



2021 GUIDANCE CALL DECEMBER 15, 2020

# AGENDA



## INTRODUCTION

**Dave Ricks**, Chairman and Chief Executive Officer

## 2021 GUIDANCE

**Josh Smiley**, Chief Financial Officer

## R&D UPDATE

**Dan Skovronsky, M.D., Ph.D.**, Chief Scientific Officer

## CLOSING REMARKS

**Dave Ricks**, Chairman and Chief Executive Officer

## QUESTION AND ANSWER SESSION

# SAFE HARBOR PROVISION



This presentation contains forward-looking statements that are based on management's current expectations, but actual results may differ materially due to various factors. The company's results may be affected by factors including, but not limited to, the risks and uncertainties in pharmaceutical research and development; competitive developments; regulatory actions; the extent and duration of the effects of the COVID-19 pandemic; litigation and investigations; business development transactions; economic conditions; and changes in laws and regulations, including health care reform.

For additional information about the factors that affect the company's business, please see the company's latest Forms 10-K, 10-Q, and any 8-Ks filed with the Securities and Exchange Commission.

**The company undertakes no duty to update forward-looking statements except as required by applicable law**

# KEY EVENTS 2020

  New since last update



## Phase 3 Initiations

- ✓+ **Tirzepatide** CV outcome study (H2H vs. dulaglutide)
- ✓+ **Lebrikizumab** for atopic dermatitis (Dermira acquisition)
- ✓+ **Selpercatinib** for 1L NSCLC<sup>3</sup>
- ✓+ **Selpercatinib** for 1L medullary thyroid cancer<sup>3</sup>
- ✓+ **Bamlanivimab** for post-exposure COVID-19 prophylaxis

## Phase 3 Top-Line Data Disclosures

- ✓+ **Empagliflozin** for HFrEF<sup>1</sup>
- ✓+ **Tirzepatide** for type 2 diabetes (first of five)
- ✓+ **Baricitinib** for atopic dermatitis (last two of five studies)
- ✓+ **Mirikizumab** for psoriasis (OASIS-1 & -2)
- Mirikizumab** for ulcerative colitis (induction data) – (now expected 2021)
- ✓- **Solanezumab** for dominantly inherited Alzheimer's
- ✓+ **Abemaciclib** for high-risk HR+,HER2- early breast cancer
- ✓+ **Baricitinib** for hospitalized COVID-19 patients

## Medical Meeting Presentations

- ✓+ **Dulaglutide** alternate doses for type 2 diabetes
- ✓+ **LOXO-305** additional data from Phase 1/2 study
- ✓+ **Abemaciclib** for high risk HR+,HER2- early breast cancer
- ✓+ **Empagliflozin** for HFrEF<sup>1</sup>

## Regulatory Submissions

- ✓+ **Baricitinib** for atopic dermatitis (US✓+/EU✓+/J✓+)
- ✓+ **Tanezumab** osteoarthritis pain (US<sup>2</sup> ✓+/EU✓+)
- ✓+ **Selpercatinib** for NSCLC and thyroid cancers (EU✓+/J)<sup>3</sup>
- ✓+ **Abemaciclib** for high-risk HR+,HER2- early breast cancer (US/EU✓+)
- ✓+ **Empagliflozin** for HFrEF (US /EU✓+ /J✓+)<sup>1</sup>

## Regulatory Actions

- ✓+ **Dulaglutide** alternate doses for type 2 diabetes (US✓+/EU✓+)
- ✓+ **Dulaglutide** REWIND CV outcomes study (US)
- ✓+ **Empagliflozin + linagliptin + metformin XR** for type 2 diabetes (US)<sup>1</sup>
- ✓+ **Ultra rapid lispro** for type 1 and type 2 diabetes (US✓+/EU✓+/J✓+)
- ✓+ **Flortaucipir** as a PET imaging agent (US)
- ✓- **Galcanzumab** for episodic cluster headache (EU)
- ✓+ **Ixekizumab** for non-radiographic axial spondyloarthritis (US✓+/EU✓+/J✓+)
- ✓+ **Ixekizumab** for radiographic axial spondyloarthritis (EU)
- ✓+ **Ramucirumab** for 1L EGFR NSCLC cancer (US✓+/EU✓+/J✓+)
- ✓+ **Selpercatinib** for NSCLC and thyroid cancers (US)
- ✓+ **Baricitinib** for atopic dermatitis (EU)
- ✓+ **Bamlanivimab** EUA for mild-to-moderate COVID-19 in high-risk patients
- ✓+ **Baricitinib** EUA for hospitalized COVID-19 in combination with remdesivir

# STRATEGIC DELIVERABLES

2021 GUIDANCE



## Grow Revenue



- Double-digit revenue growth\*
- Revenue growth driven by:
  - volume, not price
  - key growth products

## Improve Productivity



- Non-GAAP operating margin of ~32%
- Represents ~200 bps improvement over 2020

## Create Long-Term Value



- Pursue external innovation in our core therapeutic areas
- 15% dividend increase

## Speed Life-Changing Medicines



- Potential NILEX launches include Verzenio® for high-risk HR+,HER2- early breast cancer and Jardiance® for heart failure with HFrEF
- Phase 3 readouts for tirzepatide, lebrikizumab, mirikizumab, and baricitinib
- Phase 2 readouts from Alzheimer's trials for donanemab and zagotenemab

Note: Jardiance is part of the Boehringer Ingelheim (BI) and Lilly Alliance and BI holds the marketing authorization for Jardiance.

\*using the mid-points of the 2020 and 2021 guidance ranges

# DYNAMICS AFFECTING 2021 OUTLOOK



## FAVORABLE

- ✓ Broad vaccination drives return to near normalcy of healthcare systems in the second half of 2021
- ✓ Continued uptake and OUS scaling of key growth products:
  - Trulicity®    Olumiant®    Tyvyt®
  - Taltz®        Cyramza®    Retevmo™
  - Verzenio     Emgality®
  - Jardiance
- ✓ Full year impact of NME & NILEX launches:
  - Trulicity REWIND CV outcomes & higher doses
  - Retevmo
  - Olumiant atopic dermatitis
  - Taltz nr-axSpA
  - Cyramza 1L EGFR NSCLC
- ✓ Impact of 340B limited distribution program
- ✓ Sunset of impact from revision of BI Alliance
- ✓ Efficiencies from utilizing existing commercial footprint

## UNFAVORABLE

- ✗ Continued demand impact due to COVID-19 pandemic in the first half of 2021
- ✗ Ongoing global pricing headwinds in the mid-single digits
- ✗ \$100-\$200M headwind from increased unemployment
- ✗ Loss of patent exclusivity:
  - Alimta® (EU, Japan)
  - Cymbalta® (Japan)
- ✗ Continued erosion of Forteo®
- ✗ Increased R&D investments in key late-stage assets

