
**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION**
Washington, D.C. 20549

FORM 6-K

**REPORT OF FOREIGN PRIVATE ISSUER
PURSUANT TO SECTION 13a-16 OR 15d-16
UNDER THE SECURITIES EXCHANGE ACT OF 1934**

May 13, 2015

Commission File Number: 001-36815

Ascendis Pharma A/S
(Exact Name of Registrant as Specified in Its Charter)

**Tuborg Boulevard 12
DK-2900 Hellerup
Denmark**
(Address of principal executive offices)

Indicate by check mark whether the registrant files or will file annual reports under cover of Form 20-F or Form 40-F.

Form 20-F Form 40-F

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(1):

Indicate by check mark if the registrant is submitting the Form 6-K in paper as permitted by Regulation S-T Rule 101(b)(7):

Representatives of Ascendis Pharma A/S (the “Company”) plan to present the information in the presentation attached hereto as Exhibit 99.1 on May 13, 2015 at the Bank of America Merrill Lynch 2015 Health Care Conference.

The furnishing of the attached presentation is not an admission as to the materiality of any information therein. The information contained in the presentation is summary information that is intended to be considered in the context of more complete information included in the Company’s filings with the Securities and Exchange Commission (the “SEC”) and other public announcements that the Company has made and may make from time to time by press release or otherwise. The Company undertakes no duty or obligation to update or revise the information contained in this report, although it may do so from time to time as its management believes is appropriate. Any such updating may be made through the filing or furnishing of other reports or documents with the SEC, through press releases or through other public disclosures.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, as amended, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Ascendis Pharma A/S

Date: May 13, 2015

By: /s/ Thomas P. Soloway

Thomas P. Soloway

Senior Vice President, Chief Financial Officer

EXHIBIT INDEX

<u>Exhibit No.</u>	<u>Description</u>
99.1	Company Presentation.



Q2 2015

ASCENDIS PHARMA

Jan Mikkelsen, President and CEO

Company Presentation, Q2 2015

CAUTIONARY NOTE ON FORWARD LOOKING STATEMENTS:

This presentation contains forward-looking statements. All statements other than statements of historical facts contained in this presentation, such as statements regarding our future results of operations and financial position, business strategy, prospective products, availability of funding, clinical trial results (including the timing of data from our ongoing Phase 2 pediatric study of TransCon hGH), product approvals and regulatory pathways, collaborations, timing and likelihood of success, plans and objectives of management for future operations, and future results of current and anticipated products, are forward-looking statements. These forward-looking statements are based on our current expectations and beliefs, as well as assumptions concerning future events. These statements involve known and unknown risks, uncertainties and other factors that could cause our actual results to differ materially from the results discussed in the forward-looking statements. These risks, uncertainties and other factors are more fully described in our reports filed with or submitted to the Securities and Exchange Commission, including, without limitation, our most recent Annual Report on Form 20-F, particularly in the sections titled "Risk Factors" and "Management's Discussion and Analysis of Financial Condition and Results of Operations." In light of the significant uncertainties in our forward-looking statements, you should not place undue reliance on these statements or regard these statements as a representation or warranty by us or any other person that we will achieve our objectives and plans in any specified timeframe, or at all.

Any forward-looking statement made by us in this presentation speaks only as of the date of this presentation and represents our estimates and assumptions only as of the date of this presentation. Except as required by law, we assume no obligation to update these statements publicly, whether as a result of new information, future events or otherwise after the date of this presentation.

This presentation concerns product candidates that are under clinical investigation and which have not yet been approved for marketing by the U.S. Food and Drug Administration, European Medicines Agency or other foreign regulatory authorities. These product candidates are currently limited by U.S. Federal law to investigational use, and no representations are made as to their safety or effectiveness for the purposes for which they are being investigated.

Ascendis is a trademark that we use in this presentation. Any other trademarks appearing in this presentation are the property of their respective holders.

