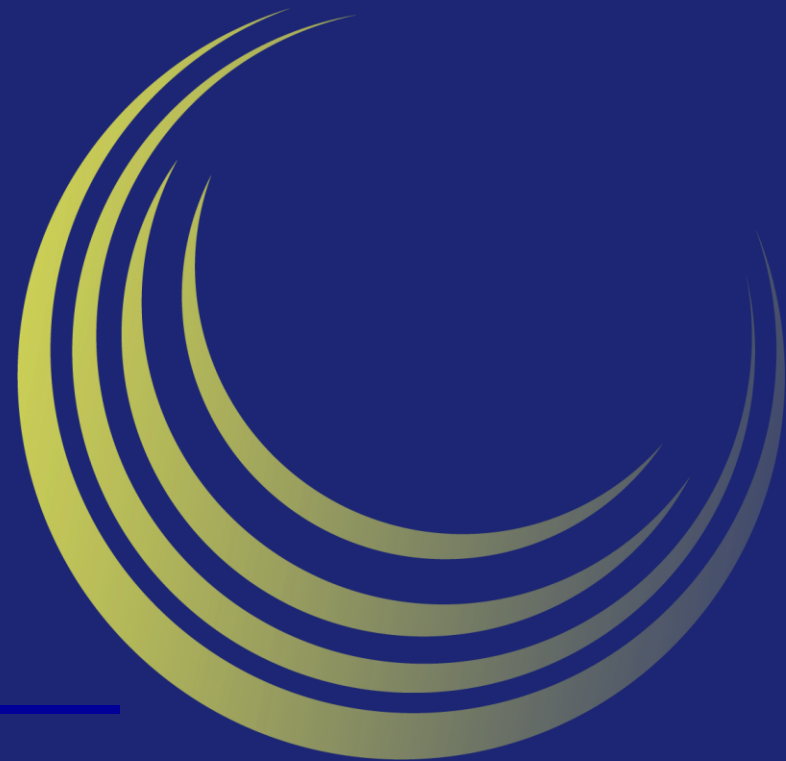


Supernus Pharmaceuticals



SPN-812 P302 Phase III Topline Data

December 2018

Safe Harbor Statement

This presentation includes forward-looking statements within the meaning of the federal securities laws. These statements, among other things, relate to Supernus' business strategy, goals and expectations concerning its product candidates, future operations, prospects, plans and objectives of management. The words "anticipate", "believe", "could", "estimate", "expect", "intend", "may", "plan", "predict", "project", "will", and similar terms and phrases are used to identify forward-looking statements in this presentation. Supernus' operations involve risks and uncertainties, many of which are outside its control, and any one of which, or a combination of which, could materially affect its results of operations and whether the forward-looking statements ultimately prove to be correct. Supernus assumes no obligation to update any forward-looking statements except as required by applicable law.

Supernus has filed with the U.S. Securities and Exchange Commission (SEC) reports and other documents required by Section 13 or 15(d) of the Securities Exchange Act of 1934, as amended. Before you purchase any Supernus securities, you should read such reports and other documents to obtain more complete information about the company's operations and business and the risks and uncertainties that it faces in implementing its business plan. You may get these documents for free by visiting EDGAR on the SEC website at <http://www.sec.gov>.



SPN-812

Novel Non-Stimulant ADHD Product Candidate

- Viloxazine hydrochloride
 - Norepinephrine reuptake inhibitor, selective serotonin activity
 - New Chemical Entity (NCE) with five year market exclusivity
 - Previously marketed outside the U.S. as an antidepressant
- Building strong IP with expirations from 2029-2033
- Clinical data point to a well-differentiated ADHD product
- Targeted NDA filing 2H 2019, and if approved, launch 2H 2020

