Roche

HY 2015 results

Basel, 23 July 2015
This presentation contains certain forward-looking statements. These forward-looking statements may be identified by words such as ‘believes’, ‘expects’, ‘anticipates’, ‘projects’, ‘intends’, ‘should’, ‘seeks’, ‘estimates’, ‘future’ or similar expressions or by discussion of, among other things, strategy, goals, plans or intentions. Various factors may cause actual results to differ materially in the future from those reflected in forward-looking statements contained in this presentation, among others:

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2. legislative and regulatory developments and economic conditions;
3. delay or inability in obtaining regulatory approvals or bringing products to market;
4. fluctuations in currency exchange rates and general financial market conditions;
5. uncertainties in the discovery, development or marketing of new products or new uses of existing products, including without limitation negative results of clinical trials or research projects, unexpected side-effects of pipeline or marketed products;
6. increased government pricing pressures;
7. interruptions in production;
8. loss of or inability to obtain adequate protection for intellectual property rights;
9. litigation;
10. loss of key executives or other employees; and
11. adverse publicity and news coverage.

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Group

Severin Schwan
Chief Executive Officer
HY 2015: Highlights

Growth

Sales
• Group sales +6%\(^1\) driven by HER2 franchise (+21%), Avastin (+9%), Actemra (+25%) and Professional Diagnostics (+7%)
• Outperformance in all major regions: US (+6\(^\circ\)\(^1\)), Japan (+6\(^\circ\)\(^1\)) and International (+9\(^\circ\)\(^1\))

Profit
• +7% core EPS growth\(^1,2\) driven by strong underlying business

Innovation

Oncology
Strong ASCO newsflow
• Atezolizumab (aPDL1): POPLAR, FIR, Chemo combos
• Alectinib: Phase II in 2L ALK+ NSCLC
• Gazyva: Phase III (GADOLIN) in R/R iNHL
• Cobimetinib + Zelboraf: Phase III (coBRIM) in 1L BRAF+ mM

Neuroscience
• Ocrelizumab: OPERA I and II met primary and secondary endpoints

Hematology
• ACE910 (aFIXa/FX): Updated phase Ib

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\(^1\) At Constant Exchange Rates (CER)
\(^2\) Excluding sale of filgrastim rights in 2014
## HY 2015: Strong sales growth

<table>
<thead>
<tr>
<th></th>
<th>HY 2015 CHFbn</th>
<th>HY 2014 CHFbn</th>
<th>Change in %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmaceuticals Division</td>
<td>18.4</td>
<td>17.9</td>
<td>3</td>
</tr>
<tr>
<td>Diagnostics Division</td>
<td>5.2</td>
<td>5.1</td>
<td>2</td>
</tr>
<tr>
<td>Roche Group</td>
<td>23.6</td>
<td>23.0</td>
<td>3</td>
</tr>
</tbody>
</table>

CER = Constant Exchange Rates
Q2 2015: Sales growth for fifth consecutive year

All growth rates at Constant Exchange Rates (CER)
HY 2015: Both divisions with strong sales growth

All growth rates at Constant Exchange Rates (CER)
HY 2015: Strong underlying Group core operating profit & margin

CHFbn

8.3 | 8.6 | 9.5 | 9.4 | 9.2

% of sales

- HY 2011: 38.1%
- HY 2012: 38.5%
- HY 2013: 40.7%
- HY 2014: 41.0%
- HY 2015: 39.2% (+0.4%p excl. filgrastim*)

+2% at CER (+7%*)

CER=Constant Exchange Rates
* Excluding sale of filgrastim rights in 2014 at CER
HY 2015: Continued strong underlying core EPS growth

<table>
<thead>
<tr>
<th>Year</th>
<th>EPS (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HY 2011</td>
<td>6.68</td>
</tr>
<tr>
<td>HY 2012</td>
<td>6.94</td>
</tr>
<tr>
<td>HY 2013</td>
<td>7.58</td>
</tr>
<tr>
<td>HY 2014</td>
<td>7.57</td>
</tr>
<tr>
<td>HY 2015</td>
<td>7.22</td>
</tr>
</tbody>
</table>

All growth rates at Constant Exchange Rates (CER)

* Excluding sale of filgrastim rights in 2014
HY 2015: Core EPS growth bridge

All growth rates at Constant Exchange Rates (CER)
* Excluding sale of filgrastim rights in 2014
Roche: Making progress in advancing patient care
Recognising innovation 2013-15

## Breakthrough Therapy Designations

<table>
<thead>
<tr>
<th>Rank</th>
<th>Company</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Roche</td>
<td>8</td>
</tr>
<tr>
<td>2</td>
<td>GSK</td>
<td>5</td>
</tr>
<tr>
<td>2</td>
<td>Novartis</td>
<td>5</td>
</tr>
<tr>
<td>3</td>
<td>Merck</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>JNJ</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>BMS</td>
<td>4</td>
</tr>
</tbody>
</table>

### 2013
- **Alectinib** *(2L ALK+ NSCLC)*
- **Gazyva** *(1L CLL)*

### 2014
- **Esbriet** *(IPF)*
- **Lucentis** *(DR)*
- **Atezolizumab** *(bladder)*

### 2015
- **Actemra** *(Systemic sclerosis)*
- **Venetoclax** *(R/R CLL 17p)*
- **Atezolizumab** *(NSCLC)*
- **Actemra** *(Systemic sclerosis)*
- **Venetoclax** *(R/R CLL 17p)*
- **Atezolizumab** *(NSCLC)*

Source: [http://www.focr.org/breakthrough-therapies](http://www.focr.org/breakthrough-therapies); CLL=Chronic Lymphocytic Leukemia; NSCLC=Non-Small Cell Lung Cancer; IPF=Idiopathic Pulmonary Hypertension; DR=Diabetic Retinopathy
Continued strong commitment to innovation

*Immunology and Oncology in focus*

- **2012**: 9
- **2013**: 11
- **2014**: 9
- **2015 YTD**: 13

**# phase III starts**

- **Oncology**
- **Neuroscience**
- **Ophthalmology**
- **Immunology**
- **CardioMetabolism**
- **Infectious Diseases**
- **Cancer Immunotherapy**
# Progressing in Personalised Healthcare

60% of phase 2 & 3 products have PHC component

## Phase 2
- Anti-FIXa/FX biMAb
- SERD
- emactuzumab
- vanucizumab
- ipatasertib
- polatuzumab vedotin
- lifastuzumab vedotin
- Anti-glypican-3 MAb

## Phase 3/Registration
- GABRA5 NAM
- basim-glurant
- V1 receptor antagonist
- MAO-B inhibitor
- bitopertin
- olesoxime
- danoprevir
- Anti-Flu A MAb
- TLR7 agonist

## Marketed
- atezolizumab
- venetoclax
- alectinib
- tafelisib
- cobimetinib
- lebrikizumab
- etrolizumab
- crenezumab
- gantenerumab
- ocrelizumab
- lampalizumab

**Marketed Products**: Tarceva®, Zelboraf®, Erivedge®, Rituxan®, Gazyva®, Herceptin®, Perjeta®, Kadcyla®, Avastin®, Xeloda®, Esbriet®, Pulmozyme®, Xolair®, Actemra®, Lucentis®
Roche: 6 new molecular entities (NMEs) for near-term readout

2015

- **Alectinib** (filing)
- **Venetoclax** (filing)
- **Cobimetinib / Zelboraf** (approval)

2016

- **Atezolizumab (aPDL1)**
  Lung and bladder (filings)
- **Ocrelizumab** (filing)
- **Lebrikizumab** (filing)
<table>
<thead>
<tr>
<th><strong>2015 outlook</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Group sales growth</strong>&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td><strong>Core EPS growth</strong>&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td><strong>Dividend outlook</strong></td>
</tr>
</tbody>
</table>

<sup>1</sup> At Constant Exchange Rates (CER)

<sup>2</sup> Excluding sale of filgrastim rights in 2014
Pharmaceuticals Division

