

NASDAQ: OTLK outlooktherapeutics.com



Enhancing the standard of care for retinal disorders by working to achieve the first FDA approval for bevacizumab in ophthalmology



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Leadership Team: Global Ophthalmic Development and Commercial Launch Excellence



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President, CEO and Director











LAWRENCE KENYON
Chief Financial Officer and Director









JEFF EVANSONChief Commercial Officer











TERRY DAGNON
Chief Operations Officer











JOEL PRIEVE
SVP, Commercial Operations
AmerisourceBergen







ALICIA TOZIERSVP, Market Access and Marketing

Genentech







Surendra Sharma, MD SVP, Medical Affairs









JENNIFER KISSNER SVP, Clinical Development









CHRISTOPHER YONAN
SVP, Technical Operations

Ulli Bristol Myers Squibb





Investment Highlights

FDA Market Approval of ONS-5010 (bevacizumab-vikg)¹, an Investigational Therapy for the Treatment of Wet AMD, Targeted for August 29, 2023 PDUFA Date

Targeting \$13.1 Billion Global Ophthalmic Anti-VEGF Market²

Differentiated Drug Product

- Designed to meet robust standards required for FDA ophthalmic approval
- Potential to eliminate risks associated with off-label repackaged bevacizumab, including potential impurities and particulates from compounders re-packaging processes
- Delivery ultimately expected through a convenient pre-filled syringe

Potential for 1st FDA Approved Ophthalmic Bevacizumab

- U.S. FDA BLA accepted with target PDUFA action date of August 29, 2023
- Potential U.S. launch in Q4 2023
- Received validation of Marketing Authorization Application by European Medical Agency
- Provides an economically elegant anti-VEGF solution for patients, payers and doctors

Attractive Market Opportunity

- Strategic commercialization agreement with AmerisourceBergen
- Over 50% of the U.S. market estimated to be available for conversion to ONS-5010, representing up to billions in potential yearly sales
- 12-years US regulatory exclusivity expected upon approval
- Label expansion opportunity into DME and BRVO



^{1.} ONS-5010 / LYTENAVA™ (bevacizumab-vikg) is an investigational ophthalmic formulation of bevacizumab

^{2.} Guidehouse Triangulation of Global Data, Market Scope and Investor Forecasts (2020)

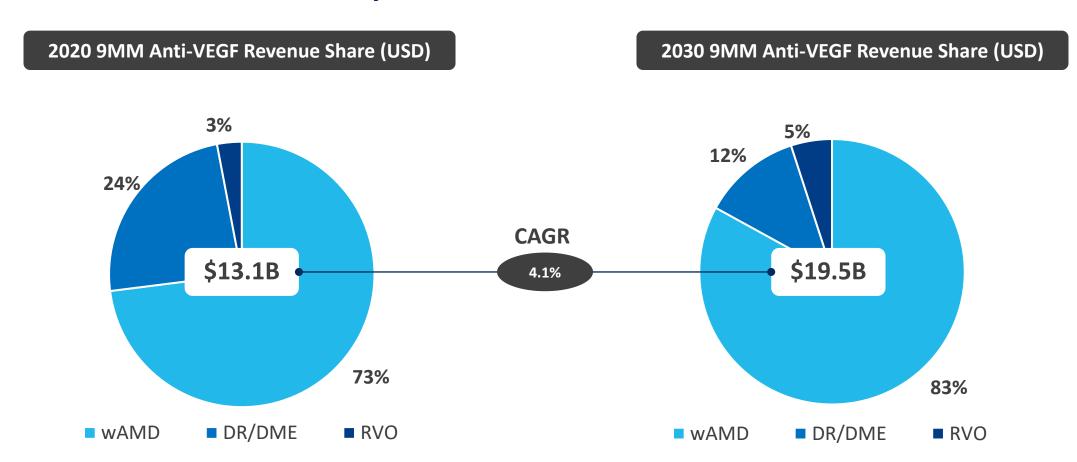
AMD = Age-Related Macular Degeneration; DME = Diabetic Macular Edema; BRVO = Branch Retinal Vein Occlusion

Wet AMD Landscape Current and Future



Targeting Large and Growing Ophthalmic Markets

ONS-5010, if Approved, will be a Significant Therapy in the Retinal Anti-VEGF Market, Currently Estimated to be in Excess of \$13.1 Billion Worldwide

