

Advancing Life-Changing Discoveries in Neuroscience

Q2 2024

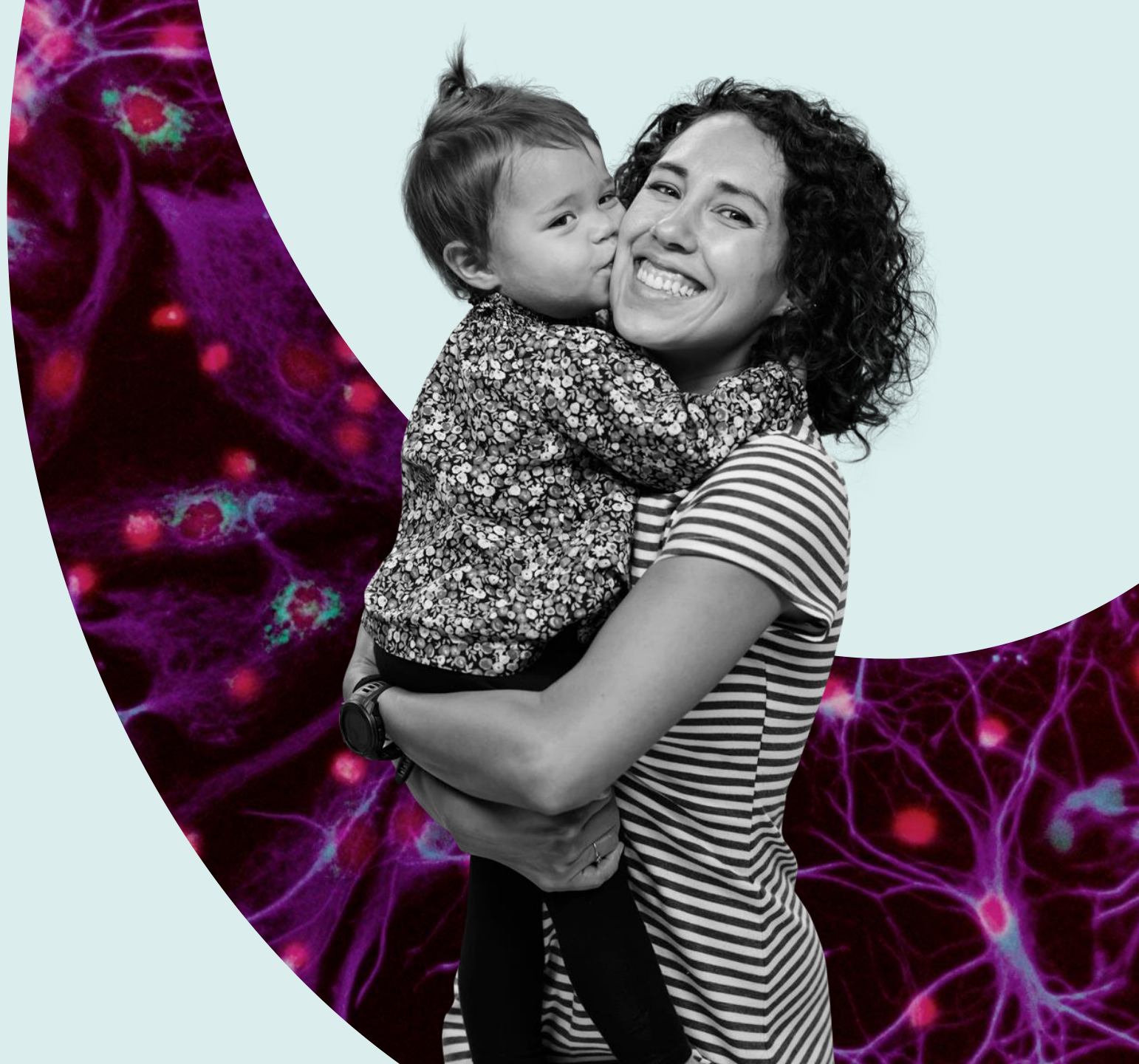
Corporate Presentation

August 1, 2024

Nasdaq: NBIX



You Deserve *Brave* Science™



Safe Harbor Statement and Non-GAAP Financial Measures

In addition to historical facts, this presentation contains forward-looking statements that involve a number of risks and uncertainties. These statements include, but are not limited to, statements related to: the benefits to be derived from our products and product candidates; the value our products and/or our product candidates may bring to patients; the continued success of INGREZZA; our financial and operating performance, including our future revenues, expenses, or profits; our collaborative partnerships; expected future clinical and regulatory milestones; and the timing of the initiation and/or completion of our clinical, regulatory, and other development activities and those of our collaboration partners. Among the factors that could cause actual results to differ materially from those indicated in the forward-looking statements are: our future financial and operating performance; risks and uncertainties associated with the commercialization of INGREZZA; risks that the crinecerfont New Drug Applications (NDAs) may not obtain regulatory approval, such approval may be delayed, or may not receive the benefits associated with priority review; risks related to the development of our product candidates; risks associated with our dependence on third parties for development, manufacturing, and commercialization activities for our products and product candidates, and our ability to manage these third parties; risks that the FDA or other regulatory authorities may make adverse decisions regarding our products or product candidates; risks that clinical development activities may not be initiated or completed on time or at all, or may be delayed for regulatory, manufacturing, or other reasons, may not be successful or replicate previous clinical trial results, may fail to demonstrate that our product candidates are safe and effective, or may not be predictive of real-world results or of results in subsequent clinical trials; risks that the potential benefits of the agreements with our collaboration partners may never be realized; risks that our products, and/or our product candidates may be precluded from commercialization by the proprietary or regulatory rights of third parties, or have unintended side effects, adverse reactions or incidents of misuse; risks associated with government and third-party regulatory and/or policy efforts which may, among other things, impose sales and pharmaceutical pricing controls on our products or limit coverage and/or reimbursement for our products; risks associated with competition from other therapies or products, including potential generic entrants for our products; and other risks described in our periodic reports filed with the SEC, including our Quarterly Report on Form 10-Q for the quarter ended June 30, 2024. Neurocrine Biosciences disclaims any obligation to update the statements contained in this presentation after the date hereof other than as required by law.

In addition to the financial results and financial guidance that are provided in accordance with accounting principles generally accepted in the United States (GAAP), this presentation also contains the following Non-GAAP financial measures: Non-GAAP R&D expense, Non-GAAP SG&A expense, and Non-GAAP net income and net income per share. When preparing the Non-GAAP financial results and guidance, the Company excludes certain GAAP items that management does not consider to be normal, including recurring cash operating expenses that might not meet the definition of unusual or non-recurring items. In particular, these Non-GAAP financial measures exclude: non-cash stock-based compensation expense, charges associated with convertible senior notes, impairment charges associated with leased properties, non-cash amortization expense related to acquired intangible assets, acquisition and integration costs, changes in fair value of equity security investments, changes in foreign currency exchange rates and certain adjustments to income tax expense. These Non-GAAP financial measures are provided as a complement to results provided in accordance with GAAP as management believes these Non-GAAP financial measures help indicate underlying trends in the Company's business, are important in comparing current results with prior period results and provide additional information regarding the Company's financial position. Management also uses these Non-GAAP financial measures to establish budgets and operational goals that are communicated internally and externally and to manage the Company's business and evaluate its performance. The Company provides guidance regarding combined R&D and SG&A expenses on both a GAAP and a Non-GAAP basis. A reconciliation of these GAAP financial results to Non-GAAP financial results is included in the attached financial information.

Well-Positioned for Sustained & Long-term Growth

Commercial



TARDIVE DYSKINESIA AND CHOREA
ASSOCIATED WITH HUNTINGTON'S DISEASE

**\$2.25 - \$2.30
Billion**

2024 Annual
Net Sales Guidance Raised
and Narrowed from
\$2.1 - \$2.2 Billion

~600,000

Affected by Tardive
Dyskinesia in the U.S.;
~65% are undiagnosed

~90%

of the ~40,000 People in
the U.S. Diagnosed with
Huntington's Disease Who
Will Develop Chorea

R&D Focus

Neurology
Neuroendocrinology
Neuropsychiatry

Robust Pipeline

Multiple Compounds in
Mid- to Late-Stage Studies

Rapidly Growing Early-
Stage Portfolio

Strong Financial Position

~\$1.7B

Cash and Investments
as of 6/30/2024

Strong Balance Sheet

Durable Cash Flows

Attractive P&L Profile

Where Are We Today?

