

May 2018

Engineering the Medicines of Tomorrow

Company Update

This presentation includes forward-looking statements.

This communication contains certain forward-looking statements concerning the MorphoSys group of companies, including its financial guidance for 2018, the commencement, timing and results of clinical trials and release of clinical data both in respect of its proprietary product candidates and of product candidates of its collaborators, the development of commercial capabilities, in particular with respect to MOR208, and the transition of MorphoSys to a fully integrated biopharmaceutical company, the expected time of launch of MOR208, interaction with regulators, including the potential approval of MorphoSys's current or future drug candidates, including discussions with the FDA regarding the potential approval to market MOR208, and expected royalty and milestone payments in connection with MorphoSys's collaborations. The forward-looking statements contained herein represent the judgment of MorphoSys as of the date of this release and involve known and unknown risks and uncertainties, which might cause the actual results, financial condition and liquidity, performance or achievements of MorphoSys, or industry results, to be materially different from any historic or future results, financial conditions and liquidity, performance or achievements expressed or implied by such forward-looking statements. In addition, even if MorphoSys's results, performance, financial condition and liquidity, and the development of the industry in which it operates are consistent with such forward-looking statements, they may not be predictive of results or developments in future periods. Among the factors that may result in differences are that MorphoSys's expectations regarding its 2018 results of operations may be incorrect, MorphoSys's expectations regarding its development programs may be incorrect, the inherent uncertainties associated with competitive developments, clinical trial and product development activities and regulatory approval requirements (including that MorphoSys may fail to obtain regulatory approval for MOR208 and that data from MorphoSys's ongoing clinical research programs may not support registration or further development of its product candidates due to safety, efficacy or other reasons), MorphoSys's reliance on collaborations with third parties, estimating the commercial potential of its development programs and other risks indicated in the risk factors included in MorphoSys's Registration Statement on Form F-1 and other filings with the US Securities and Exchange Commission. Given these uncertainties, the reader is advised not to place any undue reliance on such forward-looking statements. These forward-looking statements speak only as of the date of publication of this document. MorphoSys expressly disclaims any obligation to update any such forward-looking statements in this document to reflect any change in its expectations with regard thereto or any change in events, conditions or circumstances on which any such statement is based or that may affect the likelihood that actual results will differ from those set forth in the forward-looking statements, unless specifically required by law or regulation.

The compounds discussed in this slide presentation are investigational products being developed by MorphoSys and its partners and are not currently approved by the U.S. Food and Drug Administration (FDA), European Medicine Agency (EMA) or any other regulatory authority (except for guselkumab/Tremfya®).



MOR208

Our lead product candidate MOR208, which has been granted BTDD* in r/r DLBCL by the FDA and has further potential in additional hematological malignancies; worldwide rights retained



Other Lead Programs

Additional differentiated proprietary and partnered product candidates, such as MOR202, MOR106 and MOR103 in clinical trials for the treatment of cancer and inflammatory diseases



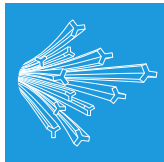
Tremfya®

First approved product; growing royalty participation; approved in USA, Canada, EU; recent new country approvals in Australia, Brazil, Japan and South Korea



Broad Clinical Pipeline

28** product candidates across proprietary and partnered development programs



Proprietary Technology Platform

Based on leading antibody platform: over 100 active programs***



Established Biopharmaceutical Company

Founded in 1992, listed on the Frankfurt Stock Exchange (MOR) and Nasdaq (MOR)

