

CONCERT PHARMACEUTICALS INC.

Deuterium Dynamo: Initiating Coverage with Buy Rating

CNCE (NASDAQ)

Company & Market Data

Closing Price (as of June 25, 2014):	\$8.90
Rating:	BUY
Price Target:	\$24.00
52 Week Range:	\$7.12 - \$16.26
Shares Outstanding (MM):	18
Market Capitalization (MM):	\$159
Cash (MM):	\$108.0
Debt (MM):	\$13.0
Fiscal Year End:	Dec

Estimates

EPS	2013A	2014E	2015E
1Q	—	\$(0.76)A	—
2Q	—	\$(0.37)	—
3Q	—	\$(0.38)	—
4Q	—	\$(0.28)	—
Full Year	\$(4.99)	\$(1.61)	\$(0.52)
Prior			
Revenue (MM)	\$25.4	\$10.4	\$27.5

Ratios

P/E	NA	NA	NA
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Concert Pharmaceuticals, founded in 2006 by Richard Aldrich, Roger Tung, and Christoph Westphal, creates novel medicines by applying its DCE (Deuterated Chemical Entity) Platform technologies to molecules. The DCE approach involves the selective addition of deuterium, a stable isotope of hydrogen, to molecules, resulting in clinical therapeutic candidates with improved pharmacology. This approach has the potential to enable more efficient drug discovery and clinical development. Concert's proprietary programs include CTP-354, a novel GABA-A modulator for spasticity and anxiety, and CTP-499, a PDE inhibitor for diabetic kidney disease. Promising partnered programs include Jazz's JZP-386, a long-acting Xyrem, Avanir's AVP-786, an improved Neudexta, and multiple programs with Celgene. Concert has also developed a broad portfolio of deuterated molecules that are expected to migrate into and through the clinic over time.

We initiate coverage of Concert Pharmaceuticals (CNCE) with a Buy rating and \$24 price target. Concert creates new medicines by selectively adding deuterium to molecules which strengthens certain specific internal molecular bonds, a change that can have important implications, potentially significantly altering biological activity. Concert has created a diverse portfolio of assets based on its deuterium substitution platform known as DCE (Deuterated Chemical Entity). The company, along with partners Jazz, Avanir, and Celgene, is advancing a number of promising candidates into and through the clinic. We believe those opportunities and the DCE platform have the potential to result in material growth for Concert.

Concert's Promising Proprietary Programs Are Progressing. CTP-354, is a subtype-selective GABA-A modulator with familiar yet distinct GABA agonist activity, and possesses a once-daily profile with minimal sedation compared to benzodiazepines. We believe '354 has the potential for utility not only in spasticity associated with both multiple sclerosis (MS) and spinal cord injury, but we believe there is significant potential for its development in anxiety and pain settings over time. '354 should move into Phase 2 for spasticity in MS in 2H14 and into other indications during 2015.

CTP-499, a deuterated-PDE inhibitor for diabetic kidney disease, is finishing up some encouraging Phase 2 work, where it demonstrated activity in patients progressing toward more serious forms of that condition. The company is to have end of Phase 2 discussions with FDA mid-year which could provide clarity toward the phase 3 program. Concert has stated it prefers to partner '499 for this important indication.

Concert's Partnered Programs: Moving Toward Prominence. Concert's collaborations include Avanir's AVP-786, a deuterated dextromethorphan that contains less quinidine than Avanir's Neudexta; we believe it could have much more broad consideration than the approved Neudexta as a result. '786 is expected to enter Phase 2 in 2H14 for treatment-resistant depression, and can utilize data generated by Neudexta, a notable efficiency that could help it also move into Phase 3 in agitation associated with Alzheimer's disease in 2015.

Jazz Pharmaceutical's JZP-386 is a deuterated analog of sodium oxybate, the active ingredient in Xyrem, a brand which reached revenue of \$569mm (+50%) in 2013. JZP-386 has the potential to avoid Xyrem's inconvenient intra-night dosing, and is expected to move into Phase 1 for narcolepsy this year, triggering a milestone for Concert.

Concert also has a broad-ranging agreement with Celgene for multiple deuterated compounds in inflammation and oncology. These include CTP-730, which is moving into Phase 1 for inflammatory diseases. Though the specific molecules have not yet been disclosed, the Celgene agreement is potentially very lucrative, with \$35mm upfront, \$1.4B in milestones, and low double-digit royalties.

CNCE Valuation: Attractive In Our View. We value CNCE shares at \$24, based on fully-taxed, risk-weighted NPV calculations that totals \$24.20. We assess Concert's major assets at the following NPV/CNCE share: CTP-354 at \$7.17, CTP-499 at \$5.16, and the Avanir, Jazz, and Celgene collaborations at \$3.87, \$2.37, and \$3.61, respectively, with cash and other assets comprising the difference.

Disclosures and Analyst Certifications can be found in Appendix A.

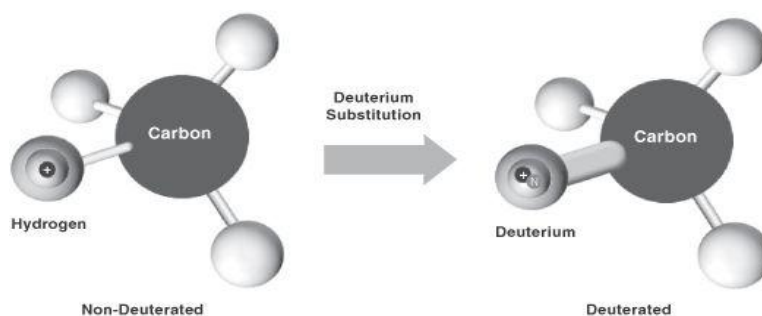
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Concert Pharmaceuticals – Executive Summary

Concert Pharmaceuticals: Developing Deuterium-Based Drugs. Founded in 2006, Concert Pharmaceuticals focuses on creating and developing new medicines through its proprietary DCE (deuterated chemical entity) Platform. The DCE Platform selectively employs deuterium, a naturally-occurring relative of hydrogen. Deuterium modification of a molecule has the potential to improve its metabolic properties, with minimal change to its intrinsic pharmacology. Concert's business strategy initially involved establishing novel intellectual property for a number of deuterium-modified molecules across a wide range of therapeutic classes, and then advancing the most promising initial candidates, even as it continued to develop others. Five of these more mature deuterated assets are now currently in active development under the guidance of either Concert or its strategic partners, and all five should be advancing in the clinic by year-end 2014.

Exhibit 1: Deuterium Substitution



Source: Concert Corporate Fact Sheet, May 2013.

The application of deuterium medicinal chemistry to compounds with well understood therapeutic utility can potentially provide an approach with modestly reduced risk with regard to creating new drugs. Concert believes (and we concur) that since its assets are generally materially related to a parent molecule, once Phase 1 is established for the deuterated molecule, especially in an indication that the parent shares, the program has been materially de-risked.

Deuterium Medicinal Chemistry In Brief. Deuterium is one of two naturally-occurring stable isotopes of hydrogen. Where hydrogen has one electron and one proton, deuterium also has a neutron in its nucleus, resulting in an atomic mass that is double that of hydrogen. Deuterium is not radioactive, and possesses physicochemical properties that are similar to those of hydrogen, but because of its increased mass, bonds involving deuterium are generally stronger than similar bonds with hydrogen. This strengthening can be enough to make significant changes in biological reactions with deuterium-based compounds compared to hydrogen-based ones. Many drugs are metabolized by pathways that involve the breakdown of carbon-hydrogen bonds, and the stronger deuterium-based bonds have the potential to alter or deflect the breakdown of the molecule or its metabolites. Deuterium modification therefore offers an approach to potentially creating significantly differentiated new medicines, and importantly, because the behavior of deuterium based bonds is not inherently predictable, novel intellectual property can be established.

Concert's Drug Development Approach. Concert's strategic development of deuterium-based molecules began with management initially broadly examining a host of both approved and novel molecules to selectively apply deuterium and establish intellectual property. Having now established a broad portfolio of deuterated molecules that span multiple therapeutic areas, it continues with that process. We note that








Concert's management team is well-seasoned in therapeutics development, having material experience at Vertex, Merck, Amgen, and other organizations; because of this, we believe Concert should have the ability to successfully navigate the development of its wide range of assets. With existing therapies, Concert is often utilizing significant information regarding the related non-deuterated (parent) compound, allowing it to efficiently identify lead compounds. In some cases, Concert or its partners can truncate the development timeline of a deuterated molecule compared to conventional drug development by sourcing the data from the related parent molecule.

Concert's Pipeline: Five In The Clinic During 2015. Concert has a solid pipeline of deuterated compounds as noted in Exhibit 2. Concert's five most advanced programs are all expected to be materially progressing at various stages in the clinic by the end of 2014. Concert has two proprietary compounds and three partnered programs of significant importance. Given the urgency with which Concert has established its intellectual property, we expect continued advancement of new compounds in its proprietary pipeline into the clinic.

Concert's Proprietary Pipeline: CTP-354 Has A Familiar Yet Distinctive GABA Profile. CTP-354 is Concert's GABA-A selective modulator moving into Phase 2 for spasticity associated with both multiple sclerosis and spinal cord injury. It also could be considered for other much broader indications such as anxiety and neuropathic pain. CTP-354 is attempting to demonstrate efficacy in these settings without the sedation seen with other common GABA-focused therapies, and the larger opportunities such as anxiety and pain with limited sedation gives this compound considerable potential. Phase 2 should begin in 2H14 for the spasticity settings.

Concert's Proprietary Pipeline: CTP-499--Finishing Phase 2 in Diabetic Kidney Disease. CTP-499 is a PDE-inhibitor with anti-inflammatory and anti-fibrotic characteristics that has shown encouraging results in Phase 2 for diabetic kidney disease, and recent changes in trial endpoints have become helpful to the development of therapeutics for this indication. Also, since its parent molecule is pentoxifylline, CTP-499 could have potential for long-term consideration in hepatic settings such as alcoholic liver disease and NASH. '499 could be partnered after an upcoming end of Phase 2 meeting with FDA.

Exhibit 2: Concert Pharmaceuticals - Pipeline

Product Candidate	Lead Indication(s)	Preclinical	Phase 1	Phase 2	Anticipated Milestones	Potential Deal Value	Worldwide Rights
CTP-354	Spasticity associated with MS				<ul style="list-style-type: none"> Ph1 MAD data expected 2H14 Ph2 program expected to begin 2H14 		
	Spasticity associated with SCI						
CTP-499	Diabetic Kidney Disease				<ul style="list-style-type: none"> End of Ph2 FDA meeting expected mid-2014 		
AVP-786 (Deuterated dextromethorphan)	Neurologic and Psychiatric Disorders				<ul style="list-style-type: none"> Ph2 trial for treatment-resistant major depressive disorder expected to begin 2H14 	<ul style="list-style-type: none"> \$170 Million 	
CTP-730	Inflammatory Diseases				<ul style="list-style-type: none"> Phase 1 expected to begin 2014 	<ul style="list-style-type: none"> \$1.4 Billion 	
JZP-386 (Deuterated sodium oxybate)	Narcolepsy				<ul style="list-style-type: none"> Phase 1 expected to begin 2014 	<ul style="list-style-type: none"> \$117 Million 	
C-10068	Pain and Seizures						
Deuterated ivacaftor	CF and COPD						

Source: Concert Pharmaceuticals corporate presentation; June 2014.

Partnered Programs With Avanir, Jazz, and Celgene, Are Advancing. Concert initially implemented a partnering strategy for the development of its molecules in order to defer risk, and help establish and validate its DCE platform. It has three corporate agreements so far, and we believe there is the potential for additional collaborations over time. Concert has structured its partnerships with material developmental milestones, providing the company with potential for material cash and revenue generation from those programs even prior to the introduction of its own proprietary therapies.

AVP-786 with Avanir for Neurologic/Psychiatric Disorders. Avanir's (AVNR, \$5.40; Not Rated) AVP-786's is a deuterated version of Avanir's approved Neudexta, indicated for pseudobulbar affect (sudden, frequent episodes of laughing and/or crying). AVP-786 contains much less quinine than Neudexta, which could make its appeal much broader. '786 is being developed in treatment-resistant depression and neuropathic pain, and is entering Phase 2 for treatment resistant major depressive disorders in 2H14. Indications such as agitation in Alzheimer's disease and Parkinson's dyskinesia are also likely. Concert can earn up to \$166 million in additional regulatory, development, and sales milestones, and a royalty in the mid-single digits to low double digits on global sales.

Jazz's JZP-386 – A Better Xyrem? Jazz's (JAZZ, \$150.42; Not Rated) JZP-386 is a deuterated analog of sodium oxybate that is nearing Phase 1 development for narcolepsy; sodium oxybate is the active ingredient in Jazz's large and rapidly growing Xyrem franchise; Xyrem posted revenue of \$569 million in 2013, up +50% from the previous year. JZP-386 has the potential to materially expand the franchise by avoiding the cumbersome middle-of-the-night dosing. Concert can earn up to \$117 million in regulatory, development, and sales milestones, and a royalty in the mid-single digits to low double digits on worldwide sales.

Celgene's Inflammation/Oncology Programs. Celgene's (CELG, \$172.92; Not Rated) deuterated CTP-730 is in development for inflammatory diseases, and is expected to enter the clinic this year, with Phase 1 results expected in 2015. Though the specific target and parent molecule of CTP-730 has not been disclosed, milestones of up to \$1.4 billion point to the deal's significance (the deal also includes three other potential assets). In terms of inflammatory indications and franchises of importance to Celgene, we note that Thalomid has one inflammatory indication, and Celgene's pipeline contains Otezla/apremilast, pomalidomide, CC-220, CC-292, and others that are being examined for inflammatory indications. We expect greater visibility for this collaboration in 2015.

Exhibit 3: Concert – Recent Events/Upcoming Catalysts

Date	Event	Comment	Significance
Feb-12	Avanir deal for deuterated dextromethorphan	Program gives solid PK profile with less quinidine	◆◆◆
Feb-13	Jazz deal for deuterated Xyrem (sodium oxybate)	Extension of significant Xyrem franchise	◆◆◆◆
Apr-13	Celgene collaboration - CTP-730, others	Large deal: \$35mm UF, \$1.4B MS, SD/low DD royalty	◆◆◆◆◆
Feb-14	Concert IPO	Capital to advance internal programs more rapidly	◆◆◆◆◆
Apr-14	P2 data for CTP-499 in diabetic kidney disease	Showed signal, leading to end of P2 FDA meeting	◆◆◆◆
2H14	Avanir AVP-786 into Phase 2 in treatment res't dep'n	Phase 2 start triggers \$2mm milestone to Concert	◆◆◆
2H14	Jazz JZP-386 moves into P1 in narcolepsy	Completion of P1 in 2015 to trigger milestone	◆◆◆
2H14	CTP-354 completes MAD study	Important for '854 in a range of indications	◆◆◆
2H14	CTP-354 FDA discussion about higher doses	Could lead to '854 in pain, other indications	◆◆◆◆
2H14	CTP-354 into Phase 2 in spasticity (spinal)	Data for this indication, should help establish PoC	◆◆◆
2H14	CTP-499 end P2 Meeting w/FDA	Should clarify Phase 3, lead to SPA, pot. partner	◆◆◆◆
2H14	Celgene's CTP-730 to start Phase 1 study	Program progress good visibility for Concert	◆◆◆◆◆
2015	CTP-354 moves into Phase 2 in spasticity (MS)	Data for this indication, should help establish PoC	◆◆◆
2015	Avanir to move '786 into P3 in Alzheimer's agitation	Phase 3 start triggers \$2mm milestone to Concert	◆◆◆◆◆
2015	Additional Concert proprietary assets progress	Concert's DCE platform should broaden during 2015	◆◆◆◆◆
2015	Jazz JZP-386 completes P1 in narcolepsy	Completion of P1 triggers \$4 milestone	◆◆◆
2015	Celgene's CTP-730 Phase 1 data	Results trigger \$8mm milestone, visibility for Concert	◆◆◆◆◆
2016	CTP-354 Phase 2 data in spasticity (MS, spinal)	Data in the indications could be a major catalyst	◆◆◆◆◆

(Significance: ◆ least important., ◆◆◆◆◆ most important.)