INVESTMENT HIGHLIGHTS

Technology & Pipeline

TransCon technology is applied to create long-acting prodrugs with best-in-class profiles

Internal programs targeting multi-billion dollar orphan indications:

- Growth disorders and pulmonary arterial hypertension

Strong Balance Sheet

Capital to complete Phase 3 study of TransCon Growth Hormone

March 31st, 2015 cash balance: ~€153 million*

Partners

High-value collaborations with Large Cap Pharma in their key strategic therapeutic areas

- Roche Genentech in ophthalmology
- Sanofi in diabetes

Partner Revenue

Existing and future collaborations are a potential source of significant revenue

- Approximately €202 million* in development and regulatory milestones for three product candidates
- Eligible for royalties from mid-single to low teen digit percentages from ophthalmology collaboration

Intellectual Property

All TransCon products eligible for new composition of matter IP

TransCon technology is broadly applicable with no third-party royalty or milestone payment obligations

*USD/EUR=1.076 as of March 31, 2015

EXPERIENCED LEADERSHIP TEAM

Management

Jan Mikkelsen, Director, President and CEO
*LifeCycle Pharma (now known as Veloxis), Maxygen,
Profound Pharma, Novo Nordisk*

Martin Auster, MD, SVP & CBO
United Therapeutics, Wachovia, GLG Partners

**Michael Wolff Jensen, LLM,
Chairman, SVP & General Counsel**
Dong Energy, Veloxis, Genmab

Grethe Rasmussen, PhD, SVP Development
Maxygen, Novo Nordisk

Dr. Harald Rau, SVP & CSO
Complex Biosystems

Thomas P. Soloway, SVP & CFO
Transcept, Montreux Equity Partners

Lotte Sønnderbjerg, SVP & CAO
Veloxis, Acadia, Novo Nordisk

Board of Directors

**Michael Wolff Jensen, LLM,
Chairman, SVP & General Counsel**
Dong Energy, Veloxis, Genmab

Albert Cha, MD, PhD
Vivo Capital, Managing Partner

Edwin de Graaf
Gilde Healthcare Partners, Managing Partner

James Healy, MD, PhD
Sofinnova Ventures, General Partner

Michael Mayer
TechnoStart, Managing Partner

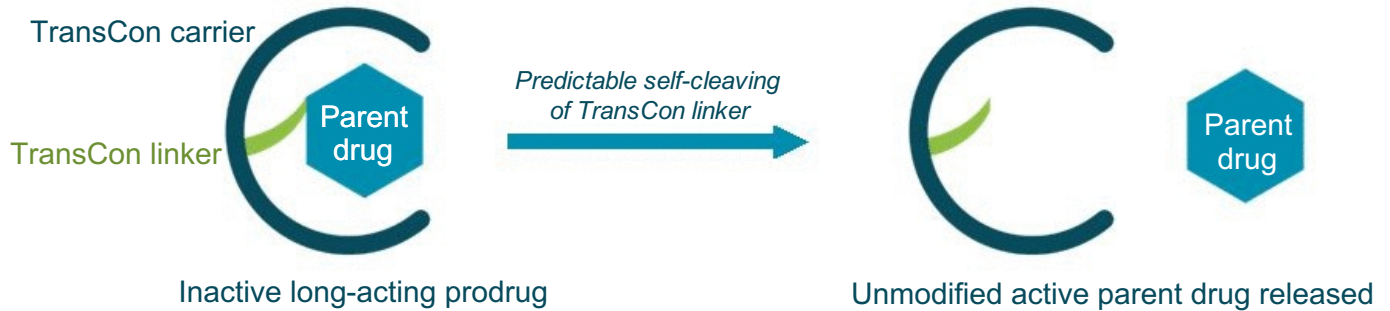
Jan Mikkelsen, President and CEO
*LifeCycle Pharma (now known as Veloxis), Maxygen,
Profound Pharma, Novo Nordisk*

Martin Olin
Symphogen A/S, CFO

Jonathan Silverstein, JD
Orbimed, Co-Head of Global Private Equity



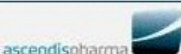

Rafaèle Tordjman, MD, PhD
Sofinnova Partners, Managing Partner

TRANSCON TECHNOLOGY



- Long-acting prodrugs with predictable release of unmodified parent drugs
 - Parent drugs can be proteins, peptides or small molecules
 - Predictable release of parent drug supporting up to half-yearly administration
 - TransCon linker release dependent only on pH and temperature
 - Enables systemic or localized drug exposure depending upon choice of TransCon carrier
- Same mode-of-action as parent drug molecule
- Potential to improve development success rate when incorporating approved parent drug

