



43rd Annual J.P. Morgan Healthcare Conference

Christopher Boerner, Ph.D., Board Chair and Chief Executive Officer

January 13th, 2025

Forward Looking Statements and Non-GAAP Financial Information

This presentation (as well as the oral statements made with respect to the information contained in 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 or other financial measures 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 a substitute 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 measures, including non-GAAP Earnings per share (EPS), to the most directly comparable GAAP measures is not provided because comparable GAAP measures 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 accelerated depreciation and impairment charges, legal and other settlements, gains and losses from equity investments and other adjustments. 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.

The next chapter for BMS comes into focus

January 2024

- Outlined journey to deliver sustained top-tier growth by end of the decade
- Highlighted enablers:
 - Performance of **key growth brands**
 - Delivery of **mid-late-stage pipeline assets**
- Focused on **importance of execution**

Today

- **Key first and/or best in class medicines driving Growth Portfolio***
- **Entering data-rich period, with multiple registrational readouts to define pipeline potential**
- **Focusing on disciplined execution**

*See Appendix Slide for composition of Growth Portfolio

2024 execution has strengthened our foundation

- ✓ Advanced growth portfolio with **double-digit sales growth**

Expanded presence in key TAs

- ✓ Re-established **presence in neuroscience** with Cobenfy
- ✓ **Extended immuno-oncology portfolio durability** with Opdivo Qvantig
- ✓ Advanced **late-stage assets** with significant potential

Bolstered financial position

- ✓ **Successful integration** of strategic acquisitions
- ✓ Achieved majority of **~\$1.5 billion** productivity program and reinvested savings into high-ROI opportunities
- ✓ Progress towards **\$10 billion** debt pay down commitment¹



Stronger
portfolio,
pipeline &
financial
flexibility
entering 2025

1. Relative to the total debt level as of March 31, 2024

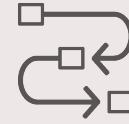
Overarching strategic focus: Achieve sustained top-tier growth by end of the decade



Focusing on transformational medicines in areas where we have a competitive advantage



Driving operational excellence throughout the organization



Strategically allocating capital for long-term growth and returns



Delivering breakthrough medicines to even more patients even faster and **compelling returns** to our shareholders

Focusing on transformational medicines where we have competitive advantages

	Key marketed products	Key Ph 2/3 programs	Investment priorities
Oncology/ Hematology	       	21	<ul style="list-style-type: none"> Protein degradation Cell therapy Complex biologics Radiopharmaceuticals
Cardiovascular	 	5	<ul style="list-style-type: none"> Thrombosis Cardiomyopathies Heart failure
Neuroscience	 	6	<ul style="list-style-type: none"> Neuropsychiatry Neurodegeneration
Immunology	 	8	<ul style="list-style-type: none"> Controlling inflammation Resetting immune memory Promoting homeostasis

40 Total

Five products key to Growth Portfolio performance

Reblozyl[®]
(luspatercept-aamt)
for injection 25mg • 75mg

- First-in-class treatment in 1L MDS anemia with broad label
- Potential MF anemia expansion with Phase 3 data expected in 2025*

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

- First-in-class treatment in oHCM
- nHCM expansion opportunity with Phase 3 data expected in 2025*

Breyanzi[™]
(lisocabtagene maraleucel)
SUSPENSION FOR IV INFUSION

- Best-in-class CD19 CAR-T across the broadest array of B-cell malignancies
- Expanded manufacturing capabilities to unlock full potential

Opdualag[™]
(nivolumab and relatlimab-rmbw)
Injection for intravenous use | 480 mg/160 mg

- First-in-class treatment, now a SoC in 1L melanoma
- Exploring indication expansions (e.g., 1L NSCLC)

COBENFY[™]
(xanomeline and trospium chloride) capsules
50mg/20mg, 100mg/20mg, 125mg/30mg

