Strategy, Rejuvenation, and Transformation

Alan Hippe | CFO Roche

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Managing COVID-19 / SARS-CoV-2: Roche’s contribution

We are passionate about innovation

Focusing on 4 key areas

Summary
Roche COVID-19 pandemic response
*Ramping up SARS-CoV2 testing*

**SARS-CoV2 PCR test**
- EUA for the cobas SARS-CoV2 PCR test, developed in a record time of 6 weeks
- Continuously increasing production capacity
- 850 high throughput systems installed globally

**SARS-CoV2 antibody test**
- Elecsys Anti-SARS-CoV2 serology test for detection of total antibodies (IgA, IgM, IgG) launched in May
- Ramp up to >100 million tests per month by June
- Global cobas e¹ installed base of >40,000

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EUA=emergency use authorization; 1 cobas e: cobas e 801, cobas e 602, cobas e 601, cobas e 411; 2 300 tests per hour is the throughput rate for cobas e 801
Roche COVID-19 pandemic response

Benefits for the individual and society

<table>
<thead>
<tr>
<th>Roche PCR test for viral RNA (or antigen test)</th>
<th>Direct detection of SARS-CoV2</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Nasopharyngeal swab, oropharyngeal swab, sputum, bronchoalveolar lavage fluid, others)</td>
<td>• Inform individuals / public on infection status to prevent transmission &amp; anticipate course of illness</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Roche Antibody test (serum, plasma)</th>
<th>Detection of Ab response against SARS-CoV-2</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Inform individuals if potentially immune, screen healthcare workers</td>
<td></td>
</tr>
<tr>
<td>• Help society return faster to normality</td>
<td></td>
</tr>
<tr>
<td>• Facilitate contact tracing and surveillance</td>
<td></td>
</tr>
</tbody>
</table>
Roche COVID-19 response

Placebo controlled Actemra trial initiated

Actemra: Ph III (COVACTA) in hospitalized patients with severe COVID-19 pneumonia

- First-in-class IL-6 receptor antagonist
- Approved in >110 countries
- Initially approved in RA and GCA
- Approved for CAR T-cell-induced cytokine release syndrome (CRS)

Preparing for increased global Actemra supply

- Ph III placebo controlled trial with BARDA started beginning of April
- IV Dose: 8 mg/kg (max 800 mg) + standard of care; if clinical signs do not improve one additional dose can be given, endpoints include clinical status, mortality, mechanical ventilation and intensive care unit variables
- Patients followed for 28 days; read-out expected in early summer

RA=rheumatoid arthritis; GCA=giant cell arteritis; BARDA=Biomedical Advanced Research and Development Authority

News: Tocilizumab improves significantly clinical outcomes of patients with moderate or severe COVID-19 pneumonia.
**Managing COVID-19 / SARS-CoV-2: Roche’s contribution**

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Summary
Roche business update in light of COVID-19
2020 outlook confirmed

Pharmaceuticals:
• New product sales overcompensate for entry of biosimilars (Q1: +7%)
• Launch of NMEs, pivotal readouts and pivotal trial starts largely on track
• Ph III Actemra readout in severe COVID-19 pneumonia expected in June

Watch-outs:
• Chronic diseases: Patients delaying appointments (Ocrevus, Lucentis)
• Potential trial delays for new patients starts (especially outside oncology)

Diagnostics:
• Portfolio shifts from routine testing to COVID-19 testing (Q1: +5%)
• Ramping up SARS-CoV-2 test manufacturing capacity (PCR and antibody)
Roche has a strong track record of innovation

*Industry leading medicines as basis for our continuous growth*

Sales excluding OTC at 2018 average exchange rates; Approved medicines shown do not represent the entire portfolio rather a selection, timeline reflects year of approval.
Q1 2020: Group sales growth for the ninth consecutive year

All growth rates at Constant Exchange Rates (CER)
New products with strong momentum

