Exhibitor Booth Information

Click a booth button below to visit the booth information

Abiomed	Bladder Cancer	Cell Therapy
Complex Biologics	Digital & Data Science	Electrophysiology
Lung Cancer	Milvexian	MONARCH
Nipocalimab	Orthopaedics	OTTAVA
Surgery	Targeted Oral Treatments	Vision

Johnson&Johnson

Cautionary Note on Forward-Looking Statements

This presentation contains "forward-looking statements" as defined in the Private Securities Litigation Reform Act of 1995 regarding, among other things: future operating and financial performance, product development, and market position and business strategy. The reader is cautioned not to rely on these forward-looking statements. These statements are based on current expectations of future events. If underlying assumptions prove inaccurate or known or unknown risks or uncertainties materialize, actual results could vary materially from the expectations and projections of Johnson & Johnson. Risks and uncertainties include, but are not limited to: economic factors, such as interest rate and currency exchange rate fluctuations; competition, including technological advances, new products and patents attained by competitors; challenges inherent in new product research and development, including uncertainty of clinical success and obtaining regulatory approvals; uncertainty of commercial success for new and existing products; challenges to patents; the impact of patent expirations; the ability of the Company to successfully execute strategic plans, including restructuring plans; the impact of business combinations and divestitures; manufacturing difficulties or delays, internally or within the supply chain; product efficacy or safety concerns resulting in product recalls or regulatory action; significant adverse litigation or government action, including related to product liability claims; changes to applicable laws and regulations, including tax laws and global health care reforms; trends toward health care cost containment; changes in behavior and spending patterns of purchasers of health care products and services; financial instability of international economies and legal systems and sovereign risk; increased scrutiny of the health care industry by government agencies; the Company's ability to realize the anticipated benefits from the separation of the Company's Consumer Health business; and the New Consumer Health Company's ability to succeed as a standalone publicly traded company. A further list and descriptions of these risks, uncertainties and other factors can be found in Johnson & Johnson's Annual Report on Form 10-K for the fiscal year ended January 1, 2023, including in the sections captioned "Cautionary Note Regarding Forward-Looking Statements" and "Item 1A. Risk Factors," and in Johnson & Johnson's subsequent Quarterly Reports on Form 10-Q and other filings with the Securities and Exchange Commission. Copies of these filings are available online at www.sec.gov, www.jnj.com or on request from Johnson & Johnson. Any forward-looking statement made in this presentation speaks only as of the date of this presentation. Johnson & Johnson does not undertake to update any forward-looking statement as a result of new information or future events or developments.

Cautionary Note on Non-GAAP Financial Measures

This presentation refers to certain non-GAAP financial measures including operational sales[1], adjusted operational earnings per share[2], non-risk adjusted[3] operational sales, risk adjusted[3] operational sales, free cash flows, operational sales[1] CAGR. These non-GAAP financial measures should not be considered replacements for, and should be read together with, the most comparable GAAP financial measures.

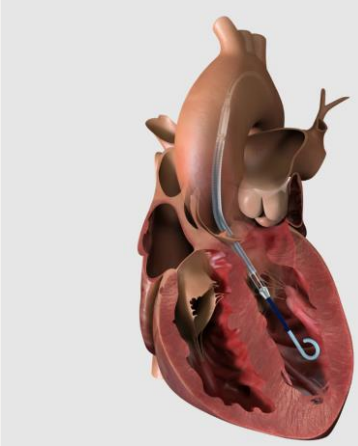
A reconciliation of these non-GAAP financial measures to the most directly comparable GAAP financial measures in our historical financial statements can be found on the Investor Relations section of our website.

1. Operational sales excludes the impact of translational currency
2. Adjusted operational earnings per share excludes the impact of translational currency, intangible amortization expense and special items
3. The terms "risk adjusted" and "non-risk adjusted" when applied to GAAP and non-GAAP measures included in these slides have been assessed using assumptions which reflect methodologies common in the pharmaceutical industry and which are relevant to the specific therapeutic areas to which the assets relate. The development life cycle of pharmaceutical products is such that there is a range of possible outcomes from clinical development driven by numerous variables including safety, efficacy and product labelling as well as commercial factors including the patient population, the competitive environment, pricing and reimbursement. Accordingly, the actual revenues achieved in due course will be different, perhaps materially so, from the risk adjusted sales figures in this presentation and should be considered in this light
4. Free cash flows represents operating cash flow less capital spending.

Heart Recovery (Abiomed)

Abiomed® created the field of heart recovery and leads in recovering heart muscle and saving lives with heart pump and oxygenation technologies, enabling safer, more effective treatment and minimally invasive therapies for high-risk, urgent, and emergent patients.

Our mission: Recovering hearts and saving lives.



Significant Impella® growth opportunity in a high growth market

2022 WW market size	~2M patients per year[1,2]
Technology penetration	<3%[1,2]

Market dynamics

- Coronary artery disease is the #1 cause of death in the U.S.[3]
- Acute decompensated heart failure is the #1 cause of hospitalizations and length of stay in patients greater than 65 years old[4]
- Cardiogenic shock is the #1 cardiac mortality risk with a 50% survival rate without Impella heart pump support[5], compared to 71-82% survival with Impella[6]
- Impella heart pumps have exclusive FDA approval and a CAGR of about 20% over the last 17 years[2]

Making heart recovery the global standard of care

300K+
patients treated with Impella heart pumps [2]

5
exclusive FDA PMA indications [2]

4,689
patents and patents pending [2]

13
clinical guidelines include Impella, with >1,200 clinical publications [2]

Upcoming launches and milestones

Near-term product launches

- Impella 5.5®, 2nd generation
- Impella RP Flex™
- Impella CP®, 9th generation with single-access sheath

Near-term clinical trial and regulatory milestones

- Impella ECP™ FDA PMA submission
- STEMIDTU™ RCT for STEMI heart attack enrollment completion
- PROTECT IV™ RCT in high-risk PCI enrollment completion

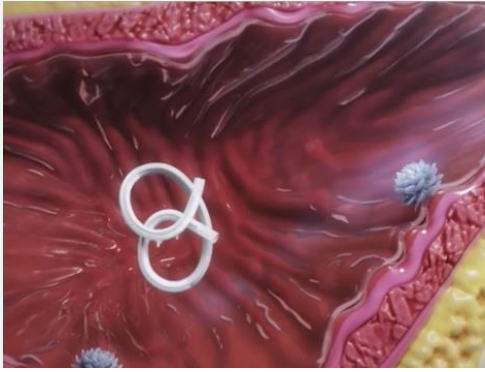
Strategic plan growth strategies

1. **Indication expansion:** Develop the clinical evidence to achieve Class I guidelines
2. **Geographic expansion:** Disciplined expansion to new geographies
3. **Physician training:** Grow our user base in our established markets of the U.S., Germany, and Japan by training healthcare providers with our expanding clinical team
4. **New product introductions:** Develop new products such as Impella ECP that are lower profile, easier to use, smarter, and more connected

Bladder Cancer

Vision: Advance localized, sustained delivery of bladder sparing therapies and deliver a program with sales potential $5B+*

Mission: Deliver novel multimodal regimens to redefine the treatment of bladder cancer



Substantial opportunity for innovation

2022 WW market size[1]	~$3.8B
WW market CAGR 2022-2030[1]	12 - 14%

Market dynamics

- Total worldwide 2030 bladder cancer market projection is $10.7B[1]
- More than 570,000 patients diagnosed annually. Of these, 95% of patients are diagnosed with localized disease.[2,3]
- Limited new treatment options introduced in over 2 decades[4,5]
- Current therapeutic approaches are inadequate and antiquated, hindered by short intravesical dwell times, non-uniform drug distribution, and unwanted local toxicity[6,7]
- Up to 50% of patients with high-risk (HR) NMIBC will recur within 5 years despite standard of care treatments, while the risk of concurrent metastatic disease in patients with newly diagnosed muscle invasive bladder cancer (MIBC) approaches 35%[8,9]
- NMIBC accounts for the highest lifetime treatment cost from diagnosis to death[10]

Compelling early efficacy with TAR-200 and TAR-210 in NMIBC

77%

complete response rate in pts with BCG-unresponsive HR NMIBC treated with TAR-200 (Phase 2b SunRISe-1) [11]

82%

patients with BCG-experienced HR-NMIBC are recurrence-free (Phase 1 TAR-210) [12]

91%

patients in had durable, sustained response (Phase 2b SunRISe-1) [11]

87%

patients with intermediate risk (IR) NMIBC achieved a complete response (Phase 1 TAR-210) [12]

