

BECAUSE WE DON'T BELIEVE THE FUTURE CAN WAIT FOR THE FUTURE

CARMAT INTRODUCTION March 5th, Nassau





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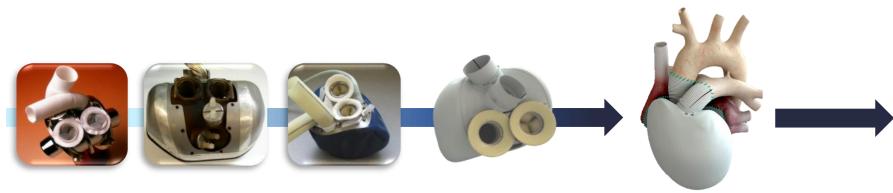
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Key milestones

- **15 years of R&D** (Airbus Group, Prof. Alain Carpentier)
- **2008:** foundation of CARMAT
- 2010: IPO on Euronext Growth (previously known as Alternext)
- **2013:** first successful human implantation
- **2014 2016:** proof-of-concept in the feasibility study
- **2016:** start of the PIVOTAL study
- **2017:** international expansion of the PIVOTAL study
- 2018: opening of the Bois-d'Arcy facility and approximately 180 employees







Vision

Carmat Total Artificial Heart (TAH) will become the primary alternative to Heart Transplants

Mission

With **innovative and convenient** technologies, Carmat aims to **save lives and improve the quality of life** of patients with advanced heart failure, thus meeting a **huge unmet need**



Senior Management



Stéphane Piat *Chief Executive Officer*

- Over 20-year experience in the medical device business
- Previously Divisional Vice PresidentGlobal Market Development at Abbott
- > Johnson & Johnson Cordis (2002-2007)



Pascale D'Arbonneau CFO, IT

- > Over 25-year experience in Finance
- Previously CFO and Head of EIBV (family office)
- Several VP positions at GSK in Finance, Compliance and Control Integration



Piet Jansen *Chief Medical Officer*

- Solid clinical background in cardiology sector, notably in Mechanical Circulatory Support devices
- Former Medical Director at WorldHeart, Clinical Affairs Manager at Jarvik Heart



Wenzel Hurtak Director of Manufacturing

- Solid RnD and Manufacturing background in cardiology sector
- Former Director at JnJ / Cordis, VP Operations at Integra Lifesciences
- Previously Head of New products Division at CMI



Marc Grimmé Director of RnD

 In charge of technical operations of the CARMAT program since 1996



Thierry Dupoux Sr Director of QA

 Solid QA / RA and RnD background in cardiology sector, notably in CRM and Surgery

Previously WW Vice-President of QA at

LivaNova



Committed board of directors





Jean-Pierre Garnier, Chairman

Former Chairman of Actelion (2011-2017) Former CEO of GSK (2000-2008), Officier de la Légion d'Honneur & Knight Commander of the Order of the British Empire Graduated from the Louis Pasteur University in Strasbourg (PhD in pharmacology) MBA from Stanford University



Mme. Anne-Pascale Guédon, Airbus Group representative

More than 25 years of international experience in investment and in Mergers & Acquisitions within French companies (Bouygues, Loxam, Crédit Agricole) and international companies (GE Capital in London and Man Group in Hong Kong). Auditor of the 64th national session of the IHEDN (National Institute for Defense Studies)

Colonel in the French Air Force reserve force. Graduated from HEC and SFAF (the French society of financial analysts)







Henri Lachmann, Chairman of the Supervisory Board of Schneider Electric

Chairman of the Board of Directors of the Centre chirurgical Marie Lannelongue Many Leadership positions in other companies Officier de la Légion d'Honneur Officier des Palmes Académiques Commandeur dans l'Ordre National du Mérite Degree from Ecole des Hautes Etudes Commerciales (HEC), CPA

Jean Luc Lemercier, Vice-President Transcatheter Heart Valve EMEA at Edwards Lifesciences

Over 20 years of experience and acknowledged leadership in the medical device industry. He has held a number of strategic positions in cardiology companies, notably at Johnson & Johnson Cordis (1996-2008), and lately at EW where he created and headed the Structural Heart Disease division devoted to the development and marketing of aortic valve replacement solutions. Graduated in Pharma.

