



Bivalent COVID Booster Ph 2/3 Interim Analysis (mRNA-1273.214)

June 8th, 2022

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COVID booster development for endemic phase

• Neutralizing titers (NT) will wane, similar to endemic HCoV

Strategic rationale for seasonal booster

- Decline in NT will increase risk of breakthrough hospitalization for those at higher risk (e.g., older adults, immune compromised)
- Emergence of new variants of concern (VOC) could accelerate the impact of waning and broaden risk of breakthrough

- **Desired features** for the northern hemisphere (NH) Fall/Winter '22-23 booster
- Improve durability of protective neutralizing antibodies against Omicron to 6+ months (i.e., the full NH fall-winter infection season)
- Retain high and durable protection against prior VOC and ancestral strains
- Broaden cross-protective immunity to increase potential for protection against a new (emergent) VOC mid-year



Overview Phase 2/3 (P205) study for mRNA-1273.214

All subject received mRNA-1273 primary series (100 µg) and mRNA-1273 booster (50 µg)

	4 th dose				
Trial	Booster	Dose	Subjects(n)	Comments	
Phase 2/3 P205 Only showing current arms	mRNA- 1273	50 µg	377	Enrolled February 21 to March 8	mRNA-1273.214 also being evaluated in study in UK (P305) with ~1,500 participants per
	.214 (32 Omicron mutations)	50 µg	437	Enrolled March 8 to March 23	arm and mixed primary regimen

Arms enrolled sequentially, safety follow-up of 57 days for mRNA-1273 and 43 days for mRNA-1273.214 at time of interim analysis



Primary immunogenecity objectives for the Phase 2/3 study (P205)

The Day 29 testing sequence for the immunogenecity endpoints is the following:





Demographics and baseline characteristics were consistent between groups

	mRNA-1273.214	mRNA-1273 (50 μg), N=377	
Characteristics n (%)	(50 μg), N=437		
Age at Screening (yr)			
Mean (range)	57.3 (20, 88)	57.5 (20, 96)	
Age subgroup			
≥18 and <65 years	263 (60.2)	227 (60.2)	
≥65 years	174 (39.8)	150 (39.8)	
Gender			
Male	179 (41.0)	186 (49.3)	
Female	258 (59.0)	191 (50.7)	
Duration between second dose of mRNA-1273 in the primary			
series and the first booster of mRNA-1273 (months)			
Median	8.0	8.0	
Q1, Q3	(7.4, 9.0)	(7.4, 8.5)	
Duration between first booster injection of mRNA-1273 and			
the second booster (months)			
Median	4.5	4.4	
Q1, Q3	(3.9, 4.9)	3.9, 4.9	
SARS-CoV-2 infection Pre-booster			
Negative	340 (77.8)	267 (70.8)	
Positive*	96 (22.0)	101 (26.8)	
Missing	1 (0.2)	9 (2.4)	

*SARS-CoV-2 testing was performed with polymerase chain reaction (PCR) and SARS-CoV-2 nucleocapsid antibody test. A positive test (either PCR or antibody test) was needed for the SARS-CoV-2 infection positive group.

Solicited adverse reactions were consistent with prior doses

Solicited adverse reactions within 7 days of the dose



Solicited adverse reactions trended lower for mRNA-1273.214 compared to prior doses

Frequency and types of unsolicited adverse events were also comparable, with no vaccine-related serious events in the .214 group up to 28 days after the booster dose



Omicron neutralizing titers (PsVNT50)



mRNA-1273 (prototype) mRNA-1273.214 (bivalent)

Omicron neutralizing titers were significantly higher following bivalent (.214) booster compared to prototype for all participants and both seronegative and baseline seropositive participants



Bivalent booster (.214) resulted in superior neutralizing GMT against Omicron

Only baseline seronegative participants

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	mRNA-1273.214 50 µg (N=334)	mRNA-1273 50 μg (N=260)	
Pre-booster GMT, 95%	298.13	332.02	
Cl	(258.75, 343.49)	(282.05, 390.85)	
Estimated GMTs (95%	2479.89	1421.24	
CI) at Day 29ª	(2264.47, 2715.80)	(1282.98, 1574.41)	
GMFR (95% CI) at Day	7 .96	4.44	
29, 95% CI	(7.18, 8.82)	(3.97, 4.96)	
GMR (97.5% CI)ª	1.75 (1.49, 2.04)		
Seroresponse rate	333/333, 100	256/258, 99.2	
(95% CI) at Day 29 ^b	(98.9, 100)	(97.2, 99.9)	
Difference in seroresponse rates (97.5% CI) ^c	1.5 (-1.1, 4.0)		

Primary endpoint for testing non-inferiority and superiority was seronegative participants

^c 97.5% CI was calculated using a stratified Miettinen-Nurminen method and adjusting by age group. The SRR difference is a calculated common risk difference using inverse-variance stratum weights and the middle point of Miettinen-Nurminen confidence limits of each one of the stratum risk differences

- All primary and key secondary immunogenicity objectives were met
 - mRNA-1273.214 elicited superior neutralizing antibody response against Omicron, compared to the prototype mRNA-1273 (50 µg) 28 days after the booster dose
 - mRNA-1273.214 elicited a noninferior seroresponse rate compared to the prototype mRNA-1273 (50 µg) 28 days after the booster dose

mode

• mRNA-1273.214 induced a **potent neutralizing antibody response against Omicron in all seronegative individuals** tested

^a Based on ANCOVA modeling; the model includes adjustment for treatment group, pre-booster antibody titers, and age groups.

