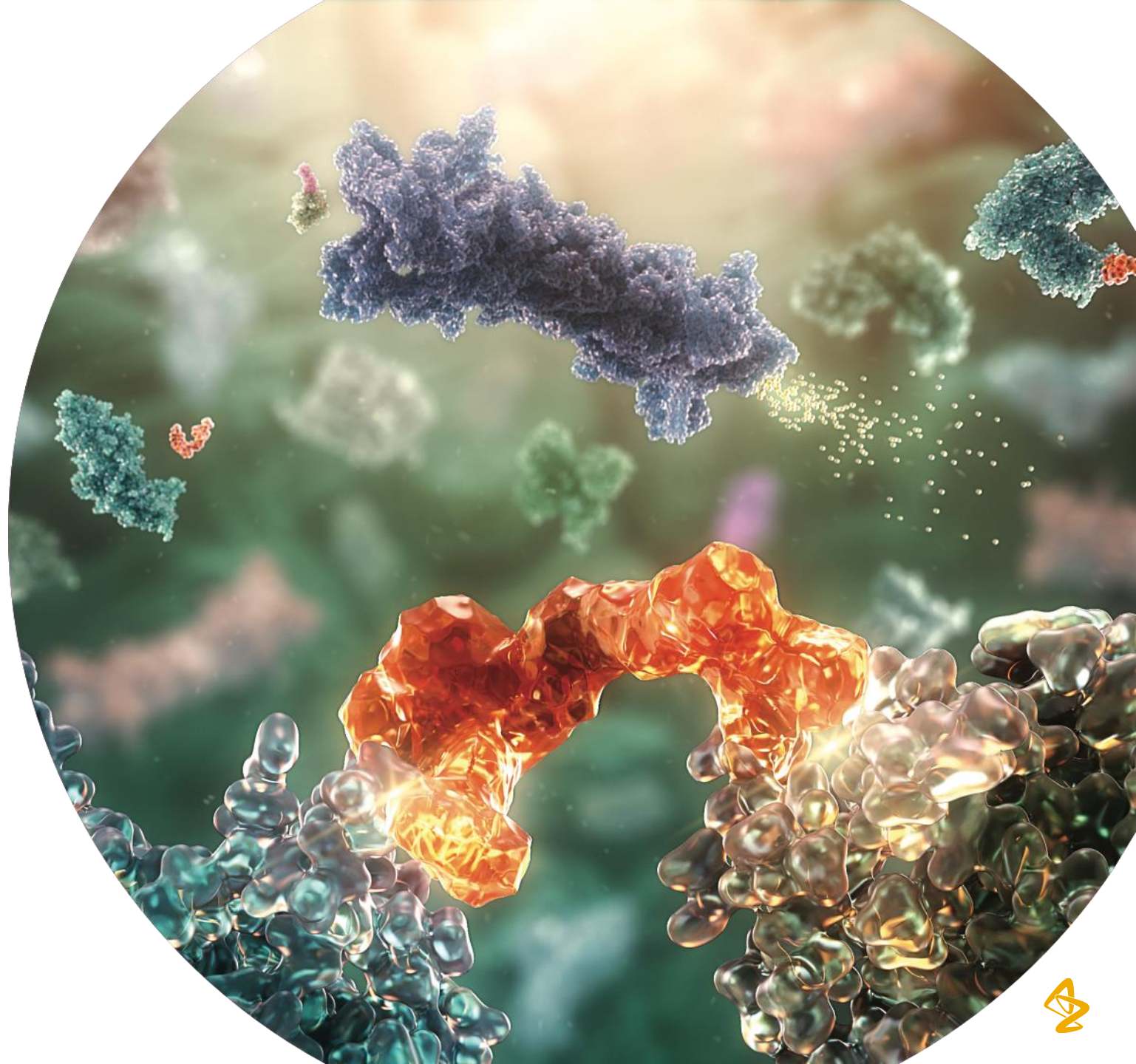




Year-to-date and Q3 2022 Results

Conference call and webcast for
investors and analysts

10 November 2022

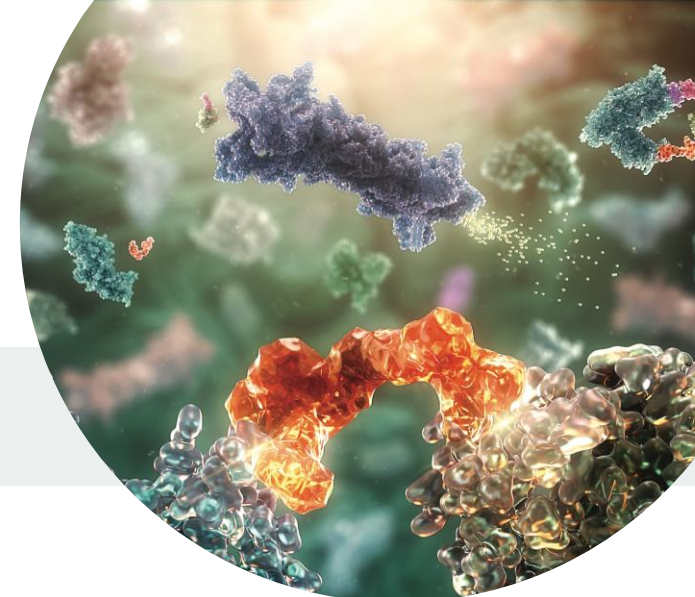


Forward-looking statements

In order, among other things, to utilise the 'safe harbour' provisions of the US Private Securities Litigation Reform Act of 1995, AstraZeneca (hereafter 'the Group') provides 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 the Group believes its 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 the Group undertakes no obligation to update these forward-looking statements. The Group identifies 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 the Group's control, include, among other things: the risk of failure or delay in delivery of pipeline or launch of new medicines; the risk of failure to meet regulatory or ethical requirements for medicine development or approval; the risk of failure to obtain, defend and enforce effective IP protection and IP challenges by third parties; the impact of competitive pressures including expiry or loss of IP rights, and generic competition; the impact of price controls and reductions; the impact of economic, regulatory and political pressures; the impact of uncertainty and volatility in relation to the UK's exit from the EU; the risk of failures or delays in the quality or execution of the Group's commercial strategies; the risk of failure to maintain supply of compliant, quality medicines; the risk of illegal trade in the Group's medicines; the impact of reliance on third-party goods and services; the risk of failure in information technology, data protection or cybercrime; the risk of failure of critical processes; any expected gains from productivity initiatives are uncertain; the risk of failure to attract, develop, engage and retain a diverse, talented and capable workforce; the risk of failure to adhere to applicable laws, rules and regulations; the risk of the safety and efficacy of marketed medicines being questioned; the risk of adverse outcome of litigation and/or governmental investigations; the risk of failure to adhere to increasingly stringent anti-bribery and anti-corruption legislation; the risk of failure to achieve strategic plans or meet targets or expectations; the risk of failure in financial control or the occurrence of fraud; the risk of unexpected deterioration in the Group's financial position; and the impact that global and/or geopolitical events such as the COVID-19 pandemic and the Russia-Ukraine war, may have or continue to have on these risks, on the Group's ability to continue to mitigate these risks, and on the Group's operations, financial results or financial condition. Nothing in this document, or any related presentation/webcast, should be construed as a profit forecast.



YTD/Q3 2022 Results: conference call agenda



CEO Opening Remarks

Pascal Soriot

Chief Executive Officer

Financial Results

Aradhana Sarin

Chief Financial Officer

Oncology

Dave Fredrickson

EVP, Oncology Business

Susan Galbraith

EVP, Oncology R&D

BioPharmaceuticals

Ruud Dobber

EVP, BioPharmaceuticals Business

Mene Pangalos

EVP, BioPharmaceuticals R&D

Rare Disease

Marc Dunoyer

Chief Executive Officer, Alexion

CEO Closing Remarks, Q&A

Pascal Soriot

Chief Executive Officer

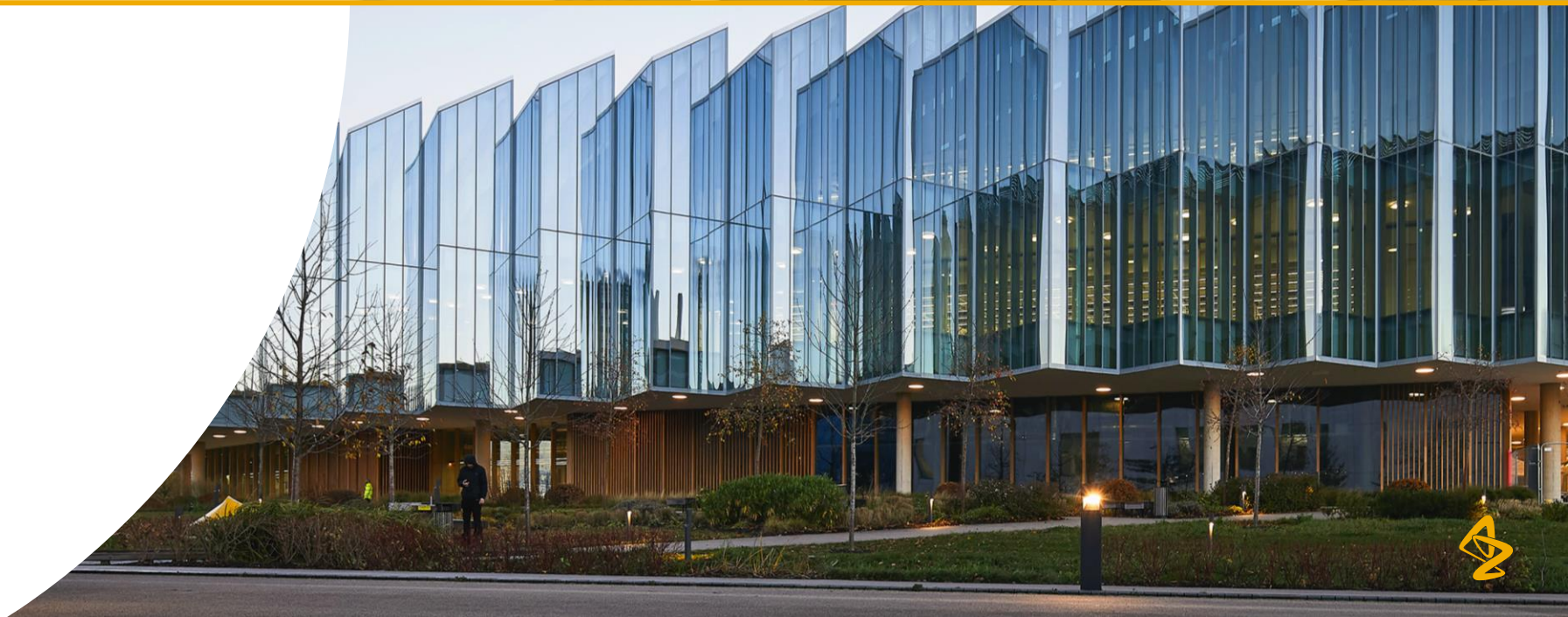




CEO Opening Remarks

Pascal Soriot

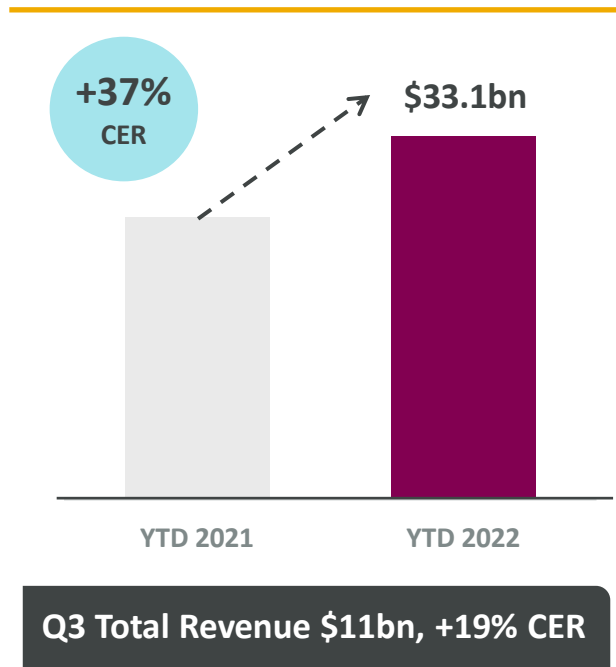
Chief Executive Officer



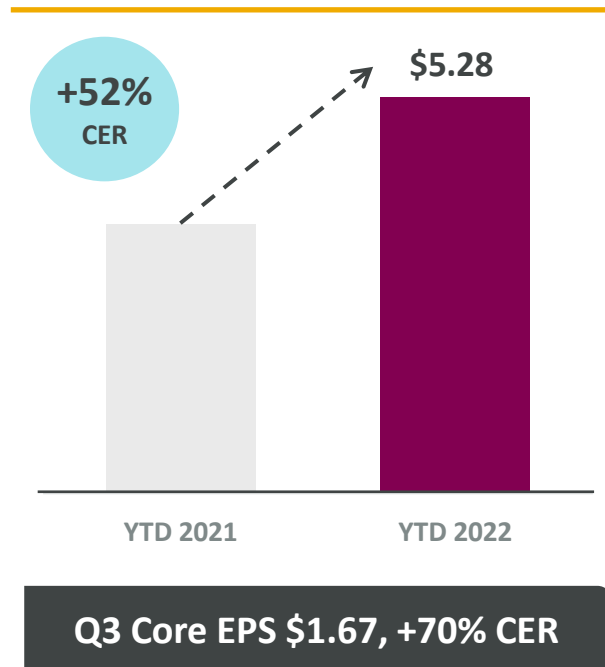
YTD and Q3 2022 Results: key updates

Robust, broad-based performance supports FY 2022 Core EPS guidance upgrade

Total Revenue



Core EPS



Broad-based performance YTD

across our diverse disease areas

Total Revenue (growth rates at CER):

- > **Oncology** \$11.5bn, +24%
- > **BioPharmaceuticals¹** \$15.1bn, +21%
 - **CVRM¹** \$6.9bn, +19%
 - **R&I** \$4.5bn, +4%
 - **V&I** \$3.7bn, +56%
 - *Vaxzevria*² \$1.8bn, -16%
 - *Evusheld* \$1.5bn, n/m
- > **Rare Disease¹** \$5.2bn, +10%

Upgraded 2022 guidance (CER) : Core EPS to increase by high twenties to low thirties %, dependent on collaboration milestones and *Evusheld* deliveries

1. In FY 2022, Total Revenue from *Koselugo* is included in Rare Disease (FY 2021: Oncology) and Total Revenue from *Andexxa* is included in BioPharmaceuticals: CVRM (FY 2021: Rare Disease). The growth rate shown for each disease area has been calculated as though these changes had been implemented in FY 2021. 2. *Vaxzevria* is AstraZeneca's trademark for the Company's supply of the AstraZeneca COVID-19 Vaccine. Total Revenue includes Collaboration Revenue from sub-licensees that produce and supply the AstraZeneca COVID-19 Vaccine under their own trademarks. Total Revenue and Core EPS increases benefitted from the addition of Alexion from 21st July 2021. CVRM = Cardiovascular, Renal & Metabolism; R&I = Respiratory & Immunology; V&I = Vaccines & Immune Therapies; CER = constant exchange rates; EPS = earnings per share.