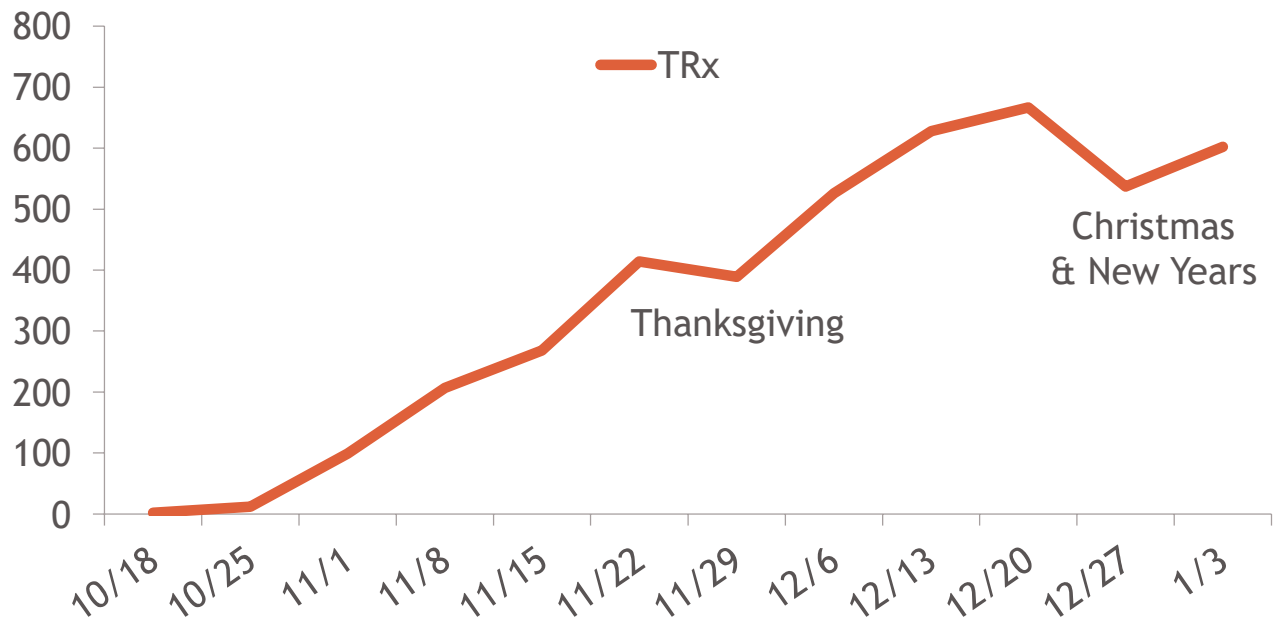
- Novel first-in-class schizophrenia treatment with multiple high potential expansion opportunities
- Launched late October 2024

Growth Portfolio expected to exceed 50% of revenues in 2025

*See "Forward-Looking Statements and Non-GAAP Financial Information."; MDS: myelodysplastic syndrome; MF: myelofibrosis; oHCM: obstructive hypertrophic cardiomyopathy; nHCM: non-obstructive hypertrophic cardiomyopathy; SoC: standard of care; NSCLC: non-small cell lung cancer

Cobenfy launch off to a strong start with the first indication for schizophrenia...