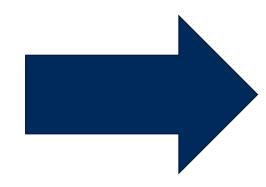




The Majority of New Patient Starts are Off-Label Bevacizumab

New Patient Starts

66.3% of respondents (n=990) utilize off-label bevacizumab as a first-line agent



Maintenance Therapy

42.8-50.2% of overall injections continue therapy on off-label

- Anti-VEGF is the standard-of-care for the treatment of wAMD, DME and BRVO globally
- ~70% of Retinal Specialists in the US use off-label Avastin first-line for wAMD
- Despite high usage, Retinal Specialists show concern for the quality and supply of off-label Avastin

Source: Navigant Quantitative Survey (n=152), 2019



- 1. ASRS 2022 Membership Survey Presented at ASRS NY 2022. Q: Considering all indications, what is your most commonly used first-line anti-VEGF agent?
- . Market Scope Q1 2022 US Retina Quarterly Update
- 3. GlobalData: Age-Related Macular Degeneration: Global Drug Forecast and Market Analysis to 2028 (April 2020)

Public Health Concern Due To Repackaged and Off-Label Use of Bevacizumab Designed for Other Specialties and Delivery Systems

Variability in Potency¹

JAMA Ophthalmology

- 81% of samples had lower protein concentrations than required
- Samples had statistically significant variations in protein concentration among samples

Safety and Sterility Adverse Events²





- Unvalidated hold times in syringes
- Patients have lost eyesight due to infections
- Multiple unapproved repackaged IV bevacizumab recalls due to unsterile compounding practices

Syringe Adverse Events³



- Variability in repackaging can lower quality of syringe products, resulting in adverse events
- Silicone oil droplets may be released from the syringe into the eye

Not Held to FDA Ophthalmic Quality Standards When Repackaged



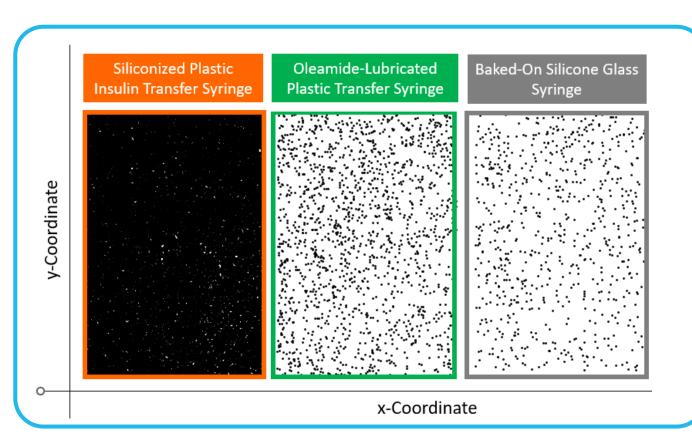
400 mg/16 mL, single-use vial; 100 mg/4 mL, single-use vial





Higher Particulates Allowed in Parenteral Injections Avastin® Compared to Ophthalmic Standards - Compounded by Particulates Leaching from Manufacturing Commodities and Syringes

Flow imaging particle counts (all particles >1 μ m) as x-y spatial plots on the instrument detector. Syringes were filled with approximately 0.5 mL of buffer (no drug product), subjected to ASTM D4169 to 14 drop/shipping testing, and stored for 15 days at 2 to 8°C.





USP <788> Particulate Matter in Injections

≥ 10 μ m: Not more than **6000** particles/mL ≥ 25 μ m: Not more than **600** particles /mL

≥ 50 µm: Not tested

USP <789> Particulate Matter in Ophthalmic Solutions

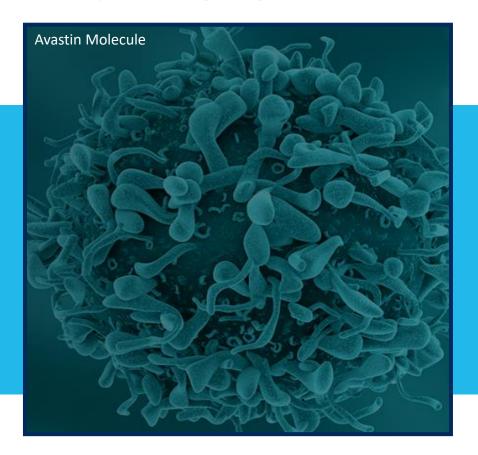
≥ 10 µm: Not more than **50** particles/mL

