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Investment
Summary

Investment Summary



An attractive industry, above market organic growth, and $M \mathcal{C}A$ opportunities make for a "rad" investment

Key Investment Highlights



Outpatient Radiology Benefits from Multiple Secular Tailwinds

- While radiology is a ~GDP growth industry, a broad shift from inpatient to outpatient providers is underway
- Outpatient imaging is cheaper for payors and more convenient for customers; insurance giants are forcing hospitals to create or partner with outpatient imaging providers
- Imaging volumes growing with aging population + rise of preventative medicine; pricing remains somewhat flat



Industry Leading Position Supports Above Market Organic Growth

- RadNet captures market organic volume growth from existing referral channels and can also takes share by opening new clinics in geographic whitespaces (i.e rural areas that have no existing imaging capabilities)
- RadNet's investments in higher quality machinery have allowed the company to compound prices at \sim 4% p.a. historically, although the additional investments have resulted in margins compounding at \sim 1% p.a.



RadNet is a Natural Consolidator in its Geographies

- RadNet's size, operating leverage, superior utilization rates, and higher margins make it the natural consolidator in the seven states where the company already has ~20% market share; average synergized entry multiple is 4x
- Consolidation increases RadNet's bargaining power with hospitals and insurers, supporting price growth, and allows the company to better execute on higher margin value-based care contracts



II.

Business Overview

Company Overview



RadNet is the industry leader in the US imaging industry

Business Overview

- RadNet operates 350 outpatient radiology imaging facilities throughout the US through **independent** and **joint-venture** facilities
- Joint-ventures are contractual agreements with hospitals, where RadNet operates and hires staff while using hospital facilities
 - 25% of RDNT's total facilities are under JV agreements, with management looking to increase that number to 50% in the next 5-7 years

Key Financials

Ticker	NASDAQ: RDNT
Share Price	\$26.85
Market Capitalization	\$1.51B
Enterprise Value	\$2.85B
EV/EBITDA	9.4x

Geographical Focus

A focus on regional dominance in population-dense urban cities and untapped rural areas maximizes market share capture, driving high operating leverage

Portfolio of Services

52 Week Stock Chart





Imaging



Computed Tomography



Positron
Emission
Tomography



X-Ray



Ultrasound



Mammography



Fluoroscopy

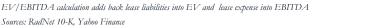


Nuclear Medicine

Software Services



AI-powered interpretation and distribution of digital images

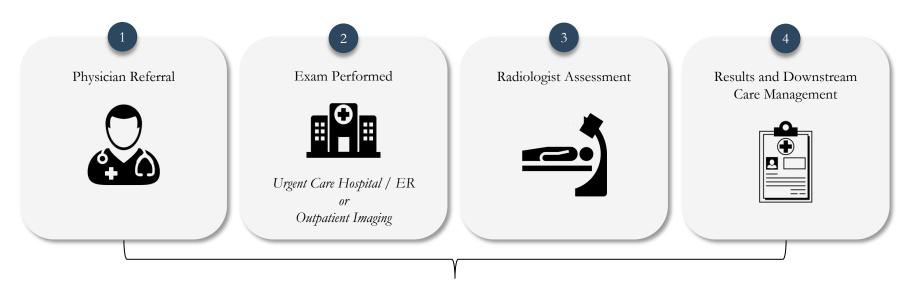




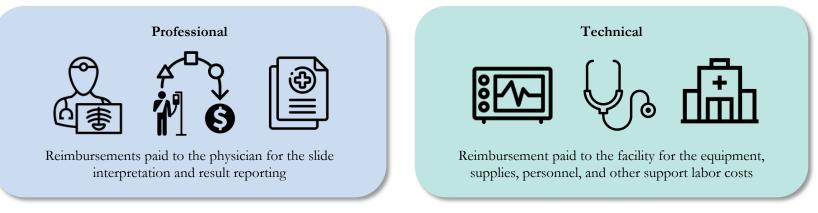
Overview of The Imaging Process



Patients are acquired via physician referrals dependent on scale, density, and network relationships



