Global Pharmaceutical Overview

Jennifer Taubert
Executive Vice President,
Worldwide Chairman, Pharmaceuticals
Cautions concerning 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, market position and business strategy. The viewer 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 unexpected clinical trial results, additional analysis of existing clinical data, uncertainty of clinical success and obtaining regulatory approvals; uncertainty of commercial success for new and existing products; the impact of business combinations and divestitures; challenges to patents; the impact of patent expirations; the ability of the company to successfully execute strategic plans, including restructuring plans; 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, global health care reforms and import/export and trade laws; 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. 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 December 30, 2018, including in the sections captioned “Cautionary Note Regarding Forward-Looking Statements” and “Item 1A. Risk Factors,” in the company’s most recently filed Quarterly Report on Form 10-Q and in the company’s subsequent 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. 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 can be found in the accompanying financial schedules of the earnings release and the Investor Relations section of the Company’s website at www.investor.jnj.com.

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During the course of this presentation, we will discuss a number of products and compounds developed in collaboration with strategic partners, licensed from other companies, or funded by governmental or non-profit organizations. Following is an acknowledgment of those relationships:

### Cardiovascular & Metabolism/Other

<table>
<thead>
<tr>
<th>Product</th>
<th>Collaborators</th>
</tr>
</thead>
<tbody>
<tr>
<td>INVOKANA / INVOKAMET / VOKANAMET</td>
<td>Mitsubishi Tanabe Pharma Corporation; Gilead Sciences, Inc.; JNJ - 5111 licensed from Hammi Pharmaceutical Co., Ltd.</td>
</tr>
<tr>
<td>XARELTO co-developed with Bayer AG, JNJ - 5111 licensed from Hammi Pharmaceutical Co., Ltd.</td>
<td>Aprocitentan licensed from Isidora; JNJ-3093 co-developing with Bristol-Myers Squibb; Refinat assets (Achromobiosis: AAV-CNGA3, AAV-CNGB3) and (X-Linked Retinitis Pigmentosa: AAV-RPGR) licensed from MeiraGTx; Intregain therapeutics in collaboration with Morphic Therapeutics; Metabolic research discovery in collaboration with University of California San Diego.</td>
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</tbody>
</table>

### Immunology

<table>
<thead>
<tr>
<th>Product</th>
<th>Collaborators</th>
</tr>
</thead>
<tbody>
<tr>
<td>REMICADE and SIMPONI</td>
<td>Mitsubishi Tanabe Pharma Corporation, as well as Schering-Plough (Ireland) Company; a subsidiary of Merck &amp; Co., Inc.; TREMFYA discovered using MorphoSys AG antibody technology; VE202 licensed from Vedanta Biosciences, Inc.; JNJ-4500 (anti-NKG2D) licensed from Novo Nordisk; JNJ-4238 (PTG200) licensed from and co-developing with Protagonist Therapeutics, Inc.; JNJ-7752 (MBS2320) under option from Itoenso Ltd.; JNJ-8398 (TD-1473) co-developing with Theravance Biopharma Ireland Limited.</td>
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</table>

