Recognizing the serious threat of bacterial infections, Paratek is dedicated to providing solutions that enable positive outcomes and lead to better patient stories.
Third-party industry and market information included herein has been obtained from sources believed to be reliable, but the accuracy or completeness of such information is not guaranteed by, has not been independently verified by, and should not be construed as a representation by, Paratek. The information contained in this presentation is accurate only as of the date hereof.

This presentation contains forward-looking statements including statements related to our overall strategy, products, prospects, potential and expected results, including statements about the projected net product revenues including assumptions related to our financial guidance, our anticipated cash runway, our SEYSARA royalty-backed loan funded on May 1, 2019, the progression of our commercial roll out for NUZYRA, our ability to shape the future treatment paradigm for community-acquired bacterial pneumonia and serious skin infections, our plans to evaluate additional indications for NUZYRA, including NTM, and to work toward an oral-only indication in CABP, and our potential to further drive long-term value for all of our shareholders. All statements, other than statements of historical facts, included in this presentation are forward-looking statements, and are identified by words such as "advancing," "expect," "look forward," "anticipate," "continue," and other words and terms of similar meaning. These forward-looking statements are based upon our current expectations and involve substantial risks and uncertainties. We may not actually achieve the plans, carry out the intentions or meet the expectations or projections disclosed in our forward-looking statements and you should not place undue reliance on these forward-looking statements. Our actual results and the timing of events could differ materially from those included in such forward-looking statements as a result of these risks and uncertainties. These and other risk factors are discussed under "Risk Factors" and elsewhere in our Annual Report on Form 10-K for the year ended December 31, 2019 and our other filings with the Securities and Exchange Commission. We expressly disclaim any obligation or undertaking to update or revise any forward-looking statements contained herein.

PARATEK® and the Hexagon Logo are registered trademarks of Paratek Pharmaceuticals, Inc. NUZYRA and its design logo are trademarks of Paratek Pharmaceuticals, Inc. All other trademarks, service marks, trade names, logos and brand names identified in this presentation are the property of their respective owners.
Paratek is Well-Positioned for Future Growth
Focused on Execution + New Value Creation

Near-term Execution

- Advance NUZYRA® U.S. Launch
- Capitalize on Project BioShield Opportunity
- Disciplined Operating Expense Management

Future Value Creation

- NUZYRA in Nontuberculous Mycobacteria or “NTM”
- Oral-only dosing regimen for NUZYRA in CABP
- Product / Pipeline Expansion

NUZYRA® 100mg for injection & 150mg tablets
Paratek Investment Highlights

**NUZYRA®: Potential Blockbuster Antibiotic in Both Hospital and Community Settings**

---

**Potential Blockbuster Antibiotic with NUZYRA®**
- 1st FDA approved and launched *once-daily oral & IV antibiotic* to treat both CABP and ABSSSI in nearly 20 years*
- > $5 Billion Potential Addressable U.S. Market**

---

**Capital Efficient Commercial Model**
- Significant Value Proposition = Hospitalization Minimization
- Hospital Promotion with no other Branded Once-Daily Broad-spectrum Oral + IV Competitors

---

**BARDA Project BioShield**
- BARDA Project BioShield contract awarded to for development of NUZYRA for pulmonary anthrax
- Valued up to $285 million

---

**Additional Pipeline Potential**
- Life-cycle opportunities: Oral-Only CABP, Nontuberculous mycobacteria, Pulmonary Anthrax, Prostatitis, Rickettsial Disease
- Additional Biodefense opportunities beyond pulmonary anthrax

---

**Strong Balance Sheet**
- Cash runway projected through 2023 with a potential pathway to cash flow breakeven**

---

(* NUZYRA U.S. FDA-approved in October 2018
(**) Paratek estimates based on 2015 AMR data current treatment failure rates and a Zyvox 2015 pricing analogue and opportunity reflective of current U.S. label
(***) Assumes estimated NUZYRA US Product revenue, BARDA reimbursement of activities related to Project BioShield contract. Company will be able to fund all company operating expenses, anticipated capital expenditures, and debt service, including repayment in full of the Hercules Loan and Security Agreement under its existing terms
BARDA BioShield Contract
A Unique Public-Private Partnership with Paratek

Biothreat agents may be resistant to antibiotics already in Strategic National Stockpile (SNS)

Emerging antibiotic resistance may complicate a response to any public health emergency

Adding to SNS novel antibiotics that overcome resistance enhances national security, serves as additional market
## Paratek / BARDA Milestones