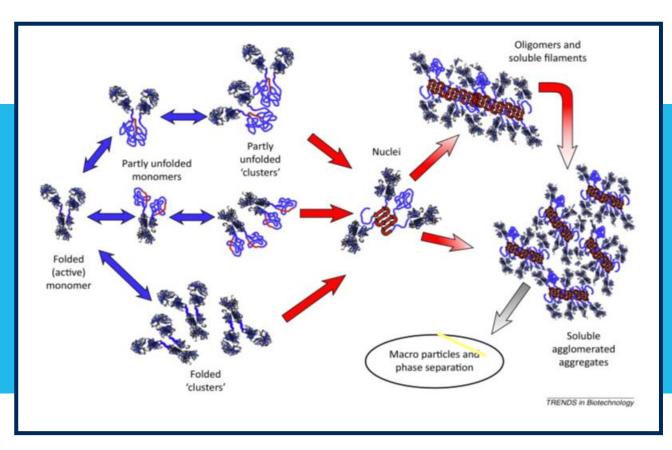
≥ 25 µm: Not more than **5** particles/mL

≥ 50 µm: Not more than **2** particles



Monoclonal Antibody Shearing/Fragmentation During the Repackaging Process





Our results suggest that the particle formation is intensified by the amplified desorption effects of shear stress.¹

Protein Aggregation Around Particulates and Potential Decreased Efficacy

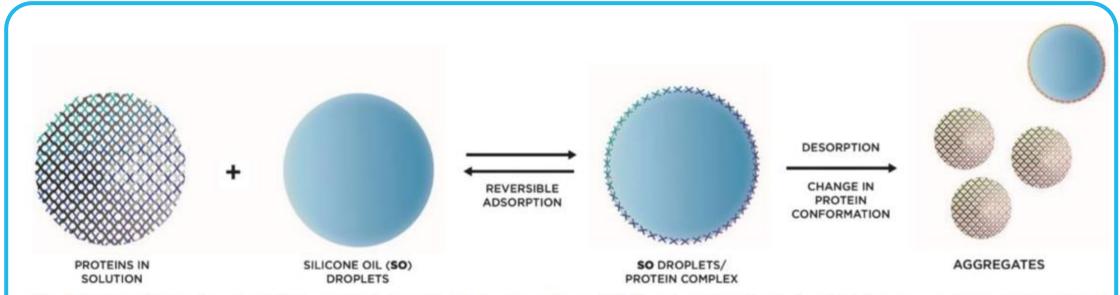


Fig. 1 Schematic drawing illustrating possible interactions between silicone oil (SO) and proteins in solution. Proteins may undergo conformational change and film formation after interaction with the silicone oil surface. Fragmentation of SO-protein complexes results in smaller aggregates and agglomerates

Extended storage of the drug in the syringe can potentially increase the chance of particle formation, especially in silicone-based systems. Unwanted particles in the solution can cause irritation in the eye and potentially react with the active drug to lower efficacy.¹



Extended Storage of a Biologic in Pre-Filled Syringes

Quality Challenges Caused by Long Term Storage of a Biologic in Non-Validated Pre-Filled syringes

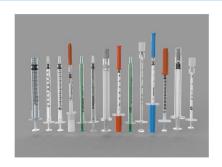
Silicon Insulin Syringe fused/staked needle

Silicon Free Syringe slip tip - no needle



Baked on silicon lubricant leaves deposits. Container closure integrity challenges.

Vet syringe. Lubricant sloughs leading to rising particulates & visible particulates.











Storage of a protein solution in a plastic syringe can extract leachable material from the syringe barrel and rubber plunger tip. Compounds can induce protein aggregation and potentiate adverse effects in patients such as immunogenicity. Therefore, properly developed therapeutic proteins are not stored in plastic containers.¹



