

**ROYALTY PHARMA**

# **Corporate Presentation**

**January 2024**

# Forward looking statements & non-GAAP financial information

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# ROYALTY PHARMA



## Our vision

To be the leading partner  
funding innovation  
in life sciences

## Our mission

By collaborating to  
accelerate innovation,  
we enable our  
partners to transform  
patient lives

# Royalty Pharma: A unique way to invest in biopharma

(Nasdaq: RPRX)

## Market leader and pioneer

**27**

years of compounding value

**60%**

share of pharmaceutical royalty market<sup>(1)</sup>

## Compounding growth through value creation

**10%+**

top-line CAGR expected over this decade<sup>(2)</sup>

**Low-teens**

% average unlevered IRR over multiple decades, high-teens or better with conservative leverage<sup>(3)</sup>

## Long duration, diversified portfolio

**~13**

year portfolio duration with track record of growing through royalty expirations

**15**

blockbusters (>\$1bn in annual sales) in portfolio<sup>(4)</sup>

## Significant funding opportunity

**>\$1 trillion**

capital required for biopharma innovation over next decade

**\$10-12 billion**

RP expected capital deployment from 2022-2026; path to double this longer term<sup>(5)</sup>

## Strong track record

**History**

of identifying most transformative products

**~13%**

top-line CAGR achieved between 2010-2020

## Efficient business model

**~7-8%**

cost of capital even with higher rates

**\$2.8 billion**

2022 top line; 92% Adjusted EBITDA margins, providing consistent and growing cash flow to be redeployed

“Top-line” refers to Royalty Pharma’s Portfolio Receipts

1. Royalty Pharma market share from 2012–2023; internal estimates of biopharma royalty market based on announced transactions. 2. Royalty Pharma top-line CAGR includes future investments. Royalty Pharma’s growth target provided at May 2022 Investor Day. See slide 60 for additional details. 3. Returns reflect a combination of actual results and estimated projected returns for investments based on analyst consensus sales projections (where applicable). IRR (or returns) are calculated using total cash outflows and total cash inflows, in each case including royalties, milestones and other cash flows. See slide 60 for additional details. 4. Based on 2022 end market sales and excludes products tied to recently expired royalties. 5. Royalty Pharma’s capital deployment target provided at Investor Day. See slide 60 for additional details.

# Deep network across the biopharma ecosystem

Leading provider of funding solutions for life sciences innovation



# Clear strategic plan to drive robust and value-enhancing growth

1

## Existing royalties

Acquire existing royalties on market-leading or late-stage development therapies with high commercial potential

2

## Synthetic royalties / R&D funding

Acquire newly-created royalties on approved or late-stage development therapies with strong proof of concept and high commercial potential

3

## Launch & development capital<sup>(1)</sup>

Additional funding in exchange for long-term payment streams

4

## M&A related

Acquire royalties by facilitating M&A transactions

5

## Adjacencies

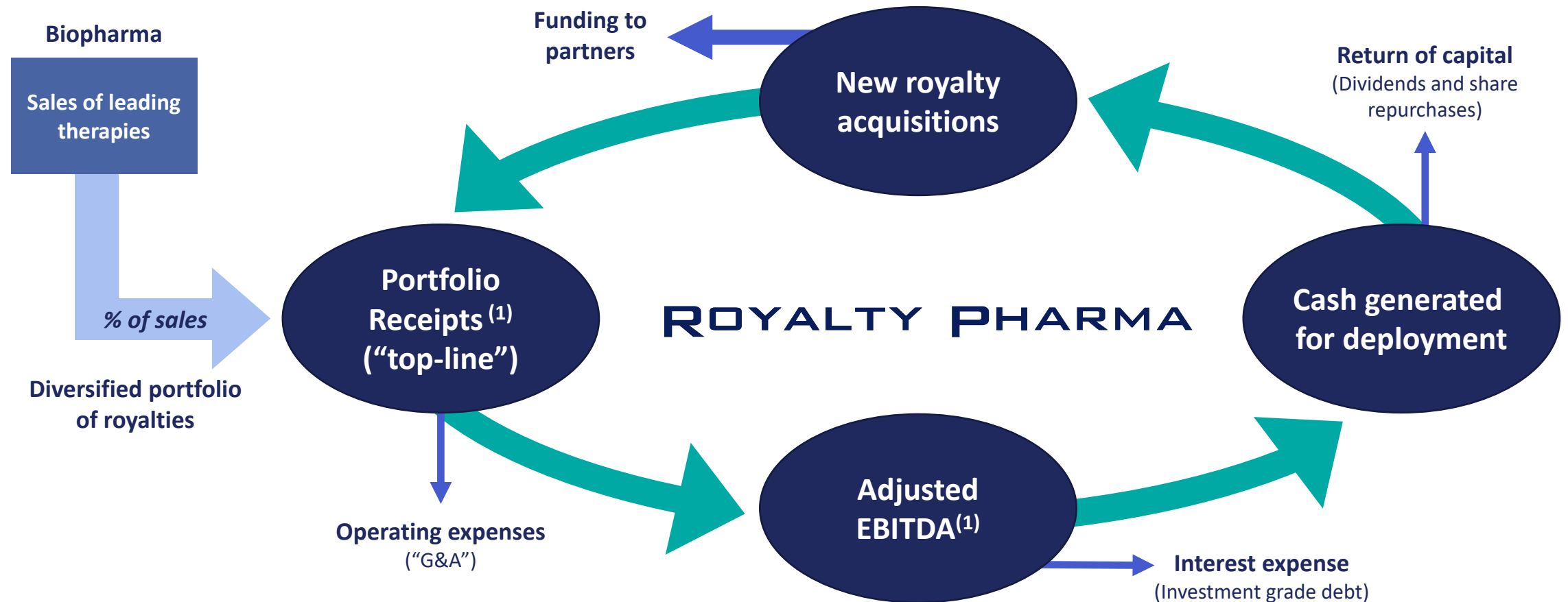
Leverage team's capabilities in business adjacencies

# Advancing our partners' core mission with win-win solutions

Structure	Potential benefits to partner
Existing royalties	<ul style="list-style-type: none"> <li>Diversification of asset portfolio</li> <li>Non-dilutive funding for business growth and investment</li> <li>Upfront capital today in exchange for a long-dated stream of payments</li> </ul>
Synthetic royalties	<ul style="list-style-type: none"> <li>Funding for completion of development and commercialization of portfolio</li> <li>Retain operational control of development programs</li> <li>Lower cost of capital than issuing equity</li> </ul>
Launch & development capital	<ul style="list-style-type: none"> <li>Launch funding offers flexible, patient, long-term alternative financing</li> <li>Lower cost of capital than selling equity and less restrictive than debt</li> </ul>
M&A	<ul style="list-style-type: none"> <li>Monetize non-strategic passive royalties to reduce net M&amp;A price</li> <li>Capital provided through purchase of royalties and supplemental funding</li> </ul>



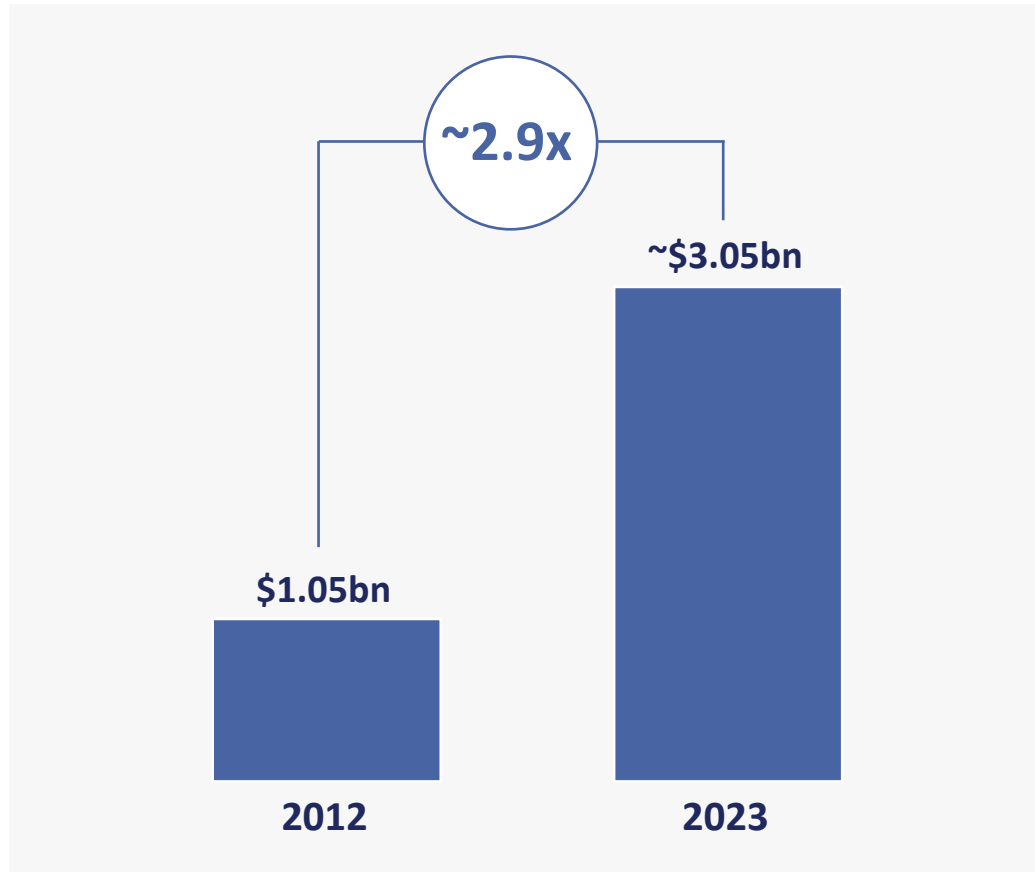
# Simple and efficient business model focused on cash flow



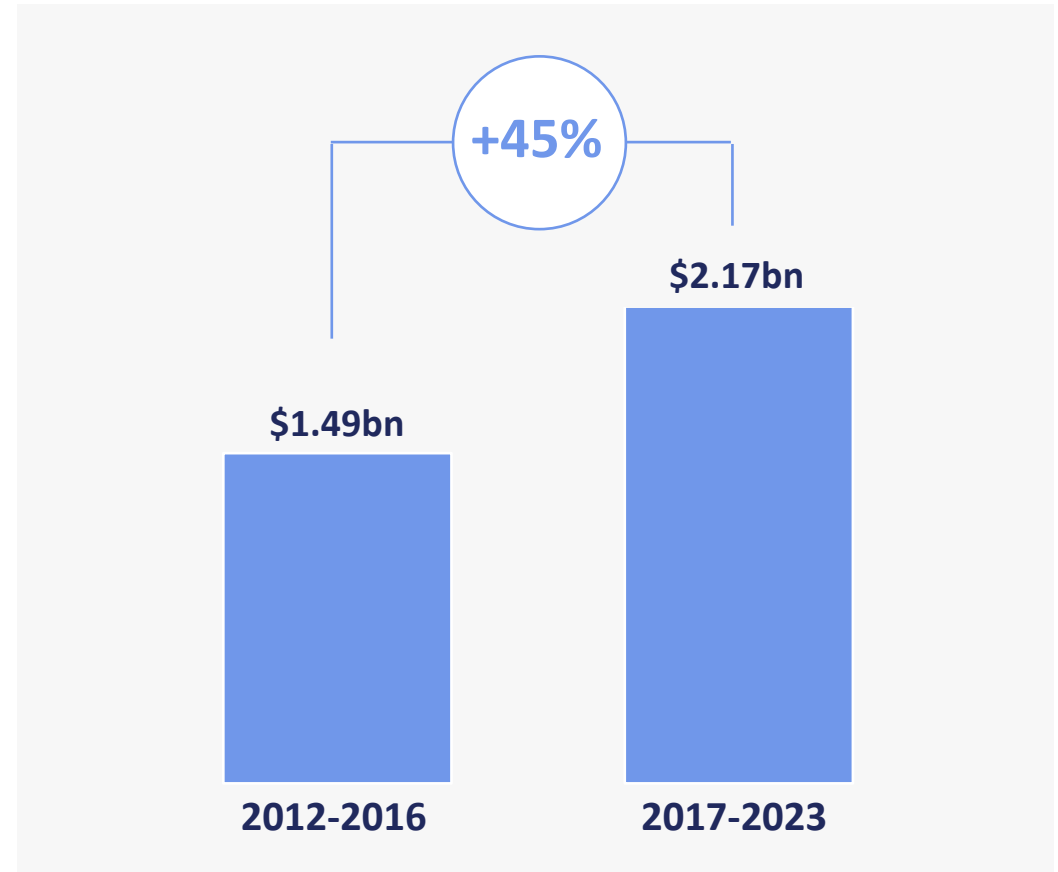
Large diversified royalty portfolio generates significant cash to redeploy in new royalties

# Track record of delivering strong growth

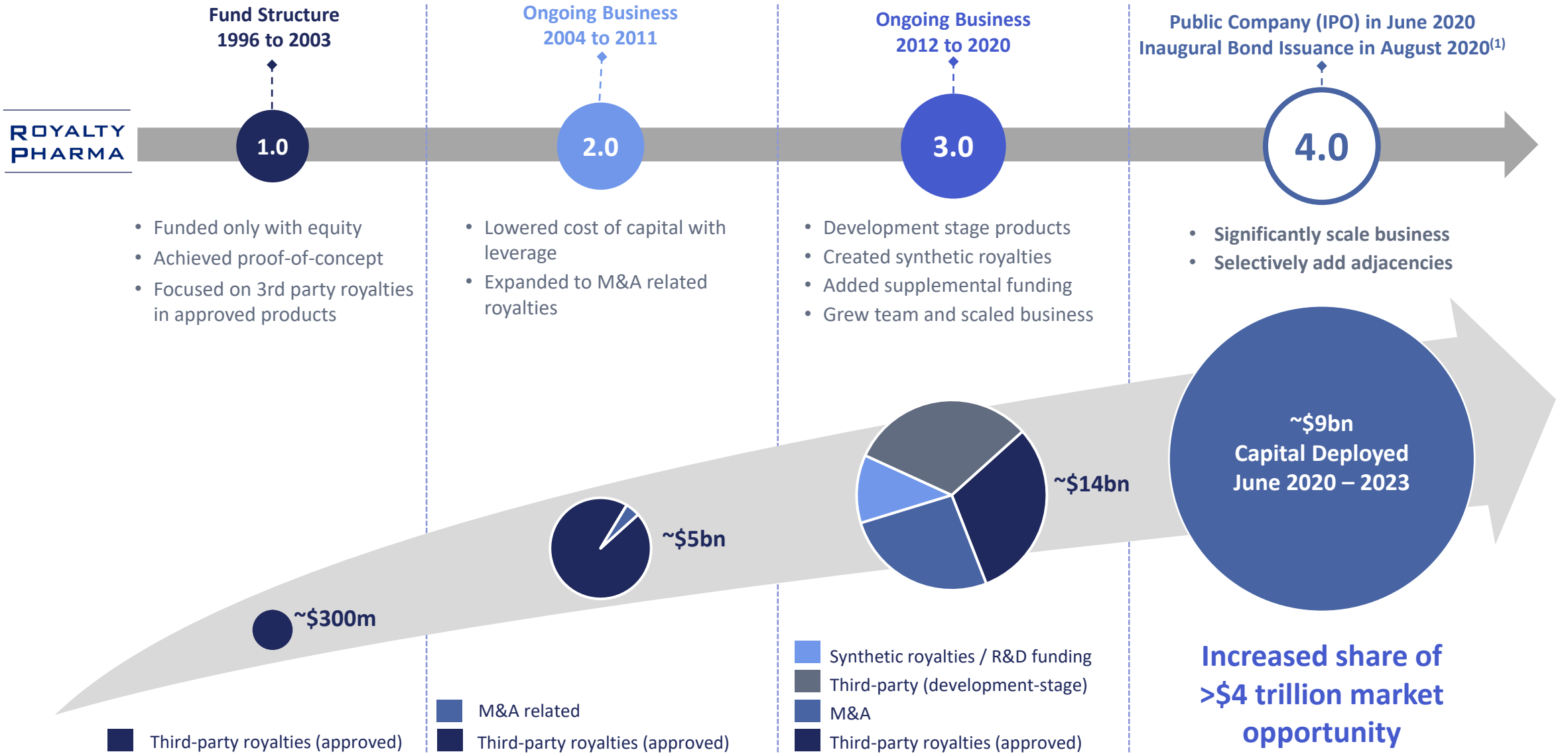
Portfolio Receipts<sup>(1)</sup>



Capital deployed  
(annual average)



# Innovative business model supports biopharma ecosystem



# Strong competitive moat in biopharma royalty funding



## Business model



## Scale



## Platform



- Publicly traded company
- Long royalty durations
- ~7-8% cost of capital
- ~2.5% cost of debt<sup>(1)</sup>

- Portfolio >45 products
- Large investment capacity
- Deep capital markets access
- Ability to leverage portfolio

- Long-tenured team
- Singular biopharma focus
- Long collaboration history
- Deep industry relationships
- Partner of choice

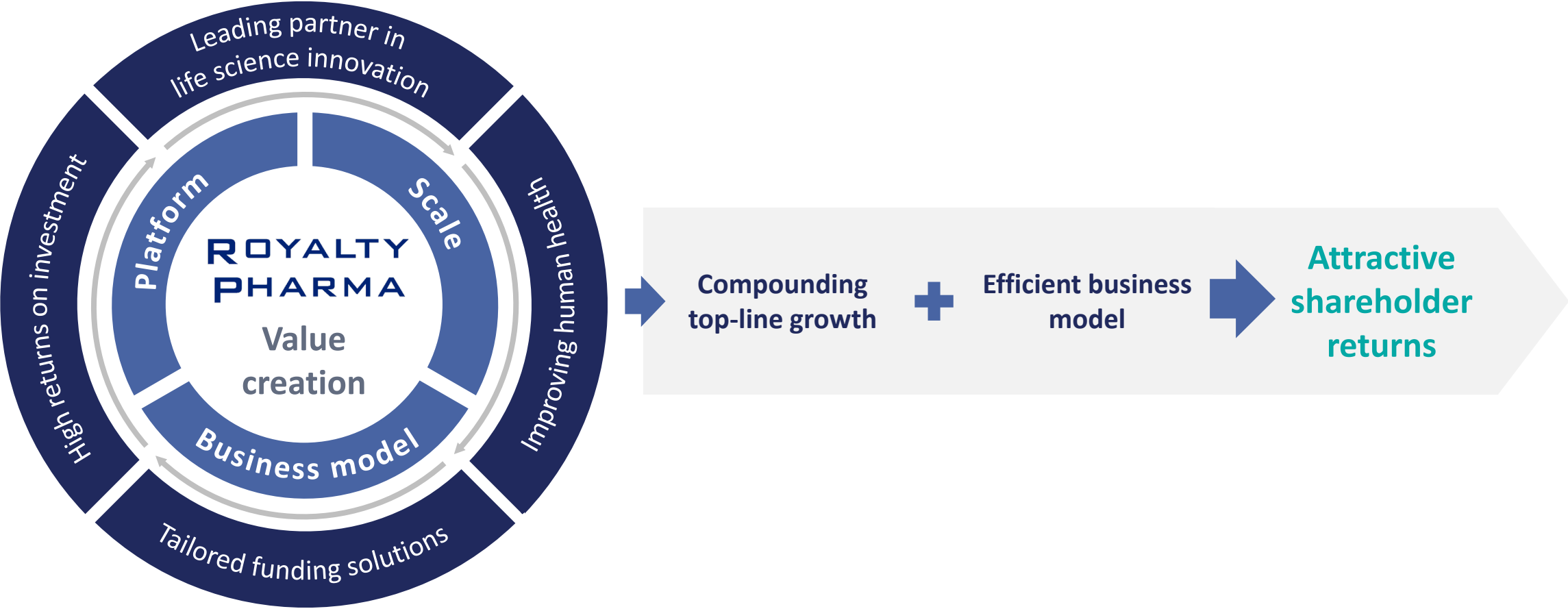
### Other Royalty Buyers

- Serial fund structures
- Often shorter royalty durations
- High-single to double-digit cost of capital

- Smaller, concentrated portfolios
- Funded with significantly more expensive private debt and equity

