Impact & Sustainability

Novartis 11th annual ESG investor event

December 9, 2024





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Welcome

Vas Narasimhan Chief Executive Officer



Inclusive access to innovative medicines

Lutz Hegemann
President, Global Health



We remain committed to executing our focused strategy

Deliver high-value medicines that alleviate society's greatest disease burdens through technology leadership in R&D and novel access approaches

Focus

Priorities

Execution

4 core therapeutic areas

Cardiovascular-Renal-Metabolic, Immunology, Neuroscience, Oncology

2 + 3 technology platforms

Chemistry, Biotherapeutics xRNA, Radioligand, Gene & Cell Therapy

4 priority geographies

US, China, Germany, Japan

Accelerate growth and deliver returns



Deliver high-value medicines (including launch excellence)

Strengthen foundations



Unleash the power of our people

Scale data science and technology

Build trust with society

Delivering through operational excellence



Driving efficiencies and agile resource allocation

Improving R&D productivity

Our greatest contribution to society is in advancing innovation and access to medicines

Creating sustainable impact

Value creation

Innovation and access to medicines

Future-proofing pipeline to address unmet need

Enabling access to innovative medicines

Dedicated Global Health unit

Human Capital

Diversity, equity & inclusion

Culture

Talent

Risk mitigation

Environmental Sustainability

Climate

Nature

Ethical **Standards**

Ethics

Compliance

Human rights

Enablers

Governance. transparency, non-financial reporting

Consistent industry-leading performance across priority ESG ratings

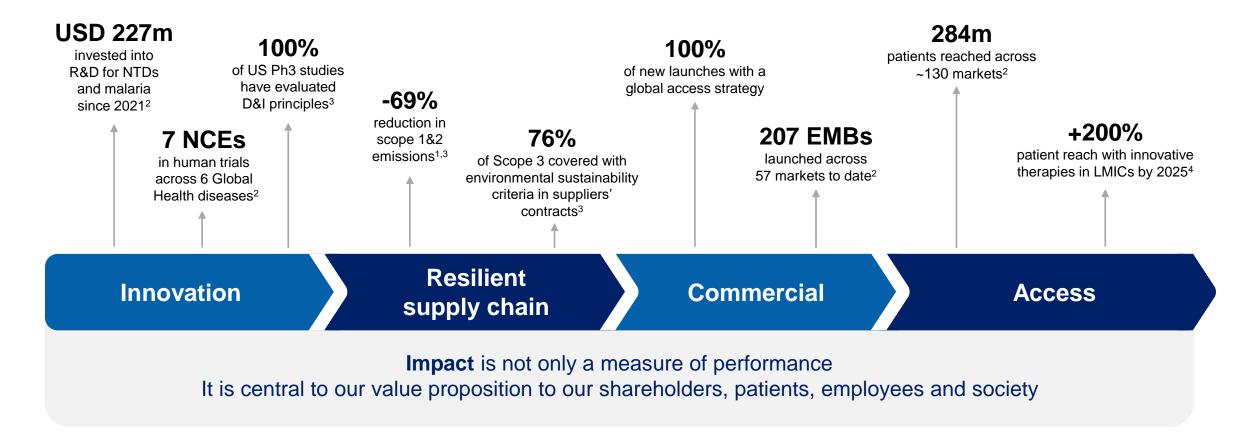
Rank 1 in ATMI 2024 Industry leader in Sustainalytics¹ Leaders group in MSCI Industry leader group in ISS ESG Double A List in CDP climate and water



ATMI – Access to Medicines Index. 1. Pharmaceuticals subindustry group. Copyright Morningstar Sustainalytics. All rights reserved.



Impact and sustainability are at the core of everything we do, and a key value driver for Novartis



EMBs – Emerging market brands. NCEs – New chemical entities. NTDs – Neglected tropical diseases. 1. Vs. 2016 baseline. 2. As of end 2023. 3. As of end Q3 2024. 4. vs. 2019 baseline; target linked to sustainability-linked bond. The second target is : +50% patient reach with global health programs in LMICs by 2025



Novartis ranks #1 in 2024 Access to Medicines Index, highlighting our commitment to inclusive healthcare



Score

3.78

Rank

1

4 (2022)

Governance of access



- Highest responsibility of access lies directly with the **Board**
- Comprehensive access strategy integrated within corporate strategy
- Comparatively strong commitment to responsible business practice (performance targets aligned with Code of Ethics)

Rank #1

Research & development



- NCD and priority diseases pipeline with access plans for almost all its late-stage pipeline candidates
- Access plans with greater depth and breadth compared to peers
- Strong R&D capacity building activities

Rank #1

Product delivery



- Innovative medicines widely registered in LMICs
- Inclusive business model to improve access in low-income, least developed countries
- Reporting of outcomes about the implementation of access strategies
- New non-exclusive voluntary licensing agreement

Rank #2

LMIC – low- and middle-income country. NCD – Non-communicable disease.

