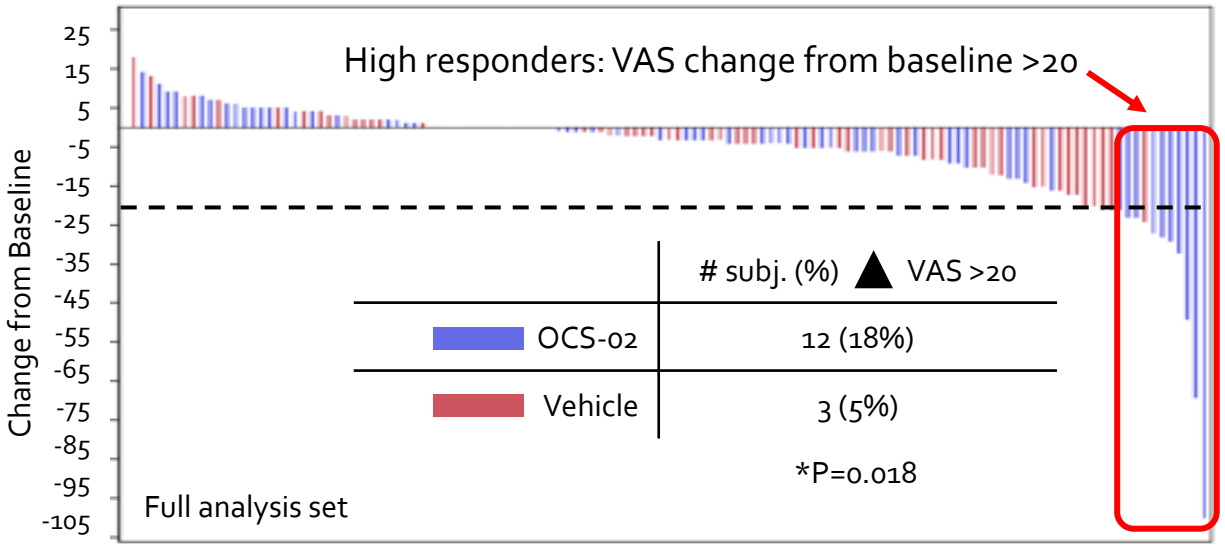
Consistent results in a previous study[2] with fast onset at day 14 reaching and maintaining statistical significance
Statistical significance reached in both all-comers and biomarker / high responders

(1) Predecessor of OCS-02 (LME636); Note: Presented at ARVO 2021 by KOL (Perez V.)
(2) Phase 2a study in acute anterior uveitis; data presented at ARVO, 2021 by KOL (Galor A.)

OCS-02 | Biomarker identified for high responders – potential for precision medicine approach

Genetic biomarker for OCS-02 response

Pre-specified exploratory pharmacogenetic analysis focused on the genes relevant to TNF pathway and Sjogren's syndrome



Association between gene variants and global ocular discomfort score at treatment day 29 was tested:

- Among the gene variants tested, one variant out of 4 showed **significant effect on the response to OCS-02**.
- Patients with this gene variant tended to have larger improvement vs other **$p < 0.0001$**
- Oculis is planning to further validate OCS-02 biomarker in the upcoming Phase 2b study

Successful Phase 2b will support advancement to Phase 3 while evaluating the potential for a precision medicine for DED

Presented at ARVO 2021 by KOL (Perez V.)

OCS-02 | Phase 2b study in Dry Eye Disease

A multi-center, randomized, double-masked, vehicle-controlled study evaluating the safety and efficacy of OCS-02 for the treatment of signs and symptoms of DED

Phase 2b study design:

