Making the DARPin[®] Difference Reality for Patients

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Molecular Partners: Who We Are

DARPin[®] Platform



- Swiss biotech
- 120 team members
- Discovery to Phase 2 (POC)
- Science & patients first



DARPin® Therapies

- Abicipar in Phase 3 (ophtha)
- MP0250 in Phase 2 (onc)
- MP0274 in Phase 1 (onc)
- Broad preclin. I/O portfolio

Long-term Partnerships

- Alliance with Allergan
- Swiss listing (MOLN)
- Cash CHF 152mn*
- Financed well beyond key value inflection points
- DARPin[®] Difference: unlock novel modes of action
- Proof of Platform in the eye and systemically
- Fast and cost effective drug discovery engine

*As of Sep 30, 2017. I/O, immuno-oncology.



DARPin[®] Proteins: A Different Class of Therapeutics

Derived from ankyrin repeat proteins which are naturally occurring binding proteins in multifunctional contexts

MP0250:

mixture in one

Drug discovery engine

- Mono-DARPin[®] are selected to a target from large DARPin libraries
- Fast and cost-effective

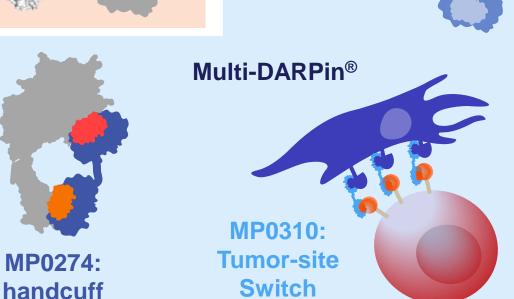
Ideal properties

 Small size, high potency, high stability, high affinity, high developability

Proof of platform

 Low immunogenicity and long t_{1/2} in bloodstream (14 days) and eye





Flexible architecture

Multi-DARPin® candidates:

- Linked mono-DARPin[®] domains (≤6 so far)
- Different linkers short, long, flexibel, rigid,...

DARPin® Difference

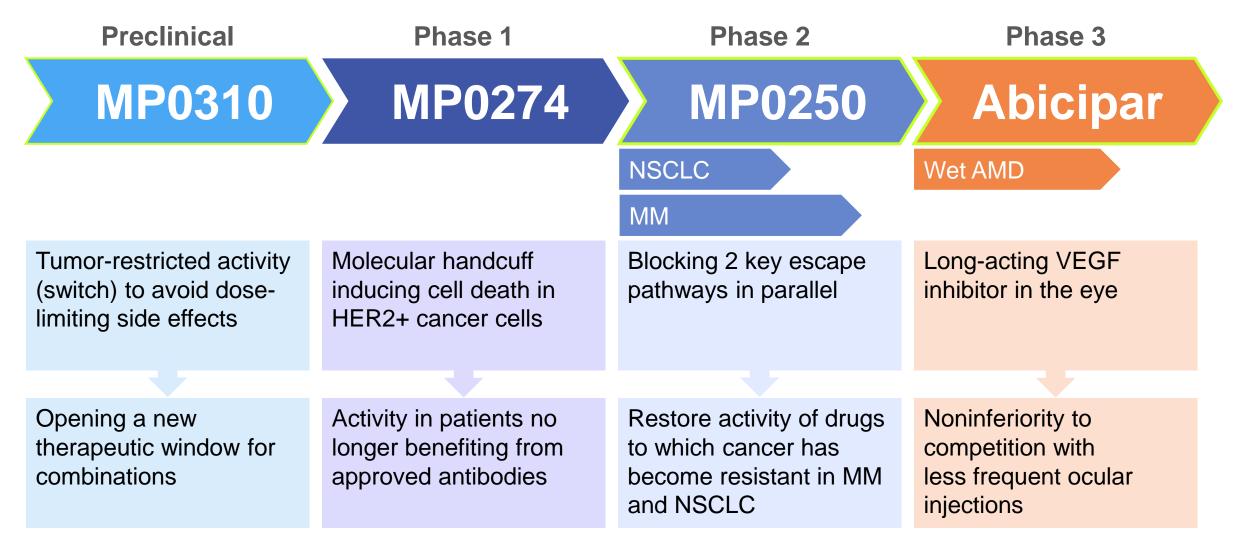
Collections of 10,000 multi-DARPin[®] candidates are screened for new MoA

- Allosteric modulation
- Local agonists

• ...

