

Reason for report:

COMPANY UPDATE

ACCELERON PHARMA

Provocative Dalantercept ASCO Abstract, Expect Much More at Meeting; Reit \$52PT

• **Bottom Line:** Dalantercept-Axitinib abstract combo data in 2nd-line dose escalation cohort in renal cell carcinoma (RCC) are provocative in our view. While already positive and reflecting data as of the 2.4.14 submission deadline, we expect actual data presented at ASCO on 6.2.14 to further improve as they mature. Specifically, in a small but meaningful number of patients, Dalantercept combo data are demonstrating a higher response rate (RR) (25%) than would be expected with Axitinib monotherapy (19%) regardless of front-line therapy or number of prior therapies. While potentially underappreciated by the Street, the actual ASCO presentation will include both dose escalation cohort data (partially reflected in abstract) as well as some preliminary dose expansion cohort data that should include: (1) RR in a greater number of patients providing increased confidence in results, and (2) emerging duration of response data. Given these encouraging Dalantercept (proprietary) ASCO results in combination with five subsequent EHA presentations later in June and additional 2H14 catalysts, we reiterate our Outperform rating and \$52 price target.

• **ASCO Abstract 4566 data for the Dalantercept (Dal)-Axitinib combo are provocative, in our view.** The abstract (with submission deadline of 2.4.14) reflects data from the dose escalation Part-1 of this trial. These heavily pretreated patients (up to 3 prior lines of therapy) were treated in cohorts of 3-6 patients and received Dal (0.6, 0.9, or 1.2mg/kg) SC every 3 weeks (q3w) and Axitinib 5mg PO BID. The expansion cohort at the recommended Phase II dose (RP2D) enrolled an additional 10-20 pts. Press release data (more than in abstract) demonstrate a combo RR of 25% (5/20 evaluable patients) and an additional 50% (10/20) achieved stable disease (SD). This compares to the AXIS Phase III Axitinib 2nd line trial where a larger group of Sunitinib-refractory patients treated with Axitinib (n=194) demonstrated a RR of 11.3%, and 19% is in the FDA approval label. Across prior therapy and number of prior therapies, the combination with Dalantercept appears to demonstrate synergistic efficacy with acceptable tolerability.

• **While under appreciated in our view, the actual ASCO presentation on 6.2.14 will include data from the cohort expansion and not just dose cohort escalation.** Thus, we anticipate a more meaningful RR in a larger denominator of patients as well as some median evaluable emerging duration of response >4 months. We do not believe the Street is expecting this and the data have potential to surprise to the upside.

• **Almost immediately following ASCO, XLRN will have five key Sotatercept & ACE-536 Presentations at EHA June 12-15.** The most important will be top-line Phase II Sotatercept and ACE-536 data from four different trials in myelodysplastic syndromes (MDS) and β -Thalassemia (β -Thal.).

Dec Yr	1Q	2Q	3Q	4Q	FY Rev	1Q	2Q	3Q	4Q	FY EPS	P/E
2013A	\$15.0	\$26.4	\$4.3	\$11.5	\$57.2	\$0.13	\$0.64	(\$0.66)	(\$0.64)	(\$4.15)	NM
2014E	0.0	0.0	\$30.0	0.0	\$30.0	(\$0.50)	(\$0.53)	\$0.40	(\$0.58)	(\$1.22)	NM
2015E	--	--	--	--	0.0	--	--	--	--	(\$2.20)	NM

Source: Company Information and Leerink Partners LLC Research
Revenue in MM.

GAAP EPS presented.

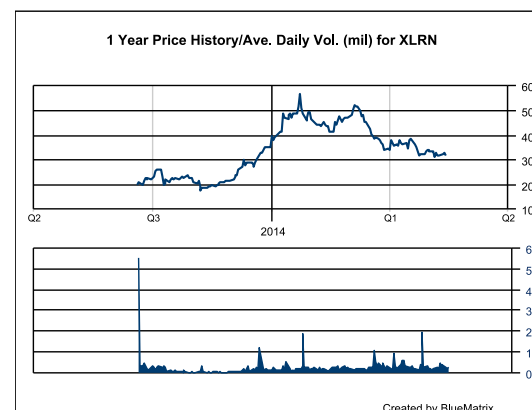
Key Stats:

(NASDAQ:XLRN)

S&P 600 Health Care Index: 1,213.11
Price: \$31.75
Price Target: \$52.00
Methodology: DCF analysis; 10% discount rate; 1% terminal growth rate

52 Week High: \$57.89
52 Week Low: \$15.00
Shares Outstanding (mil): 31.1
Market Capitalization (mil): \$987.4
Book Value/Share: \$1.29
Cash Per Share: \$7.81
Dividend (ann): \$0.00
Dividend Yield: 0.0%

Cash Per Share: Cash per share is pro forma for Jan-2014 financing (~\$129M in net proceeds).



