



Acquisition of Multi-Indication Orphan Disease Therapeutic Program

January 6th, 2021



Safe Harbor

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Agenda

- Base business update
- Transaction details
- Business rationale
- Financial impact
- Asset overview
- Endocrine/metabolic orphan disease opportunities
- Lead indication: Prader-Willi syndrome (PWS)
- Summation

Base business update

- **TYMLOS® growth**
 - Q4, 2020 projected quarterly net revenue is highest to date: \$59+ million
 - 2020 full year net revenue projection: \$207+ million
 - Added ~1,500 net new patients in December: ~20% increase from the previous four-month trailing average
- **Three Phase 3 pivotal studies on track for pivotal readouts in Q4, 2021**
 - ATOM: abaloparatide-SC for male osteoporosis
 - wearABLE: abaloparatide-TD
 - EMERALD: elacestrant (partnered with Menarini Group)
- **Business development**
 - Ex-U.S. abaloparatide global footprint expansion
 - Paladin Labs Inc. commercial agreement in Canada for abaloparatide-SC and TD
 - Teijin Pharma Limited in Japan; continued progress
 - Ongoing discussions with partners in other geographies
 - Agreement reached with Massachusetts General Hospital for SIK inhibitors
 - Completed transactions with Menarini Group for elacestrant
 - Completed transaction with Ellipses Pharma for RAD140

Transactional details

- Acquired global development and commercialization rights to Benuvia Therapeutics' synthetic cannabidiol ("CBD") oral solution, RAD011, on December 30, 2020
- RAD011: pivotal-trial ready product with Orphan and Fast Track designations granted
- Benuvia Therapeutics: formed to acquire CBD assets out of Insys Therapeutics, Inc.'s bankruptcy
- Deal terms:
 - Upfront consideration: \$12.5 million
 - Development milestones:
 - For the first indication (expected to be Prader-Willi syndrome): up to \$15 million
 - For the next three indications (at Radius's discretion): up to \$45 million
 - Sales-based milestones
 - Royalties: tiered, high single digit effective rate

Business rationale

- **Addition of pivotal-ready, orphan disease asset initially targeted for patients with PWS**
 - Pipeline within a program: multiple endocrine/metabolic orphan indications possible beyond PWS
- **Increases ‘optionality’ to unlock value through late-stage pipeline readouts**
 - Four pivotal-trial readouts expected over 24 months (Q4, 2021 to Q4, 2023)
- **Reduced concentration risk: move from one core Radius asset to two**
 - Abaloparatide and RAD011, in addition to elacestrant (partnered with Menarini Group)
- **Transaction and clinical trial costs absorbed without any equity dilution**
 - 2021 objective retained: generate cash for the first time since company created

Projected financial impact

- Calculations based off 2021 TYMLOS[®] SC U.S. net revenue midpoint of \$250 million

Non-GAAP by Segment <i>\$ millions</i>	Actual FY19	Forecast FY20	2021 Forecast						FY21
			SC US	TD US	Intl.	Elace	RAD011	Corp.	
Product Revenue	173	207+	250	-	-	-	-	-	250
Milestones/Royalties, net	-	27	-	-	10	-	-	-	10
Total Revenue	\$173	\$234	\$250	-	\$10	-	-	-	\$260
Gross Profit	\$158	\$218	\$230	-	\$9	-	-	-	\$239
R&D ^(1,2)	(108)	(148)	(47)	(59)	-	-	(7)	-	(113)
SG&A ⁽³⁾	(138)	(125)	(84)	-	-	-	-	(32)	(116)
Operating Expenses	(\$246)	(\$273)	(\$131)	(\$59)	-	-	(\$7)	(\$32)	(\$229)
Adjusted EBITDA	(\$87)	(\$55)	\$99	(\$59)	\$9	-	(\$7)	(\$32)	\$10

