

Galápagos

'634 and more



JP Morgan Healthcare Conference
January 2013





Disclaimer

This presentation has been prepared by Galapagos and is furnished to you by Galapagos solely for your information.

This presentation may contain forward-looking statements, including, without limitation, statements containing the words “believes”, “anticipates”, “expects”, “intends”, “plans”, “seeks”, “estimates”, “may”, “will” and “continues” as well as similar expressions. Such 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. Given these uncertainties, the audience is advised not to place any undue reliance on such forward-looking statements. These forward-looking statements speak only as at the date of this presentation. Galapagos expressly disclaims any obligation to update any such forward-looking statements in this presentation to reflect any change in its expectations with regard thereto or any change in events, conditions or circumstances on which any such statement is based, unless required by law or regulation.

Neither Galapagos nor any of its officers, employees, advisers, or agents makes any representation or warranty, express or implied, as to any matter or as to the truth, accuracy, or completeness of any statement made in this presentation, made in conjunction therewith or in any accompanying materials or made at any time, orally or otherwise, in connection with the matters referred to herein and all liability in respect of any such matter or statements is expressly excluded.

€1 = \$1.3



Galapagos: leading European biotech

- JAK1 license deal with AbbVie
- Major risk sharing alliances with pharma
- Leading fee-for-service provider with BioFocus & Argenta
- 830 staff, research sites in 5 countries, HQ in Belgium
- Large pipeline: 4 clinical, 3 PCC, 30 discovery programs
- Market cap ~ \$585 M, 30.2 M fully diluted shares, Euronext: GLPG