- Multi-strategy
- New to industry

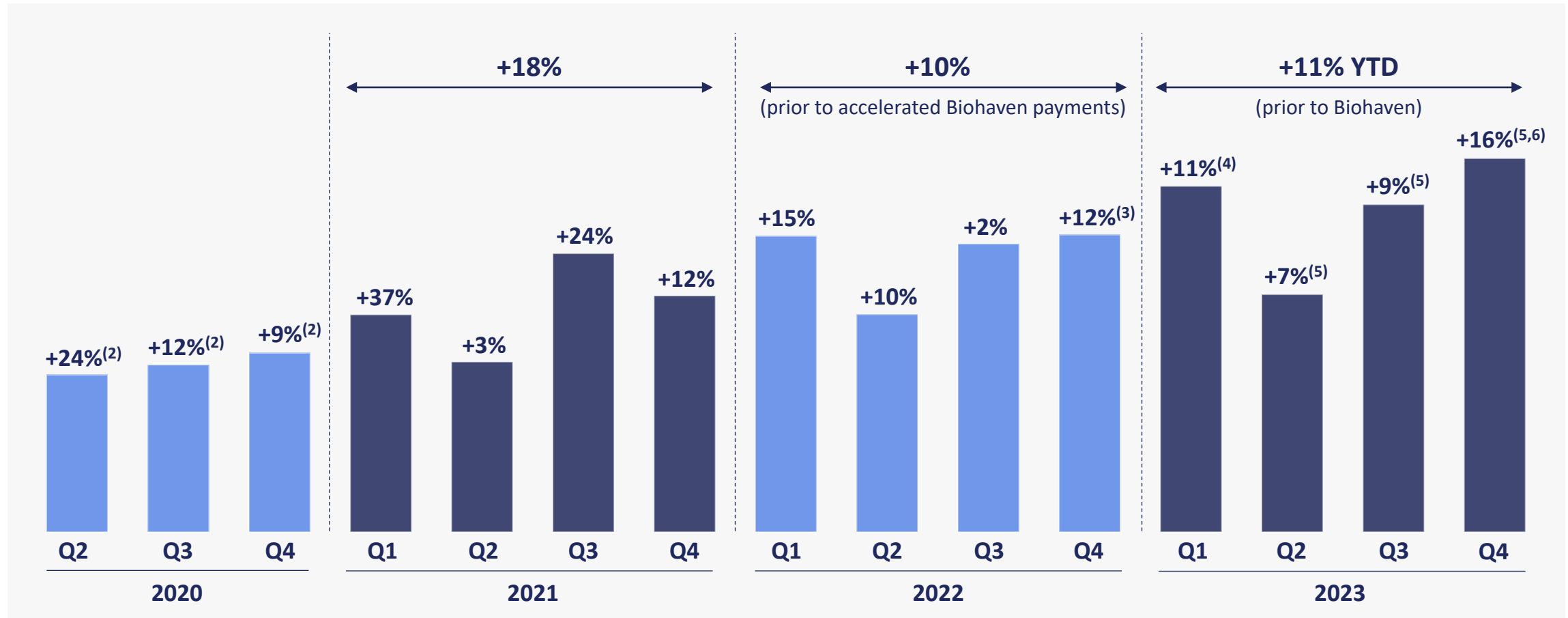
# Powerful engine for value creation and compounding growth



Consistently replenishing portfolio, powering long-term compounding growth

# Impressive track record of strong growth since IPO

Portfolio Receipts<sup>(1)</sup>  
(year/year growth)



1. See slide 60 for definitions.
2. On pro forma basis. See slide 60 for definition and additional information.
3. Growth of 12% is prior to the \$458m accelerated Biohaven redemption payment received in Q4 2022.
4. Growth of 11% is prior to the \$475m Zavzpret milestone payment received in Q1 2023 and \$13m Series A Biohaven Preferred Shares redemption payment received in Q1 2022.
5. Growth is prior to the \$13m Series A Biohaven Preferred Shares redemption payment received in each of the respective year ago quarters.
6. Growth is prior to the \$50m oral zavegepant payment received in Q4 2023 and prior to the \$458m accelerated Biohaven redemption payment received in Q4 2022.

# Significant accomplishments since IPO

		2020	2023	Increase	
Growth	Portfolio Receipts <sup>(1)</sup>	\$1.8bn	~\$2.53bn / ~3.05bn	~41% / 69%	↑
	2020-2025 PR CAGR outlook <sup>(2)</sup>	6-9%	11-14%	>65%	↑
Capital deployment	Announced deal value (prior 3 years)	\$3.7bn	\$10.5bn	~2.8x	↑
	5-year capital deployment target <sup>(3)</sup>	>\$7bn	\$10-12bn	>55%	↑
Portfolio	New therapies added (prior 3 years)	14	24	~71%	↑
	Development-stage therapies <sup>(4)</sup>	3	12	4x	↑
Platform	Full time employees <sup>(5)</sup>	35	88	>2.5x	↑
	In-depth opportunity reviews <sup>(6)</sup>	50	93	86%	↑

PR: Portfolio Receipts

1. See slide 60 for definitions. Portfolio Receipts of \$1.8 billion are for the period ended December 31, 2020; ~\$2.53 billion excludes a \$50 million payment related to oral zavegepant and the \$475 million Zavzpret milestone payment, and ~\$3.05 billion represents the expected total Portfolio Receipts to be reported for the period ended December 31, 2023.

2. The 2020-2025 Portfolio Receipts CAGR of 6-9% was provided on August 12, 2020. The 2020-2025 Portfolio Receipts CAGR of 11-14% was provided at May 17, 2022 Investor Day. The increase is calculated using the midpoint of each of the PR outlook ranges. See slide 60 for factors that may impact our outlook.

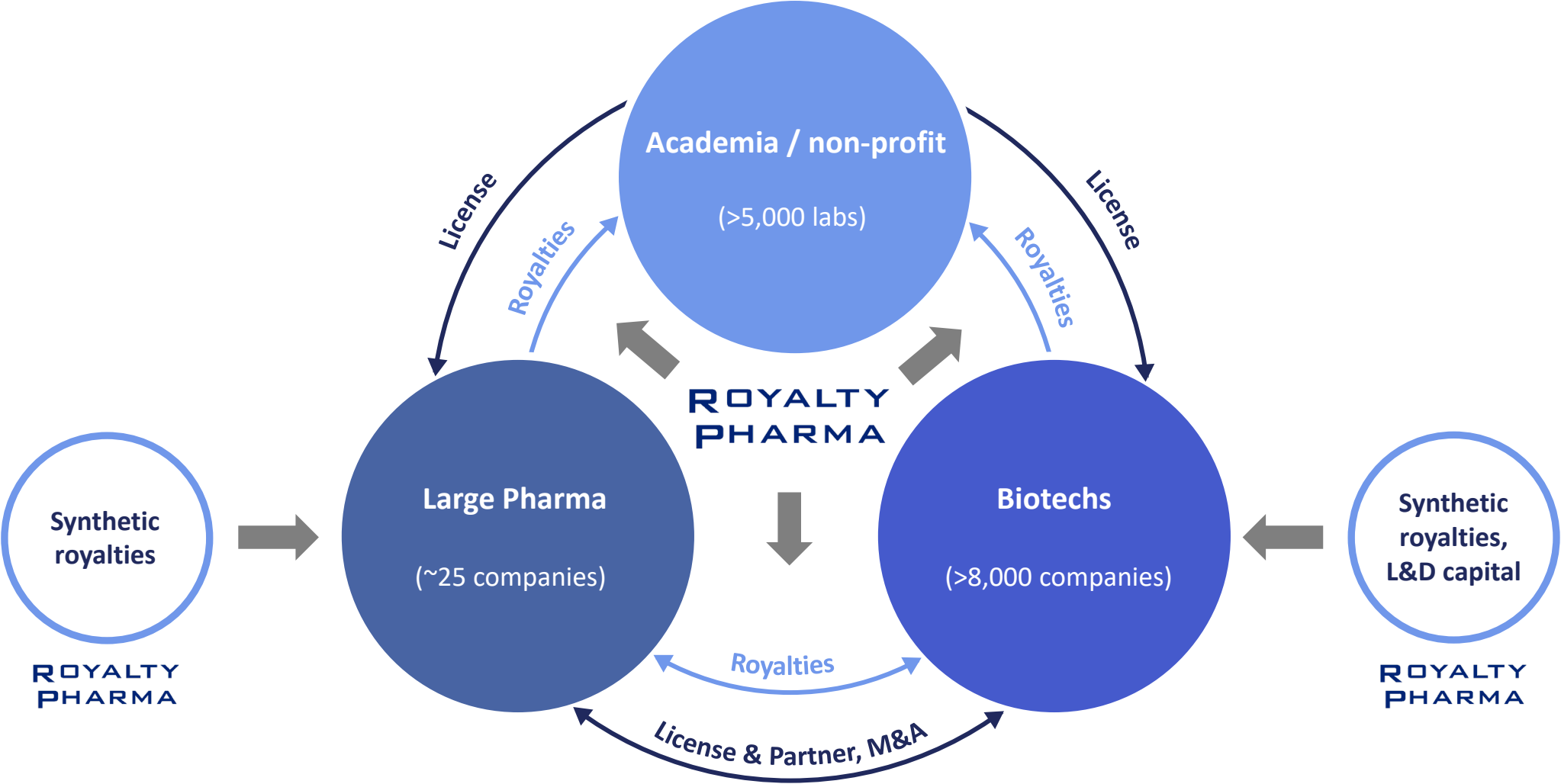
3. Capital deployment target of >\$7bn provided on August 12, 2020. Capital deployment target of \$10-12bn provided at May 17, 2022 Investor Day. See slide 60 for factors that may impact our capital deployment target. The increase is calculated using the midpoint of today's 5-year capital deployment target range.

4. Development-stage therapies for 2020 period is as of November 2020; development-stage therapies for the today period is as of December 2023.

5. Full time employees of our Manager for the 2020 period is as of December 31, 2019; full time employees of our Manager for the today period is as of December 2023.

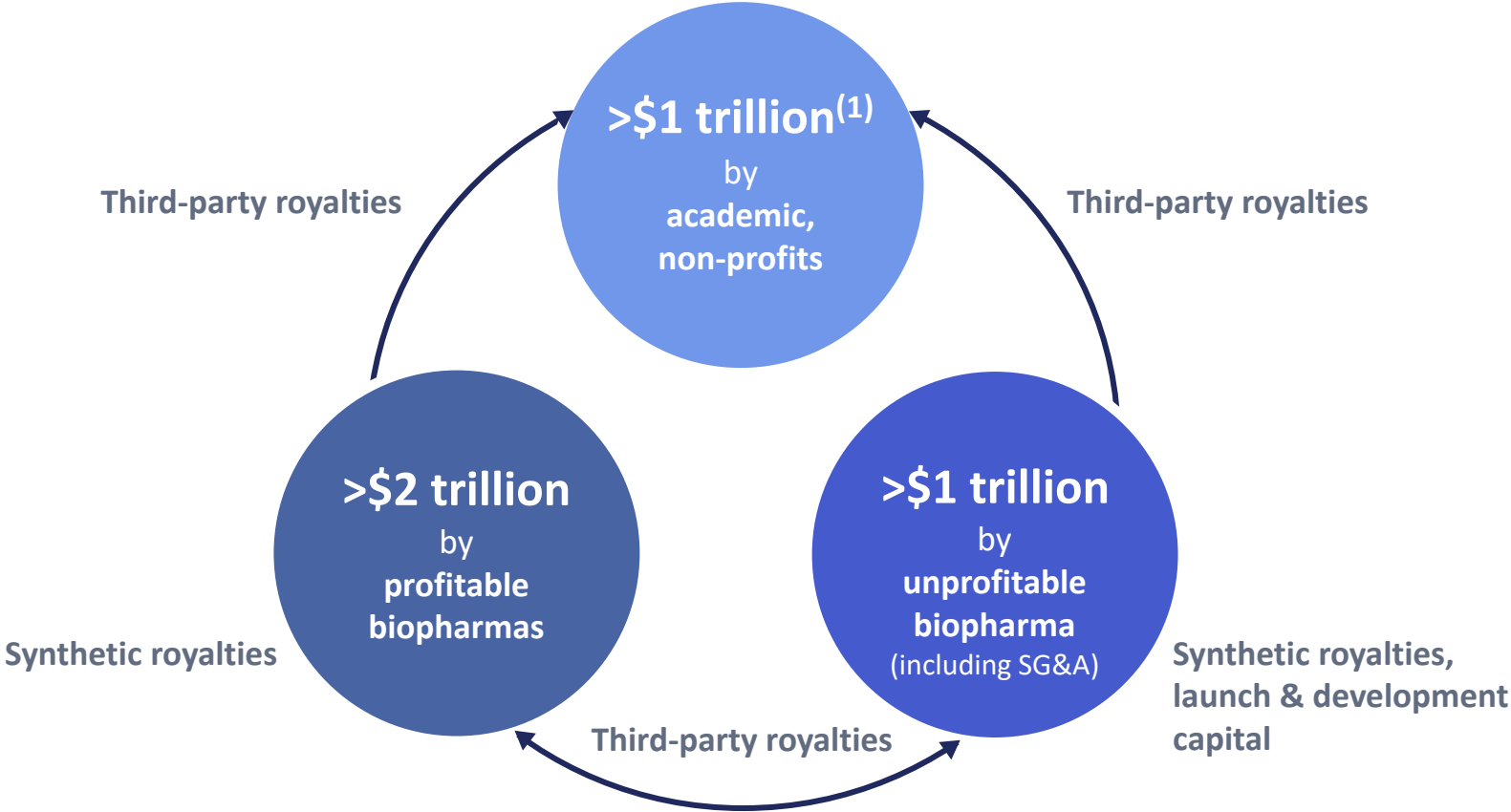
6. In-depth opportunity reviews of 50 is for the period ended December 31, 2020 and 93 is for the period ended December 31, 2023.

# Industry fragmentation and complexity drive royalty creation

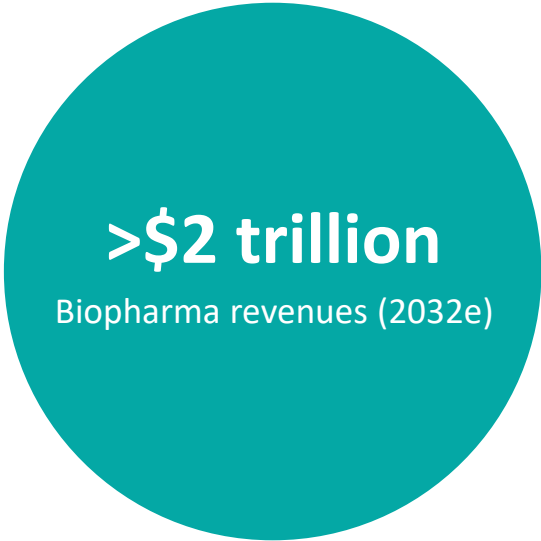


# Significant opportunity to fund biopharma innovation

## Biopharma ecosystem cumulative R&D spend over next decade



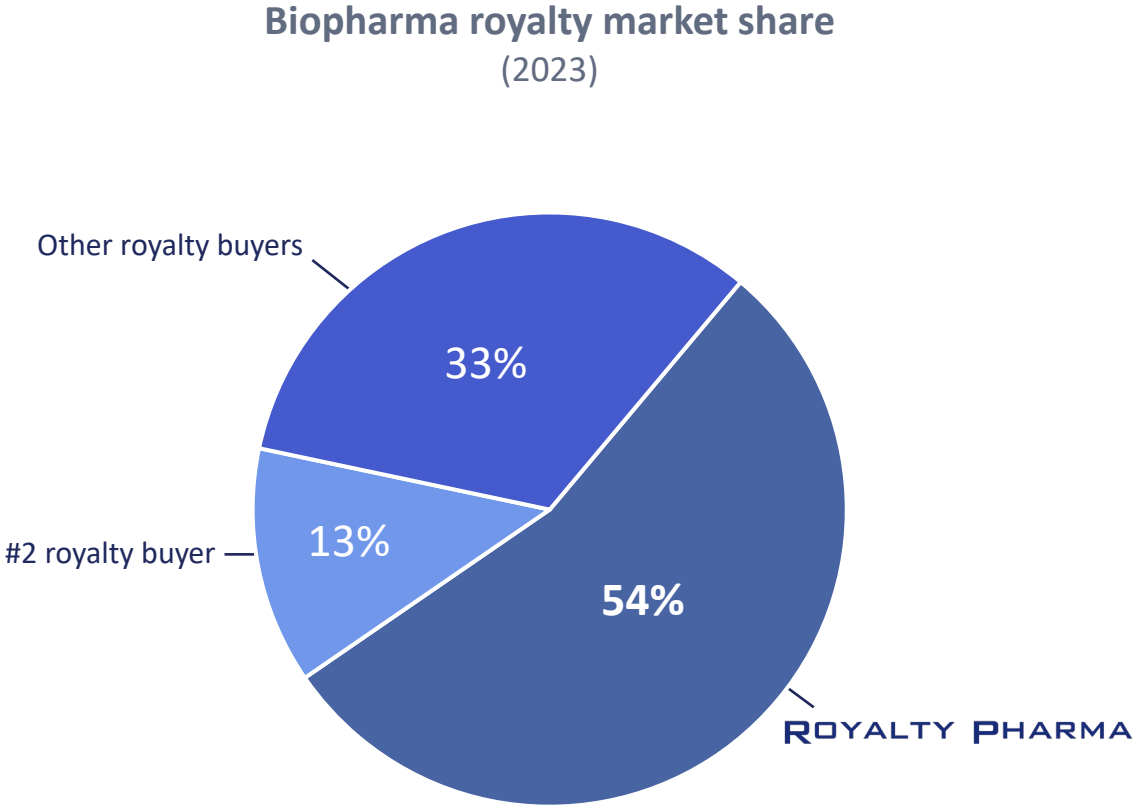
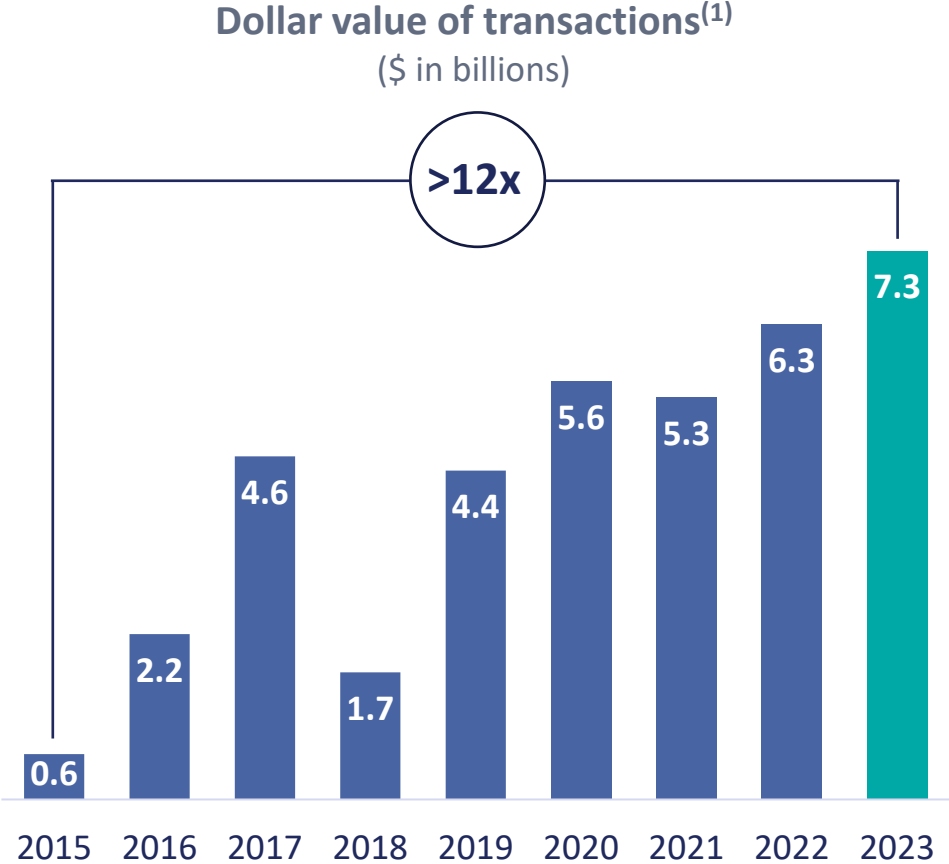
## Global pharma market<sup>(2)</sup>



Entire biopharma ecosystem drives our pipeline

Source: Bloomberg, Visible Alpha and CapIQ  
1. Based on estimates from Research America and internal Royalty Pharma analysis.  
2. Based on Evaluate Pharma as of May 2022.