Complementary expertise:

Medical, financial, industrial and commercial











Professor Alain Carpentier, Founder and President of the Scientific Committee

Emeritus Professor - Pierre-et-Marie-Curie University, Paris Professor at the Mount Sinai School of Medicine, New York Founder and Director of the Heart Transplant and Prostheses Laboratory, Paris University Winner of the Foundation for Medical Research Prize (1998) Former President of the French Academy of Science (2011-2012) Albert Lasker Award for Clinical Medical Research for the invention of valvular bioprostheses (Carpentier-Edwards valves)

Dr Philippe Pouletty, Co-Founder and General Partner of Truffle Capital

Former Chairman of France Biotech and former VP of Europabio Founder of 3 biotech companies in the US and Europe, two of which are listed on the stock market (NASDAQ and TSE) Doctor in medicine, immunologist, former researcher at the University of Stanford, former Paris Public Hospitals group intern, 2 majors from the Pasteur Institute (immunology) - 29 patents *Chevalier de la Légion d'Honneur*, winner of the American Liver Foundation Prize in 1999

Dr Antonino Ligresti, Director of Abivax

Former Chairman and core shareholder of Générale de Santé, acquired by Ramsay group in 2014.

Graduate of Medicine and Surgery at the University of Catania Specialization in Cardiology and Internal Medicine (Universities of Siena and Parma) Founder of private hospital group Gruppo Antonino Ligresti Sanita in 1986

Dr. Michael Mack, Director of Cardiovascular Research at the Heart Hospital Baylor Plano (Texas)

A globally-reputed American cardiothoracic surgeon, particularly in the emerging field of transcatheter aortic valves and Mitral devices.

Author of more than 250 scientific publications, a member of the Editorial Board of the Annals of Thoracic Surgery and a scientific reviewer for over 10 other medical journals.

President of the TSFRE (Thoracic Surgery Foundation for Research and Education) and the STSA (Southern Thoracic Surgical Association) and the Second Vice-President of the STS (Society of Thoracic Surgeons).

Graduated of Boston College (Massachusetts), St. Louis University (Missouri) and the University of Texas Southwestern Medical School in Dallas (Texas).

Pierre Bastid, Babalia representative

Pierre Bastid has spent more than 25 years in senior executive positions at major international business groups such as Schlumberger, Schneider Electric, Valeo and Thomson. Former President and CEO of Converteam Group, acquired from Alstom, he developed and sold to General Electric after the value increased by 30. His fund ZAKA has especially invested in several biotechnology companies including Carmat and CElects of which he is Board member.









A groundbreaking innovation: the physiological artificial heart



The Only Bio-prosthetic self-regulated Artificial Heart

When Medical meets Aerospace



 Professor Alain CARPENTIER: international leadership in biomaterials and pericardial valves

To fulfill an unmet need

>100,000 patients in need...but only 5 000 transplants each year



- Airbus Group (formerly EADS MATRA): aerospace know-how of complex embedded systems
- No alternative therapeutic solution: 60%-94% dies within 1 year.

Providing a unique solution



- A **physiological** artificial heart offering a real alternative to heart transplantation
- An implantation technique easily **reproducible** by any transplant surgeon
- A return to a full life for otherwise dying patients



1-4 Please refer to page 27 for references

CARMAT the most advanced BIVAD company



Large Market Opportunity with Few Treatment Options

- Over 100,000 patients in irreversible conditions at risk of death within weeks
- First Bioprosthetic Physiological Replacement Heart
 - Credible therapeutic and economic alternative to transplant with over 5 years of cumulated support achieved

Clear Market-Access Strategy

- CE mark trial under way
- Clear FDA strategy
- KOL advocacy
- Address VAD, BTT and DT