Q1 values in reported CHFm, variances in CERm; 1 Erivedge, Perjeta, Kadcyla, Gazyva, Esbriet, Cotellic, Alecensa, Tecentriq, Ocrevus, Hemlibra, Xofluza, Polivy & Rozlytrek; 2 MabThera & Herceptin in Europe and MabThera, Herceptin & Avastin in Japan; 3 Herceptin, Avastin & MabThera in US
Driving innovation in the integrated core lab

Expansion with additional solutions and entering new disciplines

* cobas pure and cobas Mass Spec have not been launched, yet
2020 outlook confirmed
*Further growing top and bottom line*

**Group sales growth**
- Low- to mid-single digit

**Core EPS growth**
- Broadly in line with sales growth

**Dividend outlook**
- Further increase dividend in Swiss francs

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1 At Constant Exchange Rates (CER); based on the current assessment of the COVID-19 impact
Managing COVID-19 / SARS-CoV-2: Roche’s contribution

We are passionate about innovation

Focusing on 4 key areas

Summary
4 Priorities to maintain leadership position

Cultural transformation

- Improve structure, processes, behaviour & competitive fitness

New medicines & technology platforms

- Improve on current standard of care & smart ways of development

Growing installed base & expanding menu

- Expansion with additional solutions and entering new disciplines

Leading personalized healthcare revolution

- Lead in digitalization & transform value chain
4 Priorities to maintain leadership position

**Cultural transformation**
- Improve structure, processes, behaviour & competitive fitness

**New medicines & technology platforms**
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**Growing installed base & expanding menu**
- Expansion with additional solutions and entering new disciplines

**Leading personalized healthcare revolution**
- Lead in digitalization & transform value chain
Our cultural transformation: Simplify processes and empower our people to enhance productivity in service of patients

Some of our guiding principles:

- From silos, functional and top down focus to small empowered teams with accountability for results
- From internal / org chart orientation to patient and external focus
- From leadership as command & control to setting a vision, architecting the system, coaching and catalysing change
4 Priorities to maintain leadership position

**Cultural transformation**
- Improve structure, processes, behaviour & competitive fitness

**New medicines & technology platforms**
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**Growing installed base & expanding menu**
- Expansion with additional solutions and entering new disciplines

**Leading personalized healthcare revolution**
- Lead in digitalization & transform value chain
New medicines: Replace and extend the business

<table>
<thead>
<tr>
<th>Replace/extend existing businesses</th>
<th>Entering new franchises</th>
<th>Sales mix (100%) (Conceptual)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MabThera/Rituxan</td>
<td><strong>Oncology:</strong> Tecentriq (mUC, HCC, melanoma)</td>
<td>2018</td>
</tr>
<tr>
<td></td>
<td><strong>MS:</strong> Ocrevus</td>
<td></td>
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<tr>
<td></td>
<td><strong>Hemophilia A:</strong> Hemlibra</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>CNS:</strong> satralizumab (NMOSD), risdiplam (SMA), Huntington’s, Autism, Alzheimer’s</td>
<td>2023</td>
</tr>
<tr>
<td>Herceptin</td>
<td><strong>Immunology:</strong> etrolizumab (UC, CD), Gazyva (lupus nephritis)</td>
<td></td>
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<tr>
<td>Avastin</td>
<td></td>
<td></td>
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<tr>
<td>Lucentis</td>
<td></td>
<td></td>
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<tr>
<td>Tamiflu</td>
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</tbody>
</table>

- **FDC**=fixed dose combination; **mUC**=metastatic urothelial carcinoma; **HCC**=hepatocellular carcinoma; **NMOSD**=neuromyelitis optica spectrum disorder; **SMA**=spinal muscular atrophy; **UC**=ulcerative colitis; **CD**=Crohn’s disease

2018 Sales Mix:
- Oncology: 47%
- MS: 21%
- Hemophilia A: 32%

2023 Sales Mix:
- Immunology: 62%
- New products launched after 2012: 24%
- Other products: 14%
- Herceptin + Rituxan + Avastin: 19%
Replacing and extending Breast Cancer franchise

