# Institutional Investor Briefing

**San Diego, California and Sydney, Australia** (Wednesday, 11 October 2017, AEST) – REVA Medical, Inc. (ASX: RVA) ("REVA" or the "Company") is pleased to provide the attached presentation materials that may be presented from time to time by the Company at various investor and analyst meetings. A copy is also being filed with the U.S. Securities and Exchange Commission and posted under the Investor Relations section of REVA's website at *www.revamedical.com*.

## About REVA

REVA is a medical device company located in San Diego, California, USA, that has developed and commercialized a proprietary bioresorbable scaffold, as an alternative to metal stents, to treat coronary artery disease. Scaffolds provide restoration of blood flow, support the artery through the healing process, then disappear (or "resorb") from the body over a period of time. This resorption allows the return of natural movement and function of the artery, a result not attainable with permanent metal stents. The Company's *Fantom*® scaffold, which received European CE Marking on April 3, 2017, is designed to offer an ideal balance of thinness and strength, with distinct ease-of-use features including complete scaffold visibility under x-ray, expansion with one continuous inflation, and no procedural time limitations.

## Forward-Looking Statements

*This announcement contains or may contain forward-looking statements that are based on management's beliefs, assumptions, and expectations and on information currently available to management. All statements that are not statements of historical fact, including those statements that address future operating plans or performance and events or developments that may occur in the future, are forward-looking statements, such as those statements regarding the projections and timing surrounding commercial operations and sales, clinical trials, pipeline product development, and future financings. No undue reliance should be placed on forward-looking statements. Although management believes forward-looking statements are reasonable as and when made, forward-looking statements are subject to a number of risks and uncertainties that may cause actual results to vary materially from those expressed in forward-looking statements, including the risks and uncertainties that are described in the "Risk Factors" section of our Annual Report on Form 10-K filed with the US Securities and Exchange Commission (the "SEC") on February 28, 2017, and as updated in our periodic reports thereafter. Any forward-looking statements in this announcement speak only as of the date when made. REVA does not assume any obligation to publicly update or revise any forward-looking statements, whether as a result of new information, future events, or otherwise.*


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# REVA Medical

Corporate Presentation
October 2017

# Important Notice

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**Information is a Synopsis Only**

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*Fantom*® is a product name that is registered by REVA

# REVA Highlights

**~$4 BILLION CORONARY MARKET RIPE FOR DISRUPTION**

- Large, profitable market
- DES incremental advancements overshoot “S” curve; investments reduced
- Bioresorbable scaffolds (BRS) offer a potential solution to reduce long-term complications

**FANTOM® IS UNIQUELY POSITIONED**

- The only proprietary polymer BRS; offers benign degradation
- Unique ease-of-use features, including radiopacity, radial strength, single step inflation, greater overexpansion range
- Excellent clinical performance to-date
- Next generation with thinner strut thickness expected in 2018

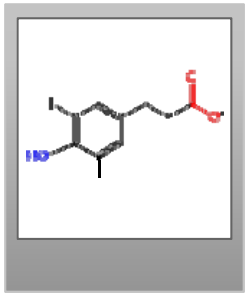
**COMMERCIAL MOMENTUM BUILDING**

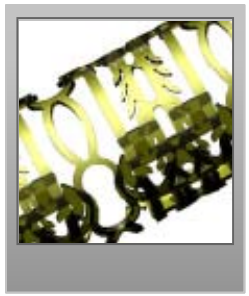
- European commercialization underway
  - Phase 1: Germany, Switzerland, Austria
- Customer demand evident with >30 accounts under consideration
- Geographic expansion anticipated Q1 2018

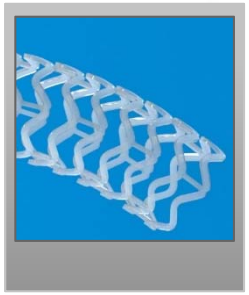
**GROWTH DRIVERS AND EXPANSION OPPORTUNITIES**

- Clinical programs in new indications, on-going
- CE Mark for 1st generation below the knee peripheral product expected in 2018

