RELIEF THERAPEUTICS

SIX: RLF.SW, OTCQB: RLFTF, OTCQB: RLFTY (U.S. ADR)

CORPORATE PRESENTATION

March 2023

SAFE HARBOR STATEMENT

Certain information set forth in this presentation contains "forward-looking information," including "future-oriented financial information" and "financial outlook," under applicable securities laws (collectively referred to herein as "forward-looking statements"). Except for statements of historical fact, the information contained herein constitutes forward-looking statements and includes, but is not limited to, the (i) projected financial performance of the RELIEF THERAPEUTICS Holding SA ("Relief" or the "Company"); (ii) the expected development of the Company's business, projects and joint ventures; (iii) execution of the Company's vision and growth strategy, including with respect to future M&A activity and global growth; (iv) sources and availability of third-party financing for the Company's projects; (v) completion of the Company's projects that are currently underway, in development or otherwise under consideration; (vi) discussion of the Company's material agreements; and (vii) future liquidity, working capital and capital requirements. Forward-looking statements are provided to allow potential investors and other parties the opportunity to understand management's beliefs and opinions in respect of the future so that they may use such beliefs and opinions as one factor in evaluating an investment or other matters.

These statements are not a guarantee of future performance and undue reliance should not be placed on them. Such forward-looking statements necessarily involve known and unknown risks and uncertainties, which may cause actual performance and financial results in future periods to differ materially from any projections of future performance or results expressed or implied by such forward-looking statements.

Although forward-looking statements contained in this presentation are based upon what management of the Company believes are reasonable assumptions, there can be no assurance that forward-looking statements will prove to be accurate, as actual results and future events could differ materially from those anticipated in such statements. The Company undertakes no obligation to update forward-looking statements if circumstances or management's estimates or opinions should change except as required by applicable securities laws. The reader is cautioned not to place undue reliance on forward-looking statements.

INVESTOR HIGHLIGHTS

We aim to provide relief to patients with unmet medical needs in select specialty and rare diseases

Strategic development

- Core competences drive development of differentiated products
- Targeting lucrative niches characterized by high margins and low clinical risk
- Therapeutic focus on metabolic disorders, pulmonary diseases, dermatology/connective tissue disorders & genetic diseases
- 505(b)(2) is the preferred development pathway for near-term products
- Obtain Orphan Drug protection and patent exclusivity

Diversified portfolio

- Balanced mix of marketed, revenue-generating products and pipeline with risk-mitigated development pathways
- Current in-house programs utilize established products with proven efficacy, known safety profiles or where proof-of-concept exists
- Late-stage licensing opportunities for internally developed products

Broad market potential

- Optimize therapeutic potential with application of our platform technologies, drug delivery systems or novel dosage forms
- Physiomimic™ Technology and Tehclo® nanotechnology
- Opportunities for development in other specialty or rare therapeutic areas, partnerships and out-licensing

Lead assets with multiple catalysts

- U.S. launch of PKU GOLIKE® for treatment of phenylketonuria in October 2022
- FDA approval of OLPRUVA™ for treatment of urea cycle disorders in December 2022; U.S. launch in 2Q 2023
- First patients enrolled in IIT of RLF-TD011 in epidermolysis bullosa; IIT of RLF-TD-011 in CTCL enrolling 3Q 2023
- RLF-100 sarcoidosis trial initiation Q1 2024

Solid financials

- U.S. $20.4 million in cash as of Dec. 31, 2022. Cash runway into Q3 2023
- Clean cap structure: no convertible instruments, preferred securities or warrants, no borrowings
- Nasdaq listing planned Q2 2023

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OUR MISSION

Advance treatment paradigms and deliver improvements in efficacy, safety and convenience to benefit the lives of patients living with chronic, debilitating diseases

Commercial portfolio of legacy Rx products and medical foods

Established, efficient global sales organization focused on rare diseases and specialist prescribers

Share of profit stream from recently approved OLPRUVA™ marketed by ACER

Leverage core drug formulation and drug delivery expertise to advance new assets in rare disorders

Deploy sales force across more rare disease products, which will be sourced via BD and InveniAI collaboration

Achieve cash flow breakeven by early 2025

Sustainable profitability in 2025 and beyond

Launch a disruptive, potentially curative portfolio of genetic medicines (employing gene therapy and/or genome editing)

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PIPELINE†

Drug Candidate	Indication	Pre-clinical	Phase 1	Phase 2	Phase 3	Filed	Market
Rare Metabolic Disorders							
RLF-OD032 **	Phenylketonuria (PKU)						
PKU GOLIKE®	Phenylketonuria (PKU)						
OLPRUVA™	Urea Cycle Disorders (UCD)						
	Maple Syrup Urine Disease (MSUD)						
Rare Skin Disorders							
RLF-TD011	Epidermolysis Bullosa (EB)						
	Cutaneous T-Cell Lymphoma (CTCL)						
Rare Pulmonary Diseases							
RLF-100	Pulmonary Sarcoidosis						
	Checkpoint Inhibitor-Induced Pneumonitis						
	Berylliosis						
	Non-COVID ARDS						

† Limited pipeline presented; ** Bioequivalence trial pending (Phase 3-ready)

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INVENIAI Collaboration

Leveraging AI and big data analytics to identify candidates for disruptive drug repurposing

Collaboration highlights

Initial focus on repositioning and repurposing existing, well-known and approved APIs (new IP to be owned by Relief)

Capital-efficient and risk-mitigated approach to product development: Initial up-front payment of U.S. $500,000, Success-based opt-in fees and milestone payments, Sales-based royalty payments of 3%

Complementary to Relief's existing capabilities in research, drug development/reformulation and internal BD

InveniAI is responsible for conducting initial validation of the product concepts for presentation to Relief

Pursuing additional opportunities in rare and specialty diseases through BD partnerships

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OUR PLATFORM TECHNOLOGIES

OPTIMIZING THERAPEUTIC POTENTIAL

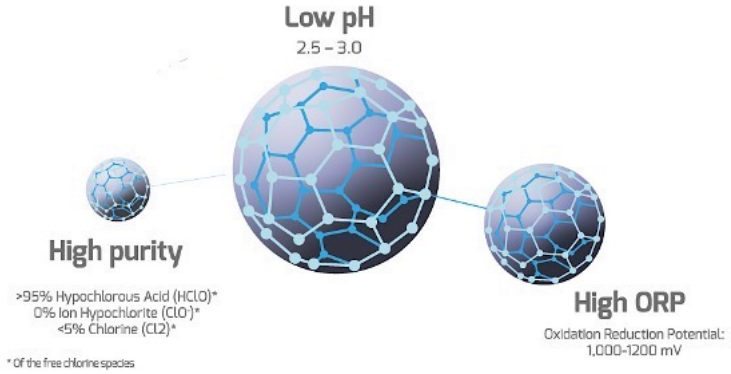
Physiomimic™ and Tehclo® technologies

PHYSIOMIMIC™ technology

Free amino acids are coated with two plant-based ingredients

Coating acts as a barrier, helping to ensure prolonged release and physiological absorption

