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# Q4 and Full Year 2021 Results

*Play to Win*

- 

February 4<sup>th</sup>, 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. Any material effect of COVID-19 on any of the foregoing could also adversely impact us. This situation is changing rapidly, and additional impacts may arise of which we are not currently aware and may exacerbate other previously identified risks. 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, 2020. 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 • **Transforming to deliver**  
Paul Hudson
- 02 • **Business update**  
Bill Sibold, Thomas Triomphe, Olivier Charmeil & Julie van Ongevalle
- 03 • **Financial performance**  
Jean-Baptiste de Chatillon
- 04 • **Outlook 2022**  
Paul Hudson



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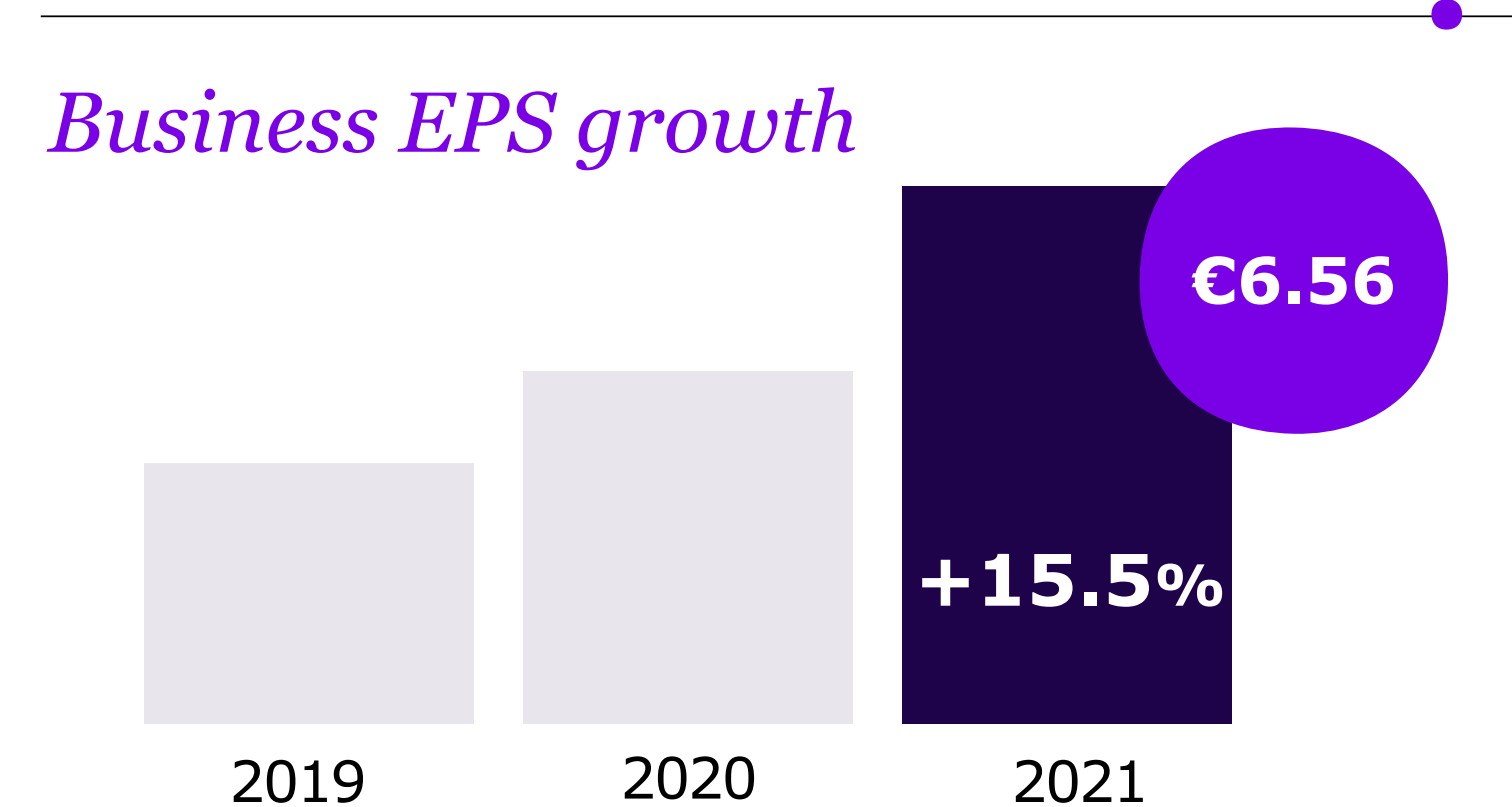
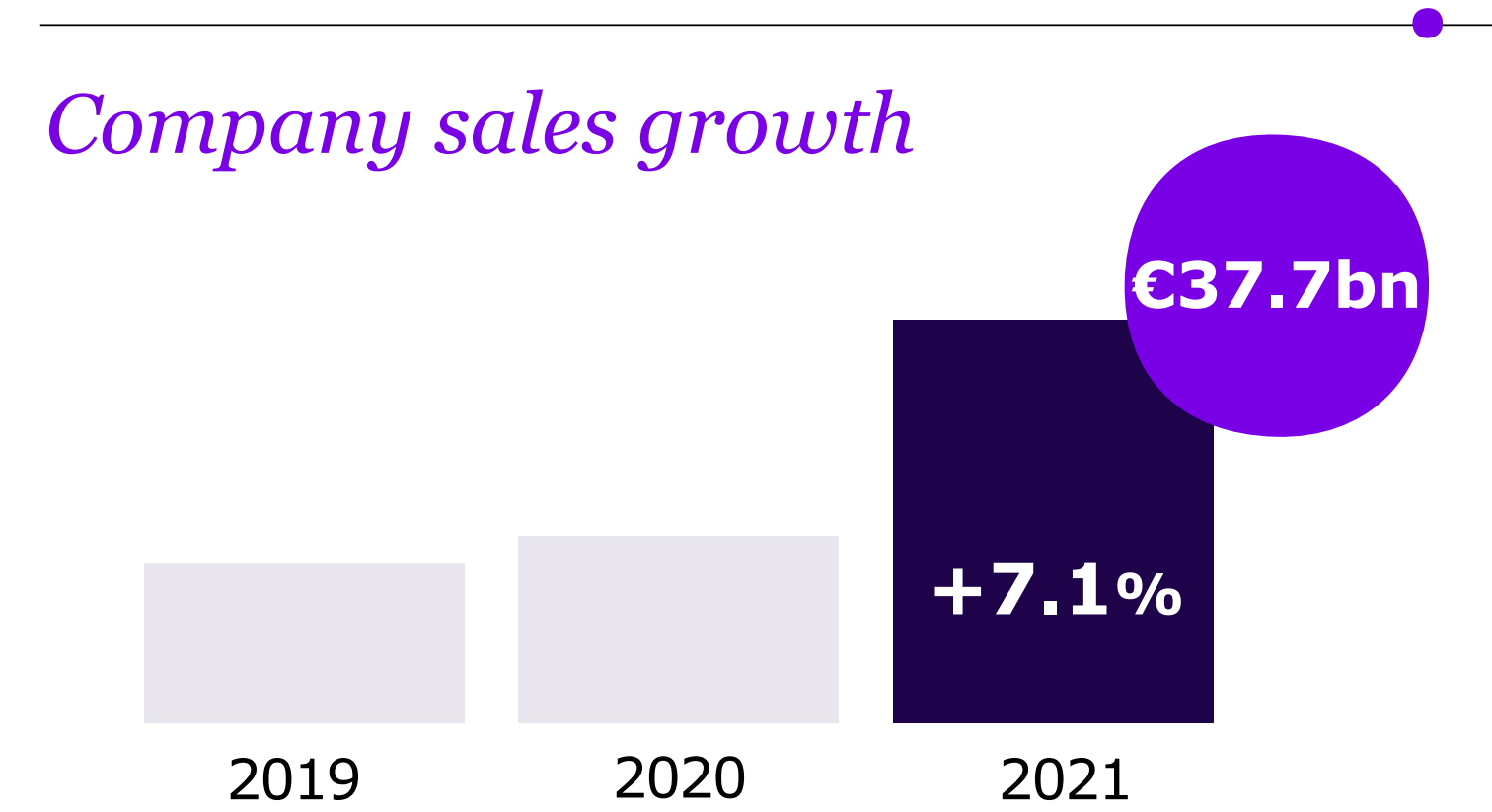
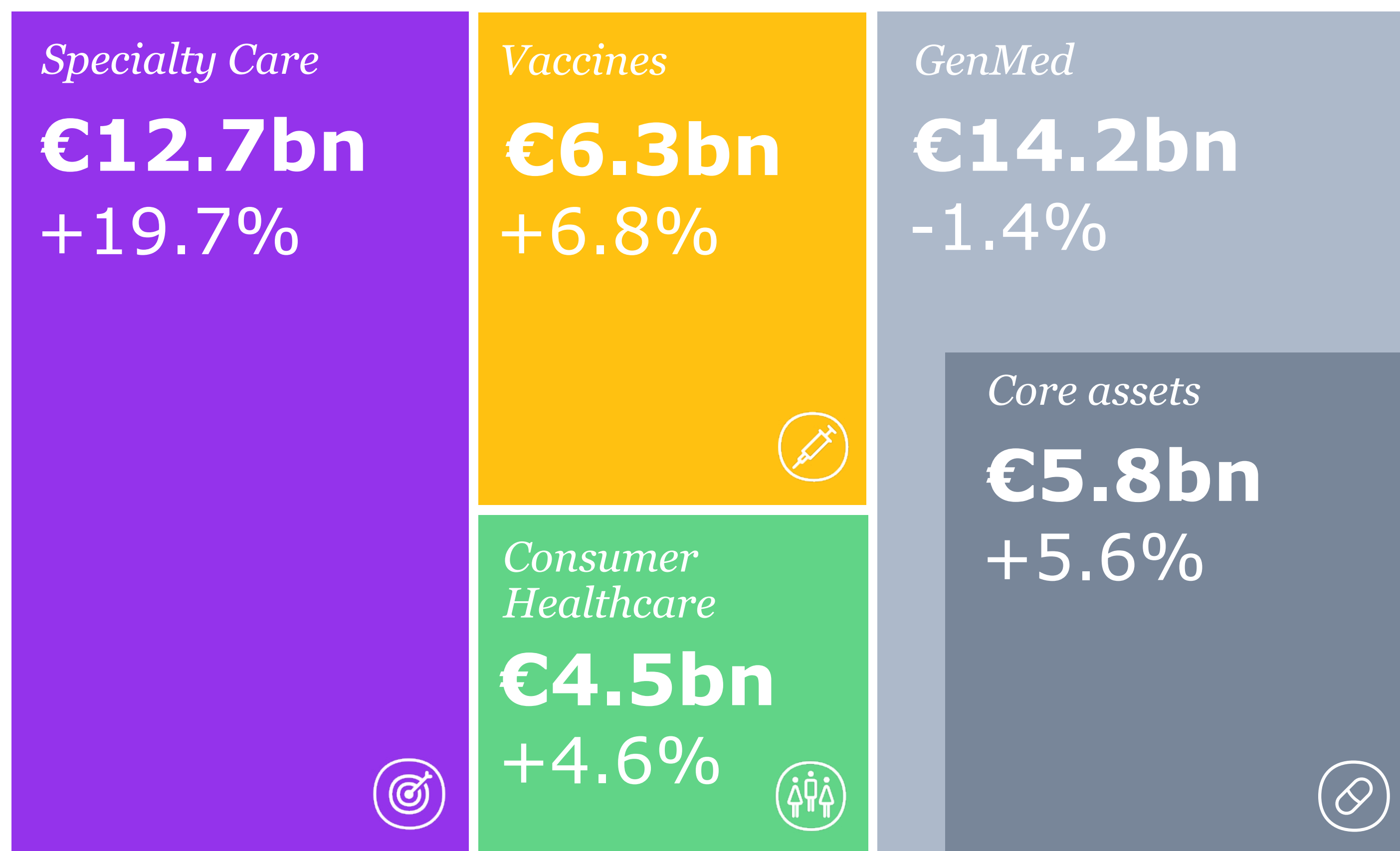
# Transforming to deliver

*2021*



# Strategy execution delivered *strong growth*

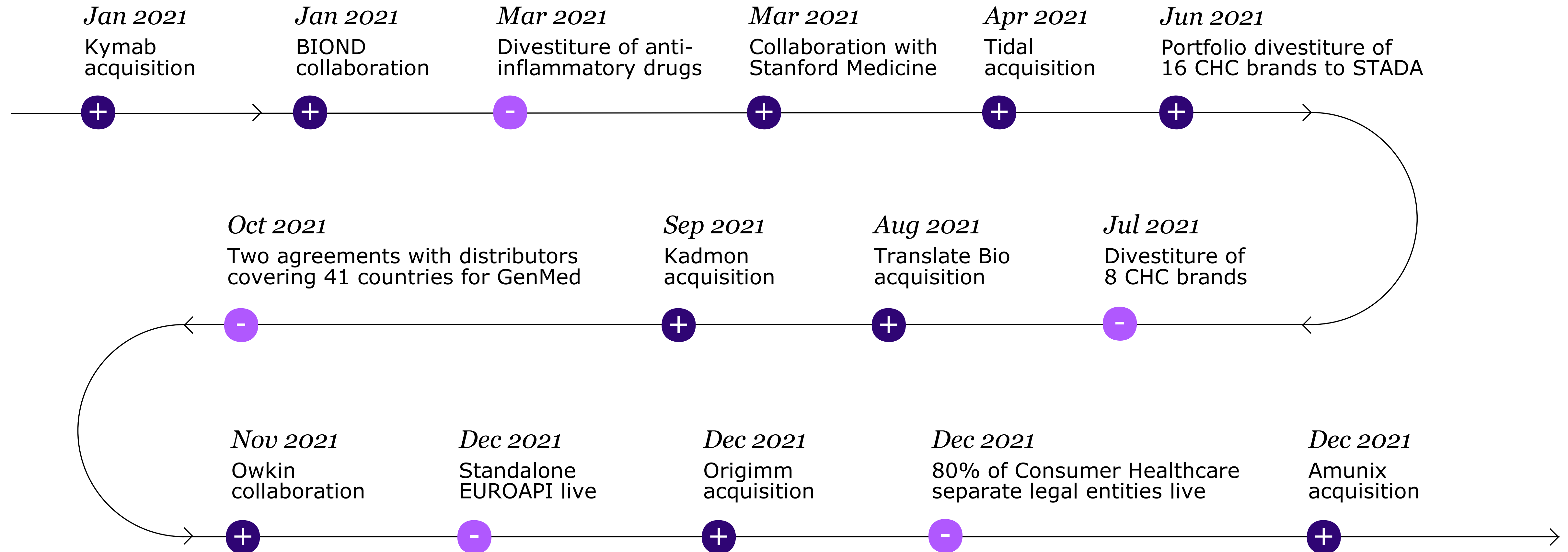
FY 2021



All growth at CER unless footnoted.

# *Transforming* Sanofi to be focused and agile

## Corporate transactions in 2021



# Pipeline

## *2021 highlights*

**7 positive pivotal read-outs**

Nirsevimab one year earlier than planned



**8 major approvals**

in US/EU for Dupixent, Libtayo, Sarclisa, Nexviazyme



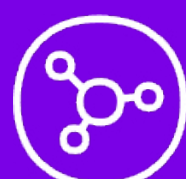
**10 new molecules**

entering the clinical pipeline from in-house research



**Immunology**

Amlitelimab (OX40L)  
Rilzabrutinib broad phase 2 program



**Oncology**

AMEERA-5 fully recruited  
5 basket studies ongoing for SAR'245



**Neurology**

Tolebrutinib entered phase 3 in MG  
RIPK1i FTD for ALS





# Early pipeline *strengthened* with 36 projects added in phase I and II

## Phase I

<b>SAR441566</b> Oral TNF inhibitor	<b>SAR44488</b> Anti-ILT2 mAb
<b>SAR444656</b> IRAK4 degrader	<b>SAR445419</b> NK-cell-based immunotherapy
<b>SAR444336</b> Pegylated IL-2	<b>SAR445710</b> Anti PD-L1/IL-15 fusion protein
<b>SAR443726</b> Anti-IL13/OX40L Nanobody® VHH	<b>SAR443216</b> Anti-CD3xCD28xHer2 trispecific mAb
<b>SAR442970</b> Anti-TNFα/OX40L Nanobody® VHH	<b>SAR443579</b> Anti-NKp46/CD123 bispecific mAb
<b>SAR443765</b> Anti-IL13/TSLP Nanobody® VHH	<b>SAR443809</b> Anti-Factor Bb mAb
<b>SAR442999</b> Anti-TNFα/IL23A Nanobody® VHH	<b>SP0273</b> mRNA vaccine