Note: Jardiance is part of the Boehringer Ingelheim and Lilly Diabetes Alliance

# UPDATED 2020 GUIDANCE

## INCLUDING COVID-19 THERAPIES



|                                      | Prior                   | Updated                 | Comments                                                                                                       |
|--------------------------------------|-------------------------|-------------------------|----------------------------------------------------------------------------------------------------------------|
| <b>TOTAL REVENUE</b>                 | \$23.7 – \$24.2 billion | \$24.2 – \$24.7 billion | Increase due to additional bamlanivimab purchase agreement with the U.S. government                            |
| <b>GROSS MARGIN % (GAAP)</b>         | approx. 78%             | unchanged               |                                                                                                                |
| <b>GROSS MARGIN % (NON-GAAP)</b>     | approx. 80%             | approx. 79%             | Bamlanivimab slight erosion to overall gross margin percent                                                    |
| <b>MKTG, SELLING &amp; ADMIN.</b>    | \$6.0 – \$6.1 billion   | unchanged               |                                                                                                                |
| <b>RESEARCH &amp; DEVELOPMENT</b>    | \$5.8 – \$5.9 billion   | unchanged               | Assumes ~\$400M of investment in COVID-19 therapies                                                            |
| <b>OTHER INCOME/(EXPENSE)</b>        | \$450 – \$600 million   | \$600 – \$700 million   | Increase driven by projected additional equity investment gains                                                |
| <b>TAX RATE</b>                      | approx. 14%             | unchanged               |                                                                                                                |
| <b>EARNINGS PER SHARE (GAAP)</b>     | \$6.20 – \$6.40         | \$6.28 – \$6.48         | Increase due to bamlanivimab revenues partially offset by additional acquired IPR&D expenses                   |
| <b>EARNINGS PER SHARE (NON-GAAP)</b> | \$7.20 – \$7.40         | \$7.45 – \$7.65         | Increase due to additional bamlanivimab purchase agreement with the U.S. government                            |
| <b>OPERATING MARGIN (GAAP)</b>       | approx. 25%             | unchanged               |                                                                                                                |
| <b>OPERATING MARGIN (NON-GAAP)</b>   | approx. 29%*            | approx. 30%             | Slight increase in operating margin due to additional bamlanivimab purchase agreement with the U.S. government |

2020 FX assumptions: Euro 1.17/ RMB 6.82/ Yen 105.67

2020 diluted weighted share count assumption: ~912 million

\*was 31% excluding COVID-19 therapy investments

# 2020 GUIDANCE REFLECTING 2021 OID CHANGE

EXCLUDING EQUITY INVESTMENT GAINS/LOSSES FROM NON-GAAP OID AND EPS FOR COMPARATIVE PURPOSES



|                                          | Updated                 | Revised                   | Comments                                                            |
|------------------------------------------|-------------------------|---------------------------|---------------------------------------------------------------------|
| <b>TOTAL REVENUE</b>                     | \$24.2 – \$24.7 billion | unchanged                 |                                                                     |
| <b>GROSS MARGIN % (GAAP)</b>             | approx. 78%             | unchanged                 |                                                                     |
| <b>GROSS MARGIN % (NON-GAAP)</b>         | approx. 79%             | unchanged                 |                                                                     |
| <b>MKTG, SELLING &amp; ADMIN.</b>        | \$6.0 – \$6.1 billion   | unchanged                 |                                                                     |
| <b>RESEARCH &amp; DEVELOPMENT</b>        | \$5.8 – \$5.9 billion   | unchanged                 |                                                                     |
| <b>OTHER INCOME/(EXPENSE) (GAAP)</b>     | \$600 – \$700 million   | unchanged                 |                                                                     |
| <b>OTHER INCOME/(EXPENSE) (NON-GAAP)</b> | \$600 – \$700 million   | \$(300) – \$(200) million | Excludes 2020 equity investment gains/losses for comparison to 2021 |
| <b>TAX RATE</b>                          | approx. 14%             | unchanged                 |                                                                     |
| <b>EARNINGS PER SHARE (GAAP)</b>         | \$6.28 – \$6.48         | unchanged                 |                                                                     |
| <b>EARNINGS PER SHARE (NON-GAAP)</b>     | \$7.45 – \$7.65         | \$6.70 – \$6.90           | Excludes 2020 equity investment gains/losses for comparison to 2021 |
| <b>OPERATING MARGIN (GAAP)</b>           | approx. 25%             | unchanged                 |                                                                     |
| <b>OPERATING MARGIN (NON-GAAP)</b>       | approx. 30%             | unchanged                 |                                                                     |

2020 FX assumptions: Euro 1.17/ RMB 6.82/ Yen 105.67

2020 diluted weighted share count assumption: ~912 million

# UPDATED 2020 AND FIRST TIME 2021 GUIDANCE

INCLUDING COVID-19 THERAPIES



|                                           | 2020                      | 2021                      | Comments                                                                                                                                                          |
|-------------------------------------------|---------------------------|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>TOTAL REVENUE</b>                      | \$24.2 – \$24.7 billion   | \$26.5 – \$28.0 billion   | ~11% growth at midpoint of ranges, including ~\$1-\$2B for COVID-19 therapies; ~10% growth ex-COVID                                                               |
| <b>GROSS MARGIN % (GAAP)</b>              | approx. 78%               | approx. 77%               | Decrease in GM% due to higher amortization of intangibles                                                                                                         |
| <b>GROSS MARGIN % (NON-GAAP)</b>          | approx. 79%               | approx. 79%               |                                                                                                                                                                   |
| <b>MKTG, SELLING &amp; ADMIN.</b>         | \$6.0 – \$6.1 million     | \$6.2 – \$6.4 billion     | Increase driven by marketing investments for key growth products                                                                                                  |
| <b>RESEARCH &amp; DEVELOPMENT</b>         | \$5.8 – \$5.9 million     | \$6.5 – \$6.7 billion     | Increase driven by Phase 3 spend: tirzepatide, lebrikizumab, selpercatinib, mirikizumab, and LOXO-305; includes ~\$300-\$400M of investment in COVID-19 therapies |
| <b>OTHER INCOME/(EXPENSE) (GAAP)</b>      | \$600 – \$700 million     | \$(300) – \$(200) million | Decrease in range due to equity investment gains in 2020                                                                                                          |
| <b>OTHER INCOME/(EXPENSE) (NON-GAAP)*</b> | \$(300) – \$(200) million | \$(300) – \$(200) million |                                                                                                                                                                   |
| <b>TAX RATE</b>                           | approx. 14%               | approx. 15%               | Increase includes impact of COVID-19 therapies                                                                                                                    |
| <b>EARNINGS PER SHARE (GAAP)</b>          | \$6.28 – \$6.48           | \$7.25 – \$7.90           | High-teens EPS growth at midpoint driven by revenue growth and operating margin expansion                                                                         |
| <b>EARNINGS PER SHARE (NON-GAAP)*</b>     | \$6.70 – \$6.90           | \$7.75 – \$8.40           | High-teens EPS growth at midpoint driven by revenue growth and operating margin expansion                                                                         |
| <b>OPERATING MARGIN (GAAP)</b>            | approx. 25%               | approx. 30%               | Increase due to no charges for acquired IPR&D and asset impairment/restructuring in 2021                                                                          |
| <b>OPERATING MARGIN (NON-GAAP)</b>        | approx. 30%               | approx. 32%               | Margin expansion driven by strong revenue growth compared to modest SG&A growth                                                                                   |

