

We discover. We dare. We care.

Presentation | JP Morgan Healthcare Conference 2021



Disclaimer

This presentation contains forward-looking statements, including (without limitation) statements concerning the progress of our R&D and clinical pipeline, our expectations regarding commercial sales of Jyseleca, the global R&D collaboration with Gilead, the amendment of our arrangement with Gilead for the commercialization and development of Jyseleca, the amount and timing of potential future opt-in and/or royalty payments by Gilead, interactions with regulatory authorities, the potential approval process for filgotinib in RA and additional indications, the outcome of pricing and reimbursement interactions, the build-up of our commercial organization, the impact of COVID-19, our beliefs regarding the inflammation market, and our strategy, business plans and focus, the slides captioned "Ready for an exciting future," "Inflammation franchise," including list of compounds, "Jyseleca," "New agreement for Jyseleca," "EU5 inflammation market today," "Jyseleca in RA," "Toledo," "Restoring the Immune Balance," "Promising and broad *in vivo* activity," "Parallel Proof of Concept studies," "Strong *ex vivo* PD activity in Ph1," "Fibrosis franchise," "Phase 3 ISABELA 1&2," "ISABELA," "PINTA Ph2 with '1205 in IPF," "Deep R&D pipeline, "Gilead-Galapagos R&D collaboration," "2021 cash burn increase ~€50M," "Jyseleca in Europe," and "Newsflow 2021," statements regarding the expected timing, design and readouts of ongoing and planned clinical trials (i) with filgotinib in RA, IBD, and other potential indications (ii) with ziritaxestat in IPF and Ssc and GLPG1205 and GLPG4716 in IPF, (iii) with the Toledo program, and expectations regarding the commercial potential of our product candidates. When used in this presentation, the words "anticipate," "believe," "can," "could," "estimate," "expect," "intend," "is designed to," "may," "might," "will," "plan," "potential," "possible," "predict," "objective," "should," and similar expressions are intended to identify forward-looking statements.

Forward-looking statements involve known and unknown risks, uncertainties and other factors which might cause the actual results, financial condition, performance or achievements of Galapagos, or industry results, to be materially different from any future results, financial conditions, performance or achievements expressed or implied by such forward-looking statements. Among the factors that may result in differences are the inherent uncertainties associated with competitive developments, clinical trial and product development activities, regulatory approval requirements (including that data from the company's development programs may not support registration or further development of its compounds due to safety, efficacy or other reasons, and the uncertainties relating to the impact of the COVID-19 pandemic), reliance on third parties (including Galapagos' collaboration partner Gilead) and estimating the commercial potential of its product candidates. A further list and description of these risks, uncertainties and other risks can be found in Galapagos' Securities and Exchange Commission ("SEC") filing and reports, including Galapagos' most recent Form 20-F and subsequent filings with the SEC. Given these uncertainties, you are advised not to place any undue reliance on such forward-looking statements.

Except for filgotinib's approval for the treatment of RA by the European Commission and Japanese Ministry of Health, Labour and Welfare, our drug candidates are investigational; their efficacy and safety have not been fully evaluated by any regulatory authority and they are not yet approved for any use outside of clinical trials.

All statements herein speak only as of the release date of this document. Galapagos expressly disclaims any obligation to update any statement in this document to reflect any change in future development with respect thereto, any future results, or any change in events, conditions and/or circumstances, on which any statement is based, unless specifically required by law or regulation.



Ready for an exciting future

Value creation through science

Build out European commercial footprint



Inflammation franchise

1st marketed product & maturing pipeline

- Jyseleca
- Toledo
- Other mechanisms

Inflammation franchise

Asset	Target	Preclinical	Phase 1	Phase 2	Phase 3	Approval
Filgotinib	JAK1	CD Ph3 ongoin	g, submitted UC	in EU, approved	I for RA in El	J & Japan
`3970	SIK2/3	Toledo, PoCs in	5 indications			
`3667	TYK2	Ph1b Pso				
`555	JAK1	Ph1b OA				
`4399	SIK3	Toledo				
`3121	Undisclosed					
'4876	SIK2/3	Toledo				
Other	>10 novel targets					



