1H 2022 results webcast

Aug 5, 2022

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Pioneering for patients

Disclaimer

This presentation contains "forward-looking statements." When used in this presentation, the words "anticipate," "believe," "could," "expect," "will," "intend," "plan," "potential," "seek," "may," "estimate," "on track," "forward," "guidance," "goal," "next," "aim," "further," "should," "continue," "stand to," "encouraging," "ongoing," "outlook," and similar expressions are intended to identify forward-looking statements. These statements include, but are not limited to, statements regarding: the rate and timing of our cash burn, the progress of our refocused R&D plan and clinical development activities, our expectations as to our novel target engine and differentiated pipeline, our expectations regarding the amount and timing of future milestones, opt-in and/or royalty payments, our continued execution of our savings program, our global R&D collaboration with Gilead (including our arrangement for the commercialization and development of filgotinib), the acquisitions of CellPoint and AboundBio, including statements regarding anticipated benefits of the acquisitions and the integration of CellPoint and AboundBio into our portfolio and strategic plans, our R&D plans and strategy, including progress on our fibrosis portfolio, oral therapeutics and SIK platform, and potential changes in such plans and strategy, our commercialization efforts for filgotinib and any future approved products, our expectations as to commercial sales, market size, and market share for Jyseleca, our expectations regarding patent exclusivity for Jyseleca, our plans to build out our commercial structure for sales of Jyseleca in Europe, guidance from management regarding our financial results (including guidance regarding the expected operational use of cash during financial year 2022), expectations regarding our ability to identify, execute and complete business development opportunities, the expected timing of our ongoing and planned preclinical studies and clinical trials (i) with filgotinib in RA, UC and CD, (ii) with GLPG0555 in OA, (iii) with GLPG3121 in IBD, (iv) with GLPG3667 in psoriasis and dermatomyositis, (v) with GLPG4399 in inflammation, (vi) with GLPG4716 in IPF, (vii) with GLPG4586 and GLPG4605 in fibrosis, (viii) with GLPG2737 in ADPKD, interactions with regulatory authorities, the EMA's planned safety review of JAK inhibitors used to treat certain inflammatory disorders, including filgotinib, initiated at the request of the European Commission (EC) under Article 20 of Regulation No 726/2004, (ix) with CD19 CAR-T in 2 phase 1/2a studies in rrNHL and rrCLL, and (x) with the next-generation CAR-Ts and bispecific antibodies, including recruitment for trials and topline results for trials and studies in CAR-T, the timing or likelihood of additional regulatory authorities' approval of marketing authorization for filgotinib, including for additional indications, and the timing or likelihood of pricing and reimbursement interactions for filgotinib, and our strategy, business plans and focus.