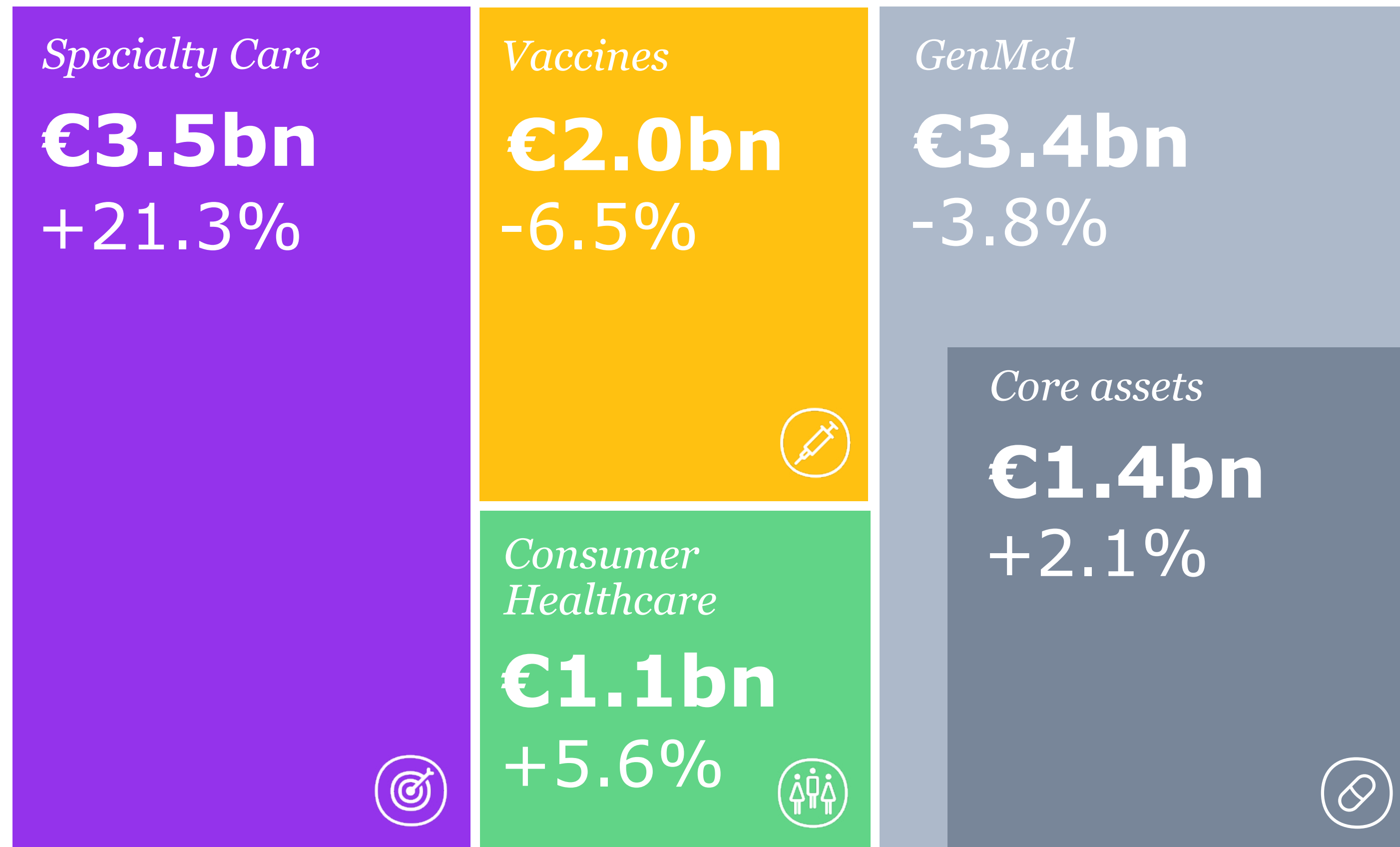
## Phase II

<b>amlitelimab</b> Anti-OX40L mAb	<b>SAR444245 – Skin cancers</b> Non-alpha IL-2 + cemiplimab
<b>Rilzabrutinib – Atopic dermatitis</b> BTK inhibitor	<b>SAR444245 – Lung cancers</b> Non-alpha IL-2 + combinations
<b>SAR444727</b> BTK inhibitor (topical)	<b>SAR444245 – Head &amp; neck tumors</b> Non-alpha IL-2 + combinations
<b>SAR441344 – Sjogren’s Syndrome</b> Anti-CD40L mAb	<b>SAR444245 - Lymphoma</b> Non-alpha IL-2 + combinations
<b>SAR441344 - SLE</b> Anti-CD40L mAb	<b>SAR442720</b> SHP2 inhibitor + KRAS inhibitor
<b>SAR443122 - CLE</b> RIPK1 inhibitor	<b>SAR445088 - CIDP</b> Complement C1s inhibitor
<b>alomfilimab</b> Anti-ICOS mAb	<b>SAR441344 - MS</b> Anti-CD40L mAb
<b>tusamitamab ravtansine – Solid tumors</b> Anti-CEACAM5 ADC	<b>Sarclisa® - WAIHA</b> Anti-CD38 mAb
<b>tusamitamab ravtansine</b> Anti-Anti-CEACAM5 ADC + pembrolizumab	<b>SAR445088 - CAD</b> Complement C1s inhibitor
<b>tusamitamab ravtansine – Gastric cancer</b> Anti-CEACAM5 ADC	<b>SP0218 – Yellow fever</b> Vero cell
<b>Sarclisa® - Multiple myeloma</b> Anti-CD38 mAb + combinations	<b>SP0230 -MenB</b> Multicomponent vaccine

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

For collaborations see slide 54. For abbreviations see slide 55.

# Q4 2021 *performance*



## *Specialty Care #1*

For the first time largest business unit by sales

## *87 pipeline projects*

61 in oncology, immunology and neurology

All growth at CER unless footnoted.

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Business  
update

*Q4 2021*

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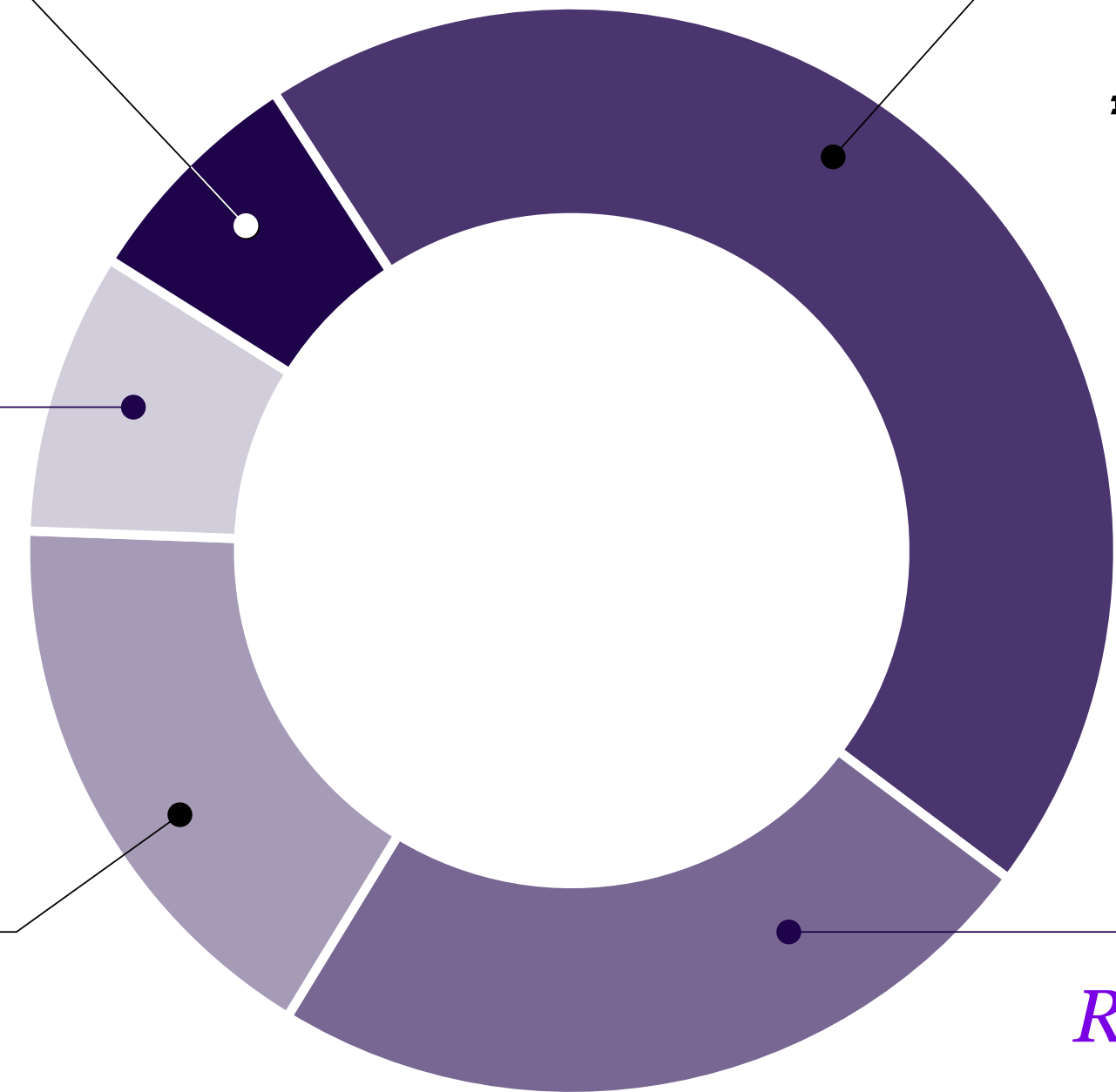
# Specialty Care

Q4 2021

*Oncology*  
**€240m**  
 +10.3%

*Rare Blood Disorders*  
**€292m**  
 -10.4%

*Neurology & Immunology*  
**€588m**  
 +3.1%



*Dupixent®*  
**€1,549m**  
 +53.1%

*Rare Diseases*  
**€818m**  
 +9.5%

**€3.5bn** Q4 sales

**+21.3%**

## Dupixent®

+53% in Q4 due to significant growth across all regions driven by demand

## Oncology

+10% driven by Sarclisa® and Libtayo® launches partially offset by Jevtana® decline due to Europe LOE

## Rare Diseases

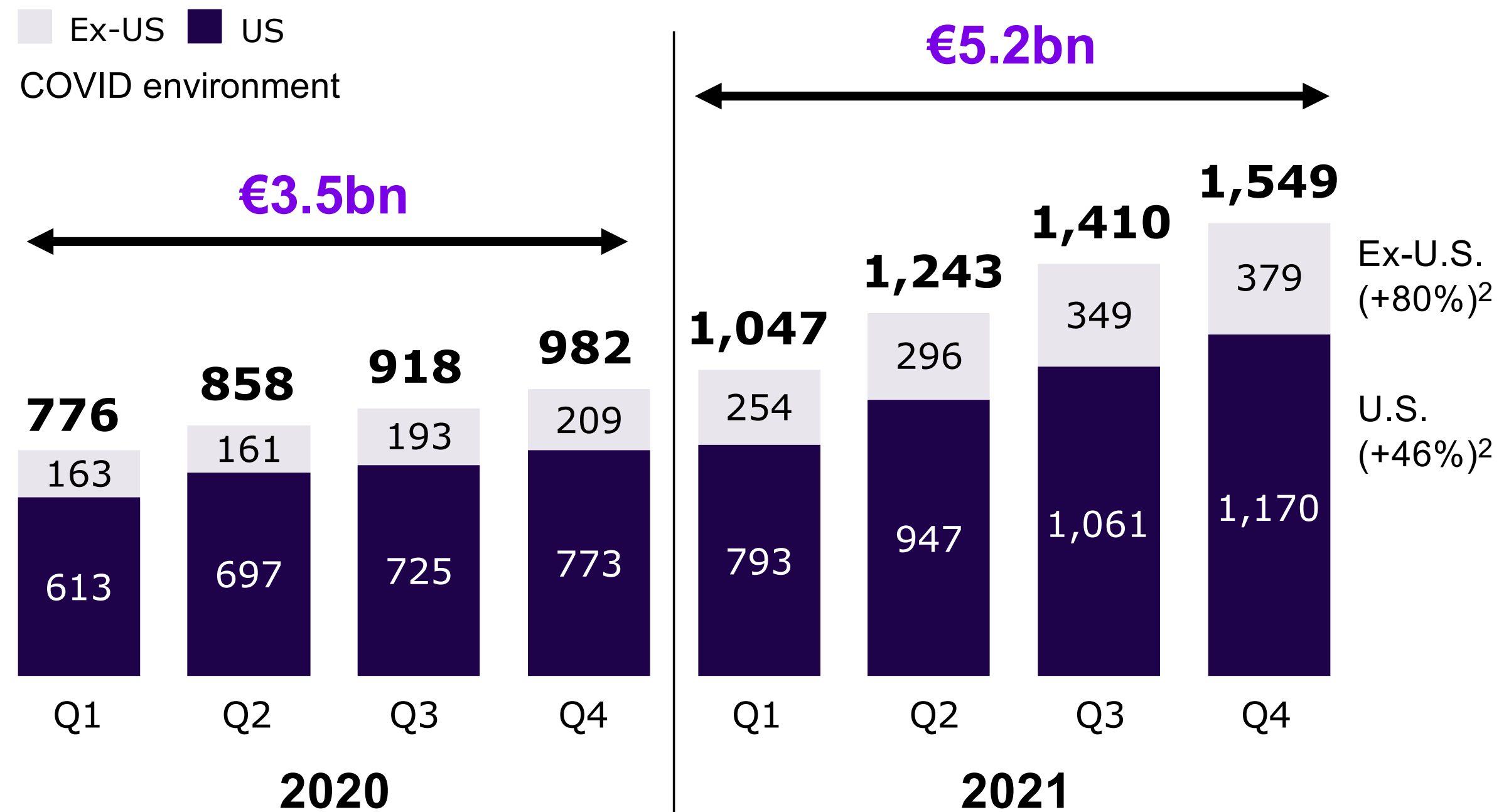
+10% in Q4 due to strong underlying demand, particularly in Pompe and inventory build

All growth at CER unless footnoted.

# Dupixent®

€1.7bn of sales added in one year

## Global Dupixent® sales (€m)



## Outstanding performance in 2021



#1 biologic with dermatologists, allergists pulmonologists & ENTs<sup>1</sup>



Now annualizing at €6bn plus



AD launch >30K patients, NRDL listing includes 200mg



In-office patient visits remain below pre-COVID levels

## Recent progress

- Positive CHMP opinion 6-11yo with severe asthma
- Second positive Ph3 trial confirms significant improvements for patients with prurigo nodularis
- Submissions underway for AD < 6yo & EoE

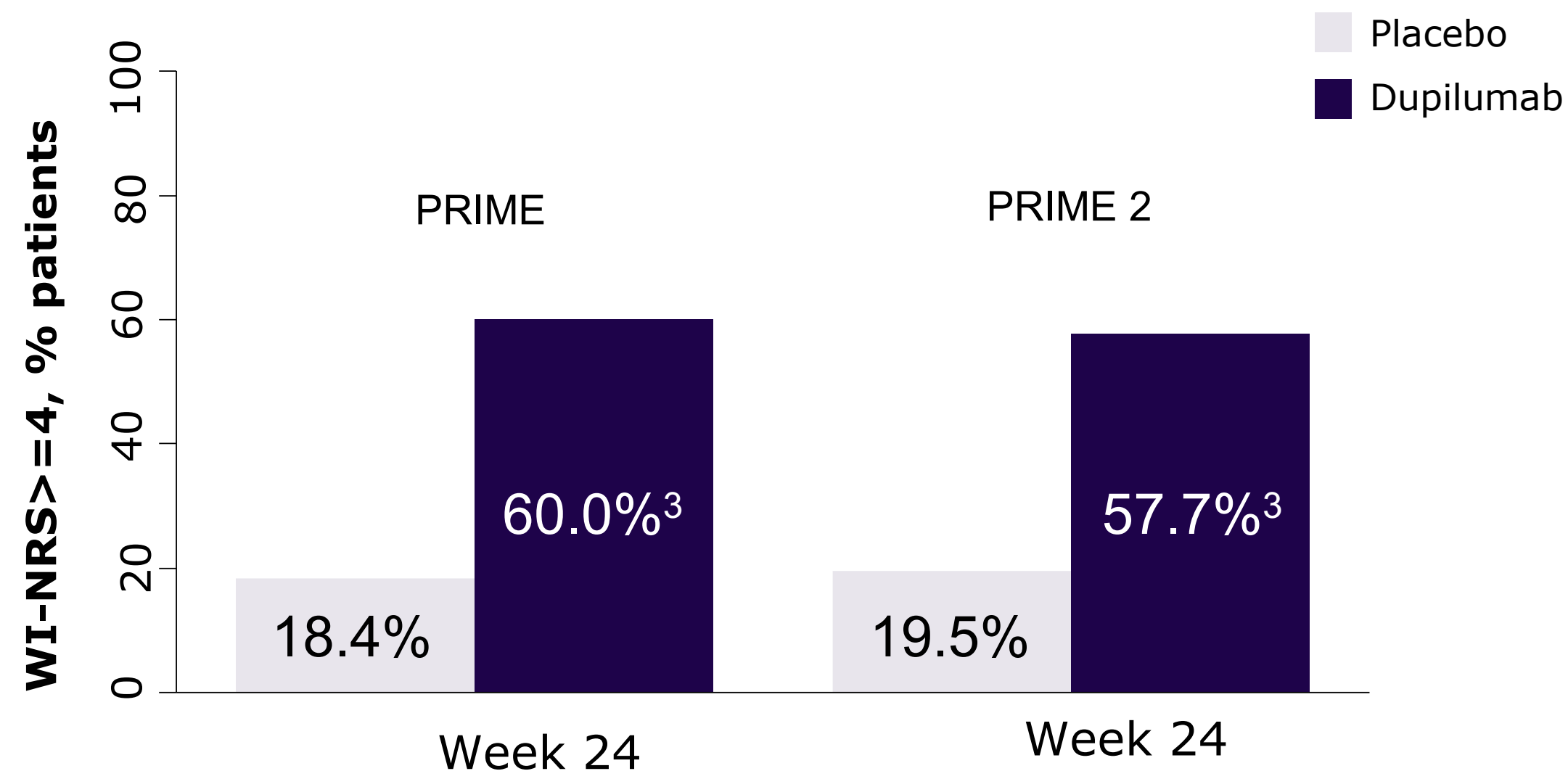
1. IQVIA Custom National Source of Business, Q4'21. 2. Represents growth Q4 2020 to Q4 2021. AD: moderate to severe atopic dermatitis. All growth at CER.