- **Discovered and Developed** Three Novel FDA-Approved Programs
- **Deep Expertise** in Neuroscience Drug Development
- **Fully-Integrated Organization** with Both R&D and Commercial Capabilities
- **Growing Blockbuster** Commercial Product in INGREZZA with Strong IP Protection
- **Future Blockbuster Opportunity** with Crinecerfont
- **Largest Portfolio of Muscarinic Compounds** in Clinical Development
- **Strong Financial Profile** That Can Support Significant R&D Investment

Building a Leading Neuroscience-Focused Company



Q2 2024 Highlights and 2024 Key Milestones and Activities

Q2 2024 / Recent Highlights

- **INGREZZA® (valbenazine) Net Product Sales of \$580M**
 - Represents YoY Sales Growth of 32% vs. Q2 2023
 - Growth Driven By Strong Underlying Demand and Improvement in Q2 Gross To Net Dynamics
- **Announced Expansion of INGREZZA Psychiatry and LTC Sales Teams to Help Accelerate Appropriate Diagnosis and Treatment**
- **Launched INGREZZA® SPRINKLE (valbenazine) Oral Granules Formulation for Patients Who Have Difficulty Swallowing**
- **Positive Phase 2 Top-Line Data For NBI-'845 (AMPA Potentiator) in Adults with Major Depressive Disorder (MDD)**
- **Crinercerfont Granted Priority Review for the Treatment of Pediatric and Adult Patients with Classical CAH**
- **Presented Adult and Pediatric Phase 3 CAHtalyst™ Study Results at ENDO With Parallel Publication of Results in the New England Journal of Medicine (NEJM)**
- **Pipeline Progress Includes Several Recently Initiated Studies:**
 - Phase 2 Study of NBI-'770 (Oral NMDA NR2B NAM) for MDD
 - Phase 1 Study of NBI-'567 (M1 Agonist)
 - Phase 1 Study of NBI-'986 (M4 Antagonist)
- **Settled Senior Convertible Notes Due in May in Cash**

2024 Key Milestones and Activities

- **NBI-'845 End of Phase 2 Meeting with FDA in 2H 2024; Engaging with Agency on Registration Path Forward**
- **On Track to Report Phase 2 Top-Line Data for NBI-'568 (M4 Agonist) For the Treatment of Schizophrenia in Q3 2024**
 - Anticipate Disclosing Absolute PANNS Scores, Placebo-Adjusted PANNS Scores, Effect Size, Safety and Tolerability Profile
 - Will Disclose via Press Release and Webcast Conference Call
- **On Track to Report Phase 2 Top-Line Data for Luvadaxistat (DAAO Inhibitor) for CIAS in Q3 2024**
- **Advancing Broadest and Most Diverse Muscarinic Portfolio in Industry with NBI-'568 (M4 Agonist) in Phase 2 and Four Ongoing Phase 1 Studies**
 - NBI-'567 (M1 Agonist)
 - NBI-'569 (M4 Agonist)
 - NBI-'570 (Dual M1 / M4 Agonist)
 - NBI-'986 (M4 Antagonist)
- **On October 11, Kevin Gorman Will Retire as Chief Executive Officer and Kyle Gano, Currently Chief Business Development and Strategy Officer, Will Succeed Him in the CEO Role**
- **Crinercerfont PDUFA Dates Set for December 29, 2024 (Capsule Formulation) and December 30, 2024 (Oral Solution Formulation)**

In Collaboration with Nxera
(Formerly Sosei Heptares)

Building and Maximizing the Pipeline

of Programs by Stage



			Phase 1	Phase 2	Phase 3	NDA	Milestone
Neurology							
valbenazine*	Dyskinetic Cerebral Palsy	VMAT2 Inhibitor	[Timeline: Phase 1 to Phase 3]				Phase 3 Ongoing
NBI-827104 ²	EE-CSWS	Ca _v 3.1, 3.2, 3.3	[Timeline: Phase 1 to Phase 2]				Phase 2 Ongoing
NBI-921352 ³	SCN8A-DEE	Na _v 1.6	[Timeline: Phase 1 to Phase 2]				Phase 2 Ongoing
NBI-1076986	Movement Disorders	M4 Antagonist	[Timeline: Phase 1]				Phase 1 Ongoing
Neuroendocrinology							
crinecerfont ⁴	CAH: Adults	CRF-R1	[Timeline: Phase 1 to Phase 3]				PDUFA Dates on 12/29 and 12/30
crinecerfont ⁴	CAH: Pediatrics	CRF-R1	[Timeline: Phase 1 to Phase 3]				
Efmody	Adrenal Insufficiency	GC Receptor	[Timeline: Phase 1 to Phase 2]			Announced Positive Phase 2 Results ✓	Next Steps: TBD
Efmody	CAH	GC Receptor	[Timeline: Phase 1 to Phase 2]			Announced Positive Phase 2 Results ✓	Next Steps: TBD
Neuropsychiatry							
valbenazine*	ATS	VMAT2 Inhibitor	[Timeline: Phase 1 to Phase 3]				Phase 3 Ongoing
NBI-1065845 ⁵	Inadequate Response-MDD	AMPA Potentiator	[Timeline: Phase 1 to Phase 2]			Announced Positive Phase 2 Results ✓	Engaging with FDA
luvadaxistat ⁵	CIAS	DAAO	[Timeline: Phase 1 to Phase 2]				Phase 2 Data: Q3'24
NBI-1117568 ¹	Schizophrenia	M4 Agonist	[Timeline: Phase 1 to Phase 2]				Phase 2 Data: Q3'24
NBI-1070770 ⁵	MDD	NMDA NR2B NAM	[Timeline: Phase 1 to Phase 2]				Phase 2 Ongoing
NBI-1117570 ¹	CNS Indications	M1/M4-Dual	[Timeline: Phase 1]				Phase 1 Ongoing
NBI-1117569 ¹	CNS Indications	M4-Preferring	[Timeline: Phase 1]				Phase 1 Ongoing
NBI-1117567 ^{1†}	CNS Indications	M1-Preferring	[Timeline: Phase 1]				Phase 1 Ongoing
NBI-1065890	CNS Indications	VMAT2 Inhibitor	[Timeline: Phase 1]				Phase 1 Ongoing

* Mitsubishi Tanabe Pharma Corporation (MTPC) has commercialization rights in Japan and other select Asian markets

† Nxera Pharma UK Limited (formerly Sosei Heptares) has retained rights in Japan; Neurocrine Biosciences may opt-in to a 50:50 cost and revenue share upon certain development events

In-licensed program =

(1) Nxera Pharma (2) Idorsia Ltd (3) Xenon Pharmaceuticals Inc (4) Sanofi (5) Takeda Pharmaceutical Company Ltd
Neurocrine Biosciences has global rights unless otherwise noted.

Q2 2024 Financial Summary

\$ Millions, Except Non-GAAP Earnings Per Share

Item	Q2 2024	Q2 2023	Highlights / Comments
Revenue - Product Sales, Net - Collaboration Revenue	\$590 \$584 \$6	\$453 \$446 \$6	INGREZZA Sales of \$580M Represents YoY Growth of 32% Driven by Strong Underlying Patient Demand and Improvement in Gross-to-Net Dynamics
Non-GAAP R&D Expense	\$175	\$122	Increase Driven by Expanded / Advancing Portfolio and Includes \$27M for Development Milestones Achieved Under Our Collaborations
Non-GAAP Acquired IPR&D Expense	\$3	\$0	
Non-GAAP SG&A Expense	\$201	\$177	Increase Driven by Incremental Investment in Crinecerfont-Related Headcount and Pre-Launch Activities, and Continued Investment in INGREZZA
Non-GAAP Net Income	\$169	\$126	Increase Driven by Higher INGREZZA Sales Partially Offset by Incremental Operating Expenses
Non-GAAP Earnings per Share, Diluted	\$1.63	\$1.25	Represents YoY Growth of 30%
Cash and Investments (Period End)	\$1,677	\$1,319	Settled Outstanding 2024 Notes Upon Maturity in May 2024 for \$309M in Cash

YTD 2024 Financial Summary

\$ Millions, Except Non-GAAP Earnings Per Share

Item	1H 2024	1H 2023	Highlights / Comments
Revenue	\$1,106	\$873	INGREZZA Sales of ~\$1.1B Represents YoY Growth of 28% vs. 1H 2023
- Product Sales, Net	\$1,093	\$862	
- Collaboration Revenue	\$13	\$12	
Non-GAAP R&D Expense	\$318	\$248	Increase Driven by Expanded / Advancing Portfolio and Includes \$33M for Development Milestones Achieved Under Our Collaborations
Non-GAAP Acquired IPR&D Expense	\$9	\$144	2023 Expense Associated with Voyager Collaboration
Non-GAAP SG&A Expense	\$416	\$394	Increase Driven by Incremental Investment in Crinecerfont-Related Headcount and Pre-Launch Activities, And Continued Investment in INGREZZA
Non-GAAP Net Income	\$294	\$76	Increase Driven by Higher INGREZZA Sales Partially Offset by Incremental Operating Expenses and Lower Total Payments for Upfront Fees / Development Milestones Associated in Connection With Our Collaborations
Non-GAAP Earnings per Share, Diluted	\$2.83	\$0.76	Represents YoY Growth of 272% vs. 1H 2023
Cash and Investments (Period End)	\$1,677	\$1,319	Settled Outstanding 2024 Notes Upon Maturity in May 2024 for \$309M in Cash

