

Reason for report:

## COMPANY UPDATE

## ACCELERON PHARMA

Robust EHA Datasets in Both MDS &  $\beta$ -Thal Drive Our New \$57 PT;  
Reit. OP

• **Bottom Line:** EHA data for Sotatercept (SOT) and ACE-536 in MDS (myelodysplastic syndrome) and  $\beta$ -Thal. were very encouraging in both Transfusion Dependent (TD) and Non-Transfusion Dependent (NTD) patients, driving our increased probability of success (POS) for these compounds in MDS to ~40% (from ~30%) and in  $\beta$ -Thal to ~50% (from ~40%). This in turn drives our new \$57 price target (from \$52). Looking ahead, XLRN has many 2H14 catalysts to drive the shares higher, including: 1) SOT ESRD data, including bone mineral density details, at ASN-14 (Nov. 11-16); 2) maturing SOT and ACE-536 MDS/ $\beta$ -Thal. datasets at ASH-14 (Dec. 6-9); 3) preliminary data from new initiatives such as response rates from the Dalantercept-Sorafenib combo in HCC.

• **New ACE-536 MDS data at EHA demonstrate impressive responses in both NTD/TD patients at doses  $\geq 0.75$ mg/kg and the ability to dose higher given only Grade 1-2 (G1-2) toxicity up to 1.33mg/kg.** Key is that no serious adverse events (SAEs) and only G1-2 tox were observed in dosing cohorts up to 1.33mg/kg, suggesting the possibility of benefiting from further efficacy in the 1.75mg/kg cohort. In terms of efficacy, data are available for 21 patients (5 NTD, 16 TD). For the TD patients, ~38% (6/16) experienced  $\geq 50\%$  reduction in transfused units during an 8-week interval on ACE-536 (doses 0.25-1.33mg/kg) after failing ESAs, Revlimid, or both. These TD data are particularly strong given a mean baseline transfusion burden of 6.3 units suggesting a relatively heavily transfused cohort of patients. For NTD patients, 60% (3/5) treated at 0.75mg/kg were either ESA refractory or non-responders and they experienced maximum Hgb increases of 1.6, 1.9 and 3.3g/dL (impressive) despite a modest mean Hgb of 9g/dL. For the 0.75mg/kg cohort, data demonstrate meaningful, and more than doubling, transient reticulocyte increases. At ASH-14, we hope to see additional dose escalation data, more granular reticulocyte details and sustained hematocrit levels without tachyphylaxis as well as data for SOT in this indication.

• **New ACE-536  $\beta$ -Thal. EHA data are also impressive for both TD and NTD patients, again in the context of favorable safety with no SAEs.** Data were presented for 24 patients (20 NTD, 4 TD) with NTD baseline data suggesting patients were  $\beta$ -Thal-intermedia (rather than major) with mean Hgb of 8.2g/dL. In terms of safety, no drug SAEs were reported to date and toxicity in the 0.8mg/kg cohort (highest currently available) showed only G2 toxicities, suggesting the potential to continue dose escalation. For the 4 TD patients (1 at 0.6 and 3 at 0.8mg/kg), 100% experienced reductions in transfusion burden (-78.5%, -66.7%, -66.7% and -69.8%). Key is that on top of chelation therapy these 4 patients also demonstrated reductions in serum ferritin levels (-39.7%, -27.5%, -59.5% and -42.7%), which is key to improving their quality of life and their long-term survival. For NTD patients, efficacy was dose proportional with 100% experiencing a  $\geq 1.0$ g/dL increase by the 0.6mg/kg cohort and 33% experiencing a  $\geq 2.0$ g/dL increase at 0.8mg/kg.

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	\$3.3A	0.0	\$30.0	0.0	\$33.3	(\$0.30)A	(\$0.55)	\$0.39	(\$0.60)	(\$1.06)	NM
2015E	--	--	--	--	0.0	--	--	--	--	(\$2.29)	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:	1,282.26
Price:	\$33.88
Price Target:	\$57.00 from \$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):	30.3
Market Capitalization (mil):	\$1,026.6
Book Value/Share:	\$1.32
Cash Per Share:	\$7.06
Dividend (ann):	\$0.00
Dividend Yield:	0.0%

