December 2019

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 2019, 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, interpretations by regulatory authorities of our clinical data and real-world data analyses, in particular with respect to tafasitamab (MOR208), and the transition of MorphoSys to a fully integrated biopharmaceutical company, the expected time of launch of tafasitamab (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 tafasitamab (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 2019 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 tafasitamab (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 Annual Report on Form 20-F 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®). There is no guarantee any investigational product will be approved. Any shown cross-trial comparison between MorphoSys-own investigational products and literature data have significant limitations. Such data comparisons have been prepared at the request of, and for the sole benefit of, the investor community.

Transforming from a technology provider to a fully integrated biopharmaceutical company

MorphoSys at a Glance

Business locations

Headquarter near Munich, Germany; subsidiary in Boston, U.S.

Dual stock market listing

Listed in Frankfurt since 1999 and on NASDAQ since 2018

Proprietary Development business segment

Tafasitamab – MorphoSys key asset in B-cell malignancies

Partnered Discovery business segment

Tremfya®- First MorphoSys antibody brought to market by partner Janssen

Proprietary technology platform

Leading expertise in antibody, protein and peptide engineering

Employees

~405 employees coming from 39 different nations[1)]

» 27 years of experience contributed to the development of over 100 product candidates

1) As of September 30, 2019

Our Strategy

Main focus : BLA submission for tafasitamab and lenalidomide in r/r DLBCL to FDA by end of 2019, MAA to EMA by mid 2020

Building a strategic presence in the world‘s most important pharmaceutical market for anticipated 2020 launch of tafasitamab

Driving clinical assets development to enhance proprietary pipeline product value

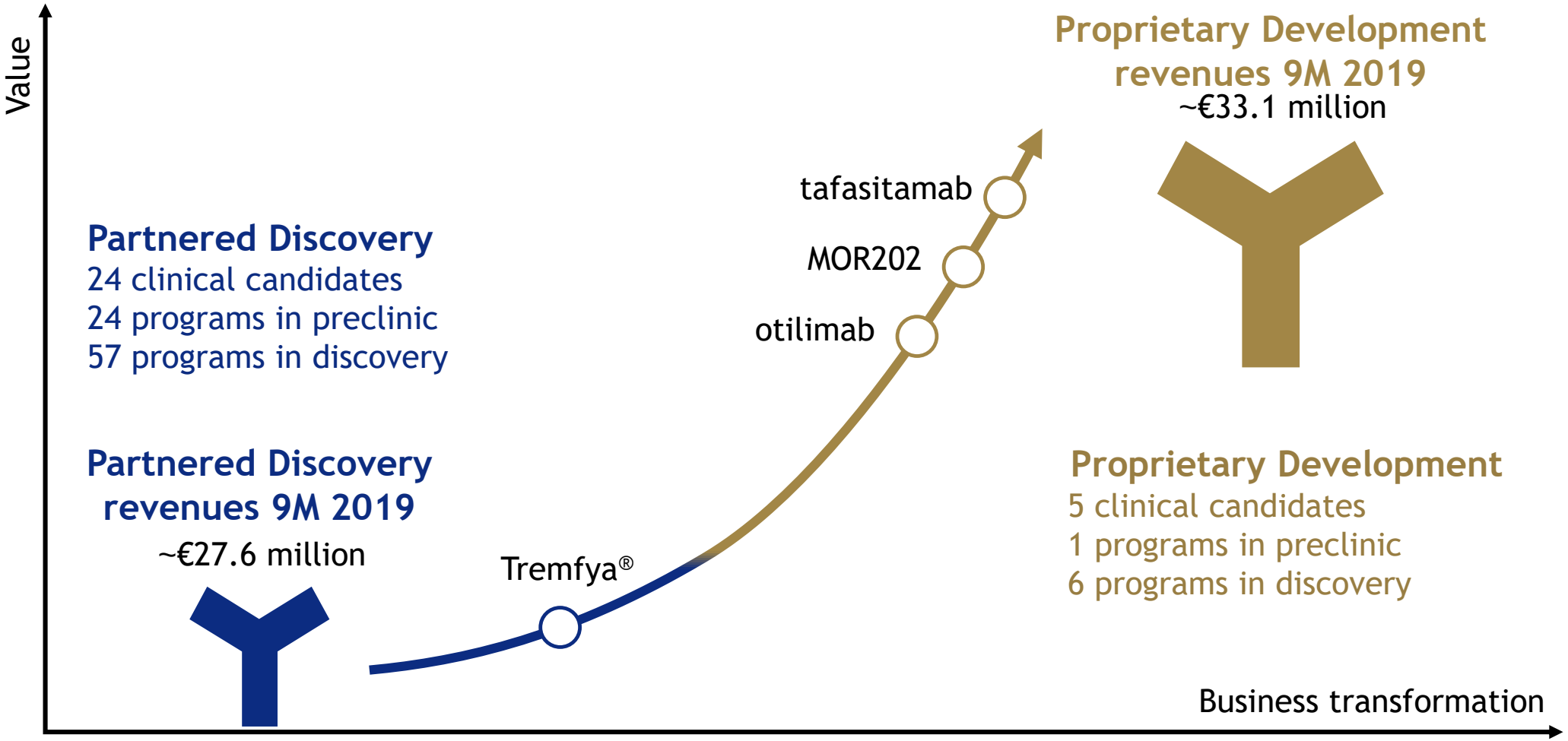
Solid financial position to fully explore the potential and invest in our product candidates

Becoming a fully-integrated biopharma company

Creating value: Strategy that balances short- and long-term growth potential

BLA: Biologic license application; r/r: relapsed/refractory; DLBCL: diffuse large B cell lymphoma; FDA: Food and Drug Administration; MAA: Marketing Authorization Application; EMA: European Medicines Agency

Our Business Model



Leveraging our clinical assets to anchor a new growth trajectory

Investment Highlights

Proprietary program: tafasitamab

Planned regulatory filing for combination with LEN in r/r DLBCL (U.S./Europe)

Proprietary pipeline: MOR202, otilimab

Advanced clinical proprietary product candidates in collaboration with strong partners

Partner program: Tremfya®

First partnered program on the market; broad development; strongly increasing royalty stream

Cutting-edge technologies : leading antibody and peptide technologies, innovative approaches

Making exceptional, innovative biopharmaceuticals to tackle serious diseases

Proprietary Development Segment

Portfolio of Proprietary Development Programs

Program	Partner	Target	Disease area	Ph 1 Ph 2 Ph 3
Tafasitamab (MOR208)	-	CD19	▪ DLBCL (B-MIND) ▪ DLBCL (L-MIND) ▪ CLL (COSMOS)	
MOR202	MorphoSys development I-Mab Biopharma[1)]	CD38	Multiple myeloma	
Otilimab (MOR103)	GSK	GM-CSF	Rheumatoid arthritis (ContrAst 1-3)	
MOR106[2)]	Novartis/ Galapagos	IL-17C	Further development currently under investigation	
MOR107[3)]	-	AT2-R	Oncology under investigation	

Proprietary Development Programs Out-licensed Proprietary Development Programs

Preclinical and early research in oncology

MOR210	I-Mab Biopharma[1)]	C5aR
PQ912	Vivoryon Therapeutics	QPCTL enzymes

1) For Development in China, Hong Kong, Macao, Taiwan and South Korea; 2) All clinical development in atopic dermatitis stopped; parties will explore future strategy
3) A phase 1 study in healthy volunteers was completed; currently in preclinical investigation; iv: intravenous; sc: subcutaneous

Tafasitamab (MOR208) – Overview

The product candidate

- Fc-engineered antibody targeting CD19
- Intended to enhance effector cell recruitment

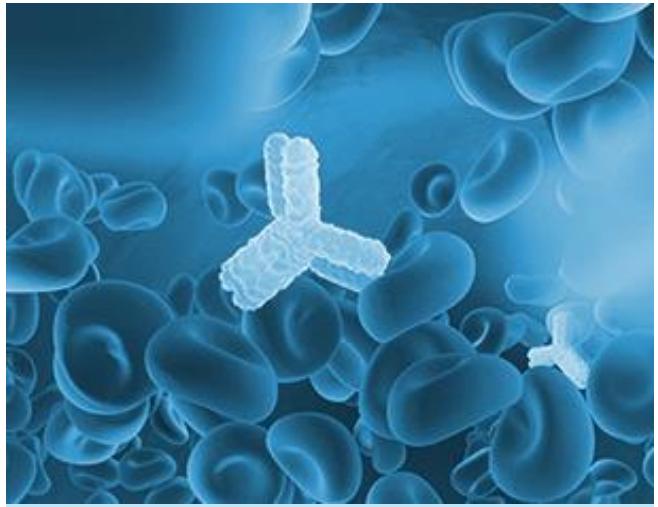
Current clinical development

- L-MIND (Phase 2) in r/r DLBCL: tafasitamab + lenalidomide
  - RE-MIND: Matched control cohort data reported in Oct 2019
- B-MIND (Phase 3) in r/r DLBCL: tafasitamab + bendamustine vs. rituximab + bendamustine

  Study successfully passed futility analysis in November 2019 update
- COSMOS (Phase 2) in r/r SLL/CLL: Tafasitamab + idelalisib or venetoclax

2019/2020 catalysts

- L-MIND: BLA with U.S. FDA end-2019; MAA with European EMA by mid-2020
- B-MIND: Primary analysis data expected in Q1 2022
- Frontline study in DLBCL:
  - Initiate Phase 1b trial in Q4 2019
  - Preparatory work for pivotal phase 2/3 planned to start mid-2020
- COSMOS: Data to be presented at ASH in December 2019



