






Personalized cancer vaccine (PCV) (mRNA-4157)

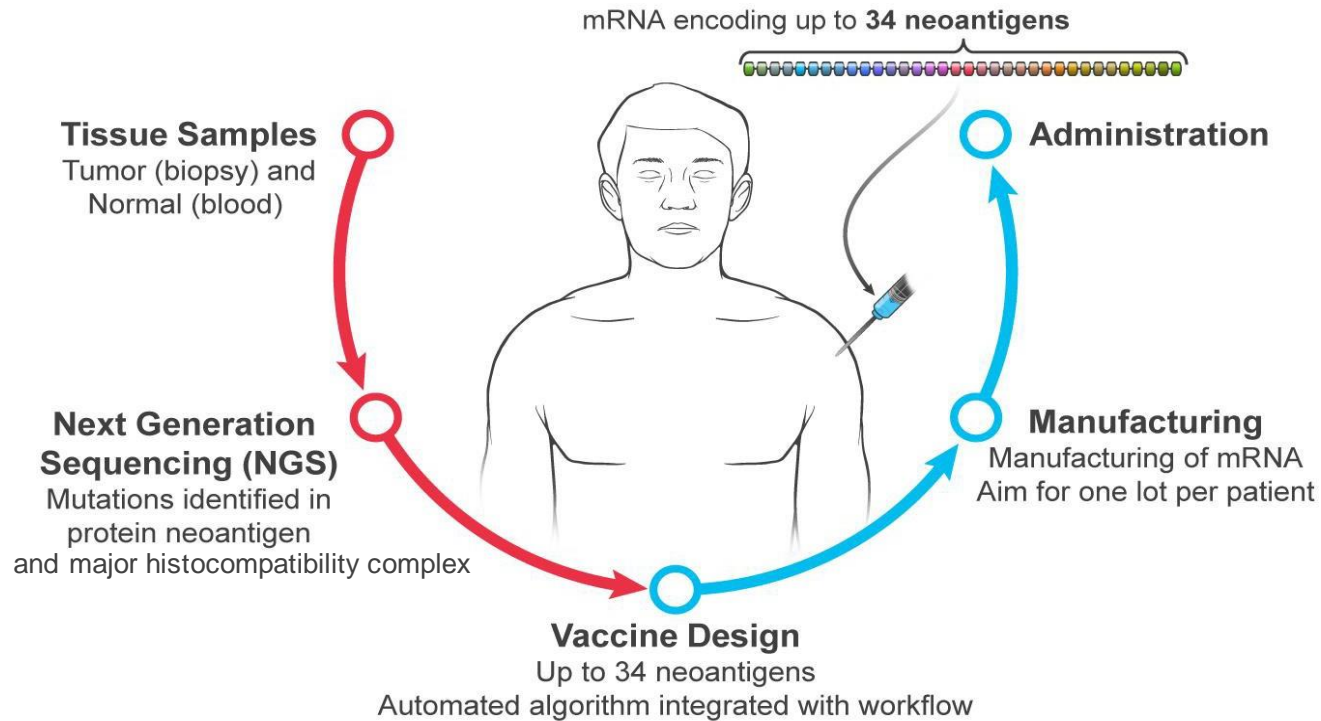
Last program update: October 29, 2020

Modality	ID #	Program Indication		Preclinical development	Phase 1	Phase 2	Phase 3 and commercial	Moderna rights
 Cancer vaccines	mRNA-4157	Personalized cancer Vaccine (PCV)						50-50 global profit sharing with Merck
	mRNA-5671/ Merck V941	KRAS vaccine, CRC, NSCLC, pancreatic cancer						50-50 global profit sharing with Merck