^b Seroresponse at a participant level is defined as a change from below the LLOQ to equal or above 4 x lower limiting of quantification (LLOQ) if the participant's baseline is below the LLOQ, or at least a 4-fold rise if the baseline is equal to or above the LLOQ.

Bivalent booster (.214) resulted in superior neutralizing GMT against Omicron

All participants

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	mRNA-1273.214 50 µg (N=428)	mRNA-1273 50 µg (N=367)	
Pre-booster GMT, 95%	432.05	511.98	
Cl	(372.47, 501.17)	(433.39, 604.84)	
Estimated GMTs (95%	3232.52	1815.14	
CI) at Day 29ª	(2951.83, 3539.89)	(1650.05, 1996.74)	
GMFR (95% CI) at Day	7.11	3.78	
29, 95% CI	(6.48, 7.79)	(3.42, 4.17)	
GMR (97.5% CI)ª	1.78 (1.56, 2.04)		
Seroresponse rate	380/380, 100	340/342, 99.4	
(95% CI) at Day 29 ⁶	(99.0, 100)	(97.9, 99.9)	
Difference in seroresponse rates (97.5% CI) ^c	1.2 (-1.3, 3.7)		

• Bivalent booster (.214) resulted in superior neutralizing GMT against Omicron compared to mRNA-1273 for all participants (includes both **seronegative participants** and **seropositive participants**)

^a Based on ANCOVA modeling; the model includes adjustment for treatment group, prior SARS-CoV-2 infection, pre-booster antibody titers, and age groups. ^b Seroresponse at a participant level is defined as a change from below the LLOQ to equal or above 4 x lower limiting of quantification (LLOQ) if the participant's baseline is below the LLOQ, or at least a 4-fold rise if the baseline is equal to or above the LLOQ.

^C 97.5% CI was calculated using a stratified Miettinen-Nurminen method and adjusting by age group. The SRR difference is a calculated common risk difference using inverse-variance stratum weights and the middle point of Miettinen-Nurminen confidence limits of each one of the stratum risk differences



Bivalent booster (.214) meets non-inferior neutralizing GMT against ancestral SARS-CoV-2 (D614G)

	All participants			Only baseline seronegative participants	
	mRNA-1273.214 50 µg (N=428)	mRNA-1273 50 µg (N=367)		mRNA-1273.214 50 µg (N=334)	mRNA-1273 50 μg (N=260)
Pre-booster GMT, 95%	1266.74	1521.00		1603.35	1944.78
Cl	(1120.19, 1432.47)	(1352.77, 1710.15)		(1420.26, 1810.05)	(1725.35, 2192.12)
Estimated GMTs (95%	6422.32	5286.63		6555.69	5301.37
CI) at Day 29ª	(5990.12, 6885.71)	(4887.07, 5718.86)		(6122.34, 7019.72)	(4931.77, 5698.66)
GMFR (95% CI) at Day	4.72	3.71		4. 13	3. 11
29, 95% CI	(4.36, 5.11)	(3.42, 4.03)		(3.84, 4.44)	(2.88, 3.36)
GMR (97.5% CI)ª	1.22 (1.08, 1.37)			1.24 (1.12, 1.37)	
Seroresponse rate	334/334, 100	260/260, 100		383/383, 100	347/347, 100
(95% CI) at Day 29 ⁶	(98.9, 100)	(98.6, 100)		(99.0, 100)	(98.9, 100)
Difference in seroresponse rates (97.5% CI) ^c	0			0	

^a Based on ANCOVA modeling; the model includes adjustment for treatment group, prior SARS-CoV-2 infection (only for the baseline seronegative participants), prebooster antibody titers, and age groups.

^b Seroresponse at a participant level is defined as a change from below the LLOQ to equal or above 4 x lower limiting of quantification (LLOQ) if the participant's baseline is below the LLOQ, or at least a 4-fold rise if the baseline is equal to or above the LLOQ.

^C 97.5% CI was calculated using a stratified Miettinen-Nurminen method and adjusting by age group. The SRR difference is a calculated common risk difference using inverse-variance stratum weights and the middle point of Miettinen-Nurminen confidence limits of each one of the stratum risk differences



Conclusions

- The mRNA-1273.214 50 µg booster dose was well-tolerated and the safety and reactogenicity profile was similar to that of the prototype mRNA-1273 50 µg booster dose
- All primary and key secondary immunogenicity objectives were met:
 - mRNA-1273.214 (50 µg) elicited a superior neutralizing antibody response against
 Omicron, compared to the prototype mRNA-1273 (50 µg) 28 days after the booster dose
 - mRNA-1273.214 (50 µg) elicited a non-inferior neutralizing antibody response against the ancestral SARS-CoV-2 compared to the prototype mRNA-1273 (50 µg) 28 days after the booster dose
- mRNA-1273.214 (50 µg) also induced a potent neutralizing antibody response against
 Omicron in all individuals regardless of prior SARS-CoV-2 infection status pre-booster





Our mission

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