1st marketed product

- GLPG launching commercially in RA in Europe
- Potential expansion to UC & CD



New agreement with Gilead for Jyseleca in EU



- Full European rights
- Transition YE '21



- Europe P&L share till YE '21
- From '24: royalty 8-15% to GILD
- No EU milestones
- GILD to pay €160M

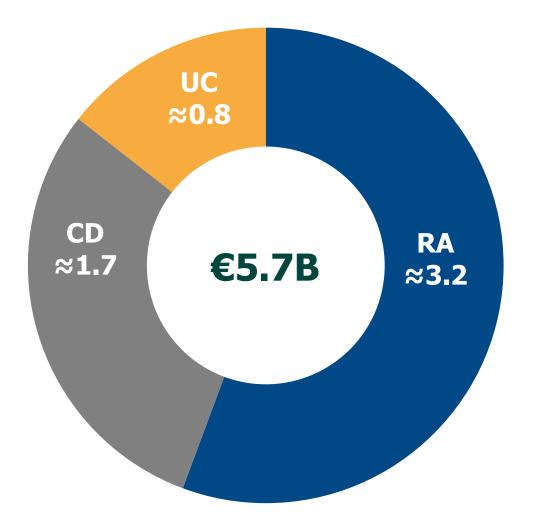


- GILD retains ex-Europe
- Milestones & 20-30% royalties outside Europe

Broader R&D collaboration unchanged



EU5 inflammation market today*



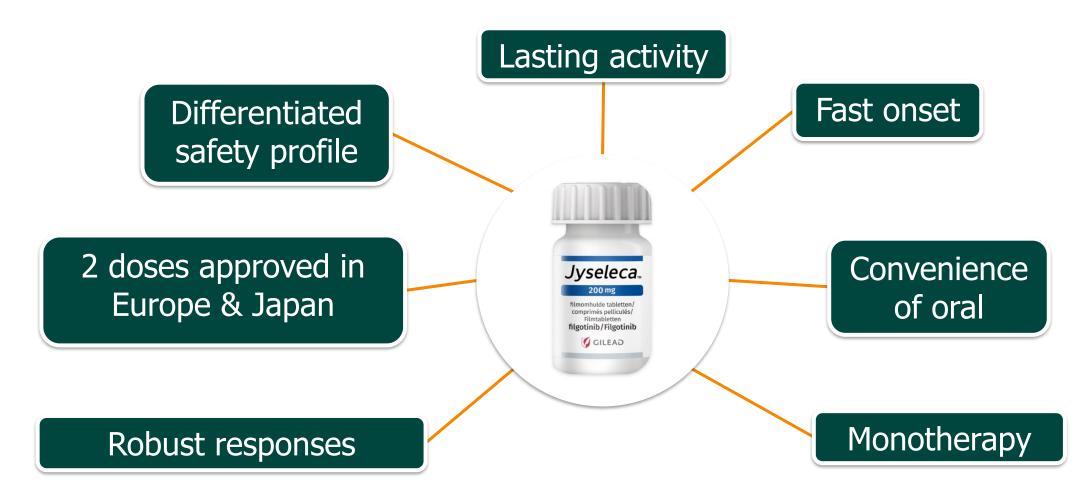
Ambition: ≈€0.5B peak sales

8-12% market share for **Jyseleca**

RA: rheumatoid arthritis; CD: Crohn's disease; UC: ulcerative colitis Source: IQVIA Analytic Link (MAT to Q2 2020) - est value by disease at ex mfr list prices. All biologics and tsDMARDs.

