



# Third Quarter 2019 Financial Results

October 31, 2019

# Agenda

## Welcome

- Christine Lindenboom  
Vice President, Investor Relations & Corporate Communications

## Q3 2019 Overview

- John Maraganore, Ph.D.  
Chief Executive Officer

## Commercial/Med Affairs Highlights

- Barry Greene  
President

## Alnylam Clinical Pipeline

- Akshay Vaishnaw, M.D., Ph.D.  
President of R&D

## Financial Summary and Guidance

- Jeff Poulton  
Chief Financial Officer

## 2019 Goals Update

- Yvonne Greenstreet, MBChB, MBA  
Chief Operating Officer

## Q&A Session

# Alnylam Forward Looking Statements & Non-GAAP Financial Measures

This presentation contains forward-looking statements, within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. There are a number of important factors that could cause actual results to differ materially from the results anticipated by these forward-looking statements. These important factors include our ability to discover and develop novel drug candidates and delivery approaches and successfully demonstrate the efficacy and safety of our product candidates; pre-clinical and clinical results for our product candidates; actions or advice of regulatory agencies; delays, interruptions or failures in the manufacture and supply of our product candidates; our ability to obtain, maintain and protect intellectual property, enforce our intellectual property rights and defend our patent portfolio; our ability to obtain and maintain regulatory approval, pricing and reimbursement for products; our progress in establishing a commercial and ex-United States infrastructure; our ability to successfully launch, market and sell our approved products globally; our ability to successfully expand the indication for ONPATTRO<sup>®</sup> (patisiran) in the future; competition from others using similar technology and developing products for similar uses; our ability to manage our growth and operating expenses, obtain additional funding to support our business activities and establish and maintain business alliances; the outcome of litigation; and the risk of government investigations; as well as those risks more fully discussed in our most recent quarterly report on Form 10-Q under the caption “Risk Factors.” If one or more of these factors materialize, or if any underlying assumptions prove incorrect, our actual results, performance or achievements may vary materially from any future results, performance or achievements expressed or implied by these forward-looking statements. All forward-looking statements speak only as of the date of this presentation and, except as required by law, we undertake no obligation to update such statements.

This presentation contains non-GAAP financial measures, including expenses adjusted to exclude certain non-cash expenses and non-recurring gains outside the ordinary course of the Company’s business. These measures are not in accordance with, or an alternative to, GAAP, and may be difference from non-GAAP financial measures used by other companies. The items included in GAAP presentations but excluded for purposes of determining non-GAAP financial measures for the periods presented herein are stock-based compensation expense and the gain on litigation settlement. The Company has excluded the impact of stock-based compensation expense, which may fluctuate from period to period based on factors including the variability associated with performance-based grants for stock options and restricted stock units and changes in the Company’s stock price, which impacts the fair value of these awards. The Company has excluded the impact of the gain on litigation settlement because the Company believes this item is a one-time event occurring outside the ordinary course of the Company’s business.

**John Maraganore, Ph.D.**  
**Chief Executive Officer**

# **Q3 2019 Overview**

# Anylam Snapshot

Sustainable Value Creation Potential



**Strong Launch  
Progress**



**Productive R&D  
Engine**



**Positioned for  
Future Growth**



**On Path Toward Financial  
Self-Sustainability**

## Alnylam Named #1 Employer in *Science* 2019 Top Employer Survey



**Science** 2019  
**TOP EMPLOYER**

**Barry Greene**  
**President**

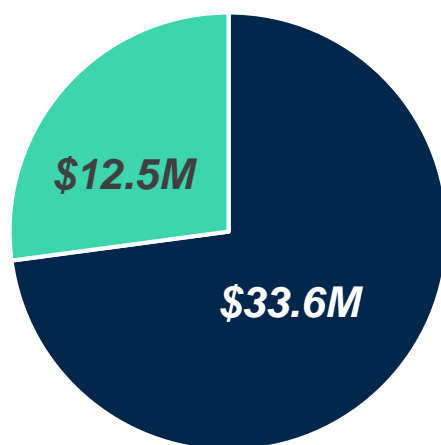
# **Commercial/Med Affairs Highlights**

# ONPATTRO® Global Launch Update: Q3 2019

Strong Performance with Significant Growth Potential

## \$46.1M

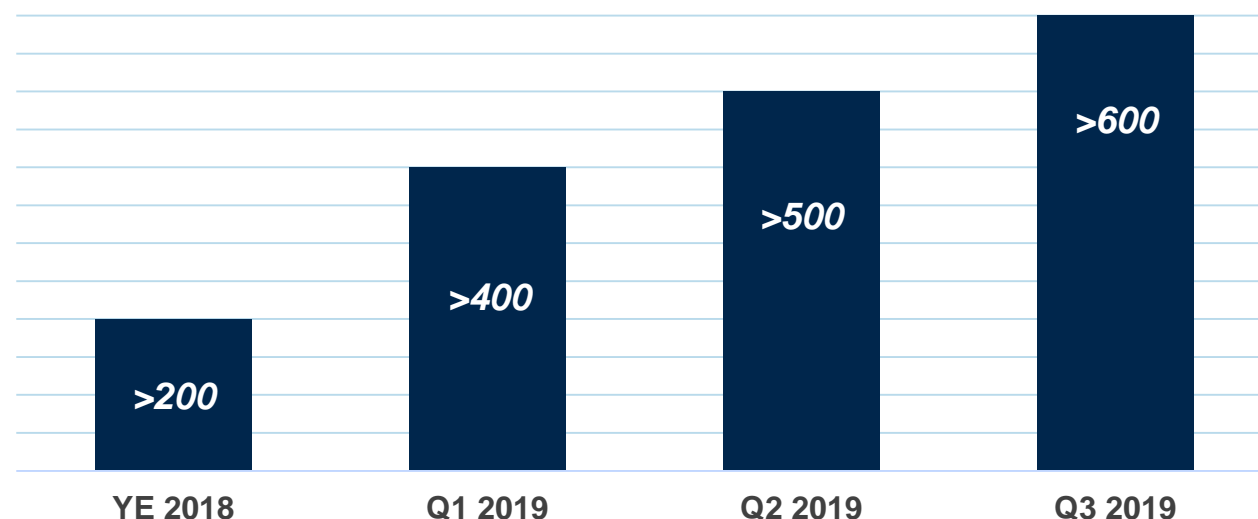
ONPATTRO Global Q3  
Net Product Revenues