INVESTMENT THESIS

We rate XLRN Outperform. We believe XLRN shares are poised to appreciate near/longer term driven by progress with CELG-partnered compounds Sotatercept/ACE-536 and proprietary Dalantercept (ACE-041). XLRN has multiple significant data read-out catalysts during almost every quarter until YE14. Pivotal catalysts through 2014: (1) Preliminary Dalantercept Phase II RCC data in 2Q14; (2) top-line Sotatercept and ACE-536 Phase II MDS and β -Thal. (4 trials) data at EHA in 2Q14; (3) final Sotatercept and ACE-536 Phase II MDS and β -Thal. (4 trials) data at ASH in 4Q14; (4) initiate pivotal MDS and/or β -Thal. trials by YE14. MEDACorp KOLs are very bullish and encouraged by emerging pipeline data and science. We assume probability of success in the low 30s percent range for Sotatercept/ACE-536 in MDS, 40% for β -Thal., 20% in end-stage renal disease (ESRD) patients on hemodialysis, and low 30s percent range for Dalantercept in 2nd-line RCC.

ASCO 2014 Titles

Dalantercept:				
Abstract #	Title	Time/Session	Poster Board	Presenter
5594	Phase II evaluation of dalantercept, a soluble recombinant activin receptor-like kinase 1 (ALK1) receptor-fusion protein, for treatment of recurrent/persistent endometrial cancer: GOG-0229N.	5/31(Sat) 8-11:45am S Hall A2 General poster Track(s): Gynecologic Cancer	376	Vicky Makker, MD
6045	Phase 2 study of dalantercept in recurrent or metastatic squamous cell carcinoma of the head and neck	5/31 (Sat) 1:15-5pm S Hall A2 General poster Track(s): Head and Neck Cancer	80	Antonio Jimeno, MD, PhD
4566	A two-part phase 2 randomized study of dalantercept and axitinib versus placebo plus axitinib in advanced renal cell carcinoma: Results from the part 1 dose escalation cohorts.	6/2 (Mon) 1:15-5pm S Hall A2 General Poster Track(s): Genitourinary Cancer	134	Michael B. Atkins, MD

Source: ASCO.org, Leerink Partners estimates

Milestones

Product	Partner	Indication	Phase	Timing	Milestone			
ACE-536	CELG	MDS + β -Thal.	Ph. II	2Q14	Phase II dose escalation data for MDS and β -Thal. at EHA-2014			
				4Q14	Final Phase II in MDS and β -Thal. data			
				YE14 or Beg-15	Initiate Phase III trial for MDS and/or β -Thal.			
				2018	Approval and launch			
Sotatercept (ACE-011)				CELG	ESRD	Ph. II	2Q14	Phase II dose escalation MDS + β -Thal. data at EHA-2014; Preclinical data in sickle cell anemia
							4Q14	Final Phase II in MDS + β -Thal. data
							2018	Approval and launch
							YE14 or Beg-15	Initiate Phase III trial for MDS and/or β -Thal.
	CELG	ESRD	Ph. II				4.22.26-14	Additional Data on Dose dependent Hg Increase from Ongoing Phase IIa Study at National Kidney Foundation (NKF)
1H15				Part-2 top-line data				
Dalantercept (ACE-041)	Proprietary	Oncology	Ph. II	2Q14	Interim data from dose escalation Phase II RCC combo data trial (full at ASCO-2014)			
					GOG Ovarian Cancer single agent trial Go-No-Go to Part-2 of trial			
				1H14	Initiate Phase II combo (sorafenib) trial in HCC			
				YE14	Preliminary Phase II combo (sorafenib) data in HCC			
				2014	Phase II data in SCCHN			
2018		Approval and launch in RCC						
New TGF- β Candidates		Muscle	PC	2014	Advance Muscle Loss candidate into clinic (ACE-083)			
				2015	Advance Fibrosis (i.e., PAH) candidate into clinic			
		Fibrosis	PC					

