

1 UNITED STATES PATENT AND TRADEMARK OFFICE

2 BEFORE THE PATENT TRIAL AND APPEAL BOARD

3
4 CSPC MEGALITH BIOPHARMACEUTICAL CO., LTD.,

5 Petitioner,

6 V.

7 LEPU BIOPHARMA, CO, LTD.

8 Patent Owner.

9 Case No. IPR025-00685

10 Patent No. 10,792,370

11
12 VIDEO-RECORDED DEPOSITION OF
13 STYLIANOS BOURNAZOS, PH.D
14 Zoom Recorded Videoconference
06/09/2026
11:09 a.m. (EDT)

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18 REPORTED BY: AMANDA GORRONO, CLR
19 CLR NO. 052005-01

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06-09-2026 Stylianos Bournazos, Ph.D.

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1	06/09/2026	1	I N D E X
2	11:09 a.m. (EDT)	2	WITNESS EXAMINATION BY PAGE
3		3	STYLIANOS BOURNAZOS PHD MR. QIU 7
4	VIDEO-RECORDED DEPOSITION OF STYLIANOS	4	E X H I B I T S
5	BOURNAZOS, PH.D, held virtually via Zoom	5	EXHIBIT DESCRIPTION PAGE
6	Videoconferencing, before Amanda Gorrone,	6	Exhibit Certified English translation of Chinese 36
7	Certified Live Note Reporter, and Notary Public	7	1008 Patent Application Publication Number CN
8	of the State of New York.	8	103772504.....
9		9	Exhibit Expert Declaration of Stylianos 11
10		10	1200 Bournazos, Ph.D.....
11		11	Exhibit Evolving Strategies for Target Selection 26
12		12	1211 for Antibody-Drug Conjugates.....
13		13	Exhibit "A Phase I Study of the Antibody Drug 16
14		14	2035 Conjugate ASG-5GM, an SLC44A4-Targeting
15		15	Antibody Carrying Auristatin E, in
16		16	Metastatic Castration-Resistant Prostate
17		17	Cancer".....
18		18	
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22		22	
Page 3		Page 5	
1	A P P E A R A N C E S	1	THE VIDEOGRAPHER: Here begins Video
2	(Via Zoom Videoconferencing):	2	1 of the video deposition of Dr. Stylianos
3	ON BEHALF OF PETITIONER AND THE WITNESS:	3	Bournazos in the matter of Megalith
4	Howard S. Suh, Esquire	4	Biopharmaceutical Co. v Shanghai Miracogen
5	Fox Rothschild LLP	5	Inc., in the United States Patent and
6	101 Park Avenue 17th Floor	6	Trademark Office for the Patent and Trial
7	New York, NY 10178	7	Board; Case Number IPR 2025-0085.
8	PHONE: 212.878.7914	8	This deposition is being held on
9	E-MAIL: Hsuh@foxrothschild.com	9	Zoom video remote conferencing on June 9,
10		10	2026. The time is 11:09 a.m.
11	-AND-	11	My name is Anthony Holmstock. I'm
12	Erxin Du, Esquire	12	the legal videographer from Digital Evidence
13	Fox Rothschild LLP	13	Group; and the court reporter is Amanda
14	101 Park Avenue, 17th Floor	14	Gorrone, in association with Digital Evidence
15	New York, NY 10178	15	Group.
16	PHONE: 646.601.7657	16	Counsel, all parties have stipulated
17	E-MAIL: Edu@foxrothschild.com	17	to the witness being sworn in remotely.
18	ON BEHALF OF PATENT OWNER:	18	Counsel, will you please state your
19	Fangzhou (Fred) Qiu, Esquire	19	appearances and whom you represent, followed
20	Sheppard Mullin	20	by the court reporter administering the oath.
21	30 Rockefeller Plaza	21	MR. QIU: Anthony, I just want to
22	New York, NY 10112	22	mention there is a replacement party in this
	PHONE: +1.650.815.2652		
	E-MAIL: Fqiu@sheppard.com		
	ALSO PRESENT:		
	Anthony Holmstock, Videographer - Digital		
	Evidence Group		

