Together We Discover

Reaching Patients Through Immunology Innovation



JP Morgan Healthcare Conference

Forward Looking Statements

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Such statements, based as they are on the current analysis and expectations of management, inherently involve numerous risks and uncertainties, known and unknown, many of which are beyond the Company's control. Such risks include, but are not limited to: the impact of COVID-19 pandemic on our business, the impact of general economic conditions, general conditions in the biopharmaceutical industries, changes in the global and regional regulatory environments in the jurisdictions in which the Company does or plans to do business, market volatility, fluctuations in costsand

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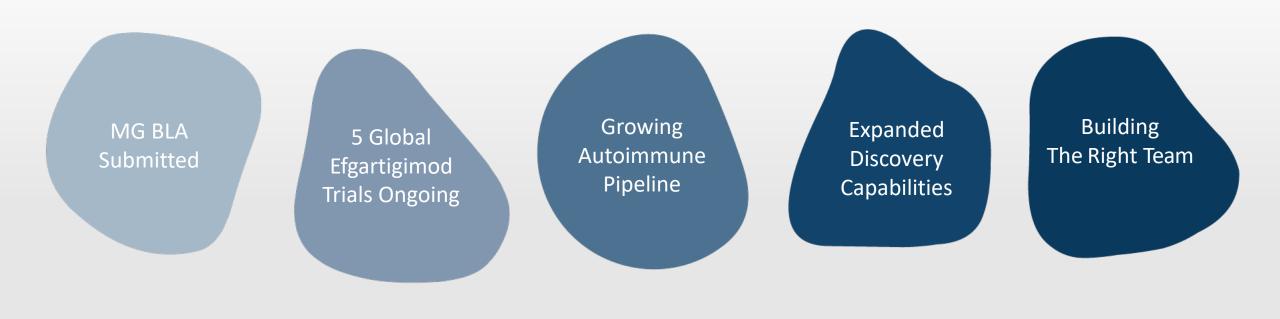
Reaching People Living with MG in 2021



