

REVA Medical

Corporate Presentation May 2018

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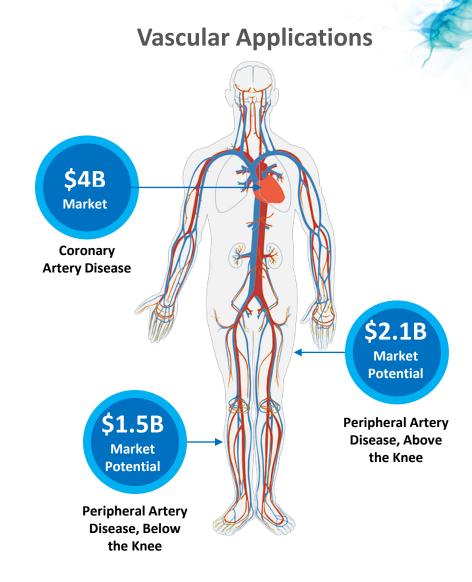
REVA Medical is a leader in bioresorbable polymer technologies for vascular applications

Commercializing a proprietary product for **Coronary Artery Disease and** pursuing Peripheral Artery Disease therapies

REVA's Disruptive Technology

Tyrocore™

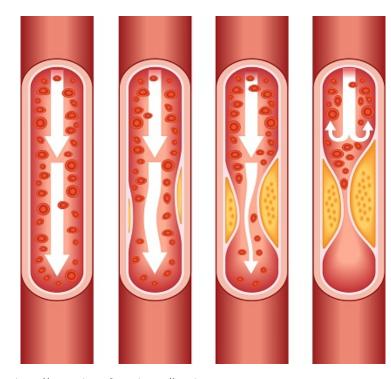
- Proprietary bioresorbable polymer
- Uniquely designed for vascular scaffold applications
- Derived from naturally occurring tyrosine amino acid
- Covalently bound iodine for radiopacity
- Patent protection for 19 biomaterial polymer families
- Polymer properties are tailorable to meet a clinical application by modifying:
 - Strength
 - Flexibility
 - Degradation time
 - Drug delivery profile



The Problem: Coronary Artery Disease

Cardiovascular Disease is the leading cause of death globally¹

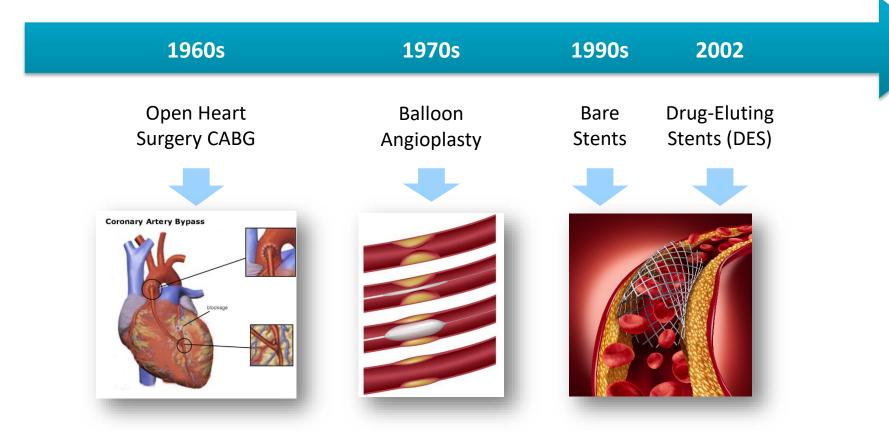
- Coronary Artery Disease (CAD) is the most common type of heart disease
- CAD occurs when a build-up of plaque in a coronary artery blocks the flow of blood to the heart muscle
- Treatments for CAD aim to restore blood flow through the blocked artery



