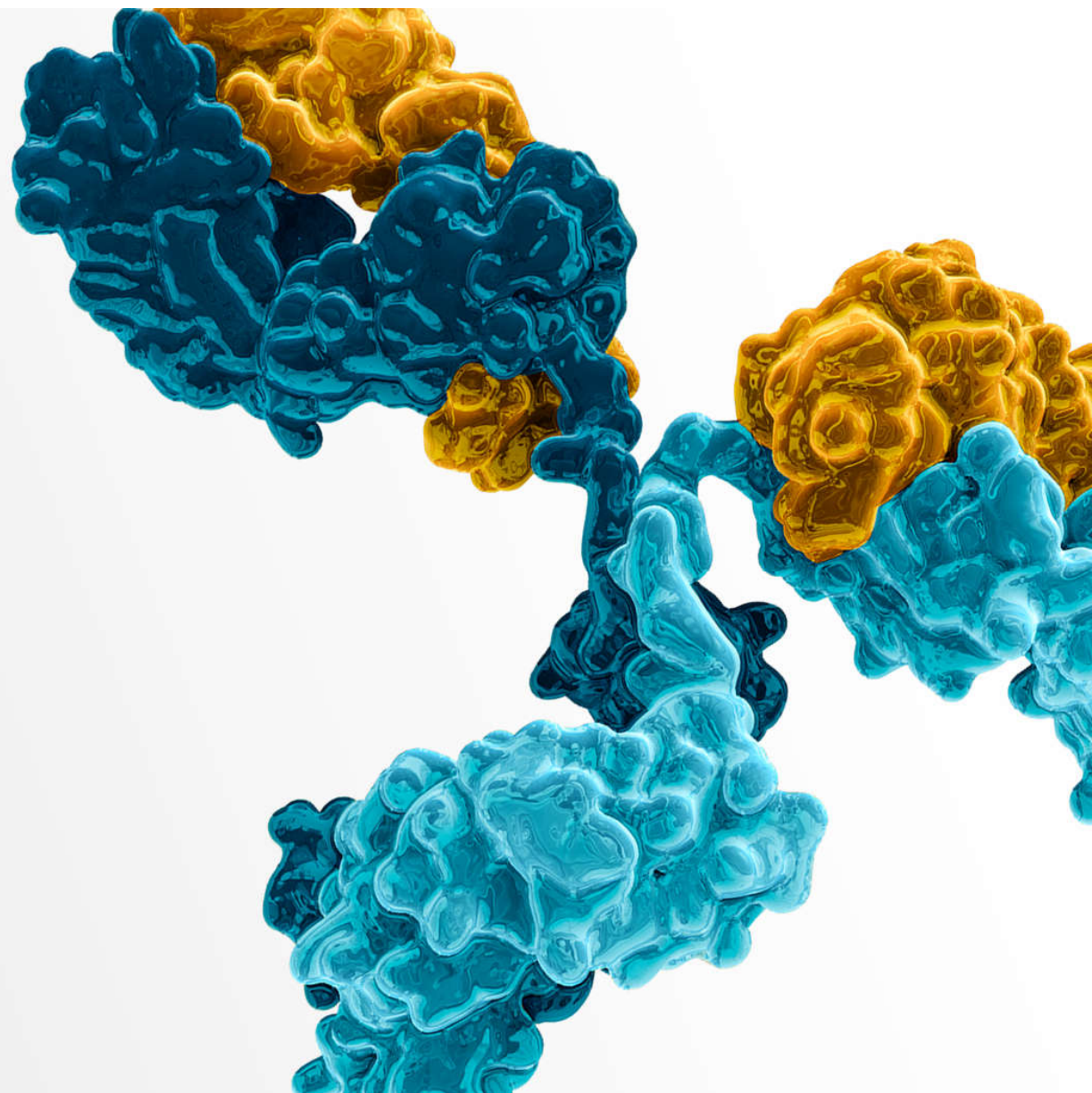


Merus

Closing In On Cancer

November 2020



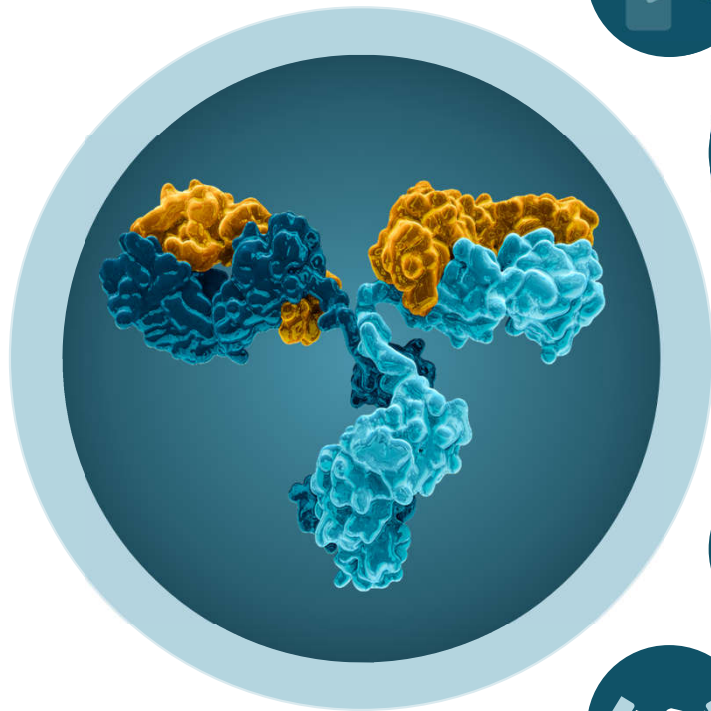
Disclaimer

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 Biclomics® 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 and our collaborations. 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 our operations or require us to relinquish rights to our technologies or bispecific antibody candidates; potential delays in regulatory approval and impacts of the COVID-19 pandemic, 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 Biclomics®, and Triclomics™ 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 in our Quarterly Report on Form 10-Q for the quarterly period ended September 30, 2020 filed with the Securities and Exchange Commission, or SEC, on November 5, 2020, and our other reports filed with the SEC, could cause actual results to differ materially from those indicated by the forward-looking 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 Overview



