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**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION**  
WASHINGTON, D.C. 20549

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**FORM 6-K**

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**REPORT OF FOREIGN PRIVATE ISSUER  
PURSUANT TO RULE 13a-16 OR 15d-16  
UNDER THE SECURITIES EXCHANGE ACT OF 1934**

**For the Month of January 2026**

**Commission File Number: 001-38097**

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**ARGENX SE**

(Translation of registrant's name into English)

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**Laarderhoogtweg 25  
1101 EB Amsterdam, the Netherlands**  
(Address of principal executive offices)

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Indicate by check mark whether the registrant files or will file annual reports under cover of Form 20-F or Form 40-F.

Form 20-F  Form 40-F

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(1):

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(7):

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**EXPLANATORY NOTE**

On January 12, 2026, argenx SE (the "Company") issued a press release and an investor presentation, copies of which are attached hereto as Exhibits 99.1 and 99.2, respectively, and are incorporated by reference herein.

*The information contained in this Current Report on Form 6-K, including Exhibits 99.1 and 99.2, shall be deemed to be incorporated by reference into the Company's Registration Statements on Forms F-3 ([File No. 333-258251](#)) and S-8 (File Nos. [333-225375](#), [333-258253](#), [333-274721](#) and [333-292200](#)), and to be part thereof from the date on which this Current Report on Form 6-K is filed, to the extent not superseded by documents or reports subsequently filed or furnished.*

<b>Exhibit</b>	<b>Description</b>
<a href="#">99.1</a>	<a href="#">Press Release dated January 12, 2026</a>
<a href="#">99.2</a>	<a href="#">Investor Presentation dated January 12, 2026</a>

**SIGNATURES**

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned, thereunto duly authorized.

**ARGENX SE**

Date: January 12, 2026

By: /s/ Hemamalini (Malini) Moorthy  
Name: Hemamalini (Malini) Moorthy  
Title: General Counsel

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### argenx Highlights 2026 Strategic Priorities

*Reported \$4.15 billion (YoY growth of +90%) in preliminary\* full-year 2025 global product net sales, inclusive of \$1.29 billion in fourth quarter sales*

*VYVGART impact continues with approximately 19,000 patients on treatment; and if approved, AChR-Ab seronegative gMG launch expected by end of 2026*

*Four registrational readouts expected in 2026, including first for empasiprubart, to advance toward next wave of 2027 commercial launches*

*Successfully advanced four new pipeline molecules in 2025; three new molecules to enter Phase 1 in 2026, contributing to total of 10 clinical-stage molecules by year-end*

January 12, 2026, 7:00 a.m. CET

**Amsterdam, the Netherlands** – argenx (Euronext & Nasdaq: ARGX), a global immunology company committed to improving the lives of people suffering from severe autoimmune diseases, today reported preliminary financial results for the full-year 2025, including global product net sales, and announced its strategic priorities for 2026.

“argenx enters 2026 in a position of strength, delivering meaningful impact to approximately 19,000 patients globally while advancing a world-class pipeline toward Vision 2030,” said Tim Van Hauwermeiren, Chief Executive Officer of argenx. “With VYVGART leading the growth of all biologics in MG and CIDP, we are proving the power of our approach: to redefine treatment paradigms through disciplined evidence generation and to redefine patient outcomes with medicines that are both more effective and more convenient. This same playbook will guide our future, as we aim to launch a portfolio of new medicines that could transform the lives of more than 50,000 patients across 10 indications.”

“Looking at the year ahead, we will expand our FcRn franchise and report the first Phase 3 data for our next potential blockbuster medicine, with four registrational readouts across both efgartigimod and empasiprubart. In addition, we will continue to grow intentionally, by sourcing innovation where the best science emerges, nurturing an entrepreneurial culture, and scaling with discipline to deliver long-term, durable value for patients and shareholders,” added Mr. Van Hauwermeiren.

#### 2026 Strategic Priorities

argenx continues to advance its ‘Vision 2030’, anchored in the ambition to treat 50,000 patients globally with its medicines, secure 10 labeled indications across approved medicines, and progress five pipeline candidates into Phase 3 development by 2030.

2026 marks a defining year on the path to Vision 2030 with three strategic priorities:

- **Impact more patients globally with VYVGART**, driving broader adoption across current patient populations and unlocking new opportunities with potential label expansions
-



- **Shape the long-term future of FcRn medicines**, advancing future FcRn molecules, innovative delivery modalities and combination approaches designed to transform patient outcomes
- **Deliver next wave of immunology innovation**, accelerating empasirubart and diversified pipeline of first-in-class molecules to drive sustainable value creation

#### Impact more patients globally with VYVGART

VYVGART® (IV: efgartigimod alfa-fcab and SC: efgartigimod alfa and hyaluronidase-qvfc) is a first-and-only IgG Fc-antibody fragment that targets the neonatal Fc receptor (FcRn). It is approved in three indications, including generalized myasthenia gravis (gMG) and chronic inflammatory demyelinating polyneuropathy (CIDP) globally, and primary immune thrombocytopenia (ITP) in Japan. argenx aims to drive broad adoption across patients globally, reinforcing VYVGART's position as the leading precision biologic in MG and CIDP and continuing to raise the bar for patient outcomes. The company is progressing toward multiple label expansions. This includes seeking the broadest label of any biologic in MG with the seronegative MG launch, if approved, and an ocular MG Phase 3 readout, and in ITP with the Phase 3 readout to support a U.S. launch.

- Submitted supplemental Biologics License Application (sBLA) for VYVGART IV for anti-acetylcholine receptor antibody negative gMG (MuSK+, LRP4+ and triple seronegative); if approved, launch expected by end of 2026
- Topline results expected for ocular MG (ADAPT OCULUS) in first quarter of 2026
- Topline results expected for primary ITP (ADVANCE-NEXT) in fourth quarter of 2026
- Registrational studies are ongoing in two rheumatology indications
  - o Topline results from ALKIVIA study evaluating autoimmune inflammatory myopathies (AIM or myositis) expected in third quarter of 2026
  - o Topline results from UNITY study (Sjogren's disease) expected in second half of 2027
- Registrational study in Graves' disease (GD) expected to initiate in 2026, expanding development into thyroid-driven autoimmunity
- Proof-of-concept studies ongoing in systemic sclerosis, antibody mediated rejection and autoimmune encephalitis
- Expanded global presence in Latin America with establishment of argenx Brazil in 2025

#### Shape the long-term future of FcRn medicines

argenx is shaping the long-term future of FcRn medicines by advancing new pipeline candidates, innovative delivery modalities, and combination approaches to set new standards for patients. Two future FcRn molecules are progressing: ARGX-213, an FcRn-targeted antibody engineered for half-life extension and sustained IgG reduction, and ARGX-124, a first-in-class FcRn pipeline candidate. The ADAPT-Forward study is now underway, which is the first in a series of trials exploring efgartigimod-anchored combinations to potentially improve patient outcomes.