Science-led innovation

Continued strong pipeline progress since H1 2022

Phase III data readouts

danicopan (ALXN2040) ALPHA PNH with clinically significant EVH

capivasertib CAPItello-291 HR-positive advanced breast cancer

19 regulatory approvals in major markets, including:

Ultomiris (EU, JP) generalised myasthenia gravis (CHAMPION-MG)

Enhertu (US) HER2-low breast cancer (DESTINY-Breast04)

Enhertu (US) HER2m NSCLC (DESTINY-Lung02)

Tezspire (EU, JP) severe asthma (NAVIGATOR)

Imfinzi (US) locally advanced or metastatic BTC (TOPAZ-1)

Imjudo + Imfinzi (US) unresectable HCC (HIMALAYA)

Beyfortus (EU) prevention of LRTI caused by RSV (MELODY/MEDLEY)

PNH = paroxysmal nocturnal haemoglobinuria; EVH = extravascular haemolysis; HR-positive = hormone receptor-positive; HER2-low = human epidermal growth factor receptor 2-low; HER2m = human epidermal growth factor receptor 2-mutated; NSCLC = non-small cell lung cancer; BTC = biliary tract cancer; HCC = hepatocellular carcinoma; LRTI = lower respiratory tract infection; RSV = respiratory syncytial virus.
Collaboration partners: Daiichi Sankyo (*Enhertu*), Sanofi (*Beyfortus*), Amgen (*Tezspire*).



AstraZeneca: business fundamentals

Growth outlook supported by pipeline delivery, commercial execution and breadth

Proven ability to execute

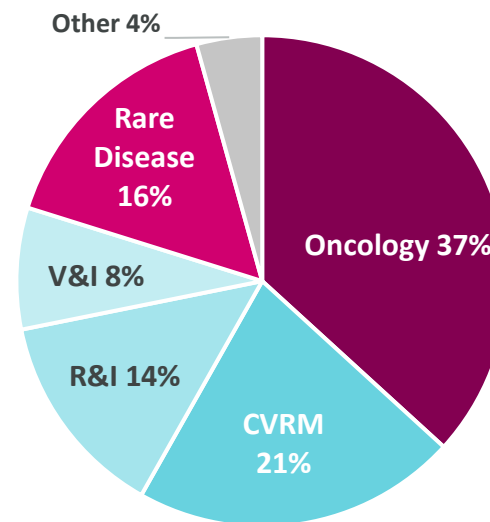
- > **11 blockbuster medicines¹**
and growing, with attractive LoE profile
- > **7 NMEs launched**
since 2020

Pipeline delivering

- > **15 NMEs**
in Phase III
- > **>120 NME or major LCM**
projects in Phase II and III

Broad-based portfolio

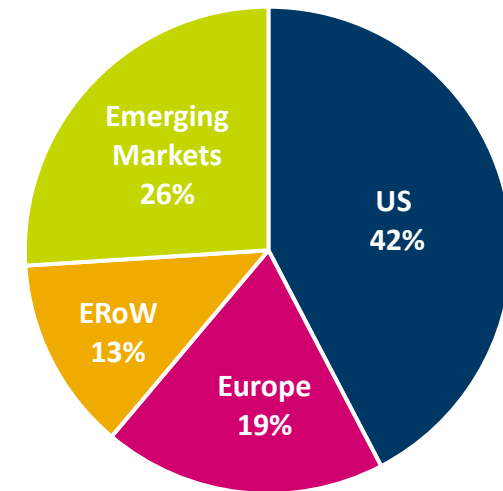
Q3 2022 | % Total Revenue by disease area



Key presence in rapidly growing disease areas

Diverse geographic footprint

Q3 2022 | % Total Revenue by geography



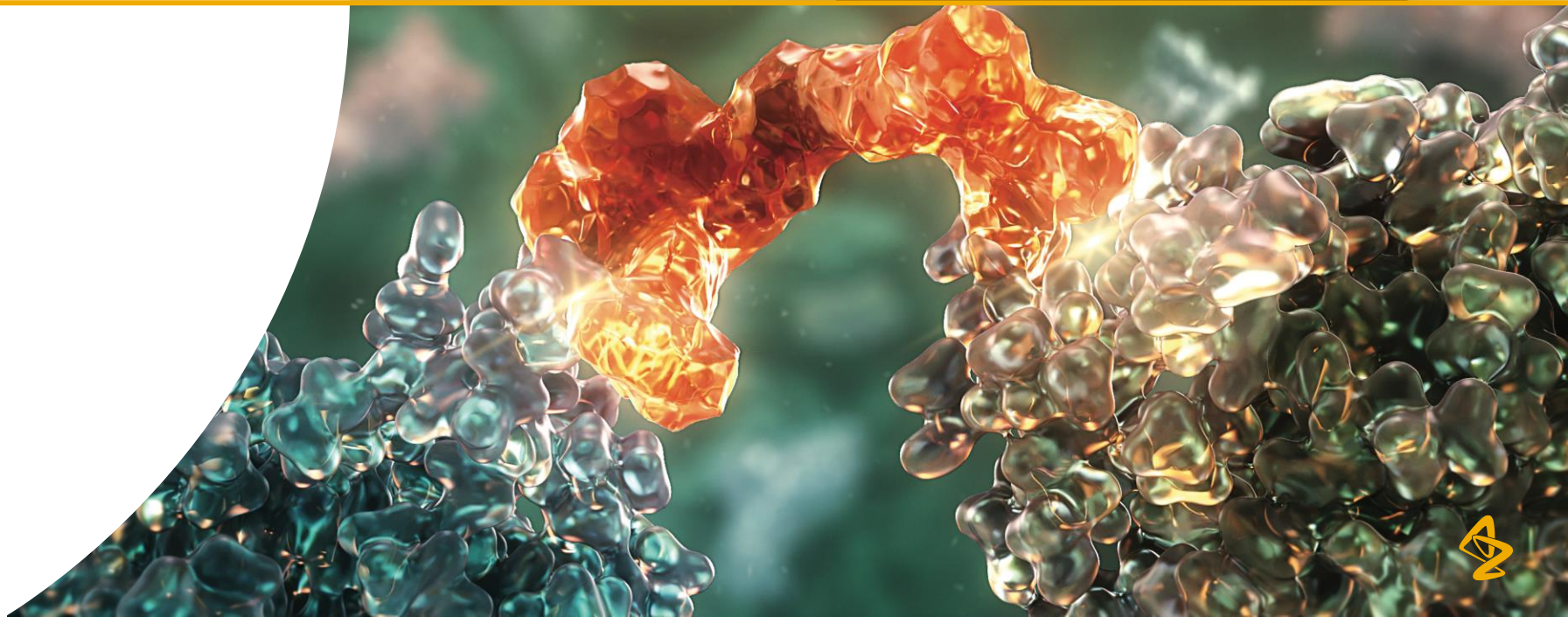
Benefitting from diverse source of business





Financial Results

Aradhana Sarin
Chief Financial Officer



Reported Profit and Loss

Continued strong top-line growth

	YTD 2022 \$m	CER change %	% total revenue	Q3 2022 \$m	CER change %	% total revenue
Total Revenue	33,144	37	100	10,982	19	100
- Product Sales	32,200	35	97	10,590	16	96
- Collaboration Revenue	944	>2x	3	392	>3x	4
Gross margin	70.5%	+2 pp		71.8%	+11 pp	
Total operating expenses ¹	21,315	25	64	6,861	(8)	62
- R&D expenses	7,137	4	22	2,458	(28)	22
- SG&A expenses	13,798	41	42	4,277	9	39
Other operating income	325	n/m	1	106	>2x	1
Operating profit	2,663	>2x	8	1,245	n/m	11
Tax rate	-38.8%			-78.1%		
EPS	\$1.54	>4x		\$1.06	n/m	

Absolute values at actual exchange rates; changes at CER. Gross margin excludes the impact of Collaboration Revenue and any associated costs, thereby reflecting the underlying performance of Product Sales. 1. Total operating expenses include distribution, R&D and SG&A expenses. R&D = research and development; SG&A = sales, general and administrative; pp = percentage points; n/m = growth rate not meaningful; CER = constant exchange rates.



Core Profit and Loss

Continued operating leverage

	YTD 2022 \$m	CER change %	% total revenue	Q3 2022 \$m	CER change %	% total revenue
Total Revenue	33,144	37	100	10,982	19	100
- Product Sales	32,200	35	97	10,590	16	96
- Collaboration Revenue	944	>2x	3	392	>3x	4
Gross margin	81.0%	+6 pp		80.8%	+7 pp	
Total operating expenses ¹	16,595	26	50	5,642	16	51
- R&D expenses	6,974	29	21	2,357	16	21
- SG&A expenses	9,243	24	28	3,160	16	29
Other operating income	317	(76)	1	107	>3x	1
Operating profit	10,740	69	32	3,413	63	31
Tax rate	18.3%			18.3%		
EPS	\$5.28	52		\$1.67	70	

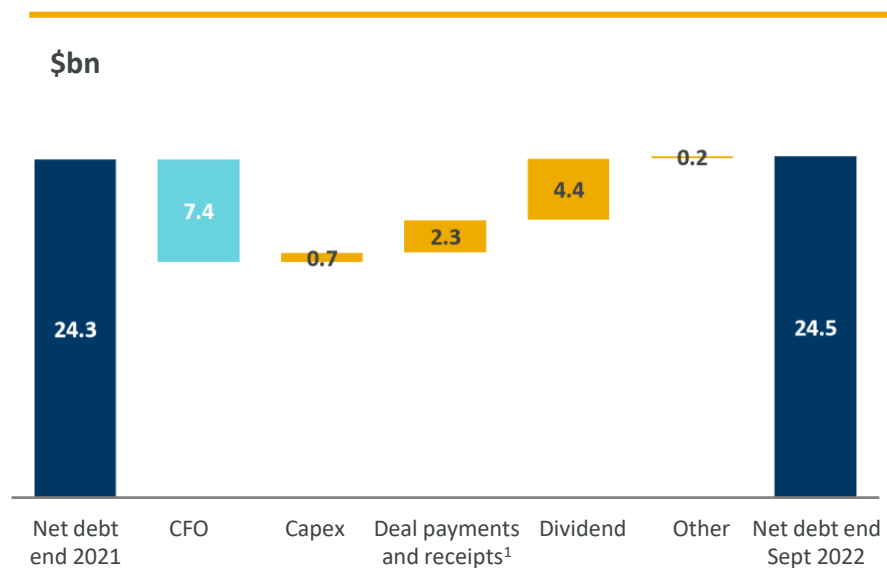
Absolute values at actual exchange rates; changes at CER. Gross margin excludes the impact of Collaboration Revenue and any associated costs, thereby reflecting the underlying performance of Product Sales. 1. Total operating expenses include distribution, R&D and SG&A expenses. R&D = research and development; SG&A = sales, general and administrative; pp = percentage points; n/m = growth rate not meaningful; CER = constant exchange rates.



Net debt and cash flow

Continued improvement in cash flow from operations

Net Debt



Net Debt/EBITDA: 2.9x

Net Debt/EBITDA adjusted for Alexion inventory fair value uplift²: 1.9x

Capital allocation priorities

- > Strong investment grade credit rating
- > Reinvestment in the business
- > Value-enhancing business development
- > Progressive dividend policy³

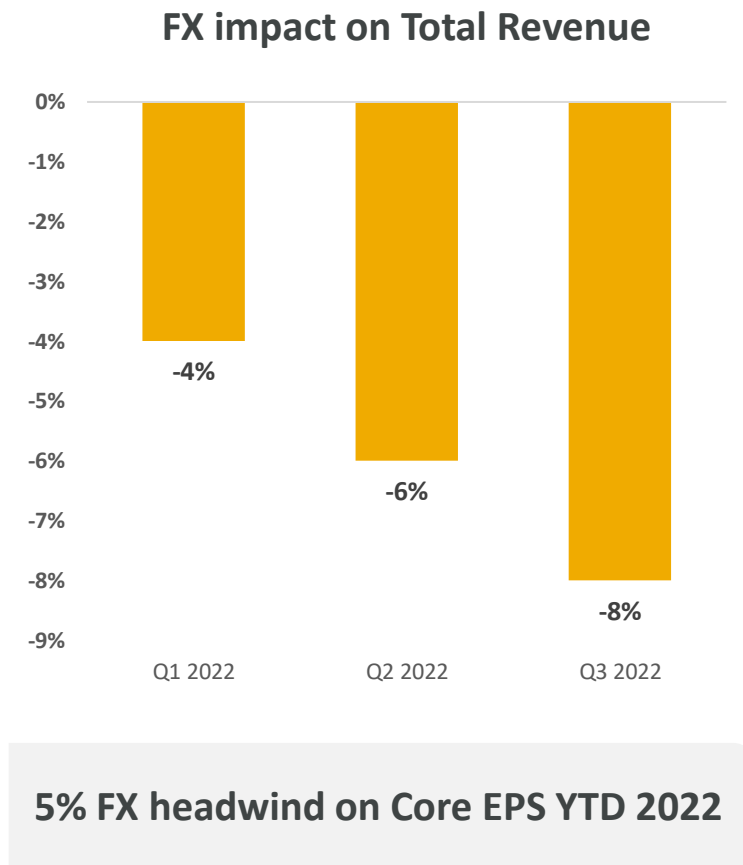
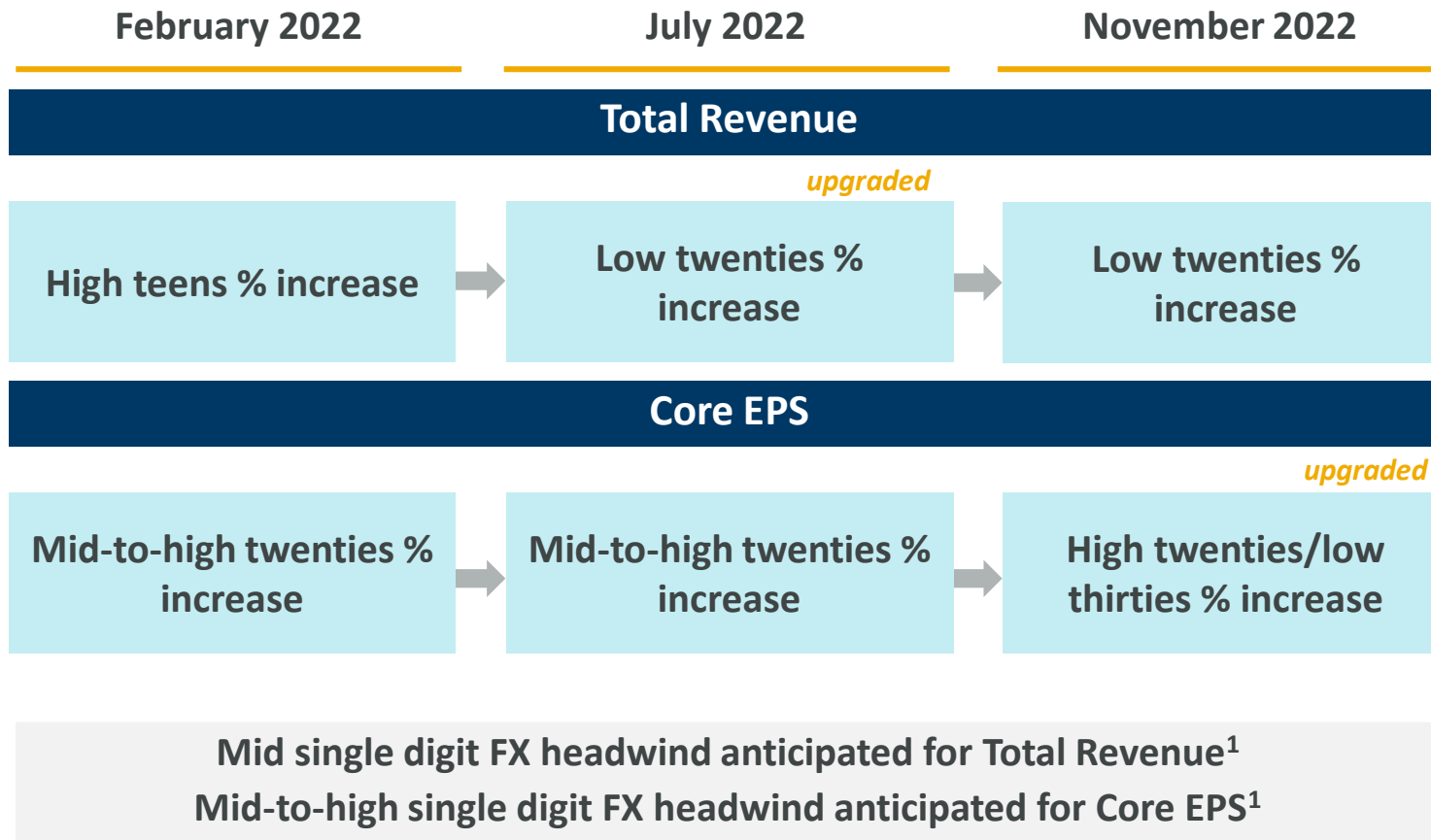
1. Comprises purchases and disposal of intangible assets, payment of contingent consideration from business combinations, purchase and disposal of non-current asset investments, movement in profit participation liability and disposal of investments in associates and joint ventures and payment of Acerta Pharma share purchase liability 2. EBITDA adding back the impact of \$4,329m 12-month rolling period (YTD 2021: \$1,044m) unwind of inventory fair value uplift recognised on acquisition of Alexion.