Daniel O’Day
COO Roche Pharmaceuticals
HY 2015 results

Innovation

Outlook
# HY 2015: Strong growth driven by all regions

<table>
<thead>
<tr>
<th>Pharmaceuticals Division</th>
<th>HY 2015 CHFm</th>
<th>HY 2014 CHFm</th>
<th>Change in % CHF</th>
<th>Change in % CER</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>18,350</td>
<td>17,834</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Europe</td>
<td>8,586</td>
<td>7,572</td>
<td>13</td>
<td>7</td>
</tr>
<tr>
<td>Japan</td>
<td>4,291</td>
<td>4,775</td>
<td>-10</td>
<td>2</td>
</tr>
<tr>
<td>International</td>
<td>1,540</td>
<td>1,581</td>
<td>-3</td>
<td>7</td>
</tr>
<tr>
<td>International</td>
<td>3,933</td>
<td>3,906</td>
<td>1</td>
<td>7</td>
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</tbody>
</table>

CER = Constant Exchange Rates
**HY 2015: Strong underlying growth**

<table>
<thead>
<tr>
<th></th>
<th>CHFm</th>
<th>% sales</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sales</strong></td>
<td>18,350</td>
<td>100.0</td>
</tr>
<tr>
<td>Royalties &amp; other op. inc.</td>
<td>1,174</td>
<td>6.4</td>
</tr>
<tr>
<td>Cost of sales</td>
<td>-3,895</td>
<td>-21.2</td>
</tr>
<tr>
<td>M &amp; D</td>
<td>-2,801</td>
<td>-15.3</td>
</tr>
<tr>
<td>R &amp; D</td>
<td>-3,811</td>
<td>-20.8</td>
</tr>
<tr>
<td>G &amp; A</td>
<td>-625</td>
<td>-3.4</td>
</tr>
<tr>
<td><strong>Core operating profit</strong></td>
<td>8,392</td>
<td>45.7</td>
</tr>
</tbody>
</table>

**2015 vs. 2014 CER growth**

-2% in CHF

-16% filgrastim impact

11% Capacity increase in manufacturing

(+6% excl. filgrastim*)

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CER=Constant Exchange Rates

* Excluding sale of filgrastim rights in 2014
HY 2015: Strong performance from oncology and immunology franchises; Esbriet off to a good start

- Herceptin: +11%
- Avastin: +9%
- Perjeta: +72%
- Esbriet: n.a.
- MabThera/Rituxan: +6%
- Kadcyla: +65%
- Actemra/RoActemra: +25%
- Xolair: +28%
- Lucentis: -13%
- Valcyte/Cymevene: -44%
- Xeloda: -44%
- Pegasys: -49%

Absolute amounts and growth rates at Constant Exchange Rates (CER)
## HY 2015: Oncology with +8% growth

### YoY CER growth

<table>
<thead>
<tr>
<th>Drug</th>
<th>CHFbn</th>
<th>YoY CER growth</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>HER2</td>
<td>3</td>
<td>+21%</td>
<td>• Strong uptake of Perjeta &amp; Kadcyla</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Accelerated growth of Herceptin</td>
</tr>
<tr>
<td>Avastin</td>
<td>2.5</td>
<td>+9%</td>
<td>• Growth driven by ovarian, cervical and CRC</td>
</tr>
<tr>
<td>MabThera/Rituxan (Oncology)</td>
<td>2</td>
<td>+5%</td>
<td>• International: Growth in all regions</td>
</tr>
<tr>
<td>Tarceva</td>
<td>-1</td>
<td>-7%</td>
<td>• In-class competition</td>
</tr>
<tr>
<td>Xeloda</td>
<td>-3.5</td>
<td>-44%</td>
<td>• Loss of exclusivity</td>
</tr>
<tr>
<td>Zelboraf</td>
<td>-1.5</td>
<td>-25%</td>
<td>• Competitive pressure in US &amp; EU</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Approval of MEK/BRAF combo expected in 2015</td>
</tr>
</tbody>
</table>

CER=Constant Exchange Rates

HY 2015 Oncology sales: CHF 11.7bn; CER growth +8%
**HER2 franchise: Growth driven by Herceptin, Perjeta and Kadcyla**

**HER2 franchise Q2 2015**

- **Herceptin (+10%)**: Longer treatment duration in combination with Perjeta
- **Perjeta (+64%)**: Strong demand in mBC (US & EU) and neoadjuvant (US)
- **Kadcyla (+54%)**: Growth driven by EU

**Outlook**

- **Perjeta**: Positive CHMP opinion in Neoadjuvant in the EU
- **Kadcyla**: Continued growth driven by EU and International

CER=Constant Exchange Rates; mBC=metastatic breast cancer
Avastin: Growth across various indications and in all regions

Avastin Q2 2015
- US: Continued uptake in ovarian and 1L colorectal cancer
- EU: Growth in ovarian and cervical
- International driven by LATAM

Avastin outlook
- Potential filing in mesothelioma
- China: Lung cancer indication approved
- Lung cancer (EU): Avastin + Tarceva filed

CER=Constant Exchange Rates
Immunology: Strong performance by Actemra, Xolair and MabThera/Rituxan

Actemra (+23%)
- SC launch and 1L mono setting; Breakthrough therapy designation received in systemic sclerosis

Xolair (+27%)
- Allergic asthma and strong growth in chronic idiopathic urticaria post FDA approval in Q1 '14

MabThera/Rituxan (+10%)
- Continues to grow in rheumatoid arthritis and vasculitis (GPA and MPA)

CER=Constant Exchange Rates; GPA=Granulomatosis with polyangiitis; MPA=Microscopic polyangiitis
Lucentis: Ongoing competitive pressure

**Lucentis Q2 2015**
- Continued competitive pressure
- First-in-class FDA approval to treat diabetic retinopathy in patients with DME

**Outlook**
- Ongoing competition in AMD & DME
- First sales in diabetic retinopathy

wAMD=wet age-related macular degeneration; DME=diabetic macular edema
Esbriet: Establishing market leadership in IPF

**US**
- New patients on track with launch expectations

**EU**
- Label was strengthened by including ASCEND and pooled 1Y mortality data

**Pipeline update**
- Phase II study of Esbriet in combination with lebrikizumab (anti-IL13) in IPF started in Q2

IPF = idiopathic pulmonary hypertension
HY 2015 results

Innovation

Outlook
# Roche cancer immunotherapy beginning 2015

## Phase I
- **aPDL1**
  - Solid tumors
- **aPDL1 + chemo**
  - Solid tumors
- **aPDL1 + Tarceva**
  - NSCLC
- **aPDL1 + Zelboraf**
  - Melanoma
- **aPDL1 + cobimetinib**
  - Solid tumors
- **aPDL1 + Avastin**
  - Solid tumors
- **aPDL1 + Gazyva**
  - R/R FL / aNHL
- **aPDL1 + Avastin + chemo**
  - Solid tumors
- **aCSF-1R**
  - Solid tumors
- **aCEA-IL2v FP**
  - Solid tumors
- **aOX40**
  - Solid tumors
- **aCEA/CD3 TCB**
  - Solid tumors
- **IDO**
  - Solid tumors
- **aPDL1 + ipilimumab**
  - Solid tumors

## Phase II
- **aPDL1 + IFN-alfa**
  - Solid tumors
- **aPDL1 + aCD40**
  - Solid tumors
- **aPDL1 + Tarceva**
  - NSCLC (Dx+)
- **aPDL1 + Avastin**
  - 1L Renal
- **aPDL1 + aCD40**
  - Solid tumors
- **aPDL1 + IFN-alpha**
  - Solid tumors
- **aPDL1 + iplimumab**
  - Solid tumors

## Phase III
- **aPDL1**
  - 2/3L NSCLC
- **aPDL1 + Avastin**
  - 1L Renal
- **aPDL1**
  - 1/2L Bladder

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Status as at December 31, 2014
Roche cancer immunotherapy at HY 2015

**Phase I**
- **aPDL1**
  - Solid tumors
- **aPDL1** + chemo
  - Solid tumors
- **aPDL1** + Tarceva
  - NSCLC
- **aPDL1** + Zelboraf
  - Melanoma
- **aPDL1** + cobimetinib
  - Solid tumors
- **aPDL1** + Avastin
  - Solid tumors
- **aPDL1** + Gazyva
  - R/R FL / aNHL
- **aPDL1** + Avastin + chemo
  - Solid tumors
- **aPDL1** + lenalidomide
  - MM
- **aPDL1** + Zelboraf + cobi
  - Melanoma
- **aCSF-1R**
  - Solid tumors
- **aCEA-IL2v FP**
  - Solid tumors
- **aOX40**
  - Solid tumors
- **aCEA/CD3 TCB**
  - Solid tumors