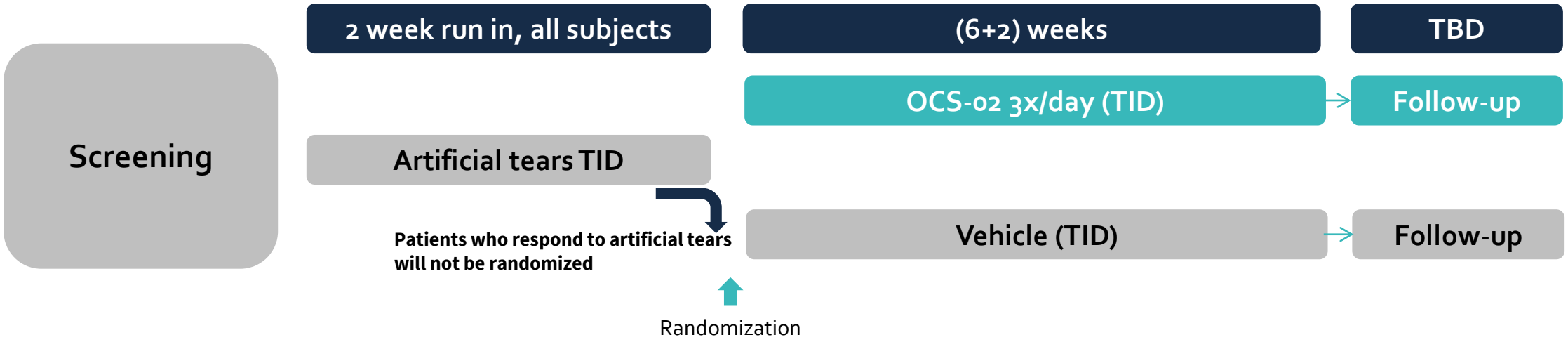
- Randomized, masked, vehicle-controlled study
- Multi-center, 10-week, approx. 120 subjects
- Stratification based on genotype (CC SNP) 30 Patients

Objectives:

- The objective of this study is to evaluate the safety and efficacy of OCS-02 for the treatment of signs and symptoms of dry eye disease

Key enrollment criteria:

- Subjects with history of DED for 6 mos.
- Schirmer's test at baseline < 10 mm
- Corneal fluorescein stain ≥ 2 in at least 1 region (inferior, superior)



OCS-02 | Recap – first Anti-TNFα eye drop for DED and Uveitis

INNOVATIVE THERAPY	Next gen. ophthalmic anti-TNFα to directly address core inflammation in both, DED and Uveitis
LARGE MARKET	Total addressable US patient population for DED: ~10M
IN PHASE 2b	Ready to advance Phase 2b with three clinical Phase 2a studies for DED and Uveitis: Statistically significant efficacy and safety in both indications in prior studies
MILESTONES	Phase 2b in **DED**: readout expected in 2H 2024 Phase 2b in **Uveitis**: readout expected in 2H 2024

(1) Multiple Sclerosis.
(2) Acute Optic Neuritis.

Oculis

OCS-05 in Neuro-Ophthalmology: Acute Optic Neuritis

Normal vision

Early glaucoma

Advanced glaucoma

OCS-05 | Candidate overview

SGK-2 activator peptidomimetic small molecule with a unique MoA for neuro-ophthalmology