PCV (mRNA-4157) Phase 1 and Phase 2 studies ongoing

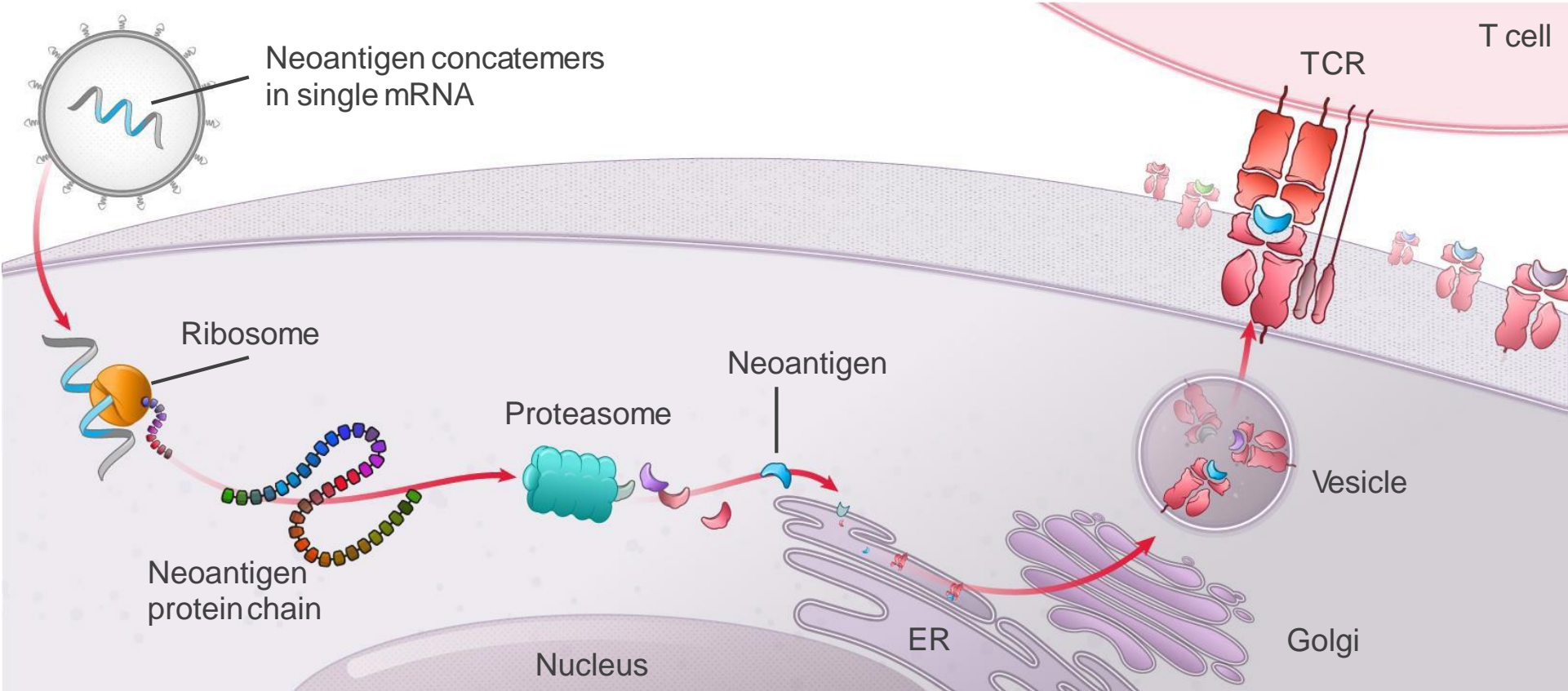
Personalized cancer vaccine (mRNA-4157)

Designed to target an individual patient's unique tumor mutations



- First patient dosed in November 2017
- Partnered with Merck (Keytruda combo)
- Vaccine process change implemented to increase number of neoantigens included in each vaccine to a maximum of 34