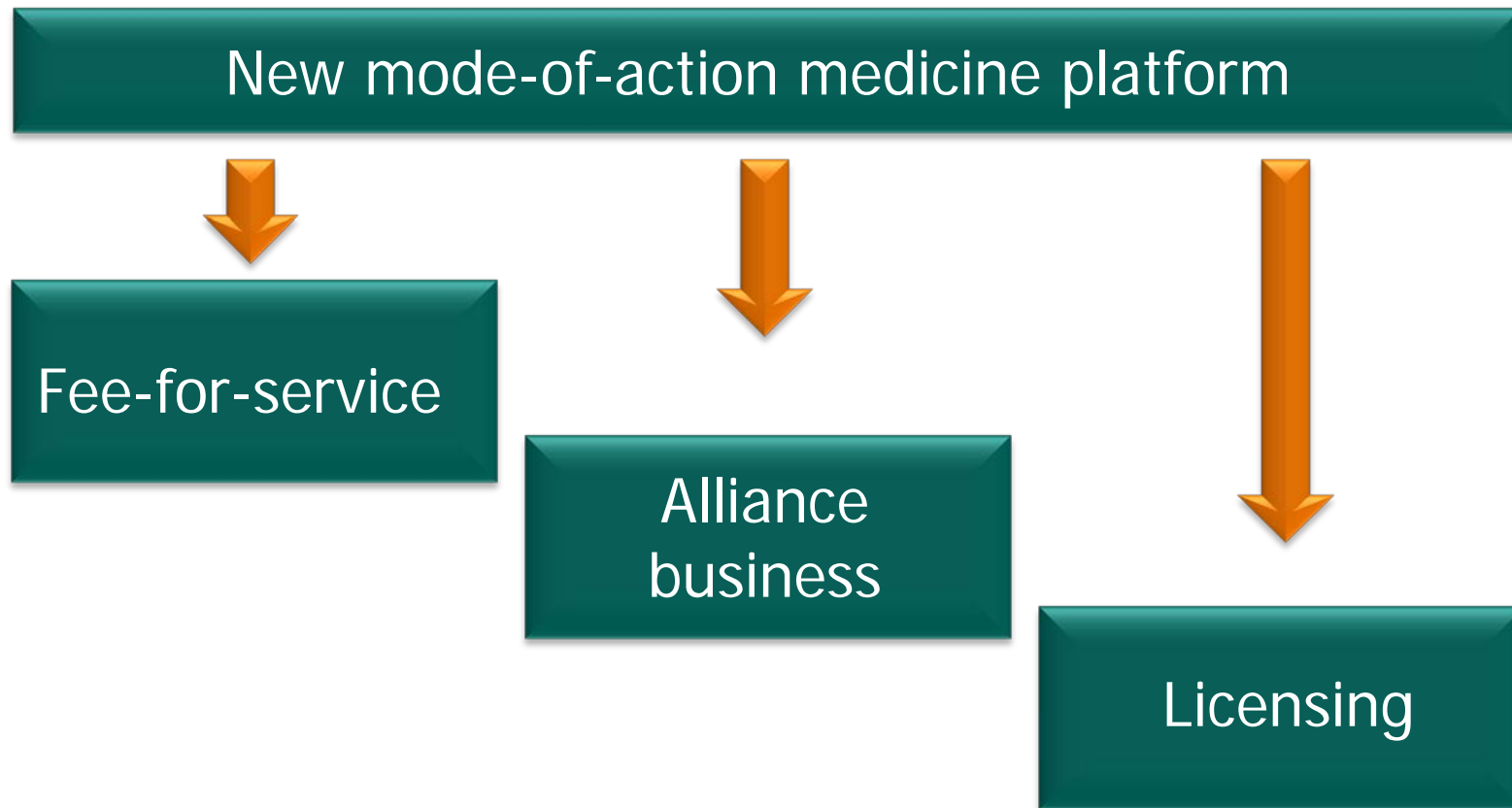




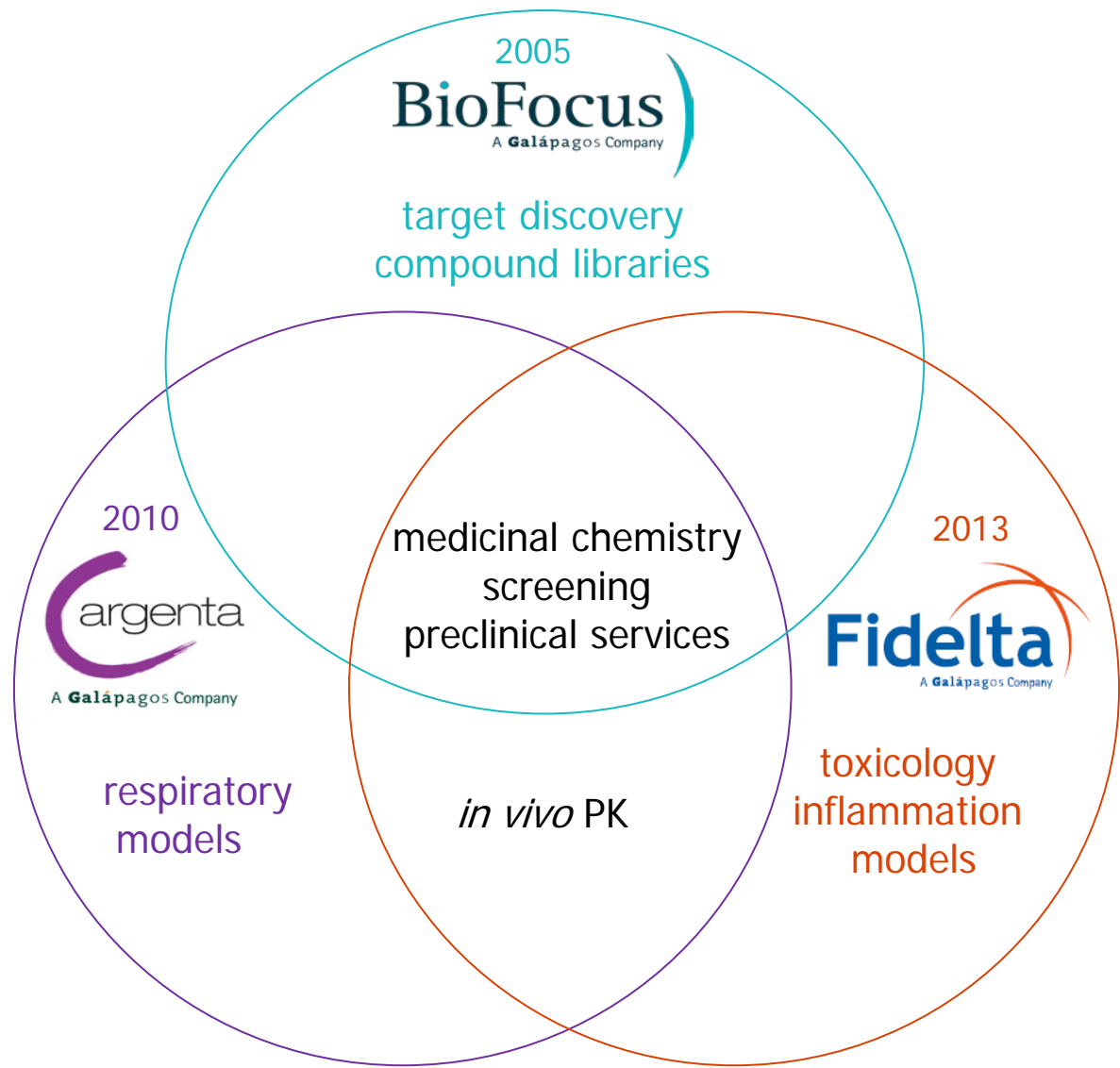
Growth strategy

- Execute development of JAK1 program to Phase 2b results late 2014
- Build mature clinical portfolio
 - move programs through to Proof of Concept in the clinic
 - retain certain geographical rights
- Partner with big pharma to leverage our innovation
- Grow Service division revenues by 10-15% per year