Oncology-focused Company Developing Multispecific Antibody Therapies

Bispecific and trispecific cancer therapeutic candidates based on the human IgG format



Established Clinical Pipeline

Clinical proof-of-concept with zenocutuzumab (“Zeno”) in patients with neuregulin 1 (NRG-1) gene fusion (NRG1+) cancers



Near Term Data Readouts and Strong Cash Position into 2H 2022

Zeno NRG-1 phase 1/2 clinical data 2Q 2021



Leading Multispecific Antibody (Multiclronics®) Platforms

Common light chain format permits broad high throughput Biclronics® and Triclronics™ discovery

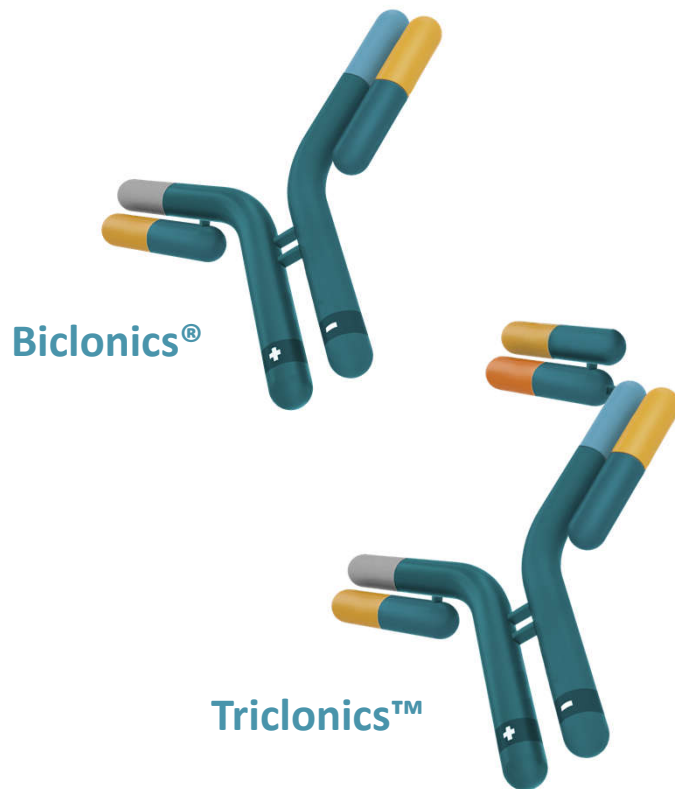


Strategic Collaborations to Unlock Platform Value

Multiple strategic collaborations and license agreements





Merus Multiclonics®

Bispecific and Trispecific Cancer Therapeutic Candidates in Human Monoclonal Antibody Formats



- Large-scale screening to select from up to 1,000s of candidates
 - Potential to identify best and new biological combinations
- Fully human IgG format allows for:
 - Ease of manufacturing
 - Low immunogenicity risk
 - Predictable *in vivo* behavior
 - Durable, consistent half life
 - Potential for ADCC enhancement and Fc silencing
- Robust IP portfolio: patents covering Multiclonics® technology, including common light chain antibody generation and dimerization by charge engineering

Merus Clinical Pipeline

PROGRAM	BISPECIFIC TARGETS	INDICATION(S)	PRECLINICAL	PHASE 1	PHASE 1/2	STATUS
Zenocutuzumab (Zeno) (MCLA-128)	HER3 x HER2	NRG1+ Pancreatic NRG1+ Lung NRG1+ Other solid tumors				Phase 1/2 trial ongoing Clinical data and program update planned 2Q 2021
MCLA-158	Lgr5 x EGFR	Solid tumors				Phase 1 Trial Ongoing Update planned YE 2020
MCLA-145	CD137 x PD-L1	Solid tumors	 (ex- U.S.)			Phase 1 Trial Ongoing
MCLA-129	EGFR x c-MET	Solid tumors	 (China)			First patient planned to be dosed 2021
ONO-4685*	PD-1 x CD3	Autoimmune disease				Phase 1 Trial Ongoing
....*	Undisclosed	Autoimmune disease				

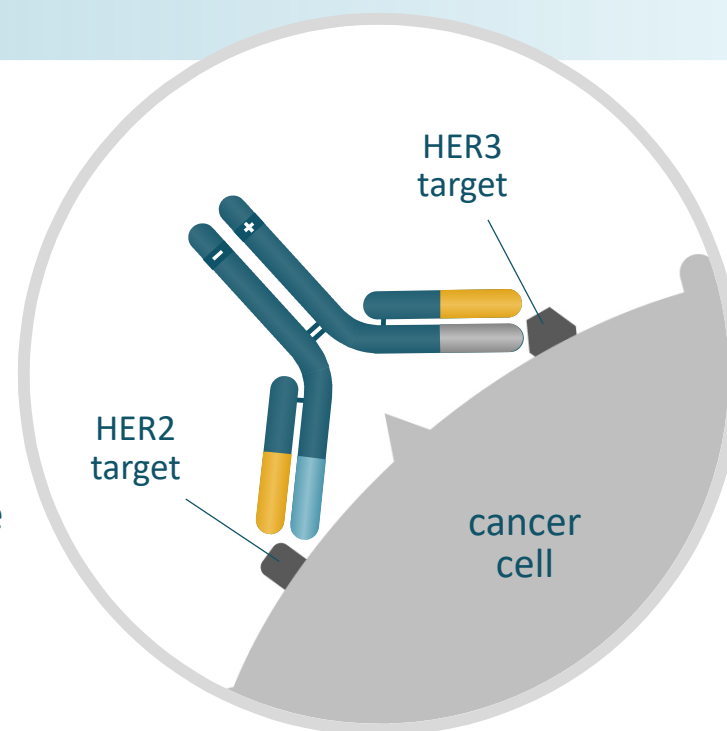
* If commercialized, Merus to receive royalties