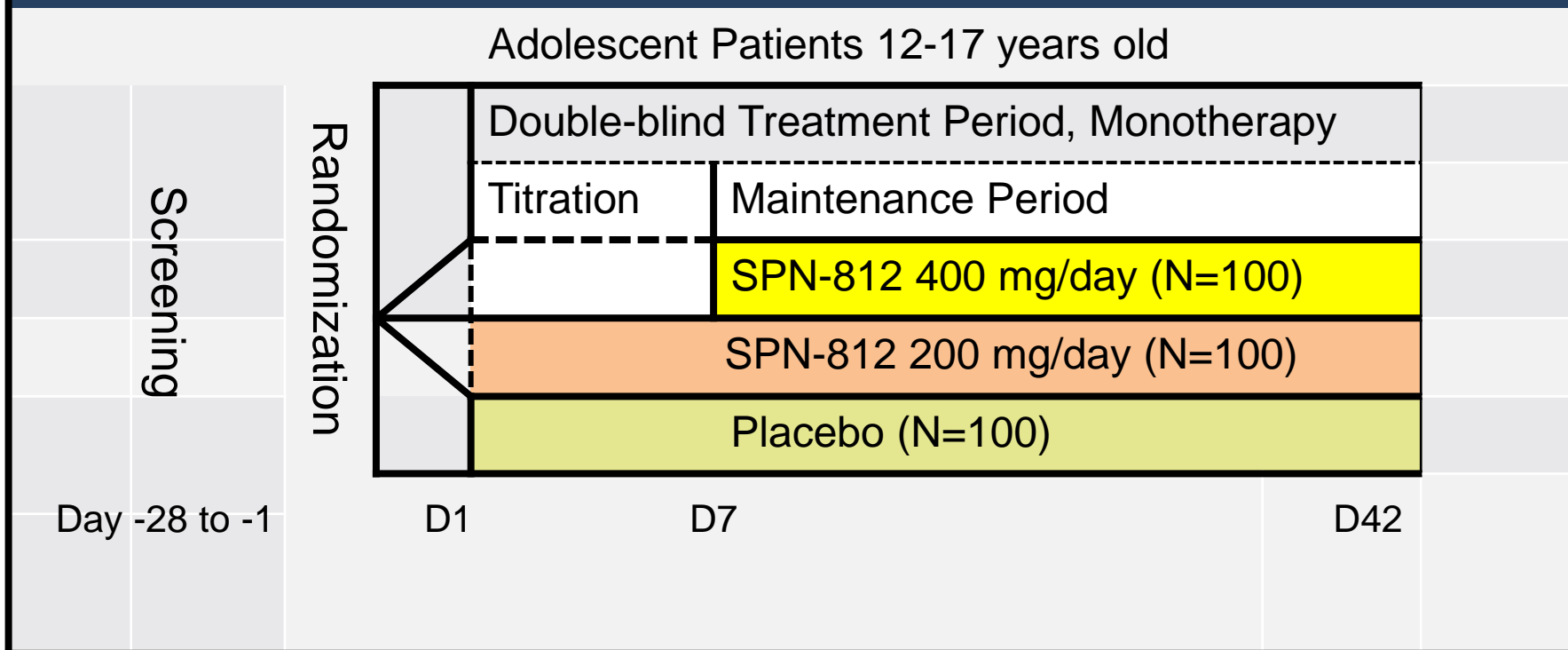
SPN-812

Phase III Studies Status

	P301 N = 477	P303 N = 313	P302 N = 310	P304 N = 300
ADHD Patients	6-11 years	6-11 years	12-17 years	12-17 years
Daily Doses	100mg 200mg	200mg 400mg	200mg 400mg	400mg 600mg
Status	Completed	Completed	Completed	Topline Data 1Q 2019

SPN-812 P302 Phase III Study Design

Randomized, double-blind, placebo-controlled, multicenter, parallel group, efficacy and safety study of SPN-812 200 mg and 400 mg



SPN-812 P302 Phase III Study Design

- Primary Endpoint
 - Change from baseline on the ADHD-RS-5 scale compared to placebo
- Secondary Endpoints
 - Clinical Global Impression - Improvement (CGI-I) scale
 - Conners 3rd edition - parent, composite T-score
 - Weiss Functional Impairment Rating Scale - parent report (WFIRS-P)
- Evaluate safety & tolerability

SPN-812 P302 Topline Results

Executive Summary

- Positive phase III results in adolescent patients 12-17 years old
 - Met primary endpoint with robust statistical significance
 - P-values ranging from <0.0091 to 0.0232
 - Sensitivity analysis confirms primary analysis
- Strong efficacy on Hyperactivity and Inattention subscales
- P302 study showed fast onset of action
 - Statistical significance as early as one week for 400mg
 - Sustained statistical significance through the end of study (week 6)

