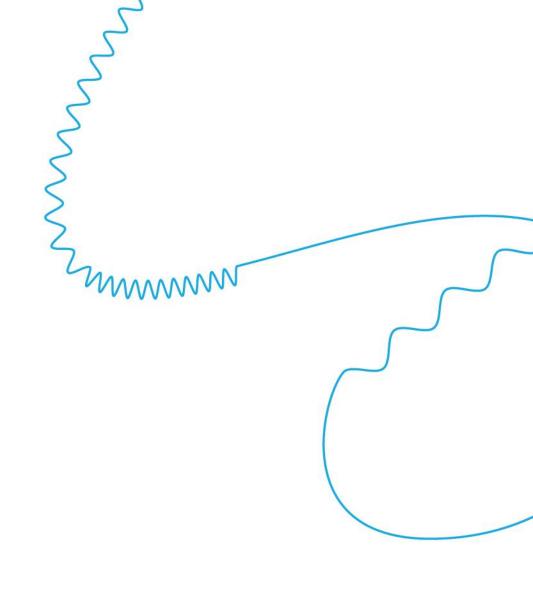
Second Quarter 2022 Financial Results

August 3rd, 2022





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 statements regarding: anticipated sales, including the timing of sales, under advance purchase agreements in 2022 and the associated dollar amounts to be received, which should not be construed as expected 2022 revenue; the timing of data from proof-ofconcept studies in rare diseases and immuno-oncology; the repurchase by Moderna of shares of its common stock under its repurchase programs; the ability of mRNA-1273.214 to induce higher neutralizing antibody titers against Omicron subvariants BA.4/5 when compared to the currently authorized booster; COVID market dynamics and Moderna's ability to meet market needs for fall booster season and the timing for deliveries of fall boosters; potential accelerated approval of mRNA-1010 (flu); the timing of the Company's Phase 1 trial of its combination COVID + flu + RSV vaccine candidate; the ability of the Moderna COVID-19 Vaccine to provide protection against COVID-19 over time, including against evolving variants of concern; Moderna's expectations regarding the evolution of SARS-CoV-2 and the timing for a transition into an endemic phase; Moderna's preparations for commercial sales in 2023; capital allocation; Moderna's 2022 financial framework; Moderna's global public health strategy; and Moderna's goal to achieve net-zero carbon emissions globally by 2030. In some cases, forward-looking statements can be identified by terminology such as "will," "may," "should," "could," "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, those risks and uncertainties described under the heading "Risk Factors" in Moderna's Annual Report on Form 10-K for the fiscal year ended December 31, 2021 and Quarterly Report on Form 10-Q for the quarterly period ended March 31, 2022, each 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 of this presentation.



2Q22 earnings call agenda

- 1 Business Review Stéphane Bancel, CEO
- 2 Spikevax®COVID-19 Vaccine Paul Burton, M.D., Ph.D., CMO
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Financial highlights 2Q22

Second quarter 2022 GAAP financial results

- Revenue: \$4.7 billion (+9% YoY)
- Net income: \$2.2 billion (-21% YoY)
- Continued reduction in shares outstanding in 2Q22
 - 2Q22: Repurchased 9 million shares for \$1.3 billion (average price of \$142)
 - Total of 18 million shares repurchased since first share repurchase program initially put in place in 2021 (4Q21 to 08/02/22)

2022 outlook

- Reiterating advance purchase agreements for expected delivery in 2022 of ~\$21 billion
- Announcing new share repurchase program for an additional \$3 billion



Business updates and pipeline advances



COVID Booster Commercial Updates

- New supply contract with the U.S. government for 70 million doses (option for 4 million pediatric doses exercised) with options to purchase an additional 230 million doses
- Canada and UK exercised options for 2H22 (now included in \$21 billion 2022 APAs)



Spikevax Adolescent/ Pediatric Authorizations

- Authorization received from the U.S. FDA (6 months to 17 years old)
- Health Canada authorization and Therapeutics Goods
 Administration (Australia) conditional approval received
 (6 months to 5 years)



Pipeline Advances

- Four programs in Phase 3
- Flu (mRNA-1010) Phase 3 immunogenecity study started
- Flu (mRNA-1020/-30) Phase 1/2 trial fully enrolled
- COVID + Flu Phase 1/2 trial fully enrolled
- Open IND for **checkpoint vaccine program**
- First patient dosed in GSDA1 program



Data Readouts from Proof-of-Concept Studies in 2H22

- Phase 1/2 data from propionic acidemia (PA) program expected in '22
- Phase 2, randomized, data from personalized cancer vaccine (PCV) program expected in 4Q22