<table>
<thead>
<tr>
<th>Events</th>
<th>Timing</th>
<th>Value</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initiation of Anthrax Treatment Development Program</td>
<td>Dec 2019</td>
<td>~$20M</td>
<td>Contract executed</td>
</tr>
<tr>
<td>Submit Pre-Emergency Use Authorization Designation for NUZYRA in anthrax</td>
<td>Q1 2020</td>
<td>✔</td>
<td>Submitted</td>
</tr>
<tr>
<td>Initiate Funding for FDA Post Marketing Requirements Including CABP and Pediatric Studies</td>
<td>Q2 2020</td>
<td>✔</td>
<td>~$77M</td>
</tr>
<tr>
<td>Initiate Funding for Manufacturing Security-Related Requirements and Onshoring</td>
<td>Q2 2020</td>
<td>✔</td>
<td>~$20M</td>
</tr>
<tr>
<td>Procurement of Initial 2500 Treatment Courses for BARDA Project BioShield</td>
<td>Q2 2020</td>
<td>✔</td>
<td>~$38M</td>
</tr>
<tr>
<td>Initiate Dosing on Animal Anthrax Studies</td>
<td>2H 2020</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Procurement of Second 2500 Treatment Courses</td>
<td>1H 2021</td>
<td>✔</td>
<td>~$38M</td>
</tr>
<tr>
<td>Supplemental Prophylaxis Animal Development</td>
<td>2H 2021</td>
<td>✔</td>
<td>~$13M</td>
</tr>
<tr>
<td>Procurement of Third 2500 Treatment Courses</td>
<td>1H 2022</td>
<td>✔</td>
<td>~$38M</td>
</tr>
<tr>
<td>Procurement of Fourth 2500 Treatment Courses</td>
<td>1H 2023</td>
<td>✔</td>
<td>~$38M</td>
</tr>
</tbody>
</table>
# BARDA Project BioShield Contract Award

Valued up to $285 million to Paratek

<table>
<thead>
<tr>
<th>Contract Provisions</th>
<th>Value</th>
<th>Timing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Base Award</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Development of NUZYRA: Treatment of pulmonary anthrax</td>
<td>~$21 million</td>
<td>• Funding period: 2020 through 2024</td>
</tr>
<tr>
<td>• Purchase of an initial 2,500 treatment courses</td>
<td>~$38 million</td>
<td>• 2500 treatment courses: 1H 2020</td>
</tr>
<tr>
<td><strong>Time-Based Options</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• All FDA post marketing requirements including CABP,</td>
<td>~$77 million</td>
<td>• Funding to commence in 2Q 2020 through</td>
</tr>
<tr>
<td>microbiological surveillance and pediatric studies</td>
<td></td>
<td>completing of all studies; 100% cost</td>
</tr>
<tr>
<td>• Manufacturing on-shoring and security-related requirements</td>
<td>~$20 million</td>
<td>reimbursement model</td>
</tr>
<tr>
<td><strong>Milestone-based Options</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Three additional purchases of NUZYRA for up to 7,500</td>
<td>~$115 million</td>
<td>• 2500 treatment courses: ~2021</td>
</tr>
<tr>
<td>treatment courses</td>
<td></td>
<td>• 2500 treatment courses: ~2022</td>
</tr>
<tr>
<td>• Development of NUZYRA: Prophylaxis of pulmonary anthrax</td>
<td>~$13 million</td>
<td>• 2500 treatment courses: ~2023</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Program to commence with funding: ~2022</td>
</tr>
</tbody>
</table>
February 2020

Zai Lab announced that **NMPA has accepted its NDA for omadacycline**
Seeking approval for the treatment of community-acquired bacterial pneumonia and acute bacterial skin and skin structure infections

Under the terms of the Zai Collaboration Agreement, Paratek is entitled to receive:

- A **milestone payment of $6 million** upon regulatory approval (anticipated in the first half of 2021)
- **Tiered royalties at low double digit to mid-teen percentages** on net revenues for sales of omadacycline in the greater China region
SEYSARA: Entered into a License Grant with Almirall for Greater China Region

🌟 Greater China Region:
- Paratek will earn **high single-digit royalties** on net sales in the greater China region.
- Almirall plans to develop sarecycline for acne in China, with a potential **submission to the China National Medical Products Administration in 2023**.

