UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM 8-K

CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): April 03, 2023

Sight Sciences, Inc.

(Exact name of Registrant as Specified in Its Charter)

Delaware	**001-40587**	**80-0625749**
(State or Other Jurisdiction of Incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**

4040 Campbell Avenue **Suite 100** **Menlo Park, California**	**94025**
(Address of Principal Executive Offices)	**(Zip Code)**

Registrant's Telephone Number, Including Area Code: 877 266-1144

N/A
(Former Name or Former Address, if Changed Since Last Report)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	**Trading Symbol(s)**	**Name of each exchange on which registered**
Common Stock, $0.001 par value per share	SGHT	The Nasdaq Global Select Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company ☒

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 5.02 Departure of Directors or Certain Officers; Election of Directors; Appointment of Certain Officers; Compensatory Arrangements of Certain Officers

Appointment of Chief Financial Officer and Treasurer

Effective April 3, 2023, Alison Bauerlein was appointed by the Board of Directors (the "Board") of Sight Sciences, Inc. (the "Company") to serve as the Company's Chief Financial Officer and Treasurer. Ms. Bauerlein will also serve as the Company's Principal Financial Officer and Principal Accounting Officer.

Ms. Bauerlein, age 41, co-founded Inogen, Inc. (Nasdaq: INGN) ("Inogen"), a medical technology company, in 2001, and previously served as Inogen's Executive Advisor from December 2021 to April 2022, and Chief Financial Officer, from 2009 until December 2021. Ms. Bauerlein also served as Inogen's Executive Vice President of Finance from March 2014 until December 2021, Corporate Secretary from 2002 until July 2021, and Corporate Treasurer from 2002 until December 2021. Ms. Bauerlein has served as a member of the board of directors, and a member of the audit committee, of Pear Therapeutics, Inc. (Nasdaq: PEAR) ("Pear"), a software-based digital therapeutics company, since December 2021, as a member of the board of directors, and a member of the audit committee, of Gelesis Holdings, Inc. (NYSE: GLS), a biotherapeutics company, since January 2022, and as a member of the board of directors of Koya Medical, Inc., a private company, since January 2021. Ms. Bauerlein has over 20 years of experience in treasury, finance, accounting, and risk management, as well as strategic and tactical cost analysis and forecasting. Ms. Bauerlein received a B.A. in economics/mathematics with high honors from the University of California, Santa Barbara.

In connection with Ms. Bauerlein's appointment as Chief Financial Officer and Treasurer, Ms. Bauerlein entered into an employment agreement with the Company (the "Employment Agreement"), effective April 3, 2023. Pursuant to the terms of the Employment Agreement, Ms. Bauerlein will receive an initial annual base salary of $410,000 (such annual base salary, as may be adjusted by the Board from time to time, the "Base Salary") and will be eligible to receive an initial annual cash bonus, targeted at 50% of the Base Salary (such target, as may be adjusted by the Board from time to time, the "Annual Bonus").

If Ms. Bauerlein's employment is terminated by the Company without cause, or Ms. Bauerlein resigns from the Company with good reason, the Company shall: (a) pay Ms. Bauerlein an amount equal to the Base Salary for the subsequent 12-month period, (b) pay Ms. Bauerlein an amount equal to any unpaid Annual Bonus earned for the year prior to the year of termination, payable when annual bonuses for such year are paid to other executives of the Company, and (c) make direct payment of, or reimbursement for, the Consolidated Omnibus Budget Reconciliation Act of 1985, as amended ("COBRA") premiums, less the amount the Ms. Bauerlein would have paid for coverage as an active employee, commencing on Ms. Bauerlein's separation date and ending upon the earliest of: (i) the expiration of the subsequent 12-month period, (ii) the date Ms. Bauerlein and/or her dependents become no longer eligible for COBRA, or (iii) the date Ms. Bauerlein becomes eligible to receive benefits from a subsequent employer.

Under the Employment Agreement, "cause" generally means, subject to notice and cure rights, an executive officer's: (a) refusal to substantially perform duties or carry out reasonable and lawful instructions concerning duties, (b) material breach of a policy of the Company, provision of the employment agreement or any other material agreement between the executive officer and the Company, (c) conviction, plea of no contest, plea of nolo contendere, or imposition of unadjudicated probation for any felony or crime involving moral turpitude, (d) unlawful use or possession of illegal drugs on the Company's (or any of its affiliate's) premises or while performing the executive officer's duties and responsibilities under the employment agreement, or (e) commission of an act of fraud, embezzlement, misappropriation, willful misconduct or breach of fiduciary duty against the Company or any of its affiliates.

Under the Employment Agreement, "good reason" generally means, subject to notice and cure rights, (a) a reduction in Annual Base salary or target Annual Bonus, (b) a material decrease in authority or areas of responsibility, (c) the relocation of the executive officer's primary office to a location more than 35 miles from the executive officer's primary office as of the date of the Employment Agreement, (d) the failure of any successor of all or substantially all of the Company's assets to assume the Employment Agreement, to the extent such assumption does not occur automatically by operation of law, or (e) the Company's breach of a material provision of the Employment Agreement.

The foregoing description of the Employment Agreement does not purport to be complete and is subject to and qualified in its entirety by reference to the full and complete text of the Employment Agreement, attached as an exhibit to the Company's Quarterly Report on Form 10-Q, which will be filed on or around May 15, 2023.

Additionally, in connection with Ms. Bauerlein's appointment as Chief Financial Officer and Treasurer, the Board approved the following grants to Ms. Bauerlein: (a) an Option (as defined in the Company's 2021 Incentive Award Plan (the "Plan")) to purchase 71,800 shares of the Company's common stock, par value $0.001, and (b) an award of 103,000 restricted stock units subject to the terms and conditions of the Plan. Ms. Bauerlein has also entered into the Company's standard indemnification agreement for directors and officers.

Ms. Bauerlein has no family relationships with any director or executive officer of the Company. There are no arrangements or understandings between Ms. Bauerlein and any other person pursuant to which Ms. Bauerlein was appointed as an executive officer. Additionally, there are no transactions involving Ms. Bauerlein that would require disclosure under Item 404(a) of Regulation S-K.

Resignation of Interim Chief Financial Officer and Treasurer

In connection with Ms. Bauerlein's appointment as Chief Financial Officer and Treasurer, Jim Rodberg will no longer serve as interim Chief Financial Officer, interim Treasurer, Principal Financial Officer or Principal Accounting Officer, effective immediately.

Item 7.01 Regulation FD Disclosure.

