



Novartis growth story

Vas Narasimhan, CEO
J.P. Morgan Healthcare Conference
January 14, 2025

 **NOVARTIS** | Reimagining Medicine

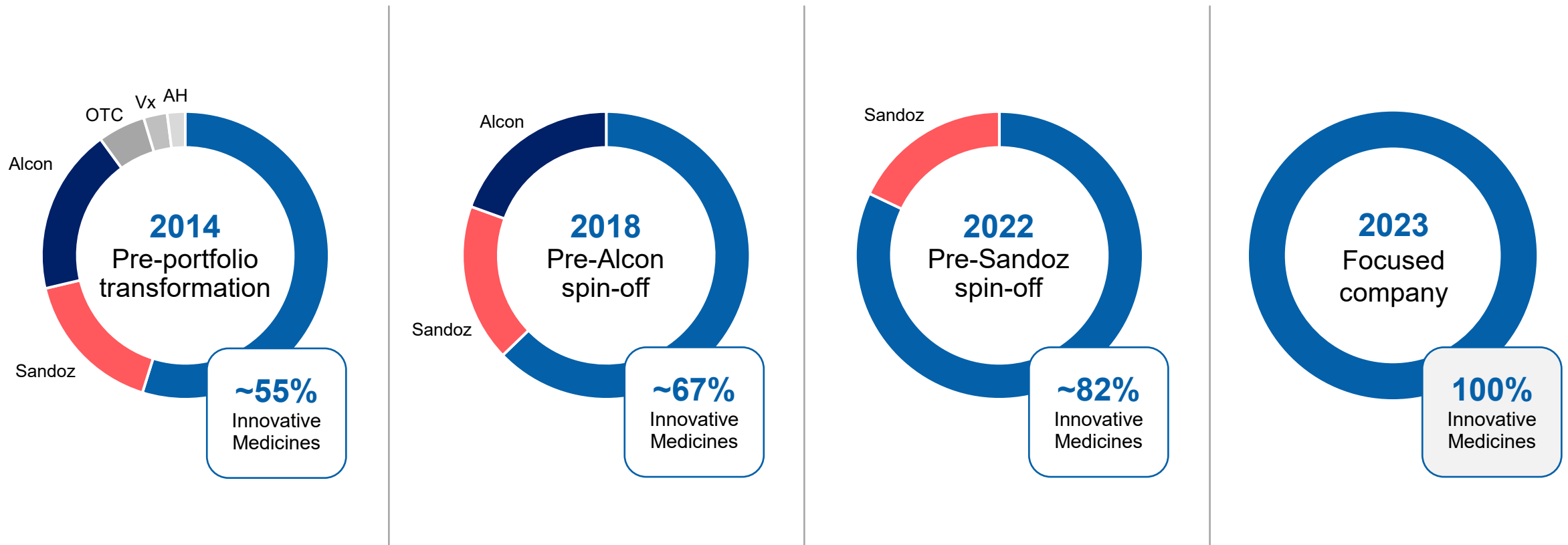
Disclaimer

This presentation contains forward-looking statements within the meaning of the United States Private Securities Litigation Reform Act of 1995, that can generally be identified by words such as “potential,” “expected,” “will,” “planned,” “pipeline,” “outlook,” “confident,” or similar expressions, or by express or implied discussions regarding potential new products, potential new indications for existing products, potential product launches, or regarding potential future revenues from any such products; or regarding results of ongoing clinical trials; or regarding potential future, pending or announced transactions; regarding potential future sales or earnings; or by discussions of strategy, plans, expectations or intentions, including discussions regarding our continued investment into new R&D capabilities and manufacturing; or regarding our capital structure; or regarding the consequences of the spin-off of Sandoz and our transformation into a “pure-play” innovative medicines company. Such forward-looking statements are based on the current beliefs and expectations of management regarding future events and are subject to significant known and unknown risks and uncertainties. Should one or more of these risks or uncertainties materialize, or should underlying assumptions prove incorrect, actual results may vary materially from those set forth in the forward-looking statements. You should not place undue reliance on these statements. There can be no guarantee that the investigational or approved products described in this presentation will be submitted or approved for sale or for any additional indications or labeling in any market, or at any particular time. Nor can there be any guarantee that such products will be commercially successful in the future. Neither can there be any guarantee expected benefits or synergies from the transactions described in this presentation will be achieved in the expected timeframe, or at all. In particular, our expectations could be affected by, among other things: uncertainties regarding the success of key products, commercial priorities and strategy; uncertainties in the research and development of new products, including clinical trial results and additional analysis of existing clinical data; uncertainties regarding the use of new and disruptive technologies, including artificial intelligence; global trends toward healthcare cost containment, including ongoing government, payer and general public pricing and reimbursement pressures and requirements for increased pricing transparency; uncertainties regarding our ability to realize the strategic benefits, operational efficiencies or opportunities expected from our external business opportunities; our ability to realize the intended benefits of our separation of Sandoz into a new publicly traded standalone company; our ability to obtain or maintain proprietary intellectual property protection, including the ultimate extent of the impact on Novartis of the loss of patent protection and exclusivity on key products; uncertainties in the development or adoption of potentially transformational digital technologies and business models; uncertainties surrounding the implementation of our new IT projects and systems; uncertainties regarding potential significant breaches of information security or disruptions of our information technology systems; uncertainties regarding actual or potential legal proceedings, including regulatory actions or delays or government regulation related to the products and pipeline products described in this presentation; safety, quality, data integrity, or manufacturing issues; our performance on and ability to comply with environmental, social and governance measures and requirements; major political, macroeconomic and business developments, including impact of the war in certain parts of the world; uncertainties regarding future global exchange rates; uncertainties regarding future demand for our products; and other risks and factors referred to in Novartis AG’s most recently filed Form 20-F and in subsequent reports filed with, or furnished to, the US Securities and Exchange Commission. Novartis is providing the information in this presentation as of this date and does not undertake any obligation to update any forward-looking statements as a result of new information, future events or otherwise.

All trademarks in this presentation are the property of their respective owners.

This presentation includes non-IFRS financial measures, including constant currencies (cc), core results and free cash flow. An explanation of non-IFRS measures can be found on page 46 of the 3Q24 Interim Financial Report.

We have transformed into a pure-play innovative medicines company...