TEHCLO™ Applied NanoScience



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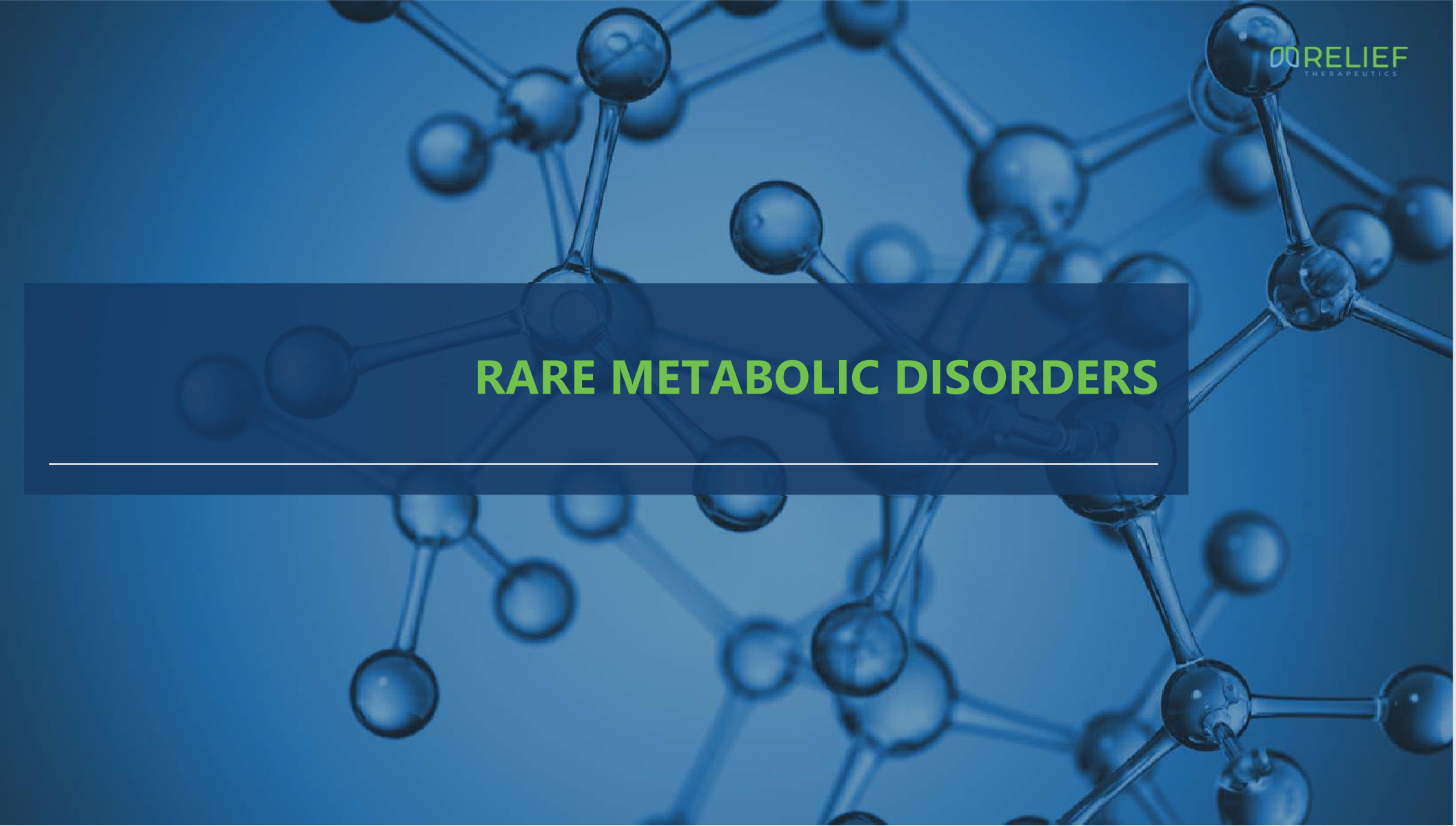
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RARE METABOLIC DISORDERS

PHENYLKETONURIA (PKU): A LIFELONG METABOLIC DISEASE

Requires limited diet to preserve neurologic function

- PKU is an inborn error of metabolism (IEM) condition identified via newborn screening, which involves an inability to metabolize the amino acid phenylalanine (Phe) found in many foods
- Untreated PKU can lead to irreversible brain damage and marked intellectual disability in newborns (neurological problems e.g., seizures, tremors; behavioral/emotional in older children, adults)
- Patients require supplementation of amino acid-based foods for special medical purposes (FSMPs) to prevent protein deficiency and optimize metabolic control
- Compliance suffers as current FSMPs have poor taste and unpleasant odor, leading to diminished social interaction
- Chronic medical nutrition therapy required to maintain blood Phe levels of 120-360 µmol/L

PKU in U.S. and Europe

Incidence:

- 1 in 10,000-15,000 births
- ~500 newborns/year

Number treated:

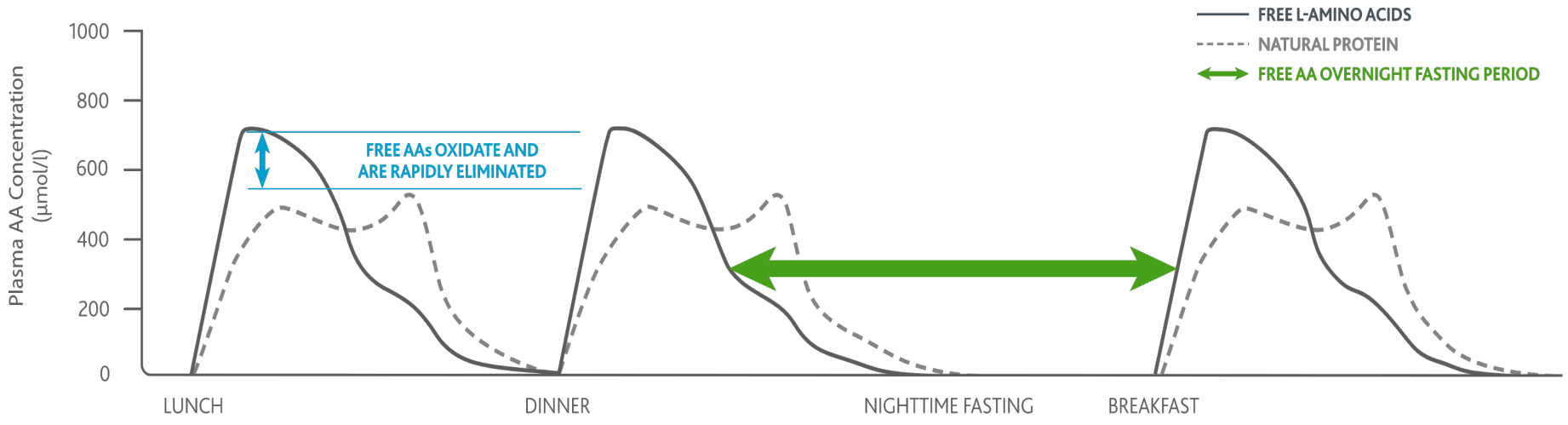
- ~35,000-40,000 total patients
- ~12,000-15,000 require regular care

Regier DS, Greene CL. Phenylalanine Hydroxylase Deficiency. 2000 Jan 10 [Updated 2017 Jan 5]. In: Adam MP, Everman DB, Mirzaa GM, et al., editors. GeneReviews® [Internet]. Seattle (WA): University of Washington, Seattle; 1993-2022; medlineplus.gov. cdc.gov. Nature, 2013.