MORGAN, Living with MG



2020: Transformational Year for argenx

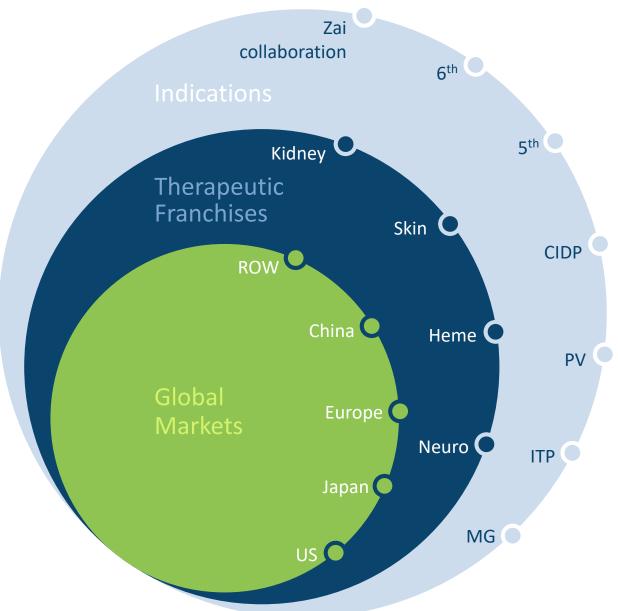




Uniquely Positioned

For exponential expansion

- o efgartigimod indications
- o therapeutic franchises
- o global markets



Reaching Patients Worldwide



Expand

patients we reach + number of indications

Accelerate

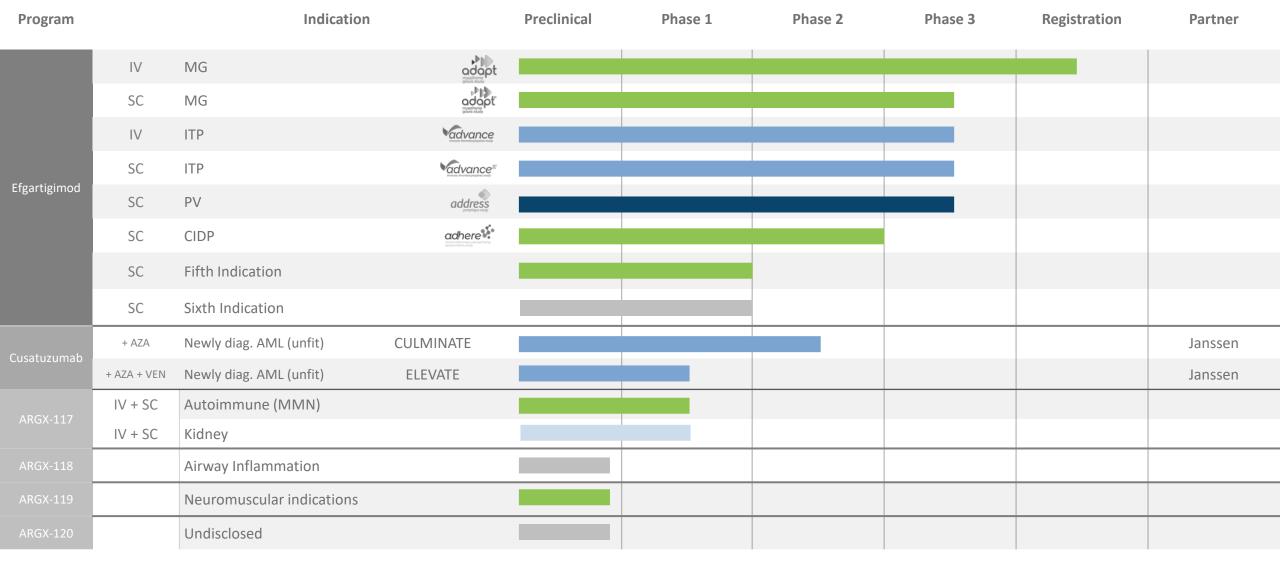
enrollment into global registrational trials

Mutual Passion

bringing innovative therapies to patients



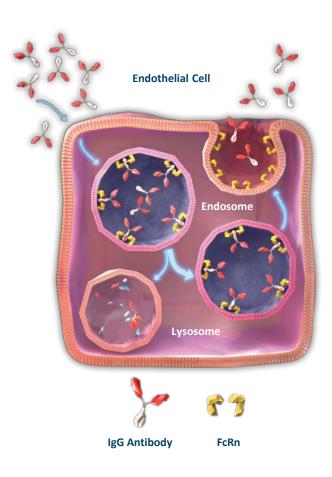
Deep Antibody Pipeline of Differentiated Candidates



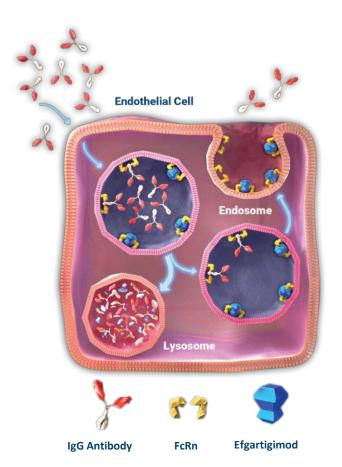


FcRn Biology is Foundational to the Immune System

FcRn recycles IgG antibodies extending their abundancy



Efgartigimod Blocks FcRn leading to IgG elimination



- Human IgG1 Fc fragment uniquely modulates FcRn, preserving characteristic pH dependent binding of endogenous IgG
- No impact on IgM, IgA or human serum albumin
- Does not affect IgG production, an important component to a vaccine response

Roopenian et al. 2007, Nat Rev Immunol. Vaccaro et al. 2005, Nat Biotech. Ulrichts et al. 2018, J Clin Invest. Efgartigimod:

First-in-Class FcRn Antagonist

- Proof-of-concept in three indications (MG, ITP, PV)
- IV and SC injection in development
- 350+ subjects or patients dosed
- Safety profile comparable to placebo in ADAPT trial

Patients
on drug for
more than
2 years





Information from argenx market research

MYASTHENIA GRAVIS

Patient Experience

"A person with MG on a good day operates at 70%. On bad days, you can get 10% out of your battery."

