November 2021

REGENERON CORPORATE PRESENTATION

REGENERON®

Note Regarding Forward-Looking Statements & Non-GAAP Financial Measures

This presentation includes forward-looking statements that involve risks and uncertainties relating to future events and the future performance of Regeneron Pharmaceuticals, Inc. ("Regeneron" or the "Company"), and actual events or results may differ materially from these forward-looking statements. Words such as "anticipate." "expect." "intend." "blan." "believe." "seek." "estimate." variations of such words, and similar expressions are intended to identify such forward-looking statements. Blanch and similar expressions are intended to identify such forward-looking statements. forward-looking statements contain these identifying words. These statements concern, and these risks and uncertainties include, among others, the impact of SARS-CoV-2 (the virus that has caused the COVID-19 pandemic) on Regeneron's business and its employees, collaborators, and suppliers and other third parties on which Regeneron relies. Regeneron's and its collaborators' ability to continue to conduct research and clinical programs. Regeneron's ability to manage its supply chain, net product sales of products marketed or otherwise commercialized by Regeneron and/or its collaborators or licensees (collectively, "Regeneron's Products"), and the global economy; the nature, timing, and possible success and therapeutic applications of Regeneron's Products and product candidates being developed by Regeneron and/or its collaborators or licensees (collectively, "Regeneron's Product Candidates") and research and clinical programs now underway or planned, including without limitation EYLEA® (aflibercept) Injection, Dupixent® (dupilumab), Libtavo® (cemiplimab), Praluent® (alirocumab), Keyzara® (sarilumab), EykeezaTM (evinacumab), Inmazeb® (atoltivimab, and odesivimab-ebgn), REGEN-COV® (casirivimab and imdevimab), EykeezaTM (evinacumab), Inmazeb® (atoltivimab, and odesivimab-ebgn), REGEN-COV® (casirivimab and imdevimab), EykeezaTM (evinacumab), Inmazeb® (atoltivimab, and odesivimab-ebgn), REGEN-COV® (casirivimab and imdevimab), EykeezaTM (evinacumab), EykeezaTM (evinacu fasinumab, garetosmab, pozelimab, odronextamab, itepekimab, REGN5458, REGN5713-5714-5715, REGN1908-1909, Regeneron's other oncology programs (including its costimulatory bispecific portfolio), Regeneron's and its collaborators' earlier-stage programs, and the use of human genetics in Regeneron's research programs; safety issues resulting from the administration of Regeneron's Product Candidates in patients, including serious complications or side effects in connection with the use of Regeneron's Products and Regeneron's Product Candidates in clinical trials; the likelihood, timing, and scope of possible regulatory approval and commercial launch of Regeneron's Product Candidates and new indications for Regeneron's Products, including without limitation those listed above; the likelihood and timing of achieving any of the anticipated milestones described in this presentation; the extent to which the results from the research and development programs conducted by Regeneron and/or its collaborators or licensees may be replicated in other studies and/or lead to advancement of product candidates to clinical trials, therapeutic applications, or regulatory approval; ongoing regulatory obligations and oversight impacting Regeneron's Products, research and clinical programs, and business, including those relating to patient privacy; determinations by regulatory and administrative governmental authorities which may delay or restrict Regeneron's ability to continue to develop or commercialize Regeneron's Products and Regeneron's Product Candidates: competing drugs and product candidates that may be superior to, or more cost effective than. Regeneron's Products and Regeneron's Product Candidates: uncertainty of the utilization, market acceptance, and commercial success of Regeneron's Products and Regeneron's Product Candidates and the impact of studies (whether conducted by Regeneron or others and whether mandated or voluntary) or recommendations and guidelines from governmental authorities and other third parties on the commercial success of Regeneron's Products and Regeneron's Product Candidates; the availability and extent of reimbursement of Regeneron's Products from third-party payors, including private payor healthcare and insurance programs, health maintenance organizations, pharmacy benefit management companies, and government programs such as Medicare and Medicaid; coverage and reimbursement determinations by such payors and new policies and procedures adopted by such payors; the ability of Regeneron to manufacture and manage supply chains for multiple products and product candidates; the ability of Regeneron's collaborators, licensees. suppliers, or other third parties (as applicable) to perform manufacturing, filling, finishing, packaging, labeling, distribution, and other steps related to Regeneron's Products and Regeneron's Product Candidates; unanticipated expenses; the costs of developing, producing, and selling products; the ability of Regeneron to meet any of its sales or other financial projections or guidance and changes to the assumptions underlying those projections or guidance; risks associated with intellectual property of other parties and pending or future litigation relating thereto (including without limitation the patent litigation and other proceedings relating to EYLEA. Dupixent, Praluent, and REGEN-COV), other litigation and other proceedings and government investigations relating to the Company and/or its operations, the ultimate outcome of any such proceedings and investigations, and the impact any of the foregoing may have on Regeneron's business, prospects, operating results, and financial condition; and the potential for any license or collaboration agreement, including Regeneron's agreements with Sanofi, Bayer, and Teva Pharmaceutical Industries Ltd. (or their respective affiliated companies, as applicable), as well as Regeneron's agreement with Roche relating to the casinyimab and imdevimab antibody cocktail (known as REGEN-COV in the United States and RonapreveTM in other countries) and its REGEN-COV supply agreement with the U.S. government, to be cancelled or terminated. A more complete description of these and other material risks can be found in Regeneron's filings with the U.S. Securities and Exchange Commission. Any forward-looking statements are made based on management's current beliefs and judgment, and the reader is cautioned not to rely on any forward-looking statements made by Regeneron. Regeneron does not undertake any obligation to update (publicly or otherwise) any forward-looking statement, including without limitation any financial projection or guidance. whether as a result of new information, future events, or otherwise.

