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CSPC PHARMACEUTICAL GROUP LIMITED
石藥集團有限公司

(Incorporated in Hong Kong with limited liability)

(Stock Code: 1093)

VOLUNTARY ANNOUNCEMENT

RESULTS FROM A PHASE I/II CLINICAL STUDY OF ANTI-PD-1/IL-15 BIFUNCTIONAL FUSION PROTEIN SYS6090 (JMT108) MONOTHERAPY IN ADVANCED SOLID TUMOURS PRESENTED AS A RAPID ORAL PRESENTATION AT THE ESMO CONGRESS 2026

The Board of Directors (the "**Board**") of CSPC Pharmaceutical Group Limited (the "**Company**", together with its subsidiaries, the "**Group**") is pleased to announce that the results from a first-in-human Phase I/II clinical study (the "**Study**") of SYS6090 (JMT108) (the "**Product**"), an anti-programmed cell death receptor 1 ("**PD-1**")/interleukin-15 ("**IL-15**") bifunctional fusion protein developed by the Group, in patients with advanced solid tumours, were presented as a rapid oral presentation (No.: 1009RO) at the European Society for Medical Oncology ("**ESMO**") Congress 2026 on 25 October 2026.

The Study was presented by Professor Lin Rongbo from Fujian Cancer Hospital on behalf of the research team. This presentation primarily focused on disclosing the preliminary efficacy and safety data of the Product in patients with hepatocellular carcinoma ("**HCC**") and colorectal cancer ("**CRC**"), and reported the partial responses observed in other tumour types such as non-small cell lung cancer ("**NSCLC**").

STUDY OVERVIEW

The Study is an open-label, multicentre Phase I/II clinical study aiming to evaluate the efficacy and safety of the Product in patients with advanced malignant solid tumours who had progressed on or were intolerant to standard therapies. The Phase I study included accelerated titration (0.01 mg/kg, once every 2 weeks), a Bayesian optimal interval (BOIN) design dose escalation (0.1, 0.3, 1, 2 and 3 mg/kg, once every 2 weeks), and a dose expansion phase to evaluate safety and preliminary efficacy; the Phase II study is a cohort expansion for selected tumour types, and patient enrolment is currently ongoing. The primary endpoints of the Study included safety, objective response rate ("**ORR**"), and pharmacokinetics. The data cut-off date for this presentation was 13 April 2026.

STUDY RESULTS

At this congress, the Group announced the positive results of the Study, with the relevant efficacy and safety data as follows:

Efficacy

- HCC: A total of 13 patients were enrolled. Among them, 76.9% (10/13) had previously received at least second-line treatment, 92.3% (12/13) had previously received immunotherapy, and 92.3% (12/13) were in Barcelona Clinic Liver Cancer (BCLC) stage C. Ten patients had at least one post-baseline tumour assessment and were included in the efficacy analysis set ("**EAS**"). In the EAS, the ORR was 40.0% (4/10; 95% confidence interval ("**CI**"): 12.2–73.8). For patients who had previously received immunotherapy (n=9), the ORR was 33.3% (95% CI: 7.5–70.1).

- CRC: A total of 38 patients were enrolled. Among them, 89.5% (34/38) had previously received at least second-line treatment, and 73.7% (28/38) had liver metastases. Nineteen patients were included in the EAS, with an ORR of 21.1% (4/19; 95% CI: 6.1–45.6). For patients with liver metastases in the EAS (n=17), the ORR was 23.5% (95% CI: 6.8–49.9), which was similar to the overall EAS results.

- NSCLC: A total of 13 patients were enrolled, of whom 4 achieved partial response, with an ORR exceeding 30.0%.

- Other tumour types: Partial responses were also observed in small cell lung cancer, melanoma, renal cell carcinoma, breast cancer and gynaecological tumours.

Safety

Safety data were based on the evaluation of a total of 51 patients with HCC and CRC. The incidence of treatment-emergent adverse events ("**TEAEs**") of any grade was 86.3% (44/51). The incidence of Grade≥3 treatment-related adverse events ("**TRAEs**") was 17.6% (9/51), the incidence of serious TRAEs was 9.8% (5/51), and the proportion of permanent treatment discontinuation due to TRAEs was 2.0% (1/51). Common TEAEs included hypoalbuminaemia, anaemia and elevated liver enzymes. Only one patient experienced a TEAE leading to death, but it was assessed as a non-treatment-related death. The incidence of immune-related adverse events was 33.3% (17/51). During the dose escalation phase, the safety and tolerability at each dose level were generally good, and no unexpected safety signals were observed.

STUDY CONCLUSION

The results of the Phase I study indicated that the Product demonstrated a manageable safety profile and preliminary anti-tumour activity in patients with advanced solid tumours. In evaluable patients with HCC and CRC, the ORR reached 40.0% and 21.1%, respectively. The above results support the further evaluation of the clinical value of the Product in CRC, HCC and other tumour types. Patient enrolment for the Phase II cohort expansion study is progressing smoothly.

ABOUT SYS6090 (JMT108)

The Product is a recombinant fully human anti-PD-1 asymmetric bifunctional fragment crystallisable ("**Fc**", which is a mutated immunoglobulin G1 (IgG1) subtype designed to attenuate Fc-mediated immune functions) fusion protein fused with IL-15. The Product targets PD-1-positive ("**PD-1+**") tumour-infiltrating immune cells through its left arm to block the immunosuppressive function caused by the interaction between PD-1 and programmed death-ligand 1 (PD-L1); and it binds to the IL-15 receptor through its right arm to activate its downstream signalling pathways, further promoting the activation and proliferation of relevant immune cells.

In addition, the unique molecular design of the Product can both reduce the abundance of PD-1 expression on the surface of PD-1+ cells and attenuate binding to the interleukin-2 receptor beta subunit (IL-2R β) and interleukin-2 receptor gamma subunit (IL-2R γ) on PD-1-negative cells, thereby reducing systemic toxicity induced by activation of non-targeted immune cells. Based on the positive data from this solid tumour study, the Group is actively advancing subsequent combination therapy exploration and plans to initiate pivotal clinical studies as soon as practicable.

By order of the Board
CSPC Pharmaceutical Group Limited
CAI Dong Chen
Chairman

Hong Kong, 27 October 2026

As at the date of this announcement, the Board comprises Mr. CAI Dong Chen, Dr. CAI Lei, Mr. WEI Qingjie, Mr. ZHANG Cuilong, Mr. WANG Zhenguo, Dr. LI Chunlei, Dr. YAO Bing, Mr. CAI Xin, Mr. CHEN Weiping, Mr. QU Zhiyong and Mr. ZHANG Yiwei as Executive Directors; and Mr. WANG Bo, Mr. CHEN Chuan, Prof. WANG Hongguang, Mr. AU Chun Kwok Alan, Mr. LAW Cheuk Kin Stephen and Ms. LI Quan as Independent Non-executive Directors.