Source: Ladenburg Thalmann BioPharmaceuticals Research.

Concert Pharmaceuticals – Upcoming Potential Catalyst for 2014, 2015

Concert's Proprietary Programs

- **CTP-354** has recently completed additional preclinical toxicology work, and Concert will submit the data to FDA to permit repeated dosing with the molecule above 6mg. We expect clearance from the agency during mid-2014, providing some room for this drug to be dosed higher, if necessary in the pain indications. '354's top-line receptor occupancy data, important for licensing, should be released mid-year.
- **CTP-354** should also move into phase 2 during 2H14 for spasticity associated with spinal cord injury, and in early 2015 for spasticity associated with multiple sclerosis. Data from these Phase 2 studies should read out during 2016. Other larger opportunities such as anxiety and pain also have the potential to begin during 2015.
- **CTP-499** has shown encouraging results in Phase 2 for diabetic kidney disease, and recent changes in trial endpoints have become helpful to the drug development for this indication. Clarity on Phase 3 trial design, an SPA, and a potential partnership could happen in that order over the next 12 months.

Concert's Partnered Programs

- **Avanir's AVP-786**, a deuterated Neudexta, could enter Phase 2 for treatment resistant major depressive disorders in 2H14, triggering a milestone. A related program from Avanir, AVP-923, is now fully enrolled in a Phase 2 study in patients who have material agitation associated with Alzheimer's disease. Avanir has stated repeatedly that it intends to move forward with AVP-786 for the indication, creating the potential for '786 to move into Phase 3 during 2015, with a favorable readout for the Phase 2 study.
- **Jazz's JZP-386**, a deuterated analog of Xyrem could move into Phase 1 for narcolepsy; When JZP-386 completes a P1 study with this molecule, a \$4 million milestone payment is due to Concert. Advancement of this next-gen version of Xyrem, a \$500+mm program, should be a catalyst for CNCE shares.
- **Celgene's deuterated CTP-730** is in development for inflammatory diseases, and is expected to enter the clinic this year, with Phase 1 completion expected in 2015, triggering an \$8mm milestone. Advancement of this program has the potential to be a material catalyst for CNCE shares, despite not knowing material program specifics at this point.

Concert Pharmaceuticals - Valuation

Concert and CNCE Shares Valuation. Because Concert's operations have the potential for significant revenue and earnings variability over the coming quarters and years, we value the company and its assets using a fully-taxed, risk-weighted net present value methodology for each of its assets. We note that with its multiple partnerships and advancing clinical programs, Concert has a diverse portfolio of therapeutic assets, and we assess the total value of these programs at \$22.49 per CNCE share, which underpins our \$24 CNCE price target (see Exhibit 4).

Valuing Concert's Proprietary Pipeline. Concert's two most advanced proprietary assets, CTP-354 for spasticity, and CTP-499 for diabetic kidney disease, have material valuation potential, in our view. CTP-354 for spasticity as a result of multiple sclerosis and/or spinal cord injury and possibly other indications such as anxiety and neuropathic

pain, is moving into Phase 2. We believe that a GABA-A modulator with familiar GABA mechanism, yet a distinct profile, with once-daily dosing and less sedation, should have material potential for consideration in spasticity, anxiety, and even pain settings, and have the potential to exceed \$1 billion in peak revenue. We value its collective opportunities at \$7.17 per share. CTP-499, for diabetic kidney disease appears to have achieved material validation after a more full analysis of its Phase 2 trial data, which bodes well for Phase 3 consideration. We assume licensing is to occur after discussions with FDA now that Phase 2 is winding up. Despite risks to the Phase 3 endpoints that remain, we believe more reasonable guidance is emerging along those lines from FDA, and estimate CTP-499 at \$1 billion peak revenue, and value the program at \$5.16 per CNCE share. Other less mature proprietary products are much more modest opportunities at this point and valued at \$0.31 per CNCE share, though proof of concept comes at Phase 1 for many of these deuterated programs, and this part of the portfolio could appreciate quite quickly.

Exhibit 4: Concert – CNCE Share NPV Summary (\$000, except per share amts)

Concert Pharmaceuticals - Assets	NPVValue	NPV/Share
CTP-354 - Spasticity, Anxiety, others	\$ 128,386	\$7.17
CTP-499 - Diabetic Kidney Disease	\$ 92,330	\$5.16
Other Proprietary Dueterated Assets	\$ 5,468	\$0.31
AVP-786 - CNS indications (Avanir)	\$ 69,267	\$3.87
JZP-386 - Sleep indications (Jazz)	\$ 42,464	\$2.37
CTP-730 - Inflammation (Celgene)	\$ 54,214	\$3.03
Other Celgene - Onc/Inflam (Celgene)	\$ 10,421	\$0.58
Other Corporate	\$ (74,354)	(\$4.15)
Net Cash	\$ 95,006	\$5.31
NOLs, Credits, etc.	\$ 10,052	\$0.56
Concert - Company Valuation	\$ 433,253	\$24.20

Source: Ladenburg Thalmann BioPharmaceuticals Research.

Valuing Concert's Collaborations. Regarding Concert's partnered portfolio, Avanir seems to be operating with a good urgency with AVP-786, and is exploring dextromethorphan's broad neurotransmitter receptor activity with the molecule, looking at the therapy in multiple additional indications in addition to depression, including agitation and dyskinesia. Because of these multiple indications, and its potential for its rapid advancement, the economics of this program are valued at \$3.87 per CNCE share. The Jazz program JZP-386 attempts to provide the Xyrem franchise with a product that doesn't have middle of the night dosing, and can help protect against potential loss of exclusivity. Xyrem is growing rapidly (+50% yr/yr) and is large at \$569 million in 2013, and making a more convenient dosing form with longer patent life appears to be a material opportunity, generating a \$2.37 NPV per CNCE share. Finally Celgene has not disclosed the mechanism of CTP-730 inflammation collaboration, though the very large regulatory milestones and peak revenue along the lines of Xyrem, give this collaboration a \$3.03 NPV, by our calculation. The remainder of the Celgene assets are estimated at \$0.58, and net cash, NOLs and the drag of general corporate expense totals \$1.72 per CNCE share, yielding the \$24.20 total, driving our \$24 CNCE shares price target.

Concert Revenue Estimates. Concert's revenue of \$19.5 million during 2011 and \$12.8 million from collaborations with existing and previous partners grew materially in 2013 to \$25.4 million, due to the signing of the material Celgene collaboration and Concert booking a part of that deal's \$35 million upfront payment. Revenue is estimated to return just above \$10.3 million in 2014, however, as a Celgene-like deal is not anticipated this year. With material variability in the timing of deal-related milestones, Concert's revenue is estimated to rise to \$27.5 million in 2015 as a portion of the anticipated licensing milestones for CTP-499 is recorded, before dropping down to \$22.3 million during 2016. An uptick in revenue to \$49.8 million is expected in 2017, moving to \$351 million in 2019

with the beginning of CTP-354 US revenue, and increasing to \$526 million in 2020 with the beginning of CTP-449 royalty revenue as well. Concert's revenue growth is expected largely due to progress across all of its collaborations in those years, with the Celgene collaborations and their expected regulatory milestones having the most influence.

Concert Earnings Estimates. Concert revenue of \$19.5 million in 2011 and \$12.8 million in 2012 was not enough to generate a profit in those years, as expenses of approximately \$31 million each year dominated operations. The Celgene upfront lowered the loss for Concert in 2013 to \$6 million, though modest increases in company expenses beginning in 2014 due to Concert becoming a public company, and a reduction in revenue due to the lack of a Celgene-like upfront that year, increased the expected loss materially to \$20.3 million. Variability in the total milestones from 2015 through 2017 results in a loss in the first two of those years, and a \$5.95 million profit in 2017. From 2018 through 2020 (and beyond) the expected material milestones for Concert, as well as CTP-354 revenue, move it to material profits, despite expected increases in R&D and SG&A.

Concert's Cash Flow Generation. In general, Concert's cash flow has largely tracked, and should flow in the same manner and direction of its earnings, with the exception that in February 2014, Concert raised approximately \$87 million from its initial public offering. In terms of additional one-time items, in 2015 we model an additional \$25 million upfront payment for US rights to CTP-499 for diabetic kidney disease, and in 2016 we model an additional \$20 million upfront cash payment for the international rights for CTP-354 in 2015, and \$15 million for international rights to CTP-499. Given the expected operations of the company, which include material milestones from existing collaborations, we do not foresee any specific new cash raises.

Concert Pharmaceuticals – In Depth

Deuterium Medicinal Chemistry - In Brief

Deuterium – Fast Facts. Deuterium is one of two naturally-occurring stable isotopes of hydrogen. The far more common hydrogen isotope, protium, has no neutron in its nucleus. Deuterium, however, has a nucleus that contains both one proton and one neutron. Deuterium's symbol is D or ^2H . Deuterium possesses physicochemical properties that are similar to those of hydrogen, but its atomic mass is double that of hydrogen due to the presence of the additional neutron. Deuterium has a presence in the ocean water of about 0.0156% per each hydrogen atom, and is generally produced by starting with water, which contains a small amount of heavy water, where deuterium replaces the hydrogen in the water molecules; this heavy water is then separated for the deuterium. According to Concert (and multiple other sources), the average human body contains about 2 grams of deuterium.

Deuteration – General Effects on a Molecule. Chemically, deuterium behaves comparably to ordinary hydrogen, but there are differences in bond energy and bond length for compounds that are deuterated isotopes; these differences are larger than the isotopic differences in any other element. Bonds involving deuterium (and another more rare hydrogen isotope, tritium) are somewhat stronger than the corresponding bonds in hydrogen, enough to occasionally create significant changes in biological reactions. This is because many drugs are metabolized by pathways that involve the breaking of carbon-hydrogen bonds, and having stronger deuterium-carbon bonds or bonds helps deflect or prevent the breakdown of the bonds. Incorporation of deuterium in place of hydrogen at selective points in the molecule therefore has the potential of retaining the biochemical

potency and selectivity of a physiologically active compound, while potentially modifying its metabolic properties, and substantially altering its therapeutic profile.

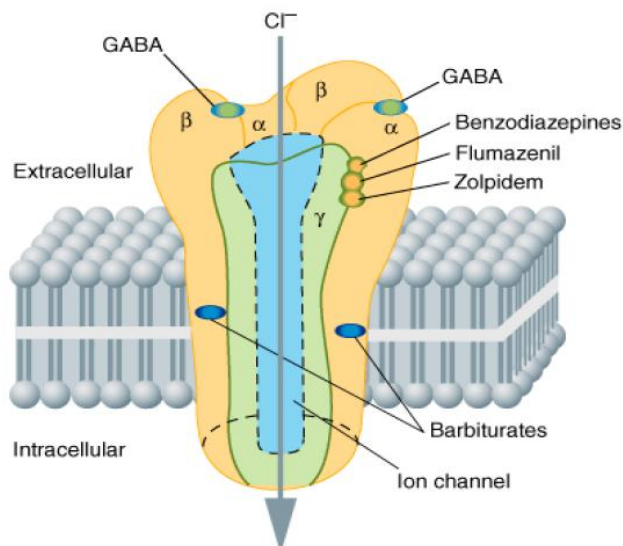
Deuteration in Drug Development: Material Advancements, Fresh IP. Deuterated compounds have been used in the clinic for some time as probes for pharmacokinetic and metabolism studies of the related non-deuterated therapeutics, though only relatively recently has deuterium modification received attention as an approach to creating enhanced therapeutics—Concert Pharmaceuticals is a leader in this field of medicinal chemistry. Deuteration can enhance bioavailability and improve the half-life of a compound, and deuterium substitution at specific molecular positions can improve metabolic stability, reduce or eliminate the formation of toxic metabolites, or even increase the formation of desired active metabolites. However, when deuterium is incorporated at a known site of oxidative metabolism, because of the complexity of the process, deuterium's effects on the absorption, distribution, metabolism, and excretion of a molecule is inherently unpredictable. For example, complex enzymatic metabolism may often have other rate-limiting steps, and/or the presence of a stabilized carbon-deuterium bond may cause metabolism to shift to another site or sites on the molecule. Since the behavior of the deuteration of a molecule is largely unpredictable (non-obvious), deuterated compounds are therefore able to generate new intellectual property.

Deuteration May Result In A Truncated Development Scheme. The application of deuterium to a molecule has the potential, depending upon specifics of the program, to have some elements of its development program truncated/reduced. For instance, with the Avanir program, FDA has permitted Avanir to utilize data generated from its dextromethorphan-based program (in this case, a different asset called AVP-923) and apply it to the development package for the deuterated dextromethorphan analog AVP-786 that Avanir licensed from Concert. This should help '786 without duplicating the entire clinical program of '923, but it can instead be substituted when the POC in a particular indication has been established. It is uncertain if this type of consideration is possible for all programs, though when it is, it should be clearly beneficial in terms of development time, spending, and efficiencies.

Concert Pharmaceuticals - Proprietary Programs in the Clinic

CTP-354 – A Non-Sedating GABA Modulator for Spasticity, Anxiety, and Pain

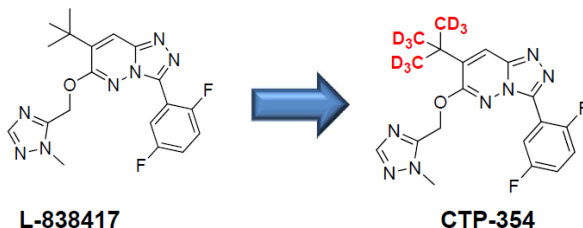
GABA-A Receptor Background. GABA is the major inhibitory neurotransmitter in the nervous system, and has been well characterized and studied over several decades. (Its stimulatory counterpart is glutamate.) The GABA-A receptor is a well-characterized, ionotropic receptor that is activated by GABA, and is the target of multiple well validated therapeutics, such as the benzodiazepines (e.g., Valium, Xanax, and others). Indications for therapeutics targeting this receptor include anxiety, insomnia, and spasticity, among others. The GABA-A receptor is a pentameric protein with subtypes composed of α , β , and γ subunits (Exhibit 5). The active site of the GABA-A receptor is the binding site for GABA and for several therapeutics as well. The GABA-A receptor also contains a number of allosteric binding sites that modulate the activity of the receptor indirectly.