This presentation uses non-GAAP net income per share, or non-GAAP EPS, and net cash, which are financial measures that are not calculated in accordance with U.S. Generally Accepted Accounting Principles ("GAAP"). These and other non-GAAP financial measures are computed by excluding certain non-cash and other items from the related GAAP financial measures. Non-GAAP adjustments also include the income tax effect of reconciling items. The Company makes such adjustments for items the Company does not view as useful in evaluating its operating performance. For example, adjustments may be made for items that fluctuate from period to period based on factors that are not within the Company's control, such as the Company's took price on the dates share-based grants are issued. Management uses non-GAAP measures for planning, budgeting, forecasting, assessing historical performance, and making financial and performance and making financial and performance into the use of non-GAAP measures provide investors with an enhanced understanding of the financial performance of the Company's core business operations. However, there are limitations in the use of non-GAAP financial measures as they exclude certain expenses that are recurring in nature. Furthermore, the Company's non-GAAP financial measures may not be comparable with non-GAAP financial measures. Any non-GAAP financial measure presented by Regeneron should be considered supplemental to, and not a substitute for, measures of financial performance prepared in accordance with GAAP. A reconciliation of the non-GAAP financial measures used in this presentation is provided on slide 27.

REGENERON

Strong and Growing Core Brands







Period of New Launches



1L Non-Small Cell Lung Cancer and Basal Cell Carcinoma





COVID-19



Homozygous Familial Hypercholesterolemia (HoFH)

A Broad and Diverse Pipeline

Dupixent in pivotal trials for **8** additional **Type 2** diseases

Advancing **immuno-oncology** pipeline and combinations

30+ therapeutic candidates in clinical development

3 REGENERON

Strong Execution in 3Q 2021









3Q21 Total Revenues

+51% growth **+18%** growth excl. COVID-19*

3Q21 Non-GAAP EPSYoY*

+84% growth

R&D Pipeline Advancements



Ph2 results for High Dose Aflibercept in wAMD



Positive Ph3 results in four potential new indications (CSU, PN, EoE, Pediatric AD)

Received approval in asthma for children ages 6 - 11



Positive results when combined with chemotherapy in 1L NSCLC



Positive Ph3 data in Hospitalized patients

BLA accepted for Priority Review

BLA – Biologics License Application; PN – Prurigo Nodularis;
4 E0E – Eosinophilic Esophagitis AD – Atopic Dermatitis; CSU

– Chronic Spontaneous Urticaria; NSCLC – Non-Small Cell

Lung Cancer; wAMD – Wet Aged Macular Degeneration

8221 GAAP revenue: \$3.45B

Revenue attributable to REGEN-COV® and Ronapreve™: \$803.8M

This slide contains investigational products not yet approved by regulatory authorities

REGENERON

REGEN-COV is not approved by the FDA but is authorized for use under an EUA

EYLEA, Dupixent, and Oncology are Core to Diversified Growth Strategy

Specialized programs offer additional growth potential

EYLEA

- Execute and grow in wet AMD and diabetic eye diseases
- Explore high-dose formulation for less frequent dosing
- Pursue gene therapy and other novel approaches

Polyposis: HoFH – Homozygous familial hypercholesterolemia

Dupixent*

- Transform treatment of Type 2 inflammatory diseases
- Realize full potential in AD, asthma and **CRSwNP**
- Execute broad Ph3 & Ph4 development program

Oncology

- Realize potential for best-in-class immunotherapy treatments
- Compete, Enhance, and Extend benefits of immunotherapy to broader patient populations

Specialized growth opportunities:

Infectious Disease COVID-19[^] & Ebola **Antibody Cocktails**

Rare Disease HoFH, C5-mediated diseases†

Allergic Disease Cat. Birch

Genetic Medicine CRISPR/CAS9**, siRNA†

AMD - Age-Related Macular Degeneration; AD - Atopic Dermatitis: CRSwNP - Chronic Rhinosinusitis with Nasal

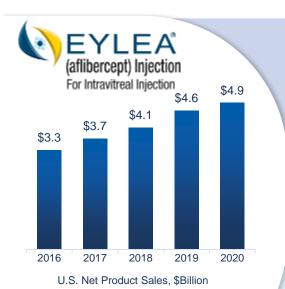
^{*} In collaboration with Sanofi ^ In collaboration with Roche

[†] In collaboration with Alnylam

^{**} In collaboration with Intellia

EYLEA®: Extending Leadership Position

Setting a high bar on efficacy/safety/convenience for current and future potential competition



#1 prescribed anti-VEGF treatment approved for retinal diseases
40+ million doses
administered globally since launch

Extending Category Leadership

- 3Q21 U.S. net product sales of **\$1.47Bn** (+12% YoY)
- Sales gains and favorable demographic trends



Maximize Growth Initiatives

- Realize potential in diabetic eye diseases
- Initiated DTC campaign to increase disease awareness



Focusing on the Science

- Explore high-dose aflibercept for less frequent dosing
- Pursue gene therapy and other novel approaches



Dupixent®: Strong Growth Trajectory



+55% worldwide sales growth in 3Q21 vs. 3Q20



Broad-based growth across all approved indications

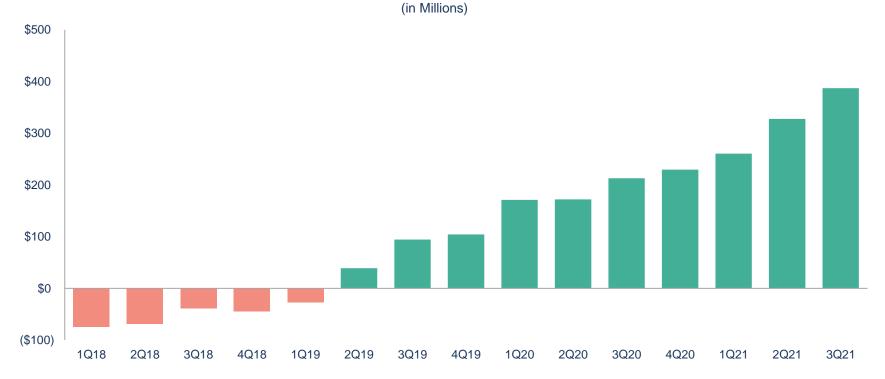
Significant market opportunities support future growth

Advancing clinical development program across **EIGHT** Type 2 diseases



Dupixent®: Driving Leverage in Collaboration Profitability

Antibody Collaboration Share of Profits / (Losses)*



Substantial Patient Opportunity in Type 2 Inflammatory Diseases for Dupixent® Up to 4M+ **Atopic** Eligible 2024+e **Asthma** CRSwNP 2022e 2023e **Dermatitis Patients Eosinophilic Esophagitis Bullous** Type 2 COPD Pemphigoid 48k 2.3M* 975k* 90k 300k 27k Chronic **Spontaneous** Urticaria **CRSsNP** Since launch, ~270k patients in the U.S. 308k 130k have been prescribed Dupixent Prurigo There remains a substantial opportunity **Allergic Fungal Nodularis** Rhinosinusitis for more patients to benefit 74k 11k Chronic Inducible Approved Indications Urticaria-Cold Potential indications with POC Other investigational uses 25k



Dupixent & Itepekimab (anti IL-33) COPD Phase 3s Underway

Two-pronged approach against COPD

Dupixent potential to address **Type 2 COPD**

Achieved prespecified efficacy milestone in interim analysis of first Ph3 study

Eosinophils ≥300/µI

Both former and current smokers

2 Ph3 trials ongoing

Pivotal data expected 2023

Former Smokers
(70% of COPD patients^)

Non-Type 2

Type 2

Itepekimab only~600K patients

Dupixent or Itepekimab > 350K patients

Itepekimab potential also in **non-Type 2 COPD**

Recently published Ph2 proof-of-concept data*, showed potential benefit in former smokers, regardless of Type 2 status

No eosinophil restriction

Focus on former smokers

2 Ph3 trials ongoing

Pivotal data expected 2024

Current Smokers
(30% of COPD patients^)

Dupixent only ~150K patients

Dupixent and Itepekimab are developed in collaboration with Sanofi; COPD – Chronic Obstructive Pulmonary Disease * Rabe et al. Lancet Respir Med. 2021

[^] US, EU and Japan epidemiology, patient populations exclude never smokers (Regeneron Internal Epidemiology Data)

