

REVA Medical

Corporate Presentation January 2019

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

Commercializing proprietary products for Coronary Artery Disease and Peripheral Artery Disease and pursuing Embolization Therapies

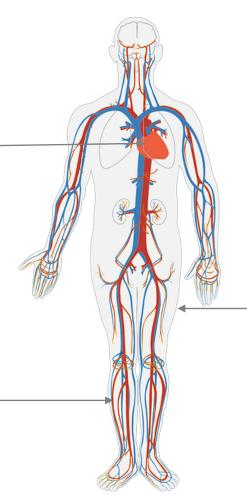
~\$14 Billion Market Opportunity in Vascular Applications

Coronary Artery Disease

- ~\$4 billion global stent market
- CAD is the most common type of heart disease
- Occurs when a build-up of plaque blocks blood flow to the heart

Peripheral Artery Disease: Below-the-Knee

- \$3.2 billion global market potential
- Common in diabetic patients
- Occurs when a build-up of plaque blocks blood flow to the foot



Embolization Therapy

- \$1.3 billion global market potential
- Used to treat cancerous and non-cancerous tumors and to stop bleeding
- Purpose is to occlude blood vessels to restrict blood flow

Peripheral Artery Disease: Above-the-Knee

- \$5.8 billion global market potential
- Symptomatic of advanced vascular disease
- Occurs when a build-up of plaque blocks blood flow to the leg

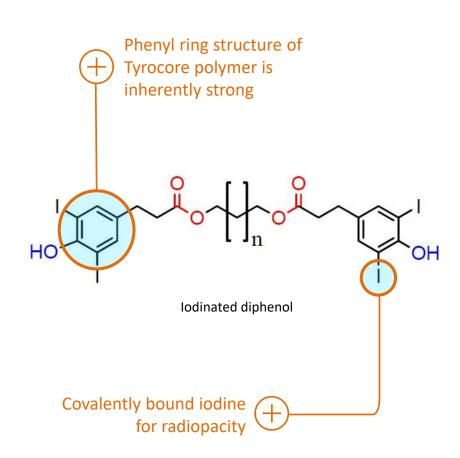
Sources: CAD Market: JP Morgan Equity Research Interventional Cardiology Market Model Feb. 2018. PAD Markets: REVA estimates based on BTK: Nehler M, et al. Epidemiology of peripheral arterial disease and critical limb ischemia in an insured national population. J Vasc Surg 2014;60:686-95. ATK: Murabito J, et al. Temporal trends in the incidence of intermittent claudication from 1950-99. Am J Epidemiol 2005;162:430-37. Population data from United Nations online database. Accessed Dec. 2017. Embolics: Market Research Engine, 2017.

REVA's Disruptive Technology: Tyrocore™

The World's Only Radiopaque, Bioresorbable Polymer Approved for Use¹ in Medical Devices

Tyrocore Properties

- Proprietary bioresorbable polymer
- Strong for excellent mechanical properties
- X-ray visible, ideal for vascular procedures
- Naturally biocompatible: derived from the tyrosine amino acid
- Polymer properties are tailorable to meet a clinical application by modifying:
 - Strength
 - Flexibility
 - Degradation time
 - Drug delivery profile



REVA's Product Portfolio

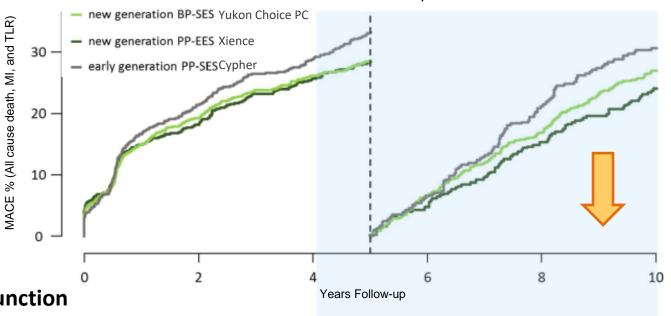
Built from Tyrocore

Disease	Product	Regulatory Status	Commercial Stage
Coronary Artery Disease	Fantom® and Fantom Encore™ Bioresorbable Scaffolds	CE Mark	Available in Europe and Middle East
Peripheral Artery Disease: Below-the- Knee	MOTIV™ Bioresorbable Scaffolds	CE Mark	Limited Launch in Europe
Peripheral Artery Disease: Above-the- Knee	Bioresorbable scaffold	Pre-approval	R&D
Embolization Therapy	Bioresorbable microbeads	Pre-approval	Prototype and Pre- clinical Feasibility



