

2019 Full Year Results

5 February 2020



Cautionary statement regarding forward-looking statements



This presentation may contain forward-looking statements. Forward-looking statements give the Group's current expectations or forecasts of future events. An investor can identify these statements by the fact that they do not relate strictly to historical or current facts. They use words such as 'anticipate', 'estimate', 'expect', 'intend', 'will', 'project', 'plan', 'believe', 'target' and other words and terms of similar meaning in connection with any discussion of future operating or financial performance. In particular, these include statements relating to future actions, prospective products or product approvals, future performance or results of current and anticipated products, sales efforts, expenses, the outcome of contingencies such as legal proceedings, and financial results.

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A number of adjusted measures are used to report the performance of our business, which are non-IFRS measures. These measures are defined and reconciliations to the nearest IFRS measure are available in our fourth quarter 2019 earnings release and Annual Report on Form 20-F for FY 2018.

All expectations and targets regarding future performance and the dividend should be read together with "Assumptions related to 2019 guidance and 2016-2020 outlook" on pages 61 and 62 of our full year and fourth quarter 2019 earnings release.

Agenda



2019 progress and preparing for the future

Emma Walmsley,
Chief Executive Officer



2019 results and 2020 guidance

Iain Mackay,
Chief Financial Officer



R&D update

Hal Barron,
Chief Scientific Officer, President R&D



2020 focus

Emma Walmsley,
Chief Executive Officer



Q&A:

David Redfern, Chief Strategy Officer, Chairman of ViiV
Luke Miels, President Global Pharmaceuticals
Brian McNamara, CEO GSK Consumer Healthcare
Roger Connor, President Global Vaccines

Emma Walmsley, CEO

5 February 2020



Significant progress on our long term priorities in 2019



Innovation

Performance

Trust



Driving new Innovation approach

6 positive data read-outs from pivotal studies

Driving transition to 2DRs in HIV

8 submissions and 4 new assets into pivotal studies

Strengthened commercial performance

Increased Shingrix capacity

Building Specialty capability

New Consumer JV with Pfizer

Continued progress in Global Health

Top ranked in the DJSI for pharma industry

Group sales and earnings growth in year of progress



Pharmaceuticals flat CER

Respiratory* +15%
HIV +1%; dolutegravir +2%
Benlysta +25%
Zejula sales of £229m

Vaccines +19% CER

Shingrix sales of £1,810m, + >100%
Meningitis +15%

Consumer Healthcare +17% CER

Pro forma +2%
Oral health +7%
Wellness +14% (pro forma flat)

**Group sales growth
of +8%
(pro forma +4%)**

**26.6%
Group Adjusted
operating margin**

**Total EPS of
93.9p, +23%;
Adjusted EPS of
123.9p, +1%**

FCF of £5.1 billion

All growth rates and margin changes at CER

The definitions for non-IFRS measures are set out on pages 60 of our FY 2019 earnings release, and reconciliations are set out on pages 21 and 35

*Respiratory refers to the Ellipta portfolio and Nucala

New product momentum continues to build



Respiratory: continued strong uptake for Trelegy and Nucala

TRELEGY: launched in 44 countries including Japan & China

CAPTAIN study in asthma met primary endpoint of superiority over ICS/LABA in lung function*; US approval anticipated 2H 2020

NUCALA: At-home self-administration US approval received June 2019; market leading position

Significant opportunity remains with ~27% of US SEA eligible patients having received a biologic

*versus Relvar/Breo

HIV: guideline updates underscore 2DR efficacy, further launches planned

DOVATO: US (DHHS) and European (EACS) guidelines updated to include Dovato for first line use

Cabotegravir + rilpivirine: CRL received December 2019, working with FDA to determine next steps

Fostemsavir: FDA breakthrough designation; US approval anticipated 2020

Oncology: Regulatory submissions made for Zejula, belantamab and dostarlimab

ZEJULA: approved in US for use in 4L+ ovarian cancer in patients with gBRCA mutations or HRD+ (QUADRA); PRIMA data in 1L OC maintenance submitted to FDA

Belantamab mafodotin: Filed for treatment of relapsed/refractory* multiple myeloma; launch anticipated 1H 2020

Dostarlimab: Filed in US for the 2nd line treatment of recurrent endometrial cancer

*Patients with relapsed multiple myeloma who are refractory to an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 antibody

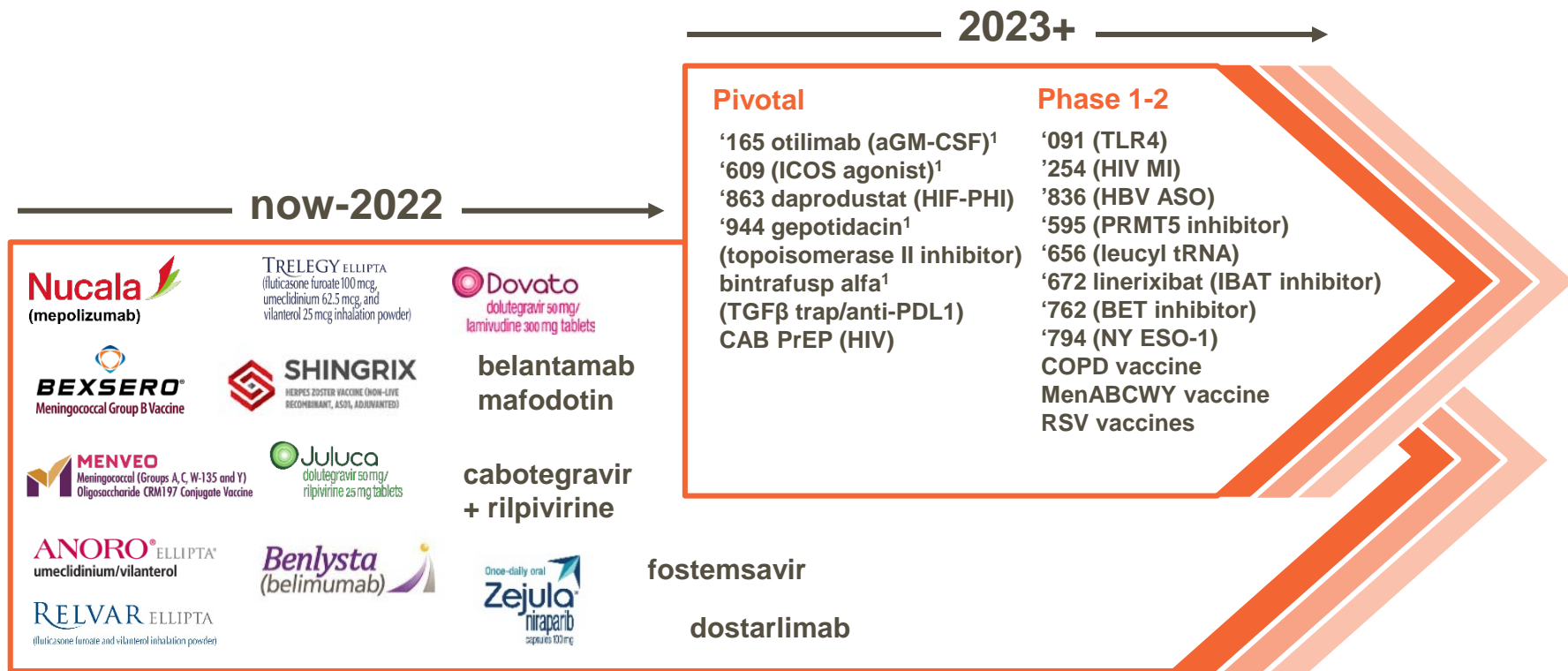
Vaccines: continued strong performance from Shingrix

SHINGRIX: 2019 sales of £1,810 million; 14 million vaccinated in the US with at least 1 dose since launch

Approval in China received May 2019; phased introduction of doses starting in 2020

Work underway on new facility to further grow capacity to meet demand

Driving our growth outlook to 2022 and beyond



1. Recently entered pivotal studies

Integration progressing rapidly



1. GSK analysis based on Nielsen, IRI and Euromonitor data; 2. Nicholas Hall's DB6 Global OTC Database, 2018

3. Based on Q4 2019 reported results of the JV and excluding any impact from planned future divestments

Preparing for 2 new companies



Investment in R&D and future growth drivers

2-year
separation
programme

New
GSK

Common approach to R&D and capital allocation
Capabilities and efficiencies in support functions
Optimise supply chain and portfolio. Divestments

New
CH

Build key technology infrastructure and
corporate functions

CH JV integration, synergy delivery and investment in
growth drivers

**New GSK: a leading
biopharma company** with
R&D focused on science of the
immune system, genetics and
advanced technologies

**New leading Consumer
Healthcare company** with
category leading power brands
and innovation based on
science and consumer insights

2019 results and 2020 guidance

Iain Mackay, CFO



Headline results



	2019	Reported growth %	
	£m	AER	CER
Turnover*	33,574	10	8
Total operating profit	6,961	27	23
Total EPS	93.9p	27	23
Adjusted operating profit*	8,972	3	-
Adjusted EPS	123.9p	4	1
Free cash flow	5,073	(11)	n/a

* For 2019 on a pro-forma basis, Turnover growth was 4% CER and Adjusted operating profit declined -3% CER

Results reconciliation



2019

	Total results	Intangible amortisation	Intangible impairment	Major restructuring	Transaction related	Disposals, significant legal and other	Adjusted results
Turnover (£bn)	33.8						33.8
Operating profit (£bn)	7.0	0.8	0.1	1.1	0.3	(0.3)	9.0
EPS (pence)	93.9	12.6	1.3	18.2	1.2	(3.3)	123.9
2018 EPS (pence)	73.7	9.6	2.0	13.1	30.2	(9.2)	119.4