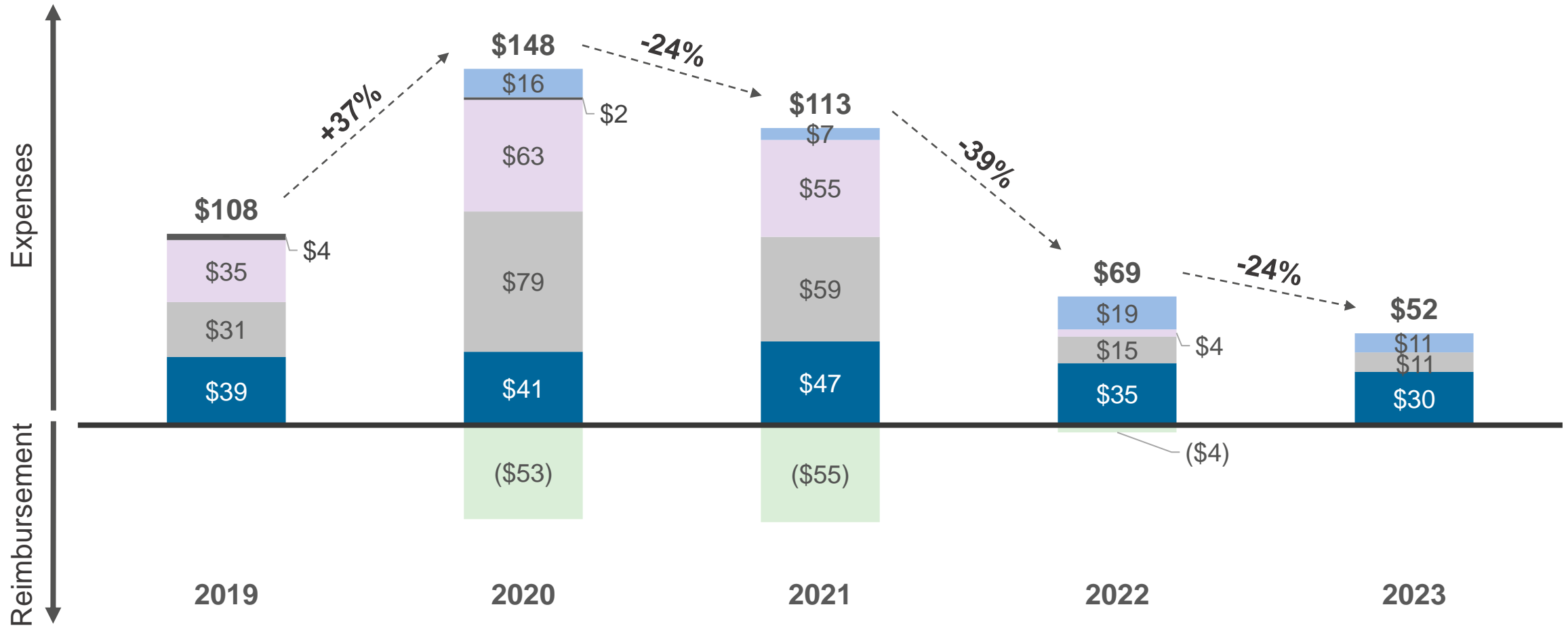
(1) R&D includes a one-time charge of up to \$16.0 million in the fourth quarter of 2020 for the acquisition of RAD011

(2) R&D is net of Menarini Group reimbursement for elacestrant program in 2020 and 2021