1/2
of Patients
have been diagnosed
with depression
or anxiety in
addition to gMG

Symptoms can vary from patient to patient, day to day, or even throughout the same day...this unpredictability contributes to emotional burden of disease

2.6 Years

mean time from symptom expression to diagnosis

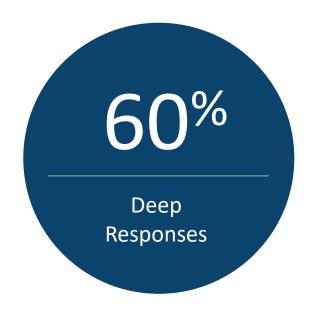
- MG affects more than patients' muscles
- Surveyed neurologists ranked severe MG only behind ALS as most severe disease they treat



Promising Value Proposition to MG Patients









MG-ADL responders during first two cycles

MG-ADL responders within first two weeks of treatment

MG-ADL responders achieved minimal symptom expression (MG-ADL of 0 or 1)

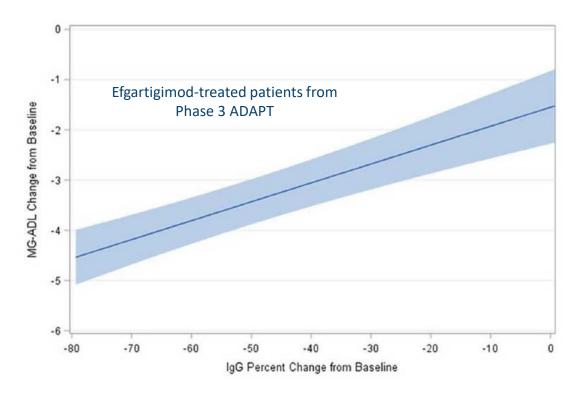
Patients likely to benefit from individualized dosing



SC Bridging Strategy Leverages Correlation Between Pharmacodynamic and Clinical Effect

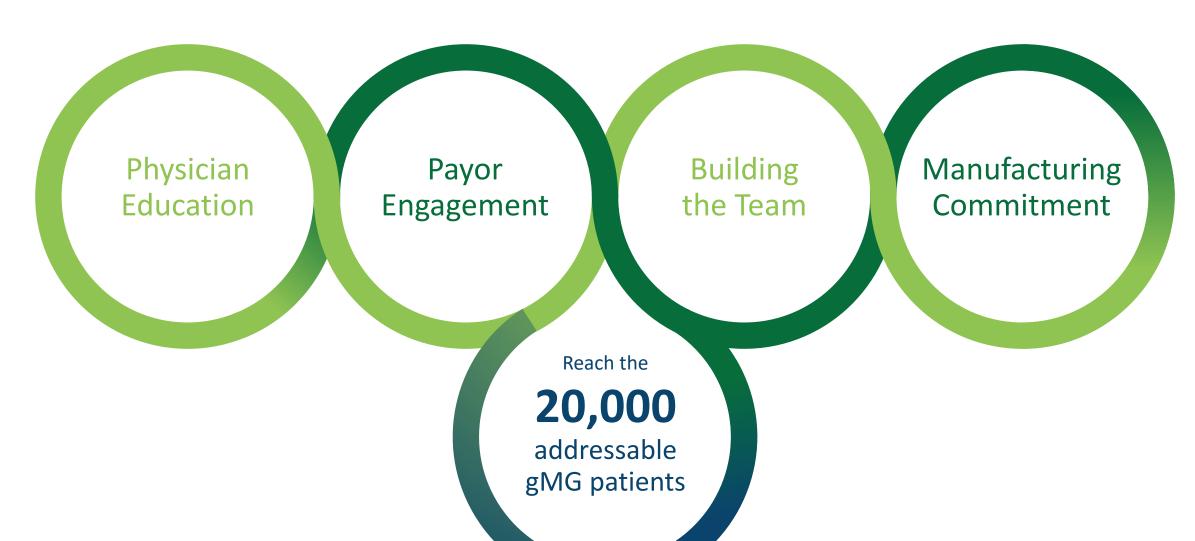


 Established association of total IgG and MG-ADL following efgartigimod treatment



- Bridging study (n=50) underway to support registration of SC efgartigimod
 - Study designed to demonstrate noninferiority of PD effect of 1000 mg SC efgartigimod to 10mg/kg IV efgartigimod
 - Phase 1 HV data showed 1000 mg SC efgartigimod has similar PD effect as 10mg/kg IV efgartigimod
 - Additional patients from ADAPT+ to transition to SC efgartigimod