https://www.cdc.gov/heartdisease/facts.htm

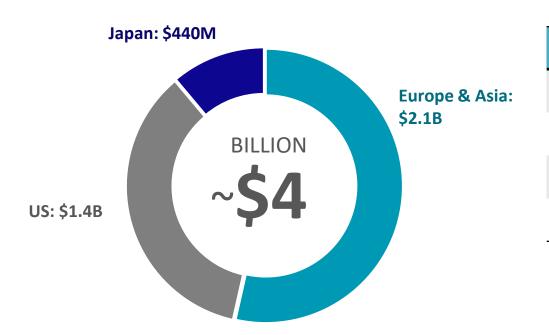
Evolution of Treatments for CAD

History of rapid innovation



Global Coronary Stent Market

Large and Profitable



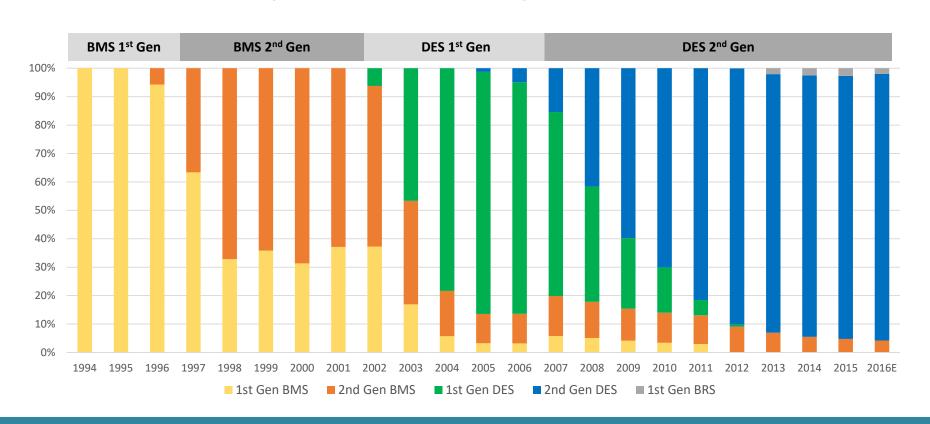
WW Market Share	
Abbott (Xience Sierra)	32%
Boston Scientific (Synergy)	33%
Medtronic (Resolute Oynx)	28%
Other	7%

"The good news about those [CRM and stent] businesses is, they are **extremely profitable** and they generate high cash flows." Miles White, CEO Abbott, Q2 2017 Earnings Call

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Large and Rapid Market Share Disruptions with New Technology Introductions

Innovation Matters: Current players not focused on R&D creating opening for companies with a disruptive innovation

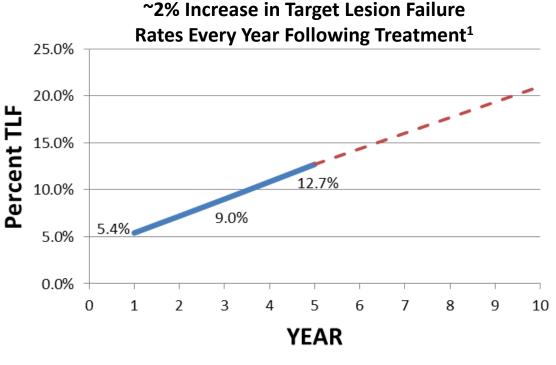


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Next Innovation: Bioresorbable Scaffolds

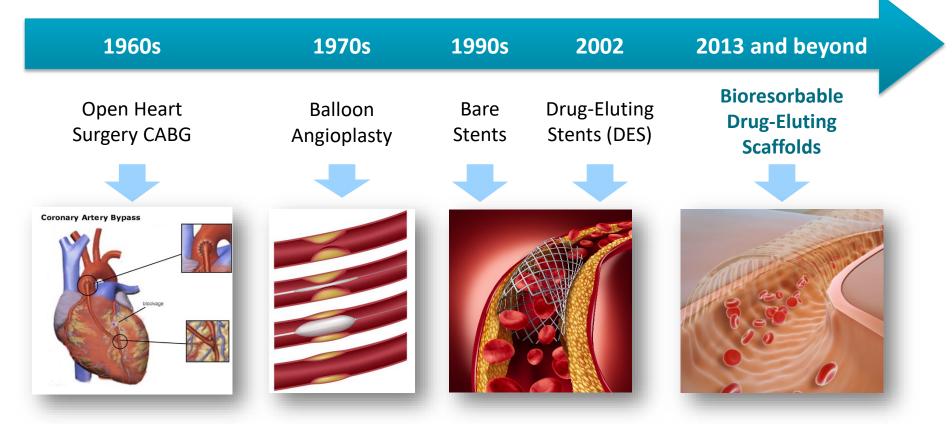
Driven by limitations of current standard of care

- DES are associated with long-term complications
- DES can limit future treatment options including coronary artery bypass,
 CT's, and MRI's



TLF = cardiac death, target vessel MI, ischemic-driven TLR

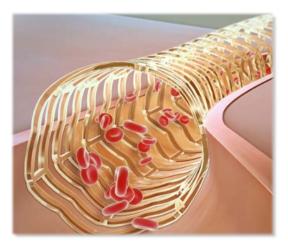
Next Evolution in Treatment: BRS



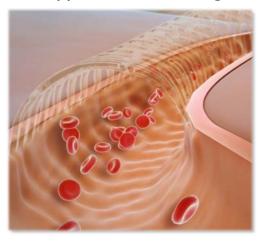
What is a Bioresorbable Scaffold?

