

2021

Environmental,
Social, and
Governance
Report



One Mission,
Inspired by Patients:
Defeat Cancer.™

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WHO WE ARE

Deciphera Pharmaceuticals, Inc. (NASDAQ: DCPH) is a biopharmaceutical company focused on discovering, developing, and commercializing important new medicines to improve the lives of people with cancer. We are leveraging our proprietary switch-control kinase inhibitor platform and deep expertise in kinase biology to develop a broad portfolio of innovative medicines.

At Deciphera, our commitment to patients is at the center of everything we do. Our employees come to work every day with a relentless drive to fight cancer and give patients hope. We have all seen the destruction cancer can cause, and that unites us in our fight.

We are impacting the lives of people living with cancer by addressing key mechanisms of tumor and drug resistance that limit the results of some existing therapies. We are developing kinase inhibitors using our novel approach and building a diverse pipeline of wholly-owned drug candidates to improve patients' quality of life. We have one approved medicine, QINLOCK® (ripretinib), and we are developing two clinical-stage drug candidates, vimseltinib and DCC-3116. In addition, our drug discovery teams are working on new targets to develop the next generation of cancer medicines.

A science driven company that has rapidly grown from discovery to commercialization

1

marketed product
in the U.S.

2

clinical development
programs

280+

employees committed
to defeating cancer

Source: Data as of March 31, 2022.

OUR VALUES

Deciphera is built on a foundational set of values known as PATHS: **P**atients, **A**ccountability, **T**ransparency, **H**onesty and Integrity, and **S**tewardship. We believe *how* our employees achieve results is just as important as *what* they achieve, which is why the values of PATHS guide everything we do.

ABOUT THIS ENVIRONMENTAL, SOCIAL, AND GOVERNANCE (ESG) REPORT

This annual ESG report marks a continued effort to share some highlights of our current practices and initiatives in several important areas under one umbrella. There are five main sections in this report: Patients, Our Team, Environmental Management, Governance and Leadership, and Frameworks and Standards. As you will see, in some areas our efforts are long-standing and robust, while in others we are just beginning our journey. We are committed to advancing our capabilities and expect to provide updates on our progress over time.

In preparing this report, we utilized the Biotechnology and Pharmaceutical industry standards published by the Sustainability Accounting Standards Board (SASB) to organize our efforts around the areas that we believe are most relevant to our business and our stakeholders. The specific accounting standards are included in the Frameworks and Standards section at the end of this report. Unless otherwise noted, data provided within this report is as of our 2021 fiscal year, which ended December 31, 2021.



PATIENTS

ACCESS AND AFFORDABILITY

We believe a patient's financial situation should not be an access barrier to receiving important treatments. We do not want concerns about cost and insurance coverage to come between a patient and their treatment.

Our United States Food and Drug Administration (FDA)-approved medicine, QINLOCK, treats a serious illness with health outcomes that rapidly deteriorate without access to therapy. We aim to maximize access to our medicines and minimize the time it takes for patients to get on a therapy plan.

Patients are at the center of everything we do. Because our priority is to make sure patients have access to therapy, we have invested heavily in our comprehensive patient support program, Deciphera [AccessPoint](#), to help provide access and affordability solutions for individuals receiving our marketed medicine (for U.S. only). Our AccessPoint program streamlines patient or provider requests for assistance and helps direct eligible patients to appropriate resources, including copay assistance for eligible patients with commercial insurance. If a patient is delayed or denied access by their insurance or cannot afford their out-of-pocket expenses and meets other requirements, they may qualify for free medication under one of our programs.



QUALITY MANAGEMENT, DRUG SAFETY, AND COUNTERFEIT DRUGS

Safety

Our Safety Committee is a cross-functional committee chaired by the Head of Pharmacovigilance and includes representation from the Chief Medical Officer and the heads of many departments, including the Clinical Development, Regulatory Affairs, and Legal departments. The Safety Committee is responsible for decisions relating to a particular medicine's benefits and risks, changes to study conduct, determining if and when changes to the medicine's label for safety reasons may be warranted, and other risk management efforts.

Our routine safety signal detection and management process aims to ensure the timely review and analysis of data and to prioritize confirmed safety signals for submission to the Safety Committee, based on the impact to public health and/or a change in the medicine's benefit-risk profile.

With our contract manufacturers, we may also conduct stability studies to ensure that a drug substance or drug product remains within specification throughout the duration of its retest or expiry period.

We have a regulatory responsibility to report all adverse events and product complaints to the FDA, European Medicines Agency (EMA), and other regulatory authorities. Our pharmacovigilance function is responsible for compliance with requirements related to safety information reporting, and for conducting training on safety reporting for employees and relevant consultants, contractors, and interns.

Product Complaints

Our product complaints process details the steps performed for receipt, handling, and administration of product complaints of our marketed product, including compliance with applicable legal and regulatory requirements. This process involves members of our Quality Assurance, Pharmacovigilance, Regulatory Affairs, Medical Affairs, and Technical Operations departments. Product complaints are expected to be reported to the Medical Information department upon receipt and closed within the allotted time defined by the relevant procedure.

After an initial assessment, Quality Assurance is responsible for determining if an investigation into the complaint is needed, which could include a visual assessment of the complaint sample, review of batch records for product manufacture, and/or analysis of retained samples. Our process includes a review of product complaint reports at least every six months for evidence of any potential trends. Product complaints, metrics, and trends are communicated to the Quality Board on at least a quarterly basis.

The Quality Board is comprised of department directors and executive-level individuals representing key departments who discuss the resolution of any significant identified quality related issues with our medicine, vendors, clinical trials, inspection/audit findings, and other relevant topics.

Counterfeit Drugs

We have implemented procedures to mitigate the risk of drug diversion by identifying, recording, and reporting prescription drug losses or thefts. Our serialization procedures are designed to comply with the FDA Drug Supply Chain Security Act Regulations specified in the Drug Quality and Security Act and other laws and regulations, as applicable, and we use an electronic system to identify and trace our drug and drug candidates as they are manufactured and distributed throughout the supply chain. This system aims to protect consumers from exposure to drugs that may be counterfeit, stolen, or contaminated.

