



FY and Q4 2025 Results

Conference call and webcast for investors and analysts

Strong 2025 performance, 2026 priorities

Luke Miels

Performance: growth drivers

Nina Mojas and Deborah Waterhouse

Pipeline progress

Tony Wood

FY 2025 performance and 2026 guidance

Julie Brown

Summary and Q&A

Luke Miels, Nina Mojas, Deborah Waterhouse, Tony Wood,
Julie Brown and David Redfern



Cautionary statement regarding forward-looking statements

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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 the Group's FY and Q4 2025 Results and the Group's Annual Report on Form 20-F for FY 2024.

All expectations, guidance and outlooks regarding future performance and the dividend should be read together with the section "Guidance and outlooks, assumptions and cautionary statements on pages 55-56 of our stock exchange announcement of the Group's FY and Q4 2025 Results, the section "Assumptions and basis of preparation related to 2026 guidance, 2021-26 and 2031 outlooks" in the Appendix of this presentation and the statements on page 341 of the Group's Annual Report for FY 2024.



2025 performance: Specialty Medicines growth drives strong sales and earnings delivery

Sales

£32.7bn

+7%

Core operating profit

£9.8bn

+11%

Core EPS

172.0p

+12%

Cash generated from operations

£8.9bn

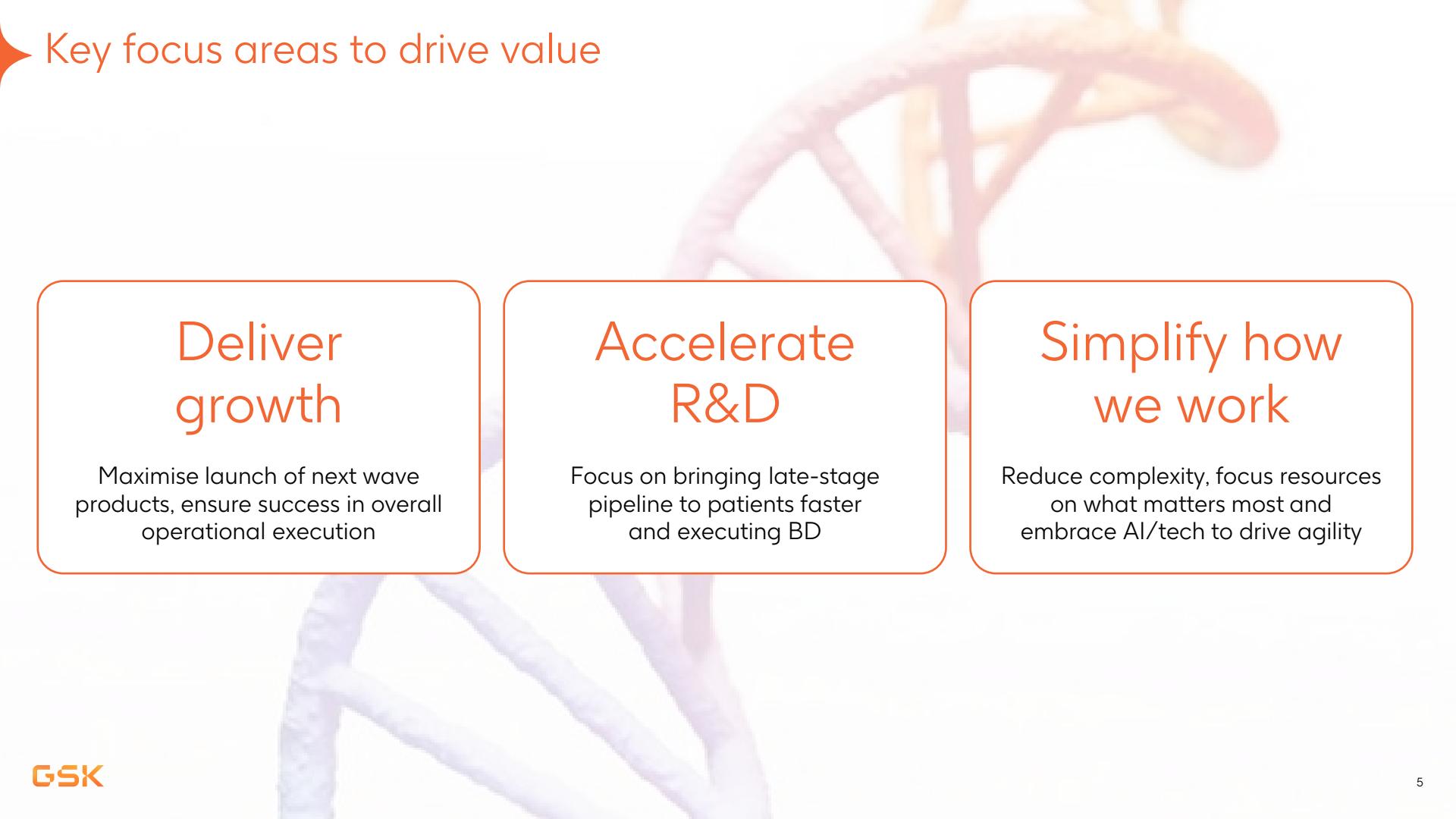
Dividend per share

66p

Responsible Business rating

On track¹

2026 guidance: sales growth 3-5% and core operating profit and core EPS growth 7-9%



Key focus areas to drive value

Deliver growth

Maximise launch of next wave products, ensure success in overall operational execution

Accelerate R&D

Focus on bringing late-stage pipeline to patients faster and executing BD

Simplify how we work

Reduce complexity, focus resources on what matters most and embrace AI/tech to drive agility



Performance: growth drivers

Nina Mojas, President, Global Product Strategy

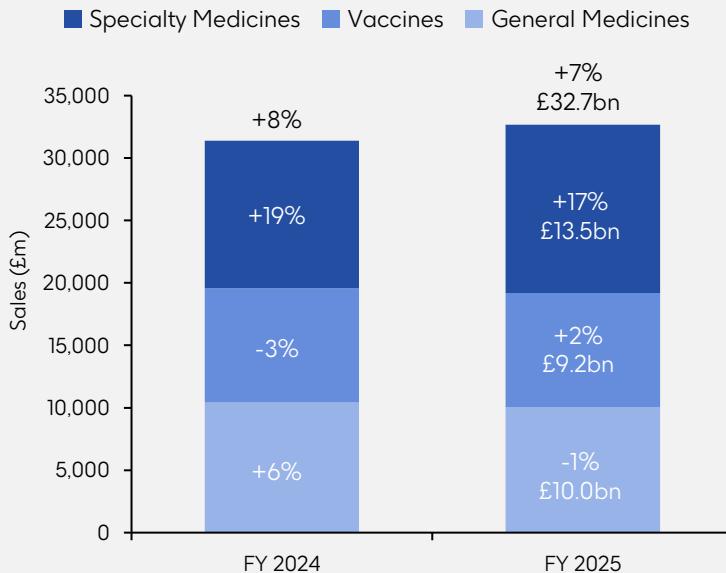
Deborah Waterhouse, CEO, ViiV Healthcare and President, Global Health



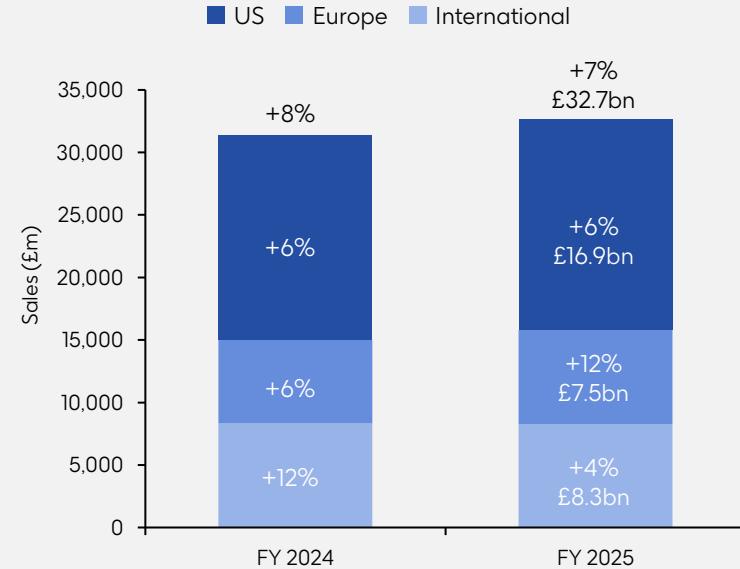
Full year growth driven by Specialty momentum

Growth across all regions

Sales contribution by product area



Sales contribution by region





Specialty Medicines

Continued momentum across all therapy areas

Sales contribution by therapy area

■ RI&I ■ Oncology ■ HIV



Respiratory, Immunology and Inflammation (RI&I) £3,810m

- *Benlysta* £1,773m up 22%, preferred treatment option by all major global guidelines; 82% market share of US biologic naïve patients
- *Nucala* £2,008m up 15%, 10th year of double-digit growth driven by strong COPD¹ launch and halo effect in US

Oncology £1,977m

- *Jemperli* £861m up 89%; differentiated profile as the only IO² regimen plus chemotherapy for 1L EC³ with additional 16 months of overall survival benefit vs chemotherapy alone in allcomers
- *Ojaara* £554m up 60% driven by US 1L and 2L and continued uptake across EU. Now included in NCCN category 1 for patients with anaemia
- *Blenrep* £17m now approved in 15 markets