🌟 Rest of World:
- Paratek and Almirall also finalized a **license granting Paratek exclusive rights to develop, manufacture and commercialize sarecycline outside the of the U.S.**
- Paratek will share with Almirall any potential revenues of sarecycline outside of the U.S. and greater China region.
<table>
<thead>
<tr>
<th>Description</th>
<th>Research</th>
<th>Preclinical</th>
<th>Phase 1</th>
<th>Phase 2</th>
<th>Phase 3</th>
<th>Registration</th>
<th>Marketed in the U.S.</th>
<th>Commercial Rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUZYRA® (omadacycline)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>100mg for injection &amp; 150mg tablets</td>
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<tr>
<td>ABSSSI (IV &amp; Oral) – QIDP</td>
<td></td>
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<td></td>
<td></td>
<td>✔️</td>
<td>PARATEK®</td>
</tr>
<tr>
<td>ABSSSI (Oral-only) – QIDP</td>
<td></td>
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<td>✔️</td>
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<tr>
<td>CABP (IV &amp; Oral) – QIDP</td>
<td></td>
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<td></td>
<td>✔️</td>
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<tr>
<td>CABP PK Study for Oral-only Labelling</td>
<td></td>
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<tr>
<td>Biodefense Pathogens (Anthrax)</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>FDA Animal Rule Applies</td>
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<tr>
<td>SEYSARA® (sarecycline)</td>
<td></td>
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<td></td>
<td></td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Inflammatory Acne (Acne Vulgaris)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

*We have entered into a collaboration agreement with Zai Lab (Shanghai) Co., Ltd., for the greater China region*

+We have entered into a license agreement with Almirall for the greater China region
NUZYRA® Commercial Opportunity

Potential Blockbuster Antibiotic in Both Hospital and Community Settings
Monthly Sales Comparison to Peer Products (February 2020)
NUZYRA® Tracking Favorably vs Most Recent Launches
NUZYRA U.S. Launch Underway
Generated $11.5 million in Net Sales in 2019

- Launched in the U.S. in February 2019
- With particular strength seen with the oral formulation, NUZYRA is on track to have one of the most successful antibiotics launches in last decade
- NUZYRA generated $5.4 million in net sales in the U.S. in the fourth quarter compared to $3.1 million seen in the third quarter, an increase of 74%
  - Accounting for inventory, NUZYRA demand increased from approximately $3.3 million in the third quarter to approximately $6.1M in the fourth quarter of 2019; an increase of 85% versus prior quarter
  - Growth in the fourth quarter was driven by demand as inventory in the channel remained essentially flat
- Achieved institutional access in ~ 60% of the 600 plus targeted hospitals as of Q4 2019
- Through Q4 2019, over 80% of commercial lives and greater than 50% of Medicaid lives in the U.S. now have access to NUZYRA
NUZYRA®: Attributes Provide A Modern-Day Solution
Addressing Bacterial Resistance and the Needs of Today’s Healthcare Systems

- Once-daily IV & Oral
- Skin and Pneumonia Approved
- No dosage modifications or monitoring in hepatic or renal impairment
- No QTc prolongation
- Low potential for DDIs
- No cases of *C. diff* reported in completed clinical program

- HCP confidence in treating patients
  - Efficacy
  - Safety
  - Tolerability

- Efficacy from hospital to home
  - Helps minimize hospitalization
Blockbuster Antibiotics: IV & Oral Formulations, Once-daily

**NUZYRA®: Well Positioned for Future Success**

<table>
<thead>
<tr>
<th>Antibiotic</th>
<th>Broad Spectrum</th>
<th>Indications(^{(1)})</th>
<th>Oral Frequency</th>
<th>2010 Sales(^{(3,4)})</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levofloxacin</td>
<td>✓</td>
<td>3</td>
<td>Once Daily</td>
<td>$3.4B</td>
</tr>
<tr>
<td>Co-Amoxy clav</td>
<td>✓</td>
<td>3</td>
<td>Twice Daily</td>
<td>$2.8B</td>
</tr>
<tr>
<td>Azithromycin(^{(2)})</td>
<td>✓</td>
<td>2</td>
<td>Once Daily</td>
<td>$1.8B</td>
</tr>
<tr>
<td>Ciprofloxacin</td>
<td>✓</td>
<td>3</td>
<td>Twice Daily</td>
<td>$1.4B</td>
</tr>
<tr>
<td>Clarithromycin(^{(2)})</td>
<td>✓</td>
<td>2</td>
<td>Twice Daily</td>
<td>$1.4B</td>
</tr>
<tr>
<td>NUZYRA</td>
<td>✓</td>
<td>2</td>
<td>Once Daily</td>
<td>N/A</td>
</tr>
</tbody>
</table>