BROAD, BALANCED AND DIVERSE PIPELINE

Product Candidate	Primary Indication	Approved Parent Drug	Stage of Development	Market Size	Worldwide Commercial Rights
TransCon Growth Hormone	Pediatric Growth hormone deficiency	✓	Phase 2 (Topline data expected mid-2015)	> \$3 billion	
	Adult Growth hormone deficiency	✓	Phase 2 completed		
TransCon Treprostinil	Pulmonary Arterial Hypertension	✓	Phase 1	> \$1 billion	
TransCon Ranibizumab	Ophthalmology	✓	Preclinical	> \$5 billion	Genentech <small>A Member of the Roche Group</small>
TransCon Peptide	Diabetes		Preclinical	n/a	SANOFI 



TransCon hGH: Once-weekly growth hormone

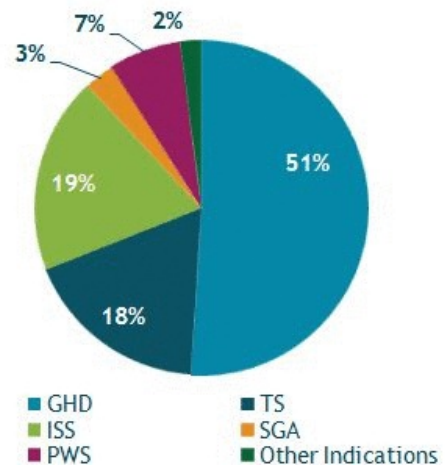
ONCE-WEEKLY TRANSCON GROWTH HORMONE

- The daily hGH market is a \$3+ billion orphan opportunity
- Current therapies require daily injections, which can result in poor compliance and suboptimal treatment response ¹
- TransCon Growth Hormone is a long-acting prodrug designed to release unmodified growth hormone in the bloodstream
 - Maintains the same mode-of-action as daily hGH
 - Efficacy, safety, tolerability and immunogenic profile comparable to daily hGH
- Phase 2 study in adults with growth hormone deficiency: Comparable dose response and tolerability to daily hGH therapy
- Phase 2 study in children with growth hormone deficiency ongoing

¹ PLoS ONE 2011, 6(1), e16223

GROWTH HORMONE MARKET

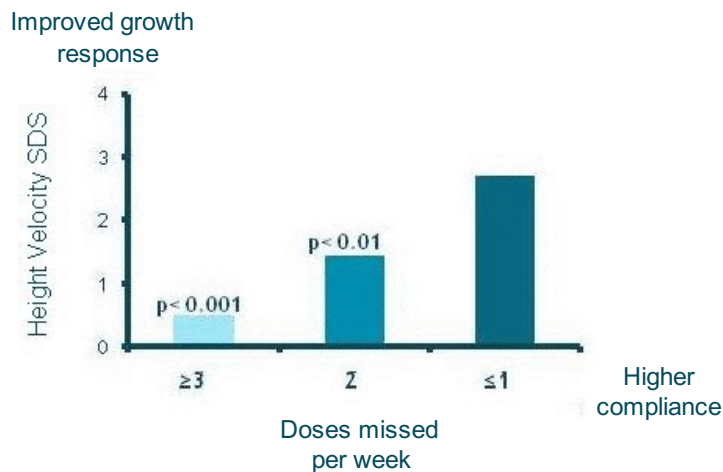
- Global sales of daily hGH products exceeded \$3 billion in 2013
- The daily hGH market is fragmented and undifferentiated
 - Novo Nordisk, Pfizer, Eli Lilly, Sandoz, Merck KGaA and Roche account for approximately 95% of volume market share
- Pediatric indications comprise up to 90% of the market
- Indications for growth hormone treatment include:
 - Growth Hormone Deficiency (GHD)
 - Turner Syndrome (TS)
 - Idiopathic short stature (ISS)
 - Prader-Willi Syndrome (PWS)
 - Small for Gestational Age (SGA)



Ascendis market research

POOR COMPLIANCE REDUCES TREATMENT OUTCOMES

- Poor compliance with daily growth hormone therapy is associated with reduced height velocity and impaired quality of life¹
 - Two out of three of the patients miss more than one injection on average per week



- Reduced frequency of administration is associated with better compliance²
- Once-weekly TransCon Growth Hormone may improve compliance and overall treatment outcomes