SPN-812 P302 Topline Results

Executive Summary

- P302 met the main CGI-I secondary endpoint
- Trial showed favorable tolerability and safety profile
 - Low incidence of AE's across all doses (200mg and 400mg)
- Overall, AE's are mild leading to very low discontinuation rates
 - Discontinuation rates due to AE's of 1.9% – 4.1%

SPN-812 P302: Met Primary Endpoint

Primary Analysis of ADHD-RS-5 based on MMRM (ITT Population)

Visit	Statistics	Placebo (N=104)	200 mg (N=94)	400 mg (N=103)
Baseline	Mean	40.5	39.9	39.4
Week 6 (EOS)	LS Mean	-11.4	-16.0	-16.5
	Effect Size		0.47	0.50
	p-value		0.0232	0.0091

MMRM = Mixed Model for Repeated Measure ITT = Intent to Treat
Effect size in P301, P303 and Phase IIb studies ranged from 0.46 to 0.63

EOS = End of Study

SPN-812 P302: Met Primary Endpoint

Efficacy Starting in Week 1

Visit	Statistics	Placebo (N=104)	200 mg (N=94)	400 mg (N=103)
Baseline	Mean	40.5	39.9	39.4
Week 1	LS Mean	-5.1	-7.1	-8.3
	p-value		0.1036	0.0085
Week 2	LS Mean	-8.0	-10.5	-12.0
	p-value		0.0702	0.0032
Week 3	LS Mean	-9.5	-12.8	-14.3
	p-value		0.0297	0.0010
Week 4	LS Mean	-10.5	-15.1	-15.9
	p-value		0.0048	0.0008
Week 5	LS Mean	-11.9	-16.7	-16.7
	p-value		0.0127	0.0102
Week 6 (EOS)	LS Mean	-11.4	-16.0	-16.5
	p-value		0.0232	0.0091