Recent launches and upcoming milestones

Recent launches

- **2019:** BALVERSA® (erdafitinib) approved in locally advanced or metastatic fibroblast growth factor receptor (FGFR)-mutated urothelial carcinoma

Upcoming milestones:

- **Phase 2b SunRISe-1:** TAR-200 (Gemcitabine Targeted Releasing System) in Bacillus Calmette-Guerin (BCG)-unresponsive, HR NMIBC. Planned submission in 2025
- **Phase 3 SunRISe-2:** TAR-200 + cetrelimab in MIBC
- **Phase 3 SunRISe-3:** TAR-200 with or without cetrelimab in BCG-naïve HR NMIBC
- **Phase 2 SunRISe-4:** TAR-200 + cetrelimab MIBC neoadjuvant
- **Phase 3 SunRISe-5:** TAR-200 in BCG-experienced or unresponsive papillary HR NMIBC. Enrollment to begin in 1H 2024
- **Phase 3 MoonRISe-1:** TAR-210 (Erdafitinib Targeted Releasing System) in IR NMIBC. Enrollment to begin in 1H 2024

Our growth strategy

Bladder sparing

- Advance bladder sparing therapies through targeted releasing systems

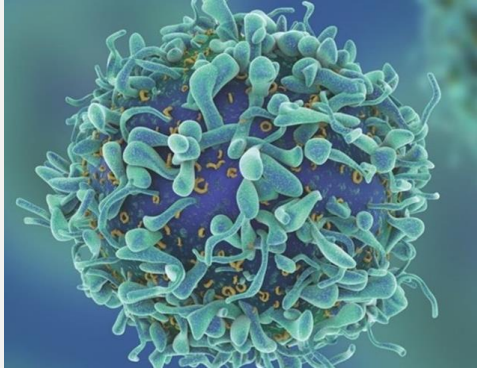
Progress TAR-200 & TAR-210

- Become the preferred treatment in early localized bladder cancer by accelerating and expanding localized delivery programs and developing synergistic combination regimens
- Progress TAR-200 to frontline therapy in localized bladder cancer
- Advance TAR-210 in FGFR-mutated NMIBC

Drive pathway inhibition

- Develop the next generation of driver pathway inhibitors for device-based delivery

Cell Therapy



J&J is building to be the leader in cell therapy with a foundation in Hematologic Malignancies.

Mission: The elimination of cancer
Our approach: Deliver synergistic, curative treatment regimens to patients.

Substantial cell therapy growth opportunity in Hematologic Malignancies

2022 WW market size	$2.7B
WW market CAGR 2022-2030	27 -29%

Market dynamics

- Multiple Myeloma (MM) patients experience multiple relapses, with many lost between lines of therapy due to attrition (~50% of transplant and <25% of non-transplant patients reach third line of therapy)
- Need for early intervention with highly effective MM treatment regimens
- CARVYKTI has demonstrated the best hazard ratio or clinical outcome for any Phase 3 study in multiple myeloma
- In lymphoma, gaps exist in chimeric antigen receptor T-cell therapy (CAR-T) targeting CD19
- ~60-70% of lymphoma patients receiving CD-19 CAR-T therapy don't respond or face relapse
- CD20 CAR-Ts (licensed from AbelZeta) demonstrated best early clinical data across all Diffuse Large B-Cell lymphoma (DLBCL) therapies to date

Significant unmet need for patients with aggressive or difficult-to-treat blood cancers

Hematologic Malignancies

>1.3M ww incidence

>712K ww deaths

107K
People will be diagnosed with MM in the U.S and G7 markets in 2023

49K
People will die from MM in the G7 markets in 2023

187K
People will be diagnosed with Non-Hodgkins Lymphomas (all histologies) in the G7 markets in 2023

58K
People will die from Non-Hodgkins Lymphomas (all histologies) in the G7 markets in 2023

Near-term pipeline/portfolio milestones

CARVYKTI® ($5 billion annual sales potential)*

- Expect approvals of CARTITUDE-4 in 2L-4L RRMM in the U.S. and EU in 2024
- CARVYKTI adoption will be based on the unprecedented efficacy of CARTITUDE-4 and potential to transform care with a one-time infusion once approved
- CARTITUDE-4 demonstrated compelling efficacy in lenalidomide refractory RRMM patients after one to three prior lines of therapy with a Hazard Ratio (HR) of 0.26, the greatest risk reduction for progression or death (74%) shown in any treatment in MM
- Frontline CARTITUDE-5 and CARTITUDE-6 are enrolling

JNJ-4496 (C-CAR039) & JNJ-9530 (C-CAR066)

- AbelZeta presenting data on C-CAR039 (CD19/20 CAR-T) and C-CAR066 (CD20 CAR-T) at ASH 2023
- JNJ-4496: A Phase 1b study in the U.S. is enrolling patients
- JNJ-9530: A Phase 1b study in patients with R/R NHLs is open for enrollment in the U.S.

Our growth strategy

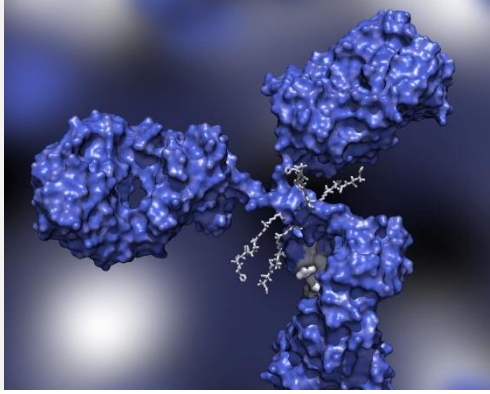
Advance CARVYKTI into earlier lines globally and build next generation cell therapy portfolio

- Ongoing phased launches for CARVYKTI in the U.S. and EU and continued global launches; increased certified treatment centers in the U.S. and growing in EU
- Significant investments to increase production of CARVYKTI:
  - Increased capacity of our Raritan manufacturing site since the beginning of 2023
  - Expect four manufacturing nodes across the U.S. and EU to serve our growing patient demand
  - In-house viral vector production, continued expansion of our internal network and the expectation of increased capacity by end-of-year
- Advancing CD20 CAR-Ts in clinical development as well as pre-clinical assets for hematological and solid tumors

Complex Biologics

Mission statement: The elimination of cancer

Our approach: Apply deep disease understanding with multimodal therapeutics to attack disease, heighten targeted activity, and deepen responses and remissions



Significant global unmet medical need and opportunity for bispecifics and trispecifics; new modalities

2022 WW market size	$726M
WW market CAGR 2022-2030	45%

Market dynamics

Hematologic malignancies:

>1.3M ww incidence | >712K ww deaths

Addressing a significant unmet medical need in pretreated patients with blood cancers and solid tumors

3

First in class bispecifics approved:
RYBREVANT
TECVAYLI
TALVEY

7

Bi/trispecific assets in the pipeline with transformational potential

5

Multi specific Antibodies / T cell engagers in solid tumors pipeline

10+

targets in discovery and/or development on solid tumor complex biologic platforms

Recent launches and milestones

Recent launches

- **TALVEY/TECVAYLI/RYBREVANT:** approved; ongoing development

Upcoming milestones

- **TECVAYLI:** Multiple studies as monotherapy (MajesTEC-1, 4 & 9) and in combination with other agents (MajesTEC-3, 4, 7). Studying if regimens of TECVAYLI in combination or sequenced with other agents have the potential to lead to cure
- **TALVEY:** Robust clinical program including monotherapy (MonumenTAL- 1) and in combination MonumenTAL-3 (DARZALEX & pomalidomide & TALVEY) and MajesTEC-7 (TALVEY & DARZALEX & lenalidomide)
- **JNJ-5322 /BCMA/GPRC5D/CD3:** trispecific in MM preclinical presentation at ASH: A potential first-in-class trispecific antibody targeting BCMA and GPRC5D with the ability to deplete dual and single target expressing MM clones

Our growth strategy: MM, NHL

Trispecific antibodies

JNJ-5322 (BCMA x GPRC5D x CD3) – MM

- First-in-class molecules binding two well-validated targets
- Enhanced potency due to avidity of dual antigen binding
- Prevents resistance due to antigen escape

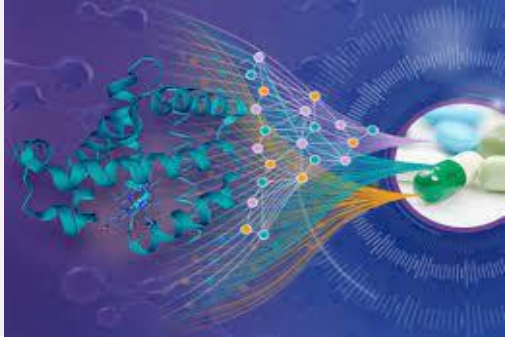
JNJ-8543 (CD79b x CD20 x CD3) – NHL

- First-in-class molecules binding two well-validated targets
- Enhanced potency due to avidity of dual antigen binding
- Prevents resistance due to antigen escape
- Designed to confer a favorable safety profile with reduced CRS

Innovative Medicine

Data Science in R&D

Johnson & Johnson is leveraging the power of data science end-to-end, from R&D to Supply Chain and to Commercial. In R&D, it is helping us bring better, more targeted therapies to patients faster and more efficiently – and make previously impossible science possible.



