Investor Presentation
September 2016
Forward-looking statements

In order, among other things, to utilise the 'safe harbour' provisions of the US Private Securities Litigation Reform Act 1995, we are providing the following cautionary statement:

This document contains certain forward-looking statements with respect to the operations, performance and financial condition of the Group, including, among other things, statements about expected revenues, margins, earnings per share or other financial or other measures. Although we believe our expectations are based on reasonable assumptions, any forward-looking statements, by their very nature, involve risks and uncertainties and may be influenced by factors that could cause actual outcomes and results to be materially different from those predicted. The forward-looking statements reflect knowledge and information available at the date of preparation of this document and AstraZeneca undertakes no obligation to update these forward-looking statements. We identify the forward-looking statements by using the words 'anticipates', 'believes', 'expects', 'intends' and similar expressions in such statements. Important factors that could cause actual results to differ materially from those contained in forward-looking statements, certain of which are beyond our control, include, among other things: the loss or expiration of, or limitations to, patents, marketing exclusivity or trademarks, or the risk of failure to obtain and enforce patent protection; the risk of substantial adverse litigation/government investigation claims and insufficient insurance coverage; effects of patent litigation in respect of IP rights; exchange rate fluctuations; the risk that R&D will not yield new products that achieve commercial success; the risk that strategic alliances and acquisitions, including licensing and collaborations, will be unsuccessful; the impact of competition, price controls and price reductions; taxation risks; the risk of substantial product liability claims; the impact of any delays in the manufacturing, distribution and sale of any of our products; the impact of any failure by third parties to supply materials or services; the risk of failure of outsourcing; the risks associated with manufacturing biologics; the risk of delay to new product launches; the difficulties of obtaining and maintaining regulatory approvals for products; the risk of failure to adhere to applicable laws, rules and regulations; the risk of failure to adhere to applicable laws, rules and regulations relating to anti-competitive behaviour; the risk that new products do not perform as we expect; failure to achieve strategic priorities or to meet targets or expectations; the risk of an adverse impact of a sustained economic downturn; political and socio-economic conditions; the risk of environmental liabilities; the risk of occupational health and safety liabilities; the risk associated with pensions liabilities; the risk of misuse of social medial platforms and new technology; the risks associated with developing our business in emerging markets; the risk of illegal trade in our products; the risks from pressures resulting from generic competition; the risk of failure to successfully implement planned cost reduction measures through productivity initiatives and restructuring programmes; economic, regulatory and political pressures to limit or reduce the cost of our products; the risk that regulatory approval processes for biosimilars could have an adverse effect on future commercial prospects; the impact of failing to attract and retain key personnel and to successfully engage with our employees; the impact of increasing implementation and enforcement of more stringent anti-bribery and anti-corruption legislation; and the risk of failure of information technology and cybercrime. Nothing in this presentation / webcast should be construed as a profit forecast.
Q2 highlights
On track for the year; Oncology progressing very rapidly

Financials: On track with full-year guidance
Total Revenue reflects patent expiries and phasing of Externalisation Revenue
R&D investment stabilising and SG&A declining in line with commitments
EPS impacted by FluMist inventory write-down

Pipeline: Continued progression

Oncology
• Tagrisso: Positive Phase III
• Faslodex: Positive Phase III
• IO: Very rapid IO-IO combination recruitment; Phase III MYSTIC and ARCTIC fully recruited
• Lynparza: Fast Track Designation (US)

Respiratory & Autoimmunity
• Benralizumab: Two positive Phase III
• Brodalumab: FDA Advisory Committee positive recommendation

Cardiovascular & Metabolic Diseases
• Qtern (saxa/dapa): Approval (EU); resubmission acceptance (US)
• ZS-9: Complete Response Letter (US)
• Brilinta: Phase III THEMIS fully recruited
Building a pure-play innovator in three therapy areas
Focusing and slimming down portfolio to optimise resource allocation

1. Accessing Therapy Area (TA) capability / upside
- BACE inhibitor
- Brodalumab
- Tralokinumab (AD$^1$)
- Durvalumab (haematology)

2. Increasing commercial reach
- Movantik/Moventig
- Plendil
- Anaesthetics

3. Streamlining portfolio / divestment
- Myalept
- Imdur

- R&D investment in main TAs
- Dividend commitment

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1. AD = Atopic Dermatitis
Unprecedented recruitment into IO clinical trials

