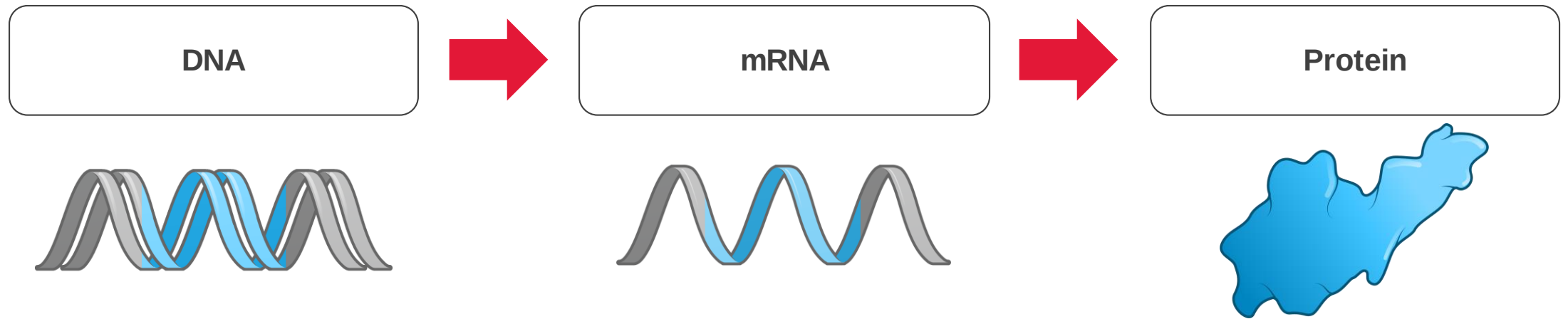




Business Updates and First Quarter 2020 Financial Results

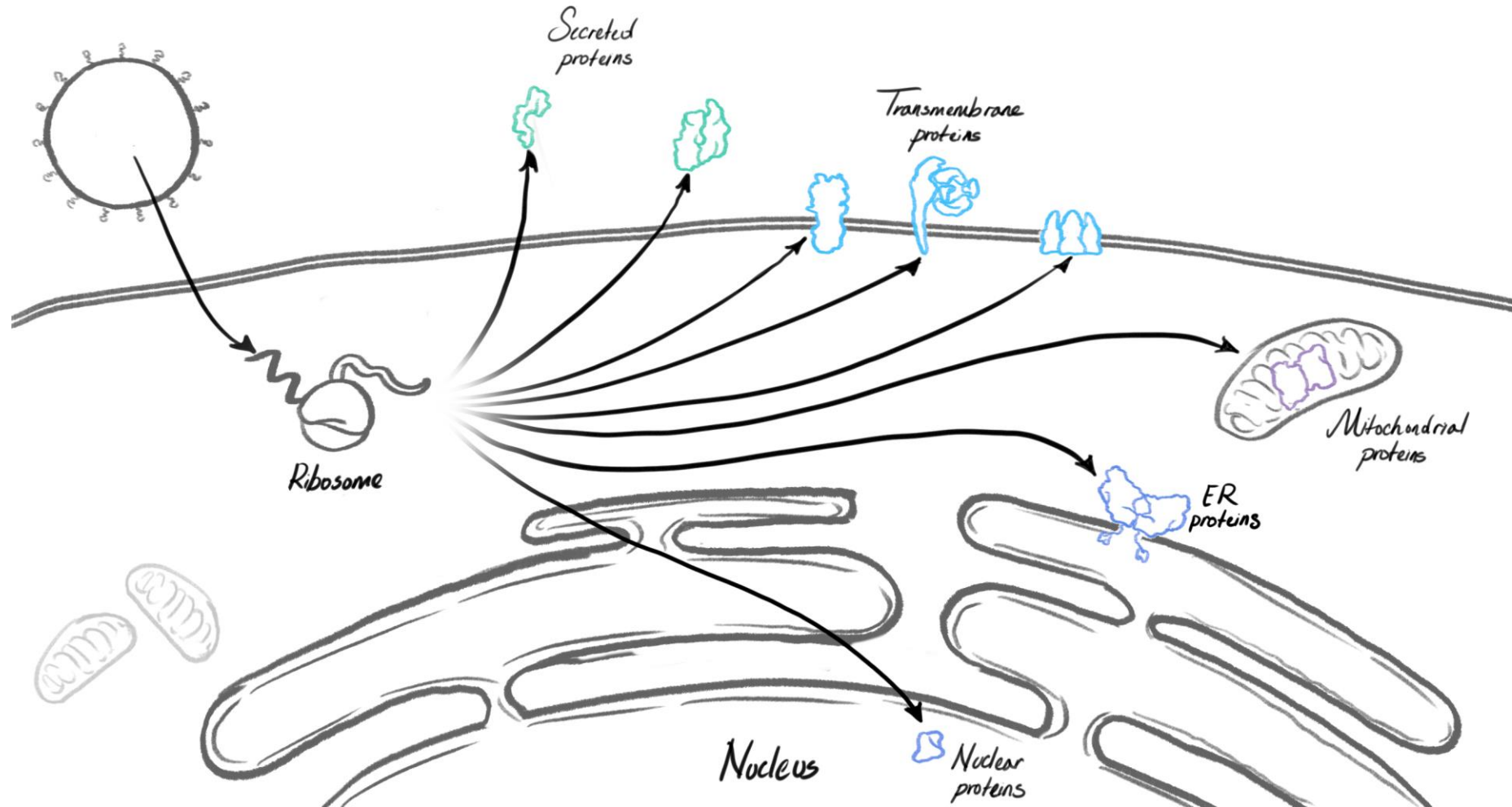
May 7, 2020

Forward-looking statements and Disclaimer

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: the impact of the SARS-CoV-2 pandemic on the Company's clinical trials and operations, including mRNA-1653; the status, timing and results of the Phase 1 trial of mRNA-1273 being conducted by the NIH; the timing of and proposed design for the planned Phase 2 study of mRNA-1273; the timing and proposed protocol for the planned Phase 3 study of mRNA-1273; the next steps, including the timing thereof, and ultimate commercial plan for mRNA-1273; the ability to scale dosing capacity for mRNA-1273, including pursuant to the strategic collaboration with Lonza; the size of the potential market opportunity for mRNA-1273; the timing and approval of a biologics license application for mRNA-1273 and our other development candidates; the timing and results of the Phase 2 dose confirmation study of mRNA-1647; the timing and estimated costs of the planned pivotal Phase 3 study of mRNA-1647 in women of childbearing age; the status, timing and results of the Phase 1 study of mRNA-1172 being conducted by MERCK; the timing and success of the Company's autoimmune therapeutic development candidates; the timing and success of the Company's other development candidates; the continuing success of the extended collaboration with Vertex; the size of the potential commercial market for novel vaccines produced by Moderna or others; the probability of success of the Company's vaccines individually and as a portfolio; the Company's expected net cash used in operating activities and for purchases of property and equipment in 2020; the Company's expectation regarding a general matching of expenses and reimbursements in 2020; the Company's expected cash runway based on its current cash and investments; and the ability of the Company to accelerate the research and development timeline for any individual product or the platform as a whole. In some cases, forward-looking statements can be identified by terminology such as "will," "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: whether the interim or final Phase 1 results for mRNA-1893 will be predictive of any future clinical studies for this or other development candidates with the same LNP formulation; the acceptance of the IND submitted by the NIH for the Phase 2 study of mRNA-1273; the Company's ability to hire and retain key employees; preclinical and clinical development is lengthy and uncertain, especially for a new class of medicines such as mRNA, and therefore our 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 class 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 class of medicines; the fact that the rapid response technology in use by Moderna is still being developed and implemented; the fact that the safety and efficacy of mRNA-1273 has not yet been established; despite having ongoing interactions with the FDA or other regulatory agencies, the FDA or such other regulatory agencies may not agree with our regulatory approval strategies, components of our or filings, such as clinical trial designs, conduct and methodologies, or the sufficiency of data submitted; the impact of the COVID-19 pandemic on the operation of the Company's clinical trials, preclinical work, and overall operations, including delays and inability to progress with certain clinical trials; potential adverse impacts due to the global COVID-19 pandemic such as delays in regulatory review, manufacturing and supply chain interruptions, adverse effects on healthcare systems and disruption of the global economy; and those risks and uncertainties described under the heading "Risk Factors" 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 the 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 contained 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.