2021 FX assumptions: Euro 1.17/ RMB 6.82/ Yen 106

2021 diluted weighted share count assumption: ~906 million

\*Exclude equity investment gains/losses for comparison purposes to 2021 non-GAAP

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# 2021 GAAP WALKTHROUGH



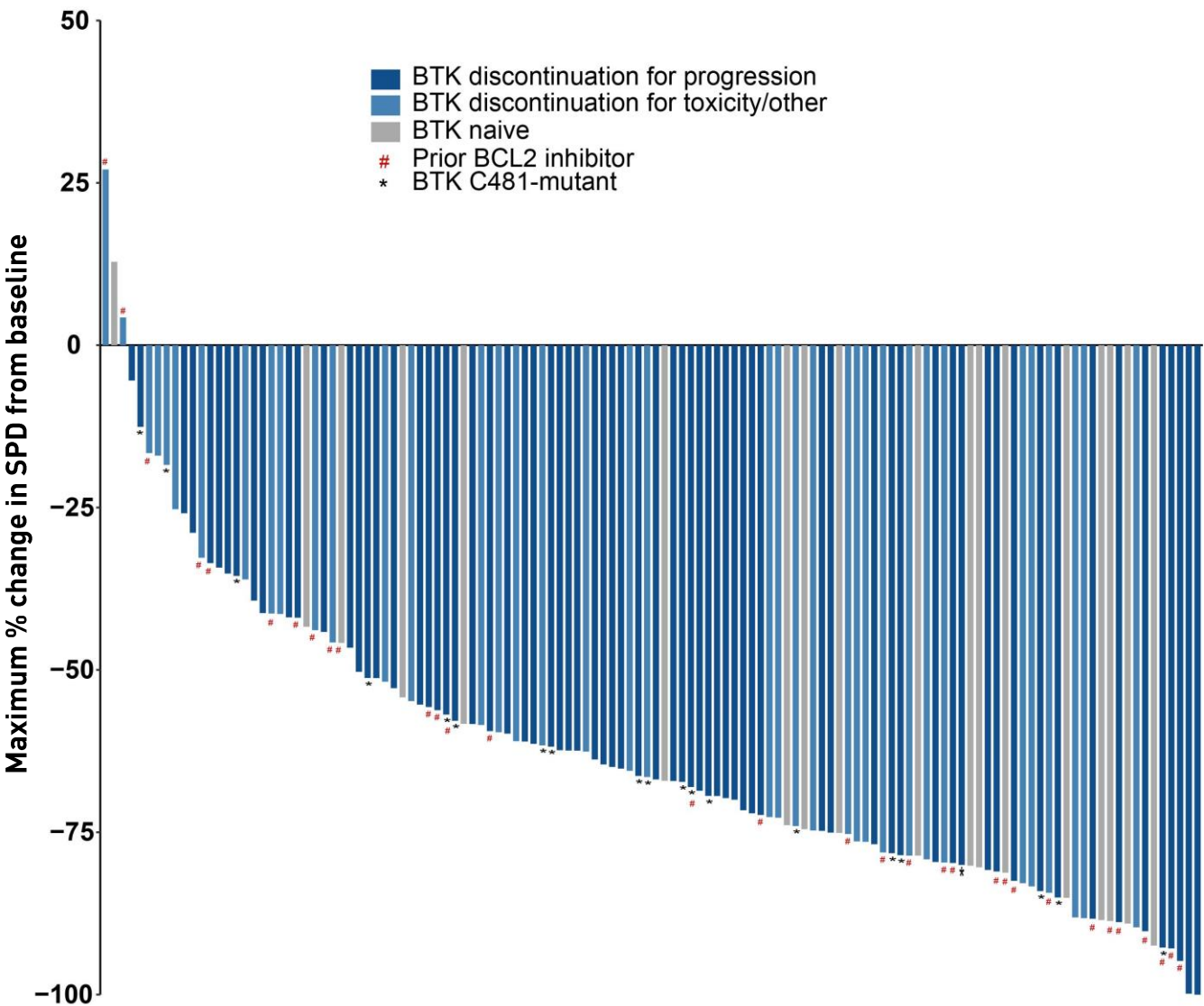
|                                   | GAAP<br>GUIDANCE          | EXCLUSION OF<br>AMORTIZATION | NON-GAAP<br>GUIDANCE      |
|-----------------------------------|---------------------------|------------------------------|---------------------------|
| <b>TOTAL REVENUE</b>              | \$26.5 – \$28.0 billion   |                              | \$26.5 – \$28.0 billion   |
| <b>COST OF SALES</b>              |                           | approx. \$600 million        |                           |
| <b>GROSS MARGIN % OF REVENUE</b>  | approx. 77%               |                              | approx. 79%               |
| <b>MKTG, SELLING &amp; ADMIN.</b> | \$6.2 – \$6.4 billion     |                              | \$6.2 – \$6.4 billion     |
| <b>RESEARCH &amp; DEVELOPMENT</b> | \$6.5 – \$6.7 billion     |                              | \$6.5 – \$6.7 billion     |
| <b>OTHER INCOME / (EXPENSE)</b>   | \$(300) – \$(200) million |                              | \$(300) – \$(200) million |
| <b>TAX RATE</b>                   | approx. 15%               |                              | approx. 15%               |
| <b>EARNINGS PER SHARE</b>         | \$7.25 – \$7.90           | approx. \$0.50               | \$7.75 – \$8.40           |