(3) Excludes stock-based compensation

Current R&D progression through 2023

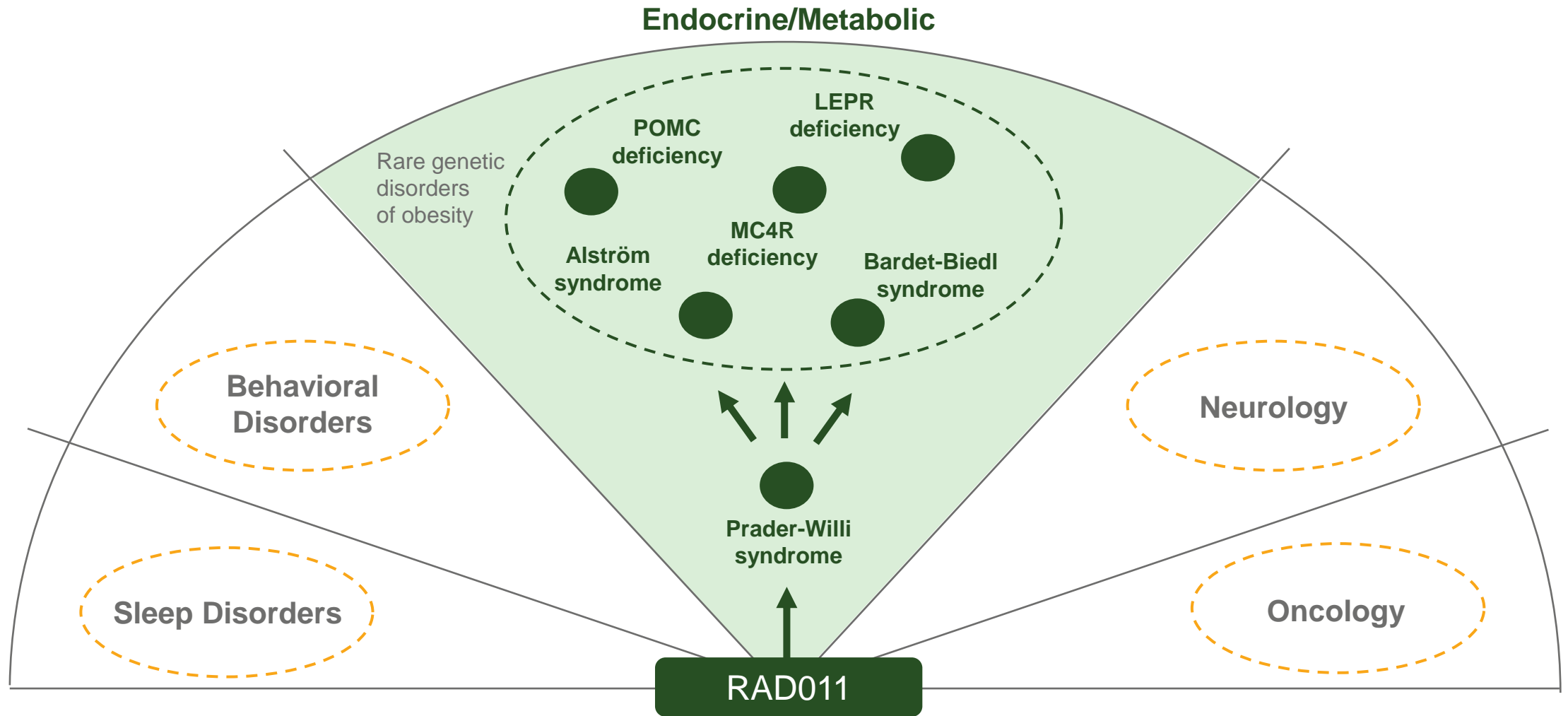
■ TYMLOS SC
 ■ Abalo TD
 ■ Elacestrant
 ■ Elacestrant Reimbursement
 ■ RAD140
 ■ RAD011



Asset overview: RAD011

- **Synthetic cannabidiol compound which is chemically identical to botanical cannabidiol**
 - Assessed in over 150 patients across multiple indications – favorable safety and tolerability
 - Seven years of orphan drug exclusivity and fast track status
 - Novel formulation patents until 2035 and, if granted, methods of manufacturing patents until 2040
- **Advantages of synthetic formulation & manufacturing:**
 - No alcohol in formulation
 - Process with typical yields of >99% in assay purity and excludes THC, cannabinal and dronabinol
 - Utilizes standardized regulatory and quality control requirements
 - Scalable to support market needs with supply chain consistency
- **Benuvia Manufacturing to be primary supplier**
 - cGMP, FDA and DEA inspected and certified operational manufacturing plant
 - Currently manufacturing FDA-approved cannabinoid drug, SYNDROS®

PWS: lead program enables pursuit of adjacent indications with common pathology



Endpoint intersection: hyperphagia, weight control, anxiety, daytime sleepiness

Lead Indication: Prader-Willi syndrome (PWS)