Raised 2024 INGREZZA Net Sales Guidance and Updated Expense Guidance

Item (\$ Millions)	2023 Actuals	2024 Previous Guidance Range	2024 Current Guidance Range	Comments
INGREZZA Net Product Sales ¹	\$1,836	\$2,100 - \$2,200	\$2,250 - \$2,300	Raised Sales Guidance Raised
GAAP R&D Expense ²	\$565	\$665 - \$695	\$665 - \$695	Updated GAAP and Non-GAAP Guidance Ranges
Non-GAAP R&D Expense ³	\$497	\$600 - \$630	\$600 - \$630	
GAAP and Non-GAAP IPR&D ⁴	\$144	\$6	\$9	
GAAP SG&A Expense ⁵	\$888	\$920 - \$940	\$955 - \$975	
Non-GAAP SG&A Expense ^{3, 5}	\$757	\$810 - \$830	\$830 - \$850	

1. INGREZZA sales guidance reflects expected net product sales of INGREZZA in tardive dyskinesia and chorea associated with Huntington's disease.
2. GAAP R&D guidance includes \$33 million of expense for development milestones in connection with our collaborations (Nxera, Voyager and Takeda) achieved or deemed probable to achieve. These milestone expenses are associated with our advancing pre-clinical and clinical pipeline.
3. Non-GAAP guidance adjusted to exclude estimated non-cash stock-based compensation expense of approximately \$65 million in R&D and \$110 million in SG&A and \$14 million leased office space impairment charge in SG&A.
4. Acquired in-process R&D (IPR&D) is included in guidance once significant collaboration and licensing arrangements have been completed.
5. SG&A guidance range reflects expense for ongoing commercial initiatives supporting INGREZZA growth including the announced planned expansion of the psychiatry and long-term care sales teams and pre-launch commercial activities for crinecerfont.



Corporate Sustainability: “A” Rated at MSCI and Rank in 11th Percentile for Biotech at Sustainalytics

Our Purpose: Relieve Suffering for People with Great Needs, but Few Options



Adhere to the highest product quality and safety standards

Comprehensive Quality System that aligns with:

- Good Manufacturing Practices (GMP)
- Good Laboratory Practices (GLP)
- Good Clinical Practices (GCP)



Invest in our people and communities

Industry-leading employee engagement and diversity

- Top decile employee engagement among biopharmaceutical peers
- Gender and racial/ethnic diversity above biotech industry benchmark*



Minimize our impact on the environment

Improving profitability and yields through green chemistry

- ~30% improvement in yields
- ~65% reduction in waste
- ~65% reduction in water use

*According to a [study](#) by the Biotechnology Innovation Organization

Click [here](#) to see Neurocrine’s 2024 ESG Report



Our Medicines, Our Patients

Multiple Commercial Products

In the U.S.

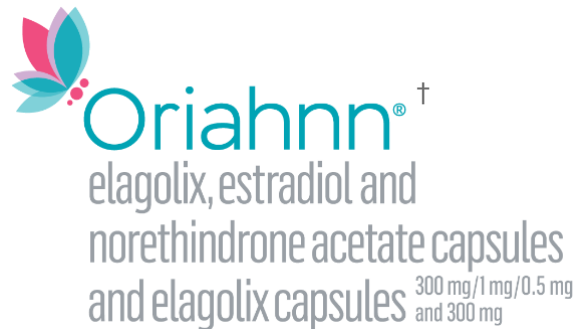


TARDIVE DYSKINESIA

CHOREA ASSOCIATED WITH HD



ENDOMETRIOSIS



UTERINE FIBROIDS

In the U.S. and Europe



hydrocortisone granules
in capsules for opening

ADRENAL INSUFFICIENCY

In Europe



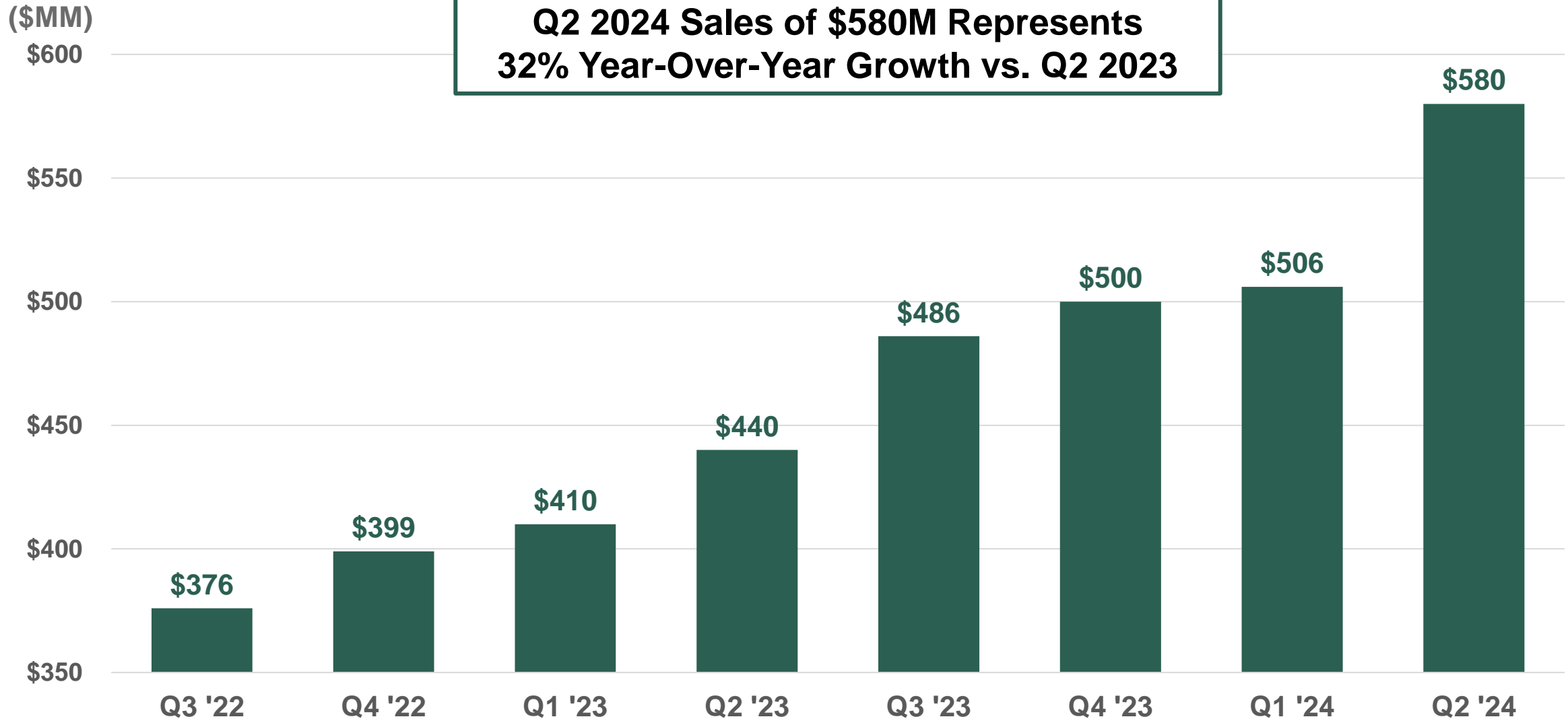
Hydrocortisone modified-
release hard capsules