Expanding beyond Her2+ disease

Incidence rates

- HER2+ ~20%
- TNBC ~15%
- HR+/HER2- ~65%

High bar set in adjuvant (Her2+)
APHINITY IDFS: ITT Population

Breast cancer market growing from USD ~17bn in 2017 to ~33bn in 2024

TNBC=Triple Negative Breast Cancer, HR+=hormone receptor positive; H+P FDC-SC=Herceptin+Perjeta fixed dose combination; Source: 1 Datamonitor (incidence rates includes the 7 major markets: US, Japan, France, Germany, Italy, Spain, UK); 2 Evaluate Pharma
Replacing and extending Hematology franchise

**Entering new segments**

**Incidence rates**

<table>
<thead>
<tr>
<th>Disease</th>
<th>Incidence Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLL</td>
<td>13%</td>
</tr>
<tr>
<td>aNHL (DLBCL)</td>
<td>14%</td>
</tr>
<tr>
<td>iNHL</td>
<td>37%</td>
</tr>
<tr>
<td>AML</td>
<td>9%</td>
</tr>
<tr>
<td>MM</td>
<td>17%</td>
</tr>
<tr>
<td>MDS</td>
<td>7%</td>
</tr>
<tr>
<td>ALL</td>
<td>3%</td>
</tr>
</tbody>
</table>

**Mosunetuzumab: Patients with prior CAR-T**

<table>
<thead>
<tr>
<th>Efficacy</th>
<th>N*</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>CR</td>
<td>4/18</td>
<td>22.2%</td>
</tr>
<tr>
<td>ORR</td>
<td>7/18</td>
<td>38.9%</td>
</tr>
</tbody>
</table>

**CD20xCD3 + Gazyva with promising activity**

16 mg and 10/16 mg cohort combined

<table>
<thead>
<tr>
<th>n (%)</th>
<th>aNHL (N=14)</th>
<th>DLBCL (N=9)</th>
<th>FL (N=4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ORR</td>
<td>10 (71.4)</td>
<td>5 (55.6)</td>
<td>3 (75.0)</td>
</tr>
<tr>
<td>CR</td>
<td>8 (57.1)</td>
<td>4 (44.4)</td>
<td>3 (75.0)</td>
</tr>
<tr>
<td>PR</td>
<td>2 (14.3)</td>
<td>1 (11.1)</td>
<td>0</td>
</tr>
</tbody>
</table>

Hematology market growing to USD~56bn in 2024

CLL=chronic lymphocytic leukemia; aNHL=aggressive non-hodgkin’s lymphoma; iNHL=indolent non-hodgkin’s lymphoma; DLBCL=diffuse large B-cell lymphoma; AML=acute myeloid leukemia; MM=multiple myeloma; MDS=myelodysplastic syndromes; ALL=acute lymphoblastic leukemia; Source: 1 Datamonitor (incidence rates includes the 7 major markets: US, Japan, France, Germany, Italy, Spain, UK); 2 Evaluate Pharma; Venclexta in collaboration with AbbVie
Establishing Tecentriq as Standard of Care in major tumour types

1. **Checkpoint Inhibitors Monotherapy**
   - Tecentriq in NSCLC: Impower110

2. **Combine with Existing Medications**
   - Tecentriq + chemo/ targeted therapies in SCLC, TNBC, ovarian, HCC, bladder, etc.

3. **Expand to novel CITs**
   - Immune doublets: Tecentriq + Bi-specifics, aTIGIT, etc.

4. **Personalized CIT, RNAseq, etc.**
   - Combos/ NMEs: defined immune profiles

Wave 2
- Tecentriq + Avastin in HCC
  - Medically meaningful improvement

Wave 3
- Tecentriq and aTIGIT in various cancer types entering Ph III in Q1 2020

Wave 4
- Expand to novel CITs

Opportunity/ Cure Rate

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NSCLC=non-small cell lung cancer; SCLC=small cell lung cancer; TNBC=triple-negative breast cancer; HCC=hepatocellular carcinoma
Immunology and Ophthalmology
Addressing high unmet medical need

**Immunology: high unmet need**

Unmet need

<table>
<thead>
<tr>
<th>% Efficacy</th>
<th>Lupus</th>
<th>UC</th>
<th>CD</th>
<th>IPF</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>40</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>60</td>
<td></td>
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</tr>
<tr>
<td>80</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>100</td>
<td></td>
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</tbody>
</table>

