Merus

Pioneering Bispecific Antibodies

Ton Logtenberg, Founder President and Chief Executive Officer

June 4, 2019

Disclaimer

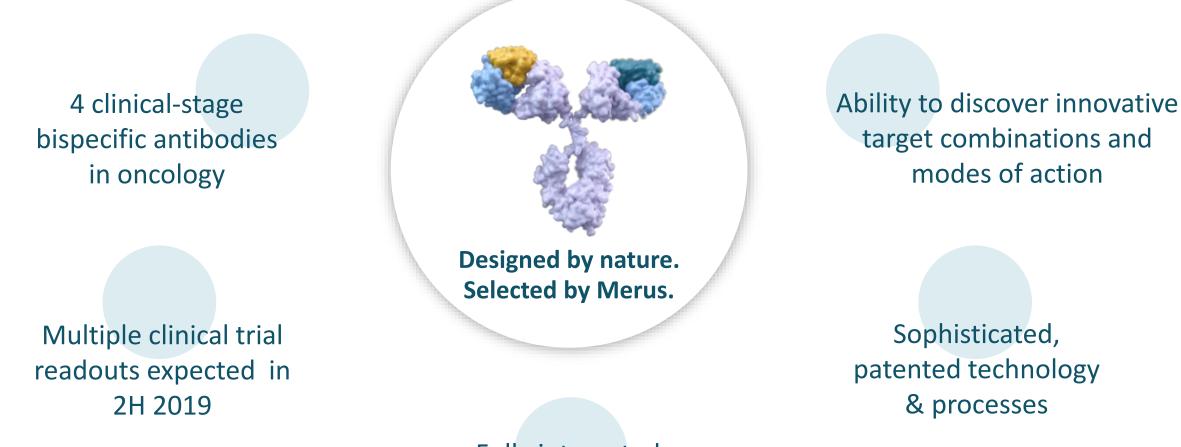
This presentation (including any oral commentary that accompanies this presentation) contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. All statements contained in this presentation that do not relate to matters of historical fact should be considered forward-looking statements, including without limitation statements regarding the impact our Biclonics[®] platform can have on cancer, our product candidates' potential to treat certain types of tumors, the timing of regulatory filings and the timing and anticipated data read outs or results from our clinical trials. These forward-looking statements are based on management's current expectations. These statements are neither promises nor guarantees, but involve known and unknown risks, uncertainties and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements, including, but not limited to, the following: we have incurred significant losses, are not currently profitable and may never become profitable; our need for additional funding, which may not be available and which may require us to restrict out operations or require us to relinquish rights to our technologies or bispecific antibody candidates; potential delays in regulatory approval, which would impact our ability to commercialize our product candidates and affect our ability to generate revenue; the unproven approach to therapeutic intervention of our Biclonics® technology; our limited operating history; economic, political, regulatory and other risks involved with international operations; the lengthy and expensive process of clinical drug development, which has an uncertain outcome; the unpredictable nature of our

early stage development efforts for marketable drugs; potential adverse public reaction to the use of cancer immunotherapies; potential delays in enrollment of patients, which could affect the receipt of necessary regulatory approvals; failure to obtain marketing approval internationally; failure to compete successfully against other drug companies; potential competition from other drug companies if we fail to obtain orphan drug designation or maintain orphan drug exclusivity for our products; our reliance on third parties to conduct our clinical trials and the potential for those third parties to not perform satisfactorily; our reliance on third parties to manufacture our product candidates, which may delay, prevent or impair our development and commercialization efforts; protection of our proprietary technology; our patents being found invalid or unenforceable; potential lawsuits for infringement of third-party intellectual property; our ability to attract and retain key personnel; managing our growth could result in difficulties; and we may lose our foreign private issuer status and incur significant expenses as a result.

These and other important factors discussed under the caption "Risk Factors" in our Annual Report on Form 20-F filed with the Securities and Exchange Commission, or SEC, on April 3, 2019, and our other reports filed with the SEC, could cause actual results to differ materially from those indicated by the forwardlooking statements made in this presentation. Any such forward-looking statements represent management's estimates as of the date of this presentation. While we may elect to update such forward-looking statements at some point in the future, we disclaim any obligation to do so, even if subsequent events cause our views to change.



