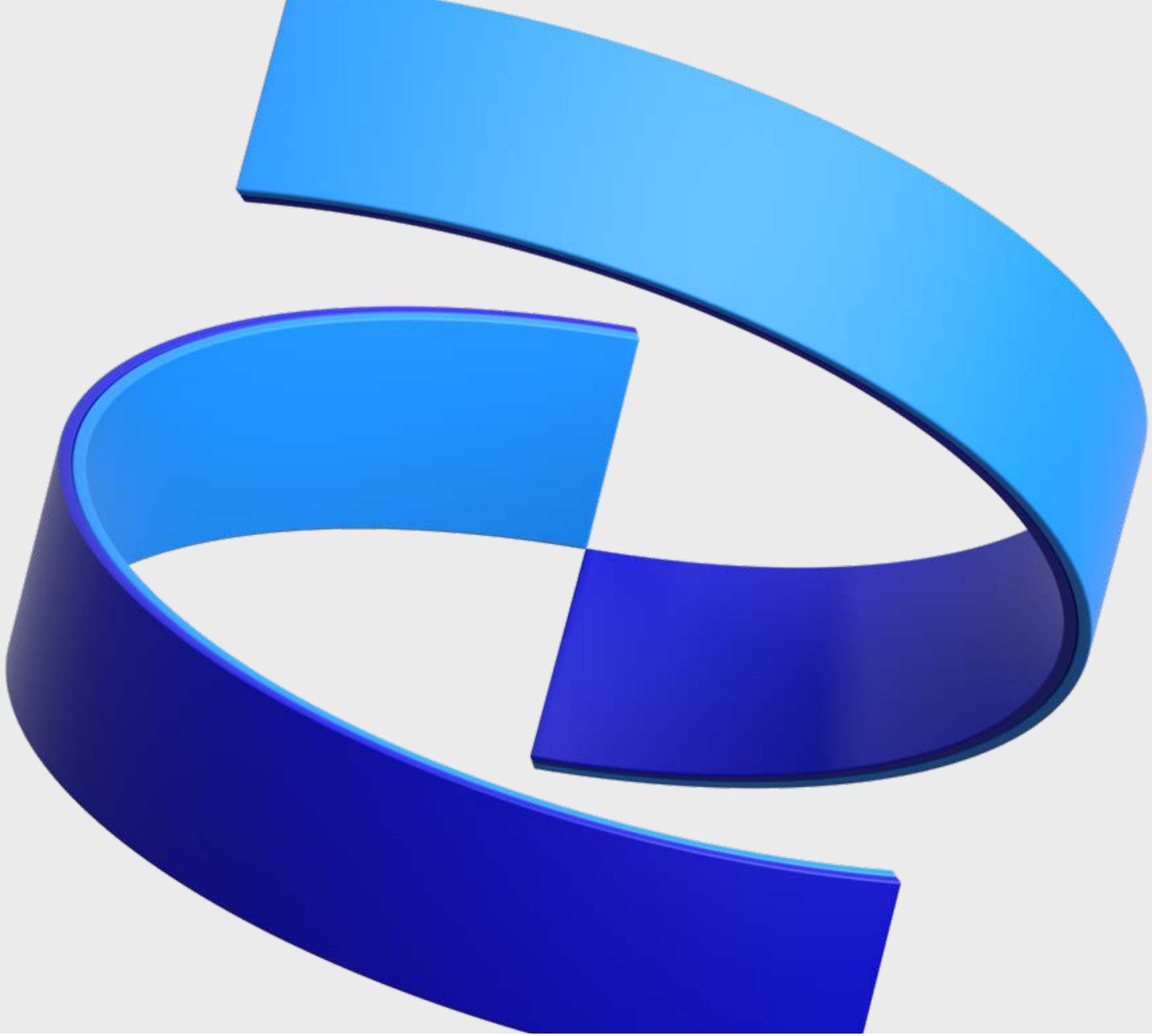
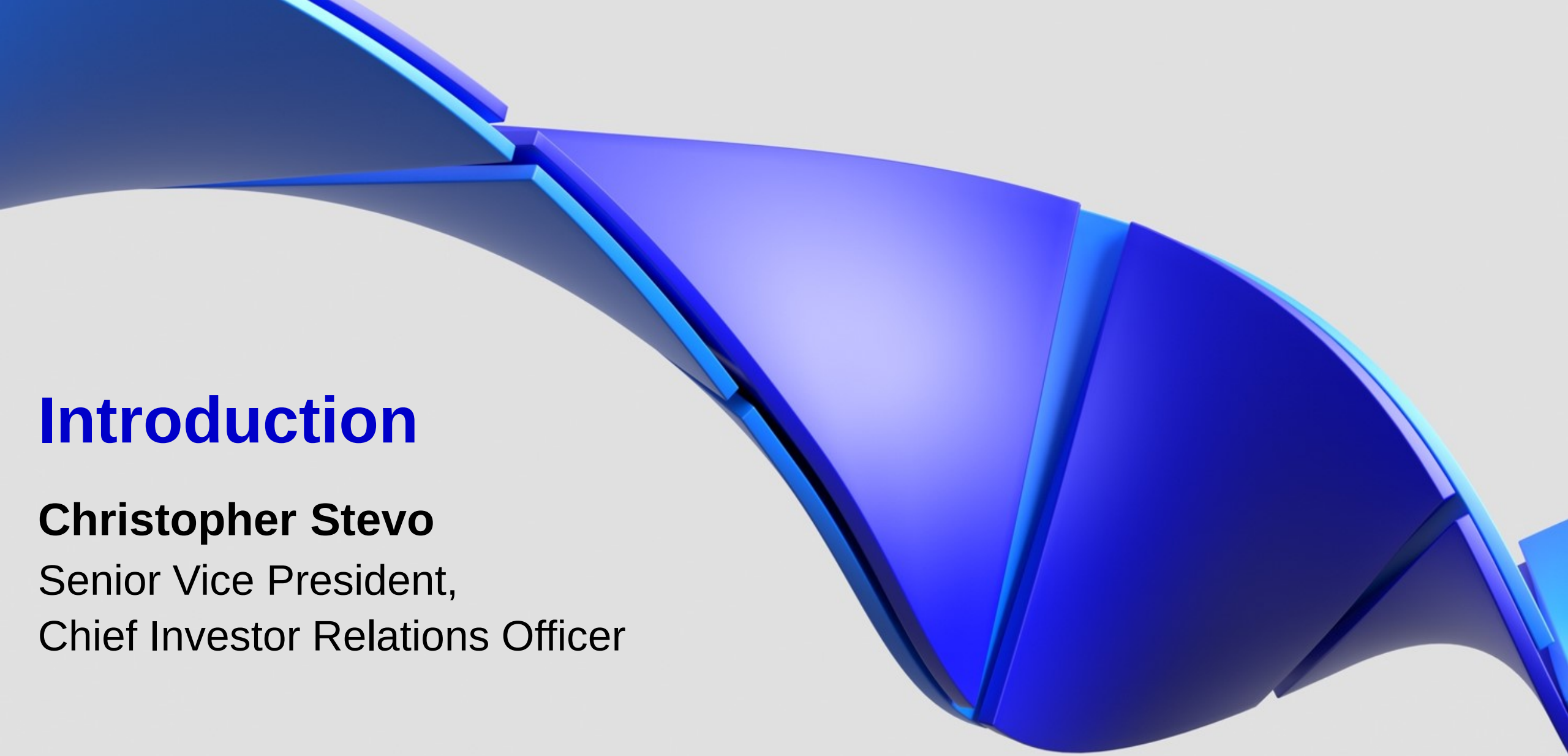
Fourth Quarter 2022 Earnings Teleconference

January 31, 2023



Pfizer

Breakthroughs that change patients' lives ®



Introduction

Christopher Stevo

Senior Vice President,

Chief Investor Relations Officer

Forward-Looking Statements and Non-GAAP Financial Information

- Our discussions during this conference call will include forward-looking statements that are subject to substantial risks and uncertainties that could cause actual results to differ materially from those expressed or implied by such statements. We include forward-looking statements about, among other topics, our anticipated operating and financial performance; reorganizations; business plans, strategy and prospects; our Environmental, Social and Governance (ESG) priorities, strategy and goals; expectations for our product pipeline, in-line products and product candidates, including anticipated regulatory submissions, data read-outs, study starts, approvals, launches, clinical trial results and other developing data, revenue contribution and projections, pricing and reimbursement, potential market dynamics and size, growth, performance, timing of exclusivity and potential benefits; strategic reviews, capital allocation objectives, dividends and share repurchases; plans for and prospects of our acquisitions, dispositions and other business development activities; and our ability to successfully capitalize on these opportunities; manufacturing and product supply; our efforts to respond to COVID-19, including the Pfizer-BioNTech COVID-19 Vaccine (Comirnaty), the Pfizer-BioNTech COVID-19 Omicron BA.4/BA.5-adapted bivalent Vaccine (the Pfizer-BioNTech COVID-19 bivalent vaccine), other vaccines that may result from the BNT162 program, and our oral COVID-19 treatment (Paxlovid); and our expectations regarding the impact of COVID-19 on our business, operations and financial results. Among other things, statements regarding revenue and earnings per share growth; anticipated operating and financial performance; the development or commercial potential of our product pipeline, in-line products, product candidates and additional indications or combinations, including expected clinical trial protocols, the timing of the initiation and progress of clinical trials and data read-outs from trials; the timing for the submission of applications for and receipt of regulatory approvals; the timing of product launches; expected profile and labeling; potential revenue; and expected breakthrough, best or first-in-class or blockbuster status or expected market entry of our medicines or vaccines; the regulatory landscape; and the competitive landscape are forward-looking and are estimates that are subject to change and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success, availability of supply and competitive and market dynamics. These statements are subject to risks, uncertainties and other factors that may cause actual results to differ materially from past results, future plans and projected future results. Additional information regarding these and other factors can be found in Pfizer's Annual Report on Form 10-K for the fiscal year ended December 31, 2021 and its subsequent reports on Form 10-Q, including in the sections thereof captioned "Risk Factors" and "Forward-Looking Information and Factors That May Affect Future Results", as well as in our subsequent reports on Form 8-K, all of which are filed with the U.S. Securities and Exchange Commission and available at www.sec.gov and www.pfizer.com. Potential risks and uncertainties also include global economic and/or geopolitical instability, foreign exchange rate fluctuations and inflationary pressures and the impact of COVID-19 on our sales and operations, including impacts on employees, manufacturing, supply chain, marketing, research and development and clinical trials. The forward-looking statements in this presentation speak only as of the original date of this presentation and we undertake no obligation to update or revise any of these statements.
- Also, the discussions during this conference call will include certain financial measures that were not prepared in accordance with U.S. generally accepted accounting principles (GAAP). Additional information regarding non-U.S. GAAP financial measures can be found on slides 29-32 and in our earnings release furnished with Pfizer's Current Report on Form 8-K dated January 31, 2023. Any non-U.S. GAAP financial measures presented are not, and should not be viewed as, substitutes for financial measures required by U.S. GAAP, have no standardized meaning prescribed by U.S. GAAP and may not be comparable to the calculation of similar measures of other companies.
- Today's discussions and presentation are intended for the investor community only; they are not intended to promote the products referenced herein or otherwise influence healthcare prescribing decisions. Definitive conclusions cannot be drawn from cross-trial comparisons or anticipated data as they may be confounded by various factors and should be interpreted with caution. All trademarks in this presentation are the property of their respective owners.

