OUTPERFORM

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Reason for report: **EARNINGS**



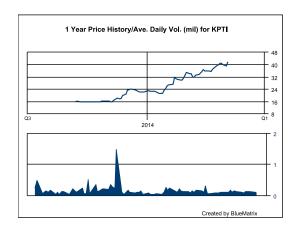
KARYOPHARM THERAPEUTICS, INC.

4Q13 Recap - Selinexor Development Broadening; Increasing Price Target

- Bottom Line: KPTI reported 4Q13 results today and provided pipeline updates, including addl. details on the first two registration trials in hematological cancers, as well as 2014 plans for Phase II studies in gynecological cancers (1), squamous cell cancers (2) and hormone and/ or chemotherapy refractory metastatic prostate cancer (3), glioblastoma (4), as well as Richter's syndrome (5). KPTI expects to end 2014 with \$100M cash. Reiterate OP and increasing our PT to \$63 from \$26.
- Registration trials initiating in 2014 in AML and DLBCL; plans in MM evolving. Trials in AML and DLBCL will enroll pts slightly earlier in disease progression than we had initially expected which translates into a longer Selinexor treatment duration vs. our model. The AML trial will randomize 150 pts in first relapse 2:1 to Selinexor or physicians' choice including HMAs. The trial is powered at 80% to show an OS of 5.4 vs. 3.0 months (HR=0.56). The second pivotal trial will randomize 300 DLBCL pts 2:1 to Selinexor vs. single agent physician's choice of chemotherapy after progression from 2+ lines of prior therapy. The trial is powered at 80% to show a PFS of 6.4 vs. 4.0 months respectively Selinexor and control arms. We see upside in Multiple Myeloma (MM), as KPTI's evolving plans for registration point to an earlier line of therapy in combination with an approved agent (e.g. Revlimid, Kyprolis).
- · Addl. Phase II studies planned in 2014 in prostate cancer and glioblastoma broaden Selinexor dev't. Given the Phase II go-decision in prostate cancer and glioblastoma, we believe respective Phase I dose-expansion data to be presented at ASCO '14 should be positive. Two studies are planned in prostate cancer, a company sponsored trial will in post-chemotherapy CRPC and an investigator-sponsored trial in chemotherapy-naive post-abiraterone pts. A Phase II trial will also be starting in relapsed glioblastoma as the mgmt noted that ~70% of Selinexor is able to cross the blood-brain barrier. A single arm registrational Phase II trial in 50 Richter's syndrome patients is also planned to commence with an ORR endpoint, based on promising responses seen in Phase I. In-line with our expectation a Phase II trial in 60 gynecological malignancy patients will initiate next month. A singlearm Phase II trial in advanced head and neck and lung cancer is also planned with an enrollment of 44 patients. We believe KPTI is on track to identify target markets and path to approval in solid tumor indications by
- Our increased \$63 price target is a result of the following changes to our model which was in our view conservative. (1) Increase of assumed Selinexor treatment duration in hematologic indications AML, DLBCL, and MM, (2) inclusion of Richter's Syndrome (20% probability-weighted) and (3) solid tumor indications (10% probability-weighted) in our Selinexor

| S&P 600 Health Care Index: | 1,323.06 |
|------------------------------|------------------------|
| Price: | \$41.67 |
| Price Target: | \$63.00 from \$26.00 |
| Methodology: | DCF, 12% discount rate |
| 52 Week High: | \$42.19 |
| 52 Week Low: | \$15.50 |
| Shares Outstanding (mil): | 29.7 |
| Market Capitalization (mil): | \$1,237.6 |
| Book Value/Share: | \$5.34 |
| Cash Per Share: | \$5.29 |
| Dividend (ann): | NA |
| Est LT EPS Growth: | NA |
| | |

General: shares outstanding and cash/share account for IPO in 4Q13



| medelyr | 1Q | 2Q | 3Q | 4Q | FY Rev | 1Q | 2Q | 3Q | 4Q | FY EPS | |
|-------------|-----|-----|-----|-----|--------|---------|---------|---------|---------|---------|----|
| 2013A | | | 0.0 | 0.0 | 0.4 | | | (3.66) | (0.71) | (5.59) | NM |
| 2014E - New | 0.3 | 0.3 | 0.3 | 0.3 | 1.0 | (0.46) | (0.50) | (0.53) | (0.56) | (2.05) | NM |
| 2014E - Old | | | | | 1.0 | | | | | (1.33) | NM |
| 2015E | | | | | 1.0 | | | | | (2.49) | NM |

Source: Company Information and Leerink Partners LLC Research

Revenues in \$MM.