- VYVGART SC autoinjector expected to launch in 2027, reinforcing a commitment to continued flexibility and independence for patients
  - ADAPT-Forward combination study ongoing to evaluate empasirubart as an add-on therapy to efgartigimod, exploring potential for even deeper efficacy in AChR-positive gMG patients
  - ARGX-213 is expected to enter patient studies in 2026
  - ARGX-124 is expected to complete Phase 1 evaluation by end of 2026
  - Innovation in FcRn continues through partnerships with Elektrofī (now part of Halozyme) and Unnatural Products to further enhance the patient experience
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### **Deliver next wave of immunology innovation**

By the end of 2026, the argenx pipeline will include four Phase 3 molecules and a total of 10 molecules in clinical development. Empasiprubart, a first-in-class antibody targeting C2, is in Phase 3 for MMN and CIDP, and adimanebart (ARGX-119), a first-in-class agonist antibody targeting muscle-specific kinase (MuSK), will enter Phase 3 for congenital myasthenic syndromes (CMS). Additional proof-of-concept studies are underway to further explore C2 and MuSK biology. In 2025, four new candidates emerged from the Immunology Innovation Program (IIP), argenx's engine for sourcing novel biology and accelerating differentiated medicines. These include FcRn candidates ARGX-213 and ARGX-124, and ARGX-109 (targeting IL-6) and ARGX-121 (a first-in-class molecule targeting IgA). Three additional molecules from the IIP are expected to enter Phase 1 in 2026, supporting argenx's goal of launching, on average, one new pipeline candidate each year.

#### Empasiprubart

- Topline results from EMPASSION study (MMN) expected in fourth quarter of 2026
- Topline results from EMVIGORATE and EMNERGIZE studies (CIDP) expected in second half of 2027
- Decision for Phase 2 VARVARA study (DGF) now expected mid-year 2026 to complete 52-week efficacy analysis

#### Adimanebart

- CMS registrational study on track to start in third quarter of 2026
- Proof-of-concept studies ongoing in amyotrophic lateral sclerosis (ALS) and spinal muscular atrophy (SMA)

#### Earlier-stage Programs

- Phase 2 study of ARGX-121 in IgA nephropathy (IgAN) expected to start in 2026
- Entered into a research collaboration with Tensegrity Pharma, including an option for future acquisition, to advance Tensegrity's lead program TSP-101 in autoimmune disease and other indications.
- Three new molecules expected to enter Phase 1 studies in 2026, including ARGX-118, a first-in-class molecule targeting Galectin-10, ARGX-125, a first-in-class bispecific antibody, and TSP-101, targeting Fn14

### **Corporate Highlights**

argenx recently announced that Karen Massey, current Chief Operating Officer, will transition to Chief Executive Officer and Executive Director, and Tim Van Hauwermeiren, current Chief Executive Officer, will transition to non-Executive Director and Chairman of the Board of Directors. Tim will succeed Peter Verhaeghe, who is retiring from the Board of Directors. These changes are subject to shareholder approval at the Annual General Meeting on May 6, 2026.

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In addition, Sandrine Piret-Gérard has been appointed Chief Commercialization Officer. Sandrine brings extensive commercial and medical affairs experience, most recently leading the U.S. commercial organization at Gilead across virology and oncology.

#### **Preliminary\* Key Fourth Quarter and Full-Year 2025 Financial Results**

Today, argenx also announced preliminary\* global product net sales for the fourth quarter and full-year 2025 of approximately \$1.29 billion and \$4.15 billion, respectively.

\*The preliminary selected financial information is unaudited, subject to adjustment, and provided as an approximation in advance of the company's announcement of complete financial results in February 2026. Refer to the Preliminary Financial Results note in this document.

#### **44<sup>th</sup> Annual J.P. Morgan Healthcare Conference Presentation and Webcast**

CEO Tim Van Hauwermeiren will highlight these updates in a corporate presentation at the 44<sup>th</sup> Annual J.P. Morgan Healthcare Conference today, Monday, January 12, 2026, at 8:15 a.m. PT. The live webcast of the presentation may be accessed under the Investor section on the argenx website. A replay will be available for 30 days following the presentation.

#### **About VYVGART and VYVGART SC**

VYVGART® (efgartigimod alfa fcab) is a human IgG1 antibody fragment that binds to the neonatal Fc receptor (FcRn), resulting in the reduction of circulating IgG autoantibodies. It is the first approved FcRn blocker for the treatment of generalized myasthenia gravis (gMG) and chronic inflammatory demyelinating polyneuropathy (CIDP) globally, and for primary immune thrombocytopenia (ITP) in Japan. VYVGART SC is a subcutaneous combination of efgartigimod alfa and recombinant human hyaluronidase PH20 (rHuPH20), Halozyme's ENHANZE® drug delivery technology to facilitate subcutaneous injection delivery of biologics. It is marketed as VYVGART® Hytrulo in the U.S., VYVGART SC in Europe, VYVDURA® in Japan, and may be marketed under different proprietary names following approval in other regions.

#### **About argenx**

argenx is a global immunology company committed to improving the lives of people suffering from severe autoimmune diseases. Partnering with leading academic researchers through its Immunology Innovation Program (IIP), argenx aims to translate immunology breakthroughs into a world-class portfolio of novel antibody-based medicines. argenx developed and is commercializing the first approved neonatal Fc receptor (FcRn) blocker and is evaluating its broad potential in multiple serious autoimmune diseases while advancing several earlier stage experimental medicines within its therapeutic franchises. For more information, visit [www.argenx.com](http://www.argenx.com) and follow us on [LinkedIn](#), [Instagram](#), [Facebook](#), and [YouTube](#).

**This press release contains inside information within the meaning of Article 7(1) of the EU Market Abuse Regulation (Regulation 596/2014).**

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**Investors:**

Alexandra Roy  
a.roy@argenx.com

**Preliminary Financial Results**

The financial information presented in this press release is preliminary, estimated, and unaudited. They are subject to the completion and finalization of argenx's financial and accounting closing procedures. They reflect management's estimates based solely upon information available to management as of the date of this press release. Further information learned during that completion and finalization may alter the final results. In addition, the preliminary estimates should not be viewed as a substitute for full quarterly and annual financial statements prepared in accordance with IFRS. There is a possibility that argenx's financial results for the quarter ended December 31, 2025, and full year financial results for 2025 could vary materially from these preliminary estimates. In addition to the completion of the financial closing procedures, factors that could cause actual results to differ from those described above are set forth below. Accordingly, you should not place undue reliance upon this preliminary information. Additional information regarding the company's fourth quarter 2025 financial results and full year financial results for 2025 will be available in the company's annual report and Form 20-F, which will be filed with the Netherlands Authority for the Financial Markets and U.S. Securities and Exchange Commission (the "SEC"), respectively.