Our Supply Chain team is responsible for ensuring that proper controls are added for shipping product from manufacturer to packager, and from packager to distribution center or partner. Our procedures require that material be tracked from the outbound shipment from our tableting vendor to the distribution center. Tracking includes serialization (for U.S.-distributed materials), anti-counterfeiting measures, and lot number traceability. Suspect product identified is communicated as per the established complaint notification channels. If identified, our procedures require that the material be placed in quarantine and be thoroughly investigated by our Quality Assurance and Supply Chain teams.

Quality Assurance

Quality Assurance is responsible for continuous monitoring of raw materials, components, and services that are essential to the quality of our finished medicines. Quality Assurance maintains oversight of vendors to help ensure all medicines are manufactured, analyzed, and maintained as required by our global health care regulatory filings and regulations.

Vendor Audits

As part of our vendor assessment process, we conduct quality audits in appropriate cases that are designed to challenge and confirm the vendor's practical ability to supply a product or service with an established quality system and proper in-process controls. Vendors must ensure consistent quality, performance, and traceability.

After the initial quality audit, periodic audits are generally performed to help ensure that no changes have occurred in the vendor's operations that could affect quality. See the Vendor Management section of this report for more on how we oversee our vendors.

CLINICAL STUDY STANDARDS AND SAFETY OF CLINICAL STUDY PARTICIPANTS

We rely on third parties including contract research organizations (CROs), investigators, and clinical study sites to conduct our clinical and preclinical studies. In addition to sponsoring preclinical or clinical research, we also support investigator-sponsored research (ISRs).

We require our CROs and other third parties to follow the International Council on Harmonisation's Good Clinical Practices (GCPs), and all applicable regulations and laws in the countries where the clinical study is being performed, and any study-specific protocols. We have an extensive portfolio of standard operating procedures (SOPs) governing CRO and investigator site qualification and selection, on-site monitoring, independent data monitoring, and CRO management. The governing SOPs for a clinical study may be a combination of CRO SOPs and Deciphera SOPs, which we aim to clearly define at the start of the study.



Monitoring of Clinical Studies

We take an active role in ensuring that our CROs are meeting project specifications. This includes participation in regular meetings and review and execution of study documents and plans. We work to ensure qualified monitors are appointed for each clinical study, and a monitoring plan is developed to help conduct and document clinical study site initiation, monitoring, and close-out activities.

To evaluate our sponsored clinical studies, we conduct on-site monitoring oversight visits to determine whether the monitoring plan is being followed. We also undertake procedures designed to assess whether the study activities are conducted in compliance with GCPs and all applicable regulations, the rights and well-being of the subjects are protected, and the study data is accurate and reliable.

In the case of potential CRO non-compliance, our policy is to notify the Quality Board of situations that we believe place Deciphera, study subjects, or study data at risk, or that violate the contract, applicable SOPs, or regulatory requirements. Clinical Operations and the Quality Board are then tasked to resolve any identified issues and will generally then make a recommendation on continued use of the CRO.

Independent Data Monitoring Committee

Some Deciphera-sponsored clinical studies are determined to require an independent data monitoring committee (DMC). A DMC is an independent group established to assess the progress of a clinical study at specified intervals. It may assess the

safety data and/or the critical efficacy endpoint(s) and makes recommendations on whether to continue, modify, or discontinue the study. Our Clinical Development, Clinical Operations, and Regulatory Affairs departments are responsible for determining prior to the start of a clinical study whether a DMC is required. Recommendations of the DMC are taken into consideration by our Clinical Operations and Clinical Development departments and escalated to the Executive Leadership team as needed.

PATIENT ADVOCACY AND CORPORATE PHILANTHROPY

We are committed to advancing healthcare, improving patient outcomes, and making a positive and lasting contribution to the well-being of the communities in which our employees live and work. In particular, we seek to foster collaborative, transparent, and respectful relationships with patient advocacy organizations, individual patients, and caregivers who wish to participate in our programs, in the relevant diseases we are treating, researching, and/or developing.

We partner with many patient organizations who share our goals and engage with similar patient populations. We aim to build relationships with patient advocacy organizations around the world, and our patient-centric structure starts with engaging patients and patient advocates from the early development of clinical research to commercial activities and beyond. We seek to build trust in our communities by supporting both the education of the patient community and access to our medicines.

We also dedicate significant resources to support oncology-focused organizations through membership or sponsorship.



Charitable Contributions

Our philanthropic support focuses on non-profit organizations whose mission or activities align with our core values and that support awareness or study of diseases in our therapeutic areas of focus, support the patient journey, support the improvement of communities in which Deciphera employees live and work, or otherwise support our corporate strategy and initiatives. Examples may include patient advocacy organizations, healthcare organizations, professional associations, medical or scientific societies, or community and civic organizations.

Under our charitable contributions policy, donation requests are reviewed by the Charitable Giving Review Committee comprised of representatives from our Legal and Compliance, Finance, Corporate Communications, and Patient Advocacy departments.

OUR TEAM

We believe that creating a diverse, equitable, and inclusive culture is critical to continuing to attract and retain the top talent necessary to deliver on our mission and is key to our long-term success. As such, we are investing in the creation of a work environment where our employees can feel inspired to deliver their best work every day. Our guiding PATHS values serve as our cultural pillars. Grounded in these guiding principles, we focus our company-wide efforts on creating a collaborative environment where our colleagues feel respected, valued, and can contribute to their fullest potential.

We recognize the value in maintaining a positive culture, a healthy work-life balance, and a strong commitment to cultivate diversity because we know that the contributions of every member of our team are necessary to achieve our mission.

We are proud to be named one of the Boston Globe's Top Places to Work for 2021, which we believe is a testament to our culture of trust, transparency, and collaboration.

As of December 31, 2021, we had approximately 280 employees located primarily at our headquarters in Waltham, Massachusetts, our research facilities in Lawrence, Kansas, and our offices in Switzerland, Germany, and France, as well as remote employees across the U.S. and Europe.



TRAINING AND DEVELOPMENT

To assess and build out our organizational learning and development strategy, we have created a learning and development maturity map with prioritized areas of focus from 2020 to 2022. In 2021, we have reset performance expectations around “How we work,” including a focus on leading from where you are, driving business results, partnering, collaborating, and continuous improvement.

We provided over 100 Learning and Development programs to employees on leadership, team management, performance management, career development, communication, change management, and project management.

