

A large, centered version of the Sanofi logo, featuring the word "sanofi" in a bold, lowercase, sans-serif font. The letter "s" has a purple dot at its base, and the letter "i" has a purple dot above it.



sanofi



# Q3 2022 Results

*Play to Win*



October 28, 2022

## *Forward-looking* statements

This document contains forward-looking statements as defined in the Private Securities Litigation Reform Act of 1995, as amended. Forward-looking statements are statements that are not historical facts. These statements include projections and estimates and their underlying assumptions, statements regarding plans, objectives, intentions and expectations with respect to future financial results, events, operations, services, product development and potential, and statements regarding future performance. Forward-looking statements are generally identified by the words “expects”, “anticipates”, “believes”, “intends”, “estimates”, “plans” and similar expressions. Although Sanofi’s management believes that the expectations reflected in such forward-looking statements are reasonable, investors are cautioned that forward-looking information and statements are subject to various risks and uncertainties, many of which are difficult to predict and generally beyond the control of Sanofi, that could cause actual results and developments to differ materially from those expressed in, or implied or projected by, the forward-looking information and statements. These risks and uncertainties include among other things, the uncertainties inherent in research and development, future clinical data and analysis, including post marketing, decisions by regulatory authorities, such as the FDA or the EMA, regarding whether and when to approve any drug, device or biological application that may be filed for any such product candidates as well as their decisions regarding labelling and other matters that could affect the availability or commercial potential of such product candidates, the fact that product candidates if approved may not be commercially successful, the future approval and commercial success of therapeutic alternatives, Sanofi’s ability to benefit from external growth opportunities, to complete related transactions and/or obtain regulatory clearances, risks associated with intellectual property and any related pending or future litigation and the ultimate outcome of such litigation, trends in exchange rates and prevailing interest rates, volatile economic and market conditions, cost containment initiatives and subsequent changes thereto, and the impact that COVID-19 will have on us, our customers, suppliers, vendors, and other business partners, and the financial condition of any one of them, as well as on our employees and on the global economy as a whole. The risks and uncertainties also include the uncertainties discussed or identified in the public filings with the SEC and the AMF made by Sanofi, including those listed under “Risk Factors” and “Cautionary Statement Regarding Forward-Looking Statements” in Sanofi’s annual report on Form 20-F for the year ended December 31, 2021. Other than as required by applicable law, Sanofi does not undertake any obligation to update or revise any forward-looking information or statements.

# Agenda

- 01 • **Performance through transformation**  
Paul Hudson
- 02 • **Business update**  
Bill Sibold, Thomas Triomphe,  
Olivier Charmeil & Julie Van Ongevalle
- 03 • **Financial performance and outlook**  
Jean-Baptiste de Chatillon



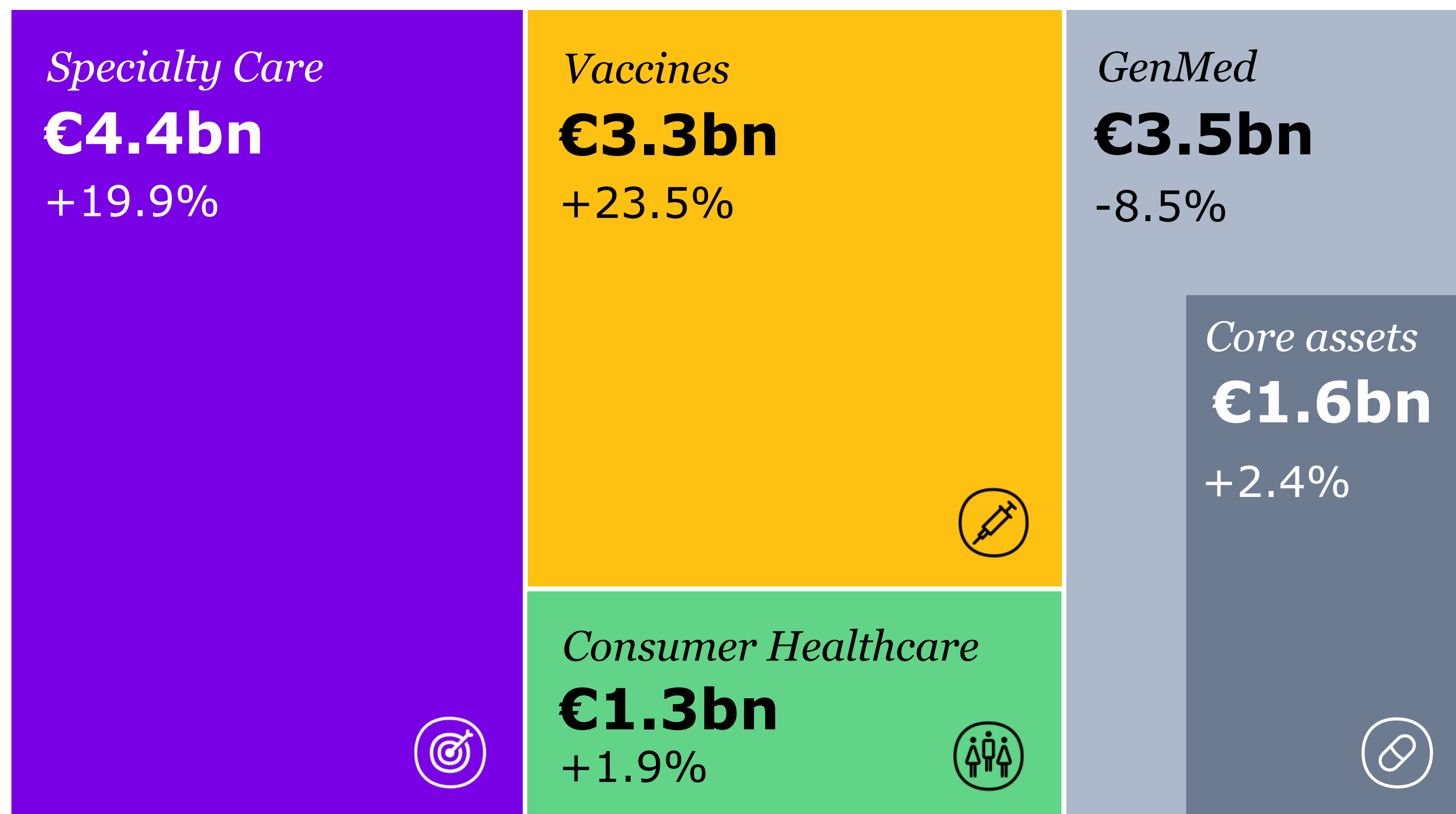
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# Performance through transformation



# Specialty Care and Vaccines drive 9.0% sales growth in Q3



## Specialty Care

Dupixent® Q3 growth driven by new launches

## Vaccines

Excellent execution in flu

## GenMed and CHC

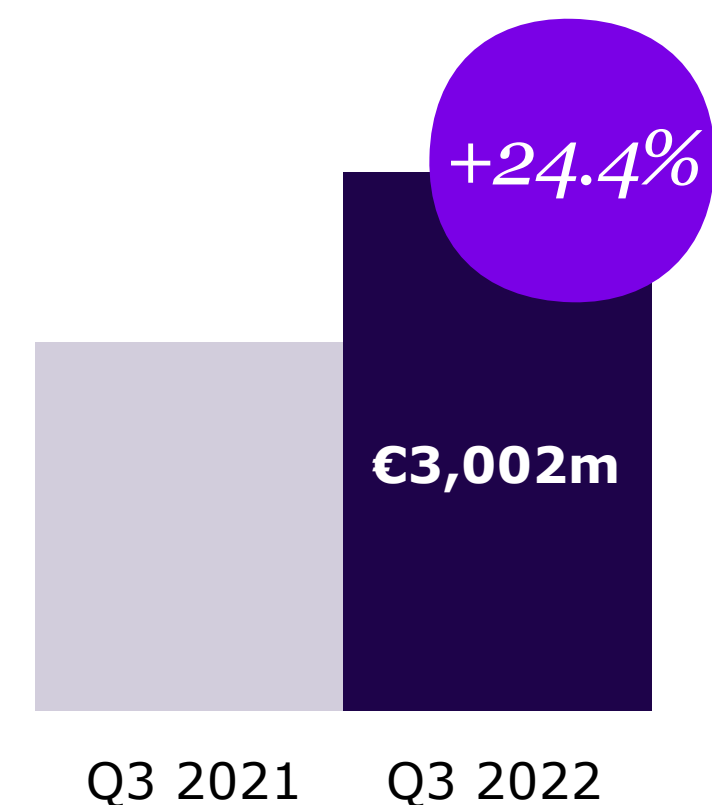
Core brands continue to perform

All growth at CER unless footnoted.

# Higher sales in the *largest healthcare market*

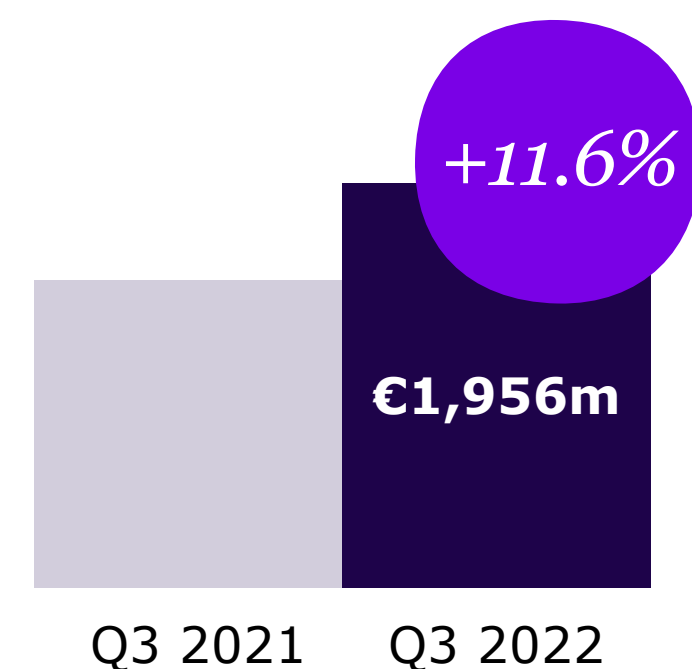


## Specialty Care



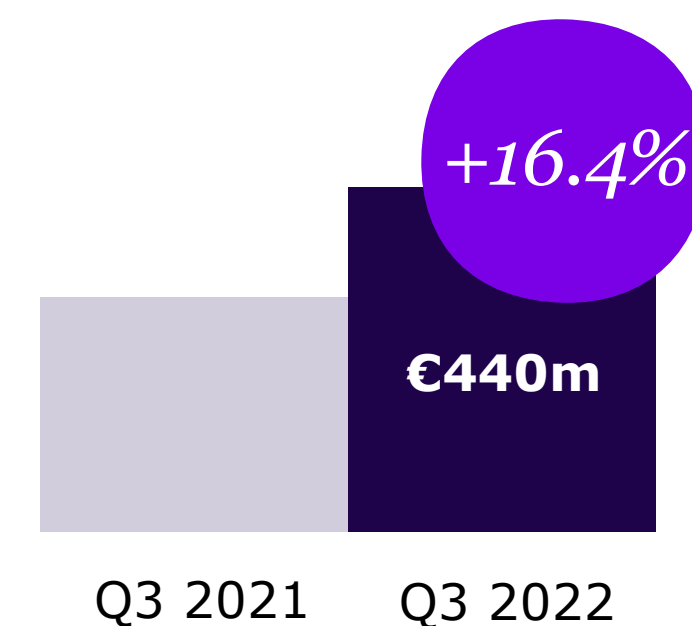
Dupixent<sup>®</sup> launches in new indications, Nexviazyme<sup>®</sup> launch, Sarclisa<sup>®</sup> growth

## Vaccines



Fluzone<sup>®</sup> HD and MenQuadfi<sup>®</sup> growth/phasing, Travel vaccine recovery

## GenMed Core assets



Rezurock<sup>®</sup> launch and overall transplant franchise growth

## Inflation Reduction Act (IRA)

## Expected Sanofi business impact

### Inflation penalties

Industry leadership in responsible pricing since 2017. No impact

### Direct Medicare negotiation

Provision not affecting growth drivers in the near to mid-term. Future system and scientific impact highly uncertain; likely impact on R&D investments and decisions

### Medicare Part D redesign

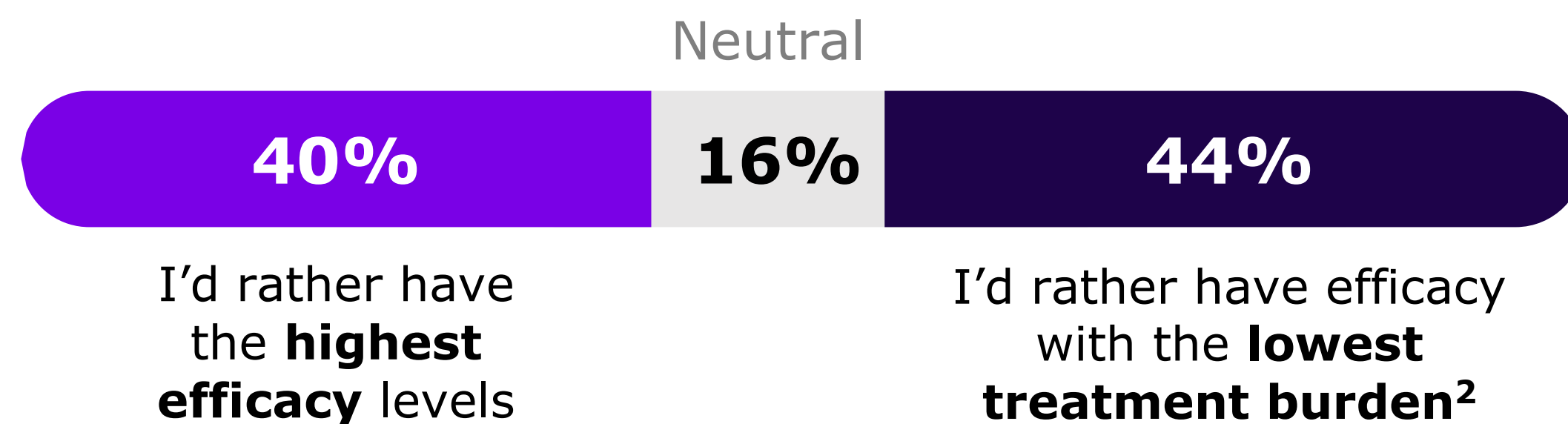
Improved adherence to therapy expected but critical for all stakeholders to pay their share

All growth at CER unless footnoted.

# On track for *key launches* in 2023

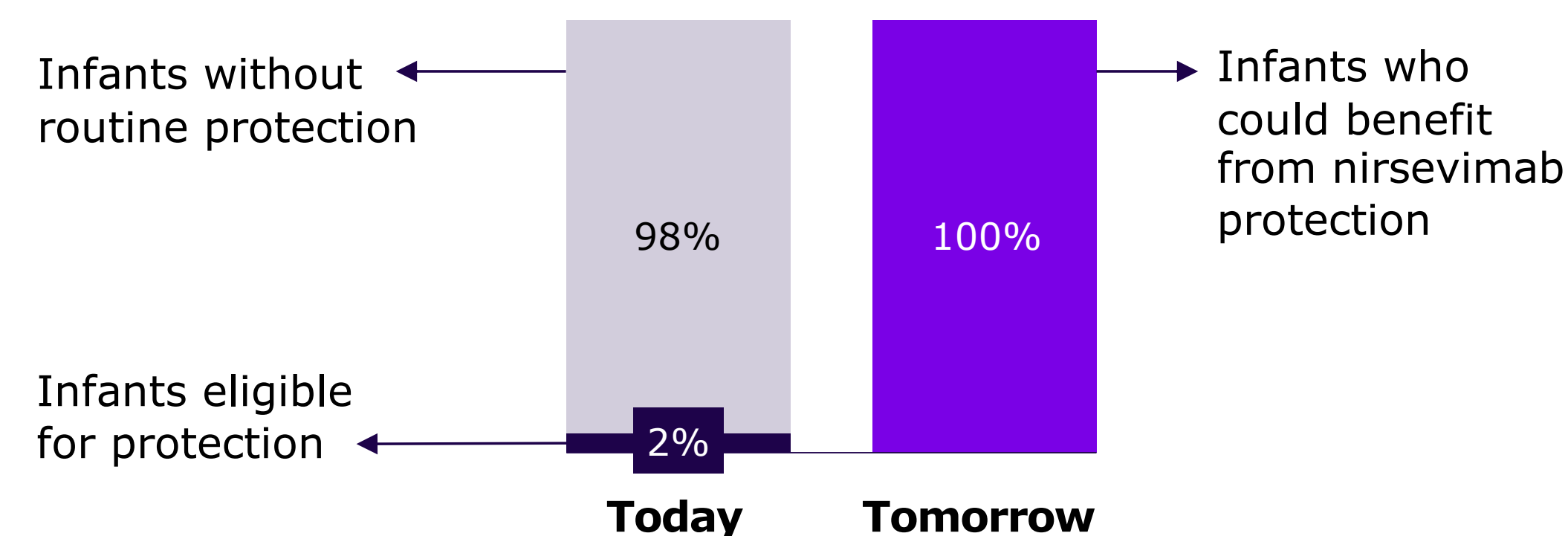


- Efanesoctcog alfa, a once-weekly prophylaxis, provided *superior* bleed protection with *clinically meaningful improvements* in patient outcomes
- Poised to enter *€5bn worldwide market* that today is highly fragmented and relatively undifferentiated
- PDUFA: February 28, 2023
- Treatment attitudes<sup>1</sup>:



- CHMP *positive opinion* of Beyfortus<sup>®C</sup> (nirsevimab) for prevention of RSV disease in infants
- All infant protection accessible for the first time in 2023
- Total market estimated at €2.5bn<sup>4</sup> in 2030

### Total infant population



Source: VOP Hem A Perceptions Micro-Survey. For collaborations see slide 56.

