Zacks Small-Cap Research

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# Biomerica Inc (BMRA-OTCBB)

## BMRA: Top-Line Rebound Even Better Than Expected

| | |
|---|---|
| **Current Recommendation** | **Outperform** |
| Prior Recommendation | N/A |
| Date of Last Change | 01/23/2013 |
| Current Price (04/14/14) | $0.75 |
| **Target Price** | **$2.20** |

## OUTLOOK

Biomerica has been profitable over ten of the last thirteen quarters, has fairly regularly generated positive cash flow, and maintains a stellar balance sheet. While revenue has softened recently we think this continues to firm up in the near term. Asia sales should revive by year-end. New distribution in Europe should facilitate growth there. Meanwhile, U.S. sales have remained strong. New product launches are also expected to facilitate growth. We continue to see very little to no downside risk in the share price at this level. We think the cheap valuation may have more to do with BMRA being a nano-cap and suffering from a lack of exposure rather than having anything to do with fundamentals.

## SUMMARY DATA

| | |
|---|---|
| **52-Week High** | **$1.054** |
| **52-Week Low** | **$0.69** |
| **One-Year Return (%)** | **-36.16** |
| **Beta** | **0.67** |
| **Average Daily Volume (sh)** | **10,165** |
| **Shares Outstanding (mil)** | **7** |
| **Market Capitalization ($mil)** | **$5** |
| **Short Interest Ratio (days)** | **1.23** |
| **Institutional Ownership (%)** | **0** |
| **Insider Ownership (%)** | **25** |
| **Annual Cash Dividend** | **$0.00** |
| **Dividend Yield (%)** | **0.00** |
| **5-Yr. Historical Growth Rates** | |
| **Sales (%)** | **5.4** |
| **Earnings Per Share (%)** | **26.4** |
| **Dividend (%)** | **N/A** |
| **P/E using TTM EPS** | **10.7** |
| **P/E using 2014 Estimate** | **N/A** |
| **P/E using 2015 Estimate** | **75.0** |
| **Zacks Rank** | **N/A** |

| | |
|---|---|
| **Risk Level** | **High,** |
| **Type of Stock** | **Small-Value** |
| **Industry** | **Med-Drugs** |

## ZACKS ESTIMATES

**Revenue**
(in millions of $)

| | Q1 (Aug) | Q2 (Nov) | Q3 (Feb) | Q4 (May) | Year (May) |
|---|---|---|---|---|---|
| 2013 | 1.70 A | 1.88 A | 1.42 A | 1.47 A | 6.47 A |
| 2014 | 1.01 A | 0.93 A | 1.49 A | 1.23 E | 4.24 E |
| 2015 | | | | | 6.75 E |
| 2016 | | | | | 9.01 E |

**Earnings per Share**
(EPS is operating earnings before non recurring items)

| | Q1 (Aug) | Q2 (Nov) | Q3 (Feb) | Q4 (May) | Year (May) |
|---|---|---|---|---|---|
| 2013 | $0.04 A | $0.03 A | -$0.01 A | $0.01 A | $0.07 A |
| 2014 | -$0.02 A | -$0.03 A | $0.00 A | -$0.01 E | -$0.06 E |
| 2015 | | | | | $0.01 E |
| 2016 | | | | | $0.08 E |

Zacks Projected EPS Growth Rate - Next 4 Years % **12**

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## WHAT'S NEW……

### Q3 Results: Revenue Returns To Positive Growth On Strong Sales In Asia and U.S.

Biomerica filed their 10-Q for the fiscal third quarter ending February 28, 2014. Q3 was an "about-face" from the relative weak results over the first six months of the year. While revenue was up by just 5% yoy in Q3, this was a vast improvement compared to the 46% yoy slide in sales in the first half of fiscal 2014.

Revenue jumped 60% sequentially and was about 40% better than our estimate. Relatively strong sales in both the U.S. and Asia accounted for almost all of the growth from Q2 as well as the difference compared to our numbers. As we have noted in prior updates, the recent revenue weakness, which first appeared in 2H of fiscal 2013, has been largely due to a switch in distribution in Asia. We contended that this was likely to be temporary and not a long-term trend with Asia-related revenue expected to ramp back up. BMRA indicated in the Q2 earnings release that sales through their new distributor in Asia were expected to grow sequentially from that level - and with almost 400% growth (Q2 $80k, Q3 $383k) the sequential growth prediction is off to a good start. We note, however, that the company did not provide much detail in the Q3 earnings release - and it is possible Q3 included a sizeable stocking order. Nonetheless, BMRA (per the Q3 10-Q) notes that they expect sales via the new distributor to increase.

U.S. sales were also relatively very strong in Q3 - posting yoy and sequential growth of 106% and 78%, respectively. In fact U.S. sales of $446k were the highest in any quarter since at least the end of fiscal 2009 (May 2009). Again, only minimal detail was disclosed, so it's unclear whether the relative strength was demand-related or less fundamental such as favorable timing. While BMRA has recently announced intentions to launch new products, possibly including a GI test, that have the potential to facilitate further revenue growth, there was no direct indication that new products were the catalysts behind the U.S. sales growth.

We note that we have not made adjustments to our revenue growth forecasts for either the Asian or U.S. markets following Q3 results - so if the relative revenue strength in these markets was largely demand-related (as opposed to less fundamental reasons such as timing or stocking orders, for example) in Q3, our Q4 estimates (in particular) could prove conservative.

Meanwhile European sales fell about 5% yoy, were flat sequentially and 9% lower ($598 A vs $656 E) than our estimate. In January BMRA announced that they entered into an agreement with a top-five pharmaceutical company for distribution of two of its products in parts of Europe - we expect contribution from this to be more obvious beginning with Q4.

The big beat on the top line ($1.5M A vs $1.1M E) filtered down to a big beat on net income and EPS as well. Net income and EPS of $27k and $0.00 were well ahead of our ($136)k and ($0.02) estimates. Gross margin, at 39% was similarly impressive - much better than our 28% estimate and the highest since fiscal Q2 2013 (ending 11/30/2012). Operating expenses were kept in-check at 36.5% of revenue which is much improved from the 48.1% in the first half of the year. Gross margin and operating expenses both benefitted from the jump in revenue in Q3 relative to the first two quarters of fiscal 2014.

**Cash**

Despite the somewhat lackluster revenue financial results over the past few quarters (particular during the first half of the year), BMRA's cash position and balance sheet continue to remain in very solid shape. We continue to believe that book value should put a floor on valuation of the company. Biomerica exited Q3 with $1.7M in cash and equivalents, flat from the end of Q2. Cash flow from operating activities was an outflow of $113k in Q3 but ex-changes in working capital (which included a $350k increase in A/R) this was in inflow of $84k.