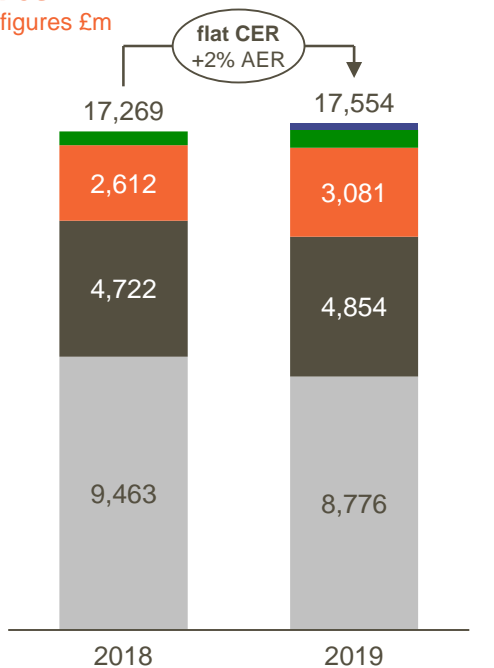
Pharmaceuticals

2019



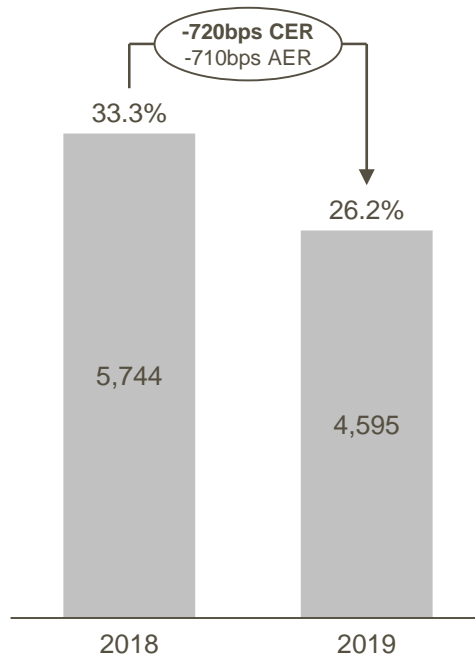
Sales

All figures £m



Oncology Respiratory Established
II HIV

Operating margin



Sales

- ⊕ New launches: Trelegy, Nucala, Juluca, Dovato
- ⊕ Ventolin AG
- ⊕ Continued strong Benlysta performance
- ⊖ Impact of generic Advair

Operating profit

- ⊕ Tight control of costs
- ⊖ Impact of generic Advair
- ⊖ Investment in R&D and new product support
- ⊖ Addition of Tesaro cost base

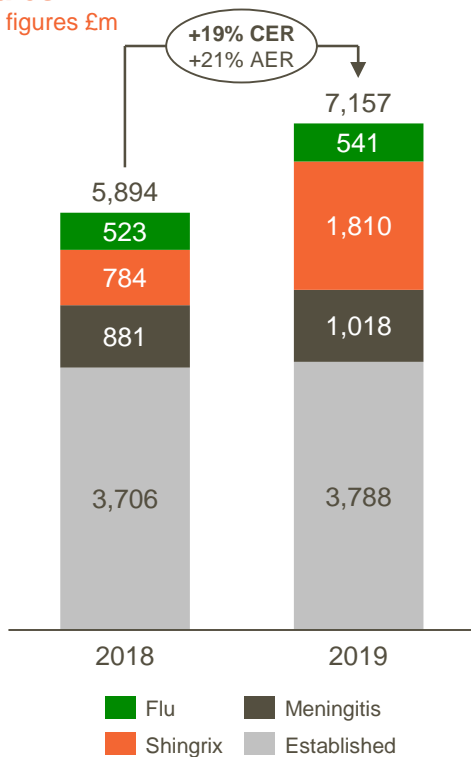
Vaccines

2019

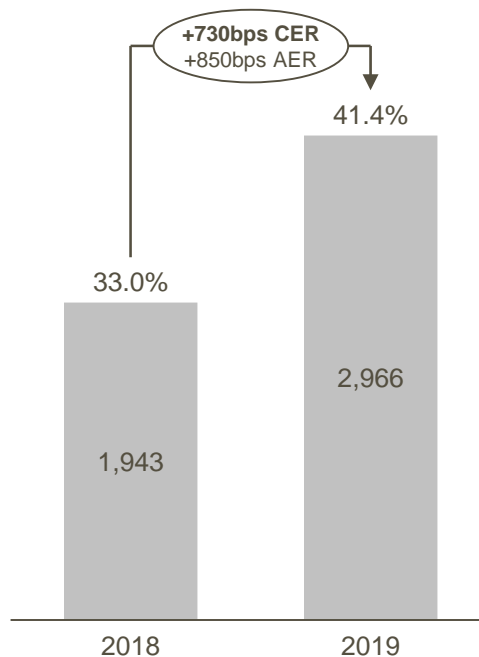


Sales

All figures £m



Operating margin



Sales

- + Shingrix demand
- + Meningitis growth
- MMRV supply constraints

Operating profit

- + Operating leverage
- + Higher royalty income

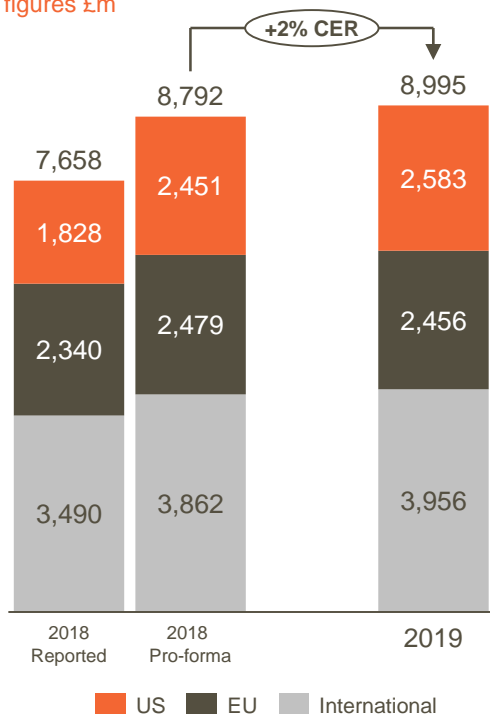
Consumer Healthcare



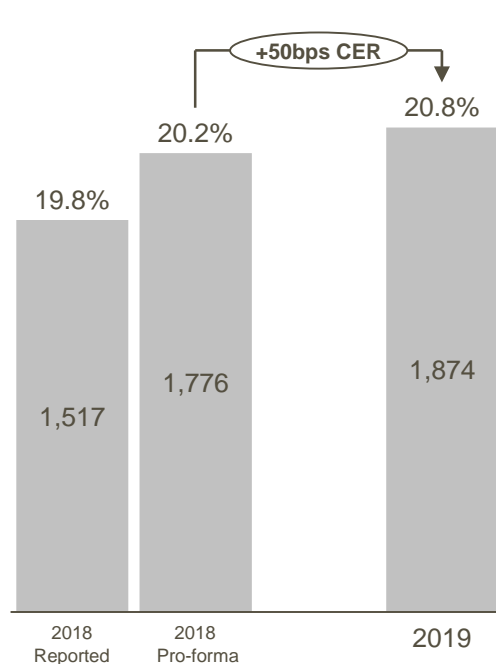
2019

Sales

All figures £m



Operating margin



Sales

- ⊕ Close of JV on 31 July
- ⊕ Power brands performance
- ⊕ Strong growth in International
- ⊖ Divestments & phasing out of contract manufacturing c.1%
- ⊖ Respiratory performance

Operating profit

- ⊕ Manufacturing restructuring benefits
- ⊕ Continued strong cost control
- ⊖ Targeted brand investment

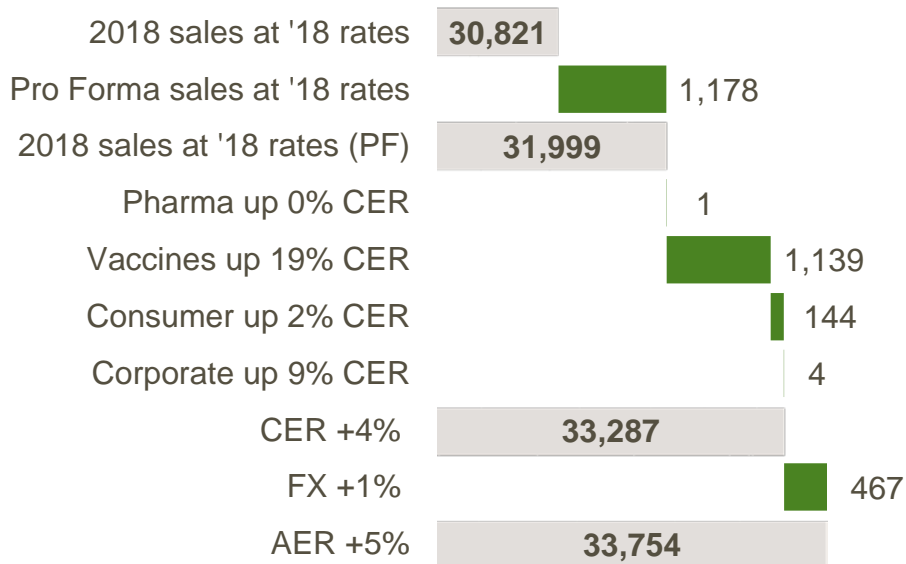
Sales and Adjusted operating margins



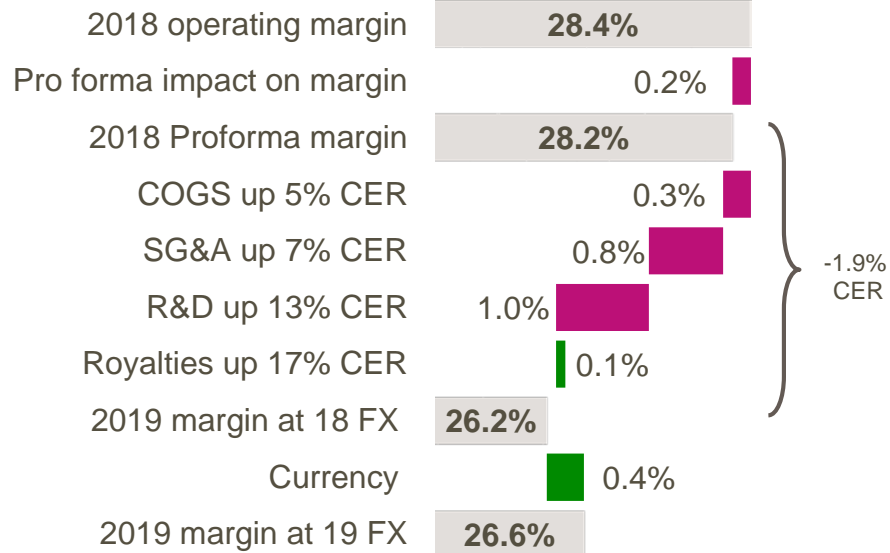
2019

Sales

All figures £m



Adjusted operating margin



Adjusted operating profit to net income



Continued delivery of financial efficiency

	2018	2019
	£m	£m
Operating profit	8,745	8,972
Net finance expense	(698)	(810)
Share of associates	31	74
Tax	(1,535)	(1,318)
Tax rate	19.0%	16.0%
Non-controlling interests	(674)	(787)
Net income	5,869	6,131