BRS are Designed to Improve Long-Term **Outcomes Compared to Metal DES**

New-Generation DES Continue to Accrue Adverse Events through 10-Year Follow-up ISAR-TEST 4 Study¹

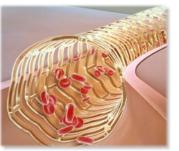


3.3% per year increase in MACE with DES²

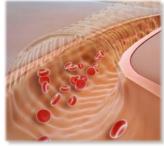
BRS are designed to resorb and eliminate risk of device-related adverse events

BRS Function

Support Vessel Healing



Safely Resorb

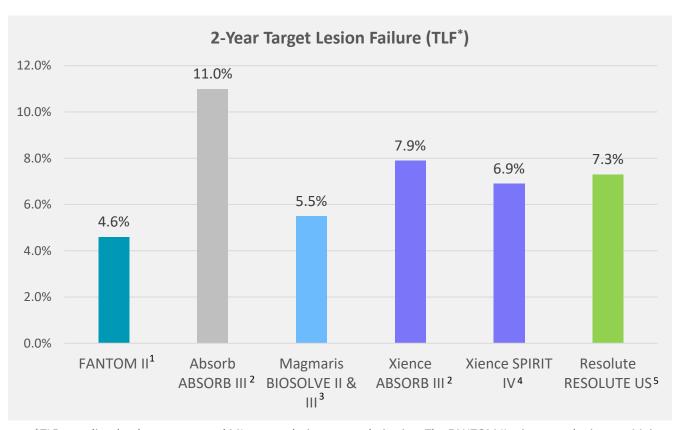


Device-Free Vessel





REVA Has Demonstrated Excellent Clinical Performance with Fantom



*TLF = cardiac death + target vessel MI + target lesion revascularization. The FANTOM II primary endpoint was Major Adverse Cardiac Events (MACE) = cardiac death + all MI + target lesion revascularization. The 24-month MACE rate was 5.0%.

¹⁾ Data on file at REVA Medical. MACE rates presented: Abizaid, A. New 24-month data from the FANTOM II clinical trial. EuroPCR 2018. 2) Ellis S, Kereiakes, D. A bioresorbable everolimus-eluting scaffold versus a metallic everolimus-eluting stent: ABSORB III. Presented ACC 2017. 3) Haude M, et al Safety and clinical performance of the drug-eluting absorbable metal scaffold in the treatment of subjects with de novo lesions in native coronary arteries at 24-month follow-up: BIOSOLVE-II and BIOSOLVE-III. TCT 2018. 4) Stone G, et al. Randomized Comparison of Everolimus- and Paclitaxel-Eluting Stents 2-Year Follow-Up From the SPIRIT IV Trial. JACC 2011;58(1):19-25. 5) Mauri L. 2-year clinical outcomes from the pivotal RESOLUTE US study. Presented ACC 2012.

Fantom Has Also Demonstrated Low Scaffold Thrombosis

Strong Performance through 2 Years

(
Fantom (n=240)	Absorb (n=1,322)	Xience DES (n=686)
FANTOM II ¹	ABSORB III	ABSORB III
0%	0.15%²	0.58% ²
0.4%	0.91%²	$0.15\%^{2}$
0.4%	0.76% ^{2,3}	0% ^{2,3}
	(n=240) FANTOM II ¹ 0% 0.4%	(n=240) (n=1,322) FANTOM II ¹ ABSORB III 0% 0.15% ² 0.4% 0.91% ²

¹⁾ Abizaid, A. New 24-month data from the FANTOM II clinical trial. EuroPCR 2018. 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.