Merus: Pioneering Bispecific Antibodies Since 2006



Fully integrated discovery-to-manufacturing capabilities

Merus

The Next Wave of Antibodies in Cancer Treatment

MONOCLONAL ANTIBODIES Game-changing impact, but limited success combining multiple mAbs for greater efficacy

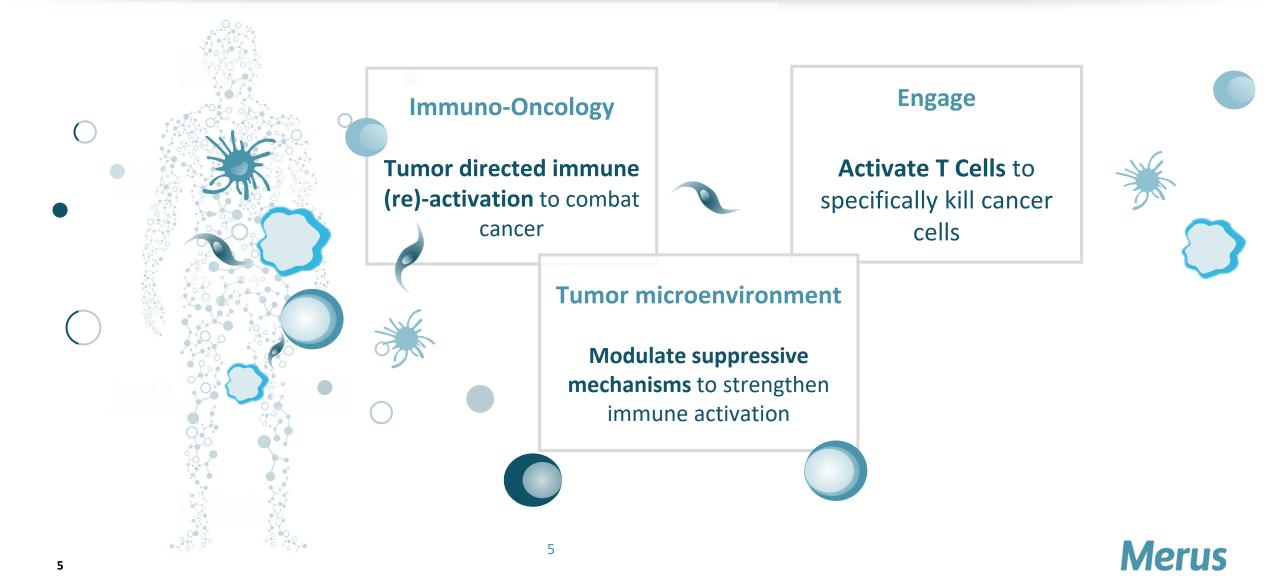
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BISPECIFIC ANTIBODIES Offering novel modes of action and new biology

High Potential for Cancer Immunotherapy and More



Merus' Areas of Strategic Focus



Biclonics[®] — Designed by Nature. Selected by Merus.

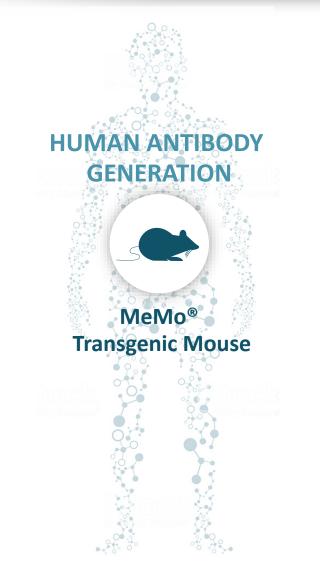
BICLONICS®

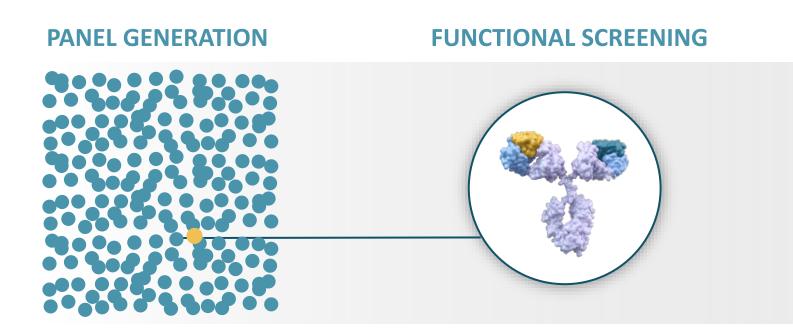
Merus' Bispecific Antibody Format produced by a single cell

Common Light Chain for 'unforced', natural pairing with 2 different heavy chains Electrostatic attraction to efficiently drive formation of Biclonics®



Biclonics[®] — Designed by Nature. Selected by Merus.

