

Offering Patients a New Dimension of Protein Therapeutics

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Molecular Partners: Who We Are



Teamwork

- Swiss biotech
- 100 team members
- Discovery to phase 2 (POC)
- Science & patients first



DARPin® Therapies

- High patient value
- DARPin® Difference
- Abicipar in phase 3 (ophtha)
- MP0250 in phase 2 (onco)
- Broad preclin. I/O* portfolio



Long-term Partnerships

- Alliance with Allergan
- Swiss listing (MOLN)
- Cash CHF186mn**
- Financed well beyond key value inflection points



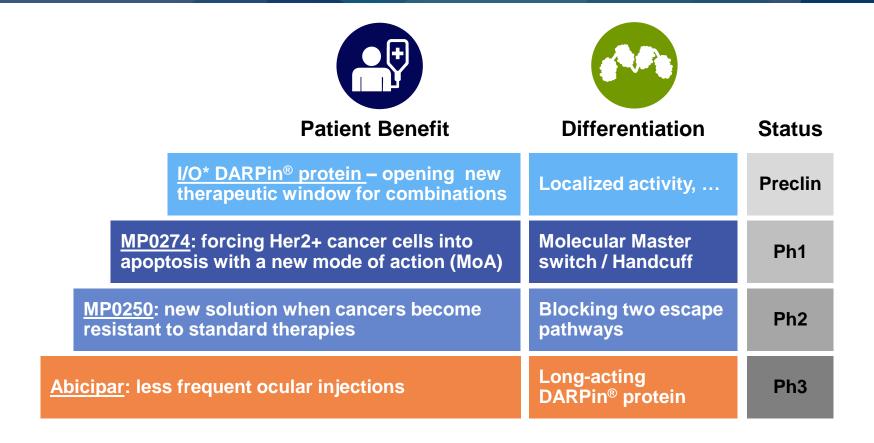
DARPin® Platform

- DARPin® Difference: unlock novel modes of action
- Proof of Platform in the eye and systemically
- Fast and cost effective drug discovery engine





DARPin® Difference



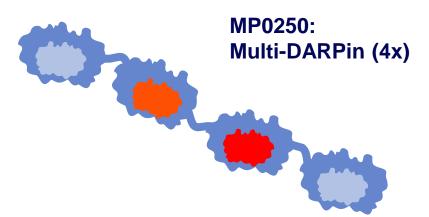
Our Strategy: Differentiated DARPin products with high patient value



DARPins® Proteins: A Different Class of Therapeutics

DARPin® is a registered trademark owned by Molecular Partners AG

Abicipar: Mono-DARPin



- Mono-DARPin®: selected to bind a given target with high affinity & specificity (large libraries)
- Multi-DARPin®: linked mono-DARPins® (<u>up to six</u>) & directly used for functional screening
- Ideal properties: mono- & multi-DARPins® are soluble, stable with a high-yield production
- Natural principle: repeat proteins were evolved as binders in multifunctional contexts

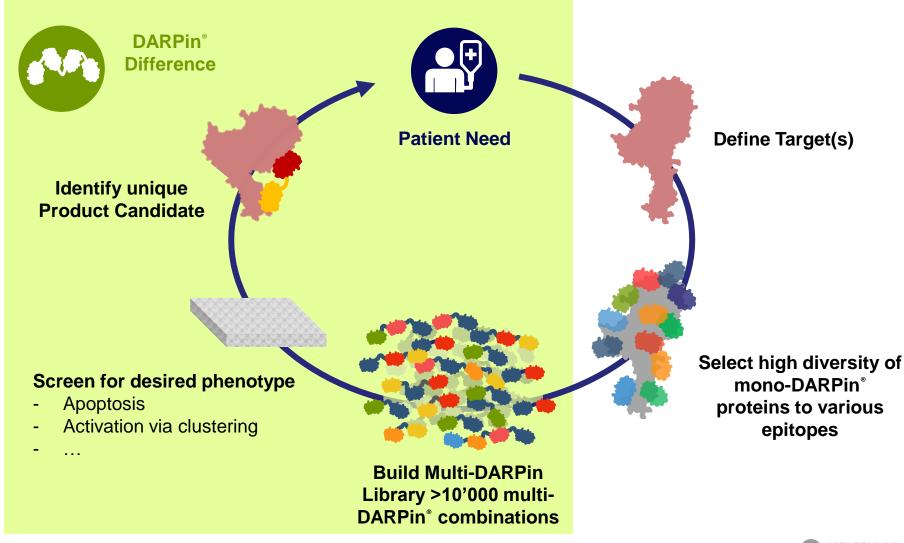
Proof of Platform: Low immunogenicity* and long half-life in bloodstream and eye**



^{*}MP0250 phase 1 study results show sustained exposure indicating absence of clearing antibodies;

^{**}Systemic half-life of ~12 d (MP0250 phase 1), 14 d in the eye (Abicipar).