REVA Has Launched Its 3rd Generation: Fantom Encore

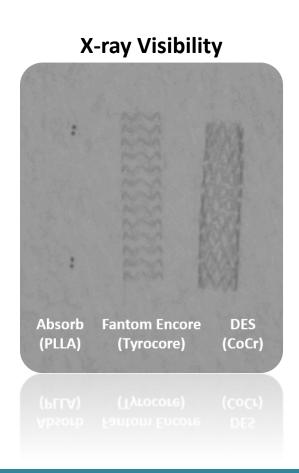
Our Tyrocore Polymer Makes Fantom Encore the Most Advanced BRS

✓ Thinnest strut profile of any commercial, CE

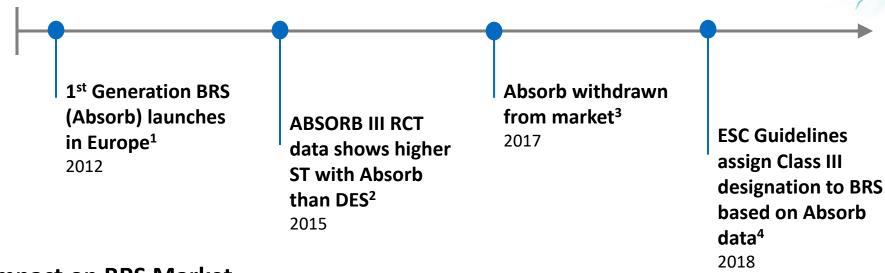
Mark BRS for deliverability and vessel healing

95 μm	2.5 mm diameter
105 μm	3.0 mm diameter
115 μm	3.5 mm diameter

- ✓ X-ray visible for treatment accuracy
- ✓ Key ease-of-use features like single-step inflation and higher expansion range
- ✓ Biocompatible for safety
- ✓ Stable for room temperature shipping and storage



But Absorb Has Created Significant Headwinds and Changed The Competitive Landscape

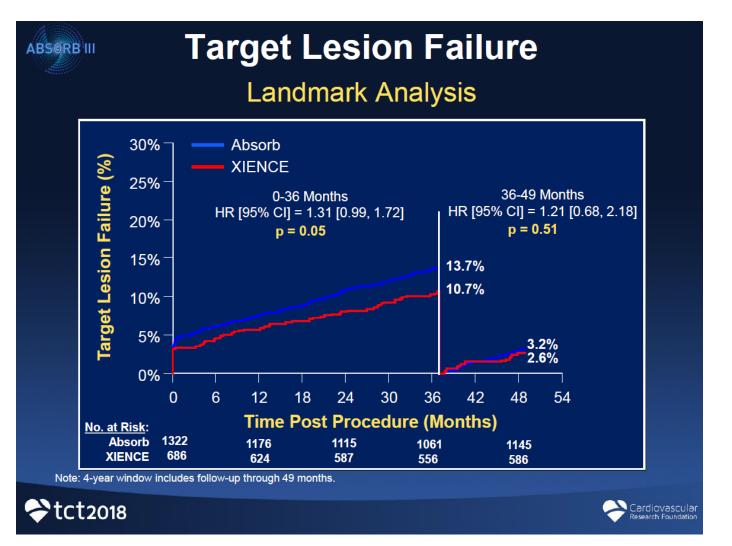


Impact on BRS Market

- Competitors with PLLA scaffolds like Absorb gone from European market
- Chinese and Indian competitors with PLLA scaffolds focused on Chinese market with no plans to enter Europe
- Single remaining European competitor with magnesium-based scaffold is redesigning their product and postponing investment in randomized clinical trials

¹⁾ Abbott press release, Sept. 2012. 2) Ellis S, et al. Everolimus-eluting bioresorbable scaffolds for coronary artery disease. NEJM 2015;373:1905-15. 3) Cox, C. No more Absorb BVS: Abbott puts a stop to sales. tctmd.com 2017. 4) Neumann FJ, et al. 2018 ESC/EACTS guidelines on myocardial revascularization. EHJ 2018;00:1-96.