**Ophthalmology (nAMD):**
Decreasing treatment frequency in real world

- N=49,485
- <25% received 10+ injections

**Etrolizumab development program:**

8 clinical studies – 6 Ph III trials; 2 open-label extension studies; TNF-naïve and TNF-IR

**Develop industry leading portfolio**

UC=ulcerative colitis, CD=crhon’s disease; nAMD=neovascular age-related macular degeneration; Immunology sources: DRG, Evaluate Pharma 2017, Disease modifying treatment, based on UpToDate, Dupixent exacerbations; IPF – Esbriet FVC; RA – TNF ACR50, McKinsey analysis based on data from Evaluate; Ophthalmology source: Courtesy of T. Brogan/Vestrum Health, presented by Dr. D. Williams at ASRS 2018
Risdiplam in spinal muscular atrophy (SMA)
Compelling benefit/risk profile in infants, children, teenagers, and adults

Over 450 patients treated with risdiplam to date

- Durably increases SMN protein throughout the CNS and in peripheral tissues
- Positive efficacy in Type 1 infants (n=62 total)
- Positive efficacy in large (n=180) placebo-controlled study in a broad spectrum of Type 2/3 patients
- Consistent safety profile across trials
- No treatment-related safety findings have led to withdrawal in any study

Potential to be the treatment of choice for a majority of patients living with SMA

Risdiplam program is a collaboration with PTC Therapeutics and the SMA Foundation
Pushing towards new frontiers in Neuroscience
Creating new opportunities across modalities

<table>
<thead>
<tr>
<th>Neuroimmunology disorders</th>
<th>Neuromuscular disorders</th>
<th>Neurodegenerative disorders</th>
<th>Neurodevelopmental disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Ocrevus</strong></td>
<td><strong>Risdiplam</strong></td>
<td><strong>HTT-ASO</strong></td>
<td><strong>Balovaptan</strong></td>
</tr>
<tr>
<td><em>First B-cell targeted therapy in MS</em></td>
<td><em>First oral therapy for spinal muscular atrophy</em></td>
<td><em>First disease modifying therapy for Huntington’s disease</em></td>
<td><em>First treatment for core social and communication deficits</em></td>
</tr>
<tr>
<td><strong>Satralizumab</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>BTD in NMOSD</em></td>
<td></td>
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</tr>
</tbody>
</table>

**NMOSD** = neuromyelitis optica spectrum disorder
4 Priorities to maintain leadership position

**Cultural transformation**
- Improve structure, processes, behaviour & competitive fitness

**New medicines & technology platforms**
- Improve on current standard of care & smart ways of development

**Growing installed base & expanding menu**
- Expansion with additional solutions and entering new disciplines

**Leading personalized healthcare revolution**
- Lead in digitalization & transform value chain
Growing installed base worldwide driving reagents consumption

Growth rates being from the period of January 1, 2019 to December 31, 2019

- Integrated Core Lab: cobas 6000/8000 +11%, cobas 6800/8800 +36%
- Middleware: +21%
- Preanalytics: cobas 4000 +9%
- Connectivity: +17%
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Building the PHC ecosystem
Using data & insights to improve patient outcomes

Access to comprehensive genomic profiling (CGP)
- early, personalized diagnosis

Molecular tumor board (MTB) / clinical decision support (CDS)
- personalized care plan

Access to molecularly guided treatment options
- rapid therapy access and innovative access models

Capturing clinical outcomes
- Leveraging RWD for regulatory filings, publications, policy change, innovative access models

More patients on optimal therapy & creation of ‘learning healthcare system’

PHC=personalized healthcare; RWD=real world data
Managing COVID-19 / SARS-CoV-2: Roche’s contribution