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1 case. So the Patent Owner is no longer 2 Shanghai Miracogen Inc. I will have the 3 Patent Owner's name in the chat box. So 4 that's currently the patent owner. 5 THE VIDEOGRAPHER: Noted. 6 STYLIANOS BOURNAZOS, called as a witness, having 7 been first duly sworn by a Notary Public of the 8 State of New York, was examined and testified as 9 follows: 10 THE WITNESS: I do. 11 MR. SUH: Should we make appearances 12 again, Fred? 13 MR. QIU: I think we should make 14 appearances. 15 Do you want to start? 16 MR. SUH: Sure. My name is Howard 17 Suh. With me is my colleague Erxin Du. 18 We're from the firm Fox Rothschild, and we 19 represent petitioner and the witness. 20 MR. QIU: And my name is Fred Qiu. 21 I'm from the firm Sheppard. And I represent 22 the Patent Owner, Lepu Biopharma Co., Ltd.	1 your responses. 2 A. I said correct. Can you hear me? 3 Q. Yes, I can hear you. 4 A. Ah. Okay. I can move closer to the 5 microphone. 6 Q. Okay. Thank you. 7 We can take breaks today when you 8 need to. I just ask there's no question pending 9 when you request a break. 10 A. Sounds good. 11 Q. Do you understand you're not allowed 12 to discuss your testimony with your counsel 13 during breaks today? 14 A. If I understand -- you broke one 15 moment. 16 Q. Oh, do you understand that you are 17 not allowed to discuss the substance of this case 18 with counsel during breaks today? 19 A. Yes, I am. 20 Q. And if you don't understand the 21 question, let me know and I will rephrase. 22 A. Sounds good.
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1 MR. SUH: Before we start, Fred, I 2 just want to stipulate on the record there 3 was an issue with respect to whether an 4 individual laptop is necessary to be used 5 primarily for video capture of the witness. 6 We stipulate that we're not going to do that. 7 And that the current set up with conference 8 room camera would be sufficient. 9 MR. QIU: Yes. Agreed. Okay. 10 EXAMINATION 11 BY MR. QIU: 12 Q. Okay. Dr. Bournazos, good morning. 13 A. Good morning. 14 Q. To start the deposition let me 15 reiterate the ground rules and make sure you 16 understand them. I know that it's maybe repeated 17 information, but please bear with me. 18 So you understand you are under oath 19 to tell the truth today, correct? 20 A. Correct. 21 Q. We'll need verbal responses, because 22 we need to make sure the court reporter can get	1 Q. Unless you say otherwise, I will 2 assume you understood the question; is that fair? 3 A. Yep. 4 Q. You have to answer my questions 5 today unless your attorney instructs you 6 otherwise, understood? 7 A. Understood. 8 Q. Is there any reason that you 9 wouldn't be able to provide accurate and truthful 10 testimony today? 11 A. No reason. 12 Q. Are you here to give testimony in 13 the inter partes review proceeding involving US 14 Patent Number 10,792,370? 15 AUTOMATED MESSAGE: Recording in 16 progress. 17 MR. QIU: Sorry. Let me repeat that 18 question. 19 BY MR. QIU: 20 Q. Are you here to give testimony in 21 the inter partes review proceeding involving US 22 Patent Number 10,792,370?

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1 A. Yes.
2 Q. Today we'll refer to that patent as
3 the '370 patent; is that okay?
4 A. That's perfect.
5 Q. What documents do you have here with
6 you?
7 A. Nothing.
8 Q. I see that you are looking at the
9 screen is there any electronic document available
10 there?
11 A. No, it's this -- the Zoom screen.
12 Q. The Zoom screen?
13 A. I'll move it away. Nothing.
14 Q. Okay. Yes, feel free to look at
15 that.
16 A. It just has a clock. It has a clock
17 on there.
18 Q. Yeah. One of the things that we are
19 going to talk about today is person of ordinary
20 skill in the art. We'll refer to it as "POSA,"
21 P-O-S-A; is that okay?
22 A. Yeah.

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1 Q. How long did you spend preparing for
2 this deposition?
3 A. A few hours.
4 Q. What documents did you review in
5 preparation of this deposition?
6 A. I reviewed my declaration from this
7 time, my declaration from last time, other
8 supporting documents and exhibits. The patent
9 owner's response, and a few other papers, but
10 primarily these.
11 MR. QIU: Hey, Howard, could you get
12 Exhibit 1200 from the box. That is
13 Dr. Bournazos's reply declaration.
14 (Whereupon, Exhibit 1200, Expert
15 Declaration of Stylianos Bournazos, Ph.D.,
16 was identified.)
17 MR. QIU: Doctor, I'm going to mark
18 this as Exhibit 1200 because it's not
19 physically marked. Okay.
20 THE WITNESS: Thank you.
21 MR. QIU: Amanda, so I noted a copy
22 of this exhibit in the chat box.