## Cash Per Share:



## 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) Maturing Sotatercept Phase II Part-1 data (0.7mg/kg cohort+BMD/Vasc Calcificat) at American Society of Nephrology (ASN) Nov. 11-16, 2014; (2) Maturing Sotatercept and ACE-536 Phase II MDS and  $\beta$ -Thal. (4 trials) data at ASH in 4Q14; (3) initiate pivotal MDS and/or  $\beta$ -Thal. trials in early-15; (4) Preliminary Dalantercept Phase II randomized Part-2 renal cell carcinoma (RCC) data in 2H15. MEDACorp KOLs are very bullish and encouraged by emerging pipeline data and science. We assume probability of success in the ~40% range for Sotatercept/ACE-536 in MDS, 50% for  $\beta$ -Thal., 20% in end-stage renal disease (ESRD) patients on hemodialysis, and low 30% range for Dalantercept in 2nd-line RCC.

### Milestones

Product	Partner	Indication	Phase	Timing	Milestone
ACE-536	CELG	MDS + $\beta$ -Thal.	Ph. II	4Q14	Final Phase II in MDS and $\beta$ -Thal. data
				YE14/early-15	Initiate Phase III trial for MDS and/or $\beta$ -Thal.
				2018	Approval and launch
Sotatercept (ACE-011)				4Q14	Final Phase II in MDS + $\beta$ -Thal. data
				2018	Approval and launch
				YE14/early-15	Initiate Phase III trial for MDS and/or $\beta$ -Thal.
	CELG	ESRD	Ph. II	11.11-16.14	Phase II Part-1 data (0.7mg/kg cohort+BMD/Vasc Calcificat)
Dalantercept (ACE-041)	Proprietary	Oncology	Ph. II	2Q14	Initiate Phase II Dal-sorafenib combo trial in HCC
				YE14	Preliminary Phase II Dal-sorafenib combo RR data in HCC
				2H15	Phase II RCC Part-2 data
				2014	Phase II data in SCCHN
				2018	Approval and launch in RCC
ACE-083		Muscle	PC	2H14	Advance ACE-083 into clinic for Muscle Loss
New TGF- $\beta$ Candidates		Fibrosis	PC	2015	Advance Fibrosis (i.e., PAH) candidate into clinic

Source: Company reports, Leerink Partners estimates

## VALUATION

Our new \$57 (from \$52) 12-month price target of XLRN shares reflects probability-adjusted royalty revenue at 20% from end-stage renal disease (ESRD) patients on hemodialysis. Our valuation is based on a discounted cash flow analysis. 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). 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  $\beta$ -Thal. as well as Dalantercept/Axitinib in RCC. There is also competitive risk from emerging MDS,  $\beta$ -Thal., and RCC therapies. Finally, XLRN may face financing risk beyond 1H15.