Exhibit 5: The GABA-A Receptor and Therapeutic Binding Sites

Source: Katzung BG, Masters SB, Trevor AJ: Basic & Clinical Pharmacology, 11th Edition.

GABA-A Activation. Typical benzodiazepines such as Valium, Xanax, and others, activate the GABA-A receptor in a non-selective manner by binding to an allosteric site at the interface of a γ subunit and either an $\alpha 1$, $\alpha 2$, $\alpha 3$, or $\alpha 5$ subunit. Benzodiazepines are well known for their efficacy in anxiety, spasticity, and insomnia, though their use is limited due to poor tolerance, sedation, and drug interactions, some of which is believed to occur due to a relative lack of GABA-A subtype selectivity. Preclinical work indicates that the sedative, ataxic, and dependence effects of benzodiazepines are mediated by the $\alpha 1$ subtype (sleep drugs such as Ambien activate the $\alpha 1$ subunit). Agonism at the $\alpha 2$ and $\alpha 3$ subtypes is believed to be associated with anxiolytic, analgesic, and spasmolytic activities, whereas $\alpha 5$ subtype activity is believed to have cognitive effects.

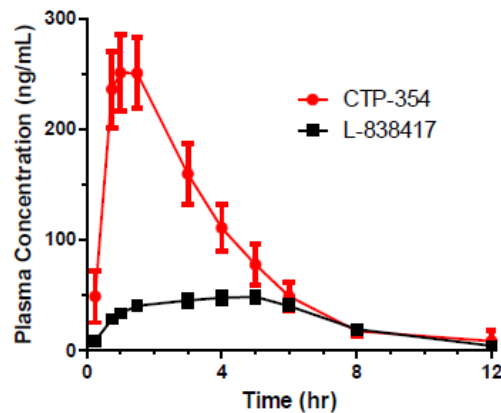
CTP-354 Development. CTP-354 is a subtype-selective GABA-A modulator, and Concert is developing it for use in spasticity, neuropathic pain, and anxiety disorders. CTP-354 is an analog of L-838417, a compound that was developed as part of Merck's research effort towards subtype-selective GABA-A anxiolytics that could potentially have reduced sedation and ataxia. The Merck (MRK, \$58.86; Not Rated) compound was selected due to its promising pharmacology: L-838417 demonstrated an attractive subtype-selective GABA-A profile, with partial agonism at $\alpha 2$, $\alpha 3$, and $\alpha 5$ subtypes, and antagonism at $\alpha 1$. L-838417 has been reported to be efficacious in preclinical models of inflammatory and neuropathic pain, in addition to having anxiolytic activity and strong muscle relaxant effects. However L-838417 possessed a poor preclinical pharmacokinetic profile, and despite considerable preclinical work, was not advanced materially into the clinic.

Exhibit 6: CTP-354 (C-21191) – A Deuterated GABA-A Modulator

Source: Liu, et al. C-21191: Deuterated Subtype-Selective GABA-A Modulator for Spasticity and Neuropathic Pain, Neuroscience 2011.

Concert deuterated L-838417 as mentioned above, by incorporating nine deuterium atoms in place of hydrogen at key positions to overcome its poor pharmacokinetics (Exhibit 6), thus creating CTP-354 (formerly known as C-21191). With Concert's selective incorporation of deuterium, the pharmacokinetics of CTP-354 has been dramatically improved (Exhibit 7). Concert moved CTP-354 into the clinic and is developing it in multiple attractive indications.

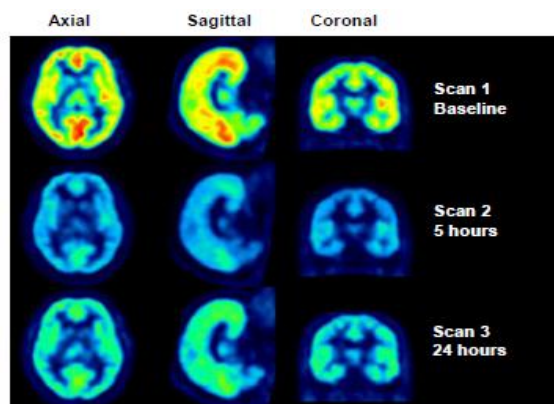
Exhibit 7: Improved PK of Deuterated CTP-354 vs. L-838417 (Rat data)



Source: Liu, et al. C-21191: Deuterated Subtype-Selective GABAA Modulator for Spasticity and Neuropathic Pain, Neuroscience 2011.

CTP-354 Retains Selective GABA-A Pharmacology. Importantly, deuterium substitution does not change the intrinsic pharmacology of CTP-354: Both L-838417 and CTP-354 have demonstrated binding to the benzodiazepine site of the GABA receptor with no significant off target activities. Specifically, CTP-354 has been shown to lack agonist activity at the GABA-A $\alpha 1$ -receptor subtype, which should confer a lack of sedation with the compound, but it also has potent partial agonist activity at other key GABA-A receptor subtypes that was noted with L-838417. CTP-354's broader profile is shaping up well, as it has shown no apparent sedation at therapeutic doses.

Exhibit 8: CTP-354 Brain Receptor Occupancy

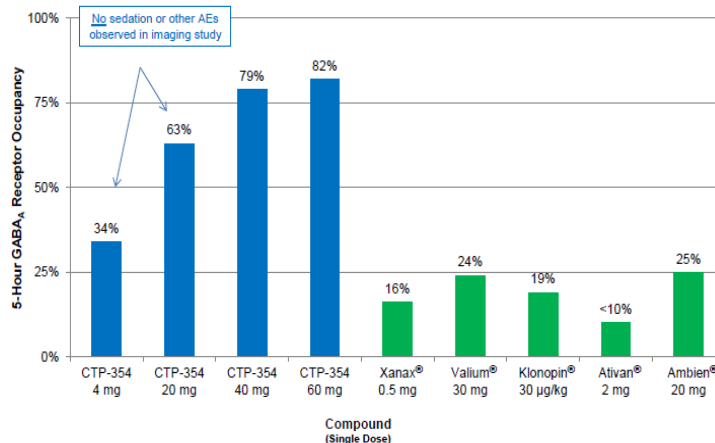


Source: Concert Pharmaceuticals corporate presentation May 2014.

CTP-354 Clinical Development Appears Promising. Concert has moved CTP-354 into the clinic, where it has shown promise. The single ascending dose (SAD) studies have demonstrated a long plasma half-life, consistent with once-daily dosing, with no serious adverse events. The molecule has sustained high brain receptor occupancy (Exhibit 8), a

key characteristic for these compounds. Importantly, CTP-354 appears less sedating at higher GABA-A receptor occupancy levels than benzodiazepines (Exhibit 9); no sedation, ataxia, or adverse effects have been observed with a single 20mg dose that yields 60% receptor occupancy at 24 hours. Concert has modeled that the 6mg dose should achieve this level of receptor occupancy.

Exhibit 9: CTP-354: Less Sedating At Higher Receptor Occupancy Than BZDs



Source: Concert Pharmaceuticals corporate presentation May 2014.

CTP-354 Clinical Considerations: Doses Above 6mg To Be Considered Over Time.

Phase 1 results in a single ascending dose trial in 71 healthy volunteers in doses ranging from 0.15mg to 60mg show that a maximum tolerated dose was not reached, despite receptor occupancy saturation. The long plasma half life supports once-daily dosing, and a multiple ascending dose trial is underway, which should enroll up to 62 healthy volunteers. Dosing was from 2mg to 6mg over 10 days, and due to a partial clinical hold, dosing is limited to 6mg for now—no specific adverse event was seen, but due to a lack of MTD, Concert was limited to 6mg in MAD and 60mg in SAD studies. Concert is conducting studies designed to permit increased doses, which have been completed and are to be discussed with FDA shortly, according to the company. Phase 2 trials in the spasticity indication are to begin in 2H14, and they could progress fairly rapidly. In summary, with a profile demonstrating low sedation, combined with activity not only in spasticity, but in anxiety and neuropathic pain settings, we believe the competitive positioning of CTP-354 is shaping up to be quite promising.

Spasticity Description/Background. Spasticity is characterized by involuntary muscle spasm; it can result from a wide range of disorders, including multiple sclerosis (MS), spinal cord injury, cerebral palsy, amyotrophic lateral sclerosis (ALS or Lou Gehrig's disease), stroke, and hereditary spastic paraplegia. Symptoms can range from mild muscle tightness to more severe symptoms, including the painful inability to move limbs that can result in disability and diminished quality of life. The American Association of Neurological Surgeons estimated in 2006 that there were 12 million patients suffering from spasticity, including about 80% of people with MS. Of the estimated 400,000 patients with MS in the US, Concert estimates that at least 34% (140,000 patients), suffer from moderate to severe spasticity. Regarding spasticity associated with spinal cord injury, approximately 270,000 people in the US suffer from that condition (with 12,000 new incidences annually) according to Concert. 65% to 78% of those spinal cord injury patients experience some degree of spasticity, and Concert estimates that 28% to 46% of

those (80,000 to 120,000 patients) suffer from problematic spasticity and could be candidates for therapy (Exhibit 10).

Exhibit 10: CTP-354 Initial Spasticity Target Markets

	US Disease Prevalence	% Treatable Spasticity*	Treatable Population
MS	400,000	34+%	140,000
SCI	270,000	28-46%	80,000–120,000

Source: Concert Pharmaceuticals corporate presentation March 2014.

Treatment of spasticity is through exercise, physical therapy, pharmacologic therapy, or surgery. Pharmacologic therapies considered include: baclofen (Lioresal) a GABA-B agonist, and tizanidine (Zanaflex) an α_2 adrenergic agonist. Drowsiness and sedation are seen with both, and hypotension and multiple drug/drug interactions are seen with Zanaflex. Other therapeutics that may be considered include botulinum toxin (Botox) which is injected into the affected muscles, and a cannabis extract containing dronabinol and cannabidiol (Sativex) is also under development for spasticity associated with MS and is approved in the EU.

CTP-354 Economics in Spasticity, Anxiety, and Other Indications. With regard to CTP-354's use in spasticity, due to the familiarity with the GABA-A receptor-related mechanism, and the compound's potential once-daily profile, we assume a peak penetration of one-third of the addressable market for both MS and spinal cord injury, or just over 79,000 patients treated at peak in the US. We assume \$5,000 per patient per year at peak, resulting in peak revenue for CTP-354 of \$400 million in the US for this indication. For EU/international revenue, we assume slightly greater patient numbers, though lower pricing, and arrive at roughly the same figures. We model a partner for international rights with Concert garnering \$20 million upfront, \$150 million in milestones, and 15% to 25% royalties on international sales, to be signed post-Phase 2 data. We assume a 2019 launch, and also assume additional indications for anxiety, a natural, since the BDZs are widely considered there, and in various pain settings where '354 has shown activity.

Exhibit 11: CTP-354 – NPV Calculation to Concert (2014 – 2030)

	2014E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	2024E	2025E	2026E	2027E	2028E	2029E	2030E
CTP-354 - Spasticity, Anxiety	-	-	-	-	-	35,000	250,000	450,000	700,000	975,000	1,225,000	1,425,000	1,675,000	1,875,000	2,125,000	2,225,000	2,325,000
US Sales	-	-	-	-	-	25,000	175,000	275,000	425,000	600,000	750,000	850,000	1,000,000	1,100,000	1,250,000	1,250,000	1,250,000
Int'l Sales	-	-	-	-	-	10,000	75,000	175,000	275,000	375,000	475,000	575,000	675,000	775,000	875,000	975,000	1,075,000
Int'l Royalty Rate (15%-25%)	-	0%	0%	0%	0%	15%	15%	15%	20%	20%	20%	20%	25%	25%	25%	25%	25%
Int'l Royalty	-	-	-	-	-	1,500	11,250	26,250	41,250	75,000	95,000	115,000	168,750	193,750	218,750	243,750	268,750
Upfront/Milestones	-	-	20,000	10,000	10,000	50,000	-	-	-	-	-	25,000	-	-	-	-	100,000
Total Revenue to Concert	-	-	20,000	10,000	10,000	76,500	186,250	301,250	466,250	675,000	845,000	990,000	1,168,750	1,293,750	1,468,750	1,493,750	1,618,750
Concert Expenses	-	-	-	-	-	1,250	8,750	13,750	21,250	30,000	37,500	42,500	50,000	55,000	62,500	62,500	62,500
COGS (US only)	-	-	-	-	-	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%
COGS pct	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%
SG&A	5000	10,000	12,000	12,000	12,500	12,500	10,000	10,000	10,000	10,000	5,000	5,000	-	-	-	-	-
R&D	5,000	10,000	12,000	13,000	15,000	53,750	73,750	83,750	96,250	110,000	122,500	127,500	135,000	140,000	147,500	152,500	157,500
Total Expense	5,000	10,000	12,000	13,000	15,000	53,750	73,750	83,750	96,250	110,000	122,500	127,500	135,000	140,000	147,500	152,500	157,500
Net to Concert	(5,000)	(10,000)	8,000	(3,000)	(5,000)	22,750	112,500	217,500	370,000	565,000	722,500	862,500	1,033,750	1,153,750	1,321,250	1,341,250	1,461,250
NPV/year	-4952.4	-7555.3	4646.1	-1340.2	-1718.2	4129.8	14573.9	20125.8	24455.0	26673.9	24341.5	20755.9	17769.3	14165.7	11576.6	8394.2	6532.3
Discount Rate	15%	30%	30%	30%	30%	40%	40%	40%	40%	40%	40%	40%	40%	40%	40%	40%	40%
Tax rate used	0%	0%	0%	0%	0%	0%	0%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
NPV Taxed (effective rate)	\$ (4,952)	\$ (7,555)	\$ 4,646	\$ (1,340)	\$ (1,718)	\$ 4,130	\$ 14,574	\$ 13,082	\$ 15,896	\$ 17,338	\$ 15,822	\$ 13,491	\$ 11,550	\$ 9,208	\$ 7,525	\$ 5,456	\$ 4,246
Total Value																	\$193,325
NPV Per Share																	\$10.80
Total Value taxed																	\$ 128,386
NPV/share taxed																	\$7.17

Source: Ladenburg Thalmann BioPharmaceuticals Research.

CTP-354: Material Potential. With a familiar yet distinct GABA-A mechanism, and broad activity in multiple settings, and the additional larger indications adding over \$1 billion in

total revenue at peak, we estimate that collectively these indications provide the molecule with revenue totals in excess of \$2 billion. Given that some safety work that still needs to be accomplished, despite the well-validated GABA-A receptor mechanism, we assign a relatively high discount of 40% per annum. Taken together, we estimate the fully-taxed, risk weighted economics of CTP-354 to Concert at \$7.17 per CNCE share (Exhibit 11). We note that as Concert ticks off the development items, and '354's risk profile is reduced, the potential for a material increase in this program's NPV to Concert exists.