Cobenfy TRx



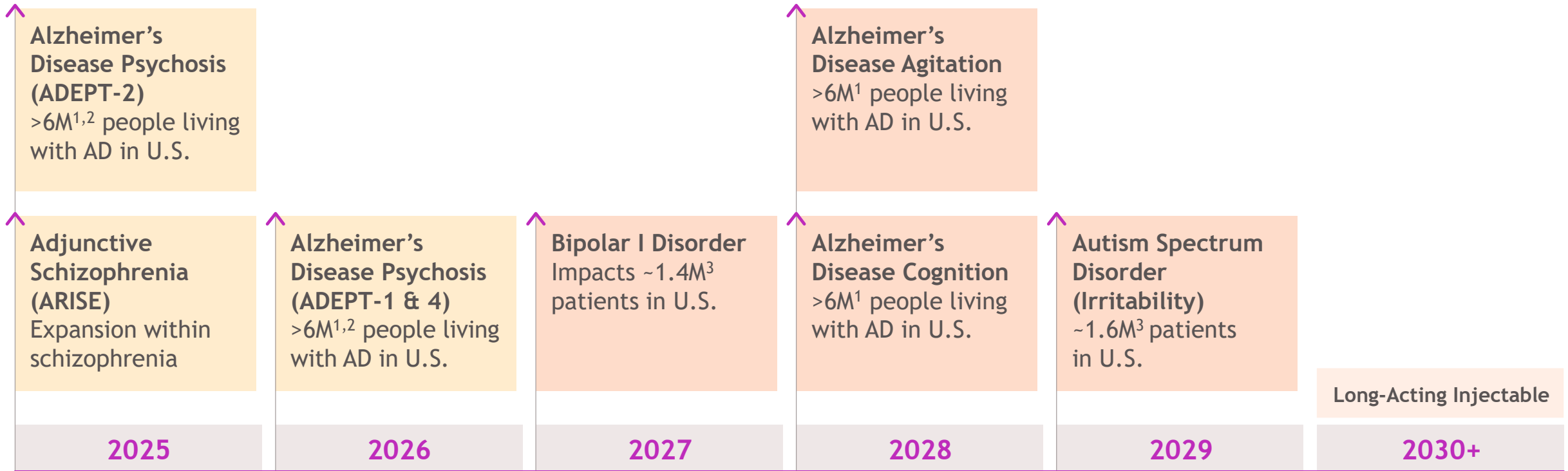
- 01** Consistent customer feedback highlights benefits of unique MoA across the three domains of schizophrenia
- 02** Cobenfy TRx performance is aligned to our expectations and ahead of branded schizophrenia launch benchmarks
- 03** Medicare & Medicaid coverage currently tracking ahead of expectations
- 04** Broader Commercial coverage expected in 2H25

“I had lots of hope for this medication, but no expectations. But now, I can’t wait to try it on more patients. These results are phenomenal. This medicine makes you a hero and doctors want to be heroes...” — *Dr. Parks in Cary, IL*

IQVIA Weekly NPA (Rapid) & APLD; Cobenfy’s TRx is overall indications without normalization; TRx are projected at national level

...with several potential indications with multi-billion-dollar peak sales over the decade

■ Ongoing registrational study readout
 ■ Planned registrational study readout



Expected clinical data readout every year through the end of the decade

*See "Forward-Looking Statements and Non-GAAP Financial Information." 1. "Alzheimer's Disease Association Facts and Figures," 2023. 2. Represents 40% of Alzheimer's disease 3. DRG - Clarivate, as of July 2023

Entering data rich period with multiple catalysts

2025-2027 key milestones*

LCM pivotal data

2025

- Reblozyl **TD MF Associated Anemia** (INDEPENDENCE)
- Opdualag **Adjuvant Melanoma** (RELATIVITY-098)
- CAMZYOS **nHCM** (ODYSSEY)
- Cobenfy **Adjunctive Schizophrenia** (ARISE)
- Cobenfy **Alzheimer's Disease Psychosis** (ADEPT-2)

2026

- Sotyktu **SLE** (POETYK SLE-1 & 2)
- Cobenfy **Alzheimer's Disease Psychosis** (ADEPT-4 & 1)

2027

- Milvexian **AF** (LIBREXIA)
- REBLOZYL **1L NTD MDS Associated Anemia** (ELEMENT)
- Sotyktu **Sjogren's Syndrome** (POETYK SjS-1)

NME registrational data

2026

- Milvexian **ACS & SSP** (LIBREXIA)
- Admilparant **IPF** (ALOFT-IPF)
- Iberdomide **RRMM** (EXCALIBER-RRMM)
- Mezigdomide **RRMM** (SUCCESSOR-1 & 2)
- Arlo-cel **RRMM** (QUINTESSENTIAL)
- RYZ101 **2L+ GEP-NETS** (ACTION-1)

2027

AR LDD **mCRPC** (rechARge)

Key next wave early-stage data

2025

- CD19 NEX-T **Autoimmune Diseases** (Breakfree-1 & 2)
- Krazati **1L NSCLC (TPS <50%)** (KRYSTAL-17)
- EGFR x HER3 ADC **Advanced Solid Tumors¹**
- RYZ101 **1L ES-SCLC**

2026

- Golcadomide **1L FL** (GOLSEEK-2)
- MYK-224 **HFpEF** (AURORA)

2027

Anti-MTBR-tau **Alzheimer's Disease** (TargetTau-1)

*See "Forward-Looking Statements and Non-GAAP Financial Information" NME: New Molecular Entity, LCM: Life Cycle Management 1: Trial conducted by SystImmune

