UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

Form 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d)
of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): January 13, 2020

WAVE LIFE SCIENCES LTD.
(Exact name of registrant as specified in its charter)

Singapore	**001-37627**	**Not applicable**
(State or other jurisdiction of incorporation)	**(Commission File Number)**	**(IRS Employer Identification No.)**

7 Straits View #12-00, Marina One East Tower	
Singapore	**018936**
(Address of principal executive offices)	**(Zip Code)**

Registrant's telephone number, including area code: +65 6236 3388

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading symbol	Name of each exchange on which registered
$0 Par Value Ordinary Shares	**WVE**	**The Nasdaq Global Market**

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company ☐

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 7.01 Regulation FD Disclosure.

From time to time, the Company presents and/or distributes slides and presentations to the investment community to provide updates and summaries of its business. On January 13, 2020, the Company updated its corporate presentation, which is available on the "For Investors & Media" section of the Company's website at http://ir.wavelifesciences.com/. This presentation is also furnished as Exhibit 99.1 to this Current Report on Form 8-K.

The information in this Item 7.01 shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such a filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

The following exhibit relating to Item 7.01 is furnished and not filed:

Exhibit No.	Document
99.1	Corporate Presentation of Wave Life Sciences Ltd. dated January 13, 2020
104	Cover Page Interactive Data File (embedded within the Inline XBRL document)

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

WAVE LIFE SCIENCES LTD.

By: */s/ Paul B. Bolno, M.D.*
Paul B. Bolno, M.D.
President and Chief Executive Officer

Date: January 13, 2020

Exhibit 99.1

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Wave Life Sciences

Corporate Presentation

January 13, 2020

Forward-looking statements

This document contains forward-looking statements. All statements other than statements of historical facts contained in this document, including statements regarding possible or assumed future results of operations, preclinical and clinical studies, business strategies, research and development plans, collaborations and partnerships, regulatory activities and timing thereof, competitive position, potential growth opportunities, use of proceeds and the effects of competition are forward-looking statements. These statements involve known and unknown risks, uncertainties and other important factors that may cause the actual results, performance or achievements of Wave Life Sciences Ltd. (the "Company") to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. In some cases, you can identify forward-looking statements by terms such as "may," "will," "should," "expect," "plan," "aim," "anticipate," "could," "intend," "target," "project," "contemplate," "believe," "estimate," "predict," "potential" or "continue" or the negative of these terms or other similar expressions. The forward-looking statements in this presentation are only predictions. The Company has based these forward-looking statements largely on its current expectations and projections about future events and financial trends that it believes may affect the Company's business, financial condition and results of operations. These forward-looking statements speak only as of the date of this presentation and are subject to a number of risks, uncertainties and assumptions, including those listed under Risk Factors in the Company's Form 10-K and other filings with the SEC, some of which cannot be predicted or quantified and some of which are beyond the Company's control. The events and circumstances reflected in the Company's forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Moreover, the Company operates in a dynamic industry and economy. New risk factors and uncertainties may emerge from time to time, and it is not possible for management to predict all risk factors and uncertainties that the Company may face. Except as required by applicable law, the Company does not plan to publicly update or revise any forward-looking statements contained herein, whether as a result of any new information, future events, changed circumstances or otherwise.

Pipeline spanning multiple modalities, novel targets

THERAPEUTIC AREA/MODALITY	TARGET	DISCOVERY	PRECLINICAL	CLINICAL	ESTIMATED U.S. PREVALENCE*	PARTNER
CNS						
Huntington's disease Allele – selective silencing	**WVE-120101** mHTT SNP1			Phase 1b/2a	~10,000 / ~35,000	Takeda 50:50 option
	WVE-120102 mHTT SNP2			Phase 1b/2a and OLE	~10,000 / ~35,000	Takeda 50:50 option
	mHTT SNP3				~8,000 / ~30,000	Takeda 50:50 option
ALS and FTD Allele – selective silencing	C9orf72				~1,800 (ALS) ~7,000 (FTD)	Takeda 50:50 option
Spinocerebellar ataxia 3 Silencing	ATXN3				~4,500	Takeda 50:50 option
CNS diseases	Multiple†					Takeda milestones & royalties
OPHTHALMOLOGY						
Retinal diseases	USH2A and multiple					100% global
HEPATIC						
Metabolic liver diseases Silencing	Multiple					Pfizer milestones & royalties
OTHER						
ADAR RNA-editing	Multiple					100% global