**Forward Looking Statements**

The contents of this announcement include statements that are, or may be deemed to be, "forward-looking statements." These forward-looking statements can be identified by the use of forward-looking terminology, including the terms "advance," "aim," "commit," "continue," "deepen," "develop," "expect," "grow," "potential," "progress," and "will," and include statements argenx makes concerning its continued impact of VYVGART and if approved, the potential launch of AChR-Ab seronegative gMG launch by end of 2026; its four registrational readouts expected in 2026 to advance efgartigimod and empasiprubarb towards next wave of 2027 commercial launches; the advancement of its pipeline, with three new molecules to enter Phase 1 in 2026, contributing to total of 10 clinical-stage molecules by year-end; its advancement of a world-class pipeline toward Vision 2030; its continued advancement of Vision 2030, anchored in the ambition to treat 50,000 patients globally with its medicines, secure 10 labeled indications across approved medicines, and progress five pipeline candidates into Phase 3 development by 2030; its intentional growth by sourcing innovation where the best science emerges, preserving its entrepreneurial culture, and scaling with discipline to deliver long-term, durable value for patients and shareholders; its belief that 2026 will be a defining year that will deepen its immunology leadership and broaden patient impact, including its goal to impact more patients globally with VYVGART by driving broader adoption across current patient populations while unlocking new opportunities through potential label expansions; the timing of a potential (1) launch in AChR- seronegative MG, and (2) Phase 3 readouts in ocular MG and ITP; the advancement of anticipated clinical development, data readouts and regulator milestones and plans, including: (1) the potential approval and launch by the end of 2026 of an sBLA for VYVGART IV for anti-acetylcholine receptor antibody negative gMG (MuSK+, LRP4+ and triple seronegative); (2) topline results for ocular MG (ADAPT OCULUS) in first quarter of 2026; (3) topline results for primary ITP (ADVANCE-NEXT) in fourth quarter of 2026 to support label expansion outside Japan; (4) ongoing registrational studies in two rheumatology indications, in Graves' disease, and in multiple proof-of-concept indications, including: (a) potential topline results from ALKIVIA study evaluating autoimmune inflammatory myopathies (AIM or myositis) in third quarter of 2026; (b) potential topline results from UNITY study (Sjögren's disease) in second half of 2027; (c) potential initiation of a registrational study in Graves' disease (GD) in first half of 2026, expanding development into thyroid-driven autoimmunity; (5) broadened global presence in Latin America through establishment of argenx Brazil in 2025; the progression of ARGX-213 and ARGX-124; the progression of a series of trials exploring efgartigimod-anchored combinations to potentially improve patient outcomes, including: (1) the potential launch of VYVGART SC autoinjector in 2027; (2) the ongoing ADAPT-Forward combination study; (3) potential studies for ARGX-213 in 2026; (4) potential completion of ARGX-124's Phase 1 evaluation by end of 2026; and (5) continued innovation in FcRn through partnerships with Elektrofi (now part of Halozyme) and Unnatural Products; its goal to have five Phase 3 molecules and a total of 10 molecules in clinical development by the end of 2026; the additional proof-of-concept studies underway to further explore the potential of C2 and MuSK biology, with: (1) potential topline results from EMPASSION study (MMN) for empasiprubarb in fourth quarter of 2026; (2) potential topline results for empasiprubarb from EMVIGORATE and EMNERGIZE studies (CIDP) in second half of 2027; (3) potential for decision for Phase 2 VARVARA study (DGF) for empasiprubarb now mid-year 2026 to complete 52-week efficacy analysis; (4) potential for CMS registrational study for adimanebart to start in third quarter of 2026; and (5) proof-of-concept studies for adimanebart ongoing in amyotrophic lateral sclerosis (ALS) and spinal muscular atrophy (SMA); its goal to launch at least one new pipeline candidate each year on a go-forward basis, with: (1) IgA nephropathy (IgAN) nominated as first Phase 2 indication to be explored with ARGX-121; (2) its research collaboration with Tensegrity Pharma; (3) the entry of three new molecules into its pipeline in 2026, including ARGX-118, ARGX-125, and TSP-101; its aim to shape the long-term future of FcRn medicines, and deliver the next wave of immunology innovation; its commitment to improve the lives of people suffering from severe autoimmune diseases; its belief that its priorities for VYVGART will reinforce its position as the leading precision biologic and continue to raise the bar on patient outcomes; its aim to translate immunology breakthroughs into a world-class portfolio of novel antibody-based medicines; its commercialization of the first approved neonatal Fc receptor (FcRn) blocker and evaluation of its broad potential in multiple serious autoimmune diseases; its anticipated leadership changes; its future financial and operating performance, including its anticipated global product net sales for Q4 2025 and FY 2025; and its advancement of several earlier stage experimental medicines within its therapeutic franchises. By their nature, forward-looking statements involve risks and uncertainties and readers are cautioned that any such forward-looking statements are not guarantees of future performance. argenx's actual results may differ materially from those predicted by the forward-looking statements as a result of various important factors, including but not limited to, the results of argenx's clinical trials; expectations regarding the inherent uncertainties associated with the development of novel drug therapies; preclinical and clinical trial and product development activities and regulatory approval requirements; the acceptance of its products and product candidates by its patients as safe, effective and cost-effective; the impact of governmental laws and regulations, including tariffs, export controls, sanctions and other regulations on its business; its reliance on third-party suppliers, service providers and manufacturers; inflation and deflation and the corresponding fluctuations in interest rates; and regional instability and conflicts. A further list and description of these risks, uncertainties and other risks can be found in argenx's U.S. Securities and Exchange Commission (SEC) filings and reports, including in argenx's most recent annual report on Form 20-F filed with the SEC as well as subsequent filings and reports filed by argenx with the SEC. Given these uncertainties, the reader is advised not to place any undue reliance on such forward-looking statements. These forward-looking statements speak only as of the date of publication of this document. argenx undertakes no obligation to publicly update or revise the information in this press release, including any forward-looking statements, except as may be required by law.

**Leading a new era of innovation in immunology**

argen

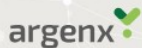


# Forward Looking Statements

This presentation has been prepared by argenx se ("argenx" or the "company") for informational purposes only and not for any other purpose. Nothing contained in this presentation is, or should be construed as, a recommendation, promise or representation by the presenter or the company or any director, employee, agent, or adviser of the company. This presentation does not purport to be all-inclusive or to contain all of the information you may desire. Certain information contained in this presentation relates to or is based on studies, publications, surveys and other data obtained from third-party sources and the company's own internal estimates and research. While argenx believes these third-party studies, publications, surveys and other data to be reliable as of the date of this presentation, it has not independently verified, and makes no representation as to the adequacy, fairness, accuracy or completeness of, any information obtained from third-party sources. In addition, no independent source has evaluated the reasonableness or accuracy of argenx's internal estimates or research, and no reliance should be made on any information or statements made in this presentation relating to or based on such internal estimates and research.