Source: Company reports, Leerink Partners estimates

Phase II Sotatercept Intravenous (IV)/Subcutaneous (SC) End-Stage Kidney Disease Patients on Hemodialysis	
Purpose:	Determine optimal administration route, dose level, and safety of IV or SC sotatercept for maintaining hemoglobin levels in ESRD hemodialysis subjects
# Pts:	Part-1: N=60 Part-2: N=230 19 international sites (as of 1.8.14)
Design:	Interventional, 2x Part, randomized, open label, treatment trial
Trial Arms:	<p>Note: Patients in both parts of study must first be on stable dose of ESA to maintain Hg levels and switched to treatment with sotatercept after an ESA treatment free period of ~5 days</p> <p>Part-1: Staggered dose group escalation</p> <ul style="list-style-type: none"> Arm-1 (IV): ACE-011 IV starting at 0.1mg/kg (gp-1), then 0.2mg/kg (gp-2) and 0.3mg/kg (gp-3) every 14 days for total of 8 doses and followed for 4 months after last dose Arm-2 (SC): ACE-011 SC starting at 0.13mg/kg (gp-1), then 0.26mg/kg (gp-2), and 0.4mg/kg (gp-3) every 14 days for total of 8 doses and followed for 4 months after last dose <p>Part-2: Parallel group, randomized vs. active control (ESA)</p>
Primary Endpoint:	<p>Part-1:</p> <ul style="list-style-type: none"> Pharmacokinetics: C-max, T-max, AUC 28days [Time Frame: 28 days] and T-1/2,z [211 days] Adverse Events: [Time Frame: 211 days] [Designated as safety issue], TEAEs <p>Part-2:</p> <ul style="list-style-type: none"> Change in mean hemoglobin concentration from baseline Ability of sotatercept to maintain hemoglobin levels within target range after switching from ESA to sotatercept
Secondary Endpoints:	<ul style="list-style-type: none"> Efficacy [Time Frame: 113 days] Change in mean hemoglobin (Hg) concentration between baseline and day-113 Bone Turnover biomarkers for remodeling and mineral metabolism for 211 days Change in serum bone biomarker concentrations between baseline and end of study (day-211)
Start:	October-2013
Data:	October-2015
Status:	Recruiting (as of 1.8.14)
Sponsors:	CELG
Clin.Trial.ID:	NCT01999582, ACE-011-REN-002, 2012-003788-23

Source: Company reports, Leerink Partners estimates

VALUATION

Our \$52 12-month price target of XLRN shares reflects probability-adjusted royalty revenue from ESRD patients on hemodialysis at 20%. Our valuation is based on a discounted cash flow analysis. XLRN shares are poised to appreciate near/longer term driven by progress with CELG-partnered compounds Sotatercept/ACE-536 and proprietary Dalantercept (ACE-041). We apply a discount rate of 10% and a terminal growth rate of 1%, which translates to an 11x terminal multiple, which we believe is comparable to biotechnology companies in a similar development stage.

RISKS TO VALUATION

An investment in XLRN is fundamentally a high-risk, high-reward investment, in our opinion. XLRN may face significant clinical, regulatory, and commercial risks for pipeline products. Most important is clinical risk for Phase II Sotatercept and ACE-536 trials in MDS (myelodysplastic syndromes) and β -Thal. as well as Dalantercept/Axitinib in RCC. There is also competitive risk from emerging MDS, β -Thal., and RCC therapies. Finally, XLRN may face financing risk beyond 1H15.

