R&D Conference Call

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Forward-Looking Statements

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Although this presentation includes information regarding pharmaceuticals (including products under development), the information is not intended as any advertisement and/or medical advice.

Oncology Field
Projects under Development (as of 4 July, 2016)

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	Phase I	Phase II	Phase III	Filed
Oncology	**CKI27 / RG7304 (Japan / overseas)** - solid tumors **RG7596 / polatuzumab vedotin** - NHL **RG7604 / taselisib** - solid tumors **RG7440 / ipatasertib** - solid tumors	**GC33 (RG7686) / codrituzumab** - hepatocellular carcinoma	**AF802 (RG7853) / Alecensa (overseas)** - NSCLC [1L] **RG1273 / Perjeta** - breast cancer (adjuvant) - gastric cancer **RG3502 / Kadcyla** -breast cancer (adjuvant) **GA101 (RG7159) / obinutuzumab** - aggressive NHL - indolent NHL **RG7446 / atezolizumab** - NSCLC - NSCLC (adjuvant) - bladder cancer - MIBC (adjuvant) - renal cell carcinoma **RG435 / Avastin** - renal cell carcinoma	**AF802 (RG7853) / Alecensa (EU)** - NSCLC [post-crizotinib]

In principle, completion of first dose is regarded as the start of clinical studies in each phase.
NHL: non-Hodgkin's lymphoma
NSCLC: non-small cell lung cancer
MIBC: muscle invasive bladder cancer

Letters in orange: in-house projects
★: Projects with advances in stages since 22 April, 2016

ASCO 2016:
Key Presentations Featuring Chugai Medicines

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ALECTINIB

- Alectinib (ALC) versus crizotinib (CRZ) in ALK-inhibitor naive ALK-positive non-small cell lung cancer (ALK+ NSCLC): Primary results from the J-ALEX study [Abstract #9008 (oral)]

CKI27

- Updated efficacy and safety results from the Phase I study of intermittent dosing of the dual MEK/RAF inhibitor, RO5126766 in patients (pts) with RAS/RAF mutated advanced solid tumors [Abstract #2582 (poster)]

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ATEZOLIZUMAB

1. Non Small Cell Lung Cancer (NSCLC)
   - Updated survival and biomarker analysis of a randomized phase II study of atezolizumab vs docetaxel in 2L/3L NSCLC (POPLAR) [Abstract #9028 (poster)]

2. Bladder Cancer
   - Updated efficacy and >1-y follow up from IMvigor210 Atezolizumab (atezo) in platinum (plat) treated locally advanced/metastatic urothelial carcinoma (mUC) [Abstract #4515 (oral)]
   - Atezolizumab (atezo) as first-line (1L) therapy in cisplatin-ineligible locally advanced/metastatic urothelial carcinoma (mUC): Primary analysis of IMvigor210 cohort [Abstract LBA4500 (oral)]

3. Breast Cancer
   - Phase Ib trial of atezolizumab in combination with nab-paclitaxel in patients with metastatic triple negative breast cancer (mTNBC) [Abstract #1009 (poster discussion)]

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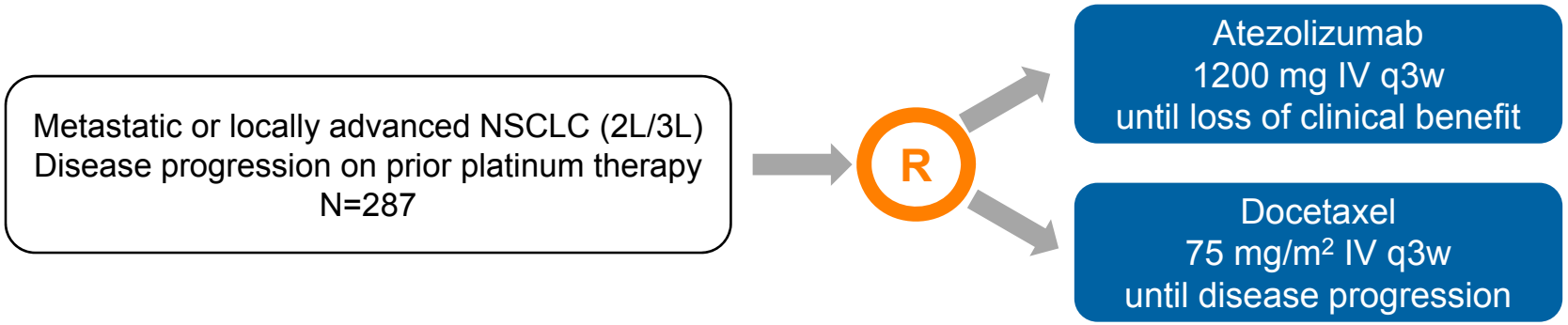
1. Atezolizumab in NSCLC