¹ PLoS ONE 2011, 6(1), e16223

² Clinical Therapeutics, 2008, 30(2),307

TRANSCON hGH: LONG-ACTING UNMODIFIED GROWTH HORMONE

- TransCon Growth Hormone is designed to provide the efficacy, safety and tolerability of daily hGH with once-weekly dosing

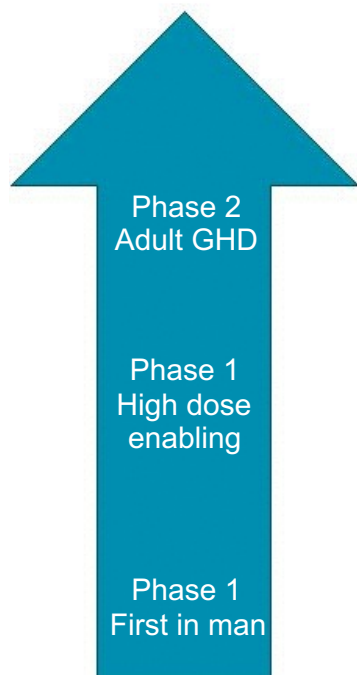
Daily hGH treatment characteristics

Height Velocity	First-year height velocity >10 cm
Metabolic effects	Reduced adiposity and improved cardiovascular health
Quality of Life	Improved
Safety	Safe and well-tolerated
Injection	Essentially pain-free < 1.0 mL per injection
Device	Convenient and easy to use



TransCon hGH prodrug releases unmodified hGH

TRANSCON hGH: OVERVIEW OF COMPLETED STUDIES



- Dose proportional response in hGH and IGF-I levels
- hGH & IGF-I Cmax and exposure comparable between equivalent weekly doses of TransCon hGH and daily hGH
- No treatment-emergent anti-hGH antibody formation
- Transient and generally mild injection site reactions comparable to daily hGH
- PK and PD data support once-weekly administration

PHASE 2 STUDY IN GHD CHILDREN ONGOING

- Six-month Phase 2 study in GHD children of TransCon hGH vs. daily hGH
 - Multicenter, randomized, open label, active-controlled, parallel-group study investigating the safety, tolerability and efficacy in pre-pubertal children with GHD (n=53)
 - Efficacy endpoint: 6-month mean height velocity
 - Enrolled children meet internationally recognized guidelines, similar enrollment criteria expected in Phase 3 design
 - Doses of 0.14 mg, 0.21 mg and 0.30 mg hGH/kg/week administered once-weekly versus daily hGH equivalent to 0.21 mg hGH/kg/week
 - Study being conducted across Europe and North Africa

- Positive interim update reported December 2014 (n=25)

- Fully enrolled: n=53

- Top-line study results anticipated mid-2015

PATIENT DEMOGRAPHICS COMPARABLE TO OTHER hGH STUDIES

- Phase 2 pediatric study patient demographics are comparable to U.S. and EU studies of daily and long-acting growth hormone products

	TransCon hGH Weekly	VRS-317 Semi-monthly	Lagova* Weekly	Norditropin Daily
Key territory	Europe	United States	Europe	United States
Number of subjects	53	64	50	104
Age	7.8	7.8	6.1	7.8
Height SDS	-3.1	-2.5	-3.9	-3.0
GH stimulation test	5.0	5.4	3.9	4.9
IGF-I SDS	-2.2	-1.7	-2.1	-2.8

