



First Quarter 2016 Financial Results

May 2, 2016



Agenda

Welcome

- Christine Regan Lindenboom
Vice President, Investor Relations & Corporate Communications

Q1 2016 Overview

- John Maraganore, Ph.D.
Chief Executive Officer

Anylam Clinical Pipeline

- Pushkal Garg, M.D.
Senior Vice President, Clinical Development

Financial Results

- Michael Mason
Vice President, Finance and Treasurer

2016 Goal Update

- Barry Greene
President and Chief Operating Officer

Q&A Session

Anylam Forward Looking Statements

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, successfully demonstrate the efficacy and safety of our drug candidates, obtain, maintain and protect intellectual property, enforce our patents and defend our patent portfolio, obtain regulatory approval for products, establish and maintain business alliances; our dependence on third parties for access to intellectual property; and the outcome of litigation, as well as those risks more fully discussed in our most recent annual report on Form 10-K 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.

John Maraganore, Ph.D.
Chief Executive Officer

Q1 2016 Overview



Pushkal Garg, M.D.
Senior Vice President, Clinical Development

Anylam Clinical Pipeline

Alnylam ATTR Amyloidosis Portfolio

Committed to Continued Innovation for Patients



patisiran

hATTR-PN

- IV administration
- Phase 2 completed
- Phase 2 Open-Label Extension (OLE) study ongoing
- *f*APOLLO Phase 3 trial ongoing; fully enrolled



revusiran

hATTR-CM

- SC administration
- Phase 2 completed
- Phase 2 OLE study ongoing
- ENDEAVOR Phase 3 trial ongoing



