ROYALTY PHARMA

ROYALTY PHARMA

Corporate Presentation

May 2025

Forward looking statements & Non-GAAP Measures

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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

28
years of compounding value

~56%
share of pharmaceutical royalty market[1]

Compounding growth through value creation

10%+
top-line CAGR expected over this decade[2]

Low-teens
% average unlevered IRR over multiple decades, high-teens or better with conservative leverage[3]

Long duration, diversified portfolio

~13
year portfolio duration with track record of growing through royalty expirations

15
blockbusters (>$1bn in annual sales) in portfolio[4]

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[5]

Strong track record

History
of identifying most transformative products

~13%
top-line CAGR achieved between 2010-2020

Efficient business model

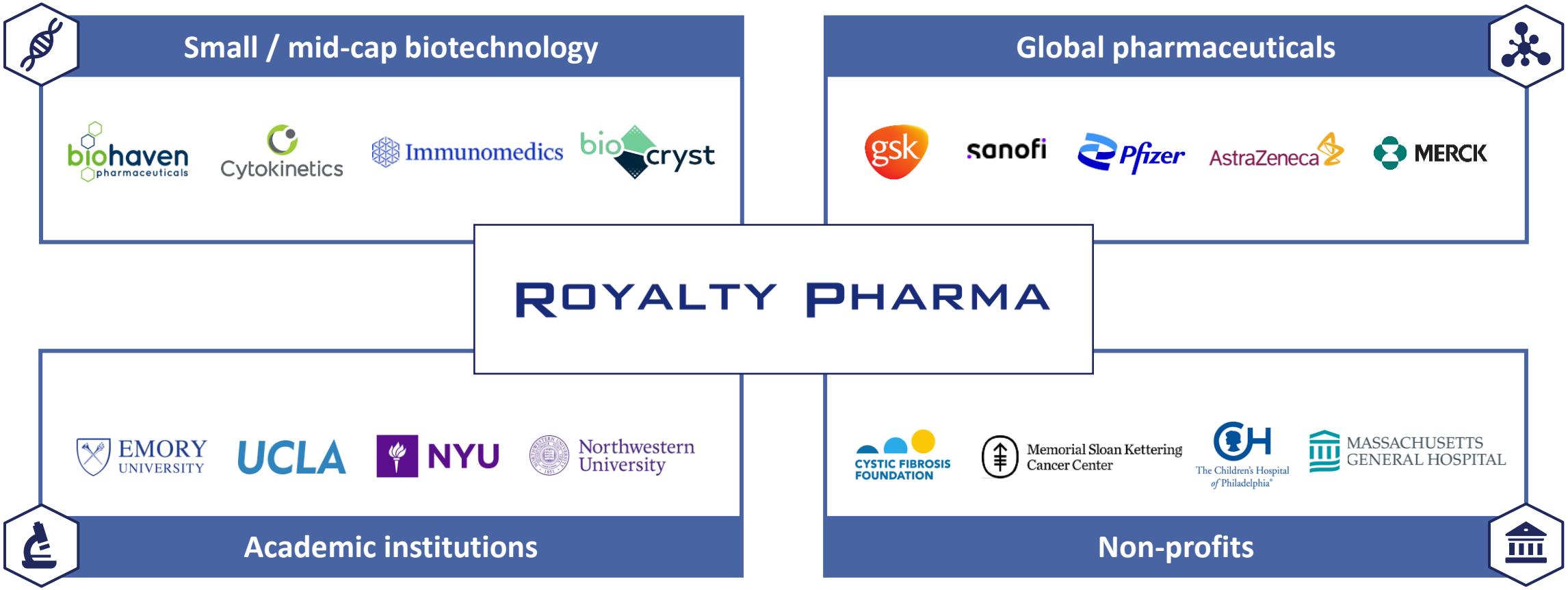
~7-8%
cost of capital even with higher rates

$2.8 billion
2024 top line; 92% Adjusted EBITDA margins, providing consistent and growing cash flow to be redeployed

Note: "Top line" refers to Royalty Pharma's Portfolio Receipts. 1. Royalty Pharma market share from 2012–2024; internal estimates of biopharma royalty market based on announced transactions. 2. Royalty Pharma top-line CAGR includes includes future investments. Royalty Pharma's growth target provided at May 2022 Investor Day. See slide 67 for additional details. 3. Returns reflect a combination of actual results and estimated projected returns for investments based on analyst consensusus 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 67 for additional details. 4. Based on 2024 end market sales and excludes products tied to recently expired royalties. 5. Royalty Pharma's capital deployment target provided at 2022 Investor Day. See slide 72 for additional details.

Deep network across the biopharma ecosystem

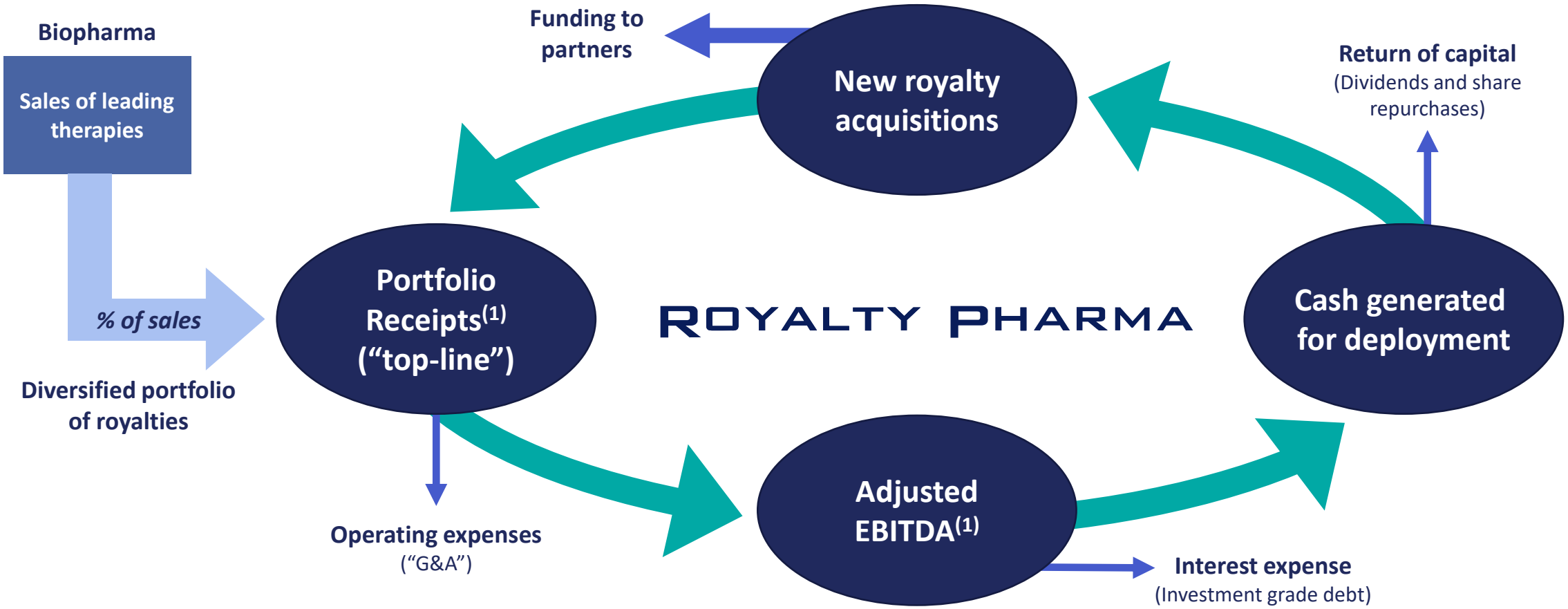
Leading provider of funding solutions for life sciences innovation



Advancing our partners' core mission with win-win solutions

Structure	Potential benefits to partner
Existing royalties	• Diversification of asset portfolio • Non-dilutive funding for business growth and investment • Upfront capital today in exchange for a long-dated stream of payments
Synthetic royalties	• Funding for completion of development and commercialization of portfolio • Retain operational control of development programs • Lower cost of capital than issuing equity
Launch & development capital	• Launch funding offers flexible, patient, long-term alternative financing • Lower cost of capital than selling equity and less restrictive than debt
M&A	• Monetize non-strategic passive royalties to reduce net M&A price • Capital provided through purchase of royalties and supplemental funding

Simple and efficient business model focused on cash flow



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

1. See slide 67 for definitions. Refer to the Appendix for a GAAP to non-GAAP reconciliation.

Royalty Pharma is now an integrated public company

Externally managed from 1996 – May 2025

Previous structure

Management fee

~6.5% of Portfolio Receipts[1]

public | *private*

Royalty Pharma plc (RPRX) — **Manager**

Services rendered

Manager expenses including due diligence, support functions, etc.

Investment portfolio

- >35 approved products
- 15 development-stage therapies
- 15 blockbusters (>$1bn in sales)[2]
- Consistent replenishment

Intellectual capital / platform

- ~100 employees
- Scaled investment platform
- Long-tenured team
- Deep industry relationships

Current structure

Integrated public company

Royalty Pharma plc (RPRX)

- ✓ *Significant cash savings*
- ✓ *Enhances returns*
- ✓ *Strengthens alignment*
- ✓ *Ensures continuity*
- ✓ *Improves governance*
- ✓ *Simplifies structure*

Investment portfolio

- >35 approved products
- 15 development-stage therapies
- 15 blockbusters (>$1bn in sales)[2]
- Consistent replenishment

Intellectual capital / platform

- ~100 employees
- Scaled investment platform
- Long-tenured team
- Deep industry relationships

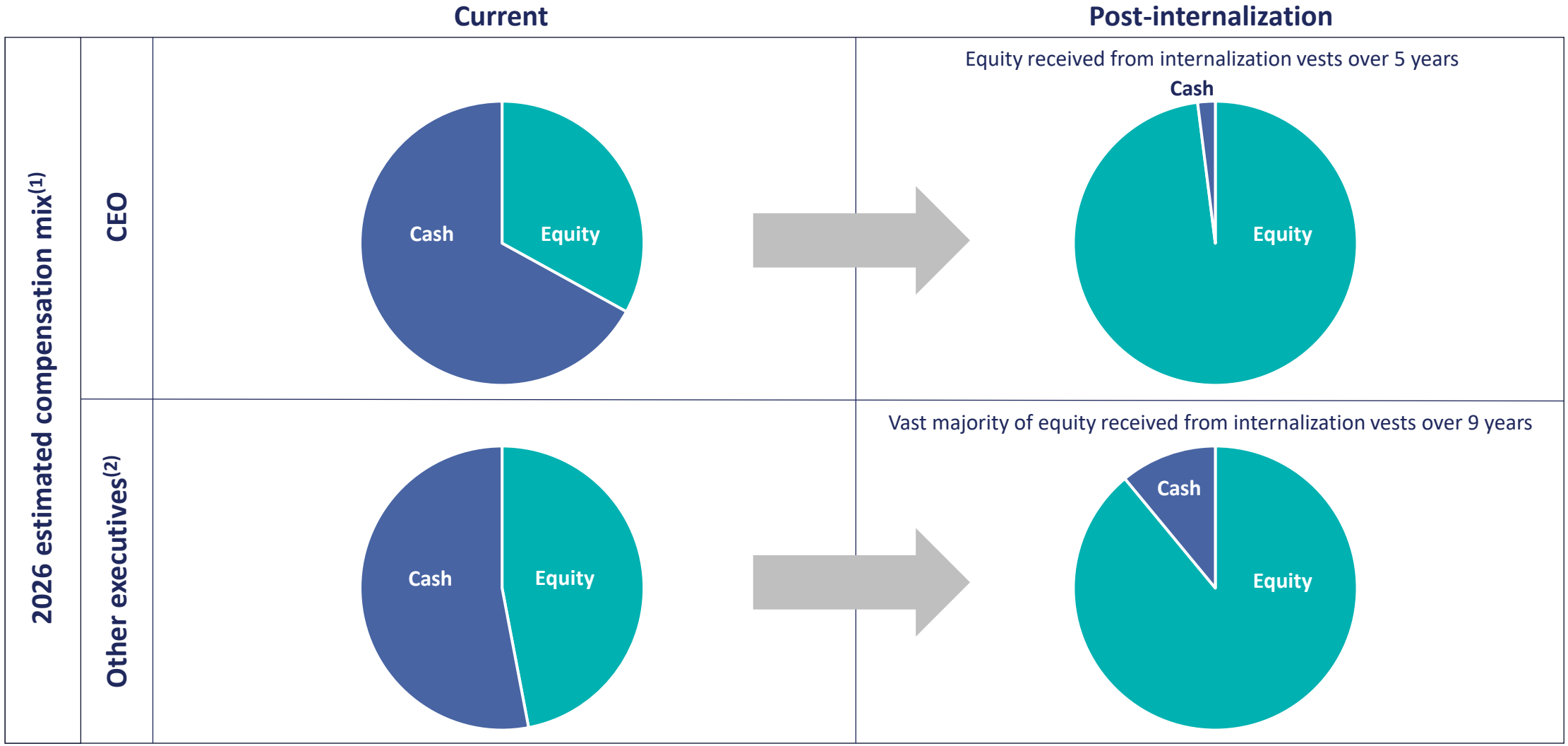
1. The management fee is equal to a fixed percentage of 6.5% of the cash receipts from Royalty Investments (as defined in the Management Agreement) or Portfolio Receipts for such quarter and 0.25% of the value of our security investments under GAAP as of the end of such quarter. Our predecessor was founded in 1996 and we were incorporated under the laws of England and Wales on February 6, 2020.
2. Calculated based on Visible Alpha projections for 2024 end market sales and excludes products tied to recently expired royalties.

Multiple benefits from internalizing the Manager

		Benefits
Financial	Savings	Cash savings are expected to be >$100m in 2026 and >$175m in 2030, compared to status quo, with cumulative savings of >$1.6bn over ten years
	Returns	Extinguishment of the management fee enhances returns to shareholders on investments
	Valuation	Responsive to investor feedback that the externally managed structure is an impediment to investing in Royalty Pharma; Internalizing the Manager could expand Royalty Pharma's shareholder base and enhance valuation over time
Strategic	Alignment	Majority of total consideration consists of equity vesting over 5 to 9 years, replacing cash bonuses to senior management through 2033; extinguishing the management fee largely for equity further strengthens alignment
	Continuity	Employees of RP Management become part of integrated company, ensuring long-term continuity of personnel and operations; 5 to 9 year vesting of equity consideration maximizes retention
	Governance	Greater Board oversight on executive compensation and succession furthers commitment to robust governance
	Simplification	New integrated structure will reduce complexity, ease comparability with other companies and enhance transparency

Strengthening alignment with shareholders

Transaction results in significantly greater portion of management compensation in equity



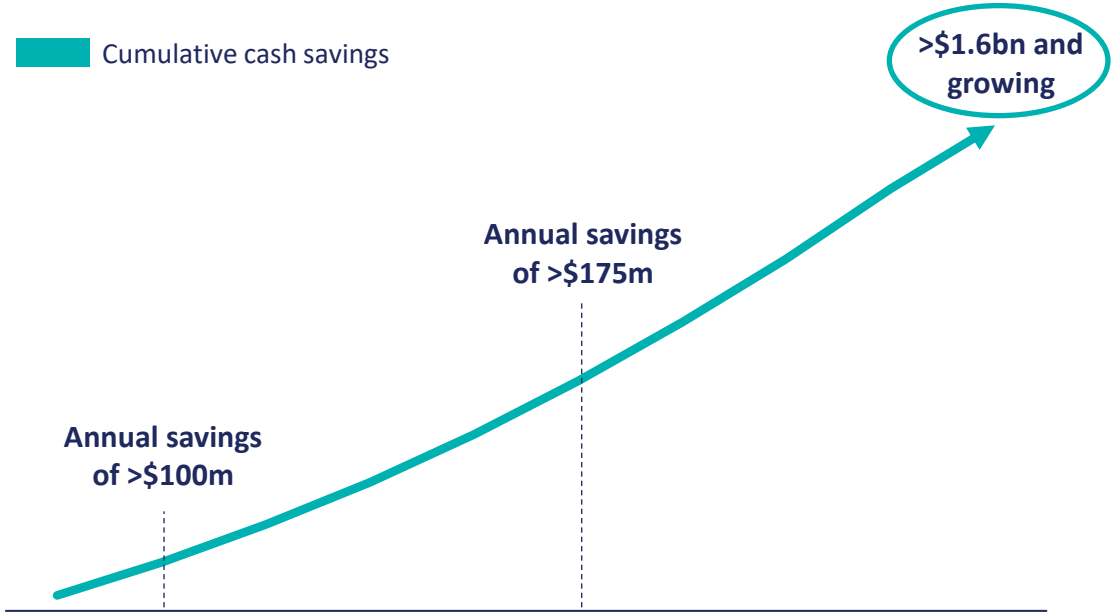
1. For this analysis Equity Performance Awards are treated as equity. A portion of equity performance awards will be paid in cash to enable recipients to pay taxes, with the after-tax amount settled in equity.
2. Represents other named executive officers of Royalty Pharma.

Internalization expected to result in significant cash savings

Acquiring the Manager for ~$1.1bn total consideration

Consideration	Amount	Details
Cash	~$100m[1]	-
Debt	$380m	Assumption of existing Manager debt is leverage neutral to Royalty Pharma
Shares	~24.5m	Equity vests over 5 to 9 years
Total	~$1.1bn	Majority of total consideration paid in Royalty Pharma equity over time

Benefits include significant savings expected to grow over time



	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034
Cumulative Additional Shares from Vesting[2]	1.1	4.2	8.3	12.4	16.4	19.8	21.7	22.8	24.0	24.5

1. Royalty Pharma will pay the Manager $200 million in cash less any management fee paid to the Manager from January 1, 2025 through the closing of the transaction. The transaction is estimated to close during the second quarter of 2025 and the management fees paid through the closing is expected to be approximately $100 million.
2. Reflects estimated impact of equity consideration on weighted average diluted share count for each year. Figures based on $26.20 share price (RPRX closing price as of 1/8/2025); actual vesting schedule may vary as purchase price allocation to 5- and 9-year vesting portions will be based on share price at transaction close. Assumes transaction close in Q2 2025.