**Phase II**
- **aPDL1**
  - IDO
  - Solid tumors
- **aPDL1** + ipilimumab
  - Solid tumors
- **aPDL1** + IFN-alfa
  - Solid tumors
- **aPDL1** + aCD40
  - Solid tumors
- **aPDL1** + aOX40
  - Solid tumors
- **aPDL1** + aCSF-1R
  - Solid tumors
- **aPDL1** + aCEA-IL2v FP
  - Solid tumors
- **aPDL1** + IDO
  - Solid tumors
- **aPDL1** + Avastin
  - 1L Renal
- **aPDL1** + chemo
  - 1L non sq NSCLC
- **aPDL1** + Avastin + chemo
  - 1L non sq NSCLC
- **aPDL1** + chemo
  - 1L sq NSCLC
- **aPDL1** + Avastin
  - 1L RCC
- **aPDL1** + Avastin + chemo
  - 1L non sq NSCLC
- **aPDL1** + chemo
  - 1L non sq NSCLC
- **aPDL1** + Avastin
  - 1L TNBC
- **aPDL1** + chemo
  - 1L TNBC
- **aPDL1** + Avastin
  - 1L RCC
- **aPDL1** + chemo
  - 1L RCC
- **aPDL1** + Avastin
  - 1L RCC
- **aPDL1** + chemo
  - 1L RCC
- **aPDL1**
  - Adjuvant MIBC (Dx+)
- **aPDL1**
  - Adjuvant NSCLC

**Phase III**
- **aPDL1**
  - 2/3L NSCLC
- **aPDL1**
  - 2/3L Bladder
- **aPDL1** + Avastin + chemo
  - 1L non sq NSCLC
- **aPDL1** + chemo
  - 1L non sq NSCLC
- **aPDL1** + chemo
  - 1L sq NSCLC
- **aPDL1**
  - 1L non sq NSCLC (Dx+)
- **aPDL1**
  - 1L RS NSCLC (Dx+)
- **aPDL1**
  - 1L RCC
- **aPDL1**
  - 1L RCC
- **aPDL1**
  - 1L RCC

**Status as at June 30, 2015**

- **aPDL1 trials**
- **NMEs monotherapy**
- **Immune doublets**
- **2015 readout expected**
- **Data at ASCO 2015**
- **Additions in 2015**
Atezolizumab: Pivotal programs by disease

Going deep in diseases where we have strong scientific rationale

**LUNG**
- 2L+ single-arm Ph2 (x2)
- 2L+ rand. Ph2 and rand. Ph3
- 1L single-agent Ph3 (x2)
- 1L w/chemo, Avastin Ph3 (x3)
- Adjuvant Ph3

**BLADDER**
- 2L+ & 1L cis-inel. single-arm Ph2
- 2L+ rand. Ph3
- Adjuvant Ph3

**KIDNEY**
- 1L w/Avastin Ph2
- 1L w/Avastin Ph3

**BREAST**
- 1L w/chemo Ph3

cis-inel.=cisplatin ineligible patients
Ocrelizumab: Phase 3 meets endpoints vs. SOC
Results confirm central role of B cells in MS

<table>
<thead>
<tr>
<th>Study Endpoint</th>
<th>Reduction versus Rebif®</th>
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<tbody>
<tr>
<td>Primary</td>
<td></td>
</tr>
<tr>
<td>Annualized Relapse Rate</td>
<td>✓</td>
</tr>
<tr>
<td>Confirmed Disability Progression</td>
<td>✓</td>
</tr>
<tr>
<td>MRI endpoints</td>
<td>✓</td>
</tr>
</tbody>
</table>

Targeted product profile
- Humanized antibody targeting CD20+ B cells
- Selective depletion of a subset of B cells leaving the ability to generate new B cells intact
- Administered by IV twice yearly

Phase 3 OPERA I/II results in RMS
- Superiority vs. Rebif® on primary and major secondary endpoints achieved
- Adverse events (including serious infections) similar to Rebif®
- Data to be presented at ECTRIMS

SOC=standard of care; MS=multiple sclerosis; RMS=relapsing forms of MS; Rebif® (Interferon beta-1a)
ACE 910 in Hemophilia A
Extension study confirms excellent efficacy

Targeted product profile
• Less frequent dosing
• Subcutaneous
• Avoid induction of inhibiting antibodies

Next development steps
• Follow-on data presented at ISTH
• First Ph3 (inhibitors) to start in Q4 15
• Data in 2017

In collaboration with Chugai; ABR=annual bleeding rate
Nogami K. et al, ISTH 2015
Lebrikizumab: First-in-class anti-IL13 Programs progressing in asthma, IPF and dermatitis

**LAVOLTA I & II: Ph III**
- Severe asthma adults
  - n=2100
  - Lebrikizumab SC q4w high dose
  - Lebrikizumab SC q4w low dose
  - Placebo

**ACOUSTICS: Ph III**
- Severe asthma adolescents
  - n=375
  - Lebrikizumab SC q4w high dose
  - Lebrikizumab SC q4w low dose
  - Placebo

**RIFF: Ph II**
- Idiopathic pulmonary fibrosis
  - n=300
  - Lebrikizumab SC q4w
  - Placebo
  - Lebrikizumab SC q4w + Esbriet
  - Placebo + Esbriet

**TREBLE: Ph II**
- Moderate to severe atopic dermatitis
  - n=200
  - Lebrikizumab SC dose1
  - Lebrikizumab SC dose2
  - Lebrikizumab SC dose3
  - Placebo

**ARBAN: Ph II**
- Moderate to severe atopic dermatitis
  - n=50
  - Lebrikizumab SC
  - Topical corticosteroids

*IPF = idiopathic pulmonary fibrosis; FPI = first patient in*

Enrollment completed in Q4 2014
Data expected in 1H 2016
Filing in 2016

FPI Q3 2013
Data expected in 2018

FDA Orphan drug designation granted in Q1 2015
Trial amended for Esbriet combination cohort
FPI in Q2 2015
Data expected in 2017

Strong scientific rationale for IL13 pathway blockade
FPI in Q2 2015
Data expected in 2017
Alzheimer’s disease program: Implementing higher doses

Amyloid pathway and targets

**Crenezumab**
- Start of Phase 3 in prodromal-to-mild patients

**Gantenerumab**
- Discussions with the regulators to implement higher doses in ongoing and future studies
H1 2015 results

Innovation

Outlook
# 2015: Key late-stage news flow

<table>
<thead>
<tr>
<th>Compound</th>
<th>Indication</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Regulatory</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avastin</td>
<td>Cervical cancer</td>
<td>EU approval</td>
</tr>
<tr>
<td>Lucentis</td>
<td>Diabetic retinopathy</td>
<td>US approval</td>
</tr>
<tr>
<td>alectinib</td>
<td>2L ALK+ NSCLC</td>
<td>US filing</td>
</tr>
<tr>
<td>cobimetinib + Zelboraf</td>
<td>1L Melanoma</td>
<td>US, EU approval</td>
</tr>
<tr>
<td><strong>Phase III readouts</strong></td>
<td></td>
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<tr>
<td>Gazyva</td>
<td>MabThera/Rituxan-refractory iNHL</td>
<td>Ph III GADOLIN</td>
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<tr>
<td>Gazyva</td>
<td>Front-line aNHL</td>
<td>Ph III GOYA (interim)</td>
</tr>
<tr>
<td>ocrelizumab</td>
<td>Relapsing forms of MS (RMS)</td>
<td>Ph III OPERA I/II</td>
</tr>
<tr>
<td>ocrelizumab</td>
<td>Primary progressive MS (PPMS)</td>
<td>Ph III ORATORIO</td>
</tr>
<tr>
<td>Perjeta</td>
<td>2L HER2+ mBC</td>
<td>Ph III PHEREXA</td>
</tr>
<tr>
<td>Kadcyla</td>
<td>2L HER2+ gastric cancer</td>
<td>Ph II/III GATSBY</td>
</tr>
<tr>
<td><strong>Phase III starts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>atezolizumab**</td>
<td>2/3L Bladder</td>
<td>Ph III</td>
</tr>
<tr>
<td>atezolizumab**</td>
<td>1L TNBC</td>
<td>Ph III</td>
</tr>
<tr>
<td>atezolizumab**</td>
<td>1L RCC</td>
<td>Ph III</td>
</tr>
<tr>
<td>atezolizumab**</td>
<td>Adjuvant MIBC</td>
<td>Ph III</td>
</tr>
<tr>
<td>etrolizumab</td>
<td>Crohn’s disease</td>
<td>Ph III</td>
</tr>
<tr>
<td>ACE910</td>
<td>Hemophilia A</td>
<td>Ph III</td>
</tr>
<tr>
<td><strong>Phase II readouts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>atezolizumab</td>
<td>2/3L NSCLC</td>
<td>Ph II FIR, POPULAR, BIRCH</td>
</tr>
<tr>
<td>atezolizumab</td>
<td>Bladder</td>
<td>Ph II</td>
</tr>
<tr>
<td>ipatasertib (AKT inhib)</td>
<td>Gastric/prostate cancers</td>
<td>Ph II A.MARTIN, JAGUAR</td>
</tr>
</tbody>
</table>