ENFORCER™

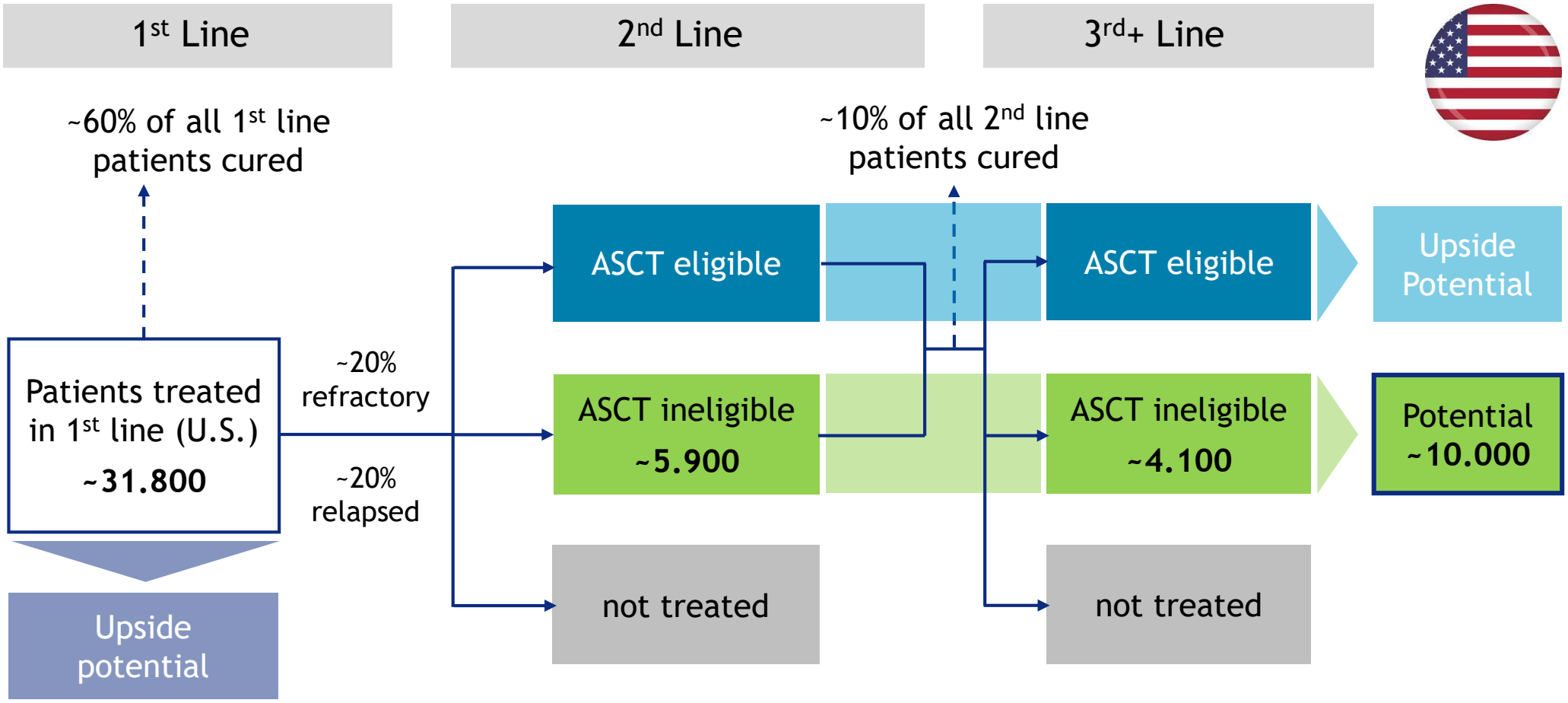
Enhanced Format for Cancer Eradication

Fc-engineered intended to result in:

- Increased recruitment of effector cells
- Enhanced elimination of cancer cells

r/r: relapsed/refractory; DLBCL: diffuse large B cell lymphoma; SLL: small lymphocytic lymphoma; CLL: chronic lymphocytic leukemia; FDA: Food and Drug Administration; EMA: European Medicines Agency; LEN: lenalidomide

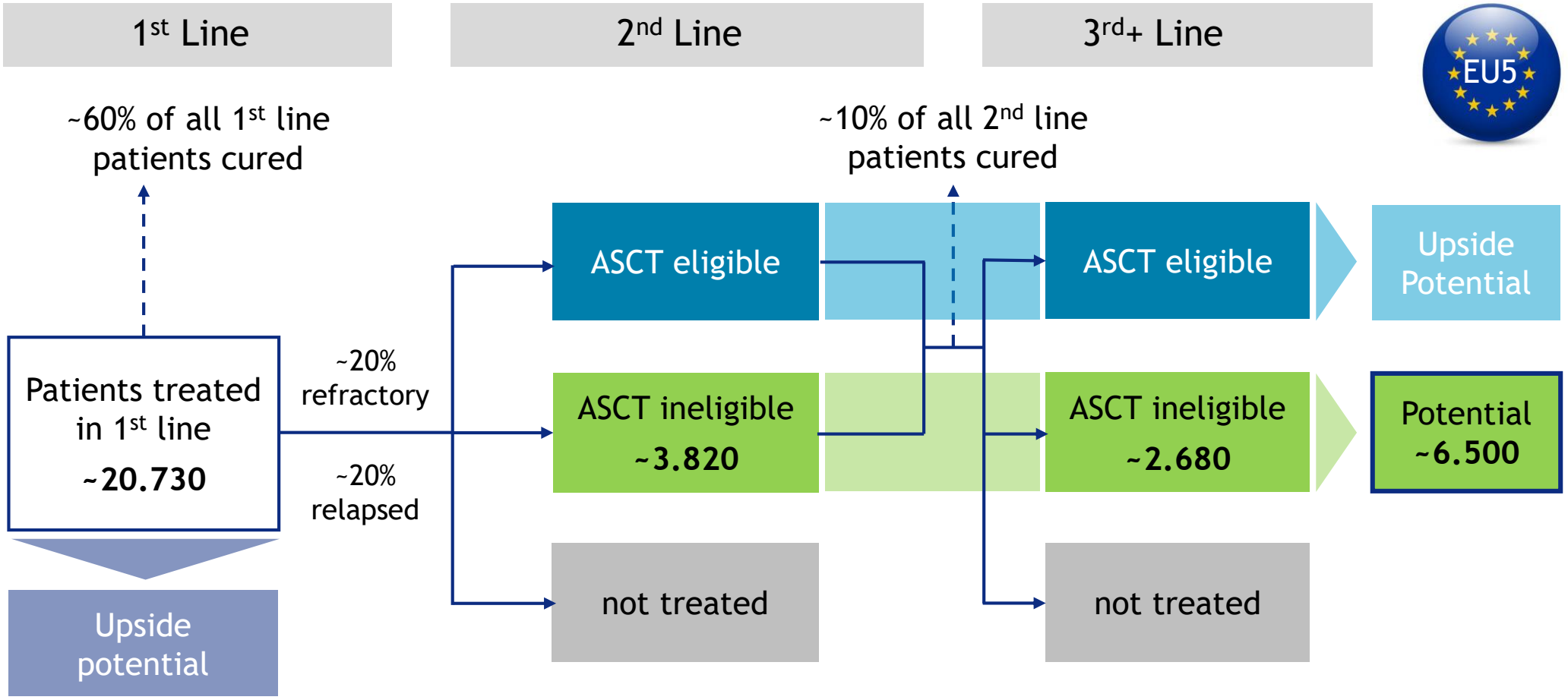
Opportunity for Tafasitamab in r/r DLBCL



Striving to offer a potential treatment alternative for ~10.000 patients in the U.S.

Source: DRG Epidemiology data; Kantar Market Research (TPP testing 2018), Friedberg et al., 2011; ASCT, autologous stem cell transplantation

Opportunity for Tafasitamab in r/r DLBCL



Striving to offer a potential treatment alternative for ~6.500 patients in Europe

Source: DRG Epidemiology data; Kantar Market Research (TPP testing 2018), Friedberg et al., 2011; ASCT, autologous stem cell transplantation

L-MIND: Tafasitamab + Lenalidomide

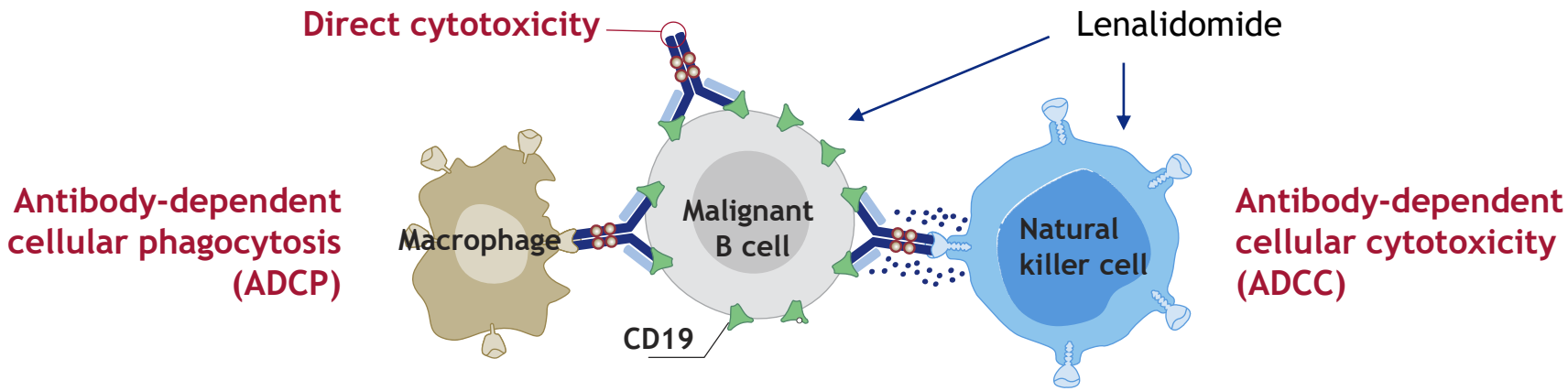
- Phase 2, open-label study in r/r DLBCL patients who are ineligible for HDC and ASCT
- Study start 2016; enrollment of 81 patients
- Primary analysis reached November 30, 2018