Libtayo - Foundational Therapy to Our Oncology Strategy

COMPETE, ENHANCE, and EXTEND treatment benefits in monotherapy and combination settings

Dermato-oncology

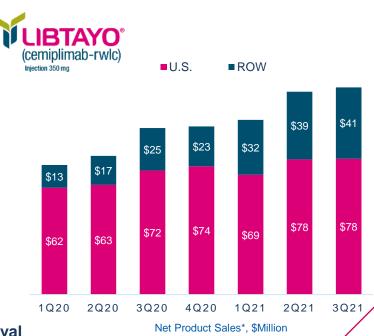
- First approved anti-PD-1 in advanced CSCC; adjuvant studies enrolling
- FDA and EMA Approved as first-in-class anti-PD-1 in advanced BCC
- Positive clinical data in combination with fianlimab (anti-LAG3) in advanced melanoma

Non-Small Cell Lung Cancer

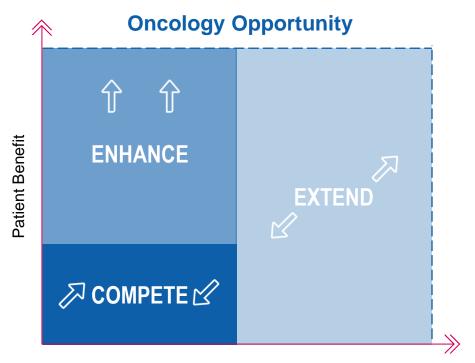
- FDA and EMA Approved in 1L NSCLC (PD-L1 ≥ 50%)
- Overall survival benefit in combination with chemotherapy regardless of PD-L1 expression
- **Regulatory submission** in Q4 2021 for chemotherapy combination

2L Cervical Cancer

- 1st immunotherapy with data showing an improvement in overall survival
- Regulatory decision target action date in January 2022



Oncology Strategy: Aspire to Compete, Enhance, & Extend



Tumor Types

COMPETE

LIBTAYO delivers potentially 'best-inclass' data in tumors responsive to PD-1 monotherapy

ENHANCE

Even for PD-1 responsive tumors, more than half of patients do not respond

EXTEND

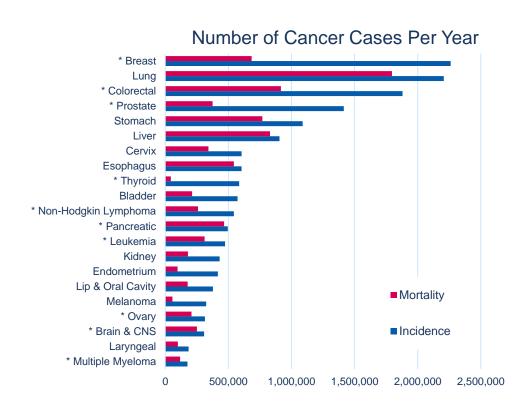
Many tumor settings have limited responses to checkpoint inhibition

Significant Opportunity to **Enhance & Extend** Treatment Benefits

Despite the advancements in the field, there are many cancers that don't respond to anti PD-1 monotherapy

Even for those cancers that are responsive, many patients unfortunately do not benefit

Regeneron's clinical development pipeline of 12+ candidates has potential to address unmet need of the most prevalent cancer types



Regeneron's Oncology Toolkit Provides Unique Combinatorial Flexibility

MUC16

VelocImmune® Antibodies

PD-1 (LIBTAYO)

LAG-3 GITR CTLA-4 CD3 Costimulatory Bispecifics Bispecifics Bispecifics CD20 PSMA METXMET ADC

MUC16

Collaborations

Adicet
BioNTech
Vyriad
Replimmune
Others

PiGs

VelociNator™

Bispecifics For Hematologic Cancers

Odronextamab



Potential best-in-class efficacy*

R/R Follicular Lymphoma

• ORR=90%, CR=70%

• ORR=55%, CR=55%

R/R DLBCL (CAR-T naïve) R/R DLBCL (post-CAR-T)

• ORR=33%, CR=21%

Patient enrollment has resumed for FL and DLBCL in potentially pivotal monotherapy trials

REGN5458/5459



Expand investigation of potential best-in-class bispecific into earlier lines of multiple myeloma

R/R Multiple Myeloma*

3-12mg: ORR=29%, VGPR or better= 25% 24-48mg: ORR=41%, VGPR or better= 41% 96mg: ORR=63%, VGPR or better= 63%



Bispecifics for Solid Tumors: Enhance And Extend Benefits Of Checkpoint Inhibitors

Lung, Advanced Cancers

REGN7075 (EGFRxCD28)

Evaluating combination with **LIBTAYO**

REGN5093 (METXMET)

