



*Creating precisely tuned medicines
so patients can breathe freely*

LANTERN PHASE 2 STUDY

TOPLINE RESULTS

DECEMBER 7, 2020



DISCLAIMER



LYRA THERAPEUTICS, INC. (THE "COMPANY", "LYRA", "WE" OR "OUR") HAS FILED A REGISTRATION STATEMENT INCLUDING A PROSPECTUS WITH THE SECURITIES AND EXCHANGE COMMISSION (THE "SEC") FOR THE OFFERING TO WHICH THIS COMMUNICATION RELATES. THE REGISTRATION STATEMENT HAS NOT YET BECOME EFFECTIVE. THE COMPANY'S SECURITIES MAY NOT BE SOLD, NOR MAY OFFERS TO BUY BE ACCEPTED, PRIOR TO THE TIME THE REGISTRATION STATEMENT BECOMES EFFECTIVE. BEFORE YOU INVEST, YOU SHOULD READ THE PROSPECTUS IN THAT REGISTRATION STATEMENT AND OTHER DOCUMENTS THE COMPANY HAS FILED WITH THE SEC FOR MORE COMPLETE INFORMATION ABOUT THE COMPANY AND THIS OFFERING. YOU MAY OBTAIN THESE DOCUMENTS FOR FREE BY VISITING EDGAR ON THE SEC WEB SITE AT WWW.SEC.GOV. ALTERNATIVELY, THE COMPANY, ANY UNDERWRITER OR ANY DEALER PARTICIPATING IN THE OFFERING WILL ARRANGE TO SEND YOU THE PROSPECTUS IF YOU REQUEST IT BY CALLING BOFA SECURITIES AT 1-800-294-1322 OR EMAILING DG.PROSPECTUS_REQUESTS@BOFA.COM, BY CALLING JEFFERIES AT 1-877-547-6340 OR BY EMAILING PROSPECTUS_DEPARTMENT@JEFFERIES.COM OR BY CALLING WILLIAM BLAIR AT 1-800-621-0687 OR EMAILING PROSPECTUS@WILLIAMBLAIR.COM. THIS PRESENTATION IS FOR INFORMATIONAL PURPOSES ONLY AND DOES NOT CONSTITUTE AN OFFER TO SELL OR A SOLICITATION OF AN OFFER TO PURCHASE ANY SECURITIES OF ANY NATURE WHATSOEVER.

Certain information contained in this presentation and statements made orally during this presentation relate to or are based on studies, publications, surveys and other data obtained from third-party sources and Lyra's own internal estimates and research. While Lyra believes these third-party sources to be reliable as of the date of this presentation, 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. While Lyra believes its internal research is reliable, such research has not been verified by any independent source. Lyra's estimates are derived from publicly available information, management's knowledge of the Lyra's industry and management's assumptions based on such information and knowledge, which they believe to be reasonable. This data involves a number of assumptions and limitations which are necessarily subject to a high degree of uncertainty and risk due to a variety of factors.

This presentation contains information that is highly confidential and/or highly privileged. The information is intended only for the use of individuals or entities to which it is addressed. By agreeing to attend this meeting, you agree to keep all such information confidential. If you are not the intended recipient, you are hereby notified that any reliance, disclosure, copying, distribution, or taking of any action on the contents of this material is strictly prohibited.