# ASH HIGHLIGHTS - LOXO-305

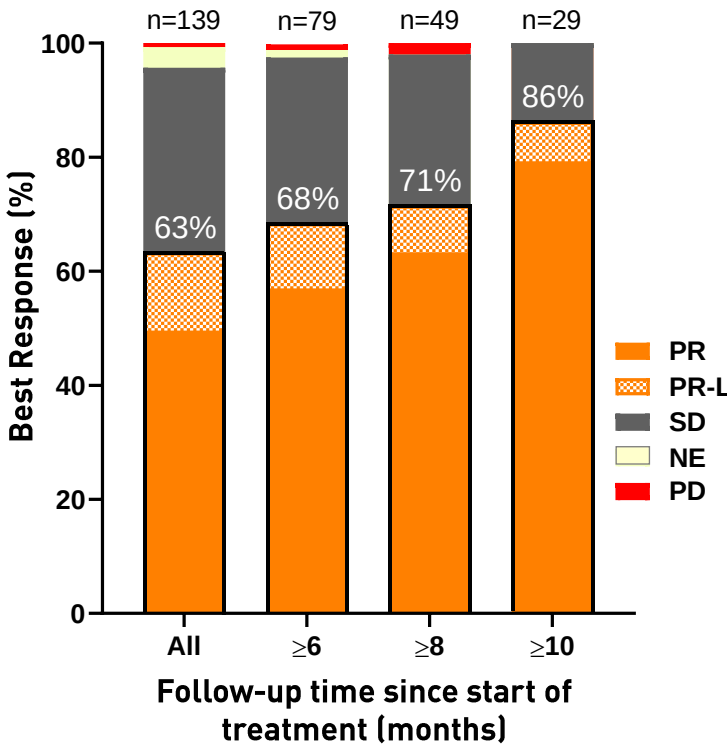
## CHRONIC LYMPHOCYTIC LEUKEMIA (CLL) AND SMALL LYMPHOCYTIC LYMPHOMA (SLL)



| All CLL/SLL Patients <sup>1</sup>                     |  | n = 139       |
|-------------------------------------------------------|--|---------------|
| Overall Response Rate (ORR) <sup>2</sup> , % (95% CI) |  | 63% (55 – 71) |
| Best Response                                         |  |               |
| Complete Response (CR), n (%)                         |  | 0             |
| Partial Response (PR), n (%)                          |  | 69 (50%)      |
| PR with ongoing lymphocytosis (PR-L), n (%)           |  | 19 (14%)      |
| Stable Disease (SD), n (%)                            |  | 45 (32%)      |
| BTK Pre-Treated CLL/SLL Patients <sup>1</sup>         |  | n = 121       |
| Overall Response Rate <sup>2</sup> , % (95% CI)       |  | 62% (53 – 71) |
| Best Response                                         |  |               |
| CR, n (%)                                             |  | 0             |
| PR, n (%)                                             |  | 57 (47%)      |
| PR-L, n (%)                                           |  | 18 (15%)      |
| SD, n (%)                                             |  | 41 (34%)      |



Overall Response Rate Increases Over Time<sup>3</sup>



- 63% ORR in CLL/SLL patients rising to 86% in patients followed for 10 or more months
- Consistent response rates regardless of reason for prior BTK inhibitor discontinuation or BTK mutation status
- 94% of responding patients remain in response and on therapy

Data cutoff date of September 27, 2020. <sup>1</sup>Efficacy evaluable patients are those who had at least one post-baseline response assessment or had discontinued treatment prior to first post-baseline response assessment. <sup>2</sup>ORR includes patients with a best response of CR, PR, PR-L. Investigator assessed response status per iwCLL. <sup>3</sup>Includes the efficacy-evaluable CLL/SLL patients at the time of data cutoff. Data at each timepoint includes the efficacy-evaluable CLL/SLL patients who had the opportunity to be followed for at least the indicated amount of time Total % may be different than the sum of individual components due to rounding. Waterfall chart: Data for 13 CLL/SLL patients are not shown in the waterfall plot due to 4 having no target lesions identified at baseline, 5 with no/incomplete post-baseline lesion measurements, and 4 discontinued prior to first post-baseline disease assessment.