^{*} EU5 inflammation market accounts for approximately 68% of total EU market

Jyseleca in RA



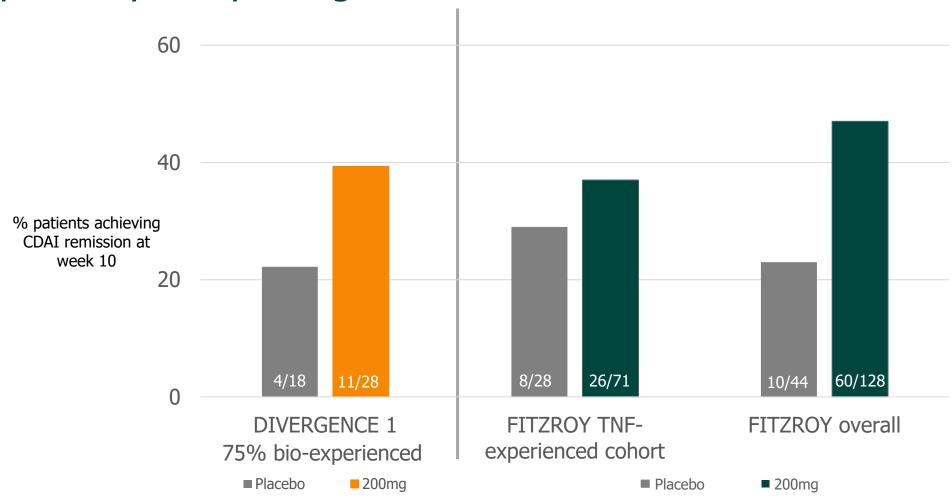
Filgotinib is approved for RA in the EU and Japan and not approved for use in any other indication nor any other region.

See the European Summary of Product Characteristics (SmPC) for Jyseleca, which includes contraindications and special warnings and precautions, available at www.ema.europa.eu.



DIVERGENCE 1

Exploratory study of filgotinib in small bowel CD



Notes: data on file, CDAI remission = CDAI <150, recruitment for the DIVERGENCE 1 study was stopped early.



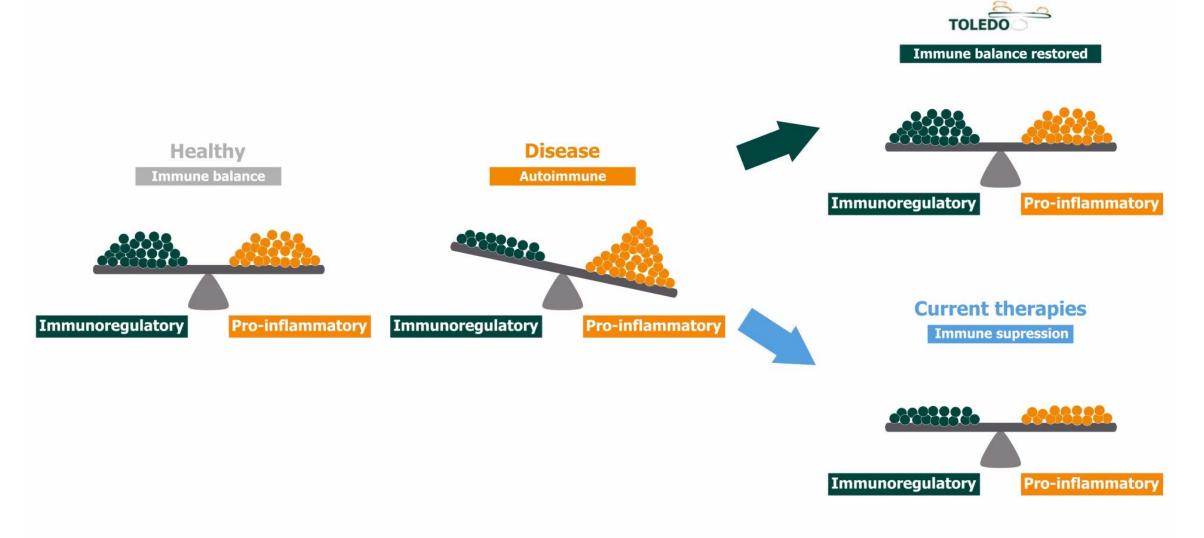


Potential next generation therapies in inflammation

- Novel, SIK target
- Dual action on inflammation
- Preclinical models show strong activity
- '3970 in multiple PoC studies