■ U.S. ■ ROW

## >600

Patients Worldwide on Commercial  
ONPATTRO at Q3 2019



Expect steady and continued growth with new patient finding, global expansion, and evidence-generating activities



# U.S. ONPATTRO Demand/Adherence, Prescriber Mix, and Access

## Q3 2019 Selected Metrics



**50%**

First-time ONPATTRO prescribers\*

**55%**

Demand from neurologists\*

**33%**

Demand from cardiologists\*

**12%**

Demand from other specialties\*

**>90%**

Adherence on commercial ONPATTRO

**98%**

U.S. lives with confirmed access to ONPATTRO, if prescribed†

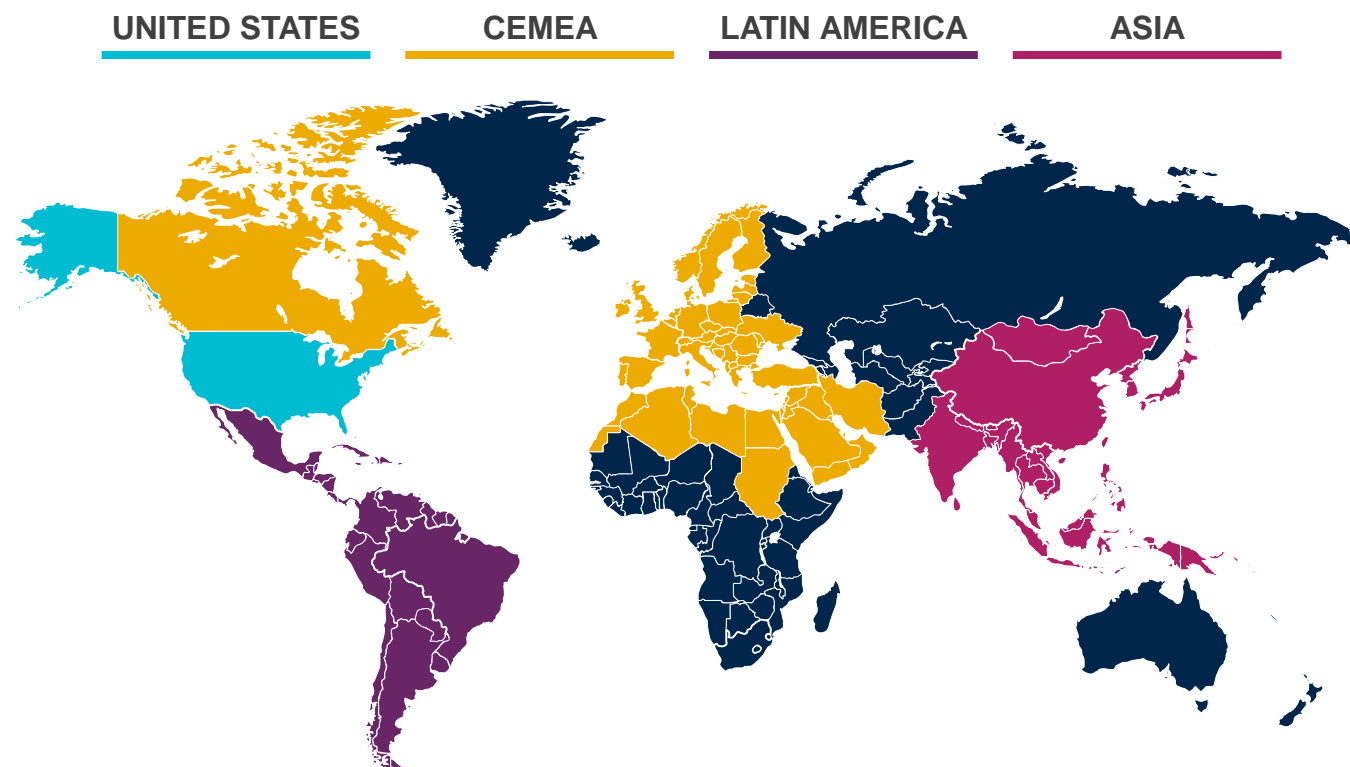
\* Based on total Start Forms submitted in Q3 2019. Start Forms are an incomplete picture of U.S. demand.

† Across commercial, Medicare, Medicaid, and other government payer categories (DKP PayerScope® August 1, 2018 through September 30, 2019).