CONGENITAL ADRENAL
HYPERPLASIA



INGREZZA[®]
(valbenazine) capsules

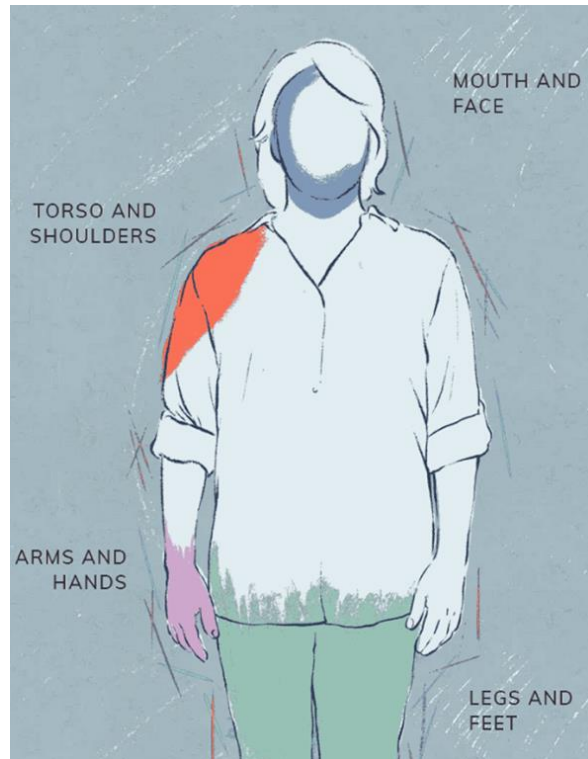
INGREZZA Quarterly Net Sales Performance



Substantial Impact on TD Patients and Care Partners

Movement disorder caused by prolonged use of antipsychotics and anti-nausea medications

Uncontrollable, abnormal and repetitive movements



>50%

of patients experience meaningful emotional, social and psychological impact*

Job Performance

Patients believe TD affects their ability to perform their job

Low Self-Worth

Psychiatric patients may already have difficulty gaining stability and social acceptance

Isolation

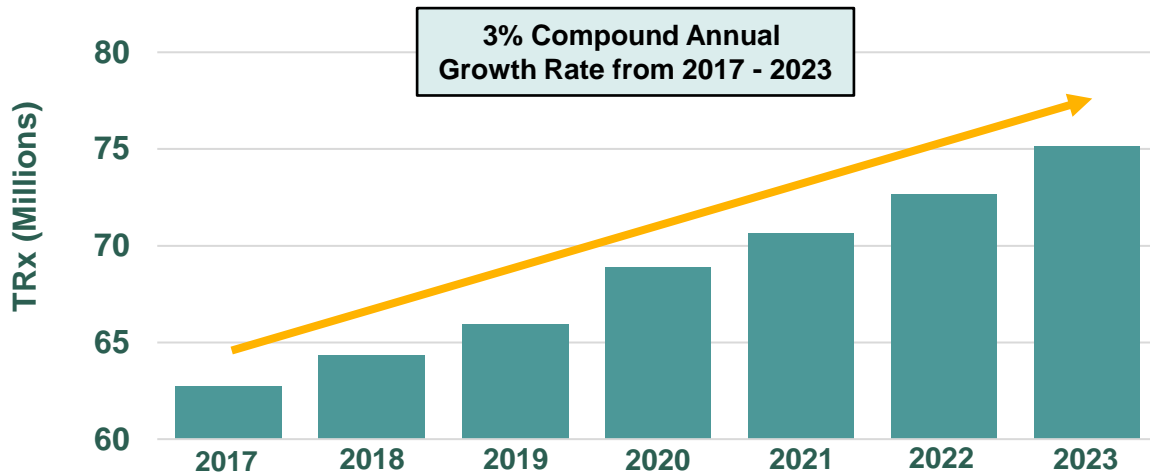
Loss of physical control may make patients more likely to withdraw from social situations

* <https://www.takeontd.com/> Source: IQVIA's SMART Audit, Quarterly Data for Antipsychotic Class

Nascent Tardive Dyskinesia Market Presents Significant Opportunity

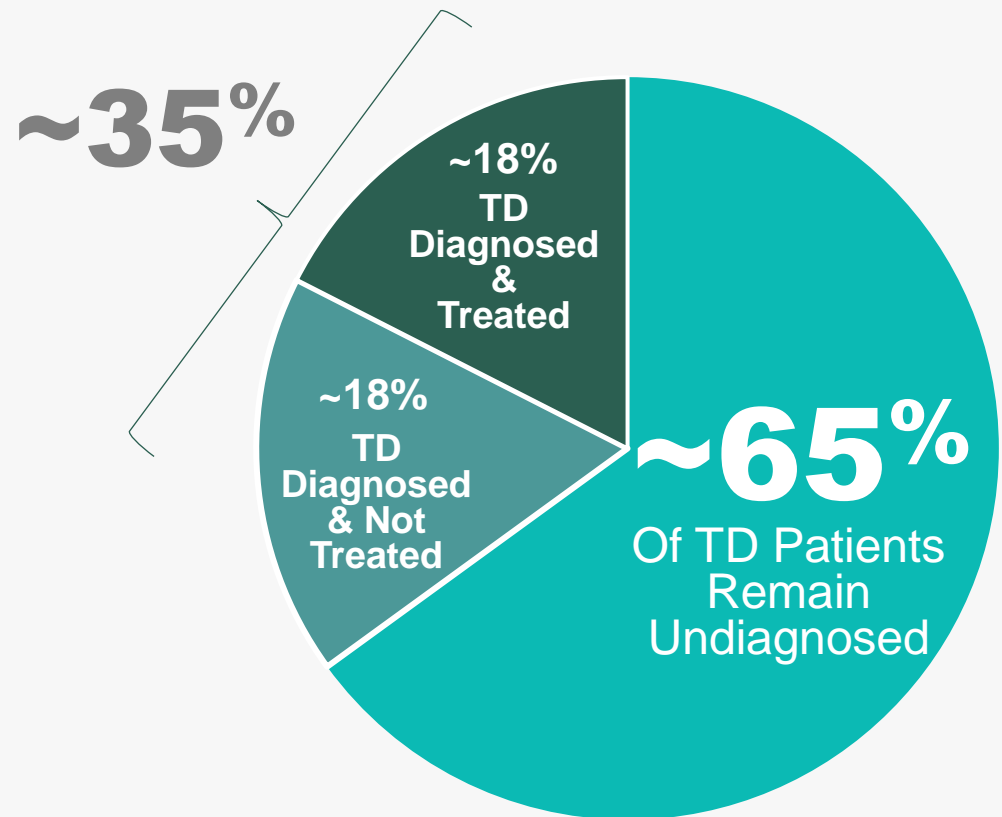


Increasing Antipsychotic Prescriptions (U.S.)



Approximately 65% of TD Patients Remain Undiagnosed

- ✓ Only half of diagnosed patients receive treatment with a VMAT2 inhibitor like INGREZZA



INGREZZA® Approved by the FDA for the Treatment of Chorea Associated with Huntington's Disease

INGREZZA

Simple once-a-day treatment targeted for symptom control of chorea movements

Safety profile consistent with and supported by **extensive safety** data in tardive dyskinesia

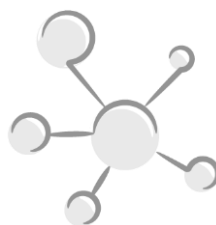
In randomized, double-blind, placebo-controlled KINECT-HD study, **treatment with valbenazine resulted in a placebo-adjusted mean reduction in the TMC* score of 3.2 units ($p < 0.0001$)**

Chorea affects

~90% of the 40,000

patients with HD in the U.S.

Rare neurodegenerative disorder in which neurons within the brain break down



Patients develop involuntary abnormal, abrupt or irregular movements

INGREZZA MAKES DOSING SIMPLE FROM THE START:



No complex dose adjustments



Always one capsule, once daily



Taken any time

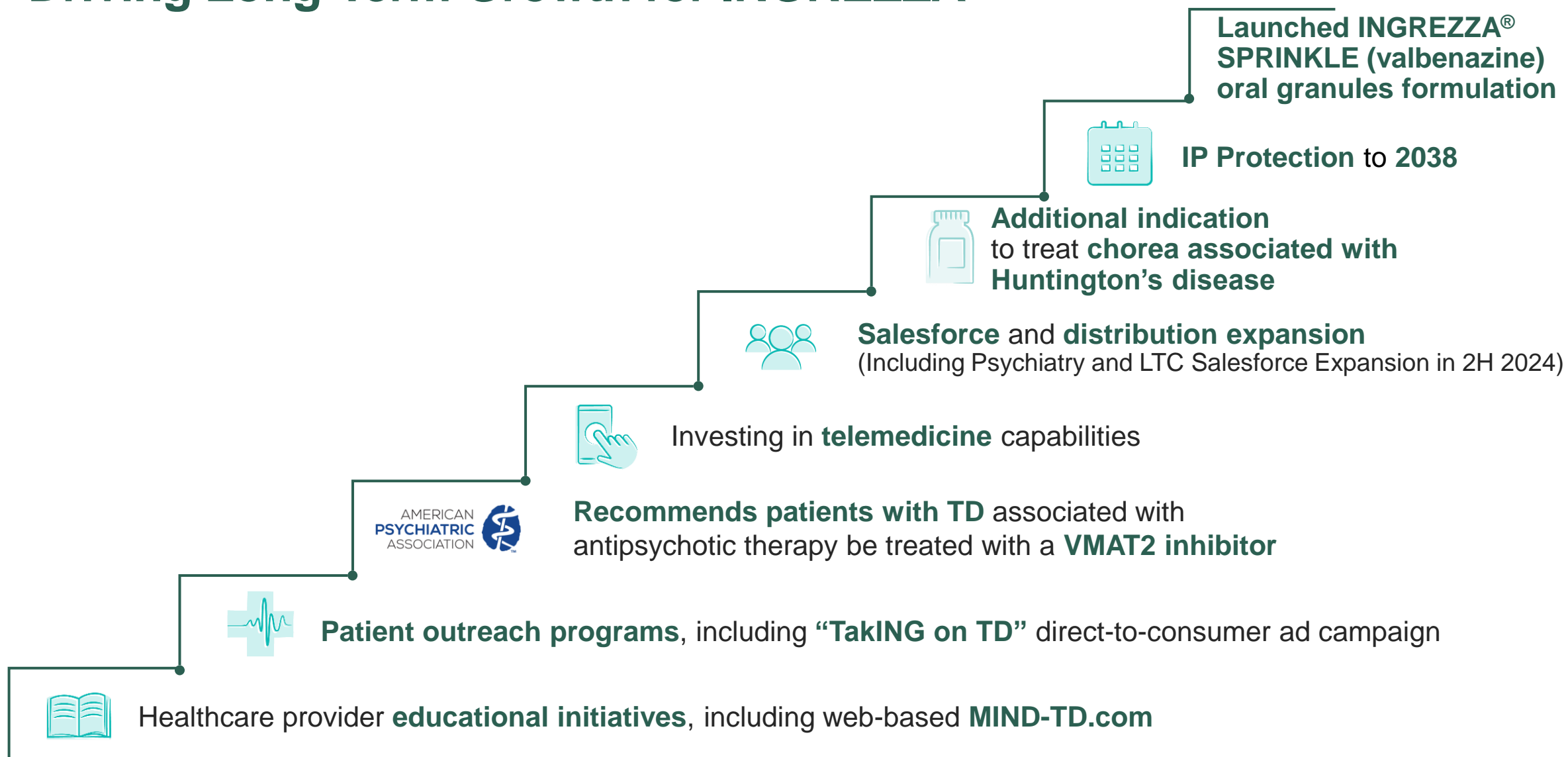


With or without food



Can be added to most stable mental health regimens

Driving Long-Term Growth for INGREZZA





**Neuropsychiatry
Pipeline**

NBI-1065845* (AMPA Potentiator): Reported Positive Phase 2 Top-Line Study Results in Adults with Major Depressive Disorder

Inadequate Response to Treatment in Major Depressive Disorder (MDD)



~1/3 of the 16 million+ people in the U.S. who live with MDD do not respond to available antidepressants.



MDD symptoms are characterized by a persistently depressed mood or loss of interest in daily activities that can impact normal daily functioning, relationships, and overall quality of life.



Current treatments range from selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs), and antidepressants along with behavioral therapy.

NBI-1065845 (or NBI-'845)

Potent first-in-class AMPA potentiator

- Oral
- Once daily

Antidepressant effects may be mediated by activation of AMPA and resultant downstream pathways

Phase 2 SAVITRI Study:

- Met primary endpoint with statistically significant reduction in MADRS total score at day 28
- Met key secondary endpoints, including statistically significant reduction in MADRS total score at day 56
- NBI-'845 was generally well-tolerated

Next Steps:

- Conducting end of Phase 2 meeting with FDA; Initiating Phase 3 studies in 2025

NBI-1065845* (AMPA Potentiator): SAVITRI™ Phase 2 Study Summary Results

EFFICACY

- The study met its primary and key secondary endpoints
- Once-daily, oral administration of NBI-'845 produced a statistically significant change from baseline in Montgomery Åsberg Depression Rating Scale (MADRS) total score at both Day 28 (primary) and Day 56 (secondary).
- In the full analysis data set, the least squares (LS) mean differences from baseline in MADRS total score were:

Statistically Significant Dose	Day 28	Day 56
Improvement over Placebo	-4.3	-7.5
p-value	0.0159	0.0016
Effect size	0.53	0.73
Other Dose	Day 28	Day 56
Improvement over Placebo	-3.0	-3.6
p-value	0.0873	0.1082
Effect size	0.39	0.33

SAFETY AND TOLERABILITY

- NBI-1065845 was generally well-tolerated
- Most common adverse event was headache, of which, a majority were transient and mild in severity
- Adverse event profile for both doses of NBI-1065845 were comparable to placebo
- No seizures, deaths, or serious adverse events
- No psychotomimetic or dissociative events throughout the study
- Discontinuation rates were low throughout the study

Developing Novel Muscarinic System Portfolio

Neurocrine Biosciences Advancing Muscarinic Portfolio (Largest in Industry)

➤ **Phase 2 placebo-controlled study of NBI-1117568*, a selective M4 agonist, as a potential treatment for schizophrenia with top-line data on track in Q3 2024**

✓ NBI-1117568 offers the potential for an improved safety profile:

❑ Without the need of combination therapy to minimize side effects

❑ Avoids the need of cooperativity with acetylcholine when compared to non-selective muscarinic agonists and positive allosteric modulators in development

➤ **Phase 1 studies ongoing for:**

✓ NBI-1117567* (M1 preferring agonist)

✓ NBI-1117569* (M4 preferring agonist)

✓ NBI-1117570* (dual M1 / M4 agonist)

} for central nervous system disorders

✓ NBI-1076986 (M4 antagonist) for movement disorders

Luvadaxistat*: D-Amino Acid Oxidase (DAAO) Inhibitor in Phase 2 Study with Top-Line Data On Track in Q3 2024

Cognitive Impairment Associated with Schizophrenia (CIAS)



Affects approximately **80% of the 3.5 million** people in the U.S. diagnosed with schizophrenia



CIAS symptoms are characterized by poor mental function and include difficulty paying attention, processing information and making decisions



No U.S. FDA-approved treatments specifically indicated for CIAS

Luvadaxistat

Potent first-in-class DAAO inhibitor

- Once daily
- No titration requirement

Hypofunction of glutamatergic signaling has been implicated in the pathophysiology of schizophrenia

Phase 2 INTERACT study data showed luvadaxistat met secondary endpoints of cognitive assessment

Ongoing Phase 2 study in CIAS

- Evaluate safety and efficacy of luvadaxistat compared to placebo on improving cognitive performance in participants with schizophrenia
- Top-line data read-out on track in Q3 2024

Valbenazine*: ATS Study Will Inform Development of Our Next-Generation VMAT2 Inhibitors Including NBI-1065890 (Currently in Phase 1)

Adjunctive Treatment of Schizophrenia (ATS)



Schizophrenia is one of the **leading causes of disability** worldwide, affecting **up to 3.5M people** in the U.S. alone.



A serious, chronic mental illness that causes **abnormal thoughts, feelings and actions.**



Estimated that ~30% of patients with schizophrenia in the U.S. do not adequately respond to antipsychotic therapy, underscoring a **clear unmet need for improved pharmacological approaches.**



