A pipeline-driven transformation

SEB Nordic Seminar 2018

09 January 2018
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Agenda

Strategy status

Opportunities in 2018

- Business

- Pipeline & news flow

Summary

Antibody that blocks inhibitory signals from the tumour to cells of the immune system, resulting in enhanced anti-tumour immunity
Strategic priorities

1. Achieve scientific leadership
2. Return to growth
3. Be a great place to work
Focused strategy
Three therapy areas

Oncology  Cardiovascular and Metabolic Diseases  Respiratory

Commitment to further focus the portfolio
R&D productivity: Sustainable progress
A new AstraZeneca with science-based culture

Scientific publications
- High-impact publications
- Medium-impact publications
- Other publications

FDA BTDs granted in AZN’s main therapy areas 2016-2017

Sustainable level of potential new medicines in Phase II trials
- Oncology
- CVMD
- Respiratory
- Other

Source: Internal analysis. High-impact (rating > 15); medium-impact (rating > 5); other (rating < 5).

AstraZeneca (AZN) and industry peers/competitors (CP) 1-7.
Source: Internal analysis based on focr.org. Includes Breakthrough Therapy Designations (BTD) in the three main AstraZeneca therapy areas.
Late-stage pipeline news flow
Unprecedented activity level in ‘17

Significant patient benefits anticipated to support return to growth

Data & designations

1. The Committee for Medicinal Products for Human Use.
2. Chronic obstructive pulmonary disease.
2017: Already a defining year

Launches of new medicines from main therapy areas

Some of the key news flow opportunities in 2017

- **Imfinzi**
  - bladder cancer reg. decision

- **ZS-9**
  - hyperkalaemia reg. decision

- **Fasenra**
  - asthma reg. decision

- **Imfinzi**
  - NSCLC Stage III PACIFIC PFS

- **Imfinzi + treme**
  - NSCLC 1L MYSTIC PFS

- **Lynparza**
  - multiple cancers data readouts

- **Calquence**
  - blood cancers fast-to-market opportunity

Product Sales: An inflection point approaching
A new AstraZeneca is emerging from the patent losses

Absolute values and change at CER.
Growth Platforms: Solid Q3 with improving performance

<table>
<thead>
<tr>
<th></th>
<th>Q3 2017 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
<th>% Product Sales</th>
<th>YTD 2017 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
<th>% Product Sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Growth Platforms</td>
<td>3,760</td>
<td>6</td>
<td>60</td>
<td>77</td>
<td>11,055</td>
<td>4</td>
<td>66</td>
<td>75</td>
</tr>
<tr>
<td>Emerging Markets</td>
<td>1,515</td>
<td>10</td>
<td>-</td>
<td>-</td>
<td>4,519</td>
<td>7</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Respiratory</td>
<td>1,092</td>
<td>(2)</td>
<td>-</td>
<td>-</td>
<td>3,372</td>
<td>(3)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>New CVMD</td>
<td>873</td>
<td>7</td>
<td>-</td>
<td>-</td>
<td>2,543</td>
<td>5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Japan</td>
<td>578</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>1,645</td>
<td>5</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>New Oncology</td>
<td>339</td>
<td>73</td>
<td>-</td>
<td>-</td>
<td>876</td>
<td>97</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Total Product Sales for Growth Platforms are adjusted to remove duplication on a medicine and regional basis. Product Sales values at actual exchange rates; change at CER.
## Core Profit & Loss