* Outcome studies are event driven, timelines may change; ** For atezolizumab (aPDL1) only P3 trials in new indications are listed (1L NSCLC starts not shown)
Roche: 6 new molecular entities (NMEs) for near-term readout

<table>
<thead>
<tr>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Alectinib (filing)</td>
<td>- Atezolizumab (aPDL1) Lung and bladder (filings)</td>
</tr>
<tr>
<td>- Venetoclax (filing)</td>
<td>- Ocrelizumab (filing)</td>
</tr>
<tr>
<td>- Cobimetinib / Zelboraf (approval)</td>
<td>- Lebrikizumab (filing)</td>
</tr>
</tbody>
</table>
Planned key data presentations in H2 2015

**Vienna, 25-29 Sep**

**Atezolizumab**
- UBC: IMvigor 210 Ph II<sup>1</sup>
- NSCLC: POPLAR Ph II<sup>1,2</sup>
- NSCLC: BIRCH Ph II<sup>1</sup>
- NSCLC: Chemo combos update<sup>2</sup>

**Alectinib**
- ALK+NSCLC: Ph II update<sup>2</sup>

**Barcelona, 7-10 Oct**

**Ocrelizumab**
- RMS: OPERA I / II Ph III

**San Francisco, 18-21 Nov**

**Atezolizumab**
- Melanoma: Combo with Zelboraf Ph Ib
  (abstracts submitted)

**Cobimetinib + Zelboraf**
- BRAF+Melanoma: coBRIM efficacy update
  (abstracts submitted)

**San Antonio, 8-12 Dec**

**Atezolizumab**
- TNBC: Combo with abraxane Ph Ib
  (abstracts submitted)

---

<sup>1</sup> “Data not yet in-house; planned to be submitted to an up-coming congress”; <sup>2</sup> Potentially at World Conference on Lung Cancer (WCLC) 2015

UBC=Urinary Bladder Cancer; NSCLC=Non-Small Cell Lung Cancer; RMS=Relapsing forms of Multiple Sclerosis; TNBC=Triple Negative Breast Cancer
Diagnostics Division

Roland Diggelmann

COO Roche Diagnostics
**HY 2015: Diagnostics Division sales**

*Strong sales performance*

<table>
<thead>
<tr>
<th></th>
<th>HY 2015</th>
<th>HY 2014</th>
<th>Change in %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CHFm</td>
<td>CHFm</td>
<td>CHF</td>
</tr>
<tr>
<td>Diagnostics Division</td>
<td>5,235</td>
<td>5,140</td>
<td>2</td>
</tr>
<tr>
<td>Professional Diagnostics</td>
<td>2,972</td>
<td>2,904</td>
<td>2</td>
</tr>
<tr>
<td>Diabetes Care</td>
<td>1,057</td>
<td>1,140</td>
<td>-7</td>
</tr>
<tr>
<td>Molecular Diagnostics</td>
<td>832</td>
<td>762</td>
<td>9</td>
</tr>
<tr>
<td>Tissue Diagnostics</td>
<td>374</td>
<td>334</td>
<td>12</td>
</tr>
</tbody>
</table>

Underlying growth of Molecular Diagnostics excluding Sequencing business: +9%

CER=Constant Exchange Rates
HY 2015: Diagnostics regional sales
Strong performance in APAC and EMEA

North America
+4%
27% of divisional sales

Latin America
+14%
7% of divisional sales

EMEA\(^1\)
+5%
43% of divisional sales

Japan
-6%
4% of divisional sales

Asia Pacific
+15%
19% of divisional sales

16% growth in E7 countries\(^2\)

\(^1\)Europe, Middle East and Africa; \(^2\)Brazil, China, India, Mexico, Russia, South Korea, Turkey
All growth rates at Constant Exchange Rates
**HY 2015: Diagnostics Division**

**Growth driven by Professional Diagnostics**

*YoY CER growth*

<table>
<thead>
<tr>
<th>Category</th>
<th>YoY CER Growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Dia</td>
<td>+7%</td>
</tr>
<tr>
<td></td>
<td>• Growth driven by immunodiagnostics (+12%) and coagulation monitoring (+11%)</td>
</tr>
<tr>
<td>Diabetes Care</td>
<td>+1%</td>
</tr>
<tr>
<td></td>
<td>• Accu-Chek Aviva/Performa (+4%) and insulin delivering systems (+12%)</td>
</tr>
<tr>
<td>Molecular Dia ¹</td>
<td>+12%</td>
</tr>
<tr>
<td></td>
<td>• Virology (+13%) incl. HPV (+28%)</td>
</tr>
<tr>
<td>Tissue Dia</td>
<td>+12%</td>
</tr>
<tr>
<td></td>
<td>• Advanced staining portfolio (+12%)</td>
</tr>
</tbody>
</table>

¹ Underlying growth of Molecular Diagnostics excluding Sequencing business: +9%

CER=Constant Exchange Rates; EMEA=Europe, Middle East and Africa
**HY 2015: Diagnostics Division**

*Profit growth in line with sales growth*

<table>
<thead>
<tr>
<th>HY 2015 CHFm</th>
<th>% sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sales</td>
<td>5,235</td>
</tr>
<tr>
<td>Royalties &amp; other op. inc.</td>
<td>71</td>
</tr>
<tr>
<td>Cost of sales</td>
<td>-2,303</td>
</tr>
<tr>
<td>M &amp; D</td>
<td>-1,220</td>
</tr>
<tr>
<td>R &amp; D</td>
<td>-540</td>
</tr>
<tr>
<td>G &amp; A</td>
<td>-222</td>
</tr>
<tr>
<td><strong>Core operating profit</strong></td>
<td><strong>1,021</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2015 vs. 2014 CER growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>7%</td>
</tr>
<tr>
<td>9%</td>
</tr>
<tr>
<td>5%</td>
</tr>
<tr>
<td>9%</td>
</tr>
<tr>
<td>13%</td>
</tr>
<tr>
<td>-3%</td>
</tr>
<tr>
<td>+3% in CHF</td>
</tr>
</tbody>
</table>

CER=Constant Exchange Rates
cobas e801 exhibited at EuroMedLab

*Double throughput with the same footprint*

High throughput immunochemistry module in cobas 8000 series:

- Fastest time to result
- Highest accuracy
- Lower blood sample volume
- Minimum waste
- Minimised hands-on time
- High system uptime

Flexible **cobas e** pack sizes
Roche blood safety solution

Unique ability to combine nucleic acid testing and serology for blood screening

- Launch of Elecsys® HTLV-I/II Immunoassay
- Competitive assay to complete blood screening portfolio in serology
- Target market for serology blood screening: ~CHF 1bn

<table>
<thead>
<tr>
<th>Roche blood safety solution</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HTLV-I/II</strong></td>
<td></td>
</tr>
<tr>
<td>HIV combi PT</td>
<td>Anti-HCV II</td>
</tr>
<tr>
<td>Anti-HBc</td>
<td>Anti-HBs</td>
</tr>
<tr>
<td>HBsA</td>
<td>Syphilis</td>
</tr>
</tbody>
</table>

HIV=Human Immunodeficiency Virus; HCV=Hepatitis C Virus; HTLV=Human T-Lymphotropic Virus; HBsAg=Hepatitis B surface antigen; HBc=Hepatitis B core; HBs=Hepatitis B surface
Launch of improved cobas h232 Troponin T
Point of Care results compatible with Elecsys cTNT-hs