As a reminder, BMRA has fairly consistently generated positive cash flow, including $1.4 million in fiscal 2013. The company also remains debt free. Book value at the end of Q3 stood at $5.7 million or approximately $0.74/share on a fully-diluted basis.

**Maintaining Outlook / Recommendation**

We have made only minor revisions to our growth estimates following Q3 results. We expect sales to Asia to continue to post growth and eventually return to legacy levels. We look for European sales to post more meaningful growth as a result of the recently penned new distribution agreement. We also note that U.S.-based sales have

been relatively strong over the last three quarters and ahead of our estimates. We have not made upward revisions to our U.S. sales estimates, which could end up remaining somewhat conservative.

We now look for 2014 revenue and EPS of $4.7 million (-28%) and ($0.06) and for this to grow to $10.6 million and $0.13 in fiscal 2017. We are maintaining our Outperform rating and $2.20/share price target.

As we noted in our recent prior updates, over the mid-to-longer terms we think Biomerica will be looking to further exploit their existing technology. We view management's priorities as such that they will be focused on accelerating growth through bringing higher potential and novel products to market which we think likely fits into this growth strategy. We note that our current model does not incorporate an assumed contribution from "home run" type products - although we think given the company's expertise in certain disease areas (including GI, foodborne, women's health, and infectious disease), along with patentable and perhaps underexploited technology platforms and management's renewed focus on accelerating growth over the long-term, that big-winner type products could very well materialize over the coming years.

## BACKGROUND

For over 40 years Biomerica, Inc. (BMRA) has been involved in the development, manufacturing and marketing of medical diagnostics products for the early detection and monitoring of chronic diseases and medical conditions. Their product line encompasses various diseases and conditions including tests for gastrointestinal/foodborne diseases, infectious diseases, diabetes, women's health, hormone levels and even some esoteric diseases. The company's particular focus is on gastrointestinal/foodborne diseases and diabetes.

The tests are sold into two major market segments, clinical lab and point-of-care (POC). Demand for the clinical lab products mainly comes from hospitals and clinical and research laboratories. The POC segment, which may hold particularly attractive opportunities for growth given recent technological advancements which have significantly improved speed and accuracy of certain rapid tests, includes the over-the-counter retail channel as well as physician offices. Biomerica sells through distributors as well as directly. The majority of Biomerica's revenue is generated from international sales, particularly from Europe and Asia, while domestic sales account for approximately 15% - 25% of total revenue.

Biomerica recently divested the bulk of their internal research and development department in order to focus on a strategy of in-licensing technology and products from other companies, universities and institutions which they expect to result in a greater rate of revenue and earnings growth. The company, with headquarters and administrative offices in Southern California, maintains a portion of their manufacturing facilities in Mexico which helps reduce COGS and operating costs. Since the R&D divestiture in July 2010 BMRA has made meaningful progress in pursuing accelerated growth including the acquisition of several new high potential products as well as consummating additional distribution agreements.

Relative to their financials, revenue grew 24% in fiscal 2012 and was up 6% in 2013. While the first half of fiscal 2013 exhibited strong 19% growth, revenue in the second half contracted by 6%, largely due to a change in distributors in China. While we had expected the revenue contraction due to the swap in distributors in China to be a fairly short-term issue, weaker sales in Asia persisted during the first half of 2014 before rebounding nicely in Q3.

Biomerica has been profitable over eleven of the last fourteen quarters, has fairly regularly generated positive cash flow (from both an operational cash flow and free cash flow standpoint), and maintains a stellar balance sheet. Add to this the fact that executive compensation is relatively meager (possibly the lowest of any company we cover in the med-tech space), a minimal outstanding share count (7.7 million fully-diluted), and obvious diligence on growing revenue while leveraging their cost base and we think all this is clear evidence that management and the board lead the company in a way with an eye on increasing shareholder value. In our experience, we have come across few companies that have been in existence over 40 years (as BMRA has) and possess all of these positive characteristics yet trade at what we would characterize as an incredibly cheap valuation. As of today's market price BMRA is valued at just 1.0x book value and only 11x trailing EPS.

Given that BMRA trades at book value, has liquid and high quality assets and no debt, and has generated positive cash flow on a fairly regular basis, we see very little to no downside risk in the share price at this level. We think the cheap valuation may have more to do with BMRA being a nano-cap and suffering from a lack of exposure rather than having anything to do with fundamentals. We think the current market value grossly undervalues the company and recommend accumulating the shares up to our $2.20 price target.

## PRODUCTS




*biomerica.com*

Biomerica's diagnostic test kits and components are used to analyze blood, urine, or fecal specimens from patients in the diagnosis of various diseases and other medical complications, or to measure the level of specific hormones, antibodies, antigens or other substances, which may exist in the human body in extremely small concentrations.

The company sells their diagnostic tests worldwide into two major market segments; clinical laboratories and POC. The clinical laboratories tests are enzyme linked immunosorbent assays (ELISA) which are often processed using sophisticated instrumentation at professional and research laboratories. By contrast the POC tests are rapid tests which require minimal handling or special knowledge and can be performed at home or in the physicians office with results typically available within minutes.

Roughly 30% (14) of Biomerica's products are FDA approved for sale in the U.S. In addition to being sold in the U.S., some of these FDA-approved tests are also sold overseas. Of the FDA-approved products, three (Drugs-of-Abuse, Breast Self Exam, and Fecal Occult Blood) are approved for sale through the OTC (retail) channel, three (Rapid Pregnancy, Rapid Ovulation, and Fecal Occult Blood) are CLIA-waived and are used in physicians' offices and the remaining eight are sold to the clinical lab channel.

Similar to the FDA-approved product mix, roughly 60% - 65% of the non-FDA products are sold to the clinical lab channel with the remainder roughly evenly split between physician's office and OTC. The non-FDA cleared clinical lab products can only be sold as analyte specific reagents (ASR) and labeled "for research purposes only" - the distinction being that (among other things) the manufacturer is restricted in the claims that they can make regarding the performance or validation of the products. For clarity, ASR's are a huge part of in-vitro diagnostics (IVD) testing in the U.S. and are widely accepted as scientifically valid. The non-FDA cleared POC tests, however, can not be sold in the U.S. While Biomerica does not disclose revenue by product or customer channel, based on the geographical mix of sales and the fact that the non-FDA cleared POC tests can not be sold in the U.S., we think it's safe to assume that the clinical lab products account for the majority of total revenue. In the U.S., however, the POC products (particularly through the OTC channel) likely account for the majority of domestic sales.