Pathway to the DARPin® Difference



Long-term Partnerships: Investors & Pharma

Balance capital markets and pharma partnering as sources of capital

- > CHF 360mn collected so far from investors and partners
- Remain in strong cash position to fund pipeline progress





Strategic alliance with Allergan in ophthalmology

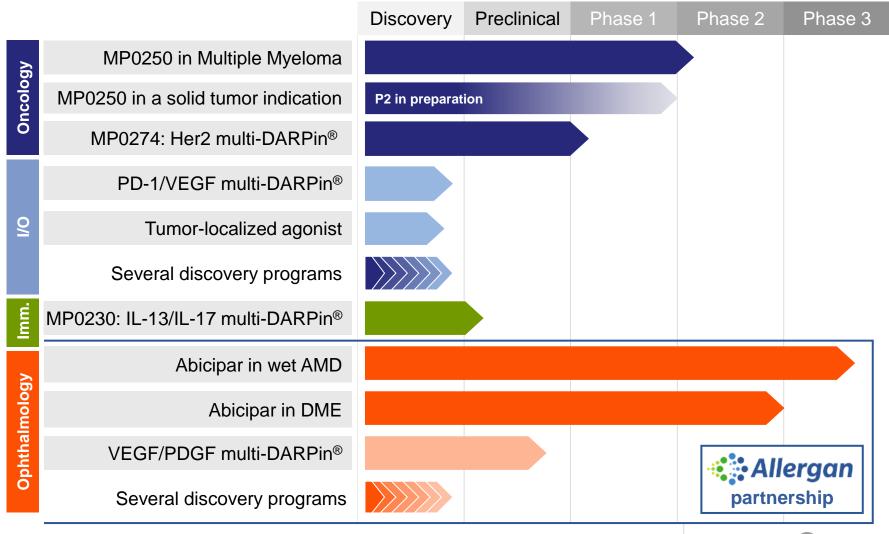
- Initiated with Abicipar in 2011
 - Up to \$360mn open milestone potential & low double-digit to mid-teen tiered royalties
- Expanded into broad discovery alliance in 2012
 - Potential \$1.7bn future milestone & tiered royalties to the mid-teens range

Partnering strategy: leverage the potential of the DARPin® platform

- Platform and pipeline are deeper than what Molecular Partners can access alone
- Partnering opportunities open on multiple levels



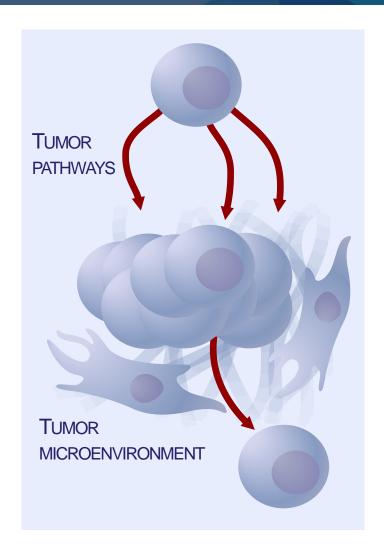
Balanced Portfolio







Cancer Is Complex and Difficult to Treat



Current Challenges

- Unlimited growth
- Sustained angiogenesis
- Tissue invasion & metastasis
- Evades body's immune defense



Current Strategies

- Attack from several angles (combo treatment)
- Activate immune system (immuno-oncology)



DARPin® Difference

- DARPin® candidates targeting multiple pathways
- Tumor-restricted multi-DARPin® candidates
- Novel Modes of Actions (MoAs)



MP0250: An Ideal Combination (anti-VEGF & HGF)