CELMoDs: Potential to raise efficacy bar with highly potent protein degraders across hematologic malignancies

CELMoDs offer a tailored approach of combinable regimens across patient segments²

<p><i>Multiple Myeloma</i></p>	<p>Iberdomide & Mezigdomide</p>	<ul style="list-style-type: none"> • Potential new foundations in the multiple myeloma treatment landscape with four ongoing pivotal trials • Iberdomide has the potential to be a new SoC in NDMM as post-transplant maintenance • CELMoDs offer potential combinable novel regimens in RRMM including iberdomide with anti-CD38 antibodies & mezigdomide with proteasome inhibitors 	<p>→</p> <p>>30K transplant eligible NDMM patients in U.S./EU¹ Phase 3 data expected: 2029</p> <p>>70K RRMM patients in U.S./EU¹ Phase 3 data expected: 2026*</p>
<p><i>Lymphoma</i></p>	<p>Golcadomide</p>	<ul style="list-style-type: none"> • Evaluating novel golcadomide combination regimens across aggressive & indolent lymphomas • Ongoing pivotal trial evaluating golcadomide + R-CHOP in 1L high-risk LBCL 	<p>→</p> <p>>60K 1L LBCL patients in U.S./EU¹ Phase 3 data expected: 2028*</p>

Potential new oral options with compelling anti-tumor effects and immune stimulation

*See "Forward-Looking Statements and Non-GAAP Financial Information" 1. Decision Resource Group, BMS Internal Analysis - Treated Population; 2. Please refer to ct.gov details: NCT04975997; NCT05827016; NCT05519085; NCT05552976; NCT06356129

Milvexian: Potential to redefine anticoagulant therapy for thrombotic diseases

Focused on addressing unmet medical need across three large indications^{1,2}

<p>LIBREXIA-STROKE Secondary Stroke Prevention (25mg BID)</p>	<ul style="list-style-type: none"> • Combining with dual antiplatelet therapy • FXa's not used due to excess bleeding risk • Potential for improved efficacy (e.g., stroke) without increasing bleeding risk 	→	<p>~1.3 million patients in U.S./EU³ Phase 3 data expected: 2026*</p>
<p>LIBREXIA-ACS Acute Coronary Syndrome (25mg BID)</p>	<ul style="list-style-type: none"> • Similar underlying pathophysiology and treatment as stroke • FXa's not used due to excess bleeding risk • Potential for improved efficacy (e.g., CV death, MI) without increasing bleeding risk 	→	<p>~2 million patients in U.S./EU³ Phase 3 data expected: 2026*</p>
<p>LIBREXIA-AF Atrial Fibrillation (100mg BID)</p>	<ul style="list-style-type: none"> • Monotherapy agent vs. apixaban; only oral FXIa potential in AF • Potential for comparable efficacy with lower bleeding risk • ~40% of patients untreated or undertreated due to bleeding risk 	→	<p>~14 million patients in U.S./EU⁴ Phase 3 data expected: 2027*</p>

FXIa inhibition offers promising next-generation anticoagulant paradigm to improve patient care

*See "Forward-Looking Statements and Non-GAAP Financial Information" 1. Developed in partnership with Johnson & Johnson 2. Please refer to ct.gov details: NCT05702034; NCT05754957; NCT05757869 3. Decision Resource Group, BMS Internal Analysis; EU represents EU5 - Incidence 4. Decision Resource Group, BMS Internal Analysis - Diagnosed Prevalence

Admilparant (LPA1 antagonist): Potential to transform the treatment of pulmonary fibrosis

ALOFT-IPF & ALOFT-PPF²: Phase 3 registrational studies following a robust Phase 2 program