Preparing for a Successful Launch



Listening to and Learning from MG Community

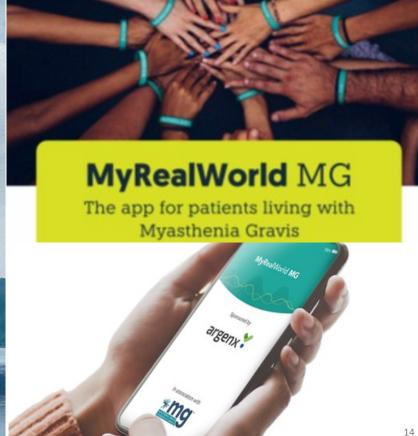
MGUnited

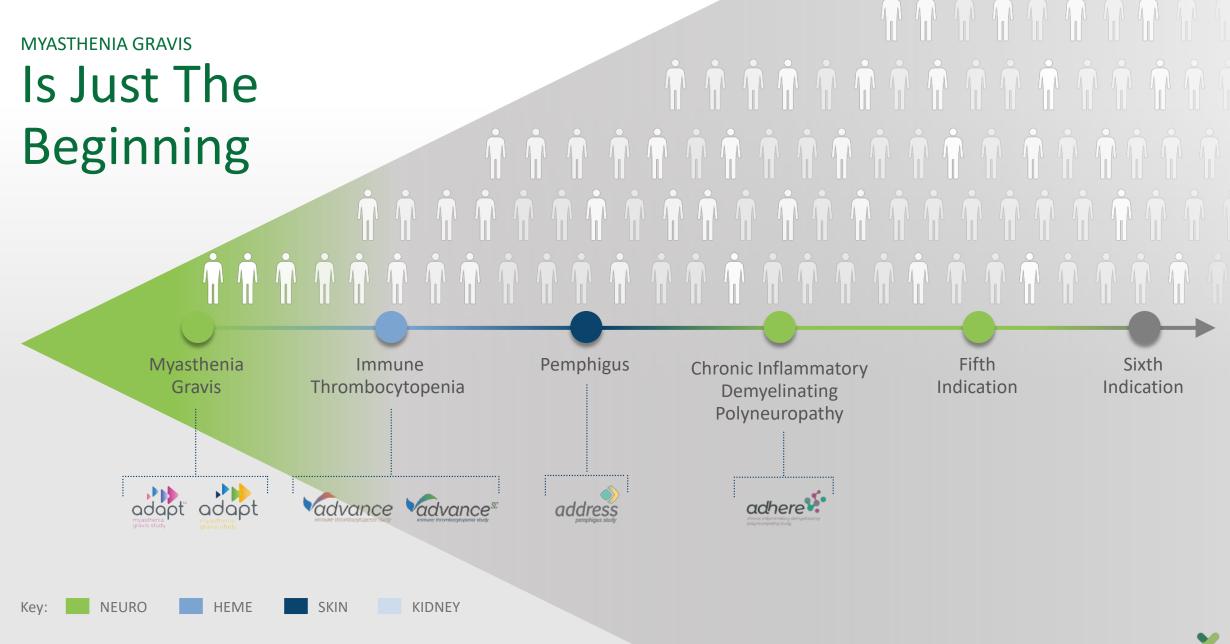
A MYSTERY TO ME

MyRealWorld™ MG



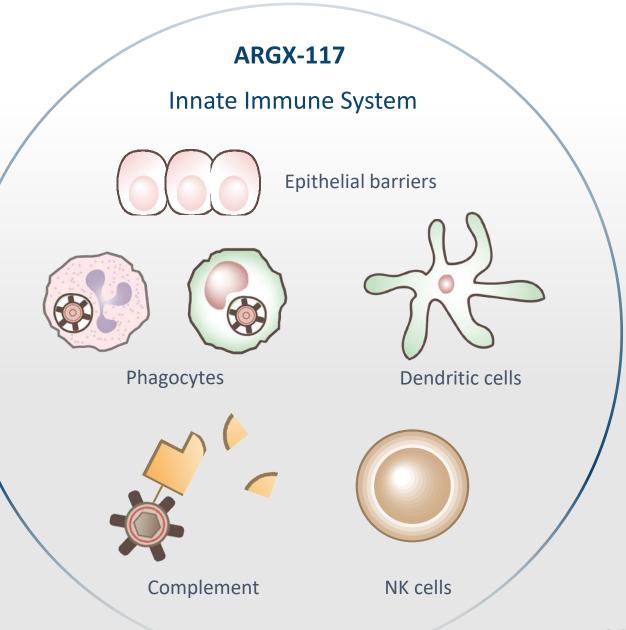




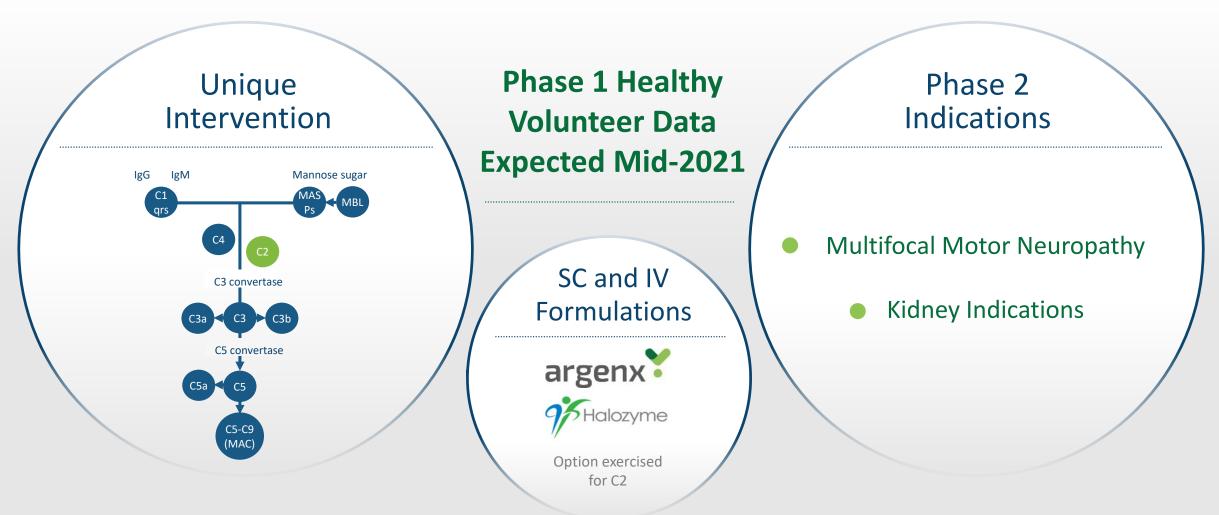


Expanding Reach Within Immune System With ARGX-117

Efgartigimod Adaptive Immune System Antibodies **B** lymphocytes (e.g. IgG) T lymphocytes Effector T cells



ARGX-117: Broad Opportunity By Targeting C2



Cusatuzumab Strategy

Newly diagnosed elderly AML patients who are unfit for intensive chemotherapy