### Infectious Diseases & Vaccines

<table>
<thead>
<tr>
<th>Product</th>
<th>Collaborators</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPLERA / EVIPLERA / ODEFSEY, SYMTUZA PREZCOBIX / REZOLSTA fixed-dose combination products developed in collaboration with Gilead Sciences, Inc.; JNJ-0535 developing in collaboration with ichor Medical Systems; JNJ-7752 (MBS2320) under option from Itoenso Ltd.; JNJ-4238 (TD-1473) co-developing with Theravance Biopharma Ireland Limited.</td>
<td>Mitsubishi Tanabe Pharma Corporation; Long acting HIV injectable treatment regimen of rilpivirine and cabotegravir developed in collaboration with ViiV Healthcare Ltd.; Long-acting HIV injectable treatment regimen of rilpivirine and cabotegravir developed in collaboration with ViiV Healthcare Ltd.; Pimodivir developed from Vertex Pharmaceuticals, (this project has received federal funding from BARDA, part of the U.S. Department of Health and Human Services’ Office of the Assistant Secretary of Preparedness and Response, under contract number HHSO100201500014C); Other Transaction Authority agreement No.HHSO100201700018C with BARDA, part of the U.S. Department of Health and Human Services’ Office of the Assistant Secretary for Preparedness and Response, to develop a comprehensive portfolio of therapeutics and vaccines to protect communities in the event of an influenza pandemic and other infectious disease threats.; JNJ-0535 developing in collaboration with Ichor Medical Systems; JNJ-4964 (TLR Agonist) licensed from Chia Tai Tiangying Pharmaceutical Group Co., Ltd.; JNJ-3989 licensed from Arrowhead Pharmaceuticals Inc.; Worldwide research collaboration and license with Locus Biosciences Inc., to develop, manufacture and commercialize bacteriophage products generated using Locus’ recombinant CRISPR/Cas3 Phage platform; JSC Pharmstandard manufactures and distributes SIRTURO in Russia and other countries in the region, including the Commonwealth of Independent States (CIS); Since 2005, Janssen Vaccines &amp; Prevention B.V. has been participating in the NIH-supported Integrated Preclinical/Clinical AIDS Vaccine Development (IPCAVD) program under grants AI066305, AI078526 and AI096040, in collaboration with Professor Dan Barouch at Beth Israel Deaconess Medical Center (BIDMC); Janssen’s HIV vaccine program has also received funding or support from the United States Military HIV Research Program (MRHP) at the Walter Reed Army Institute of Research (WRAIR), with the Henry M. Jackson Foundation for the Advancement of Military Medicine (HJF); the Ragon Institute; and the International AIDS Vaccine Initiative (IAVI); The phase 2b proof-of-concept efficacy study Imbokodo (HVTN 705/HPX2008) for the HIV prophylactic vaccine received co-funding from two primary partners, the Bill &amp; Melinda Gates Foundation and National Institute of Allergy and Infectious Diseases (NIAID); Additional partners providing support include the United States Military HIV Research Program at the Walter Reed Army Institute of Research, U.S. Army Medical Materiel Development Activity, and the Ragon Institute of Massachusetts General Hospital (MGH), Massachusetts Institute of Technology (MIT) and Harvard. The study is conducted at clinical sites coordinated by the NIAID-funded HIV Vaccine Trials Network (HVTN); The South African Medical Research Council (SAMRC) is helping to implement HVTN 705/HPX2008 in South Africa; License and collaboration agreements with Bavarian Nordic to leverage their MVA-TN technology and DNA-based vaccine technologies in the development and commercialization of potential new vaccine regimens against hepatitis B virus (HBV) and the human immunodeficiency virus (HIV-1); JNJ-1623 VAC18623 (HPV vaccine) developed in collaboration with and licensed from Bavarian Nordic A/S; IPV vaccine with funding from Bill and Melinda Gates Foundation; Zika vaccine in collaboration with Beth Israel Deaconess Medical Center (Harvard Medical School); License and collaboration agreement with GSK (Glycovaxyn) for the development of ExPEC.</td>
</tr>
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</table>
Strategic partnerships, collaborations and licensing arrangements

During the course of this presentation, we will discuss a number of products and compounds developed in collaboration with strategic partners, licensed from other companies, or funded by governmental or non-profit organizations. Following is an acknowledgement of those relationships:

### Neuroscience

INVEGA SUSTENNA / XEPLION / INVEGA TRINZA / TREVICTA includes technology licensed from Alkermes Pharma Ireland Limited; RISPERDAL CONSTA developed in collaboration with Alkermes, Inc; Tau vaccine developing in collaboration with AC Immune SA; JNJ-7922 (Orexin-2 antagonist) developing in collaboration with Minerva Neurosciences, Inc.

### Oncology

BALVERSA discovered in collaboration with Astex Pharmaceuticals, Inc.; ERLEADA is licensed from The Regents of California and Memorial Sloan Kettering Cancer Center; DARZALEX licensed from Genmab A/S; YONDELIS developed in collaboration with Pharma Mar S.A.; IMBRUVICA developed in collaboration and co-marketed in the U.S. with Pharmacyclics, LLC, an AbbVie company; DACOGEN developed and commercialized in collaboration with Eisai Inc. and Otsuka Pharmaceuticals Co. Ltd.; ZYTIGA licensed from BTG International Ltd.; VELCADE developed in collaboration with Millennium: The Takeda Oncology Company; PROCRIT / EPREX licensed from Amgen Inc.; cusatuzumab licensed and developing in collaboration with AC Immune SA; JNJ-7922 (Orexin-2 antagonist) developing in collaboration with Minerva Neurosciences, Inc.

