

Forward-Looking Statements

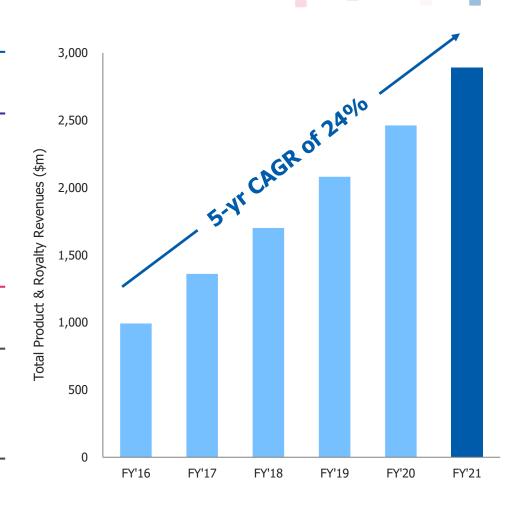
Except for the historical information set forth herein, the matters set forth in this presentation contain predictions, estimates, and other forward-looking statements, including statements regarding: the opportunities for growth and diversification presented by Incyte's portfolio; expectations with respect to demand for and uptake of Opzelura; the opportunity presented by ruxolitinib cream to treat patients with vitiligo and the timing of regulatory review for submissions regarding the same; and our expanding dermatology pipeline and our pipeline and clinical programs overall.

These forward-looking statements are based on our current expectations and are subject to risks and uncertainties that may cause actual results to differ materially, including unanticipated developments in and risks related to: the actual time required by the regulatory authorities to review submissions for regulatory approval and the results of such reviews; unanticipated delays, including unanticipated delays in the Company's submissions seeking regulatory approval; the effects of the COVID-19 pandemic and measures to address the pandemic on the Company's clinical trials, supply chain, and other third-party providers, sales and marketing efforts, business development and discovery operations, as well as on regulatory agencies such as the FDA or EMA; further research and development and the results of clinical trials possibly being unsuccessful or insufficient to meet applicable regulatory standards or warrant continued development; the ability to enroll sufficient numbers of subjects in clinical trials and the ability to enroll subjects in accordance with planned schedules; determinations made by the FDA, EMA and other regulatory agencies; our dependence on relationships with and changes in the plans and expenditures of our collaboration partners; the efficacy or safety of our products and the products of our collaboration partners; the acceptance of our products and the products of our collaboration partners in the marketplace; market competition; unexpected variations in the demand for our products and the products of our collaboration partners; the effects of announced or unexpected price regulation or limitations on reimbursement or coverage for our products and the products of our collaboration partners; sales, marketing, manufacturing, and distribution requirements, including our and our collaboration partners' ability to successfully commercialize and build commercial infrastructure for newly approved products and any additional new products that become approved; greater than expected expenses, including expenses relating to litigation or strategic activities; and other risks detailed from time to time in the Company's reports filed with the Securities and Exchange Commission, including our annual report on Form 10-K for the year ended December 31, 2021. We disclaim any intent or obligation to update these forward-looking statements.



Continued Revenue Growth and Diversification

		FY 2021 Revenues	FY21/FY20 Growth (%)	4Q21 Revenues	4Q21/4Q20 Growth (%)
MPNs & GVHD (FY'21 +10% y/y)	Jakafi® ruxolitinib (tablets)	\$2,135m	+10%	\$592m	+15%
Other Heme/Onc (FY'21 +40% y/y)	ICLUSIG" (ponatinib) tablets	\$109m	+4%	\$27m	-5%
	Pemazyre (pemigatinib) tablets	\$69m	+165%	\$20m	+40%
	MONJUVI 1 tafasitamab-cxix 200mg to rigidate to interveneus use	\$79m	+242%	\$24m	+31%
	MINJUVI® tafasitamab	\$5m	_	\$4m	_
Dermatology	© Opzelura ™ (ruxolitinib) cream 1.5	_* \$5m	_	\$5m	_
Royalties	S JAKAVI* ruxolitinib	\$338m	+22%	\$96m	+10%
(FY'21 +45% y/y)	olumiant. (baricitinib) tablets	\$221m	+99%	\$66m	+113%
	TABRECTA: (capmatinib) tablets 100 -	\$10m	+151%	\$3m	+56%
Product & royalt	y revenues ²	\$2,891m	+17%	\$813m	+20%





Jakavi (ruxolitinib) licensed to Novartis ex-US, Tabrecta (capmatinib) licensed to Novartis (Jakavi and Tabrecta) and Lilly (Olumiant). Iclusig (ponatinib) is a registered trademark of ARIAD. Monjuvi (tafasitamab-cxix) is a registered trademark of MorphoSys.