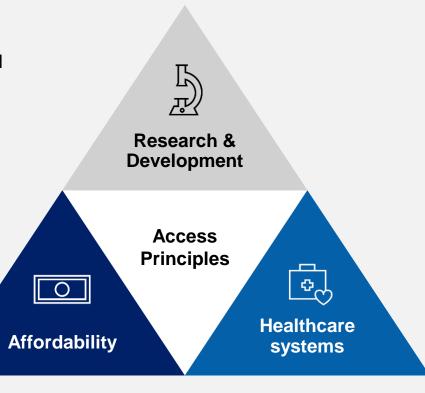


Novartis Access Principles continue to guide our efforts to create and sustain social impact...

For all new medicines, systematically integrate access in how we research, develop, and deliver globally

100% of new launches have a global access strategy

+200% patient reach with innovative therapies, **+50%** patient reach with global health programs in LMICs by 2025¹



Selected examples

R&D

Trial diversity strategy

Adaptive development: Modification of medicines for vulnerable populations

Affordability

Tiered pricing framework (incl. Emerging Market Brands)

ATOM: 1st company to contribute an innovative medicine²

Inclusive healthcare systems

One Novartis Health System Strengthening framework

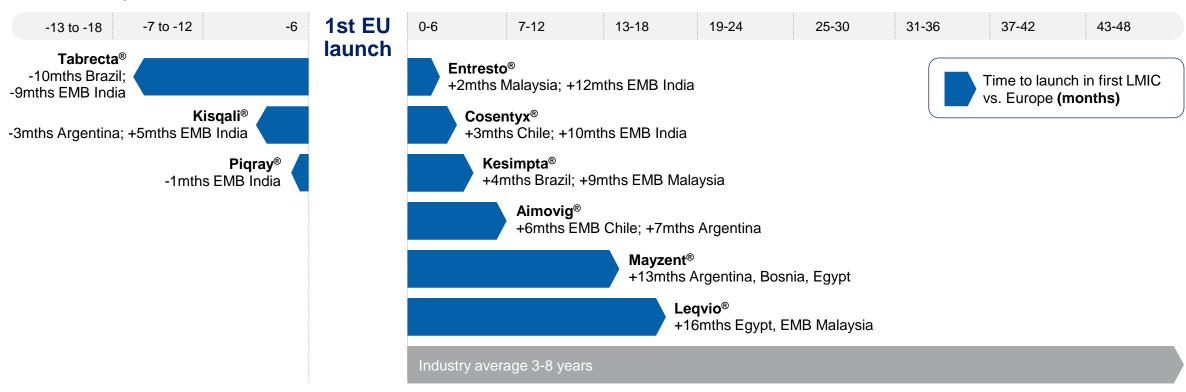
ATOM – Access to Oncology Medicines. 1. vs. 2019 baseline; target linked to sustainability-linked bond. 2. Novartis granted a "freedom to operate" license ahead of patent expiry in multiple LMICs for nilotinib in chronic myeloid leukemia.



... helping reduce time-to-launch in LMICs and support inclusive access

Significantly reducing time-lag for new launches in LMICs to average 4-8 months vs. industry of 3-8 years

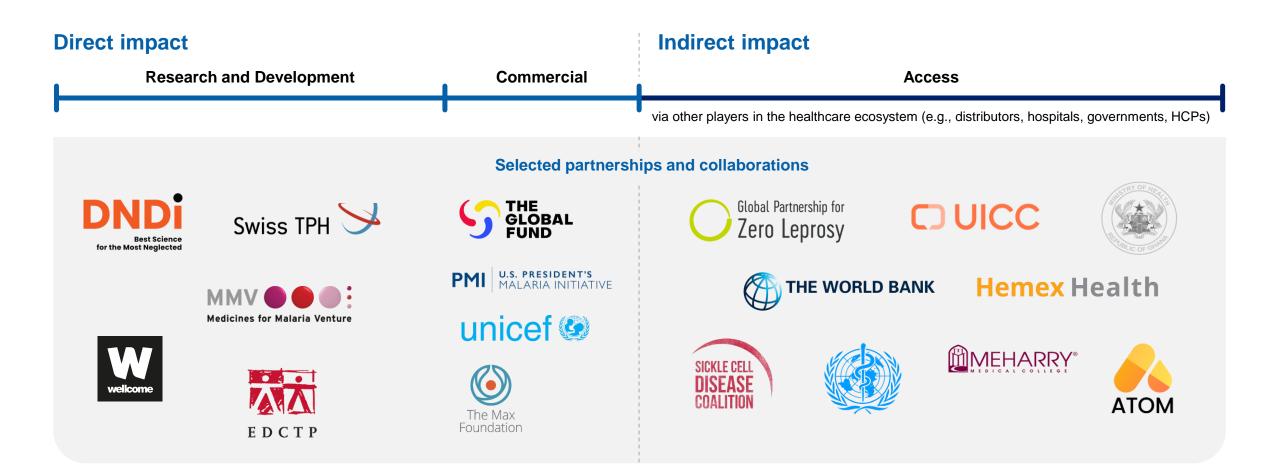
Selected examples



EMB – Emerging market brand. LMIC – low- and middle-income country. Mths – Months. Sources: Information based on internal analysis and IQVIA data for launch dates.



