

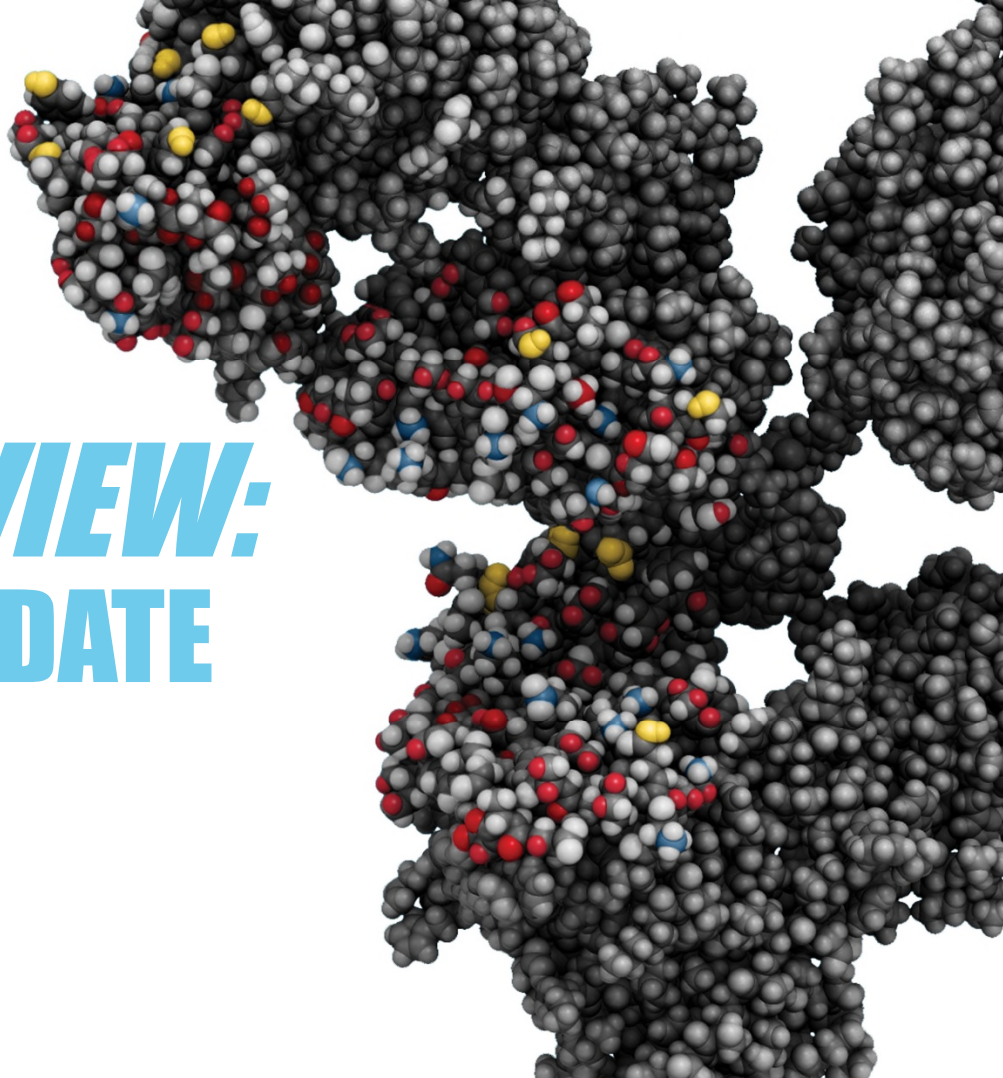
Morgan Lewis

***BLOCKBUSTER
BIOLOGICS REVIEW:
QUARTERLY IPR UPDATE***

Christopher Betti, Ph.D.