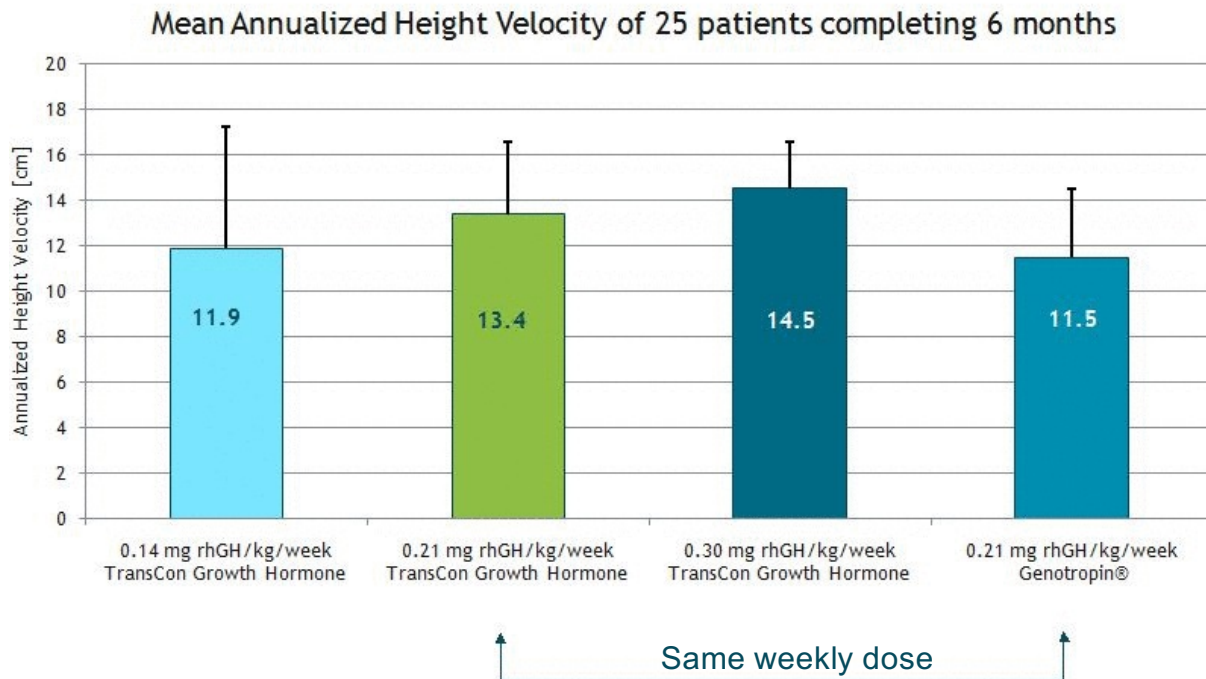
VRS-317: Versartis corporate presentation Jan. 2015