# ONPATTRO Global Commercialization

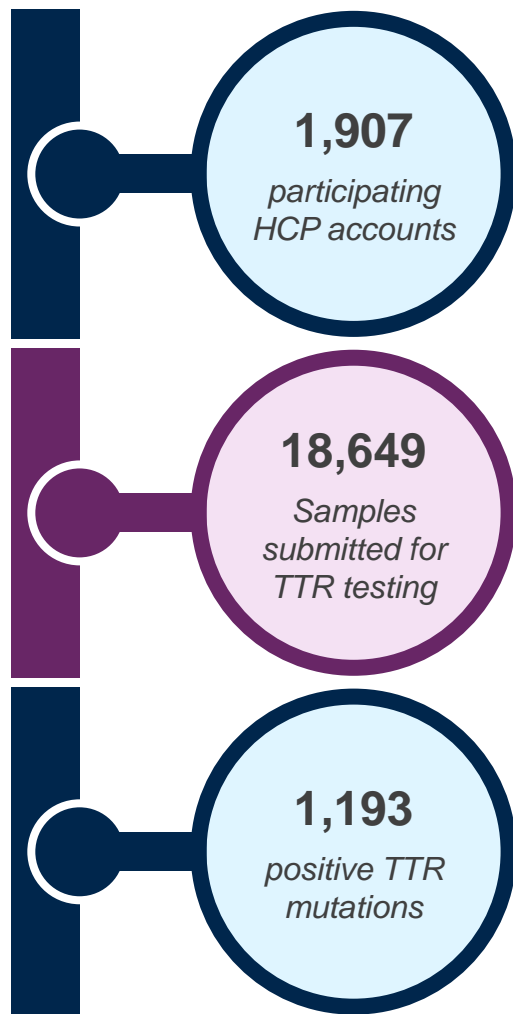
## Increasing Access and Value Recognition

- Significant progress with global ONPATTRO availability
  - Officially launched in Japan and Canada
  - Reimbursement achieved in United Kingdom, Belgium and Germany
  - Over 10 countries outside U.S. now selling ONPATTRO through direct reimbursement, named patient sales, or reimbursed expanded access
  - Uptake observed from both first-line treatment and switching from stabilizer
- Additional countries and regions advancing
  - Latin America plans progressing, with Brazil marketing authorization application submitted and undergoing priority review



# Alnylam Act – hATTR Amyloidosis

Third-Party Genetic Testing and Counseling Program Sponsored by Alnylam



Reduce barriers to genetic testing and counseling to help people make more informed decisions about their health

Tests and services are performed by independent third parties

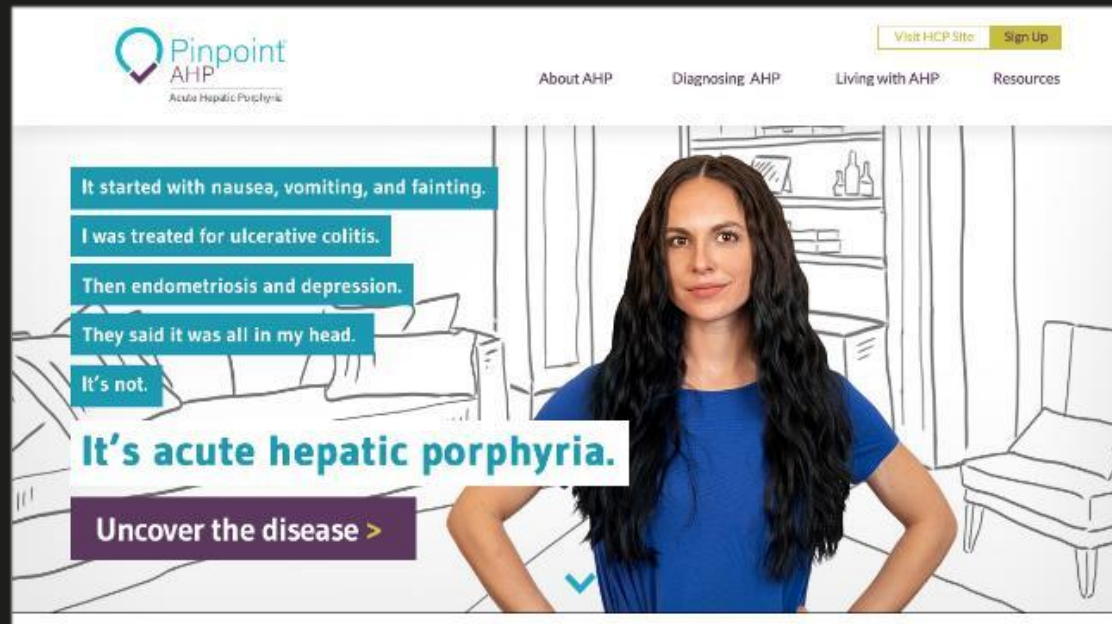
Available in U.S. and Canada (genetic counseling service available in U.S.)