ALN-TTRsc02

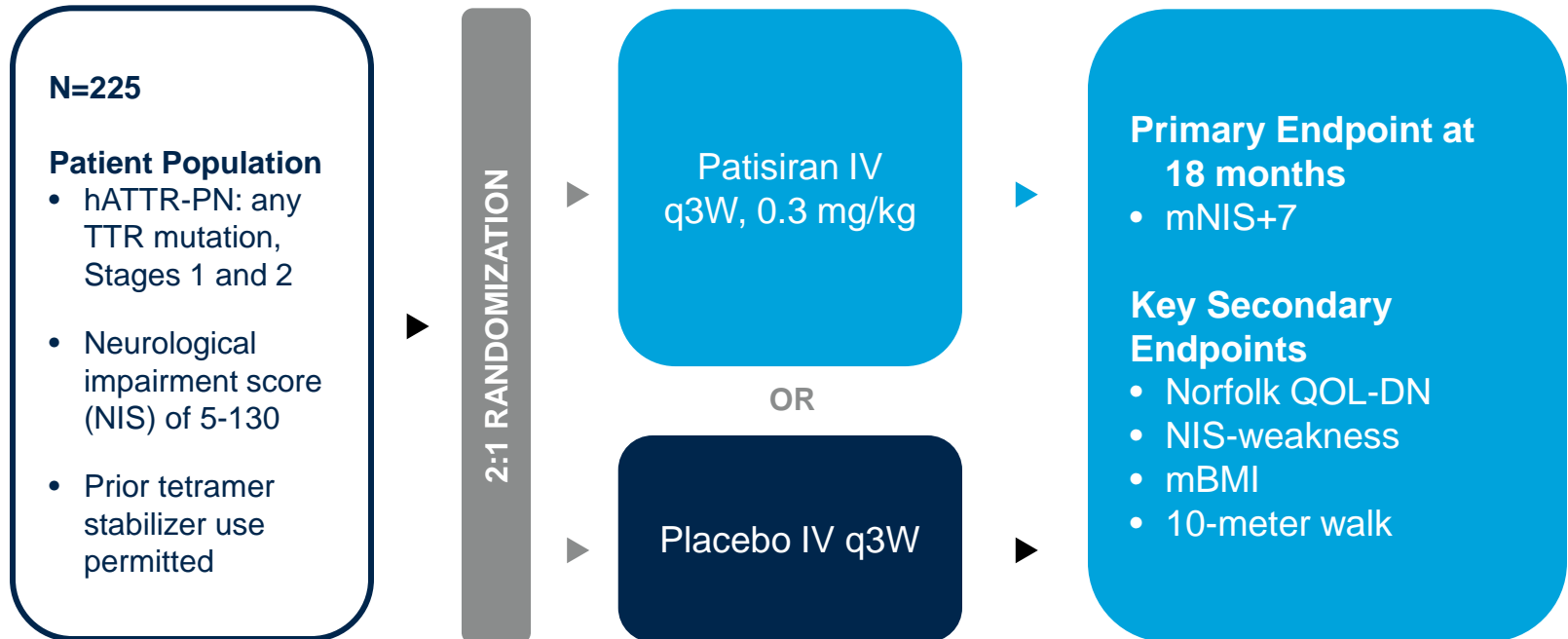
ATTR

hATTR-PN, hATTR-CM & wtATTR

- ESC “second generation” chemistry
- Expect quarterly SC dose regimen
- CTA filed March 2016; data expected late 2016
- Phase 3 start planned for 2017

APOLLO Phase 3 Study Design

Enrollment Complete

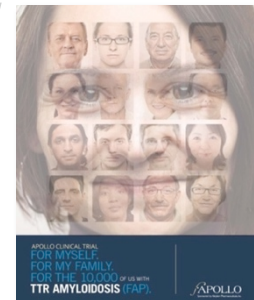


All completers eligible for patisiran treatment on Phase 3 OLE study (APOLLO-OLE)

Enrollment completed end of January, supporting 2017 NDA and MAA if study is positive

Statistical Considerations

- Placebo-estimated mNIS+7 progression rate of 17.8 points/year derived from natural history study of 283 hATTR-PN patients
- 90% Power to detect as little as 37.5% difference in Δ mNIS+7 between treatment groups with 2-sided $\alpha=0.05$
 - Based on original target enrollment of 200 patients



Patisiran Interim Phase 2 OLE Study Results*

Ongoing Study in hATTR-PN Patients

Mean max
92%
TTR KD
clamped thru
24 months

Neurological
impairment
stabilized at 18
months with mean
0.8
point decrease in
mNIS+7

TTR KD
correlated with
improvement in
mNIS+7
scores

Median
77%
increase in
sweat gland nerve
fiber density on
biopsy

Evidence for Potential Halting of Neuropathy Progression

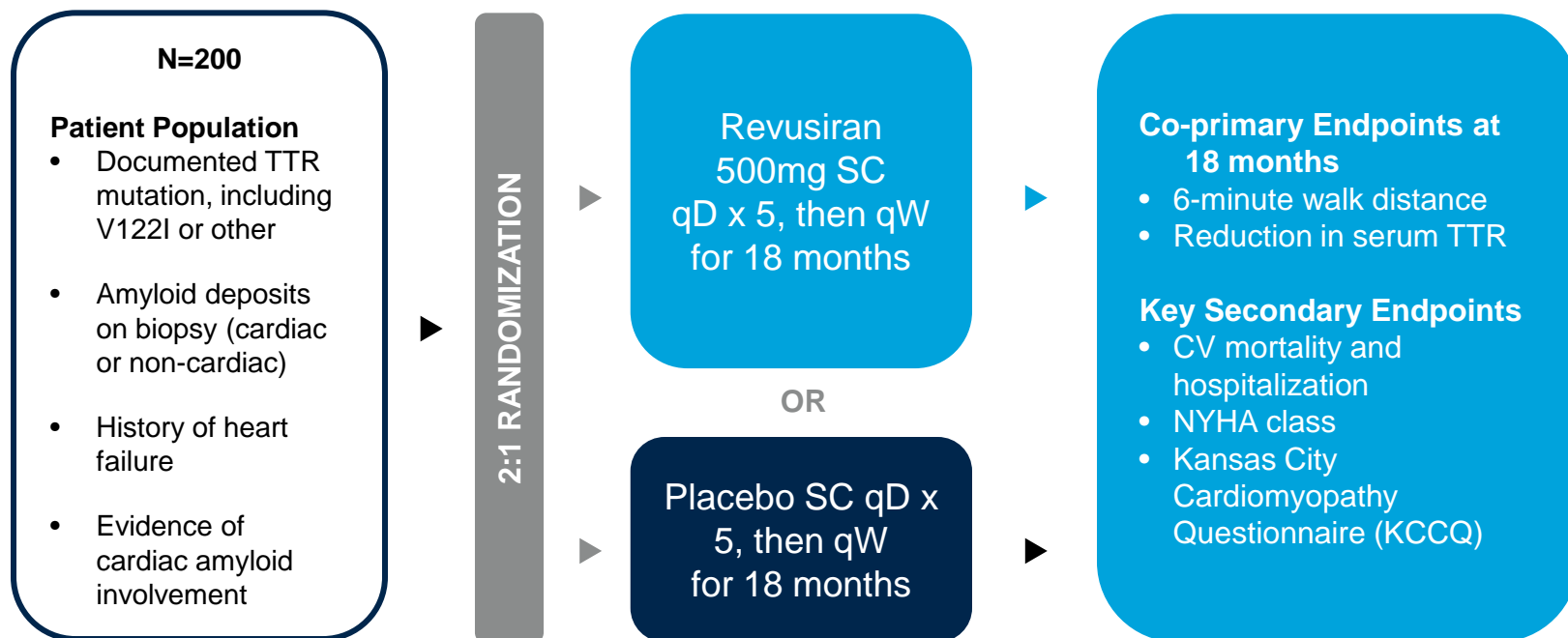
Safety: Generally well tolerated out to 25 months