Strong momentum in Immuno-Oncology

First patient dosed
Last patient commenced dosing
Data expected

- Urothelial bladder cancer
- Head and neck cancer
- Lung cancer

Today

- **CONDOR**
- **HAWK**
- **PACIFIC**
- **ARCTIC**
- **Mystic**
- **NEPTUNE***
- **ADJUVANT***
- **KESTREL***
- **EAGLE***
- **DANUBE***

- **Q1** 2014
- **Q2** 2014
- **Q3** 2014
- **Q4** 2014
- **Q1** 2015
- **Q2** 2015
- **Q3** 2015
- **Q4** 2015
- **Q1** 2016
- **Q2** 2016
- **Q3** 2016
- **Q4** 2016
- **H1** 2017
- **H2** 2017
- **2018+**

* Recruiting

Data expected
Growth Platforms: Continuing progress
Now account for more than 60% of Total Revenue

<table>
<thead>
<tr>
<th></th>
<th>Q2 2016 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
<th>H1 2016 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Growth Platforms</td>
<td>3,744</td>
<td>8</td>
<td>67</td>
<td>7,179</td>
<td>7</td>
<td>61</td>
</tr>
<tr>
<td>Emerging Markets</td>
<td>1,448</td>
<td>9</td>
<td>-</td>
<td>2,913</td>
<td>7</td>
<td>-</td>
</tr>
<tr>
<td>Respiratory</td>
<td>1,226</td>
<td>1</td>
<td>-</td>
<td>2,433</td>
<td>1</td>
<td>-</td>
</tr>
<tr>
<td>Diabetes</td>
<td>645</td>
<td>13</td>
<td>-</td>
<td>1,223</td>
<td>18</td>
<td>-</td>
</tr>
<tr>
<td>Japan</td>
<td>569</td>
<td>1</td>
<td>-</td>
<td>998</td>
<td>(3)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Brilinta</strong></td>
<td><strong>214</strong></td>
<td><strong>51</strong></td>
<td>-</td>
<td><strong>395</strong></td>
<td><strong>48</strong></td>
<td>-</td>
</tr>
<tr>
<td>New Oncology</td>
<td>152</td>
<td>n/m</td>
<td>-</td>
<td>251</td>
<td>n/m</td>
<td>-</td>
</tr>
</tbody>
</table>

Absolute values at actual exchange rates. Growth rates at CER.
Respiratory
Emerging Markets offsetting performance in established regions

Growth supported by new medicines

Symbicort now the leading inhaled respiratory medicine globally

US, Europe competitive
Emerging Markets strength

US -2%
• Overall solid volume growth offset by managed-care implementation
• New medicine Daliresp doing well

Europe -11%
• Overall lower market growth; unchanged price pressure
• New bronchodilators Duaklir, Eklira grew nicely

Emerging Markets +23%
• Increase in penetration continued
  • Pulmicort +23%
  • Symbicort +25%

Absolute values at actual exchange rates. Growth rates at CER and for H1 unless otherwise stated.

Source: IMS
Brilinta

Ongoing strong growth

Consistent growth across all markets

Brilinta now #1 US oral anti platelet (total prescriptions)

Global execution of lifecycle management

US
- New ACC/AHA guidelines (preferred over clopidogrel in ACS) supported stronger growth

Europe
- Encouraging performance supported by indication leadership across markets and the post-MI approval

Emerging Markets
- China largest market and strongest growth (+181%) driven by improved and innovative market access

Absolute values at actual exchange rates. Growth rates at CER

Source: IMS Health NPA, weekly data through w/e 1 July 2016
Global franchise growth

Farxiga now largest AstraZeneca Diabetes medicine

<table>
<thead>
<tr>
<th></th>
<th>Q2 2016</th>
<th>H1 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farxiga</td>
<td>+13%</td>
<td>+18%</td>
</tr>
<tr>
<td>Onglyza</td>
<td>+11%</td>
<td>+11%</td>
</tr>
<tr>
<td>Bydureon</td>
<td>-7%</td>
<td>+6%</td>
</tr>
<tr>
<td>Byetta</td>
<td>+65%</td>
<td>+88%</td>
</tr>
<tr>
<td>Others</td>
<td>-6%</td>
<td>-19%</td>
</tr>
</tbody>
</table>