AstraZeneca credit ratings: Moody's: short-term rating P-2, long-term rating A3, outlook negative. S&P Global Ratings: short-term rating A-2, long-term rating A-, outlook stable. 3. Progressive dividend policy defined as either stable or increasing dividend per share in US dollar terms. EBITDA = earnings before interest, tax, depreciation and amortisation; CFO = net cash inflow from operating activities.



FY 2022 Guidance (CER)

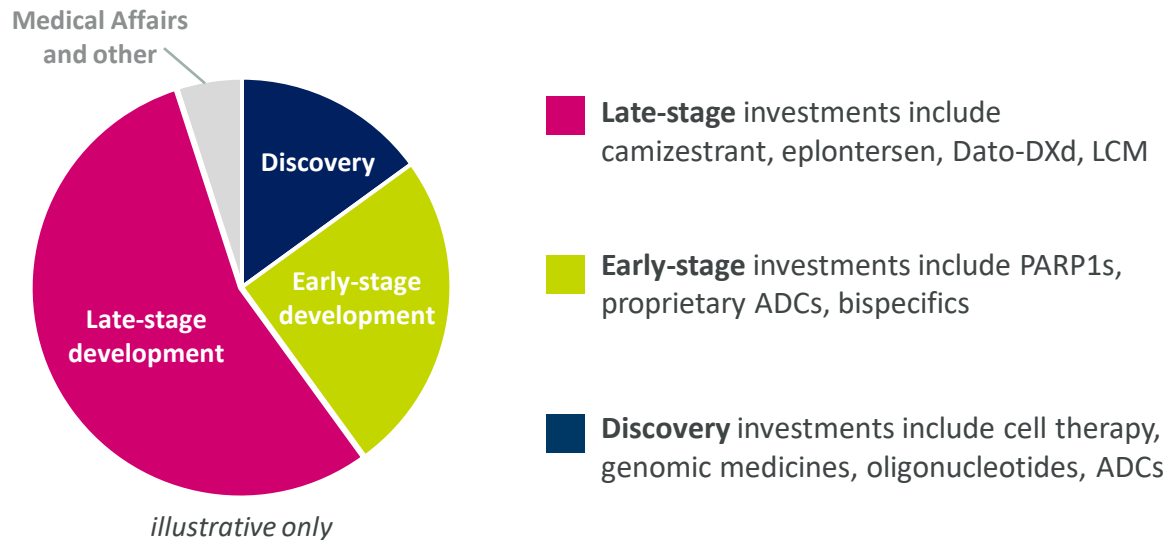
Increasing Core EPS guidance, anticipate FX headwinds to continue



Strategic R&D and Commercial investment

Enables delivery of sustained long-term growth

R&D investment



Disciplined approach guides stage progression and investment

Commercial investment

- > **New market and indication launches**
e.g., *Imfinzi, Farxiga, Saphnelo, Ultomiris*
- > **Practice-changing efforts in existing markets**
e.g., *Enhertu*, biologics penetration (*Tezspire, Fasenra*)
- > **New launches**
e.g., *Lynparza, Imfinzi, Tezspire, Breztri, Evusheld, Ultomiris*



Driving operational efficiencies

Strategic investments and leveraging synergies to improve where and how we work



Geographic footprint

Align manufacturing network to evolving product mix

Leverage global presence to attract and retain talent



Alexion integration

Transitioned to shared market model

Adapting mixed/in-source clinical trial model

Established dedicated Rare Disease unit in China



Digital improvements

Upgrading IT capabilities to support global workforce

Accelerating time to regulatory submission

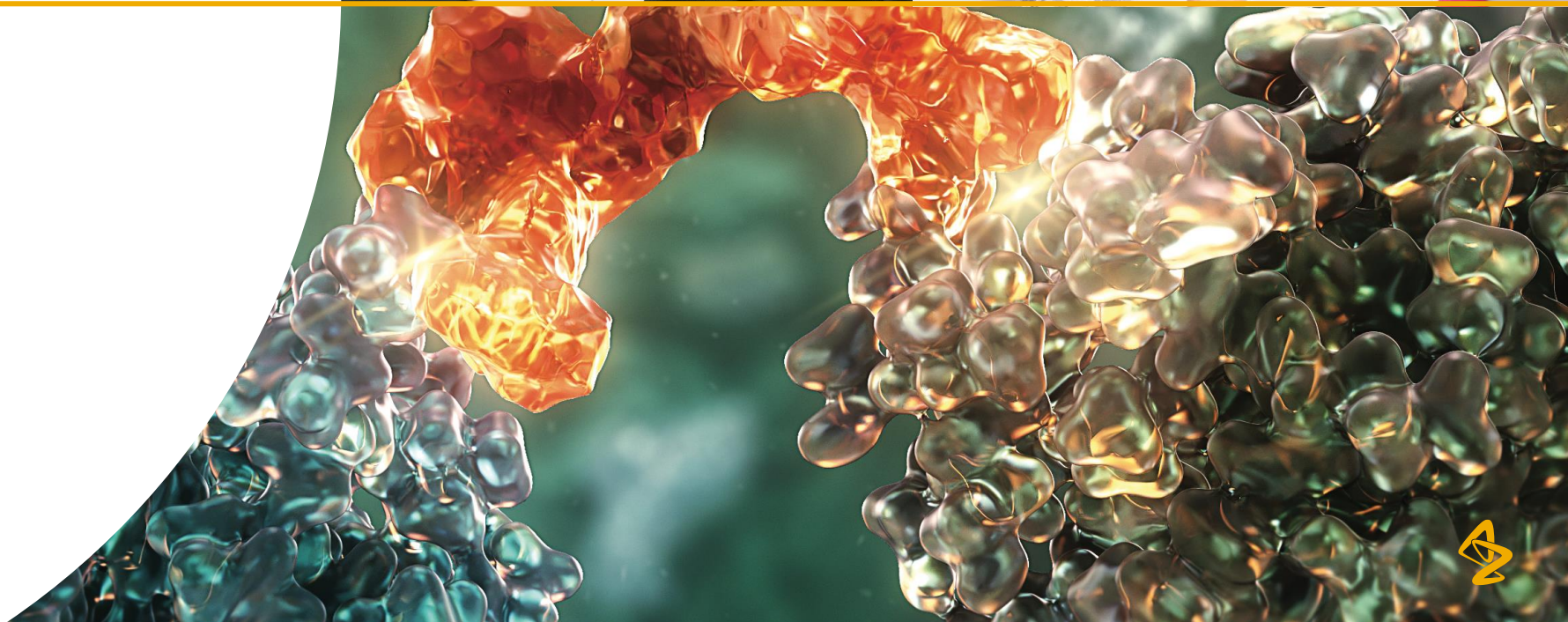




Oncology

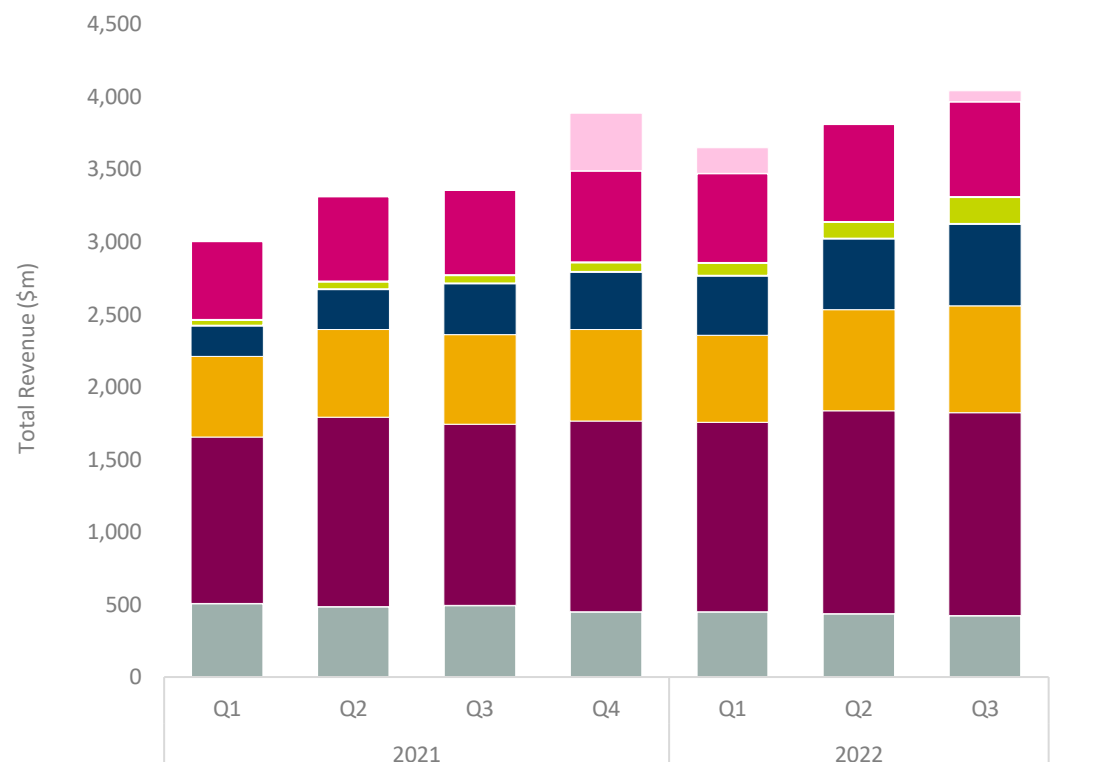
Dave Fredrickson
Oncology Business

Susan Galbraith
Oncology R&D



Oncology: YTD 2022

Total Revenue \$11.5bn, +24% at CER, increasing Product Sales, Collaboration Revenue



Q3 2022: key dynamics

- *Tagrisso, Imfinzi and Lynparza* strong double-digit Product Sales growth
- *Calquence* 63% growth, *Enhertu* revenues >3x vs. Q3 2021
- Strong double-digit Q3 Product Sales growth across
 - US, 27%
 - Europe, 25%
 - Emerging Markets, 21%
- Q3 ERoW Total Revenue growth 9%, reflecting COVID-19 impact in Japan

Tagrisso Imfinzi Calquence Enhertu Lynparza (PS) Lynparza milestones Other



Oncology: Q3 2022

Strong global launch performance

Imfinzi

TOPAZ-1

- First-and-only immunotherapy + chemotherapy in BTC
- NCCN category 1 preferred in July
- US approval under Priority Review

HIMALAYA

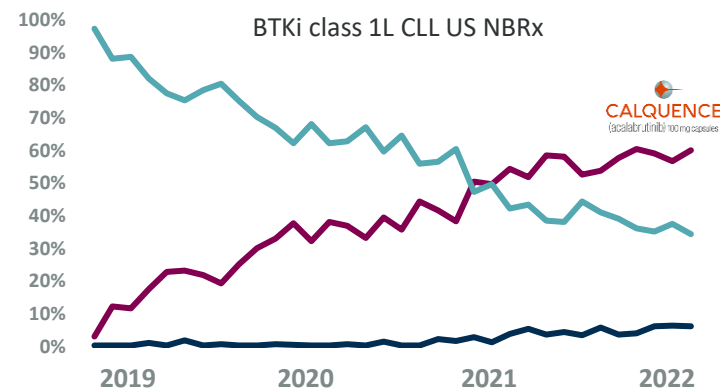
- US approval for *Imjudo* (tremelimumab) + *Imfinzi* in unresectable HCC



Calquence

ELEVATE-TN/ASCEND

- US NBRx share in CLL¹ >55%
- US tablet approval



- EU increasing share of BTKi class in CLL following launches in 2021

Enhertu

DESTINY-Breast04

- HER2-low mBC post ET and chemo
- US approval two weeks after submission acceptance
- Rapid uptake in post-chemo population

DESTINY-Lung02

- US approval in HER2m NSCLC
- Validates efficacy beyond typical HER2-targeted diseases

1. Source: Based on internal analysis by AstraZeneca UK Limited using data from the following source: IQVIA US Medical Claims Data (Dx) and IQVIA US Longitudinal Access and Adjudication Data (LAAD) for the period ending 10/06/2022 reflecting estimates of real-world activity. Copyright IQVIA. All rights reserved. BTC = biliary tract cancer; NCCN = national comprehensive cancer network, clinical practice guidelines in oncology; HCC = hepatocellular carcinoma; NSCLC = non-small cell lung cancer; NBRx = new to brand prescriptions; CLL = chronic lymphocytic leukemia; BTKi = Bruton tyrosine kinases inhibitor; 1L = 1st-line; HER2-low = human epidermal growth factor receptor 2-low; mBC = metastatic breast cancer; ET = endocrine therapy; HER2m = human epidermal growth factor receptor 2-mutated; HER2 = human epidermal growth factor receptor 2. Collaboration partners: Daiichi Sankyo (*Enhertu*).