Healthcare professionals who use this program have **no obligation** to recommend, purchase, order, prescribe, promote, administer, use or support any Alnylam product

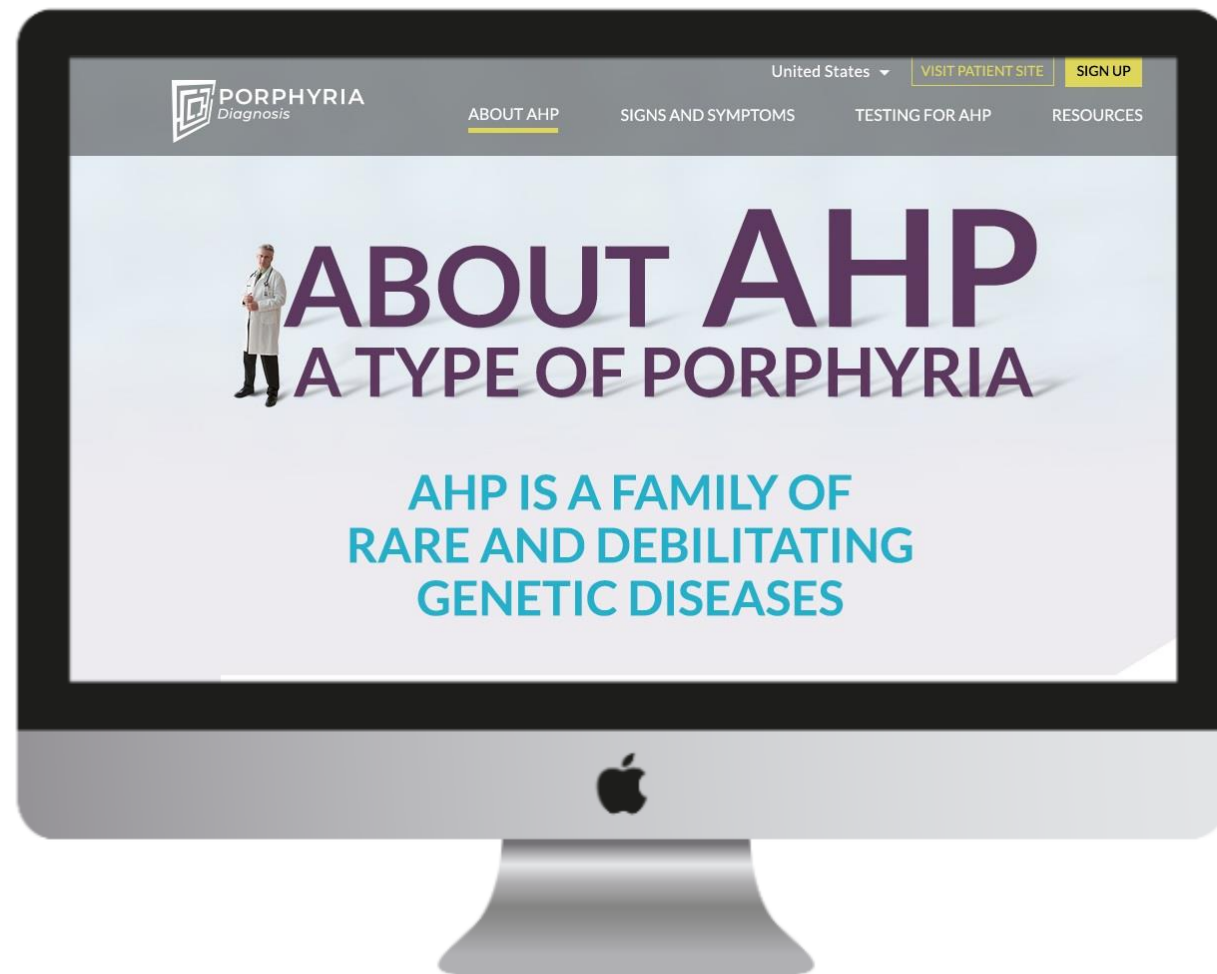
More information regarding this program  
available at: [www.alnylamact.com](http://www.alnylamact.com)

# Driving AHP Awareness

Education Initiatives Tailored to Physician and Patient Communities



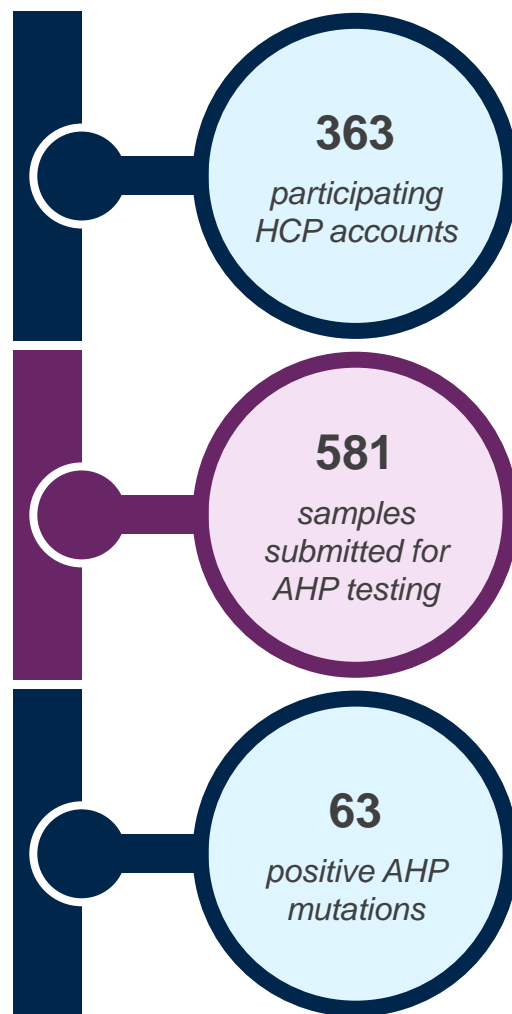
PinpointAHP.com



PorphyriaDiagnosis.com

# Alnylam Act – Acute Hepatic Porphyria

Third-Party Genetic Testing and Counseling Program Sponsored by Alnylam



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Tests and services are performed by independent third parties