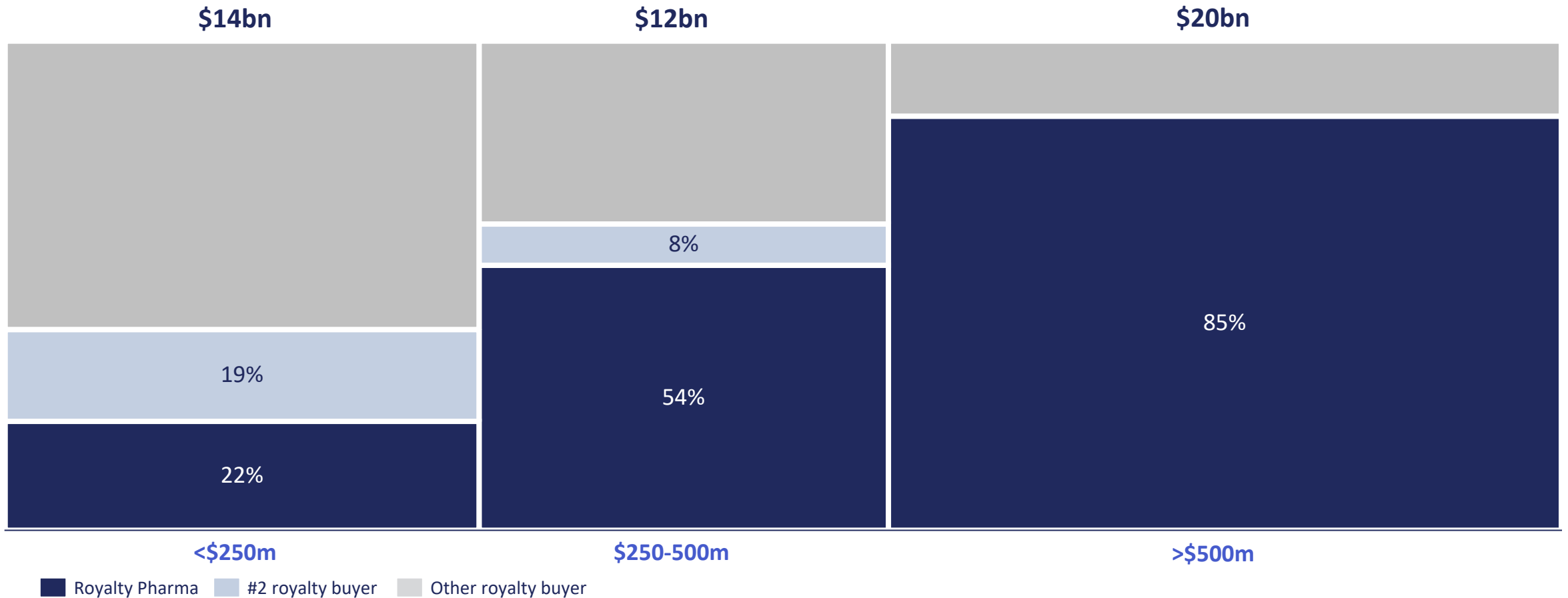
# Strong momentum for biopharma royalty funding market



Royalty Pharma maintained its leading share of the rapidly growing biopharma royalty funding market

# Royalty Pharma is the leader in royalty transactions

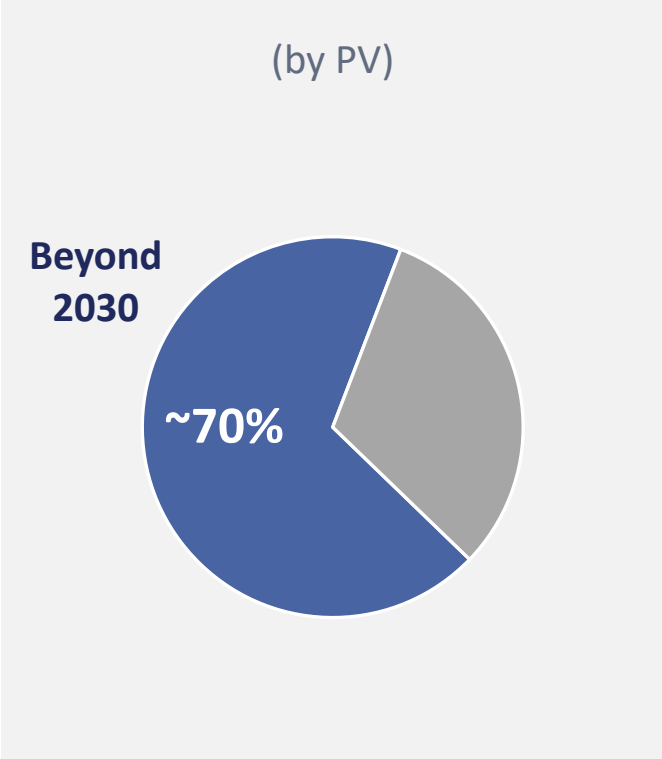
Biopharma royalty market size and share by transaction value, 2012-2023<sup>(1)</sup>



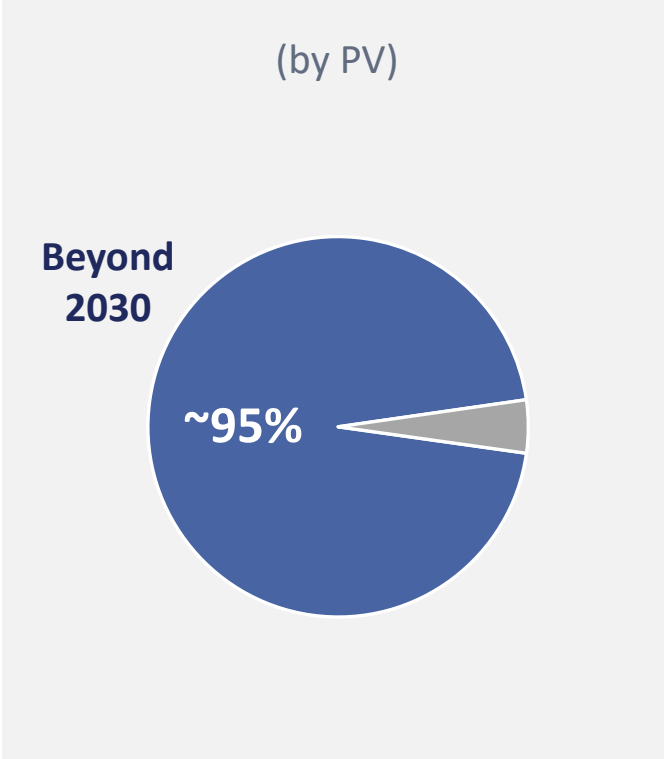
Royalty Pharma has maintained ~60% overall share since 2012 and is the go-to partner for larger transactions

# Long duration portfolio consistently replenished

Duration of portfolio  
(At IPO)



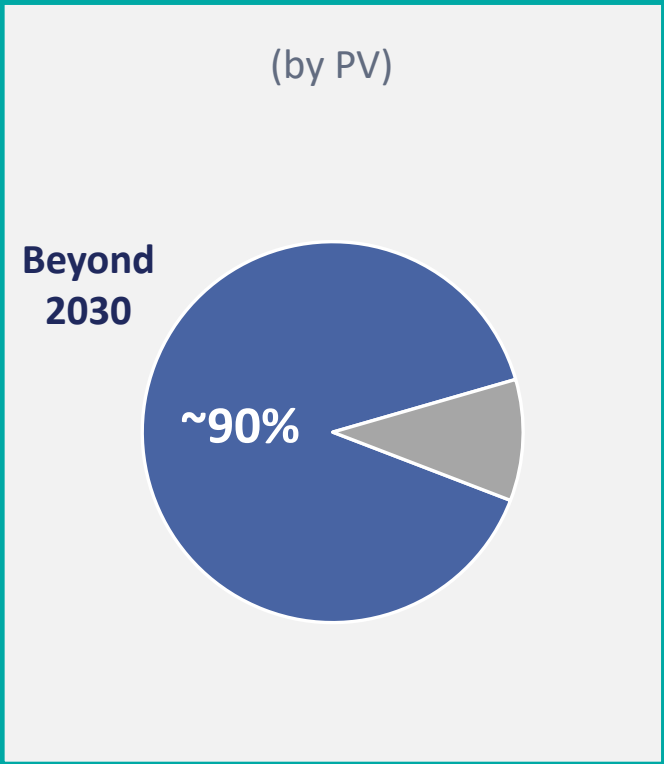
Duration of royalties acquired  
2020-2023



+

=

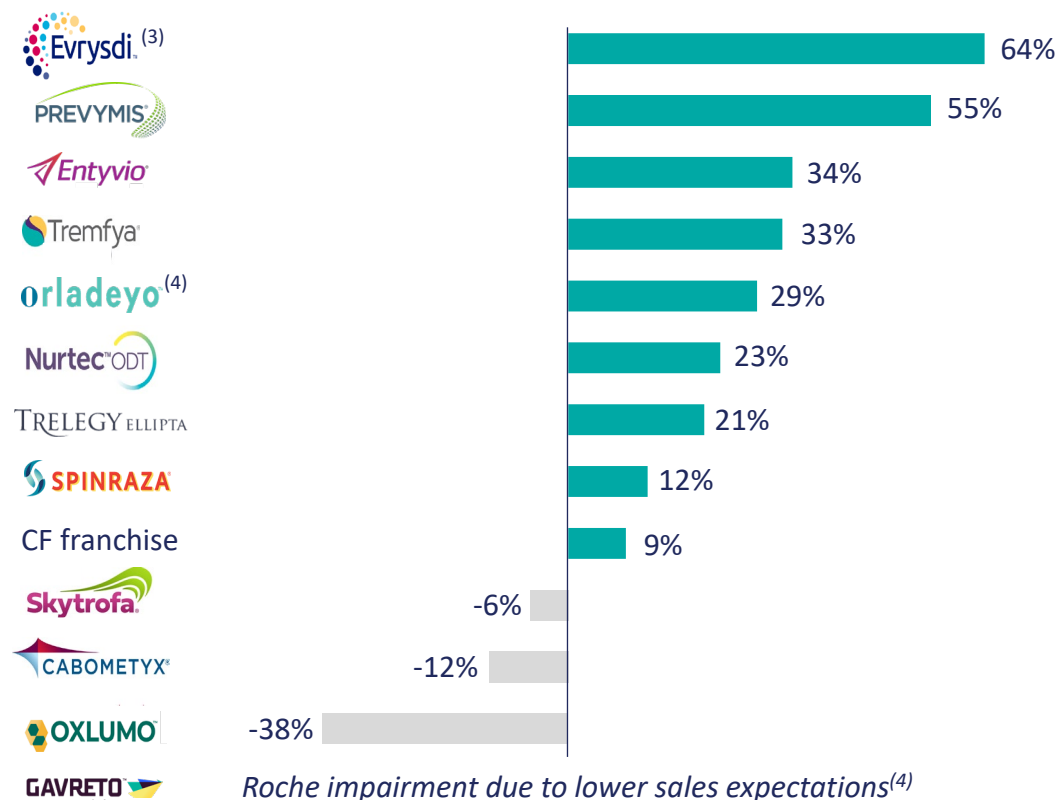
Duration of portfolio  
(Today)



~13 year weighted average royalty portfolio duration

# Strong early performance of recent transactions<sup>(1)</sup>

Percent change in 2025 consensus sales<sup>(2)</sup> since acquisition  
(Transactions since 2020; approved therapies)



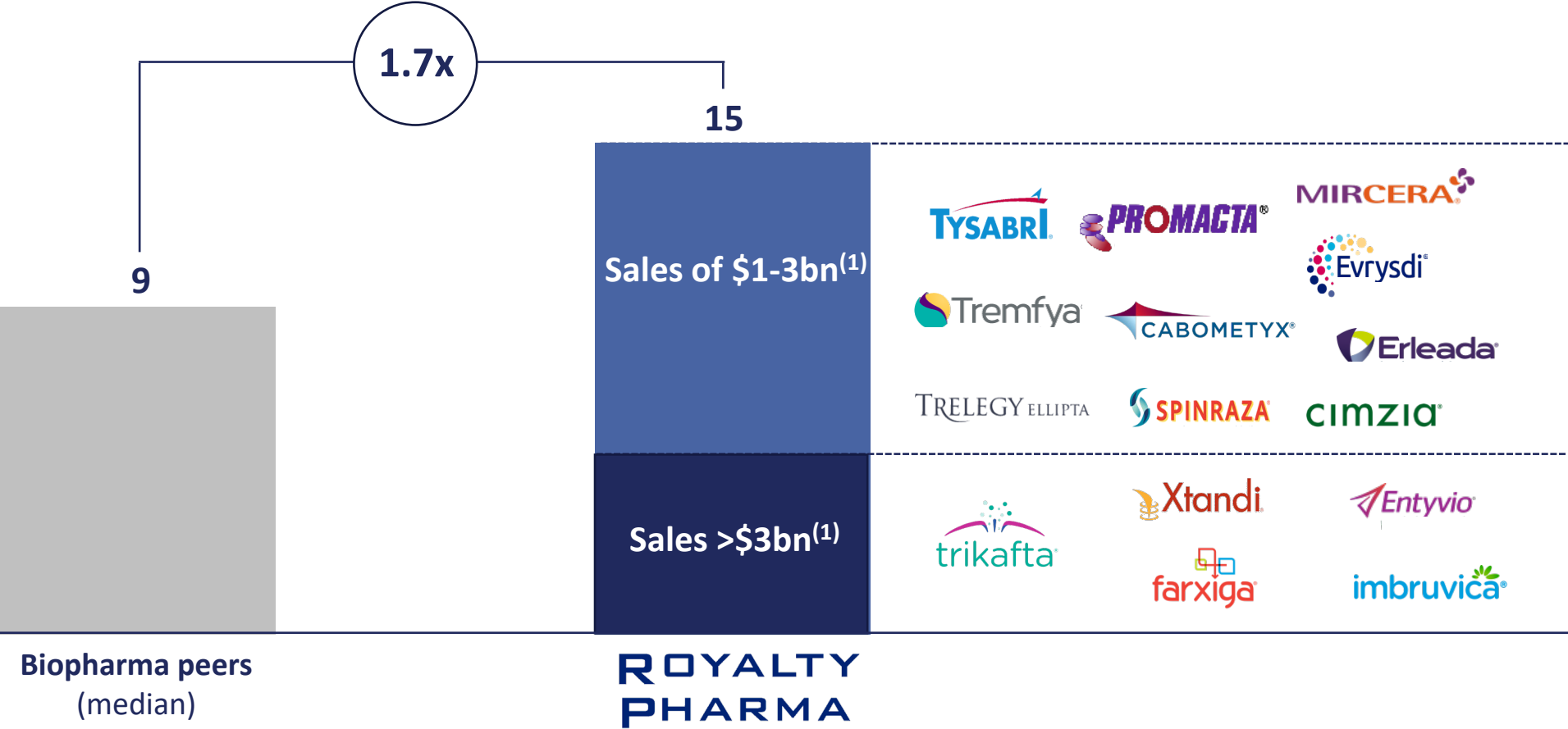
Development-stage therapies  
(Transactions since 2020; select past events)

	Therapy	Indication	Event	Status
Clinical	aficamten	oHCM	Phase 3 results	☑
	pelabresib	Myelofibrosis	Phase 3 results	☑
	Tremfya	Ulcerative colitis	Phase 3 results	☑
	trontinemab	Alzheimer's disease	Phase 1b/2a data	☑
	gantenerumab	Alzheimer's disease	Phase 3 results	☒
	otilimab	Rheumatoid arthritis	Phase 3 results	☒
	BCX10013	PNH	PoC study	☐
Regulatory	KarXT	Schizophrenia	NDA acceptance	☑
	Zavzpret	Migraine	NDA approval	☑
	Airsupra	Asthma	NDA approval	☑
	Evrysdi	SMA	NDA approval	☑

oHCM: obstructive hypertrophic cardiomyopathy; PNH: paroxysmal nocturnal hemoglobinuria; SMA: Spinal muscular atrophy; NDA: New Drug Application; PoC: Proof of Concept.

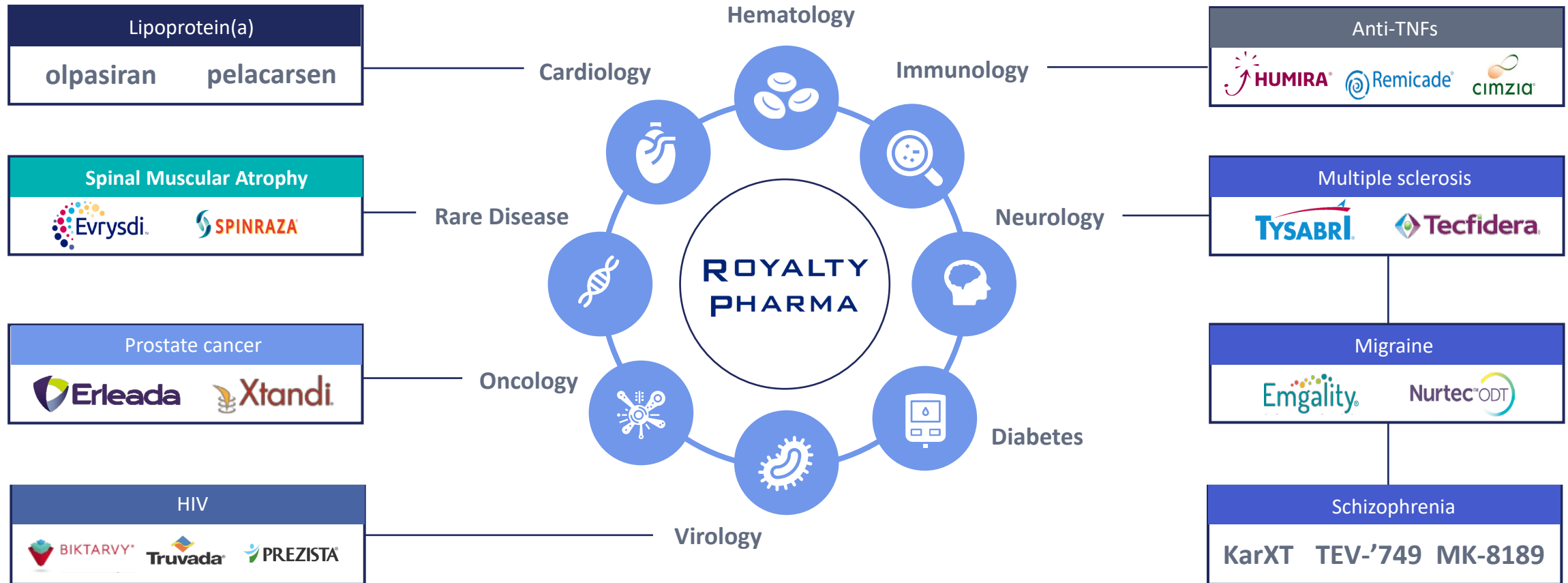
- Recent transactions include transactions since 2020.
- Consensus sales sourced from Visible Alpha as of January 2024 and includes therapies with consensus available at the time of the deal and now.
- Change in Evrysdi consensus sales is from date of initial PTC transaction (July 20, 2020).
- Change in Orladeyo consensus sales is from date of initial BioCryst transaction (December 7, 2020).
- Roche Finance Report 2022, February 2, 2023.