Effect tafasitamab

- ENFORCER™ format supporting ADCC and ADCP
- Inducing direct cell death
- Single agent activity in r/r DLBCL & iNHL

Effect lenalidomide

- T- and natural killer cell activation/expansion
- Inducing direct cell death
- Well-studied as anti-lymphoma agent



Tafasitamab and lenalidomide – a promising immunological combination

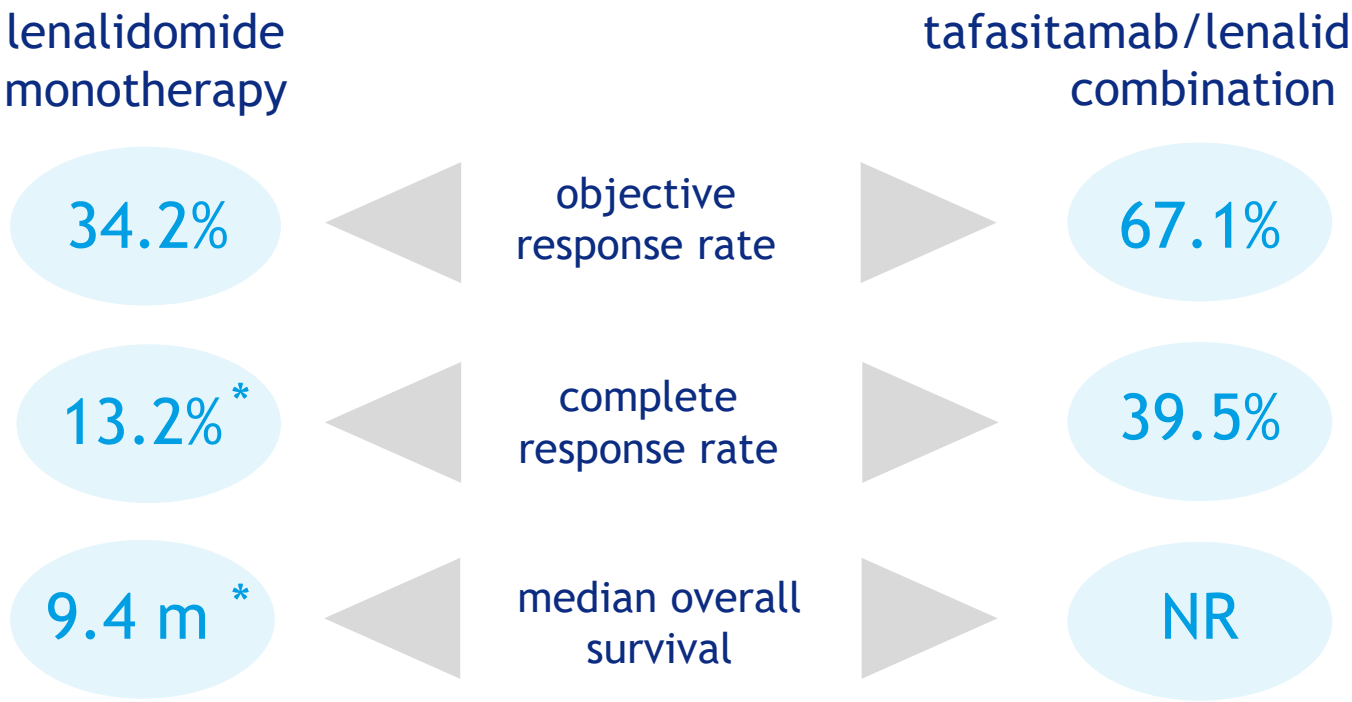
r/r: relapsed/refractory; DLBCL: diffuse large B cell lymphoma; HCD: high dose chemotherapy; ASCT: autologous stem cell transplantation; iNHL: indolent Non-Hodgkin's lymphoma

Re-MIND: Topline data published

Investigational antibody developed in hematological malignancies

Re-MIND Topline Data

- Outcome data of non-transplant eligible r/r DLBCL patients treated with LEN monotherapy in real-world setting
- 76 L-MIND eligible patients were matched 1:1 with 76 patients from Re-MIND
- Data will be part of BLA submission which is on track to be completed by end of the year



- All data investigator-assessed
- Data based on 76 patients of each cohort

» Probability to decease is reduced by 50% in the tafasitamab-LEN combination vs the LEN-monotherapy (hazard ratio = 0.499*)

r/r: relapsed/refractory; DLBCL: diffuse large B cell lymphoma; LEN: lenalidomide * Updated

L-MIND: Primary Endpoint Objective Response Rate (ORR)

L-MIND primary completion

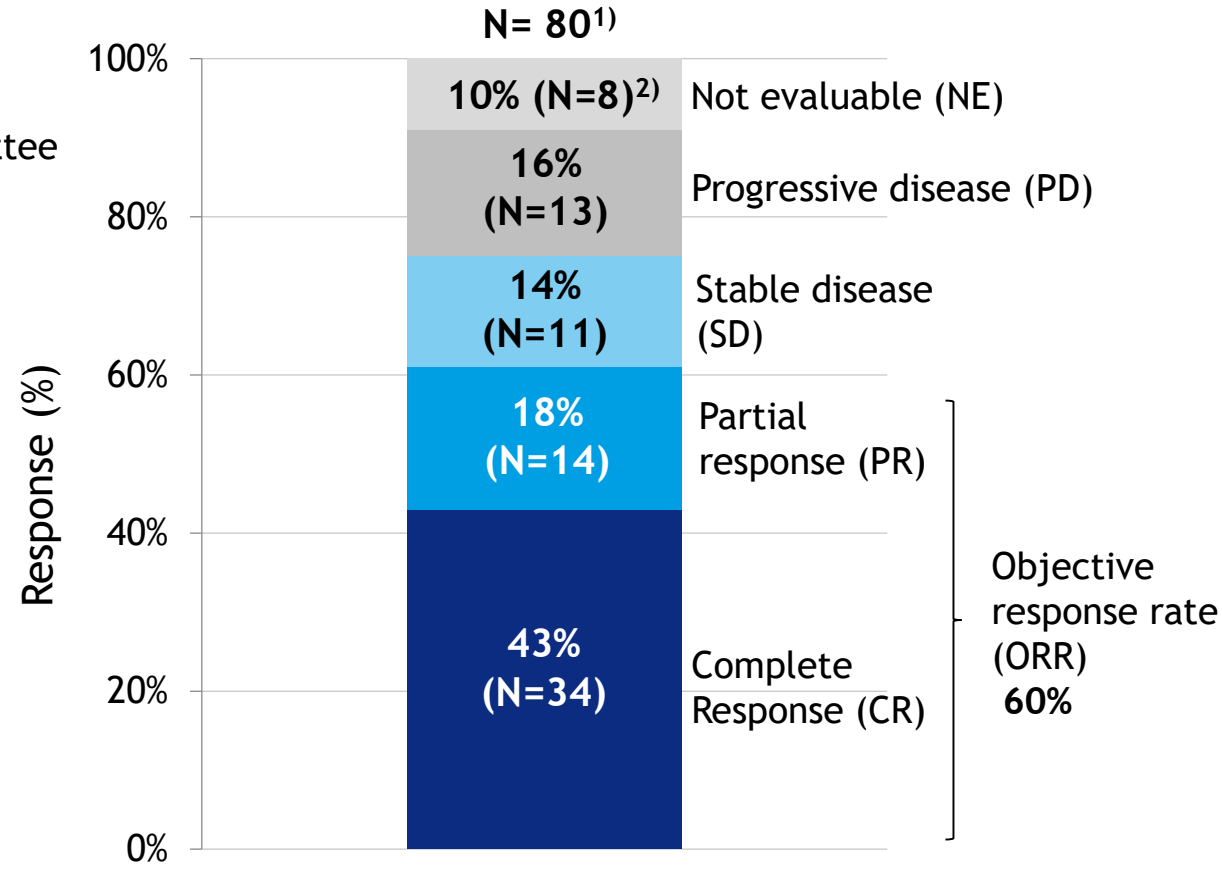
- Data cut-off November 30, 2018
- Assessment by independent review committee
- Minimum follow up 12 months

Patient baseline characteristics

- Median age: 72 years
- Median prior lines of therapy: 2

Response rates

- ORR of 60% (95%CI: 48.4% - 70.8%)
- CR-rate 43%
  - 82% of CRs PET-confirmed
  - 18% of CRs based on CT only
- For additional data please see appendix