\(^{(1)}\) Skin, Respiratory, UTI
\(^{(2)}\) Both Azithromycin and Clarithromycin did not have UTI claim
\(^{(3)}\) IMS global sales data in 2010
\(^{(4)}\) Major patents had expired for all products by 2010 except Levofloxacin where 2010 was peak year sales

>65% of Revenue was Generated by the Oral Formulations
NUZYRA®: As First-line Therapy
Targeted Patient Profiles

CABP
- Alternative to fluoroquinolone + β-lactam allergic
- Prior C. difficile infection

ABSSSI
- Suspected polymicrobial infection + β-lactam / sulfa allergic
- Renal insufficiency + SSRI
U.S. Hospital Skin & Pneumonia Market by 2028
Potential $3.3 Billion Addressable Opportunity for NUZYRA

**ABSSSI Opportunity:** 1st line treatment (Tx) failure, resistance suspected

3,300K(1) Hospitalized ABSSSI

~12%(1) Fail broad sp + MRSA cov = ~400k patients

× $3,000(3) = $1.2B opportunity

**CABP Opportunity:** 1st line Tx failure, resistance suspected

3,400K(1) Hospitalized CABP

~14%(2) Fail FQ or ceph+macrolide = ~490k patients

× $3,000(3) = $1.4B opportunity

---

(1) AMR data (2015): Of patients never receiving confirmed pathogen and getting potential MRSA coverage, 30%+ switch therapies (i.e., to another empiric therapy)

(2) Primary market research (est 18% of hospitalized CABP patients & 16.5% of community CABP patients are “high-risk” and suspected/confirmed to have a resistant pathogen)

(3) Cost per course based on health outcome analysis, 10 day course of therapy and cost of branded Zyvox therapy as an analogue
ABSSSI Opportunity: Initial treatment (Tx) failure, resistance suspected

- 5% (1) Fail broad sp + MRSA cov
- 735k cases
- $2,100 (3)
- $1.5B opportunity

CABP Opportunity: Fluoroquinolone failure, resistance suspected

- 6% (2) Fail fluoroquinolone
- 510k cases
- $2,100 (3)
- $1.1B opportunity

Footnotes:
(1) 20% est failures (based on hospital patterns) of first line MRSA treatment
(2) Primary market research (est 18% of hospitalized CABP patients & 16.5% of community CABP patients are “high-risk” and suspected/confirmed to have a resistant pathogen)
(3) Cost per course based on health outcome analysis, 7 day course of therapy and cost of branded Zyvox therapy as an analogue

Paratek estimates based on 2015 AMR data current treatment failure rates and a Zyvox 2015 pricing analogue
Important Demography:

- Together with influenza, CABP is currently the eighth leading cause of death in the U.S.\(^2\)
  - All cause 30-day mortality in hospitalized patients exceeds 10\(^\%\)\(^3\)-\(^5\)

- Hospitalization Rates in CABP are increased in older populations and in populations with certain co-morbid conditions, including COPD, CHF, and diabetes\(^6\)

CABP Pathogens\(^1\)

- S. pneumoniae
- S. aureus
- Enterobacteriaceae
- Other
- Mycoplasma pneumonia
- Legionella pneumophila
- H. influenzae

NUZYRA® Opportunities Beyond Current CABP Treatment Options: Addressing Limited Formulations with Safety Concerns

IDSA/ATS CABP Guideline:¹

Inpatient Rx Non-ICU

Beta-lactam + Macrolide

OR

Respiratory Fluoroquinolone

NUZYRA as First-Line Therapy:
Monotherapy, IV + Oral, when β-lactam/Macrolide or Quinolones are not options

Important Demography:

- Incidence of skin infections requiring hospitalization has substantially increased since the 2000’s\(^1,3\)

- ~ 870,000 admissions, 6.3M office visits, and 3.4M emergency department visits annually\(^4\)

- Underlying co-morbidities including diabetes and vascular disease can complicate management and antibiotic selection\(^5\)

Common Skin Pathogens\(^2\):

- MRSA
- Beta-hemolytic Streptococci
- Other Gram positive
- Anaerobe
- MSSA
- Other Streptococci
- Gram negative

NUZYRA® Opportunities Beyond Today’s Skin Treatment Options:
Addressing Limited Formulations with Safety Concerns