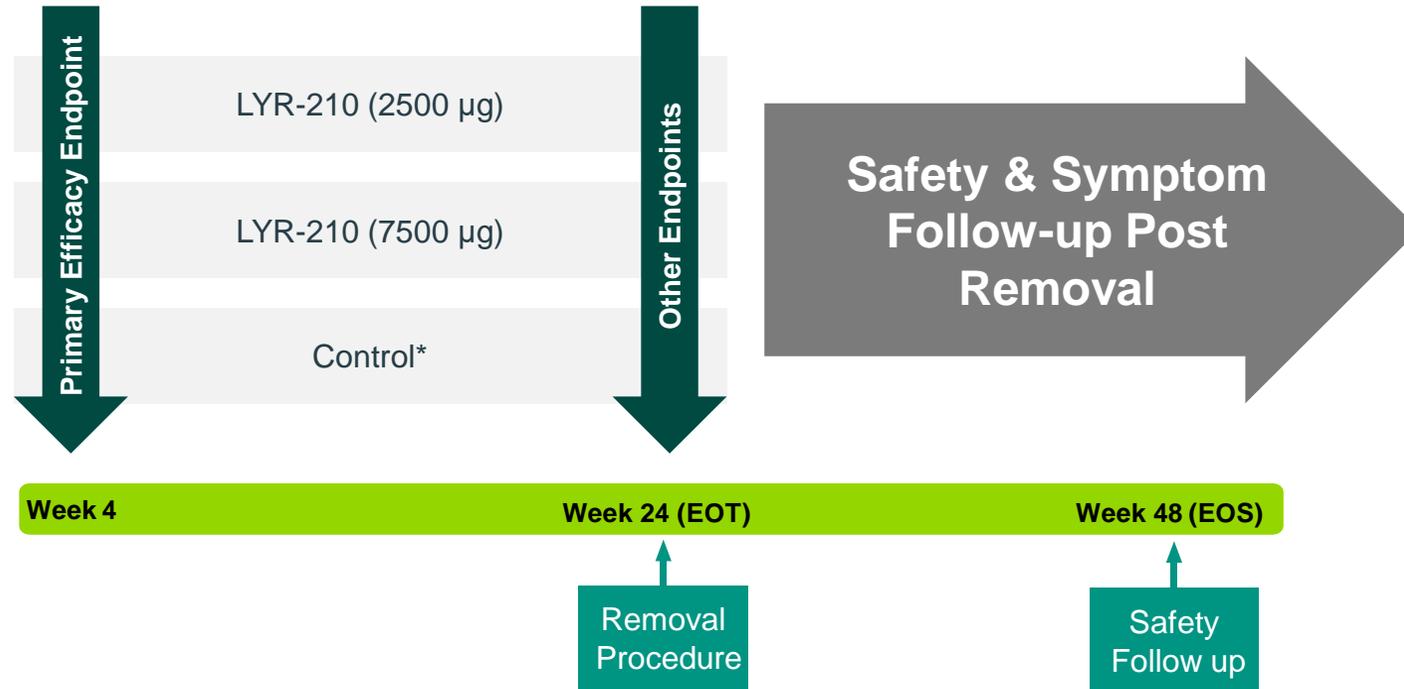
This presentation contains forward-looking statements that involve risks and uncertainties. Forward-looking statements are neither historical facts nor assurances of future performance. Instead, they are based on our current expectations and projections about future events and financial trends that we believe may affect our financial condition, results of operations, business strategy, and financial needs. All statements other than statements of historical facts contained in this presentation, including any statements regarding our plans to develop and commercialize our product candidates; the timing of our ongoing or planned clinical trials for LYR-210, LYR-220 and any future product candidates; the timing of and our ability to obtain and maintain regulatory approvals for LYR-210, LYR-220 and any future product candidates; the clinical utility of our product candidates; our commercialization, marketing and manufacturing capabilities and strategy; our expectations about the willingness of healthcare professionals to use LYR-210, LYR-220 and any future product candidates; our intellectual property position; our expected use of proceeds from this offering; our competitive position and the development or and projections relating to our competitors or our industry; our ability to identify, recruit and retain key personnel; the impact of laws and regulations; our expectations regarding the time during which we will be an emerging growth company under the JOBS act; our plans to identify additional product candidates with significant commercial potential that are consistent with our commercial objectives; research and development cost; our estimates and statements regarding our future revenue, future results of operations and financial position; our business strategy; our research and development costs; our plans and objectives of management for future operations; and the plans and objectives of management, are forward-looking statements. The words "may," "will," "should," "expect," "plan," "anticipate," "could," "would," "intend," "target," "project," "estimate," "believe," "estimate," "predict," "potential" or "continue" or the negative of these terms or other similar expressions are intended to identify forward-looking statements, although not all forward-looking statements contain these identifying words.