We are passionate about innovation

Focusing on 4 key areas

Summary
**Strong short term news flow**

*Diversifying late stage pipeline & setting new standards of care*

<table>
<thead>
<tr>
<th>Product</th>
<th>Timing</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>risdiplam in SMA</td>
<td>Filed for type 1/2/3</td>
<td>~18k (rare disease) ✔</td>
</tr>
<tr>
<td>satralizumab in NMOSD</td>
<td>Filed</td>
<td>~21k (rare disease) ✔</td>
</tr>
<tr>
<td>HTT-ASO in Huntington’s</td>
<td>Ph II &amp; III ongoing; Trial fully recruited</td>
<td>~83k (rare disease) ✔</td>
</tr>
<tr>
<td>Gazyva in lupus nephritis</td>
<td>initiating Ph III</td>
<td>~190k</td>
</tr>
<tr>
<td>etrolizumab in UC and Crohn’s Disease</td>
<td>filing in UC in 2020</td>
<td>UC ~700k; CD ~640k (moderate to severe)</td>
</tr>
<tr>
<td>PDS in nAMD</td>
<td>fully recruited; filing in 2020</td>
<td>nAMD ~4,090k; DME ~4,400k</td>
</tr>
<tr>
<td>faricimab in DME/nAMD</td>
<td>recruitment ahead of plan; filing in 2021/22</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Product</th>
<th>Filing date</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tecentriq in 1L HCC</td>
<td>2019</td>
<td>~300k 1 ✔</td>
</tr>
<tr>
<td>Tecentriq in neoadj TNBC</td>
<td>2020</td>
<td>~19k</td>
</tr>
<tr>
<td>Tecentriq in adj bladder cancer</td>
<td>2020</td>
<td>~50k</td>
</tr>
<tr>
<td>Tecentriq in 1L melanoma</td>
<td>2020</td>
<td>~11k (Dx+) ✔</td>
</tr>
<tr>
<td>Tecentriq in FL ovarian cancer</td>
<td>2020</td>
<td>~41k</td>
</tr>
<tr>
<td>idasanutlin in R/R AML</td>
<td>2020</td>
<td>~22k</td>
</tr>
<tr>
<td>Perjeta + Herceptin FDC-SC</td>
<td>2020</td>
<td>~75k</td>
</tr>
<tr>
<td>ipatasertib 1/2L TNBC</td>
<td>2020</td>
<td>~11k (Dx+) ✔</td>
</tr>
<tr>
<td>ipatasertib 1L+ HR+ (chemo treated only)</td>
<td>2020</td>
<td>~83k (Dx+) 15k (Dx+/chemo only)</td>
</tr>
<tr>
<td>ipatasertib in 1L mCRPC</td>
<td>2020</td>
<td>~200k (AC) 100k (Dx+)</td>
</tr>
<tr>
<td>Polivy in 1L DLBCL</td>
<td>2020/21</td>
<td>~52k</td>
</tr>
<tr>
<td>Tecentriq in (neo)adj NSCLC</td>
<td>2021/22</td>
<td>~75k</td>
</tr>
</tbody>
</table>

Source: Roche/Genentech, incidence/prevalence in the major markets (US, FR, DE, IT, ES, GB); 1 including China; SOC=standard of care; SMA=spinal muscular atrophy; NMOSD=neuromyelitis optica spectrum disorder; UC=ulcerative colitis; CD=Crohn’s disease; nAMD=neovascular age-related macular degeneration; DME=diabetic macular edema; HCC=hepatocellular carcinoma; TNBC=triple-negative breast cancer; FL=front line; R/R AML=relapsed/refractory acute myeloid leukemia; FDC=fixed dose combination; HR=hormone receptor; mCRPC=metastatic castration resistant prostate cancer; DLBCL=diffuse large B-cell lymphoma; NSCLC=non-small cell lung cancer; AC=all comers

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**Oncology**

**Neuroscience**

**Ophthalmology**

**Immunology**

✔ Filing completed or positive pivotal data
Positive outlook confirmed

Pharma NME and Dia launches
Ocrevus, Perjeta, Hemlibra, Tecentriq, Venclexta, Gazyva, Alecensa, Xofluza, Polivy, Rozlytrek, idasanutlin, ipatasertib, risdiplam, satralizumab, PDS, faricimab cobas 6800/8800, cobas 5800, cobas Mass Spec, cobas Liat, etc.
Doing now what patients need next