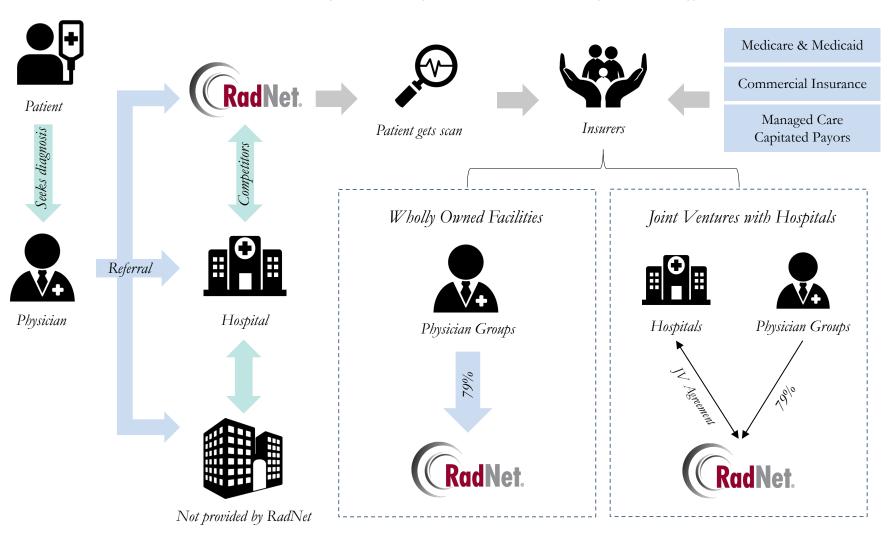
Radiology services are reimbursed in 2 components:



RadNet Value Chain



RadNet's value chain taps into a network of hospital referrals and cost savings from back office aggregation



III.

Internal Analysis

Internal Analysis: Superior Operating Leverage



High operating leverage results in strong margin profiles

Operating Leverage Makes a Difference

Rollup Strategy:

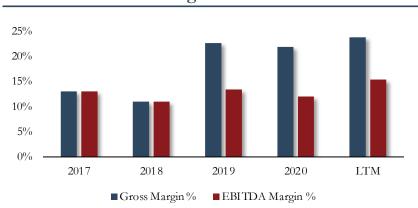
Maximizes profits due to high operating leverage, particularly in population dense regional areas

Shared Fixed Costs:

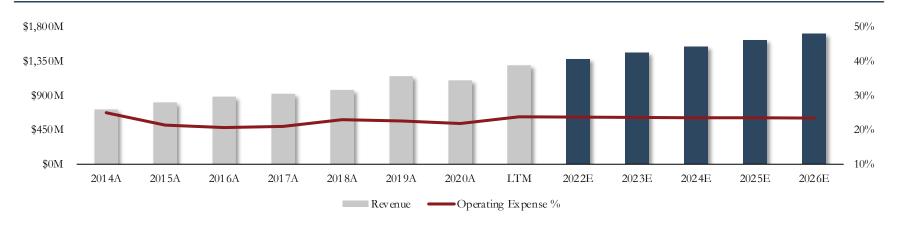
Facility maintenance, imaging medical instruments, and backoffice expenses for HR, legal, and accounting matters

RadNet's scale provides continued opportunity for margin expansion through **improved utilization** in such a **high fixed-cost industry**

Margin Profile



Revenue vs Operating Expense





Internal Analysis: Efficiency Over Competitors

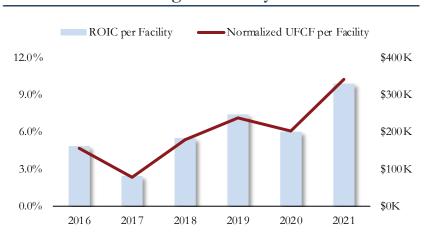


Management's shift to capitated contracts reduces payment risks and improves operating margins

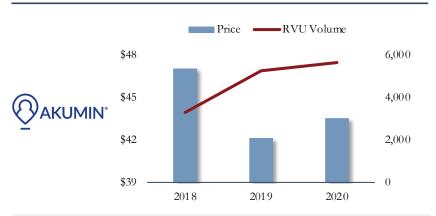
Facility Acquisitions



Increasing Per Facility ROIC



Price / Volume Trends: RDNT vs Competition



Despite rising volume, Akumin's price per scan is declining, signifying low pricing power and lack of technical reinvestment

In comparison, RadNet's larger scale and leverage in higher-priced imaging subsectors allow their price per scan to grow





IV.