Opening Remarks

Albert Bourla

Chairman and Chief Executive Officer

2022 Was an Outstanding Year for Pfizer

Historic Revenues

$100B+

First time in our 174-year history

Accelerating R&D

Maintained industry-leading clinical success rates and further improved cycle times

Ten 'Best Employer' Lists

WORLD'S BEST EMPLOYERS Forbes 2022 POWERED BY STATISTA

LinkedIn TOP 2022 COMPANIES Health Care

glassdoor BEST PLACES TO WORK 2022

Patients Treated

>1.3B

Patients treated globally with our medicines and vaccines[1]

[1] The Patients Treated metric is calculated from Pfizer and third-party datasets. Figures may be limited given the coverage provided by external sources (e.g. calendar duration, geographic & product coverage). Numbers are estimates and assume US-like product usage and in some cases use global volume, daily dosage and # of treatment days to facilitate calculations and to extend applicability for the Rest of World. Methodologies to calculate estimates may vary by product type given the nature of the product and available data. Patients taking multiple Pfizer products may be counted as multiple patients towards total. Numbers include Access & Affordability patient estimates. Historical estimates may periodically be subject to revision due to restatements in the underlying data source.

FY 2022 Revenues: Key Growth Drivers

PAXLOVID™

$18.9B * op

U.S. $10.5B, *

Int'l $8.4B, * op

COMIRNATY®[1]

$37.8B +10% op

U.S. $8.8B, +12%

Int'l $29.0B, +9% op

Prevnar 20™
Pneumococcal 20-valent Conjugate Vaccine
Adult

$1.7B * op

U.S. $1.7B, *

Int'l $38M, * op

ELIQUIS®[2]
apixaban

$6.5B +14% op

U.S. $3.8B, +21%

Int'l $2.7B, +5% op

Vyndaqel® family[3]
(tafamidis)

$2.4B +29% op

U.S. $1.2B, +37%

Int'l $1.2B, +22% op

Nurtec® ODT[4]
(rimegepant)
orally disintegrating tablets 75 mg

Vydura® 75 mg[4]
oral lyophilisate
rimegepant

$213M * op

U.S. $211M, *

Int'l $2M, * op

Oxbryta®[4]
(voxelotor)

$73M * op

U.S. $72M, *

Int'l —, —

*Indicates year-over-year growth calculation not meaningful.
[1] See Slides 29-32 for definitions.
[2] Eliquis Alliance revenues & direct sales.
[3] Vyndaqel family includes global revenues from Vyndaqel, as well as revenues for Vyndamax in the U.S. and Vynmac in Japan.
[4] Reflects revenues since October 2022, when we acquired these products.

Anticipated Near-Term Growth Excluding COVID-19 Products (2023 Guidance)

Expect Strong Revenue Op Growth ex-COVID*

7-9%*

Comprised of:

- Potential new launches
- Newly acquired products
- In-line products

*Excluding COVID-19 products and FX impact

Key Recent and Potential Launches

Potential launches:

- RSV for older adults
- elranatamab
- ritlecitinib
- Prevnar 20 pediatric

Products from recent BD activity:

- etrasimod
- Nurtec ODT/Vydura
- zavegepant
- Oxbryta

Recent launches:

- Cibinqo adult[2]

Increased SI&A Investments

~$1.3B

...to support up to **19 recent and potential launches** through H1 2024[1]

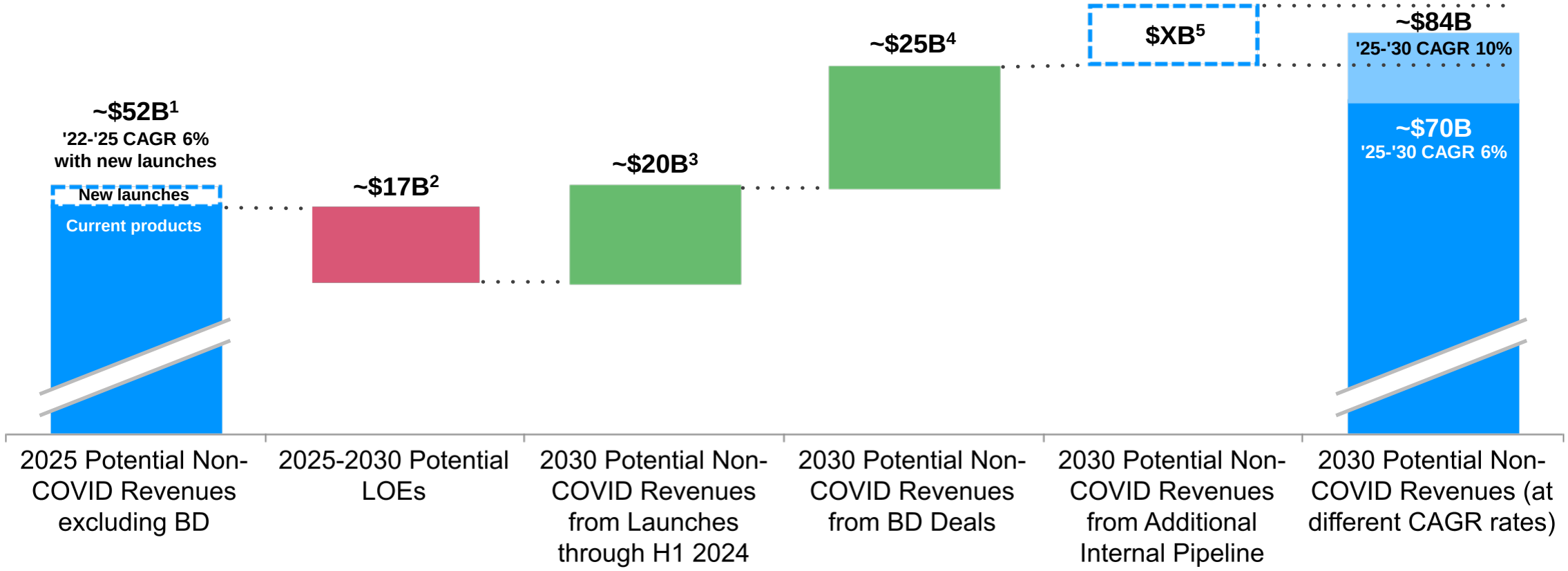
Note: Preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply.

[1] Through H1 2024, we expect to have up to 19 new products or indications in the market – including the five for which we have already begun co-promotion or commercialization in 2022. See slide 37 in Appendix.

[2] Anticipate expansion of indication to adolescents (12-18 year olds) in U.S. in 2023, if approved.

Anticipated Long-Term Growth Excluding COVID-19 Products

*Illustrative**



*For illustrative purposes only and not intended to be at scale. All values at constant exchange rates.

[1] Assumes actual 2022 non-COVID revenues ($43.6B) and 2022-2025 CAGR of 6%. Excludes 2022-2025 BD.

[2] Internal expected negative LOE impact from products with a 2021 total revenue base of $18B as shown on slide 36 in Appendix.

[3] Internal 2030 risk-adjusted revenue expectations for NME and new indications launches, excluding COVID-19 vaccine BA.4/BA.5 variant, as shown on first two sections of slide 37 in Appendix.

[4] Risk-adjusted 2030 revenue goal from BD deals.

[5] Potential 2030 risk-adjusted revenues for new product launches as shown on slide 38 in Appendix.

Note: Preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply. LOE=Loss of Exclusivity; NME=New Molecular Entity; BD=Business Development

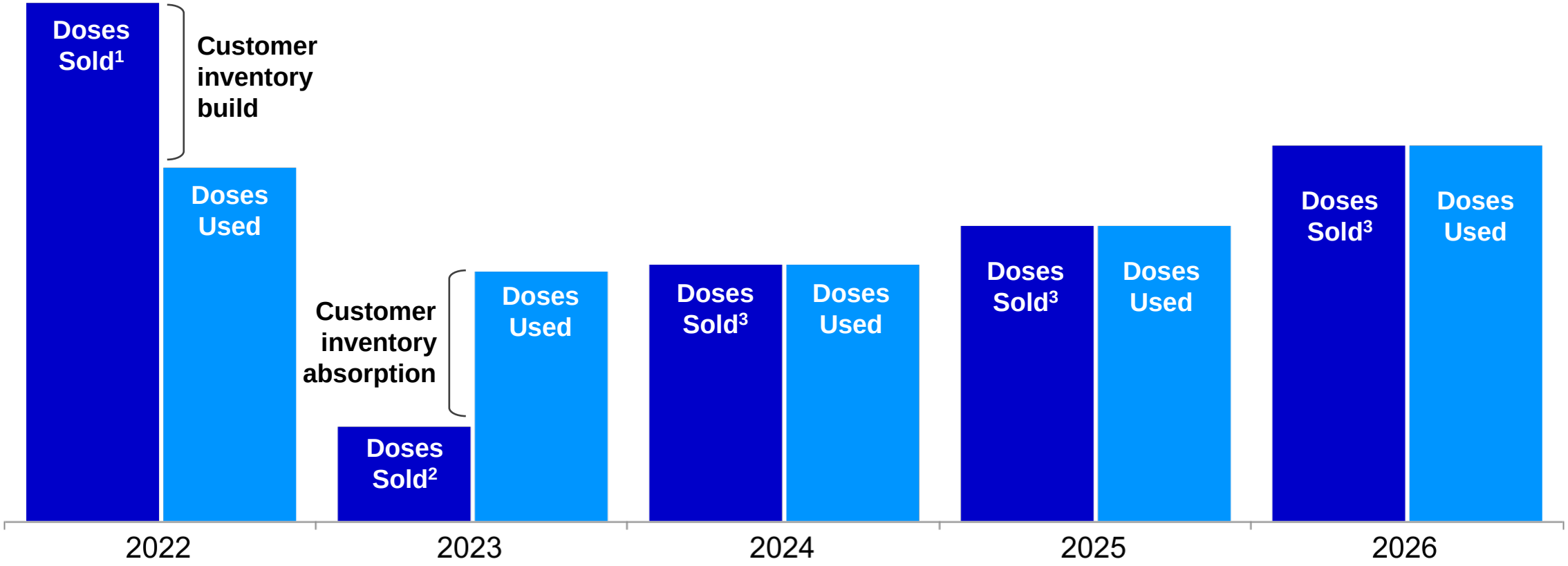
Anticipated Long-Term COVID-19 U.S. Vaccinations

U.S. Population = ~331M[1]	COVID Vx Only			Impact of COVID/Flu Combo	
	2022 Actual[2]	2023 Expected	2024 Expected	2025 Expected[3,4]	2026 Expected[3,4]
Est. % Population Vaccinated for COVID-19	~31%	~24%	~25%	~30%	~40%
Est. # People Vaccinated for COVID-19 (M)	~104	~79	~82	~99	~132
Est. Average Doses / Vaccinated Patient	~1.4	~1.3	~1.3	~1.2	~1.2
Total Market Doses Administered (M)	~144	~102	~104	~121	~153
Est. Pfizer Market Share (%)	~64%	~64%	~64%	~64%	~64%
Total Pfizer Doses Administered (M)	~92	~65	~67	~77	~98

Note: Expected timing; all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial and regulatory success and availability of supply.
[1] World Population Prospects - Population Division - United Nations, data accessed April 2022.
[2] Centers for Disease Control and Prevention - COVID Data Tracker and Pfizer internal analysis.
[3] Assumes successful development, approval and launch of COVID / Influenza mRNA combination vaccine.
[4] Includes COVID / Influenza mRNA combination vaccine

Anticipated Long-Term Comirnaty U.S. Doses Sold

Illustrative and Not to Scale



Note: Expected timing; all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial and regulatory success and availability of supply.