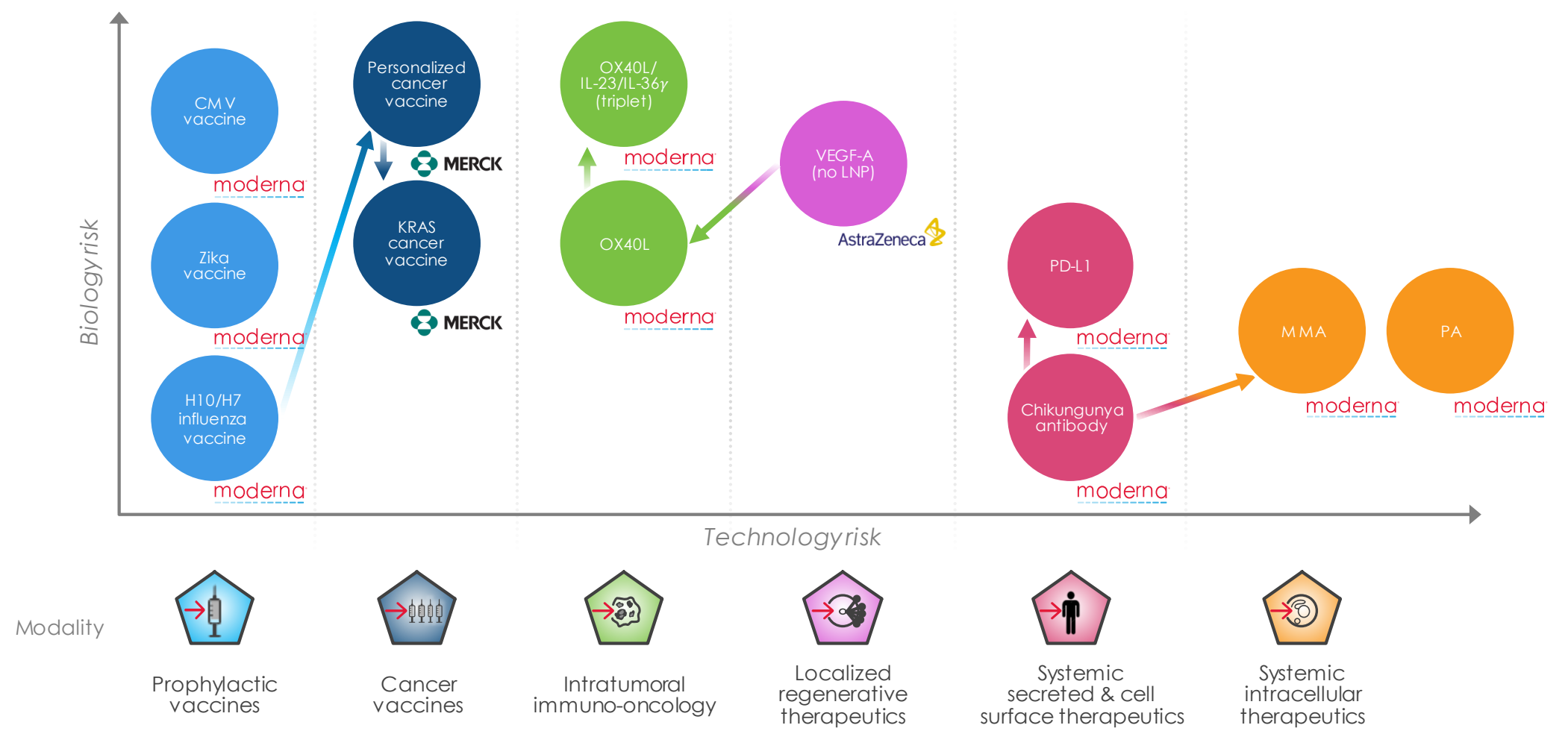
This presentation also contains estimates, projections and other statistical data made by independent parties and by Moderna relating to market size and growth and other data about Moderna's industry. These data involve a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates. In addition, projections, assumptions and estimates of Moderna's future performance and the future performance of the markets in which the Company operates are necessarily subject to a high degree of uncertainty and risk.

mRNA as a potential new class of medicines



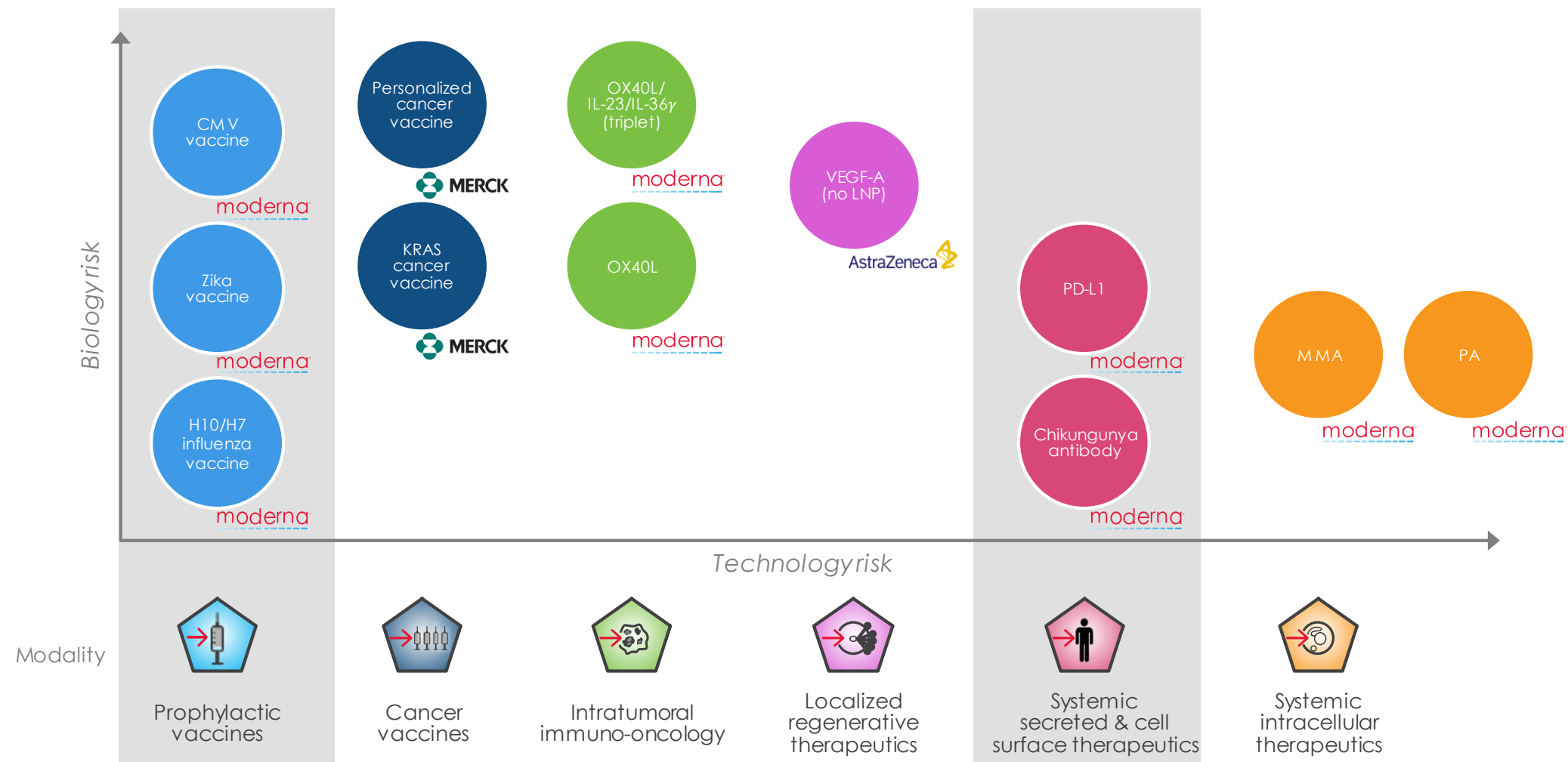
1. Large product opportunity
2. Higher probability of technical success
3. Accelerated research and development timelines
4. Greater capital efficiency over time vs. recombinant technology

Risk management is essential to building a new class of medicines



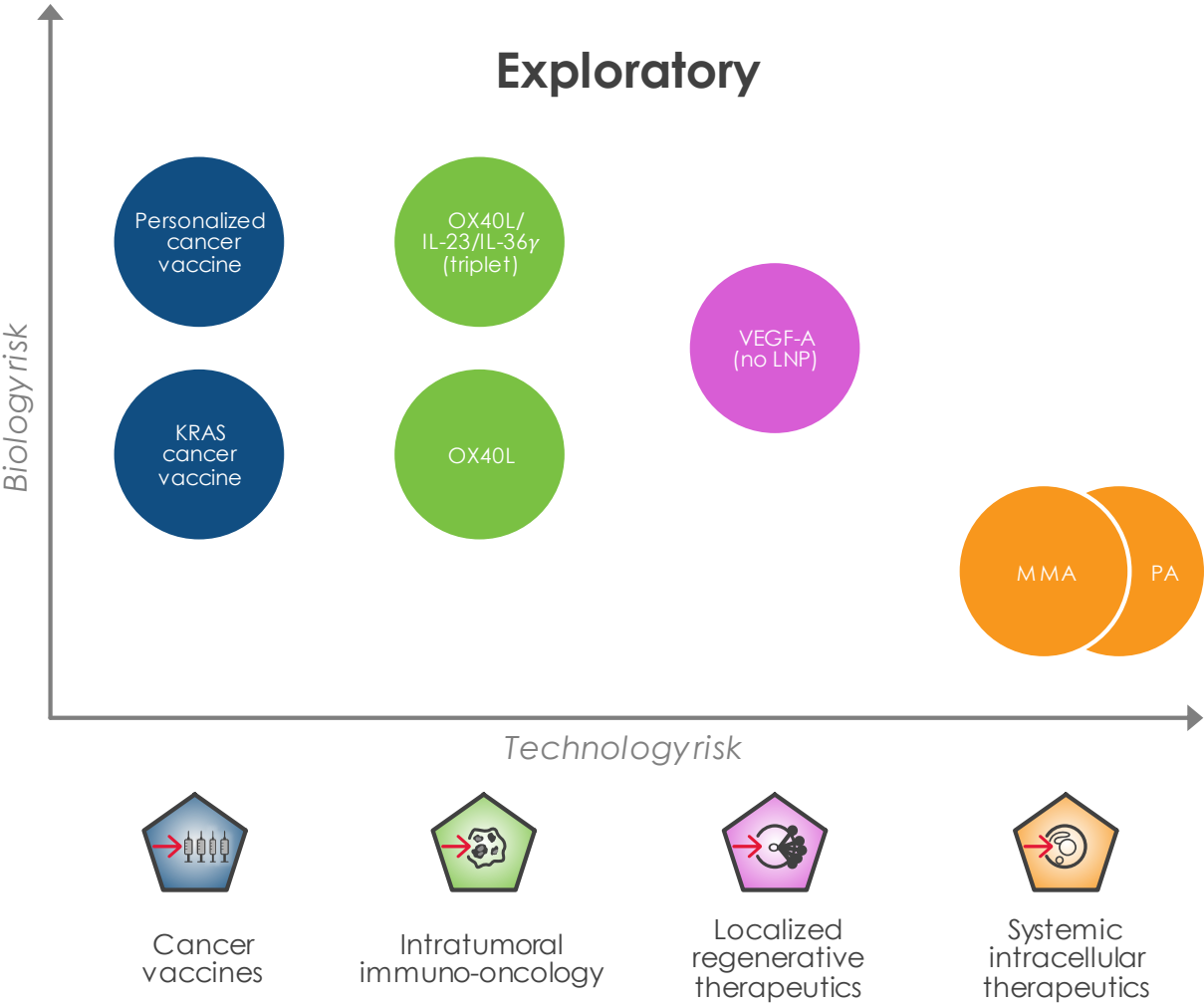
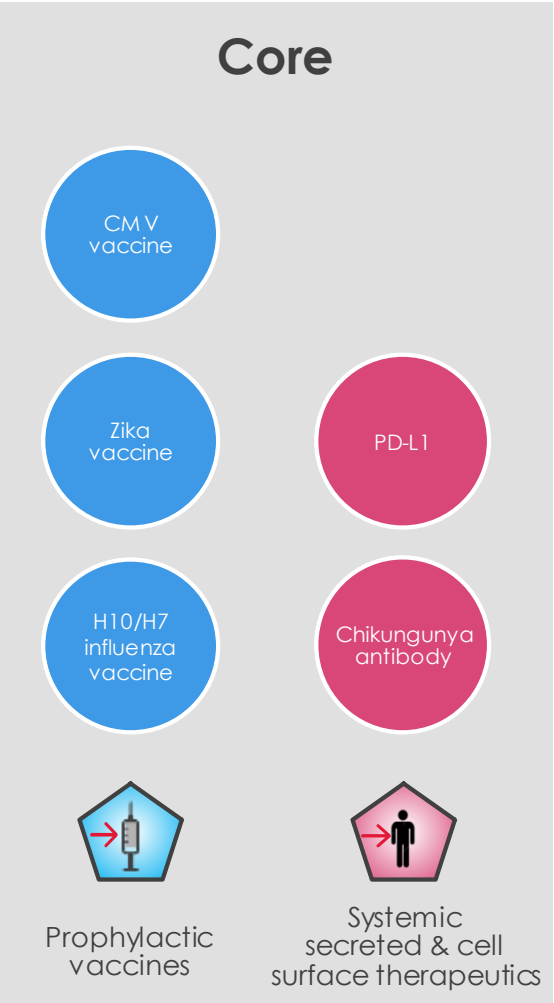
2019 was an inflection year in Moderna's history