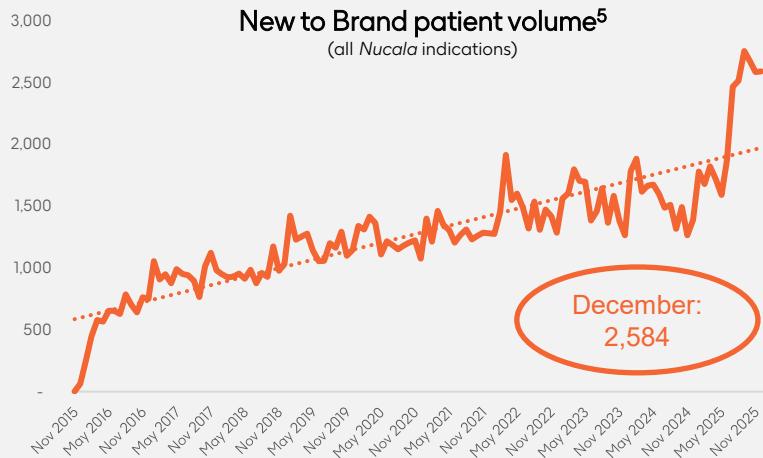
HIV £7,687m up 11% driven by long-acting injectables and *Dovato*

2026 guidance: grow low double digits %

Strong Nucala COPD delivery ahead of key launches in 2026

Nucala for COPD¹

- Wide spectrum label with severe exacerbation reduction^{2,3}
- Halo effect on all indications
- GOLD⁴ 2026 signals a shift toward earlier use of biologics in COPD, with Nucala included as new treatment option



EXDENSUR
(depemokimab-ulaa)

severe asthma

- Approved in US, UK and Japan. Regulatory review ongoing for EU and China, approvals expected this year
- Only ~27% eligible patients on biologic, ~65% discontinue within 12 months⁶
- ~97% of patients would prefer or likely switch to 6 month dosing⁷
- 72% reduction in exacerbations leading to hospitalisations or emergency department visits⁸



BLENREP
belantamab
mafodotin

multiple myeloma

- Only accessible anti-BCMA⁹; 70% of patients in community setting¹⁰
- UK: fast progress, applying lessons to US with focus on eye-care networks
- US: Positive feedback on REMS with 18,000 US eye care professionals engaged



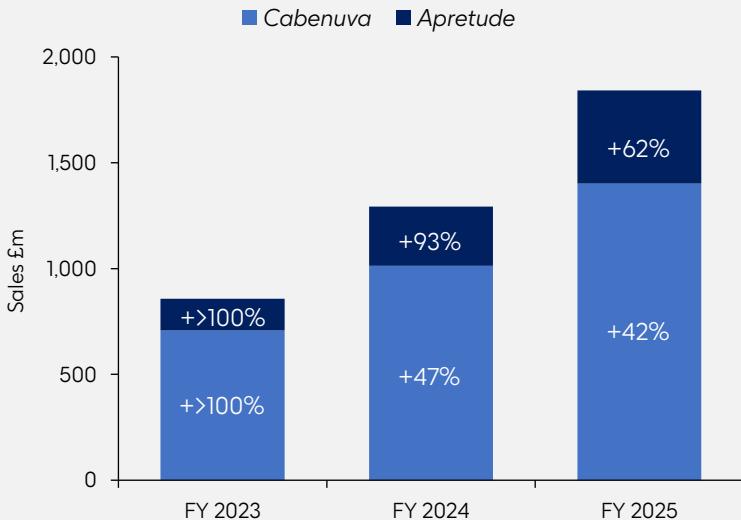
1. Chronic obstructive pulmonary disease; 2. Nucala US Prescribing Information: EOS2 as low as ≥ 150 cells/ μ L 3. Sciruba F, et al. Mepolizumab to prevent exacerbations in COPD with an eosinophilic phenotype. NEJM Med. Apr 2025;392:1710-1720. 4. Global Initiative for Chronic Obstructive Lung Disease; 5. IQVIA SOB Month Ending 12/2025 6. IQVIA APLD (medical & pharmacy claims), new-to-brand 12-month persistency of respiratory biologics

7. Branding Science Patient Perspectives on Biologic Treatments MR, Q4 2025; 8. Jackson, David J., et al. "Twice-yearly Depemokimab in severe asthma with an eosinophilic phenotype." NEJM, vol. 391, no. 24, 19 Dec. 2024, pp. 2337-2349; 9

9. Anti B-Cell maturation agent; 10. Komodo claims data. Accessed 25 September 2025.

HIV: strong, competitive 2025 performance accelerates transition to long-acting portfolio

Continued momentum across LAI¹ portfolio



HIV £7,687m up 11% driven by patient demand

- *Dovato* £2,678m up 22%
- *Cabenuva* £1,402m up 42%
- *Apretude* £439m up 62%

Competitive execution drives market transition to long-acting

- >75% HIV growth driven by LAI portfolio - represents ~1/3 US sales
- >75% Cabenuva product switches in US from competitors²
- HIV portfolio #1 for switch in the US²

INSTIs + novel assets define next wave of HIV breakthroughs

- Gold standard, INSTI³-led pipeline grounded in patient insight
- VH184 – potential 3rd Gen INSTI; IP through at least 2040
- Meet the management in June

2026 guidance: grow mid single to high single digits %

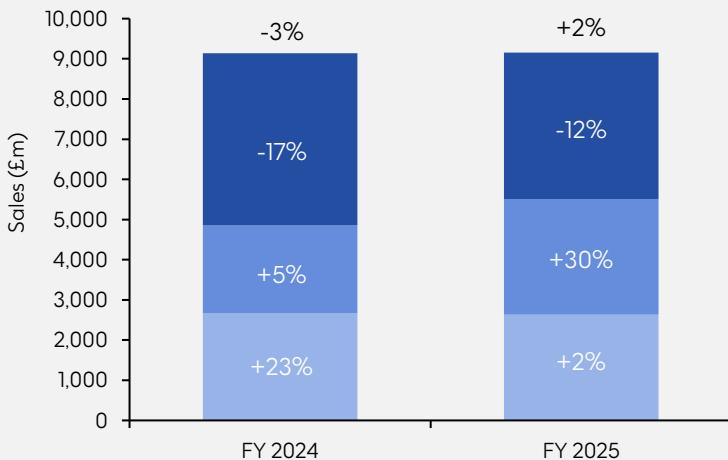


Vaccines

Europe and International demand driving growth

Sales contribution by region

■ US ■ Europe ■ International



Shingles (*Shingrix*) £3,558m up 8%

- EU sales up 42% due to strong demand
- International sales up 13% through expanded public funding in Japan
- 44% cumulative IZ¹ rate in US, now expect IZ penetration rate of 2-4% per year.

Meningitis £1,583m up 12%

- Bexsero* £1,150m up 16% driven by continued strong demand across EU and International
- Penmeny* £8m now launched in the US with wholesaler and CDC² stocking

RSV³ (*Arexvy*) £593m up 2%

- Global expansion underway with approval in 69 markets, launched in 40

Flu vaccines £303m down 24%

Established vaccines £3,120m down 5%

2026 guidance: decline low single digit to stable %



Absolute values at AER; percentages are growth rates at CER, unless stated otherwise. See page 2 of GSK's FY and Q4 2025 stock-exchange announcement for latest guidance. FY 2024 growth rates exclude COVID-19 solutions.

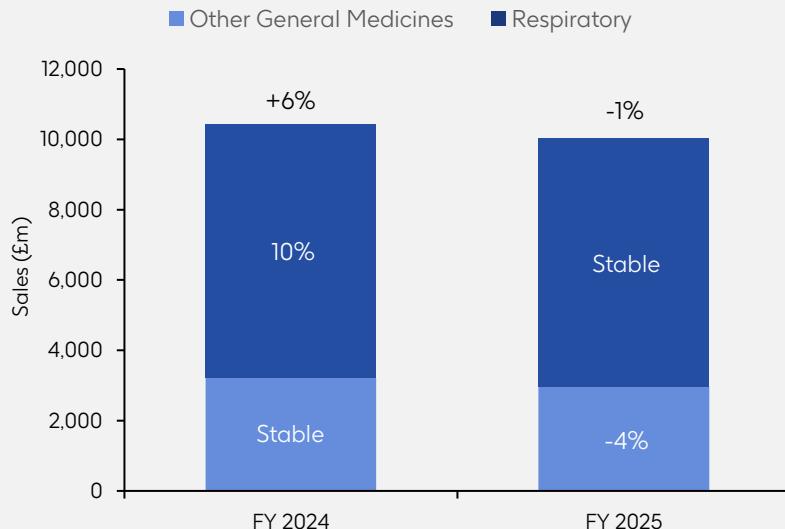
1. Immunisation rate; 2. Centre for Disease Control & Prevention; 3. Respiratory syncytial virus



General Medicines

Trelegy double digit growth offset by other respiratory and General Medicines

Sales contribution by disease area



Respiratory £7,068m

Trelegy £2,986m +13%

- SITT¹ market leader and top selling brand in asthma and COPD² globally³

Other General Medicines £2,968m

- **BluJepa** approved for uUTIs⁴ in US and UK,
 - Differentiated by efficacy in antibiotic resistant pathogens; targeting patients at risk of treatment failure
- **Tebipenem** in complicated UTIs⁵, PDUFA 18 June 2026
 - Infections often caused by multidrug-resistant pathogens and carry serious risks including organ failure, sepsis, and death

2026 guidance: decline low single digit to stable %



Pipeline progress

Tony Wood, Chief Scientific Officer

Accelerating late-stage pipeline and development of early-stage assets

Pipeline progress

2025

5 FDA approvals:

| | |
|----------|-----------------------|
| Penmenvy | Meningococcal disease |
| Blujepa | uUTIs ¹ |
| Nucala | COPD ² |
| Blenrep | Multiple myeloma |
| Exdensur | Severe asthma |

7 Phase III trial starts across:

| | |
|------------------------------|----------------------------|
| Exdensur | COPD |
| efimofersin | MASH ³ |
| velzatinib | 2L GIST ⁴ |
| ris-rez (B7-H3) ⁵ | 2L/3L ES-SCLC ⁶ |

2026

| | |
|--------------|---|
| bepirovirsen | Positive phase III readout for CHB ⁷ |
|--------------|---|

Recent business development⁸

4 acquisitions

- Including assets for RI&I, Oncology

10 partnerships/licensing agreements

- Including Hengrui (RI&I, Oncology), Empirico (COPD), CAMP4 Therapeutics (RNA discovery platform) and Noetik (AI Foundation Models in Oncology)

>50 academic collaborations

- Including University of Oxford Experimental Medicine Collaboration

Priorities

- Deliver pipeline value
- Shorten development timelines
- Access world-leading innovation through BD

RI&I: Leading in Respiratory with a unique COPD¹ pipeline, including ultra long-acting assets

Late Stage

Exdensur(depemokimab)

First ULA² biologic for respiratory diseases³

- ENDURA-1/2, VIGILANT in COPD recruiting
- OCEAN for EGPA⁴ data H2'26

camlipixant: BIC⁵ potential for refractory chronic cough

~10 million patients diagnosed globally. No approved medicines for RCC⁶ in the US.