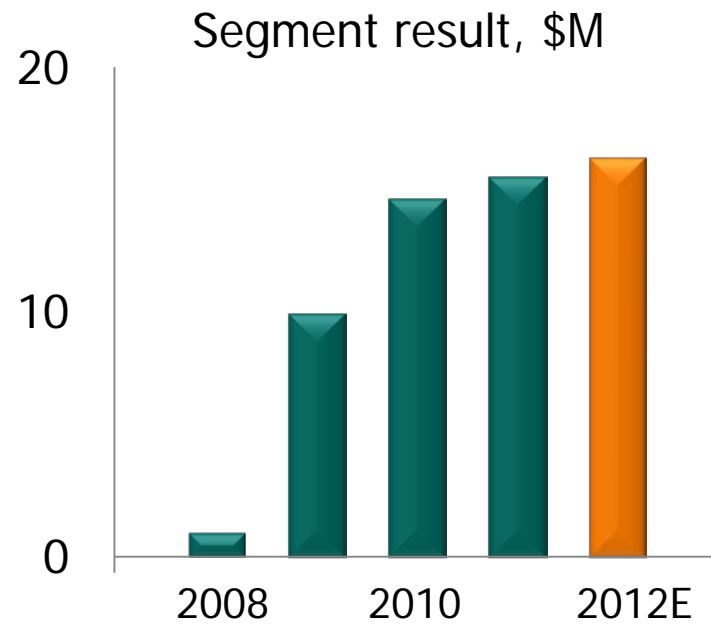
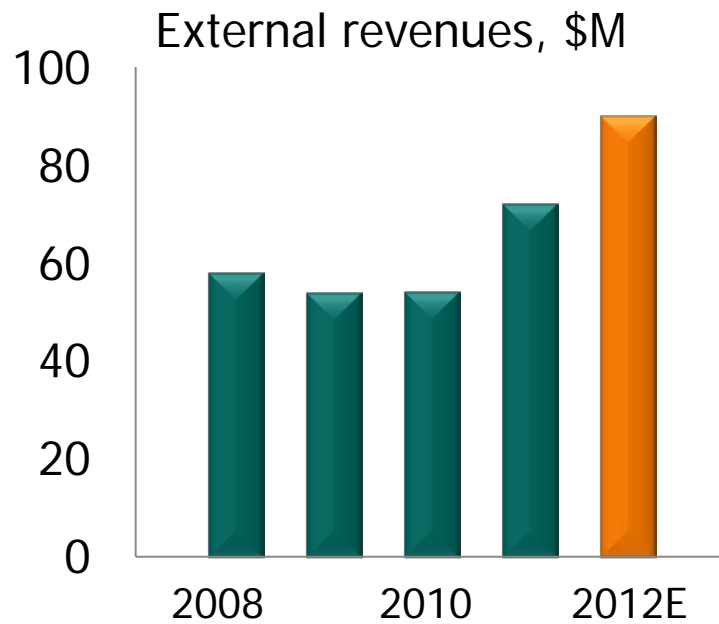
Revenue generating business model



Full range of drug discovery services



Service division growth story



Alliance business

- Based on novel drug targets, discovered by Galapagos
- Partner has option to license program
 - at PCC, Ph I or PoC
- Success-based milestones + royalties
- Source of promising molecules & targets coming back to GLPG
- Received ~\$275 M cash from alliances since 2006 start





Broad pipeline

Indication	Partner	Target	Stage lead program
RA	Abbott	JAK1	Phase II
Metastasis		IRA	Phase Ib patient study
Lupus	GSK	novel	Licensed - Phase I
IBD		GPR43	Phase I
MRSA		DNA pol IIIa	PCC
Inflammation	JnJ	novel	PCC
Osteoarthritis	Servier	novel	PCC
Oncology	Servier	novel	Lead optimization
Cystic Fibrosis		novel	Lead optimization

4 clinical programs, 3 PCC's
>30 discovery programs



Cystic fibrosis

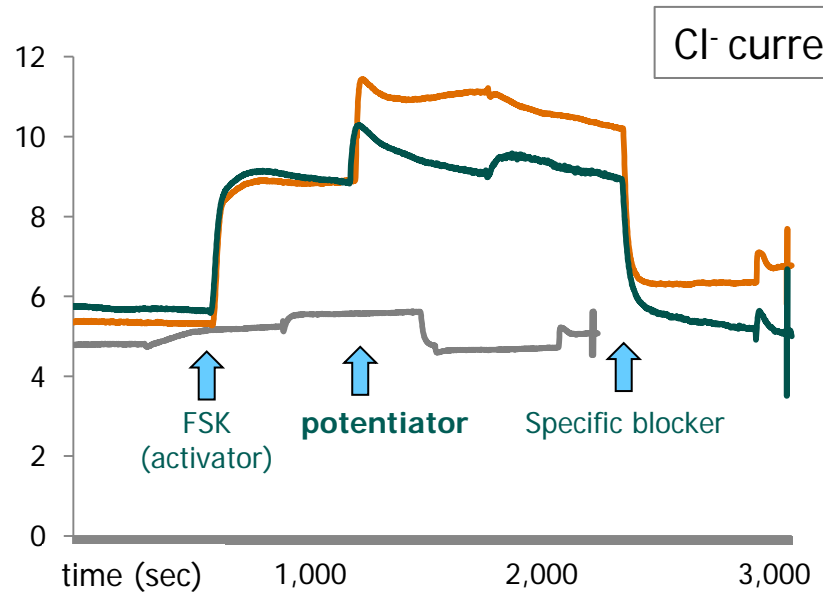
- Novel targets identified in lung cells from $\Delta F508$ patients
- Programs proprietary to GLPG
- Learning from Vertex: Ussing chamber predicts clinical outcome
- 3 programs in hit-to-lead, new potentiator in lead optimization