CURRENT FSMPS LIMITED BY QUICK PROTEIN ABSORPTION

Extended periods of low protein absorption may lead to muscle break down

- Free amino acids (AAs) in medical foods not absorbed like natural proteins
- Quick absorption of free AAs results in rapid oxidation and elimination
- This can lead to low plasma concentration of AAs for extended periods, particularly overnight*



*Scheinin M, Junnila J, Reiner G, et al. Nitrogen balance after the administration of a prolonged-release protein substitute for phenylketonuria as a single dose in healthy volunteers. Nutrients. 2021;13(3189):1-10. doi:10.3390/nu13093189

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PKU GOLIKE® OVERCOMES ISSUES WITH CURRENT FSMPS

Convenient nutrition for patients with PKU

Contains all 19 amino acids that people with PKU need to maintain neurological and muscular health

Fortified with 27 essential vitamins and minerals, including ones normally found in protein-rich foods like iron, calcium, and vitamin B12

Convenient, easy to carry bars and sachets help active kids support their nutritional needs

*National Organization for Rare Disorders (NORD)

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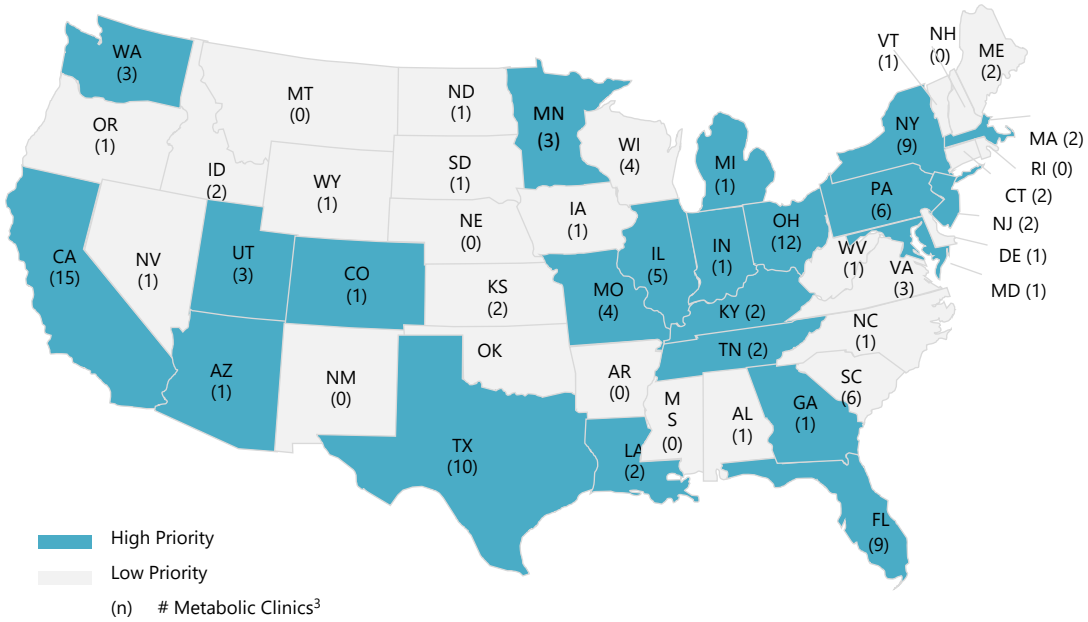
PKU GOLIKE® WELL-POSITIONED IN AN ATTRACTIVE MARKET

85% of PKU Patients are managed in 22 states



Catalyst Center. States Statutes and Regulations on Dietary Treatment of Disorders Identified through Newborn Screening. 2015; 2. US Provider PKU Claims Data. 2021. and state population data; 3. www.npkua.org/Resources/Find-a-Clinic ; 4. US Provider UCD Claims data. 2021.

Market Opportunity

Approximately 350,000 people suffer from PKU* globally

Global PKU FSMP market totals ~$400 million annually

Differentiated Profile

First FSMP developed with our Physiomimic™ technology

Potential best-in-class

Offers diversity in food options, improved metabolic management & better compliance for PKU patients of all age groups

Commercialization

U.S. Commercial launch October 2022

Low-cost threshold to efficient market access

Experienced, focused market access team (4 territories)

PKU GOLIKE® commercial rollout ongoing in Europe, favorable reimbursement

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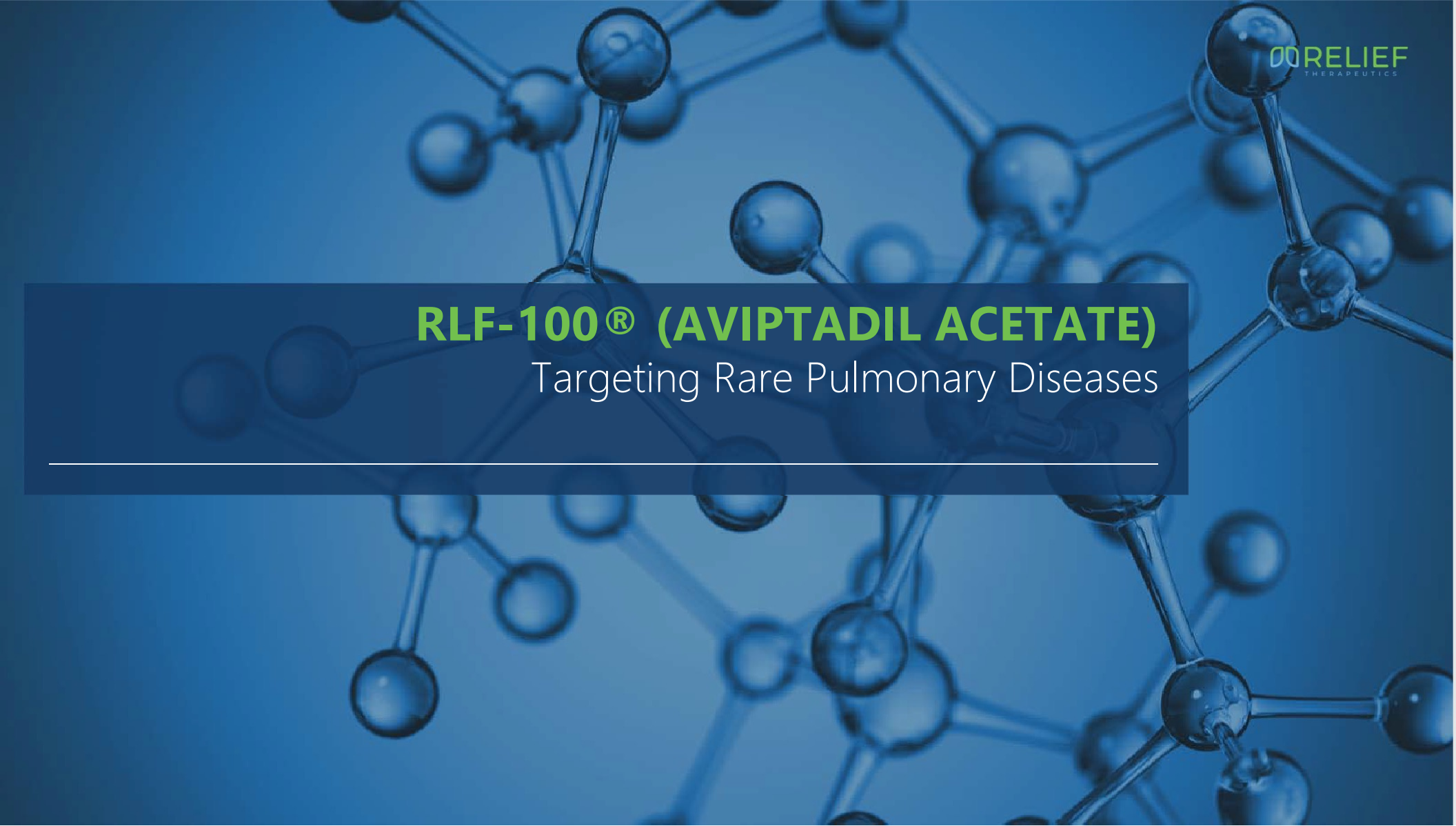
RLF-OD032

