





Forward-Looking Statements

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Risk factors which are likely to have a material effect on Nicox SA's business are presented in the 3rd chapter of the "*Document d'Enregistrement Universel, rapport financier annuel et rapport de gestion* 2021" filed with the French Autorité des Marchés Financiers (AMF) on April 29, 2022 under number D.22-0392, in its first amendment filed with the AMF on May 19, 2022, in the 2nd chapter of its second amendment filed with the AMF on November 22, 2022 and in the 2nd chapter of the Securities note filed with the AMF on November 22, 2022, which are available on Nicox SA' website (www.nicox.com).

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Driving Innovation in Ophthalmology, Led by NCX 470 & an Experienced Team

Differentiated pipeline with recent, positive NCX 470 pivotal Phase 3 clinical trial results

Lead asset NCX 470, with a potentially differentiated profile targeting glaucoma, leverages Nicox's proprietary Nitric Oxide (NO) donating research platform.

Positive topline results from the first Phase 3 trial (Mont Blanc)¹.

Potential retinal benefits seen in nonclinical models²

Experienced Leadership, Board and Advisors with expertise to drive successful outcomes

Experienced team well positioned to bring NCX 470 to approval and to advance and build the pipeline to deliver future growth

Cash position enhanced by global partnerships and outlicensed commercial products

Cash balance of €27.7 million³ expected⁴ to fund operations until Q2 2024

Current and potential future revenue and value from global partnerships



Nicox Press release October 31, 2022

^{2.} J Ocul Pharmacol Ther. 2022. 38: 496-504

Audit procedures carried-out, certification report not yet issued

Based exclusively on the development of NCX 470



Broad Global Leadership Experience



Andreas Segerros
Chief Executive Officer



Sandrine Gestin
VP, Finance



Doug HubatschEVP, Chief Scientific Officer



Emmanuelle Pierry

General Counsel & Head, Legal



Gavin Spencer

EVP, Chief Business Officer &

Head, Corporate Development

























Board Bringing Extensive Experience in Ophthalmology and Pharmaceuticals



JEAN-FRANÇOIS LABBE Chairman of the Board





LES KAPLAN
Director





MICHELE GARUFI
Director





LAUREN SILVERNAIL
Director





ADRIENNE GRAVES
Director





LUZI VON BIDDER
Director







U.S. Glaucoma Clinical Advisory Board with Leading Experts

DR. ROBERT D. FECHTNER, MD, CHAIRMAN

Professor and Chair of the Department of Ophthalmology at SUNY Upstate Medical University, Syracuse, NY

DR. SANJAY G. ASRANI, MD

Professor of Ophthalmology at Duke University in Durham, North Carolina, and Director of the Duke Eye Center of Cary and the Duke Glaucoma OCT Reading Center

DR. DONALD BUDENZ, MD MPH

Kittner Family Distinguished Professor and Chairman, Department of Ophthalmology, UNC Chapel Hill School of Medicine

DR. STEVEN MANSBERGER, MD MPH

Vice-Chair, Senior Scientist, and Director of Glaucoma Services and Ophthalmic Clinical Trials for the Devers Eye Institute in Portland, Oregon. Clinical Professor of Ophthalmology at Oregon Health Science University

DR. TOM WALTERS, MD

President of Texan Eye P.A. and Medical Director of Eye LASIK Austin, Advanced Ophthalmic P.A., Keystone Clinical Research

DR. ROBERT N. WEINREB, MD

Distinguished Professor and Chair, Ophthalmology, Director of both the Shiley Eye Institute and the Hamilton Glaucoma Center, holder of the Morris Gleich, MD Chair in Glaucoma, and Distinguished Professor of Bioengineering





Unique Combination of Competencies

Capable of bringing NCX 470 to approval and driving future growth



- International R&D Management with deep ophthalmology experience
- Corporate, Finance and Legal team have completed multiple transactions, restructuring and financing
- Board members with extensive experience in ophthalmology and pharmaceuticals from leading companies
- World-recognized Key Opinion Leaders on the Clinical Advisory Board







Novel molecule for intraocular pressure lowering, the leading cause of glaucoma

Positive pivotal Phase 3 topline results from the Mont Blanc trial¹

Large and established market²:

\$5.9 billion worldwide

\$1.3 billion prostaglandin analog market in the United States

First non-combination product to demonstrate statistical non-inferiority to a prostaglandin analog in a pivotal trial, thereby meeting the efficacy requirements for approval in the United States