$\text{Farxiga global leader in SGLT2 class by volume}$

- Farxiga: 42%
- Competitor #1: 19%
- Competitor #2: 29%
- Other SGLT-2s: 10%

Encouraging growth in all regions

**US +9%**
- Growing market with competition for market share
- *Farxiga* +82% from improved access

**Europe +27%**
- Growth across all classes; benefit from increased market presence
- *Forxiga* leading the SGLT2 class

**Emerging Markets +44%**
- Strong growth in oral medicines; *Forxiga* +135%, *Onglyza* +16%

Absolute values at actual exchange rates. Growth rates at CER and for H1 unless otherwise stated.

Volume PDOT (Patient Days On Therapy)
Source: IMS Health MIDAS, May 2016
Emerging Markets
Growth on track

Meeting the long-term target

Emerging Markets

- FY 2012: +4%
- FY 2013: +8%
- FY 2014: +12%
- FY 2015: +12%

China

- FY 2012: +17%
- FY 2013: +19%
- FY 2014: +22%
- FY 2015: +15%

Broad-based performance

- Established portfolio benefiting from better diagnosis, access and patient demographics/trends
- Balanced presence: Less than half of Product Sales in China. Brazil +13%, Russia +12%
- Challenging conditions in some Latin-American and Middle-Eastern markets
- New medicines and pipeline well-positioned for emerging patient needs
  - Tagrisso China regulatory submission H2 2016

Long-term target: Mid-to-high single-digit growth
Japan
Performance recovering from April price cuts

Returned to growth in Q2 despite biennial price cuts from April 2016

<table>
<thead>
<tr>
<th></th>
<th>Q2 2016</th>
<th>H1 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crestor</td>
<td>+1%</td>
<td></td>
</tr>
<tr>
<td>Nexium</td>
<td>+7%</td>
<td></td>
</tr>
<tr>
<td>Symbicort</td>
<td>-1%</td>
<td>-11%</td>
</tr>
<tr>
<td>Others</td>
<td>-3%</td>
<td>-1%</td>
</tr>
</tbody>
</table>

Leading dynamic patient share

- Symbicort: 39%
- Nexium: 25% 22%
- Crestor: 28% 21% 22% 33% 22%
- AstraZeneca
- Competitor 1
- Competitor 2

Established medicines being supported by New Oncology

- Improving market rank despite competitive challenges; now #6 company, up from #8 in 2015
- Tagrisso launched 25 May; initial uptake encouraging (Q2 Product Sales $15m)

Long-term target: Low single-digit growth

Absolute values at actual exchange rates. Growth rates at CER

Source: IMS, May 2016
New Oncology
Launches progressing well

**Tagrisso** (lung cancer)

- Global Product Sales $143m, including Japan since 25 May
- FDA approval of ctDNA test now expected H2 2016

**Tagrisso patient numbers**

〜3,000 Patients’ lives changed

**Lynparza** (ovarian cancer)

- Global Product Sales $98m
- Launched in 29 countries; regulatory reviews ongoing in 9

Absolute values at actual exchange rates. Growth rates at CER and for H1 unless otherwise stated.
## Reported Profit & Loss

<table>
<thead>
<tr>
<th></th>
<th>H1 2016 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
<th>Q2 2016 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Revenue</strong></td>
<td>11,718</td>
<td>(3)</td>
<td></td>
<td>5,603</td>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td>Product Sales</td>
<td>11,034</td>
<td>(2)</td>
<td>94</td>
<td>5,469</td>
<td>(5)</td>
<td>98</td>
</tr>
<tr>
<td>Externalisation Revenue</td>
<td>684</td>
<td>(12)</td>
<td>6</td>
<td>134</td>
<td>(72)</td>
<td>2</td>
</tr>
<tr>
<td><strong>Cost Of Sales</strong></td>
<td>(2,066)</td>
<td>(11)</td>
<td>18</td>
<td>(1,062)</td>
<td>(2)</td>
<td>19</td>
</tr>
<tr>
<td><strong>Gross Profit</strong></td>
<td>9,652</td>
<td>(1)</td>
<td>82</td>
<td>4,541</td>
<td>(12)</td>
<td>81</td>
</tr>
<tr>
<td><strong>R&amp;D Expense</strong></td>
<td>(2,945)</td>
<td>6</td>
<td>25</td>
<td>(1,465)</td>
<td>1</td>
<td>26</td>
</tr>
<tr>
<td><strong>SG&amp;A Expense</strong></td>
<td>(5,624)</td>
<td>-</td>
<td>48</td>
<td>(3,052)</td>
<td>5</td>
<td>54</td>
</tr>
<tr>
<td><strong>Tax Rate</strong></td>
<td>14%</td>
<td></td>
<td></td>
<td>(3)%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Reported EPS