<table>
<thead>
<tr>
<th></th>
<th>YTD 2017 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
<th>Q3 2017 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Revenue</strong></td>
<td>16,688</td>
<td>(3)</td>
<td>100</td>
<td>6,232</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>- Product Sales</td>
<td>14,665</td>
<td>(8)</td>
<td>88</td>
<td>4,882</td>
<td>(2)</td>
<td>78</td>
</tr>
<tr>
<td>- Externalisation Revenue</td>
<td>2,023</td>
<td>50</td>
<td>12</td>
<td>1,350</td>
<td>n/m</td>
<td>22</td>
</tr>
<tr>
<td><strong>Gross Margin</strong></td>
<td>81.8%</td>
<td>(1) pp</td>
<td>-</td>
<td>79.6%</td>
<td>(4) pp</td>
<td>-</td>
</tr>
<tr>
<td><strong>R&amp;D Expenses</strong></td>
<td>3,956</td>
<td>(2)</td>
<td>24</td>
<td>1,339</td>
<td>-</td>
<td>21</td>
</tr>
<tr>
<td><strong>SG&amp;A Expenses</strong></td>
<td>5,678</td>
<td>(5)</td>
<td>34</td>
<td>1,950</td>
<td>4</td>
<td>31</td>
</tr>
<tr>
<td><strong>Other Operating Inc. &amp; Exp.</strong></td>
<td>1,101</td>
<td>94</td>
<td>7</td>
<td>143</td>
<td>32</td>
<td>2</td>
</tr>
<tr>
<td><strong>Tax Rate</strong></td>
<td>18%</td>
<td>-</td>
<td>-</td>
<td>17%</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>EPS</strong></td>
<td>$2.98</td>
<td>(7)</td>
<td></td>
<td>$1.12</td>
<td>(17)</td>
<td></td>
</tr>
</tbody>
</table>

Absolute values at actual exchange rates; change at CER.
Gross Margin reflects Gross Profit derived from Product Sales, divided by Product Sales.
Externalisation Revenue
Sustainable income increased

Increasing contribution from Sustainable and Ongoing Externalisation Revenue, incl. MRK

Key observations

- Sustainable and Ongoing Externalisation Revenue annualising at >$500m in 2017
- MRK collaboration expected to provide further and increasing income in the years to come
  - $1.6bn this year - $1bn in Externalisation Revenue
  - $750m option payments in 2017-2019
  - Regular milestones; approval (~1/3) and sales-related (~2/3); mono and combo therapy
  - First milestone anticipated in 2018

Absolute values at actual exchange rates.
Continued progress and focus on cost discipline

- **Reduction in Core R&D costs**
  - YTD 2017: Down by 2%
  - FY 2017: Core R&D costs are expected to be broadly in line with those in FY 2016

- **Significant reduction in Core SG&A costs**
  - YTD 2017: Down by 5%
  - Q3 2017: Continued cost discipline; increase of 4% reflects comparative period, early investment in upcoming launches and Emerging Markets/China

Absolute values at actual exchange rates; change at CER.
FY 2017 guidance and capital-allocation priorities

**Guidance**

<table>
<thead>
<tr>
<th>Total Revenue</th>
<th>Core EPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low to mid single-digit percentage decline</td>
<td>Towards the favourable end of a low to mid teens percentage decline</td>
</tr>
</tbody>
</table>

**Capital-allocation priorities**

- Investment in the business
- Progressive dividend policy
- Strong, investment-grade credit rating
- Immediately earnings-accretive, value-enhancing opportunities
Agenda

Strategy status

Opportunities in 2018
  - Business
  - Pipeline & news flow

Summary

Antibody that blocks inhibitory signals from the tumour to cells of the immune system, resulting in enhanced anti-tumour immunity
**Oncology**
Quarterly sales now >$1bn

- **Total Oncology +19%**
  - Already 20% of total Product Sales

- **Six new medicines 2014-2020 with four delivered**
  - **Lynparza**
  - **Tagrisso**
  - **Imfinzi**: Strategic US launch May 2017 in bladder cancer 2L enabling awareness, account openings and formulary access. Steady progress; mid-single digit share of new patients / shared 3rd market position

- **Calquence**: Entry into blood cancers

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Oncology Product Sales
New medicines boosting growth

![Graph showing quarterly sales from Q1 2014 to Q3 2017](image)

- Other Oncology
- Zoladex
- Faslodex
- Iressa
- Lynparza
- Tagrisso
- Imfinzi

Absolute values at CER.
**Lynparza**

Global leader in DNA damage response

**Back to strong growth**

- **Europe**
  Steady progress in 2L ovarian cancer, despite capsule label

- **US**
  Returned to growth in Q3; strong launch of tablets and new broad label in OC\(^1\)

- **Next commercial milestones**
  - Tablets in Europe (H1 2018)
  - BC\(^2\) launch in US (H1 2018)
  - First launch in Japan; OC (H1 2018) followed by BC (H2 2018)

**US returned to growth in Q3**

**MRK collaboration status since H1 2017 Results announcement**

- Joint Steering Committee and subteams created and agreed commercial and development plans
- Collaboration infrastructure set up and agreed
- MRK sales reps will start promoting *Lynparza* in early 2018

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1. Ovarian cancer.
2. Breast cancer.