External Analysis

External Analysis: Tailwinds in Imaging Segments



Societal and technological advancements in imaging segments imply growth serviceable market

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Increased **awareness & desire** for periodic breast and cervical cancer monitoring

In 2018, **13.5M mammograms** were performed in the US

Ultrasound

Rise of non-invasive, pocket-sized, **point-of- care (PoC)** ultrasounds

Integration of **AI algorithms** to improve accuracy through **anatomy color-coding**

MRI

Volume decline in **open MRIs** due to the rise of portable/wheelable machines

2020: FDA cleared world's **first portable MRI** scanner; reduces cost by **20x**

7.5% CAGR throughout 2021-2026

\$10.8B by 2031 with a 5.7% CAGR

4.6% CAGR throughout 2021-2028

CT

Integration of **deep learning** to improve image quality for **quicker** readings

Development of **compact CT machinery**; cheaper and portable

Fluoroscopy

Rising burden of cardiovascular disease in the US; 1.2M coronary cases in 2020

3D printed models to improve safety for radiologists; mitigates **radiation risk**

Nuclear Medicine

Improvements in nuclear medicine **education** through **government funding**

July 2019: Medicare Diagnostic Radiopharmaceutical Payment Equity Act

\$3.1B by 2026 with a 4.5% CAGR

\$892.8M by 2026 with a 2.8% CAGR

\$10.3B by 2026 with a 10.4% CAGR

Other sub-specialties are growing at a 1-2% CAGR throughout the next 5-7 years



External Analysis: Untapped Growth Opportunities



The US radiology industry is consolidating which is ideal for RadNet's acquisition strategy

Competitive Landscape Dynamics

Large Outpatient Radiology Facility Consolidators









\$12B market size; difficult to penetrate

In-House Hospital Radiology Centers



Diminishing market; large insurers are no longer reimbursing scans performed in hospitals

\$36B market size; untouchable

Small Regional "Mom-and-Pop" Shops



HUDSON VALLEY RADIOLOGY ASSOCIATES



\$12B market size; large **M&A** whitespace

Radiology Industry Characteristics

High Fragmentation

The top 100 practices represent <20% of the total market

RDNT is the largest player, occupying **4.8% share**

RDNT has **advantages of scale** in a heavily fragmented industry

Accelerating Pace of Consolidation

Financial stress on small practices has accelerated consolidation

50% of practices have <10
radiologists and struggle to
manage IT and hospital expectation
costs

RDNT is a **natural consolidator** well-positioned to take advantage

Pricing Pressures

A big player can drive more leverage to result in **2x** the **profitability**

Despite industry prices trending sideways, RDNT has been able to consistently drive theirs up

RDNT benefits from their scale & size for true **pricing power**

Technology Synergies

The integration of the **cloud** and **AI** with radiology allows for cost savings, population health management, and improved preventative models

RDNT's AI investments will improve operational efficiency



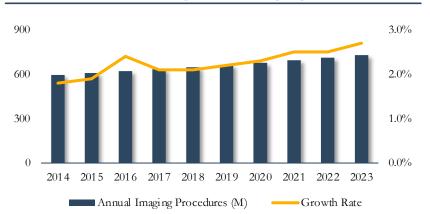
| V.
| Investment Theses

Thesis I: Growth Opportunities in Outpatient Radiology

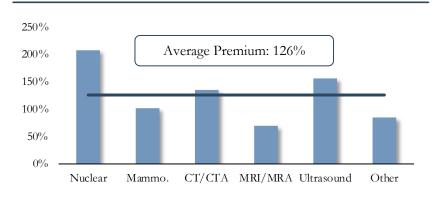


\$60B US radiology imaging market is growing with a strong push for outpatient models over traditional hospital systems

Projected US Diagnostic Imaging Revenue



Hospital Prices as % of Free-Standing Imaging



The Push for Outsourcing

Policy Changes from Insurance Providers Anthem. — United Healthcare — Cigna 42M 26M 550K Restricting outpatient imaging within hospitals 85-90% of hospitals outsource radiology

Management Point-of-View								
Advantages of Scale	More meaningful operating leverage with multi- modality facilities, back-office, and negotiation							
Move Away From Hospitals	Hospitals do not have the scale for a fully-staffed radiology team with sub-specialty expertise							
Patient Pipeline Stability	JVs with hospitals allow outpatient clinics to capture 100% patient market share in specific regions							

