

Q2 2023 Results

July 27, 2023

Forward Looking Statements and Non-GAAP Financial Information

This presentation contains statements about Bristol-Myers Squibb Company's (the "Company") future financial results, plans, business development strategy, anticipated clinical trials, results and regulatory approvals that constitute forward-looking statements for purposes of the safe harbor provisions under the Private Securities Litigation Reform Act of 1995. All statements that are not statements of historical facts are, or may be deemed to be, forward-looking statements. Actual results may differ materially from those expressed in, or implied by, these statements as a result of various factors, including, but not limited to, (i) new laws and regulations, (ii) our ability to obtain, protect and maintain market exclusivity rights and enforce patents and other intellectual property rights, (iii) our ability to achieve expected clinical, regulatory and contractual milestones on expected timelines or at all, (iv) difficulties or delays in the development and commercialization of new products, (v) difficulties or delays in our clinical trials and the manufacturing, distribution and sale of our products, (vi) adverse outcomes in legal or regulatory proceedings, (vii) risks relating to acquisitions, divestitures, alliances, joint ventures and other portfolio actions and (viii) political and financial instability, including changes in general economic conditions. These and other important factors are discussed in the Company's most recent annual report on Form 10-K and reports on Forms 10-Q and 8-K. These documents are available on the U.S. Securities and Exchange Commission's website, on the Company's website or from Bristol-Myers Squibb Investor Relations. No forward-looking statements can be guaranteed.

In addition, any forward-looking statements and clinical data included herein are presented only as of the date hereof. Except as otherwise required by applicable law, the Company undertakes no obligation to publicly update any of the provided information, whether as a result of new information, future events, changed circumstances or otherwise.

This presentation includes certain non-generally accepted accounting principles ("GAAP") financial measures that we use to describe the Company's performance. The non-GAAP financial measures are provided as supplemental information and are presented because management has evaluated the Company's financial results both including and excluding the adjusted items or the effects of foreign currency translation, as applicable, and believes that the non-GAAP financial measures presented portray the results of the Company's baseline performance, supplement or enhance management's, analysts' and investors' overall understanding of the Company's underlying financial performance and trends and facilitate comparisons among current, past and future periods. This presentation also provides certain revenues and expenses excluding the impact of foreign exchange ("Ex-FX"). We calculate foreign exchange impacts by converting our current-period local currency financial results using the prior period average currency rates and comparing these adjusted amounts to our current-period results. Ex-FX financial measures are not accounted for according to GAAP because they remove the effects of currency movements from GAAP results.

The non-GAAP information presented herein provides investors with additional useful information but should not be considered in isolation or as substitutes for the related GAAP measures. Moreover, other companies may define non-GAAP measures differently, which limits the usefulness of these measures for comparisons with such other companies. We encourage investors to review our financial statements and publicly filed reports in their entirety and not to rely on any single financial measure. An explanation of these non-GAAP financial measures and a reconciliation to the most directly comparable financial measure are available on our website at www.bms.com/investors.

Also note that a reconciliation of forward-looking non-GAAP gross margin, non-GAAP operating margin, non-GAAP operating expenses and non-GAAP tax rate is not provided because a comparable GAAP measure for such measures are not reasonably accessible or reliable due to the inherent difficulty in forecasting and quantifying measures that would be necessary for such reconciliation. Namely, we are not, without unreasonable effort, able to reliably predict the impact of the unwind of inventory purchase price adjustments, accelerated depreciation and impairment of property, plant and equipment and intangible assets, and stock compensation resulting from acquisition-related equity awards, or currency exchange rates. In addition, the Company believes such a reconciliation would imply a degree of precision and certainty that could be confusing to investors. These items are uncertain, depend on various factors and may have a material impact on our future GAAP results.



Q2 2023 Results



Giovanni Caforio, MD

Chairman of the Board
and Chief Executive Officer

Q2 2023 - Summary Overview & Updated Outlook

Performance



Global Net Sales
\$11.2B
(6%) YoY; (5%) Ex-FX*



New Product Sales
\$862M; +79% vs. PY



Capital Allocation

- Balance sheet strength
- **\$4B ASR Agreement** to be executed in Q3 2023

2023 Revised Guidance

Total Sales^{1*}

Low single-digit
decline

GAAP EPS*

\$3.72 - \$4.02

Non-GAAP EPS*

\$7.35 - \$7.65

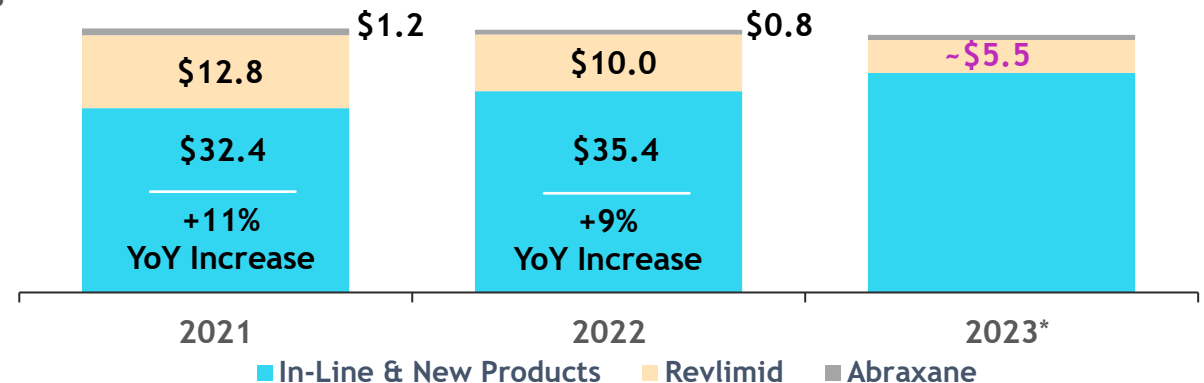
2023 Revlimid*

Outlook revised from **~\$6.5B** to **~\$5.5B**

2020-2025 Financial Targets* Reaffirmed

FY Sales 2021-2023

In \$B



Guidance Impacted By Change in Outlook for Revlimid and, to a Lesser Extent, Pomalyst

Patient Support Ecosystem

BMS Access Support

Company co-pay assistance for eligible commercially insured patients

- Under U.S. law, company co-pay support may be provided only to commercially insured patients - **No impact from this channel**

Independent Third-Party Charitable Foundations

Financial support to patients to help with out-of-pocket costs, including Medicare patients; supported by donors, including BMS, in compliance with HHS Guidance

- Funds supporting multiple myeloma patients **closed for a period of time** earlier this year

Independent BMS Patient Assistance Foundation (PAF)

BMS donation of products to BMS PAF, a separate 501(c)(3) organization, which provides free medicine to qualified patients unable to get financial support elsewhere

- An **increase** in utilization of **free drug** for Revlimid & Pomalyst **started late in Q1 and increased in Q2**
- To be consistent with HHS guidance, the BMS PAF **provides free product through the end of the calendar year**

Financial Impact

Estimated Q2 Impact:

- ~\$330M for Revlimid & Pomalyst, of which 80% is Revlimid

Estimated 2023 Impact*:

- Revlimid: ~\$1B impact which is reflected in updated full-year guidance of ~\$5.5B
- Pomalyst: ~\$300M

2024 and 2025 Revlimid revenue* expected to step-down by roughly ~\$1.5B & ~\$2B, respectively

New Product Portfolio Performance

- Contributed **\$862M** in quarter; revenues increased **+79%** vs PY
- Approaching **~\$3.5B** annual run rate
- Strong outlook for **future growth**

SOTYKTU™
(deucravacitinib) 6 mg tablets

CAMZYOS™
(mavacamten) capsules
2.5, 5, 10, 15mg

Abecma™
(idecabtagene vicleucel)
CARVIMAG

Breyanzi™

Reblozyl™
(luspatercept-aamt)
for injection 25mg • 75mg

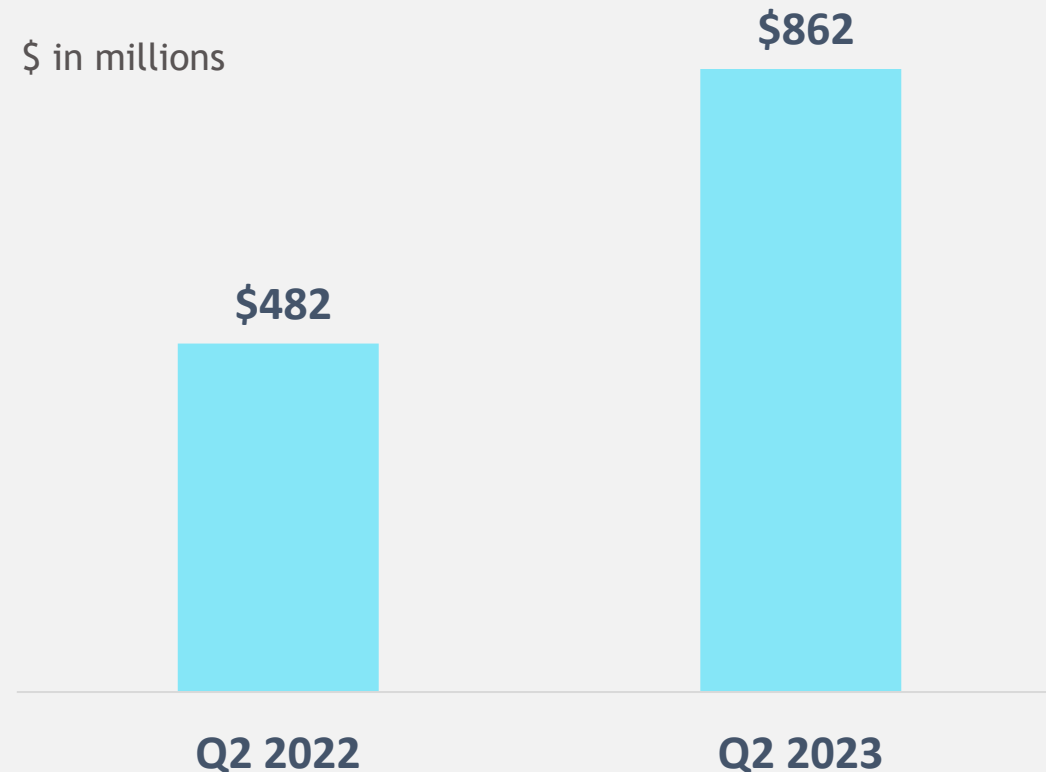
Opdualag™
(nivolumab and relatimab-mbw)
Injection for intravenous use | 480 mg/160 mg

ZEPOSIA™
(ozanimod) | 0.05 mg capsules

ONUREG™
(azacitidine) tablets
300mg • 200mg

INREBIC™
(fedratinib) capsules
100mg

New Product Portfolio Revenues



New Product Portfolio Significantly De-Risked with Important Catalysts Ahead

Key Milestones

Beyond

- Camzyos nHCM
- Sotyktu SLE
- Sotyktu SjS
- Opdualag Adj. Mel
- Opdualag 2L+ MSS CRC
- Opdualag 1L NSCLC
- Reblozyl 1L NTD MDS

Planned Next 1-2 Years

- ✓ Breyanzi 3L+ CLL
- ✓ Breyanzi 3L+ iNHL (incl. FL/MCL)
- Sotyktu PsA
- Zeposia CD
- Reblozyl MF

Milestones Already Delivered that De-Risk 2025-2030 and Beyond

- ✓ Zeposia MS
- ✓ Abecma 5L+
- ✓ Sotyktu PsO
- ✓ Abecma 3-5L
- ✓ Reblozyl 2L TD MDS
- ✓ Zeposia UC
- ✓ Opdualag 1L Mel FDC
- ✓ Reblozyl 1L MDS
- ✓ Breyanzi 3L+ LBCL
- ✓ Camzyos oHCM
- ✓ Breyanzi 2L LBCL
- ✓ Onureg AML maint.