NCX 470 Leads a Differentiated Ophthalmology Pipeline

Stages of Development



^{1.} In addition to our Chinese partner, the Company is actively looking for commercial partners in the U.S. and Japan, to maximize the value of NCX 470. The ongoing Denali trial is not financed beyond the current cash runway of Q2 2024. New Phase 3b clinical trials and nonclinical studies concerning the dual mechanism of action and the potential beneficial effects of NCX 470 on the retina are planned to report results in the next 12 to 18 months which may strengthen the therapeutic profile of NCX 470. The topline results date of 2025 for the Denali trial is based on projections of increased recruitment which take notably into account the lifting of COVID-1) in Protitions in China. 2. Planned costs of nonclinical activities on NCX 1728 are not significant. 3. The net book value of NCX 4251 was decreased to zero (reduction of €15.1 million in 2021 and €11.0 million in H1 2022) in the U.S. due to the additional costs and timings associated with the change in indication, followed by the decision to out-license the product. 4. The net book value of ZERVIATE (€26 million) corresponds mainly to the value of the case at allocated to the Chinese territory, for which the rights were granted to the partner Ocumension. There was an impairment (€12.7 million) to the value in the U.S. in 2021 taking into consideration changes in the U.S. market for topical anti-allergics. 5. The costs of



development and commercialization of these products and product candidates are paid by the partner

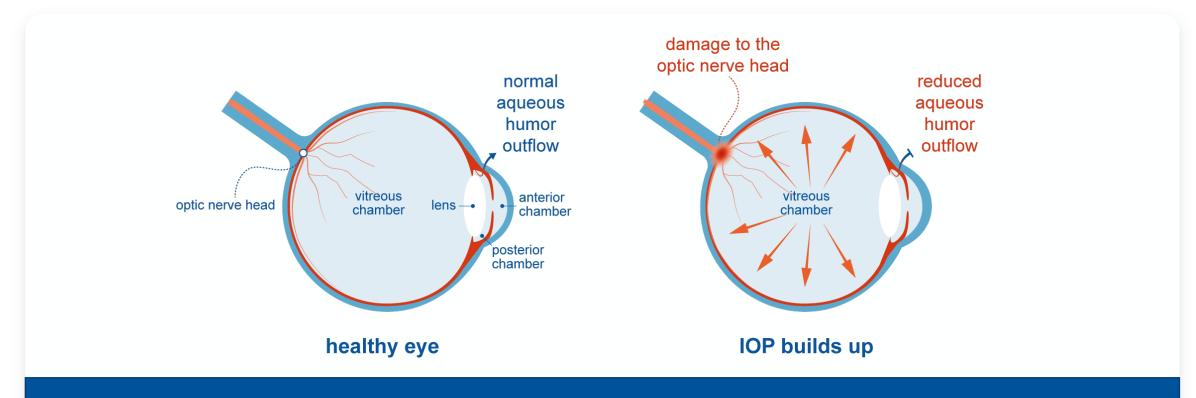






Glaucoma Snapshot

Elevated intraocular pressure (IOP) contributes to irreversible optic nerve damage, leading to progressive vision loss



As published in the landmark EMGT study "...each mmHg of decreased IOP was related to an approximately 10% lowering [of risk of vision loss progression]"

10% lowering [of risk of vision loss progression loss





Unmet Medical Need for Glaucoma Treatment

Despite having well established first line therapies, including the standard of care, latanoprost, patients do not react to glaucoma medications in the same way, and therefore eye care professionals need multiple treatment options

40% of patients do not achieve their target IOP on existing monotherapies1 requiring eye care professionals to adjust or change the medication used

Beckers HJM et al. Side effects of commonly used glaucoma medications: comparison of tolerability, chance of discontinuation, and patient satisfaction. Graefe's Archive for Clinical and Experimental Ophthalmology

Many patients require >1 medication which leads to compliance issues^{2,3}

Tolerability issues with some medications lead to discontinuations and/or compliance issues4



2008:246(10):1485-90

Kass et al, Delaying treatment of ocular hypertension: the ocular hypertension treatment study. Arch Ophthalmol, 2010; 128:276-287

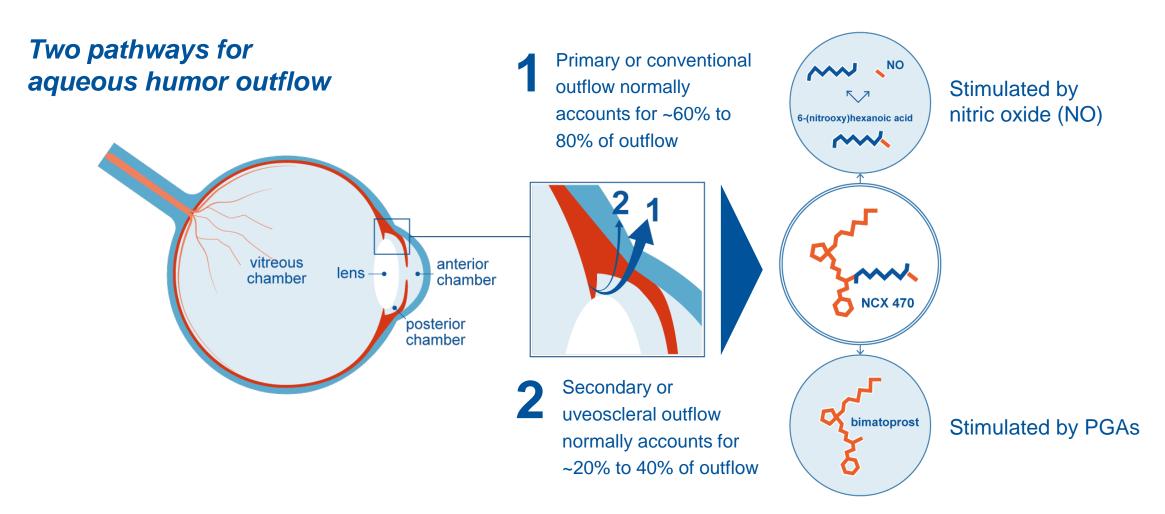
Robin AL et al, Does adjunctive glaucoma treatment therapy affect adherence to the initial primary therapy? Ophthalmology. 2005; 112:863-868