### Pulmonary Hypertension

UPTRAVI (selexipag), discovered and initially developed by Nippon Shinyaku, a worldwide (except for Japan) license and co-development and co-promotion agreements with Nippon Shinyaku (co-promotion in Japan) and OPSUMIT license agreement with Nippon Shinyaku in Japan; Strategic collaboration with Analytics 4 Life, to investigate the use of machine learning diagnostic imaging technology, to develop a single, non-invasive test to diagnose patients with all types of pulmonary hypertension.

### Global Public Health

Janssen’s Monovalent Ebola Vaccine is developed in collaboration with Bavarian Nordic A/S, and MVA-BN-Filo® is licensed-in from Bavarian Nordic A/S. The program has benefited from funding and preclinical services from the National Institute of Allergy and Infectious Diseases (NIAID), part of NIH. NIAID support included 2 product development contracts starting in 2008 and 8 pre-clinical services contracts. This program is also receiving funding from the IM2C Joint Undertaking under EBOVAC1 (grant nr. 115854), EBOVAC2 (grant nr. 115861), EBOVAC3 (grant nr. 800176), EBOMAN (grant nr. 115850) and EBDAC (grant nr. 115847). The IM2C Joint Undertaking receives support from the European Union’s Horizon 2020 research and innovation program and the European Federation of Pharmaceutical Industries and Associations (EFPIA). Further funding for the Ebola vaccine regimen has been provided by the BARDA, within the U.S. Department of Health and Human Services’ Office of the Assistant Secretary for Preparedness and Response, under Contract Numbers HHSO100201700013C and HHSO100201500008C. The initial work on Ebola was conducted which was extended from 2002 until 2011, 2002 and 2007 via a Cooperative Research and Development Agreement (CRADA is AI-0114) between Janssen/Crucell and the Vaccine Research Center (VRC)/NIAID, part of the NIH. Janssen/Crucell have licenses to much of VRC’s Ebola IP specific for human adenovirus under the Ad26/Ad35 Ebola vaccine CRADA invention. VAC9120 (Filovirus multivalent vaccine) developed in collaboration with Bavarian Nordic; funding: NIH Division of Microbiology and Infectious Diseases (DMID), under Contract Number HHSN272200800056C.
Creating a future where disease is a thing of the past.

We are Janssen, the Pharmaceutical Companies of Johnson & Johnson. Bold thinkers. Big dreamers. Fearless advocates on behalf of patients. So that one day, the world’s most daunting diseases will be found only in the pages of history books.
Global pharmaceutical market continues to be attractive and dynamic

**$1.5T**

Pharmaceutical market value by 2023\(^1\)

\(~4\%\)

Estimated branded market growth 2018–2023\(^2\)

49%

Increase in NME approvals 2014–2018 vs. 2009–2013\(^3\)

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### Health care trends

- Global aging population
- New disease insights
- New scientific breakthroughs
- Technology and data science

### Other market dynamics

- Rising cost of health care
- Innovators capturing a shrinking proportion of spending
- Discussions regarding pricing policy
- New players entering health care space

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1. IQVIA Institute, December 2018
2. IQVIA Market Prognosis, Sept 2018; estimate net of discounts
3. US FDA
Well-positioned for success

Deep scientific expertise and commitment to R&D drive our pipeline

**Deep scientific expertise**

- 6 focused therapeutic areas
- 350 current R&D programs
- 30 total Priority Review designations
- 10 total Breakthrough Therapy and PRIME designations

**Sustained R&D investment**

- $8.4B invested in R&D in 2018
- $37B invested over last five years
- 86% more invested in R&D than in Sales & Marketing in 2018

Source: Internal data, April 2019
Well-positioned for success

With world-class commercial capabilities, we deliver for patients

18
new products\(^1\)
approved
since 2011

100%
growth driven by
volume, not price
(2017–2018)

Shape new
treatment paradigms

Enable broad patient access by translating differentiation to value

Drive strong uptake with winning go-to-market strategies

Use data analytics to highlight patient outcomes with real-world evidence

Demonstrate capabilities and expertise as partner of choice

Source: Internal data
1. Includes acquired products
Leading by example — committed to patients and responsible business practices
We have delivered eight years of growth — nearly double the branded market