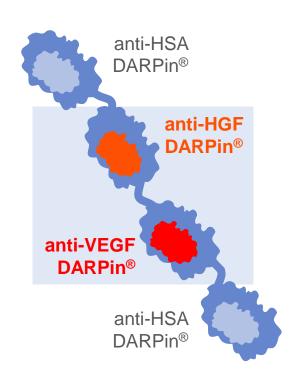
MP0250

MP0250

- First bi-specific biologic targeting VEGF and HGF
- Molecular Partners holds all rights

Development Stage

- Phase 1: solid tumor study
 - Demonstrated good tolerability and exposure, encouraging efficacy
- Phase 2: multiple myeloma study
 - Regulatory submission Q4/2016
 - Initial safety data expected 2017
 - Initial efficacy data expected 2018
- Additional Phase 2 for solid tumor indication planned for 2017

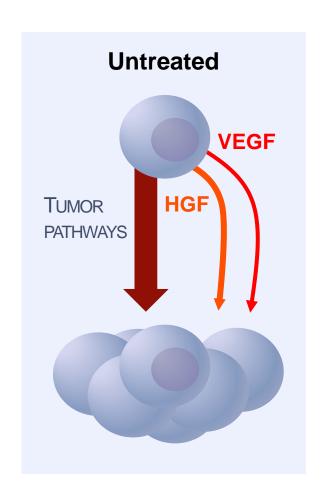


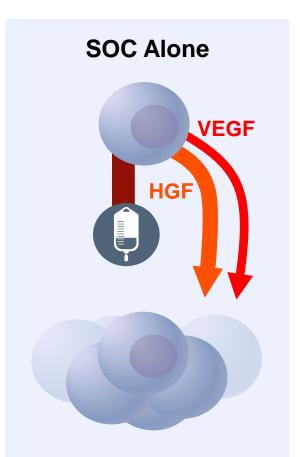
Differentiation & Potential Benefit

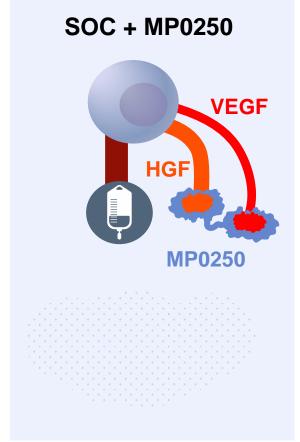
- Ideal for patients with likely VEGF- and/or HGF-mediated escape from previous treatment
- Can be combined with standard therapy



MP0250 Blocks Tumor Escape



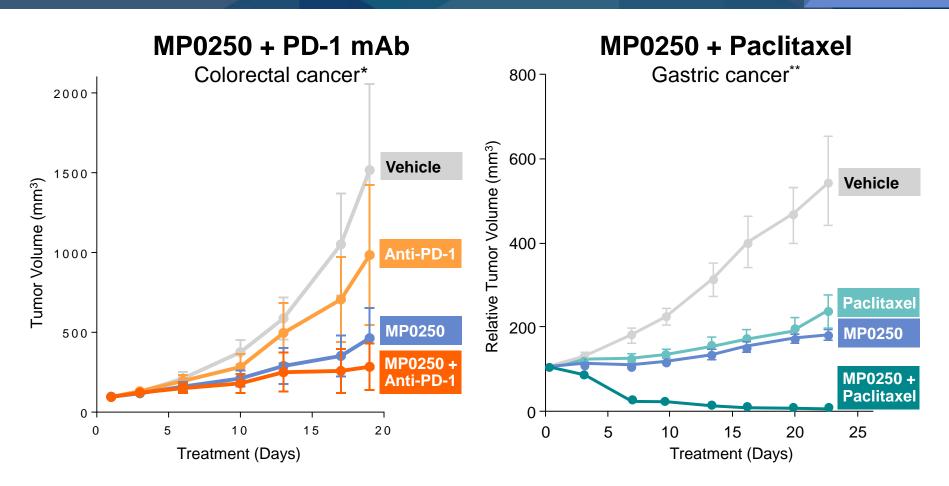






MP0250: Combination with Chemotherapy and Biologics Across Diverse Cancers

MP0250



MP0250 has also been tested in preclinical models of renal, liver and lung cancer



^{*}MC38 syngeneic mouse model; **Patient-derived xenograft: GXA 3027.