- Temporary implantable device restores blood flow to diseased arteries
- Provides radial support to artery during healing process
- Elutes drug to limit excess tissue formation
- Encapsulates within vessel wall
- Dissolves from the body over time and restores natural vessel motion

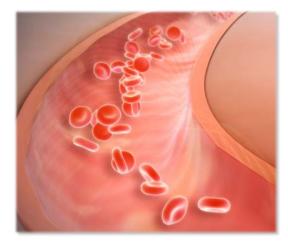
Restores Blood Flow



Supports Vessel Healing



Dissolves and Restores Motion



The Appeal of a Bioresorbable Scaffold

Value to Physician and Patient

- Preserves maximum flexibility for future treatment options (bypass grafting, MRI, CT)
- Allows artery to return to its natural state to restore freedom of movement
- May reduce the rate of future clinical events



"The ideal of a stent that does its job and disappears is a valuable long-term goal, especially in young patients with long life-expectancy."

EuroPCR 2017 course director Dr. William Wijns

"I think it's not at all inconceivable to think that a better device... ...will allow what will hopefully be shown to be long-term advantages of no longer having the permanent metal frame in the vessel..."

Gregg Stone, MD, New-York Presbyterian/Columbia University quoted in tctmd.com¹

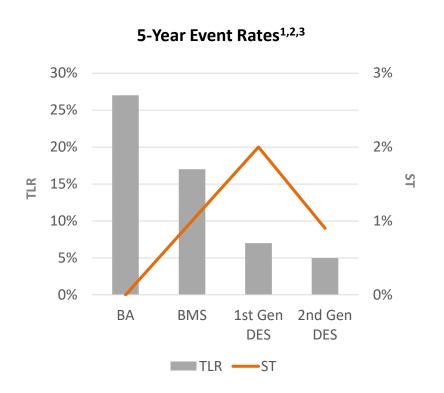
First Generation BRS Associated with Scaffold **Thrombosis Risk**



¹⁾ Calculated as Absorb Sales / DES Sales from JP Morgan Equity Research Interventional Cardiology Market Model Dec. 2016. 2) Abbott press release, Jan. 2011. 3) Abbott press release, Sept. 2012. 4) Jaguszewski M, et al. Acute thrombosis of bioabsorbable scaffold in a patient with acute coronary syndrome. EHJ 2013 doi:10.1093/eurheartj/eht060. 5) Capodanno D, et al. Percutaneous coronary intervention with everolimus-eluting bioresorbable vascular scaffolds in routine clinical practice: early and midterm outcomes from the European multicenter GHOST-EU registry. El 2015;10:1144-1153. 6) Ellis S, et al. Everolimus-eluting bioresorbable scaffolds for coronary artery disease. NEJM 2015;373:1905-15. 7) Serruys P, et al. ABSORB II: Three year clinical outcomes from a prospective, randomized trial of an everolimus-eluting bioresorbable vascular scaffold vs an everolimus-eluting metallic stent in patients with coronary artery disease. Presented TCT 2016. 8) Cox, C. No more Absorb BVS: Abbott puts a stop to sales. tctmd.com 2017.

History Repeats: Late Stent Thrombosis Nearly Stops 1st Generation DES

Without Continued Innovation, We Might Not Have Achieved 2nd Generation DES



- DES designed to reduce restenosis (TLR) rates
- But, stent thrombosis emerged as a large concern
- FDA Advisory Panel convened 12/2006 to evaluate DES and stent thrombosis risks
- DES lost nearly 30% market share to BMS as physicians returned to using BMS over these safety concerns⁴
- 2nd generation DES technical advancements resulted in improved outcomes and are now the standard of care

¹⁾ BA & BMS TLR: Kiemeneji F, et al. Continued Benefit of Coronary Stenting Versus Balloon Angioplasty: Five-Year Clinical Follow-Up of Benestent-I Trial. JACC 2001;37:1598-603. 2) BMS ST: Ellis S, et al. Long-term safety and efficacy with paclitaxel-eluting stents. JACC 2009;2:1248–59. 3) DES: Jensen LO, et al. Safety and efficacy of everolimus versus sirolimus eluting stents 5 year results from SORT-OUT IV. JACC 2016;67:751-62. 4) Wells Fargo Securities Yearly Drug-Eluting Stent Sales Estimates: 2010A to 2018E, Feb 2018.