[1] Pandemic Price

[2] In 2023, we expect the majority of sales in the U.S. to be at commercial price, except for relatively minor deliveries under the last U.S. Government contract.

[3] Commercial Price

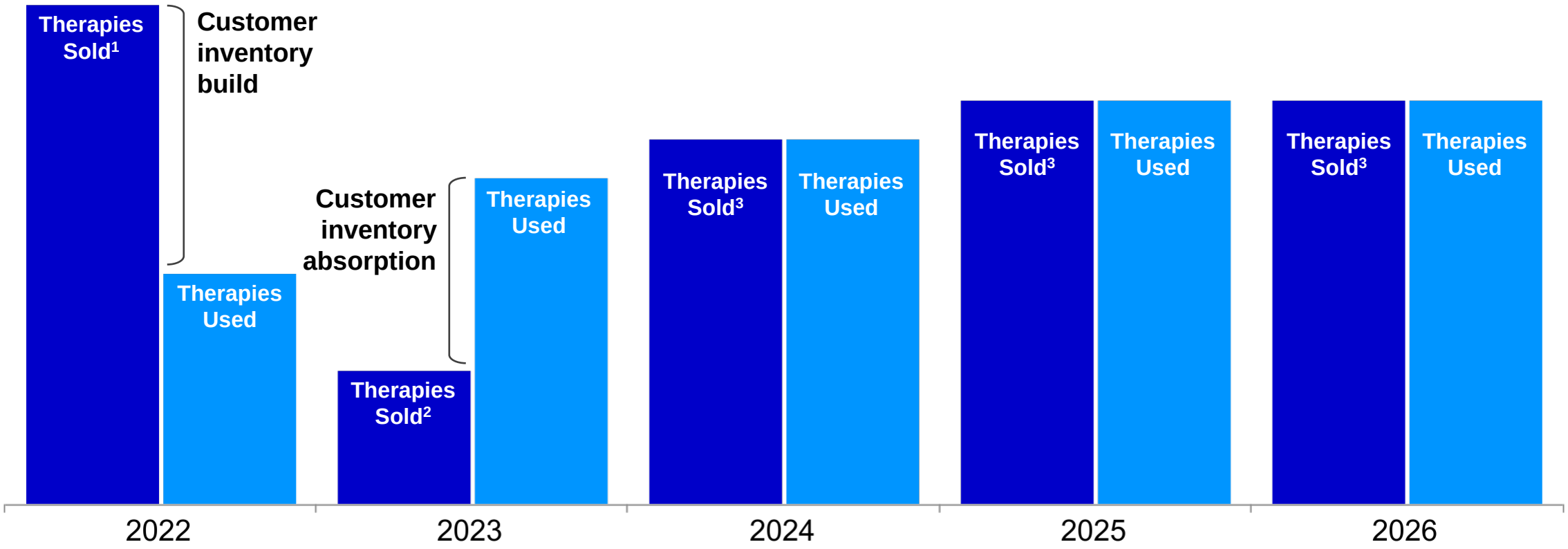
Anticipated Long-Term Global COVID-19 Oral Therapies Utilization (Excluding China)

	2022 Benchmark	2023 Expected	2024 Expected	2025 Expected	2026 Expected
Est. # of Total Reported Symptomatic Infections (M)	~110[1]	~112	~114	~117	~119
Est. % of Symptomatic Patients Treated with Oral Therapy	~12%[2]	~17%	~19%	~21%	~22%
Est. # of Symptomatic Patients Treated with Oral Therapy (M)	~14[2]	~19	~22	~25	~26
Est. Paxlovid Share of Oral Antiviral Market	~86%[2] (approaching 91% at year end)*	~90%	~90%	~85%	~80%
Est. Total Demand for Paxlovid (treatment courses in M)	~12[2,3]	~17	~19	~21	~21

Note: Expected timing; all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial and regulatory success and availability of supply.
[1] Varied in 2022 depending on how markets changed their approach to reporting infections, where PAXLOVID is available. Only includes individuals age 12+/18+ where authorized/approved in accordance with local labeling
[2] Derived from IQVIA and internal market research.
[3] Based on supply constraints in Q1 2022, resulting in ~9 months of Paxlovid utilization during the year.
*In major markets

Anticipated Long-Term Global Paxlovid Treatment Courses Sold (Excluding China)

Illustrative and Not to Scale



Note: Expected timing; all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial and regulatory success and availability of supply.

[1] Pandemic Price

[2] 2023 will be a blend of pandemic price and commercial price.

[3] Commercial Price

Increased Demand for Paxlovid in China Since Fiscal 2022

Fiscal 2022[1]

New but uncertain market opportunity, shipped only tens of thousands of courses

Dec 2022 - Mar 2023

Government-Reimbursement Pre-NRDL[2]; since December* we shipped millions of courses, expect this to continue through March

*first month of non-U.S. fiscal year

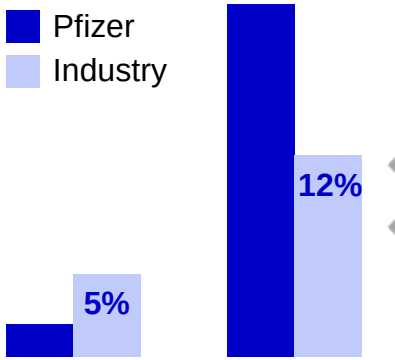
From April 2023

Potential for Private Market Self-Pay Sales via non-government hospitals and channels

[1] See Slides 29-32 for definitions.
[2] National Reimbursement Drug List.

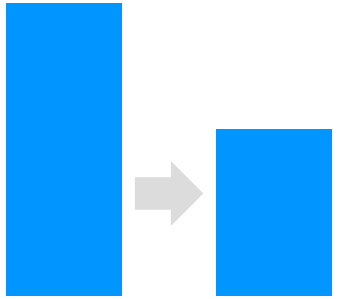
Further Strengthening our ROI for R&D

Sustaining Industry-Leading End-to-End Success Rates[1]



2% 2010 ➡ **21%** 2021

Accelerating End-to-End Cycle Times



Goal to further improve cycle times

Reducing Development Cost per Molecule

- Accelerating recruitment
- Innovating trial design
- Leveraging AI/ML, Digital
- Optimizing regulatory engagement

Reaching Potentially Larger Opportunities on Average

Key Drivers

- GLP-1
- elranatamab
- mRNA & respiratory Vx
- IFN-β

Delivering Potentially Higher R&D ROIs vs. Past

[1] FIH to Approval success rates and median phase cycle times are based on 3-year rolling cohort for Phase 1 and 5-year rolling cohort for Phase 2 to Registration. The analysis is at the new molecular entity (NME) level. The "industry" in this analysis was based on the Pharmaceutical Benchmarking Forum's companies - Current participants : AbbVie, Inc.; Astellas Pharma, Inc.; Bayer AG; Bristol-Myers Squibb Company; Eli Lilly and Company; Gilead Sciences, Inc.; Johnson & Johnson Corporation; Merck & Co, Inc.; Novartis AG; Pfizer; Roche, Inc. and Sanofi S.A. Industry-leading is defined as Top Quartile amongst CMR Benchmark. FIH=First in Human; NME=New Molecular Entity; AI=Artificial Intelligence; ML=Machine Learning

Financial Review

David Denton

Chief Financial Officer, Executive Vice President

Quarterly Income Statement Highlights

Revenues

$24.3B ↑ +13% op

Primarily driven by Comirnaty[1] in dev markets, Paxlovid ex-U.S., Prevnar family in U.S., Nurtec ODT/Vydura and Oxbryta, Vyndaqel family, Eliquis in U.S., and Prevenar 13 in EM; ex-Comirnaty and Paxlovid, revenues grew 5% op

Adjusted[1] R&D Expenses

$3.6B ↑ +7% op

Primarily driven by increased costs to support various vaccine and oncology programs and recently acquired assets

Adjusted[1] Cost of Sales

$9.5B ↑ +9% op

39%[2] ↓ -1.7 ppts

Decrease in COS% primarily due to favorable changes in sales mix, including increased sales of Paxlovid and higher alliance revenues, as well as favorable FX impacts

Diluted EPS

Rep.[1] $0.87 ↑ +48%

Adj.[1] $1.14 ↑ +69% op

Increase in Adjusted Diluted EPS[1] was primarily driven by strong sales growth and lower acquired in-process R&D expenses

Adjusted[1] SI&A Expenses

$4.4B ↑ +17% op

Primarily driven by increased investments to support Paxlovid, Comirnaty[1] and recently acquired and launched products

FX Impacts

Revenue $2.5B ↓ -11%

Adj. Dil. EPS[1] $0.19 ↓ -24%

Primarily driven by USD strengthening against Euro, Japanese Yen, and U.K. Pound

[1] See Slides 29-32 for definitions.
[2] Adjusted[1] cost of sales as a percentage of revenues (COS%).
EM=Emerging Markets

2023 Financial Guidance[1]: Revenues and Adjusted[1] Diluted EPS

	2022 Actual Results	2023 Financial Guidance
Revenues	**$100.3 billion**	**$67.0 to $71.0 billion**
Operational[1] Growth/(Decline) vs. Prior Year	*30%*	*(33%) to (29%)*
Growth/(Decline) vs. Prior Year	*23%*	*(33%) to (29%)*
Adjusted[1] Diluted EPS	**$6.58**	**$3.25 to $3.45**
Operational[1] Growth/(Decline) vs. Prior Year	*71%*	*(50%) to (47%)*
Growth/(Decline) vs. Prior Year	*62%*	*(51%) to (48%)*

Midpoint of Revenue Range Reflects 31% Op Decline Compared to 2022 Revenues;
Midpoint of Adjusted Diluted EPS[1] Range Reflects 49% Op Decline Compared to 2022

[1] See Slides 29-32 for definitions and for additional information regarding Pfizer's 2023 financial guidance.