Study Design – POPLAR randomized phase II in all-comer population



Stratification Factors
- PD-L1 IC expression (0 vs 1 vs 2 vs 3)
- Histology (squamous vs non squamous)
- Prior chemotherapy regimens (1 vs 2)

POPLAR: Updated mOS in PD-L1 subgroups

Efficacy increasing with higher PD-L1 expression

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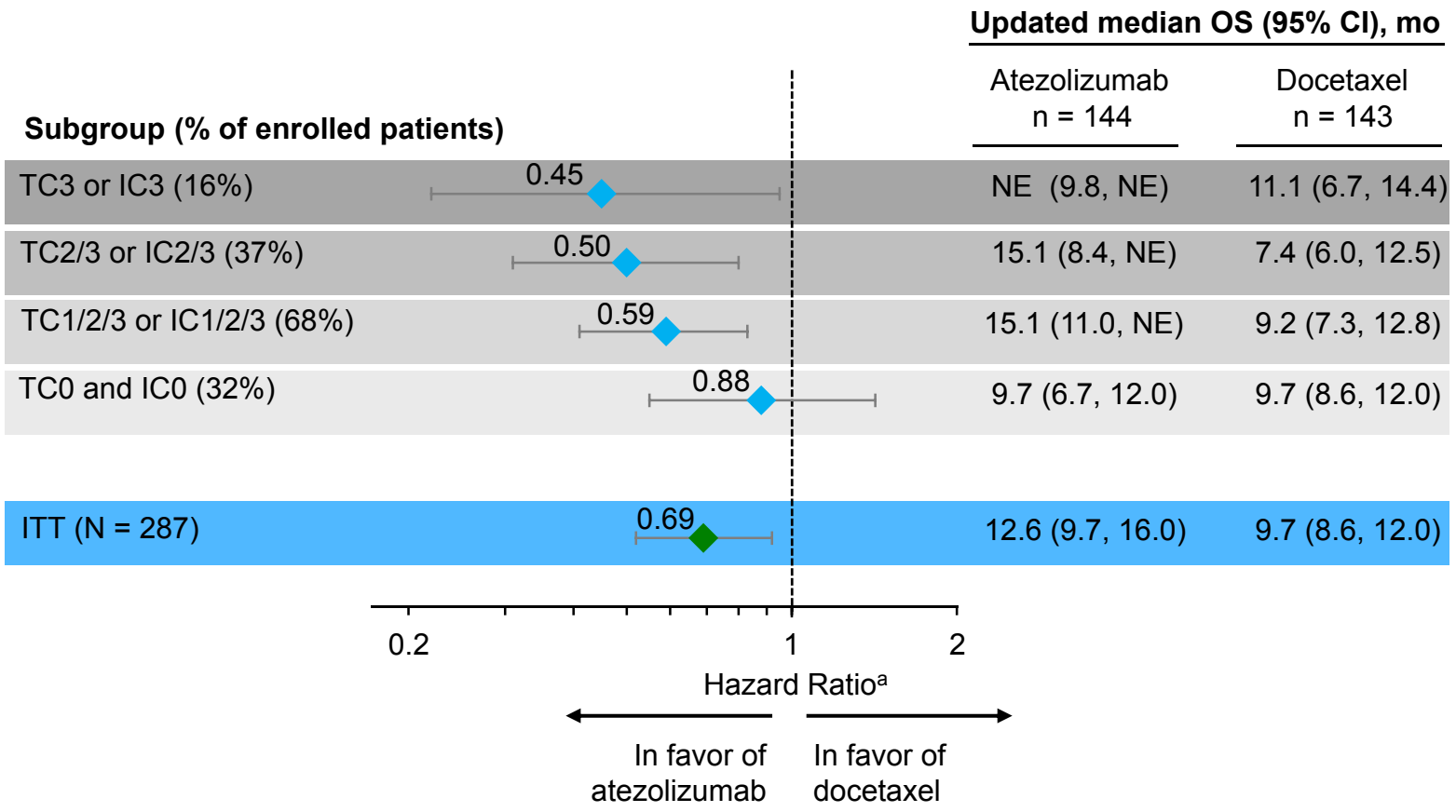
Updated analysis (Event / N=70%): Minimum follow-up 20 months