\$10B - \$13B

Risk-Adjusted Sales



2025

\$25B+
Non-Risk Adjusted*



2030

Milestones represent data readouts or approvals unless otherwise specified; subject to positive registrational trials and health authority approval

Continued Strong Pipeline Execution

2023 Key Milestones

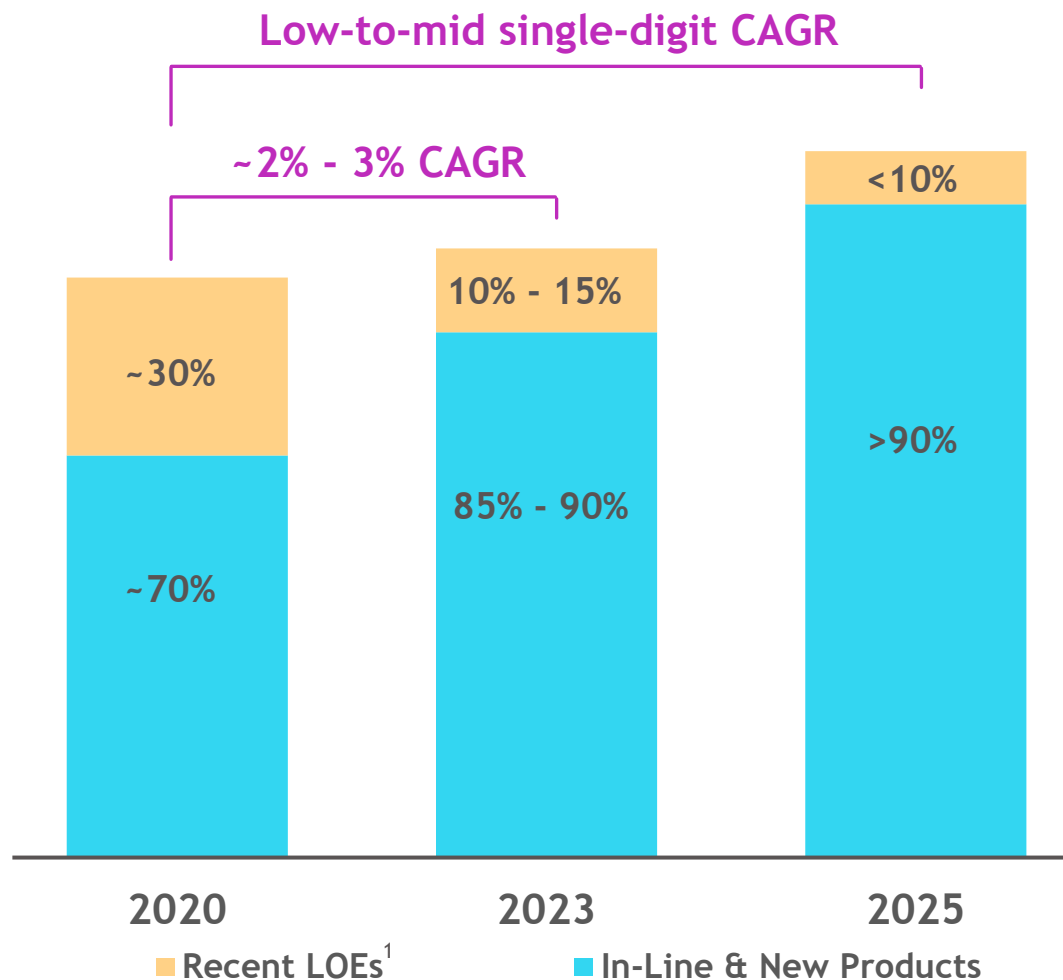
Opdivo (+/- Yervoy)	Early Stage: <input checked="" type="checkbox"/> Neo-adjuvant NSCLC Ph3 (CM-816) approval in EU	iberdomide	<input checked="" type="checkbox"/> Initiation of pivotal post-transplant maintenance H2H vs Revlimid
	Metastatic <input checked="" type="checkbox"/> 1L mCRPC Ph3 (CM-7DX)	Reblozyl	<input checked="" type="checkbox"/> 1L MDS (COMMANDS) U.S. filing
Opdualag	<input type="checkbox"/> 1L NSCLC Ph2	Sotyktu	<input checked="" type="checkbox"/> Mod-to-severe PsO EU approval <input checked="" type="checkbox"/> CD Ph2 (IM011-023) ¹ <input type="checkbox"/> UC Ph2 (IM011-127)
repotrectinib	<input checked="" type="checkbox"/> ROS1+ NSCLC (TRIDENT-1) U.S. filing		
Abecma	<input checked="" type="checkbox"/> 3-5L MM Ph3 (KarMMa-3) filing	LPA ₁ Antagonist	<input type="checkbox"/> Initiation IPF Ph3 <input checked="" type="checkbox"/> PPF Ph2 (IM027-040)
	<input type="checkbox"/> Initiation NDMM Ph3 (KarMMa-9)		
Breyanzi	<input checked="" type="checkbox"/> 2L TE LBCL EU approval	Camzyos	<input checked="" type="checkbox"/> oHCM EU approval
	<input checked="" type="checkbox"/> 3L+ CLL Ph1/2 (TRANSCEND-CLL)	LIBREXIA (milvexian)	<input checked="" type="checkbox"/> Initiation Ph3 program ²
	<input checked="" type="checkbox"/> 3L+ FL Ph2 (TRANSCEND-FL)		

2024/2025 Key Milestones

Opdivo (+/- Yervoy)	Metastatic: <input type="checkbox"/> 1L HCC Ph3 (CM-9DW) <input type="checkbox"/> 1L+ MSI High CRC Ph3 (CM-8HW)	Reblozyl	<input type="checkbox"/> 1L MF Ph3 (INDEPENDENCE)
	Early Stage: <input type="checkbox"/> Peri-adj NSCLC Ph3 (CM-77T) <input type="checkbox"/> Peri-adj MIBC Ph3 (CM-078) <input type="checkbox"/> Adj HCC Ph3 (CM-9DX) <input type="checkbox"/> Stage III Unresectable NSCLC Ph3 (CM-73L) <input type="checkbox"/> Adj NSCLC Ph3 (ANVIL, co-op group)	cendakimab	<input type="checkbox"/> EoE Ph3
		Sotyktu	<input type="checkbox"/> PsA Ph3
		Zeposia	<input type="checkbox"/> CD maintenance Ph3 (YELLOWSTONE)
Opdualag	<input type="checkbox"/> 1L HCC Ph2 <input type="checkbox"/> 2L+ HCC Ph2 <input type="checkbox"/> 2L/3L+ MSS mCRC Ph3		
alnuctamab BCMA TCE	<input type="checkbox"/> Initiation MM Ph3		

On Track to Deliver 2020-2025 Financial Targets

Total Company Revenue 2020 - 2025

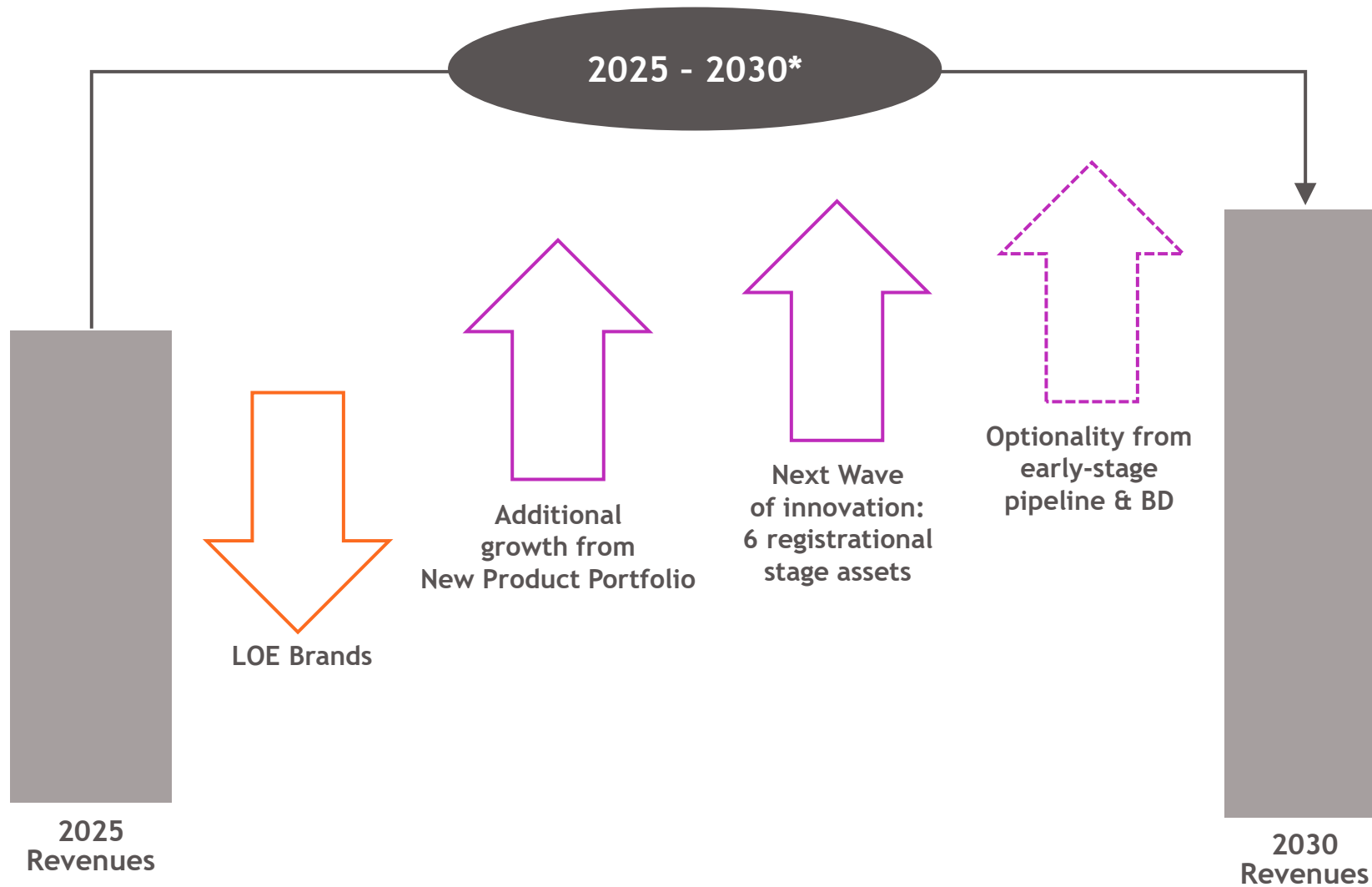


2020 - 2025 Financial Targets**

On track to deliver

- Low-to-mid single-digit revenue CAGR*
- Double-digit revenue CAGR* Ex-Rev/Pom
- \$8B - \$10B growth from in-line brands
- \$10B - \$13B from New Product Portfolio
- 40%+ operating margin