Liquid formulation of existing prescription medication for the treatment of PKU

- RLF-OD032 has potential to:
  - increase patient acceptance, compliance
  - enable easier, self or caregiver administered metered dosing and dispensing
- Relief holds global rights, pursuing development and regulatory approval(s) outside of the United Kingdom
- Initiating pilot bioequivalence study Q3 2023; with data expected Q4 2023
- Near-term value driver in 2025
- Annual revenue potential: ~$50M (gross)



RLF-100® (AVIPTADIL ACETATE)

Targeting Rare Pulmonary Diseases

RLF-100 (AVIPTADIL ACETATE) OVERVIEW

A potentially disruptive treatment for multiple respiratory disorders

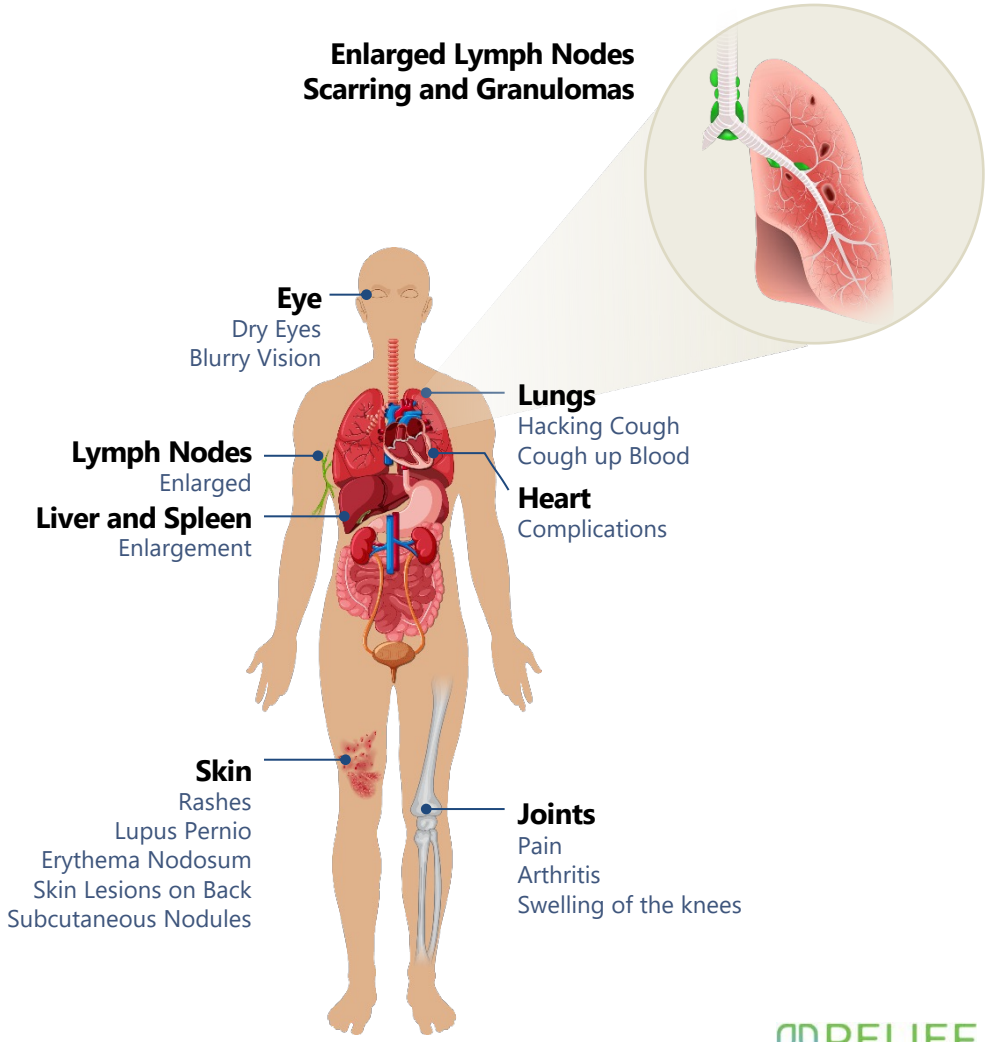
- 20-year safety record
- Orphan Drug designation granted in 2021 by the U.S. FDA
- For use in intensive care units (ICUs) or chronic contexts
- U.S. patent on aviptadil formulations expires in 2029, potential to extend well beyond 2040 around novel formulations
- Cost-effective manufacturing that can be rapidly scaled up
- Six-month stability data on new RLF-100 formulation announced November 2022: High-purity levels demonstrated at all temperatures tested (refrigerated, room temperature), New provisional patent application filed November 2022

PULMONARY SARCOIDOSIS

Sarcoidosis is a rare disease in which the inflammatory process involves the alveoli (air sacs), small bronchi, and small blood vessels

As sarcoidosis progresses, small lumps, or granulomas, appear in the affected tissues which tend to remain inflamed and become scarred (fibrotic)

Granulomas are structured masses composed of activated immunological cells



RLF-100®

Demonstrated anti-inflammatory properties in sarcoidosis

Inhaled Vasoactive Intestinal Peptide Exerts Immunoregulatory Effects in Sarcoidosis

Antje Prasse[1], Gernot Zissel[1], Niklas Lützen[1], Jonas Schupp[1], Rene Schmiedlin[1], Elena Gonzalez-Rey[2], Anne Rensing-Ehl[3], Gerald Bacher[4], Vera Cavalli[4], Dorian Bevec[4], Mario Delgado[2*], and Joachim Müller-Quernheim[1*]

TRIAL

An open-label proof-of-concept trial (Avisarco II) in 20 patients with histologically proved sarcoidosis and active disease

Nebulized RLF-100® was administered for 4 weeks

Study not designed to quantify cough and dyspnea by symptom score:

- 12 out of 20 patients suffered from cough
- 14 out of 20 patients suffered from dyspnea on exertion

RESULTS

RLF-100® significantly restored immune tolerance by promoting regulatory T-lymphocytes, improved CD4/CD8 ratio and normalized TNF-α production

Improvement was also seen in sarcoidosis-relevant biomarkers

- 9 of 12 patients who suffered chronic cough, 6 of 14 patients with dyspnea reported cough symptoms
- No deterioration reported in either cough or dyspnea