	XLRN P&L (\$000s, except per share data)																	
	2013A	1Q14E	2Q14E	3Q14E	4Q14E	2014E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	2024E	2025E	2026E
Revenues																		
Sotatercept/ACE-536 WW Revenue in MDS to CELG										\$66,089	\$141,589	\$227,505	\$324,937	\$435,091	\$559,283	\$698,955	\$855,680	\$1,031,180
Probability of Success										32%	32%	32%	32%	32%	32%	32%	32%	32%
Risk Adjusted Sotatercept/ACE-536 WW Revenue										\$21,148	\$45,308	\$72,801	\$103,980	\$139,229	\$178,971	\$223,666	\$273,818	\$329,978
Risk Adjusted Sotatercept/ACE-536 WW Royalties in MDS										\$4,230	\$9,515	\$16,016	\$23,915	\$32,023	\$42,953	\$55,916	\$68,454	\$82,494
Sotatercept/ACE-536 WW Revenue in NTD β-Thal. to CELG										\$3,659	\$60,642	\$127,092	\$226,546	\$339,098	\$466,097	\$609,020	\$767,222	\$904,639
Probability of Success										40%	40%	40%	40%	40%	40%	40%	40%	40%
Risk Adjusted Sotatercept/ACE-536 WW Revenue in NTD β-Thal.										\$1,464	\$24,257	\$50,837	\$90,619	\$135,639	\$186,439	\$243,608	\$306,889	\$361,856
Risk Adjusted Sotatercept/ACE-536 WW Royalties in NTD β-Thal.										\$293	\$4,851	\$10,676	\$19,936	\$29,841	\$42,881	\$58,466	\$73,653	\$90,464
Dalantercept WW Revenue in 2nd-line RCC										\$68,061	\$131,647	\$210,325	\$298,864	\$398,173	\$509,233	\$633,101	\$770,918	\$877,863
Probability of Success										32%	32%	32%	32%	32%	32%	32%	32%	32%
Risk Adjusted Dalantercept WW Revenue in 2nd-line RCC										\$21,780	\$42,127	\$67,304	\$95,637	\$127,415	\$162,954	\$202,592	\$246,694	\$280,916
Sotatercept US Revenue in ESRD Patients on Hemodialysis												\$301,866	\$819,107	\$1,418,781	\$1,915,379	\$2,064,199	\$2,220,226	\$2,383,756
Probability of Success												20%	20%	20%	20%	20%	20%	20%
Risk Adjusted Sotatercept US Revenue in ESRD Patients on Hemodialysis												\$60,373	\$163,821	\$283,756	\$383,076	\$412,840	\$444,045	\$476,751
Risk Adjusted Sotatercept US Royalties in ESRD Patients on Hemodialysis												\$12,075	\$36,041	\$65,264	\$91,938	\$103,210	\$111,011	\$119,188
Collaboration Revenue	\$57,231	-	-	\$30,000	-	\$30,000	-	\$40,000	\$30,000	\$22,400	\$8,000	-	\$8,000	-	\$8,000	\$8,000	\$8,000	\$8,000
Total Revenue	\$57,231	-	-	\$30,000	-	\$30,000	-	\$40,000	\$30,000	\$48,702	\$64,493	\$106,071	\$183,529	\$254,543	\$348,727	\$428,184	\$507,813	\$581,062
Costs and Expenses																		
Probability Adjusted Dalantercept COGS	-					-	-	-	-	\$3,267	\$6,319	\$10,096	\$9,564	\$12,742	\$16,295	\$20,259	\$24,669	\$28,092
Research and Development	\$36,051	\$10,350	\$11,200	\$12,100	\$12,780	\$46,430	\$51,073	\$56,180	\$61,798	\$27,809	\$29,200	\$30,660	\$32,193	\$33,802	\$35,492	\$37,267	\$39,130	\$41,087
SG&A (Risk Adjusted from Time of Dalantercept Launch)	\$14,227	\$4,800	\$5,000	\$5,100	\$5,200	\$20,100	\$22,110	\$24,321	\$26,753	\$33,153	\$36,468	\$39,386	\$41,355	\$43,423	\$45,594	\$47,874	\$50,267	\$52,781
Total Costs and Expenses	\$50,278	\$15,150	\$16,200	\$17,200	\$17,980	\$66,530	\$73,183	\$80,501	\$88,551	\$64,229	\$71,987	\$80,141	\$83,112	\$89,967	\$97,382	\$105,400	\$114,067	\$121,959
Operating Income (EBIT)	\$6,952	(\$15,150)	(\$16,200)	\$12,800	(\$17,980)	(\$36,530)	(\$73,183)	(\$40,501)	(\$58,551)	(\$15,527)	(\$7,494)	\$25,930	\$100,417	\$164,576	\$251,345	\$322,784	\$393,746	\$459,103
Y/Y growth																		
Other Income (Expenses)	(\$27,710)					-	-	-	-	-	-	-	-	-	-	-	-	-
Interest Income	\$20																	
Interest Expense	(\$1,161)	(\$457)	(\$378)	(\$298)	(\$219)	(\$1,352)	(\$521)											
Income Before Taxes	(\$21,898)	(\$15,607)	(\$16,578)	\$12,502	(\$18,199)	(\$37,882)	(\$73,704)	(\$40,501)	(\$58,551)	(\$15,527)	(\$7,494)	\$25,930	\$100,417	\$164,576	\$251,345	\$322,784	\$393,746	\$459,103
Provision for Taxes						-	-	-	-	-	-	-	-	-	40,225	109,747	133,873	156,095
Tax Rate						0%	0%	0%	0%	0%	0%	0%	0%	0%	16%	34%	34%	34%
Net income	(\$21,898)	(\$15,607)	(\$16,578)	\$12,502	(\$18,199)	(\$37,882)	(\$73,704)	(\$40,501)	(\$58,551)	(\$15,527)	(\$7,494)	\$25,930	\$100,417	\$164,576	\$211,119	\$213,038	\$259,872	\$303,008
Net income (loss) applicable to common stockholders—diluted	(\$39,003)	(\$15,607)	(\$16,578)	\$12,502	(\$18,199)	(\$37,882)	(\$73,704)	(\$40,501)	(\$58,551)	(\$15,527)	(\$7,494)	\$25,930	\$100,417	\$164,576	\$211,119	\$213,038	\$259,872	\$303,008
Change in fair value of warrants	\$1,500																	
EPS (LPS) Basic	(\$4.15)	(\$0.50)	(\$0.53)	\$0.40	(\$0.58)	(\$1.22)	(\$2.20)	(\$1.20)	(\$1.72)	(\$0.45)	(\$0.22)	\$0.74	\$2.83	\$4.59	\$5.83	\$5.82	\$7.03	\$8.12
Basic Shares (000)	9,407	31,109	31,140	31,171	31,202	31,147	33,458	33,793	34,130	34,472	34,817	35,165	35,516	35,871	36,230	36,593	36,958	37,328