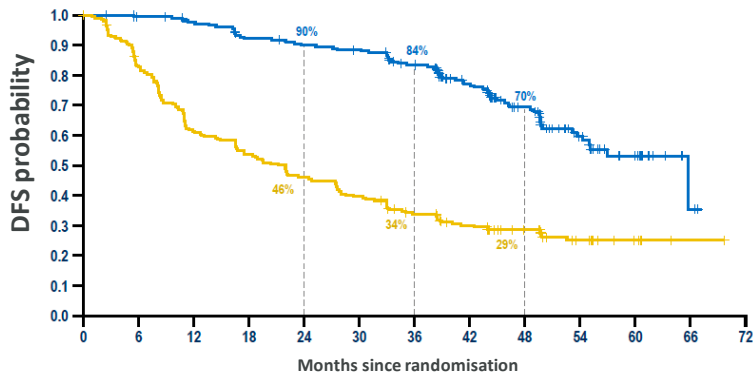


Oncology: R&D highlights

Transformative data in patients with unmet need at ESMO 2022

Tagrisso

adjuvant EGFRm NSCLC (ADAURA)

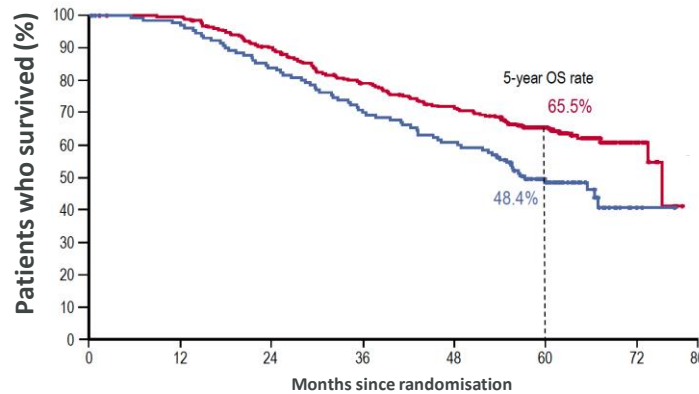


- Nearly three in four patients disease-free at four years
- Reduced CNS recurrence risk by 76%

5.5 year median DFS in adjuvant vs. 21.9 months with placebo

Lynparza

1st-line maintenance HRD+ OC (PAOLA-1)

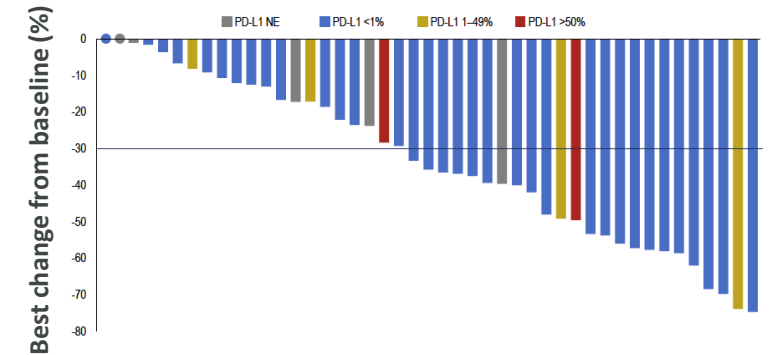


- Five year OS for *Lynparza* + bevacizumab
- Clinically meaningful OS improvement in HRD-positive patients

65% PAOLA-1 patients alive at 5 years vs. 48% placebo¹

volrustomig

NSCLC (Phase Ib/II)



- PD1-CTLA4 bi-specific antibody
- Initial efficacy in NSCLC (750mg + chemo)
- Pronounced efficacy in PDL1-low
- Comprehensive clinical development planning underway

1. *Lynparza* + bevacizumab vs. placebo + bevacizumab. ESMO = European Society for Medical Oncology; EGFRm = epidermal growth factor receptor-mutated; NSCLC = non-small cell lung cancer; DFS = disease free survival; CNS = central nervous system; HRD+ = homologous recombination deficient-positive; OC = ovarian cancer; OS = overall survival; volrustomig = MEDI5752; PD1 = programmed cell death protein 1; CTLA4 = cytotoxic T-Lymphocyte associated protein 4; PDL1-low = programmed cell death ligand 1-low. Collaboration partners: Merck & Co., Inc. (*Lynparza*).



Oncology: R&D highlights

New prospects for patients with advanced breast cancer

camizestrant

2nd-line ER-positive BC (SERENA-2)

- Positive Phase II for oral next-generation SERD
- Met primary endpoint PFS in all comers vs. SoC *Faslodex*
- Potential to displace first-generation SERDs with superior efficacy and formulation

capivasertib

HR-positive BC (CAPItello-291)

- Potential first-in-class AKT inhibitor
- Phase III - statistically significant and clinically meaningful efficacy
- Effect in overall and genetically-altered subgroup
- Encouraging OS trend, data still immature
- Offers patients option to continue endocrine therapy in second line

Potentially transformative treatment options in HR-positive breast cancer



Advancing our commitment to lung cancer patients with new trials

Dato-DXd TROP2

TROPION-Lung07

1st-line | non-squamous | adv/met NSCLC | PD-L1 <50% | without AGAs

n=975

Arm A: Dato-DXd 6mg/kg + pembro 200mg + PtCh (4 cycles: cis 75mg/m² or carbo AUC5) i.v. Q3W (n=325)

Arm B: Dato-DXd 6mg/kg + pembro 200mg i.v. Q3W (n=325)

Arm C: pembro 200mg + pemetrexed 500mg/m² + PtCh (4 cycles: cis 75mg/m² or carbo AUC5) i.v. Q3W (n=325)

celarasertib ATR

Addresses IO resistance

Advanced/metastatic NSCLC

LATIFY: with *Imfinzi*; versus docetaxel

LATIFY data readout: >2023

AZD9592 EGFR-cMET

NEW

Addresses *Tagrisso* resistance

Proprietary in-house ADC technology

Novel topoisomerase-1 warhead

Phase I start: late 2022/early 2023

Dato-DXd = datopotamab deruxtecan; TROP2 = trophoblast cell surface antigen 2; adv = advanced; met = metastatic; NSCLC = non-small cell lung cancer; PD-L1 = programmed death-ligand 1; AGA = actionable genomic alterations; pembro = pembrolizumab; PtCh = platinum-based chemotherapy; cis = cisplatin; carbo = carboplatin; AUC = area under curve; i.v. = intravenous; Q3W = every three weeks; IO = immuno-oncology; EGFR = epidermal growth factor receptor; cMET = tyrosine-protein kinase Met; ADC = antibody-drug conjugate.
Collaboration partners: Daiichi Sankyo (Dato-DXd).





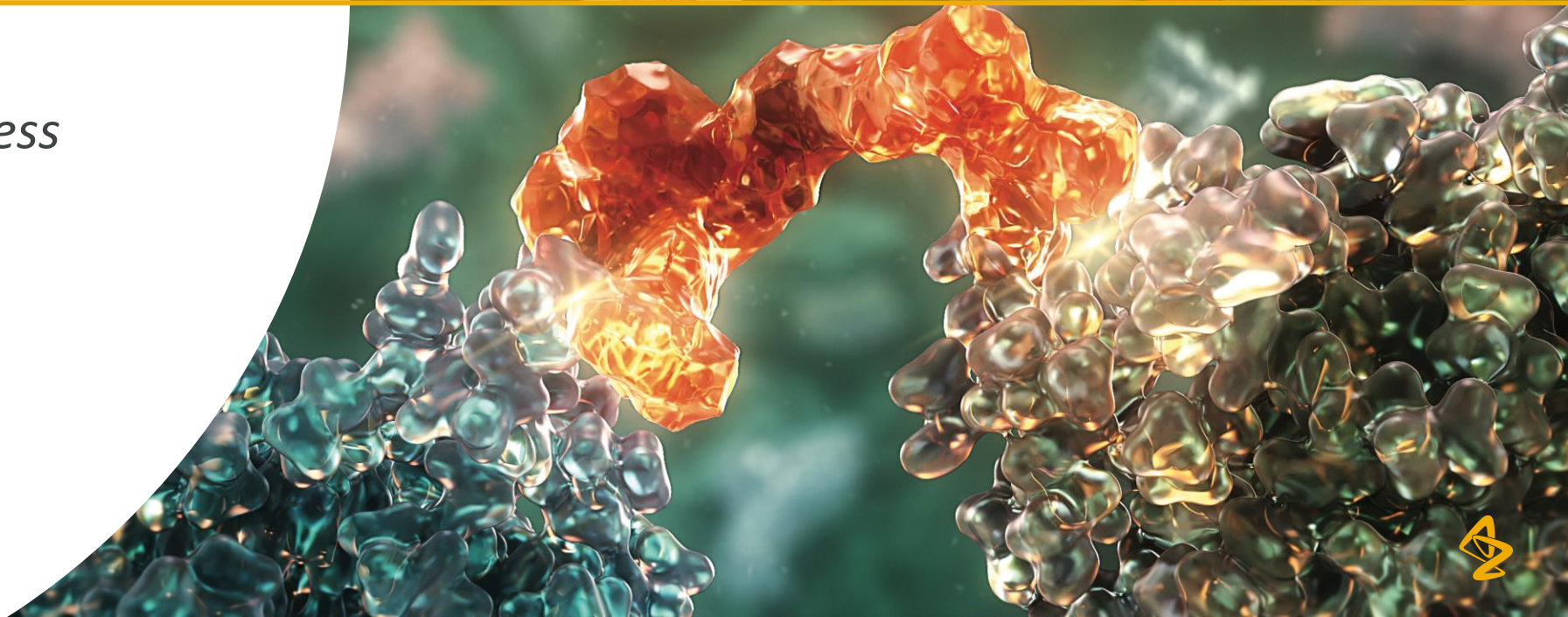
BioPharmaceuticals

Ruud Dobber

BioPharmaceuticals Business

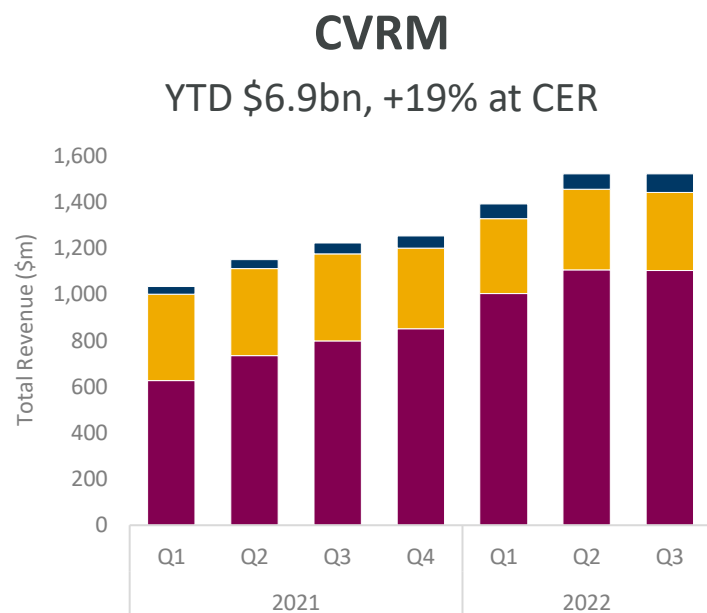
Mene Pangalos

BioPharmaceuticals R&D



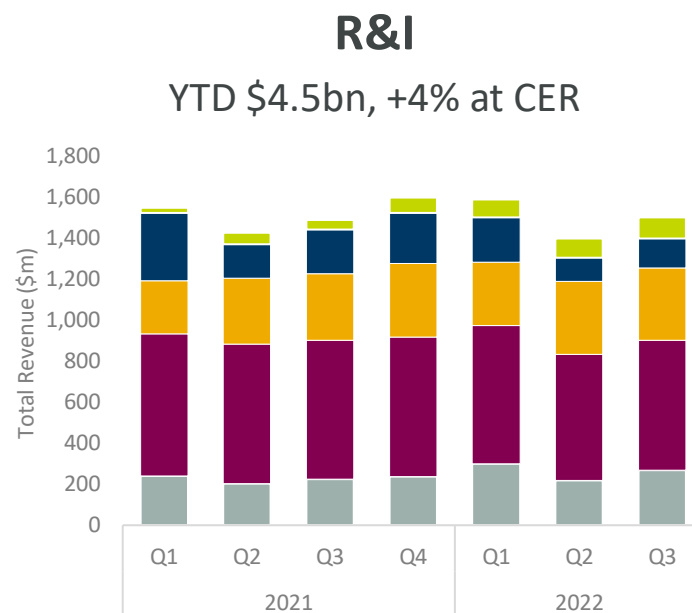
BioPharmaceuticals: YTD 2022

Total Revenue \$15.1bn, +21% at CER, *Farxiga* strength, R&I launch momentum



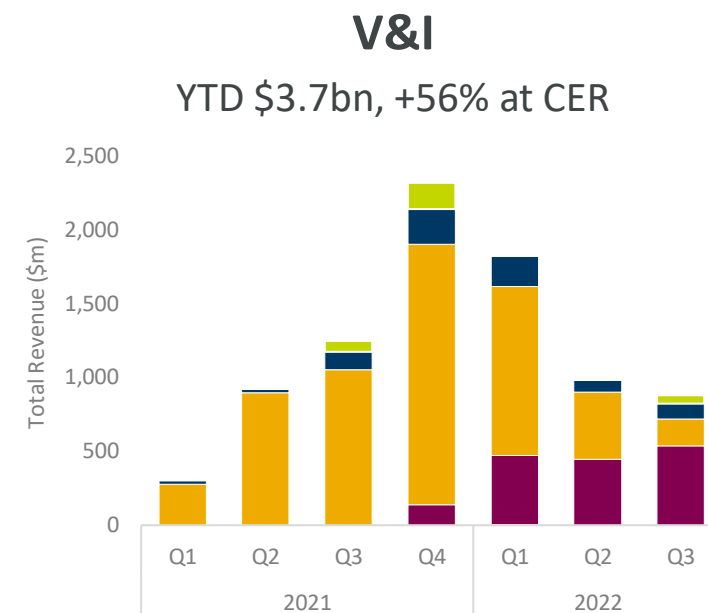
Farxiga *Brilinta* *Lokelma* Other

- *Farxiga* +50% in Q3, third blockbuster quarter with sales >\$1.1bn
 - Fastest growing SGLT2i globally¹
 - >100 CKD and >110 HFrEF reimbursements



Symbicort *Fasenna* *Pulmicort* *Breztri* Other

- *Fasenna* +17% leading IL-5 biologic
- *Tezspire* achieved 17% NBRx share in US²
- *Saphnelo* i.v. 48% NBRx share in US³



Vaxzevria *Evusheld* *Synagis* *FluMist*

- *Evusheld* \$536m in Q3, reflects investment in demand generation
- *Vaxzevria* \$180m in Q3, sharp decline in Total Revenue due to softening demand

1-3 Source: Based on internal analysis by AstraZeneca UK Limited using data from the following sources: 1. IQVIA Monthly MIDAS for the period MAT August 2022 Volume Growth (DOT v. PY), 2. IQVIA US Custom Source of Business and IQVIA US National Sales Perspectives (NSP) and 3. IQVIA US National Prescription Audit Market Dynamics (NPA MD) for the period September 2022, reflecting estimates of real-world activity. Copyright IQVIA. All rights reserved. Reporting changes: *Andexxa* is included in Biopharmaceuticals: CVRM (FY 2021: Rare Disease). Growth rates for CVRM are pro forma as they include pre-acquisition H1 *Andexxa* performance in comparative H1 2021 revenues. CER = constant exchange rates; CVRM = Cardiovascular, Renal and Metabolism; R&I = Respiratory & Immunology; V&I = Vaccine & Immune Therapies; SGLT2i = sodium glucose co-transporter-2 inhibitor; HFrEF = heart failure with reduced ejection fraction; CKD = chronic kidney disease; IL-5 = interleukin-5; NBRx = new-to-brand prescriptions; i.v. = intravenous. Collaboration partners: Amgen (*Tezspire*).

