

EDUCATIONAL GRANT AGREEMENT

Between

Incyte Biosciences Denmark ApS, Suomisvej 4 1927 Frederiksberg C, Denmark ("**Incyte**")

and

Lyle Patientforeningen for lymfekraft, leukaemi og MDS, Banetoften 26 4600 Naestved, Denmark
("**Recipient**")

BACKGROUND INTRODUCTION

Incyte is committed to positively impacting the lives of patients with cancer and other diseases. Recipient is a Patient Association with the aim of writing a white paper as a deliverable of the Nordic Annual Meeting 2024, with main focus to restore confidence in cancer treatment and ensure continued further development and future-proofing of the cancer area . Recipient requested a financial support from Incyte (as per the original request for support herein attached in Schedule 2) to fund the Project described above and in Schedule 1 ("**Project**"). Incyte as part of its commitment to support medical education and quality patient care is willing to provide such support, subject to the terms of this Agreement.

Article 1 –Support

Incyte will provide Recipient with Thirty Thousand Danish Krone (30,000 DKK) ("**Support**") which shall be used by Recipient for the Project. Recipient is responsible for the proper administration of the Support to ensure it is appropriately accounted for and expended in the execution of the Project.

Article 2 – Payment of Support

2.1 Payment of the Support shall be made by Incyte to the bank account of Recipient identified on the Original Request for Support received from Recipient.

2.2 The Parties expressly acknowledge, for the avoidance of doubt, that the execution of this Agreement and/or the payment of the Support is not intended to and will not in fact influence any prescribing, or procurement decisions favourable to Incyte's commercial interests.

Article 3 – Transparency

3.1 Recipient shall be responsible to disclose that Incyte has provided Support for the purposes of the Project only and no other purpose, including but not limited through displaying Incyte logo (in the color and shape as communicated by Incyte) in any relevant format. Except as provided herein, Recipient undertakes not to use Incyte name nor any trademark or other distinctive signs belonging to the Incyte group of companies ("**Incyte Group**") in any statements or public announcements without Incyte's prior

written consent. The Incyte Group shall have the right to use the name of Recipient for the sole purpose of complying with transparency reporting requirements to which it may be subject.

3.2 Incyte may publicly report or disclose the details of funding provided to Recipient under this Agreement. To enable Incyte to fulfil such reporting/disclosure activities, Recipient shall provide Incyte with information and data upon reasonable request of Incyte and Recipient consents to such public reporting/disclosure.

Article 4 – Compliance

4.1 The Project will not involve research in humans and or animals.

4.2 No identifiable personal data will be shared with Incyte and any personal data processing by Recipient shall be conducted in accordance with applicable laws and regulations for which Recipient shall be the “Data Controller” for the purpose of data privacy law.

4.3 No part of the Support may be paid, granted or distributed to any other organization or individual, other than to pay reasonable compensation for legitimate items and services provided to Recipient in connection with the Project. Specifically, compensation to individuals for services (e.g. speaker/presenter fees) shall be within fair market value range and in no event shall exceed 200 Euro (or equivalent) per hour, excluding VAT. In countries where employer approvals or regulatory approvals are required Recipient shall ensure and verify that such are obtained in a timely manner before permitting performance of services or making any compensation payment. Recipient shall not transfer any portion of the Support to any third party, which is not involved in the running of the Project.

4.4 The Parties agree that the Support provided herein is not intended to be an offer or payment made in exchange for or to induce any agreement to purchase, prescribe, use, advocate or recommend any Incyte product or to influence decisions favourable to any Incyte’s commercial interests.

4.5 No portion of the Support shall be provided to a healthcare professional or to any government employee or official, except in compliance with the preceding section.

4.6 Incyte shall have no control or influence over the Project. Incyte shall have no liability with respect to any third-party claims arising from the Project.

4.7 The relationship under this Agreement is non-exclusive. The Recipient is free to seek funding from other companies at its discretion, provided, however, if any additional funding reaches a level such that all or part of the Support is no longer required by the Recipient, the Recipient shall immediately notify Incyte and shall refund such pro-rated amount of the Support that is no longer required.

4.8 Any discussion of medicinal therapies by the Recipient shall be non-promotional, balanced, accurate and complete and shall comply with applicable laws and regulations.