Overview

Debilitating neurobehavioral/ metabolic disorder

Cause: genetic defect on chromosome number 15

Incidence: ~1/15,000 in US = ~ 20,000 patients

No FDA-approved therapies to treat hyperphagia

Symptoms & Manifestations

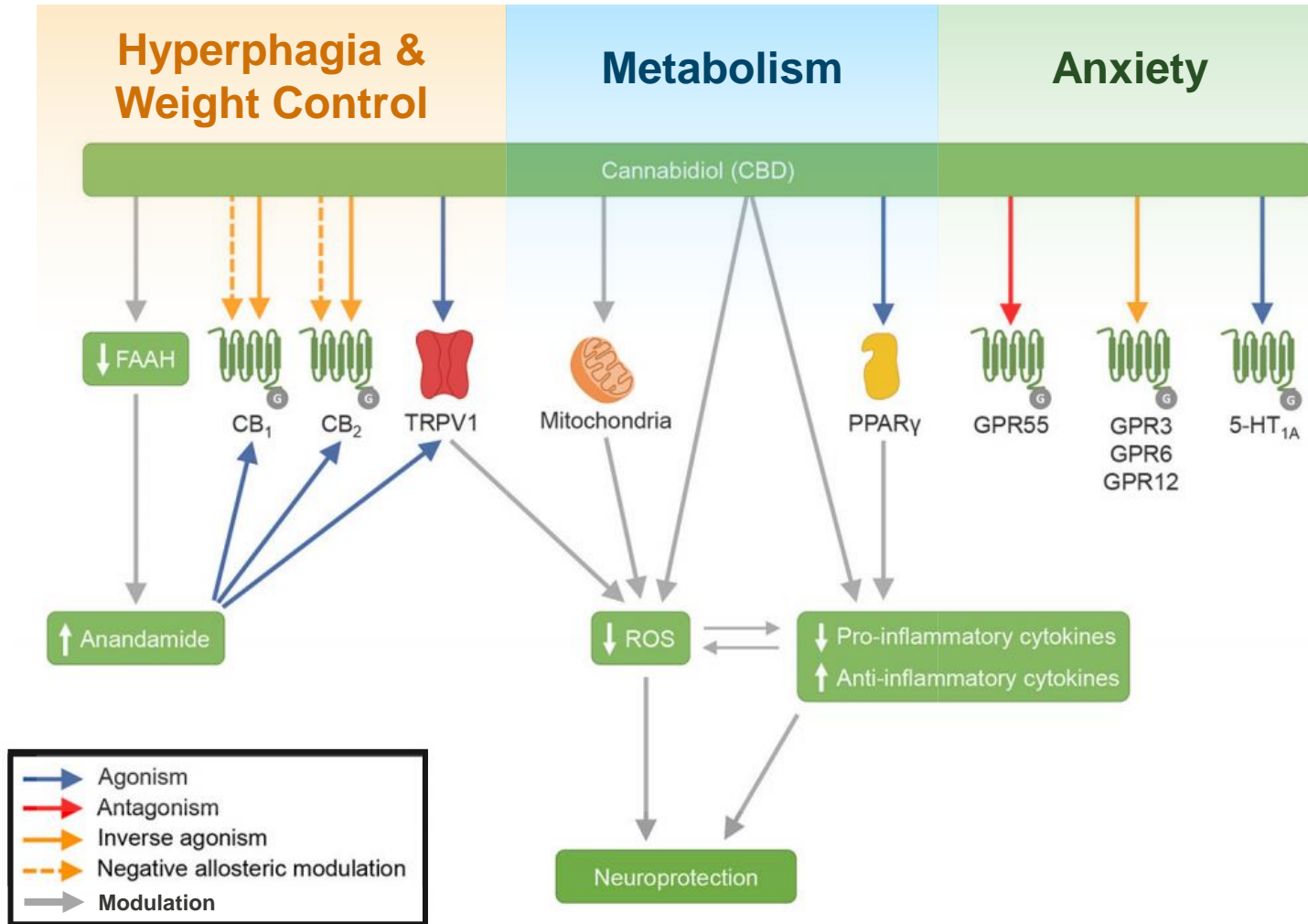
- Hyperphagia: relentless, insatiable, pathological drive to eat
- Behavioral: anxiety, habitual skin picking, oppositional defiance and cognitive rigidity
- **Hyperphagia and anxiety: key clinical features seeking medical attention by caregivers**

Complications

- Obesity and diabetes, cardiological complications etc. all contribute to morbidity and early mortality
- Significant impact on the quality of life of families

Goal of RAD011: reduce hyperphagia-related behavior and anxiety

Science alignment to PWS: cannabidiol's impact on endocannabinoid system



Multifactorial MOA; supports scientific rationale for treatment of PWS core symptoms:

Hyperphagia & Weight Control

- Inhibition of anandamide reuptake
- Indirect effects on cannabinoid receptors 1 and 2 (CB₁, CB₂)

Metabolism

- Activation of PPAR γ

Anxiety

- Agonism of 5HT_{1A}

Image adapted from Peres et al 2018, Front Pharmacol., 9: 482

Science translation: the potential for cannabidiol as treatment for PWS

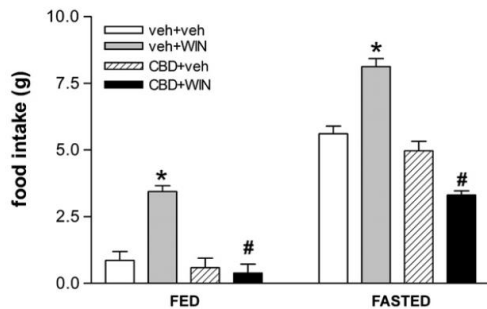
2010's

2018

- Botanical cannabidiol: approved by FDA for rare epilepsy in 2018 – a common adverse event in these controlled trials was decreased appetite¹
- Cannabidiol mechanism in treating core symptoms associated with PWS studied extensively in the literature:

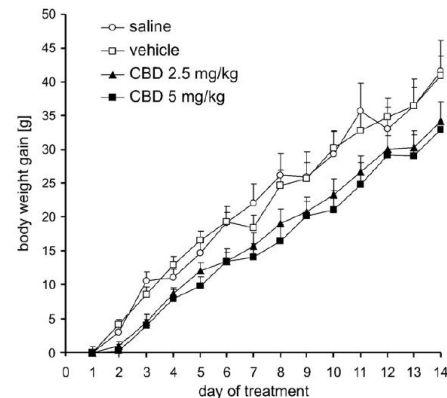
- Initiation of Phase 2 study with cannabidiol (RAD011) in subjects with PWS

Hyperphagia



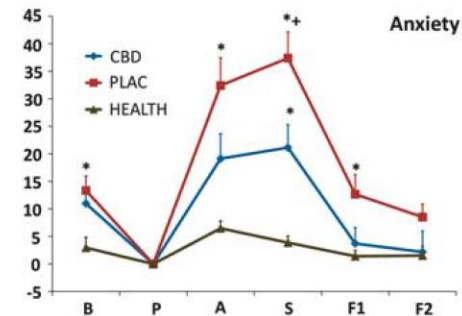
Cannabidiol inhibits hyperphagia induced by CB₁ agonist or serotonin receptor (5HT_{1A}) agonist²

Weight Control



Cannabidiol inhibits body weight gain via CB₂ receptors³

Anxiety



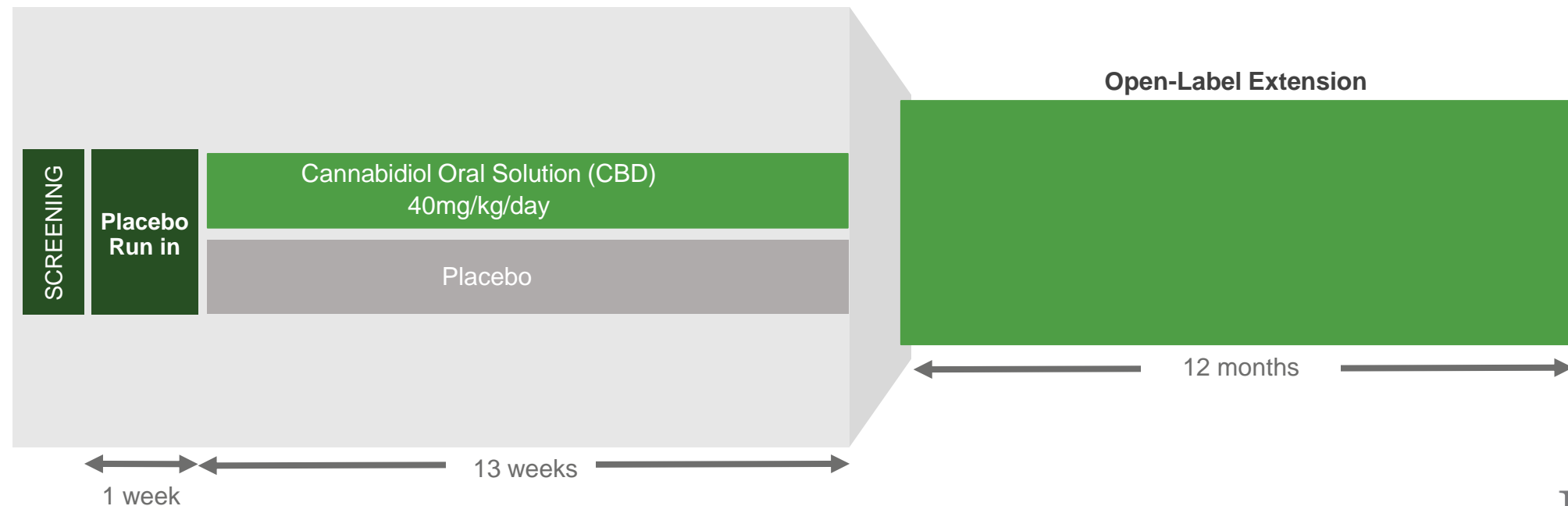
Patients with social anxiety disorder (SAD), treatment with cannabidiol results: lower anxiety compared to placebo⁴

1. [Epidiolex FDA Prescribing Information](#). 2. Scopinho et al 2011, Pharmacol Biochem Behav. 3. Ignatowska-Jankowska et al 2011, Neurosci Lett. 4. Bergamaschi et al 2011, Neuropsychopharmacology.