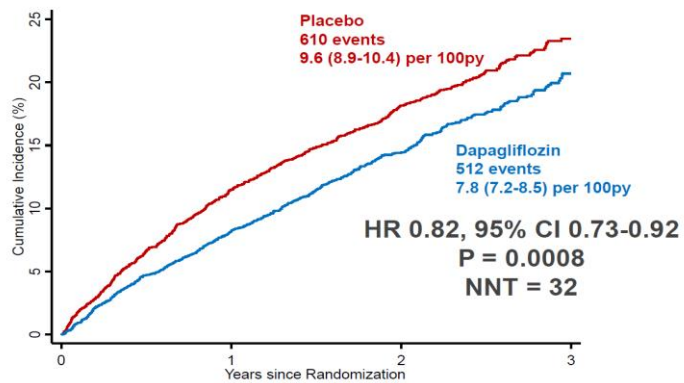


BioPharmaceuticals: R&D highlights

Showcasing strength at ESC and ISA

Farxiga HFpEF (DELIVER)

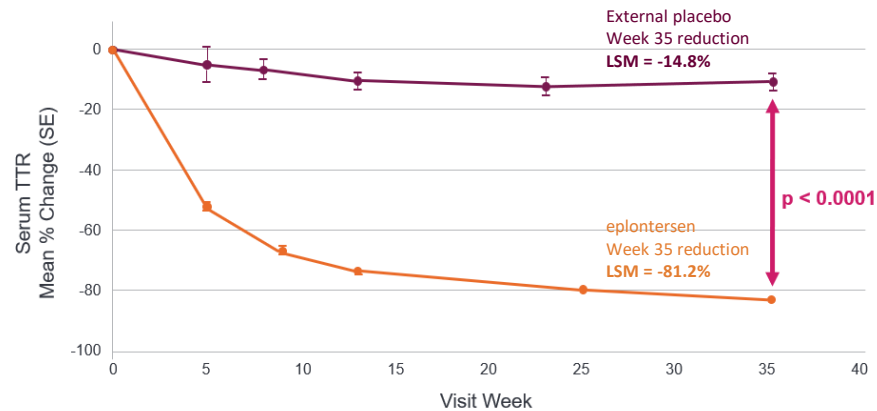
CV death or worsening HF (full population)



- 18% reduction in CV death in HF patients, with preserved ejection fraction



eplontersen ATTRv-PN (NEURO-TTRansform)



- Phase III 35-week interim analysis
- 81.2% reduction in serum TTR concentration vs. baseline

ISA  2022

BioPharmaceuticals: R&D highlights

Leadership and breadth across biologics

Beyfortus

LAAB

- EU approval - first single dose preventative option for RSV in broad infant population
- Based on MELODY/MEDLEY clinical programme
- 79.5% efficacy¹ against medically attended LRTI caused by RSV
- Efficacy through to day 151, corresponding to the length of the RSV season

 **Beyfortus**
(nirsevimab)

Tezspire

TSLP

Phase III severe asthma trials:

NAVIGATOR

- Sustained exacerbation rate reductions of 58% vs. placebo

DESTINATION

- Sustained safety and efficacy over 104 weeks in a broad population

 **ERS**

1. Prespecified pooled analysis of the MELODY Phase III trial and the recommended dose from the Phase IIb trial, in which an efficacy (relative risk reduction versus placebo) of 79.5% (95% CI 65.9, 87.7; P<0.0001) was seen against medically attended LRTI, such as bronchiolitis or pneumonia, caused by RSV in infants born at term or preterm entering their first RSV season. Data presented at European Society for Paediatric Infectious Diseases (ESPID) in May 2022.

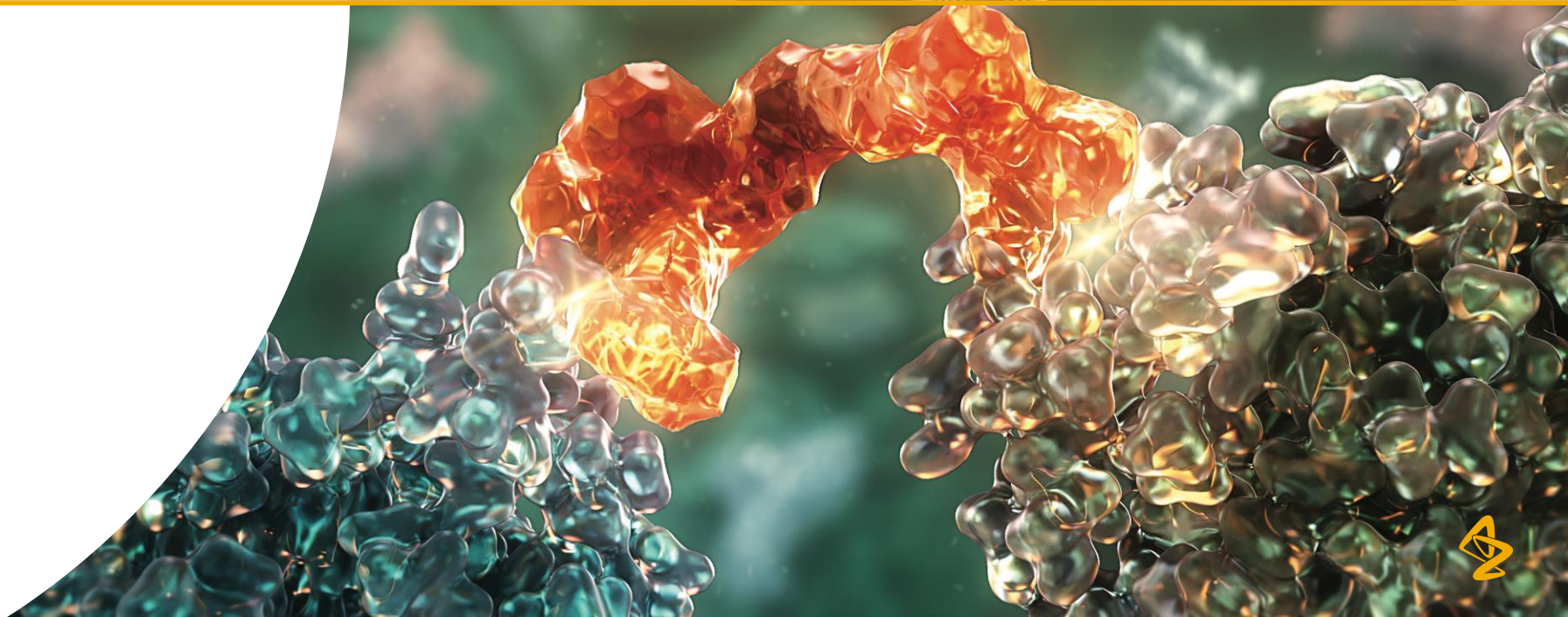
LAAB = long-acting antibody; RSV = respiratory syncytial virus; LTRI = lower respiratory tract infection; TSLP = thymic stromal lymphopoietin; ERS = European Respiratory Society

Collaboration partners: Sanofi (*Beyfortus*), Amgen (*Tezspire*).



Rare Disease

Marc Dunoyer
*Chief Executive Officer,
Alexion*

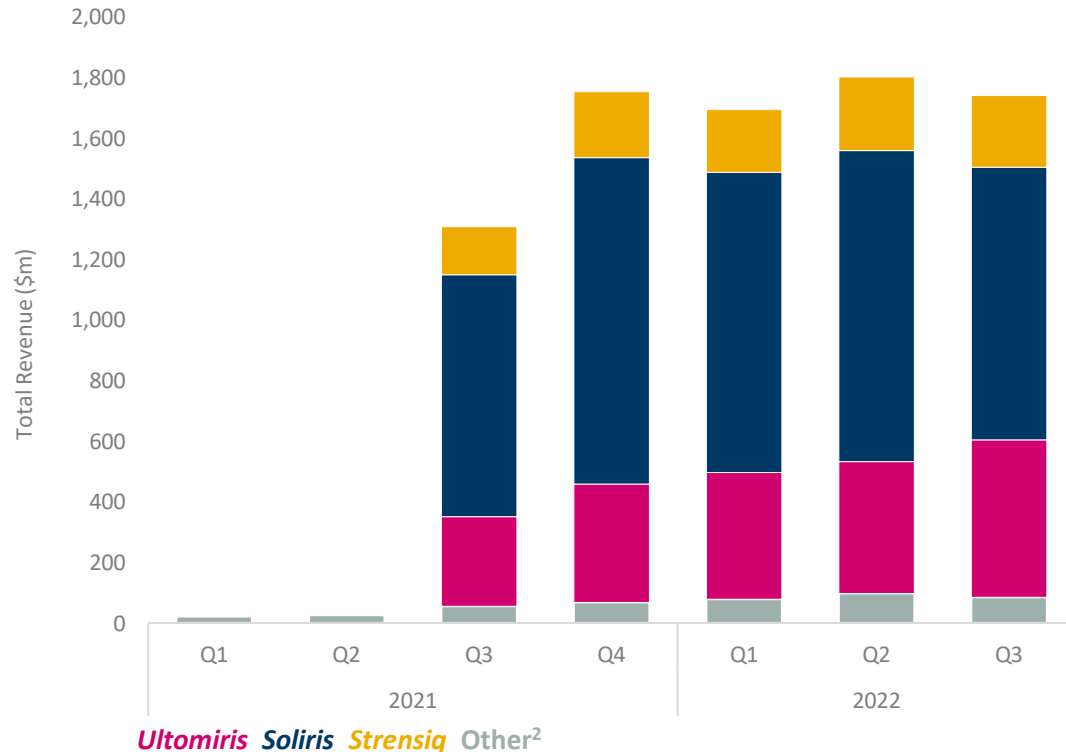


Rare Disease: YTD 2022

Ultomiris gMG launch gains traction, accelerated conversion and global adoption

Rare Disease

YTD Total Revenue \$5.2bn, +10% pro forma¹ at CER



Q3 2022: key dynamics

- C5 Franchise growth, +8%¹
 - *Soliris* (6%)¹ decline reflecting successful conversion to *Ultomiris* in PNH, aHUS, gMG, partially offset by NMOSD growth
 - *Ultomiris* +47%¹ gMG launch and expansion into new markets
- *Strensiq* +20%¹ strength of US patient initiations
- *Koselugo* +81% continued expansion; now available in 20 markets

1. Pro forma growth rates on medicines acquired with Alexion have been calculated by comparing Q3 YTD revenues with the corresponding prior year pre-acquisition revenues previously published by Alexion; all rates mentioned are pro forma growth rates at CER 2. Includes *Kanuma* and *Koselugo*. 3. Q3 2021 Total Revenues reported only comprise of those booked by AstraZeneca following completion of the acquisition of Alexion on 21 July 2021. In previous results announcements, *Koselugo* was included in the Oncology disease area. gMG = generalised myasthenia gravis, CER = constant exchange rates; PNH = paroxysmal nocturnal haemoglobinuria; aHUS = atypical haemolytic uraemic syndrome; NMOSD = neuromyelitis optica spectrum disorder.



Alexion, AstraZeneca Rare Disease

Continued leadership in Rare Disease, delivering pioneering science



Sustained leadership in Complement *with multiple novel platforms*

Ultomiris

Geographic and indication expansion

danicopan
ALXN2040

PNH with EVH
Positive Phase III HLR

vemircopan
ALXN2050

PNH
Phase II PoC



Expanding beyond Complement *in bone disorders, metabolics and cardiomyopathy*

ALXN1840

Wilson Disease

ALXN1850

ngHPP

CAEL-101

AL amyloidosis

NI006

ATTR-CM



Building bridges

to strengthen collaboration with AstraZeneca

Maximising commercial capabilities

Accelerating discovery and research

Leveraging global operations network

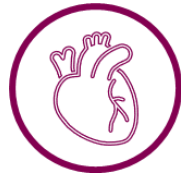


Rare Disease: R&D highlights

Proposed LogicBio acquisition enhances genomic capabilities

Alexion genomic medicines

leveraging existing AstraZeneca technologies



Gene therapy



Antisense oligonucleotides

CRISPR gene editing

LogicBio

novel technology platforms



GeneRide™

proprietary gene editing platform



sAAVy™

AAV capsid engineering



mAAVRx™

novel AAV manufacturing



Novel technology and manufacturing platforms have potential to accelerate Alexion programmes





CEO Closing Remarks

Pascal Soriot

Chief Executive Officer



AstraZeneca

Innovation-led, delivering industry-leading growth through 2025 and beyond

Strategic pillars support growth through 2025

- Robust life-cycle management
- Innovative late-stage pipeline
- Strategic business development
- Attractive LoE profile

Industry-leading growth 2025+

Multiple opportunities to unlock value

BioPharmaceuticals	Oncology	Rare Disease
eplontersen (LICA)	Dato-DXd (TROP2 ADC)	vemircopan (oral Factor D)
mitiperstat (MPO)	volrustomig (PD1-CTLA4)	gefurulumab (C5 mini-body)
cotadutide (GLP-1/Glucagon)	AZD2936 (PD1-TIGIT)	ALXN1850 (ngHPP)
tozorakimab (IL-33)	camizestrant (ngSERD)	
ngCOVID-19 LAAB	capivasertib (AKT)	
	AZD5305 (PARP-1sel)	

Pipeline acceleration in 2023

18 Phase III readouts anticipated, including:

H1 2023

Dato-DXd – TROPION-Lung01 – 2L/3L NSCLC

Tagrisso – FLAURA2 – 1L NSCLC

Imfinzi – ADRIATIC – LS-SCLC

H2 2023

Enhertu – DESTINY-Breast06 – HER2-low breast cancer

Tagrisso – LAURA – EGFRm NSCLC (unresectable Stg. III)

Fasenra – MANDARA – EGPA

LoE = loss of exclusivity; LICA = ligand-conjugated antisense; MPO = myeloperoxidase; GLP-1 = glucagon-like peptide-1; IL-33 = Interleukin 33; ng = next generation; LAAB = long-acting antibody; Dato-DXd = datopotamab deruxtecan; TROP2 ADC = trophoblast cell surface antigen 2-directed antibody-drug conjugate; volrustomig = previously MEDI5752; PD-1 = programmed cell death protein 1; CTLA-4 = cytotoxic T-lymphocyte-associated antigen 4; TIGIT = T-cell immunoreceptor with Ig and ITIM domains; SERD = selective oestrogen receptor degrader; AKT = serine/threonine protein kinase; PARP-1sel = polymerase (ADP-ribose)-1 selective; ngHPP = next-generation hypophosphatasia; 1L = 1st-line; 2L = 2nd-line; 3L = 3rd-line; NSCLC = non small cell lung cancer; LS-SCLC = limited stage small cell lung cancer; HER2-low = human epidermal growth factor receptor 2-low; EGFRm = epidermal growth factor receptor-mutated; EGPA = eosinophilic granulomatosis with polyangiitis.





AstraZeneca at COP27

Driving landmark, sector-wide action

SMI Health Systems Taskforce Commitments



Supply chains – supplier standards & renewable PPA



Patient care pathways – raising awareness & better transparency



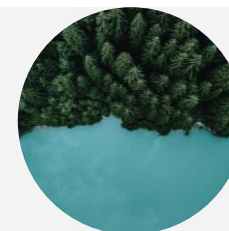
Digital healthcare – goal to decarbonise clinical trials

AZN Ambition Zero Carbon



Scope 1 & 2

98% reduction by 2026*



Scope 3

50% reduction by 2030*
90% reduction by 2045*



*Ambition Zero Carbon: reduce our greenhouse gas emissions from our global operations and fleet (Scope 1 and 2) by 98% by early 2026, from 2015 baseline. Reduce our greenhouse gas emissions across our entire value chain footprint (Scope 1, 2 and 3) by 50% by 2030, a 90% reduction by 2045, from 2019 baseline. Our net zero scope 1-3 science-based targets have been verified under the Science Based Targets initiative Net-Zero Corporate Standard. By 2030 we will go even further to become carbon negative for all residual emissions. SMI = Sustainable Markets Initiative; PPA = purchase power agreements; AZN = AstraZeneca; inc. = including.