Fortunately, Absorb is Beginning to Demonstrate the Value of Bioresorption



Absorb and
Xience Show
Equivalent
Performance
between 3 & 4
Years

REVA's Coronary Program Status

Commercial Results: Progress Every Quarter

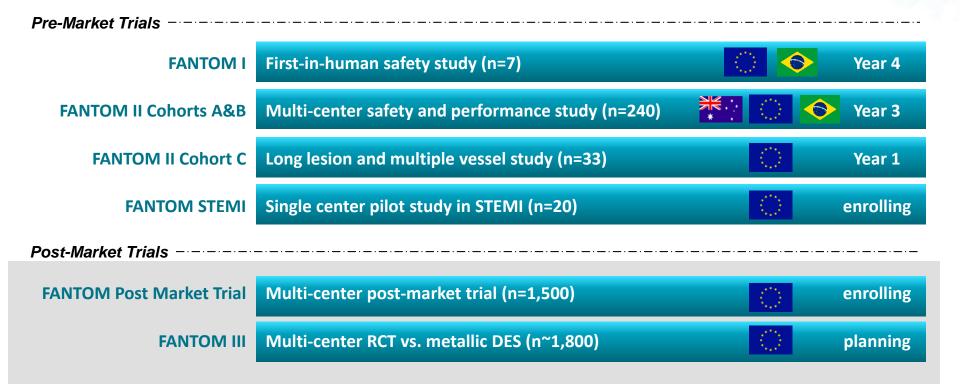
	Q3 2017	Q4 2017	Q1 2018	Q2 2018	Q3 2018
Targeted Launch	Direct Sales ir	n Germany, Switzerland	d, and Austria	Distributor : Turkey	Direct: Belgium and Netherlands Distributor: Italy
Customers		125% increase	78% increase	38% increase	18% increase
Billings ¹	\$105,000	\$98,000	\$128,000	\$149,000	\$185,000
Revenue ²	\$17,000	\$28,000	\$53,000	\$91,000	\$93,000

With very few competitors remaining in BRS and an advanced 3rd generation product, REVA is positioned to win in coronary; however, we now need to drive a change to the ESC Guidelines. Next steps:

- Conduct our 1,500 patient post-market trial*
- Launch our post-market randomized clinical trial in 2019*
- Continue to publish clinical data (3-year results in May 2019 at EuroPCR)

^{*} Product to be purchased commercially for the trial.

Building Clinical Evidence to Change the ESC Guidelines and Drive Commercial Use



REVA's Shift in Business Strategy

- In coronary we will focus in Europe on commercial growth and driving change to the ESC Guidelines
- Our broader business strategy has shifted to:
 - Right-sized operations for slower projected coronary growth
 - Increased focus on peripheral and embolization therapy programs with nearer term value creation opportunities



Peripheral Program

Peripheral Artery Disease of the Lower Limbs

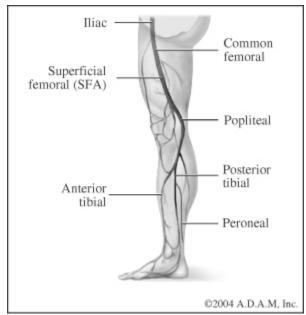
Below-the-Knee (BTK)

- Common indication is critical limb ischemia
- Patients have reduced blood flow leading to wounds, infections, and amputation
- Critical limb ischemia (CLI) is a heart attack for the leg
 - 25% of CLI patients have amputation within one year¹
 - 25% of CLI patients die within one year¹

Above-the-Knee (ATK)

- Common indication is intermittent claudication
- Patients have reduced blood flow causing severe pain and reduced function





¹⁾ Olin, JW. Peripheral arterial disease: current insight into the disease and its management. Mayo Clin Proc 2010;85(7):678-692.

Current Treatment Options

Revascularization Improves Outcomes but there are Limitations with Current Treatment Options

Treatment	Benefit	Challenge
Balloon angioplasty (PTA)	 Restores blood flow to the vessel 	High rates of restenosis
Drug-coated balloons (DCB)	 Restores blood flow to the vessel Delivers drug to reduce tissue growth during initial vessel healing 	 Lacks mechanical support and sustained drug delivery during vessel healing
Drug-eluting stents (DES)	 Restores blood flow to the vessel Mechanical support to vessel Sustained drug delivery during vessel healing 	 Challenges with stent fracture Interferes with retreatment

Bioresorbable Scaffolds May Improve Treatment for Patients with PAD

Value of BRS:

- Provide mechanical support and sustained drug delivery during vessel healing
- Eliminate issues associated with metal fracture
- Preserve retreatment options