In a complex healthcare ecosystem, partnerships and collaborations amplify our impact and access efforts



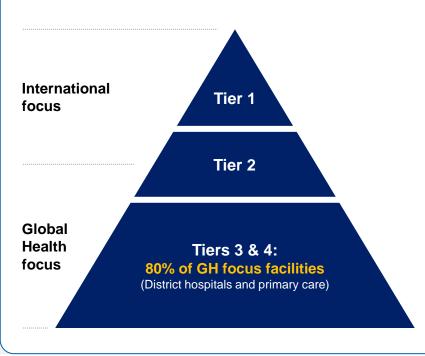
Our Cung Song Khoe program is a sustainable model creating value for patients and the business in Vietnam...



High unmet need in LMICs

- NCDs on the rise, with cardiovascular (CV) disease the largest cause of death and disability globally¹
- >75% of CV deaths occur in LMICs²
- NCDs underfunded, receiving only 1-2% of global financing investment for health³

Global Health and International complementing efforts to improve health outcomes across socio-economic tiers in Vietnam



Global Health complements core business by targeting underserved territories/ patients typically not reached

>200k patients reached per year

~USD 5m sales generated per year

World Bank signed co-funding partnership of **USD 10m** to scale health systems model



CVD – Cardiovascular diseases. LMIC – low- and middle-income country. NCD – Non-communicable disease. 1. Access to Medicine Foundation. 2. WHO NCDs 2022. 3. WHO Global NCD Compact 2022.



... with plans to further scale over the next five years

Goal of scaling up innovative partnerships...



5 years



10 countries



USD 175m+ investment

Focus on **CVDs** and potentially other unmet local needs where Novartis can make unique contribution



Next wave in LMICs/UMICs with an initial focus on Latin America, Asia Pacific, South Africa

LMIC – low- and middle-income country.
UMIC – Upper- and middle-income country.

... to create sustainable impact

Improve and extend patients' lives by...

Improving diagnosis of people with/at risk of CVDs

Strengthening linkage to care and increasing disease control

Reducing CV events (strokes, myocardial infarctions)

... while allowing Novartis to reach patients **not reached** through traditional channels



With Beacon of Hope, we are breaking down barriers to health inclusion to better reflect the communities we serve in the US

Trial participants should represent the patients that will use the medical innovations

However...

52% of US trials occur in **1.5%** of the zip codes¹

39% of US population comprised of racial/ethnic minorities, but only account for **2-16%** of clinical trial participants²

Beacon of Hope initiative

10-year collaboration in US to co-create solutions for health equity

Novartis US Foundation initiated and leads, USD 50m contribution

26 Historically Black Colleges/Universities (HBCUs)

Supporting establishment of clinical trial Centers of Excellence (CoEs)

1200 scholarships over 10 years, mentorship and internship

Supporting research in health inequity, impact of environment on health









Key accomplishments in first 3 years

Building and strengthening critical clinical trial infrastructure needs at 4 HBCUs

Launched 2 research CoEs at Morehouse School of Medicine

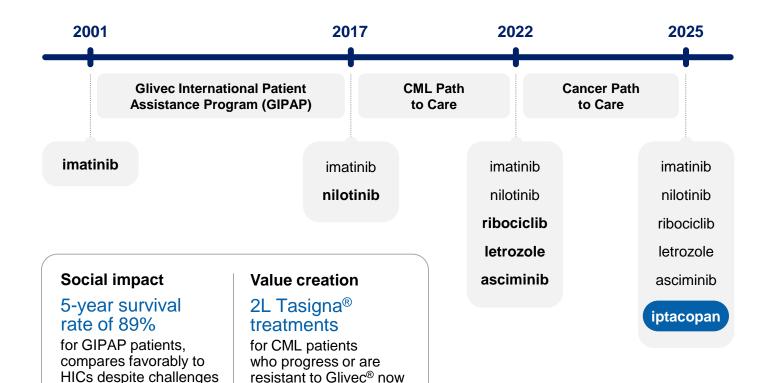
Clinical trial CoE partners managing **60+** trials

Within Development, 100% of our US Phase 3 studies have evaluated D&I principles³ in feasibility planning

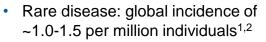
1. Clinical Trial Diversification Better Practices. Trans Celerate. 2. USC researchers rise to the challenge of improving diversity in clinical trials. 3. D&I principles: Race/ethnicity/gender epidemiology variances for the indication are considered during feasibility planning and trial recruitment.