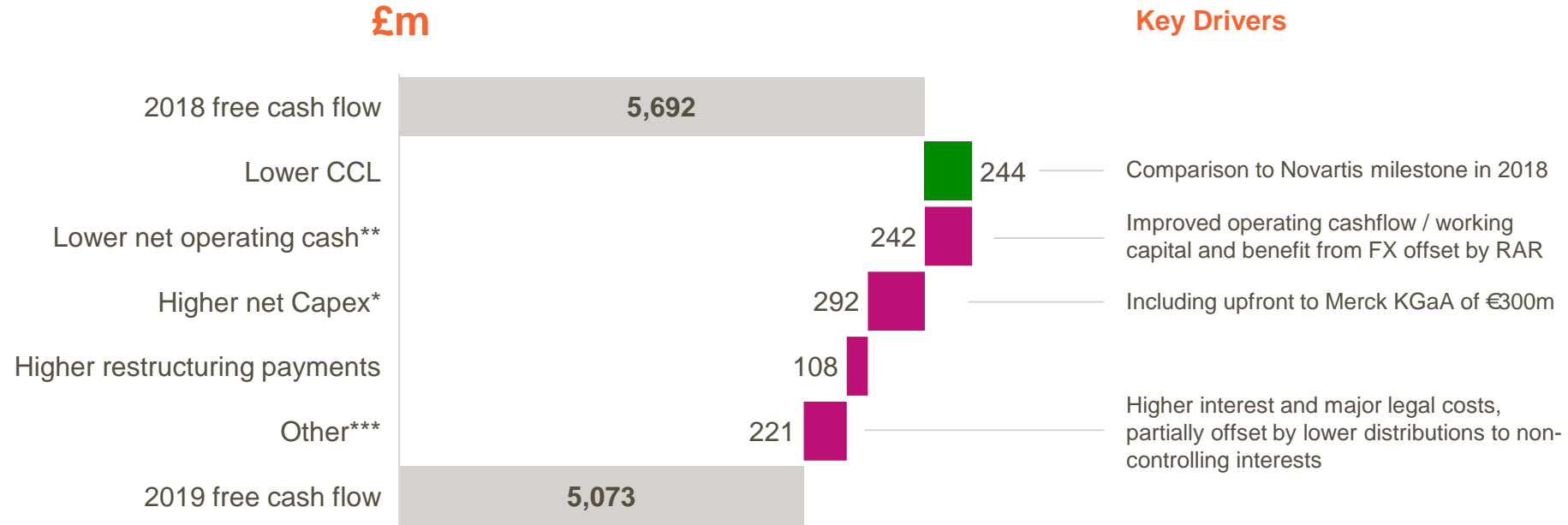
2020 Outlook*

..... Between £850-900m

..... Around 17%

* All expectations and targets regarding future performance should be read together with the "Outlook assumptions and cautionary statement" sections of the Fourth Quarter 2019 Results Announcement and the cautionary statement slide included with this presentation

2019 free cash flow of £5.1bn



CCL: contingent consideration liability

* Net Capex includes purchases less disposals of PP&E and intangibles

** Net operating cash is net cash inflow from operating activities including changes in working capital, excluding restructuring, operating CCL, and significant legal payments

*** Other includes significant legal payments, net interest paid, income from associates and JVs and distributions to minorities

Preparing for 2 new companies



2-year
separation
programme

New GSK

Common approach to R&D and capital allocation

Capabilities and efficiencies in support functions

Leaner organisation, leveraging recent and ongoing technology investments, consistent operating models and location strategy

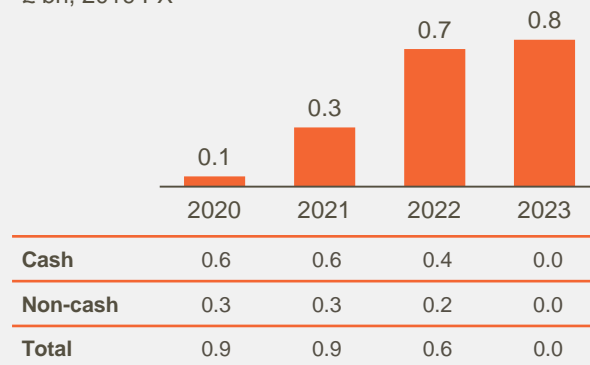
Optimise supply chain and product portfolio including through non-core divestments

25% manufacturing footprint reduction since 2017 – maintain momentum, competitive network fitting portfolio by 2022

Non-core divestment proceeds to fund cash costs of programme and delivering New GSK

Major restructuring savings and costs

£ bn, 2019 FX



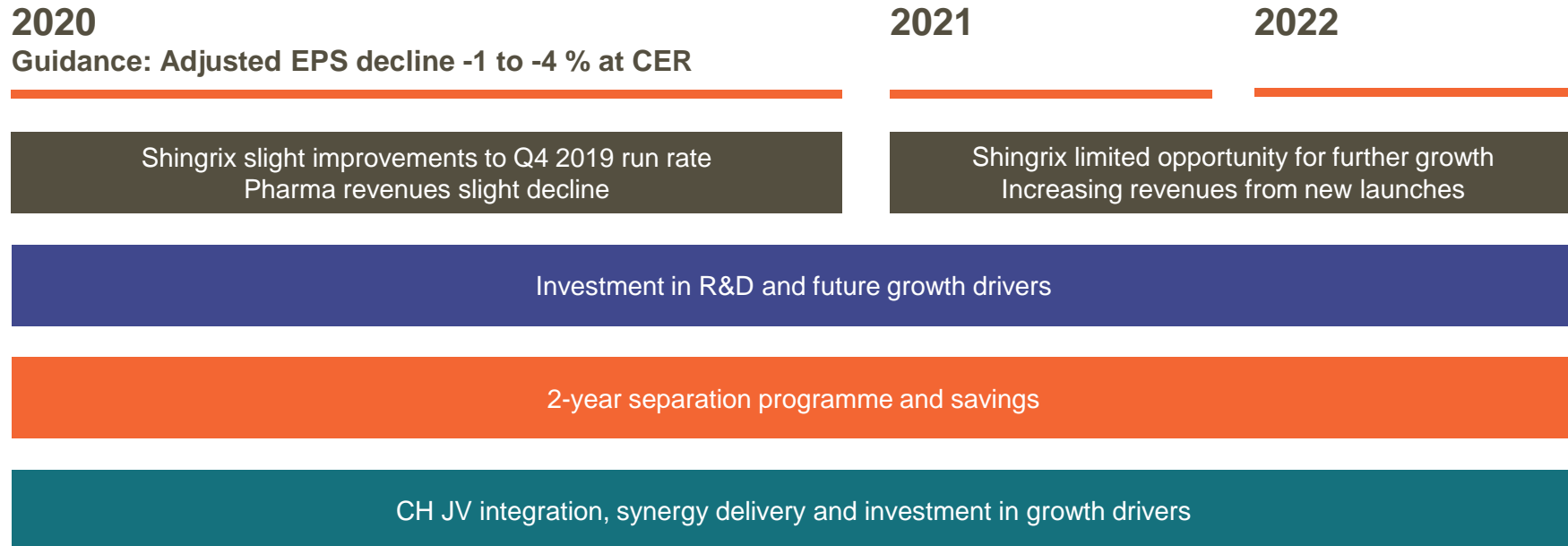
New Consumer Healthcare

Build technology infrastructure and corporate functions required to operate as a standalone company

Estimated one-time charge of £600-700m with the majority incurred prior to separation

No change to Adjusted operating margin outlook of mid-to-high 20s by 2022 for Consumer Healthcare

2020 guidance and considerations for the next two years



All expectations and targets regarding future performance should be read together with the “Outlook assumptions and cautionary statement” sections of the Fourth Quarter 2019 Results Announcement and the cautionary statement slide included with this presentation

R&D update

Dr Hal Barron, Chief Scientific Officer



Science

x

Technology

x

Culture

Strengthening our R&D pipeline through a focus on science related to the immune system, the use of human genetics, and advanced technologies

2019 saw our new approach to R&D come to life and drive significant progress



Science

Strengthened our pipeline

- 3 major approvals
 - Dovato, Dectova, Nucala pre-filled syringe
- 8 submissions
 - Zejula in 1L OC, belantamab mafodotin in 4L+ MM, dostarlimab in dMMR/MSI-H recurrent EC, cabotegravir + rilpivirine in HIV, fostemsavir in HIV, Trelegy in asthma, Zejula in 4L+ HRD+ OC, daprodustat in anaemia (Japan only)
- 6 positive data read-outs from pivotal studies
 - CAPTAIN (Trelegy), PRIMA (Zejula), DREAMM-2 (belantamab mafodotin), GARNET (dostarlimab), HES (Nucala), BLISS-LN (Benlysta)
- 4 new assets advanced in to pivotal Phase 2/3 studies
 - otilimab in RA, gepotidacin in uUTI / GC, bintrafusp alfa in BTC, ICOS in HNSCC