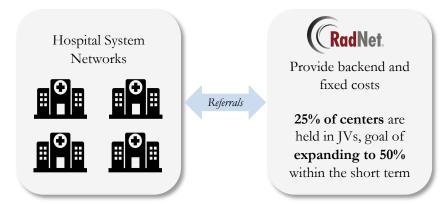


Thesis I: Growth Opportunities in Outpatient Radiology



Leveraging regional hospital networks efficiently captures a fragmented market that is crucial for referrals

Market Penetration Via Joint Ventures



Combining Forces with Competitors

A Seat at the Negotiation Table

Hospital networks have the scale to **negotiate reimbursement terms**, payment methods, and service bunding – the **median premium increase is 13-17%** between broad and narrow networks

Protecting Patient Volume

Customer acquisition synergies arise as RadNet relies on **physician** referrals to drive volume. JV networks encompass a geographical network of hospitals, driving **same-center volume to over 2%**

Accelerated Market Penetration through Bundled Growth

JV Network	Region	Hospitals in Network	Total Hospitals in Region	Penetration
Memorial Care	Orange County	4	28	14%
Cedars Sinai Healthcare System	Los Angeles	4	40	10%
RWJBarnabas	New Jersey	11	113	10%
Lifebridge Health	Connecticut	4	41	10%

JVs acquire existing RadNet facilities to add to hospital networks

Expand contracts to other facilities within JV hospital networks

Large-scale customer acquisition via bundled hospitals Expand JV contracts within the 637 health systems within the US



Thesis I: Growth Opportunities in Outpatient Radiology



A focus on expanding internal technology and monetizing developments translates to higher efficiency

Investments in Technology

Radiology Information System

Back-end and operational efficiency for scheduling, billing, collections, image management, marketing, accounting, finance, and HR.

Saige-Q

FDA Approved Mammography AI that detects cancer up to 2-years earlier.

Improves cost effectiveness through growing volume while creating new revenue streams from selling to insurance.

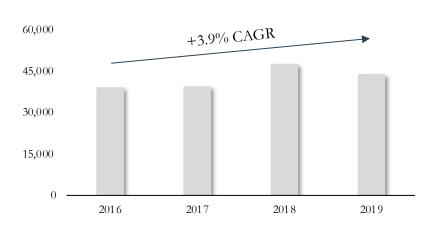
eRAD: Cloud-Based Architecture

Improves radiologist volume capacity and reduces scan time - results in higher utilization rate per machine and volume growth without additional CapEx spend.

Procedures per Machine



Procedures per Radiologist

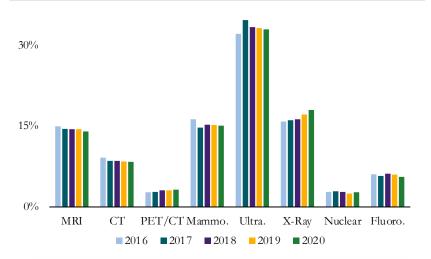






RadNet has grown pricing at 400-450 bps p.a. without mix shift over the last 4 years

Units as a Percentage of Total Machines



Commentary:

Although RadNet has expanded their overall number of total machines over the years, the mix has not changed

Each clinic is an independent unit that offers the same modalities as clinics in another geography; no need for variance among clinics

We do not expect meaningful machinery mix shift going forward

Pricing per Procedure



Commentary:

Since mix is constant, growth in pricing per procedure can be attributed to price increases

Not all price gains flow into margin expansion; price gains driven by growth CapEx in higher quality machines result in greater D&A

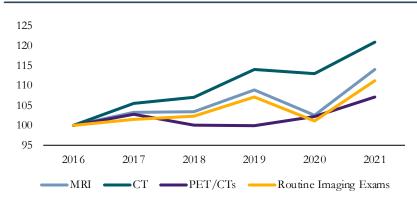
Margins have expanded ~200bps over last 4 years − a trend that we expect to continue seeing





We project 1% of true pricing growth, and 3% p.a. pricing growth that is offset by higher D&A

Same Store Exam Growth (2016 = 100)



Prices Will Continue To Rise

Current CapEx levels include both (1) maintenance and (2) growth CapEx, the latter which drives **higher prices per scan**

Yet the street assumes all CapEx is maintenance and **does not give RadNet credit for reinvestment** through growth CapEx

We do not project above street margin expansion, but rather, model that above-market pricing increases of ~3% p.a. continue as RadNet continues to invest in new & improved machinery