U.S. Law and FDA Regulations for Compounding and Repackaging

- The Food Drug and Cosmetic Act (FD&CA) and Drug Quality and Security Act of 2013 define what is legal for 503A and 503B Compounding Pharmacies.¹
 - Once a drug or biologic is FDA approved and commercially available compounding is no longer authorized.^{2,3,4,5}
 - 503A Compounding pharmacies are regulated by federal regulations and state laws and can only compound or repackage for individual prescriptions in limited quantities and cannot distribute across state lines for > 5% of business.
 - 503B Compounding pharmacies / outsourcing facilities must comply with CGMP regulations, are inspected by FDA and must adhere to reporting requirements.
 - Neither 503A nor 503B pharmacies can compound or repackage commercially available drugs unless they appear on the official FDA drug shortage list.
- "Compounded drug products are not FDA-approved, which means they have not undergone FDA premarket review for safety, effectiveness, and quality." FDA⁶
- "The restrictions on making drugs that are essentially copies ensure that pharmacists and physicians do not compound drug products under the exemptions for patients who could use a commercially available drug product." – FDA⁶
- "Such a practice would create significant public health risks because patients would be unnecessarily exposed to drug products that
 have not been shown to be safe and effective and that may have been prepared under substandard manufacturing conditions." FDA⁶
- "Under the statutory scheme, only very rarely should a compounded drug product that is essentially a copy of a commercially available drug product be offered to a patient." FDA⁶
- On 23 March 2020 FDA announced biological products would no longer be eligible for the exemptions for compounded drugs under sections 503A and 503B of the FD&C Act⁷



ONS-5010

The Form of Bevacizumab the Market Wants



ONS-5010 Ophthalmic Bevacizumab Target Product Profile

ONS-5010 (bevacizumab-vikg) Investigational Therapy			
Patient Population	Patients diagnosed with wet AMD, DME, or BRVO		
Description	 Anti-VEGF bevacizumab designed for ophthalmic indications wet AMD, DME, and BRVO Demonstrated high affinity to bind to all isoforms of VEGF A 		
Dosing and Administration	 Supplied either as pre-filled ophthalmic syringe for intravitreal 1.25 mg injection administered once monthly, or in a glass vial 		
Efficacy, Safety, and AEs	 NORSE TWO demonstrated significant efficacy and safety, and when combined with NORSE ONE and NORSE THREE provides the necessary registration database. These ONS-5010 data when taken as a whole continue to be consistent with previously published results for bevacizumab 		



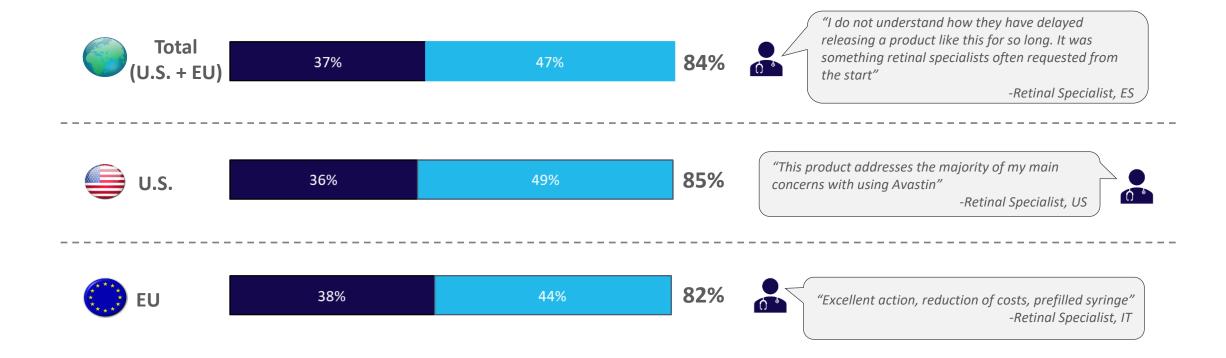
FDA Approval Requirements vs Compounded Bevacizumab

Ophthalmic Solution Requirement	Off-Label Compounded Repackaged IV Solution	FDA Approved Ophthalmic Solution for Intravitreal Injection
Sterile USP <71>1	?	Yes
Particulates per USP <789> for ophthalmic solutions ¹	?	Yes
Bacterial endotoxins USP <85>1	?	Yes
GMP ^{2,3}	?	Yes
FDA approved ophthalmic package consistent with USP <771>1		Yes
FDA reviewed stability data supporting shelf life ^{2,3}		Yes
pH FDA approved and consistent with USP <771>1,2,3		Yes
Potency FDA approved specifications for shelf life ^{2,3}		Yes
Osmolarity specification for ophthalmic solution ^{2,3}	No	Yes



Do Physicians Want an Ophthalmic Approved Bevacizumab?