Disease modifying drug to protect and repair neurons

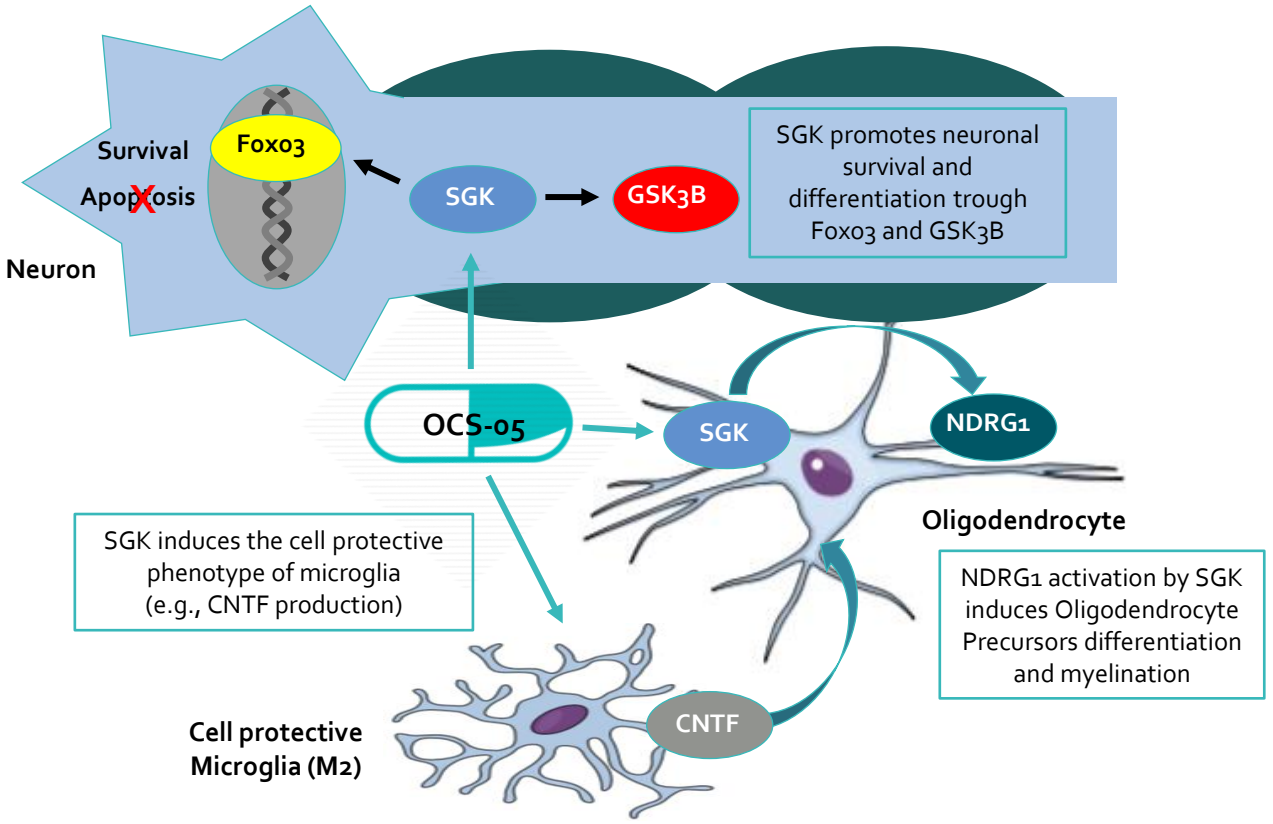
- Activates neurotrophic signalling pathways supporting neuronal survival and repair

Multiple potential applications:

- Glaucoma
- Dry AMD / Geographic Atrophy
- Diabetic Retinopathy
- Acute Optic Neuritis
- Neurotrophic Keratitis

Unique & Differentiated MOA

OCS-05 targets SGK as part of the neurotrophic factor signalling pathways triggering multiple beneficial effects on apoptosis, anti-oxidation and anti-inflammation