External dynamics

- Tremendous unmet need: **85% of protein targets** are beyond reach of current medicines[1] and only **10% of drug candidates** reach the market[2]
- Increasing multimodal data: **30% of world's data is healthcare data**, with 26% CAGR (2020-2030)[3]
- Rapid advancements in AI/ML (including **Generative AI**), real-world evidence (RWE), digital tools, and computing power
- Increasing **guidance and acceptance from regulators** on RWE, AI/ML[4]

Our differentiation in R&D

- **Applying AI/GenAI, ML, RWE and digital health from end-to-end across the product lifecycle to:**
  - Co-design novel molecules optimized across multiple parameters
  - Drive precision medicine, enabled by novel endpoints
  - Execute more efficient, targeted and diverse clinical trials
  - Enhance productivity via AI/GenAI-enabled discovery, development, and regulatory enhancement[5]
  - Rapidly evaluate safety signals and generate regulatory-grade RWE
- **150+ world-class 'bilingual' data scientists** working shoulder-to-shoulder with scientists on all asset teams; enterprise-wide focus on data science and digital talent development and upskilling
- **Foundational internal data and analytics platforms** (e.g., 3PB of AI-ready data from internal and external sources, AI and RWE analytics, and applications – sourced from discovery, translational and clinical data systems with our extensive real-world datasets)
- Strong **external collaborations** and relentless enterprise commitment to the **highest data standards** and **ethical application of AI**

Significant near-term milestones

- **Oncology ML-assisted NME:** First-in-human to start recruiting (early 2024)
- **Immunology ML-assisted NME (IL-17 molecule):** Entering Phase 2 in 2024
- **ML-enabled novel endpoint (JNJ-2113):** ML-enabled endoscopy-based UC[9] severity endpoint expected to be deployed in trial (2024/2025)
- **ML-enabled novel endpoint (Tau Active Immunotherapy):** Novel endpoint measuring cognitive and motor function across hundreds of factors planned for deployment in clinical trials (2024)
- **AI/ML, real-world data-driven recruitment:** Scaling from 50 to 75 programs (including milvexian, TAR-200, TECVAYLI®, TALVEYTM, JNJ-2113, and nipocalimab)
- **RWE for full approval in China (IMBRUVICA®):** Leveraged RWE to secure transition from conditional- to full-approval for CLL and SLL[10] in China
- **End-to-end GenAI-Enabled Productivity:** Leveraging GenAI solutions as co-pilots for protocol and regulatory document generation and for adherence to global standards & local requirements for coordinating regulatory compliance across 182 countries

Examples of impact

End-to-end impact

85% of New Molecular Entities (NMEs) and Line Extensions (LEs) leveraging Data Science[6]

50+

Small molecule discovery programs are leveraging AI/ML to guide hit identification via ML-enabled Biosignature platform; generated 15 million images with 2 million compounds tested to date

2 NMEs

in Oncology and Immunology delivered using ML compound optimization in 2023; deploying ML modeling **approaches at scale** to advance high-probability molecules

5+

AI/ML- based novel endpoints being deployed in clinical trials across Oncology, Immunology, and Neuroscience[7]

1.2-2.6x

Higher enrollment at sites highly ranked by AI/ML models[8]; 50+ studies enabled by AI/ML

5

Months ahead of schedule in exceeding year-end diversity, equity & inclusion (DEI) goals across 6 Immunology studies, with support from AI/ML

400K

Scientific documents analyzed per year using natural language processing to extract insights on safety in pre-clinical studies and post-marketing surveillance

>100

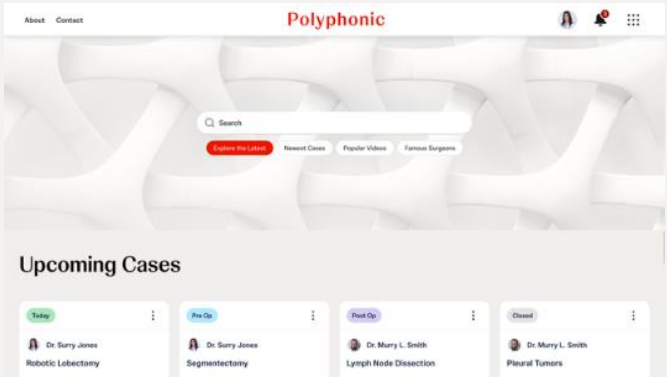
Post-approval health authority responses informed by ML-enabled real-world data **analyses** each year

95%

Cost avoidance for health authority Post-Approval Safety Study addressed with routinely-collected real-world data instead of a prospective registry

POLYPHONIC

J&J MedTech delivers digitally enabled devices, capital, robotics, and software across the portfolio today. The POLYPHONIC™ ecosystem is designed to elevate the impact of J&J MedTech technologies, scale and activate the power of data across the sector, and deliver core applications for surgery.



Opportunities to address rapid growth in digital health

2022 WW market size	$137.6B[1]
WW market CAGR 2022-2027	9 – 13%[1]

Market dynamics

- **Unmet need:** 5 billion people lack access to safe surgery. The global surgical workforce needs to double by 2030 to meet the growing demand and reduce disparities[2]
- **Data volume** - 30% of the world's data is health data.[3] The industry is challenged with a lack of secure, connected insights to positively influence patient outcomes, care, cost, and efficiency
- **Siloed technology** - interoperability is an increasing priority for hospital CIOs and named as a top 5 concern along with cybersecurity and data analytics[4]
- **Digital adoption increasing** – data and analytics tools are top priority investment areas for hospitals; 2 in 5 physicians plan to adopt augmented intelligence[5]

Integrating across our network, unlocking value across multiple customer touchpoints

300M
Patient lives touched by JJMT technology in 2023[6]

1.3M
Education annual touchpoints across in-person and online trainings for surgeons and clinical teams[7]

6,000+
J&J professionals strong in regulatory, clinical, software, & education complementing digital product development[7]

35+
JJMT software applications operating globally[7]

Upcoming milestones

- **2024:** Introduce POLYPHONIC through an Early Access Beta Program for customers. Initial focus will be on video-based analytics, real-time case collaboration, education, and telepresence

Our growth strategy

- **Build on J&J MedTech's reach in surgery:** J&J MedTech provides technology and education to ORs and surgeons around the world. POLYPHONIC is designed to help drive the shift to the digital OR
- **Continue creating digital value in our portfolio:** Deliver pull-through by creating additional customer value with connected digital experiences across our portfolio of robotics, connected devices, and software applications
- **Unlock the value of POLYPHONIC for others:** Accelerate and orchestrate innovation from clinicians, startups, and big tech for surgical insights and connected surgery experiences

Designing POLYPHONIC differentiation

- **Delivering core POLYPHONIC applications for surgery:** designed to address unmet needs in education, clinical support, operational efficiency, and research beginning with real-time case collaboration and planning, live telepresence, dynamic content management, and enhanced post-operative analytics
- **For healthcare, by healthcare:** a software ecosystem and core applications developed with input from global hospital systems, surgeons, surgical teams, and nurses to ease deployment and drive adoption
- **Open & secure:** secure by design for the most sensitive healthcare environments; enabling sector-level innovation in a compliant environment

Electrophysiology

Global market leader in the science and technology of cardiac arrhythmia. With a 30-year legacy of collaboration with the electrophysiology community, we pioneer cardiac rhythm solutions so that atrial fibrillation (AFib) doesn't stop patients from living the lives they want.