On April 3, 2023, the Company issued a press release announcing the appointment of Ms. Bauerlein and the resignation of Mr. Rodberg as discussed above. A copy of the press release is furnished as Exhibit 99.1 to this Current Report on Form 8-K (this "Current Report") and is incorporated into Item 7.01 by reference.

On April 3, 2023, the Company posted an investor presentation to its website at https://investors.sightsciences.com/. The Company expects to use the investor presentation, in whole or in part, in connection with presentations to investors, analysts and other interested parties. A copy of the investor presentation is furnished as Exhibit 99.2 to this Current Report.

The information in Item 7.01 of this Current Report, including Exhibit 99.1 and 99.2 attached hereto, is being furnished and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that section. Such information shall not be deemed incorporated by reference into any filing of the Company under the Securities Act of 1933, as amended, or the Exchange Act, whether made before or after the date hereof, regardless of any general incorporation language in such filing, except as otherwise expressly set forth by specific reference in such filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits

Exhibit No.	**Description of Exhibit**
99.1	Press Release dated April 3, 2023.
99.2	Sight Sciences, Inc. Investor Presentation dated April 3, 2023.
104	Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Sight Sciences, Inc.

Date: April 3, 2023

By: /s/ Paul Badawi
President and Chief Executive Officer

Exhibit 99.1

Sight Sciences Appoints Ali Bauerlein as Chief Financial Officer

MENLO PARK, Calif. - April 3, 2023 - (GLOBE NEWSWIRE) -- Sight Sciences, Inc. (Nasdaq: SGHT) ("Sight Sciences" or the "Company"), an eyecare technology company focused on creating innovative solutions intended to transform care and improve patients' lives, today announces the appointment of Alison "Ali" Bauerlein as its Chief Financial Officer and Treasurer, effective April 3, 2023.

"I am incredibly excited to have Ali join Sight Sciences as we scale our business and drive towards profitable growth. Ali is an exceptionally talented professional with a proven track record of leading a rapidly growing medtech organization through multiple phases of growth. Her experience and talent will provide an immediate and valuable impact," said Paul Badawi, co-founder and Chief Executive Officer of Sight Sciences. "A proven entrepreneur and executive, Ali will partner with our team to advance our strategic plan and ensure we have the appropriate financial infrastructure to support our growth. I would like to thank Jim Rodberg for his ever-increasing leadership and commitment to our mission as he stepped into the interim Chief Financial Officer and Treasurer role and managed the finance organization exceptionally well."

Ms. Bauerlein added, "Sight Sciences is a leader in eyecare technology innovation with a portfolio and pipeline of products disrupting two distinct multibillion dollar markets and generating top-tier revenue growth. I have firsthand experience with this stage of transformational growth and development and am excited to leverage my background in high growth medtech to help Sight Sciences achieve its fullest potential. I look forward to working with Paul and the Sight Sciences team to support our current growth and profitability plans, while improving the lives of our patients and striving to create maximum value for the ophthalmic community and our stockholders."

Ms. Bauerlein joins Sight Sciences from Inogen, Inc. ("Inogen"), a medical technology company offering innovative respiratory products for use in the homecare setting. Ms. Bauerlein cofounded Inogen in 2001 and served as its Chief Financial Officer from 2009 through 2021. In this role, Ms. Bauerlein oversaw the global finance and accounting functions, including revenue management, financial planning and analysis, strategic and tactical cost analysis and forecasting, treasury, U.S. Securities and Exchange Commission ("SEC") reporting, investor relations, business development, risk management, tax, and treasury functions, as Inogen scaled from start-up operations to over $350 million in annual sales. Ms. Bauerlein has served as a member of the board of directors of Pear Therapeutics, Inc. (Nasdaq: PEAR) ("Pear"), a software-based digital therapeutics company, since December 2021, and as a member of the board of directors of Gelesis Holdings, Inc. (NYSE: GLS) ("Gelesis"), a biotherapeutics company, since January 2022. She serves as chair of the Audit Committees of both Pear and Gelesis. Ms. Bauerlein has also served as a member of the board of directors of Koya Medical, Inc., a private company, since January 2021. Ms. Bauerlein received a B.A. in economics/mathematics with high honors from the University of California, Santa Barbara.

About Sight Sciences
Sight Sciences is an eyecare technology company focused on developing and commercializing innovative solutions intended to transform care and improve patients' lives. Using minimally invasive or non-invasive approaches to target the underlying causes of the world's most prevalent eye diseases, Sight Sciences seeks to create more effective treatment paradigms that enhance patient care and supplant conventional

outdated approaches. The Company's OMNI® Surgical System is a minimally invasive glaucoma surgery (MIGS) device indicated to reduce intraocular pressure in adult patients with primary open-angle glaucoma (POAG), the world's leading cause of irreversible blindness. The SION™ Surgical Instrument is a bladeless, manually operated device used in ophthalmic surgical procedures to excise trabecular meshwork. The Company's TearCare® System is 510(k) cleared in the United States for the application of localized heat therapy in adult patients with evaporative dry eye disease due to meibomian gland dysfunction (MGD), enabling office-based clearance of gland obstructions by physicians to address the leading cause of dry eye disease.

For more information, visit www.sightsciences.com.

Forward-Looking Statements

This press release, together with other statements and information publicly disseminated by the Company, contains certain forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended, which statements are subject to considerable risks and uncertainties. The Company intends such forward-looking statements to be covered by the safe harbor provisions for forward-looking statements contained in the Private Securities Litigation Reform Act of 1995 and includes this statement for purposes of complying with these safe harbor provisions. Any statements made in this press release that are not statements of historical fact, including statements about our beliefs and expectations, are forward-looking statements and should be evaluated as such. Forward-looking statements include all statements other than statements of historical fact, including statements concerning the perceived benefits of the Company's announced Chief Financial Officer appointment, and should be evaluated as such. These statements often include words such as "anticipate," "expect," "suggests," "plan," "believe," "intend," "estimates," "targets," "projects," "should," "could," "would," "may," "will," "forecast" and other similar expressions. We base these forward-looking statements on our current expectations, plans and assumptions that we have made in light of our experience in the industry, as well as our perceptions of historical trends, current conditions, expected future developments and other factors we believe are appropriate under the circumstances at such time. Although management believes these forward-looking statements are based upon reasonable assumptions at the time they are made, management cannot guarantee their accuracy or completeness. Forward-looking statements are subject to and involve risks, uncertainties and assumptions that may cause the Company's actual results, performance or achievements to be materially different from any future results, performance, or achievements predicted, assumed or implied by such forward-looking statements. Some of the risks and uncertainties that may cause actual results to materially differ from those expressed or implied by these forward-looking statements are discussed under the caption "Risk Factors" in the Company's filings with the SEC, as may be updated from time to time in subsequent filings. These cautionary statements should not be construed by you to be exhaustive and are made only as of the date of this press release. Sight Sciences undertakes no obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, except as required by applicable law.