MP0250: Good Tolerability and Signs of Efficacy in Phase 1 Solid Tumor Study

MP0250

Tolerability

- MTD determined (8 mg/kg/q2w)
- Main AEs consistent with profound VEGF pathway inhibition
 - Hypertension (66%), partially Grade 3
 - Proteinuria (29%), mainly Grade 1 or 2

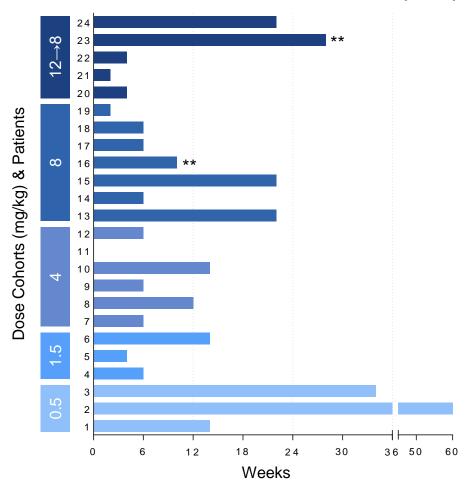
Systemic data

- Half-life: 12 days
- No clearing or neutralizing ADA

Efficacy

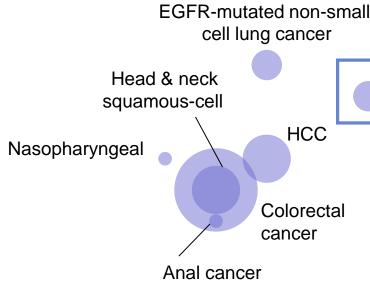
- Significant reductions in tumor volume in 2 patients with 1 confirmed PR
- Stable disease at ≥12 wk in 10 patients (42%)

Treatment Duration of Individual Patients (N=24)*



*Study ongoing. Data cut-off June 2016 (N=24 patients). **Ongoing.





Multiple myeloma

Pursuing MP0250 for MM based on:

- Strong biological & commercial rationale
- Area of unmet medical need endorsed by KOLs
- High feasibility of study execution with early efficacy read-out

Feasibility of internal clinical development*

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

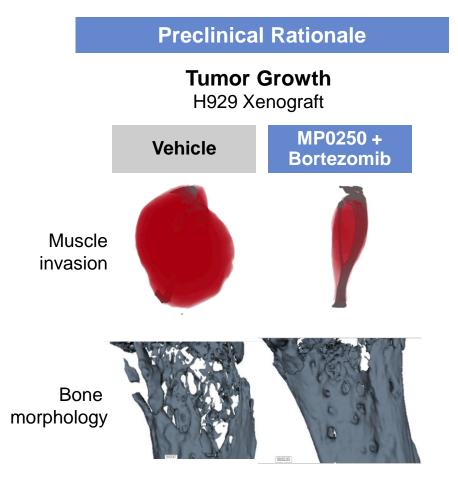
*Based on internal assessment on speed to market and complexity of development program.

Potential of gastric cancer, renal cancer and other cancers under evaluation.



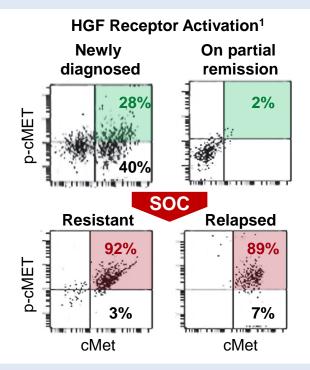
Preclinical and Clinical Data Support MP0250 + SOC for Multiple Myeloma

MP0250



Clinical Rationale

HGF Rationale



VEGF Rationale

A small MM study of bevacizumab (Avastin®) + bortezomib (Velcade®) demonstrated benefit over bortezomib alone²

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



MP0274: Killing Her2+ Cells with New MoA

MP0274

MP0274

- Multi-DARPin® protein binding two distinct HER2 epitopes
- Indications: patients with HER2-addicted tumors
- Molecular Partners holds all rights

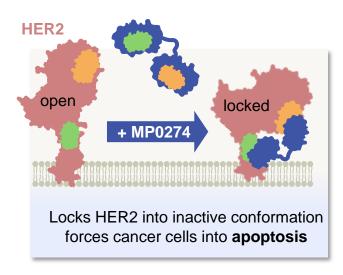
Development Stage

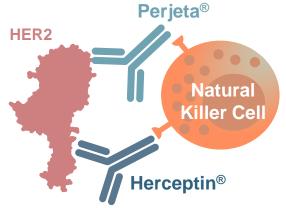
 First regulatory submission completed Q4/2016

