



2017

ANNUAL REPORT

TAKING KIDNEY CARE TO HEART.



LETTER FROM THE CHAIRMAN

JOHN ERB

Dear Shareholders,

On behalf of Osprey Medical's Board of Directors and Management, I am pleased to present the Annual report for the 2017 financial year.

2017 was a year of strong growth for Osprey as we continue to improve the standard of care for patients suffering from chronic kidney disease (CKD) by reducing the amount of contrast dye used during commonly performed angiography procedures. Our commercialization activity in the US continues to advance as we reported the thirteenth consecutive quarter-on-quarter sales growth for our proprietary DyeVert and DyeVert Plus Systems in the US.

The strong sales momentum was driven by continued expansion of hospitals adopting our technologies with over 95 purchasing hospitals and the 62 hospitals currently in the evaluation-to-purchase phase, reflecting a strong pipeline of future customers. In addition, we have continued to penetrate existing customers as they focus on use of our product in all patients with CKD. We continue to invest in our sales growth strategy by focusing on expanding the sales team. In 2017 our sales team grew 53% as compared to 2016 with a team of 23 field personnel focused on increasing awareness around the importance of kidney protection.

A key market development strategy in 2017 was the expansion of our Be Kind to Kidneys™ (BKK) campaign, which leverages the growing awareness of the Contrast-Induced Acute Kidney Injury (CI-AKI) problem within the physician and health care provider communities. The BKK campaign offers practical solutions helping physicians comply with the national guidelines established by the American College of Cardiology and the American Heart Association. Society guidelines have placed emphasis for dye minimization to reduce the risk of CI-AKI and has supported uptake for our DyeVert Plus System, the only FDA-cleared product that reduces and monitors dye used in commonly performed heart procedures without impacting image quality.

Other significant milestone achievements include the launch of our DyeTect Automated Contrast Monitoring System in July 2017. DyeTect is a new product that was created in reaction to requests from DyeVert Plus users who wanted the advantages of dye monitoring in non-CKD patients. DyeTect provides real-time dye threshold monitoring for all dye-based heart procedures. Having obtained FDA and CE Mark approval, DyeTect's launch bumps Osprey's overall addressable market up by 40% to US\$1.8 billion by adding an additional 3.5 million relevant procedures.

As we act to expand our US sales force and increase our marketing efforts, we also strengthened our Board membership by welcoming Sandra Lesenfans, Medtronic VP and General Manager, as Non-Executive Director to the Osprey Board in June 2017. Her outstanding experience with commercial strategy and global business management will provide invaluable guidance to the Board in the midst of this busy period. Through a show of ongoing support from our investors, we have also raised A\$32.5 million in an over-subscribed placement in August 2017 which was used to fund these efforts.

Osprey continues to be on the forefront of kidney protection technology, spearheading the growing awareness of the CI-AKI problem, as we presented at a number of premier scientific meetings such as the ACC, SCAI and TCT conferences throughout the year. Participation in these conferences helps solidify our presence in the market and gives us the opportunity to establish relationships with key customers including physicians, nurses and cardiovascular technicians.

The key milestones achieved and all the behind-the-scenes work executed during the year are a direct result of the tireless effort and determination of our highly capable and committed team. Hence, I would like to thank my fellow Board members, including CEO Mike McCormick, and the entire Osprey team for their dedication to ensuring the Company's success in 2017. The achievements of this past year stand us in good stead to continue progressing our strategy in 2018 including the continued expansion of our US sales force, initiation of our European pilot commercialization strategy as well as the R&D of new product enhancements for our DyeVert product franchise.

On behalf of the Board, I would also like to thank all our shareholders for your ongoing support. We look forward to building on the achievements of this year and sharing our progress with you in 2018.

Yours sincerely,

John Erb
Chairman



LETTER FROM THE PRESIDENT AND CEO

MIKE MCCORMICK

Dear Shareholders,

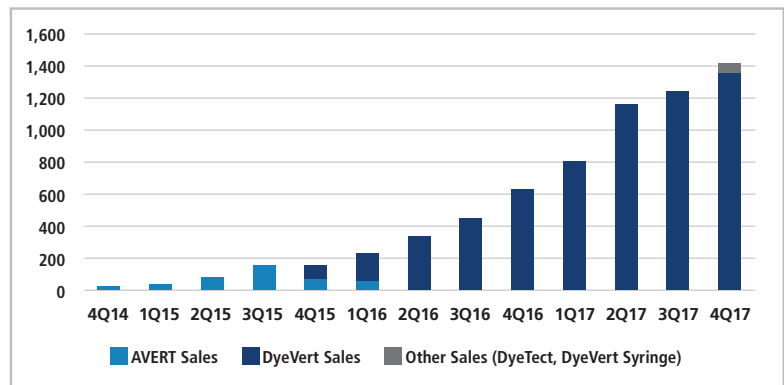
In 2017, we made substantial progress in commercializing the DyeVert™ Plus System, scaling our salesforce and strengthening our balance sheet with an oversubscribed capital raise. The DyeVert Plus System is now being rapidly adopted by physicians across the US as part of implementing guidelines to lower the risk of kidney damage that can be caused from contrast (dye) injections commonly used in heart procedures. We are pleased to have advanced the Company's vision of protecting patients with poor kidney function from the harmful effects of contrast dye.

The Osprey team has worked tirelessly over the past year to successfully launch the DyeVert Plus System in the US. Our key achievements include:

- **Successful US commercialization**

Commercialization of our DyeVert Plus System showed positive momentum throughout the year with a revenue increase of 179% compared to 2016 sales. We posted strong sales growth in each quarter of 2017 by increasing penetration in existing hospitals, adding new hospitals each month and having a strong pipeline of hospitals in the sample-to-purchase phase.

An important factor helping drive adoption of DyeVert Plus is the medical society guidelines that stress the importance of dye minimization and monitoring for patients at risk of dye related kidney damage. The American College of Cardiology and American Heart Association have issued joint guidelines for the reduction of Contrast Induced Acute Kidney Injury (CI-AKI). These guidelines emphasize the need to screen patients for risk of CI-AKI, ensure proper hydration for all patients, and employ dye minimization and monitoring strategies to avoid CI-AKI. These guidelines drive demand for our DyeVert Plus System as it is the only FDA cleared product proven to reduce dye without affecting image quality and provide real-time monitoring of dye use throughout the procedure. Osprey's market awareness campaigns in 2017 reinforced the society guidelines and the need for minimization of dye use in at risk patients.



We were pleased with the rapid growth in DyeVert Plus sales and the positive response from physicians and hospitals to the product. Our sales reps report that physicians understand the importance of lowering dye volume in poor kidney patients and are receptive to the DyeVert Plus System. More than 95 hospitals have adopted the DyeVert Plus System placing consistent orders with an additional 62, as of the end of 2017, working through the approval process.

Sales reps reported that customers were very receptive to DyeVert Plus, with 90% of the physicians approached progressing to the evaluation stage. These physicians also supported its purchase with the hospital Value Assessment Committee (an independent review group for new technologies), which is a necessary step for Osprey to sell its products within a hospital system. The process from sample-to-purchase averages 3-4 months. Once the product is approved for sale within a hospital system the sales rep's focus shifts to expanding the product reach to all physicians within a hospital. This strategy is designed to ensure that all patients with poor kidney function presenting at a hospital have the advantage of the DyeVert Plus System.