# Dupixent<sup>®</sup> - *Positive* Phase 3 results in Prurigo Nodularis

PRIME and PRIME 2<sup>1</sup> trials data confirm significant improvements for patients with PN

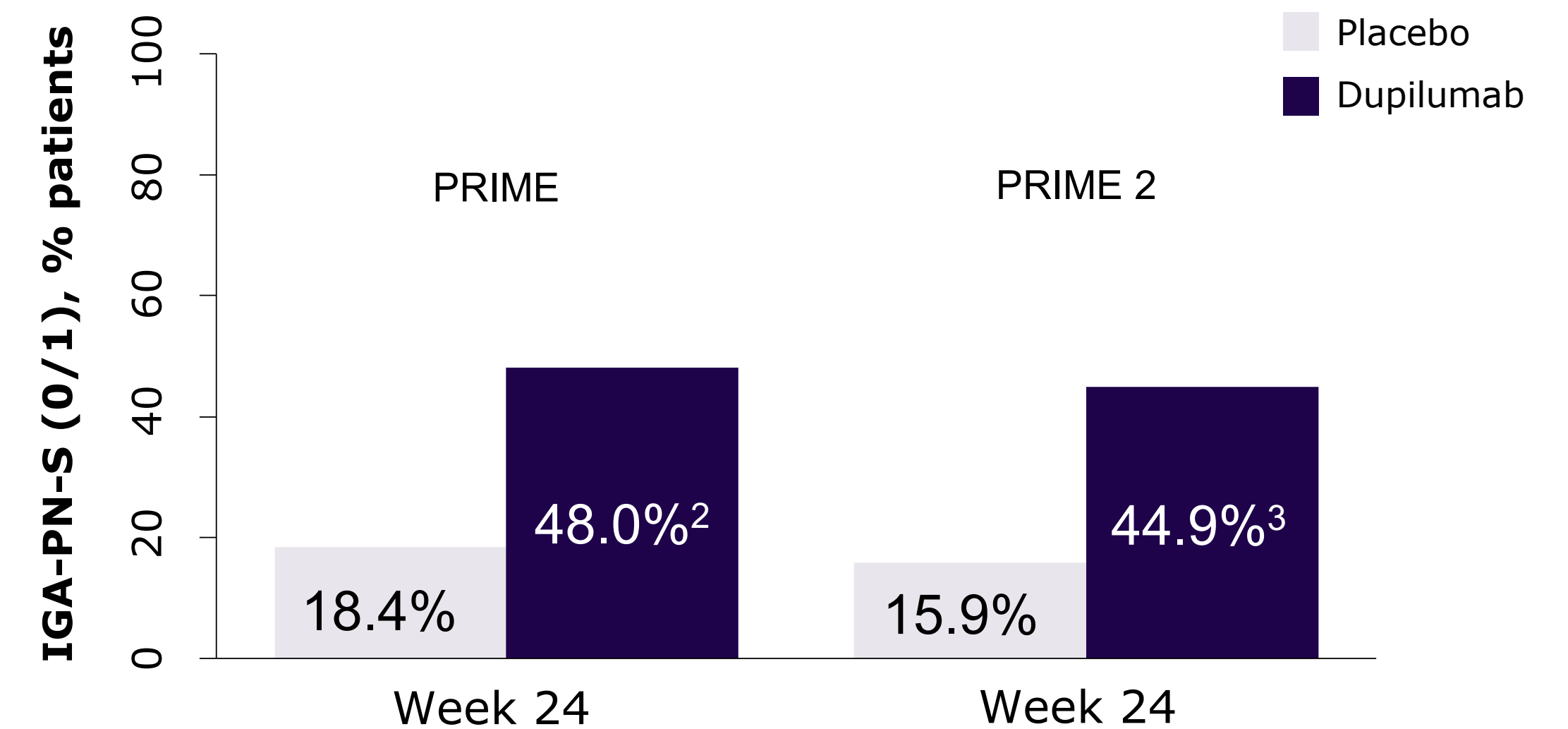
## *≥4-point reduction in Worst-Itch Numeric Rating Scale*

WI-NRS of 0-10; % of patients



## *Clear skin measured by a score of 0 or 1 on IGA PN-Scale*

IGA PN-Stage 0-4 scale; % of patients



Safety results were generally consistent with the known safety profile of Dupilimab in its approved indications

1. Primary endpoint for PRIME2 was assessed at 12 weeks: 37% of Dupixent patients experienced a clinically meaningful reduction in itch from baseline compared to 22% of placebo patients (p=0.0216).  
 2. p<0.001. 3. p<0.0001. WI-NRS, worst itch numerical rating scale IGA PN-s, investigator assessment of prurigo nodularis stage.

# Planned *upcoming* launches

## *Sutimlimab*

### **CAD**

Rare, chronic autoimmune hemolytic anemia that causes the body's immune system to attack healthy red blood cells; and impacts the lives of an estimated 12,000 people in the U.S., Europe and Japan

### **Sutimlimab**

Humanized monoclonal antibody designed to selectively target and inhibit C1s to prevent the abnormal destruction of healthy red blood cells

### **Launching with existing infrastructure**

H1: U.S.

H2: Japan

2023: EU roll-out

Barring unforeseen events.

## *Olipudase alfa*

### **ASMD**

Rare, progressive and potentially life-threatening disease with no approved treatments; approximately 2,000 patients in the U.S., Japan and Europe (EU: 5 countries)

### **Olipudase alfa**

First and only investigational enzyme replacement therapy designed to replace deficient/defective ASM

### **Launching with existing infrastructure**

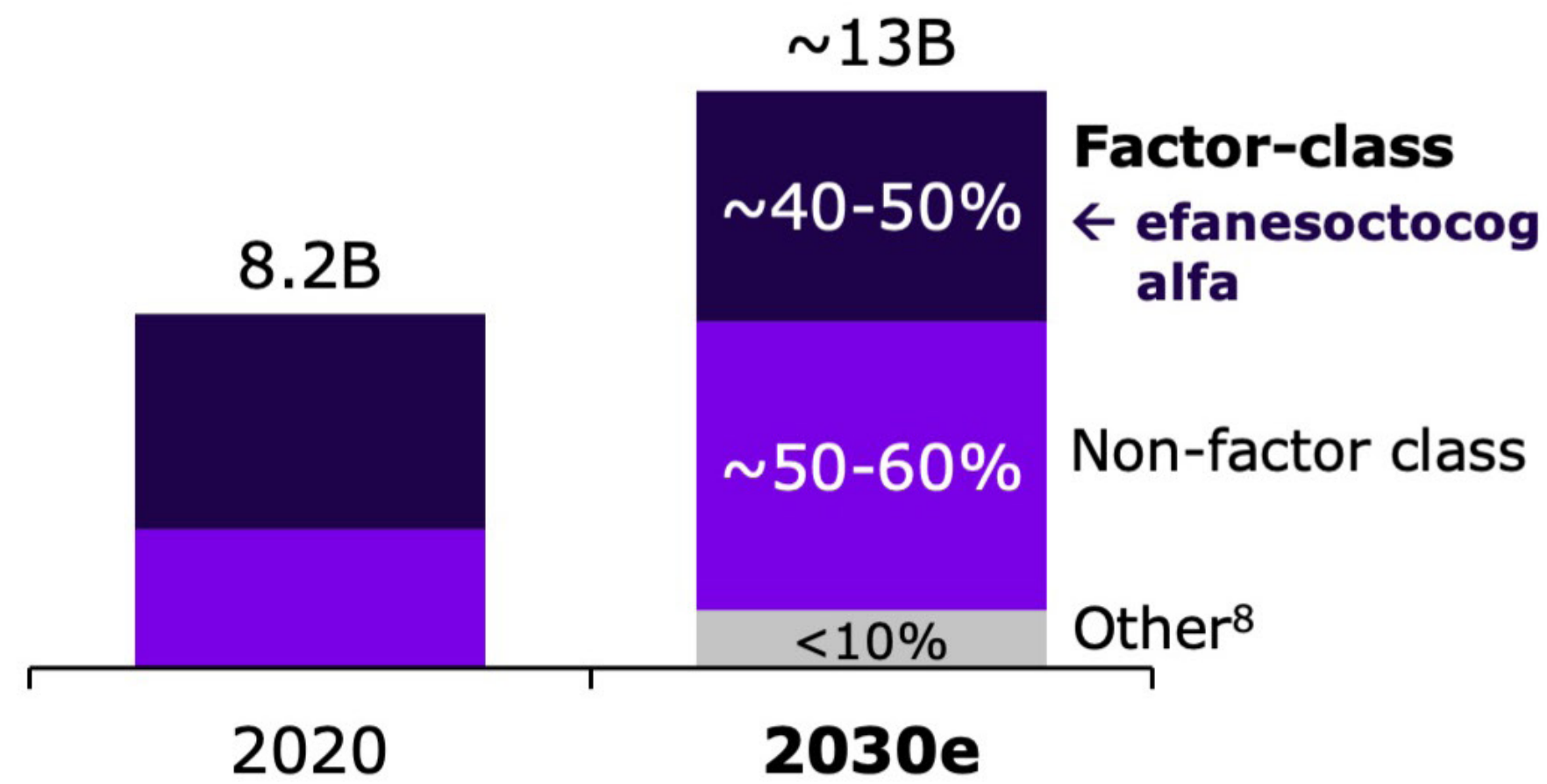
H1: Japan (SAKIGAKE)

H2: U.S. (FTD) and Europe (PRIME)

# Efanesoctocog alfa

Potential to *revolutionize* Hem A treatments

~\$5B factor-class segment by 2030<sup>1</sup>



- Sanofi territories for efanesoctocog alfa<sup>2</sup>: 50 to 60% of market
- 70% of overall patients currently on prophylaxis treatment<sup>3</sup>

## Efanesoctocog target profile aims to capture majority of factor segment

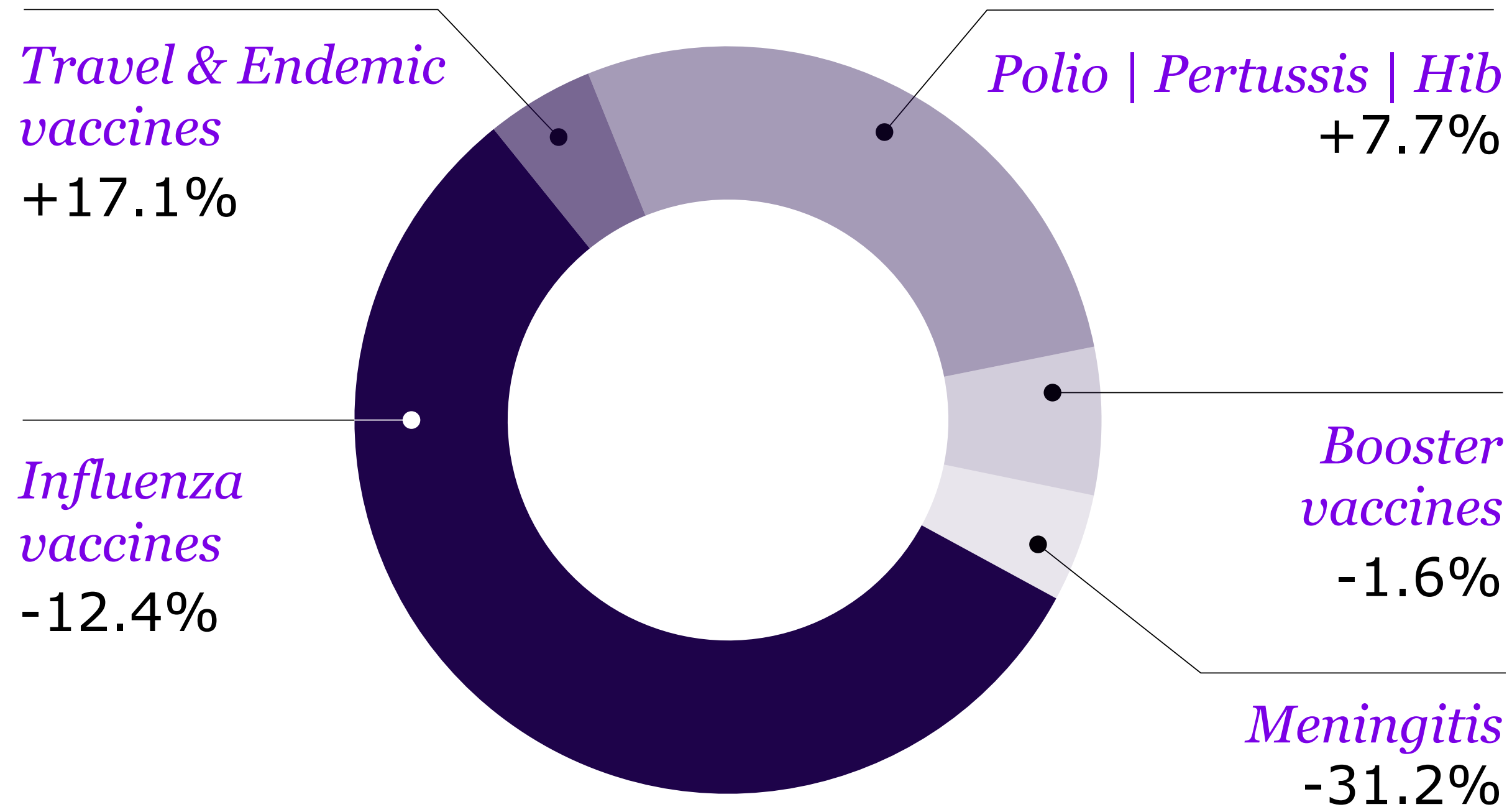
	efanesoctocog alfa (target profile)	Other factors	Non-factors
<b>Convenience</b> # of weekly infusions/injections in routine prophylaxis	1x/week	2 - 4x/week	1x/1-2 weeks for majority of patients <sup>5</sup>
<b>Efficacy</b> Median ABR during prophylaxis & FVIII activity level	Data TBC in Pivotal Ph3 1Q22 0 <sup>4</sup> in Phase 1 repeat dose study Near Normal Factor <sup>7</sup> Level: <b>4 Days</b>	~1 - 2 for most factors Near Normal Factor <sup>7</sup> Level: <b>1 Day</b>	0.6 for 1x/week <sup>6</sup> Near Normal Factor <sup>7</sup> Level: <b>0 Days<sup>8</sup></b>
<b>Safety profile</b>	Expected to be in line with other factors	Well-known	Evolving <sup>9</sup> (thrombosis, TMAs)

## BLA submission expected in mid 2022, FDA fast-track designation granted

1. Source: Evaluate Pharma and Sanofi internal analysis. 2. US and Japan. 3. Adivo Jan 2022. 4. Data from Phase 1 repeat dose study. 5. 2022 Specialty Pharmacy data obtained through Specialty Pharmacy Distributors, Hemophilia Alliance HTC's and Direct HTC's. 6. Median ABR from HAVEN-3 No head-to-head studies comparing the above products have been conducted and the target profile depicted is aspirational. 7. FVIII activity level ≥ 40%. 8. Wang CP, Young G, and Thornburg CD. Expert Opinion On Drug Safety. 2021, VOL. 20, NO. 4, 387-396. 9. Other category includes gene therapy. Based on Lenting P et al, ISTH 2019, Lenting P et al, Blood Adv. 2020. ABR: Annual Bleeding Rate. TMAs: Thrombotic microangiopathies.






# Vaccines Q4 *performance*



€2bn Q4 sales -6.5%

Early flu shipments during NH season leading to sales weighted towards Q3 vs. Q4 (55%/45%)

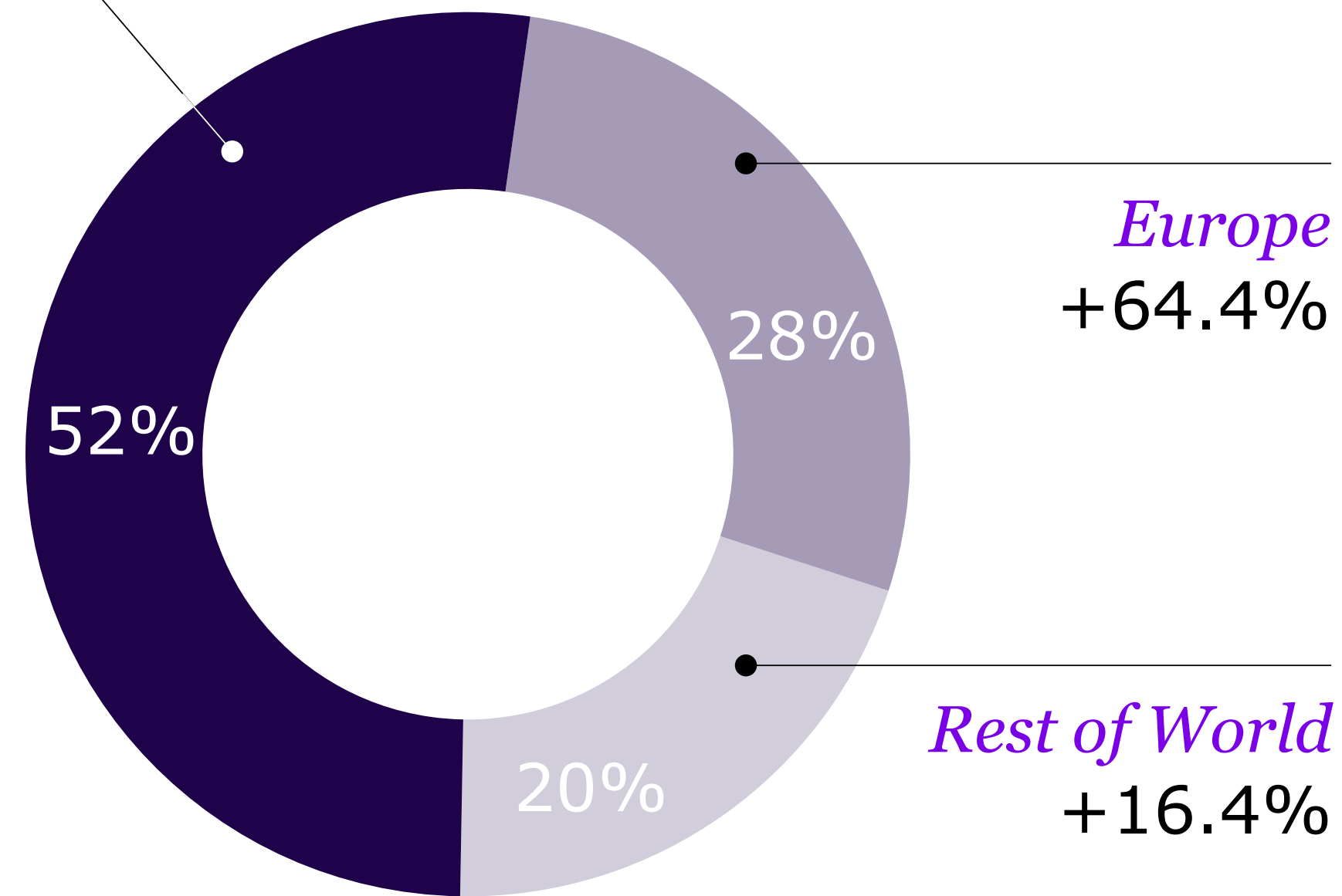
↑ EU sales up 51% in Q4 due to demand increase and Efluelda® expansion

-  PPH mainly driven by higher Pentaxim® sales in China
-  Meningitis business affected by phasing in the U.S.
-  First recovery of travel vaccine business in Europe since pandemic began

All growth at CER. NH: Northern Hemisphere. Efluelda® is the European name for Fluzone® HD QIV.