4.9 Recipient shall refund to Incyte any unused Support at the conclusion of the Project. Accordingly, within 30 working days of the completion of the Project, the Recipient shall complete and sign the Grant Use Certification form, which is attached herein as Schedule 3, and shall send the completed form to

Incyte, in order to provide information on the usage of the Support received from Incyte. Recipient shall also provide Incyte with any additional information reasonably requested regarding the completion of the Project and use of Support, subject to confidentiality and privacy laws. Failure to provide the completed Grant Use Certification form and/or to refund unused Support (if applicable) shall exclude Recipient as an eligible grant funding recipient in the future.

4.10 Recipient confirms that the Support will not be used (and the budget provided for the Project does not include) any ordinary routine operating costs of the Recipient and/or any item for which the Recipient receives or is entitled to receive reimbursement or financial contribution from any third party, including but not limited to any governmental body, agency or authority.

Article 5 – Publication

5.1 The Recipient will submit to Incyte written materials intended for publication at least thirty (30) days prior to disclosure or submission for publication if they include mention of Incyte or its products. Incyte may request corrections to ensure accuracy or protection of Incyte confidential information.

5.2 The Recipient agrees to include the following acknowledgement language, or a variant thereof, when publicising the Project results: “This project was supported by an educational grant from Incyte Biosciences Denmark ApS.”

Article 6 - Duration

6.1 This Agreement shall continue in full force and effect from the date of signature until the earlier to occur of either (a) the date when both Parties completed their obligations from this Agreement, or (b) when either Party terminates this Agreement.

6.2 Either Party may terminate this Agreement if: (a) the Project is terminated early, or (b) if the Support is no longer required/needed by Recipient.

Article 7 – Miscellaneous

7.1 Both Parties shall comply with applicable laws, regulations and guidelines in the performance of the Agreement. The Recipient agrees that Incyte may publish payments made to Recipient under this Agreement, including the Recipient’s name and the amount of the Support and such other information as may be required by applicable laws, regulations or industry codes or practice. This Agreement constitutes the entire Agreement between the Parties relating to the subject matter of this Agreement. Changes and amendments to this Agreement are valid only if they are made in writing and signed by a duly authorised representative on behalf of each Party. This Agreement may be executed in counterparts all of which taken together shall constitute one agreement and copies may be exchanged electronically, such as by e-mail (e.g. PDF) and such electronic copy of the signed document will be considered valid and binding on the signing Party.

Incyte Biosciences Denmark ApS

DocuSigned by:



92852CD85D47446...

Name (CAPS): Erik Fromm

Date: 16-Jan-2024 | 11:06 EST

By signing below, you, as authorized representative of the below mentioned entity, confirm that this entity is lawfully entitled and authorized to receive third party financial support, including the Support described in this Agreement.

Lyle Patientforeningen for lymfekraft, leukaemi og MDS

DocuSigned by:



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Name (CAPS): Rita O. Christensen

Date: 19-jan-2024 | 06:54 EST

Schedule 1 – Project details

Nordic survey on patient involvement and access to new treatments

A common Nordic patient survey about:

- To what degree patients are involved in their own treatment decisions
- How much they know about new treatments
- If they ask for more involvement and other treatments
- How their potential demands are met by HCPs
- To what degree the patients wish for other newer treatments
- To what degree they are content with their current treatment
- Etc.

This could be used for PR, newsletters and websites.

Deliveries needed:

- Development of questionnaire – relevant for all four Nordic countries, about 20-25 questions incl. screening questions
- Translations (an English master will be made – and each patient association will do the translation)
- Programming of the survey
- Email and social media post for recruiting respondents (patients via the four associations) (each association will do the translation)
- Data crunch and analysis
- Development of survey report with results (in English)
- Kompas is NOT responsible for recruitment of participants to the survey
- Development of simple idea catalogue with potential activities relevant for the associations based on the survey results (in English)
- Project management, ongoing dialogue, meetings and coordination with 4 contact persons from the 4 associations

Estimated budget for whole survey*

480.000 DKK incl. Danish VAT

**Budget is estimated based on Kompas' prices, if we are to do the survey.*

***Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Questionnaire and programming, 2-3 weeks

Recruitment and data collection, 3-4

weeks Data crunch and analysis, 2

weeks Report and idea catalogue, 2

weeks

One pager for politicians – with conclusions from Nordic survey

A simple one pager with ikons/graphic illustrations on the results from the Nordic survey – targeted politicians in each country. Each country will get their own one pager – showing politically relevant survey data from that specific country, potentially combined with health-economic, country specific data.