Our modality strategy

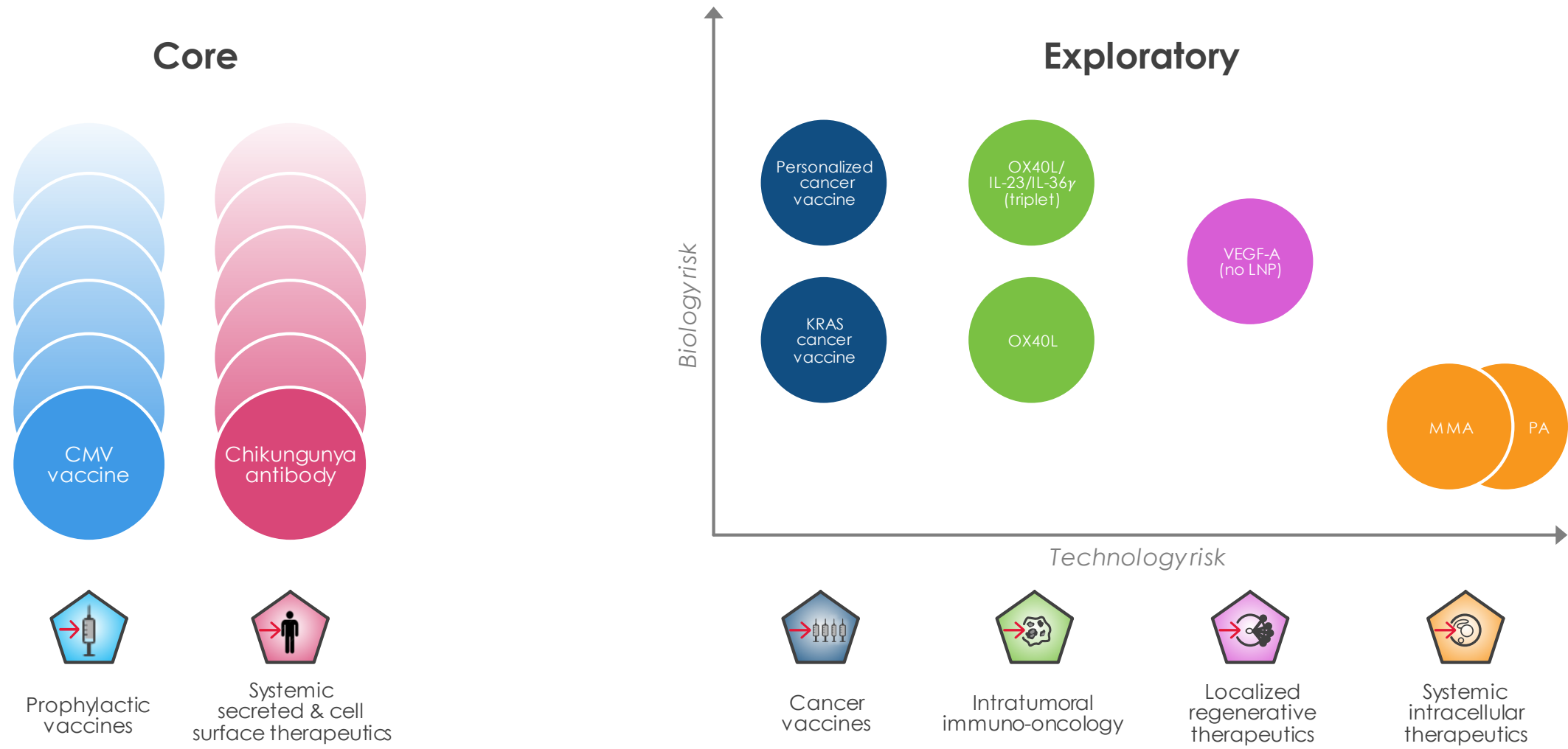


2019 was an inflection year in Moderna's history

Our modality strategy

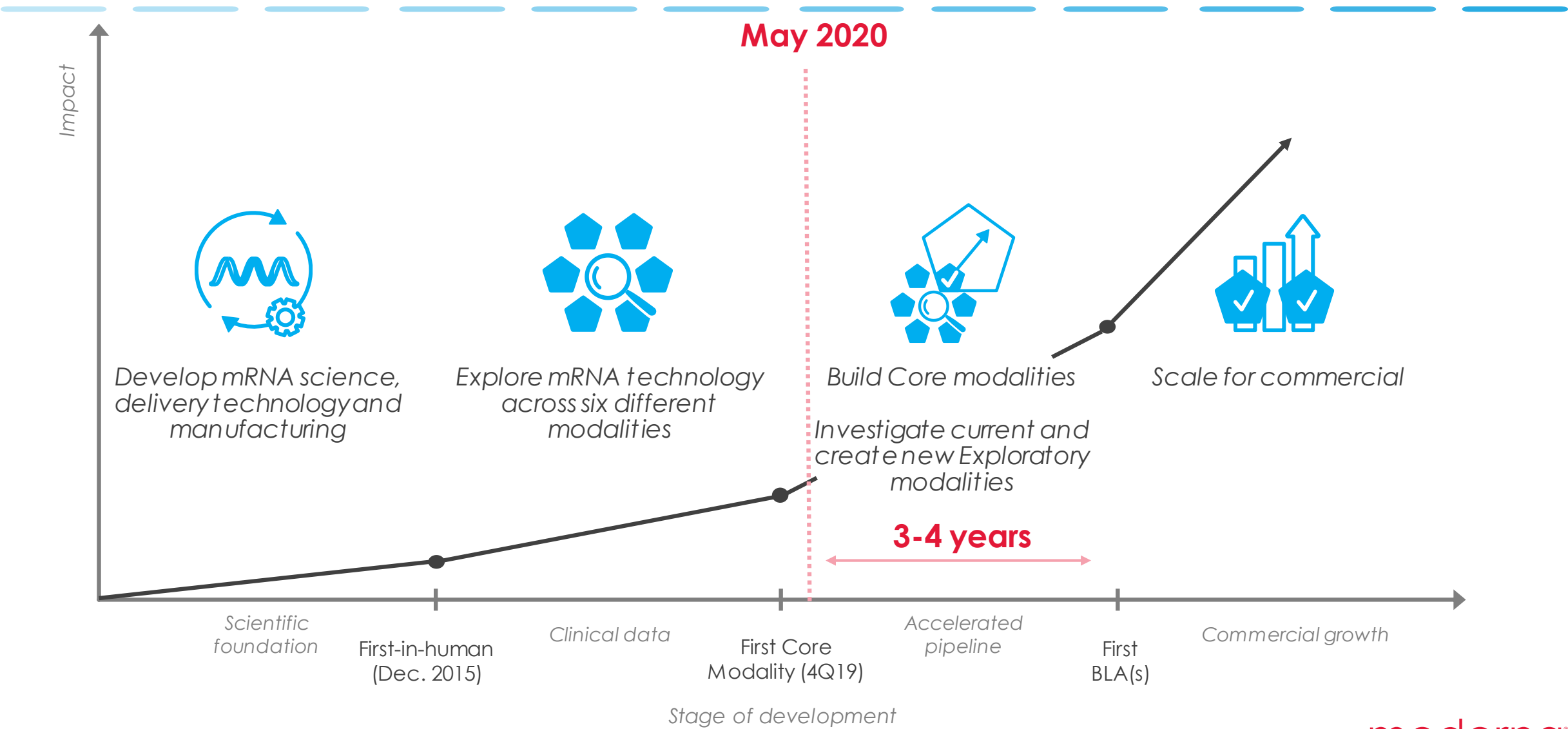


Expanding core modalities with additional development candidates



Progression towards a new class of medicines

Strategic plan presented in February 2020



Major acceleration of Moderna's development

SARS-CoV-2 vaccine (mRNA-1273)