Robin et al. Adherence in glaucoma: Objective measurements of once-daily and adjunctive medication use. Am J Ophthalmol. 2007;144:533-540



NCX 470 Acts Through A Dual Mechanism¹ for IOP Lowering

Nonclinical optic nerve/retinal damage models also demonstrate potentially beneficial retinal effects²





^{2.} J Ocul Pharmacol Ther. 2022. 38: 496-504



^{3.} PGAs = Prostaglandin Analogs;



Positive Topline NCX 470 Mont Blanc Results¹

Phase 3 program intended to support planned U.S. & China NDA submissions

Designed to demonstrate safety and efficacy of NCX 470 0.1% vs latanoprost 0.005%, defined by intraocular pressure reduction from time-matched baseline at pre-established time points

MONT BLANC: Primary objective of noninferiority achieved

N = 691

56 clinical sites in the U.S. & one site in China

Adaptive study design selected the 0.1%

Second efficacy objective, statistical superiority to latanoprost, was not achieved

NCX 470 was statistically superior to latanoprost in intraocular pressure reduction from baseline at 4 of the 6 timepoints, and numerically greater at all 6

DENALI: Enrolling subjects

N = ~670

~60 clinical sites in the U.S. & China

Includes a 12-month safety extension

Jointly conducted & equally financed with Chinese partner Ocumension Therapeutics

Topline results expected in 2025²





Mont Blanc Phase 3 Efficacy Trial Design¹

Designed to evaluate NCX 470 vs. established therapy, latanoprost

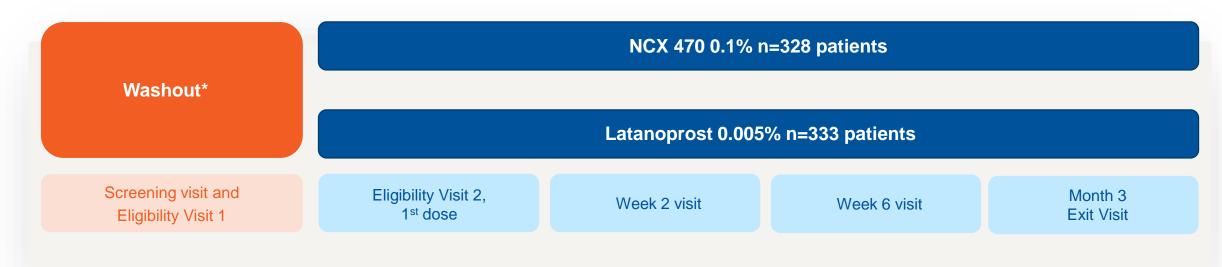
Randomized, controlled, double-masked, parallel design trial. Patients with open angle glaucoma or ocular hypertension were randomized 1:1 to once-daily treatment with NCX 470 0.1% or latanoprost 0.005%

Primary Endpoint:

Mean intraocular pressure reduction from time-matched baseline at 8 AM and 4 PM at the week 2, week 6 and month 3 visits

Enrollment:

The trial enrolled 691 patients across all arms (including ~30 patients on NCX 470 0.065% in the adaptive design part)