Robin Silva

April 2018

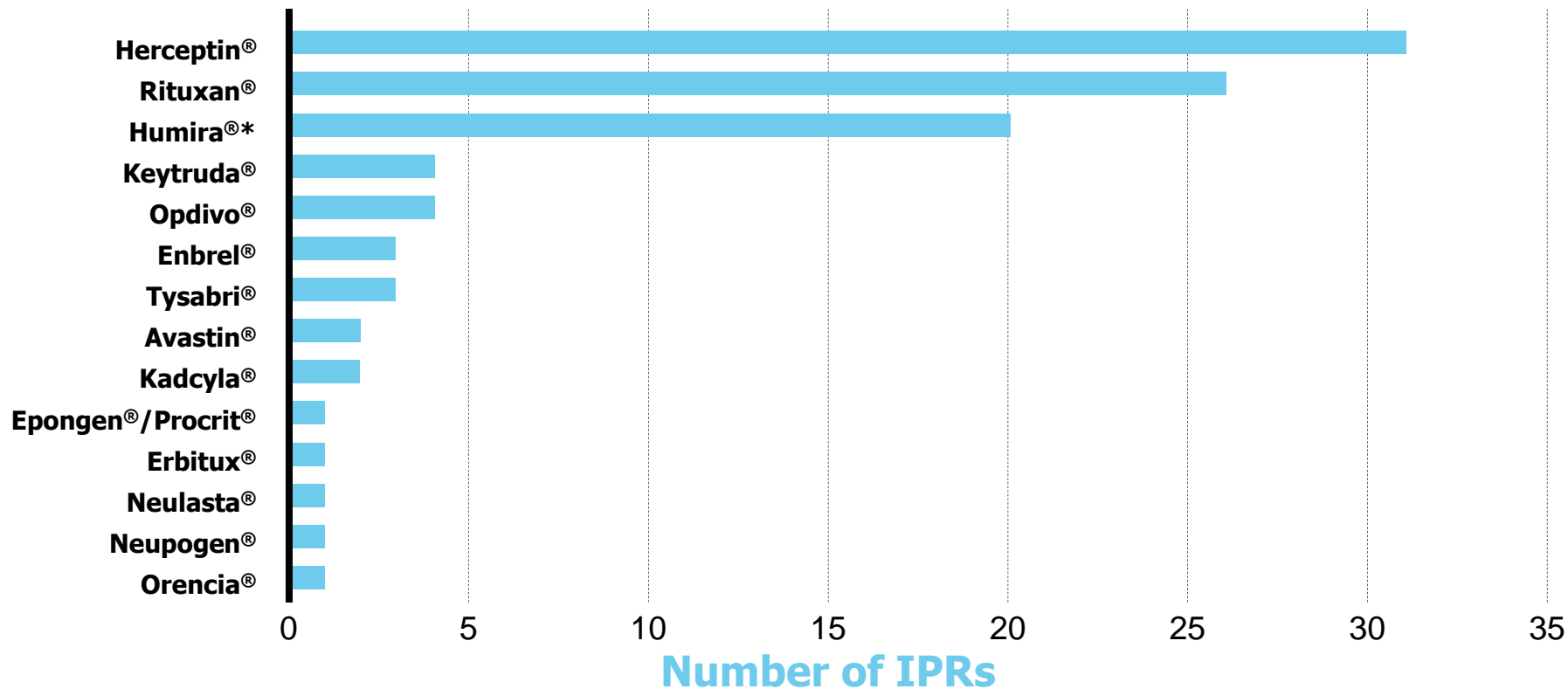


Introduction

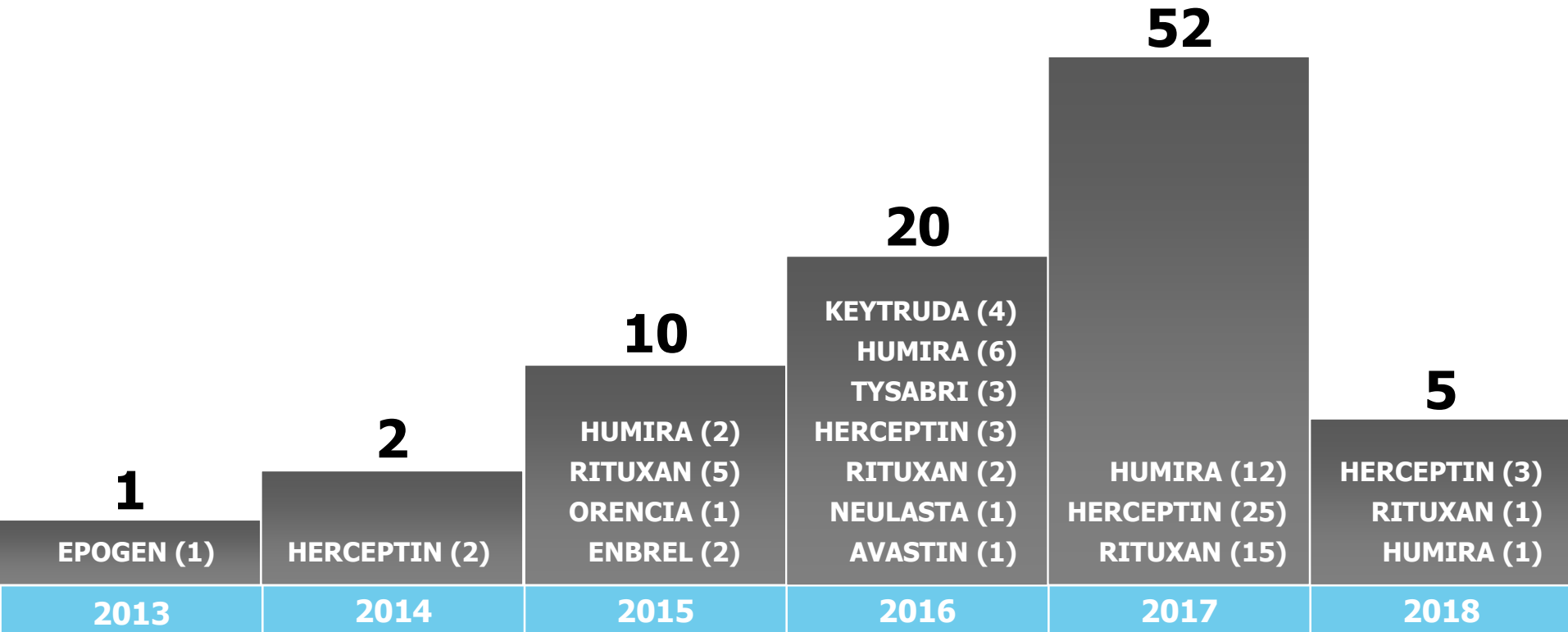
- > Welcome to the first of an ongoing series of brief updates relating to IPR challenges to blockbuster biologics.
- > In 2018, seven IPRs have been denied institution, while five have been instituted. Consequently, the current institution rate for IPR challenges to biologics patents is 52%. Further, of those IPRs instituted and that have gone to final written decision (FWD), 50% have resulted in more than one claim being held unpatentable.
- > Some other highlights thus far in 2018:
 - > **RITUXAN:** A PTAB FWD held that claims directed to a method of treating RA with rituximab and methotrexate were **valid**
 - > **HERCEPTIN:** A PTAB FWD held that claims directed to methods for purifying proteins with CH2/CH3 domains were **invalid**
 - > **AVASTIN:** A PTAB FWD held that claims directed to methods of treating cancer by administering bevacizumab and assessing the subject for gastrointestinal perforation were **invalid**
 - > **NEULASTA:** In a mixed PTAB FWD, certain claims directed to methods of refolding proteins were **invalid**, while one claim was held **valid**
- > We hope you find this update informative and, as always, please feel free to reach out to us with any questions.

- Chris and Robin

Biologics-Related IPRs by Reference Product

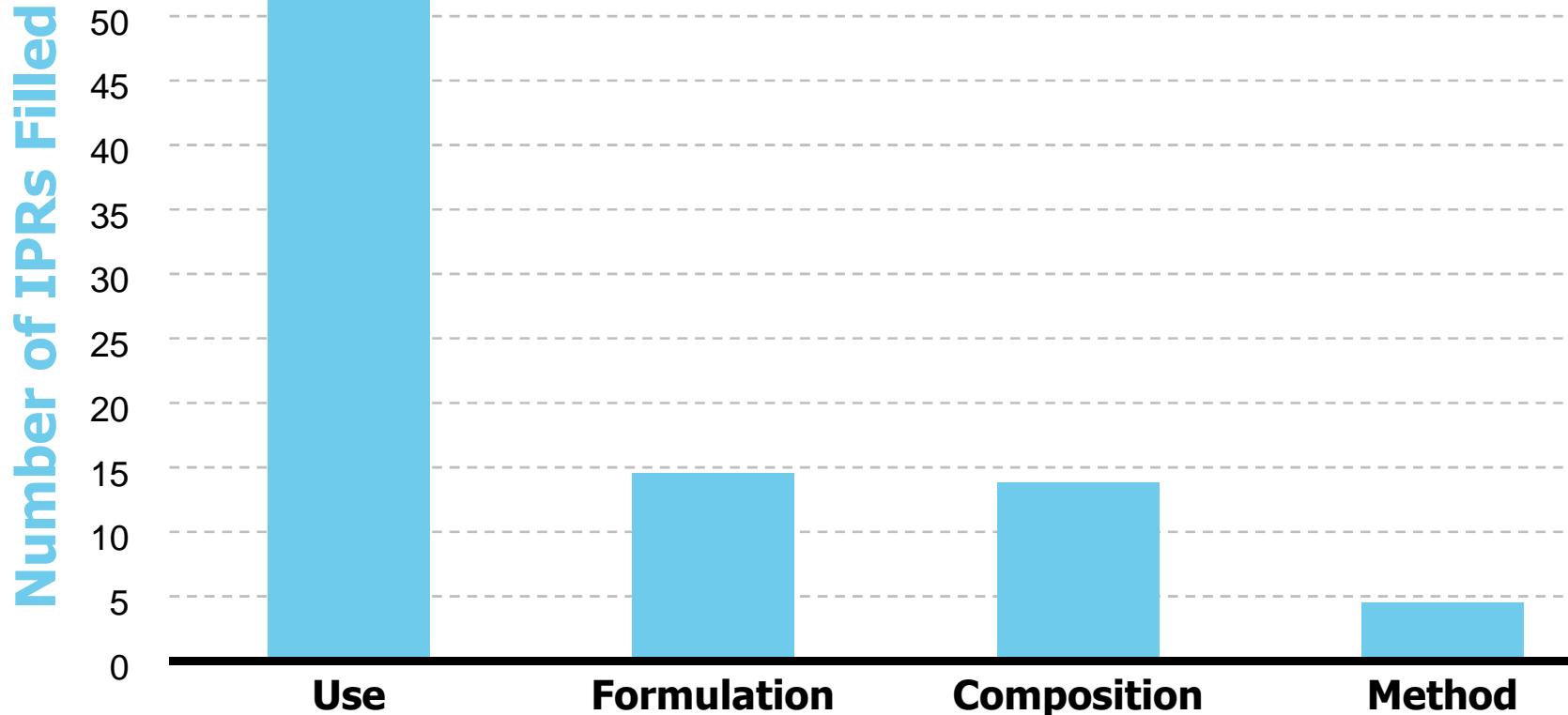


Blockbuster Biologics: IPR Timeline



PTO Fiscal Year
(September–October)