Technology

Realised benefits from our technology approach

- 8 joint programmes initiated with 23andMe across a broad range of disease areas
- Signed major agreements and initiated work with the Laboratory for Genomics Research and Lyell

Culture

Recognised our shifting culture

- Appointed new talent into 24% of key R&D roles with half being external hires
- Introduced annual Transformational Medicine Awards to celebrate successful delivery of our SxTxC approach

Our R&D pipeline of 39 medicines and 15 vaccines

In 2019: 20 progressions/additions, 14 terminations[^] and 3 approvals



Phase 1

3358699* (BET targeted inhibitor) [^] RA
3858279* (CCL17 inhibitor) OA pain
2636771 (PI3kb inhibitor) cancer
2983559 (RIP2k inhibitor) IBD
3511294* (IL5 LA antagonist) asthma
2292767 (PI3kd inhibitor) respiratory diseases
1795091 (TLR4 agonist) cancer
3810109* (broadly neutralizing antibody) HIV
3537142* (NYESO1 ImmTAC) cancer
3439171* (H-PGDS inhibitor) DMD
3145095 (RIP1k inhibitor) pancreatic cancer
3368715* (Type 1 PRMT inhibitor) cancer
2269557 (nemiralisib PI3Kd inhibitor) APDS
3745417 (STING agonist) cancer
3174998* (OX40 agonist) cancer
3186899* (CRK-12 inhibitor) visceral leishmaniasis
3732394 (combinectin entry inhibitor) HIV

Phase 1 Expansion/Phase 2

3640254 (maturation inhibitor) HIV
3228836* (HBV ASO) HBV
3772847* (IL33r antagonist) asthma
2982772 (RIP1k inhibitor) [^] pso/RA/UC
3377794* (NY-ESO-1 TCR) cancer
2586881* (rhACE2) acute lung injury/PAH
2330811 (OSM antagonist) systemic sclerosis
2881078 (SARM) COPD muscle weakness
525762 (molibresib, BET inhibitor) cancer
2862277 (TNFR1 antagonist) acute lung injury
2330672 (limerixibat, IBAT inhibitor) cholestatic pruritus in PBC
3326595* (PRMT5 inhibitor) cancer
GR121619* (oxytocin) postpartum haemorrhage
TSR-022* (TIM-3 antagonist) cancer
3036656* (leucyl t-RNA inhibitor) tuberculosis
2831781* (LAG3) ulcerative colitis
TSR-033* (LAG3 antagonist) cancer

Pivotal/Registration

Benlysta + Rituxan SLE**
cabotegravir** LA + rilpivirine* LA HIV
Dovato HIV
daprodustat (HIF-PHI) anaemia
fostemsavir (attachment inhibitor) HIV
Nucala COPD/HES/nasal polyps
Trelegy* asthma
Dectova* IV influenza
Nucala pre-filled syringe severe asthma
belantamab mafodotin* (BCMA ADC) multiple myeloma
Zejula* (PARP inhibitor) ovarian cancer**
dostarlimab* (PD-1 antagonist) endometrial cancer**
bintrafusp alfa* (TGFβ trap/anti-PDL1) BTC**
otilimab* (3196165) RA
gepotidacin* (2140944) uUTI and GC
3359609* (ICOS receptor agonist) HNSCC**, #

Key:

Approved

Progressed / Added

Terminated / Out-licensed

Vaccines

Shingrix immuno-compromised* – Registration
Bexsero paediatric (US) - Phase 3
MMR (US) – Phase 3
Strep pneumoniae (next gen) – Phase 2
Rotarix liquid – Registration
Therapeutic COPD* – Phase 2
RSV paediatric – Phase 2
MenABCWY – Phase 2
Menveo liquid – Phase 2
Malaria* (fractional dose) – Phase 2
Ebola – Phase 2
Shigella* – Phase 2
Tuberculosis – Phase 2
HIV* – Phase 2
RSV maternal* – Phase 2
RSV older adults* – Phase 1/2
Therapeutic HBV* – Phase 1/2
Flu Universal – Phase 1/2
Hepatitis C – Phase 1/2
C. Difficile – Phase 1
SAM (rabies model) – Phase 1

Note:

Only the most advanced indications are shown for each asset.

[^] 772 and 699 were terminated and returned to Research so may start future studies in other indications.

* In-license or other alliance relationship with third party. ** Additional indications also under investigation.

ICOS HNSCC is a Phase 2/3 study with registrational potential.

RA = rheumatoid arthritis; OA = osteoarthritis; DMD = Duchenne muscular dystrophy; APDS= activated phosphoinositide 3-kinase delta syndrome; PBC = primary biliary cholangitis; TB = tuberculosis; SLE = systemic lupus erythematosus; HES = hyper eosinophilic syndrome; BTC = biliary tract cancer; uUTI = uncomplicated urinary tract infection; GC= gonorrhoea; HNSCC = head and neck squamous cell carcinoma

In the last 12 months we have achieved 23 positive pipeline milestones



	1H 2019	2H 2019
Submission	Cabotegravir LA +rilpivirine LA HIV treatment ✓	Fostemsavir HIV ✓
	Zejula 4L ovarian cancer sNDA (QUADRA) ✓	Trelegy asthma ✓
		belantamab mafodotin 4L MM monotherapy (DREAMM-2) ✓
		dostarlimab for dMMR/MSI-H recurrent endometrial cancer (GARNET) ✓
		Zejula 1L ovarian cancer (PRIMA) ✓
		daprodustat anaemia - JAPAN ONLY ✓
Pivotal data	Trelegy asthma ✓	belantamab mafodotin 4L MM monotherapy (DREAMM-2) ✓
		Nucala HES ✓
		Zejula 1L ovarian cancer (PRIMA) ✓
		dostarlimab for dMMR/MSI-H recurrent endometrial cancer (GARNET) ✓
		Benlysta lupus nephritis (BLISS LN) ✓
PoC data	3511294 (IL5 LA antagonist) asthma ³ ✓	2982772 (RIP1 kinase) UC ✘
	2982772 (RIP1 kinase) RA ✘	3640254 (maturation inhibitor) HIV ✓
	3772847 (IL33R) asthma ✓	3326595 (PRMT5) cancer monotherapy ² ✓
	3389404/3228836 (HBV ASO) hepatitis B ✓	Zejula + bev. 1L ovarian cancer (OVARIO - single arm, safety study) ✓
	Zejula vs Zejula + bev. recurrent ovarian cancer (AVANOVA) ¹ ✓	Zejula + dostarlimab + bev. 2L+ platinum resistant ovarian cancer (OPAL) ⁴ ✓
	dostarlimab recurrent MSS/MSI-H endometrial cancer (GARNET) ✓	belantamab mafodotin 2L MM combo therapy (DREAMM-6) ✓
	2586881 (ACE2) PAH ✘	Benlysta + Rituxan Sjogren's syndrome ⇄
		525762 (BET inh) ER+ breast combo therapy

Key:

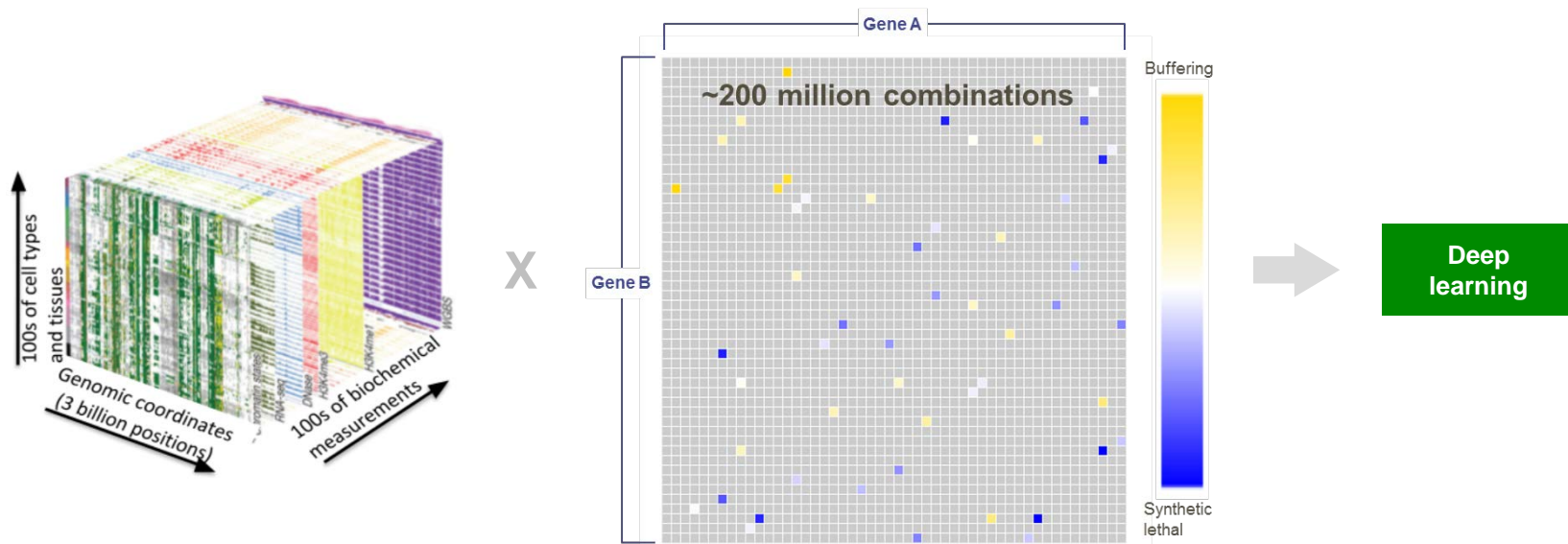
- ✓ +ve data in-house, decided to progress
- ✓ +ve data in-house, decision pending
- ⇄ data in-house, additional data needed
- ✘ -ve data in-house, return to research
- ✘ -ve data in-house, decided to terminate