Baseline Characteristics, Demographics and Disposition¹

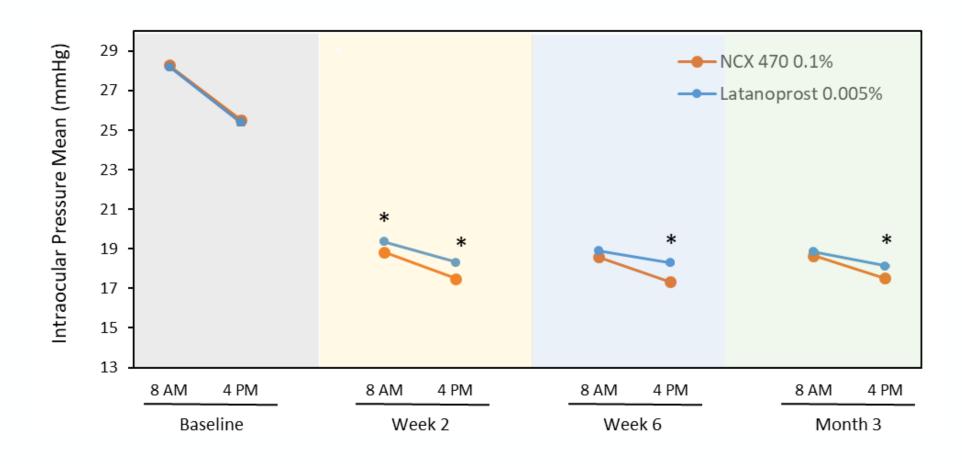
	NCX 470 0.1% N = 328	Latanoprost 0.005% N = 333
Mean Diurnal Baseline (8am+4pm) IOP, mmHg, Study Eye (SD)	26.9 (2.04)	26.8 (2.02)
Gender, n (%) Female Male	200 (61.0%) 128 (39.0%)	188 (56.5%) 145 (43.5%)
Age, Years (SD)	63.6 (10.12)	62.7 (11.73)
Completed the Study	314 (95.7%)	316 (94.9%)
Discontinued Prior to Study Completion	14 (4.3%)	17 (5.1%)
Reasons for Discontinuation		
Adverse Event	8 (57.1%)	6 (35.3%)
Lost to Follow-up	1 (7.1%)	4 (23.5%)
Physician Decision	0	0
Sponsor or IRB Decision	1 (7.1%)	2 (11.8%)
Protocol Violation	0	1 (5.9%)
Withdrawal by Subject	3 (21.4%)	3 (17.6%)
IOP greater than 36 mmHg	0	0
Other	1 (7.1%)	1 (5.9%)





Significant, sustained IOP-lowering effects

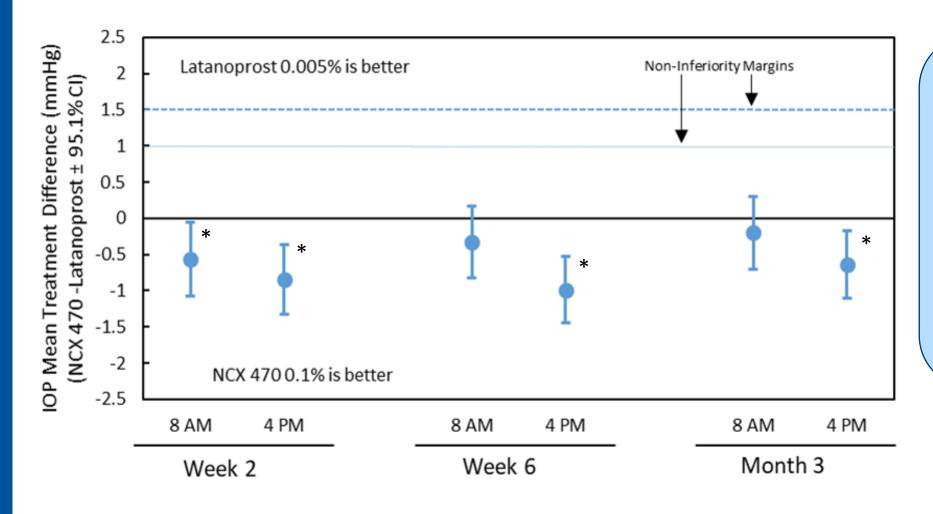
IOP-lowering effect from baseline was 8.0 to 9.7 mmHg for NCX 470 vs. 7.1 to 9.4 mmHg for latanoprost







NCX 470 0.1% achieved non-inferiority and demonstrated an IOP Lowering greater than Latanoprost 0.005% of up to 1.0mmHg



To be non-inferior, the treatment difference between NCX470 and latanoprost had to meet BOTH criteria:

- For all 6 timepoints, the upper limit of all confidence intervals (95.1%) were required to be less than or equal to 1.5 mmHg and
- At least 4 of the 6 timepoints were required to be less than or equal to 1.0 mmHg



^{*} Denotes statistically significant differences vs latanoprost (p<0.049)



NCX 470 Topline Results Demonstrate Robust Efficacy and Safety¹

All comparisons are based on NCX 470 0.1% and latanoprost 0.005%

IOP-lowering effect from baseline was 8.0 to 9.7 mmHg for NCX 470 vs. 7.1 to 9.4 mmHg for latanoprost

Statistical non-inferiority was met vs. latanoprost in the primary efficacy analysis

This trial therefore met the efficacy requirements for approval in the United States

While NCX 470 failed to meet statistical superiority to latanoprost in a pre-specified secondary efficacy analysis of time-matched change from baseline IOP, NCX 470 was numerically superior to latanoprost at all time points and statistically significant (p<0.049) at 4 of 6 timepoints

NCX 470 was well tolerated

The most common adverse event was ocular hyperemia in 11.9% of NCX 470 patients vs. 3.3% of latanoprost patients