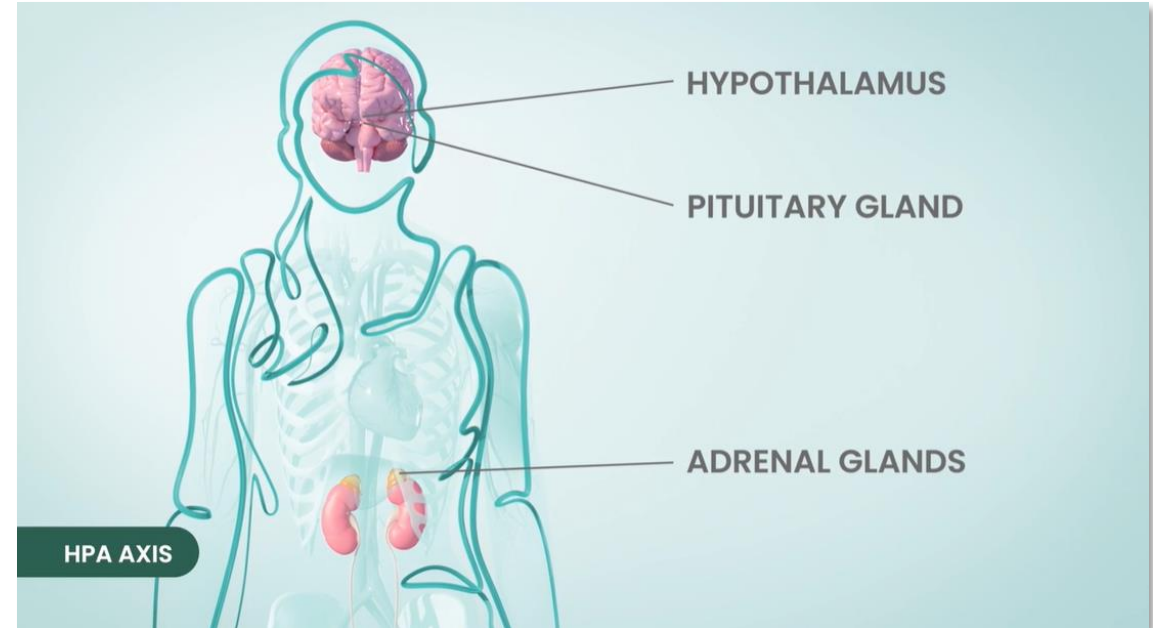
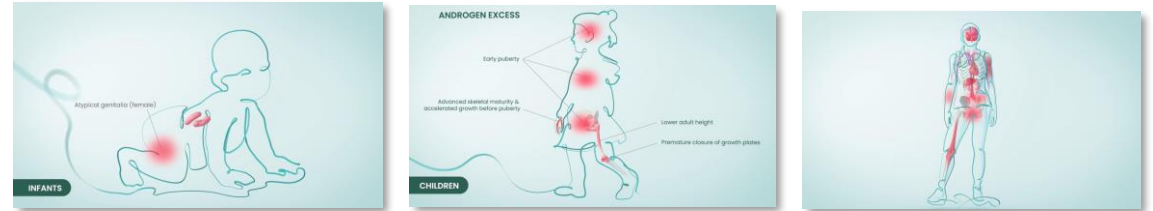
Neuroendocrinology Pipeline

Classic Congenital Adrenal Hyperplasia (CAH)



Rare Genetic Disorder

Enzyme deficiency & reduced cortisol levels and excess androgen levels



Complex and Highly Variable Symptoms



Treatment Options Stagnant for 70 Years



- Hormone replacement
- Do not address underlying issue

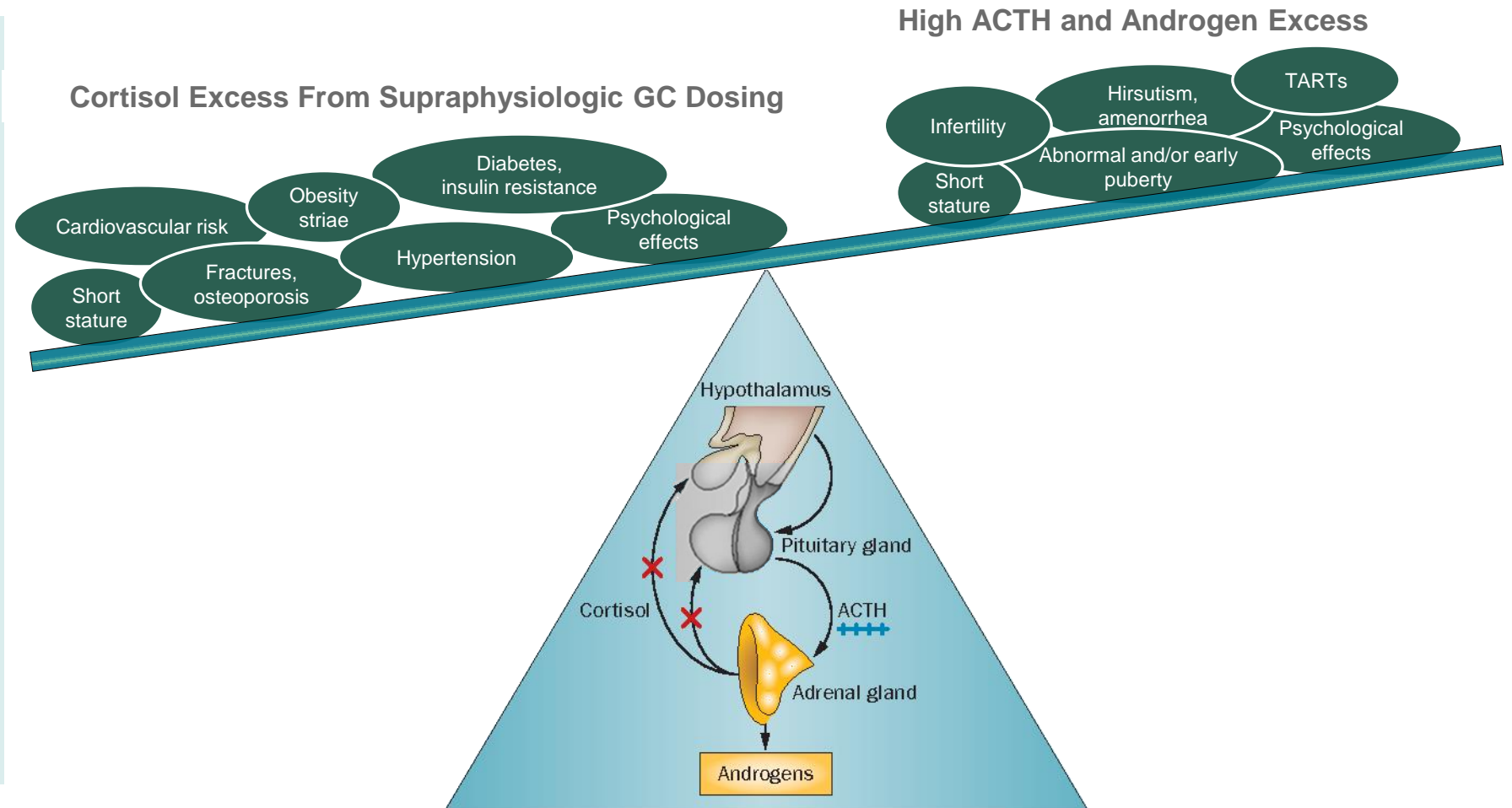
Classic Congenital Adrenal Hyperplasia Due to 21-Hydroxylase Deficiency (21OHD CAH)

21OHD CAH Results in:

- Impaired Synthesis of Cortisol and (Often) Aldosterone
- Excess Adrenal Androgen Production

Treatment Must Balance Consequences of:

- Supraphysiologic Glucocorticoid (GC) Doses
- High ACTH and Androgen Excess



Adapted from: Han TS et al. *Nat Rev Endocrinol.* 2014;10(2):115-24.