[a] Stratified HR for ITT and unstratified HRs for PD-L1 subgroups; NE, not estimable; Data cut-off: December 1, 2015

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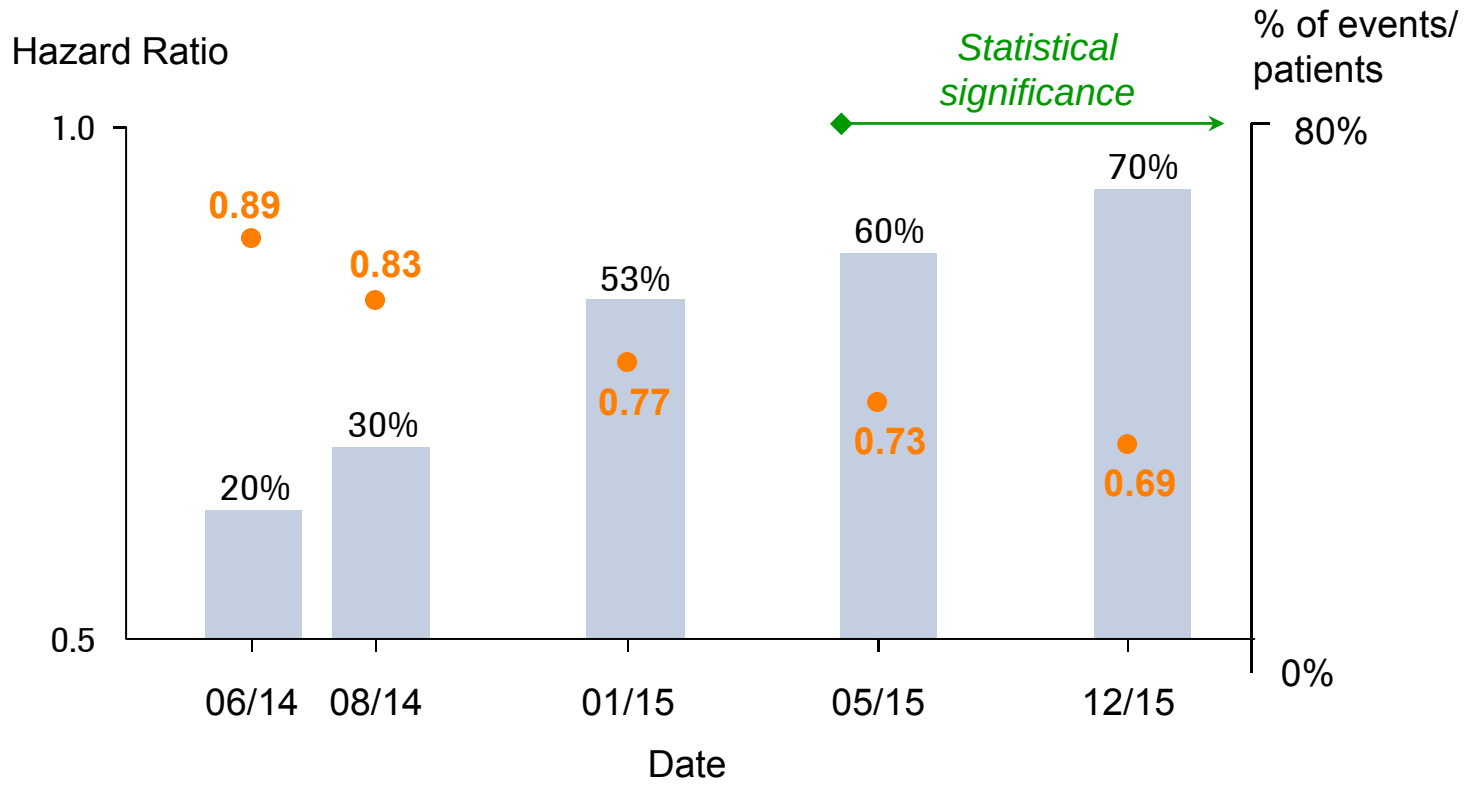
POPLAR:

Time shows true size of the treatment effect

Example: Atezolizumab overall survival in lung cancer



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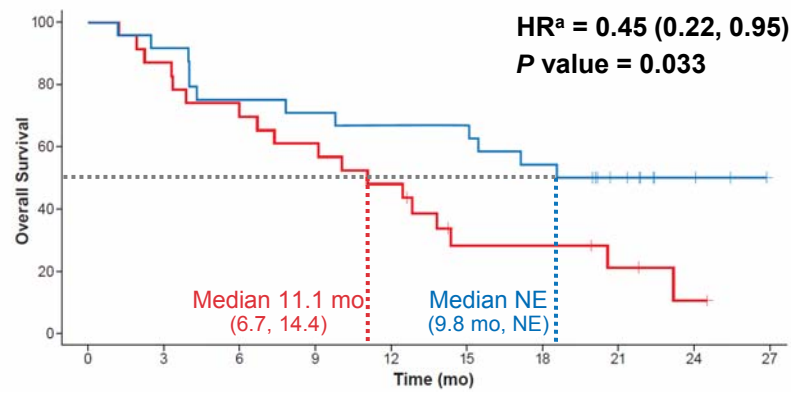
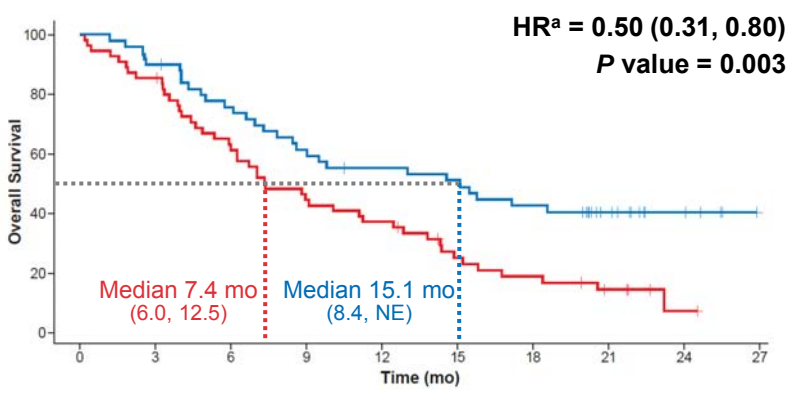
POPLAR: Updated mOS in PD-L1 subgroups

OS curves separate in all subgroups incl. TC0/IC0 over time

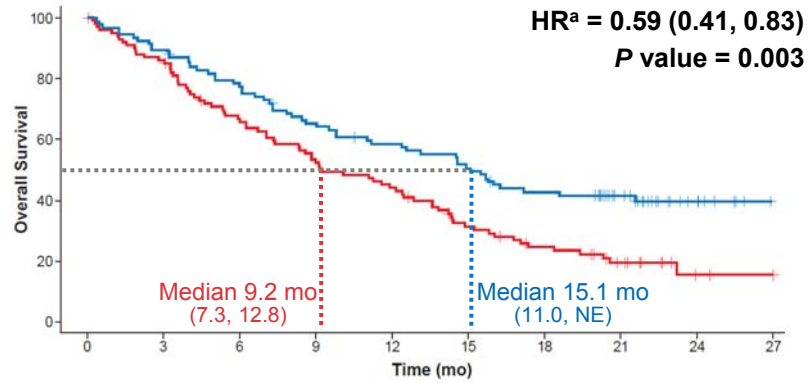
TC3 or IC3 (n = 47)