Promising early clinical activity in patients with NRG1+ cancers

- Significant unmet need in previously treated pancreatic and non-small cell lung cancers
- NRG-1 gene fusions (NRG1+) are rare genetic events occurring in lung, pancreatic and other solid tumors
- Unique DOCK & BLOCK® mechanism of Zeno potentially inhibits NRG1+-driven tumor growth
- Enhanced ADCC mediates tumor elimination by immune effector cells
- eNRGy Trial enrolling and Early Access Program ongoing
- Clinical data and program update expected 2Q 2021

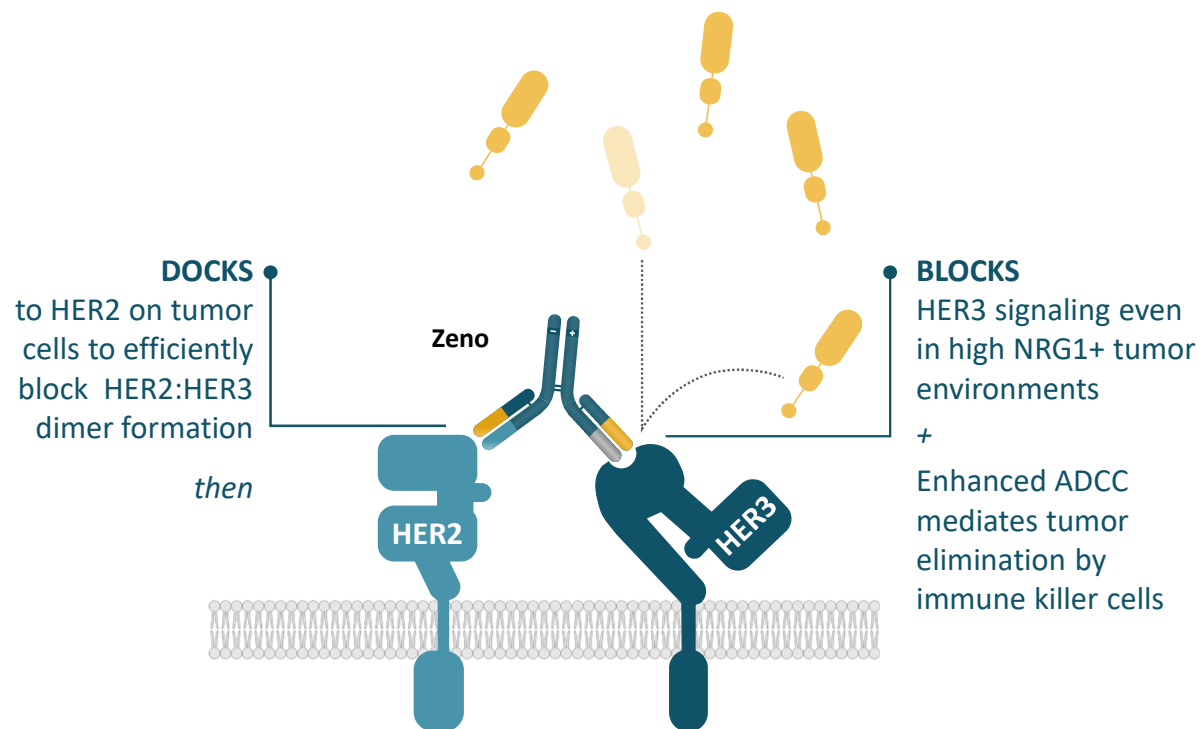
Zenocutuzumab

MCLA-128 or “Zeno”
HER2 x HER3 bispecific



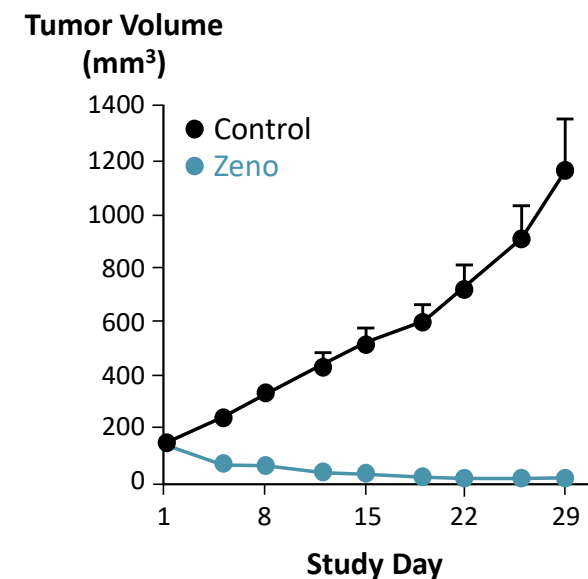
Zeno DOCK & BLOCK[®] Mechanism of Action

Uniquely Suited to Target NRG1+ Cancers



Zeno blocks tumor cell growth and survival driven by HER3 ligands, including neuregulin (NRG-1) and NRG-1 gene fusions (NRG1+)