Phase 2 CULMINATE Trial
 Cusatuzumab + Azacitidine
 Go-forward dose selected

20 mg/kg

| CR Rates | CR | CRc | |
|--|------|--|--|
| | n=14 | n=21 | |
| ITT (n=52) | 27% | 40% | |
| Patients who received ≥ 2 cycles (n=33) | 42% | 64% | |
| 30-day mortality: 5/52 (9.6%) CRc: CR, CRi, CRh | | 46.2% Adverse Risk Classification (ELN) | |

Phase 1b ELEVATE Trial in Triple Combination

cusatuzumab + azacitidine + venetoclax

Decision to initiate additional studies will be determined following review of data from ELEVATE

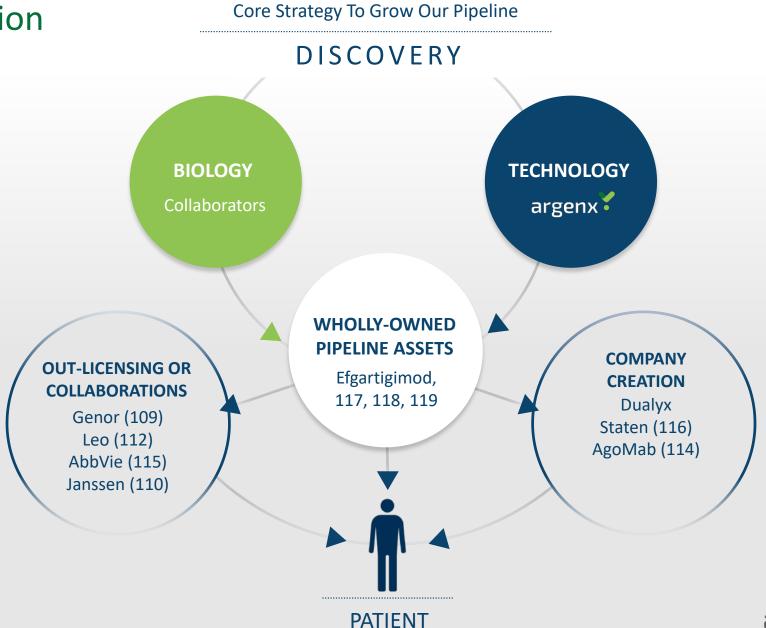
CRi: Complete Remission with incomplete count recovery