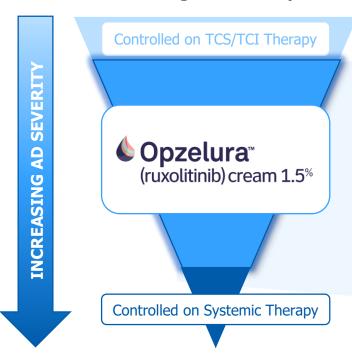
^{1.} Monjuvi revenues recognized by MorphoSys and included in our collaboration loss sharing line item on our condensed consolidated statement of operations in our fourth quarter and full year 2021 financial results press release issued on February 8, 2022.

^{2.} Totals may not add due to rounding.

Addressing the Unmet Need in Atopic Dermatitis

First and only topical JAK inhibitor approved for AD

5.5+ million drug-treated AD patients in the US



Patients with AD seeking alternatives¹

~22% of patients report their AD is well controlled with current treatment

>40% of AD patients experience flares at least 1x or more per week

~50% of patients experienced cracks in their skin due to AD in the last month



5.5 million patients in the US 12 years of age and older with mild to severe AD are drug-treated. Figure for illustrative purposes only.

1. Based on survey with AD patients (n~650)

Strong Launch of Opzelura in Atopic Dermatitis



- >19,000 NBRx in Q4 2021
- >10% NBRx market share²
- >30,000 units shipped since launch



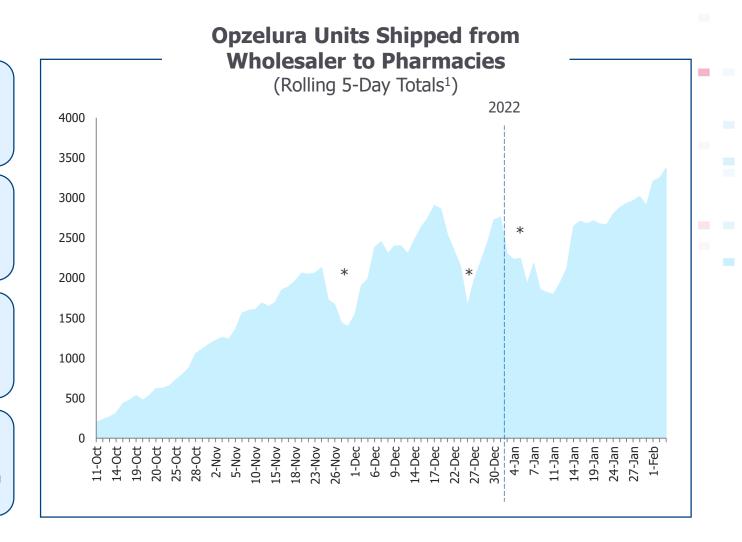
- Refills increasing week-over-week
- Refills were >15% of TRx in last week of January



- >4,700 prescribers since launch
- Rapid itch relief, skin clearance in a safe topical formulation cited as top reasons for prescribing



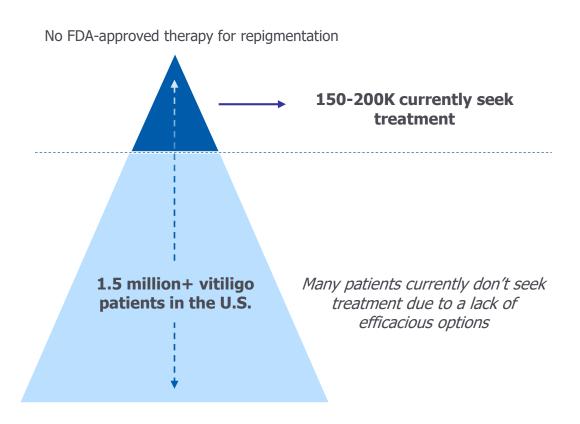
- Base rebate agreements signed with 2 of 3 largest GPO/PBMs
- Fully Loaded Gross-to-net discount to reach steady state (40-50%) in H2'22