2023 Financial Guidance[1]: Other Components

Adjusted[1] Cost of Sales as a Percentage of Revenues	28.0% to 30.0%
Adjusted[1] SI&A Expenses	$13.8 to $14.8 Billion
Adjusted[1] R&D Expenses	$12.4 to $13.4 Billion
Acquired IPR&D Expenses[1,2]	Approximately $0.1 billion
Adjusted[1] Other (Income)/Deductions	Approximately $1.5 billion of income
Effective Tax Rate on Adjusted[1] Income	Approximately 15.0%

[1] See Slides 29-32 for definitions and for additional information regarding Pfizer's 2023 financial guidance.
[2] We do not budget acquired IPR&D for unsigned deals.

2023 Financial Guidance: Key Assumptions (1 of 2)

Key Assumptions for 2023 Guidance		Commentary
Operational revenue growth compared to 2022 excluding COVID-19 products	7% to 9%	Growth expected to be split among each of three categories: launch, acquired and in-line products
Incremental SI&A spend to support anticipated new launches, acquired assets and commercial launch of COVID-19 products	~$1.3 billion	Investments to support short- and long-term growth aspirations
Incremental R&D spend to support high-value pipeline programs and acquired assets	~$1.5 billion	Includes, among others: GLP-1, elranatamab, respiratory combination vaccines

2023 Financial Guidance: Key Assumptions (2 of 2)

Comirnaty - 2023 Guidance Assumptions		Commentary
Estimated proportion of U.S. population that receives a vaccine	~24%	Compared to ~31%† in 2022; Decrease due to fewer primary vaccinations and lower compliance
Estimated number of doses per vaccinated person per year, on average	~1.3 doses	Compared to ~1.4 doses† in 2022; Decrease due to fewer primary vaccinations
Estimated Comirnaty market share - U.S.	~64%	Consistent with share achieved with most recent bivalent booster in 2022†
Estimated total demand for Comirnaty doses - U.S. (includes use of existing government supply)	~65 million doses	Compared to ~92 million doses† in 2022
Assumed timing for delivery of the contracted doses of Comirnaty to the European Commission	Re-phased over multiple years (not all in 2023)	Negotiations on re-phasing of delivery timelines are ongoing
Paxlovid - 2023 Guidance Assumptions		**Commentary**
Estimated number of total reported symptomatic infections - global*, excluding China	~112 million	Compared to ~110 million† in 2022; Increase due to expected waning of population immune protection due to reduced vaccination rates
Estimated proportion of symptomatic COVID-19 patients treated with an oral antiviral treatment - global*, excluding China	~17%	Compared to ~12%† in 2022 (partial year only); Increase due to greater awareness/education and full-year implementation
Estimated Paxlovid share of oral antiviral market - global*, excluding China	~90%	Consistent with share achieved in 2022†
Estimated total demand for Paxlovid - global*, excluding China (includes use of existing government supply)	~17 million courses	Compared to ~12 million courses† in 2022 (partial year only); Increase due to broad product availability, greater awareness/education and full-year implementation
Paxlovid sales to China	Assumes no sales after April 1, 2023	Temporary National Reimbursement Drug List currently set to end on April 1, 2023
General - 2023 Guidance Assumption		**Commentary**
Estimated timing for transitioning Comirnaty and Paxlovid to commercial market in the U.S.	Second half of 2023	Assumes prior absorption of existing government supply

* Only includes markets where Paxlovid is available, and only includes individuals age 12+/18+ where authorized/approved in accordance with local labeling.
† Actual 2022 market data is derived from a combination of public data sources and internal market research.

Scientific Updates

Mikael Dolsten

Chief Scientific Officer and President, Worldwide Research, Development and Medical

Driving Change From A Position of Strength

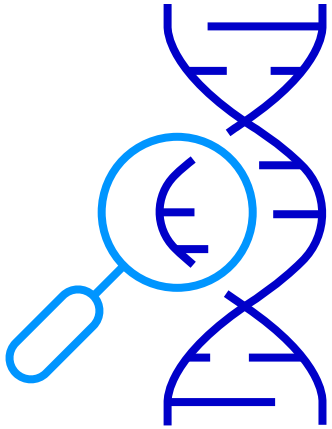
Delivering potential breakthroughs on a new scale

Honing Internal Focus

Focus where our scientific and business capabilities are **unique**

Innovate in **medicine design** and **lightspeed development** to further improve industry leading success rates and cycle times

Rethink our approach to **Rare Disease**

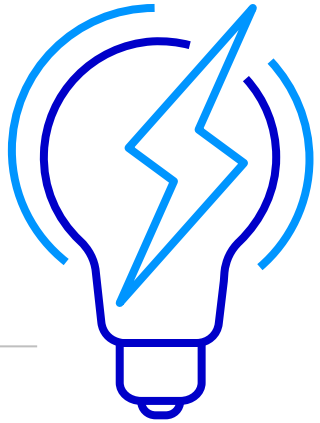


Pursuing External Innovation

Leverage the best external and internal science to reach the most patients, as quickly as possible

Actively pursue external biotech innovation and emerging platforms

Aggressively access external differentiated medicines and vaccines



Transformative Potential in Inflammation & Immunology

Near-term potential blockbusters and early-stage multispecific monoclonal antibody platform innovation

Potential Blockbuster Launches and Pivotal Starts

Etrasimod – Ritlecitinib – Anti-IFN-β

Next-Wave Pipeline Innovation

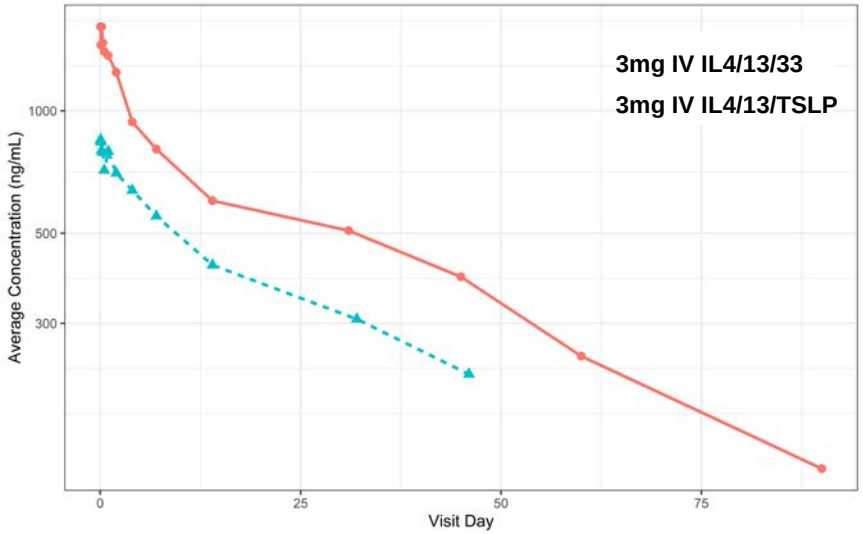
Atopic Dermatitis Tri-specific mAbs

Single drug targets 3 cytokines

Potential for improved efficacy for clinically validated targets

Phase 1 Tri-specific mAb Candidates: Anti-IL-4/-13/TSLP and Anti-IL-4/-13/-33

Phase 1 IV PK Profiles:
Encouraging profile at initial dose levels



Potential for improved efficacy in Atopic Dermatitis via more potent IL-4/-13 neutralization plus:

- Expanded breadth of efficacy by blocking TSLP

OR

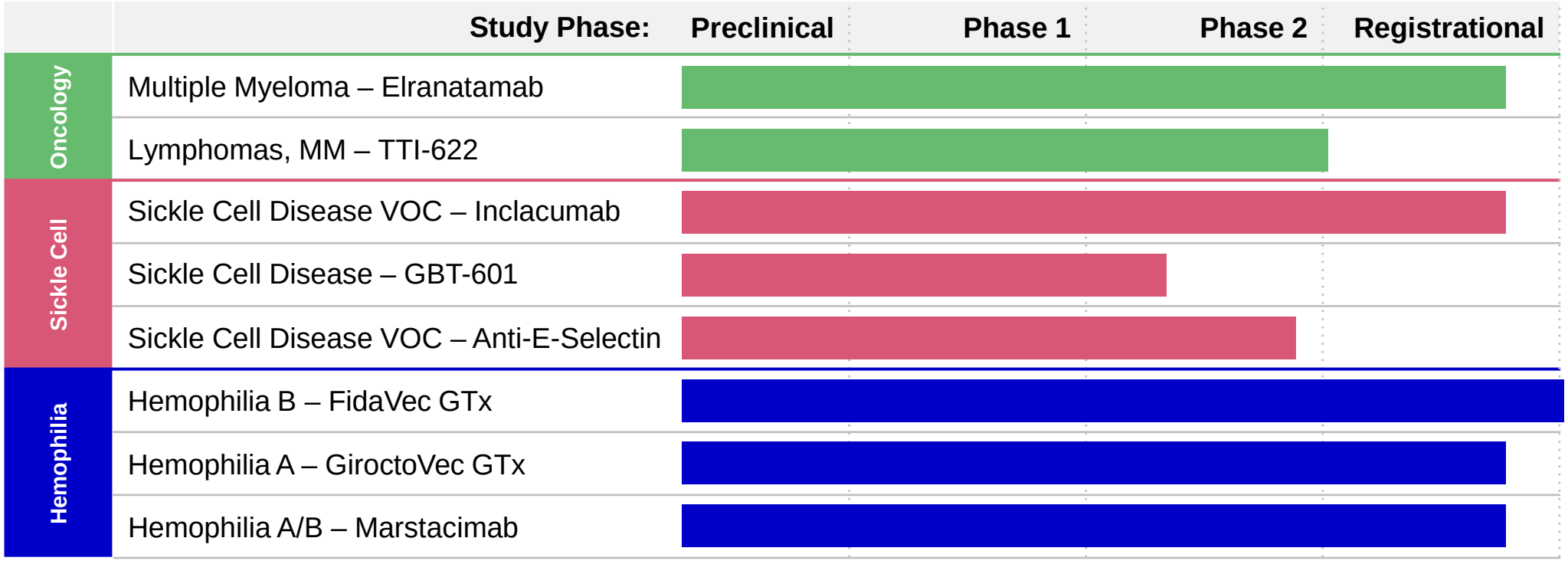
- Rapid, enhanced itch reduction by blocking IL-33

mAb: monoclonal antibody; IL: Interleukin; TSLP: Thymic stromal lymphopoietin; IV: Intravenous
Preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply

Strengthening Leadership in Hematology

In-line portfolio and pipeline with blockbuster potential

BESPONSA inotuzumab ozogamicin | Ruxience rituximab | Bosulif bosutinib tablets | Oxbryta | xyntha | BeneFix | ReFacto AF

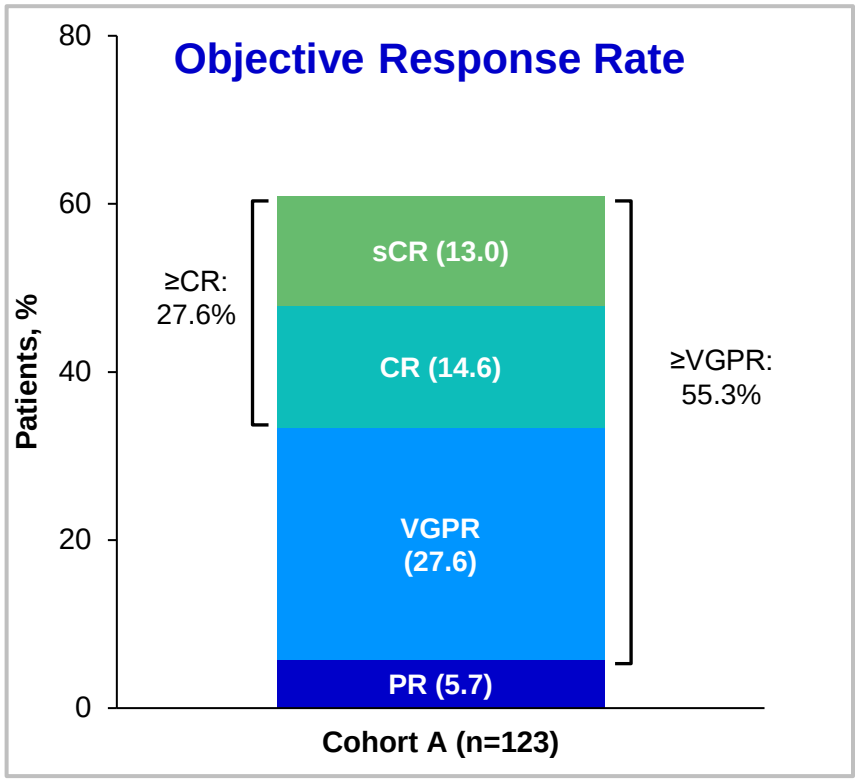


Select examples

GTx: Gene Therapy; MM : Multiple myeloma; VOC: Vaso-occlusive crisis; Preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply

Elranatamab: Potential BCMA Leadership in Multiple Myeloma

Transformative potential based on Phase 2 MagnetisMM-3 data at ASH 2022[1]



Potential Differentiation in Bi-specific mAb Class in Efficacy & Safety[2]

Early and Deep Responses

61%
ORR

84%
Probability of Maintaining Response at 9 months

Manageable Safety Profile

56%
CRS (all Gr1/2)

0%
≥Gr3 CRS

[2]Cannot draw definitive conclusions without head-to-head data

Achieved in Heavily Pre-treated MM Patient Population, Representing Highest Unmet Need

Potential Approval in 2023 for triple-class exposed patients
Estimated potential peak revenue over $4B across multiple treatment lines with studies ongoing

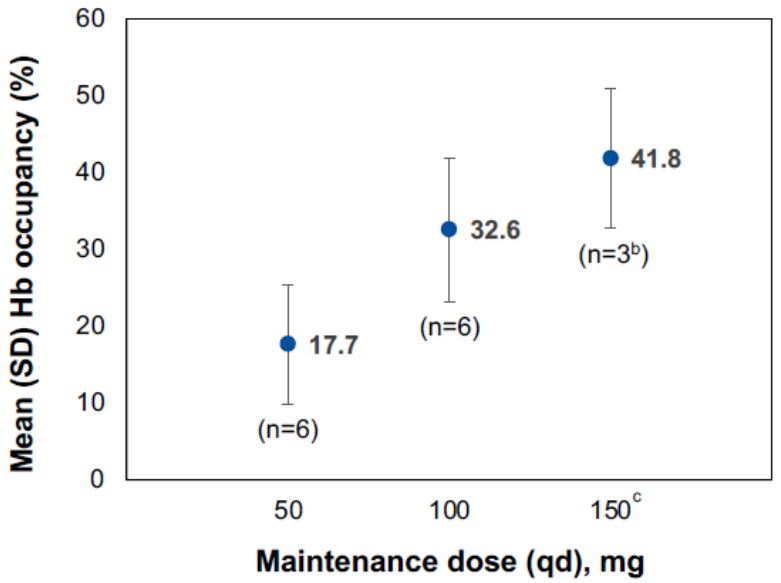
1. Abstract 159 ASH 2022; BCMA: B Cell Maturation Antigen; MM: Multiple Myeloma; ASH: American Society of Hematology; CR: Complete Response; ORR: Objective Response Rate; PR: Partial Response; sCR: stringent Complete Response; VGPR: Very Good Partial Response; CRS: Cytokine Release Syndrome; BsAb: Bispecific antibody; Expected timing: all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply

GBT-601: Transformative Potential in Sickle Cell Disease

Phase 1 data support potentially best-in-class profile of once-daily, oral, next-generation candidate

Phase 1 Study: Multiple ascending doses to reach a >30% Hb occupancy with maintenance doses of 50mg, 100mg and 150mg

% Hb Occupancy After Multiple Doses of GBT-601 in Phase 1 MAD Study



a. Hb occupancy is calculated from the start of week 5, week 4, and week 6 of daily dosing for the 50, 100, and 150 mg dose levels, respectively. Preliminary analysis based on apparent Cmax. b. Hb occupancy data from patient 0003 at 150 mg were excluded due to lack of adherence. c.Two patients did not move forward with the MAD-3 portion of the study because they initiated disease-modifying therapy before the start of MAD-3.

Next-Generation HbS Polymerization Inhibitor Phase 1 MAD Data Presented at ASH 2022 Demonstrate:

- **Improvements in hematocrit and Hb** levels over time
- **Dose-responsive** increases in Hb occupancy
- Mean Hb occupancy **greater than 30%** at 100mg and 150mg maintenance doses
- **Improvements in RBC health** at 100mg and 150mg
- **Well-tolerated** daily maintenance doses

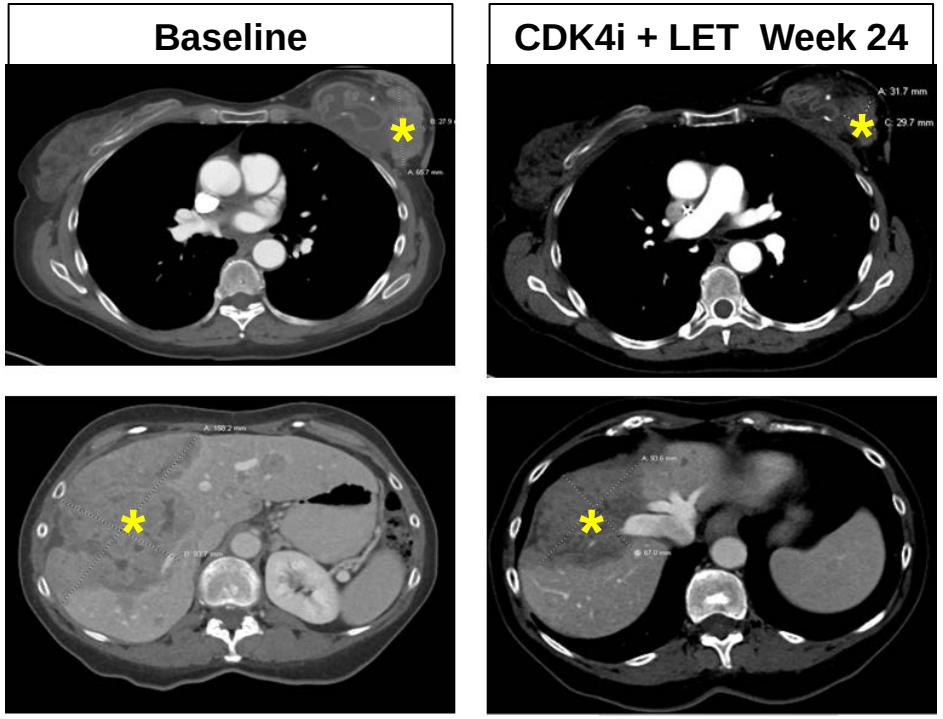
Phase 2/3 Study Ongoing with Potential NDA Approval in 2027

ASH 2022 Oral Presentation 10; ASH: American Society of Hematology; Hb: Hemoglobin; HbS: sickle hemoglobin; MAD: Multiple Ascending Dose; RBC: Red Blood Cell; qd: once daily; C_{max}: maximum concentration; Expected timing: all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply

Expanding Leadership in Breast Cancer

Next-generation oral CDK4i: Potential to address unmet needs in hormonally driven cancers

CDK4i PF-07220060 Phase 1 Dose Escalation



Patient: ER+/HER2- metastatic breast cancer
Prior therapies: ET + CDK4/6 inhibitor, fulvestrant, chemotherapy
Confirmed PR, on treatment for 47 weeks

Potential to Improve Upon Current Standard of Care by Maximizing CDK4 Target Coverage

1 **Early efficacy and durability data in combination with ET**

- Confirmed ORR nearly 30%
- CBR approximately 50%
- Median PFS: 24.7 weeks
- Investigator-assessed

2 **Well tolerated with reduced hematologic AEs based on early data**

- ≥Gr 3 neutropenia = 15 %

Additional data from complementary portfolio of next-wave breast cancer candidates anticipated H1 2023

CDK4i randomized study initiation anticipated before year-end 2023

CDK4i: cyclin dependent kinase 4 inhibitor; CDK4: cyclin dependent kinase 4; ET: endocrine therapy; HR+: hormone receptor positive; HER2: human epidermal growth factor receptor 2; MBC: metastatic breast cancer; LET: letrozole; PR: partial response; ORR: overall response rate; CBR: clinical benefit rate; PFS: progression free survival; AEs: adverse events; Expected timing: all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply

Strong Execution and Next Wave Candidates

Anticipating a milestone rich 18 months across potential launches and key pipeline catalysts

Oncology: Breast Cancer

IBRANCE PATINA HER2+ Ph 3 Data
ARV-471 Ph 3 Study Start
CDK4i Ph 2 Data
KAT6i Ph 2 Data

Vaccines

MenABCWY Launch
PREVNAR 20 Peds Launch
Older Adult and Maternal RSV Launches
Group B Strep Ph 3 Start
modFlu mRNA Ph 3 Data
Zoster mRNA Ph 1/2 Study Start
Respiratory Combo Study Start

Inflammation & Immunology

Etrasimod UC Launch
Ritlecitinib AA Launch
CIBINQO Adolescent AD Launch
Anti-IFNβ Ph 3 Start

Internal Medicine

Zavegepant Acute Migraine Launch
Danuglipron (GLP-1) Ph 2b Data
Lotiglipron (PF'1532) (GLP-1) Ph 2b Data

Anti-Infectives

PAXLOVID NDA Approval
2nd Gen COVID-19 Antiviral Ph 2 Study Start
Sisunatovir RSV Antiviral Ph 3 Study Start

Expected timing: all anticipated milestones are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success, ACIP, MMWR publication, and availability of supply; Ph: Phase; GTx: Gene Therapy; RSV: Respiratory syncytial virus; UC: Ulcerative colitis; AA: Alopecia areata; AD: Atopic dermatitis; NDA: US FDA New Drug Application

Footnotes (Page 1 of 4)

(1) As used in this document, “Comirnaty” refers to, as applicable, and as authorized or approved, the Pfizer-BioNTech COVID-19 Vaccine, the Pfizer-BioNTech COVID-19 Vaccine, Bivalent (Original and Omicron BA.4/BA.5), the Comirnaty Original/Omicron BA.1 Vaccine, and Comirnaty Original/Omicron BA.4/BA.5 Vaccine. “Comirnaty” includes direct sales and alliance revenues related to sales of the above-mentioned vaccines, which are recorded within Pfizer’s Primary Care customer group. It does not include revenues for certain Comirnaty-related manufacturing activities performed on behalf of BioNTech, which are included in the Pfizer CentreOne contract development and manufacturing organization. Revenues related to these manufacturing activities totaled $80 million and $188 million for the fourth-quarter and full-year 2022, respectively, and $46 million and $320 million for the fourth-quarter and full-year 2021, respectively.