CTP-499: A PDE Inhibitor for Diabetic Kidney Disease

Diabetic Kidney Disease Background. Diabetic kidney disease (diabetic nephropathy) is a condition where the ability of a person's kidney to filter blood is materially impaired, which ultimately can result in the need for dialysis and renal transplantation. Type 2 diabetes is the leading cause of chronic kidney disease, and many patients with this disease continue to experience a decline in renal function despite treatment with standard of care therapies, such as angiotensin modulators (ACEs or ARBs). There are between 900k and 1.8 million type 2 diabetics with macroalbuminuria in the US, according to Concert. Concert is developing CTP-499 as an add-on to the standard-of-care designed to slow progression of patients with the condition toward kidney failure.

CTP-499 Development Rationale. Type 2 diabetic kidney disease is a multifactorial disease involving inflammatory, oxidative and fibrotic processes. Phosphodiesterases (PDEs) are a family of enzymes that regulate the pathways involved in these processes. CTP-499 is a deuterated analog of 1-(S)-5-hydroxyhexyl-3,7-dimethylxanthine (or HDX), which is an active metabolite of pentoxifylline (Trental) that been deuterated to improve the compound's metabolic stability and allow greater exposure to pharmacologically active metabolites. Pentoxifylline is a broad spectrum inhibitor of phosphodiesterase (PDEs), that was approved more than 30 years ago for the treatment of intermittent claudication (lower limb pain resulting from obstructed arteries). Through multiple complex mechanisms pentoxifylline has been characterized as having a role in reducing inflammatory and fibrotic processes and has specifically been shown to reduce $\text{TNF}\alpha$ production. PDEs are enzymes that are thought to play an important role in the progression and worsening of diabetic kidney disease, and as a result pentoxifylline has been reported in several clinical studies--by Lin, et al. in *American Journal of Kidney Disease* in 2008, by Perkins in *American Journal of Kidney Disease* in 2009, and by Navarro, et al. in *Journal of the American Society of Nephrology* in 2005, among others--to have beneficial effects on proteinuria and renal function decline, important measures in the progression of kidney disease.

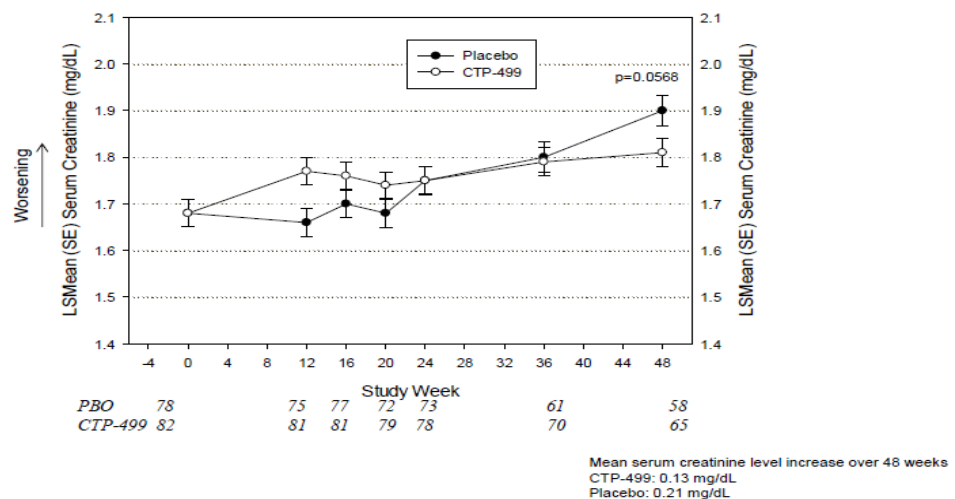
CTP-499's Mechanism: A Role in Renal Disease and Possibly Beyond. CTP-499, a deuterated active metabolite of pentoxifylline, is also a novel, oral multi-subtype selective inhibitor of phosphodiesterases (PDEs). In preclinical studies, CTP-499 inhibits PDE 2, 3, 4, and 5. In addition to multiple preclinical studies, CTP-499 has been examined in an extensive Phase 2 study in diabetic kidney disease (described in detail below), where it has demonstrated encouraging results. We note that the anti-inflammatory and antifibrotic effects of the parent drug pentoxifylline have suggested a role for that molecule in reducing the consequences of hepatic fibrosis and even cirrhosis in various settings. For instance, pentoxifylline has been studied in settings such as alcoholic cirrhosis, fibrosis due to radiation, and is being evaluated in the more severe types of non-alcoholic fatty liver disease, such non-alcoholic steatohepatitis (NASH). Given a similar PDE inhibition mechanism, CTP-499 could also have consideration in these additional hepatic settings, and in particular NASH, in addition to diabetic kidney disease, which create an interesting long term course of development for the molecule.

CTP-499 in Diabetic Kidney Disease: Phase 2 Trial Specifics. The Phase 2 trial was recently completed for CTP-499. Part 1 was a double-blind, parallel, two-arm study evaluating the safety and efficacy of 600 mg of CTP-499 bid vs. placebo for 24 weeks which enrolled 182 patients. Part 2 was a blinded 24-week extension in which all who completed Part 1 were eligible to continue on CTP-499 or placebo; 143 patients enrolled in this part and 124 completed. Concert has analyzed the combined 48 weeks of data from Parts 1 and 2 of the clinical trial for 123 of the 124 patients that completed Part 2. Top line results for the first 48 weeks are discussed below. (There is also a 48 week open-label extension study which has enrolled 102 patients.) The primary endpoint was the change in urine albumin to creatinine ratio (UACR) at 24 weeks. Key secondary endpoints included changes in serum creatinine and eGFR. Enrollment criteria included UACR of ≥ 200 mg/g for men, and 300 mg/g for women, and eGFR of 23 to 89 mL/min/1.73 m², indicating mild to moderately severe type 2 diabetes.

CTP-499 Trial Results Encourage. In this trial, CTP-499 did not demonstrate a statistically significant difference at the primary endpoint of UACR at 24 weeks. At 48 weeks, the mean level in those taking CTP-499 increased by 0.13 mg/dL versus an increase of 0.21 mg/dL for placebo (Exhibit 12). We note that while UACR is used as an indicator of activity in diabetic kidney disease trials, it is not an accepted Phase 3 endpoint by FDA for US approval in these patients. Importantly, 499 did show additional encouraging results in the study. These include:

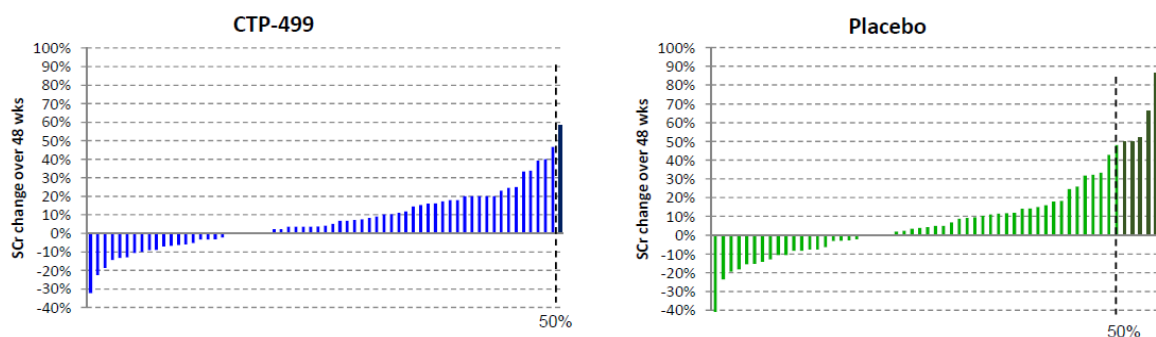
- Even though the trial was not powered for statistical significance with respect to serum creatinine or eGFR, and 499s results at 48 weeks were nearly significant on serum creatinine levels (Exhibit 12) and there was a positive trend in eGFR levels;

Exhibit 12: CTP-499 - Shows Trend Against Serum Creatinine Increases



Source: Concert corporate presentation May 2014.

- The reduction in the number of patients with large declines in eGFR (a worsening marker) was nearly significant, and a reduction in patients with large increases in serum creatinine (another worsening marker) was significant (Exhibit 13), though this was examined in a post-hoc analysis;

Exhibit 13: CPT-499 in Phase 2: Protects Against Large Increases in Serum Creatinine**CTP-499**

- 1/65 (1.5%) ≥50% increase

p = 0.026**Placebo**

- 6/58 (10.3%) ≥50% increase

Except for one placebo patient all instances of a ≥50% increase in serum creatinine after 48 weeks occurred in patients with a baseline UACR greater than the median value of 850 mg/g

Source: Concert corporate presentation June 2014.

- Almost all of those with the greatest decline in eGFR (>30%) occurred in those patients with UACR above the median of approximately 850 m/g, providing the potential for an enriched trial group to be enrolled in a subsequent clinical trial, which would mean fewer patients would be required for such a trial.

Phase 2 Results Encouraging For A Phase 3 Trial. Importantly, the endpoints for diabetic kidney disease are evolving favorably for the industry and for Concert. This is due to the multiple recent trial failures with a number of therapies, so the migration to less onerous endpoints appears to be underway. Specifically, the reduction in the number of patients with large declines in eGFR, or a reduction in those with large increases in serum creatinine specifically defined as time to >50% increase in serum creatinine compared to placebo, may be acceptable endpoints in Phase 3 trials in type 2 diabetes patients with kidney disease.

FDA Recently Granted and SPA Utilizing A New Endpoint. This new Phase 3 endpoint has recently been granted by FDA in a Special Protocol Assessment (SPA) for Nephrogenex. This endpoint migration comes through discussions sponsored by the National Kidney Foundation and FDA in December 2012, which concluded as a result of an extensive analysis of kidney disease studies that there is a highly significant correlation with >50% increase in serum creatinine and time to end stage renal disease. We believe that solidifying a Phase 3 trial with those endpoints could be within reach of CTP-499. Solidification of these endpoints with FDA has the potential to result in licensing of CTP-499. The company is now beginning its dialog with FDA regarding its end of Phase 2 meeting and potential Phase 3 trials for CTP-499, and we believe Concert is likely to pursue an SPA for the indication. We believe this solidification of a development pathway could lead to a licensing deal for '499, and we model that being achieved in 2015 as we consider our estimates for the drug.

Exhibit 14: CTP-499 – NPV Calculation to Concert

	2014E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	2024E	2025E	2026E	2027E	2028E	2029E	2030E
CTP-499 - Diab. Kidney Dis. + more	-	-	-	-	-	-	105,000	325,000	600,000	825,000	1,025,000	1,200,000	1,375,000	1,525,000	1,675,000	1,825,000	1,975,000
US Sales	-	-	-	-	-	-	70,000	250,000	425,000	550,000	650,000	725,000	800,000	850,000	900,000	950,000	1,000,000
Int'l Sales	-	-	-	-	-	-	35,000	75,000	175,000	275,000	375,000	475,000	575,000	675,000	775,000	875,000	975,000
US Upfront/Milestones	-	25,000	-	-	10,000	20,000	50,000	-	-	-	50,000	-	-	-	-	-	100,000
US Royalty Rate	-	0%	0%	0%	0%	0%	15%	15%	15%	20%	20%	20%	20%	20%	20%	20%	25%
US Royalty	-	-	-	-	-	-	10,500	37,500	63,750	110,000	130,000	145,000	160,000	170,000	180,000	190,000	250,000
Total US Rev to Concert	-	25,000	-	-	10,000	20,000	60,500	37,500	63,750	110,000	180,000	145,000	160,000	170,000	180,000	190,000	350,000
Int'l Upfront/Milestones	-	-	15,000	-	5,000	15,000	25,000	-	-	25,000	-	-	-	-	-	-	-
Int'l Royalty Rate	-	0%	0%	0%	0%	0%	15%	15%	15%	20%	20%	20%	20%	20%	20%	20%	25%
Int'l Royalty	-	-	-	-	-	-	5,250	11,250	26,250	55,000	75,000	95,000	143,750	168,750	193,750	218,750	243,750
Total Int'l Rev to Concert	-	-	15,000	-	5,000	15,000	30,250	11,250	26,250	80,000	75,000	95,000	143,750	168,750	193,750	218,750	243,750
Total Revenue to Concert	-	25,000	15,000	-	5,000	15,000	105,500	287,500	488,750	685,000	780,000	870,000	960,000	1,020,000	1,080,000	1,140,000	1,250,000
Concert Expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
COGS	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
COGS pct	na	na	na	na	na	na	na	na	na	na	na	na	na	na	na	na	na
SG&A	250	1,000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
R&D	5,000	5,000	1,000	500	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Concert Expenses	5,250	6,000	1,000	500	-	-	-	-	-	-	-	-	-	-	-	-	-
Net to Concert	(5,250)	19,000	14,000	(500)	5,000	15,000	105,500	287,500	488,750	685,000	780,000	870,000	960,000	1,020,000	1,080,000	1,140,000	1,250,000
Days to End	25.0	390.0	756.0	1121.0	1486.0	1851.0	2217.0	2582.0	2947.0	3312.0	3678.0	4043.0	4408.0	4773.0	5139.0	5504.0	5869.0
Years to end	0.1	1.1	2.1	3.1	4.1	5.1	6.1	7.1	8.1	9.1	10.1	11.1	12.1	13.1	14.1	15.1	16.1
NPV/year	-5209.4	13787.7	7519.3	-252.0	1270.7	2279.1	8988.3	16329.5	18506.8	17291.9	13112.1	9750.1	7172.5	5080.5	3582.2	2520.8	1842.7
Discount Rate	12%	35%	35%	25%	40%	45%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Tax rate used	0%	0%	0%	0%	0%	0%	0%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
NPV Taxed (effective rate)	\$ (5,209)	\$ 13,788	\$ 7,519	\$ (252)	\$ 1,271	\$ 2,279	\$ 8,988	\$ 10,614	\$ 12,029	\$ 11,240	\$ 8,523	\$ 6,338	\$ 4,662	\$ 3,302	\$ 2,328	\$ 1,639	\$ 1,198
Total Value		\$126,762															
NPV Per Share		\$7.08															
Total Value taxed		\$92,330															
NPV/share taxed		\$5.16															

Source: Ladenburg Thalmann BioPharmaceuticals Research.

CTP-499 Economics to Concert. As significant Phase 3 trials are contemplated with CTP-499, we expect the molecule to ultimately be developed in a partnership. We assume international licensing could occur in 2H14 after Concert's discussions with FDA at their end of Phase 2 meeting, and that could be a validating event for the CTP-499 program; we model a licensing deal occurring in 2015. For revenue modeling purposes, since CTP-499 is being partnered at a later stage than the other Concert molecules, but does not have an existing brand it is extending, we expect deal terms slightly north of the Jazz and Avanir deals, somewhat in line with that of Celgene, though with a higher royalty and more modest milestones due to regulatory success.