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reported EPS</strong></td>
<td>$0.51</td>
<td>(45)</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

Absolute values at actual exchange rates. Growth rates at CER.
# Core Profit & Loss

**Phasing of Externalisation Revenue; cost discipline progressing**

<table>
<thead>
<tr>
<th></th>
<th>H1 2016 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
<th>Q2 2016 $m</th>
<th>% change</th>
<th>% Total Revenue</th>
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</thead>
<tbody>
<tr>
<td><strong>Total Revenue</strong></td>
<td>11,718</td>
<td>(3)</td>
<td></td>
<td>5,603</td>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td><strong>Product Sales</strong></td>
<td>11,034</td>
<td>(2)</td>
<td>94</td>
<td>5,469</td>
<td>(5)</td>
<td>98</td>
</tr>
<tr>
<td><strong>Externalisation Revenue</strong></td>
<td>684</td>
<td>(12)</td>
<td>6</td>
<td>134</td>
<td>(72)</td>
<td>2</td>
</tr>
<tr>
<td><strong>Cost Of Sales</strong></td>
<td>(1,980)</td>
<td>5</td>
<td>17</td>
<td>(1,014)</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td><strong>Gross Profit</strong></td>
<td>9,738</td>
<td>(4)</td>
<td>82</td>
<td>4,589</td>
<td>(13)</td>
<td>82</td>
</tr>
<tr>
<td><strong>R&amp;D Expense</strong></td>
<td>(2,813)</td>
<td>9</td>
<td>24</td>
<td>(1,384)</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td><strong>SG&amp;A Expense</strong></td>
<td>(4,227)</td>
<td>(5)</td>
<td>36</td>
<td>(2,100)</td>
<td>(3)</td>
<td>37</td>
</tr>
<tr>
<td><strong>Tax Rate</strong></td>
<td>17%</td>
<td></td>
<td></td>
<td>17%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Core EPS**

|                 | $1.78 | (20) | $0.83 | (31) |

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

Decline in Core R&D costs from Q4 2015 as committed

- Consistent sequential declines in Core R&D costs
- Investment reflected the number of potential medicines in pivotal trials

Core SG&A cost reduction being steadily delivered

- Efficiency savings in sales and marketing operations
- Further reductions in IT costs

Absolute values at CER (2016)
A year of challenges and opportunities

FY 2016 GUIDANCE (CER)

- Total Revenue: Low to mid single-digit percentage decline
- Core EPS: Low to mid single-digit percentage decline
Capital-allocation priorities

- Investment in the business
- Progressive dividend policy
- Strong, investment-grade credit rating
- Earnings-accretive opportunities
Debt profile and credit ratings

- **Moody’s**: A3 Stable outlook
- **Standard & Poor’s**: A- Stable outlook

Foreign currency converted at June 2016 spot rates
Q2 late-stage pipeline headlines
Main therapy areas

Respiratory & Autoimmunity

• benralizumab - severe asthma: Two positive Phase III trials
• brodalumab - psoriasis: FDA Advisory Committee unanimously recommends approval

Cardiovascular & Metabolic Diseases

• Brilinta - CV disease: Phase III THEMIS trial fully recruited
• Qtern & saxa/dapa - type-2 diabetes: Approval (EU); resubmission acceptance (US)
• ZS-9 - hyperkalaemia: Complete Response Letter (US)

Oncology

• Faslodex - breast cancer: Positive Phase III trial (1st-line mBC HR+)
• Lynparza - gastric cancer: Phase III endpoints not met
  - 2nd-line ovarian cancer: Fast Track Designation (US)
• Tagrisso - lung cancer: Positive Phase III trial (2nd-line confirmatory trial)
• selumetinib - differentiated thyroid cancer: Orphan Drug Designation (US)
• durva + treme - lung cancer: Phase III MYSTIC, ARCTIC trials fully recruited

