FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Edmondson Frazor Titus III</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Zai Lab Ltd [ ZLAB ]										all app		ng Per	10% Ov	vner
(Last)	(Fi LAB LIM	,	Middl	e)		3. Date of Earliest Transaction (Month/Day/Year) 05/14/2024								X	Officer (give title below)  Chief Legal (			Other (s below) Officer	specify
314 MAIN STREET, 4TH FLOOR, SUITE 100				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) CAMBRIDGE MA 02142				2										X	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	1 - 1	Non-Deriva	tive S	Secui	rities	Ac	quir	ed, Di	sposed o	f, or	Benefici	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				Execution ear) if any		on Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au			nd 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v /	Amount	(A) or (D)	Price		Transa	Reported Transaction(s) (Instr. 3 and 4)		tr. 4)	(Instr. 4)
American Depositary Shares <sup>(1)</sup> 05/14/202				4		5		S <sup>(2)</sup>		10,000	D	\$21.334	16 <sup>(3)</sup>	16,408			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	erivative   Conversion   Date   Execution Date, curity   or Exercise   (Month/Day/Year)   if any					ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			cle and unt of urities erlying vative urity (Instr. d 4)			9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indirec (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)
					Code	ode V (A) (D)		Date Exercisab		Expiration Date	Title	Number of							

## **Explanation of Responses:**

- 1. Each American Depositary Share ("ADS") represents ten Ordinary Shares of the issuer. Our ADSs and Ordinary Shares are fully fungible. For purposes of this Form 4, we are reporting this in terms of
- 2. The transaction reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on December 13, 2023.
- 3. Reflects a weighted average sale price of \$21.3346 per share, at prices ranging from \$21.025 to \$21.625 per share. The Reporting Person will provide, upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate price.

/s/ Bruce Blefeld, Attorney-in-05/16/2024 Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.