# REVA's Extensive Experience







**Polymer In-licensed** from Rutgers University

2004

**FIH with Novel Polymer** in the slide-and-lock design

2007

**Fantom FIH** using current deformable scaffold design

2014

**CE Mark** 240 patient 12 month results reported

**Fantom Launch** in Europe

2017

1998

**MD3 founded**

2002

**Name change to REVA Medical**

2010

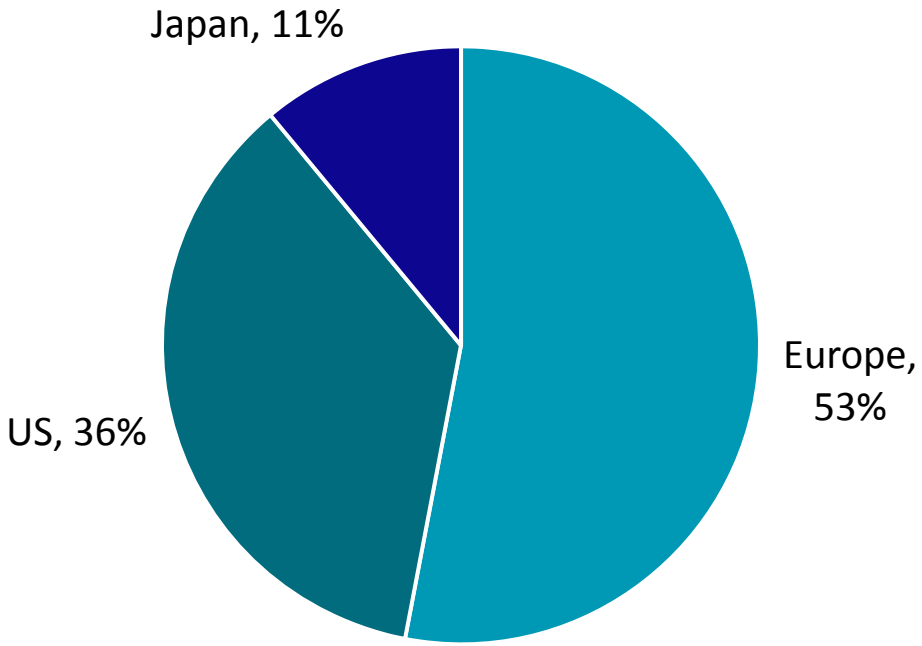
**REVA public listing in Australia**


2018

**New product releases & potential public listing in US**

# Large and Profitable Global Coronary Stent Market

**~$4 Billon Global Coronary Stent Market**




| WW Market Share | |
|---|---|
| Abbott | 34% |
| Boston Scientific | 32% |
| Medtronic | 27% |
| 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



Source: JP Morgan Equity Research Interventional Cardiology Market Model Dec. 2016.

# Stable Market Outlook

| | Current DES | Pipeline |
|---|---|---|
| **Abbott** | • Xience Alpine (DES with durable polymer coating) [1] | • Xience Sierra with improved deliverability, anticipated launch 2018[2]<br>• Absorb pulled from market in 2017 (PLLA/polylactide)[3]<br>• Falcon scaffold in development? (PLLA/polylactide)[4] |
| **Boston Scientific** | • Synergy launched in 2012 (DES with biodegradable polymer coating)[5] | • Renuvia BRS program halted in 2017 (PLLA/polylactide)[6] |
| **Medtronic** | • Resolute Oynx launched in 2014 (Durable polymer)[7] | • Drug-filled stent program last report in 2016 (Polymer free DES)[8]<br>• No BRS program |

1) Xience Alpine webpage Oct. 2017, www.vascular.abbott.com. 2) Abbott Earnings Call, Q2 2017. 3) Cox, C. No more Absorb BVS: Abbott puts a stop to sales. *tctmd.com* 2017. 4) Regazzoli D, et al. New generation bioresorbable scaffold technologies: an update on novel devices and clinical results. *J Thorac Dis* 2017;9(Suppl 9):S979-85. 5) Boston Scientific press release, Oct 2012. 6) Carlson, J. Boston Scientific pulls away from dissolvable stents. *Star Tribune* 2017. 7) Medtronic press release, Nov. 2014. 8) Medtronic press release, Oct. 2016.