Differentiation & Potential Benefit

- Induces apoptosis (cell death) in Her2 positive tumor cells without ADCC*
- New MoA may help patients not adequately responding to current therapies

DARPin® Handcuff as Master Switch



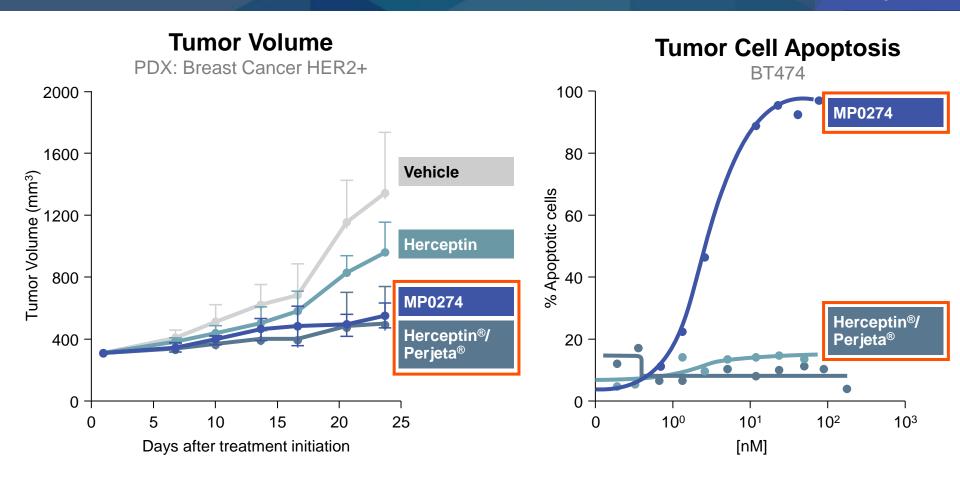




^{*}ADCC, antibody dependent cell-mediated cytotoxicity.

MP0274 Kills by Apoptosis, Not ADCC

MP0274



- MP0274 is as efficacious as SOC without the help of the immune system
- New MoA may help patients not adequately responding to current therapies