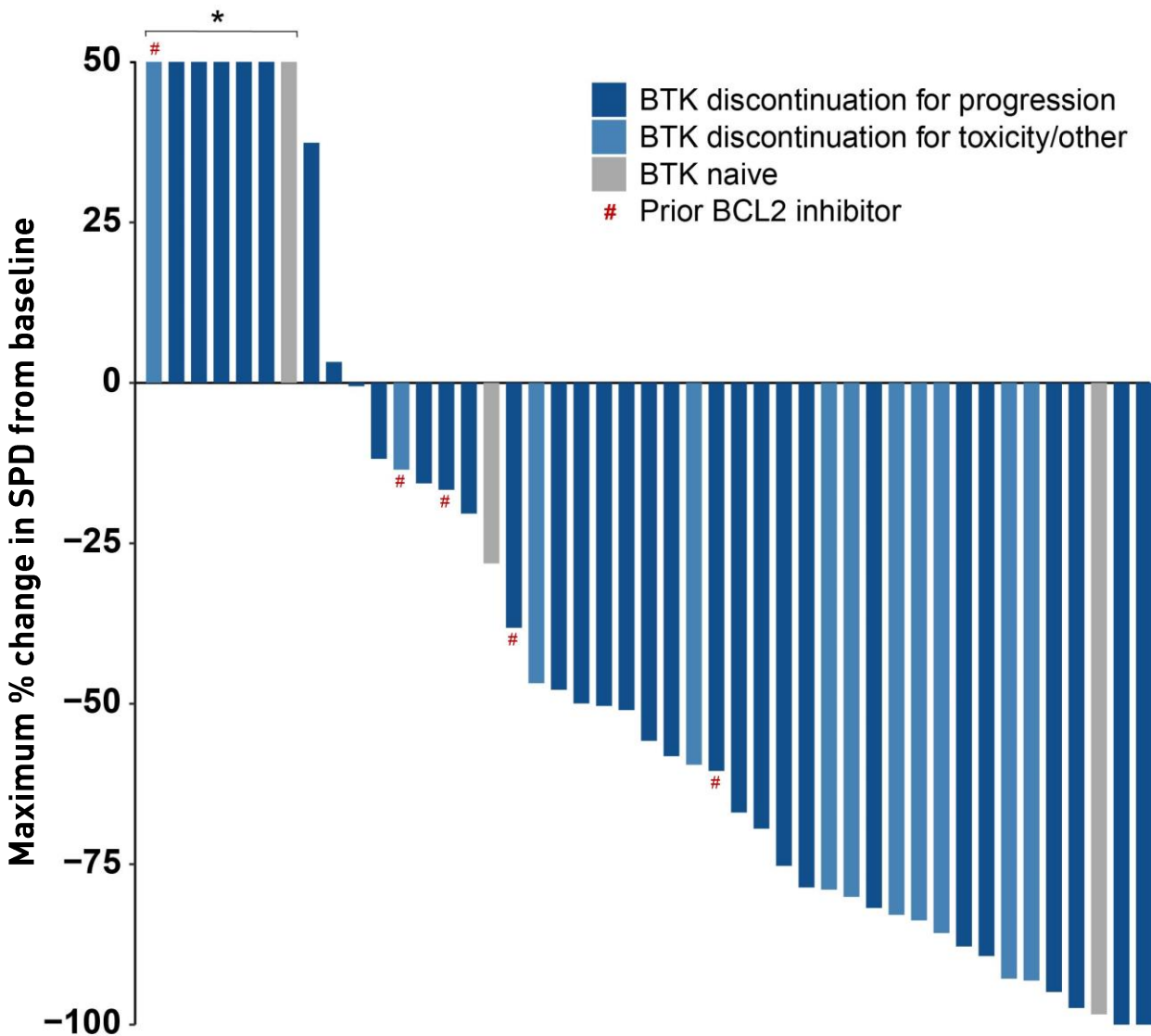
# ASH HIGHLIGHTS - LOXO-305

## MANTLE CELL LYMPHOMA (MCL)



| All MCL Patients <sup>1</sup>                   | n = 56        |
|-------------------------------------------------|---------------|
| Overall Response Rate <sup>2</sup> , % (95% CI) | 52% (38 – 65) |
| Best Response                                   |               |
| CR, n (%)                                       | 14 (25%)      |
| PR, n (%)                                       | 15 (27%)      |
| SD, n (%)                                       | 10 (18%)      |
| BTK Pre-Treated MCL Patients <sup>1</sup>       | n = 52        |
| Overall Response Rate <sup>2</sup> , % (95% CI) | 52% (38 – 66) |
| Best Response                                   |               |
| CR, n (%)                                       | 13 (25%)      |
| PR, n (%)                                       | 14 (27%)      |
| SD, n (%)                                       | 9 (17%)       |

- 52% ORR in MCL patients
- 83% of responding patients remain in response and on therapy
- Emerging signals of efficacy observed in other non-Hodgkin lymphomas (NHLs)
- Across all indications, no dose-limiting toxicities and no maximum tolerated dose was identified



Data cutoff date of September 27, 2020. <sup>1</sup>Efficacy evaluable patients are those who had at least one post-baseline response assessment or had discontinued treatment prior to first post-baseline response assessment. <sup>2</sup>ORR includes patients with a best response of CR and PR. Investigator assessed response status per Lugano criteria. Total % may be different than the sum of individual components due to rounding. Waterfall chart: Data for 11 MCL patients are not shown in the waterfall plot due to 7 having no target lesions identified by CT at baseline (including 4 patients who achieved a best response of CR by PET), 1 with no/incomplete post-baseline lesion measurements, and 3 discontinued prior to first post-baseline disease assessment. \*Indicates patients with >50% increase in SPD

# ASH HIGHLIGHTS - LOXO-305

## GLOBAL DEVELOPMENT PLAN



### CLINICAL DEVELOPMENT PLAN

○ Ongoing Phase 1/2 BRUIN study in multiple diseases

○ Phase 3 Chronic Lymphocytic Leukemia

- **BRUIN CLL-321<sup>1</sup>** Relapsed/Refractory (R/R) monotherapy study expected to start in Q1 2021
- **BRUIN CLL-322<sup>2</sup>** R/R combination study expected to start in Q2 2021
- First line CLL monotherapy study<sup>3</sup> expected to start in 2H 2021

○ Phase 3 Mantle Cell Lymphoma

- **BRUIN MCL-321<sup>4</sup>** R/R monotherapy study expected to start in Q1 2021

### KEY TAKEAWAYS

○ Robust Phase 3 development program expected to start in 2021

○ Focused on establishing LOXO-305 as the preferred agent for patients with relapsed disease following covalent BTKi

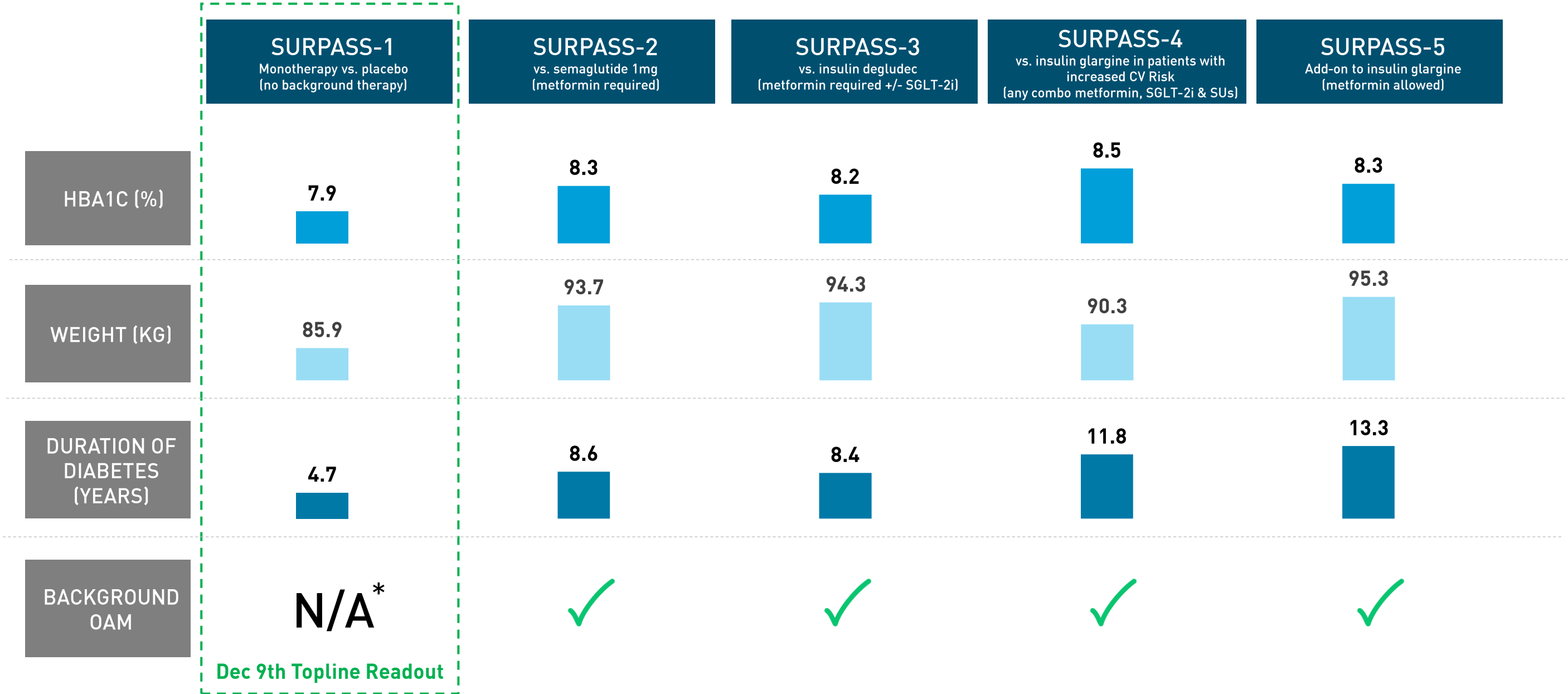
○ Head-to-head superiority studies will be conducted against covalent BTK inhibitors in both CLL and MCL

<sup>1</sup>Planned trial in CLL/SLL patients who progressed or were intolerant to covalent BTK inhibitor treatment will be randomized to receive continuous LOXO-305 therapy or investigator's choice of either idelalisib plus rituximab or bendamustine plus rituximab. <sup>2</sup>Planned trial in CLL/SLL patients who progressed or were intolerant to covalent BTK inhibitor treatment will be randomized to receive a time-limited combination of either LOXO-305 plus venetoclax and rituximab or venetoclax and rituximab. <sup>3</sup>Planned superiority trial to study LOXO-305 versus ibrutinib. <sup>4</sup>Planned superiority trial to study LOXO-305 versus currently available covalent BTK inhibitors in BTK treatment naïve patients with relapsed-refractory MCL. Participants will be randomized to receive either LOXO-305 monotherapy or investigator's choice of ibrutinib, acalabrutinib or zanubrutinib.

