(Street) SAN

(City)

FRANCISCO

 $\mathsf{C}\mathsf{A}$

(State)

94104

(Zip)

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 32350104

Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

1			16(a) of the Securities Exchar the Investment Company Act		1934		_	
1. Name and Address of Reporting Person* BVF GP HOLDINGS LLC	2. Date of E Requiring S (Month/Day 06/01/202	tatement /Year)	3. Issuer Name and Ticker Merus N.V. [MRUS		Symbol			
(Last) (First) (Middle) 44 MONTGOMERY ST., 40TH FLOOR			4. Relationship of Reporting Issuer (Check all applicable) Director	g Person(s			f Amendment, ed (Month/Day,	Date of Original Year)
(Street) SAN FRANCISCO CA 94104			Officer (give title below)	_	(specify		Form filed Person	by One Reporting by More than One
(City) (State) (Zip)								
Та	ble I - Non	-Deriva	ive Securities Benefic	cially O	wned			
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: D (D) or In (I) (Insti	Direct ndirect		ture of Indire ership (Instr.	
Common Shares, (euro)0.09 nominal value per share ⁽¹⁾			1,804,105		I S		See footnote ⁽²⁾	
Common Shares, (euro)0.09 nominal va	ılue per shar	e ⁽¹⁾	1,386,889]	I	See	footnote ⁽³⁾	
			e Securities Beneficia ints, options, convert)		
1. Title of Derivative Security (Instr. 4) 2. Dat Expira (Mont			3. Title and Amount of S Underlying Derivative Se (Instr. 4)		4. Convers	ercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Price of Derivati Security	ive	Direct (D) or Indirect (I) (Instr. 5)	5)
1. Name and Address of Reporting Person* BVF GP HOLDINGS LLC								
(Last) (First) (Mic 44 MONTGOMERY ST., 40TH FLOC	•							
(Street) SAN FRANCISCO CA 941	04							
(City) (State) (Zip))							
1. Name and Address of Reporting Person* BVF I GP LLC								
(Last) (First) (Mic 44 MONTGOMERY ST., 40TH FLOC	•							

1. Name and Addre		erson*					
(Last) (First) (Middle) 44 MONTGOMERY ST., 40TH FLOOR							
(Street) SAN FRANCISCO	CA	94104					
(City)	(State)	(Zip)					

Explanation of Responses:

- 1. This Form 3 is filed jointly by BVF I GP LLC ("BVF GP"), BVF II GP LLC ("BVF2 GP") and BVF GP HOLDINGS LLC ("BVF GPH", and together with BVF GP and BVF2 GP, the "Reporting Persons"). Each of the Reporting Persons is a member of a Section 13(d) group that collectively owns more than 10% of the Issuer's outstanding Common Shares. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein except to the extent of its pecuniary interest therein.
- 2. Securities owned directly by Biotechnology Value Fund, L.P. ("BVF"). As the general partner of BVF, BVF GP may be deemed to beneficially own the securities owned directly by BVF. As the sole member of BVF GP, BVF GPH may be deemed to beneficially own the securities owned directly by BVF.
- 3. Securities owned directly by Biotechnology Value Fund II, L.P. ("BVF2"). As the general partner of BVF2, BVF2 GP may be deemed to beneficially own the securities owned directly by BVF2. As the sole member of BVF2 GP, BVF GPH may be deemed to beneficially own the securities owned directly by BVF2.

BVF I GP LLC, By: BVF **GP HOLDINGS LLC, its**

sole member, By: /s/ Mark 06/03/2020

N. Lampert, Chief

Executive Officer

BVF II GP LLC, By: BVF

GP HOLDINGS LLC, its

sole member, By: /s/ Mark 06/03/2020

N. Lampert, Chief

Executive Officer

BVF GP HOLDINGS

LLC, By: /s/ Mark N.

06/03/2020 Lampert, Chief Executive

Officer

** Signature of Reporting

Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 5 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.