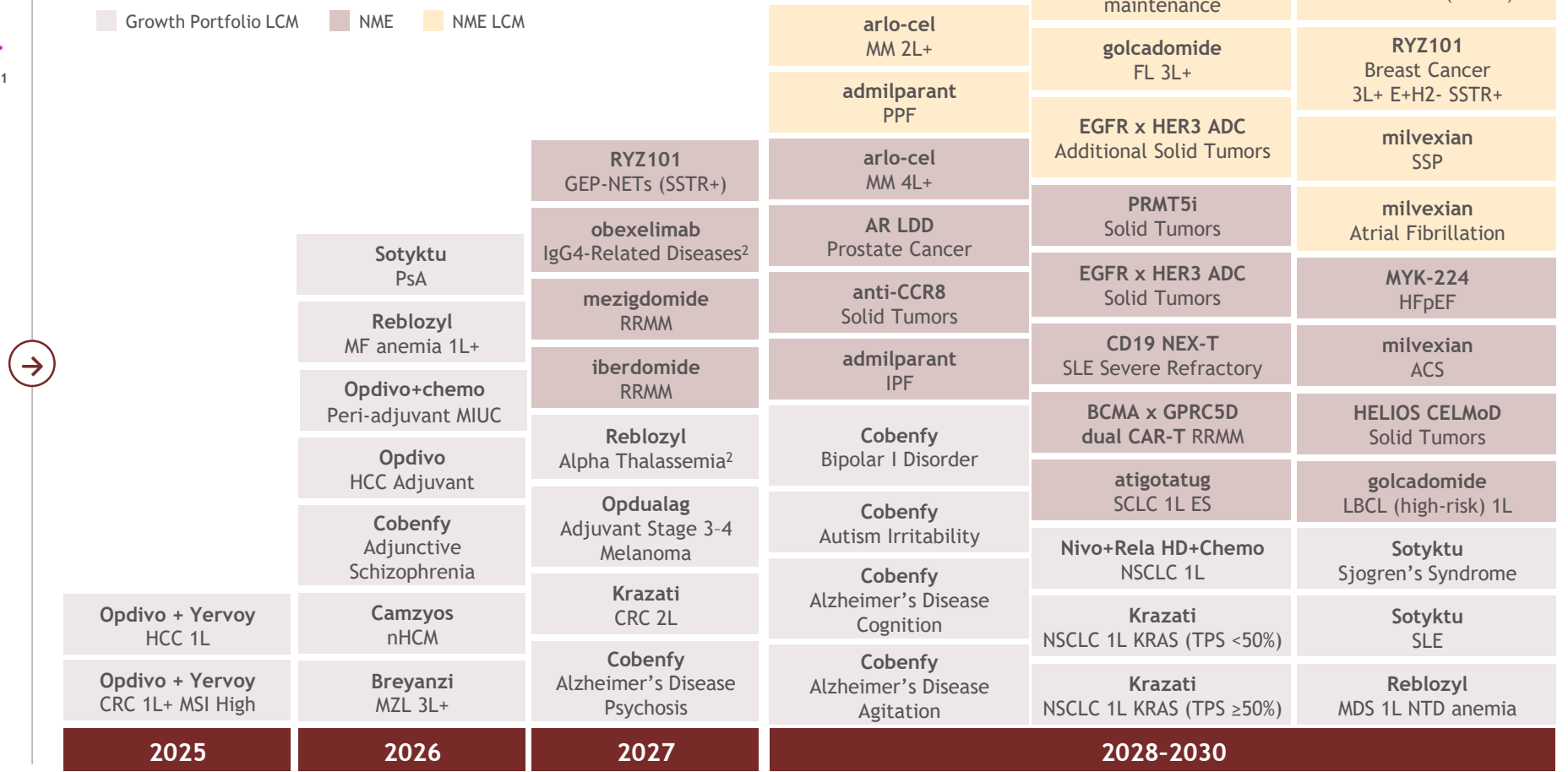
<p>Significant unmet need</p>	<ul style="list-style-type: none"> • IPF & PPF are fatal lung diseases with 3-5 years median survival¹ • Patients continue to experience progressive decline in lung function on approved therapies with limited treatment adherence due to tolerability 	<p>→</p> <p>U.S./EU prevalence³: IPF: 233K, PPF: 485K</p> <p><i>Pulmonary Fibrosis market: >\$4 billion in sales in 2023⁴</i></p>
<p>Clinical rationale</p>	<ul style="list-style-type: none"> • Deliver a new product with potentially improved efficacy and tolerability profile over current treatment options • >60% improvement in lung-function decline vs. placebo with 60 mg dose in phase 2 in IPF; ~70% improvement in PPF^{5,6} 	<p>→</p> <p>Phase 3 ALOFT-IPF & ALOFT-PPF ongoing</p> <p><i>Phase 3 data expected: 2026*/2028*</i></p>