Zeno Blocks Tumor Growth in NRG1+ PDX Model



Zeno Safety Profile for Single Agent Use

Safety Data in Over 100 Patients in Phase 1/2 Trials



Safety and Tolerability in Phase 1/2 Trial

OVER 100 PATIENTS EVALUATED*

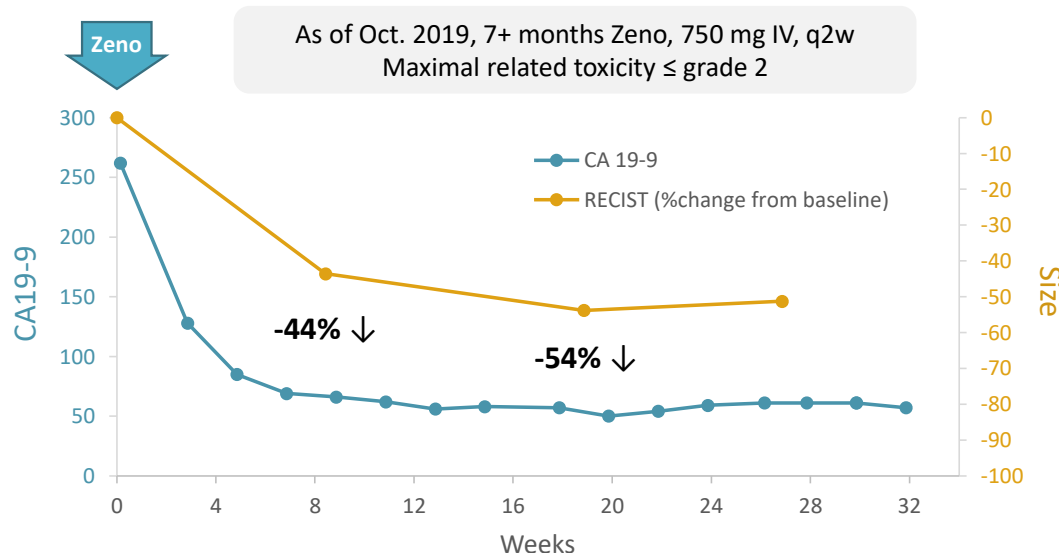
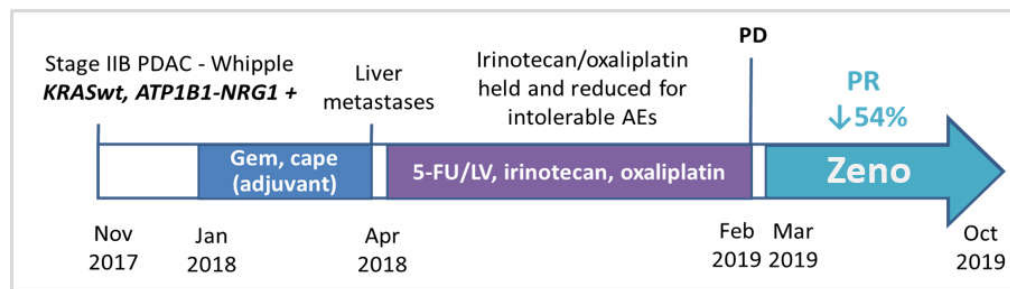
Zeno Dosing: 750 mg ranging from q1w-q3w

- Single agent well tolerated
- Low risk for immunogenicity
- Most AEs were grade 1-2

Zeno Clinical Response in NRG1+ Cancers

Patient Data Presented at 2019 AACR-NCI-EORTC International Conference

**Example
pancreatic
cancer patient:**



Zeno Activity and Promising Durability Observed in Patients

Zeno NRG1+ Clinical Activity Reported by MSKCC at 2019 AACR-NCI-EORTC International Conference

	PANCREATIC CANCER		LUNG CANCER
Tumor size reduction	54% (PR)	25% (SD)	41% (PR)
PET scan	Neg	Neg	nd
Decline in tumor marker	~75%	~90%	N/A
Duration of treatment (mo)	>7*	>7*	~ 5*

Source: AACR-NCI-EORTC International Conference on Molecular Targets and Cancer Therapeutics 2019
https://merus.nl/app/uploads/2019/10/AACR-NCI-EORTC_Poster-LB-B12_NRG1-MCLA-128_10252019_FINAL.pdf

Overall Experience with Zeno in NRG1+ Tumors as of October 2019

	N	PANCREATIC CANCER	LUNG CANCER
Evaluable	6	PR 7 mo*; SD 7 mo	PR 5 mo*; SD 7 mo; PD; PD
Non-evaluable	3	Died of progressive disease prior to first evaluation	2 Pts not yet at first evaluation

5 patients enrolled on the eNRGy trial; 4 patients treated under Early Access Program

Source: Merus Press Release Oct 27, 2019 <https://ir.merus.nl/news-releases/news-release-details/merus-bispecific-antibody-mcla-128-shows-encouraging-early>

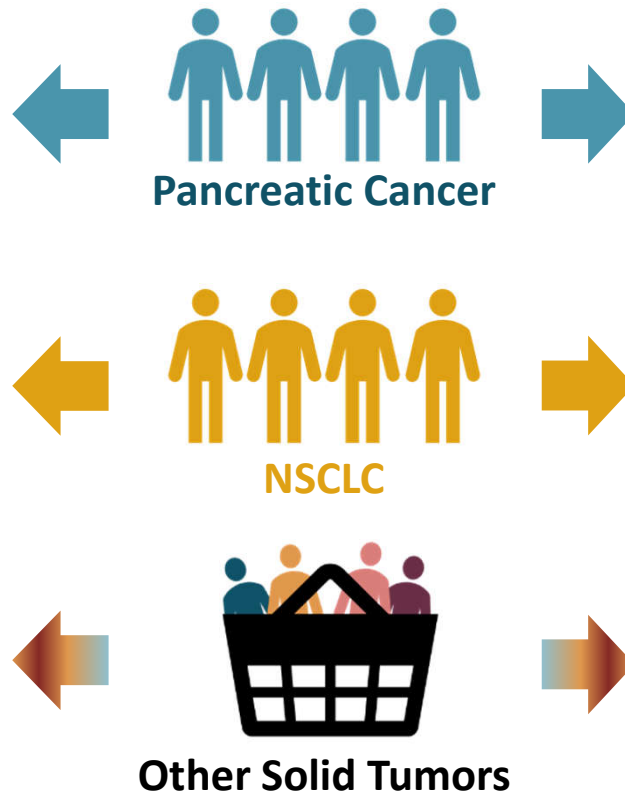
*Indicates treatment was ongoing at the time of the conference; nd, no data; N/A, not applicable