Any forward-looking statements in this presentation are based on management's current expectations and beliefs, and are not guarantees of future performance. They are subject to a number of risks, uncertainties and other factors that may cause our actual results, financial condition and liquidity, performance or achievements, or industry results, to differ materially from any historic or future results, financial condition and liquidity, performance or achievements expressed or implied by such forward-looking statements, including, without limitation: the risk that one or more assumptions, beliefs or expectations underlying management's guidance regarding our 2022 revenues, operating expenses, and financial results may be incorrect (including one or more of our assumptions underlying our expense expectations may not be realized), the inherent risks and uncertainties associated with competitive developments, clinical trial and product development activities and regulatory approval requirements (including the risk that data from our ongoing and planned clinical research programs in RA, relapsed/refractory Non-Hodgkin's-Lymphoma, Chronic Lymphocytic Leukemia, CD, UC, IPF, OA, other inflammatory indications and kidney disease or any other indication or disease, may not support registration or further development of our product candidates due to safety or efficacy concerns or other reasons), risks related to the acquisitions of CellPoint and AboundBio, including the risk that we may not achieve the anticipated benefits of the acquisitions, the inherent risks and uncertainties associated with target discovery and validation and drug discovery and development activities, risks related to our reliance on collaborations with third parties (including, but not limited to, our collaboration partner Gilead), the risks related to the implementation of the transition of the European commercialization responsibility of filgotinib from Gilead to us, the risk that the transition will not be completed on the currently contemplated timeline or at all, including the transfer of the supply chain, and the risk that the transition will not have the currently expected results for our business and results of operations, estimating the commercial potential of filgotinib or any other product candidates and our expectations regarding the costs and revenues associated with the transfer of European commercialization rights to filgotinib may be incorrect, the risk that Galapagos will not be able to continue to execute on its currently contemplated business plan and/or will revise its business plan, including the risk that our plans with respect to CAR-T may not be achieved on the currently anticipated timeline or at all, the risks that our projections and expectations regarding the revenues and costs with the commercialization right may be inaccurate, the risk that we will be unable to successfully achieve the anticipated benefits from our leadership transition, the risk that we will encounter challenges retaining or attracting talent, risks related to continued regulatory review of filgotinib following approval by relevant regulatory authorities and the EMA's planned safety review of JAK inhibitors used to treat certain inflammatory disorders, including the risk that the EMA and/or other regulatory authorities determine that additional non-clinical or clinical studies are required with respect to filgotinib, the risk that the EMA may require that the marketing authorization for filgotinib in the EU be amended, the risk that the EMA may impose JAK class-based warnings, and the risk that the EMA's planned safety review may negatively impact acceptance of filgotinib by patients, the medical community, and healthcare payors, the risk that regulatory authorities may require additional post-approval trials of filgotinib or any other product candidates that are approved in the future, risks related to potential disruptions in our operations due to the conflict between Russia and Ukraine, and the risks and uncertainties relating to the impact of the COVID-19 pandemic. For a discussion of these and other risks and uncertainties and other important factors, any of which could cause our actual results, financial condition and liquidity, performance, or achievements to differ from those contained in the forward-looking statements, see the section entitled "Risk Factors" in our most recent Annual Report on Form 20-F filed with the U.S. Securities and Exchange Commission (SEC), as supplemented and/or modified by any other filings and reports that we have made or will make with the SEC in the future.

All information in this presentation is as of the date of the presentation, and we undertake no duty to update this information unless specifically required by law or regulation.

Except for filgotinib's approval as Jyseleca® for the treatment of RA and UC by the European Commission, Great Britain's Medicines and Healthcare Products Regulatory Agency, and the 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.

Under no circumstances may any copy of this presentation, if obtained, by retained, copied or transmitted.

Agenda

H1 highlights

Paul Stoffels
CEO

Operational & financial update

Bart Filius
President & COO

Q&A

All

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H1 in review

Q1	Q2	
Jyseleca GB & JP approval in UC	Paul Stoffels starts as CEO on April 1	Jyseleca reimbursement 15 countries RA 6 countries UC
EU PRAC review all JAKi started	Acquisition CellPoint and AboundBio	Discontinuation 4 early-stage programs

- Inflammation
- Oncology
- Corporate development

Strategic review and capital allocation prioritization ongoing

GB: Great Britain, JP: Japan, UC: Ulcerative Colitis, RA: Rheumatoid Arthritis, PRAC: Pharmacovigilance Risk Assessment Committee