GAAP EPS.



INVESTMENT THESIS

Karyopharm Therapeutics (KPTI) is a biotech company focused on developing small molecule cancer drugs called "Selective Inhibitors of Nuclear Export" (SINE) which based on our checks with MEDACorp KOLs are an exciting new class of oral drugs. The company's clinical stage product Selinexor (KPT-330) is a orally bioavailable small molecule inhibitor of XPO1/CRM1 and was discovered by KPTI which has world-wide rights to the product. Selinexor is a first-inclass agent with a new mechanism of action: XPO1 mediates nuclear export of tumor suppressor proteins which then cannot promote cell death (apoptosis) in cancer cells anymore. Inhibition of XPO1 with KPT-330 restores tumor-suppressor activity in the nucleus which drives cancer cells into apoptosis. Selinexor has completed Phase I dose-escalation trials and based on our due diligence, we believe the drug is active in a broad range of cancers. We believe driven by positive data readouts KPTI shares will appreciate in value as the probability of success for Selinexor increases in currently tested indications or as activity in new indications becomes evident. We also believe KPTI could be a takeover target.

VALUATION

Our price target for KPTI is \$63/share. Our valuation is based on a discounted cash flow (DCF) analysis. We apply a 12% discount rate to 35% probability of success (POS) weighted Selinexor cash flows derived from three relapsed/refractory hematological cancer indications (AML, DLBCL, and MM), 20% POS-weighted sales in Richter's syndrome and 10% POS-weighted sales in solid tumor indications. Our valuation uses a terminal value derived by applying a 6x multiple to 2025E Selinexor revenue, discounted back by 11 periods. The 6x revenue multiple is in line with mid-cap biotech industry average. Based on our DCF analysis, we attribute \$60/share to Selinexor and the remainder to expected cash in one year.

RISKS TO VALUATION

Early stage biotech companies such as KPTI face significant clinical and regulatory development risk, as well as commercial risks. KPTI also faces execution risk and financial risk. We estimate that KPTI's current cash will be sufficient to fund into early 2016, and the company may have additional financing needs before turning cash flow positive. The vast majority of our KPTI valuation is based on Selinexor, the company's only clinical stage product candidate, so potential setbacks due to possible safety and/or efficacy related issues of Selinexor could have a significant impact to our valuation.

| Event | Indication | Timing (old) |
|---|---|--------------|
| Phase I program | | |
| Phase I dose expansion data | Heme Arm 1 (MM, WM, DLBCL) | mid-14 |
| Phase I dose expansion data | Heme Arm 2 (AML) | mid-14 |
| Phase I dose expansion data | Solid tumors | mid-14 |
| Phase I dose expansion data | Heme Arm 3 (TCL) | 2014 |
| Phase I dose expansion data | Heme Arm 4, 5 (ALL, CML) | 2014 |
| Phase I data | Food effect study in soft tissue/bone sacromas | mid-14 |
| Hematological cancers | | |
| Initiation of pivotal Phase II/III (single agent) | elderly r/r AML | 2Q14 |
| Initiation of pivotal Phase II/III (single agent) | r/rDLBCL | 3Q14 |
| Initiation of pivotal Phase II | Richter's syndrome | 1H14 |
| Pivotal Phase II/III data | elderly r/r AML | 2Q16 |
| Pivotal Phase II/III data | DLBCL or MM | 3Q16 |
| Pivotal Phase II data | Richter's syndrome | 1H16 |
| Solid tumors | | |
| Initiate Phase II | single agent solid tumor (gynecological) | 1Q14 |
| Initiate Phase II | single agent solid tumor (squamous cell cancers [lung, head and neck, esophageal) | 1Q14 |
| Initiate Phase II | single agent recurrent glioblastoma | 1H14 |
| Initiate Phase II | single agent CRPC | 2014 |
| Phase II data | single agent CRPC | 2H15 |
| Phase II data | single agent recurrent glioblastoma | 2H15 |
| Phase II data | single agent solid tumor (gynecological) | 2H15 |
| Phase II data | single agent solid tumor (squamous cell cancers [lung, head and neck, esophageal) | 2H15 |