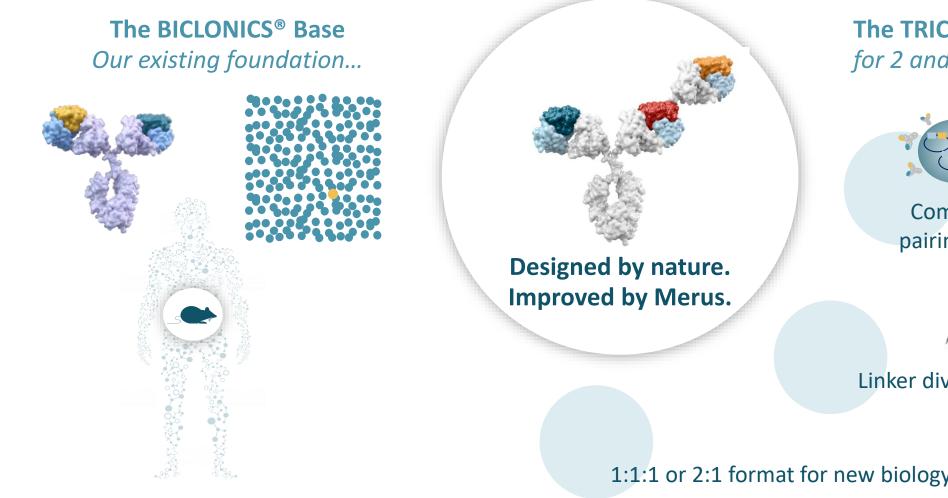




We create up to 1,000 Biclonics[®] against any target pair of choice We use functional screening in cell-based assays to identify Biclonics[®] with novel modes of action



Proprietary Triclonics™ Platform: .. Evolution Continues



The TRICLONICS[™] Platform for 2 and 3 different targets



Common light chain for unforced pairing with 3 (different) V_{H} regions



Linker diversity for added functionality

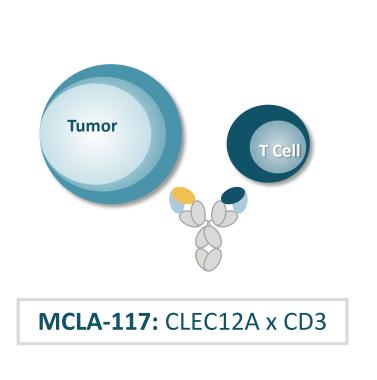
1:1:1 or 2:1 format for new biology/modes of action



Biclonics® Recruit Innate & Adaptive Immunity To Kill Tumors

Our Optimal Target Pairs Have First or Best in Class Potential

DUAL TUMOR TARGETING

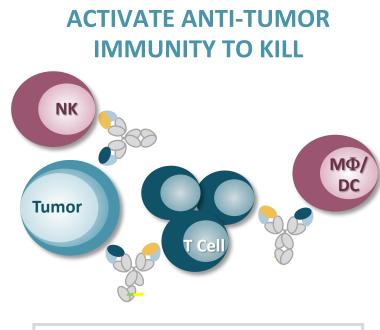


T CELL ENGAGE AND KILL

TO RECRUIT AND KILL

MCLA-128: HER3 x HER2

MCLA-129: EGFR x c-MET



MCLA-145: CD137 x PD-L1



Leading Clinical Pipeline with Multiple 2019 Milestones

WHOLLY-OWNED	TARGETS	INDICATION / DRUG COMBINATION	PRE-IND	PHASE 1	PHASE 2	
MCLA-128 HER3 x HER2		Solid tumors (monotherapy)*			• 2Н 2019	
	Metastatic Breast (2 cohorts)				2H 2019	
MCLA-117	CLEC12A x CD3	Acute Myeloid Leukemia (AML)		(2 H 2019	
MCLA-158	Lgr5 x EGFR	Solid tumors			YE 2019	

COLLABORATIONS

MCLA-145	CD137 x PD-L1	Solid tumors	(ex- U.S.)		May 9 2019
MCLA-129	EGFR x c-MET	Solid tumors	(China)		
	Undisclosed	Autoimmune disease	10		
	Undisclosed	Autoimmune disease	no		
10 *Phase 1/2 Trial	• =	Expected data read out or tr	ial update	= First patient dosed	Merus