Internalization savings to drive increased Portfolio Cash Flow

$ in millions	Q1 2025	% Change	% PR	FY 2024	% Change	% PR	Internalization impact
Royalty Receipts[1]	788	+12%		2,771	+13%		No impact
Milestones & other contractual receipts	51	n/a		31	-95%		No impact
Portfolio Receipts	839	**+17%**		2,801	**-8%**		No impact
Payments for operating and professional costs	-102		12.1%	-236		8.0%	Reduction to ~4-5% of Portfolio Receipts in 2026, compared to initial guidance of 8% to 9% in 2024
Adjusted EBITDA (non-GAAP)	738		**87.9%**	2,565		**92.0%**	Cash savings will increase Adjusted EBITDA
Interest received/(paid), net	-127			-113			Manager's debt would have increased interest paid by ~$20m in 2024 vs guidance of ~$160m
Portfolio Cash Flow (non-GAAP)	611		**72.8%**	2,452		**88.8%**	Cash savings will increase Portfolio Cash Flow
Capital Deployment	**-101**			**-2,761**			
Share count[2]	**578**			**594**			Equity consideration vests over 5 to 9 years

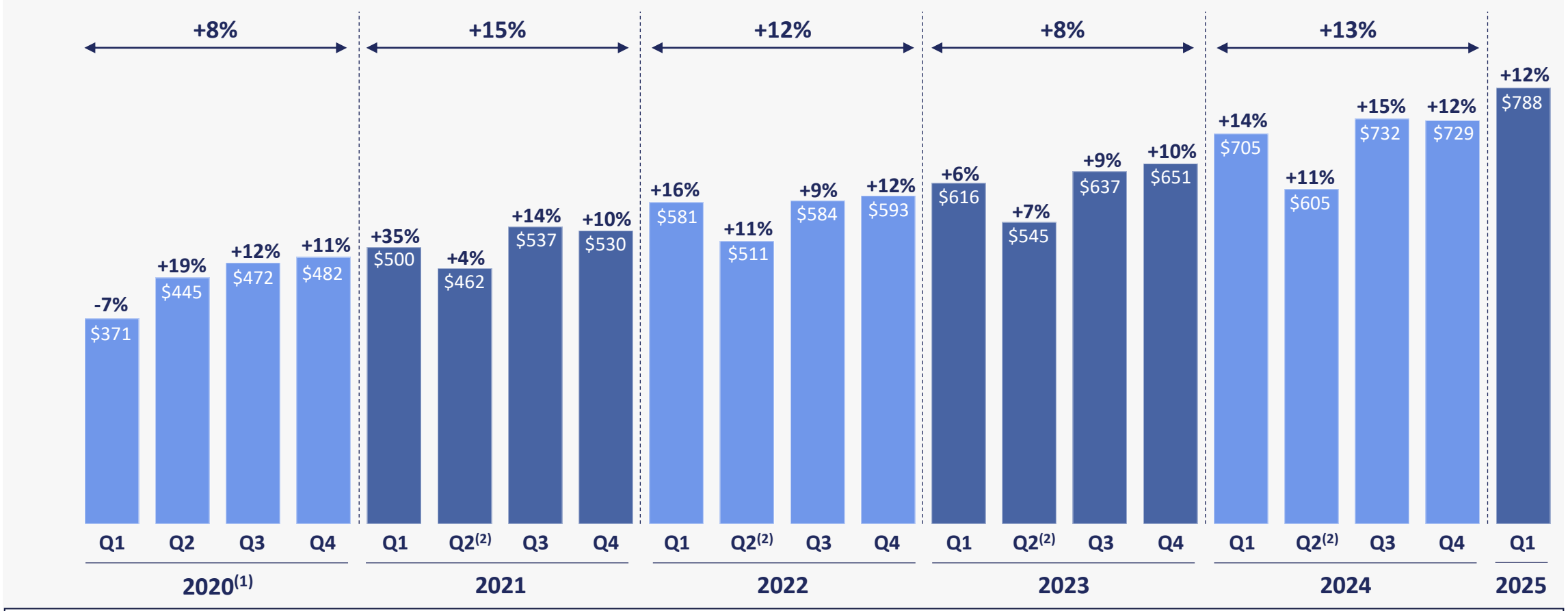
PR: Portfolio Receipts

1. Reported net of legacy non-controlling interests to facilitate increased transparency of individual royalty economics and milestones.
2. Reflects weighted-average diluted Class A ordinary shares outstanding in millions.

Delivering double-digit growth on average since IPO

Royalty Receipts

(year/year growth; $ in millions)

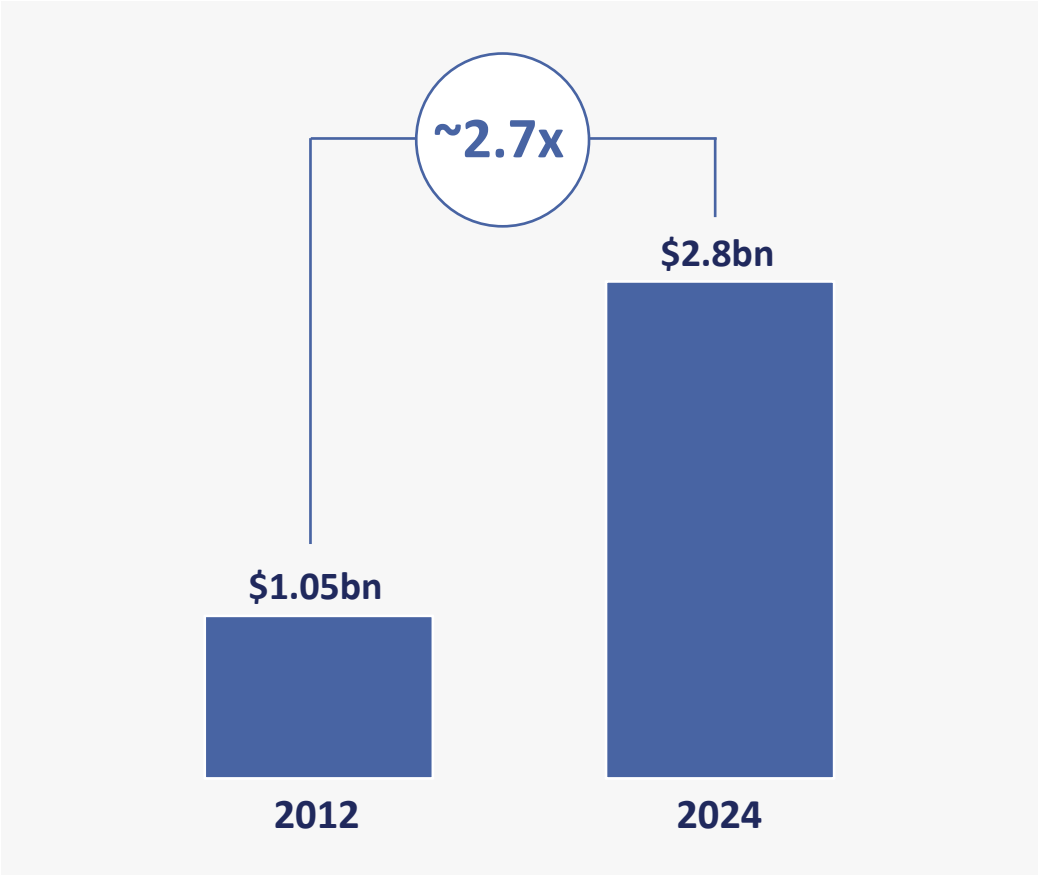


Portfolio Receipts	$382	$462	$472	$484	$524	$475	$587	$543	$605	$524	$597	$1,064	$1,131	$545	$637	$736	$717	$608	$735	$742	$839

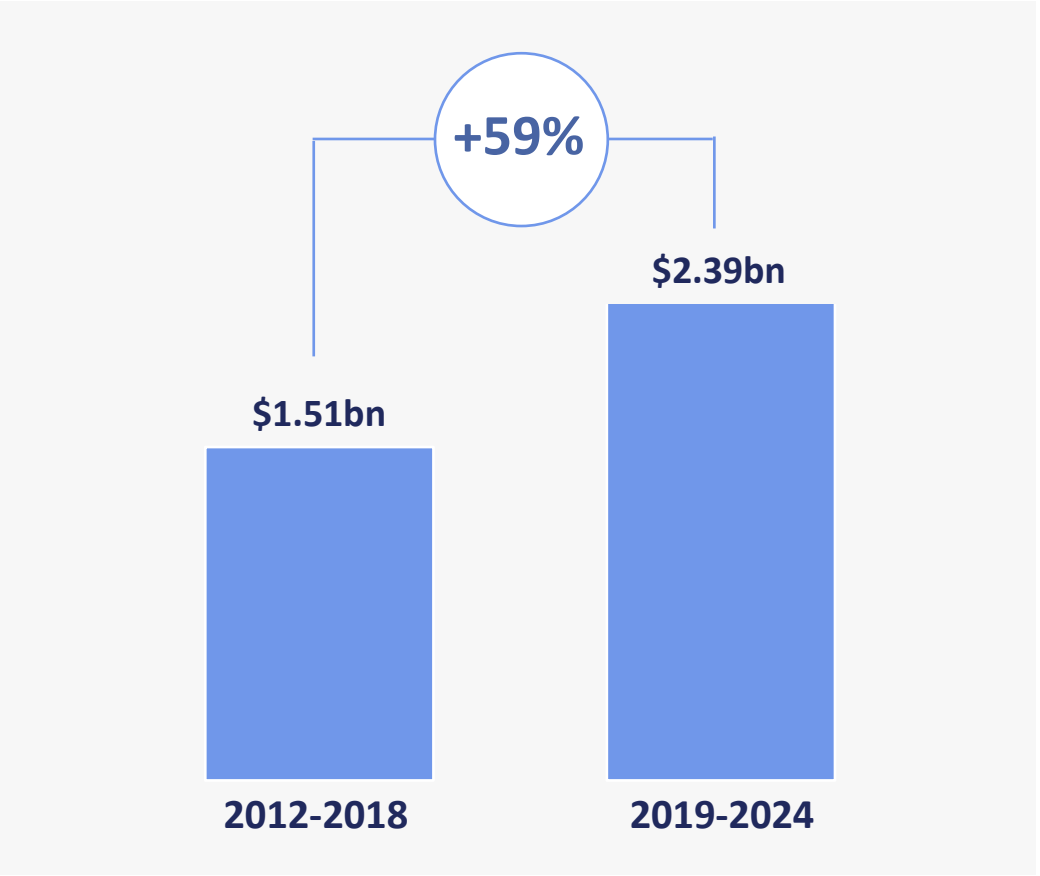
1. Growth rates are presented on a pro forma basis. See slide 72 for definition and additional information.
2. Royalty Receipts in the second quarter are typically lower than the first quarter as royalties for certain products or franchises are tiered and typically reset at the beginning of the year. Thus, second quarter Royalty Receipts (reflecting first quarter sales) often include royalties on sales at the lowest royalty tier.

Track record of delivering strong growth

Portfolio Receipts[1]



Capital Deployment
(annual average)



See slide 67 for additional information.

1. Portfolio Receipts for periods 2020 and earlier are pro forma for current non-controlling interests.

Innovative business model supports biopharma ecosystem

Fund Structure
1996 to 2003

1.0

- Funded only with equity
- Achieved proof-of-concept
- Focused on 3rd party royalties in approved products

Ongoing Business
2004 to 2011

2.0

- Lowered cost of capital with leverage
- Expanded to M&A related royalties

Ongoing Business
2012 to 2020

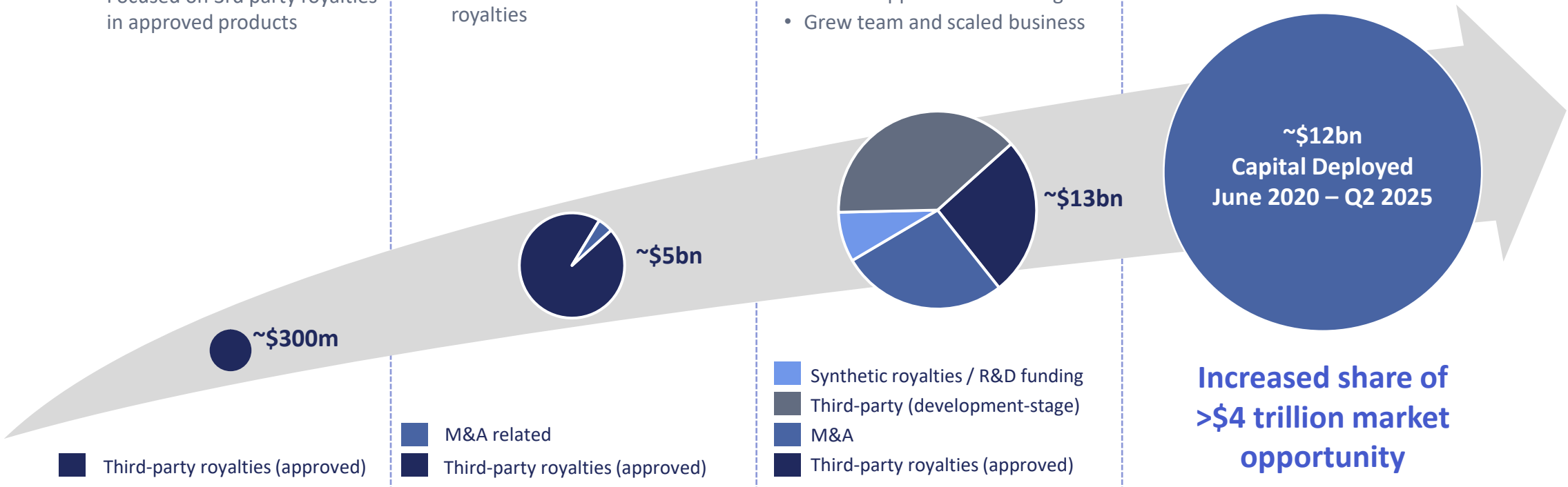
3.0

- Development stage products
- Created synthetic royalties
- Added supplemental funding
- Grew team and scaled business

Public Company (IPO) in June 2020
Inaugural Bond Issuance in August 2020[1]

4.0

- **Significantly scale business**
- **Selectively add adjacencies**

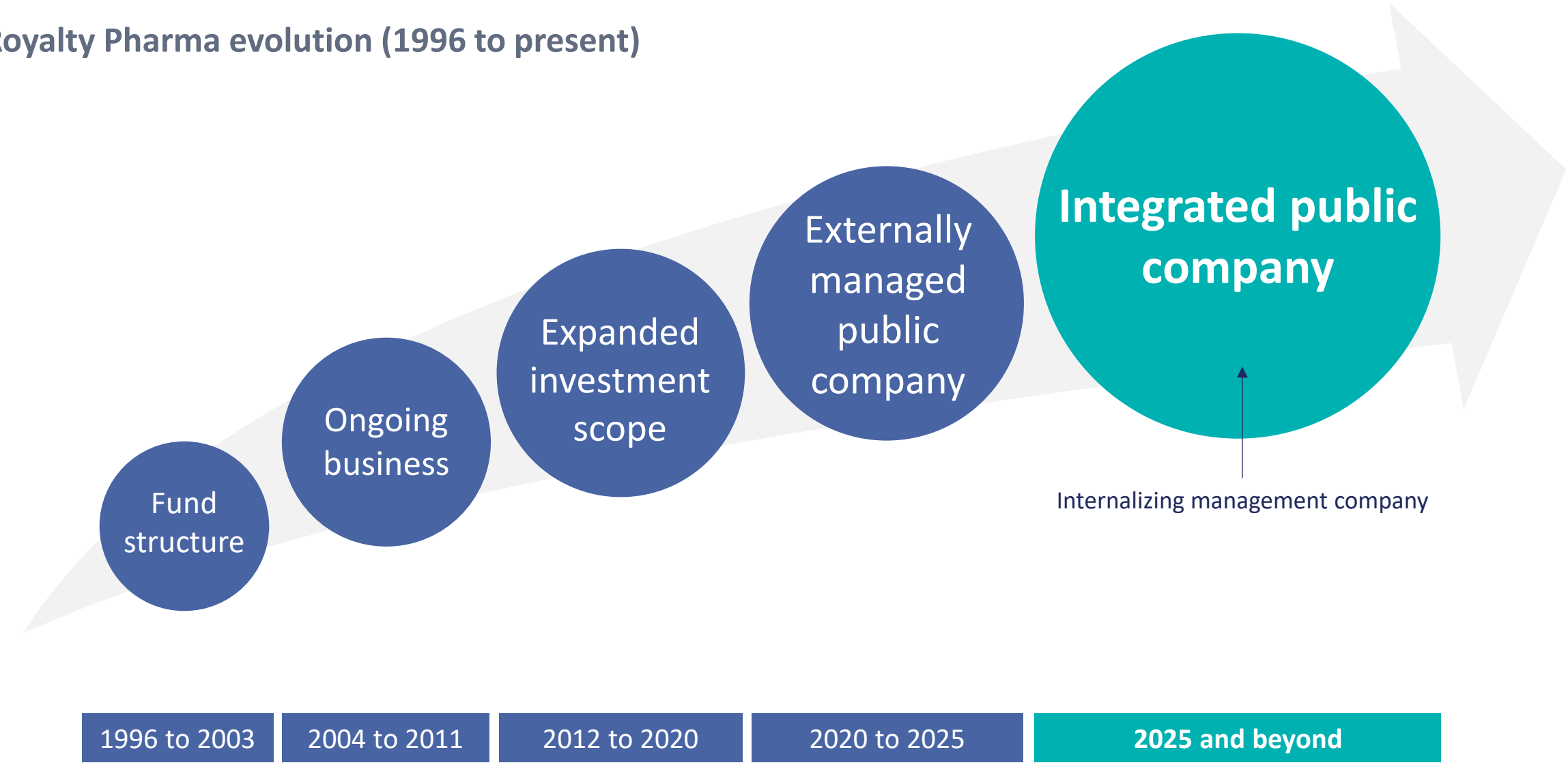


Increased share of >$4 trillion market opportunity

Source: Internal estimates. Data reflects actual cash deployed for transactions.
1. Aggregate of $6.0 billion senior unsecured notes with weighted-average maturity of approximately 12.5 years and weighted-average coupon of 2.125%.

Internalizing the Manager is the next step in our evolution

Royalty Pharma evolution (1996 to present)



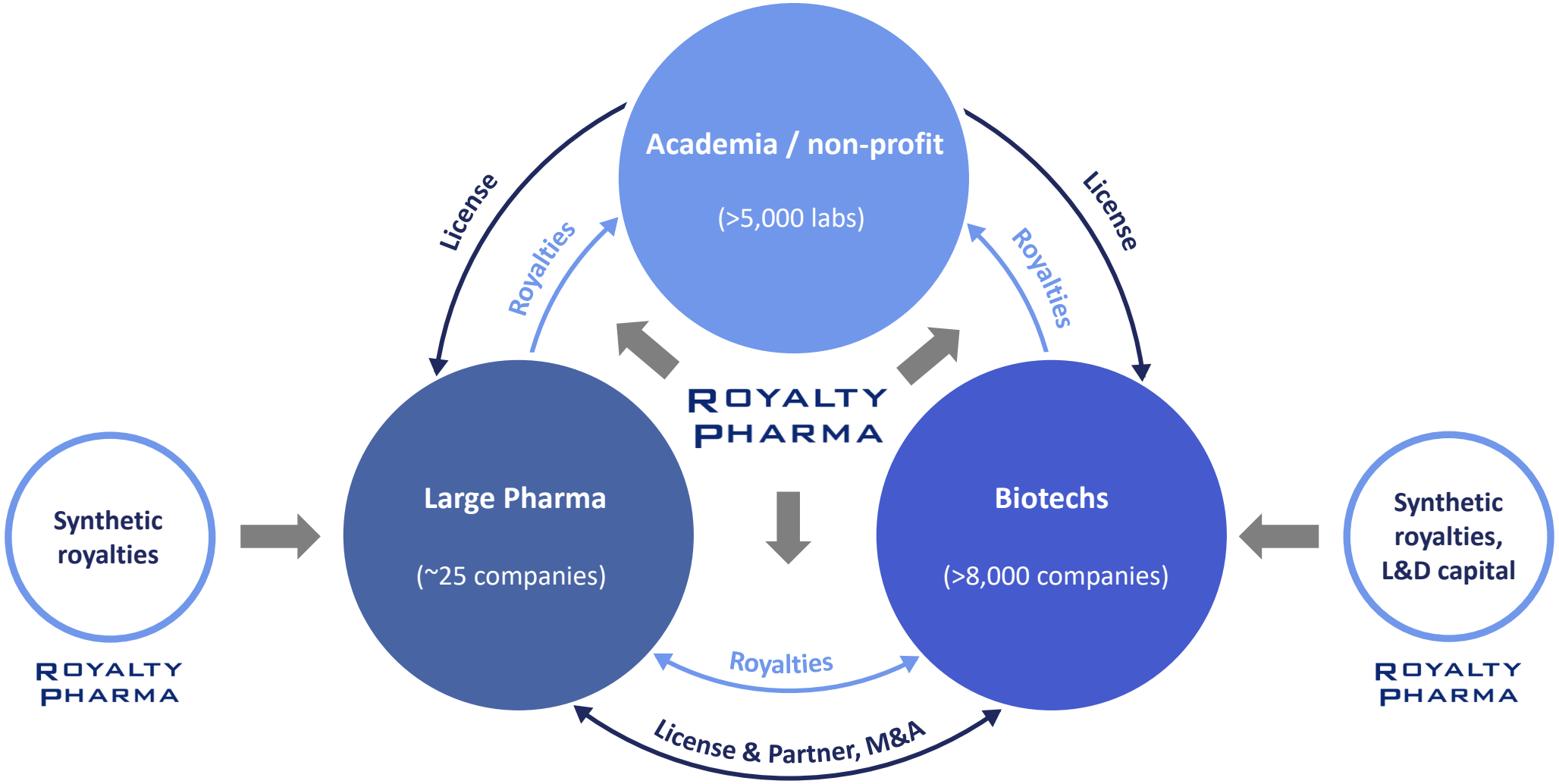
Our predecessor was founded in 1996 and we were incorporated under the laws of England and Wales on February 6, 2020.