Restoring the immune balance





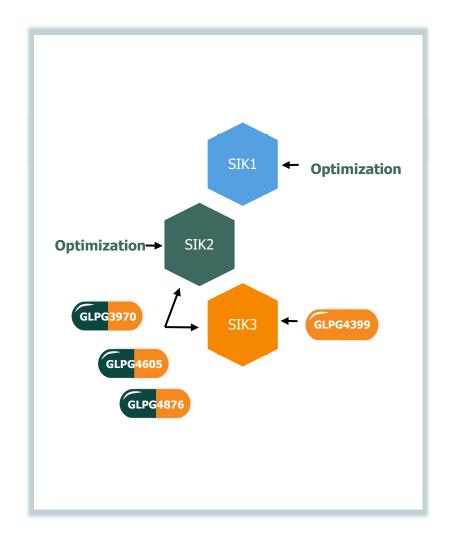
Multiple selectivity profiles

10 chemical series investigated

Multiple selectivity profiles

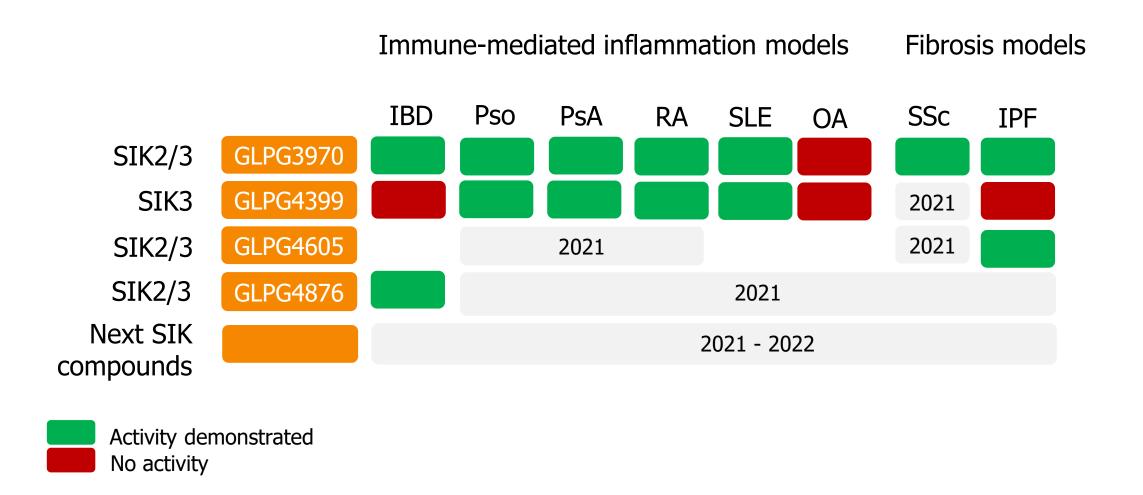
4 patents filed, exemplifying

≈ **1,000** compounds





Promising and broad in vivo activity

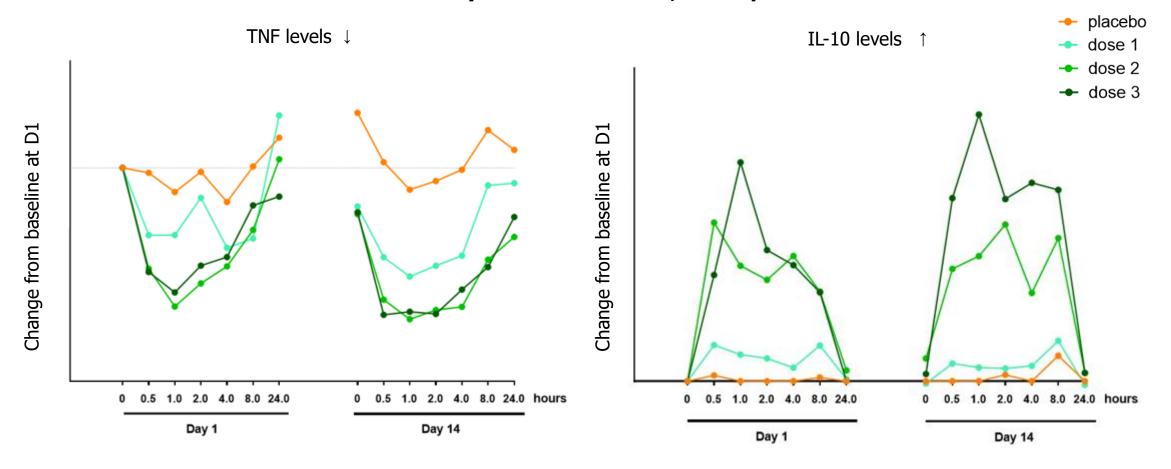




Dual activity confirmed ex vivo



Ex vivo analysis in whole blood, mean per treatment





Parallel Proof of Concept studies



Disease area

Psoriasis

Ulcerative colitis

Rheumatoid arthritis