MMRM = Mixed Model for Repeated Measure

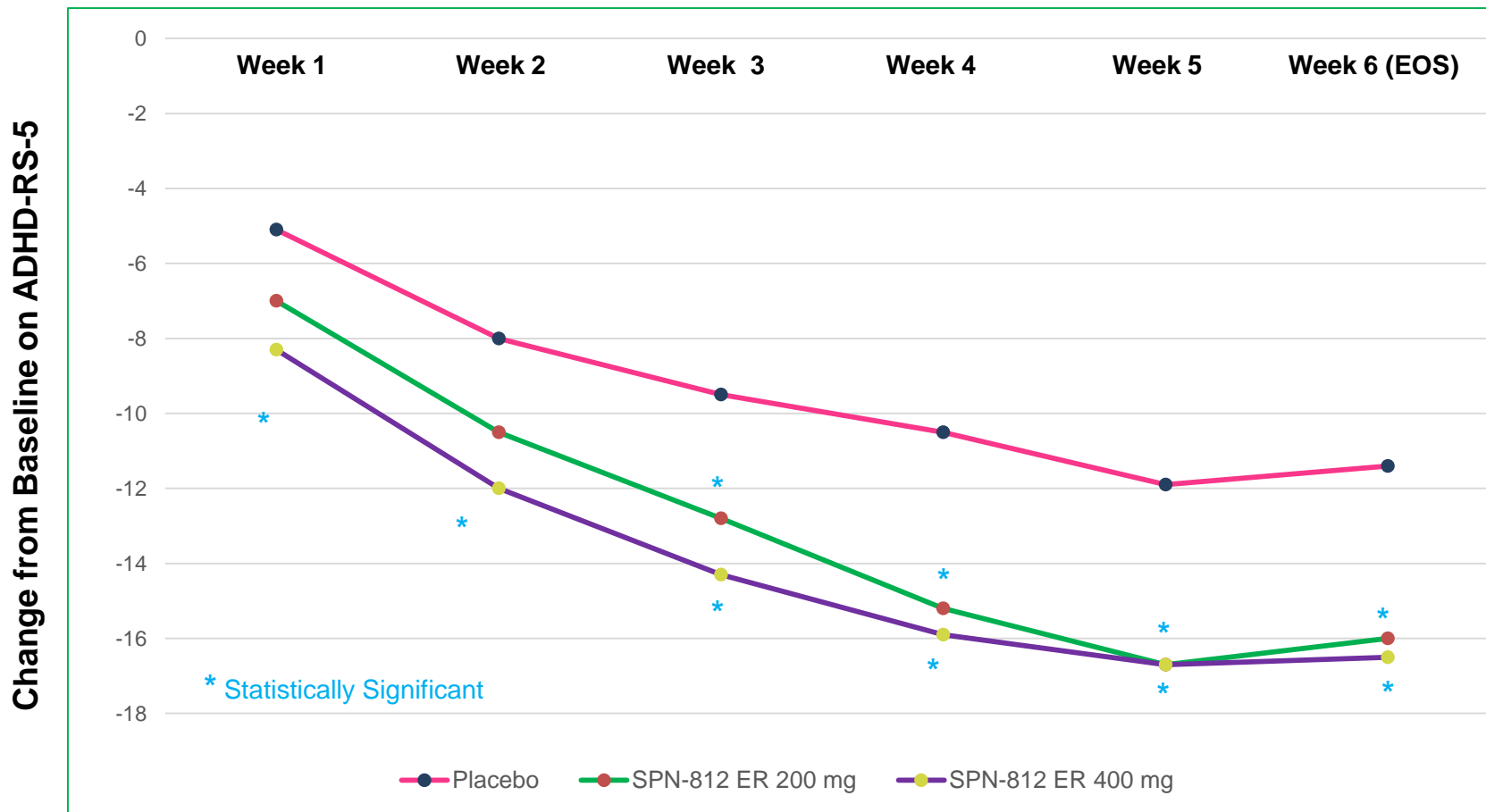
ITT = Intent to Treat

EOS = End of Study



SPN-812 P302 – Efficacy Starting in Week 1

LS Mean Change from Baseline over Time – MMRM (ITT Population)



MMRM = Mixed Model for Repeated Measure

ITT = Intent to Treat

EOS = End of Study



SPN-812 P302: Met Primary Endpoint

Sensitivity Analysis of ADHD-RS-5 based on ANCOVA at Week 6 (EOS) Confirms Primary Analysis (ITT Population)

Visit	Statistics	Placebo (N=104)	200 mg (N=94)	400 mg (N=103)
Baseline	Mean	40.5	39.9	39.4
Week 6 (EOS)	LS Mean	-11.7	-16.4	-17.0
	p-value		0.0163	0.0055

ANCOVA = Analysis of Covariance

ITT = Intent to Treat

EOS = End of Study



SPN-812 P302: Met Secondary Endpoint

Analysis of Observed Global Improvement Score (CGI-I) at Week 6 (EOS)

Visit	Statistics	Placebo (N=104)	200 mg (N=94)	400 mg (N=103)
Baseline	Mean	4.6	4.6	4.6
Week 6 (EOS)	LS Mean	3.0	2.5	2.4
	p-value		0.0042	0.0003

EOS = End of study

SPN-812 P302

Significant Reduction in Hyperactivity and Inattention

Analysis in ADHD-RS-5 Inattention and Hyperactivity/Impulsivity Subscales

Visit	Statistics	Placebo (N=104)	200 mg (N=94)	400 mg (N=103)
ADHD-RS-5 Hyperactivity/Impulsivity				
Baseline	Mean	18.1	17.7	17.9
Week 6 (EOS)	LS Mean	-5.1	-7.7	-8.4
	p-value		0.0069	0.0005
ADHD-RS-5 Inattention				
Baseline	Mean	22.4	22.2	21.5
Week 6 (EOS)	LS Mean	-6.6	-8.7	-8.7
	p-value		0.0424	0.0390

EOS = End of Study



SPN-812 P302

Well Tolerated

Number (%) of Patients Reporting Common AEs ($\geq 5\%$ and greater than placebo)