We place a special focus on developing leaders and managers. We recognize that development needs differ between a new manager and a seasoned leader and have tailored our approach accordingly. Our offerings have included hosting bi-monthly sessions for all people managers to connect, share, and learn among a community of peers around topics such as avoiding burnout, facilitating employee development planning, and leading through change.

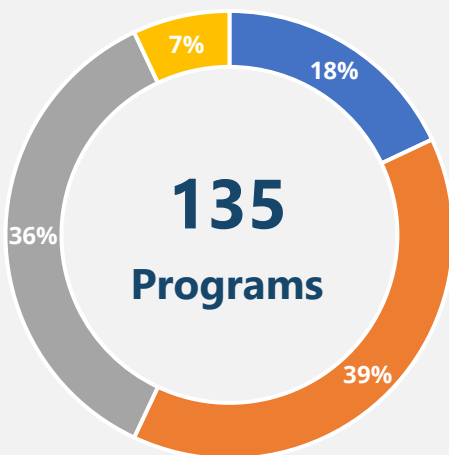
As part of our new-hire onboarding process, we offer a Peer Mentorship program, which pairs new employees with peer mentors to foster a network of connection and support.

As one measure of the effectiveness of our Learning and Development programs and employee engagement, we track program participation. For example, 86% of employees completed the Insights Communication Style program, which raises awareness of individual communication needs and the needs and preferences of colleagues.

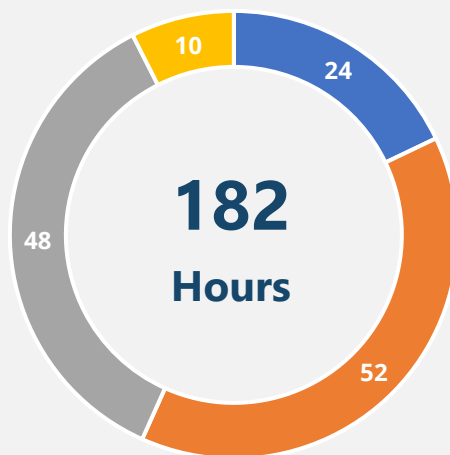
Below is a chart that provides details about the target audience for our Learning and Development programs by level or type of employee.



% of Programs
(by Target Audience)



Hours Offered
(by Target Audience)



■ New Hires ■ All Employees ■ Manager ■ Leader

■ New Hires ■ All Employees ■ Manager ■ Leader

Performance Management and Employee Recognition

We expect each employee to set individual performance goals and participate in quarterly check-in meetings with their manager. We also gather stakeholder feedback to aid in year-end performance and compensation discussions. We provide resources and trainings for managers specifically to address how to lead these performance check-ins.

Our Reward and Recognition program is designed to promote a culture of appreciation and to reinforce Deciphera's commitment to our core values. This peer-nominated program includes tiers of monetary awards classified as a high five, three cheers, or standing ovation to recognize above-and-beyond contributions to our organization. Employees can also write thank you notes to colleagues as a form of recognition.



DIVERSITY, EQUITY, AND INCLUSION (DEI)

We are committed to building a culture that embraces the uniqueness of our people and finds strength in our differences. We recognize our duty to cultivate diversity within the organization and to ensure that every voice is heard. We understand that varied perspectives lead to the best ideas and outcomes. By creating a workplace where every individual can feel welcome and valued, we will better meet the needs of those we serve.

With our Chief Executive Officer (CEO), Steve Hoerter, as the executive sponsor, and with the support of our entire Executive Leadership team, we formed a cross-functional DEI Task Force of 20 employee volunteers. The Task Force conducted a thorough gap analysis that has informed the development of a DEI roadmap toward realizing our vision.

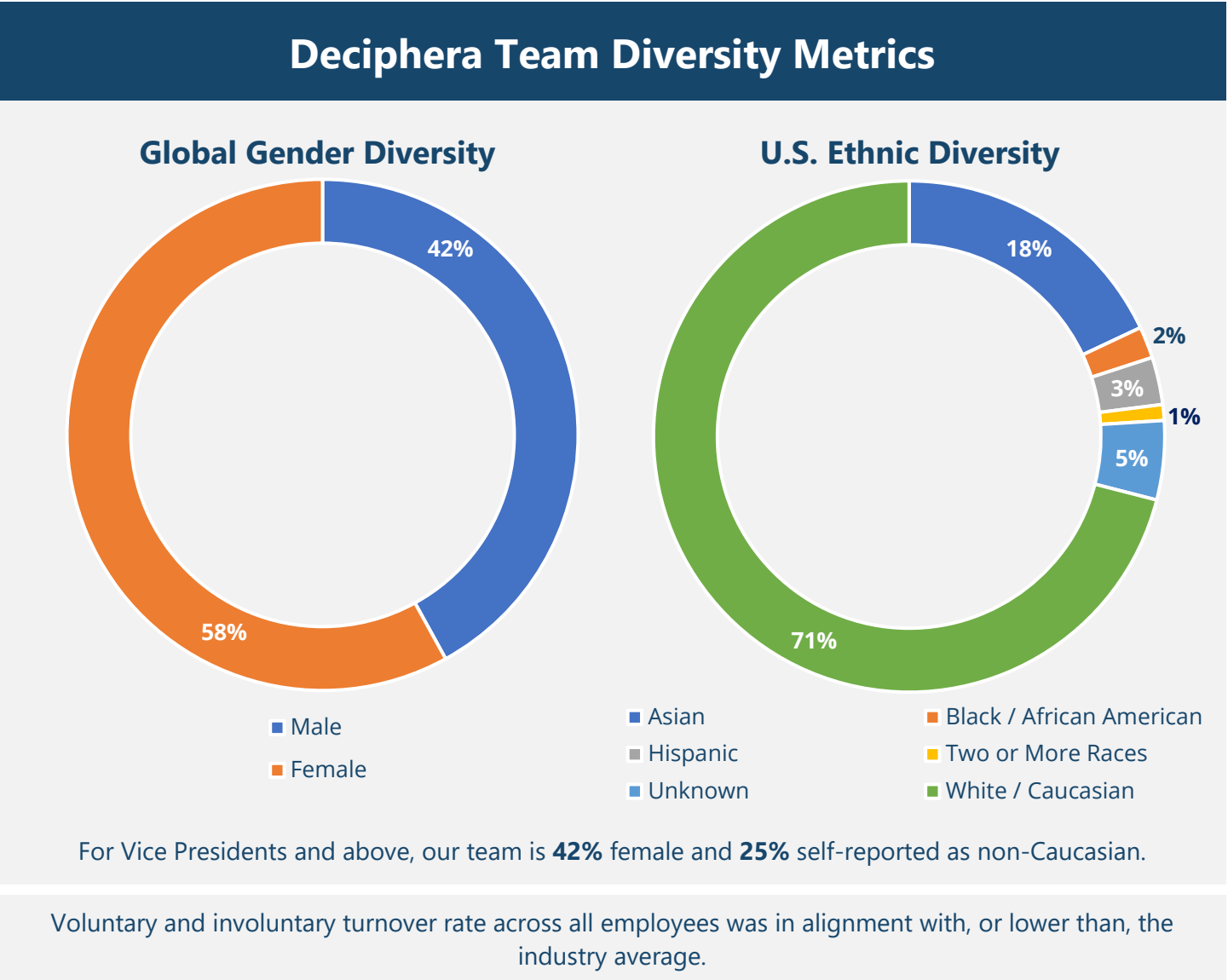
The Task Force also crafted our DEI Mission Statement with input from our entire employee base. A series of virtual focus groups, individual interviews with leadership, and online surveys were conducted to inform the prioritization of our DEI efforts going forward.