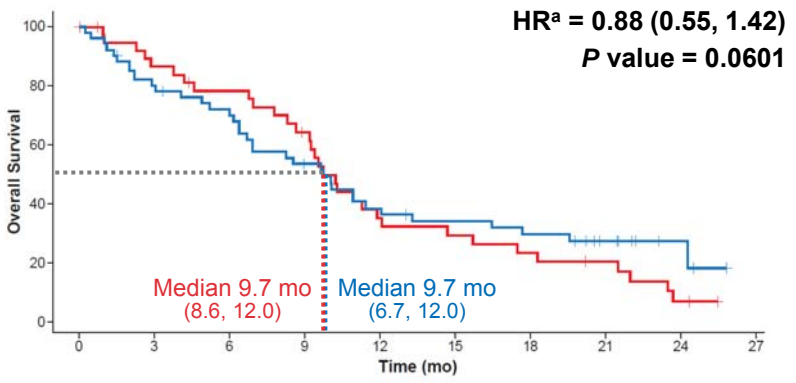
TC2/3 or IC2/3 (n = 105)



TC1/2/3 or IC1/2/3 (n = 195)



TC0 and IC0 (n = 92)



[a] Unstratified HR; Data cut-off: December 1, 2015

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2. Atezolizumab in Bladder Cancer

Study Design – Phase II IMvigor210

IMvigor210
- Locally advanced or metastatic urothelial carcinoma
- Predominantly TCC histology
- Tumor tissue evaluable for PD-L1 testing

→ **Cohort 1 (N=119)** 1L cisplatin ineligible → Atezolizumab 1200 mg IV q3w until RECIST v1.1 progression

→ **Cohort 2 (N=310)** Platinum-treated mUC → Atezolizumab 1200 mg IV q3w until loss of clinical benefit

Approved in the US under the brand name Tecentriq® for a specific type of advanced bladder cancer. The US FDA accelerated approval is based on the phase II IMvigor210 study.

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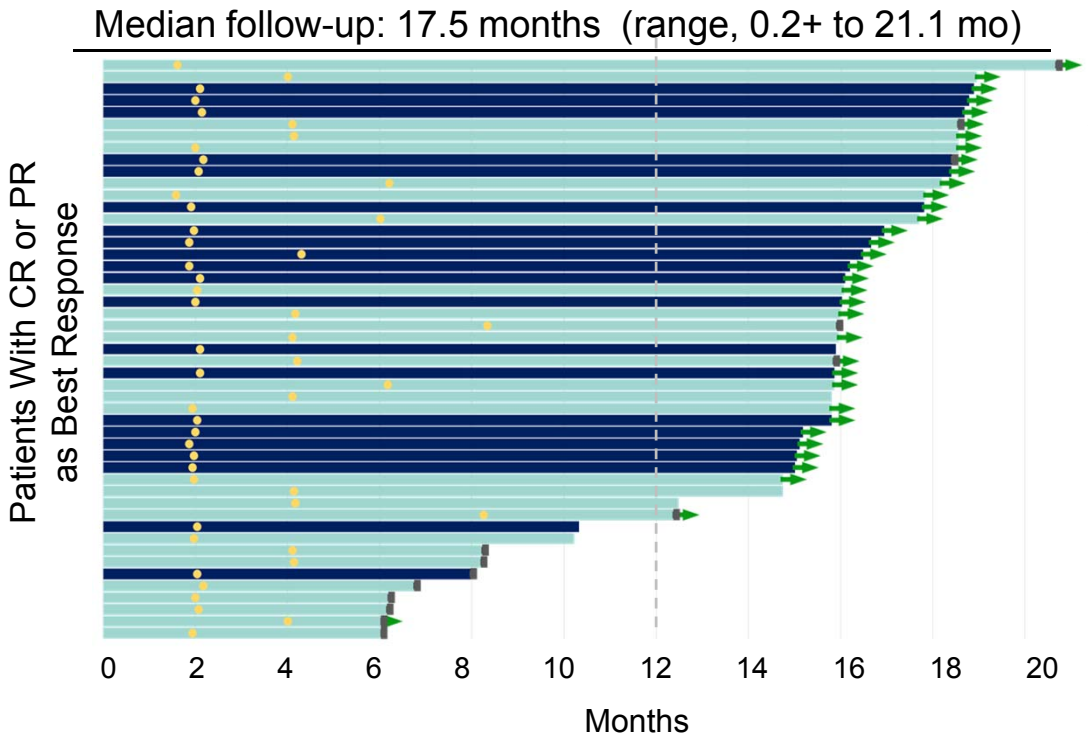
Imvigor210: Cohort 2 update