Our mission: Cure atrial fibrillation

The electrophysiology ablation market is growing rapidly

2022 WW market size	$7B[1]
WW market CAGR 2022-2027	11 – 13%[1]

Market dynamics

- Double-digit growth in EP ablation procedures as scientific literature continues to demonstrate it is the most effective treatment option – and that early intervention is key
- Incidence of AFib continues to grow, while diagnosis via smart devices and patient awareness of condition also increases
- Radiofrequency (RF) ablation comprises 80% of procedures and is expected to remain important treatment modality
- Pulsed Field Ablation (PFA) holds promise to increase safety and access to procedure

AFib is a serious and progressive condition – while incidence is increasing, few patients are receiving ablation

1 in 4

adults over the age of 40 will develop AFib[2]

<5%

of eligible AFib patients will be treated with ablation[3]

37.5M

people are affected worldwide; by 2050, 5M new patients will be diagnosed each year[4]

5X

risk of stroke[5] and twice the risk of death when AFib is left untreated[6]

Recent launches and milestones

Recent launches

- QDOT MICRO™ Catheter & QMODE+
- OCTARAY™ Mapping Catheter with TRUEref™ Technology
- OPTRELL™ Mapping Catheter with TRUEref™ Technology

Upcoming milestones

- NUVISION™ 4D Ultrasound Catheter
- CARTO® 3 System enhancements: Version 8, Version 9
- Pulsed Field Ablation portfolio: VARIPULSE® Catheter, THERMOCOOL SmartTouch™ SF Dual-Energy Catheter, OMNYPULSE™ Catheter
- Ongoing PFA clinical trials: inspIRE (EMEA), admIRE (US), afIRE (China), SmartfIRE (EMEA), OmnyIRE (EMEA)

Our growth strategy

Win in AFib

- Drive procedure share
- Increase Clinical Account Specialist coverage, supporting our leading 5,500+ installed CARTO® systems
- Launch Accelerated Solutions Agreements to enable physicians access to our latest tech
- Increase patient awareness and demand for ablation in markets with capacity; accelerate time for patients to reach EP once diagnosed
- Spotlight evidence showing catheter ablation benefit (e.g. lower risk of dementia, lower risk of heart failure)

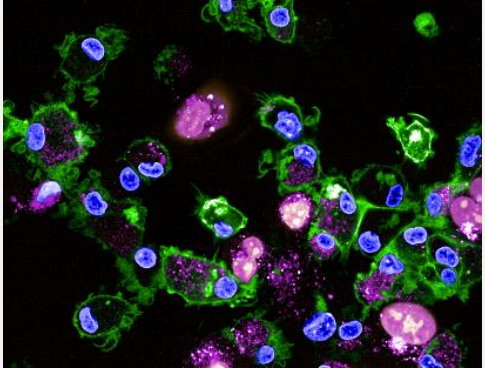
Accelerate innovation

- Launched QDOT MICRO™, offering unparalleled efficacy (86% clinical success) and procedure times (~60 minutes)[7]
- First and only FDA-approved workflows with zero fluoro

Deliver PFA

- Differentiate from the competition with a versatile portfolio with multielectrode, dual energy, single shot, large focal tip catheters
- Fully-integrate CARTO® 3D mapping and include support from world's largest network of mappers

Lung Cancer



Vision: Establish RYBREVANT® (amivantamab-vmjw) and lazertinib regimen as standard of care in first-line epidermal growth factor receptor-mutated (EGFRm) non-small cell lung cancer (NSCLC) and deliver a program with sales potential $5B+*[1]

Mission: Accelerate a transformative portfolio by setting new standards of care in EGFR mutated NSCLC

Significant growth opportunity

2022 WW market size[1]	~$30B
WW market CAGR 2022-2030[1]	8–10%

Market dynamics

- Lung cancer is the leading cause of cancer mortality worldwide, leading to 1.8 million deaths every year[2]
- Total worldwide 2030 lung cancer market projection is $60B[1]
- NSCLC accounts for 85% of all lung cancer cases[3]
- EGFR mutations occur in ~15% of Western patients and up to 40% to 50% of Asian patients[4-9]
- Third-generation tyrosine kinase inhibitors are the standard of care in first-line treatment of EGFRm NSCLC Despite meaningful response rates, nearly all patients will develop resistance[10,11]
- No targeted therapies are approved for patients who progress on or after osimertinib. Chemotherapy is the standard-of-care in second-line[11,12]

Statistically significant and clinically meaningful improvement in progression-free survival (PFS) and favorable trend in overall survival across 3 phase 3 studies

30%

reduction in the risk of disease progression or death in pts with 1L EGFRm NSCLC treated with RYBREVANT + lazertinib vs. Osimertinib (MARIPOSA)[13]

52%

reduction in the risk of disease progression or death in pts with 2L EGFRm NSCLC treated with RYBREVANT + chemotherapy versus chemotherapy (MARIPOSA-2)[14]

60%

reduction in the risk of disease progression or death in pts with IL exon 20 ins EGFRm NSCLC treated with RYBREVANT + chemotherapy vs. chemotherapy (PAPILLON)[15]

Favorable OS Trend

Observed across all three Phase 3 studies[13-15]

Recent launches and upcoming milestones

Recent launches

- **2021:** RYBREVANT approved in locally advanced or metastatic NSCLC with EGFR exon 20 insertions

Upcoming milestones

- **MARIPOSA: RYBREVANT/lazertinib:** 1L EGFRm (planned submission in Q4 2023)
- **MARIPOSA-2: RYBREVANT/lazertinib:** 2L EGFRm (submitted in Q4 2023)
- **PAPILLON: RYBREVANT:** 1L Exon 20 insertion (submitted in Q3 2023)
- **PALOMA-2 and PALOMA-3:** RYBREVANT subcutaneous (SC) administration; new formulations and dose optimization (data presentations expected in 2024)

Our growth strategy

New formulations and dose optimization

- Improve patient/provider experience and support frontline utilization through subcutaneous dosing
- Amivantamab SC can be administered in ~5 minutes (compared to 2-4 hours for IV)
- In addition to a Q2W dose, Q3W and Q4W doses of amivantamab SC have been confirmed
- Early data (Minchom et al ASCO 2023) show an improved safety profile for SC in terms of infusion-related reactions (IRRs)[16]

Increase adoption

- SKIPPirr Study: Prophylaxis Against IRRs
- COCOON Study: Enhanced versus standard management of dermatologic adverse events

Combination approaches

- Development of rational combination approaches to optimize clinical outcomes
- Expansion into EGFR wild-type

Non-lung indications

- Opportunity to expand to other cancer types (e.g. colorectal, head and neck cancers) – ongoing and planned proof-of-concept studies

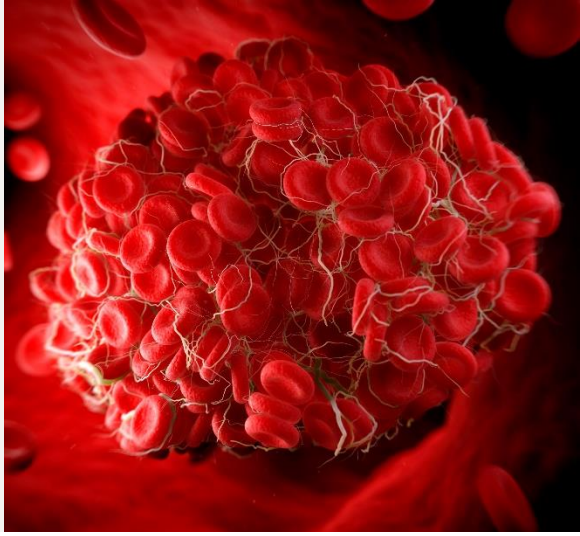
Interventional oncology

- Uniquely positioned advance the science of lung cancer through convergence of pharmaceuticals and medical device expertise and technology through Interventional Oncology

Milvexian

At J&J, we have an unrelenting vision to ease the tremendous global burden of cardiovascular disease. While significant progress has been made in cardiovascular treatments over the past two decades, millions of patients remain untreated or undertreated due to concerns about bleeding that can outweigh cardiovascular benefits. That's why we've partnered with Bristol Myers Squibb to develop milvexian, an investigational oral factor XIa inhibitor currently being studied to prevent life-threatening and debilitating thrombotic events while reducing risks of bleeding.

Our mission: Deliver a next generation anticoagulant without compromising efficacy, improving outcomes in a wider variety of patients than ever before.