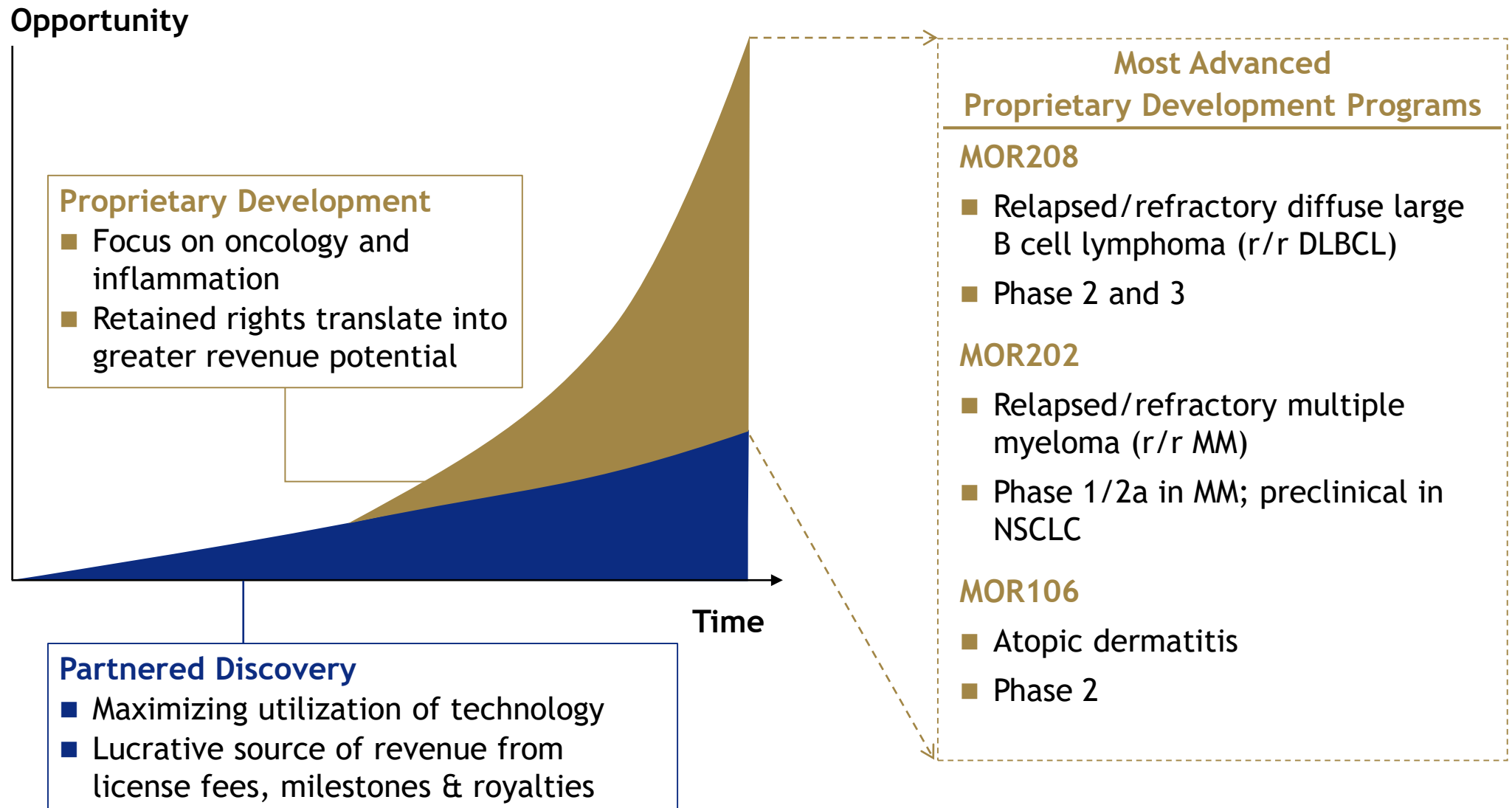
* Breakthrough therapy designation

** Includes Tremfya® which we still consider a phase 3 compound due to ongoing phase 3 studies in various indications.

*** Probability of success cannot be predicted

A Late-stage Biopharmaceutical Company

Business Model Combining Proprietary Development and Partnered Discovery



Proprietary Development Programs



Portfolio of Proprietary Development Segment

Five Clinical Candidates



Program	Partner	Target	Disease area	Phase 1	Phase 2	Phase 3
MOR208	-	CD19	<ul style="list-style-type: none"> ▪ DLBCL (B-MIND) ▪ DLBCL (L-MIND) ▪ CLL 			
MOR202*	I-Mab Biopharma**	CD38	Multiple myeloma			
MOR106	Galapagos	IL-17C	Atopic dermatitis			
MOR103/GSK3196165***	GSK	GM-CSF	Inflammation			
MOR107****	-	AT2-R	Oncology under investigation			

7 proprietary or co-developed programs in discovery and 1 in preclinical phase

* Currently under evaluation in NSCLC

** For development in China, Hong Kong, Taiwan, Macau

*** MOR103/GSK3196165 is fully out-licensed to GSK

**** A phase 1 study in healthy volunteers was completed. MOR107 is currently in preclinical investigation with a focus on oncology indications.

MOR208: Proprietary Antibody in Hematological Cancers

An Investigational Anti-CD19 Product Candidate for B Cell Malignancies

The Product Candidate

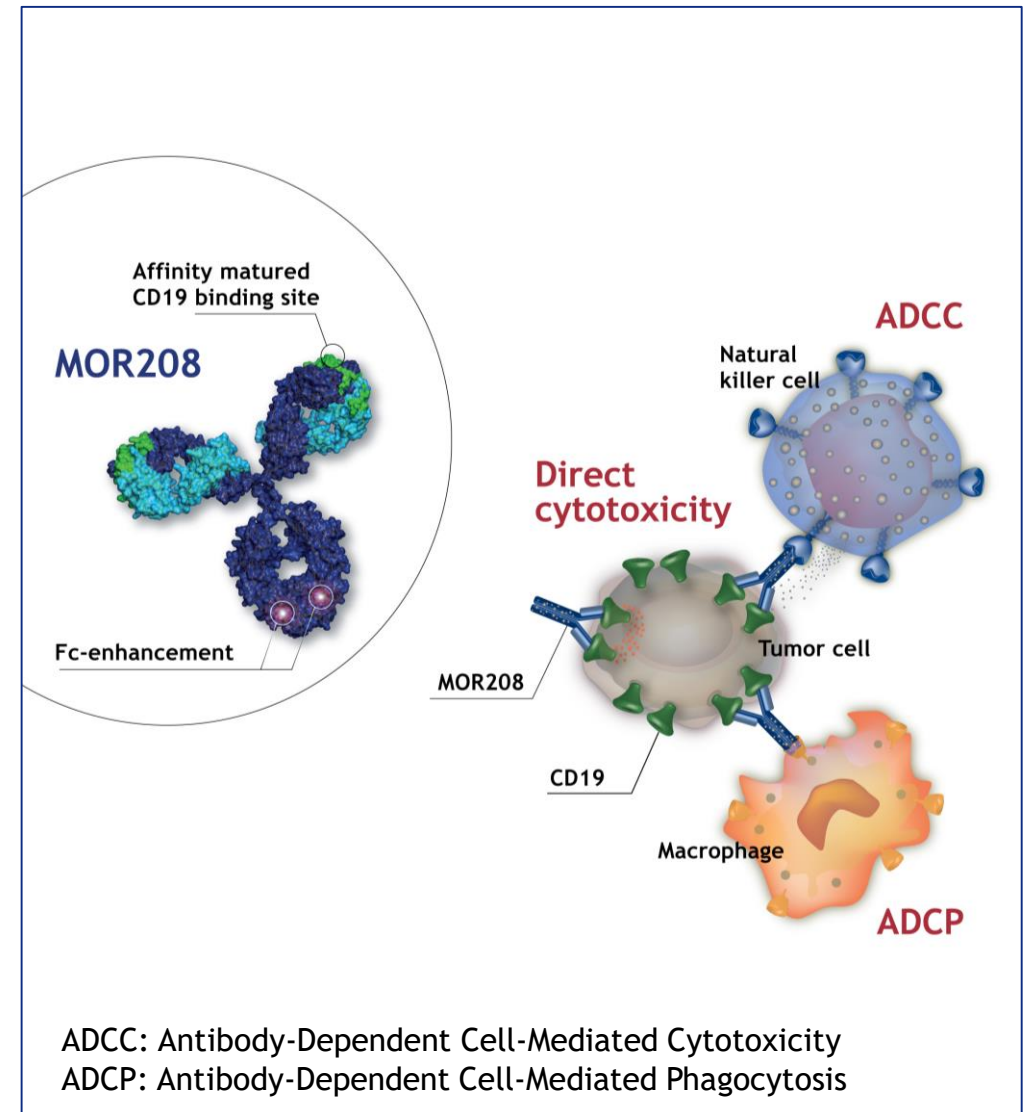
- IgG1 antibody targeting CD19
- Fc-engineered to enhance target cell-killing
- In-licensed from Xencor

Suggested Modes of Action

- ADCC, phagocytosis and direct cytotoxicity

Promising Preclinical Package

- Depletes B cells in *in vitro* and *in vivo* models
- Preclinical data supports multiple combination therapies