Investor contact:
Philip Taylor
Gilmartin Group
415.937.5406
Investor.Relations@Sightsciences.com

SIGHT SCIENCES™

Delivering the **Power of Sight**

Investor Presentation

April 2023

Forward-Looking Statements

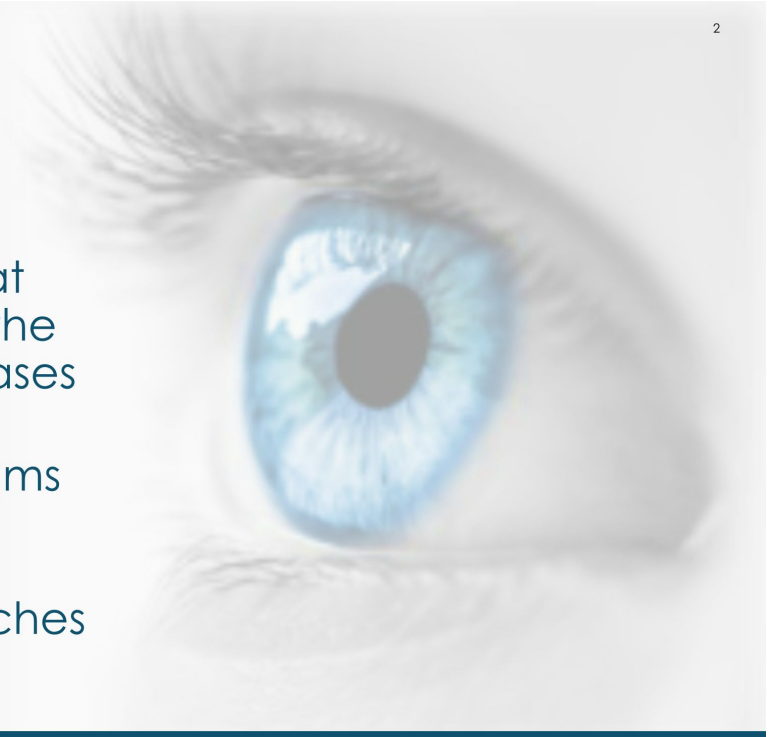
This press release, together with other statements and information publicly disseminated by the Company, contains certain forward-looking statements within the meaning of Section 27A of the Securities Act of 1933, as amended, and Section 21E of the Securities Exchange Act of 1934, as amended, which statements are subject to considerable risks and uncertainties. The Company intends such forward-looking statements to be covered by the safe harbor provisions for forward-looking statements contained in the Private Securities Litigation Reform Act of 1995. Forward-looking statements include all statements other than statements of historical fact, including statements regarding our future results of operations, product development, market opportunity, clinical trial results and timeline, and business strategy and plans. These forward-looking statements include, but are not limited to, statements concerning the following: estimates of the Company's total addressable market; the Company's ability to enter into and compete in new markets; the Company's ability to compete effectively with existing competitors and new market entrants; the Company's ability to scale our infrastructure; the Company's ability to manage and grow its business by expanding our sales to existing customers or introducing our products to new customers; the Company's ability to obtain and maintain regulatory approvals and clearances for its products that support its revenue projections, business strategies and growth; the Company's ability to successfully execute its clinical trial roadmap; and the Company's ability to obtain and maintain sufficient reimbursement for its products. These statements often include words such as "anticipate," "expect," "suggests," "plan," "believe," "intend," "estimates," "targets," "projects," "should," "could," "would," "may," "will," "forecast" and other similar expressions. Management bases these forward-looking statements on its current expectations, plans and assumptions affecting the Company's business and industry, and such statements are based on information available as of the time such statements are made. Although management believes these forward-looking statements are based upon reasonable assumptions, it cannot guarantee their accuracy or completeness. Forward-looking statements are subject to and involve risks, uncertainties and assumptions that may cause the Company's actual results, performance or achievements to be materially different from any future results, performance, or achievements predicted, assumed or implied by such forward-looking statements. Some of the risks and uncertainties that may cause actual results to materially differ from those expressed or implied by these forward-looking statements are discussed under the caption "Risk Factors" in the Company's filings with the U.S. Securities and Exchange Commission, as may be updated from time to time in subsequent filings. These cautionary statements should not be construed by you to be exhaustive and are made only as of the date of this press release. We undertake no obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, except as required by applicable law.

Certain information contained in this presentation relates to, or is based on, studies, publications, surveys and other data obtained from third-party sources and the Company's own internal estimates and research. While the Company believes these third-party sources to be reliable, it has not independently verified, and makes no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third-party sources. In addition, all of the market data included in this presentation involves a number of assumptions and limitations, and there can be no guarantee as to the accuracy or reliability of such assumptions. Finally, while the Company believes its own estimates and research are reliable, such estimates and research have not been verified by any independent source.

Our Mission

Transform Ophthalmology and Optometry through products that **target the underlying causes** of the world's most prevalent eye diseases

Establish new treatment paradigms and create an **interventional mindset in Eyecare** to replace conventional outdated approaches



Goal: Products that Restore Natural Functionality of Diseased Eyes to Deliver Consistent, Effective and Safe Outcomes for Patients

Surgical Glaucoma

Dry Eye

CURRENT PRODUCT PORTFOLIO

OMNI SURGICAL SYSTEM

TearCare System

3.4M Diagnosed U.S. patients

$6Bn U.S. TAM

>150k Cases Performed[1]

- Glaucoma is #1 cause of irreversible blindness
- Microinvasive Glaucoma Surgery (MIGS) is the leading innovation in primary open-angle glaucoma (POAG) treatment
- Underdeveloped Standalone MIGS segment represents $5 billion U.S. market opportunity
- OMNI® indicated to treat all severities of POAG in adults with or without concomitant cataract surgery
- Introduced innovative SION™ Surgical Instrument for bladeless goniotomy 3Q2022

14M Evaporative DED diagnosed U.S. patients

$10Bn U.S. TAM

>25k Cases Performed[1]

- Increasing dry eye disease (DED) prevalence linked to many prominent demographic, medical and sociological trends
- Meibomian gland disease (MGD) is associated with 86% of DED cases but severely undertreated in current DED practice
- Massive need for patient access to effective MGD treatments
- TearCare® indicated for patients with evaporative DED due to MGD