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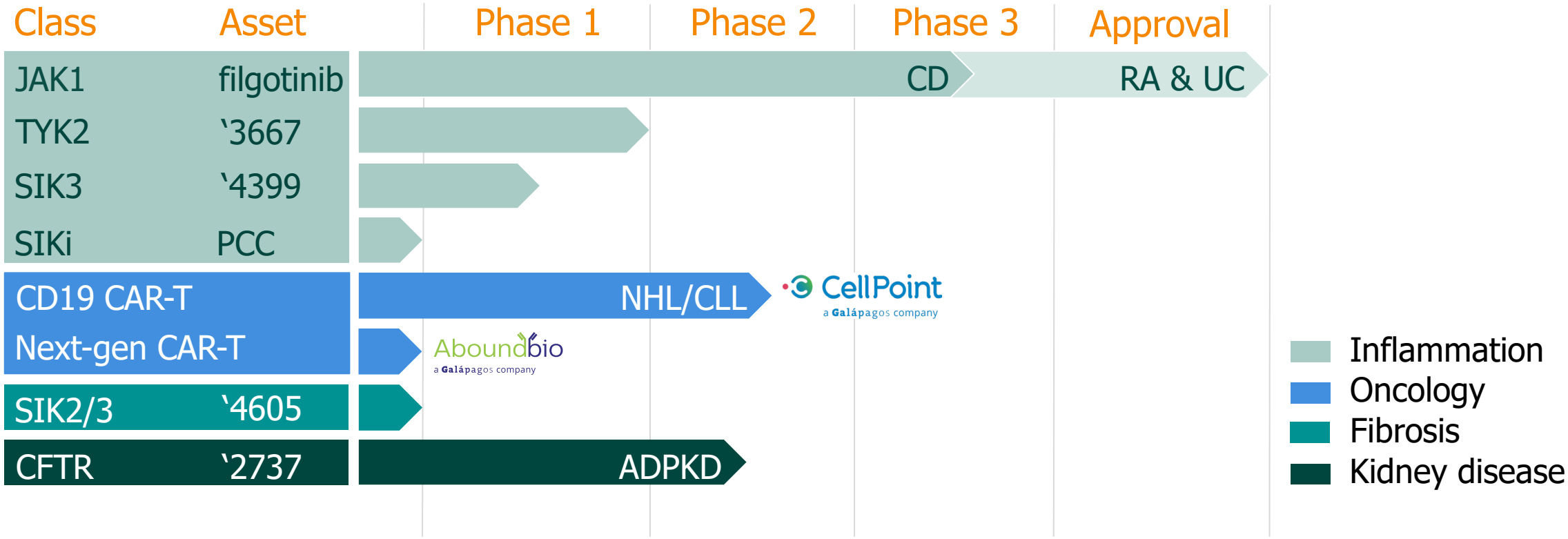
Portfolio



Redirecting resources – discontinuation ‘555, ‘3121, ‘4716, ‘4586

Note: filgotinib is approved for RA and UC in EU, Great Britain and Japan

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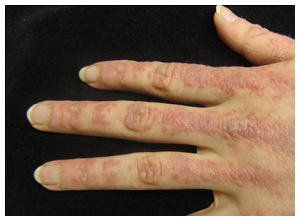
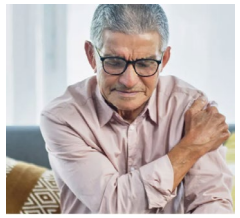
‘3667 Phase 2 in dermatomyositis

- Demonstrated clinical activity in Pso Phase 1b; generally well-tolerated
- Chronic autoimmune disease of skin and muscle
- Estimated incidence of 2-10 cases per 100,000
- Key drivers type I/III IFNs and IL-23 pathways