# Industry leading exposure to blockbuster products



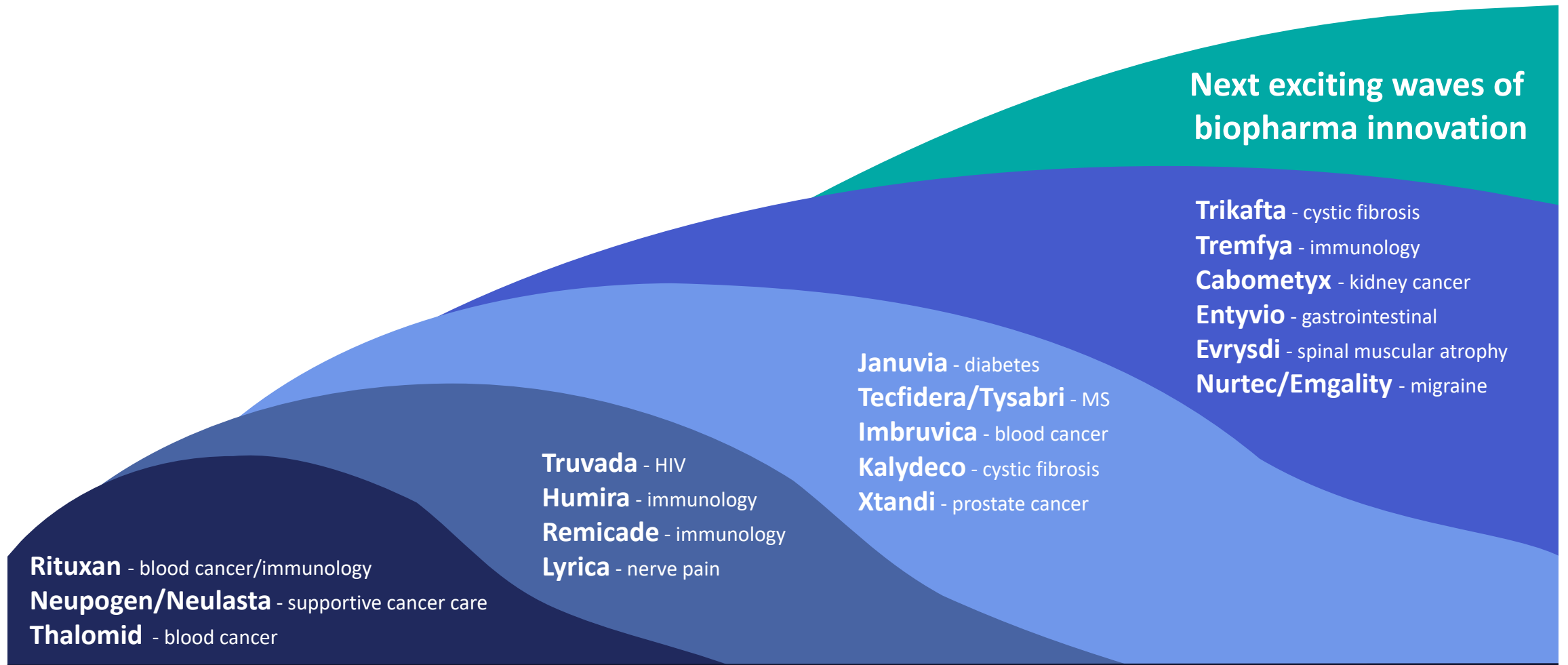
Portfolio includes premier products and franchises backed by strong support from marketers

# Unique ability to invest in multiple products in the same class



Portfolio agnostic to therapeutic area, modality and drug class

# Participating in most important waves of biopharma innovation



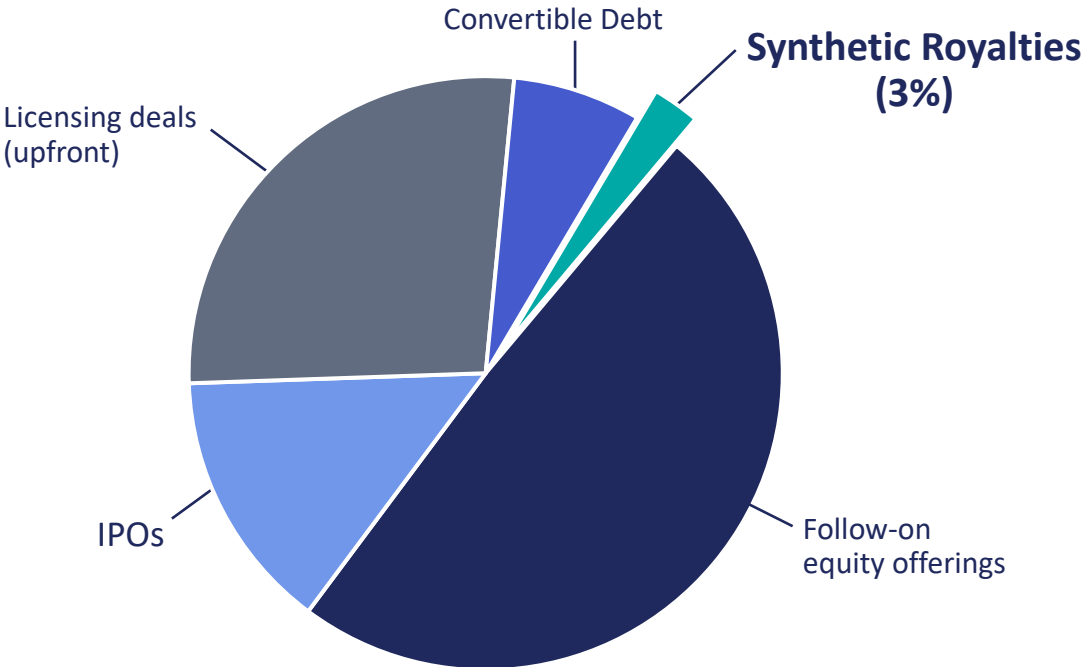
# Synthetic royalties are an attractive funding modality

	Benefits to biopharma partner		
	Royalty	Debt	Equity
Non-dilutive to equity / preserves equity upside	✓	✓	
Customized and tailored funding solutions	✓		
Independent validation of therapy's value to patients	✓		
Share risk of development and/or commercialization	✓		✓
No financial covenants	✓		✓
Long-term alignment of interests	✓		
Value add through proprietary analytics	✓		

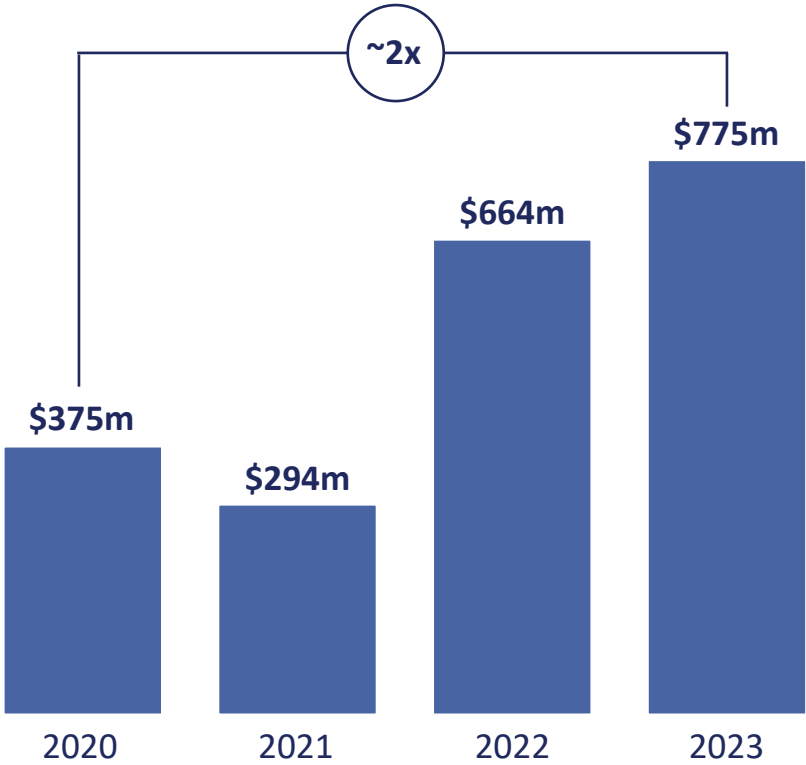
Synthetic royalties – a compelling innovation with significant growth potential

# Synthetic royalty opportunity is large and rapidly growing

>\$260bn biopharma industry funding<sup>(1,2)</sup>  
(2019-2023)



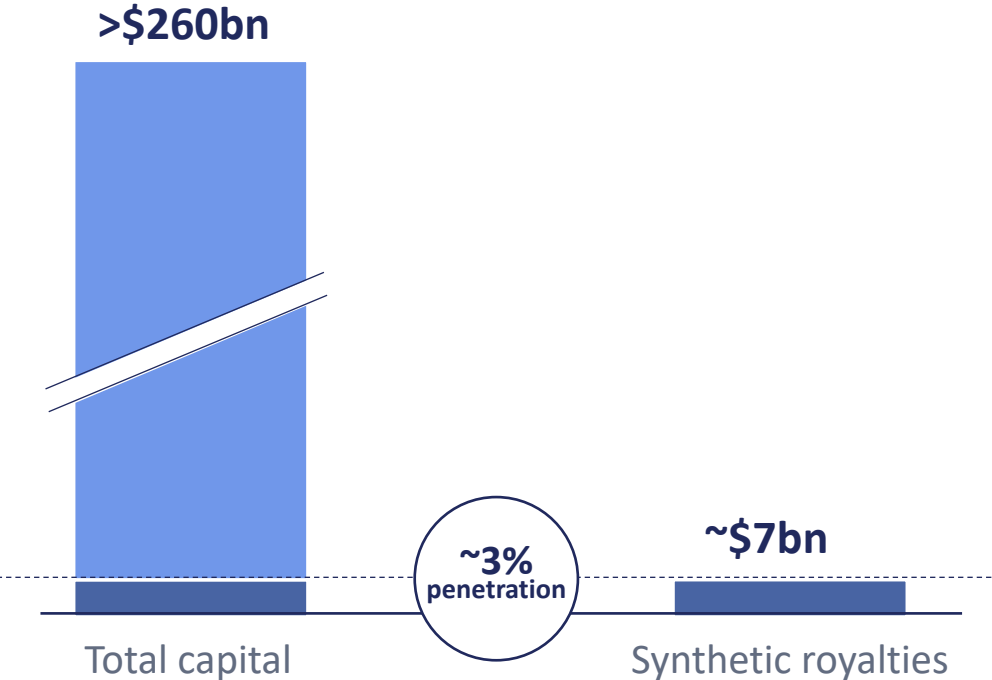
Strongest year ever for RP synthetic royalty transactions  
(Announced value)<sup>(3)</sup>



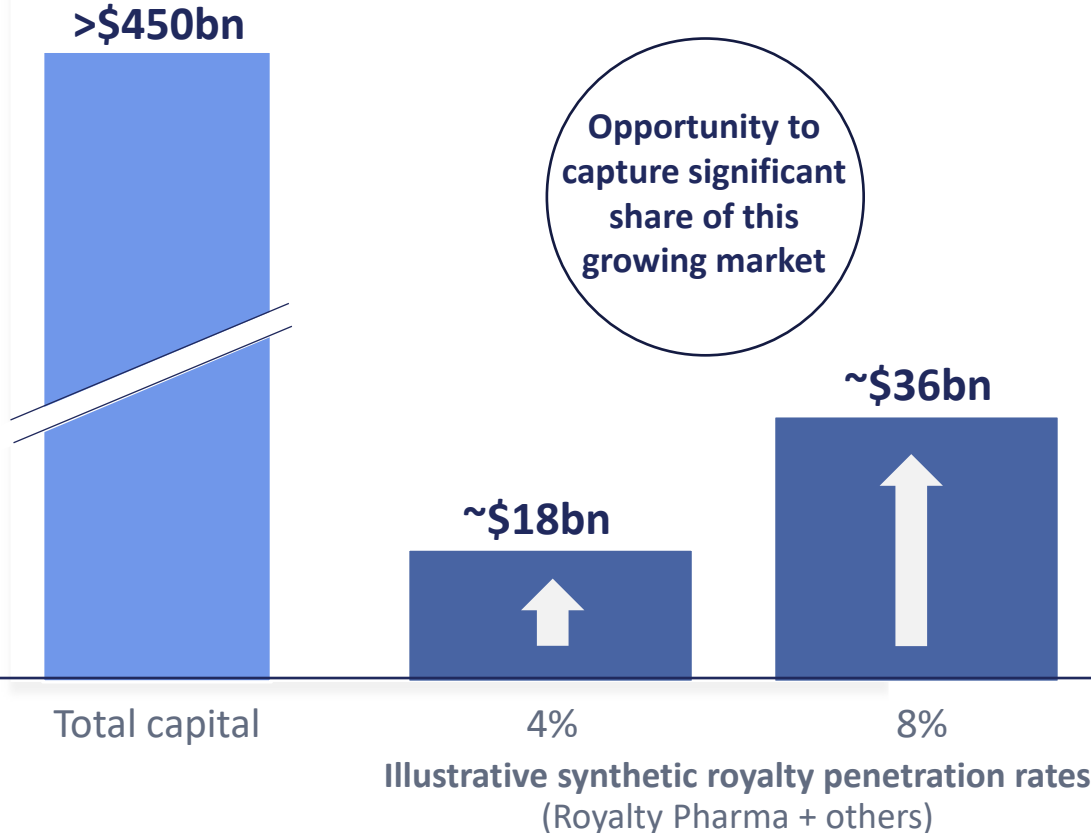
Source: Dealogic, Biomedtracker, internal estimates, Evaluate.  
 1. Includes capital raised through initial public offerings (IPOs), follow-on offerings, equity linked issuances and upfronts from licensing deals.  
 2. Royalty funding includes upfront investment consideration, including acquisitions of synthetic royalties and associated equity investments.  
 3. Data reflects announced value of transactions, including milestones and contingent payments.

# Synthetic royalty market has room for significant expansion

Biopharma funding sources<sup>(1,2)</sup>  
(2019 to 2023)







Synthetic royalty opportunity  
(Cumulative next 5 years<sup>(3)</sup>)



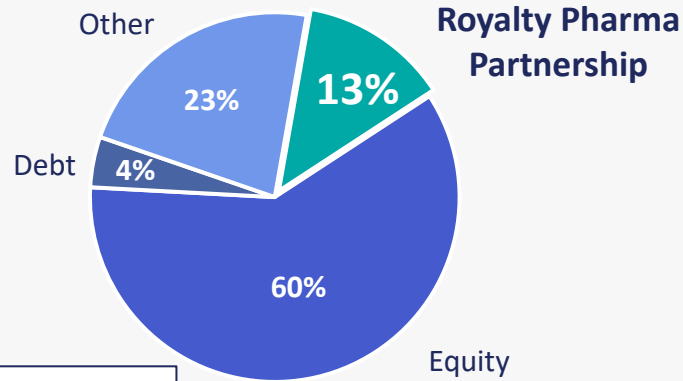
Source: Dealogic, Biomedtracker, internal estimates, Evaluate.  
 1. Includes capital raised through initial public offerings (IPOs), follow-on offerings, equity linked issuances and upfronts from licensing deals.  
 2. Royalty funding includes upfront investment consideration, including acquisitions of synthetic royalties and associated equity investments.  
 3. Estimated capital needs for today's unprofitable biopharmas based on Visible Alpha, Dealogic, internal estimates.

# Providing needed capital for M&A transactions

	Mid-cap M&A	Large pharma M&A	Divestitures
Challenge	Cash flow constraints historically have meant equity is the primary funding source	Non-strategic assets at target companies may significantly increase acquisition price	Increasing FTC scrutiny of M&A transactions may reduce attractiveness of target due to regulatory concerns
Our solution	Enable delivery of cash through synthetic royalty creation, third-party royalty monetization and/or launch and development capital	Reduce net price of acquisition by monetizing non-strategic royalty assets at target companies acquired by large pharma	Finance the acquisition of assets that must be divested due to anti-trust concerns
Examples	 	 	<b>Emerging opportunity</b>

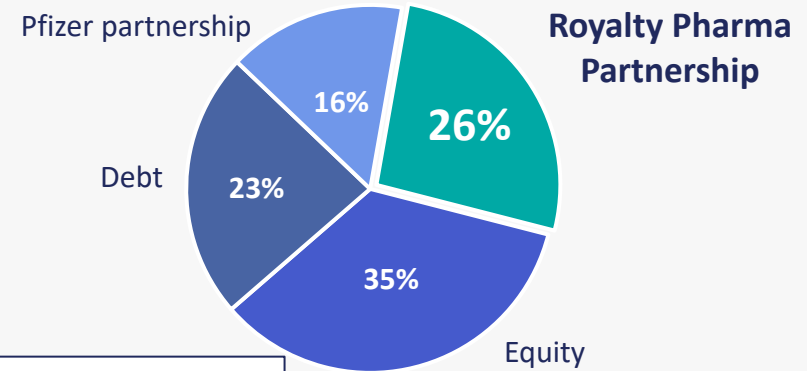
# Emerging funding paradigm for successful biotechs

Immunomedics raised ~\$1.9bn in capital<sup>(1)</sup>



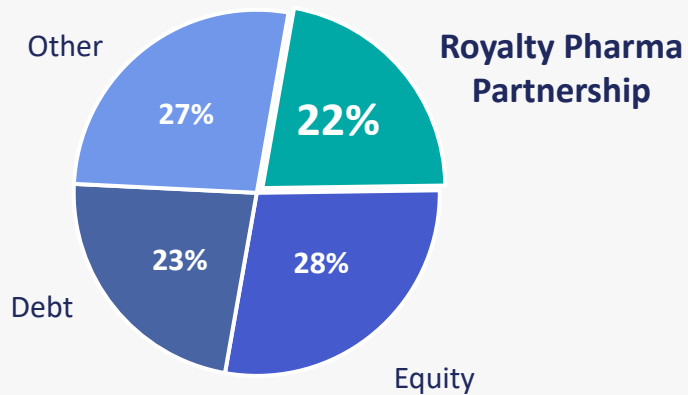
Acquired by Gilead for ~\$21bn  
1.7x CoC return to date + future royalties

Biohaven raised ~\$3.2bn in capital<sup>(2)</sup>

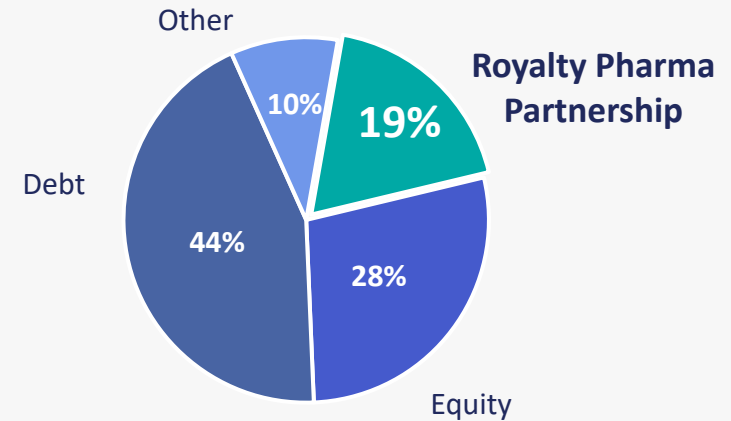


Acquired by Pfizer for ~\$12bn  
1.8x CoC expected return + future royalties

Cytokinetics raised ~\$2.5bn in capital<sup>(3)</sup>



BioCryst raised ~\$1.8bn in capital<sup>(4)</sup>



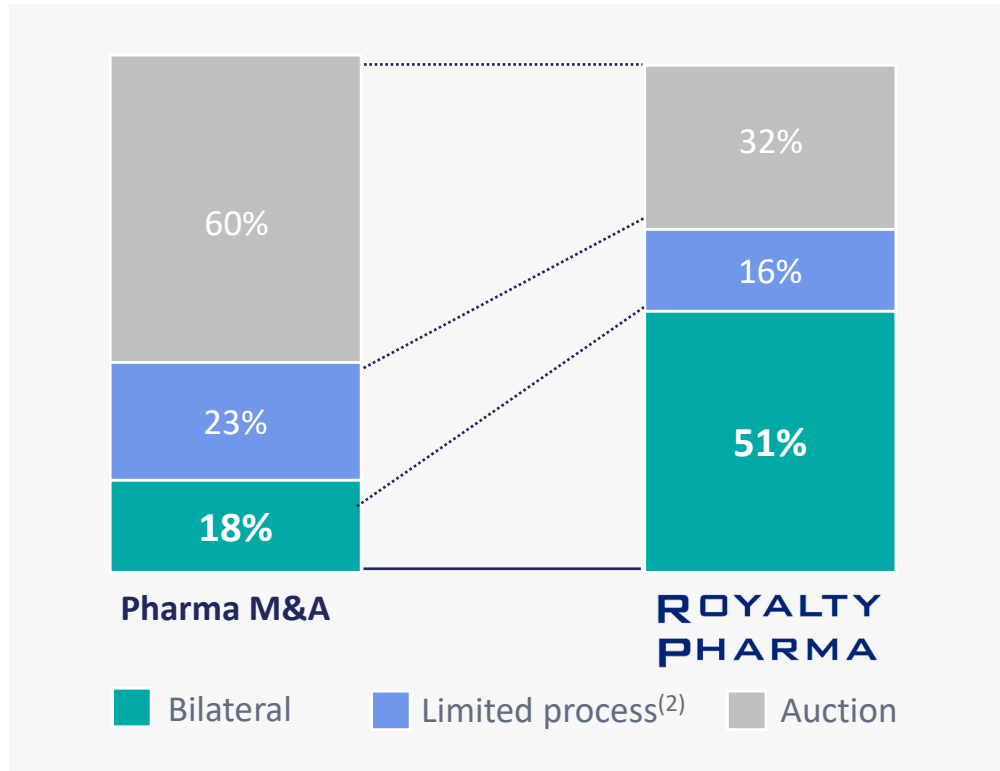
CoC: cash on cash

Note: estimates based on publicly available information as of date of announced transaction. Debt and Royalty Pharma partnerships assume fully drawn facilities and maximum transaction value. Other primarily includes upfront payments. Biohaven CoC return includes expected receipt of \$475 million zavegepant milestone in the first half of 2023.

1. Capital raised since January 1, 2013. 2. Capital raised since Biohaven's May 2017 IPO. Only includes upfront payment from Pfizer partnership. 3. Capital raised since Cytokinetics expanded license agreement with Amgen, June 12, 2013. 4. Capital raised since BioCryst's December 2012 corporate restructuring to focus strategy on advancing hereditary angioedema program.