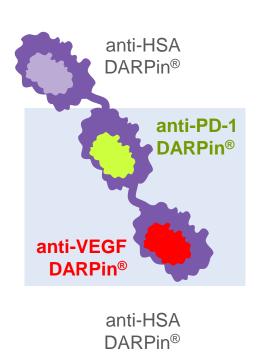




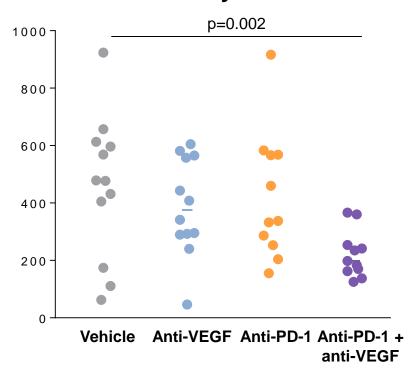


Activity of PD-1 and VEGF Multi-DARPin® Protein

PD-1/VEGF



Individual Tumor Volume, Day 10



PD-1 and VEGF show additive and/or synergistic activity

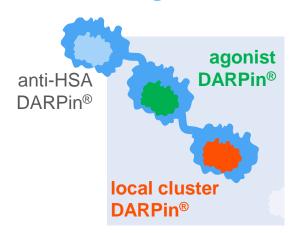


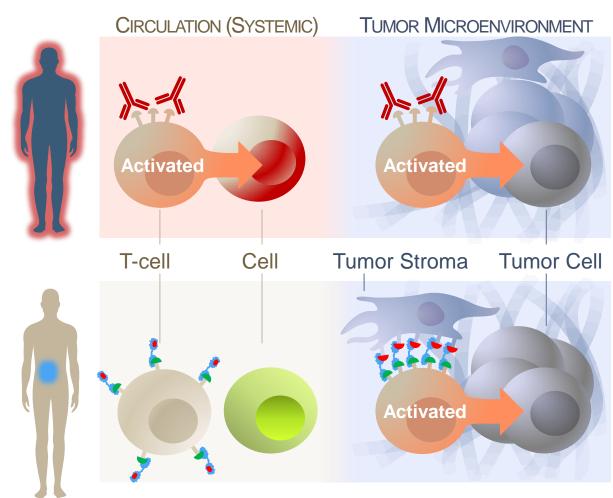
Unleashing Potential of Agonists in I/O

Agonistic mAb: Limitations



Tumor-localized DARPin® Agonists





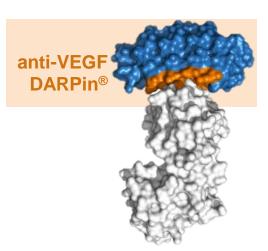






Abicipar

- Long-acting pegylated mono-DARPin[®] protein blocking VEGF
- Indications: Wet AMD & DME
- Global license agreement with Allergan
- All development costs with Allergan



Development Stage

- Phase 3
 - 2 registration-enabling studies in wet AMD initiated July 2015
- Phase 2
 - DME data presented at AAO 2016, Start of Phase 3 in 2017

Market & Potential Differentiation

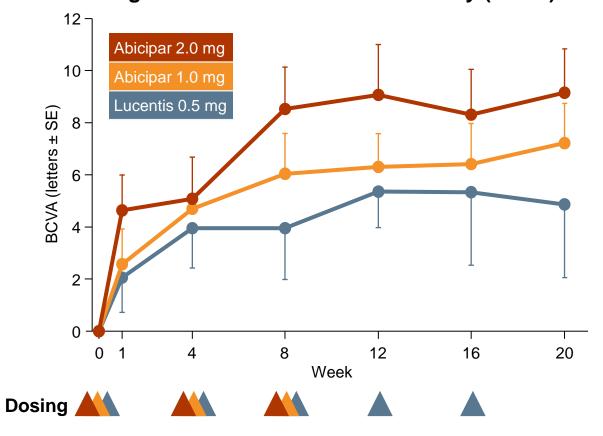
- Current anti-VEGFs (Lucentis & Eylea) market: > 8 bn USD *
- SOC require intensive monitoring & frequent intravitreal injection
- Significant unmet medical need for less frequent injections and doctors visits



Phase 2 Data Suggest Quarterly Dosing for Wet AMD

Abicipar

Change of Best-Corrected Visual Acuity (BCVA)*



Safety Data

Vision gain (letters)		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 Ph 3 trials

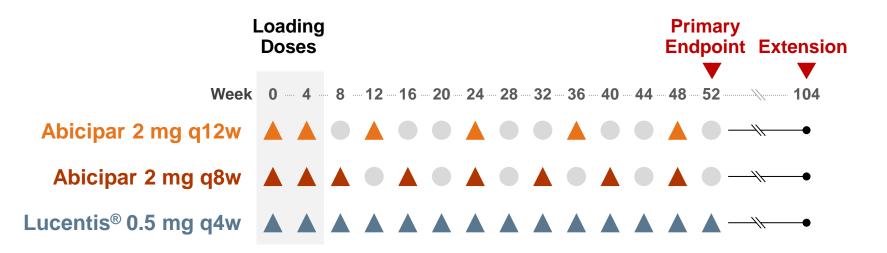
Allergan, 12 August 2014.



^{*}Study not powered to reach statistical significance; †Ocular inflammation. AE, adverse event.