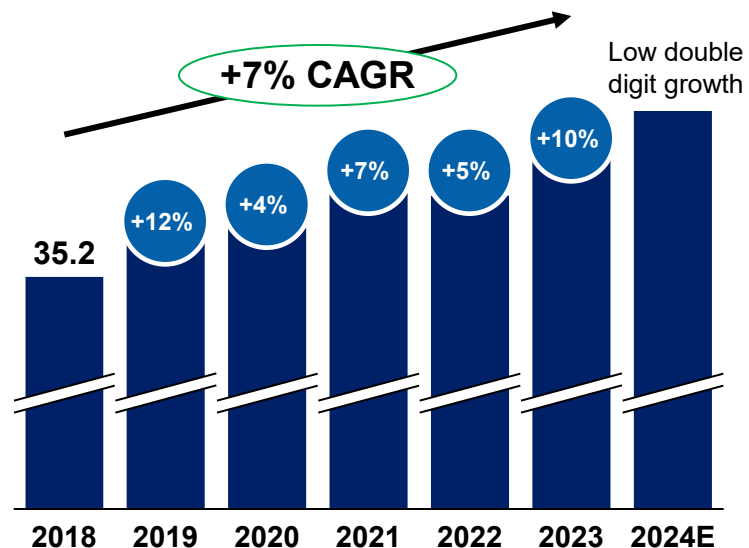


... while delivering strong operational performance

Continuing operations¹ performance, *numbers restated post-Sandoz spin-off*

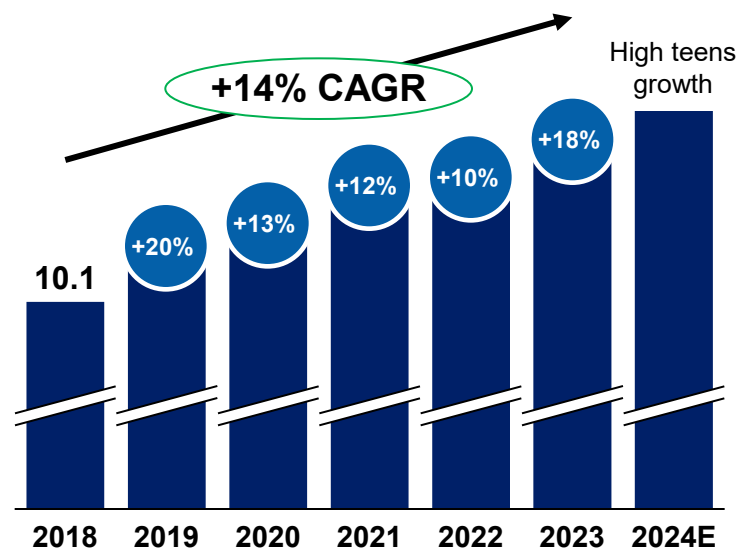
Net sales

USDbn, % cc



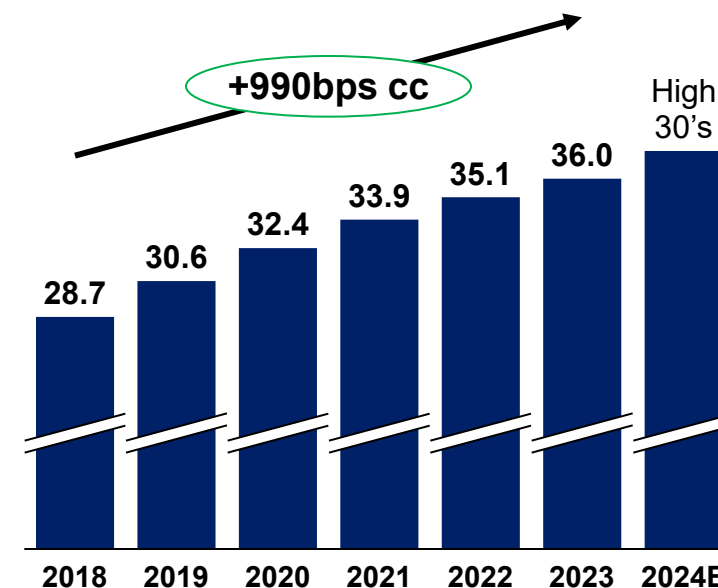
Core OpInc²

USDbn, % cc



Core margin²

%

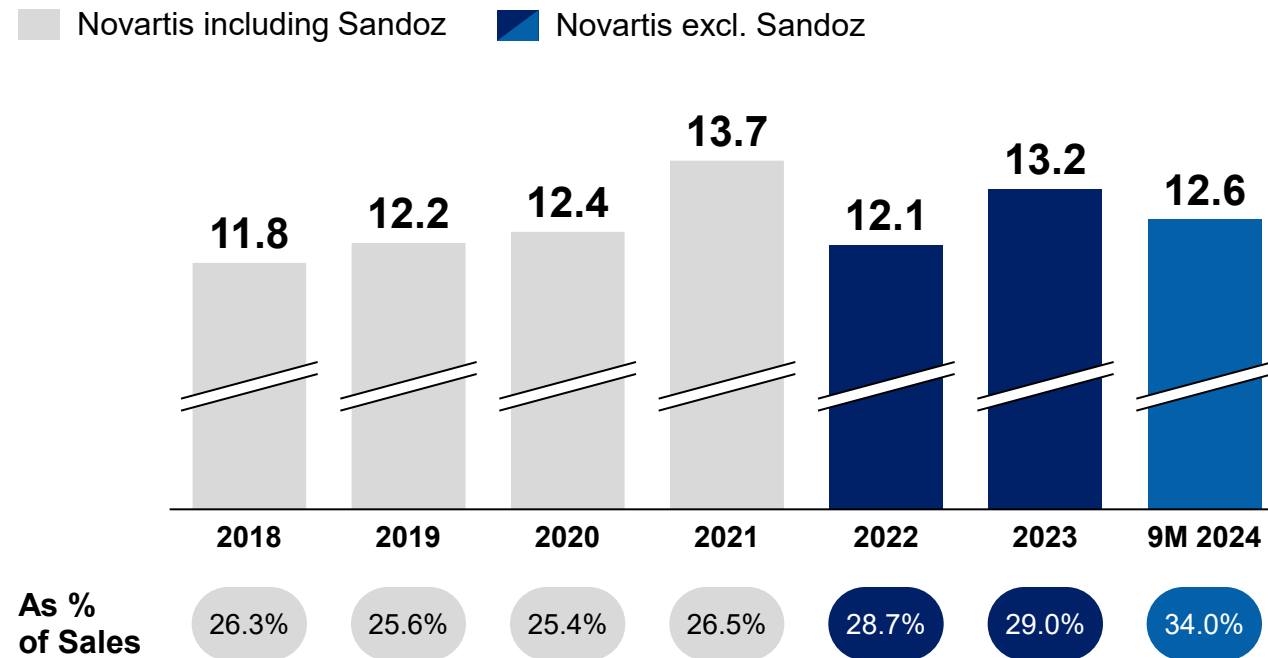


1. As defined on page 35 of the 3Q24 Interim Financial Report, Continuing operations include the retained business activities of Novartis, comprising the Innovative Medicines Division and the continuing Corporate activities. 2. Core results and constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. Unless otherwise noted, all growth rates refer to same period in PY.

Our sales growth, margin expansion and balance sheet discipline have led to robust free cash flow and improved ROIC

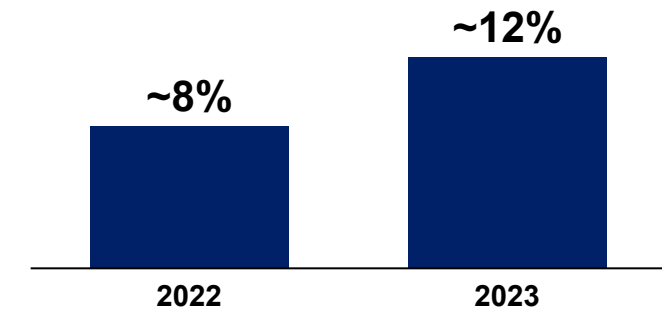
Free Cash Flow¹

USDbn



Returned on Invested Capital²

Novartis excl. Sandoz



1. 2018 to 2022 figures reflecting revised free cash flow definition. Free cash flow is a non-IFRS measure. An explanation of non-IFRS measures can be found on page 46 of the 3Q24 Interim Financial Report. 2. ROIC calculated as per Bloomberg definition using reported (non-core) financials, adjusted to reflect Novartis post Sandoz spin-off.