The potential for an effective compound in the setting is quite material, as there are more than one million diabetics in the US with macroalbuminuria (>300mg/g). If successful in Phase 3, we believe pricing of a therapy in the range of \$10,000 to \$20,000 per year might be considered for such a treatment, with 50,000 potential candidates for the therapy at peak, providing an estimated US peak revenue potential exceeding \$1 billion in the US, with similar potential internationally. Though we do have some higher risk weightings for this program, given the questions about pivotal trial endpoints, with its considerable revenue potential, we assess the fully taxed, risk-weighted CTP-499 NPV at \$5.16 per CNCE share (Exhibit 14).

Diabetic Kidney Disease Statistics. Approximately 26 million individuals in the US in 2010 had diabetes and 90% to 95% were type 2 diabetes; with kidney disease a serious manifestation of the condition. There are between 900k and 1.8 million type 2 diabetics with macroalbuminuria in the US, and diabetic kidney disease is now the nation's leading cause of dialysis, kidney transplant, and death from kidney failure. According to Concert, the transition of a patient to dialysis increases patient cost by ~\$60,000 per year. Patients with both type 2 diabetes and chronic kidney disease have a 270% increase in mortality compared to type 2 diabetics without chronic kidney disease (NHANES Survey in 2011).

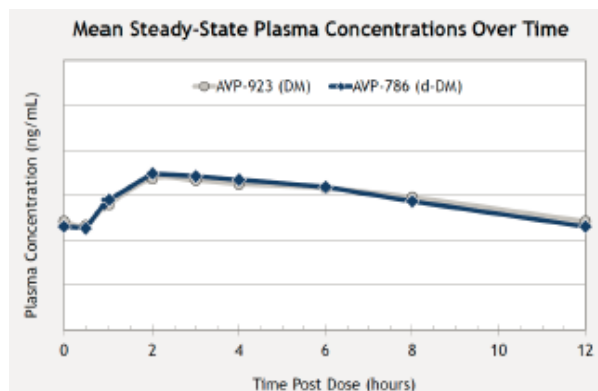
Concert's Material Partnerships – Avanir, Jazz, and Celgene

Avanir – AVP-786, A Deuterated Neudexta

Neudexta: Potential for Deuterium Improvement. In October 2010, FDA approved Avanir Pharmaceutical's Neudexta (AVP-923), a proprietary combination of dextromethorphan and quinidine, for the treatment of pseudobulbar affect (PBA). Avanir launched the drug in February 2011, and as of March 2014, the brand is annualizing at approximately \$100 million in revenue. Neudexta consists of dextromethorphan, an NMDA receptor antagonist and sigma-1 agonist, and the enzyme inhibitor quinidine, a CYP450 2D6 inhibitor, which serves to increase the bioavailability of dextromethorphan. Pseudobulbar affect (PBA) occurs secondary to a variety of neurological conditions, and is characterized by involuntary, sudden, and frequent episodes of laughing and/or crying; its episodes occur out of proportion to the person's emotional state.

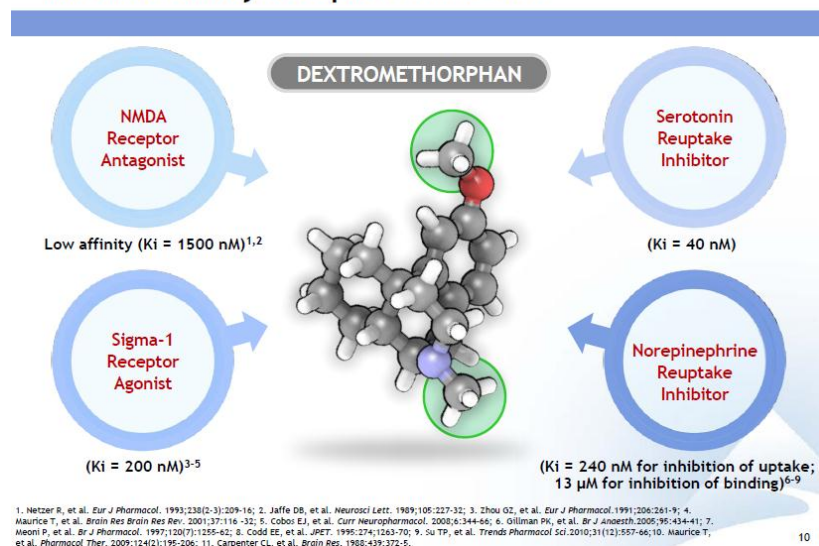
Avanir Deal Background. In February 2012, Concert inked a license agreement with Avanir for worldwide rights to develop and commercialize Concert's deuterated dextromethorphan, now known as AVP-786 (or D-DM). The agreement includes the rights to multiple D-DM compounds, and Avanir has overall responsibility for research, development and commercialization of AVP-786. AVP-786 includes one of the D-DM analogs licensed to Avanir, and is a combination of a deuterium-substituted dextromethorphan analog and an ultra-low dose of quinidine. The deuteration results in a similar pharmacokinetics for Neudexta and AVP-786 (Exhibit 15), yet allows for an ultra low-dose of quinidine to be included in AVP-786, reducing chances for a patient to experience QTc prolongation, and other unpleasant GI adverse events associated with the quinidine.

Exhibit 15: AVP-786 Has Similar Pharmacokinetics Compared to AVP-723



Source: Concert Pharmaceuticals corporate presentation Feb 2014

AVP-786 and AVP-923: Truncated Development Timelines. Dextromethorphan acts on sigma-1 and NMDA receptors and is an inhibitor of serotonin and norepinephrine (Exhibit 16). With AVP-786, incorporation of deuterium into specific positions of the dextromethorphan molecule strengthens the chemical bonds and reduces susceptibility to enzyme cleavage and first pass metabolism without altering dextromethorphan's pharmacology, according to Avanir. In addition, it should be noted that Avanir is enrolling patients in a Phase II trial to investigate the use of AVP-923 for the treatment of levodopa induced dyskinesia (LID) in patients with Parkinson's disease (PD), and Avanir was able to gain FDA acceptance that it may apply results from this AVP-923 study (and others) to the AVP-786 program, potentially significantly truncating AVP-786's development timeline in multiple indications.

Exhibit 16: Dextromethorphan: Multiple Receptor Activity in the CNS**DM Binds to Key Receptors in the CNS**

Source: Avanir Corporate presentation, May 2014.

Dextromethorphan: Multiple Receptor Activity, Multiple Indications for '786. With broad activity of dextromethorphan on multiple key CNS receptors such as NMDA, serotonin, norepinephrine, and sigma-1, Avanir is developing AVP-786 for the treatment of multiple neurologic and psychiatric disorders. In October 2013, Avanir reported plans to advance AVP-786 into a Phase 2 trial in the 2H14 for treatment-resistant major depressive disorder in patients with insufficient response to conventional anti-depressants, based on data generated by AVP-923 in patients with PBA and depression noted in Exhibit 17. Moving AVP-786 into Phase 2 triggers a milestone of \$2 million to Concert. Other additional indications under consideration either directly with AVP-786 or AVP-923, which will be switched to AVP-786 over time, include agitation in Alzheimer's disease, which has just finished enrollment in Phase 2 (and could move into phase 3 during 2015), neuropathic pain, levodopa induced dyskinesia (LID) in patients with Parkinson's disease (PD), in addition to others that are under consideration in investigator-sponsored trials.

Exhibit 17: Avanir's AVP-923 in Depression in Pseudobulbar Affect Patients

Endpoint	AVP-923 30/10 (n=50)	AVP-923 20/10 (n=55)	Placebo (n=52)	P Value (30/10 vs. Placebo) (20/10 vs. Placebo)
BDI-II	-3.36	-2.3	-1.1	0.065 0.378

Source: Avanir Corporate presentation, March 2014.

Avanir Deal Economics to Concert. Concert received a \$2 million upfront payment for the initial deal, and during 2013 it also recognized a \$2 million milestone payment based on positive data from Avanir's Phase 1 clinical trial of AVP-786. Concert is eligible to earn up to \$4 million in development milestones, up to \$37 million in regulatory milestones and up to \$125 million in sales milestones. The next potential milestone Concert could receive is \$2 million for initiation of dosing in a Phase 2 or Phase 3 clinical trial for AVP-786, which we believe could occur in 2H14 as Avanir begins the Phase 2 study in treatment-resistant depressive disorder. Concert is also to receive royalties ranging from the mid-single digits to low double digits on worldwide net product sales, which extends to the longer of

specified patent expiration or 10 years following commercial launch. As AVP-786 appears key to Avanir's long-term plans and potential success, we expect a continued rollout of news flow on the various indications being pursued (Exhibit 18). We note positive events for AVP-923 should also be positive for AVP-786 and for Concert.

Exhibit 18: Big Plans for AVP-786 & AVP-923: Both Beneficial to Concert

	PRE-CLIN	PHASE 1	PHASE 2	PHASE 3	FILED	MARKET
Avanir Programs						
AVP-923 / AVP-786						
Alzheimer's Disease (Agitation)						
Parkinson's Disease (Dyskinesia)						
Treatment-Resistant Depression						
Neuropathic Pain						
Investigator Programs						
AVP-923						
Treatment-Resistant Depression						
Behavior Symptoms (Autism)						
Bulbar Function (ALS)						

Source: Avanir Corporate presentation, May 2014.

AVP-786 Opportunity/Economics to Concert. The reduction of quinidine in AVP-786 may free the dextromethorphan asset to be developed in many settings, and Avanir is doing just that, with plans to examine the Concert drug in treatment-resistant depression and neuropathic pain settings (Exhibit 18), among others. All this development should ultimately be beneficial to Concert, as the royalties and milestones accrue. There is also ongoing work with AVP-923 that should benefit AVP-786 as well, in multiple other settings, including agitation in Alzheimer's, Parkinson's dyskinesia, among others. Collectively, success in these indications should also accrue over to AVP-786, so we model its peak revenue in excess of \$1 billion. All in, with revenue and milestones noted above, we estimate AVP-736's fully taxed, risk weighted NPV is \$3.87 per CNCE share to Concert (Exhibit 19).

Exhibit 19: AVP-786 NPV Calculation to Concert

	2014E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	2024E	2025E	2026E	2027E	2028E	2029E	2030E
Avanir - AVP-786	-	-	-	-	-	67,500	170,000	295,000	430,000	565,000	692,500	820,000	947,500	1,060,000	1,165,000	1,270,000	1,375,000
US Sales	-	-	-	-	-	40,000	105,000	170,000	235,000	300,000	365,000	430,000	495,000	560,000	625,000	690,000	755,000
Int'l Sales	-	-	-	-	-	27,500	65,000	125,000	195,000	265,000	327,500	390,000	452,500	500,000	540,000	580,000	620,000
Royalty Rate	-	-	-	-	5%	5%	5%	7.5%	7.5%	7.5%	10%	10%	10%	12%	12%	12%	12%
Royalty	-	-	-	-	-	3,375	8,500	22,125	32,250	42,375	69,250	82,000	94,750	127,200	139,800	152,400	165,000
Milestones	2,000	2,000	-	-	10,000	27,000	-	10,000	-	-	50,000	-	-	-	-	65,000	-
Total Revenue to Concert	2,000	2,000	-	-	10,000	30,375	8,500	32,125	32,250	42,375	119,250	82,000	94,750	127,200	139,800	217,400	165,000
Net to Concert	2,000	2,000	-	-	10,000	30,375	8,500	32,125	32,250	42,375	119,250	82,000	94,750	127,200	139,800	217,400	165,000
Days to End	25.0	390.0	756.0	1121.0	1486.0	1851.0	2217.0	2582.0	2947.0	3312.0	3678.0	4043.0	4408.0	4773.0	5139.0	5504.0	5869.0
Years to end	0.1	1.1	2.1	3.1	4.1	5.1	6.1	7.1	8.1	9.1	10.1	11.1	12.1	13.1	14.1	15.1	16.1
NPV/year	1980.9	1646.0	0.0	0.0	4031.4	9796.3	2191.7	6626.8	5322.1	5594.4	12587.1	6924.2	6400.7	6874.2	6040.4	7514.7	4562.7
Discount Rate	15%	20%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%
Tax rate used	0%	0%	0%	0%	0%	0%	0%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
NPV Taxed (effective rate)	\$ 1,981	\$ 1,646	\$ -	\$ -	\$ 4,031	\$ 9,796	\$ 2,192	\$ 4,307	\$ 3,459	\$ 3,636	\$ 8,182	\$ 4,501	\$ 4,160	\$ 4,468	\$ 3,926	\$ 4,885	\$ 2,966
Total Value	\$95,987																
NPV Per Share	\$5.36																
Total Value taxed	\$69,267																
NPV/share taxed	\$3.87																

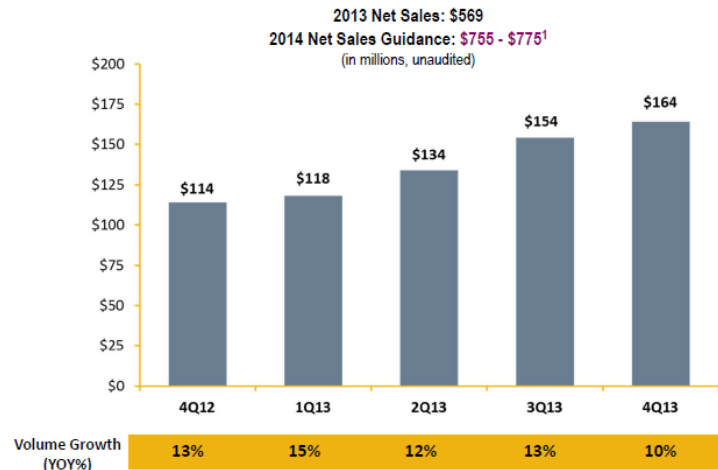
Source: Ladenburg Thalmann BioPharmaceuticals Research.

Jazz Pharmaceuticals – JZP-386: Toward A Better Xyrem

Jazz Deal Background for Deuterated Xyrem. In February 2013, Concert signed a license agreement with Jazz Pharmaceuticals providing Jazz with the worldwide rights to Concert's deuterated sodium oxybate (D-SXB) compounds; sodium oxybate is the active ingredient in Xyrem. Jazz has responsibility for ongoing development activities, though Concert is providing development support services through a single Phase 1 clinical trial.

JZP-386, is a product candidate containing a deuterated analog of sodium oxybate for potential use in patients with narcolepsy. Xyrem, a drug that is Schedule III by the DEA, is being successfully marketed by Jazz for narcolepsy (for those with cataplexy and excessive daytime sleepiness). The drug's growth has been significant with the product achieving revenue of nearly \$570 million during 2013.