Potential to be **first and best-in-class**, redefining the standard of care in **pulmonary fibrosis**

*See "Forward-Looking Statements and Non-GAAP Financial Information" 1. Raghu. *Am J Respir Crit Care Med.* 2011 Mar 15;183(6):788-824; 2. Please refer to ct.gov details: NCT06003426; NCT06025578; 3. Decision Resource Group; 4. Evaluate Pharma (Respiratory Disorders, Pulmonary Fibrosis); 5. Corte TJ, et al. *Am J Respir Crit Care Med.* 2023;207:A2785; 6. Corte TJ, et al. ERS 2023 [Presentation #RCT800]; IPF = Idiopathic pulmonary fibrosis; PPF = Progressive Pulmonary Fibrosis

Upcoming launch catalysts build upon existing portfolio and will further strengthen our growth profile

Currently marketed Growth Portfolio



*See "Forward-Looking Statements and Non-GAAP Financial Information"; Not an exhaustive list of assets, programs, or indications; subject to positive registrational trials and regulatory approval; planned launches as of December 31st, 2024; 1. Opdivo Qvantig January 2025 SC formulation launch, extending immuno-oncology franchise into early 2030s; 2. Ex-US study

Continuing to drive operational excellence

Evolving our organization

- Maintaining a highly patient-centric approach
- Greater focus on accountability and acting with sense of urgency
- Streamlining the organization and simplifying ways of working

Increasing efficiency

- Annualized ~\$1.5B in cost savings to be realized by the end of 2025
- Reinvesting savings in high return growth initiatives
- Continuing to review cost structure

Improving R&D productivity

- Prioritizing the highest value programs
- Raising the probability of success from first-in-human to approval
- Reducing cycle times to bring medicines to patients faster

Leveraging technology and AI across the organization to accelerate pace of innovation, drive operational excellence and reduce cost base

Note: See “Forward-Looking Statements and Non-GAAP Financial Information”

Strategically allocating capital for long-term growth

Investments in innovation

- Investing in our Growth Portfolio and R&D
- Pursuing business development and partnerships
- R&D investment of ~\$28B over the past 3 years^{1,2,3}
- Business development investment of ~\$27B over the past 3 years^{1,4}

Balance sheet strength

- Maintaining a strong balance sheet that provides strategic flexibility
- Planned debt repayment of \$10B by 1H'26⁵
- Strong long-term investment grade credit ratings

Returning capital to shareholders

- Solid track record of returning capital to shareholders through ~\$14B in dividends and ~\$16B in share repurchases over the past 3 years¹
- 93 consecutive years of dividend payments⁶

1. For the three years ended 9/30/2024 2. See “Forward-Looking Statements and Non-GAAP Financial Information” 3. Refer to GAAP to Non-GAAP Reconciliation in Appendix 4. Represents Acquisition and other payments, net of cash acquired 5. Relative to the total debt level as of March 31, 2024 6. Latest dividend increase declared 12/11/2024 and payable 2/3/2025 on common stock of the company

Reshaping BMS to deliver sustained top-tier growth & long term shareholder returns

- Focusing on **transformational medicines** where we have an advantage
- Driving **operational effectiveness** throughout the organization
- Strategically **allocating capital**



Significantly younger, more diversified and de-risked portfolio which is more balanced across leading TAs

Potential 10+ NMEs & 30+ major LCM indications in 2025-2030*

Increased strategic flexibility resulting from financial discipline

Increasing conviction in ability to deliver top-tier growth

*See "Forward-Looking Statements and Non-GAAP Financial Information"



Bristol Myers Squibb®

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

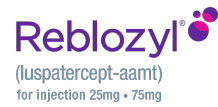
For the Three Year Period Ended September 30, 2024

(Unaudited, dollars in millions)	Three Months Ended December 31, 2021	Year Ended December 31, 2022	Year Ended December 31, 2023	Nine Months Ended September 30, 2024	Three Years Ended September 30, 2024
Research and development	\$ 2,518	\$9,509	\$9,299	\$7,968	\$29,294
Specified items ^(a)	-	308	187	974	1,469
Research and Development excluding specified items	\$2,518	\$9,201	\$9,112	\$6,994	\$27,825