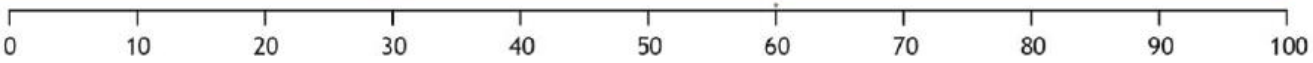


Promising data with encouraging responses in difficult-to-treat patients

1) Full analysis set, i.e. patients receiving at least one dose of tafasitamab and lenalidomide; 2) NE due to missing post-baseline tumor assessment; PET: positron emission tomography; CT: computer tomography

L-MIND: Comparable ORR in Most Subgroups of Interest

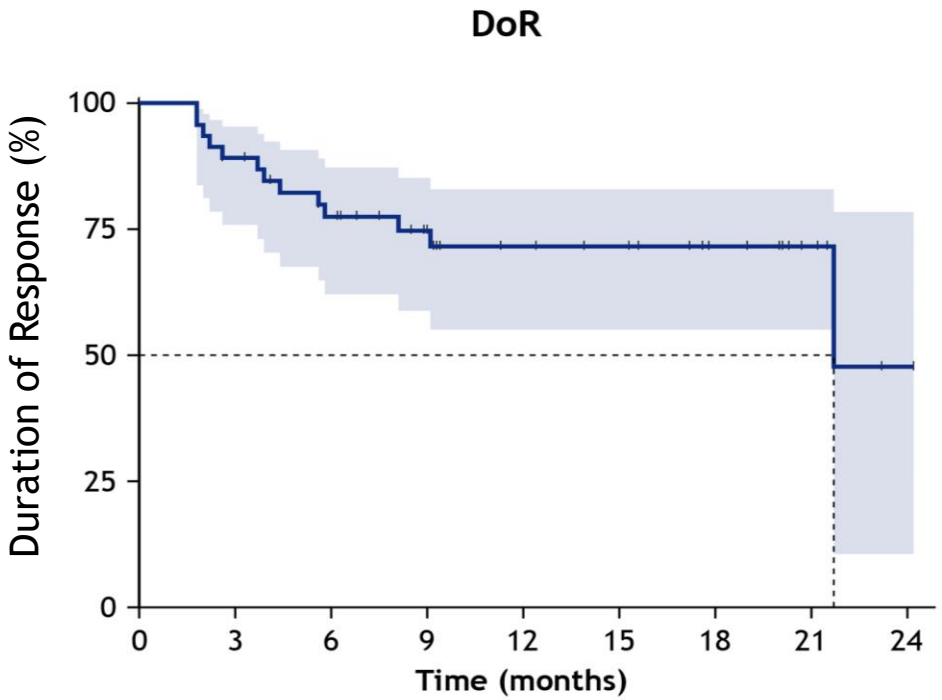
Subgroup	Level	Number of patients	ORR (%) and 95% CI
IPI	Risk low and low-intermediate	40	70
	Risk intermediate-high and high	40	50
Cell of origin (IHC)	Non-GCB	20	75
	GCB	36	50
Rituximab refractory	Yes	33	58
	No	46	61
Refractory to last line	Yes	35	60
	No	45	60
Primary refractory	Yes	15	60
	No	65	60
Number of prior lines	1	40	70
	≥ 2	40	50
Ann-Arbor stage	I-II	20	60
	III-IV	60	60
LDH elevated	Yes	44	57
	No	36	64
Age	≥ 70 years	46	59
	< 70 years	34	62



Consistent response rates reported in subgroups of high clinical relevance

Data cut as of November 30, 2018; ORR: objective response rate; IPI: international prognostic index; IHC: immunohistochemistry; GCB: germinal center B cell; LDH: lactate dehydrogenase

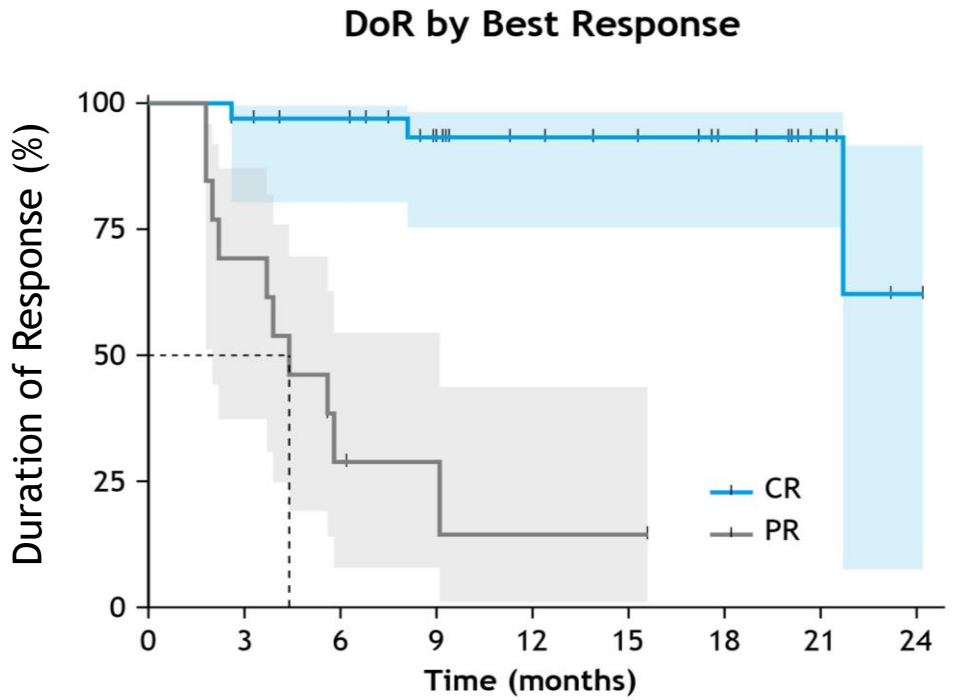
L-MIND: Duration of Response (DoR)



Patients on treatment

Overall	48	40	32	25	18	16	11	5	1

- Median DoR 21.7 months (95%CI: 21.7 – NR)



Patients on treatment

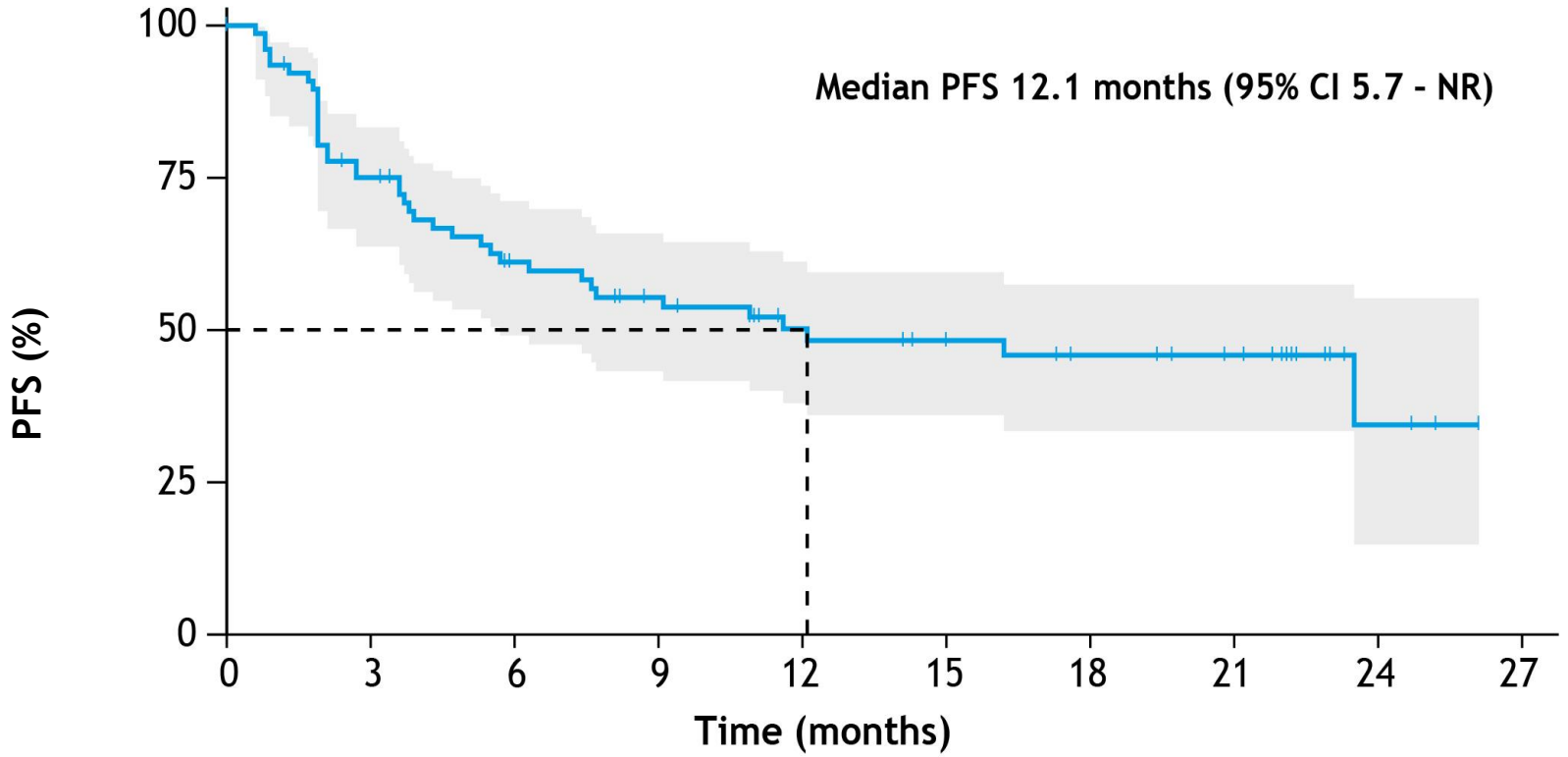
CR	34	31	29	23	17	15	11	5	1
PR	14	9	3	2	1	1	0	0	0