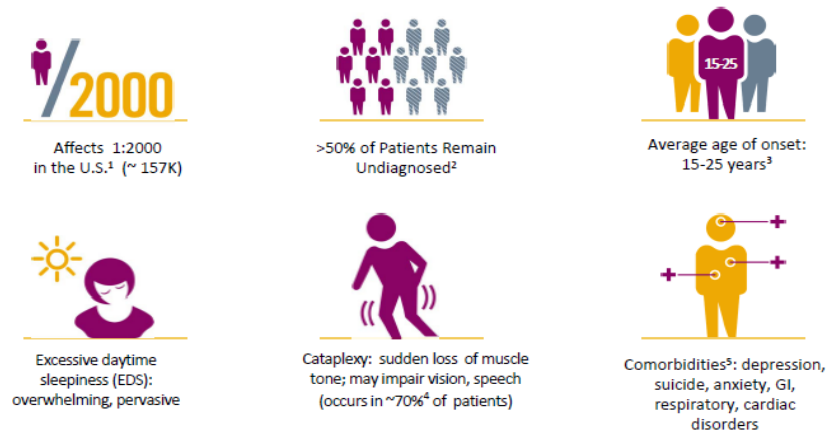
Exhibit 20: Jazz's Xyrem Franchise – A Major Success



Source: Jazz Pharmaceuticals Corporate Presentation March 2014.

Jazz Deal Economics to Concert. Concert received a \$4 million upfront payment from Jazz, and could earn up to \$8 million in development milestones, \$35 million in regulatory milestones, and \$70 million in sales-based milestones. In addition, Concert is to receive royalties at mid-single digits to low double digits, on a country-by-country and licensed product-by-licensed product basis, on worldwide net product sales of licensed products. The next milestone for JZP-386 could be \$4 million for the completion of a Phase 1 clinical trial in the EU, which is expected during 2015.

Exhibit 21: Jazz's Narcolepsy Focus: A Large Orphan Opportunity



¹ Beaumont, Bassett, Scammell, editors. Narcolepsy: Pathophysiology, Diagnosis and Treatment. Springer: NY 2011.

² Ahmed I, Thorpy M. Clinical Features, diagnosis and treatment of narcolepsy. Clin Chest Med. 2010;31 (2):371-381.

³ The International Classification of Sleep Disorders: Diagnostic and Coding Manual. 2nd edition 2005.

⁴ National Institute of Neurological Disorders and Stroke. http://www.ninds.nih.gov/disorders/narcolepsy/detail_narcolepsy.htm. Accessed October 25, 2012.

⁵ Ohayon MM. Medical Conditions & Psychiatric Disorders Associated with Narcolepsy. Annals of Neurology 2012; V.72, Issue Supplement S16, p.S2 (in press).

GI=Gastrointestinal

Source: Jazz Pharmaceuticals Corporate Presentation March 2014.

The JZP-386 Opportunity: Reducing Middle-of-the-Night Dosing. Xyrem is the only product approved by the FDA for the treatment of cataplexy and excessive daytime

sleepiness with narcolepsy, and was first approved in 2002. As noted above, growth with the therapy has recently been quite robust, generating revenue of \$569 million and growth of 50% in 2013. JZP-386 is a deuterated analog of sodium oxybate being developed for potential use in patients with narcolepsy. In vivo testing with JZP-386 demonstrated an extended pharmacokinetic profile compared to Xyrem, providing JZP-386 with the potential for reducing the middle-of-the-night dosing that is required for Xyrem.

In December 2013, Jazz filed an Investigational Medicinal Product Dossier (IMPD), the basis for initiating clinical trials in the EU, signaling its enthusiasm for JZP-386. Jazz has reported that it expects a Phase 1 clinical trial of JZP-386 to commence in 2014, with completion of enrollment also expected in 2014; when the trial completes, Concert is entitled to a milestone for the program. With JZP-378's potential to replace and improve Xyrem, potentially expanding the original brand materially, given the growth of the Xyrem brand, we model its peak revenue in excess of \$1 billion. All in, somewhat low development risks assumed with the program, and revenue and milestones noted above, we estimate the NPV at \$2.37 to Concert (Exhibit 22).

Exhibit 22: JZP-386 NPV Calculation to Concert

	2014E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	2024E	2025E	2026E	2027E	2028E	2029E	2030E
Jazz JZP-386 - sleep indications	-	-	-	-	-	55,000	170,000	272,500	375,000	477,500	580,000	682,500	785,000	887,500	990,000	1,092,500	1,195,000
US Sales	-	-	-	-	-	45,000	105,000	170,000	235,000	300,000	365,000	430,000	495,000	560,000	625,000	690,000	755,000
Int'l Sales	-	-	-	-	-	10,000	65,000	102,500	140,000	177,500	215,000	252,500	290,000	327,500	365,000	402,500	440,000
Royalty Rate	-	-	-	-	-	5%	5%	7.5%	7.5%	7.5%	10%	10%	10%	12%	12%	12%	12%
Royalty	-	-	-	-	-	2,750	8,500	20,438	28,125	35,813	58,000	68,250	78,500	106,500	118,800	131,100	143,400
Milestones	-	4,000	-	2,000	4,000	35,000	-	-	-	-	20,000	-	-	-	-	20,000	-
Total Revenue to Concert	-	4,000	-	2,000	4,000	37,750	8,500	20,438	28,125	35,813	78,000	68,250	78,500	106,500	118,800	151,100	143,400
Net to Concert	-	4,000	-	2,000	4,000	37,750	8,500	20,438	28,125	35,813	78,000	68,250	78,500	106,500	118,800	151,100	143,400
Days to End	25.0	390.0	756.0	1121.0	1486.0	1851.0	2217.0	2582.0	2947.0	3312.0	3678.0	4043.0	4408.0	4773.0	5139.0	5504.0	5869.0
Years to end	0.1	1.1	2.1	3.1	4.1	5.1	6.1	7.1	8.1	9.1	10.1	11.1	12.1	13.1	14.1	15.1	16.1
NPV/year	0.0	3445.1	0.0	1007.9	1612.6	9978.9	1727.2	3194.4	3381.6	3312.2	5545.2	3732.4	3302.2	3446.2	2955.0	2891.1	2110.6
Discount Rate	15%	15%	20%	25%	25%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
Tax rate used	0%	0%	0%	0%	0%	0%	0%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
NPV Taxed (effective rate)	\$ -	\$ 3,445	\$ -	\$ 1,008	\$ 1,613	\$ 9,979	\$ 1,727	\$ 2,076	\$ 2,198	\$ 2,153	\$ 3,604	\$ 2,426	\$ 2,146	\$ 2,240	\$ 1,921	\$ 1,879	\$ 1,372
Total Value																	\$55,760
NPV Per Share																	\$3.12
Total Value taxed																	\$42,464
NPV/share taxed																	\$2.37

Source: Ladenburg Thalmann BioPharmaceuticals Research.

The Celgene - Concert Oncology/Inflammation Development Deal

A Broad Mandate: Up to Four Programs. In April 2013 Concert entered into a development and license agreement with Celgene for the development and commercialization of deuterated analogs of nondeuterated compounds targeting inflammation and/or cancer. The specifics of these compounds/assets have yet to be disclosed. The collaboration will initially focus on one program, CTP-730, but could involve up as many as to four programs in total. Oversight of each of the four programs is conducted by a separate joint steering committee made of members of Concert and Celgene.

CTP-730 for Inflammatory Disease Is The Initial Focus. Deuterated CTP-730 is nearing Phase 1 development for inflammatory diseases; though the specific target and parent molecule of CTP-730 has not been disclosed. Concert is responsible for conducting research and early development activities of the first program. This includes the completion of single and multiple ascending dose Phase 1 clinical trials and any mutually agreed upon additional Phase 1 clinical trials approved by a joint steering committee for the collaboration. In terms of inflammatory indications, we note that Thalomid has one inflammatory indication, and Otezla (apremilast), which was just recently approved by FDA for psoriatic arthritis, which Celgene estimates could reach \$1.5B to \$2B by 2017, and has said a once-daily formulation is in development.

Celgene's pipeline also contains pomalidomide, CC-220, CC-292, and others that are being examined for inflammatory indications. CPT-730 is expected to enter the clinic this year.

CTP-730: An Improved Otezla? Though it is just our estimate at this point, with all the work Concert has conducted on phosphodiesterase inhibitors (PDE4s, PDE5s, and pentoxifylline, among others), our best estimate is that CPT-730 is a once-daily version of Otezla, a PDE4 inhibitor which is covered by Concert's US patents 8,124,646, and 8,404,737. Otezla is a major focus for Celgene, having recently been approved in the US for psoriatic arthritis, with the molecule also in development for psoriasis, ankylosing spondylitis, inflammatory bowel disease, and atopic dermatitis, among other indications over time. With a potential of a multi-billion dollar franchise, if it is Otezla, our estimates for this collaboration could prove conservative.

Material Economics, Multiple Other Assets. Milestones associated with the multiple assets included in the deal total up to \$1.4 billion (the deal also includes three other potential assets, in addition to CTP-730). We believe the \$1.4 billion of milestones point to its significance to Celgene. Concert also granted Celgene licenses with respect to two additional programs and an option with respect to a third additional program. Concert and Celgene have agreed on the non-deuterated (parent) compounds for each of the two additional license programs. With respect to those two, Celgene is restricted from utilizing its research, development and commercialization rights unless Celgene pays Concert a license exercise fee within seven years of the effective date of the initial agreement. For the option program, Celgene may select the non-deuterated compound at a later time, which will be limited to a compound for which Celgene possesses exclusive rights.

Concert's Economics – Considerable. *The Initial Celgene Program Milestones* - Concert received a \$35 million non-refundable upfront payment from Celgene for the initial agreement. In addition, regarding CTP-730 Concert is eligible to earn up to \$23 million in development milestone payments, up to \$247.5 million in regulatory milestone payments and up to \$50.0 million in sales based milestone payments related to products within the initial program. In addition, Celgene is required to pay Concert royalties on net sales of each licensed product ranging from the mid-single digits to low double digits (we estimate 13%), on worldwide net product sales of licensed products. The next milestone payment the Company might be entitled to receive under the initial program is \$8 million related to the completion of a Phase 1 clinical trial.

Milestones for The Two Additional Celgene Licenses - If Celgene exercises its rights with respect to either of the two additional license programs, Concert will receive a license exercise fee of \$30 million and will also be eligible to receive up to \$23 million in development milestone payments and up to \$247.5 million in regulatory milestone payments. With respect to one of the additional license programs, the Company is eligible to receive up to \$100 million in sales-based milestones, and with the other additional license program, Concert can receive up to \$50 million in sales-based milestones.

The Option Program Milestone Structure - If Celgene exercises its option with respect to the option program, Concert will receive an exercise fee of \$10 million and will be eligible to earn up to \$23 million in development milestone payments, and up to \$247.5 million in regulatory milestone payments.

Exhibit 23: CTP-730 - NPV Calculation to Concert

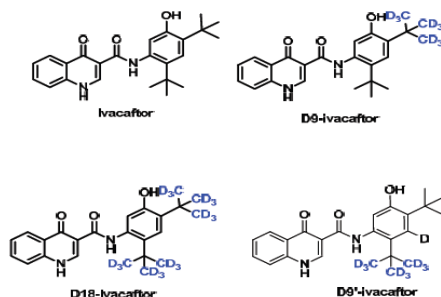
	2014E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	2024E	2025E	2026E	2027E	2028E	2029E	2030E
Celgene - CTP-730 - Inflamm.	-	-	-	-	-	35,000	170,000	272,500	375,000	477,500	580,000	682,500	785,000	887,500	990,000	1,092,500	1,195,000
US Sales	-	-	-	-	-	25,000	105,000	170,000	235,000	300,000	365,000	430,000	495,000	560,000	625,000	690,000	755,000
Int'l Sales	-	-	-	-	-	10,000	65,000	102,500	140,000	177,500	215,000	252,500	290,000	327,500	365,000	402,500	440,000
Royalty Rate	-	-	-	-	0%	5%	5%	7.5%	7.5%	7.5%	10%	10%	10%	12%	12%	12%	12%
Royalty	-	-	-	-	-	1,750	8,500	20,438	28,125	35,813	58,000	68,250	78,500	106,500	118,800	131,100	143,400
Milestones	-	8,000	-	15,000	100,000	147,500	-	-	-	-	15,000	-	-	-	-	35,000	-
Total Revenue to Concert	-	8,000	-	15,000	100,000	149,250	8,500	20,438	28,125	35,813	73,000	68,250	78,500	106,500	118,800	166,100	143,400
Concert Expenses	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
COGS (US only)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
COGS pct	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
SG&A	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
R&D	2,000	2,000	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Expense	2,000	2,000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Net to Concert	(2,000)	6,000	-	15,000	100,000	149,250	8,500	20,438	28,125	35,813	73,000	68,250	78,500	106,500	118,800	166,100	143,400
Days to End	25.0	390.0	756.0	1121.0	1486.0	1851.0	2217.0	2582.0	2947.0	3312.0	3678.0	4043.0	4408.0	4773.0	5139.0	5504.0	5869.0
Years to end	0.1	1.1	2.1	3.1	4.1	5.1	6.1	7.1	8.1	9.1	10.1	11.1	12.1	13.1	14.1	15.1	16.1
NPV/year	-1980.9	4727.2	0.0	7558.9	19190.7	19094.8	724.2	1160.8	1065.0	904.0	1227.2	764.9	586.5	530.5	394.0	367.3	211.4
Discount Rate	15%	25%	25%	25%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Tax rate used	0%	0%	0%	0%	0%	0%	0%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
NPV Taxed (effective rate)	\$ (1,981)	\$ 4,727	\$ -	\$ 7,559	\$ 19,191	\$ 19,095	\$ 724	\$ 755	\$ 692	\$ 588	\$ 798	\$ 497	\$ 381	\$ 345	\$ 256	\$ 239	\$ 137
Total Value																	
NPV Per Share																	
Total Value taxed																	
NPV/share taxed																	

Source: Ladenburg Thalmann BioPharmaceuticals Research.

Celgene Deal: Royalties, NPV Calculations. Despite not knowing the specifics of the compounds in development we believe these represent significant programs for Celgene. As noted above, Celgene mentions in its presentations about a once-daily version of Otezla, which could be a deuterated version of that promising franchise, which is launching in psoriatic arthritis and should also be approved and launched in the US for psoriasis in 2014. Given the magnitude of the program, we assume potential collective of over \$1B for CTP-730, and estimate its risk-weighted net present value to Concert at \$3.03 NPV (Exhibit 23). In addition, though the calculation is not specifically disclosed in an exhibit, we risk weight the cumulative royalties and milestones of the two additional programs and the option program collectively at \$0.58 per CNCE share. This collaboration has the potential to be a material catalyst in the future, as more information is disclosed.

Concert Pharmaceuticals - Other Proprietary Opportunities

Deuterated Ivacaftor Analogs – As mentioned above, Concert has a large number of deuterated assets in its stable which have the potential to mature rapidly. For instance, with Vertex's ivacaftor (Kalydeco) which is currently approved for cystic fibrosis, deuteration at the major site of biotransformation stabilized its metabolism in human in vitro models and greatly improved the pharmacokinetic properties of the deuterated analogs in dogs (Exhibit 24). Further studies of the analogs are warranted to evaluate the potential of deuterated ivacaftor to be a more convenient, or potentially more effective CFTR potentiator. Though we currently initially assign only modest value to these efforts--we collectively value them at \$0.96 per CNCE share--we fully expect to be considering greater value for these programs in the future.