>80% of Retinal Specialists Express Interest/High Interest in an FDA-Approved Ophthalmic Bevacizumab to Treat Wet AMD, DME and BRVO

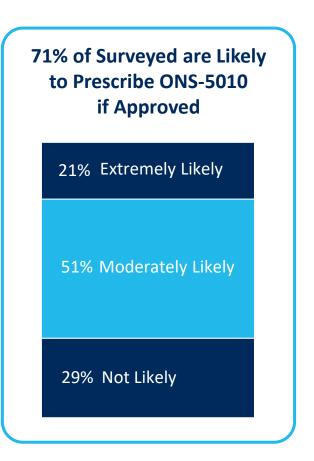




Investigational Therapy ONS-5010 Ophthalmologists Survey

80% of Surveyed Perceive ONS-5010 as an Advancement 9% Substantial Advance 71% Moderate Advance 20% Minimal to No Advance

77% of Surveyed Believe an **FDA Approved Bevacizumab** for Wet AMD is Important Extremely 24% **Important** Moderately **Important** 24% Not Important





LYTENAVA™ Pricing Opportunity





LYTENAVA™ Pricing Strategy

Price low enough to move off-label users to branded LYTENAVA™, while still creating significant margin and value compared to any biosimilar and significantly less than the premium branded products



ONS-5010

Commercial Activities



Strategic Commercialization Partnership in U.S. with Preeminent Leader in Specialty Pharma Distribution

AmerisourceBergen

Establishes Commercial Depth in Advance of Potential ONS-5010 Commercial Launch

✓ Third-Party Logistics Services and Distribution Medical Information and Pharmacovigilance Services

Besse Medical is One of the Largest Specialty
Pharmaceutical Distributors to Retina Specialists



ONS-5010

Clinical Data



Compelling Clinical Data Support Potential FDA Approval in Wet AMD

- √ U.S. FDA BLA Accepted with Target PDUFA of August 29, 2023
- ✓ Received Validation of Marketing Authorization Application by European Medical Agency

✓ Positive Signals



Clinical Experience Trial



✓ Completed



Open-Label Safety Study



NORSE ONE and NORSE THREE Results



Clinical Experience Trial

Demonstrated anticipated safety and efficacy signals consistent with previously published results for ophthalmic use of bevacizumab

Trial Highlights:

- Desired proportion of 3-line visual acuity gainers achieved
- Desired mean gain in visual acuity achieved
- Zero ocular inflammation observed
- Safety was comparable to published bevacizumab studies, such as CATT



Open-Label Safety Study

Positive safety profile reinforces previously reported safety data for ONS-5010 (bevacizumab-vikg)

Trial Highlights:

- Provided adequate number of patient exposure required for BLA submission
- No unexpected safety trends
- Zero cases of ocular inflammation





Pivotal Trial

2nd Registration Trial



Trial Highlights:

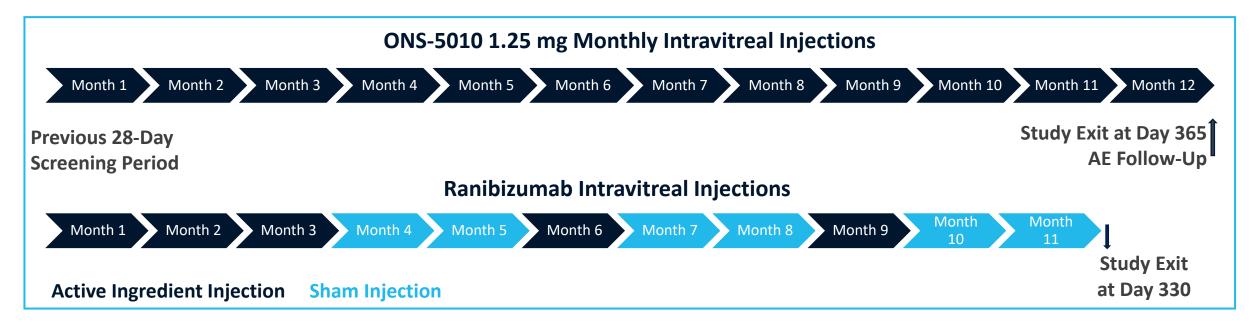
- Randomized masked controlled trial
- ONS-5010 (bevacizumab-vikg) vs LUCENTIS® (ranibizumab)
- 228 patients enrolled
- Trial conducted in the United States
- Trial arms included >95% treatment-naïve patients





Phase 3 Pivotal Study Design – Registration Strategy

12-Month Study of Safety and Efficacy of ONS-5010 in Subjects with Wet AMD Study Design and Statistical Analysis Plan Agreed to by U.S. FDA