(a) An explanation of these non-GAAP financial measures are available on our website at bms.com/investors

Growth Portfolio

Legacy Portfolio



Other Growth Brands¹

Other Mature Brands

1. Other Growth Brands: Onureg, Inrebic, Nulojix, Eplciti, & Royalty revenues

2024 environmental, social, and governance progress

ESG strategy

Named to the 2023 Dow Jones Sustainability™ World Indices¹

Member of

Dow Jones Sustainability Indices

Powered by the S&P Global CSA

One of America's 100 Most JUST Companies, jumping from 349th position to 100th



10 consecutive years of being included in the FTSE4Good Index Series

Advancing patient health around the world

ASPIRE 10-year strategy announced, expanding access to patients in LMICs

ATOM coalition collaboration announced to provide access to our immunology therapies like OPDIVO® in select LMICs



Access to Medicine Index (ATMI) BMS climbed two spots to 13th out of 20 since 2022



Fostering a high-performing & inclusive global workforce

6 consecutive years of being awarded a top score on Disability Equality Index®



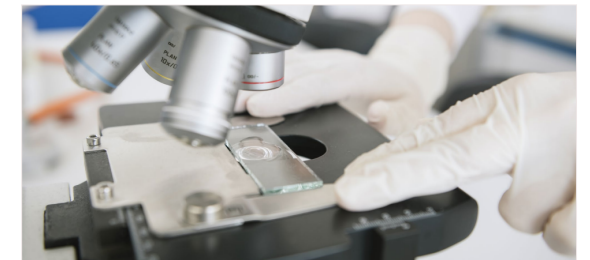
Reducing our environment impact

SBTi validation of our near-term and long-term net-zero targets



DRIVING AMBITIOUS CORPORATE CLIMATE ACTION

2024 Climate Change Report - Published



2024 Climate Change Report

Bristol Myers Squibb

1. Index recognizes progress increasing workforce representation, reducing environmental impact, enhancing data privacy and cyber security programs, establishing principles for responsible artificial intelligence

Clinical Development Portfolio – Phase I and II

Phase I

Anti-CCR8	✦ Solid Tumors
BMS-986460	✦ Prostate Cancer
BMS-986463	✦ Solid Tumors
BMS-986482	✦ Solid Tumors
BMS-986484	✦ Solid Tumors
BMS-986488	✦ Solid Tumors
BMS-986490	✦ Solid Tumors
izalontamab brengitecan (EGFRxHER3 ADC)	✦ 1L Non-Small Cell Lung Cancer* Solid Tumors* Metastatic Non-Small Cell Lung Cancer
Helios CELMoD	✦ Solid Tumors
JNK Inhibitor	✦ Solid Tumors
KRAS ^{G12D} Inhibitor	✦ Solid Tumors
PRMT5 Inhibitor	✦ Solid Tumors
RYZ101	Extensive Stage Small Cell Lung Cancer HR+/HER2- Unresectable Metastatic Breast Cancer
RYZ801	✦ Hepatocellular Carcinoma
SOS1 Inhibitor	✦ Solid Tumors
BCL6 LDD	✦ Lymphoma
CD33-GSPT1 ADC	✦ Acute Myeloid Leukemia
CD33 NKE	✦ Acute Myeloid Leukemia
CK1α Degradator	✦ Hematologic Malignancies
Dual Targeting BCMAxGPC5D CAR T	✦ RR Multiple Myeloma
HbF Activating CELMoD	✦ Sickle Cell Disease
BMS-986454	✦ Autoimmune Disease Autoimmune Diseases
CD19 NEX-T	✦ Severe Refractory Systemic Lupus Erythematosus
IL2-CD25	✦ Autoimmune Disease
PKCθ Inhibitor	✦ Autoimmune Disease
BMS-986495	✦ Neurodegenerative Diseases
CD19 NEX-T	Multiple Sclerosis
eIF2B Activator	✦ Alzheimer’s Disease
FAAH/MGLL Dual Inhibitor	✦ Neurodegenerative Diseases
TRPC4/5 Inhibitor	✦ Mood and Anxiety Disorders
BMS-986465 (TYK2 Inhibitor)	✦ Neuroinflammation Disorders