*biomerica.com*

U.S. product sales have recently accounted for approximately 15% - 20% of Biomerica's total revenue. Asia and Europe account for the majority of the 80% - 85% of revenue that is generated overseas with a small contribution from the Middle East, South America and other international areas. Almost all of BMRA's revenue growth over the last two years has come from sales in Asia.

| Non FDA-cleared Tests | FDA-cleared Tests |
|---|---|
| Allerquant™ IgG Food Intolerance ELISA Kit | ACTH ELISA Kit |
| Allerquant™ IgG Food Additives Kit | Calcitonin ELISA Kit |
| GAP™ IgM H. Pylori ELISA Kit | Erythropoietin ELISA Kit |
| GAP™ IgA H. Pylori ELISA Kit | GAP™ IgG H.Pylori ELISA Kit |
| Gliadin IgG ELISA Kit | hs-CRP ELISA |
| Gliadin IgA ELISA Kit | Myoglobin ELISA |
| Transglutaminase IgA ELISA Kit | PTH (Intact) ELISA Kit |
| Isletest™ GAD ELISA Kit | Troponin I ELISA |
| Isletest™ ICA ELISA Kit | AWARE™ Breast Self-Examination Kit |
| Isletest™ IAA ELISA Kit | Drugs-of-Abuse Rapid Tests |
| Intrinsic Factor Autoantibodies ELISA Kit | EZ Detect™ Fecal Occult Blood Test (OTC package) |
| LKM-1 Autoantibodies IgG ELISA Kit | EZ-HCG™ Rapid Pregnancy Test |
| Camplylobacter ELISA Kit | EZ-LH™ Rapid Ovulation Test |
| Cryptosporidium ELISA Kit | EZ Detect™ Fecal Occult Blood Test (Physician's package) |
| E. coli O157 ELISA Kit | |
| Giardia ELISA Kit | |
| Verotoxin ELISA Kit | |
| C. difficile Antibody ELISA Kit | |
| E. histolytica ELISA Kit | |
| TPMT ELISA Kit | |
| Fortel™ Cat Allergy Test | |
| Fortel™ Dog Allergy Test | |
| Fortel™ Microalbumin Test | |
| Fortel™ Ultra Midstream Pregnancy Test | |
| Fortel™ Ovulation Test | |
| EZ-PSA™ Rapid Test | |
| EZ-H. Pylori™ Rapid Test | |
| H. pylori Antigen Test | |
| Listeria Rapid Test | |
| Shigella Rapid Test | |
| Salmonella Rapid Test | |

| MARKET | |
|---|---|
| | Clinical Lab |
| | Physicians Office |
| | OTC |

**Sales / Distribution**

The OTC products are sold under Biomerica's brand name in some of the largest chain retailers including Walgreen's. The professional POC products are sold through distributors which sell them to physician's offices/labs.

The clinical lab channel is serviced in the U.S. mostly through direct sales to reference labs and diagnostic companies. Outside the U.S. the clinical lab products are sold through third party distributors. Validation and selection of the "right" distributors in attractive demographic markets has proven to be successful for BMRA and has been a major catalyst behind the recent revenue growth in Asia. We expect that the company will continue to implement this strategy in other international markets including in Eastern Europe and South America.

## MARKET

In vitro diagnostics encompass a huge portion of all professional and OTC medical testing and includes reagents, test kits, instrumentation and other testing devices, products, supplies and services. Biomerica's target markets and products are part of the IVD segment.

The worldwide market for IVD products is estimated at almost $60 billion and growing at about 10% annually. Kalorama Information, an independent research firm, estimated that growth of IVD has been even more robust outside the U.S., particularly in parts of Asia, Europe and Latin America (see chart below, from Kalorama Information). Similarly, Biomerica has recently experienced significant revenue growth in Asia.

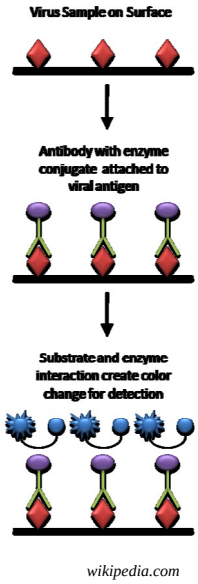
**Worldwide In Vitro Diagnostic Reagent Sales by Country/Region**
**2007-2012**
(Sales $ MM)

| | Sales 2007 | %Mkt | Sales 2012 | % Mkt | CAGR |
|---|---|---|---|---|---|
| N. America | $18,450 | 44 | $23,090 | 41 | 5 |
| EU 15/W. Europe | 12,550 | 31 | 14,895 | 26 | 6 |
| Japan | 4,615 | 11 | 5,065 | 9 | 2 |
| China | 1,015 | 2 | 2,175 | 4 | 16 |
| L. America* | 830 | 2 | 1,695 | 3 | 15 |
| India | 520 | 1 | 1,000 | 2 | 14 |
| E. Europe | 710 | 1 | 950 | 2 | 9 |
| ROW | 4790 | 8 | 7446 | 13 | 9 |
| Total | $41,950 | 100 | $56,316 | 100 | 6 |

* includes Mexico

### ELISA Remains Dominant in Clinical Lab Segment

Biomerica's clinical laboratory products consist of ELISA analytes and kits. ELISA diagnostics typically involves multi-well microtiter plates in which the wells of the plate are coated with a specific antigen. The plates are then filled with a patient sample (ie. - plasma, serum, etc) and the antibodies in the sample that are against the antigens will bind to the antigens. A detection antibody is then added which is covalently linked to an enzyme. Finally, an enzymatic substrate is added which interacts with the enzyme and generates visible color (read with the naked eye or an electronic plate reader) and indicates the quantity of antigen in the sample.



*wikipedia.com*

ELISA has been in existence for about 40 years and has had a long reputation for accuracy, performance and reproducibility. Other technologies have recently evolved such as molecular diagnostics that have shown improved sensitivity and potentially great promise in early detection of diseases such as cancer. Nonetheless, ELISA remains the dominant testing format in the clinical lab diagnostics space and is not likely to lose that designation anytime soon.

Dozens of companies compete in the ELISA space which includes manufacturers of reagents, kits, and instrumentation. Instrument manufacturers (which include major corporations such as Siemens, Roche, and Abbott among others) generally also supply their installed base with proprietary consumables which can provide a certain level of (capitve) customer loyalty and potentially bigger margins. Smaller players such as Biomerica which don't have the benefit of large R&D and marketing departments or feeding an installed base can effectively compete on product quality/consistency, product menu (including more esoteric tests which the major players may have little or no presence in), geographical diversification (particularly by exploiting ex-U.S. markets including emerging countries where the "majors" may have less of a competitive edge) and pricing as well as providing more intangible benefits such as superior customer service and prompt/reliable shipping.