In parallel with developing our DEI roadmap, we had monthly employee discussion groups in 2021 that included moderated, interactive conversations with guest speakers, and follow up discussions. The DEI reading and discussion group was formed in 2021 to improve understanding of ourselves and others, and to cultivate a sense of empathy toward different experiences. We also created a dedicated space on our internal web platform for DEI articles, event replays, information sharing, and a calendar for internal and external events and communications.

Our CEO has also signed the Massachusetts Biotechnology Council's [CEO pledge](#) for a more equitable and inclusive life sciences industry that commits to measurable action across six key areas.

Below are diversity metrics for gender and ethnicity, based on voluntary employee self-reporting.



Source: Voluntary self-identification at hire as of March 31, 2022; Ethnic diversity metrics represent only U.S. employee data.

EMPLOYEE HEALTH AND SAFETY

Benefits

We understand that our employees are our greatest asset and we strive to prioritize a healthy work-life balance. Deciphera scored in the top quartile of large and midsize employers who participated in Gallagher’s 2021 Benefits Strategy & Benchmarking Survey. We were recognized as an organization that provides innovative solutions for creating organizational structures, workplace policies, and total rewards, which inclusively engage and motivate its employees. Current benefits that support these efforts include the following: every employee is eligible for up to \$1,000 annually to spend on “life needs” including gym memberships, exercise equipment, health/wellness applications, student loan repayment, day care, or pet insurance. We provide all employees with paid parental leave, a monthly cell phone stipend, and summer and winter

company shutdowns to rest and recharge. For more information about our current benefits and company culture, please view our [careers page](#).

Safety

We are committed to help protect our employees' physical safety and to provide an environment that prioritizes health and mental wellbeing. All employees complete workplace respect (anti-harassment and anti-discrimination) training, as well as office safety training that includes an interactive emergency action plan training conducted at hire. We also conduct role-specific health and safety training such as personal protective equipment (PPE) and hazard communication training for our lab personnel.

We have instituted comprehensive emergency action plans for our Waltham, Massachusetts and Lawrence, Kansas locations to establish the policies and procedures for emergency preparedness, prevention, response, and recovery.

COVID-19 Response

In response to the ongoing COVID-19 pandemic, we have implemented policies and precautions guided by the Centers for Disease Control and Prevention and local guidelines as part of our continued commitment to employee health and safety. We increased cleaning and sanitization protocols across all sites, offered a wide variety of personal protective equipment to all employees, added standalone air purifiers to all spaces, and installed touchless door entry options.

Throughout the pandemic, communications with employees have included important information such as new legislation like the Families First Coronavirus Act, resources for mental health and well-being, and best practices for working remotely.

We also instituted a COVID-19 vaccination requirement as part of our return-to-office plan for our U.S. employees. Accommodations for medical conditions and sincerely held religious beliefs have been granted to certain of our employees consistent with applicable law. In addition, our return-to-office plan requires adherence to onsite occupancy limits and appropriate safety measures designed to comply with federal, state, and local guidelines.

Our ability to maintain our focus and keep employees connected and productive through a pandemic is a testament to our emergency preparedness and our team's commitment to our patients.

OUR HYBRID WORKPLACE MODEL

During the pandemic, our employees demonstrated that we can be productive and effective working remotely as an organization. As a result, we implemented a hybrid workplace model to offer employees on-going flexibility to balance their work and life. We have developed high-level guidelines to provide guidance on what hybrid work looks like for our organization. We understand that there is no one solution for accommodating all our employee needs, so we have created flexible guidelines for this new way of working.

Employees are empowered to collaborate with their managers to develop what workstyle best supports their job responsibilities, productivity, business needs, and personal commitment. Some roles may have more flexibility than others in this hybrid model (i.e. field or lab personnel).

To support the new hybrid workplace experience, we adopted a new seating strategy within our office. We value in-person interactions and encourage on-site presence and based on this philosophy we provide a variety of focus and collaborative settings that employees can reserve for their use at any time..

ENVIRONMENTAL MANAGEMENT

We are committed to promoting environmental stewardship across our operations and we recognize that we play a part in contributing to the health and safety of our communities.



ENVIRONMENTAL, HEALTH, AND SAFETY

In 2021, we completed an environmental, health, and safety (EHS) audit and gap assessment of our office and laboratory facilities that identified key observations, recommendations, and best practices across a variety of topics. This gap assessment serves as a roadmap as we continue to build out our EHS program. In 2021, we also hired our first dedicated EHS manager as part of our increased commitment to developing and advancing our sustainability strategy.

Our headquarters in Waltham, Massachusetts is Leadership in Energy and Environmental Design (LEED) Core and Shell certified with energy and water-efficient internal design elements such as motion-controlled lights and faucets, LED lighting, and scheduled thermostat settings designed to minimize heat and cooling when occupants are not in the building.

Our laboratory site in Lawrence, Kansas is equipped with an air filtration system that can filter air at a rate of up to 29,000 cubic feet per minute (CFM). By cleaning and conditioning mixed atmospheric and laboratory air, our facility aims to help the air quality for our local community in downtown Lawrence by discharging filtered air back into the atmosphere.