Moderna as of August 2022

Pipeline

Commercial

Moderna COVID-19 Vaccine/Spikevax®

Phase 3

COVID boosters, Flu, RSV, CMV

Phase 2

Zika, PCV, VEGF-A

46 development programs

Respiratory vaccines

- · COVID variant boosters (variant-specific and bivalents) in Phase 2/3
- Older adults RSV in Phase 3: Pediatric RSV in Phase 1
- Flu (mRNA-1010) in Phase 3; Flu (mRNA-1020/-**30)** in Phase 1/2
- Flu + COVID in Phase 1/2
- hMPV + PIV3 in Phase 1b age de-escalation study
- Flu + COVID + RSV, RSV + hMPV, Endemic **HCoV** in preclinical

Latent vaccines

- CMV in Phase 3
- EBV, HIV in Phase 1
- HSV, VZV in preclinical

Public health vaccines

- **Zika** in Phase 2
- Nipah in Phase 1

mRNA therapeutics

14 medicines in 4 therapeutic areas

- 5 Immuno-Oncology: PCV in Phase 2; KRAS, Triplet, IL-12, checkpoint open IND
- 6 Rare Diseases: PA, MMA, GSD1a in Phase 1/2; PKU, CN-1, CF in preclinical
- 2 Cardiovascular Diseases: VEGF-A in Phase 2; Relaxin in preclinical
- 1 Autoimmune Diseases: PD-L1 in preclinical

~3,400 employees¹



7th

Consecutive year top employer by Science

11 commercial

subsidiaries across North America, Europe and Asia Pacific

~\$18.1B

of cash and investments (unaudited)^{1,2}









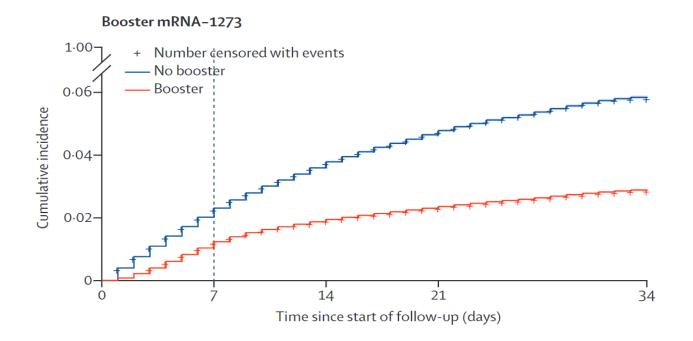
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Boosting with mRNA-1273 provides substantial protection against COVID-19 infection and hospitalization

3,111,159 matched pairs in Spanish nationwide registry between January 3 – February 6, 2022



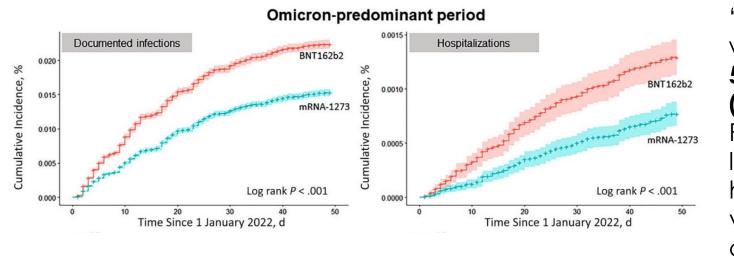
"Estimated effectiveness was 52.5% (51.3–53.7) for an mRNA-1273 booster and 46.2% (43.5–48.7) for a BNT162b2 booster....
Estimated effectiveness was higher for mRNA-1273 compared with BNT162b2 and increased with time between completed primary vaccination and booster."

Monge S et al., Lancet Infect Dis. 2022 Jun 2:S1473-3099 (22)00292-4. https://doi.org/10.1016/S1473-3099 (22)00292-4



Boosting with mRNA-1273 provides substantial protection against COVID-19 infection and hospitalization

462,950 booster recipients September – December 2021 in U.S. Veteran Affairs Medical Center study



"[Relative vaccine effectiveness] (95% CI) was 19% (17-22%) for confirmed infection, 52% (46-57%) for hospitalization, and 83% (65-92%) for ICU admission or death.

Recipients of the mRNA-1273 vaccine had a lower cumulative incidence of infections and hospitalizations compared with BNT-162b2 vaccine (log-rank p-value p<0.001 for both comparisons)."

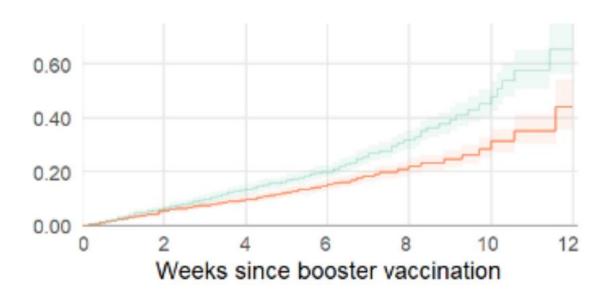
Butt AA, et al., Clin Infect Dis. 2022 May 3:ciac328. https://doi.org/10.1093/cid/ciac328