According to data from Kalorama Information, the infectious disease assay category dominates in terms of share of the worldwide market for lab-based tests. The lab-based diagnostics experiencing the greatest growth over the last five years included glucose/HbA1C, autoimmune, cancer, infectious disease, and cardiac (see chart below, from Kalorama Information).

**Worldwide Lab-Based Immunoassay Sales by Analyte Type 2007-2012 (ID, Tumor Markers, Cardiac Markers, Diabetes/HbA1c, Thyroid, Proteins, Autoimmune, Anemia, Therapeutic Drugs, Fertility, Allergy, Drugs of Abuse)**

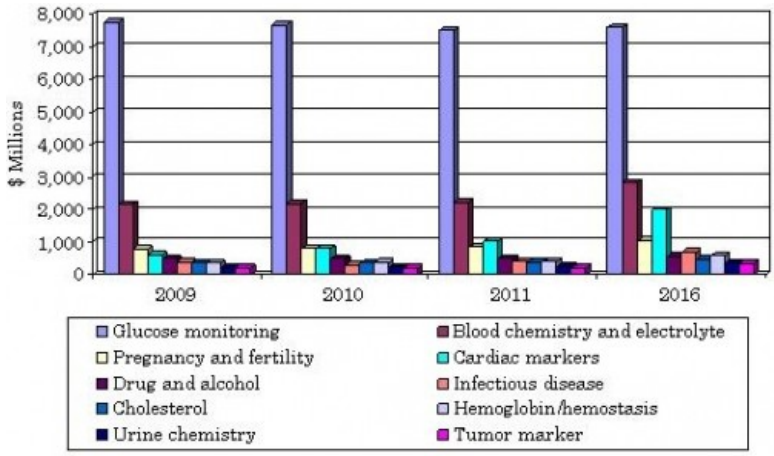
(Sales $ MM)

| | IVD Sales 2007 | % Mkt | IVD Sales 2012 | % Mkt | CAGR |
|---|---|---|---|---|---|
| Infectious Diseases | 2,500 | 37 | 3,325 | 37 | 6 |
| Tumor markers | 740 | 11 | 1125 | 13 | 9 |
| Cardiac markers | 785 | 12 | 1050 | 12 | 6 |
| Diabetes/HbA1c | 370 | 3 | 590 | 7 | 10 |
| Thyroid | 365 | 6 | 465 | 5 | 5 |
| Proteins | 330 | 5 | 420 | 5 | 5 |
| Autoimmune | 250 | 4 | 410 | 5 | 10 |
| Anemia | 305 | 5 | 390 | 4 | 5 |
| Therapeutic Drugs | 310 | 5 | 335 | 4 | 2 |
| Fertility | 280 | 5 | 330 | 4 | 3 |
| Allergy | 260 | 4 | 290 | 3 | 2 |
| Drugs of Abuse | 190 | 3 | 200 | 2 | 1 |
| TOTAL | 6,685 | 100 | 8,930 | 100 | 6 |

## POC Growing On Improved Performance and Speed

The point-of-care market includes tests used by professionals such as at physician's offices and over-the-counter which are generally sold at retail (drug stores) and used directly by the consumer. Biomerica participates in both of these POC segments. Rapid, easy to use and interpret qualitative tests which are membrane-based test strips enclosed inside a plastic cassette are a big portion of the POC diagnostic market. Some more sophisticated testing is also approved for the POC setting and can include assay kits run on small (often handheld) analyzers. Common examples of POC test are pregnancy and insulin (diabetes) tests.

By most estimates the POC diagnostics market is expected to experience meaningful growth over the next several years. According to BCC Research the worldwide POC diagnostics market is expected to grow to approximately $16.5 billion by 2016 from $13.8 billion in 2011, representing a CAGR of 3.8%. However, excluding glucose (which accounts for ~90% of OTC POC, ~25% of professional POC, and ~65% of total POC) the global POC market is expected to grow at a CAGR of 7.2% (from $6.3 billion to $8.9 billion) over that same period. The anticipated major drivers of this expected growth are tests for cardiac markers, infectious diseases, and cancer.




Relative to the assays experiencing the highest rates of growth (ex glucose/HbA1C) in the two individual POC segments, Kalorama Information (see charts below) points to blood chemistry, critical care/cardiac markers, and cholesterol in the professional POC space and fecal occult blood, drugs of abuse, and lower volume products such as FSH (menopause), TSH (thyroid), and H.pylori (ulcers/stomach cancer) on the OTC segment. FSH and TSH

tests have had limited success in the U.S. but experienced much more rapid growth in international markets, particularly Europe.

**OTC POC By Category**

| | Sales 2008 | % Mkt | Sales 2013 | % Mkt | % CAGR |
|---|---|---|---|---|---|
| **OTC/Self Tests** | | | | | |
| Glucose | $7,555 | 94 | 9,860 | 94 | 5 |
| Pregnancy/Ovulation | 390 | 5 | 450 | 4 | 3 |
| Coagulation/PT | 50 | 1 | 75 | 1 | 8 |
| Fecal occult blood | 25 | 0.3 | 40 | 0.4 | 10 |
| Drugs of abuse | 10 | 0.1 | 15 | 0.1 | 8 |
| HbA1c | 5 | 0.1 | 25 | 0.2 | 38 |
| HIV | 5 | 0.1 | 6 | 0.1 | 4 |
| Cholesterol | 5 | 0.1 | 6 | 0.1 | 4 |
| Other | 5 | 0.1 | 10 | 0.1 | 15 |
| **OTC/Self Total** | **8,050** | **100** | **10,487** | **100** | **5** |
| OTC w/o glucose | 495 | | 627 | | 5 |

Other = FSH, TSH, H. pylori, etc.