WASTE MANAGEMENT

While we are currently in the process of developing a more formalized Waste Management Program, we provide our employees with the ability to recycle materials such as cardboard, paper, and aluminum cans at our facilities. We also participate in electronic waste collection events hosted at our Waltham location to properly dispose of equipment such as computers, printers, monitors, and batteries. Some electronic equipment is donated to local colleges for reuse. In Lawrence, we also recycle a variety of consumable waste products such as batteries, cardboard, and non-plastic biodegradable containers.

Our lab facility conducts disposal activities of hazardous and non-hazardous waste in partnership with a certified third-party vendor to handle chemicals and medicine substances. Lab personnel are required to complete hazardous waste awareness training on an annual basis.



GOVERNANCE AND LEADERSHIP

RISK MANAGEMENT AND GOVERNANCE OF ESG

Our Board of Directors (Board) sets high standards for our employees, officers, and directors. Implicit in this philosophy is the importance of sound corporate governance. It is the duty of the Board to serve as a prudent fiduciary for our shareholders and to oversee the management of our business.

We face a number of risks, including risks relating to our financial condition, research, development and commercialization activities, operations, strategic direction, and intellectual property. Management is responsible for the day-to-day management of risks we face, while our Board of Directors, as a whole and through committees, has responsibility for the oversight of risk management.

The role of our Board in overseeing the management of our risks is conducted primarily through committees of the Board, as disclosed in the descriptions and charters of each of the committees. The full Board discusses with management our key risk exposures, their potential impact on us, and the steps we take to help manage them.

During 2021, our Board had four standing committees: Audit Committee, Compensation Committee, Nominating and Corporate Governance Committee, and Science and Technology Committee. Each of these committees was responsible for different aspects of risk management, including risks related to ESG. The Audit Committee has a special responsibility to oversee the guidelines and policies that govern the process by which the exposure to risk is managed by Deciphera's management.

The charter of the Nominating and Corporate Governance Committee provides that the committee periodically review, and provide oversight with respect to, the company's strategy, initiatives, and policies concerning corporate social responsibility, including environmental, social, and governance matters.

BOARD INDEPENDENCE AND DIVERSITY

In evaluating proposed director candidates, we consider factors such as character, integrity, judgment, diversity, independence, skills, education, expertise, business acumen, business experience, length of service, understanding of our business and industry, conflicts of interest, and other commitments. While we have no formal policy regarding Board diversity, the overall diversity of our Board is an important consideration in the director nomination and selection process. Our Nominating and Corporate Governance Committee assesses diversity in connection with the annual nomination process as well as in new director searches. As we pursue Board recruitment efforts, our Nominating and Governance Committee will continue to seek out candidates who can contribute to the diversity of views and perspectives of the Board in accordance with the Committee's policies for director candidates.

In August 2021, the SEC approved Nasdaq's Board Diversity Rule, which requires Nasdaq-listed companies to have or explain why they do not have at least two diverse directors, including one who self-identifies as female and one who self-identifies as either an underrepresented minority or LGBTQ+. Certain Nasdaq-listed companies are required to have, or explain why they do not have, at least one diverse director by August 2023 and a second director who satisfies another diversity category by August 2025. In addition, beginning in 2022, the Board Diversity Rule requires companies to annually disclose anonymized statistical information on board diversity using a diversity matrix in its proxy statement. We value diversity on our Board and

currently have two female directors, and we will be actively seeking opportunities to add another diverse board member prior to August 2025.

Eight of nine directors are independent, in accordance with Nasdaq listing standards, and we also adhere to heightened independence requirements for members of certain committees.

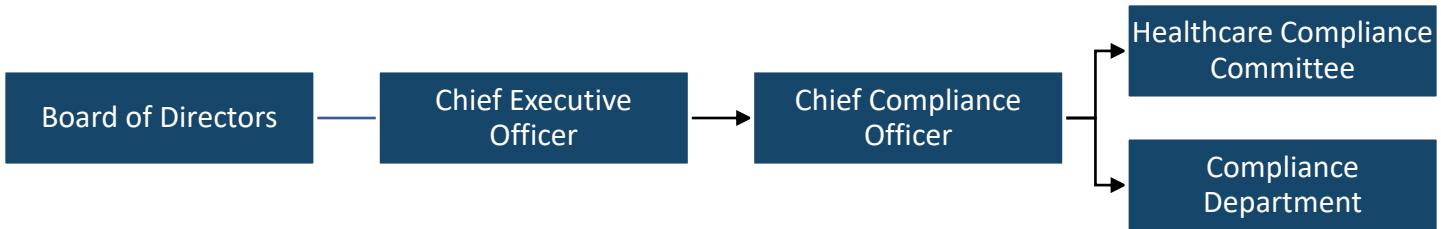
For more information about our Board, please refer to our most recent [proxy statement](#).

BUSINESS ETHICS AND COMPLIANCE

We are committed to conducting our business, including interactions in the healthcare community, in compliance with applicable laws and ethical standards. Our [Code of Business Conduct and Ethics](#) and our Healthcare Compliance Program (as described in our Healthcare Compliance Manual) represent statements of ethics and compliance principles that guide our operations and activities and set forth our basic principles, values, and framework for action. Additionally, we have adopted the Pharmaceutical Research and Manufacturers of America’s (PhRMA’s) Code on Interactions with Healthcare Professionals as a core element of our Healthcare Compliance Program.

We provide our Code of Business Conduct and Ethics and Healthcare Compliance Manual to all employees, conduct mandatory training on the provisions, and require each employee to sign annual certifications confirming their understanding and intent to comply with the requirements and applicable laws set forth in each policy.

Our General Counsel (GC) serves as the focal point for general compliance activities under the Code of Business Conduct and Ethics and promotes an open-door policy for our employees to seek guidance on compliance issues or report suspected non-compliance. The GC reports on general compliance matters and the status of the compliance program at periodic meetings with our CEO and Board. Our Chief Compliance Officer (CCO) serves as the focal point for healthcare law compliance activities and promotes an open-door policy for our employees to seek guidance on healthcare law compliance issues or report suspected non-compliance. The CCO reports on general healthcare law compliance matters and the status of the healthcare law compliance program at periodic meetings with our CEO and Board.