Commentary on CapEx

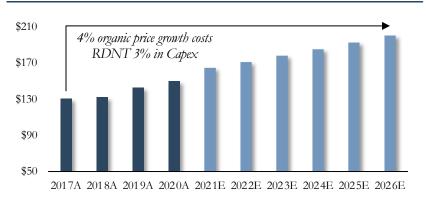
Historically, CapEx has grown in line with the number of facilities with each facility requiring the same equipment with same useful life

2020 CapEx was ~25% higher due to Covid-19 related expenditures and integration of large acquisitions

<u>Assumption</u>: CapEx grows at ~6% p.a. due to ~4% increase in clinics through M&A and ~2% inflation of equipment cost

Final Projection: Model ~\$230K per clinic in forward CapEx

Future Price Driven by CapEx and Organic Growth







Driven by continued push into outpatient clinics, RadNet's business model ensures growth in volume

Three Ways to Grow Volume

Hospital Referrals

Referrals taken from non-JV hospitals, applicable in areas where hospitals currently offer in-house imaging

Difficult route to take, as hospitals with builtin radiology centers will view RadNet's outpatient clinics as competition

JVs in New Areas

New joint venture partnerships with large hospitals in new untapped areas

Potential new geographies for expansion: (1) Midwest states with a sizable aging population and (2) Large metropolises in already-tapped-into states

De Novo Clinics

The acquisition of de novo clinics located in geographical whitespaces

Ideal locations: rural areas with limited competition, aging populations, and radiology under-penetration

Our Viewpoint on Volume

Organic Growth of ~1.5%: Driven by continued increases in samestore volume as a result of stronger JV networks, societal preference for more frequent checkups, and organic TAM growth <u>De Novo Clinic Growth of ~1.0%:</u> Driven by RadNet's continued geographical expansion into new rural areas in states where they already possess operational dominance

<u>Unmodelled Upside</u>: The trend of radiology imaging moving out of hospitals has been accelerated by major US insurers, providing a ripe opportunity for outpatient radiology facility consolidators like RadNet

In 2017, health insurer Anthem stated they would no longer allow patients to get MRIs or CT scans at hospital-owned facilities in 13 states, requiring them to use independent imaging centers instead → Other major US insurers are expected to soon follow this policy





RadNet historical EBITDA bridges show consistent above market price and volume growth

2-Year Growth

'19-'21 EBITDA Bridge		
	<u>2</u>	v CAGR
'19 EBITDA	\$154.5	
'19-'21 SS Volume Growth	5.4%	2.6%
SS Volume EBITDA Contribution	\$8.4	
'19-21 Pricing per Procedure Growth	8.3%	4.1%
Pricing EBITDA Contribution	\$12.8	
2021E Organic EBITDA	\$175.7	
'19-'21 M&A Total Spend	\$149.7	
Acquired EBITDA (4x synergized)	\$37.4	
2021E EBITDA (Bridge Output)	\$213.2	
2021E EBITDA (CIQ Estimate)	\$213.3	

4-Year Growth

'17-'21 EBITDA Bridge		
	4	y CAGR
'17 EBITDA	\$119.8	
'17-'21 SS Volume Growth	9.7%	2.4%
SS Volume EBITDA Contribution	\$11.7	
'17-21 Pricing per Procedure Growth	18.7%	4.4%
Pricing EBITDA Contribution	\$22.4	
2021E Organic EBITDA	\$153.9	
'17-'21 M&A Total Spend	\$250.5	
Acquired EBITDA (4x synergized)	\$62.6	
2021E EBITDA (Bridge Output)	\$216.5	
2021E EBITDA (CIQ Estimate)	\$213.3	

Commentary:

The pace of price, volume, and M&A has been consistent over the years Organic growth drives about 1/3 of growth, with pricing growth not fully flowing into bottom margins



Thesis III: RadNet is a Natural Consolidator



RadNet's size, operating scale, leading margins, and historical M&A success have made it a natural buyer

Regional Dominance

State	AZ	CA	DE	FL	MD	NJ	NY
Number of RadNet Facilities	7	148	8	3	53	24	90
Outpatient Radiology Clinics	200	1249	30	599	150	200	250
Market Share	3.5%	11.9%	26.7%	0.5%	35.4%	12.0%	36.0%



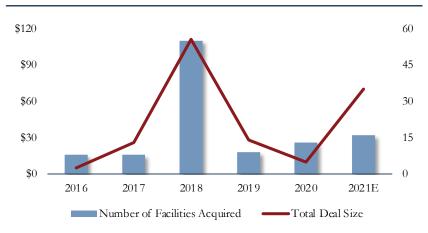
Lack of competition from other large radiology platforms in 7 state segments