Sales CAGR (2010–2018)

- **Global Branded Market**: 4.6%
- **Janssen**: 8.9%

**#3** Pharmaceutical company worldwide

**#1** Pharmaceutical company in the US

**#1** Pharmaceutical company globally, based on number of products $1B+4

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1. IQVIA Market Prognosis, 2018
2. EvaluatePharma, March 2019
3. IQVIA Global Branded Market Sales Data, 2018
4. IQVIA MIDAS 2018
Strength of core and launch brands continues to drive growth

**WW Pharm Q1 2019 operational growth vs. PY driven by core brands**

7.9% operational growth

<table>
<thead>
<tr>
<th>Q1 18 Sales</th>
<th>Q1 19 Sales</th>
</tr>
</thead>
<tbody>
<tr>
<td>$9.8B</td>
<td>$10.2B</td>
</tr>
</tbody>
</table>

2019 and beyond

**Above-market growth in Q1 driven by double-digit growth in nine key brands**

We will navigate LOEs, continued pricing pressure and competitive landscape in 2019; anticipate **returning to above-market growth in 2020**

We are well-positioned for **continued above-market, compound annual growth through 2023**
Key catalysts to deliver above-market growth

Drive

Diverse, industry-leading portfolio
Share gains and anticipated 40+ line extensions, 10+ with $500MM+ potential

Deliver

Pipeline of transformational medicines
At least 10 NME filings and/or launches, 2019–2023\(^1\), each with $1B+ potential

Disrupt

To advance next wave of innovation
Disease areas/pathways, data science, new technologies, approaches to external innovation

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1. Peak non-risk-adjusted sales, including partner sales
Key catalysts to deliver above-market growth

**Drive**
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1. Peak non-risk-adjusted sales, including partner sales
Driving above-market growth of our portfolio through 2023 by maximizing uptake and new indications

Fueled by share gains and anticipated 40+ line extensions, 10+ with $500MM+ potential

**Industry-leading portfolio: $1B+ brands**

- Stelara® (ustekinumab)
- Imbruvica® (ibrutinib) capsules
- DARZALEX® (daratumumab)
- Erleada® (apalutamide) 140 mg tablets
- Spravato® (esketamine) nasal spray
- Tremfya® (guselkumab)
- Oprosmit® macitentan tablets 10 mg
- Uptravi® selexipag tablets 200–1200 mg
- Xarelto® rivaroxaban tablets
- Symtuza®
- Simponi® golimumab
- Zytiga® abiraterone acetate
- Remicade® infliximab
- Invega® paliperidone palmitate
- Trevicta® paliperidone palmitate

Non-risk-adjusted projected sales, including partner sales by 2023
STELARA: First-and-only anti-IL-12/IL-23 redefining standard of care

Significant opportunities in GI and Lupus

**Significant advance in CD**
with rapid response and robust durability of remission

**Fastest-growing brand in CD**
with >$2B in sales in second year post-launch

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**STELARA vs. Humira:**
First H2H Ph3b trial in bio-naïve patients

**Positive Ph3 efficacy results**
Filed in US/EU in Dec 2018

**Ph3 trial enrolling**
Potential to be 2nd new MOA for lupus in >50 years

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**Rapid growth in CD builds upon strong PsO/PsA business**

**STELARA WW reported NTS**

- CD
- PsO/PsA

<table>
<thead>
<tr>
<th>Year</th>
<th>CD</th>
<th>PsO/PsA</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>$1,504</td>
<td>$1,504</td>
</tr>
<tr>
<td>2014</td>
<td>$2,072</td>
<td>$1,405</td>
</tr>
<tr>
<td>2015</td>
<td>$2,474</td>
<td>$2,072</td>
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<tr>
<td>2016</td>
<td>$3,232</td>
<td>$3,232</td>
</tr>
<tr>
<td>2017</td>
<td>$4,011</td>
<td>$4,011</td>
</tr>
<tr>
<td>2018</td>
<td>$5,156</td>
<td>$5,156</td>
</tr>
<tr>
<td>2019 Q1</td>
<td>$1,405</td>
<td>$1,405</td>
</tr>
</tbody>
</table>

+28% growth

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1. IQVIA NPA/DDD Volume & LAAD Diagnosis claims as of March 2019 (YTD Growth)
TREMFYA: First-in-class, selective anti-IL-23 with a robust competitive profile