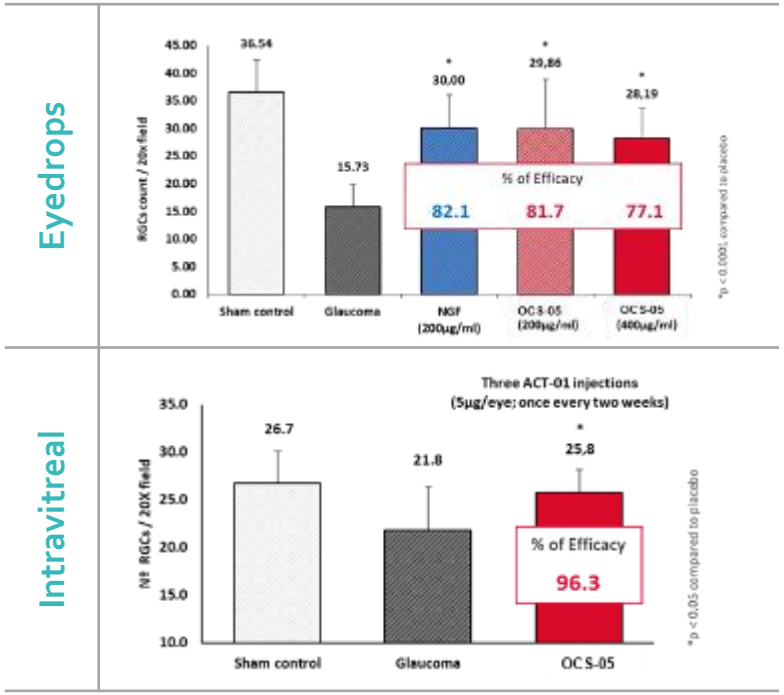


OCS-05 | New neuro-ophthalmology candidate

Compelling data showing prevention of RGC's damage in Glaucoma and AON models

OCS-05, IVT and topical, shown to **prevent RGCs(3) damage** (the key element in Glaucoma vision loss)

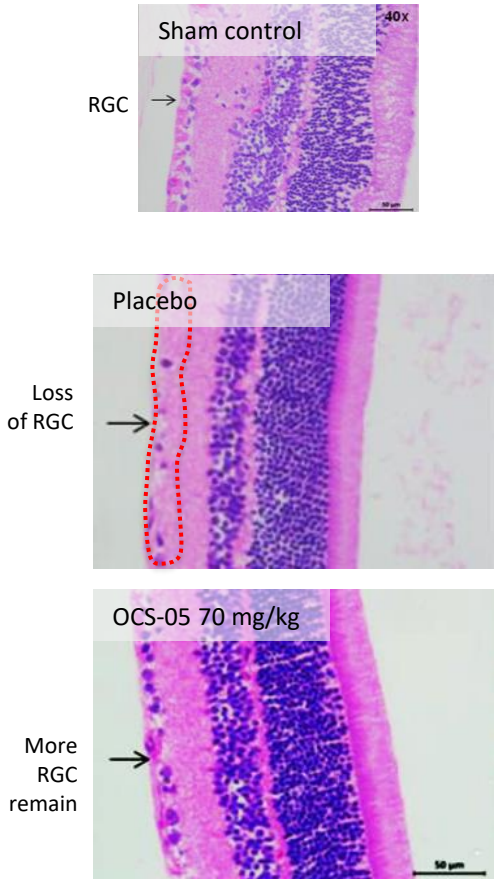
OCS – 05 | H&E(4) for RGC(3) density at week 6(5)



High-pressure Glaucoma rat model of neurodegeneration without inflammation

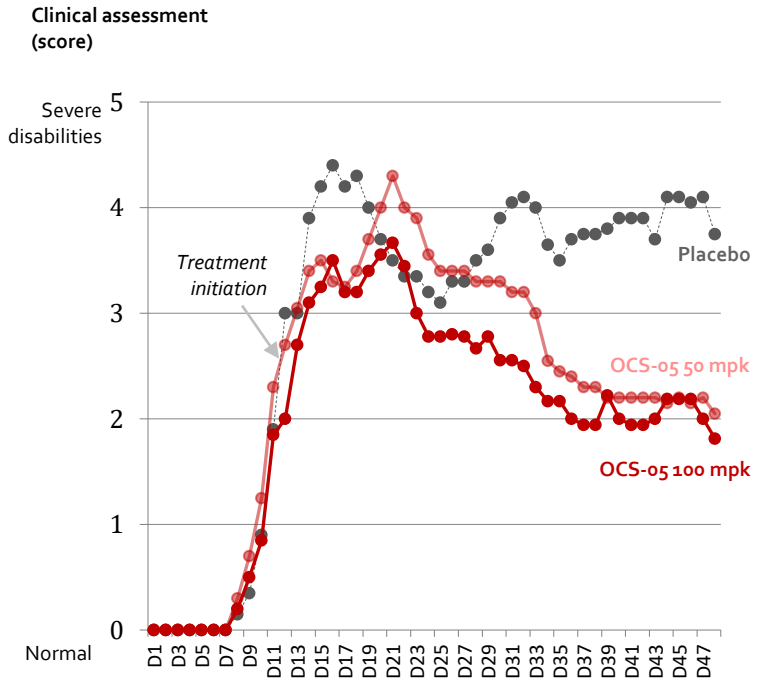
AON model: Short term study (5-day treatment, assessment at day 6)