IDSA SSTI Guideline:

Inpatient Rx

Vancomycin +/- Pip/Tazo OR Zyvox +/- Pip/Tazo

NUZYRA as First-Line Therapy:
Monotherapy, IV + Oral, when Vancomycin/Zyvox +/- Pip/Tazo are not options

SSTI: Skin and Soft Tissue Infection, pip/tazo: piperacillin/tazobactam
Success Begins in the Hospital with Specialists
Institutional Access [“Go-Home” Strategy] and Demand Generation

Institutional Access + Demand Generation = Adoption

Formulary/Protocols Specialty Access & Buying

Influencers:
- IDs
- PharmD IDs
- Pharmacy Directors
- Microbiologists

Trial & Usage

Prescribers:
- IDs
- ER
- Hospitalists
- Pulmonologists

4/20/2020 23
Focused Launch Targeting Early Adopters

Launch in **February 2019** with **40 Sales Specialists**

- In Q3 2019, *expanded the sales force size to ~50 representatives*; will continue to judiciously add representatives throughout the balance of 2020 toward target of ~60

- **Focusing on ‘Early Adopting’** HCPs in ‘high value’ institutions (~600), will drive institutional access

- **Inside Sales Team supplements** efforts of Sales Specialists to broaden outreach

**Physician Segments**

- Early Adopter
  - Focused on broad spectrum and efficacy
  - Convenient features with IV to oral transition
  - Wait for Early Adopters to trial and use
  - Guideline and protocol driven

- Late Adopter
Ensure Seamless Transition from Hospital to Home

Continuity of Care Providing Access to Oral NUZYRA

**Continuity of Care**
- Prevent gap in care
- Sample / Bridge Program (as needed)

**Distribution Network**
- IV Formulation
  - National & Regional Distributors
- Oral Formulation
  - National & Regional Pharmacies
  - Program allows for oral formulation pick-up at retail locations or home delivery

**Reimbursement Support Services**

**Affordability Program**

**HUB Services**
- Enables effective discharge process
NUZYRA Life-Cycle Opportunity
Non-Tuberculous Mycobacterium Abscessus
NTM (M. abscessus) Rare Disease Opportunity
Potential $740 Million Addressable Market by 2028

6,300\(^{(1)}\)
M. abscessus yearly incidence

\(\rightarrow\)

\(>75\%\)^{(2)}
Fail triple generic Tx

\(~4,760\) patients

\(\times\)

\$155,420\(^{(3)}\)
per course

\(=\)

\$740M opportunity

\(=\)

\(\text{No approved therapies}\)

\(\text{Triple antibiotic therapy approaches are most common}\)

\(\text{Most Agents IV only}\)

\(\text{Nearly 80% failure rate with existing treatments}\)

\(\text{Long treatment duration typically 12-24 months}\)


\(^{(2)}\) Am J Respir Crit Care Med Vol 175. pp 367-416, 2007 ("no antibiotic regimens based on in vitro susceptibilities has been shown to produce long-term sputum conversion for patients with M. abscessus lung disease. The goal of 12 months of negative sputum cultures while on therapy may be reasonable, but there is no medication strategy to reliably achieve this goal")

\(^{(3)}\) 135 DOT in initial Tx to clear infection. Assuming success, avg 274 DOT (recommendation for 12mo of Tx after 3 negative cultures; assumes 75% compliance); $380 avg cost/day - blend of IV ($345/DOT) and Oral ($395/DOT)
Nontuberculous mycobacteria or “NTM”
Potential Opportunity with Omadacycline

Prevalence of All NTM

- 70,000 – 80,000 NTM cases in the U.S.
- 5-10% year-over-year increase in prevalence
- 5 year all-cause mortality 40%

Paratek focused on subset of NTM patients (~6,000-8,000) with *Mycobacterium abscessus*
  - Currently, no approved antibiotic therapies

Radiographic Hallmarks

Pulmonary Pharmacokinetics of Omadacycline and Tigecycline

NUZYRA Published Data in Anthrax
Compelling in vitro Activity and in vivo Efficacy

**Potent in vitro activity**

* B. anthracis

<table>
<thead>
<tr>
<th>MIC Value (mcg/mL)</th>
<th># Isolates</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;0.03</td>
<td>5</td>
</tr>
<tr>
<td>0.03</td>
<td>15</td>
</tr>
<tr>
<td>0.06</td>
<td>20</td>
</tr>
<tr>
<td>0.12</td>
<td>25</td>
</tr>
<tr>
<td>0.25</td>
<td>15</td>
</tr>
<tr>
<td>0.5</td>
<td>10</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