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Chart legend: Europe US Established Rest of World Emerging Markets

Absolute values at actual exchange rates.
Lung cancer: *Tagrisso* and *Imfinzi*

Quickly progressing with making medicines available to patients

- **US**
  Higher testing rates underpinned growth

- **Europe**
  Positive reimbursement decision in Germany

- **Japan**
  Testing rates $>$90%, 2L T790M penetration $\sim$80%

- **Emerging Markets**
  China launch progressing well

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**Tagrisso**

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>50</td>
<td>100</td>
<td>150</td>
<td>200</td>
<td>250</td>
<td>300</td>
</tr>
</tbody>
</table>

**Imfinzi**

Locally-advanced, unresectable NSCLC

- **Regulatory submissions**
  8

- **Other Q3 achievements**
  - ESMO presentation/NEJM publication
  - Global early-access programme initiated

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1. US, EU, Japan, Switzerland, Canada, Australia, Brazil, South Korea.

*Imfinzi* is not yet approved in lung cancer.
Agenda

Strategy status

Opportunities in 2018

- Business

- Pipeline & news flow

Summary

Antibody that blocks inhibitory signals from the tumour to cells of the immune system, resulting in enhanced anti-tumour immunity.
**Late-stage pipeline and key lifecycle medicines**  
Significant opportunities exist in all three therapy areas

<table>
<thead>
<tr>
<th>Oncology</th>
<th>Cardiovascular and Metabolic Diseases</th>
<th>Respiratory</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Lynparza</em>&lt;sup&gt;1, 2&lt;/sup&gt; multiple cancers</td>
<td><em>ZS-9</em>&lt;sup&gt;2&lt;/sup&gt; hyperkalaemia</td>
<td><em>Fasenra</em>&lt;sup&gt;1&lt;/sup&gt; severe, uncontrolled asthma&lt;sup&gt;2&lt;/sup&gt; / COPD</td>
</tr>
<tr>
<td><em>Tagrisso</em>&lt;sup&gt;1, 2&lt;/sup&gt; lung cancer</td>
<td><em>roxadustat</em>&lt;sup&gt;2&lt;/sup&gt; anaemia</td>
<td><em>PT010</em> COPD / asthma</td>
</tr>
<tr>
<td><em>Imfinzi</em>&lt;sup&gt;1, 2&lt;/sup&gt; multiple cancers</td>
<td></td>
<td><em>tezepelumab</em> severe, uncontrolled asthma</td>
</tr>
<tr>
<td><em>Calquence</em>&lt;sup&gt;1&lt;/sup&gt; blood cancers</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Imfinzi</em> + <em>treme</em> multiple cancers</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>moxetumomab</em> leukaemia</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>selumetinib</em> thyroid cancer</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>savolitinib</em> kidney cancer</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Calquence</em>&lt;sup&gt;1&lt;/sup&gt;</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Imfinzi</em> + <em>treme</em> multiple cancers</td>
<td></td>
<td></td>
</tr>
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<td><em>moxetumomab</em> leukaemia</td>
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<td></td>
</tr>
<tr>
<td><em>selumetinib</em> thyroid cancer</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>savolitinib</em> kidney cancer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Lifecycle development programme.  
2. Under regulatory review in major jurisdiction.  
Status as of 14 December 2017.
Oncology
Strategic priorities support the return to growth

<table>
<thead>
<tr>
<th>Multiple cancers</th>
<th>Lung cancers</th>
<th>Blood cancers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lynparza™ olaparib</td>
<td>TAGRISSO® osimertinib</td>
<td>IMFINZI™ durvalumab</td>
</tr>
<tr>
<td>Calquence® (acalabrutinib) 100 mg capsules</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Ovarian and breast cancers
- Lifecycle programme (2018+), incl. prostate cancer
- Merck collaboration

- 2nd line / T790Mm¹
- 1st line / EGFRm²
- Adjuvant EGFRm (2022+)

- Locally-advanced/Stage III, unresectable NSCLC³
- Lifecycle programme (2018+)

- First AstraZeneca medicine in blood cancer
- MCL⁴ initial indication
- Lifecycle programme (2019+)

Rich and early pipeline, including combinations

1. Substitution of threonine (T) with methionine (M) at position 790 of exon 20 mutation.
2. Epidermal growth factor receptor mutation.