We remain committed to executing our focused strategy...

Deliver high-value medicines that alleviate society's greatest disease burdens through technology leadership in R&D and novel access approaches

Focus

4 core therapeutic areas

Cardiovascular-Renal-Metabolic,
Immunology, Neuroscience, Oncology

2 + 3 technology platforms

Chemistry, Biotherapeutics
xRNA, Radioligand, Gene & Cell Therapy

4 priority geographies

US, China, Germany, Japan

Priorities

Accelerate growth and deliver returns



Deliver **high-value medicines** (including launch excellence)

Strengthen foundations



Unleash the power of **our people**

Scale **data science and technology**

Build trust with **society**

Execution

Delivering through operational excellence



Driving efficiencies and agile resource allocation

Improving R&D productivity

... and continuing our shareholder-friendly capital allocation approach

Investing in the business

Investments in organic business
Ongoing investment in R&D and CapEx

Value-creating bolt-ons
Multiple early-stage deals to strengthen our pipeline, including in RLT, renal and AI capabilities

**Substantial
cash
generation**

Returning capital to shareholders

Consistently growing annual dividend¹
USD 7.6bn dividend paid in 2024
not rebased post Sandoz

Share buybacks
Up-to USD 15bn share buyback continuing,
with up to USD 5.4bn² still to be executed

1. In CHF. 2. As of Dec 31, 2024.

We have deep expertise and capabilities in our core therapeutic areas and technology platforms, with a balanced global footprint

In-market and pipeline depth in 4 core therapeutic areas

13

in-market blockbusters¹

8

in-market brands with USD 3bn+ peak potential

13%

limited binary risk on a single product¹

6+

ongoing launches

15+

Submission-enabling readouts in next 2 years

30+

Potential high-value pipeline assets

Strong capabilities across technology platforms



Chemistry



Biotherapeutics



xRNA



RLT



Cell & Gene

Geographically diversified; fast growth in priority markets²

+15%

USA



+25%

China



+6%

Germany



+6%

Japan



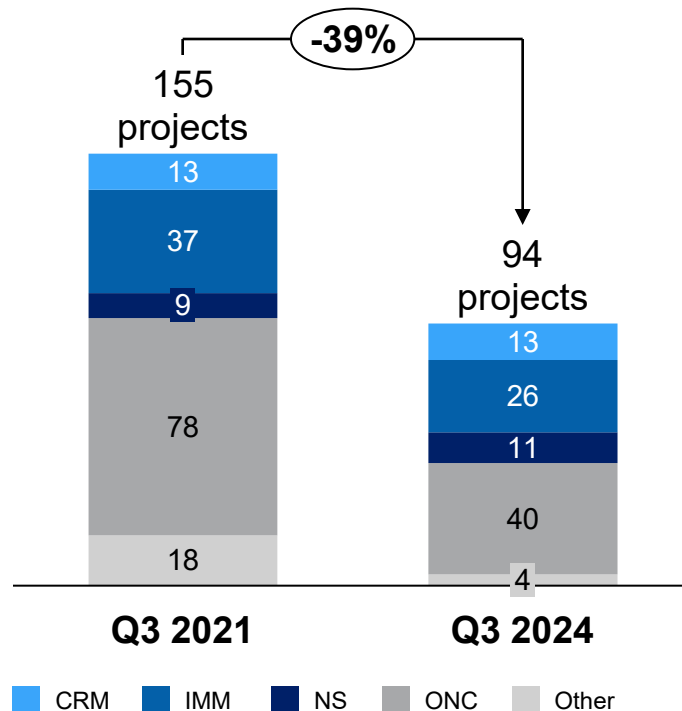
~60%¹

Ex-US business

1. Based on 2023 sales actuals. 2. 9M 2024 sales growth vs. PY in constant currencies. Constant currencies is a non-IFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report.

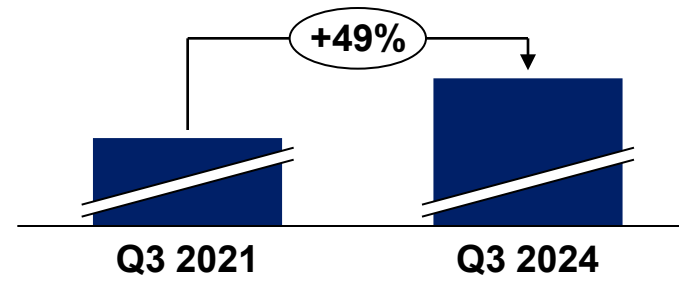
Over the last few years, we have streamlined our pipeline and focused our R&D spend...