Certain statements contained in this presentation, other than present and historical facts and conditions independently verifiable at the date hereof, may constitute forward-looking statements. These forward-looking statements can be identified by the use of forward-looking terminology, including the terms "advance," "expand," "future," "ongoing," "opportunity," "potential," and "will," and include statements argenx makes regarding its new era of innovation in immunology; its ability to connect science and patients to unlock infinite opportunity; its plan for its innovation engine to power Vision 2030, including (1) 5 new molecules in Phase 3 and 4 new pipeline molecules in 2025; (2) 10 labeled indications and 10 ongoing registrational studies; and (3) 50,000 patients on treatment and its continued impact of VYVGART with approximately 19,000 patients treated globally; its expectations regarding the prefilled syringe launch's increase in patient impact and prescriber base; its financial strength to invest in sustainable innovation; its 2026 strategic priorities, including its goals to: (1) impact more patients with VYVGART through delivery of broadest MG label, IIM and ITP Phase 3 readouts, and expansion into rheumatology; (2) shape long-term future of FcRn, including advancement of combination approaches and 3 clinical-stage FcRn molecules; and (3) deliver next wave of innovation, including first Empa Phase 3 readout (MMN), 4 Phase 3 molecules, and 10 clinical molecules; its expectations regarding the MMN Total Addressable Market in the U.S. in 2030 and its plans to redefine treatment; its expectations regarding the continued growth in CIDP and its plans to redefine treatment and patient outcomes; its expectations regarding an increase in its presence in Myositis and Sjogren's Disease and its plans to redefine treatment and patient outcomes; its expectations regarding building a sustainable FcRn franchise, including Phase 3 ready ARGX-213, Phase 1 ARG-124, and its future molecules; its goal to deliver the next wave of immunology innovation, including the potential growth of the market in MMN beyond \$1 billion by 2030; the transformative potential across pipeline programs, including: (1) efgartigimod as the first and only Fc fragment in 15+ indications; (2) empasiprubarb as a potent C2 sweeping antibody in 3+ indications; (3) adimanebart as a MuSK agonist antibody in 3+ indications; (4) ARGX-213 as FcRn sustained IgG reduction in 15+ potential indications; and (5) ARGX-121 as IgA sweeping antibody in 3+ potential indications; the successful advancement of the next wave of molecules, including ARGX-121 and ARGX-213; the innovation model's generation of a world-class pipeline; the potential for 3 new Phase 1 programs in 2026; and the potential for significant value creation across 7 registrational programs, including: potential Phase 3 program data readouts for (1) efgartigimod in ocular in 1Q 2026, Myositis in 3Q 2026, ITP in 4Q 2026, and Sjogren's in the second half of 2027; (2) empasiprubarb in MMN in the second half of 2026 and CIDP in the second half of 2027; and potential approvals for AchR- gMG (MuSK+, LRP4+, triple seronegative) in the second half of 2026. By their nature, forward-looking statements involve risks and uncertainties and readers are cautioned that any such forward-looking statements are not guarantees of future performance. argenx's actual results may differ materially from those predicted by the forward-looking statements as a result of various important factors, including the results of argenx's clinical trials; expectations regarding the inherent uncertainties associated with the development of novel drug therapies; preclinical and clinical trial and product development activities and regulatory approval requirements in products and product candidates; the acceptance of argenx's products and product candidates by patients as safe, effective and cost-effective; the impact of governmental laws and regulations on our business, including tariffs, export controls, sanctions and other regulations on its business; disruptions caused on our reliance of third parties suppliers, service providers and manufacturing; inflation and deflation and the corresponding fluctuations in interest rates; and regional instability and conflicts. A further list and description of these risks, uncertainties and other risks can be found in argenx's U.S. Securities and Exchange Commission (the "SEC") filings and reports, including in argenx's most recent annual report on Form 20-F filed with the SEC as well as subsequent filings and reports filed by argenx with the SEC. Given these uncertainties, the reader is advised not to place any undue reliance on such forward-looking statements. These forward-looking statements speak only as of the date of publication of this document. argenx undertakes no obligation to publicly update or revise the information in this presentation, including any forward-looking statements, except as may be required by law.

This presentation contains trademarks, trade names and service marks of other companies, which are the property of their respective owners.



**“Before VYVGART Hytrulo I was struggling to walk to the end of the driveway, now I walk 10 miles a day. My activity level is where it was 10 years ago”\***

Sam, CIDP Patient



argen

\*Individual patient outcome; does not necessarily reflect typical patient experience

# Connecting Science and Patients to Unlock Infinite Opportunity

Science

Patients



OUR INNOVATION ENGINE IS POWERING

# VISION 2030

**50k**

Patients on  
Treatment

**10**

Labeled  
Indications

New Molecules  
in Phase 3

**5**



OUR INNOVATION ENGINE IS POWERING

# VISION 2030



# 2025 Product Net Sales of \$4.2 Billion

90%  
YoY growth\*



## Product net sales

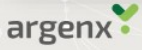
(in millions of \$)

FY 2025	FY 2024	Change
4,151	2,186	+90%
Q4 2025	Q4 2024	Change
1,286	737	+75%
Q4 2025	Q3 2025	Change
1,286	1,127	+14%

2025: First Year of Operating Profitability

\*Net sales growth % excludes the impact of FX

## Financial Strength to Invest in Sustainable Innovation



Q4 and FY 2025 selected financial information is preliminary, unaudited, and subject to adjustment

# 2026 Strategic Priorities



## Impact More Patients with VYVGART

Deliver broadest MG label

AIM and ITP Phase 3 readouts

Expand into rheumatology



## Shape Long-Term Future of FcRn

Advance combination  
approaches

3 Clinical-stage FcRn  
molecules



## Deliver Next Wave of Innovation

First empa Phase 3 readout  
(MMN)