Types of Claims Being Challenged



Blockbuster Antibodies: IPR Scorecard

Product (# IPRs)	Challenger	Pend. Inst.	Pet. Not Inst.	Sett. Term.	Inst.	FWD (invalid)	FWD (upheld)
Humira (21)	Amgen	0	2	-	-	-	-
	BI	0	-	-	2	2	-
	Coherus	0	7	2	3	3	-
	Sandoz	5	-	-	-	-	-
Rituxan (23)	BI	0	1	2	-	-	-
	Celltrion	0	6	2	2	-	1
	Pfizer	4	2	-	2	-	1
	Sandoz	2	-	-	-	-	-
Herceptin (34)	Phigenix	0	1	-	1	-	1
	Mylan	0	-	2	-	-	-
	Hospira	0	2	-	4	-	-
	Celltrion	0	-	1	6	-	-
	Pfizer	7	-	2	1	-	-
	Samsung	2	-	-	3	-	-
	BI	2	-	-	-	-	-
Tysabri (3)	Swiss Pharma	0	3	-	-	-	-
Avastin (1)	Hospira	0	-	-	1	-	-
Orencia (1)	Momenta	0	-	-	1	-	1
Neulasta (1)	Apotex	0	-	-	1	1	1
Enbrel (3)	Kyle Bass	0	1	-	-	-	-
	Coherus	2	-	-	-	-	-
Epogen (1)	Hospira	0	-	1	-	-	-
Keytruda (4)	Merck	0	0	4	-	-	-
TOTALS		24	25	12	27	6	5

Contacts



Christopher Betti, Ph.D.

Chicago

T: +1.312.324.1449

christopher.betti@morganlewis.com



Robin Silva

San Francisco

T: +1.415.442.1379

robin.silva@morganlewis.com

APPENDIX

Legend

P	Petitioner
PO	Patent Owner
2- Consid.	Secondary Considerations raised by Patent Owner to support nonobviousness
U	Use
F	Formulation
C	Composition
M	Method
FWD	Final Written Decision
Pending	IPR has been instituted and is pending an FWD
Pending Inst. Dec.	IPR has been filed and is pending a decision on institution
Institution Denied	PTAB has denied institution of IPR
J/W	Joined with



HUMIRA

> 21 IPRs filed challenging 13 different patents

AbbVie Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,916,157	Amgen	2015-01514	1/0	Y	F (20-150 mg)	Institution Denied
8,916,158	Amgen	2015-01517	1/0	Y	F (20-150 mg)	Institution Denied
8,889,135	1) Coherus	1) 2016-00172	1) 2/5	1) Y	1) U (RA)	1) FWD- Claims Invalid
	2) Boehringer Ingelheim	2) 2016-00408	2) 2/5	2) Y	2) U	2) FWD- Claims Invalid
	3) Boehringer Ingelheim	3) 2016-00409	3) 2/5	3) Y	3) U	3) FWD- Claims Invalid
9,017,680	Coherus	2016-00188	3/5	Y	U (RA)	FWD- Claims Invalid
9,073,987	Coherus	2016-00189	3/5	Y	U (RA)	FWD- Claims Invalid

> 21 IPRs filed challenging 13 different patents

AbbVie Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
9,114,166	Coherus	2016-01018	2/0	Y	F (50 mg)	Institution Denied
9,085,619	Coherus	1) 2017-00822 2) 2017-00823 3) 2017-00826 4) 2017-00827 5) 2017-01008 6) 2017-01009	1) 1/0 2) 1/0 3) 2/NA 4) 2/NA 5) 2/0 6) 2/0	1) Y 2) N 3) Y 4) Y 5) Y 6) Y	F (Bufferless)	1-2) Institution Denied 3-4) IPRs Dismissed April 11, 2017 * 5-6) Institution Denied
9,067,992	Sandoz	2017-02106	1/NA	Y	U (Psoriatic Arthritis)	Pending Inst. Dec.
8,911,737	Sandoz	2017-01987	6/NA	Y	U (Crohn's)	Institution Denied
8,974,790	Sandoz	2017-01988	6/NA	Y	U (UC)	Institution Denied
9,090,689	Sandoz	2017-02105	3/NA	Y	U (Plaque psoriasis)	Pending Inst. Dec.

> 21 IPRs filed challenging 13 different patents

AbbVie Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,802,100	Sandoz	2017-01823	5/NA	N	F (45-150 mg)	Institution Denied
9,512,216	Sandoz	1) 2017-01824	1) 5/NA	1) Y	U (plaque psoriasis)	1) Institution Denied
		2) 2018-00002	2) 2/NA	2) Y		2) Pending Inst. Dec.

Representative Claim

1. A stable liquid aqueous pharmaceutical formulation comprising
 - a) a human IgG1 anti-human Tumor Necrosis Factor alpha (TNF α) antibody, or an antigen-binding portion thereof, at a concentration of 20 to 150 mg/ml,
 - b) a tonicity agent,
 - c) a surfactant, and
 - d) a buffer system having a pH of 4.0 to 8.0, wherein the antibody comprises the light chain variable region (LCVR) and the heavy chain variable region (HCVR) of D2E7.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Amgen	2015-01514	1-8, 10-13, 15-30	None	1/0	Y	F	Institution Denied

Representative Claim

1. A stable liquid aqueous pharmaceutical formulation comprising
 - a) a human IgG1 anti-human TNF α antibody, or an antigen-binding portion thereof, at a concentration of 20 to 150 mg/ml,
 - b) a tonicity agent,
 - c) a surfactant, and
 - d) a buffer system having a pH of 4.0 to 8.0, wherein the antibody comprises the LCVR and HCVR of D2E7.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Amgen	2015-01514	1-8, 10-13, 15-30	None	1/0	Y	F	Institution Denied

Representative Claim

1. A method for treating rheumatoid arthritis in a human subject by administering subcutaneously a total body dose of 40 mg of a human anti-TNF α antibody once every 13–15 days for a period sufficient to treat the rheumatoid arthritis, wherein the anti-TNF α antibody comprises an IgG1 heavy chain constant region; a variable light (VL) chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:7, a CDR2 having the amino acid sequence of SEQ ID NO:5, and a CDR3 having the amino acid sequence of SEQ ID NO:3; and a variable heavy (VH) chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:8, a CDR2 having the amino acid sequence of SEQ ID NO:6, and a CDR3 having the amino acid sequence of SEQ ID NO:4.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2016-00172	1-5	§ 103 for all claims	2/5	N	U	FWD- Claims Invalid
Boehringer Ingelheim	2016-00408	1-5	§ 103 for all claims	2/5	Y	U	FWD- Claims Invalid
Boehringer Ingelheim	2016-00409	1-5	§ 103 for all claims	2/5	Y	U	FWD- Claims Invalid