# TIRZEPATIDE SURPASS KEY BASELINE CHARACTERISTICS

THERE IS A RANGE OF BASELINE CHARACTERISTICS ACROSS SURPASS TRIALS

Lilly



Note: Complete SURPASS-1 study data have not yet been fully evaluated, including with respect to immunogenicity

\*No OAM during the three months preceding Visit 1

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SU = Sulphonylureas  
SGLT2i = Sodium-glucose Cotransporter-2 inhibitors  
OAM = Oral Antidiabetic Medication

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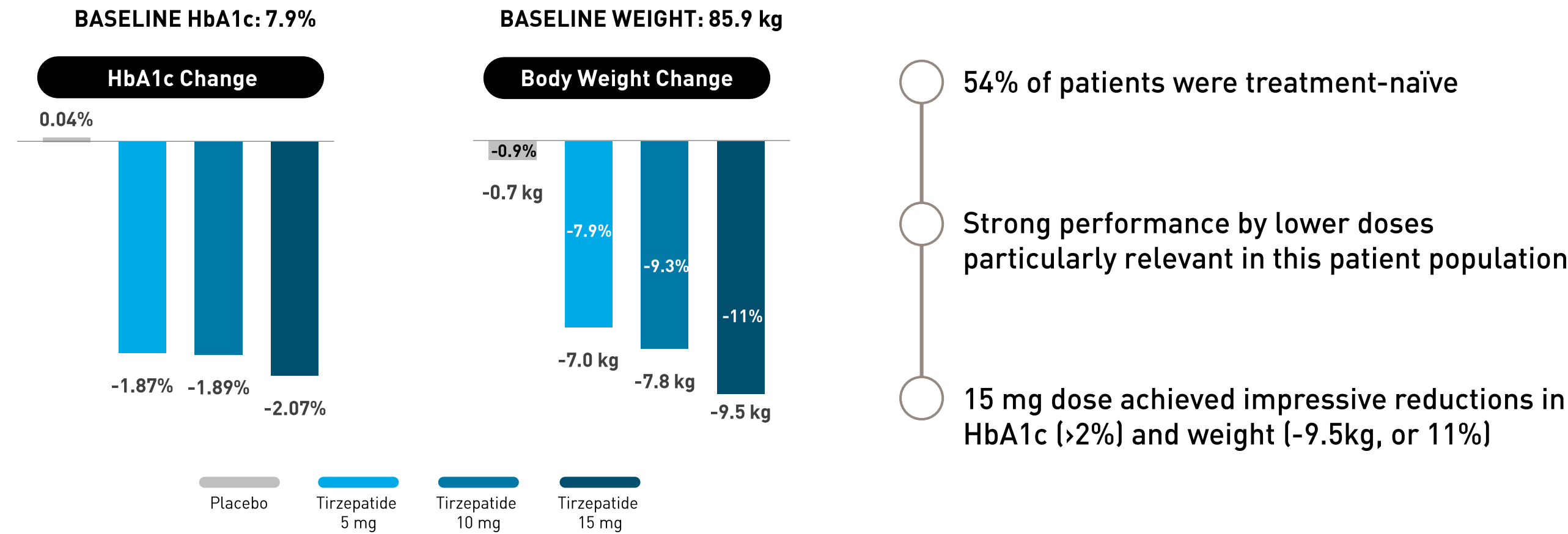
14

# TIRZEPATIDE SURPASS-1 STRONG TOPLINE RESULTS

TIRZEPATIDE SIGNIFICANTLY REDUCED HEMOGLOBIN A1C AND BODY WEIGHT IN PEOPLE WITH TYPE 2 DIABETES



## HbA1c AND BODY WEIGHT CHANGE AT 40 WEEKS



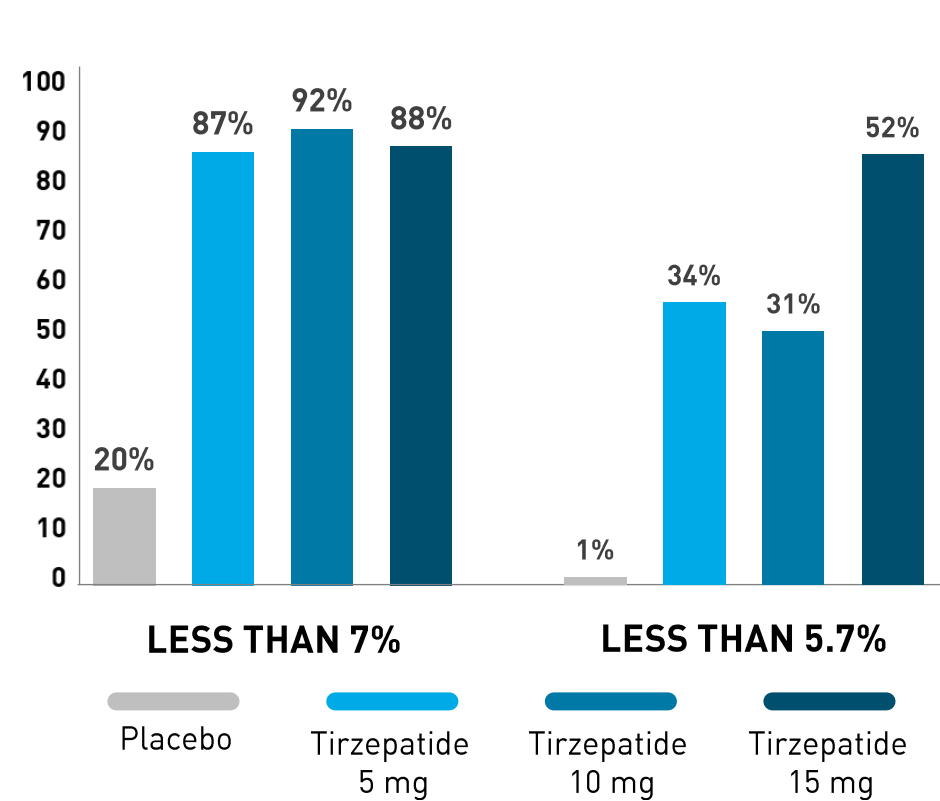
HbA1c change from baseline was the primary endpoint in SURPASS-1. Body weight change from baseline was a key secondary endpoint. Results presented using the efficacy estimand which represents efficacy prior to discontinuation of study drug or initiating rescue therapy for persistent severe hyperglycemia