**Professional POC By Category**

| Professional POC | 2008 | % | 2013 | % | CAGR |
|---|---|---|---|---|---|
| Glucose | 1,334 | 28 | 1,400 | 24 | 1 |
| Critical Care | 500 | 10 | 700 | 12 | 7 |
| Cardiac Markers | 490 | 10 | 650 | 11 | 6 |
| Infectious Diseases | 470 | 10 | 550 | 9 | 3 |
| Cholesterol/Lipids | 335 | 7 | 475 | 8 | 7 |
| Coagulation/PT, ACT | 300 | 6 | 475 | 8 | 10 |
| Hematology | 290 | 6 | 310 | 5 | 1 |
| HbA1c | 200 | 4 | 325 | 5 | 10 |
| Chemistry/Immunoassays | 180 | 4 | 210 | 4 | 3 |
| Fecal occult blood | 155 | 3 | 200 | 3 | 5 |
| Drugs of Abuse | 155 | 3 | 185 | 3 | 4 |
| Pregnancy | 146 | 3 | 170 | 3 | 3 |
| Urinalysis | 120 | 3 | 140 | 2 | 3 |
| Oncology | 95 | 2 | 130 | 2 | 6 |
| Other | 10 | 0.2 | 15 | 0 | 8 |
| **Professional Total** | **4,780** | **100** | **5,935** | **100** | **5** |
| Prof w/o glucose | 3,446 | | 4,535 | | 6 |

### Professional POC Growth

Driving much of this growth in the professional segment is healthcare providers shifting more testing from central labs to POC as the menu of CLIA waived tests increase. Higher healthcare costs, lower reimbursement rates, improved accuracy and the demand for and clinical advantages of immediate testing results will likely continue this trend indefinitely. POC testing offers certain significant advantages over central lab testing such as lower cost, simpler testing procedures, ease of interpretation, improved therapeutic intervention and the elimination of the need for patients to return for a follow-up visit. While these have always been benefits of POC testing, in the past clinical lab testing had benefitted from greater sensitivity and specificity which had deterred a greater reliance on POC diagnostics. The recent advent of new technologies has significantly narrowed the gap between the quality of results delivered from the professional labs versus POC which has been a major impetus for the macro shift towards a greater use of POC diagnostics.

Another recent driver of interest in POC testing which primarily addresses the professional POC segment (although also has relevance to OTC POC) is political/legislative/reimbursement/advocacy efforts which are focused on lowering healthcare costs through earlier diagnosis and intervention. Examples include Obamacare which has a focus on quality over quantity of care and increasing the insured base by 30+ million, improved reimbursement, and recent recommendations by the U.S. Preventative Services Task Force (USPSTF) and/or Centers for Disease Control relative to advocating increased or improved testing/screening for conditions such as HIV, HCV, prostate cancer, and breast cancer.

### OTC POC Growth

Growth in the OTC setting is coming from a combination of catalysts including an increasing breadth of tests for more indications, more user friendly tests (such as Biomerica's fecal occult blood test), more accurate/sensitive tests, DTC marketing campaigns, and the aforementioned recent focus on reducing healthcare costs through earlier diagnosis.

### *U.S. Dominates POC Testing, Although Overseas May Offer Higher Growth…*

According to estimates by Kalorama Information (chart below), the U.S. accounts for approximately 55% of the worldwide market for POC diagnostics with Europe next inline at 35%. The majority of growth in POC may come from overseas, however.

| Region | Sales ($MM) | Percent of Market |
|---|---|---|
| United States | $7,100 | 55% |
| Europe | 4,500 | 35% |
| Asia/Japan | 647 | 5% |
| Rest of World | 647 | 5% |
| **Total** | **12,894** | **100%** |

In Europe, where POC testing had been restricted to some degree as central lab testing dominated in certain countries such as Germany, a shift is underway as a result of a greater emphasis on earlier diagnosis and prevention - which should benefit the POC setting. Similarly, the U.K. recently adopted a more decentralized approach to disease prevention and healthcare delivery, largely driven by an emphasis on controlling healthcare costs - this has resulted in greater use of POC testing. Japan's highly centralized healthcare system means most testing is performed in clinical labs. The Japanese POC market is loosening however, particularly for rapid tests for emergency and critical care. Other parts of Asia, including China and India, which are evolving economically as well as adopting a more Western diet (i.e. - high fat/calorie/cholesterol) are viewed as huge growth opportunities for U.S. diagnostics companies - higher incomes means POC tests are now more affordable in these countries and poorer diets means an increased need for testing of a variety of conditions (cancer, cholesterol, cardiac markers, etc). In Africa and other emerging markets viral infections including HIV and hepatitis C continue to be problematic and even of epidemic proportions in certain areas (e.g. - HIV in sub-Saharan Africa) - rapid POC testing has quickly become a front-line measure to help control the further spread of these diseases.

## FINANCIAL CONDITION / CAPITAL STRUCTURE

### Balance Sheet / Cash Flow

Biomerica has a history of maintaining a healthy financial condition and remains that way currently. Cash balance at the end of fiscal Q3 2014 (ending 2/28/2014) was $1.7 million. BMRA has access to a credit line but has nothing drawn on it. Book value stands at $5.7 million and quality of assets appears reasonably strong. Intangibles account for less than 5% of total assets.

Biomerica has been generating positive cash flow on both a cash from operations as well as a free cash flow basis (cash from operations less CapEx) on a fairly regular basis, although the recent dip in revenue has pushed them slightly cash flow negative. Through fiscal 2013 cash flow from operations and free cash flow were $1.4 million and $1.1 million, respectively. In the first nine months of fiscal 2014 BMRA did burn a moderate amount of cash, however. Cash flow from operating activities was an outflow $852k over the first three quarters of 2014 but excluding changes in working capital (which included a $360k increase in inventory and $305k increase in A/R), cash from operating activities was an outflow of only $237k.

Assuming BMRA continues to generate positive cash flow, book value should continue to increase. BMRA's ability to generate positive cash flow is due in no small part to their relatively meager CapEx needs and SG&A spend along with keeping manufacturing costs down (low cost facility in Mexico), exiting most R&D functions, and low overhead. We do not anticipate any significant PP&E/intangible asset purchases in the foreseeable future. Relative to SG&A we note that executive compensation is relatively meager (see table below from BMRA public filings) and is possibly the lowest of any company we cover in the med-tech space (many of which, unlike BMRA, do not generate positive cash flow). We think this speaks loudly to management's and the board's focus on increasing shareholder value.

