

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

Part I Reporting issuer

1 Issuer's name Emergent BioSolutions Inc.		2 Issuer's employer identification number (EIN) 14-1902018	
3 Name of contact for additional information Robert Burrows, VP, Investor Relations	4 Telephone No. of contact 240-631-3280	5 Email address of contact burrowsr@ebsi.com	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact 400 Professional Drive, Suite 400		7 City, town, or post office, state, and Zip code of contact Gaithersburg, Maryland 20879	
8 Date of action August 1, 2016	9 Classification and description common stock - spin off		
10 CUSIP number 29089Q105	11 Serial number(s)	12 Ticker symbol EBS	13 Account number(s)

Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ See attachment

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ▶ See attachment

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ See attachment

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ See attachment

18 Can any resulting loss be recognized? ▶ See attachment

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ See attachment

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature ▶ Michael R. Darling Date ▶ 12 Aug. 2016
Print your name ▶ Michael R. Darling Title ▶ SVP, Finance & Administration

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶		Phone no.	
Firm's address ▶				