MCLA-145 – CD137 x PD-L1

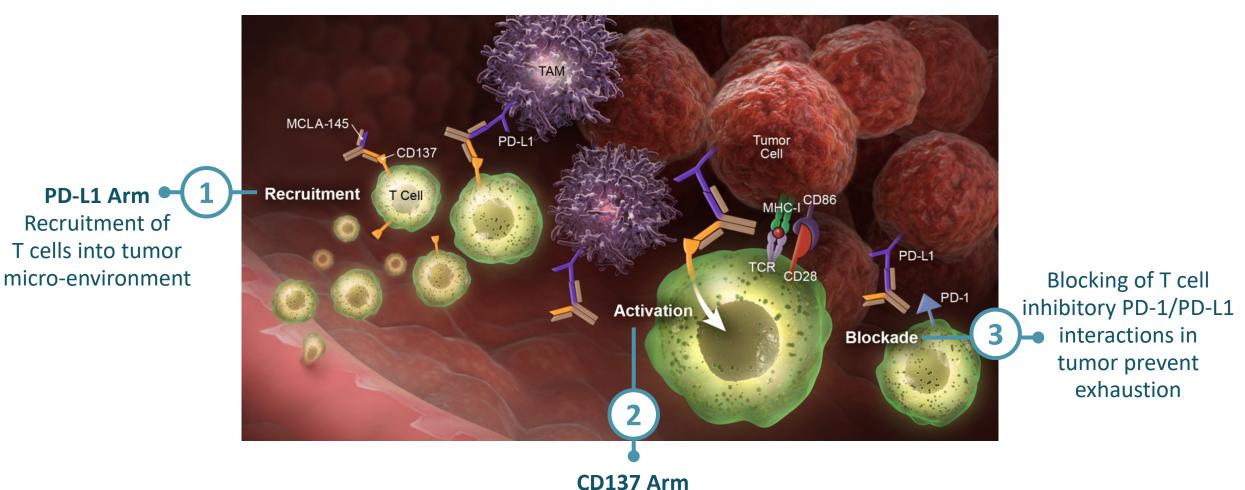
Potent triple action designed to recruit and activate T cells and prevent their exhaustion for patients with solid tumors



Phase 1 First Patient Treated May 9 2019



MCLA-145 – Triple Activity by a Single Biclonics[®]



Potent activation of T cells in tumor



MCLA-145 – Demonstrated Potent T Cell Activation

• Binds to PD-L1 and CD137

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- Preclinical work demonstrates
 - recruitment of T cells into the tumor
 - blocking of inhibitory PD-1/PD-L1 axis
 - potent T cell activation
- Potential to overcome the known side effects of CD137 agonists in development

MCLA-145 preclinical data presented at AACR 2019

[IL-2](pg/mL) MCLA-145 5000-CD137 mAb \Lambda CD137 mAb ^ + PD-L1 mAb * 4000. ✤ Neg Ctrl Ab ^ Urelumab Analog 3000-Atezolizumab Analog * 2000 1000-10-1 10° 10¹ 10^{2} 103 104 105 IgG concentration (ng/mL)

PRIMARY T CELL TRANSACTIVATION ASSAY

Experiment Conditions: T cells PBMC donor stimulated with antibody in the presence of PD-L1 on CHO cells. Antibody added to pre-coated anti-CD3 clone OKT3 plates. Purified T cells, CHO-PD-L1 cells added and incubated for 72 hrs at 37°C. Readout IL-2.



MCLA-145 – Phase 1 Trial Initiated May 2019

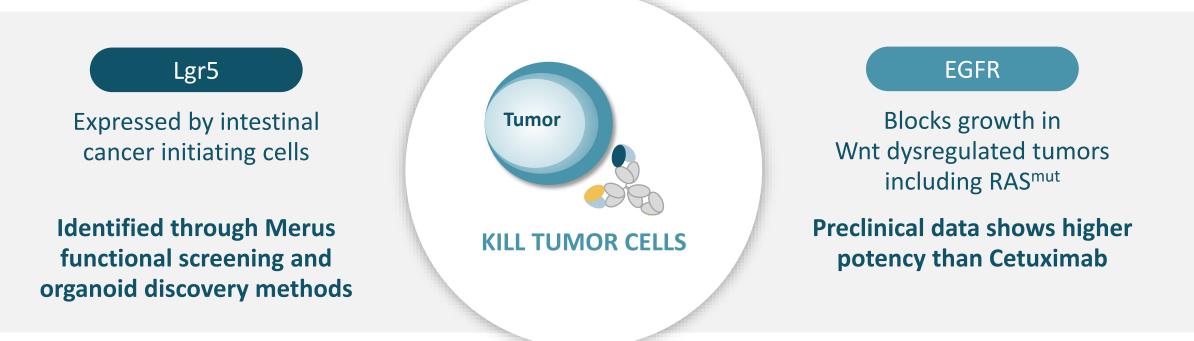
	TARGETS	INDICATION / DRUG COMBINATION	PRE-IND	PHASE 1	PHASE 2
MCLA-145	CD137 x PD-L1	Solid tumors			May 9 2019