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1 BY MR. QIU:
2 Q. Doctor, is that a correct copy of
3 your reply declaration, which is Exhibit 1200?
4 A. Yes, looks like it is.
5 Q. Could you go to Paragraph 15 of your
6 reply declaration?
7 A. 15, 1-5?
8 Q. That's correct.
9 A. I guess it's missing.
10 Q. That paragraph is missing?
11 A. No, no, it's here. Sorry, sorry.
12 Yeah.
13 Q. Okay. Do you see Table 1 at the end
14 of that paragraph?
15 A. Yes.
16 Q. What does Table 1 show?
17 A. So Table 1 shows the list of ADCs
18 and that have been in clinical development and
19 have ended at least Phase I clinical phase before
20 2015.
21 So it has -- the first column has
22 the Target; the second column has the Name; the

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1 third has the NCT Record, so this is the record;
2 and the next column has the Trial start date.
3 That is the year and then it's the month.
4 Q. Did you check whether the ADCs ended
5 up to be successful?
6 A. For some of them, yes; for some of
7 them, no. The reason I included this table was
8 mostly to give a historical overview of which
9 targets have been actually in clinical
10 development before the priority date before 2015.
11 Q. Which of those ADCs were successful?
12 A. How do you define "successful"?
13 Q. Let me rephrase the question.
14 Which of those ADCs were clinically
15 approved?
16 A. Ah, later on. After 2015, right
17 now?
18 Q. Sorry. Which of those -- sorry.
19 Sorry. Let me clarify my question.
20 You earlier testified that some of
21 those ADCs were successful and that some of them
22 were not successful. Which of them are you

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1 referring to where you said some of them were
2 successful?
3 A. Successful, you mean, FDA approved?
4 Q. Is that what you meant in your
5 answer?
6 A. Yeah.
7 Q. Okay. So let's move that which of
8 those were successful?
9 A. If they approved. If they approved,
10 I'm not 100 percent sure, but I believe the first
11 five. But I can be wrong. The first one, two,
12 three, four -- for the first four I'm 100 percent
13 sure. Trastuzumab emtansine, Enfortumab bedotin,
14 Mirvetuximab and TROP-2 these are currently
15 approved.
16 Q. And which of those ADCs were
17 unsuccessful?
18 A. I am not 100 percent sure what's the
19 status of the rest.
20 Q. Okay.
21 A. If they have been approved or not.
22 Q. For the ADC study you believed to be

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1 unsuccessful, did you check the reason why they
2 were unsuccessful?
3 A. Why they haven't received an FDA
4 approval, no.
5 MR. QIU: Counsel, could you please
6 get a paper from the box. The paper's title
7 starts with "A Phase I Study of the Antibody
8 Drug Conjugate ASG-5ME..."
9 MR. SHU: Is there an exhibit number
10 to that?
11 MR. QIU: I believe not. We haven't
12 marked it, but it is likely at the end of the
13 folder, so...
14 MR. SHU: Fred, can you repeat the
15 title of the document?
16 MR. QIU: Sure, sure. It's -- the
17 very top of the document says "HSS Public
18 Access. Author manuscript." And the title
19 is -- starts with "A Phase I study of the
20 Antibody Drug Conjugate..."
21 MR. SHU: I have it. Thank you.
22 MR. QIU: Okay. Fair. You have two

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1 copies, one for counsel and one for the
2 witness, right?
3 MR. SHU: Are we going to mark this
4 as an exhibit?
5 MR. QIU: Yes. Let's mark this as
6 Exhibit 2035.
7 MR. SHU: 2035?
8 MR. QIU: Yes.
9 (Whereupon, Exhibit 2035, "A Phase I
10 Study of the Antibody Drug Conjugate ASG-5GM,
11 an SLC44A4-Targeting Antibody Carrying
12 Auristatin E, in Metastatic
13 Castration-Resistant Prostate Cancer" was
14 identified.)
15 BY MR. QIU:
16 Q. Please let me know when you're
17 ready, when you have downloaded this.
18 (Discussion held off the record.)
19 BY MR. QIU:
20 Q. Dr. Bournazos, do you have a copy of
21 the exhibit, 2035?
22 A. Yes, I do.