CF programs on track to deliver PCC in 2013

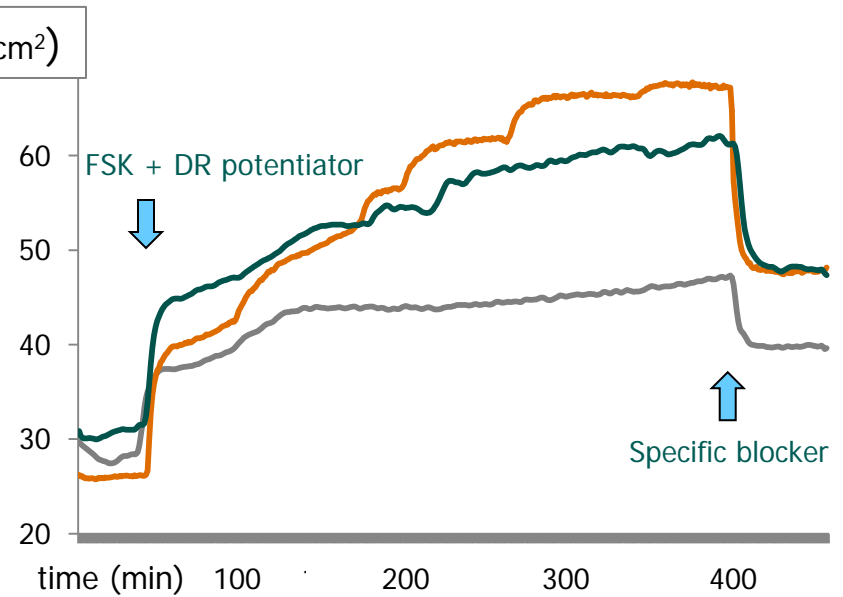


Galapagos CF potentiators

Ussing chamber: Cl⁻ flow in 2 types of CF patient lung cells

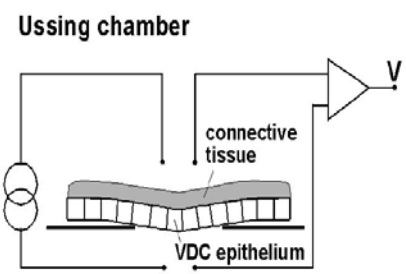


ΔF508 CF patient cells
(treated with 3 µM VX-809 corrector)



G551D CF patient cells
(with increasing dosage of potentiator)

- GLPG
- Kalydeco™
- DMSO control



GLPG potentiators open CFTR channels in patient cells



Novel class of antibiotics

- DNA PolIIIa based antibacterial approach
 - no cross resistance with existing antibiotics
 - bactericidal activity
- Advanced *S.aureus* compounds
 - active against all *S.aureus* including MRSA & multiresistant strains
 - excellent *in vivo* activity
 - active as oral & IV
- Early compounds against:
 - *Staph, Strep, E.coli, H.influenzae*

Lead program entered pre-clinical development in Nov 2012



Strong activity vs MRSA

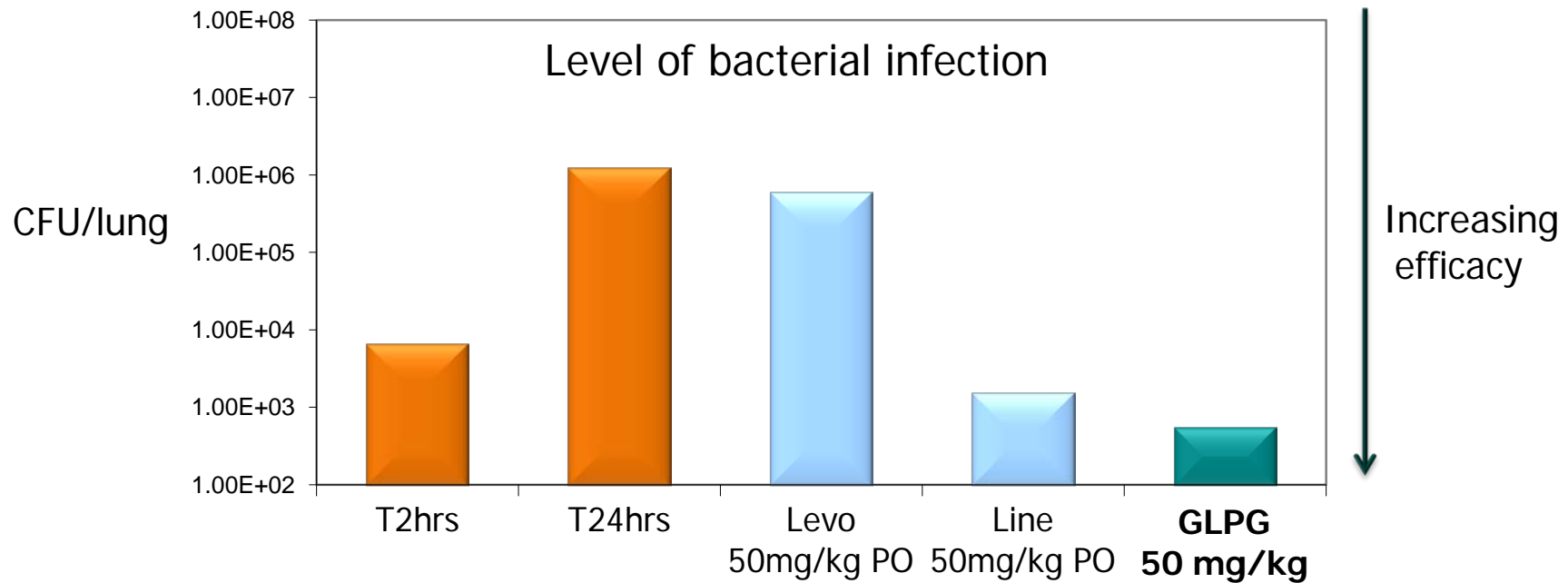
Inhibits 100/100 MRSA strains tested

Phenotype	Amoxicillin	Ciprofloxacin	Linezolid	GLPG
MRSA FQ-R Line-R	Not active	Not active	Not active	Active
MRSA, FQ-R Line-R	Not active	Not active	Not active	Active
FQR + MRSA	Not active	Not active	Active	Active
FQR + MRSA	Not active	Not active	Active	Active
FQR + MRSA	Intermediate	Not active	Active	Active
FQR + MRSA	Not active	Not active	Active	Active
FQR + MRSA	Not active	Not active	Active	Active
FQR + MRSA	Not active	Not active	Active	Active
FQR + MRSA	Not active	Not active	Active	Active
FQR + MRSA	Not active	Not active	Active	Active
USA400 community MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Intermediate	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MRSA	Not active	Active	Active	Active
MSSA	Active	Active	Active	Active
MSSA, ATCC13709	Active	Active	Active	Active
MMSA, ATCC25923	Active	Active	Active	Active
MSSA	Active	Active	Active	Active