- 8 non-drug related SAEs in 5 patients
- Majority of AEs mild to moderate, including mild flushing (22.2%) and infusion-related reactions (18.5%)
- No significant lab findings, no drug-related discontinuations

PLANNED NEXT STEPS

**24-month
Phase 2 OLE data
in mid-2016**

ENDEAVOUR Phase 3 Study Design



All completers eligible for revusiran treatment on Phase 3 OLE study

Expect to complete enrollment in late 2016; Report data in mid-2018

Statistical Considerations

- Placebo-estimated decline in 6-MWD of ~140 meters over 18 months in natural history study of 137 hATTR-CM patients (N=39 for 6-MWD data)
- 90% Power to detect as little as 39% difference in 18 mo change from baseline 6-MWD between treatment groups with significance level of $p < 0.05$
- Unblinded interim analysis for futility when ~50% of patients reach 18 months

Revusiran Interim Phase 2 OLE Study Results*

Ongoing Study in hATTR-CM Patients

Mean max
87%
TTR KD

**Sustained and
clamped TTR**
KD out to
6
months

Stable
6-MWD
in majority of
evaluable patients

No clinically
meaningful
changes in
other cardiac
measures

Opportunity to Evaluate Effects of TTR Knockdown in hATTR-CM

Safety: Generally well tolerated in majority of patients

- SAEs in 8 patients (32%), including one death due to infiltrative cardiomyopathy; all SAEs deemed not related to drug
- Majority of AEs mild or moderate
- Injection site reactions (ISRs) reported in 11 patients (44%)
 - 3 discontinuations due to ISRs or diffuse rash; no further discontinuations due to ISRs at last reporting date
- Reversible LFT elevation in 1 patient resulting in dose reduction; no other notable lab abnormalities