1. Among Total Respondents, % Rating on 7-Point Scale, n=85.

2. Efficacy that lasts 1 to 2 months.

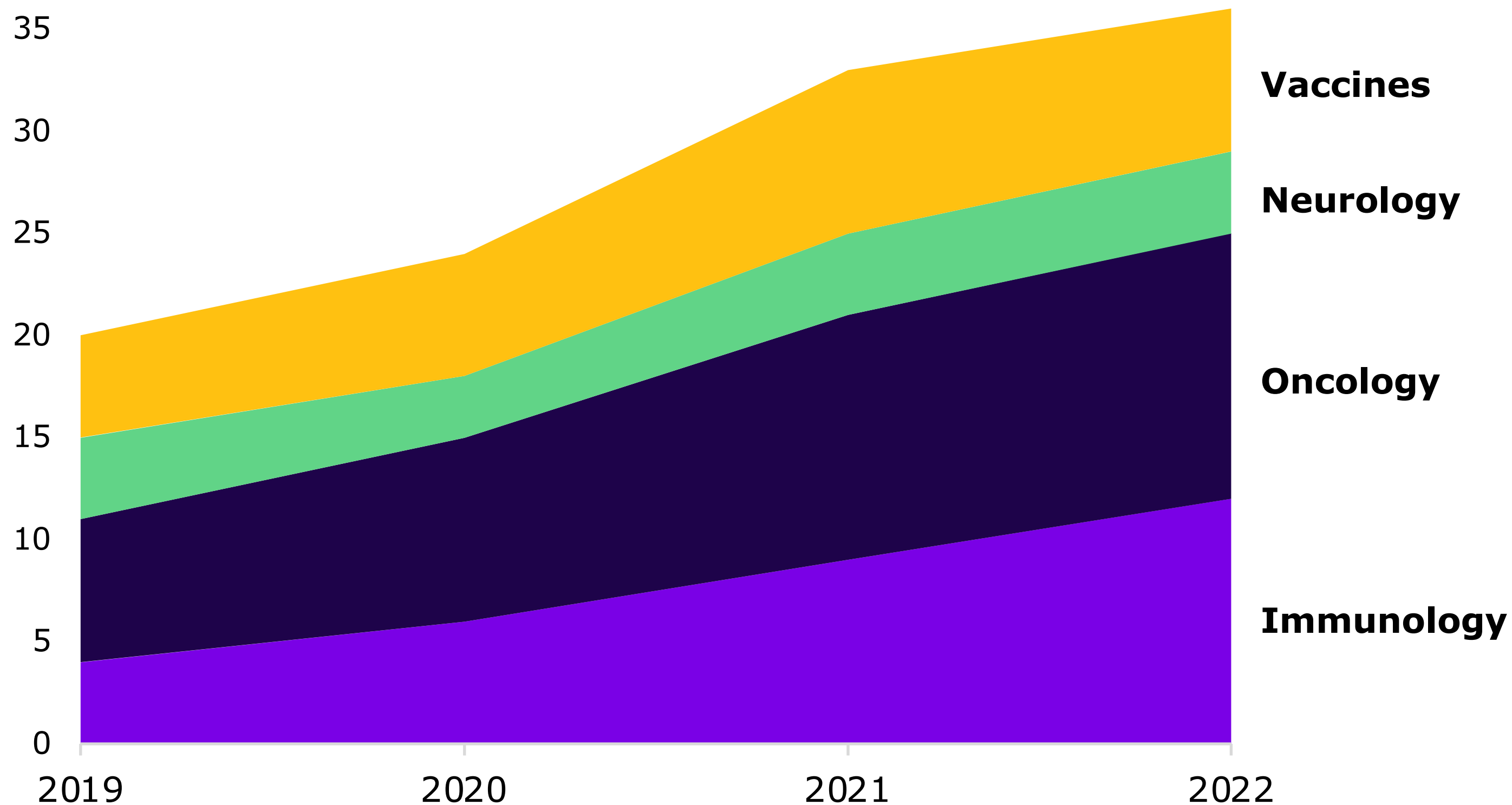
3. Sanofi estimate.

4. Sanofi internal estimate for 2030, based on affordability, coverage rate and population in G8 (U.S., UK, Germany, France, Italy, Spain, China and Japan)



# Progress in R&D transformation with a *focus on key areas*

## *NME in Phase 1-3 by Q3*



## *External innovation*



*Oncology* research collaboration to enable genetic modification of novel natural killer (NK) cell therapies



Collaboration to accelerate the development and access of *oncology* treatment for patients in China



U.S. co-promotion agreement for *teplizumab* (Type 1 diabetes)

# Upcoming newsflow over the next 18 months

9 Phase 3/pivotal readouts

27 Phase 1-2 readouts

**Dupixent<sup>®A</sup>**  
COPD

**Dupixent<sup>®A</sup>**  
Chronic Inducible Cold Urticaria

**Beyfortus<sup>®C</sup>**  
RSV infant (HARMONIE)

**tolebrutinib**  
Relapsing Multiple Sclerosis

**fitusiran**  
Hemophilia A and B

**Sarclisa<sup>®</sup>**  
1L Newly Diag. MM T1 (IMROZ) (IA)

**tusamitamab ravtansine**  
2/3L NSCLC – (IA)

**rilzabrutinib**  
Immune Thrombocytopenia

**MenQuadfi<sup>®</sup>**  
Meningitis 6w+

**amlitelimab**  
Atopic Dermatitis

**rilzabrutinib**  
Chronic Spontaneous Urticaria

**rilzabrutinib**  
Atopic Dermatitis

**rilzabrutinib**  
Warm Autoimmune Hemolytic Anemia

**eclitasertib**  
Cutaneous Lupus Erythematosus

**frexalimab**  
Sjogren’s Syndrome

**frexalimab**  
Multiple Sclerosis

**atuzabrutinib**  
Atopic Dermatitis

**tusamitamab ravtansine**  
NSCLC

**tusamitamab ravtansine**  
Gastric cancer

**tusamitamab ravtansine**  
Pancreatic cancer

**SAR441566**  
Inflammatory Indications

**SAR444656**  
Atopic Dermatitis

**SAR444336**  
Inflammatory Indications

**SAR442970**  
Inflammatory Indications

**SAR443765**  
Inflammatory Indications

**SAR441000**  
Solid tumors

**SAR442720**  
2L NSCLC

**SAR442257**  
MM / N-H Lymphoma

**SAR443579**  
Acute Myeloid Leukemia

**SAR446309**  
Solid tumors

**SAR445088**  
CIDP

**SAR443809**  
Rare renal disease

**SP0202**  
Pneumococcal Vaccine

**SP0125**  
RSV toddler Vaccine

**SP0230**  
Meningitis B Vaccine

**SP0273**  
mRNA QIV

# Sanofi championing efforts in *decarbonizing the patient journey* to be showcased at COP27

**COP 27**  
SHARM EL-SHEIKH  
7-18 NOVEMBER 2022

Aim to deliver *net zero patient care* through healthcare stakeholder engagement and new way to deliver healthcare services:

- Sanofi sponsored study on telemedicine GHG emissions in Egypt<sup>1</sup>
- Study on Dupixent<sup>®</sup> patient care pathway decarbonization
- Product environment life cycle analysis performed on different products such as Dupixent<sup>®</sup>, Fluzone HD<sup>®</sup>, Praluent<sup>®</sup>, Allegra<sup>®</sup>
- Sanofi is driving the engagement with stakeholders such as authorities, payers, service providers, HCP and patients

5%

healthcare systems  
CO<sub>2</sub> contributions  
vs global emissions

45%

is the part of patient  
care pathway in  
healthcare systems  
CO<sub>2</sub> emissions

1. In collaboration with Ain Shams University

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# Business update

*Q3 2022*



# Specialty Care *performance*

Q3 2022

*Oncology*

**€224m**

-8.4%

*Rare Blood Disorders*

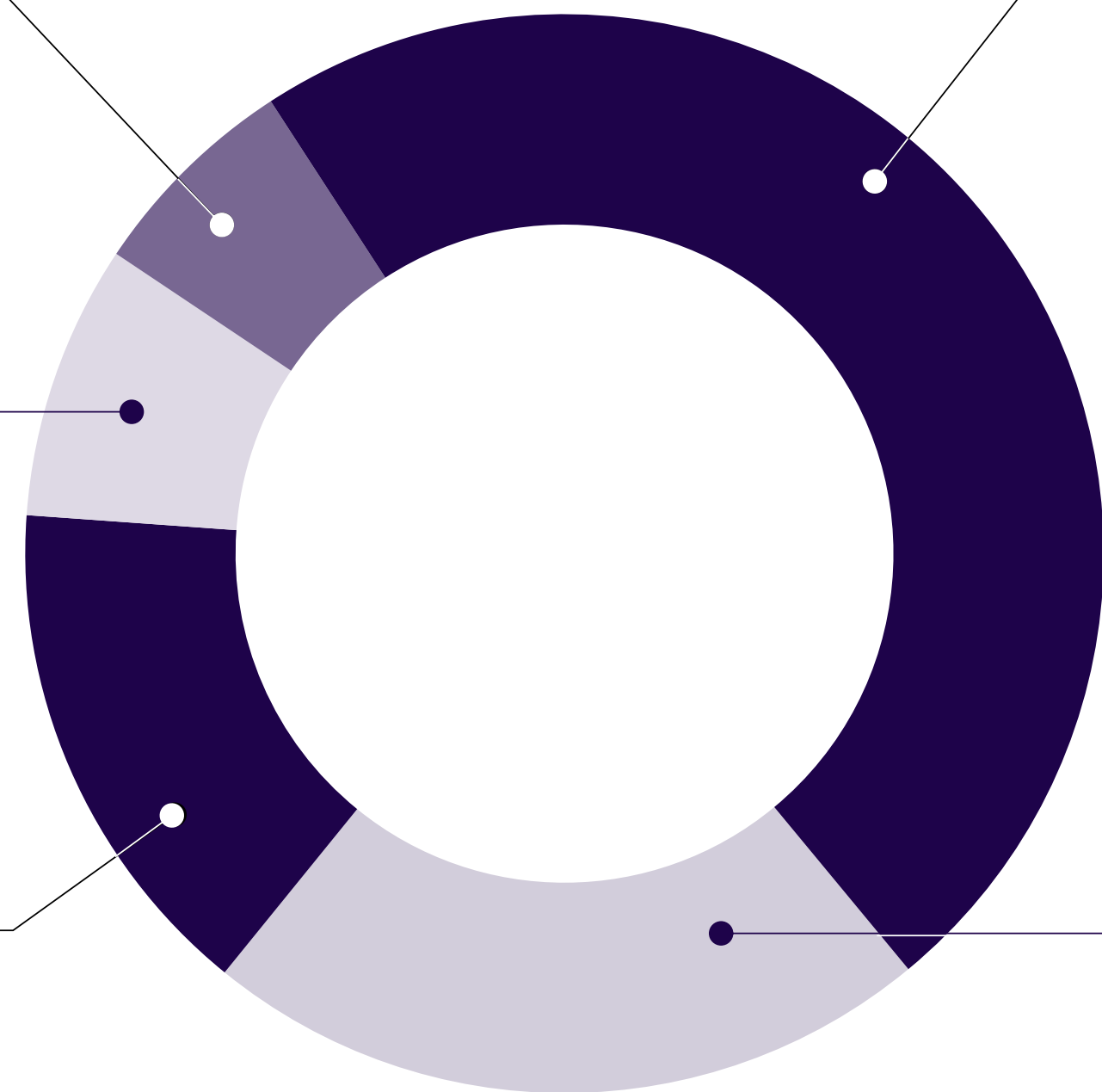
**€336m**

+3.5%

*Neurology & Immunology*

**€627m**

-4.1%



*Dupixent<sup>®</sup>*

**€2,314m**

+44.5%

*Rare Diseases*

**€900m**

+7.7%

**€4.4bn** sales

+19.9%

## Dupixent<sup>®</sup>

Strong performance driven by increase in demand and growth across indications compounded by U.S. launches in EoE and younger populations

## Rare Diseases

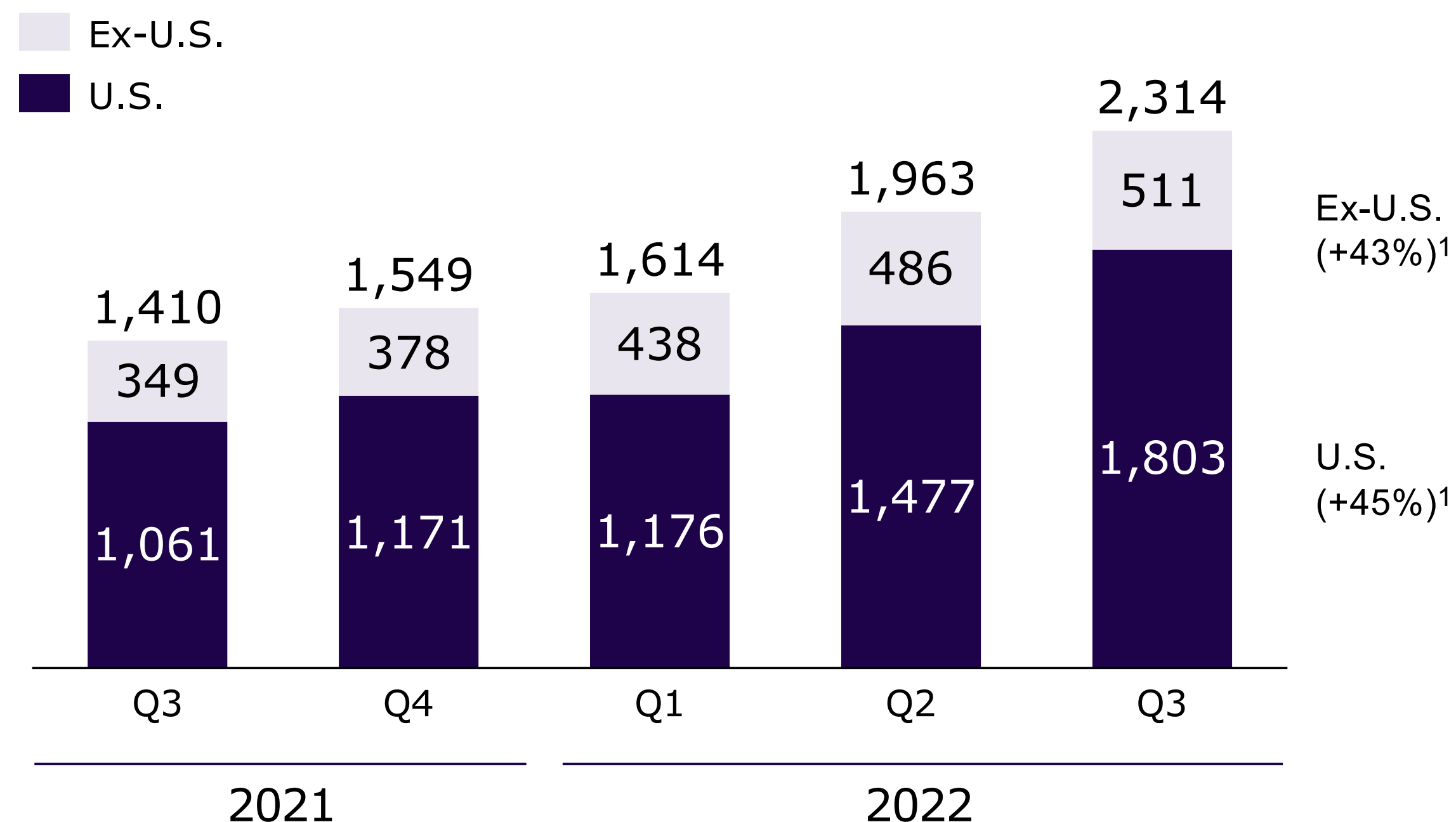
Launch momentum for Nexviazyme<sup>®</sup> and Xenpozyme<sup>®</sup>

## Oncology

Strong growth of Sarclisa<sup>®</sup> continues; Libtayo<sup>®</sup> sales deconsolidated as a result of amended collaboration agreement

# Dupixent<sup>®</sup> *growth trajectory* continues to impress in Q3

## Global Dupixent<sup>®</sup> sales (€m)



## Performance highlights in Q3

- Worldwide growth of +45% vs Q3 2021
- Ex-U.S. annualizing to ~€2B

## Recent progress

- U.S. accelerated growth driven by *AD 6 mo. +* and *EoE launches*
- New approvals *added 225k eligible patients* in the last two quarters



1. Represents growth Q3 2021 to Q3 2022. All growth at CER unless footnoted.

# Leading in specialty dermatology

*A pool of biologics eligible ~5m patients*



## Prurigo Nodularis

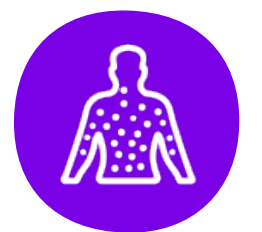
Chronic and debilitating skin disease with underlying *Type 2 inflammation*

Relentless *itch* and sensations of *burning* and *stinging skin* negatively impact quality of life

*First and only* treatment addressing *~75K* patients most in need

*2<sup>nd</sup>* dermatology indication and *5<sup>th</sup>* disease indication overall in the U.S.