Could for example show:

- How and to what degree is blood cancer patients in Finland offered the newest treatments?
- How does this compare to the other Nordic countries?
- What is the health-economic pro's & con's by not offering – or offering – patients the newest treatments?
- Etc.

This could be handed out to politicians and potentially health-politically engaged healthcare professionals, medical councils etc.

Deliveries needed:

- Research within the health-economic data
- Copy writing in English
- Translation (with help from the patient association)
- Graphical layout and design of icons/illustrations
- Proof readings x 2
- Project management and ongoing dialogue

Estimated budget pr. one pager*

65.000 DKK incl. Danish VAT

**Budget is estimated based on Kompas' prices, if we are to do one or more one pagers.*

***Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Research, copy and graphical layout, 2 weeks

Adjustments and proof readings, 1 week

Will be delivered as print-ready file for local printing.

Illustration of typical treatment 'rutes' for most common blood cancer diseases

A graphical illustration (e.g. in the format of a patient leaflet) of the typical 'treatment stairs' for each of the most common blood cancer diseases. Showing 1., 2. and 3. Line treatments – based on local guidelines. Verified by local hematologist. Potentially also containing some medical perspectives from the hematologist about when a HCP should consider differing from the medical guidelines and why.

This could be handed out to patients and relatives, downloaded from websites and also work as good content for newsletters etc.

Deliveries needed:

- Research within the treatment guidelines
- Dialogue with hematologist
- Copy writing in English
- Translation (with help from the patient association)
- Graphical layout and design of icons/illustrations
- Proof readings x 2
- Project management and ongoing dialogue

Estimated budget pr. illustration*

65.000 DKK incl. Danish VAT

**Budget is estimated based on Kompas' prices, if we are to do one or more illustrations.*

***Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Research, dialogue with HCP, copy and graphical layout, 2-3 weeks

Adjustments and proof readings, 1 week

Will be delivered as print-ready file for local printing.

Expert panel on CAR-T treatment

Setting up a Nordic Expert Panel – discussion e.g. CAR-T treatment pros/cons. The panel discussion should be streamed and could be accessed via the patient associations websites.

This could also work as good content for newsletters etc.

Deliveries needed:

- Input from patient associations on relevant experts to include
- Dialogue with experts, incl. development and signing of contracts, practical arrangements etc.
- Development of question-guide for the panel discussion
- Practical arrangements of the discussion (venue, technical assistance etc.)
- Attending the panel (potentially moderating?)
- Post-production of streaming (editing, texting in local languages (patient associations will help with translations) etc.
- Project management and ongoing dialogue

Estimated budget*

280.000 DKK incl. Danish VAT

**Budget is estimated based on Kompas' prices, if we are to arrange the panel debate. External costs are included in the budget. **Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Practical arrangements and recruiting of experts, 2 months

Production and post-production, 1 month

Will be delivered as mov.files for local distribution.

One pager/flyer on mutations/subtypes to HCPs and Patients

One pager/flyer with information on mutations and subtypes – on one side for patients, and on the other side for HCPs. For example:

Page 1 – for patients

- What is a mutation? What is a subtype?
- Why is it important to know your subtype and your (changing) mutational status?
- How does it affect your health and treatment?
- How to test for mutations – and when?

Page 2 – for HCPs

- How and why should a patient's mutational status affect the treatment choice?
- Why is it important for the patient to know subtype and mutational status?
- What's in it for the hematologist to know and inform the patient?
- What's in it for the clinic/department/hospital – economically?

This should be handed out to patients and relatives – and also be a part of the dialogue with hematologist that your patient association has. Could also be downloaded at your websites.

Deliveries needed:

- Copy writing in English
- Translation (with help from the patient association)
- Graphical layout and design
- Proof readings x 2
- Project management and ongoing dialogue

Estimated budget pr. one pager/flyer*

65.000 DKK incl. Danish VAT

**Budget is estimated based on Kompas' prices, if we are to do one or more one pagers/flyers.*

***Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Research, copy and graphical layout, 2 weeks

Adjustments and proof readings, 1 week

Will be delivered as print-ready file for local printing.

HCP-guide: How to love patient-dialogue

A (humoristic) HCP-guide about “How to love your patient-dialogue” – positioning patient associations as a help for the HCP as well as the patient; mediating between the two parts for better communication, happier HCP, happier patient and better treatment.

Could for example contain information on:

- How to explain this and that to the patient (communication practice)
- How to guide the patient in where to seek information (and where NOT to)
- How to find out if your patient is in need of a lot of information, or as little as possible

- How to align expectations with your patient's (and their relatives)
- What to expect from your patients – and how to let them know • How to guide your patient to prepare for the consultations with you
- Etc.