- CALM-1/2 data expected mid-2026

Early Stage

Options to address disease heterogeneity

- Phase II GSK '283 (ULA TSLP⁷) in asthma
 - data H2'26
- Phase I GSK '701 (PDE3/4) in COPD
- Phase I GSK '821 (EMP-012⁸) in COPD



RI&I: Expanding to fibro-inflammation for lung, liver and kidney disease

Late Stage

Efimofersin: LA Q1M BIC¹ potential in MASH²

- ZENITH-1/2 in F2/F3 MASH recruiting
- NEBULA-1/2 in F4 MASH planned for H2' 26

Early Stage

GSK '990 in ALD³

- Phase II STARLIGHT study recruiting

Metabolic dysfunction-associated steatohepatitis

≤300 million

Adults affected by MASH globally^{4,5}

#2

Cause of liver transplant in the US⁶

Alcohol-related liver disease

~26 million

Cases of advanced ALD globally⁷

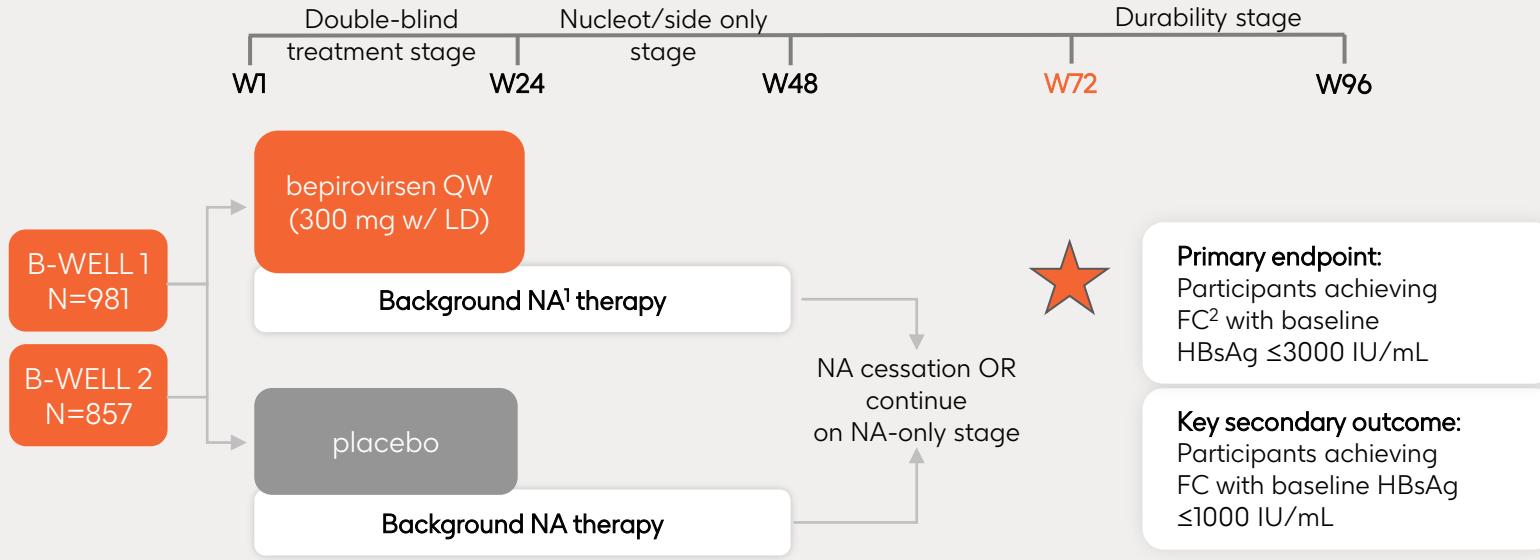
#1

Cause of liver transplant in the US⁶

1. Long acting once monthly dosed, best in class; 2. Metabolic dysfunction-associated steatohepatitis; 3. Alcohol-related liver disease; 4. Povsic M, Wong OY, Perry R, Bottomley J. A Structured Literature Review of the Epidemiology and Disease Burden of Non-Alcoholic Steatohepatitis (NASH). *Adv Ther*. 2019 Jul;36(7):1574-1594. doi: 10.1007/s12325-019-00960-3; 5. United Nations Population Fund. "World Population Dashboard." Available at: <https://www.unfpa.org/data/world-population-dashboard> (Accessed 29 January 2026); 6. Younossi et al. *Hepatol Commun*. 2023 Dec 22;8(1):e0352; 7. Asrani SK, Mellinger J, Arab JP, Shah VH. Reducing the Global Burden of Alcohol-Associated Liver Disease: A Blueprint for Action. *Hepatology*. 2021 May;73(5):2039-2050. doi: 10.1002/hep.31583. PMID: 32986883; PMCID: PMC9361217.

Bepirovirsen: functional cure for patients with chronic hepatitis B

B-WELL 1 and 2 showed clinically meaningful functional cure rates for bepirovirsen patients



Regulatory filings expected Q1 '26

Oncology – portfolio momentum with further development in haematological cancers and advances into solid tumours

Approvals and LCI¹ for late-stage portfolio

Blenrep: first anti-BCMA ADC² for multiple myeloma accessible in community setting

- DREAMM-7: 2L MM³ OS⁴ **data expected 2028**
- DREAMM-10: 1L MM **recruiting**

Ojaara: expansion into myelodysplastic syndrome

- MDS⁵ Phase II **recruiting**

Jemperli

- AZUR-1: rectal cancer, **data H2 '26**
- AZUR-2: colon cancer **data H2 '28**
- JADE: HNSCC⁶ **data H2 '28**

Novel modalities progressing to PhIII

velzatinib: (GSK '981) KIT inhibitor for GIST⁷

- StrateGIST-3: 2L GIST **recruiting**
- StrateGIST Frontline: 1L GIST H2 '26 **start**

risvutatug rezetecan: (GSK'227) B7-H3 ADC⁸ solid tumours

- EMBOLD SCLC-301⁹: **phase III recruiting**
- Signal generating studies including Lung, CRC¹⁰, HNSCC, GU¹¹ **ongoing**

mocertatug rezetecan: (GSK '584) B7-H4 ADC

- BEHOLD Phase III programmes; endometrial and ovarian cancer **planned**
- Phase II data to be presented in **2026**



Agreement to acquire RAPT Therapeutics¹

Ozureprubart: potentially best-in-class, long-acting anti-IgE in phase IIb for food allergy

Ozureprubart has potential for:

- A differentiated, simplified and less frequent dosing regimen in patients eligible for currently-approved anti-IgE
- Broadening of the patient population to include the ~25% of patients ineligible for existing anti-IgE therapy

Phase III start planned for 2027

>17 million

People in the US diagnosed with food allergies^{2,3}

>1.3 million

People in the US suffering severe reactions⁴

>3 million

US patient visits each year to hospital/emergency care⁵

~\$33 billion

Cost of food allergies to US families in 2024⁵

1. Expected to close in Q1 2026, subject to customary closing conditions, including the tender of a majority of RAPT's outstanding shares in the tender offer and expiration or termination of applicable HSR act waiting period.