RLF-100® shown to be safe and well-tolerated

RLF-100® IV & INHALED FORMULATIONS

Potential pipeline-in-a-product: future U.S. commercial perspectives

REGULATORY

- U.S. FDA Orphan Drug designation in pulmonary sarcoidosis (granted); berylliosis (pending); checkpoint Inhibitor-induced pneumonitis (pending)
- Potential pivotal development initiation in early 2025
- Potential NDA submission in late 2026

COMMERCIAL OPPORTUNITY

- Potential for Orphan Drug pricing in various indications, including berylliosis and pulmonary sarcoidosis
- Issued patent covering aviptadil formulations valid in U.S. until 2029
- Possibility to obtain additional patent protection around novel formulations to extend commercial window beyond 2040

Relief to explore **PARTNERSHIPS** and **DISTRIBUTION AGREEMENTS** to facilitate access to RLF-100® as broadly as possible in regions wherein it does not intend to establish its own commercial infrastructure (e.g., emerging markets)

RLF-100®
Additional indications

Berylliosis / Chronic Beryllium Disease (CBD)

An orphan lung disease caused by the inhalation of beryllium particles, dust or fumes in the workplace, resulting in severe inflammation of the lungs, coughing and increasing breathlessness (dyspnea). CBD is a clinical phenocopy of sarcoidosis. Currently there are no treatments approved for berylliosis.

The *ex-vivo* effect of RLF-100 on mononuclear cells in the setting of CBD is currently being evaluated. Together with the results from the Phase 2b sarcoidosis trial, these results would justify the therapeutic use of inhaled RLF-100 in CBD, providing a rationale for the clinical trial design in this indication.

Estimated Timing: 2H2025 - Single registration study with interim analysis

Checkpoint Inhibitor-Induced Pneumonitis (CIP)

A rare, potentially fatal form of lung inflammation following treatment with immune checkpoint inhibitors (ICIs). ICIs are a type of immune therapy used to treat cancer. CIP can result in cough, dyspnea, fever, chest pain, and in severe cases, lack of oxygen in the lungs (hypoxia) and respiratory distress.

The use of inhaled RLF-100 for this indication will be further evaluated to explore whether such use could enhance compliance with chemotherapy and improve outcomes for cancer patients.

Estimated Timing: 2H 2024 - Phase 2 clinical trial initiation

Infectious acute respiratory distress syndrome (ARDS)

A potentially life-threatening condition in which the lungs become severely inflamed, leading to buildup of fluid in the lungs, preventing oxygen from getting to the bloodstream and the rest of the body. Infectious ARDS results from an injury or an infection (such as pneumonia, severe flu, sepsis, etc.) of the air sacs in the lung.

Inhaled RLF-100 is currently being studied in a European investigator-initiated trial for the prevention of ARDS associated with COVID-19 (Leuppi/NCT04536350), which is at an advanced stage of recruitment and slated to report top-line data in Q4 2023. Clinical trials of RLF-100 for the treatment of infectious ARDS are in development.

Estimated Timing: TBD

OLPRUVA™ (SODIUM PHENYLBUTYRATE) FOR ORAL SUSPENSION

UREA CYCLE DISORDERS

Metabolic genetic diseases that lead to toxic build-up of NH4+ (ammonia)

Urea Cycle Disorders (UCDs)

Long-term toxic ammonia levels can lead to liver and brain damage, severe ketoacidosis, and can even be fatal when left untreated

Non-compliance with current therapies is a major issue

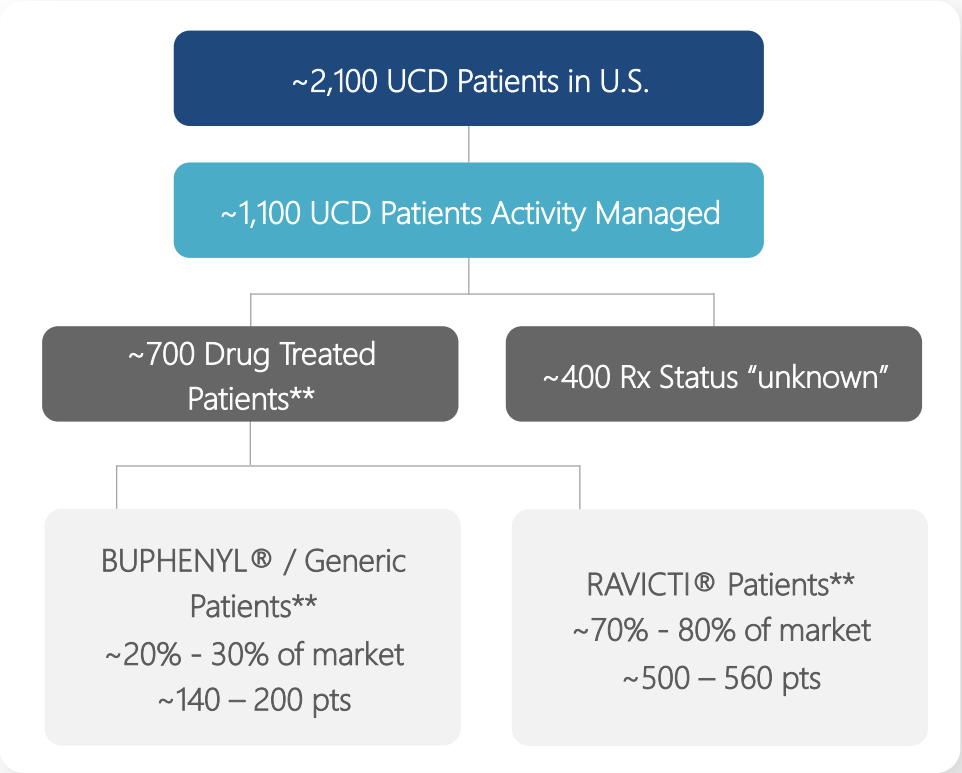
Maple Syrup Urine Disease (MSUD)

Metabolic genetic disease that leads to toxic build-up of leucine and other branched-chain amino acids

~800 eligible patients in the U.S.

Advantageous orphan pricing with robust program to support patient access and reimbursement

No approved MSUD treatments



1 Peña-Quintana L, et al. Profile of sodium phenylbutyrate granules for treatment of UCDs: patient perspectives. Patient Prefer Adherence. 2017 Sep 6;11:1489-1496.
2 https://www.drugs.com/slideshow/top-10-most-expensive-drugs-1274
3 Claims data analysis on file
4 https://ir.horizontherapeutics.com/static-files/47f395cb-4d8e-47a7-ba20-2f3c6f433e62; Represent North American sales

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CURRENT UCD TREATMENTS HAVE CHALLENGES

Patients and physicians desire effective, tolerable & affordable options

Sodium Phenylbutyrate (BUPHENYL®, generics)

Aversive taste and odor[2]

64% of patients reported difficulty due to taste[3]

Physicians reported 25-33% of patients took less than target dose due to tolerability[3]

Only 25% of patients indicated that they never miss a dose[3]

46% of patients reported taste as the reason for discontinuation[3]

RAVICTI®

Consistently listed as one of the "10 Most Expensive Drugs in the World"[4]

Pricing has risen to levels considered challenging[5]

Reports of difficult access, unaffordability, and forced switches back to sodium phenylbutyrate[5]

Some patients are not meeting the treatment goal of <0.5 ULN (~17.5 µmol/L)[6]

1 PHEBURANE is approved by FDA for UCDs but not currently marketed in the US (based on available information)
2 Peña-Quintana L, et al. Profile of sodium phenylbutyrate granules for the treatment of urea-cycle disorders: patient perspectives. Patient Prefer Adherence. 2017 Sep 6;11:1489-1496.
3 Shchelochkov et al., Molecular Genetics and Metabolism Reports 8 (2016) 43-47.
4https://pharmaoffer.com/blog/10-most-expensive-drugs-in-the-world/
5 Acer Therapeutics Market Research
6 Nicola Longo & Robert J. Holt (2017) Expert Opinion on Orphan Drugs, 5:12, 999-1010.