This could be handed out to HCPs – and also be made a little ‘campaign’ with e.g. a theme on your websites.

Deliveries needed:

- Input from all 4 associations, and also a hematologist and a hematologist nurse
- Copy writing in English
- Translation (with help from the patient association)
- Graphical layout and design
- Proof readings x 2
- Project management and ongoing dialogue

Estimated budget pr. guide*

70.000 DKK incl. Danish VAT

**Budget is estimated based on Kompas’ prices, if we are to do one or more guides.*

***Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Research, copy and graphical layout, 3-4 weeks

Adjustments and proof readings, 1 week

Will be delivered as print-ready file for local printing.

Webpage with info and links to trial databases

Simple page on each patient associations website with links to relevant trial databases (in all countries), if possible both clinical trials and academic trials. Short text to guide the patients in how to search for (together with hematologist) and attend a trial. Also, information on pro’s and con’s on why to attend trials – with links to e.g. trial information brochures.

Deliveries needed:

- Input from all 4 associations: links to local databases and how to access them

- Copy writing in English.
- Translation (with help from the patient association)
- Proof readings x 2
- Project management and ongoing dialogue

Estimated budget pr. webtext*

35.000 DKK incl. Danish VAT**

**Budget is estimated based on Kompas' prices, if we are to do one or more webtexts.*

***Price is incl. Danish VAT, because patient associations in Denmark are excepted from the VAT-payment – but if seeking money from a medical company to pay an agency for e.g. communication activities, the agency is obligated to pay Danish VAT and therefore needs to invoice the patient association (indirectly the medical company) incl. VAT.*

Timing

Copy, 1-2 weeks
Adjustments and proof readings, 1 week

Will be delivered as word-file for the associations to publish online as they wish.

Other relevant information:

The Relatives Association in Denmark:

<https://paaroer.dk/>

The Danish National Center for Ethics: Patient brochure on things to consider before signing up for a clinical trial (“Før du beslutter dig” / “Before you decide”):

https://nationaltcenterforetik.dk/Media/637997088999665897/Fr_du_beslutter_digpdf.pdf

Schedule 2 – Original Request for Support



Application for aid for the production of a White Paper on haematological diseases in connection with Cancer Plan V

Treatment of blood cancers is losing ground in Denmark

At Lyle, we have taken note of the government's initiatives to bring about improvements in the field of cancer, and we have a strong desire – through the preparation of a white paper on haematology– to contribute to and make our specific mark in Cancer Plan V, which is expected to be launched in autumn 2024.

Cancer Plan V has as its main focus to restore confidence in cancer treatment and ensure continued further development and future-proofing of the cancer area. Core themes here are the prevention of cancer, ensuring that more people survive cancer through the use of new, effective and targeted drugs, and that as many people as possible have a good life as healthy or chronic cancer patients.

We therefore recommend that Cancer Plan V focuses on the entire course of the patient and wishes to focus on three core areas of haematology that are not sufficiently implemented according to the Cancer Plan IV:

That is:

1. Early diagnosis
2. Updated treatment More
3. Focus on late complications

1. Diagnosis: Early diagnosis is an important theme for hematology patients. As with other cancers, early diagnosis is important for the patient's course of disease and treatment and for the possibility of surviving the disease with a good quality of life. In the process towards an accurate diagnosis, blood cancer patients are often challenged by the fact that the symptoms of, for example, acute leukaemia or lymphoma are diffuse and can be confused with symptoms of more common infectious diseases.

However, blood cancer covers a wide range of relatively rare diseases that a general practitioner will encounter very rarely. Therefore, the road from early symptoms to an accurate diagnosis and adequate treatment can be very long, with the risk of disease worsening, life-threatening complications and unnecessary premature death. For this reason, there is a need to develop tools for a general knowledge boost in the treatment system and among a number of special target groups.

2. Treatment: The treatment of haematological diseases has seen significant progress in recent decades. The likelihood of surviving blood cancer has been noticeably improved, not least because the treatment has become more targeted and personalized. In a number of the most common diseases, chemotherapy is in retreat. With advanced new drugs, it has become possible not only to improve survival, but also to limit the damage of often very side effect-heavy older treatments. Unfortunately, in Denmark, we experience that the established approval and commissioning system for new medicines

is sluggish, and it is increasingly seen that treatments established in the countries around us are not available in this country. In Lyle,

we have examples of patients who have visited e.g. CAR-T cell treatment in Germany at their own expense because it is not possible to get this treatment at home.