**EXECUTIVE COMPENSATION**
**SUMMARY COMPENSATION TABLE (Yrs ended May 31, 2012 & 2013)**

| Name and Principal Position | Year | Salary ($) | Bonus ($) | Stock Awards ($) | Option Awards ($) (4) | Non Equity Incentive Plan Compen-sation ($) | Non-qualified Deferred Compen-sation Earnings | All Other Compen-sation ($) | Total ($) |
|---|---|---|---|---|---|---|---|---|---|
| Zackary Irani Chairman & Chief Executive Officer | 2013 | 135,000 | 7,800 | -0- | -0- | -0- | -0- | -0- | 142,800 |
| | 2012 | 135,000 | 8,050 | -0- | 16,784 | -0- | -0- | -0- | 159,834 |
| Francis Capitanio President | 2013 | 134,246 | 7,800 | -0- | -0- | -0- | -0- | -0- | 142,046 |
| | 2012 | 135,063 | 8,050 | -0- | 11,189 | -0- | -0- | -0- | 154,302 |
| Janet Moore Chief Financial Officer, Treasurer & Secretary | 2013 | 99,072 | 7,800 | -0- | -0- | -0- | -0- | -0- | 106,872 |
| | 2012 | 95,832 | 8,050 | -0- | 7,609 | -0- | -0- | -0- | 111,491 |

### Capital Structure

BMRA's capital structure is straightforward with no debt, no preferred, no convertibles or esoteric securities. Basic and dilutive share counts are 7.4 million and 7.7 million, which is impressively minimal and relatively very low compared to most micro-cap companies that we cover. Unlike many companies which struggle to maintain solvency and resort to regular and sizeable share compensation programs in an effort to reduce cash burn, BMRA funds itself with internally generated funds and does not have to rely on issuance of dilutive stock/options/warrants to maintain operations. We think this again speaks to BMRA's leadership and attention to increasing shareholder value.

## OUTLOOK

**Revenue:** *Asia Sales Recently Weak Due To Change in Distributors But Look To Return To Legacy Levels Over Mid-Term. Near-to-Mid Term We Look For Europe to Return to Growth, Deeper Penetration Into S. America and Double-Digit Growth in U.S.*

We think Asia continues to be the major catalyst driving mid-term revenue growth as Biomerica expands both their geographic reach as well as their product menu throughout the continent, both key aspects to the company's growth strategy, particularly overseas. With Asia accounting for over 60% of the world's population and experiencing increasing demand for higher quality healthcare as a result of greater economic prosperity, an aging population (particularly in China due to their high birth rate after 1949 and one-child policy), and greater adoption of Western diets, Asia represents an under-served market with potentially very attractive opportunities for the foreseeable future.

Similar to Asia, parts of South America have benefitted from rapid economic growth and a resultant increased demand for better healthcare including earlier diagnosis and intervention. While Biomerica's revenue from South America has been minimal to-date, we expect the company will look to expand their presence there through additional distribution agreements and think over the mid-to-long term South America could be a meaningful contributor to revenue.

Europe accounts for ~35% - 50% of BMRA's revenue. Growth had recently flattened but significantly increased over the last twelve months with management pointing to increased sales of products not purchased previously in Europe as the catalyst. It is not clear whether this particular catalyst will continue to buoy growth in Europe, although other initiatives have the potential to do so. While the regulatory environment is significantly less stringent in most of Europe as compared to the U.S. relative to diagnostic tests, POC testing there is still largely in its infancy. The recent shift in greater (although still very modest) reliance on POC testing in some parts of Europe including Germany and the U.K. as a result of more emphasis on earlier diagnosis and prevention should offer greater opportunities for growth of both BMRA's POC and clinical lab products. In addition, Eastern Europe, which is more of an emerging territory with potentially less competition could provide opportunity for growth via bolt-on distribution. In January 2014 BMRA announced an agreement with a top-five pharmaceutical company to begin distributing some of its products in parts of Europe. This should also help catalyze further revenue growth in that continent. We think Europe can return to sustainable growth over the near to mid-term and model mid-to-high single-digit revenue growth in Europe from fiscal 2014 through 2016.

In contrast to BMRA's international markets, growth in the U.S. has less to do with expanding distribution or their overall product portfolio and more to do with exploiting niche areas and potentially bringing some of their professional POC products to the OTC/retail channel and/or seeking CLIA waiver for some of their ASR tests (both of which would require additional regulatory approval). Product differentiation such as their more user friendly fecal occult blood test as well as offering a menu of more esoteric tests provides somewhat of a competitive barrier against their much larger and deeper entrenched peers. We expect this to continue to be a part of BMRA's domestic strategy. If the company can bring more of their existing tests to the POC channel, which is already a well-established part of the U.S. healthcare system, that could provide a real opportunity to grow domestic revenue. Another real opportunity for U.S. growth could be with potential partnerships or licensing agreements to supply ASR or CLIA-waived test kits to instrument manufacturers. Instrument manufacturers have a real interest expanding their testing menus as the more tests that can be run on each instrument can provide a significant competitive advantage - BMRA's more esoteric tests potentially offer valuable competitive differentiation.

*Management Focused on Accelerating Growth Over Long-Term*

Over the mid-to-longer terms we think Biomerica will be looking to further exploit their existing technology. We view management's priorities as such that they will be focused on accelerating growth through bringing higher potential and novel products to market - BMRA recently alluded to a GI product which we think likely fits into this growth strategy. We note that our current model does not incorporate an assumed contribution from "home run" type products - although we think given the company's expertise in certain disease areas (including GI, foodborne, women's health, and infectious disease), along with patentable and perhaps underexploited technology platforms and management's renewed focus on accelerating growth over the long-term, that big-winner type products could very well materialize over the coming years.

**Operating Expenses:** *Should Be Highly Leverageble As Revenue Turns Back to Positive Growth*

As we have detailed in our coverage of BMRA, the company's operating expenses as a % of revenue have historically been relatively low and had shown improvement when revenue was growing. While the recent dip in revenues crimped both gross and operating margins, these showed significant improvement in the most recent quarter, benefitting from the jump in revenue. We expect both to widen with our expectations that revenue will continue its trend upwards.

**EPS:** *Expect Growth Over Mid-to-Long Term*

The combination of revenue growth, incremental widening of GM and increased operating leverage should result in EPS growth. While we model EPS to fall to ($0.06) in 2014 as a result of the recent hiccup from the change in Asian distributors, we think it turns back positive in 2015 and model EPS of $0.13 in 2017.

## VALUATION / RECOMMENDATION

We use a comparable cohort of six companies of various market capitalizations in the medical diagnostics space with products/services that target the POC and/or clinical lab markets to value BMRA. Based on several metrics and excluding the low and high values, BMRA is valued between $0.86 and $3.27 per share. Average is 2.20/share.

Relative to risk mitigation, cash flow and book value are key. BMRA's current enterprise value is less than 4x EBITDA (compared to 20x comp avg) and market value is just 1.0x book value (compared to 3.7x comp avg). Assuming Biomerica continues to generate positive free cash flow over the long term, book value should increase further. The company has liquid and high quality assets ($1.7 million cash, high quality A/R and inventory, minimal intangibles), and zero debt. We think all this adds up to very low downside risk.

