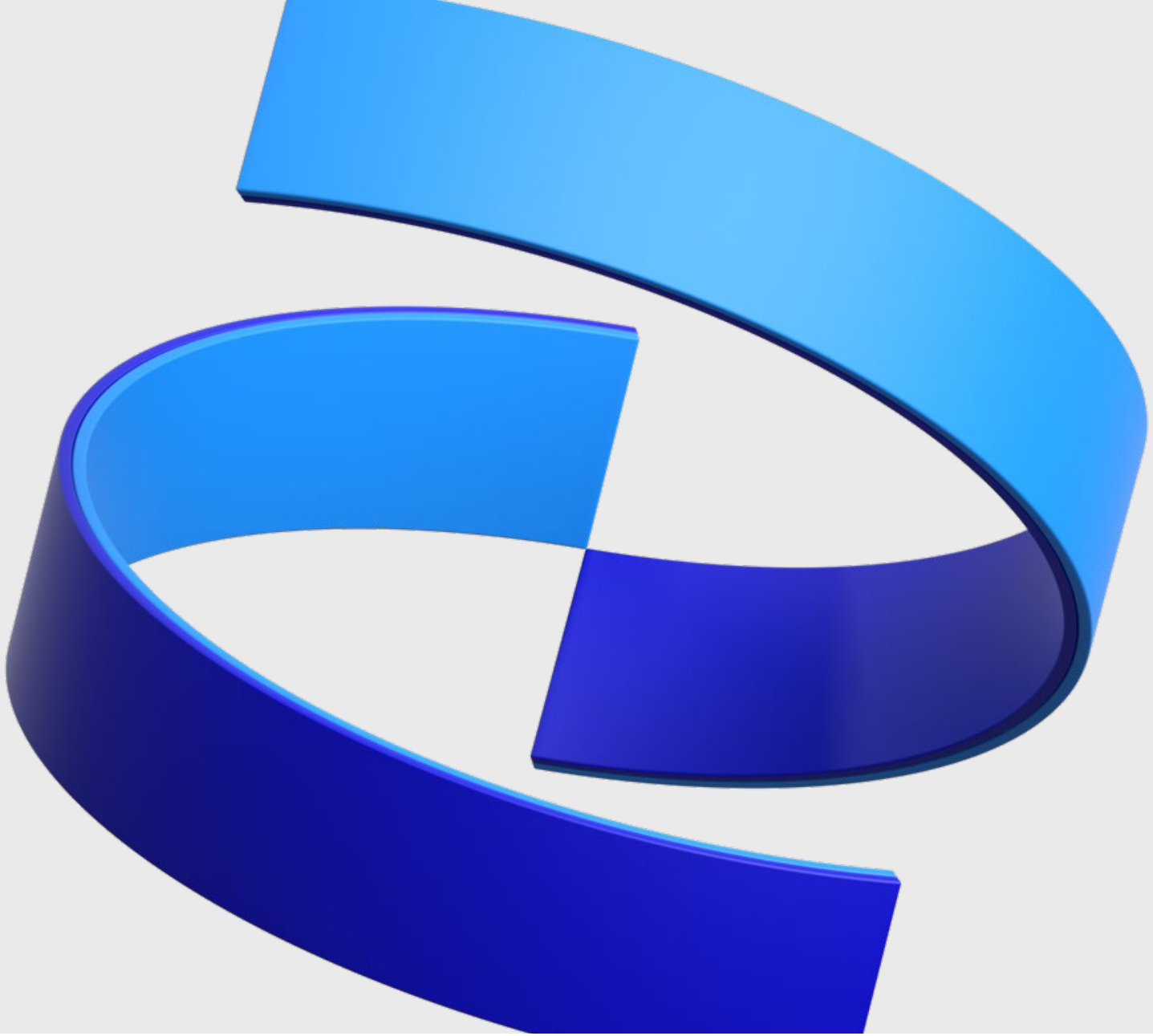
Third Quarter 2023 Earnings Teleconference

October 31, 2023



Pfizer

Breakthroughs that change patients' lives ®

Introduction

Francesca DeMartino

Chief Investor Relations Officer,
Senior Vice President

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, including financial guidance and projections; 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, potential pricing and reimbursement, potential market dynamics, size and utilization rates, growth, performance, timing of exclusivity and potential benefits; strategic reviews, capital allocation objectives, an enterprise-wide cost realignment program (including anticipated costs, savings and potential benefits), dividends and share repurchases; plans for and prospects of our acquisitions, dispositions and other business development activities, including our proposed acquisition of Seagen, and our ability to successfully capitalize on these opportunities; manufacturing and product supply; our ongoing efforts to respond to COVID-19, including our COVID-19 products and the timing of transitioning of such products to the commercial market; 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 and commercialization; expected profile and labeling; potential revenue; anticipated COVID-19 vaccination rates and Paxlovid treatment courses sold; 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, demand, availability of supply, excess inventory write-offs 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, 2022 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 25-26 and in our earnings release furnished with Pfizer's Current Report on Form 8-K dated October 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.

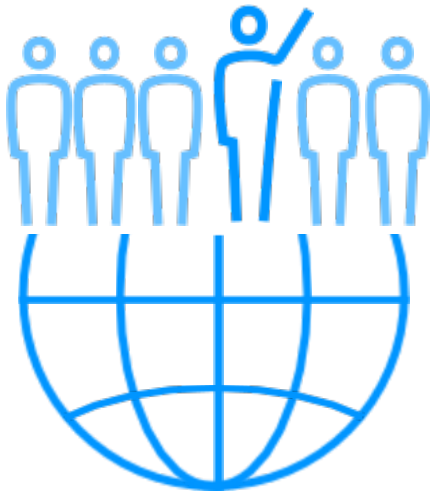
Opening Remarks

Albert Bourla

Chairman and Chief Executive Officer

YTD Q3 2023: Patient Impact

Breakthroughs that change patients' lives.