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OLPRUVA™: DIFFERENTIATED ON TASTE & ACCESS

	Phenylbutyrate	Formulations	
	Approved	Marketed	Products
	OLPRUVA[1]	RAVICTI	BUPHENYL[2]
Efficacy/Safety in UCDs	✓	✓	✓
Palatability/Compliance	✓	✓	✘**
Pricing (per patient/per year)	TBD	Avg $950K***	Avg $300K***
Formulation	Polymer-coated (packets)	Oil (tablespoons)	Powder Tablets (up to 40 tables/day)
Packaging	Portable pre-measured packets	Bottle and syringe (bulk container)	Bottle (bottle container)

- Pricing projected to be significantly lower than current RAVICTI® price
- Robust patient support services program to address barriers to care
- Payer engagement strategy to support adoption
- Commitment to support the UCD community and on-going IEM research

1 OLPRUVA is approved by the U.S. FDA for UCDs (Dec. 22, 2022)
2 PHEBURANE is approved by U.S. FDA for UCDs but not currently marketed in the US (based on available information)
** Shchelochkov et al., Molecular Genetics and Metabolism Reports 8 (2016) 43-47
*** RAVICTI® and BUPHENYL® annualized price per patient is based on patient weight and WAC price

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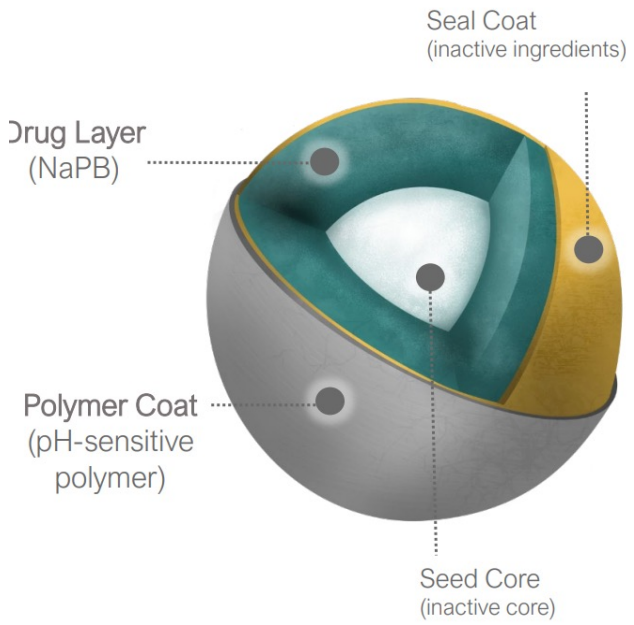
OLPRUVA™ (SODIUM PHENYLBUTYRATE) PACKETS

Taste-masked, immediate-release formulation of sodium phenylbutyrate (NaPB)



Profile

Small molecule

Microparticles consisting of core center, layer of active drug and taste-masking coating that quickly dissolves in the stomach but persists for up to five minutes in the mouth

Avoids bitter taste while allowing for rapid systemic release

Can be taken in fed or fasted state

Economics

60% / 40% profit split in favor of Relief in U.S., Brazil, Turkey and Japan

Acer is responsible for all U.S. commercial infrastructure

Relief to pay Acer a 15% royalty on net sales in ROW

FDA Approved

U.S. FDA approved in December 2022 for UCD indication

Orphan Drug Designation in U.S. and EU for MSUD indication

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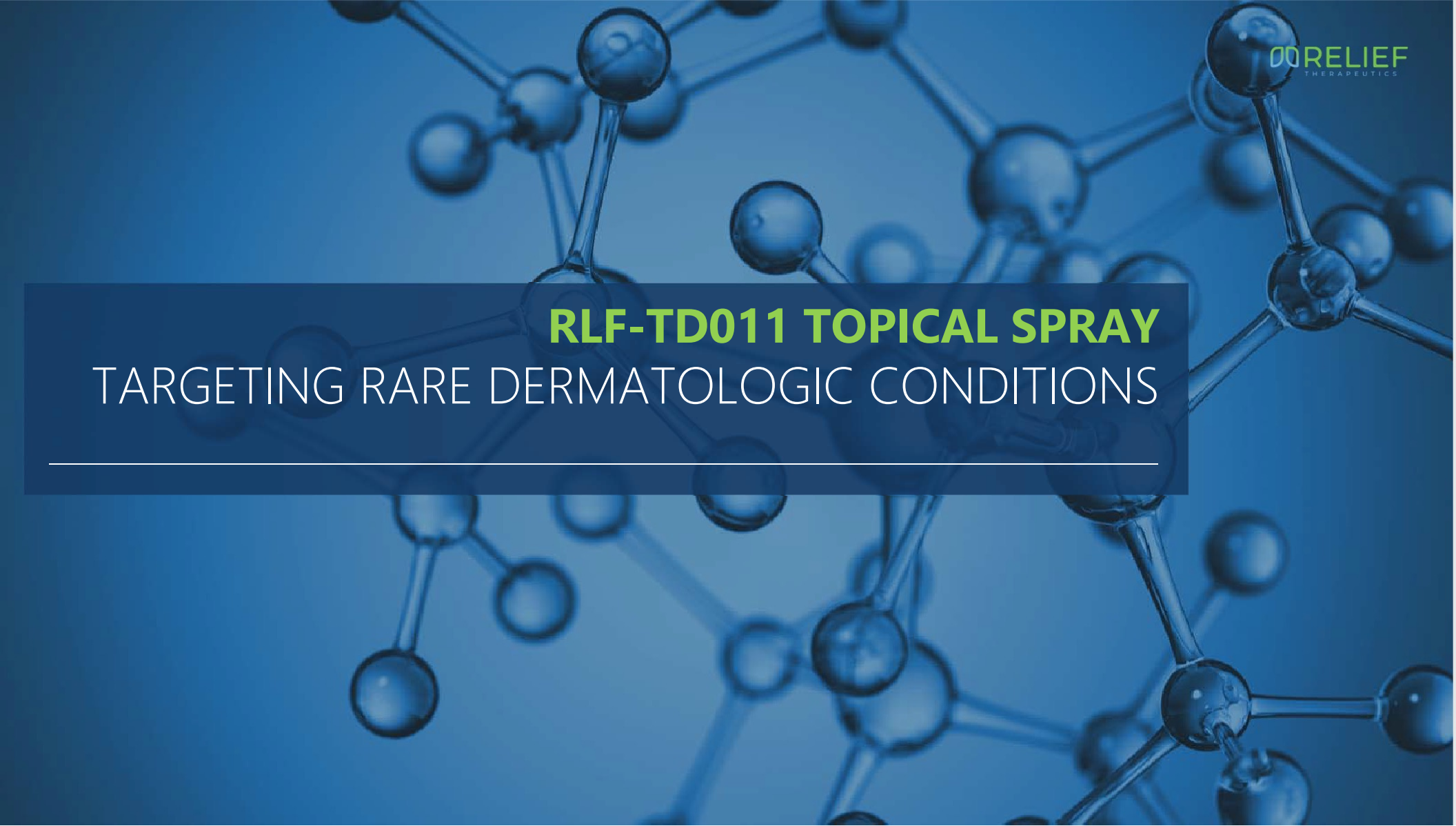
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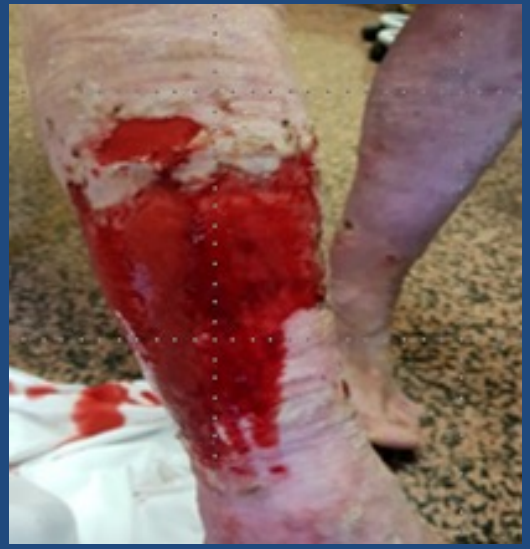
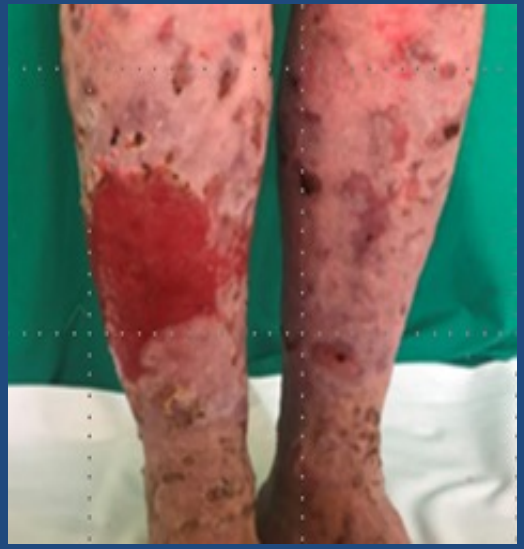
RLF-TD011 TOPICAL SPRAY
TARGETING RARE DERMATOLOGIC CONDITIONS