- Quantitative measurement of Troponin T levels
- Allows for immediate rule-out decision of patients with suspected acute myocardial infarction
- Competitive advantages:
  - High accuracy, fast readout
  - Compatible results with the Elecsys cTNT-hs
  - Troponin T handheld device
  - Target market (cardiac POC): ~CHF 400m (+8%)

1 Elecsys cTNT-hs=Elecsys® cardiac Troponin T high-sensitive
2 POC=Point of Care
Entering Point of Care Molecular Diagnostics

**CLIA waiver for Liat analyzer and Strep A test**

- Fast readout and easy to use
- Influenza A/B also submitted for CLIA waiver
- Plans to extend menu in:
  - RSV tests
  - MRSA and C-difficile
- Target market: ~CHF 350m (+20%)

Point of Care: e.g. physician’s office, emergency rooms, ambulance, pharmacies; MRSA=Methicillin Resistant Staphylococcus Aureus; RSV=Respiratory Cytotical Virus
Diagnostic assays guiding our clinical strategy

More than 350 collaborations between Pharma and Dia

- 4 BTDs were supported by having a Dx assay identifying patients to benefit
- Clinical outcomes correlate with patient stratification

<table>
<thead>
<tr>
<th>Molecule</th>
<th>Dx</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alectinib</td>
<td>ALK+ NSCLC</td>
</tr>
<tr>
<td>Atezolizumab</td>
<td>PD-L1+ NSCLC**</td>
</tr>
<tr>
<td>Atezolizumab</td>
<td>PD-L1+ UBC</td>
</tr>
<tr>
<td>Venetoclax</td>
<td>17p- CLL**</td>
</tr>
</tbody>
</table>

** Lung cancer: Survival hazard ratio**

- TC3 or IC3
- TC2/3 or IC2/3
- TC1/2/3 or IC1/2/3
- TCo and TCo

*Hazard Ratio* in favor of atezolizumab vs docetaxel

** Bladder cancer: Overall survival**

- Median OS Not Reached
- Median OS 7.6 mo

* Monotherapy data
** Achieved BTD in first half of 2015
# Key launches 2015

<table>
<thead>
<tr>
<th>Area</th>
<th>Product</th>
<th>Market</th>
<th>BA¹</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Instruments / Devices</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Laboratory</strong></td>
<td>cobas c 513 – dedicated HbA1C analyzer</td>
<td>EU</td>
<td>RPD</td>
</tr>
<tr>
<td></td>
<td>cobas t 411 – core lab coagulation analyzer</td>
<td>EU</td>
<td>RPD</td>
</tr>
<tr>
<td></td>
<td>cobas 8100 V2 – Integrated pre- and post-analytical solution</td>
<td>WW</td>
<td>RPD</td>
</tr>
<tr>
<td></td>
<td>cobas® 6800/8800 – Medium to High volume automated real-time PCR</td>
<td>US</td>
<td>RPD</td>
</tr>
<tr>
<td></td>
<td>VENTANA HE 600 – automated H&amp;E staining platform</td>
<td>WW</td>
<td>RTD</td>
</tr>
<tr>
<td><strong>Diabetes Care</strong></td>
<td>Accu-Chek Active no-code – next-gen. bG meter, no coding of test strips</td>
<td>WW</td>
<td>RDC</td>
</tr>
<tr>
<td></td>
<td>Accu-Chek Connect – bG meter with connectivity to smartphones, mobile applications and cloud</td>
<td>US</td>
<td>RDC</td>
</tr>
<tr>
<td><strong>Point of Care</strong></td>
<td>CoaguChek® Pro II - professional system for PT and aPTT testing</td>
<td>EU</td>
<td>RPD</td>
</tr>
<tr>
<td><strong>Tests / Assays</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Blood Screening</strong></td>
<td>cobas® 6800/8800 MPX – Multiplex Bloodscreening test</td>
<td>US</td>
<td>RMD</td>
</tr>
<tr>
<td><strong>Infectious Diseases</strong></td>
<td>cobas® Liat Influenza A/B + RSV – POC detection</td>
<td>US</td>
<td>RMD</td>
</tr>
<tr>
<td></td>
<td>HTLV- human T-lymphotropic virus diagnostics test</td>
<td>EU</td>
<td>RPD</td>
</tr>
<tr>
<td><strong>Virology</strong></td>
<td>cobas® 6800/8800 HBV – Quantitative HBV viral load test</td>
<td>EU</td>
<td>RPD</td>
</tr>
<tr>
<td></td>
<td>cobas® 4800 HIV-1 – Quantitative HIV viral load test</td>
<td>EU</td>
<td>RPD</td>
</tr>
<tr>
<td></td>
<td>cobas® 4800 HCV – Quantitative HCV viral load test</td>
<td>EU</td>
<td>RMD</td>
</tr>
<tr>
<td></td>
<td>cobas® 4800 HBV – Quantitative HBV viral load test</td>
<td>EU</td>
<td>RMD</td>
</tr>
<tr>
<td><strong>Genomics &amp; Oncology</strong></td>
<td>cobas® EGFR Test v2 – detection of EGFR in plasma</td>
<td>EU</td>
<td>RMD</td>
</tr>
<tr>
<td><strong>Cardiac</strong></td>
<td>cobas h 232 Troponin T – Point of Care test version of Elecsys cTNT-hs</td>
<td>EU</td>
<td>RPD</td>
</tr>
</tbody>
</table>

¹ Business Areas. RPD: Roche Professional Diagnostics; RDC: Roche Diabetes Care; RMD: Roche Molecular Diagnostics; RTD: Roche Tissue Diagnostics
Finance

Alan Hippe
Chief Financial Officer
HY 2015: Highlights

**Business results**

- Strong sales growth of +6%\(^1\) and Core EPS growth +7%\(^1\) excluding filgrastim\(^2\)
- Core operating profit up +2%\(^1\), excluding filgrastim\(^2\) +7%\(^1\)
- IFRS net income 0%\(^1\), excluding filgrastim\(^2\) +7%\(^1\)

**Cash flow**

- Cash generation impacted by higher NWC, expanding manufacturing network, investments in intangible assets and sale of filgrastim rights in 2014
- Accounts receivable in Southern Europe under tight control
- Increased net debt due to outflow of dividends

---

\(^1\) At Constant Exchange Rates (CER)

\(^2\) Excluding sale of filgrastim rights in 2014 at CER
HY 2015 performance

Focus on cash
## HY 2015: Group performance

**Core EPS growth**¹ +2% or +7% excl. filgrastim²

<table>
<thead>
<tr>
<th></th>
<th>HY 2015</th>
<th>HY 2014</th>
<th>Change in %</th>
<th>Excl. filgrastim²</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sales</strong></td>
<td>23,585</td>
<td>22,974</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td><strong>Core operating profit</strong></td>
<td>9,236</td>
<td>9,410</td>
<td>-2</td>
<td>2</td>
</tr>
<tr>
<td>as % of sales</td>
<td>39.2</td>
<td>41.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Core net income</strong></td>
<td>6,320</td>
<td>6,641</td>
<td>-5</td>
<td>1</td>
</tr>
<tr>
<td>as % of sales</td>
<td>26.8</td>
<td>28.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attributable to Roche shareholders</td>
<td>6,220</td>
<td>6,533</td>
<td>-5</td>
<td>1</td>
</tr>
<tr>
<td><strong>Core EPS (CHF)</strong></td>
<td>7.22</td>
<td>7.57</td>
<td>-5</td>
<td>2</td>
</tr>
<tr>
<td><strong>IFRS net income</strong></td>
<td>5,249</td>
<td>5,641</td>
<td>-7</td>
<td>0</td>
</tr>
<tr>
<td><strong>Operating free cash flow</strong></td>
<td>6,525</td>
<td>7,869</td>
<td>-17</td>
<td>-19</td>
</tr>
<tr>
<td>as % of sales</td>
<td>27.7</td>
<td>34.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Free cash flow</strong></td>
<td>-2,928</td>
<td>-1,026</td>
<td>-185</td>
<td>-216</td>
</tr>
<tr>
<td>as % of sales</td>
<td>-12.4</td>
<td>-4.5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹ CER=Constant Exchange Rates  
² Excluding sale of filgrastim rights in 2014
### HY 2015: Group operating performance