Moderna's mRNA vaccines elicit T cells required for curative cancer therapy

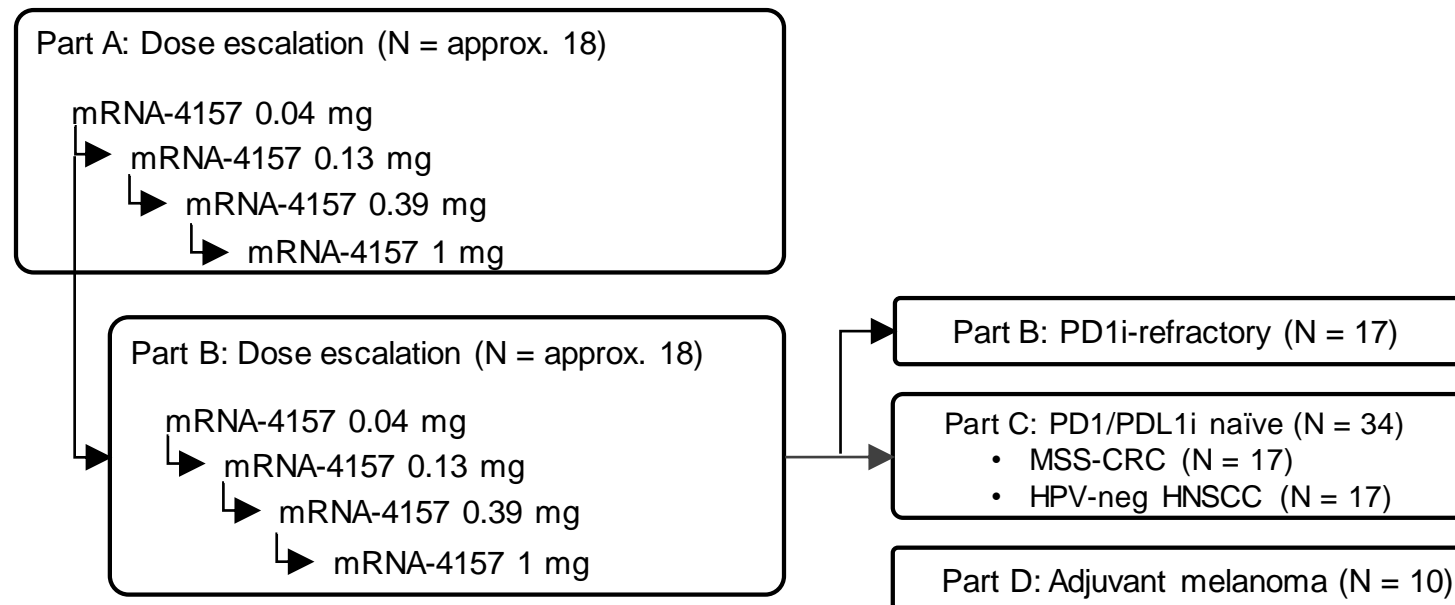


Personalized cancer vaccine (mRNA-4157)

Phase 1 study ongoing

Key Objectives

- Part A — To assess the safety and tolerability of mRNA-4157 monotherapy in subjects with resected solid tumors, including an apheresis cohort
- Parts B, C and D — To assess the safety, tolerability, and recommended Phase 2 dose of mRNA-4157 administered in combination with pembrolizumab
- Part D — To assess the immunogenicity of mRNA-4157 with pembrolizumab from apheresis samples in certain subjects