Boosting with mRNA-1273 provides substantial protection against COVID-19 infection and hospitalization

3,056,862 matched pairs in NHS England between October 29, 2021 and January 31, 2022

COVID-19 Hospitalization, cumulative incidence/1000



https://www.medrxiv.org/content/10.1101/2022.07.29.22278186v1.full.pdf Peer review of study is pending "Booster vaccination with mRNA-1273
COVID-19 vaccine was more effective than
BNT162b2 in preventing SARS-CoV-2 infection
and COVID-19 hospitalisation during the first
12 weeks after vaccination, during a period
of Delta followed by Omicron variant
dominance."



disCOVEries study: Innovative, decentralized trial designed to compare Pfizer vs. Moderna antibody levels

- Real-world assessment of antibody levels
 - Used mobile health technology to recruit/enroll participants and at-home blood collection self-conducted by participants
- The study was designed to compare, head-tohead Pfizer-Pfizer-Pfizer (PPP) vs. Moderna-Moderna-Moderna (MMM) antibody levels
- Observational, prospective 3-month study
- Enrolled ~850 participants
 - 60% female, 47% reporting as Asian, Black or African American, Hispanic or Latino and average age of 44



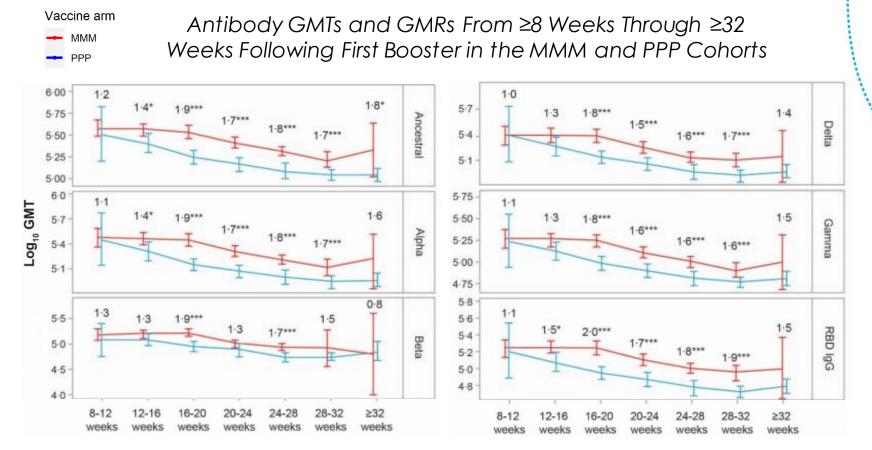
A Study to Determine Antibody Levels After Receiving COVID-19 Boosters of Any Kind (disCOVEries)

 $\underline{https://www.clinicaltrials.gov/ct2/show/NCT05367908?term=NCT05367908\&draw=2\&rank=1$



Results show higher antibody levels with MMM vs. PPP for ancestral virus and variants of concern

- Primary endpoint: Antibody level since receiving a COVID-19 booster (each participant providing 3 total samples at approximately 0-, 1-, and 2- months postenrollment)
- Results shows higher antibody levels with MMM vs. PPP for variants of concerns



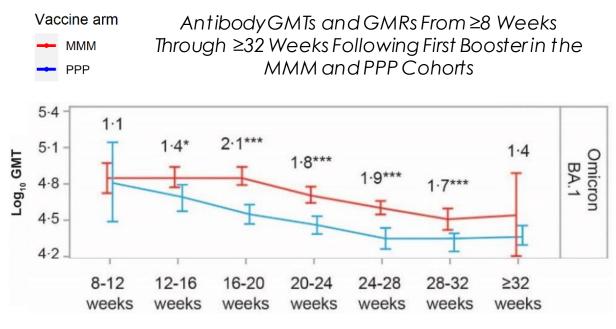
^{***} P<0.001 for significance

GMTs and corresponding 95% CIs were based on raw data without model adjustment and were plotted over time for the MMM and PPP vaccine/booster series arms. The number displayed above each GMT represents the GMR when comparing MMM vs PPP, calculated from the ANCOVA model



Results show higher antibody levels with MMM vs. PPP for Omicron BA.1

- Results show higher antibody levels with MMM vs. PPP for Omicron BA.1 and better durability
 - Moderna titer levels at 24-28
 weeks equal to Pfizer titer levels at 12-16 weeks



*** P<0.001 for significance



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We are advancing two bivalent candidates for the fall to meet different market needs

mRNA-1273.214

(25 μg of mRNA-1273 and 25 μg of Omicron BA.1)