¹ First / next data anticipated.
Lynparza
Significant opportunity to further expand through Merck collaboration

Extensive lifecycle programme underway

~14 Potential launches

1) Establish leadership
2) Expand patient segments
3) Add VEGF(r) combinations
4) New combinations and tumour types

1L SOLO-1 trial Data 2018
2L SOLO-2 trial Approved/under regulatory review
4L (US) Study 19 trial Approved
2016
2017
2018
2019+

Ovarian cancer

bevacizumab (VEGF) combo PAOLA-1 Data 2019

Ovarian cancer

cediranib (VEGFr) combo Data 2019

Pancreatic cancer

PROFOUND trial Data 2019+

Early breast cancer

OlympiA trial Data 2019+

Breast cancer

OlympiAD trial Under regulatory review/submission H1 2018

2018

Prostate cancer

Data 2019+

Imfinzi, Keytuda combos

MEDIOLA, new trials

DDR combos

WEE1 ATM ATR Aurora B

Status of Merck collaboration

• Collaboration infrastructure set up and agreed
• Joint steering committee and subteams created
• Agreed development plans
• More new trials expected to be announced in H1 2018

1. Vascular endothelial growth factor (receptor).
Lung cancer: *Tagrisso* and *Imfinzi*

<table>
<thead>
<tr>
<th>Early-stage disease</th>
<th>Late-stage disease</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Stage I-III</strong></td>
<td><strong>Stage IV 1st line</strong></td>
</tr>
<tr>
<td>Total 155k patients</td>
<td>Total 370k patients</td>
</tr>
<tr>
<td><em>Tagrisso</em>’s ADAURA trial</td>
<td>E.g. <em>Imfinzi</em>’s MYSTIC, PEARL trials</td>
</tr>
<tr>
<td>80k adjuvant patients</td>
<td>70k 1L EGFRm patients</td>
</tr>
<tr>
<td>No surgery</td>
<td>Wild type</td>
</tr>
<tr>
<td>Adjuvant</td>
<td>ALK EGFRm</td>
</tr>
</tbody>
</table>

| **Stage III**      | **Stage IV 2nd line** |
| Total 105k patients| Total 250k patients   |
| *Imfinzi*’s ADJUVANT trial | Wild type |
| 76k unresectable patients | T790M- EGFRm |
| Resectable         | ALK T790M+ EGFRm     |

Treated patients. Epidemiology: Internal estimates based on external market research, top eight countries, China generally includes a market-access adjustment.
Focus on establishing CV benefit in type-2 diabetes

**Farxiga**

### CVD-REAL

**Real-world observational study**

**SGLT2 inhibitors vs other glucose-lowering medicines**

<table>
<thead>
<tr>
<th>Database</th>
<th>N</th>
<th># of events</th>
<th>HR (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>US</td>
<td>143,264</td>
<td>424</td>
<td>0.44 (0.36, 0.54)</td>
</tr>
<tr>
<td>Norway</td>
<td>25,050</td>
<td>622</td>
<td>0.58 (0.50, 0.69)</td>
</tr>
<tr>
<td>Denmark</td>
<td>18,468</td>
<td>477</td>
<td>0.57 (0.48, 0.67)</td>
</tr>
<tr>
<td>Sweden</td>
<td>18,378</td>
<td>364</td>
<td>0.50 (0.41, 0.63)</td>
</tr>
<tr>
<td>UK</td>
<td>10,462</td>
<td>96</td>
<td>0.66 (0.44, 1.00)</td>
</tr>
<tr>
<td>Total</td>
<td>215,622</td>
<td>1983</td>
<td>0.54 (0.48, 0.60)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hazard Ratio</th>
<th>Favor SGLT2</th>
<th>Favor Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.25</td>
<td>~</td>
<td>~</td>
</tr>
<tr>
<td>0.50</td>
<td>~</td>
<td>~</td>
</tr>
<tr>
<td>1.00</td>
<td>~</td>
<td>~</td>
</tr>
<tr>
<td>2.00</td>
<td>~</td>
<td>~</td>
</tr>
</tbody>
</table>

- 51% reduction in all-cause mortality
- 39% reduction in risk of hospitalisation for heart failure
- 46% risk of composite endpoint of hospitalisation for heart failure and death from any cause