	Placebo (N=104)	200 mg (N=99)	400 mg (N=105)	Overall SPN-812 (N=204)
Somnolence	8 (7.7)	13 (13.1)	15 (14.3)	28 (13.7)
Headache	10 (9.6)	10 (10.1)	13 (12.4)	23 (11.3)
Decreased appetite	0	5 (5.1)	9 (8.6)	14 (6.9)
Nausea	3 (2.9)	7 (7.1)	7 (6.7)	14 (6.9)
Fatigue	1 (1.0)	4 (4.0)	6 (5.7)	10 (4.9)
Discontinuation Due to AE's	0	4 (4.1)	2 (1.9)	6 (2.9)



SPN-812 P302

Well Tolerated

Number (%) of Patients - Treatment Related AEs with $\geq 5\%$ incidence

	Placebo (N=104)	200 mg (N=99)	400 mg (N=105)	Overall SPN-812 (N=204)
Somnolence	7 (6.7)	13 (13.1)	15 (14.3)	28 (13.7)
Decreased appetite	0	5 (5.1)	9 (8.6)	14 (6.9)
Fatigue	1 (1.0)	4 (4.0)	6 (5.7)	10 (4.9)
Headache	7 (6.7)	3 (3.0)	7 (6.7)	10 (4.9)
Nausea	3 (2.9)	5 (5.1)	5 (4.8)	10 (4.9)

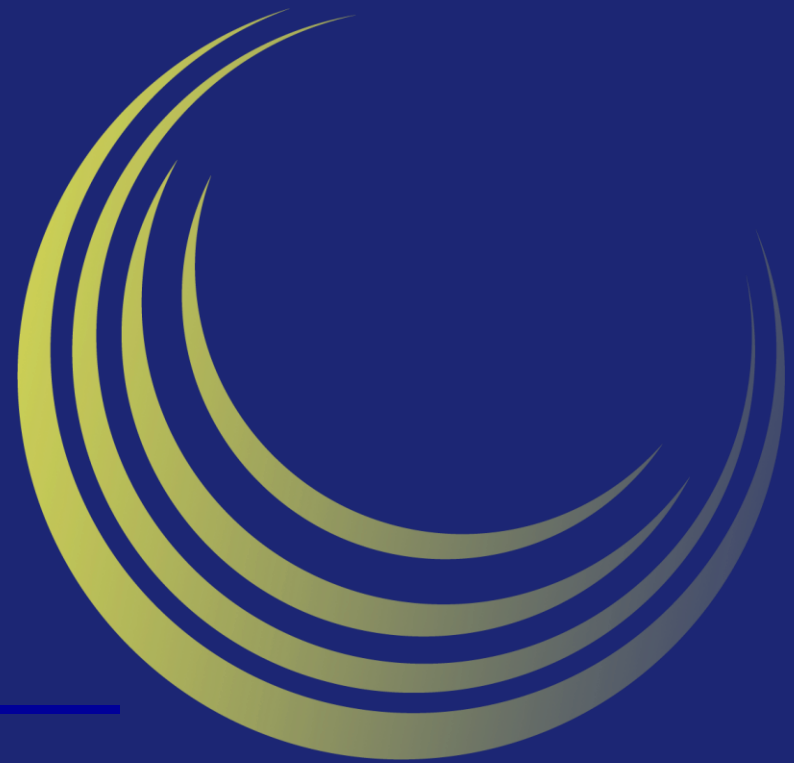
SPN-812 P302 Topline Results

Executive Summary

- Third positive phase III trial for SPN-812 in ADHD
 - First trial in adolescents 12-17 years old
 - Consistent with results from two phase III trials (P301 and P303) in children 6-11 years old
- Clinical data point to a well-differentiated ADHD product
 - Strong efficacy with robust statistical significance
 - Efficacy on both Hyperactivity and Inattention
 - Fast onset of action
 - Works as early as the first week
 - Very well tolerated
- Topline data from P304 adolescent trial in 1Q 2019
- Targeted NDA filing 2H 2019, and if approved, launch 2H 2020



Positioned For Continued Strong Growth



Growth Potential for Existing Products

Potential Peak Sales for Oxtellar XR[®] and Trokendi XR[®] >\$500M

Innovative Late Stage Portfolio in Psychiatry

- | | |
|---------|--------------------------------------------------------|
| SPN-812 | Well Differentiated Novel Non-Stimulant |
| SPN-810 | First Product to be Developed for Impulsive Aggression |
| SPN-604 | Novel Product for Bipolar Disorder |