2. Warren CM, Aktas ON, Manalo LJ, Bartell TR, Gupta RS. The epidemiology of multifood allergy in the United States: a population-based study. Ann Allergy Asthma Immunol. 2023;130(5):637-648.e5 3. US Census Bureau. Age and Sex, American Community Survey, ACS 1-Year Estimates Subject Tables, Table S0101, 2022. Accessed 9 January, 2026. <https://data.census.gov/table/ACSSTTY2022.S0101> 4. MarketScan's overall prevalence, and Optum's age-stratified (<18; 18+) and overall prevalence. Severe FA defined as patients with ER/inpatient visit or under specialist care 5. FARE Food Allergy Facts and Statistics for the US (April 2024)

Developing pipeline of best/first-in-class medicines and vaccines to address medical need and deliver growth

Total pipeline assets

58

Assets in phase III

17

5 FDA approvals in 2025

*Exdensur¹, Nucala COPD², Blenrep³,
Blujepa⁴ and Penmeny⁵*

7 pivotal starts in 2025

*efimoxfermin⁶, ris-rez⁷, velzatinib for GIST⁸
and Exdensur for COPD*

5 pivotal readouts in 2026

*bepirovirs for chronic hepatitis B (positive),
camlipixant in RCC⁹, Jemperli for rectal cancer,
Q4M for HIV PrEP¹⁰ and Exdensur EGPA¹¹*

10 pivotal starts in 2026

*including mo-rez in EC¹² and OC¹³ and
Q4M for HIV treatment*

1. Exdensur for severe asthma; 2. Chronic obstructive pulmonary disease; 3. Blenrep for multiple myeloma; 4. Blujepa for uncomplicated urinary tract infections; 5. Penmeny for meningococcal disease; 6. efimoxfermin for metabolic dysfunction-associated steatohepatitis; 7. risututag rezezecan for extensive stage small cell lung cancer; 8. velzatinib for gastrointestinal stromal tumour; 9. Refractory chronic cough; 10. Pre-Exposure Prophylaxis; 11. Eosinophilic Granulomatosis with Polyangiitis; 12. Endometrial cancer; 13. Ovarian cancer



FY 2025 financial performance and 2026 guidance

Julie Brown, Chief Financial Officer



Strong performance and operational leverage delivered in FY 2025

| Core results | FY 2024 £m | FY 2025 £m | AER % | CER % |
|---------------------------|---------------|---------------|----------|-----------|
| Sales | 31,376 | 32,667 | 4 | 7 |
| Cost of sales | (7,870) | (8,206) | 4 | 5 |
| Gross profit | 23,506 | 24,461 | 4 | 7 |
| Gross profit margin | 74.9% | 74.9% | 0bps | +40bps |
| SG&A | (8,974) | (8,989) | 0 | 3 |
| Research and development | (6,023) | (6,568) | 9 | 11 |
| Royalties | 639 | 879 | 38 | 38 |
| Operating profit | 9,148 | 9,783 | 7 | 11 |
| Operating profit margin | 29.2% | 29.9% | +70bps | +110bps |
| Earnings per share | 159.3p | 172.0 | 8 | 12 |

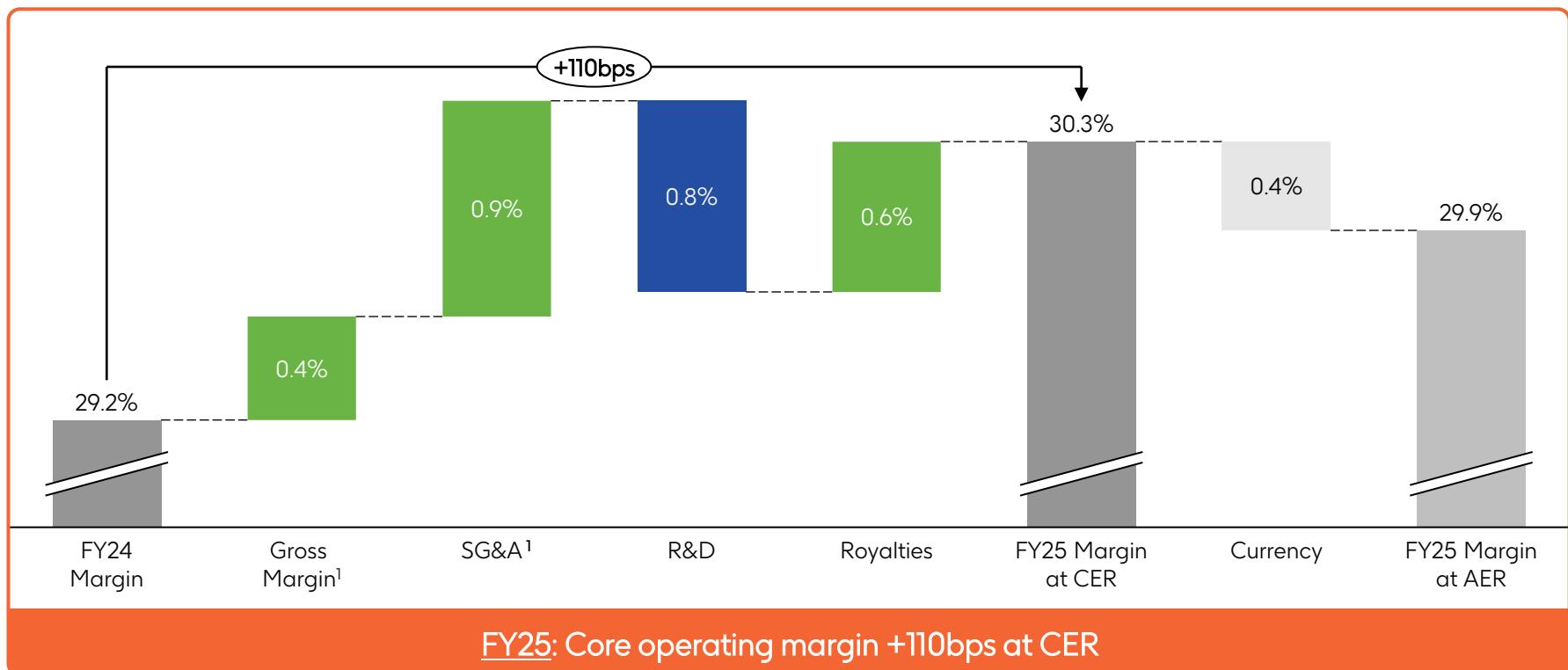
| Total results | FY 2024 £m | FY 2025 £m | AER % | CER % |
|-------------------------------|---------------|---------------|----------|----------|
| Total operating profit | 4,021 | 7,932 | 97% | >100% |
| Total operating profit margin | 12.8% | 24.3% | +11.5% | +11.9% |
| Total earnings per share | 63.2p | 141.1p | >100% | >100% |

Sales +7% & Operating Profit +11%

- Operating Margin +110bps:
 - SG&A +3% driven by product launch investment
 - R&D +11% reflected acceleration of Specialty pipeline investments
 - Royalties benefitted from RSV IP settlement and Kesimpta¹ performance
- EPS growth +12% supported by the share buyback
- Tax rate of 17.1%, broadly in line with 2024

FY 2025 core operating margin

Productivity gains supporting accelerated R&D investment and margin improvement



¹ £300m charges taken in Q4 2025 split evenly across supply chain efficiency and SG&A to drive productivity benefits (Note £150m supply chain charges taken in Q4 2024)

Strong cash performance, cash generated from operations £8.9bn

Free cash flow up £1.2bn year on year

| | FY 2024 | FY 2025 |
|--|--------------|---------------|
| Core operating profit | 9,148 | 9,783 |
| Decrease/(Increase) in working capital | (175) | (622) |
| Contingent consideration paid ³ | (1,235) | (1,330) |
| Other CGFO | 123 | 1,112 |
| Cash generated from operations (CGFO) | 7,861 | 8,943 |
| Taxation paid | (1,307) | (1,202) |
| Net tangible capex ⁴ | (1,334) | (1,324) |
| Net intangible capex ⁴ | (1,452) | (1,522) |
| Other ⁵ | (905) | (866) |
| Free cash flow (FCF) | 2,863 | 4,029 |
| Zantac settlement | (672) | (1,195) |
| CGFO excl. Zantac settlement | 8,533 | 10,138 |
| FCF excl. Zantac settlement | 3,535 | 5,224 |

CGFO¹ £8.9bn; £10.1bn ex Zantac, up £1.6bn YoY²

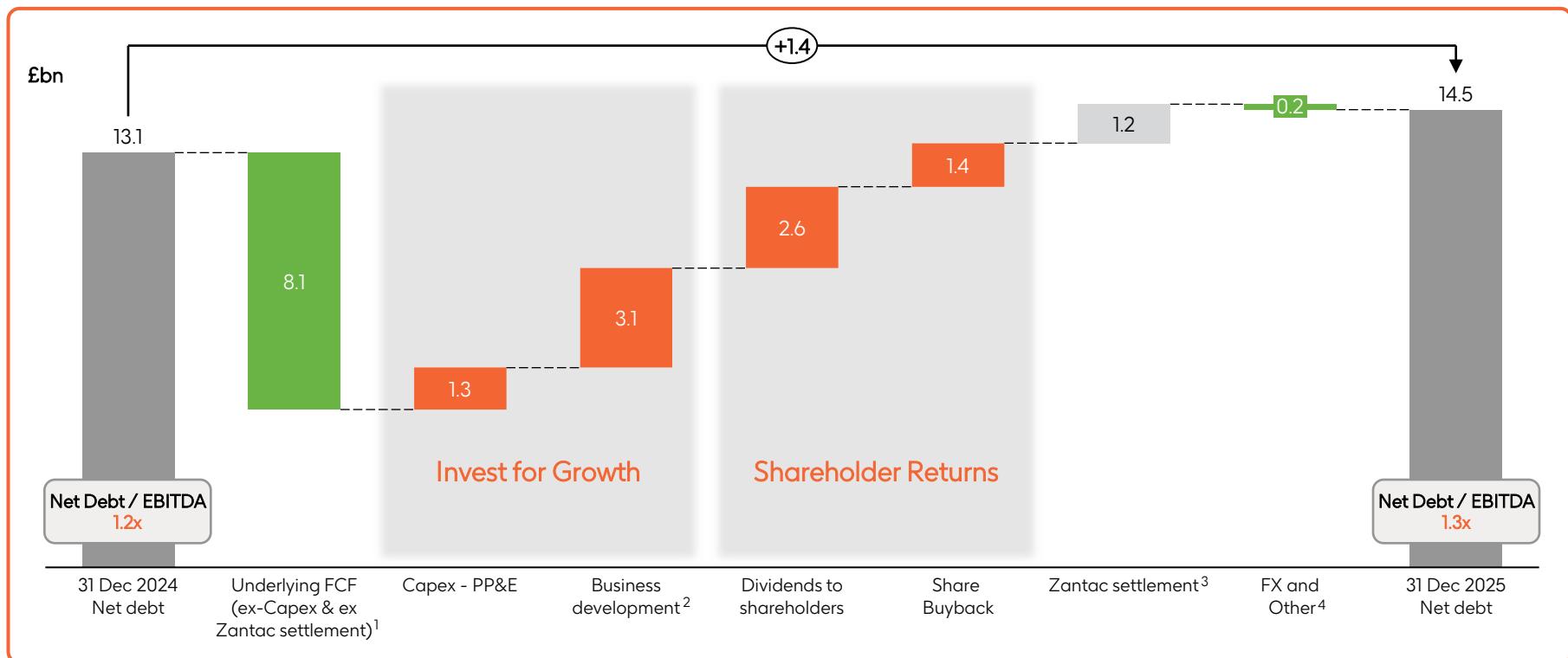
- Increased operating profit
- Working capital increase driven by higher trade receivables
- Other CGFO increase driven by:
 - +£0.7bn YoY favourable returns & rebates comparison, due to the implementation of AMP Cap changes in 2024
 - CureVac settlement +£0.3bn