>457M

Patients Treated[1]

YTD Q3 2023 with our medicines and vaccines

Year over year, we have reached more patients in such areas as oncology, cardiovascular disease and anti-infectives (ex-Paxlovid)

1. See Slides 25-26 for definitions.

Q3 2023: Continued Strength in Pfizer's Non-COVID Portfolio

ABRYSVO™ (OA)
Respiratory Syncytial Virus Vaccine

$375M * op

U.S. $375M, *

Int'l —, —

Nurtec® ODT (rimegepant)
orally disintegrating tablets 75 mg

Vydura® 75 mg
oral lyophilisate
rimegepant

$233M * op

U.S. $227M, *

Int'l $6M, * op

Oxbryta® (voxelotor)

$85M * op

U.S. $83M, *

Int'l $2M, * op

Vyndaqel® family[1]
(tafamidis)

$892M +47% op

U.S. $511M, +55%

Int'l $381M, +36% op

Prevnar family[2]

$1.9B +15% op

U.S. $1.3B, +20%

Int'l $544M, +5% op

7% op growth for non-COVID revenues YTD Q3 2023
On track for expected 6-8% op revenue growth ex-COVID in FY 2023

*Indicates calculation not meaningful.
1. Vyndaqel family includes global revenues from Vyndaqel, as well as revenues for Vyndamax in the U.S. and Vynmac in Japan. 2. Prevnar family includes revenues from Prevnar 13/Prevenar 13 (pediatric and adult) and Prevnar 20/Apexxnar (pediatric and adult).

Excellent Progress Toward Expected Commercial 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	2H 2023	2H 2023	2H 2023**	2023	Beyond 2024*
Ngenla	**Litfulo**	**Elrexfio**	**Abrysvo (OA)**	**Abrysvo (MI)**	**Penbraya**	**Abrilada** (US)	**Next-Generation mRNA Flu Vaccine**
Growth Hormone Deficiency	Severe Alopecia Areata	Relapsed 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
Launched	Launched	Launched	Launched	Launched	Approved	Approved	Revised

New Indication Launches

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

2023	2023	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
Launched		Launched

Recently Completed Business Development (BD) Deals[4]

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

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

Note: All dates are preliminary, subject to change, and subject to, among other risks, assumptions and uncertainties, clinical trial, regulatory and commercial success, ACIP and MMWR publication, and availability of supply. 1.Through H1 2024, we expect to have up to 18 new products or indications in the market – including the 13 for which we have already begun co-promotion or commercialization in 2022 and through October 2023. 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. * Estimated FDA decision; subject to regulatory approval, ACIP and MMWR to follow. **MMWR to follow.
LRTI=Lower respiratory tract infection; RSV=Respiratory syncytial virus

Seagen Planning Continuing to Progress Well

- Recently gained unconditional antitrust clearance in EU
- Raised $31B in acquisition financing so far
- Continue to expect Seagen to contribute incremental 2030 risk-adjusted revenues in excess of $10B and expected cost efficiencies of $1B – without impacting R&D programs[1]

Anticipated close in late 2023 or early 2024,
subject to the satisfaction of customary closing conditions

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

Financial Review

David Denton

Chief Financial Officer, Executive Vice President

Quarterly Statement of Operations Highlights

Revenues

$13.2B ↓ (41)% op

$11.7B[1] ↑ 10% op

Excluding Comirnaty[2] and Paxlovid, op growth primarily driven by Abrysvo (OA) in U.S., Nurtec ODT/Vydura and Oxbryta, Vyndaqel family, and Prevnar family

Adjusted[2] Cost of Sales

$8.9B ↑ 44% op

67.3%[3] ↑ 40.6 ppts

Increase in COS% primarily driven by a non-cash charge of $5.6B for inventory write-offs and other charges ($4.7B for Paxlovid and $0.9B for Comirnaty[2])

Adjusted[2] SI&A Expenses

$3.2B ↓ (1)% op

Primarily reflecting a lower provision for U.S. healthcare reform fees related to Comirnaty[2] and Paxlovid and a decrease in spending on products across multiple customer groups, partially offset by increases in marketing and promotional expenses for recently acquired and launched products

Adjusted[2] R&D Expenses

$2.7B ↔ — op

Primarily due to lower compensation-related expenses, partially offset by increased investments mainly to develop recently acquired assets and to support upcoming product launches

Diluted Loss Per Share[2] (LPS)

Reported[2] $(0.42)
Adjusted[2] $(0.17)

Reported[2] and Adjusted[2] Diluted LPS primarily resulted from declines in (i) Paxlovid & Comirnaty sales, and (ii) the non-cash charge related to write-offs of COVID-related inventories that negatively affected Adj. LPS by $0.84

FX Impacts

Revenue $(94)M ↓ —
Adj.[2] Dil. LPS $(0.04)[4] ↑ (2)%[4]

Primarily driven by USD strengthening against Argentinian Peso, Russian Ruble, and Chinese Renminbi

*Indicates calculation not meaningful.
1. Excludes Comirnaty[2] and Paxlovid. 2. See Slides 25-26 for definitions. 3. Adjusted cost of sales as a percentage of revenues (COS%). 4. Foreign exchange movements increased Adjusted diluted loss per share by 4 cents, or 2%, compared to Q3 2022.

Reaffirms 2023 Revenue and Adjusted[1] Diluted EPS Guidance[1,2]

	2023 Financial Guidance[1]	One-Time Items Included in Guidance[3]
Revenues*	**$58.0 to $61.0 billion**	$(4.2) billion
Operational[1] Decline vs. Prior Year	*(41%) to (38%)*	
Decline vs. Prior Year	*(42%) to (39%)*	
Non-cash Inventory Write-offs[3]		$5.6 billion
Adjusted[1] Diluted EPS*	**$1.45 to $1.65**	$(1.47)
Operational[1] Decline vs. Prior Year	*(75%) to (72%)*	
Decline vs. Prior Year	*(78%) to (75%)*	

1. See Slides 25-26 for definitions and for additional information regarding Pfizer's 2023 financial guidance. 2. Guidance provided on October 13, 2023. 3. One-time items include a non-cash revenue reversal of approximately $4.2 billion related to the return of an estimated 7.9 million treatment courses of U.S. government EUA-labeled Paxlovid expected in the fourth quarter of 2023 and a non-cash charge of $5.6 billion recorded to Cost of Sales in the third quarter of 2023 for COVID products inventory write-offs and other charges.
*Changes in foreign exchange rates have had a minimal incremental impact since full-year 2023 guidance was issued.