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# Collaboration with Ironwood<sup>®</sup>

## U.S. Gastroenterologist Disease Awareness and Promotional Agreement

### Rationale

- Gastroenterologists are one of the most frequently seen specialty group due to GI manifestations of AHP\*
  - ~20% of AHP patients receive diagnosis from a gastroenterologist
  - Diagnosed patients typically see > 3 gastroenterologists during their journey
  - ~40% of AHP patients have received a prior diagnosis of IBS

### Overview

- Ironwood will provide disease education to gastroenterologists to support accurate diagnosis of AHP patients
- If givosiran is approved, Ironwood clinical sales specialists will begin promotional efforts

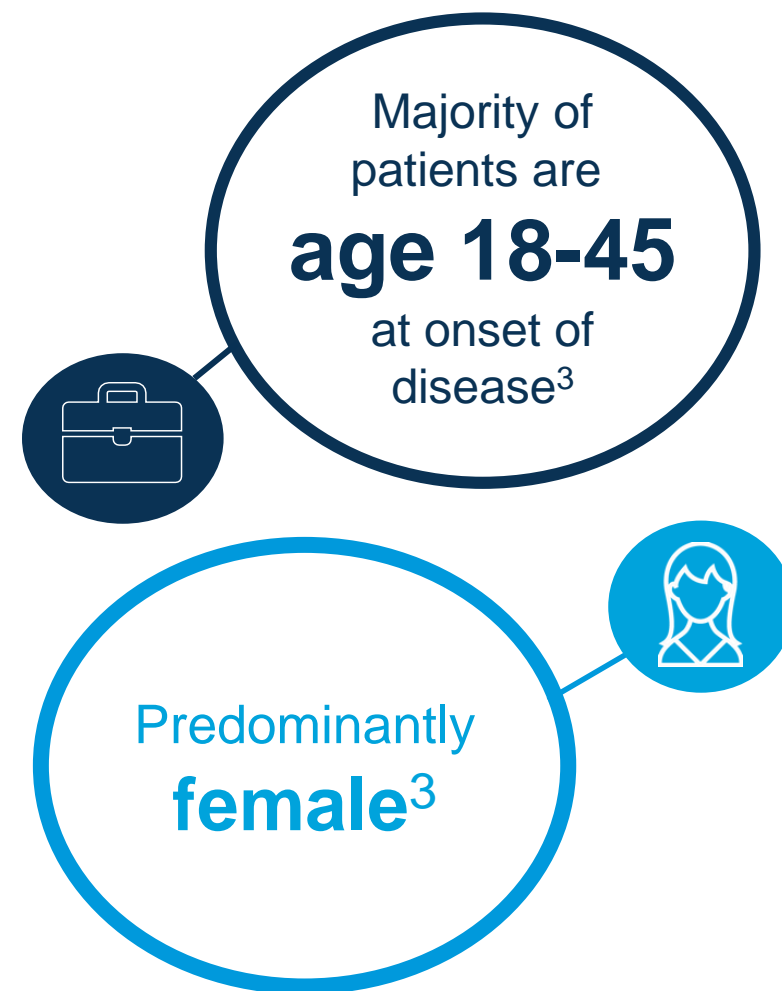
### Terms

- Ironwood receives fixed payments and, subject to regulatory approval of givosiran, royalties on net sales generated from prescriptions or referrals from certain HCPs related to Ironwood's promotional efforts
- Alnylam retains responsibility for all other aspects of givosiran, including global development and commercial rights

# AHP Patient Population

Rare Disease Disproportionately Impacting Female Patients of Working and Childbearing Age

- Consensus estimated global prevalence of 2-5 per 100,000<sup>1</sup>
- Estimated ~1,000 severely affected patients with recurrent attacks in U.S./EU<sup>2</sup>
- Many more estimated to have sporadic attacks (~5,000 patients in U.S./EU<sup>2</sup>) and yet additional patients may have chronic symptoms and impaired quality of life
- AHP are challenging to diagnose, and most patients with active disease currently remain undiagnosed
  - Internal estimates of ~3,000 patients with active disease currently diagnosed in U.S./EU, with ~1,000 in urgent need with frequent attacks



1. Anderson KE, Metabolic & Molecular Bases of Inherited Disease, 2001

2. ORPHANET; The Porphyria Consortium

3. Bissell DM et al. N Engl J Med. 2017;377:862-872

# Givosiran Market Opportunity

Ultra-Rare Orphan Disease with Significant Disease Burden and Essentially No Competition

## PREVALENCE

**~1,000**      **~5,000**

*recurrent attacks*      *sporadic attacks*  
patients in U.S./EU<sup>1</sup>



## DIAGNOSIS

**~20%**

currently diagnosed;  
delays up to 15 years



## DISEASE BURDEN

**65%**

recurrent attack patients  
with chronic symptoms<sup>2</sup>



## COST BURDEN

**\$400–650K**

average annual expenditure,  
recurrent attack patients<sup>3</sup>



## GIVOSIRAN | ACUTE HEPATIC PORPHYRIA

**>\$500M potential market opportunity**

<sup>1</sup> ORPHANET; The Porphyrrias Consortium

<sup>2</sup> Gouya et al. EASL 2018

<sup>3</sup> EXPLORE Natural History Study (includes patients with ≥ 3 attacks per year). Annual expenditure per patient; based on both hospitalization charges (amount billed) and costs (amount paid) from published data sources in U.S.