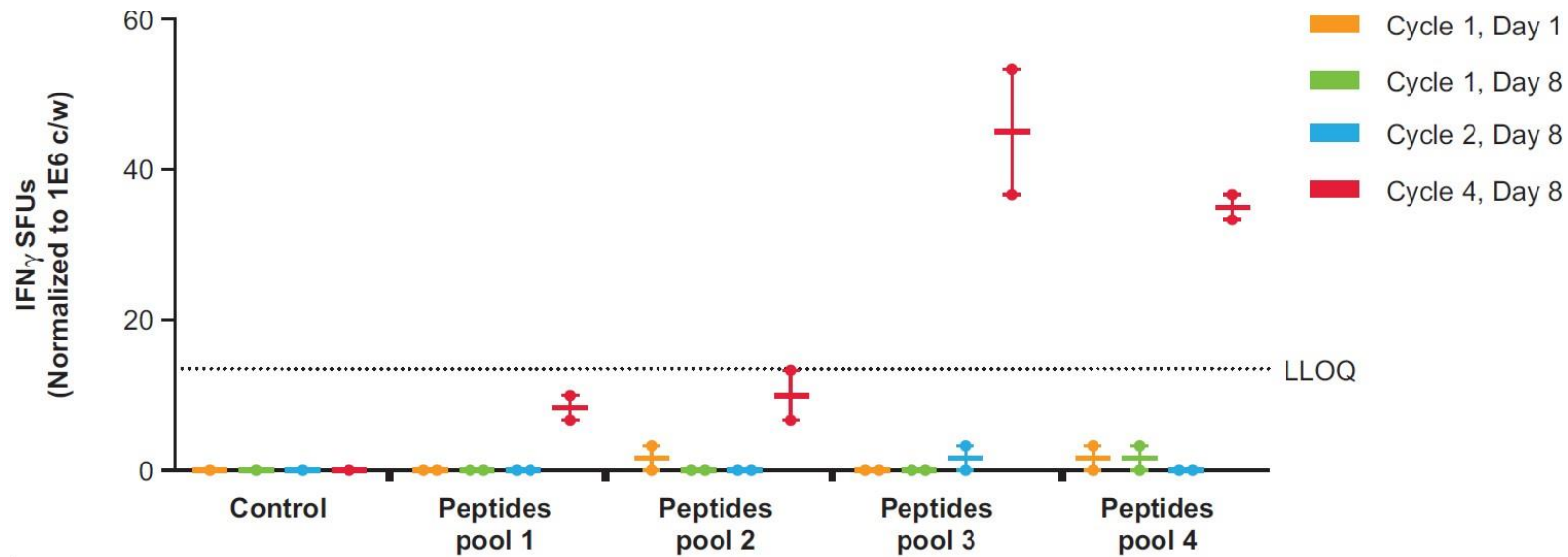


Personalized cancer vaccine (mRNA-4157)

Early Phase 1 data shows antigen-specific Tcell response

Melanoma
Part A (mRNA-4157 monotherapy)
0.13 mg dose

First patient with melanoma treated at the 0.13 mg dose level has shown an induction of mutation-specific T cells after the 4th cycle (week 12), as measured by ELISPOT assay



Data as of November 9, 2018

Personalized cancer vaccine (mRNA-4157)

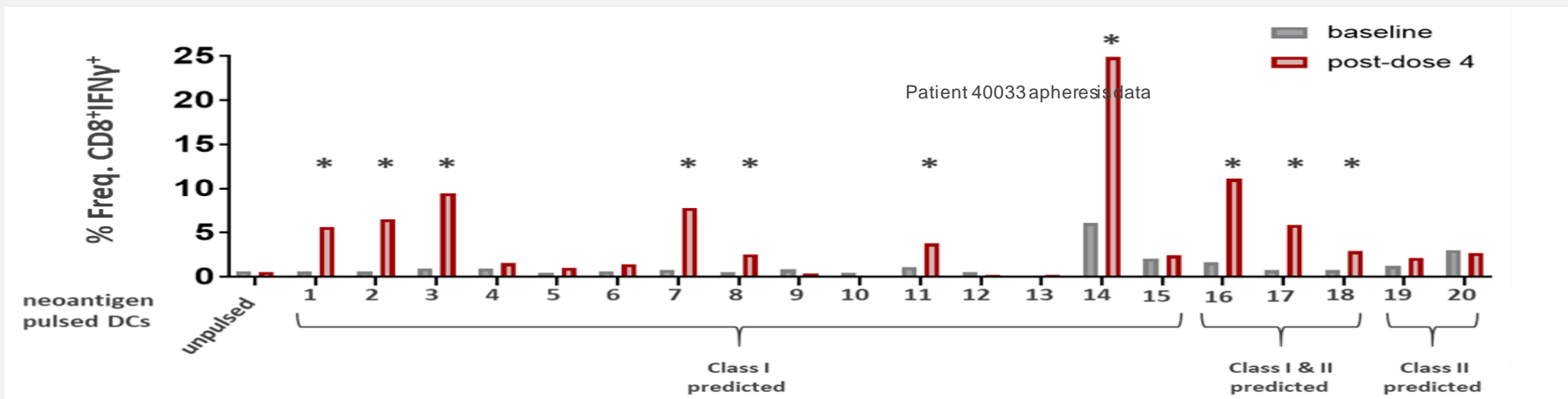
Phase 1 human data for PCV

Clinical & regulatory update

- Enrolling patients in Phase 1 safety, tolerability and immunogenicity trial monotherapy and in combination with pembrolizumab
- Interim safety, tolerability immunogenicity data presented at ASCO 2019¹