2023 Financial Guidance[1]: Other Components

Adjusted[1] Cost of Sales as a Percentage of Revenues	41.0% to 43.0% *(previously 28.0% to 30.0%)*
Adjusted[1] SI&A Expenses	$13.3 to $14.3 Billion *(previously $13.8 to $14.8 billion)*
Adjusted[1] R&D Expenses	$11.9 to $12.9 Billion *(previously $12.4 to $13.4 billion)*
Acquired IPR&D Expenses[1]	Approximately $0.1 billion
Adjusted[1] Other (Income)/Deductions	Approximately $1.9 billion of income *(previously approximately $1.5 billion of income)*
Effective Tax Rate on Adjusted[1] Income	Approximately 12.0%

1. See Slides 25-26 for definitions and for additional information regarding Pfizer's 2023 financial guidance.

Efficient Cash Deployment Strategy Focused on Three Pillars

Reinvestment: YTD Q3 2023

$7.9B
in internal R&D

Paying/Growing Dividends: YTD Q3 2023

$6.9B
returned to shareholders

Share Repurchases[1]

Post-Seagen De-Levering, Expect More Balanced Capital Allocation Between Reinvestment and Returning Value to Shareholders

[1] Current financial guidance does not anticipate any share repurchases in 2023.

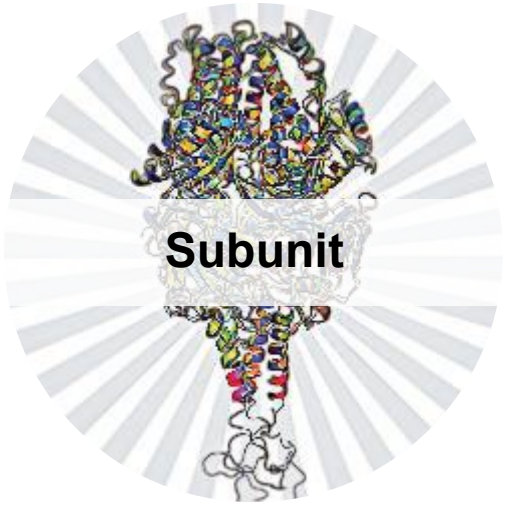
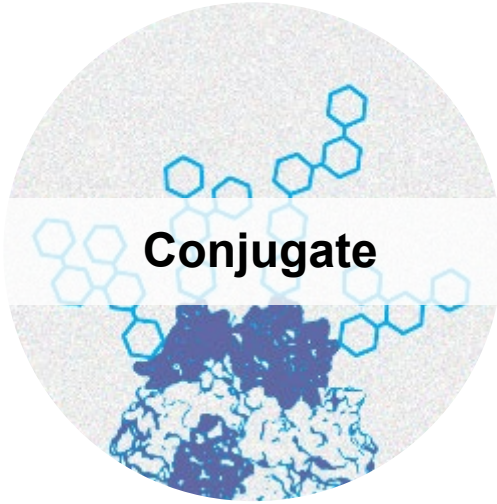
Scientific Updates

Mikael Dolsten

Chief Scientific Officer, President, Pfizer
Research and Development

Expanding Leadership Across Respiratory Vaccines

Bringing the right science to the right pathogen

	Highly Variant Viruses	Invariant / Low Variant Viruses	Bacterial
			
Licensed[1]	**COMIRNATY** *COVID-19[2]*	**ABRYSVO** *RSV (Older Adults and Maternal)*	**PREVNAR 20** *Pneumococcal Infection*
Dev. Candidates[1]	**mRNA Influenza Standalone / Combos[3]** *Standalone (Ph3), COVID-19 Combo (Ph2)*	**ABRYSVO Combos[3]**	**Next Generation Pneumococcal** **Group B Streptococcus**

1. Select examples, not exhaustive; 2. In collaboration with BioNTech SE; 3. Select combo programs being advanced in collaboration with BioNTech SE; Dev.: Development; Ph3: Phase 3; Ph2: Phase 2.

First Ever Demonstration of Efficacy for an mRNA Flu Vaccine Candidate

Primary endpoints achieved in Ph 3 trial's 18-64 yrs. cohort; ≥65 yrs. cohort readout anticipated in 2023

First-Generation modFlu mRNA Vaccine Candidate

Phase 3 18-64 yrs. Cohort

- ***Non-inferiority*** and ***superiority*** vs. licensed influenza vaccine achieved at primary analysis[1]
- ***Efficacy maintained,*** with ***non-inferiority*** vs. licensed influenza comparator achieved at end of season analysis[1,2]
- Safety ***similar to standard*** flu vaccine
- ***Secondary immunogenicity*** endpoints achieved only for ***A strains***, not B strains

≥65 yrs. Age Group

- Phase 3 readout anticipated by ***year-end***
- Some interference was observed against B strains in early Phase studies for humoral responses
- ***Phase 1/2 T cell responses*** against A and B strains were encouraging

1. Primary and end of season analyses considered both influenza A and B cases collectively, though the vast majority of cases recorded in this trial, and during the 2022 / 2023 influenza season overall, were influenza A cases; 2. Superiority vs. the licensed influenza comparator not met at end of season analysis; Ph: Phase

Positive Phase 1/2 Influenza + COVID-19 Combination Vaccine Data[1]

Next-generation mRNA flu + COVID-19 combo candidates met all criteria for advancement to Ph 3

Phase 1/2 Combo Study in Adults Ages 18 – 64

Next-Gen mRNA Flu + COVID-19 Combo

Multiple Formulations and Dose Levels Evaluated

vs.