## Expanding dermatology



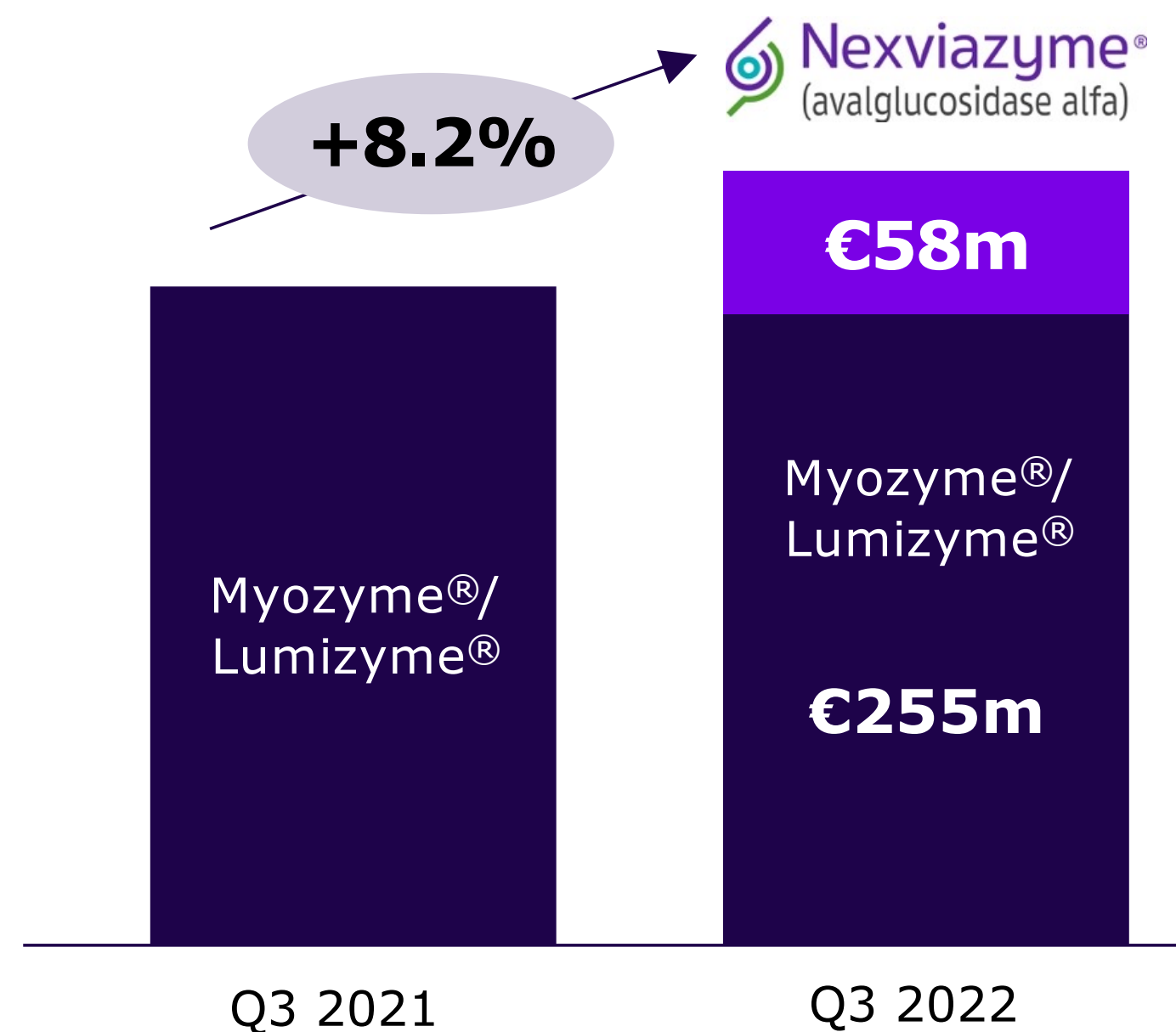
	Eligible patients
✓ AD 6+ year	<i>~4.9 million globally<sup>1</sup></i>
✓ AD 6 months - 5 years	<i>~75k</i>
✓ Prurigo Nodularis	<i>~75k</i>
CSU	<i>~308k</i>
CIndU	<i>~25k</i>
Bullous pemphigoid	<i>~27k</i>
CPUO	<i>~133k</i>

1. G8: US, Japan, Germany, France, Italy, Spain, United Kingdom and China.

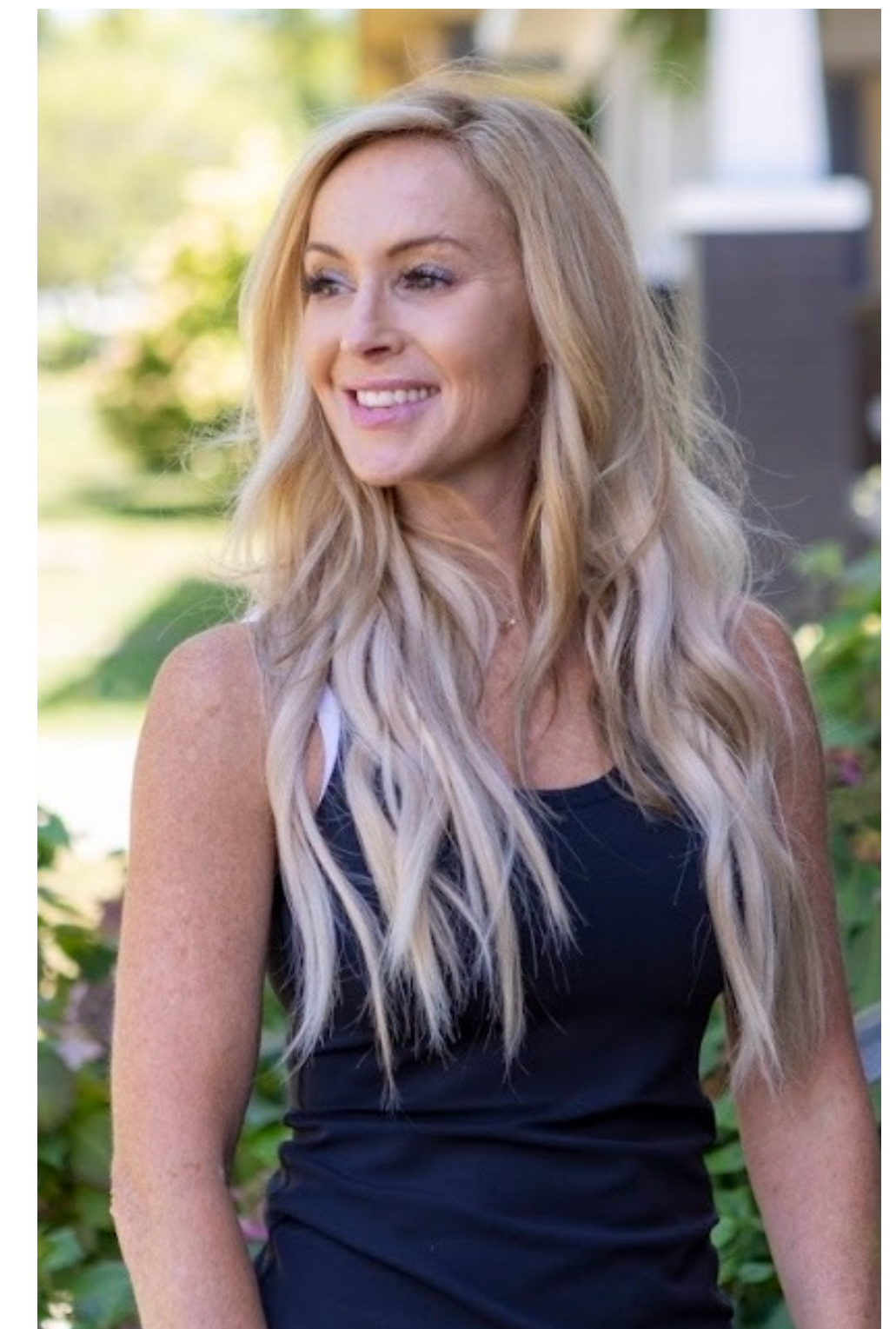
Source: Sanofi Epidemiology Data primarily from Sanofi Real World Evidence platform. CSU, CIndU, Bullous pemphigoid and CPUO are currently under investigation.

# Nexviazyme<sup>®</sup>: Launch excellence in *Pompe*

## Global Pompe disease sales (€m)

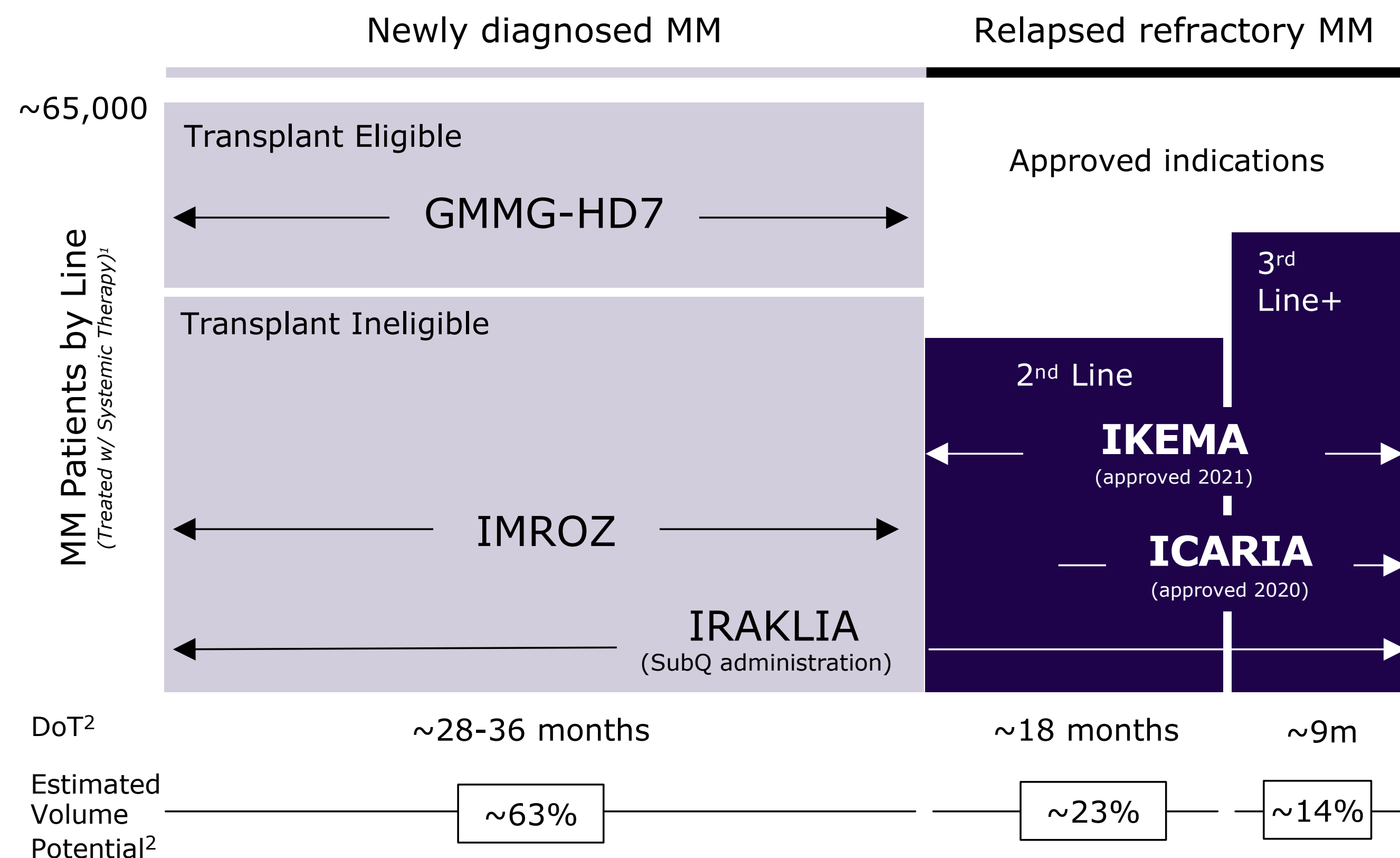


- Nexviazyme<sup>®</sup> launch progress across U.S., Japan and Australia ahead of expectations
  - First EU launches now underway
- Nexviazyme<sup>®</sup> U.S. conversion rate >60% in indicated LOPD population
  - Fast adoption among HCPs and patients
- Establishing a new SoC in Pompe disease by switching patients and accruing new patients





# Sarclisa® *strong uptake* in approved indications



● **Sarclisa®**  
YTD Sep sales €208m, +62%

**Approved ICARIA/IKEMA indications cover majority of 2L+ MM patients**

- *Over 10% market share in 2L* anti-CD38 market in countries with recent IKEMA launches<sup>3</sup>
- *Capturing >30% share* in the 3L+ anti-CD38 market in key countries<sup>3</sup>

**Unlocking full disease spectrum in MM**

- IMROZ 1L data now expected H2 2023
- IRAKLIA SubQ Phase 3 initiated in Q3
- GMMG-HD7 trial in transplant eligible patients ongoing

1. Source: Sanofi internal analysis for 7 major markets in 2023 (US-Japan-France-Germany-UK-Italy-Spain). Source: Sanofi internal analysis of real-word length of treatment by line.  
2. Average duration of therapy.  
3. IQVIA Multiple Myeloma Therapy Tracker – W30 (Jun/Jul '22).

# Vaccines *performance*

Q3 2022

*Travel & Endemic*

**€146m**

+64.6%

*Boosters*

**€178m**

+1.3%

*Meningitis*

**€328m**

+11.9%

*Influenza*

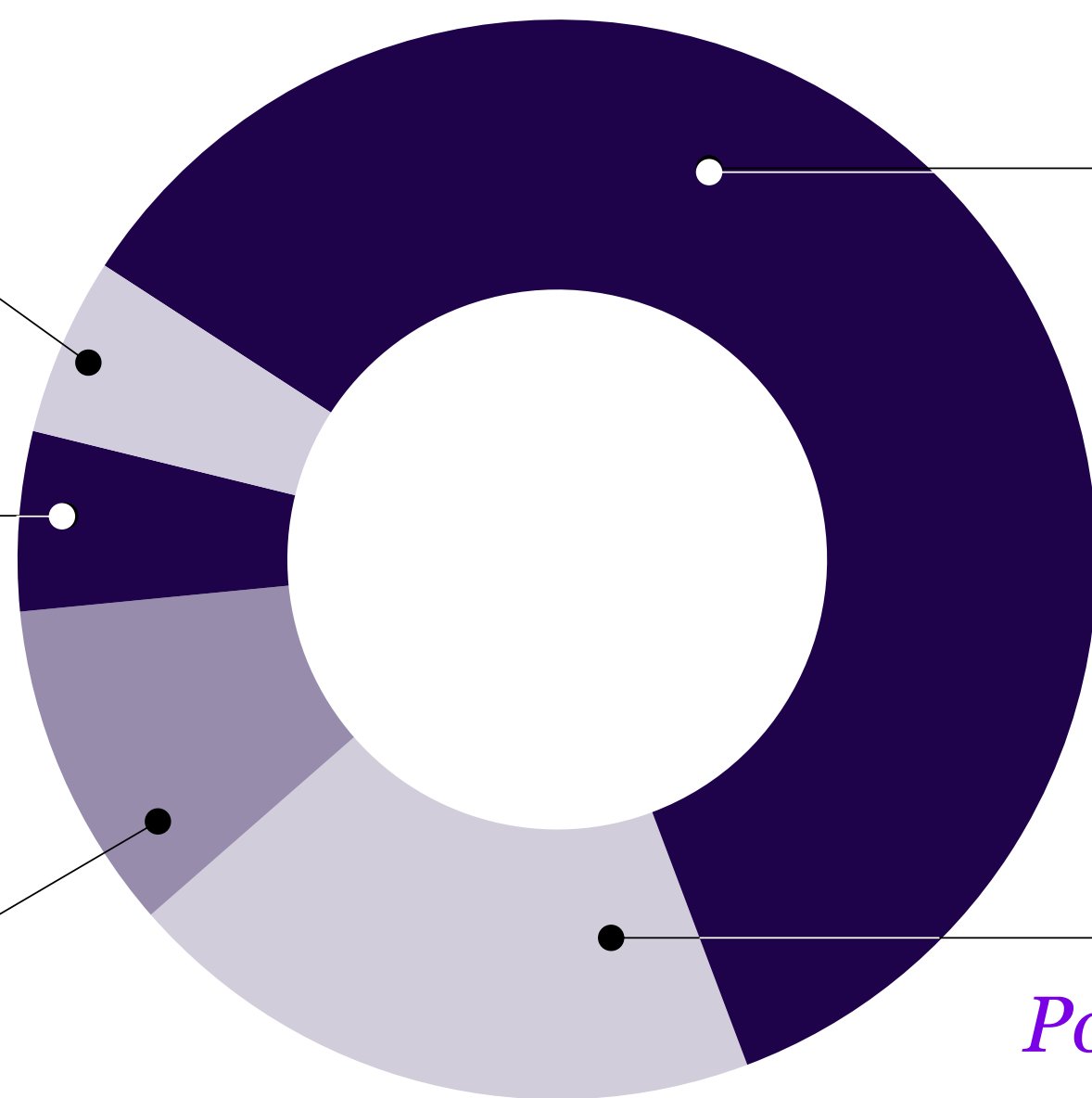
**€1,994m**

+32.4%

*Polio Pertussis Hib*

**€640m**

+9.1%



**€3.3bn** sales

**+23.5%**

Outstanding quarter with growth in all franchises and across all geographies

Record flu sales driven by manufacturing excellence and in-market execution

PPH and meningitis reflecting good performance and favorable public ordering pattern

Continued recovery of travel vaccines sales across all regions

All growth at CER unless footnoted.

# *Raising the bar* in influenza standard of care

Continuing to support *Protection Beyond Flu*

**64.4%**  
DANFLU-1<sup>1</sup>

Associated reduction in flu and pneumonia hospitalizations vs standard dose

 Influenza Vaccine  
**Fluzone® High-Dose**  
Quadrivalent

  
**Efluelda**  
INFLUENZA VACCINE

**Continuing to innovate**



Three Phase 1/2 studies with mRNA QIV, testing different LNPs, initiated by year-end

Focus on next generation flu vaccine with

- Optimal *safety/tolerability*
- *Thermostability* & pre-filled syringe
- *Protection Beyond Flu*, including hospitalization due to pneumonia and cardio-respiratory events

1. DANFLU-1: 12,000 people individually randomized in an innovative real-world trial.

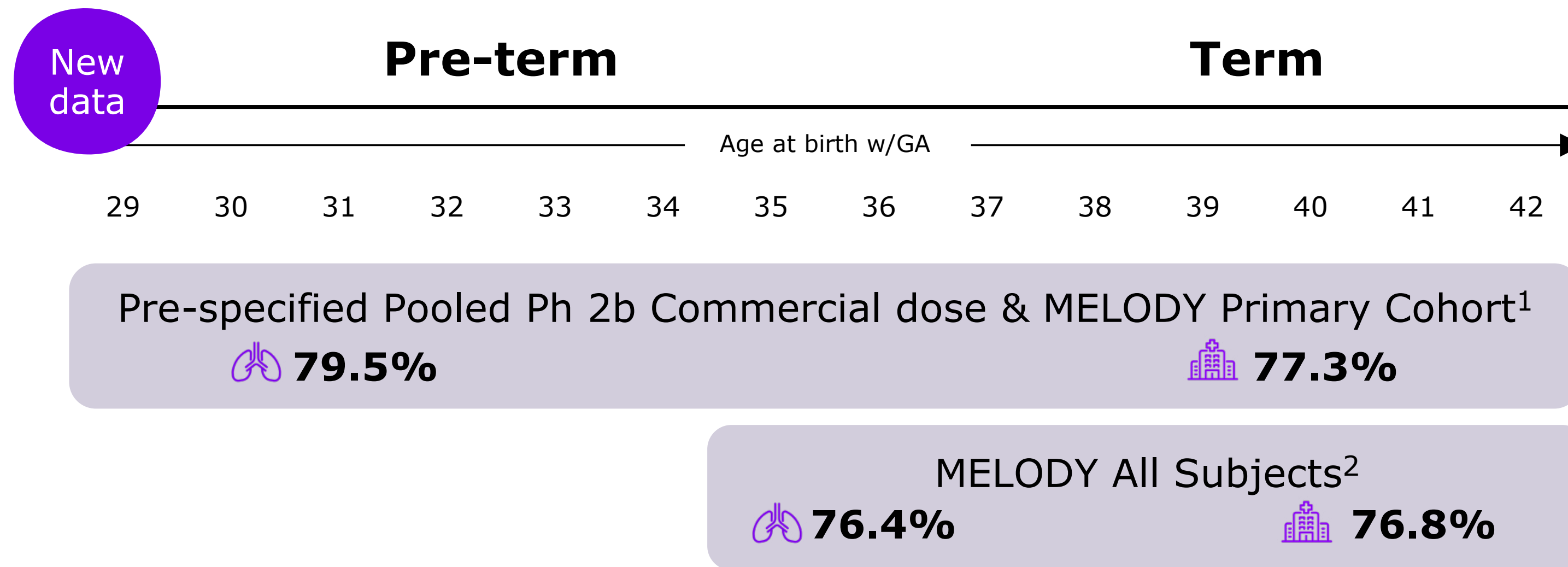
# *Beyfortus*<sup>®</sup> consistent strong efficacy and safety profile across all studies<sup>c</sup>

Positive opinion from CHMP, FDA submission acceptance expected in Q4

## 1 single dose

reduced relative risk of RSV LRTI, including hospitalization by

**~80%<sup>1</sup>**



~Across all studies, comparable safety and tolerability profile vs placebo



Primary endpoint RSV medically attended lower respiratory tract infection



Secondary endpoint RSV hospitalizations

For collaborations see slide 56.