# Flu sales reaching *record levels* in 2021

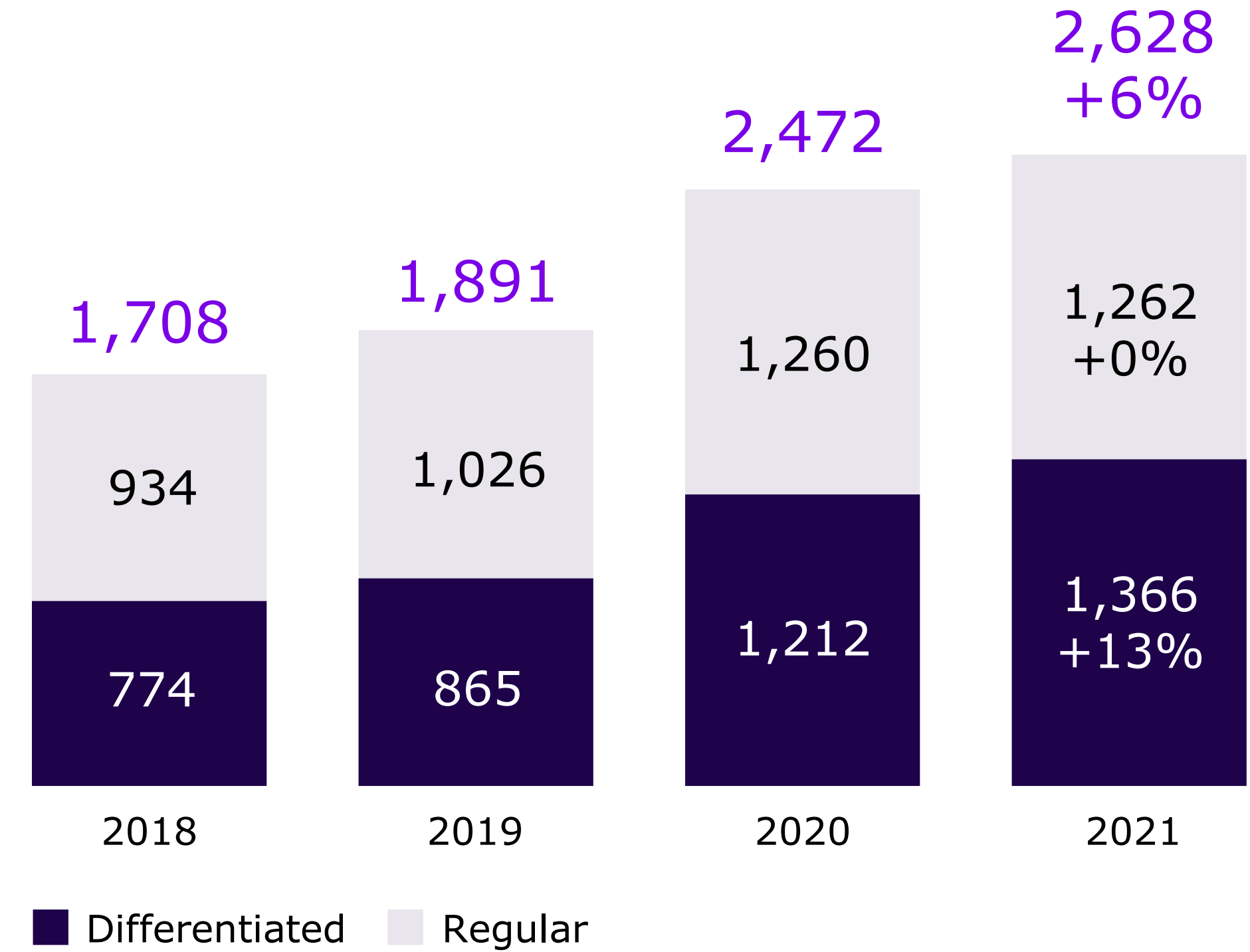
*U.S.*  
-13.6%



Fluzone® HD gained 3.5 pts share despite market contracting by 17% in volume with prioritization of COVID-19 immunization

Growth in Europe, led by preferential recommendation in Germany for 60+ yrs

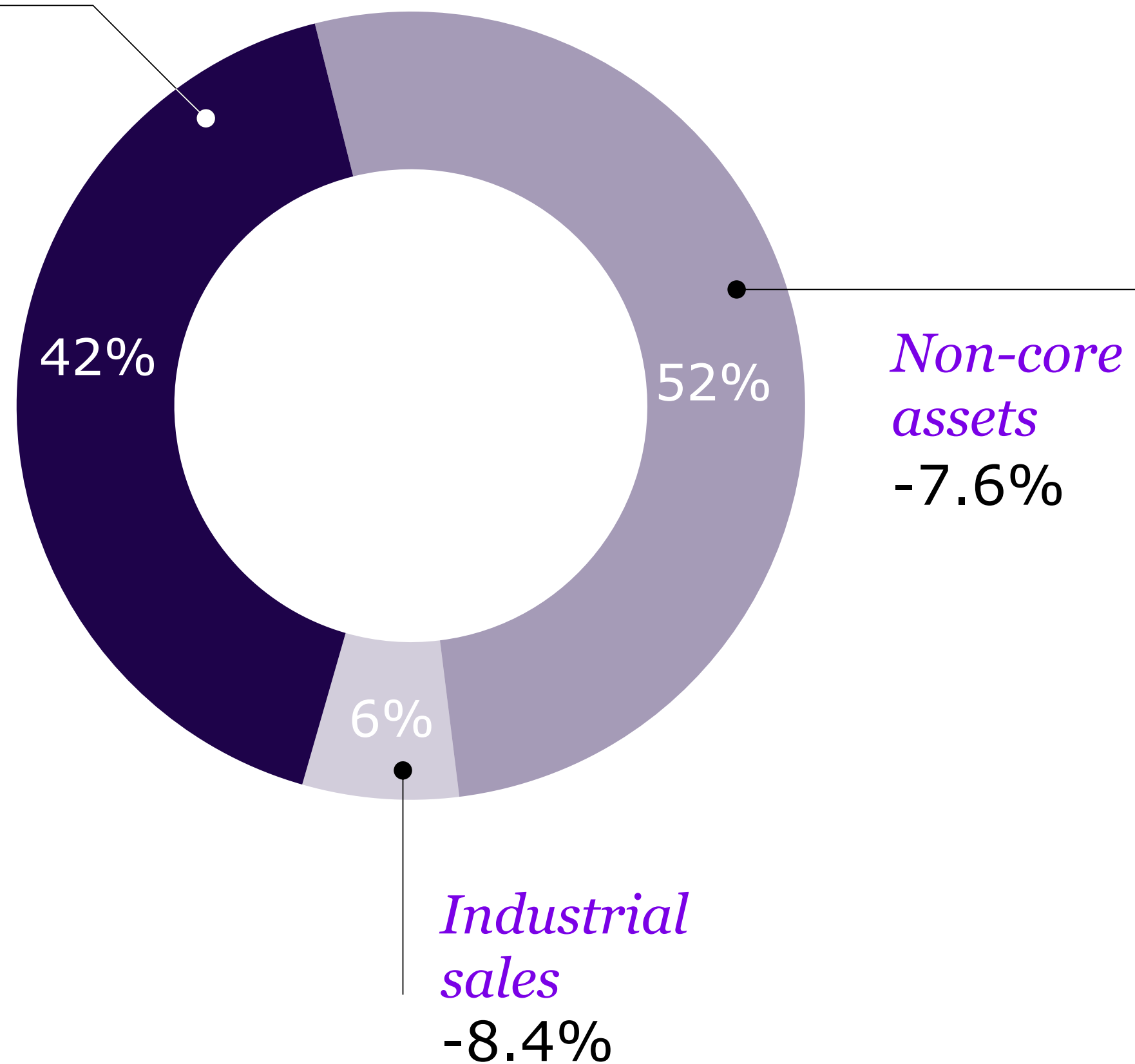
*Influenza sales evolution 2018-2021*  
€ millions



Data Sources: IQVIA Claims Medical (as of 1/1/22). IQVIA Claims Retail (as of 1/2/22). All growth at CER.

# GenMed Q4 *performance*

*Core assets*  
+2.1%



**€3.4bn** Q4 sales

**-3.8%**

## Core assets

Growth driven by Plavix, Multaq and Praluent (excluding US)

Rezurock™: consolidated Q4 sales of €20m

## Lovenox

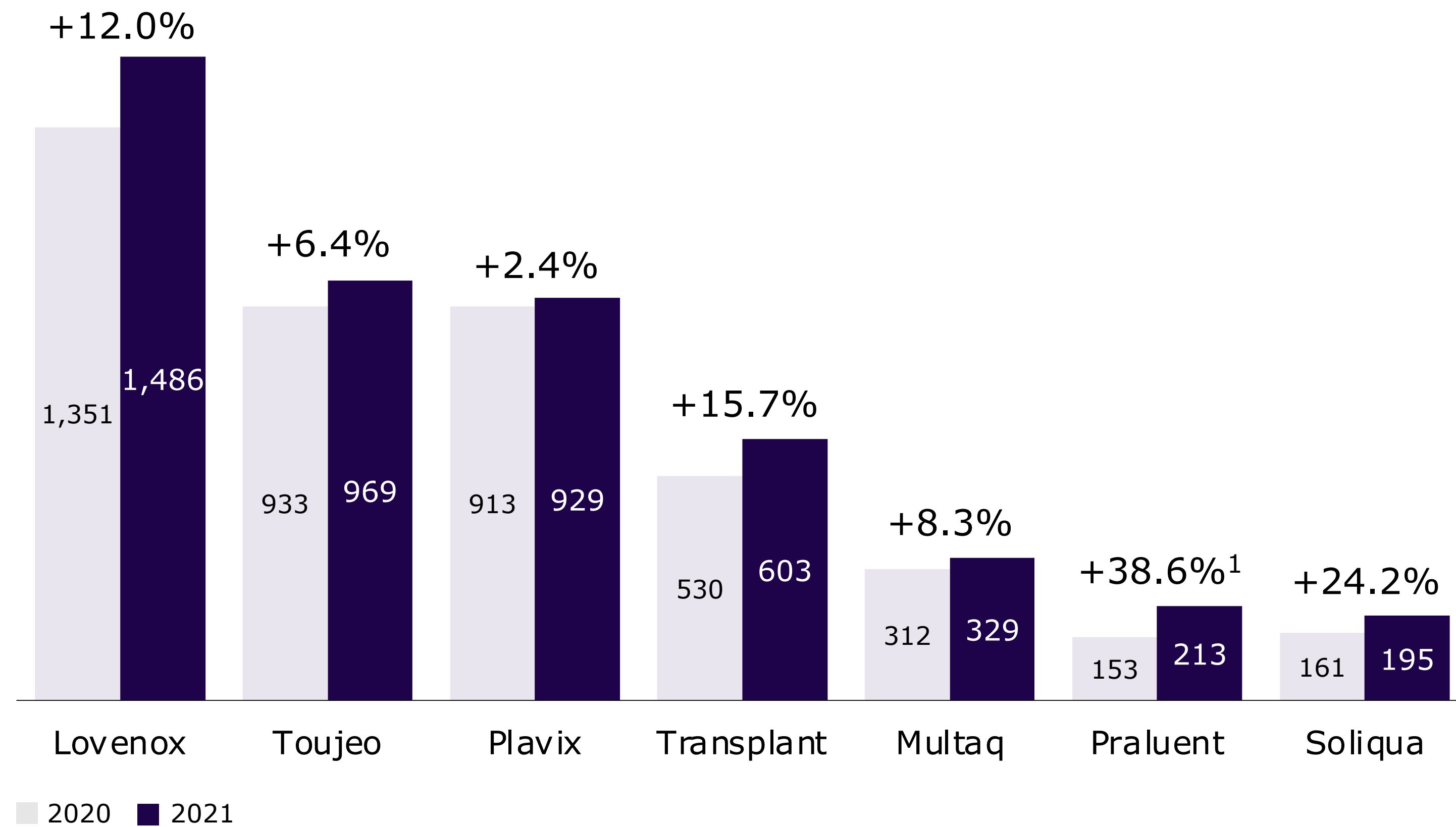
Impacted by slow-down of COVID-19 hospitalizations and supply constraints

## Non-core assets

Down due to divestments and China VBP impacts (wave 5 and Lantus price adjustments)

# GenMed: 2021 *core asset* performance

€ millions

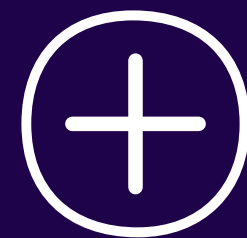


1. Excluding U.S. Praluent FY 2020 sales, including U.S. Praluent is -15.8% in FY. All growth at CER.

# Rezurock™ U.S. launch *performance*

US cGVHD prevalence  
*≈14,000<sup>1</sup> patients*

*≈5,000<sup>2</sup> to 7,000*  
patients need  
additional  
treatment



*96%*

of top 80 transplant centers have  
ordered/prescribed Rezurock™

*>500 patients*

treated with Rezurock™

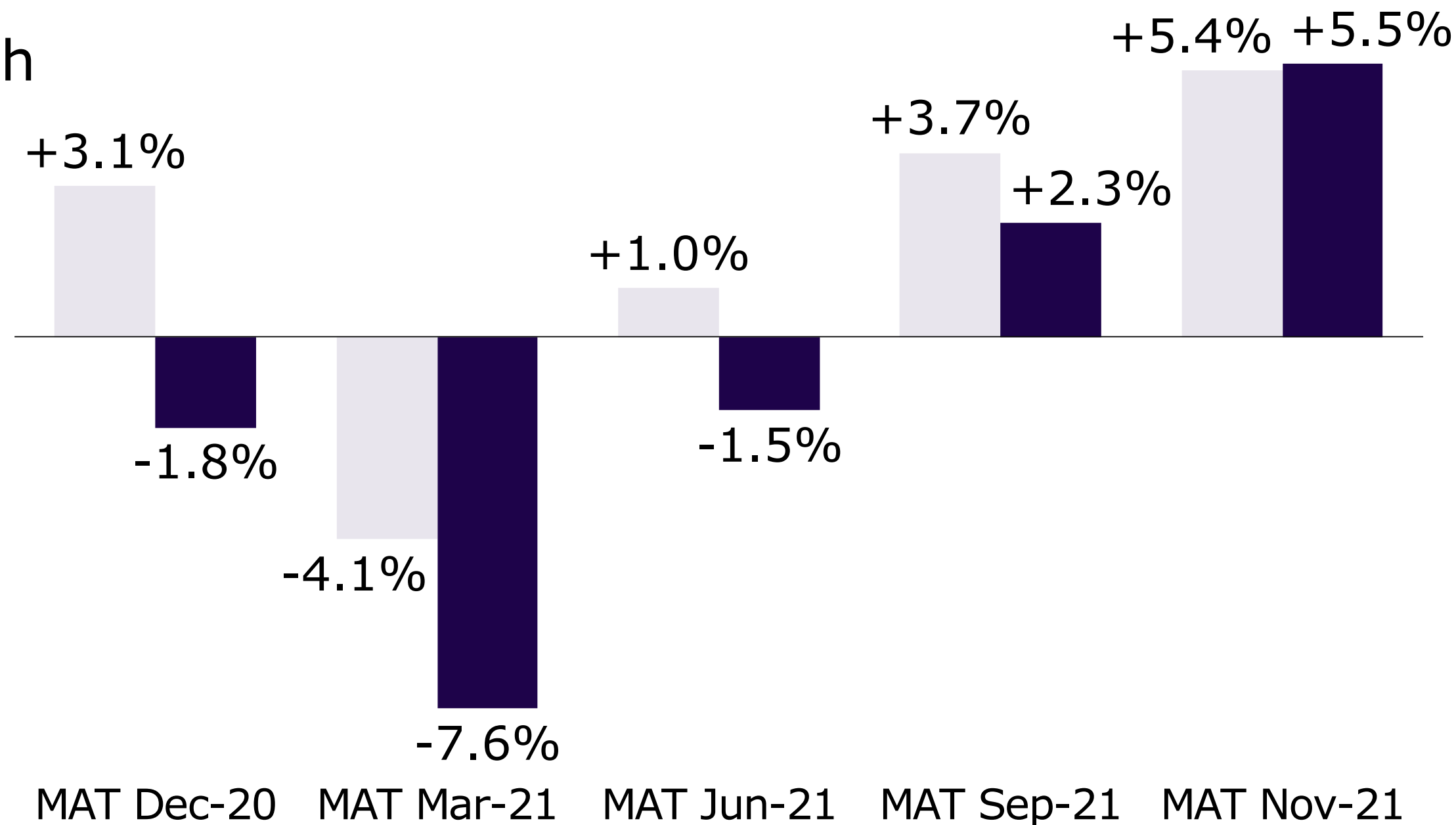
*€44m sales*

since launch late August 2021

1. Bachier CR. et al. ASH Annual Meeting 2019, Abstract #2109. 2. <https://www.sciencedirect.com/science/article/pii/S2666636720301019?via%3Dihub>

# CHC *Now at par* with market

## Growth



**Delta vs. market**    **-4.9pt**    **-3.4pt**    **-2.5pt**    **-1.4pt**    **+0.1pt**

Market    Sanofi

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).