Ongoing & durable responses across all subgroups

	IC2/3 (n = 100)	IC1/2/3 (n = 207)	All[a] (N = 310)	IC1 (n = 107)	IC0 (n = 103)
ORR: confirmed IRF RECIST v1.1 (95% CI)	28% (19, 38)	19% (14, 25)	16% (12, 20)	11% (6, 19)	9% (4, 16)
CR rate: confirmed IRF RECIST v1.1 (95% CI)	15% (9, 24)	9% (6, 14)	7% (4, 10)	4% (1, 9)	2% (0, 7)



- 71% of responses (35/49) were ongoing
  - 86% of CRs ongoing
- mDOR was not yet reached in any PD-L1 IC subgroup (range, 2.1+ to 19.2+ mo)[a]

CR as best response
PR as best response
First CR/PR
Treatment discontinuation[b]
Ongoing response[c]

[a] Per IRF RECIST v1.1 [b] Discontinuation symbol does not indicating timing. [c] No PD or death only. Data cutoff: Mar. 14, 2016.

IMvigor210: Cohort 1 response rate & durability

Confirmed responses, incl. CRs observed in all subgroups

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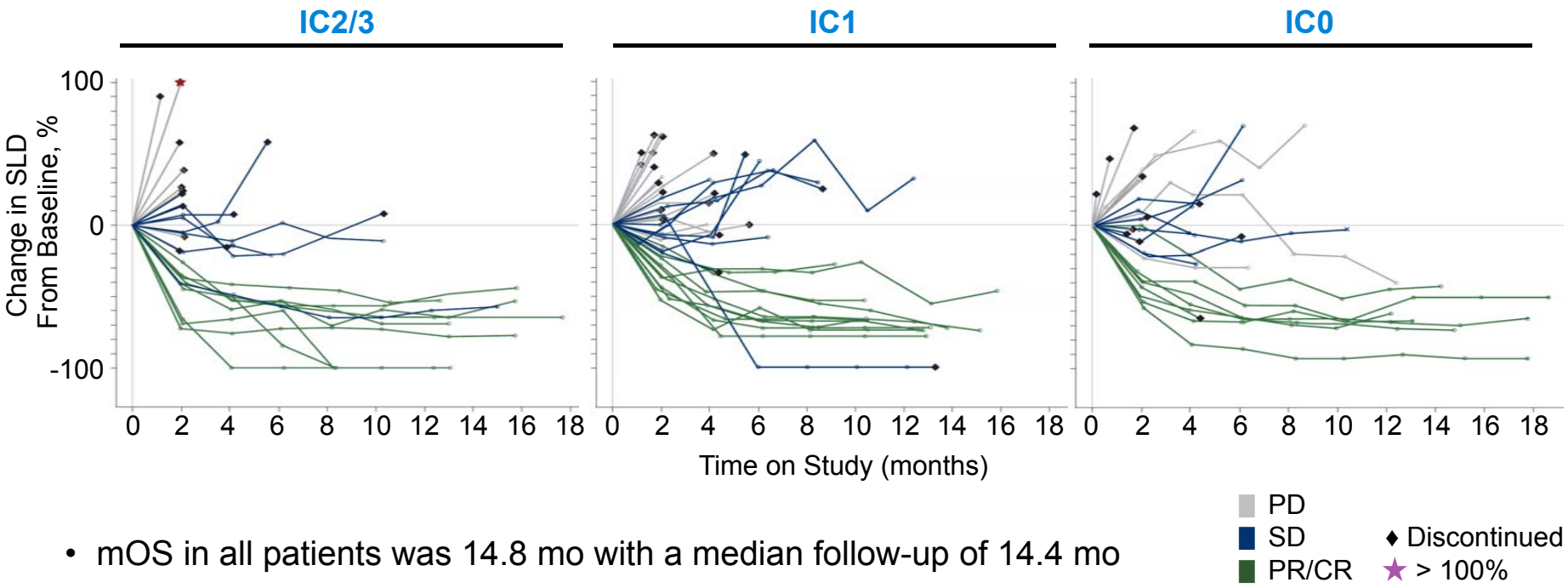
	IC2/3 (n = 32)	IC1/2/3 (n = 80)	All Patients (N = 119)	IC1 (n = 48)	IC0 (n = 39)
ORR[a] (95% CI)	28% (14, 47)	25% (16, 36)	24% (16, 32)	23% (12, 37)	21% (9, 36)
CR	6%	6%	7%	6%	8%
PR	22%	19%	17%	17%	13%