FCF £4.0bn; £5.2bn ex Zantac, up £1.7bn YoY

- Driven by higher CGFO and lower tax payments

1. Cash generated from operations, including changes in returns and rebates and significant legal payments 2. Year on year 3. Contingent consideration cash payments within CGFO primarily relate to Shionogi/ViiV
4. Net capex includes purchases less disposals of property, plant and equipment/intangibles 5. Other includes net interest paid and dividends to Non-Controlling Interests

Capital deployment prioritises business growth and shareholder returns



1. Free Cash Flow (FCF) is £4.0bn, including the capital expenditure net of disposal proceeds for plant, property & equipment (£1.3bn) and intangibles (£1.5bn), included in business development above and the Zantac settlement payment of £1.2bn. 2. Business development in the above chart includes net intangible capex, net equity investments, purchase of businesses net of cash acquired, disposal of businesses and investments in associates. 3. Settlement payments relating to the Zantac litigation total £1.9bn paid to date, of which £1.2bn was paid in 2025. 4. Other includes dividend and distribution income, exchange on net debt and other financing items.

2026 Guidance at CER

Sales¹

3-5%

Core operating profit¹

7-9%

Core earnings per share¹

7-9%

Dividend

70p

Product group sales growth guidance¹

Specialty Medicines: grow low double digits %

HIV: grow mid single to high single digits %

Vaccines: decline low single digit to stable %

General Medicines: decline low single digit to stable %

P&L modelling considerations¹

Gross margin: benefit from product mix & efficiencies

SG&A: to grow low single digit %

R&D: to grow ahead of sales

Royalties: £800m to £850m

Interest: £600 to £650m

Tax Rate: ~17.5%

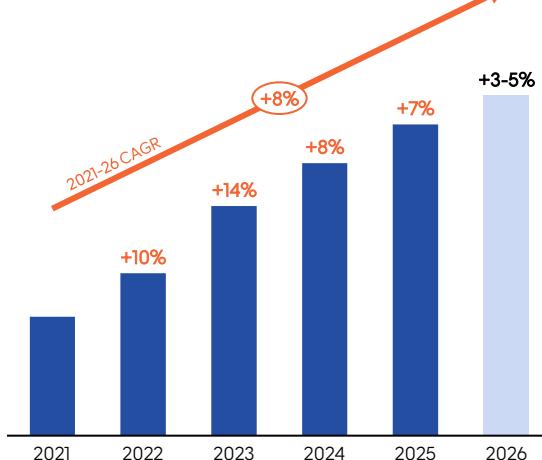
Phasing: operating profit growth to be significantly H2 weighted

Step change in performance delivered 2021-2026

Strong foundations set for next chapter of growth

On track to deliver >7% sales growth

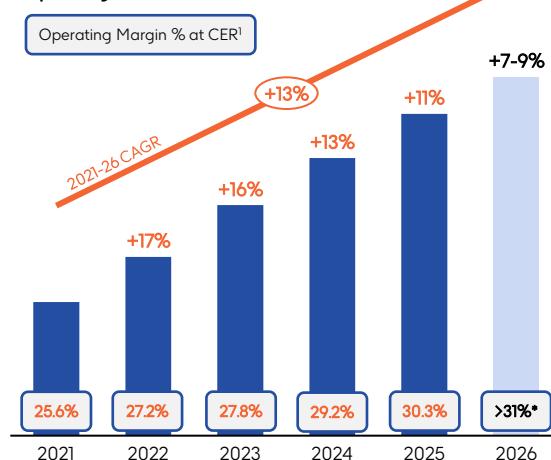
Sales Growth ex-Covid¹



On track to deliver >11% OP growth

Operating Profit Growth ex-Covid¹

Operating Margin % at CER¹

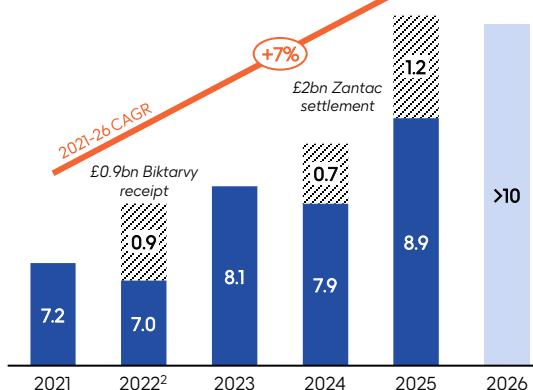


On track to deliver >£10bn CGFO in '26

Cash generated from operations (£bn)

Non-recurring item

CGFO



Evolving GSK to create value for shareholders

Accelerated
GSK R&D output
+ continued BD

Topline growth

including >£40bn sales by 2031
with continued focus on margin
improvement, with broadly stable
OP margin through dolutegravir
loss of exclusivity¹

Pipeline delivery

with product centricity,
decisive progress and agility
for 2031 and beyond

Capital allocation for growth + shareholder returns

¹. Loss of exclusivity in the US and EU is expected in 2028- 2030 with the majority of the impact in 2029-30

Summary

Creating value for patients and shareholders

- Strong 2025 performance
- 2026 guidance: sales growth 3-5% and core operating profit and core EPS growth 7-9%
- Evolving GSK for long-term success with focus on growth, margins, operational execution and pipeline acceleration

Q&A



Luke Miels
Chief Executive
Officer



Julie Brown
Chief Financial
Officer



Tony Wood
Chief Scientific
Officer



Deborah
Waterhouse
CEO, ViiV
Healthcare



Nina Mojas
President, Global
Product Strategy



David Redfern
President,
Corporate
Development

IR Roadmap 2025

| | |
|----------------------------|--|
| Execution (US launches) | |
| Pipeline | |
| Capital Allocation | |

| | H1 2025 | H2 2025 | |
|----------------------|---|---|---|
| Regulatory Decisions | <ul style="list-style-type: none"> <i>Nucala</i> COPD¹ | <ul style="list-style-type: none"> <i>Blenrep</i> 2L+ Multiple myeloma <i>Blujepa</i> uUTI² <i>Penmenvy</i> 1st gen | 3L <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |
| Phase III readouts | <ul style="list-style-type: none"> <i>Blenrep</i> 2L+ Multiple myeloma (JP) <i>Blujepa</i> uUTI² (US) <i>Jemperli</i> 1L Endometrial cancer (EU) <i>Nucala</i> COPD¹ (US) <i>Nucala</i> CRSwNP³ (CN) <i>Penmenvy</i> 1st gen (US) <i>Shingrix</i> liquid formulation (US) | <ul style="list-style-type: none"> <i>Blenrep</i> 2L+ Multiple myeloma (EU) <i>Blenrep</i> 2L+ Multiple myeloma (US) <i>Blujepa</i> GC⁷ (US) <i>Exdensur</i> SA⁸ (US) <i>Exdensur</i> CRSwNP³ (US) <i>Shingrix</i> adults 18+ YOA⁹ AIR¹⁰ (CN) <i>Shingrix</i> liquid formulation (EU) | 3L <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |
| Capital Allocation | <ul style="list-style-type: none"> cobolimab COSTAR 2L, NSCLC⁴ <i>Exdensur</i> AGILE, severe asthma <i>tebipenem</i> PIVOT-PO, cUTI⁵ <i>Zejula</i> ZEAL, 1L maintenance NSCLC⁴ | <ul style="list-style-type: none"> <i>Bexsero</i>, meningitis B, infants <i>camlipixant</i> CALM-1¹¹, RCC¹² <i>Exdensur</i> NIMBLE, severe asthma Iatozinemab: INF FRONT-3¹³, FTD-GRN¹⁴ <i>Ventolin</i> low carbon metered dose inhaler, asthma | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |
| | <ul style="list-style-type: none"> Full-year 2024 dividend upgraded £2bn share buyback announced Dividend expectation 2025 Completion of IDRx (GIST⁶) acquisition | <ul style="list-style-type: none"> Completion of efimozfermin acquisition Completion of Hengrui licensing deal | <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> |

1. Chronic obstructive pulmonary disease 2. Uncomplicated urinary tract infections (EAGLE 2/3) 3. Chronic rhinosinusitis with nasal polyps 4. Non-small cell lung cancer 5. Complicated urinary tract infection 6. Gastrointestinal stromal tumours 7. Urogenital gonorrhoea (EAGLE 1) 8. Severe asthma 9. Years of Age 10. At increased risk 11. CALM-1 results will be disclosed together with CALM-2 12. Refractory chronic cough 13. INF FRONT-3 study is sponsored by Alector Inc. 14. Frontotemporal dementia due to heterozygous mutations in the progranulin gene

IR Roadmap 2026 to 2027

Execution (US launches)