REGN5093-M114 (METxMET ADC)

Ovarian Cancer

REGN5668 (MUC16xCD28)

Evaluating combination with either REGN4018 (MUC16xCD3) or LIBTAYO

Prostate Cancer

REGN5678 (PSMAxCD28)

Evaluating combination with **LIBTAYO**

PSMAxCD3
Entering clinic in 2H21

Combinations of our CD3 and CD28 bispecific antibodies and checkpoint inhibitors offer advantage of simultaneously providing multiple signals for activating T cells to kill tumors

Robust combinatorial potential and flexibility to enhance and extend treatment across many different types of cancers

Broad Oncology Pipeline & Combinations Continue to Advance

ONGOING	LIBTAYO*	_		Advanced Lung cancer (chemo combo); Adjuvant CSCC
	REGN3767 (LAG-3)	+	LIBTAYO*	Advanced melanoma
	REGN6569 (GITR)	+	LIBTAYO*	Solid tumors
	REGN4018 (MUC16xCD3)	+	LIBTAYO*	2+ line Ovarian cancer
	REGN5668 (MUC16xCD28)	+	REGN4018 / LIBTAYO*	2+ line Ovarian cancer
	REGN5678 (PSMAxCD28)	+	LIBTAYO*	3+ line Prostate cancer
	REGN7075 (EGFRxCD28)	+	LIBTAYO*	Solid tumors
	REGN5093 (METxMET)			Advanced MET altered Lung cancer
	Odronextamab (CD20xCD3)			3+ line Lymphoma
	Odronextamab (CD20xCD3)	+/-	LIBTAYO*	3+ line Lymphoma
	REGN5458/9 (BCMAxCD3)			3+ line Multiple myeloma
	REGN5093-M114 (METxMET ADC)			MET overexpressing advanced Cancer
UPCOMING	PSMAxCD3	+	REGN5678/LIBTAYO*	Prostate cancer
	odronextamab (CD20xCD3)	+	B cell/CD28 costim	B-NHL
	odronextamab (CD20xCD3)	+	Standard of Care	B-NHL
	REGN5458/9 (BCMAxCD3)	+	Plasma cell/CD28 costim	Multiple myeloma
	REGN5458/9 (BCMAxCD3)	+	Standard of Care	Multiple myeloma

VelocImmune® Antibodies

Anti-PD-1

CD3 BiSpecifics

Costim BiSpecifics

New BiSpecifics





The first COVID-19 combination therapy to receive EUA



Clinical Data

- **▼ EUA granted** for 1.2g dose (for subcutaneous / IV administration) in high-risk, non-hospitalized patients after showing **70% reduction in deaths or hospitalizations**
- **▼ EUA granted** for post-exposure prophylaxis in certain patients after showing reduction in symptomatic infections by 81%
- Two Ph3 studies have shown REGEN-COV may reduce risk of death by 20-56% in seronegative hospitalized patients*
- Retains potency against all known variants

Supply

- Signed new supply agreement in Sept. 2021 to supply

 1.4 million additional doses to the U.S. Government
- Partnered with Roche to manufacture and distribute Ronapreve™ outside of the U.S. and to ensure availability in low- and middle-income countries
- Expect capacity to manufacture **4 to 5 million** additional doses in 2022

Upcoming Milestones

- FDA decision regarding expansion of EUA to include preexposure prophylaxis and hospitalized indications
- Regulatory decision on BLA submission in treatment and prophylaxis indications (target action date of April 13, 2022)
- Regulatory submission for treatment in hospitalized patients

Evkeeza: Rare Disease Opportunity



Now Approved

Address Unmet Need in Patients with HoFH

Build Rare Disease Strategy

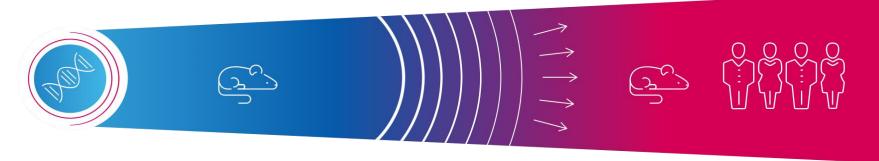
Apply Cardiometabolic Expertise



Found that patients with loss-of-function mutations in their ANGPTL3 gene have significantly lower levels of key blood lipids, including LDL-C

Evinacumab was designed to replicate this loss-of-function mutation effect to lower LDL-C in patients with HoFH

Supercharging the Future of Genetics and Turnkey Therapeutics Platforms at Regeneron



Learnings from mouse genetics

WVELOCIGENE®

Existing Turnkey Technologies Biologicals





Antibodies & Bispecifics



Unlocking capabilities of mouse and human genetics through









siRNA



Genome editing (insertion/ knockout)