DESIGN	ENDPOINTS	STATUS
 Global open-label, multicenter dose escalation w/ dose expansion phase Patients with advanced solid tumors 	 Primary endpoint: dose finding, safety and tolerability Secondary endpoint: single-agent preliminary activity 	 IND cleared January 2019 First patient dosed May 9 2019



MCLA-158 – Lgr5 x EGFR

Potential to be first colorectal cancer treatment to block growth of tumors with RAS mutations (~50% of patients), a high unmet need

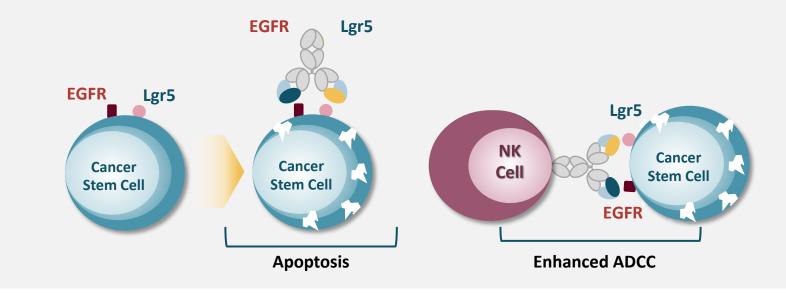


Emerging Phase 1 data expected end of 2019



MCLA-158 – Differentiated Target and MOA

MCLA-158 Mechanism of Action

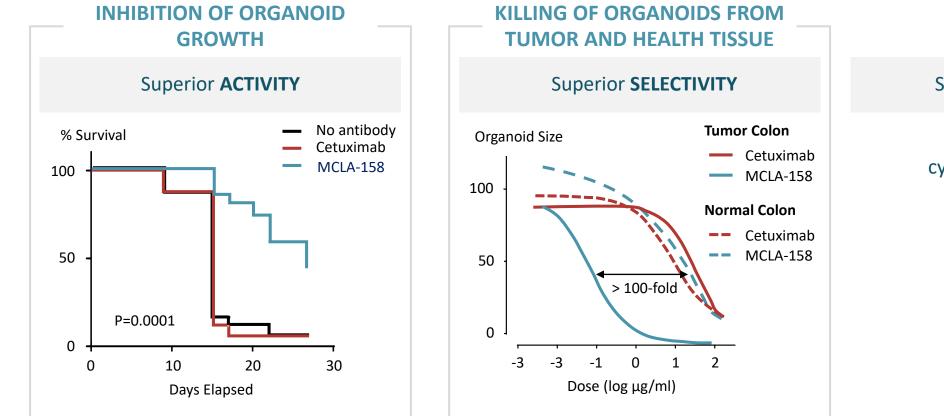


- MCLA-158 designed to eliminate cancer initiating cells that cause growth and metastasis
- Lgr5+ cells are the origin of gastrointestinal cancer
- EGFR x Lgr5 induces apoptosis, potently blocks EGFR signaling in Wnt dysregulated solid tumors



MCLA-158 – Key Preclinical Results in Colorectal Cancer (CRC)

Demonstrated Superior Growth Inhibition, Tolerability and Selectivity of Tumor vs. Healthy Tissue



Superior TOLERABILITY

No skin rash in cynomolgus monkeys



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MCLA-158 – Phase 1 Trial

	TARGETS	INDICATION / DRUG COMBINATION	PRE-IND	PHASE 1	PHASE 2
MCLA-158	MCLA-158 Lgr5 x EGFR Solid tumors				YE 2019

DESIGN	ENDPOINTS	STATUS
 Global open-label, multicenter dose escalation w/ safety dose expansion phase Patients with solid tumors Initial focus on metastatic colorectal cancer 	 Primary endpoint: safety and tolerability of defined dose Secondary endpoint: single-agent preliminary anti-tumor activity 	 On track Emerging data expected YE 2019