Strong competitive moat in biopharma royalty funding

	Business model	Scale	Platform
ROYALTY PHARMA	• Publicly traded company • Long royalty durations • ~7-8% cost of capital • ~3.1% cost of debt[1]	• 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

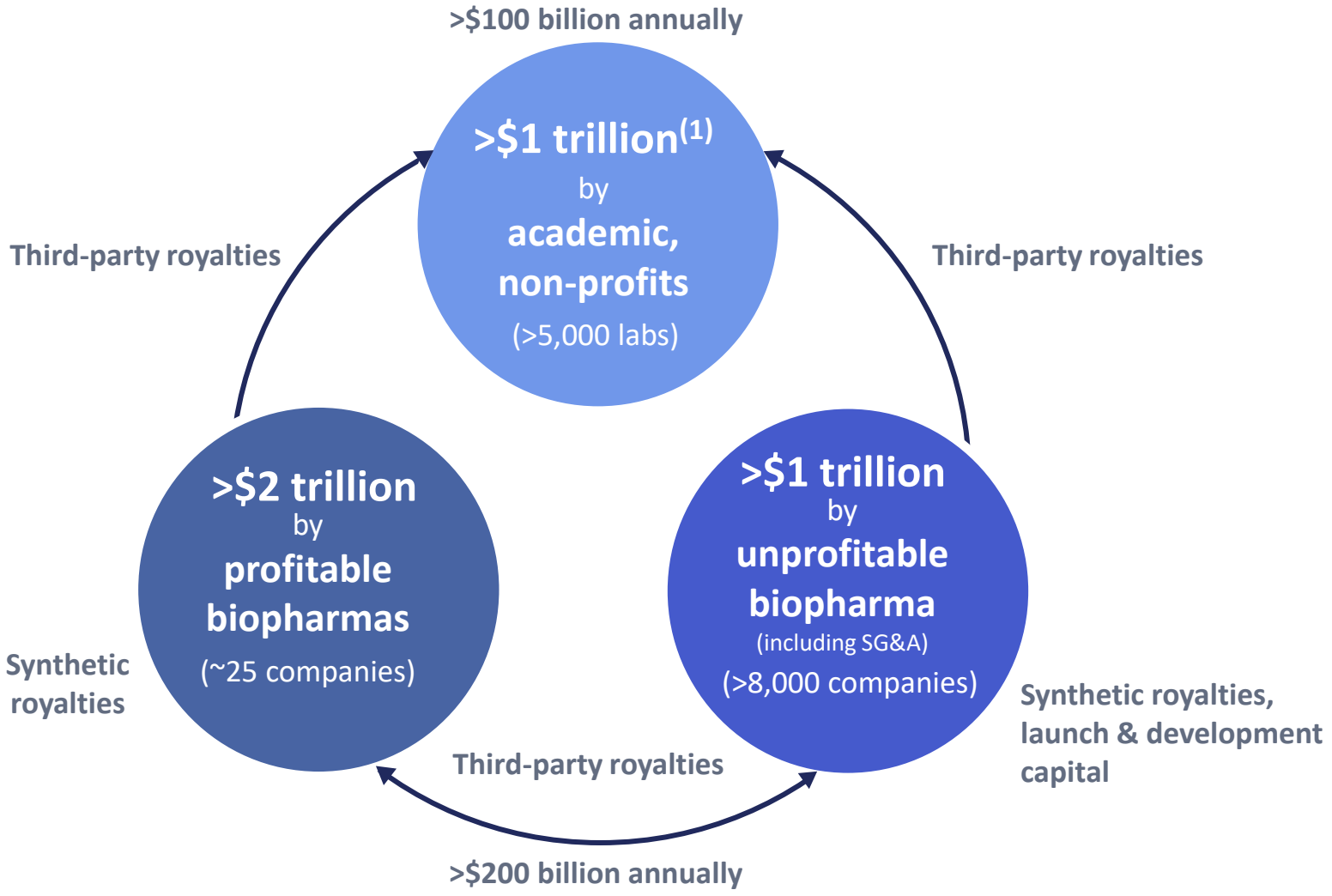
1. Weighted average coupon.

Industry fragmentation and complexity drive royalty creation



Global funding of life sciences R&D

Cumulative R&D spend over next decade



Global pharma market(2)

>$2 trillion (2)

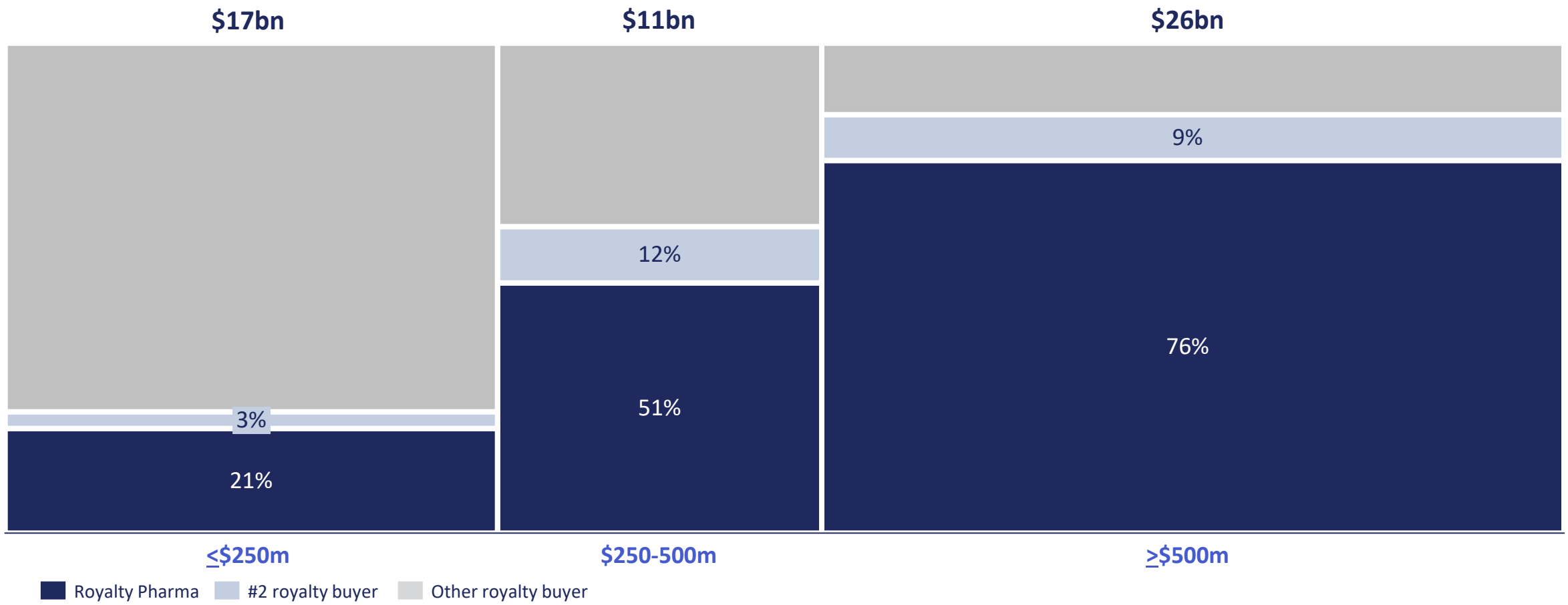
Biopharma revenues (2033e)

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 January 2024.

Royalty Pharma is the leader in royalty transactions

Biopharma royalty market size and share by transaction value, 2012-2025 YTD[1]



Royalty Pharma has maintained a majority overall share since 2012 and is the go-to partner for larger transactions

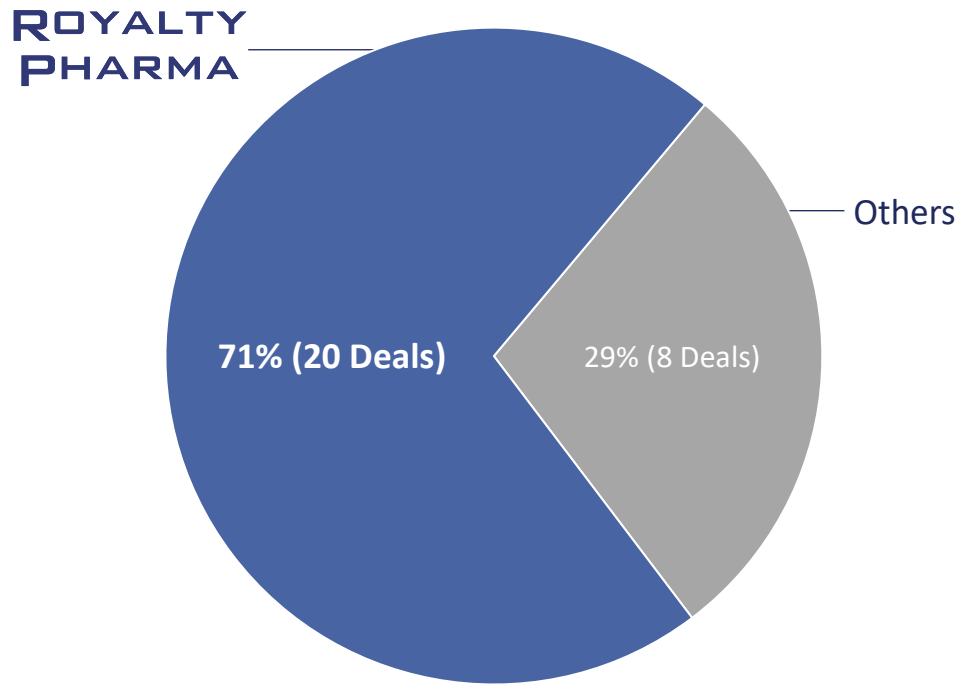
1. Internal estimates of historical biopharma royalty market size based on announced transactions; size of blocks are relative to total announced value in each deal size range.

Royalty Pharma dominates large royalty transactions

Royalty transactions ≥$500m
(announced value; $ in millions)

Lead product	Acquiror	Post-IPO	Transaction size
Trikafta[1]	RP		3,352
Tysabri	RP		2,850
Trelegy[3]	RP	☑	1,653
Tremfya[4]	RP	☑	1,575
Evrysdi	RP	☑	1,500
Keytruda	Other		1,297
Leqvio	Other		1,150
Xtandi	RP		1,146
Spinraza/pelacarsen	RP	☑	1,125
Undisclosed	Other		925
Voranigo	RP	☑	905
Promacta	RP		827
Tecfidera	RP		761
Flu program	Other		750
Humira	RP		700
Lyrica	RP		700
Evrysdi	RP	☑	650
Trikafta[1]	RP	☑	650
Remicade	RP		650
Januvia[2]	RP		609
troriluzole	Other		600
Undisclosed[5]	Other		550
frexalimab[6]	RP	☑	525
Tecfidera	RP		510
Cobenfy	RP	☑	500
Adstiladrin	RP	☑	500
Attruby	Other		500
Crysvita[7]	Other		500

Market share of deals ≥$500m
(by count)

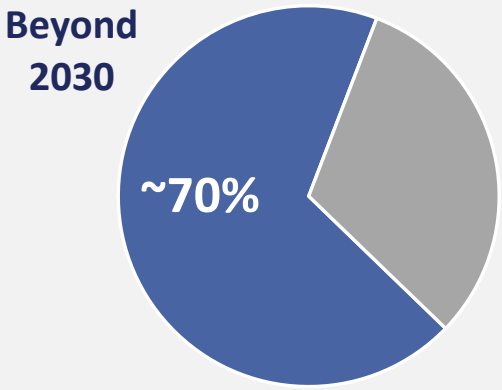


Note: transaction size excludes equity and debt investments
1. Products representative of royalties on franchises include Trikafta (CF Franchise). 2. Products representative of royalties on franchises include Januvia (DPP-IVs). 3. Transaction value also includes ampreloxetine. 4. Transaction value also includes amount paid for royalties on gantenerumab/trontinemab, otilimab, pelabresib, tulmimetostat. 5. R&D funding deal with Pfizer announced April 2023. 6. Deal value includes estimated transaction costs. 7. OMERS acquisition of Crysvita royalties announced July 2022.

Long duration portfolio consistently replenished

Duration of portfolio (At IPO)

(by present value)



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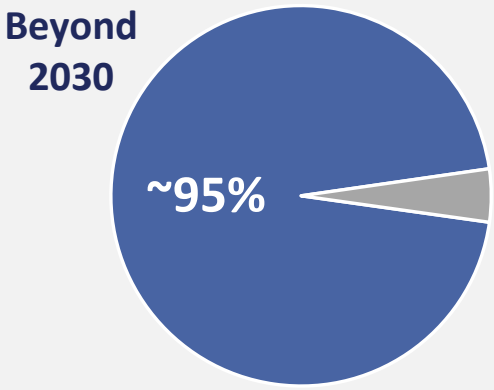
Duration of royalties acquired 2020-2024

(by present value)



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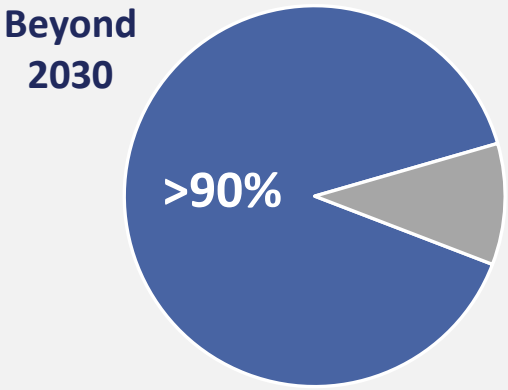
Duration of portfolio (Today)

(by present value)



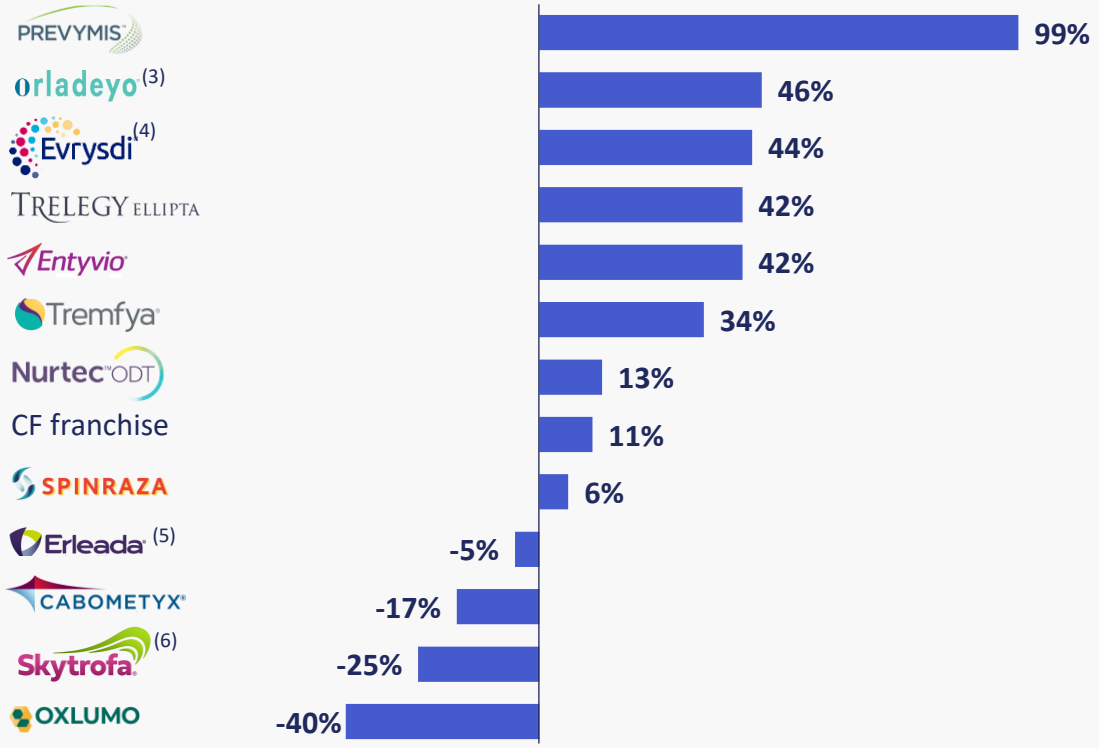
~13 year weighted average royalty portfolio duration

IPO: initial public offering

Strong early performance from recent transactions[1]

Percent change in 2025 consensus sales[2] since acquisition

(Transactions since 2020; approved therapies)



Discontinued development and marketing excluding U.S. & China[7]

Development-stage therapies

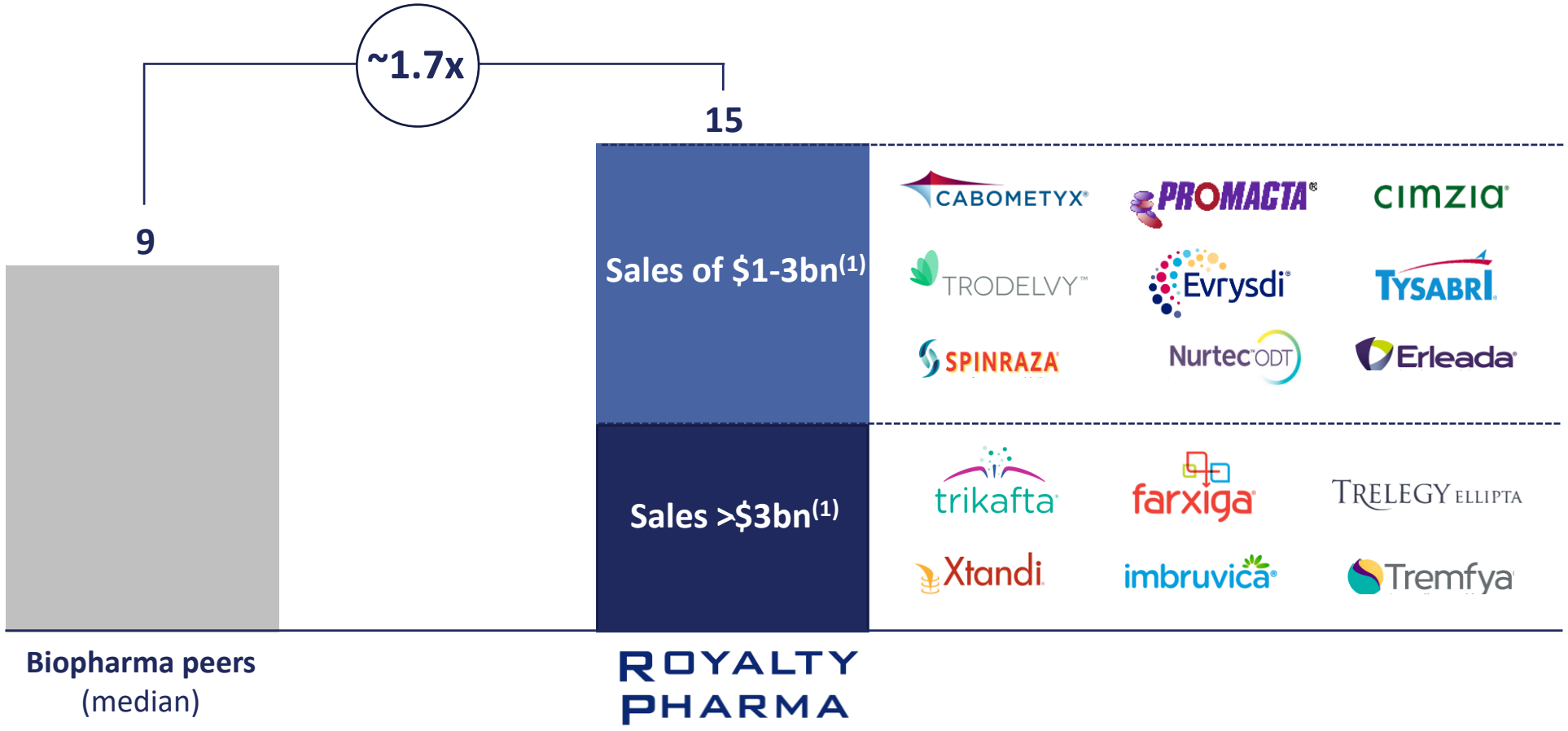
(Transactions since 2020; select events)

	Therapy	Indication	Event	Status
Clinical	ecopipam	Tourette's syndrome	Phase 3 results	☑
	aficamten	oHCM	Phase 3 results	☑
	seltorexant[8]	depression	Phase 3 results	☑
	pelabresib[9]	myelofibrosis	Phase 3 results	☑
	TEV-'749	schizophrenia	Phase 3 results	☑
	BCX10013	PNH	Phase 1 results	☒
	otilimab	rheumatoid arthritis	Phase 3 results	☒
	gantenerumab	Alzheimer's disease	Phase 3 results	☒
	trontinemab (gantenerumab brain shuttle)	Alzheimer's disease	Phase 1b/2a data	☑
	MK-8189[10]	schizophrenia	Phase 2b data	☐
Regulatory	Voranigo	glioma	FDA approval	☑
	Cobenfy	schizophrenia	FDA approval	☑
	Tremfya	Crohn's disease/UC	FDA approval	☑
	Zavzpret	migraine	FDA approval	☑
	Airsupra	asthma	FDA approval	☑
	Evrysdi	SMA	FDA approval	☑

oHCM: obstructive hypertrophic cardiomyopathy; UC: ulcerative colitis; PNH: paroxysmal nocturnal hemoglobinuria; SMA: Spinal muscular atrophy; NDA: New Drug Application

1. Recent transactions include transactions since 2020. 2. Consensus sales sourced from Visible Alpha as of May 2025 and includes therapies with consensus available at the time of the deal and now. 3. Change in Orladeyo consensus sales is from date of initial BioCryst transaction (December 7, 2020). 4. Change in Evrysdi consensus sales is from date of initial PTC transaction (July 20, 2020). 5. Change in Erleada consensus sales is from date of second Erleada transaction (June 5, 2023). 6. Reflects U.S. sales of Skytrofa. 7. Blueprint Medicines press release, January 8, 2024. 8. According to Clinicaltrials.gov, Johnson & Johnson is currently conducting an additional Phase 3 study on seltorexant. 9. The clinical status of pelabresib is pending additional disclosure from Novartis. 10. In October 2024, Merck updated its public disclosures to remove MK-8189 from its pipeline chart and Royalty Pharma does not anticipate making a further investment in this program.