Additional products in development to build comprehensive portfolio of POAG and DED treatment options

1. As of December 31, 2022.

Strategic Value-Creation Initiatives

OMNI SURGICAL SYSTEM

Expand Presence in Established Combination Cataract MIGS Segment in POAG

- Continue gaining adoption among existing base of >5,700 MIGS-trained surgeons
- Continue penetrating Combination Cataract segment by leveraging superior efficacy of OMNI®
- Establish SIGN as best-in-class goniotomy device among targeted customer subsets
- More established market with compelling growth : $1BN U.S. TAM, ~1/3 penetrated

Develop and Grow Underserved Standalone MIGS Segment in POAG

- Significant untapped opportunity in 5x larger Standalone MIGS segment
- Enable surgeons to intervene earlier in disease progression with minimally invasive procedure, treating patients not requiring cataract surgery
- Expand use by existing OMNI-trained surgeons from Combination Cataract cases to Standalone cases
- Educate POAG community regarding earlier potential Standalone interventions, help connect with OMNI-trained surgeons

TearCare® System

Develop Market Access for TearCare® Procedures

- Long term strategy with multiple complementary elements
- SAHARA RCT versus Restasis® – designed with input from eight payor medical directors to demonstrate effectiveness and durability
- Increase real-world usage and claims submissions
- December 2021 FDA clearance expanded indication for use
- Convert existing Category III CPT code (0563T) to permanent Category I code

Bedrock of Clinical Excellence: numerous completed, ongoing and planned trials in POAG and DED

SIGHT SCIENCES™

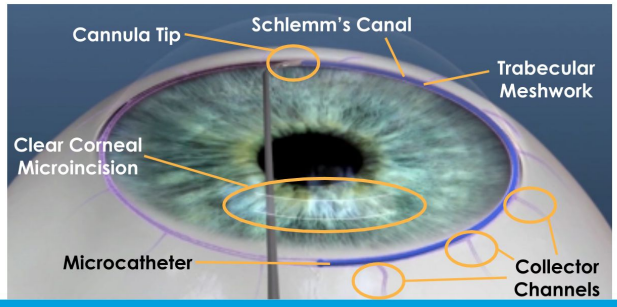
SURGICAL GLAUCOMA

OMNI™ SURGICAL SYSTEM

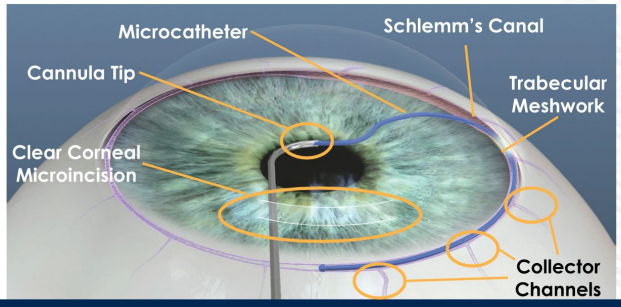
OMNI: Leading Indication for Use for Both Combination Cataract and Standalone MIGS

"for canaloplasty (microcatheterization and transluminal viscodilation of Schlemm's canal) followed by trabeculotomy (cutting of trabecular meshwork) to reduce intraocular pressure (IOP) in adult patients with primary open–angle glaucoma"

- Conventional *ab externo* canaloplasty and trabeculotomy procedures are effective, but invasive (deep scleral incisions) and can be associated with significant complications + longer recovery times
- OMNI enables two sequential, *ab interno* MIGS procedures up to 360° each in adults with POAG – intuitive, minimally invasive, performed through a single clear corneal microincision



Canaloplasty using OMNI



Trabeculotomy using OMNI

OMNI®: Comprehensive Mechanisms of Action

We believe OMNI is singularly well-suited among MIGS devices to comprehensively address **all 3 primary points** of resistance in the conventional outflow pathway

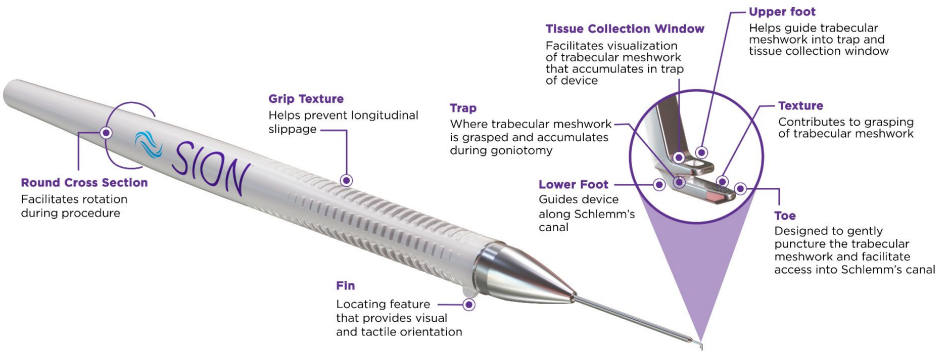
Canaloplasty using OMNI expands and dilates **Schlemm's canal and collector channels**

Trabeculotomy using OMNI unroofs the **trabecular meshwork**

	① TRABECULAR MESHWORK	② SCHLEMM'S CANAL	③ COLLECTOR CHANNELS
Trabecular Bypass Stents	✓		
Canaloplasty Only		✓	✓
Trabeculotomy Only	✓		
OMNI®	✓	✓	✓

We believe (i) there is NO diagnostic to determine where the resistance is in the conventional outflow pathway and (ii) OMNI® is singularly well-suited to address all 3 primary points of resistance

Bladeless Goniotomy



SION™
Surgical Instrument

Innovative design **bladelessly** excises diseased trabecular meshwork across **several clock-hours**