**Core operating profit growth** 1 +7% excl. filgrastim 2

<table>
<thead>
<tr>
<th>HY 2015</th>
<th>2015 vs. 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sales</strong></td>
<td>23,585</td>
</tr>
<tr>
<td>Royalties &amp; other op. inc.</td>
<td>1,245</td>
</tr>
<tr>
<td>Cost of sales</td>
<td>-6,198</td>
</tr>
<tr>
<td>M &amp; D</td>
<td>-4,021</td>
</tr>
<tr>
<td>R &amp; D</td>
<td>-4,351</td>
</tr>
<tr>
<td>G &amp; A</td>
<td>-1,024</td>
</tr>
<tr>
<td><strong>Core operating profit</strong></td>
<td>9,236</td>
</tr>
</tbody>
</table>

**CER growth**

-6% 6%

-15% 8%

7% 4%

4% 2%

2% 2%

**-2% in CHF**

---

1 CER=Constant Exchange Rates

2 Excluding sale of filgrastim rights in 2014
HY 2015: Strong underlying core operating profit and margin

Roche Group

Pharma Division

Diagnostics Division

CHFm

2013 2014 2015

Roche Group

Pharma Division

Diagnostics Division

40.7% 41.0% 39.2%

+0.4%p² 46.9% 48.2%

-1.4%p¹ 45.7% +0.4%p²

% of sales

21.1% 19.2% 19.5%

+0.1%p¹

1 CER=Constant Exchange Rates

2 Excluding sale of filgrastim rights in 2014
HY 2015: Core net financial result

Lower debt redemption loss offsets lower equity income and higher fx losses

-658

Improvement of 5% in CHF / 8% at CER

-625

HY 2014

Net losses on debt redemption

Interest expense

Net income from equity securities

FX losses

All other, net

HY 2015

+120

+4

-69

-38

+16

1 CER=Constant Exchange Rates
HY 2015: Group core tax rate

Relative higher core profits in US

Figures in %

\[ \frac{26.6}{24.1} + 2.5 \]

Driven by relative higher core profits in US
Balance sheet 30 June 2015

Equity ratio at 28%

<table>
<thead>
<tr>
<th>CHFbn</th>
<th>31/12/14</th>
<th>30/06/15</th>
<th>% change in CER vs 31/12/14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and marketable securities</td>
<td>11.7</td>
<td>6.8</td>
<td>-36%</td>
</tr>
<tr>
<td>Other current assets</td>
<td>19.4</td>
<td>18.4</td>
<td>+3%</td>
</tr>
<tr>
<td>Non-current assets</td>
<td>44.4</td>
<td>43.7</td>
<td>+6%</td>
</tr>
<tr>
<td>Assets</td>
<td>75.5</td>
<td>68.9</td>
<td>-2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHFbn</th>
<th>31/12/14</th>
<th>30/06/15</th>
<th>% change in CER vs 31/12/14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current liabilities</td>
<td>23.1</td>
<td>21.7</td>
<td>0%</td>
</tr>
<tr>
<td>Non-current liabilities</td>
<td>30.8</td>
<td>28.0</td>
<td>-2%</td>
</tr>
<tr>
<td>Equity (Net assets)</td>
<td>21.6</td>
<td>19.2</td>
<td>-3%</td>
</tr>
<tr>
<td>Equity &amp; liabilities</td>
<td>75.5</td>
<td>68.9</td>
<td>-2%</td>
</tr>
</tbody>
</table>

Net debt/total assets: 25%

CER=Constant Exchange Rates
HY 2015 performance

Focus on cash
HY 2015: Operating free cash flow and margin

*Impacted by expanding our manufacturing network and increased NWC*

**Main impacts**

- Net working capital (NTWC/sales: 29.7% YE 2014 to 29.9% HY 2015)
- Expanding manufacturing network
- Investments in intangible assets
- Sale of filgrastim rights in 2014

---

1 CER=Constant Exchange Rates
HY 2015: Accounts receivable in Southern Europe under tight control

<table>
<thead>
<tr>
<th>Rating</th>
<th>Country</th>
<th>CHFm</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCC-</td>
<td>Greece</td>
<td>193</td>
</tr>
<tr>
<td></td>
<td></td>
<td>165</td>
</tr>
<tr>
<td></td>
<td></td>
<td>161</td>
</tr>
<tr>
<td></td>
<td></td>
<td>185</td>
</tr>
<tr>
<td></td>
<td></td>
<td>251</td>
</tr>
<tr>
<td></td>
<td></td>
<td>236</td>
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Sovereign country ratings from Standard & Poor’s, as of 6 Jul 2015;

1 At CER=Constant Exchange Rates
HY 2015: Group net debt development

Higher net debt due to dividend payment

**Free Cash Outflow CHF 2.9bn vs. CHF 1.0bn in 2014**

- **Net debt 31 Dec 2014**: CHF 14.0bn
- **Net debt 30 Jun 2015**: CHF 17.3bn

- **Operating Free Cash Flow**: CHF 6.5bn
- **Non-op. FCF**: -CHF 9.4bn
- **Business combinations, Currency translation & other**: -CHF 1.4bn
- **Other**: CHF 1.0bn
- **Dividends**: -CHF 6.9bn
- **Taxes**: -CHF 1.8bn
- **Treasury**: -CHF 0.7bn

CER=Constant Exchange Rates
Balance sheet: Net debt to total assets

Net debt / total assets

Net debt (CHFbn)

Total assets (CHFbn)
Exchange rate impact on sales growth

Negative impact from EUR, Europe, LATAM and JPY more than offsetting positive impact of USD

CER = Constant Exchange Rates (avg full year 2014)
Negative currency impact in 2015 expected

Assuming the 30 June 2015 exchange rates remain stable until end of 2015, 2015 impact is expected to be (%p):

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<thead>
<tr>
<th></th>
<th>Q1</th>
<th>HY</th>
<th>Sep YTD</th>
<th>FY</th>
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<tr>
<td>Sales</td>
<td>-2</td>
<td>-3</td>
<td>-5</td>
<td>-6</td>
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<tr>
<td>Core operating profit</td>
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<tr>
<td>Core EPS</td>
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<td>-10</td>
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Assumed average YTD 2015

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<th>CHF / USD</th>
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<tr>
<td>Average YTD 2014</td>
<td>0.95</td>
<td>0.93</td>
<td>0.95</td>
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<tr>
<td>Monthly avg fx rates 2015</td>
<td>0.95</td>
<td>0.96</td>
<td>0.93</td>
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<tr>
<td>Fx rates at 30 Jun 2015</td>
<td>0.95</td>
<td>0.92</td>
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<table>
<thead>
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<th>CHF / EUR</th>
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<tr>
<td>Average YTD 2014</td>
<td>0.95</td>
<td>0.93</td>
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<tr>
<td>Monthly avg fx rates 2015</td>
<td>0.95</td>
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<td>Fx rates at 30 Jun 2015</td>
<td>0.95</td>
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### 2015 outlook

<p>| | |</p>
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<tr>
<td><strong>Group sales growth</strong></td>
<td>Low to mid-single digit</td>
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<tr>
<td><strong>Core EPS growth</strong></td>
<td>Ahead of sales growth</td>
</tr>
<tr>
<td><strong>Dividend outlook</strong></td>
<td>Further increase dividend in Swiss francs</td>
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1 At constant exchange rates  
2 Excluding sale of filgrastim rights in 2014
## Changes to the development pipeline
### HY 2015 update