- **Growth of salesforce**

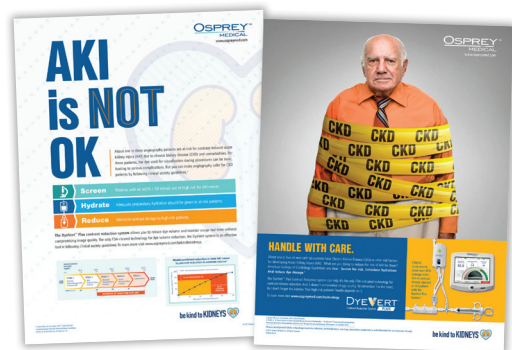
The Company's sales strategy is to increase the number of sales reps to establish the DyeVert Plus as the standard of care for protection of patients at risk of dye related kidney damage. Osprey has taken a considered approach to new sales territories, choosing to locate its sales reps where there is a large population of patients with chronic kidney disease who are at high risk of developing kidney damage.

Osprey expanded its sales force by 53% in 2017, hiring 8 additional sales team members throughout the year, ending the year with 23. Sales representatives (18) are seasoned medical device professionals with at least ten years of previous selling experience and clinical specialists (5) are registered nurses or certified technologists. Sales reps focus on opening new hospitals and clinical specialists focus on expanding utilization in new hospitals. This sales approach allows for education on disease prevention and product training to ensure rapid adoption and patients' protection.

- **Podium presentations and publications**

A key part of Osprey's commercialization strategy is to present on the podium at leading industry events to drive product awareness among the physician community. Osprey's technology was featured in eight podium presentations at key heart meetings in 2017 including the ACC, SCAI, and TCT conferences. These presentations featured the DyeVert and DyeVert Plus System benefits of +40% on average dye savings, without compromised image quality, which aligns with industry guidelines to minimize dye in patients with poor kidney function.

Positive data highly supportive of Osprey's products was also published in 2017 in the Journal of the American Medical Association (JAMA), the most widely circulated medical journal globally. JAMA's publication analyzed data from the National Cardiovascular Data Registry (NCDR) database and concluded that dye reduction was necessary to minimize AKI. Osprey's DyeVert and DyeVert Plus are the only devices with an FDA cleared claim for dye reduction without compromised image quality.



- **Osprey's newest product, DyeTect™ is a valuable addition to its R&D portfolio**

Osprey's newest technology DyeTect, originated from customers who had used Osprey Medical's DyeVert Plus System and wanted the benefits of real-time dye threshold monitoring and accurate accounting of total dye dose for all dye-based procedures.

The new system leverages the DyeVert Plus wireless "smart syringe" and reusable LCD monitor to actively manage dye administration during heart procedures. Cardiology performance measures address the need for dye management and accurate dye dose reporting for all heart procedures. DyeTect allows for real-time dye monitoring and keeps physicians informed when limits (based on kidney function) are reached and it accurately reports the total dye dose to the patient.

The product is targeted for patients without CKD, as DyeTect does not minimize the amount of dye used. For patients with CKD the DyeVert Plus is needed because it reduces the amount of dye delivered to the patient. DyeVert Plus and DyeTect target different patient groups with the strong differentiation of dye minimization that is needed for CKD patients.

Current cardiology performance measures address the need for dye management and accurate dye dose reporting for all heart procedures using contrast dye for fluoroscopic X-ray imaging. DyeTect increases Osprey's total addressable market opportunity by 3.5M procedures. With anticipated pricing of \$149 per unit, the incremental market opportunity for DyeTect is \$526M per year in the US and Western Europe.

- **Successful oversubscribed placement and fully underwritten entitlement offer**

In August 2017, Osprey announced an oversubscribed private placement to sophisticated and institutional investors and a fully underwritten entitlement offer, to raise approximately A\$32.5 million. Funds will be used for ongoing commercial expansion of the DyeVert Plus System and further developments of the product portfolio.

As we look forward, sales revenue is expected to grow as the number of hospitals and physicians using DyeVert Plus increases and as we pick up momentum from a broader US sales footprint. Importantly, we will continue to expand our network of key opinion leading physicians and hospital centers of excellence, which is expected to provide the framework for accelerating sales throughout 2018. The key areas of focus in CY2018 include the following:

- **Continued US commercial penetration**

Osprey will hire additional sales representatives in 2018 with the goal of establishing the DyeVert Plus as part of the standard of care for physicians treating patients at risk of dye related kidney damage. In support of revenue growth targets, we continue sales force expansion in key territories, with a focus on population areas that have a high prevalence of CKD. By the end of 2018, we anticipate broadening our footprint to 35 sales team members across the United States.

- **European pilot commercial launch**

Outside of the US, we plan to pilot commercial activities in a few European countries in 2018 to understand the key factors to market adoption. We will spend the rest of this year gathering insights into European market dynamics, identifying a sales distribution channel, and beginning to work with key opinion leading European physicians. In addition, we will focus on Japan requirements for market entry and evaluate distribution partners.

- **Medical community scientific promotion and market development**

We are continuing to work with key opinion leading physicians to direct podium presentations and peer reviewed journal articles on the performance of the DyeVert Plus System and the importance of dye reduction for patients at-risk of dye related kidney damage.

We are planning additional post marketing studies of the DyeVert Plus System in 2018. These studies will focus on demonstrating the value of contrast monitoring and dye savings using the DyeVert Plus System. We anticipate these studies to be presented at key heart meetings and published following completion.

- **New product enhancements and developments**

We continue to invest in our DyeVert product franchise. In 2018 our top priority is the addition of a power injector compatible DyeVert Plus System. This technology will allow power injection procedures to have the same dye saving advantages as manual injection procedures with DyeVert Plus. Approximately 25% of US hospitals use the power injection and this new technology will help protect power injection patients from the harmful effects of dye.

Additional R&D projects will focus on complementary products to our DyeVert Plus System, along with expanding the potential clinical applications of the technology.

I would like to thank our employees, Board of Directors, and shareholders for your continued support. We are on track to achieving our 2018 operational objectives and believe we will take a big step forward in our vision of protecting patients from the harmful effects of contrast dye.