YTD 2022 Question & Answer Session



Pascal Soriot

Executive Director and Chief Executive Officer



Dave Fredrickson

Executive Vice President,
Oncology Business



Ruud Dobber

Executive Vice President,
BioPharmaceuticals Business



Marc Dunoyer

Chief Executive Officer,
Alexion



Iskra Reic

Executive Vice President,
Vaccines and Immune Therapies



Aradhana Sarin

Executive Director and Chief Financial Officer



Susan Galbraith

Executive Vice President,
Oncology R&D



Mene Pangalos

Executive Vice President,
BioPharmaceuticals R&D



Leon Wang

Executive Vice President,
International



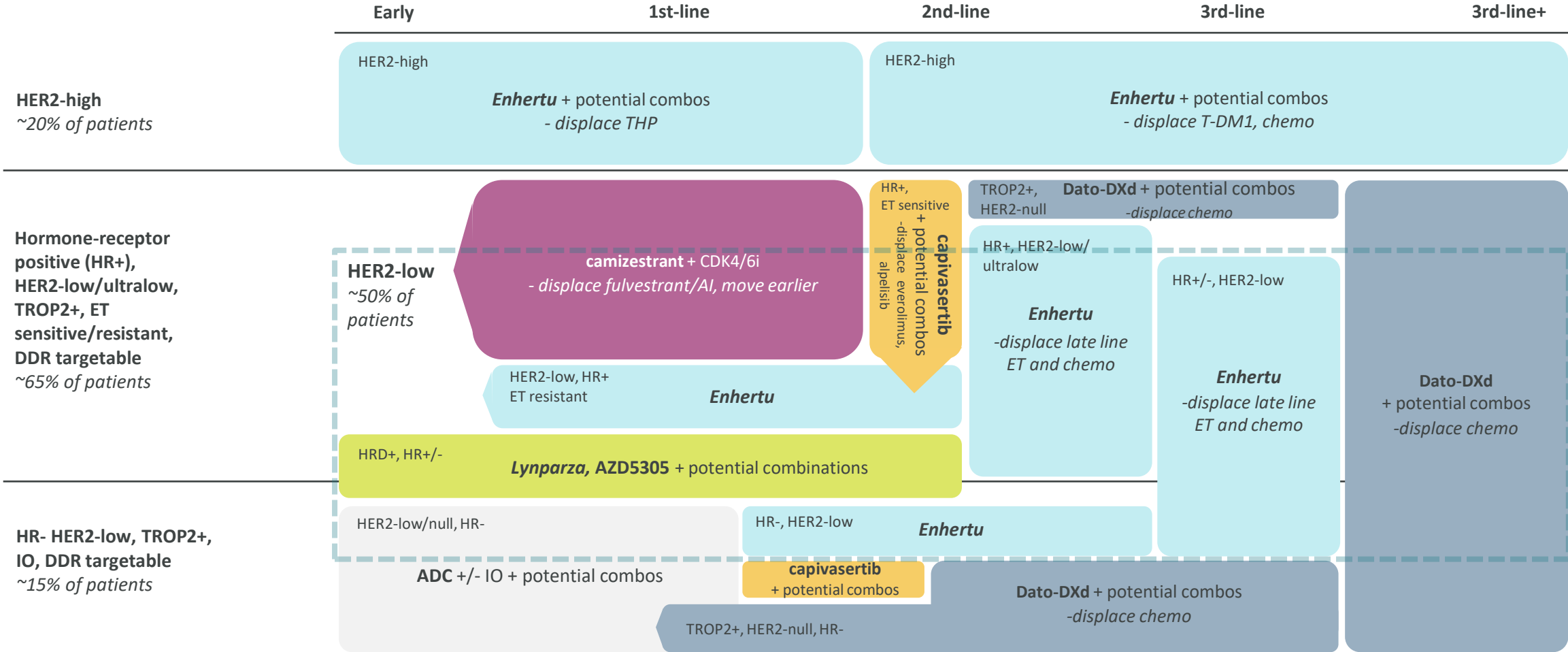
Appendix

- Oncology Breast Cancer schematic
- Emerging Markets
- ESG & corporate sustainability
- Late-stage pipeline catalysts
- Key performance by geography, disease area



Oncology: positioned to address the full spectrum of breast cancer

Redefining the classification of breast cancer through monotherapy and combinations



HER2-high = human epidermal growth factor receptor 2-high; HR+ = hormone receptor-positive; HER2-low/ultralow = human epidermal growth factor receptor 2-low/ultralow; ET = endocrine therapy; DDR = DNA damage response; HR- = hormone receptor-negative; TROP2+ = trophoblast cell surface antigen 2-directed-positive; IO = immuno-oncology; THP = Taxotere, Herceptin and pertuzumab; CDK4/6i = cyclin-dependent kinase 4/6i; AI = aromatase inhibitor; HRD+ = homologous recombination deficiency-positive; ADC = antibody-drug conjugate; T-DM1 = trastuzumab emtansine; HER2-null = human epidermal growth factor receptor 2-null; Dato-DXd = datopotamab deruxtecan.

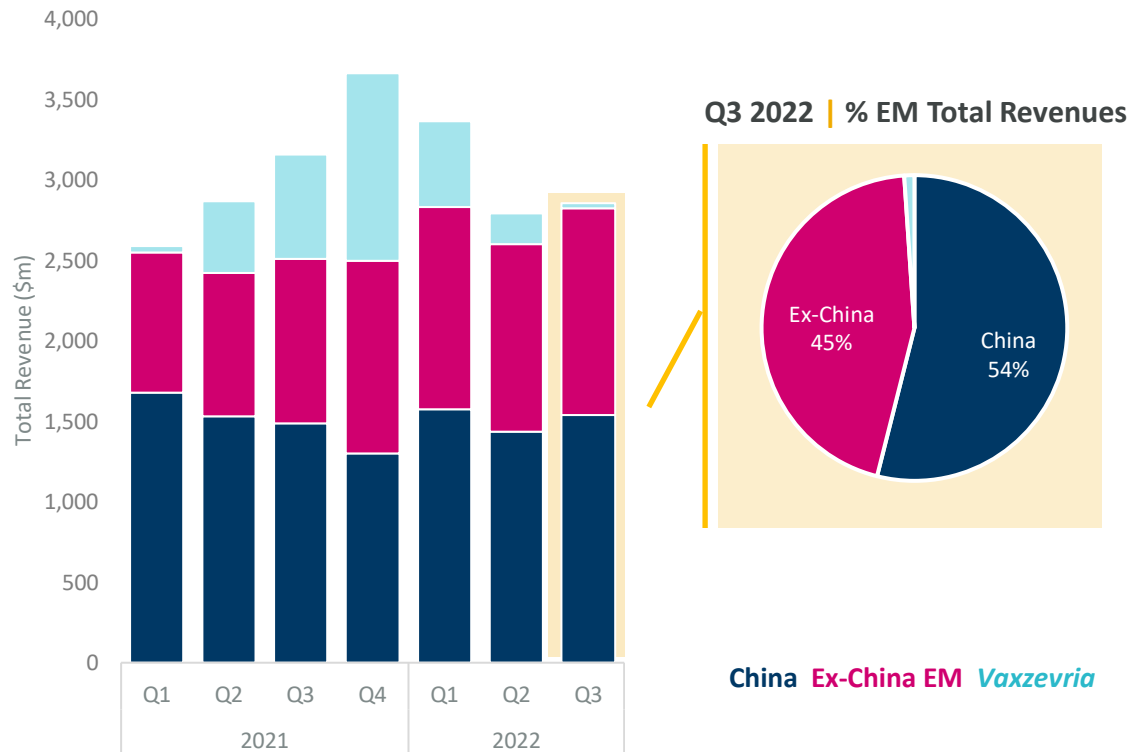


Emerging Markets: YTD 2022

Total Revenue \$9bn, +8% including *Vaxzevria*¹

Emerging Markets, 8%

China, -1%; ex-China EM, +20%



EM Total Revenue YTD highlights:

- **Oncology:** *Tagrisso* +22%, *Lynparza* +30%
- **CVRM:** *Farxiga* +46%
- **R&I:** *Fasenra* +95%, *Pulmicort* (41%)
- **V&I:** *Vaxzevria* \$684m, *Evusheld* \$167m
- **Rare Disease:** *Strensiq* +25%

Ex-China, ex-*Vaxzevria* Emerging Markets +46%

1. *Vaxzevria* 'Total Revenue' also includes Collaboration Revenue from sub-licensees that produce and supply the AstraZeneca COVID-19 Vaccine under their own trademarks. 2. Growth number calculated includes revenue of *Vaxzevria*. Growth excluding *Vaxzevria* is as follows: EM total revenue growth +15%, China -2%; Ex-China EM +44%. Growth rates for CVRM are pro-forma as they include pre-acquisition H1 *Andexxa* performance in comparative 9M 2021 revenues. Pro forma growth rates on medicines acquired with Alexion have been calculated by comparing 9M revenues with the corresponding prior year pre-acquisition revenues previously published by Alexion; all rates mentioned are pro forma growth rates at CER. EM = Emerging Markets; CVRM = Cardiovascular, Renal & Metabolism; R&I = Respiratory & Immunology; V&I = Vaccines & Immune Therapies.



Q3 2022 ESG performance highlights

Access to healthcare

29m+

Hypertension screenings through Healthy Heart Africa since launch in 2015

37 countries

Where the Young Health Programme is active, following expansion into Poland and Palestine, and renewal in Germany

13 Phase 2 countries

Where Partnership for Health System Sustainability and Resilience (PHSSR) research is progressing

Environmental protection

1 of 7

Member companies of the Sustainable Markets Initiative (SMI) Health Systems Taskforce committing to scalable action to accelerate transition to net zero healthcare

Only healthcare company

Invited to attend launch of the SMI China Council

Launched Greener design

Concept as part of PREMIER initiative, to minimise environmental impact of APIs

Ethics and transparency

350 young women

Across 35 countries stepped into leadership positions for the day, as part of Girls Belong Here gender diversity initiative with Plan International

\$200k in Step Up grants

Awarded to support small, youth-led non-profit organisations to deliver effective health promotion programmes, with 80% of funding directed to women-led projects

3 focus areas

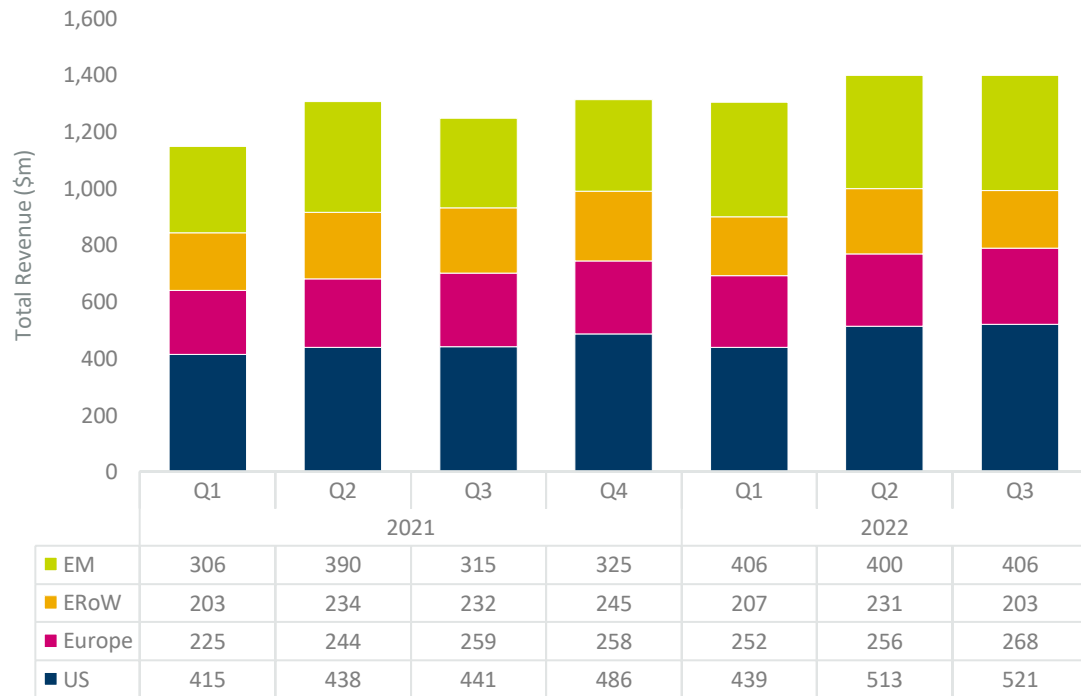
Of Inclusion, Diversity and External Impact, in refreshed Global Inclusion and Diversity strategy