Visual of RGC Protection



OCS-05 shown to promote **improvement of clinical function** (disability) in experimental autoimmune encephalomyelitis (EAE) model

OCS – 05 | Model of autoimmune AON and MS(5)



Experimental Autoimmune Encephalomyelitis model in mice

(1) Primary Open-Angle Glaucoma (POAG).
(2) Experimental autoimmune encephalomyelitis (EAE).
(3) Retinal ganglion cell (RGC).
(4) Hematoxylin and eosin (H&E) staining.
(5) Villoslada P. et al. Neurotherapeutics, published online: 27 February 2019.

OCS-05 | Development status

Paving the way to multiple indications

1. **Oculis New Sponsor Q3 2022**

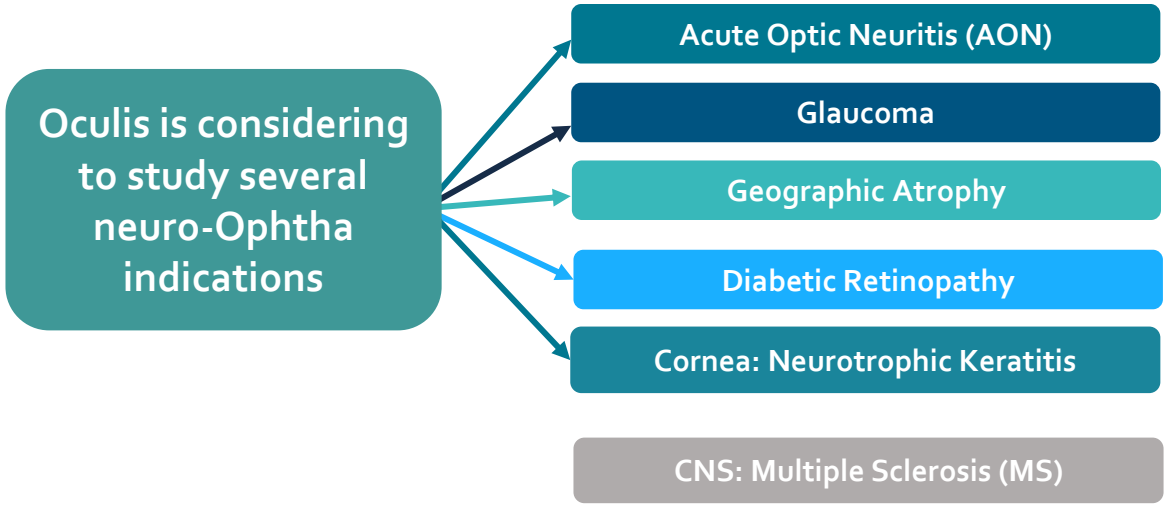
2. **Previous and ongoing studies in Europe**

Phase 1: No drug-related side effects

- Randomized, double-blind, placebo-controlled, single and multiple ascending dose study of the safety, tolerability and PK in adult healthy volunteers (UK, MHRA)
- Recruitment of 48 healthy volunteers (36 OCS-05, 12 placebo)

Phase 2a: First-in-patients trial in AON

- Objective to evaluate safety and explore efficacy of OCS-05 compared to placebo in patients diagnosed with a first unilateral AON of a demyelinating origin
- Randomized double-blind placebo-controlled, multicentre trial in France



3. **Oculis is working with FDA on pursuing the Dev in the U.S.**[1]

[1] *U.S. Clinical hold in 2016 under prior sponsor.*

Acute Optic Neuritis (AON)