# Limited Investment Outlook

## Abbott

"**XIENCE remains best-in-class stent. …I think we need an even more deliverable stent. …we will launch early next year, Sierra, next generation of XIENCE, which will address that. So, that's what I think is our single -- most important focus right now.**"
Miles White, CEO Abbott, Q2 2017 Earnings Call

## Boston Scientific

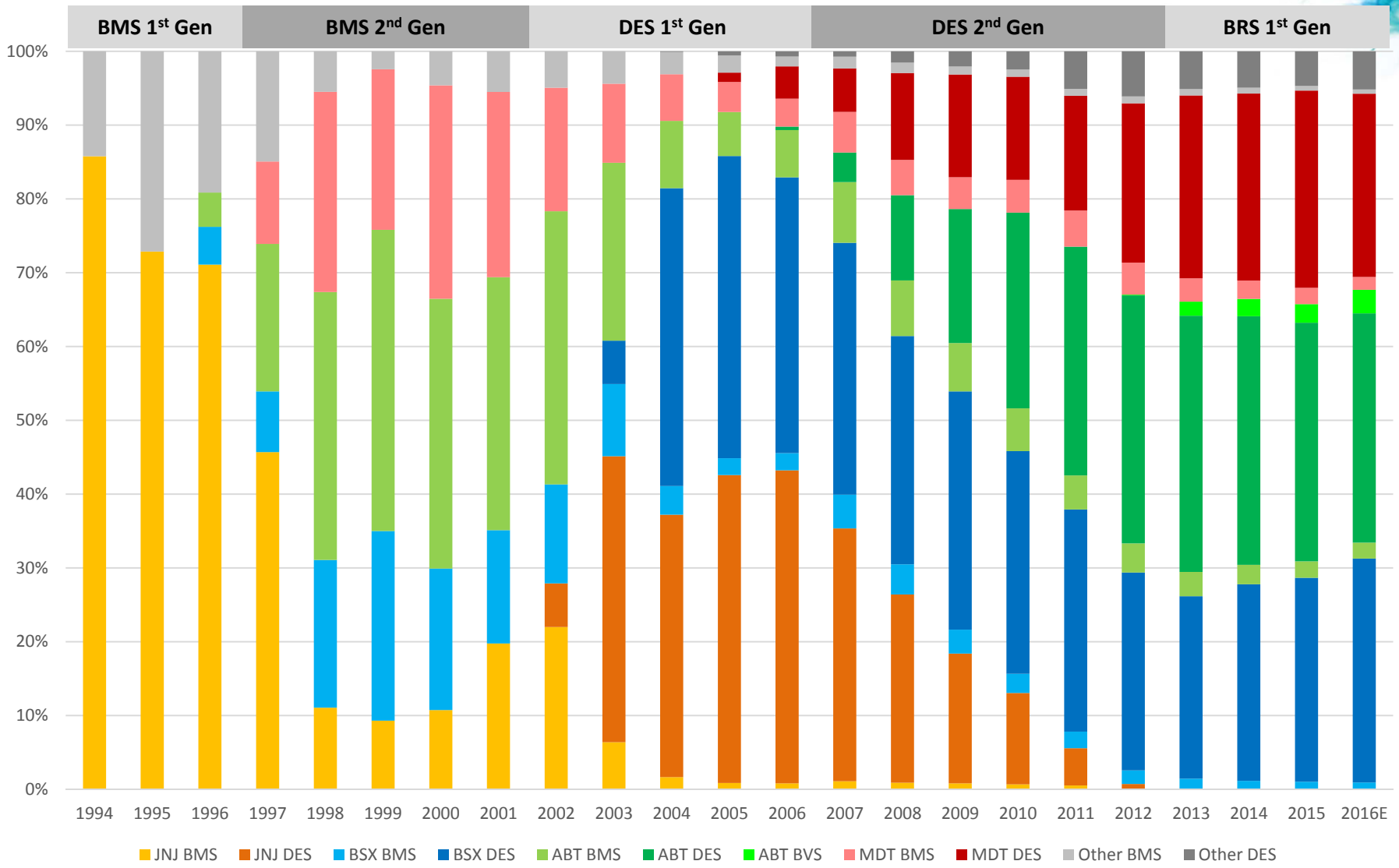
**"Our DES business really pays a lot of the bills for our investments into structural heart." "... In terms of next generation, the bulk of our investment… …is in complex coronary as well as structural heart**."
Michael Mahoney, CEO Boston Scientific, Q2 2017 Earnings Call