- Active
- Intermediate
- Not active

Active *in vivo*

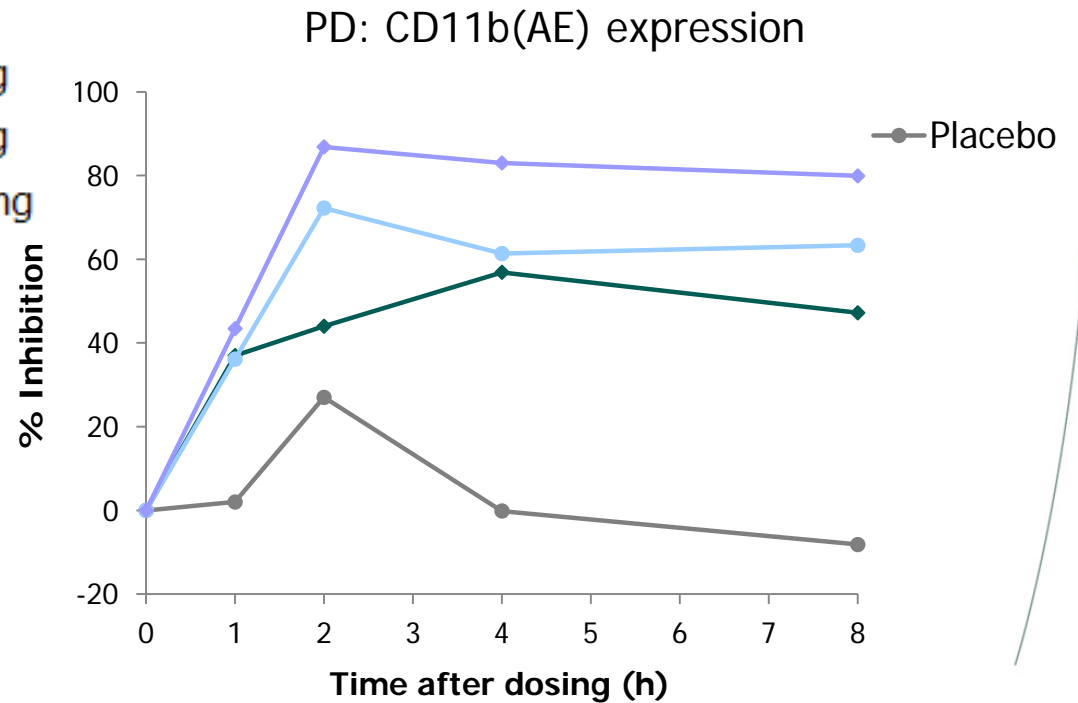
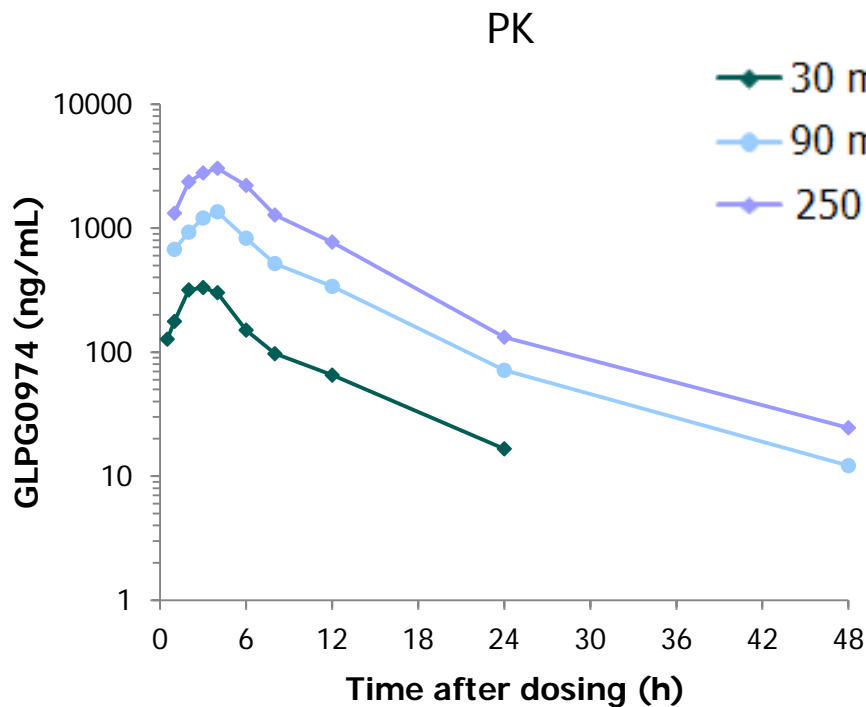
In vivo efficacy in lung infection (oral administration)