Our Max Foundation collaboration is building on success in cancer care, expanding to include iptacopan for underserved PNH patients in 2025



Unmet need in PNH





 Without treatment, PNH substantially reduces survival3

Building on 20-year collaboration in expanding access to complex cancer treatments

- Leverages established network of HCPs and hospitals for efficient distribution, reached >100k patients to date
- Builds on recent contributions: Scemblix[®] in CML, Kisqali® in mBC

Potential outcome/impact

- >50 countries in scope for iptacopan PNH
- Improvement in HCP capabilities
- Increased diagnosis and treatment

CML – Chronic myeloid leukemia. HCPs – Healthcare providers. 2019:134:3407. 3. Socié G et al. Intern Med J 2016:46:1044-53.

EClinicalMedicine, 2020 Jan 26:19:100257.

HICs – High-income countries. mBC – Metastatic breast cancer. PNH – paroxysmal nocturnal hemoglobinuria. 1. Hill A et al. Nat Rev Dis Primers 2017;3:17028. 2. Jalbert JJ et al. Blood



of delivering cancer

care in LMICs4

aovernment

financed by Ethiopian

In Sub-Saharan Africa, we have optimized our business model to expand access to innovative medicines while maintaining financial sustainability

Pre-2019 2019-2024 2024-onwards Focus on profit Focus on patient reach **Focus on impact** Legacy organization driven by financial New strategy to address high unmet needs, As a focused **innovative medicines** company. metrics such as profit focusing on patient reach prioritizing areas that align with core expertise Operating model prone to generic Focus on access, facilitated by broad Dual approach towards NTDs and NCDs competition and macro environment portfolio including generics (especially CVD) Pioneering new business models that synergize with core business



Driving financial sustainability, whilst broadening our impact, in a manner that mitigates risk. 2020-2023 patient reach CAGR +6% (innovative medicines excl. Global Health programs).

CVD – Cardiovascular diseases. NCD – Non-communicable disease. NTD – Neglected tropical disease



We remain focused on tackling increasing disease burdens brought on by climate change...

Novartis portfolio aligns well with diseases where there is strong evidence of increasing burden

Scientific literature (meta) review to assess the projected future impact of climate change on disease prevalence:

	Confidence ¹	Prevalence ²
Cardiovascular		
NSCLC		
Malaria		
Dengue		
Diarrheal diseases		
Chagas		
Leishmaniasis		
Renal		
Central nervous system		

Many existing Novartis efforts already address the impacts of climate change on health

Integration into innovation

USD 250m R&D investment for malaria, neglected tropical diseases

Integration into access

Populations anticipated to be severely impacted by climate change e.g. Sub-Saharan Africa, mitigation of risk factors in CVD



Support of health system partners



Working with SMI to decarbonize patient care pathways



Rwanda Ministry of Health to integrate population health model into primary care



CVD – Cardiovascular disease. NSCLC – Non-small cell lung cancer. SMI - Sustainable Market Initiatives. 1. Scientific agreement (High – 100% studies reporting same finding, Medium – >50%) and evidence (High - 5+ studies, Medium <5 studies). 2. Disease Prevalence: Low 0-500 per 100,000, Medium 500 – 2,500 per 100,000, High 2,500+ per 100,000.

... and continue to strengthen our leading pipeline against neglected tropical diseases

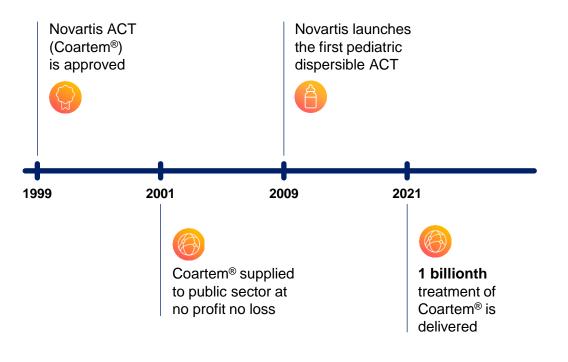
Indication	Target	Discovery Preclinical Phase 1 Phase 2 Phase 3		
Malaria	Unknown / novel	Ganaplacide / lumefantrine (KLU156) ^a • First novel malaria drugs combination		
Malaria	Unknown / novel	Triple combination therapy ^a to advance to phase III trials in decades		
Severe malaria	PfATP4	Cipargamin (KAE609) oral and IV° • Potent drug candidate for single dose cure		
Malaria	Unknown	INE963 oral and IV ^a • Fast-acting drug candidate in advanced trials		
Leishmaniasis	Proteasome	LXE408 ^b for uncomplicated and severe malaria		
Dengue	NS4B	Fast-acting novel malaria drug candidate with		
Chagas disease	Proteasome	LXE408 potential for single dose cure		
Cryptosporidiosis	PI4K	◆ Promising drug candidate for leishmaniasis;		
Malaria	Unknown / novel	IWY357 current options are toxic & poorly effective		
Sickle cell disease	Undisclosed	Potential first dengue-specific therapy; has activity across serotypes		
Chagas disease	Topo II			
Chagas disease	Topo II	Approved medicines have significant toxicity and limited demonstrated clinical benefit		
Dengue	Multiple			
Pandemic preparedness	Multiple ²	 Most advanced drug candidate designed specifically for cryptosporidiosis Fast-acting anti-malarial with high barrier to resistance 		
Malaria radical cure	Hypnozoite			
Sickle cell disease ^{1,d}	Undisclosed	and potential for single dose cure as part of combination therapy		
Novel oral therapy with first- and best-in-class to achieve functional cure		 Novel oral therapy with first- and best-in-class potential to achieve functional cure 		