Pipeline

| | H1 2026 | H2 2026** | 2027** |
|----------------------------|---|---|--|
| Execution (US launches) | | | |
| Pipeline | | | |
| Regulatory Decisions | <ul style="list-style-type: none"> <i>Exdensur</i> SA¹ | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> <i>tebipenem</i> cUTI⁴ | <ul style="list-style-type: none"> <i>bepirovirsen</i> chronic HBV⁶ |
| Phase III readouts | <ul style="list-style-type: none"> <i>Blenrep</i> 2L+ Multiple myeloma (CN) <i>Exdensur</i> SA¹, CRSwNP² (EU,CN) <i>Exdensur</i> SA¹, CRSwNP² (JP) <i>Nucala</i> COPD³ (CN) <i>Nucala</i> COPD³ (EU) <i>tebipenem</i> cUTI⁴ (US) | <ul style="list-style-type: none"> <i>bepirovirsen</i> chronic HBV⁶ (US,JP) | <ul style="list-style-type: none"> <i>Arexvy</i> 60+ YOA⁵ (CN) <i>bepirovirsen</i> B-WELL-1/2, chronic HBV⁶ <i>cabotegravir</i> EXTEND4M, Q4M PrEP⁹, HIV* <i>camlipixant</i> CALM-1/2, RCC¹⁰ <i>Exdensur</i> OCEAN, EGPA¹¹ <i>Jemperli</i> rectal cancer (US,EU,JP) <i>Ventolin</i> low carbon metered dose inhaler (EU) |
| Phase III starts | <ul style="list-style-type: none"> <i>cabotegravir+rilpivirine</i> CUATRO, Q4M Treatment, HIV <i>mocertatug rezetecan</i> BEHOLD-OC01, 2L+ PROC⁷ <i>mocertatug rezetecan</i> BEHOLD-EC01, 2L+ EC⁸ | <ul style="list-style-type: none"> <i>efimofersin alfa</i> NEBULA-1/2, F4 MASH¹² <i>mocertatug rezetecan</i> 3 BEHOLD studies in gynecologic cancers <i>risvutatug rezetecan</i> EMBOLD study, genitourinary cancer <i>velzatinib</i> StrateGIST FrontLine, 1L GIST¹³ | Up to 10 phase III starts planned through 2027 |
| Capital Allocation | <ul style="list-style-type: none"> Full-year 2025 dividend declaration Announced acquisition of RAPT Therapeutics Dividend expectation 2026 Share buyback completion | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> | <ul style="list-style-type: none"> Full-year 2026 dividend declaration Dividend expectation 2027 |

1. Severe asthma 2. Chronic rhinosinusitis with nasal polyps 3. Chronic obstructive pulmonary disease 4. Complicated urinary tract infection 5. Years of Age 6. Hepatitis B virus 7. Platinum-resistant ovarian cancer

8. Endometrial cancer 9. Pre-Exposure Prophylaxis 10. Refractory chronic cough 11. Eosinophilic granulomatosis with polyangiitis 12. Metabolic dysfunction-associated steatohepatitis 13. Gastrointestinal stromal tumours

* Pivotal phase II study **Launches only included following positive Phase 3 readout.

2025 Total to core operating profit reconciliation

| | 2024 Operating profit (£m) | 2025 Operating profit (£m) | Key commentary on CER basis |
|--|-------------------------------|-------------------------------|---|
| Total results | 4,021 | 7,932 | |
| Intangible amortisation | 1,002 | 808 | Prior year impacted by additional amortisation for <i>Zejula</i> and <i>Jemperli</i> |
| Intangible impairment | 314 | 880 | £471m belrestotug (anti-TIGIT mAb) development programme termination (Q2 2025) |
| Major restructuring | 353 | 109 | £1.2bn benefits delivered to date ¹ |
| Transaction-related | 1,881 | 507 | ViiV Shionogi CCL ² remeasurement |
| Divestments, significant legal and other | 1,577 | (453) | Prior year includes £1.8bn Zantac charge Current year includes £0.4bn CureVac settlement |
| Core results | 9,148 | 9,783 | |

Table may not sum due to rounding. See page 20 of GSK's FY 2025 stock-exchange announcement for a full reconciliation of Total to Core results

1. Separation Preparation restructuring programme initiated in 2020 2. Contingent consideration liabilities



Improved core earnings per share with +12% growth at CER

| | 2024 £m | 2025 £m | Key commentary on CER basis |
|---|---------------|---------------|---|
| Core operating profit (OP) | 9,148 | 9,783 | |
| Net finance expense | (532) | (508) | Operating profit growth and free cash inflows |
| Share of associates | (3) | (10) | |
| Tax | (1,462) | (1,584) | |
| Tax rate | 17.0% | 17.1% | |
| Non-controlling interests | (654) | (712) | Higher core profit allocations from ViiV |
| Core Profit attributable to shareholders | 6,497 | 6,969 | |
| Core earnings per share (EPS) | 159.3p | 172.0p | |
| Total EPS | 63.2p | 141.1p | 2024 Total EPS reflects the £1.8bn Zantac charge |
| <i>Weighted average number of shares (millions)</i> | 4,077 | 4,051 | <i>£1.4bn of share buyback completed to date</i> |



Quarterly summary of core results

| | 2024 | | | | | 2025 | | | | |
|------------------------|-------|-------|-------|-------|--------|-------|-------|-------|-------|--------|
| | Q1 | Q2 | Q3 | Q4 | FY | Q1 | Q2 | Q3 | Q4 | FY |
| Sales (£m) | 7,363 | 7,884 | 8,012 | 8,117 | 31,376 | 7,516 | 7,986 | 8,547 | 8,618 | 32,667 |
| Operating profit (£m) | 2,443 | 2,513 | 2,761 | 1,431 | 9,148 | 2,533 | 2,631 | 2,985 | 1,634 | 9,783 |
| Operating margin | 33.2% | 31.9% | 34.5% | 17.6% | 29.2% | 33.7% | 32.9% | 34.9% | 19.0% | 29.9% |
| Earnings per share (p) | 43.1 | 43.4 | 49.7 | 23.2 | 159.3 | 44.9 | 46.5 | 55.0p | 25.5p | 172.0p |



Currency

2025 currency sales exposure¹

| | |
|--------------------|-----|
| US \$ | 52% |
| Euro € | 19% |
| Japanese ¥ | 4% |
| Other ² | 25% |

2026 core operating profit

| |
|---|
| US \$: 10 cents movement in the average exchange rate for full year impacts core operating profit by approx. +/- 8% |
| Euro €: 10 cents movement in the average exchange rate for full year impacts core operating profit by approx. +/- 0.5% |
| Japanese ¥: 10 Yen movement in the average exchange rate for full year impacts core operating profit by approx. +/- 1% |
| Canadian Dollar \$CAD: 10 cents movement in the average exchange rate for full year impacts core operating profit by approx. +/- 0.5% |

Currency sensitivity

If exchange rates were to hold at the closing rates on 28th January 2026 (\$1.38/£1, €1.15/£1 and Yen 210/£1) for the rest of 2026, the estimated impact on 2026 sterling turnover growth for GSK would be -3% and if exchanges gains or losses were recognised at the same level as in 2025, the estimated impact on 2026 Sterling Core Operating Profit growth would be -6%.

Historical average exchange rates quarterly

| | 2024 | | | | |
|------------|------|------|------|------|------|
| | Q1 | Q2 | Q3 | Q4 | FY24 |
| US \$ | 1.27 | 1.26 | 1.31 | 1.27 | 1.28 |
| Euro € | 1.16 | 1.17 | 1.19 | 1.20 | 1.18 |
| Japanese ¥ | 187 | 198 | 192 | 195 | 193 |

| | 2025 | | | | |
|------------|------|------|------|------|------|
| | Q1 | Q2 | Q3 | Q4 | FY25 |
| US \$ | 1.26 | 1.34 | 1.33 | 1.33 | 1.31 |
| Euro € | 1.20 | 1.18 | 1.16 | 1.14 | 1.17 |
| Japanese ¥ | 193 | 194 | 198 | 206 | 198 |

| | Historical period end exchange rates | | | | |
|------------|--------------------------------------|--------|------------|-------------|--------------|
| | US \$ | Euro € | Japanese ¥ | Canadian \$ | Chinese Yuan |
| US \$ | 1.26 | 1.27 | 1.34 | 1.25 | |
| Euro € | 1.17 | 1.18 | 1.20 | 1.20 | |
| Japanese ¥ | 191 | 203 | 191 | 197 | |

1. Based on 2025 GSK, including COVID-19 solutions

2. The other currencies that each represent more than 1% of GSK sales include Australian Dollar, Brazilian Real, Canadian Dollar, Chinese Yuan and Indian Rupee. In total, they accounted for 9% of GSK revenues in 2025

2026 full year outlook considerations to support modelling

| | 2026 Guidance | 2026 assumptions | 2021 – 2026 BIU (2021) | 2021 – 2026 BIU (2024) | 2021 – 2026 BIU (2025) | Implied 2021-26 (based on mid-point of FY 2026 guidance) |
|------------------|----------------|--|------------------------|------------------------|------------------------|--|
| Turnover | +3-5% | | >5% CAGR | >7% CAGR | >7% CAGR | 8% CAGR |
| - Specialty | +LDD | | DD CAGR | DD CAGR | Low to mid teens | 15% |
| - HIV | +MSD-HSD | | MSD CAGR | 6-8% | HSD | 11% |
| - Vaccines | -LSD to stable | | HSD CAGR | LDD CAGR | MSD to HSD | 7% |
| - Gen Meds | -LSD to stable | | Broadly Stable | Broadly Stable | LSD | 2% |
| Core OP | +7-9% | Gross margin: benefit from product mix and efficiencies SG&A: grow LSD R&D: grow ahead of sales Royalties: £800-850m | >10% CAGR | >11% CAGR | >11% CAGR | 13% CAGR |
| - Core OP margin | >31% | | >30% | >31% | >31% | >31% |
| Core EPS | +7-9% | Interest charge: £600-650m Core tax rate: ~17.5% NCI: ViiV is the main ongoing NCI Share buyback included in EPS guidance | | | | |
| Dividend | 70p | | | | | |