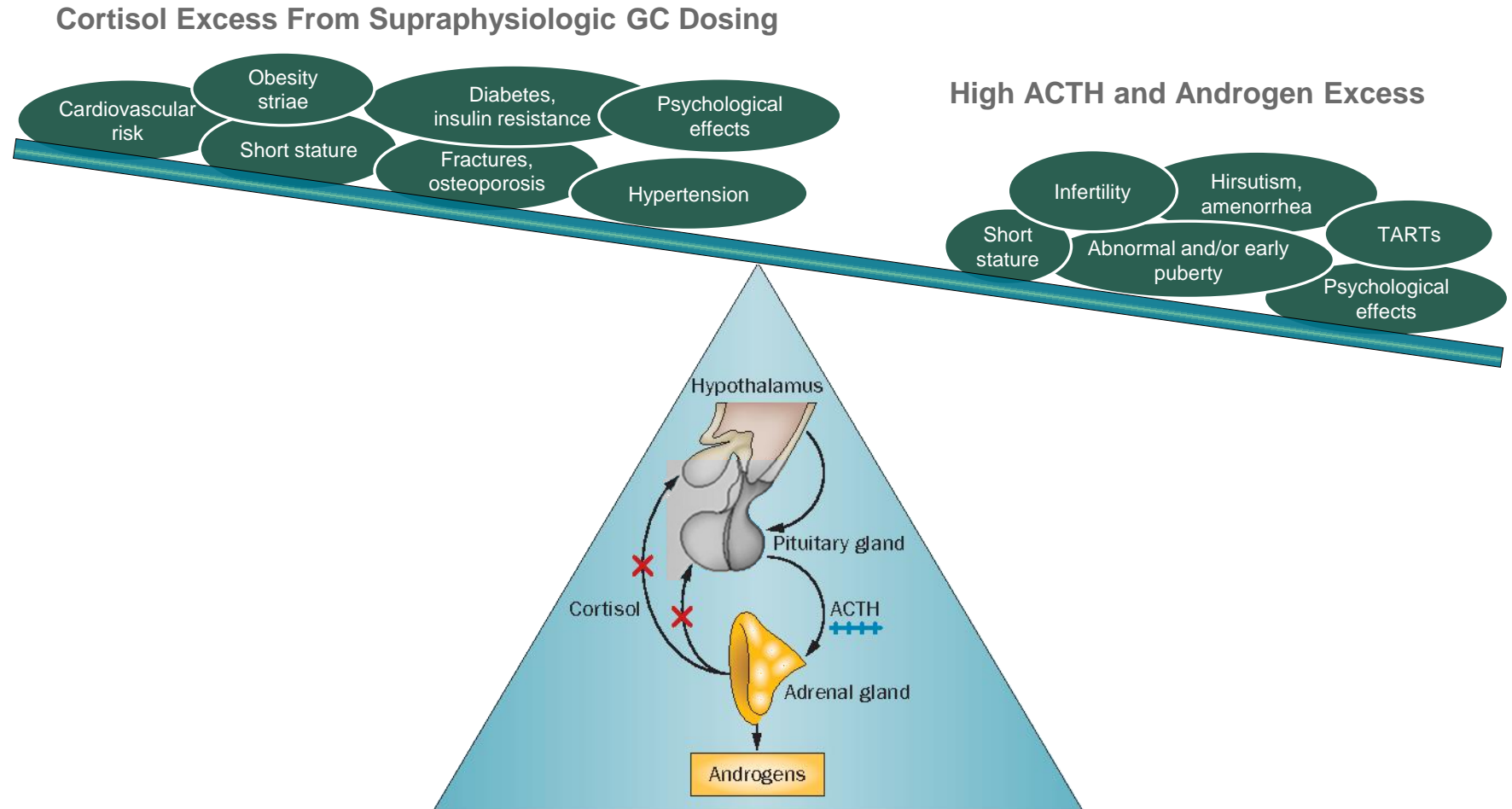
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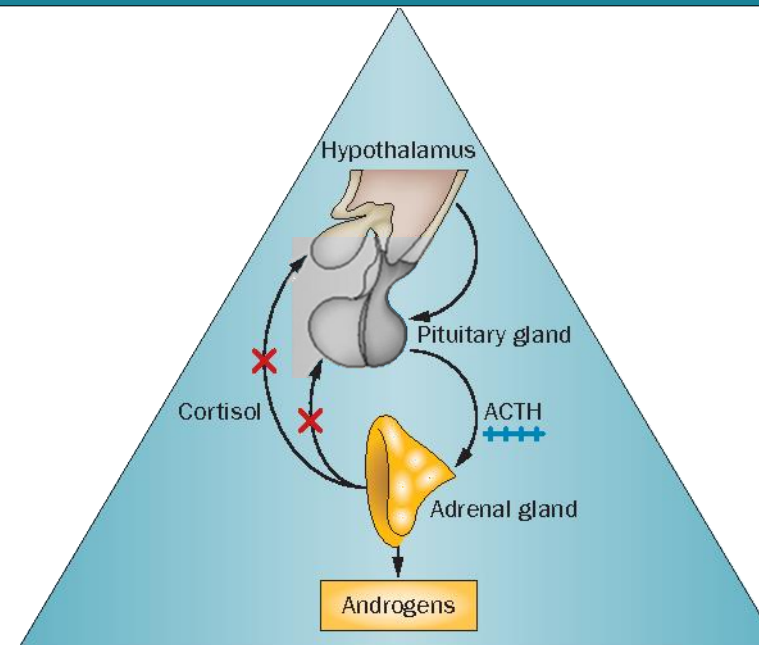
Treatment Must Balance Consequences of:

- Supraphysiologic Glucocorticoid (GC) Doses
- High ACTH and Androgen Excess

Reduced GC Dosing

crinecerfont

Androgen Control



Adapted from: Han TS et al. *Nat Rev Endocrinol.* 2014;10(2):115-24.

CAHtalyst™ Adult and Pediatric Study Androgen Reduction

Study Characteristic	Percent Change* in Androstenedione at Week 4 (Following Glucocorticoid Stable Period)		Key Takeaways
	Adult Study (N = 182)	Pediatric Study (N = 103)	
Patients Receiving Crinecerfont	-45%	-54%	Substantial and Meaningful Reduction in Androgens with Crinecerfont by 4 Weeks
Patients Receiving Placebo	+21%	+33%	Increase in Androgens on Placebo Reflecting Poor Disease Control Despite High Dose Steroids
Placebo-Adjusted Difference (Patients Receiving Crinecerfont – Patients Receiving Placebo)	-66%	-86%	Similar to Androgen Reduction Observed in Phase 2 Open-Label Studies (14 days)
P-value	<0.0001	<0.0001	

Phase 3 Study Data Presented at ENDO in June and Published in the New England Journal of Medicine ([Link Here](#))

CAHtalyst™ Adult and Pediatric Study Glucocorticoid Dose Reduction While Maintaining Androgen Control

CAHtalyst™ Trial Participants	Percent of Subjects Achieving a Glucocorticoid Daily Dose ≤ 11 mg/m ² /day While Maintaining Androgen Control		
	Adult Study @ Week 24	Pediatric Study @ Week 28	Key Takeaways
Patients Receiving Crinecerfont	63%	30%	Substantial Percentage of Patients on Crinecerfont Achieved Physiologic GC Dose <u>with</u> Androgen Control
Patients Receiving Placebo	18%	0%	No Pediatric Patients on Placebo Achieved Physiologic GC Dose Reflecting Inadequacy of GC to Treat High Androgen
Placebo-Adjusted Difference (Patients Receiving Crinecerfont – Patients Receiving Placebo)	45%	30%	Similar Results in Adult and Pediatric Patients Considering Differences at Baseline and in Trials
P-value	<0.0001	0.0009*	

In Addition, Treatment with Crinecerfont in Adult and Pediatric Patients Resulted in Significant Percent Reduction in Glucocorticoid Dose while Maintaining Androgen Control (p<0.0001 both studies)

CAHtalyst™ Adult and Pediatric Study Safety and Tolerability

- Crinecerfont Treatment was Overall Well-Tolerated with Few Serious Adverse Events (SAEs), None Were Assessed as Related to Crinecerfont
- Most Common Adverse Events During the Double-Blind, Placebo-Controlled Period of the Adult Study were Fatigue, Headache, and Coronavirus Infection
- Most Common Adverse Events During the Double-Blind, Placebo-Controlled Period of the Pediatric Study were Headache, Fever, Vomiting, Upper Respiratory Tract Infection, and Nasopharyngitis
- No Safety Concerns Related to Adrenal Crisis

Neurocrine Next Steps Regarding Crinecerfont

- New Drug Applications (NDAs) Have Been Accepted by the FDA
- FDA Granted Priority Review For Crinecerfont for Adult and Pediatric Patients with CAH
- Prescription Drug User Fee (PDUFA) Target Action Dates Set for December 29 for the Capsule Formulation and December 30 for the Oral Solution Formulation
 - If Approved, Neurocrine Can Activate a Rare Pediatric Disease Designation Priority Review Voucher Which Could Be Utilized to Accelerate the Review Process for a Future Registrational Program
- Neurocrine’s Rare Endocrinology Commercial Team Fully Hired and Focused on Market Development Initiatives to Better Understand the CAH Community
- Disease State Education Includes [“What the C@H!”](#), An Educational Initiative That Aims To:
 - Close the Gap in the Need for Helpful Information About CAH
 - Acknowledges Frustrations and Challenges Experienced by the Community Managing the Condition
- The Open-Label Treatment Periods for the CAHtalyst™ Pediatric and Adult Studies are Ongoing



Neurology Pipeline

Valbenazine*: Registrational Program in Dyskinetic Cerebral Palsy

Dyskinetic Cerebral Palsy (DCP)



A form of cerebral palsy (CP) that affects **~15% of the approximately 500,000 to 1M people** in the U.S. diagnosed with the disease.