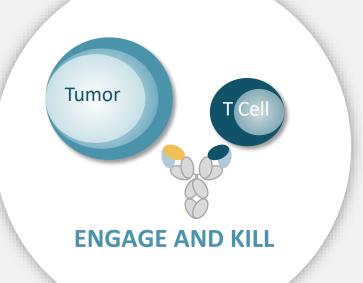
MCLA-117 – Harnessing the Killing Power of T Lymphocytes

MCLA-117 efficiently activates and redirects T cells to kill CLEC12A-expressing AML (stem) cells

CLEC12A

Expressed by tumor (stem) cells in ~ 90-95% of AML patients

Expression restricted to hematopoietic system = less off-tumor toxicity



CD3

Low affinity CD3 arm and silenced Fc for controlled T cell activation to avoid toxicity

Balanced strategy for activity and safety

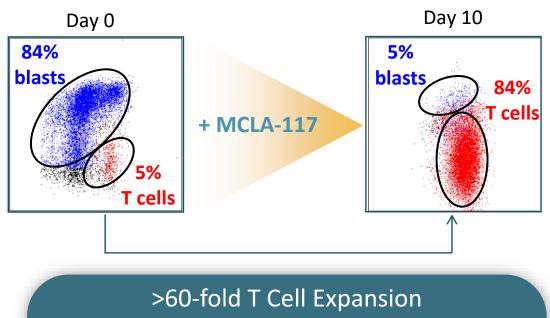
Preliminary anti-tumor activity observed Data readout expected 2H 2019



MCLA-117 – Demonstrated Controlled, Potent Activation of T Cells in Preclinical Studies

- MCLA-117 efficiently activates and redirects T cells to kill CLEC12A-expressing AML(stem) cells
- Designed to spare the formation of platelets and red blood cells during therapy
- Active across AML patient subpopulations

MCLA-117 MEDIATED ACTIVATION OF T CELLS AND KILLING OF TUMOR CELLS



>90% AML Tumor Cell Killing



MCLA-117 – Phase 1 Trial

	TARGETS	INDICATION / DRUG COMBINATION	PRE-IND	PHASE 1	PHASE 2
MCLA-117	CLEC12A x CD3	Acute Myeloid Leukemia (AML)			2 H 2019

DESIGN	ENDPOINTS	STATUS
 Single-arm, open-label, dose escalation w/ safety dose expansion Up to 50 patients with relapsed / refractory AML Starting dose determined using MABEL dose escalation requirements 	 Primary Endpoints: safety, tolerability Secondary Endpoints: PK/PD, anti- tumor response, clinical benefit 	 Ongoing in Europe and the U.S., with several additional trial sites opened end of 2018 Preliminary anti-tumor activity has been observed Data expected 2H 2019



MCLA-128 – HER3 x HER2

Unique DOCK & BLOCK[®] approach potently inhibits tumor cell growth and survival; In clinic for multiple solid tumor indications

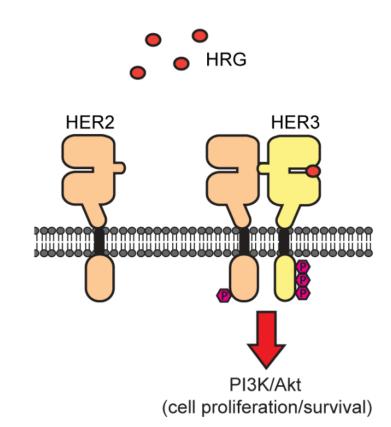
Block HER3Blocks signaling even in high
heregulin stress environmentsTumorKILL TUMOR CELLSKILL TUMOR CELLSCombinations with HER2
targeted therapies possible

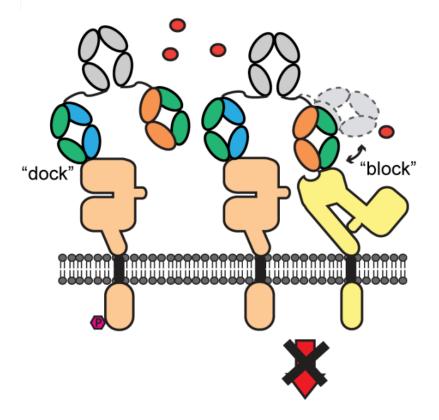
Metastatic Breast Cohort Phase 2 Trial Update Expected 2H 2019 Solid Tumor Monotherapy Phase 1/2 Trial Update Expected 2H 2019