- Median DoR CR patients: NR (95%CI: 21.7 – NR)
- Median DoR PR patients: 4.4 mo (95%CI: 2.0 – 9.1)

Complete responders show an over 90% probability of a durable response of ~22 months

Data cut as of November 30, 2018; Data assessed by independent review committee (IRC); CI: confidence interval; CR: complete response; PR: partial response

L-MIND: Progression-free Survival (PFS)



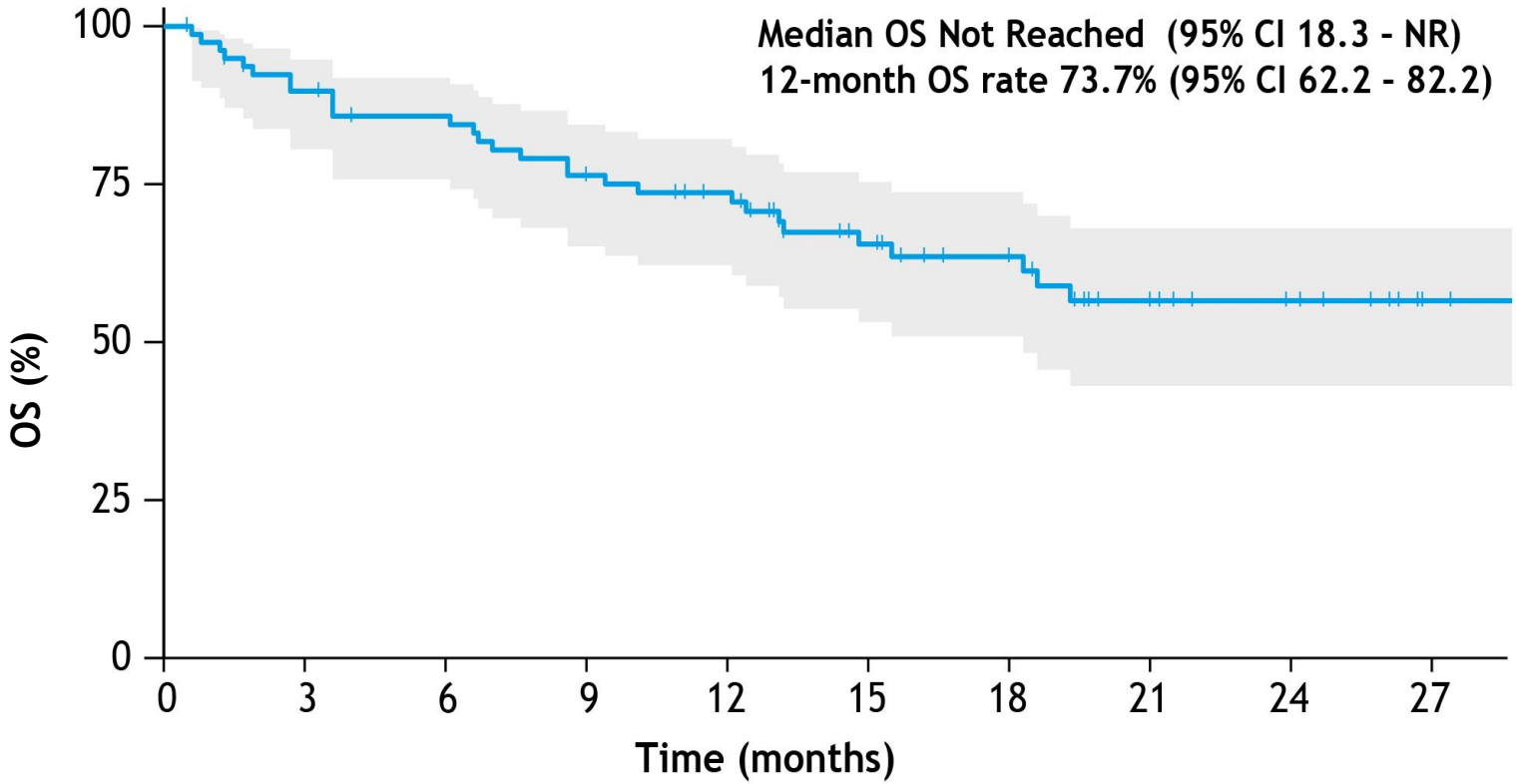
Patients on treatment										
Overall	80	56	42	35	26	22	17	13	3	0

- 39 PFS events recorded
- 28 patients still ongoing with study treatment

High proportion of patients with encouraging long-term treatment effects

Data cut as of November 30, 2018; Data assessed by independent review committee (IRC); CI: confidence interval; NR: not reached

L-MIND: Overall Survival (OS)



Patients on treatment										
Overall	80	69	64	57	50	35	29	20	14	6

High proportion of patients with encouraging long-term treatment effects

Data cut as of November 30, 2018; Data assessed by independent review committee (IRC); CI: confidence interval; NR: not reached

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

Please note limitations of cross-trial comparisons to literature data

Compound(s)	Tafasitamab + LEN	LEN Monotherapy	LEN Monotherapy	RTX + LEN	OBI + LEN
Parameter/ Authors	L-MIND Cut-off Nov 30, 2018	Witzig et al., 2011	Czuzcman et al., 2017	Wang et al., 2013	Houot et al., 2019
Phase	2	2	2/3	2	2
Evaluable patient population	n=80	n=108	n=51	n=32	n=71
Objective response rate	60%	28%	27%	28%	35%
Complete response rate	43%	7%	10%	22%	18%
Median PFS, months	12.1	2.7	3.1	2.8	4.1
Median DoR, months	21.7	10.6	17.2	n/a	16
Median OS	NR, 74% at 12 mo.	n/a	7.1	10.2	10.6

Tafasitamab is an investigational drug that is not approved by FDA for any use.
No head-to-head clinical studies have been performed between tafasitamab and the other products in this table. As such, these cross-trial comparisons of literature data have significant limitations. The data in this table have been prepared at the request of, and for the sole benefit of, the investor community.
+ By investigator (INV); # By independent review committee (IRC); * For all patients; r/r: relapsed/refractory; DLBCL: diffuse large B cell lymphoma; LEN: lenalidomide; RTX: rituximab; OBI: obinutuzumab; PFS: progression-free survival; DoR: duration of reponse; OS: overall survival; NR: not reached; n/a: not assessed

Existing and Upcoming Approaches in r/r DLBCL

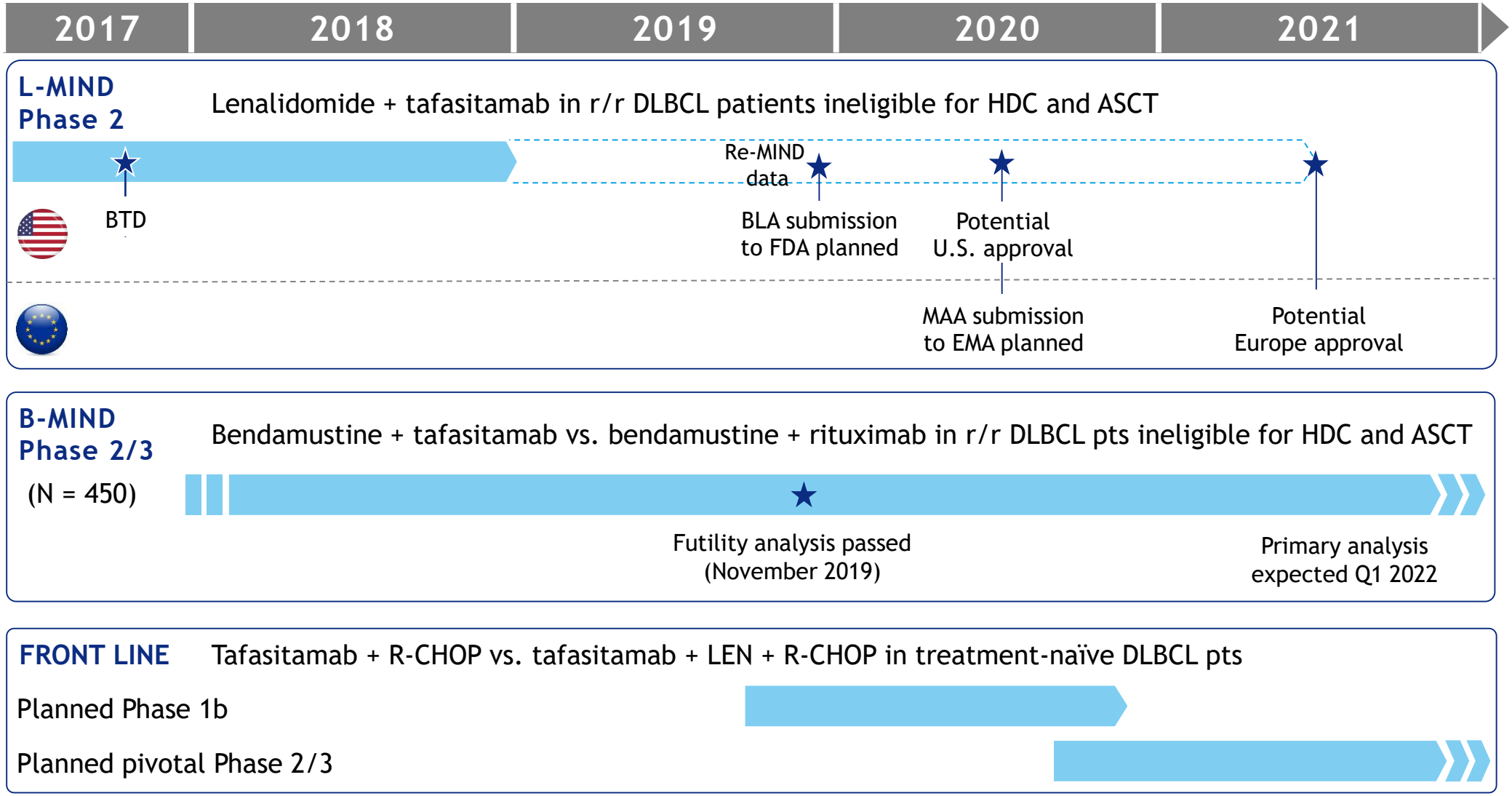
Please note limitations of cross-trial comparisons to literature data