Streamlined portfolio and increased TA focus¹

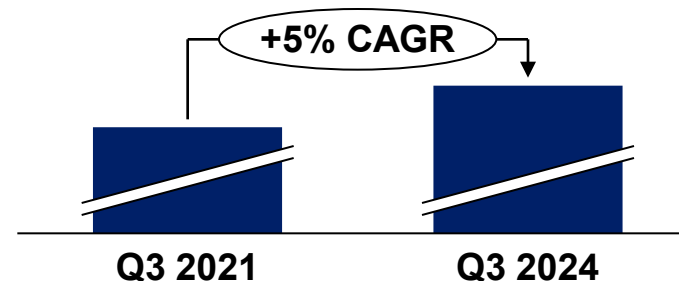


With increased resources and capabilities

Research resources per project²



Development spend³



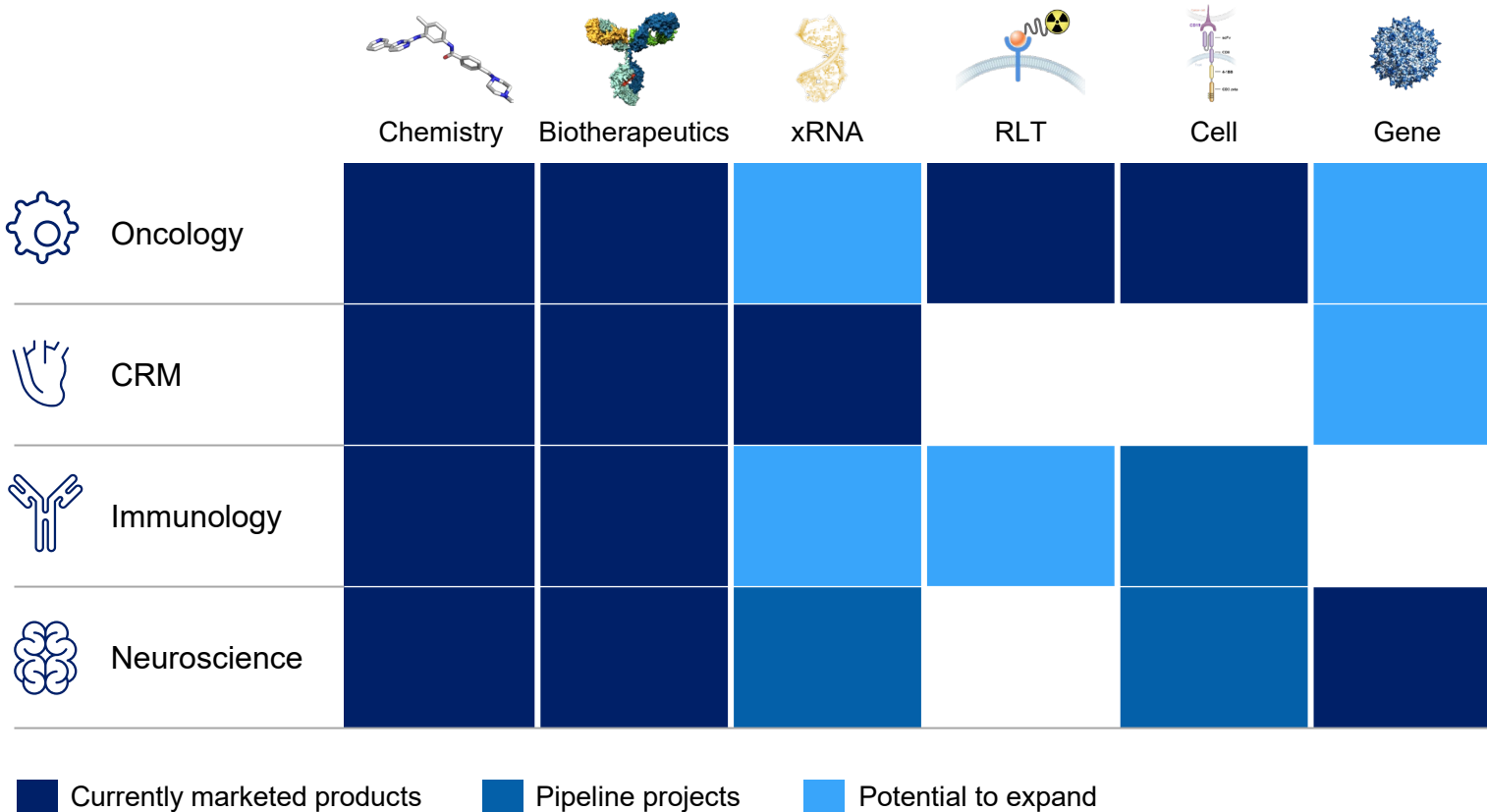
Driving focus and enhanced competencies

- ⊕ **Enhancing our technical R&D capabilities** (incl. biotherapeutics, RLT, and siRNA), with **USD 400m+** in investments through 2028
- ⊕ **Significant investments in data science, technology and AI** to increase probability of success and accelerate timelines
- ⊕ **Optimized global footprint for clinical trials** to accelerate recruitment times

1. PhI to approval, excl. Global Health. 2. Monthly average Biomedical Research FTEs per project. 3. Core Development spend, growth in constant currencies, comparing Q1-Q3 2021 vs. Q1-Q3 2024. Core results and constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report.

... and we continue to leverage our technology platforms across our core therapeutic areas

Current applications across our core TAs



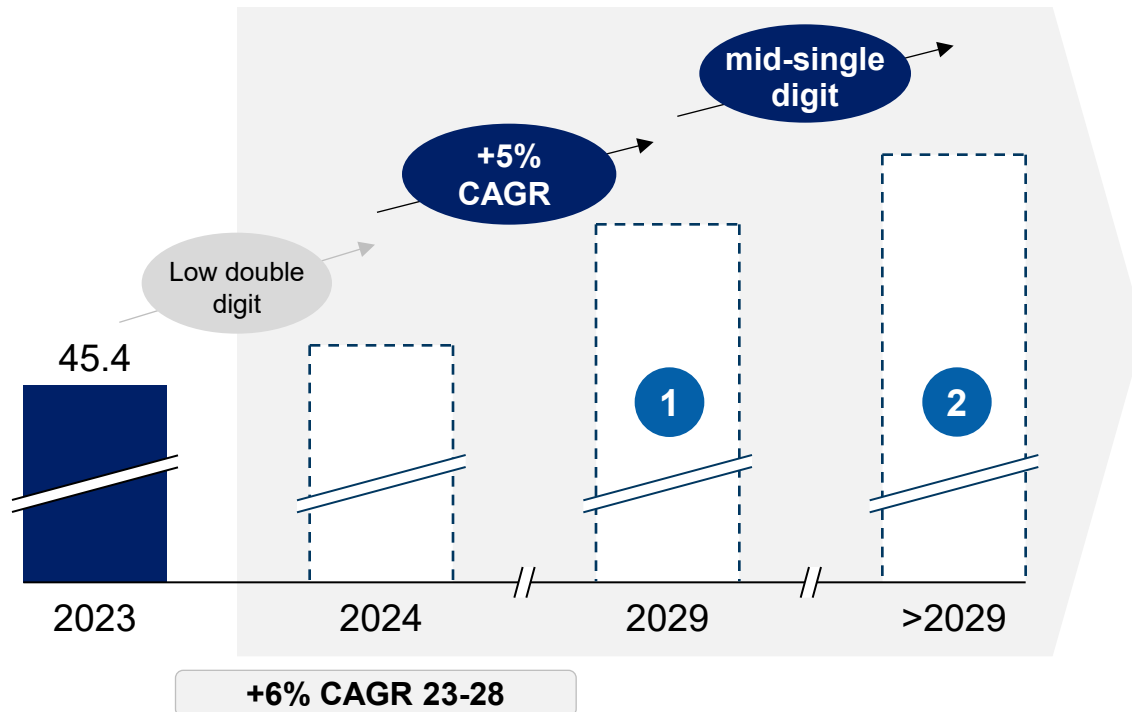
Our approach

- Broad applicability
- Sustained competitive advantage
- Scalability to build pipeline
- Advancement of disease area strategy
- Integration of diverse expertise

We expect to drive consistent growth in the near-, mid- and long-term, with 2023-2028 sales CAGR +6% and 2024-2029 sales CAGR +5%

Net sales

Illustrative, USD billion, % CAGR cc¹



1 2024-2029 +5% CAGR

2 >2029 mid-single digit

De-risked in-market brands

- KISQALI®
- Kesimpta®
- SCEMBLIX®
- PLUVICTO®
- LEQVIO®
- FABHALTA®

- KISQALI®
- Kesimpta®
- SCEMBLIX®
- PLUVICTO®
- LEQVIO®
- FABHALTA®

Select pipeline assets

- remibrutinib
- atrasentan
- pelacarsen
- ianalumab
- OAV101 IT

- remibrutinib
- atrasentan
- pelacarsen
- ianalumab
- zigakibart
- YTB323
- RLT portfolio
- xRNA portfolio