(2) Revenues is defined as revenues in accordance with U.S. generally accepted accounting principles (GAAP). Reported net income and its components are defined as net income attributable to Pfizer Inc. and its components in accordance with U.S. GAAP. Reported diluted earnings per share (EPS) is defined as diluted EPS attributable to Pfizer Inc. common shareholders in accordance with U.S. GAAP.

(3) Adjusted income and Adjusted diluted EPS are defined as U.S. GAAP net income attributable to Pfizer Inc. common shareholders and Reported diluted EPS attributable to Pfizer Inc. common shareholders before the impact of amortization of intangible assets, certain acquisition-related items, discontinued operations and certain significant items. See the reconciliations of certain GAAP Reported to Non-GAAP Adjusted information for fourth quarter and the full-year 2022 and 2021 in Pfizer’s earnings release furnished with Pfizer’s Current Report on Form 8-K dated January 31, 2023. Adjusted income and its components and Adjusted diluted EPS measures are not, and should not be viewed as, substitutes for U.S. GAAP net income and its components and diluted EPS[(2)]. See the *Non-GAAP Financial Measure: Adjusted Income* sections of Management’s Discussion and Analysis of Financial Condition and Results of Operations in Pfizer’s 2021 Annual Report on Form 10-K and Quarterly Report on Form 10-Q for the quarterly period ended October 2, 2022 and the *Non-GAAP Financial Measure: Adjusted Income* section of Pfizer's earnings release furnished with Pfizer’s Current Report on Form 8-K dated January 31, 2023 for a definition of each component of Adjusted income as well as other relevant information.

(4) Pfizer does not provide guidance for GAAP Reported financial measures (other than revenues and acquired IPR&D expenses) or a reconciliation of forward-looking non-GAAP financial measures to the most directly comparable GAAP Reported financial measures on a forward-looking basis because it is unable to predict with reasonable certainty the ultimate outcome of unusual gains and losses, certain acquisition-related expenses, gains and losses from equity securities, actuarial gains and losses from pension and postretirement plan remeasurements, potential future asset impairments and pending litigation without unreasonable effort. These items are uncertain, depend on various factors, and could have a material impact on GAAP Reported results for the guidance period. Financial guidance for full-year 2023 reflects the following:

- Does not assume the completion of any business development transactions not completed as of December 31, 2022, except for signed transactions, if any, through mid-January 2023, which are expected to give rise to acquired in-process R&D (IPR&D) expenses during fiscal 2023.
- Reflects an anticipated negative revenue impact of $0.3 billion due to recent and expected generic and biosimilar competition for certain products that have recently lost patent protection or that are anticipated to lose patent protection during fiscal-year 2023.

Footnotes (Page 2 of 4)

- Exchange rates assumed are as of mid-January 2023. Financial guidance reflects the anticipated unfavorable impact of approximately $0.2 billion on revenues and approximately $0.02 on Adjusted diluted EPS(3) as a result of changes in foreign exchange rates relative to the U.S. dollar compared to foreign exchange rates from 2022.
- Guidance for Adjusted diluted EPS[(3)] assumes diluted weighted-average shares outstanding of approximately 5.75 billion shares, and assumes no share repurchases in 2023.

(5) Pfizer's fiscal year-end for international subsidiaries is November 30 while Pfizer's fiscal year-end for U.S. subsidiaries is December 31. Therefore, Pfizer's fourth quarter and full year for U.S. subsidiaries reflects the three and twelve months ended on December 31, 2022 and December 31, 2021 while Pfizer's fourth quarter and full year for subsidiaries operating outside the U.S. reflects the three and twelve months ended on November 30, 2022 and November 30, 2021.

(6) Beginning in the third quarter of 2022, Pfizer made several organizational changes to further transform its operations to better leverage its expertise in certain areas and in anticipation of potential future new product or indication launches. Biopharma, Pfizer's innovative science-based biopharmaceutical business, is operating under a new commercial structure which is designed to better support and optimize performance across three broad customer groups:

- Primary Care, consisting of the former Internal Medicine and Vaccines product portfolios, products for COVID-19 prevention and treatment, and potential future mRNA and antiviral products.
- Specialty Care, consisting of the former Inflammation & Immunology, Rare Disease and Hospital (excluding Paxlovid) product portfolios.
- Oncology, consisting of the former Oncology product portfolio.

(7) The following business development activity, among others, impacted financial results for the current or prior fiscal year:

- On October 5, 2022, Pfizer announced the completion of its acquisition of Global Blood Therapeutics, Inc. (GBT) for $68.50 per share in cash, for payments of approximately $5.3 billion, net of cash acquired, plus repayment of third-party debt of $331 million for a total net cash deployment of approximately $5.6 billion.
- On October 3, 2022, Pfizer announced the completion of its acquisition of all the outstanding shares of Biohaven Pharmaceutical Holding Company Ltd. (Biohaven) not already owned by Pfizer for $148.50 per share in cash, for payments of approximately $11.4 billion, net of cash acquired, plus repayment of third-party debt of $863 million and redemption of Biohaven's redeemable preferred stock for $495 million, for a total net cash deployment of approximately $12.7 billion. Effective immediately prior to the closing of the acquisition, Biohaven completed the spin-off of Biohaven Ltd. (NYSE: BHVN), a new company that retained Biohaven's non-calcitonin gene-related peptide (CGRP) development stage pipeline compounds. Shares of Biohaven Ltd. were distributed to Biohaven's shareholders. Pfizer, a Biohaven shareholder, received a pro rata portion of the company's shares in the distribution and currently owns approximately 1.5% of Biohaven Ltd.
- On July 18, 2022, GlaxoSmithKline plc. (GSK) completed its demerger of the Consumer Healthcare joint venture which became Haleon, an independent, publicly traded company listed on the London Stock Exchange that holds the joint Consumer Healthcare business of GSK and Pfizer following the demerger. For additional information, see Note 2C to the condensed consolidated financial statements in Pfizer's Quarterly Report on Form 10-Q for the quarterly period ended October 2, 2022.

Footnotes (Page 3 of 4)

- On June 9, 2022, Pfizer announced the completion of its acquisition of ReViral Ltd., a privately held, clinical-stage biopharmaceutical company focused on discovering, developing and commercializing novel antiviral therapeutics that target respiratory syncytial virus, for a total consideration of up to $536 million, including upfront and development milestones. In connection with the closing of the transaction, Pfizer recorded $426 million of acquired IPR&D expenses in its international third-quarter 2022.
- On March 11, 2022, Pfizer announced the completion of its acquisition of Arena Pharmaceuticals, Inc., a clinical-stage company developing innovative potential therapies for the treatment of several immuno-inflammatory diseases, for $100 per share, in cash. The total fair value of the consideration transferred was $6.6 billion ($6.2 billion, net of cash acquired), plus $138 million in payments to Arena employees for previously unvested equity compensation awards recognized as an expense, for a total net cash deployment of $6.4 billion.
- On December 31, 2021, Pfizer completed the sale of its Meridian subsidiary, the manufacturer of EpiPen and other auto-injector products, which generated approximately $300 million in annual revenues and which previously had been managed within the former Hospital therapeutic area. Beginning in the fourth quarter of 2021, the financial results of Meridian are reflected as discontinued operations for all periods presented.
- On December 24, 2021, Pfizer entered into a multi-year research collaboration with Beam Therapeutics Inc. (Beam) to utilize Beam's *in vivo* base editing programs, which use mRNA and lipid nanoparticles, for three targets for rare genetic diseases of the liver, muscle and central nervous system. Under the terms of the agreement, Pfizer paid Beam a $300 million upfront payment. If Pfizer elects to opt in to licenses for all three targets, Beam would be eligible for up to an additional $1.05 billion in development, regulatory and commercial milestone payments for a potential total deal consideration of up to $1.35 billion. Beam is also eligible to receive royalties on global net sales for each licensed program.
- On November 17, 2021, Pfizer acquired all outstanding shares, warrants, options and deferred shares not already owned by Pfizer of Trillium Therapeutics Inc., a clinical-stage immuno-oncology company developing therapies targeting cancer immune evasion pathways and specific cell targeting approaches, for a price of $18.50 per share in cash, for total consideration of $2.0 billion, net of cash acquired. Pfizer accounted for the transaction as an asset acquisition since the lead asset, TTI-622, represented substantially all of the fair value of the gross assets acquired. As a result, Pfizer recorded a $2.1 billion charge in fourth-quarter 2021, representing the acquired in-process R&D asset.
- On November 9, 2021, Pfizer and Biohaven announced a strategic collaboration and license agreement for Pfizer to commercialize rimegepant and zavegepant for the treatment and prevention of migraines outside of the U.S., subject to regulatory approval. Upon the closing of the transaction on January 4, 2022, Pfizer paid Biohaven $500 million, including an upfront payment of $150 million and an equity investment of $350 million. Pfizer recognized $263 million for the upfront payment and premium paid on its equity investment in acquired IPR&D expenses.
- On July 22, 2021, Arvinas Inc. (Arvinas) and Pfizer announced a global collaboration to develop and commercialize ARV-471, an investigational oral PROTAC® (PROteolysis TArgeting Chimera) estrogen receptor protein degrader. The estrogen receptor is a well-known disease driver in most breast cancers. Under the terms of the agreement, Pfizer paid Arvinas $650 million upfront and made a $350 million equity investment in Arvinas. Arvinas is also eligible to receive up to $400 million in approval milestones and up to $1 billion in commercial milestones. The companies will equally share worldwide development costs, commercialization expenses and profits.