Multiple Paths for Long-Term Growth





Q2 2023 Results

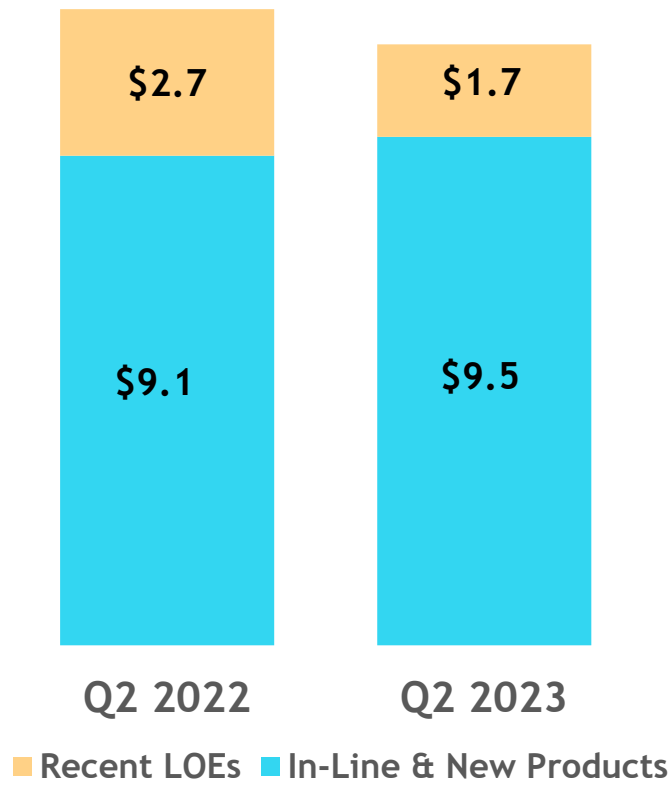


David Elkins

Executive Vice President
and Chief Financial Officer

Total Company Performance Driven by In-Line & New Product Portfolios

Total Company Sales ~\$11.2B
(6%) YoY, (5%) Ex-FX*

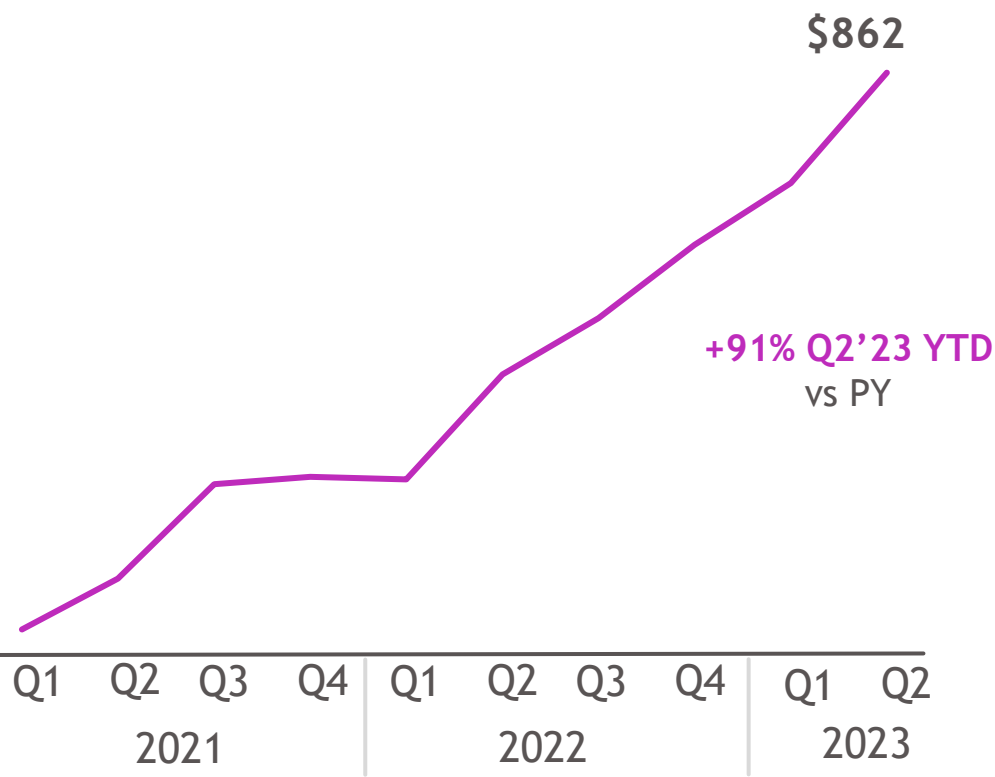


\$B	Q2 Net Sales ¹	YoY %	Ex-FX* %
Total Company	\$11.2	(6%)	(5%)
In-Line Products	\$8.6	-	-
New Product Portfolio	\$0.9	+79%	+79%
In-Line Products & New Product Portfolio	\$9.5	+4%	+4%
Recent LOEs ²	\$1.7	(37%)	(37%)

New Product Portfolio Annualizing at ~\$3.5B

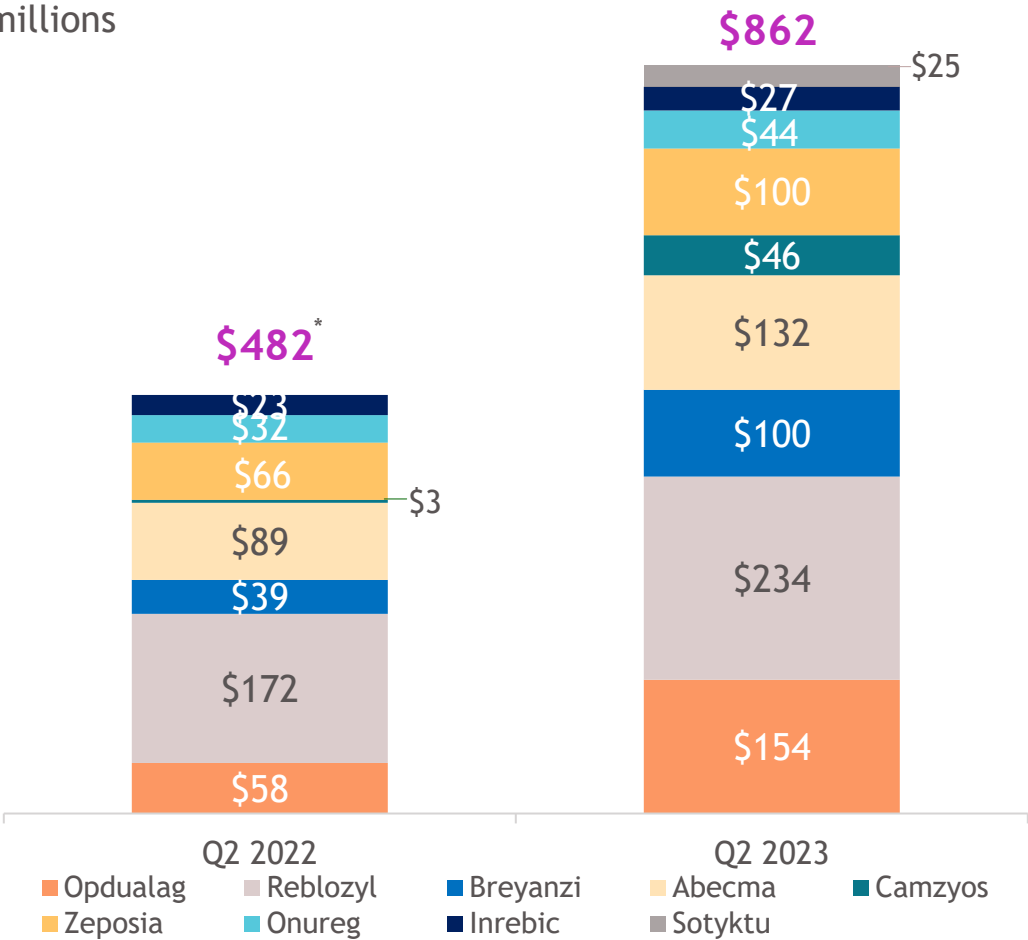
Building **strong momentum** for future growth

\$ in millions







+79% growth vs PY

\$ in millions



Q2 2023 Solid Tumor Product Summary

Q2 Global Net Sales

	\$M	YoY %	Ex-FX* %
 <small>INJECTION FOR INTRAVENOUS USE 10 mg/mL</small>	\$2,145	+4%	+5%
 <small>INJECTION FOR INTRAVENOUS INFUSION</small>	\$585	+11%	+12%
 <small>(nivolumab and relatlimab-rmbw) Injection for intravenous use 480 mg/160 mg</small>	\$154	**	**
	\$258	+7%	+10%

**In excess of +100%

Opdivo: +5% YoY, +11% YTD ex-FX*


- U.S. YoY growth of +2% driven by demand in 1L lung, gastric indications & adj. bladder cancer offset by customer buying patterns
- Ex-U.S. YoY growth of +10% ex-FX* demand growth from newly launched indications & expanded access

Opdualag: Growth of +31% ex-FX* vs prior quarter

- U.S. growth driven by strong demand; approaching 25% market share¹ in 1L melanoma
- Potential to be new SOC in 1L melanoma

Q2 2023 Cardiovascular Product Summary

Q2 Global Net Sales

	\$M	YoY %	Ex-FX* %
 Eliquis apixaban	\$3,204	(1%)	(1%)

Best-in-class & leading OAC within category

Eliquis: +4% YTD ex-FX*

- U.S. YoY growth of +7% driven by robust underlying demand offset by unfavorable gross-to-net dynamics
- Ex-U.S. YoY (17%) ex-FX* impacted by generic entry in Canada & UK, and pricing measures

	\$M	YoY %	Ex-FX* %
 CAMZYOS (mavacamten) capsules	\$46	**	**

First-in-class myosin inhibitor

- U.S. increase in total treated & commercial dispensed patients; VALOR approval further strengthens clinical profile
- EU approval in symptomatic oHCM

	As of March 31, 2023 ¹	As of June 30, 2023 ¹
Patients in hub	~2700	~3800
Patients on commercial drug	~1500	~2500

Q2 2023 Hematology Product Summary

Q2 Global Net Sales¹

	\$M	YoY %	Ex-FX* %
 Revlimid (lenalidomide) capsules	\$1,468	(41%)	(41%)
 Pomalyst (pomalidomide) capsules	\$847	(7%)	(6%)
 SPRYCEL dasatinib 200 mg capsules	\$458	(16%)	(15%)
 Reblozyl (luspatercept-aamt) for injection 25mg + 75mg	\$234	+36%	+35%
 Abecma (idecabtagene vicleucel)	\$132	+48%	+48%
 Breyanzi (lisocabtagene maraleucel)	\$100	**	**
 ONUREG (azacitidine) tablets 200mg + 200mg	\$44	+38%	+38%
 INREBIC (fedratinib) capsules 100mg	\$27	+17%	+22%

**In excess of +100%

Reblozyl: +35% YoY, +34% YTD ex-FX*

- Strong U.S. sales growth of +24% due to TRx share growth driven by longer duration of treatment
 - COMMANDS² Priority Review: U.S. FDA PDUFA date August 28, 2023
- Ex-US sales roughly doubled as we continue to secure reimbursement in additional countries

Abecma: +48% YoY, +79% YTD ex-FX*

- Demand growth supported by increased manufacturing capacity
 - KarMMA-3³: U.S. PDUFA date December 16, 2023; filed in EU & Japan

Breyanzi:

- Strong 2L/3L+ LBCL demand supported by increased manufacturing capacity; approval in EU in 2L LBCL


Q2 2023 Immunology Product Summary

Q2 Global Net Sales

	\$M	YoY %	Ex-FX* %
 ORENCIA® (abatacept)	\$927	+6%	+7%
 ZEPOSIA® (ozanimod) 0.52 mg capsules	\$100	+52%	+52%

Zeposia: +52% YoY, +75% YTD ex-FX*

- Growth from demand in MS & expanding contribution from UC
- Continued focus on improving formulary access
- Expansion in international markets based on reimbursement timing

	\$M	YoY %	Ex-FX* %
 SOTYKTU™ (deucravacitinib) 6 mg tablets	\$25	---	---

First-in-class selective allosteric TYK2 inhibitor

- U.S. significant volume growth in Q2
- Payor coverage accelerated into 2023 - CVS indication-based plans added with no step-edit; ~15% of total commercial covered lives
- Continued focus on driving demand to enable broader access in 2024

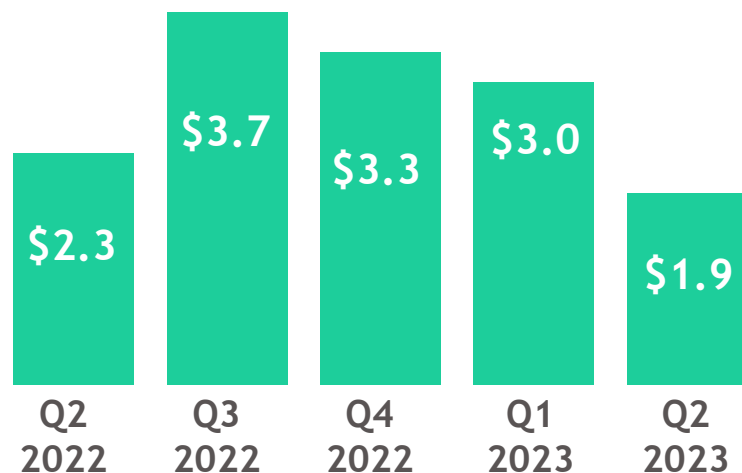
	As of March 31, 2023 ¹	As of June 30, 2023 ¹
Cumulative Volume ²	>9.5K TRx Equivalent	>23K TRx Equivalent
Market Share ³	Mid-30s%	35-40%
Source of Business ⁴		
• Systemic-naïve	Roughly 1/3 each	>40%
• Otezla-experienced		>25%
• Biologic-experienced		>30%