## *Cut & embrace complexity*



### Portfolio **simplification**

- 111 non-core brands divested/pruned
- Trademarks reduced by 50%, domain names by 30%

### Investment **reallocation**

## *Reinforce our consumer-centric mindset*



### Consumer Healthcare **standalone**

- 80% of legal entities now live
- Science & Industrial Affairs integrated

### Increasing **agility**

- Gaining market share in Cough & Cold

### Strengthening **brand equity**

## *Build our digital & data edge*

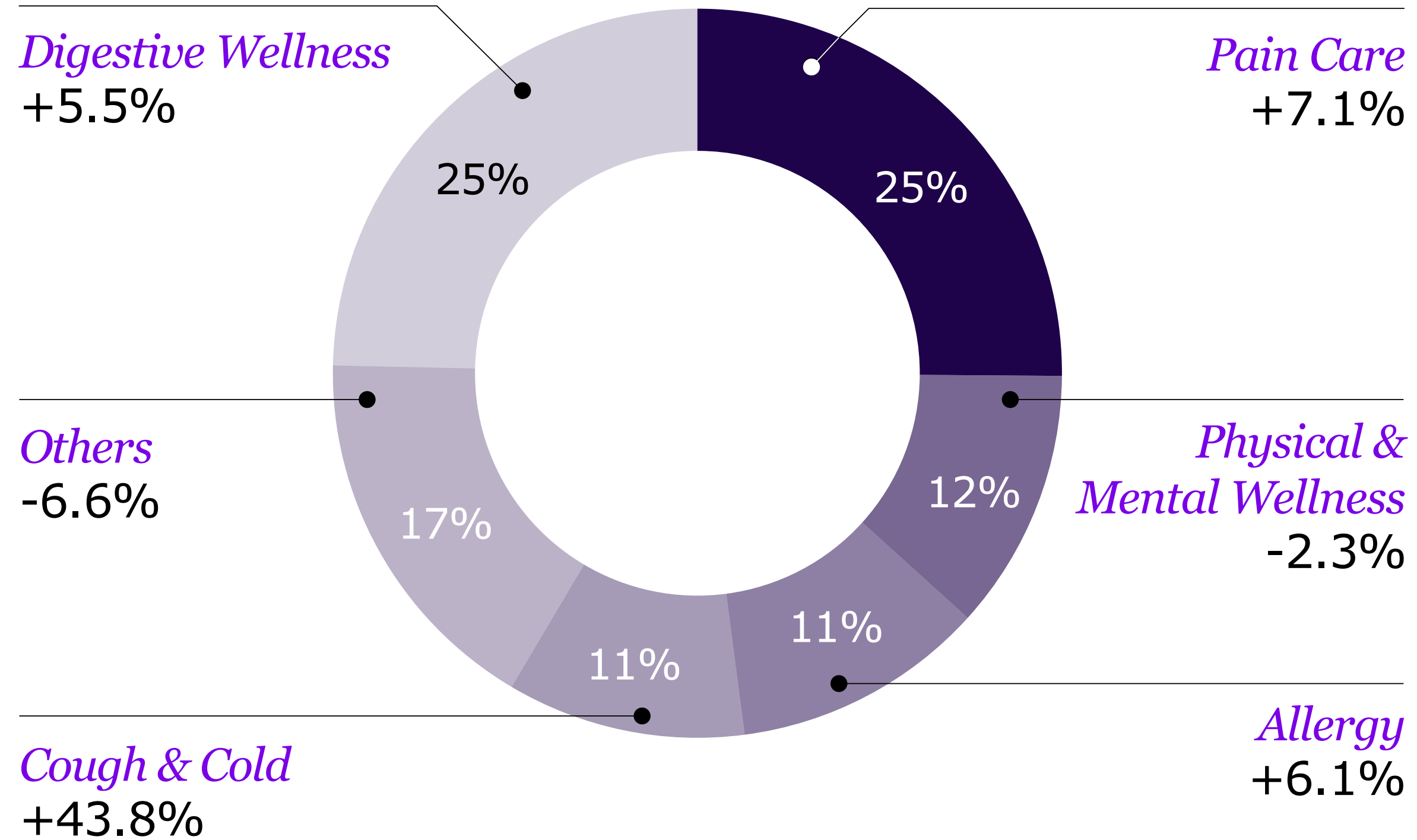


### Building Consumer Healthcare specific **fundamentals**

- CRM & Third-Party Management
- Website

### **Data driven** A&P allocation tools

# CHC Q4 *performance*



**€1.1bn** Q4 sales **+5.6%**

**Q4 Organic Growth +7.0%**

### 3 drivers

- Execution of our strategic priorities
- Pain Care boosted by COVID-19 vaccination
- Cough & Cold strong performance further benefitting from market rebound

All growth at CER. Organic growth: excluding impacts of divestments & acquisitions.

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# Financial performance

*2021*





# Transforming into a more *agile organization*

*Gross margin*

**71.3%**

+1.2%pt  
to sales

*OPEX*

**-1.0pt  
to sales**

+3.9%

*Headcount*

**96k**

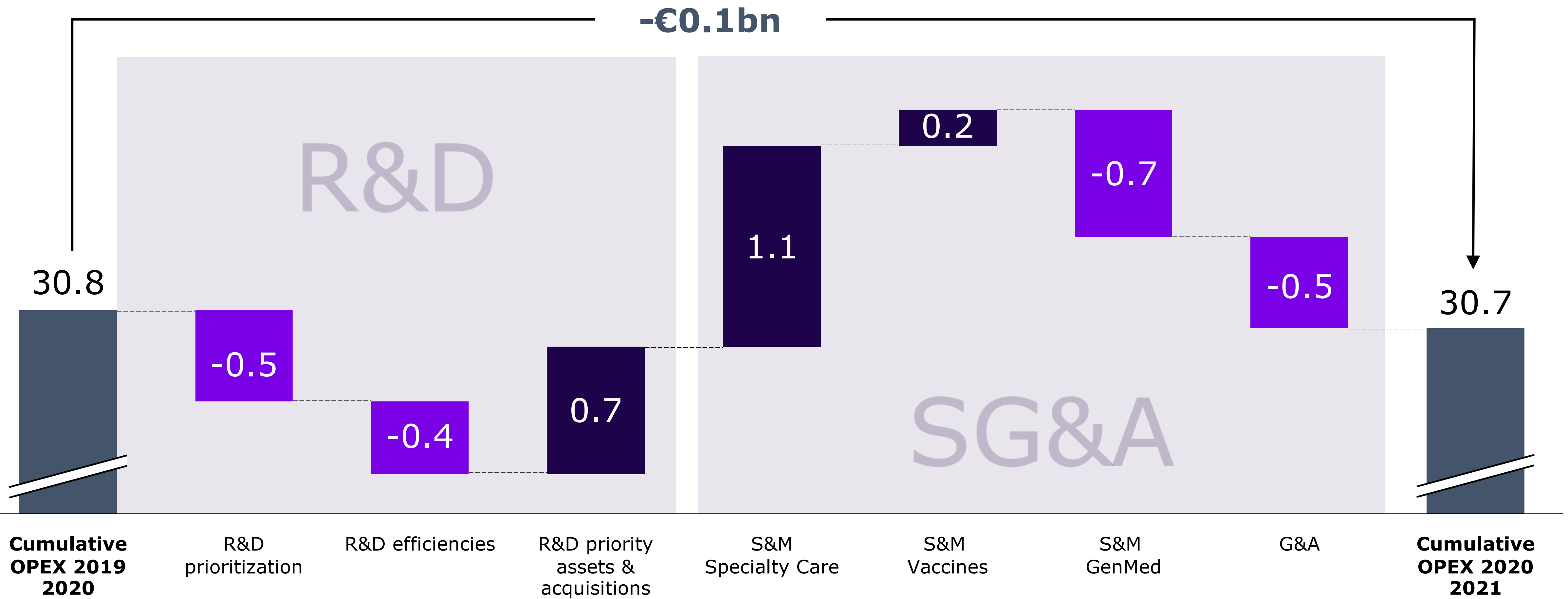
-5%  
vs. 2020

# Q4 P&L

€m	Q4 2021	Q4 2020	% Change (CER)
<b>Net Sales</b>	<b>9,994</b>	<b>9,382</b>	<b>+4.1%</b>
Other revenues	421	354	+15.5%
Gross profit	6,944	6,297	+7.5%
Gross margin %	69.5%	67.1%	
R&D	(1,585)	(1,516)	+2.8%
SG&A	(2,758)	(2,602)	+3.9%
<b>Operating Expenses</b>	<b>(4,343)</b>	<b>(4,118)</b>	<b>+3.5%</b>
Other current operating income & expenses	(356)	(123)	+161.0%
<b>Business Operating Income</b>	<b>2,256</b>	<b>2,052</b>	<b>+6.9%</b>
Business operating margin	22.6%	21.9%	
Effective tax rate	20.5%	22.0%	
<b>Total Business Net Income</b>	<b>1,730</b>	<b>1,527</b>	<b>+10.2%</b>
Average number of shares	1,254.9	1,255.1	
<b>Business EPS</b>	<b>1.38</b>	<b>1.22</b>	<b>+9.8%</b>

All growth at CER.

# Reinvesting €2bn in *growth*

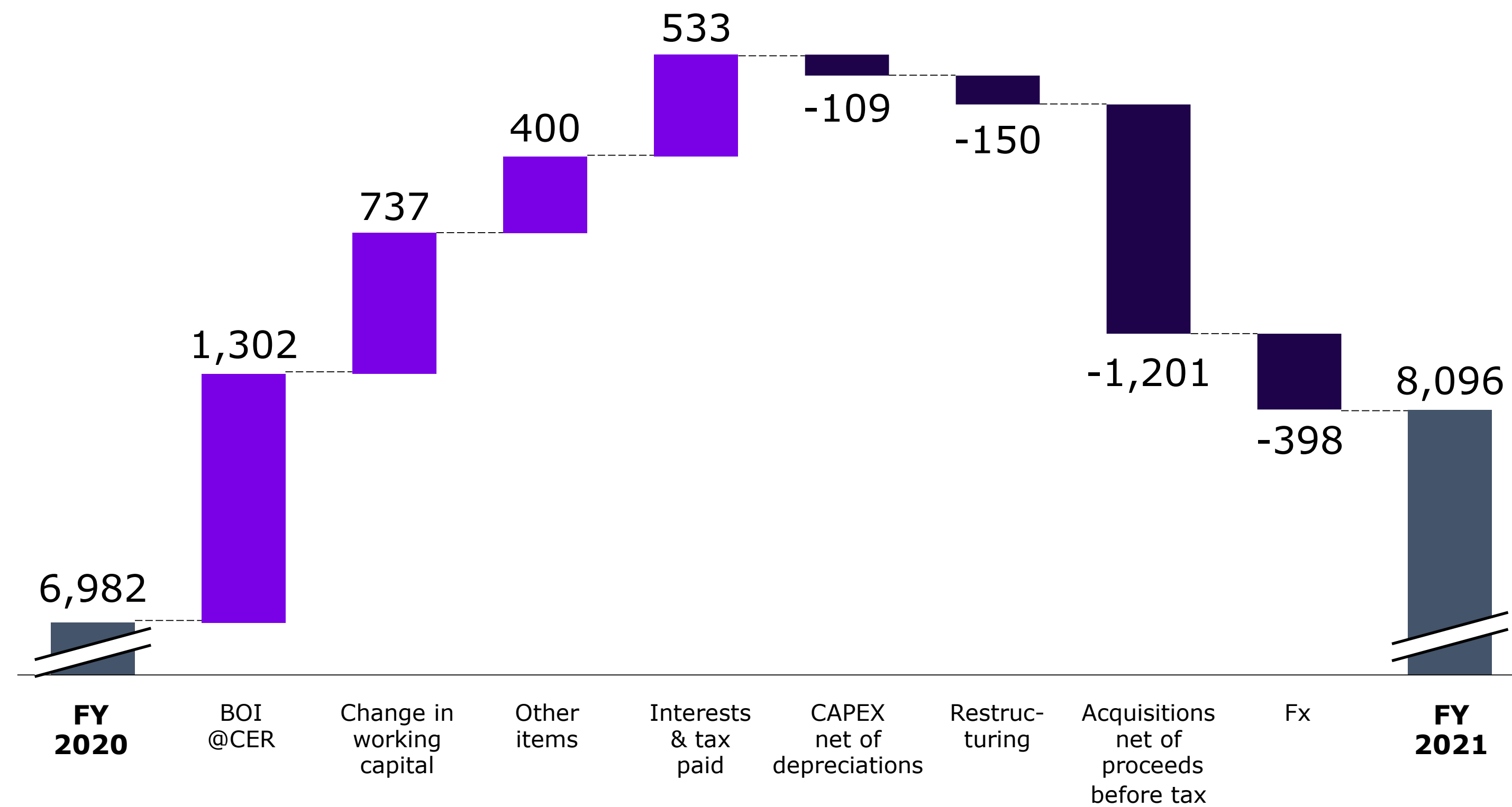


COGS savings not included.

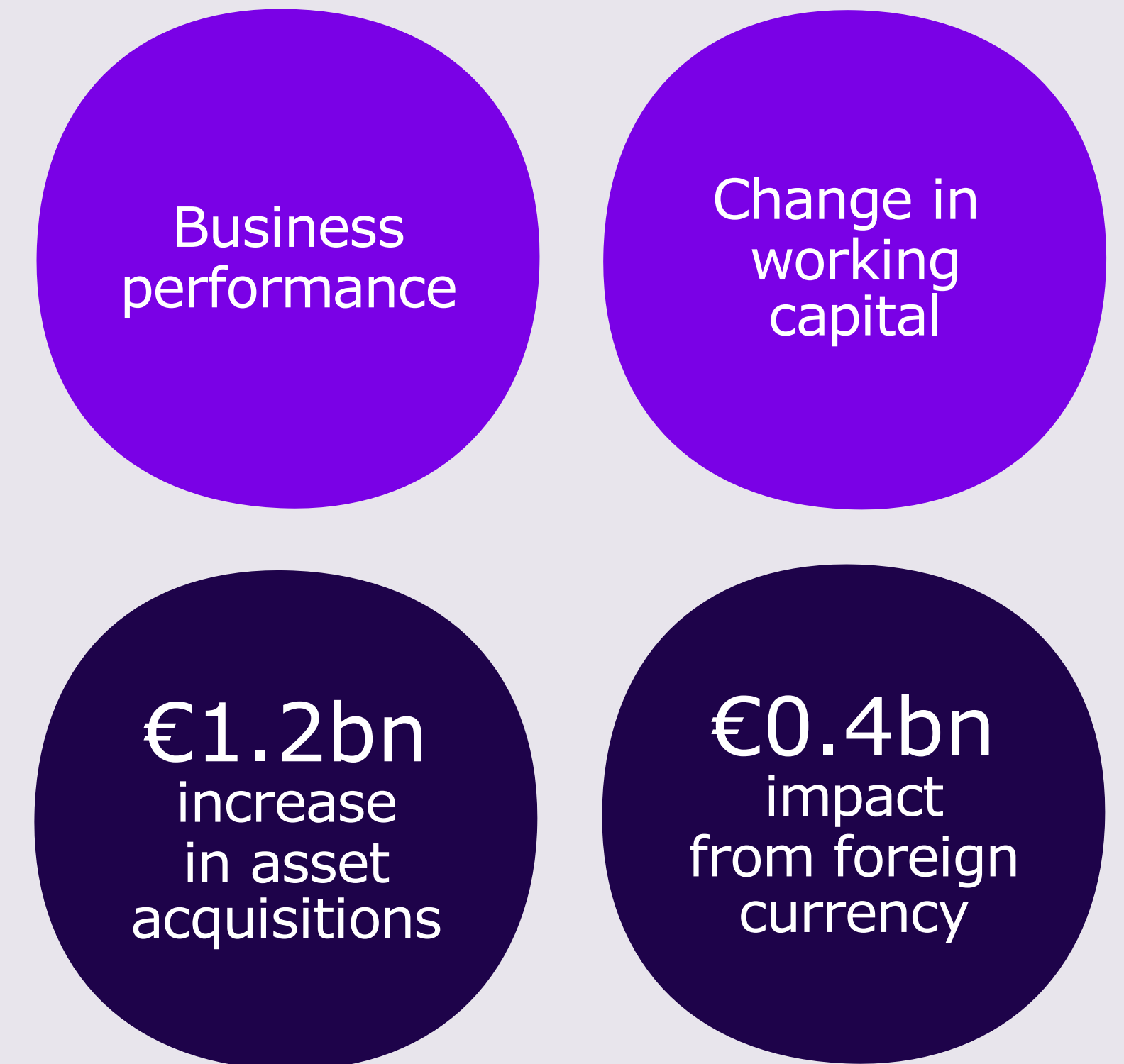
# Free *cash flow*

Doubling since 2018

€ millions

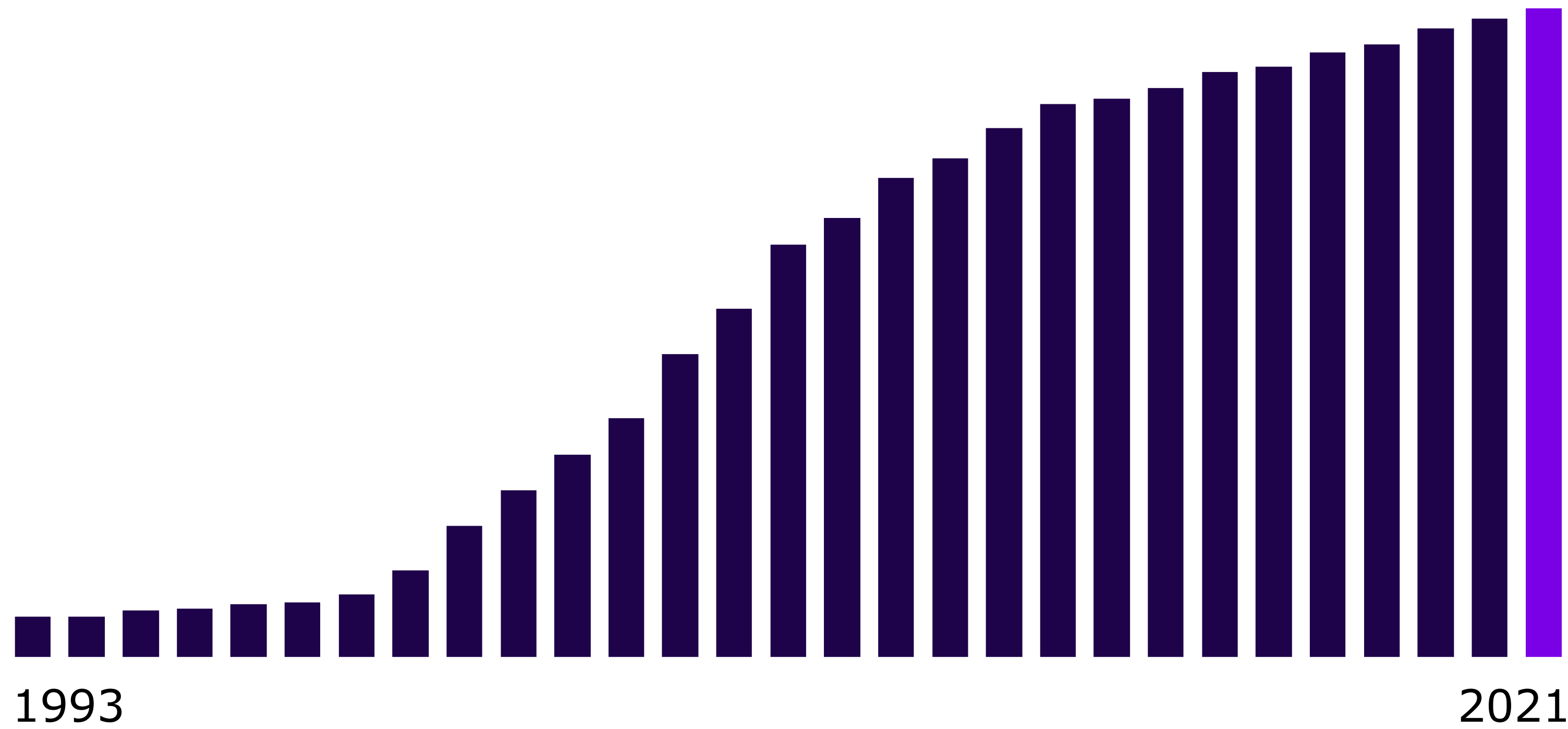


## Free cash flow growth drivers



Free Cash Flow (FCF) definition in Financial appendices.