Upcoming pipeline catalysts: 2026 and 2027

RI&I
Oncology
HIV
Infectious Diseases

H1 2026

| | | |
|---------------------|---|--------|
| Regulatory decision | Exdensur: asthma | EU, CN |
| | Exdensur: CRSwNP ¹ | EU, CN |
| | linerixibat: cholestatic pruritus in PBC ² | US |
| | Nucala: COPD ³ | EU |
| | Blenrep: DREAMM-7, 2L+ MM ⁴ | CN |
| | Arexvy: 18-49 YoA ⁵ AIR ⁶ | US, JP |
| | tebipenem pivoxil: complicated UTI ⁷ | US |

H2 2026

| | |
|---|------------|
| linerixibat: cholestatic pruritus in PBC ² | EU |
| Arexvy: 18+ YoA ⁶ IC ⁸ | US, EU, JP |
| bepirovirsen: chronic HBV ⁹ infection | US, JP |
| Bexsero: Men B (infants) | US |

2027

| | |
|---|------------|
| camlipixant RCC ¹⁰ | US, EU, JP |
| Exdensur: EGPA ¹¹ | US |
| linerixibat: cholestatic pruritus in PBC ² | CN, JP |
| Ventolin (low carbon MDI ¹²): asthma | EU |
| Blenrep: DREAMM-8, 2L+ MM ⁴ | CN |
| Jemperli ¹³ : rectal cancer ¹⁴ | US, EU, JP |
| cabotegravir Q4M PrEP ¹⁵ , HIV | US |
| Arexvy: 60+ YoA ⁵ | CN |
| bepirovirsen: chronic HBV ⁹ infection | EU, CN |

| | | |
|----------------------------------|---|----------------|
| Regulatory submission acceptance | linerixibat: cholestatic pruritus in PBC ² | CN, JP |
| | Arexvy: Older adults 60+ YoA ⁵ (China) | CN |
| | bepirovirsen: chronic HBV ⁹ infection | US, EU, CN, JP |
| | Bexsero: Men B (infants) | US |
| Late-stage Phase III readouts | camlipixant: RCC ¹⁰ | US, EU, JP |
| | Ventolin (low carbon MDI ¹²): asthma | EU |
| | Blenrep: DREAMM-8, 2L+ MM ⁴ | CN |
| | cabotegravir: Q4M PrEP ¹⁵ , HIV prevention | US |

| |
|---|
| camlipixant: CALM-1/2, RCC ¹⁰ |
| Exdensur: OCEAN, EGPA ¹¹ |
| Jemperli ¹³ : AZUR-1, rectal cancer ¹⁴ |
| cabotegravir: EXTEND4M, Q4M PrEP ¹⁵ , HIV prevention ¹⁷ |

| |
|--|
| cabotegravir + rilpivirine: CUATRO Q4M Treatment HIV |
|--|

Changes since Q3 2025

Changes on pipeline

Progressed to Phase III

- efimofersin: FGF21 analog, MASH¹
- velzatinib: KIT inhibitor, Gastrointestinal stromal tumours

New to Phase I

- GSK6759821: Macrophage stimulating 1 receptor silencing siRNA, COPD²
- GSK5460025: Nucleotide excision repair targeting agent, Solid tumours

Removed from Phase III

- Iatozinemab: Anti-sortilin antibody, Frontotemporal dementia

Removed from Phase II

- GSK5101955: MAPS Pneumococcal 24 valent paed, Paediatric pneumococcal disease

Removed from Phase I

- GSK3888130: Anti-IL7 antibody, Autoimmune disease
- GSK5462688: RNA-editing oligonucleotide, Alpha-1 antitrypsin deficiency
- GSK4418959: Werner helicase inhibitor, dMMR/MSI-H solid tumours
- GSK4524101: DNA polymerase theta inhibitor, Cancer



Achieved pipeline catalysts

Regulatory decisions

- Exdensor: severe asthma
- Exdensor: severe asthma and CRSwNP³
- Nucala: COPD²
- Trelegy: asthma
- Arexvy: 18+ YoA⁴
- Bluvela: GC⁵
- Shingrix liquid formulation

US
JP, UK
CN
CN
EU
US
EU

Regulatory submission acceptances

- Arexvy: 18+ YoA⁴ IC⁶
- tebipenem pivoxil: complicated UTI

US, EU, JP
US

Late-stage readouts

- Arexvy: Older adults 60+ YoA⁵ (China) - Positive phase III readout
- bepirovirsen: B-WELL-1/2, chronic HBV⁷ infection - Positive phase III readout

Other news

- Exdensor: severe asthma and CRSwNP³ - Positive CHMP opinion (EU)
- Nucala: COPD² - Positive CHMP opinion (EU)
- risvutatag rezetecan: ES-SCLC⁸ - Orphan Drug Designation (US, EU)
- Jemperli⁹: AZUR-1, rectal cancer - Commissioner's National Priority Voucher (US)

58 potential new vaccines and medicines in pipeline

 RI&I
 Oncology
 HIV
 Infectious Diseases

Phase III / Registration

17

| | | |
|---|------------------------------------|---|
|  Exdansur (depemokimab) | Long-acting anti-IL5 antibody* | Asthma ^{**} |
|  inerixibat (GSK2330672) | IBAT inhibitor | Cholestatic pruritus in primary biliary cholangitis [^] |
|  Nucala (mepolizumab) | Anti-IL5 antibody | COPD ^{1^} |
|  camlipixant (GSK5464714) | P2X3 receptor antagonist | Refractory chronic cough |
|  efimoxfermin alfa (GSK6519754) | FGF21 analog* | MASH ² |
|  Low carbon version of MDI³, Ventolin (salbutamol) | Beta 2 adrenergic receptor agonist | Asthma |
|  Blenrep (belantamab mafodotin) | Anti-BCMA ADC* | Multiple myeloma [^] |
|  Jemperli (dostarlimab) | Anti-PD-1 antibody* | dMMR/MSI-H colon cancer ^{**} |
|  risvututag rezetecan (GSK5764227) | ADC targeting B7-H3* | ES-SCLC ^{4**} |
|  velzatinib (GSK6042981) | KIT inhibitor* | Gastrointestinal stromal tumours |
|  Zejula (niraparib) | PARP inhibitor* | Newly diagnosed glioblastoma multiforme |
|  Arexvy (RSV vaccine) | Recombinant protein, adjuvanted* | RSV adults (18-49 YoA ⁵ AIR ⁶) ^{**} |
|  BluJepa (gepotidacina) | BTI inhibitor* | Uncomplicated UTI ^{7^**} |
|  tebipenem pivoxil (GSK3778712) | Antibacterial carbapenem* | Complicated UTI ^{7^} |
|  bepirovirsen (GSK3228836) | Antisense oligonucleotide* | Chronic HBV ⁸ infection ^{**} |
|  Bexsero (MenB vaccine) | Recombinant protein, OMV | Meningitis B (infants US) |
|  GSK4178116 | Live, attenuated | Varicella new seed |

* In-license or other alliance relationship with third party ^ In registration ** Additional indications or candidates also under investigation
 1. Chronic obstructive pulmonary disease 2. Metabolic dysfunction-associated steatohepatitis 3. Metered dose inhaler 4. Extensive-stage small-cell lung cancer 5. Years of age 6. At increased risk
 7. Urinary tract infection 8. Hepatitis B virus

58 potential new vaccines and medicines in pipeline

 RI&I
 Oncology
 HIV
 Infectious Diseases

Phase II

18

| | | |
|---|------------------------------------|--|
|  Benlysta (belimumab) | Anti-BLyS antibody | Systemic sclerosis associated ILD ^{1,2**} |
|  GSK4532990 | HSD17B13 RNA interference* | MASH ^{3**} |
|  GSK5784283 | TSLP monoclonal antibody* | Asthma |
|  nivinebart (GSK4527226) | Anti-sortilin antibody* | Alzheimer's disease |
|  Ojjaara/Omjara (momelotinib) | JAK1, JAK2 and ACVR1 inhibitor* | Myelodysplastic syndrome** |
|  cabotegravir (GSK1265744) | Integrase inhibitor | HIV |
|  VH3810109 | Broadly neutralizing antibody* | HIV |
|  VH4011499 | Capsid protein inhibitor | HIV |
|  VH4524184 | Integrase inhibitor* | HIV |
|  alpibectr (BVL-GSK3729098) | Ethionamide booster* | Tuberculosis |
|  ganfentorole (GSK3036656) | Leucyl t-RNA synthetase inhibitor* | Tuberculosis |
|  GSK4077164 | Bivalent GMMA and TCV* | Invasive non-typhoidal salmonella |
|  GSK4382276 | mRNA* | Seasonal flu |
|  GSK4396687 | mRNA* | COVID-19 |
|  GSK4406371 | Live, attenuated | MMRV ⁴ new seed |
|  GSK5102188 | Recombinant subunit, adjuvanted | UTI ^{5,6} |
|  GSK5536522 | mRNA* | Flu H5N1 pre-pandemic ⁶ |
|  GSK5637608 | Hepatitis B virus-targeted siRNA* | Chronic HBV ⁷ infection |

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

1. Interstitial lung disease 2. In phase II/III study 3. Metabolic dysfunction-associated steatohepatitis 4. Measles, Mumps, Rubella, and Varicella 5. Urinary tract infection 6. In phase I/II study 7. Hepatitis B virus