Mike McCormick
Osprey Medical President and CEO

INDEPENDENT AUDITORS' REPORT

Board of Directors, Audit Committee and Shareholders
Osprey Medical, Inc. and Subsidiary
Minnetonka, Minnesota
and
Level 13, 41 Exhibition Street
Melbourne, Victoria 3000, Australia
ARBN: 152 854 923

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Osprey Medical, Inc. and Subsidiary, which comprise the consolidated balance sheets as of December 31, 2017 and 2016, and the related consolidated statements of operations, shareholders' equity, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Osprey Medical, Inc. and Subsidiary as of December 31, 2017 and 2016 and the results of their operations and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Baker Tilly Virchow Krause, LLP

Minneapolis, Minnesota
February 23, 2018

OSPREY MEDICAL, INC. AND SUBSIDIARY

CONSOLIDATED BALANCE SHEETS

As of December 31, 2017 and 2016

ASSETS

	2017	2016
CURRENT ASSETS		
Cash and cash equivalents	\$ 32,134,848	\$ 21,853,439
Accounts receivable	310,103	134,946
Prepaid expenses	144,446	61,809
Inventory	762,185	260,936
Total Current Assets	33,351,582	22,311,130
PROPERTY AND EQUIPMENT		
Office and computer equipment	374,215	345,637
Laboratory equipment	1,001,848	708,586
Furniture and fixtures	46,103	46,103
Less: Accumulated depreciation	(738,853)	(553,477)
Net Property and Equipment	683,313	546,849
OTHER ASSETS		
Intangible assets, net of accumulated amortization of \$131,208 and \$118,712 as of December 31, 2017 and 2016, respectively	95,803	108,299
Other Asset	12,250	12,250
Total Other Assets	108,053	120,549
TOTAL ASSETS	\$ 34,142,948	\$ 22,978,528

LIABILITIES AND SHAREHOLDERS' EQUITY

CURRENT LIABILITIES

Accounts payable	\$ 557,464	\$ 415,543
Accrued payroll and related	1,062,681	786,819
Accrued vacation	159,660	118,230
Total Current Liabilities	1,779,805	1,320,592

LONG-TERM LIABILITIES

Accrued rent	4,330	21,172
Total Liabilities	1,784,135	1,341,764

SHAREHOLDERS' EQUITY

Preferred stock, \$0.0001 par value; 20,000,000 authorized shares; none issued and outstanding as of December 31, 2017 and 2016, respectively	-	-
Common stock, \$0.0001 par value; 630,000,000 and 180,000,000 authorized shares; 169,754,103 and 128,869,627 shares issued and outstanding as of December 31, 2017 and 2016, respectively	16,975	12,887
Additional paid-in capital	111,578,760	86,524,388
Deficit	(79,236,922)	(64,900,511)
Total Shareholders' Equity	32,358,813	21,636,764
TOTAL LIABILITIES AND SHAREHOLDERS' EQUITY	\$ 34,142,948	\$ 22,978,528

See accompanying notes to consolidated financial statements.

OSPREY MEDICAL, INC. AND SUBSIDIARY

CONSOLIDATED STATEMENTS OF OPERATIONS

For the Years Ended December 31, 2017 and 2016

	2017	2016
SALES	\$ 1,630,615	\$ 585,140
COST OF SALES	1,393,722	743,812
Gross Profit (Loss)	236,893	(158,672)
OPERATING EXPENSES		
Sales and marketing	7,113,767	3,810,267
General and administrative	3,100,607	2,715,580
Clinical and regulatory	1,239,023	1,603,047
Research and development	3,226,686	3,466,142
Total Operating Expenses	14,680,083	11,595,036
Operating Loss	(14,443,190)	(11,753,708)
OTHER INCOME		
Other income	110,253	17,783
Net Other Income	110,253	17,783
Loss Before Taxes	(14,332,937)	(11,735,925)
Income tax provision	3,474	580
NET LOSS	\$ (14,336,411)	\$ (11,736,505)
EARNINGS PER SHARE:		
Basic and diluted loss per common share	\$ 0.10	\$ 0.12
Basic and Diluted Weighted average shares outstanding	142,497,786	94,345,818

See accompanying notes to consolidated financial statements.

OSPREY MEDICAL, INC. AND SUBSIDIARY
CONSOLIDATED STATEMENTS OF SHAREHOLDERS' EQUITY

For the Years Ended December 31, 2017 and 2016

	Common Stock		Additional Paid-in Capital	Accumulated Deficit	Total Shareholders' Equity
	Shares	Amount			
BALANCES, December 31, 2015	77,083,913	\$ 7,708	\$ 64,798,199	\$ (53,164,006)	\$ 11,641,901
Issuance of common stock at \$0.42 per share, net of issuance costs of \$888,358	51,785,714	5,179	21,003,353	-	21,008,532
Stock-based compensation expense	-	-	722,836	-	722,836
2016 net loss	-	-	-	(11,736,505)	(11,736,505)
BALANCES, December 31, 2016	128,869,627	12,887	86,524,388	(64,900,511)	21,636,764
Issuance of common stock at \$0.62 per share, net of issuance costs of \$1,156,773	40,625,114	4,062	24,332,244	-	24,336,306
Exercise of stock options	259,362	26	113,155	-	113,181
Stock-based compensation expense	-	-	608,973	-	608,973
2017 net loss	-	-	-	(14,336,411)	(14,336,411)
BALANCES, December 31, 2017	169,754,103	\$ 16,975	\$ 111,578,760	\$ (79,236,922)	\$ 32,358,813

See accompanying notes to consolidated financial statements.

OSPREY MEDICAL, INC. AND SUBSIDIARY

CONSOLIDATED STATEMENTS OF CASH FLOW

For the Years Ended December 31, 2017 and 2016

	December 31, 2017	December 31, 2016
CASH FLOWS FROM OPERATING ACTIVITIES		
Net Loss	\$ (14,336,411)	\$ (11,736,505)
Adjustments to reconcile net loss to net cash flows from operating activities		
Depreciation	185,376	121,996
Amortization	12,496	12,496
Stock-based compensation expense	608,973	722,836
Changes in operating assets and liabilities		
Accounts receivable	(175,157)	(98,806)
Prepaid expenses	(82,637)	28,154
Inventory	(501,249)	39,631
Other current assets	-	7,500
Accounts payable	141,921	112,721
Accrued payroll and related	275,862	266,363
Accrued rent	(16,842)	(14,931)
Accrued vacation	41,430	14,846
Net Cash Flows from Operating Activities	<u>(13,846,238)</u>	<u>(10,523,699)</u>
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchases of property and equipment	(321,840)	(415,961)
Net Cash Flows from Investing Activities	<u>(321,840)</u>	<u>(415,961)</u>
CASH FLOWS FROM FINANCING ACTIVITIES		
Issuance of common stock, net of issuance costs	24,336,306	21,008,532
Proceeds from exercise of stock options	113,181	-
Net Cash Flows from Financing Activities	<u>24,449,487</u>	<u>21,008,532</u>
Net Change in Cash and Cash Equivalents	10,281,409	10,068,872
CASH AND CASH EQUIVALENTS - Beginning of Year	<u>21,853,439</u>	<u>11,784,567</u>
CASH AND CASH EQUIVALENTS - END OF Year	<u>\$32,134,848</u>	<u>\$21,853,439</u>
SUPPLEMENTAL CASH FLOW DISCLOSURES		
Cash paid for income taxes	\$ 3,474	\$ 580

See accompanying notes to consolidated financial statements.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 1 - Summary of Significant Accounting Policies

Nature of Operations

Osprey Medical, Inc. ("Osprey", "Osprey Medical" or the "Company") is a US based, commercial stage company focused on protecting patients from the harmful effects of X-ray dye (contrast) used during commonly performed angiographic imaging procedures. Osprey's mission is to improve outcomes in patients with Chronic Kidney Disease (CKD) and at high risk of acquiring Contrast-Induced Acute Kidney Injury (AKI). Patients with AKI experience long term and costly side effects from this disease. The incidence of AKI also has a negative economic impact on the health care providers caring for these patients. Osprey Medical is committed to making angiography safer for patients suffering from CKD, improving outcomes, and reducing economic impact.