Our Healthcare Compliance Committee (HCC) has the responsibility to advise and provide feedback to the CCO in the development, operation, and monitoring of the Healthcare Compliance Program. The HCC meets periodically and is comprised of representatives from key business functions in the company, such as our Compliance, Human Resources, Medical/Scientific Affairs, Regulatory Affairs, Commercial, Finance, and Legal departments.

Each employee is required to abide by these general and healthcare compliance principles and has a duty to report suspected compliance violations directly to the GC, the CCO, a member of our Compliance department, or via other reporting mechanisms we make available, such as the [Deciphera Ethics Hotline](#), which is toll-free and available 24 hours a day, 7 days a week. The hotline is monitored by the Chair of the Audit Committee and the GC. Our policy is that the company will not retaliate, harass, or otherwise take adverse action against an employee or contractor who makes a good-faith report of any known or suspected violation or seeks assistance to address a compliance concern. We also conduct regular assessments of employees to ensure that they comply with applicable compliance policies and procedures and relevant federal and state

laws and regulations. The auditing and monitoring process considers whether appropriate policies exist and whether the policies were implemented, communicated, and followed. Any findings are documented and reported to management.

ETHICAL MARKETING

The Deciphera policy on promotional interactions with healthcare professionals (HCPs) aims to ensure that these activities meet our ethical standards and fulfill our legal and regulatory responsibilities. Members of the Commercial department and all personnel engaged in external communications receive training on this policy and are required to confirm overall comprehension as part of the training.

It is our policy that all labeling, advertising, and promotional materials, and all promotional presentations related to Deciphera products, comply with the Food, Drug, and Cosmetic Act, FDA regulations, and other applicable federal, state, local, and country-specific laws. All such materials are carefully reviewed with the goal of assuring compliance and medical and scientific accuracy, by a multi-disciplinary review committee, including members from the Medical Affairs, Legal, and Regulatory Departments.

Our employees are strictly prohibited from engaging in off-label promotion to HCPs, and our policy requires that we will not engage in the promotion of a medicine, or new use of a medicine, prior to its approval by the FDA or the applicable regulatory authority outside the U.S. If a member of our Commercial team receives an unsolicited request for information about an unapproved use or information that is inconsistent with the label, our policy requires that the question is referred to Medical Affairs using approved medical information request forms, that the HCP is connected with the Medical Science Liaisons (MSLs) team, or that the HCP is directed to call our medical information line. Commercial employees are not permitted to answer questions about unapproved uses.

VENDOR MANAGEMENT

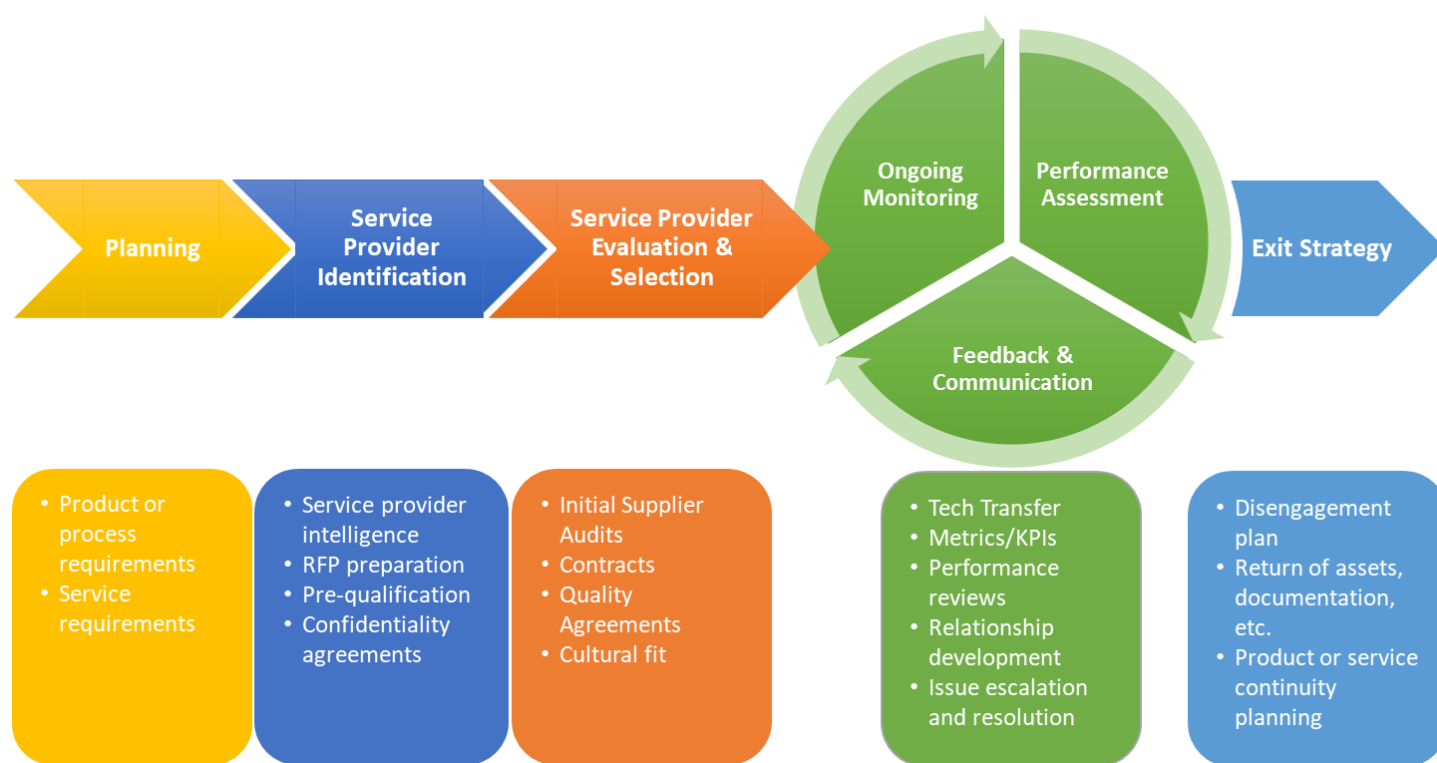
Throughout our supply chain, we work with various partners involved in the development, manufacture, and testing of our medicines. These service providers include contract development and manufacturing organizations (CDMOs), CROs, and other vendors. We do not own or operate any manufacturing or testing facilities and we rely on partners to manufacture and test our clinical and commercial drug supply.