Licensed Influenza / COVID-19[2] Comparators

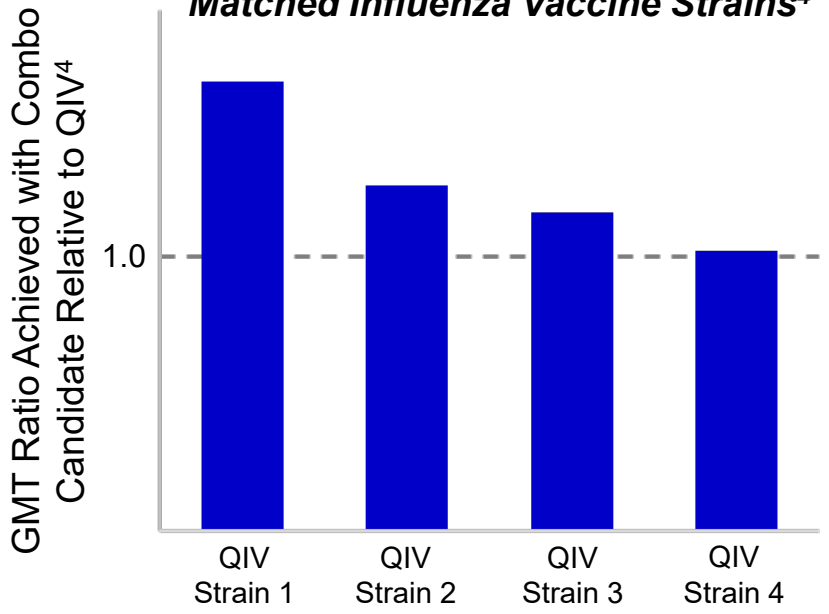
Administered Separately During the Same Visit

Topline Phase 1/2 Results on Next-Gen Reformulated mRNA Flu + COVID-19 Combination Candidates

GMT Ratios were Consistent with the Criteria Applied to Approved Vaccines Against the Respective **Influenza** and **SARS-CoV-2 Strains**[3]

Safety Profile Consistent with that of Pfizer-BioNTech COVID-19 Vaccine

GMT Ratios >1 Relative to QIV for All Matched Influenza Vaccine Strains[4]

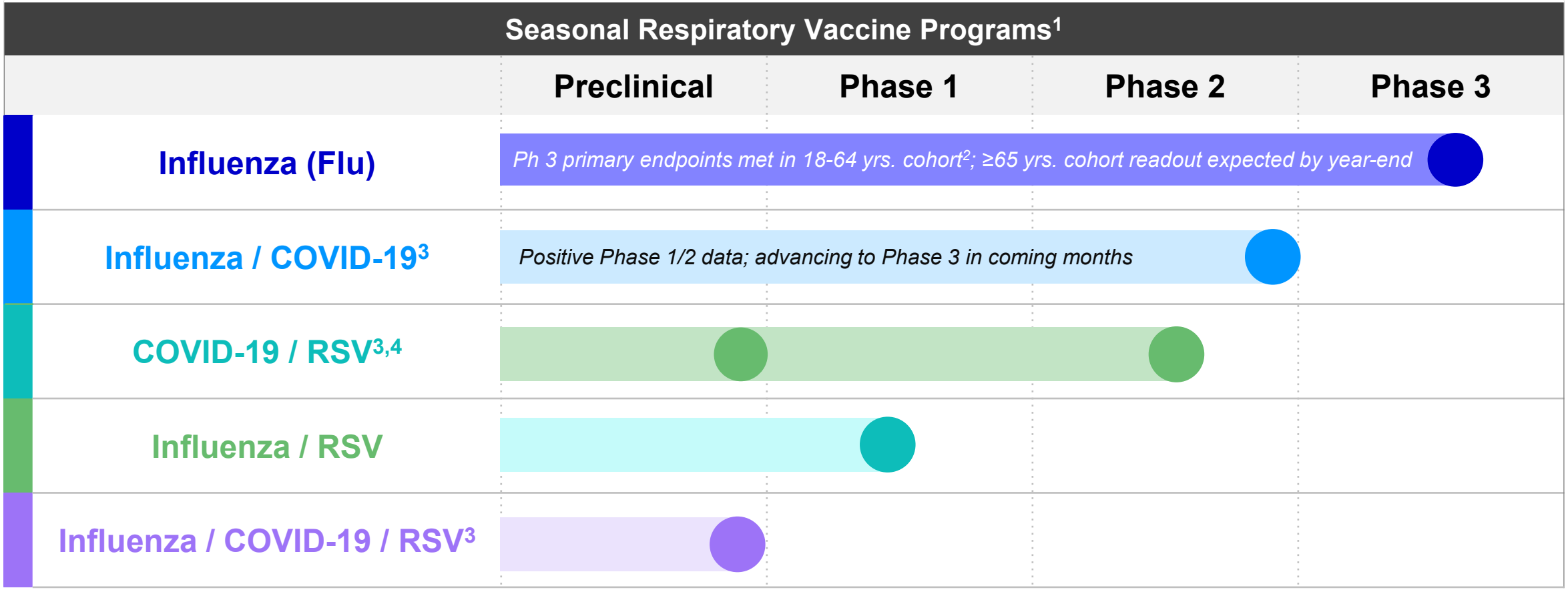


Advancing Combo Program into Phase 3 Trial Expected to Begin in the Coming Months

1. Program being advanced in collaboration with BioNTech SE; 2. Pfizer-BioNTech Omicron BA.4/BA.5-adapted bivalent COVID-19 vaccine; 3. Phase 1/2 data on point estimates of GMT ratios achieved with lead combination candidates; 4. Point estimates of GMT ratios achieved with a lead combination candidate relative to QIV administered concomitantly with Pfizer-BioNTech Omicron BA.4/BA.5-adapted bivalent COVID-19 vaccine; Gen: Generation; GMT: Geometric mean titer; QIV: Quadrivalent influenza vaccine.

Flu Program: Potential Anchor for Seasonal Vaccine Franchise

Only seasonal respiratory vaccine franchise with approved mRNA and protein subunit vaccines



Success in Flu Programs May Enable Access to the Nearly 50% Annual Flu Vaccination Rate in US Adults[5]

1. Select examples, not exhaustive; 2. Primary analysis considered both influenza A and B cases collectively, though the vast majority of cases recorded in the Phase 3 trial, and during the 2022 / 2023 influenza season overall, were influenza A cases. 3. In collaboration with BioNTech SE; 4. Multiple COVID-19 / RSV combo programs; 5. Estimates from US Centers for Disease Control and Prevention. Ph: Phase

PREVNAR: Only PCV with FDA Adult Pneumonia Indication[1]

PCV naïve population & proprietary assay enabled landmark trial supporting pneumonia indication

Addressing the Burden of Pneumococcal Pneumonia

Prevalence of Nonbacteremic Pneumococcal Pneumonia **>15-fold** Greater than that of IPD in US Adults >50 years[2]