Gottron's papules

Heliotrope rash



Muscle weakness

Aim to start Phase 2 before YE22

Source: Evaluate Pharma epidemiology data, www.myositis.org

Acquisition CellPoint & AboundBio

Exciting opportunity to diversify portfolio & develop life-changing therapies

CellPoint
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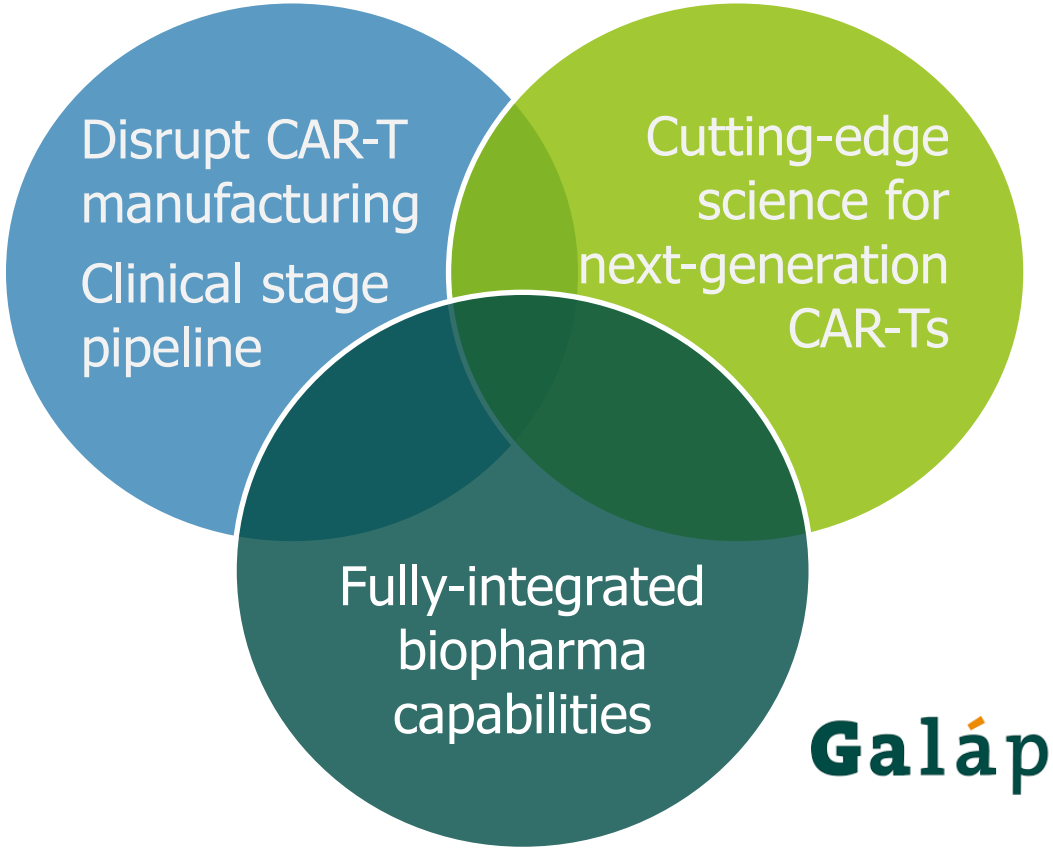

Aboundbio
a Galápagos company

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Aim to bring 3 CAR-Ts to clinic in 3 years

Unmet need in heme CAR-T remains high

Access

- Manufacturing constraints and logistics → people wait, limited access
- Centralized production → valuable time lost, high drop-out rate & mortality

Durability

- High relapse rate
- Immunogenicity prevents redosing

Toxicity

- High occurence of toxicity leads to intensive care hospitalization

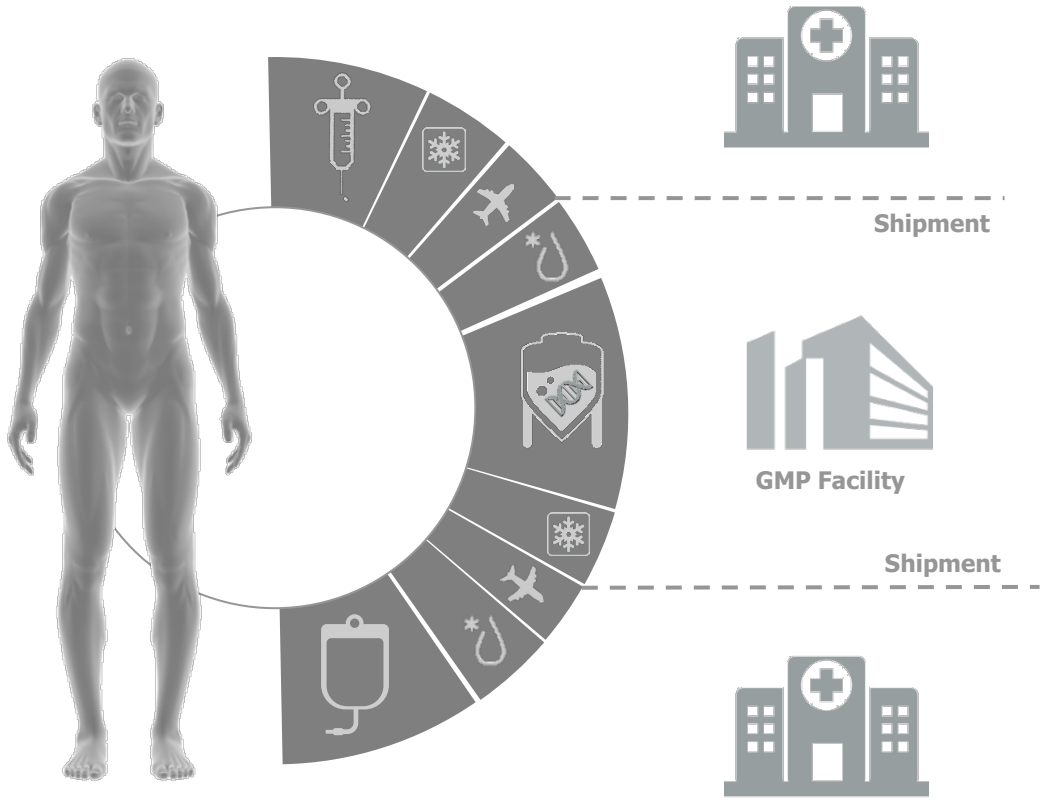
The opportunity for breakthrough improvement is now