The forward-looking statements in this presentation are only predictions and represent our views as of the date of this presentation. Although we believe the expectations reflected in such forward-looking statements are reasonable, we can give no assurance that such expectations will prove to be correct. The forward-looking statements are subject to a number of risks, uncertainties and assumptions. Accordingly, readers are cautioned not to place undue reliance on these forward-looking statements. Except as required by applicable law, we do not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise. No representations or warranties (expressed or implied) are made about the accuracy of any such forward-looking statements. We operate in a very competitive and rapidly changing environment. New risk factors and uncertainties may emerge from time to time, and it is not possible to predict all risk factors and uncertainties nor can we assess the impact of all factors on our business or the extent to which any factor, or combination of factors, may cause actual results to differ materially from those contained in, or implied by, any forward-looking statements. In light of these risks, uncertainties and assumptions, the forward-looking events and circumstances described in this presentation may not occur and actual results could differ materially and adversely from those anticipated or implied in the forward-looking statements contained in this presentation. There can be no assurance that the opportunity will meet your investment objectives or that you will receive a return of all or part of such investment. Investment results may vary significantly over any given time period. The appropriateness of a particular investment or strategy will depend on an investor's individual circumstances and objectives. We recommend that investors independently evaluate specific investments and strategies.

This presentation does not constitute or form a part of, and should not be construed as, an offer or invitation to subscribe for, underwriter or otherwise acquire any securities of the Company in any jurisdiction, nor should it or any part of it form the basis of, or be relied on in connection with, any contract to purchase or subscribe for any securities of the Company or with any other contract or commitment whatsoever.

LANTERN PHASE 2 STUDY DESIGN

Objectives: Select dose & collect data to design pivotal Phase 3 program



Randomized, Blinded, Sham-controlled, Dose-ranging

- Enrollment curtailed at 67 due to COVID-19, 150 maximum originally planned
- Both polyp and non-polyp patients
- 16 Sites in Europe, Australia & New Zealand
- Primary endpoint: change in 4 cardinal symptoms (4CS)
- Key secondary endpoints:
 - Cardinal symptoms over 48 weeks
 - SinoNasal Outcome Test (SNOT-22)
 - Time to treatment failure
 - Reduction in inflammation
 - PK/PD

Designed to evaluate efficacy in adult subjects with CRS who have failed medical management as an alternative to surgery