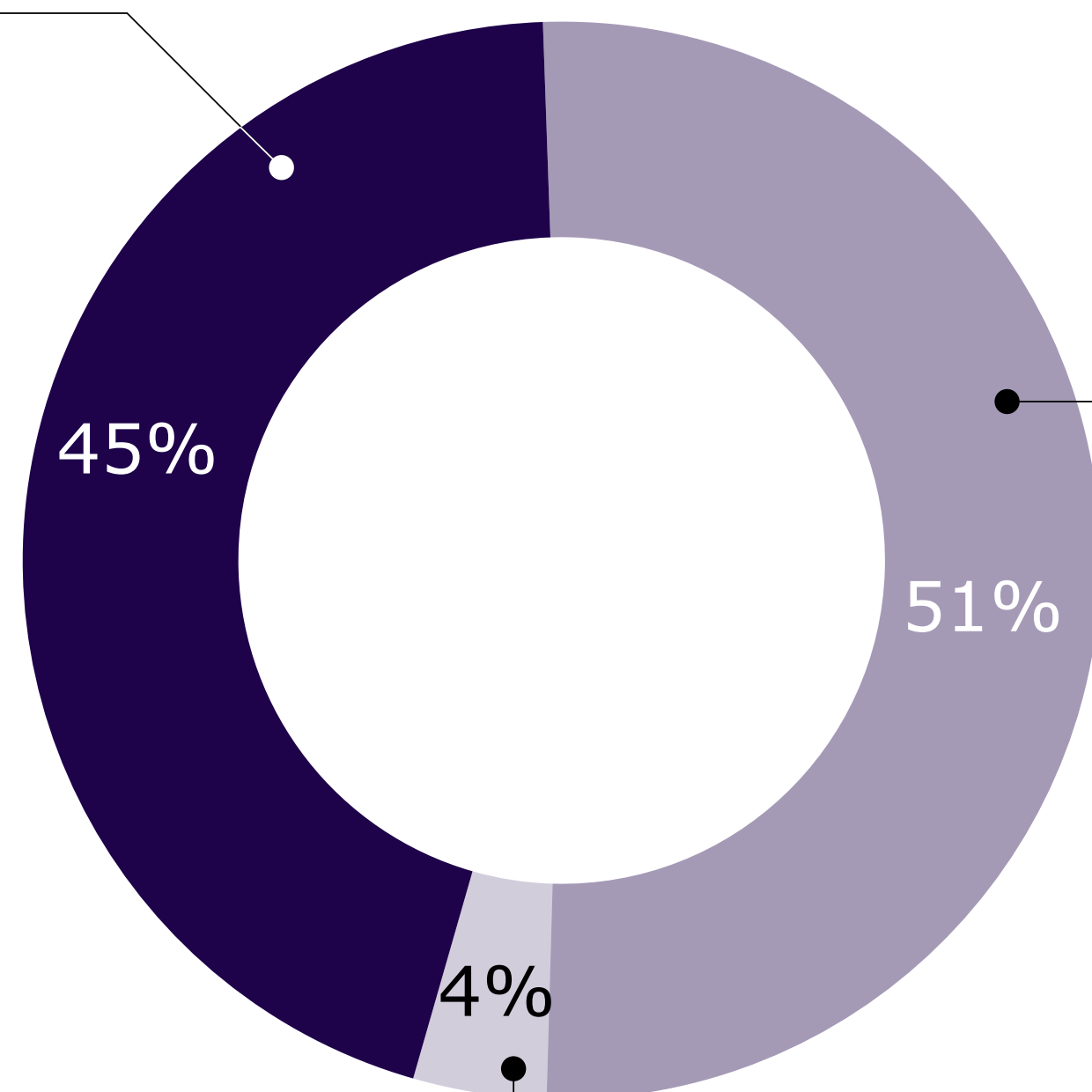
1. Simões, E, et al. Pooled efficacy of nirsevimab against RSV lower respiratory tract infection in preterm and term infants. ESPID 2022 Congress; 2022 May 9-13. Hybrid Congress. 2. Data presented to ACIP Oct 20 2022.

# GenMed *performance*

Q3 2022

*Core assets*

**€1,586m**  
+2.4%



*Non-core assets*

**€1,782m**  
-12.8%

*Industrial sales*

**€127m**  
-43.3%

**€3.5bn** sales

**-8.5%**

## Core assets on track

Robust growth of Toujeo® and Praluent® in ex-U.S. geographies, mainly driven by performance in China

Lovenox® impacted by an accelerated decline of the market post COVID, as well as increased penetration of biosimilars

## Non-core assets

**U.S.:** Basal insulin market softening and ongoing pricing pressure

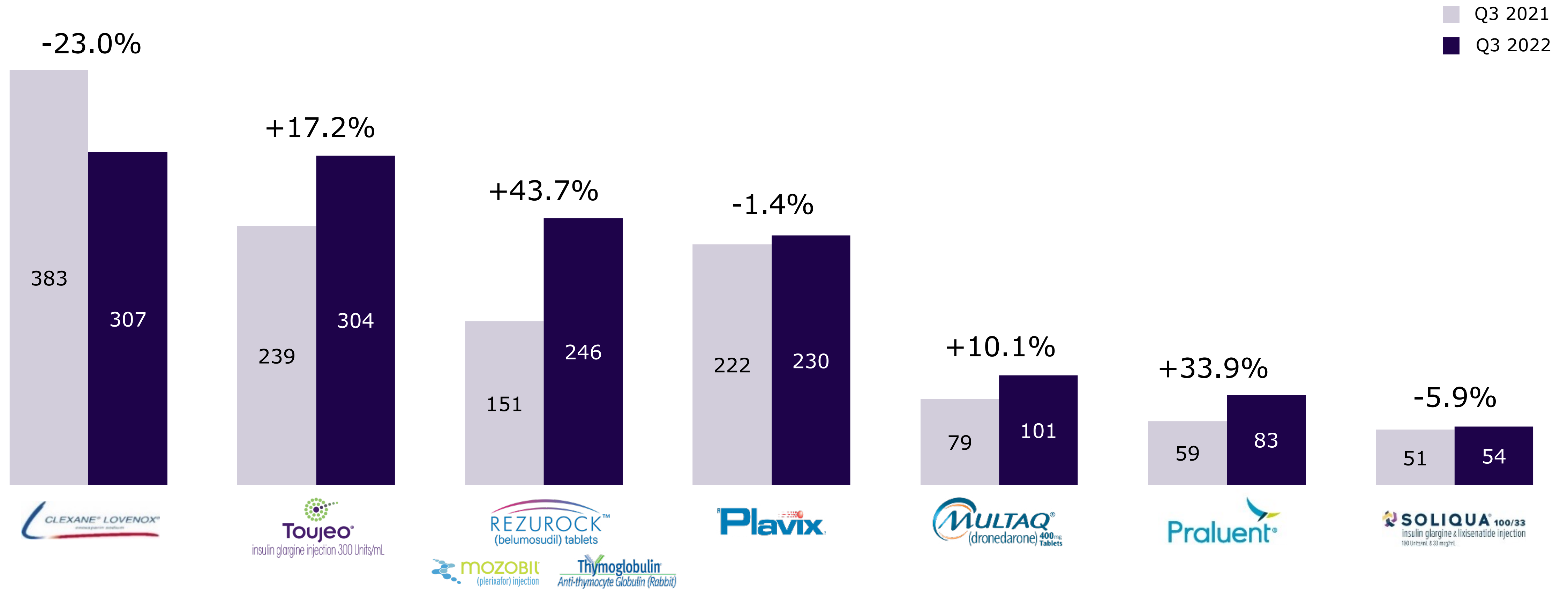
**China:** VBP impact on Lantus® and legacy oncology

**Growth adjusted for EUROAPI spin-off and divestitures: -4.1%**

All growth at CER unless footnoted.

# GenMed: Q3 2022 *core assets* performance

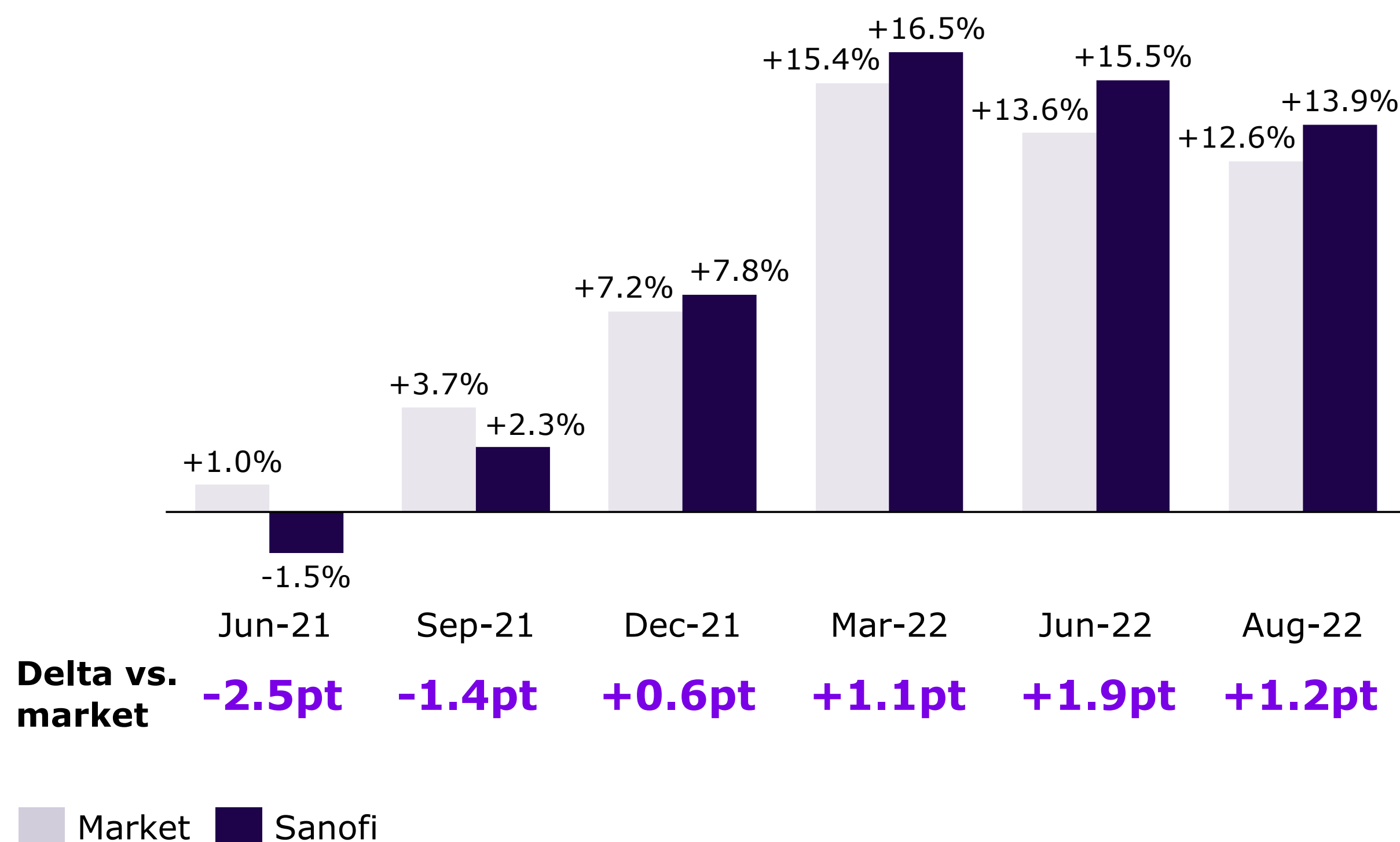
€ millions



All growth at CER unless footnoted.

# CHC: *4 consecutive periods* above market growth

Growth (MAT, in %)



**Exceptionally strong market growth since March 2021, has peaked**

Current economic context resulting in price overtaking volume in contribution to growth

**Sanofi MAT growth ahead of market for 4<sup>th</sup> consecutive quarter**

*Allergy*

Consistently gaining market share for the past 2 years

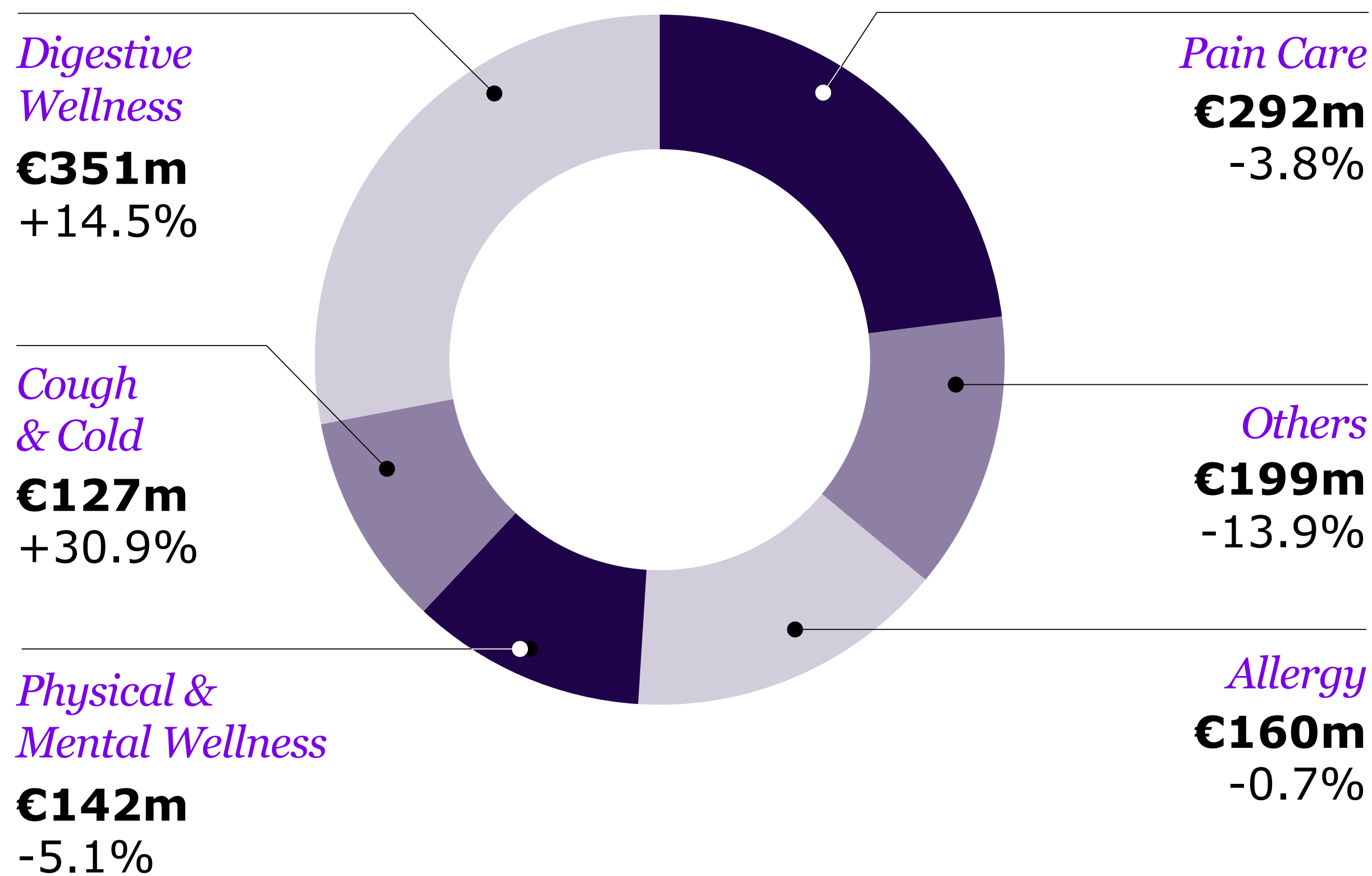
*Digestive Wellness*

5 quarters of consecutive market share gain

Market: Total retail sales of the OTC market, excl. China, incl. ~50% of the eCom channel (data provided by various vendors, e.g. IQVIA, Nielsen, IRI, Intage, and compiled by Sanofi). For abbreviations see slide 57.

# CHC *performance*

Q3 2022



**€1.3bn** sales

**+1.9%**

**Q3 organic growth**

**+3.5%**

Solid performance despite overall Q3 high base effect and divestments

Cough & Cold continues strong growth, building on momentum from longer-lasting season

Digestive Wellness robust performance in all regions

All growth at CER. Organic growth: Excluding impacts of divestments.



# *Standout performance* for Digestive Wellness

**Enterogermina®**  
*“Bellies ready”*

**#1\***  
 has become #1  
 in probiotics

**Dulcolax®**  
*“Feel good.  
 Inside & Out.”*

Did you know?  
 Nothing feels  
 as good as  
 a great poo

**#1\***  
 non-prescriptive  
 laxative

**Buscopan®**  
*“Untie your belly.  
 Untie your life”*

**#1\***  
 non-prescription  
 anti-spasmodic and Irritable  
 Bowel Syndrome remedy

**Essentiale®**  
*“I liver Life”*

**#1\***  
 non-prescription  
 liver and bile  
 remedies brand

Number 1 worldwide, source: Nicholas Hall MAT 4Q 2021.