	XLRN P&L (\$000s, except per share data)																	
	2013A	1Q14A	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										40%	40%	40%	40%	40%	40%	40%	40%	40%
Risk Adjusted Sotatercept/ACE-536 WW Revenue										\$26,436	\$56,635	\$91,002	\$129,975	\$174,036	\$223,713	\$279,582	\$342,272	\$412,472
Risk Adjusted Sotatercept/ACE-536 WW Royalties in MDS										\$5,287	\$11,893	\$20,020	\$29,894	\$40,028	\$53,691	\$69,895	\$85,568	\$103,118
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										50%	50%	50%	50%	50%	50%	50%	50%	50%
Risk Adjusted Sotatercept/ACE-536 WW Revenue in NTD β-Thal.										\$1,830	\$30,321	\$63,546	\$113,273	\$169,549	\$233,049	\$304,510	\$383,611	\$452,320
Risk Adjusted Sotatercept/ACE-536 WW Royalties in NTD β-Thal.										\$366	\$6,064	\$13,345	\$24,920	\$37,301	\$53,601	\$73,082	\$92,067	\$113,080
Dalanterscept 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 Dalanterscept 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	\$3,307	-	\$30,000	-	\$33,307	-	\$40,000	\$30,000	\$28,000	\$10,000	-	\$10,000	-	\$10,000	\$10,000	\$10,000	\$10,000
Total Revenue	\$57,231	\$3,307	-	\$30,000	-	\$33,307	-	\$40,000	\$30,000	\$55,433	\$70,085	\$112,744	\$196,492	\$270,009	\$372,185	\$458,780	\$545,340	\$626,302
Costs and Expenses																		
Probability Adjusted Dalanterscept COGS	-					-	-	-	-	\$3,267	\$6,319	\$10,096	\$9,564	\$12,742	\$16,295	\$20,259	\$24,669	\$28,092
Research and Development	\$36,051	\$11,765	\$12,200	\$12,500	\$13,280	\$49,745	\$55,217	\$61,291	\$68,033	\$34,016	\$35,717	\$37,503	\$39,378	\$41,347	\$43,415	\$45,585	\$47,864	\$50,258
SG&A (Risk Adjusted from Time of Dalanterscept Launch)	\$14,227	\$3,750	\$4,500	\$5,100	\$5,200	\$18,550	\$20,405	\$22,446	\$24,690	\$31,090	\$34,199	\$36,935	\$38,782	\$40,721	\$42,757	\$44,895	\$47,139	\$49,496
Total Costs and Expenses	\$50,278	\$15,515	\$16,700	\$17,600	\$18,480	\$68,295	\$75,622	\$83,736	\$92,723	\$68,373	\$76,235	\$84,534	\$87,724	\$94,810	\$102,467	\$110,739	\$119,673	\$127,846
Operating Income (EBIT)	\$6,952	(\$12,208)	(\$16,700)	\$12,400	(\$18,480)	(\$34,988)	(\$75,622)	(\$43,736)	(\$62,723)	(\$12,941)	(\$6,151)	\$28,210	\$108,768	\$175,199	\$269,718	\$348,041	\$425,666	\$498,456
Y/Y growth																		
Other Income (Expenses)	(\$27,710)	\$3,088				-	-	-	-	-	-	-	-	-	-	-	-	-
Interest Income	\$20																	
Interest Expense	(\$1,161)		(\$378)	(\$298)	(\$219)	(\$895)	(\$521)	-	-	-	-	-	-	-	-	-	-	-
Income Before Taxes	(\$21,898)	(\$9,120)	(\$17,078)	\$12,102	(\$18,699)	(\$32,795)	(\$76,143)	(\$43,736)	(\$62,723)	(\$12,941)	(\$6,151)	\$28,210	\$108,768	\$175,199	\$269,718	\$348,041	\$425,666	\$498,456
Provision for Taxes						-	-	-	-	-	-	-	-	-	-	-	-	-
Tax Rate						0%	0%	0%	0%	0%	0%	0%	0%	0%	20%	34%	34%	34%
Net income	(\$21,898)	(\$9,120)	(\$17,078)	\$12,102	(\$18,699)	(\$32,795)	(\$76,143)	(\$43,736)	(\$62,723)	(\$12,941)	(\$6,151)	\$28,210	\$108,768	\$175,199	\$216,301	\$229,707	\$280,940	\$328,981
Net income (loss) applicable to common stockholders—diluted	(\$39,003)	(\$9,120)	(\$17,078)	\$12,102	(\$18,699)	(\$32,795)	(\$76,143)	(\$43,736)	(\$62,723)	(\$12,941)	(\$6,151)	\$28,210	\$108,768	\$175,199	\$216,301	\$229,707	\$280,940	\$328,981
Change in fair value of warrants	\$1,500																	
EPS (LPS) Basic	(\$4.15)	(\$0.30)	(\$0.55)	\$0.39	(\$0.60)	(\$1.06)	(\$2.29)	(\$1.30)	(\$1.85)	(\$0.38)	(\$0.18)	\$0.81	\$3.08	\$4.92	\$6.01	\$6.32	\$7.65	\$8.87
Basic Shares (000)	9,407	30,321	31,140	31,171	31,202	30,931	33,241	33,573	33,909	34,248	34,590	34,936	35,286	35,639	35,995	36,355	36,719	37,086

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

DCF Calculation

Discount rate	10%
Terminal Growth Rate	1%
Valuation (\$M)	\$1,835
Valuation / Share	\$57

Source: Leerink Partners estimates.

XLRN DCF Valuation/Share Sensitivity Analysis						
Terminal Growth Rate	Discount Rate					
	8.0%	9.0%	10.0%	11.0%	12.0%	
	0.0%	\$75	\$63	\$53	\$45	\$39
	1.0%	\$84	\$69	\$57	\$48	\$42
	2.0%	\$94	\$76	\$62	\$52	\$44
	3.0%	\$109	\$85	\$69	\$57	\$47
	4.0%	\$132	\$99	\$77	\$62	\$52

Source: Leerink Partners estimates.