Source: Company filings and Leerink Partners estimates

| KPTI P&L (in \$MM) | 2011 | 2012 | 1H13 | 3Q13 | 4Q13A | 2013A | 1Q14E | 2Q14E | 3Q14E | 4Q14E | 2014E | 2015E |
|--------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Contract and grant revenue | 0.2 | 0.6 | 0.4 | - | 0.0 | 0.4 | 0.3 | 0.3 | 0.3 | 0.3 | 1.0 | 1.0 |
| Selinexor US sales (p/w) | - | - | - | - | - | - | - | - | - | - | - | - |
| Selinexor EU royalty (p/w) | - | - | - | - | - | - | - | - | - | - | - | - |
| Total revenue | 0.2 | 0.6 | 0.4 | - | 0.0 | 0.4 | 0.3 | 0.3 | 0.3 | 0.3 | 1.0 | 1.0 |
| | | | | | | | | | | | | |
| cogs | - | - | - | - | - | - | - | - | - | - | - | - |
| R&D expense | 8.6 | 14.1 | 11.0 | 7.7 | 9.7 | 28.5 | 11.0 | 12.0 | 13.0 | 14.0 | 50.0 | 60.0 |
| SG&A expense | 1.8 | 2.4 | 1.8 | 1.6 | 2.5 | 5.9 | 3.0 | 3.0 | 3.0 | 3.0 | 12.0 | 15.0 |
| Total operating expenses | 10.5 | 16.5 | 12.8 | 9.3 | 12.2 | 34.3 | 14.0 | 15.0 | 16.0 | 17.0 | 62.0 | 75.0 |
| Operating income (loss) | (10.3) | (15.9) | (12.5) | (9.3) | (12.1) | (34.0) | (13.8) | (14.8) | (15.8) | (16.8) | (61.0) | (74.0) |
| Total other income (expense) | - | 0.0 | 0.0 | - | 0.0 | 0.0 | - | - | - | - | - | - |
| Income Tax expense | - | - | - | - | - | - | - | - | - | - | - | - |
| Net income (loss) | (10.3) | (15.9) | (12.5) | (9.3) | (12.1) | (33.9) | (13.8) | (14.8) | (15.8) | (16.8) | (61.0) | (74.0) |
| Common shares outstanding | 1.1 | 1.8 | 2.3 | 2.5 | 17.2 | 6.1 | 29.7 | 29.7 | 29.7 | 29.7 | 29.7 | 29.7 |
| EPS | (9.34) | (8.95) | (5.39) | (3.66) | (0.71) | (5.59) | (0.46) | (0.50) | (0.53) | (0.56) | (2.05) | (2.49) |
| KPTI BS & CFS (in \$MM) | 2011 | 2012 | 1H13 | 3Q13 | 4Q13E | 2013E | 1Q14E | 2Q14E | 3Q14E | 4Q14E | 2014E | 2015E |
| Cash & equivalents | 6.5 | 0.4 | 17.7 | 52.9 | 156.0 | 156.0 | 143.3 | 129.8 | 115.3 | 99.9 | 99.9 | 31.9 |
| Debt | - | - | - | - | - | - | - | - | - | - | - | - |
| | | | | | | | | | | | | |
| Change in Cash | 3.1 | (6.1) | 17.3 | 35.3 | 102.0 | 154.5 | (12.6) | (13.6) | (14.5) | (15.4) | (56.0) | (68.0) |
| Cash from operations | (8.5) | (15.5) | (11.3) | (8.9) | (11.7) | (31.9) | (12.6) | (13.6) | (14.5) | (15.4) | (56.0) | (68.0) |
| Net income (loss) | (10.3) | (15.9) | (12.5) | (9.3) | (12.1) | (33.9) | (13.8) | (14.8) | (15.8) | (16.8) | (61.0) | (74.0) |
| Share based comp | 0.0 | 0.7 | 0.4 | 1.3 | 0.4 | 2.2 | 1.1 | 1.2 | 1.3 | 1.4 | 5.0 | 6.0 |
| D&A | 0.1 | 0.1 | 0.1 | 0.0 | 0.1 | 0.2 | - | - | - | - | - | - |
| Other (Change in WC) | 1.7 | (0.4) | 0.7 | (0.9) | - | (0.3) | - | - | - | - | - | - |
| Cash from investing | (0.4) | (0.1) | - | (0.0) | - | (0.0) | - | - | - | - | - | - |
| CapEx | (0.4) | (0.1) | - | (0.0) | - | (0.0) | - | - | - | - | - | - |
| Acquisitions | - | - | - | - | - | - | - | - | - | - | - | - |
| Other | - | - | - | - | - | - | - | - | - | - | - | - |
| Cash from financing | 12.0 | 9.5 | 28.6 | 44.2 | 113.7 | 186.5 | - | - | - | - | - | - |
| Equity issue (buyback) | 12.0 | 9.5 | 28.6 | 44.2 | 113.7 | 186.5 | - | - | - | - | - | - |
| Debt issue (principal payment) | - | - | - | - | - | - | - | - | - | - | - | - |
| Other | - | - | - | - | - | - | - | - | - | - | - | - |