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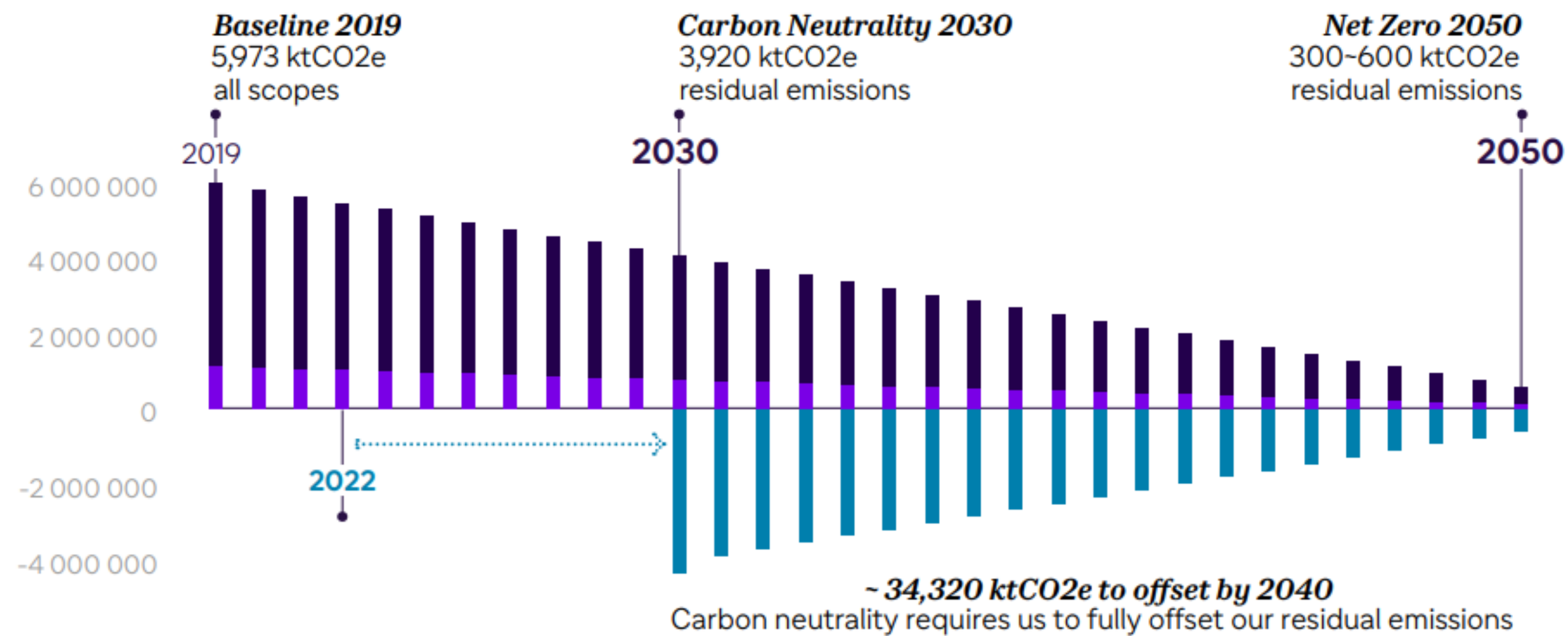


# Financial performance

*Q3 2022*



# Advancing toward *our net zero target*

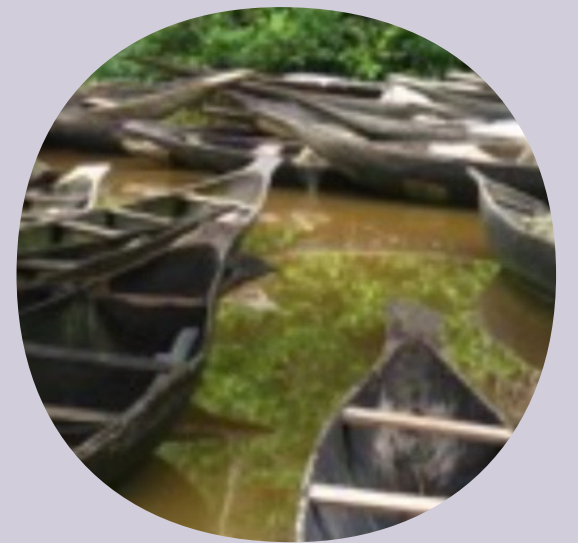


Delivering positive impact on communities and the environment

## *Mangroves*

19,500 tCO<sub>2</sub>e/year carbon removed over 20 years

- ✓ Improving biodiversity
- ✓ Additional income from mangrove timber



## *Optimized cookstoves*

52,000 tCO<sub>2</sub>e/year emissions reduction over 15 years

- ✓ Reducing disease related to smoke inhalation
- ✓ Reducing time spent collecting wood



# Q3 P&L

€m	Q3 2022	Q3 2021	% Change (CER)
<b>Net Sales</b>	<b>12,482</b>	<b>10,432</b>	<b>+9.0%</b>
Other revenues	656	397	+41.1%
Gross profit	9,307	7,591	+10.3%
Gross margin %	74.6% <sup>1</sup>	72.8% <sup>1</sup>	
R&D	(1,736)	(1,444)	+12.7%
SG&A	(2,644)	(2,266)	+6.8%
<b>Operating Expenses</b>	<b>(4,380)</b>	<b>(3,710)</b>	<b>+9.1%</b>
Other current operating income & expenses	(450)	(291)	+13.1%
<b>Business Operating Income</b>	<b>4,498</b>	<b>3,556</b>	<b>+13.0%</b>
Business operating margin	36.0% <sup>1</sup>	34.1% <sup>1</sup>	
Effective tax rate	19.0%	21.0%	
<b>Total Business Net Income</b>	<b>3,606</b>	<b>2,736</b>	<b>+17.7%</b>
Average number of shares	1,253.5	1,254.5	
<b>Business EPS</b>	<b>2.88</b>	<b>2.18</b>	<b>+17.9%</b>

All growth at CER unless footnoted. 1. At PUB.

# Transformation driving *strong 9M financial performance indicators*

	<i>9M 2022</i>	<i>9M 2021</i>	<i>Change<sup>1</sup></i>
<b>Sales</b>	<b>€32.3bn</b>	€27.8bn	<b>+8.6%</b>
<b>Gross margin</b>	<b>74.3%</b>	72.0%	<b>+1.6ppt</b>
<b>R&amp;D spend</b>	<b>€4.9bn</b>	€4.1bn	<b>+13.1%</b>
<b>BOI margin</b>	<b>32.0%</b>	30.5%	<b>+1.1ppt</b>
<b>Business EPS</b>	<b>€6.55</b>	€5.18	<b>+17.0%</b>

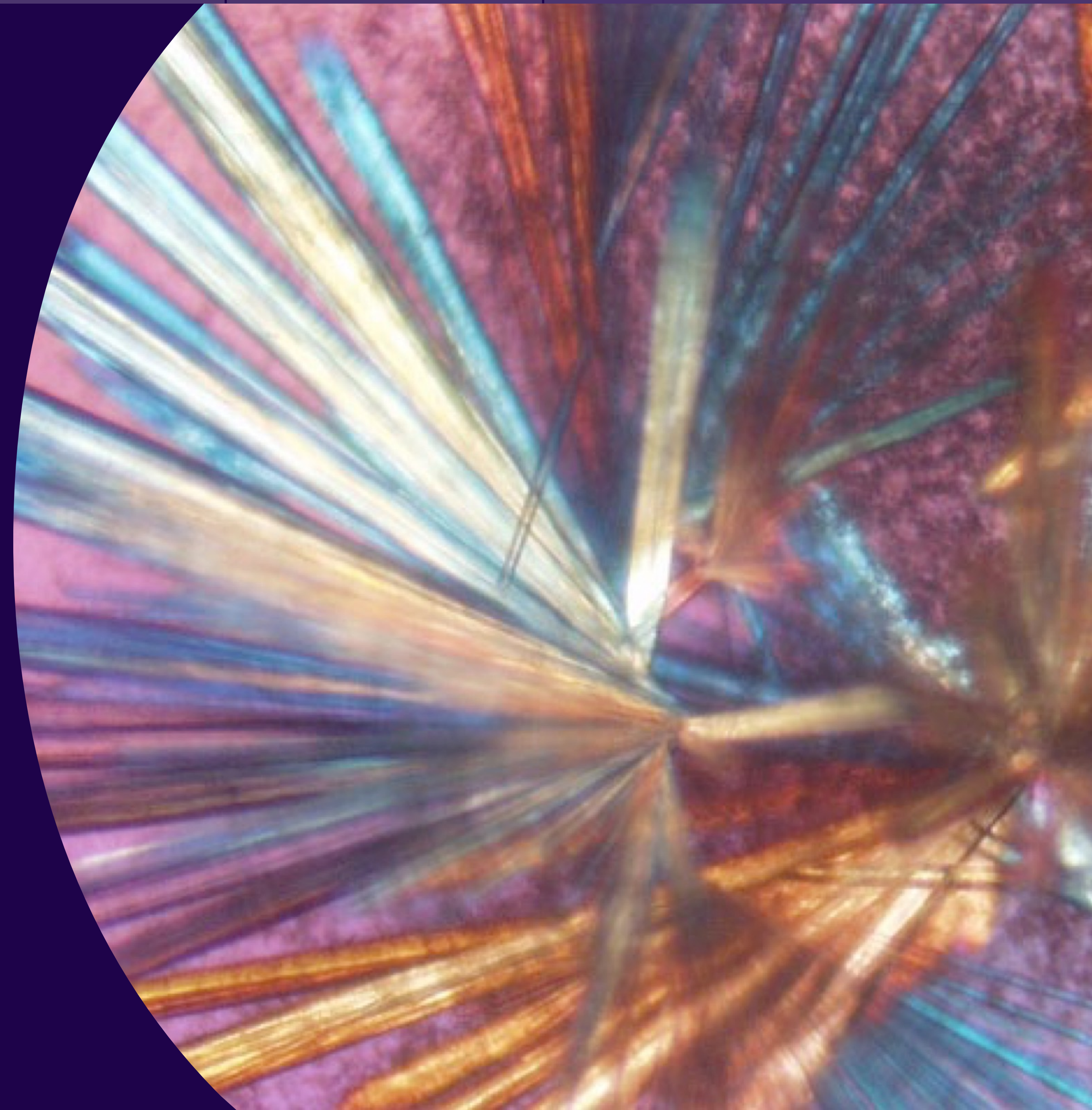
1. All growth at CER.

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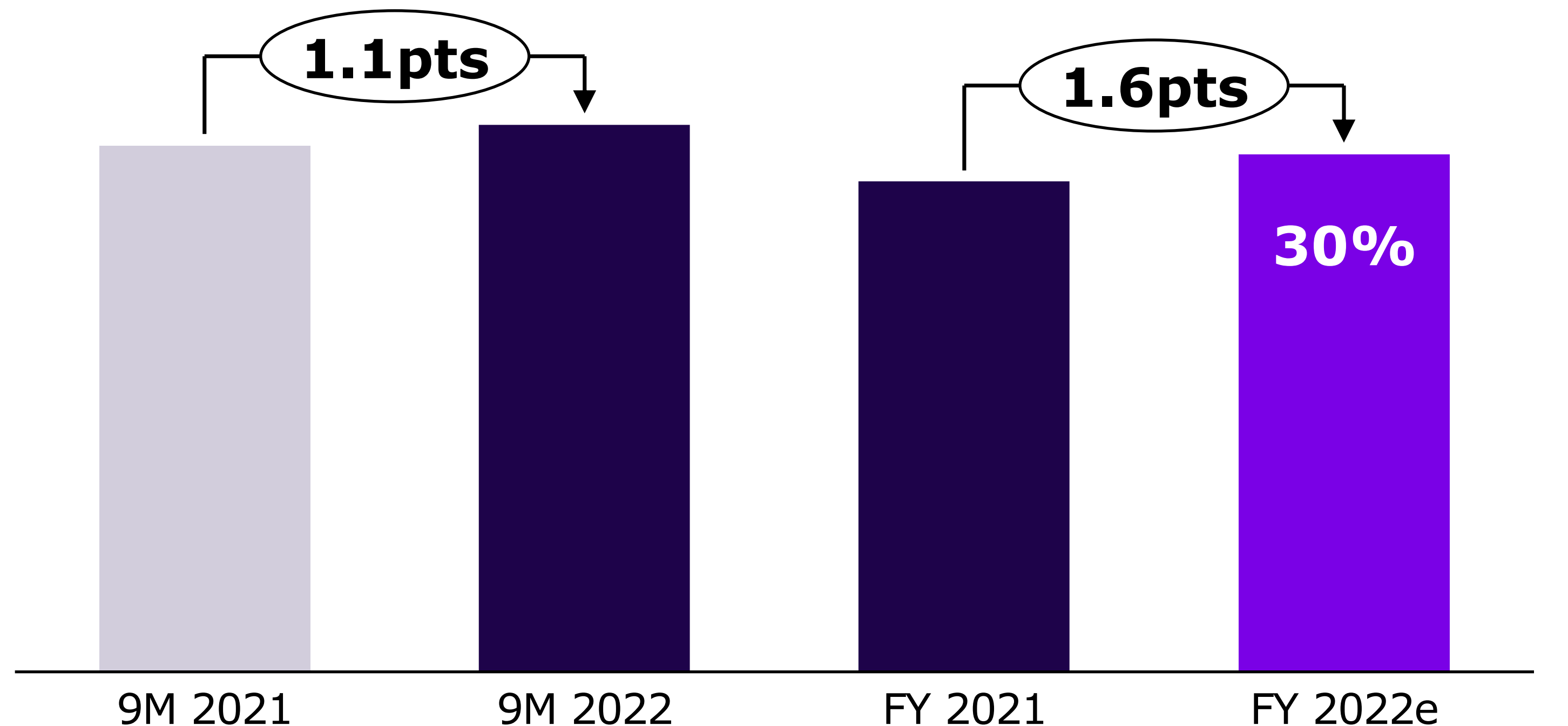
# Outlook

*H2 2022*



# Significant step up in FY 2022 *profitability* expected

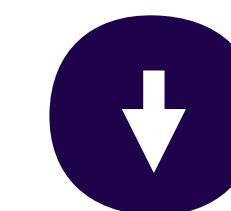
## BOI margin evolution at CER



## Q4 profitability levers:



- Dupixent<sup>®</sup>
- Capital gains from divestitures
- Lower marketing & selling expenses<sup>1</sup>



- Flu phasing
- Macroeconomic headwinds

Barring unforeseen events. 1. as part of the 2019 €2.5bn savings plan.

## *Upgraded* 2022 FY guidance

*BOI margin*

**30%**

*EPS growth*

around **16%**  
growth at CER

Approximately  
+9.5% to +10.5%  
currency impact<sup>1</sup>



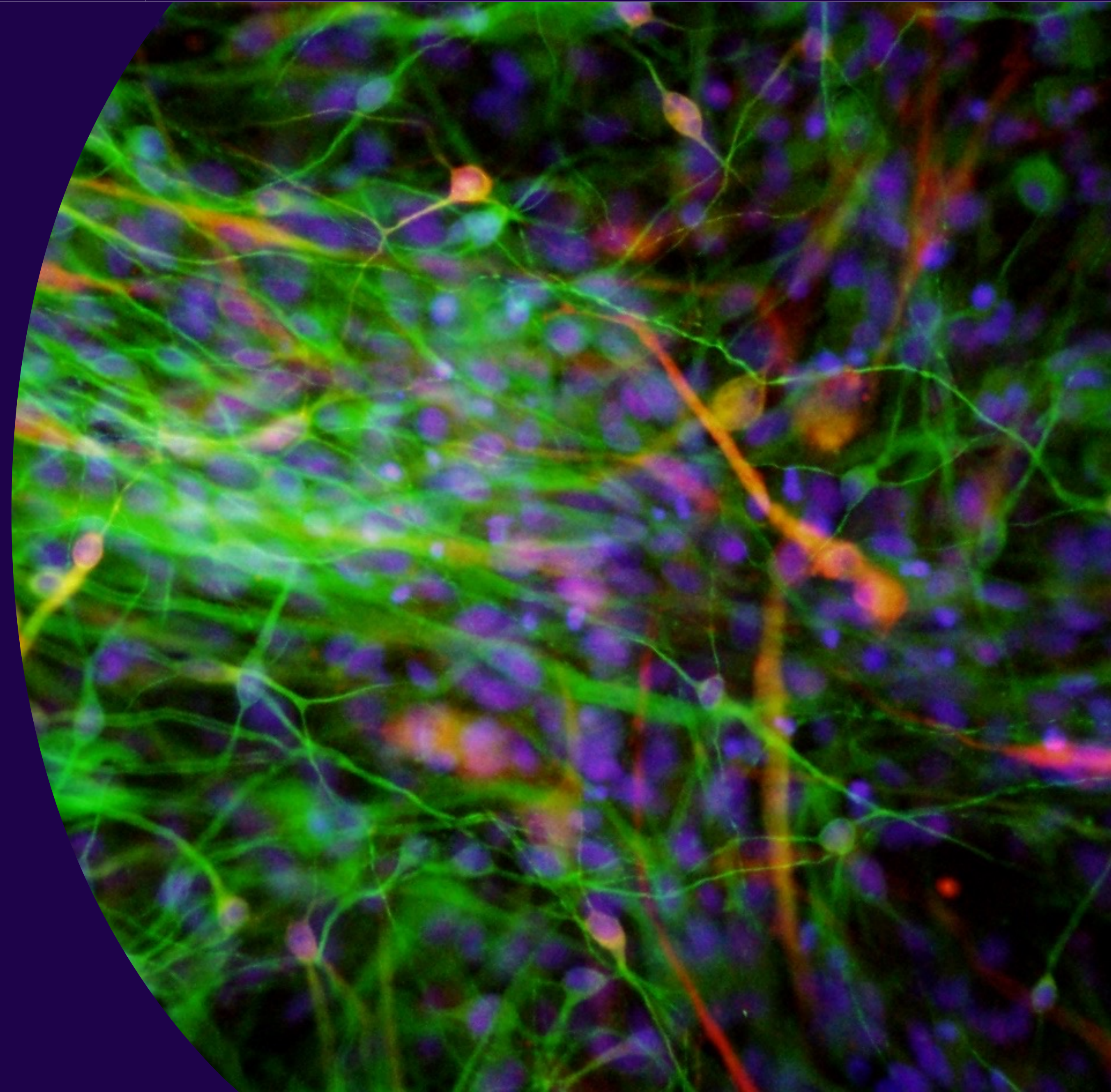


# Q&A session

**sanofi**



# R&D appendices



# Expected R&D *milestones* in 2022

		<i>H1 2022</i>	<i>H2 2022</i>	<i>Status as of Q3</i>
<b>Dupixent®</b>	EoE	U.S./EU regulatory submissions		Approved <b>U.S.</b> /Submitted <b>EU</b>
	PN	U.S./EU regulatory submissions		Approved <b>U.S.</b> /Submitted <b>EU</b>
	CSU	Pivotal trial readout (Study B)		Negative readout, program continues
	CInDU		Pivotal trial readout	Expected in H1 2023
<b>Oncology</b>	amcenestrant 2/3L mBC	Pivotal trial readout		Program discontinued
	SAR'245		Phase 3 decision	Dose optimization planned
	Sarclisa® (1L MM)		Pivotal trial readout (IMROZ)	Now expected in H2 2023
	Libtayo® (1L NSCLC CT combo)		U.S. regulatory decision	
<b>Rare Blood Disorders</b>	Altuviiiio™ (HemA)	Pivotal trial readout	U.S. submission (mid-year)	Submitted <b>U.S.</b> , priority review
	Enjaymo™ (CAD)	U.S. regulatory decision		Approved <b>U.S.</b>
<b>Rare Diseases</b>	Xenpozyme™ (ASMD)	JP regulatory decision (SAKIGAKE)	U.S. regulatory decision	Approved <b>JP/EU/U.S.</b>
<b>Vaccines</b>	Beyfortus® (RSV)	EU submission	U.S. submission	Positive opinion <b>EU</b>
	RSV Toddler		Pivotal trial decision	
	Vidprevtyn® (COVID-19 recombinant)	U.S./EU regulatory submissions		Submitted <b>EU</b>

As of September 30, 2022, barring unforeseen events. For abbreviations see slide 57.