Representative Claim

1. A method of reducing signs and symptoms in a patient with moderately to severely active rheumatoid arthritis, comprising:
 - a) administering to said patient, in combination with methotrexate, a human anti-TNF α antibody,
 - b) wherein the human anti-TNF α antibody is administered subcutaneously in a total body dose of 40 mg once every 13–15 days, and
 - c) wherein the anti-TNF α antibody comprises an IgG1 heavy chain constant region; a VL chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:7, a CDR2 having the amino acid sequence of SEQ ID NO:5, and a CDR3 having the amino acid sequence of SEQ ID NO:3; and a VH chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:8, a CDR2 having the amino acid sequence of SEQ ID NO:6, and a CDR3 having the amino acid sequence of SEQ ID NO:4.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2016-00188	1-4	§ 103 for all claims	3/5	N	U	FWD- Claims Invalid

Representative Claim

1. A method of reducing signs and symptoms in a patient with moderately to severely active rheumatoid arthritis, comprising:
 - a) administering to said patient, in combination with methotrexate, a human anti-TNF α antibody,
 - b) wherein the human anti-TNF α antibody is administered subcutaneously in a total body dose of 40 mg once every 13–15 days, and
 - c) wherein the anti-TNF α antibody comprises an IgG1 heavy chain constant region; a VL chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:7, a CDR2 having the amino acid sequence of SEQ ID NO:5, and a CDR3 having the amino acid sequence of SEQ ID NO:3; and a VH chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:8, a CDR2 having the amino acid sequence of SEQ ID NO:6, and a CDR3 having the amino acid sequence of SEQ ID NO:4.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2016-00188	1-2	§ 103 for all claims	3/5	N	U	FWD- Claims Invalid

Representative Claim

1. A stable liquid aqueous pharmaceutical formulation comprising a human anti-human TNF α IgG1 antibody at a concentration of 50 mg/ml, wherein the antibody comprises the LCVR and HCVR of D2E7, and a buffer system; wherein the formulation is isotonic, suitable for single-use subcutaneous injection, and has a pH of 4.0 to 8.0.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2016-01018	1-4, 6-10, 13-16, 23-26, 28	None	2/0	Y	F	Institution Denied

Representative Claim

16. An aqueous pharmaceutical formulation comprising:
- a) an anti-TNF α antibody comprising an LCVR having a CDR3 domain comprising the amino acid sequence of SEQ ID NO:3, a CDR2 domain comprising the amino acid sequence of SEQ ID NO:5, and a CDR1 domain comprising the amino acid sequence of SEQ ID NO:7; and an HCVR having a CDR3 domain comprising the amino acid sequence of SEQ ID NO:4, a CDR2 domain comprising the amino acid sequence of SEQ ID NO:6, and a CDR1 domain comprising the amino acid sequence of SEQ ID NO:8, wherein the concentration of the antibody is 50 to 200 mg/ml; and
 - b) water; wherein the formulation does not comprise a buffering system.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2017-00822	16-19, 24-30	NA	1	Y	F	Institution Denied
Coherus	2017-00823	16-19, 24-30	NA	1	N	F	Institution Denied

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2017-00826	16-19, 24-30	NA	2/NA	Y	F	Dismissed
Coherus	2017-00827	16-19, 24-30	NA	2/NA	Y	F	Dismissed
Coherus	2017-01008	16-19, 24-30	NA	2/1	Y	F	Institution Denied
Coherus	2017-01009	16-19, 24-30	NA	2/1	Y	F	Institution Denied

Representative Claim

1. A method of treatment of moderate to severe active psoriatic arthritis in adult patients, wherein each said patient has ≥ 3 swollen and ≥ 3 tender joints prior to the treatment and has failed NSAID therapy, comprising subcutaneously administering to each said patient 40 mg of adalimumab every other week, wherein 23% of said patients achieve 70% reduction in American College of Rheumatology (ACR) score at week 24 of the treatment.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Sandoz	2017-02106	1, 2, 5-7	NA	1/NA	Y	U	Pending Inst. Dec.

Representative Claim

1. A method for treating Crohn's disease in a human subject by administering subcutaneously a total body dose of 40 mg of a human anti-TNF α antibody once every 13–15 days for a period sufficient to treat Crohn's disease, wherein the anti-TNF α antibody comprises an IgG1 heavy chain constant region; a VL chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:7, a CDR2 having the amino acid sequence of SEQ ID NO:5, and a CDR3 having the amino acid sequence of SEQ ID NO:3; and a VH chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:8, a CDR2 having the amino acid sequence of SEQ ID NO:6, and a CDR3 having the amino acid sequence of SEQ ID NO:4.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Sandoz	2017-01987	1-6	NA	6/NA	Y	U	Institution Denied

Representative Claim

1. A method for treating ulcerative colitis in a human subject by administering subcutaneously a total body dose of 40 mg of a human anti-TNF α antibody once every 13–15 days for a period sufficient to treat the ulcerative colitis, wherein the anti-TNF α antibody comprises an IgG1 heavy chain constant region; a VL chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:7, a CDR2 having the amino acid sequence of SEQ ID NO:5, and a CDR3 having the amino acid sequence of SEQ ID NO:3; and a VH chain region comprising a CDR1 having the amino acid sequence of SEQ ID NO:8, a CDR2 having the amino acid sequence of SEQ ID NO:6, and a CDR3 having the amino acid sequence of SEQ ID NO:4.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Sandoz	2017-01988	1-6	NA	6/NA	Y	U	Institution Denied

Representative Claim

1. A method of administering adalimumab for treatment of moderate to severe chronic plaque psoriasis by filling adalimumab into vessels and subcutaneously administering 40 mg of said adalimumab every other week.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Sandoz	2017-02105	1, 4, 7, 10, 13, 16, 19	NA	3/NA	Y	U	Pending Inst. Dec.

Representative Claim

1. A stable liquid aqueous pharmaceutical formulation comprising
 - a) a human IgG1 anti-human TNF α antibody, or an antigen-binding portion thereof, at a concentration of 45 to 150 mg/ml,
 - b) a polyol,
 - c) a polysorbate at a concentration of 0.1 to 10 mg/ml, and
 - d) a buffer system having a pH of 4.5 to 7.0, wherein the antibody comprises the LCVR and HCVR of D2E7.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Sandoz	2017-01823	1-29	NA	4/NA	N	F	Institution Denied

Representative Claim

1. A method for treating moderate to severe chronic plaque psoriasis by subcutaneously administering to an adult patient an initial dose of 80 mg of adalimumab, followed by 40 mg of adalimumab every other week, starting one week after said first dosing, wherein the patient achieves at least Psoriasis Area and Severity Index (PASI) 75 response at week 12 of the treatment.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Sandoz	2017-01824	1-16	NA	5/NA	Y	U	Pending Inst. Dec.