Q2 2023 Financial Performance

\$ in billions, except EPS	US GAAP		Non-GAAP*	
	Q2 2023	Q2 2022	Q2 2023	Q2 2022
Total Revenues, net	11.2	11.9	11.2	11.9
Gross Margin %	74.4%	77.1%	75.0%	78.3%
Operating Expenses ¹	4.2	4.1	4.2	4.1
Acquired IPR&D	0.2	0.4	0.2	0.4
Amortization of Acquired Intangibles	2.3	2.4	-	-
Effective Tax Rate	(11.7%)	27%	16.9%	17%
Diluted EPS	0.99	0.66	1.75	1.93
Diluted Shares Outstanding (# in millions)	2,102	2,149	2,102	2,149
Diluted EPS Impact from Acquired IPR&D ²	(0.05)	(0.14)	(0.05)	(0.14)

Balanced Approach to Capital Allocation

Cash flow from Operations \$B



\$B	Q2 2023
Total Cash*	~\$8.7B
Total Debt	~\$37.7B

Operating cash flow generation impacted by
~\$3B in tax payments in Q2'23

Business Development

- Prioritize opportunities to further diversify portfolio & strengthen long-term outlook

Balance Sheet Strength

- Continued debt reduction
 - ~\$1.9B in YTD debt repayments
 - ~\$2B in additional maturities in 2023
- Maintain strong investment-grade credit rating

Returning Cash to Shareholders

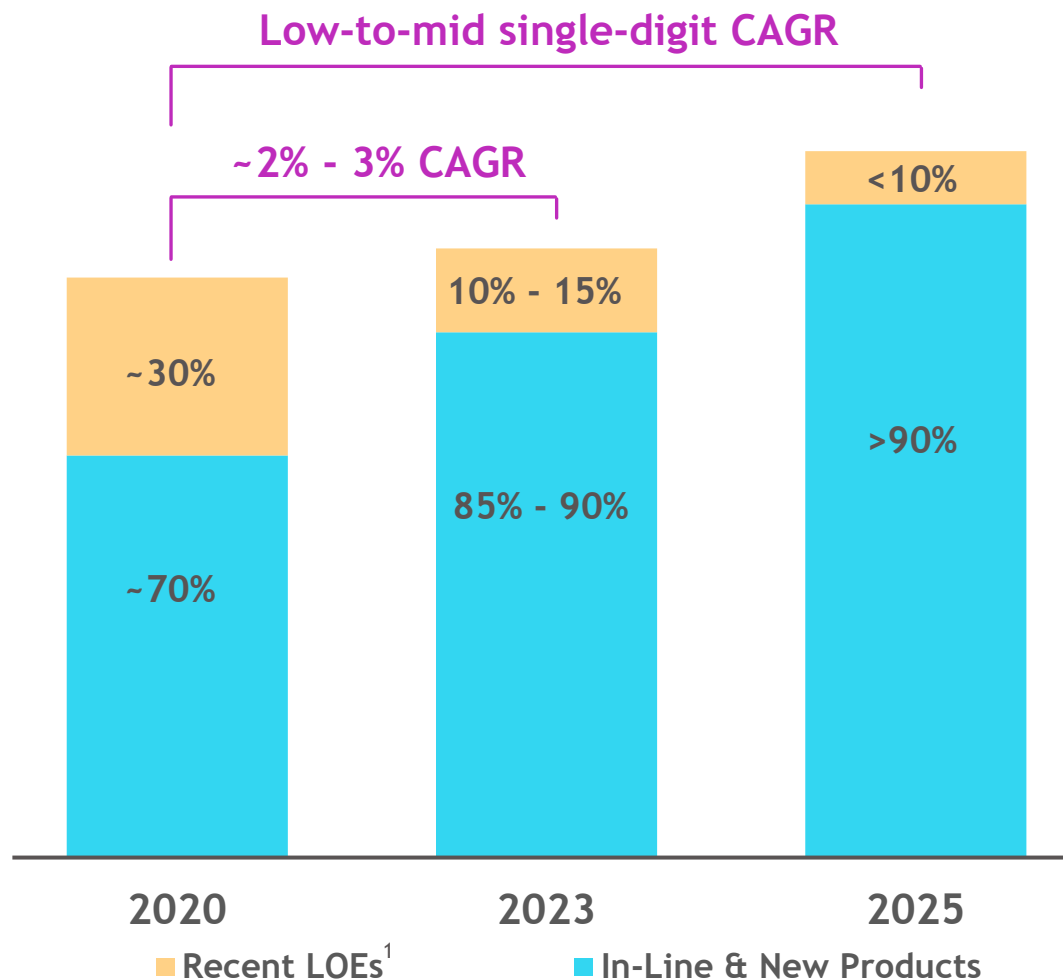
- Continued annual dividend growth**
- Opportunistic share repurchase
 - \$4B ASR Agreement to be executed in Q3'23

Revised 2023 Guidance

	US GAAP*		Non-GAAP*	
	April (Prior)	July (Revised)	April (Prior)	July (Revised)
Total Revenues Reported Rates	~2% increase	Low-single digit decline	~2% increase	Low-single digit decline
Total Revenues Ex-FX	~2% increase	Low-single digit decline	~2% increase	Low-single digit decline
Revlimid	~\$6.5 billion	~\$5.5 billion	~\$6.5 billion	~\$5.5 billion
Gross Margin %	~77%	~76%	~77%	~76%
Operating Expenses ¹	Mid-single digit decline	Low-single digit decline	Low-single digit decline	Low-single digit decline (No Change)
Tax Rate	~21%	~16%	~17%	~17.5%
Diluted EPS	\$4.10 - \$4.40	\$3.72 - \$4.02	\$7.95 - \$8.25	\$7.35 - \$7.65

On Track to Deliver 2020-2025 Financial Targets

Total Company Revenue 2020 - 2025



2020 - 2025 Financial Targets**

On track to deliver

- Low-to-mid single-digit revenue CAGR*
- Double-digit revenue CAGR* Ex-Rev/Pom
- \$8B - \$10B growth from in-line brands
- \$10B - \$13B from New Product Portfolio
- 40%+ operating margin

Q2 2023 Results Q&A



Giovanni Caforio, MD

Chairman of the Board,
Chief Executive Officer



Chris Boerner, PhD

Executive VP,
Chief Operating Officer



David Elkins

Executive VP,
Chief Financial Officer



Samit Hirawat, MD

Executive VP,
Chief Medical Officer,
Global Drug Development



Adam Lenkowsky

Executive VP,
Chief Commercialization Officer

Bristol Myers Squibb Company Reconciliation of Certain GAAP Line Items to Certain Non-GAAP Line Items

(Unaudited, dollars in millions)

	Year-Ended December 31		
	2020	2021	2022
Total Revenues	\$42,518	\$46,385	\$46,159
Gross Profit	\$30,745	\$36,445	\$36,022
Specified items ^(a)	\$3,300	\$603	\$356
Gross Profit excluding specified items	\$34,045	\$37,048	\$36,378
Marketing, Selling and Administrative	\$7,661	\$7,690	\$7,814
Specified items ^(a)	(\$279)	(\$3)	(\$79)
Marketing, Selling and Administrative excluding specified items	\$7,382	\$7,687	\$7,735
Research and Development	\$10,048	\$10,195	\$9,509
Specified items ^(a)	(\$903)	(\$843)	(\$308)
Research and Development excluding specified items	\$9,145	\$9,352	\$9,201
Operating margin	31%	40%	41%
Specified items ^(a)	10%	3%	1%
Operating margin excluding specified items ^(b)	41%	43%	42%

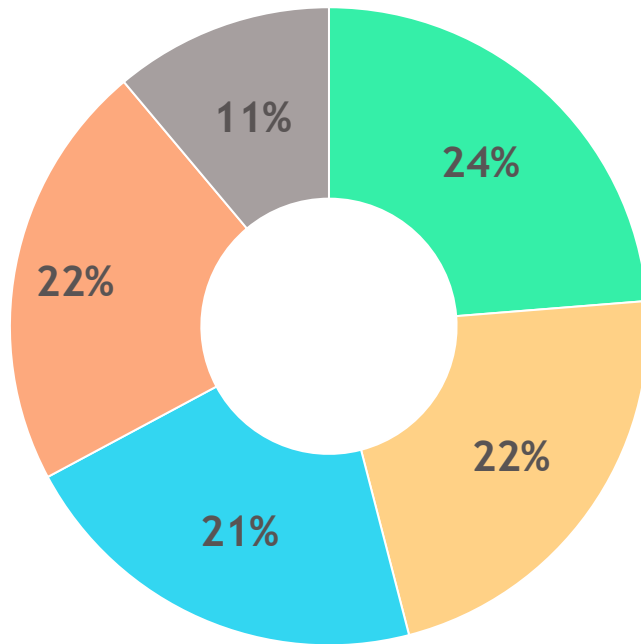
2023 Key News Flow

Asset	Timing	Asset	Timing
Opdivo EU approval in Neo-Adj. Lung EFS (CM-816)	EU Approval June 2023	Reblozyl EU approval in NTD Beta-Thalassemia Associated Anemia	EU Approval March 2023
Opdivo 1L mCRPC Ph3 (CM -7DX)	Study Discontinued ¹	Reblozyl 1L TD MDS Associated Anemia (COMMANDS) filing	Presented at ASCO & EHA 2023 Priority Review: U.S. PDUFA August 28, 2023 & filed in EU
Opdualag Stage IV 1L NSCLC Ph2 (CA227-104)	YE 2023/2024	Sotyktu EU approval in mod-to-severe PsO POETYK PSO-1 & PSO-2	EU Approval March 2023
repotrectinib ROS1+ NSCLC (TRIDENT-1) filing	Priority Review: U.S. PDUFA November 27, 2023	Sotyktu Crohn's Disease Ph2 (LATTICE-CD)	PoC not achieved ²
Abecma 3-5L MM (KarMMa-3) filing	U.S. PDUFA December 16, 2023; filed in EU & Japan	Sotyktu Ulcerative Colitis (higher dose) Ph2 (IM011-127)	2H 2023
Breyanzi EU approval in 2L LBCL (Transplant Eligible)	EU approval May 2023	LPA₁ antagonist Progressive Pulmonary Fibrosis (PPF) Ph2 (IM027-040)	Achieved PoC
Breyanzi 3L+ CLL Ph1/2 (TRANSCEND-CLL)	Met primary endpoint in January 2023 Presented at ASCO 2023	Camzyos EU approval in symptomatic obstructive HCM (EXPLORER-HCM)	EU Approval June 2023
Breyanzi 2L & 3L+ FL Ph2 (TRANSCEND-FL)	Positive topline results in April 2023 Presented at ICML 2023	Camzyos U.S. & EU approval in obstructive HCM SRT eligible (VALOR)	U.S. & EU approval June 2023