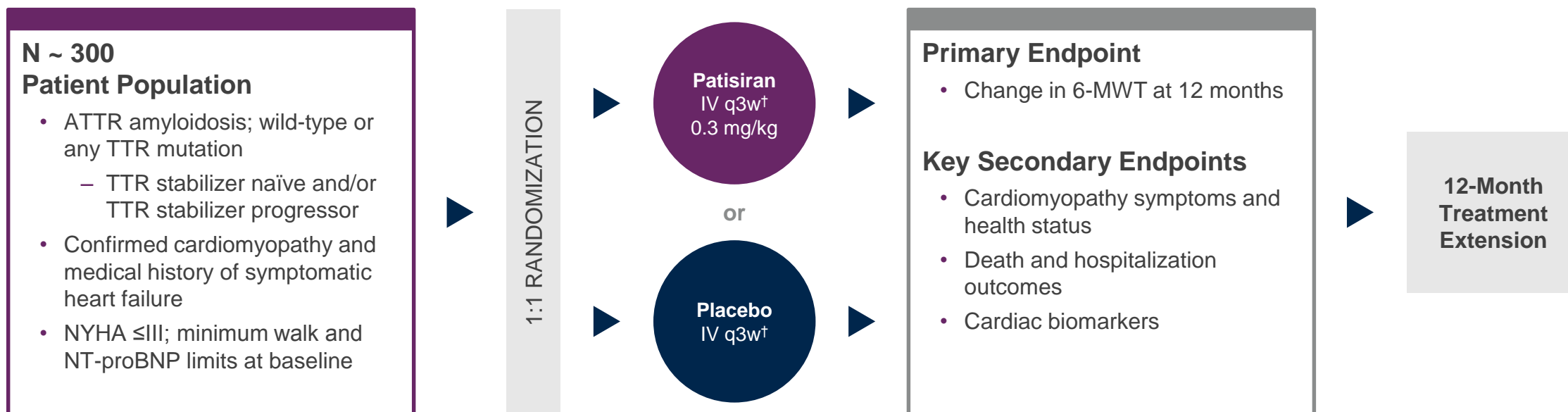


**Akshay Vaishnaw, M.D., Ph.D.**  
**President of R&D**

# **Alnylam Clinical Pipeline**

# Patisiran **APOLLO·B** Phase 3 Study\*

Randomized, Double-Blind, Placebo-Controlled Study in ATTR Amyloidosis Patients with Cardiomyopathy



**APOLLO·B**

Study initiated  
**September 2019**

\* Concomitant use of local standard of care allowed during study, including TTR stabilizer

† To reduce likelihood of infusion-related reactions, patients receive following premedication or equivalent at least 60 min. before each study drug infusion: 10 mg (low dose) dexamethasone; oral acetaminophen; H1 and H2 blockers

NYHA: New York Heart Association; NT-proBNP: N-terminal pro b-type natriuretic peptide; 6-MWT: 6-Minute Walk Test

# Vutrisiran **HELIOS-B** Phase 3 Study

Randomized, Double-Blind Outcomes Study in ATTR Amyloidosis Patients with Cardiomyopathy

**N ~ 600**

## Patient Population

- ATTR amyloidosis; wild-type or any TTR mutation
  - ≤ 30% tafamidis use at baseline
- Confirmed cardiomyopathy and medical history of symptomatic heart failure
- NYHA ≤ III; minimum walk and NT-proBNP limits at baseline

1:1 RANDOMIZATION

**Vutrisiran**  
SC q3M  
25 mg

or

**Placebo**  
SC q3M

## Primary Endpoint

- Composite outcome of all-cause mortality and recurrent CV hospitalizations (when last patient reaches Month 30)

## Secondary Endpoints

- 6-MWT distance
- Kansas City Cardiomyopathy Questionnaire (KCCQ OS) score
- Mean left ventricular (LV) wall thickness
- Global longitudinal strain
- Composite of all-cause mortality and recurrent all-cause hospitalizations
- All-cause mortality
- Recurrent CV hospitalizations
- NT-proBNP



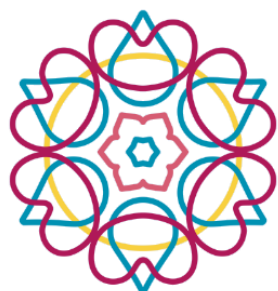
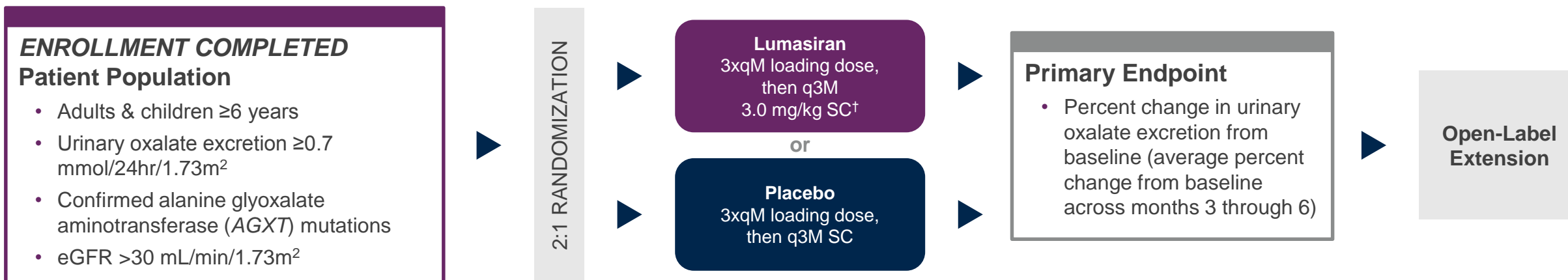
**HELIOS-B**