 Demonstrated significantly higher titers against the BA.4/5 strain in a clinical trial before the fall booster season, when compared to the currently authorized booster

mRNA-1273.222

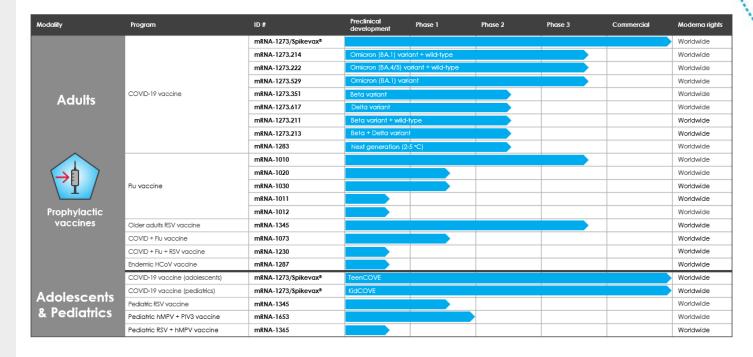
(25 μg of mRNA-1273 and 25 μg of Omicron BA.4/5)

 Based on the BA.4/5 strain and is being developed consistent with recent FDA advice



Respiratory vaccines: Flu, RSV vaccines ongoing in Phase 3 studies

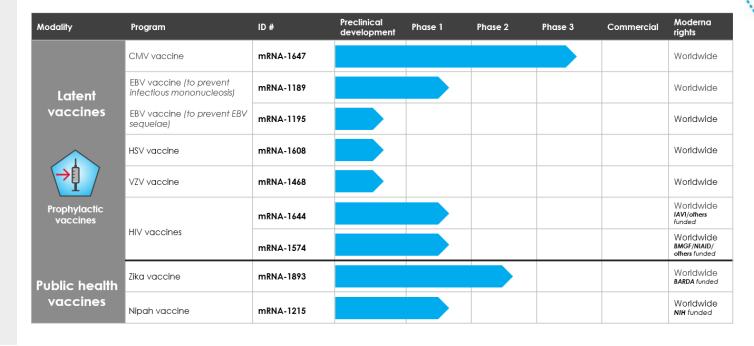
- COVID-19 variant boosters and next generation booster (mRNA-1283) in development
- Flu (mRNA-1010) Phase 3 safety & immunogenecity trial ongoing to support potential accelerated approval and preparing for Phase 3 efficacy study in fall 2022 (if needed); Flu (mRNA-1020/-30) Phase 1/2 trial fully enrolled
- Older adults RSV Phase 3, known as ConquerRSV, is ongoing; Pediatric RSV in Phase 1
- Combination COVID + flu (mRNA-1073) Phase 1/2 fully enrolled
- Combination COVID + flu + RSV (mRNA-1230) in preclinical, expected to start Phase 1 trial in 2022;
 Endemic HCoV in preclinical
- Pediatric hMPV + PIV3 Phase 1b fully enrolled;
 Pediatric RSV + hMPV in preclinical





Latent & public health vaccines: CMV vaccine ongoing in Phase 3 study

- CMV vaccine pivotal Phase 3 study, known as CMV ictory, is ongoing
- EBV vaccine (to prevent infectious mononucleosis)
 Phase 1 is ongoing; EBV vaccine (to prevent EBV sequelae) in preclinical
- HIV vaccines Phase 1 trials are ongoing
- HSV and VZV vaccines in preclinical
- **Zika vaccine** ongoing in a Phase 2 study
- **Nipah vaccine** Phase 1 study, led by the NIH, is ongoing (first participant dosed in July)





mRNA therapeutics: Data expected from PA and PCV programs in '22

Immuno-oncology

- PCV Phase 1 ongoing; Phase 2 fully enrolled, data expected in 4Q 2022
- KRAS Phase 1 ongoing; evaluating next steps for the program
- Triplet, IL-12 ongoing in Phase 1
- Checkpoint vaccine open IND

Cardiovascular

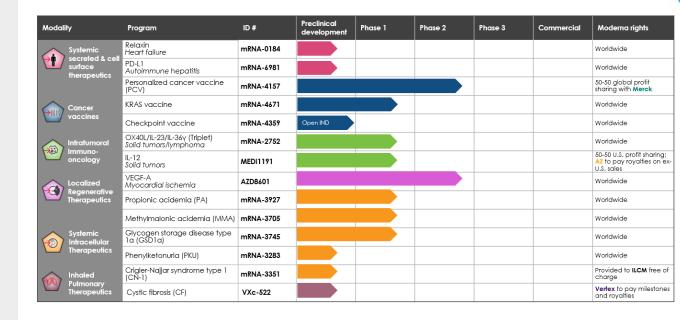
- VEGF After portfolio review AstraZeneca returns program;
 Moderna evaluating next steps for the program
- Relaxin in preclinical

Autoimmune

- IL-2 stopping after early clinical data and evolving competitive landscape
- PD-L1 in preclinical

Rare diseases

- PA Phase 1/2 cohorts 1 & 2 fully enrolled; enrolling additional cohorts
- MMA Phase 1/2 cohort 1 fully enrolled; enrolling additional cohorts
- GSD1a Phase 1 trial first patient dosed
- PKU, CN-1 and CF in preclinical