Exhibit 24: Ivacaftor and Deuterated Ivacaftor Analogs

Source: Nguyen, S. et al. Deuterated Analogs of Ivacaftor Have Improved Metabolism and Pharmacokinetic Properties. ISSX International Meeting 2013.

Concert Pharmaceuticals – Management, Leadership**Roger D. Tung, Ph.D. – President and Chief Executive Officer**

Roger Tung is a Concert Pharmaceuticals co-founder, and has served as its President and Chief Executive Officer, and as a member of its board of directors since April 2006. Before Concert, Dr. Tung was a founding scientist at Vertex, where he worked from 1989 to 2005, most recently as its Vice President of Drug Discovery. Prior to Vertex, he held various positions at Merck, Sharp & Dohme Research Laboratories, a fully-integrated global pharmaceutical and healthcare provider, and The Squibb Institute for Medicinal Chemistry. Dr. Tung received a B.A. in Chemistry from Reed College and a Ph.D. in Medicinal Chemistry at the University of Wisconsin-Madison.

Nancy Stuart – Chief Operating Officer

Nancy Stuart has served as Concert's Chief Operating Officer since October 2007 and was its Senior Vice President, Corporate Strategy and Operations from July 2006 to October 2007. Prior to joining Concert, Ms. Stuart held various business operations and business development positions at Amgen, Kinetix Pharmaceuticals (a pharmaceutical company acquired by Amgen), Scion Pharmaceuticals, Vertex, and Genzyme (a biotechnology company acquired by Sanofi). Ms. Stuart holds a B.S. from the University of Michigan, and an M.B.A. from the Simmons College Graduate School of Management.

Ryan Daws – Chief Financial Officer

Ryan Daws was named as Concert's Chief Financial Officer in January 2014. Prior to joining Concert, Mr. Daws served as an independent consultant from June 2013 to January 2014, including an engagement with Concert from September 2013 to January 2014. Mr. Daws served as a Director in the Healthcare Investment Banking Group at Stifel, Nicolaus & Company, a financial services company, from September 2010 to June 2013. From March 1999 to June 2010, he served in positions of increasing responsibility within the Healthcare Investment Banking Group of Cowen and Company, a financial services firm. Mr. Daws holds a B.S. in Finance and Organizational Management from the University of South Carolina and an International M.B.A. from the University of South Carolina's Moore School of Business.

Ian Robert Silverman, J.D., Ph.D. – SVP, General Counsel

Ian Silverman has served as Senior Vice President and General Counsel of Concert since December 2010 and prior to that was Vice President and General Counsel from January 2007 to December 2010. Prior to joining Concert, he served in various legal related roles at Millennium Pharmaceuticals, Vertex and FMC Corporation, a chemical manufacturing company. Dr. Silverman received his J.D. from Rutgers-Camden Law School, a Ph.D. in organic chemistry from the University of New Mexico and a B.A. from Lehigh University.

Richard H. Aldrich - Chairman of the Board of Directors

Richard Aldrich is co-founder of Concert and has served as Chairman of Concert's board of directors since May 2006. He has also held management positions at Vertex, where he was a co-founding employee, and Biogen Corporation (now Biogen Idec). He is a founder and a partner of Longwood Fund, a venture capital firm, since February 2010. Mr. Aldrich founded RA Capital Management, a hedge fund, in 2004 and served as a Managing Member from 2004 to 2008 and as a Co-Founding Member from 2008 until 2011. He has co-founded several biotechnology companies including Sirtris (acquired by GlaxoSmithKline in 2008), and Alnara (acquired by Eli Lilly in 2011). Mr. Aldrich co-founded and serves on the board of directors of Verastem, a public biopharmaceutical company, and also serves as chairman of the board of directors of OvaScience (OVAS – \$9.03; Buy) and PTC Therapeutics. Richard received his undergraduate degree from Boston College, and an M.B.A. from the Amos Tuck School at Dartmouth.

Concert Pharmaceuticals - Risks

The following Risks include, but are not limited to:

Regulatory/FDA. As with any company whose main business focuses on the development of pharmaceuticals, Concert is subject to the strenuous regulatory requirements of the US Food and Drug Administration (FDA) and other international regulatory agencies such as the EMEA to have its new drugs approved. Promotion of its approved drug products is also highly regulated by FDA and related agencies throughout the globe. Also, in general, though the company's specific focus on ethical (prescription) pharmaceuticals places significant risk on its operations due to the scrutiny of FDA and other governmental regulatory bodies, we believe this specific risk over time should be no greater than that for any other research-based drug development company.

Material Dependence Upon CTP-499, CTP-354 Progress. CTP-354 and CTP-499 are two of Concert's most advanced proprietary clinical candidates in development. These novel molecules may take material time and resources to finish clinical development, if they are able to complete at all, and there is certainly no guarantee that the company will be successful in doing so. In addition, Concert may seek one or more collaborators for future development of CTP-499. There is a risk that the company may not be able to enter into a collaboration for the therapy, or is able to enter into one with terms that are beneficial to CNCE shareholders. These development programs have garnered major investor interest within Concert's operations; if they do not progress, there is material risk that CNCE shares could trade downward.

Risks With Partnered Programs. Concert has a number of partnered programs, including material efforts with Celgene, Jazz Pharmaceuticals, and Avanir Pharmaceuticals. These partnered development programs have garnered major investor interest within Concert's operations. Because these programs are ultimately under the direction of other companies, there is no guarantee those programs will progress at all, or

in a way that is beneficial to Concert or CNCE shareholders. If any or all of these programs do not progress in a way that is beneficial to Concert, it is possible that CNCE shares may come under material negative pressure.

Deuteration: Approval, Manufacturing Risks. To the best of our knowledge, no deuterated drug has ever been successfully approved or commercialized. There may be specific risks to gaining licensure for these types of agents from regulatory authorities, though these do not appear to have not emerged at this point. In addition, the company may also incur unforeseen manufacturing challenges with deuterated compounds, or manufacturing costs that are required for the production of any product candidate that receives marketing approval may turn out to be substantial, though excessive cost have not specifically manifested at this point.

Other Risks. Concert has incurred significant losses since inception, expects to incur losses for at least the next several years, and may never sustain profitability. Concert also has a limited operating history and no history of commercializing pharmaceutical products, which may make it difficult to evaluate the prospects for future viability. It is an “emerging growth company,” and the reduced disclosure requirements applicable to emerging growth companies may make its common stock less attractive to investors.

Exhibit 25: Concert's Patent Portfolio – Displaying Significant Breadth

D-Agomelatine No. 7,608,737	D-Vandetanib No. 8,609,673	D-Iloperidone No. 8,198,305
D-Almorexant No. 8,084,464	F-Tadalafil No. 7,863,274	D-Maraviroc No. 7,932,235
D-Apremilast No. 8,124,646 No. 8,404,737	D-Paroxetine No. 7,678,914 No. 8,450,492	D-Mibefradil No. 8,513,434 No. 8,575,361
D-Atazanavir No. 8,158,805 No. 8,258,309	D-Rivaroxaban No. 7,985,750 No. 8,227,464	D-Bosentan No. 8,071,596 No. 8,080,549
D-Cilostazol No. 8,349,817 No. 8,357,674	D-Raltegravir No. 7,687,509 No. 8,318,754	D-Sodium Oxybate No. 8,461,197
D-Dextromethorphan No. 8,541,436 No. 8,188,110 No. 7,973,049	D-GABA modulators D-L838417 No. 8,003,646 No. 8,399,467	D-Mosapride No. 7,528,131
D-Darunavir No. 8,592,487	D-Alpha5IA No. 8,557,815	D-Praziquantel No. 8,563,554
D-Dasatinib No. 8,338,425	D-NS11394 No. 8,278,460	D-Regorafenib No. 8,410,082
D-Niacin No. 8,471,034	d-TPA-023 No. 8,501,738	D-Ranolazine No. 7,943,620
D-Dimethylcurcumin No. 8,575,221	D-Udenafil No. 8,552,008	D-Rimonabant No. 7,514,068
D-Elvitegravir No. 7,994,194	D-Vicriviroc No. 8,367,674	D-Morpholine Derivatives Process No. 8,354,557
D-Erlotinib No. 8,343,950	D-Gefitinib No. 7,855,204	D-HDX No. 8,263,601
D-Sitagliptin No. 7,820,666	D-Silodosin No. 8,013,007	D-Etravirine No. 8,410,124

Source: Concert Pharmaceuticals website, accessed May 2014.

Concert Pharmaceuticals, Inc.

	2011A	2012A	2013A	1Q14A	2Q14E	3Q14E	4Q14E	2014e	2015E	2016E	2017E	2018E
Income Statement (\$000, except per share amts.)												
Product Revenue												
CTP-354 Total (Int'l to partner)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
CTP-499 Total (top line to partner)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other/Collab revenue	0	0	0	0	0	0	0	0	0	0	0	0
Total Proprietary Sales Revenue	0	0	0	0	0	0	0	0	0	0	0	0
Milestone & Royalty Revenue												
Total Royalties from Partners	0	0	0	-	-	-	-	0	-	-	-	-
Upfront, Milestones from Partners	\$ 5,500	\$ 1,500	\$ 2,000	\$ -	\$ -	\$ -	\$ 2,000	\$ 2,000	\$ 19,000	\$ 13,750	\$ 40,750	\$ 152,750
License and Development Revenue	13,967	11,349	23,408	1,613	2,000	2,250	2,500	\$ 8,363	8,500	8,500	9,000	9,000
Total Concert Revenue	\$19,467	\$12,849	\$25,408	\$1,613	\$2,000	\$2,250	\$4,500	\$10,363	\$27,500	\$22,250	\$49,750	\$161,750
Expenses:												
COGS	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
R & D	23,436	24,193	21,790	5,594	6,000	6,500	6,750	\$ 24,844	26,500	30,000	30,000	35,000
S G & A	7,377	7,266	8,028	2,538	2,400	2,500	2,600	\$ 10,038	10,000	10,200	13,000	20,000
Total Expenses	\$30,813	31,459	29,818	\$8,132	\$8,400	\$9,000	\$9,350	\$ 34,882	\$36,500	\$40,200	\$43,000	\$55,000
Operating Income	(11,346)	(18,610)	(4,410)	(6,519)	(6,400)	(6,750)	(4,850)	\$ (24,519)	(9,000)	(17,950)	6,750	106,750
Operating Margin	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
Interest Income	44	22	20	4	60	65	60	\$ 189	150	175	200	800
Interest Expense	(18)	(1,856)	(1,666)	0	0	0	0	\$ -	0	(200)	(200)	(200)
Other Income (Expense)	0	0	0	0	0	0	0	\$ -	0	0	0	0
Other financing income (expense)	0	0	0	(435)	(100)	(100)	(100)	\$ (735)	(500)	(400)	(350)	0
Total Other Income, net	26	(1,834)	(1,646)	(431)	(40)	(35)	(40)	\$ (546)	(350)	(425)	(350)	600
Pretax Income	(11,320)	(20,444)	(6,056)	(6,950)	(6,440)	(6,785)	(4,890)	\$ (25,065)	(9,350)	(18,375)	6,400	107,350
Pretax Margin	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
Effective Taxes	-	-	-	-	-	-	-	-	-	-	448	9,125
Tax Rate	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	7.0%	8.5%
Fully Taxed rate	(4,302)	(7,769)	(2,301)	(2,641)	(2,447)	(2,578)	(1,858)	\$ (9,525)	(3,553)	(6,983)	2,432	40,793
Tax Rate	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%	38.0%
Other Convertible Preferred, other securities transactions	(1,069)	(388)	(396)	(55)	(50)	(45)	(40)	(190)	-	-	-	-
Net Income (Loss) - Effective taxed	(12,389)	(20,832)	(6,452)	(7,005)	(6,490)	(6,830)	(4,930)	\$ (25,255)	(9,350)	(18,375)	5,952	98,225
Income - Fully taxed	(7,018)	(12,675)	(3,755)	(4,309)	(4,043)	(4,207)	(3,032)	\$ (15,590)	(5,797)	(11,393)	3,968	66,557
Margin	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
Other Comprehensive Income (Loss)	16	(5)	(1)	(8)	-	-	-	(8)	-	-	-	-
Comprehensive Income (Loss)	(11,304)	(20,449)	(6,057)	(6,958)	(6,440)	(6,785)	(4,890)	\$ (25,073)	(9,350)	(18,375)	6,400	107,350
EPS (ex-charges; eff. taxed)	(\$9.66)	(\$16.15)	(\$4.99)	(\$0.76)	(\$0.37)	(\$0.38)	(\$0.28)	(\$1.61)	(\$0.52)	(\$1.02)	\$0.31	\$5.15
EPS (ex-charges; fully-taxed)	(\$5.47)	(\$9.83)	(\$2.91)	(\$0.47)	(\$0.23)	(\$0.24)	(\$0.17)	(\$1.00)	(\$0.32)	(\$0.63)	\$0.21	\$3.44
EPS - comprehensive Income (eff taxes)	(\$8.81)	(\$15.85)	(\$4.69)	(\$0.76)	(\$0.36)	(\$0.38)	(\$0.27)	(\$1.60)	(\$0.52)	(\$1.02)	\$0.33	\$5.54
Shares O/S (000), Basic	1,283	1,290	1,292	9,188	17,750	17,800	17,850	15,647	17,875	17,975	18,975	19,075
Shares O/S (000), Diluted	1,283	1,290	1,292	9,188	17,750	17,800	17,850	15,647	17,875	17,975	19,275	19,375
-- Expenses (% of sales) --												
Cost of Sales (product sales)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	NM	NM	NM
Gross	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
R & D	NM	NM	NM	NM	NM	NM	NM	NM	96.4%	134.8%	60.3%	21.6%
S G & A	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%	31.0%
Total	158.3%	244.8%	117.4%	504.2%	420.0%	400.0%	207.8%	336.6%	132.7%	180.7%	86.4%	34.0%
-- Year / Year Growth --												
Revenue	NM	NM	NM	NM	NM	NM	NM	NM	96.4%	-19.1%	123.6%	225.1%
Operating Income	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
Pretax Income	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
Income	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
EPS (ex-charges)	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM
EPS (ex-charges; fully-taxed)	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM	NM

Source: Concert Pharmaceuticals Inc. SEC documents and Ladenburg Thalmann BioPharmaceuticals estimates.

Contact Information: Robert (Bert) Hazlett, Managing Director, Ladenburg Thalmann, rhazlett@ladenburg.com, 212-409-2062.