~150K Annual US Hospitalizations[3]

5-7% Case Fatality Rate[3]

CAPiTA: Landmark PREVNAR Pneumonia Trial[4,5]

~84,500 Pneumococcal-**Vaccine Naïve** Subjects ≥65 yrs.	**Proprietary** Serotype Detection **Assay**	Demonstrated **Efficacy** Against Vaccine Type **Pneumonia**[6]

Addressing **both invasive disease** and **pneumonia** is critical for pneumococcal vaccination

CAPiTA trial **innovation** is **challenging** for **others** to **replicate**

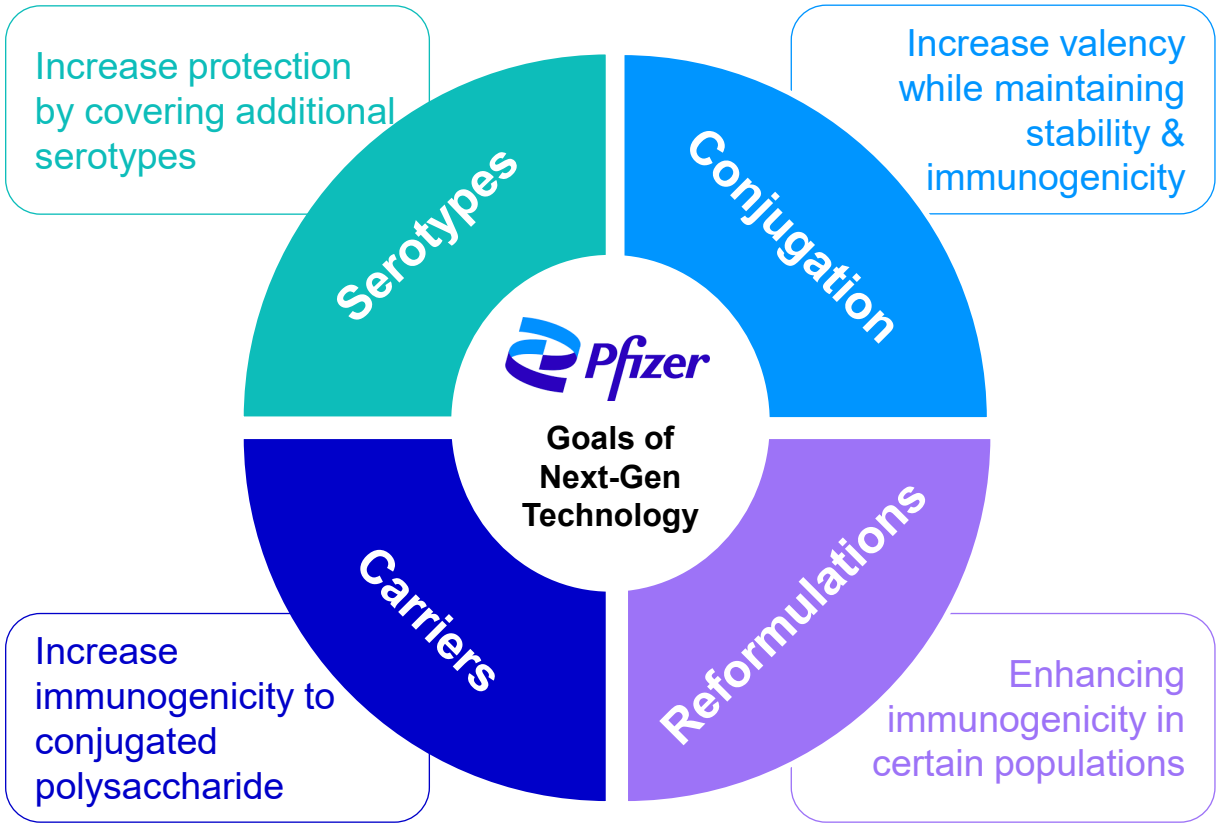
Increasing vaccine valency without protection against pneumonia may leave unaddressed **disease burden in adults**

4th Gen PCV Potential: Build on PREVNAR Foundation to Increase Valency and Broaden Protection

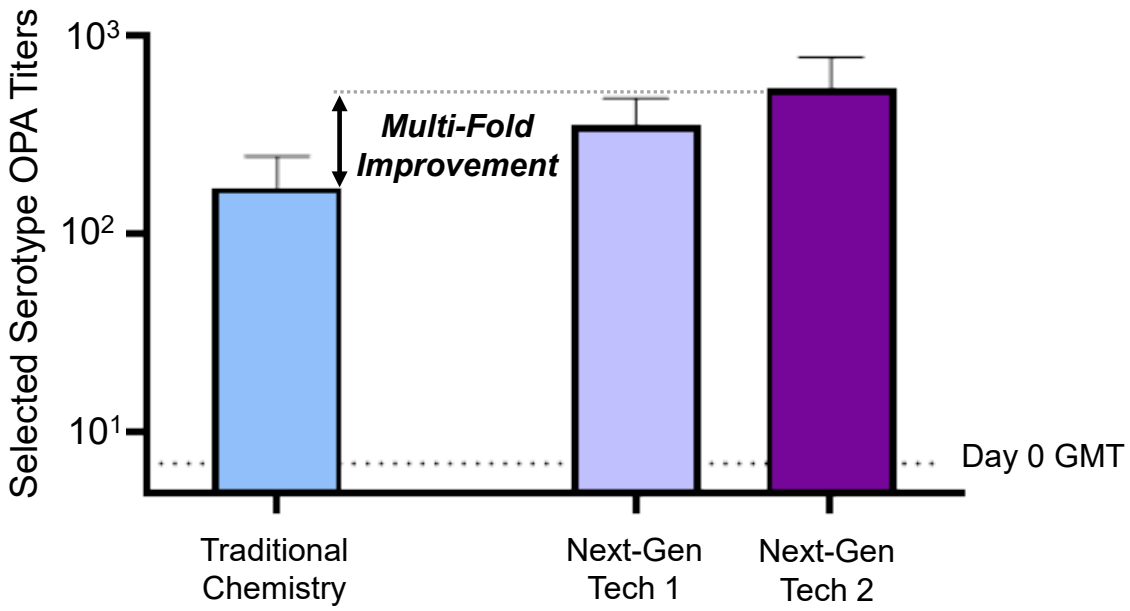
1. Refers to PREVNAR 13 and PREVNAR 20 vaccines, which include an indication for active immunization for the prevention of pneumonia caused by the S. pneumoniae serotypes in the vaccine for adults; 2. Thomas, Geriatrics (Basel). 2021 Mar; 6(1): 13. doi: 10.3390/geriatrics6010013; 3. "Pneumococcal Disease" US Centers for Disease Control and Prevention. 4. Isturiz and Webber, Human Vaccines & Immunotherapeutics 11:7, 1825-1827; July 2015. 5. Trial applies to adult population only; 6. Based on primary endpoint of prevention of a first episode of confirmed vaccine type community acquired pneumonia. PCV: Pneumococcal conjugate vaccine. IPD: Invasive pneumococcal disease. Gen: Generation