# IMPRESSIVE RESULTS FOR HbA1c TARGET ACHIEVEMENT

POTENTIAL TO CHANGE THE WAY DIABETES IS TREATED

Lilly

## PERCENTAGE OF PATIENTS ACHIEVING HbA1c (%) TARGET



- Nearly 90% of patients achieved HbA1c of less than 7% across tirzepatide doses
- Over 50% of 15 mg dose patients achieved HbA1c of less than 5.7%, the level seen in people without diabetes
- Benefits achieved with no events of severe hypoglycemia or hypoglycemia less than 54 mg/dL in tirzepatide treatment arms

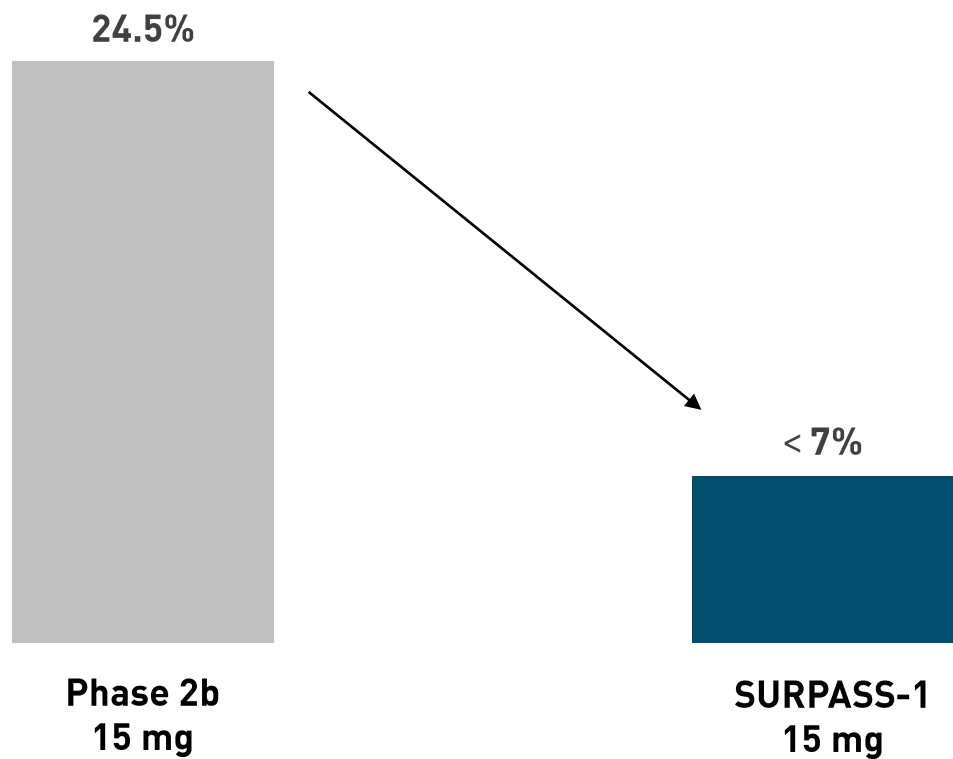
Results presented using the efficacy estimand, which represents efficacy prior to discontinuation of study drug or initiating rescue therapy for persistent severe hyperglycemia

# TIRZEPATIDE SURPASS-1 SAFETY AND TOLERABILITY DATA

NEW DOSE ESCALATION SCHEDULE LIKELY CONTRIBUTED TO IMPROVED TOLERABILITY



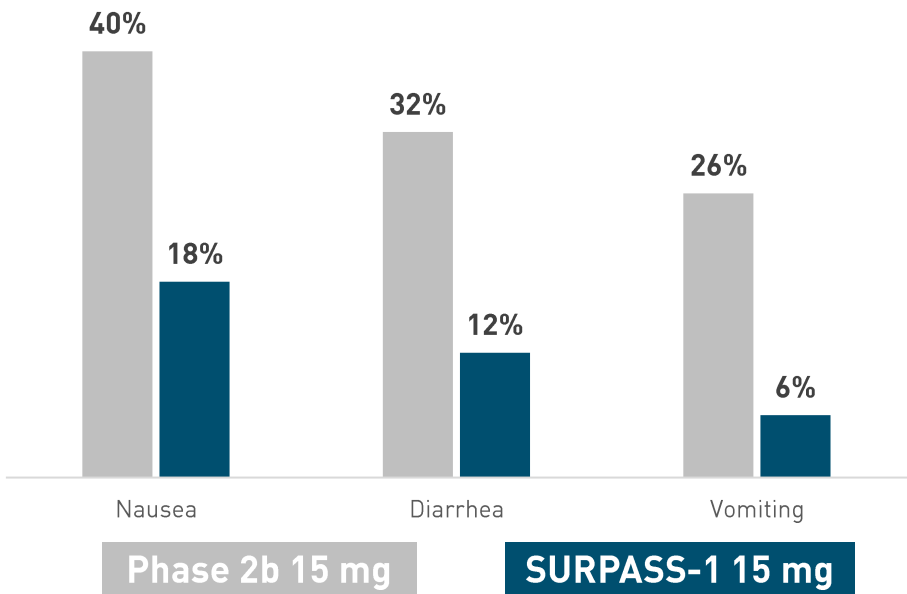
## DISCONTINUATIONS DUE TO AEs



○ Treatment discontinuations due to adverse events were less than 7% in each dose arm