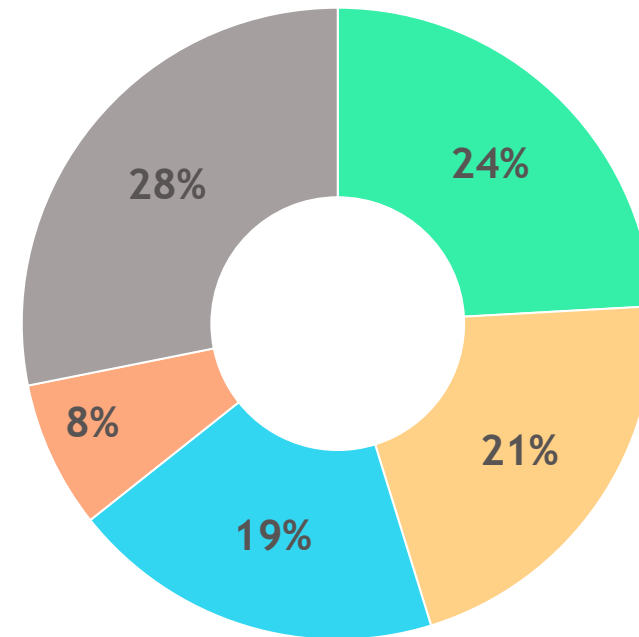
Q2 2023 Opdivo Sales Mix



U.S. Sales Mix



Ex-U.S. Sales Mix

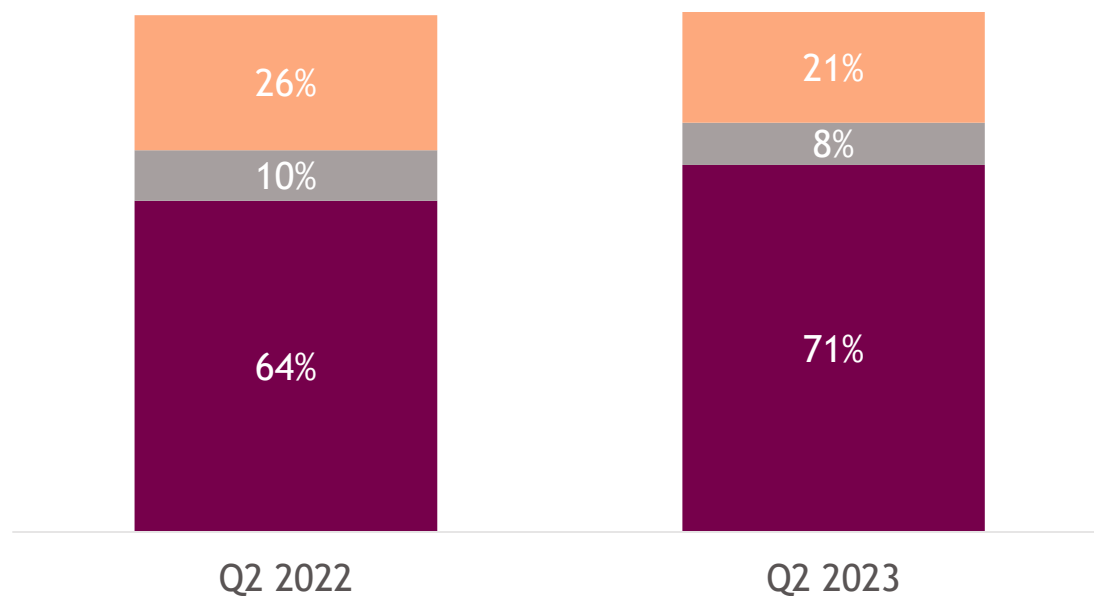


■ NSCLC ■ RCC ■ Melanoma ■ Upper GI/Bladder ■ All others

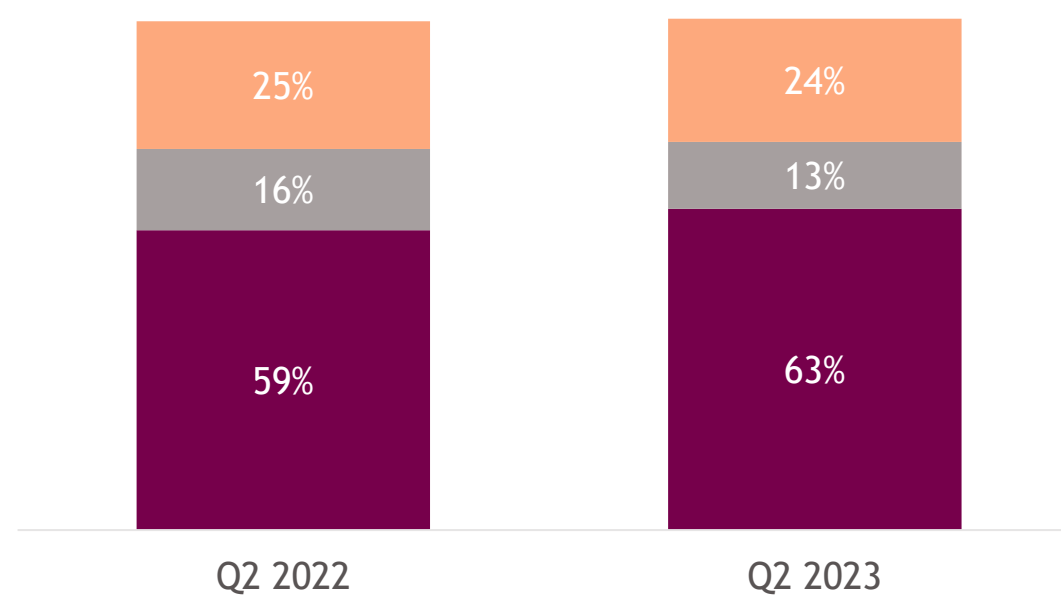
Q2 2023 Eliquis NBRx/TRx Share



NBRx Share - US



TRx Share - US



Our ESG Achievements and Looking Ahead¹



ESG Strategy

- ✓ Completed **ESG materiality assessment**
- ✓ Assessment is **global** and follows **double materiality** best practices
- ✓ ESG operating model to further **align with company strategy**



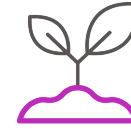
Inclusion & Diversity

- ✓ Executive representation:
 - **6.1%** Black/African American (VP+ in the U.S.)
 - **6.1%** Hispanic/Latino (VP+ in the U.S.)
 - **49%** of executives are women
- ✓ **58%** clinical trial sites in diverse metro areas
- ✓ **\$1B** global spend on diverse-owned businesses



Health Equity

- ✓ In 2022, nearly **\$100 million** in distributed funding from BMS has reached more than **10 million** people
- ✓ *BMS Foundation has committed:
 - **\$100 million** to establish Robert A. Winn Diversity in Clinical Trials Award Program
 - **\$48 million** across 33 grants to advance **health equity** in cancer, cardiovascular disease, and immunology



Environment

- ✓ Exceeded GHG emission reduction target from **2% to 6%** for 2022
- ✓ Exceeded waste to landfill target from **5% to 37%** for 2022

Looking Ahead

Publish the BMS **2022 ESG Report**

ESG materiality assessment results will be shared later this year

Reporting **Task Force on Climate Related Financial Disclosures** (TCFD) metrics for the first time later this year

Clinical Development Portfolio - Phase I and II

Data as of July 27th, 2023

Phase I		Phase II	
✦ AHR Antagonist**	Solid Tumors	✦ Anti-CTLA-4 NF Probody® Therapeutic	Solid Tumors
✦ Anti-CCR8^	Solid Tumors	✦ Anti-Fucosyl GM1^	RR Small Cell Lung Cancer
✦ Anti-ILT4^	Solid Tumors	✦ Anti-IL-8^	Solid Tumors
✦ Anti-NKG2A^	Solid Tumors	✦ Anti-TIGIT^	Solid Tumors
✦ AR LDD	Solid Tumors	✦ BET Inhibitor (CC-90010)^	Solid Tumors
✦ Claudin 18.2 ADC	Solid Tumors	✦ farletuzumab ecteribulin	Solid Tumors
✦ DGK Inhibitor	Solid Tumors	✦ repotrectinib	ROS1 NSCLC
✦ JNK Inhibitor	Solid Tumors		NTRK Pan-Tumor
✦ MAGE A4/8 TCER*	Solid Tumors	nivolumab+relatlimab	Stage IV 1L Non-Small Cell Lung Cancer
✦ NME 1	Solid Tumors		1L, 2L Hepatocellular carcinoma
✦ NME 2	Solid Tumors	✦ golcadomide (CC-99282)^	RR Non-Hodgkin's Lymphoma
✦ SHP2 Inhibitor^	Solid Tumors	✦ BET Inhibitor (BMS-986158)	Hematologic Malignancies
✦ TGFβ Inhibitor^	Solid Tumors	ABECMA (ide-cel)	1-4L+ Multiple Myeloma
✦ TIGIT Bispecific	Solid Tumors		3L+ Chronic Lymphocytic Leukemia (CLL)
✦ alnuctamab BCMA TCE	RR Multiple Myeloma	BREYANZI (liso-cel)	RR Follicular Lymphoma (FL)
✦ Anti-SIRPα	Hematologic Malignancies		RR Marginal Zone Lymphoma (MZL)
✦ BCMA NKE	RR Multiple Myeloma	REBLOZYL	RR Mantle Cell Lymphoma (MCL)
✦ BET Inhibitor (CC-90010)^	RR Non-Hodgkin's Lymphoma	ONUREG	A-Thalassemia
✦ CD33 NKE	RR Multiple Myeloma		Low- or Intermediate-risk Myelodysplastic Syndrome
✦ CD47xCD20	Non-Hodgkin's Lymphoma	✦ Cardiac Myosin Inhibitor (MYK-224)	Obstructive Hypertrophic Cardiomyopathy
✦ CK1α Degradar	Hematologic Malignancies	✦ danicamtiv	Genetic Dilated Cardiomyopathy
✦ GPRC5D CAR T	RR Multiple Myeloma	CAMZYOS	Heart Failure with preserved Ejection Fraction (HFpEF)
✦ GSPT1 CELMoD (CC-90009)^	RR Acute Myeloid Leukemia	✦ afimetoran (TLR 7/8 Inhibitor)	Systemic Lupus Erythematosus
golcadomide (CC-99282)^	1L Diffuse Large B-cell Lymphoma	✦ TYK2 Inhibitor (BMS-986322)	Moderate-to-Severe Psoriasis
✦ FXIa Inhibitor	Thrombotic Disorders		Crohn's Disease
✦ Anti-CD40	Autoimmune Disease	SOTYKTU	Discoid Lupus Erythematosus
✦ CD19 NEX T	Severe Refractory Systemic Lupus Erythematosus		Alopecia Areata
✦ RIPK1 Inhibitor	Autoimmune Disease	✦ HSP47	Ulcerative Colitis
✦ IL2-CD25	Autoimmune Disease	✦ LPA1 Antagonist	Non-alcoholic Steatohepatitis (NASH)
✦ PKCθ Inhibitor	Autoimmune Disease		Pulmonary Fibrosis
afimetoran (TLR 7/8 Inhibitor)	Cutaneous Lupus Erythematosus		
✦ Anti-MTBR-Tau	Neuroscience		
✦ BTK Inhibitor	Neuroscience		
✦ eIF2b Activator	Neuroscience		
✦ FAAH/MGLL Dual Inhibitor	Neuroscience		

- * Partner-run study
- ✦ NME leading indication
- ^ Trials exploring various combinations

■ Oncology
 ■ CV
 ■ Neuroscience
■ Hematology
 ■ Immunology

Clinical Development Portfolio - Phase III

Data as of July 27th, 2023

Phase III

✦ subcutaneous nivolumab + rHuPH20 (multi-indications)	2L Renal Cell Carcinoma
OPDIVO	Adjuvant Hepatocellular Carcinoma
	Peri-adjuvant Muscle Invasive Urothelial Carcinoma
	Peri-adjuvant Non-Small Cell Lung Cancer
	Stage IB-IIIA Adjuvant NSCLC*
OPDIVO + YERVOY	1L Hepatocellular Carcinoma
	1L Bladder Cancer
	1L+ Microsatellite Instability High Colorectal Cancer
	Stage 3 Unresectable Non-Small Cell Lung Cancer
OPDUALAG	Adjuvant Melanoma
	2L/3L+ Microsatellite Stable Metast. Colorectal Cancer
✦ subcutaneous nivolumab + relatlimab + rHuPH20	1L Melanoma
✦ iberdomide	2L+ Multiple Myeloma
	Post-Transplant Maintenance Newly Diagnosed Multiple Myeloma
✦ mezigdomide (CC-92480)	2L+ Multiple Myeloma
INREBIC	Myelofibrosis previously treated with Ruxolitinib
REBLOZYL	1L TD Myelofibrosis Associated Anemia
	1L NTD Myelodysplastic Syndrome Associated Anemia
✦ milvexian (FXIa Inhibitor)	Secondary Stroke Prevention*
	Acute Coronary Syndrome*
	Atrial Fibrillation*
CAMZYOS	Non-Obstructive Hypertrophic Cardiomyopathy
✦ cendakimab	Eosinophilic Esophagitis
SOTYKTU	Psoriatic Arthritis
	Systemic Lupus Erythematosus
	Sjögren's Syndrome
ZEPOSIA	Crohn's Disease