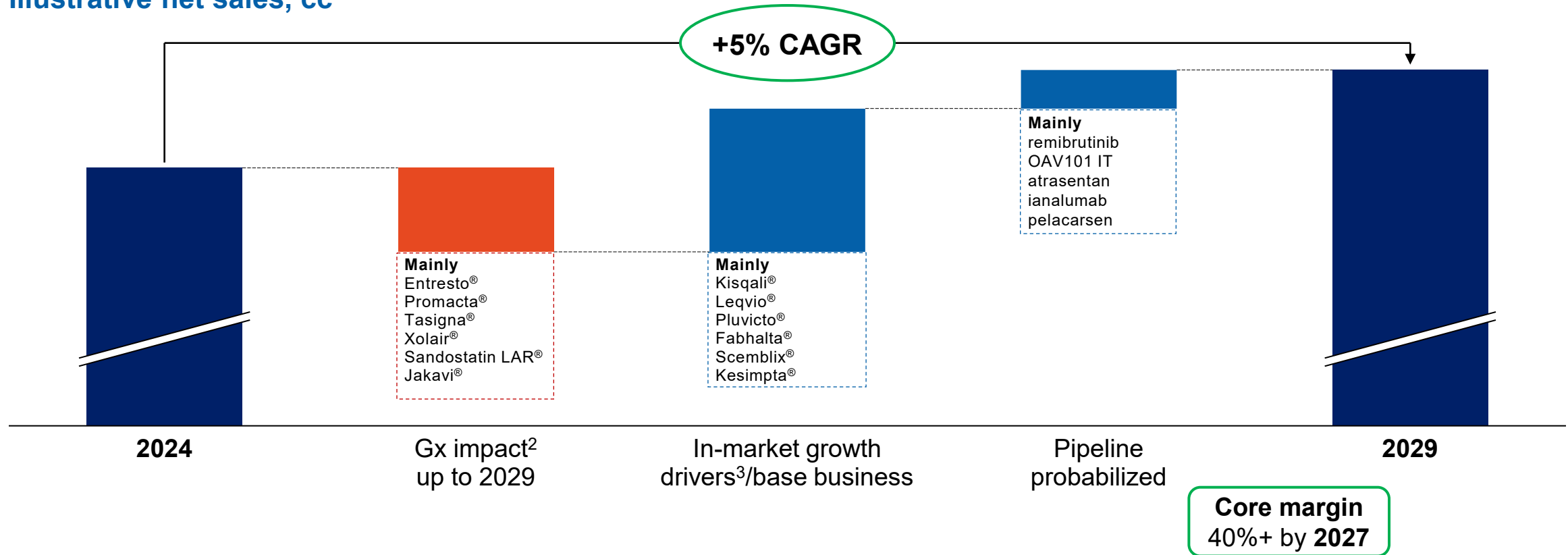
All figures reflecting Continuing Operations. 1. Constant currencies is a non-IFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report.

1

Novartis growth story through 2029

We expect net sales to grow +5% cc CAGR 2024-2029, and core operating income margin¹ to reach 40%+ by 2027

Illustrative net sales, cc¹



All figures reflecting Continuing Operations. 1. Core results and constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. 2. For forecasting purposes, we assume Entresto US LoE in 2025. Timing of Entresto US generic entry is subject to ongoing patent and regulatory litigation. 3. Including indication expansion.

We continue to deliver strong commercial execution across our portfolio, both in the US and International

US select launches (NBRx shares)

 **~50%** leader in metastatic breast cancer¹

~52% leader in early breast cancer²

 **~60%** leader in hidradenitis suppurativa³

 **~35%** leader in post-taxane mCRPC, all lines⁴

 **~50%** leader in 3L+ CML⁵

~24% in all lines, trending upwards post early-lines launch⁶

International ranking

9M 2024

#4 | **China⁷** 

#1 | **Germany** 

#4 | **Japan⁷** 

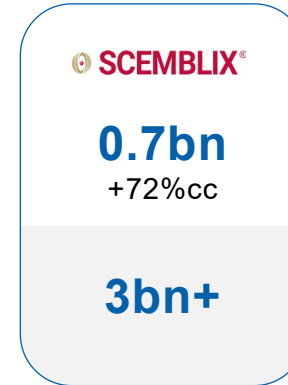
1. Of CDK4/6 mBC market, US rolling 3 months ending November 2024, IQVIA Breast Cancer Market Sizing report. 2. Of CDK4/6 eBC market, US November 2024, IQVIA Breast Cancer Market Sizing report. 3. US R4W ending December 13th, IQVIA report (data adjusted to account for adalimumab molecule overstatement in IQVIA data). 4. Claims Data Stack, US rolling 3 months ending September 2024. Data adjusted for United cyber attack impact. 5. US rolling 3 months ending October 2024, IQVIA CML market sizing report. 6. US rolling 3 months ending November 2024, IQVIA CML market sizing report. 7. Rank among pharmaceutical multinational companies.

We have eight in-market brands with USD 3bn to 8bn+ potential, including multiple recent and upcoming indication expansions...

With expected US exclusivity in 2030's or beyond

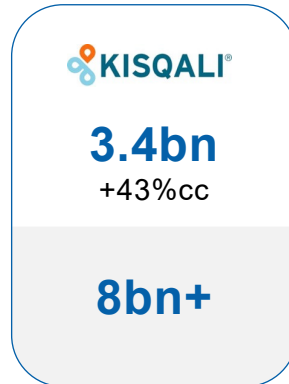
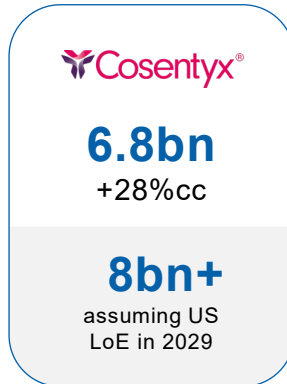
Q3'24 sales annualized
Q3 growth

Peak sales (approx.)
Existing & expected future indications¹



Q3'24 sales annualized
Q3 growth

Peak sales (approx.)
Existing & expected future indications¹



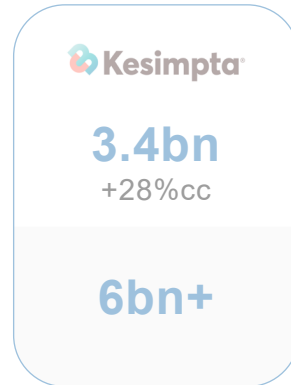
Constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. 1. Existing marketed indications and expected future indications currently in development and/or registration. 2. Timing of Entresto US generic entry is subject to ongoing patent and regulatory litigation.

... with four potential multi-bn dollar assets expected to launch near-term

With expected US exclusivity in 2030's or beyond

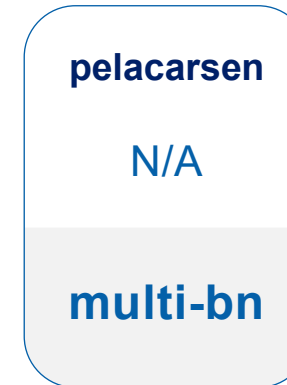
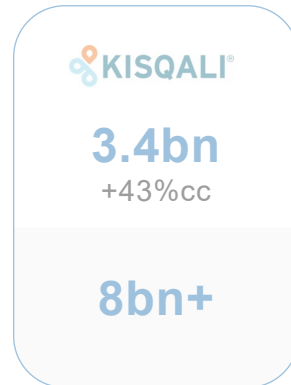
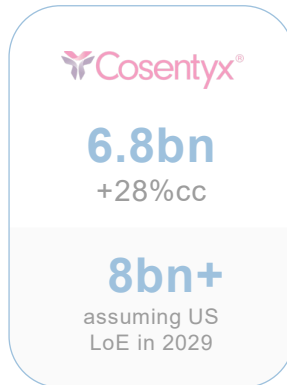
Q3'24 sales annualized
Q3 growth

Peak sales (approx.)
Existing & expected future indications¹



Q3'24 sales annualized
Q3 growth

Peak sales (approx.)
Existing & expected future indications¹



Constant currencies are non-IFRS measures. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. 1. Existing marketed indications and expected future indications currently in development and/or registration. 2. Timing of Entresto US generic entry is subject to ongoing patent and regulatory litigation.