The Company's products are designed to reduce the amount of dye injected into patients during standard cardiovascular and peripheral procedures (angiogram and stenting). Published literature indicates approximately 25% of patients undergoing standard cardiovascular procedures have preexisting CKD and are at high risk of further kidney damage due to AKI. Cardiology and Radiology clinical society guidelines strongly recommend reducing the risk of AKI by screening patients for risk of kidney disease, adequately hydrating hi-risk patients pre- and post-procedure, and minimizing the amount of contrast delivered to the patient.

Osprey Medical's core technologies originated from research conducted at Melbourne's Baker IDI Heart and Diabetes Institute. Its proprietary dye reduction and monitoring technologies are designed to help physicians minimize dye volumes administered to patients. The Company's DyeVert™ Plus System reduces contrast while maintaining image quality in a self-adjusting easy-to-use design. The system's monitoring component allows for establishing maximum contrast thresholds to be used in the procedures and displays total dye administered to the patient and the amount saved during the procedure.

Following successful clinical trials, the Company obtained European Regulatory approval (CE Mark), TGA approval, and United States of America Food and Drug Administration ("FDA") clearance for the AVERT™, AVERT Plus, DyeVert System and DyeVert Plus System. The Company received FDA clearance for medical claims of dye savings, image quality and reflux reduction for its products.

In 2015, the Company commenced a controlled commercial launch of its products in the state of Texas. Following FDA clearance of Osprey's dye savings, image quality and reflux reduction claims, Osprey started increasing its US sales force to commercialize the DyeVert Plus System. As of December 31, 2017, the Company had sales representatives in 18 territories and 5 Clinical Specialists.

Osprey Medical's patent portfolio comprises of 12 issued US patents, 15 issued international patents; 15 pending US patent applications, and PCT filings resulting in 19 National Stage Applications in the European Union (Germany, France and Great Britain), Japan and Australia.

On October 30, 2007, the Company formed a wholly-owned Australian subsidiary with the name Osprey Medical Pty. Ltd. (OM Pty) for the purpose of conducting research on future products. The subsidiary began operations in early 2008.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 1 - Summary of Significant Accounting Policies (cont.)

Principles of Presentation

The consolidated financial statements include the accounts of the Company's wholly-owned Australian subsidiary, OM Pty. All intercompany accounts and transactions have been eliminated in consolidation.

The US dollar is the functional currency of OM Pty, and as a result, all currency gains and losses are reflected in operations. Currency gains and losses include realized amounts on transactions, and unrealized amounts related to translating accounts from local currency to the functional currency, with translation accomplished using the current rate method.

In its consolidated statement of operations, the Company segregates its operating expenses into five categories that provide useful information to both management and Company shareholders.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the consolidated financial statements and accompanying notes. Actual results could differ from those estimates.

Cash and Cash Equivalents

Cash and cash equivalents include short-term investments with maturities of three months or less from their date of purchase. The Company maintains cash balances that exceed federally insured limits; however, it has not incurred losses on such amounts.

Accounts Receivable

The Company grants credit to customers in the normal course of business and generally does not require collateral or any other security to support amounts due. Customer accounts with balances outstanding longer than the contractual terms are considered past due. The Company records accounts receivable at the original invoice amount less an estimate made for doubtful receivables based on periodic reviews of all outstanding amounts. The Company determines the need for an allowance for doubtful accounts by considering a number of factors, including length of time accounts receivables are past due, customer financial condition and ability to pay the obligation, historical and expected credit loss experience, and the condition of the general economy and the industry as a whole. It is the Company's policy to write-off accounts receivable when deemed uncollectible. There was no allowance for doubtful accounts as of December 31, 2017, and 2016.

Inventories

Inventories are stated at lower of cost (using the first-in, first-out method) or market, and are as follows as of December 31:

	<u>2017</u>	<u>2016</u>
Raw Materials	\$ 563,121	\$ 242,421
Finished Goods	199,064	18,515
Total	<u>\$ 762,185</u>	<u>\$ 260,936</u>

The Company has invested in its manufacturing operations to support future sales. The Company is not currently operating at full capacity. Charges related to excess capacity are included as current period charges to cost of sales, and are not capitalized into inventory.

Property and Equipment

Property and equipment are recorded at cost, and depreciation and amortization are provided on the straight-line method over the estimated useful lives of the assets:

	<u>Years</u>
Computer equipment	3
Furniture and fixtures	7
Lab equipment	5

Maintenance and repairs are charged to expense as incurred. Depreciation expense on property and equipment was \$185,376 and \$121,996 for the years ended December 31, 2017 and 2016, respectively.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 1 - Summary of Significant Accounting Policies (cont.)

Intangible Assets

Intellectual property acquired for consideration is recorded either as research and development expense or as intangible assets, as appropriate to the use of the property. Intellectual property that has multiple future uses is capitalized when acquired, and single use property is expensed as research and development. The Company's recorded intangible assets are comprised entirely of patent applications acquired from V-Kardia Pty. (VK Pty) for which there were multiple future uses. At acquisition of these assets there was a difference between the value of the asset acquired and its tax basis, and the Company increased the assigned value of the asset acquired by the amount of the related deferred tax liability. The Company amortizes intangible assets on a straight-line basis over their expected economic lives, which is equivalent to the time from acquisition through expiration of the patents expected to be issued from the acquired patent applications. The intangible assets acquired in June, 2007 are expected to have a life of approximately 18 years from the date of acquisition.

Revenue Recognition

The Company recognizes revenue when the customer takes ownership and assumes risk of loss, collection of the relevant receivable is probable, persuasive evidence of an arrangement exists and the sales price is fixed or determinable. Shipping and handling costs charged to customers have been included in net sales. Shipping and handling costs incurred by the Company have been included in cost of sales. The Company presents taxes imposed on revenue-producing transactions on a net basis.

Impairment of Long-Lived Assets

The Company reviews long-lived assets, including property and equipment and intangible assets, for impairment whenever events or changes in business circumstances indicate that the carrying amount of an asset may not be fully recoverable. An impairment loss would be recognized when the estimated future cash flow from the use of the asset are less than the carrying amount of that asset. To date, there have been no such losses.

Lease Expense

The Company recognizes rental expense for operating leases on a straight-line basis over the term of the lease.

Research and Development Costs

Research and development costs are charged to expense as incurred. The Company has acquired licenses to intellectual property that do not have multiple uses and records such acquisition costs as research and development as incurred. The Company expenses patent acquisition costs as incurred. Consideration for such intellectual property includes current and future payments of cash, issuance of common stock and warrants to acquire common stock.

Income Taxes

The Company utilizes the liability method of accounting for income taxes. Under the liability method, deferred tax assets and liabilities are determined based on the differences between financial reporting and tax bases of the assets and liabilities and are measured using the enacted tax rates and laws that will be in effect when the differences are expected to reverse. The Company records a valuation allowance to reduce net deferred tax assets when it believes it is more likely than not that all or part of its deferred tax assets will not be realized.