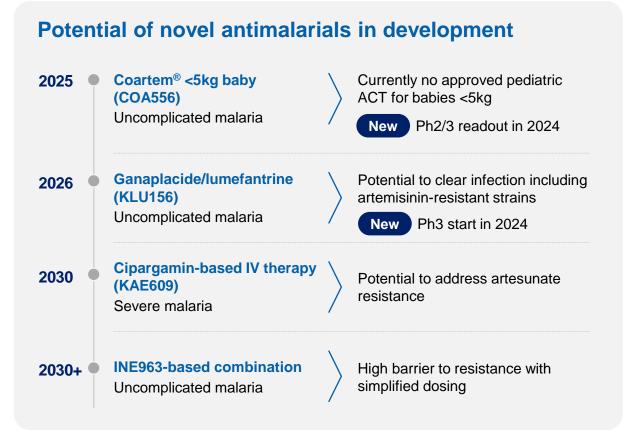
^{1.} Gene therapy. 2. Henipaviruses, coronaviruses. Developed with collaboration or funding from a Medicines for Malaria Venture, Drugs for Neglected Diseases Initiative, Wellcome and Bill & Melinda Gates Foundation.



Our innovative pipeline in malaria reflects continued commitment over our 25+ year legacy

Novartis legacy in malaria over 25+ years





ACT – Artemisinin-based combination therapies. NTDs – neglected tropical diseases. COA556 & KLU156 are developed in collaboration with the Medicines for Malaria Venture, KAE609 is developed with support from the Wellcome Trust. COA566, KLU156 & KAE609 are developed with financial support from the European & Developing Countries Clinical Trials Partnership. Planned launch date shown for Coartem < 5kg baby; other dates represent best-estimates of submission to Health Authorities.

Beyond malaria, we have one of the industry's broadest pipelines addressing unmet needs in children

2.4bn

people in the world are children under age 18, equivalent to 29% of the global population¹

~50%

of medicines used in children have not been adequately studied in children²

Pediatric formulations

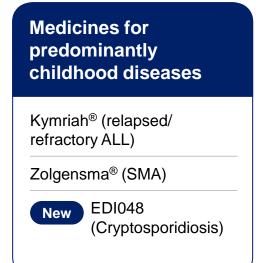
are often not available, significantly impairing safe and effective access to medicines³

Pharmacokinetic differences

exist in children of varying ages and may have significant implications for drug distribution, response, and potential adverse effects³

93 pediatric studies⁴; 73% of our medicines (vs. 50% of FDA benchmark⁵) are labeled for use in pediatric population or have ongoing pediatric studies

Examples







AHUS - Atypical Hemolytic Uremic Syndrome. ALL - acute lymphoblastic leukemia. C3G - Complement 3 glomerulopathy. CML - Chronic myeloid leukemia. IC-MPGN - Idiopathic Immune Complex Mediated Membranoproliferative Glomerulonephritis.

PROS - PIK3CA-related overgrowth spectrum. SMA - Spinal muscular atrophy. 1. <a href="https://data.unicef.org/how-many/h

2012-2018 - PMC.

Our greatest contribution to society is in advancing innovation and access to medicines

Creating sustainable impact

Value creation

Innovation and access to medicines

Future-proofing pipeline to address unmet need

Enabling access to innovative medicines

Dedicated Global Health unit

Human Capital

Diversity, equity & inclusion

Culture

Talent

Risk mitigation

Environmental Sustainability

Climate

Nature

Ethical **Standards**

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Governance. transparency, non-financial reporting

Consistent industry-leading performance across priority ESG ratings

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Environmental sustainability and supply chain resilience

Steffen LangPresident, Operations



With climate change and health intrinsically linked, pharmaceutical companies have a role to play in both climate risk mitigation and adaptation



above pre-industrial level likely to be exceeded in the next 5 years¹

100m

tons of CO₂ emissions potentially generated by clinical research, equivalent to yearly emissions of Belgium³ 250,000

additional deaths per year are expected to be caused by climate change between 2030 and 2050⁵