# Proprietary sourcing provides competitive advantage

Source of deals<sup>(1)</sup>



- ✓ Network of deep relationships
- ✓ Track record of “win-win” outcomes
- ✓ Scale advantages
- ✓ Strong record of value-enhancing acquisitions

Majority of Royalty Pharma transactions negotiated on a bilateral basis

# Unique Research & Investments team and process



Pioneering the royalty market for 25+ years

Innovating new funding solutions, including synthetic royalties



One Royalty Pharma team at the center of every transaction

Long-tenured expert team with deep scientific experience



Open business model: tailored solutions and true partnerships

Proud of partnerships that grow over multiple transactions



Platform built to scale with the royalty market

Team and process growing to address the large opportunity ahead



Exhaustive diligence process sharpened over decades

Able to integrate and interpret a broad and expanding information set



Leveraging big data through Strategy & Analytics

Unique platform for clinical trial analysis and market evaluation

# Our framework focuses on key product success factors



Strong scientific rationale



Significant impact on patients and/or caregivers



Conviction in probability of clinical and regulatory success for pre-approval programs



Mission and execution-oriented management team



Strong marketer and global commercial opportunity



Clear commercial positioning



Potential for multiple indications or label expansion



First-in-class or best-in-class



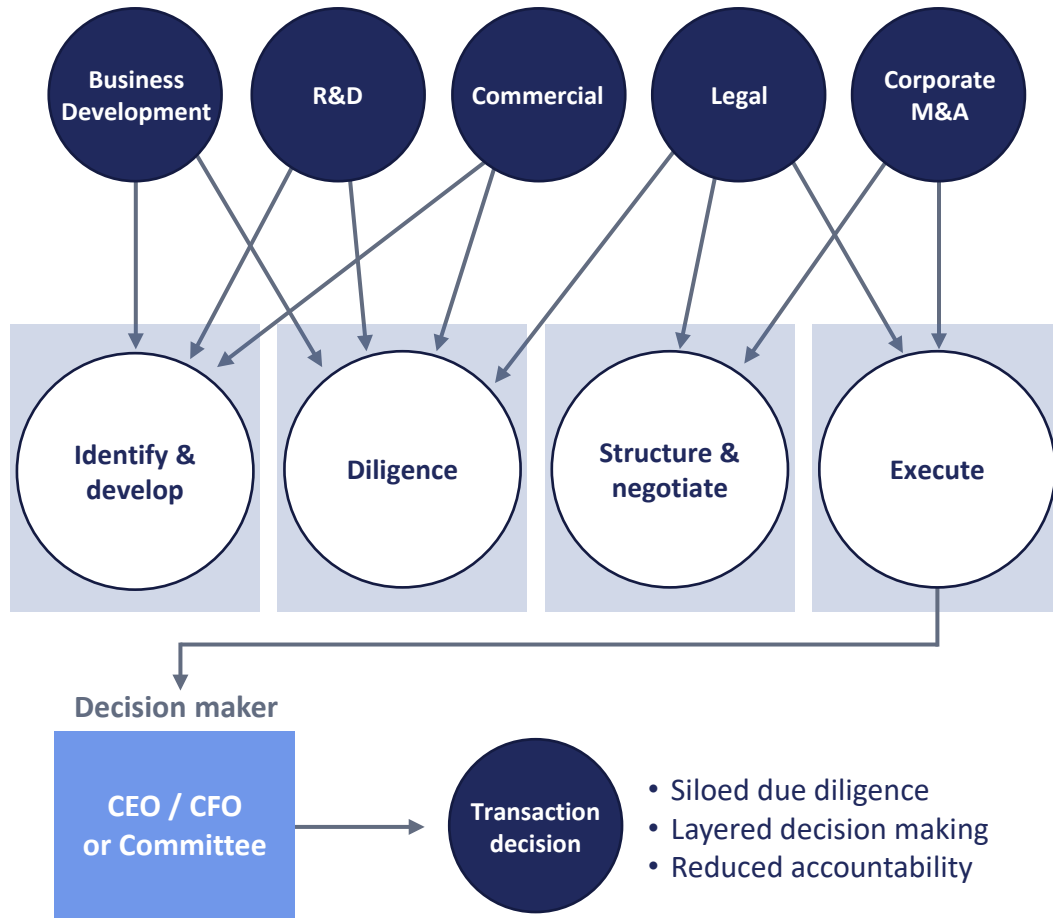
Long duration of patent protection or exclusivity



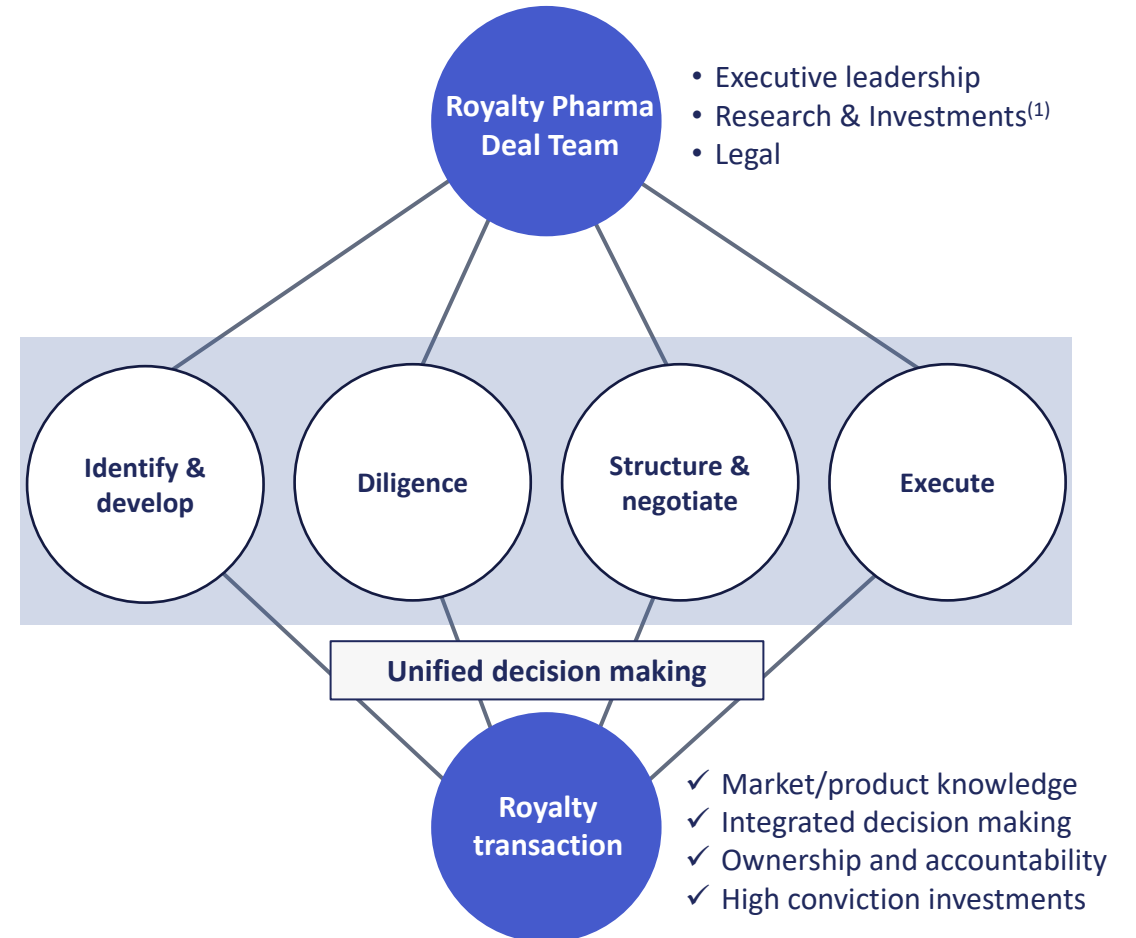
Compelling value proposition for government and commercial payors

# One Royalty Pharma team at the center of every transaction

## Traditional business development



## Royalty Pharma process



# Extensive due diligence process sharpened over decades



## Clinical



## Regulatory, IP, Manufacturing



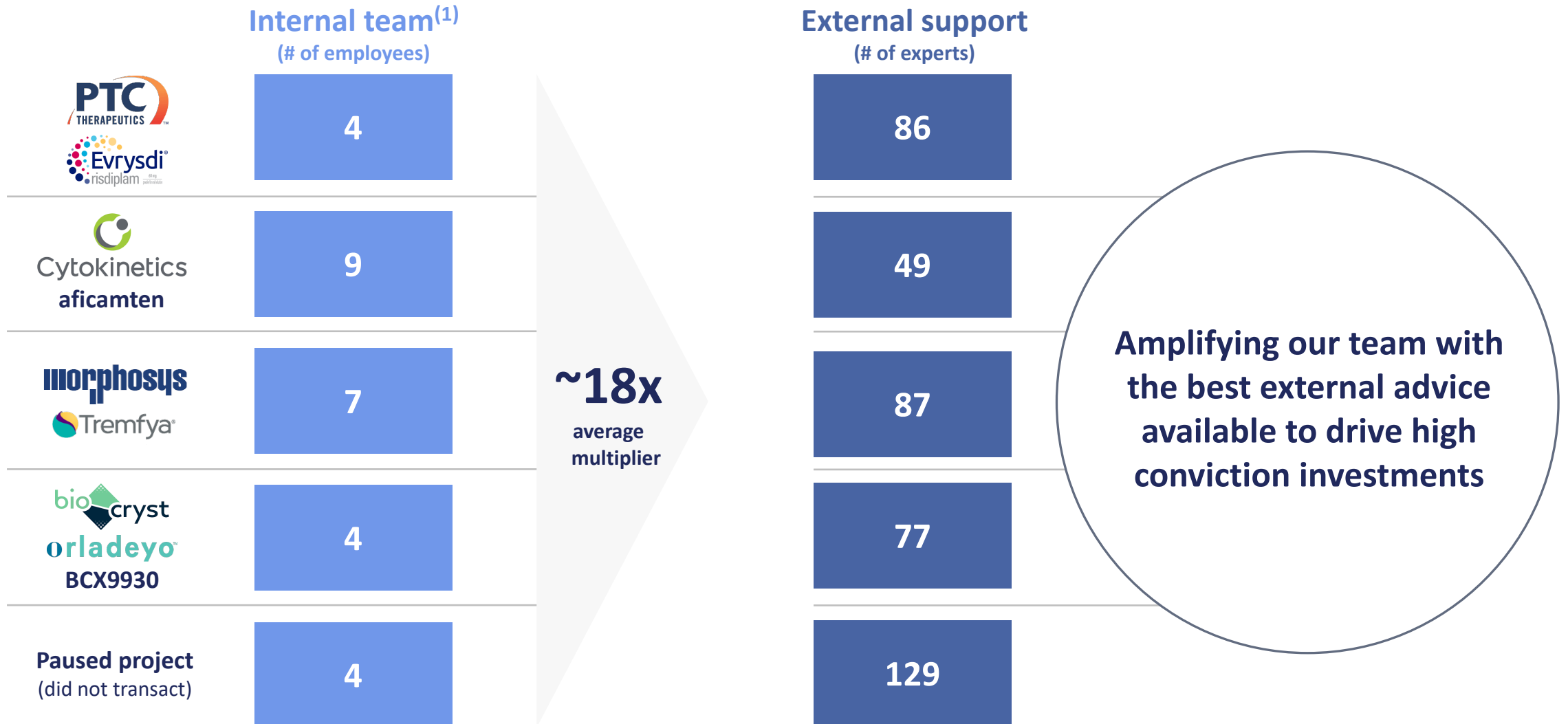
## Commercial



## Contracts, Governance

<b>Physician diligence</b> <ul style="list-style-type: none"> <li>• US/EU/Japan</li> <li>• KOL/academic</li> <li>• Community</li> <li>• Surveys</li> </ul>	<b>Non-clinical</b> <ul style="list-style-type: none"> <li>• Pharmacokinetics</li> <li>• Pharmacodynamics</li> <li>• Dose modeling</li> </ul>	<b>Intellectual property</b> <ul style="list-style-type: none"> <li>• US/EU/Japan and other</li> <li>• Litigation scenario analysis</li> <li>• Multiple opinions</li> </ul>	<b>Claims analysis</b> <ul style="list-style-type: none"> <li>• Patient diagnosis, treatment, compliance</li> <li>• Site of care</li> <li>• Other patient metrics</li> </ul>	<b>Market sizing</b> <ul style="list-style-type: none"> <li>• Patient finding</li> <li>• Claims-driven</li> <li>• Epidemiology</li> <li>• Scaled market surveys</li> </ul>	<b>Transactional</b> <ul style="list-style-type: none"> <li>• Accounting treatment</li> <li>• Tax implications</li> </ul>
<b>Statistics</b> <ul style="list-style-type: none"> <li>• Probability of success</li> <li>• Effect size modeling</li> <li>• Enrollment modeling</li> <li>• Statistical Analysis Plans</li> </ul>	<b>Toxicology</b> <ul style="list-style-type: none"> <li>• Animal toxicologists</li> <li>• Specialized areas – (i.e., ophthalmology)</li> </ul>	<b>Manufacturing</b> <ul style="list-style-type: none"> <li>• Modality expertise: small molecule, biologics, gene therapy</li> <li>• Regulatory perspectives</li> <li>• Capacity planning</li> </ul>	<b>US pricing</b> <ul style="list-style-type: none"> <li>• Pricing modeling</li> <li>• Gross-to-net modeling</li> </ul>	<b>Payors</b> <ul style="list-style-type: none"> <li>• Payor/PBM executives</li> <li>• Formulary analyses</li> </ul>	<b>Licensing and contracts</b> <ul style="list-style-type: none"> <li>• Analysis of contract language</li> <li>• Risk assessment</li> <li>• Expert structuring and drafting</li> </ul>
<b>Clinical</b> <ul style="list-style-type: none"> <li>• Interview former R&amp;D executives</li> <li>• Patient level data analysis</li> <li>• Immunogenicity and specific safety observations</li> <li>• Clinical trial design and study reports</li> <li>• Comparative analysis</li> </ul>	<b>Drug delivery</b> <ul style="list-style-type: none"> <li>• Auto-injectors and devices</li> <li>• Design and human factors</li> <li>• Formulation technologies</li> </ul>	<b>Competition</b> <ul style="list-style-type: none"> <li>• Landscape analysis</li> <li>• Product profile and cost comparisons</li> </ul>	<b>International access</b> <ul style="list-style-type: none"> <li>• Market-by-market pricing</li> <li>• Addressable patients</li> <li>• Yearly access caps and other structures</li> </ul>	<b>Management &amp; governance</b> <ul style="list-style-type: none"> <li>• Experience and strategy</li> <li>• Compensation alignment</li> </ul>	
	<b>Regulatory</b> <ul style="list-style-type: none"> <li>• US/FDA meeting minutes</li> <li>• EU/EMA meeting minutes</li> <li>• International (PMDA, other)</li> <li>• Consultants</li> </ul>	<b>Commercial strategy</b> <ul style="list-style-type: none"> <li>• Interview sales and marketing executives, MSLs and district managers</li> <li>• Required promotional spend</li> </ul>			<b>Environmental, Social &amp; Governance</b> <ul style="list-style-type: none"> <li>• Board oversight</li> <li>• ESG-informed investment processes</li> </ul>
<b>Patients &amp; Caregivers</b> <ul style="list-style-type: none"> <li>• Efficacy, tolerability, convenience perspectives</li> <li>• Social media</li> </ul>					

# Leveraging the best internal and external expertise available



# Our ambitious vision for Strategy & Analytics

## Strategic search and evaluation



Development landscape scanning



Therapeutic area mapping



Monitoring emerging science



Clinical trial meta-analysis and design

- Horizon scanning to position Royalty Pharma for the future
  - Identify emerging target companies and products
  - Enhance knowledge of pipelines and mechanisms in development
  - Perform clinical trial analysis and competitive intelligence
  - Stay ahead of faster biopharma innovation cycles
- Earlier partner engagement benefits business development

## Data and analytics



Medical claims analysis



Real world evidence



Sales & marketing benchmarking



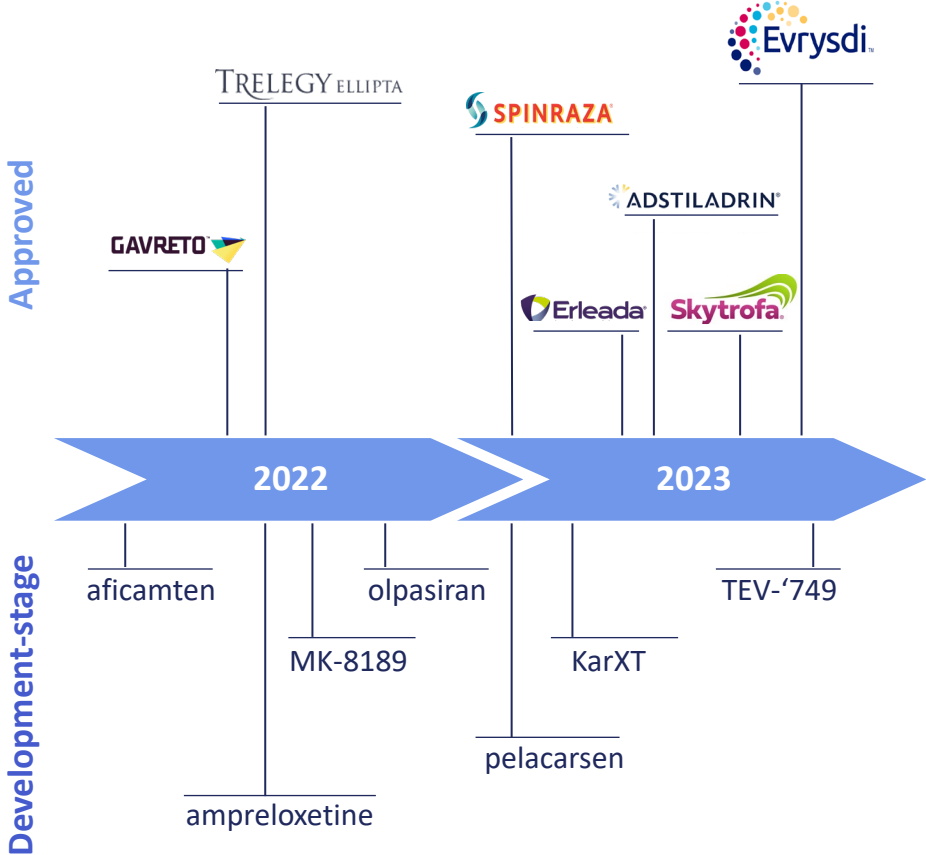
Payor & formulary landscape

- Unique insight from proprietary integration of data sources
  - Automation to ensure full coverage at scale
- Best-in-class platform for market evaluation and forecasting
  - Patient mapping – diagnosis, procedures and treatment
  - Long-term ambition to develop for global markets

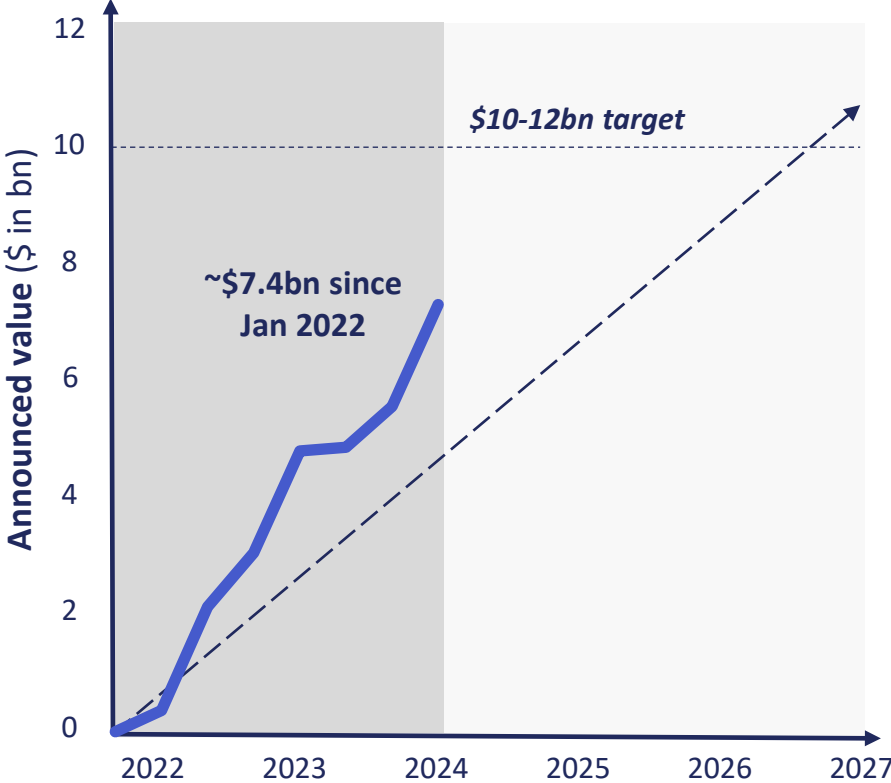
Strategy & Analytics improves Royalty Pharma's investment process and adds value to our partners

# On track to meet or exceed 5-year capital deployment target

Transactions announced in 2022 and 2023



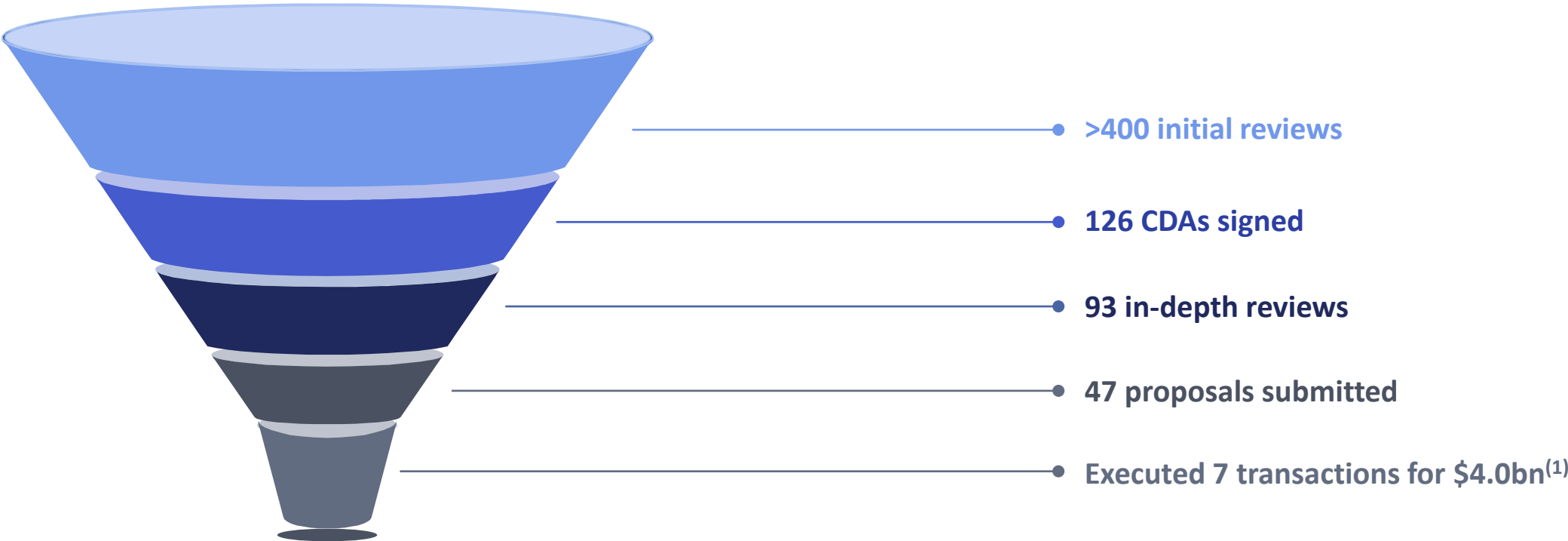
5-year capital deployment target<sup>(1,2)</sup>  
(Announced value, since January 1, 2022)



1. See slide 60 for factors that may impact our capital deployment target.  
2. Capital deployment target provided at May 17, 2022 Investor Day.