Source: Leerink Partners estimates and company reports.
NTD=non-transfusion dependent.

DCF Calculation	
Discount rate	10%
Terminal Growth Rate	1%
Valuation (\$M)	\$1,698
Valuation / Share	\$53

Source: Leerink Partners estimates.

XLRN DCF Valuation/Share Sensitivity Analysis						
		Discount Rate				
		8.0%	9.0%	10.0%	11.0%	12.0%
Terminal Growth Rate	0.0%	\$69	\$58	\$49	\$42	\$36
	1.0%	\$77	\$63	\$53	\$45	\$38
	2.0%	\$86	\$70	\$57	\$48	\$41
	3.0%	\$100	\$78	\$63	\$52	\$44
	4.0%	\$121	\$91	\$71	\$57	\$47

Source: Leerink Partners estimates.

Disclosures Appendix

Analyst Certification

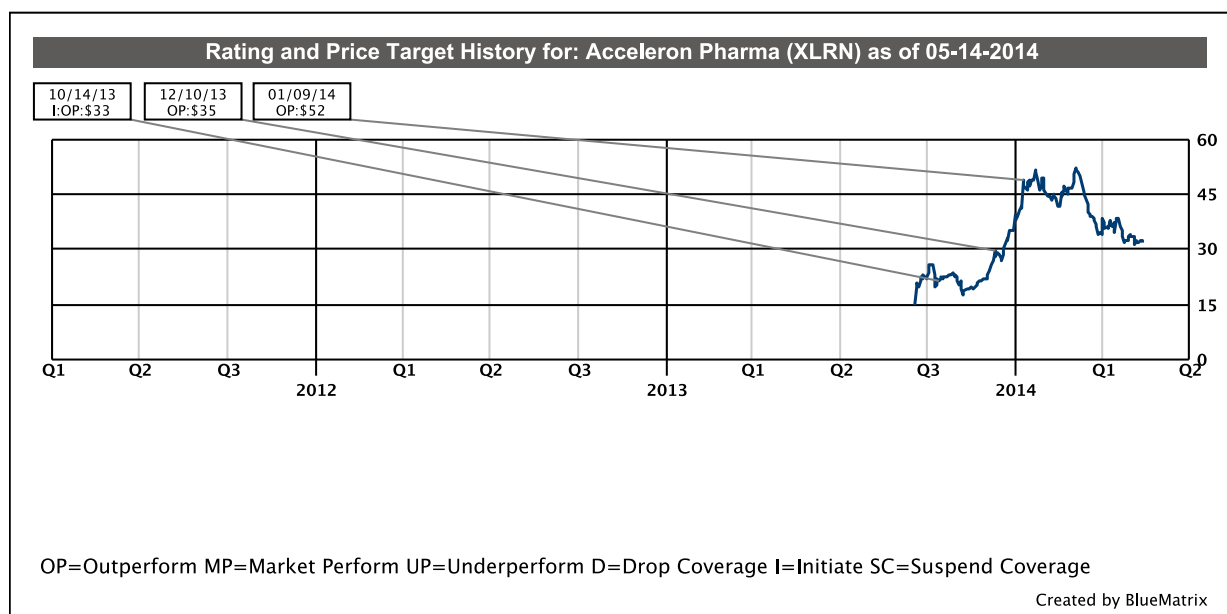
I, Marko Kozul, M.D., certify that the views expressed in this report accurately reflect my views and that no part of my compensation was, is, or will be directly related to the specific recommendation or views contained in this report.