Status since the prior results announcement on 28 April 2016
Benralizumab
Potential best-in-disease eosinophil-depleting antibody for severe asthma

- Reduction in eosinophils and asthma exacerbation
- Improvement in overall lung function
- Simple, convenient dosing and administration

Exacerbation rate reduction Phase IIb trial

~10% of asthma cases are severe
~40% of these cases are uncontrolled
8x increased risk of mortality in severe, uncontrolled asthma

Phase III trial results at the European Respiratory Society meeting
ASCO 2016 take-away messages
Well-positioned with deep and broad pipeline

1. **Immuno-Oncology**
   - Durvalumab: Strong data in 2nd line; PDL1-positive bladder cancer
   - Durva + treme: IO-IO combo supported by competitor data; key newsflow from H1 2017

2. **Lynparza and DNA Damage Response (DDR)**
   - *Lynparza*: Study 19 with compelling early survival data in ovarian cancer; lifecycle on track
   - AZD1775 (Wee1) and subsequent DDR medicines advancing fast in the clinic

3. **Tagrisso** (lung cancer)
   - BLOOM trial showed efficacy in CNS disease, a key differentiator
   - Early 1st-line data encouraging; lifecycle development with 1st-line data in 2017

4. **Haematology**
   - Acalabrutinib: Impressive efficacy in front-line CLL with a differentiated safety profile
   - Celgene collaboration on track and first clinical trials have initiated

---

1. TKI = Tyrosine Kinase Inhibitor
## Immuno-Oncology: AstraZeneca’s path to market

**Key Phase III data coming soon; H1 2017 key to success**

<table>
<thead>
<tr>
<th>Bladder cancer</th>
<th>Lung cancer</th>
<th>Head &amp; Neck cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>MYSTIC 1st line (PFS)</td>
<td>ARCTIC 3rd line PD-L1 neg.</td>
<td>HAWK (Phase II)¹ 2nd line PD-L1 pos.</td>
</tr>
<tr>
<td>MYSTIC 1st line (OS)</td>
<td>PACIFIC Stage III unresectable</td>
<td>CONDOR (Phase II)¹ 2nd line PD-L1 neg.</td>
</tr>
<tr>
<td>MYSTIC 1st line (OS)</td>
<td>NEPTUNE 1st line (OS)</td>
<td>KESTREL 1st line</td>
</tr>
<tr>
<td>NEPTUNE 1st line (OS)</td>
<td></td>
<td>EAGLE 2nd line</td>
</tr>
</tbody>
</table>

**DANUBE**
1st-line bladder

| H2 2016 | H1 2017 | H2 2017 | 2018 |

### Potential leadership in IO-IO combinations across multiple cancer types

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1. Potential fast-to-market opportunity ahead of randomised, controlled trials
**Lynparza: Ovarian cancer**

**Early long-term survival in BRCA-mutated patients**

- First PARP inhibitor to show long-term overall survival data
- Long-term responders indicate Immuno-Oncology-like benefit with 15% of patients on treatment for five years
- sBRCA-mutated patients show similar benefit to gBRCA
- Future patient selection to be based on HRRm test, including BRCAwt/HRRm patients (~8% of all ovarian cancer patients)

### Overall survival

- **Lynparza**
- **Placebo**

<table>
<thead>
<tr>
<th>Time from randomisation (months)</th>
<th>Number of patients at risk:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Lynparza</strong></td>
</tr>
<tr>
<td>0</td>
<td>74</td>
</tr>
<tr>
<td>6</td>
<td>69</td>
</tr>
<tr>
<td>12</td>
<td>65</td>
</tr>
<tr>
<td>18</td>
<td>56</td>
</tr>
<tr>
<td>24</td>
<td>50</td>
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<td>30</td>
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<td>42</td>
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<tr>
<td>48</td>
<td>27</td>
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<td>66</td>
<td>23</td>
</tr>
<tr>
<td>72</td>
<td>21</td>
</tr>
<tr>
<td>78</td>
<td>15</td>
</tr>
<tr>
<td>84</td>
<td>11</td>
</tr>
</tbody>
</table>

|                               | **Placebo**                |
| 0                              | 62                         |
| 6                              | 58                         |
| 12                             | 52                         |
| 18                             | 40                         |
| 24                             | 34                         |
| 30                             | 29                         |
| 36                             | 25                         |
| 42                             | 20                         |
| 48                             | 19                         |
| 54                             | 15                         |
| 60                             | 13                         |
| 66                             | 10                         |
| 72                             | 6                          |
| 78                             | 0                          |
| 84                             | 0                          |