Systemic lupus erythematosus

Primary Sjögren's syndrome

Cohort 6 weeks

PoC 6 weeks

PoC FoC

CALOSOMA
SEA TURTLE
LADYBUG
TAPINOMA
GLIDER

5 PoCs to investigate mode of action Toplines as of mid 2021*

^{*} Timelines subject to delays due to global COVID-19 pandemic



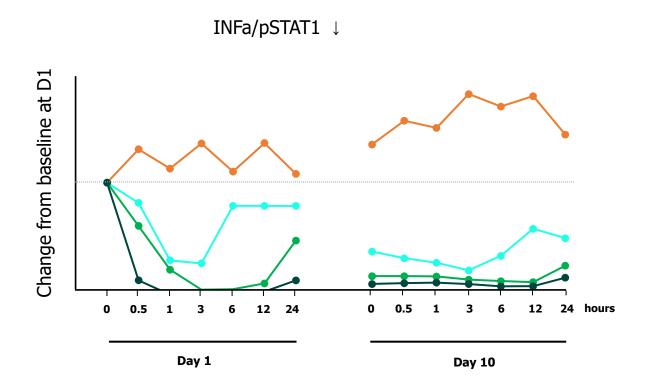
>> '3667 adds TYK2 to our portfolio

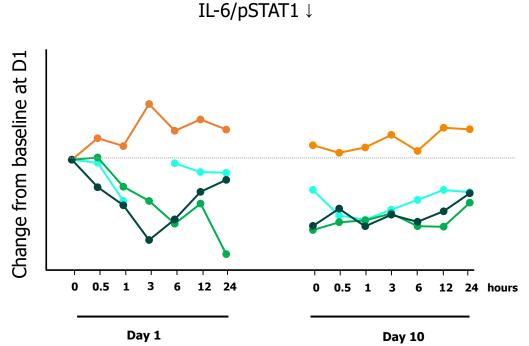
- Reversible kinase domain inhibitor
- PK profile favorable for once daily dosing
- Good PD activity in Ph1
- First indications: PsA & others