Stock-Based Compensation

The Company accounts for stock-based payment transactions when it receives employee or supplier goods and services in exchange for (a) equity instruments of the enterprise or (b) liabilities that are based on the fair value of the enterprise's equity instruments or that may be settled by the issuance of such equity instruments using a fair-value-based method. The Company uses the Black-Scholes-Merton (BSM) option pricing model to determine the fair value of stock-based awards. The fair value of stock-based payments is recognized over the requisite service period.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 1 - Summary of Significant Accounting Policies (cont.)

Issuance of Stock

The Company issues new shares of stock upon the exercise of stock options, warrants and converted instruments.

Going Concern

The financial statements are prepared on a going concern basis. Management evaluates the ability for the entity to continue as a going concern for at least twelve months from the date the financial statements are issued. In the event management concludes that there is substantial doubt regarding the Company's ability to continue as a going concern, the assumption is emphasized in the financial statement disclosures, including management's plan to mitigate the conditions that cause substantial doubt. If substantial doubt regarding the Company's ability to continue as a going concern is alleviated, the Company provides disclosures regarding the conditions or events that raised substantial doubt, management's evaluation of the significance of those conditions or events and management's plans that alleviated the substantial doubt.

Recent Accounting Pronouncements

In May 2014, the FASB issued ASU 2014-09, "Revenue from Contracts with Customers (Topic 606)". This standard outlines a single comprehensive model for companies to use in accounting for revenue arising from contracts with customers and supersedes most current revenue recognition guidance, including industry-specific guidance. The core principle of the revenue model is that revenue is recognized when a customer obtains control of a good or service. A customer obtains control when it has the ability to direct the use of and obtain the benefits from the good or service. Transfer of control is not the same as transfer of risks and rewards, as it is considered in current guidance. We will also need to apply new guidance to determine whether revenue should be recognized over time or at a point in time. This standard will be effective for the first interim period within annual reporting periods beginning after December 15, 2017, with no early adoption permitted, using either of two methods: (a) retrospective to each prior reporting period presented with the option to elect certain practical expedients as defined within ASU 2014-09; or (b) retrospective with the cumulative effect of initially applying ASU 2014-09 recognized at the date of initial application and providing certain additional disclosures as defined in ASU 2014-09. We have not yet selected a transition method and are currently evaluating the impact of the pending adoption of ASU 2014-09 on the consolidated financial statements.

During February 2016, the FASB issued ASU No. 2016-02, "Leases." ASU No. 2016-02 was issued to increase transparency and comparability among organizations by recognizing all lease transactions (with terms in excess of 12 months) on the balance sheet as a lease liability and a right-of-use asset (as defined). ASU No. 2016-02 is effective for fiscal years beginning after December 15, 2018, including interim periods within those fiscal years, with earlier application permitted. Upon adoption, the lessee will apply the new standard retrospectively to all periods presented or retrospectively using a cumulative effect adjustment in the year of adoption. We are currently assessing the effect that ASU No. 2016-02 will have on its results of operations, financial position and cash flows.

In March 2016, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2016-09, Compensation - Stock Compensation: Improvements to Employee Share-Based Payment Accounting, which changes how companies account for certain aspects of share-based payments to employees. The new guidance requires all income tax effects of awards to be recognized in the income statement when the awards vest or are settled, allows an employer to repurchase more of an employee's shares than previously allowed for tax withholding purposes without triggering liability accounting, allows a company to make a policy election to account for forfeitures as they occur, and eliminates the requirement that excess tax benefits be realized before companies can recognize them. The new guidance also requires excess tax benefits and tax shortfalls to be presented on the cash flow statement as an operating activity rather than as a financing activity, and clarifies that cash paid to a tax authority when shares are withheld to satisfy its statutory income tax withholding obligation are to be presented as a financing activity. The Company adopted the provision ASU 2016-09 effective January 1, 2017. The adoption of the ASU did not have a material effect on its operations, financial position and cash flows.

Subsequent Events

For the year ended December 31, 2017, the Company has evaluated, for potential recognition and disclosure, events that occurred prior to the issuance of the consolidated financial statements for the years ended December 31, 2017 on February 23, 2018.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 2 - Liquidity

The Company has an accumulated deficit and has not generated significant revenues since inception. The Company expects that its expenses will exceed its revenues at least up to, and likely beyond, the point at which the Company is able to generate significant revenues from its approved products. The Company expects to have enough working capital to operate for at least the next twelve months beyond February 23, 2018.

NOTE 3 - Fair Value Measurements

Generally, fair value is determined on the exchange price which would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants. The Company discloses each major asset and liability category measured at fair value on either a recurring or nonrecurring basis and establishes a three tier fair value hierarchy which prioritizes the inputs used in fair value measurements. The three tier hierarchy for inputs used in measuring fair value is as follows:

- > Level 1 Observable inputs such as quoted prices in active markets
- > Level 2 Inputs other than the quoted prices in active markets that are observable either directly or indirectly
- > Level 3 Unobservable inputs in which there is little or no market data, which require the reporting entity to develop its own assumptions

The table below presents the balances of assets and liabilities measured at fair value on a recurring basis:

	Total	Level 1	Level 2	Level 3
As of December 31, 2017:				
Cash and cash equivalents – money market securities	\$ 28,674,801	\$ 28,674,801	\$ -	\$ -
As of December 31, 2016:				
Cash and cash equivalents – money market securities	\$ 3,564,015	\$ 3,564,105	\$ -	\$ -

NOTE 4 - Leases

In March 2013, the Company signed a new lease for an office space in Minnetonka, Minnesota. In March 2014, the Company signed an amendment to the lease for additional square footage. The lease term, as amended expires in March 2018, and contains no extensions or renewal options. The Company is currently negotiating an extended lease provision. The monthly payments ranging from the same amounts \$11,897 to \$11,379 for the lease.

Rent expense was \$91,525 and \$87,100 for the years ended December 31, 2017 and 2016, respectively. Rent is recorded on a straight-line recognition basis and the difference is recorded as an accrued long-term liability.

Under the terms of the lease for office space, the Company paid monthly base rent and was additionally responsible for its pro rata share of estimated operating expenses, which include utilities, taxes, maintenance, repair, and insurance costs. The minimum remaining lease commitments under the terms of the noncancelable building lease for the years ending December 31:

2018	35,692
Total	<u>\$ 35,692</u>

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 5 - Employee Benefits

The Company provides a 401k plan as a benefit to its employees. The Company does not provide any matching payments under the plan for the years ended December 31, 2017 or 2016.

NOTE 6 - Intangible Assets

The Company received a license at inception from its then parent company, VK Pty, to certain intellectual property. That license became inoperative when VK Pty assigned its intellectual property to the Company on June 21, 2007, in advance of preferred stock financing from CM Capital Investments (CMCI). The assignment was done in exchange for issuing 348,098 shares of the Company's common stock to VK Pty, valued at \$.50 per share. As a result of these transactions, during 2007, the Company expensed as research and development the full \$14,600 of the original intangible asset value and an additional \$4,443 of value related to the deferred tax liability assigned to the initial license. The Company capitalized \$174,049 of purchased value and an additional \$52,962 related to the corresponding deferred tax liability as an intangible asset, reflecting the value of the acquired intellectual property.