Regeneron is investing in and delivering technologies well beyond antibodies

- 3 genetics medicines programs in the clinic
- 3–5 additional potential targets to advance to IND-enabling studies in next 12 months
- 30+ additional programs in research and candidate selection phase
- 10+ novel genetic targets discovered

Several near-term opportunities emerging from Regeneron Genetics Medicines:

- Reported landmark TTR genome editing data in Jun'21
- C5 combo program Ph3 start (Myasthenia Gravis, PNH in 2022)
- HSD17B13 siRNA healthy volunteer safety data readout in 4Q21
- APP siRNA Ph1 start for Alzheimer's
- DB-OTO gene therapy (hearing loss) Ph1/2 start in 2022

REGENERON GENETICS MEDICINES

Building the Pipeline for the Future

Pre-IND

FACTOR 8 GENE INSERTION² CRISPR/Cas9 + AAV Transgene Insertion

Hemophilia A

PNPLA3¹ PNPLA3 siRNA

 Nonalcoholic Steatohepatitis

DB-OTO³ OTOF AAV Dual Vector Gene Therapy

 OTOF Related Hearing Loss

FACTOR 9 GENE INSERTION² CRISPR/Cas9 + AAV Transgene Insertion

Hemophilia B

ALN-APP¹ APP siRNA

· Alzheimer's Disease

Clinical Development

POZELIMAB + CEMDISIRAN¹

C5 Antibody + C5 siRNA

- Myasthenia GravisParoxysmal Nocturnal
- Hemoglobinuria

 CEMDISIRAN¹
- C5 siRNAImmunoglobulin A Nephropathy

ALN-HSD¹ HSD17B13 siRNA

 Nonalcoholic Steatohepatitis

NTLA-2001² CRISPR/Cas9

Hereditary
 Transthyretin
 Amyloidosis with
 Polyneuropathy

ADDITIONAL PROGRAMS

30+ Programs in Research and Candidate Selection

- 1. Alnylam Pharmaceuticals
- 2. Intellia Therapeutics
- 3. Decibel Therapeutics

This graphic displays pipeline drug candidates currently undergoing clinical testing in a variety of diseases. The safety and efficacy of these drug candidates have not been fully evaluated by any regulatory authorities for the indications described in this section.



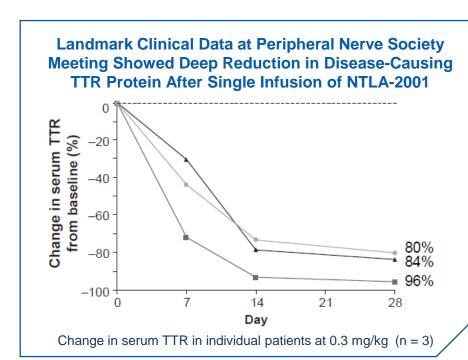
Genome Editing – Knockout: TTR Collaboration With Intellia

First Human Proof-of-Concept Achieved for First Systemic CRISPR-based Therapeutic

- First-in-human data validate our CRISPR-based TTR knockout approach
 - Single dose with NTLA-2001 led to dosedependent reductions in serum TTR
 - Mean serum TTR reduction of 87% at 0.3 mg/kg dose, including one patient with 96% reduction
 - No serious adverse events observed in the first six patients by day 28

Proof-of-Concept With TTR Increases Probability of Success for Both Knockout and Insertion Programs

- REGN has exclusive rights to Intellia's CRISPR technology for therapies targeting the liver*
 - o 20+ preclinical programs under evaluation
- REGN has license to commercialize up to 10 ex vivo CRISPR products in defined cell types





Capital Allocation Priorities Leverage Financial Strength to Drive Long-Term Growth and Shareholder Value

- 1. Invest in our best-in-class R&D capabilities
- 2. <u>Pursue</u> and fund business development opportunities to enable and synergize our R&D capabilities and technologies
- 3. Return cash to shareholders through share repurchases

3Q21 Net Cash Position*: \$8.7B

\$191M in share repurchases in 3Q21

Regeneron-Discovered, Approved and Investigational Medicines Across a Wide and Diverse Set of Diseases







NTLA-2001# (TTR KO

REGN9933 (Factor XI) **REGN7257** (*IL-2Rq*)

REGN5381 (NPR1)

REGN6490 (IL-36R)

CRISPR/Cas9)













PHASE 1

- **REGEN-COV**[^] (SARS-CoV-2)
- Fianlimab (LAG-3)
- REGN6569 (GITR)
- REGN5093 (METXMET)
- REGN5093-M114
- (METxMET ADC)
- **REGN4018** (*MUC16xCD3*)
- **REGN5668** (MUC16xCD28)
- REGN5678 (PSMAxCD28)
- REGN7075 (EGFRxCD28)
- Odronextamab (CD20xCD3)
- REGN5459 (BCMAxCD3)