~5%

of GHG emissions contributed by the healthcare sector²

77

countries have committed within WHO ATACH to develop climate resilient and low carbon, sustainable health systems⁴

>50%

of all infectious diseases are aggravated by climate change⁶

World Meteorological Organization 2024 report.
 Lancet Countdown 2019 report on health and climate change.
 Sustainable Healthcare Coalition, Making Clinical Trials Sustainable, https://shcoalition.org/clinical-trials/.
 World Meteorological Organization, Making Clinical Trials Sustainable, https://shcoalition.org/clinical-trials/.
 World Health Organization 2023 fact sheet on climate change.
 Nature Climate Change 2022 review.

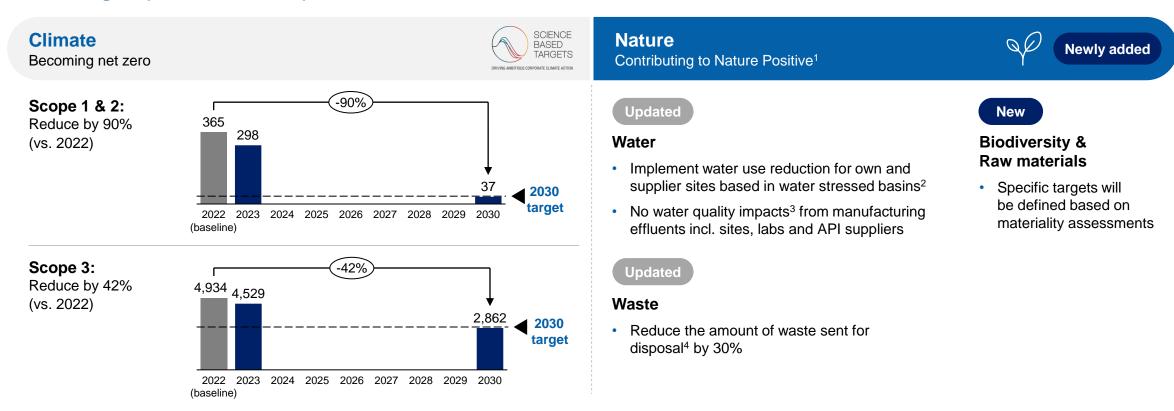
We are making significant progress toward our 2025 targets, having already achieved our water and waste reduction goals

	2025 target	2024 target	2024 9M¹			
	Carbon neutral in own operations (Scope 1 & 2) ²	-70%	-69% (-18% vs. 2023))(Our focus is on achieving absolute emissions reduction through energy efficiency, renewable electricity, thermal decarbonization, and neutralizing residual emissions via biomethane certificates and carbon removal offsets On-track Already achieved 2025 targets	
Climate	Environmental criteria in all supplier contracts ³	70%	76%			
\Diamond	Water consumption reduced by half in our operations	-50%	-56% (-7% vs. 2023)			
Water	No water quality impacts from manufacturing effluents ⁴	Own sites: 95% Suppliers: 90%	97% 95%			
(((\(\delta\))	Eliminate PVC in secondary and tertiary packaging	90%	87%			
Waste	Waste disposal reduced by half in our operations	-65%	-70% (-13% vs. 2023)			

^{1.} Q3-2024 performance vs. 2016 baseline is based on rolling 12 months (Q4-2023 to Q3-2024). 2. Percentage reflects absolute reduction from energy sources; carbon neutrality allows for neutralization of emissions that cannot be further reduced. 3. % of Scope 3 emissions covered by environmental criteria in suppliers' contracts. 4. Assessment based on the water maturity ladder for own sites and prioritized suppliers, target refers to L3 achievement (L1: training, legal compliance, L2: quantification and risk assessment, L3: PEC/PNEC<1).