# Announced \$4.0 billion of transactions in 2023

2023 Royalty Pharma investment activity



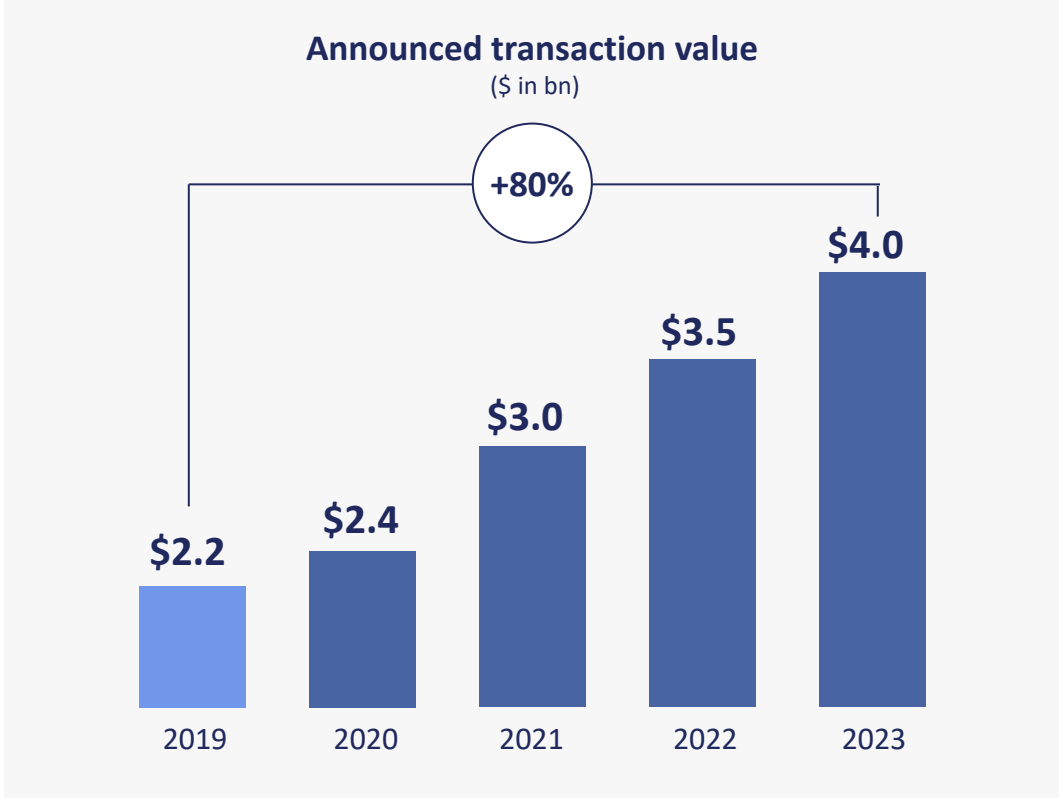
Maintained strong financial discipline: ~2% of initial reviews resulted in an acquired royalty

# Strong Royalty Pharma pipeline trends given market backdrop

### Opportunity set increasing



### Robust royalty acquisition activity



# Acquired approved and development-stage royalties

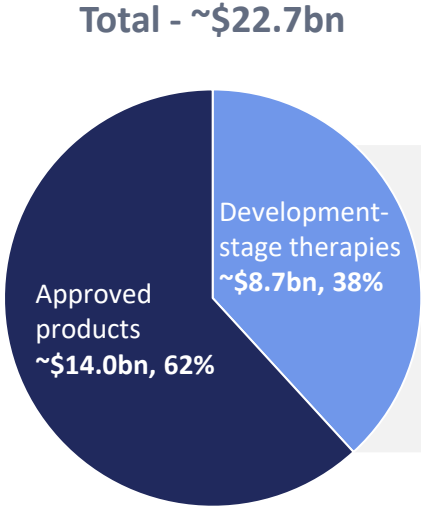
**Approved products (2)**

- Predictable and de-risked cash flows
- Growth from increased penetration
- Additional upside from new indications / geographies

**Development-stage therapies**

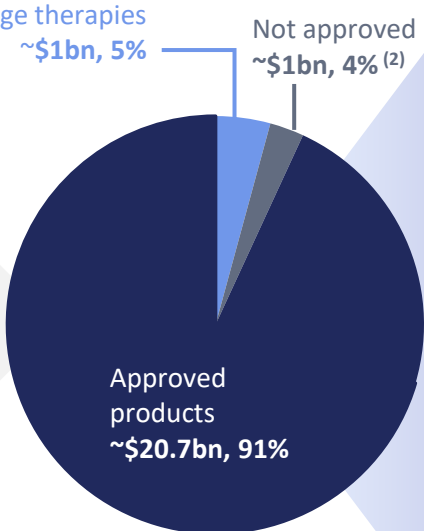
- Broad landscape of opportunities
- Require strong proof-of-concept data
- Significant upside potential

Status at acquisition(1)



~\$6.6bn or 77% of Development-stage therapy acquisitions are now approved

Current status(1)



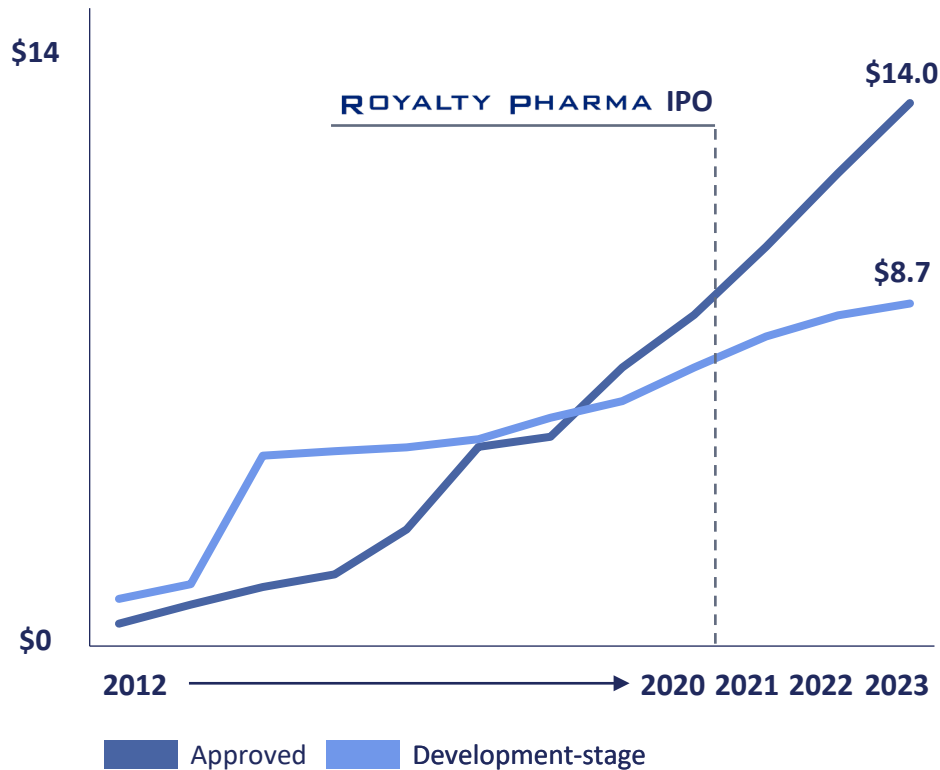
Approved since acquisition

- Bosulif
- Evrysdi
- imbruvica
- Nurtec ODT
- TAZVERIK
- Tecfidera
- trikafta
- TRODELVY
- AIRSUPRA

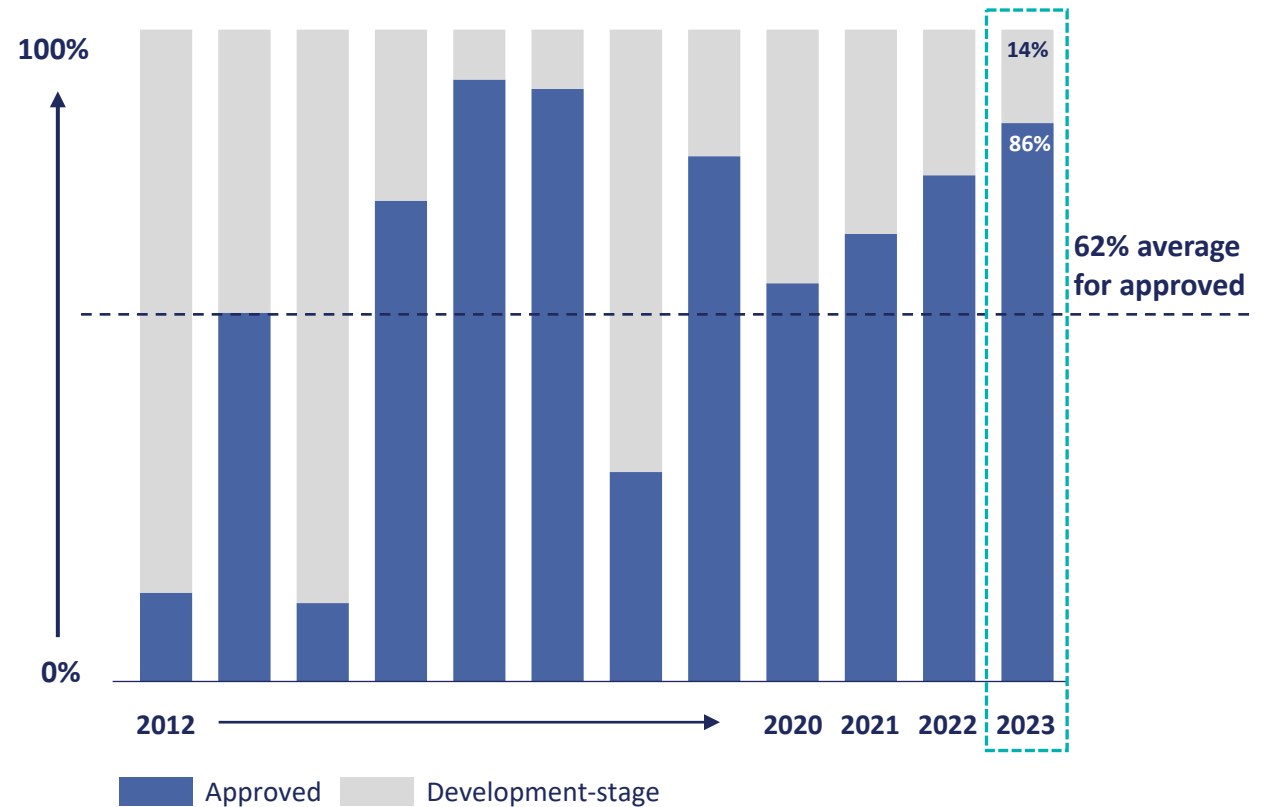
1. Reflects cash deployed for royalty acquisitions from 2012 through Q4 2023.  
 2. Not approved includes investments in omecamtiv, gantenerumab, otilimab, BCX9930, vosaroxin, palbociclib and Merck KgaA's anti-IL17 nanobody M1095.

# Healthy mix of approved and development-stage therapies

~\$22.7 billion in cumulative capital deployed  
(\$ in billions)



Annual capital deployment



Capital deployed balanced on average across approved and development-stage therapies with some annual variability

# Capital allocation strategy to drive shareholder value creation

\$20 billion in projected 2022-2026 capacity to reinvest and return to shareholders

## Royalty acquisitions

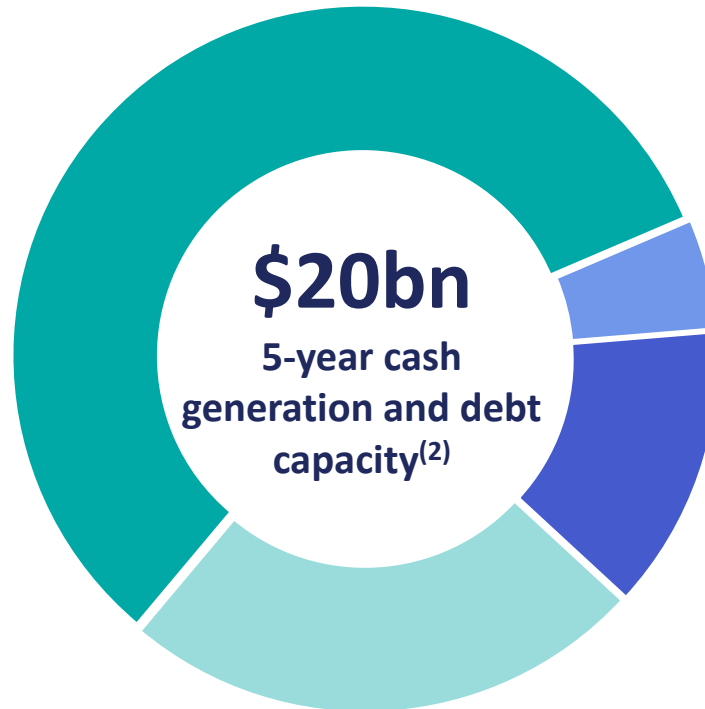
**\$10-\$12bn 5-year target<sup>(1)</sup>**

- Announced ~\$7.4bn since 2022 (~\$4.2bn deployed upfront)
- Robust and active transaction pipeline
- Largely self-funded over time via retained cash flow

## Additional Capacity

**Royalty investments prioritized**

- >\$4bn capacity with conservative leverage
- Committed to investment grade credit rating



## Share repurchases

**Up to \$1bn** (announced March 2023)

- Received shareholder approval at AGM in June 2022
- Repurchased ~10 million shares for \$305m through November 7, 2023
- Authorization valid through June 2027

## Dividends

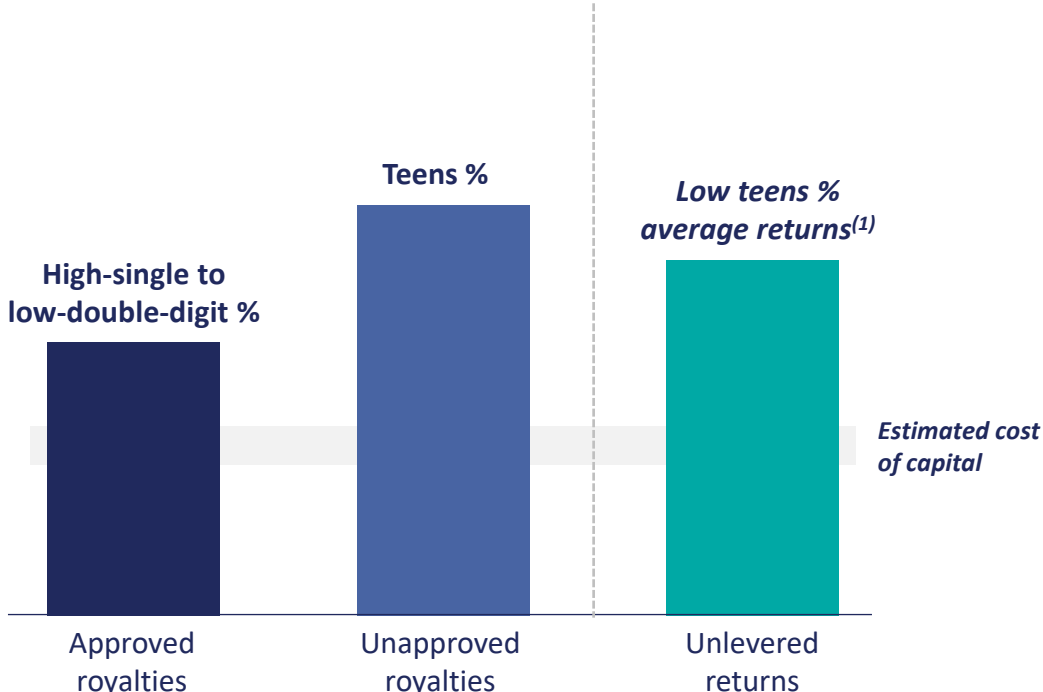
**~3% annual yield**

- Current dividend of \$0.20/quarter
- Commitment to the dividend

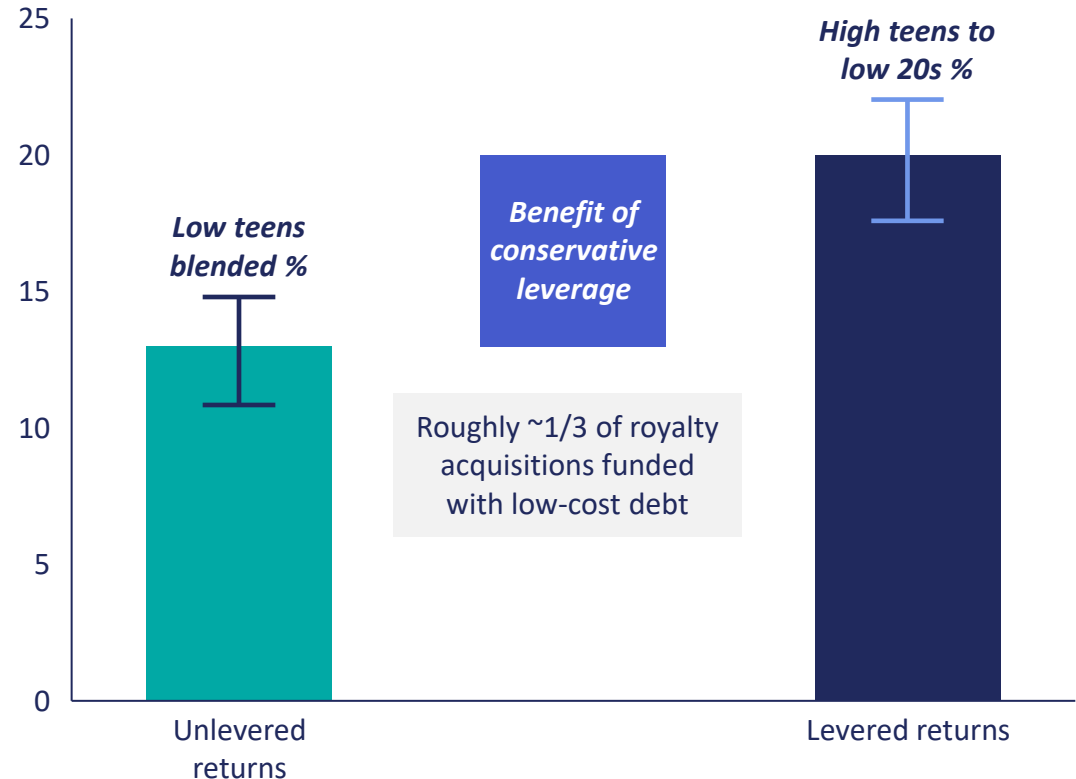
Capital allocation balances primary focus of acquiring royalties with returning capital to shareholders