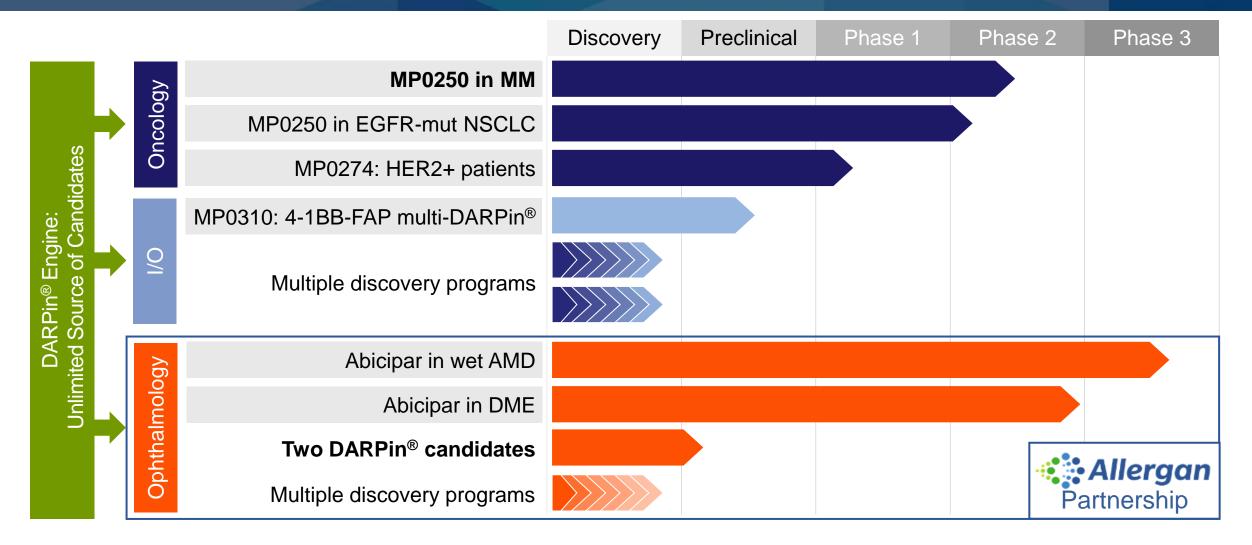


Turning the DARPin[®] Differentiation into Patient Outcome – Our Target Profiles





Balanced and Robust Portfolio

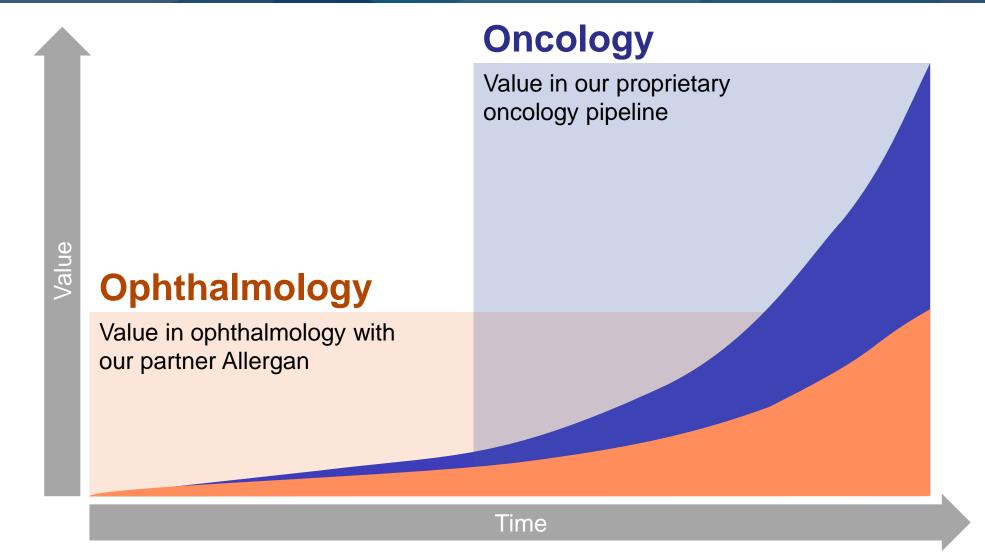


AMD, age-related macular degeneration; DME, diabetic macular edema; MM, multiple myeloma; NSCLC, non-small cell lung cancer.



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Ready to Capture Value Beyond Ophthalmology