Phase 2 – FDA clearance to proceed with Phase 2 study on Wednesday, May 6th

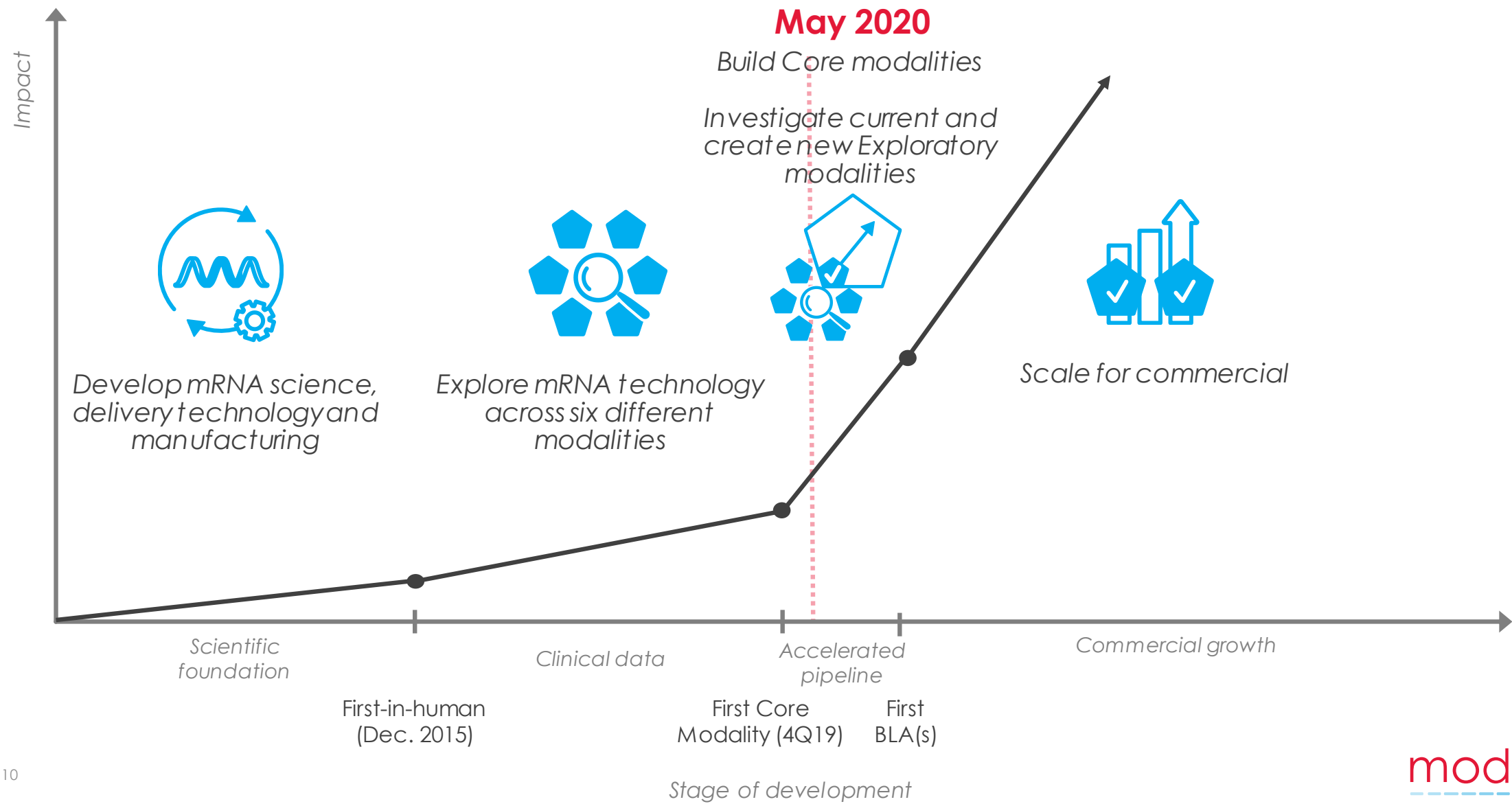


Phase 3 – Finalizing protocol for Phase 3 study, expected to begin in early summer 2020



Potential biologic license application (BLA) approval for mRNA-1273 in 2021

Progression towards a new class of medicines



New leadership additions



Patrick Bergstedt

SVP, Commercial Vaccines

Joining from Merck & Co.

Previously Head of Global Marketing & Commercial Operations: Vaccines



Jacqueline Miller, M.D., FAAP

SVP, Infectious Disease Development

Joining from GlaxoSmithKline

Previously Vice President and Head, Clinical R&D and Epidemiology



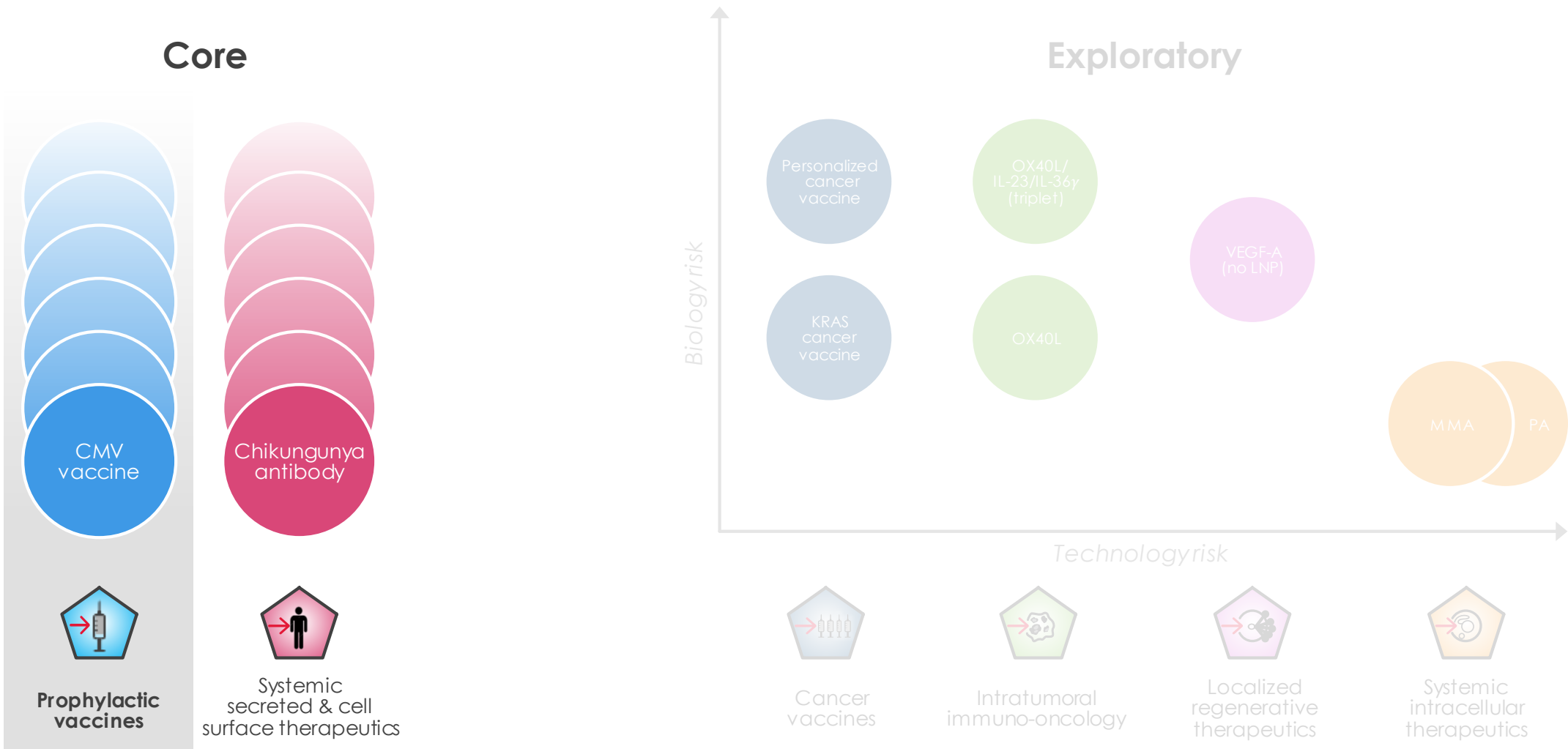
Charbel Haber, M.P.H., Ph.D.