4 Phase 3 molecules

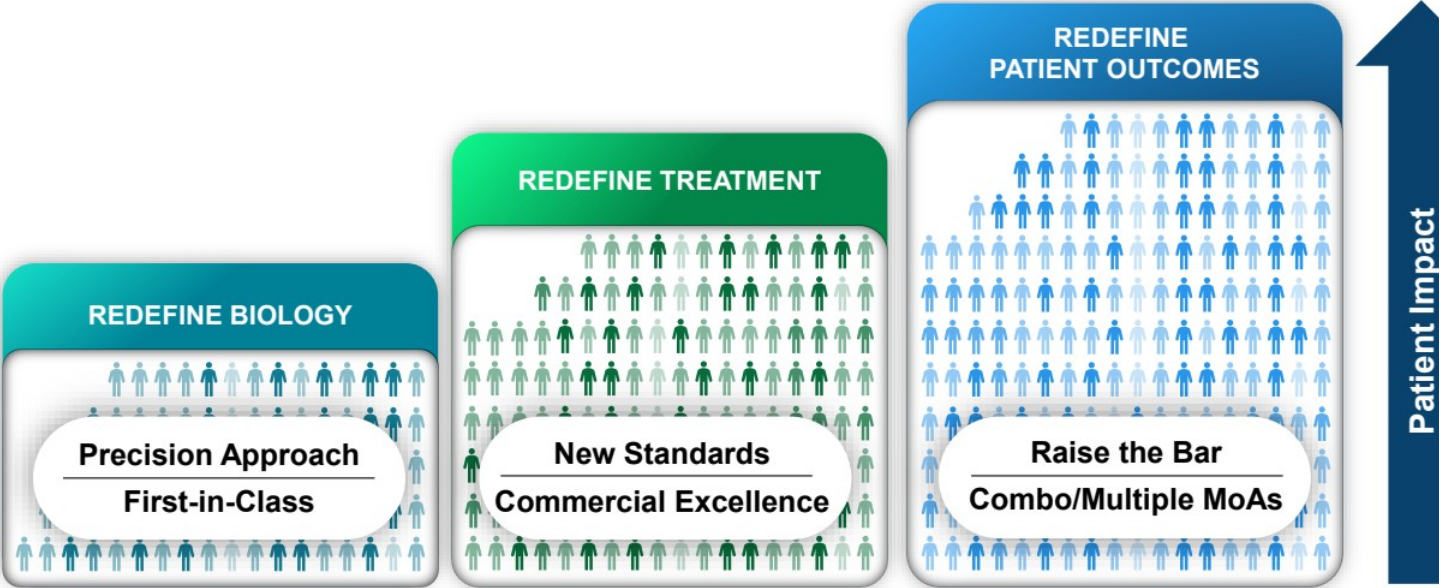
10 Clinical-stage molecules

**Impact More Patients with VYVGART**

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# Playbook for Indication Leadership with Precision Medicine



# Prefilled Syringe Launch is Increasing Patient Impact and Broadening Prescriber Base



Mary Beth, MG Patient

## #1 PRESCRIBED BIOLOGIC

VYVGART drove  
**60%**  
Growth in overall MG biologics share

## MG EXPANSION

**70%**  
Patients directly from orals  
**Earlier Line Patients**

## CIDP EXPANSION

**Achieved  
Blockbuster Status**  
as of 3Q 2025

## NEW PRESCRIBER AND PATIENT GROWTH

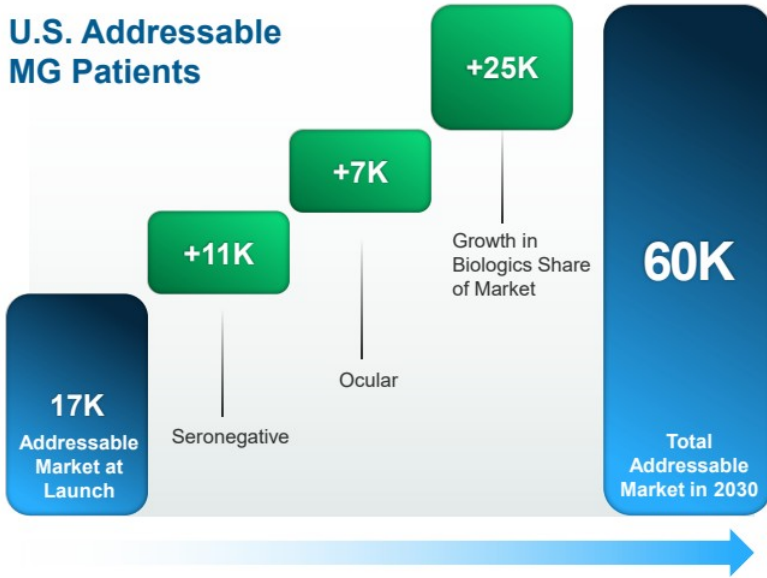
**>4,700**  
Prescribers in the US  
**20%** YoY increase in new prescribers

Source: argenx market research  
As of 4Q 2025 Financial Results

argen

# Building Durable Leadership with the Broadest Label in MG

## U.S. Addressable MG Patients



## Redefine Patient Outcomes

**Launch in Seronegative MG\***  
Limited current treatment options

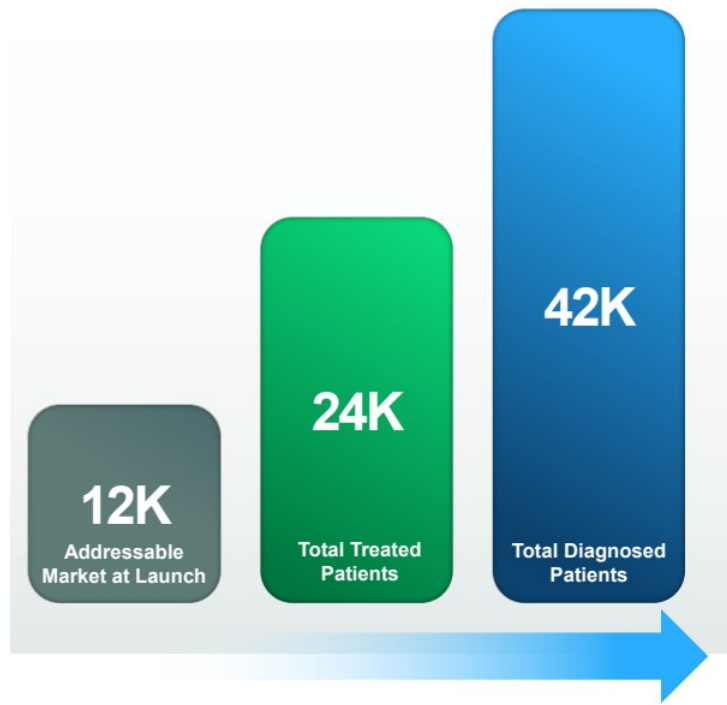
**Ocular MG Phase 3 Readout**  
First and only development in Ocular MG