BRS Shown to Help Patients with PAD

Below-the-Knee

- Abbott's Absorb scaffold in BTK¹:
 - 33 patients with critical limb ischemia treated with Absorb
 - 100% of critical limb ischemia patients avoided amputation at 1 year
- Meril's Credence scaffold in BTK²:
 - 30 patients with critical limb ischemia treated with Credence
 - 97% of patients avoided amputation at 6 months
- Results compare favorably to 25% 1-year limb amputation rate with conventional treatment³

Above-the-Knee

- Abbott's Esprit scaffold in ATK⁴:
 - 35 patients intermittent claudication patients treated with Esprit
 - 2-Year target lesion revascularization range of 11.8% compares favorably to
 - DES: 19.5% with paclitaxel-eluting Zilver stent
 - DCB: 30% with paclitaxel-eluting Lutonix DCB

¹⁾ Varcoe R, et al. Experience with the Absorb Everolimus-Eluting Vascular Scaffold in Arteries Below the Knee. *JACC CI* 2016;9(16)1721-8. 2) Warwadedar, G. 30-days clinical outcomes of novel thin strut (100 μm) bioresorbable peripheral vascular scaffold system in the treatment of critical limb ischemia of below-the-knee arteries. Presented EuroPCR 2018. 3) Olin, JW. Peripheral arterial disease: current insight into the disease and its management. Mayo Clin Proc 2010;85(7):678-692.4) Lammer J, et al. Bioresorbable Everolimus-Eluting Vascular Scaffold for Patients With Peripheral Artery Disease (ESPRIT I) 2-Year Clinical and Imaging Results. *JACC CI* 2016:9(11)1178-87.

REVA's MOTIV BTK Bioresorbable Scaffold

1st & Only BRS Approved for Below-the-Knee **Revascularization Therapy**

- ✓ CE Mark secured in July 2018
- Made with Tyrocore
- **Thin strut profile** for deliverability and vessel healing
- ✓ X-ray visible for treatment accuracy
- **Strong** for vessel support
- ✓ Sustained drug delivery to maintain vessel patency



Peripheral Milestones

- Limited launch of MOTIV in Europe, Q1 2019
- Evaluating pathways for geographic expansion
- Polymer R&D for optimal characteristics of scaffolds for ATK applications
- Development of tailored bioresorbable scaffolds for peripheral artery disease applications



Embolization Therapy is an Established Procedure

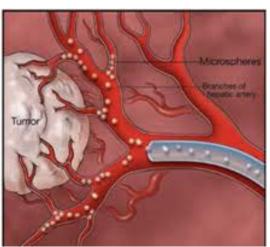
Embolization Overview

- Purpose to occlude blood vessels to restrict blood flow:
 - Restrict blood flow to a tumor in order to shrink the tumor
 - Stop wound bleeding
- Minimally invasive procedures
 - Microbeads are delivered through catheters guided by x-ray in a cath lab

Current Applications

- Cancerous tumors (oncology)
 - Hepatocellular carcinoma (liver cancer)
 - Renal cell carcinoma (kidney cancer)
- Non-cancerous tumors (gynecology and proctology)
 - Uterine fibroids in women
 - Benign prostatic hyperplasia in men
- Stop bleeding
 - Ulcerations and other wounds in the gastrointestinal tract
 - Hemorrhage or vascular injury

Blocking Tumor Blood Supply



REVA's Technology Fills an Unmet Need

REVA Has the Only X-ray Visible and Bioresorbable Embolic Microbead



Permanent

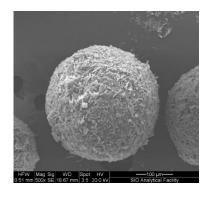
Absorbable

REVA's Bioresorbable Embolic Microbeads

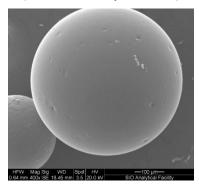
REVA's Polymer Technology Meets All Requirements of the Ideal Embolization Particle

- ✓ X-ray visible for treatment accuracy
- Compressible and buoyant for easeof-use and injectability
- ✓ Biocompatible for safety
- ✓ Loadable for drug delivery
- Resorbable to avoid chronic inflammation and allow retreatment

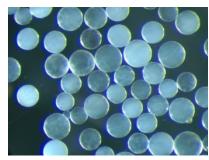
Dry microbeads



Hydrated microbeads (~ 2 min rehydration)