MOR208: Diffuse Large B Cell Lymphoma

High Unmet Medical Need

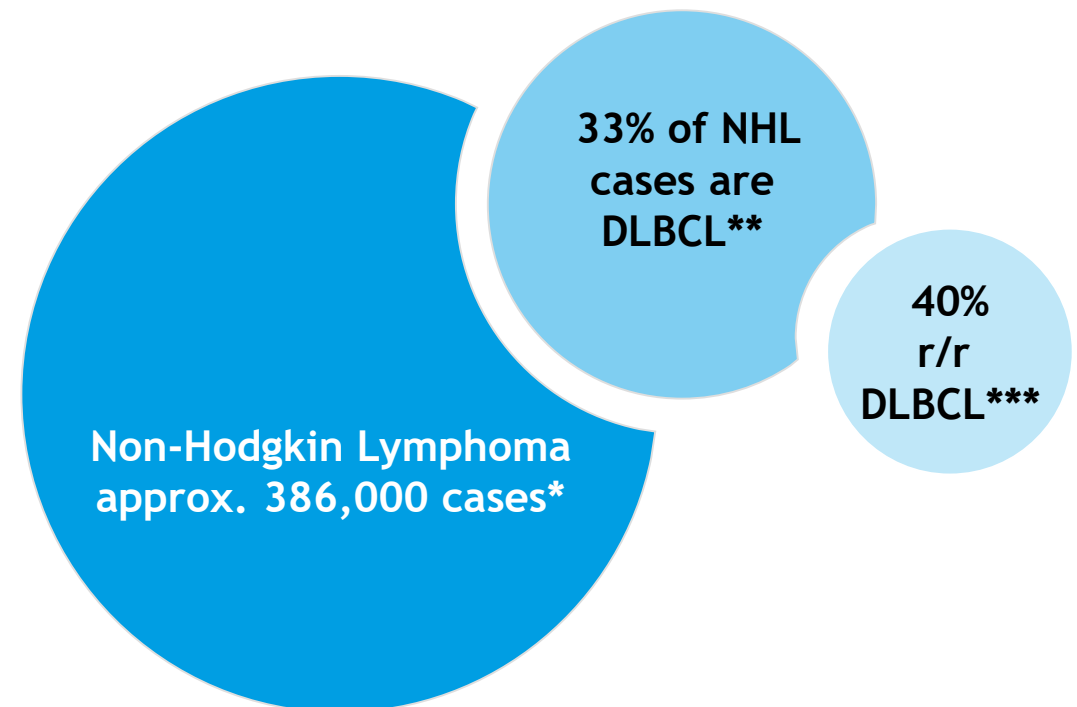
Very Aggressive and Resistant Tumor

- Up to 40% of all patients with DLBCL either fail to respond to or show relapse on initial therapy***

Relapsed or Refractory DLBCL (r/r DLBCL)

- Disease is difficult to treat
- Prognosis is poor, especially for elderly and frail patients
- Current treatment options are limited
- High unmet medical need

Most frequently-occurring malignant lymphoma worldwide



*GLOBOCAN report 2012; **Raut et al., 2014; ***Maurer et al., 2014; DLBCL, diffuse large B cell lymphoma; NHL, non-Hodgkin's lymphoma

MOR208: Development Plan



Opportunity Across Spectrum of B Cell Malignancies

Indication	Trial / Phase	Design	Timeline
r/r DLBCL	L-MIND Phase 2	Lenalidomide + MOR208 in relapsed or refractory DLBCL patients ineligible for HDCT and ASCT	Fully enrolled trial; data maturing, analysis ongoing
	B-MIND Phase 2/3	Bendamustine + MOR208 vs. bendamustine + rituximab in relapsed or refractory DLBCL patients ineligible for HDCT and ASCT	Primary analysis projected in Q4 2019
r/r CLL	COSMOS Phase 2	Cohort A: MOR208 + idelalisib Cohort B: MOR208 + venetoclax Patients with r/r disease while on a BTK inhibitor or who are intolerant to such treatment	Updates at medical conferences 2018 (EHA, June 2018: Cohort A)
DLBCL	Front line	Under evaluation	
Indolent lymphomas		Under evaluation	

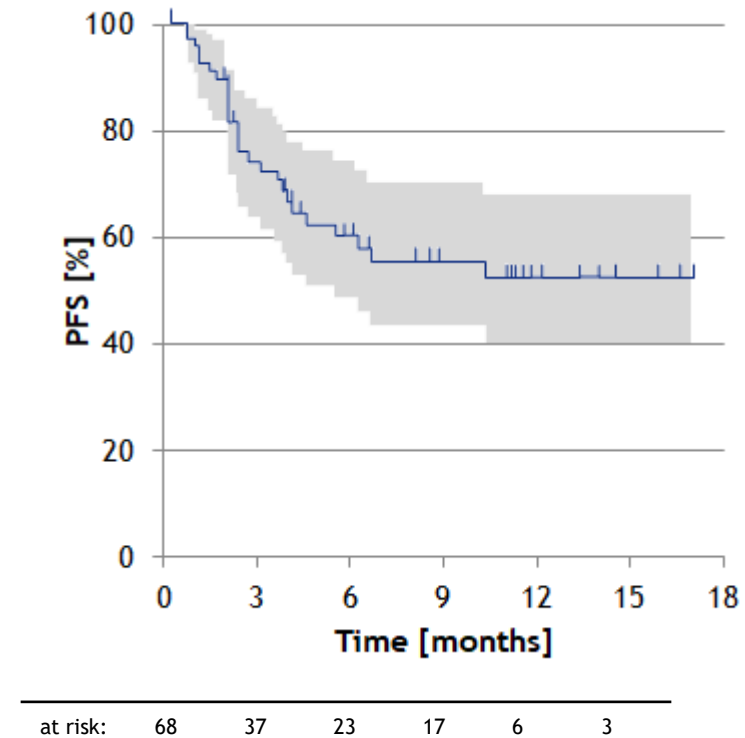
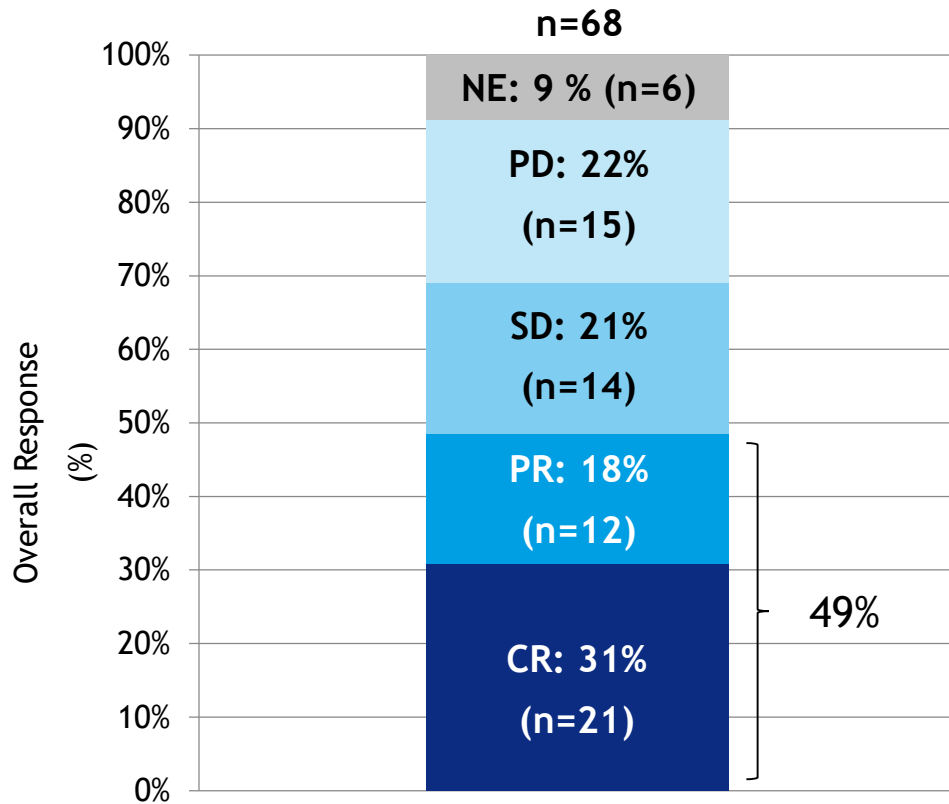
More information about ongoing trials at clinicaltrials.gov;

DLBCL, diffuse large B cell lymphoma; HDCT, high-dose chemotherapy; ASCT, autologous stem cell transplantation; CLL, chronic lymphocytic leukemia; BTK, Bruton's tyrosine kinase; r/r, relapsed/refractory