Registration US, EU, JP

OPDIVO	Adjuvant Melanoma stage IIB/C (US, EU)
repotrectinib	ROS1 NSCLC (US)
ABECMA (ide-cel)	3-5L Multiple Myeloma (US, EU, JP)
REBLOZYL	1L TD Myelodysplastic Syndrome Associated Anemia (US, EU, JP)

- * Partner-run study
- ✦ NME leading indication

■ Oncology	■ CV	■ Neuroscience
■ Hematology	■ Immunology	

Development Partnerships: ABECMA (ide-cel): 2seventy bio; AHR: Ikena Oncology; Anti-MTBR-Tau: Prothena; CAMZYOS in China, Singapore, Thailand, Macau, HK, Taiwan: LianBio; Claudin 18.2 ADC: LaNova Medicines; farletuzumab ecteribulin: Eisai; HSP47: Nitto Denko Corporation; rHuPH20: Halozyme; MAGEA4/8 TCER: Immatics; milvexian: Janssen Pharmaceuticals, Inc.; OPDIVO, YERVOY, OPDUALAG in Japan: Ono; PKCθ Inhibitor: Exscientia; REBLOZYL: Merck; SHP2 Inhibitor: BridgeBio Pharma; TIGIT Bispecific: Agenus

Changes to the Development Pipeline - Q2 2023

	Phase I	Phase II	Phase III	Registrational Submissions (n=2)
New or Phase Transition			<ul style="list-style-type: none"> Reblozyl in 1L NTD MDS Associated Anemia Sotyktu in Sjögren's Syndrome 	<ul style="list-style-type: none"> REBLOZYL in 1L TD MDS associated Anemia (US, EU, JP) repotrectinib in ROS1+ NSCLC (US)
Removed	<ul style="list-style-type: none"> BCMA ADC CD3xPSCA 			Approvals (n=3)* <ul style="list-style-type: none"> BREYANZI in 2L LBCL (EU) CAMZYOS in symptomatic NYHA class II-III oHCM (EU) OPDIVO in Neo-adjuvant NSCLC (EU)

*The U.S. FDA approved the sNDA to add positive data from the Phase 3 VALOR-HCM trial to the U.S. prescribing information for Camzyos

■ Oncology
 ■ Hematology
 ■ CV
 ■ Immunology
 ■ Neuroscience

Q2 2023 Late-Stage Drug Development Clinical Trials Update

Oncology	Hematology	Cell Therapy	Immunology	Cardiovascular
<u>Opdivo</u>	<u>iberdomide</u>	<u>Breyanzi</u>	<u>cendakimab</u>	<u>milvexian</u>
<u>Opdualag</u>	<u>mezigdomide</u>	<u>Abecma</u>	<u>LPA1 antagonist</u>	<u>Camzyos</u>
<u>repotrectinib</u>	<u>Reblozyl</u>		<u>Sotyktu</u>	
	<u>Onureg</u>		<u>Zeposia</u>	
	<u>alnuctamab</u>			



Opdivo (anti-PD1)

Lung Cancer Trials

Indication

Peri-Adjuvant NSCLC

Stage IB-IIIa Adjuvant NSCLC

Stage III Unresectable NSCLC

Phase/Study	Phase III - CheckMate -77T	Phase III - ANVIL Non-BMS Sponsored*	Phase III - CheckMate -73L
# of Patients	N = 452	N = 903	N = 888
Design	<ul style="list-style-type: none">• Neoadjuvant Opdivo + PDCT followed by adjuvant Opdivo• Neoadjuvant placebo + PDCT followed by placebo	<ul style="list-style-type: none">• Opdivo Q4W• Observation (patients followed serially with imaging for 1 year)	<ul style="list-style-type: none">• Opdivo + CCRT followed by Opdivo + Yervoy• Opdivo + CCRT followed by Opdivo• CCRT followed by durvalumab
Endpoints	<ul style="list-style-type: none">• Primary: EFS• Key secondary: OS	<ul style="list-style-type: none">• Primary: DFS, OS	<ul style="list-style-type: none">• Primary: PFS• Key secondary: OS
Status	<ul style="list-style-type: none">• Projected data readout 2024	<ul style="list-style-type: none">• Projected data readout 2025	<ul style="list-style-type: none">• Projected data readout 2025
CT Identifier	<u>NCT04025879</u>	<u>NCT02595944</u>	<u>NCT04026412</u>





Opdivo (anti-PD1)

Early-Stage Trials

Indication	Adjuvant Melanoma	Peri-Adjuvant MIUC	Adjuvant HCC
Phase/Study	Phase III - CheckMate -76K - Stage IIB/C	Phase III - CA 017-078	Phase III - CheckMate -9DX
# of Patients	N = 790	N = 861	N = 545
Design	<ul style="list-style-type: none">Opdivo 480 mg Q4WPlacebo	<ul style="list-style-type: none">Opdivo 360 mg Q3W for four cycles + chemotherapyChemotherapy	<ul style="list-style-type: none">Opdivo 480 mg Q4WPlacebo
Endpoints	<ul style="list-style-type: none">Primary: RFSKey secondary: OS	<ul style="list-style-type: none">Primary: pCR, EFSKey secondary: OS	<ul style="list-style-type: none">Primary: RFSKey secondary: OS
Status	<ul style="list-style-type: none">U.S. PDUFA October 13, 2023Data presented as Late Breaker at SMR 2022EU Positive CHMP Opinion	<ul style="list-style-type: none">Projected data readout 2024	<ul style="list-style-type: none">Projected data readout 2025
CT Identifier	<u>NCT04099251</u>	<u>NCT03661320</u>	<u>NCT03383458</u>





Opdivo (anti-PD1)

Metastatic Trials

Indication	1L MIUC	2L RCC SC	1L HCC	1L+ MSI High CRC
Phase/Study	Phase III - CheckMate -901	Phase III - CheckMate -67T	Phase III - CheckMate -9DW	Phase III - CheckMate -8HW
# of Patients	N = 1,290	N = 454	N = 732	N = 831
Design	<ul style="list-style-type: none"> PD-L1+ & cis-ineligible: Opdivo 1 mg/kg + Yervoy 3 mg/kg Q3W up to 4 cycles followed by Opdivo 480 mg Q4W vs SOC chemotherapy Cis-eligible: Opdivo 360 mg in combination with chemotherapy Q3W vs SOC chemotherapy 	<ul style="list-style-type: none"> Opdivo + rHuPH20 SC Opdivo IV 	<ul style="list-style-type: none"> Opdivo + Yervoy sorafenib/lenvatinib 	<ul style="list-style-type: none"> Opdivo Opdivo + Yervoy Chemotherapy
Endpoints	Primary: <ul style="list-style-type: none"> PFS, OS in cis-eligible patients OS in PD-L1+ ($\geq 1\%$) & cis-ineligible 	Primary: <ul style="list-style-type: none"> Cavgd28 (Opdivo serum concentration) Cminss Key secondary: ORR 	<ul style="list-style-type: none"> Primary: OS Key secondary: ORR 	Primary: <ul style="list-style-type: none"> PFS Arm B vs. A, all lines PFS Arm B vs. C, first line Key secondary: ORR, OS
Status	<ul style="list-style-type: none"> Projected data readout 2024 in cis-ineligible Positive topline results in cis-eligible in July 2023 Did not meet primary OS endpoint in PD-L1+ 	<ul style="list-style-type: none"> Projected data readout 2023 	<ul style="list-style-type: none"> Projected data readout 2025 	<ul style="list-style-type: none"> Projected data readout 2025
CT Identifier	NCT03036098	NCT04810078	NCT04039607	NCT04008030





Opdualag (anti-LAG3 + anti-PD1 FDC)

Indication

Adjuvant Melanoma

1L Melanoma SC

2L/3L+ MSS mCRC

Phase/Study	Phase III - RELATIVITY-098	Phase III - RELATIVITY-127	Phase III - RELATIVITY-123
# of Patients	N = 1050	N = 814	N = 700
Design	<ul style="list-style-type: none"> • Relatlimab + nivolumab FDC 160 mg/480 mg Q4W • Nivolumab 480mg Q4W 	<ul style="list-style-type: none"> • Relatlimab + nivolumab + rHuPH20 FDC SC • Relatlimab + nivolumab FDC IV 	<ul style="list-style-type: none"> • Relatlimab + nivolumab FDC • Investigator's Choice: regorafenib or TAS-102 (trifluridine/tipiracil)
Endpoints	<ul style="list-style-type: none"> • Primary: RFS • Key secondary: OS 	Primary: <ul style="list-style-type: none"> • Cavgd28 of nivolumab; Cminss of nivolumab • Cavgd28 of relatlimab; Cminss of relatlimab <ul style="list-style-type: none"> • Key secondary: ORR 	Primary : <ul style="list-style-type: none"> • OS in PD-L1 CPS\geq1 • OS in all-comers <ul style="list-style-type: none"> • Key secondary: ORR
Status	<ul style="list-style-type: none"> • Projected data readout 2026 	<ul style="list-style-type: none"> • Recruiting • Projected data readout 2025 	<ul style="list-style-type: none"> • Projected data readout 2025
CT Identifier	<u>NCT05002569</u>	<u>NCT05625399</u>	<u>NCT05328908</u>





Opdualag (anti-LAG3 + anti-PD1 FDC)

Indication

1L HCC

2L+ HCC (Post TKI)

1L Stage IV NSCLC

Phase/Study	Phase I/II - RELATIVITY-106	Phase II - CA224-073	Phase II - CA224-104
# of Patients	N = 162	N = 250	N = 420
Design	<ul style="list-style-type: none">• Nivolumab + relatlimab + bevacizumab• Nivolumab + placebo + bevacizumab	<ul style="list-style-type: none">• Nivolumab + relatlimab Dose 1• Nivolumab + relatlimab Dose 2• Nivolumab	<p>Part I:</p> <ul style="list-style-type: none">• Nivolumab + relatlimab Dose 1 + PDCT• Nivolumab + relatlimab Dose 2 + PDCT <p>Part II:</p> <ul style="list-style-type: none">• Nivolumab + relatlimab Dose 2 + PDCT• Nivolumab + PDCT
Endpoints	Primary: DLTs, ORR	<ul style="list-style-type: none">• Primary: ORR	<p>Primary:</p> <ul style="list-style-type: none">• Part I: TRAEs leading to discontinuation within 12 weeks after first dose• Part II: ORR
Status	<ul style="list-style-type: none">• Recruiting• Projected data readout 2024	<ul style="list-style-type: none">• Projected data readout 2024	<ul style="list-style-type: none">• Recruiting• Projected data readout YE 2023/2024
CT Identifier	<u>NCT05337137</u>	<u>NCT04567615</u>	<u>NCT04623775</u>





repotrectinib (ROS1/NTRK)

Indication

ROS1 NSCLC & NTRK+ Solid Tumors

Phase/Study	Phase I/II - TRIDENT-1
# of Patients	N = 500
Design	<p>Phase I:</p> <ul style="list-style-type: none">• Dose escalation; food-effect, dose escalation with food; & Midazolam DDI <p>Phase II: Expansion cohorts</p> <ul style="list-style-type: none">• ROS1 TKI-naïve ROS1+ NSCLC 160 mg QD for the first 14 days, then 160 mg BID^a• 1 Prior ROS1 TKI and 1 Platinum based chemo ROS1+ NSCLC• 2 Prior ROS1 TKIs ROS1+ NSCLC (No Chemo or I-O)• 1 Prior ROS1 TKI ROS1+ NSCLC (No Chemo or I-O)• TRK TKI-naïve NTRK+ solid tumors• TRK TKI-pretreated NTRK+ solid tumors
Endpoints	<p>Primary:</p> <ul style="list-style-type: none">• Phase I: DLTs, RP2D• Phase II: ORR <p>Key Secondary</p> <ul style="list-style-type: none">• Phase II: DOR, IC-ORR
Status	<ul style="list-style-type: none">• Recruiting• U.S. FDA Priority Review in ROS1+ NSCLC: PDUFA November 27, 2023
CT Identifier	<u>NCT03093116</u>





iberdomide (CELMoD)