The intellectual property is expected to have a useful life equal to the life of the underlying patent applications. Such life will extend, on average, 18 years from 2007 to 2025. Amortization is recorded on a straight-line basis beginning at acquisition date, resulting in amortization expense of \$12,496 for both years ended December 31, 2017 and 2016. Amortization expense will approximate \$12,496 in each of the next five years.

NOTE 7 - Income Taxes

Osprey Medical is a C corporation under the U.S. Internal Revenue Code.

The Company incurred income tax expense of \$3,474 and \$580, respectively for the years ended December 31, 2017 and 2016.

As of December 31, 2017, the Company has recorded a valuation allowance to offset its net deferred tax assets due to uncertainty surrounding realization of the net deferred tax assets.

The Company has accumulated net operating losses to be carried forward to future years in the amount of \$73,889,654 applicable to income subject to federal income tax and \$33,090,333 applicable to income subject to state income tax as of December 31, 2017. These state carryforwards begin to expire in 2023. Utilization of these net operating losses to offset future taxable income may be limited.

Income tax expense (benefit) consists of the following:

	Year ended December 31, 2017	Year ended December 31, 2016
Current:		
Federal	\$ -	\$ -
State	3,474	580
Foreign	-	-
	<u>3,474</u>	<u>580</u>
Deferred:		
Federal	5,263,000	(3,879,000)
State	-	-
Foreign	-	-
	<u>5,263,000</u>	<u>(3,879,000)</u>
Deferred tax asset valuation allowance	<u>(5,263,000)</u>	<u>3,879,000</u>
Total provision (benefit)	<u>\$ 3,474</u>	<u>\$ 580</u>

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 7 - Income Taxes (cont.)

Changes in tax laws and rates may affect recorded deferred tax assets and liabilities and our effective tax rate in the future. On December 22, 2017, the U.S. President signed into law the Tax Cuts and Jobs Act (the "Act"), which enacted tax law changes largely effective for tax years beginning after December 31, 2017. The Act reduces the corporate tax rate to 21%, effective January 1, 2018, for all corporations. The Company has revalued its deferred tax assets and liabilities as of December 22, 2017. The deferred tax assets and liabilities are fully offset with a valuation allowance, and therefore the Company did not recognize any income tax expense related to the revaluation.

Income tax expense differs from the amount computed at the statutory federal income tax rate of 34% due principally to nondeductible expenses, different rates for foreign jurisdictions and the recognition of a valuation allowance against the net deferred tax asset.

Significant components of deferred tax assets and liabilities as of December 31 are as follows:

	2017	2016
Deferred tax assets:		
Net operating loss carry forwards	\$ 17,814,000	\$ 22,411,000
Research and development credit	371,000	992,000
Organization costs	1,000	2,000
Accrued vacation	34,000	40,000
Deferred rent	1,000	7,000
Stock-based compensation expense	85,000	128,000
	<u>18,306,000</u>	<u>23,580,000</u>
Deferred tax liability:		
Intangible assets	(45,000)	(56,000)
	<u>(45,000)</u>	<u>(56,000)</u>
Net deferred tax asset	18,261,000	23,524,000
Valuation allowance	(18,261,000)	(23,524,000)
	<u>\$ -</u>	<u>\$ -</u>

The valuation allowance for deferred tax assets changed by \$(5,263,000) and \$3,879,000 for the years ended December 31, 2017 and 2016, respectively.

The Company recognizes the financial statement benefit of a tax position only after determining that the relevant tax authority would more likely than not sustain the position following an audit. For tax positions meeting the more likely than not threshold, the amount recognized in the financial statements is the largest benefit that has a greater than 50% likelihood of being realized upon ultimate settlement with the relevant tax authority.

The Company is not currently under examination by any taxing jurisdiction. In the event of any future tax assessments, the Company has elected to record the income taxes and any related interest and penalties as income tax expense on the Company's statement of operations.

NOTE 8 - Warrants to Purchase Common Stock

The Company had licensed technology from TriCardia in connection with its MVO™ product. That license was executed on December 26, 2006, in exchange for warrants to purchase 160,000 shares of Company common stock at \$0.10 per share. The TriCardia warrants were not exercised and expired on December 26, 2016.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 9 - Common Stock and Preferred Shares

During the year ended December 31, 2017 options exercised resulted in the Company issuing 259,362 shares of common stock for proceeds of \$113,181. During 2016, there were no options exercised. The intrinsic value of the options exercised as of December 31, 2017 was \$67,012.

In August 2017, the Company authorized an additional 450,000,000 shares of common stock resulting in a total amount authorized of 630,000,000.

In August and September 2017, the Company completed a private offering on the Australian Securities Exchange of 27,732,038 shares of common stock at a price to the public of \$0.62 per share. In addition, in September 2017, a pro rata non-renounceable Entitlement Offer was offered to qualified shareholders of record of 12,893,076 shares of common stock at a price to the public of \$0.62 per share. As a result of the total financing, the Company raised approximately \$25,500,000 in gross proceeds, before issuance costs of approximately \$1,200,000.

In August 2016, the Company authorized an additional 100,000,000 shares of common stock resulting in a total amount authorized of 180,000,000. In addition, the Company decreased the number of authorized shares of preferred stock by 12,500,000 to 20,000,000.

In August and September 2016, the Company completed a private offering on the Australian Securities Exchange of 50,000,000 shares of common stock at a price to the public of \$0.42 per share. In addition, in September 2016, a Security Purchase Plan (SPP) was offered to qualified shareholders of record of 1,785,714 shares of common stock at a price to the public of \$0.42 per share. As a result of the total financing, the Company raised approximately \$22,000,000 in gross proceeds, before issuance costs of approximately \$900,000.

As of December 31, 2017 and 2016, respectively, the common shares outstanding were 169,754,103 and 128,869,627. As of December 31, 2017 and 2016 there are no preferred shares outstanding.

NOTE 10 - Weighted Average Shares Calculation

Basic loss per share is computed by dividing net loss by the weighted average shares outstanding during the reporting period. Diluted loss per share is computed similarly to basic loss per share except that the weighted average shares outstanding are increased to include additional shares from the assumed exercise of stock warrants and options, if dilutive. Diluted loss per share does not include any of these dilutive effects in its calculation. The number of additional dilutive shares is calculated by assuming that outstanding stock options were exercised and that the proceeds from the exercise were used to acquire shares of common stock at the average market price during the reporting period.

Shares used in the loss per share computations for the years ended December 31, 2017 and 2016 are as follows:

	2017	2016
Weighted average common shares outstanding – basic	142,497,786	94,345,818
Dilutive effect of stock option and warrants	-	-
Weighted average common shares outstanding – diluted	142,497,786	94,345,818

As of December 31, 2017 and 2016, stock options shares of 11,138,073 and 10,297,435, respectively, were not included as their effect is anti-dilutive due to the loss for the years.