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*Estimates of U.S. prevalence and addressable population by target based on publicly available data and are approximate; for Huntington's disease, numbers approximate manifest and pre-manifest populations, respectively.
†During a four-year term, Wave and Takeda may collaborate on up to six preclinical targets at any one time.
ALS: Amyotrophic lateral sclerosis; FTD: Frontotemporal dementia; CNS: Central nervous system; OLE: Open-label extension

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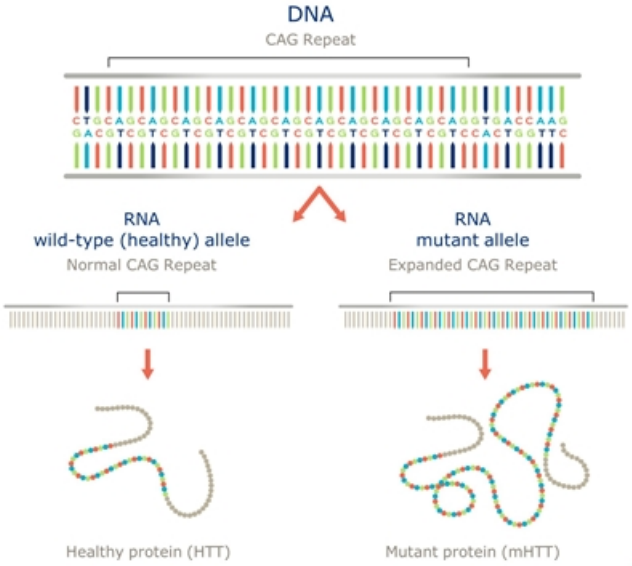
WVE-120101
WVE-120102
Huntington's Disease

Huntington's disease: a hereditary, fatal disorder

- Autosomal dominant disease, characterized by cognitive decline, psychiatric illness and chorea; fatal
- No approved disease-modifying therapies
- Expanded CAG triplet repeat in HTT gene results in production of mutant huntingtin protein (mHTT); accumulation of mHTT causes progressive loss of neurons in the brain
- Wild-type (healthy) HTT protein critical for neuronal function; evidence suggests wild-type HTT loss of function plays a role in Huntington's disease
- 30,000 people with Huntington's disease in the US; another 200,000 at risk of developing the condition



Sources: Auerbach W, et al. *Hum Mol Genet.* 2001;10:2515-2523. Dragatsis I, et al. *Nat Genet.* 2000;26:300-306. Leavitt BR, et al. *J Neurochem.* 2006;96:1121-1129. Nasir J, et al. *Cell.* 1995;81:811-823. Reiner A, et al. *J Neurosci.* 2001;21:7608-7619. White JK, et al. *Nat Genet.* 1997;17:404-410. Zeitlin S, et al. *Nat Genet.* 1995;11:155-163. Carroll JB, et al. *Mol Ther.* 2011;19:2178-2185. HDSA 'What is Huntington's disease?' https://hdsa.org/what-is-hd/overview-of-huntingtons-disease/ Accessed: 11/2/18.; Becanovic, K., et al., Nat Neurosci, 2015. 18(6): p. 807-16. Van Raamsdonk, J.M., et al., Hum Mol Genet, 2005. 14(10): p. 1379-92.; Van Raamsdonk, J.M., et al., BMC Neurosci, 2006. 7: p. 80.