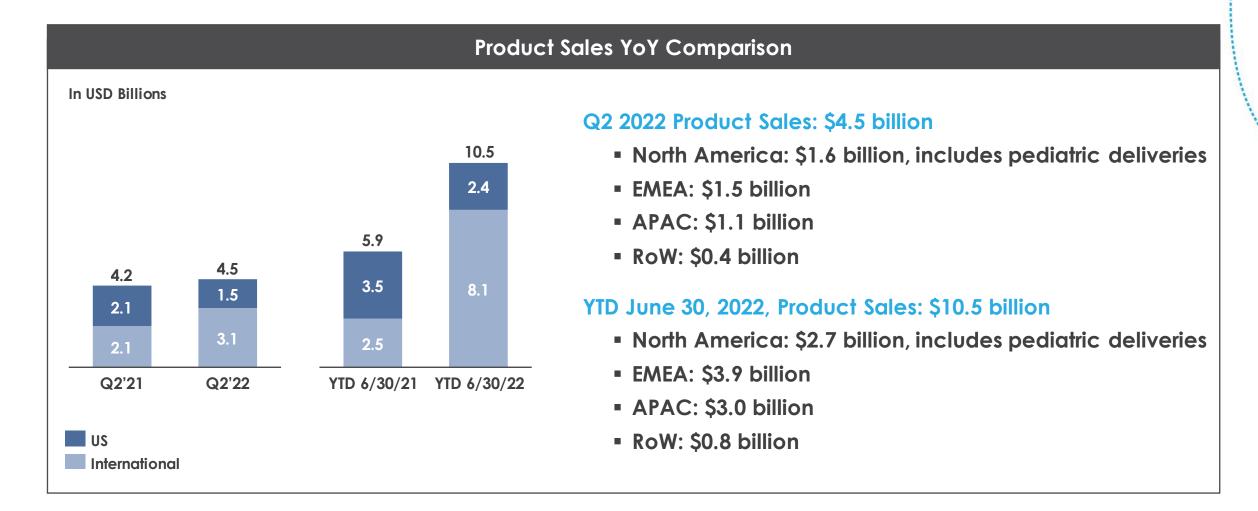


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Second quarter 2022 Product Sales of \$4.5 billion, \$10.5 billion in 1H 2022 (unaudited)

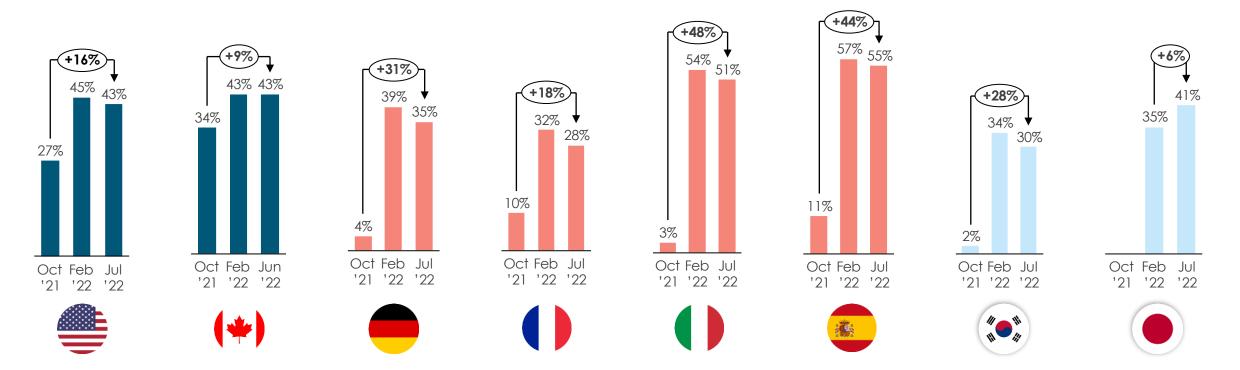




Spikevax® continues to show substantial market share

Booster market in OECD countries continue to be an mRNA vaccine market

Spikevax® Cumulative Booster Market Share



Sources: (Data snapshot was downloaded on 7/20/22 from each country's website (data shown is until 07/13 (US), 06/19 (Canada), 07/10 (EU4), 07/17 (Korea, JP); all the historical data might be restated in the future)

- US: <u>Booster authorized in ages 65+</u>, high-risk individuals on Oct. 20, <u>Booster authorized in ages 18+</u> on Nov. 19; https://data.cdc.gov/Vaccinatiors/COVID-19-Vaccinations-in-the-United-States-Jurisdi/unsk-b7fc
- CA: Booster authorized in 18+ years old on Nov. 15, 2021: https://health-infobase.canada.ca/covid-19/vaccine-administration/
- EU: Booster recommended in ages 18+ on Oct. 25; https://www.ecdc.europa.eu/en/publications-data/data-covid-19-vaccination-eu-eea
- SK: Moderna vaccine granted EUA on Oct. 26, 2021; https://ncv.kdca.go.kr/vaccineStatus.es?mid=a11710000000
- JP: Moderna Booster recommended on Dec. 16, 2021; https://www.kantei.go.ip/