## Disclosures Appendix

### Analyst Certification

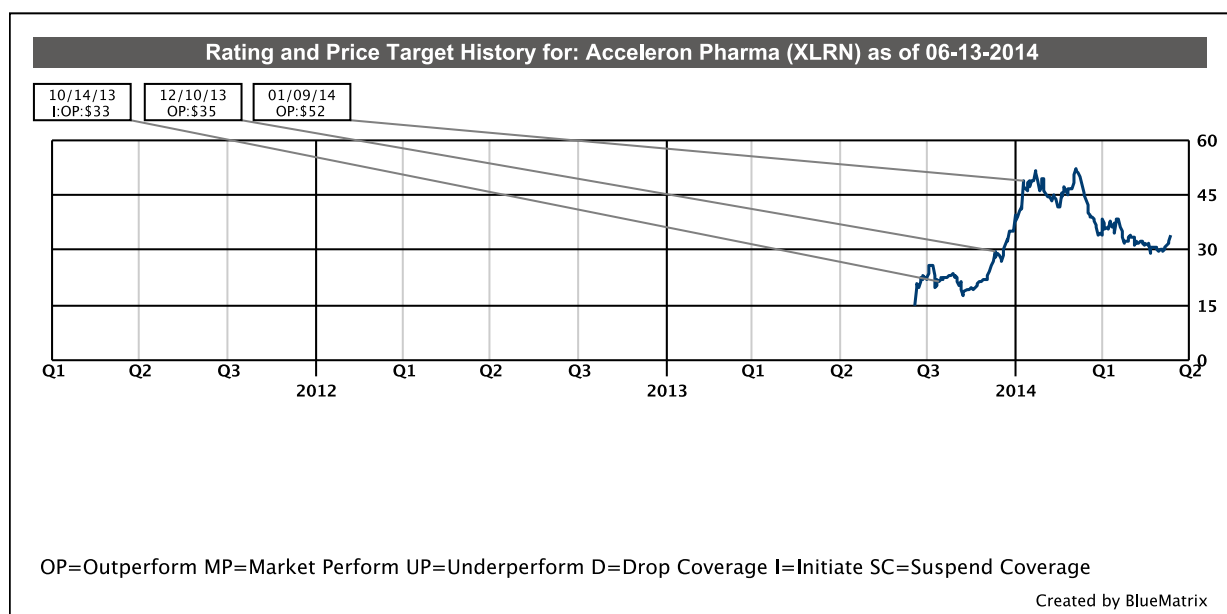
I, Marko Kozul, M.D., certify that the views expressed in this report accurately reflect my views and that no part of my compensation was, is, or will be directly related to the specific recommendation or views contained in this report.

### Valuation

Our new \$57 (from \$52) 12-month price target of XLRN shares reflects probability-adjusted royalty revenue at 20% from end-stage renal disease (ESRD) patients on hemodialysis. Our valuation is based on a discounted cash flow analysis. 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). 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

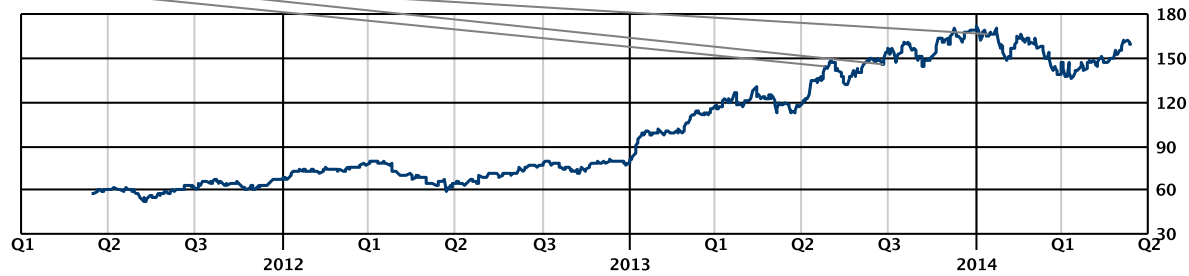
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**Rating and Price Target History for: Celgene, Inc. (CELG) as of 06-13-2014**

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

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

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