CEDAR and SEQUOIA: Abicipar Registration Studies in Wet AMD

Abicipar



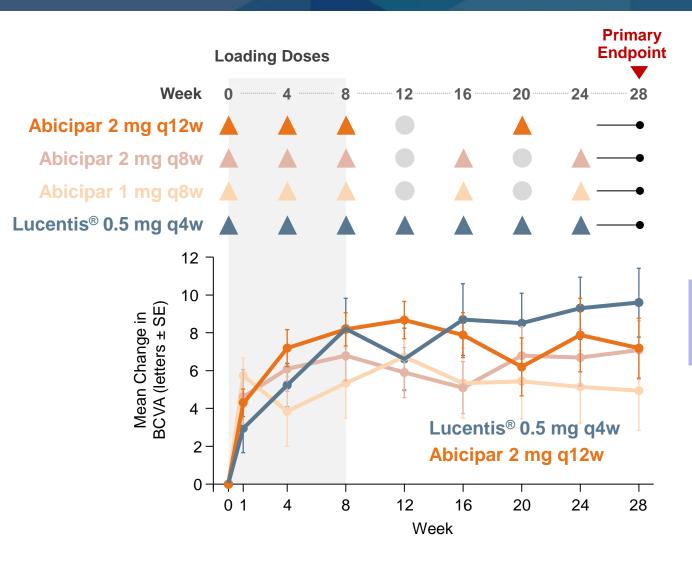
- 2 parallel, randomized, double-blind phase 3 studies
 - Expected global enrollment: 900 patients/study
 - Estimated study completion: Aug 2018 expected launch in 2020*
- Drug Safety Monitoring Committee (DSMC): no changes recommended Q4/16
- Next milestone: full enrollment of the study expected Aug 2017



^{*}Abicipar under development and control of Allergan.

Phase 2 Data: Long Duration of Action in DME

Abicipar



Vision gain (letters)	Safety
Wk 28	AEs (n/N)
7.2	4/45
7.1	5/41
4.9	7/43
9.6	0/21

The abicipar formulation has been further optimized for safety for use in Ph 3 trials



AGN View on Abicipar at JPM 2017

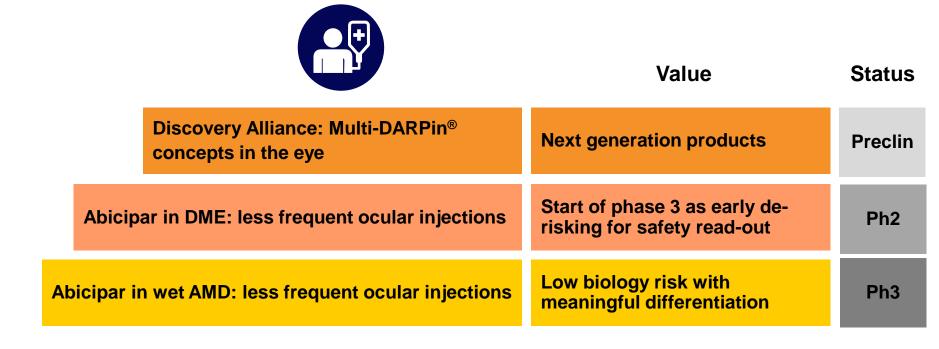
STRONG R&D PIPELINE TO DRIVE FUTURE GROWTH WITH "6 STARS" IN PHASE 3 IN 2017







DARPin® Strategy in Ophthalmology



Extract from ALLERGAN Presentation; JP Morgan Conference; January 9, 2017 by Brent Saunders; Chairman and CEO





Recombinant designed ankyrin repeat protein. Potent blocker of all forms of soluble VEGE-A

2020

2022

\$1.5B-\$3I

- Reduction in injection burden is a significant unmet need
- · Offers sustained efficacy with fewer injections







Outlook 2017 & Beyond

	2017	2018
MP0250: Multiple Myeloma	Initial safety data Ph2	Initial efficacy data Ph2
MP0250: additional solid tumor ind.	Submission for Ph2	Initial data Ph2
MP0274: Her2 multi-DARPin®	First dosing in Ph1	Initial data Ph1
PD-1/VEGF multi-DARPin®		
Tumor-restricted agonist	Preclinical data	
Several discovery programs		
MP0230: IL-13&IL-17 multi-DARPin®	Decision on development strategy	
Abicipar*: wet AMD	Full enrollment of Ph3	1-year efficacy data Ph3
Abicipar*: DME	Start of Ph3	

Cash CHF 186mn (Q3/16)



Financed well beyond key value inflection points

^{*}Abicipar under development and control of Allergan.

Conclusions



- Balanced & differentiated clinical DARPin® portfolio:
 - Abicipar in phase 3 in wet AMD and phase 2 concluded in DME
 - MP0250 phase 2 submitted in MM and solid tumor phase 2 in prep.
 - MP0274 phase 1 submitted in Her2 positive cancers
- Broad DARPin® portfolio in immuno-oncology



- Financed well beyond key value inflection points
- Full pipeline allows exploration of collaboration opportunities



- Strong and experienced team
- Culture of teamwork and «science and patients first»



With proof of platform, we now focus on making the "DARPin® Difference" real for patients