Can result in a range of **developmental delays, physical difficulties and involuntary muscle movements.**



No approved treatments. Many patients take off-label drugs with **low efficacy and unwanted side effects.**

Well-Positioned for Sustained & Long-term Growth

Commercial



TARDIVE DYSKINESIA AND CHOREA
ASSOCIATED WITH HUNTINGTON'S DISEASE

2024 Annual

Net Sales Guidance Raised
and Narrowed from
\$2.1 - \$2.2 Billion

**\$2.25 - \$2.30
Billion**

~600,000

Affected by Tardive
Dyskinesia in the U.S.;
~65% are undiagnosed

~90%

of the ~40,000 People in
the U.S. Diagnosed with
Huntington's Disease Who
Will Develop Chorea

R&D Focus

Neurology
Neuroendocrinology
Neuropsychiatry

Robust Pipeline

Multiple Compounds in
Mid- to Late-Stage Studies

Rapidly Growing Early-
Stage Portfolio

Strong Financial Position

~\$1.7B

Cash and Investments
as of 6/30/2024

Strong Balance Sheet

Durable Cash Flows

Attractive P&L Profile



GAAP to Non-GAAP Reconciliations

[neurocrine.com](https://www.neurocrine.com)

NEUROCRINE BIOSCIENCES, INC.
CONDENSED CONSOLIDATED STATEMENTS OF INCOME
(unaudited)

	Three Months Ended June 30,		Six Months Ended June 30,	
	2024	2023	2024	2023
<i>(in millions, except per share data)</i>				
Revenues:				
Net product sales	\$ 583.8	\$ 446.3	\$ 1,092.8	\$ 861.6
Collaboration revenue	6.4	6.4	12.7	11.5
Total revenues	<u>590.2</u>	<u>452.7</u>	<u>1,105.5</u>	<u>873.1</u>
Operating expenses:				
Cost of revenues	9.2	11.5	16.7	20.0
Research and development	191.1	145.8	350.5	285.3
Acquired in-process research and development	2.5	—	8.5	143.9
Selling, general and administrative	242.0	221.8	485.1	464.5
Total operating expenses	<u>444.8</u>	<u>379.1</u>	<u>860.8</u>	<u>913.7</u>
Operating income (loss)	<u>145.4</u>	<u>73.6</u>	<u>244.7</u>	<u>(40.6)</u>
Other (expense) income:				
Unrealized (loss) gain on equity securities	(19.9)	37.3	(18.3)	39.5
Charges associated with convertible senior notes	(49.7)	—	(138.4)	—
Investment income and other, net	22.8	10.7	45.1	19.4
Total other (expense) income, net	<u>(46.8)</u>	<u>48.0</u>	<u>(111.6)</u>	<u>58.9</u>
Income before provision for income taxes	<u>98.6</u>	<u>121.6</u>	<u>133.1</u>	<u>18.3</u>
Provision for (benefit from) income taxes	<u>33.6</u>	<u>26.1</u>	<u>24.7</u>	<u>(0.6)</u>
Net income	<u>\$ 65.0</u>	<u>\$ 95.5</u>	<u>\$ 108.4</u>	<u>\$ 18.9</u>
Earnings per share, basic	\$ 0.64	\$ 0.98	\$ 1.08	\$ 0.19
Earnings per share, diluted	\$ 0.63	\$ 0.95	\$ 1.04	\$ 0.19
Weighted average common shares outstanding, basic	100.8	97.6	100.3	97.4
Weighted average common shares outstanding, diluted	103.9	100.2	103.8	100.3

NEUROCRINE BIOSCIENCES, INC.
CONDENSED CONSOLIDATED BALANCE SHEETS
(unaudited)

<i>(in millions)</i>	June 30, 2024	December 31, 2023
Cash, cash equivalents and marketable securities	\$ 1,038.9	\$ 1,031.6
Other current assets	630.9	575.4
Total current assets	1,669.8	1,607.0
Deferred tax assets	419.5	362.6
Debt securities available-for-sale	637.8	687.5
Right-of-use assets	262.9	276.5
Equity security investments	143.6	161.9
Property and equipment, net	80.1	70.8
Intangible assets, net	33.5	35.5
Other noncurrent assets	57.8	49.6
Total assets	\$ 3,305.0	\$ 3,251.4
Convertible senior notes	\$ —	\$ 170.1
Other current liabilities	398.5	484.7
Total current liabilities	398.5	654.8
Noncurrent operating lease liabilities	256.2	258.3
Other noncurrent long-term liabilities	141.1	106.3
Stockholders' equity	2,509.2	2,232.0
Total liabilities and stockholders' equity	\$ 3,305.0	\$ 3,251.4

NEUROCRINE BIOSCIENCES, INC.
RECONCILIATION OF GAAP TO NON-GAAP FINANCIAL RESULTS
(unaudited)

<i>(in millions, except per share data)</i>	Three Months Ended June 30,		Six Months Ended June 30,	
	2024	2023	2024	2023
GAAP net income ¹	\$ 65.0	\$ 95.5	\$ 108.4	\$ 18.9
Adjustments:				
Stock-based compensation expense - R&D	15.8	23.8	32.8	37.6
Stock-based compensation expense - SG&A	27.3	44.7	54.8	70.8
Charges associated with convertible senior notes ²	49.7	—	138.4	—
Impairment charges associated with leased properties ³	14.0	—	14.0	—
Non-cash amortization related to acquired intangible assets	0.9	0.9	1.8	1.8
Changes in fair value of equity security investments ⁴	19.9	(37.3)	18.3	(39.5)
Other	0.1	0.2	0.3	0.4
Income tax effect related to reconciling items ⁵	(23.8)	(2.1)	(75.1)	(13.8)
Non-GAAP net income	\$ 168.9	\$ 125.7	\$ 293.7	\$ 76.2
Diluted earnings per share:				
GAAP	\$ 0.63	\$ 0.95	\$ 1.04	\$ 0.19
Non-GAAP	\$ 1.63	\$ 1.25	\$ 2.83	\$ 0.76

1. Three and six months ended June 30, 2024 reflect \$26.5 million and \$32.6 million, respectively, of development milestone expense achieved under collaboration agreements. Six months ended June 30, 2023 reflects IPR&D expense of \$143.9 million related to expansion of strategic partnership with Voyager Therapeutics, Inc.
2. Reflects charges associated with the settlement of convertible senior notes conversions.
3. Reflects impairment charges associated with leased office space that has been vacated as the Company continues to occupy its new campus facility.
4. Reflects periodic fluctuations in the fair values of the Company's equity security investments.
5. Estimated income tax effect of Non-GAAP reconciling items are calculated using applicable statutory tax rates, taking into consideration any valuation allowance and adjustments to exclude tax benefits or expenses associated with charges associated with convertible senior notes and non-cash stock-based compensation.

NEUROCRINE BIOSCIENCES, INC.
RECONCILIATION OF GAAP TO NON-GAAP EXPENSES
(unaudited)

	Three Months Ended June 30,		Six Months Ended June 30,	
	2024	2023	2024	2023
<i>(in millions)</i>				
GAAP cost of revenues	\$ 9.2	\$ 11.5	\$ 16.7	\$ 20.0
Adjustments:				
Non-cash amortization related to acquired intangible assets	0.9	0.9	1.8	1.8
Non-GAAP cost of revenues	<u>\$ 8.3</u>	<u>\$ 10.6</u>	<u>\$ 14.9</u>	<u>\$ 18.2</u>

	Three Months Ended June 30,		Six Months Ended June 30,	
	2024	2023	2024	2023
<i>(in millions)</i>				
GAAP R&D	\$ 191.1	\$ 145.8	\$ 350.5	\$ 285.3
Adjustments:				
Stock-based compensation expense	15.8	23.8	32.8	37.6
Non-GAAP R&D	<u>\$ 175.3</u>	<u>\$ 122.0</u>	<u>\$ 317.7</u>	<u>\$ 247.7</u>

	Three Months Ended June 30,		Six Months Ended June 30,	
	2024	2023	2024	2023
<i>(in millions)</i>				
GAAP SG&A	\$ 242.0	\$ 221.8	\$ 485.1	\$ 464.5
Adjustments:				
Stock-based compensation expense	27.3	44.7	54.8	70.8
Impairment charges associated with leased properties	14.0	—	14.0	—
Non-GAAP SG&A	<u>\$ 200.7</u>	<u>\$ 177.1</u>	<u>\$ 416.3</u>	<u>\$ 393.7</u>

	Three Months Ended June 30,		Six Months Ended June 30,	
	2024	2023	2024	2023
<i>(in millions)</i>				
GAAP other (expense) income, net	\$ (46.8)	\$ 48.0	\$ (111.6)	\$ 58.9
Adjustments:				
Charges associated with convertible senior notes	49.7	—	138.4	—
Changes in fair value of equity security investments	19.9	(37.3)	18.3	(39.5)
Other	0.1	0.2	0.3	0.4
Non-GAAP other income, net	<u>\$ 22.9</u>	<u>\$ 10.9</u>	<u>\$ 45.4</u>	<u>\$ 19.8</u>

Advancing Life-Changing Discoveries in Neuroscience

Q2 2024

Corporate Presentation

August 1, 2024

Nasdaq: NBIX



You Deserve *Brave* Science™