Compound(s)	Tafasitamab + LEN	Polatuzumab + RTX + bendamustine	RTX + bendamustine	Salvage chemotherapies + radiation	Tisagenlecleucel (CD19 CAR-T)	Axi-CEL (CD19 CAR-T)
Parameter/ Authors	**L-MIND Cut-off Nov 30, 2018**	**Sehn et al., ASH 2018**	**Dang et al., 2014**	**Scholar-1 Crump et al., 2017**	**Juliet Schuster et al., 2018**	**Zuma-1 Neelapu et al., 2018**
Phase	2	2	3	Retrospective study	2	2
Evaluable patient population	r/r DLBCL n=80	r/r DLBCL n=40	r/r DLBCL n=137	r/r DLBCL n=636	r/r DLBCL n=115	r/r NHL n=101 (DLBCL n=77)
Objective response rate	60%	45% EOT	49%	26%	54%/37% Best/@6 mo.	82%/48% Best/@6 mo.
Complete response rate	43%	40% EOT	18%	7%	40%/30% Best/@6 mo.	58%/46% Best/@6 mo.
Median PFS, months	12.1	7.6 +	4.2	n/a	n/a	5.9*
Median DoR, months	21.7	10.3 +	n/a	n/a	NR	11.1 + NR #
Median OS, months	NR, 74% at 12 mo.	12.4, ~55% at 12 mo.	9.5	6.3	11.1, 49% at 12 mo.	NR, 59% at 12 mo.

Tafasitamab is an investigational drug that is not approved by FDA for any use.

No head-to-head clinical studies have been performed between tafasitamab and the other products in this table. As such, these cross-trial comparisons of literature data have significant limitations. The data in this table have been prepared at the request of, and for the sole benefit of, the investor community. + By investigator (INV); # By independent review committee (IRC); * For all patients; r/r: relapsed/refractory; DLBCL: diffuse large B cell lymphoma; RTX: rituximab; NHL: Non-Hodgkin's lymphoma; EOT: end of treatment; PFS: progression-free survival; DoR: duration of reponse; OS: overall survival; NR: not reached; n/a: not assessed; mo: months

Tafasitamab: Clinical Development Plan DLBCL



More information at clinicaltrials.gov; BTD: breaktrough therapy designation; MAA: Marketing Authorization Application; HDC: high-dose chemotherapy; ASCT: autologous stem cell transplantation; R-CHOP: Rituximab, Cyclophosphamide, Doxorubicin, Vincristine, Prednisone; LEN: lenalidomide; pts: patients

MOR202: Proprietary Antibody Against CD38

The product candidate

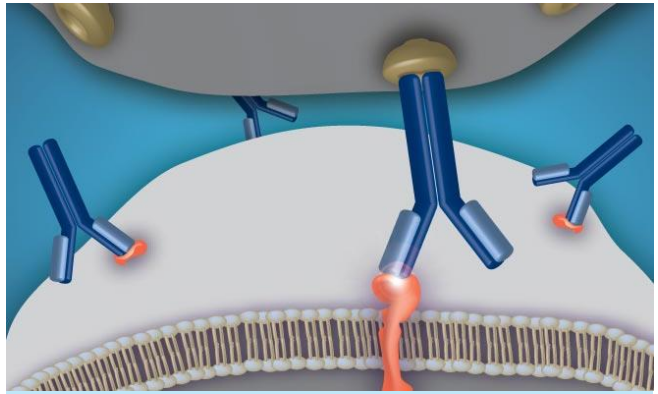
- Antibody against CD38
- Development in multiple myeloma and autoimmune diseases

Current clinical development

- I-Mab: Chinese region
  - Pivotal phase 3 study: MOR202 + LEN in r/r 2L multiple myeloma
  - Pivotal phase 2 study: MOR202 in r/r 3L multiple myeloma

2019/2020 catalysts

- MorphoSys: Start of a clinical trial in anti-PLA2R antibody positive membranous nephropathy, aMN, in Q4 2019
- I-Mab: Continue pivotal clinical development program in multiple myeloma, expansion to mainland China
- I-Mab: Start of clinical development in systemic lupus erythematosus



Financials and deal terms

- I-Mab has exclusive development and commercialization rights in China, Taiwan, Hong Kong and Macao
  - Up-front: $20m
  - Milestones: Up to $100m
  - Royalties: Tiered, double-digit

Seizing opportunities in oncology and autoimmune diseases

LEN: lenalidomide; r/r: relapsed/refractory; 2L: second line, 3L: third line; PLA2R: Phospholipase A2 Rezeptor-1

Otilimab[1]: Proprietary Antibody Against GM-CSF

The product candidate

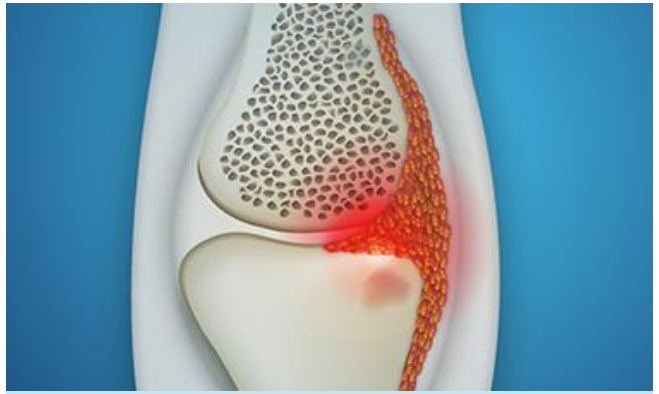
- Antibody against GM-CSF
- Development in rheumatoid arthritis

Current clinical development

- Phase 3 clinical development program started by GSK in July 2019
  - ContRAst program: three pivotal studies and a long-term extension study
  - Otilimab compared against approved drugs (JAK inhibitor / anti-IL6 antibody)
  - GSK plans to enroll 3500-4100 patients
  - Milestone payment of €22m to MorphoSys

Upcoming catalysts

- First data-readout expected H2 2022



Financials and deal terms

- HuCAL antibody fully out-licensed to GSK in 2013
  - Up-front: €22.5m
  - Milestones: up to €423m
  - Royalties: Tiered, double-digit
- GSK responsible for the development and commercialization of the compound in all therapeutic fields

Blocking a key inflammatory pathway in rheumatoid arthritis

1) GSK3196165, previously MOR103; GM-CSF: granulocyte-macrophage colony stimulating factor; JAK: Janus Kinase; IL: interleukin

MOR210: Preclinical Candidate Targeting C5aR

The product candidate

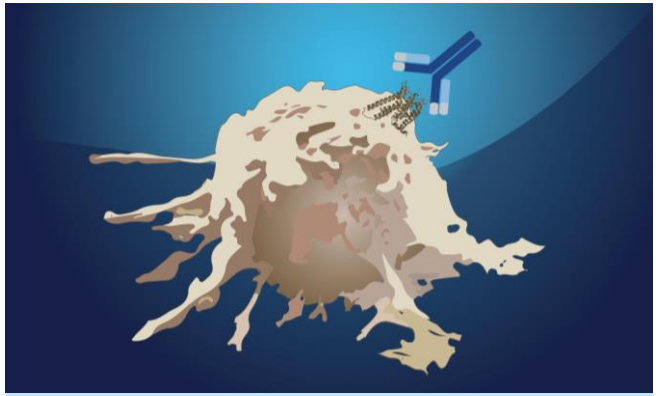
- Antibody against C5aR in preclinical development
- Preventing the interaction of C5aR with C5a

C5a/C5aR axis in the tumor microenvironment (TME)

- Tumor cells produce C5a
- C5a attracts MDSCs through C5aR
- Release of immunosuppressive cytokines
- Generation of an immunosuppressive TME at site of primary tumor as well as in metastatic niche
- Impairment of T-cell functions

Effect of C5aR blockade

- Reversion of immunosuppressive TME
- Enabling patient's immune system to fight cancer
- Enabling other checkpoint inhibitors to deliver their full potential



Financials and deal terms

- I-Mab: rights in China, Hong Kong, Macao, Taiwan & South Korea
- MorphoSys: rights in rest-of-world
  - Up-front: US-$ 3.5m
  - Milestones: up to US-$ 101.5m
  - Royalties: Tiered, mid single-digit
- I-Mab: low single-digit royalties on net sales outside its territories, tiered percentage of sub-licensing revenue

» Release of immune checkpoint blockades as a successful strategy to fight cancer

C5a: complement factor 5a; C5aR: C5a-receptor; TME: tumor microenvironment; MDSCs: myeloid-derived suppressor cells