Industry leading exposure to blockbuster products

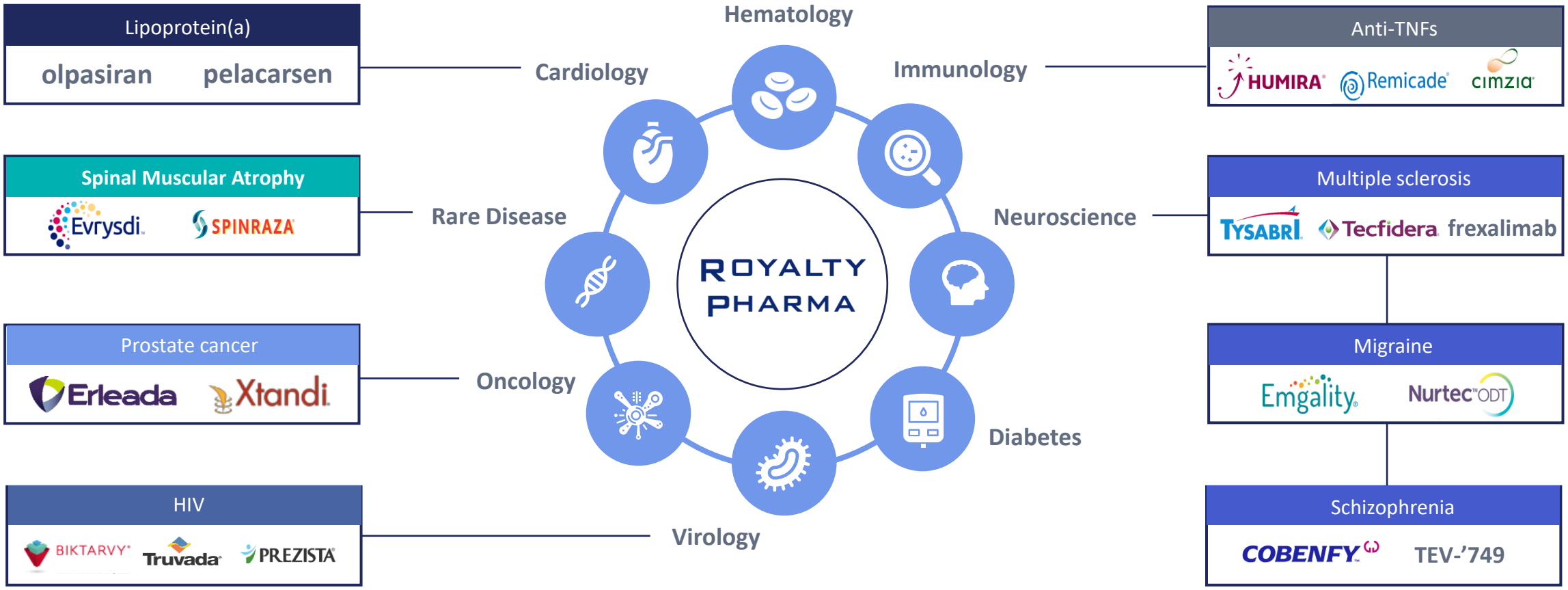


Portfolio includes premier products and franchises backed by strong support from marketers

Biopharma peers consist of Eli Lilly, Johnson & Johnson, Merck, Pfizer, AbbVie, Bristol Myers Squibb, Gilead, Amgen, Biogen, Vertex, Regeneron, Roche, Novartis, GSK, Sanofi, Novo Nordisk and AstraZeneca; blockbuster count based on 2024 data.

1. Calculated based on 2024 reported sales and excludes products tied to recently expired royalties.

Unique ability to invest in multiple products in the same class



Portfolio agnostic to therapeutic area, modality and drug class

Anti-TNFs: Anti-tumour necrosis factor antibodies; HIV: human immunodeficiency virus

Repeat transactions highlight value of Royalty Pharma partnership

ascendis pharma

Once-weekly Skytrofa, Yorvipath

$300m total funding

2x 2023, 2024

agios

Voranigo, IDHIFA

$1.16bn total funding

2x 2020, 2024

Cytokinetics

aficamten, omecamtiv, CK-586

Up to $1.13bn total funding

3x 2017, 2022, 2024

PTC THERAPEUTICS

Evrysdi

Up to $2.15bn total funding

3x 2020, 2023, 2024

biocryst

orladeyo, BCX10013

Up to $325m total funding

2x 2020, 2021

CYSTIC FIBROSIS FOUNDATION

trikafta kalydeco

Up to ~$4.0bn total funding

2x 2014, 2020

biohaven pharmaceuticals

Nurtec ODT, Zavzpret

Up to ~$835m total funding

4x 2018, 2018, 2019, 2020

Fumapharm

Tecfidera

~$1.27bn total funding

2x 2012, 2014

Note: Funding amount includes equity investments

Deploying substantial capital with repeat partners

Multiple benefits to long-term partnerships

Speed of execution

Ability to transact quickly given strong base of existing knowledge

Information edge

Potentially in-depth access to product information, strategy, management

Probability of transacting

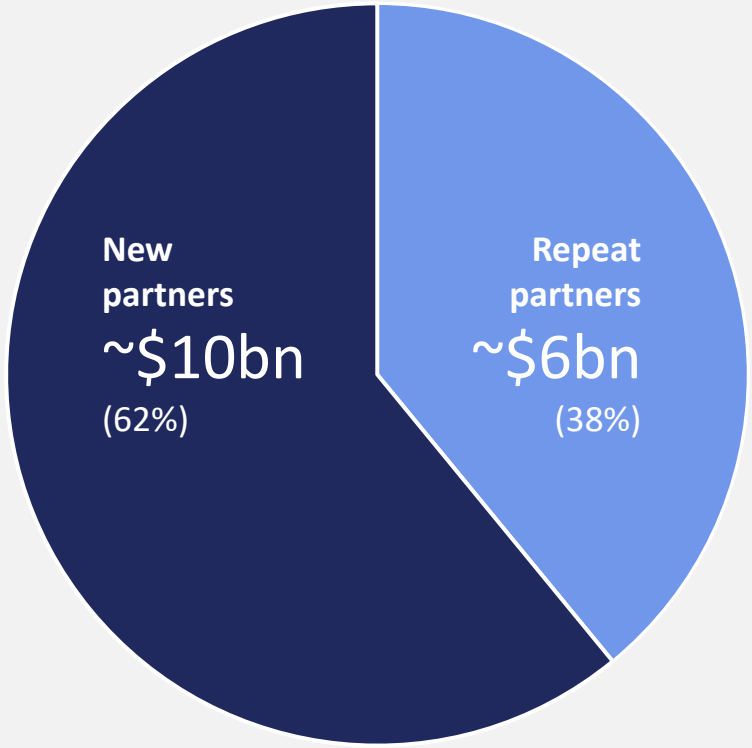
Strong existing relationships and already established roadmap for success

Growth with partner

Increases RP success rate and potential for future transactions with partner

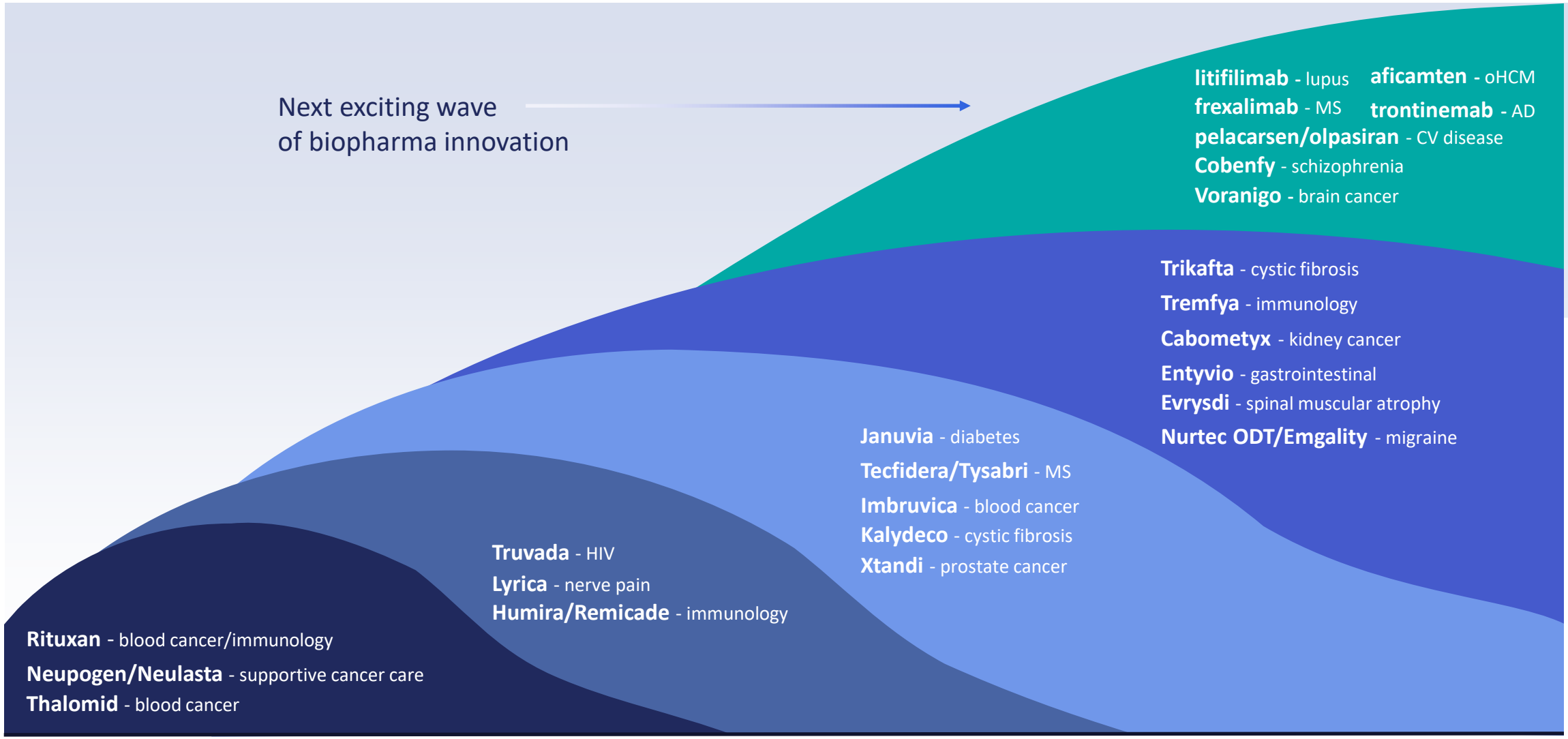
Capital deployed with repeat partners

(~$16bn of announced transaction value since 2020)



Note: Announced transaction value excludes equity investments

Participating in most important waves of biopharma innovation



HIV: human immunodeficiency virus; MS: Multiple sclerosis; CV: Cardiovascular; oHCM: obstructive hypertrophic cardiomyopathy; AD: Alzheimer's disease

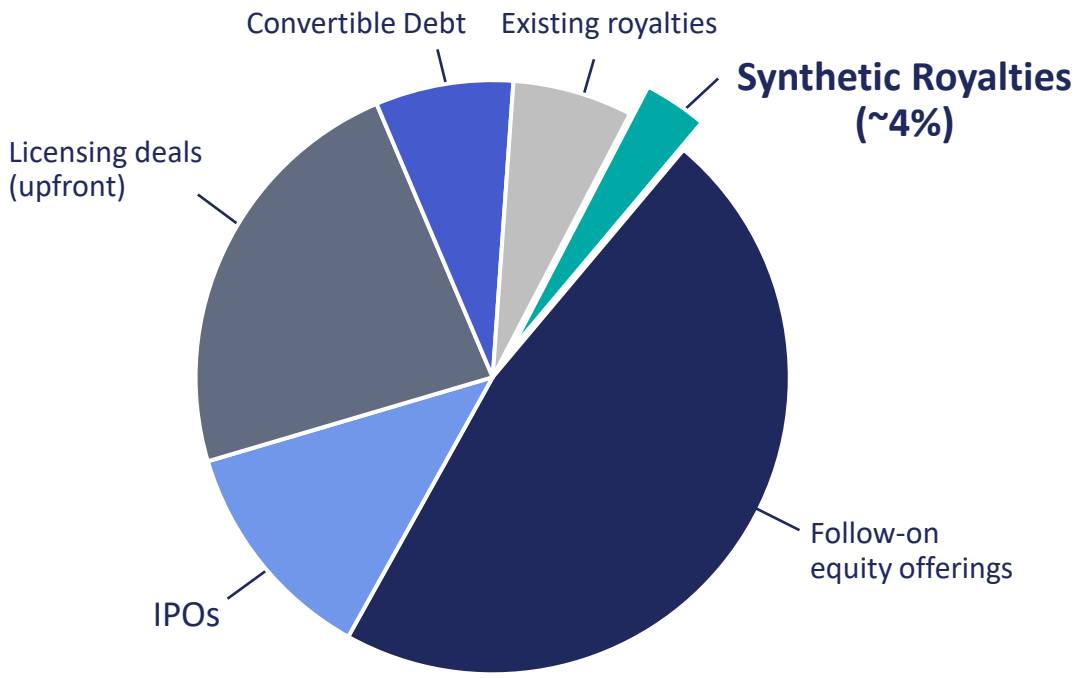
Synthetic royalties are an attractive funding modality

	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	✓		

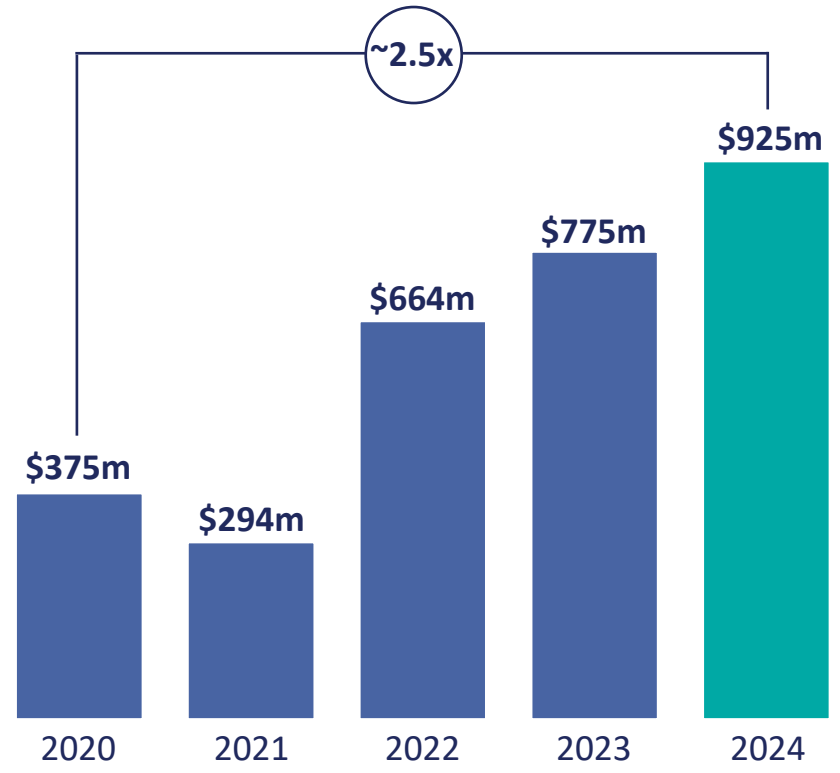
Synthetic royalties – a compelling innovation with significant growth potential

Synthetic royalty opportunity is large and rapidly growing

Biotech industry funding[1,2]
Past 5 years: ~$290bn



Record year for RP synthetic royalty transactions
(Announced value)[3]

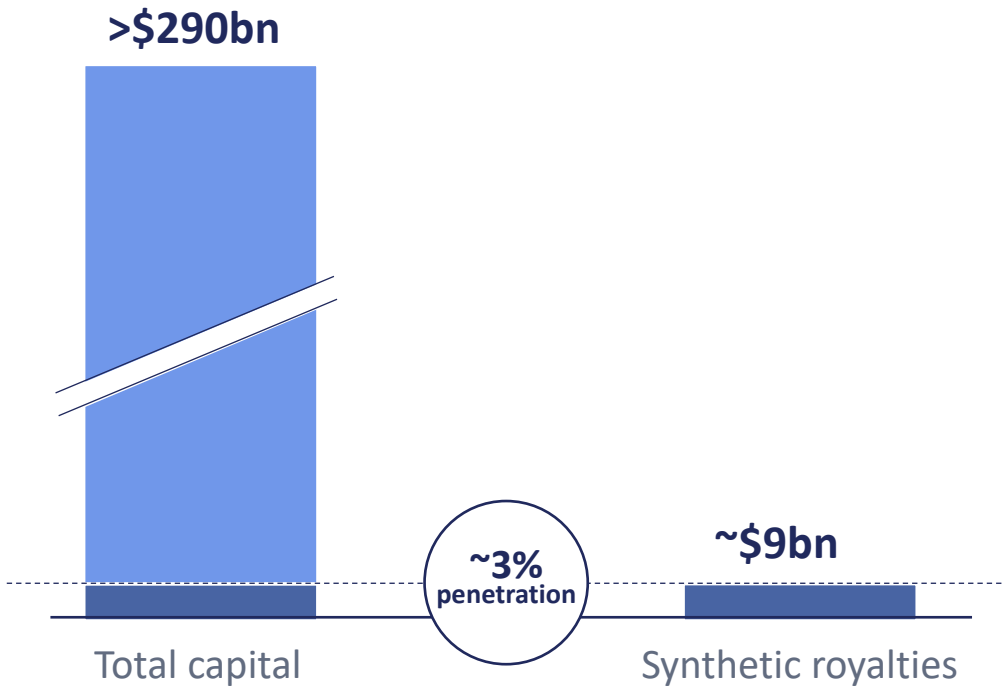


Source: Dealogic, Biomedtracker, internal estimates, Evaluate.