**Empowering HCP Treatment Choice**  
Generating real world evidence

**Combination**  
Empasiprubart & efgartigimod

\* Pending decision on approval

# Clear Path to CIDP Market Expansion



## Redefine Treatment

### Evidence Generation

ADHERE+ Functional Benefit

### HCP Prescriber Growth

## Redefine Patient Outcomes

### Biomarker Exploration

IgG, IgM Autoantibodies

### Progressing Multiple MOAs

Co-positioning VYVGART & Empasiprubart

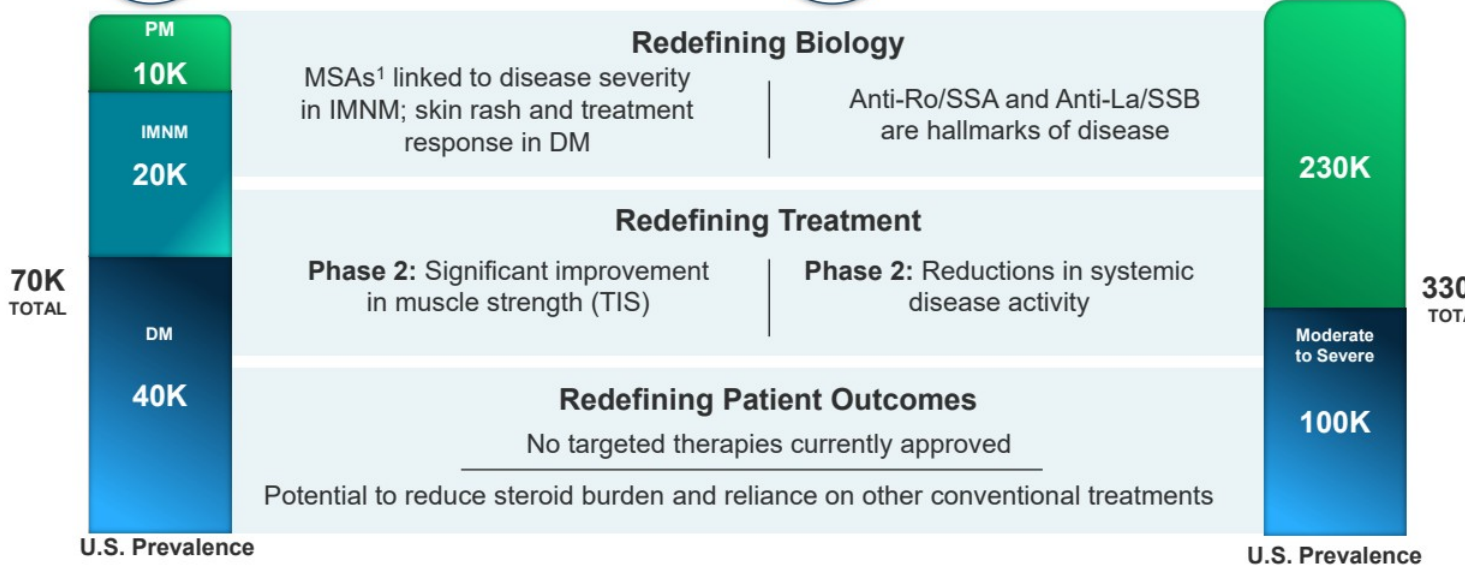
# Building our Presence in Rheumatology



## Autoimmune Myositis



## Sjögren's Disease



1.MSA: myositis specific antibodies (anti-SRP and -HMGR in IMNM, anti-Mi2 and -MDA5 in DM)

# Shape the Long-term Future of FcRn

argen

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# Building a Sustainable FcRn Franchise

Diversified FcRn portfolio elevating the patient experience across IgG-mediated diseases

## Today

Differentiated Efficacy and Patient Experience

VYVGART<sup>®</sup> VYVGART<sup>®</sup> Hytrulo

## Tomorrow

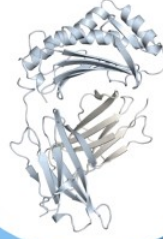
Enduring FcRn Leadership

ARGX-213  
Phase 3 ready

ARGX-124  
Phase 1

ARGX-XXX  
Future molecules

FcRn



Optimizing patient experience



PFS approved



Autoinjector  
Est 2027



Small volume delivery



Oral peptides

Exploring combination approaches

ADAPT Forward  
efgartigimod – empasiprubart

Broad immunology pipeline of combination approaches across multiple modalities

argenx

**Deliver Next Wave of Innovation**

argen

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# This will be a Pivotal Year for empasiprubart with First Phase 3 Readout in MMN