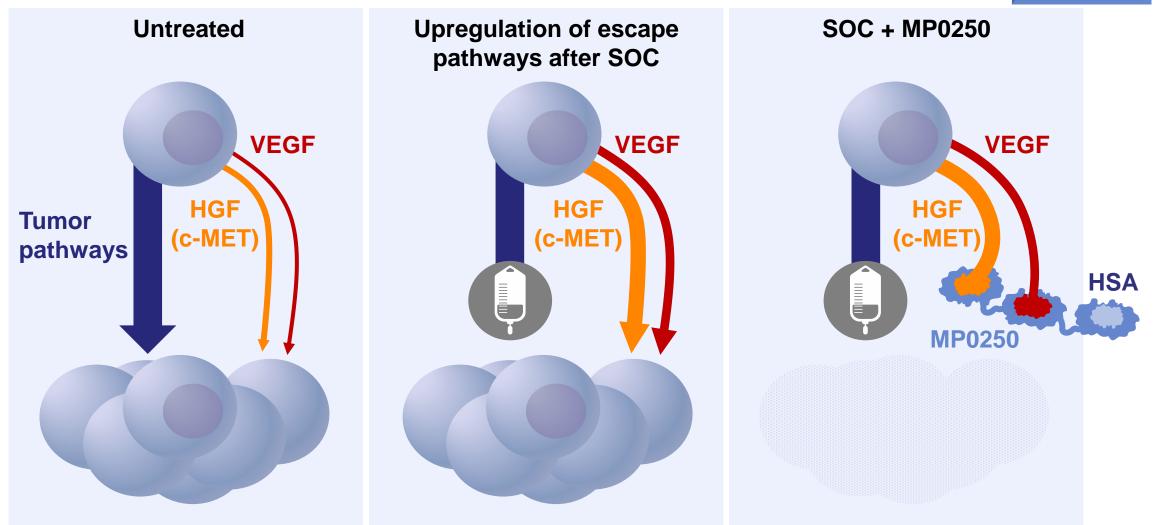




Oncology



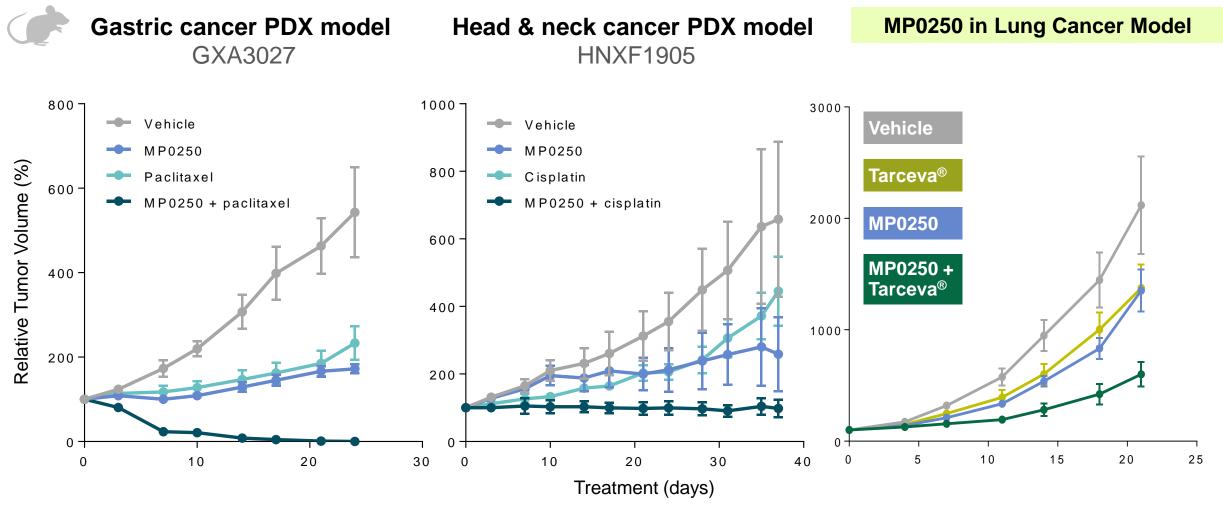
MP0250 Blocks Two Tumor Escape Pathways





Combination with MP0250 Increases the Potency of Many Agents Across Different Tumors

MP0250



PDX model, patient-derived xenograft mouse model.



MP0250 Can Be Dosed Safely, Conveniently and Shows Clear Signs of Efficacy in Phase 1 Study

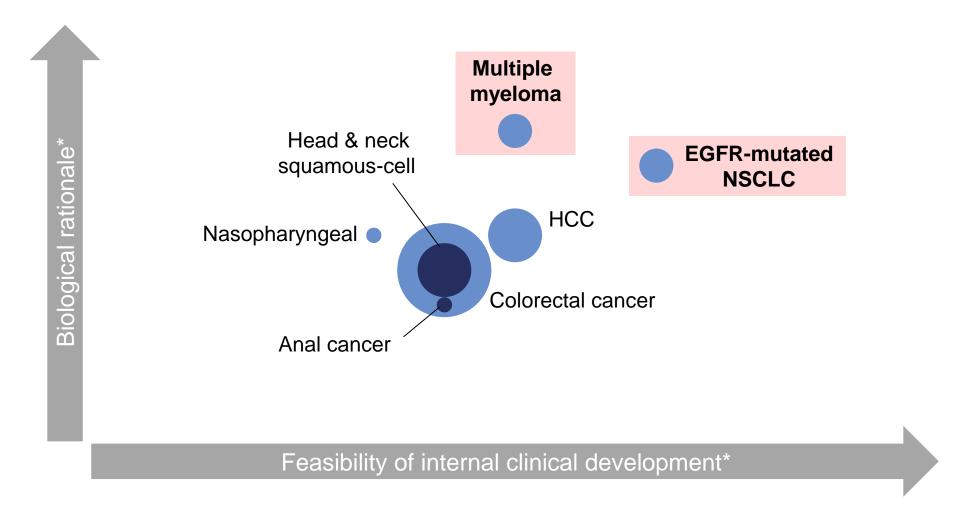
MP0250

Dosing* Convenient, flexible administration	Exposure Repeated dosing resulted in good exposure	Safety Well tolerated	Efficacy Clear signs of antitumor efficacy
 Infusion well tolera Dosing every 2 or weeks possible Systemic half-life: ~2 weeks 	3 exposure throughout treatment periods (max. to date >12 mo)	 Most common AE was hypertension, generally well controlled with standard medication AEs were as expected for a VEGF inhibitor 	 2 patients showed significant reduction in tumor volume Treatment duration was ≥3 mo in 18 patients (40%) and ≥6 mo in 4 patients (10%)

These first-in-human data support the development of DARPin[®] therapy via systemic administration.

* 1- and 3-h infusion q2wk at doses ≤8 mg/kg or q3wk at 12 mg/kg; 1- and 3-h infusion well tolerated. ADA, anti-drug antibody; AE, adverse event. Study details can be found at clinicaltrials.gov/NCT02194426.

