ROYALTY PHARMA



R&D funding for litifilimab

February 2025

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Biogen's litifilimab a potential first-in-class medicine for lupus

1

Biogen's litifilimab in Phase 3 development for lupus

Biogen's litifilimab (anti-BDCA2) – a novel MoA and potential first-in-class medicine in Phase 3 development for two forms of Lupus

Lupus is a complex disease that can manifest in almost any organ, most commonly in the skin (rash/sores) and in the joints (arthritis)

Phase 3 results expected for systemic lupus erythematosus (SLE) in 2026 and cutaneous lupus erythematosus (CLE) in 2026-2027

2

Impressive proof-of-concept results and favorable safety

Phase 2 results published in New England Journal of Medicine demonstrated proof-of-concept in SLE and CLE with favorable safety profile

Biogen's Phase 3 clinical development program well-designed for success

3

Blockbuster commercial opportunity

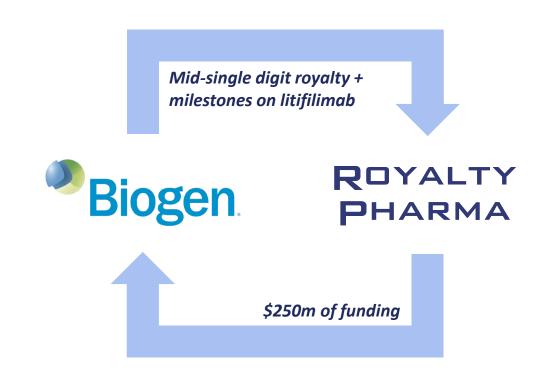
Significant unmet patient need with only two advanced therapies available for SLE and no approved therapies for CLE

Only ~10% of lupus patients currently on a biologic; expected to expand significantly as new therapies are approved⁽¹⁾

~\$2.4bn in 2024 sales from approved lupus biologics⁽²⁾; market leading Benlysta (GSK) growing double-digits despite 10+ years on the market

R&D funding partnership supports litifilimab development

- R&D funding partnership with Biogen on litifilimab
 - Up to \$250m R&D funding paid over 6 quarters
 - Entitled to mid-single digit royalty on worldwide sales and regulatory based milestone payments
 - R&D funding payments to Biogen begin in Q1 2025
- Litifilimab currently in Phase 3 development for SLE and CLE
 - TOPAZ-1/TOPAZ-2 results in SLE expected 2026⁽¹⁾
 - AMETHYST results in CLE expected 2026-2027⁽¹⁾



Royalty Pharma adds exciting development-stage therapy to portfolio with attractive risk/reward

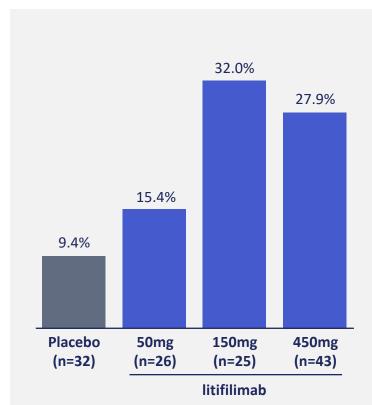
Phase 2 results demonstrate impressive proof-of-concept

Results demonstrated strong proof-of-concept in CLE and SLE and a favorable safety profile

- Phase 2 results for SLE and CLE published in New England Journal of Medicine
- Most participants had moderate-to-severe disease despite receiving concomitant background therapy
- Most adverse events were mild or moderate; discontinuation rate similar to placebo

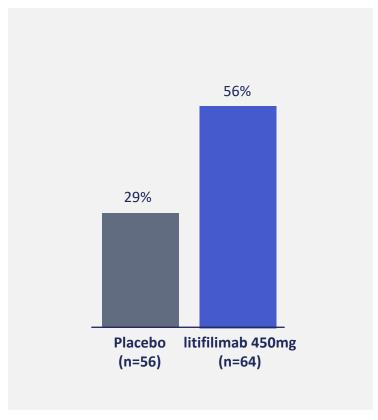
Litifilimab Phase 2 CLE Study⁽¹⁾

(CLASI-70; proportion of patients with response)



Litifilimab Phase 2 SLE Study⁽²⁾

(SRI-4; proportion of patients with response)



SLE: systemic lupus erythematosus; CLE: cutaneous lupus erythematosus; SRI-4: Systemic Lupus Erythematosus Responder Index; CLASI: Cutaneous Lupus Erythematosus Disease Area and Severity Index

[.] AAD Annual Meeting, 2022

[.] New England Journal of Medicine, September 8, 2022.

Litifilimab – a potential attractive new treatment option for lupus

Market dynamics in SLE and CLE

~600,000

Total U.S. patients, the majority of which have SLE⁽¹⁾

~18 months

Median duration of therapy for current biologics for a lifelong disease

RP forecasts blockbuster potential for litifilimab

Strong marketer

Biogen a strong marketer in neurology with focus broadening to specialty immunology

Unmet need

Few approved therapies for SLE and no approved therapies for CLE

Guidelines

Shifting to support biologics use earlier in mild and moderate SLE

~\$2.4bn sales

From approved lupus biologics in 2024⁽²⁾

Long duration

Royalty duration expected until 2040

~40%-60%

Advanced therapy penetration in more mature disease analogs, compared to ~10% current penetration in lupus⁽¹⁾

L. Royalty Pharma internal estimates.

^{2.} Represents 2024 sales of GSK's Benlysta and AstraZeneca's Saphnelo.