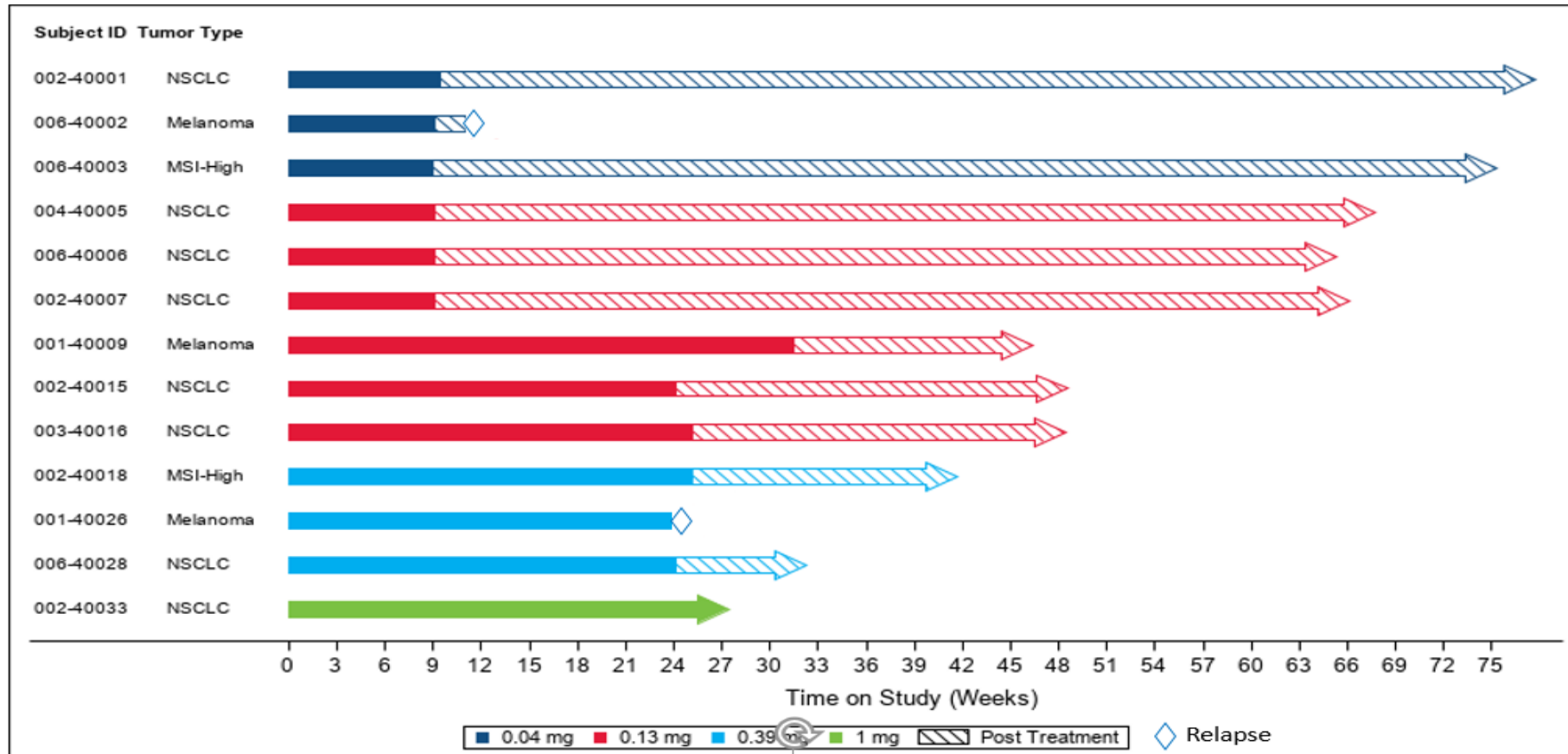
Representative clinical data

- **Safety:** mRNA-4157 is well tolerated at all dose levels studied with no DLTs reported. No mRNA-4157 related grade 3/4 AE or SAE was reported. The most common grade 2 adverse events were fatigue, soreness at the injection site, colitis and myalgias.
- **Activity:** Neoantigen specific CD8 T-cell responses were detected in 10 out of 18 class I neoantigens in patient 40033, the first patient dosed at 1 mg who underwent apheresis. 100% of positive CD8 T-cell responses post vaccination were to neoantigens with a high predicted binding affinity of <500 nm