Zeno Clinical Programs in NRG1+ Cancers

eNRGy Clinical Trial and Early Access Program Ongoing

eNRGy *Clinical Trial*

- Phase 1/2 global single arm trial of Zeno in NRG1+ cancers
- Cohorts include Pancreatic, NSCLC, and other solid tumors
- Majority of clinical trial sites open and enrolling
- Ongoing Phase 1/2 trial update expected 2Q 2021






Early Access Program

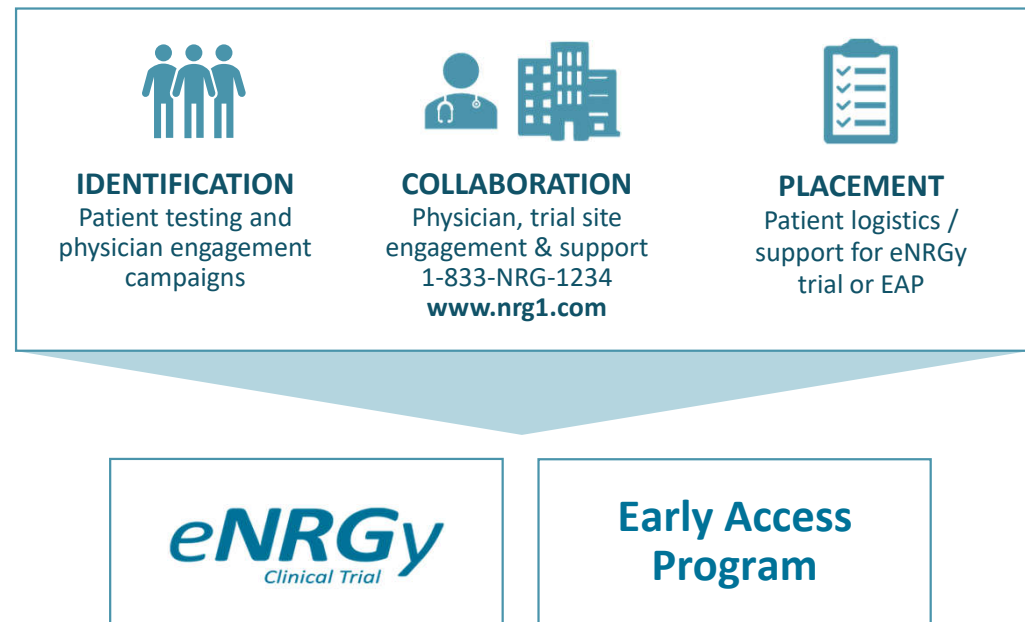
- For eligible patients who do not enroll on the eNRGy trial
- Allows patients with NRG1+ cancers to receive treatment with Zeno
- Evaluations and patient follow up may be similar to eNRGy protocol
- May provide additional clinical data in support of Zeno NRG1+ program

Identifying and Recruiting NRG1+ Cancer Patients

NRG1+ Cancers are Found Across Multiple Solid Tumor Types

TUMOR TYPE	ESTIMATED INCIDENCE (%)
 LUNG	0.3 – 3.0
 PANCREAS	0.5 – 1.5
 OTHER	< 1.0

Comprehensive Effort to Identify and Recruit Patients



Clinical program update on > 30 patients with pancreatic, NSCLC and other cancers planned for 2Q 2021

Note: Projections of NRG1+ estimated incidence based on limited published information, including Jonna S et al. Clinical Cancer Research (2019); independent epidemiology review <https://ir.merus.nl/news-releases/news-release-details/merus-announces-acceptance-six-abstracts-upcoming-medical>; and Wang (2015); Duruisseaux (2017); Trombetta (2018); McCoach (2018); Karlsson (2019); Drilon (2018); Fernandez-Cuesta (2014); Seto (2018); and Scheel (2015)

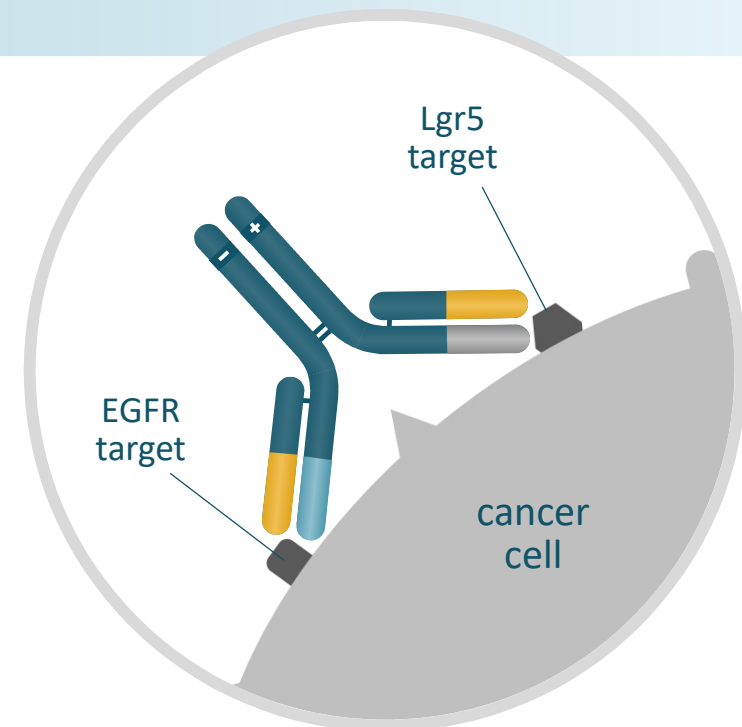
Merus

***Designed to potently block signaling
and growth in Wnt-dysregulated
solid tumors***

- Binds to EGFR and Lgr5, an intestinal cancer-initiating cell antigen
- Potential to address significant unmet need in colorectal and other solid tumors
- Blocks growth in Wnt-dysregulated tumor models including Ras^{mut}
- Modifications to enhance ADCC
- Phase 1 trial update planned for year end 2020