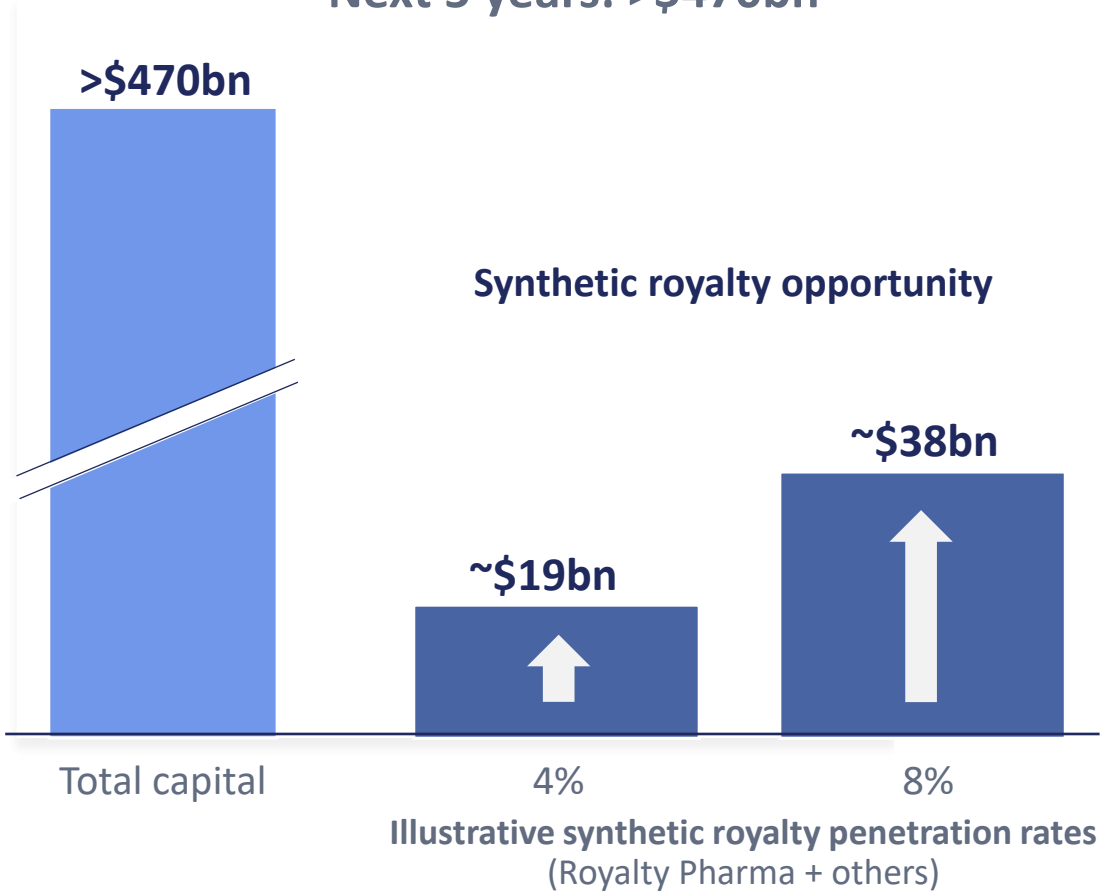
1. Includes capital raised through initial public offerings (IPOs), follow-on offerings, equity linked issuances and upfronts from licensing deals.
2. Royalty funding reflects announced value of transactions and includes associated equity investments.
3. Data reflects announced value of transactions, including milestones and contingent payments. Amount in 2024 also includes Cytokinetics development funding but excludes commercial launch funding.

Synthetic royalty market has room for significant expansion

Biotech funding sources[1,2]
Past 5 years



Biotech industry funding needs
Next 5 years: >$470bn



Illustrative synthetic royalty penetration rates
(Royalty Pharma + others)

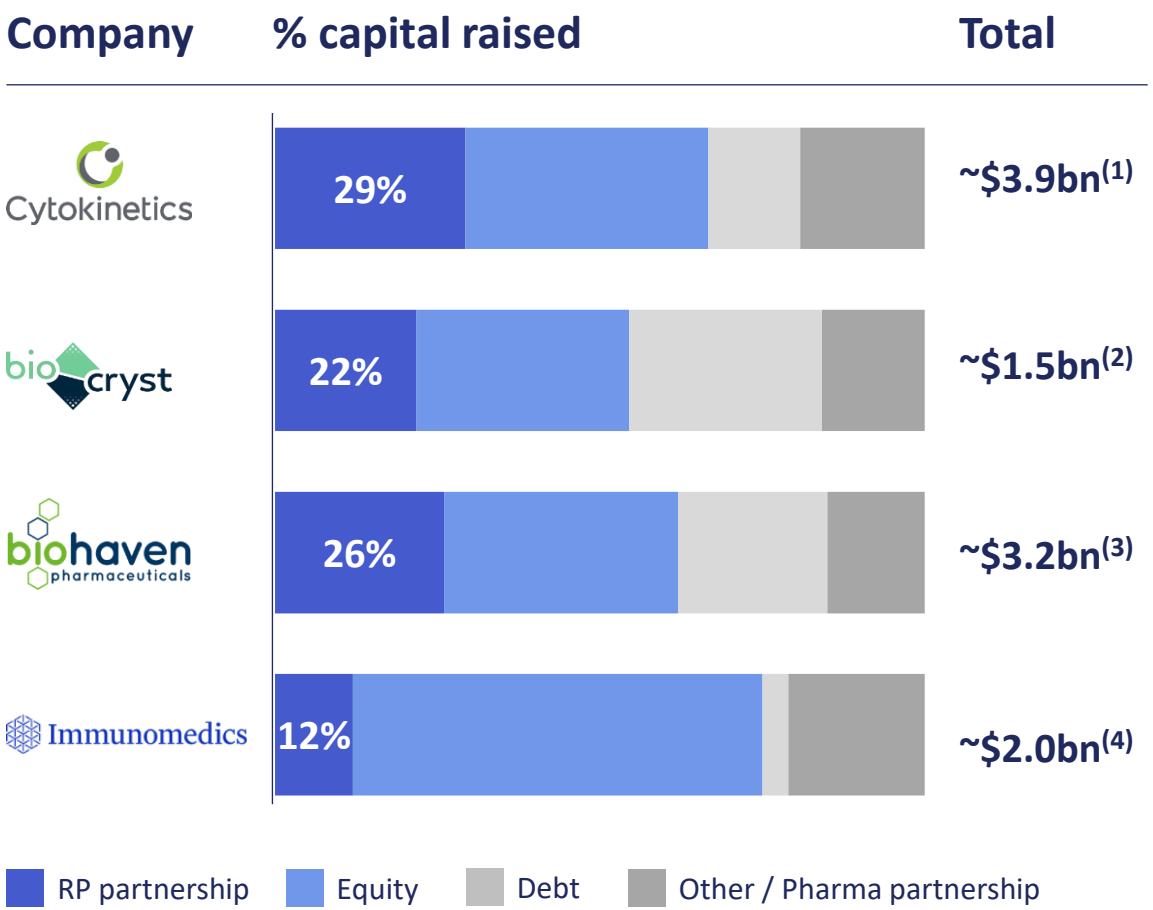
Source: Dealogic, Biomedtracker, internal estimates, Evaluate.
1. Includes capital raised through initial public offerings (IPOs), follow-on offerings, equity linked issuances and upfronts from licensing deals.
2. Royalty funding includes upfront investment consideration, including acquisitions of synthetic 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	morphosys; Constellation PHARMACEUTICALS	astellas; (osi) pharmaceuticals	**Emerging opportunity**

FTC: Federal Trade Commission

New funding paradigm emerging for biopharma



Significant benefits of diversified capital

Financial flexibility tailored to company's needs

Scale of capital needed may only be available through diversified sources

Optionality during all market environments

Proprietary insights potentially shared on development program and/or commercial market

Long-term partner that can support company's needs throughout their growth journey

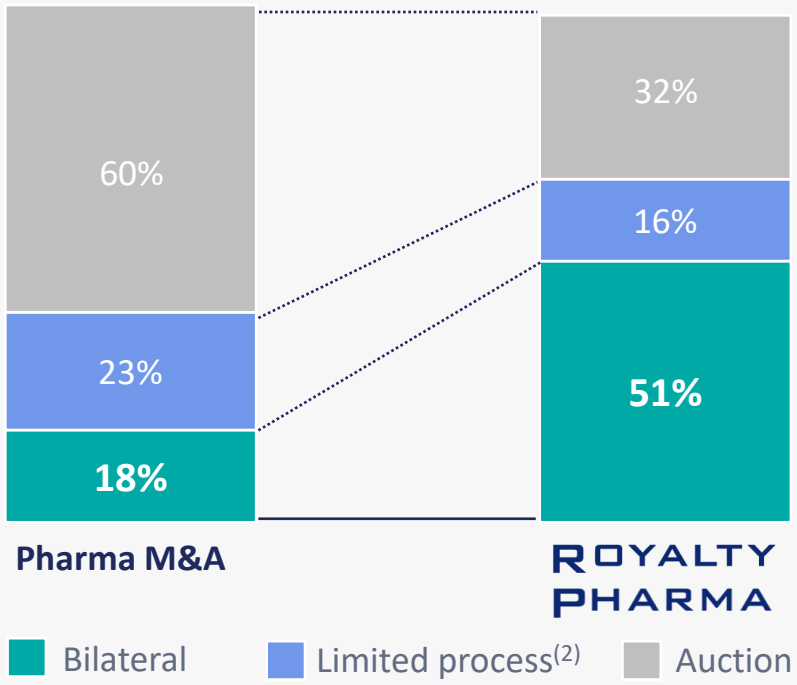
Royalties are a growing part of successful biotech's diversified capital structure

Note: estimates based on publicly available information as of date of announced transaction. Royalty Pharma partnerships assume fully drawn facilities and maximum transaction value. Other primarily includes upfront payments.

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

Proprietary sourcing provides competitive advantage

Source of deals[1]



- **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

1. Includes all Royalty Pharma transactions announced from January 2016 to March 2023; analysis of Schedule 14D-9s for pharma M&A transactions and includes biotech acquisitions greater than $1 billion in value (57 in total). Percentages are based on number of transactions.
2. Limited process is three or fewer parties involved in process.

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

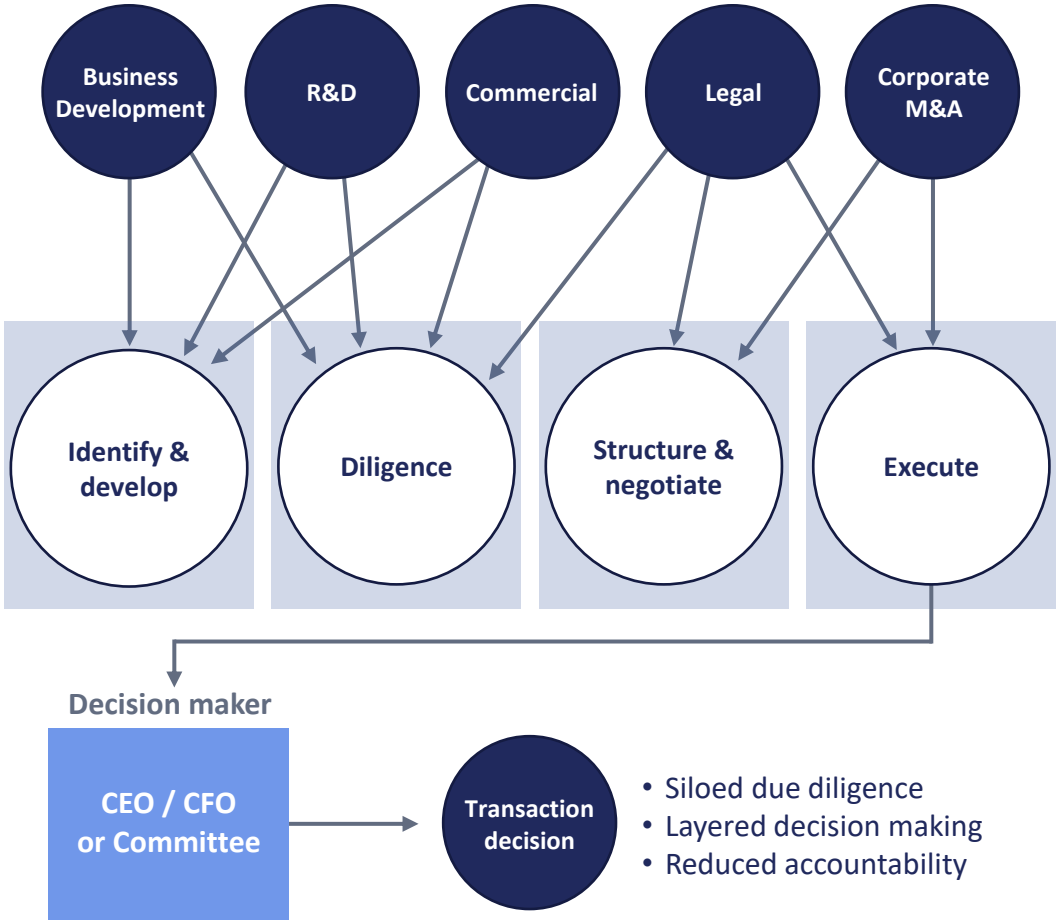
Unique platform for clinical trial analysis and market evaluation

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

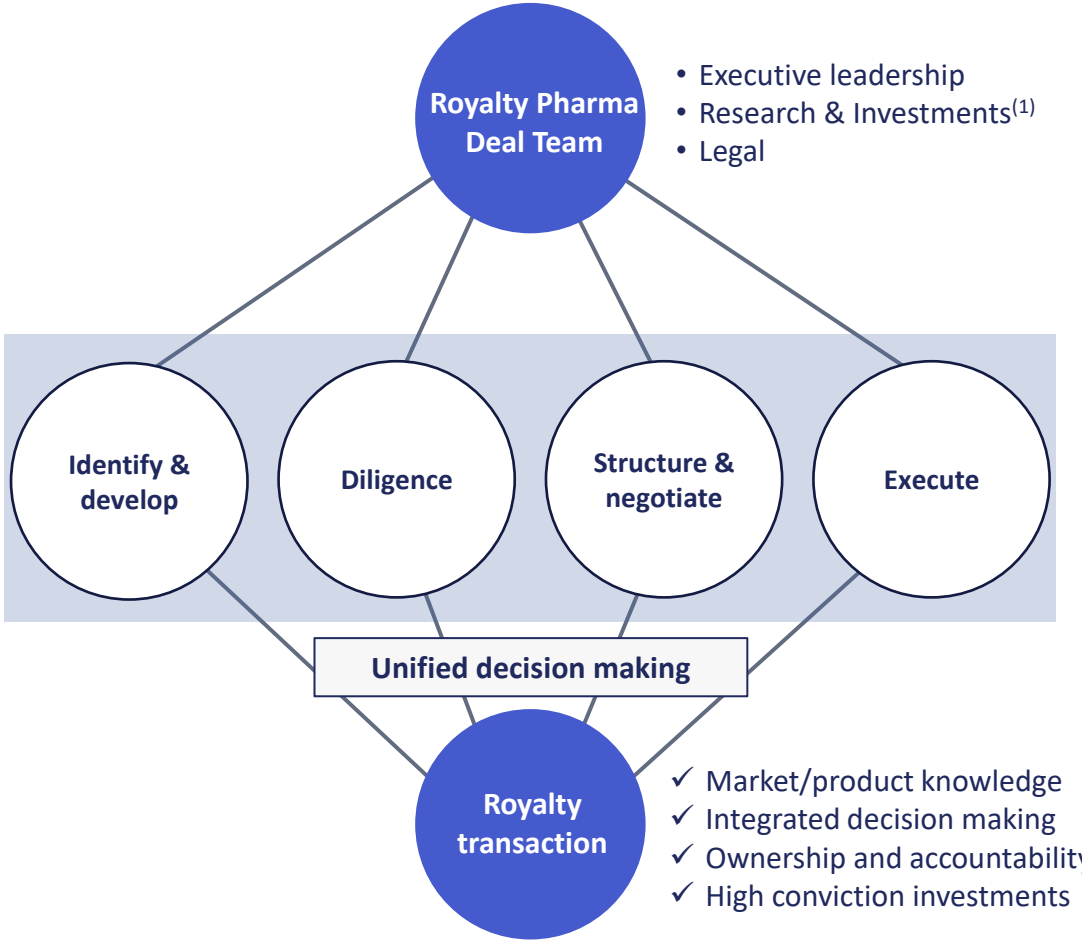
One Royalty Pharma team at the center of every transaction

Traditional business development



- Siloed due diligence
- Layered decision making
- Reduced accountability

Royalty Pharma process



- Executive leadership
- Research & Investments[1]
- Legal

- ✓ Market/product knowledge
- ✓ Integrated decision making
- ✓ Ownership and accountability
- ✓ High conviction investments

1. Includes Research & Investments, Investments & Capital Strategies and Strategy & Analytics.

Extensive due diligence process sharpened over decades

Clinical

Physician diligence
- US/EU/Japan
- KOL/academic
- Community
- Surveys

Non-clinical
- Pharmacokinetics
- Pharmacodynamics
- Dose modeling

Statistics
- Probability of success
- Effect size modeling
- Enrollment modeling
- Statistical Analysis Plans

Toxicology
- Animal toxicologists
- Specialized areas – (i.e., ophthalmology)

Clinical
- Interview former R&D executives
- Patient level data analysis
- Immunogenicity and specific safety observations
- Clinical trial design and study reports
- Comparative analysis

Patients & Caregivers
- Efficacy, tolerability, convenience perspectives
- Social media

Regulatory, IP, Manufacturing

Intellectual property
- US/EU/Japan and other
- Litigation scenario analysis
- Multiple opinions

Manufacturing
- Modality expertise: small molecule, biologics, gene therapy
- Regulatory perspectives
- Capacity planning

Drug delivery
- Auto-injectors and devices
- Design and human factors
- Formulation technologies

Regulatory
- US/FDA meeting minutes
- EU/EMA meeting minutes
- International (PMDA, other)
- Consultants

Commercial

Claims analysis
- Patient diagnosis, treatment, compliance
- Site of care
- Other patient metrics

Market sizing
- Patient finding
- Claims-driven
- Epidemiology
- Scaled market surveys

US pricing
- Pricing modeling
- Gross-to-net modeling

Payors
- Payor/PBM executives
- Formulary analyses

Competition
- Landscape analysis
- Product profile and cost comparisons

International access
- Market-by-market pricing
- Addressable patients
- Yearly access caps and other structures

Commercial strategy
- Interview sales and marketing executives, MSLs and district managers
- Required promotional spend

Contracts, Governance

Transactional
- Accounting treatment
- Tax implications

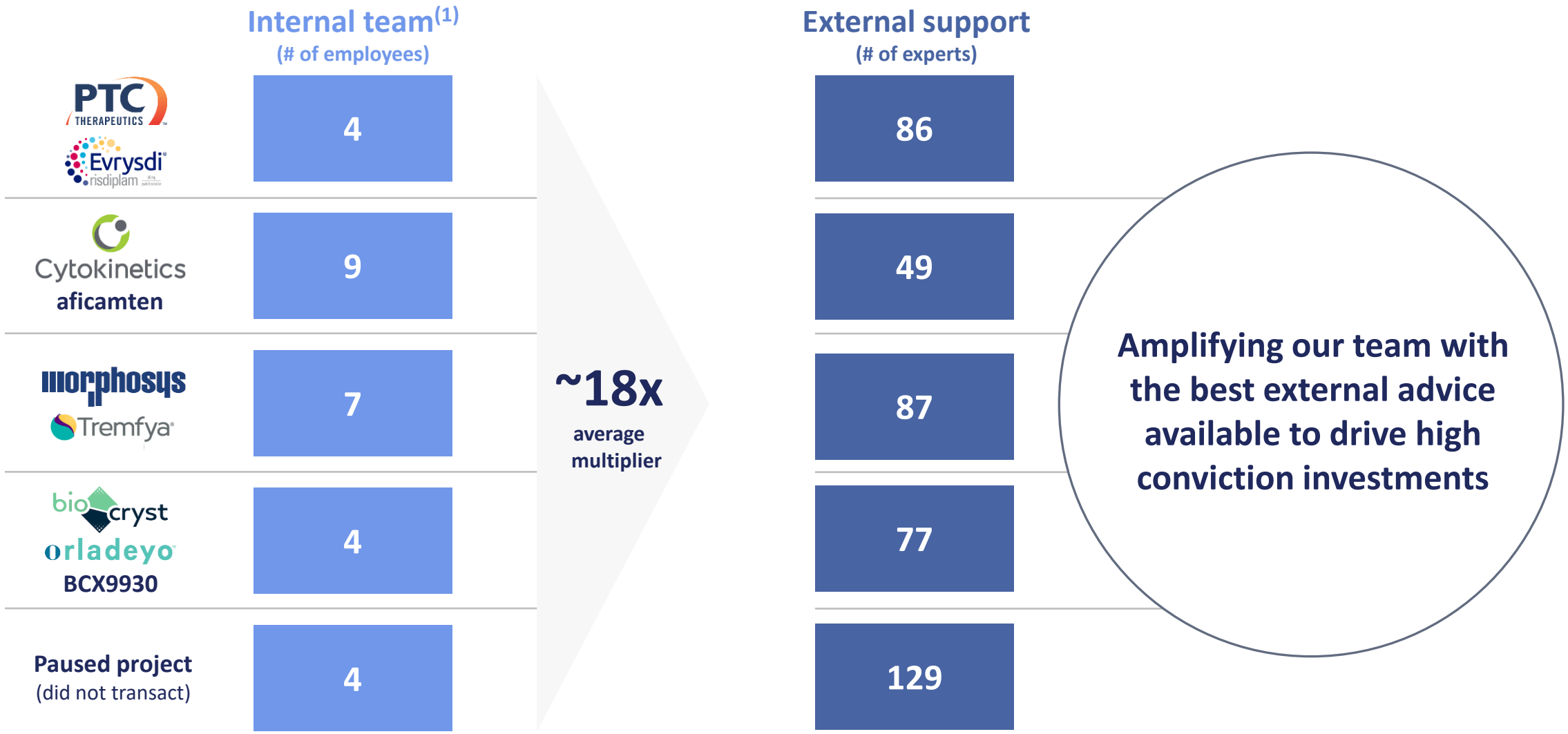
Licensing and contracts
- Analysis of contract language
- Risk assessment
- Expert structuring and drafting

Management & governance
- Experience and strategy
- Compensation alignment

Environmental, Social & Governance
- Board oversight
- ESG-informed investment processes

US: United States; EU: European Union; KOL: key opinion leader; FDA: Food & Drug Administration; EMA: European Medicines Agency; PBM: pharmacy benefit managers; MSL: medical science liaison; PMDA: Pharmaceuticals and Medical Devices Agency; ESG: environmental, social and governance; IP: intellectual property

Leveraging the best internal and external expertise available



1. Internal team represents Senior Vice Presidents (SVPs) and below in Research & Investments, Legal, Strategy & Analytics and other departments.