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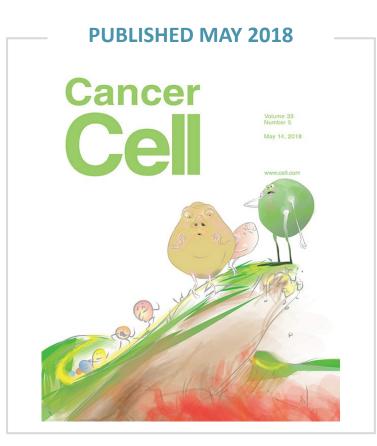
MCLA-128 – Potently Inhibiting the HER3 Signaling Pathway, a Known Driver of Tumor Growth and Survival

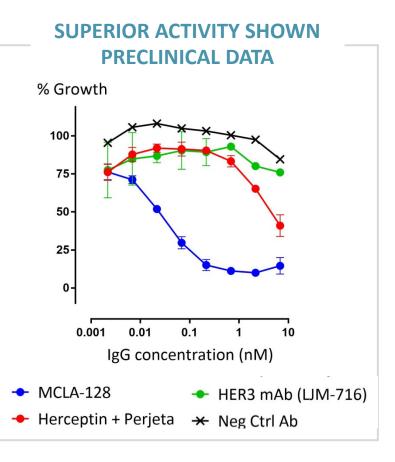






MCLA-128 – Potently Inhibits Heregulin-Driven Growth





SAFETY AND TOLERABILITY DEMONSTRATED IN PHASE 1/2 TRIAL

>100 PATIENTS EVALUATED

MCLA-128 Dosing: 750 mg q3w

- Single agent well tolerated
- Low risk for immunogenicity



MCLA-128 – Phase 1/2 in Solid Tumors, Phase 2 in Combo MBC

WHOLLY-OWNED	TARGETS	INDICATION / DRUG COMBINATION	PRE-IND	PHASE 1	PHASE 2
		Solid tumors (monotherapy)*			2Н 2019
MCLA-128	HER3 x HER2	Metastatic Breast (2 cohorts)			🔶 2Н 20

	DESIGN	ENDPOINTS	STATUS
Solid Tumors (Monotherapy)	Phase 1/2 Study Phase 1 : dose escalation Phase 2 : exploration in solid tumor cohorts	 Safety, preliminary anti- tumor activity 	 Well tolerated Clinical POC established in MBC Clinical POC established in Gastric Trial update 2H 2019
Metastatic Breast Cancer (MBC)	Phase 2 Study in combination with 2 cohorts in MBC Cohort1: HER2+ (MCLA-128 + Herceptin + Chemo) Cohort2: ER+/HER2 ^{low} (MCLA-128 + Hormone Therapy) Size: up to 120 patients in U.S. and Europe Dose: 750mg every 3 weeks	Clinical benefit at 24 weeks	• Trial update 2H 2019

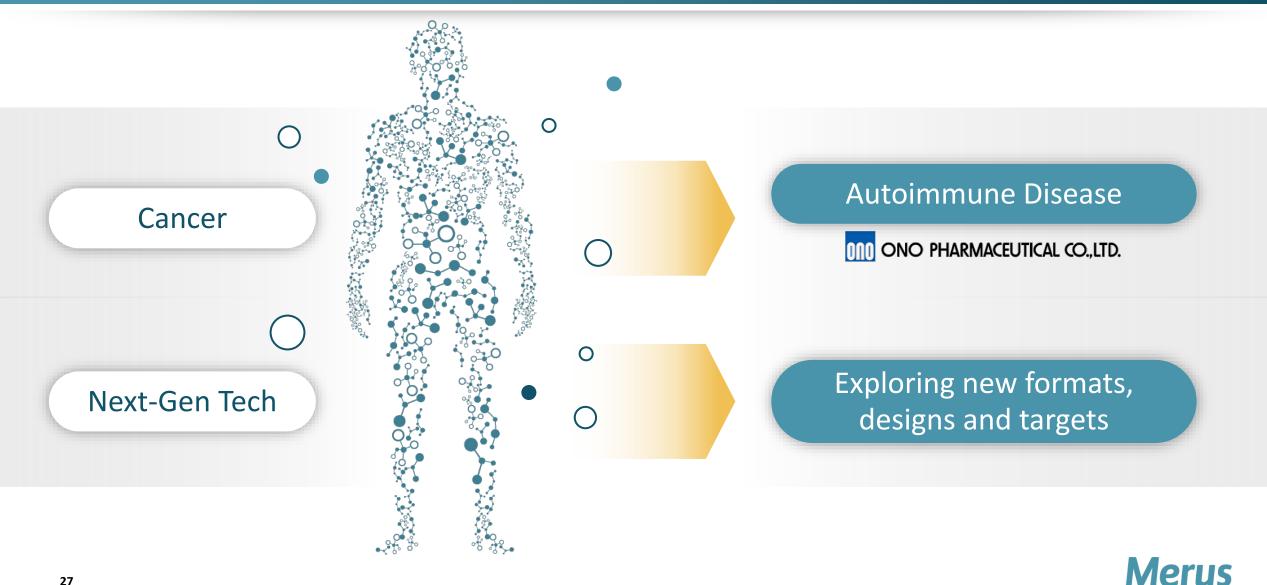
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Leading Collaborators Increasing Biclonics[®] Reach