Strong launch performance and investment in new indications

Unrivaled H2H superior efficacy

| vs. Humira¹ | vs. STELARA (inadequate responders)² | vs. Cosentyx (for PASI 90 at Week 48)³ |

Sustained durability of response

Demonstrated via 3-year, long-term extension data⁴

Leading uptake

vs. IL-17 competitors reflects robust profile and unmet need

First-in-class Ph3 trial

Anticipated filing in 2019

Ph2B/3 trial enrolling

H2H study to demonstrate superiority vs. STELARA in CD

Approval-aligned monthly NTB PSO volume

4. Adapted from C.E.M. Griffiths, et al. FCD 2018. † NRI through Week 48, then TFR beyond Week 48; includes patients randomized to TREMFYA at baseline and to placebo who crossed over to TREMFYA at Week 16.
5. IQVIA US on therapy patient claims (LAAD through January 2019)
DARZALEX: First CD38 mAb in multiple myeloma, with market leadership in 2L+

Significant opportunity for growth in 1L MM

5 approved indications
in US, from late-stage to 1L MM

Broad clinical development plan
with new indications: amyloidosis, smoldering MM, retreatment

1L MM

Combo with Revlimid + dex (MAIA)
Transplant ineligible; filed March 2019

1L MM

Combo with VELCADE + thalidomide/dex (CASSIOPEIA)
Transplant eligible; filed March 2019

MM

Subcutaneous infusion ~5 minutes
Filing 2H 2019

Share of total treated patients (US)¹ — Line 2+

1. IntelliVIEW, February 2019 – IntrinsiQ Specialty Solutions™, Inc.
IMBRUVICA: First BTK inhibitor defining a new standard of care in CLL

Leadership in all lines of therapy and in combination regimens

Only preferred treatment in 1L CLL
for all patients as recommended by NCCN guidelines

Unprecedented disease control
demonstrated by 5-year follow-up data in 1L and 2L CLL

Proven efficacy and safety
across 10 indications in CLL, SLL, MCL, WM, MZL, cGvHD

Ph3 trial studying fixed-treatment regimen (IMBRUVICA + venetoclax)
for treatment-naïve patients

Ph3 trial in combination with rituximab
for treatment-naïve, young and fit patients

Select 1L CLL new patient shares (US)¹

1. IQVIA Claims – Feb 2017 – Jan 2019

¹ Selective data for the period February 2017 to January 2019 from IQVIA Claims data, including all patients prescribed IMBRUVICA, and all patients prescribed other first-line treatments, based on select disease-related data from the following NCCN guidelines: CLL, SLL, MCL, WM, MZL, cGvHD.
OPSUMIT and UPTRAVI: Expanding PAH leadership in ERA and prostacyclin markets

Potential for new indications across PH

**OPSUMIT #1**
new-to-brand leader in US in ERA market

**UPTRAVI #1**
new-to-brand leader in US prostacyclin market

**Growth drivers**
Earlier diagnosis/treatment and use of combo therapy

- **41%** of patients start on two drugs
- **19%** of patients are on three drugs

**OPSUMIT**

- **CTEPH**
- Filed in US/EU

**UPTRAVI**

- **CTEPH**
- Global Ph3 trial underway

**OPSUMIT + UPTRAVI + PDE5I**

- **TRIPLE**
- Data anticipated 1H 2020

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1. Internal estimate and earnings reports / SEC
2. Internal estimate and earnings reports / SEC and IMS Health data compiled by Credit Suisse, June 2017

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**Quarterly net trade sales (US)**

<table>
<thead>
<tr>
<th></th>
<th>Q3 2017</th>
<th>Q4 2017</th>
<th>Q1 2018</th>
<th>Q2 2018</th>
<th>Q3 2018</th>
<th>Q4 2018</th>
<th>Q1 2019</th>
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<tr>
<td>OPU22IM</td>
<td>150</td>
<td>200</td>
<td>250</td>
<td>300</td>
<td>350</td>
<td>400</td>
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<tr>
<td>OPU22AVI</td>
<td>100</td>
<td>150</td>
<td>200</td>
<td>250</td>
<td>300</td>
<td>350</td>
<td>400</td>
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Drive
Key catalysts to deliver above-market growth