## Medtronic

"**we expect the recent approval of the Resolute Onyx will turn the mid-20s U.S. DES sales declines that we experienced in fiscal 2017 into meaningful growth this fiscal year**."
Omar Ishrak, CEO Medtronic, Q4 2017 Earnings Call

**Limited focus on DES R&D by current players creates opening for companies with a disruptive innovation.**

# Large and Rapid Market Share Disruptions with New Technology Introductions





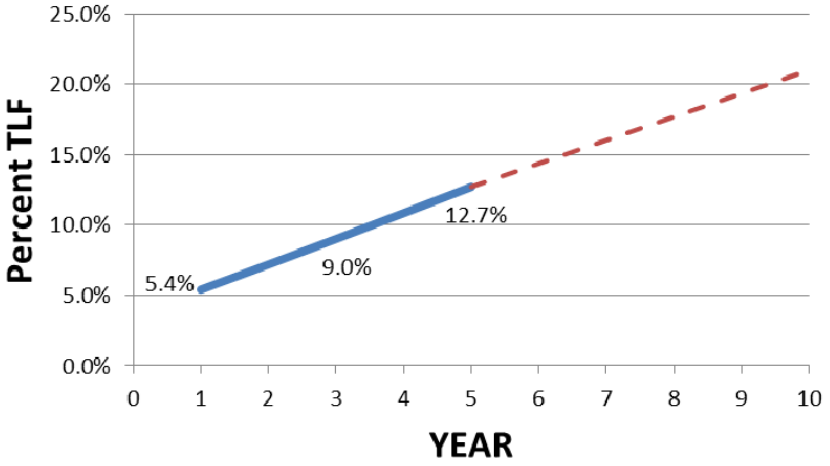

Source: JP Morgan Equity Research Interventional Cardiology Market Model Dec. 2016.

# Next Disruption: Bioresorbable Scaffolds

The clinical need for vessel scaffolding is temporary… a metallic drug eluting stent is for life.