CAR-T: Chimeric Antigen Receptor T-cell

Source: Clarivate™ Research, 2022

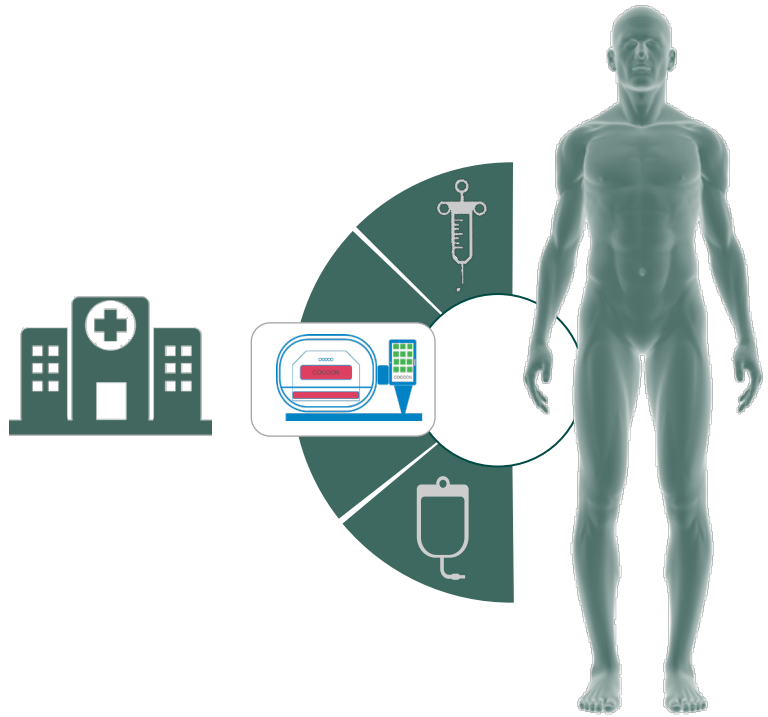
CellPoint

Developing cell therapy at point-of-care



CellPoint
a Galápagos company

Lonza



- automated
- rapid
- efficient
- scalable

Potential of 7-day vein-to-vein could offer shortest time-to-treatment

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Cocoon® most advanced point-of-care solution

- Full-service model in cooperation with Lonza
- Regulatory compliant (FDA DMF – CE Mark)
- Cocoon® device
  - highly automated
  - robust process control and manufacturing

Lonza

FDA DMF: FDA drug master file

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AboundBio

Towards next-generation CAR-Ts

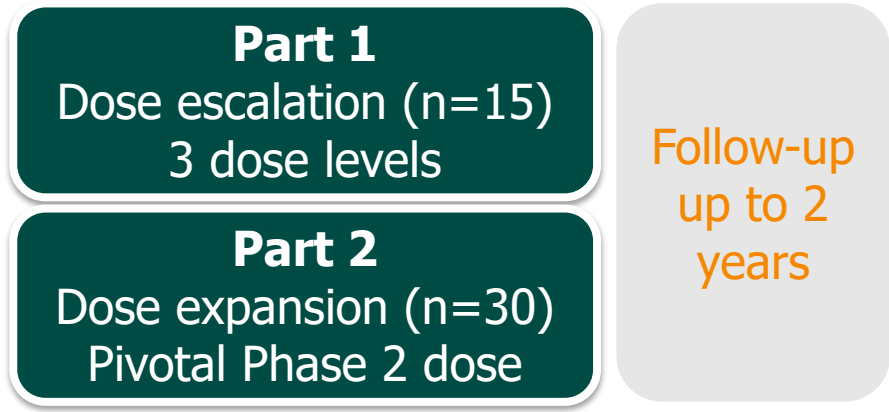
- Highly experienced research team
- Proven track-record; multiple industry partnerships
- Forefront of innovation
  - differentiated by fully human multi-specific and multi-functional CAR-Ts
  - novel modalities incl bispecific antibodies and antibody drug conjugates (ADCs)
  - potential to improve efficacy and prevent cancer relapse