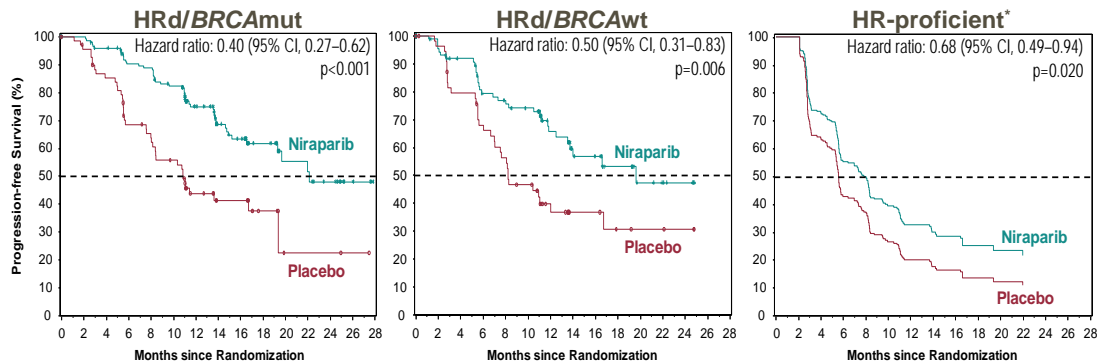
HES = hypereosinophilic syndrome
 MM = multiple myeloma
 RA = rheumatoid arthritis
 UC = ulcerative colitis
 ER+ = oestrogen receptor +
 MSI-H = microsatellite instable-high
 dMMR = deficient mismatch repair

1. Investigator sponsored study
2. From initial cohorts data
3. Interim/PK/PD confirmed
4. Data in-house and analysis ongoing

At Q2 2018 we said:

Functional genomics combined with machine learning will be powerful





HRD = homologous recombination deficient

* Curves are adjusted
Gonzales-Martin, et al, NEJM, 2019

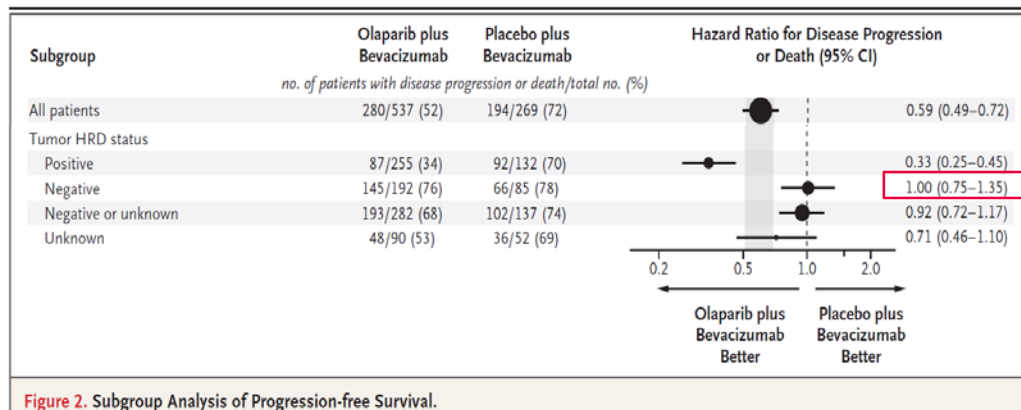


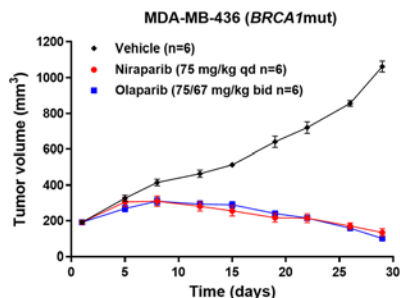
Figure 2. Subgroup Analysis of Progression-free Survival.

Note:
Without head to head studies, a head to head comparison cannot be made between the safety and efficacy of niraparib and other assets

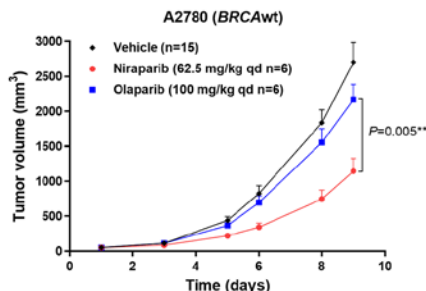
A comparative pharmacokinetic study of PARP inhibitors demonstrates favorable properties for niraparib efficacy in preclinical tumor models

Kaiming Sun¹, Keith Mikule¹, Zebin Wang¹, Grace Poon¹, Aparajitha Vaidyanathan², Gillian Smith², Zhi-Yi Zhang¹, Jeffrey Hanke¹, Sridhar Ramaswamy¹ and Jing Wang¹

BRCAmut TNBC model



BRCAwt ovarian model



“Our results show that at steady state, tumor exposure to niraparib is 3.3 times greater than plasma exposure in tumor xenograft mouse models.

In comparison, the tumor exposure to olaparib is less than observed in plasma. In addition, niraparib crosses the blood-brain barrier and shows good sustainability in the brain, whereas sustained brain exposure to olaparib is not observed in the same models.

Consistent with its favourable tumor and brain distribution, niraparib achieves more potent tumor growth inhibition than olaparib in BRCAwt models and an intracranial tumor model at maximum tolerated doses.”

4L

treatment

				Study start	Read-out	
QUADRA	pivotal	following 3-4 regimens of chemotherapy	open label, single arm study n= 461	2017	Complete	Approved

Recurrent

platinum resistant

TOPACIO	POC	recurrent OC and advanced /metastatic TNBC	niraparib + pembrolizumab (MK-3475) n~120	2016	Complete	Published in JAMA
MOONSTONE	pivotal	platinum resistant ovarian cancer	Open label, single arm nira + dostarlimab n~150	2H 2019	2021	Enrolling

Recurrent

maintenance therapy or treatment

NOVA	pivotal	platinum sensitive	niraparib vs. placebo following chemo n= 553	2013	Complete	Approved
AVANOVA*	POC	platinum sensitive	niraparib vs niraparib + bev n= ~100 (part 1 and part 2 combined)	2015	Complete	Best of ASCO 2019

1L

monotherapy and combination with novel agents

PRIMA	pivotal	maintenance following CR/PR with frontline chemo	niraparib monotherapy n~620	2016	Complete	Submitted in US Published in NEJM
OVARIO	POC	maintenance following frontline chemo+bev	single arm, open label study of niraparib + bevacizumab n~100	2018	2020	SGO 2020 presentation
FIRST	pivotal	maintenance in newly diagnosed advanced OC	Combo w/dostarlimab +/- bevacizumab n~620	2018	2023	Enrolling

RTOR

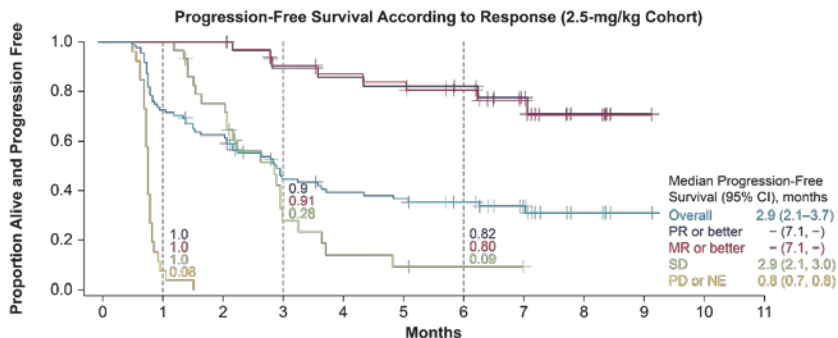
belantamab mafodotin

DREAMM-2 showed a clinically meaningful benefit with both doses



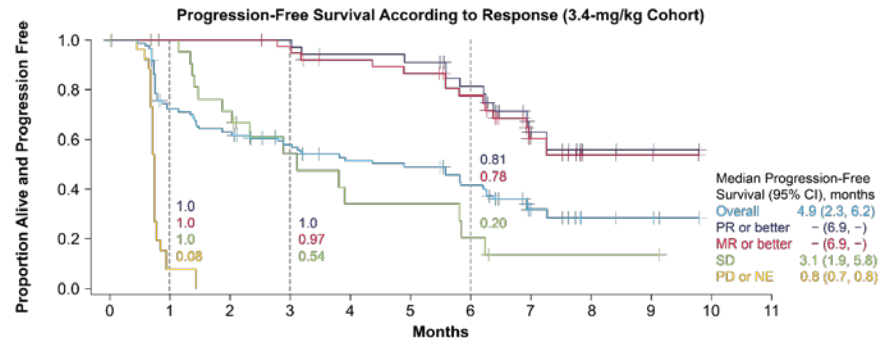
mPFS was 2.9 and 4.9 months in the 2.5-mg/kg and 3.4-mg/kg groups, not reached in patients with MR or better

A. PFS survival by response (belantamab mafodotin 2.5-mg/kg)



Number at risk (number of events)	0	1	2	3	4	5	6	7	8	9	10	11
All patients	97 (0)	64 (24)	54 (33)	34 (47)	29 (51)	27 (53)	22 (54)	14 (55)	5 (56)	1 (56)	0 (56)	
PR or better	30 (0)	30 (0)	30 (0)	25 (3)	23 (4)	22 (5)	19 (5)	13 (6)	4 (7)	1 (7)	0 (7)	
MR or better	33 (0)	33 (0)	33 (0)	28 (3)	26 (4)	25 (5)	21 (6)	14 (7)	5 (8)	1 (8)	0 (8)	
SD	30 (0)	29 (0)	21 (7)	6 (18)	3 (21)	2 (22)	1 (22)	0 (22)				
PD or NE	34 (0)	2 (24)	0 (26)									

B. PFS survival by response (belantamab mafodotin 3.4-mg/kg)



Number at risk (number of events)	0	1	2	3	4	5	6	7	8	9	10	11
All patients	99 (0)	62 (24)	54 (32)	45 (36)	38 (41)	36 (43)	29 (48)	10 (54)	4 (55)	3 (55)	0 (55)	
PR or better	34 (0)	34 (0)	34 (0)	34 (0)	31 (2)	30 (3)	25 (6)	9 (11)	3 (12)	2 (12)	0 (12)	
MR or better	39 (0)	39 (0)	39 (0)	37 (1)	33 (3)	31 (5)	26 (8)	9 (13)	3 (14)	2 (14)	0 (14)	
SD	23 (0)	21 (0)	15 (6)	8 (9)	5 (12)	5 (12)	3 (14)	1 (15)	1 (15)	1 (15)	0 (15)	
PD or NE	37 (0)	2 (24)	0 (26)									

Post-hoc analysis. Responses in intent-to-treat population as assessed by IRC according to 2016 IMWG criteria (Kumar S et al. *Lancet Oncol* 2016;17:e328–346).