Study Eye Characteristics

- Active, primary CNV due to wet AMD
- Treatment-naïve
- BCVA: 20/50 20/320

Key Study Outcomes

- Proportion of subjects who gain ≥15 letters in BCVA
- Mean change in BCVA from baseline to Month 11
- Frequency and incidence of AEs

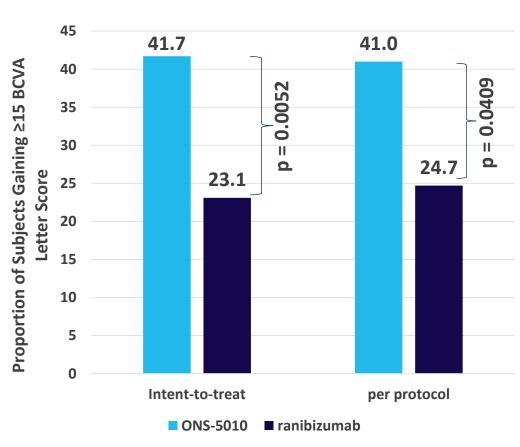




Primary Endpoint Met with Statistically Significant, Clinically Relevant Results¹

Characteristic	Statistic	ONS-5010 (n=113)	Ranibizumab (n=115)	
Intent-to-Treat Pop.				
Number of Subjects	n/N (%)	45/108 (41.7)	24/104 (23.1)	
Risk Difference	0.1859			
95% CI	(0.0442,0.3086)			
p-value		0.0052		
Per Protocol Pop.				
Number of Subjects	n/N (%)	34/83 (41.0)	18/7	3 (24.7)
Risk Difference	0.1631			
95% CI	(0.0120, 0.3083)			

Difference in % Subjects Gaining 3 Lines Vision



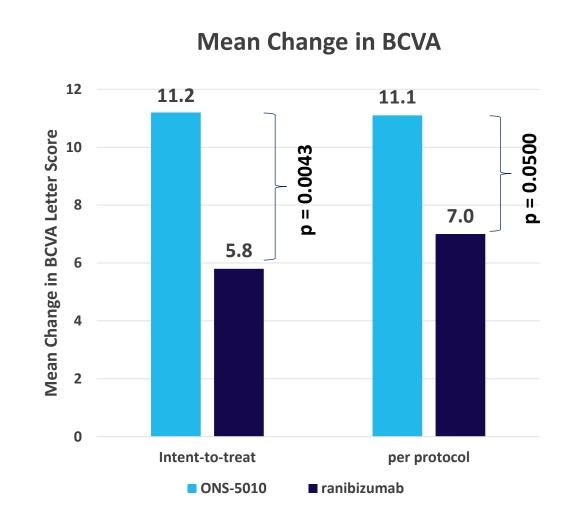


1. Primary endpoint at Month 11



Key Secondary Endpoints Met with Highly Statistically Significant, Clinically Relevant Results

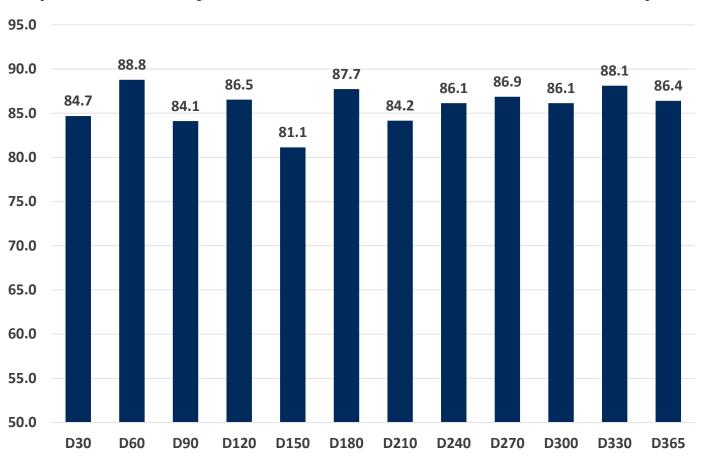
Characteristic	Statistic	ONS-5010 (n=113)	Ranibizumab (n=115)	
BCVA Score Change from Baseline to Month 11 (ITT)	n	104	96	
	Mean (SD)	11.2 (12.19)	5.8 (14.80)	
p-value		0.0043		
BCVA Score Change from				
Baseline to Month 11 (PP)	n	80	68	
	Mean (SD)	11.1 (12.77)	7.0 (14.56)	