Strong ex vivo PD activity in Ph1







Aim to start DRF studies in 2021

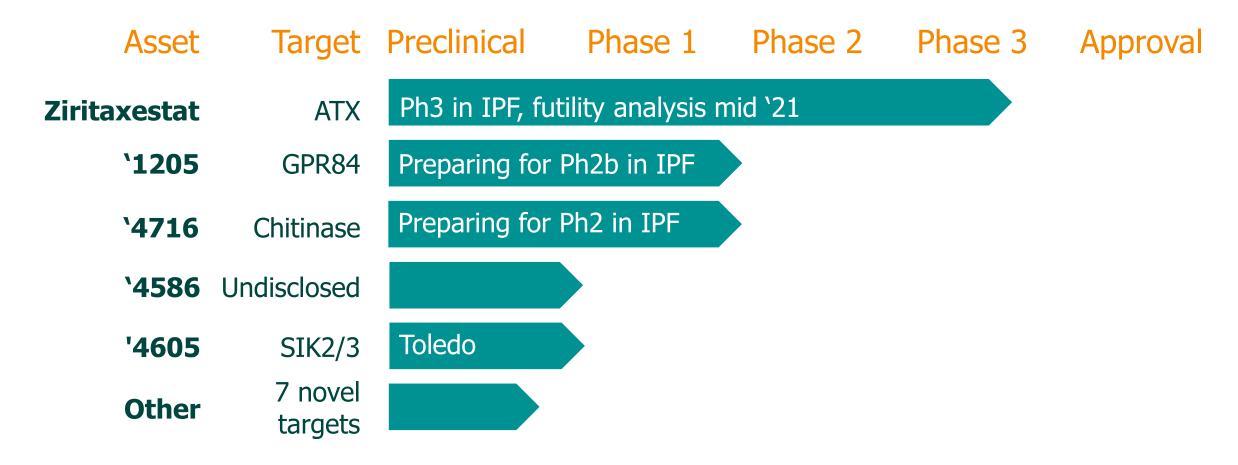
Fibrosis franchise

Aiming for leadership in this underserved space

- Broad approach to pipeline in fibrosis
- Ziritaxestat Ph3 in IPF
- 1205



>>> Fibrosis franchise





Casting a wide net in IPF

Aim to cover wide spectrum of fibrosis biology

Epithelium injury

Immune response: macrophages

1205

`4716

2 Toledo molecules

Fibroblast activation

Ziritaxestat

`4586

2 GLPG targets

Extracellular matrix accumulation

GLPG target

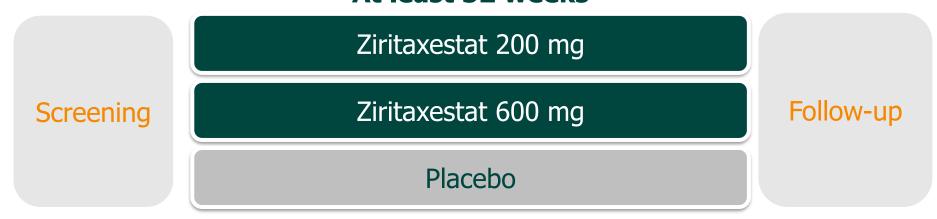
Ryvu program



Phase 3 ISABELA 1&2



At least 52 weeks



- 1,500 IPF patients total in 2 identical Phase 3 studies
- Patients remain on standard of care
- Global program
- Primary endpoint: FVC decline at 52 weeks
- Secondary: hospitalizations, mortality, quality of life, safety/tolerability

>1,300 patients recruited to date



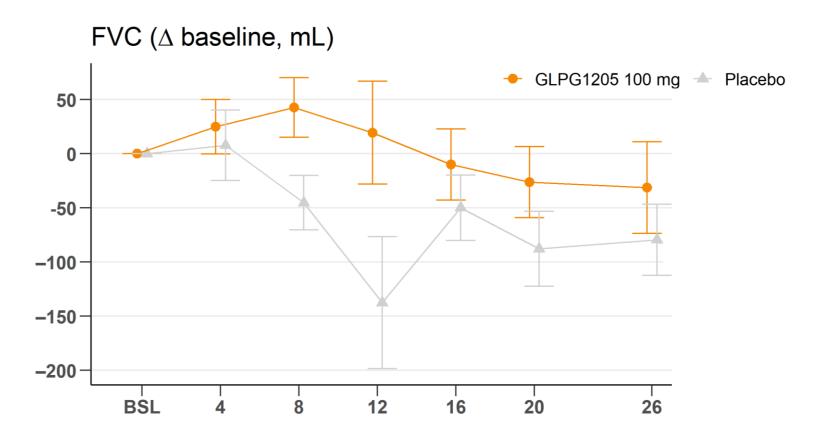
Futility analysis H1 '21

- Likelihood of being superior to placebo on primary endpoint
- 30% of patients at week 52, 70% of overall data
- Continue if 1 dose passes



> PINTA Ph2 with '1205 in IPF

- FVC effect consistent across strata
- Ph2b dose range finder to start in '21



Strong R&D engine

Science for growth

- Target discovery engine
- Large pipeline of early-stage assets



Deep R&D pipeline

- Novel targets
- Chemistry reinforced by biology
- Smart path to early clinical data