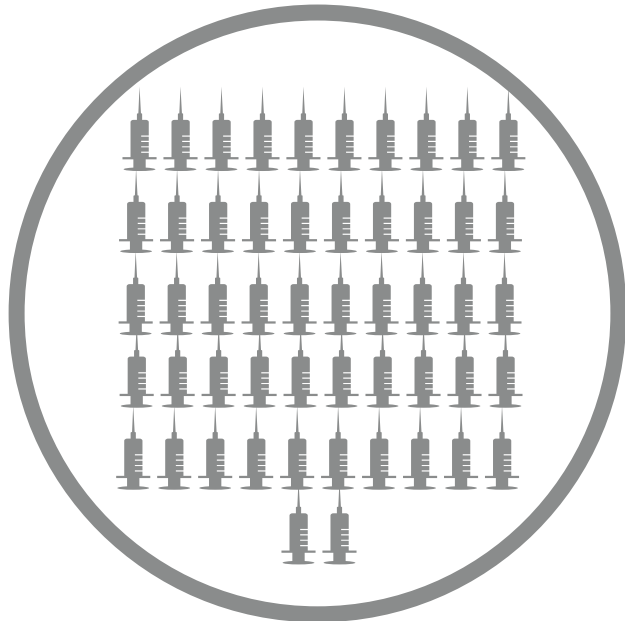
PLANNED NEXT STEPS

**12-month
Phase 2 OLE data
in mid-2016**

ALN-TTRsc02 Opportunity

Potential for Best-in-Class Profile

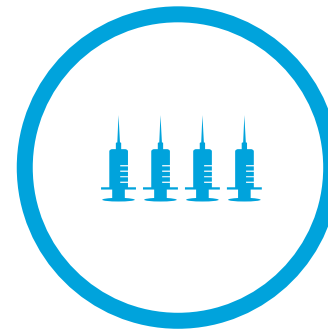
Revusiran/IONIS-TTR_{Rx}



52

DOSES PER YEAR

ALN-TTRsc02



4

DOSES PER YEAR
ANTICIPATED

PLANNED NEXT STEPS

CTA filed

in March 2016

Phase 1 start

mid-2016

Initial Data

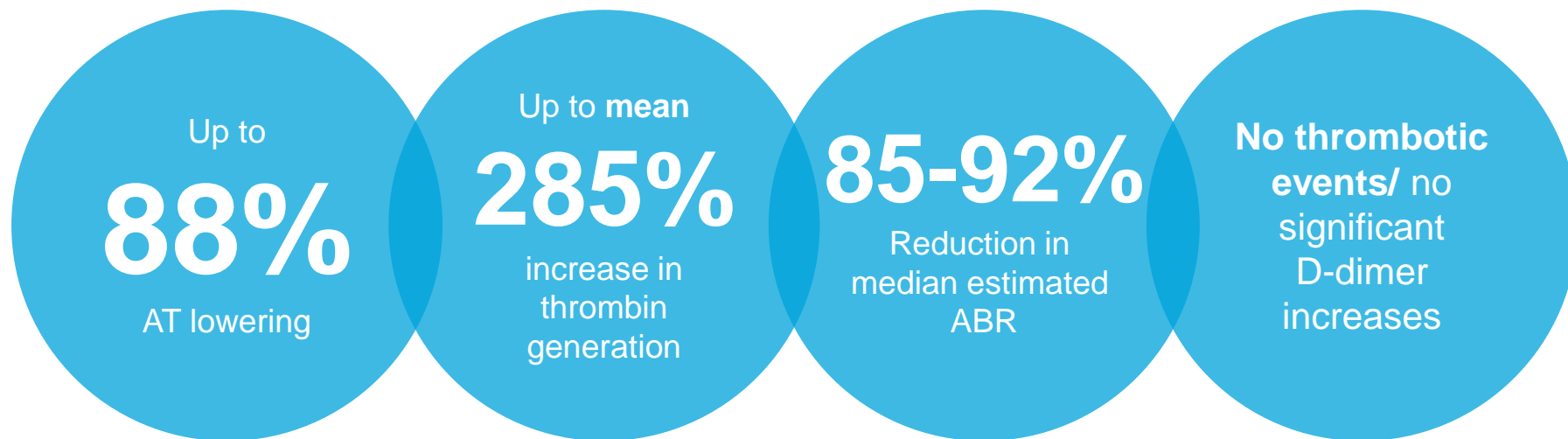
late 2016

Phase 3 start

in 2017

Fitusiran Interim Phase 1 Study Results*

Ongoing Study in Hemophilia A & B Patients



DURABILITY



Monthly SC dose
regimen

Evidence for Potential Restoration of
Hemostasis in Severe Hemophilia A and B

Safety: Generally well tolerated

- No SAEs; majority of AEs mild or moderate, and transient; no discontinuations
- Mild, transient ISRs in 2 (8%) patients

PLANNED NEXT STEPS

Additional data

in mid- and late 2016

Start Phase 3 studies

in mid- and late 2016

ALN-CC5 Initial Phase 1/2 Study Results*

Ongoing Study in Healthy Volunteers and PNH Patients

Up to
99%
C5 KD

Nadir residual C5
less than
1 mcg/mL

Clamped
PD for over
90 days
after **single**
dose

Mean max
inhibition of sheep
RBC hemolytic
activity up to
84%

DURABILITY



Monthly and possibly **quarterly** SC dose regimen for eculizumab poor responders and eculizumab sparing

Significant and Durable Knockdown of Serum C5 Drives Opportunity to Address Eculizumab Limitations in PNH

Safety: Generally well tolerated

- All AEs mild or moderate in severity; no SAEs, no discontinuations
- Mild, transient ISRs observed in 6 (18.75%) subjects