RITUXAN

> 23 IPRs filed challenging 8 different patents

Genentech Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
7,820,161	1) BI	1) 2015-00415	1) 1/0	1) Y	1) U (RA)	1) Petitioner's adverse judgment 2) Petitioner filed motion to dismiss 3) FWD- Claims Valid 4) FWD- Claims Valid (J/W '614)
	2) Celltrion	2) 2015-01744	2) 1/0	2) NA	2) U	
	3) Celltrion	3) 2016-01614	3) 2/NA	3) NA	3) U	
	4) Pfizer	4) 2017-01115	4) 3/NA	4) Y	4) U	
7,976,838	1) BI	1) 2015-00417	1) 1/0	1) Y	1) U (RA)	1) Petitioner's adverse judgment 2) Petitioner filed motion to dismiss 3) Institution Denied 4) Pending Inst. Dec. 5) Pending Inst. Dec. 6) Pending Inst. Dec.
	2) Celltrion	2) 2015-01733	2) 1/0	2) NA	2) U	
	3) Celltrion	3) 2016-01667	3) 2/NA	3) NA	3) U	
	4) Pfizer	4) 2017-01923	4) 3/NA	4) Y	4) U	
	5) Sandoz	5) 2017-02042	5) 2/NA	5) Y	5) U	
	6) Sandoz	6) 2017-02036	6) 2/NA	6) Y	6) U	

> 23 IPRs filed challenging 8 different patents

Genentech Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,329,172	1) BI	1) 2015-00418	1) 1/0	1) Y	1) U (lymphoma)	1) Institution Denied
	2) Celltrion	2) 2017-01093	2) 2/NA	2) Y	2) U	2) Institution Denied
	3) Pfizer	3) 2017-01166	3) 2/NA	3) Y	3) U	3) Institution Denied
	4) Pfizer	4) 2018-00285	4) 3/0	4) Y	4) U	4) Pending Inst. Dec.
8,557,244	1) Celltrion	1) 2017-01094	1) 2/0	1) Y	1) U (lymphoma)	1) Institution Denied
	2) Pfizer	2) 2017-01167	2) 2/0	2) Y	2) U	2) Institution Denied
9,296,821	Celltrion	2017-01095	2/0	Y	U (lymphoma)	Instituted

> 23 IPRs filed challenging 8 different patents

Genentech Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
7,682,612	1) Celltrion	1) 2017-01227	1) 7/NA	1) Y	1) U (leukemia)	1) Institution Denied
	2) Celltrion	2) 2017-01230	2) 7/0	2) Y	2) U	2) Institution Denied
	3) Pfizer	3) 2017-02126	3) 2/NA	3) Y	3) U	3) Pending Inst. Dec.
8,206,711	1) Celltrion	1) 2017-01229	1) 7/0	1) Y	1) U (leukemia)	1) Institution Denied
	2) Pfizer	2) 2017-02127	2) 2/NA	2) Y	2) U	2) Pending Inst. Dec.
8,821,873	Pfizer	2017-01168	2/NA	Y	U (lymphoma)	Instituted

Representative Claim

1. A method of treating rheumatoid arthritis in a human by administering:
 - a) more than one intravenous dose of a therapeutically effective amount of rituximab; and
 - b) methotrexate.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Boehringer Ingelheim	2015-00415	1-12	§103 for claims 1, 2, 5, 6, 9, and 10	1/0	N	U	Adverse Judgment
Celltrion	2015-01744	1-51, 2, 5, 6, 9, and 10	None	1	N	U	Dismissed

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Celltrion	2016-01614	1-12	§103 for claims 1-3, 5-7, 9-11	2	Y	U	FWD- Claims Valid
Pfizer	2017-01115	1-12	§103	3	Y	U	FWD- Claims Valid (J/W '614)

Representative Claim

1. A method of treating rheumatoid arthritis in a human patient who experiences an inadequate response to a TNF α -inhibitor by administering an antibody that binds to CD20, wherein the antibody is administered as two intravenous doses of 1000 mg.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Boehringer Ingelheim	2015-00417	1-14	§103 for all claims	1/0	Y	U	Adverse Judgment
Celltrion	2015-01733	1-14	NA	1	Y	U	Dismissed
Celltrion	2016-01667	1-14	NA	2/	Y	U	Denied Institution
Pfizer	2017-01923	1-14	NA	2/	Y	U	Pending Inst. Dec.
Sandoz	2017-02036	1-14	NA	2/	Y	U	Pending Inst. Dec.
Sandoz	2017-02042	1-14	NA	2/	Y	U	Pending Inst. Dec.

Representative Claim

1. A method of treating low-grade B-cell non-Hodgkin's lymphoma (NHL) in a human patient by administering chemotherapy consisting of cyclophosphamide, vincristine, and prednisone (CVP therapy) to which the patient responds, followed by rituximab maintenance therapy, wherein the maintenance therapy comprises four weekly administrations of rituximab at a dose of 375 mg/m² every 6 months, and wherein the maintenance therapy is provided for 2 years.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Boehringer Ingelheim	2015-00418	1	NA	1/0	N	U	Institution Denied
Celltrion	2017-01093	1	NA	2	Y	U	Institution Denied
Pfizer	2017-01166	1	NA	2	Y	U	Institution Denied
Pfizer	2018-00285	1	NA	2	Y	U	Pending Inst. Dec.

Representative Claim

1. A method of treating a patient with diffuse large cell lymphoma by administering an unlabeled chimeric anti-CD20 antibody and CHOP (cyclophosphamide, hydroxydaunorubicin/doxorubicin, vincristine, and prednisone/prednisolone) chemotherapy to the patient, wherein the patient is >60 years old and has bulky disease (tumor >10 cm in diameter).

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Celltrion	2017-01094	1-2	NA	2/0	Y	U	Institution Denied (Request for Rehearing Denied)
Pfizer	2017-01167	1-2	NA	2/0	Y	U	Institution Denied

Representative Claim

1. A method for treating low-grade or follicular NHL by administering to a patient a therapeutically effective amount of rituximab during a chemotherapeutic regimen, wherein the chemotherapeutic regimen consists of CVP therapy, wherein the method comprises administering 375 mg/m² of rituximab, and wherein the method provides a beneficial synergistic effect in the patient.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Celltrion	2017-01095	1-6	NA	2/0	Y	U	Instituted
Pfizer	2018-00186	1-6	NA	2/	Y	U	Pending Inst. Dec.

Representative Claim

1. A method of treating chronic lymphocytic leukemia (CLL) in a human patient by administering an anti-CD20 antibody in an amount effective to treat the CLL, wherein the method does not include treatment with a radiolabeled anti-CD20 antibody.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Celltrion	2017-01227	23-57	NA	7/NA	Y	U	Institution Denied
Celltrion	2017-01230	1-22, 58-60	NA	7/0	Y	U	Institution Denied
Pfizer	2017-02126	1-13, 15-35, 37-60	NA	4/0	Y	U	Pending Inst. Dec.

Representative Claim

1. A method of treating CLL in a human patient by administering rituximab in an amount effective to treat the CLL, wherein the rituximab is administered to the patient at a dosage of 500 mg/m².

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Celltrion	2017-01229	1-9	NA	7/0	Y	U	Institution Denied
Pfizer	2017-02127	1-9	NA	4/0	Y	U	Pending Inst. Dec.