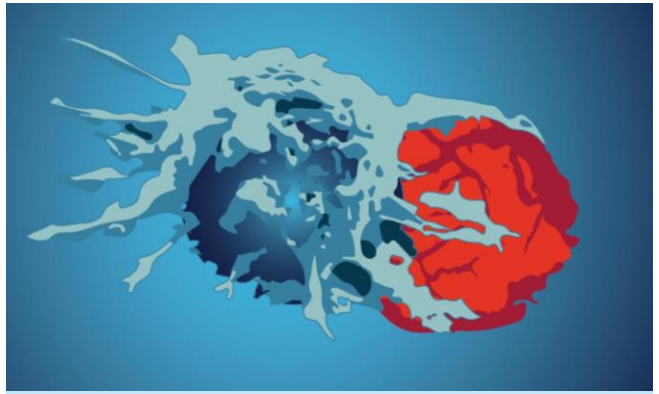
MorphoSys and Vivoryon Therapeutics Agreement

The product candidates

- Small molecule inhibitors of CD47-SIRP alpha signaling
- QPCTL enzyme as target for inhibitors
- CD47–SIRP alpha inhibition prevents tumor cells to evade immune system
- Innovative approach in cancer immunotherapy with differentiation potential
- Lead drug candidate PQ912: Phase 2a safety data available to potentially accelerate development

2019/2020 catalysts

- Option period allows MorphoSys to conduct preclinical investigations
- Focus on combination with proprietary antibodies, first with tafasitamab



Financials and deal terms

- Exclusive license option for MorphoSys obtained July 2019
- MorphoSys invested €15m in a minority stake in Vivoryon Therapeutics
- Vivoryon Therapeutics entitled to royalties and milestones upon exercise of license option

» “Don’t eat me”- Interfering with the CD47–SIRP alpha pathway in immuno-oncology

SIRP: signal-regulating protein; QPCTL: glutaminyl-peptide cyclotransferase like

Partnered Discovery Segment

Tremfya® (Guselkumab)

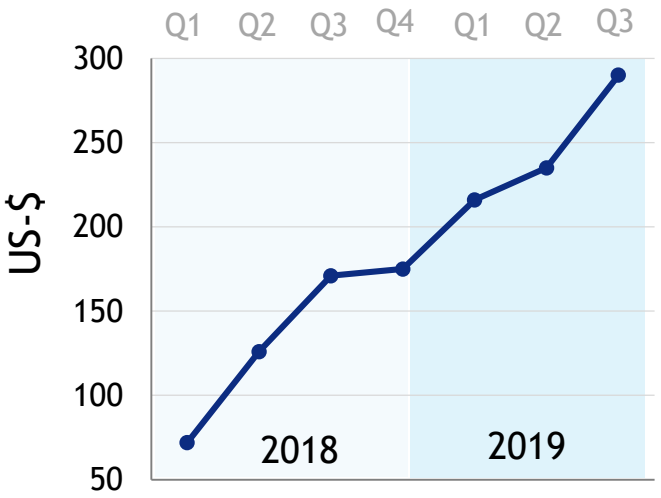
The drug

- Antibody against IL-23
- Generated using MorphoSys's HuCAL technology

2019/2020 catalysts

- Tiered royalty stream
- Strong Q3 sales of $ 290 million:
  royalty guidance update to €30 to 35m for 2019
- Janssen announced submission of supplemental BLA for Tremfya® to U.S. FDA and MAA to EMA for treatment of psoriatic arthritis

Tremfya® sales
reported by Janssen



Phase 1	Phase 2	Phase 3	Approved/ Launched
▪ Familial adenomatous polyposis	▪ Crohn's disease ▪ Hidradenitis suppurativa ▪ Ulcerative colitis	▪ Plaque psoriasis ▪ Pustular/erythrodermic psoriasis ▪ Psoriatic arthritis	▪ Psoriasis[1)] ▪ Psoriatic arthritis[2)] ▪ Palmoplantar pustulosis[2)]

First MorphoSys antibody brought to market by partner Janssen

1) U.S., EU, Canada, Brazil, Australia, Japan; 2) Japan; IL: Interleukin; BLA: biologics license application; FDA: Food and Drug Administration; EMA: European Medicines Agency

Financials

In € million	Reported FY 2018	Reported Q1-Q3 2019	Guidance 2019[1] (As of July 3, 2019)
Group Revenues	76.4	60.7	65 to 72[2]
Proprietary R&D Expenses (incl. Technology Development)	98.3	68.8	95 to 105
EBIT	-59.1	-56.3	-105 to -115

Cash Position September 30, 2019: €412.4 m

Total ordinary shares issued as of September 30, 2019: 31,927,958

Germany, Frankfurt Stock Exchange: MOR

U.S., NASDAQ Global Market: MOR

1) Guidance update in connection with milestone payment of €22m from GSK after start of phase 3 clinical development program with otilimab (MOR103/GSK3196165) in rheumatoid arthritis.
2) Revenues are expected to include royalty income from Tremfya® ranging from €30-35m on constant $ currency.

Appendix

L-MIND: Baseline Characteristics[1)]

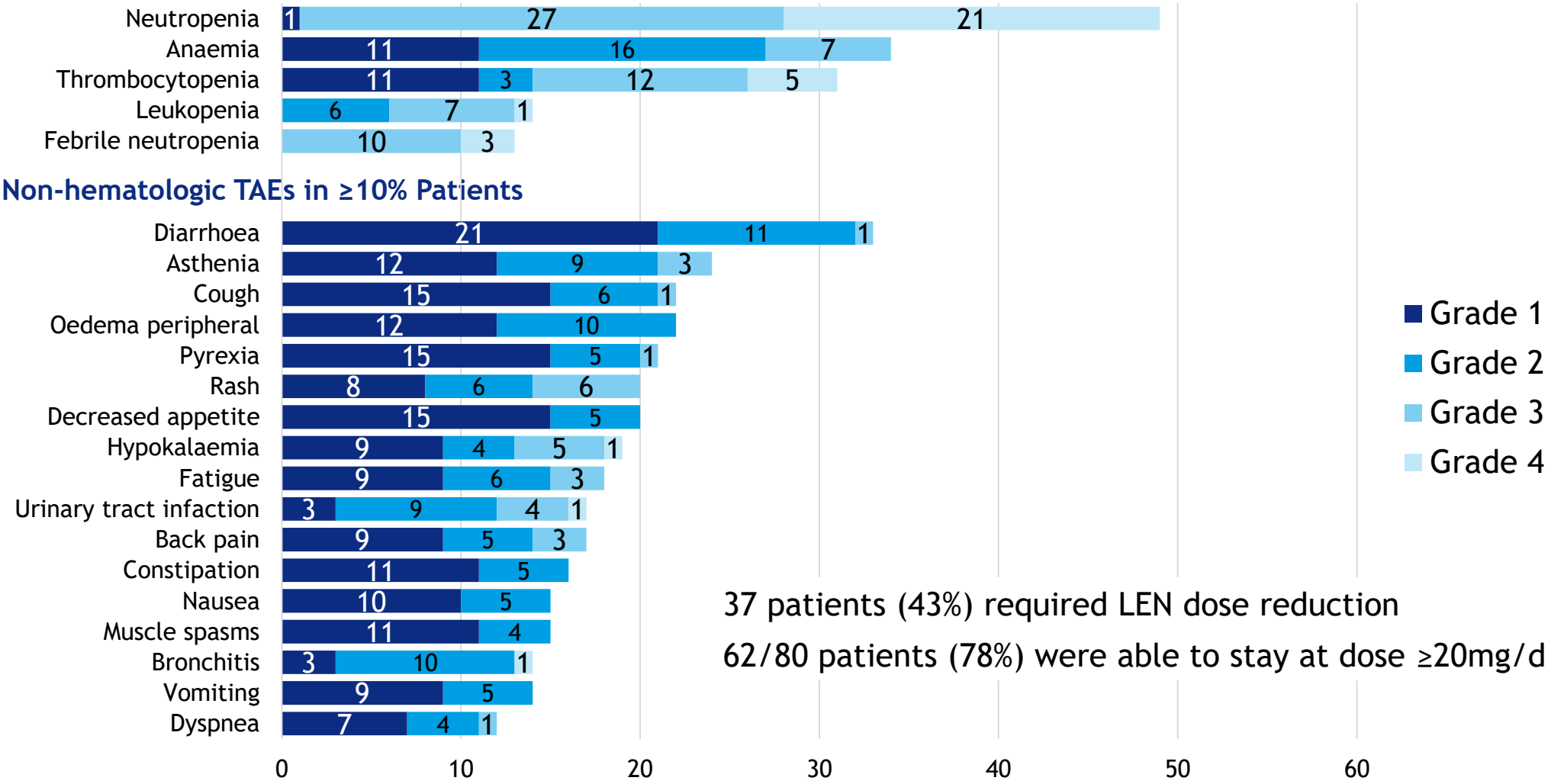
Characteristic	Specification	n=81 (%)
Sex	Male	44 (54)
	Female	37 (46)
Age [years][1)]	median (range)	72 (41-86)
Risk (IPI)[1)]	0-2	40 (49)
	3-5	41 (51)
Ann Arbor Stage[1)]	I-II	20 (25)
	III-IV	61 (75)
Elevated LDH[1)]	Yes	45 (56)
	No	36 (44)
Prior Lines	Median	2
	1	40 (49)
	2	35 (43)
	3	5 (6)
	4	1(1)
Primary Refractory	Yes	15 (18)
	No	66 (82)
Refractory to last prior therapy[1)]	Yes	36 (44)
	No	45 (56)
Prior SCT	Yes	9 (11)
	No	72 (89)
Cell of Origin (Centrally assessed - Hans algorithm)	GCB	37 (46)
	Non-GCB	20 (25)
	Unknown	24 (30)