IMWG, International Myeloma Working Group; IRC, independent review committee; MR, minimal response; NE, not evaluable; PD, progressive disease; PFS, progression-free survival; PR, partial response; SD, stable disease.

Lional S et al. *Lancet Oncology*, 2019, epub ahead of print

belantamab mafodotin

DREAMM-9 initiated and DREAMM-7 on track to start 1H 2020



Development strategy for use in:

4L/3L

monotherapy and combinations

				Study start	Est launch
DREAMM-1	pilot	relapsed/ refractory patients	Belantamab mafodotin monotherapy, single arm, n=73	2014	---
DREAMM-2	pivotal	daratumumab failures	Belantamab mafodotin monotherapy, single arm, n=223	Jun 2018	2020
DREAMM-3	pivotal	failed lenalidomide and proteasome inhibitor	Belantamab mafodotin monotherapy vs. PomDex, n=320	1H 2020	2023
DREAMM-4	pilot	relapsed/ refractory patients	Belantamab mafodotin + PD1 combination, single arm, n=40	Mar 2019	---
DREAMM-5	pilot	relapsed/ refractory patients	Belantamab mafodotin + novel combinations platform study, n=514	Oct 2019	---

BLA accepted, MAA validated
Published in Lancet Oncology

2L

combination with SOC

DREAMM-6	pilot	failed 1 prior therapy	Belantamab mafodotin+LenDex OR +BorDex, open label, n= 99	Oct 2018	---
209418	ISS	relapsed/ refractory patients	Belantamab mafodotin+PomDex, n= 78	Jan 2019	---
DREAMM-7	pivotal	failed 1 prior therapy	Belantamab mafodotin+BorDex vs. Dara+BorDex, n= 478	1H 2020	2024
DREAMM-8	pivotal	failed 1 prior therapy	'916+PomDex vs. PomBorDex, n= 450	2H 2020	2023

1L

combination with novel
and SOC agents

DREAMM-9	pivotal	transplant ineligible	Belantamab mafodotin+BorLenDex vs. BorLenDex; n=798	Jan 2020	---
DREAMM-10	pivotal	transplant ineligible	Belantamab mafodotin+novel agent vs SOC, n=TBC	2021	---

belantamab mafodotin

Lower dose provides similar efficacy with a better safety profile



Number of patients with event (safety population), n (%) [*]	Belantamab mafodotin, 2.5 mg/kg (N=95)				Belantamab mafodotin, 3.4 mg/kg (N=99)			
	Grade 1-2	Grade 3	Grade 4	Grade 5	Grade 1-2	Grade 3	Grade 4	Grade 5
Keratopathy or corneal epithelium changes[†]	41 (43)	26 (27)	0	0	53 (54)	20 (20)	1 (1)	0
Thrombocytopenia [‡]	14 (15)	8 (8)	11 (12)	0	24 (24)	11 (11)	22 (22)	1 (1)
Anemia	4 (4)	19 (20)	0	0	12 (12)	22 (22)	3 (3)	0
Blurred vision [§]	17 (18)	4 (4)	0	0	28 (28)	2 (2)	0	0
Increased aspartate aminotransferase	17 (18)	2 (2)	0	0	18 (18)	6 (6)	0	0
Fatigue	13 (14)	2 (2)	0	0	21 (21)	5 (5)	0	0
Dry eye ^{**}	12 (13)	1 (1)	0	0	23 (23)	0	0	0
Neutropenia ^{††}	4 (4)	5 (5)	4 (4)	0	12 (12)	12 (12)	3 (3)	0

- 71% of patients experienced keratopathy, about a quarter (24%) of whom were asymptomatic
- 27% of patients experienced Grade 3 keratopathy
- 1% of patients discontinued therapy due to keratopathy
- Keratopathy was appropriately diagnosed and managed by the DREAMM-2 investigators in collaboration with ophthalmologists and optometrists

Lonial S et al. *Lancet Oncology*, 2019, epub ahead of print; Data on visual acuity referenced is GSK data on file.

Listed in order of decreasing frequency of Any Grade events in the 2.5-mg/kg cohort. ^{*}Events reported based on Common Terminology Criteria for Adverse Events criteria v4.03 in the safety population (including all patients who received at least one dose of trial treatment). [†]Keratopathy or corneal epithelium changes (considered an adverse event of special interest [AESI]) were observed by ophthalmic examination. [‡]Thrombocytopenia (considered an AESI) includes preferred terms thrombocytopenia, decreased platelet count, and cerebral hemorrhage. [§] Blurred vision includes preferred terms vision blurred, diplopia, visual acuity reduced and visual impairment. [¶]Infusion-related reactions (considered an AESI) includes preferred terms infusion-related reaction, pyrexia, chills, diarrhea, nausea, asthenia, hypertension, lethargy, tachycardia, vomiting, cough and hypotension occurring within 24 hours of infusion. ^{**}Dry eye includes preferred terms dry eye, ocular discomfort, eye pruritus and foreign body sensation in eye. ^{††}Neutropenia includes neutropenia, febrile neutropenia and neutrophil count decreased. Lonial S et al. *Lancet Oncology*, 2019, epub ahead of print.

Progressing our innovative new medicines

Building momentum with impactful programmes across the portfolio



GSK '836 in chronic Hepatitis B

- Programme in-licensed from Ionis Pharmaceuticals in Q3 2019
- Ph2a data presented at AASLD (Nov)¹
- HBsAg reduction seen in HBeAg positive and negative patients with 300mg dose

Ph2b study start targeted by end 2020

gepotidacin in uUTIs and gonorrhoea

- uUTI and GC not addressed by new oral antibiotics in 20 years
- ~40% of uUTI patients have antibiotic resistance infections²
- Emerging resistance to 1st line therapy for gonorrhoea^{3,4,5}
- Ph3 programme initiated to investigate gepo vs. ceftriaxone + azithromycin (GC) and gepo vs. nitrofurantoin (uUTI)

Ph3 results expected by end 2021

GSK '609 ICOS agonist in HNSCC

- Demonstrated activity in both monotherapy and PD-1 combo
- Ph2/3 INDUCE-3 study in HNSCC initiated (combo with pembrolizumab)
- Design allows progression to pivotal if interim analysis positive

Multiple POCs in 2H 2020 and 1H 2021

daprodustat in anaemia

- Futility analysis performed Dec 2019 on CV outcome studies, which are continuing without modification
- Filed in Japan for anaemia due to chronic kidney disease
- Topline data from Ph3 cardiovascular outcome study est. 2022

PMDA decision anticipated by end 2020

uUTIs = uncomplicated urinary tract infections; GC = urogenital gonorrhoea; HNSCC = head and neck squamous cell carcinoma; POC = proof of concept; PMDA = Pharmaceuticals and Medicines Device Agency

1. Yuen MF et al. Phase 2a, randomized, double-blind, placebo-controlled study of an antisense inhibitor (ISIS 505358) in treatment-naïve chronic hepatitis B (CHB) patients: safety and antiviral efficacy. Poster presented at AASLD, The Liver Meeting, November 8-12, 2019, Boston.

2. World Health Organization STD Fact Sheet 2016: [https://www.who.int/en/news-room/fact-sheets/detail/sexually-transmitted-infections-\(stis\)](https://www.who.int/en/news-room/fact-sheets/detail/sexually-transmitted-infections-(stis))

3. Workowski KA, Berman SM, Douglas Jr. JM. Emerging antimicrobial resistance in Neisseria gonorrhoeae: urgent need to strengthen prevention strategies. *Ann Intern Med.* 2008;148(8):606-13

4. Antibiotic Resistance Threats in the United States. US CDC <https://www.cdc.gov/drugresistance/biggest-threats.htm>

5. GSK US physician market research, 2019

Accelerating our innovative vaccine candidates

Key data anticipated this year for RSV and COPD



Respiratory syncytial virus (RSV) vaccine

- 177,000 hospitalisations and 14,000 deaths in older adults
- 50% of infants are infected before 1 year of age, and virtually everyone gets an RSV infection by 2 years of age
- Targeting protection across all ages with high burden

1) Maternal

- Maternal antibodies to confer protection for first 6 months
- ~4m annual birth cohort*

2) Paediatric

- Immunological priming to confer protection from 4 months to 2 years old
- ~4m annual birth cohort*

3) Older adults

- Adjuvant to confer protection beyond 60 years of age
- ~70m age 60+**

All three candidates have FDA fast track designation and key data in 2020

COPD therapeutic vaccine

- Targeted at reducing acute exacerbations
- 75% of exacerbations are linked to infections¹: 30-45% are associated with two bacteria (haemophilus influenzae and moraxella catarrhalis)²
- Extracted functional antigen from these bacteria and combined with GSK's AS01e adjuvant system
- Ph2 POC study ongoing in adults age 40-80 with COPD

POC data expected H2 2020

1. Sethi & Murphy 2008 and Sethi S & Murphy N Engl J Med 2008

2. Wilkinson et al Thorax 2017.

* US birth cohort: <https://www.cdc.gov/nchs/fastats/births.htm>.