In summary, we believe BMRA is significantly undervalued with some of the lowest downside risk available in the micro-cap space. We recommend buying the shares up to our $2.20/share target price and are maintaining our Outperform rating.

**Comparable Multiples**

| Ticker | P/E (ttm) | P/E (FY1) | P/E (FY4) | P/Book | EV / EBITDA (ttm) | P/S (ttm) | P/S (FY1) |
|---|---|---|---|---|---|---|---|
| **TRIB** | 56.0 | 20.0 | 13.6 | 2.8 | 25.0 | 5.7 | 4.6 |
| **CEMI** | 53.0 | 18.0 | 5.2 | 1.5 | 12.0 | 1.0 | 1.0 |
| **VIVO** | 23.0 | 19.0 | 15.5 | 5.6 | 14.0 | 4.7 | 4.2 |
| **ERB** | N/A | N/A | N/A | 5.5 | 0.0 | 3.3 | N/A |
| **CONX** | 45.0 | 0.3 | 10.8 | 2.4 | 22.0 | 1.4 | 1.2 |
| **ABAX** | 50.0 | 42.0 | 36.1 | 4.7 | 25.0 | 4.8 | 4.5 |
| **Average** | **45.4** | **19.9** | **16.2** | **3.7** | **19.6** | **3.5** | **3.1** |

**FY1, FY4 = forecast year 1, forecast year 4**

**Biomerica Stock Value Based On Comp:**

| | P/E (ttm) | P/E (FY1) | P/E (FY4) | P/Book | EV / EBITDA (ttm) | P/S (ttm) | P/S (FY1) | AVG |
|---|---|---|---|---|---|---|---|---|
| **BMRA** | $3.27 | ~~-$1.22~~ | $2.17 | $2.70 | $0.86 | ~~$3.05~~ | $1.98 | **$2.20** |

## FINANCIAL MODEL

Biomerica Inc.

| | 2013 A | Q1A | Q2A | Q3A | Q4E | 2014 E | 2015 E | 2016 E | 2017 E |
|---|---|---|---|---|---|---|---|---|---|
| Total Revenues | $6,473.0 | $1,013.7 | $934.8 | $1,492.7 | $1,232.2 | $4,674.2 | $6,752.6 | $9,060.6 | $10,611.1 |
| *YOY Growth* | *6.4%* | *-40.4%* | *-50.4%* | *5.4%* | *-16.2%* | *-27.8%* | *44.5%* | *34.2%* | *17.1%* |
| Cost of Goods Sold | $4,045.1 | $753.4 | $679.2 | $914.2 | $823.1 | $3,169.9 | $4,510.7 | $5,726.3 | $6,419.7 |
| Gross Income | $2,427.9 | $260.3 | $255.6 | $578.6 | $409.1 | $1,504.3 | $2,241.9 | $3,334.3 | $4,191.4 |
| *Gross Margin* | *37.5%* | *25.7%* | *27.3%* | *38.8%* | *33.2%* | *32.2%* | *33.2%* | *36.8%* | *39.5%* |
| SG&A | $1,454.8 | $342.8 | $366.4 | $405.8 | $369.6 | $1,484.6 | $1,789.4 | $2,301.4 | $2,461.8 |
| *% SG&A* | *22.5%* | *33.8%* | *39.2%* | *27.2%* | *30.0%* | *31.8%* | *26.5%* | *25.4%* | *23.2%* |
| R&D | $459.1 | $91.3 | $136.8 | $140.2 | $115.0 | $483.2 | $385.0 | $398.0 | $408.0 |
| *% R&D* | *7.1%* | *9.0%* | *14.6%* | *9.4%* | *9.3%* | *10.3%* | *5.7%* | *4.4%* | *3.8%* |
| Operating Income | $514.0 | ($173.8) | ($247.5) | $32.6 | ($75.6) | ($463.5) | $67.4 | $634.9 | $1,321.6 |
| *Operating Margin* | *7.9%* | *-17.1%* | *-26.5%* | *2.2%* | *-6.1%* | *-9.9%* | *1.0%* | *7.0%* | *12.5%* |
| Total Other Income (Expense) | $10.5 | $6.1 | $4.1 | $3.5 | $1.5 | $15.2 | $7.4 | $9.1 | $14.2 |
| Pre-Tax Income | $524.5 | ($167.7) | ($243.4) | $36.1 | ($74.1) | ($448.4) | $74.8 | $644.0 | $1,335.8 |
| Tax expense (benefit) | ($12.5) | $0.0 | $0.0 | $9.5 | $0.0 | $9.5 | $0.0 | $0.0 | $200.4 |
| *Tax Rate* | *-2.4%* | *0.0%* | *0.0%* | *26.4%* | *0.0%* | *-2.1%* | *0.0%* | *0.0%* | *15.0%* |
| Net Income | $537.0 | ($167.7) | ($243.4) | $26.5 | ($74.1) | ($457.9) | $74.8 | $644.0 | $1,135.4 |
| *YOY Growth* | *-2.1%* | *-130.6%* | *-183.4%* | *-88.8%* | *107.9%* | *593.2%* | *-116.3%* | *760.7%* | *76.3%* |
| *Net Margin* | *8.3%* | *-16.5%* | *-26.0%* | *1.8%* | *-6.0%* | *-9.8%* | *1.1%* | *7.1%* | *10.7%* |
| EPS | $0.07 | ($0.02) | ($0.03) | $0.00 | ($0.01) | ($0.06) | $0.01 | $0.08 | $0.13 |
| *YOY Growth* | *-6.6%* | | | | | *578.9%* | *-114.9%* | *734.3%* | *75.5%* |
| Diluted Shares O/S | 7,451 | 7,281 | 7,279 | 7,731 | 7,600 | 7,473 | 8,200 | 8,460 | 8,500 |

*Brian Marckx, CFA*

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## LEADERSHIP

**Zackary Irani**
**CEO and Chairman**
Mr. Zackary Irani has been a Director of the Company, and has been serving as the Company's Chairman of the Board and Chief Executive Officer since April 29, 1997. Prior to that time, Mr. Irani served as the Company's Vice President of Business Development. He has been an employee of the Company since 1986. During fiscal 2008 and 2009, Mr. Irani also served as Chairman of the Board of Lancer Orthodontics, Inc. and served as Lancer's Chief Executive Officer from April 1997 until April 2004.