Our Indications for Phase 2: MM and NSCLC

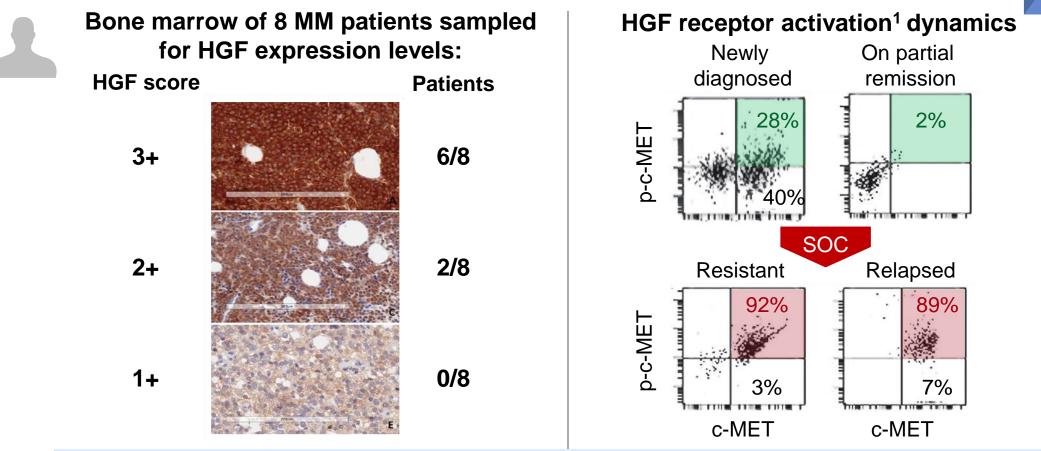


Bubble size indicates estimated relative market potential (incidences). Source: Datamonitor.

*Based on internal assessment on speed to market and complexity of development program. Potential of gastric, renal and other cancers under evaluation.

Clinical Data Supports Targeting HGF & VEGF in Multiple Myeloma

MP0250



VEGF rationale: A small MM study of bevacizumab (Avastin[®]) + bortezomib (Velcade[®]) demonstrated benefit over Velcade[®] alone²

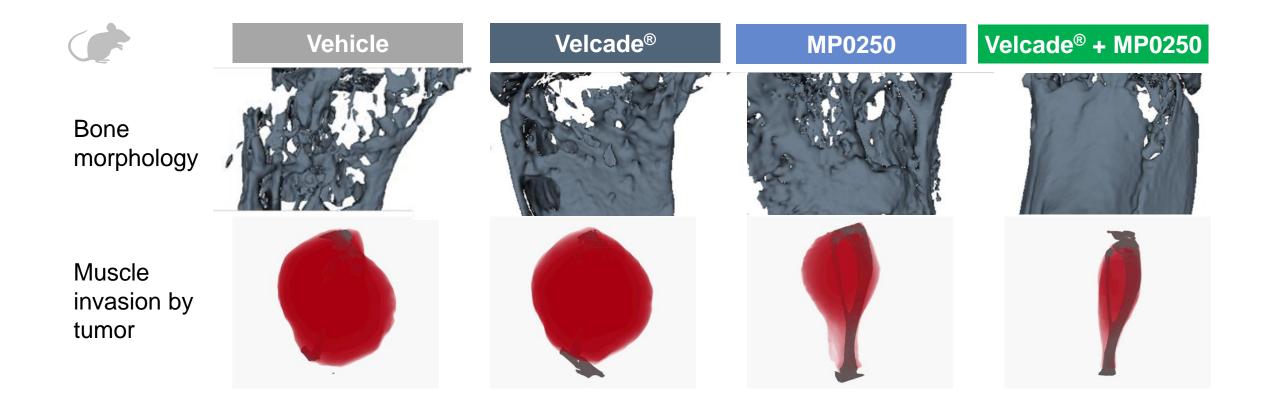
1. Moschetta M, et al. Clin Cancer Res 2013;19:4371-82; 2. White D, et al. Cancer 2013;119:339-47.



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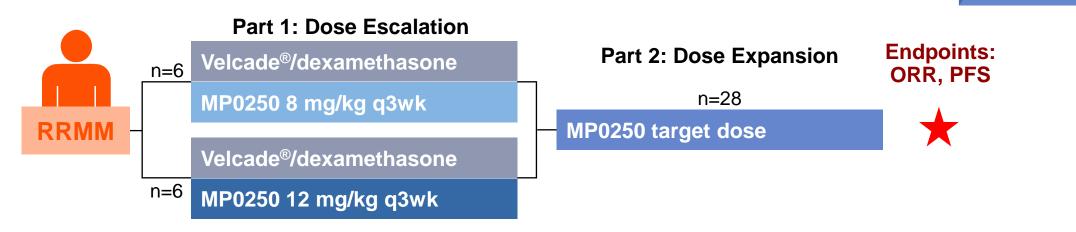
MP0250 Combination with Velcade[®] Results in Superior Efficacy in Mouse Model







MP0250 Phase 2 Study in MM



- Phase 2 open-label, single-arm, multicenter study of MP0250 + Velcade[®] + dexamethasone in patients with refractory and relapsed multiple myeloma (RRMM)
- Study population: MM patients who have received ≥2 lines of therapy, including Velcade[®] and an IMiD, and have shown no response to most recent therapy or progressed ≤60 days after most recent therapy
- Study status*: 8 patients have been treated in the first dose escalation cohort (MP0250, 8 mg/kg)
- Next readouts: Initial efficacy 2018

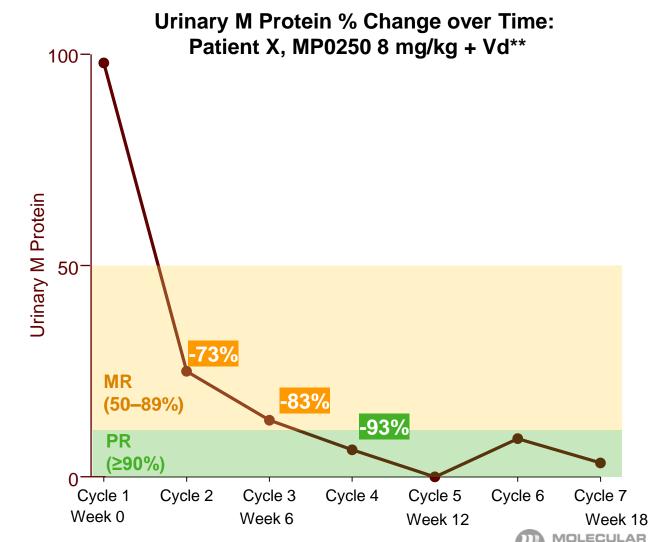
*Data cutoff 4th January 2018 Study details can be found at clinicaltrials.gov/NCT03136653.