Source: SEC Filings and Leerink Partners Estimates

KPTI Valuation, \$MM except per share

| Year | 2014E | 2015E | 2016E | 2017E | 2018E | 2019E | 2020E | 2021E | 2022E | 2023E | 2024E | 2025E |
|------------|--------|--------|--------|--------|--------|-------|-------|-------|-------|-------|-------|-------|
| P/W FCF | (61.0) | (74.0) | (86.0) | (81.2) | (51.5) | 39.3 | 212.3 | 328.7 | 317.3 | 336.5 | 343.5 | 350.6 |
| Periods | - | 1.00 | 2.00 | 3.00 | 4.00 | 5.00 | 6.00 | 7.00 | 8.00 | 9.00 | 10.00 | 11.00 |
| DR | 12% | 12% | 12% | 12% | 12% | 12% | 12% | 12% | 12% | 12% | 12% | 12% |
| PWFCF | (61.0) | (66.1) | (68.6) | (57.8) | (32.8) | 22.3 | 107.5 | 148.7 | 128.1 | 121.4 | 110.6 | 100.8 |
| NPV | 1,783 | | | | | | | | | | | |
| NPV/sh | 60 | | | | | | | | | | | |
| Cash/share | 3 | | | | | | | | | | | |
| Total | 63 | | | | | | | | | | | |

| POS AML | 35% |
|-------------------------|------|
| POS DLBCL | 35% |
| POS MM | 35% |
| POS Richter's syndrome | 20% |
| Solid tumors | 10% |
| Discount Rate | 12% |
| Terminal Year | 2025 |
| Terminal sales multiple | 6 |

^{*}POS = probability of success

Source: Leerink Partners estimates



Disclosures Appendix Analyst Certification

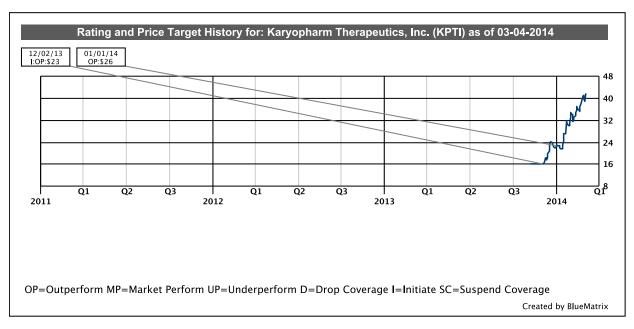
I, Michael Schmidt, Ph.D., certify that the views expressed in this report accurately reflect my views and that no part of my compensation was, is, or will be directly related to the specific recommendation or views contained in this report.

Valuation

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| | Distribution of Ratings/Investment Bank | ing Services (IB | , | erv./Past 12 Mos. |
|-----------------------|---|------------------|---------|----------------------|
| Rating | Count | Percent | Count | Percent |
| BUY [OP] HOLD [MP] | 118 65 | 64.50 35.50 | 30 2 | 25.00 3.00 |
| SELL [UP] | 0 | 0.00 | ō | 0.00 |

Explanation of Ratings

Outperform (Buy): We expect this stock to outperform its benchmark over the next 12 months.

<u>Market Perform (Hold/Neutral)</u>: We expect this stock to perform in line with its benchmark over the next 12 months.

<u>Underperform (Sell):</u> We expect this stock to underperform its benchmark over the next 12 months. The degree of outperformance or underperformance required to warrant an Outperform or an Underperform rating should be commensurate with the risk profile of the company.

For the purposes of these definitions the relevant benchmark will be the S&P 600® Health Care Index for issuers with a market capitalization of less than \$2 billion and the S&P 500® Health Care Index for issuers with a market capitalization over \$2 billion.



Important Disclosures

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