PLANNED NEXT STEPS

Data in ~5 PNH patients
on June 11 at EHA

Start PNH Phase 2
in late 2016

ALN-AS1 Initial Phase 1 Study Results*

Ongoing Study in Asymptomatic & Symptomatic Porphyria Patients



DURABILITY



Monthly and possibly **quarterly** SC dose regimen

Potent, Dose-Dependent Lowering of Toxic Heme Intermediates that Mediate Attacks

Safety: Generally well tolerated

- No SAEs related to study drug and no discontinuations
- All AEs reported were mild-moderate in severity
- No clinically significant laboratory abnormalities related to study drug

PLANNED NEXT STEPS

Recurrent attack patient data
in **late 2016**

Start Phase 3
in **2017**

Primary Hyperoxaluria Type 1 (PH1)

ALN-GO1

DESCRIPTION

Genetic mutations lead to excessive oxalate production, resulting in recurrent kidney stones and extensive renal damage

PATIENT POPULATION*

~5,000
worldwide

Leads to
renal failure
in children

DRUG MECHANISM

ALN-GO1 targets glycolate oxidase (GO), an enzyme upstream from the genetic defect, for potential lowering of oxalate levels

Pre-clinical results:‡

99%

GO mRNA silencing

98%

reduction in
urinary oxalate

Phase 1 initiated
in March 2016

PLANNED NEXT STEPS

Initial clinical data
in late 2016

* Cochat *et al.*, *N Engl J Med*, 2013

‡ Erbe, *ESPN*, September 2015

ALN-PCSSc ORION-1 Phase 2 Study*



480 ASCVD subjects with elevated LDL-C on maximal lipid lowering therapy

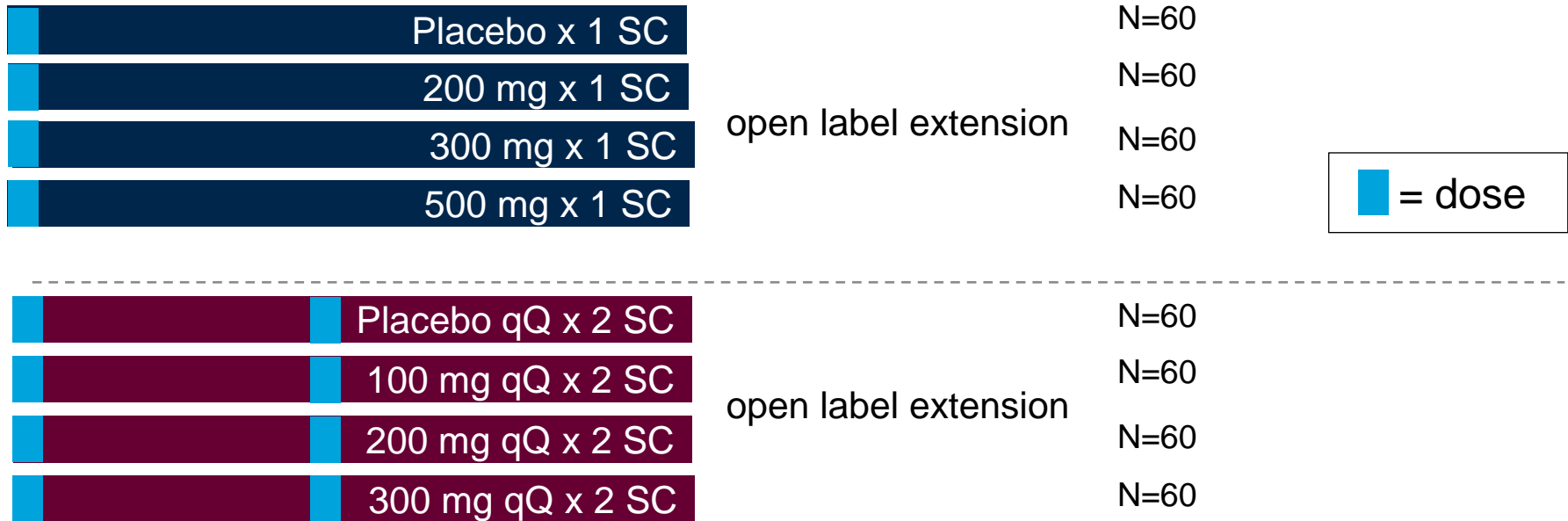
Primary objectives

- LDL-C levels at day 180

Secondary objectives

- Safety and tolerability, PCSK9 and LDL-C reduction and duration of effect qQ vs Bi-annual, proportion of patients reaching global lipid guidelines, changes in other lipoprotein levels