We expect 15+ submission-enabling readouts in the next two years

Key assets with submission-enabling readouts through 2026 (expected)

● Post readout

OAV101 IT

✓ SMA positive readout in Dec 2024

● SMA submission in 2025

IgAN portfolio

● Atrasentan IgAN approval in 2025

Zigakibart IgAN readout in 2026

Fabhalta[®]

● C3G approval in 2025

IC-MPGN readout in 2026

aHUS readout in 2026

Remibrutinib

● CSU submission in 2025

CINDU readout in 2026

MS readout in 2026

Ianalumab

SjS readouts in 2025

2L ITP readout in 2025

1L ITP and wAIHA readouts in 2026

Pelacarsen

CVRR-Lp(a) readout in 2025¹

Cosentyx[®]

GCA readout in 2025

PMR readout in 2025

Pluvicto[®]

● mCRPC pre-taxane approval in 2025

mHSPC readout in 2025¹

Leqvio[®]

CVRR-LDLC readout in 2026²

1. Event-driven trial readout. 2. ORION-4 expected readout in 2026 and VICTORION-2-PREVENT in 2027.

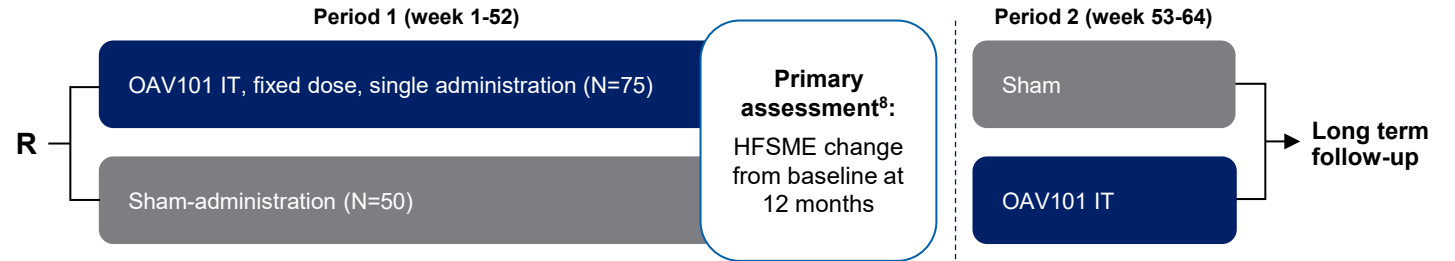
Phase III STEER study of OAV101 IT met primary endpoint in children and young adults with spinal muscular atrophy

First investigational gene therapy to provide clinical benefit in treatment-naïve patients with SMA aged two and above⁶

Primary endpoint met

- **Increase from baseline in HFMSE**, a gold standard for SMA-specific assessment of motor ability and disease progression¹⁻⁵, vs. sham controls
- **Favorable safety profile** with adverse events similar between arms⁷
- Data will be presented at an **upcoming medical congress**

Study design



Broad patient population: Treatment-naïve patients with SMA Type 2, ≥ 2 to < 18 years of age, treatment naïve, sitting, and never ambulatory

> Global regulatory submissions expected in 2025

1. Oskoui M, et al. SUNFISH Parts 1 and 2: 4-year efficacy and safety data of risdiplam ▼ in types 2 and 3 Spinal Muscular Atrophy (SMA). Available at: <https://medically.roche.com/global/en/neuroscience/wcn-2023/medical-material/WCN-2023-presentation-oskoui-sunfish-parts-1-and-2-4-year-efficacy-pdf.html>. 2. Fainmesser Y, et al. Longer-term follow-up of nusinersen efficacy and safety in adult patients with spinal muscular atrophy types 2 and 3. *Neuromuscular Disorders*. 2022;32(6): 451-459. 3. Weber C, et al. *Brain and Development*. 2024;46(5):89-198. 4. Coratti G, et al. *Eur J Neurol*. 2024;31:e16309. 5. Revised Hammersmith Scale for spinal muscular atrophy: A SMA specific clinical outcome assessment tool - PMC. 6. O'Hagen JM, et al. *Neuromuscular disorders: NMD*. 2007;17(9-10):693-7. Epub 2007/07/31. 7. The most common adverse events were upper respiratory tract infection, pyrexia and vomiting. 8. Secondary objectives included evaluating safety and efficacy of OAV101 IT using the Revised Upper Limb Module (RULM) scale.



2

Novartis growth story beyond 2029

We have 30+ potential high-value NME assets in our pipeline

Select assets

NME's currently in Phase III & II	atrasentan IgAN	ianalumab Sjögren's, LN, SLE, 1L ITP, 2L ITP, wAIHA, HS, SSc	YTB323 srSLE/LN, HRLBCL, Adult ALL, RMS, PPMS, IIM, SSc, gMG, AAV	Osteoarthritis portfolio	Actinium PSMA portfolio
	pelacarsen CVRR-Lp(a)	zigakibart IgAN	TIN816 Acute kidney injury	AAA614 Solid tumors	PTC518¹ Huntington's disease
	remibrutinib CSU, MS, CINDU, HS, FA	Lu-NeoB Multiple solid tumors, GBM, BC	LTP001 Pulmonary arterial hypertension	VHB937 ALS, Alzheimer's Disease	

NME's currently in / entering Phase I	PIT565 B-cell malignancies, SLE	YMI024 Inflammation-driven diseases	QCZ484 rHTN	GIA632 Multiple immunology indications	FML539 Undisclosed
	NIO752 Alzheimer's, progressive supranuclear palsy	LB2102² Solid tumors	FXX489 Solid tumors	GHZ339 Atopic dermatitis	Arrhythmia portfolio
	GIZ943 Solid tumors	MRT-6160³ Immune-mediated conditions	JSB462 Prostate cancer	ESP359 Undisclosed	Schizophrenia portfolio

Assets are shown in the phase of the most advanced indication (listed first). High-value potential based on unprobabilized estimated peak sales of all indications currently in development. 1. Novartis has signed an exclusive global license and collaboration agreement with PTC Therapeutics. This transaction is subject to customary closing conditions, including regulatory clearance. 2. Novartis has an exclusive, global license agreement with Legend Biotech for LB2102. 3. Novartis has an exclusive global license agreement with Monte Rosa Therapeutics.