Ongoing pricing pressures

Physicians' desire to sell their business

Consolidation is the natural next step for the radiology industry

Historical M&A



Expansion in Concentrated Geographies

- RadNet focuses on concentrating M&A in select states to drive up market share and establish regional pricing power
- High geographical market share allows for higher operating efficiencies and regional relationships with insurers, hospitals, and referring physicians
- Concentrating M&A therefore allows for higher revenue and margin growth across all facilities within a specific geographical region



Valuation

Intrinsic Valuation: DCF Outcome



A 4-year investment has a \sim 95% implied upside (at exit vs. today) with \sim 14-19% IRR in the base case

Discounted Cash Flow

DCF	- 4 Year Proj	jection		Implied Upside Sensitivity				Terminal Year Breakout			
	Bear Case	Base Case	Bull Case							Revenue	2,769,837
Enterprise Value	2,347,690	3,363,230	4,354,447		4.0%	6.0%	8.0%	10.0%	12.0%	Margin	27%
Less: Debt	(1,381,239)	(1,381,239)	(1,381,239)	8.0x	\$35.19	\$30.21	\$25.75	\$21.74	\$18.13	Gross Profit	747,856
Less: Minority Interest	(114,542)	(114,542)	(114,542)	9.0x	\$41.07	\$35.55	\$30.61	\$26.18	\$22.18	SG&A	(182,330)
Add: Cash	923,695	923,695	923,695	10.0x	\$46.94	\$40.89	\$35.47	\$30.61	\$26.24	SBC	(26,571)
Equity Value	1,775,604	2,791,144	3,782,361	11.0x	\$52.81	\$46.23	\$40.33	\$35.05	\$30.29	D&A	(184,257)
Shares	53,817.80	53,817.80	53,817.80	12.0x	\$58.68	\$51.56	\$45.20	\$39.48	\$34.34	EBITDA	455,530
Share Price 2025E	\$32.99	\$51.86	\$70.28							Margin	16%
Implied Upside	(10%)	47%	108%							-	
4-Year IRR	4%	14%	21%								

Multiples

	EV/EBIT	'DA		Key Drivers							
	Bear Case	Base Case	Bull Case		2021E	2022E	2023E	2024E	2025E	2026E	
EBITDA	278,434	371,963	455,530	1) Organic Volume	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	
Multiple	8.0x	9.0x	10.0x	Rationale: RadNet has historically growth organic	c volume a	at ~2.5%	when c	onsiderir	ng SSS gr	owth	
Enterprise Value	2,227,475	3,347,670	4,555,302	and ~5 de novos p.a.							
Net Debt	457,544	457,544	457,544	2) True Pricing Power	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	
Equity Value	1,769,931	2,890,126	4,097,758	,							
Shares	53,817.80	53,817.80	53,817.80	Rationale: RadNet has been able to consistently in	nciease pi	1Ce by 47	o per yea	ai, willi	i /o truiy		
Share Price 2025E	\$32.89	\$53.70	\$76.14	flowing into profit							
Implied Upside	(10%)	42%	92%	3) M&A Spend	5.0%	4.8%	4.6%	4.4%	4.2%	4.0%	
4-Year IRR	5%	19%	30%	Rationale: As a consolidator, RadNet has consist	ently incre	ased rev	enue spe	nd year-	over-yea	r	

VII.
Catalysts

Catalysts



Several key benchmarks are expected to increase share price in the near and long-term future

Margin Expansion over NTM

- Shift over to **capitated contracts** reduces payment risks, creates supply advantages through long-term contracts, and improves operating margins
- Effective utilization management shifts the focus away from volume while benefitting cost margins

JV and M&A
Pipeline
Materialization

- Joint ventures grow to compose 50% of RadNet's centers in the next 3-5 years to take up a larger share of the 637 healthcare systems in the US
- RadNet acquires more small players to convert **new radiologists** into joint-venture hospital systems

Large Value-Based Contract Wins Large joint-venture contracts with hospitals would improve regional penetration and increase margins
due to lower costs from savings in capital expenditure

Accelerated Revenue Growth

- Continuous price/volume increases due to RadNet's pricing power will drive revenue growth
- Increased market share capture through acquisitions of smaller players is expected to further drive top-line growth

Geographical Expansion

• Expansion into **new states** in the long term would expand RadNet's market share, allowing for greater **scale advantages** and further increased **pricing power**

Further efforts by management to expand into higher margin JVs and new geographies will boost operational efficiency in the medium- to long-term, causing our thesis and growth projections to materialize

Western Investment Club

Sources: RadNet 10-K, Bloomberg

Short-Lerm

Medium-Term

VIII.