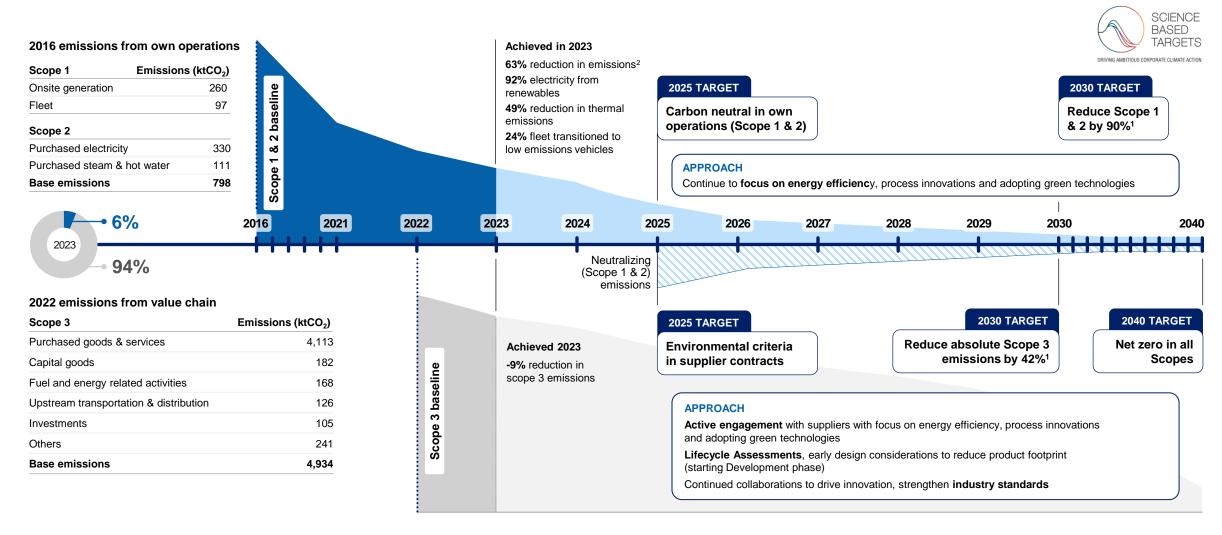
Working towards our 2030 climate targets and newly added Nature pillar

2030 targets (vs. 2022 baseline)



^{1.} Nature Positive Initiative defines "Nature Positive" as "Halt and Reverse Nature Loss by 2030 on a 2020 baseline and achieve full recovery by 2050" (Global Biodiversity Framework 2022).
2. Basin-specific targets will be established for material sites in own operations and upstream suppliers based on Science Based Targets Network guidance.
3. All own sites and labs; key API suppliers should meet our water quality standard of PEC/PNEC<1.
4. We already reduced waste by ~63% by 2022 vs. 2016 and we further aim to reduce our waste by 30% by 2030 vs. 2022 (c.75% reduction vs. 2016).

Transitioning to net-zero by 2040 with a clear roadmap across the value chain



^{1.} Vs. 2022 baseline. 2. 69% reduction in Scope 1 & 2 emission reduction in 2024 9M



Actively engaging with suppliers and collaborating with industry peers as we transition towards net zero

Onboarding



- Integrating Environmental Sustainability (ES) criteria into supply contracts with a standard weighting
- 76% of our Scope 3 emissions covered with ES criteria (goal of achieving full coverage by end 2025)

Engaging



- Strengthening Scope 3 reporting: plan to collect actual emission data directly from our suppliers
- Launched SiGREEN¹: invited
 200+ prioritized suppliers to share
 product-specific emissions data

Partnering



- Leveraging partnerships such as **ENERGIZE**² **program** to support pharma suppliers
- Established common minimum sustainability sector standards³



Key challenges remain: Varying supplier maturity in prioritizing sustainability, limited availability of green technologies, absence of a unified climate policy across countries

SiGREEN is a Siemens-based digital platform rolled out in 2024 to collect supplier emissions data for products and services procured by Novartis.
 ENERGIZE, a program founded by Novartis and 8 other peers during COP26, aims to increase access to renewable energy for suppliers.
 Through Sustainable Market Initiatives and Pharma Manufacturing Forum groups to collectively influence our shared suppliers

We have conducted a technical assessment of our direct operations and upstream supply chains following the TNFD approach

Key insights



Contributing to nature positive

>50% of our sites are near nature-sensitive areas

Our progress on climate, waste, water aligns with the TNFD framework

- Direct operations <5% of the impact¹, covered by existing environmental sustainability strategy
- Upstream supply chain >95% of the impact, driven by land use, water withdrawals, and Scope 3 emissions
- Downstream and end-of-life analysis is ongoing with focus on distribution, PiE, and product end-of-life use

In addition to our work on climate, water and waste, we plan to:

Biodiversity

Conduct nature assessments at priority sites in close proximity to nature-sensitive area. Where material, establish a nature management plan

Site location analysis



Raw materials

Implement sustainable sourcing for prioritized commodities, piloting paper-based packaging first

Commodity deep-dives



PiE – Pharmaceuticals in the Environment. TNFD – Taskforce for Nature related Financial Disclosures.

To secure our future impact, we must ensure supply chain resilience...