Oncology

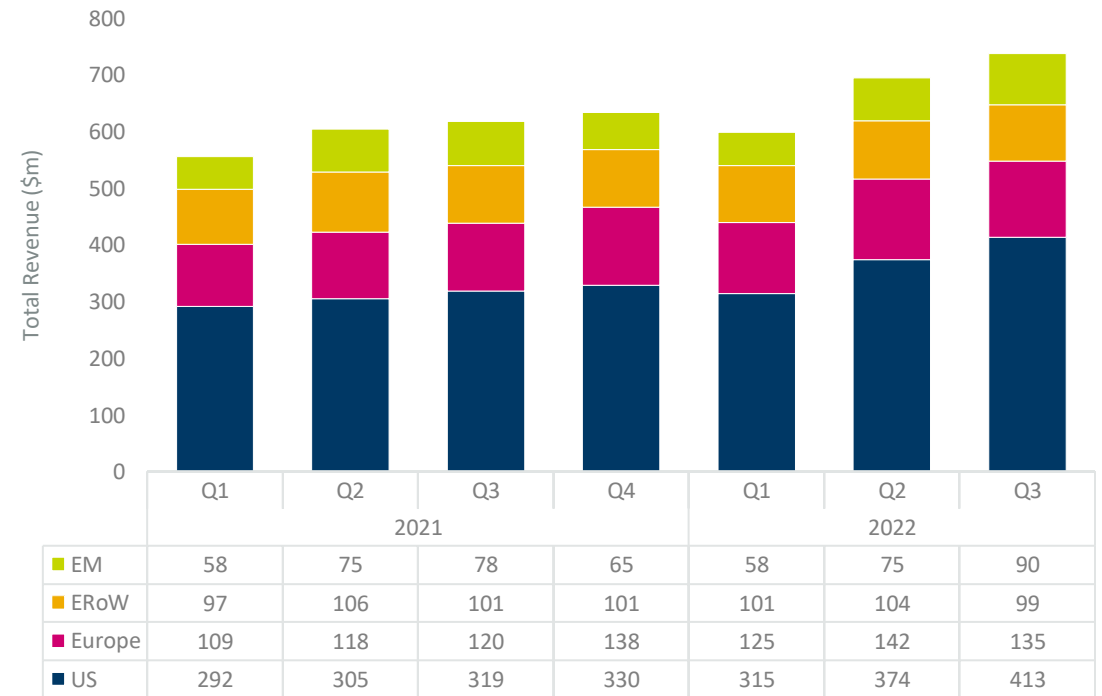
Tagrisso

16% growth to \$4,102m



Imfinzi

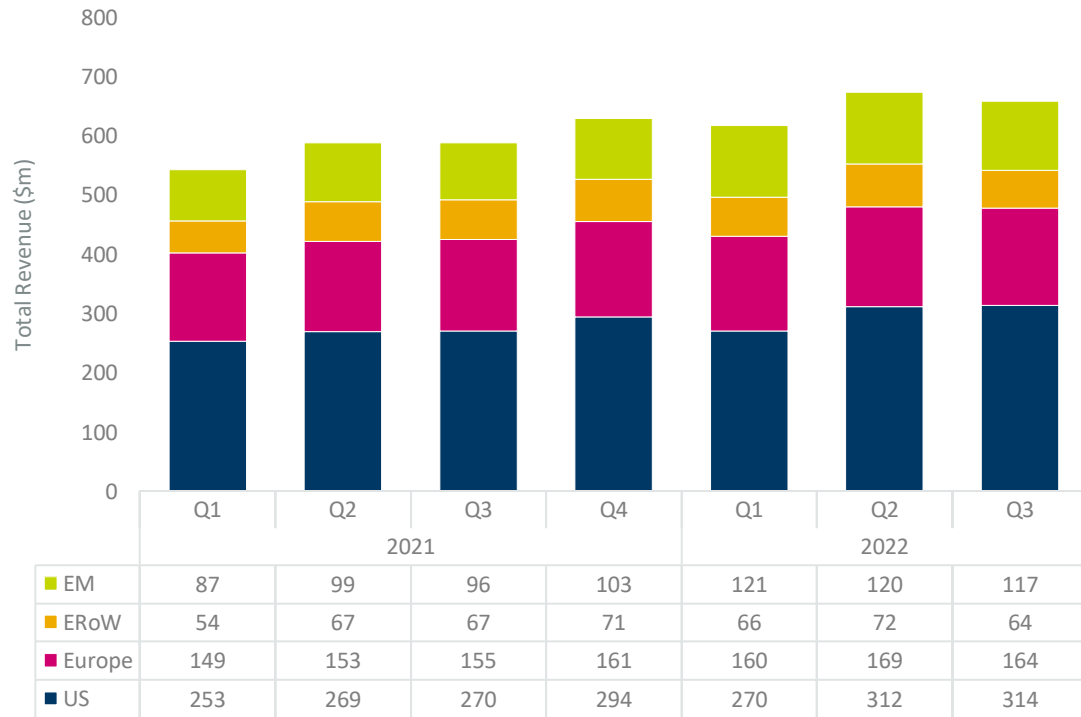
19% growth to \$2,031m



Oncology

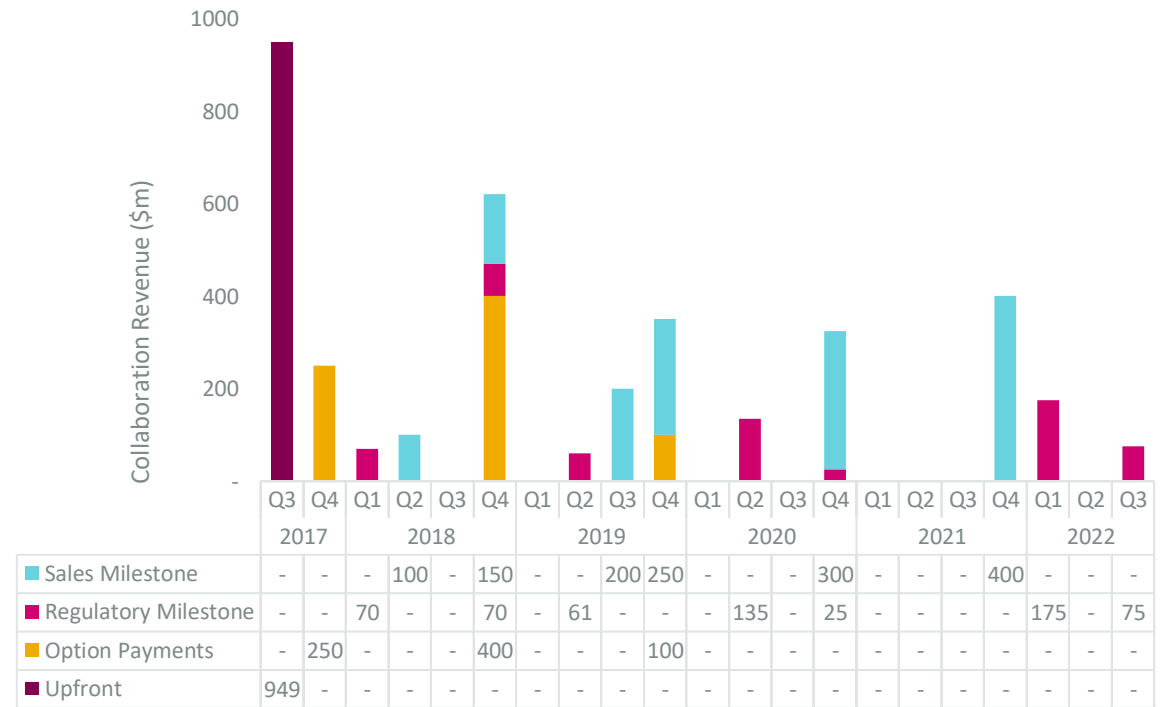
Lynparza

19% growth to \$1,949m (excludes Collaboration Revenue)



Lynparza

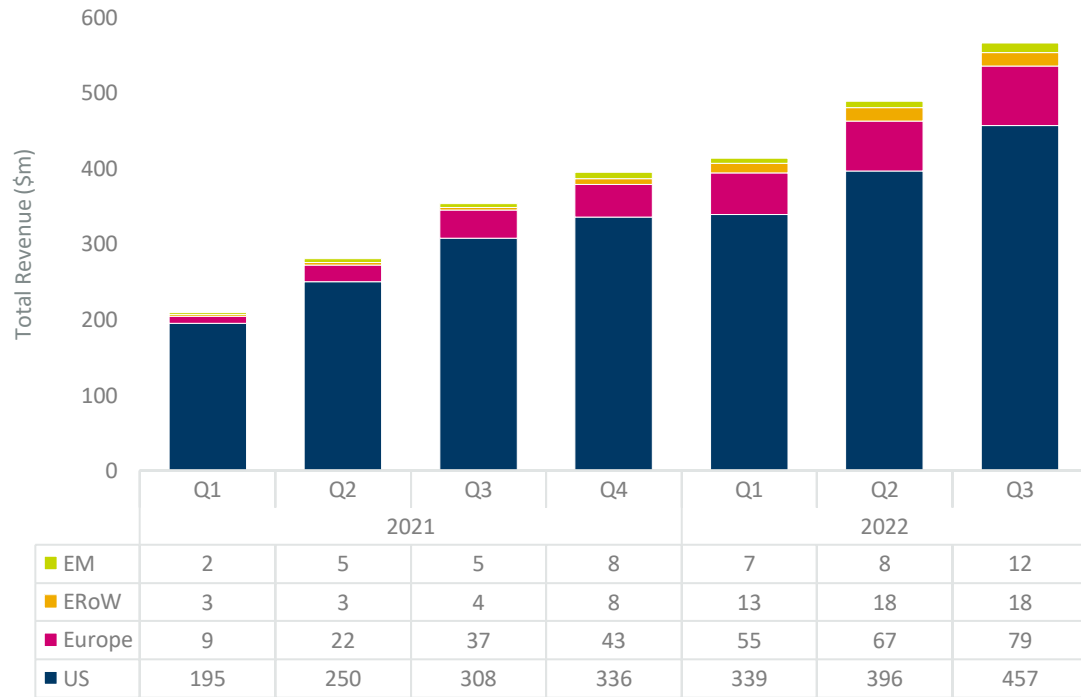
Collaboration Revenue: \$3.7bn recorded, \$4.0bn future potential