Active in MRSA *in vivo* models

'974 in inflammatory diseases

- Target GPR43 (FFAR2) is upregulated in gut tissue of UC and IBD patients
- '974 first GPR43 inhibitor to be evaluated clinically
- Excellent Phase I data



Clinical JAK inhibitors in RA

Company	RA drug	JAK profile	Phase
Pfizer	Xeljanz	JAK3>JAK1>JAK2	Approved
Incyte / Lilly	baricitinib	JAK1=JAK2	Phase IIb
Vertex	VX-509	JAK3	Phase II
Galapagos	'634	JAK1	Phase II
Astellas/JnJ	ASP015K	JAK3/JAK1	Phase II

'634: opportunity to differentiate from other JAK inhibitors

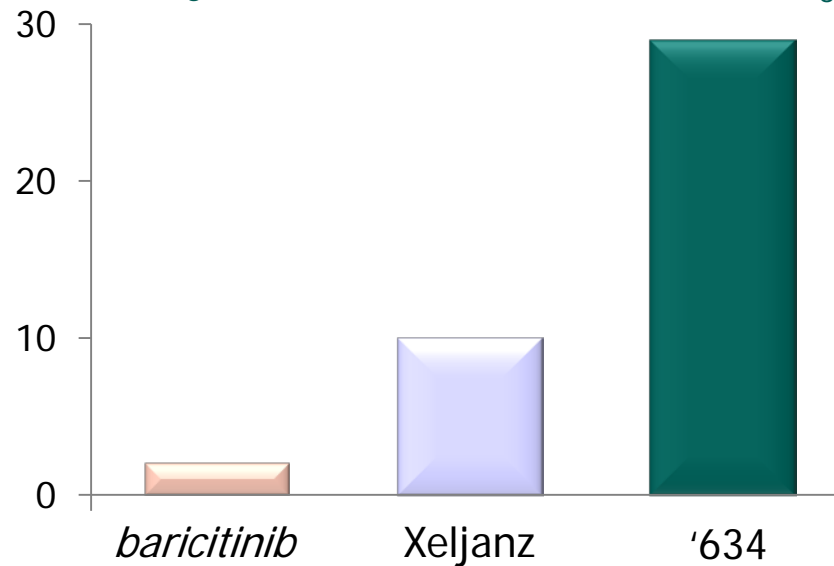
JAK1 selectivity over JAK2

'634 compared to *Xeljanz* and *baricitinib*

Profiling for JAK1 and JAK2 in cellular whole blood assay

- JAK1: IL-6/pSTAT1
- JAK2: GM-CSF/pSTAT5

Selectivity for JAK1 over JAK2 (ratio IC_{50} values)



'634 is the most JAK1 selective clinical compound



JAK1 profile creates opportunities

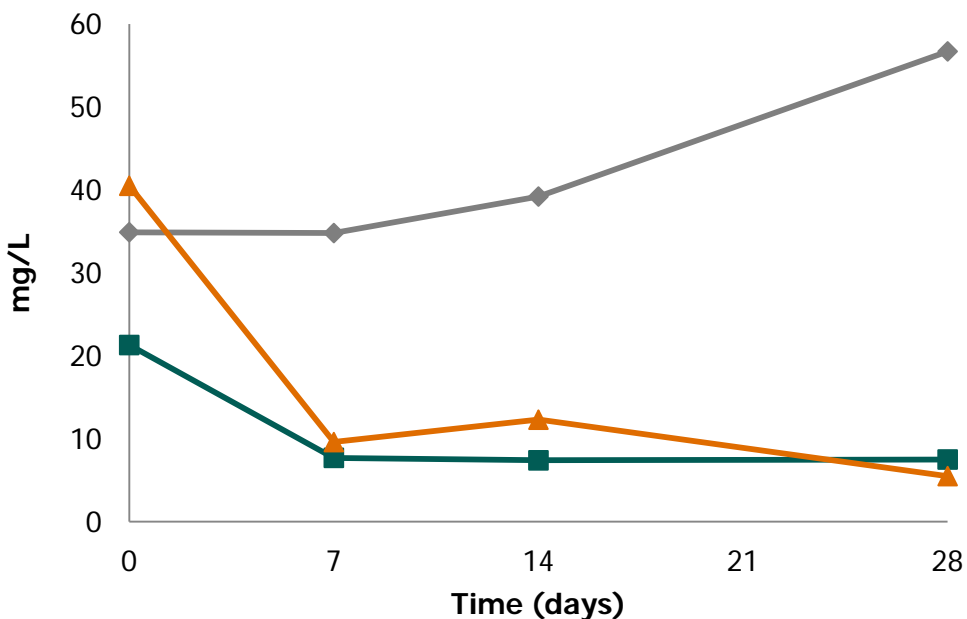
- JAK2 & JAK3 inhibition has shown:
 - dose-limiting anemia
 - increases in LDL & liver enzymes
- Xeljanz Phase III dosing limited to 5 mg & 10 mg
 - incidence of (severe) anemia at doses of 10 mg bid and higher
 - Xeljanz approval for 5 mg dose only
- JAK1 inhibition anticipated to have less side effects