Market in MMN expected to grow beyond \$1B by 2030

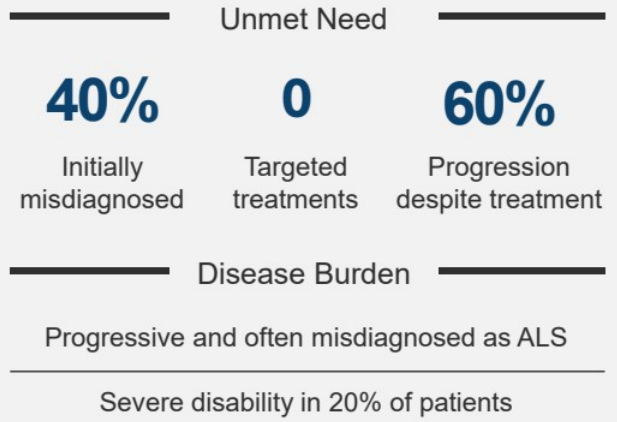


MMN Market



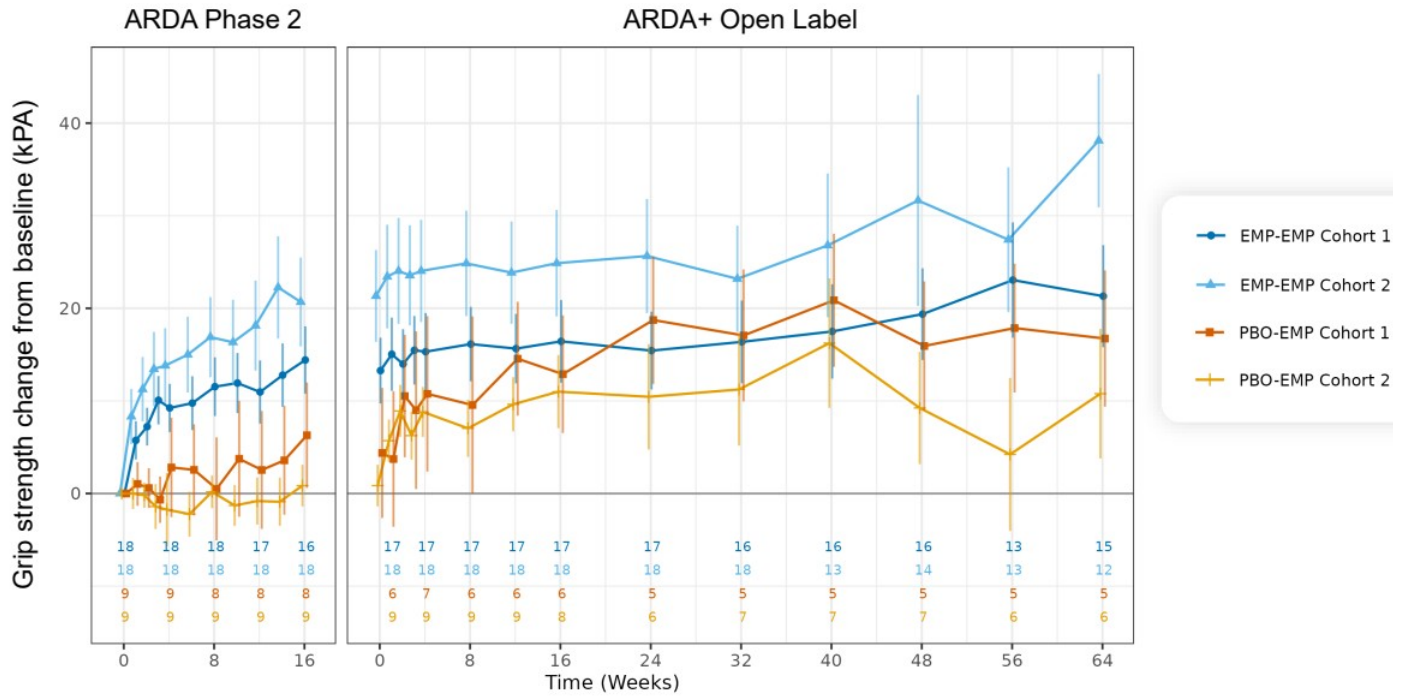
MMN

12k patients across key markets



1. PPTA, Takeda, CSL, argenx analysis  
argenx market research

# Empasiprubarb Sustained Improved Grip Strength in MMN



# Transformative Potential Across Pipeline Programs

Efgartigimod



First-in-class  
Fc Fragment

**15+**

Indications

Empasiprubart



Potent C2  
sweeping antibody

**3+**

Indications

Adimanebart



MuSK agonist  
antibody

**3+**

Indications

ARGX-213



FcRn: Sustained  
IgG reduction

**15+**

*Potential* indications

ARGX-121



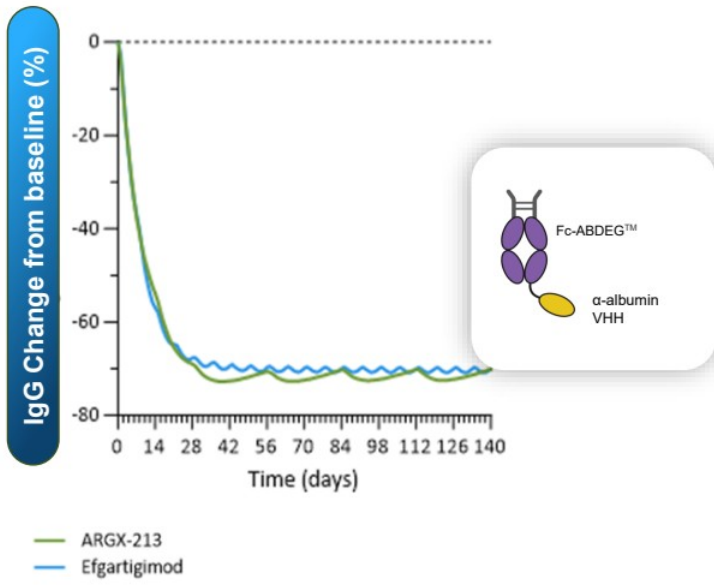
IgA Sweeping  
Antibody

**3+**

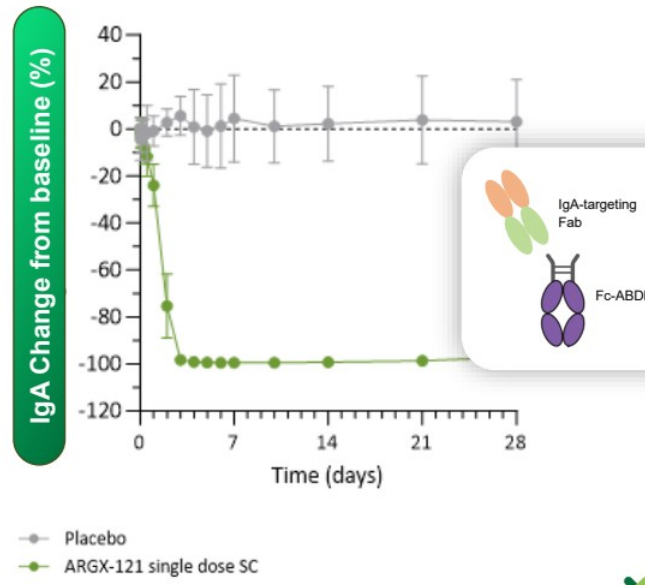
*Potential* indications

# Successfully Advancing Next Wave of Molecules

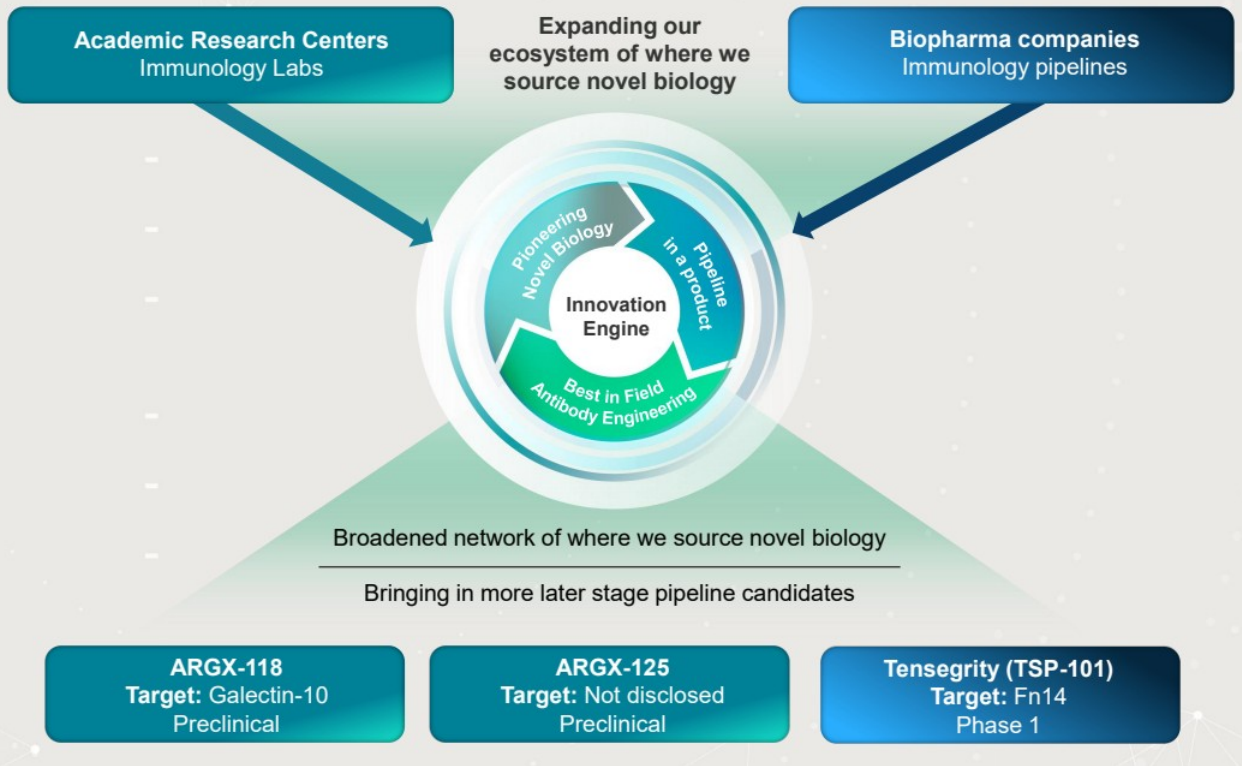
## ARGX-213: Convenient Monthly Dose Achieved