Brings CAR-T antibody and oncology research capabilities in-house

Phase 1/2a with CD19 CAR-T in Cocoon

Two clinical trials: r/rCLL and r/rNHL patients

- Enrolling patients in NL, BE, ESP for Part 1 (n=5 in NHL; n=4 in CLL)
- Primary objectives
  - safety/tolerability (part 1) and efficacy (part 2)
  - establish recommended dose for pivotal study
- Low dose cohort completed for both trials



Topline of CLL and NHL studies 1H 2023

CLL: Chronic Lymphocytic Leukemia, NHL: Non-Hodgkin Lymphoma

Source: Ortiz-Maldonado et al, Front Oncol, 2022

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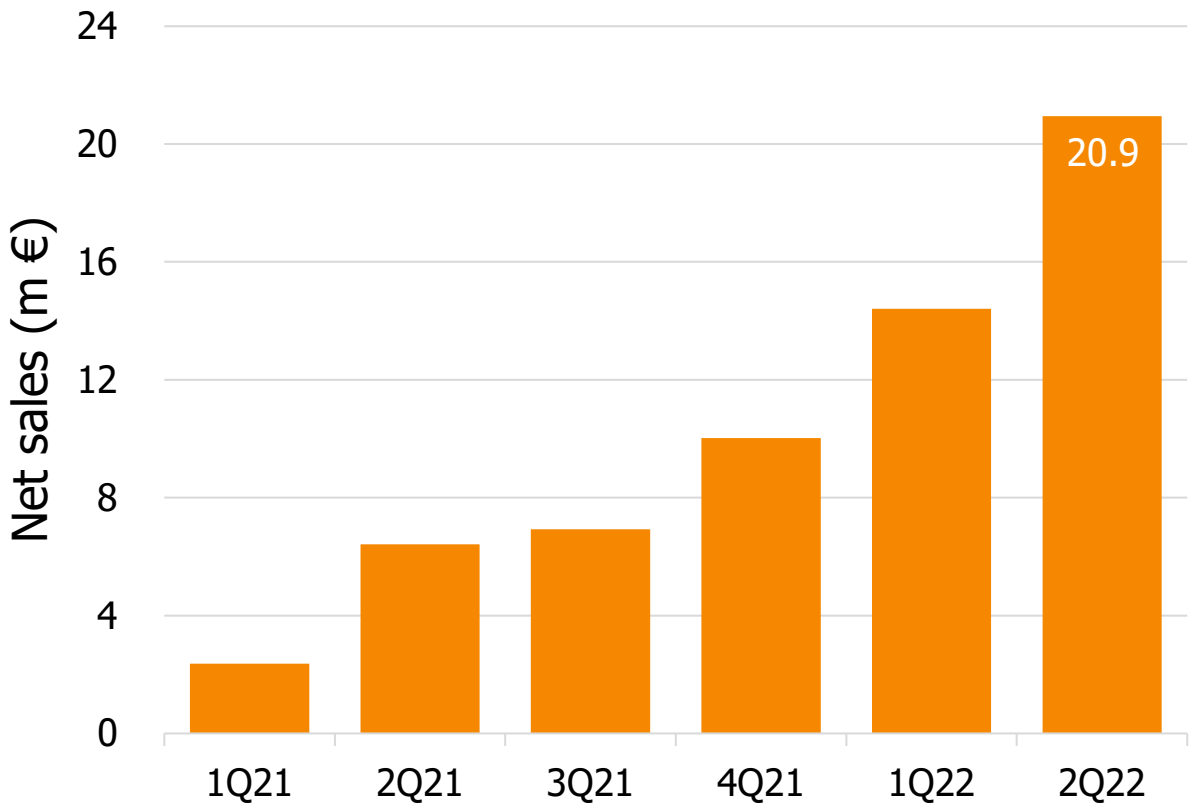
Jyseleca (filgotinib)