Representative Claim

1. A method of treating a patient with diffuse large cell lymphoma by administering anti-CD20 antibody and chemotherapy, wherein the patient is >60 years old, wherein the chemotherapy comprises CHOP, and wherein the anti-CD20 antibody is administered in combination with a stem cell transplantation regimen.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Pfizer	2017-01168	1-5	NA	2/NA	Y	U (lymphoma)	Instituted

HERCEPTIN

> 34 IPRs filed challenging 11 different patents

Gen/Immu. Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,337,856 (Kadcyla)	Phigenix	2014-00676	1/4	Y	C	FWD- Claims Valid
7,575,748	Phigenix	2014-00842	1/0	Y	U	Institution Denied
6,407,213	1)1) Mylan 2) Mylan 3) Celltrion 4) Celltrion 5) Pfizer 6) Pfizer 7) BI 8) BI 9) Samsung 10) Samsung	1) 2016-01693 2) 2016-01694 3) 2017-01373 4) 2017-01374 5) 2017-01488 6) 2017-01489 7) 2017-02032 8) 2017-02031 9) 2017-02139 10) 2017-02140	1) 2/0 2) 2/0 3) 2/4 4) 2/4 5) 5/4 6) 5/4 7) 1/0 8) 1/0 9) 6/NA 10) 6/NA	1) Y 2) Y 3) Y 4) Y 5) Y 6) Y 7) Y 8) Y 9) Y 10) Y	1) C 2) C 3) C 4) C 5) C 6) C 7) C 8) C 9) C 10) C	1) Terminated (Settled) 2) Terminated (Settled) 3) Instituted 4) Instituted 5) Instituted 6) Pending Inst. Dec. 7) Pending Inst. Dec. 8) Pending Inst. Dec. 9) Instituted (J/W '488) 10) Instituted (J/W '489)
7,807,799	Hospira	2016-01837	1) NA	NA	M	FWD- Claim Invalid

> 34 IPRs filed challenging 11 different patents

Gen/Immu. Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
7,846,441	1) Hospira 2) Celltrion 3) Pfizer 4) Pfizer	1) 2017-00731 2) 2017-01121 3) 2017-02063 4) 2018-00016	1) 4/NA 2) 3/NA 3) 1/NA 4) 1/NA	1) NA 2) Y 3) Y 4) Y	1) U 2) U 3) U 4) U	1) Institution Denied 2) Instituted 3) Instituted (J/W '121) 4) Pending Inst. Dec.
6,627,196	1) Hospira 2) Samsung Bioepis 3) Celltrion	1) 2017-00804 2) 2017-01958 3) 2017-01139	1) 2 2) 3/NA 3) 7/NA	1) Y 2) Y 3) Y	1) U 2) U 3) U	1) Instituted 2) Instituted (J/W '804) 3) Instituted
7,371,379	1) Hospira 2) Samsung Bioepis 3) Celltrion	1) 2017-00805 2) 2017-01959 3) 2017-01140	1) 2 2) 7/NA 3) 1/0	1) Y 2) Y 3) Y	1) U 2) U 3) U	1) Instituted 2) Instituted (J/W '805) 3) Instituted

> 34 IPRs filed challenging 11 different patents

Gen/Immu. Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,591,897	1) Pfizer 2) Pfizer 3) Celltrion	1) 2017-01726 2) 2017-01727 3) 2017-00959	1) 3/NA 2) 3/NA 3) 1/NA	1) Y 2) Y 3) Y	1) U 2) U 3) U	1) Institution Denied 2) Institution Denied 3) Terminated
6,339,142	1) Pfizer 2) Pfizer	1) 2017-02019 2) 2018-00330	1) 6/NA 2) 3/NA	1) Y 2) Y	1) C 2) C	1) Instituted 2) Pending Inst. Dec.
9,249,218	1) Pfizer 2) Pfizer	1) 2017-02020 2) 2018-00331	1) 6/NA 2) 1/NA	1) Y 2) Y	1) F 2) F	1) Instituted 2) Pending Inst. Dec.
7,892,549	1) Hospira 2) Hospira 3) Celltrion 4) Samsung Bioepis	1) 2017-00737 2) 2017-00739 3) 2017-01122 4) 2017-01960	1) 3/NA 2) 4/NA 3) 3/NA 4) 6/NA	1) NA 2) NA 3) Y 4) Y	1) U 2) U 3) U 4) U	1) Instituted 2) Institution Denied 3) Instituted 4) Instituted (J/W '737)

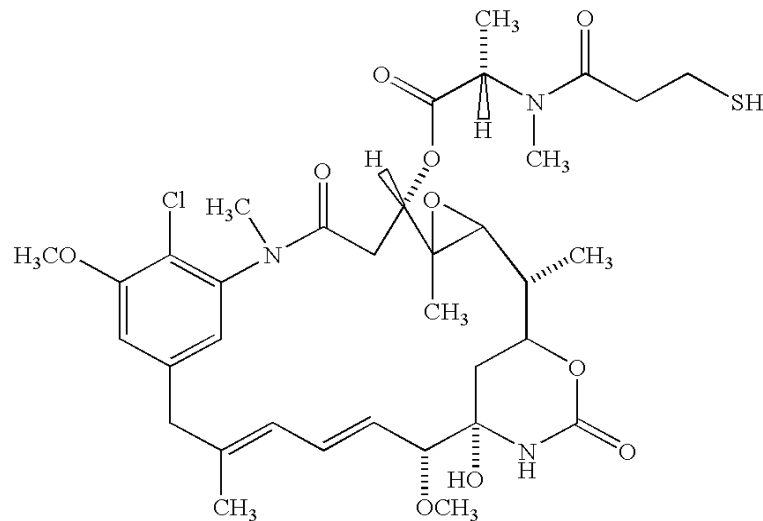
Representative Claim

1. An immunoconjugate comprising an anti-ErbB2 antibody conjugated to a maytansinoid, wherein the antibody is huMAb4D5-8.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Phigenix	2014-00676	1-8	§103 for all claims	1/4	N	C	FWD - Claims Valid

Representative Claim

1. A method for the treatment of a tumor in a mammal, comprising the steps of (i) identifying said tumor as being characterized by overexpression of an ErbB2 receptor and as being a tumor that does not respond, or responds poorly, to treatment with an anti-ErbB antibody, and (ii) intravenously administering to the mammal a therapeutically effective amount of a conjugate of a humanized antibody huMab 4D5-8 covalently linked via a thioether linking group with a maytansinoid DM1 having the structure at a dose of between about 0.2 mg/kg and about 10 mg/kg (antibody-maytansinoid conjugate weight/body weight) and at a frequency of dosing selected from the group of dosing frequencies consisting of bolus, less than about 1 time per week, one time per week, two times per week, more than two times per week, and continuous infusion, whereby said tumor characterized by overexpression of an ErbB2 receptor and that does not respond, or responds poorly, to treatment with an anti-ErbB antibody, is treated.



Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Phigenix	2014-00842	1-20, 25-27	NA	1/0	N	U	Institution Denied

Representative Claim

1. A humanized antibody variable domain comprising non-human Complementarity Determining Region (CDR) amino acid residues that bind an antigen incorporated into a human antibody variable domain, and further comprising a Framework Region (FR) amino acid substitution at a site selected from the group consisting of 4L, 38L, 43L, 44L, 58L, 62L, 65L, 66L, 67L, 68L, 69L, 73L, 85L, 98L, 2H, 4H, 36H, 39H, 43H, 45H, 69H, 70H, 74H, and 92H, utilizing the numbering system set forth in Kabat.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Mylan	2016-01693	1, 2, 4, 12, 25, 29-31, 33, 42, 60, 62-67, 69, 71-81	NA	2/4	Y	C	Settled
Mylan	2016-01694	1, 2, 4, 12, 25, 29-31, 33, 42, 60, 62-67, 69, 71-81	NA	2/4	Y	C	Settled
Celltrion	2017-01374	1-2, 4, 12, 25, 29-31, 33, 42, 60, 62-67, 69, 71-81	NA	2/4	Y	C	Instituted
Celltrion	2017-01373	1-2, 4, 12, 25, 29-31, 33, 42, 60, 62-67, 69, 71-81	NA	2/4	Y	C	Instituted