58 potential new vaccines and medicines in pipeline

 RI&I
 Oncology
 HIV
 Infectious Diseases

Phase I

23

| | | |
|---|--|---|
| GSK3862995 | Anti-IL33 antibody | COPD ^{1**} |
| GSK4347859 | Interferon pathway modulator | Systemic lupus erythematosus |
| GSK4527363 | B-cell modulator | Systemic lupus erythematosus |
| GSK4528287 | Anti-IL23-IL18 bispecific antibody* | Inflammatory bowel disease |
| GSK4771261 | Monoclonal antibody against novel kidney target | Autosomal dominant PKD ² |
| GSK5926371 | Anti-CD19-CD20-CD3 trispecific antibody* | Autoimmune disease |
| GSK6582701 | PDE3/4 inhibitor* | COPD ¹ |
| GSK6759821 | Macrophage stimulating 1 receptor silencing siRNA* | COPD ¹ |
| belantamab (GSK2857914) | Anti-BCMA antibody | Multiple myeloma |
| GSK5458514 | PSMAxCD3 T cell engaging bispecific antibody* | Prostate cancer ³ |
| GSK5460025 | Nucleotide excision repair targeting agent* | Solid tumours ³ |
| mocertatug rezetecan (GSK5733584) | ADC targeting B7-H4* | Gynaecologic malignancies ^{**} |
| XMT-2056 ⁴ (wholly owned by Mersana Therapeutics) | STING agonist ADC* | Cancer |
| VH4527079 | HIV entry inhibitor | HIV |
| GSK3772701 | <i>P. falciparum</i> whole cell inhibitor* | Malaria |
| GSK3882347 | FimH antagonist* | Uncomplicated UTI ⁵ |
| GSK3923868 | PI4K beta inhibitor | Rhinovirus disease |
| GSK3965193 | PAPD5/PAPD7 inhibitor | Chronic HBV ⁶ infection ³ |
| GSK4024484 | <i>P. falciparum</i> whole cell inhibitor* | Malaria |
| GSK4424989 | Recombinant/glycoconjugate vaccine* | Group A streptococcal infections |
| GSK5251738 | TLR8 agonist* | Chronic HBV ⁶ infection |
| GSK5459248 | MAPS Pneumococcal 30+ valent adults* | Pneumococcal disease |
| GSK5475152 | mRNA* | Seasonal flu/COVID-19 ³ |

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

1. Chronic obstructive pulmonary disease 2. Polycystic kidney disease 3. In phase I/II study 4. GSK has an exclusive global license option to co-develop and commercialise the candidate

5. Urinary tract infection 6. Hepatitis B virus

Executive Committee changes to support evolution

Industry leaders with strategic, functional and operational experience



Lynn Baxter

President, Europe

Responsible for the commercial performance and strategic direction of European markets, overseeing more than 30 countries

Before joining, held senior commercial roles at Roche and Merck & Co., Inc.



Maya Martinez-Davis

President, US

Leads US business, driving sustainable revenue and profit growth across all therapeutic areas.

Before joining, was President, Biopharma Latin America and Global Head of Oncology Franchise at Merck KGaA, and Regional President, Oncology North America at Pfizer.



Mike Crichton

President, International

Leads commercial growth and operational excellence across all markets outside the US and Europe, including China and Japan.

Before joining, held senior roles at Novartis, AstraZeneca and Roche.



Nina Mojas

President, Global Product Strategy

Responsible for global commercial strategy, lifecycle management, and market access for portfolio across all therapeutic areas.

Before joining, held several senior roles at AstraZeneca, including Vice President, Global Medicine Lead and Vice President, Oncology Search and Evaluation, and served as Investor Relations Officer at Roche.



Mondher Mahjoubi

Chief Patient Officer

Leads the development and execution of global medical strategy, ensuring the scientific integrity and clinical value of GSK's medicines and vaccines worldwide.

Before joining, was CEO of Innate Pharma, and held senior leadership roles at AstraZeneca, Genentech, Roche, and Sanofi.

Glossary

| | | | | | |
|---------|--|-------|--|-------|---|
| ADC | Antibody-drug conjugate | GIST | Gastrointestinal stromal tumor | PFS2 | Time to second disease progression or death |
| AE | Adverse event | GMMA | Generalised Modules for Membrane Antigens | PK | Pharmacokinetics |
| AESI | Adverse event of special interest | HBV | Hepatitis B virus | PKD | Polycystic kidney disease |
| AIR | At increased risk | HES | Hypereosinophilic syndrome | PrEP | Pre-exposure prophylaxis |
| ALD | Alcohol-related liver disease | IC | Immunocompromised | RCC | Refractory chronic cough |
| ART | Antiviral therapy | ILD | Interstitial lung disease | RRMM | Relapsed/refractory multiple myeloma |
| BCMA | B-cell maturation antigen | iNTS | Invasive non-typhoidal salmonella | RSV | Respiratory syncytial virus |
| BICR | Blinded Independent Central Review | JP | Japan | SAD | Single ascending dose |
| CBR | Clinical benefit rate | MAD | Multiple ascending dose | SAE | Serious adverse event |
| cCR | Complete clinical response | MASH | Metabolic dysfunction-associated steatohepatitis | SCLC | Small cell lung cancer |
| CHMP | Committee for Medicinal Products for Human Use | MDI | Metered dose inhaler | siRNA | Small interfering RNA |
| CMV | Cytomegalovirus | MM | Multiple myeloma | SLE | Systemic lupus erythematosus |
| CN | China | MMRp | Mismatch repair proficient | SoC | Standard of care |
| COPD | Chronic obstructive pulmonary disease | MMRV | Measles, mumps, rubella and varicella | SSc | Systemic sclerosis associated |
| CRR | Complete response rate | MRD | Multiple rising dose | TCV | Typhoid conjugate vaccine |
| CRSwNP | Chronic rhinosinusitis with nasal polyps | MSI-H | Microsatellite instability high | TTBR | Time to best response |
| CTD | Connective tissue disease | MSS | Microsatellite stability | TTD | Time to treatment discontinuation |
| cUTI | Complicated urinary tract infection | NASH | Non-alcoholic steatohepatitis | TTP | Time to tumour progression |
| DLT | Dose-limiting toxicity | NSCLC | Non-small cell lung cancer | TTR | Time to treatment response |
| dMMR | Deficient mismatch repair | OMV | Outer membrane vesicle | ULA | Ultra long acting |
| DoR | Duration of response | ORR | Overall response rate | UTI | Urinary tract infection |
| EFS | Event-free survival | OS | Overall survival | uUTI | Uncomplicated urinary tract infection |
| EGPA | Eosinophilic granulomatosis with polyangiitis | PBC | Primary biliary cholangitis | VGPR | Very good partial remission |
| FTD-GRN | Frontotemporal dementia with progranulin gene mutation | PD | Pharmacodynamics | YoA | Years of age |
| GC | Urogenital gonorrhea | PFS | Progression-free survival | | |

Assumptions and basis of preparation related to 2026 Guidance, 2021-26 and 2031 Outlooks

In outlining the guidance for 2026, and outlooks for the period 2021-26 and for 2031, the Group has made certain assumptions about the macro-economic environment, the healthcare sector (including regarding existing and possible additional governmental legislative and regulatory reform), the different markets and competitive landscape in which the Group operates and the delivery of revenues and financial benefits from its current portfolio, its development pipeline and restructuring programmes. As previously announced, on 19 December 2025 GSK entered into an agreement with the US Administration to lower the cost of prescription medicines for American patients. The agreement entered into covers both GSK and ViiV Healthcare and, assuming expected implementation, excludes both companies from s232 tariffs for 3 years. Detailed terms of the agreement remain confidential. Our full year guidance is inclusive of the expected impact of the agreement.

2026 Guidance

These planning assumptions as well as operating profit and earnings per share guidance and dividend expectations assume no material interruptions to supply of the Group's products, no material mergers, acquisitions or disposals, no material litigation or investigation costs for the Company (save for those that are already recognised or for which provisions have been made) and no change in the Group's shareholdings in ViiV Healthcare. The assumptions also assume no material changes in the healthcare environment or unexpected significant changes in pricing or trade policies, including tariffs (except as noted above), as a result of government or competitor action. The 2026 guidance factors in all divestments and product exits announced to date.

2021-26 and 2031 Outlooks

The assumptions for GSK's revenue, Core operating profit, Core operating margin and cash flow outlooks, 2031 revenue outlook and margin expectations through dolutegravir loss of exclusivity assume the delivery of revenues and financial benefits from its current and development pipeline portfolio of medicines and vaccines (which have been assessed for this purpose on a risk-adjusted basis, as described further below); regulatory approvals of the pipeline portfolio of medicines and vaccines that underlie these expectations (which have also been assessed for this purpose on a risk-adjusted basis, as described further below); no material interruptions to supply of the Group's products; successful delivery of the ongoing and planned integration and restructuring plans; no material mergers, acquisitions or disposals or other material business development transactions; no material litigation or investigation costs for the Company (save for those that are already recognised or for which provisions have been made); and no change in the Group's shareholdings in ViiV Healthcare. GSK assumes no premature loss of exclusivity for key products over the period.

The assumptions for GSK's revenue, Core operating profit, Core operating margin and cash flow outlooks, 2031 revenue outlook and margin expectations through dolutegravir loss of exclusivity also factor in all divestments and product exits announced to date as well as material costs for investment in new product launches and R&D. Risk adjusted sales includes sales for potential planned launches which are risk-adjusted based on the latest internal estimate of the probability of technical and regulatory success for each asset in development.

Notwithstanding our guidance, outlooks and expectations, there is still uncertainty as to whether our assumptions, guidance, outlooks and expectations will be achieved.

All outlook statements are given on a constant currency basis and use 2025 average exchange rates as a base (£1/\$1.31, £1/€1.17, £1/Yen 198).

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