MOR208/Lenalidomide Combination is Active in r/r DLBCL



ORR and mPFS in L-MIND r/r DLBCL Patients*



- Median PFS: NR (95% CI 4.3 months - NR)
- PFS rate at 12 months: 50.4% (95% CI 40-67%)
- Median follow-up: 8.3 months

* Data cut-off December 12, 2017

DLBCL, diffuse large B cell lymphoma; ORR, objective response rate; PFS, progression-free survival; NE, non-evaluable; PD, progressive disease; SD, stable disease; PR, partial response; CR, complete response; NR, not reached; CI, confidence interval

MOR208: L-MIND vs. Lenalidomide Regimens in r/r DLBCL



Please Note Limitations of Cross-trial Comparisons to Literature Data

	L-MIND Cut-off 12th Dec 2017	Witzig et al., 2011	Czuczman et al., 2017	Wang et al., 2013	Morschhauser et al., ASH 2016
Compound(s)	MOR208 + LEN	LEN Mono Therapy in NHL	LEN Mono Therapy	RTX + LEN	OBI + LEN
Phase	II	II	II/III	II	II
Evaluable patient population	n=68	n=108	n=51	n=32	n=71
Objective response rate	49%	28%	28%	28%	45%
Complete response rate	31%	7%	10%	22%	16%
Median PFS, months	Not reached 50.4% PFS at 12 months	2.7	3.1	2.8	4.1

r/r, relapsed/refractory; DLBCL, diffuse large B cell lymphoma; LEN, lenalidomide; RTX, rituximab; OBI, obinutuzumab; PFS, progression-free survival

MOR208: Existing and Upcoming Approaches in r/r DLBCL



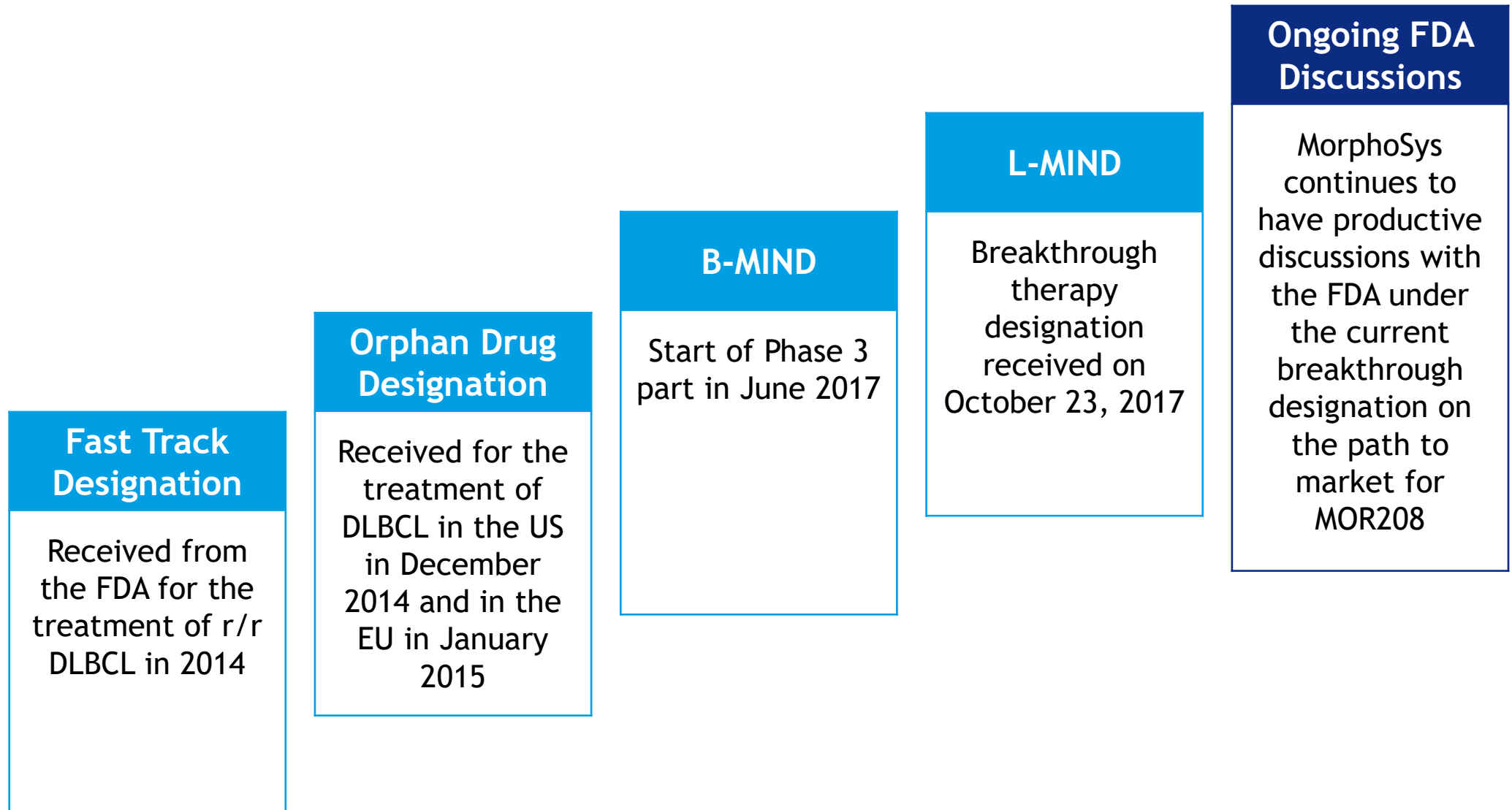
Please Note Limitations of Cross-trial Comparisons to Literature Data

Parameter	L-MIND*	Dang et al., 2014	Sehn et al., 2017	Scholar-1 Crump et al., 2017	Juliet Schuster et al., 2017	Zuma-1 Neelapu et al., 2017
Compound(s)	MOR208 + lenalidomide	RTX + bendamustine	Polatuzumab + RTX + bendamustine	Salvage chemotherapies + radiation	Tisagenlecleucel (CD19 CAR-T)	Axi-CEL (CD19 CAR-T)
Phase	II	III	II	Retrospective study	II	II
Evaluable patient population	r/r DLBCL n=68	r/r DLBCL n=137	r/r DLBCL n=40	r/r DLBCL n=636	r/r DLBCL n=81	r/r DLBCL, FL, PMBCL n=101 (DLBCL n=77)
Objective response rate	49%	49%	70%	26%	53%/37% Best/@6 mo.	82%/48% Best/@6 mo.
Complete response rate	31%	18%	58%	7%	40%/30% Best/@6 mo.	55%/46% Best/@6 mo.
Median PFS, months	Not reached 50.4% PFS at 12 months	4.2	6.7	n/a	3.2	5.8**
Median overall survival, months	NR**	9.5	11.8	6.3	NR***	NR***

* Data cut-off December 12, 2017; ** For all patients; *** NR, not reached; n/a, no information available; r/r, relapsed/refractory; DLBCL, diffuse large B cell lymphoma; RTX, rituximab; OBI, obinutuzumab; PFS, progression-free survival; mo., month