Phase II

Krazati	1L Non-Small Cell Lung Cancer PD-L1<50%
Breyanzi	RR Marginal Zone Lymphoma
Golcadomide	RR Follicular Lymphoma
Arlocabtagene autoleucel (GPC5D CAR T)	✦ RR Multiple Myeloma
Reblozyl	A-Thalassemia
MYK-224	✦ Heart Failure with preserved Ejection Fraction Obstructive Hypertrophic Cardiomyopathy
afimetroan	✦ Systemic Lupus Erythematosus
BMS-986322 (TYK2 Inhibitor)	✦ Moderate-to-Severe Psoriasis
Sotyktu	Discoid Lupus Erythematosus
Anti-MTBR Tau	✦ Alzheimer’s Disease

■ Oncology
 ■ Hematology
 ■ CV
 ■ Neuroscience
 ■ Immunology

* Partner-run study ✦ NME leading indication

Clinical Development Portfolio – Phase III

Phase III

AR LDD	✦ Metastatic Castration-Resistant Prostate Cancer
Atigotatug (Anti-Fucosyl GM1) + nivolumab	✦ 1L Extensive Stage Small Cell Lung Cancer
Krazati	1L Non-Small Cell Lung Cancer PD-L1≥50% 2L Colorectal Cancer
Nivolumab + Relatlimab HD	✦ 1L Non-Small Cell Lung Cancer
OPDIVO	Adjuvant Hepatocellular Carcinoma Peri-adjuvant Muscle-Invasive Urothelial Carcinoma Stage IB-III A Adjuvant Non-Small Cell Lung Cancer*
OPDUALAG	Adjuvant Melanoma
RYZ101	✦ 2L+ SSTR2+ Gastroenteropancreatic Neuroendocrine Tumors
SC nivolumab + relatlimab + rHuPH20	✦ 1L Melanoma
Golcadomide	✦ High Risk 1L Large B-cell Lymphoma
(Arlocabtagene autoleucel) (GPRC5D CAR T)	2-4L Multiple Myeloma
Iberdomide	✦ 2L+ Multiple Myeloma Post-ASCT Maintenance Newly Diagnosed Multiple Myeloma
Mezigdomide	2L+ Multiple Myeloma Kd ✦ 2L+ Multiple Myeloma Vd
Reblozyl	1L TD Myelofibrosis Associated Anemia 1L NTD Myelodysplastic Syndrome Associated Anemia
CAMZYOS	Non-Obstructive Hypertrophic Cardiomyopathy
Milvexian	Acute Coronary Syndrome* Atrial Fibrillation* Secondary Stroke Prevention*
Cendakimab	✦ Eosinophilic Esophagitis Eosinophilic Gastroenteritis #
Admilparant	✦ Idiopathic Pulmonary Fibrosis Progressive Pulmonary Fibrosis
Obexelimab	✦ IgG4-Related Disease
Sotyktu	Psoriatic Arthritis Sjögren's Syndrome Systemic Lupus Erythematosus
Cobenfy	Adjunctive Schizophrenia Psychosis in Alzheimer's Disease

Registration US, EU, JP

AUGTYRO	ROS1 NSCLC (EU) NTRK Pan-Tumor (EU, JP)
OPDIVO	Peri-adjuvant Non-Small Cell Lung Cancer (EU)
OPDIVO+YERVOY	1L Hepatocellular Carcinoma (US, EU, JP) 1L+ Microsatellite Instability High Colorectal Cancer (JP)
OPDIVO QVANTIG	✦ 2L Renal Cell Carcinoma (EU)
Breyanzi	RR Follicular Lymphoma (EU)

■ Oncology
 ■ Hematology
 ■ CV
 ■ Neuroscience
 ■ Immunology

* Partner-run study
 ✦ NME leading indication
 # Japan only

Development Partnerships:

AUGTYRO: Zai Lab; izalontamab brengitecan (EGFRxHER3 ADC): SystImmune; Cobenfy: Zai Lab; Krazati: Zai Lab; milvexian: Johnson & Johnson; obexelimab: Zenas BioPharma; OPDIVO, YERVOY, OPDUALAG: Ono; PKCθ Inhibitor: Exscientia; Reblozyl: Merck; rHuPH20: Halozyme