Methodology

- Oct '21 = Cumulative Moderna share of administered 3rd doses 10/3-10/31/21
- Feb '22 = Cumulative Modema share of administered 3rd doses 10/3/21-2/13/22
- Jul '22 = Cumulative Moderna share of administered Booster doses (3rl and 4th) 10/3/21- mid-July'22 (varies by country), except Canada is until June'19
- · Jul '22 Share is calculated for combined Third and Fourth Doses (vast majority is booster; may include doses for immuno-compromised)
- · Share is only calculated for doses where manufacturer has been identified in the public data source
- For Italy and Japan, data is not reported for fourth booster dose volumes



New U.S. government contract for fall 2022 COVID booster doses

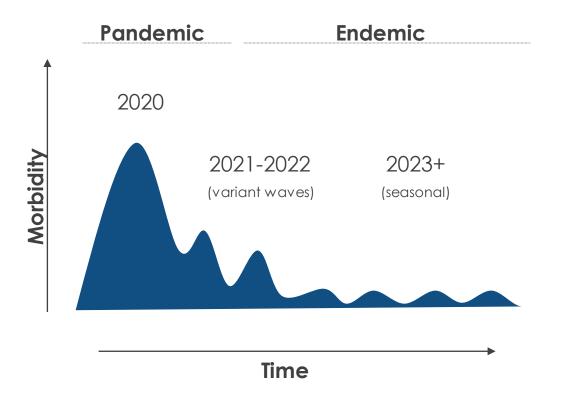
- New U.S. government contract includes an award up to \$1.8 billion for 70 million doses to be delivered in 2022; additional options, if exercised, may raise total to 300 million doses
 - U.S. government exercised option for an additional 4 million pediatric doses (included in the 70 million doses for 2022)

 Doses scheduled for delivery will be the Omicron-adapted bivalent COVID booster (mRNA-1273.222), which consists of wild-type + Omicron BA.4/5 variant



COVID booster commercial outlook in 2022

ILLUSTRATIVE



Commercial Dynamics

- Moderna is advancing two bivalent candidates for fall 2022 based on different market needs for Omicron subvariants (mRNA-1273.214 and mRNA-1273.222)
- Both bivalent candidates contain 25 µg of the currently authorized booster (mRNA-1273) and 25 µg of an Omicron subvariant(s)
- Deliveries for fall boosters to start in September and will be more heavily weighted in 4Q22 as we scale up manufacturing for bivalent boosters and receive regulatory authorizations
- Moderna's commercial infrastructure is prepared for a 2023 commercial market



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Second quarter 2022 financial results

In \$ millions, except per share amounts (unaudited)	Q2 2022		Q2 2021		QoQ Change (Q2 22 vs. Q2 21)	
Product sales	\$	4,531	\$	4,197	\$ 334	8 %
Grant revenue		183		139	44	32 %
Collaboration revenue		35		18	17	94 %
Total revenue		4,749		4,354	395	9 %
Cost of sales		1,381		750	631	84 %
Research and development		710		421	289	69 %
Selling, general and administrative		211		121	90	74 %
Total operating expenses		2,302		1,292	1,010	78 %
Income from operations		2,447		3,062	(615)	(20)%
Other income		27		1	26	NM
Provision for income taxes		277		283	(6)	(2) %
Net income	\$	2,197	\$	2,780	\$ (583)	(21)%
Earnings per share – Diluted	\$	5.24	\$	6.46	\$ (1.22)	(19)%
Weighted average shares – Diluted		419		431	(12)	(3) %
Effective tax rate		11 %		9 %		