HELIOS-B expected to initiate  
**late 2019**

Study includes optional interim analysis

# Lumasiran **ILLUMINATE•A** Phase 3 Study

Randomized, Double-Blind Study in Primary Hyperoxaluria Type 1 Patients






**ILLUMINATE•A**

**FDA Breakthrough and  
EMA PRIME Designations**

Topline ILLUMINATE-A results expected in **late 2019**  
NDA submission planned in **early 2020** (assuming positive results)

# Other Clinical and Late Pre-Clinical Programs

Large Number of Additional Programs Across Orphan and Prevalent Diseases

PROGRAM	INDICATION	PREVALENCE	STAGE	EXPECTED MILESTONE	PARTNER
<b>Inclisiran</b>	<i>Hypercholesterolemia</i>	<b>~31 million</b> in U.S. with LDL-C levels >240 mg/dl	<b>Phase 3</b>	<b>Late 2019</b> File NDA	<b>The Medicines Company</b>
<b>Fitusiran</b>	<i>Hemophilia and Rare Bleeding Disorders</i>	<b>~200,000</b> worldwide	<b>Phase 3</b>	<b>2019</b> support Sanofi	<b>SANOFI</b> 
<b>Cemdisiran</b>	<i>Complement-Mediated Diseases</i>	<b>&gt;100,000</b> total complement- mediated diseases	<b>Phase 2</b>	<b>2019</b> advance Phase 2 IgA nephropathy study	<b>REGENERON</b>
<b>Cemdisiran/ Pozelimab Combo</b>	<i>Complement-Mediated Diseases</i>	<b>&gt;100,000</b> total complement- mediated diseases	<b>Phase 1 planned</b>	<b>2019</b> advance combo studies	<b>REGENERON</b>
<b>ALN-AAT02</b>	<i>Alpha-1 Liver Disease</i>	<b>~12,000</b> worldwide	<b>Phase 1/2</b>	<b>Late 2019</b> initial Phase 1/2 data	
<b>ALN-HBV02 (VIR-2218)</b>	<i>Hepatitis B Virus Infection</i>	<b>~400 million</b> worldwide with chronic disease	<b>Phase 1/2</b>	<b>Late 2019</b> initial Phase 1/2 data	<b>VIR</b>
<b>ALN-AGT</b>	<i>Hypertension</i>	<b>~9.1 million</b> in U.S. with resistant Hypertension	<b>Phase 1</b>	<b>Late 2019</b> initial Phase 1 data	

# Alnylam R&D Day

Friday, November 22, 2019

Westin Times Square

New York City



**Jeff Poulton**  
**Chief Financial Officer**

# **Financial Summary and Guidance**

# Third Quarter 2019 Financial Summary

Financial Results	Three Months Ended Sept. 30,		Nine Months Ended Sept. 30,	
	2019	2018	2019	2018
ONPATTRO Net Product Revenues	\$46.1M	\$0.5M	\$110.6M	\$0.5M
Total Revenues	\$70.1M	\$2.1M	\$148.1M	\$53.9M
Total GAAP Operating Costs and Expenses	\$286.4M	\$256.6	\$789.4M	\$648.2M
• R&D Expenses	\$160.8M	\$139.9M	\$453.8M	\$374.4M
• SG&A Expenses	\$120.4M	\$116.5M	\$322.7M	\$273.7M
• Cost of Goods Sold	\$5.2M	\$0.1M	\$12.9M	\$0.1M
Non-GAAP Expenses				
• Non-GAAP R&D Expenses*	\$138.1M	\$94.2M	\$399.7M	\$306.8M
• Non-GAAP SG&A Expenses*	\$97.1M	\$74.4M	\$268.2M	\$211.4M
GAAP Net Loss	\$208.5M	\$245.3M	\$609.9M	\$550.1M
Non-GAAP Net Loss**	\$162.5M	\$157.3M	\$510.7M	\$440.8M

\* Non-GAAP operating expenses exclude stock-based compensation expenses.

\*\* Non-GAAP net loss excludes stock-based compensation expenses, a gain on the change in fair value of a liability obligation, and a gain on litigation settlement.

See Appendix for a reconciliation between GAAP and non-GAAP measures.