** US Census: <https://www.census.gov/data/tables/2018/demo/age-and-sex/2018-older-population.html>

Improving our lifecycle management

Strengthening the partnership between Development and Commercial



Benlysta for lupus nephritis

- Lupus nephritis (LN) is a common and serious complication of systemic lupus erythematosus (SLE)
- Active LN can occur in up to 60% of adults with SLE and remains an indicator of poor prognosis^{1,2,3}
- Positive headline results seen in Ph3 BLISS-LN study with primary and all secondary endpoints met
- Potential to be the first US approved therapy for LN

Submission on-track for 1H 2020

Nucala for HES, COPD and NP

- First treatment to demonstrate significant reduction in flares for patients with Hypereosinophilic Syndrome (HES)
- Pivotal HES study showed 50% reduction in flares and regulatory submission is on-track for 1H 2020
- First patient dosed in pivotal COPD study
- Pivotal nasal polyps (NP) study aims to be the first Ph3 study to show impact of an anti-IL-5 on NP

Ph3 NP study on-track to report 1H 2020

Trelegy for asthma

- ~30% of asthma patients on ICS/LABA still experience symptoms⁴
- Positive headline results reported from the Ph3 CAPTAIN study in May 2019
- sNDA successfully filed in Oct 2019
- Potential to be the first and only single inhaled triple therapy approved in the US for asthma and COPD patients

FDA decision anticipated in 2020

1. Saxena et al. Lupus nephritis: current update. *Arthritis Research & Therapy* 2011, 13:240

2. Gordon C, Hayne D, Pusey C, et al. European Consensus Statement on the Terminology used in the Management of Lupus Glomerulonephritis. *Lupus* 2009;18:257-26

3. Waldman M and Appel GB. Update of the Treatment of Lupus Nephritis. *Kidney International* 2006;70:1403-1412.

4. Sulaiman I, Greene G, MacHale E, et al. A randomised clinical trial of feedback on inhaler adherence and technique in patients with severe uncontrolled asthma. *Eur Respir J* 2018;51.

Embedding our approach of using human genetics, functional genomics and AI/machine learning



Human genetics is starting to deliver



23 and Me collaboration

- 8 joint programmes ongoing in oncology, immunology, neurology and cardiovascular
- First project will enter the clinic in 2020
- Database of 10 million+ customers with 80% deciding to participate in research
- All data are anonymized and deidentified

Erik Ingelsson, previously Professor of Medicine and Genetics at Stanford, appointed SVP Human Genetics, GSK

Functional genomics work is initiating



Laboratory for Genomics Research

- Joint Steering Committee initiated
- Recruitment underway for a Director
- Secondment programme for GSK scientists has been initiated
- On-track to select 3 joint projects and start university-funded projects in 1H 2020

AI/ML capability is growing fast

- ~50 engineers based across 5 global sites; target to grow to 80 by year-end
- Data inside GSK is on-track to double in 2020 vs baseline of its entire history
- Launched Fellows programme in London for 10 early career ML experts
- Evaluating key impact areas, such as target discovery, drug design / manufacturing and companion software

Upcoming GSK R&D pipeline milestones

Potential for a number of approvals in 2020



	1H 2020	2H 2020	1H 2021
Anticipated approval	<ul style="list-style-type: none"> belantamab mafodotin 4L MM monotherapy (DREAMM-2) ZeJula 1L ovarian cancer (PRIMA) 	<ul style="list-style-type: none"> Fostemsavir HIV dostarlimab for dMMR/MSI-H recurrent endometrial cancer (GARNET) Trelegy asthma daprodustat anaemia - JAPAN ONLY 	<ul style="list-style-type: none"> Nucala HES Benlysta monotherapy for lupus nephritis
Anticipated submission	<ul style="list-style-type: none"> Nucala HES Benlysta monotherapy for lupus nephritis 	<ul style="list-style-type: none"> Nucala NP 	<ul style="list-style-type: none"> Benlysta + Rituxan SLE
Pivotal data	<ul style="list-style-type: none"> Nucala NP daprodustat (HIF-PHI) anaemia* ✓ 	<ul style="list-style-type: none"> Benlysta + Rituxan SLE 	<ul style="list-style-type: none"> bintrafusp alfa BTC
PoC data	<ul style="list-style-type: none"> 2881078 (SARM) COPD muscle weakness 3174998 (OX40) + 1795091 (TLR4) cancer combo therapy* 525762 (BET inh) ER+ breast combo therapy 	<ul style="list-style-type: none"> 2831781 (LAG3) UC* 3377794 (NY-ESO) MM & NSCLC* therapy 1795091 (TLR4) + ICOS/pembro cancer combo therapy* 3036656 (leucyl t-RNA) tuberculosis 2330672 (linerixibat, IBAT inhibitor) cholestatic pruritus in PBC¹ 525762 (BET inh) mCRPC combo therapy 3359609 (ICOS) + CTL4 cancer combo therapy belantamab mafodotin combination with PD-1 in MM (DREAMM-4) COPD vaccine RSV older adults vaccine* RSV maternal vaccine 	<ul style="list-style-type: none"> belantamab mafodotin 1L MM combo therapy (DREAMM-9)** 3359609 (ICOS) mono & combo therapy lung platform

Key:

- ✓ +ve data in-house, decided to progress
- ✓ +ve data in-house, decision pending
- ↔ data in-house, additional data needed
- ✂ -ve data in-house, return to research
- ✖ -ve data in-house, decided to terminate

* Interim analysis (internal) ** Safety run in data 1. Ph2b study

HES = hypereosinophilic syndrome
 MM = multiple myeloma
 NP = nasal polyposis
 SLE = systemic lupus erythematosus
 UC = ulcerative colitis
 NSCLC = non-small cell lung cancer
 dMMR = deficient mismatch repair

ER+ = oestrogen receptor+
 mCRPC = metastatic castration resistant prostate cancer
 MSI-H = microsatellite instable-high
 PBC = primary biliary cholangitis
 EC = endometrial cancer
 BTC = biliary tract cancer
 uUTI = uncomplicated urinary tract infection

Significant progress on our long term priorities in 2019



Innovation

Performance

Trust



Driving new Innovation approach

6 positive data read-outs from pivotal studies

Driving transition to 2DRs in HIV

8 submissions and 4 new assets into pivotal studies

Strengthened commercial performance

Increased Shingrix capacity

Building Specialty capability

New Consumer JV with Pfizer

Continued progress in Global Health

Top ranked in the DJSI for pharma industry

Focus on execution as we prepare for the future



2020 focus

Innovation

- Execution of launches
- Continue to strengthen pipeline

Performance

- Drive growth and operating performance
- Build Specialty capability
- Integration of Pfizer consumer health
- Prepare for separation

Trust

- Regular updates on innovation
- Global health focused for impact
- Modern employer

Culture

- Progress pipeline
- Drive operating performance
- Successful integration
- Prepare for 2 new companies

New GSK: a leading biopharma company with R&D focused on science of the immune system, genetics and advanced technologies

New leading Consumer Healthcare company with category leading power brands and science and consumer insights

Q&A



Appendix



Adjusted EPS/Dividend

Adjusted EPS guidance:

Decline -1% to -4% at CER excluding divestments

Dividend

Expect 80p for 2020

Pharmaceuticals

Turnover

Slight decline excluding divestments

Operating costs

SG&A and R&D

R&D investment to grow at a similar rate to 2019

Continued investment in new launches and building specialty capability

Vaccines

Turnover

Annualising Shingrix Q419 performance with some slight improvements is a reasonable run rate for 2020

Other

Royalties

Around £300m

Net finance expense

Between £850-900m

Effective Tax rate

Around 17%

Consumer Healthcare

Turnover

Revised external category reporting structure to be in place from Q1 2020

Transaction

Nutrition sale to Unilever expected around the end of Q1 2020¹

Note: all outlooks at CER. Full 2020 EPS guidance can be found on page 2 of our Fourth Quarter 2019 press release.

All expectations and targets regarding future performance should be read together with the "Outlook assumptions and cautionary statement" sections of the Fourth Quarter 2019 Results Announcement and the cautionary statement slide included with this presentation

¹ Subject to legal and regulatory approvals

2019 currency sales exposure

US \$	41 %
Euro €	18 %
Japanese ¥	6 %
Other*	35 %

- The other currencies that each represent more than 1% of Group sales are: Australian Dollar, Brazilian Real, Canadian Dollar, Chinese Yuan, Indian Rupee, Russian Rouble.
- In total they accounted for 13% of Group revenues in 2019.

2020 Adjusted EPS ready reckoner

US \$

10 cents movement in average exchange rate for full year impacts Adjusted EPS by approx. +/- 5.5%

Euro €

10 cents movement in average exchange rate for full year impacts Adjusted EPS by approx. +/- 1.5%

Japanese ¥

10 Yen movement in average exchange rate for full year impacts Adjusted EPS by approx. +/- 1.0%

If exchange rates were to hold at the closing rates on 31 January 2020 (\$1.31/£1, €1.19/£1 and Yen 143/£1) for the rest of 2020, the estimated negative impact on 2020 Sterling turnover growth would be around 3% and if exchange gains or losses were recognised at the same level as in 2019, the estimated negative impact on 2020 Sterling Adjusted EPS growth would be around 5%.