EOT = End of Treatment, EOS = End of Study

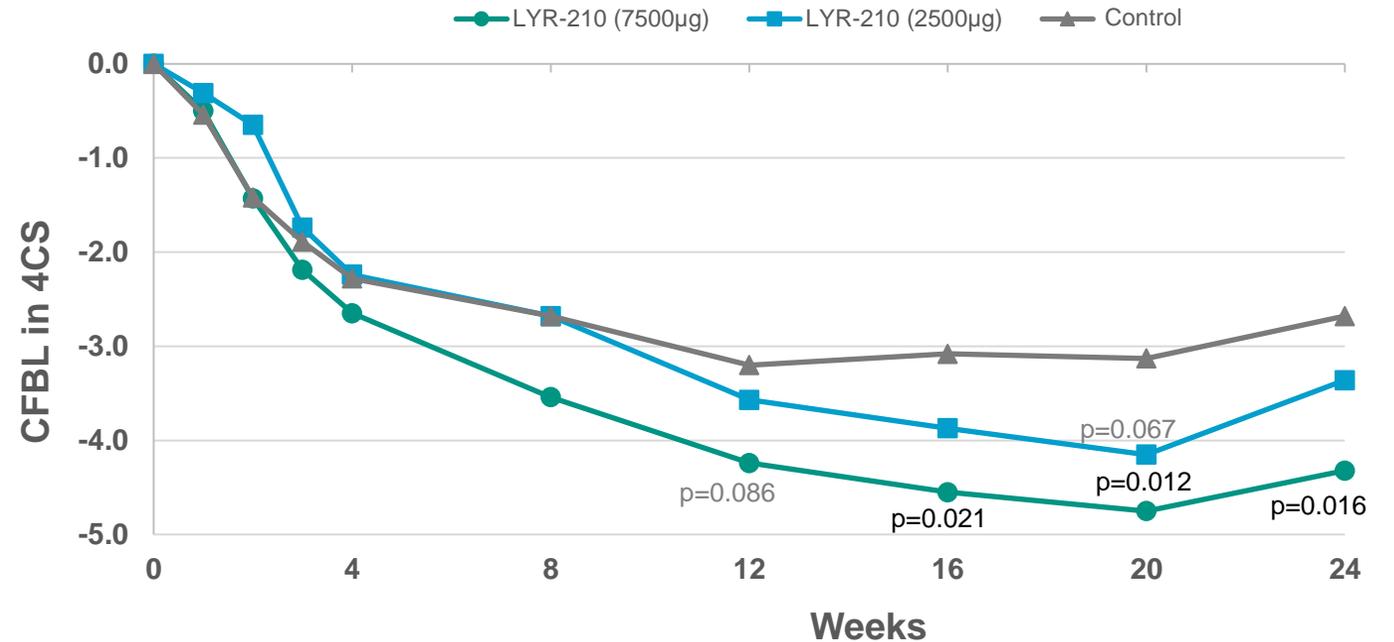
*Control = Sham procedure followed by daily saline irrigation

LYR-210

LANTERN PHASE 2 STUDY

- Positive and statistically significant improvement for 7500 mcg at weeks 16, 20, 24
- Validates 6-month benefit from a single administration
- Showed benefit in both polyp and non-polyp patients

TOTAL SYMPTOM IMPROVEMENT BY 4CS^{1,2}



1) 4 cardinal symptom score includes nasal obstruction/congestion, rhinorrhea, facial pain/pressure and anosmia (score of 0-12 based on 7-day average symptom score); 2) Data represents the least square mean. Missing data and data post use of rescue medication was imputed by LOCF method