Indication

2L+ MM

Post-Transplant Maintenance NDMM

Phase/Study	Phase III - EXCALIBER	Phase III - EXCALIBER-Maintenance
# of Patients	N = 864	N = 1,216
Design	<ul style="list-style-type: none">Iberdomide 1.0, 1.3, 1.6 mg + daratumumab 1800 mg + dex 40 mg - (iberDd)Daratumumab 1800 mg + bortezomib 1.3 mg/m²^a + dex 20 mg^a - (DVd)	<ul style="list-style-type: none">Iberdomide Dose 0.75, 1.0, 1.3 mgLenalidomide 10 mg
Endpoints	<ul style="list-style-type: none">Primary: PFSKey secondary: OS	<ul style="list-style-type: none">Primary: PFSKey Secondary: MRD, OS
Status	<ul style="list-style-type: none">RecruitingProjected data readout 2027	<ul style="list-style-type: none">RecruitingProjected data readout 2029
CT Identifier	<u>NCT04975997</u>	<u>NCT05827016</u>



Reblozyl (Erythroid Maturation Agent)

Indication

1L TD Myelodysplastic Syndrome (MDS)
Associated Anemia

1L TD Myelofibrosis (MF)
Associated Anemia

Phase/Study	Phase III - COMMANDS	Phase III - INDEPENDENCE
# of Patients	N = 362	N = 309
Design	<ul style="list-style-type: none">Reblozyl 1.0 mg/kg SC Q3WEpoetin Alfa 450 IU/kg SC QW	<ul style="list-style-type: none">Reblozyl 1.33 mg/kg SC Q3W + Best Supportive CarePlacebo SC Q3W + Best Supportive Care
Endpoints	<ul style="list-style-type: none">Primary: RBC-TI for 12 weeks with a mean hemoglobin increase ≥ 1.5 g/dL through week 24	<ul style="list-style-type: none">Primary: RBC-TI during any consecutive 12-week period starting within the first 24 weeksKey secondary: RBC-TI ≥ 16 weeks (RBC-TI 16)
Status	<ul style="list-style-type: none">U.S. FDA Priority Review: PDUFA August 28, 2023Application filed in EU & JapanData presented at ASCO & EHA 2023	<ul style="list-style-type: none">RecruitingExpected data readout 2025
CT Identifier	<u>NCT03682536</u>	<u>NCT04717414</u>





Reblozyl (Erythroid Maturation Agent)

Indication

TD & NTD Alpha-Thalassemia (Ex-US study)

1L NTD Myelodysplastic Syndrome (MDS) Associated Anemia

Phase/Study	Phase II - CA056-015	Phase III - ELEMENT-MDS
# of Patients	N = 177	N = 360
Design	<ul style="list-style-type: none">Reblozyl 1.0 mg/kg SC Q3WPlacebo SC Q3W + Best Supportive Care	<ul style="list-style-type: none">Reblozyl 1.0 mg/kg SC Q3WEpoetin Alfa 450 IU/kg SC QW
Endpoints	<p>Primary:</p> <ul style="list-style-type: none">TD: $\geq 50\%$ reduction in TF burden over any rolling 12 weeks between W13-W48NTD: ≥ 1 g/dL Hb mean increase from baseline in W13-W24 <p>Key secondary:</p> <ul style="list-style-type: none">TD: No. of participants with $\geq 33\%$ reduction from baseline in RBC transfusion burdenNTD: Change from baseline to W24 in hemoglobin in the absence of transfusion	<p>Primary:</p> <ul style="list-style-type: none">Proportion of participants during Wk 1-96 who convert to TD (≥ 3 units/16 weeks per IWG 2018) <p>Key secondary:</p> <ul style="list-style-type: none">Mean hemoglobin increase ≥ 1.5 g/dL + TI for at least 16 wks during Wk 1-48
Status	<ul style="list-style-type: none">RecruitingExpected data readout 2025	<ul style="list-style-type: none">Trial initiatingExpected data readout 2027
CT Identifier	<u>NCT05664737</u>	<u>NCT05949684</u>





mezigdomide (CELMoD)

Indication

2L+ MM

2L+ MM

Phase/Study	Phase III - SUCCESSOR-1	Phase III - SUCCESSOR-2
# of Patients	N = 810	N = 575
Design	<ul style="list-style-type: none">• Mezigdomide 0.3, 0.6, 1.0 mg + bortezomib 1.3 mg/m²^a + dex 20 mg - (MeziVd)• Pomalyst 4 mg + bortezomib 1.3 mg/m²^a + dex 20 mg - (PVd)	<ul style="list-style-type: none">• Mezigdomide 0.3, 0.6, 1.0 mg + carfilzomib 56 mg/m²^b + dex 40 mg^b - (MeziKd)• Carfilzomib 56 mg/m²^a + dex 20 mg^a - (Kd)
Endpoints	<ul style="list-style-type: none">• Primary: PFS• Key secondary: OS	<ul style="list-style-type: none">• Primary: PFS• Key secondary: OS
Status	<ul style="list-style-type: none">• Recruiting• Projected data readout 2026	<ul style="list-style-type: none">• Recruiting• Projected data readout 2026
CT Identifier	<u>NCT05519085</u>	<u>NCT05552976</u>



Onureg (Hypomethylating Agent)

Indication

(IPSS-R) Low-or Intermediate Risk MDS

Phase/Study	Phase II/III - METEOROID
# of Patients	N = 230
Design	<ul style="list-style-type: none">• Onureg 200 mg, 300 mg in Phase II + Best Supportive Care• Onureg RP3D in Phase III + Best Supportive Care• Placebo
Endpoints	<p>Primary:</p> <ul style="list-style-type: none">• Safety & Tolerability & RP3D (Phase II)• Achieved Complete Remission per IWG 2006 within 6 cycles (Phase II & III) <p>Key Secondary:</p> <ul style="list-style-type: none">• 84-day pRBC TI (Phase II & III)
Status	<ul style="list-style-type: none">• Recruiting• Projected data readout 2026
CT Identifier	<u>NCT05469737</u>





alnuctamab (BCMA x CD3 T-Cell Engager)

Indication

4L+ MM

Phase/Study	Phase I - CC-93269-MM-001
# of Patients	N = 220
Design	<ul style="list-style-type: none">alnuctamab 10, 30, 60 mg SC
Endpoints	Primary: <ul style="list-style-type: none">RP2DSafety and tolerability
Status	<ul style="list-style-type: none">Data presented at ASH 2022Projected data readout 2027
CT Identifier	<u>NCT03486067</u>





Breyanzi (CD 19 CAR T)

Indication

R/R NHL

R/R iNHL

3L+ CLL

Phase/Study	Phase I/II - TRANSCEND	Phase II - TRANSCEND FL	Phase II - TRANSCEND CLL
# of Patients	N = 385	N = 213	N = 209
Design	<ul style="list-style-type: none">Breyanzi Dose 1Breyanzi Dose 2 <p>Note: Study included R/R DLBCL, MCL, FL 3B, & PMBCL</p>	<ul style="list-style-type: none">Breyanzi <p>iNHL includes 3L+ FL, 2L FL (high risk), 3L+ MZL</p>	<ul style="list-style-type: none">BreyanziBreyanzi + ibrutinibBreyanzi + venetoclax
Endpoints	<ul style="list-style-type: none">Primary: ORR	<ul style="list-style-type: none">Primary: ORR	<ul style="list-style-type: none">Primary: CRR
Status	<ul style="list-style-type: none">MCL data presented as Late Breaker at ICML 2023Projected data readout 2024 in MCL	<ul style="list-style-type: none">Recruiting 3L+ MZLPositive topline results in R/R FL in April 2023Data presented as Late Breaker at ICML 2023 in R/R FLProjected data readout 2025 in 3L+ MZL	<ul style="list-style-type: none">Met primary endpoint in monotherapy arm in January 2023Data presented at ASCO 2023
CT Identifier	<u>NCT02631044</u>	<u>NCT04245839</u>	<u>NCT03331198</u>





Abecma (BCMA CAR T)

Indication

1L-4L+ MM

3L-5L MM

Phase/Study	Phase II - KarMMa-2	Phase III - KarMMa-3
# of Patients	N = 235	N = 381
Design	<ul style="list-style-type: none"> Cohort 1: ≥ 3 prior regimens Cohort 2a: 1L with ASCT & relapsed within 18 months Cohort 2b: 1L excluding ASCT & relapsed within 18 months Cohort 2c: inadequate response post ASCT during initial treatment Cohort 3: inadequate response post ASCT, with Revlimid maintenance therapy 	<ul style="list-style-type: none"> Abecma Standard regimens as per Investigator's discretion <ul style="list-style-type: none"> - DPd, DVd, IRd, Kd, EPd
Endpoints	<ul style="list-style-type: none"> Primary: ORR, CRR 	<ul style="list-style-type: none"> Primary: PFS Key secondary: OS
Status	<ul style="list-style-type: none"> Recruiting Data presented at ASH 2022 on cohorts 2a and 2c 	<ul style="list-style-type: none"> Data presented at EHA EBMT 2023 Published in NEJM February 2023 U.S. PDUFA December 16, 2023 Application under review in EU & Japan
CT Identifier	<u>NCT03601078</u>	<u>NCT03651128</u>





cendakimab (anti-IL13)

Indication

Eosinophilic Esophagitis (EoE)

Phase/Study	Phase III - CC-93538-EE-001
# of Patients	N = 399
Design	<ul style="list-style-type: none">• Cendakimab 360 mg SC QW for 24 wks, followed by 360 mg SC QW for 24 wks• Cendakimab 360 mg SC QW for 24 wks, followed by 360 mg SC Q2W for 24 wks• Placebo
Endpoints	<p>Primary:</p> <ul style="list-style-type: none">• Change in Dysphagia Days (Clinical Response) at Week 24• Eosinophil Histologic Response (≤ 6/hpf) at Week 24
Status	<ul style="list-style-type: none">• Expected data readout 2024
CT Identifier	<u>NCT04753697</u>





LPA₁ antagonist

Indication

Pulmonary Fibrosis

Phase/Study	Phase II - IM027-040
# of Patients	N = 373
Design	<p>Cohort 1 IPF:</p> <ul style="list-style-type: none">• LPA₁ 30 mg BID + post treatment follow-up or optional treatment extension• LPA₁ 60 mg BID + post treatment follow-up or optional treatment extension• IPF Placebo + post treatment follow-up or optional treatment extension <p>Cohort 2 PPF:</p> <ul style="list-style-type: none">• LPA₁ 30 mg BID + post treatment follow-up or optional treatment extension• LPA₁ 60 mg BID + post treatment follow-up or optional treatment extension• PF-ILD (PPF) Placebo + post treatment follow-up or optional treatment extension
Endpoints	<ul style="list-style-type: none">• Primary: Rate of change in percent predicted forced vital capacity (ppFVC) in IPF participants
Status	<ul style="list-style-type: none">• Achieved PoC in IPF in 2022 & in PPF in May 2023• IPF data presented as Late Breaker at ATS 2023
CT Identifier	<u>NCT04308681</u>





Sotyktu (TYK-2 inhibitor)

Indication

Psoriatic Arthritis (PsA)

Phase/Study	Phase III - POETYK-PsA-1	Phase III - POETYK-PsA-2
# of Patients	N = 650	N = 700
Design	52-week study of patients with active PsA in TNF-naïve patients <ul style="list-style-type: none">• Sotyktu 6 mg QD• Placebo	52-week study of patients with active PsA in TNF-naïve and TNF-IR patients <ul style="list-style-type: none">• Sotyktu 6 mg QD• Placebo• Apremilast
Endpoints	<ul style="list-style-type: none">• Primary: % pts achieving ACR20 response at Week 16	<ul style="list-style-type: none">• Primary: % pts achieving ACR20 response at Week 16
Status	<ul style="list-style-type: none">• Recruiting• Expected data readout 2025 (52 wks)	<ul style="list-style-type: none">• Recruiting• Expected data readout 2024 (52 wks)
CT Identifier	<u>NCT04908202</u>	<u>NCT04908189</u>





