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Genscript Biotech Corporation

金斯瑞生物科技股份有限公司* (Incorporated in the Cayman Islands with limited liability) (Stock code: 1548)

VOLUNTARY ANNOUNCEMENT RESEARCH AND DEVELOPMENT UPDATE AND CLARIFICATION ANNOUNCEMENT

Reference is made to the voluntary announcements of Genscript Biotech Corporation (the "Company", together with its subsidiaries, the "Group") dated 28 October 2016, 14 May 2017, 6 June 2017, 19 September 2017, and 1 November 2018 in relation to the research and development results of a chimeric antigen receptor ("CAR") T cell therapeutic product LCAR-B38M in an investigator initiated clinical study conducted by four 3A hospitals in China, which was supported by Nanjing Legend Biotechnology Co., Ltd.* 南京傳奇生物科技有限公司("Nanjing Legend"), a subsidiary of the Company as of the date of this announcement.

The Second Affiliated Hospital of Xi'an Jiaotong University reported updated data on the investigator initiated trial Phase 1, single-arm open-label study supported by Nanjing Legend, which evaluated the investigational chimeric antigen receptor T-cell ("CAR-T") therapy LCAR-B38M in the treatment of patients with advanced relapsed or refractory (r/r) multiple myeloma. These updated results showed that the B-cell maturation antigen ("BCMA") directed CAR-T cell therapy LCAR-B38M achieved deep and durable responses, with a manageable and tolerable safety profile, in patients who failed a median of three prior therapies. The findings were featured in an oral presentation at the 2018 American Society of Hematology ("ASH") Annual Meeting.

The Second Affiliated Hospital of Xi'an Jiaotong University was the treatment center responsible for enrolling the majority of patients for the investigator initiated trial (n=57). Shanghai Ruijin Hospital, Shanghai Changzheng Hospital and Jiangsu Province People's Hospital are the three additional sites participating in the study which have collectively enrolled 17 patients. Data from these three sites will be submitted separately by the clinical investigators for future publication.

In this study update presented at the 2018 ASH Annual Meeting, 57 patients with advanced multiple myeloma received LCAR-B38M CAR-T cell therapy. The median age of the patients was 54 years (range, 27-72); median number of prior therapies was three (range, 1-9); and 74 percent of patients had stage 3 disease by Durie-Salmon staging. According to the findings, there was an 88 percent overall response rate (ORR) (95 percent confidence interval (CI): 76-95). Complete response (CR) was achieved by 74 percent of patients (95 percent CI: 60-85); very good partial response (VGPR) was achieved by 4 percent of patients and partial response (PR) was achieved by 11 percent of patients. Notably, among 42 patients with CR, 39 patients (68 percent) were minimal residual disease (MRD) negative in the bone marrow as measured by 8-color flow cytometry. The median duration of response (DOR) was 16 months (95 percent CI: 12-not reached NR) and a median progression-free survival (PFS) of 15 months for all patients was observed. Among the patients who achieved CR, the median PFS was 24 months.

The most common adverse events (AEs) were pyrexia (91 percent), cytokine release syndrome (CRS) (90 percent), thrombocytopenia (49 percent), and leukopenia (47 percent). In patients who experienced Grade 3/4 AEs (65 percent), the most common were leukopenia (30 percent), thrombocytopenia (23 percent) and increased aspartate aminotransferase (21 percent). CRS was mostly low grade, which included Grade 1 (47 percent), Grade 2 (35 percent) and Grade 3 (7 percent). The median time to onset of CRS was nine days (range, 1-19), with a median duration of nine days (range, 3-57). Neurotoxicity was observed in one patient who had Grade 1 aphasia, agitation and seizure-like activity. Overall, 17 patients died during the study and follow-up period. The causes of death were progressive disease (PD; n=14), suicide after PD (n=1), esophagitis (n=1), and pulmonary embolism and acute coronary syndrome (n=1).

In 22 December 2017, (i) Legend Biotech USA Inc., a non-wholly-owned subsidiary of the Company ("Legend U.S."), (ii) Legend Biotech Ireland Limited, a non-wholly-owned subsidiary of the Company ("Legend Ireland", together with Legend U.S., "Legend"), and (iii) Janssen Biotech, Inc. ("Janssen"), entered into a collaboration and license agreement (the "Agreement") to jointly develop and commercialize LCAR-B38M in multiple myeloma. LCAR-B38M is a CAR-T cell therapy directed against two distinct BCMA epitopes, which confers high avidity and affinity binding of the compound to the BCMA-expressing cells.

In China, a Phase 2 confirmatory trial registered with the Center for Drug Evaluation is currently being planned to further evaluate LCAR-B38M in patients with advanced r/r multiple myeloma. Globally, Legend and Janssen is advancing a Phase 1b/2 trial of JNJ-68284528 to evaluate its efficacy and safety in adults with advanced r/r multiple myeloma. LCAR-B38M identifies the investigational product being studied in China; whereas JNJ-68284528 identifies the investigational product being studied in the United States and the European Union, both of which are representatives of the same CAR-T therapy. The study is currently enrolling patients following the clearance obtained from the US Food and Drug of an investigational new drug application as announced by the Company on 30 May 2018.

Reference is made to the voluntary announcement of the Company dated 19 September 2017 in relation to the Investigation (as defined therein). The patient who was treated at Shanghai Changzheng Hospital died as a result of a combination of cytokine release syndrome and tumor lysis syndrome. CRS is a clinical syndrome that occurs when various cytokines are released into the blood, from cells that have been targeted by an antibody or immune effector cells (e.g., CAR-T), as a part of the immune reaction. Similarly, tumor lysis syndrome is a condition that may occur when a large number of cancer cells are killed by an anti-cancer therapy within a short period of time, releasing their content into the blood. The Company provided a detailed case report to all hospitals participating in the study and implemented appropriate measures to prevent the occurrence of similar incidence going forward. Reference is also made to the Company's clarification announcement on 28 September 2018 (the "**Clarification Announcement**"). The Company wishes to supplement that the data as disclosed in the Clarification Announcement with 11 data given appears to be different when comparing to the data in the Blood Journal with 5 data given was merely due to separate "data-cut-off dates". Any medical organization hosting a scientific congress mandates that an abstract be submitted approximately three to four months prior to the date of congress. If this abstract is accepted for presentation, data reported in the abstract would be published in the corresponding medical journal (e.g. Blood Journal for American Society of Hematology ("ASH"). However, the scientific congress allows clinical investigators to present more updated data to the medical community at the congress using a new data-cut-off date. This was exactly the scenario when updated LEGEND-2 data were presented as a poster with 11 data given by the clinical investigators at ASH in 2017. And normally since the cancer cells in patients have been gradually killed by CAR-T cells when the patients received CAR-T treatment, the patients' response gradually progressed from PR to VGPR and then to CR over the course of time.

Shareholders and potential investors of the Company are advised to pay attention to investment risks and exercise caution when they deal or contemplate dealing in the securities of the Company.

By order of the Board Genscript Biotech Corporation Zhang Fangliang Chairman and Chief Executive Officer

Hong Kong, 4 December 2018

As at the date of this announcement, the executive Directors are Dr. Zhang Fangliang, Ms. Wang Ye and Mr. Meng Jiange; the non-executive Directors are Dr. Wang Luquan, Mr. Pan Yuexin and Ms. Wang Jiafen; and the independent non-executive Directors are Mr. Guo Hongxin, Mr. Dai Zumian and Mr. Pan Jiuan.

* For identification purposes only