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1 Q. Okay. Can you please read for the
2 record the title of this exhibit?
3 A. The title is "A Phase I Study of the
4 Antibody Drug Conjugate ASG-5ME, an
5 SLC44A4-Targeting Antibody Carrying Auristatin E,
6 in Metastatic Castration-Resistant Prostate
7 Cancer."
8 I'm just saying it slowly for the
9 court reporter.
10 Q. Thank you.
11 A. Thank you.
12 Q. Is this article published in a
13 journal?
14 A. It seems like it, yes.
15 Q. What journal is it published in?
16 A. Invest New Drugs. And it was
17 published in 2019 October.
18 Q. Are you aware of this journal?
19 A. Maybe I've seen it, but it doesn't
20 come to my mind.
21 Q. Who are the authors of this article?
22 A. The authors are Deaglan McHugh,

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1 Mario Eisenberger, Elisabeth Heath, Justine
2 Bruce, Daniel C. Danila, Dana E. Rathkopf,
3 Jarrett Feldman, Susan F. Slovin, Banmeet Anand,
4 Rong Chu, Jacqueline Lackey, Leonard Reyno,
5 Emmanuel Antonarakis, Michael Morris.
6 Q. Have you ever seen this article
7 before?
8 A. No.
9 Q. Please go to Page 2 of Exhibit 2035.
10 Do you see the "Conclusions" section
11 that's slightly below the middle of this page?
12 A. Yes.
13 Q. Can you please read the
14 "Conclusions" section for the record?
15 MR. SHU: You know, Fred, I'm going
16 to object to this. This is a document that
17 you -- you're citing for this deposition. I
18 don't want the witness to just read. If you
19 want to direct the witness with respect to a
20 particular paragraph, you can read it in and
21 have him answer your questions based on that.
22 But we're not going to have the

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1 witness just read things from the exhibit
2 that you have.
3 MR. QIU: Counsel, I respectfully
4 disagree with you. I think it is common for
5 witnesses to read part of the record -- part
6 of the exhibits for the record. And the
7 paragraph I asked the witness to read is
8 just, I think, three to four lines.
9 MR. SHU: Well, I think if it's a
10 short conclusion, you can state what the
11 document states, right.
12 MR. QIU: Counsel, I don't --
13 MR. SHU: And this is -- this is a
14 document that the witness has said that he
15 hasn't even reviewed until just now, and you
16 want him to read into the record certain
17 statements?
18 MR. QIU: Counsel --
19 MR. SHU: I think that's improper.
20 MR. QIU: Counsel, do you want me to
21 speak, or are you going to keep interrupting
22 me?

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1 MR. SHU: I think -- I think if you
2 want to have certain statements on the record
3 from -- based upon this document, you can
4 make that on the record. But I think it's
5 unfair that you're going to have the witness
6 just read documents, read statements on a
7 paper that he's never seen before.
8 MR. QIU: Counsel, I respectfully
9 disagree with you. In the deposition of
10 Dr. Atanackovic, counsel for petitioner asked
11 him to read large passages throughout the
12 record. And if you want to see it, you can
13 see the deposition transcript of Dr.
14 Atanackovic.
15 MR. SHU: Then you should have made
16 the -- you should have made that objection.
17 All right. I wasn't at that deposition, but
18 I think it's improper for you to actually
19 have this particular witness just read
20 statements on a document that he's never seen
21 before.
22 MR. QIU: Counsel, okay. So you

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1 made your objection.
2 BY MR. QIU:
3 Q. So, and, Dr. Bournazos, you can now
4 answer my question. What does the "Conclusion"
5 section of this paper say?
6 A. So the conclusion says that further
7 development of this drug ASG-5ME is not being
8 pursued due to its narrow therapeutic index.
9 It's basically a Phase I study of
10 dose escalation of this ADC.
11 Q. Is the ASG-5ME ADC one of the ADCs
12 listed in your Table 1?
13 A. It is, yes.
14 Q. Were you aware that the development
15 of this ADC was terminated due to its narrow
16 therapeutic index when preparing your
17 declaration?
18 A. No, because I never searched for
19 that. The reason why the Table 1 exists, it's
20 only reflects the status of ADCs that have been
21 in clinical development before 2015. This paper
22 was published in 2019, so I wasn't focusing my

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1 research anywhere beyond 2015.

2 Q. Dr. Bournazos, please open

3 Exhibit 1200 and go to your table of exhibits in

4 that document.

5 A. Yes.

6 Q. Did you review each of the exhibits

7 listed in this table?

8 A. Yeah.

9 Q. For each of the exhibits you cited,

10 did you review the underlying raw data as opposed

11 to the published or reported results?

12 A. If it is -- can you define "raw

13 data," because most of the papers don't include

14 raw data?

15 Q. So when a paper does not include the

16 raw data, do you seek to find out the raw data

17 and review it to validate the results presented

18 in the paper?

19 A. For -- it depends on the type of the

20 step. So for clinical trials, the raw data like

21 absolute clear measurements from its patients --

22 most patients are not typically included.

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1 Now, if I -- there are certain cases

2 where, yes, I have to go very, very deep into the

3 paper and get into if I will have the raw data to

4 see if the conclusions make sense or not. And

5 this is common -- this is common scientific

6 practice.