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

**~2% Increase in Target Lesion Failure Rates Every Year Following Treatment[1]**




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

***"The ideal of a stent that does its job and disappears is a valuable long-term goal..."***

EuroPCR 2017 course director Dr. William Wijns

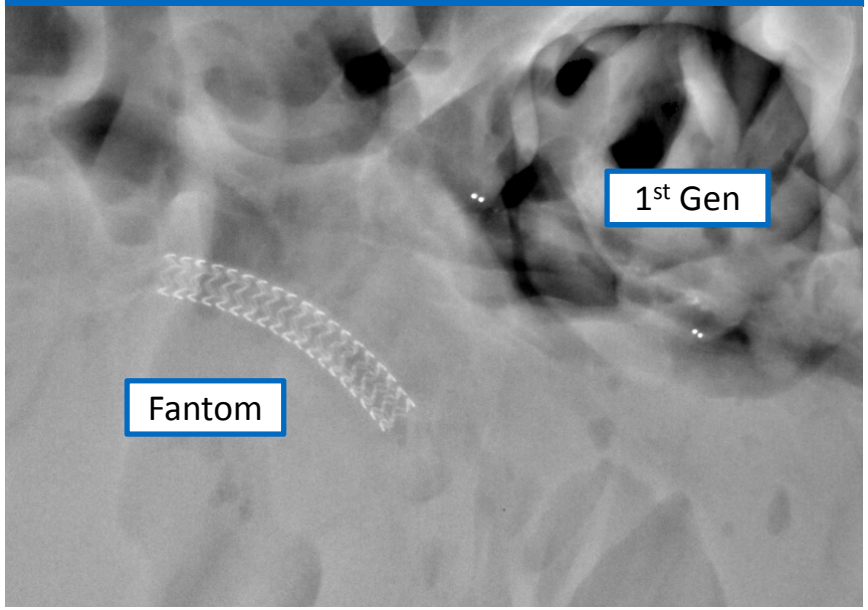



1. Gada H, et. Al. 5-year results of a randomized comparison of Xience V everolimus-eluting and Taxus paclitaxel-eluting stents. *J Am Coll Cardiol Intv* 2013;6:1263-6; Data from year 5 to 10 extrapolated from 5-year data

# Fantom Offers Substantial Improvement Over 1st Generation BRS

| | 1st Gen BRS | | Fantom |
|---|---|---|---|
| **Material** | PLLA | | Tyrocore™ |
| **Strut thickness[1]** | 157 µm | > | 125 µm |
| **Strength[2]** | 0.14 N/mm | < | 0.22 N/mm |
| **Radiopacity** | No | | Yes |

**The New Vision of BRS Performance**

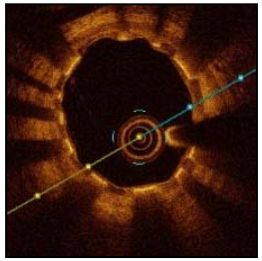





1) Includes coating. 1st Gen source: Foin, N. Biomechanical Assessment of Bioresorbable Devices. CRT 2017. Fantom source: Holm, N. REVA Fantom II performance and healing patterns by OCT. REVA Symposium EuroPCR 2017. 2) Strength at 15% compression. Tests performed by and data on file at Reva Medical.

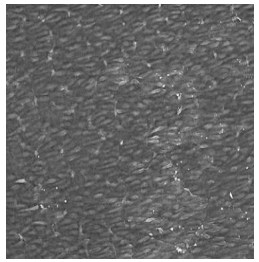
# Fantom Technology

## Fantom is the 1st and Only BRS Made with Tyrocore™



### STRONG

Large expansion range and maintains vessel patency



### BIOCOMPATIBLE

Vessel healing and restoration

### FLEXIBLE

Deliverability and single-step inflation

### RADIOPAQUE

Procedural accuracy and ease-of-use

### TYROCORE

- Proprietary; patent protected
- Derived from naturally occurring tyrosine amino acid
- Uniquely designed for vascular scaffolds
- Manufactured in-house

# Fantom Clinical Performance

## 12-Month Outcomes

| | Absorb (n=1,322) | Xience DES (n=686) | Fantom (n=240) |
|---|---|---|---|
| Study | ABSORB III[1] (TLF) | ABSORB III[1] (TLF) | FANTOM II[2] (MACE) |
| **TLF / MACE** | **7.8%** | **6.1%** | **4.2%** |
| Cardiac Death | 0.6% | 0.1% | 0.8% |
| TV – MI / All MI | 6.0% | 4.6% | 1.3% (All MI) |
| ID –TLR | 3.0% | 2.5% | 2.5% |
| **Stent Thrombosis** | **1.54%** | **0.74%** | **0.4%** |
| Late Lumen Loss (mm) | N/A | N/A | 0.17 / 0.29 |




1) Ellis S, et al. Everolimus-eluting bioresorbable scaffolds for coronary artery disease. *NEJM* 2015;373:1905-15. 2) Abizaid, A. The FANTOM II Study: First Report for the 12-month Clinical Outcomes of the Fantom Sirolimus-Eluting Bioresorbable Scaffold. EuroPCR 2017.