Entering a robust antithrombotic market

2022 WW market size[1]	$51.3B
2030 G7 patient population[2]	21M
Estimated sales potential	$5B*

Market dynamics

Despite advances in standard of care and guidelines directed medical therapies, **residual risk of thrombotic events** such as heart attacks and strokes **remains high** and the **cost to healthcare systems is substantial**

Antithrombotics are a cornerstone therapy (antiplatelets and anticoagulants), however **sub-optimal treatment is prevalent** due to bleeding concerns

Tackling the world's leading health challenges

#1&2

Cardiovascular disease and stroke, respectively, are the leading causes of death globally[3]

~40%

Of patients who experience a first myocardial infarction (MI) die within 5 years[4]

~40%

Of adults living with AF are untreated or undertreated due to bleeding concerns[5]

25%

Of patients who had a stroke will have another one within five years[6]

Recent launches and milestones

Recent milestones

- Feb 2023: First patient enrolled in the Phase 3 Librexia Program, which is unrivaled as **the most comprehensive** FXIa clinical development program today that will provide indispensable data from nearly 50,000 patients across three indication-seeking studies.
  - Librexia-STROKE (ischemic stroke)
  - Librexia-ACS (acute coronary syndrome)
  - Librexia-AF (atrial fibrillation)
- May 2023: all three indications granted Fast Track Designation by the U.S. FDA

Our growth strategy

Overcoming limits of today's treatments with the goal of:

- **Establishing milvexian as the antithrombotic treatment of choice**
  - While all current antithrombotic therapies have risks of major bleeding, milvexian has the potential to transform the standard of care by offering an effective therapy with an improved bleeding profile
- **Transforming antithrombotic care through improved bleeding profile**
  - **Promising Phase 2 data**, complementing human genetic, epidemiologic, and preclinical evidence, provide support for the hypothesis that inhibiting FXIa can help reduce the risk of vascular events while improving the bleeding profile
  - Phase 2 AXIOMATIC-SSP dose-ranging study found there was **no increase in severe bleeding** (e.g., symptomatic intracranial hemorrhage) versus placebo, and there was no fatal bleeding in any arm of the study, even with all patients on background dual antiplatelet therapy for 21 days followed by single antiplatelet therapy for the duration of the trial
  - Phase 2 AXIOMATIC-TKR study showed a **dose response** in the prevention of postoperative venous thromboembolism (VTE) **without increased bleeding** following total knee replacement (TKR) across a 16-fold dose range
- **Delivering an unrivaled antithrombotic of choice with:**
  - **Superior efficacy** on top of standard of care (antiplatelets) for reducing the risk of MI/Stroke/CV Death
  - **Superior safety** vs. apixaban with comparable efficacy in AF; no increase in critical bleeding in ACS / Stroke
  - **Most comprehensive program** with three Phase 3 studies including event reduction in acute coronary syndrome, stroke prevention in atrial fibrillation and stroke prevention after an acute ischemic stroke or high-risk transient ischemic attack

MONARCH

Monarch is the first and only multispecialty flexible robotic platform cleared for use in bronchoscopy and urology procedures with substantial opportunity to transform the delivery of interventional oncology treatments. Our vision is to become the world's leading flexible robotic platform, specializing in enabling interventional solutions across multiple disease areas.

Flexible Robotics Market Potential

Lung Biopsy	**2022 WW Market Size**	4M Procedures
	WW Market CAGR 2022-2027	3 - 5%[1]
	WW 2022 Flexible robotics penetration	<1%[1]
	WW CAGR for robotics penetration 2022-2027	33-35%[1]
Kidney Stones	**2022 WW Kidney Stone Market Size**	2.9M Procedures[1]
	WW Market CAGR 2022-2027	2-4%[1]
	2022 Robotic penetration	0%
Lung Cancer Pharmaceutical	**2022 WW Market Size**	$29B[2]
	WW Market CAGR 2022-2027	8 - 10%[2]
	2030 WW Market Size	$60B[2]

Opportunity for intratumoral drug segment across multiple indications

Market Dynamics

Flexible Robotics market growth driven by enhanced capabilities and clinical data supporting safety, feasibility, and efficacy compared to standard of care[3-7]

Lung Cancer

- 1.8M Lung Cancer deaths per year globally[8]; largely driven by late diagnosis
- 1.6MM lung nodules identified in U.S. annually[9] with expected increase due to lung cancer screening
- Early biopsy and diagnosis contribute to higher survival rate[10], but majority of lesions are difficult to access with >65% of U.S. patients not diagnosed until stages III-IV[11]
- Opportunity to create new standards of care for cancer treatment with intratumoral drug therapy delivered directly into tumors to 1) minimize toxicity, 2) potentially increase efficacy and 3) unlock new therapies

Kidney Stones

- 40% of kidney stone surgical patients have larger stones that are more difficult to treat in a single session[12]
- 50% of patient kidney stones re-occur[13]
- Current treatments are either more invasive or less effective[14]

MONARCH™ Platform Opportunities

70% of **lung nodules** are periphery located and difficult for manual access[15]

1 in 11 Americans experience **kidney stones** at some point in their life[17]

74% of **lung cancer** patients do not survive 5-years post treatment[16]

50% of **kidney stone** patients will experience recurrence within 5 years of treatment[18]

Significant recent & near-term milestones

Bronchoscopy (lung biopsy)

- First minimally invasive, robotic-assisted technology approved for peripheral lung procedures in China (2023)
- Real-world evidence demonstrates 15% improvement in overall diagnostic yield with the MONARCH Platform for Bronchoscopy compared to traditional ENB bronchoscopy[19]
- Integrated 3D Imaging to improve navigation accuracy and confirm tool-in-lesion (second half 2024)
- Completed TARGET clinical trial, largest, real-world, multi-center, prospective study of Robotic Assisted Bronchoscopy (results 2024)

Urology (kidney stone removal)

- 510(k) Clearance (2022)
- First in human study enrollment completed (2023)
- Continue clinical evidence generation (2024) and US commercialization

Intratumoral therapy (lung cancer)

- First-ever robotically-assisted endoluminal drug delivery study[20] (completed 2023)
- First-ever robotically-assisted microwave ablation IDE study leveraging NeuWave™ Microwave Ablation technology[21] (ongoing)
- Multiple intratumoral drug therapy clinical trial launches planned in 2024

Our Growth Strategy

Innovate to improve patient care & accelerate adoption

- Integrated 3D imaging solutions
- Advanced training & support models
- J&J MedTech/J&J Portfolio Offerings

Leverage J&J MedTech global leadership & footprint to scale into new markets

- Approval in China as first minimally invasive, robotic-assisted technology for peripheral lung procedures

Expand platform with MONARCH Platform for Urology

- 510(k) clearance & first in human study
- U.S. commercialization

Leverage unique convergent J&J MedTech and Innovative Medicine expertise to transform cancer care

- Interventional Oncology R&D Unit is developing best-in-class pharmaceuticals delivered directly into tumors via minimally invasive procedures

Johnson&Johnson MedTech

Disclaimers:
The use of the MONARCH™ Platform for the delivery of microwave ablation or intratumoral therapy is not cleared/approved or available for sale in any nation. Other technologies/products are under development and devices using it are not approved or available for sale or commercial use in any market.

Menu

Nipocalimab

Nipocalimab is a differentiated anti-FcRn that we believe will define the standard of care of auto- and alloantibody diseases. These diseases represent an area of immense unmet medical need, affecting 240MM people worldwide who live with more than 80 diseases – most of which have few or no safe, effective, approved, or targeted therapies. These diseases are caused by pathogenic IgG antibodies made by one's own body – autoantibodies – that attack critical organs and tissues. In pregnancy, alloantibodies from a pregnant person can attack their developing fetus. This potentially represents a more than $5 billion-dollar[1] opportunity for Johnson & Johnson Innovative Medicine, based on non-risk adjusted peak-year sales.

Our mission: Reclaiming life for patients living with auto- and alloantibody diseases

10 auto- and alloantibody (AAb) diseases in development affecting ~7.2M people in the G8

WW market size 2030 est. (7-yr CAGR)[2]	~44B (3-5%)
Total estimated sales potential (PYS)	$5B+[1]

Market dynamics

- J&J has the potential to introduce multiple launches, many as first-in-class indications, and all with best-in-class potential
- Nipocalimab is being studied in all three segments of autoantibody-driven diseases and has the potential to be **first- and best-in-class** in indications within all, specifically:
  - **Maternal fetal:** Hemolytic Disease of the Fetus and Newborn (HDFN), Fetal Neonatal Alloimmune Thrombocytopenia (FNAIT)
  - **Rare autoantibody:** Warm Autoimmune Hemolytic Anemia (wAIHA)
  - **Prevalent rheumatology:** Systemic Lupus Erythematosus (SLE), Rheumatoid Arthritis (RA)

Best-in-class potential

3 segments | **10** diseases

Rare Autoantibody, Maternal Fetal, & Prevalent Rheumatology with **Proof of Mechanism** achieved for all three segments; 10 diseases determined by intersection of **unmet need**, **actionable science** and **value creation**

>80%

IgG▼

Potential for **best-in-class** efficacy: rapid, deep, sustained IgG lowering, up to 82% at highest doses in development

Across these autoantibody diseases, **~80%** are female, with up to **half** who are of child-bearing potential

Unparalleled positioning in Maternal Fetal indications and **data in pregnancy** to support a unique safety profile