7 Q. So which of the exhibits in your

8 table of exhibits did you go deep and validate

9 their data?

10 A. I don't recall.

11 Q. Did you present any of that

12 validation results in your declarations?

13 A. The validation is only for me to

14 understand the rigor of their presented data and

15 whether or not the conclusions make sense and

16 that it's scientifically sound. Obviously this

17 is the list of exhibits. I reviewed additional

18 evidence which I didn't think was necessary --

19 was not necessary to include.

20 Q. Do you have any notes about your

21 validation?

22 A. Not with me.

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1 Q. So you do not remember that you have

2 done validation of data for any of the exhibits

3 in the table; is that correct?

4 A. Yeah, it is correct. I don't

5 remember for which ones I went over more deeply

6 to see the data or not.

7 Q. Is it fair to say that for the

8 majority of the exhibits you cited, you relied on

9 the conclusions as reported by the authors rather

10 than independently verifying the conclusions?

11 MR. SHU: Objection to form.

12 A. So depends on in which context the

13 exhibits are cited. So, for example, Table 1, it

14 was only to present the factual information with

15 data covering -- with a disease have been in

16 clinical trials before 2015. So I didn't have to

17 figure out whether or not this is factually

18 correct or not because there is always an

19 associated record for that. So the exhibits are

20 supporting the fact this reporting has been in

21 clinical trials.

22 I went over the reported numbers.

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1 So this is the proper way of doing this. But

2 other exhibits that are more on the mechanism,

3 yes, I went over and read more carefully the

4 paper and went over the raw data for that.

5 Q. Can you give me an example of the

6 ones that you read more carefully and went over

7 the raw data for?

8 A. For example, on the status on ADC

9 activity, because it's what I'm more interested

10 about, so I went over to see the scientific rigor

11 of the experiments and the conclusions about

12 that. That's one example.

13 Q. Which exhibit is that?

14 A. So this is the exhibits that relate

15 to cetuximab, 10.

16 Q. Sorry, sir, which exhibit?

17 A. Exhibit 10.

18 Q. Exhibit 10?

19 A. Exhibits. Exhibits that are

20 discussed in Section 10, for example.

21 Q. Oh, in Section 10. Okay. Let me

22 see. So you're referring to Exhibits 1221 to

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1 1227?

2 MR. SHU: Objection. Lacks

3 foundation.

4 A. Yeah. Some of the -- I wanted to

5 see if the claims are valid or not.

6 BY MR. QIU:

7 Q. Please go to Paragraph 20 of your

8 declaration.

9 A. Yeah.

10 Q. Can you please read for the record

11 the first sentence of Paragraph 20?

12 A. Thus, clinical experience

13 demonstrates that the presence of target antigen

14 on normal tissue has not prevented its use in ADC

15 development.

16 Q. So that sentence you said to

17 Exhibit 1211 at Pages 5 to 7; is that correct?

18 A. Yeah.

19 MR. QIU: And, Counsel, could you

20 please retrieve Exhibit 1211 from the box?

21 (Whereupon, Exhibit 1211, Evolving

22 Strategies for Target Selection for

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1 Antibody-Drug Conjugates, was identified.)

2 BY MR. QIU:

3 Q. Doctor, do you have a copy of

4 Exhibit 1211 now?

5 A. Yes.

6 Q. Is that Exhibit 1211 that was cited

7 in your declaration?

8 A. Yes, it is.

9 Q. What in Pages 5 to 7 support your

10 conclusion that the clinical experiments

11 demonstrates the presence of target antigen on

12 normal tissue has not provided its use in ADC

13 development?

14 A. So let's go to Figure 3. So Figure

15 3 the target is protein expression of clinical

16 ADC targets. So there you can actually see

17 several targets that have been pursued as ADCs --

18 targets for ADC. Among them you can see EGFR.

19 You can also see other targets for example on the

20 last side from the last -- it's called ERBB2.

21 And it covers the expansion of EGFR in that case

22 and other targets that have been in clinical

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1 trials or used ERBB2 is one of them. It codes

2 for HER2. It's the target for Trastuzumab.

3 So you can see from this figure, for

4 example, that seven of these targets do have

5 expression on other tissue types. So this is

6 supporting the malignancies in the Figure 1.

7 We're using your method for your previous

8 patent -- patent owner response. I just compared

9 five versus ADC targets expression.

10 Q. What does the red color in this

11 figure show?