EPIDERMOLYSIS BULLOSA (EB)

A rare, debilitating skin disease





Epidermolysis Bullosa (EB) is a group of rare, genetic, life-threatening connective tissue disorders

Characterized by skin blistering throughout the body

Risk of severe impact to internal organs

EB afflicts ~30,000 patients in the EU and ~20,000 patients in the U.S. (EB Research Partnership)

RLF-TD011: POTENTIAL BEST-IN-CLASS

Differentiated profile

- RLF-TD011 is a proprietary formulation of hypochlorous acid (HClO) sprayable solution
  - First product specifically developed for EB patients
  - Combines powerful anti-microbial action with anti-inflammatory properties
  - Provides a complete treatment to prevent/reduce infections and inflammation via modulation of the wound microenvironment to accelerate a faster physiological wound healing rate
  - Touch-free topical dosing
  - Potential to become one of the first drugs approved for EB
- Shown to be well-tolerated in multiple clinical trials for wound care, favorable safety profile
- Orphan Drug Designation by the U.S. FDA
- Investigator-initiated clinical trial was initiated in February 2023
- High margin opportunity in rare dermatology
- Estimated ~$1bn/year market potential in the U.S.*

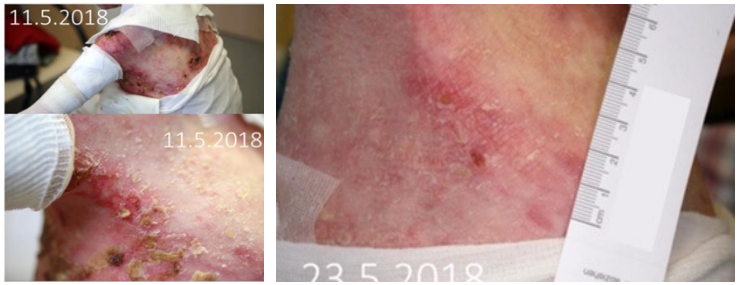
*Company reports

RLF-TD011: EPIDERMOLYSIS BULLOSA CASE STUDY

Demonstrated improvement in skin blistering, tissue repair

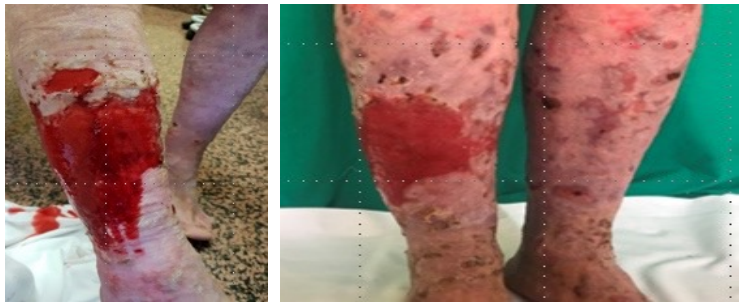
A 32-year-old junctional EB (JEB) patient had a two-year-old chronic, lower leg wound that was unsuccessfully treated with the following: Amukina, Citrizan gel, Iruxol, Gentalyn beta, Adaptic, Fitostimoline dressing – with no positive benefits

RLF-TD011 was applied twice-daily in conjunction with an inactive dressing such as Adaptic



After only two weeks of treatment (applied twice-daily):

- Complete wound healing
- Skin irritation improvement
- Strong reduction of itching



After four weeks of treatment

- Wound area is clearly improved with increased presence of granulation tissue
- Inflammation and exudate are strongly reduced
- Patient reports a reduction of pain and burning sensation at and around the wound site and a preference for RLF-TD011's easy-to-use spray dosage form for wound management

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CORPORATE INFORMATION

EXCEPTIONAL MANAGEMENT, STRONG FINANCIAL BASE

WELL-ESTABLISHED INTERNATIONAL LEADERSHIP

Executive Management Team

Jack Weinstein, Chief Executive Officer

30+ year veteran of financial sector and healthcare industry. 18 years experience in healthcare-focused investment banking on Wall Street. Former CFO of Catalyst Pharmaceuticals, a Nasdaq-listed biopharma.

Nermeen Varawalla, M.D., Ph.D. Chief Medical Officer

More than 30 years of international expertise in clinical trials, regulatory matters and medical affairs. Former CMO and head of clinical development for Atlantic Healthcare plc. Also held senior roles at BTG plc (acquired by Boston Scientific for $4.2 billion in 2019).

Chris Wick, U.S. Country Lead

Proven pharmaceutical sales professional with over 20 years' experience in big pharma. Formerly regional sales director for Alexion Pharmaceuticals, leading the launch of Soliris®. Previously with GlaxoSmithKline and Novartis.