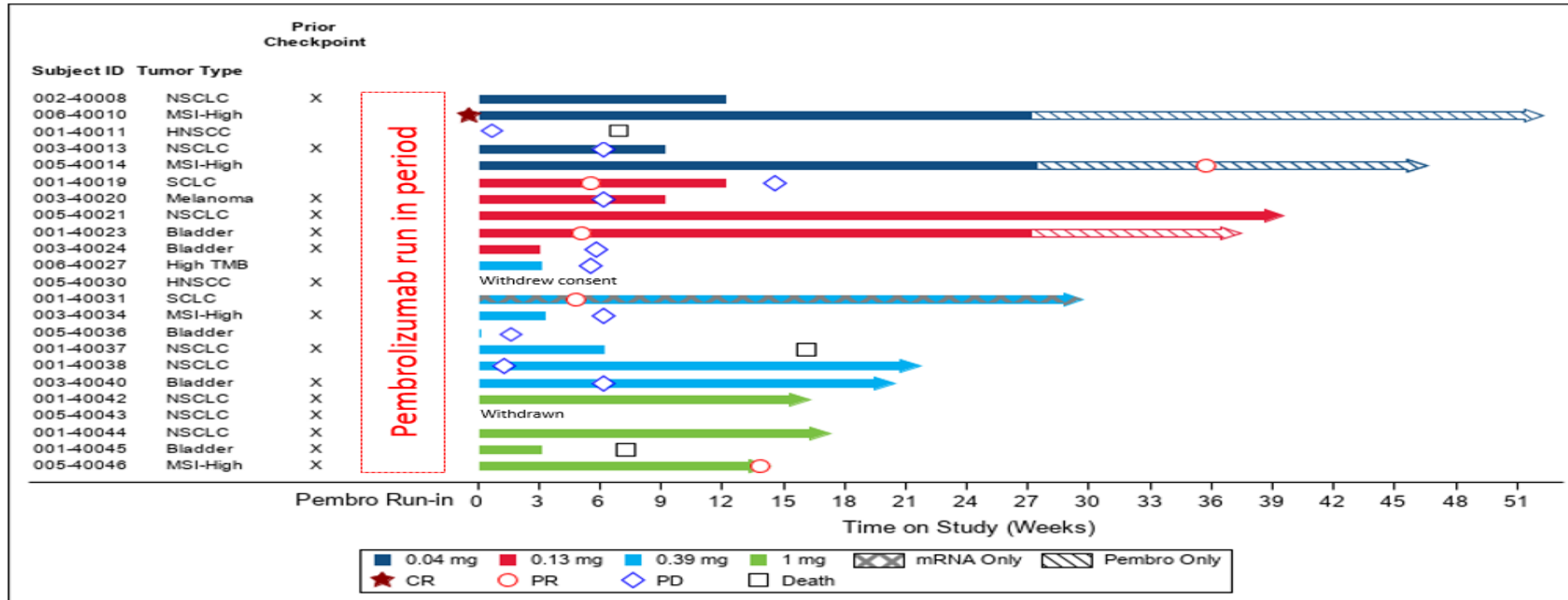
- **Early clinical:** Clinical responses have been seen in 6 out of 20 patients treated with mRNA-4157/pembrolizumab combination. Of these 6 patients, 2 responses have been seen in patients previously treated with PD-(L)1 inhibitor.

Part A: Adjuvant patients receiving mRNA-4157 monotherapy



- 13 adjuvant patients have been treated with mRNA-4157
- 13 patients have completed full course of vaccination per protocol
- 11 patients remain disease free up to 72 weeks on study

Part B: Metastatic patients receiving mRNA-4157/pembrolizumab combination



- 20 out of 23 advanced/metastatic patients have been treated with mRNA-4157/pembrolizumab combination
- 1 patient with MSI-High CRC had a CR on pembrolizumab monotherapy prior to vaccination
- 5 patients had a PR including 2 patients who have progressed with prior checkpoint inhibitor therapy, patient 40031 received 1 dose of pembrolizumab and continued with monotherapy mRNA-4157
- 7 patients had stable disease
- 10 patients remain on study treatment as of 10-May-2019, includes patient 40038 deemed a pseudoprogressor and patient 40040 who had a new lesion which improved at subsequent follow-up. Both patients remain on study
- Clinical responses seen across all doses