MP0250 Phase 2 in MM Initial Safety Read-out: Combination Well Tolerated with Promising Signs of Efficacy MP0250

Initial Results & Study Status*:

- Initial dose level: 8mg/kg/3weeks
- No dose-limiting toxicities have been reported at data cutoff
- 8 RRMM patients were dosed, with 7 evaluable for safety and efficacy determination at data cutoff
- Preliminary Results
 - 4 of 7 patients have evidence of anti-myeloma activity
 - 3 patients with Partial Response (PR)
 - 1 patient with Minimal Response (MR)

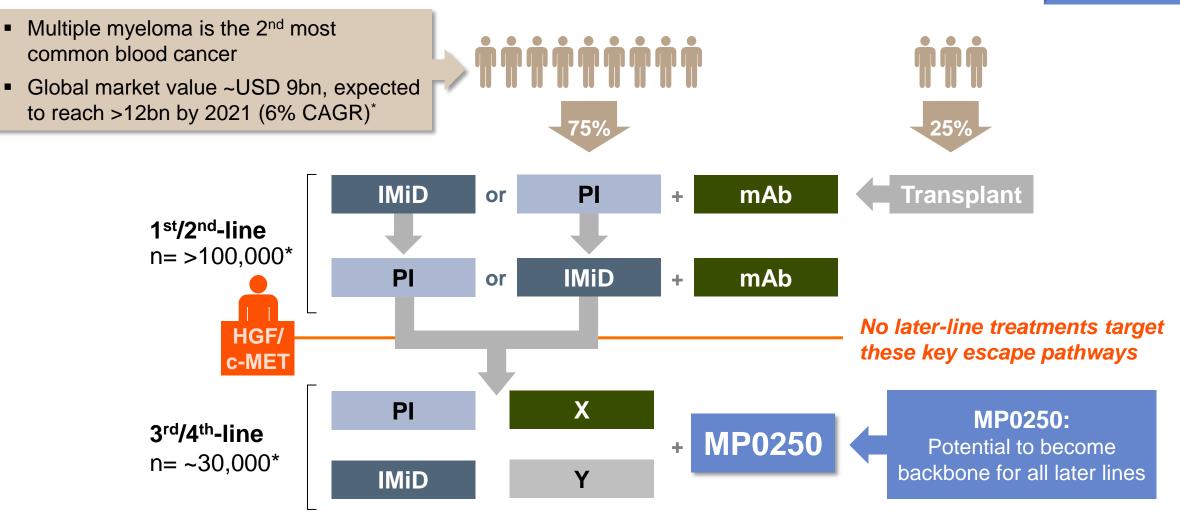


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^{*}Data cutoff: 4th January 2018

^{**}Kappa Free Light Chain measurement in line with M-protein Study details can be found at clinicaltrials.gov/NCT03136653.

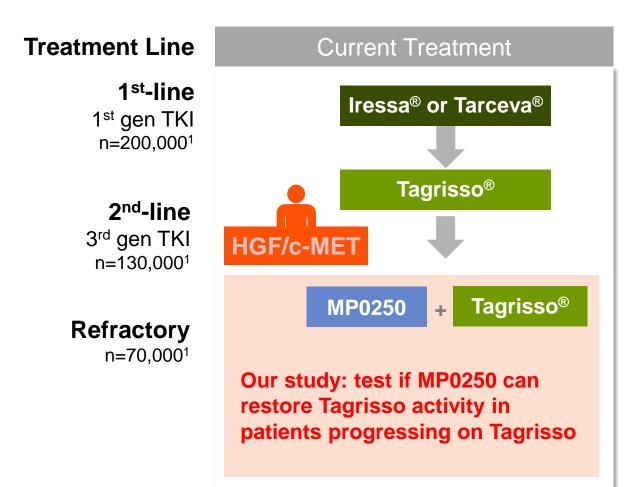
Unique Potential of MP0250 in MM



*Including US/5EU/JP. Datamonitor.



Unique Potential of MP0250 in EGFR mut NSCLC



- NSCLC is a leading cause of cancer death
- Activating EGFR mutations are found in up to 10% of Western and up to 50% of Asian NSCLC¹
- Global market value (EGFR NSCLC) ~USD 1.9bn, expected to reach >2.5bn by 2021 (7% CAGR)¹
- Status: FDA approval Sep 2017
- On track to dose 1st patient in Q1 2018
- Next readouts: initial safety in 2018 & initial efficacy 2019