### DECLARE Phase III trial

- Primary efficacy endpoints
  - Superiority for MACE (CV death, non-fatal myocardial infarction or non-fatal stroke)
  - Superiority for the composite endpoint of CV death or hospitalisation for heart failure
- Primary safety endpoint
  - Non-inferiority for MACE
- Data anticipated in H2 2018

- **~17,000 patients**
  - Including patients with multiple CV risk factors (~10,000) or established CVD (~7,000)

Roxadustat
Potential first-in-class oral HIF-PHD inhibitor for anaemia of CKD

**Phase III programme**

<table>
<thead>
<tr>
<th>Patient population</th>
<th>Company</th>
<th>Phase III trial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaemia in CKD patients not receiving dialysis</td>
<td><strong>FIBROGEN</strong></td>
<td>ANDES</td>
</tr>
<tr>
<td>Anaemia in CKD patients receiving dialysis</td>
<td><strong>AstraZeneca</strong></td>
<td>OLYMPUS</td>
</tr>
<tr>
<td>Anaemia in newly-initiated dialysis patients</td>
<td><strong>FIBROGEN</strong></td>
<td>SIERRAS</td>
</tr>
<tr>
<td></td>
<td><strong>astellas</strong></td>
<td>ROCKIES</td>
</tr>
<tr>
<td></td>
<td><strong>AstraZeneca</strong></td>
<td>PYRENEES</td>
</tr>
</tbody>
</table>

**Targeting a competitive medicine profile**

**Non-dialysis patients** (against placebo)
- Superior haemoglobin increase
- Non-inferior on major adverse CV events (MACE) based on pooled analysis

**Dialysis patients** (against erythropoietin)
- Non-inferior haemoglobin increase
- Non-inferior, potentially superior MACE; pooled analysis

**Regulatory status**
- China rolling regulatory submission completed
- US regulatory submission anticipated in H2 2018

**Lifecycle programme started**
- Phase III in anaemia of myelodysplastic syndrome

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1. The MACE endpoint is event-driven.
   In partnership with Fibrogen and their collaborator Astellas.
Asthma: *Fasenra*

Targeted, anti-eosinophil medicine; recently launched in the US

**Fasenra (benralizumab) received US FDA approval for severe eosinophilic asthma**¹

<table>
<thead>
<tr>
<th>51%²</th>
<th>159mL³</th>
<th>75%⁵</th>
</tr>
</thead>
<tbody>
<tr>
<td>reduction in the annual asthma exacerbation rate versus placebo</td>
<td>Significant improvement in lung function as measured by forced expiratory volume in one second (FEV₁) versus placebo</td>
<td>median reduction in daily OCS⁴ use and discontinuation of OCS use in 52% of eligible patients</td>
</tr>
</tbody>
</table>

Life cycle programme

**Asthma**

- Autoinjector; GRECO Phase III trial readout anticipated in H2 2018

**COPD**

- Phase III VOYAGER programme is evaluating the efficacy and safety of *Fasenra* in patients with severe COPD
- Data readout anticipated in H2 2018

Under regulatory review in the EU, Japan and several other countries with decisions anticipated in H1 2018

¹ Based on the results from the Phase III trials SIROCCO, CALIMA and ZONDA. ² SIROCCO: 51% reduction in AER vs. placebo at week 48 (1.74 vs 1.52). ³ CALIMA: 28% reduction vs. placebo at week 56 (1.73 vs 1.01). ⁴ SRIROCOC: At 48 weeks, an improvement in FEV₁ of 385mL (mean change from baseline) vs. 235mL for placebo, total of 150mL increase in FEV₁. ⁵ SRIROCOC: At 48 weeks, an improvement in FEV₁ of 330mL (mean change from baseline) vs. 215mL for placebo, total of 115mL increase in FEV₁.

Source: US prescribing information.
Anifrolumab
Lupus Phase III on track for H2 2018

Large unmet patient need

Prevalence SLE (~615k)

Prevalence SLE extra-renal (~480k)

Treated moderate-severe (~265k)

Systemic Lupus Erythematosus (SLE) Responder Index 4 including OCS taper at day 365

Phase III SLE programme now fully recruited

- Phase III trials TULIP 1 and TULIP 2 both fully recruited
- Primary endpoints at 48 weeks driving data-readout timelines

Lifecycle programme

- Phase II subcutaneous administration trial fully recruited
- Phase II lupus nephritis trial ongoing

Phase III data in H2 2018
Regulatory submission in 2019

Epidemiology: Internal estimates based on external market research, top eight countries.