Fantom® Bioresorbable Scaffold

Combines Novel Polymer with Established Drug and Design

Tyrocore

- Radiopaque
- Provides strength during critical vessel healing period
- Restores natural vessel motion in one year
- Complete resorption with benign degradants
- Proprietary to REVA



Sirolimus

- First anti-proliferative agent used in drugeluting stents
- Highly lipophilic with broad therapeutic window
- Demonstrated across multiple clinical studies and drug eluting stents

(c) molekuul www.fotosearch.com

Scaffold Design

- Balloon expandable ring-and-link structure
- Unique design for each diameter (2.5, 3.0, and 3.5 mm)
- Large expansion range

Delivery System

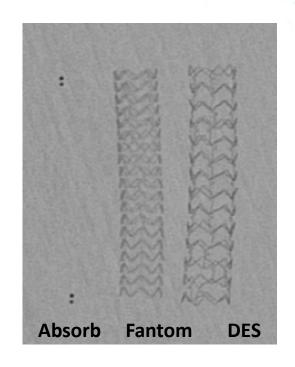
- Semi-compliant nylon balloon
- High 18 atm rated burst pressure
- Rapid exchange





Fantom Offers Substantial Improvement Over 1st Generation BRS

	Fantom	Absorb	
Material	Tyrocore	PLLA	
Strut thickness ¹	125 μm	157 μm	
Strength ²	0.22 N/mm	0.14 N/mm	
Radiopacity	Yes	No	



- Competitors have struggled to show improved long-term safety
- Physicians are seeking improvements in 2nd generation devices
 - Thinner, more deliverable, easier to use; no compromise on strength
 - Improved safety

Fantom Clinical Performance

Excellent Clinical Performance through 24 Months

	12 Months	24 Months
FANTOM II ¹ Major Adverse Cardiac Events/"MACE"	4.2%	5.6% (preliminary results for 125 patients)
ABSORB III Target Lesion Failure/"TLF"	7.8% ²	11.0% ³
ABSORB III Target Lesion Failure/"TLF"	6.1% ²	7.9% ³
	Major Adverse Cardiac Events/"MACE" ABSORB III Target Lesion Failure/"TLF" ABSORB III Target Lesion	FANTOM II ¹ Major Adverse Cardiac Events/"MACE" ABSORB III Target Lesion Failure/"TLF" ABSORB III Target Lesion 6.1% ²

¹⁾ Hermiller, J. Fantom: A Radio-Opaque "Stent-Like" BRS with Improved Expansion Characteristics. Presented TCT 2017. 2) Ellis S, et al. Everolimus-eluting bioresorbable scaffolds for coronary artery disease. NEJM 2015;373:1905-15. 3) Ellis S, Kereiakes, D. A bioresorbable everolimus-eluting scaffold versus a metallic everolimus-eluting stent: ABSORB III. Presented ACC 2017.

Demonstrated Low Scaffold Thrombosis

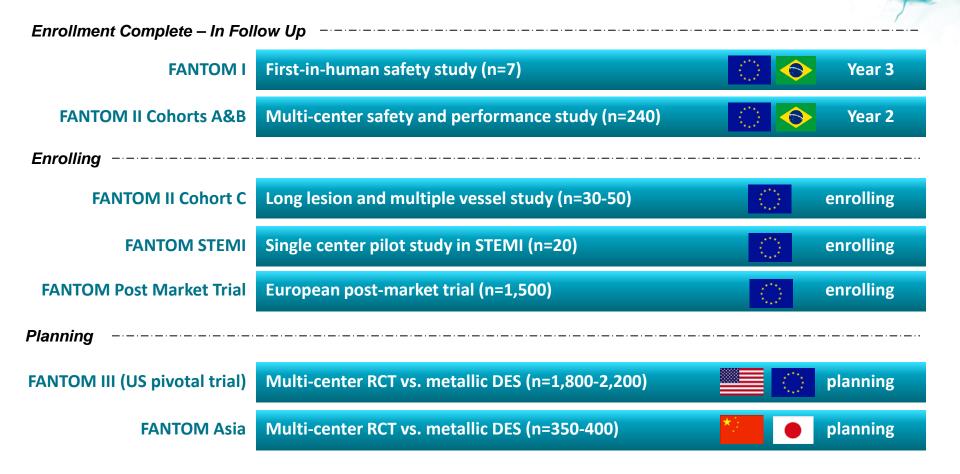
Strong Performance through 24 Months

	Fantom	Absorb	Xience DES
	(n=240)	(n=1,322)	(n=686)
Study	FANTOM II ¹	ABSORB III	ABSORB III
Scaffold Thrombosis			
Acute (0 to 1 day)	0%	0.15%²	0.58% ²
Subacute (2 to 30 days)	0.4%	0.91%²	0.15%²
Late (31 to 365 days)	0%	0.46%²	0%²
Very Late (>365 days)	1 event (preliminary results for 125 patients)	0.3%³	0%³