# Proposed dividend of €3.33



Subject to AGM's approval on May 3<sup>rd</sup>, 2022.



# 2022 business *outlook*

## *Sales*

### Specialty Care

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

### Vaccines

Record flu season

### Consumer Healthcare

Growth of priority brands above market in key geographies

### GenMed

Core assets expected to continue to grow; overall GBU sales stable

### EUROAPI

Expected deconsolidation following IPO

## *P&L*

Further *gross margin* improvement due to product mix and efficiencies

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

*Capital gains* from product disposals expected to reach approximately €500m

*Tax rate* of around 19%

# 2022 *FY guidance*

*BOI margin*

**30%**

*EPS growth*

**Low double-digit**  
growth at CER

Approximately +2% to  
3% currency impact<sup>1</sup>

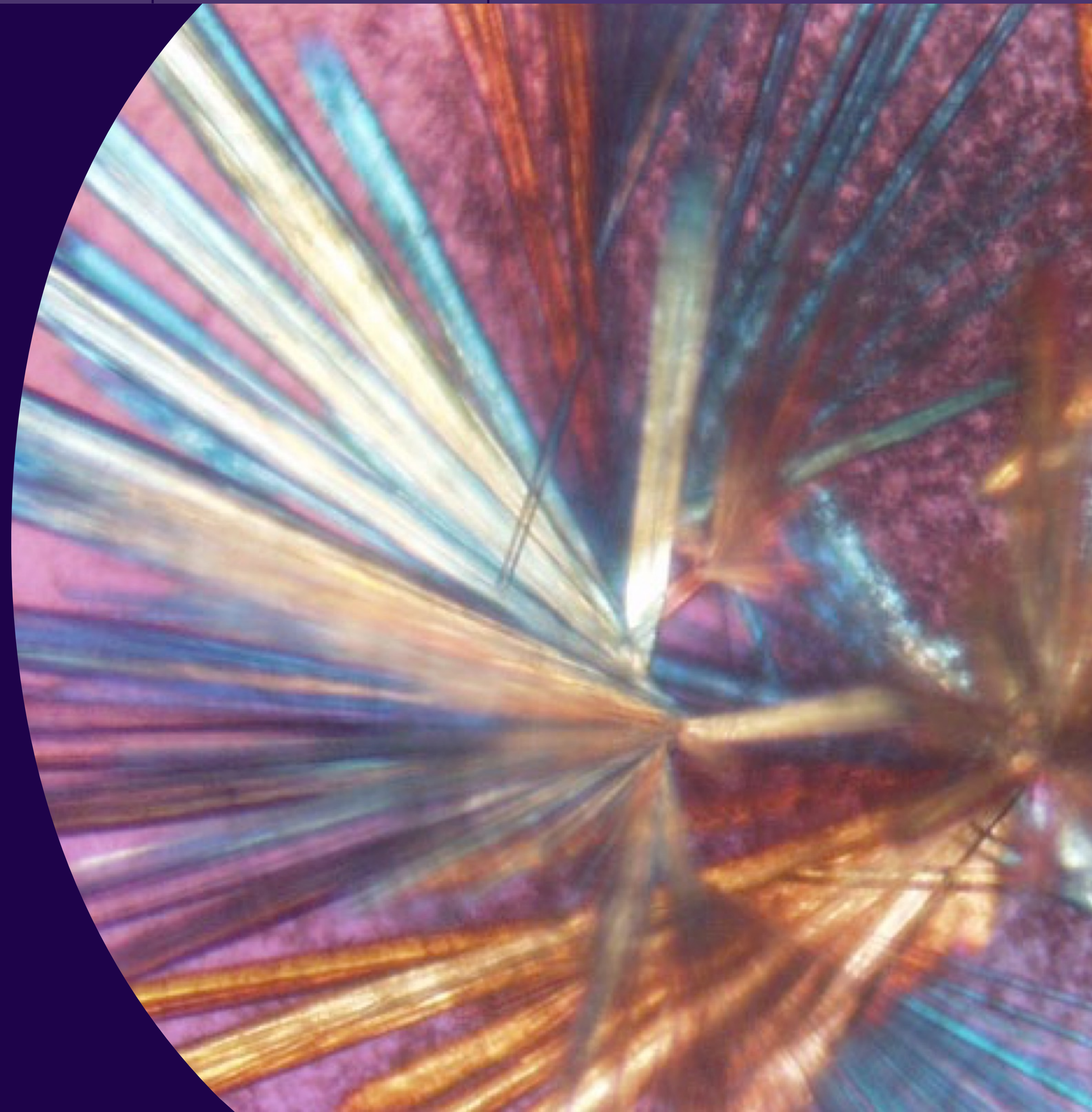


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# Outlook

*2022*





## Major R&D *milestones* in 2022

		<i>H1 2022</i>	<i>H2 2022</i>
<b>Dupixent®</b>	EoE	U.S./EU regulatory submissions	
	PN	U.S./EU regulatory submissions	
	CSU		Pivotal trial read-out (Study B)
	CINDU		Pivotal trial read-out
<b>Oncology</b>	amcenestrant 2/3L mBC	Pivotal trial read-out	
	SAR-245		Phase 3 decision
	Sarclisa® (1L MM)		Pivotal trial read-out (IMROZ)
	Libtayo® (1L NSCLC CT combo)		U.S. regulatory decision
<b>Rare blood diseases</b>	efanesoctocog alfa (hem A)	Pivotal trial read-out	
	sutimlimab (CAD)	U.S. regulatory decision	
<b>Rare diseases</b>	olipudase (ASMD)	JP regulatory decision (SAKIGAKE)	U.S. regulatory decision
<b>Vaccines</b>	nirsevimab (RSV)	EU submission	U.S. submission
	RSV Toddler		Pivotal trial decision
	COVID-19 recombinant	U.S./EU regulatory submissions (booster data)	

Barring unforeseen events. For abbreviations see slide 55.

# Sanofi ESG *accomplishments* in FY 2021

## Affordable access



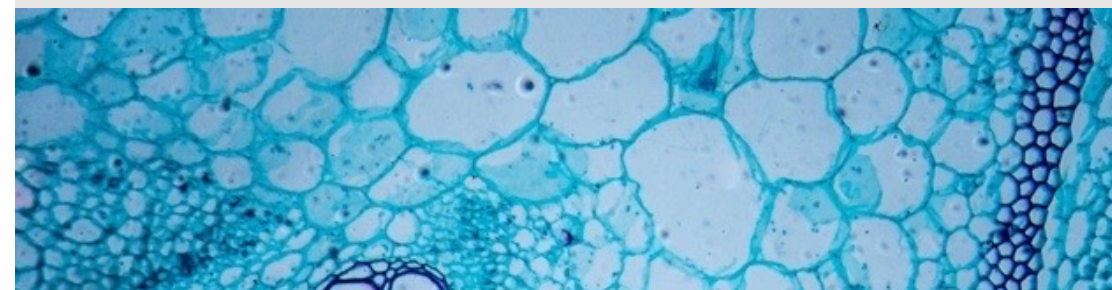
### Global Health Unit

	# patients treated	Countries
Malaria	9,276,504 ▲	23 ▲
Tuberculosis	146,356 ▲	28 ▲
NCD	40,439 ▲	16 ▲

**Vials donation**  
**1,083** patients treated  
**109,677** vials donated

**Global access plan**  
 Pilot phase in progress

## R&D for unmet needs



**Eradicate Polio**  
**50.5 million IPV doses** supplied to UNICEF for GAVI countries

**Eliminate sleeping sickness**  
**1.6 million patients** tested for HAT  
**663 patients** treated<sup>3</sup>

**Develop innovative medicines** to eliminate cancer deaths in children  
**2 assets identified;** preclinical studies started

## Efficiency & Sustainability



**Blister-free vaccines**  
**29%** of vaccines produced are blister free

**Eco-design**  
**4 LCAs** conducted in 2021

**Renewable electricity<sup>1</sup>**  
**50%** renewable electricity  
**57 sites** RE100

**Eco car fleet<sup>1</sup>**  
**26.2%** eco-fleet

## People



**Diverse Senior Leadership**  
**34.2%** of our executives and **40.1%** of our senior leaders were women

**Strengthen social & economic engagement in all communities where we operate**  
**2,623** volunteers  
**17,461** hours<sup>2</sup>

**From Leaders to Citizens**  
 Roll-out planned in 2022

1. As of Q3 2021. 2. In the following countries: France, US, India and China. 3. As of 2020, data 2021 available in April 2022.

# ESG *roadmap* for the next 12 months

## Affordable access

Q4

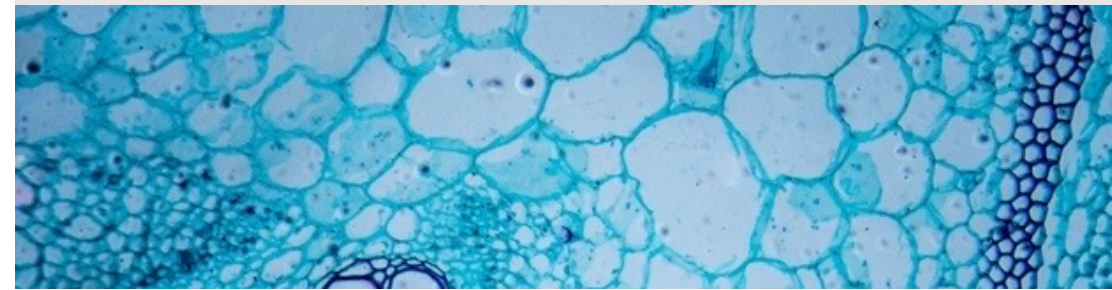


### **Sanofi Global Health and Medtronic Labs to collaborate**

- Multi-country, multi-year partnership
- Leveraging digital health and a community-based approach
- The first phase on Tanzania and Sierra Leone (ambition to reach over 75,000 patients)

## Access and R&D for unmet needs

Q1



## Efficiency & Sustainability

Q2



## People

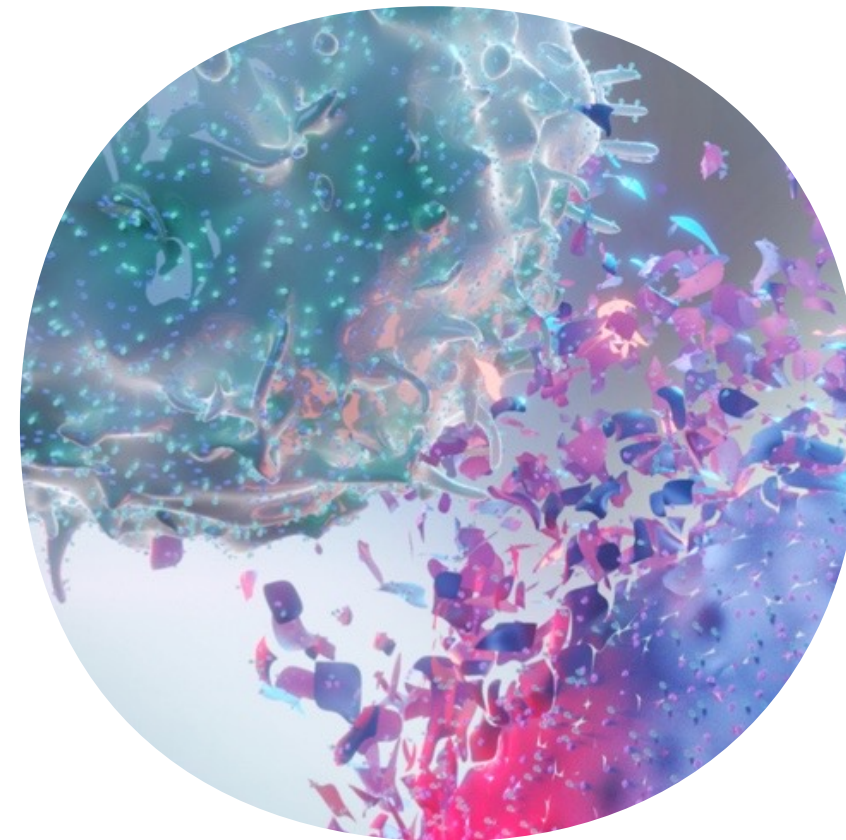
Q3



# Planned *events*



**ACTRIMS call**  
February 25



**Immunology update**  
March 29



**ESG event**  
June / July

# Q&A session



*Paul Hudson*  
CEO



*Jean-Baptiste de Chatillon*  
CFO



*John Reed*  
R&D



*Roy Papatheodorou*  
General Counsel



*Olivier Charmeil*  
General Medicines



*Julie van Ongevalle*  
Consumer Healthcare



*Bill Sibold*  
Specialty Care



*Thomas Triomphe*  
Vaccines

**.sanofi**



# R&D appendices



# R&D Pipeline Phase III & Registration

## Phase III

Name	Description	Indication
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Prurigo Nodularis
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Eosinophilic Esophagitis
<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>itepekimab</b> <sup>A</sup>	Anti-IL-33 mAb	Chronic Obstructive Pulmonary Disease
<b>Libtayo</b> <sup>®A</sup>	Anti-PD-1 mAb	Adjuvant CSCC
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb	1L Newly Diag. MM Ti (IMROZ)
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb	1L Newly Diag. MM Te (GMMG)
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb	Smoldering MM (ITHACA)
<b>amcenestrant</b>	SERD + palbociclib	1L Metastatic breast cancer
<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>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>efanesoctocog alfa</b> <sup>B</sup>	rFVIIIIFc – vWF – XTEN	Hemophilia A
<b>nirsevimab</b> <sup>C</sup>	Monoclonal Antibody	Respiratory Syncytial Virus (RSV)
<b>SP0253</b> <sup>D</sup>	Recombinant baculovirus vaccine	COVID-19
<b>MenQuadfi</b> <sup>®</sup>	Meningococcal (A,C,Y,W) conjugate vaccine	Meningitis 6w+ (US / EU)
<b>VerorabVax</b> <sup>®</sup>	Purified vero rabies vaccine	Rabies

## Registration

Name	Description	Indication
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Atopic Dermatitis 6 months – 5 years old
<b>Libtayo</b> <sup>®A</sup>	Anti-PD-1 mAb	2L Cervical Cancer
<b>Libtayo</b> <sup>®A</sup>	Anti-PD-1 mAb + chemotherapy	1L NSCLC
<b>olipudase alfa</b>	rhASM	ASMD ad+ped
<b>sutimlimab</b>	Anti-complement C1s mAb	Cold Agglutinin Disease

As of December 31, 2021

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

# R&D Pipeline – Phase II

## Phase II

Name	Description	Indication
<b>Dupixent</b> <sup>®A</sup>	Anti-IL-4/IL-13 mAb	Peanut allergy
<b>R Kevzara</b> <sup>®A</sup>	Anti-IL-6 mAb	Polyarticular Juvenile Idiopathic Arthritis
<b>R Kevzara</b> <sup>®A</sup>	Anti-IL-6 mAb	Systemic Juvenile Arthritis
<b>amlitelimab</b> <sup>1</sup>	Anti-OX40L mAb	Atopic Dermatitis
<b>rilzabrutinib</b>	BTK inhibitor	IgG4-related disease
<b>rilzabrutinib</b>	BTK inhibitor	Atopic Dermatitis
<b>SAR443122</b> <sup>E,2</sup>	RIPK1 inhibitor	Cutaneous Lupus Erythematosus
<b>SAR441344</b> <sup>F</sup>	Anti-CD40L mAb	Sjogren's Syndrome
<b>SAR441344</b> <sup>F</sup>	Anti-CD40L mAb	Systemic Lupus Erythematosus
<b>SAR444727</b>	BTK inhibitor (topical)	Atopic Dermatitis
<b>R 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>R amcenestrant</b>	SERD	2/3L Metastatic Breast Cancer
<b>amcenestrant</b>	SERD	Early Breast Cancer
<b>alomfilimab</b> <sup>3</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	Gastric cancer
<b>SAR444245</b> <sup>4</sup>	Non-alpha IL-2 + cemiplimab	Skin cancers
<b>SAR444245</b> <sup>4</sup>	Non-alpha IL-2 + combinations	NSCLC / Mesothelioma
<b>SAR444245</b> <sup>4</sup>	Non-alpha IL-2 + combinations	Head & Neck tumors
<b>SAR444245</b> <sup>4</sup>	Non-alpha IL-2 + combinations	Lymphoma
<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>SAR441344</b> <sup>F</sup>	Anti-CD40L mAb	Multiple Sclerosis
<b>R SAR339375</b>	miRNA-21	Alport Syndrome
<b>venglustat</b>	Oral GCS inhibitor	Fabry Disease
<b>venglustat</b>	Oral GCS inhibitor	Gaucher Disease Type 3
<b>Sarclisa</b> <sup>®</sup>	Anti-CD38 mAb	Warm Autoimmune Hemolytic Anemia
<b>SAR445088</b> <sup>5</sup>	Complement C1s inhibitor	Cold Agglutinin Disease
<b>Fluzone</b> <sup>®</sup> HD (SP0178)	Inactivated influenza Vaccine (IIV)	Pediatric Flu
<b>SP0218</b>	Vero cell	Yellow fever vaccine
<b>SP0202</b> <sup>H</sup>	Next Generation Conjugate Vaccine	Pneumococcal
<b>SP0125</b>	Live Attenuated Virus Vaccine	Respiratory syncytial virus (toddler)
<b>SP0230</b>	Multicomponent vaccine	Meningitis B

As of December 31, 2021

- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines
- R Registrational Study (other than Phase 3)

For collaborations see slide 54. For abbreviations see slide 55.