- mOS in all patients was 14.8 mo with a median follow-up of 14.4 mo

[a] Includes 19 patients with missing/unevaluable responses. All treated patients had measurable disease at baseline per investigator-assessed RECIST v1.1. PD-L1 IC status: IC2/3 (≥ 5%), IC1 (≥ 1 but < 5%), IC0 (< 1%). Data cut-off: March 14, 2016

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3. Atezolizumab in Triple Negative Breast Cancer (TNBC)

Study Design – atezolizumab + nab-paclitaxel Phase Ib (Arm F)

Phase Ib atezolizumab + nab-paclitaxel
in 1-3L+TNBC
N=32

→

Atezolizumab 800mg/d q2w
+
Nab-paclitaxel 125mg/m2 q4w
until loss of clinical benefit

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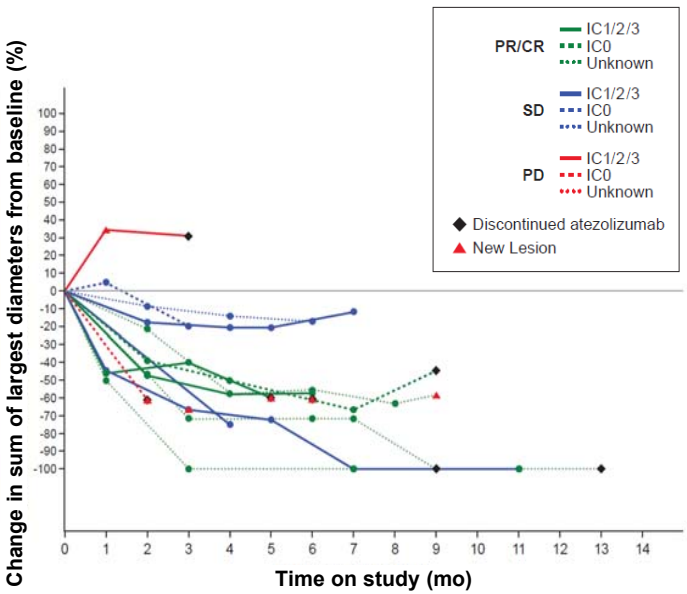
Atezolizumab + Abraxane in TNBC

Response rate and duration of response

Best Overall Response	1L (n = 13)	2L (n = 9[b])	3L+ (n = 10)	All Patients (N=32)
Confirmed ORR (95% CI)[a]	46% (19, 75)	22% (3, 60)	40% (12, 74)	38% (21-56)
CR	8%	0%	0%	3%
PR	38%	22%	40%	34%
SD	38%	67%	30%	44%
PD	15%	0	30%	16%
Missing or NE	0%	11%	0%	3%