12 A. Higher expression. So the more I

13 red is, the higher expression. White is less

14 expression. And basically this figure supports

15 this conclusion that I have in Paragraph 20

16 clinical experience demonstrates the expressions

17 of target antigen or normal tissue has not

18 prevented its use in ADC development. Because

19 several ADCs against these targets have been in

20 clinical development or used.

21 Q. So the more -- let me strike that

22 question.

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1 BY MR. QIU:

2 Q. Did you verify the data indicating

3 the level of expression that's represented by

4 Figure 3?

5 A. You can verify. I haven't. So the

6 way come are the Human Proteome Map. This is not

7 a primary paper. So this is a review. So the

8 data represent a visual representation already

9 established and well-validated database.

10 Q. Did you independently verify the

11 data in the database?

12 A. There was no need to do that because

13 they support my own analysis that I did and it's

14 in Figure 1.

15 Q. So is it your opinion that when a

16 figure supports your analysis, you do not need to

17 independently verify it?

18 MR. SHU: Objection.

19 Mischaracterizes the testimony.

20 A. Depends on the context. So the

21 paper of my conclusion here, it concludes the

22 section of this. So basically what we see from

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1 Table 1 is that there are antibodies that work 2 against so the target of these ADCs is expressed 3 in normal tissue as well. That's a fact. I 4 don't need to go deep to see the data. 5 I also repeated the same analysis 6 that your expert has performed and expression of 7 the same targets and compare them against the 8 DFI. And I also included this paper which states 9 essentially the same. So it supports the 10 argument. So now we have three separate evidence 11 to support this conclusion. The mere fact that 12 you have antibodies in clinical development, in 13 clinical trials before 2015, the expression 14 verified using your exact same approach. The 15 exact approach that your expert has used and ADC 16 that has summarizes the expression of all of 17 these targets. 18 Q. Dr. Bournazos, you can put away 19 Exhibit 20 -- 1211. 20 Do you agree that a native antibody 21 and an antibody drug conjugate are structurally 22 different?	1 payload is not available for a naked antibody? 2 A. Yes, so the part of toxicity that 3 comes from the payload, it's payload specific. 4 Q. Given the different mechanisms, you 5 would agree that the toxicity profile of a naked 6 antibody and the toxicity profile of an ADC using 7 the same antibody can be different, correct? 8 MR. SHU: Objection to form. Lacks 9 foundation. 10 A. This is not a black-and-white 11 question. So use only the toxicity profile of an 12 ADC that comes from the same antibody we often 13 have a overlapping toxicity, so some toxicity 14 will be there property of the drug itself and 15 some toxicity would be because this drug is 16 conjugated to this antibody. 17 Q. Based on the nonoverlapping part of 18 the toxicity mechanism, you would agree that the 19 toxicity profile of a naked antibody and a 20 toxicity profile of an ADC using the same 21 antibody can be different, correct? 22 MR. SHU: Objection to form. Asked
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1 A. Structurally different? They have 2 some structural similarities, but they are not 3 100 percent identical. 4 Q. So you would agree that a naked 5 antibody and an antibody drug conjugate are 6 structurally different, correct? 7 MR. SHU: Objection -- objection. 8 Asked and answered. Objection to form. 9 A. They have some similarities, they 10 both have the same antibody structure, antibody 11 drug conjugate. It's the same thing in antibody 12 that's conjugated with -- so structurally the 13 antibody part is the same. But it additionally 14 has the drug that's conjugated; hence, the name 15 antibody drug conjugate. 16 Q. Do you agree that the toxicity of an 17 ADC can be driven by the release of the cytotoxic 18 payload? 19 A. It can -- the part release the toxic 20 payload the toxicity, yes, but not entirely. 21 Q. Do you agree this mechanism of 22 toxicity driven by the release of the cytotoxic	1 and answered. 2 A. It might be different. But not 3 substantive -- I don't know how to say. It might 4 be different but you're always going to have some 5 overlapping toxicity so same toxicity profile 6 that a naked antibody might have. You might see 7 the same toxicity or some of the features in the 8 ADC as well. And some can be related exclusively 9 to the payload. 10 Q. Let me focus the question on the 11 toxicity mechanism that does not overlap, for 12 example, the toxicity from the cytotoxic payload. 13 And does that toxicity mechanism typically cause 14 differences between the toxicity profile of an 15 ADC including an antibody and the toxicity 16 profile of the antibody as a naked antibody? 17 MR. SHU: Objection to form. Asked 18 and answered. 19 A. Can you repeat the question? 20 BY MR. QIU: 21 Q. Sure. 22 So, Doctor, I want to focus on the