4th Generation PCV Program: Potential to Solidify Leading Position

Leveraging cutting-edge toolkit to potentially increase valency and improve serotype immunogenicity



Phase 1 Data Show Improved Single Serotype Immunogenicity with Next-Gen Technology



Next-Gen Technology Incorporated in 4th Generation PCV Candidate

4th Generation PCV Candidate[1]

Increased Valency Compared to PREVNAR 20 | Initiation of First-in-Human Trial Expected 4Q 2023

PCV: Pneumococcal conjugate vaccine; Gen: Generation; OPA: Opsonophagocytic activity; Tech: Technology; GMT: Geometric mean titer; 1. 4th generation PCV candidate is currently in preclinical development and expected to enter clinical development by year-end 2023

Strong Launch Execution and Next Wave Pipeline Candidates

Over 25 milestones recently achieved or anticipated through 2024[1]

Vaccines

- ✓ ABRYSVO Older Adult Launch
- ✓ PREVNAR 20 Pediatric Launch
- PENBRAYA Launch
- ✓ ABRYSVO Maternal Launch
- ✓ ABRYSVO High Risk Adult Ph 3 Start
- Group B Strep Ph 3 Start
- ✓ modFlu mRNA 18-64 yrs Ph 3 Data
- modFlu mRNA ≥65 yrs Ph 3 Data
- mRNA Flu + COMIRNATY[2] Combo Ph 3 Start
- ✓ ABRYSVO + modFlu mRNA Combo Ph 1 Start
- ✓ Zoster mRNA Ph 1/2 Start
- ✓ ABRYSVO 2-18 yrs Ph 1 Start
- 4th Gen PCV Candidate Ph 1 Start

Internal & Genetic Medicines

- ✓ ZAVZPRET Nasal Acute Migraine Launch
- ✓ Marstacimab Hemophilia Ph 3 Data
- DMD GTx Ph 3 Data
- Danuglipron (GLP-1) Ph 2b Data
- GBT601 Sickle Cell Disease Ph 2 Data
- Ponsegromab Cancer Cachexia Ph 2 Data

Anti-Infectives

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

Oncology

- ✓ ELREXFIO RRMM Launch
- IBRANCE PATINA HER2+ BC Ph 3 Data
- ✓ Vepdegestrant (ARV-471) Ph 3 BC Study Start
- CDK4i Ph 3 BC Study Start
- KAT6i Ph 1b BC Data

Inflammation & Immunology

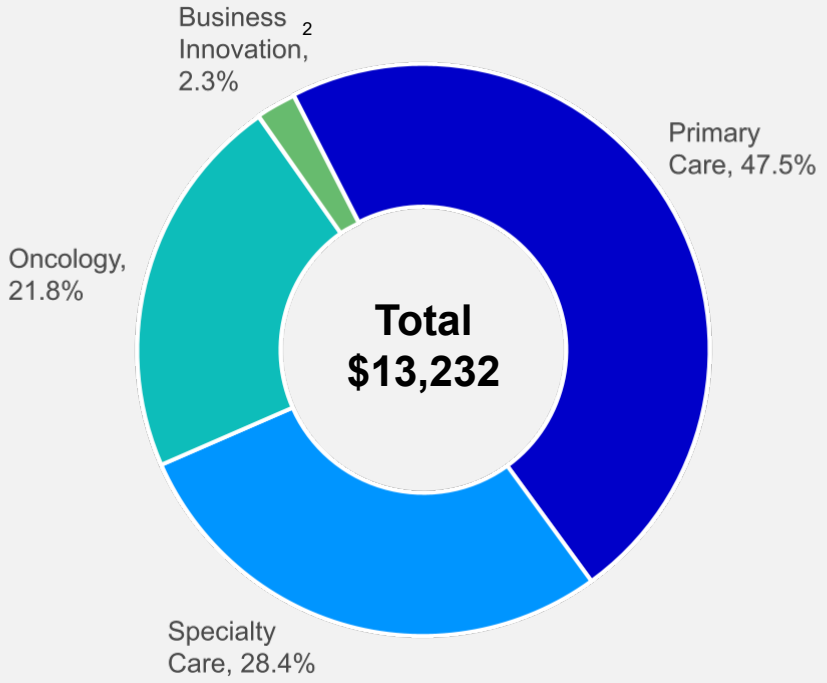
- ✓ LITFULO AA Launch
- ✓ CIBINQO Adolescent AD Launch
- ✓ Anti-IFNβ Ph 3 Start
- VELSIPITY UC Launch

1. Select examples, not exhaustive; 2. COMIRNATY 2023 / 2024 (monovalent Omicron XBB.1.5) formula; 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 and MMWR publication, and availability of supply; PCV: Pneumococcal conjugate vaccine; Gen: Generation; Ph: Phase; DMD: Duchenne muscular dystrophy; GTx: Gene therapy; BC: Breast cancer; RRMM: Relapsed or refractory multiple myeloma; UC: Ulcerative colitis; AA: Alopecia areata; AD: Atopic dermatitis; NDA: US FDA New Drug Application.