(8) References to operational variances in this presentation pertain to period-over-period changes that exclude the impact of foreign exchange rates. Although exchange rate changes are part of Pfizer's business, they are not within Pfizer's control and since they can mask positive or negative trends in the business, Pfizer believes presenting operational variances excluding these foreign exchange changes provides useful information to evaluate Pfizer's results.

Footnotes (Page 4 of 4)

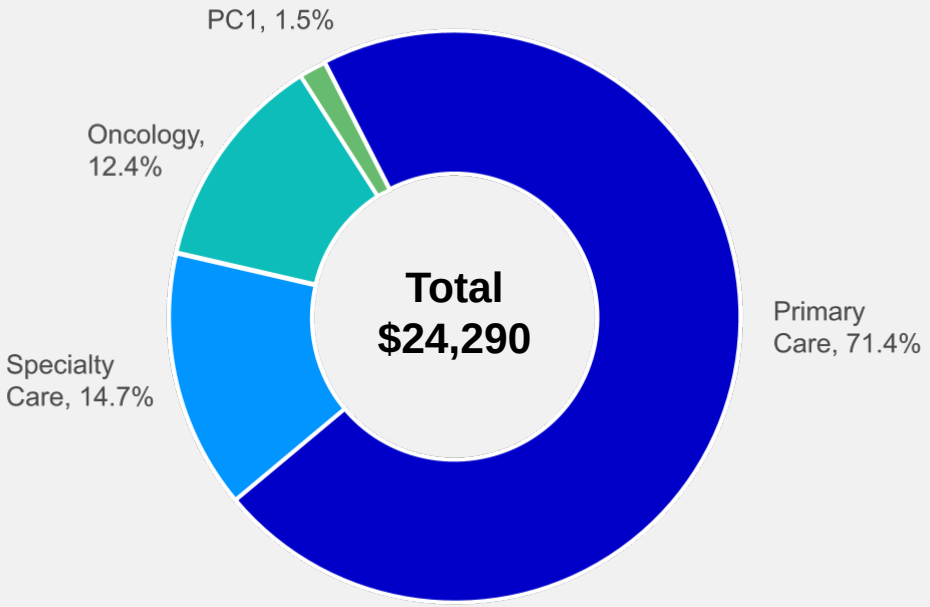
(9) Paxlovid and emergency uses of the Pfizer-BioNTech COVID-19 Vaccine or the Pfizer-BioNTech COVID-19 Vaccine, Bivalent (Original and Omicron BA.4/BA.5), have not been approved or licensed by the FDA. Paxlovid has not been approved, but has been authorized for emergency use by the FDA under an EUA, for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg [88 lbs]) with positive results of direct SARS-CoV-2 viral testing, and who are at high-risk for progression to severe COVID-19, including hospitalization or death. Emergency uses of the Pfizer-BioNTech COVID-19 Vaccine and the Pfizer-BioNTech COVID-19 Vaccine, Bivalent have been authorized by the FDA under an EUA to prevent COVID-19 in individuals aged 6 months and older. The emergency uses are only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product during the COVID-19 pandemic under Section 564(b)(1) of the FFDCA unless the declaration is terminated or authorization revoked sooner. Please see the EUA Fact Sheets at www.covid19oralrx.com and www.cvdvaccine-us.com.

- The information contained on our website or any third-party website is not incorporated by reference into this presentation.

Appendix

Q4 2022 Summary Figures (1 of 2)

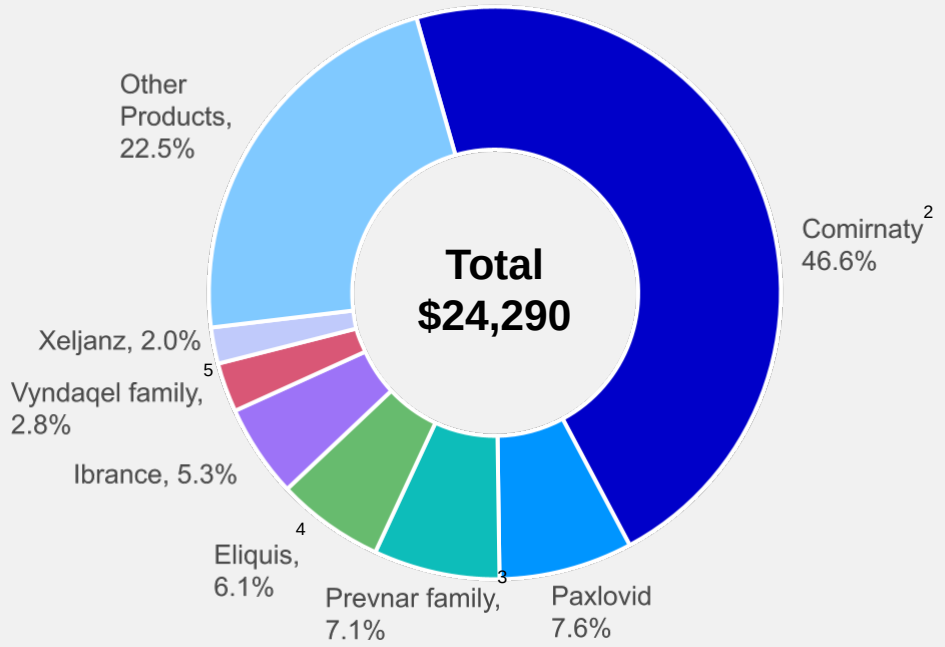
Revenue by Therapeutic Area *($M)*



% Operational Growth

Primary Care	Specialty Care	Oncology	PC1	Total
20%	-3%	-3%	1%	13%

Top 7 Products by Revenue[1] *($M)*



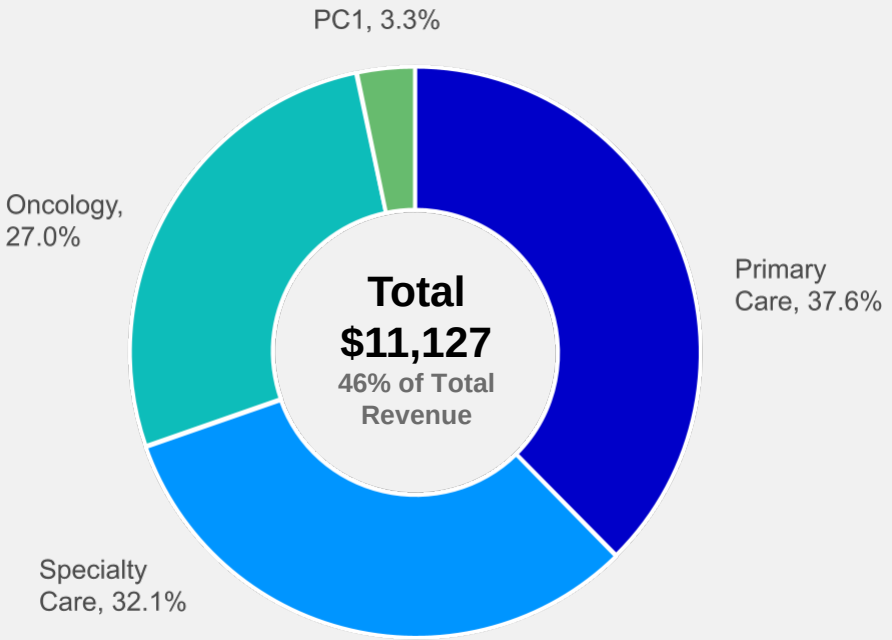
% Operational Growth

Comirnaty[2]	Paxlovid	Prevnar family[3]	Eliquis[4]	Ibrance	Vyndaqel family[5]	Xeljanz
3%	*	40%	5%	-4%	31%	-28%

*Indicates calculation not meaningful.
[1] Product percentages are calculated using total company revenue as denominator.
[2] See Slides 29-32 for definitions.
[3] Prevnar family include revenues from Prevnar 13/Prevenar 13 (pediatric and adult) and Prevnar 20/Apexxnar (adult).
[4] Eliquis alliance revenues & direct sales.
[5] Vyndaqel family includes global revenues from Vyndaqel, as well as revenues for Vyndamax in the U.S. and Vynmac in Japan.
PC1=Pfizer CentreOne

Q4 2022 Summary Figures (2 of 2)

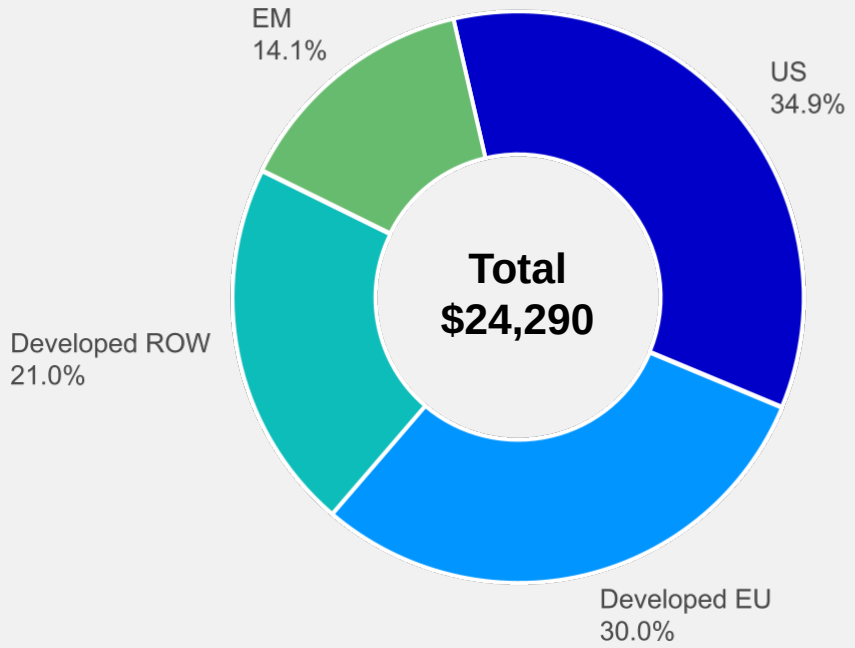
Revenue by Therapeutic Area, Ex-COVID[1] *($M)*



% Operational Growth Ex-COVID[1]

Primary Care	Specialty Care	Oncology	PC1	Total
22%	-3%	-3%	1%	5%

Revenue by Geography *($M)*



% Operational Growth

US[2]	Dev EU	Dev ROW	EM	Total
10%	86%	59%	-51%	13%

[1] Excludes revenues from Comirnaty direct sales and alliance revenues and Paxlovid. Product percentages are calculated using $11,127M as denominator, as opposed to total company revenue.
[2] U.S. % presented here is % Reported Growth.
PC1=Pfizer CentreOne; US=United States; EU=European Union; ROW=Rest of the World; EM=Emerging Markets

Key Products Included in the Expected ~$17 Billion in LOE Revenue Declines from 2025-2030

Product	2021 WW Revenues *($ millions)*	2021 U.S. Revenues *($ millions)*	2021 Dev. EU Revenues *($ millions)*	Year of Expected U.S. LOE	Year of Expected EU LOE
Eliquis[1]	$5,970	$3,160	$1,520	2026*	2026
Inlyta	$1,002	$599	$181	2025	2025
Ibrance	$5,437	$3,418	$1,044	2027	2028
Xeljanz	$2,455	$1,647	$308	2025	2028
Xtandi[2]	$1,185	$1,185	N/A	2027	N/A
Vyndaqel family[3]	$2,015	$909	$572	2024 (2028 pending PTE)	2026

* Date is based on the composition of matter patent. See Pfizer's 2021 Annual Report on Form 10-K filed with the U.S. Securities and Exchange Commission for more information about potential scenarios that could affect the timing of generic entry in the U.S.