Serene Forte, M.D., MPH, Senior Vice President, Head of Genetic Medicine

Accomplished scientific and clinical leader with more than 20 years of direct leadership experience. Successful record blending scientific education and business acumen to drive global medical affairs, commercial strategy and patient advocacy. Extensive experience in the field of genetic medicines with direct involvement in the strategic launch for several gene therapy companies.

Paolo Galfetti, Chief Operating Officer, President of Relief Europe

More than 20 years of life science experience, including managerial, R&D, business development, licensing, and strategic planning. Nearly 17 years as CEO of APR Applied Pharma Research S.A.. Chartered financial analyst.

Jeremy Meinen, Chief Financial Officer and Treasurer

Swiss-certified public accountant. Expertise in financial consulting and controlling functions in various industries, former licensed audit expert.

Marco Marotta, Chief Business Officer

International experience in operations, sales and business development within the pharmaceutical sector. Former corporate director, business development and licensing at APR Applied Pharma Research S.A.

Jean-Philippe Maréchal, Global Director of Marketing & Sales (ex-U.S.)

Seasoned marketing and sales executive with 23+ years of success in the pharmaceutical and biotech industry. Previously served as immunology therapeutic unit head & integrated solution lead at UCB France Also formerly held positions at Recordati Rare Diseases, AOP Orphan in Vienna, Bayer, LEO Pharma, Servier & Sanofi.

RELIEF THERAPEUTICS

EXTENSIVELY EXPERIENCED, ACTIVE BOARD

Board of Directors

Ram Selvaraju, Ph.D., M.B.A.
Chairman of the Board

Managing director & senior healthcare analyst, H.C. Wainwright & Co., equity research division

17 years of exceptional experience as a leading biopharma sell-side equity research analyst on Wall Street

Ranked #1 across all sectors for portfolio return by TipRanks in 2021
Former award-winning drug discovery pharmaceutical researcher at Serono in Switzerland (acquired by Merck KGaA for $15.6 billion in 2006)

Tom Plitz, Ph.D.
Board Member

Former CEO of Chord Therapeutics SA, a privately-held biopharma firm that Merck KGaA acquired in December 2021

20+ years of R&D experience in senior management positions in the pharmaceutical industry
Former chief scientific officer at Wilson Therapeutics, a rare disease-focused firm acquired in 2018 by Alexion (now part of AstraZeneca) for $855 million

Patrice Jean, Ph.D.
Board Member

Chair of Hughes Hubbard's Life Sciences group

More than a decade of experience counseling leading pharmaceutical, chemical, and startup biotechnology companies in all areas of patent law

Paolo Galfetti
Board Member

COO and president of Relief Europe

Practical and managerial experience in clinical research, pharmaceutical discovery and development, business development and licensing as well as operational strategic management and restructuring

Member of several pharma licensing groups and chartered financial analyst

Michelle Lock
Board Member

COO of Covis Pharma Group
Nearly 30 years of biopharmaceutical strategic, operational and commercial experience, including 24 years at Bristol-Myers Squibb and subsequently as head of Europe and International at Acceleron Pharma, which Merck acquired for $11.5 billion in late 2021
Honorary ambassador between Switzerland and the U.S. since 2018

CORPORATE INFORMATION

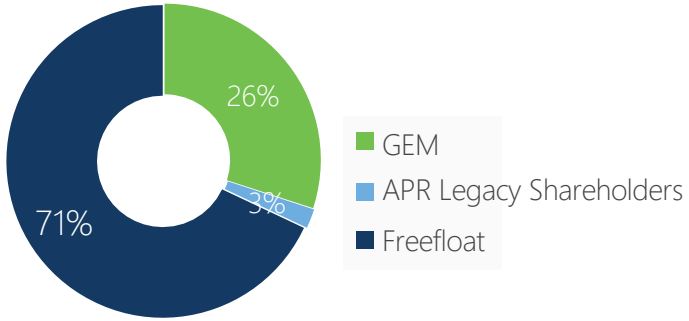
Sufficient resources to support current clinical development programs across multiple indications

RELIEF SHARES – LISTED ON SIX AND U.S. OTCQB	
FIGURES**	
SIX	**RLF**
OTCQB:	**RLFTF**
OTC: (U.S. ADR)	**RLFTY**
Shares outstanding*	**4,405,525,186**
Options outstanding	**74,363,197**
Warrants outstanding	**0**

FINANCING PLANS / OPTIONS

- Equity transactions
- Share subscription facility of up to CHF 50M (U.S.~$50M) in place
- Additional development and commercialization partnerships

CURRENT SHAREHOLDER STRUCTURE



- Available cash position as of Dec. 31, 2022: ~ U.S $20.4 M
- Cash runway into Q3 2023
- Low effective tax rate (Swiss Domicile): 14%

U.S. Nasdaq listing Q2 2023

Operating cash flow breakeven by early Q1 2025 driven by revenue from PKU GOLIKE®, OLPRUVA™ and other products

*Shares outstanding as of Dec. 31, 2022

** Excluding treasury shares ≈ 1,210,809,438 million shares

RELIEF THERAPEUTICS

UPCOMING CATALYSTS

News flow and inflection points

Q1`23

- Initiation of patient enrollment in RLF-TD011 IIT in EB (Paller / NCT05533866)
- EMA ODD filing for RLF-100 (aviptadil) in sarcoidosis, berylliosis & checkpoint-inhibitor-induced pneumonitis (CIP)

Q2`23

- U.S. Nasdaq listing
- OLPRUVA™ U.S. commercial launch
- Initiation of toxicological studies in RLF-100 (aviptadil) as required by FDA
- U.S. ODD filing for RLF-100 (aviptadil) in berylliosis & checkpoint-inhibitor-induced pneumonitis (CIP)
- Final product concept selection with InveniAI

Q3`23

- Initiation of pilot bioequivalence study for RLF-OD032 for the treatment of PKU
- FDA pre-IND meeting for RLF-OD032 for the treatment of PKU
- PKU GOLIKE commercial rollout completed in U.S.
- Initiation of patient enrollment in RLF-TD011 IIT in CTCL (Zhou / NCT05728879)

Q4`23

- Data release from PKU GOLIKE clinical trial(s)
- Data release from pilot bioequivalence study with RLF-0D032 for the treatment of PKU

Q1`24

- RLF-TD011 IIT in pilot study data release in EB (Paller / NCT05533866)
- Initiation of pivotal bioequivalence clinical program with RLF-OD032 for treatment of PKU
- Initiation of enrollment in RLF-100 (aviptadil) Phase 1 trial in sarcoidosis as required by FDA

RELIEF THERAPEUTICS

RELIEF TO PATIENTS WITH SERIOUS, UNMET MEDICAL NEEDS

Looking toward a bright future

- Forward integrated, highly nimble specialty drug company
- Active strategy to expand and diversify via both in-licensing and M&A
- Multiple therapeutic shots on goal remaining for RLF-100®
- Targeting conditions with high unmet medical needs
- APR acquisition brought commercial sales and infrastructure; immediately accretive to revenue
- Sufficient funds to support current clinical development programs across multiple indications
- Deep pipeline ranging from Phase 1 through Phase 3
- Major near-term milestones anticipated for most advanced elements of portfolio
- Operating cash flow breakeven in early 2025 driven by revenue from PKU GOLIKE®, OLPRUVA™ and other products


RELIEF
THERAPEUTICS
Thank You