Optimized dosing & devices

Regular, stable dosing in chronic Rare Autoantibody and Prevalent Rheumatic diseases; **twice monthly** in Rare Autoantibody, with **best-in-class devices** in both segments to meet patient needs

Upcoming milestones

Rare autoantibody
- **gMG** Phase 3 study completion 4Q2023
- **wAIHA** Phase 2/3 study completion 1Q2025
- **IIM** Phase 2 study completion 1Q2026
- **CIDP** Phase 3 study completion 2Q2027
- **BP** Phase 3 study start in 2024

Maternal fetal
- **HDFN** Phase 3 primary completion 3Q2027
- **FNAIT** Phase 3 study start in 2024

Prevalent rheumatology
- **RA** combination Phase 2 primary completion 4Q2024
- **SLE** Phase 2 study completion in 2Q2024
- **SjD** Phase 2 study completion in 1Q2024

Our growth strategy

- **Successfully launch gMG as the first indication for highly differentiated nipocalimab in rare autoantibody diseases** with potential for best-in-class efficacy, optimized safety and tolerability; and a convenient, regular (twice-monthly) dosing and device strategy
- **Build on gMG success with subsequent launches in the rare autoantibody space:** wAIHA (first-in-class), IIM, CIDP, and BP – areas that build on J&J's extensive and decades-long experience in the fields of Hematology, Rheumatology, Neuroscience, and Dermatology
- **Expand into maternal fetal immunology** and establish nipocalimab as the only approved non-invasive therapeutic treatment for pregnancies at severe risk for HDFN and FNAIT, changing the paradigm in this space for families in need, and continuing to generate data in pregnancy that supports nipocalimab's unique safety profile across all autoantibody-driven conditions
- **Deliver continued success with nipocalimab's entry into prevalent rheumatology:** first-in-class launches treating patients with SjD, SLE, and RA in a space that continues to build on J&J's long legacy of pioneering new therapies for patients in need

Orthopaedics

As the leading global orthopaedics company with a restorative portfolio spanning head-to-toe, we are shaping the next frontier of orthopaedic innovation with clinically-differentiated implants and MedTech advancements across a range of procedures and sites of care.

Our mission: Keeping people moving

Orthopaedics markets are diversifying and accelerating

2022 WW market size	$50B[1]
WW market CAGR 2022-2027	3-5%[1]

Market dynamics

- Robotics and enabling technologies are accelerating growth in Hips, Knees, and Spine **above 5%**
- Extremities and elective surgeries are **growing >10%**
- Biologics, infection control, and personalized solutions are the next frontier with a **>$5B Market**
- As the global population continues to age, there is a higher prevalence of age-related joint conditions such as osteoarthritis
- Osteoarthritis is expected to become the leading cause of disability by 2050 and is primary reason for joint reconstruction surgery
- COVID has accelerated Ambulatory Surgical Centers as an approved point of care for a broader variety of procedures including hip and knee surgeries

1.7 Billion[2] people live with musculoskeletal disorders globally – more than cancer, circulatory, or respiratory diseases

$1T

burden of musculoskeletal disease in United States[3]

#1 Disease Burden

musculoskeletal conditions are largest contributor to years lived with disability[6]

500M

approximately 500 million people worldwide are living with osteoarthritis[4]

1 in 4

people in the United States suffer from bunions[5]

Recent launches and milestones

Recent launches

- VELYS Robotic-Assisted Solution approved in 15 key global markets with more than 35,000 cases completed and four software updates since 2021
- Launched 3 new innovations to Attune knee portfolio, closing critical gaps in cementless, medial stabilized, and revision cones
- 13% of ATTUNE Primary Knee procedures are now robotically-enabled, ramping up from zero in less than two years
- Achieved more than 55 FDA clearances and completed 10 development deals in digitally-enabled and high growth areas since 2018

Upcoming milestones

- **VELYS Robotic-Assisted Solution global expansion** and development underway for new indications including partial knee and spine
- **Expanding extremities portfolio** with new innovations such as TriLEAP, which will bring low-profile plating system to cover forefoot, midfoot and hindfoot elective and trauma procedures
- **Expanding our biomaterials portfolio** with FIBREGRAFT™ AERIDYAN™ Matrix, the first bone graft substitute to contain boron-based bioactive glass with essential elements that have been reported to enhance cell proliferation for bone growth and bone health

Our solutions drive differentiated value and growth

Digital

- Our digital portfolio including VELYS Robotic-Assisted Solution, VELYS Hip Navigation with CUPTIMIZE, and KINCISE is accelerating growth above historical averages and is complemented by our leading knee, hip, and revision portfolios

Extremities

- Solutions, like our INHANCE Shoulder System, **drive above market growth while reducing procedure complexity**
- Building a **high growth, comprehensive foot and ankle portfolio** targeting **growing and underserved needs** in hammertoes, bunions, fore, mid and hind foot, while expanding **our site of care presence**

Biomaterials

- Biomaterials such as FIBERGRAFT Products, include first of its kind technology, complementing **traditional orthopaedic procedures**

OTTAVA

Transforming surgery through the power of experience with a one-of-a-kind architecture, differentiated features, and Ethicon surgical instruments – only on the OTTAVA™ System

Global surgery market

2022 WW market size	~40M relevant procedures[1]
WW market CAGR 2022-2027	13-15% for surgical robotics[1]

Market dynamics

- High variability in outcomes and clinical proficiency – 1 in 4 surgeons failed blind assessment[2]
- Remaining high administrative costs – across healthcare estimated at >$1 trillion[3]
- Continued challenges in robotic surgery – lack of flexibility in procedure and OR, surgeon and clinical team discomfort, hospital efficiency and workflow challenges[1]

Opportunities in soft tissue robotics[1]

5%
Soft-tissue surgeries globally use a robot

>$6B
2022 robotic surgery market

>50%
Robotic sales generated by instruments & accessories

2 in 3
robotic procedures are done in the US

Program milestones

Planning to submit IDE application to the FDA in the second half of 2024 to initiate U.S. clinical trials

Our growth strategy

- Deliver a competitive solution that addresses unmet needs – adding simplicity, freedom, performance, and insights to the OR for a better surgical experience
- Target established market in the US – high concentration of sophisticated users and willingness to adopt new technology
- Parallel path toward global scale – in key and expanding robotics markets across Europe and Asia
- Leverage the scale of J&J – extending J&J's unmatched expertise in clinical education and training and global reach in commercial and services support to ensure system availability and support
- Deliver continued innovation roadmap – benefiting from J&J's investment across all surgical technologies

OTTAVA differentiation

- **Unified architecture** – robotic arms incorporated into a standard size surgical table allows for an invisible design, with the robotic arms available when needed or stowed under the surgical table when not. The design removes barriers to movement and collaboration and offers freedom and flexibility to adapt to individualized patient needs.
- **Twin motion feature** – unified movement of the table and the robotic arms is designed to allow surgical teams to reposition a patient without interrupting a procedure.
- **Ethicon instruments only on OTTAVA** – designed for performance and precision and offering a more consistent experience across procedures. Ethicon instruments on OTTAVA are backed by decades of innovation and market leadership in minimally invasive surgery.

Surgery

We are the **global market leader** in surgery. In collaboration with clinicians and health care experts, we develop clinically-differentiated surgical technologies to help address some of the most pressing health care challenges of our time such as metabolic disease, cardiovascular disease, and cancer. Through our efforts and ingenuity, we aspire to elevate standards of care and create a healthier future for the patients of today and tomorrow.