Preferential JAK1i

GLPG's 1st marketed product

- European marketing authorization holder
- Reimbursed in 15 countries in RA, 6 countries in UC, more in progress
- Crohn's Disease Phase 3 topline 1H 2023

Strong launch of Jyseleca in Europe



- YTD €35.4M
- 2Q22 €1M Sobi milestone

Jyseleca net sales guidance 2022 raised from €65-75M to €75-85M*

*Guidance on European net sales based on Galapagos management projections

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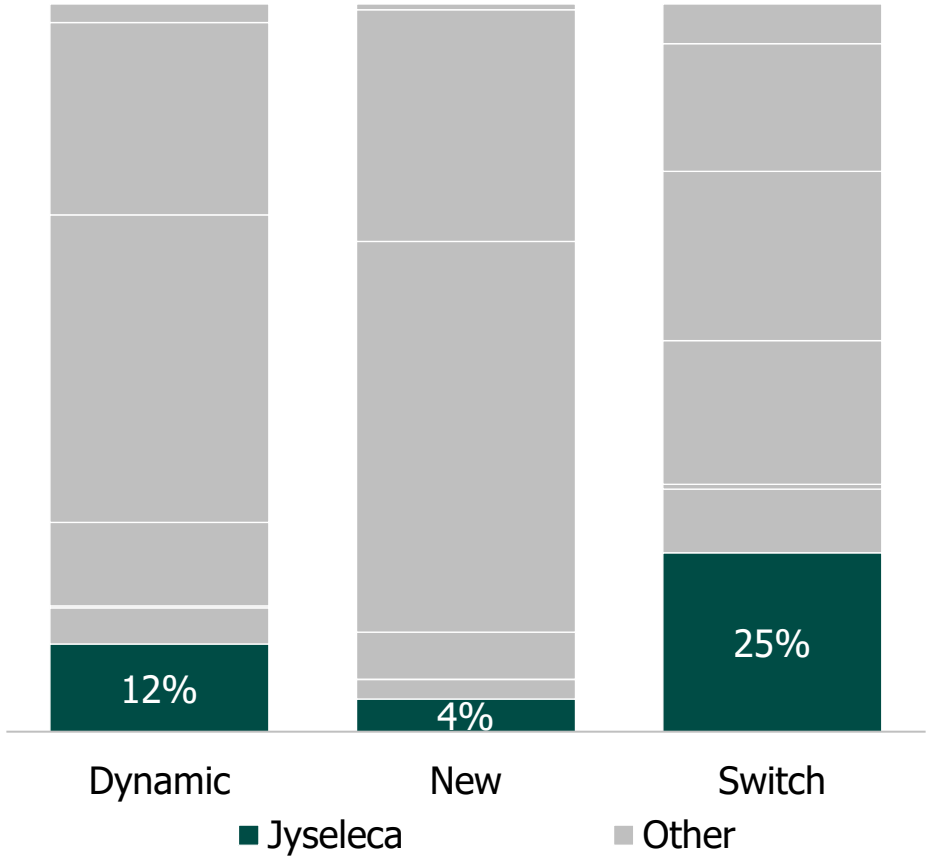
Strong UC launch driven by switch population

Jyseleca UC market share



High unmet need in UC

Sub-optimal remission	Corticosteroid dependence
Safety concerns	Complex treatment

Underpins need for novel treatment options

Source: UC IQVIA LRX (Q1 2022)