All 240 patients beyond 18 months - 125 patients beyond 24 months of follow-up

¹⁾ Hermiller, J. Fantom: A Radio-Opaque "Stent-Like" BRS with Improved Expansion Characteristics. Presented TCT 2017. 2) Ellis S, et al. Everolimus-eluting bioresorbable scaffolds for coronary artery disease. NEJM 2015;373:1905-15. 3) Ellis S, Kereiakes, D. A bioresorbable everolimus-eluting scaffold versus a metallic everolimus-eluting stent: ABSORB III. Presented ACC 2017.

Pipeline Development: Fantom Global Clinical Program



Targeted Launch Underway in Europe

2.2

MILLION

EUROPEAN MARKET

Stents available: 2.2M

700 **THOUSAND**

PHASE 1

Stents available: 700k

- Established markets: Germany, Switzerland, Austria, Benelux, Denmark
- Favorable BRS reimbursement
- Demonstrated interest in new technologies

180 **THOUSAND**

150 TARGET ACCOUNTS

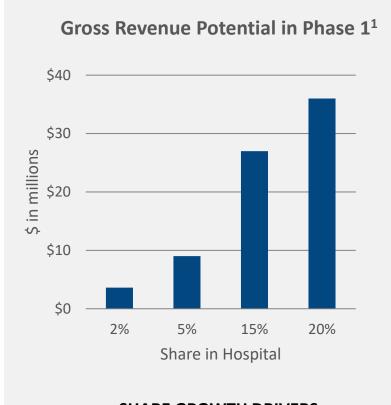
Stents available: 180k

- Large hospitals
- ~1,000 procedures annually
- Prior experience with BRS

Making Commercial Progress Despite Headwinds

	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Sales & Distributors	Sales VP	2 Sales Managers	3 Sales Managers	Turkish Distributor
Customers		125% increase	78% increase	tba
1 st Commercial Implants	Germany	Switzerland	Fantom Encore	Turkey
Revenue	\$17,000	\$28,000 65% growth	\$53,000 89% growth	tba
Shipments	\$105,000	\$98,000	\$128,000	tba
Milestones	1 st commercial shipments	FANTOM II interim 2-year clinical data release	Fantom Encore 2.5 mm CE Mark BTK CE Mark submission	FANTOM II 2-year clinical & OCT imaging results release

Attractive Market Opportunity with Manageable Investment



SHARE GROWTH DRIVERS

- Clinical experience
- New product launch
- Indication expansion: long lesion, multi-vessel, AMI

150 Target Accounts

PHASE 1

- \$36 million revenue potential with 20% share
- Direct sales with 6 reps

PHASE 2

- Potential to double Phase 1 gross revenue
- Areas of interest:
 - Turkey, Italy, Spain, Brazil, Middle East, Eastern Europe
- Sales through distributors

Fantom[®] Encore 2.5 mm

REVA Recently Secured CE Mark for the Thinnest Strut Profile Bioresorbable Scaffold on the Market

- Thinner strut profiles are associated with improved ease-of-use and vessel healing
- Thinner strut profiles achieved without compromising other performance features such as strength and x-ray visibility
- Currently launching in select accounts while we pursue CE Mark of additional diameter sizes
- Plan to launch full product line later this year

Strut Profiles of 2.5 mm BRS with CE Mark

Absorb ¹	DESolve Nx ¹	Magmaris ²	Fantom ³	Fantom Encore
		2.5 mm not available		
157 μm	156 μm	n/a	125 μm	95 μm

Long Term Growth Strategy

WIN IN CORONARY

Geographic Growth

- European countries
- Countries that accept CE Mark
- New approvals, e.g. Brazil, Japan, US

Product Improvements

- Fantom Encore: next generation with thinner struts
- New sizes including longer lengths and larger diameters