SVP, Regulatory Affairs

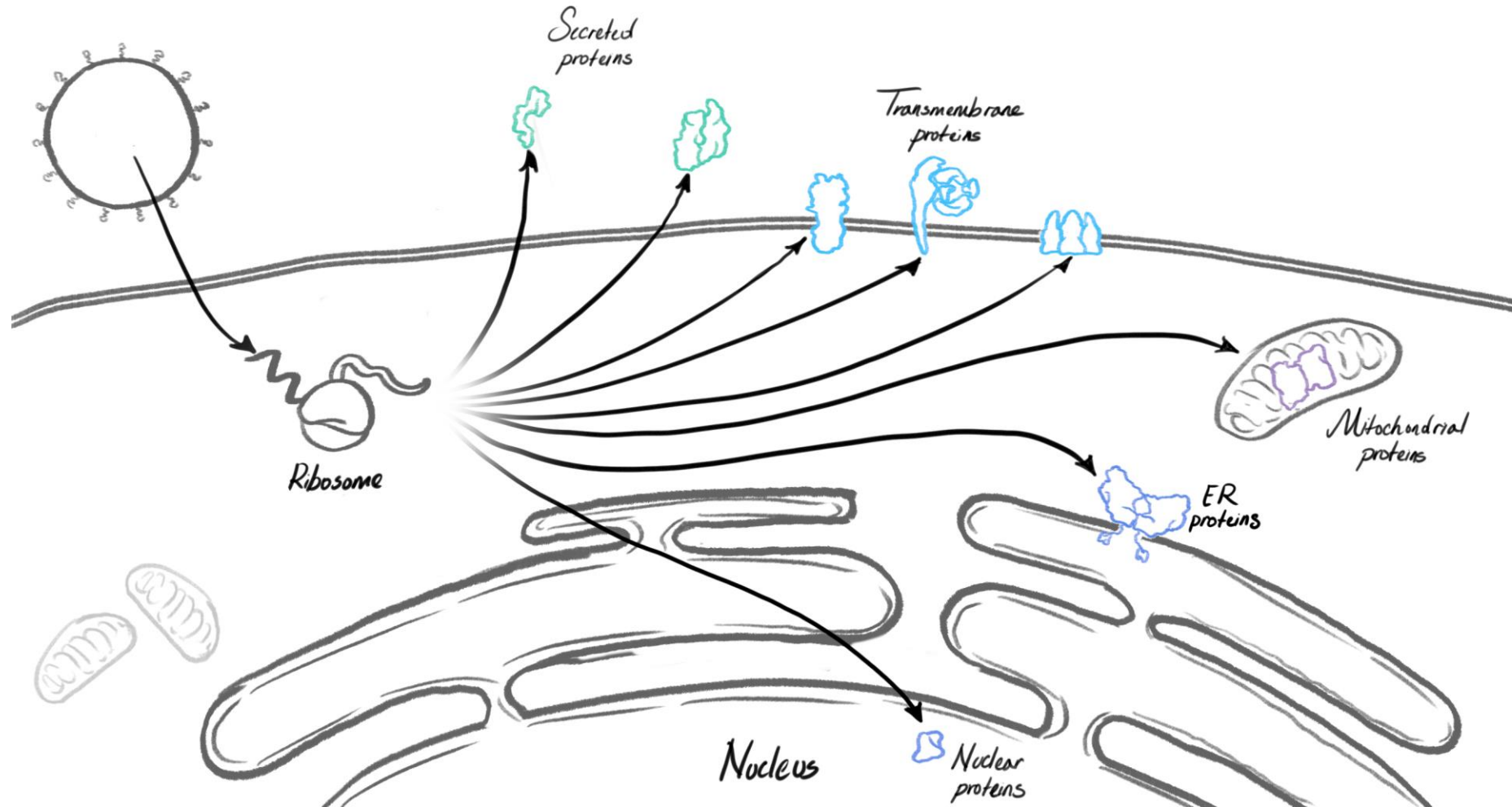
Joining from Biogen

Previously Vice President, Global Safety and Regulatory Sciences

Core modality: Prophylactic vaccines



mRNA as a potential new class of vaccines



1. Large product opportunity
2. Higher probability of technical success
3. Accelerated research and development timelines
4. Greater capital efficiency over time vs. recombinant technology

Evidence that the platform is delivering in vaccines

Large product opportunity



Market opportunity

Worldwide vaccine market was \$35 billion in 2019, growing 9% a year¹

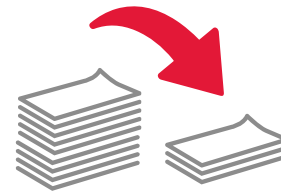
Higher probability of technical success



Probability of success

Vaccines have highest overall POS to approval
42% from Phase 2 start to approval²

Accelerated research and development timelines



Time requirements

SARS-CoV-2 vaccine (mRNA-1273)
Sequence to Phase 1 clinical trial in 63 days

Greater capital efficiency over time (vs. recombinant)



Power of the platform

Capex leverage across the value chain

Moderna's vaccine franchise

FDA clearance to proceed with SARS-CoV-2 Phase 2 study

Safety

>1,500 healthy volunteers enrolled in ten Phase 1 and one Phase 2 vaccine trials (dose levels up to 400µg); emerging safety & tolerability profile consistent with marketed adjuvanted vaccines¹

Immunogenicity

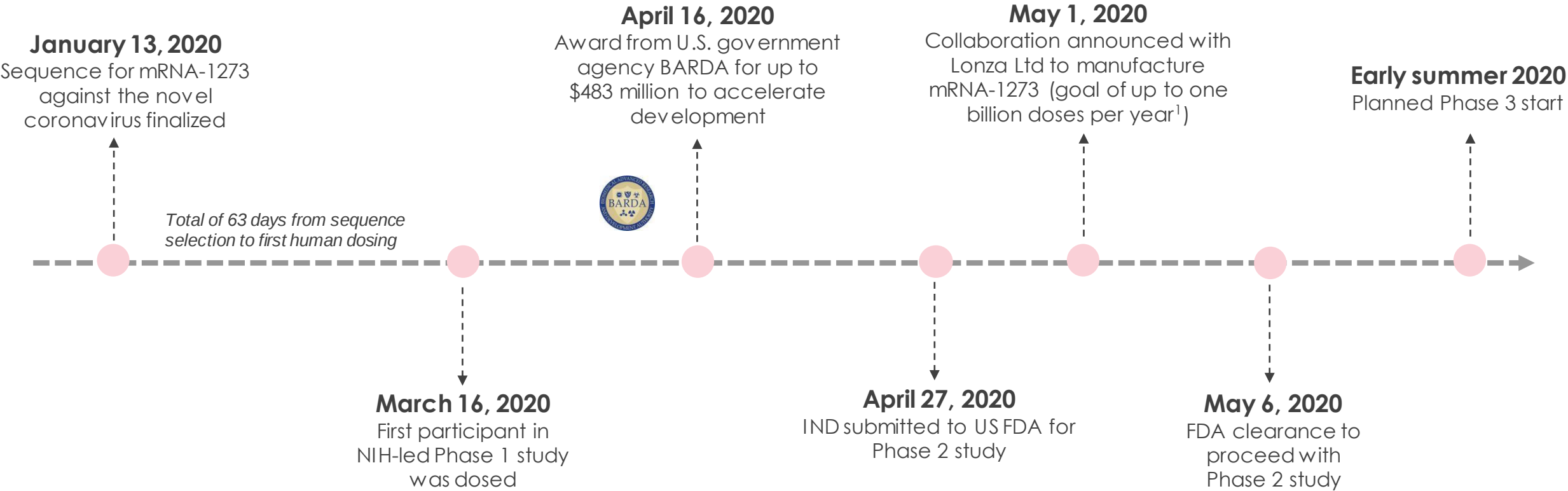
We have observed neutralizing antibodies to viral antigens against all eight viruses for which we have had clinical trial readouts

Clinical updates

- **SARS-CoV-2 (mRNA-1273):** NIH-led Phase 1 study has completed enrollment of 3 dose cohorts (25 µg, 100 µg and 250 µg); expanding to an additional 6 cohorts of older adults and elderly adults; FDA clearance to proceed with Phase 2 study
- **CMV (mRNA-1647):** Phase 2 dose confirmation study is fully enrolled; data readout expected 3Q20
- **Zika (mRNA-1893):** First interim analysis of Phase 1 study shows that 10 µg and 30 µg dose levels seroconverted 94% and 100% of seronegative participants, respectively; 100 ug and 250 ug dose cohorts fully enrolled
- **hMPV/PIV3 (mRNA-1653):** Phase 1b age de-escalation study enrollment suspended due to COVID-19 disruption
- **RSV (mRNA-1172/V172):** Phase 1 study led by Merck is ongoing

Accelerated research and development

SARS-CoV-2 vaccine (mRNA-1273)



1. Assuming the currently expected dose of 50 µg

SARS-CoV-2 vaccine (mRNA-1273)

Phase 1 trial (run by the National Institutes of Health)

Key objective: To assess the safety, reactogenicity and immunogenicity of mRNA-1273

Study design: Phase 1, open-label dose ranging clinical trial in males and non-pregnant females, 18 to 55 years of age

- Forty-five subjects were enrolled into one of three cohorts (25, 100 and 250 µg)
- Subjects will receive an intramuscular (IM) injection (0.5 milliliter [mL]) of mRNA-1273 on Days 1 and 29 in the deltoid muscle and will be followed through 12 months post second vaccination (Day 394)

Primary endpoint:

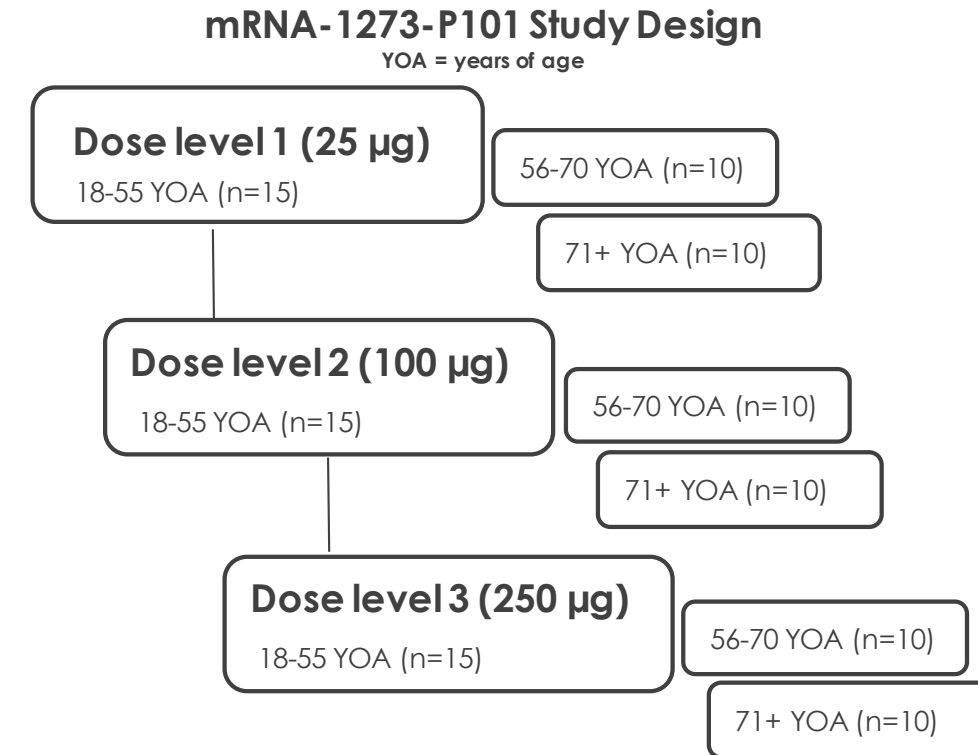
- Safety and reactogenicity of a 2-dose vaccination schedule of mRNA-1273, given 28 days apart, across 3 dosages in healthy adults