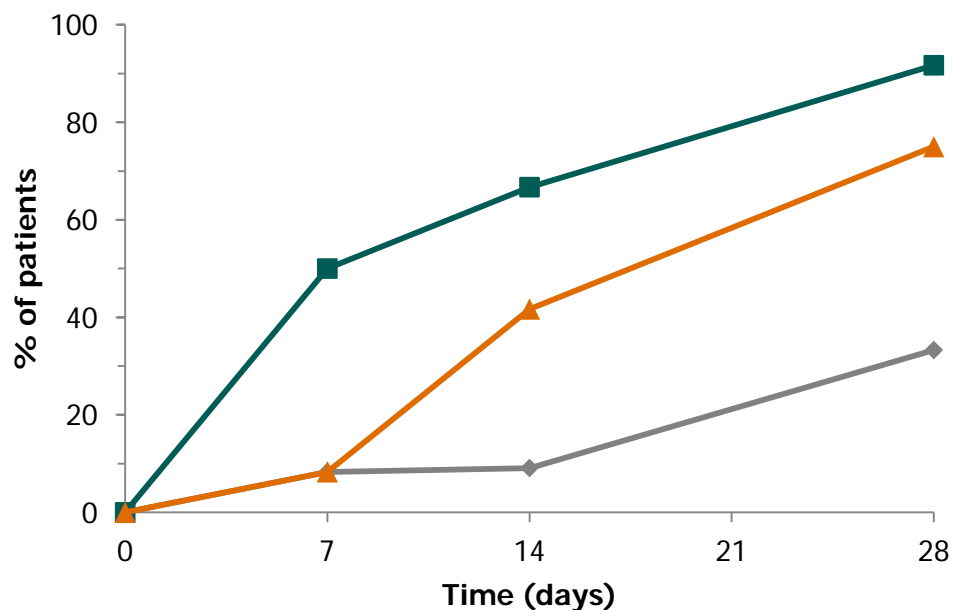
'634 efficacy Ph II POC

36 patients in 4 week trial

Changes in serum CRP (mg/L)



% patients reaching ACR20



— Placebo — 100mg BID — 200mg QD

Highly efficacious with rapid onset of action, no reported side effects



'634 safety summary

- no SAEs on '634 treatment
- few patients reported treatment-emergent side-effects
- improvement of hemoglobin
- no increase in LDL-cholesterol
- no treatment-induced effects on liver function tests (ALT, AST)
- modest decrease in neutrophils and platelets
- no effects on cardiovascular safety (incl. blood pressure)



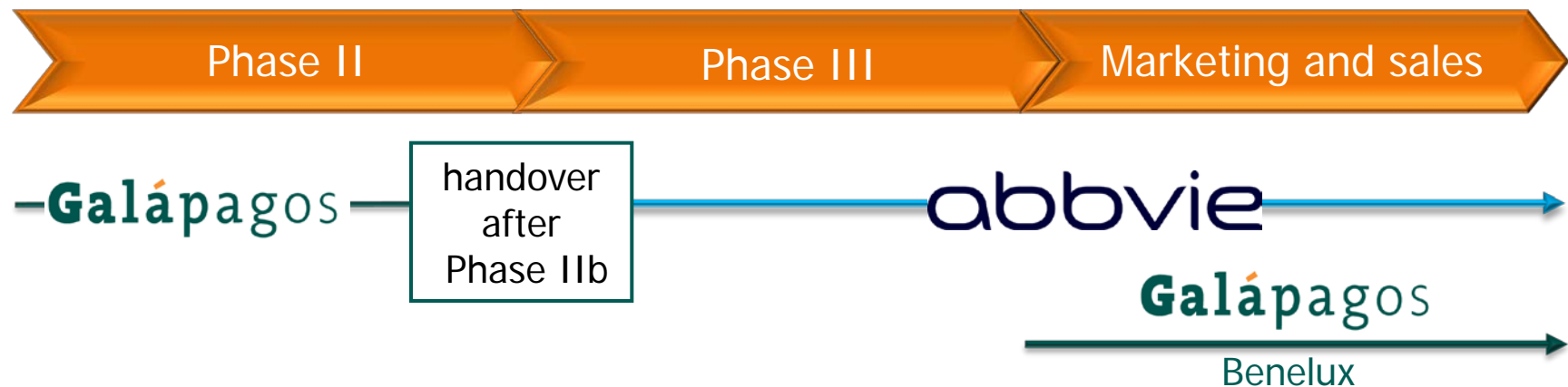
'634 Phase IIa study

- Study design
 - 90 RA patients with insufficient response to MTX, naïve to biologics
 - Doses: placebo, 30, 75, 150 and 300 mg QD, on top of ongoing MTX
 - 28-day, once daily oral dosing
 - 19 study centres in Russia, Ukraine, Hungary, Moldova
- Outcome
 - Safety profile repeated: absence of anemia, changes in LDL or liver enzymes
 - Clinical improvements seen in 75 – 300 mg doses
 - Statistically significant improvement in CRP, DAS28, HAQ-DI, and ACR at 300 mg dose