<table>
<thead>
<tr>
<th>New to Phase I</th>
<th>New to Phase II</th>
<th>New to Phase III</th>
<th>New to Registration</th>
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<tbody>
<tr>
<td><strong>2 NMEs transitioned from Ph0</strong></td>
<td><strong>1NME transitioned from Ph1</strong></td>
<td><strong>1 AI transitioned from Ph2</strong></td>
<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
</tr>
<tr>
<td>RG7944 Therapeutic vaccine - HBV</td>
<td>RG7795 TLR7 ago - HBV</td>
<td>RG7446 atezolizumab + Avastin - RCC</td>
<td>RG435 Avastin + Tarceva EGFR mut+ NSCLC</td>
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<tr>
<td>RG6069 NME - fibrosis</td>
<td><strong>1 AI</strong></td>
<td><strong>4 Als</strong></td>
<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
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<td><strong>3 Als</strong></td>
<td>RG3637 lebrikizumab - atopic dermatitis</td>
<td>RG105 MabThera - pemphigus vulgaris</td>
<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
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<tr>
<td>RG7888 OX40 MAb + atezolizumab - solid tumors</td>
<td></td>
<td>RG7446 atezolizumab - Dx+ NSCLC adj</td>
<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
</tr>
<tr>
<td>RG7446 atezolizumab + lenalidomide - multiple myeloma</td>
<td></td>
<td>RG7446 atezolizumab + abraxane - TNBC</td>
<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
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<tr>
<td>RG6078 IDO inh + atezolizumab - solid tumors</td>
<td></td>
<td>RG7446 atezolizumab - muscle invasive bladder cancer (MIBC) adj</td>
<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
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<tr>
<td><strong>1 NME added by Chugai</strong></td>
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<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
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<tr>
<td>CHU PTH1 receptor agonist - hypoparathyroidism</td>
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<td><strong>1 AI transitioned from Ph2 following EU submission</strong></td>
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<table>
<thead>
<tr>
<th>Removed from Phase I</th>
<th>Removed from Phase II</th>
<th>Removed from Phase III</th>
<th>Removed from Registration</th>
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<tbody>
<tr>
<td><strong>3 NMEs</strong></td>
<td><strong>2 NMEs</strong></td>
<td><strong>1 AI (filing no go decision)</strong></td>
<td><strong>1 AI (filing no go decision)</strong></td>
</tr>
<tr>
<td>RG7203 PDE10 inh - schizophrenia</td>
<td>RG7697 GIP/GLP-1 dual agonist - type 2 diabetes</td>
<td>RG3502 Kadcyla +/- Perjeta</td>
<td><strong>1 AI (filing no go decision)</strong></td>
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<tr>
<td>RG7641 aldosterone synthase inh - met. diseases</td>
<td>RG7929 LptD antibiotic-antibacterial</td>
<td>HER2+ mBC 1L</td>
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<td>RG7787 MSLN PE cFP - solid tumors</td>
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<td></td>
<td><strong>1 AI (filing no go decision)</strong></td>
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<tr>
<td></td>
<td>RG6062 Esbriet - SSc-interstitial lung disease</td>
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<td><strong>1 AI (filing no go decision)</strong></td>
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Status as of July 23, 2015
## Roche Group development pipeline

### Phase I
(30 NMEs + 14 AIs)

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<tr>
<th>RG6016</th>
<th>LSD1 inh</th>
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<tbody>
<tr>
<td>RG6047</td>
<td>SERD (2)</td>
<td>ER+(HER2-neg) mBC</td>
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<tr>
<td>RG6061</td>
<td>HIF1 alpha LNA</td>
<td>solid tumors</td>
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<td>RG6078</td>
<td>IDO inh</td>
<td>solid tumors</td>
</tr>
<tr>
<td>RG6078</td>
<td>IDO inh + atezolizumab</td>
<td>solid tumors</td>
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<td>RG7116</td>
<td>lumretuzumab</td>
<td>mBC</td>
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<tr>
<td>RG7155</td>
<td>emactuzumab + atezolizumab</td>
<td>s. tumors</td>
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<tr>
<td>RG7246</td>
<td>atezolizumab</td>
<td>solid tumors</td>
</tr>
<tr>
<td>RG7446</td>
<td>atezo+Zelboraf+/−cobi</td>
<td>m. melanoma</td>
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<tr>
<td>RG7446</td>
<td>atezo+Avastin+chemo</td>
<td>solid tumors</td>
</tr>
<tr>
<td>RG7446</td>
<td>atezolizumab+cobimetinib</td>
<td>solid tumors</td>
</tr>
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<td>RG7446</td>
<td>atezolizumab+ipilimumab</td>
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<td>atezolizumab+Tarceva</td>
<td>NSCLC EGFR+</td>
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<td>atezolizumab+Gazyva</td>
<td>lymphoma</td>
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<td>atezo+lenalidomide</td>
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<td>RG7450</td>
<td>anti-Stap 1 ADC</td>
<td>prostate ca.</td>
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<td>RG7597</td>
<td>duligotuzumab+cobi</td>
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<td>RG7601</td>
<td>venetoclax</td>
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<td>RG7741</td>
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<td>RG7775</td>
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<tr>
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### Phase II
(22 NMEs + 11 AIs)

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<th>Kadcyla</th>
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<td>RG7155</td>
<td>emactuzumab</td>
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<td>RG7221</td>
<td>vanucizumab</td>
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<td>RG7421</td>
<td>cobimetinib+paclitaxel</td>
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<td>RG7440</td>
<td>ipatasertib</td>
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<td>RG7446</td>
<td>atezolizumab</td>
<td>NSCLC 2/3L</td>
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<td>atezolizumab</td>
<td>bladder cancer 1/2L</td>
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<td>RG7596</td>
<td>polatuzumab vedotin</td>
<td>hem tumors</td>
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<td>ifastuzumab vedotin</td>
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<td>venetoclax</td>
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<td>FL rel/ref</td>
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<td>taselisib</td>
<td>NSCLC sq 2L</td>
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<tr>
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<td>ER+(HER2-neg) BC neoadj</td>
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<td>ALK+ NSCLC 2L</td>
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New Molecular Entity (NME)  
Additional Indication (AI)  

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<th>CardioMetabolism</th>
<th>Neuroscience</th>
<th>Ophthalmology</th>
<th>Other</th>
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<td>CHU Chugai managed</td>
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<td>Chugai managed</td>
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Status as of July 23, 2015
### Roche Group development pipeline

#### Phase III
(8 NMEs + 32 Als)

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<th>Roche No.</th>
<th>Brand Name</th>
<th>Indication</th>
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<tr>
<td>RG435¹</td>
<td>Avastin</td>
<td>ovarian cancer 1L</td>
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<td>Avastin</td>
<td>rel. ovarian ca. Pt-sensitive</td>
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<td>Perjeta + Herceptin</td>
<td>HER2+ mBC 2L</td>
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<td>Perjeta + Herceptin</td>
<td>HER2+ BC adj</td>
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<td>RG3502</td>
<td>Kadcyla</td>
<td>HER2+ gastric cancer 2L</td>
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<tr>
<td>RG3502</td>
<td>Kadcyla</td>
<td>HER2+ BC adj</td>
</tr>
<tr>
<td>RG3502</td>
<td>Kadcyla + Perjeta</td>
<td>HER2+ BC adj</td>
</tr>
<tr>
<td>RG3502</td>
<td>Kadcyla + Perjeta</td>
<td>HER2+ BC neoadj</td>
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<td>Gazyva</td>
<td>DLBCL 1L</td>
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<td>NSCLC non-sq.</td>
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<td>atezolizumab + chemo</td>
<td>NSCLC adj</td>
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<td>RCC</td>
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<td>venetoclax + Gazyva</td>
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<td>alectinib</td>
<td>ALK+ NSCLC 1L</td>
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<table>
<thead>
<tr>
<th>Roche No.</th>
<th>Brand Name</th>
<th>Indication</th>
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<tbody>
<tr>
<td>RG105</td>
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<tr>
<td>RG1569</td>
<td>Actemra</td>
<td>giant cell arteritis</td>
</tr>
<tr>
<td>RG3637</td>
<td>lebrikizumab</td>
<td>severe asthma</td>
</tr>
<tr>
<td>RG7413</td>
<td>etrolizumab</td>
<td>ulcerative colitis</td>
</tr>
<tr>
<td>RG7413</td>
<td>etrolizumab</td>
<td>Crohn’s disease</td>
</tr>
<tr>
<td>CHU</td>
<td>Actemra</td>
<td>large-vessel vasculitis</td>
</tr>
<tr>
<td>CHU</td>
<td>IL-6R MAb</td>
<td>neuromyelitis optica</td>
</tr>
<tr>
<td>RG1450</td>
<td>gantenerumab</td>
<td>Alzheimer’s</td>
</tr>
<tr>
<td>RG1594</td>
<td>ocrelizumab</td>
<td>RMS</td>
</tr>
<tr>
<td>RG1594</td>
<td>ocrelizumab</td>
<td>PPMS</td>
</tr>
<tr>
<td>RG7417</td>
<td>lampalizumab</td>
<td>geographic atrophy</td>
</tr>
</tbody>
</table>