Indication Expansion

- Long lesions
- Multi-vessel disease
- Acute myocardial infarction

INVEST IN PERIPHERAL

Clinical Evaluation

- Pursue below the knee CE Mark with current platform
- Assess product performance

Polymer R&D

 Invest in development of novel polymers specifically designed for peripheral artery applications

Develop New Products

 Introduce unique scaffolds for below the knee and above the knee revascularization

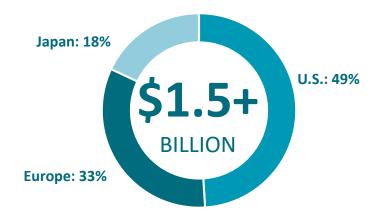
Innovating to Build a \$1+ Billion Company

Coronary Revenue Potential

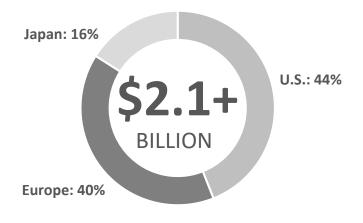


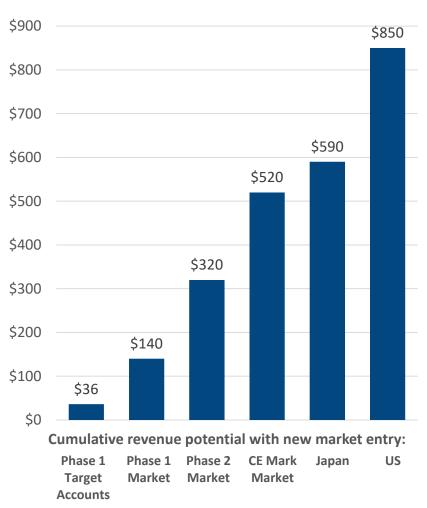
Peripheral Market Opportunity

BELOW THE KNEE



ABOVE THE KNEE





Revenue calculation assumes 20% market share and \$1,000 ASP

Experienced Management Team

Reggie Groves

CHIEF EXECUTIVE OFFICER







Brandi Roberts

CHIEF FINANCIAL OFFICER







Jeffrey Anderson

SVP, CLINICAL AND REGULATORY AFFAIRS







Richard Kimes

SVP, OPERATIONS







Carmelo Mastrandrea

VP, EUROPE







Joann Yao

SR. DIR., GLOBAL MARKETING







Board of Directors

Ray Larkin, Chairman (2017–) Eunoe Inc, Bentley Labs, Nellcor Puritan Bennett

Reggie Groves, CEO (2017–) Medtronic, McKinsey

Bob Stockman, Co-Founder (1999–) loptex, "A" Company, Critikon

Brian Dovey (2001–) Domain Associates, Rorer Group

Robert Thomas (2010–) Citigroup Australia, multiple boards

Ross Breckenridge, MA FRCP PhD (2015–) Silver Creek Pharmaceuticals, University College London Hospital

Steve Oesterle (2018–) Medtronic, NEA, Temasek, Harvard & Stanford















Corporate Priorities & Milestones

CORPORATE PRIORITIES

- 1. Ensuring Fantom's commercial success
- 2. Expanding our business
- 3. Managing our cash position

UPCOMING MILESTONES

- FANTOM II 24-month data release, May 2018
- Launch Fantom Encore broader matrix, 2018
- Geographic expansion to Brazil and additional European countries, 2018
- CE Mark for Fantom in below-the-knee application, 2018
- US conditional IDE study protocol approval, anticipated 2018



REVA Investment Highlights

Proprietary bioresorbable polymer technologies for vascular **DISRUPTIVE TECHNOLOGY** applications Strong IP patent protection extending 2029-2034 FIRST & ONLY proprietary polymer bioresorbable scaffold for LARGE, PROFITABLE MARKET coronary artery disease: Fantom[®] made with Tyrocore[™] ~\$4 billion coronary stent market ripe for innovation European launch Q3 2017 COMMERCIALIZING FANTOM® Phase 1: Germany, Switzerland, Austria, Benelux, Denmark Phase 2: Geographic expansion anticipated early 2018 CE Mark Fantom Encore anticipated 2018 INNOVATIVE PIPELINE Multiple opportunities for growth: Product line expansion, geographic growth, and extended indications Peripheral product development below and above the knee Listed on Australian securities exchange in 2010 (ASX: RVA.AX) **CORPORATE FACTS** Cash: \$14.9 million¹

Mkt Cap: \$90 million²

Potential US stock market listing 2018; SEC registered