Best overall responses

Responses in patients receiving combination	Total (N=20)
Best Overall Response	
Complete Response (CR)	1
Partial Response (PR)	5
Stable Disease (SD)	6
Progressive Disease (PD)	8

Data cutoff as of May 10, 2019

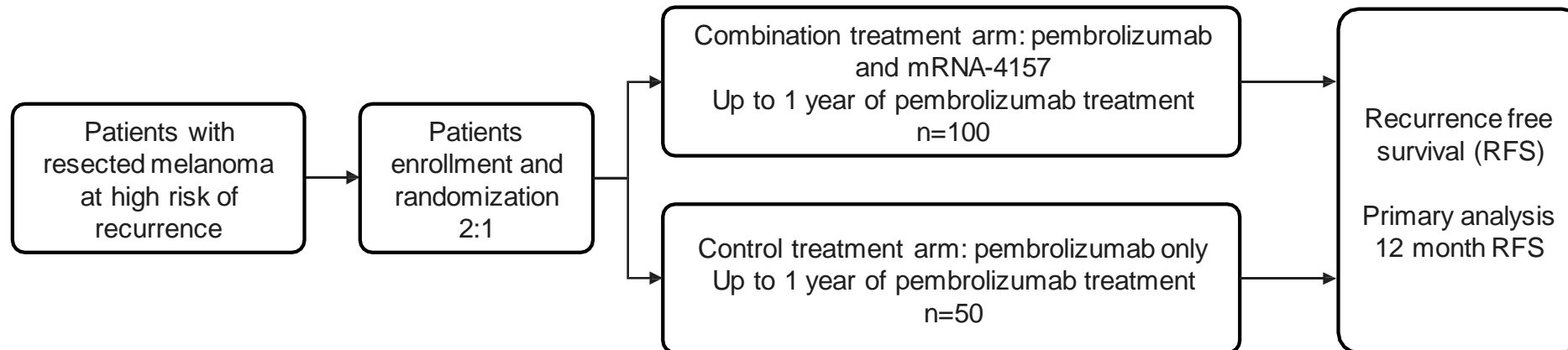
Personalized cancer vaccine (mRNA-4157)

Phase 2 study ongoing

- Randomized Phase 2, PCV + pembrolizumab vs. pembrolizumab alone in resected melanoma at high risk of recurrence

Key Objectives

- Assess whether postoperative adjuvant therapy with mRNA-4157 and pembrolizumab improves recurrence free survival compared to pembrolizumab only in patients with complete resection of cutaneous melanoma at high risk of recurrence
- **Primary endpoint:** recurrence free survival at 12 months



Forward-looking statements

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995, as amended including, but not limited to, statements concerning potential development candidate applications, development candidate activities, preclinical and clinical studies, regulatory submissions and approvals, risk management and estimates and forward-looking projections with respect to Moderna or its anticipated future performance or events. In some cases, forward-looking statements can be identified by terminology such as “may,” “should,” “expects,” “intends,” “plans,” “aims,” “anticipates,” “believes,” “estimates,” “predicts,” “potential,” “continue,” or the negative of these terms or other comparable terminology, although not all forward-looking statements contain these words. The forward-looking statements in this presentation are neither promises nor guarantees, and you should not place undue reliance on these forward-looking statements because they involve known and unknown risks, uncertainties and other factors, many of which are beyond Moderna’s control and which could cause actual results to differ materially from those expressed or implied by these forward-looking statements. These risks, uncertainties and other factors include, among others: preclinical and clinical development is lengthy and uncertain, especially for a new category of medicines such as mRNA, and therefore Moderna’s preclinical programs or development candidates may be delayed, terminated, or may never advance to or in the clinic; no mRNA drug has been approved in this new potential category of medicines, and may never be approved; mRNA drug development has substantial clinical development and regulatory risks due to the novel and unprecedented nature of this new category of medicines; and those described in Moderna’s most recent Annual Report on Form 10-K filed with the U.S. Securities and Exchange Commission (SEC) and in subsequent filings made by Moderna with SEC, which are available on the SEC’s website at www.sec.gov. Except as required by law, Moderna disclaims any intention or responsibility for updating or revising any forward-looking statements in this presentation in the event of new information, future developments or otherwise. These forward-looking statements are based on Moderna’s current expectations and speak only as of the date hereof.