CDMO Selection and Oversight

Partnership with CDMOs starts in the drug development phase and continues through to the drug manufacturing phase.

Technical Operations, in collaboration with Quality Assurance, maintains oversight of the selected CDMO to help ensure sustained compliance with defined performance criteria, following the quality agreement between Deciphera and the CDMO. This oversight may include performance review meetings, review of service provider metrics, periodic update meetings, and on-site technical oversight. We believe in the importance of two-way communication with our service providers, whom we view as true partners.

Selection and oversight of CDMOs generally involves several steps outlined below, including planning, identification, evaluation, and oversight, and we consider risk management the foundation for this process.



Phases of selection and oversight of contract service providers managed by Technical Operations at Deciphera.

CRO Qualification and Selection

The overall process to qualify, select, and monitor CROs is generally similar to that of CDMOs.

We aim to ensure that our CROs are compliant with the International Council on Harmonisation's Good Clinical Practices and any additional applicable regulations and laws in the countries where the clinical study is being conducted. We also require any study-specific documentation, contract, or protocols specific to the project. This oversight may be conducted through appropriate pre-qualification activities, audits, or clinical documentation review. Before a material CRO is selected, our process is designed to generally include the following elements:

Qualification: The Clinical Operations team defines the scope of the project to be outsourced and proposes qualification activities such as a review of SOPs for the prospective CRO. For critical vendors (such as those performing activities on a pivotal study), the Clinical Operations and Quality Assurance teams may require an on-site pre-selection vendor qualification by a Quality Assurance auditor. This assessment may include a review of the CRO's training records of assigned staff, physical facilities, computer systems, Quality Assurance infrastructure and internal audit procedures, and a review of past activity and performance for vendors used previously. Qualification scope and assessment are presented to the Quality Board for review every quarter.

Selection: Upon determining that one or more material CRO(s) will be required for the execution of a clinical study, specifications and project requirements may be defined in a request for a proposal (RFP) or similar document. When utilizing

an RFP process, we identify potential CROs to contact regarding capabilities and specialties, and a competitive bid process is conducted to evaluate project approaches and to ensure competitive pricing whenever feasible. Clinical operations will select the vendor considered most suitable to the project based upon the CRO's ability to meet project specifications, assure project staffing, assurance of compliance with applicable regulatory requirements, and competitive pricing.

INFORMATION SECURITY AND PATIENT PRIVACY

We strive to protect the confidentiality, integrity, and availability of the personal and corporate information we manage.

Our cybersecurity mission is to enable safe and secure ways to do business by protecting Deciphera information systems, assets, and data. Our goal is to build and maintain a sustainable and flexible cybersecurity program that reduces risk, while enabling the business to run effectively.

Our Cybersecurity Steering Committee oversees technical matters regarding cybersecurity, and we have identified an Information Technology (IT) Governance, Risk, Compliance, and Cybersecurity officer with the mission and resources to develop, implement, and maintain our Enterprise Information Security Program. Our policy requires that the Board receives cybersecurity updates on at least an annual basis.

The Cybersecurity Steering Committee has an approved charter reviewed annually by the Chief Financial Officer (CFO) to ensure it is aligned with our business strategy. The Cybersecurity Steering Committee has three key roles:

- **Systems assurance:** Overseeing the establishment and maintenance of effective cybersecurity mechanisms throughout Deciphera.
- **Documentation:** Reviewing documented policies, standards, processes, and procedures that will have a direct or indirect impact on the security and privacy of information at Deciphera.
- **Management of information security risk:** Identifying and managing significant cybersecurity risks across our organization, including escalating to the Executive Leadership team where appropriate.

Information Security and Business Continuity

We aim to protect our information assets, resources, and data by maintaining the following IT Asset Management (ITAM) business practices and Sarbanes-Oxley (SOX) compliance across the enterprise:

Continuous monitoring: We have implemented continuous vulnerability scanning and remediation, multifactor authentication, data loss prevention, and other state-of-the-art technologies to continuously improve the maturity level of our cybersecurity program. Our policies and systems are set up so information system events can be identified and corrected, and operator and fault logging can be enabled, collected, and reviewed. We seek to comply with relevant legal, regulatory, and contractual requirements applicable to logging and event monitoring.

Information security incident management: We work to effectively detect, respond, and resolve security events and potential incidents that may impact the security of our information assets. We have a documented cybersecurity

incident response (CSIR) plan that is tested annually. Our CSIR function manages the incident response process.

Cybersecurity program: We have a robust, multi-layered defense that includes internal experts, mature processes, and defense technologies designed to identify, detect, protect, respond, and recover from potential security incidents. We also leverage managed security services for our advanced security operations center and near real-time managed detection and response capabilities. We use network security controls such as firewalls, intrusion prevention and detection systems, virtual private networks, segmentation techniques, service edge cloud security architecture tools, and zero trust network access

management to help protect our information assets from compromise from both external and internal factors.

The COVID-19 pandemic has resulted in a significant global increase in phishing and other cybersecurity attacks. Cybersecurity attacks are becoming even more sophisticated and dangerous. Cybersecurity tools and technologies, combined with training and awareness campaigns, have been implemented to help enable us to detect and prevent such attacks. We use a continuous improvement approach and leverage industry leading cybersecurity resources to adapt and improve our prevention, detection, and response methods as the threats and attack vectors change.

Training and awareness: We generally conduct role-based security and privacy training during three timeframes: within 30 days of authorizing employee access to the system, when required by system changes, and annually thereafter. We also require review and acknowledgement of all corporate IT security policies annually and conduct quarterly simulated phishing exercises. Finally, we have implemented a Deciphera CyberHero program to recognize and reward outstanding efforts by employees to protect Deciphera information assets, resources, and data.

Third-party risk management: Our practice is to perform initial and ongoing due diligence of our third parties who

maintain material data or information for us to help evaluate and verify third party information security capabilities. We have implemented a cybersecurity third-party risk management process to assess mission- and business- critical third parties for cyber risks and to assist the business in making risk-informed technology product and services decisions.