MCLA-158

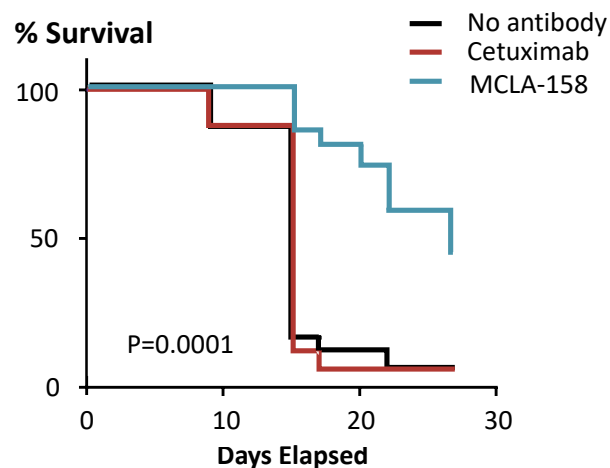
Lgr5 x EGFR bispecific



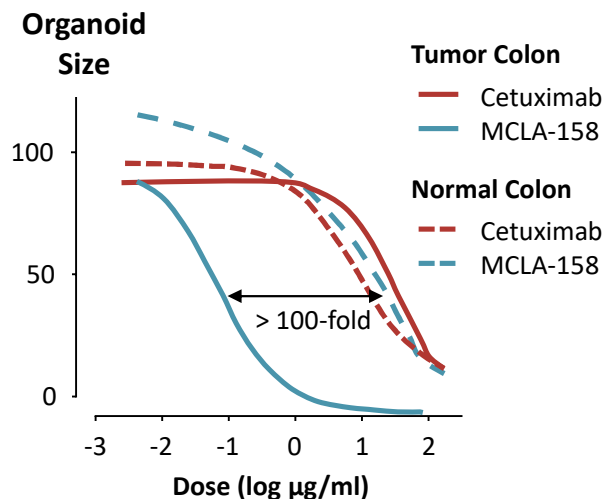
MCLA-158 — Novel Target and Innovative MoA

Superior Growth Inhibition and Selectivity of Tumor Versus Healthy Tissue

Superior **ACTIVITY**
compared to Cetuximab



Superior **SELECTIVITY** for
tumor-derived organoids



ONGOING PHASE 1 TRIAL

- Global Phase 1 trial ongoing
- Protocol includes dose expansion phase at RP2D
- Update planned for year end 2020

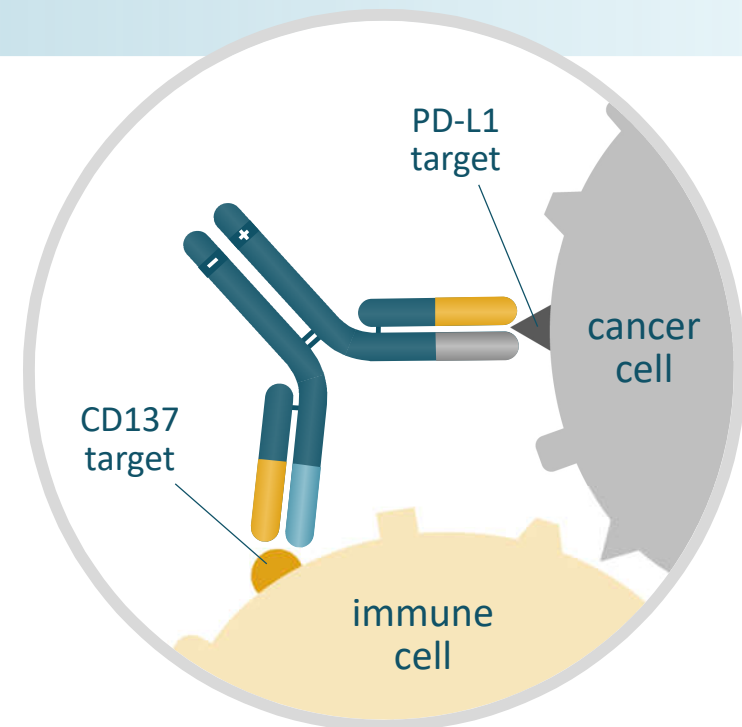
- Activity observed in xenograft models resistant to treatment with Cetuximab
- MCLA-158 discriminated between organoids derived from tumor and healthy tissue

Designed to recruit and activate tumor infiltrating T-cells

- Binds to PD-L1 on tumor cells and CD137 (4-1BB), a potent activator of tumor infiltrating T-cells, on activated T-cells
- Targets PD-L1 positive cells in the tumor and blocks the PD-1/PD-L1 inhibitory signal
- Potential in a variety of solid tumors and hematological malignancies
- Global phase 1 trial ongoing in collaboration with Incyte