Benuvia: Phase 2 data generated from prematurely terminated trial

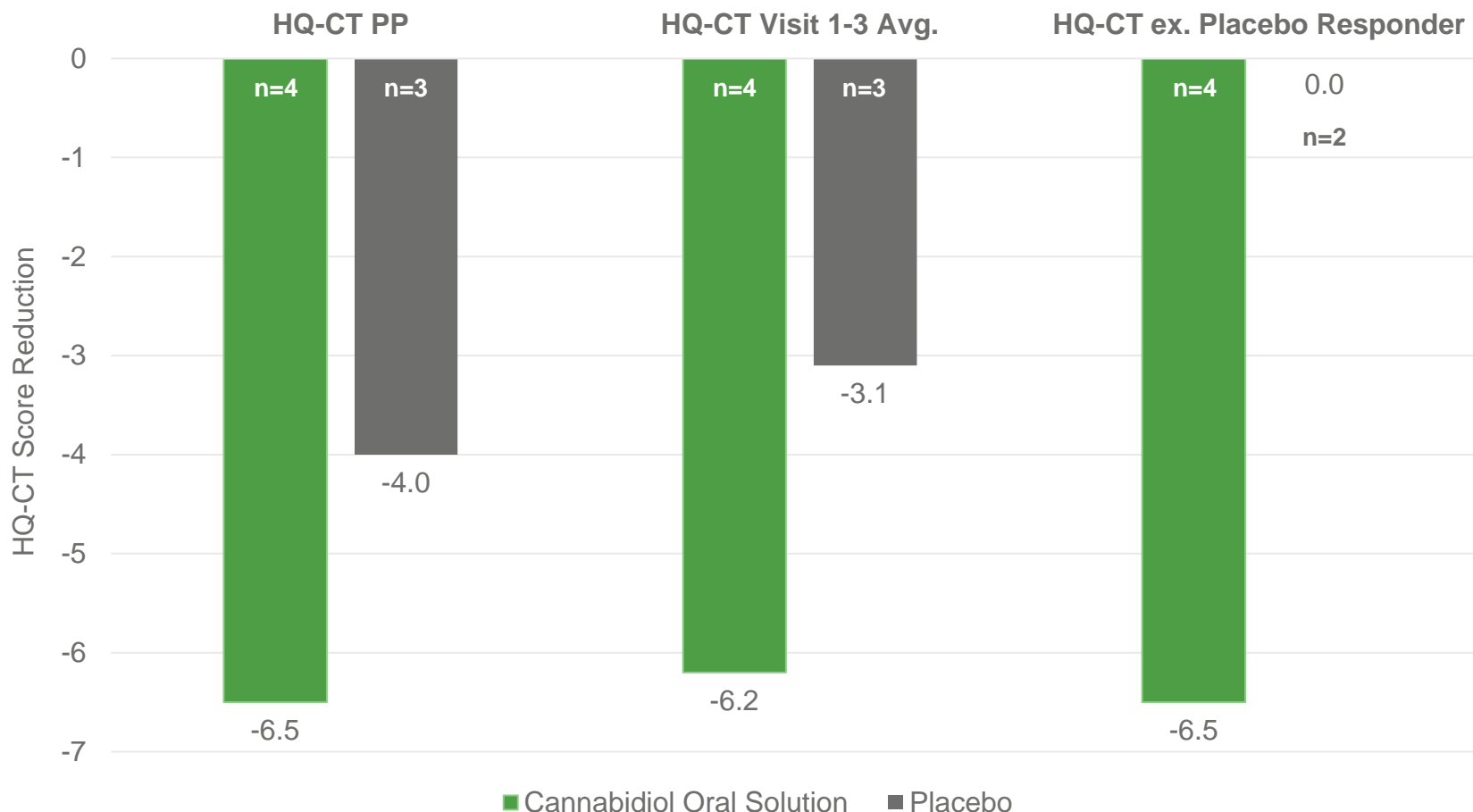
Study Design:

- Randomized, double blind, placebo-controlled, study to assess the efficacy, safety, and tolerability of cannabidiol oral solution for the treatment of patients with Prader-Willi syndrome
- One week placebo run in with a 13-week treatment phase and 12-month open label extension across 12 U.S. sites
- Intended to enroll 66 patients (7 enrolled due to prematurely terminated study) aged 8 to 17 years with genetically confirmed Prader-Willi syndrome that are hyperphagic
- Endpoints: HQ-CT¹, CGI-I² and body weight. Study powered sufficiently to serve as registration study if completed



1. HQ-CT: Hyperphagia Questionnaire for Clinical Trials. 2. CGI-I: Clinical Global Impressions-Improvement scale

Phase 2 clinical data: evidence of hyperphagia reduction



Commentary

- Despite abbreviated Phase 2 study, data are directionally supportive of reducing hyperphagia
- ~6.5-point reduction in the HQ-CT scale was noted across the cannabidiol treatment group, who were treated for a mean duration of 9-weeks
- Zafgen’s beloranib Phase 3 study set benchmark for clinically meaningful results in HQ-CT (~7-point reduction)
- Data supported by a positive trend in reducing weight

* **Per Protocol (PP):** Visit 3 (Baseline) compared to end of study

* **Visit 1-3 Averaged:** average of scores during screening through end of placebo run-in

* **Excluding Placebo Responder:** excludes patients with >6 pt reduction in run-in (one placebo patient had an 8 pt reduction in run in and further 12 pt reduction during treatment)

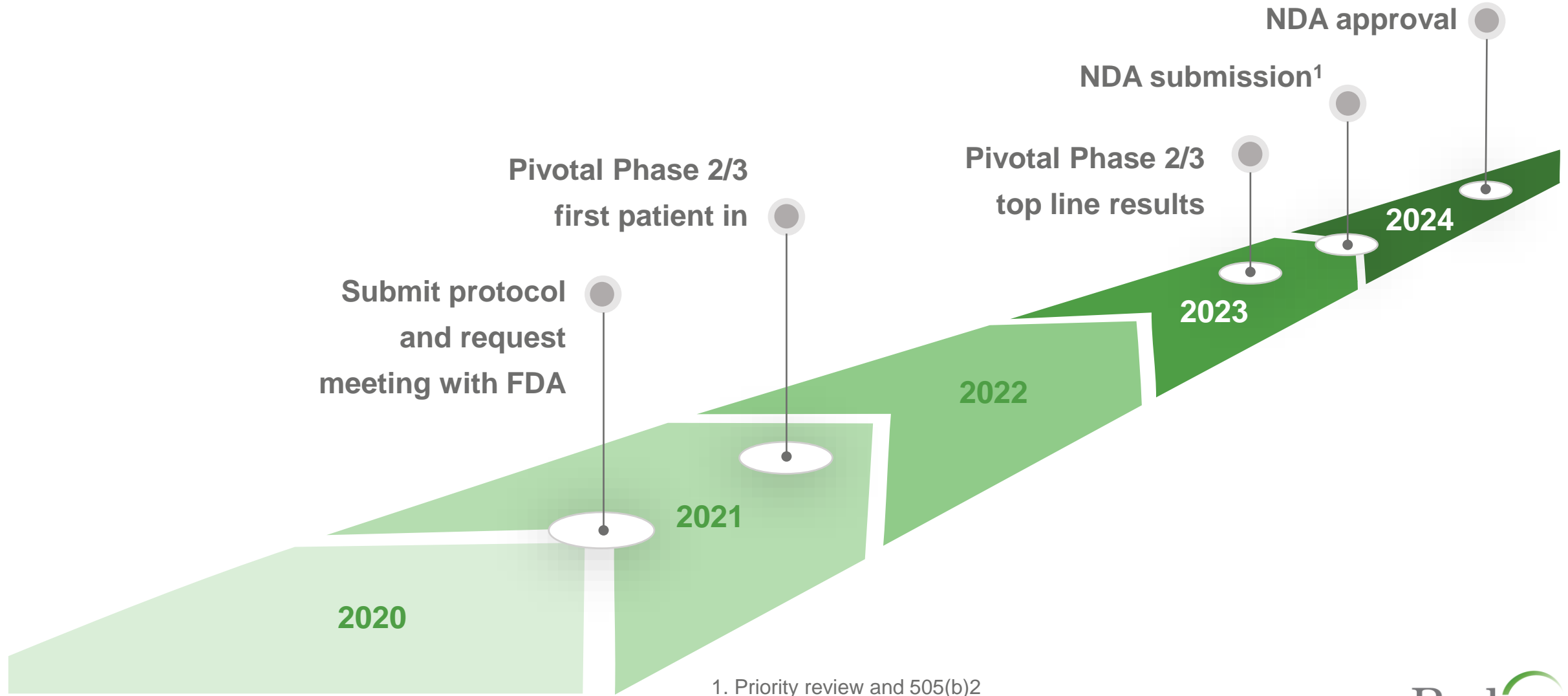
HQ-CT: Hyperphagia Questionnaire for Clinical Trials