Expected costs and savings under Major Restructuring Programmes



Date Announced	£bn 2019 Average Rates	Cumulative Actuals to 2018	2019	2020	2021	2022	2023	
			Actuals	Projected ¹				
Combined Integration & Restructuring Programme ³	2015	Savings ²	3.9	4.2	4.3			
		Total charges	5.2	0.1	0.1			
		Cash payments	3.6	0.3	0.1			
2018 Restructuring Programme (incl. Tesaro)	Q2'18	Savings ²		0.2	0.4	0.5		
		Total charges	0.4	0.8	0.4	0.2		
		Cash payments	0.0	0.2	0.3	0.2	0.1	
Consumer JV	Dec-18	Synergies ²			0.2	0.4	0.5	
		Total charges		0.3	0.5	0.1	0.1	
		Cash payments		0.2	0.4	0.1	0.0	
Separation Preparation Programme ⁴	Feb-20	Savings ²			0.1	0.3	0.7	0.8
		Total charges			0.9	0.9	0.6	0.0
		Cash payments			0.5	0.7	0.4	0.0

¹ All expectations and targets regarding future performance should be read together with the "Outlook assumptions and cautionary statement" sections of the Fourth Quarter 2019 Results Announcement and the cautionary statement slide included with this presentation.

² Savings and synergies shown are cumulative for the programme to date throughout the table

³ The Combined Integration and Restructuring programme is substantially complete, therefore GSK will cease external reporting of total costs and benefits for this programme from 2020 onward.

⁴ Does not include additional one-time costs to prepare Consumer Healthcare for separation, estimated at £600-700m, excluding transaction costs

Our R&D pipeline

39 medicines and 15 vaccines



Phase 1

3858279* (CCL17 antagonist) OA pain
3745417 (STING agonist) cancer
3186899* (CRK-12 inhibitor) visceral leishmaniasis
3511294* (IL5 LA antagonist) asthma
1795091 (TLR4 agonist) cancer
3810109* (broadly neutralizing antibody) HIV
3537142* (NYESO1 ImmTAC) cancer
3439171* (H-PGDS inhibitor) DMD
3368715* (Type 1 PRMT inhibitor) cancer
2269557 (nemiralisib, PI3Kd inhibitor) APDS
3174998* (OX40 agonist) cancer
3732394 (combinectin, entry inhibitor) HIV

Phase 1 Expansion/Phase 2

3640254 (maturation inhibitor) HIV
3228836* (HBV ASO) HBV
3772847* (IL33r antagonist) asthma
3377794* (NY-ESO-1 TCR) cancer
2330811 (OSM antagonist) systemic sclerosis
2881078 (SARM) COPD muscle weakness
525762 (molibresib, BET inhibitor) cancer
2330672 (lineroxibat, IBATi) cholestatic pruritus in PBC
3326595* (PRMT5 inhibitor) cancer
GR121619* (oxytocin) postpartum haemorrhage
TSR-022* (TIM-3 antagonist) cancer
3036656* (leucyl t-RNA inhibitor) TB
2831781* (LAG3) ulcerative colitis
TSR-033* (LAG3 antagonist) cancer

Pivotal/Registration

Benlysta + Rituxan SLE**
cabotegravir** LA + rilpivirine* LA HIV
daprodustat (HIF-PHI) anemia
fostemsavir (attachment inhibitor) HIV
Nucala COPD/HES/nasal polyps
Trelegy* asthma
belantamab mafodotin* (BCMA ADC) multiple myeloma
Zejula* (PARP inhibitor) ovarian cancer**
dostarlimab* (PD-1 antagonist) endometrial cancer**
bintrafusp alfa* (TGFβ trap/anti-PDL1) BTC**
otilimab* (3196165) RA
gepotidacin* (2140944) uUTI and GC
3359609* (ICOS receptor agonist) HNSCC**1

Vaccines

Shingrix immuno-compromised* – Registration
Bexsero pediatric (US) – Phase 3
MMR (US) – Phase 3
Rotarix liquid – Registration
Therapeutic COPD* – Phase 2
RSV paediatric – Phase 2
MenABCWY – Phase 2
Menveo liquid – Phase 2
Malaria* (fractional dose) – Phase 2
Shigella* – Phase 2
RSV maternal* – Phase 2
RSV older adults* – Phase 1/2
Therapeutic HBV* – Phase 1/2
C. Difficile – Phase 1
SAM (rabies model) – Phase 1

Note: Only the most advanced indications are shown for each asset

Upcoming milestones that will inform our progress



	2H 2019	1H 2020	2H 2020	1H 2021	2H 2021
Anticipated submission	fostemsavir (attachment inhibitor) HIV ✓	Nucala HES	Nucala NP	Benlysta + Rituxan SLE	bintrafusp alfa BTC
	Trelegy asthma ✓	Benlysta lupus nephritis			
	belantamab mafodotin 4L MM monotherapy (DREAMM-2) ✓				
	dostarlimab dMMR/MSI-H recurrent endometrial cancer (GARNET) ✓				
	Zejula 1L ovarian cancer (PRIMA) ✓				
	daprodustat (HIF-PHI) anemia - JAPAN ONLY ✓				
Pivotal data	belantamab mafodotin 4L MM monotherapy (DREAMM-2) ✓	Nucala NP	Benlysta + Rituxan SLE	bintrafusp alfa BTC	Gepotidacin bacterial infections
	Nucala HES ✓	daprodustat (HIF-PHI) anemia* ✓			dostarlimab combo with CT 1L EC (RUBY)
	Zejula 1L ovarian cancer (PRIMA) ✓				Zejula + dostarlimab 2L+ PROC ovarian cancer (MOONSTONE)
	dostarlimab dMMR/MSI-H and MSS recurrent endometrial cancer (GARNET) ✓				
	Benlysta lupus nephritis (BLISS LN) ✓				
PoC data	2982772 (RIP1 kinase) UC^ ✗	2881078 (SARM) COPD muscle weakness	2831781 (LAG3) UC*	belantamab mafodotin (BCMA) 1L combo in MM (DREAMM-9)**	TSR-022 NSCLC (AMBER)
	3640254 (maturation inhibitor) HIV ✓	3174998 (OX40) + 1795091 (TLR4) cancer combo therapy*	3377794 (NY-ESO) MM & NSCLC* therapy	3359609 (ICOS) mono & combo therapy lung platform	Key:
	3326595 (PRMT5) cancer monotherapy ² ✓	525762 (BET inh) ER+ breast combo therapy	1795091 (TLR4) + ICOS/ pembro cancer combo therapy*		✓ +ve data in-house, decided to progress
	Zejula + bev. 1L ovarian cancer (OVARIO: single arm, safety study) ✓		3036656 (leucyl t-RNA) tuberculosis		✓ +ve data in-house, decision pending
	Zejula + dostarlimab + bev. 2L+ platinum resistant ovarian cancer (OPAL) ³ ✓		2330672 (limerixibat, IBAT inhibitor) cholestatic pruritus in PBC ¹		↔ data in-house, additional data needed
	Benlysta + Rituxan Sjogren's syndrome ↔		525762 (BET inh) mCRPC combo therapy		✗ -ve data in-house, return to research
	belantamab mafodotin (BCMA) 2L MM combo therapy (DREAMM-6) ✓		3359609 (ICOS) +CTL4 cancer combo therapy		✗ -ve data in-house, decided to terminate
			belantamab mafodotin (BCMA) PD-1 combo in MM (DREAMM-4)		
			COPD vaccine		
			RSV older adults vaccine*		
		RSV maternal vaccine			

HES: hypereosinophilic syndrome; MM: multiple myeloma; NP: Nasal polyposis; RA: rheumatoid arthritis; SLE: systemic lupus erythematosus; UC: ulcerative colitis; NSCLC: non-small cell lung cancer ER+: estrogen receptor + ; mCRPC: metastatic castration resistant prostate cancer; MSI-H: Microsatellite Instable- high, dMMR: deficient mismatch repair; PBC- primary biliary cholangitis; EC- endometrial cancer; BTC - biliary tract cancer

^Further research to be conducted *Interim Analysis (internal) **Safety run data 1. Ph2b study 2. From initial cohorts data 3. Data in-house and analysis ongoing

Changes in portfolio since Q3 2019



Changes to pipeline

New to Phase I	New to Phase I expansion/ Phase II	New to Pivotal	New to Registration
	TSR-033 (LAG3 antagonist) cancer started Phase I expansion RSV maternal started Phase II	GSK3359609 (ICOS receptor agonist) started Ph2/3 study in HNSCC	belantamab mafodotin (BCMA immunoconjugate) 4L+ multiple myeloma fostemsavir (attachment inhibitor) HIV dostarlimab (PD-1) recurrent dMMR/MSI-H endometrial cancer (GARNET) Zejula (PARP) 1L ovarian cancer (PRIMA) Shingrix immuno-compromised Rotarix liquid
Removed from Phase I	Removed from Phase I expansion/ Phase II	Removed from Pivotal	Removed from Registration
GSK3358699 (targeted BET inhibitor) RA moved back to research GSK2636771 (PI3kb inhibitor) cancer – ongoing investigator sponsored studies will continue	Tuberculosis vaccine (out licensed) HIV vaccine		

Changes to milestones

Zejula + dostarlimab (PARP + PD-1) 2L+ PROC ovarian cancer (MOONSTONE): **pivotal data moved from 2H2020 to 2H2021**

belantamab mafodotin (BCMA immunoconjugate) 1L MM (DREAMM-9): **combination therapy dose data moved from 1H2020 to 1H2021**

TSR-022 (TIM-3) NSCLC (AMBER): **PoC data moved from 2H2020 to 2H2021**

GSK525762 (BET) ER+ breast cancer combination: **PoC data moved from 2H2019 to 1H2020**

GSK2330811 (OSM antagonist) for systemic sclerosis: **PoC data in 2H2020 removed from chart. Data expected is proof of mechanism**

GSK3858279 (CCL17 antagonist) for OA pain: **PoC data in 1H2021 removed from chart. Data expected is proof of mechanism**