Secondary endpoint:

- Evaluate the immunogenicity as measured by IgG ELISA to the SARS-CoV-2 S protein following a 2-dose vaccination schedule of mRNA-1273 at Day 57

Trial progress/details:

- NIH-led Phase 1 study of mRNA-1273 has completed enrollment of 3 dose cohorts (25 µg, 100 µg and 250 µg); expanding to an additional 6 cohorts of older adults and elderly adults



Late stage development for SARS-CoV-2 vaccine (mRNA-1273)

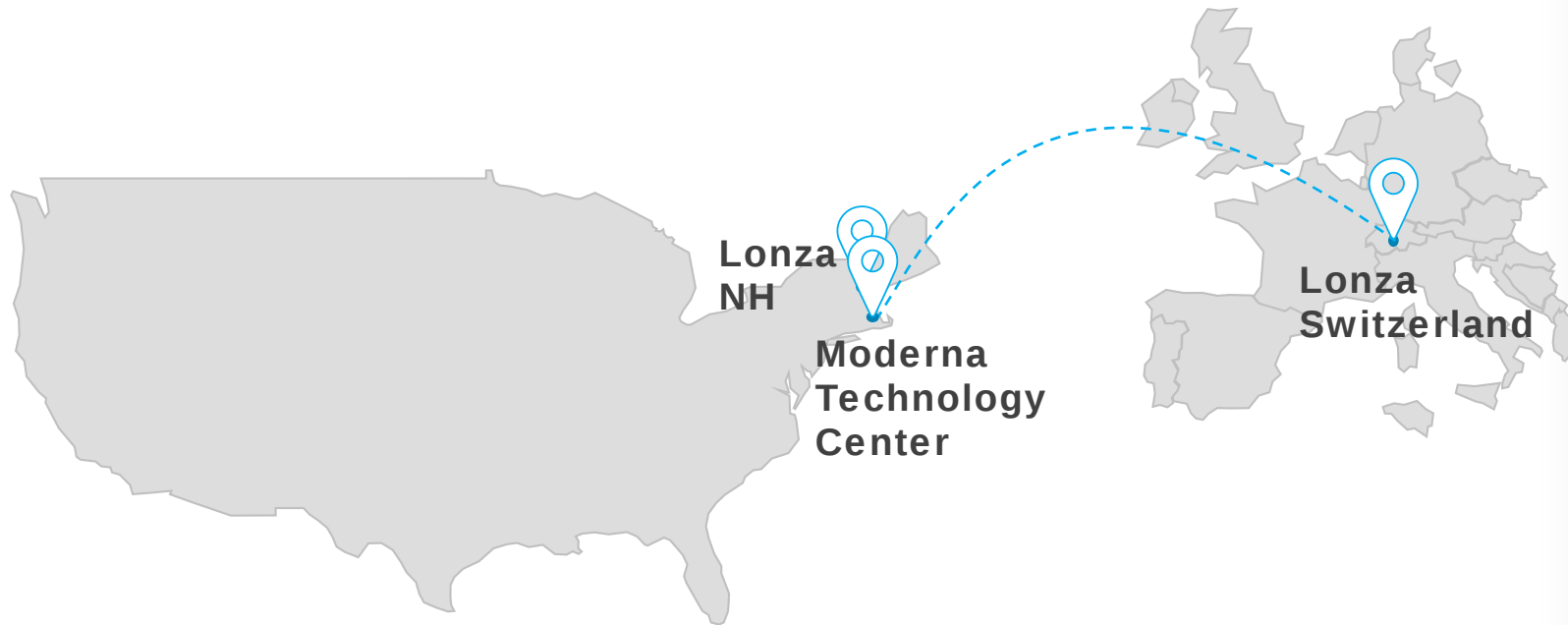
Planned Phase 2 study

- Expected to begin in 2Q20
- Study will evaluate the safety, reactogenicity and immunogenicity of two vaccinations of mRNA-1273 given 28 days apart
- Subject to receive placebo, 50 µg or a 250 µg dose at both vaccinations
- 600 healthy participants; two cohorts of adults ages 18-55 years (n=300) and older adults ages 55 years and above (n=300)

Finalizing protocol for Phase 3 study; expected to begin in early summer of 2020

Moderna and Lonza collaboration

Goal to enable manufacturing of up to one billion doses per year¹



Plan to establish **manufacturing suites** at Lonza's facilities in the U.S. (New Hampshire) and Switzerland

Technology transfer expected to begin in **June 2020**

First batches of mRNA-1273 expected to be manufactured at Lonza NH in **July 2020**

Late stage development for CMV vaccine (mRNA-1647)

Phase 2 dose confirmation study

- 3 dose levels; randomized, observer-blind, placebo-controlled, multicenter
- 252 seronegative & seropositive adults
- Utilizes intended Phase 3 formulation; same lipid nanoparticle (LNP) used in Phase 1
- Phase 2 study fully enrolled; interim data readout expected 3Q20
- Despite COVID-19 disruptions, >70% of participants have received their second vaccination per original protocol; protocol amendment has been submitted to expand window (2-4 months) for remaining participants to receive second vaccination; third vaccination to be administered 6 months after the first vaccination as originally planned

Planned pivotal Phase 3 trial

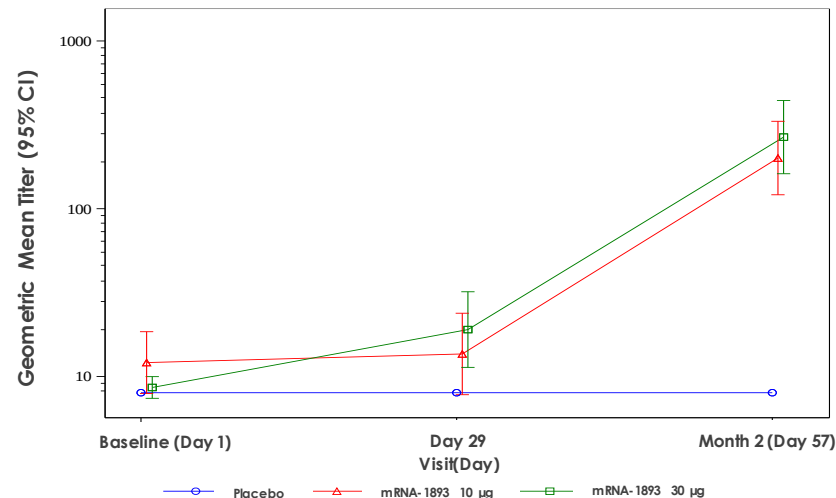
- **Primary endpoint:** prevention of primary CMV infection in a population that includes women of childbearing age (WOCBA)
- Intended to begin in 2021 in USA and Europe
- Expect **<8,000 participants**
- Type C CMC meeting in 1Q20; received constructive feedback
- Preparation and product manufacturing underway
- Phase 3 trial in WOCBA: costs currently estimated at \$200-250 million¹

Zika vaccine (mRNA-1893) Phase 1 interim analysis

10 and 30 µg dose levels interim analysis summary

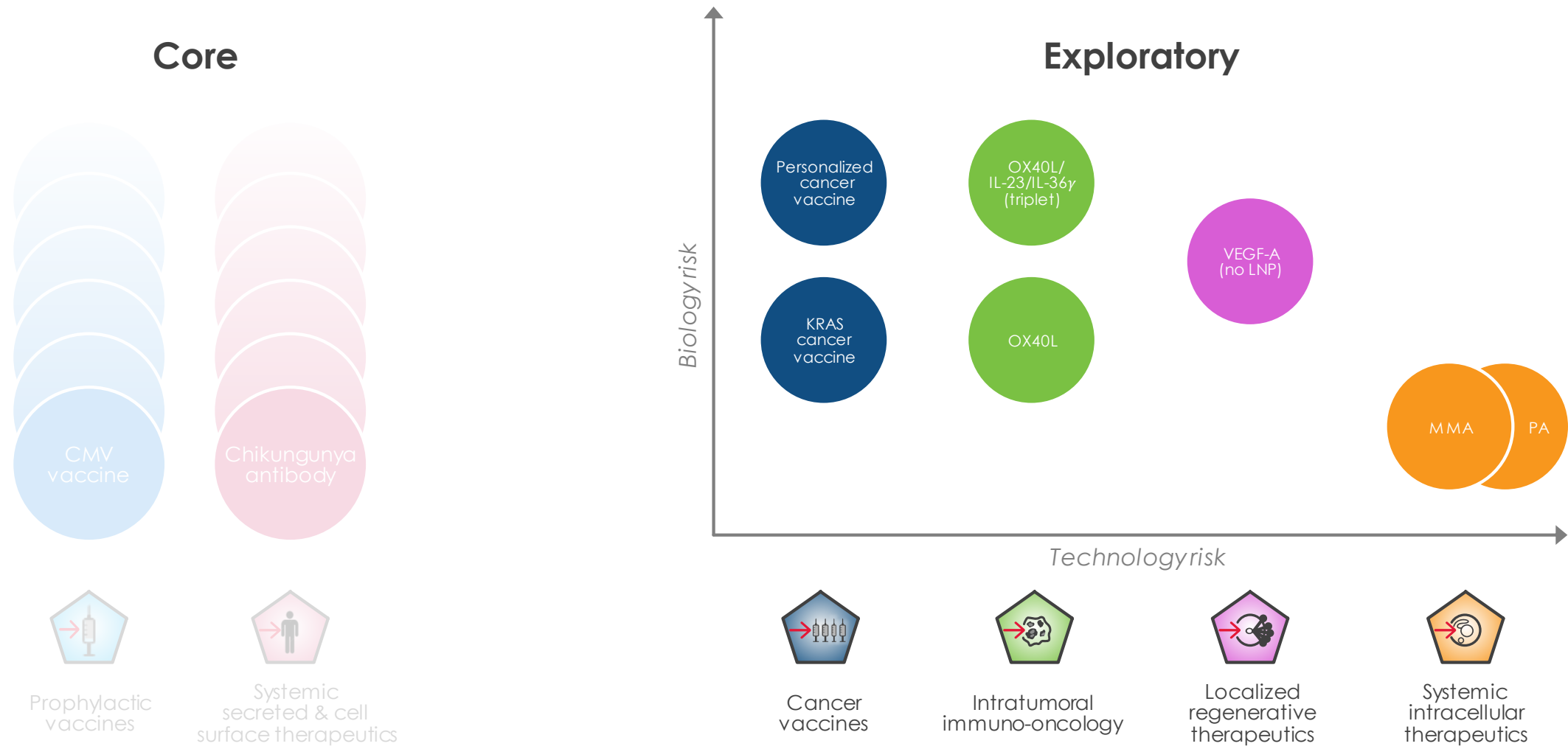
Immunogenicity in Flavivirus Baseline Seronegative Participants (Per-Protocol Set)			
	PRNT ₅₀		
	Placebo	10µg	30µg
Baseline	8.0	9.5	8.0
GMT post-dose 1	8.0	8.5	14.0
GMT post-dose 2	8.0	195.6	303.4
Seroconversion rate Post-dose 1; Post-dose 2	0%; 0%	5%; 94.4%	40%; 100%