1L Patients



Phase 3 IMpassion 130 in 1L TNBC patients ongoing

[a] Confirmed ORR defined as ≥ 2 consecutive assessments of CR or PR; [b] One patient discontinued with clinical progression before first on-treatment tumor assessment. Data cutoff date: Jan 14, 2016

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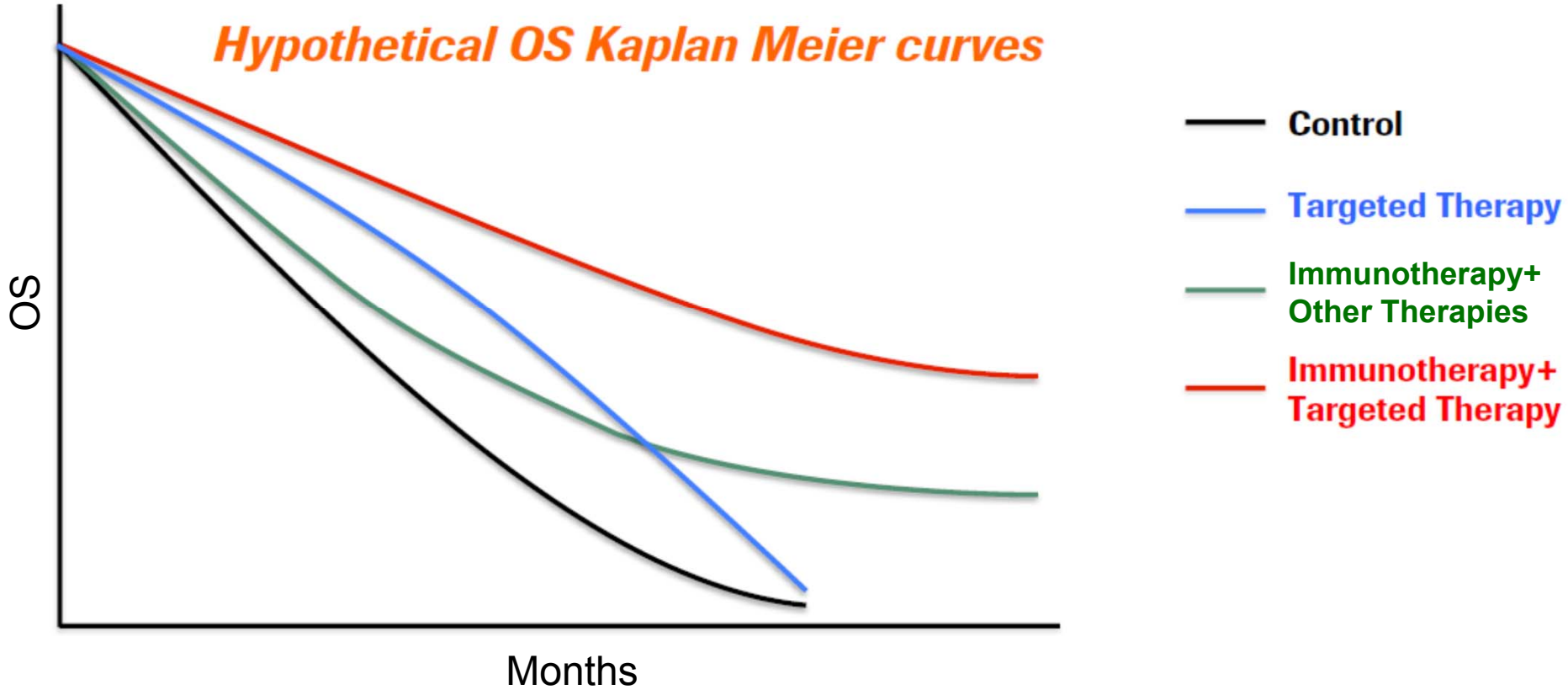
PD-L1: Expectation to Cancer Immunotherapy



Conceptual illustration

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