Our purpose: Reimagining how we heal

Large, attractive category with significant unmet need

2022 WW market size	$28B[1,2]
WW market CAGR 2022-2027	5-7%[1]

Unmet needs In surgery

- 5B people around the world lack safe, affordable surgical care[3]
- 32% of global disease burden can be treated by surgery[3]
- 25% of all surgeries have bleeding and healing complications[4]
- 17M annual deaths preventable with the right surgery at the right time[3]
- 50% of adverse events in hospitals are due to surgical complications[5]

The global market leader in surgery

#1

WW market leader in Wound Closure and Healing, Biosurgery, and Endocutters

230M

Patients reached annually through our technologies and solutions

70%

In- and out-patient OR procedures use an Ethicon surgical technology[6]

40

Market launches across core surgical technologies portfolio since 2021

Recent launches and milestones

Recent launches

- STRATAFIX™ and PLUS Antibacterial Sutures
- ECHELON™ 3000 Stapler
- VISTASEAL™ Fibrin Sealant
- ENSEAL™ X1 Tissue Sealer (Curved & Straight Jaw)

Upcoming milestones

- ETHIZIA™ Hemostatic Sealing Patch
- Next Gen Energy Tower
- Next Gen DERMABOND™
- ECHELON™ Linear Cutter
- Robotically capable advanced instrumentation for the OTTAVA™ System

Biosurgery is a key growth driver

Global leader in growing, under-penetrated market

- 4-6% global biosurgery market CAGR (2022-2027)
- Most comprehensive surgical bleeding portfolio on the market
- Only 40% of all surgeries employ effective bleeding and leak control[7]

Our near-term pipeline is focused on expanding reach in high-growth sealing space

- Recently acquired GATT Technologies, a platform technology company based on novel synthetic polymer; Initial product launch expected in 1H 2024 – ETHIZIA™ Hemostatic Sealing Patch – clinically proven to stop disruptive bleeding
- Additional growth will be driven through expansion of uses for novel technology across multiple sealing and hemostasis surgical needs

A clear strategy to expand portfolio penetration and innovate in high unmet need areas

- Driving increased portfolio penetration via core business and globalizing advanced innovations in bleeding and sealing
- Advancing innovation agenda to expand market leadership and meet critical unmet needs
- Additional development pipeline programs underway to address air leaks which occur in 40-50% of thoracic procedures today[8], as well as dural closure and high-pressure vessel sealing complications

Targeted Oral Treatments

Johnson & Johnson Innovative Medicine has the opportunity to transform the immunology treatment experience with a portfolio of targeted oral treatments to fulfill the significant unmet need that remains – especially for the 50-70% of patients, almost 5 million patients in the G8 – who are living with moderate-to-severe psoriatic and inflammatory bowel diseases and are eligible for advanced therapies and yet aren't receiving them.

Our Mission: Transforming the immunology treatment experience

Growing market for oral treatment options

WW market size 2030 est. (7-yr CAGR)[1]	PsO	~$35B (4-6%)
	PsA	~$8B (4-6%)
	CD	~$19B (2-4%)
	UC	~$13B (7-9%)

Market dynamics

- The most common reasons cited for not using existing advanced treatments are the method of administration and overall perceived risk/benefit profiles of intravenous and subcutaneous options
- The unprecedented combination of advanced efficacy and trusted safety in a preferred formulation could unlock a large market share in psoriasis (PsO) and other indications like psoriatic arthritis (PsA), ulcerative colitis (UC), and Crohn's disease (CD)

Investigational JNJ-2113 – the first and only targeted oral peptide engineered to selectively block the IL-23 receptor

70%

of PsO **patients who are eligible for advanced treatments are not receiving them** despite currently approved safe and effective biologics

75%

of patients currently taking injectables would switch to an oral if it offered high efficacy and demonstrated safety, according to JJIM research

40%

of patients at the highest dose of **JNJ-2113** in the Phase 2b study met the endpoint of **complete skin clearance**

Potential

of JNJ-2113

- Advanced efficacy
- Well tolerated
- Convenient pill

Total Estimated sales Potential (PYS) **$5B+**[2]

Pipeline milestones

JNJ-2113

Psoriasis – once-daily 200 mg pill

- ICONIC-LEAD Phase 3 Primary Completion: 2H2024
- ICONIC-TOTAL Phase 3 Primary Completion: 2H2024
- ICONIC-ADVANCE 1 Phase 3 Study Start 1H2024
- ICONIC-ADVANCE 2 Phase 3 Study Start 1H2024

Ulcerative Colitis – dose-ranging study

- ANTHEM-UC Phase 2b Primary Completion: 1H2025

Targeted orals growth strategy

JNJ-2113 potential in IL-23-mediated diseases

- JNJ-2113 has the potential to block IL-23-mediated inflammation, which is the underpinning of inflammation in PsO, PsA, CD, and UC
- Ph2b UC study expands JNJ-2113 into inflammatory bowel disease
- Build on and leverage our IL-23 expertise to deliver a potentially unprecedented therapy that may transform the treatment experience for IL-23-mediated diseases

JNJ-1459 oral IL-17*i* targeted small molecule

- There is an expanded and distinct opportunity for a once-daily oral IL-17 inhibitor
- We believe JNJ-1459 has potential in immunodermatologic and rheumatic indications beyond PsO and PsA, including indications with high unmet need
- Ph2 PsO dose-ranging study targeted for 1H2024

Vision

Johnson & Johnson is a significant force in eye health. We improve and preserve sight for more than 40 million people every year and see opportunity to reach even more - focused on areas where high unmet need and high science intersect[1].

Vision Made Possible™

#1 Global Market position in contact lenses[2]

#2 Global Market position in surgical vision[2]

Large category with significant unmet need

2022 WW market size[2]	20B
WW market CAGR 2022-2027[2]	5-7%

Market dynamics

- Underpenetrated contact lens market due to discomfort, astigmatism, and wearers dropping out when they develop presbyopia
- Demand quickly increasing for daily disposable lenses including for astigmatism and presbyopia
- Only 10-15% of patients today are getting advanced optical intraocular lenses (IOL) designed for astigmatism or presbyopia
- Softening demand in U.S. attributed to current economic climate with strong increase OUS driven through new innovation

Unmet need continuing to rise due to lifestyle trends and aging population[3]

2B
people in need of vision correction[4] – 40% with astigmatism[5]

>90%
people will develop a cataract by age of 65 years[6]

120M
soft contact lens wearers – just 10% of those who could benefit[7]

28M
cataract surgeries performed annually[4]

Recent launches and milestones

Recent launches

- Acuvue Oasys 1 Day MAX S & MF (Expanded U.S./EMEA)
- Abiliti Myopia (Singapore)
- ELITA FLAP (LMR U.S.) & Lenticule (LMR EMEA/APAC)
- TECNIS Eyhance, Synergy, and Toric II (China)
- TECNIS PureSee IOL (LMR EMEA/APAC)

Upcoming milestones

- Acuvue Oasys 1 Day MAX and multifocal (APAC)
- Acuvue Oasys 1 Day MAX for astigmatism and multifocal toric (U.S.)
- Abiliti Myopia Management (select countries EMEA/APAC)
- ELITA FLAP & Lenticule (U.S.)
- TECNIS PureSee and ODYESSEY (U.S.)

Our growth strategy

Contact lens

- Maintain #1 market position and at or above market growth
- Continued roll-out of Acuvue Oasys 1 Day Max
- New innovation to drive growth in astigmatism and presbyopia segments

Cataract

- Focus on growing the premium IOL category in the U.S. and building on OUS strength
- Continue cadence of IOL innovation building on our superior TECNIS products and creating improved surgeon experience

Digital

- Develop smarter surgical solutions, advanced lenses, and connected digital experiences
- Continue focus on e-commerce and digital experience for customers and patients making eye health convenient and easy

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Disclaimers:
*Non-risk adjusted peak year operational sales, including partner sales

Cell Therapy References:

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- **CARVYKTI has demonstrated the best hazard ratio or clinical outcome for any Phase 3 study in multiple myeloma**
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  - Cellular Biomedicine Group Announces Exclusive Collaboration and License Agreement with Janssen to Develop and Commercializeanti CD19 & CD20 Bi-Specific and anti CD20 CAR-Ts for Non-Hodgkin Lymphoma [Press Release]. https://www.prnewswire.com/news-releases/cellular-biomedicine-group-announces-exclusive-collaboration-and-license-agreement-with-janssen-to-develop-and-commercialize-anti-cd19--cd20-bi-specific-and-anti-cd20-car-ts-for-non-hodgkin-lymphoma-301812963.html

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Significant unmet need for patients with aggressive or difficult-to-treat blood cancers

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- **712 ww deaths**
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Cell Therapy References:

Near-term pipeline/portfolio milestones

- **Expect approvals of CARTITUDE-4 in 2L-4L RRMM in the U.S. and EU in 2024**
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  - ClinicalTrials.gov. A Study of JNJ-68284528, a Chimeric Antigen Receptor T Cell (CAR-T) Therapy Directed Against B-cell Maturation Antigen (BCMA) in Participants With Multiple Myeloma (CARTITUDE-4). https://clinicaltrials.gov/study/NCT04181827. Accessed November 30, 2023
- **CARTITUDE-4 demonstrated compelling efficacy in lenalidomide refractory RRMM patients after one to three prior lines of therapy with a Hazard Ratio (HR) of 0.26, the greatest risk reduction for progression or death (74%) shown in any treatment in MM**
  - CARVYKTI ® Reduces Risk of Disease Progression or Death by 74 Percent in Earlier-Line Multiple Myeloma Treatment in the Landmark Phase 3 CARTITUDE-4 Study. [Press Release]. https://www.jnj.com/carvykti-ciltacabtagene-autoleucel-reduces-risk-of-disease-progression-or-death-by-74-percent-in-earlier-line-multiple-myeloma-treatment-in-the-landmark-phase-3-cartitude-4-study
- **Frontline CARTITUDE-5 and CARTITUDE-6 are enrolling**
  - ClinicalTrials.gov. A Study of Bortezomib, Lenalidomide and Dexamethasone (VRd) Followed by Cilta-cel, a CAR-T Therapy Directed Against BCMA Versus VRd Followed by Lenalidomide and Dexamethasone (Rd) Therapy in Participants With Newly Diagnosed Multiple Myeloma for Whom ASCT is Not Planned as Initial Therapy (CARTITUDE-5). https://clinicaltrials.gov/study/NCT04923893. Accessed November 30, 2023
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- **AbelZeta presenting data on C-CAR039 (CD19/20 CAR-T) and C-CAR066 (CD20 CAR-T) at ASH 2023**
  - AbelZeta Announces Two Abstracts for Presentation at the 65th ASH Annual Meeting. [Press Release]. https://www.prnewswire.com/news-releases/abelzeta-announces-two-abstracts-accepted-for-presentation-at-the-65th-ash-annual-meeting-301995912.html
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Disclaimers:

*Non-risk adjusted peak year operational sales, including partner sales

Complex Biologics References:

Market dynamics

- **>1.3M ww incidence**
  The Global Cancer Observatory (2020, December). Multiple Myeloma. https://gco.iarc.fr/today/data/factsheets/cancers/35-Multiple-myeloma-fact-sheet.pdf
- **>712K ww deaths**
  The Global Cancer Observatory (2020, December). Multiple Myeloma. https://gco.iarc.fr/today/data/factsheets/cancers/35-Multiple-myeloma-fact-sheet.pdf

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First-in-class bispecifics approved

- **RYBREVANT**
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- **TECVAYLI**
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- **TALVEY**
  U.S. Food and Drug Administration (2023, 9 August) FDA grants accelerated approval to talquetamab-tgvs for relapsed or refractory multiple myeloma. [Press Release] https://www.fda.gov/drugs/resources-information-approved-drugs/fda-grants-accelerated-approval-talquetamab-tgvs-relapsed-or-refractory-multiple-myeloma

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Upcoming milestones

- **TECVAYLI**
  - MajesTEC-1
    ClinicalTrials.gov Identifier NCT04557098 https://classic.clinicaltrials.gov/ct2/show/NCT04557098?term=MajesTEC-1&draw=2&rank=1
    Accessed November 30, 2023
  - MajesTEC-4
    ClinicalTrials.gov Identifier NCT05243797 https://classic.clinicaltrials.gov/ct2/show/NCT05243797?term=MajesTEC-4&draw=2&rank=1
    Accessed November 30, 2023
  - MajesTEC-9
    ClinicalTrials.gov Identifier NCT05572515 https://classic.clinicaltrials.gov/ct2/show/NCT05572515?term=MajesTEC-9&draw=1&rank=1
    Accessed November 30, 2023
  - MajesTEC-3
    ClinicalTrials.gov Identifier NCT05083169 https://classic.clinicaltrials.gov/ct2/show/NCT05083169?term=MajesTEC-3&draw=2&rank=1
    Accessed November 30, 2023
  - MajesTEC-7
    ClinicalTrials.gov Identifier NCT05552222 https://classic.clinicaltrials.gov/ct2/show/NCT05552222?term=MajesTEC-7&draw=2&rank=1
    Accessed November 30, 2023
- **TALVEY**
  - MonumenTAL-1
    ClinicalTrials.gov Identifier NCT04634552 https://classic.clinicaltrials.gov/ct2/show/NCT04634552?term=MonumenTAL-1&draw=2&rank=1
    Accessed November 30, 2023
  - MonumenTAL-3
    ClinicalTrials.gov Identifier NCT05455320 https://classic.clinicaltrials.gov/ct2/show/NCT05455320?term=MonumenTAL-3&draw=2&rank=1
    Accessed November 30, 2023
- **JNJ-5322/BCMA/GPRS5D/CD3 ASH Presentation**
  - Pillarisetti R, Yang D, et al. Characterization of JNJ-79635322, a Novel BCMAxGPRC5DxCD3 T-Cell Redirecting Trispecific Antibody, for the Treatment of Multiple Myeloma. Paper presented at: American Society of Hematology Annual Meeting; December 9-12 2023. Abstract 456. https://ash.confex.com/ash/2023/webprogram/Paper174941.html

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Our growth strategy

- **JNJ-5322**
  - ClinicalTrials.gov Identifier NCT05652335 https://classic.clinicaltrials.gov/ct2/show/NCT05652335?term=JNJ-79635322&draw=2&rank=1
    Accessed November 30, 2023
- **JNJ-8543**
  - ClinicalTrials.gov Identifier NCT05424822 https://classic.clinicaltrials.gov/ct2/show/NCT05424822?term=JNJ-80948543&draw=2&rank=1
    Accessed November 30, 2023

Data Science in R&D References:

1. Pharmacology & Therapeutics
2. APSB
3. RBC Capital Markets; UMB
4. Six FDA guidances focused on RWE in last 3 years alone; www.fda.gov
5. Increase efficiency of regulatory intelligence gathering and enable more holistic evidence generation for regulatory submissions
6. 15+ NMEs and 35+ LEs
7. Automated endpoints such as MES scoring for UC; in active discussion with regulators on validation plan
8. Based on retrospective analyses of several studies, top 50% of sites ranked by AI/ML models enrolled 1.2-2.6x as many patients as those ranked in the bottom 50%
9. Ulcerative Colitis
10. Chronic lymphocytic leukemia (CLL) and small lymphocytic lymphoma (SLL)

POLYPHONIC References:

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2. The Lancet Global Surgery Commission, 2015; The Lancet, November 2014
3. RBC Capital Markets, "The Healthcare Data Explosion," https://www.rbccm.com/en/gib/healthcare/episode/the_healthcare_data_explosion
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Disclaimers:

POLYPHONIC is under development and is not currently available in any market

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Lung Cancer References:

1. Johnson & Johnson. 2023 EBR NSCLC WW Projected Sales. September 14, 2023
2. Thandra KC, Barsouk A, Saginala K, Aluru JS, Barsouk A. Epidemiology of lung cancer. Contemp Oncol (Pozn). 2021;25(1):45-52. doi: 10.5114/wo.2021.103829. Epub 2021 Feb 23. PMID: 33911981; PMCID: PMC8063897
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4. Oxnard JR, et al. Natural history and molecular characteristics of lung cancers harboring EGFR exon 20 insertions. J Thorac Oncol. 2013 Feb;8(2):179-84. doi: 10.1097/JTO.0b013e3182779d18
5. Bauml JM, et al. Underdiagnosis of EGFR Exon 20 Insertion Mutation Variants: Estimates from NGS-based Real World Datasets. Abstract presented at: World Conference on Lung Cancer Annual Meeting; January 29, 2021; Singapore
6. Pennell NA, et al. A phase II trial of adjuvant erlotinib in patients with resected epidermal growth factor receptor-mutant non-small cell lung cancer. J Clin Oncol. 37:97-104
7. Burnett H, et al. Epidemiological and clinical burden of EGFR exon 20 insertion in advanced non-small cell lung cancer: a systematic literature review. Abstract presented at: World Conference on Lung Cancer Annual Meeting; January 29, 2021; Singapore
8. Zhang YL, et al. The prevalence of EGFR mutation in patients with non-small cell lung cancer: a systematic review and meta-analysis. Oncotarget. 2016;7(48):78985-78993
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Disclaimers:

*Non-risk adjusted peak year operational sales, including partner sales

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Disclaimers:
*Non-risk adjusted peak year operational sales, including partner sales

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20. NCT # 04809103
21. NCT # 05299606

Disclaimers:

The use of the MONARCH™ Platform for the delivery of microwave ablation or intratumoral therapy is not cleared/approved or available for sale in any nation. Other technologies/products are under development and devices using it are not approved or available for sale or commercial use in any market.

Nipocalimab References:

1. Non-risk adjusted peak year operational sales, including partner sales

2. For 10 diseases currently in scope. Abbreviations AAb = auto- and alloantibody; gMG = generalized myasthenia gravis; wAIHA = warm autoimmune hemolytic anemia; IIM = idiopathic inflammatory myopathies; CIDP =chronic inflammatory demyelinating polyneuropathy; BP = bullous pemphigoid; HDFN = hemolytic disease of the fetus and newborn; FNAIT = fetal neonatal alloimmune thrombocytopenia; RA = rheumatoid arthritis; SLE = systemic lupus erythematosus; SjD = Sjögren's disease

Orthopaedics References:

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Disclaimers:

The OTTAVA robotic system is under development and is not authorized to be marketed or sold in any market

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