NORSE TWO - BCVA

Proportion of Subjects Who Maintained or Gained BCVA by Visit



The **majority** of subjects maintained or gained BCVA during the study (defined as change from baseline in BCVA ≥ 0)

- ≥ 80% of subjects maintained BCVA each month
- At 1 year, 86.4% of subjects had maintained or gained BCVA, supporting the sustained positive effect of ONS-5010





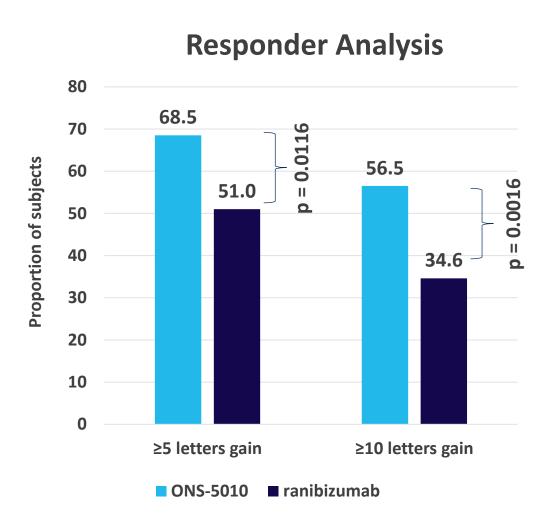


Statistically Significant, Clinically Relevant Secondary Endpoints

Characteristic	Statistic	ONS-5010 (n=113)	Ranibizumab (n=115)	
Subjects Gaining ≥5 letters				
Number of Subjects	n/N (%)	74/108 (68.5)	53/104 (51.0)	
Risk Difference		0.1756		
95% CI	(0.0315,0.3052)			
p-value		0.0	116	
Subjects Gaining ≥10 letters				
Number of Subjects	n/N (%)	61/108 (56.5)	36/104 (34.6)	
Risk Difference		0.2	2187	
95% CI		(0.0726	,0.3487)	
p-value		0.0	016	

68.5% (p = 0.0116) ONS-5010 subjects gained ≥ 5 letters of vision 56.5% (p = 0.0016) ONS-5010 subjects gained ≥ 10 letters of vision

41.7% (p = 0.0052) ONS-5010 subjects gained ≥ 15 letters of vision





1. Primary endpoint at Month 11



Safety Results: Consistent with Previously Reported Results from NORSE ONE and NORSE THREE

Only One ONS-5010 Ocular Inflammation AE Reported in NORSE TWO (Iritis)

Characteristic	Statistic	ONS-5010 (n=113)	Ranibizumab (n=115)	Overall (n=228)
≥ 1 Adverse Event	n (%)	85 (75.2)	85 (73.9)	170 (74.6)
≥ 1 ocular Adverse Event	n (%)	59 (52.2)	61 (53.0)	120 (52.6)
≥ 1 non-ocular Adverse Event	n (%)	56 (49.6)	52 (45.2)	108 (47.4)
≥ 1 Serious Adverse Event	n (%)	14 (12.4)	16 (13.9)	30 (13.2)
≥ 1 ocular Serious Adverse Event	n (%)	1 (0.9)	0	1 (0.4)
≥ 1 non-ocular Serious Adverse Event	n (%)	13 (11.5)	16 (13.9)	29 (12.7)



Financial Highlights NASDAQ: OTLK

Closed ~\$54 Million in Net Proceeds from Financings on December 28, 2022

\$52.3M

~\$278M Market Cap²

~257M

Shares Outstanding³

~572K

Average Volume²

Sufficient Capital to Support Operations Past Anticipated FDA Approval of ONS-5010 in the Third Quarter of Calendar 2023 and into the Fourth Calendar Quarter of 2023⁴



• Initial U.S. target segment worth up to billions in potential yearly revenue served by compounding pharmacies which by law should be converted to Outlook Therapeutics' LYTENAVA, if FDA approved

- Potential FDA approval August 29, 2023 as the first FDA approved ophthalmic formulation of bevacizumab
 - Received validation of Marketing Authorization
 Application by European Medical Agency
- Current capital expected to fund operations through anticipated
 FDA approval of ONS-5010 in the third calendar quarter of 2023²
- Management team with proven ophthalmic commercial launch expertise
 - Leveraging strategic commercialization agreement with AmerisourceBergen to preserve capital and enhance commercial reach



Company Summary