# Demonstrated Low Scaffold Thrombosis

## 12-Month Clinical Outcomes

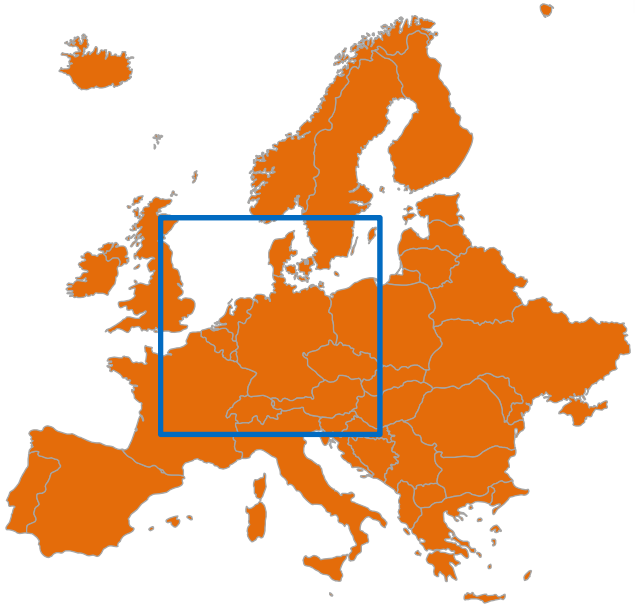
| | Absorb (n=1,322) | Xience DES (n=686) | Fantom (n=240) |
|---|---|---|---|
| Study | ABSORB III[1] | ABSORB III[1] | FANTOM II[2] |
| **Scaffold Thrombosis** | **1.54%** | **0.74%** | **0.4%** |
| **Acute** (0 to 1 day) | 0.15% | 0.58% | 0% |
| **Subacute** (2 to 30 days) | 0.91% | 0.15% | 0.4% |
| **Late** (31 to 365 days) | 0.46% | 0% | 0% |
| **Very Late** ( >365 days) | 0.3% (thru 24 months) | 0% | 0% (140 pts past 18 mo) |




1) Ellis S, et al. Everolimus-eluting bioresorbable scaffolds for coronary artery disease. *NEJM* 2015;373:1905-15. 2) Abizaid, A. The FANTOM II Study: First Report for the 12-month Clinical Outcomes of the Fantom Sirolimus-Eluting Bioresorbable Scaffold. EuroPCR 2017.

# Targeted Launch Underway

- Small team of experienced sales reps
- Target large hospitals (1,000+ procedures annually)
- Grow share in target accounts
- Controlled geographic expansion
  - Phase 1: Germany, Switzerland, Austria, Benelux, Denmark
  - Phase 2: Italy, Spain, Brazil, Middle East, Eastern Europe