# R&D Pipeline Phase III & Registration

## Phase III

Name	Description	Indication
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Bullous Pemphigoid
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Chronic Spontaneous Urticaria
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Chronic Obstructive Pulmonary Disease
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Chronic Inducible Cold Urticaria
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Chronic Rhinosinusitis without Nasal Polyps
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Allergic Fungal Rhinosinusitis
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Chronic Pruritus of Unknown Origin
<b>itepekimab</b> <sup>A</sup>	Anti-IL-33 mAb	Chronic Obstructive Pulmonary Disease
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb + combinations	1L Newly Diag. MM Ti (IMROZ)
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb + combinations	1L Newly Diag. MM Te (GMMG)
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb + combinations	Smoldering MM (ITHACA)
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb SubQ. + combinations	2/3L Relapsed, Refractory MM (IRAKLIA)
<b>tusamitamab ravtansine</b>	Anti-CEACAM5 ADC	2/3L NSCLC
<b>tolebrutinib</b>	BTK inhibitor	Relapsing Multiple Sclerosis
<b>tolebrutinib</b>	BTK inhibitor	Primary Progressive MS
<b>tolebrutinib</b>	BTK inhibitor	Secondary Progressive MS
<b>tolebrutinib</b>	BTK inhibitor	Myasthenia Gravis
<b>Nexviazyme</b> <sup>®</sup>	Enzyme Replacement Therapy (GAA)	Pompe Disease - Infantile Onset
<b>venglustat</b>	Oral GCS inhibitor	GM2 Gangliosidosis
<b>venglustat</b>	Oral GCS inhibitor	Gaucher Disease Type 3
<b>venglustat</b>	Oral GCS inhibitor	Fabry Disease
<b>fitusiran</b>	RNAi targeting anti-thrombin	Hemophilia A and B
<b>fitusiran</b>	RNAi targeting anti-thrombin	Hemophilia A and B pediatric
<b>rilzabrutinib</b>	BTK inhibitor	Immune Thrombocytopenia
<b>MenQuadfi</b> <sup>®</sup>	Meningococcal (A,C,Y,W) conjugate vaccine	Meningitis 6w+ (U.S. / EU)
<b>VRVg</b>	Purified vero rabies Vaccine	Rabies
<b>Beyfortus</b> <sup>®2,C</sup>	Anti-RSV mAb (HARMONIE)	Respiratory Syncytial Virus (RSV)

## Registration

Name	Description	Indication
<b>Libtayo</b> <sup>®A</sup>	Anti-PD-1 mAb + chemotherapy	1L NSCLC
<b>Altuviio</b> <sup>™1,B</sup>	rFVIIIFc – vWF – XTEN	Hemophilia A
<b>Vidprevtyn</b> <sup>®D</sup>	Recombinant baculovirus Vaccine	COVID-19
<b>Beyfortus</b> <sup>®2,C</sup>	Anti-RSV mAb	Respiratory Syncytial Virus (RSV)

- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

# R&D Pipeline – Phase II

## Phase II

	Name	Description	Indication
R	<b>Kevzara</b> <sup>®A</sup>	Anti-IL-6 mAb	Polyarticular Juvenile Idiopathic Arthritis
R	<b>Kevzara</b> <sup>®A</sup>	Anti-IL-6 mAb	Systemic Juvenile Arthritis
	<b>amlitelimab</b> <sup>1</sup>	Anti-OX40L mAb	Atopic Dermatitis
	<b>amlitelimab</b> <sup>1</sup>	Anti-OX40L mAb	Asthma
	<b>rilzabrutinib</b>	BTK inhibitor	IgG4-related disease
	<b>rilzabrutinib</b>	BTK inhibitor	Atopic Dermatitis
	<b>rilzabrutinib</b>	BTK inhibitor	Asthma
	<b>rilzabrutinib</b>	BTK inhibitor	Chronic Spontaneous Urticaria
	<b>eclitasertib</b> <sup>E,2</sup>	RIPK1 inhibitor	Cutaneous Lupus Erythematosus
	<b>frexalimab</b> <sup>F,3</sup>	Anti-CD40L mAb	Sjogren's Syndrome
	<b>frexalimab</b> <sup>F,3</sup>	Anti-CD40L mAb	Systemic Lupus Erythematosus
	<b>atuzabrutinib</b> <sup>4</sup>	BTK inhibitor (topical)	Atopic Dermatitis
	<b>SAR445088</b> <sup>5</sup>	Complement C1s inhibitor	Antibody-Mediated Rejection
	<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb	1/2L AML / ALL pediatrics
	<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb + combinations	Relapsed, Refractory Multiple Myeloma
	<b>alomfilimab</b> <sup>6</sup>	Anti-ICOS mAb	Solid tumors
	<b>tusamitamab ravtansine</b>	Anti-CEACAM5 ADC + ramucirumab	2/3L NSCLC
	<b>tusamitamab ravtansine</b>	Anti-CEACAM5 ADC	Exploratory Solid tumors
	<b>tusamitamab ravtansine</b>	Anti-CEACAM5 ADC + pembrolizumab	1L NSCLC
	<b>tusamitamab ravtansine</b>	Anti-CEACAM5 ADC + ramucirumab	Gastric cancer
	<b>SAR442720</b> <sup>G</sup>	SHP2 inhibitor + KRAS inhibitor	2L NSCLC

	Name	Description	Indication
	<b>SAR445088</b> <sup>5</sup>	Complement C1s inhibitor	CIDP
	<b>frexalimab</b> <sup>F,3</sup>	Anti-CD40L mAb	Multiple Sclerosis
	<b>SAR443820</b> <sup>E,7</sup>	RIPK1 inhibitor	Amyotrophic Lateral Sclerosis
	<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb	Warm Autoimmune Hemolytic Anemia
	<b>rilzabrutinib</b>	BTK inhibitor	Warm Autoimmune Hemolytic Anemia
	<b>SAR445088</b> <sup>5</sup>	Complement C1s inhibitor	Cold Agglutinin Disease
	<b>Fluzone</b> <sup>® HD</sup> <sup>8</sup>	Inactivated Influenza Vaccine (IIV)	Pediatric Influenza
	<b>SP0218</b>	Vero cell Vaccine	Yellow fever
	<b>SP0202</b> <sup>H</sup>	Next Generation Conjugate Vaccine	Pneumococcal
	<b>SP0125</b>	Live Attenuated Virus Vaccine	Respiratory Syncytial Virus (RSV) toddler
	<b>SP0230</b>	Multicomponent Vaccine	Meningitis B

- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

R Registrational Study (other than Phase 3)







As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57.

1. Formerly known as SAR445229/KY1005. 2. Also known as SAR443122/DNL758. 3. Also known as SAR441344. 4. Also known as SAR444727. 5. Formerly known as BIVV020. 6. Formerly known as KY1044/SAR445256. 7. Also known as DNL788. Planned to enter phase 2 in MS. 8. Also known as SP0178.

# R&D Pipeline – Phase I

## Phase I

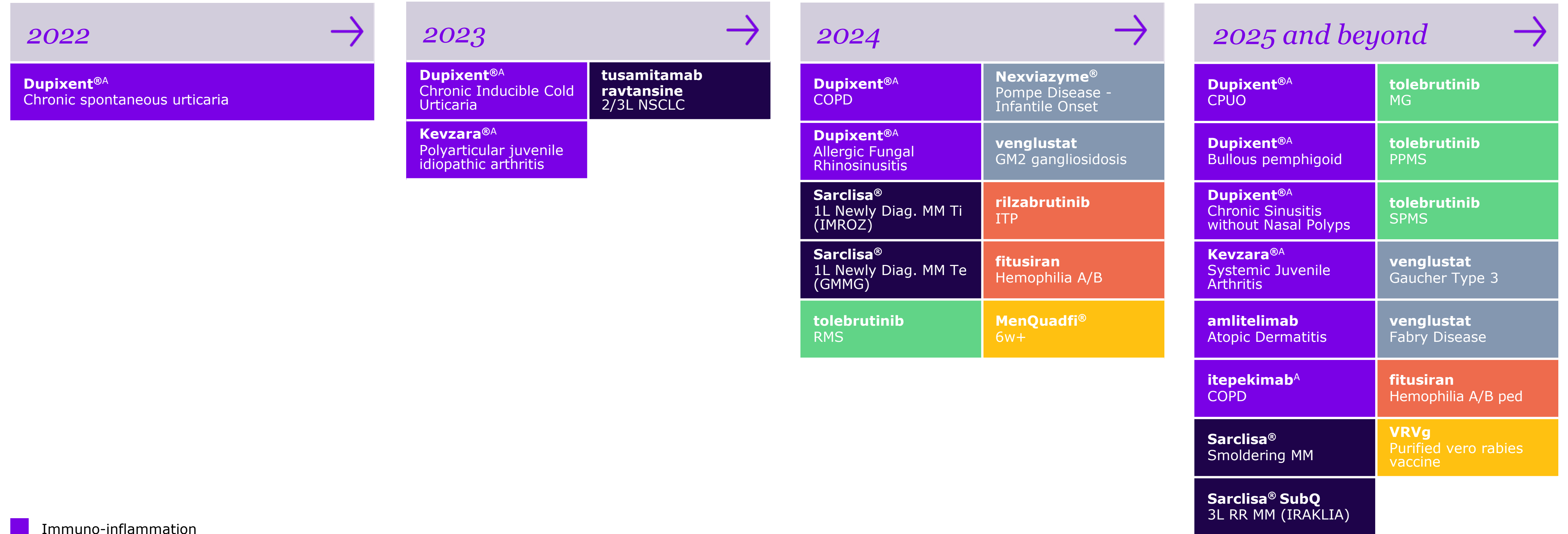
Name	Description	Indication
<b>SAR441566</b>	Oral TNF inhibitor	Inflammatory indications
<b>SAR444656</b> <sup>I,1</sup>	IRAK4 degrader	Atopic Dermatitis
<b>SAR444336</b>	Non-beta IL-2 Synthorin™	Inflammatory Indication
<b>SAR442970</b>	Anti-TNFα/OX40L Nanobody® VHH	Inflammatory Indication
<b>SAR443765</b>	Anti-IL-13/TSLP Nanobody® VHH	Inflammatory Indication
<b>SAR441000</b> <sup>J</sup>	Cytokine mRNA	Solid tumors
<b>SAR442257</b>	Anti-CD38/CD28/CD3 trispecific mAb	MM / N-H Lymphoma
<b>SAR442720</b> <sup>G</sup>	SHP2 inhibitor + combinations	Solid tumors
<b>SAR444881</b> <sup>K</sup>	Anti-ILT2 mAb	Solid tumors
<b>SAR445419</b> <sup>2</sup>	NK-cell-based immunotherapy	Acute Myeloid Leukemia
<b>SAR443216</b>	Anti-CD3/CD28/HER2 trispecific mAb	Gastric cancer
<b>SAR445710</b> <sup>3</sup>	Anti-PD-L1/IL-15 fusion protein	Solid tumors
<b>SAR443579</b> <sup>L</sup>	Anti-NKp46/CD123 bispecific mAb	Acute Myeloid Leukemia
<b>SAR446309</b> <sup>4</sup>	HER2 T-Cell engager	Solid tumors
<b>SAR444200</b>	Anti-GPC3/TCR Nanobody® VHH	Solid tumors
<b>SAR444245</b> <sup>5</sup>	Non-alpha IL-2 Synthorin™ (dose optimization)	Solid tumors
<b>SAR442501</b>	Anti-FGFR3 Ab	Achondroplasia
<b>SAR443809</b>	Anti-Factor Bb mAb	Rare renal diseases
<b>SP0273</b>	mRNA QIV	Influenza

	Immuno-inflammation
	Oncology
	Neurology
	Rare Diseases
	Rare Blood Disorders
	Vaccines

As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57.

1. Also known as KT474. 2. Formerly known as KDS1001. 3. Formerly known as KD033. 4. Formerly known as AMX-818. 5. Formerly known as THOR707.

# Expected submission timelines



- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

As of September 30, 2022. For collaborations see slide 56. For abbreviations see slide 57. Excluding Phase 1 and 2 (without Proof of Commercial Concept); Projects within a specified year are not arranged by submission timing.

# Reinforcing *Protection Beyond Flu* with data from innovative study design

## DANFLU-1



### Study design



- Individually-randomized pragmatic study of **Efluelda** vs SD in adults 65-79 years
- Conducted in Denmark in 2021/22 season, enrolling 12K+ subjects from Danish National Registry

### Study objectives



- Assess feasibility of pragmatic individually-randomized study design
- Descriptively assess rVE for flu/pneumonia hospitalization and cardio-respiratory hospitalization, as well as all-cause hospitalization and mortality endpoints

### Results



- Efluelda associated with **reduced rates of flu/pneumonia hospitalizations** compared to SD, with rVE=64.4% (95% CI 24.4,84.6)
- Also associated with reduced risk of death from all causes, with rVE=48.9% (95% CI 11.5,71.3)
- Demonstrated feasibility of this innovative study design, integrating individual randomization into RWE generation
- Builds the infrastructure for DANFLU-2, a large-scale study designed to assess rVE of QIV-HD vs SD against flu/pneumonia and cardio-respiratory hospitalizations, plus additional clinical endpoints, in a powered, individually randomized pragmatic setting

## VAP03



### Study design



- High-quality of evidence with a modified-cluster randomized pragmatic trial comparing **Flublok** to SD
- Largest randomized influenza vaccine effectiveness study ever conducted, with 2.4m randomized in the US from 2018 to 2021
- Study sponsor: Kaiser Permanente

### Study objectives



- Use RWE to demonstrate RIV4 performance over SoC in adults 50-64 years to prevent lab-confirmed influenza & hospitalizations (primary & secondary endpoints)

### Results



- Primary endpoint met, confirming **improved performance of Flublok over SD to prevent PCR-confirmed flu cases** in adults 50-64 with a rVE=15.4% (95% CI 6.0,23.9)
- Secondary endpoint for PCR-confirmed influenza A cases in 50-64 year olds was met and statistically significant (rVE 15.9%; 95% CI 6.1, 24.6)
- All hospitalization secondary endpoints in 50-64 & 18-64 trending in favor of Flublok vs SD, although not statistically significant (the study lacks power to conclude)
- In a post-hoc analysis of 50-64 at-risk population, a statistically significant rVE of 14.6% (95% CI 2.7,25.0) for PCR+ influenza cases was observed, consistent with the primary endpoint rVE point estimate



# Beyfortus<sup>®C</sup> the *first and only* broadly protective option against RSV for all infants

Supported by strong efficacy and safety data

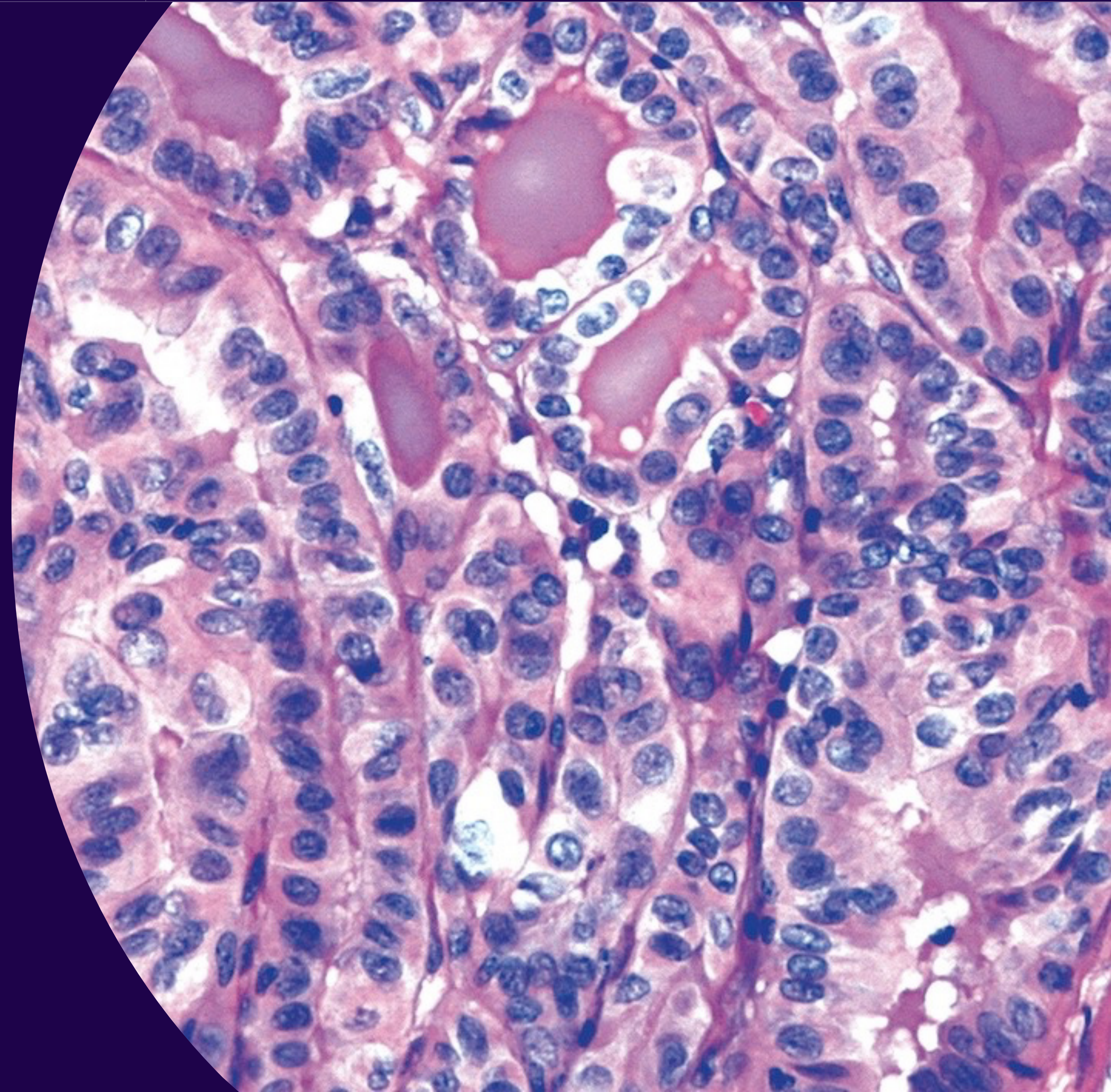
Study	Population	RSV MA LRTI	RSV Hospitalizations
<b>Phase 2b</b>	29 -<35 WGA	<b>70.1%</b> (52.3-81.2)	<b>78.4%</b> (51.9-90.3)
<b>Phase 2b</b> (Commercial dose)	29 -<35 WGA	<b>86.2%</b> (68.0-94.0)	<b>86.5%</b> (53.5-96.1)
<b>Phase 3</b> (MELODY Primary cohort)	≥35 WGA	<b>74.5%</b> (49.6-87.1)	<b>62.1%</b> (-8.6-86.8)
<b>Pre-specified Pooled</b> (Phase 2b Commercial dose & MELODY Primary cohort)	29 WGA – full term	<b>79.5%</b> (65.9-87.7)	<b>77.3%</b> (50.3-89.7)
<b>MELODY all subjects</b> <b>(Primary + Safety Cohorts)</b>	≥35 WGA	<b>76.4%</b> (62.3-85.2)	<b>76.8%</b> (49.4-89.4)

Safety: All MELODY safety cohort provided data with over 3,000 infants. No safety signals were identified with a profile like placebo, and no concerns related to enhanced RSV disease in the 2nd season were seen upon follow-up.  
Note: Pooling Ph2b Commercial dose + Melody All Subjects data showed 80.6% reduction against hospitalization due to RSV MA LRTI presented at ACIP meeting in October 2022. For abbreviations see slide 57.