**Janet Moore**
**CEO and Director**
Ms. Janet Moore has been a Director of the Company since April 29, 1997, and has been serving as the Company's Secretary and Treasurer since 1985. She has served as the Company's Chief Financial Officer since 1999 and has been an employee of the Company since 1976. During fiscal 2008 and through September 29, 2008, Ms. Moore also served as a director and Secretary of Lancer Orthodontics, Inc.

**Francis Capitanio**
**President**
Mr. Francis Capitanio, age 68, has served as the President of the diagnostics division of Biomerica since July 10, 2000. Mr. Capitanio was President and Chief Executive Officer of Kalisto Biologicals, Inc. from 1997 until 2000. From 1980 until 1996, he was President and Chief Executive Officer of Diatech Diagnostics.

**Francis R. Cano**
**Director**
Francis R. Cano, Ph.D., has served as a Director of the Company since June 1999. Dr. Cano is the managing director of Cano Biotechnology, a thirteen year old consulting business which is focused on vaccines and immunotherapeutics. He co-founded Aviron in 1993 and served as the President and Chief Operating Officer. The Company developed an intranasal flu vaccine and was acquired by MedImmune in 2002 for $1.2 billion. From 1972-1993 Dr. Cano held various scientific/management positions with American Cyanamid, the last of which was as Vice President-General Manager of the Lederle-Praxis Biological Division. During fiscal 2008 and through September 29, 2008, Dr. Cano also served on the board of Lancer Orthodontics, Inc., and currently serves on the board of Arbor Vita Corporation and Dynavax.

**Allen Barbieri**
**Director**
Mr. Allen Barbieri has served as a Director of the Company since October 1999. Mr. Barbieri currently serves as the CEO of LubriGreen Biosynthetics, a privately held renewable lubricants manufacturing company. Prior to that, from April 2004 to Sept. 2009, Mr. Barbieri served as the Chief Executive Officer of Lancer Orthodontics, Inc. and from 1999 until the present time, Mr. Barbieri has also worked as a private investor. From 1998 to 1999, he served as President and Chief Financial Officer of Buy.com. From 1994 until 1998 Mr. Barbieri was President and Chief Executive Officer of Pacific National Bank.

**Jane Emerson**
**Director**
Dr. Emerson has served as a director of the Company since April 2007. Since July 1, 2009 Dr. Emerson has served as Chief of Clinical Pathology at the USC Keck School of Medicine, Los Angeles, California. From 1994 to 2009 Dr. Emerson served as Chief, Division of Clinical Pathology for the University of California, Irvine. From 2000 to 2009 she also served as the Chief of Clinical Pathology and from 2004 to 2009 as a Clinical Professor for the University of California, Irvine. From 2005 to 2009 Dr. Emerson served as Vice Chair for Clinical Programs, Department of Pathology and Laboratory Medicine for the University of California, Irvine.

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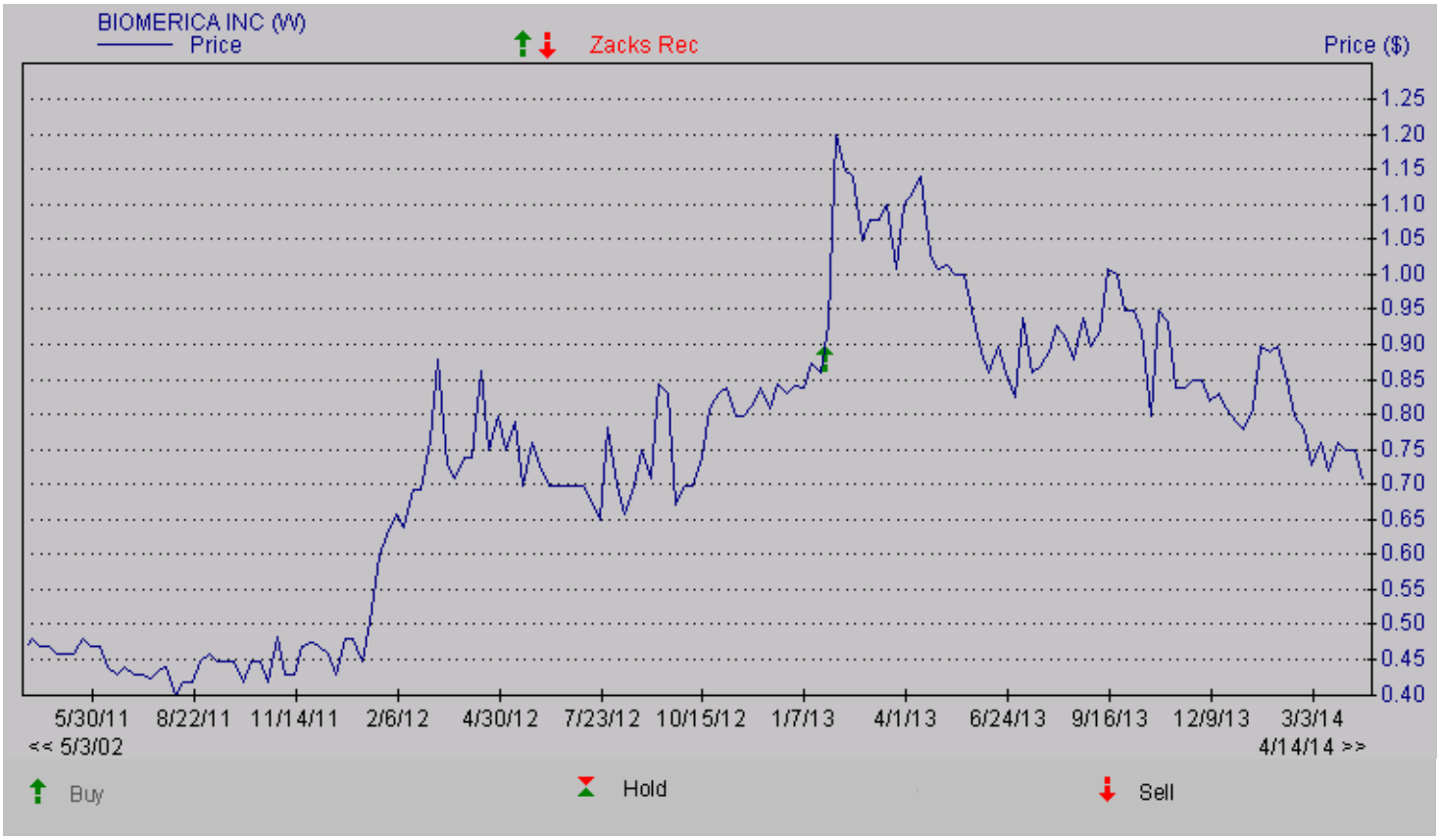

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