[1] Eliquis alliance revenues & direct sales.

[2] Xtandi alliance revenues.

[3] Vyndaqel family includes global revenues from Vyndaqel, as well as revenues for Vyndamax in the U.S. and Vynmac in Japan.

PTE=Patent Term Extension LOE=Loss of Exclusivity

New Launches / Co-promotions and Potential Product Launches[1]

~$20B Potential Revenue
expected for NME and new indications by 2030[2]

~$25B Potential Revenue
expected from new BD deals by 2030[3]

Vaccines **Inflammation/Immunology** **Oncology** **Rare Disease** **Internal Medicine**

New Molecular Entity (NME) Launches

2022	2023	2023	1H 2023*	2H 2023*	2H 2023*	2023	2024*
Ngenla (Ex-US)	**Ritlecitinib**	**Elranatamab**	**RSV Adults (60+) Vaccine**	**RSV Maternal Vaccine**	**Pentavalent Meningococcal Vaccine**	**Abrilada**	**mRNA Flu Vaccine**
Growth Hormone Deficiency	Alopecia Areata	Triple Class Relapsed or Refractory Multiple Myeloma	Prevention of RSV-associated LRTI in adults >60 yrs	Prevention of RSV-associated LRTI in infants via maternal immunization	Prevention of meningococcal infection by serogroups ABCWY	Adalimumab Biosimilar	Influenza

New Indications

Aug 2022 Pfizer co-promote	Sep 2022	2023	2023
Myfembree	**COVID-19 vaccine BA.4/BA.5 variant**	**Cibinqo**	**Braktovi/Mektovi**
Endometriosis	COVID-19	Moderate to severe Atopic Dermatitis Adolescent	Non-Small Cell Lung Cancer (PHAROS)

2023	2023	1H 2023*
Talzenna + Xtandi (Talazoparib + Enzalutamide)	**Xtandi**	**Prevnar 20 Peds**
Metastatic castration resistant prostate cancer (TALAPRO2)	Non-Metastatic Castration Sensitive Prostate Cancer (EMBARK)	Prevention of invasive pneumococcal disease, otitis media - Pediatric

Recently Announced Business Development (BD) Deals[4]

Aug 2022 Pfizer promotion[5]	2023
Nurtec ODT/Vydura	**Zavegepant (intranasal)**
Acute treatment of Migraine and preventive treatment of episodic Migraine	Acute treatment of Migraine

Oct 2022 with merger close	2H 2023
Oxbryta	**Etrasimod**
Sickle cell disease	Moderate to severe Ulcerative Colitis

* Estimated FDA decision; subject to regulatory approval, ACIP and MMWR to follow.

Note: All dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success and availability of supply.

1.Through H1 2024, we expect to have up to 19 new products or indications in the market – including the five for which we have already begun co-promotion or commercialization in 2022. 2. Internal 2030 risk-adjusted revenue expectations for NME and new indications launches, excluding COVID-19 vaccine BA.4/BA.5 variant. 3. Risk-adjusted 2030 revenue goal from BD deals. 4. Expected to contribute toward risk-adjusted 2030 revenue goal of ~$25B from BD deals.
5. Through a standalone detailing arrangement.

Additional Pipeline Potential Launches Through 2030 – Selected Examples

Product Candidate	Anticipated Indication(s)	Expected Potential Launch
New Molecular Entity (NME) Launches		
Danuglipron or PF'1532 (oral GLP1s)	Type 2 Diabetes, Obesity	>2024
Anti-IFN-β Antibody (PF'3859)	Dermatomyositis, Polymyositis	>2024
COVID / Influenza mRNA Combination Vaccine[1]	COVID-19 & Influenza prevention	>2024
Lyme Disease Vaccine (PF'405)	Lyme disease prevention	>2024
mRNA Shingles Vaccine[1]	Shingles (VZV) prevention	>2024
HemA GTx	Hemophilia A gene therapy	>2024
HemB GTx	Hemophilia B gene therapy	>2024
DMD GTx	Duchenne Muscular Dystrophy gene therapy	>2024
sasanlimab	Non-muscle invasive bladder Cancer	>2024
marstacimab	Treatment of Hem A / Hem B	>2024
ARV-471	ER+/HER2- BC	>2024
TTI-622 (PF'801)	Hematological malignancies	>2024

Note: Expected timing; all dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial and regulatory success and availability of supply.
[1] In collaboration with BioNTech; and for COVID influenza combination, pending agreement between the partners.

2022 Financial Guidance vs. Results

	Guidance	Results	
Revenues	$99.5 to $102.0 billion	$100.3 billion	✓
Adjusted[1] Cost of Sales as a Percentage of Revenues	33.0% to 34.0%	34.0%	✓
Adjusted[1] SI&A Expenses	$12.8 to $13.3 billion	$13.0 billion	✓
Adjusted[1] R&D Expenses	$11.5 to $12.0 billion	$11.4 billion	✓
Acquired IPR&D Expenses[1]	Approximately $1.4 billion	$1.0 billion	✓
Adjusted[1] Other (Income)/Deductions	Approximately $1.8 billion of income	$2.0 billion of income	✓
Effective Tax Rate on Adjusted[1] Income	Approximately 12.5%	11.7%	✓
Adjusted[1] Diluted EPS	$6.40 to $6.50	$6.58	✓

Met or Exceeded All Components of 2022 Total Company Financial Guidance

[1] See Slides 29-32 for definitions and for additional information regarding Pfizer's 2023 financial guidance.

Bolstering the Pipeline with Recent Business Development Opportunities

Select Examples

Year	Therapeutic Area	Organization	Asset/Indication	Status Since Close
2019	Oncology, Rare Disease	ARRAY BIOPHARMA	BRAFTOVI & MEKTOVI – Cancer; LMNA – Cardiomyopathy	Approvals: 1; Pivotal Starts: 2; FIH: 3[1] Cardiomyopathy discontinued
	Rare Disease	Vivet Therapeutics	GTx – Wilson Disease	Fast Track Designation (FDA); FIH: Dec 2022
	Rare Disease	Therachon	recifercept – Achondroplasia	Failed Ph 2 interim analysis, discontinued
	Vaccines	AKCEA / IONIS	Vupanorsen – CV risk & severe hypertriglyceridemia[2]	Discontinued and development rights returned to Ionis
2020	Vaccines	valneva	Vaccine – Lyme Disease	Ph 2 readouts: 6, Ph 3 starts: 2, Fast Track designation
	Vaccines	BIONTECH	Vaccine – modRNA Flu[3]	Ph 3 Start: 1
	Vaccines	BIONTECH	Vaccine – COVID-19	Approvals: 2[4]; EUAs: 15; Ph 3 readouts: 14
	Hospital	ARIXA	AV-006 (ARX-1796) – Drug-resistant Gram-negative infections	Ph 1
	Oncology, Rare Disease	MYOVANT SCIENCES	Relugolix – Prostate Cancer & Women's Health	Approvals: 3; Submissions: 2; Ph 3 Readouts: 2[5]
2021	Hospital	amplyx	Fosmanogepix – Invasive fungal infections	Ph 2
	Hospital	SPERO THERAPEUTICS	SPR206 – Gram (-) infection	Ph 1
	Oncology	ARVINAS	ER PROTAC – Breast Cancer	Ph 2 (w. Ibrance); Ph 2 (monotherapy dose expansion)
	Oncology	TRILLIUM	TTI-622/621 – Oncology	Ph 1b/2 new combination cohorts initiated
	Internal Medicine	biohaven pharmaceuticals	Nurtec ODT/Vydura – Migraine (outside the U.S.)[6]	Approvals: 5
	Oncology	dren bio	Myeloid DR-02 Platform – Solid tumors	Pre-clinical
	Infla/Immun	ARENA PHARMACEUTICALS	Etrasimod – GI (UC, Crohn's focus) & Other Autoimmune Disorders	Ph 3 readouts: 2; Submissions: 3
	Rare Disease	Beam THERAPEUTICS	mRNA/Gene Editing	Pre-clinical
	Vaccines	BIONTECH	mRNA Program – Shingles	Pre-clinical

Oncology · Rare Disease · Internal Medicine · Vaccines · Hospital · Infla/Immun

We also completed 4 transactions in China in 2020-21 with CStone (equity, development of future assets to be defined, co-promotion for NSCLC), LianBio (equity, future assets to be defined), CanSino (meningococcal vaccine), and Ferring (prostate cancer).

1.Approvals, pivotal starts and FIH apply to multiple assets acquired in Array agreement. 2. Ionis fully acquired Akcea in August 2020. 3. Transaction executed in 2018. 4. 2 U.S. approvals for COVID-19 vaccine for 16+ and 12-15 yrs. 5. Approvals, submissions and Phase 3 readouts apply to Relugolix - Myfembree in Endometriosis. 6. Pfizer completed acquisition of Biohaven Pharmaceuticals in October 2022. FIH=First in Human; GTx=Gene Therapy; CV=Cardiovascular; GI=Gastrointestinal; UC=Ulcerative Colitis; modRNA=nucleoside-modified messenger RNA; EUA=Emergency Use Authorization

Bolstering the Pipeline with Recent Business Development Opportunities

Select Examples

Year	Therapeutic Area	Organization	Asset/Indication	Status Since Close
2022		REVIRAL	RSV antiviral therapeutics	Sisunatovir (Ph2); RV299 (N-protein inhibitor) (Ph 1)
		biohaven pharmaceuticals	Nurtec ODT, zavegepant, 5 pre-clinical CGRP assets – Migraine (U.S. and global)	Nurtec ODT (on market); zavegepant (PDUFA Q1'23) & add'l Ph2 ongoing
		GBT	Sickle Cell Disease	Oxbryta (on market, launched new 300 mg tablets for pediatrics); inclacumab Ph 3; GBT601 Ph 2 (Dosing)
		BIONTECH	Vaccine – COVID-19 / Influenza combination	Phase 1

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CGRP=Calcitonin Gene-Related Peptide