Short-term Value Creating Milestones

- Completion pivotal study in 2019
- US EFS approval in 2019









Large market opportunity



Advanced Heart Failure

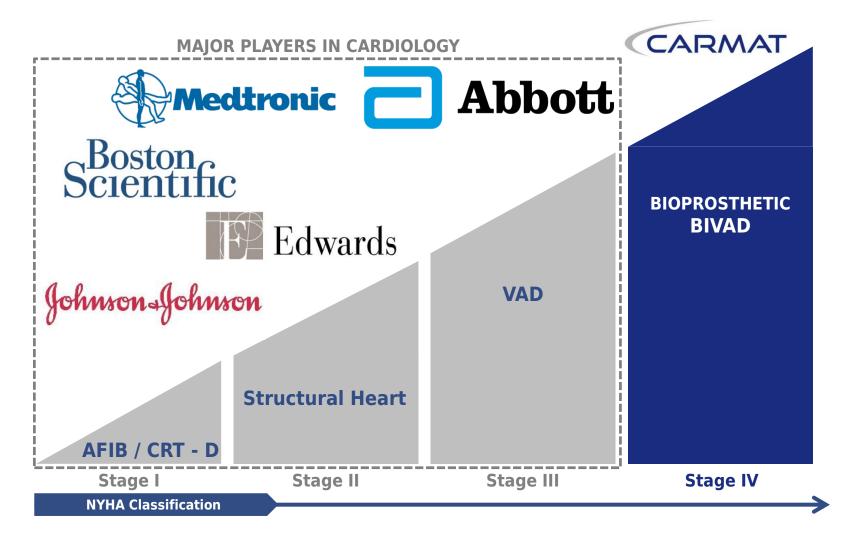
5,000 heart transplants a year

Only covering 3% of the total need

Between 60 and 94% death rate within a year



CARMAT's technology addresses the untapped BIVAD segment





Severe Unmet Need with Few Treatment Options



SYNCARDIA

NYHA Class	INTERMACS Patient Profiles	Time to intervene	Prevalence ⁷				
IV	1 – Critical cardiogenic shock	Hours	14%	Total			
	2 – Progressive decline	Days	41%	Artificial			
	3 - Stable, inotrope dependent	Weeks	28%	Heart			
	4 – Resting symptoms	Months	12%	VAD	THORATEC® HEARTWARE®	HEARTWARE®	
	5 – Exertion intolerant		5%			N CHANK	
	6 – Exertion limited						
III	7 – Advanced NYHA Class III						
						THE SECOND	

Few treatments available with mixed outcomes









The world's only bioprosthetic self-regulated artificial heart

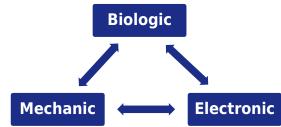


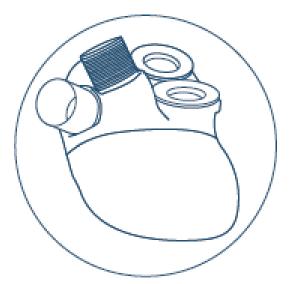
CARMAT's Solution

KEY FEATURES

- First auto-regulated, sensor-based Total Artificial Heart
- Highly bio-compatible pump
- High level of patient convenience







An innovative leading position with strong intellectual property and significant barriers to entry thanks to Prof. Carpentier's scientific leadership and the technological excellence of Airbus Group

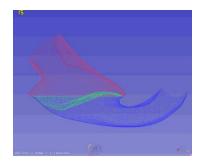


Mechanism of the pump



Overall principle :

- Volumetric pumps move the silicone oil within the bag in order to activate the hybrid membranes allowing the blood to enter and leave the chambers



Mode of operation :

1 - Blood flow assessment :

In-flow pressure measured by sensors every millisecond to calculate flow required

2 - Flow auto-regulation :

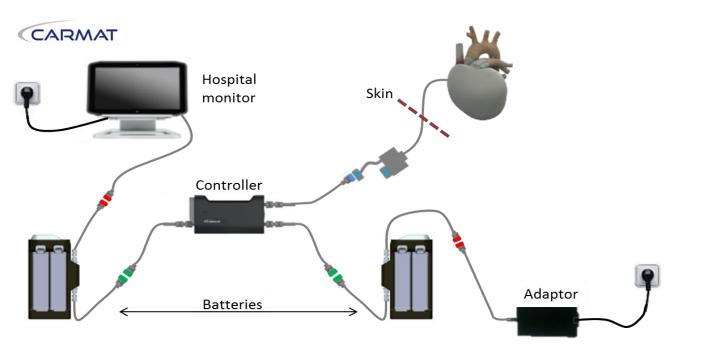
Speed and direction of rotation of volumetric pumps adapted every 2 milliseconds to deliver the necessary pulsatile flow

3 - Flow Control :

Position of the membranes checked by 2 ultrasound sensors every 2 milliseconds to ensure the amount of blood delivered by the pump is optimal