## TOLERABILITY DATA

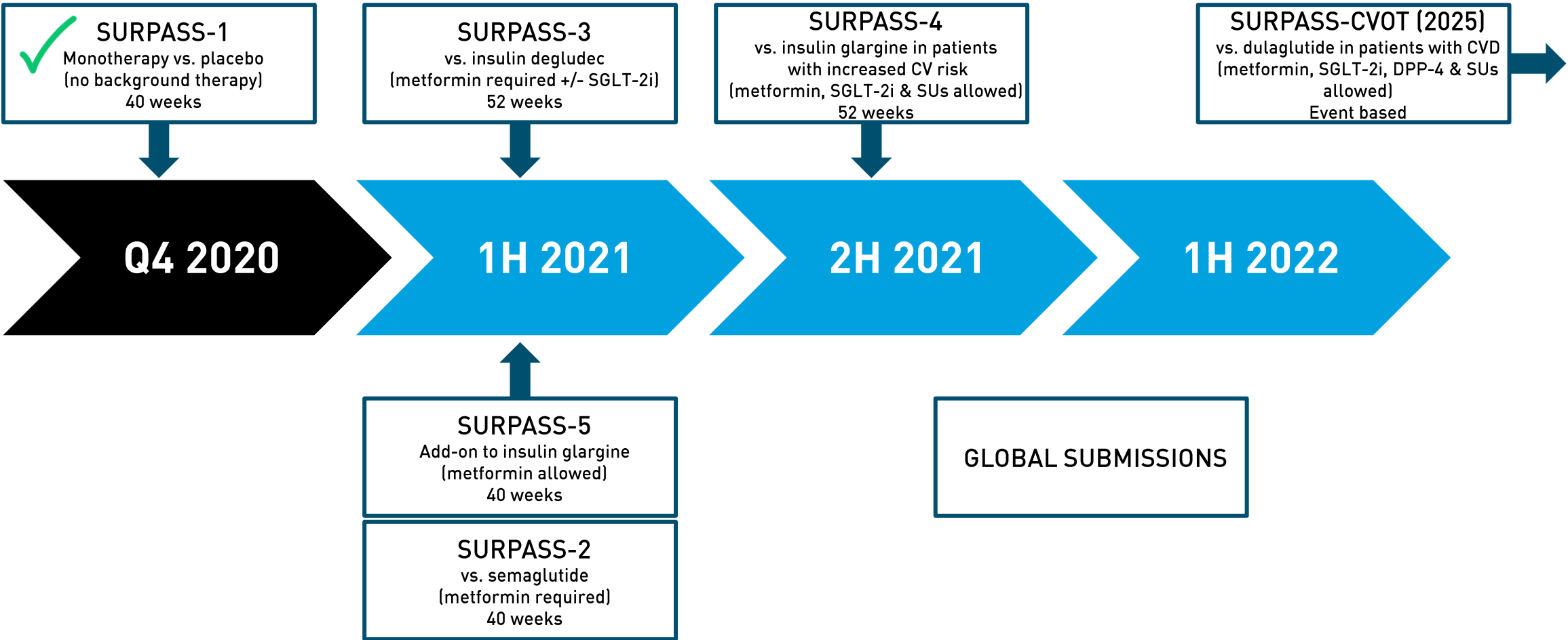
|              | Placebo | Tirzepatide 5 mg | Tirzepatide 10 mg | Tirzepatide 15 mg |
|--------------|---------|------------------|-------------------|-------------------|
| Nausea (%)   | 6.1     | 11.6             | 13.2              | 18.2              |
| Diarrhea (%) | 7.8     | 11.6             | 14.0              | 11.6              |
| Vomiting (%) | 1.7     | 3.3              | 2.5               | 5.8               |



○ The overall safety profile of tirzepatide was similar to the well established GLP-1 receptor agonist class

Note: Conclusions from cross-trial comparisons have limitations due to differences in study design, patient population, duration of therapy, background therapy and other factors that confound comparisons. The Phase 2b study was a 26-week study SURPASS-1 was a 40-week study.

# EXPECTED UPCOMING SURPASS READOUTS



Will initiate SURMOUNT 2, 3 & 4 Obesity Phase 3 studies and SUMMIT HFpEF Phase 3 study in 2021

SU = Sulphonylureas  
SGLT2i = Sodium-glucose Cotransporter-2 inhibitors  
CVD = Cardiovascular Disease  
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# POTENTIAL KEY EVENTS 2021



## Phase 3 Initiations

**Abemaciclib** for HR+,HER2+ early breast cancer  
**LOXO-305** for MCL monotherapy  
**LOXO-305** for CLL monotherapy  
**LOXO-305** for CLL combination therapy  
**LOXO-305** for CLL first-line  
**Tirzepatide** for obesity (3 additional studies)  
**Tirzepatide** for HFpEF

## Phase 3 & Other Key Data Disclosures

**Baricitinib** for alopecia areata  
**Baricitinib** for systemic lupus erythematosus  
**Donanemab** for early Alzheimer's disease  
**Empagliflozin** for HFpEF<sup>1</sup>  
**Lebrikizumab** for atopic dermatitis  
**Mirikizumab** for ulcerative colitis (induction data)  
**Mirikizumab** for ulcerative colitis (maintenance data)  
**Tirzepatide** for type 2 diabetes (SURPASS-2)  
**Tirzepatide** for type 2 diabetes (SURPASS-3)  
**Tirzepatide** for type 2 diabetes (SURPASS-4)  
**Tirzepatide** for type 2 diabetes (SURPASS-5)  
**Zagotenemab** for early Alzheimer's disease

## Medical Meeting Presentations

**Oral SERD** for metastatic breast cancer  
**Tirzepatide** for type 2 diabetes

## Regulatory Submissions

**Abemaciclib** for high-risk HR+,HER2- early breast cancer (J)  
**Bamlanivimab + Etesevimab** for COVID-19 (US)  
**Sintilimab** for NSCLC (US)  
**Tirzepatide** for type 2 diabetes (US/EU/J)

## Regulatory Actions

**Abemaciclib** for high-risk HR+,HER2- early breast cancer (US/EU/J)  
**Baricitinib** for atopic dermatitis (US/J)  
**Empagliflozin** for HFrEF (US/EU/J)<sup>1</sup>  
**Selpercatinib** for NSCLC and thyroid cancers (EU/J)  
**Tanezumab** for osteoarthritis pain (US)<sup>2</sup>

<sup>1</sup> in collaboration with Boehringer Ingelheim

<sup>2</sup> in collaboration with Pfizer

# SUMMARY



- **Volume-based double-digit revenue growth** driven by portfolio of new medicines
- **Operating margin\* of 32%** reflects continued progress on productivity
- Our **innovation-based strategy continues to deliver results**, with a number of key data readouts, including additional tirzepatide studies in type 2 diabetes, the potential for several key NILEX approvals, and LOXO-305 Phase 3 initiation
- Third consecutive year of 15% dividend increase reflects confidence in outlook

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| <div><b>Grow Revenue</b></div> <div></div> <div>Expect to deliver top-tier revenue growth through 2025</div> | <div><b>Improve Productivity</b></div> <div></div> <div>Operating margin* expansion to the mid-to-high 30%s by 2025</div> | <div><b>Speed Life-Changing Medicines</b></div> <div></div> <div><ul style="list-style-type: none"><li>▪ Potential to launch 20+ new molecules in 10 years (2014-2023)</li><li>▪ On average, could launch 2+ new indications or line extensions per year</li></ul></div> | <div><b>Create Long-Term Value</b></div> <div></div> <div><ul style="list-style-type: none"><li>▪ Fund existing marketed and pipeline products</li><li>▪ Bolster growth prospects via business development</li><li>▪ Annual dividend increases</li></ul></div> |
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\*Non-GAAP

*Lilly*