Concert Pharmaceuticals, Inc.**Balance Sheet & Statement of Cash Flow (\$mm)**

	12/31/2011A	12/31/2012A	12/31/2013A	12/31/2014E	12/31/2015E	12/31/2016E	12/31/2017E
BALANCE SHEET							
ASSETS							
Cash & equivalents	\$22.9	\$7.5	\$9.6	\$69.3	\$78.7	\$77.5	\$80.0
Investments/Mktb. Securities	\$19.7	\$20.1	\$23.0	\$23.0	\$23.0	\$23.0	\$23.0
Account receivable	\$0.6	\$0.1	\$0.3	\$2.1	\$4.1	\$3.3	\$7.5
Prepaid & other current assets	\$0.9	\$1.2	\$1.1	\$0.1	\$0.3	\$0.2	\$0.5
Total Current Assets	\$44.1	\$28.9	\$34.0	\$94.6	\$106.1	\$104.1	\$111.0
Property & Equipment, net, other	\$4.4	\$3.5	\$2.5	\$2.5	\$2.5	\$2.5	\$2.5
Long term investment/Restricted Cash	\$0.0	\$0.0	\$0.7	\$0.7	\$0.7	\$0.7	\$0.7
Other Assets	\$0.8	\$0.8	\$2.5	\$2.5	\$2.5	\$2.5	\$2.5
Total Assets	\$49.4	\$33.1	\$39.8	\$100.3	\$111.9	\$109.8	\$116.7
LIABILITIES & S.E.							
Accounts payable	\$1.6	\$0.8	\$1.0	\$1.4	\$2.8	\$3.3	\$7.5
Accrued expenses	\$1.5	\$2.0	\$2.5	\$2.7	\$2.9	\$3.1	\$3.4
Deferred short-term revenue	\$6.9	\$0.0	\$4.3	\$1.0	\$0.0	\$0.0	\$0.0
Leasehold improvement loan	\$0.3	\$0.3	\$0.3	\$0.3	\$0.3	\$0.3	\$0.3
Loans payable, net of discount	\$0.0	\$4.8	\$7.8	\$5.6	\$8.3	\$3.3	\$10.0
Total Current Liabilities	\$10.3	\$7.9	\$15.9	\$11.0	\$14.2	\$10.1	\$21.1
Deferred revenue, net of current	\$4.1	\$2.8	\$15.3	\$9.0	\$3.0	\$0.0	\$0.0
Leasehold improvement loan, net of current	\$0.9	\$0.6	\$0.2	\$2.0	\$2.0	\$2.0	\$2.0
Deferred lease incentive	\$1.4	\$0.9	\$0.4	\$2.0	\$2.0	\$2.0	\$2.0
Deferred rent, net of current	\$0.6	\$0.5	\$0.2	\$2.0	\$2.0	\$2.0	\$2.0
Warrant to purchase redeemable securities	\$0.2	\$0.5	\$0.5	\$0.5	\$0.5	\$0.5	\$0.5
Note Payable/Long-term Liabilities	\$7.1	\$14.9	\$7.1	\$7.1	\$7.1	\$7.1	\$7.1
Total Liabilities	\$24.7	\$28.0	\$39.6	\$33.6	\$30.8	\$23.7	\$34.7
Total Shareholders Equity	\$24.7	\$5.2	\$0.1	\$66.7	\$81.1	\$86.1	\$82.0
Total Liabilities and Shareholders Equity	\$49.4	\$33.1	\$39.8	\$100.3	\$111.9	\$109.8	\$116.7
CASH FLOW STATEMENT							
Cash Flow from Operating Activities							
Net income (loss)	(11.3)	(\$20.4)	(6.1)	(20.3)	(9.4)	(18.4)	6.4
Other adjustments	0.0	\$0.0	0.0	0.0	20.0	20.0	(15.0)
Depreciation & Amortization	1.6	\$1.5	1.3	1.1	1.2	1.4	2.0
Noncash compensation expense	0.9	\$0.9	1.0	1.0	1.5	2.0	2.5
Other non-cash financing expense	0.8	\$0.4	0.3	0.0	0.0	0.0	0.0
Amortization of financing costs, warrants	(0.5)	(\$0.1)	(0.4)	0.0	0.0	0.0	0.0
Accounts receivable	1.0	\$0.5	(0.2)	(1.8)	(2.0)	0.8	(4.1)
Interest receivable	0.1	\$0.0	0.0	0.0	0.0	0.0	0.0
Prepaid expenses, and other current assets	(0.0)	(\$0.4)	0.0	1.0	(0.1)	0.1	(0.3)
Other assets	(0.1)	\$0.0	0.1	0.0	0.0	0.0	0.0
Accounts payable and accrued expenses	0.7	(\$0.3)	0.1	0.6	1.6	0.8	4.4
Other oper.activities (deferred rent, revenue)	(11.2)	(\$8.4)	16.7	(8.5)	(3.4)	(7.9)	6.6
Cash Flow from Operating Activities	(18.1)	(26.4)	13.0	(26.9)	9.4	(1.2)	2.5
Cash Flow from Investing Activities							
Maturities of Investments	64	\$37.7	27	0	0	0	0
Purchase of investments	(41)	(\$38.4)	(30)	0	0	0	0
Capital Expenditures, net	(0.3)	(\$0.5)	(0.4)	0.0	0.0	0.0	0.0
Other	-	\$0.0	-	-	-	-	-
	22.9	(1.2)	(3.64)	0.00	0.00	0.00	0.00
Cash Flow from Financing Activities							
Issuance of loan payable, net	7.3	\$12.5	0	0	0	0	0
Principle pmts of loan payaable	0.0	\$0.0	(5)	0	0	0	0
Repayment of leasehold impt loan	(0.3)	(\$0.3)	(0)	0	0	0	0
Proceeds from iss. of common stock (net)	0.0	\$0.0	0	86.6	0.0	0.0	0.0
Proceeds/Retirement of Debt, Other	0.0	\$0.0	0	0.0	0.0	0.0	0.0
Payment of IPO/offering costs	0.0	\$0.0	(2)	0.0	0.0	0.0	0.0
Cash Flow from Financing Activities	7.0	12.2	(7.2)	86.6	0.0	0.0	0.0
Beginning cash balance	11.1	\$22.9	7.5	9.6	69.3	78.7	77.5
Net increase (decrease) in cash	11.8	(\$15.5)	2.1	59.7	9.4	(1.2)	2.5
Ending cash balance	22.9	7.5	9.6	69.3	78.7	77.5	80.0

Source: Concert Pharmaceuticals Inc. SEC documents and Ladenburg Thalmann BioPharmaceuticals estimates.

Contact information: Robert (Bert) Hazlett, Managing Director, Ladenburg Thalmann, rhazlett@ladenburger.com, 212-409-2062.

APPENDIX A: IMPORTANT RESEARCH DISCLOSURES

ANALYST CERTIFICATION

I, Robert C. Hazlett, attest that the views expressed in this research report accurately reflect my personal views about the subject security and issuer. Furthermore, no part of my compensation was, is, or will be directly or indirectly related to the specific recommendation or views expressed in this research report, provided, however, that:

The research analyst primarily responsible for the preparation of this research report has or will receive compensation based upon various factors, including the volume of trading at the firm in the subject security, as well as the firm's total revenues, a portion of which is generated by investment banking activities.

Additional information regarding the contents of this publication will be furnished upon request. Please contact Ladenburg Thalmann, Compliance Department, 570 Lexington Avenue, 11th floor, New York, New York 10022 (or call 212-409-2000) for any information regarding current disclosures, and where applicable, relevant price charts, in regard to companies that are the subject of this research report.

COMPANY BACKGROUND

Concert Pharmaceuticals, founded in 2006 by Richard Aldrich, Roger Tung, and Christoph Westphal, creates novel medicines by applying its DCE (Deuterated Chemical Entity) Platform technologies to molecules. The DCE approach involves the selective addition of deuterium, a stable isotope of hydrogen, to molecules, resulting in clinical therapeutic candidates with improved pharmacology. This approach has the potential to enable more efficient drug discovery and clinical development. Concert's proprietary programs include CTP-354, a novel GABA-A modulator for spasticity and anxiety, and CTP-499, a PDE inhibitor for diabetic kidney disease. Promising partnered programs include Jazz's JZP-386, a long-acting Xyrem, Avanir's AVP-786, an improved Neudexta, and multiple programs with Celgene. Concert has also developed a broad portfolio of deuterated molecules that are expected to migrate into and through the clinic over time.

VALUATION METHODOLOGY

Concert Pharmaceuticals Valuation. Concert and CNCE Shares Valuation. Because Concert's operations have the potential for significant revenue and earnings variability over the coming quarters and years, we value the company and its assets using a fully-taxed, risk-weighted net present value methodology for each of its assets. We note that with its multiple partnerships and emerging clinical programs, Concert has a diverse portfolio that contributes to its valuation. Our total of the programs yield a value of \$24.20 per CNCE share, driving our \$24 CNCE shares price target.

Concert's Proprietary Pipeline. Concert's two most advanced proprietary assets, CTP-354 for spasticity, and CTP-499 for diabetic kidney disease, have material valuation. CTP-354 for spasticity as a result of multiple sclerosis and/or spinal cord injury and possibly other indications such as anxiety and neuropathic pain, is moving into Phase 2. We believe that a GABA-A modulator with familiar mechanism, yet a distinct profile, with once-daily dosing and less sedation, should have material potential for consideration in spasticity, anxiety, and even pain settings, and have the potential to exceed \$1 billion in peak revenue; we value its collective opportunities at \$7.17 per share. CTP-499, for diabetic kidney disease appears to have achieved material validation after a more full analysis of its Phase 2 trial data, which bodes well for Phase 3 consideration. We assume international licensing should be able to occur after discussions with FDA of their end of Phase 2 meetings in 2H14, and that could be a validating event for the CTP-499 program. We estimate CTP-499 at \$1 billion peak revenue in the US, despite risks to the endpoints that remain, value the program at \$5.16 per CNCE share. Other less mature proprietary products are much more modest opportunities at this point and valued at \$0.31 per CNCE share, though proof of concept comes at Phase 1 for many of these deuterated programs, and this part of the portfolio could appreciate quite quickly.

Concert's Collaborations. Regarding Concert's partnered portfolio, Avanir seems to be operating with a good urgency with AVP-786, and is exploring dextromethorphan's broad neurotransmitter receptor activity with the molecule, looking at the therapy in multiple additional indications in addition to depression, including agitation and dyskinesia. Because of these multiple indications, and its potential for its rapid advancement, the economics of this program are valued at \$3.87 per CNCE share. The Jazz program JZP-386 attempts to provide the Xyrem franchise with a product that doesn't have middle of the night dosing, and can help protect against potential loss of exclusivity. Xyrem is growing rapidly (+50% yr/yr) and is large at \$569 million annually, and making a more convenient dosing form with longer patent life appears to be a materially opportunity, generating a \$2.37 NPV per CNCE share. Finally, Celgene has not disclosed what the mechanism of CTP-730 inflammation collaboration, though the very large regulatory milestones and peak revenue along the lines of Xyrem, give this collaboration a \$3.61 NPV. The remainder of the Celgene assets are estimated at \$0.58, and net cash, NOLs and the drag of general corporate expense totals (\$4.15) per CNCE share, yielding the \$24.20 total, driving our \$24 CNCE shares price target.

Factors which could impede CNCE shares from reaching our price target include the lack of progress for Concert's proprietary therapeutics CTP-499 and CTP-354 in their respective indications. Progress by indirect competition in indications for chronic kidney failure or spasticity could also impede CNCE shares from reaching our target. Concert has a number of partnered programs, including efforts with Celgene, Jazz Pharmaceuticals, and Avanir, and there is no guarantee those programs will progress at all or in a way that is beneficial to Concert; a lack of progress with any or all of these partnered programs could be an impediment to CNCE shares reaching our target price. In addition, negative

equity market conditions overall, or in particular with regard to the biotechnology sector, or healthcare in general, could be an impediment to CNCE shares reaching our target. Also a change in the regulatory requirements for drugs in development could be an impediment to the advancement in CNCE shares. These risks listed are merely a sample of the types of issues that could impede CNCE shares from advancing, and are not meant to be all inclusive.

RISKS

Regulatory/FDA. As with any company whose main business focuses on the development of pharmaceuticals, Concert is subject to the strenuous regulatory requirements of the US Food and Drug Administration (FDA) and other international regulatory agencies such as the EMEA to have its new drugs approved. Promotion of its approved drug products is also highly regulated by FDA and related agencies throughout the globe.

Dependence on Proprietary Programs. CTP-354 and CTP-499 are two of Concert's most advanced proprietary clinical candidates in development. These novel molecules may take material time and resources to finish clinical development, if they are able to complete is at all, and there is certainly no guarantee that the company will be successful in doing so. In addition, Concert may seek one or more collaborators for future development of CTP-499. There is a risk that the company may not be able to enter into a collaboration for the therapy, or is able to enter into one with terms that are beneficial to CNCE shareholders.

Risks With Partnered Programs. Concert has a number of partnered programs, including material efforts with Celgene, Jazz Pharmaceuticals, and Avanir Pharmaceuticals. Because these programs are ultimately under the direction of other companies, there is no guarantee those programs will progress at all, or in a way that is beneficial to Concert or CNCE shareholders.

Deuteration: Approval, Manufacturing Risks. To the best of our knowledge, no deuterated drug has ever been successfully approved or commercialized. There may be specific risks to gaining licensure for these types of agents from regulatory authorities, though these do not appear to have not emerged at this point.

STOCK RATING DEFINITIONS

Buy: The stock's return is expected to exceed 12.5% over the next twelve months.

Neutral: The stock's return is expected to be plus or minus 12.5% over the next twelve months.

Sell: The stock's return is expected to be negative 12.5% or more over the next twelve months.

Investment Ratings are determined by the ranges described above at the time of initiation of coverage, a change in risk, or a change in target price. At other times, the expected returns may fall outside of these ranges because of price movement and/or volatility. Such interim deviations from specified ranges will be permitted but will become subject to review.

RATINGS DISPERSION AND BANKING RELATIONSHIPS AS OF (June 26, 2014)

Rating	%	IB %
BUY	75.4	55.1
NEUTRAL	24.6	39.6
SELL	0.0	0.0

COMPANIES UNDER ROBERT'S COVERAGE

Acadia Pharmaceuticals Inc. (ACAD)

Cell Therapeutics, Inc. (CTIC)

Prothena Corporation plc (PRTA)

Concert Pharmaceuticals Inc. (CNCE)

Nektar Therapeutics (NKTR)

COMPANY SPECIFIC DISCLOSURES

Ladenburg Thalmann & Co. Inc. makes a market in Concert Pharmaceuticals Inc..

Ladenburg Thalmann & Co. Inc. intends to seek compensation for investment banking and/or advisory services from Concert Pharmaceuticals Inc. within the next 3 months.

OTHER COMPANIES MENTIONED

INVESTMENT RATING AND PRICE TARGET HISTORY**Concert Pharmaceuticals Inc. Rating History as of 06/25/2014**

powered by: BlueMatrix



B=Buy N=Neutral S=Sell D=Drop Coverage I=Initiate NR=Not Rated

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