Resilient supply chain is critical to be agile and responsive to market disruptions and ensure continued supply of medicines to our customers and patients

Mitigating actions

Diverse network with dual supply



Maintain a critical mass of internal supply network which is complemented with broad external supplier partnerships

>80%

Dual supply points for key brands

Product centricity



Dedicated product management and supply risk management ensure supply continuity for key brands

>95%

Sales supported by dedicated product management team

Strategic inventory



Adequate level of finished goods inventory and stock policies across the value chain and in top markets

>3.5 months

Inventory coverage of finished goods for key brands

Adequate capacity



Strong capacity planning process in place to anticipate demand and secure supply incl. make vs. buy decisions

>99.8%

Customer Service Level YTD1

1. Year to date 2024.



... and continuously work towards greater efficiencies

Potential to scale Al across Operations, with effective enterprise data management and digitization of processes

Al and automation select use-cases

Plan

Al for sales and operations planning

Constraint planning with AI



Source

Contract demand management

Indexing material master management



Make

Manufacturing yield optimization

Predictive maintenance



Test & Release

Automated visual inspection

Automatic deviation report generation



Deliver

E2E supply chain optimization

Air to sea program



Enable

Standard operating procedures chatbot

Operations technology security chatbot

Al enabled CCTV

HSE

chatbot



Pre-requisites to scale Al

Enterprise data management

Data scoping, critical data elements prioritization, data quality tracking (led by the enterprise data owner)

Process digitization

Process mapping, digitization maturity and planning, benefits tracking (led by the global process owner)

Conclusion

Lutz HegemannPresident, Global Health



We are making progress on our ESG targets and sustainability-linked bond commitments

ESG Pillar	Mid-term public targets/aspirations (selected)	2024 target	2024 Q3 actual
	+200% patient reach in LMICs with Strategic Innovative Therapies by 20251 (1.6m) - bond target	1.4m	● 1.4m
Innovation & Access	+50% patient reach with Global Health flagship programs ² by 2025 ¹ (22.6m) - bond target	22.6m	● 18.0m
	100% of new launches have a global access strategy	100% of pre-defined launches	On track
Human Capital	Gender balance in management (maintain EPIC pledge commitment) ³	48-52%	• 48%
	Carbon neutral (scope 1 and 2 emissions) by 2025 ⁴	-70% ⁵	• -69%
Environmental Sustainability	Waste disposal reduced by 50% by 2025 ⁴	-65% ⁵	• -70%
	Eliminate PVC in packaging ⁵ by 2025 ⁴	-90% ⁵	● -87%
	Water consumption reduced by half in our operations by 2025 ⁴	-50% ⁵	• -56%

On track Met 2025 Target

EPIC – Equal Pay International Coalition. LMIC – Low-income and lower-middle income countries. PVC – Polyvinyl Chloride. 1. vs. 2019 baseline; target linked to sustainability-linked bond. 2. Malaria, Leprosy, Chagas disease, Sickle Cell Disease. 3. Renewed EPIC pledge from 2024. All employment decisions at Novartis are based on job-related factors, including the skills, qualifications, and experience of the individual, without regard to gender, race, ethnicity, or any other personal characteristics unrelated to the job. As a global company, Novartis complies with the laws of all jurisdictions within which it operates. 4. vs. 2016 baseline. 5. Defined as secondary & tertiary packaging; primary packaging when feasible.

Adjusting our 2024 disclosure strategy, we are well-positioned to meet the requirements for non-financial disclosure and due diligence regulations

Selected regulations ¹	Applicable	Key requirements	Status
Swiss Article 964 Transparency on Non-financial	FY 2023	Say on non-financial reporting at AGM; TCFD reporting (FY2024)	On track: Reporting in accordance with TCFD since 2020
EU Corporate Sustainability Reporting Directive (CSRD)	FY 2025	Double materiality analysis will determine disclosures with limited assurance ^{2,3}	On track: Implementation ongoing for 1st Sustainability Statement in 2026
EU Taxonomy	FY 2025	Disclosure of sustainable ('green') share of eligible and aligned revenue, CAPEX, and OPEX	On track: Eligibility and alignment pilot assessments ongoing
EU Corporate Sustainability Due Diligence Directive (CS3D)	FY 2027	Human rights, environmental due diligence ⁴	On track: Strengthening existing human rights, environmental due diligence
EU Pay Transparency Directive	FY 2027	Expanded scope of pay transparency, pay equity analysis, gender pay gap, covering total pay	On track: Committed to make this our global minimum standard

TCFD – Task Force on Climate-related Financial Disclosures 1. Other regulations include: California Climate Disclosure Bill (disclose value chain emissions and climate-related financial risks). 2. Two cross-cutting, ten topical sector-agnostic standards. 3. EU Commission plans to publish a feasibility assessment for moving to reasonable assurance by 2028. Inclusion of sustainability data into the Annual Report is not applicable to non-EU companies like Novartis. 4. Across own operations, chain of activities (upstream, from business partners to raw material sourcing; downstream, distribution, transport, storage).



Conclusions

We are committed to maximize our **social impact** by advancing **innovation** and **access** to medicines



To secure our future impact, we are ensuring environmental sustainability and supply chain resilience



We are making progress on our **ESG goals** and nonfinancial **disclosure** requirements



Q&A panel

Lutz Hegemann

President, Global Health



Steffen Lang

President, Operations



Mavic Cuevas

Head ESG, Investor Relations