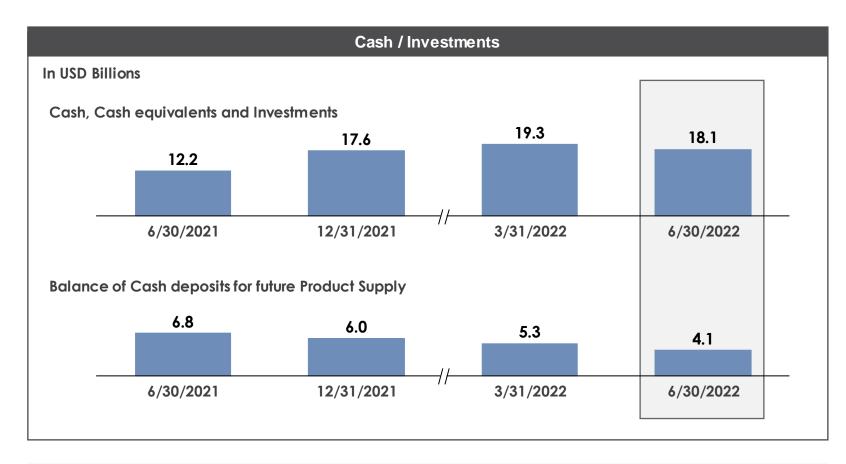


Year-to-date 2022 financial results

In \$ millions, except per share amounts (unaudited)		2022 YTD ended 6/30/22		2021 YTD ended 6/30/21		YoY	
						Change	
Product sales	\$	10,456	\$	5,930	\$	4,526	76 %
Grant revenue		309		333		(24)	(7) %
Collaboration revenue		50		28		22	79 %
Total revenue		10,815		6,291		4,524	72 %
Cost of sales		2,398		943		1,455	154 %
Research and development		1,264		822		442	54 %
Selling, general and administrative		479		198		281	142 %
Total operating expenses		4,141		1,963		2,178	111 %
Income from operations		6,674		4,328		2,346	54 %
Other income (expense)		29		(5)		34	NM
Provision for income taxes		849		322		527	164 %
Netincome	\$	5,854	\$	4,001	\$	1,853	46 %
Earnings per share – Diluted	\$	13.85	\$	9.30	\$	4.55	49 %
Weighted average shares – Diluted		423		430		(7)	(2) %
Effective tax rate		13 %		7 %			



Cash/ Investments and Cash Deposits (unaudited)



 Cash, Cash equivalents and Investments as of June 30, 2022 at \$18.1 billion, down from \$19.3 billion as of March 31, 2022

Balance of Cash deposits for future product supply as of June 30, 2022 at \$4.1 billion, below prior quarter driven by product deliveries against customer deposits

Cash and investments decreased, reflecting the share buybacks in Q2



Moderna's capital allocation priorities

Reinvest in the business & accelerate investment in R&D, manufacturing infrastructure and company buildout

Seek attractive external investment opportunities (licenses and/or M&A) to further expand the reach of Moderna's technology

3 Return capital to shareholders

Share buyback details

Share buybacks:

- **Q2 2022: 9 million shares** for \$1.3 billion
- Cumulative buybacks to date: 18 million shares (~4% of outstanding diluted shares) for \$3 billion
- Announced \$3 billion share buyback program in February 2022 with approximately \$1 billion remaining capacity as of today
- Announcing approval of a new \$3 billion share buyback program in August 2022, with no expiry



2022 updated financial framework

Sales

- Advance purchase agreements (APAs) for expected delivery in 2022 of ~\$21 billion of product sales, reflecting new US government contract for 2022 and a downward adjustment for COVAX doses
- We expect sales to be higher in Q4 than in Q3, driven by the timing of authorizations and regulatory approvals of our updated COVID vaccines

Cost of sales

 We now expectfull year 2022 reported cost of sales in the mid-20s percentage range, with possible high-20s in the event of further charges due to product updates

R&D and SG&A Expenses

We continue to expectfull year R&D and SG&A expenses of ~\$4 billion

Tax rate

We now expect an Effective Tax Rate for the full year in the low- to mid-teen percentage range

Capital Expenditures

We continue to expect capital expenditures in the range of \$0.6-\$0.8 billion



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Moderna's 2022 priorities

- Execute on \$21B signed APAs and deliver fall boosters
- Execute on late-stage clinical vaccine pipeline with flu, RSV, and CMV Phase 3 trials
- Advance therapeutic programs and share proof-of-concept readouts for our PA and PCV programs
- Bring forward more mRNA candidates into development
- Expand our mRNA platform



Published first ESG report in June

Select highlights:

- Medicines for patients: Announced global public health strategy including goal to target 15 priority pathogens by 2025 and mRNA access collaborative
- Employees: Continued workforce growth with focus on talent and creating a culture of inclusion and belonging
- **Environment**: Goal to achieve net-zero carbon emissions globally by 2030 (will share 2021 baseline data after third party verification)
- Community: Launched the Moderna Charitable Foundation
- Governance & ethics: Continue to evolve ESG governance, commitment to transparency in clinical trials and political engagement, and reporting under SASB framework