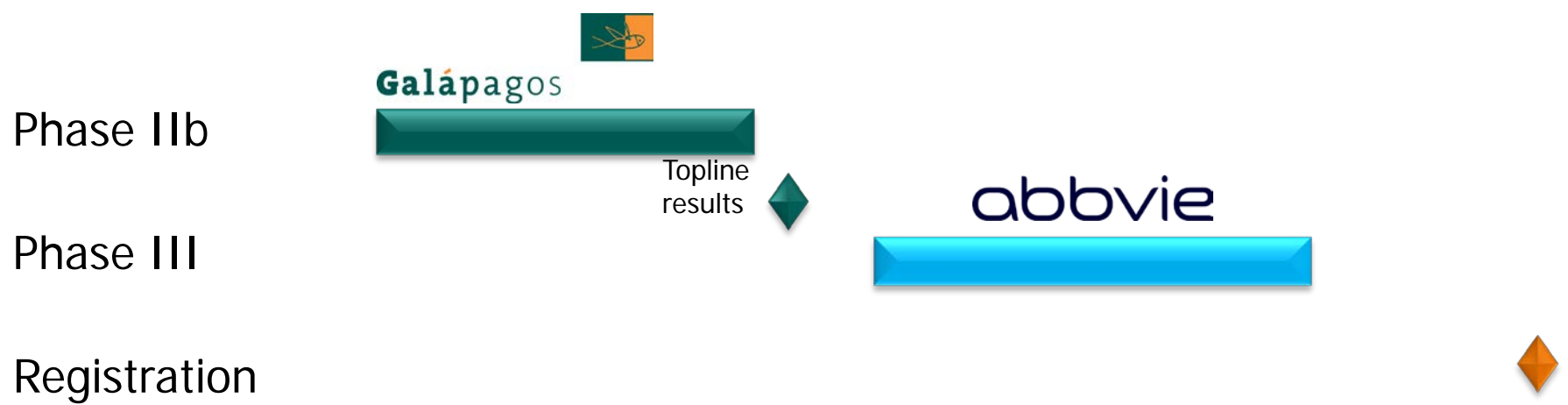
Unique safety profile and good efficacy repeated

Deal structure with AbbVie

- Upfront payment \$150 million
- Galapagos performs & funds Phase II in RA
- License fee \$200 million after achievement Phase IIb criteria
- AbbVie performs & funds Phase III, registration & commercialization
- GLPG to receive up to \$1 billion in milestones + double digit royalties
- Fiscal benefits from Belgian Patent Income Deduction law

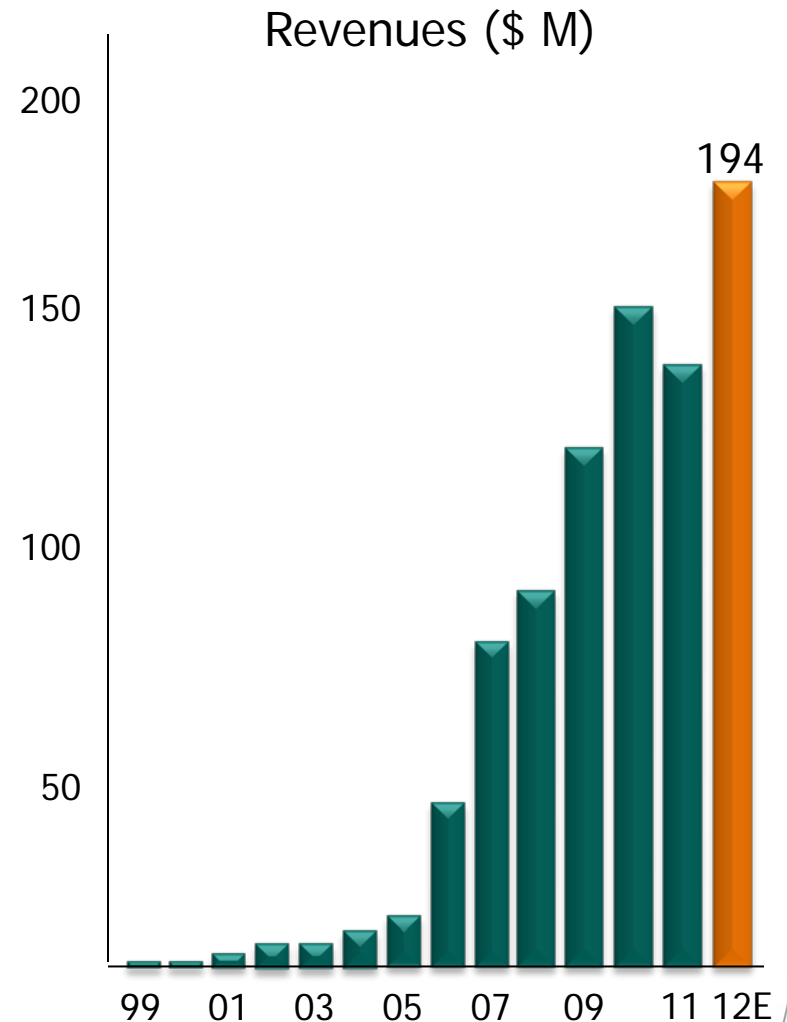


Summary of '634 clinical plan for RA



Guidance 2012

- Group revenues > \$194 M
- Year end cash position > \$165 M
- Positive operational result & net income
- Increased cash and profit contribution service operations





News flow 2013

- Start Phase IIb studies with '634 JAK1
- Phase I readouts with '187 IRA and '974 GPR43
- Complete Phase II PoC with '974
- Start 3 Phase I FiH with new MoA's
 - Servier osteoarthritis alliance
 - GSK inflammation alliance
 - JnJ inflammation alliance
- Delivery of PCC with potentiator in cystic fibrosis
- Delivery of more PCCs in the alliances
- Continued strong performance of service division

Two Phase II, multiple Phase I programs by end 2013



Bright outlook for Galapagos

- AbbVie partnership and GSK in-licensing of our programs validate our approach
- '634 has blockbuster market potential
- Broad pipeline provides further opportunities for clinical success
- Strong cash flow and profits from service division
 - contribute to financial predictability
 - support funding of our proprietary programs

Galapagos in excellent position to build value for its shareholders