



Yale
Continuing
Medical
Education

YALE SCHOOL OF MEDICINE

367 Cedar Street
ESH Building A, 2nd Floor
New Haven, CT 06510-3210
E cme@yale.edu
W cme.yale.edu

Exhibitor Prospectus

***Yale Psychopharmacology Master Class:
An Update on Depression***

September 26, 2025

Dear Company Representative:

I am writing to inform you of our upcoming Yale CME activity, **“Yale Psychopharmacology Master Class”**, to be held on **Friday, September 26, 2025**, at Anthony’s Ocean View located at 450 Lighthouse Rd, New Haven, CT 06512. Yale CME is the accredited provider and has designated this activity for *6.5 AMA PRA Category 1 Credits™* for those attending.

This one-day course will educate providers and trainees on the latest in treatment developments, practice standards, and potential novel therapies that may affect the treatment of depression and related disorders. We anticipate approximately 200 attendees.

On behalf of the Yale School of Medicine and our Course Directors, Gerard Sanacora, MD, PhD, and Samuel Wilkinson, MD, I am writing to invite you to be an exhibitor at this event. The fee is **\$4,000**. The exhibit space includes a 6-foot dressed table, which will be located outside of the educational meeting space. Other companies have been afforded the opportunity to exhibit at the same price and space accommodations. Note, exhibit funds will not be utilized for CME accreditation or any food expenses.

For your reference, we have included a copy of the ACCME Standards for Integrity and Independence in Accredited Continuing Education with this email invitation. Standard 5 outlines specific guidelines for managing ancillary activities, such as exhibits, offered in conjunction with accredited continuing education.

The Yale School of Medicine is a not-for-profit organization, and our Tax ID number is 06-0646973. Please reach out to cme@yale.edu to reserve your spot. Checks should be made payable to *Yale University* and mailed to Yale CME, c/o Lisa M. Hribko, 367 Cedar Street, ESH Building A – 2nd floor, New Haven, CT 06510-3240. All payments must be received by Yale CME prior to the activity.

Best regards,

Lisa M. Hribko
Senior Administrative Assistant
cme@yale.edu

Agenda

Yale Psychopharmacology Master Class

Friday, September 26, 2025

(subject to change)

7:00 AM	Registration and Continental Breakfast
7:50 AM	Welcome and Introduction
8:00 AM	Ketamine, Esketamine and Parenteral Rapid Antidepressants
8:45 AM	Oral Rapid-Acting Antidepressants
9:30 AM	Novel Mechanisms in the Pipeline: Kappa Opioid Receptor Antagonists, KV7 Ion Channel Modulation, AMPA Receptor Modulation
10:15 AM	Refreshments/ Break
10:30 AM	Digital Therapeutics
11:15 AM	Psychedelics and Mental Health: Boom or Bust?
12:00 PM	Lunch
1:00 PM	Smart Phones, Social Media, and Mental Health: What Should Clinicians Know?
1:45 PM	Refreshments/ Break
2:00 PM	Workshops <ul style="list-style-type: none">• An Update on Neuromodulation• Peri-Partum Depression: An Update on New Therapies• New Schizophrenia Medicines
3:15 PM	Closing Remarks
3:30 PM	Adjournment

EXHIBIT DETAILS

What is included with the fee?

- 1x 6-foot Dressed table.
- 2x Exhibitor Reps per table.
- Access to all Catered Meals and Refreshments.

Please Note:

- Payment via credit card is preferred. For check payment, we prefer FedEx or UPS mail. This guarantees we receive payment in a timely manner.
- Pending seat availability, exhibitor reps may attend the educational presentations.
- All equipment needed for exhibit display must be provided by the company. Access to outlets cannot be guaranteed.
- Setup up time is generally 30 minutes prior to start of breakfast and registration but should be confirmed with the program coordinator. Please note arrival prior to setup start times is not permissible.

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin, for guidance related to the purpose of Form W-9, see Purpose of Form, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Yale University	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions)	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 367 Cedar Street, ESH Building A - 2nd floor	Requester's name and address (optional)
	6 City, state, and ZIP code New Haven, CT 06510-3240	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
Or	
Employer identification number	
0 6 - 0 6 4 6 9 7 3	

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person *Allison Reutfro* Date *June 6, 2024*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax cause type.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they