**.sanofi**



# Financial appendices



# 2022 business *outlook*

## *Sales*

### Specialty Care

Growth driven by Dupixent<sup>®</sup>,  
N&I slightly down, all other  
franchises growing

### Vaccines

Record flu season sales

### Consumer Healthcare

Growth of priority brands above  
market in key geographies

### GenMed

Core assets expected to continue  
to grow; overall GBU sales  
slightly down

### EUROAPI

Deconsolidation of sales  
from May

## *P&L*

*Gross margin* improvement due to  
product mix and efficiencies, weighted  
toward the first half of 2022

Increase in *R&D investment* to further  
strengthen the pipeline

*Capital gains* from product disposals  
expected to reach approximately €600m,  
the majority in the second half of 2022

*Tax rate* of around 19%

# 9M P&L

€m	9M 2022	9M 2021	% Change (CER)
<b>Net Sales</b>	<b>32,272</b>	<b>27,767</b>	<b>+8.6%</b>
Other revenues	1,661	993	+49.2%
Gross profit	23,975	19,980	+11.1%
Gross margin %	74.3% <sup>1</sup>	72.0% <sup>1</sup>	
R&D	(4,883)	(4,107)	+13.1%
SG&A	(7,597)	(6,797)	+4.6%
<b>Operating Expenses</b>	<b>(12,480)</b>	<b>(10,904)</b>	<b>+7.8%</b>
Other current operating income & expenses	(1,238)	(590)	+64.2%
<b>Business Operating Income</b>	<b>10,316</b>	<b>8,458</b>	<b>+12.8%</b>
Business operating margin	32.0% <sup>1</sup>	30.5% <sup>1</sup>	
Effective tax rate	19.0%	21.0%	
<b>Total Business Net Income</b>	<b>8,200</b>	<b>6,483</b>	<b>+16.9%</b>
Average number of shares	1,251.2	1,251.7	
<b>Business EPS</b>	<b>6.55</b>	<b>5.18</b>	<b>+17.0%</b>

All growth at CER unless footnoted. 1. At PUB.

# Main product *sales*

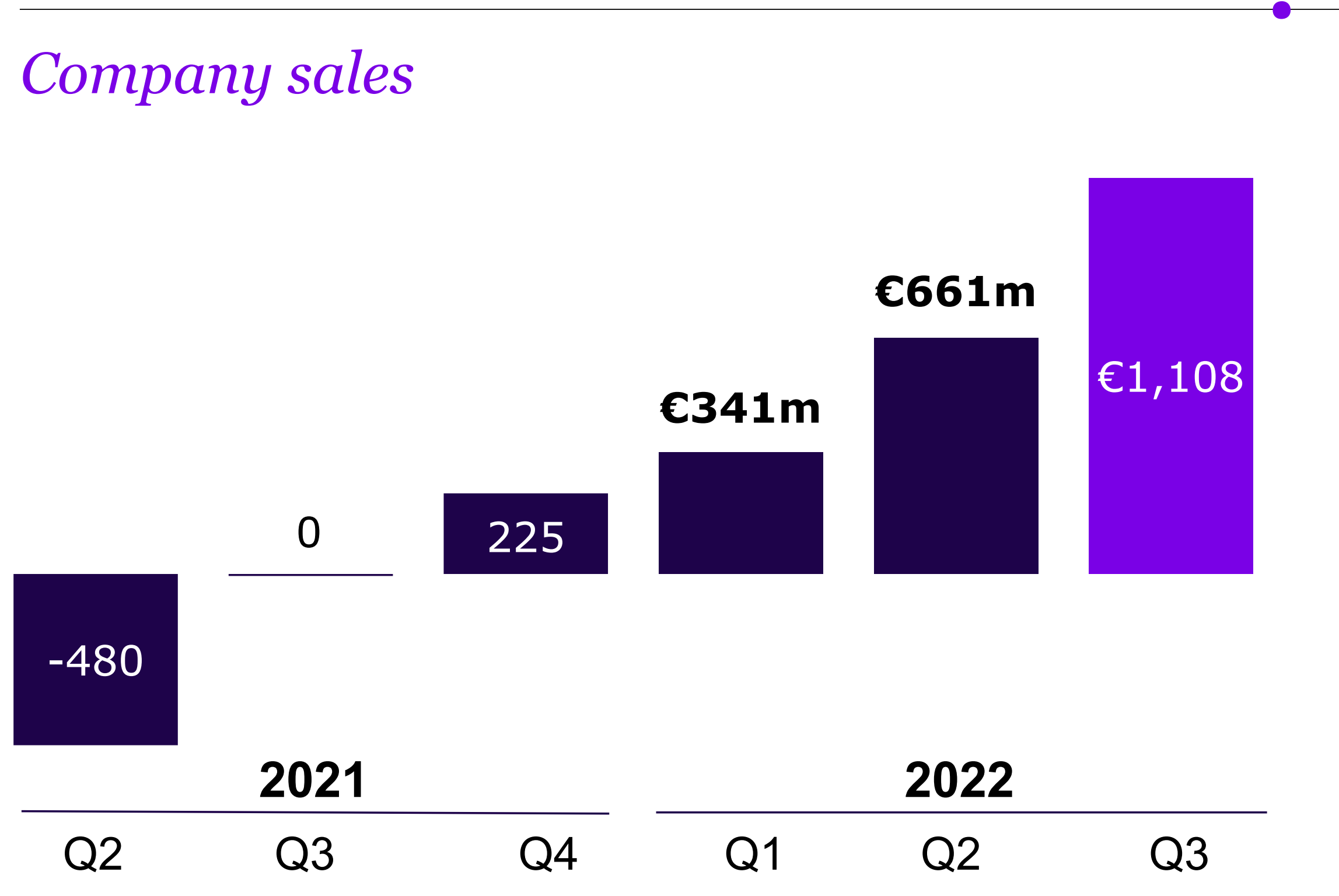
	<i>Q3 2022 sales (€m)</i>	<i>Growth</i>
Dupixent	2,314	44.5%
Influenza Vaccines (Fluzone HD, Flubok, Fluzone, Vaxigrip)	1,994	32.4%
Lantus	559	-17.7%
Aubagio	521	-3.7%
Meningitis Vaccines (MenQuadfi, Menactra)	328	11.9%
Lovenox	307	-23.0%
Toujeo	304	17.2%
Myozyme	255	-10.2%
Fabrazyme	240	5.7%
Plavix	230	-1.4%
Pentaxim	205	-2.4%
Cerezyme	181	8.8%
Hexaxim	178	64.7%
Eloctate	151	-7.6%
Depakine	129	2.5%
Aprovel	129	11.2%
Alprolix	126	8.9%
Adacel	124	-0.9%
Thymoglobulin	118	15.4%
Allegra <sup>1</sup>	116	3.0%
Multaq	101	10.1%
Jevtana	101	-13.3%

All growth at CER unless footnoted. 1. Figure only reflects over the counter sales reported from CHC.

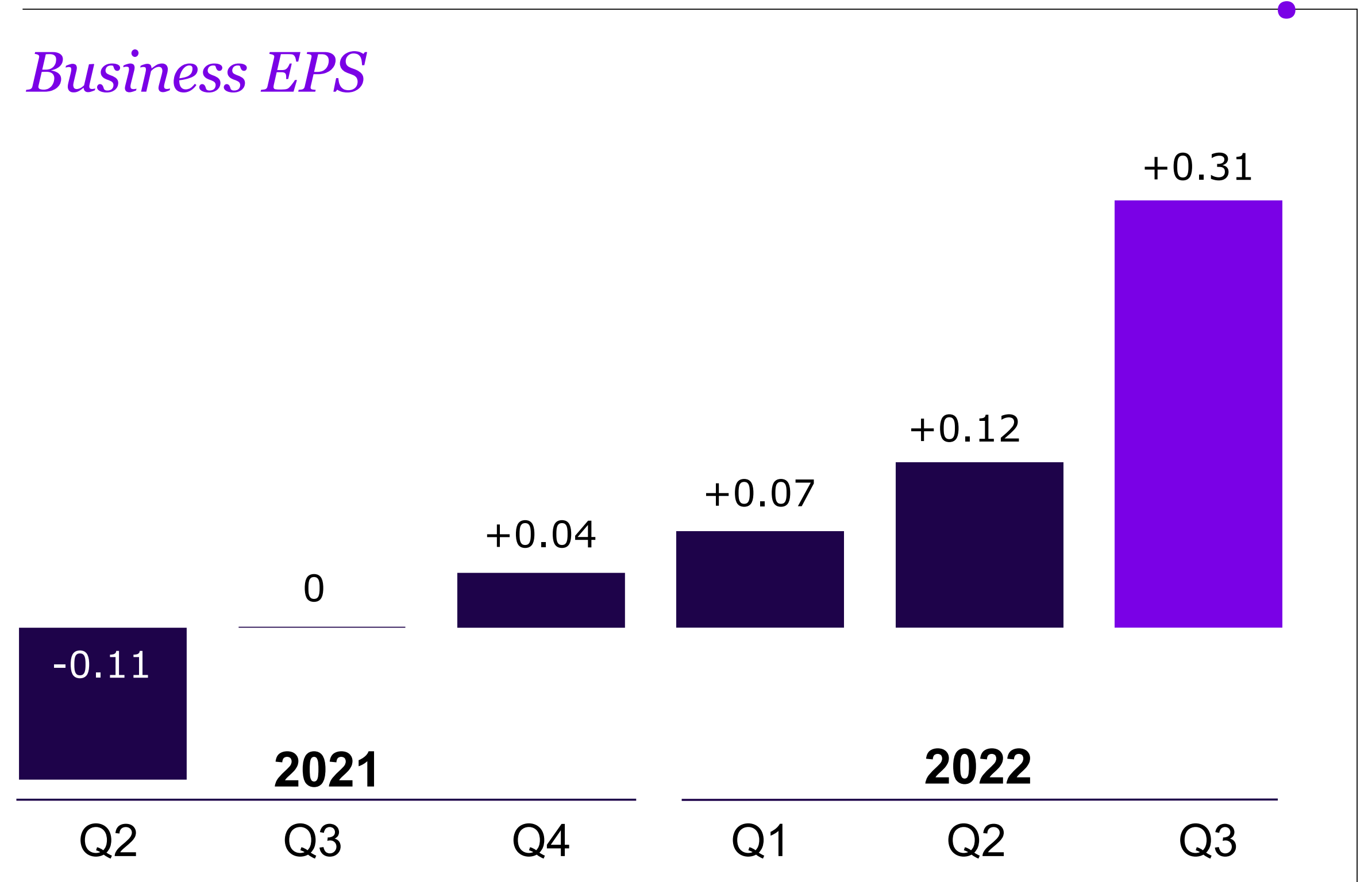
# Q3 sales and EPS

## Currency impact

*Company sales*

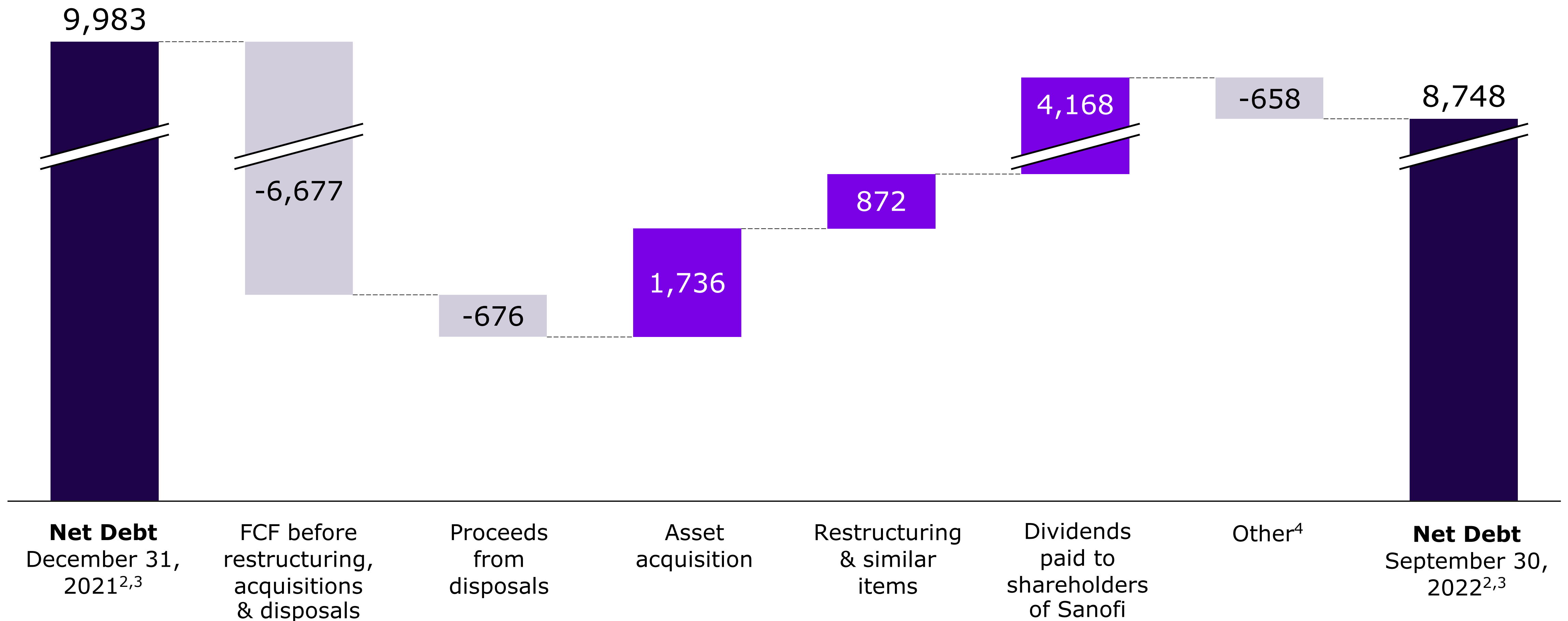


*Business EPS*



# Net debt evolution in 9M 2022<sup>1</sup>

€ millions



1. Credit ratings reaffirmed: Moody's A1/stable, S&P AA/stable, Scope AA/stable as of September 30, 2022. 2. Including derivatives used to manage net debt: -€226m at December 31, 2021 and €71m at September 30, 2022. 3. Effective January 1, 2019, net debt does not include lease liabilities following the first-time application of IFRS16. 4. Including €856m upfronts and milestones payments relating to the Libtayo deal with Regeneron €360m use of funds from acquisition of treasury shares and €176m of proceeds from issuance of Sanofi shares.

## 2022 currency sensitivity and Q3 2022 currency exposure

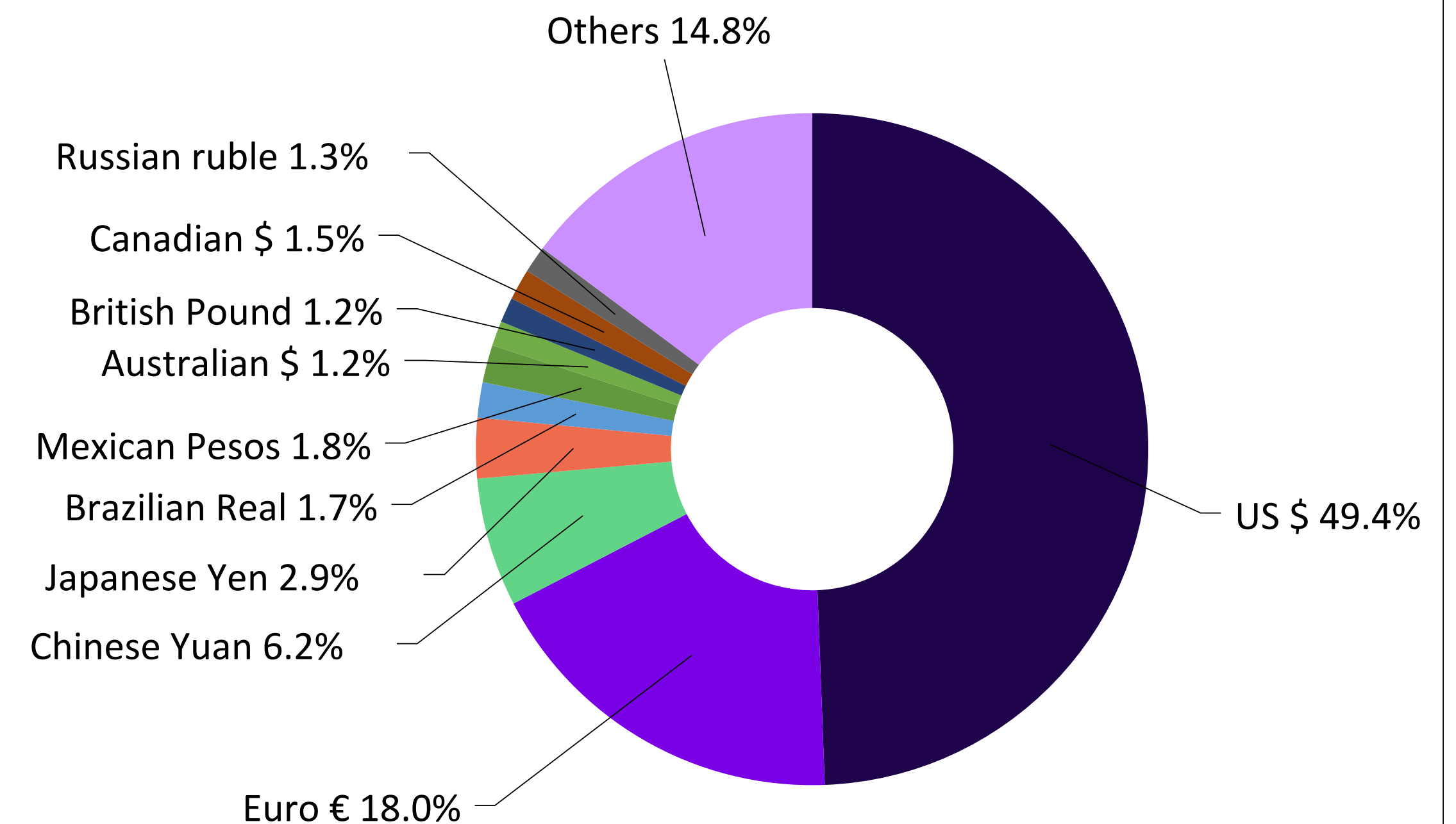
### 2022 Business EPS currency sensitivity