1. Odds Ratio.
### Late-stage pipeline news flow 2018 & 2019
Unlocking and realising potential of new medicine

<table>
<thead>
<tr>
<th>H1 2018</th>
<th>H2 2018</th>
<th>2019</th>
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<tr>
<td><strong>Regulatory decision</strong></td>
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<tr>
<td>Lynparza - ovarian cancer 2L (EU, JP)</td>
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<td>Lynparza - breast cancer (JP)</td>
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<tr>
<td>- breast cancer (US)</td>
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<td>Tagrisso - lung cancer (EU, JP)</td>
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<tr>
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<td>Imfinzi - lung cancer (PACIFIC) (EU, JP)</td>
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<tr>
<td>Imfinzi - lung cancer (PACIFIC) (US)</td>
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<td>Bydureon BCise - type-2 diabetes (EU)</td>
</tr>
<tr>
<td>Fasenra - severe, uncontrolled asthma(EU,JP)</td>
<td></td>
<td>Bevespi - COPD (EU)</td>
</tr>
</tbody>
</table>

| **Regulatory submission** | | |
| Lynparza - breast cancer (EU) | | Lynparza - ovarian cancer 1L |
| Imfinzi +/- treme - lung cancer 3L (ARCTIC) | | Imfinzi +/ treme - lung cancer 1L (NEPTUNE) |
| moxetumomab pasudotox - hairy cell leukaemia 3L | | Imfinzi +/- treme - lung cancer 1L (MYSTIC) |
| Bevespi - COPD (JP) | | - head & neck cancer 1L, 2L (KESTREL, EAGLE) |
| Duaklir - COPD (US) | | selumetinib - thyroid cancer |
| | | roxadustat - anaemia (US) |
| | | PT010 - COPD |

| **Key Phase III data readouts** | | |
| Lynparza - ovarian cancer 1L | | Lynparza - pancreatic cancer 1L |
| Imfinzi +/- treme | | Imfinzi + treme - lung cancer 1L (NEPTUNE) |
| - lung cancer 3L (ARCTIC) | | Farxiga - type-2 diabetes CVOT (DECLARE) |
| - lung cancer 1L (MYSTIC) (final OS) | | Fasenra - COPD |
| - head & neck cancer 1L, 2L (KESTREL, EAGLE) | | anifrolumab - lupus |
| selumetinib - thyroid cancer | | | |
| PT010 - COPD | | Lynparza - ovarian cancer 3L |
| | | Imfinzi - lung cancer (PACIFIC) (final OS) |
| | | Imfinzi +/- treme - lung cancer 1L (POSEIDON) |
| | | - bladder cancer 1L (DANUBE) |
| | | Farxiga - type-2 diabetes CVOT |
| Calquence - chronic lymphocytic leukaemia | | lanabecestat - Alzheimer’s disease |
| Brilinta - CAD|type-2 diabetes CVOT |
| Farxiga - type-2 diabetes CVOT (DECLARE) |
| Fasenra - COPD |
| anifrolumab - lupus |

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1. Cardiovascular outcomes trial.
2. Coronary artery disease.
Status as of 14 December 2017.
Agenda

Strategy status

Opportunities in 2018
  - Business
  - Pipeline & news flow

Summary

Antibody that blocks inhibitory signals from the tumour to cells of the immune system, resulting in enhanced anti-tumour immunity.
Pipeline-driven transformation gathers pace

A new AstraZeneca is steadily emerging from 2017

- YTD and Q3 2017 in line with expectations
  - Financials on track
  - Guidance reiterated/updated
  - Unprecedented pipeline news flow

- Business execution
  - Lynparza back to US growth, Tagrisso excels, Imfinzi PACIFIC regulatory submissions, Calquence entry into blood cancers
  - Emerging Markets, Brilinta and Farxiga continued solidly

- 11 new potential medicines in Phase III/under registration ahead of busy news flow
Q&A
Use of AstraZeneca webcast, conference call and presentation slides

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A pipeline-driven transformation