MOR208 as Potential New Treatment Option in r/r DLBCL

Program Evolution



MOR202: An Investigational, Human Monoclonal Antibody



A HuCAL Antibody Directed Against CD38

The Product Candidate

- IgG1 antibody directed against CD38
- ADCC & ADCP cell-killing mechanisms
- Low NK cell depletion, which may translate into longer duration of response

Clinical Data*

- Report on clinically relevant dose cohorts of MOR202 plus DEX, LEN/DEX or POM/DEX
- Safety and Convenience
 - Low rate of infusion related reactions limited to grades 1 and 2
 - Infusion time of 2h or even less

Further Clinical Development

- Scientific research suggests a role of CD38 in other indications including NSCLC; we plan to start a phase 1/2 trial in 2018

* From ongoing phase 1/2a trial in relapsed/refractory MM; analysis of patients in clinically relevant cohorts: Raab et al., Poster presentation at ASCO, June 5, 2017: Abstract #8024 ** Modified from Raab et al, ASCO 2017; ITT population shown;

ADCC, antibody-dependent cell-mediated cytotoxicity; ADCP, antibody-dependent cell-mediated phagocytosis; NK, natural killer; DEX, dexamethasone; LEN, lenalidomide; POM, pomalidomide; NSCLC, non-small cell lung cancer

Efficacy**	Objective Response Rate (ORR)	Median PFS (months)
MOR202 +DEX	28%	4.7
MOR202 +LEN/DEX	71%	Not reached
MOR202 +POM/DEX	46%	17.5

Safety**	Infusion Related Reactions (Grade 1+2)
MOR202 +DEX	11%
MOR202 +LEN/DEX	6%
MOR202 +POM/DEX	0%

MOR202: Partnering Deal with I-Mab

Agreement with I-Mab Biopharma for Greater Chinese Market

- Agreement signed November 30, 2017
- I-Mab receives exclusive development and commercialization rights in China, Taiwan, Hong Kong and Macau
- Payments to MorphoSys
 - \$20m upfront
 - Up to \$100m milestones
 - Tiered, double digit royalties
- I-Mab intends to start clinical development of MOR202 in MM by the end of 2018



MM, multiple myeloma

MOR106: A Novel Anti-IL-17C Antibody

First Ylanthia Antibody in Clinical Development

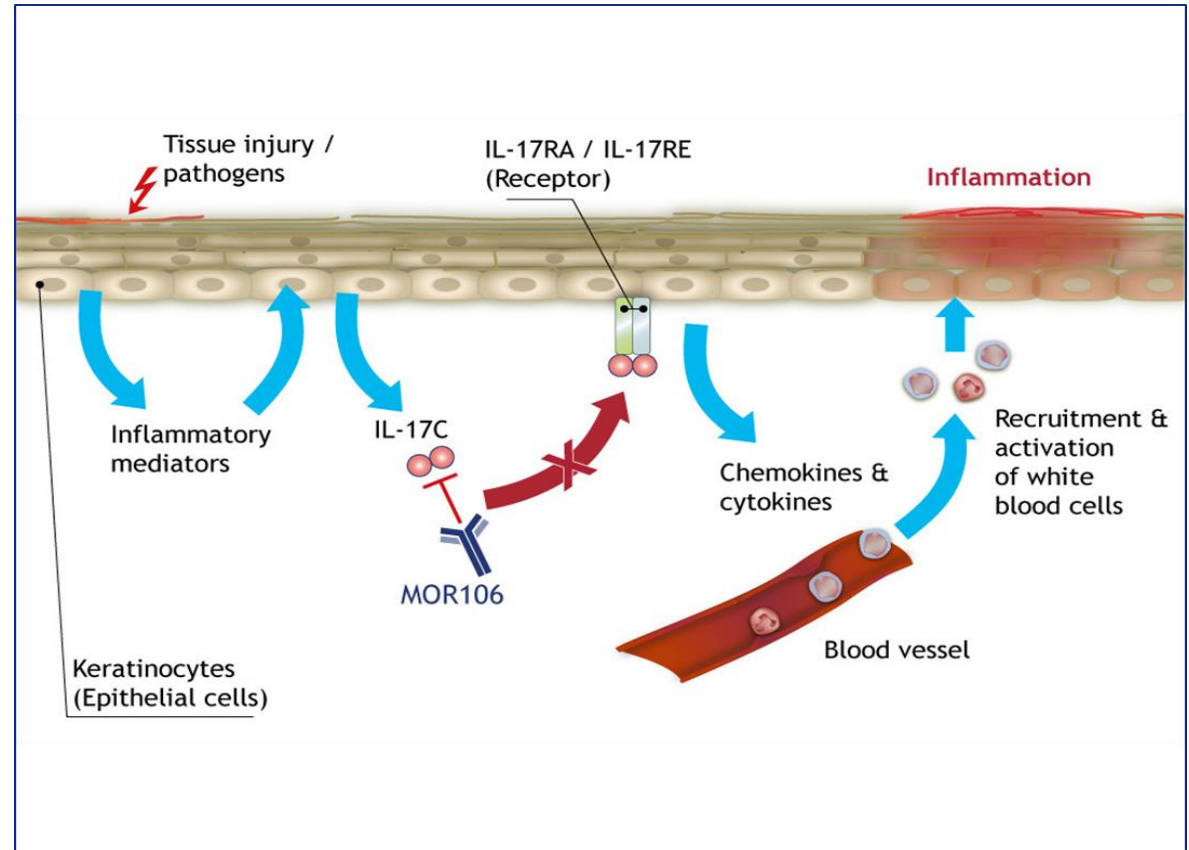
The Product Candidate

- Ylanthia antibody targeting IL-17C, a cytokine implicated in a number of inflammatory skin disorders
- 50/50 co-development with Galapagos
- First publicly disclosed antibody against this cytokine

Preclinical Evidence of Activity

- *In vivo* data in different mouse models showed neutralization of IL-17C with MOR106*
- Data indicate that IL-17C is a central mediator of skin inflammation and is relevant in particular in atopic dermatitis

Suggested mode of action:



* Steidl et al. J Invest Dermatol. 2018; doi: 10.1016/j.jid.2018.01.036.