Risks & Mitigations

Risks & Mitigations



Despite structural risks, industry tailwinds point favorably towards RadNet's upside

Competition from Hospitals and Physicians

High Utilization Rates on Capitated Contracts

US Healthcare Legislation

Cuts in Payor Coverage and Medicare

Risk Potential

- The market for diagnostic imaging services is highly competitive and RDNT must compete locally with other operators and hospitals
- Capitated contracts cover patients for a set period for a set price; if patients use more than the contract price, margins would compress
- Healthcare reform legislation can increase Medicaid coverage, shifting payor mix away from higher-margin private payor contracts
- RadNet's revenues largely depend on payor coverage and Medicare coverage; this means their revenues will be very sensitive to any changes in coverage

Mitigation

- Hospitals are becoming increasingly open to the possibility of joint-venture deals; RadNet expects 50% of their centres to have JV agreements in a few years
- Management continually reviews contracts with capitated payors; additionally, RadNet boasts great payor diversity, with capitated contracts representing only 13% of revenue
- Most private payor contracts are **short-term** and **regularly negotiated**; RadNet's status as a leading provider enables **favourable contract terms** and **negotiation power**
- Many Democratic lawmakers in Congress are currently pushing to expand the **health** insurance program so that it covers more services and procedures



IX.
Investment
Recommendation

Investment Recommendation



An attractive industry, above market organic growth, and $M \mathcal{C}A$ opportunities make for a "rad" investment

Key Investment Highlights



Outpatient Radiology Benefits from Multiple Secular Tailwinds

- While radiology is a ~GDP growth industry, a broad shift from inpatient to outpatient providers is underway
- Outpatient imaging is cheaper for payors and more convenient for customers; insurance giants are forcing hospitals to create or partner with outpatient imaging providers
- Imaging volumes growing with aging population + rise of preventative medicine; pricing remains somewhat flat



Industry Leading Position Supports Above Market Organic Growth

- RadNet captures market organic volume growth from existing referral channels and can also takes share by opening new clinics in geographic whitespaces (i.e rural areas that have no existing imaging capabilities)
- RadNet's investments in higher quality machinery have allowed the company to compound prices at \sim 4% p.a. historically, although the additional investments have resulted in margins compounding at \sim 1% p.a.



RadNet is a Natural Consolidator in its Geographies

- RadNet's size, operating leverage, superior utilization rates, and higher margins make it the natural consolidator in the seven states where the company already has ~20% market share; average synergized entry multiple is 4x
- Consolidation increases RadNet's bargaining power with hospitals and insurers, supporting price growth, and allows the company to better execute on higher margin value-based care contracts