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1 mechanism of toxicity that is based on the
2 cytotoxic payload?
3 A. Yeah, so the nonantibody driven,
4 let's call it. That's what you mean?
5 Q. That's correct. So it's nonantibody
6 driven, right? So, would the nonantibody driven
7 toxicity mechanism cause the toxicity profile of
8 an ADC with an antibody to be different from the
9 toxicity profile of the naked antibody?
10 A. So, for example, MMA is a
11 chemotherapy drug. And sometimes it can cause
12 toxicities that are common even if no MMA lets
13 say containing ADCs. So and we know that this is
14 MMA related because you see the same pattern in
15 all ADCs that carry the same payload.
16 And one example can be leukopenia,
17 so low white blood cells. Other things that can
18 also happen -- and it's quite common in clinical
19 use is in a clinical experience is more dominant
20 because it's the same toxicity that you see from
21 the compound, from the cytotoxic compound.
22 Because let's not forget these are very important

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1 chemotherapy drugs.
2 Q. Is it your opinion that the fact
3 that a naked antibody has an acceptable safety
4 profile guarantees that ADC made from that
5 antibody will also have an acceptable safety
6 profile, correct?
7 MR. SHU: Objection. Lacks
8 foundation.
9 A. I would very big -- I would be very
10 cautious to use the term "guarantees." I would
11 rephrase your statement and say I do agree that
12 starting with an antibody that has acceptable
13 toxicity is a less risky strategy for developing
14 an ADC.
15 BY MR. QIU:
16 Q. So if I understand your answer
17 right, the fact that the naked antibody has an
18 acceptable safety profile does not guarantee that
19 an ADC made from that antibody will also have an
20 acceptable safety profile?
21 A. It does not guarantee because
22 "guarantee" is a very strong word. I don't want

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1 to use it because there might be cases out there
2 where a naked antibody had a very good toxicity
3 profile, but when developed as an ADC, it might
4 not have a good toxicity profile. I don't want
5 to say "guarantee," but it is a very good signal.
6 And from a development standpoint,
7 you start with something that it is -- has a good
8 safety signal before you want to develop this
9 farther as an ADC.
10 MR. QIU: Also can you please take
11 out Exhibit 1008 from the box.
12 (Whereupon, Exhibit 1008, Certified
13 English translation of Chinese Patent
14 Application Publication Number CN 103772504,
15 was identified.)
16 MR. SHU: Can you repeat the number
17 again?
18 MR. QIU: Yes, 1008.
19 MR. SHU: 1008. Okay.
20 BY MR. QIU:
21 Q. Dr. Bournazos, can you please affirm
22 that this is Exhibit 1008 that is cited in in

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1 your declarations?
2 A. Yeah, yes, so this is the
3 translation of US patent.
4 Q. Okay. So this is the Liu reference.
5 A. Yeah.
6 Q. And please go to Paragraphs 154 of
7 the Liu reference.
8 A. Yes, I'm here.
9 Q. Can you please review Paragraphs 154
10 until Paragraph 160.
11 A. Okay.
12 Can you tell me which paragraph?
13 Q. Yeah, and yeah, so the paragraphs
14 are 154 until 160.
15 A. Yes.
16 Q. What do these paragraphs talk about?
17 MR. SHU: Objection to form.
18 A. So one, Paragraph 154 talks about
19 the measurement of the in vitro anti-tumor
20 activity of BA03 using two different methods or
21 different printouts to measure additional
22 activity. One is ADCC activity and the other one

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1 is in vitro growth inhibition.
2 The results of these are presented
3 on Paragraph 1 -- on Table 4. That's Paragraph
4 155, 156, 158. That's the footnote for the
5 table.
6 159 is the titled of Example 10.
7 And 160 is description of an in vivo
8 experiment using Balb/c nude mice challenged with
9 A431 cells.
10 And the results of the 160 paragraph
11 are presented in Figure 6.
12 Q. Do these paragraphs discuss the BA03
13 antibodies internalization properties?
14 A. Not internalization.
15 MR. QIU: Okay. Counsel, I pass the
16 witness.
17 MR. SHU: I'm sorry?
18 MR. QIU: That's all our questions.
19 So we pass the witness.
20 MR. SHU: Okay. We have no
21 questions. So okay.
22 Are we concluded? We're done.