# Third Quarter 2019 Cash, Investments, and Full-Year Financial Guidance

Cash and Investments	Q3 2019	YE 2018
Cash and Cash Equivalents	\$923.3M	\$420.1M
Restricted Cash	\$2.4M	\$2.5M
Restricted Investments	\$14.8M	\$44.8M
Marketable Debt Securities	\$797.8M	\$662.8M
<b><u>TOTAL</u></b>	<b><u>\$1,738.3M</u></b>	<b><u>\$1,130.2M</u></b>


## Reaffirming 2019 Financial Guidance

- Annual Non-GAAP Operating Expenses:
  - Non-GAAP R&D Expenses\* in the range of \$550M to \$575M
  - Non-GAAP SG&A Expenses\* in the range of \$390M to \$400M
- Current cash, cash equivalents, and marketable debt securities expected to support company operations for multiple years based on current operating plan

**Yvonne Greenstreet, MBChB, MBA**  
**Chief Operating Officer**  
**2019 Goals Update**

# Alnylam 2019 Goals

\*Early is Q1-Q2, Mid is Q2-Q3, and Late is Q3-Q4

		2019*		
		Early	Mid	Late
	Commercial Execution	✓	✓	✓
	Japan Launch			✓
	Additional Country Launches	✓	✓	✓
	Start APOLLO-B Cardiomyopathy Phase 3		✓	
<b>VUTRISIRAN</b> (ATTR Amyloidosis)	HELIOS-A Polyneuropathy Phase 3 Enrollment	✓	✓	✓
	Start HELIOS-B Cardiomyopathy Phase 3			●
<b>GIVOSIRAN</b> (Acute Hepatic Porphyria)	ENVISION Phase 3 Topline Results	✓		
	File NDA		✓	
	File MAA		✓	
<b>LUMASIRAN</b> (Primary Hyperoxaluria Type 1)	Complete ILLUMINATE-A Phase 3 Enrollment		✓	
	ILLUMINATE-A Phase 3 Topline Results			●
	Start ILLUMINATE-B & C Phase 3 Studies	✓		●
<b>ADDITIONAL CLINICAL PROGRAMS</b>	Continue to advance early/mid-stage pipeline; File new INDs; Present clinical data	✓	✓	●
<b>PARTNERED PROGRAMS</b>				
<b>INCLISIRAN</b> (Hypercholesterolemia)	ORION-9, 10, & 11 Phase 3 Topline Results		✓	✓
	File NDA			●
<b>FITUSIRAN</b> (Hemophilia and RBD)	Support Sanofi on ATLAS Phase 3	✓	✓	✓

## Q3 2019 Financial Results

# Q&A Session



**THANK YOU**

## Q3 2019 Financial Results

# Appendix

# Alnylam Pharmaceuticals, Inc.

## Reconciliation of Selected GAAP Measures to Non-GAAP Measures (In thousands, except per share amounts)

	Three Months Ended September 30,		Nine Months Ended September 30,	
	2019	2018	2019	2018
<b>Reconciliation of GAAP to Non-GAAP Research and Development:</b>				
GAAP Research and Development	\$ 160,796	\$ 139,945	\$ 453,813	\$ 374,384
Less: Stock-Based Compensation Expenses	(22,737)	(45,784)	(54,144)	(67,537)
Non-GAAP Research and Development	<u>\$ 138,059</u>	<u>\$ 94,161</u>	<u>\$ 399,669</u>	<u>\$ 306,847</u>
<b>Reconciliation of GAAP to Non-GAAP Selling, General and Administrative:</b>				
GAAP Selling, General and Administrative	\$ 120,351	\$ 116,545	\$ 322,728	\$ 273,671
Less: Stock-Based Compensation Expenses	(23,272)	(42,170)	(54,500)	(62,242)
Non-GAAP Selling, General and Administrative	<u>\$ 97,079</u>	<u>\$ 74,375</u>	<u>\$ 268,228</u>	<u>\$ 211,429</u>
<b>Reconciliation of GAAP to Non-GAAP Operating Expenses:</b>				
GAAP Operating Expenses	\$ 286,360	\$ 256,627	\$ 789,427	\$ 648,192
Less: Stock-Based Compensation Expenses	(46,009)	(87,954)	(108,644)	(129,779)
Non-GAAP Operating Expenses	<u>\$ 240,351</u>	<u>\$ 168,673</u>	<u>\$ 680,783</u>	<u>\$ 518,413</u>
<b>Reconciliation of GAAP to Non-GAAP Net Loss:</b>				
GAAP Net Loss	\$ (208,535)	\$ (245,282)	\$ (609,931)	\$ (550,056)
Add: Stock-Based Compensation Expenses	46,009	87,954	108,644	129,779
Less: Change in Fair Value of Liability Obligation	-	-	(9,422)	-
Less: Gain on Litigation Settlement	-	-	-	(20,564)
Non-GAAP Net Loss	<u>\$ (162,526)</u>	<u>\$ (157,328)</u>	<u>\$ (510,709)</u>	<u>\$ (440,841)</u>
<b>Reconciliation of GAAP to Non-GAAP Net Loss per Common Share - Basic and Diluted:</b>				
GAAP Net Loss per Common Share - Basic and Diluted	\$ (1.92)	\$ (2.43)	\$ (5.63)	\$ (5.48)
Add: Stock-Based Compensation Expenses	0.42	0.87	1.01	1.29
Less: Change in Fair Value of Liability Obligation	-	-	(0.09)	-
Less: Gain on Litigation Settlement	-	-	-	(0.20)
Non-GAAP Net Loss per Common Share - Basic and Diluted	<u>\$ (1.50)</u>	<u>\$ (1.56)</u>	<u>\$ (4.71)</u>	<u>\$ (4.39)</u>