#### Registration
(1 NME + 3 Als)

<table>
<thead>
<tr>
<th>Roche No.</th>
<th>Brand Name</th>
<th>Indication</th>
</tr>
</thead>
<tbody>
<tr>
<td>RG105</td>
<td>MabThera SC</td>
<td>CLL</td>
</tr>
<tr>
<td>RG435¹</td>
<td>Avastin + Tarceva</td>
<td>EGFR mut + NSCLC</td>
</tr>
<tr>
<td>RG1273¹</td>
<td>Perjeta</td>
<td>HER2+ BC neoadj</td>
</tr>
<tr>
<td>RG7421</td>
<td>cobimetinib + Zelboraf</td>
<td>m. melanoma</td>
</tr>
</tbody>
</table>

1. US only: FDA submission decision pending
2. Approved in US, submitted in EU
3. EU only

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**New Molecular Entity (NME)**
**Additional Indication (AI)**

- **Oncology**
- **Immunology**
- **Infectious Diseases**
- **CardioMetabolism**
- **Neuroscience**
- **Ophthalmology**
- **Other**

**Roche Genentech managed**

CHU Chugai managed

**Roche No.** Roche Genentech managed

**RG105** MabThera is branded as Rituxan in US and Japan

**RG1569** Actemra is branded as RoActemra in EU

**RG7159** Gazyva is branded as Gazyvaro in EU

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Status as of July 23, 2015
## NME submissions and their additional indications

### Projects currently in phase 2 and 3

<table>
<thead>
<tr>
<th>Year</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018 and beyond</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ocrolizumab (RG1594)</td>
<td>PPMS</td>
<td>Olesoxime (RG6083)</td>
<td>SMA</td>
<td>Venetoclax (RG7601)</td>
</tr>
<tr>
<td>Lebrikizumab (RG3637)</td>
<td>Severe asthma</td>
<td>Atezolizumab (RG7446)</td>
<td>bladder cancer</td>
<td>Atezolizumab (RG7446)</td>
</tr>
<tr>
<td>Venetoclax (RG7601)</td>
<td>17p del CLL rel/ref</td>
<td>Alectinib (RG7853)</td>
<td>Alk+ NSCLC 2L</td>
<td>Atezolizumab (RG7446)</td>
</tr>
</tbody>
</table>

Unless stated otherwise, submissions are planned to occur in US and EU; * lead market China

Status as of July 23, 2015
Submissions of additional indications for existing products

Projects currently in phase 2 and 3

*approved in EU

Unless stated otherwise, submissions are planned to occur in US and EU.

Status as of July 23, 2015
Major granted and pending approvals 2015

Approved

**US**
- **Lucentis**
  - diabetic retinopathy
  - February 2015

**EU**
- **Avastin**
  - cervical cancer
  - April 2015
- **cobimetinib + Zelboraf**
  - m. melanoma
  - Filed December 2014
- **Perjeta***
  - HER2+ BC neoadj
  - Filed September 2014
- **Avastin + Tarceva (RG435)**
  - EGFR mut+ NSCLC
  - Filed July 2015
- **cobimetinib + Zelboraf**
  - m. melanoma
  - Filed September 2014
- **MabThera SC**
  - CLL
  - Filed November 2014

**Japan-Chugai**
- **Xeloda**
  - gastric cancer adj
  - Filed December 2014
- **Bonviva**
  - osteoporosis (oral)
  - Filed February 2015

Pending approvals

- **cobimetinib + Zelboraf**
  - m. melanoma
  - Filed December 2014

* positive CHMP opinion in Q2’15

Status as of July 23, 2015
# Cancer immunotherapy pipeline overview

## Phase I

(5 NMEs + 13 AIs)

- RG6078: IDO inh | solid tumors
- RG6078: IDO inh + atezolizumab | solid tumors
- RG7446: atezolizumab | solid tumors
- RG7446: atezolizumab + atezolizumab | solid tumors
- RG7446: atezolizumab+Zelboraf+/-cobimetinib | m. melanoma
- RG7446: atezolizumab+Avastin+chemo | solid tumors
- RG7446: atezolizumab+cobimetinib | solid tum
- RG7446: atezolizumab+Ipilimumab+IFN | solid tumors
- RG7802: CEA CD3 TCB | solid tumors
- RG7813: CEA IL2v + atezolizumab | solid tumors
- RG7876: CD40 iMAb+atezolizumab | solid tumors
- RG7888: OX40 MAb | solid tumors
- RG7888: OX40 MAb + atezolizumab | solid tumors
- *INCB: atezolizumab + IDO inh | solid tumors
- *CDX: atezolizumab + varilumab | solid tumors

*external collaborations: INCB- Incyte INCB024360, CDX-1127- Celldex CD27 MAb

## Phase II

(1 NME + 2 AIs)

- RG7155: emactuzumab | PVNS/solid tumors
- RG7446: atezolizumab | NSCLC 2/3L
- RG7446: atezolizumab | bladder cancer 1/2L

## Phase III

(1 NME + 10 AIs)

- RG7446: atezolizumab | NSCLC 2L
- RG7446: atezolizumab+chemo | NSCLC non-sq. 1L
- RG7446: atezolizumab+Avastin | NSCLC non-sq. 1L
- RG7446: atezolizumab+Ipilimumab | NSCLC sq. 1L
- RG7446: atezolizumab+Ipilimumab | NSCLC non-sq. 1L
- RG7446: atezolizumab+Ipilimumab | bladder cancer 2L
- RG7446: atezolizumab+Ipilimumab | NSCLC adj
- RG7446: atezolizumab+Abraxane | TNBC
- RG7446: atezolizumab+Avastin | RCC
- RG7446: atezolizumab | muscle inv. bladder ca adj

*New Molecular Entity (NME)*

*Additional Indication (AI)*

*Oncology*

*Roche Genentech managed*

*CHU Chugai managed*

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Status as of July 23, 2015
Roche Group development pipeline

**Combinations**

### Phase I
(4 NMEs + 11 AIs)

- **RG6078** IDO inh + atezolizumab solid tumors
- **RG7155** emactuzumab + atezolizumab s.tum
- **RG7446** atezo+Zelboraf+/-cobimetinib m. melanoma
- **RG7446** atezolizumab + cobimetinib solid tumors
- **RG7446** atezolizumab + ipi/IFN solid tumors
- **RG7446** atezo+Tarceva NSCLC EGFR+
- **RG7446** atezolizumab+Gazyva lymphoma
- **RG7446** atezo+lenalidomide multiple myeloma
- **RG7597** duligotuzumab + cobi solid tumors
- **RG7601** venetoclax+Gazyva CLL
- **RG7813** CEA IL2v + atezolizumab solid tum
- **RG7842** ERK inh + cobimetinib solid tumors
- **RG7876** CD40 iMAb+atezolizumab solid tum
- **RG7888** Anti-OX40 + atezolizumab solid tum

### Phase II
(1 NME + 2 AIs)

- **RG7421** cobimetinib+paclitaxel TNBC
- **RG7601** venetoclax+Rituxan FL rel/ref
- **RG3637** lebrikizumab +/- Ebriet IPF

### Phase III
(12 AIs)

- **RG1273** Perjeta+Herceptin HER2+ mBC 2L
- **RG1273** Perjeta+Herceptin HER2+ BC adj
- **RG1273** Perjeta+Herceptin HER2+gastric ca 1L
- **RG3502** Kadcyla + Perjeta HER2+ BC adj
- **RG3502** Kadcyla + Perjeta HER2+ BC neoadj
- **RG7446** atezo+chemo NSCLC non-sq. 1L
- **RG7446** atezo+chemo+Avastin NSCLC non-sq. 1L
- **RG7446** atezolizumab+chemo NSCLC sq. 1L
- **RG7446** atezolizumab+abraxane TNBC
- **RG7446** atezolizumab+Avastin RCC
- **RG7601** venetoclax+Rituxan CLL rel/ref
- **RG7601** venetoclax+Gazyva CLL 1L

### Registration
(1 NME + 1 AI)

- **RG4357** Avastin+Tarceva EGFR mut+ NSCLC
- **RG7421** cobimetinib + Zelboraf m. melanoma

**Status as of July 23, 2015**
Doing now what patients need next