All Participants (Seronegative and Seropositive) Immunogenicity (PRNT₅₀) at Day 57



- **Safety:** Both 10 and 30 µg dose levels were generally well tolerated
 - No grade 3 adverse reactions (ARs) were reported
 - No serious adverse events (SAEs) related to mRNA-1893 were reported at either dose levels
- **In the flavivirus-seronegative group:**
 - Seroconversion rates after the second vaccination reached 94.4% in the 10 µg dose level and 100% in the 30 µg dose level, based on the PRNT₅₀ (MN data were consistent)
 - A single vaccination of the 30 µg dose level was sufficient to seroconvert baseline flavivirus seronegative participants (however there was a clear benefit of a two-dose series given 28 days apart)
- **In the flavivirus-seropositive group:**
 - The percentage of participants achieving a 4-fold boost in pre-existing PRNT₅₀ titers after the second vaccination reached 50% in the 10 µg dose level and 75% in the 30 µg dose level, based on the PRNT₅₀ (MN data were consistent)

Exploratory modalities are a critical part of our strategy to maximize applications of our mRNA medicines



Anticipated clinical next steps and catalysts

Core modalities

Prophylactic vaccines 	• SARS-CoV-2 – Phase 1 safety and immunogenicity data readout for first 3 cohorts, Phase 2 start • CMV – Phase 2 immunogenicity data at 3-month IA, Phase 3 start • hMPV/PIV3 – Phase 1b seropositive age de-escalation study resumption • RSV – Phase 1 safety and immunogenicity data readout • Zika – Phase 1 (100 and 250 ug) safety and immunogenicity data readout • Pediatric RSV – IND filing • EBV – IND filing
Systemic secreted & cell surface therapeutics 	• Antibody against Chikungunya virus – Further development of 0.6 mg/kg dose • Relaxin – IND filing (AstraZeneca) • IL-2 – IND filing • PD-L1 – IND filing

Exploratory modalities

Cancer vaccines 	• PCV – Phase 2 clinical data readout • KRAS – Phase 1 clinical data readout
Intratumoral immuno-oncology 	• OX40L – Initiation of dosing of Phase 2 combination cohort • OX40L/IL-23/IL-36γ (Triplet) – Completion of dose escalation monotherapy and combination cohorts • IL-12 – Phase 1 data readout
Localized regenerative therapeutics 	• VEGF – Phase 2a data readout
Systemic intracellular therapeutics 	• MMA – Phase 1/2 study start • PA – Phase 1/2 study start • PKU – IND filing • GSD1a – IND filing

Vertex Agreement

Extended collaboration to August 2021

Goal: Aimed at discovery and development of potential mRNA medicines for the treatment of cystic fibrosis, or CF, by enabling cells in the lungs of people with CF to produce functional CFTR proteins

July 2016

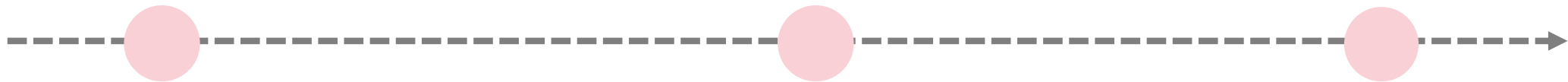
Entered into a Strategic Collaboration and License Agreement with Vertex¹

July 2019

Vertex elected to extend the initial research period by 6 months

March 2020

Based on promising preclinical data generation to date, Vertex elected to extend the research period to August 2021



First quarter 2020 financial results (Unaudited)

Balance Sheets	March 31, 2020	December 31, 2019
Cash, cash equivalents and investments ¹	\$ 1.72 billion	\$ 1.26 billion
Statements of Cash Flows	3 months ended Mar. 31, 2020	3 months ended Mar. 31, 2019
Net cash used in operating activities ²	\$ 106 mm	\$ 144 mm
Cash used for purchases of property and equipment	\$ 6 mm	\$ 8 mm
Total	\$ 112 mm	\$ 152 mm
Statements of Operations	3 months ended Dec. 31, 2020	3 months ended Mar. 31, 2019
Total revenue	\$ 8 mm	\$ 16 mm
Research and development expenses	\$ 115 mm	\$ 130 mm
General and administrative expenses	\$ 24 mm	\$ 27 mm
Total operating expenses	\$ 139 mm	\$ 158 mm
Net loss	\$ (124) mm	\$ (133) mm

1. Excludes restricted cash of \$12 mm at March 31, 2020 and December 31, 2019.

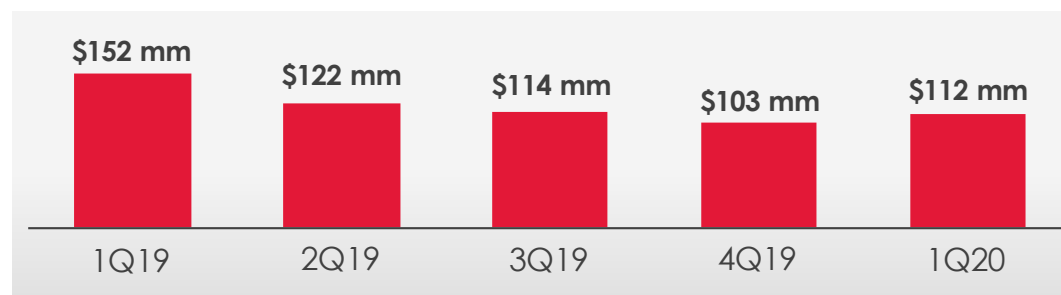
2. Includes \$22 mm in the first quarter of 2019, of in-licensing payments to Cellscript, LLC and its affiliate, mRNA RiboTherapeutics, Inc. to sublicense certain patent rights. After the first quarter of 2019, we have no further in-licensing payment obligations under the Cellscript-MRT Agreements.

Selected cash flow information and 2020 guidance

Selected Cash Flow Information

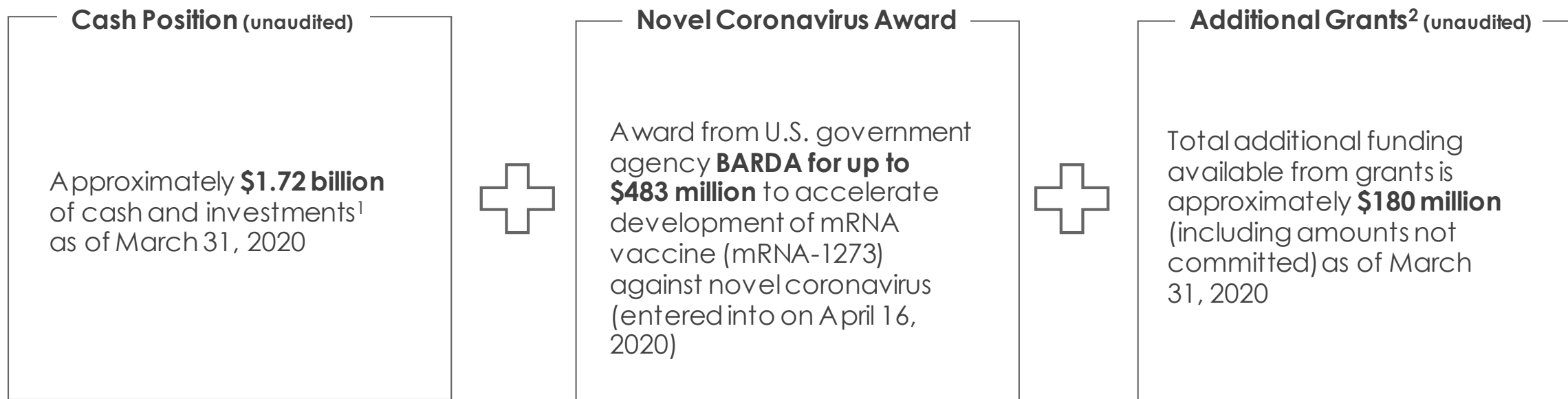
Statements of Cash Flows	3 months ended Mar. 31, 2019 (unaudited)	6 months ended Jun. 30, 2019 (unaudited)	9 months ended Sept. 30, 2019 (unaudited)	Year ended Dec. 31, 2019 (audited)	3 months ended Mar. 31, 2020 (unaudited)
Net cash used in operating activities	\$ 144 mm	\$ 256 mm	\$ 363 mm	\$ 459 mm	\$106 mm
Cash used for purchases of property and equipment	\$ 8 mm	\$ 18 mm	\$ 25 mm	\$ 32 mm	\$ 6 mm
Total	\$ 152 mm	\$ 274 mm	\$ 388 mm	\$ 491 mm	\$ 112 mm