### Deaths

<table>
<thead>
<tr>
<th></th>
<th>Lynparza (n=74)</th>
<th>Placebo (n=62)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deaths, n (%)</td>
<td>47 (64)</td>
<td>48 (77)</td>
</tr>
<tr>
<td>Median OS, months</td>
<td>34.9</td>
<td>30.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Lynparza</th>
<th>Placebo</th>
</tr>
</thead>
<tbody>
<tr>
<td>HR</td>
<td>0.62</td>
<td>0.62</td>
</tr>
<tr>
<td>95% CI</td>
<td>0.41-0.94</td>
<td>0.41-0.94</td>
</tr>
<tr>
<td>Nominal P</td>
<td>0.02480</td>
<td>0.02480</td>
</tr>
</tbody>
</table>

Maturity: 70%
Criterion for statistical significance not met (P<0.0095)

Source: ASCO 2016, abstract 5501
Advancing chemotherapy-free options, extending survival

**DDR: Beyond Lynparza**

- Establish *Lynparza* leadership as monotherapy
- Launch AZD1775 (Wee1) monotherapy and combination
- Expand *Lynparza* beyond BRCA
- Launch *Lynparza* combinations
- Deliver next-generation DDR medicines (AZD0156, AZD2811, AZD6738 and others)

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**Scientific leadership in DDR**

- 2016 - 2018
- 2019 - 2021
- 2022 - 2025
### Pipeline newsflow in 2016 & 2017

Realising potential of new medicines

<table>
<thead>
<tr>
<th>H2 2016</th>
<th>H1 2017</th>
<th>H2 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Regulatory decisions</strong></td>
<td>cediranib - ovarian cancer (EU)</td>
<td>brodalumab - psoriasis (EU)</td>
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<td>brodalumab - psoriasis (US)</td>
<td>saxa/dapa - type-2 diabetes (US)</td>
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<td>ZS-9 - hyperkalaemia (EU)</td>
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<td><strong>Regulatory submissions</strong></td>
<td>benralizumab - severe asthma (US, EU)</td>
<td>Brilinta - PAD²</td>
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<td>ZS-9 - hyperkalaemia (US)</td>
<td>Lynparza - breast, ovarian (2nd line)</td>
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<td></td>
<td>roxadustat - anaemia (CN)</td>
<td>Lynparza - ovarian cancer (1st line)</td>
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<td>Tagrisso - lung cancer (CN)</td>
<td>durvalumab - lung cancer</td>
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<td></td>
<td>acalabrutinib - blood cancer (US)¹</td>
<td>selumetinib - lung cancer</td>
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<td>durvalumab - head &amp; neck cancer (HAWK)¹ (US)</td>
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<td>durva + treme</td>
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<td>- head&amp;neck cancer(CONDOR)¹(US)</td>
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<td><em><em>Key Phase III/II</em> data readouts</em>*</td>
<td>Brilinta - PAD²</td>
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<td>durvalumab - H&amp;N cancer(HAWK)¹</td>
<td>durvalumab - lung cancer(PACIFIC)</td>
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<td>acalabrutinib - blood cancer¹</td>
<td>durva + treme</td>
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<td>- lung cancer (MYSTIC, ARCTIC)</td>
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<td>tralokinumab - severe asthma</td>
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<td>roxadustat - anaemia³</td>
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<td>- head &amp; neck cancer (KESTREL)</td>
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<td>moxetumumab - leukaemia</td>
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</tbody>
</table>

1. Potential fast-to-market opportunity ahead of randomised, controlled trials
2. PAD = Cardiovascular outcomes in Peripheral Arterial Disease
3. AstraZeneca-sponsored trial
Pipeline-driven transformation on track

• Financials on track - reconfirming guidance for the year

• 14 new potential medicines in Phase III/under registration

• Oncology pipeline progressing very rapidly, in particular IO-IO combination programmes

• Strong newsflow over next 18 months