MCLA-145

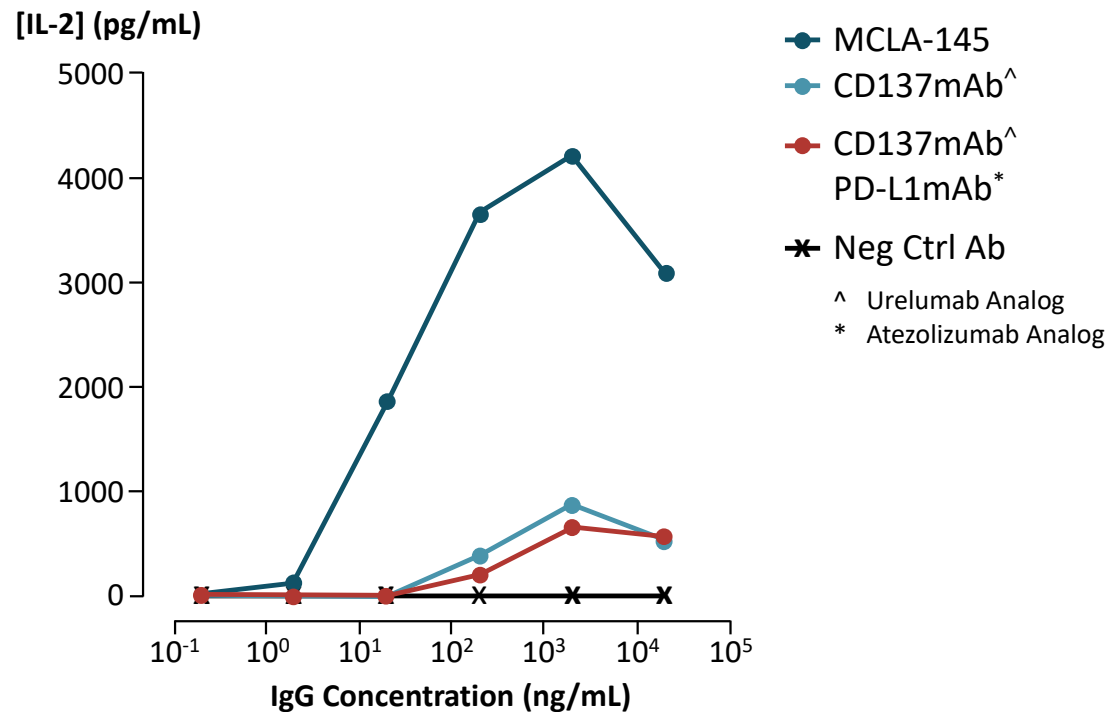
PD-L1 x CD137 bispecific



MCLA-145 — Targets PD-L1 Positive Tumor Cells

Demonstrated Potent T Cell Activation in Preclinical Studies

Primary T Cell Transactivation Assay



Ongoing Phase 1 Trial

- Global open-label Phase 1 dose escalation trial ongoing
- Clinical trial co-developed in collaboration with Incyte Corporation

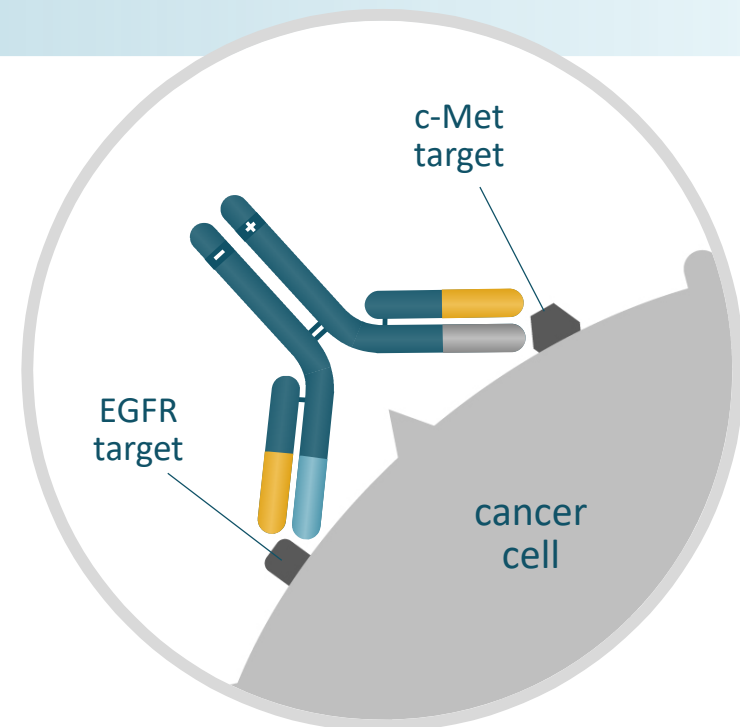
Source: 2019 AACR Presentation A bispecific Fc-silenced IgG1 antibody (MCLA-145) requires PD-L1 binding to activate CD137
https://merus.nl/app/uploads/2019/04/IC171-19E-AACR19-Mayes-MCLA-145-MoA-Poster_MT06_for-approval-032019.pdf

Designed to target lung cancer and other solid tumors

- Targets both c-Met and EGFR on cancer cells
- Significant opportunity in lung cancer and other solid tumors
- IND enabling studies ongoing
- First patient planned to be dosed in 2021

MCLA-129

c-MET x EGFR Bispecific



Merus Collaborations & Licensing Agreements

Expanding Merus pipeline through development of innovative therapeutics



**Global collaboration
of up to 11 Bionics®
programs**

\$200mm at signing and
research funding, Merus
retains full U.S. rights to
develop, commercialize
MCLA-145



**MCLA-129
EGFR x C-MET
collaboration**

Betta conducting
IND-enabling studies;
Merus retains global
rights ex-China



**Collaboration with
3 immuno-oncology
Bionics® programs**

Simcere responsible for
IND-enabling and China
studies; Merus retains
global rights ex-China