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Pfizer	2017-01488	1-2, 4, 12, 25, 29-31, 33, 42, 60, 62-67, 69, 71-76, 77, 78-81	NA	5/4	Y	C	Instituted
Pfizer	2017-01489	1-2, 4, 12, 25, 29, 62-67, 69, 71-81	NA	5/4	Y	C	Pending Inst. Dec.
BI	2017-02032	1-2, 4, 25, 29, 62-64, 66-67, 71-73, 75-78, 80-81	NA	1/0	Y	C	Pending Inst. Dec.
BI	2017-02031	1-2, 4, 25, 29, 62-64, 66-67, 69, 71, 75-76, 78, 8-81	NA	1/0	Y	C	Pending Inst. Dec.
Samsung Bioepsis	2017-02140	1-2, 4, 12, 25, 29, 62-67, 69, 71-81	NA	6/NA	Y	C	Instituted (J/W '489)
Samsung Bioepsis	2017-02139	1-2, 4, 12, 25, 29, 62-64, 66-67, 69, 71-72, 75-76, 80-81	NA	6/NA	Y	C	Instituted (J/W '488)

Representative Claim

1. A method of purifying a protein which comprises a CH₂/CH₃ region by subjecting a composition of said protein to protein A affinity chromatography at a temperature in the range from about 10°C to about 18°C.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2016-01837	1-3, 5-11	§ 102 for claims 1, 2, and 5 § 103 for claims 1-3, 5-11	1/0	Y	M	FWD- Claims Invalid

Representative Claim

1. A method for the treatment of a human patient with breast cancer that overexpresses ErbB2 receptor, comprising administering a combination of an antibody that binds ErbB2, a taxoid, and a further growth inhibitory agent to the human patient in an amount effective to extend the time to disease progression in the human patient, wherein the antibody binds to epitope 4D5 within the ErbB2 extracellular domain sequence.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2017-00737	1-17	§ 103	3	Y	U	Instituted
Hospira	2017-00739	1-11, 14-17	NA	4	N	U	Institution Denied
Celltrion	2017-01122	1-11, 14-17	NA	3	Y	U	Instituted
Samsung Bioepis	2017-01960	1-17	NA	3	Y	U	Instituted (J/W '737)

Representative Claim

1. A method for the treatment of a human patient with a malignant progressing tumor or cancer characterized by overexpression of ErbB2 receptor by administering a combination of an intact antibody that binds to epitope 4D5 within the ErbB2 extracellular domain sequence and a taxoid, in the absence of anthracycline derivative, to the human patient in an amount effective to extend the time to disease progression in said human patient, without increase in overall severe adverse events.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2017-00731	1-14	NA	4	Y	U	Instituted
Celltrion	2017-01121	1-14	NA	3	Y	U	Instituted
Pfizer	1. 2017-02063	1. 1-14	1. NA	1. 3	1. Y	1. U	1. Instituted (J/W '121)
	2. 2018-00016	2. 1-14	2. NA	2. 3	2. Y	2. U	2. Institution Denied
Samsung Bioepsis	2018-00192	1-14	NA	6	Y	U	Pending Inst. Dec.

Representative Claim

1. A method for the treatment of a human patient diagnosed with cancer characterized by overexpression of ErbB2 receptor by administering an effective amount of an anti-ErbB2 antibody to the human patient, giving:
 - a) an initial dose of at least approximately 5 mg/kg of the anti-ErbB2 antibody; and
 - b) a plurality of subsequent doses of the antibody in an amount that is approximately the same or less than the initial dose, wherein the subsequent doses are separated in time from each other by at least two weeks.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2017-00804	1-3, 5, 7, 9-11, 17-33	§ 103	2	Y	U	Instituted
Samsung Bioepis	2017-01958	1-3, 5, 7, 9-11, 17-33	NA	3/NA	Y	U	Instituted (J/W '804)
Celltrion	2017-01139	1-3, 5, 7, 9-11, 17-33	Na	7/NA	Y	U	Instituted

Representative Claim

1. A method for the treatment of a human patient diagnosed with cancer characterized by overexpression of ErbB2 receptor by administering an effective amount of an anti-ErbB2 antibody to the human patient, giving:
 - a) an initial dose of at least approximately 5 mg/kg of the anti-ErbB2 antibody;
 - b) a plurality of subsequent doses of the antibody in an amount that is approximately the same or less than the initial dose, wherein the subsequent doses are separated in time from each other by at least two weeks; and
 - c) an effective amount of a chemotherapeutic agent.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2017-00805	1-3, 5, 7, 9-11, 16-28, 30-40	§ 103	2	Y	U	Instituted
Celltrion	2017-01140	1-3, 5, 7, 9-11, 16-28, 30-40	NA	1/0	Y	U	Instituted

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Samsung Bioepis	2017-01959	1-3, 5, 7, 9-11, 16-28, 30-40	NA	3/NA	Y	U	Instituted (J/W '805)
Celltrion	2017-01139	1-3, 5, 7, 9-11, 16-28, 30-40	NA	7/NA	Y	U	Pending Inst. Dec.

Representative Claim

1. A method of adjuvant therapy by administering to a human subject with nonmetastatic HER2 positive breast cancer, following definitive surgery, anthracycline/cyclophosphamide ("AC") based chemotherapy, followed by sequential administration of a taxoid and trastuzumab, or an antibody that blocks binding of trastuzumab to HER2.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
1) Pfizer	1) 2017-01726	1) 1-13	NA	1) 3/NA	1) Y	1) U	1) Institution Denied
2) Pfizer	2) 2017-01727	2) 1-13		2) 3/NA	2) Y	2) U	2) Institution Denied
3) Celltrion	3) 2017-00959	3) 1-13		3) 1/NA	3) Y	3) U	3) Terminated – Adverse Judgment

Representative Claim

1. A composition of a mixture of anti-HER2 antibody and one or more acidic variants thereof, wherein the amount of the acidic variant(s) is less than about 25%.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Pfizer	2017-02019	1-3	NA	6/NA	Y	C	Instituted
Pfizer	2018-00330	1-3	NA	3/NA	Y	C	Pending Inst. Dec.

Representative Claim

1. A therapeutic composition of a mixture of anti-HER2 antibody and one or more acidic variants thereof, wherein:
 - a) the amount of the acidic variant(s) is less than about 25%,
 - b) the acidic variant(s) are predominantly deamidated variants, wherein one or more asparagine residues of the anti-HER2 antibody have been deamidated,
 - c) the anti-HER2 antibody is humMAb4D5-8,
 - d) the deamidated variants have Asn30 in CDR1 of either or both VL regions of humMAb4D5-8 converted to aspartate, and
 - e) a pharmaceutically acceptable carrier.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Pfizer	2017-02020	1, 5-7	NA	6/NA	Y	C	Instituted
Pfizer	2018-00331	1-20	NA	1/1	Y	C	Pending Inst. Dec.

TYSABRI

> 3 IPRs filed challenging 3 different patents

Gen/Immu. Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,815,236	Swiss Pharma	2016-00912	5/0	N	U	Institution Denied
8,349,321	Swiss Pharma	2016-00915	4/0	N	F	Institution Denied
8,900,577	Swiss Pharma	2016-00916	4/0	N	F	Institution Denied

Representative Claim

1. A method of treatment by administering to a patient with multiple sclerosis a therapeutic amount of a stable, aqueous pharmaceutical formulation of about 20 mg/ml to about 150 mg/ml of natalizumab, about 10 mM phosphate buffer, about 140 mM sodium chloride, and polysorbate 80 present in an amount of about 0.001% to 2% (w/v).