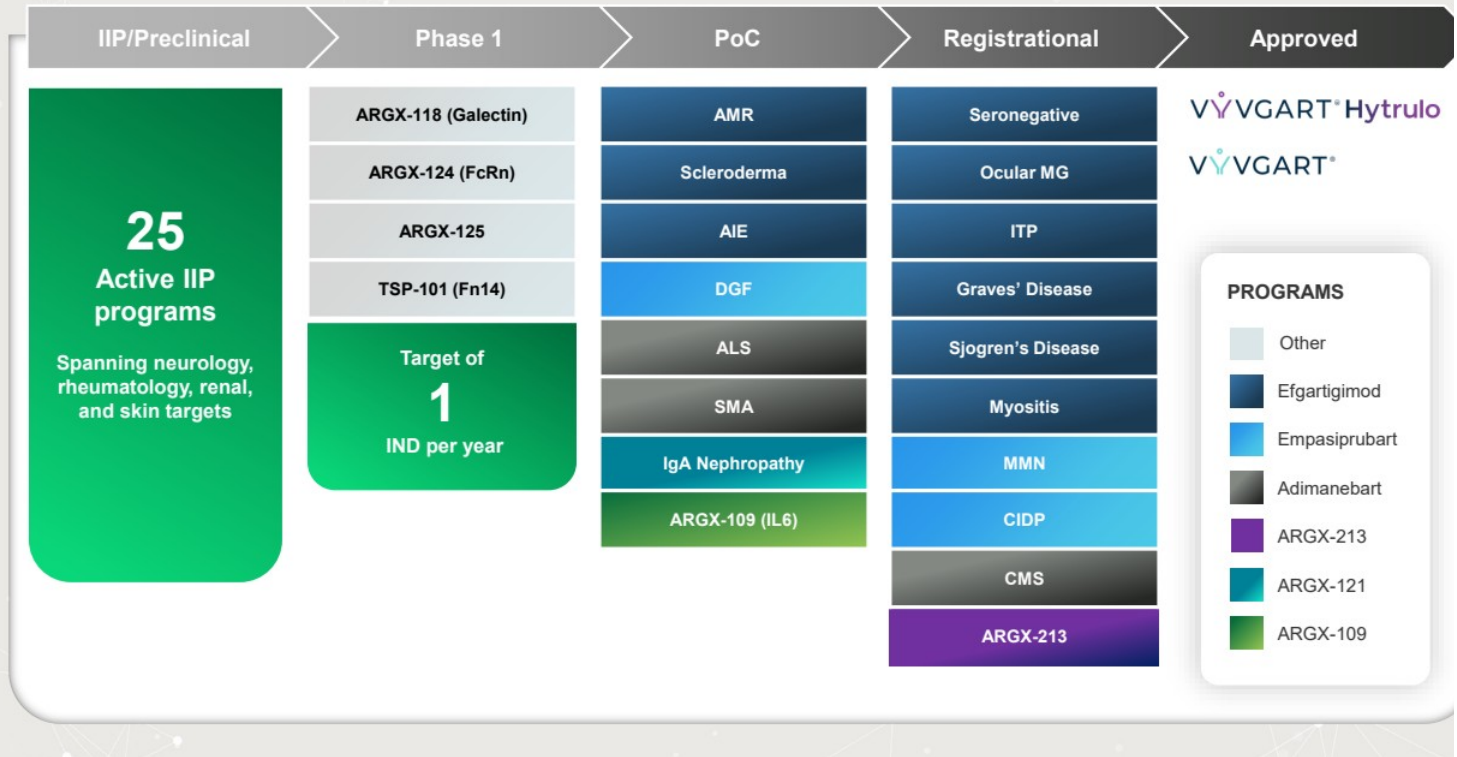
## ARGX-121: Rapid and Total IgA Depletion



# Three New Phase 1 Molecules in 2026



# Innovation Model Generating World-Class Pipeline



# 6 Registrational Readouts Over Next 24 Months

## Phase 3 Data Readouts

### EFGARTIGIMOD

Ocular	1Q 2026
Myositis	3Q 2026
ITP	4Q 2026
Sjogren's Disease	2H 2027

### EMPASIPRUBART

MMN	4Q 2026
CIDP	2H 2027

## Decision on Approval

**AChR- gMG (MuSK+, LRP4+, triple seronegative) by end of 2026**

# argenx: Continuous Innovation Engine

Pioneering  
Novel Biology

IIP

Pipeline  
in a product

Best in Field  
Antibody Engineering

IIP Programs

ARGX-121 — ARGX-109 | ARGX-118 — ARGX-125

Empasiprubarb — C2 | Adimanebart — MUSK

MG — CDP — ITP | Leadership In FcRn | VVGART — ARGX-213 — ARGX-124  
Myositis — Sjogren's Disease — Graves | AIE — Scleroderma — AMR

# Attractive De-Risked Profile of Phase 3 Studies



## Ocular MG

ADAPT ocular domain data  
Real-world case reports

MGII novel primary endpoint

## Myositis

ALKIVIA  
Proof of Concept

Heterogeneous disease TIS composite primary endpoint

## MMN

EMPASSION  
Proof of Concept

Head-to-head trial vs IVIg

## ITP

ADVANCE Phase 3 IV  
Real world data Japan  
Cumulative platelet count primary endpoint

Difficult-to-treat patients

## Sjogren's

RHO and DAHLIA:  
Proof of concept

Challenging primary endpoint