MP0250

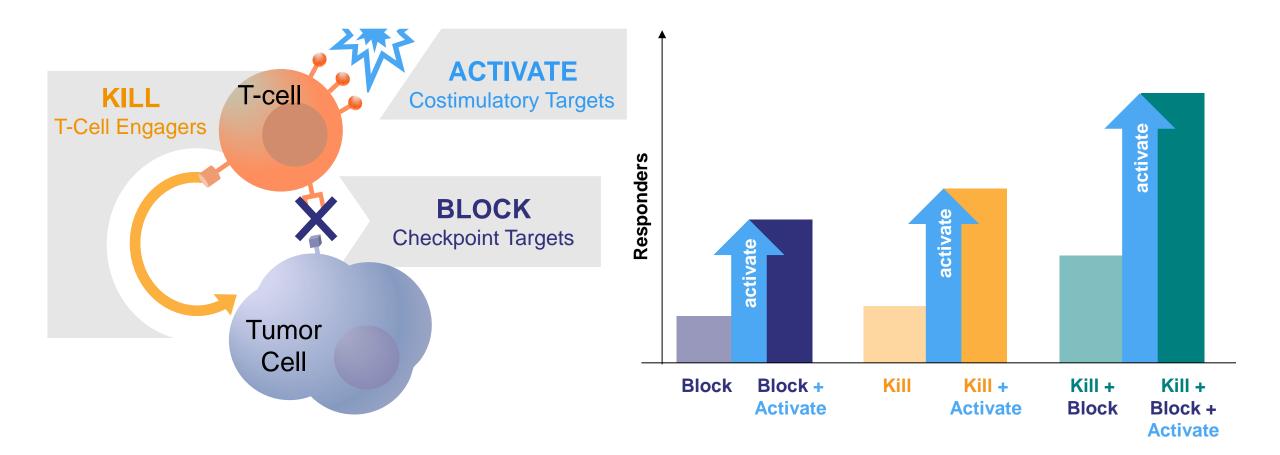
1. Including US/5EU/JP. Datamonitor.