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- **INFECTIOUS** DISFASES
- SOLID ORGAN ONCOLOGY
- **HEMATOLOGY**
- **IMMUNOLOGY &** INFLAMMATORY DISEASES
- **GENERAL MEDICINE**

- **OPHTHALMOLOGY**

PHASE 2

- **REGEN-COV**[^] (SARS-CoV-2) **Dupilumab*** (*IL-4R*)
- Cemiplimab* (PD-1)
- Sarilumab* (IL-6R)

Aflibercept (VEGF Trap)

- Odronextamab (CD20xCD3)
- REGN5458 (BCMAxCD3)
- **ALN-HSD**‡ (*HSD17B13*) Pozelimab (C5)
 - Cemdisiran[‡] (C5 siRNA)
 - Pozelimab + cemdisiran[‡] (C5)
 - Evinacumab (ANGPTL3)
 - Garetosmab (Activin-A)
 - REGN4461 (LEPR)

PHASE 3

- **REGEN-COV**[^] (SARS-CoV-2)
- Cemiplimab* (PD-1)
- **Dupilumab*** (*IL-4R*)
- Itepekimab* (IL-33)
- REGN5713-5714-5715 (Betv1)
- **REGN1908-1909** (Feld1)
- Alirocumab (PCSK9)
- Fasinumab[†] (NGF)
- **Aflibercept** (VEGF Trap)
- Pozelimab + cemdisiran[‡] (C5)



† In collaboration with Teva and Mitsubishi Tanabe ^ In collaboration with Roche

RARE DISEASES

Multiple Potential Regulatory Submissions: 2021-2023+

2021

2022

2023+

REGEN-COV††

COVID-19[‡] Treatment & Prophylaxis

Odronextemab (CD20xCD3)

B Cell NHL

DUPIXENT*

Eosinophilic Esophagitis

Itepekimab (IL-33)*

Chronic Obstructive Pulmonary Disease

DUPIXENT*

Pediatric Asthma (6-11 yr)

REGN5458 (BCMAxCD3)

Relapsed/Refractory Multiple Myeloma

DUPIXENT* Pediatric Atopic Dermatitis (6 mo-5 yr) **REGN1908-1909 (Feld1)**

Cat Allergy

LIBTAYO*

2L Cervical Cancer

High-Dose aflibercept

DUPIXENT*

Chronic Inducible Urticaria - Cold

REGN5713-5714-5715 (Betv1)

Birch Allergy

LIBTAYO* + chemo

1L Non-Small Cell Lung Cancer

EYLEA

Q16W in NPDR

DUPIXENT* Chronic Spontaneous Urticaria

Pozelimab ± cemdisiran+

C5-mediated diseases

REGEN-COV††

COVID-19[‡] Hospitalized Treatment

Fasinumab† Osteoarthritis Pain[^]

DUPIXENT* Prurigo Nodularis **DUPIXENT***

Bullous Pemphigoid Chronic Obstructive Pulmonary Disease Chronic Rhinosinusitis w/o Nasal Polyposis Allergic Fungal Rhinosinusitis

PRALUENT

Pediatric HeFH

Garetosmab FOP[^]

REGENERON

New Molecule

- * In collaboration with Sanofi + In collaboration with Alnvlam
- † In collaboration with Teva and
- Mitsubishi Tanabe †† In collaboration with Roche
- HeFH Heterozygous Familial Hypercholesterolemia:
- FOP Fibrodysplasia Ossificans Progressive; NPDR - Non-Proliferative Diabetic Retinopathy
- ^ Partial clinical hold pending review of additional data
- ± Received EUA from FDA for mild to moderate COVID-19 in high-risk nonhospitalized patients
- This slide contains investigational products not yet approved by regulatory authorities

New Indication

Key Upcoming Milestones

EYLEA: Ph3 data readout for High Dose aflibercept formulation

Dupixent

- Submit sBLA and MAA for pediatric AD (6 months 5 years)
- · Complete regulatory submission for EoE
- Additional Phase 3 readouts for CSU and PN

REGEN-COV

- FDA decision regarding expansion of EUA to include pre-exposure prophylaxis for appropriate populations
- FDA decision regarding expansion of EUA to include hospitalized patients
- Regulatory decision on BLA in treatment and prophylaxis indications (PDUFA 4/13/22)
- BLA submission for treatment of hospitalized patients