1. Formerly known as SAR445229/KY1005. 2. Also known as DNL758. 3. Formerly known as KY1044/SAR445256. 4. Formerly known as THOR707. 5. Formerly known as BIVV020.



# 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>	Pegylated IL-2	Inflammatory Indication
<b>SAR443726</b>	Anti-IL-13/OX40L Nanobody® VHH	Atopic Dermatitis
<b>SAR442970</b>	Anti-TNFα/OX40L Nanobody® VHH	Inflammatory Indication
<b>SAR443765</b>	Anti-IL-13/TSLP Nanobody® VHH	Inflammatory Indication
<b>SAR442999</b>	Anti-TNFα/IL23A Nanobody® VHH	Inflammatory Indication
<b>SAR441000</b> <sup>J</sup>	Cytokine mRNA	Solid tumors
<b>SAR442257</b>	Anti-CD38xCD28xCD3 trispecific mAb	MM / N-H Lymphoma
<b>SAR442720</b> <sup>G</sup>	SHP2 inhibitor + pembrolizumab	1L NSCLC
<b>SAR444245</b> <sup>2</sup>	Non-alpha IL-2 mono, combo (PD-1, EGFR)	Solid tumors
<b>SAR444881</b> <sup>K</sup>	Anti-ILT2 mAb	Solid tumors
<b>SAR445419</b> <sup>3</sup>	NK-cell-based immunotherapy	Acute Myeloid Leukemia
<b>SAR443216</b>	Anti-CD3xCD28xHer2 trispecific mAb	Gastric cancer
<b>SAR445710</b> <sup>4</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>SAR442501</b>	Anti-FGFR3 mAb	Achondroplasia
<b>SAR443809</b>	Anti-Factor Bb mAb	Rare renal diseases
<b>SAR443820</b> <sup>E,5</sup>	RIPK1 inhibitor	Amyotrophic Lateral Sclerosis
<b>SP0148</b> <sup>M</sup>	HSV-2 therapeutic vaccine	Herpes Simplex Virus (HSV) Type 2
<b>SP0273</b>	mRNA vaccine	Influenza vaccine

As of December 31, 2021

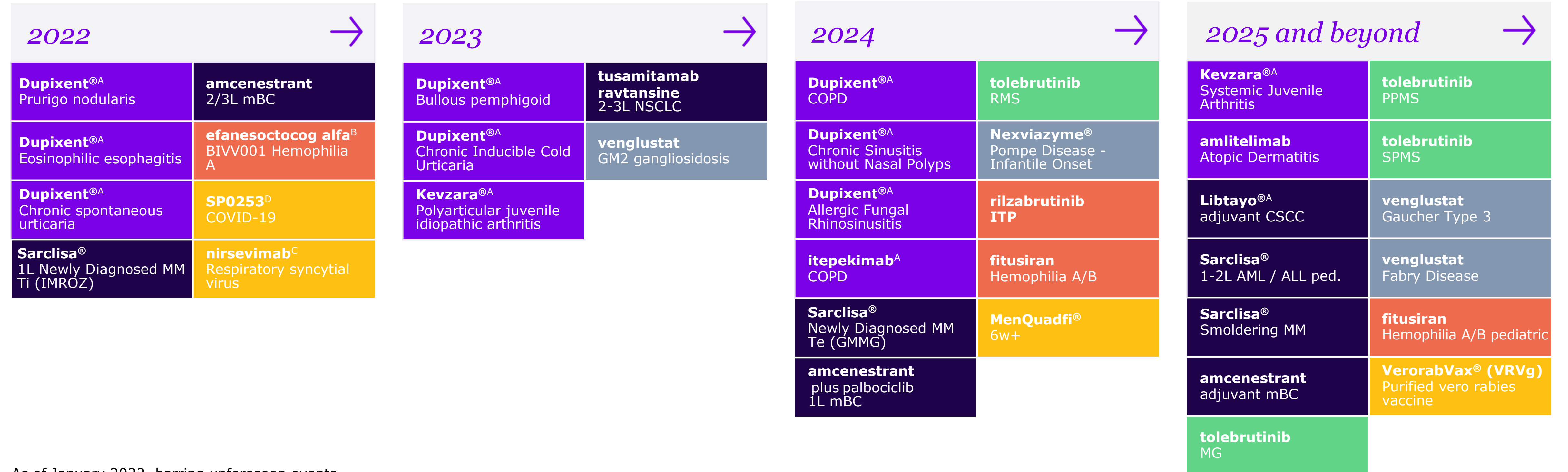
- Immuno-inflammation
- Oncology
- Neurology
- Rare Diseases
- Rare Blood Disorders
- Vaccines

R Registrational Study (other than Phase 3)

For collaborations see slide 54. For abbreviations see slide 55.

1. Also known as KT474. 2. Formerly known as THOR707. 3. Formerly known as KDS1001. 4. Formerly known as SAR445229/KY1005. 5. Also known as DNL788.

# Expected submission timelines



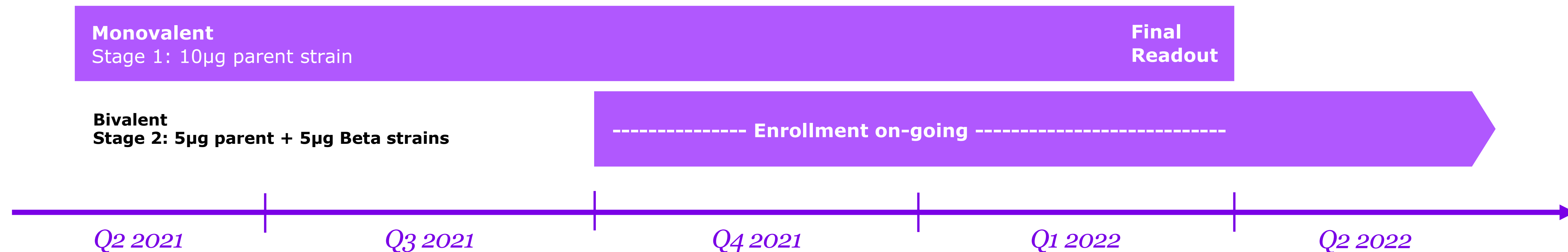
As of January 2022, barring unforeseen events

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

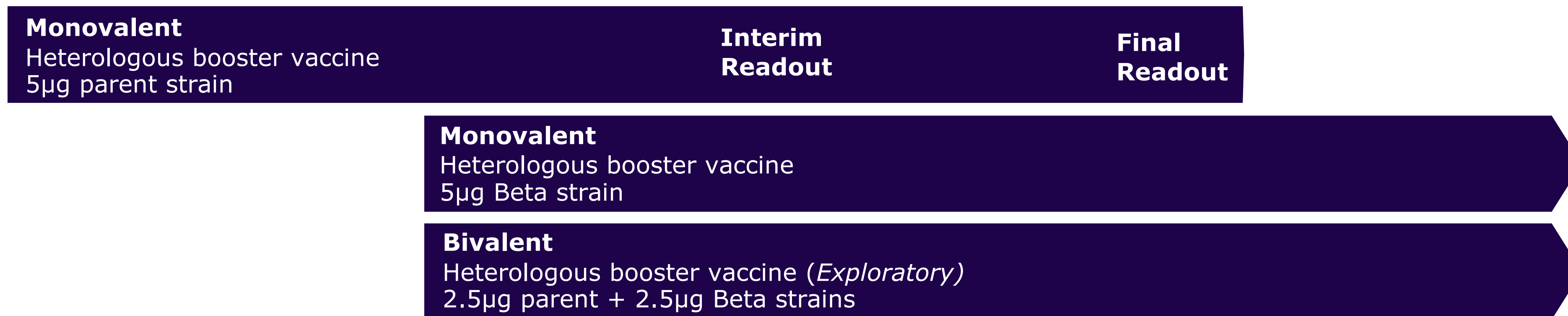
For collaborations see slide 54. For abbreviations see slide 55. Excluding Phase 1 and 2 (without Proof of Commercial Concept); projects within a specified year are not arranged by submission timing.

# COVID-19 recombinant vaccine program

## 1 Phase 3 Safety & Efficacy Trial – primary vaccine (event-driven)



## 2 Booster Study (subjects primed with mRNA, adenovirus or protein-based vaccines)

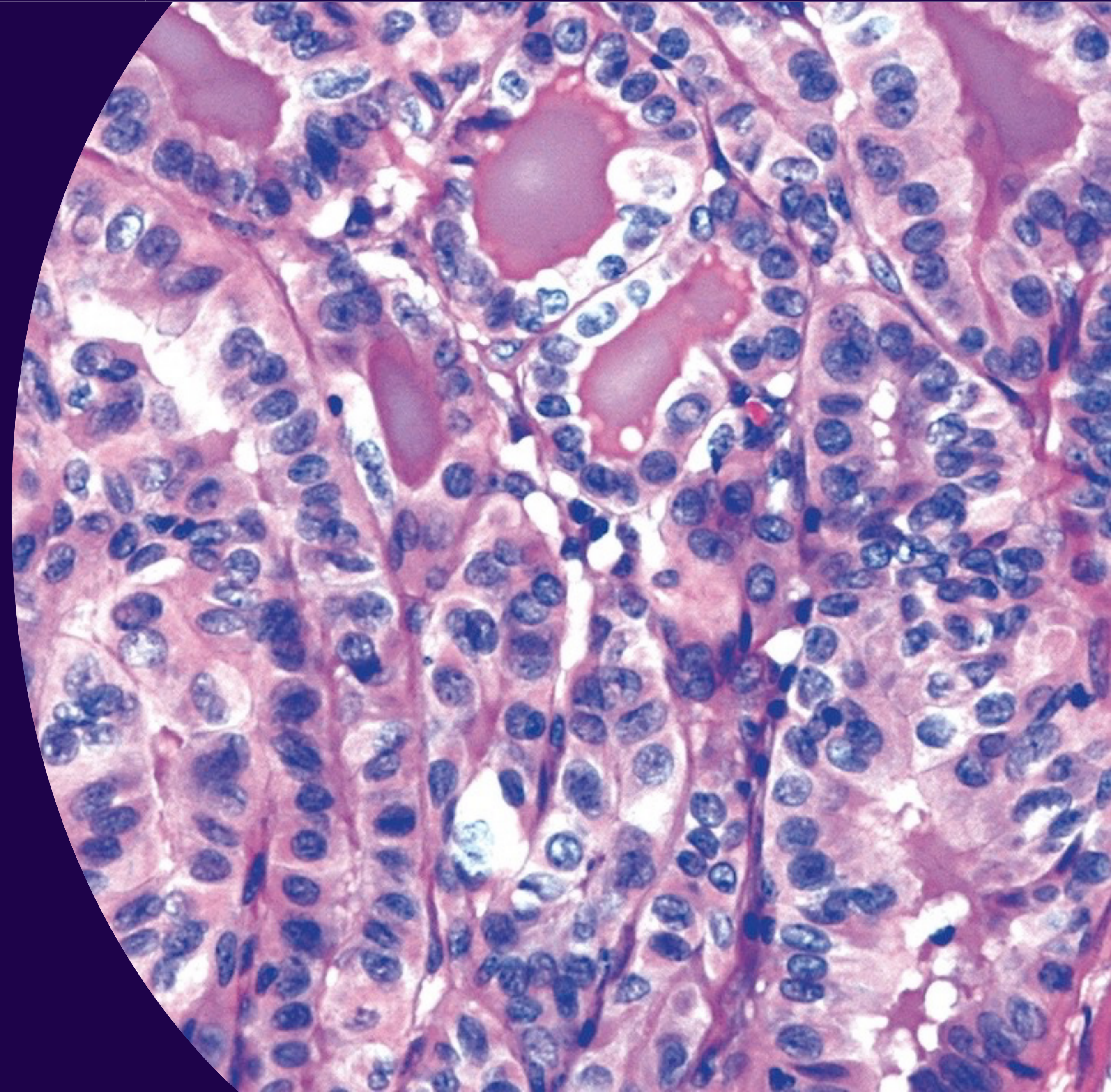


The COVID-19 vaccine candidate is under investigation and has not been approved by regulators. Parent strain = D614, Beta strain = B.1.351.

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# Financial appendices



# Full Year P&L

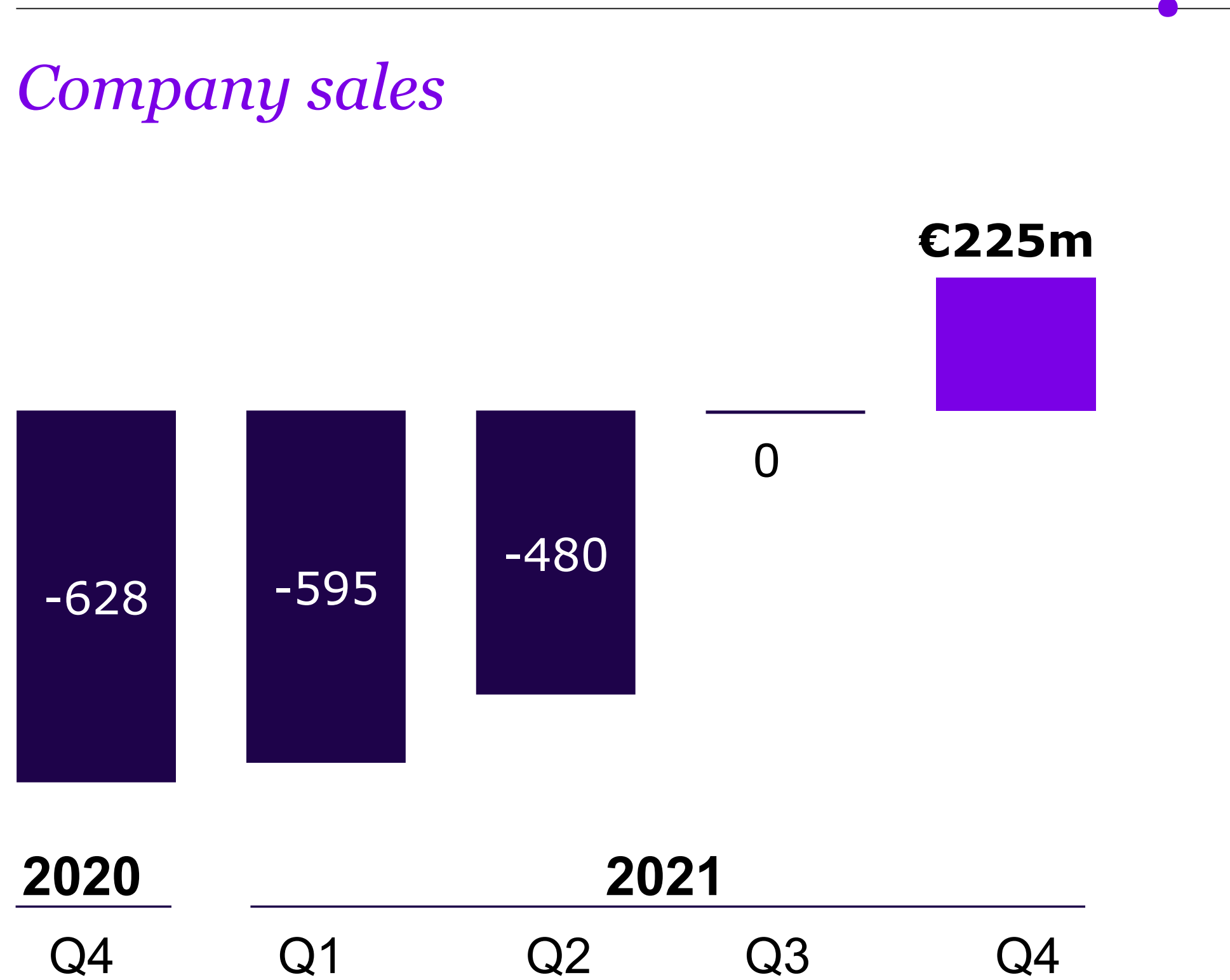
<i>€m</i>	<i>FY 2021</i>	<i>FY 2020</i>	<i>% Change (CER)</i>
<b>Net Sales</b>	<b>37,761</b>	<b>36,041</b>	<b>+7.1%</b>
Other revenues	1,414	1,328	+10.1%
Gross profit	26,924	25,263	+9.1%
Gross margin %	71.3%	70.1%	
R&D	(5,692)	(5,530)	+4.3%
SG&A	(9,555)	(9,391)	+3.7%
<b>Operating Expenses</b>	<b>(15,247)</b>	<b>(14,921)</b>	<b>+3.9%</b>
Other current operating income & expenses	(946)	(561)	+73.1%
<b>Business Operating Income</b>	<b>10,714</b>	<b>9,759</b>	<b>+13.3%</b>
Business operating margin	28.4%	27.1%	
Effective tax rate	20.9%	22.0%	
<b>Total Business Net Income</b>	<b>8,213</b>	<b>7,346</b>	<b>+15.5%</b>
Average number of shares	1,252.5	1,253.6	
<b>Business EPS</b>	<b>6.56</b>	<b>5.86</b>	<b>+15.5%</b>

All growth at CER.