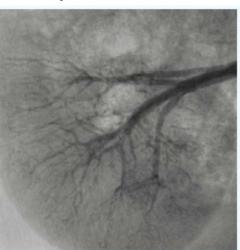
Various sizes achieved



Safety and Efficacy Demonstrated in **Pre-Clinical Study**

- Renal embolization in swine model
- Size reduction of treated tissue observed in all animals
- No evidence of thrombosis, hemorrhage, or inflammation

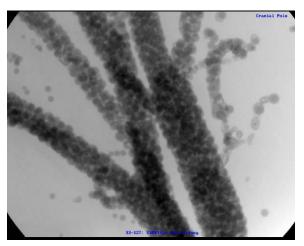
Pre-embolization: Ample Blood Flow



Post-embolization: **Reduced Blood Flow**



X-ray Image of Densely **Packed Microbeads**



Embolization Therapy Milestones

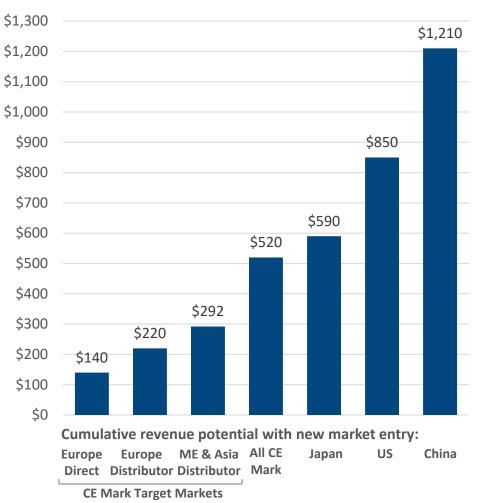
- Final design selection
- Manufacturing scale-up
- **Product validation testing**
- Regulatory filing:
 - US 510k
 - CE Mark design dossier
- Indication expansion studies
- Conduct early feasibility studies of small molecule and large molecule drug-loaded microbeads targeting oncology

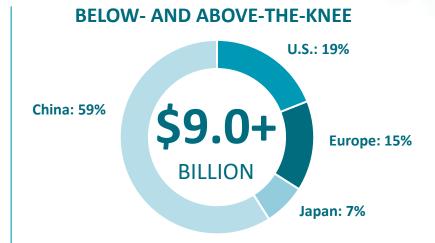
Innovating to Build a \$1+ Billion Company

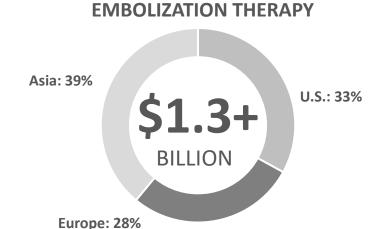
Coronary Revenue Potential



Peripheral and Embolics Market Opportunities







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

Experienced Management Team

Reggie Groves

CHIEF EXECUTIVE OFFICER







Leigh Elkolli

CHIEF FINANCIAL OFFICER







Jeffrey Anderson

SVP, CLINICAL AND REGULATORY AFFAIRS INTERIM VP, SALES







Jessica Earley

VP, OPERATIONS AND PRODUCT DEVELOPMENT







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















REVA Investment Highlights

DISRUPTIVE TECHNOLOGY

- Proprietary x-ray visible, bioresorbable polymer technologies for vascular applications
- Strong IP patent protection extending 2029-2034

LARGE, PROFITABLE MARKETS

- \$4 billion coronary stent market ripe for innovation
- \$9.0 billion market opportunity for BRS to treat below- and above-theknee peripheral artery disease
- \$1.3 billion market opportunity for embolization therapy in oncology and other tumors

COMMERCIALIZING FANTOM ENCORE

- Commercial: Germany, Switzerland, Austria, Turkey, Italy, Netherlands, Belgium, and Luxembourg
- In progress: Additional countries in Europe, Middle East, and Asia

LAUNCHING IN PERIPHERAL MARKET

- Limited launch of MOTIV in 2019 in select centers
- Evaluating pathways for expansion in Asia and US
- Developing crush recoverable polymer for above-the-knee peripheral artery disease

CORPORATE FACTS

- Listed on Australian securities exchange in 2010 (ASX: RVA.AX)
- Cash: \$7.1 million¹
- Mkt Cap: \$73 million²
- SEC registered