Libtayo

Regulatory submissions for 1L NSCLC chemotherapy combination

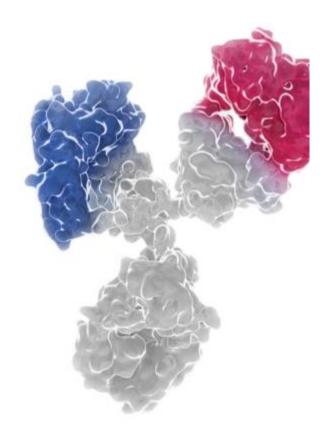
Odronextamab (CD20xCD3)

Complete enrollment in potentially pivotal Phase 2 in NHL

REGN5458 (BCMAxCD3)

· Complete enrollment in potentially pivotal Phase 2 in Multiple Myeloma

New Bispecifics: Initial data for MUC16xCD3 and PSMAxCD28





Reconciliation of GAAP Net Income to Non-GAAP Net Income and of Net Cash Position

REGENERON PHARMACEUTICALS, INC. RECONCILIATION OF GAAP TO NON-GAAP FINANCIAL INFORMATION (Unaudited) (In millions, except per share data)

	Three Months Ended September 30,			Nine Months Ended September 30,				
		2021		2020	Ξ	2021		2020
GAAP R&D	\$	665.4	\$	684.6	\$	2,122.5	\$	1,990.5
R&D: Non-cash share-based compensation expense		73.1		55.9		213.7		169.5
R&D: Up-front payments related to license and collaboration agreements				_		_		85.0
Non-GAAP R&D	\$	592.3	\$	628.7	\$	1,908.8	\$	1,736.0
GAAP SG&A	\$	445.0	\$	326.9	\$	1,265.3	\$	1,042.5
SG&A: Non-cash share-based compensation expense		48.7		35.9		149.1		114.4
SG&A: Litigation contingencies and other		5.6		_		5.6		28.9
Non-GAAP SG&A	\$	390.7	\$	291.0	\$	1,110.6	\$	899.2
GAAP COGS	\$	238.8	\$	131.0	\$	961.4	\$	312.3
COGS: Non-cash share-based compensation expense		15.1		9.4		50.5		26.6
COGS: Other		_		_		_		0.9
Non-GAAP COGS	\$	223.7	\$	121.6	\$	910.9	\$	284.8
GAAP other (expense) income, net	\$	(30.6)	\$	(54.8)	\$	515.3	\$	176.2
Other income/expense: Losses (gains) on investments		29.3		37.2		(524.6)		(162.1)
Interest expense: Other		_		11.2		_		12.7
Non-GAAP other (expense) income, net	\$	(1.3)	\$	(6.4)	\$	(9.3)	\$	26.8
GAAP net income	\$	1,632.2	\$	842.1	\$	5,846.3	\$	2,364.0
Total of GAAP to non-GAAP reconciling items above		171.8		149.6		(105.7)		275.9
Income tax effect of GAAP to non-GAAP reconciling items		(31.3)		(30.5)		36.3		(53.7)
Non-GAAP net income	\$	1,772.7	\$	961.2	\$	5,776.9	\$	2,586.2
Non-GAAP net income per share - basic	\$	16.69	\$	9.11	\$	54.76	\$	23.88
Non-GAAP net income per share - diluted	\$	15.37	\$	8.36	\$	50.99	\$	22.01
Shares used in calculating:								
Non-GAAP net income per share - basic		106.2		105.5		105.5		108.3
Non-GAAP net income per share - diluted		115.3		115.0		113.3		117.5

REGENERON PHARMACEUTICALS, INC. RECONCILIATION OF NET CASH POSITION (Unaudited) (In millions)

	Se	eptember 30, 2021	December 31, 2020			
Cash and marketable securities	\$	11,418.9	\$	6,722.6		
Long-term debt		1,979.6		1,978.5		
Finance Lease Liabilities		719.0		717.2		
	\$	8,720.3	\$	4,026.9		

REGENERON PHARMACEUTICALS, INC. CONDENSED CONSOLIDATED BALANCE SHEETS (Unaudited) (In millions)

	September 30, 2021		December 31, 2020	
Assets:				
Cash and marketable securities	\$	11,418.9	\$	6,722.6
Accounts receivable, net		5,452.0		4,114.7
Inventories		2,053.8		1,916.6
roperty, plant, and equipment, net		3,395.7		3,221.6
Deferred tax assets		723.2		858.9
Other assets		627.9		328.9
Total assets		23,671.5	\$	17,163.3
Liabilities and stockholders' equity:				
Accounts payable, accrued expenses, and other liabilities	\$	3,150.6	\$	2,806.8
Finance lease liabilities		719.0		717.2
Deferred revenue		564.3		635.5
Long-term debt		1,979.6		1,978.5
Stockholders' equity		17,258.0		11,025.3
Total liabilities and stockholders' equity		23,671.5	\$	17,163.3