Impacting Human Health



https://assets.modernatx.com/m/ccaae809ca9152c/original/Moderna ESG 2021.pdf

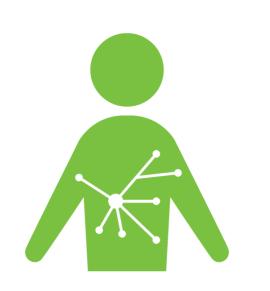




Save the Date Events in 2022

R&D Day
September 8th

> **ESG Day**November 10th

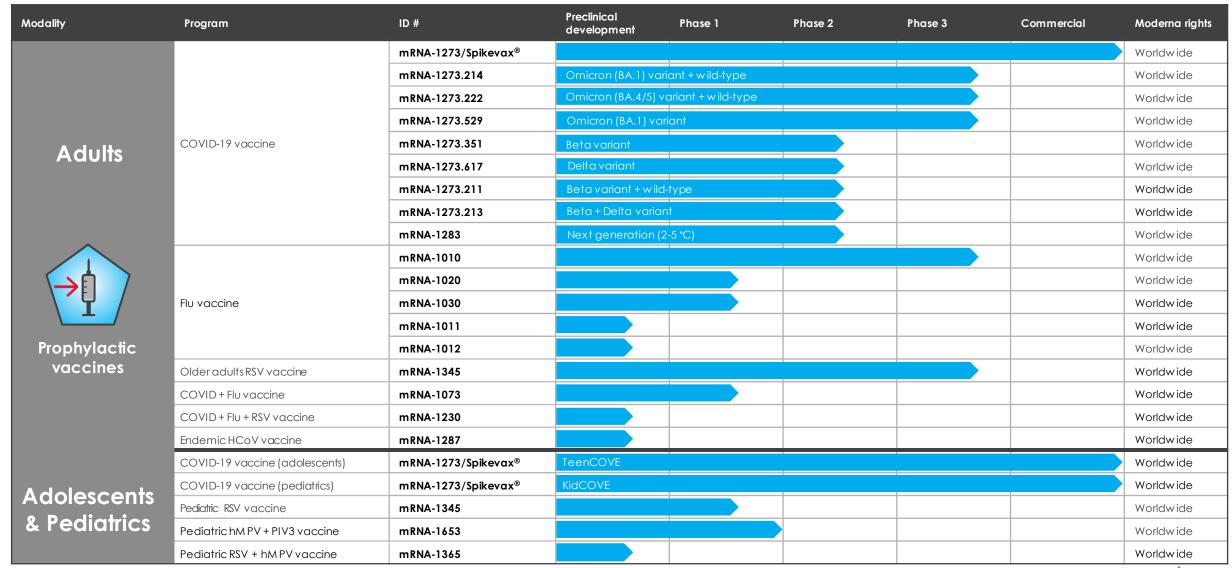


Our mission

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



Moderna's Respiratory Vaccines (Pipeline 1/3)





Moderna's Latent & Public Health Vaccines (Pipeline 2/3)

Modality	Program	ID#	Preclinical development	Phase 1	Phase 2	Phase 3	Commercial	Moderna rights
	CMV vaccine	mRNA-1647						Worldwide
Latent	EBV vaccine (to prevent infectious mononucleosis)	mRNA-1189						Worldwide
vaccines	EBV vaccine (to prevent EBV sequelae)	mRNA-1195						Worldwide
	HSV vaccine	mRNA-1608						Worldwide
Prophylactic vaccines	VZV vaccine	mRNA-1468						Worldwide
	HIV vaccines	mRNA-1644						Worldwide IAVI/others funded
		mRNA-1574						Worldwide BMGF/NIAID/ others funded
Public health vaccines	Zika vaccine	mRNA-1893						Worldwide BARDA funded
	Nipah vaccine	mRNA-1215						Worldwide NIH funded



Moderna's Therapeutics (Pipeline 3/3)

Modality	Program	ID#	Preclinical development	Phase 1	Phase 2	Phase 3	Commercial	Moderna rights
Systemic secreted & cell surface therapeutics	Relaxin Heart failure	mRNA-0184						Worldwide
	PD-L1 Autoimmune hepatitis	mRNA-6981						Worldwide
	Personalized cancer vaccine (PCV)	mRNA-4157						50-50 global profit sharing with Merck
Cancer vaccines	KRAS vaccine	mRNA-4671						Worldwide
	Checkpoint vaccine	mRNA-4359	OpenIND					Worldwide
Intratumoral Immuno-	OX40L/IL-23/IL-36γ (Triplet) Solid tumors/lymphoma	mRNA-2752						Worldwide
Immuno- oncology	IL-12 Solid tumors	MEDI1191						50-50 U.S. profit sharing; AZ to pay royalties on ex- U.S. sales
Localized	VEGF-A Myocardial ischemia	AZD8601						Worldwide
Regenerative Therapeutics	Propionic acidemia (PA)	mRNA-3927						Worldwide
	Methylmalonic acidemia (MMA)	mRNA-3705						Worldwide
Systemic Intracellular	Glycogen storage disease type 1a (GSD1a)	mRNA-3745						Worldwide
Therapeutics	Phenylketonuria (PKU)	mRNA-3283						Worldwide
Inhaled	Crigler-Najjar syndrome type 1 (CN-1)	mRNA-3351						Provided to ILCM free of charge
Pulmonary Therapeutics	Cystic fibrosis (CF)	VXc-522						Vertex to pay milestones and royalties