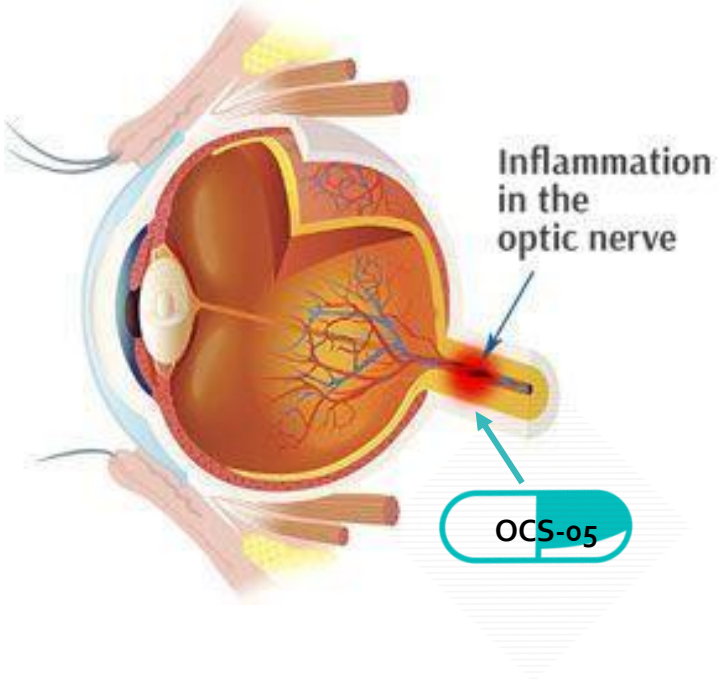
Optic Neuritis trials allows to validate OCS-05 in neuro-ophthalmology

130k patients a year (US/EU)

AON mean annual prevalence of acute: 7.9 cases per 100,000 person-year and AON mean annual incidence rate is 5.4 cases per 100,000 person-years[1]

- Not approved therapy for AON
- SoC is intravenous methylprednisolone, that is not reducing permanent disability

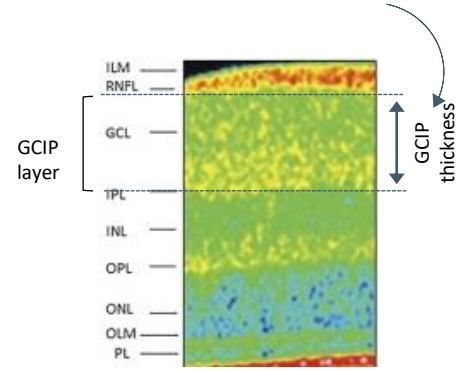
Preventing axonal damage at the optic nerve and RGC loss will preserve visual function



Retinal thickness (pRNFL and GCIPL) as surrogate of permanent visual impairment

Promising Imaging techniques which could be surrogate markers

5 um Change in GCIP thickness predicts a loss of 7 letters in 2.5% LCVA[2]



OCT of the human retina captures 1 µm resolution.

...is clinically relevant

7 letters (1.5 lines) a meaningful change of clinical relevance.

2.5% Sloan Letter Chart for LCVA.

1. Martínez-Lapiscina et al. J Neurol. 2014 Apr;261(4):759-67; 2. *Gabilondo et al. Ann Neurol. 2015 Mar;77(3):517-28; 3. 3Beck RW, et al. N Engl J Med. 1992 Feb 27;326(9):581-8*
2. *LCVA: Low Contrast Visual Acuity* .

OCS-05 | Recap - first SGK neuroprotective candidate in ophthalmology

TRANSFORMATIVE THERAPY	• Disease modifying drug with neuroprotective activities in neuro ophthalmology • Potential paradigm shift in treating major blinding diseases, acting directly on retinal neurons • **No treatment to-date**
LARGE MARKET	• Potential application for multiple indications in ophthalmology: Glaucoma, Geographic Atrophy, Diabetic Retinopathy, and corneal indications such as Neurotrophic Keratitis
PROMISING PRECLINICAL DATA	• Preclinical data: Neuroprotection by preventing retinal ganglion cell death and improvement of function in MS and AON models • Phase 1 study: Well-tolerated in 48 healthy volunteers
MILESTONE	• 2H 2024: Proof-of-concept data readout in AON expected