3
preclinical candidate programs

11 clinical stage programs

27
validated targets

13 programs in LO

>25 patient trials with 9 molecules in 10 indications expected in 2021

Capital for growth

Solid financials

- Gilead R&D collaboration
- Balance sheet for R&D investment



Gilead-Galapagos R&D collaboration

10 years, independence anchored





Access to compounds, assays, libraries, technical capabilities & expertise

Gilead option opportunity after Ph2b

\$3.95B upfront plus opt-in fees & milestones

\$1.5B equity investment¹, 25.5% share

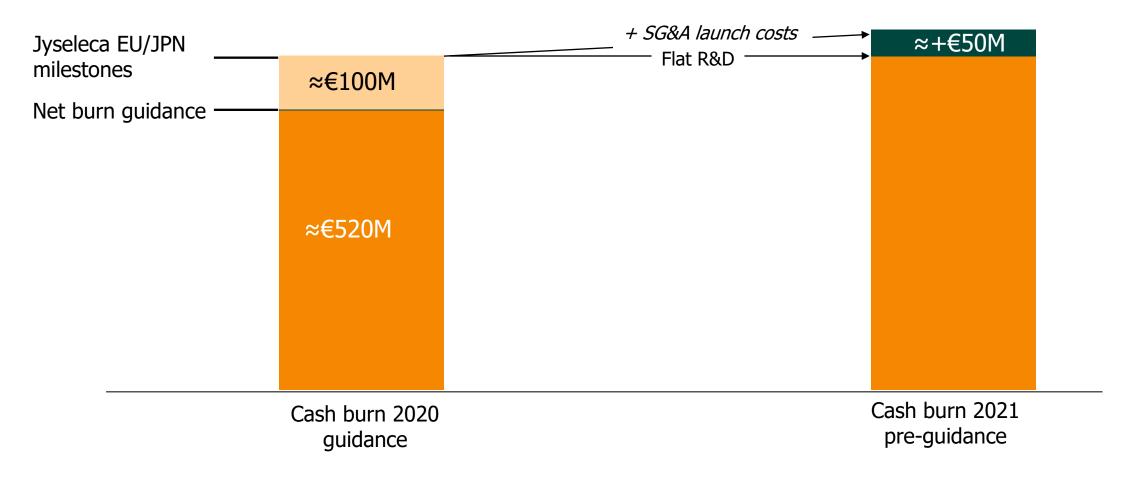
20+% royalties US/RoW, Galapagos full European rights

¹ Includes \$1.1B equity investment at deal closing plus exercise of Initial Warrant A



2021 cash burn increase ≈€50M

Due to the Jyseleca launch



Jyseleca in Europe

A profitable business case

	ESTIMATES
Peak sales (RA, UC, CD – 2 nd half of 2020's)	€500M
Contribution margin at peak (incl COGS, royalties, commercial expenses)	50%
Full commercial structure in place	2022
Break-even product contribution	2024
Patent exclusivity	2035



Filgotinib

Filing UC Japan

Outcome MANTA/RA-y

CHMP opinion UC EU

Approval decision UC EU

DIVERSITY recruited CD

Other programs

ISABELA futility IPF ziritaxestat

Readout Toledo POCs Pso/RA/UC

Readout '3667 (TYK2) Ph1b Pso

Readout '555 (JAK1) Ph1b OA

28 patient trials with 9 compounds in 10 indications expected in 2021





Filgotinib expected newsflow '21

H1 H2

MANTA/RA-y W26 outcome

UC submission Japan

CHMP opinion UC

Commercial transition to EU

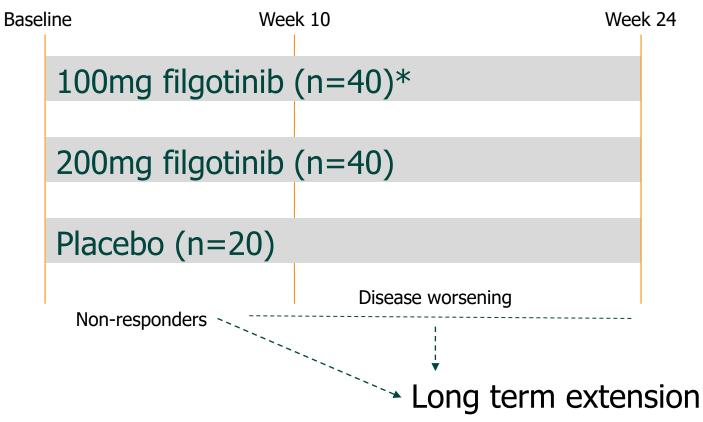
DIVERSITY recruited CD

UC approval decision EC

European commercial transition complete



DIVERGENCE 1 in small bowel CD



Small bowel CD (SBCD) is defined as disease located anywhere in the duodenum, jejunum or ileum Non-responder: Subject who never achieves $a \ge 70$ point CDAI reduction from baseline or CDAI < 150 at any point up to and including week 10 Disease worsening: $A \ge 100$ point increase in CDAI score from the Week 10 value and CDAI score ≥ 220 points at 2 consecutive visits *Recruitment for DIVERGENCE 1 was stopped prior to achievement of these targeted patient numbers

Sh

Our approach to innovation

- Novel targets
- Chemistry reinforced by biology
- Smart path to early clinical data







Target discovery approach

Using core GLPG technology --->

High throughput screening platform

To identify novel targets