MOR106: Development in Atopic Dermatitis

First Signs of Clinical Activity

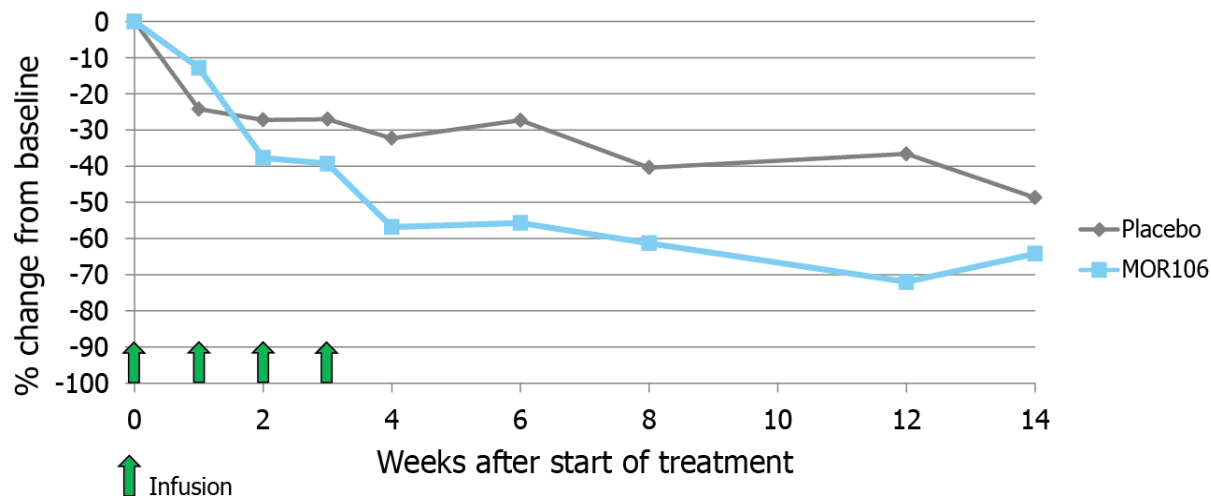


Clinical Data

- Results phase 1 (safety part with healthy volunteers, multiple ascending doses in patients with atopic dermatitis):
 - Generally well tolerated
 - MOR106 shown the first signs of clinical activity: improvement of EASI-50 at week four occurred in 83% of patients (five out of six) at the highest dose level, long-lasting effect
- In May 2018, initiation of the IGUANA phase 2 clinical trial in 180 patients with moderate to severe atopic dermatitis (dosing 1,3 or 10mg/kg)

EASI, % change from baseline (results phase 1)

Pooled patients over all cohorts (median)



EASI, eczema area and severity index

MOR103/GSK3196165

A Novel anti-GM-CSF Antibody for Inflammatory Diseases

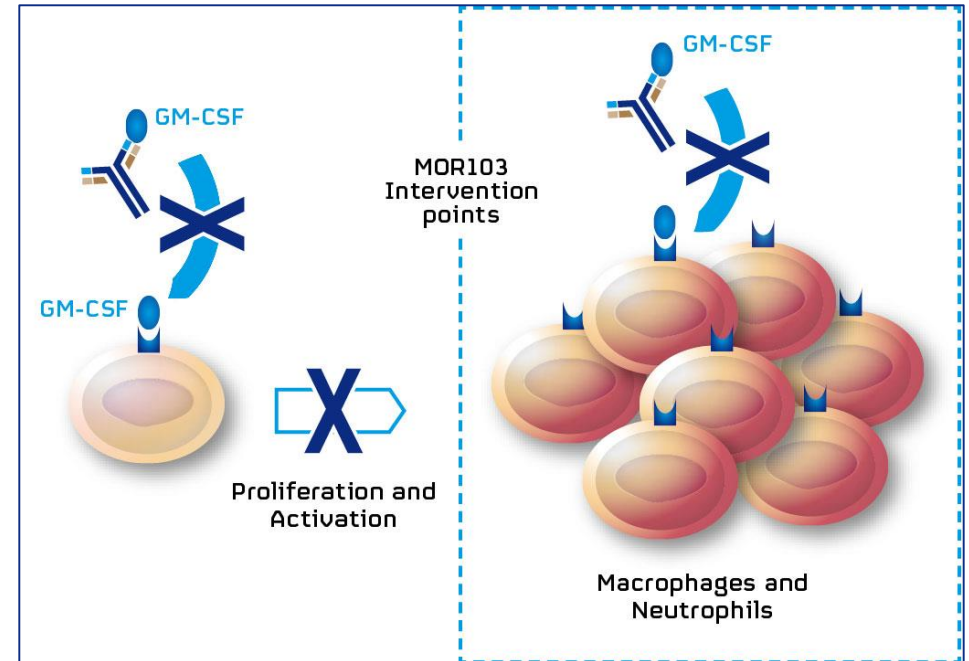
The Product Candidate

- HuCAL antibody (aka GSK3196165) directed against GM-CSF
- Fully out-licensed to GSK in 2013
 - €22.5m upfront payment
 - A total of €423m milestones
 - Tiered, double-digit royalties on net sales
- GSK is solely responsible for the development and commercialization of the compound

Clinical Development

- GSK is currently investigating MOR103 in*:

Suggested mode of action:



Study	Indication	Phase
Safety & efficacy in combination with methotrexate	Rheumatoid arthritis	2
Mechanistic study plus methotrexate	Rheumatoid arthritis	2
Safety & efficacy in inflammatory hand osteoarthritis	Hand osteoarthritis	2

* According to clinicaltrials.gov

Proprietary Portfolio: Expected Newsflow 2018



Compound	Indication	Expected Newsflow
MOR208	DLBCL	<ul style="list-style-type: none"> ■ L-MIND: Continue analysis of maturing data from the study ■ Updates on further development plans in front-line DLBCL and indolent lymphomas
	CLL	COSMOS: Updates at medical conferences 2018 (Cohort A: EHA 2018)
MOR202 (I-Mab Biopharma*)	Multiple myeloma	<ul style="list-style-type: none"> ■ Further partnering discussions ongoing ■ Final data phase 1/2a study - late 2018
MOR106	Atopic dermatitis	Start of phase 2 trial - Q2 2018 ✓
MOR103/ GSK3196165**	Rheumatoid arthritis	Data from phase 2b trial
	Hand osteoarthritis	Data from phase 2a trial

* For development in China, Hong Kong, Taiwan, Macau; **MOR103/GSK3196165 is fully outlicensed to GSK

Partnered Discovery Programs



Proprietary Human Antibody Libraries

HuCAL

- Original, ground-breaking platform
- First product launched
- 25 clinical, various pre-clinical & discovery programs

Ylanthia

- Latest antibody library, one of the largest in the industry
- Covers huge epitope space, designed for difficult targets (e.g. MHC/peptide complexes; GPCRs)
- Built to deliver superior antibodies
- First program in clinic

Lanthipeptides

- High target molecule selectivity and high *in vivo* stability
- Agonistic or antagonistic activity possible

Bi-specifics

- Proprietary formats
- Enhanced tumor cell killing via co-stimulation of tumor-specific effector T cells

Partnered Discovery Program: Tremfya® (Guselkumab)

Janssen's Novel Biologic Being Developed for Immune-Mediated Diseases



The Drug

- First-in-class anti-IL-23 human monoclonal antibody
- Generated using MorphoSys's HuCAL technology

Status

- Approved in U.S., EU, Canada, Brazil, Australia, Japan for moderate-to-severe plaque psoriasis and in Japan in addition for moderate-to-severe psoriatic arthritis
- First royalties reflected in FY 2017 results: €1.9m booked

Differentiation

- Superior clinical efficacy compared to Humira
- Convenience: 8-weekly s.c. dosing

Ongoing Phase 3 Trials

- Head-to-head vs. Cosentyx® in plaque psoriasis: ongoing
- Psoriatic arthritis: 2 trials ongoing
- Crohn's disease: to be started soon