We have a strong foundation in Immunology, and expect 6 Phase III readouts and >10 Phase II readouts¹ in next 5 years

Immunology

Disease areas (selected)

- Psoriasis, Psoriatic Arthritis
- Spondylitis/Spondyloarthritis
- HS, CSU, CINDU, AtD
- Sjögren's, SLE, LN

Anchor assets

Advanced platform capabilities

- Immune reset
- Bi-/tri-specific antibodies

Selected projects (indication)	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Cosentyx (GCA)						Readout H1 2025
Cosentyx (PMR)						Readout H2 2025
Remibrutinib (CSU)						Submission in H1 2025
Remibrutinib (CINDU)						Readout 2026
Remibrutinib (HS)						Advancing into PhIII in 2025
Remibrutinib (FA)						Readout H2 2025
Ianalumab (SjD)						Readout H2 2025
Ianalumab (LN)						Readout 2027
Ianalumab (SLE)						Readout 2027
Ianalumab (HS)						Readout 2025
Ianalumab (SSc)						Readout 2027
YTB323 (srSLE/LN)						Readouts from 2026
YTB323 (SSc)						Trial recruiting
YTB323 (IIM)						Trial recruiting
YTB323 (AAV)						Starting PhII in 2025 ²
GIA632 (IL-15 mAb) (multiple)						PhII initiation H2 2025
T-cell engagers (SLE)						Readouts from 2027
Bi-specific antibodies (AtD)						Readouts from 2027

Disease area

- Rheumatology

- Dermatology

- Other

1. Includes OA portfolio. 2. Direct to Phase II.

In CRM, we focus on areas of high unmet need and continue to build on our strong mid- and late-stage pipeline

CRM

Disease areas (selected)

- Heart Failure and Hypertension
- Atherosclerosis
- Arrhythmia
- Rare Renal, Acute Kidney Injury

Anchor assets

Entresto®
 FABHALTA®

LEQVIO®

Advanced platform capabilities

- xRNA (siRNA, ASO)

Selected projects (indication)	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Leqvio® (CVRR-LDLC, secondary and primary prevention)						Readouts 2026-2027
Pelacarsen (CVRR-Lp(a))						Readout 2025 (event-driven)
LTP001 (SMURF1 inhibitor) (PAH) ¹						Trial recruiting
QCZ484 (rHTN)						Advancing into PhII in 2025
Arrhythmia (multiple assets)						Multiple assets in clinic 2025
Inflammation (multiple modalities)						First asset in clinic 2025
Multiple siRNA assets						Several entering clinic in 2025-2026
Atrasentan (IgAN)						Approval expected 2025
Iptacopan (C3G)						Approval expected 2025
Iptacopan (IC-MPGN, aHUS)						Readout 2026
Zigakibart (IgAN)						Readout 2026
Iptacopan (LN, AAV)						Readouts 2026-2027
TIN816 (ATP modulator) (sAKI)						Readout 2026
Early renal (OJR520, UFJ776, etc.)						Expected to enter the clinic in 2026

Disease area

- Cardiology
- Renal

1. Phase I / II.

Neuroscience pipeline focuses on multiple sclerosis, neuromuscular and neurodegenerative diseases

Neuroscience

Disease areas (selected)

- Multiple Sclerosis
- Neuromuscular (Spinal Muscular Atrophy, others)
- Neurodegeneration (Alzheimer's, Parkinson's, Huntington's)

Anchor assets

Advanced platform capabilities

- Gene therapy
- xRNA
- Immune reset

Selected projects (indication)	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Remibrutinib (MS)						Readout 2026
Iptacopan (gMG)						Readout 2027
YTB323 (RMS) ¹						Trial recruiting
YTB323 (PPMS) ¹						Trial recruiting
YTB323 (gMG) ¹						Trial recruiting
OAV101 (SMA IT)						Submission in 2025
(FSHD, DM1)						Lead optimization/Discovery
EDK060 (CMT1A)						IND in preparation
PTC518 (HD) ²						Trial ongoing
NIO752 (tau ASO) (AD, PSP)						First readout 2025
VHB937 (TREM2) (ALS)						Trial recruiting
VHB937 (AD)						Starting PhII in 2025 ³

Disease area

- MS/Neuroimmunology
- Neuromuscular
- Neurodegenerative

1. Phase I / II. 2. Novartis has signed an exclusive global license agreement with PTC Therapeutics. This transaction is subject to customary closing conditions, including regulatory clearance. 3. Direct to Phase II.

In Oncology, we have multiple anchor brands in solid tumors and hematology, with a robust pipeline in prostate, breast and RLT

Oncology



Disease areas (selected)

- Breast Cancer
- Prostate Cancer
- Lung Cancer
- CML, NHL, MM, AML, MDS
- PNH, ITP, wAIHA

Anchor assets



Advanced platform capabilities

- RLT
- ADC
- CAR-T
- Bi-/tri-specific antibodies

Selected projects (MoA/indication) ¹	Pre-clinical	Phase I	Phase II	Phase III	Registration	Next milestone/status
Kisqali + oral SERD ^{2,4}	[Progress bar]					Advancing into PhIII
Kisqali + mutant-selective PI3Ka inhibitor ^{3,4}	[Progress bar]					Advancing into PhII
Next-gen CDK assets (e.g., CDK2 inhibitors)	[Progress bar]					Advancing into PhI in 2025
Lu-NeoB (GRPR RLT) ⁵	[Progress bar]					Readout expected 2026
FXX489 (RLT) ⁷	[Progress bar]					Trial ongoing
Emerging RLTs (including next-gen FAP, HER2)	[Progress bar]					Studies ongoing
Pluvicto (pre-taxane mCRPC – PSMAfore)	[Progress bar]					Approval expected H1 2025
Pluvicto (mHSPC – PSMAddition)	[Progress bar]					Readout expected H2 2025 ¹²
Pluvicto (oligometastatic PC – PSMA-DC)	[Progress bar]					Readout expected 2027
Ac-PSMA-617 (1 st gen α-emitting PSMA RLT) ⁸	[Progress bar]					Advancing into PhIII in H1 2025
Ac-PSMA-R2 (2 nd gen α-emitting PSMA RLT) ^{4,9}	[Progress bar]					Readout expected 2026
JSB462 (AR degrader) ⁴	[Progress bar]					Advancing into PhII in 2025
Tulmimetostat (EZH1/2 inhibitor) ^{4,10}	[Progress bar]					Trial ongoing
Lutathera (ES-SCLC) ⁴	[Progress bar]					Advancing into PhIII in 2027
AAA614 (multiple including NSCLC, PDAC) ⁶	[Progress bar]					Readout expected in 2026
FXX489 (multiple including NSCLC, PDAC, CRC)	[Progress bar]					Trial ongoing
GIZ943 (FOLR1R) ¹¹ (NSCLC, ovarian cancer)	[Progress bar]					Trial ongoing
Emerging (next-gen FAP, HER2, DLL3, B7H3) (multiple)	[Progress bar]					Studies ongoing

Disease area

- Breast cancer
- Prostate cancer
- Other RLT programs

1. Bars show most advanced phase per project row. 2. Ongoing combination study shown is sponsored by Olema Pharmaceuticals. 3. Ongoing combination study shown is sponsored by Scorpion Therapeutics. 4. Phase I/II. 5. Code: AAA603. 6. Name: Lu-FAP-2286. 7. Name: Lu-NNS-309. 8. Code: AAA817. 9. Code: AAA802. 10. Code: DZR123. 11. Name: Lu-EVS-459. 12. Event-driven trial readout.