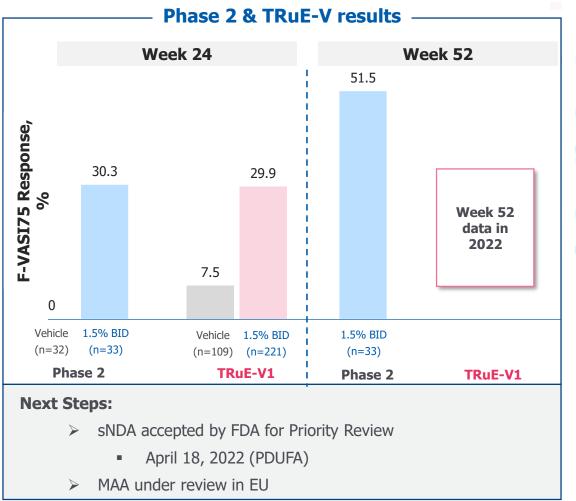




^{2.} IQVIA data week ending 1/28/2022

Significant Unmet Need in Vitiligo







Advancing Multiple Programs in Dermatology

	Ruxolitinib Cream				INCB54707		
Indication	Atopic Dermatitis	Chronic Hand Eczema	Vitil	ligo	Hidradenitis Suppurativa	Prurigo Nodularis	
Patients	Pediatric	Moderate /Severe	BSA≤10%	BSA≥8%	Draining fistula count <u><</u> 20	≥ 20 nodules	
Clinical Trials	■ TRuE-AD3 ■ Max Use (>2 to <12)	TRuE-CHE1 TRuE-CHE2	TRuE-V1 TRuE-V2	Phase 2	Phase 2	Phase 2	
Data in 2022			PDUFA Apr 18	H2′22	H2′22		
Epidemiology in the U.S.	2-3 Million pediatric patients ¹	4% of population ²	>1.5 M	illion ³	0.1% ⁴ of population	>200,0005	

^{1.} DRG; Silverberg JI. Dermatol Clin. 2017;35(3):283-289

Incyte

^{2.} Quaade AS, Simonsen AB, Halling AS, Thyssen JP, Johansen JD. Prevalence, incidence, and severity of hand eczema in the general population - A systematic review and meta-analysis. Contact Dermatitis. 2021 Jun;84(6):361-374. doi: 10.1111/cod.13804. Epub 2021 Feb 23. PMID: 33548072.

^{3.} Bergqvist C, Ezzedine K. Vitiligo: A Review. Dermatology 2020;236:571-592. doi: 10.1159/000506103

^{4.} Garg A, Kirby JS, Lavian J, Lin G, Strunk A. Sex- and Age-Adjusted Population Analysis of Prevalence Estimates for Hidradenitis Suppurativa in the United States. JAMA Dermatol. 2017 Aug 1;153(8):760-764. doi: 10.1001/jamadermatol.2017.0201. PMID: 28492923; PMCID: PMC5710402.

^{5.} https://www.uptodate.com/contents/prurigo-nodularis

MPNs/GVHD: Opportunities for Continued Growth

	Asset	Status	Upcoming Data
MF, PV GVHD	QD ruxolitinib	Stability testing	NDA submission early 2022
	+ parsaclisib	Phase 3 (inadequate responders & 1L)	Top-line results in 2023
MF	+ BET	PoC	Initial results in 2022
МЕ	+ ALK2	PoC	Initial results in 2022
	CK0804 ¹ (Cellenkos)	PoC	
	Novel targets	Preclinical	
PV	Novel targets	Preclinical	
CVUD	itacitinib	Dose-ranging (SN chronic GVHD)	Results from Part 1 (dose-finding) in 2022
GVHD	axatilimab ²	Phase 2 (3L chronic GVHD)	Top-line results in 2023



SN = steroid naïve; PoC = proof-of-concept

^{1.} Development of CK0804 plus ruxolitinib in collaboration with Cellenkos.

^{2.} Development of axatilimab in collaboration with Syndax Pharmaceuticals.

Other Development Highlights

Tafasitamab		
Indication	Status	Upcoming Data
1L DLBCL	Phase 3 (frontMIND)	Top-line results in 2025
Other r/r NHL	PoC (topMIND) Phase 3 (inMIND)	Top-line results in 2023 Top-line results in 2023

Parsaclisib		
Indication	Status	Upcoming Data
Warm Autoimmune Hemolytic Anemia	Phase 3 initiated	

Early Hematology/Oncology			
Asset	Status	Upcoming Data	
Oral PD-L1			
INCB86550	Phase 2 (enrolling); dose schedule optimization	Selection of lead program(s) in 2022	
INCB99280	Dose escalation	 Indications for development based on 	
INCB99318	Dose escalation	clinical profile	
Adenosine			
INCB106385 (A ₂ A/A ₂ B)	Phase 1: mono or combo with PD-1	2022	
INCA00186 (CD73)	Phase 1: mono or combo with PD-1 and/or A ₂ A/A ₂ B	2022	
LAG-3 + TIM-3 with and without PD-1			
INCAGN2385	Phase 1/2		