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

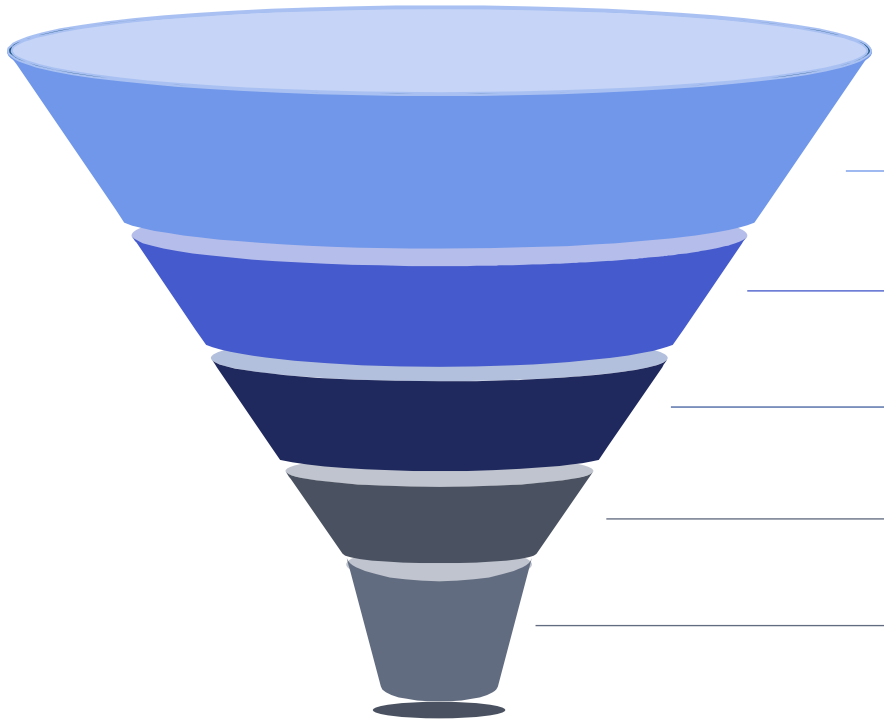
Medical claims analysis | **Real world evidence** | **Sales & marketing benchmarking** | **Payor & formulary landscape**

- 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

Announced $2.8 billion of royalty transactions in 2024

2024 Royalty Pharma investment activity



- >440 initial reviews
- 153 CDAs signed
- 99 in-depth reviews
- 42 proposals submitted
- Executed 8 transactions for $2.8bn

Voranigo	Yorvipath
Niktimvo	RYTELO
frexalimab	aficamten
ecopipam	CK-586
deucrictibant	omecamtiv

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

Strong Royalty Pharma pipeline trends given market backdrop

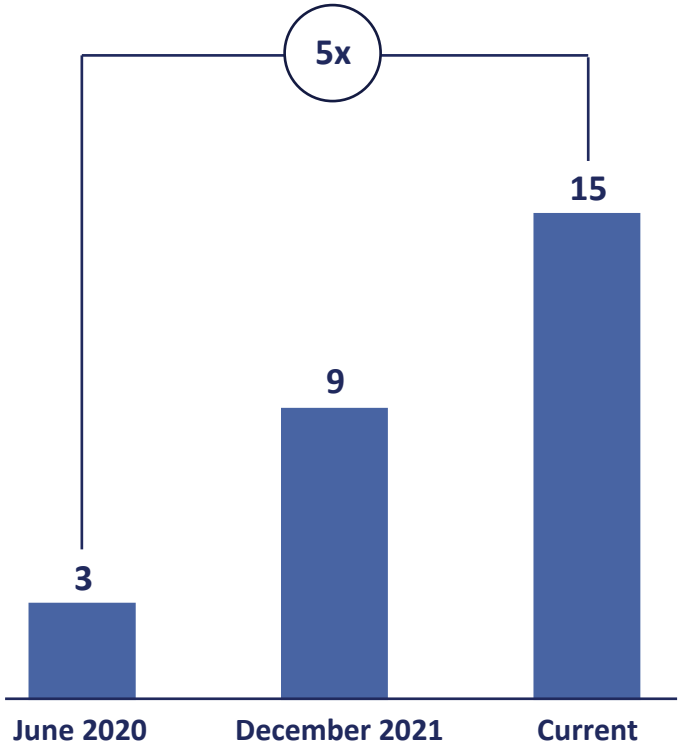
Opportunity set increasing

Robust royalty acquisition activity

Significant growth and diversity of development-stage pipeline

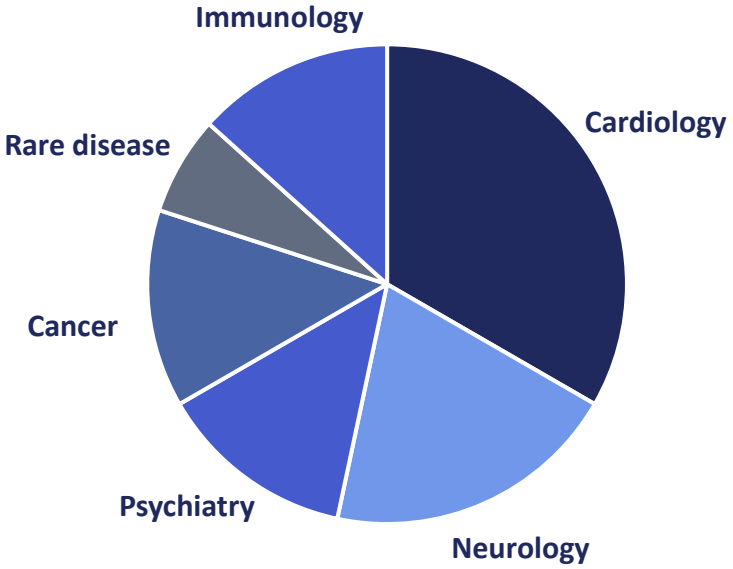
Pipeline evolution since IPO

(by number of therapies)



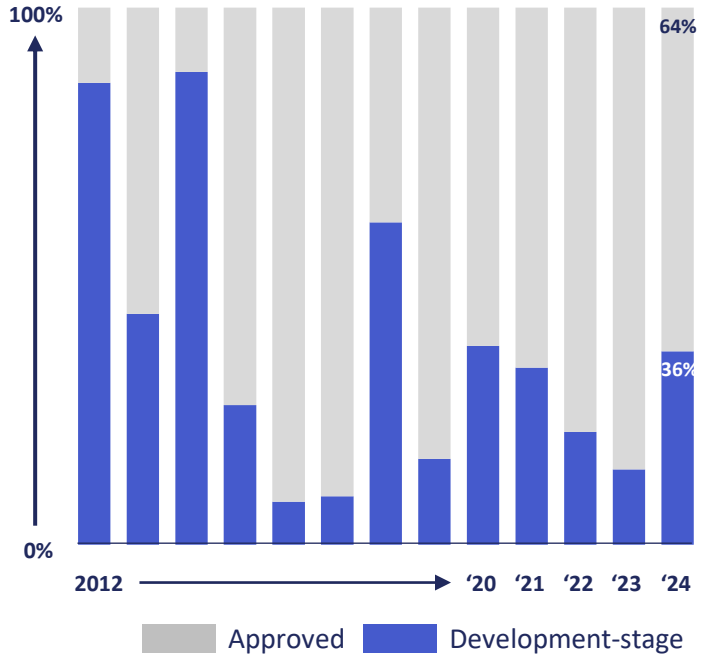
Strong diversity of pipeline

(by number of therapies)[1]



Annual Capital Deployment

(~$25bn in cumulative Capital Deployment)



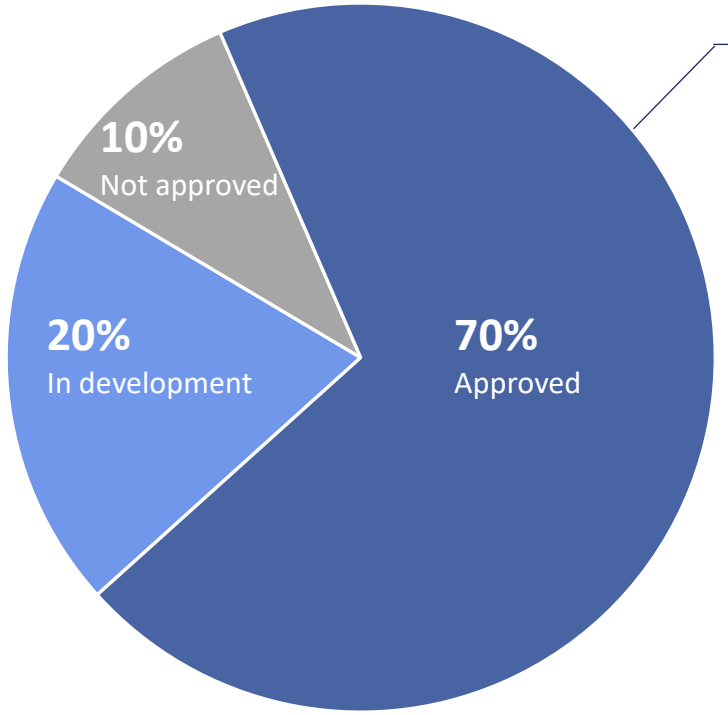
1. As of May 2025

Strong track record of investing in development-stage therapies

- Invested >$9bn in development-stage therapies since 2012
  - Require strong proof of concept data
  - Broad landscape of opportunities
  - Not constrained by therapeutic area
  - Target returns in the teens
- 15 development-stage therapies in portfolio
- History of identifying therapies with unmet and underserved patient needs

Capital Deployment on development-stage therapies[1, 2]

(since 2012)



Approved since acquisition

Evrysdi
trikafta
Nurtec ODT
Tecfidera
imbruvica
TAZVERIK
TRODELVY
AIRSUPRA
Bosulif
Zavzpret
COBENFY

1. Reflects Capital Deployment for development-stage therapies from 2012 through 2025 year-to-date.
2. Not approved includes investments in gantenerumab, otilimab, BCX9930/BCX10013, vosaroxin, palbociclib, ApiJect, Merck KGaA's anti-IL17 nanobody M1095 and MK-8189.

Unique and powerful approach to development-stage investing

	Product selection	Deal structure
Approach	Post proof of concept with strong evidence of clinical efficacy and safety Partnering directly with innovators provides unique insights into clinical program and sales potential	Risk mitigation strategies through clinical & regulatory milestones, royalty tiering, option periods, etc. Strong alignment with partner through co-funding on top R&D programs
Examples	**Cobenfy** Investment after third positive registrational trial minimizes regulatory risk **aficamten** Unique insights into clinical program through direct partnership with Cytokinetics	**frexalimab** Nearly half of purchase price potentially returned in higher probability milestones mitigates risk **TEV-'749** Will receive entire amount funded over 5 years on FDA approval, in addition to a royalty on sales(1)

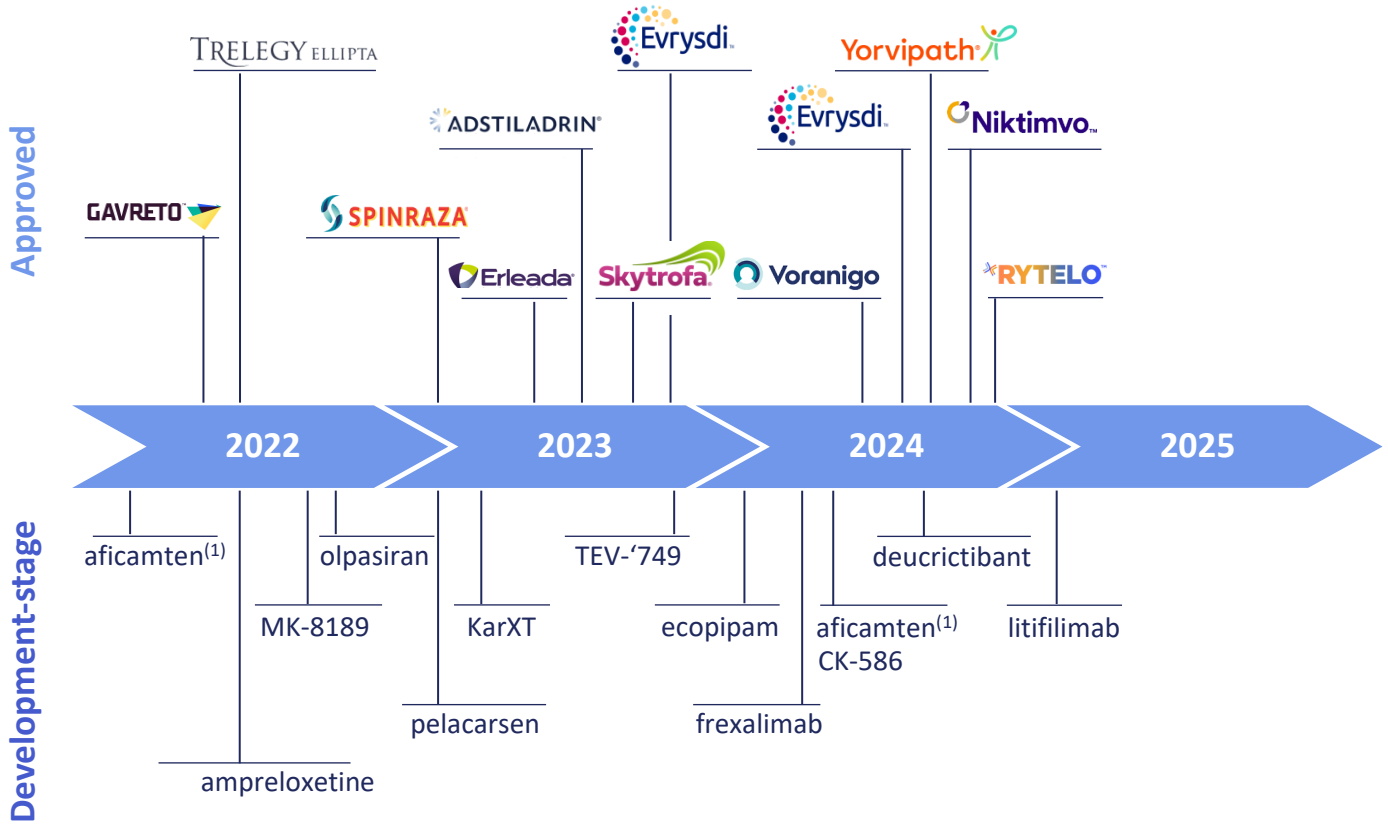
Unique approach to development-stage investing drives attractive returns while mitigating risk

1. If Teva chooses not to file a New Drug Application with the FDA following positive Phase 3 study results, then Teva will pay an amount equal to 125% of the total amount funded to Royalty Pharma.

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

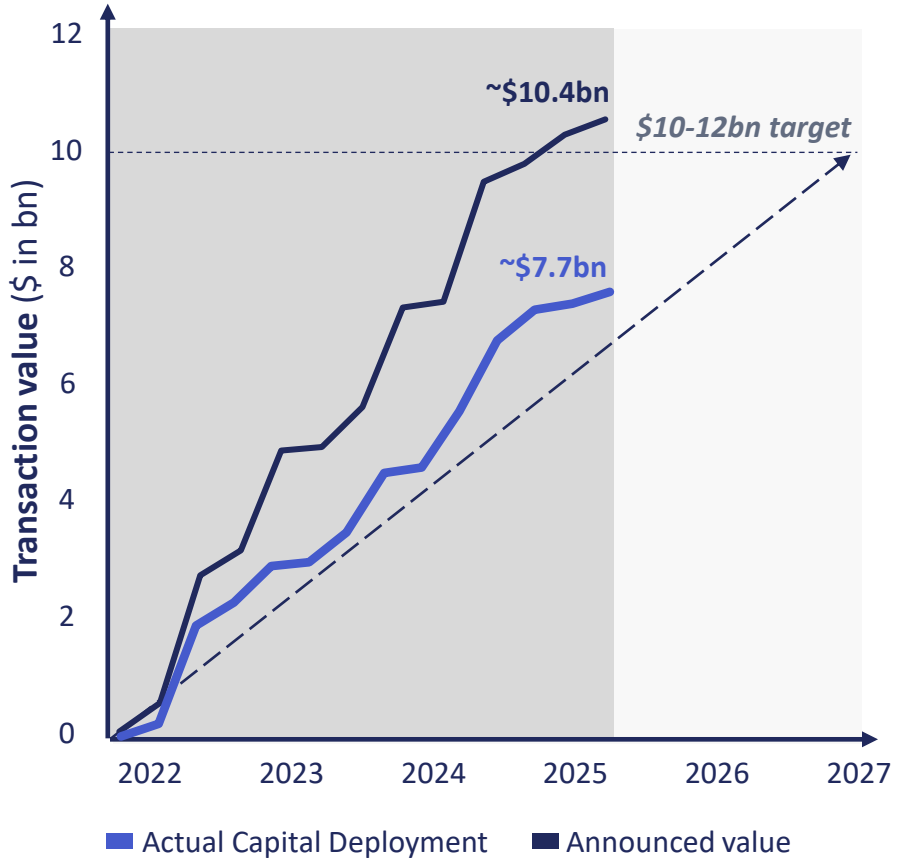
Investing in approved and development-stage royalties

(Transactions announced since January 1, 2022)



5-year capital deployment target(2,3)

(Transaction value; since January 1, 2022)



1. Includes launch and development capital.
2. See slide 67 for factors that may impact Royalty Pharma's capital deployment target.
3. Capital deployment target provided at May 17, 2022 Investor Day.

Important events expected in 2025

Select year-to-date and expected upcoming events

mTNBC: metastatic triple negative breast cancer; oHCM: obstructive hypertrophic cardiomyopathy; FDA: Food & Drug Administration; EMA: European Medicines Agency

1. Teva Q4 earnings release, January 29, 2025. 2. Emalex press release, February 25, 2025. 3. Roche press release, April 3, 2025. 4. Gilead press release, April 21, 2025. 5. Bristol Myers Squibb press release, April 22, 2025. 6. Cytokinetics earnings press release, February 27, 2025. 7. Gilead Q1 earnings presentation, April 24, 2025. 8. Bristol Myers Squibb Q1 earnings call transcript, April 24, 2025. 9. Johnson & Johnson press release, March 20, 2025. 10. Exelixis press release, March 26, 2025. 11. Johnson & Johnson press release, April 25, 2025. 12. Cytokinetics press release, May 1, 2025. Aficamten PDUFA date is December 26, 2025.