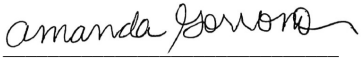
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1 MR. QIU: Yeah, I think so in that
2 case.
3 Thank you very much, Dr. Bournazos,
4 for your time.
5 Thank you, Counsel, for that box of
6 documents.
7 MR. SHU: Okay. Thank you.
8 Hold on. Witness reserves the right
9 to review and sign.
10 (Whereupon, a request for Read and
11 sign, was made.)
12 THE COURT REPORTER: Do you have any
13 confidentiality markings or anything?
14 MR. QIU: I don't believe so.
15 MR. SHU: I don't believe so.
16 THE COURT REPORTER: And would you
17 like a copy of the transcript, sir?
18 MR. SHU: Yes.
19 THE VIDEOGRAPHER: Do you guys want
20 this on the record, or can this be taken out?
21 MR. QIU: They can be taken off the
22 record.

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1 THE VIDEOGRAPHER: The time is
2 12:08 p.m. We're concluding today's video
3 deposition. We're now going off the record.
4 MR. SHU: For us, we need a next-day
5 delivery of the transcript.
6 THE COURT REPORTER: Do you want the
7 next-day transcript too, sir?
8 MR. SHU: Sure. Next-day final and
9 rough.
10 (Time noted: 12:09 p.m.)
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1 CERTIFICATE OF SHORTHAND REPORTER-NOTARY PUBLIC
2 I, Amanda Gorrone, the officer
3 before whom the foregoing deposition was
4 taken, do hereby certify that the foregoing
5 transcript is a true and correct record of
6 the testimony given; that said testimony was
7 taken by me stenographically and thereafter
8 reduced to typewriting under my direction;
9 and that I am neither counsel for, related
10 to, nor employed by any of the parties to
11 this case and have no interest, financial or
12 otherwise, in its outcome.
13 IN WITNESS WHEREOF, I have hereunto
14 set my hand this 9th day of June, 2026.
15
16
17 
18
19 AMANDA GORRONO, CLR
20 CLR NO: 052005 - 01
21 Notary Public in and for
22 The State of New York
County of Suffolk
My Commission No. 01G06041701
Expires: 01/07/2027

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1 Case: CSPC Megalith Biopharmaceutical Co., LTD. vs LEPU Biopharma, Co., LTD. 2 Witness Name: Stylianos Bournazos, Ph.D. 3 Deposition Date: 06/09/2026 4 5 6 Please be advised that the transcript in the above 7 referenced matter is now complete and ready for signature. 8 The deponent may come to this office to sign the transcript, 9 a copy may be purchased for the witness to review and sign, 10 or the deponent and/or counsel may waive the option of 11 signing. Please advise us of the option selected. 12 Please forward the errata sheet and the original signed 13 signature page to counsel noticing the deposition, noting the 14 applicable time period allowed for such by the governing 15 Rules of Procedure. If you have any questions, please do 16 not hesitate to call our office at (202)-232-0646. 17 18 Sincerely, 19 Digital Evidence Group 20 Copyright 2026 Digital Evidence Group 21 Copying is forbidden, including electronically, absent 22 express written consent. Page 42	1 Errata Sheet 2 NAME OF CASE: CSPC Megalith Biopharmaceutical Co., LTD. vs LEPU Biopharma, Co., LTD. 3 DATE OF DEPOSITION: 06/09/2026 4 NAME OF WITNESS: Stylianos Bournazos, Ph.D. 5 Reason Codes: 1. To clarify the record. 6 2. To conform to the facts. 7 3. To correct transcription errors. 8 Page ____ Line ____ Reason ____ 9 From _____ to _____ 10 Page ____ Line ____ Reason ____ 11 From _____ to _____ 12 Page ____ Line ____ Reason ____ 13 From _____ to _____ 14 Page ____ Line ____ Reason ____ 15 From _____ to _____ 16 Page ____ Line ____ Reason ____ 17 From _____ to _____ 18 Page ____ Line ____ Reason ____ 19 From _____ to _____ 20 21 _____ 22 Stylianos Bournazos, Ph.D. Page 44
1 Digital Evidence Group, L.L.C. 1730 M Street, NW, Suite 812 2 Washington, D.C. 20036 (202) 232-0646 3 4 SIGNATURE PAGE 5 Case: CSPC Megalith Biopharmaceutical Co., LTD. vs LEPU Biopharma, Co., LTD. 6 Witness Name: Stylianos Bournazos, Ph.D. 7 Deposition Date: 06/09/2026 8 I do hereby acknowledge that I have read 9 and examined the foregoing pages 10 of the transcript of my deposition and that: 11 (Check appropriate box): 12 () The same is a true, correct and 13 complete transcription of the answers given by 14 me to the questions therein recorded. 15 () Except for the changes noted in the 16 attached Errata Sheet, the same is a true, 17 correct and complete transcription of the 18 answers given by me to the questions therein 19 recorded. 20 _____ DATE WITNESS SIGNATURE 21 _____ DATE NOTARY 22 Page 43	

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