FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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| Check this box if no longer subject | STA |
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| to Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Westby Keith | | | | | 2. Issuer Name and Ticker or Trading Symbol IVERIC bio, Inc. [ISEE] | | | | | | | | | Check | all app | o of Reportir dicable) tor er (give title | ng Per | rson(s) to Is 10% O Other (| wner |
|---|--|-------|----------------------------|--|---|-------|--|------|--|---|---------------------|--------------------|---------|--|-----------------------|--|---|-----------------------------------|------|
| (Last) (First) (Middle) C/O IVERIC BIO, INC. 8 SYLVAN WAY | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/07/2022 | | | | | | | | X | below) SVP & | | & CC | below) | | |
| (Street) PARSIPPANY, NJ 07054 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indiv ine) X | ′ | | | | |
| | | Table | I - I | Non-Deriva | tive | Secui | rities | Ac | quir | ed, D | isposed o | of, or I | Benefic | ially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes | | | ear) E | 2A. Deemed Execution Date, if any (Month/Day/Year | | , | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar | | | nd 5) Secu Bene | | icially d Following | Forn (D) c | rect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transa | | action(s) 3 and 4) | | , | (| |
| Common Stock 02/07/20 | | | 02/07/202 | .2 | | | S ⁽¹⁾ | | 10,000 | D | \$15.00 | 5.0033(2) | | 118,280 | | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | 4. Transa Code 8) | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Expiration Date (Month/Day/Year) 1 Date Expiration | | | Amo Secu Unde Deriv Secu 3 and | Amount or Number of | nt er | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

- $1. \ The sale reported on this form was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on November 16, 2021.$
- 2. The sale price of the Reporting Person's shares represents the weighted average price of all shares sold by a broker in multiple transactions effected at prices ranging from \$15.0000 to \$15.0400 per share on February 7, 2022. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Registrant or a security holder of the Registrant, information regarding the number of shares sold at each price within the range.

/s/ Todd Anderman, as Attorney-in-Fact for Keith

02/08/2022

Westby

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.