Randomized 3:1, Double blind, Placebo controlled



*The Medicines Company is leading and funding development of the ALN-PCSSc program from Phase 2 onward and will commercialize the program, if successful

Hepatitis B Virus (HBV) Infection

ALN-HBV

DESCRIPTION

Viral infection leading to cirrhosis and hepatocellular carcinoma (HCC)

PATIENT POPULATION*

1/3 of world population infected

400M patients worldwide, 25M in U.S./EU with chronic infection

DRUG MECHANISM

ALN-HBV targets all four transcripts of viral genome for potential reduction of HBsAg levels and increase in seroconversion rates

Pre-clinical results:†

up to
3.6 \log_{10}
HBsAg reduction

>4 \log_{10}

reduction in viral DNA in chronically infected chimps

CTA filed

in February 2016

PLANNED NEXT STEPS

Phase 1 Start

in mid-2016

* WHO; *Global Data Report*, 2015

† Sepp-Lorenzino, *Liver Meeting*, November 2015



Michael Mason

Vice President, Finance and Treasurer

Q1 2016 Financial Results

Financial Summary and Guidance

2016 Q1 Financial Results

- Cash ~\$1.21B
- GAAP Revenues \$7.3M
- Total GAAP Operating Expenses \$117.4M
 - Research and Development Expense \$96.3M
 - General and Administrative Expense \$21.1M
- GAAP Net Loss of \$103.0M
- Shares Outstanding ~85.5M

2016 Guidance

- Year-end cash >\$1.0B
 - Includes \$150 million of restricted marketable securities received from credit agreements related to build out of new drug substance manufacturing facility

Barry Greene
President and Chief Operating Officer

2016 Goals Update

Anylam 2016 Pipeline Goals

2016*

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

		Early	Mid	Late
PATISIRAN (Hereditary ATTR Amyloidosis with Polyneuropathy)	Complete APOLLO Phase 3 Accrual	✓		
	Phase 2 OLE 24 Month Data		●	
REVUSIRAN (Hereditary ATTR Amyloidosis with Cardiomyopathy)	Complete ENDEAVOUR Phase 3 Accrual			●
	Phase 2 OLE 12 Month Data		●	
ALN-TTRsc02 (ATTR Amyloidosis)	CTA Filing	✓		
	Start Phase 1		●	
	Initial Phase 1 Data			●
FITUSIRAN (Hemophilia and RBD)	Phase 1 Data		●	
	Phase 1 OLE Data			●
	Start Phase 3 Studies		●	●
ALN-CC5 (Complement-Mediated Disease)	Phase 1/2 Data		●	
	Phase 2 PNH Start			●
ALN-AS1 (Hepatic Porphyrias)	Phase 1 Data			●
ALN-AAT (Alpha-1 Antitrypsin Deficiency)	Initial Phase 1 Data		●	
ALN-GO1 (Primary Hyperoxaluria)	Start Phase 1	✓		
	Initial Phase 1 Data			●
New Genetic Medicine Program	CTA Filing			●
ALN-PCSsc (Hypercholesterolemia)	Initial Phase 2 Data			●
ALN-HBV (Hepatitis B Virus Infection)	CTA Filing	✓		
	Start Phase 1		●	

Select Scientific and Clinical Meetings

Mid-2016

	Conference	Date (Location)	Expected Presentation(s)
ALN-CC5	European Renal Association – European Dialysis and Transplant Association (ERA-EDTA)	May 22 (Vienna)	ALN-CC5 Phase 1/2, Parts A and B (updated healthy volunteer data)
ALN-CC5	European Hematology Association (EHA)	June 11 (Copenhagen)	ALN-CC5 Phase 1/2, Part C (PNH patients)
Patisiran Revusiran	International Symposium on Amyloidosis (ISA)*	July 3-8 (Uppsala)	Patisiran initial 24-month Ph 2 OLE; Revusiran initial 12-month Ph 2 OLE
Fitusiran	World Federation of Hemophilia (WFH)	July 27 (Orlando)	Fitusiran Phase 1, Part C (highest and fixed dose cohorts, including inhibitor patients)

*pending abstract acceptance

Q1 2016 Financial Results

Q&A Session



Thank you