# Consistently attractive returns amplified by conservative leverage

Royalty Pharma target returns



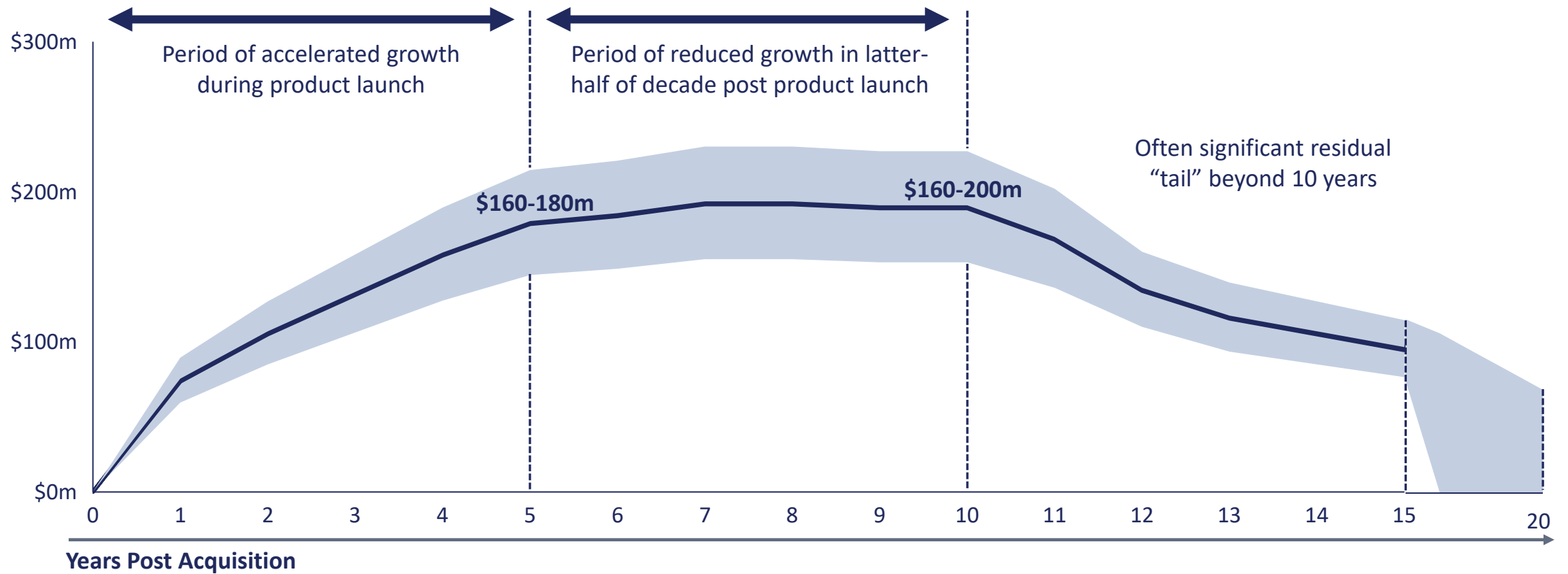
Leverage benefit to target returns



Expect to consistently deliver attractive returns above cost of capital regardless of interest rate environment


# What does \$1bn of investment mean for future top-line?

Representative annual Portfolio Receipts<sup>(1,2)</sup> (“top-line”) from \$1bn of investment - based on blend of historical acquisitions  
(As of May 2022 Investor Day)



# CF to remain important contributor regardless of triple scenario

See Appendix slide 54 for details

Scenarios	Components	Triple combination blended royalty <sup>(1)</sup>	2030 franchise sales	2030 PR from CF <sup>(3)</sup>	Duration <sup>(4)</sup>
<b>Status quo</b> 	<div style="display: flex; gap: 10px;"> <div style="background-color: #2c4e64; color: white; padding: 5px;">elxacaftor</div> <div style="background-color: #2c4e64; color: white; padding: 5px;">ivacaftor</div> <div style="background-color: #2c4e64; color: white; padding: 5px;">tezacaftor</div> </div>	~9%	~\$11.5bn Vertex consensus <sup>(2)</sup>	~\$900m from ~\$750m in 2023	2037
<b>RP position</b> <b>New CF Triple</b> (deuterated ivacaftor <u>is</u> royalty bearing)	<div style="display: flex; gap: 10px;"> <div style="background-color: #ccc; padding: 5px;">vanzacaftor</div> <div style="background-color: #2c4e64; color: white; padding: 5px;">deuterated ivacaftor</div> <div style="background-color: #2c4e64; color: white; padding: 5px;">tezacaftor</div> </div>	~8%	\$13bn+ RP view with new CF triple <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <b>Upside drivers:</b>                          ~6,000 discontinued patients, geographic &amp; age expansion, patient growth                     </div>	~\$900-950m +\$0-\$50m vs status quo	2039-2041
<b>New CF Triple</b> (deuterated ivacaftor <u>not</u> royalty bearing)	<div style="display: flex; gap: 10px;"> <div style="background-color: #ccc; padding: 5px;">vanzacaftor</div> <div style="background-color: #ccc; padding: 5px;">deuterated ivacaftor</div> <div style="background-color: #2c4e64; color: white; padding: 5px;">tezacaftor</div> </div>	~4%		~\$600-700m -\$200-\$300m vs status quo	

Royalty bearing components

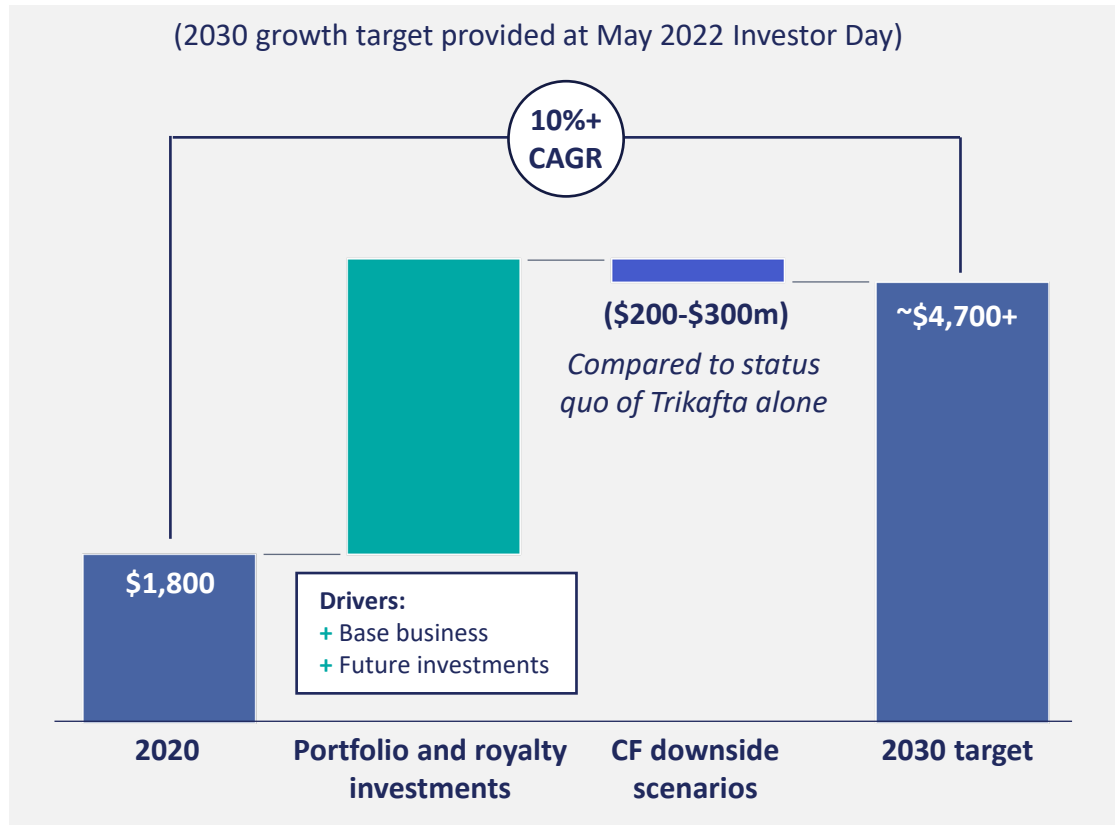
Reflects 50-75% conversion from Trikafta to new CF triple

NPV impact of potential downside scenarios are estimated to be \$1-\$2 per share

# Long-term growth powered by consistent portfolio refreshment

## Portfolio Receipts evolution through 2030<sup>(1)</sup>

(2030 growth target provided at May 2022 Investor Day)



## Continued execution on strategy



### Power of business model

- Transactions since 2020 expected to add ~\$1bn in PR by 2025



### Future capital deployment

- Tracking to meet or exceed capital deployment guidance of \$10-\$12 billion from 2022 through 2026



### Increased diversification

- The CF franchise will become a smaller portion of the business as we continue to scale
- CF is ~30% of 2022 PR prior to Biohaven payments and expected to decline to teens % of 2030 PR

Expect to deliver 10%+ top-line CAGR over the decade under downside CF scenarios

# Well positioned in evolving interest rate environment

## Existing capital structure

### Long duration, low-cost debt an underappreciated asset

- Fixed weighted-average coupon of ~2.5% on \$6.3bn of investment grade bonds
- ~70% of existing bonds due 2030 or later
- Committed to investment grade rating
- Revolving credit facility of up to \$1.5bn

## Future investments

### Higher risk-adjusted returns

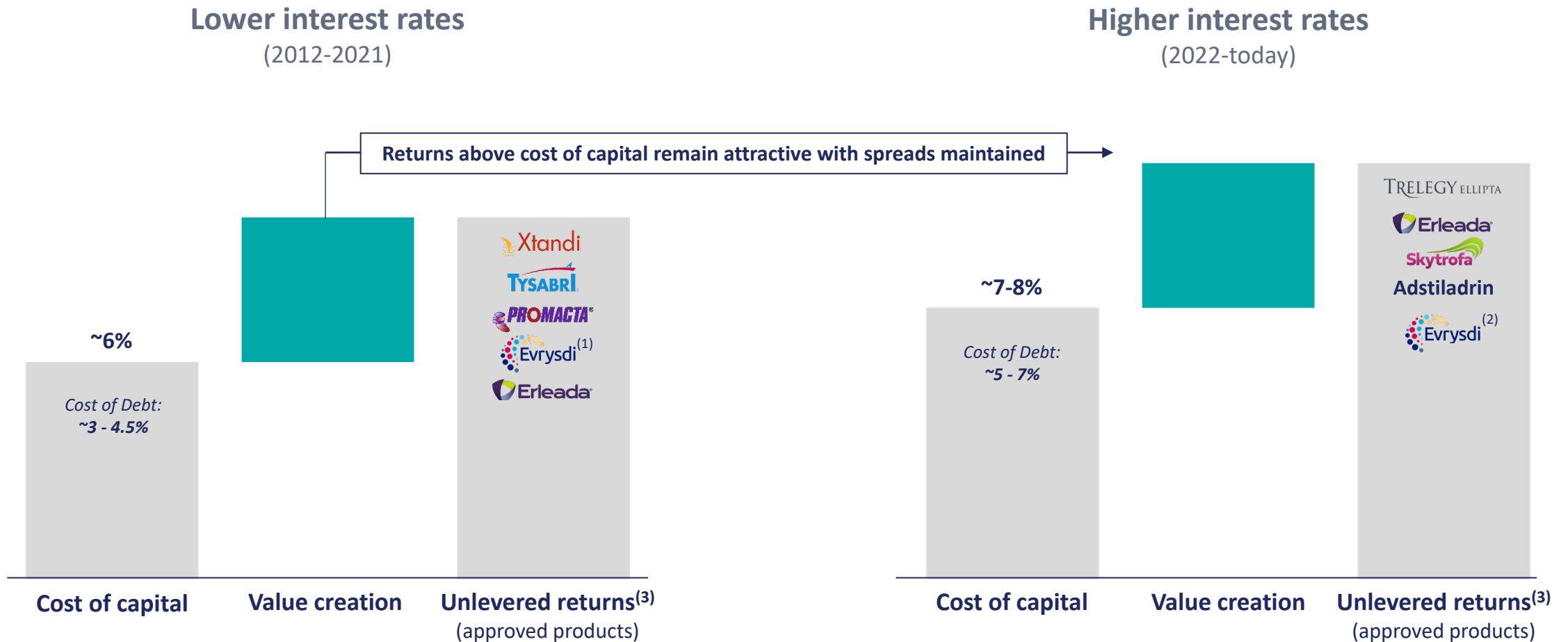
- Higher royalty return expectations in response to higher rate environment
- Maintaining attractive returns above cost of capital with consistent spreads

### Expanding opportunity set

- Higher partner cost of capital accelerates momentum in royalty funding

**Interest rates**

# Continuing to create value in changing market environment



Spreads maintained and larger opportunity set equals greater value creation

1. Transaction purchasing 43% of PTC's Evrysdi royalty announced July 2020.  
 2. Transaction purchasing 67% of PTC's remaining Evrysdi royalty announced October 2023.  
 3. Illustrative returns reflect a combination of actual results and estimated projected returns for investments from 2012 – 2023 YTD. IRR (or returns) are calculated using total cash outflows and total cash inflows, in each case including royalties, milestones and other cash flows.

# Maximizing industry strengths and minimizing challenges

## ↑ Maximizing

- Exposure to transformative therapies
- Revenue and profit diversification
- Therapeutic area breadth
- Long weighted average portfolio duration
- Consistent and sustainable growth
- Management team continuity
- Shareholder alignment
- Opportunity - entire R&D ecosystem is our pipeline

ROYALTY  
PHARMA

## ↓ Minimizing

- Early-stage development risk
- R&D and SG&A cost base
- Therapeutic area bias
- Highly competitive business development
- Late-stage clinical binary risk

# A unique way to invest in biopharma

		<b>ROYALTY PHARMA</b>	<b>Large biopharma<sup>(1)</sup></b>
<b>Growth</b>	<b>2020-2030 top-line<sup>(2)</sup> CAGR</b>	<b>10% or more<sup>(2)</sup></b>	<b>5%<sup>(3)</sup></b>
<b>Scale</b>	<b>Number of blockbusters<sup>(4)</sup></b>	<b>15</b>	<b>9</b>
<b>Cost of capital</b>	<b>Estimated WACC</b>	<b>~7-8%</b>	<b>~7-8%</b>
<b>Risk</b>	<b>Stage of development</b>	<b>Post proof-of-concept to approved</b>	<b>Pre-clinical to approved</b>
<b>Return</b>	<b>Historical return on investments<sup>(5)</sup></b>	<b>Consistent low teens IRR</b>	<b>?</b>
<b>Income</b>	<b>Dividend yield</b>	<b>~3%</b>	<b>~3.5%</b>
<b>Ownership</b>	<b>Management % ownership of FDSO</b>	<b>16%<sup>(6)</sup></b>	<b>&lt;1%<sup>(6)</sup></b>

CAGR: compound annual growth rate; WACC: weighted average cost of capital; IRR: internal rate of return; FDSO: fully diluted shares outstanding

1. Consists of Eli Lilly, Johnson & Johnson, Merck, Pfizer, AbbVie, Bristol Myers Squibb, Gilead, Amgen, Biogen, Vertex, Regeneron, Roche, Novartis, GSK, Sanofi, Novo Nordisk and AstraZeneca.

2. Top-line refers to Royalty Pharma's Portfolio Receipts and includes future investments. Royalty Pharma growth target provided at May 2022 Investor Day. See slide 60 for definitions.

3. Source: Visible Alpha.

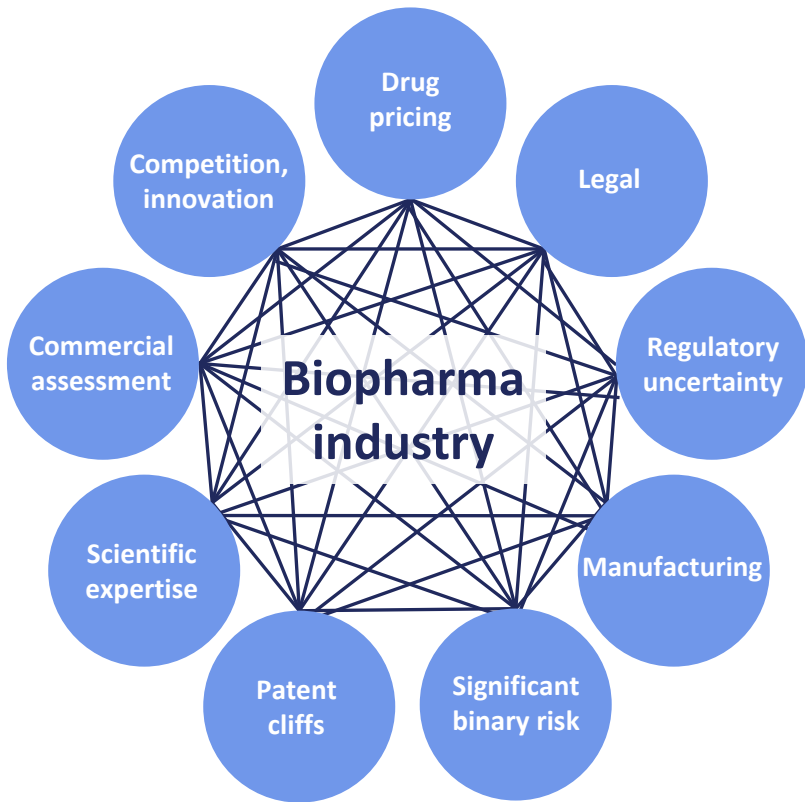
4. Calculated based on 2022 end market sales and excludes products tied to recently expired royalties.

5. Historical return on investments for Royalty Pharma is from 2012 to Q3 2023; IRR (or returns) are calculated using total cash outflows and total cash inflows, in each case including royalties, milestones and other cash flows. Biopharma returns on investments in business development, M&A and R&D.

6. Represents Named Executive Officer (NEO) ownership reported by CapIQ for Large biopharma; Royalty Pharma NEO ownership as disclosed in 2022 proxy filing.