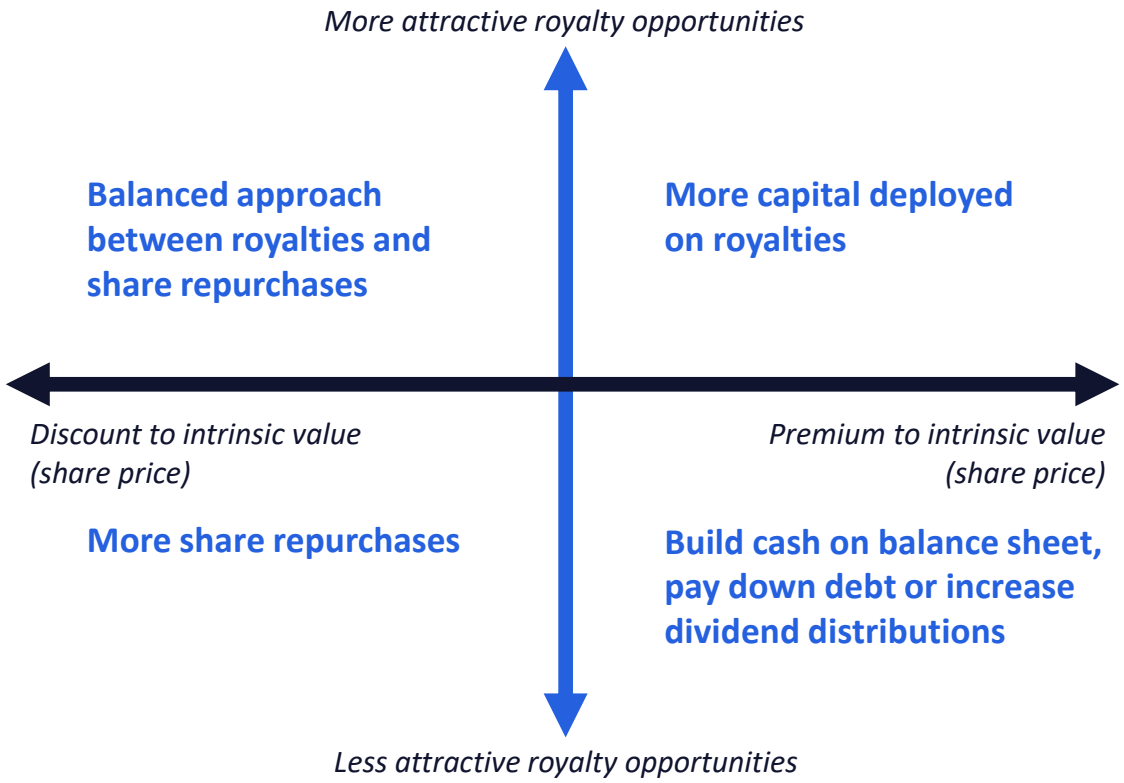
Big products with world class marketers and large royalties

Therapy	Lead indication	Marketer	Potential first- or best-in-class	Potential peak sales (non risk adjusted)[1]	Potential peak royalties	Expected launch year[2]
frexalimab	multiple sclerosis	Sanofi	✓	>$5bn	>$400m	2028
olpasiran	cardiovascular disease	Amgen	✓	~$3bn	>$250m	2027
aficamten	hypertrophic cardiomyopathy	Cytokinetics	✓	~$4bn	>$175m	2025
pelacarsen	cardiovascular disease	Novartis	✓	>$3bn	~$150m	2027
seltorexant	depression	Johnson & Johnson	✓	>$3bn	>$150m	NA
litifilimab	lupus	Biogen	✓	>$2bn	>$150m	2028
trontinemab	Alzheimer's	Novartis	✓	>$3bn	~$150m	NA
deucrictibant	hereditary angioedema	Pharvaris	✓	>$1bn	>$55m	2027
TEV-'749	schizophrenia	Teva	✓	~$1bn	~$35m	2026
pelabresib	myelofibrosis	Novartis	✓	~$1bn	~$30m	NA
Total (select late-stage development):				**>$26bn**	**>$1.5bn**	

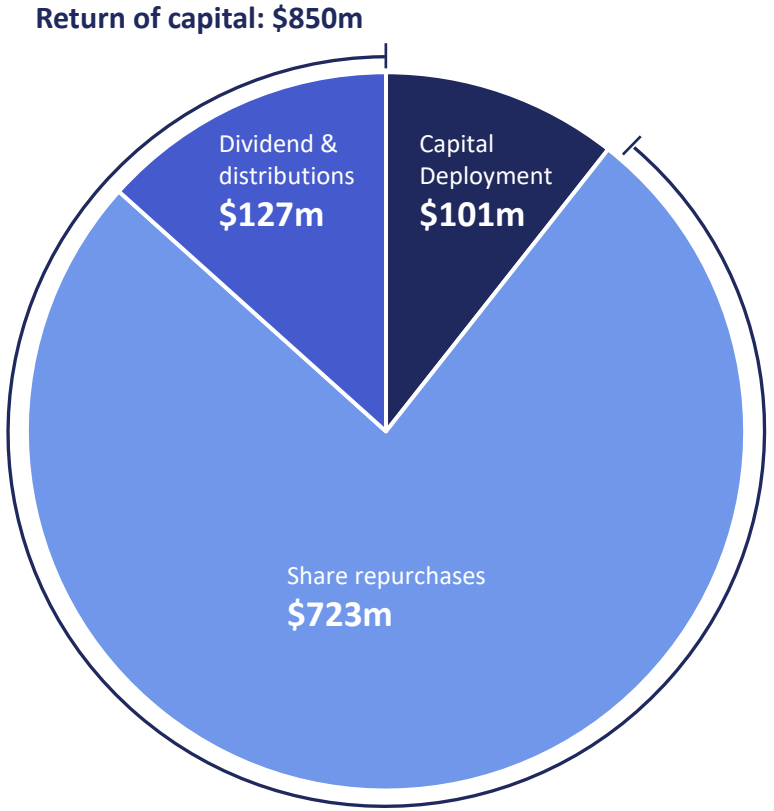
Note: the midpoint is used where ranges are shown.
1. Potential peak sales for frexalimab, pelacarsen, seltorexant and trontinemab based on marketer guidance; potential peak sales for olpasiran, aficamten, litifilimab, deucrictibant, TEV-'749 and pelabresib based on analyst research estimates. 2. Expected launch year for frexalimab, aficamten, pelacarsen and TEV-'749 based on marketer guidance; expected launch year for olpasiran, litifilimab and deucrictibant based on analyst research estimates. Seltorexant launch year not available; pending additional disclosure from Johnson & Johnson. Trontinemab launch year not yet available; pending additional disclosure from Roche. Pelabresib launch year not available; pending additional disclosure from Novartis.

Capital allocation framework guides decisions

Royalty Pharma's capital allocation framework



Substantial share repurchases in Q1 2025



Balancing acquiring royalties and increasing return of capital

Capital Deployment

- Capital Deployment guidance of $2.0-$2.5bn per year
- Target returns maintained[(1)]; returns have trended higher in recent years
- Strong commitment to investment grade credit rating

Share repurchases

- Board authorized new $3bn share repurchase program
- Reflects confidence in Royalty Pharma's strong fundamental outlook
- Intend to repurchase $2.0bn of shares in 2025 subject to market conditions; total value repurchased will depend on discount to intrinsic value

Dividend

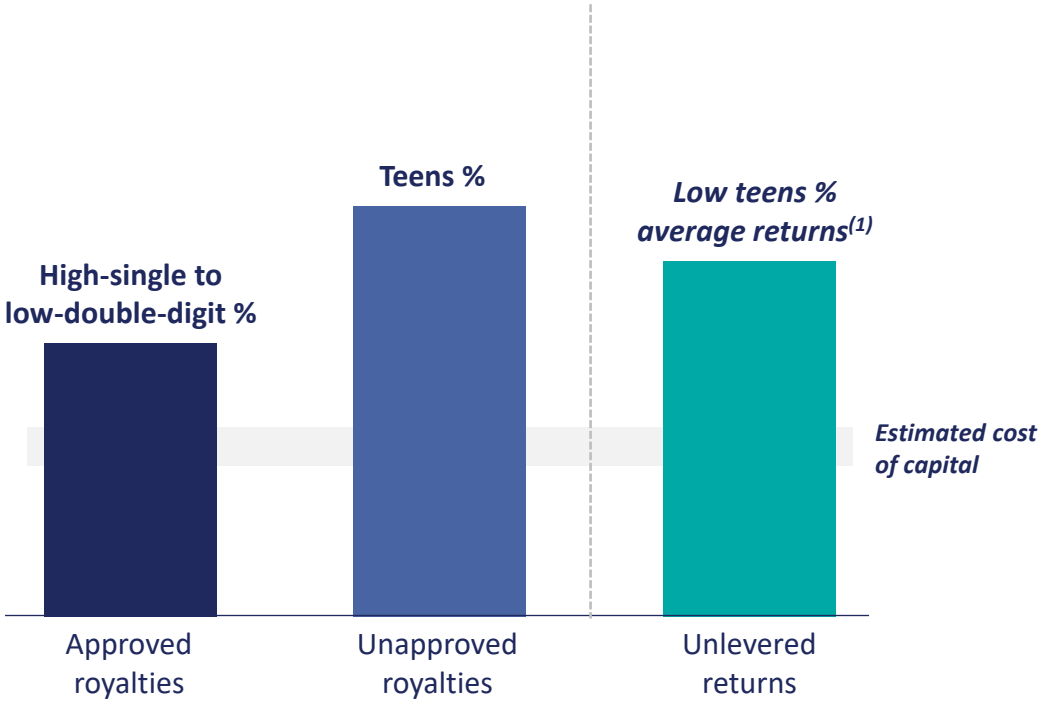
- Current dividend of $0.88 annually, ~2.7% dividend yield
- Commitment to grow dividend mid-single digits percentage annually
- Track-record of consistent annual dividend growth

See slide 67 for definitions

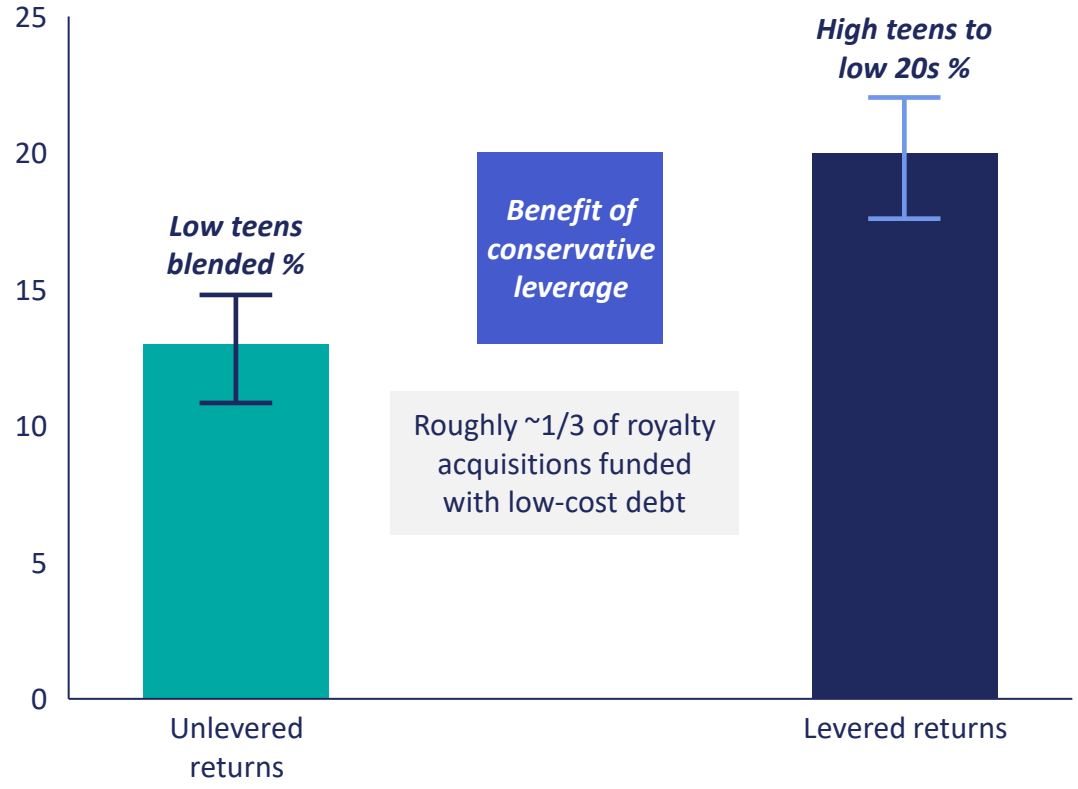
1. Target returns of high-single to low-double digits for approved products and teens for development-stage therapies.

Consistently attractive returns amplified by conservative leverage

Royalty Pharma target returns



Leverage benefit to target returns



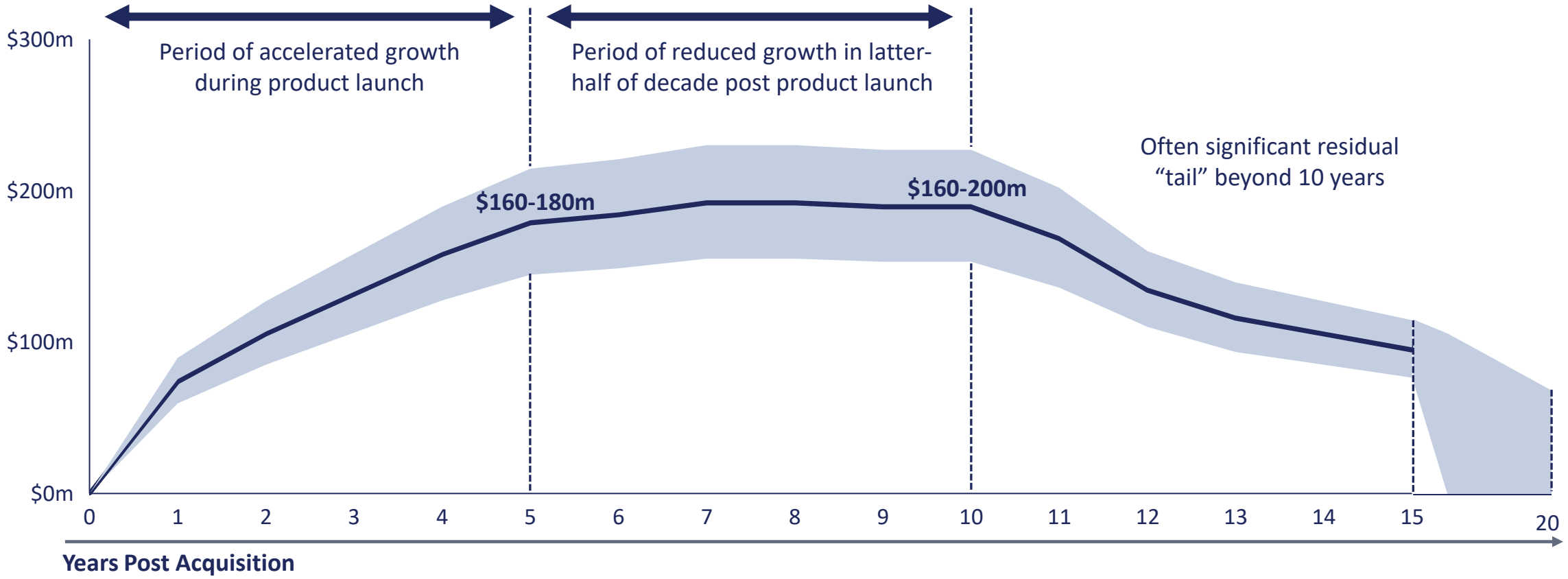
Expect to consistently deliver attractive returns above cost of capital regardless of interest rate environment

1. Illustrative returns reflect a combination of actual results and estimated projected returns for investments from 2012 – Q1 2025 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.

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

Representative annual Portfolio Receipts[1,2] ("top-line") from $1bn of investment - based on blend of historical acquisitions

(As of May 2022 Investor Day)



1. See slide 72 for definitions and factors that may impact the achievement of our growth outlook.
2. Representative cash receipts based on blended average of actual and projected returns for approved and development-stage transactions over the last five years under a range of scenarios.

Well positioned in evolving interest rate environment

Existing capital structure

Long duration, low-cost debt an underappreciated asset

- Fixed weighted-average coupon of ~3.1% on $7.8bn of investment grade bonds
- ~70% of existing bonds due 2030 or later
- Committed to investment grade rating
- Revolving credit facility of up to $1.8bn

Interest rates

Future investments

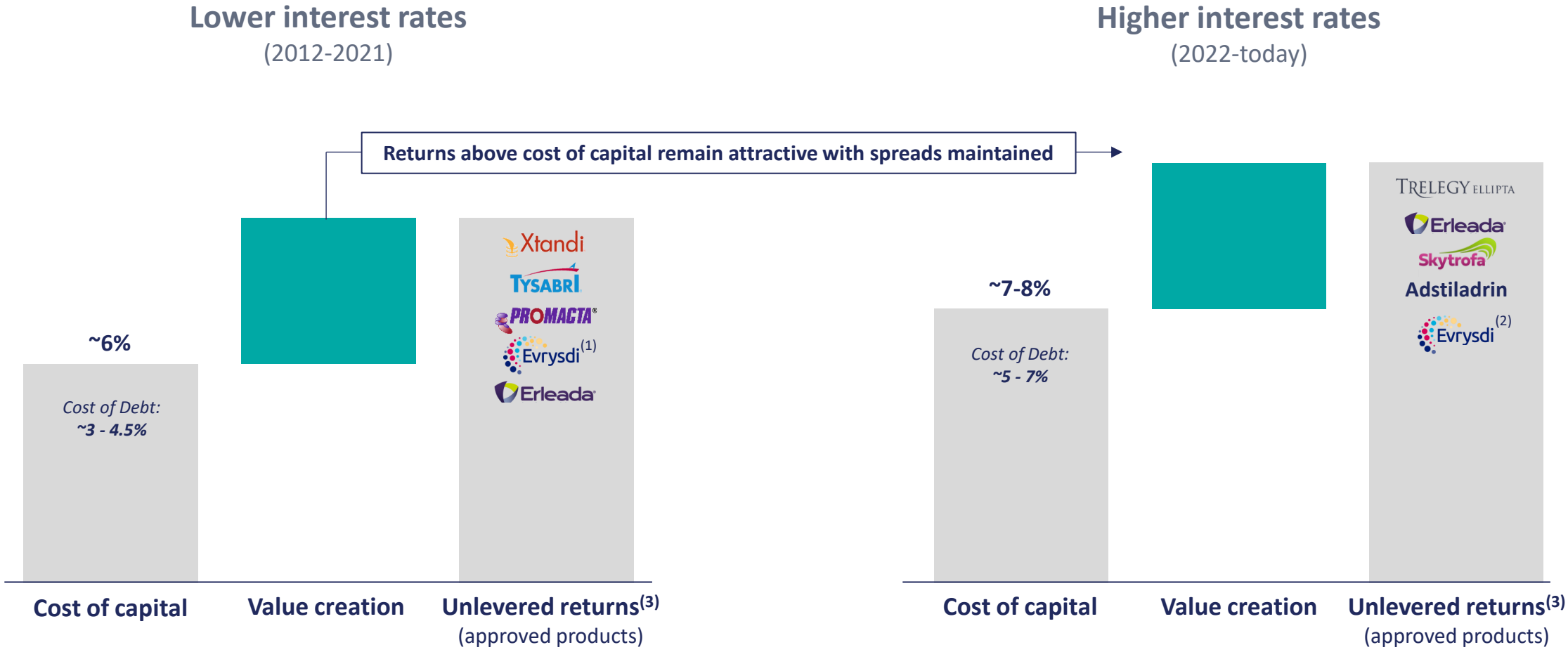
Higher risk-adjusted returns

- 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

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 – Q1 2025. 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