Currency	Variation	Business EPS sensitivity
U.S. Dollar	+ 0.05 USD/EUR	- EUR 0.15
Japanese Yen	+ 5 JPY/EUR	- EUR 0.02
Chinese Yuan	+ 0.2 CNY/EUR	- EUR 0.02
Brazilian Real	+ 0.4 BRL/EUR	- EUR 0.01
Russian Ruble	+ 10 RUB/EUR	- EUR 0.02

### Currency average rates

	Q3 2021	Q3 2022	% change
EUR/USD	1.179	1.007	-14.6%
EUR/JPY	129.79	139.33	+7.4%
EUR/CNY	7.63	6.91	-9.4%
EUR/BRL	6.16	5.29	-14.2%
EUR/RUB	86.60	60.01	-30.7%

### Currency exposure on Q3 2022 sales





# Sanofi accounting of Antibody License and Collaboration Agreement with Regeneron<sup>1</sup>

Last updated July 2022

		<i>U.S.</i>	<i>Ex-U.S.</i>
Net sales		Sanofi consolidates worldwide net sales	
Cost of sales		Sanofi consolidates worldwide cost of sales	
R&D expense		Development costs funded upfront by Sanofi until first positive Phase 3; subsequent costs funded 80% Sanofi / 20% Regeneron <i>Regeneron 20% reimbursement recorded as a reduction of Sanofi R&amp;D expense</i>	
SG&A expense		Sanofi expenses 100% of its commercial expenses	
Other operating income and expenses	1. Regeneron SG&A spend	Sanofi reimburses Regeneron for 100% of Regeneron's commercial expenditures	
	2. Development balance compensation <sup>2</sup>	Additional portion of Regeneron's profit-share ( <i>capped at 20% of Regeneron's share of quarterly profits on all Antibody products combined<sup>3</sup></i> ) until Regeneron reaches 50% of the cumulative development costs incurred by the parties <b>Cap increased from 10 to 20% as per the Fifth Amendment to the Antibody License and Collaboration Agreement dated June 1, 2022. 20 % cap will be retroactive as of April 1, 2022 and accounted for as of Q3 2022.</b>	
	3. Collaboration profitable	Outflow: Sanofi expenses 50% of profit; paid to Regeneron	Outflow: Sanofi expenses 35% to 45% of profit; paid to Regeneron
	4. Collaboration in a loss	Inflow: Sanofi recognizes reimbursement of 50% loss from Regeneron	Inflow: Sanofi recognizes reimbursement of 45% loss from Regeneron
Amortization of intangibles (IFRS)	Sales milestones		Regeneron entitled to receive up to \$250m in milestones starting from \$1bn ex-US sales <sup>4</sup>

1. Following expiry of the Antibody Discovery Agreement in December 2017, Dupixent®, Kevzara® and itepekimab (SAR440340) continue to be developed and commercialized with Regeneron under the Antibody License and Collaboration Agreement (LCA) signed in November 2007, Amended and Restated November 2009, further amended May 2013 and July 2015, restructured in April 2020 and further amended in October 2021 and June 2022. 2. As of December 31, 2021, such commitments received were \$3.2bn, relative to cumulative development costs of \$8.5bn, of which \$7.7bn were incurred by Sanofi; balance includes costs for Dupixent®, Kevzara® and itepekimab as well as Praluent® through March 31, 2020. 3. Including Dupixent®, Kevzara® and itepekimab. 4. Praluent® removed from LCA at April 2020 restructuring, but ex-US sales of Praluent® remain included in calculation of sales milestones.

# Sanofi Libtayo<sup>®</sup> accounting pursuant to Immuno-Oncology License and Collaboration Agreement with Regeneron<sup>1</sup>

Applicable before Amended and Restated IO License and Collaboration Agreement effective July 1, 2022

		<i>U.S.</i>	<i>Ex-U.S.</i>
Net sales		Consolidated by Regeneron	Consolidated by Sanofi
Cost of sales		Consolidated by Regeneron	Consolidated by Sanofi
R&D expenses		Sanofi reimburses 50% of development expenses incurred during quarter	
SG&A expenses		Sanofi expenses 100% of its commercial expenses	
Other operating income and expenses	1. SG&A reimbursement	Inflow: Regeneron reimburses 100% of Sanofi's US commercial expenses	Outflow: No Regeneron commercial expenses ex-US
	2. Development balance compensation	Regeneron reimburses 50% of pre-POC development costs <sup>2</sup> quarterly <sup>3</sup>	
	3. Collaboration profitable	Inflow: Sanofi recognizes 50% of collaboration's profits	Outflow: Sanofi expenses 50% of profits; to be paid to Regeneron
	4. Collaboration in a loss	Outflow: Sanofi expenses 50% of losses; to be paid to Regeneron	Inflow: Sanofi recognizes reimbursement of 50% of collaboration's losses
Amortization of intangibles (IFRS)	Sales milestones	Regeneron to receive \$375m milestone when sales of Libtayo <sup>®</sup> exceed \$2bn over any consecutive 12-month period	

1. On July 1, 2015, Sanofi and Regeneron entered into an Immuno-Oncology (IO) Discovery and Development Agreement (amended and restated as of December 31, 2018 and terminated as of March 16, 2021) and an IO License and Collaboration Agreement (IO LCA). On June 1, 2022, Sanofi and Regeneron signed an Amended and Restated IO LCA, effective July 1, 2022. 2. As of December 31, 2021, amounts to \$103m primarily for bi-specifics LAG3 and CTLA-4 development programs conducted in the frame of the IO Discovery Agreement terminated in Q1 2021. 3. Capped at 10% of Regeneron profit share per quarter.

# Sanofi Libtayo<sup>®</sup> accounting pursuant to *Amended and Restated* Immuno-Oncology License and Collaboration Agreement with Regeneron effective July 1, 2022<sup>1</sup>

		<i>U.S.</i>	<i>Ex-U.S.</i>
Net sales		Consolidated by Regeneron	
Other revenues		Manufacturing Services Fees paid by Regeneron to Sanofi during transition period <sup>2</sup>	
Cost of sales		Consolidated by Regeneron	
R&D expenses		Regeneron supports 100% of development expenses	
SG&A expenses		Expensed by Regeneron	Expensed by Sanofi Transition Service Fees paid by Regeneron <sup>3</sup>
Other operating income and expenses (in BOI)	1. TDA fees <sup>4</sup>	n/a	Agent fee (% sales) paid by Regeneron
	2. Royalties (retroactive April 1, 2022)	11% royalties on worldwide net sales paid by Regeneron	
	3. Development balance compensation	Development Balance reduced to \$35m and reimbursed by Regeneron based on 0.5% of worldwide net sales	
	4. Sales Milestones	Sanofi to receive up to \$100m sales milestones over 2022 and 2023	
Other operating income (excluded from BOI)	1. Upfront	Sanofi to receive \$900m (paid in July 2022)	
	2. Development milestone	Sanofi to receive \$100m upon FDA or EMA approval of combo Libtayo <sup>®</sup> / chemotherapy in NSCLC	

1. On June 1, 2022, Sanofi and Regeneron signed an Amended and Restated IO LCA, effective July 1, 2022. 2. As per Manufacturing Services Agreement (until Dec. 31, 2024, extendable to Dec. 31, 2025).  
3. As per Transition Services Agreement (US until Dec.31, 2022 & ex-US until June 30, 2024). 4. As per Transitional Distribution Agreement (ex-US until July 1, 2026).

sanofi



# ESG appendices



# Sanofi ESG Q3 *achievements*

## Affordable access



### Global Health Unit #Patients treated

Q2 2022	Q3 2022
<b>Malaria</b> <b>1,693,770</b> <b>10</b> countries	<b>Malaria</b> <b>2,000,995</b> <b>13</b> countries
<b>Tuberculosis</b> <b>76,634</b> <b>13</b> countries	<b>Tuberculosis</b> <b>98,542</b> <b>13</b> countries
<b>NCD</b> <b>85,956</b> <b>21</b> countries	<b>NCD</b> <b>109,934</b> <b>24</b> countries

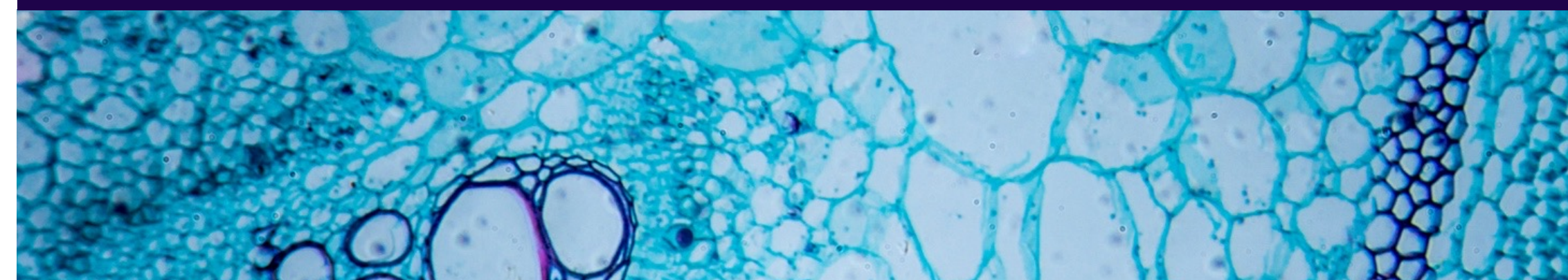
### Rare disease vials donation

Q2 2022	Q3 2022
<b>1,015</b> patients treated	<b>1,064</b> patients treated
<b>51,370</b> vials donated	<b>76,494</b> vials donated

### Global access plan

Q2 2022	Q3 2022
Pilot completed Blueprint completed	Governance in place and roll-out across all GBUs

## R&D for unmet needs



### Polio eradication

Q2 2022	Q3 2022
<b>27 million IPV doses</b> supplied to UNICEF	<b>38 million IPV doses</b> supplied to UNICEF

### Sleeping sickness elimination

FY 2021 <sup>1</sup>	FY 2022
<b>2 million</b> patients tested for HAT	Data updated annually
<b>805</b> patients treated	

### Pediatric cancer treatment development

Q2 2022	Q3 2022
<b>1</b> asset in pre-clinical assessments	<b>1</b> asset in pre-clinical assessments
<b>1</b> asset in protocol preparation for clinical study	<b>1</b> asset in protocol preparation for clinical study

Data in YTD unless stated otherwise. 1. Data provided by WHO.

# Sanofi ESG Q3 *achievements*

## Planet care



### Blister-free syringe vaccines

Q4 2021	Q3 2022
29% of blister free syringe vaccines produced	Data updated annually <span style="color: green;">●</span>

### Scope 1 & 2 GHG emissions reduction

Q2 2022	Q3 2022
-27% vs 2019	-28.3% vs 2019 <span style="color: green;">●</span>

### Eco-design

Q2 2022	Q3 2022
5 LCAs completed & 3 in progress	7 LCAs completed & 1 in progress
Eco-design digital solutions project in progress	Eco-design digital solutions project in progress <span style="color: green;">●</span>

### Renewable electricity & eco-car fleet

Q2 2022	Q3 2022
60% renewable electricity	61.4% renewable electricity <span style="color: green;">●</span>
30.4% eco-fleet	32.7% eco-fleet <span style="color: green;">●</span>

## In and beyond the workplace



### Diverse Senior Leadership

Q2 2022	Q3 2022
35.9% of our executives and 41.1% of our senior leaders were women	36.2% of our executives and 41.4% of our senior leaders were women <span style="color: green;">●</span>

### Engagement with communities

Q2 2022	Q3 2022
1,998 volunteers	3,498 volunteers <span style="color: green;">●</span>
12,687 hours	25,265 hours

### From Leaders to Citizens

Q2 2022	Q3 2022
Rollout planned in 2022	Program launched <span style="color: green;">●</span>

Data in YTD unless stated otherwise.

# Sanofi ESG ratings

## Rating agencies



SCORE									
86/100	21.6 Medium risk	69/100	A	Climate Change: A Water: A	B	4.3/5	3.47/5	92%	64/100
New rating	▲ 22	▼ 74/100	▬ A	▲ A-	▬ B	▲ 4.2/5	▲ 2.49/5	▲ 90%	▲ 62/100
One of the highest scores across all sectors globally 80 points for its solid fundamentals & strong preparedness opinion of 6 points	12 <sup>th</sup> among 455 pharmaceutical companies	Percentile of 92 within 143 scored companies in the industry	Within the top 6 highest rated pharmaceutical companies	Leading position	1 <sup>st</sup> decile of the 476 companies in the industry	With very high rating across the 3 pillars ESG	Top 5 company	Sanofi's disclosure score well above sector disclosure score (74%)	1 <sup>st</sup> pharmaceutical company out of 57 Score in progress since 2018

▲ Vs previous rating

Scores assigned by the rating agencies are not equivalent.

# Collaborations

Ref	Name	Developed in collaboration with...
A	<b>Dupixent®</b> <b>itepekimab</b> <b>Libtayo®</b> <b>Kevzara®</b>	Regeneron
B	<b>Altuviio®</b>	Sobi
C	<b>Beyfortus®</b>	AstraZeneca
D	<b>Vidprevtyn®</b>	GSK and with funding from Biomedical Advanced Research and Development Authority (BARDA)
E	<b>ecclitasertib</b> <b>SAR443820</b>	Denali
F	<b>frexalimab</b>	Immunext
G	<b>SAR442720</b>	Revolution Medicines
H	<b>SP0202</b>	SK
I	<b>SAR444656</b>	Kymera
J	<b>SAR441000</b>	BioNTech
K	<b>SAR444881</b>	Biond
L	<b>SAR443579</b>	Innate Pharma



# Abbreviations

<b>Ab</b>	Antibody
<b>AD</b>	Atopic Dermatitis
<b>ADC</b>	Antibody Drug Conjugate
<b>ALL</b>	Acute Lymphoblastic Leukemia
<b>AML</b>	Acute Myeloid Leukemia
<b>ASMD</b>	Acid Sphingomyelinase Deficiency
<b>BTK</b>	Bruton's Tyrosine Kinase
<b>CAD</b>	Cold Agglutin Disease
<b>CD</b>	Cluster of Differentiation
<b>CEACAM5</b>	Carcinoembryonic Antigen Cell Adhesion Molecule 5
<b>CI</b>	Confidence Interval
<b>CIDP</b>	Chronic Inflammatory Demyelinating Polyneuropathy
<b>CInDU</b>	Chronic Inducible Cold Urticaria
<b>COPD</b>	Chronic Obstructive Pulmonary Disease
<b>CPUO</b>	Chronic Pruritus of Unknown Origin
<b>CSU</b>	Chronic Spontaneous Urticaria
<b>EoE</b>	Eosinophilic Esophagitis
<b>FGFR3</b>	Fibroblast Growth Factor Receptor 3
<b>GAA</b>	Acid Alpha-Glucosidase
<b>GCS</b>	Glucosylceramide Synthase
<b>GPC3</b>	Glypican-3
<b>HER2</b>	Human Epidermal growth factor Receptor 2
<b>IA</b>	Interim analysis

<b>ICOS</b>	Inducible COStimulatory molecule
<b>IL</b>	Interleukin
<b>ILT2</b>	Ig-like transcript 2
<b>IRAK4</b>	Interleukin 1 Receptor Associated Kinase 4
<b>ITP</b>	Immune Thrombocytopenia
<b>KRAS</b>	Kirsten Rat Sarcoma virus
<b>LNP</b>	Lipid Nanoparticles
<b>LOPD</b>	Late-onset Pompe Disease
<b>LRTI</b>	Lower Respiratory Track Infection
<b>mAb</b>	monoclonal Antibody
<b>MA LRTI</b>	Medically Attended Lower Respiratory Tract Infections (inclusive of hospitalization)
<b>MAT</b>	Moving Annual Total
<b>mBC</b>	metastatic Breast Cancer
<b>MG</b>	Myasthenia Gravis
<b>MM</b>	Multiple Myeloma
<b>mRNA</b>	messenger RNA
<b>MS</b>	Multiple Sclerosis
<b>N-H</b>	Non-Hodgkin
<b>NKp46</b>	Natural Killer 46-kDa protein
<b>NSCLC</b>	Non-Small Cell Lung Cancer
<b>PD-1</b>	Programmed cell Death protein 1
<b>PD-L1</b>	Programmed Death-ligand 1
<b>PN</b>	Prurigo Nodularis
<b>PPMS</b>	Primary Progressive Multiple Sclerosis

<b>QIV</b>	Quadrivalent Influenza vaccine
<b>QIV-HD</b>	Quadrivalent Influenza High-Dose Vaccine
<b>rFVIIIIFc-vWF-XTEN</b>	recombinant coagulation Factor VIII Fc – von Willebrand Factor – XTEN Fusion protein
<b>RIPK1</b>	Receptor-Interacting serine/threonine-Protein Kinase 1
<b>RIV4</b>	Quadrivalent Recombinant Influenza Vaccine
<b>RMS</b>	Relapsing Multiple Sclerosis
<b>RNAi</b>	RNA interference
<b>RSV</b>	Respiratory Syncytial Virus
<b>rVE</b>	Relative Vaccine Effectiveness
<b>RWE</b>	Real World Evidence
<b>SD</b>	Standard Dose
<b>SHP2</b>	Src Homology-2 domain-containing protein tyrosine Phosphatase-2
<b>SPMS</b>	Secondary-Progressive Multiple Sclerosis
<b>tCO<sub>2</sub>e</b>	Tonnes of carbon dioxide equivalent
<b>TCR</b>	T cell receptor
<b>Te</b>	Transplant eligible
<b>Ti</b>	Transplant ineligible
<b>TNF</b>	Tumor Necrosis Factor
<b>TSLP</b>	Thymic Stromal Lymphopoietin
<b>VBP</b>	Volume-based Procurement
<b>WGA</b>	Week gestational age