Portable system significantly increases patient convenience and autonomy







Wearable System

- Controller/monitor + 2x2 batteries
- Total weight 3 kg
- Rechargeable battery providing up to four hours of autonomy





	CARMAT	VADs	ТАН
Activation	Hydraulic	Pumps	Pneumatic
Biocompatibility	High	Low	Low
Autoregulated	Yes	No	No

A unique technology to overcome :

- Hemolysis
- GI Bleeding
- Thrombosis
- Right Heart Failure

The European Registry for Patients with Mechanical Circulatory Support (EUROMACS) of the European Association for Cardio-Thoracic Surgery (EACTS): second report

Theo M.M.H. de By^{a,*t}, Paul Mohacsi^{b,*t}, Brigitta Gahl^b, Armin Zittermann^c, Thomas Krabatsch^d, Finn Gustafsson^e, Pascal Leprince^f, Bart Meyns^g, Ivan Netuka^h, Kadir Caliskanⁱ, Evaristo Castedo^j, Francesco Musumeci^k, André Vincentelli^l, Roland Hetzer^m and Jan Gummert^c, on behalf of the EUROMACS members

RESULTS: Fifty-two hospitals participated in the registry. This report is based on 2947 registered implants in 2681 patients. Survival of adult patients (>17 years of age) with continuous-flow left ventricular assist devices with a mean follow-up of 391 days was 69% (95% confidence interval 66–71%) 1 year after implantation. On average, patients were observed for 12 months (median 7 months, range 0–70 months). When we investigated for adverse events, we found an overall event rate per 100 patient-months of 3.56 for device malfunction, 6.45 for major bleeding, 6.18 for major infection and 3.03 for neurological events within the first 3 months after implantation.









Clinical development



Ongoing PIVOTAL study

- Enrollment completed for the first part of the study
- First patient of the second part of the study enrolled
- Enrollment objective: 20 patients
- Primary endpoint of the study: 6 months survival



Results from the first cohort of the PIVOTAL study



- 6-month survival rate among the first 10 patients: 70%
- Improvement expected with the second patient cohort as a result of the experience gained

	6-month survival rate
CARMAT FIM	50%
CARMAT PIVOTAL (part 1)	70%
SynCardia*	54% - 62%
BIVAD**	46% - 68%
- LVAD***	90% - 92%

* Kirklin JK et al., J Heart Lung Transplant 2018;37:685-691. Arabia F et al., J Heart Lung Transplant, 2018;37:1304–1312
** Lavee J et al., J Heart Lung Transplant 2018;37:1399–1402. Arabia F et al., Ann Thorac Surg 2018;105:548–56
*** Strueber M et al. J Am Coll Cardiol 2011;57:1375–82. Netuka I et al., J Am Coll Cardiol 2015;66:2579–89



Confirmation of the FIM study results

• Positive 6-month safety profile in 10 patients compared to other therapies

Adverse events	Stroke	Bleeding - surgical repair	Gastrointestinal bleeding	Infection linked to percutaneous cable
CARMAT FIM	0%	75%	0%	0%
CARMAT PIVOTAL (part 1)	0%	40%	0%	0%
SynCardia*	23%	41%	20%	22%
BIVAD**	7%	n/a	7%	7%
LVAD***	8%	14%	8%	10%

* Arabia F et al., J Heart Lung Transplant, 2018;37:1304–1312. Demondion P et al., Eur J Cardiothorac Surg. 2013 Nov;44(5):843-8.

** Lavee J et al., J Heart Lung Transplant 2018;37:1399-1402.

*** Netuka I et al., J Am Coll Cardiol 2015;66:2579-89

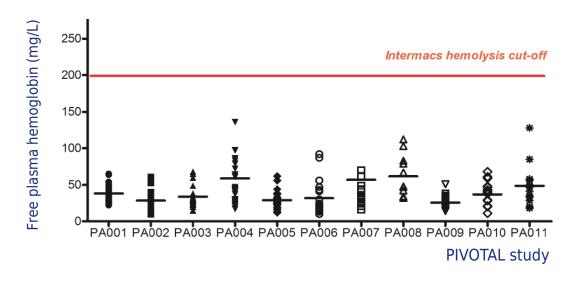


No hemolysis



- Factors causing hemolysis (red blood cell rupture) negligible for CARMAT
- Hemolysis markers (free plasma hemoglobin) ↓↓ in all patients