Lagova: OPKO presentation ENDO 2014

Norditropin: JCEM 2002 87: 90-98

* Ascendis analysis using weighted average of cohorts 1-4

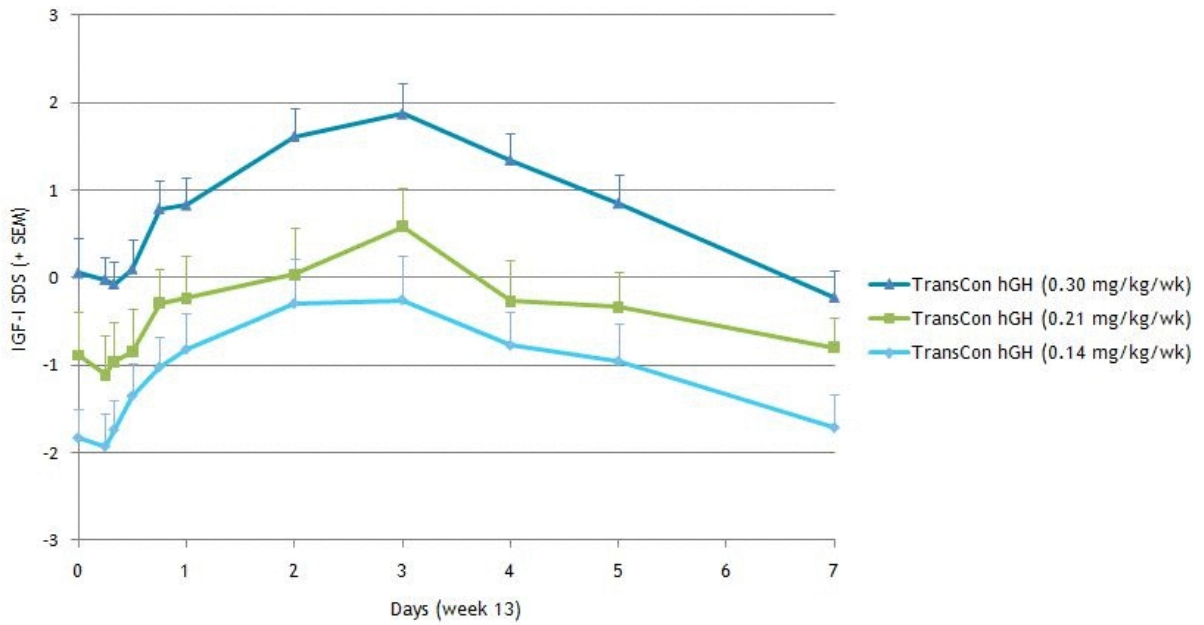
TRANSCON hGH PRODUCES ROBUST GROWTH COMPARABLE TO DAILY hGH



TransCon hGH compared to Genotropin® control arm

Phase 2 pediatric study 6-month interim results

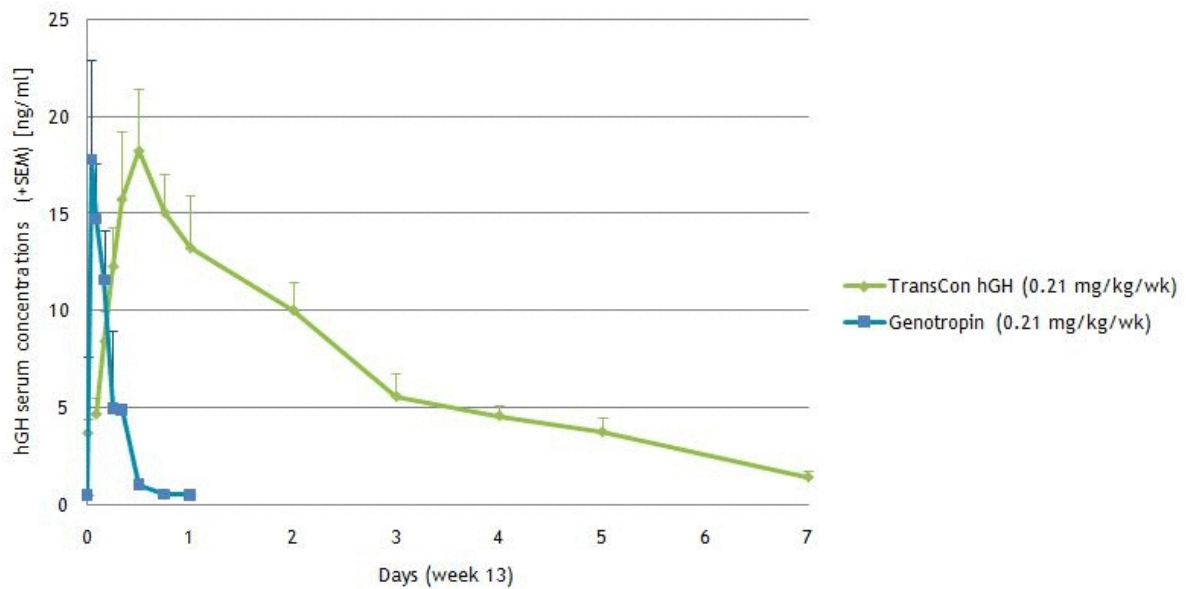
DOSE PROPORTIONAL IGF-I ELEVATION INTO THE NORMAL RANGE



- Transient point values of IGF-I SDS > +2 have been observed in a small number of patients and only in the high-dose treatment arm

Phase 2 pediatric study 6-month interim results

COMPARABLE hGH LEVELS FOR TRANSCON hGH AND DAILY hGH



- Maximum hGH blood concentration is comparable between equivalent weekly doses of TransCon hGH and daily hGH (0.21 mg/kg/week)
- Dose-proportionality observed for TransCon hGH across dose range