Sotyktu (TYK-2 inhibitor)

Indication Systemic Lupus Erythematosus (SLE) Discoid Lupus Erythematosus (DLE) Sjogren's (SjS)

Phase/Study	Phase III - POETYK SLE-1	Phase III - POETYK SLE-2	Phase II - IM011-132	Phase III - POETYK SjS-1
# of Patients	N = 490	N = 490	N = 75	N = 756
Design	<ul style="list-style-type: none"> • Sotyktu • Placebo 	<ul style="list-style-type: none"> • Sotyktu • Placebo 	52-week study: <ul style="list-style-type: none"> • Sotyktu Dose 1 • Sotyktu Dose 2 • Placebo 	<ul style="list-style-type: none"> • Sotyktu Dose 1 • Sotyktu Dose 2 • Placebo
Endpoints	<ul style="list-style-type: none"> • Primary: Proportion of participants who meet response criteria SRI-4 at week 52 	<ul style="list-style-type: none"> • Primary: Proportion of participants who meet response criteria SRI-4 at week 52 	<ul style="list-style-type: none"> • Primary: Change from baseline in CLASI-A activity score at week 16 	<ul style="list-style-type: none"> • Primary: Change from baseline in ESSDAI at week 52
Status	<ul style="list-style-type: none"> • Recruiting • Expected data readout 2026 	<ul style="list-style-type: none"> • Recruiting • Expected data readout 2026 	<ul style="list-style-type: none"> • Recruiting • Expected data readout 2025 	<ul style="list-style-type: none"> • Trial Initiating • Expected data readout 2026
CT Identifier	NCT05617677	NCT05620407	NCT04857034	NCT05946941





Sotyktu (TYK-2 inhibitor)

Indication

Alopecia Areata (AA)

Phase/Study	Phase II - IM011-134
# of Patients	N = 90
Design	<ul style="list-style-type: none">• Sotyktu Dose 1• Sotyktu Dose 2• Placebo, followed by Sotyktu Dose 1 or Dose 2
Endpoints	<ul style="list-style-type: none">• Primary: Change from baseline in SALT score at Week 24
Status	<ul style="list-style-type: none">• Expected data readout 2024
CT Identifier	NCT05556265





Sotyktu (TYK2 inhibitor)

Indication

Crohn's Disease (CD) Moderate to Severe

Ulcerative Colitis (UC) Moderate to Severe

Phase/Study	Phase II - LATTICE-CD	Phase II - IM011-127
# of Patients	N = 241	N = 38
Design	<ul style="list-style-type: none">• Sotyktu Dose 3 mg BID• Sotyktu Dose 6 mg BID• Placebo	<ul style="list-style-type: none">• Sotyktu (High Dose)• Placebo
Endpoints	<p>Primary:</p> <ul style="list-style-type: none">• Proportion of pts achieving clinical remission at week 12• Proportion of pts achieving endoscopic response at week 12	<ul style="list-style-type: none">• Primary: Proportion of participants in clinical response at Week 12
Status	<ul style="list-style-type: none">• POC not achieved; awaiting higher dose UC Ph2 data to inform future IBD development plans	<ul style="list-style-type: none">• Expected data readout in 2H 2023
CT Identifier	<u>NCT03599622</u>	<u>NCT04613518</u>





Zeposia (S1P agonist)

Indication

YELLOWSTONE Program: Crohn's Disease (CD) - Moderate to Severe

Phase/Study	Phase III - RPC01-3201 (Induction 1)	Phase III - RPC01-3202 (Induction 2)	Phase III - RPC01-3203 (Maintenance)
# of Patients	N = 600	N = 600	N = 485
Design	<ul style="list-style-type: none">• Zeposia 0.92 mg QD• Placebo	<ul style="list-style-type: none">• Zeposia 0.92 mg QD• Placebo	<ul style="list-style-type: none">• Zeposia 0.92 mg QD• Placebo
Endpoints	<ul style="list-style-type: none">• Primary: Proportion of pts in clinical remission (CDAI* score < 150) at week 12	<ul style="list-style-type: none">• Primary: Proportion of pts in clinical remission (CDAI* score < 150) at week 12	<p>Primary:</p> <ul style="list-style-type: none">• Proportion of pts in clinical remission (CDAI score of < 150) at week 52• Proportion of pts with a Simple Endoscopic Score for Crohn's Disease (SES-CD) decrease of ≥ 50% at week 52
Status	<ul style="list-style-type: none">• Recruiting• Expected data readout 2024	<ul style="list-style-type: none">• Recruiting• Expected data readout 2024	<ul style="list-style-type: none">• Recruiting• Expected data readout 2025 (52 wks post induction & basis for filing)
CT Identifier	<u>NCT03440372</u>	<u>NCT03440385</u>	<u>NCT03464097</u>





milvexian (FXIa inhibitor)

Indication	Secondary Stroke Prevention	Acute Coronary Syndrome	Non-Valvular Atrial Fibrillation
Phase/Study	Phase III - LIBREXIA-STROKE Non-BMS Sponsored*	Phase III - LIBREXIA-ACS Non-BMS Sponsored*	Phase III - LIBREXIA-AF Non-BMS Sponsored*
# of Patients	N = 15,000	N = 16,000	N = 15,500
Design	<ul style="list-style-type: none"> Milvexian 25 mg BID + background antiplatelet therapy Placebo + background antiplatelet therapy 	<ul style="list-style-type: none"> Milvexian + background antiplatelet therapy Placebo + background antiplatelet therapy <p>Note: participants enrolled within 7 days of ACS +/- catheterization</p>	<ul style="list-style-type: none"> Milvexian Eliquis
Endpoints	<ul style="list-style-type: none"> Primary: Time to first occurrence of ischemic stroke <p>Key secondary:</p> <ul style="list-style-type: none"> Time to first occurrence of any component of the composite of CVD, MI, or ischemic stroke Time to first occurrence of ischemic stroke 	<ul style="list-style-type: none"> Primary: Time to first occurrence of MACE <p>Key secondary:</p> <ul style="list-style-type: none"> Time to first occurrence of any component of the composite of MAVE 	<ul style="list-style-type: none"> Primary: Time to first occurrence of composite endpoint of stroke & non-CNS system embolism <p>Key secondary:</p> <ul style="list-style-type: none"> Time to first occurrence of ISTH major bleeding Time to first occurrence of the composite of ISTH major & CRNM bleeding
Status	<ul style="list-style-type: none"> Recruiting Projected data readout 2026 (event driven) 	<ul style="list-style-type: none"> Recruiting Projected data readout 2026 (event driven) 	<ul style="list-style-type: none"> Recruiting Projected data readout 2027 (event driven)
CT Identifier	<u>NCT05702034</u>	<u>NCT05754957</u>	<u>NCT05757869</u>





Camzyos (myosin inhibitor)

Indication **Heart Failure with Preserved Ejection Fraction (HFpEF)** **Non-Obstructive Hypertrophic Cardiomyopathy (nHCM)**

Phase/Study	Phase II - EMBARK	Phase III - ODYSSEY-HCM
# of Patients	N = 35	N = 420
Design	<ul style="list-style-type: none">• Camzyos	<ul style="list-style-type: none">• Camzyos• Placebo
Endpoints	Primary: <ul style="list-style-type: none">• TEAEs and SAEs• Effect on NT-proBNP levels• Effect on cTnT levels (at rest)	Primary: <ul style="list-style-type: none">• Change from baseline in Clinical Summary Score (KCCQ-23 CSS) at Week 48• Change from baseline in peak oxygen consumption (pVO2) at Week 48 Secondary: Change from baseline in VE/VCO2 slope to Week 52
Status	<ul style="list-style-type: none">• Projected data readout 2023/2024	<ul style="list-style-type: none">• Recruiting• Projected data readout 2025
CT Identifier	<u>NCT04766892</u>	<u>NCT05582395</u>

Abbreviations

AA	Alopecia Areata	EoE	Eosinophilic Esophagitis	MTD	Maximum Tolerated Dose	RP3D	Recommended Phase 3 Dose
AACR	American Association for Cancer Research	ESA	Erythropoietin Stimulating Agents	MZL	Marginal Zone Lymphoma	ROS	C-ROS Oncogene
Adj	Adjuvant	ESCC	Esophageal Squamous Cell Carcinoma	nHCM	Non-Obstructive Hypertrophic Cardiomyopathy	RR	Relapsed Refractory
AE	Adverse Event	FDC	Fixed Dose Combination	ND	Newly Diagnosed	SAE	Serious Adverse Event
AHA	American Heart Association	FDA	Food & Drug Administration	NSCLC	Non-Small Cell Lung Cancer	SC	Subcutaneous
AML	Acute Myeloid Leukemia	FL	Follicular Lymphoma	NTD	Non-Transfusion Dependent	SCT	Stem Cell Transplant
ASH	American Society of Hematology	Hb	Hemoglobin	NTRK	Neurotrophic Tyrosine Receptor Kinase	SLE	Systemic Lupus Erythematosus
BCMA	B-Cell Maturation Antigen	HCC	Hepatocellular Carcinoma	NYHA	New York Health Association	SoC	Standard of Care
BID	Twice a Day	HFpEF	Heart Failure w/ Preserved Ejection Fraction	oHCM	Obstructive Hypertrophic Cardiomyopathy	sPGA	Static Physicians Global Assessment
BIW	Twice a Week	iNHL	Indolent Non-Hodgkin's Lymphoma	ORR	Overall Response Rate	SRI	Systemic Lupus Responder Index
CAR T	Chimeric Antigen Receptor Therapy	I-O	Immuno-Oncology	OS	Overall Survival	SRT	Septal Reduction Therapy
CCRT	Concurrent Chemoradiation Therapy	IPSS-R	International Prognostic Scoring System	PASI	Psoriasis Area and Severity Index	SSP	Secondary Stroke Prevention
CD	Crohn's Disease	IV	Intravenous	pCR	Pathological Complete Response	SubQ/SC	Subcutaneous
CDAI	Crohn's Disease Activity Index	LBCL	Large B-Cell Lymphoma	PDCT	Platinum-Based Chemotherapy	TD	Transfusion Dependent
CLL	Chronic Lymphocytic Leukemia	LVOT	Left Ventricular Outflow Tract	PDL	Programmed Death Ligand	TE	Transplant Eligible
CM	Checkmate	mCRPC	Metastatic Castration-Resistant Prostate Cancer	PDUFA	Prescription Drug User Fee Act	TEAE	Treatment Emergent Adverse Events
CR	Complete Response	MDS	Myelodysplastic Syndrome	PF	Pulmonary Fibrosis	TKI	Tyrone Kinase Inhibitor
CRR	Complete Remission Rate	mDSD	modified Daily Symptom Diary	PFS	Progression Free Survival	TRAE	Treatment Related Adverse Events
CRC	Colorectal Cancer	Mel	Melanoma	POC	Proof of Concept	TE	Transplant Eligible
DFS	Disease-free survival	MF	Myelofibrosis	PsA	Psoriatic Arthritis	TNF	Tumor Necrosis Factor
DLBCL	Diffuse Large B-Cell Lymphoma	MIUC	Muscle Invasive Urothelial Cancer	PsO	Psoriasis	UC	Ulcerative Colitis
DLE	Discoid Lupus Erythematosus	MM	Multiple Myeloma	QD	Once Daily	VO2	Volume of Oxygen
DLT	Dose Limiting Toxicity	MR	Minimal Response	QW	Once Weekly		
EADV	European Academy of Dermatology and Venereology	MS	Multiple Sclerosis	RBC-TI	Red Blood Cell Transfusion Independence		
EASI	Eczema Area & Severity Index	MSI-H	High Microsatellite Instability	RCC	Renal Cell Carcinoma		
EFS	Event Free Survival	MSS	Microsatellite Stable	RFS	Recurrence-free survival		
				RP2D	Recommended Phase 2 Dose		