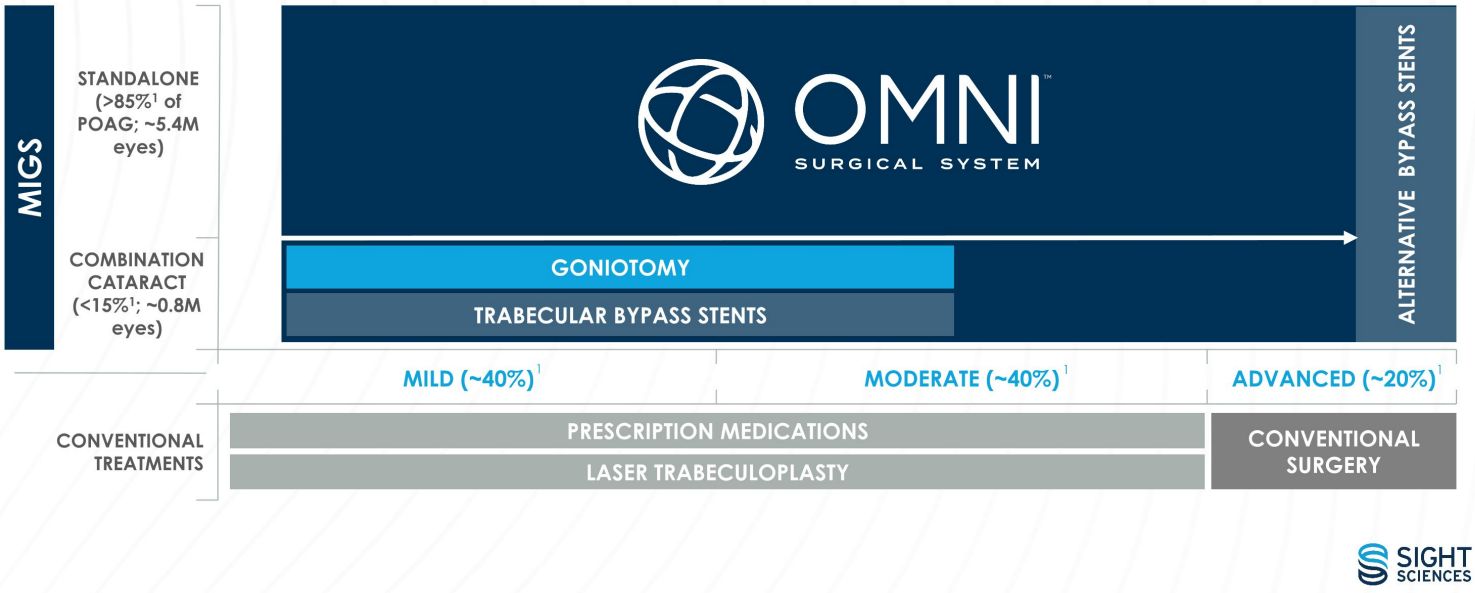
Fully meets AAO definition of **goniotomy**, aligns with Category I **CPT code 65820**

Targeting specific subsets of customers; minimal expected overlap with OMNI

Designed in-house; microengineered & precision-manufactured using specialized lasers

Enabling an Interventional Mindset in POAG

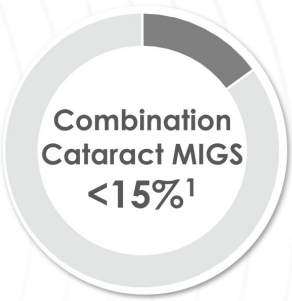
Surgeons can use OMNI® to intervene across a broad population of POAG patients

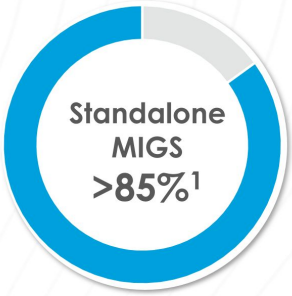


SIGHT SCIENCES

1. Represents estimated % of U.S. POAG patients.

OMNI®: Customizable to All 6 MIGS Categories in POAG





Mild Disease (40%)[1]	Moderate Disease (40%)[1]	Advanced Disease (20%)[1]
360° Canaloplasty alone[2] or Goniotomy	360° Canaloplasty + 90° - 180° Trab	360° Canaloplasty + 180° - 360° Trab
360° Canaloplasty + 90° - 180° Trab	360° Canaloplasty + 180° Trab	360° Canaloplasty + 360° Trab

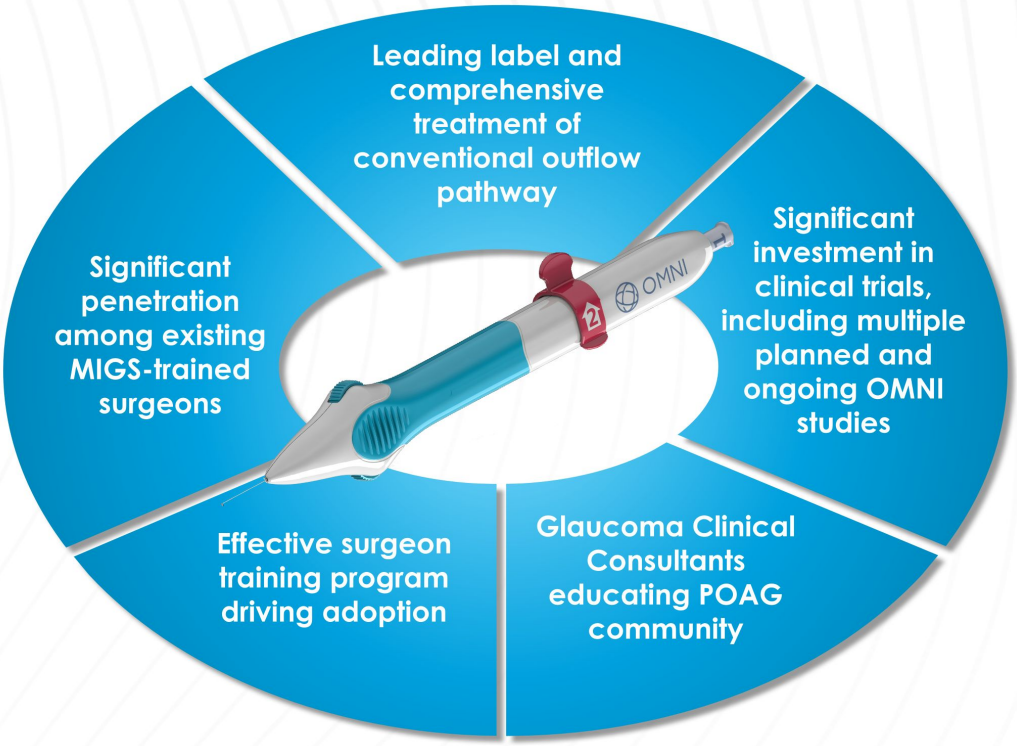
OMNI SURGICAL SYSTEM

Primary Distinguishing Treatment Requirements for MIGS Procedures:

Low Risk of Hyphema | Consistency of Efficacy | Degree of Efficacy

1. Represents estimated % of U.S. POAG TAM.
2. OMNI canaloplasty alone indication for use is currently investigational in the U.S.