We continue to improve R&D productivity, with several initiatives expected to accelerate composite cycle times

Select initiatives



Fast-to-IND Strategy (pre-clinical)

Competitive standards defined with the ambition to accelerate IND submissions up to 12 months across modalities

Phase appropriate development

Manufacturing capacities secured

Predictive models



Enhanced Operations (clinical)

Improved ways of working potentially leading to 1-2 years acceleration in select assets

Ambitious whitespace and trial standards

Targeted acceleration

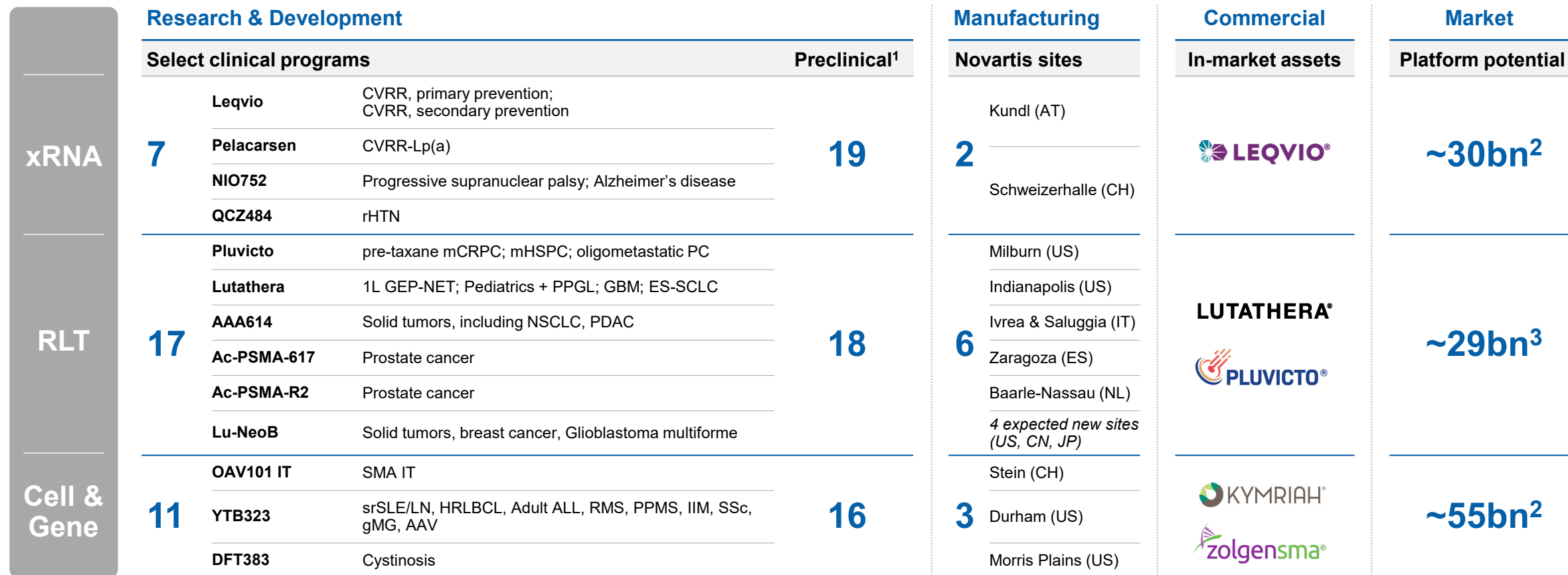


AI Enabled (composite)

AI to contribute to cycle time acceleration by 6+ months

Utilizing the power of data science and AI across R&D

We continue to strategically invest in our advanced technology platforms across the value chain...



Data as of Q3 2024. 1. From Exploratory to Preclinical. 2. Source Evaluate Pharma estimate for the year 2030. 3. Source MEDraysintell Nuclear Medicine Report & Directory Edition 2024, Radiotherapeutics market estimate for the year 2033.

... and over the last 2 years, we have signed more than 30 strategic deals to enhance our pipeline across therapeutic areas and technology platforms



Select Corporate & Business Development transactions are shown in the phase of the most advanced indication for multiple asset deals. This transaction is subject to customary closing conditions, including regulatory clearance.

1. Novartis has signed an exclusive global license and collaboration agreement with PTC Therapeutics.

We continue to focus on key social, environmental and governance factors alongside our pursuit of sustainable shareholder value creation

Creating sustainable impact

Value creation

Innovation and access to medicines

Future-proof pipeline addressing unmet need

Enabling access to innovative medicines

Dedicated Global Health unit

Human Capital

Diversity, Equity & Inclusion

Culture

Talent

Risk mitigation

Environmental Sustainability

Climate

Nature

Ethical Standards

Ethics

Compliance

Human rights

Enablers

Governance, transparency, non-financial reporting

Consistent industry-leading performance across priority ESG ratings

- Rank #1 in ATMI
- Industry leader in Sustainalytics¹
- Leaders group in MSCI
- Industry leader group in ISS ESG
- Double A List in CDP climate and water



1. Pharmaceuticals subindustry group. Copyright Morningstar Sustainalytics. All rights reserved.

Novartis profile presents an opportunity for continued shareholder value creation in the short, medium, and long-term



Our strategy is delivering results

4 core therapeutic areas and **2+3 technology platforms**

Delivered **+7% cc sales CAGR¹** from 2018-2023, **improved core margin** and generated substantial cashflows



Attractive growth profile

Sales expected to grow **+6% CAGR 2023-2028** and **+5% CAGR 2024-2029**

Core margin of **40%+ by 2027**

Mid-single digit sales growth cc in the long-term



Robust pipeline and capabilities

Streamlined and focused pipeline with increased R&D spend

Expanding our advanced technology platforms

30+ potential high-value pipeline assets



We continue to be an ESG leader

Focus on **key social, environmental and governance** factors

Rank #1 in **ATMI**

Industry leader in **Sustainalytics²**

¹ Continuing operations growth in constant currencies. Constant currencies is a non-IFRS measure. Details regarding non-IFRS measures can be found starting on page 46 of the 3Q24 Interim Financial Report. ² Pharmaceuticals subindustry group. Copyright Morningstar Sustainalytics. All rights reserved.

Appendix



Abbreviations

Abbreviation	Full Form
AAV	ANCA-Associated Vasculitis
AD	Alzheimer's Disease
ADC	Antibody-Drug Conjugate
aHUS	Atypical Hemolytic Uremic Syndrome
ALS	Amyotrophic Lateral Sclerosis
ATMI	Access to Medicines Index
C3G	C3 Glomerulopathy
CAR-T	Chimeric Antigen Receptor T-cell
CINDU	Chronic Inducible Urticaria
CRC	Colorectal Cancer
CRM	Cardiovascular-Renal-Metabolic
CSU	Chronic Spontaneous Urticaria
CVRR	Cardiovascular Risk Reduction
FA	Food Allergy
FOLR1R	Folate Receptor 1
FTE	Full-Time Equivalent
GCA	Giant Cell Arteritis
gMG	Generalized Myasthenia Gravis
HFMSE	Hammersmith Functional Motor Scale – Expanded
HS	Hidradenitis Suppurativa
IC-MPGN	Immune Complex-Mediated Membranoproliferative Glomerulonephritis

Abbreviation	Full Form
IgAN	Immunoglobulin A Nephropathy
IIM	Idiopathic Inflammatory Myopathies
IND	Investigational New Drug
LN	Lupus Nephritis
Lp(a)	Lipoprotein(a)
NSCLC	Non-Small Cell Lung Cancer
PDAC	Pancreatic Ductal Adenocarcinoma
PMR	Polymyalgia Rheumatica
PPMS	Primary Progressive Multiple Sclerosis
PSP	Progressive Supranuclear Palsy
rHTN	Resistant Hypertension
RLT	Radioligand Therapy
RMS	Relapsing Multiple Sclerosis
sAKI	Sepsis-Associated Acute Kidney Injury
SjD	Sjögren's Disease
SLE	Systemic Lupus Erythematosus
SMA	Spinal Muscular Atrophy
SSc	Systemic Sclerosis
TCE	T-Cell Engager
wAIHA	Warm Autoimmune Hemolytic Anemia