There were no ocular serious adverse events and no treatment-related non-ocular serious adverse events

4.3% of patients on NCX 470 discontinued compared to 5.1% on latanoprost





Retinal Benefits: A Potential Differentiator for NCX 470

Elevated IOP is the main risk factor in glaucoma, however a variety of IOP-independent risk factors, including ischemia, contribute to damage of the optic nerve head and the retina, ultimately causing vision loss

Initial exploratory studies generated encouraging results Exploratory nonclinical studies in a well-defined model with optic nerve head and retina damage (ET-1-induced ischemia/reperfusion) investigated the NCX 470 effects beyond IOP lowering

The results¹ suggest that NCX 470 improves ocular perfusion and retinal function in damaged eyes compared to vehicle and may therefore have protective properties

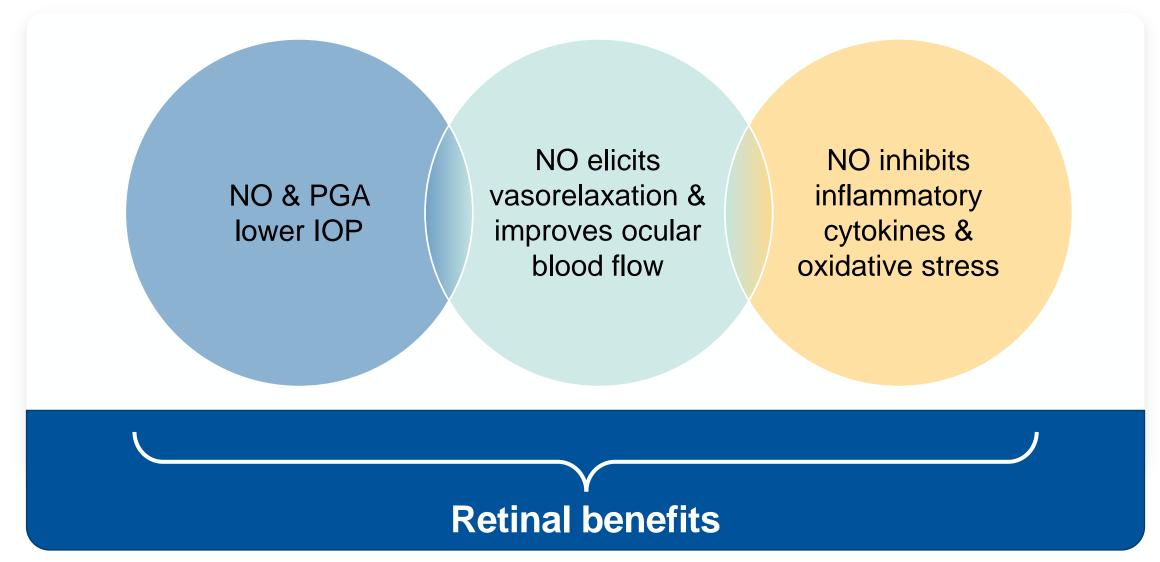
Next Steps

Nonclinical studies and targeted clinical trials are planned to further explore NCX 470's dual mechanism of action and potential benefits on the retina, beyond its IOP lowering properties





Why Nitric Oxide Could Generate Retinal Benefits



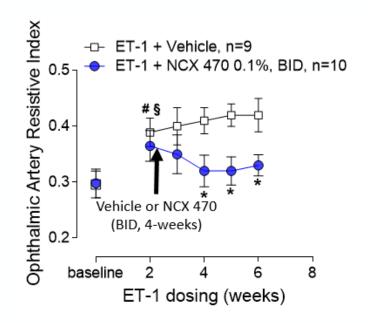




NCX 470 Shows Retinal Cell Protection in a Nonclinical Model¹

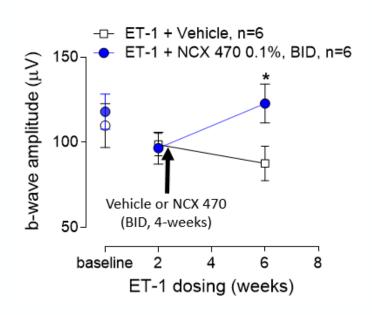
Improved ocular perfusion and retinal function in damaged eyes





Detrimental effect of ET-1 on ophthalmic artery hemodynamics was significantly reversed in eyes receiving NCX 470 0.1% bid (p<0.05 vs. vehicle at week 6)

Retinal function (Scotopic Electroretinogram - rod/cone responses)



Photoreceptor response decline induced by ET-1 was almost completely reversed in eyes treated with NCX 470 0.1% bid (p<0.05 vs. vehicle at week 6)