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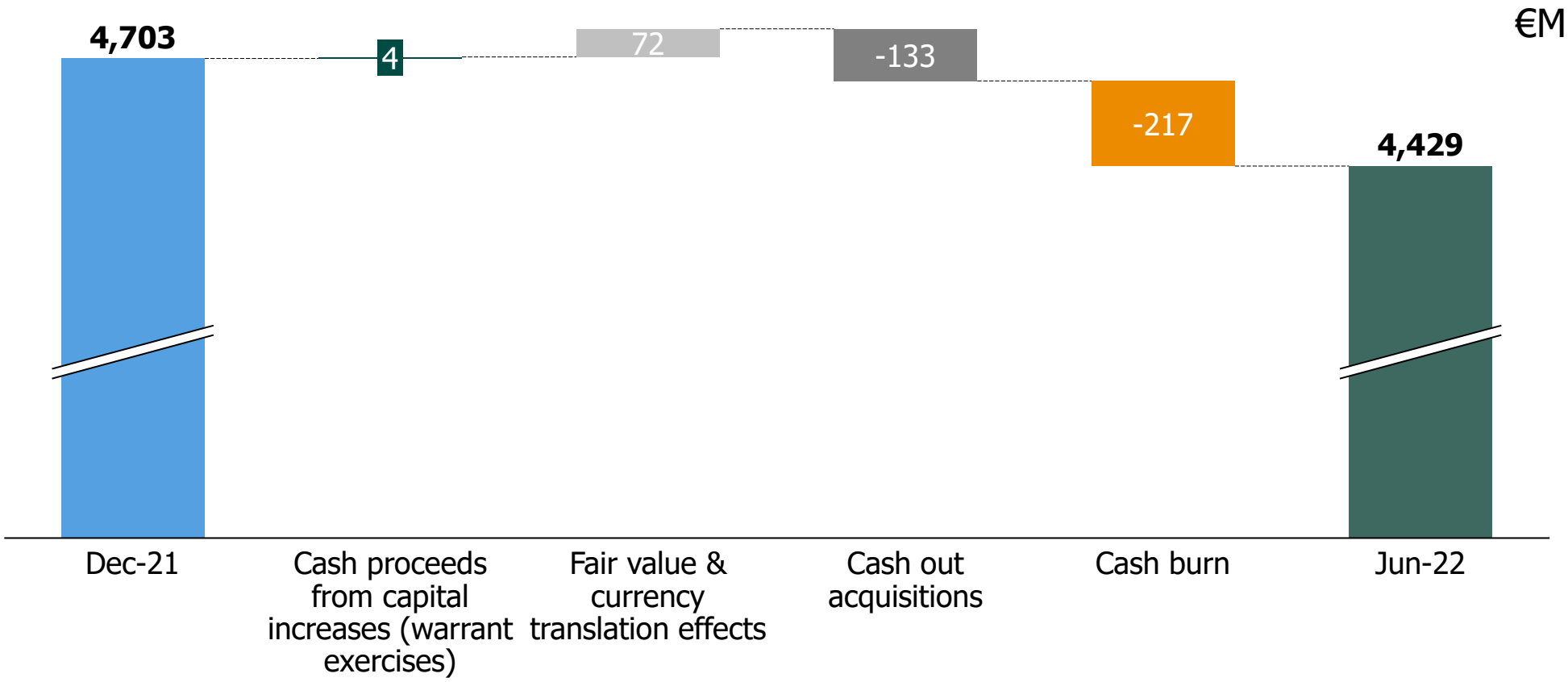
Cash & current financial investments



Cash burn of €217M; cash position ~€4.4B end of Q2 2022

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Key financials Q2 2022

Revenues & other income: €292M

- €115M revenue recognition for filgotinib development
- €115M revenue recognition for the platform
- €35M sales, €6M royalties & €2M sales milestones for Jyseleca

Operating costs: - €384M

- Increase in S&M costs partly offset by decrease in R&D and G&A

Net loss: - €32M

- €68M net other financial income

Strategic priorities

2022

- Scientific and strategic review
- Execute on additional BD
- Further roll-out Jyseleca EU

- 2022 guidance*
  - Jyseleca sales €75-85M
  - Cash burn €480-520M

2023-2026+

- Grow Jyseleca to EU peak sales of €500M
- Develop catalyst rich pipeline across TAs
- Build point-of-care cell therapy network with multiple differentiated CAR-Ts

R&D update on Oct 5, 2022

*Based on Galapagos management projections; excludes any impact from potential BD. Jyseleca guidance on European net sales

TA: therapeutic area

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We discover. We dare. We care.