Valuation

Our \$52 12-month price target of XLRN shares reflects probability-adjusted royalty revenue from ESRD patients on hemodialysis at 20%. Our valuation is based on a discounted cash flow analysis. XLRN shares are poised to appreciate near/longer term driven by progress with CELG-partnered compounds Sotatercept/ACE-536 and proprietary Dalantercept (ACE-041). We apply a discount rate of 10% and a terminal growth rate of 1%, which translates to an 11x terminal multiple, which we believe is comparable to biotechnology companies in a similar development stage.

Risks to Valuation

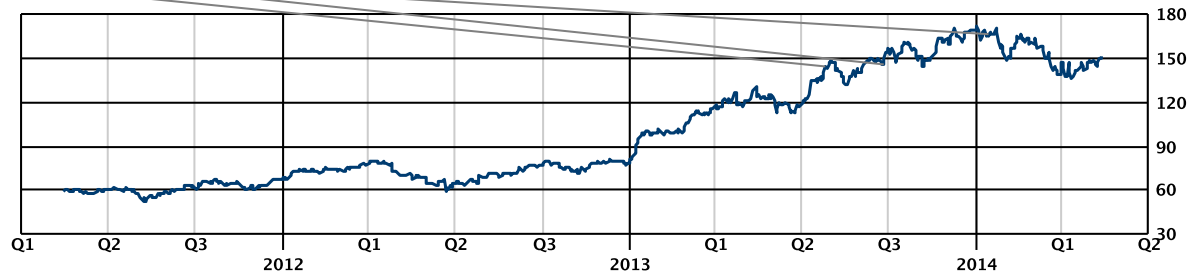
An investment in XLRN is fundamentally a high-risk, high-reward investment, in our opinion. XLRN may face significant clinical, regulatory, and commercial risks for pipeline products. Most important is clinical risk for Phase II Sotatercept and ACE-536 trials in MDS (myelodysplastic syndromes) and β -Thal. as well as Dalantercept/Axitinib in RCC. There is also competitive risk from emerging MDS, β -Thal., and RCC therapies. Finally, XLRN may face financing risk beyond 1H15.



Rating and Price Target History for: Celgene, Inc. (CELG) as of 05-14-2014

07/26/13
OP:\$165

09/25/13
OP:\$177

01/14/14
OP:\$197


Leerink Swann initiated coverage of CELG with an Outperform rating on February 7, 2003. On June 11, 2013, Leerink Swann began a transition to specific price targets for the stocks under its coverage, replacing valuation ranges.

OP=Outperform MP=Market Perform UP=Underperform D=Drop Coverage I=Initiate SC=Suspend Coverage

Created by BlueMatrix

Distribution of Ratings/Investment Banking Services (IB) as of 03/31/14				
Rating	Count	Percent	IB Serv./Past 12 Mos.	
			Count	Percent
BUY [OP]	131	68.23	46	35.11
HOLD [MP]	61	31.77	3	4.92
SELL [UP]	0	0.00	0	0.00

Explanation of Ratings

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

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

Underperform (Sell): 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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In the past 12 months, the Firm has received compensation for providing investment banking services to Accelaron Pharma .

Leerink Partners LLC makes a market in Accelaron Pharma and Celgene, Inc.

Leerink Partners LLC has acted as the manager for a public offering of Accelaron Pharma in the past 12 months.

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