# Attractive Market Opportunity with Manageable Investment

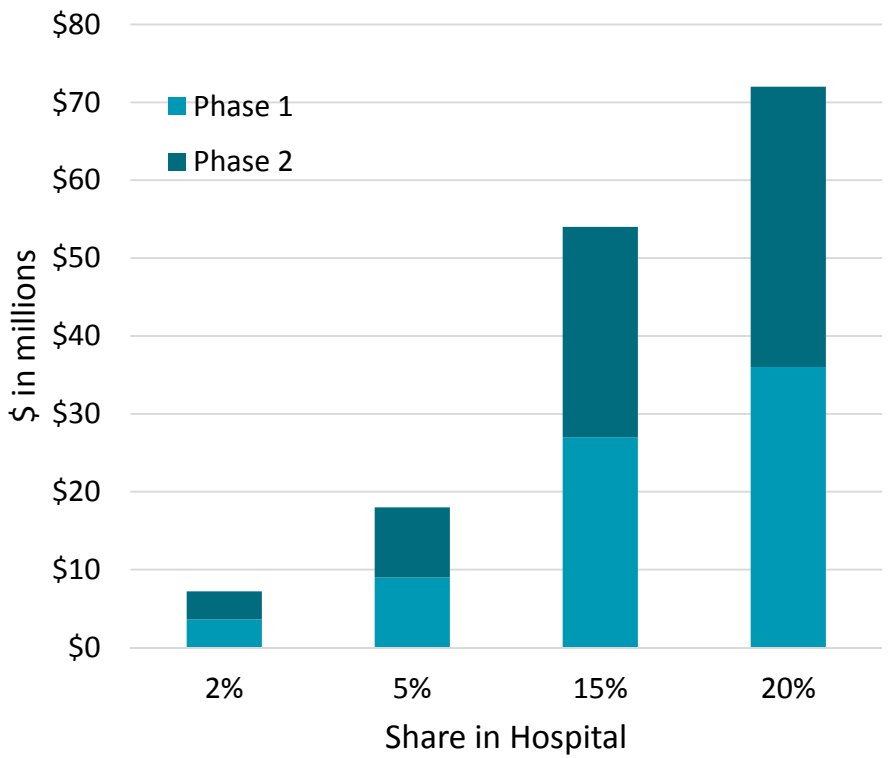
**SHARE GROWTH DRIVERS**

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

**DIRECT AND DISTRIBUTOR CHANNELS**

- Direct in Phase 1 (<15 FTE's)
- Distributor in Phase 2

**Gross Revenue Potential in Initial Focus Markets[1]**





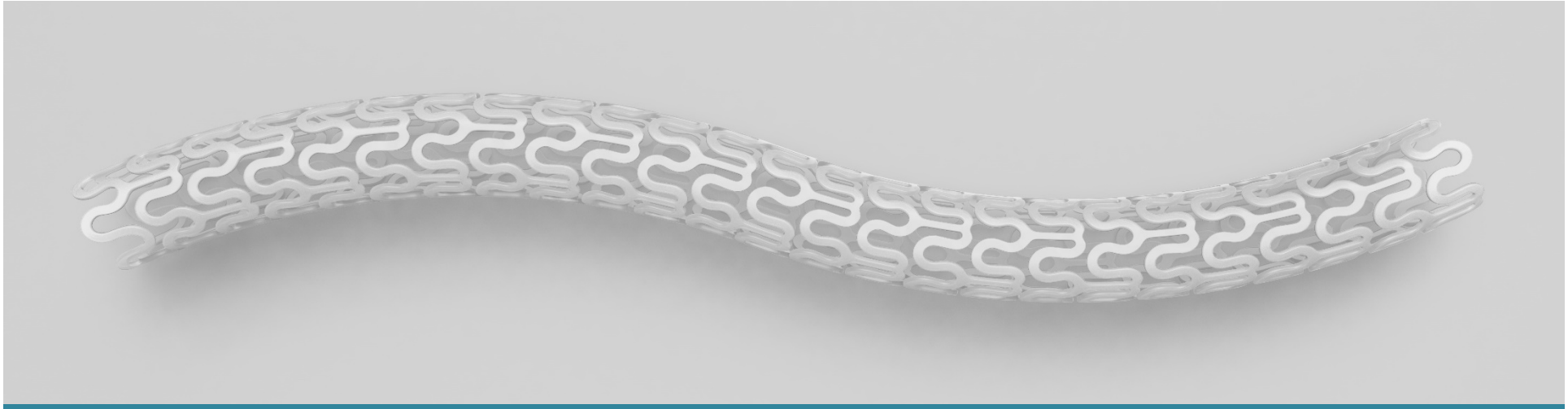

1) Calculations based on estimated annual procedures at targeted hospitals.