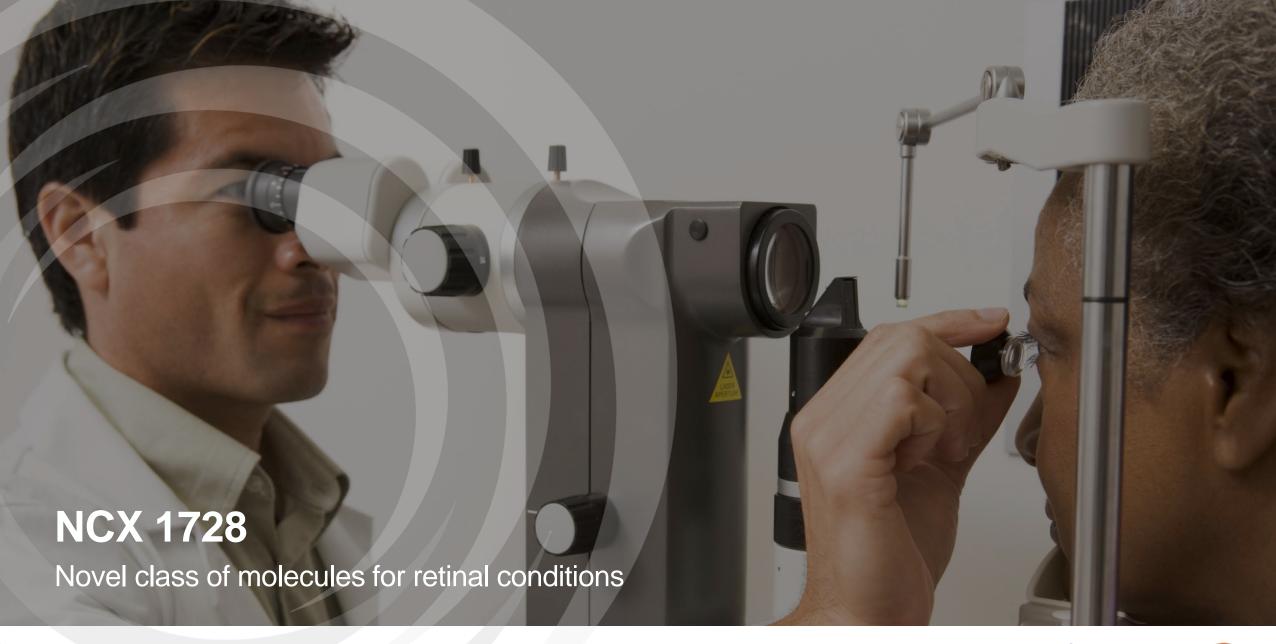
Phase 3b Trials to Further Evaluate NCX 470 Planned for H1 2023

Episcleral Pressure Study: Nitric oxide has been shown to induce vasodilation. NCX 470's ability to lower episcleral venous pressure as well as enhance outflow through the trabecular meshwork will be evaluated in a clinical trial

OCT Study: Retinal blood vessel density will be studied in a separate clinical trial using Optical Coherence Tomography (OCT)-angiography to fully understand the potential effects on retinal blood flow

Together, these trials are designed to validate NCX 470's dual mechanism of action in humans and potentially demonstrate some of the beneficial effects on the retina that have been observed in nonclinical models.









NCX 1728: Lead Compound in a New Class of NO-donating Molecules

Combining NO-release with PDE5

MOA* for this novel class of molecules is based entirely on NO-mediated activity NO-mediated effects are enhanced and prolonged by concomitant phosphodiesterase-5 (PDE5) inhibition within the same molecule

Potential in retinal conditions

NO plays a pivotal role in ocular blood flow which may be beneficial in a number of retinal conditions where dysfunctional ocular perfusion and neovascularization are key features in disease progression

Nonclinical program focused on evaluating MOA

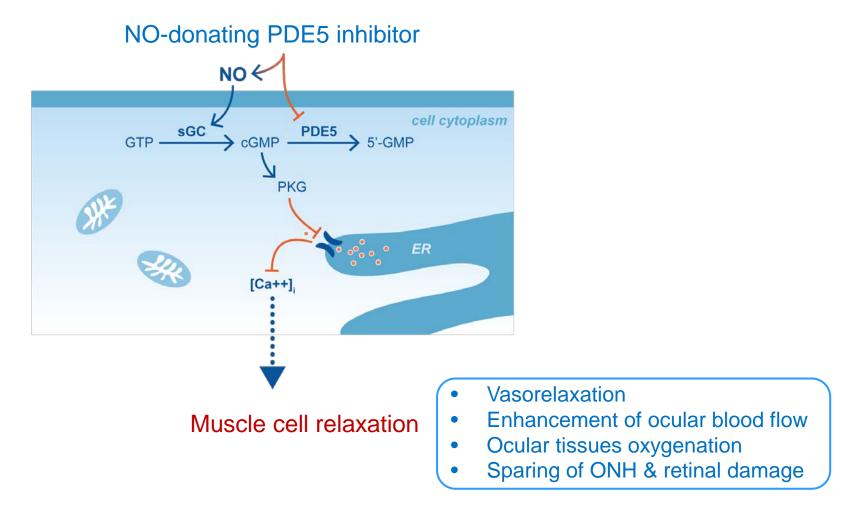
Nonclinical studies underway to further explore therapeutic potential of this molecule and its efficacy in disease progression