Appendix

Q3 2023 Summary Figures (1 of 2)

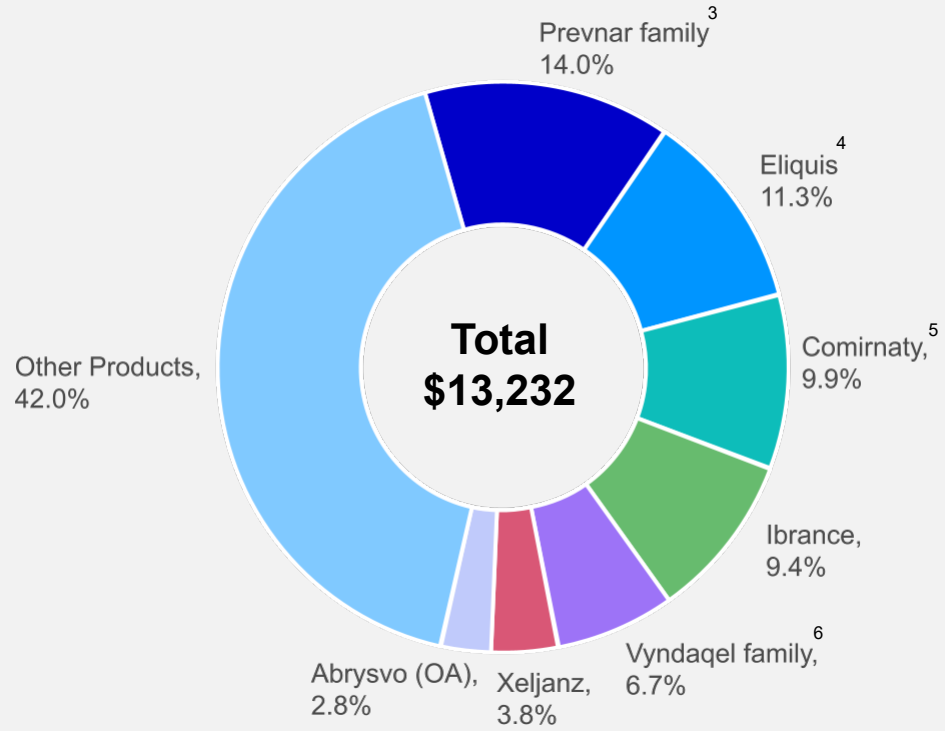
Revenue by Customer Group[1] *($M)*



% Operational Growth

Primary Care	Specialty Care	Oncology	Business Innovation[2]	Total
-60%	12%	-5%	-7%	-41%

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



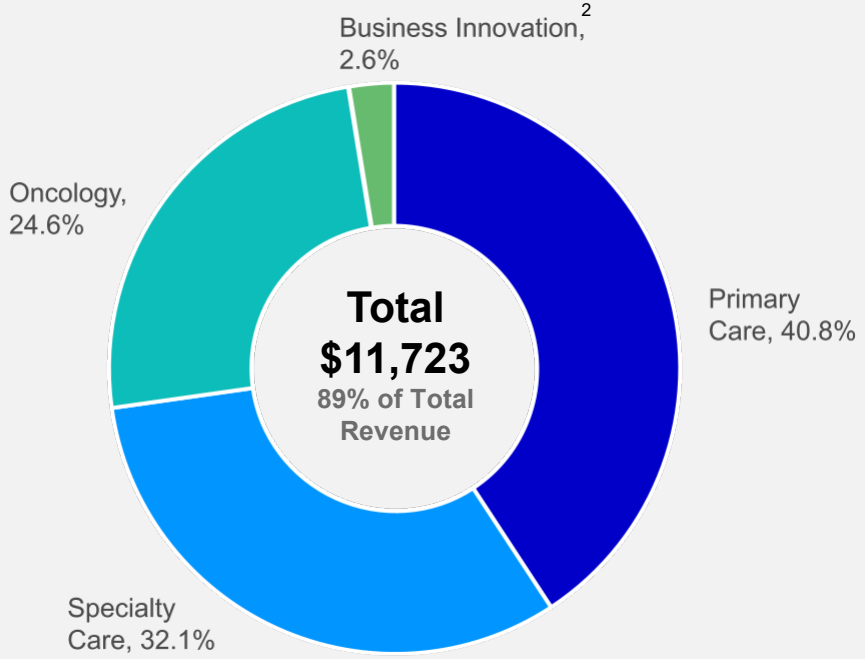
% Operational Growth

Prevnar family[3]	Eliquis[4]	Comirnaty[5]	Ibrance	Vyndaqel family[6]	Xeljanz	Abrysvo (OA)
15%	3%	-70%	-3%	47%	1%	*

1. Product percentages are calculated using total company revenue as denominator. 2. Business Innovation is an operating segment established in Q1 2023 that includes Pfizer CentreOne, the company's global contract development and manufacturing organization and a leading supplier of specialty active pharmaceutical ingredients, and Pfizer Ignite, a recently launched offering that provides strategic guidance and end-to-end R&D services to select innovative biotech companies that align with Pfizer's R&D focus areas. 3. Prevnar family includes revenues from Prevnar 13/Prevenar 13 (pediatric and adult) and Prevnar 20/Apexxnar (pediatric and adult). 4. Eliquis alliance revenues & direct sales. 5. See Slides 25-26 for definitions. 6. Vyndaqel family includes global revenues from Vyndaqel, as well as revenues for Vyndamax in the U.S. and Vynmac in Japan.
*Indicates calculation not meaningful.

Q3 2023 Summary Figures (2 of 2)

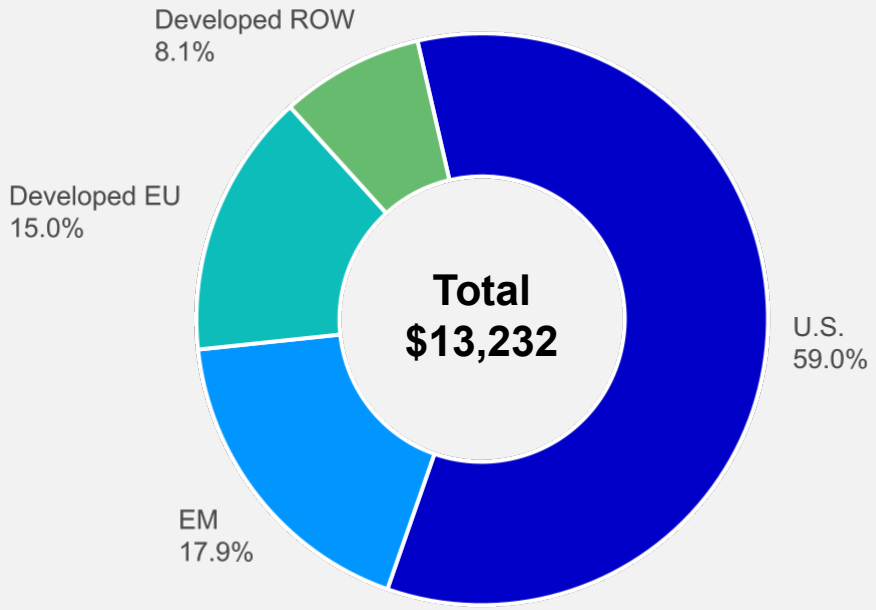
Revenue by Customer Group, Ex-COVID[1] *($M)*



