

PRESS RELEASE – REGULATED INFORMATION

Information on the total number of voting rights and shares

Mont-Saint-Guibert, Belgium, February 1st, 2023, 7am CEST – BIOSENIC (Euronext Brussels and Paris: BIOS), the innovative company addressing unmet medical needs in in the areas of innate immunity, inflammation and organ/function repair, today announces an increase in the total number of voting rights and shares as a result of the issuance of new shares following the conversion of convertible bonds (CBs). The following information is published in accordance with Article 15 of the Belgian Law of 2 May 2007 on the publication of major shareholdings in issuers whose shares are admitted to trading on regulated market.

Total amount of share capital on 31 December 2022	EUR 33,600,669
Total number of shares with voting rights on 31 December 2022	121,897,746
Total number of shares admitted to listing on 31 December 2022	31,229,152 (1)
Total number of new shares issued between 01 January 2023 and 31 January 2023 following the conversion of convertible bonds	2,111,111

Total amount of share capital on 31 January 2023	EUR 33,800,669
Total number of shares with voting rights on 31 January 2023	124,008,857
Total number of voting rights (denominator) on 31 January 2023	124,008,857
Total number of shares admitted to listing on 31 January 2023	33,340,263 ⁽¹⁾
Total number of attributed warrants	1,197,554
Total number of convertible bonds outstanding	816
Total number of remaining CB commitments	50
Total number of shares with voting rights that can be issued following the exercise of the attributed warrants and CB commitments, and the conversion of the convertible bonds	31,610,624 ⁽²⁾

(1)

The new 90,668,594 shares issued to Medsenic shareholders on 24 October 2022 are not yet listed.

(2)

1,197,554 shares could be issued in case all 1,197,554 attributed warrants were exercised.

• 285,714 shares could be issued in case all 800 convertible bonds outstanding, issued in the private placement on 6 May 2020, were converted into shares based on the predetermined conversion price of EUR 7.00.

 30,127,356 shares could be issued in case all 50 CB commitments remaining and all 16 convertible bonds outstanding of the ABO CB program signed on 30 May 2022 were exercised and converted into shares based on the conversion price of EUR 0.1095 (95% of the Volume-Weighted-Averaged-Price of BioSenics' shares on 30 January 2023).

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About BioSenic

BioSenic is a leading biotech company specializing in the development of clinical assets issued from: (i), the allogeneic cell therapy platform ALLOB and (ii) the Arsenic TriOxide (ATO) platform. Key target indications for the platforms include Graft versus Host Disease (GvHD), Systemic lupus erythematosus (SLE), Systemic Sclerosis (SSc) and high-risk tibial fractures.

Following the merger in October 2022, BioSenic combines the strategic positionings and strengths of Medsenic and Bone Therapeutics. The merger also enables Biosenic to add to its innovative cell therapy platform and strong IP for tissue repair protection with an entirely new arsenal of various anti-inflammatory and anti-autoimmune formulations using the immunomodulatory properties of ATO/OATO.

BioSenic is based in the Louvain-la-Neuve Science Park in Mont-Saint-Guibert, Belgium. Further information is available at http://www.biosenic.com.

About BioSenic technology platforms

BioSenic's technology is based on:

- 1) The allogeneic cell and gene therapy platform, developed by Bone Therapeutics with differentiated bone marrow sourced Mesenchymal Stromal Cells (MSCs) that can be stored at the point of use in hospitals. Its current investigational medicinal product, ALLOB, represents a unique, proprietary approach to organ repair and specifically to bone regeneration, by turning undifferentiated stromal cells from healthy donors into bone-forming cells on the site of injury. These cells are produced via a proprietary BioSenic scalable manufacturing process. Following the CTA approval by regulatory authorities in Europe, the Company has initiated patient recruitment for the Phase IIb clinical trial with ALLOB in patients with difficult tibial fractures, using its optimized production process. ALLOB continues to be evaluated for other orthopedic indications including spinal fusion, osteotomy, maxillofacial and dental, and should be of value in new indications when cells will be further adapted or transformed with additional targeting properties.
- 2) The Arsenic TriOxide (ATO) platform developed by Medsenic. The immunomodulatory properties of ATO have demonstrated a double basic effect on cells of the immune system. The first effect is the increase of the cell oxidative stress in activated B, T or other cells of the innate/adaptative immune system to the point they will enter a cell death program (apoptosis) and be eliminated. The second effect is potent immunomodulatory properties on several pro-inflammatory cytokines involved in inflammatory or autoimmune cell pathways. One direct application is its use in oncoimmunology to treat GvHD (Graft-versus-Host Disease) in its chronic, established stage. GvHD is one of the most common and clinically significant complications affecting long-term survival of allogeneic hematopoietic stem cell transplantation (allo-SCT). GvHD is primarily mediated by the transplanted immune system that can lead to severe multiorgan damage. Medsenic had been successful in a Phase II trial with its intravenous formulation, allowing arsenic trioxide to be granted an orphan drug designation status by FDA and EMA and is heading towards an international Phase III confirmatory study, with a new, IP protected, oral (OATO) formulation. Moderate to Severe forms of Systemic Lupus erythematosus (SLE)° is another selected target, using the same oral formulation. ATO has shown

good safety and significant clinical efficacy on several affected organs (skin, mucosae and the gastro-intestinal tract) in a phase IIa study. Systemic Sclerosis is, in addition, part of the clinical pipeline of BioSenic. Preclinical studies on pertinent animal models are positive. This gives good grounds to launch a Phase II clinical protocol for this serious disease that badly affects skin, lungs or vascularization, and with no actual current effective treatment.

For further information, please contact:

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