In other words, Denmark is losing ground when it comes to cancer survival, but also as qualified partners in research and experiments. In addition, inequality in treatment is a growing problem. Resourceful and insightful patients generally have much better conditions for receiving the optimal treatment and thus getting through their treatment and disease course better.

3. Late sequelae: In Denmark, almost 400,000 people have or have had cancer, and of those, more than half experience late complications. There is a direct correlation between the extent and severity of late effects of cancer treatment and access to new and more effective medicines. There is a strong socio-economic argument for the fact that what can be saved by not using new, expensive drugs is lost when the bill for treatment of late complications has to be paid.

When it comes to haematological diseases, the late effects are largely due to high-dose chemotherapies, and the big challenge for patients is that they do not know what they can do themselves to alleviate the often very unpleasant discomfort or where they can get help.

Late complications are considered independent diseases by the Danish healthcare system and are not seen in the context in which they have arisen. Therefore, the treatment of late sequelae is scattered fencing. In haematology, we have skilled doctors, but they do not know enough about what to do with late complications. If we are to really do something about it, we need to think more holistically, and our healthcare system cannot handle that at this time.

Therefore, it is necessary that Cancer Plan V has a specific focus on late complications.

Budget overload:

Preliminary work and research

30.000,- DKK

Text production

75.000,- DKK

Graphic design	40.000,- DKK	
Production control and pressure (2-300 pcs)		30.000,- DKK
Dissemination and media-oriented communication efforts		35.000,- DKK
PA Effort*: (estimated)		<u>50.000,- DKK</u>

Total: **260.000,- DKK excl. VAT**

***PA In brief, the effort includes:**

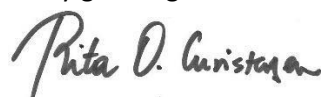
Research on the case and mapping of relevant 'targets' Setting up personal meetings between relevant politicians and LyLe. Follow-up Ongoing meetings between LyLe, Eyelevel and Reimars Bureau Overview of results, reception and experiences for the further course.

Facts:

Every year, 2,600 Danes get either lymphoma, leukaemia or MDS, and the number is rising. Today, more than 20,000 Danes live with haematological cancer, also called blood cancer. Many suffer from life-destroying late effects of treatments that belong to the past.

LyLe is an independent, patient-oriented patient association for people with lymphoma, leukaemia and myelodysplastic syndrome (MDS). The association was founded in 2007 and is nationwide with an active consulting company, a large number of local network groups and a wide-ranging communication company on both digital and physical platforms. The association has approximately 1,100 members, but a significantly larger number seek knowledge on LyLe's rich and freely accessible website and read the association's newsletters and magazine publications. LyLe works hard to be up-to-date on haematological diseases and their treatment, just as we through our international patient collaboration closely follow developments in our neighboring countries and all of Europe.

Many greetings from



Rita O. Christensen

Schedule 3

EDUCATIONAL GRANT – USE CERTIFICATION

Project Name/description:	Support for the writing of a white paper as a deliverable of the Nordic Annual Meeting 2024
Grant Provider:	Incyte Biosciences Denmark ApS
Grant Recipient:	Lyle Patientforeningen for lymfekraft, leukaemi og MDS
Total Grant Funding Amount:	Thirty Thousand Danish Krone (30,000 DKK)

Addressee: Incyte Biosciences Denmark ApS

By signing below, I confirm the following with regard to the above grant funding support received from Incyte Biosciences Denmark ApS under the signed Grant Agreement between Incyte Biosciences Denmark ApS and the Grant Recipient identified above (the “Grant Agreement”):

1. The grant funded activity has been fully completed in accordance with the project description provided at the time of grant funding request and signature of the Educational Grant Agreement.

2. Please tick the applicable option:

☐ All of the above grant financial support provided by Incyte has been fully utilized for the purpose of the grant funded activity and there is no unused balance due to Incyte Biosciences Denmark ApS as a refund per the terms of the Educational Grant Agreement; or

☐ Part of the grant financial support provided by Incyte has been utilized for the purpose of the grant funded activity and there is an unused balance due to Incyte Biosciences Denmark ApS as a refund per the terms of the Educational Grant Agreement in the amount of: Euro/CHF/USD/ (other currency:)

I am authorized to sign on behalf of the Grant Recipient identified above.

Signature

Name in CAPS

Title in CAPs

Date