Net cash used in operating activities and for purchases of property and equipment



We expect net cash used in operating activities and for purchases of property and equipment in 2020 to be approximately \$500 million

We have up to \$2.4 billion to invest and create value

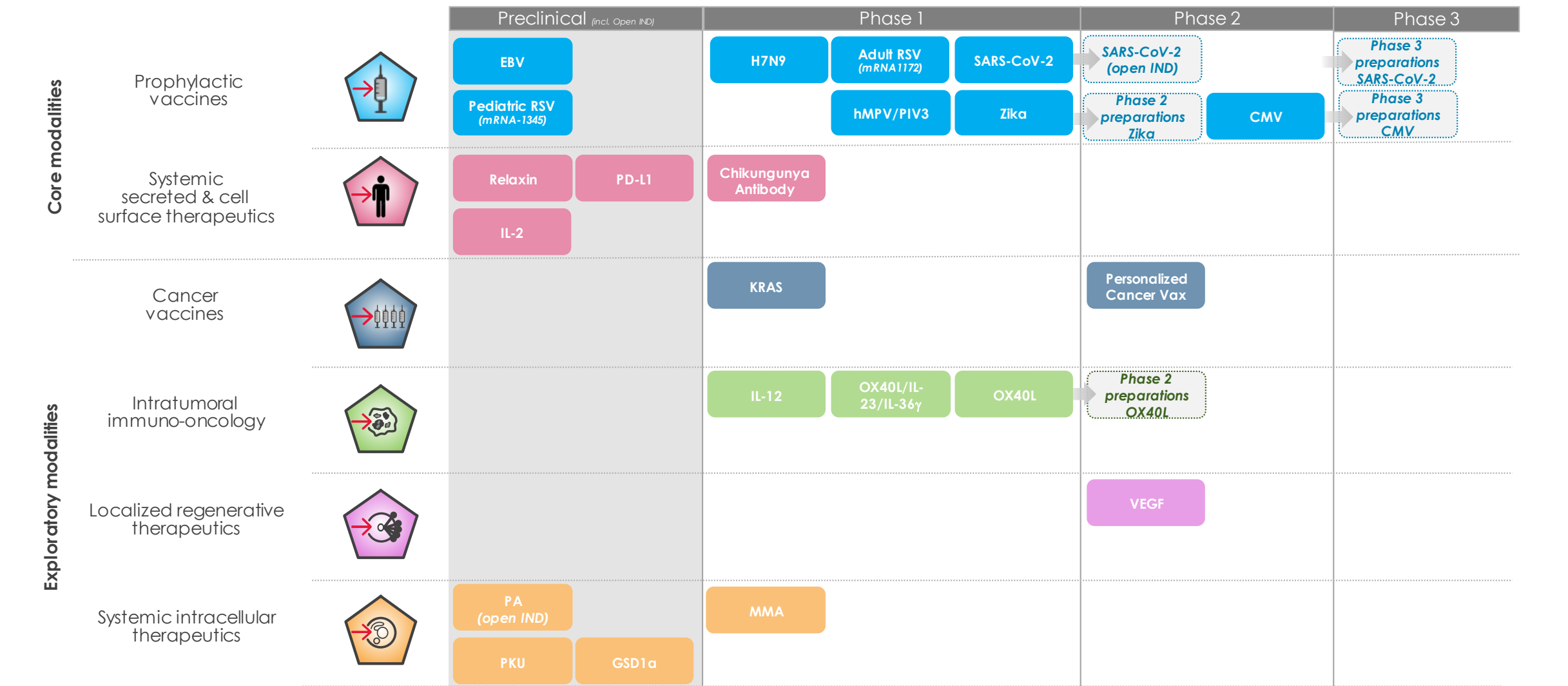


Multiple years of cash runway

1. Cash and investments denotes cash, cash equivalents and investments
2. Funding from Biomedical Advanced Research and Development Authority (BARDA): Zika vaccine and The Bill and Melinda Gates Foundation (BMGF): HIV. Additional funding is subject to agreement on scope of additional projects.

Development pipeline

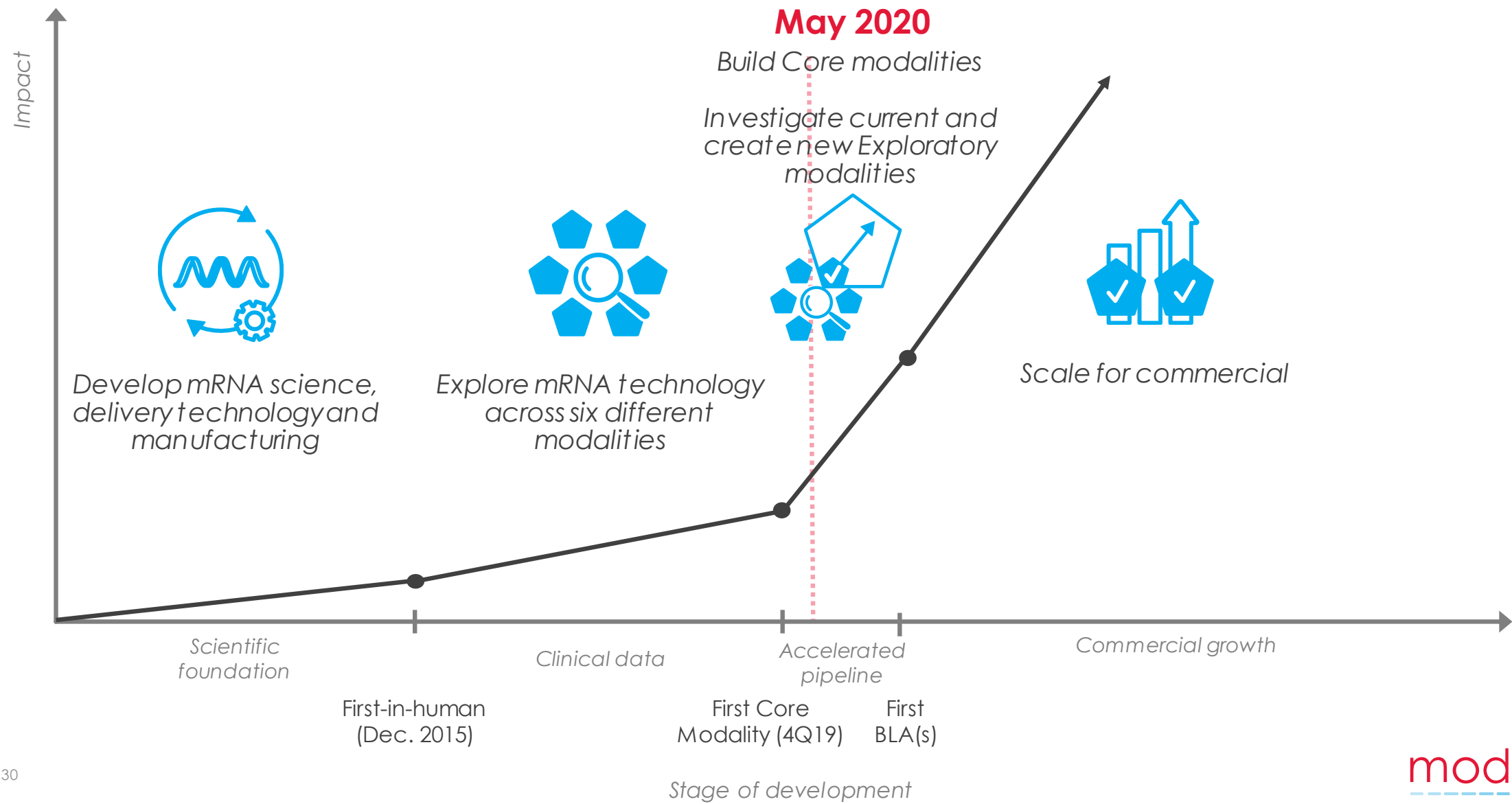
May 2020

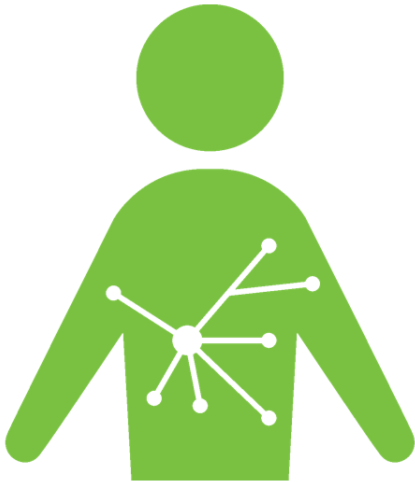


Moderna in May 2020

Pipeline	2	6	12	11	
	Preparing for Ph 3	In or preparing for Ph 2	Ph 1 trials ongoing	Positive Ph 1 readouts: 7 vaccines, PCV, OX40L, VEGF, anti-Chikungunya antibody	
Programs in Development	7		5	4	2
	Vaccines for major unmet needs • SARS-CoV-2 – Ph 1 ongoing; FDA clearance to proceed with Ph 2 • CMV in Ph 2, Ph 3 preparation • hMPV/PIV3 – started Phase 1b age de-escalation study • RSV and Zika in Ph 1 • Pediatric RSV, EBV – in preclinical		Immuno-Oncology • PCV in Ph 2 • OX40L preparing for Ph 2 cohort • Triplet, IL-12, KRAS in Ph 1	Rare disease • MMA, PA – Open IND • PKU & GSD1a in preclinical	Autoimmune disease • IL-2 and PD-L1 – in preclinical
Foundations	>1,900		>900	Up to \$2.4bn	
	Healthy volunteers and patients enrolled		employees	A fully-integrated GMP site in Massachusetts 	Leading biopharma partners    to invest and create value ¹

Progression towards a new class of medicines





Our mission

To deliver on the promise of mRNA science to create a new generation of transformative medicines for patients.