Partnered Pipeline: Expected Primary Completion Dates



Up to 14 Clinical Phase 2 and 3 Read-outs Potentially Due in 2018*

Phase 2

Setrusumab (BPS804; Sclerostin) Type I, III or IV Osteogenesis Imperfecta (ASTEROID)	Bimagrumab (BYM338; ActRIIB) Muscular atrophy after hip fracture surgery
Bimagrumab (BYM338; ActRIIB) Sarcopenia	Bimagrumab (BYM338; ActRIIB) Sarcopenia
VAY736 (BAFF-R) Rheumatoid arthritis	VAY736 (BAFF-R) Primary Sjögren's syndrome
Xentuzumab (BI-836845; IGF-1) Breast cancer	Xentuzumab (BI-836845; IGF-1) Prostate cancer (+ enzalutamide)

Phase 3

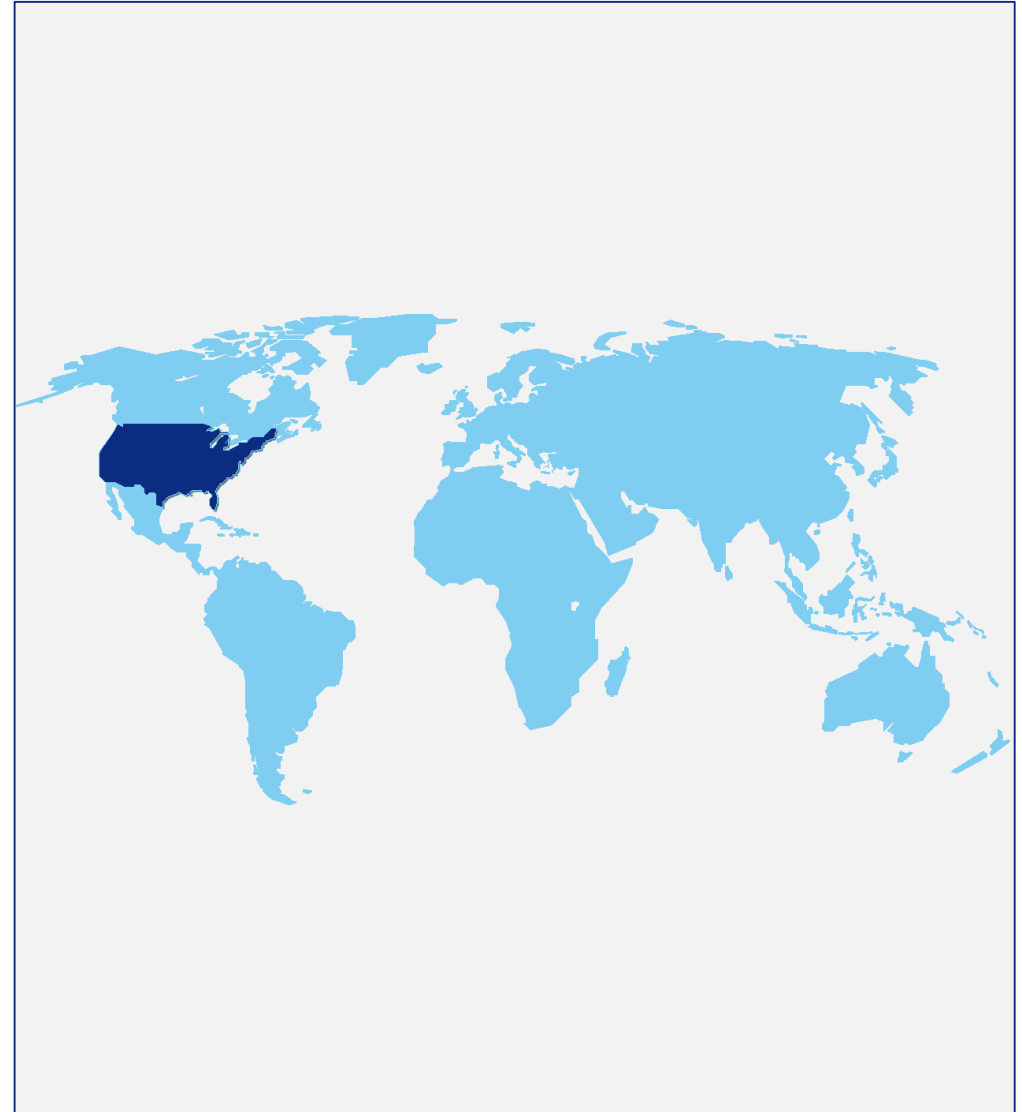
Gantenerumab (Amyloid-β) Mild Alzheimer's disease (open label extension)
Guselkumab (IL-23p19) Moderate to severe plaque psoriasis (ECLIPSE; Head-to-head with Cosentyx®)
Guselkumab (IL-23p19) Moderate to severe plaque psoriasis (POLARIS; Comparison to Fumaric Acid Esters)
Guselkumab (IL-23p19) Moderate to severe plaque psoriasis
Guselkumab (IL-23p19) Pustular or Erythrodermic Psoriasis
Guselkumab (IL-23p19) Palmoplantar Pustulosis

*According to clinicaltrials.gov as of May 15, 2018; anticipated primary completion dates 2018 (or 2017 without any newsflow so far). Actual events could differ.

Commercialization

Maximize Value Creation for MorphoSys

- Intend to build commercial capabilities in connection with the potential future approval of MOR208
- Finalizing commercialization strategies for MOR208, our preferred option at this stage is to retain either sole or co-promotion rights in the United States and to partner elsewhere
- Preparing for initial key hires to develop and execute our commercial strategy



Financial Guidance 2018

Re-confirmation



In € million	Reported FY2017	Q1 2018	Guidance FY2018
Group Revenues	66.8	2.8	20 - 25*
Proprietary R&D Expenses (incl. Technology Development)	99.1	15.5	95 - 105
EBIT	(67.6)	(19)	(110) - (120)

Cash Position End of Q1 2018: €285.8m**

Total ordinary shares issued (as of April 30, 2018): 31,808,035

*Revenues are expected to include royalty income from Tremfya® ranging from €12-17m on constant USD currency

** Excluding the April 2018 Nasdaq IPO with net proceeds of €177m

Our Strategy

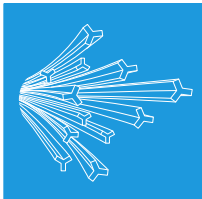
To Become A Fully-Integrated Biopharmaceutical Company



Continue to advance the development of our lead product candidate MOR208 towards regulatory approval



Build our commercial capabilities in connection with the potential future approval of MOR208



Explore options for the continued development of MOR202, alone or with a partner, and further development of MOR106



Realize the value of our technology platforms by using them to discover and develop additional proprietary programs



Appendix



Clinical Programs

Ongoing Clinical Trials (1)