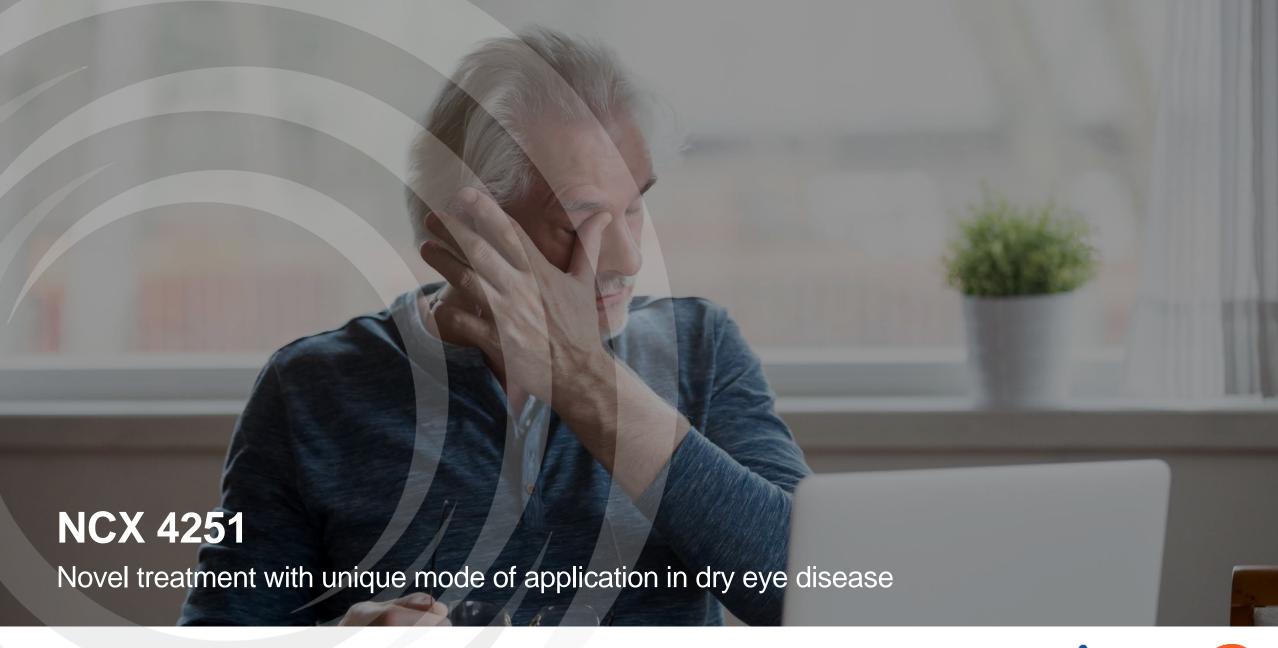


Nitric oxide (NO)-donating phosphodiesterase type 5 (PDE-5) inhibitors

Cellular/molecular mechanism











NCX 4251: Novel Approach to Dry Eye Disease

Novel corticosteroid presentation leverages Nicox's unique formulation expertise

Novel, patented ophthalmic nanocrystal suspension of fluticasone propionate, a well-established corticosteroid. Fluticasone has 10x affinity for the glucocorticoid receptor vs. dexamethasone, commonly used in ophthalmology

Planned to be the first topical ophthalmic fluticasone product, a two-week, once-daily treatment leveraging Nicox's proprietary formulation technology

Targeting dry eye disease, a \$3.4 billion prescription market in the U.S.

Eye Care Professionals require improved short-term treatment for flares and bridging to chronic therapy

Unique delivery device applies drug directly to the eyelid margin, potentially reducing steroid sideeffects

Phase 2 trial supports potential clinical utility in dry eye disease

Post-hoc analysis of 224-subject Phase 2b Mississippi trial showed a statistically and clinically significant reduction in dry eye symptoms versus placebo

Nicox reached alignment with U.S. FDA on a 505(b)(2) development path for NCX 4251 and is currently looking for partnerships outside of China to advance development of this program

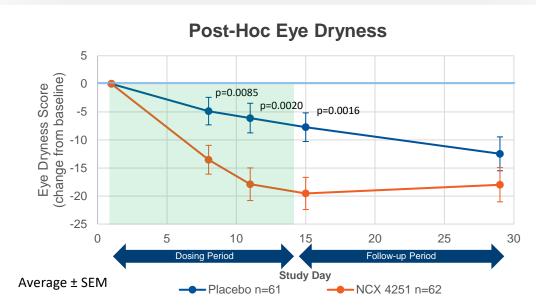




Mississippi¹: Phase 2b Post-Hoc Results Puts Dry Eye Disease in Sight



Unique eyelid margin application designed to minimize corticosteroid-induced ocular adverse events