Immuno-Oncology



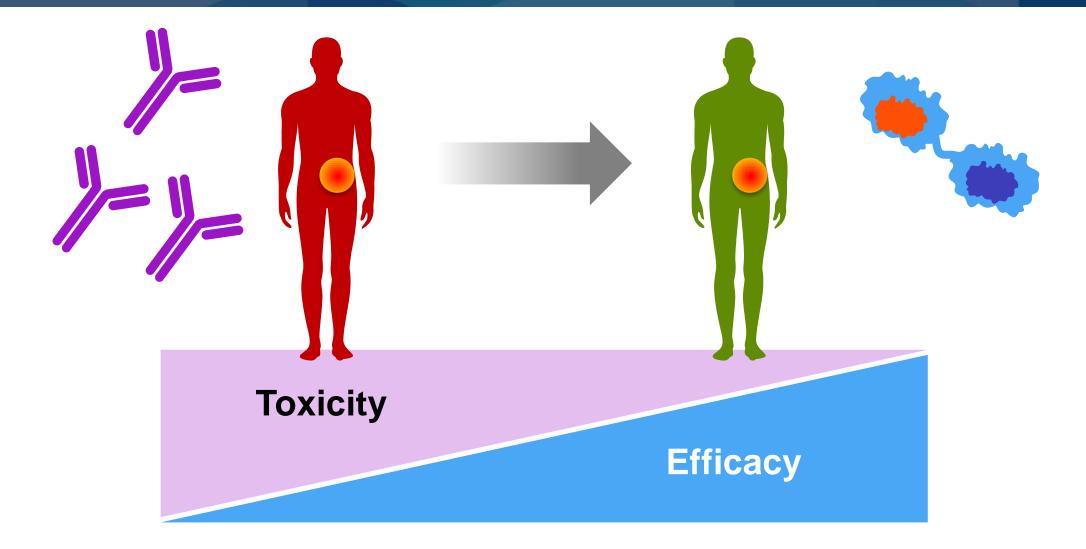


Need for Combination Therapy in I/O



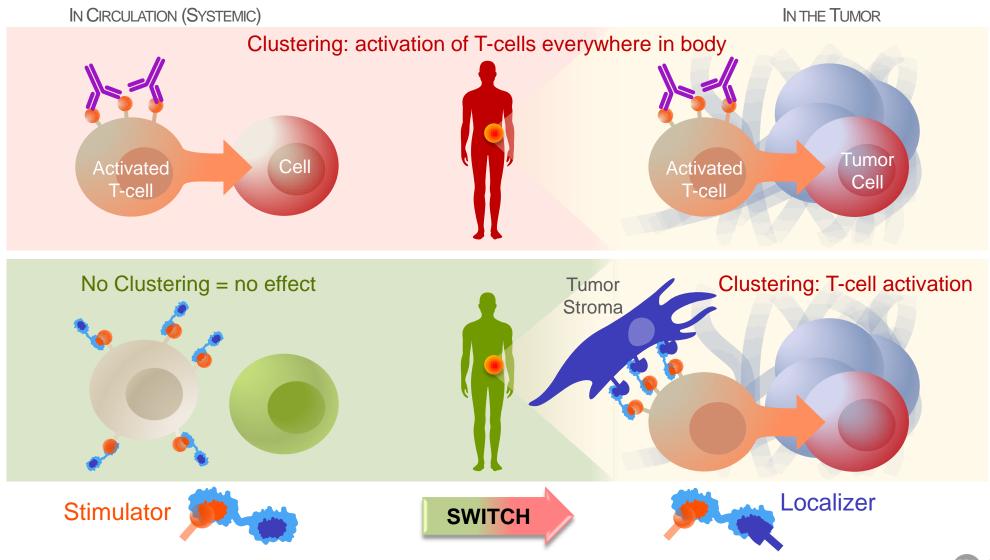


Expand the Therapeutic Window to Enabling Combinations



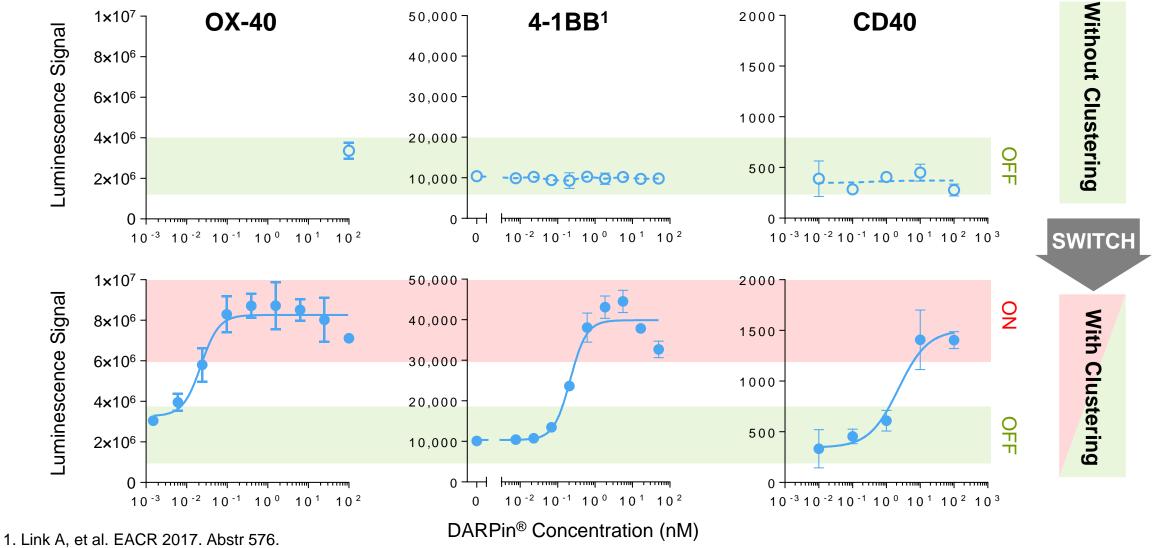


Toxicity Limits Full Potential of Antibody Agonists





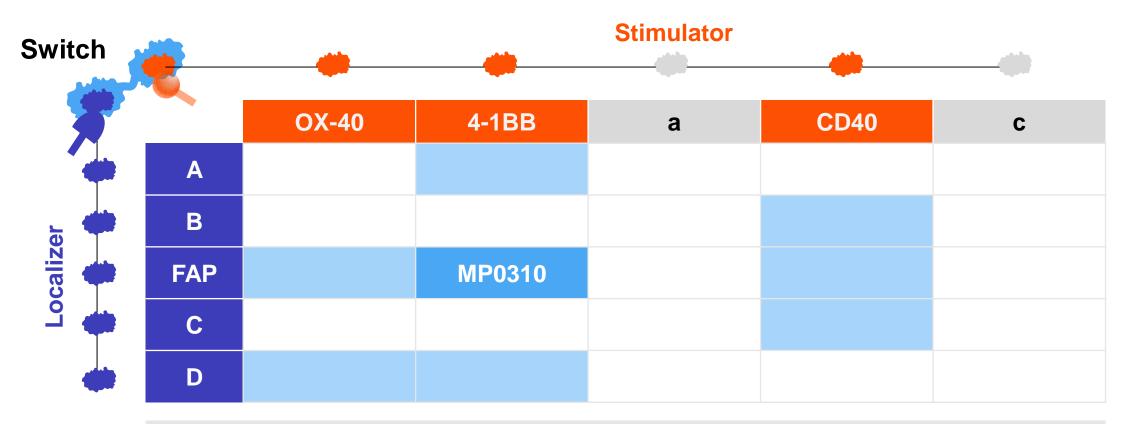
Successful DARPin[®] Stimulators to Date



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DARPin[®] Toolbox with Unlimited Combinations



Many DARPin[®] candidates are under investigation for both solid and liquid tumors (including combinations)



Overview of MP0310 Data

Ideal for combinations No systemic toxicity **MP0310** 2000-HSA 10 Relative Tumor Volume (%) Body weight loss >10% Vehicle **DARPin[®]** 8 **MP0310** FAP Animals (n) DARPin® 6 4 2 Mono A 4-1BB 0 DARPin® Combo Control Antibody MP0310 1/10 8/10 1/10 0 3 7 10 14 16 0 Days

- MP0310 shows lower systemic toxicity compared with current therapy
- Would be ideal combination partner with other drugs

*p<0.001, 2-way ANOVA.