Pieces in place to deliver the benefits of Standalone



OMNI efficacy, consistency and safety
+
Strong & growing base of adopted surgeons
+
Patient demand for better treatment alternatives
+
Methodical market education initiative

Development of Standalone MIGS Underway with OMNI

Convert >5,700 **MIGS-Trained Surgeons** to OMNI

Exceptional customer experience; hands-on training in dry labs and OR

~2,300 surgeons trained to use OMNI

Penetrate Existing **Combination Cataract** MIGS

Surgeons begin using OMNI in CC cases that are already on their schedule

941 ordering accounts in 2022Q4

Develop + Grow Underserved **Standalone** MIGS

Educate patients and primary care eye doctors

Work with OMNI customers to increase Standalone usage

85% of glaucoma patients would be likely to get a Standalone intervention with OMNI if recommended by their doctor[1]

Surgical Sales Representatives: train and support surgeons at ASCs and HOPDs
+
Strategic Account Managers: train and support surgeons at teaching institutions, VA hospitals

Glaucoma Clinical Consultants: educate POAG community about potential benefits of Standalone interventions

1. Company market research.

OMNI® Robust Clinical Roadmap

MIGS Clinical Program

ROMEO (Completed)

- 12-month multi-center retrospective real world study
- **Elevated baseline IOP group**: significant reduction in IOP and medications
- **Controlled baseline IOP group**: IOP controlled, significant reduction in medications
- Compelling and consistent data supported broad FDA cleared indication

GEMINI (Completed)

- 12-month multi-center prospective, historic controlled
- N=150, Mild-to-Moderate, CC
- Significantly reduced IOP, medication use and daily fluctuations in IOP
- Outcomes confirmed by results from Hispanic subset
- Three published articles in peer-reviewed journals

TREY (Completed)

- Multi-center retrospective real world study
- Standalone OMNI procedure in patients with a history of trabecular bypass stent + uncontrolled IOP
- Published in *International Ophthalmology*

Ongoing and Planned Trials

- Targeted clinical program to meet specific commercial needs
- PRECISION IDE for canaloplasty alone indication for use
- Prospective and real-world study designs
- Standalone and Combination Cataract

Note: Clinical trials, including their design, endpoints and timing, are subject to change at the Company's discretion. Initial results may include preliminary data and interim analyses that are subject to change.

SIGHT SCIENCES™

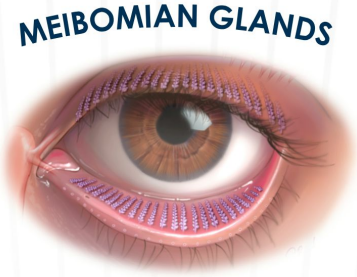
Dry Eye Disease

TearCare® System

Dry Eye Disease and Meibomian Gland Dysfunction

Dry Eye Disease (DED) can be extremely painful and can lead to permanent cornea damage and vision impairment

- MGD is present in the vast majority of diagnosed dry eye cases, linked to many prominent demographic, medical and sociological trends
- Clogged glands prevent **meibum**, an oily secretion that **protects tears from premature evaporation**, from reaching the tear
- DED treatment historically focused on aqueous deficiency and inflammation



86%	38	$10 Bn	0%
of DED caused by MGD	million affected in U.S. (14 million diagnosed evaporative DED)	U.S. TAM, hugely underserved	meaningful reimbursement for MGD procedures

Our Solution: TearCare®

The Only Wearable Eyelid Technology designed to melt + remove meibomian gland obstructions

Eyelid Therapy for Evaporative Dry Eye

- In patients with MGD, meibum hardens within the meibomian glands and forms obstructions
- TearCare delivers software and sensor-controlled, precise (41° C at the inner eyelid) and consistent (15 minutes) heat that has been clinically proven to melt gland obstructions
- Enables manual gland clearance by an ECP

Intuitive Design

- Designed for intuitive provider training and comfortable patient experience
- SmartLids™ are designed to conform to variable eyelid anatomy and heat glands to a steady temperature while allowing natural blinking

TearCare® Cleared by FDA December 2021

Supported by favorable safety and efficacy data from our OLYMPIA RCT

December 2021 Indication for Use

"For the application of localized heat therapy in adult patients with evaporative DED due to MGD, when used in conjunction with manual expression of the meibomian glands"

Considerable benefits from expanded indication for use

Backed by **robust clinical data from OLYMPIA study**; specifically mentions **heat therapy** and **manual expression**

Enhances promotional capabilities: marketing collateral and sales reps can now explicitly **address all key attributes** of the TearCare System

Allows patients and ECPs to have more **intuitive understanding** of the TearCare System's ability to treat DED due to MGD

Key step toward achieving ultimate IFU goal: **treat signs and symptoms of DED due to MGD**

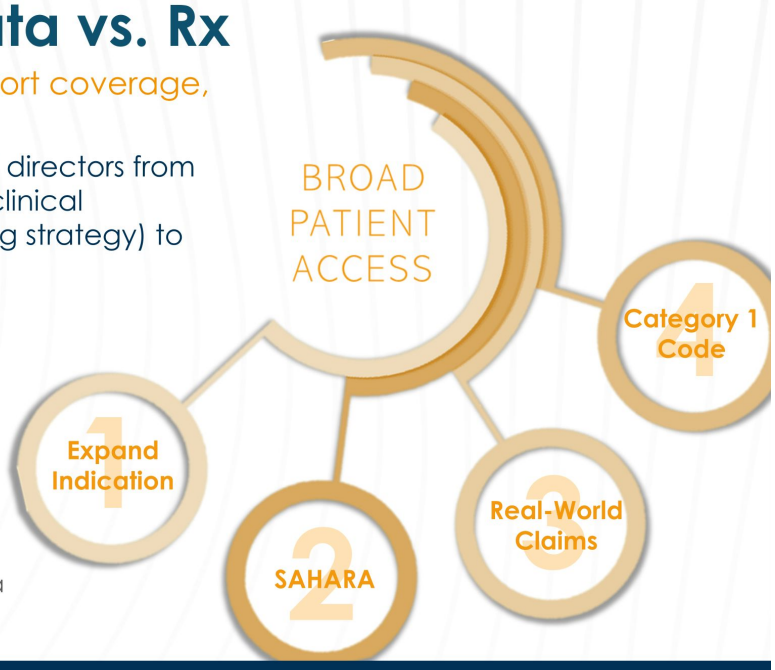
Support Patient Access Strategy with Expanded Label and RCT Clinical Data vs. Rx

Clinical and real-world data intended to support coverage, coding and payment

Payor research: conducted eight 1:1s with medical directors from national and regional payors for feedback on our clinical programs (e.g., endpoints, value, messaging, pricing strategy) to drive patient access

Key Steps to Patient Access:

- Expand indications for use – ultimate IFU goal: "treat the signs and symptoms of evaporative DED due to MGD"
- Conduct SAHARA RCT, designed to provide key clinical data to support potential reimbursement decisions by third-party payors
- Utilize real-world prior authorization and claims data to demonstrate the value of TearCare® to payors
- Convert temporary Category III CPT code for TearCare to a permanent Category I CPT code



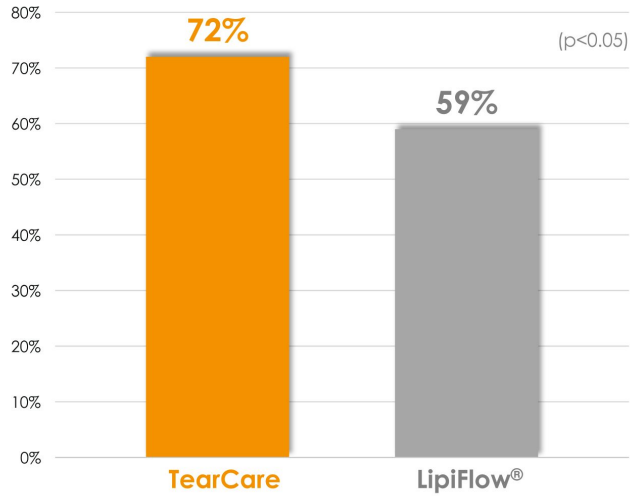
Goal: broad coverage and appropriate payment from private payors and Medicare for treating DED due to MGD

The OLYMPIA RCT

Head-to-head versus MGD device (LipiFlow®)

- Objective: To study effectiveness and safety of the TearCare System compared to LipiFlow® in reducing the signs and symptoms of DED
- Prospective multi-center (10 sites), randomized controlled, masked
- 135 total subjects
- Completed with **favorable results:**
  - Primary endpoint of non-inferiority to Lipiflow® met and no statistically significant differences between TearCare and LipiFlow® observed
  - A single use of TearCare **successfully reduced signs and symptoms of DED w/in 2 weeks**
  - In a post-hoc analysis, a **significantly greater proportion of patients in the TearCare group showed improvements in at least one OSDI category from baseline** compared to LipiFlow®

Improvement by at least 1 OSDI category



Gupta P. TearCare for the Treatment of Meibomian Gland Dysfunction in Adult Patients With Dry Eye Disease: A Masked Randomized Controlled Trial. Cornea: September 29, 2021 doi: 10.1097/ICO.0000000000002837

OLYMPIA RCT (Completed)

The SAHARA RCT

Head-to-head vs. market leading DED Rx eyedrop

- Multi-center U.S. RCT; enrollment ongoing
- 24-month study period (n = 300)
- Designed with input from 8 payor medical directors with goal of driving reimbursement and coverage
- Goal: demonstrate safety and effectiveness of TearCare® procedures compared to Restasis® to treat the signs and symptoms of dry eye disease in adult patients
  - 6-month period to study superiority to 2x / day use of Restasis®
  - 18-24 month durability study period (Restasis® group crosses over)
  - Primary outcome measures: tear break-up time, OSDI score

SAHARA RCT (ongoing)

2021

First patient, first visit 2Q 2021

2022

Enrollment completed 3Q 2022

2023

6-month read out of superiority endpoint expected 2H 2023

2024-25

12-month results expected 2H 2024
24-month results expected 2H 2025

Note: Clinical trials, including their design, endpoints and timing, are subject to change at the Company's discretion. Initial results may include preliminary data and interim analyses that are subject to change.

TearCare® Controlled Release

Executing a **controlled release** of TearCare with ~10 direct outside sales reps since April 2019 (expanded to ~20 3Q 2022)

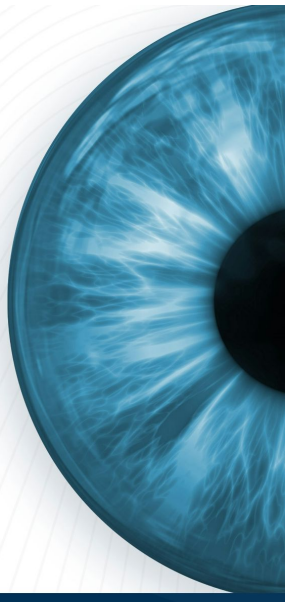
Successful patient-pay adoption

- **1,042 facilities** added (through 12/31/2022); sizable base of steady **reordering accounts**
- Nine consecutive quarters with sequential revenue growth

Fair Access campaign launched April 2022 to engage physician and patient stakeholders to support insured access with fair physician reimbursement

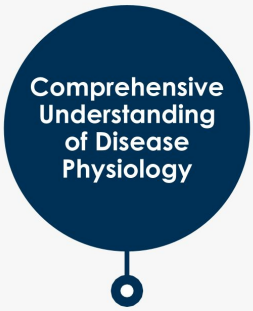
SIGHT SCIENCES™

Delivering the
Power of Sight



New Product Overview

Our Product Development Process



Analyze available clinical data, science and literature to achieve sound understanding of disease

Developing and marketing products designed to restore natural functionality of diseased eyes for optimal combination of effectiveness and safety

Innovate with intuitive, minimally invasive, user-friendly "go to" solutions and procedures for eyecare providers (ECPs)

Maximize availability and accessibility of solutions to patients with a data-driven approach and clinical rigor

Four fundamental requirements
to deliver consistent, effective and safe outcomes for patients

Lead the Glaucoma and Dry Eye Categories

Leverage Sight's Proven Development Expertise and Commercial Infrastructure

Our product development initiatives further leverage:

1. An unparalleled clinical understanding of the underlying causes of glaucoma & dry eye
2. A differentiated and efficient development process
3. Ongoing and substantial investment in specialized Sales, Marketing, Clinical and Market Access resources that are developing the deep, focused stakeholder relationships throughout eyecare
4. Through OMNI and TearCare, substantial goodwill / credibility with ECPs that associates Sight Sciences with highly proprietary, "best-in-class" innovative treatments
5. High-quality corporate infrastructure that has been built with specific lens on being able to scale with a high growth, diverse operating environment

Lead the Glaucoma and Dry Eye Disease Categories

SURGICAL GLAUCOMA PRODUCT DEVELOPMENT OVERVIEW

Offer a **Comprehensive Portfolio** of Six Products

1

In-office Injection of Sustained Release Pharmaceutical (Rx)*

MILD TO MODERATE DISEASE

2

Implantable Canalicular Scaffold (MIGS)*

MILD TO EARLY MODERATE DISEASE

3

SIONS Surgical Instrument

Goniotomy

MILD TO EARLY MODERATE DISEASE

Launched 3Q2022

4&5

OMNI SURGICAL SYSTEM

OR Performed Canal-based Glaucoma Surgery (MIGS)