Reduction from baseline in eye dryness score² in patients with inferior corneal fluorescein staining score of ≥ 2

Overall Summary – The trial evaluated NCX 4251 in patients with acute exacerbations of blepharitis. NCX 4251 was found to be safe and well tolerated over 14 days with no serious adverse events (all events in the NCX 4251 arm were mild). Topline results of the trial did not meet primary endpoint

Post-hoc results from the trial suggest NCX 4251 may be effective in dry eye disease:

 Patients with a baseline score of ≥ 2.0 (on a scale of 0 to 4) for fluorescein staining demonstrated a statistically significant difference in change from baseline vs. placebo for eye dryness score and several other symptoms



[.] Mississippi: U.S. Multi-Center, Randomized, Double-Masked, Placebo-Controlled, Phase 2b Study Evaluating the Safety and Efficacy of NCX 4251 Ophthalmic Suspension, 0.1% QD for the Treatment of Acute Exacerbations of Blepharitis. Clinical Trials.gov Identifier: NCT04675242







Mont Blanc Phase 3 Results May Bring NCX 470 Closer to U.S. Approval

Glaucoma:
An established
\$5.9Bn worldwide,
\$2.9Bn U.S. market¹

Approximately 3 million patients in the United States with open angle glaucoma²
First line, prostaglandin-based therapies represent a \$1.3 billion opportunity in the U.S. alone¹
40% of patients on existing monotherapies fail to reach target IOP, risking disease progression and vision loss

Positive Phase 3 results are a major milestone for Nicox

First Phase 3 trial demonstrated non-inferiority of NCX 470 to latanoprost³

Statistical superiority to latanoprost was not achieved. However, NCX 470 was statistically superior to latanoprost in IOP reduction from baseline at 4 of the 6 timepoints, and numerically greater at all 6 timepoints

Next Steps on the path to NDA submission

Complete analysis of the Mont Blanc trial data

Complete enrollment in the ~670 subjects/~60 sites (United States & China) Denali trial Denali topline results expected in 2025⁴

- IQVIA Analytics Link 2021
- 2. https://www.cdc.gov/features/glaucoma-awareness/index.html
- Nicox Press Release 31 October 2022
- 4. The topline results date of 2025 for the Denali trial is based on projections of increased recruitment which take notably into account the lifting of COVID-19 restrictions in China





Partnering Deals Include Potential Future Payments & Royalties



Potentially differentiated treatment for IOP lowering

6% to 12% royalties on future net sales¹ in China and Southeast Asia

Ocumension pays 50% of the Denali Phase 3 clinical trial costs

Company is exploring commercial partnerships for both the U.S. and Japan



First eye drop for glaucoma approved in 20 years with a novel approach to reduce IOP

Entitled to \$5 million net milestone at \$100 million net sales

6% to 12% net² royalties on global sales







First and only eye drop formulation of cetirizine for allergic conjunctivitis

Phase 3 completed by Ocumension³ in China: Potential for up to \$17.2 million in sales milestones plus 5% to 9% royalties on net sales

Commercialized by Eyevance (a wholly-owned subsidiary of Santen Pharmaceutical Co.) in the U.S.

NCX 4251



Novel treatment with unique mode of application in dry eye disease

Potential for up to \$11.3 million in future milestones plus 5% to 10% royalties on net sales in China by Ocumension⁴

Company is looking for partnerships outside of China to advance development of this program

- 1. Ocumension has rights in Chinese, SE Asian markets and Korea
- 2. Net of royalties payable to Pfizer, per the terms of the contract signed with Pfizer in August 2009
- Ocumension has rights in Chinese and SE Asian markets
- 4. Ocumension has rights in Chinese markets





Financial Highlights

Cash balance expected to support current operations through Q2 2024

Estimated Financial Position and Ownership as of December 31, 2022¹

Cash, Cash Equivalents	€27.7 million	
Long term debt ²	€24.7 million	
Cash runway ³	Q2 2024	
Outstanding Shares ⁴	50.1 million	
Management and Employees Ownership ⁵	<2%	
Key Institutional Investors	Armistice Capital 9.8% HBM Healthcare Investments (Cayman) 5.0%	
Bryan Garnier	Eric Yoo	
Edison Investment Research	Pooya Hemami	
H.C. Wainwright	Yi Chen	
Kepler Cheuvreux	Arsene Guekam	





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Value-Creating Milestones

Building a high-value ophthalmology pipeline



October 2022

NCX 470 Mont Blanc Phase 3 topline results

Throughout 2023

Communication of Mont Blanc results at key ophthalmology congresses

2025¹

NCX 470 Denali Phase 3 (enrolling); topline results

H₁ 2023

Initiation of Phase 3b clinical trials evaluating NCX 470 MOA* and potential beneficial effects on the retina

2024

New nonclinical and clinical data on NCX 470 MOA* and potential beneficial effects on the retina





In progress



Future







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