**Drive**
Diverse, industry-leading portfolio

Share gains and anticipated 40+ line extensions, 10+ with $500MM+ potential

**Deliver**
Pipeline of transformational medicines

At least 10 NME filings and/or launches, 2019–2023\(^1\), each with $1B+ potential

**Disrupt**
To advance next wave of innovation

Disease areas/pathways, data science, new technologies, approaches to external innovation

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1. Peak non-risk adjusted sales, including partner sales
Our robust pipeline is anticipated to deliver at least 10 new medicines with >$1 billion potential*

Select NME approvals & filings in 2019–2023 timeframe

<table>
<thead>
<tr>
<th>2019 approvals</th>
<th>Potential 2019–2023 filings</th>
</tr>
</thead>
<tbody>
<tr>
<td>JNJ-4550 cusatuzumab (Anti CD70 mAb) Acute myeloid leukemia</td>
<td>JNJ-7564 GPRC5D/CD3, JNJ-7957 BCMA/CD3 Regimens for multiple myeloma</td>
</tr>
<tr>
<td>JNJ-4528 BCMA CAR-T Multiple myeloma</td>
<td>JNJ-6372 EGFR/c-Met (Bispecific EGFR and cMET receptor inhibitor) Solid tumor</td>
</tr>
<tr>
<td>JNJ-1937 lazertinib (EGFR tyrosine-kinase inhibitor) Non small cell lung cancer</td>
<td>JNJ-4500 anti-NKG2D (anti-NKG2D mAb) Crohn’s disease</td>
</tr>
<tr>
<td>AAV-CNGB3/CNGA3/RPGR (Gene Therapy) Retinal disease</td>
<td>RSV Vaccine (Ad26.RSV.preF) RSV</td>
</tr>
<tr>
<td>niraparib (PARP inhibitor) Prostate cancer</td>
<td>JNJ-7922 seltorexant (Orexin-2 receptor antagonist) Adjunctive treatment, MDD</td>
</tr>
</tbody>
</table>

* Peak non-risk-adjusted sales, including partner sales
Note: Filings/approvals are in the US or EU, unless otherwise noted. This information is accurate as of the date hereof to the best of Johnson & Johnson’s knowledge. The Company assumes no obligation to update this information.
SPRAVATO: NMDA receptor antagonist offering significant advancement for TRD patients

First new MOA in MDD in decades

30% of patients with MDD become treatment-resistant

6MM patients living with TRD in the US

<15% of TRD patients currently achieve remission

TRD

MDD

Long-term extension study

to assess safety and tolerability; data anticipated in 2021

Suicidal ideation

Ph3 trial underway; filing anticipated in 2019

Convenient administration with nasal delivery system

2. IMS and Truven Health
Key catalysts to deliver above-market growth

**Drive**
- Diverse, industry-leading portfolio
- Share gains and anticipated 40+ line extensions, 10+ with $500MM+ potential

**Deliver**
- Pipeline of transformational medicines
- At least 10 NME filings and/or launches, 2019–2023¹, each with $1B+ potential

**Disrupt**
- To advance next wave of innovation
- Disease areas/pathways, data science, new technologies, approaches to external innovation

¹. Peak non-risk-adjusted sales, including partner sales
Disrupting our approaches to advance the next wave of innovation

Use disease and biological pathways lenses
- Disease Area and Pathway Area Strongholds

Embrace data science
- New biological insights
- Constructing a therapeutic
- Disease expression and progression
- Trial efficiency/effectiveness
- Early and rapid diagnosis
- Predictive analysis

Pursue highly enabling modalities
- Cell therapy
- Gene therapy
- RNA therapeutics

Embed ourselves in the health care innovation ecosystem
- Nurture relationships (biopharma, academia)
- Creative partnerships and collaborations
We are poised to continue to deliver for patients and our business

**Leading brands** with significant growth potential — 40+ line extensions anticipated, 10+ with $500MM+ potential\(^1\)

**Robust pipeline, generating near- and long-term growth** — at least 10 new product filings and/or launches by 2023, each with $1B+ potential\(^1\)

**New technologies** enabling us to disrupt our approaches and **drive our next wave of innovation**

**Source-agnostic** about where next breakthrough therapy may originate — **always seek the best science and partners**

Well-positioned for **continued above-market, compound annual growth** through 2023

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1. Peak non-risk-adjusted sales, including partner sales