# Fantom Global Clinical Program

| | | |
|---|---|---|
| ***Enrollment Complete – In Follow Up*** | | |
| **FANTOM I** | **First-in-human safety study (n=7)** | **Year 3** |
| **FANTOM II Cohorts A&B** | **Multi-center safety and performance study (n=240)** | **Year 2** |
| ***Enrolling*** | | |
| **FANTOM II Cohort C** | **Long lesion and multiple vessel, multi-center study (n=50)** | **enrolling** |
| **FANTOM STEMI** | **Single center pilot study in STEMI (n=20)** | **enrolling** |
| ***Planning*** | | |
| **FANTOM Registry** | **European post-market multi-center registry (n=125+)** | **planning** |
| **FANTOM III (US pivotal trial)** | **Multi-center RCT vs. metallic DES (n=1,800-2,200)** | **planning** |
| **FANTOM Japan (pivotal trial)** | **Multi-center RCT vs. metallic DES (n=350-400)** | **planning** |

# Expanding the Product Portfolio

- Launch next generation Fantom with thinner struts
- Expand size matrix with longer and shorter scaffolds
- Develop larger diameter to treat more vessels
- Pursue below-the-knee indication
- Develop polymer for expanded peripheral artery applications



# Experienced Management Team and Solid Financial Position

**Reggie Groves,** CHIEF EXECUTIVE OFFICER
*Medtronic, McKinsey & Company, Harvard Business School*

**Brandi Roberts,** CHIEF FINANCIAL OFFICER
*Mast Therapeutics, Alphatec Spine, Pfizer*

**Jeffrey Anderson,** SVP, CLINICAL AND REGULATORY AFFAIRS
*Neomend, Abbott Vascular, Medtronic*

**Richard Kimes,** SVP, OPERATIONS
*Volcano, mNemoscience, Guidant*

**Carmelo Mastrandrea,** VP, EUROPE
*Biosensors, Biotronik, Guidant*

**Joann Yao,** SR. DIR., GLOBAL MARKETING
*Abbott Vascular, Hansen Medical, Boston Scientific*

**Cash at 6/30/2017:**
$29.1 million

**Shares outstanding at 6/30/2017:**
41.2 million

**Market capitalization:**
~$230 million*

**Commenced sales:**
Q3 2017

* US dollars as of close October 9, 2017

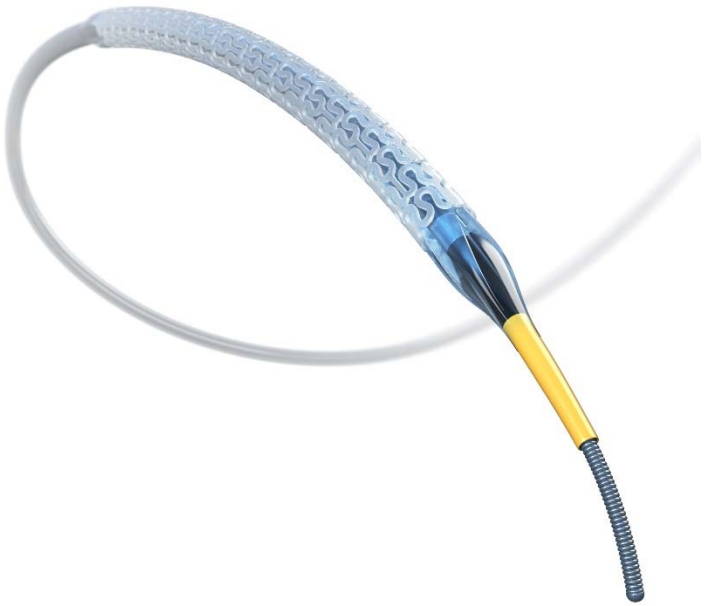
# Upcoming Milestones

**CLINICAL PROGRAM**

- FANTOM II 24-month data interim look, Q4 2017
- FANTOM II 24-month data release, H1 2018
- US IDE study approval, anticipated early 2018

**PRODUCT DEVELOPMENT**

- CE Mark for next generation Fantom sub 100 micron scaffold, 2018
- Launch next generation Fantom, 2018
- CE Mark for Fantom in below-the-knee application, 2018



Fantom is not available for sale in the US. Fantom is not available for sale in all countries.