- Omadacycline
- Ciprofloxacin
- Tetracycline
- Doxycycline

**Potent in vivo efficacy**

- PBS Vehicle
- Ciprofloxacin 30 mg/kg q12h
- Doxycycline 10 mg/kg q12h
- Omadacycline 20 mg/kg q12h
- Omadacycline 10 mg/kg q12h
- Omadacycline 5 mg/kg q12h

- Whole Body Aerosol B. anthracis (Ames spores)
  - 9.8 x LD50s
  - 24h post-challenge (PEP)
  - MIC of OMC 50.03 μg/mL

- Antimicrobial Agents and Chemotherapy; May 2017
- ASM Biodefense; February 25-27, 2013
IP Horizon & Balance Sheet
NUZYRA® IP Protection and Market Exclusivity
GAIN Act Ensures 10 Yrs.’ Market Exclusivity and Patent Term Extension protection to at least 2030

IP Protection:
- Key Composition of Matter Patent (U.S. 7,553,828) Expiring June 2023
- Key Method of Use Patent (U.S. 9,265,740) Expiring March 2029

Regulatory Protection:
- In Parallel -
  - U.S. Data Exclusivity: Hatch-Waxman
  - GAIN Act Extension
    - 5-years
    - 5-years

Follow-On IP Protection:
Issued Patents and Pending Applications Covering Salts, Polymorphs, Formulations, Methods of Use, Methods of Manufacture, Modes of Administration, and Dosage Regimens
## Strong Balance Sheet and Cash Runway Guidance 
as of December 31, 2019

<table>
<thead>
<tr>
<th>Key Metrics (unaudited)</th>
<th>12/31/19 balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Cash, Cash Equivalents, and Marketable Securities</td>
<td>$215.4 million</td>
</tr>
<tr>
<td>Long-term Debt Obligation(^3)</td>
<td>$260.7 million</td>
</tr>
<tr>
<td>Basic Shares Outstanding</td>
<td>39,827,749</td>
</tr>
<tr>
<td>Total Potentially Dilutive Securities(^1)</td>
<td>16,821,484</td>
</tr>
</tbody>
</table>

**Cash runway projected through 2023**

with a potential pathway to cash flow breakeven\(^2\)

---

1. Includes common stock issuable under the April 2018 convertible debt offering, options, restricted share units, warrants, and for our ESPP
2. Assumes estimated NUZYRA US Product revenue, BARDA reimbursement of activities related to Project Bioshield contract. Company will be able to fund all company operating expenses, anticipated capital expenditures, and debt service, including repayment in full of the Hercules Loan and Security Agreement under its existing terms
3. Includes $30.6 million of debt secured by and repaid based upon royalties on U.S. SEYSARA sales.

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Paratek Investment Highlights

**NUZYRA®: Potential Blockbuster Antibiotic in Both Hospital and Community Settings**

### Potential Blockbuster Antibiotic with NUZYRA®
- 1st FDA approved and launched *once-daily oral & IV antibiotic* to treat both CABP and ABSSSI in nearly 20 years*
- > $5 Billion Potential Addressable U.S. Market**

### Capital Efficient Commercial Model
- Significant Value Proposition = Hospitalization Minimization
- Hospital Promotion with no other Branded Once-Daily Broad-spectrum Oral + IV Competitors

### BARDA Project BioShield
- BARDA Project BioShield contract awarded to for development of NUZYRA for pulmonary anthrax
- Valued up to $285 million

### Additional Pipeline Potential
- Life-cycle opportunities: Oral-Only CABP, Nontuberculous mycobacteria, Pulmonary Anthrax, Prostatitis, Rickettsial Disease
- Additional Biodefense opportunities beyond pulmonary anthrax

### Strong Balance Sheet
- Cash runway projected through 2023 with a potential pathway to cash flow breakeven***

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(*) NUZYRA U.S. FDA-approved in October 2018
(**) Paratek estimates based on 2015 AMR data current treatment failure rates and a Zyvox 2015 pricing analogue and opportunity reflective of current U.S. label
(***) Assumes estimated NUZYRA US Product revenue, BARDA reimbursement of activities related to Project Bioshield contract. Company will be able to fund all company operating expenses, anticipated capital expenditures, and debt service, including repayment in full of the Hercules Loan and Security Agreement under its existing terms