Phase 2 pediatric study 6-month interim results

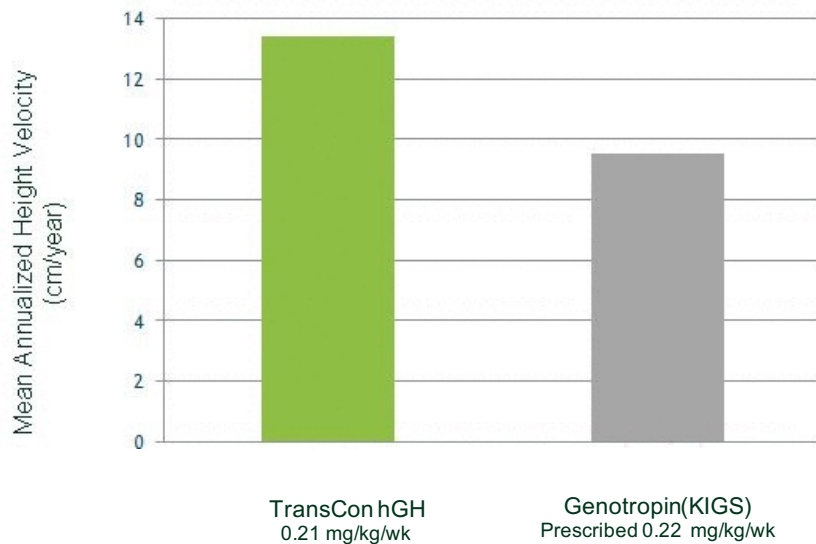
SAFETY COMPARABLE BETWEEN TRANSCON hGH AND DAILY hGH

- No Serious Adverse Events (SAEs) related to study drug
- Adverse events consistent with hGH therapy observed and not different between cohorts
- Low immunogenicity comparable to daily hGH
- Transient injection site reactions comparable to daily hGH
 - >950 TransCon hGH injections administered in the Phase 2 pediatric study
 - No reports of lipoatrophy or nodule formation

Phase 2 pediatric study 6-month interim results

TRANSCON hGH MAY IMPROVE REAL-WORLD TREATMENT OUTCOMES

- Phase 2 interim results demonstrate improved height velocity compared to age-matched historical controls (KIGS database)
- Improved height velocity translates into improved adult height



Sources: Ranke JCEM 2010 KIGS database/CDC/Company analysis
TransCon hGH 6-month HV vs. KIGS 12-month HV
No statistical comparison conducted between the two studies

LONG-ACTING GROWTH HORMONE PROGRAMS

	Ascendis	Versartis	OPKO	Novo
Height velocity	11.9 - 14.5 cm As daily hGH	8.7 cm No active control	12.2-13.6 cm As daily hGH	No data
Mode of action: Unmodified hGH comparable to daily hGH	Yes	No	No	No
Growth hormone blood levels comparable to daily hGH	Yes	No (Supra-physiological)	No (Supra-physiological)	No (Supra-physiological)
Injection volume <1 mL for most GHD patients	Yes	No	Yes	Yes
Injection frequency	Weekly	Every two weeks	Weekly	Weekly

Source: Versartis, OPKO, Novo

SUMMARY TRANSCON GROWTH HORMONE

- Efficacy, safety profile and mode-of-action comparable to daily hGH with once-weekly administration
- TransCon hGH has the potential to improve real-world treatment outcomes
- One Phase 3 study in GHD children may enable approval for several indications based on 505(b)(2) strategy
- Clinical milestones:
 - Phase 2 pediatric study: Top-line data expected mid-2015
 - Phase 3 pediatric study: Planned initiation of 12-month height velocity trial in mid-2016
- Strong IP position with patent life extending until 2035



TransCon Treprostinil: Once-daily administration

ONCE-DAILY TRANSCON TREPROSTINIL

- Global sales of prostacyclin therapy for Pulmonary Arterial Hypertension (PAH) represented a ~\$1.2 billion orphan drug market in 2013
- TransCon Treprostnil is being designed as a long-acting prodrug to be inactive and continuously release unmodified treprostnil after administration
 - To maintain same mode-of-action as treprostnil and preserves the benefits of continuous exposure
 - To address the administrative burden that prevents patient and physician acceptance of currently approved prostacyclin therapies
- Phase 1 proof-of-concept study completed
 - Demonstrated predictable, extended release of unmodified treprostnil supporting infusion-like pharmacokinetics
 - Injection-site tolerability of TransCon Treprostnil did not meet the criteria defined in the target product profile
- New product formulations are currently being explored to improve injection site tolerability



Investment Highlights

INVESTMENT HIGHLIGHTS

- **Internal pipeline focused on developing best-in-class products for orphan markets**
 - TransCon Growth Hormone: Phase 2 pediatric study top-line results expected mid 2015
- **High-value partnerships in place**
 - Roche Genentech in ophthalmology and Sanofi in diabetes
- **Broadly applicable and proven TransCon technology platform**
 - Validated with proteins, peptides and small molecules
- **Strong financial position**
 - Capitalized to complete Phase 3 study of TransCon Growth Hormone