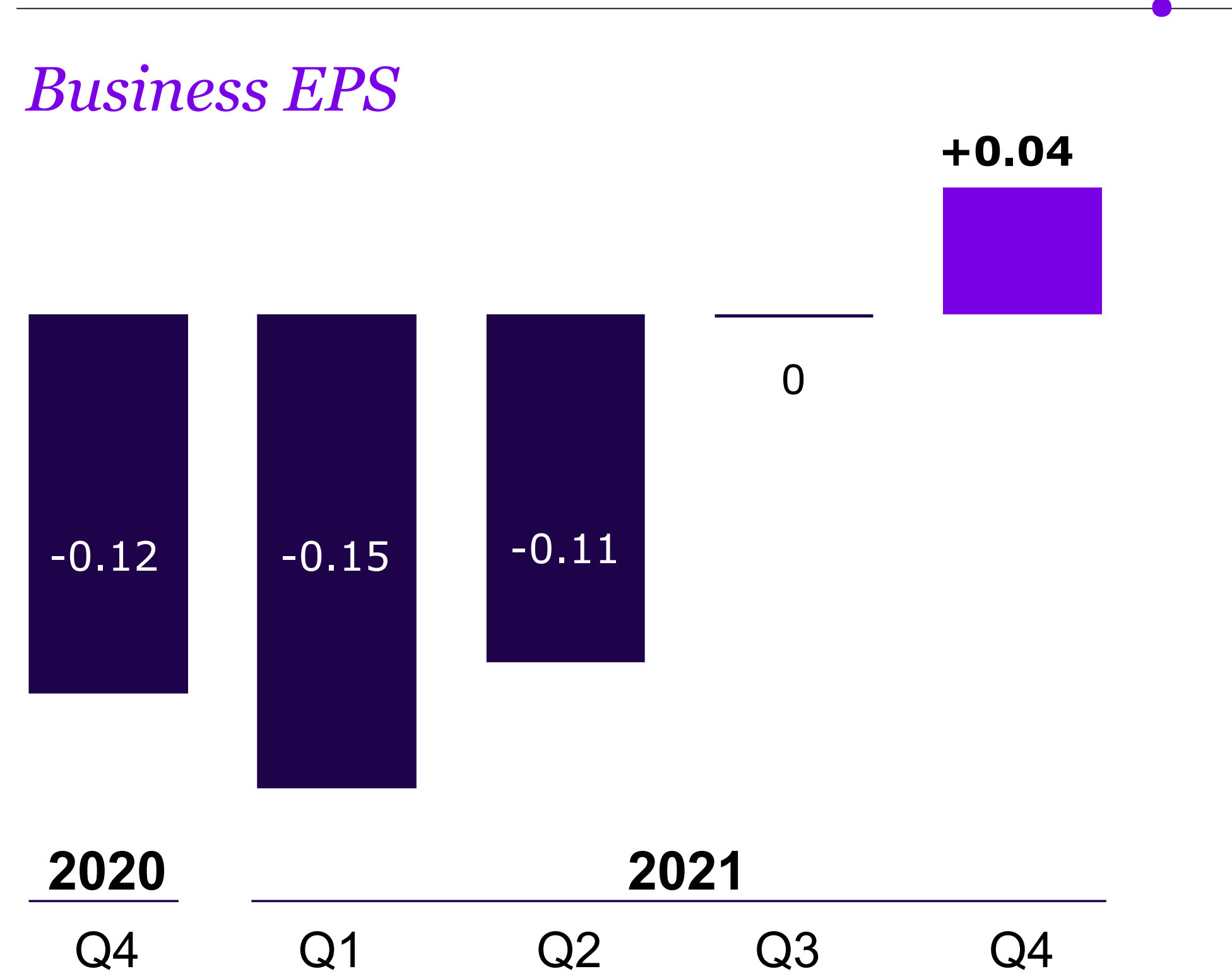
# Q4 sales and EPS

## Currency impact

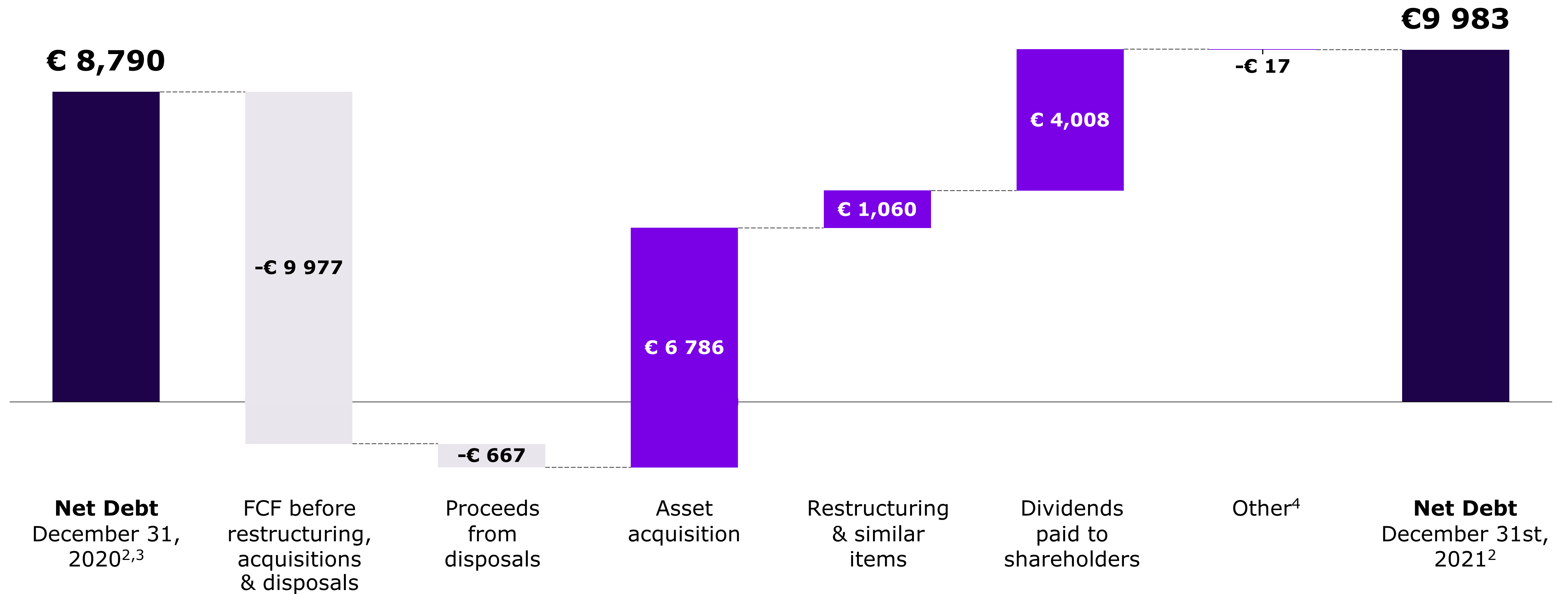
*Company sales*



*Business EPS*



# Net debt evolution in FY 2021<sup>1</sup>



1. Credit ratings reaffirmed: Moody's A1/stable, S&P AA/stable, Scope AA/positive as of December 31, 2021. 2. Including derivatives used to manage net debt: €193m at December 31, 2021 and -€226m at December 31, 2020. 3. Effective January 1, 2019, net debt does not include lease liabilities following the first-time application of IFRS16. 4. Including €382m use of funds from acquisition of treasury shares and €186m of proceeds from issuance of Sanofi shares.

## 2022 currency sensitivity and Q4 2021 currency exposure

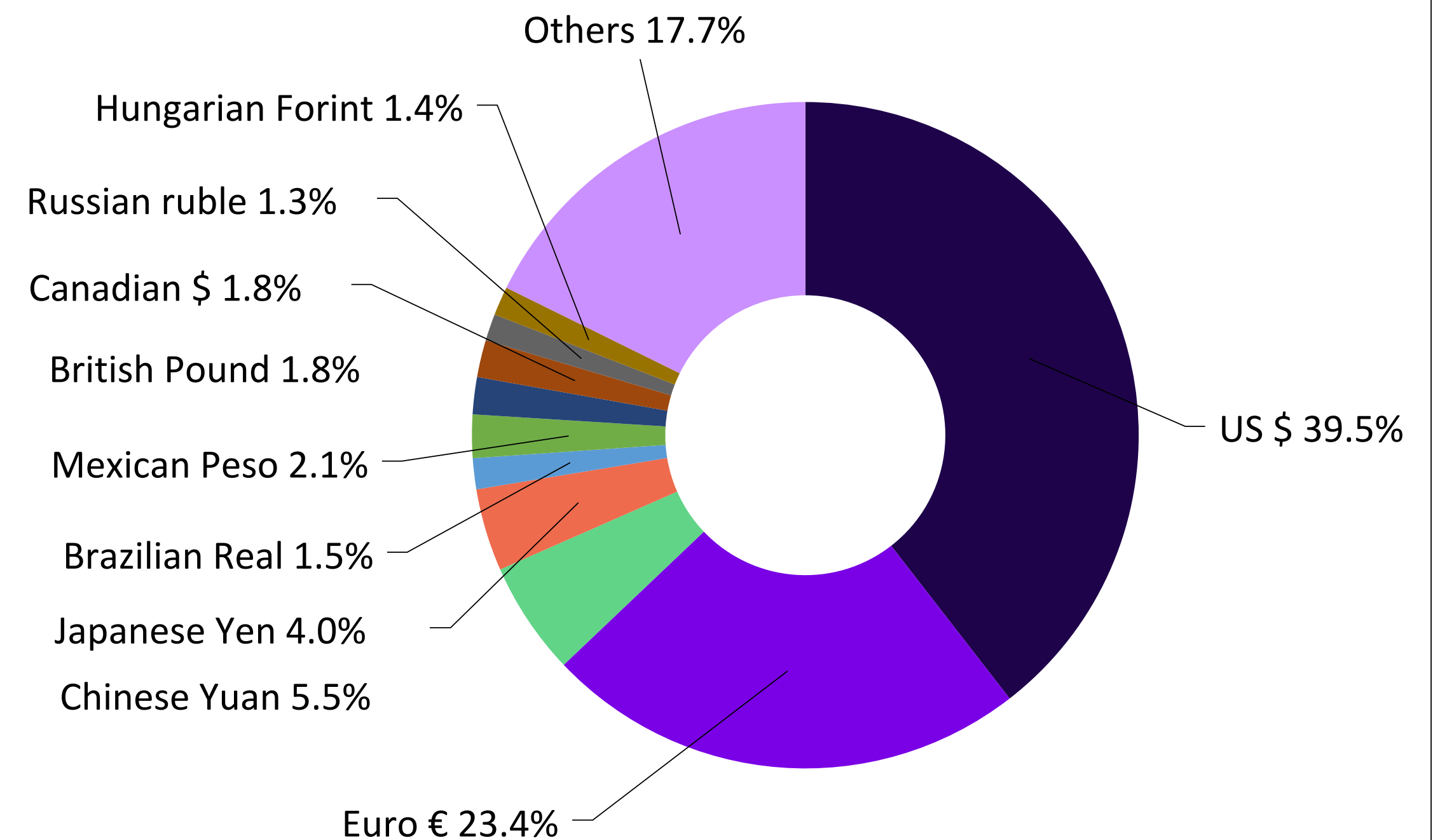
### 2022 Business EPS currency sensitivity

Currency	Variation	Business EPS sensitivity
U.S. Dollar	+ 0.05 USD/EUR	- EUR 0.14
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

	Q4 2020	Q4 2021	% change
EUR/USD	1.19	1.14	-4.1%
EUR/JPY	124.54	130.06	+4.4%
EUR/CNY	7.88	7.31	-7.2%
EUR/BRL	6.44	6.39	-0.8%
EUR/RUB	90.90	83.11	-8.6%

### Currency exposure on Q4 2021 sales





# Main product *sales*

	<i>2021 sales (€m)</i>	<i>Growth</i>
Dupixent	5,249	52.7%
Influenza Vaccines	2,628	5.9%
Lantus	2,494	-3.8%
Aubagio	1,955	-1.8%
Lovenox	1,486	12.0%
Myozyme	1,003	7.7%
Toujeo	969	6.4%
Plavix	929	2.4%
Fabrazyme	844	6.5%
Cerezyme	683	3.9%
Meningitis Vaccines	658	21.1%
Eloctate	563	-8.5%
Jevtana	455	-12.3%
Aprovel	419	-24.5%
Alprolix	414	-7.9%
Thymoglobuline	350	13.3%
Multaq	329	8.3%
Apidra	323	1.2%
Kevzara	287	23.7%
Cerdelga	254	11.1%

All growth at CER unless footnoted.

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

Last updated September 2021

		<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	Regeneron reimburses 50% of cumulative development costs quarterly <sup>2</sup> ; <i>Reimbursement capped at 10% of Regeneron's share of profit per quarter on all Antibody products combined<sup>3</sup></i>	
	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 September 2021. 2. As of December 31, 2020, such commitments received were \$3.1bn, relative to cumulative development costs of \$8.0bn, of which \$7.2bn 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-U.S. 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>1,2</sup>

Last updated September 2021

		<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 <sup>3</sup>	
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 U.S. commercial expenses	Outflow: No Regeneron commercial expenses ex-US
	2. Development balance	Regeneron reimburses 50% of pre-POC development costs <sup>4</sup> quarterly <sup>5</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 and an IO License and Collaboration Agreement (IO LCA). 2. Libtayo<sup>®</sup> collaboration unaffected by the Amended I-O Discovery and Development Agreement terminated in Q1 2021. 3. The Libtayo<sup>®</sup> budget is funded equally by the two companies. 4. As of December 31, 2020, amounts to \$104m primarily for bi-specifics, LAG3 and CTLA-4 development programs conducted in the frame of the IO Discovery Agreement terminated in Q1 2021. 5. Capped at 10% of Regeneron profit share per quarter.

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# ESG appendices



# Sanofi ESG ratings improving

## Rating agencies

<b>SCORE</b>									
<b>62</b> out of 100 ▲	<b>22.9</b> <b>Medium risk</b> ▲	<b>86</b> out of 100 ▲	<b>A</b> Best score is AAA ▲	Climate Change: <b>A</b> Water: <b>A</b> ▲	<b>Rated B</b> out of A+ =	<b>4.2</b> out of 5 =	<b>3.47</b> out of 5 ▲	<b>92%</b> out of 100 ▲	<b>70</b> out of 100 ▲
1st pharmaceutical company out of 57 Score in progress since 2018	11th among 483 pharmaceutical companies	2 <sup>nd</sup> in ranking among 91 pharmaceutical companies	4th among the 6 largest pharmaceutical companies	Leading position	In the Top 3 companies among 391	With very high rating across the 3 pillars ESG	Top 5 company	Sanofi's disclosure score well above sector disclosure score (74%)	With a balanced score in the 4 selection sections: • Environment • Labor & Human Rights • Ethics • Sustainable Procurement

Scores assigned by the rating agencies are not equivalent.

# Collaborations

Ref	Name	Developed in collaboration with...
A	<b>Dupixent® itepekimab Libtayo® Kevzara®</b>	Regeneron
B	<b>efanesoctocog alfa</b>	Sobi
C	<b>nirsevimab</b>	AstraZeneca
D	<b>SP0253</b>	GSK and with funding from Biomedical Advanced Research and Development Authority (BARDA)
E	<b>SAR443122 SAR443820</b>	Denali
F	<b>SAR441344</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
M	<b>SP0148</b>	Immune Design/Merck

# Abbreviations

<b>AD</b>	Atopic Dermatitis
<b>ALL</b>	Acute Lymphoblastic Leukemia
<b>ALS</b>	Amyotrophic Lateral Sclerosis
<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>cGVHD</b>	Chronic Graft-versus-Host Disease
<b>CIDP</b>	Chronic Inflammatory Demyelinating Polyneuropathy
<b>CInDU</b>	Chronic Inducible Cold Urticaria
<b>CLE</b>	Cutaneous Lupus Erythematosus
<b>COPD</b>	Chronic Obstructive Pulmonary Disease
<b>CSCC</b>	Cutaneous Squamous Cell Carcinoma
<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>HER2</b>	Human Epidermal growth factor Receptor 2
<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>mAb</b>	monoclonal Antibody
<b>mBC</b>	metastatic Breast Cancer
<b>MenB</b>	Meningitis B
<b>MG</b>	Myasthenia Gravis
<b>MM</b>	Multiple Myeloma
<b>mRNA</b>	messenger RNA
<b>miRNA</b>	micro 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>rFVIIIFc-vWF-XTEN</b>	recombinant coagulation Factor VIII Fc – von Willebrand Factor – XTEN Fusion protein
<b>rhASM</b>	recombinant human Acid Sphingomyelinase
<b>RIPK1</b>	Receptor-Interacting serine/threonine-Protein Kinase 1
<b>RMS</b>	Relapsing Multiple Sclerosis
<b>RNAi</b>	RNA interference
<b>RSV</b>	Respiratory Syncytial Virus
<b>SERD</b>	Selective Estrogen Receptor Degradar
<b>SHP2</b>	Src Homology-2 domain-containing protein tyrosine Phosphatase-2
<b>SLE</b>	Systemic Lupus Erythematosus
<b>SPMS</b>	Secondary-Progressive Multiple Sclerosis
<b>Te</b>	Transplant eligible
<b>Ti</b>	Transplant ineligible
<b>TNF</b>	Tumor Necrosis Factor
<b>TSLP</b>	Thymic Stromal Lymphopoietin
<b>WAIHA</b>	Warm Autoimmune Hemolytic Anemia