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Swiss Pharma	2016-00912	1-16, 21-22	None	5/0	Y	U	Institution Denied

Representative Claim

1. A stable, aqueous pharmaceutical formulation of 20 mg/ml of natalizumab, about 10 mM sodium phosphate buffer, 8.18 mg/ml of sodium chloride, and 0.2 mg/ml of polysorbate 80, and wherein the formulation has a pH of 6.1.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Swiss Pharma	2016-00915	1-4	None	4/0	Y	F	Institution Denied

Representative Claim

1. A stable, aqueous pharmaceutical formulation of about 20 mg/ml to about 150 mg/ml of natalizumab, polysorbate 80 present in an amount of about 0.001% to 2% (w/v), about 10 mM phosphate buffer, and about 140 mM NaCl.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Swiss Pharma	2016-00916	1, 3-7, 9-12	None	4/0	Y	F	Institution Denied

KEYTRUDA

> 4 IPRs filed challenging 1 patent

Representative Claim

1. A method of treating lung cancer by administering a composition of a human or humanized anti-PD-1 monoclonal antibody.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Merck	2016-01217	1, 6-14, 19-20, 24-27, and 29-30	§§ 102, 103 for all claims	1/NA	NA	U	Settled
Merck	2016-01218	1, 6-14, 19-20, and 24-27, and 29-30	§§ 102, 103 for all claims	1/NA	NA	U	Settled
Merck	2016-01219	1-3, 8-9, 14-15, 19-22 and 25-26	§§ 102, 103 for all claims	1/NA	NA	U	Settled
Merck	2016-01221	1-3, 8-9, 14-15, 19-22, and 25-26	§§ 102, 103 for all claims	1/NA	NA	U	Settled

AVASTIN

> 34 IPRs filed challenging 11 different patents

Representative Claim

1. A method for treating cancer in a patient by administering an effective amount of bevacizumab and assessing the patient for gastrointestinal perforation.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2016-01771	1-5	§§ 102, 103 for all claims	1/NA	NA	U	FWD- Claims Invalid

EPOGEN

- > 1 IPR filed challenging 1 patent

Representative Claim

1. A method of administering at least one EPO dose to a patient according to an EPO dosing regimen, wherein said regimen maintains at least a serum EPO concentration above a predose level for about 5 to about 30 days between doses.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Hospira	2013-00365	1-7, 12, 14-28	NA	3/0	NA	U	Not instituted; Janssen disclaimed all of the challenged claims

ORENCIA

- > 1 IPR filed challenging 1 patent

Representative Claim

1. A stable formulation suitable for subcutaneous administration of at least 100mg/ml CTLA4Ig molecule, a sugar selected from the group consisting of sucrose, lactose, maltose, mannitol and trehalose and mixtures thereof, and a pharmaceutically acceptable aqueous carrier, wherein the formulation has a pH range of from 6 to 8, viscosity from 9 to 20 cps, and the weight ratio of sugar:protein of 1.1:1 or higher.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Momenta	2015-01537	1-15	§ 103	1/2	Y	F	FWD- Claims Valid

NEULASTA

> 1 IPR filed challenging 1 patent

Representative Claim

1. A method of refolding a protein expressed in a nonmammalian expression system and present in a volume at a concentration of 2.0 g/L or greater that includes:
 - a) contacting the protein with a refold buffer that has a redox component with a final thiol-pair ratio in the range of 0.001 to 100, a redox buffer strength of 2 mM or greater, and one or more of:
 - i. a denaturant;
 - ii. an aggregation suppressor; and
 - iii. a protein stabilizer;
 - iv. to form a refold mixture;
 - b) incubating the refold mixture; and
 - c) isolating the protein from the refold mixture.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Apotex	2016-01542	1-24	§ 103 for all claims	1/1	N	M	FWD- Claims 1-17 and 19-24 unpatentable Claim 18 patentable (non-aerobic)

ENBREL

> 3 IPRs filed challenging 2 patents

Hofmann-LaRoche Patent	Challenger(s)	IPR No.	# P / PO Experts	2- Consid.	Claim Type	Status
8,163,522	Coalition for Affordable Drugs (Kyle Bass)	2015-01792	1/0	Y	M	Institution Denied
	Coherus	2017-01916	9/NA	N	M	Institution Denied
8,063,182	Coherus	2017-02066	10/NA	N	C	Institution Denied

Representative Claim

1. A method comprising the steps of:
 - a) culturing a host cell with a polynucleotide, wherein the polynucleotide encodes a protein consisting of:
 - i. the extracellular region of an insoluble human TNF receptor, wherein the insoluble human TNF receptor has an apparent molecular weight of about 75 kilodaltons as determined on a nonreducing SDS-polyacrylamide gel and the amino acid sequence LPAQVAFXPYAPEPGSTC (SEQ ID NO:10), and
 - ii. all of the domains of the constant region of a human IgG immunoglobulin heavy chain other than the first domain of said constant region, and
 - b) purifying an expression product of the polynucleotide from the cell mass or the culture medium.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coalition for Affordable Drugs (Kyle Bass)	2015-01792	1-10	NA	1/0	Y	M	Institution Denied
Coherus	2017-01916	1-10	NA	1/2	N	M	Institution Denied

Representative Claim

1. An isolated antibody that binds specifically to the polypeptide of SEQ ID NO:548.

Challenger(s)	IPR No.	Challenged Claims	Instituted Grounds	# P / PO Experts	2- Consid.	Claim Type	Status
Coherus	2017-02066	2-36	NA	10/NA	N	C	Institution Denied

Our Global Reach

Africa
Asia Pacific
Europe
Latin America
Middle East
North America

Our Locations

Almaty	Chicago	Houston	Orange County	Shanghai*
Astana	Dallas	London	Paris	Silicon Valley
Beijing*	Dubai	Los Angeles	Philadelphia	Singapore
Boston	Frankfurt	Miami	Pittsburgh	Tokyo
Brussels	Hartford	Moscow	Princeton	Washington, DC
Century City	Hong Kong*	New York	San Francisco	Wilmington



Morgan Lewis

*Our Beijing and Shanghai offices operate as representative offices of Morgan, Lewis & Bockius LLP. In Hong Kong, Morgan Lewis operates through Morgan, Lewis & Bockius, which is a separate Hong Kong general partnership registered with The Law Society of Hong Kong as a registered foreign law firm operating in Association with Luk & Partners.

THANK YOU

© 2018 Morgan, Lewis & Bockius LLP
© 2018 Morgan Lewis Stamford LLC
© 2018 Morgan, Lewis & Bockius UK LLP

Morgan, Lewis & Bockius UK LLP is a limited liability partnership registered in England and Wales under number OC378797 and is a law firm authorised and regulated by the Solicitors Regulation Authority. The SRA authorisation number is 615176.

Our Beijing and Shanghai offices operate as representative offices of Morgan, Lewis & Bockius LLP. In Hong Kong, Morgan Lewis operates through Morgan, Lewis & Bockius, which is a separate Hong Kong general partnership registered with The Law Society of Hong Kong as a registered foreign law firm operating in Association with Luk & Partners.

This material is provided for your convenience and does not constitute legal advice or create an attorney-client relationship. Prior results do not guarantee similar outcomes. Attorney Advertising.