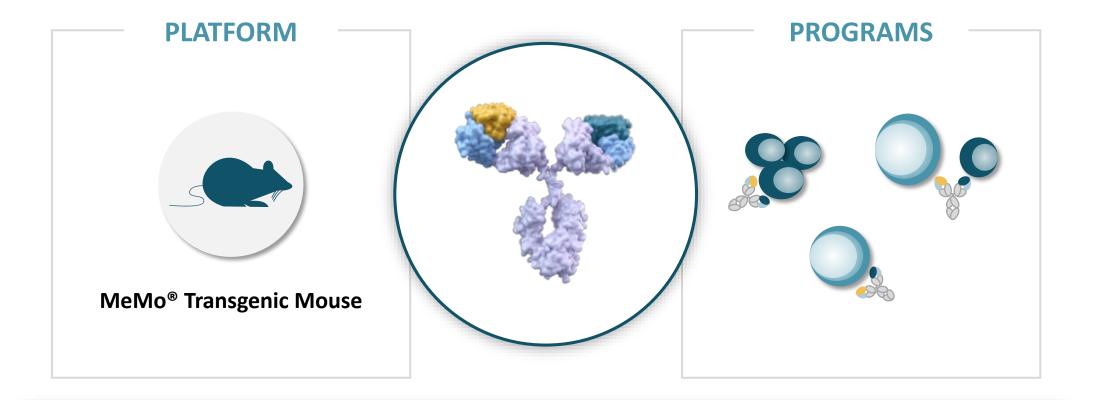




Expanding Biclonics[®] Platform



Strong Intellectual Property Positioning



Uniquely positioned to develop innovative bispecific antibody therapeutics

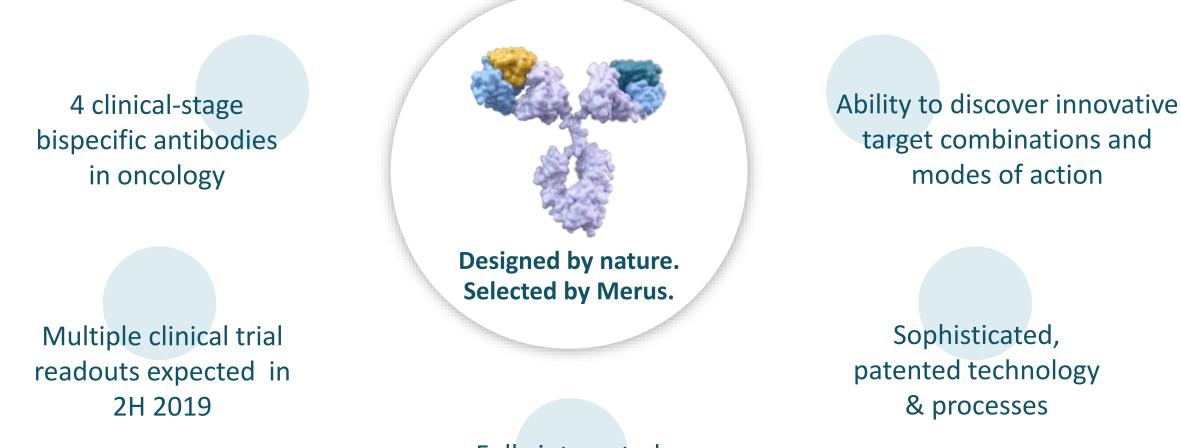


Multiple 2019 Milestones Anticipated





Merus: Pioneering Bispecific Antibodies Since 2006



Fully integrated discovery-to-manufacturing capabilities

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Pioneering Bispecific Antibodies

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