4. FDA-cleared canaloplasty followed by trabeculotomy
5. Canaloplasty alone IDE trial in process

MILD TO MODERATE DISEASE

Launched 3rd Gen 1Q2023

6

OR Performed Suprachoroidal Implant (MIGS)*

MODERATE TO ADVANCED DISEASE

*This pipeline product is under development and is not commercially available

DRY EYE DISEASE PRODUCT DEVELOPMENT OVERVIEW

Offer a **Comprehensive Portfolio** of Four Products

1

Over-the-counter Artificial Tear With A Differentiated Lipid Layer Technology*

2

Dry Eye Disease Prescription Pharmaceutical Eyelid Ointment*

3

Office-Based Eyelid Procedure

TearCare System

Anticipated Late 2023
Next Gen Controlled Release

4

Home-Based Eyelid Device Treatment*

*This pipeline product is under development and is not commercially available

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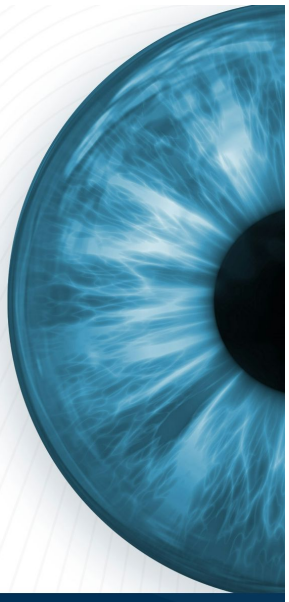
Power of Sight

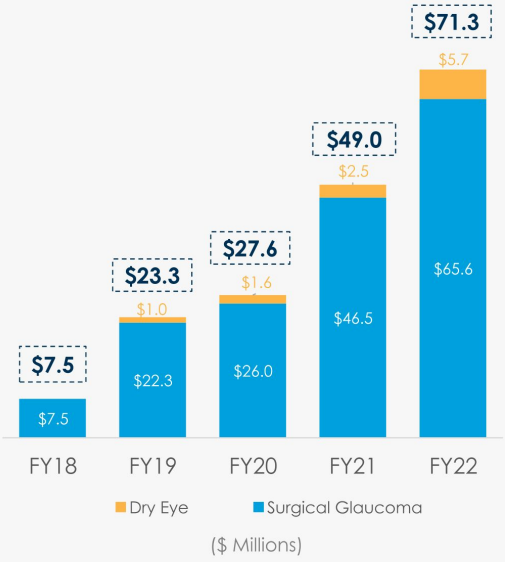


FINANCIAL OVERVIEW

Strong Financial Profile

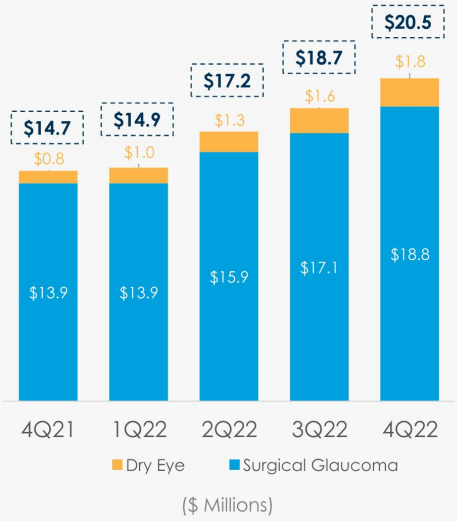
Annual Revenue

FY18-FY22E CAGR: 76%



Quarterly Revenue

Q4E Growth: +40% Y/Y, +10% Q/Q



Q4 Revenue: $20.5MM, +40% Y/Y, +10% Q/Q

- Surgical Glaucoma: $18.8MM, +35% Y/Y, +10% Q/Q
- Dry Eye: $1.8MM, +135% Y/Y, +12% Q/Q

FY22 Revenue: $71.3MM, +46%

- Surgical Glaucoma: $65.6MM, +41%
- Dry Eye: $5.7MM, +133%

2023 Guidance

- Full Year Revenue of $89MM to $94MM, +25% - 32% growth compared to 2022

Cash and cash equivalents totaled $185.0 million and total debt was $33.3 million as of 12/31/22.

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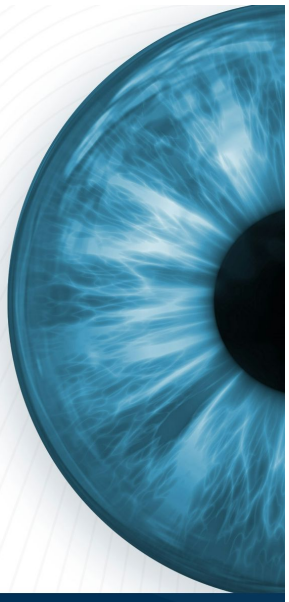

APPENDIX

OMNI® Clinical Timeline

Name	Description	2022		2023		2024		2025	
		1H	2H	1H	2H	1H	2H	1H	2H
PRECISION	IDE study evaluating the safety and effectiveness of canaloplasty alone using new higher volume OMNI. IDE could be used to support a canaloplasty alone indication for use for OMNI			Initiation planned*				Initial results available*	
TREY	Retrospective study evaluating the effectiveness of Standalone intervention using OMNI in eyes with uncontrolled IOP previously treated with trabecular bypass canal implants	Initial results available	Published in *International Ophthalmology*						
ROMEO II	Multi-center study to evaluate longer term outcomes (18-24 months) from Elevated IOP cohort (>18 mmHg) in ROMEO study		Manuscript submitted						
GEMINI 2.0	NCT05044793: An Observational Multicenter Clinical Study To Assess The Long-Term Safety And Effectiveness Of The OMNI® Surgical System In Combination With Cataract Surgery In Eyes With Open Angle Glaucoma. Evaluate 36-month durability of effectiveness and safety for OMNI						Initial results available*		
ORION 2.0	NCT04872348: An Observational Multicenter Clinical Study To Assess The Safety And Effectiveness Of The OMNI® Surgical System In Pseudophakic Eyes With Primary Open Angle Glaucoma. Evaluate 24-month durability of effectiveness and safety for OMNI					Initial results available*			
AAO/IRIS® Registry	Evaluate historical data for OMNI and competing products from IRIS® Registry in the U.S.	Initiated		Initial results available*					

*Note: Clinical trials, including their design, endpoints and timing, are subject to change at the Company's discretion. Initial results may include preliminary data and interim analyses that are subject to change.