Oncology

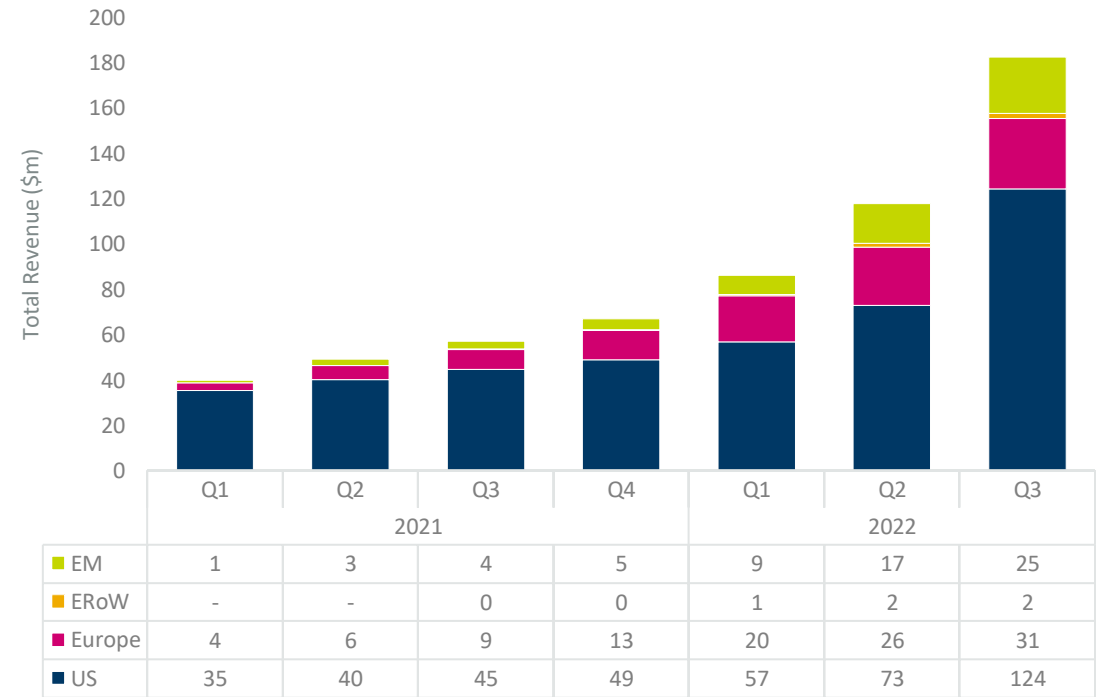
Calquence

77% growth to \$1,469m



Enhertu

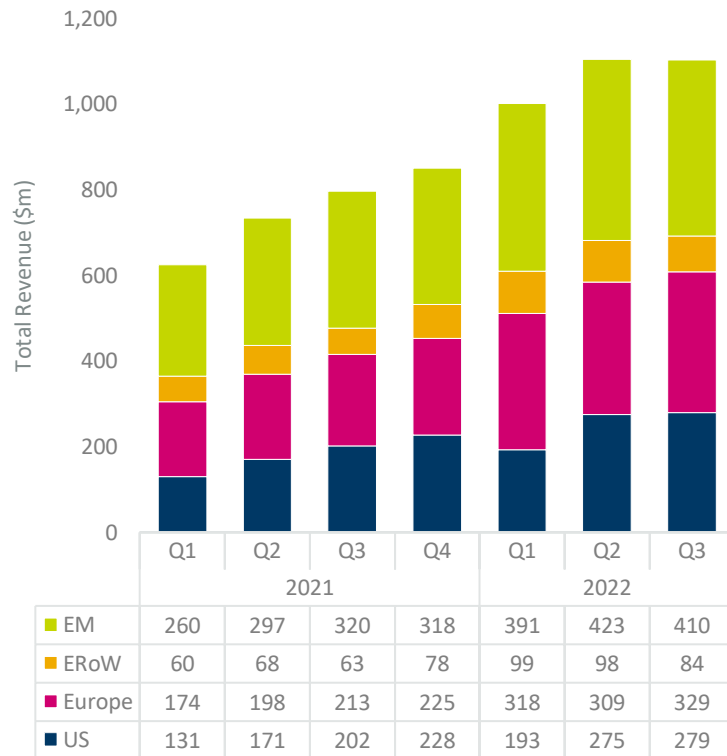
>2x growth to \$387m



BioPharmaceuticals: Cardiovascular, Renal and Metabolism

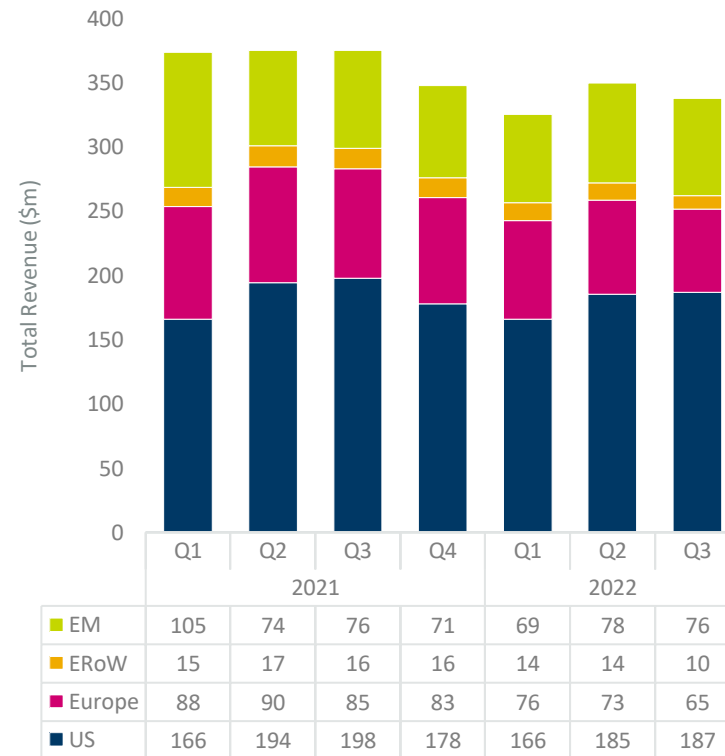
Farxiga

58% growth to \$3,208m



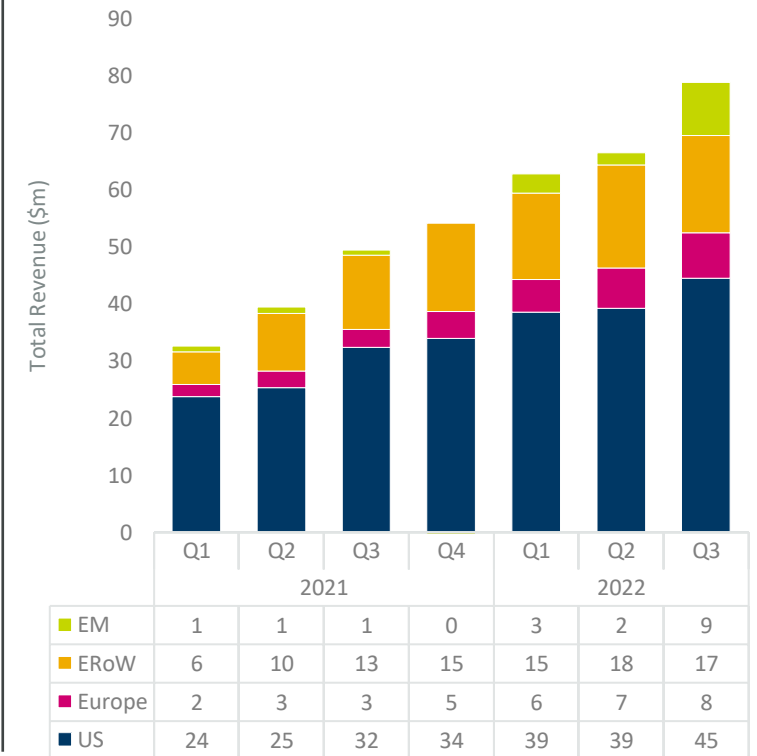
Brilinta

7% decrease to \$1,013m



Lokelma

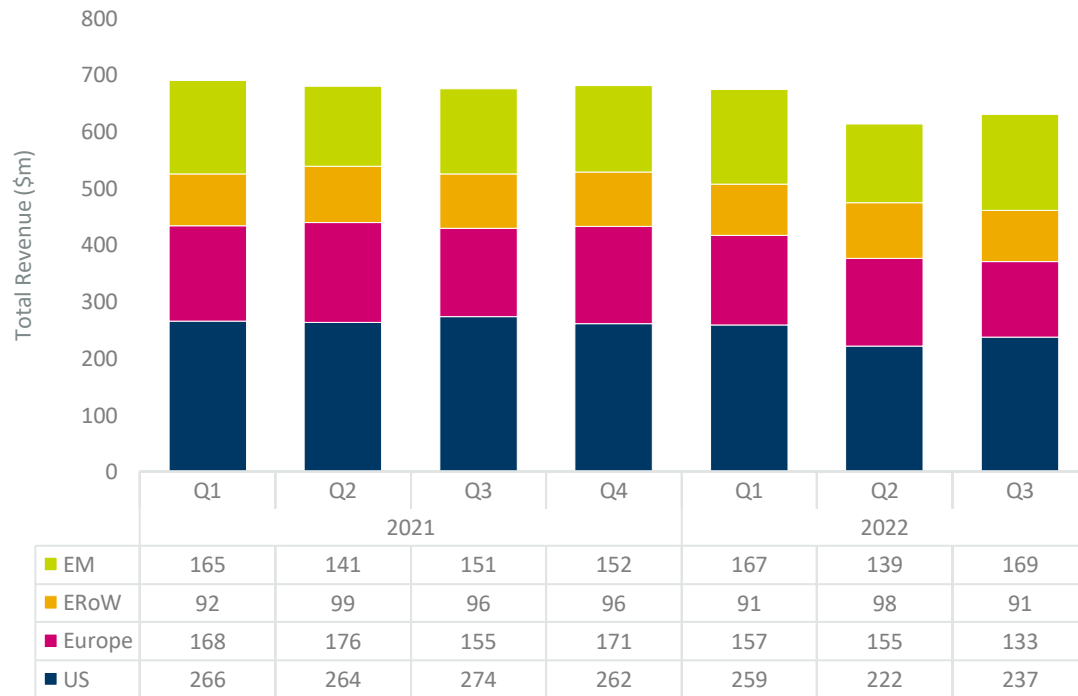
80% growth to \$208m



BioPharmaceuticals: Respiratory & Immunology

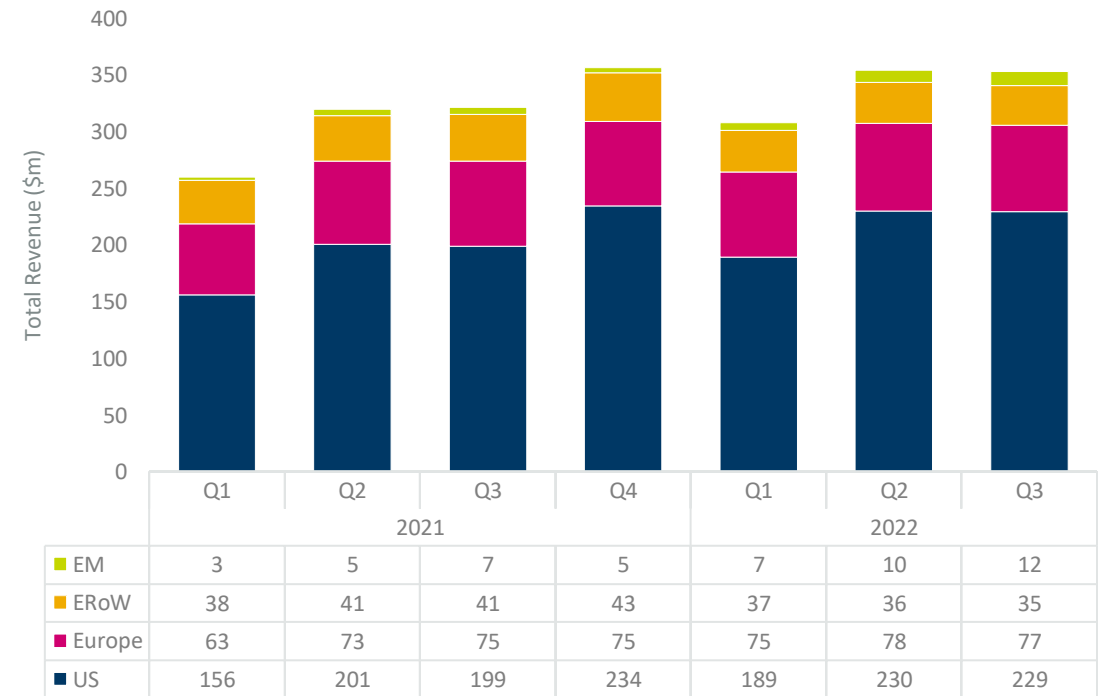
Symbicort

2% decrease to \$1,919m



Fasenra

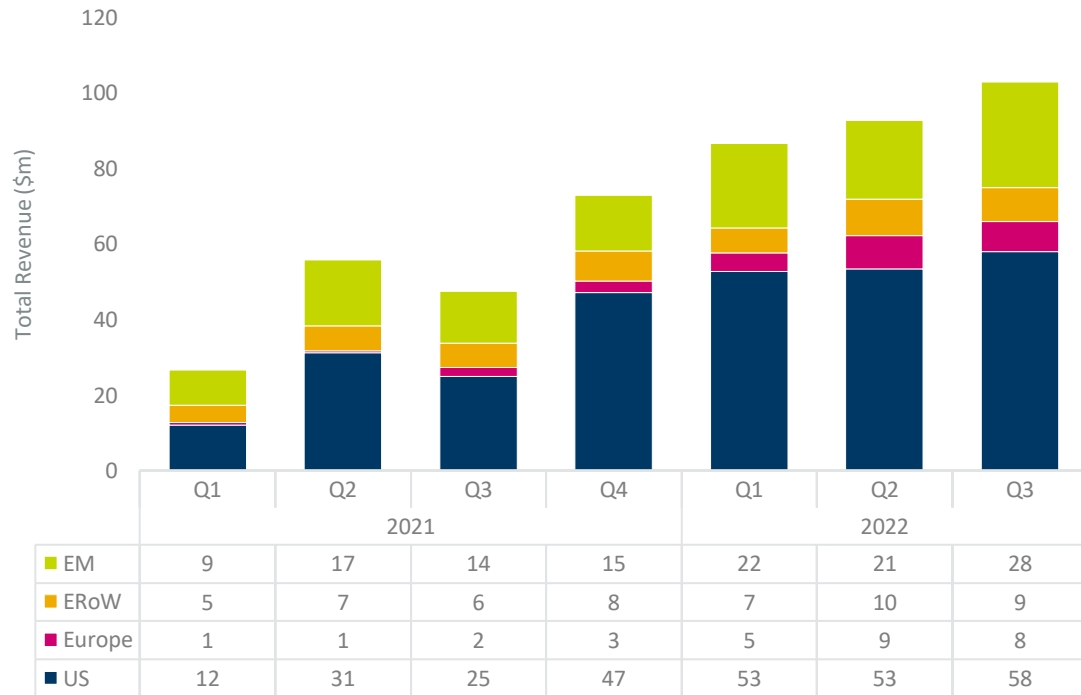
17% growth to \$1,015m



BioPharmaceuticals: Respiratory & Immunology

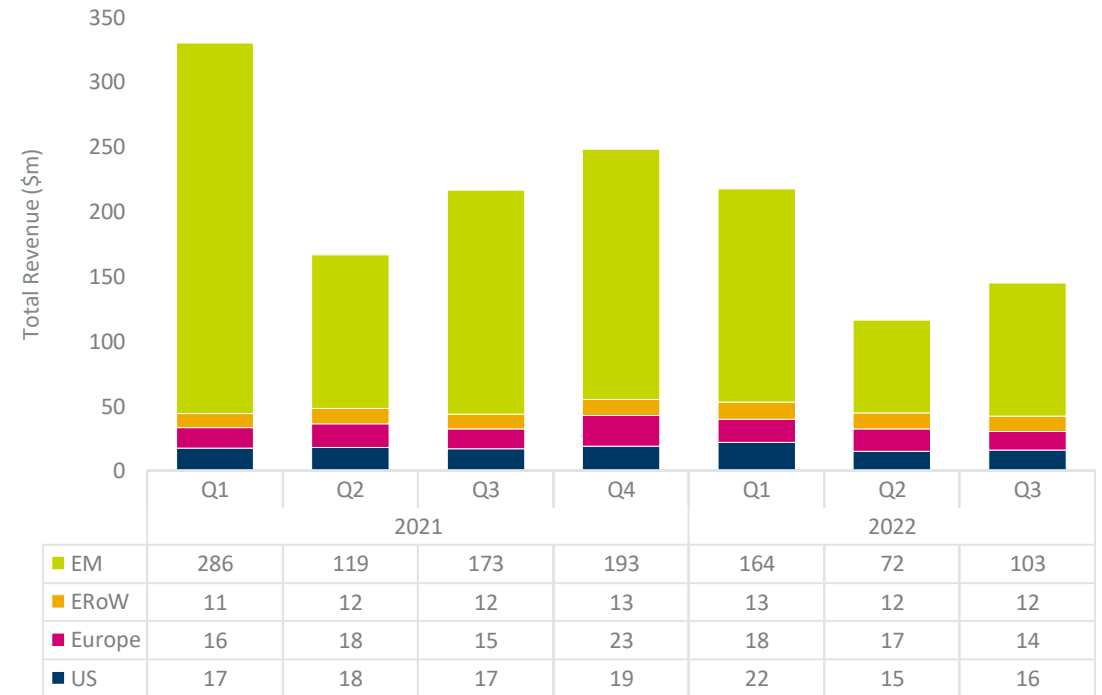
Breztri

>2x growth to \$282m



Pulmicort

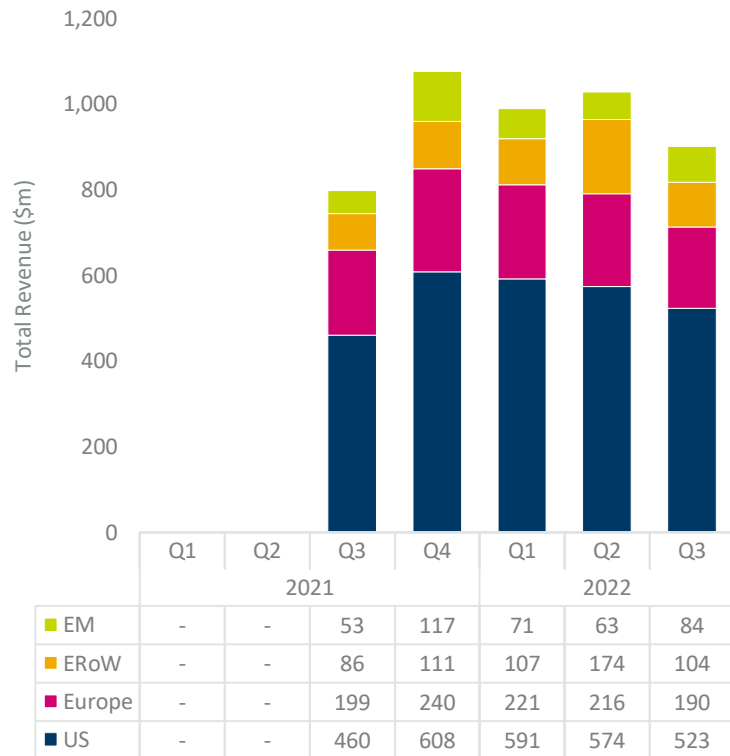
31% decline to \$479m



Rare Disease

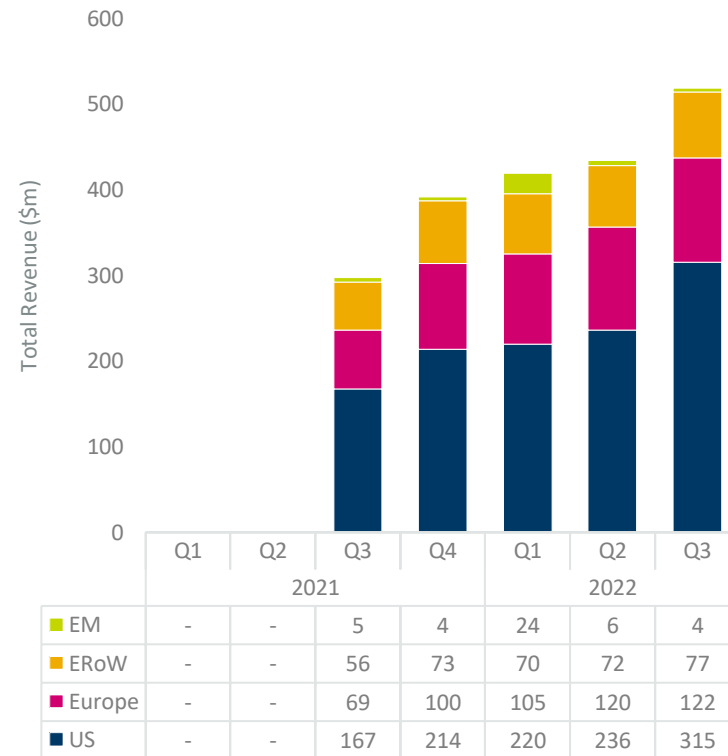
Soliris

2% decrease to \$2,918m



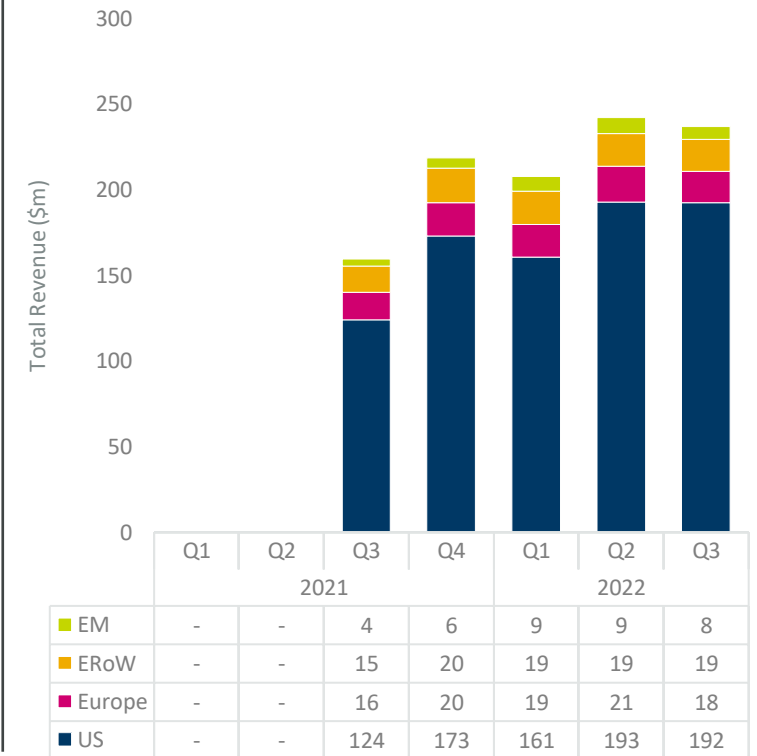
Ultomiris

35% growth to \$1,371m



Strensiq

15% growth to \$687m



Use of AstraZeneca slides from conference calls and webcasts

The AstraZeneca webcast, conference call and presentation slides (together the 'AstraZeneca materials') are for your personal, non-commercial use only. You may not copy, reproduce, republish, post, broadcast, transmit, make available to the public, sell or otherwise reuse or commercialise the AstraZeneca materials in any way. You may not edit, alter, adapt or add to the AstraZeneca materials in any way, nor combine the AstraZeneca materials with any other material. You may not download or use the AstraZeneca materials for the purpose of promoting, advertising, endorsing or implying any connection between you (or any third party) and us, our agents or employees, or any contributors to the AstraZeneca materials. You may not use the AstraZeneca materials in any way that could bring our name or that of any Affiliate into disrepute or otherwise cause any loss or damage to us or any Affiliate. AstraZeneca PLC, 1 Francis Crick Avenue, Cambridge Biomedical Campus, Cambridge, CB2 0AA. Telephone + 44 20 3749 5000, www.astrazeneca.com