NOTE 11 - Stock-Based Compensation

The Company had a stock incentive plan (the 2006 Plan) that provided for the issuance of incentive and non-qualified stock options to employees and directors, for the purpose of encouraging key officers, directors, employees, and consultants of the Company to remain with the Company and devote their best efforts to the business of the Company. The 2006 Plan expired in 2016, and 7,549,073 shares then outstanding remain available for exercise as of December 31, 2017. On August 29, 2016, the Company's stockholders approved a new stock option plan (the 2016 Plan) with the same directive as the old plan. Under the 2016 Plan, incentive stock options must be granted at exercise prices not less than 100% of the fair value of the Company's stock as of the grant date. If incentive options are granted to persons owning more than 10% of the voting stock of the Company, the Plan provides that the exercise price shall not be less than 110% of the fair value of the Company's stock as of the grant date.

OSPREY MEDICAL, INC. AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

As of and for the Years Ended December 31, 2017 and 2016

NOTE 11 - Stock-Based Compensation (cont.)

These options have exercise and vesting terms established by the Option Committee of the Company's Board of Directors at the time of each grant, but in no event are the options exercisable after ten years from the date of grant. The options granted are subject to time based vesting ranging from immediate vesting to vesting 48 months after the date of grant. The Company has reserved 4,326,400 shares of common stock for issuance under the 2016 Plan, as of December 31, 2017. As of December 31, 2017, options issued under the 2016 plan were 3,589,000.

The following table presents the weighted average assumptions used to estimate the fair values of the stock options granted to employees and nonemployees in the periods presented, using the BSM option pricing formula: The risk free interest rate for periods within the contractual life of the option is based on the U.S. Treasury yield curve in effect at the time of grant. The expected life and expected volatility are based on the average reported lives and volatilities of a representative sample of four comparable companies in our industry sector.

	Year Ended December 31, 2017	Year Ended December 31, 2016
Risk-free interest rate	1.23% - 2.15%	1.24%
Expected volatility	69.67% - 71.80%	75.44%
Expected life (in years)	4.00	4.00
Dividend yield	0.00%	0.00%
Weighted-average estimated fair value of options granted	\$0.29	\$0.30

The following table summarizes the activity for outstanding employee and non-employee stock options:

	Number of Shares	Weighted-Average Exercise Price	Weighted-Average Remaining Contractual Term (Years)	Aggregate Intrinsic Value
Balance as of December 31, 2015	8,351,724	\$0.75	6.5	
Granted	1,972,500	0.53		
Exercised	-	-		
Expired	(26,789)	(0.95)		
Balance as of December 31, 2016	10,297,435	0.71	6.3	
Granted	1,841,500	0.61		
Exercised	(259,362)	(0.44)		
Expired	(741,500)	(0.79)		
Balance as of December 31, 2017	11,138,073	\$ 0.71	6.0	\$ 826,897
Exercisable as of December 31, 2017	8,152,729	\$ 0.75	5.0	\$ 663,003

The aggregate intrinsic value is calculated as approximately the difference between the weighted average exercise price of the underlying awards and the share fair value as of December 31, 2017. The intrinsic value of stock options exercised during the year ended December 31, 2017 was \$67,012.

The Company recognized stock-based compensation expense related to stock options of \$608,973 and \$722,836 for the years ended December 31, 2017 and 2016, respectively. As of December 31, 2017, \$833,485 of total unrecognized compensation cost related to stock options is expected to be recognized over a weighted average period of 1.78 years. To the extent the forfeiture rate is different than anticipated stock-based compensation related to these awards will be different from the Company's expectations.

OSPREY MEDICAL, INC. AND SUBSIDIARY

SHAREHOLDER INFORMATION

Overview

The Company's securities are listed for quotation in the form of CHESS Depositary Interests (CDIs) on the Australian Securities Exchange (ASX) and trade under the symbol "OSP". Each share of common stock (Share) is equivalent to 2 CDIs.

The shareholder information below was applicable as at 21 February 2018.

The Company's corporate Governance Statement approved by the Board on 22 February 2018 is located at: <http://www.ospreymed.com/corp-governance.php>.

The Company's share capital was as follows:

Type of Security	Number of Securities
Total number of issued Shares ⁽¹⁾	169,754,103
Total number of issued CDIs	339,508,206

(1) Includes Shares held by CHESS Depositary Nominees Pty Limited (CDN)

SUBSTANTIAL HOLDERS

The names of substantial holders in the Company and their respective stock holdings (to the best of the Company's knowledge) follow below:

Names of holders as disclosed in substantial holding notices given to the Company	Number of CDIs Held	Percentage of voting power
Brandon Capital Partners and each of the following associated entities: MRCF Pty Ltd atf the MRCF Trust (9,134,673 CDIs), BBF1 Trusco Pty Ltd atf Brandon Biosciences Fund No.1 Trust (4,814,443 CDIs) and BBF1 IIF Partnership, LP (10,842,156 CDIs), AustralianSuper Pty Ltd atf AustralianSuper (24,983,344 CDIs), MRCF3 Services (H) Pty Ltd atf MRCF3 (H) Trust (24,983,344 CDIs), MRCF3 Services (SW) Pty Ltd atf MRCF3 (SW) Trust (8,327,782 CDIs), MRCF3 Services (HP) Pty Ltd atf MRCF3 (HP) Trust (8,327,782 CDIs)	91,413,524	26.9%
CM Capital VT4A Pty Limited as trustee for CM Capital Venture Trust 4A (holding of 17,020,450 CDIs) and its associated entity CM Capital VT4B Pty Limited as trustee for CM Capital Venture Trust 4B (holding of 17,020,449 CDIs)	34,040,899	10.0%
AustralianSuper Pty Ltd as trustee of AustralianSuper	24,983,344	7.4%
Kinetic Investment Partners Pty Ltd	22,114,703	6.5%
JCP Investment Partners Ltd	17,401,322	5.1%

For the purpose of the above table, a "substantial holder" is a security holder, who together with their associates, have a relevant interest (within the meaning of section 608 of the Australian Corporations Act) in securities representing 5% or more of the total number of votes attached to voting shares in the Company.

DISTRIBUTION SCHEDULE

Number of CDIs	Number of Holders
1 -1,000	132
1,001 – 5,000	826
5,001 – 10,000	317
10,001 – 100,000	697
100,001 and over	205
Total	2,177

OSPREY MEDICAL, INC. AND SUBSIDIARY

Unmarketable Parcels

Based on the market price on 21 February 2018, there were 299 shareholders holding less than a marketable parcel (i.e. a parcel of securities of less than \$500).

Osprey Medical Top 20 Holders

Set out below is a schedule of the 20 largest holders of securities in the Company, including the number and percentage of securities held by those holders as at 21 February 2018. [Related but separate legal entities are not aggregated for the purposes of the table below.]