Program	Partner	Target	Indication	Phase 1	Phase 2	Phase 3	Launched
Guselkumab (CNT01959)	Janssen/J&J	IL23p19	Plaque psoriasis	■	■	■	■
			Plaque psoriasis (VOYAGE 1)	■	■	■	
			Plaque psoriasis (VOYAGE 2)	■	■	■	
			Pustular/erythrodermic psoriasis	■	■	■	
			Plaque psoriasis	■	■	■	
			Plaque psoriasis (POLARIS)	■	■	■	
			Palmoplantar pustulosis	■	■	■	
			Moderate to severe plaque psoriasis (SelfDose™ device)	■	■	■	
			Moderate to severe plaque psoriasis (ECLIPSE)	■	■	■	
			Psoriatic arthritis (PsA) (Discover-1)	■	■	■	
			Psoriatic arthritis (PsA)	■	■	■	
			Chronic plaque psoriasis (pediatric participants) (PROTOSTAR)	■	■	■	
Gantenerumab	Roche	Amyloid-β	Mild Alzheimer's disease (Marguerite RoAD)	■	■	■	
			Prodromal Alzheimer's disease	■	■	■	
			Genetically predisposed for Alzheimer's disease (DIAN)	■	■	■	
			Safety, tolerability and pharmacokinetics (sc)	■			
			Pain, tolerability, safety and pharmacokinetics (sc)	■			
MOR208	-	CD19	Diffuse large B cell lymphoma (DLBCL) (B-MIND)	■	■	■	
			Chronic lymphocytic leukemia (CLL) or small lymphocytic lymphoma (SLL) (COSMOS)	■	■		
			Diffuse large B cell lymphoma (DLBCL) (L-MIND)	■	■		
Anetumab Ravtansine (BAY94-9343)	Bayer	Mesothelin	Mesothelioma (MPM)	■	■		
			Cancer multi-indications	■			
BHQ880	Novartis	DKK-1	Multiple myeloma (MM) (renal insufficiency)	■	■		
Bimagrumab (BYM338)	Novartis	ActRIIB	Smoldering multiple myeloma	■	■		
			Muscular atrophy hip fracture surgery	■	■		
			Sarcopenia (dose-ranging)	■	■		
			Sarcopenia (withdrawal extension study)	■	■		
CNT06785	Janssen/J&J		Type 2 diabetes	■	■		
			Chronic obstructive pulmonary disease (COPD)	■	■		
MOR103/GSK3196165*	GSK	GM-CSF	Rheumatoid arthritis (RA)	■	■		
			Rheumatoid arthritis (RA) (mechanistic study)	■	■		
			Hand osteoarthritis	■	■		

■ Partnered Discovery Programs
 ■ Proprietary Development Programs

*MOR103/GSK3196165 is fully outlicensed to GSK.

Clinical Programs

Ongoing Clinical Trials (2)



Program	Partner	Target	Indication	Phase 1	Phase 2	Phase 3	Launched			
MOR106	Galapagos	IL-17C	Atopic dermatitis	■	■					
MOR202	I-Mab*	CD38	Multiple myeloma (MM)	■	■					
Nov-12 (MAA868)	Novartis	Factor XI	Prevention of thrombosis	■	■					
			Atrial fibrillation	■	■					
Setrusumab (BPS804)	Mereo/Novartis	Sclerostin	Brittle bone disease (OI) (Type I, III, IV) (ASTEROID)	■	■					
Tesidolumab (LFG316)	Novartis	C5	Paroxysmal nocturnal hemoglobinuria	■	■					
Utomilumab (PF-05082566)	Pfizer	4-1BB	Breast cancer (AVIATOR)	■	■					
			Acute myeloid leukemia (AML)	■	■					
			Advanced malignancies (combo with avelumab and PF-04518600)	■	■					
			Solid tumors (combo with ISA101b vaccination)	■	■					
			Solid tumors, NHL (combo with rituximab)	■	■					
			Solid tumors (combo with mogamulizumab)	■	■					
			Solid tumors (combo with PF04518600)	■	■					
			Colorectal cancer (combo with cetuximab & irinotecan)	■	■					
			Advanced ovarian cancer (T cell immunotherapy)	■	■					
			Advanced malignancies (combo with avelumab & PF-04518600)	■	■					
			R/R DLBCL & MCL (avelumab plus utomilumab-based combination therapy)	■	■					
			Breast cancer (combo with trastuzumab emtansine or trastuzumab)	■	■					
			Diffuse large B cell lymphoma (Javelin DLBCL) (combo with avelumab)	■	■					
			VAY736	Novartis	BAFF-R	ADCC mediated B cell depletion and BAFF-R blockade (AMBER)	■	■		
						Pemphigus vulgaris	■	■		
Idiopathic pulmonary fibrosis	■	■								
Primary Sjögren's syndrome	■	■								
Rheumatoid arthritis (RA)	■	■								
Primary Sjögren's syndrome (efficacy & safety)	■	■								
Chronic lymphocytic leukemia (combo with ibrutinib)	■	■								
Xentuzumab (BI-836845)	BI	IGF-1				Breast cancer	■	■		
			Castration-resistant prostate cancer (CRPC) (combo with enzalutamide)	■	■					
			Solid tumors (Japan)	■	■					
			Solid tumors (combo with abemaciclib)	■	■					
			EGFR mutant non-small cell lung cancer (NSCLC)	■	■					

*For development in China, Hong Kong, Taiwan, Macao

■ Partnered Discovery Programs
 ■ Proprietary Development Programs

Clinical Programs

Ongoing Clinical Trials (3)



Program	Partner	Target	Indication	Phase 1	Phase 2	Phase 3	Launched
BAY1093884	Bayer	TFPI	Hemophilia				
Elgemtumab (LJM716)	Novartis	HER3	HER2+ cancer (combo with BYL719 & trastuzumab)				
MOR107 (LP2-3)*	-	AT2-R	Not disclosed				
NOV-7 (CLG561)	Novartis	n.d.	Eye diseases				
NOV-8	Novartis	n.d.	Inflammation				
NOV-9 (LKA651)	Novartis	n.d.	Diabetic eye diseases				
NOV-10 (PCA062)	Novartis	n.d.	Cancer				
NOV-11	Novartis	n.d.	Blood disorders				
NOV-13 (HKT288)	Novartis	n.d.	Cancer				
NOV-14	Novartis	n.d.	Asthma				
PRV-300 (CNT03157)	ProventionBio	TLR-3	Colitis				
Vantictumab (OMP-18R5)	Oncomed	Fzd 7	Breast cancer (combo with paclitaxel) Pancreatic cancer (combo with nap-paclitaxel & gemcitabine)				

- Partnered Discovery Programs
- Proprietary Development Programs

*A phase 1 study in healthy volunteers was completed. MOR107 is currently in preclinical investigation with a focus on oncology indications.

Institution	Contact
Berenberg	Klara Fernandes
Bloomberg Intelligence	Cinney Zhang
Bryan Garnier	Gary Waanders
Commerzbank	Daniel Wendorff
Deutsche Bank	Gunnar Romer
Goldman Sachs	Keyur Parekh
HSBC	Julie Mead
Independent Research GmbH	Bernhard Weininger
J.P. Morgan Cazenove	James Gordon
JMP	Konstantinos N. Aprilakis
Kempen & Co.	Anastasia Karpova
Landesbank Baden-Württemberg	Timo Kürschner
Oddo BHF	Igor Kim
Royal Bank of Canada	Zoe Karamanoli

Thank You

Corporate Communications & IR
Phone +49 (0)89 / 899 27-404
Fax +49 (0)89 / 899 27-5404
Email investors@morphosys.com

www.morphosys.com