Factor causing hemolysis is present	LVAD	SynCardia	CARMAT
Shear stress	++	+++	-
Synthetic material	+++	+++	+



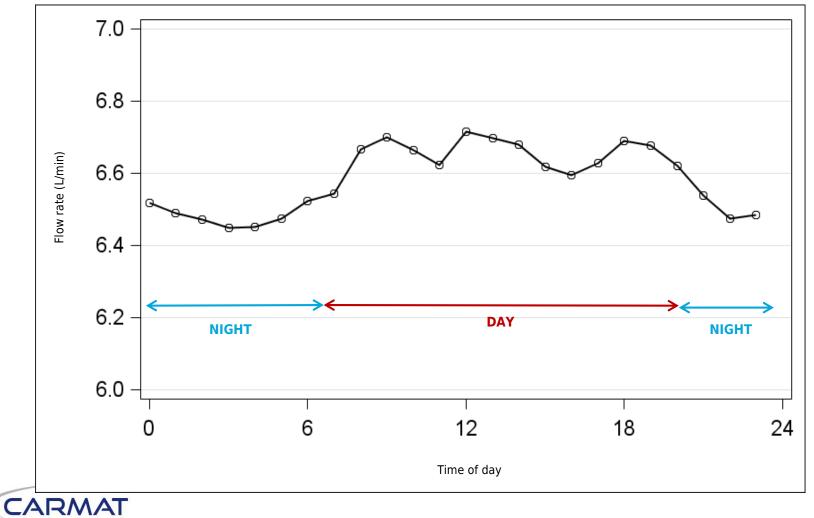


The prosthesis continues to work as a human heart



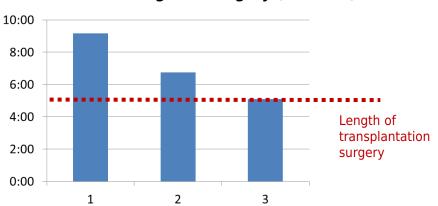
Circadian cycle

over 10 months of support



Optimization of the surgical experience

- 100% success rate for the procedure
- Length of surgery shortened with the benefit of experience



Evolution in length of surgery (in hours)

- Heart transplantation is possible following the CARMAT implantation: 3/3 successfully completed
- Pre-graft waiting times with CARMAT: between 109 and 243 days
- No tissue adhesion around the CARMAT prosthesis



Improvement in the quality of life

The device offers major improvements to the patient quality of life:

- Greater mobility
- Regained independence
- Autonomy comparable to LVAD





Post-transplantation effort

Post-transplantation consultation





Conclusion





Results better than in the FIM feasibility study

Validation of study objectives

Clinical study in progress, encouraging results waiting for the completion of the second cohort



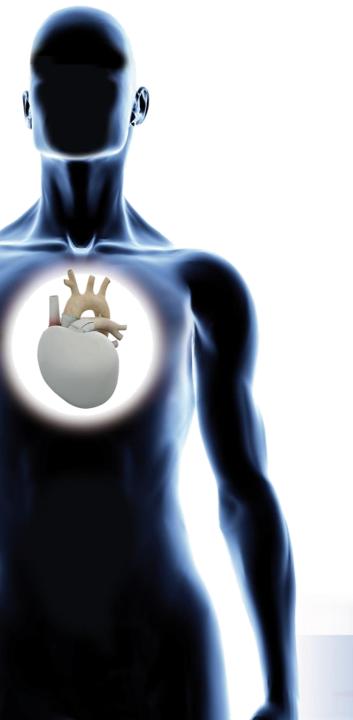
CARMAT - a clear path for success Fully embedde d TAH **US Launch Pivotal study Promising technology EU Launch** with a solid concept: initiated Addresses both ventricles **CE mark within reach** Hemocompatibility Autoregulation Feasibility study successfully achieved 2008 2016 2018 2020



CARMAT, a company built to become a leader in its field

- Technological breakthrough, unprecedented worldwide: first bioprosthetic heart based on physiological functions
- Credible solution to the problems associated with terminal biventricular heart failure, a condition steadily becoming more and more prevalent
- Significant clinical and technical progress to submit the CE marking application in early 2020
- Support from first-class industrial and financial partners, as well as leading players in cardiology
- Acceleration in its transformation towards an industrial and commercial company, to become a leader in its field







Thank you !