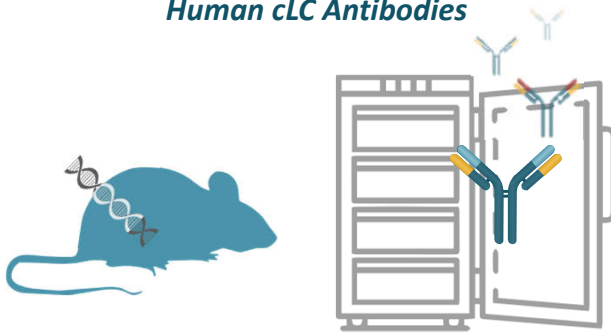


**Bionics® Licensing
Agreement for Auto-
immune diseases**

Phase 1 trial in Japan for
ONO-4685, a PD-1 x CD3
bispecific antibody

Our Platform – Unparalleled Capabilities in Multispecific Antibodies

Generate *Human cLC Antibodies*



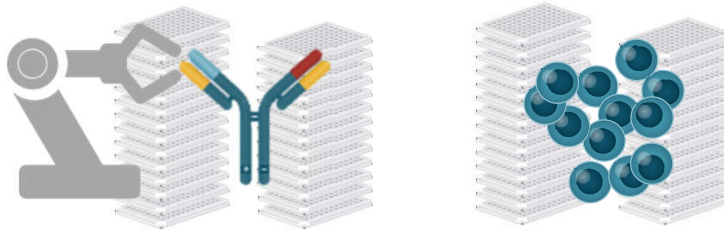
Patented Mouse Technology

Patented “Merus Mouse” (MeMo®) and other tools generate diverse, high quality common light chain (cLC) antibody panels

Established Inventory

Established inventory of thousands of cLC antibodies against many targets, each with distinct purposes and unique features

Evaluate *Thousands of Multispecific Abs*



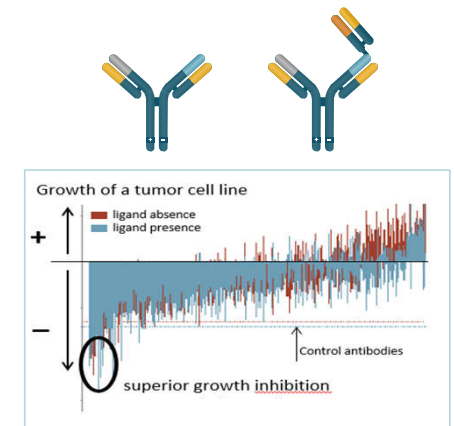
Efficient Pairing of Thousands of Multiclonics®

Robotics generate thousands of Multiclonics®; patented “DEKK” heterodimerization technology enables efficient pairing of multispecific antibodies

Unbiased Screening

In-format, unbiased functional screening in relevant cellular assays

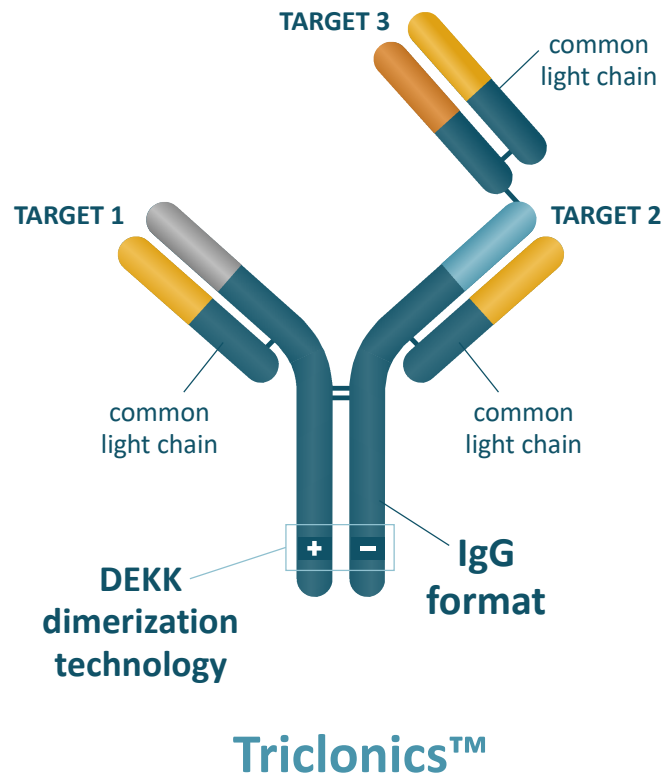
Identify *Best Candidates*



Identification of best candidates from thousands of different Biclonics® and Triclonics™ against multiple different targets

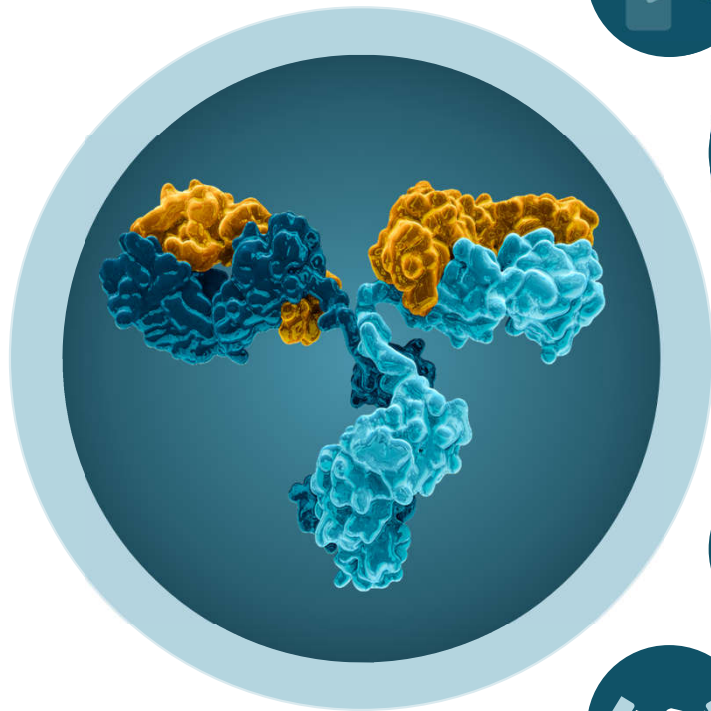
Our Research — Triclronics™ and Beyond

Triclronics™ Opportunity



- High throughput production, purification and screening in the trispecific format
- Stable format with predictable behavior that can be produced as if it were a normal monoclonal antibody
- Allows for 3 specificities without the need to engineer each individual Fab
- Leverages Merus' extensive library of established antibody panels that bind tumor antigens and engage and modulate the immune system

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