CRh: Complete Remission with partial recovery of peripheral blood counts



Immunology Innovation Program (IIP)

Optimizing the collision of great minds



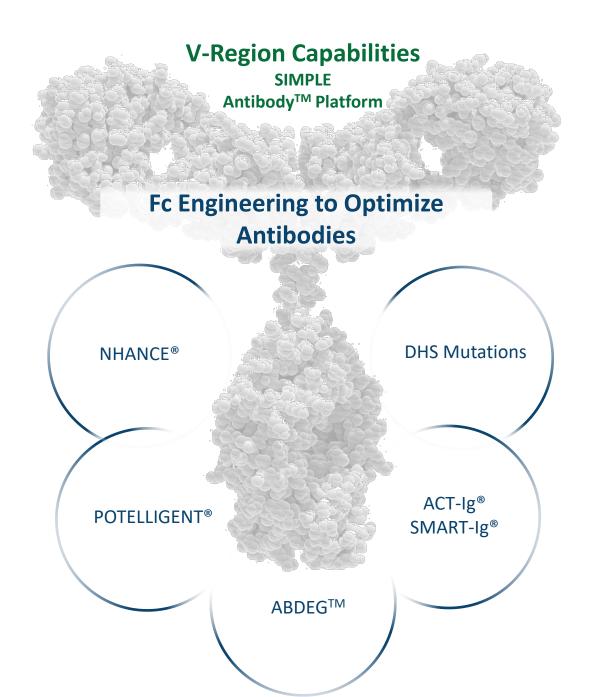
Leading Antibody Discovery and Engineering Toolkit

SC Dosing Optionality

France Optionality

ENHANZE

Technology





Building Tomorrow's Immunology Company

Reach gMG patients with efgartigimod

Advance clinical development in multiple autoimmune indications

Strategic Priorities

Global expansion

Leverage IIP

Rooted in groundbreaking immunology research, growing through collaboration



Together We Discover

Reaching Patients Through Immunology Innovation



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JANUARY 2021

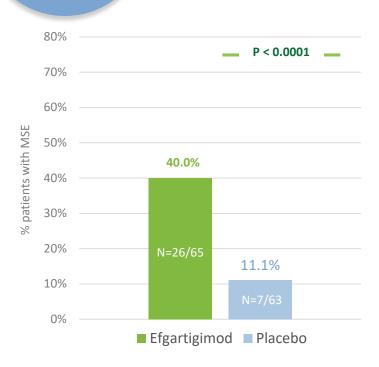
ADAPT Data Showed Fast, Deep and Durable Responses

40%

of Efgartigimod Patients
Achieved Minimal
Symptom Expression
Compared to 11% in
Placebo

Minimal Symptom Expression

Minimal Symptom Expression (AChR Ab+ patients, first cycle)

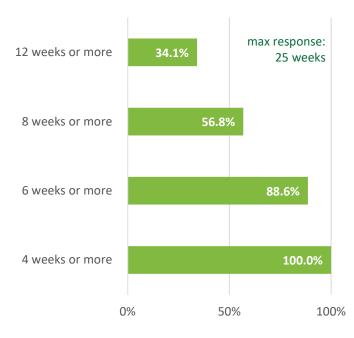


Minimal Symptom Expression: MG-ADL = 0 (no symptoms) or 1



Durable Clinical Benefit

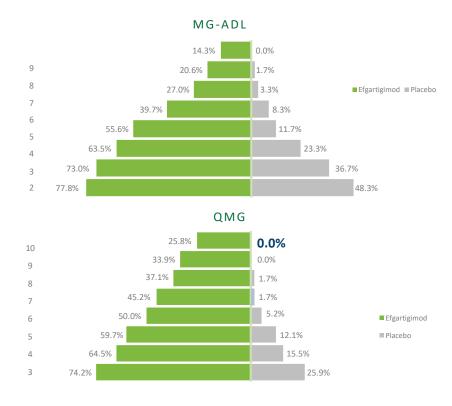
Duration of response(AChR Ab+ Efgartigimod responders, first cycle)



Responder by Definition is at Least 4 Consecutive Weeks

Efgartigimod Demonstrated Significant Magnitude Of Benefit

AChr-AB+ Patients, Cycle 1





CIDP: Therapeutic Activity Shown With Increasing Selectivity For IgG Reductions