Ophthalmology

Abicipar



Abicipar: Most Advanced DARPin[®] Therapy

 Potentially transformative therapy with less frequent ocular injections compared with standard of care

Long-acting PEGylated mono-DARPin[®] protein blocking VEGF

- Phase 2 data suggest quarterly dosing & comparable efficacy to Lucentis[®]
- Drug Safety Monitoring Committee (DSMC): no changes recommended
- Market: USD 8bn annual sales (2016) and growing (wet AMD and DME)
- Economics: Up to \$360mn open milestones & low double-digit to mid-teen tiered royalties
- Wet AMD Phase 3 read out: 1 year data in 2018
- Allergan plans to start DME Phase 3 in 2018

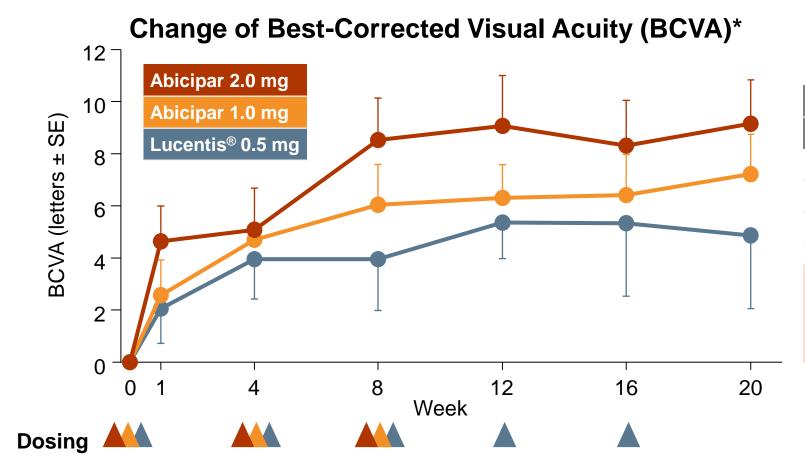




Abicipar

Phase 2 Data Suggest Quarterly Dosing for Wet AMD

Abicipar



Safety Data

Vision Ga	Safety (n/N)	
Wk 16	Wk 20	AEs [†]
8.2	9.0	2/23
6.3	7.1	3/25
5.3	4.7	0/16

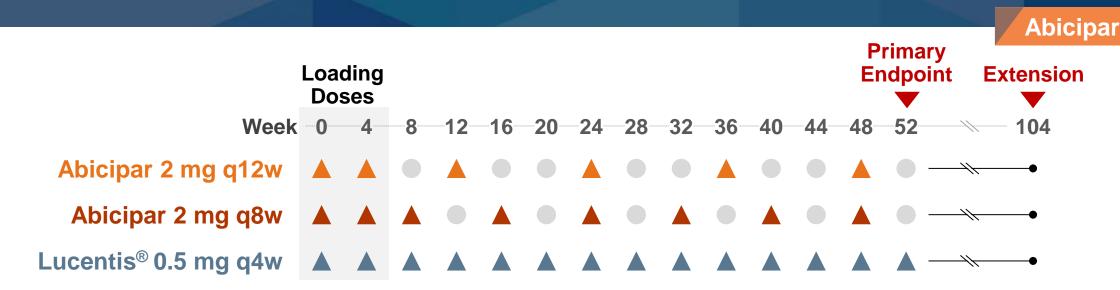
The abicipar formulation has been further optimized for safety for use in Phase 3.

Allergan, 12 August 2014.

*Study not powered to reach statistical significance; [†]Ocular inflammation. SE, standard error.



CEDAR & SEQUOIA: Abicipar Registration Studies in nAMD



- 2 parallel, randomized, double-blind phase 3 studies
 - 2x 900 patients globally
 - Patient recruitment completed since early May 2017 (4 months ahead of plan)
- Drug Safety Monitoring Committee (DSMC): no changes recommended
- Next milestones: 1 year read-out in 2018 (triggers FDA filing), targeted launch in 2020



Abicipar: One of Allergan's Star Programs

DEVELOPMENT PROGRESS OF 6 STAR PROGRAMS

Ubrogepant Acute Migraine	2 Ph 3 trials i	2 Ph 3 trials in US initiated with recruitment well ahead. Topline results 1H 2018.			
Atogepant Migraine Prophylaxis	Ph 2b trial in	Ph 2b trial in US initiated. Topline results 1H 2018.			
Rapastinel MDD	Ph 3 trials ah	ead of schedule. Topline results o	expected 20	19.	
ESMYA Uterine Fibroids		on on track for 2H 2017. or long-term intermittent therapy	/.		CTAD 7
Abicipar AMD	2 Ph 3 trials e	nrollment completed. Topline re	sults 2018.		STAR PROGRAMS
Cenicriviroc NASH	Patient screer	ning for Ph 3 initiated.			
Program 1	TA/Indication	МОА	Year Launch	Estimated Peak Sales	Key Highlight
BICIPAR	AMD DME	Recombinant designed ankyrin repeat protein. Potent blocker of all forms of soluble VEGF-A	2020 2022	\$1.5B-\$3B	 Reduction in injection burden is a significant unmet need Offers sustained efficacy with fewer injections

Allergan: Q1 2017 earnings call (May 9th) & Leerink Partner conference (Feb 15th).



Abicipar

Summary & Outlook



Key messages

- Successful transition from DARPin[®] platform into clinical product company
- Key value in oncology & ophthalmology:
 - Encouraging MP0250 data from first cohort in MM; NSCLC study on track
 - Abicipar on track in P3 in wet AMD; AGN optioned 2 additional candidates
- MP0310 selected as 1st development candidate from our I/O DARPin[®] toolbox
- Financed beyond 2020, capturing key value inflection points
- Keep on forward integrating towards late-stage development and the market



Multiple Value Inflection Points Ahead

	2018	2019	2020		
Abicipar	Wet AMD: 1-y Ph 3 efficacy DME: Ph 3 expected start		Wet AMD: expected launch in 2020		
MP0250	MM: initial efficacy NSCLC: initial safety	MM: efficacy NSCLC: initial efficacy	NSCLC: efficacy		
MP0274	Initial safety	Efficacy			
MP0310	Preclinical data	FIH			
	Funding beyond 2019				
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Thank you