	Name of Registered Holder	No. of CDIs Held	% of Total CDIs
1.	J P MORGAN NOMINEES AUSTRALIA LIMITED	47,234,465	13.91
2.	MRCF3 SERVICES (H) PTY LTD	24,983,344	7.36
3.	MORGAN STANLEY AUSTRALIA SECURITIES (NOMINEE) PTY LIMITED <NO 1 ACCOUNT>	20,688,236	6.09
4.	HSBC CUSTODY NOMINEES (AUSTRALIA) LIMITED	19,870,722	5.85
5.	CM CAPITAL VT 4A PTY LTD <CM CAPITAL VENTURE 4A A/C>	17,020,450	5.01
6.	CM CAPITAL VT 4B PTY LTD <CM CAPITAL VENTURE 4B A/C>	17,020,449	5.01
7.	CITICORP NOMINEES PTY LIMITED	14,509,088	4.27
8.	BBF1 IIF PARTNERSHIP LP	10,842,156	3.19
9.	BNP PARIBAS NOMINEES PTY LTD <AGENCY LENDING DRP A/C>	9,294,314	2.74
10.	MRCF PTY LTD	9,134,673	2.69
11.	MRCF3 SERVICES (SW) PTY LTD	8,327,782	2.45
12.	MRCF3 SERVICES (HP) PTY LTD	8,327,782	2.45
13.	NATIONAL NOMINEES LIMITED	7,581,940	2.23
14.	SANDHURST TRUSTEES LTD <ENDEAVOR ASSET MGMT MDA A/C>	7,009,115	2.06
15.	HSBC CUSTODY NOMINEES (AUSTRALIA) LIMITED - A/C 2	5,873,808	1.73
16.	BBF1 TRUSCO PTY LTD <BRANDON BIOSCIENCES FUND NO.1>	4,814,443	1.42
17.	MOORE FAMILY NOMINEE PTY LTD MOORE FAMILY SUPER FUND>	3,200,053	0.94
18.	UBS NOMINEES PTY LTD	2,954,758	0.87
19.	BENTALE PTY LTD <ALLAMBI ROAD FAMILY A/C>	2,938,572	0.87
20.	DIXSON TRUST PTY LIMITED	2,707,455	0.80
Total CDIs held by top 20 CDI Holders		244,333,605	71.97
Total CDIs held by all other CDI Holders		95,174,601	28.03
Total CDIs		339,508,206	100.00

Options (not listed on ASX)

As at 21 February 2018, there were 11,138,073 options on issue to purchase shares of common stock (equivalent to 22,276,146 CDIs) under the Company's 2016 Stock Incentive Plan.

The following table is a distribution schedule of the number of holders of Options as at 23 February 2017:

Category	Number of Holders
1 -1,000	3
1,001 – 5,000	6
5,001 – 10,000	16
10,001 – 100,000	14
100,001 and over	13
Total	52

OSPREY MEDICAL, INC. AND SUBSIDIARY

Restricted Securities

There were no ASX restricted securities or securities subject to voluntary escrow as at 21 February 2018.

Voting Rights

Every holder of Shares present in person or by proxy is entitled to one vote for each Share held on the record date for the meeting on all matters submitted to a vote of Shareholders.

CDI holders may attend and vote at the Company's general meetings. The Company must allow CDI holders to attend any meeting of Shareholders unless relevant US law at the time of the meeting prevents CDI holders from attending those meetings.

In order to vote at such meetings, CDI holders may:

- (a) instruct CDN, as the legal owner, to vote the Shares underlying their CDIs in a particular manner. A voting instruction form will be sent to CDI holders with the notice of meeting or proxy statement for the meeting and this must be completed and returned to the Registry before the meeting;
- (b) inform Osprey that they wish to nominate themselves or another person to be appointed as CDN's proxy for the purposes of attending and voting at the general meeting; or
- (c) convert their CDIs into a holding of Shares and vote these at the meeting. Afterwards, if the former CDI Holder wishes to sell their investment on the ASX it would need to convert the Shares back to CDIs. In order to vote in person, the conversion from CDIs to Shares must be completed before the record date for the meeting.

One of the above steps must be undertaken before CDI holders can vote at Shareholder meetings.

Proxy forms, CDI voting instruction forms and details of these alternatives will be included in each notice of meeting or proxy statement sent to CDI holders by the Company.

Holders of issued but unexercised options are not entitled to vote.

Required Statements

- (a) There is no current on-market buy-back of the Company's securities.
- (b) The Company is incorporated in the state of Delaware in the United States of America.
- (c) The Company is not subject to Chapters 6, 6A, 6B and 6C of the Corporations Act 2001 (Cth) dealing with the acquisition of shares (ie, substantial holdings and takeovers).
- (d) The Company's securities are not quoted on any exchange other than the ASX.
- (e) Under the Delaware General Corporation Law, shares are generally freely transferable subject to restrictions imposed by US federal or state securities laws, by the Company's certificate of incorporation or by-laws, or by an agreement signed with the holders of the shares at issue. The Company's amended and restated certificate of incorporation and by-laws do not impose any specific restrictions on transfer.
- (f) The name of the Australian Secretary is Brendan Case.
- (g) The address and telephone number of our principal registered office in Australia is:
Level 13,
41 Exhibition Street
Melbourne, Victoria 3000
+ 61 410 442 393
- (h) Register of securities
Link Market Services
Level 1, 333 Collins Street
Melbourne, Victoria 3000
Telephone: + 61 3 9615 9800
Facsimile: + 61 2 9287 0303
www.linkmarketservices.com.au

CORPORATE DIRECTORY

Board of Directors and Australian Secretary Mr John Erb, Non-executive Chairman Mrs. Sandra Lesenfants, Non-executive Director Mr Mike McCormick, President & CEO Mr Andrew Jane, Non-executive Director Mr Neville Mitchell, Non-executive Director Dr Christopher Nave, Non-executive Director Mr Brendan Case, Australian Secretary	Executive Team Mr Mike McCormick, President & CEO Mr William Butcher, VP of Sales Mr Vic Fabano, VP Operations & Quality Ms Melanie Hess, VP of Regulatory Affairs Mr Rod Houfburg, VP Research & Development Ms Kim Knish, VP Clinical Affairs Ms Nancy Ness, VP Finance Mr Doug Schoenberg, VP Marketing & Reimbursement
Company – US Office & Headquarters 5600 Rowland Drive, Suite 250 Minnetonka, MN 55343 United States of America +1 952 955 8230	Company - Registered Office in Australia Level 13, 41 Exhibition Street Melbourne, Victoria 3000 + 61 410 442 393
Auditor Baker Tilly Virchow Krause, LLP 225 S Sixth Street, Ste 2300 Minneapolis, Minnesota 55402-4661 USA Telephone: + 1 612 876 4500 Facsimile: +1 612 238 8900 www.bakertilly.com	Share Registry Link Market Services Level 1, 333 Collins Street Melbourne, Victoria 3000 Australia Telephone: + 61 3 9615 9800 Facsimile: + 61 2 9287 0303 www.linkmarketservices.com.au
Investor Relations Ms Rebecca Wilson Buchan Consulting T: (613) 9866 4722 Doug Schoenberg VP of Marketing, Education & Reimbursement T: (952) 955 8234 M: (763) 258 7537	Annual Meeting of Stockholders Date & Place The Annual Meeting of stockholders will be held at <i>Johnson Winter & Slattery's</i> Melbourne office, Level 34, 55 Collins Street, Melbourne, Victoria, Australia on Thursday, 10 May 2018 at 9.00am Australian Eastern Standard Time, (Wednesday, 9 May 2018 at 6.00pm U.S. Central Time).
ASX Code OSP	



www.ospreymed.com

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