X.
Appendix

Financial Model Assumptions



Assumptions											
Fractional years per period	2016A	2017A	2018A	2019A	2020A	2021E	2022E	2023E	2024E	2025E	2026E
Income Statement	2010/1	201711	2010/1	2017/1	202011	202112	20221	20231	202415	20231	202012
Effective Tax Rate %	40.12%	92.78%	14.06%	18.93%	18.56%	21.06%	21.06%	21.06%	21.06%	21.06%	21.06%
Gross Margin	21.34%	13.73%	11.82%	23.37%	23.02%	22.66%	26.00%	26.00%	27.00%	27.00%	26.00%
SG&A	8.39%	15.7570	-	9.23%	9.85%	7.15%	7.00%	7.00%	7.00%	7.00%	7.00%
SBC	0.66%	0.74%	0.79%	0.76%	1.13%	1.95%	0.70%	0.70%	0.70%	0.70%	0.70%
Equity Earnings from JV	1.10%	1.47%	1.17%	0.72%	0.72%	0.85%	1%	1.20%	1.30%	1.40%	1.50%
Working											
Capital											
A/R Days	67.8 Days	61.6 Days	55.7 Days	48.9 Days	43.1 Days	27.6 Days	5.0 Days				
A/P Days	21.5 Days	13.1 Days	28.9 Days	26.5 Days	30.3 Days	82.2 Days	40 Days	30 Days	37 Days	25 Days	25 Days
Prepaid Expense Days	135.8 Days	-	-	154.2 Days	111.3 Days	159.3 Days	80 Days	130 Days	130 Days	130 Days	130 Days
Depreciation Schedule											
Beginning PP&E		247,725	244,301	345,729	813,272	1,031,685	1,031,685	1,026,037	1,020,048	1,013,656	1,006,838
(+) CapEx	59,251	61,336	72,180	74,153	94,172	106,759	112,963	119,788	127,833	136,369	144,301
•							6%	6%	7%	7%	6%
(-) Depreciation	(66,610)	(66,796)	(72,899)	(80,607)	(86,795)	(98,069)	(118,611)	(125,777)	(134,224)	(143,188)	(151,516)
(-) Sale of PP&E	_	2,036	102,147	473,997	62,347	(8,690)	_	_	_	_	_
Ending PP&E	247,725	244,301	345,729	813,272	882,996	1,031,685	1,026,037	1,020,048	1,013,656	1,006,838	999,623
CapEx as % of Revenue	7%	7%	7%	6%	9%	8%	8%	7%	7%	7%	7%
Dep. as % of CapEx	112%	109%	101%	109%	92%	92%	105%	105%	105%	105%	105%
Acquisitions as % of Revenue	1%	3%	8%	2%	3%	6%	5%	5%	6%	6%	5%
Minority Int. Earnings/Equity	22%	24%	8%	11%	14%	17%	18%	18%	18%	18%	19%

UFCF Build



	UFCF Build											
	2016A	2017A	2018A	2019A	2020A	2021E	2022E	2023E	2024E	2025E	2026E	
_												
Revenue	884,535	922,186	975,146	1,154,179	1,098,104	1,353,844	1,486,351	1,640,932	1,813,230	2,005,432	2,220,013	
EBIT	42,124	53,013	34,700	73,880	45,407	85,655	147,145	167,321	208,121	235,529	244,149	
NOPAT	25,226	3,828	29,821	59,893	36,979	69,981	120,505	123,817	164,301	185,938	192,743	
Add: D&A	66,610	66,796	72,899	80,607	86,795	98,069	118,611	125,777	134,224	143,188	151,516	
Less: CapEx	(59,251)	(61,336)	(72,180)	(74,153)	(94,172)	(106,759)	(112,963)	(119,788)	(127,833)	(136,369)	(144,301)	
Less: Change in NWC	(26,457)	20,215	10,288	(11,019)	108,768	(3,595)	(28,698)	(16,850)	38,014	(29,690)	11,810	
UFCF	6,128	29,503	40,828	55,328	138,370	57,696	97,455	112,957	208,707	163,066	211,768	
PV of UFCF							91,989	98,724	168,897	122,187	146,926	

Historical Operational Efficiency



			N	Iargin				
	2016A	2017A	2018A	2019A	2020A	1Q21A	2Q21A	3Q21A
Revenue	884,535	922,186	975,146	1,154,179	1,098,104	321,567	333,961	332,690
COGS	(695,761)	(795,590)	(859,885)	(884,467)	(845,295)	(274,032)	(243,535)	(236,932)
SG&A	(74,214)	-	-	(106,495)	(108,202)	-	(31,139)	(31,403)
D&A	(66,610)	(66,796)	(72,899)	(80,607)	(86,795)	(22,656)	(24,011)	(24,606)
SBC	(5,826)	(6,787)	(7,662)	(8,730)	(12,405)	(8,248)	(8,897)	(4,421)
Total OpEx	(146,650)	(73,583)	(80,561)	(195,832)	(207,402)	(30,904)	(64,047)	(60,430)
EBIT	42,124	53,013	34,700	73,880	45,407	16,631	26,379	35,328
	2016A	2017A	2018A	2019A	2020A	1Q21A	2Q21A	3Q21A
SG&A Margin	8.39%	8.39%	8.39%	9.23%	9.85%	9.85%	9.32%	9.44%
D&A Margin	7.53%	7.24%	7.48%	6.98%	7.90%	7.05%	7.19%	7.40%
SBC Margin	0.66%	0.74%	0.79%	0.76%	1.13%	2.56%	2.66%	1.33%
EBIT Margin	5%	6%	4%	6%	4%	5%	8%	11%