Summary

Proven track record of efficient capital deployment

Building a world leader in ophthalmology

Business Milestones

< 2016 - 2017

OCS-01

Optireach® animal & human POC

2018 - 2022

OCS-01

Optireach® clinical validation in DME/retina and Oc Sx
Positive EoP2 with FDA for DME and Ocular Sx commenced Phase 3 studies

OCS-02

Biologic eye drop: Novartis in-licensing
Technical development advancement

OCS-05

Neuroprotective disease modifying technology in-licensing

2023 and beyond

Clinical readouts:

- OCS-01 DME Ph3 Stage 1
- OCS-01 Oc Sx Ph3
- OCS-02 DED Ph2b
- OCS-02 Uveitis Ph2b
- OCS-05 AON PoC
- OCS-01 CME PoC
- OCS-01 Oc Sx NDA

Building a world leader in ophthalmology

Financial highlights

- **> USD 110 m** private funding from leading international life sciences investors
- **Successful clinical validation** of Optireach® / OCS-01
- **Strong and balanced portfolio**: OCS-01, OCS-02 and OCS-05
- **Efficient deployment of of capital** transforming Oculis into multiple assets with late-stage candidates

- **Successful Merger** with EBAC and **listing on** Nasdaq **:** March 3, 2023
- Raised **total proceeds** of **$104 m;** Adequately capitalized with cash runway to beginning of 2025
- Track record of success and well funded to deliver **key business milestones** in 2023 and 2024**:**
  - 6 clinical readouts
  - 1 NDA application

Uniquely positioned to build significant value

Advanced and Innovative product portfolio

- **OCS-01: 1st** Retina eye-drop for Diabetic Macular Edema (DME) **in Ph3**
- **OCS-02: 1st** Biologic eye-drop for Dry Eye Disease (DED) **in Ph2b**
  (upside potential from biomarker-driven precision medicine approach)
- **OCS-05: 1st** Neuroprotective agent for neuro-retina treatments **in PoC**

Strong management team ready to materialize significant commercial potential

- Targeting critical unmet needs in 3 major ophthalmology segments

Near-term value inflection points expected

2023

- OCS-01 DME Phase 3 (Stage 1) readout
- OCS-01 Ocular Surgery Phase 3 readout

2024

- OCS-01 Ocular Surgery NDA
- OCS-01 CME(1) PoC readout
- OCS-02 DED Phase 2b readout
- OCS-02 Uveitis Phase 2b readout
- OCS-05 AON(2) PoC readout

(1) Cystoid Macular Edema (CME).
(2) Acute Optic Neuritis (AON).

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Investor Webcast – Discussion with KoL's

Key Opinion Leaders

Dr. Eric Donnenfeld

Dr. Donnenfeld, who is a trustee of Dartmouth Medical School and clinical professor of ophthalmology at New York University. He is a past president of The American Society of Cataract and Refractive Surgery, President of the International Intraocular Implant Society, a Fellow of the American Academy of Ophthalmology and editor-in-chief of EyeWorld.

Dr. Pravin Dugel

Dr. Dugel is an Oculis Board member and is internationally recognized as a major clinical researcher and has served as a visiting professor at universities worldwide – contributions that earned him the prestigious Senior Honor Award from the American Academy of Ophthalmology. He has previously served as a member of the Board of Directors of the American Society of Retina Specialists (ASRS), and Europe's retina society, EURETINA. He is also President of the biopharmaceutical company, Iveric Bio.

Dr. Arshad Khanani

Dr. Khanani has been a principal investigator for more than 100 clinical trials and a top enroller in the United States for multiple Phase 1-3 trials. He is a Clinical Associate Professor at the University of Nevada, Reno School of Medicine, an elected member of the Retina Society, Macula Society and has received numerous awards of distinction including the Senior Honor Award from the American Society of Retina Specialists. Dr. Khanani founded the clinical research section at Sierra Eye Associates and currently serves as its Managing Partner, Director of Clinical Research, and Director of Fellowship.

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Investor Webcast – Q&A

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THANK YOU

Our Purpose

To drive innovation to save sight and improve eye care