Cybersecurity risk and maturity assessments: We conduct periodic assessments of our assets to evaluate the effectiveness of applicable security controls that are implemented to help protect endpoints and mobile devices from malware and information leakage. To help ensure the availability of business-critical technology resources during adverse conditions, we also manage and maintain business continuity and disaster recovery (business resilience) capabilities.

Annually, we conduct a cybersecurity risk assessment, which includes interviews with executive leadership to understand their views on cybersecurity risks to Deciphera and overall risk assessment. We supplement this with an external review of our information security and privacy controls to assess our cybersecurity maturity as compared to our peers and other highly regulated industries. The results of these assessments are reported to the Board as part of the periodic cybersecurity update.

Patient Privacy

For personally identifiable information in our possession, we implement commercially reasonable technical and organizational security safeguards designed to help protect against misuse, inappropriate disclosure, or unauthorized access to patient data. Opt-in language on patient-facing websites and materials is designed to describe storage and use of patient data consistent with applicable privacy laws. For more information, please view our [Privacy Policy](#).

We are committed to compliance with all applicable privacy laws, including the Health Insurance Portability and Accountability Act (HIPAA) and state privacy laws in the U.S. that address the protection of personal information, including protected health information (PHI) or individually identifiable health information. Although HIPAA does not directly apply to Deciphera as a pharmaceutical manufacturer, the unlawful use of a patient's PHI by Deciphera or our employees may subject Deciphera to legal risk and potential civil or criminal penalties. HIPAA establishes national standards to protect PHI and prohibits covered entities, such as HCPs, from using or disclosing PHI without the individual's specific written consent, unless an exception applies.

The EU General Data Protection Regulation (GDPR) and U.S. state privacy laws, including the California Consumer Protection Act, also impact our business activities and how we may collect, use, share, or store personal data or patient data. We have appointed an external Data Protection Officer to ensure compliance with GDPR.

FRAMEWORKS AND STANDARDS

SUSTAINABLE ACCOUNTING STANDARDS BOARD (SASB)

SASB has identified the sustainability issues that are most likely to affect the long-term financial condition or operating performance of companies within a specific industry. Below are the disclosure topics and accounting metrics associated with the Biotechnology and Pharmaceutical industry and a reference for where these topics are discussed within the report.

Topic	Accounting Metric	SASB Code	ESG Report Reference
Safety of Clinical Trial Participants	Discussion, by world region, of management process for ensuring quality and patient safety during clinical trials	HC-BP-210a.1	Clinical Trial Standards and Safety of Clinical Trial Participants
	Number of FDA Sponsor Inspections related to clinical trial management and pharmacovigilance that resulted in: (1) Voluntary Action Indicated (VAI) and (2) Official Action Indicated (OAI)	HC-BP-210a.2	Not reported
	Total amount of monetary losses as a result of legal proceedings associated with clinical trials in developing countries	HC-BP-210a.3	Not reported
Access to Medicines	Description of actions and initiatives to promote access to health care products for priority diseases and in priority countries as defined by the Access to Medicine Index	HC-BP-240a.1	Access and Affordability
	List of products on the WHO List of Prequalified Medicinal Products as part of its Prequalification of Medicines Programme (PQP)	HC-BP-240a.2	Not reported
Affordability and Pricing	Number of settlements of Abbreviated New Drug Application (ANDA) litigation that involved payments and/or provisions to delay bringing an authorized generic product to market for a defined time period	HC-BP-240b.1	Not reported
	Percentage change in: (1) average list price and (2) average net price across U.S. product portfolio compared to previous year	HC-BP-240b.2	Not reported
	Percentage change in: (1) list price and (2) net price of product with largest increase compared to previous year	HC-BP-240b.3	Not reported
Drug Safety	List of products listed in the Food and Drug Administration's (FDA) MedWatch Safety Alerts for Human Medical Products database	HC-BP-250a.1	Available via FDA Adverse Event Reporting website

	Number of fatalities associated with products as reported in the FDA Adverse Event Reporting System	HC-BP-250a.2	Available via FDA Adverse Event Reporting website
	Number of recalls issued; total units recalled	HC-BP-250a.3	Not reported
	Total amount of product accepted for take-back, reuse, or disposal	HC-BP-250a.4	Not reported
	Number of FDA enforcement actions taken in response to violations of current Good Manufacturing Practices (cGMP), by type	HC-BP-250a.5	Not reported
Counterfeit Drugs	Description of methods and technologies used to maintain traceability of products throughout the supply chain and prevent counterfeiting	HC-BP-260a.1	Quality Management, Drug Safety, and Counterfeit Drugs
	Discussion of process for alerting customers and business partners of potential or known risks associated with counterfeit products	HC-BP-260a.2	Quality Management, Drug Safety, and Counterfeit Drugs
	Number of actions that led to raids, seizure, arrests, and/or filing of criminal charges related to counterfeit products	HC-BP-260a.3	Not reported
Ethical Marketing	Total amount of monetary losses as a result of legal proceedings associated with false marketing claims	HC-BP-270a.1	Not reported
	Description of code of ethics governing promotion of off-label use of products	HC-BP-270a.2	Ethical Marketing
Employee Recruitment, Development and Retention	Discussion of talent recruitment and retention efforts for scientists and research and development personnel	HC-BP-330a.1	Training and Development
	(1) Voluntary and (2) involuntary turnover rate for: (a) executives/senior managers, (b) mid-level managers, (c) professionals, and (d) all others	HC-BP-330a.2	Diversity, Equity, and Inclusion (DEI)
Supply Chain Management	Percentage of (1) entity's facilities and (2) Tier I suppliers' facilities participating in the Rx-360 International Pharmaceutical Supply Chain Consortium audit program or equivalent third-party audit programs for integrity of supply chain and ingredients	HC-BP-430a.1	Not reported
Business Ethics	Total amount of monetary losses as a result of legal proceedings associated with corruption and bribery	HC-BP-510a.1	Not reported
	Description of code of ethics governing interactions with health care professionals	HC-BP-510a.2	Business Ethics and Compliance

ACTIVITY METRICS: Biotechnology and Pharmaceuticals

Category	Activity Metric	SASB Code	Unit of Measure
Quantitative	Number of patients treated	HC-BP-000.A	Who We Are
Quantitative	Number of drugs (1) in portfolio and (2) in research and development (Phases 1-3)	HC-BP-000.B	Website: Pipeline