# A simple investment proposition in a highly complex industry

Successful biopharma investing is extremely complex




**ROYALTY PHARMA** offers a simple solution

- ✓ Efficient business of collecting share of top-line revenues on leading products
- ✓ Strong track record of product selection
- ✓ Rigorous diligence processes
- ✓ Highly diversified portfolio
- ✓ Minimal binary clinical risk
- ✓ Proven ability to replenish portfolio

## Appendix

**ROYALTY PHARMA**

# Detailed calculation assumptions for CF triple scenarios

Scenarios	Product	Blended royalty <sup>(1)</sup>	Sales split	Franchise sales	Royalty Receipts	NCI %	2030 PR from CF <sup>(3)</sup>
Status quo (Trikafta only)		~9%	100%	~\$11.5bn <sup>(2)</sup>	~\$1,050m	(13%)	~\$900m
RP position: New CF Triple (deuterated ivacaftor <u>is</u> royalty bearing)	Trikafta	~9%	50%	\$13bn+	~\$1,100m	(13%)	~\$950m
	New CF Triple	~8%	50%				
	<b>Total blended</b>	~9%	100%				
	<hr/>						
New CF Triple (deuterated ivacaftor <u>is</u> royalty bearing)	Trikafta	~9%	25%	\$13bn+	~\$1,050m	(14%)	~\$900m
	New CF Triple	~8%	75%				
	<b>Total blended</b>	~8%	100%				
	<hr/>						
New CF Triple (deuterated ivacaftor <u>not</u> royalty bearing)	Trikafta	~9%	50%	\$13bn+	~\$850m	(15%)	~\$700m
	New CF Triple	~4%	50%				
	<b>Total blended</b>	~7%	100%				
	<hr/>						
New CF Triple (deuterated ivacaftor <u>not</u> royalty bearing)	Trikafta	~9%	25%	\$13bn+	~\$700m	(17%)	~\$600m
	New CF Triple	~4%	75%				
	<b>Total blended</b>	~5%	100%				

Reflects 50-75% conversion from Trikafta to new triple

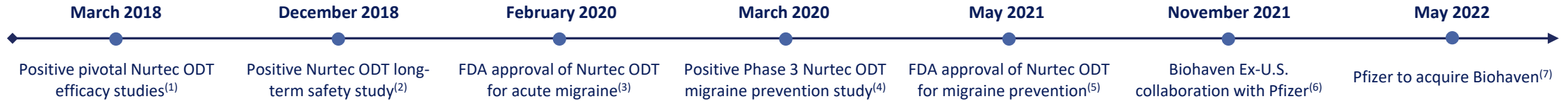
Calculations may not tie due to rounding

# Biohaven partnership blossoms with additional transactions

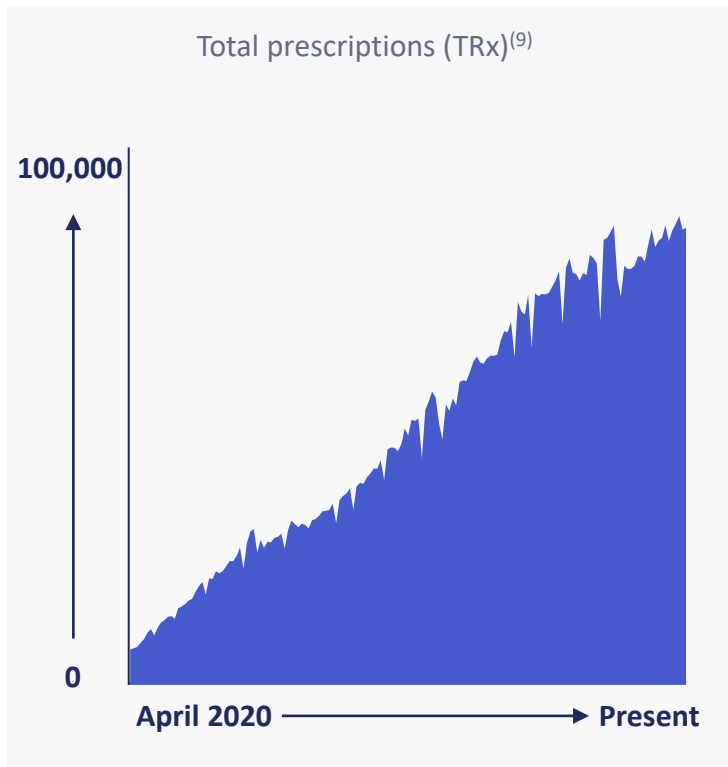
Date	June 2018 <sup>(1)</sup>	December 2018	March 2019 <sup>(2)</sup>	August 2020 <sup>(3)</sup>
Funding type	Royalty and common equity	Common equity	Preferred equity	Royalty and Launch capital
Purpose	Support Nurtec ODT Phase 3 development	Support Nurtec ODT development and FDA filing	Priority review voucher to accelerate Nurtec ODT launch	Pipeline funding and commercialization support
Details	<p><b>\$100m royalty</b> (2.1% royalty on Nurtec ODT and zavegepant sales up to \$1.5bn and 1.5% for sales &gt;\$1.5bn)</p> <p><b>\$50m equity investment</b> (at \$45 per share)</p>	<p><b>\$37m equity investment</b> (at \$37 per share)</p>	<p><b>\$125m preferred equity</b> (upfront)</p> <p><b>Up to \$75m preferred equity</b> (on Nurtec ODT FDA approval – optional, not drawn)</p>	<p><b>\$250m royalty R&amp;D funding</b> (0.4% royalty on Nurtec ODT, up to 3% zavegepant royalty, and potential zavegepant milestones)</p> <p><b>\$200m launch capital</b></p>
Total investment	\$150m	\$37m	Up to \$200m	Up to \$450m

Up to ~\$835m in total funding across multiple deals to accelerate Biohaven's innovative migraine therapies to patients

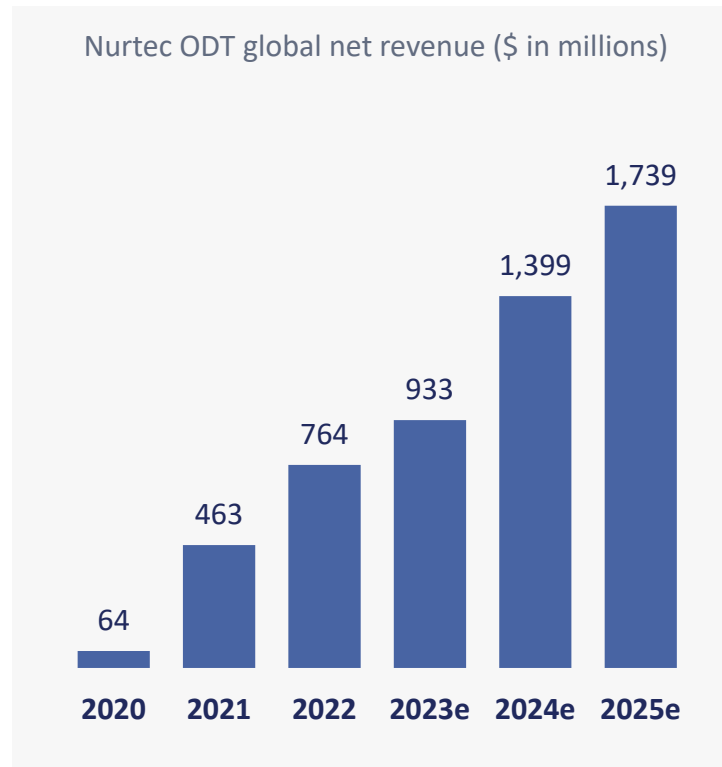
# Nurtec ODT – one of the strongest recent launches in biopharma



## Encouraging oral CGRP<sup>(8)</sup> volumes



## Successful Nurtec ODT launch in US<sup>(10)</sup>



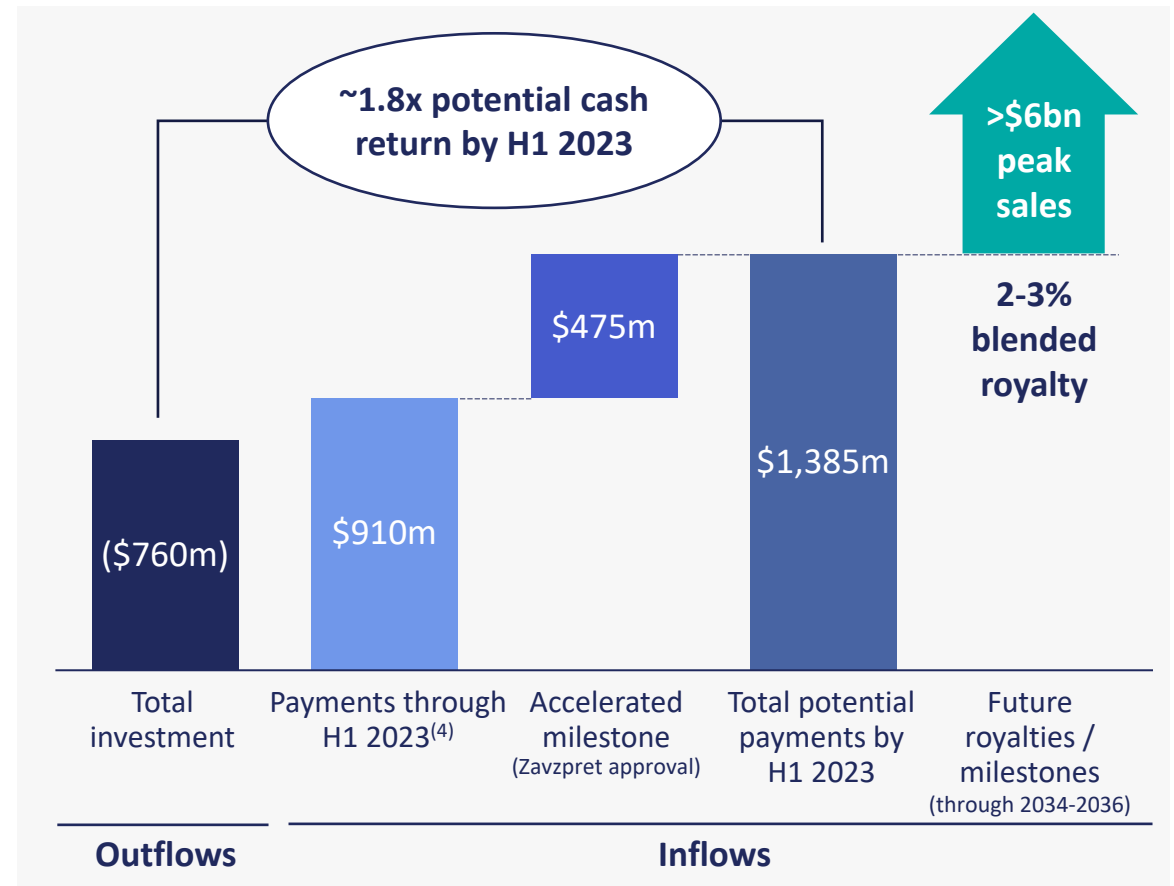
## Pfizer expects significant peak sales<sup>(7)</sup>



# Biohaven acquisition accelerates Royalty Pharma returns

- Pfizer, a strong global marketer, is positioned to maximize the potential of Nurtec ODT and zavegepant
  - Doubling number of sales representatives detailing Nurtec
- Acquisition<sup>(2)</sup> accelerated Royalty Pharma's returns on common and preferred equity
- No impact on Royalty Pharma's royalty terms, which will provide long-duration cash flows
- Entitled to milestones of up to 1.9 to 2.95x funded amount of \$250m related to zavegepant<sup>(3)</sup>
  - Pre-payment option may accelerate returns

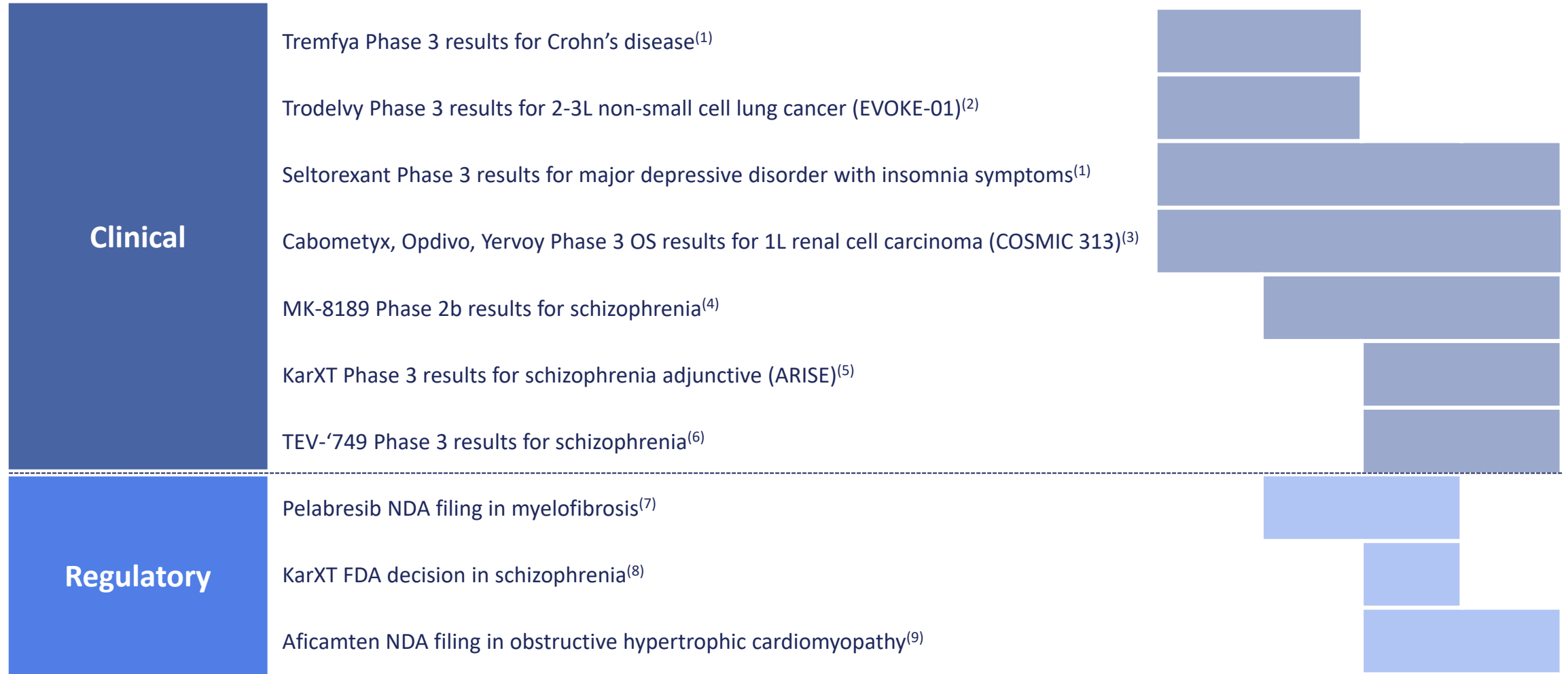
Strong returns for Royalty Pharma shareholders<sup>(1)</sup>



Potential ~1.8x cash return by H1 2023 with further upside from continuing royalties and additional milestones

# Important milestones expected in 2024

## Select expected upcoming events



OS: overall survival; NDA: New Drug Application; FDA: Food & Drug Administration; EC: European Commission

1. Johnson & Johnson 2023 Enterprise Business Review conference call, December 5, 2023. 2. Jefferies London Healthcare Conference, November 15, 2023. 3. Exelixis Q3 conference call, November 1, 2023. 4. www.clinicaltrials.gov. 5. Karuna Q3 earnings press release, November 2, 2023. 6. Teva press release, November 13, 2023. 7. MorphoSys press release, November 20, 2023. 8. Karuna press release, November 29, 2023. 9. Cytokinetics topline results from SEQUOIA-HCM conference call, December 27, 2023.

# Potential royalties on ~40 projects in late-stage development

	Phase 2		Phase 3			Registration
New molecular entity	MK-8189 Schizophrenia	trontinemab Alzheimer's disease	aficamten oHCM	pelacarsen Cardiovascular disease	olpasiran Cardiovascular disease	KarXT Schizophrenia
		tulmimetostat (CPI-0209) Blood cancer, solid tumors	pelabresib 1L Myelofibrosis	ampreloxetine Symptomatic nOH in MSA	seltorexant MDD w/insomnia symptoms	
					TEV-'749 Schizophrenia	
Additional indication	Trodelvy Lung, HNSCC and endometrial	Trodelvy (+ combinations) 1L mUC	Trodelvy 1L TNBC (PD-L1-)	Trodelvy 2L+ mUC	Imbruvica 1L Follicular lymphoma	
	Tazverik (+ hormonotherapy) mCRPC	Trodelvy (+ pembrolizumab) <sup>(1)</sup> 1L mNSCLC	Trodelvy <sup>(2)</sup> 2-3L mNSCLC	Trodelvy (+ pembrolizumab) 1L mTNBC (PD-L1+)	Tremfya Ulcerative colitis	
	seltorexant AD with agitation/aggression	Tremfya Giant cell arteritis	Trodelvy (+ pembrolizumab) Adjuvant TNBC	Trodelvy (+ pembrolizumab) <sup>(5)</sup> 1L mNSCLC	Tremfya Crohn's disease	
		Skytrofa Turner syndrome	Trodelvy HR+/HER2- chemo-naïve mBC	Cabometyx (+ PD1) 1L metastatic RCC	Tremfya PsA Structural Damage	
			Erleada High risk prostate cancer <sup>(3)</sup>	Cabometyx (+ Tecentriq) mCRPC	Spinraza (higher dose) Spinal Muscular Atrophy	
			Erleada Localized prostate cancer <sup>(4)</sup>	Cabometyx Advanced NET	Skytrofa Adult GHD	
			Tazverik (+ Revlimid, Rituxan) 2L Follicular lymphoma	aficamten nHCM	KarXT Schizophrenia (adjunctive)	
					KarXT Psychosis in Alzheimer's disease	

- Rare disease
- Immunology
- Cancer
- Neurology
- Cardio-Metabolic

HNSCC: head and neck squamous cell carcinoma; mCRPC: metastatic castration-resistant prostate cancer; AD: Alzheimer's disease; mUC: metastatic urothelial carcinoma; NSCLC: non-small-cell lung carcinoma; oHCM: obstructive hypertrophic cardiomyopathy; mTNBC: metastatic triple negative breast cancer; TNBC: triple negative breast cancer; mBC: metastatic breast cancer; nOH: neurogenic orthostatic hypotension; MSA: multiple system atrophy; RCC: renal cell carcinoma; NET: neuroendocrine tumors; nHCM: non-obstructive hypertrophic cardiomyopathy; MDD: major depressive disorder; PsA: Psoriatic Arthritis; GHD: growth hormone deficiency; nmCSPC: non-metastatic castration sensitive prostate cancer

1. EVOKE-02. 2. EVOKE-01. 3. High risk localized advanced prostate cancer prior to radical prostatectomy. 4. High risk localized advanced prostate cancer receiving primary radiation therapy. 5. EVOKE-03.

# GAAP to non-GAAP reconciliation – Adjusted EBITDA<sup>(1)</sup>

\$ in millions	FY 2022	FY 2021	FY 2020
<b>Net cash provided by operating activities (GAAP)</b>	<b>2,144</b>	<b>2,018</b>	<b>2,035</b>
Adjustments:			
Proceeds from available for sales debt securities	542	63	3
Distributions from equity method investees	-	1	15
Interest paid, net	145	127	95
Development-stage funding payments – ongoing	2	7	20
Development-stage funding payments – upfront and milestones	175	193	6
Termination payments on derivative instruments	-	16	35
Distributions to non-controlling interests – Portfolio Receipts	(442)	(480)	(544)
Derivative collateral received, net	-	-	(45)
<b>Adjusted EBITDA (non-GAAP)<sup>(1)</sup></b>	<b>2,566</b>	<b>1,944</b>	<b>1,621</b>

# Footnotes

- (1) To aid in comparability, growth in 2020 is calculated based on pro forma 2019 results, which adjusts certain cash flow line items as if Royalty Pharma's Reorganization Transactions (as described in the Company's final prospectus filed with the SEC on June 17, 2020 ("Prospectus") and its initial public offering ("IPO") had taken place on January 1, 2019. The most significant difference between the pro forma and reported figures is the new non-controlling interests that resulted from the Reorganization Transactions. The new contractual non-controlling interests arose in the Reorganization Transactions that results in a higher distribution to non-controlling interests on a pro forma basis as compared to prior historical periods. Less material differences also arise in Royalty receipts for other products as well as *Payments for operating and professional costs, Interest paid*, net and in the payments associated with our former interest rate swap contracts.
- (2) Portfolio Receipts is a key performance metric that represents our ability to generate cash from our portfolio investments, the primary source of capital that we can deploy to make new portfolio investments. Portfolio Receipts is defined as the sum of Royalty Receipts and Milestones and Other Contractual Receipts. Royalty Receipts include variable payments based on sales of products, net of contractual payments to the legacy non controlling interests, that is attributed to Royalty Pharma. Milestones and Other Contractual Receipts include sales based or regulatory milestone payments and other fixed contractual receipts, net of contractual payments to the legacy non controlling interests, that is attributed to Royalty Pharma. Portfolio Receipts does not include proceeds from equity securities or proceeds from purchases and sales of marketable securities, both of which are not central to our fundamental business strategy. Portfolio Receipts is calculated as the sum of the following line items from our GAAP consolidated statements of cash flows: *Cash collections from financial royalty assets*, *Cash collections from intangible royalty assets*, *Other royalty cash collections*, *Proceeds from available for sale debt securities* and *Distributions from equity method investees* less *Distributions to legacy non controlling interests - Portfolio Receipts*, which represent contractual distributions of royalty receipts and proceeds from available for sale debt securities to the Legacy Investors Partnerships and RPSFT.
- (3) Adjusted EBITDA is important to lenders and is defined under the credit agreement as Portfolio Receipts less payments for operating and professional costs. Operating and professional costs are comprised of *Payments for operating and professional costs* from the statements of cash flows. See GAAP to Non-GAAP reconciliation in the Company's current report on Form 8-K dated February 15, 2023 and February 15, 2022.

## Long-term Outlook footnote

- (4) Royalty Pharma's long-term outlook is based on its most up-to-date view on its prospects as of May 17, 2022. This long-term outlook assumes no major unforeseen adverse events subsequent to the date of this presentation. Growth outlook includes future royalty acquisitions. Furthermore, Royalty Pharma may amend its long-term outlook in the event it engages in new royalty transactions. See the information on slide 3 "Forward Looking Statements & Non-GAAP Financial Information," for factors that may impact the long-term outlook.