1) At study entry; IPI: international prognostic index; LDH; lactate dehydrogenase; SCT: stem cell transplantation; GCB: germinal center B cell

L-MIND: Tafasitamab + Lenalidomide Safety Profile

morphosys

Hematologic TAEs in ≥10% Patients



Data cut as of November 30, 2018; N=81, numbers represent % patients; TAEs: treatment-emergent adverse events; LEN: lenalidomide

Our Clinical Pipeline

28 Product Candidates in Clinical Development, One Product Launched

Most advanced development stage

Program	Partner	Target	Disease area	Phase 1	Phase 2	Phase 3	Launched
Tremfya® (guselkumab)	Janssen	IL-23p19	Psoriasis				✓
Gantenerumab	Roche	Amyloid-ß	Alzheimer's disease				
MOR202/TJ202	I-Mab Biopharma	CD38	Multiple myeloma				
Otilimab (MOR103/GSK3196165)	GSK	GM-CSF	Inflammation				
Tafasitamab (MOR208)	-	CD19	Hematological malignancies				
Anetumab ravtansine (BAY94-9343)	Bayer	Mesothelin (ADC)	Solid tumors				
BHQ880	Novartis	DKK-1	Multiple myeloma				
Bimagrumab (BYM338)	Novartis	ActRIIB	Metabolic diseases				
CNTO6785	Janssen	-	Inflammation				
Ianalumab (VAY736)	Novartis	BAFF-R	Inflammation				
MOR106	Novartis/Galapagos	IL-17C	Inflammation				
MAA868	Anthos Therapeutics	Factor XI	Cardiovascular diseases				
NOV-9 (LKA651)	Novartis	-	Diabetic eye diseases				
Setrusumab (BPS804)	Mereo/Novartis	Sclerostin	Brittle bone syndrome				
Tesidolumab (LFG316)	Novartis	C5	Eye diseases				
Utomilumab (PF-05082566)	Pfizer	4-1BB	Cancer				
Xentuzumab (BI-836845)	BI	IGF-1	Solid tumors				
BAY2287411	Bayer	Mesothelin	Cancer				
Elgemtumab (LJM716)	Novartis	HER3	Cancer				
MOR107 (LP2-3)*	-	AT2-R	Not disclosed				
NOV-7 (CLG561)	Novartis	-	Eye diseases				
NOV-8	Novartis	-	Inflammation				
NOV-10 (PCA062)	Novartis	-	Cancer				
NOV-11	Novartis	-	Blood disorders				
NOV-13 (HKT288)	Novartis	-	Cancer				
NOV-14	Novartis	-	Asthma				
PRV-300 (CNTO3157)	ProventionBio	TLR-3	Inflammation				
Vantictumab (OMP-18R5)	Mereo (OncoMed)	Fzd 7	Cancer				

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Partnered Discovery Programs
Proprietary Development Programs
Out-licensed Proprietary Development Programs

* Phase 1 in healthy volunteers completed; currently in preclinical investigation

Clinical Programs

Ongoing Clinical Trials (1)

Most advanced development stage

Program	Partner	Target	Indication	Phase 1	Phase 2	Phase 3	Launched
Guselkumab (CNTO1959)	Janssen/J&J	IL23p19	Plaque psoriasis				
			Psoriatic arthritis & palmoplantar pustulosis (Japan only)				
			Plaque psoriasis (VOYAGE 1)				
			Plaque psoriasis (VOYAGE 2)				
			Plaque psoriasis (GUIDE)				
			Psoriatic arthritis (COSMOS)				
			Psoriatic arthritis (Discover-1)				
			Psoriatic arthritis				
			Palmoplantar-non-Pustular Psoriasis (G-PLUS)				
			Chronic plaque psoriasis (pediatric participants) (PROTOSTAR)				
			Crohn's disease (GALAXI 1)				
			Ulcerative colitis (VEGA)				
			Hidradenitis suppurativa (NOVA)				
			Ulcerative Colitis (QUASAR)				
			Familial adenomatous polyposis				
Gantenerumab	Roche	Amyloid-ß	Early Alzheimer's disease (GRADUATE-1)				
			Early Alzheimer's disease (GRADUATE-2)				
			Mild Alzheimer's disease (Marguerite RoAD) (OLE)				
			Prodromal Alzheimer's disease (Scarlett RoAD) (OLE)				
			Genetically predisposed for Alzheimer's disease (DIAN)				
MOR202/TJ202	I-Mab	CD38	Multiple myeloma (combo with lenalidomide)				
			Multiple myeloma				
MOR202	-	CD38	Multiple myeloma				
Otilimab (MOR103/GSK3196165)	GSK	GM-CSF	Rheumatoid arthritis (ContRAst1)				
			Rheumatoid arthritis (ContRAst2)				
			Rheumatoid arthritis (ContRAst3)				
Tafasitamab (MOR208)	-	CD19	Diffuse large B cell lymphoma (B-MIND)				
			Chronic lymphocytic leukemia or small lymphocytic lymphoma (COSMOS)				
			Diffuse large B cell lymphoma (L-MIND)				
Anetumab ravtansine (BAY94-9343)	Bayer	Mesothelin	Mesothelioma				
			Cancer multi-indications				
BHQ880	Novartis	DKK-1	Multiple myeloma				

Partnered Discovery Programs
Proprietary Development Programs
Out-licensed Proprietary Developments Programs

Clinical Programs

Ongoing Clinical Trials (2)

Most advanced development stage

Program	Partner	Target	Indication	Phase 1	Phase 2	Phase 3	Launched
Bimagrumab (BYM338)	Novartis	ActRIIB	Type 2 diabetes				
CNTO6785	Janssen/J&J	-	Inflamation				
Ianalumab (VAY736)	Novartis	BAFF-R	ADCC mediated B cell depletion and BAFF-R blockade (AMBER)				
			Pemphigus vulgaris				
			Idiopathic pulmonary fibrosis				
			Rheumatoid arthritis				
			Primary Sjögren's syndrome (efficacy & safety)				
			Systemic Lupus Erythematosus				
			Chronic lymphocytic leukemia (combo with ibrutinib)				
MOR106	Novartis/Galapagos	IL-17C	Inflammation				
MAA868	Anthos	Factor XI	Cardiovascular diseases				
NOV-9 (LKA651)	Novartis	n.d.	Diabetic eye diseases				
Setrusumab (BPS804)	Mereo/Novartis	Sclerostin	Brittle bone disease (Type I, III, IV) (ASTEROID)				
Tesidolumab (LFG316)	Novartis	C5	Paroxysmal nocturnal hemoglobinuria				
Utomilumab (PF-05082566)	Pfizer	4-1BB	Breast cancer (AVIATOR)				
			Breast cancer (combo with avelumab) (InCITe)				
			Advanced Malignancies (PF-04518600 & CMP-001 (TLR9 agonist)) (JAVELIN Medley)				
			Solid tumors (combo with ISA101b vaccination)				
			Advanced malignancies (combo with avelumab & PF-04518600)				
			Refractory large B cell lymphoma (combo with axicabtagene ciloleucel) (ZUMA-11)				
			Colorectal cancer (combo with cetuximab & irinotecan)				
			Advanced ovarian cancer (T cell immunotherapy)				
			R/R DLBCL & MCL (avelumab plus utomilumab-based combination therapy)				
			Breast cancer (combo with trastuzumab emtansine or trastuzumab)				
			Follicular lymphoma (combo with rituximab, avelumab & PF-04518600)				

Partnered Discovery Programs
Out-licensed Proprietary Developments Programs

Clinical Programs

Ongoing Clinical Trials (3)

Most advanced development stage

Program	Partner	Target	Indication	Phase 1	Phase 2	Phase 3	Launched
Xentuzumab (BI-836845)	BI	IGF-1	Breast cancer				
			Castration-resistant prostate cancer (combo with enzalutamide)				
			Solid tumors (Japan)				
			Solid tumors (combo with abemaciclib)				
			EGFR mutant non-small cell lung cancer				
BAY2287411	Bayer	Mesothelin	Cancer				
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-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 (CNTO3157)	ProventionBio	TLR-3	Colitis				
Vantictumab (OMP-18R5)	Mereo (OncoMed)	Fzd 7	Cancer				

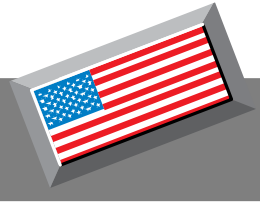
Partnered Discovery Programs
Proprietary Development Programs

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

MorphoSys AG Stock Information

Dual Listing

Listing in Germany on the Frankfurt Stock Exchange	
Security paper	Ordinary shares (ORD)
Symbol	MOR
ISIN	DE0006632003
Security Code Number	5531000
Currency	EUR
1st trading day	March 9, 1999

Listing in the U.S. on the Nasdaq Global Market	
Security paper	American depositary shares (ADS)
Symbol	MOR
CUSIP	617760202
ISIN	US6177602025
Currency	US-$
1st trading day	April 19, 2018
Ratio	4 ADSs : 1 ORD
Depository Bank	BNY Mellon

Please see our website www.morphosys.com for more information about MorphoSys shares and ADSs

Notes

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Thank You

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