LYR-210

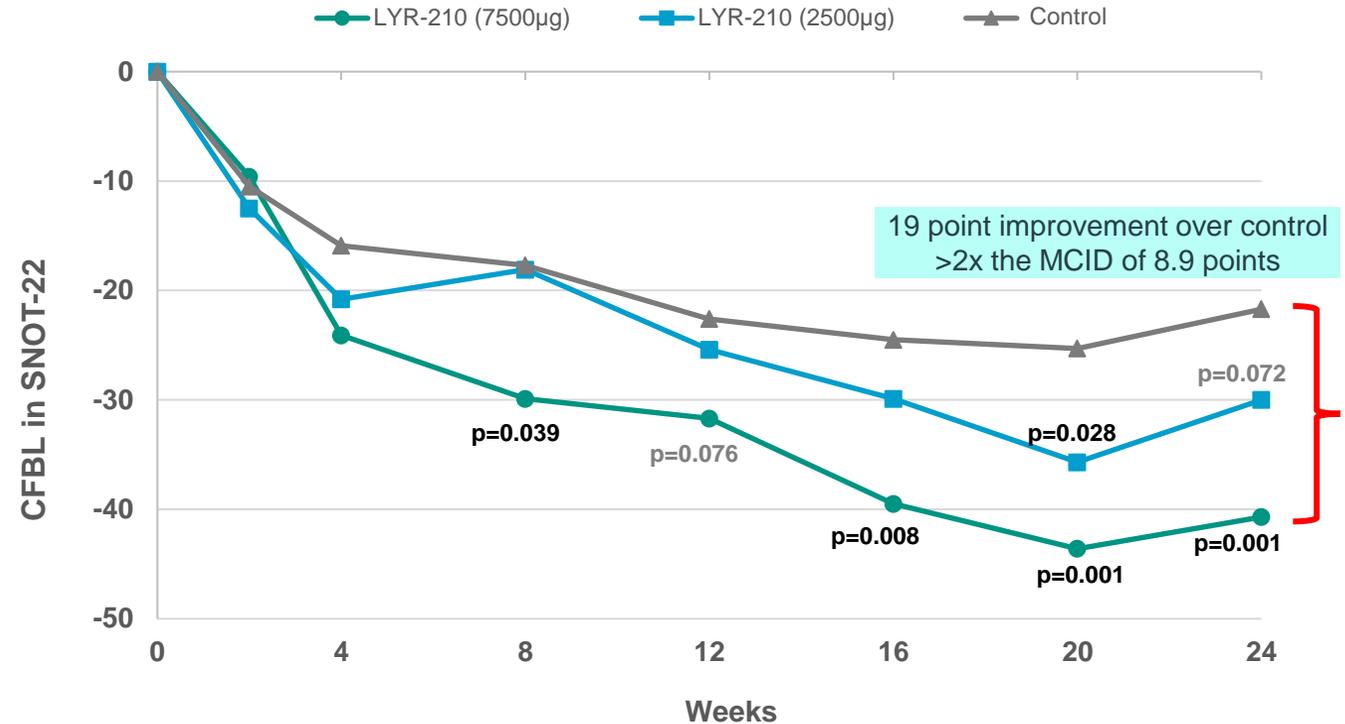
LANTERN PHASE 2 STUDY

→ Higher and earlier statistical significance for 7500 mcg using SNOT-22

→ Statistically significant improvement relative to control for 7500 mcg at weeks 8, 16, 20, 24

→ 70% of patients in 7500 mcg improved > MCID³ at week 4; 100% by week 24

TOTAL SYMPTOM IMPROVEMENT BY SNOT-22^{1,2}



1) SinoNasal Outcome Test is a patient reported score from 0 – 110 based on symptoms; 2) Data represents the least square mean. Missing data and data post use of rescue medication was imputed by LOCF method; 3) Minimal clinically important difference has been established for the SNOT-22 score at 8.9 points

LYR-210

LANTERN PHASE 2 STUDY

Well-tolerated throughout the
24-week treatment period

WELL-TOLERATED SAFETY PROFILE



No treatment-related SAEs



Treatment-related AE's in more than 1 subject:

- Epistaxis: 3 subjects at 2500 mcg
- Rhinitis: 3 subjects at 7500 mcg
- Rhinorrhea: 2 subjects at 2500 mcg
- Headache: 2 subjects in control



All treatment-related AEs mild or moderate apart from one event:

- Increased viscosity of upper respiratory secretion at 2500 mcg



Treatment-related AE's in control and 7500 mcg groups occurred at comparable rates

LANTERN PHASE 2 STUDY SUMMARY

Positive Phase 2 results position Lyra to move forward to pivotal Phase 3 program



Statistically significant results achieved in the LANTERN Phase 2 study despite curtailed enrollment due to COVID-19

- 7500 mcg achieved statistically significant improvement in **4CS** at **weeks 16, 20 & 24** compared to control
- 7500 mcg achieved statistically significant improvement in **SNOT-22** at **weeks 8, 16, 20 & 24** compared to control
- Both doses were well-tolerated
- LYR-210 is the first treatment to demonstrate six months of benefit via a single administration
- First nasal implant to demonstrate benefit in both polyp and non-polyp patients
- First trial to demonstrate a dose response with a nasal implant
- Data supports moving forward with the 7500 mcg dose
- Data informs pivotal Phase 3 program; End of Phase 2 FDA meeting mid-2021
- Validates XTreo™ platform; move forward with 7500 mcg dose for LYR-220