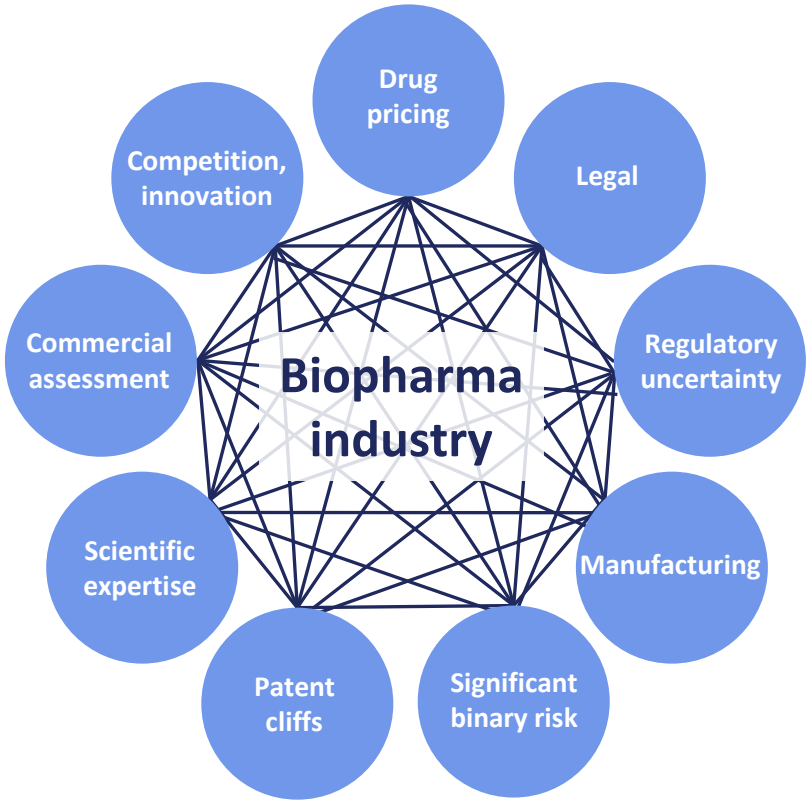
		ROYALTY PHARMA	Large biopharma[1]
Growth	2020-2030 top-line[2] CAGR	10% or more[2]	~5.5%[3]
Scale	Number of blockbusters[4]	15	9
Cost of capital	Estimated WACC	~7-8%	~7-8%
Risk	Stage of development	Post proof-of-concept to approved	Pre-clinical to approved
Return	Historical return on investments[5]	Consistent low teens IRR	?
Income	Dividend yield	~2.7%	~3.7%
Ownership	Management % ownership of FDSO	19%[6]	<1%[7]

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

1. Consists of the average of Eli Lilly, Johnson & Johnson, Merck, Pfizer, AbbVie, Bristol Myers Squibb, Gilead, Amgen, Biogen, Vertex, Regeneron, Roche, Novartis, GSK, Sanofi, Novo Nordisk and AstraZeneca; number of blockbusters for large biopharma peers based on year-end 2024 sales.
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 67 for definitions.
3. Source: Visible Alpha.
4. Calculated based 2024 sales and excludes products tied to recently expired royalties.
5. Historical return on investments for Royalty Pharma is from 2012 to Q1 2025; 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 ownership by all employees of Royalty Pharma as of May 2025.
7. Represents Named Executive Officer (NEO) ownership reported by CapIQ for Large biopharma.

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

CF to remain important contributor regardless of triple scenario

Scenarios	Components	Triple combination blended royalty[1]	2030 franchise sales (As of August 8, 2023)	2030 PR from CF[3]	Duration[4]
Status quo trikafta	elexacaftor · ivacaftor · tezacaftor	~9%	~$11.5bn Vertex consensus[2]	~$900m from ~$750m in 2023	2037
RP position New CF Triple (deuterated ivacaftor **is** royalty bearing)	vanzacaftor · deuterated ivacaftor · tezacaftor	~8%	$13bn+ RP view with new CF triple	~$900-950m +$0-$50m vs status quo	2039-2041
Alyftrek (deuterated ivacaftor **not** royalty bearing)	vanzacaftor · deuterated ivacaftor · tezacaftor	~4%	**Upside drivers:** ~6,000 discontinued patients, geographic & age expansion, patient growth	~$600-700m -$200-$300m vs status quo	

Royalty bearing components

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

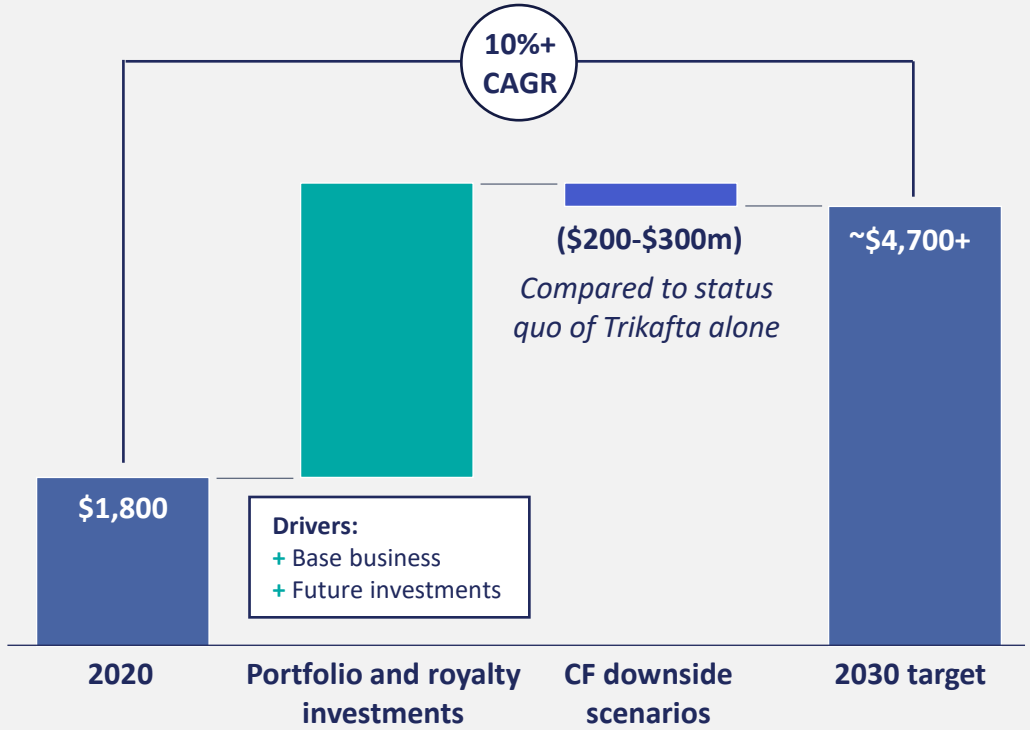
NPV impact of potential downside scenarios are estimated to be $1-$2 per share

RP: Royalty Pharma; CF: Cystic fibrosis; PR: Portfolio Receipts 1. Vanzacaftor royalty rates based on statements by Vertex 2. Vertex-collated consensus estimates derived from Visible Alpha as of August 2023. 3. PR figures shown are net of estimated distributions to legacy non-controlling interests (NCI). There are no NCI distributions related to the additional royalty interest that we acquired from the CF Foundation in 2020. CF PR in 2030 assumes distributions to NCI of ~(13%) for the status quo scenario, ~(13-14%) for the new CF triple with an ~8% blended royalty rate, and ~(15-17%) for the new CF triple with a ~4% blended royalty rate. For example, PR of ~$950m would equate to ~$1,100m of Royalty Receipts and PR of ~$600m would equate to ~$700m of Royalty Receipts. 4. Indicates date applicable product when generic competition is expected to enter the market. RP is entitled to royalties on CF products that arose out of the collaboration between Vertex and the Cystic Fibrosis Foundation. Royalties are not tied to patents.

Base business and deal activity expected to power growth

Portfolio Receipts evolution through 2030[1]

(2030 growth target provided at May 2022 Investor Day)



Confident in sustaining double-digit growth CAGR[1]

- 2030 Portfolio Receipts target of >$4.7bn (2020-2030 CAGR >10%) driven by base business and royalty investments
- Power of business model added >$1.2bn in potential Portfolio Receipts in 2025+ from royalty acquisitions since 2020
- Expect to achieve 2030 growth target even under Alyftrek downside scenario, which implies:
  - $200-$300m impact to Portfolio Receipts (≤ 4-6%)
  - <1% reduction to 2020-2030 CAGR
  - ~$1-2 impact to intrinsic value

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

CF: Cystic Fibrosis; PR: Portfolio Receipts; "top-line" refers to Royalty Pharma's Portfolio Receipts.
1. Based on Portfolio Receipts growth outlook of 10% or more from 2020 through 2030 provided at May 2022 Investor Day. See slide 67 for factors that may impact our outlook.

Detailed calculation assumptions for CF triple scenarios

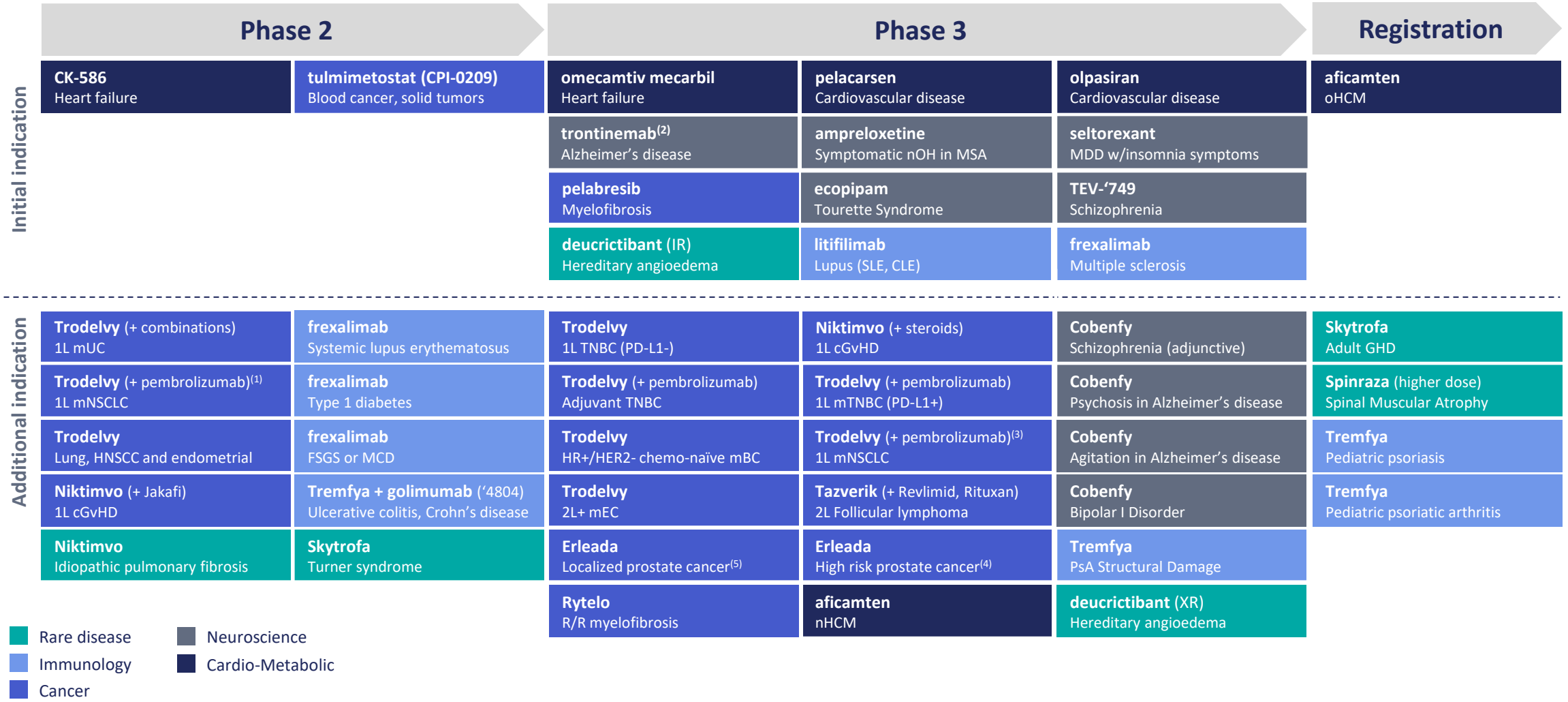
Scenarios	Product	Blended royalty[1]	Sales split	2030 franchise sales (As of August 8, 2023)	Royalty Receipts	NCI %	2030 PR from CF[3]
Status quo (Trikafta only)	trikafta	**~9%**	100%	**~$11.5bn[2]**	~$1,050m	(13%)	**~$900m**
RP position: New CF Triple (deuterated ivacaftor is royalty bearing)	Trikafta	~9%	50%				
	Alyftrek	~8%	**50%**	**$13bn+**	~$1,100m	(13%)	**~$950m**
	Total blended	**~9%**	100%				
	Trikafta	~9%	25%				
	Alyftrek	~8%	**75%**	**$13bn+**	~$1,050m	(14%)	**~$900m**
	Total blended	**~8%**	100%				
New CF Triple (deuterated ivacaftor not royalty bearing)	Trikafta	~9%	50%				
	New CF Triple	~4%	**50%**	**$13bn+**	~$850m	(15%)	**~$700m**
	Total blended	**~7%**	100%				
	Trikafta	~9%	25%				
	New CF Triple	~4%	**75%**	**$13bn+**	~$700m	(17%)	**~$600m**
	Total blended	**~5%**	100%				

Reflects 50-75% conversion from Trikafta to new triple

Calculations may not tie due to rounding

RP: Royalty Pharma; CF: Cystic fibrosis; PR: Portfolio Receipts; NCI: Non-Controlling Interests 1. Vanzacaftor royalty rates based on statements by Vertex 2. Vertex-collated consensus derived from Visible Alpha as of August 2023. 3. For the CF royalty, NCI equates to (17.6%) of Royalty Receipts on annual royalty bearing sales up to $5.8bn and (8.8%) of the annual royalty bearing sales above $5.8bn. For products with multiple components, royalty bearing sales are allocated equally to each of the active pharmaceutical ingredients. 4. PR figures shown are net of estimated distributions to legacy non-controlling interests (NCI). Cash Royalty Receipts are received on a one-quarter lag, so 2030 PR reflects Q4 2029 – Q3 2030 reported sales.

Potential royalties on >40 projects in late-stage development



mUC: metastatic urothelial carcinoma; mNSCLC: metastatic non-small-cell lung carcinoma; HNSCC: head and neck squamous cell carcinoma; cGvHD: chronic graft versus host disease; FSGS: focal segmental glomerulosclerosis; MCD: minimal change disease; IR: immediate release; TNBC: triple negative breast cancer; mBC: metastatic breast cancer; mEC: metastatic endometrial cancer; R/R: relapsed/refractory; nOH: neurogenic orthostatic hypotension; MSA: multiple system atrophy; mTNBC: metastatic triple negative breast cancer; nHCM: non-obstructive hypertrophic cardiomyopathy; MDD: major depressive disorder; PsA: psoriatic arthritis; XR: extended release; oHCM: obstructive hypertrophic cardiomyopathy; GHD: growth hormone deficiency

1. EVOKE-02. 2. Roche plans to initiate a Phase 3 program by the end of 2025. 3. EVOKE-03. 4. High risk localized advanced prostate cancer prior to radical prostatectomy. 5. High risk localized advanced prostate cancer receiving primary radiation therapy.

Updates to non-GAAP measures

Previous	New	Comments
Adjusted Cash Receipts (Non-GAAP)	**Portfolio Receipts**	Calculation of Portfolio Receipts will result in the same total as under previous presentation of Adjusted Cash Receipts Individual royalties to be reported net of legacy non-controlling interests to facilitate increased transparency of individual royalty economics
Adjusted EBITDA (Non-GAAP)	**Adjusted EBITDA** (Non-GAAP)	No change Liquidity measure
Adjusted Cash Flow (Non-GAAP)	**Portfolio Cash Flow** (Non-GAAP)	Liquidity measure Measure of cash that can be redeployed into value-enhancing royalty acquisitions, to pay down debt and for return of capital to shareholders Primary difference from Adjusted Cash Flow is exclusion of Development-stage funding payments - upfront and milestone
N/A	**Capital Deployment**	Capital Deployment was previously included in various line items on the statement of cash flows New presentation aggregates all Capital Deployment (except purchases of equity securities and marketable securities) into one metric Components of Capital Deployment detailed in separate table

Royalty Pharma Liquidity Summary

$ in millions	FY 2024	FY 2023	FY 2022	FY 2021	FY 2020	FY 2019 (PF)[1]
Portfolio Receipts	**2,801**	**3,049**	**2,789**	**2,129**	**1,800**	**1,776**
Payments for operating and professional costs	(236)	(243)	(223)	(185)	(180)	(145)
Adjusted EBITDA (non-GAAP)	**2,565**	**2,806**	**2,566**	**1,944**	**1,621**	**1,631**
Interest (paid)/received, net	(113)	(98)	(145)	(143)	(131)	(250)
Portfolio Cash Flow (non-GAAP)	**2,452**	**2,708**	**2,421**	**1,801**	**1,490**	**1,381**

Amounts may not add due to rounding.

1. The 2019 results are calculated on a pro forma basis, which adjusts certain cash flow line items as if our Reorganization Transactions (as described in our final prospectus filed with the SEC on June 17, 2020) and our initial public offering had taken place on January 1, 2019. The most significant difference between the pro forma and reported figures is the non-controlling interest attributable to legacy investors that resulted from the Reorganization Transactions.

Royalty Pharma GAAP to non-GAAP reconciliations

$ in millions	FY 2024	FY 2023	FY 2022	FY 2021	FY 2020	FY 2019 (PF)[1]
Net cash provided by operating activities (GAAP)	**2,769**	**2,988**	**2,144**	**2,018**	**2,035**	**1,673**
Adjustments:						
Proceeds from available for sales debt securities	20	1	542	63	3	150
Distributions from equity method investees	24	44	-	1	15	-
Interest paid/(received), net	113	98	145	143	131	250
Derivative collateral posted/(received), net	-	-	-	-	(45)	-
Development-stage funding payments – ongoing	2	2	2	7	20	83
Development-stage funding payments – upfront and milestones	-	50	175	193	6	-
Distributions to legacy non-controlling interests – Portfolio Receipts	(362)	(377)	(442)	(480)	(544)	(525)
Adjusted EBITDA (non-GAAP)	**2,565**	**2,806**	**2,566**	**1,944**	**1,621**	**1,631**
Interest (paid)/received, net	(113)	(98)	(145)	(143)	(131)	(250)
Portfolio Cash Flow (non-GAAP)	**2,452**	**2,708**	**2,421**	**1,801**	**1,490**	**1,381**

Amounts may not add due to rounding.

1. The 2019 results are calculated on a pro forma basis, which adjusts certain cash flow line items as if our Reorganization Transactions (as described in our final prospectus filed with the SEC on June 17, 2020) and our initial public offering had taken place on January 1, 2019. The most significant difference between the pro forma and reported figures is the non-controlling interest attributable to legacy investors that resulted from the Reorganization Transactions.

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 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 milestones and other contractual receipts 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 August 8, 2024. See the Company's Annual Report on Form 10-K filed with SEC on February 15, 2024 for additional discussion on defined term.

(4) Portfolio Cash Flow is defined under the revolving credit agreement as Adjusted EBITDA minus interest paid or received, net. See GAAP to Non-GAAP reconciliation in the Company's Current Report on Form 8-K dated August 8, 2024. See the Company's Annual Report on Form 10-K filed with SEC on February 15, 2024 for additional discussion on defined term.

(5) Capital Deployment represents the total outflows that will drive future Portfolio Receipts and reflects cash paid at the acquisition date and any subsequent associated contractual payments reflected in the period in which cash was paid. Capital Deployment is calculated as the summation of the following line items from our GAAP consolidated statements of cash flows: *Investments in equity method investees, Purchases of available for sale debt securities, Acquisitions of financial royalty assets, Acquisitions of other financial assets, Milestone payments, Development-stage funding payments - ongoing, Development-stage funding payments - upfront and milestone* less *Contributions from legacy non-controlling interests - R&D*.

Long-term Outlook footnote

(1) 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.