Lessons learned from historical PWS studies* to optimize pivotal-trial design

Key Learnings	Previous Studies	Optimized Study	Rationale
Longer Placebo Run-In	0-1-2 weeks	2+ weeks	<ul style="list-style-type: none"> Identify and exclude high placebo responders from primary analysis
Longer Treatment Duration	8-13 weeks	26 weeks	<ul style="list-style-type: none"> Allow for placebo-effect to wane and demonstrate greater separation between treatments
Increased Severity of Hyperphagia	HQ-CT \geq 10	HQ-CT \geq 13	<ul style="list-style-type: none"> Target more severe patients for greater treatment effect
Older and Broader Age Range	4+ y.o.	12-65 y.o.	<ul style="list-style-type: none"> Severe/significant hyperphagia doesn't typically develop until early adolescence

*Studies used in analysis: Zafgen (beloranib) Phase 3, Soleno Therapeutics (DCCR) Phase 3, Levo Therapeutics (carbetocin) Phase 3, Millendo Therapeutics (livoletide) Phase 2/3, Saniona (Tesomet) Phase 2

Prader-Willi syndrome: projected timelines



1. Priority review and 505(b)2

Summation

- Fundamentals of RAD011 acquisition:
 - Opportunistic with regard to circumstances surrounding the asset's availability
 - Aligned to an area of focus: endocrinology
 - Attractive timelines: pivotal-trial readout expected in ~2.5 years in an orphan disease with high unmet need
 - Extendable, with additional clinical work, into other highly attractive metabolic/endocrine orphan diseases
 - Acquisition funded by current internal cash flow and \$15.0 million from an existing debt facility
 - Pivotal-trial costs absorbed by projected operating cash flow
- Adds additional dynamics to the investment calculus of Radius
 - Four pivotal trial readouts expected over 24 months (Q4, 2021 to Q4, 2023)
 - Pivotal trial readout risk distributed across three assets: abaloparatide, elacestrant and RAD011
 - Favorable environment for TYMLOS® in the U.S.: AACE guidelines, payer alignment, high-risk patient need
 - Operating leverage: opportunity to demonstrate continued progress across multiple fronts

Appendix

GAAP Income Statement 2019 - 2021

<i>\$ millions</i>	Actual FY19	Forecast ⁽¹⁾ FY20	Forecast FY21
Product Revenue	173	207	250
Milestones/Royalties, net	-	27	10
Total Revenue	\$173	\$234	\$260
COGS	(16)	(16)	(21)
Gross Profit	\$157	\$218	\$239
<i>Gross Margin %</i>	91%	92%	92%
R&D	(117)	(155)	(119)
SG&A	(153)	(148)	(128)
Operating Expenses	(\$269)	(\$303)	(\$247)
Operating Income (Loss)	(\$112)	(\$85)	(\$8)
Other Income / (Expense)	(21)	(25)	(7)
Net Income (Loss)	(\$133)	(\$110)	(\$16)

(1) Actuals through November 2020 plus forecast for December 2020

GAAP to Non-GAAP Reconciliation

<i>\$ millions</i>	Actual FY19	Forecast ⁽¹⁾ FY20	Forecast FY21
GAAP Net Loss	(\$133)	(\$110)	(\$16)
Stock-based compensation: R&D	9	7	6
Stock-based compensation: SG&A	15	20	12
Intangible asset amortization	1	-	-
Restructuring charges: R&D	(1)	-	-
Restructuring charges: SG&A	0	-	-
Other expense	21	25	7
Depreciation: R&D	1	-	-
Depreciation: SG&A	0	1	1
Operating lease ROU asset impairment	0	2	-
Non-GAAP Adjusted EBITDA	(\$87)	(\$55)	\$10

(1) Actuals through November 2020 plus forecast for December 2020