% Operational Growth Ex-COVID[1]

Primary Care	Specialty Care	Oncology	Business Innovation[2]	Total
22%	12%	-5%	-7%	10%

Revenue by Geography[3] *($M)*



% Operational Growth

U.S.[4]	EM	Dev EU	Dev ROW	Total
-44%	-24%	-40%	-52%	-41%

1. Excludes Comirnaty direct sales and alliance revenues as well as Paxlovid revenues. Product percentages are calculated using $11,723M as denominator, as opposed to total company revenue. 2. Business Innovation is an operating segment established in Q1 2023 that includes Pfizer CentreOne, the company's global contract development and manufacturing organization and a leading supplier of specialty active pharmaceutical ingredients, and Pfizer Ignite, a recently launched offering that provides strategic guidance and end-to-end R&D services to select innovative biotech companies that align with Pfizer's R&D focus areas.
3. Product percentages are calculated using total company revenue as denominator. 4. U.S. % presented here is % Reported Growth.
U.S.=United States; Dev EU=Developed Europe; Dev ROW=Developed Rest of the World; EM=Emerging Markets

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(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), Comirnaty (COVID-19 Vaccine, mRNA, 2023-2024 Formula), the Pfizer-BioNTech COVID-19 Vaccine (2023-2024 Formula), Comirnaty Original/Omicron BA.1, Comirnaty Original/Omicron BA.4/BA.5 and Comirnaty XBB.1.5. "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 $11 million for the first nine months of 2023 and $108 million for the first nine months of 2022.

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

(3) Adjusted income/(loss) and Adjusted diluted EPS/(LPS) are defined as U.S. GAAP net income/(loss) attributable to Pfizer Inc. common shareholders and Reported diluted EPS/(LPS) 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 the third quarter and the first nine months of 2023 and 2022 in Pfizer's earnings release furnished with Pfizer's Current Report on Form 8-K dated October 31, 2023. Adjusted income/(loss) and its components and Adjusted diluted EPS/(LPS) measures are not, and should not be viewed as, substitutes for U.S. GAAP net income/(loss) and its components and diluted EPS/(LPS)[(2)]. See the *Non-GAAP Financial Measure: Adjusted Income* section of Management's Discussion and Analysis of Financial Condition and Results of Operations in Pfizer's 2022 Annual Report on Form 10-K and the *Non-GAAP Financial Measure: Adjusted Income/(Loss)* section of Pfizer's earnings release furnished with Pfizer's Current Report on Form 8-K dated October 31, 2023 for a definition of each component of Adjusted income/(loss) as well as other relevant information.

(4) Pfizer does not provide guidance for GAAP Reported financial measures (other than revenues and acquired in-process R&D (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 October 1, 2023, except for signed transactions, if any, through mid-October 2023, which are expected to give rise to acquired IPR&D expenses during fiscal 2023.
- Reflects a non-cash revenue reversal of approximately $4.2 billion related to the return of an estimated 7.9 million treatment courses of U.S. government EUA-labeled Paxlovid expected in the fourth quarter of 2023.
- Reflects an anticipated negative revenue impact of approximately $0.2 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.

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- Reflects expected impacts from certain short-term headwinds, such as the U.S. approval for the Talzenna plus Xtandi combination for the treatment of adult patients with HRR gene-mutated mCRPC, versus an approval in the all-comers population; a shared-clinical decision-making recommendation for Abrysvo (Older Adult) from the CDC's ACIP, versus a routine recommendation; and recent tornado damage to Pfizer's facility in Rocky Mount, N.C.
- Exchange rates assumed are a blend of actual rates in effect through the third quarter of 2023 and end of September 2023 rates for the remainder of the year. Financial guidance reflects the anticipated unfavorable impact of approximately $1.0 billion on revenues and approximately $0.19 on Adjusted[(3)] diluted EPS 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[(3)] diluted EPS assumes diluted weighted-average shares outstanding of approximately 5.72 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 third quarter and first nine months for U.S. subsidiaries reflects the three and nine months ended on October 1, 2023 and October 2, 2022 while Pfizer's third quarter and first nine months for subsidiaries operating outside the U.S. reflects the three and nine months ended on August 27, 2023 and August 28, 2022.

(6) 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 because 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.

(7) The Pfizer-BioNTech COVID-19 Vaccine (2023-2024 Formula) and certain uses of Paxlovid have not been approved or licensed by the FDA. The Pfizer-BioNTech COVID-19 Vaccine (2023-2024 Formula) has been authorized by the FDA under an EUA to prevent COVID-19 in individuals aged 6 months through 11 years of age. Paxlovid has been authorized for emergency use by the FDA under an EUA for the treatment of mild-to-moderate COVID-19 in pediatric patients (12 years of age and older weighing at least 40 kg) who are at high risk for progression to severe COVID-19, including hospitalization or death. 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 U.S. Federal Food, Drug and Cosmetic Act unless the declaration is terminated or authorization revoked sooner. Please see the EUA Fact Sheets at www.covid19oralrx.com and www.cvdvaccine-us.com.

(8) 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 and product coverage). Numbers are estimates and in some cases use global volume, daily dosage and number of treatment days to facilitate calculations. 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 do not include comprehensive estimated patient counts from Ex-US Access & Affordability programs. Historical estimates may periodically be subject to revision due to restatements in the underlying data source.

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