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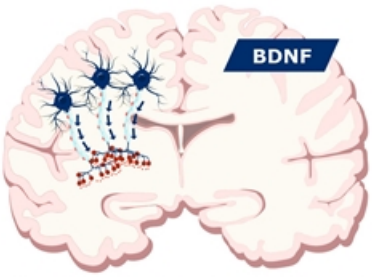
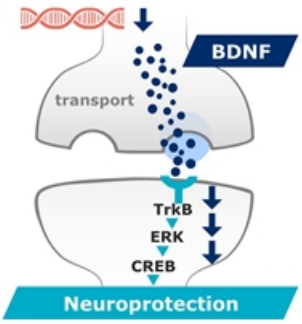
Importance of wild-type huntingtin (wtHTT) in HD

Huntington's disease (HD) may be caused by a dominant gain of function in mutant HTT *and* a loss of function of wtHTT protein

- Evidence suggests wild-type or healthy HTT is neuroprotective in an adult brain
  - Transport of key neurotrophic factors such as brain-derived neurotrophic factor (BDNF) are regulated by wtHTT levels
- Relative proportion of wild-type to mutant protein is critical
  - Increased amount of wild-type protein relative to mutant HTT may result in slower disease progression (measured by age-at-onset)
  - Patients with lack of wild-type have significantly more severe disease





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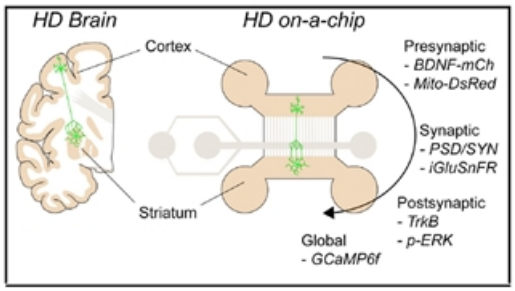
Sources: Van Raamsdonk, J.M., et al., Hum Mol Genet, 2005; Van Raamsdonk, J.M., et al., BMC Neurosci, 2006; Becanovic, K., et al., Nat Neurosci, 2015; Saudou, F. and S. Humbert, The Biology of Huntingtin. Neuron, 2016; Gauthier, L.R., et al., Cell, 2004; Caviston, J.P. and E.L. Holzbaur, Trends Cell Biol, 2009; Ho, L.W., et al., J Med Genet, 2001, Zuccato et al., Science 2001; Zuccato et al., Brain Pathol 2007; Marullo et al. Genome Biol 2010

Wild-type HTT in the cortex appears critical for striatal health



Neuron Type	Genetic Status				Compartment
Cortical	WT	WT	HD	HD	Presynaptic
Striatal	WT	HD	HD	WT	Synaptic / Post-synaptic
Network Status	*Functional*		*Dysfunctional*		

Status of the presynaptic compartment determines the integrity of the network

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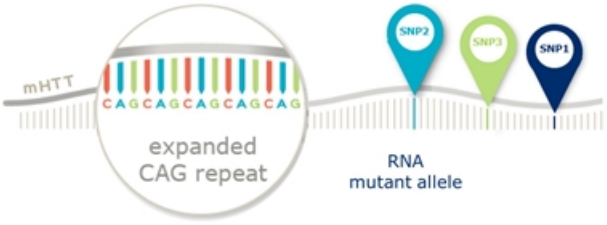
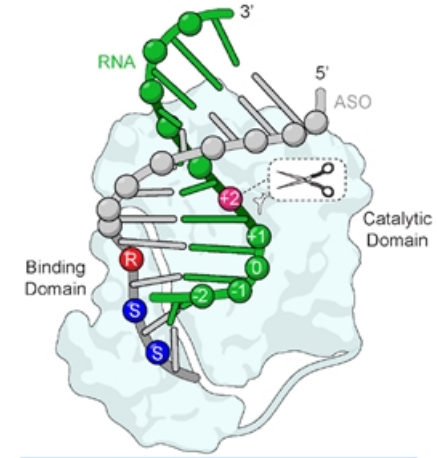
Presented by Dr. Frederic Saudou at Wave's Analyst and Investor Research Day on October 7, 2019
Virlogeux et al., Cell Reports 2018

Wave approach: novel, allele-selective silencing

Aims to lower mHTT transcript while leaving healthy wild-type HTT relatively intact

- Utilize association between single nucleotide polymorphisms (SNPs) and genetic mutations to specifically target errors in genetic disorders, including Huntington's disease (HD)
- Potential to provide treatment for up to 80% of HD population





RNase H and ASO:RNA

Allele-selectivity possible by targeting SNPs associated with expanded long CAG repeat in HTT gene

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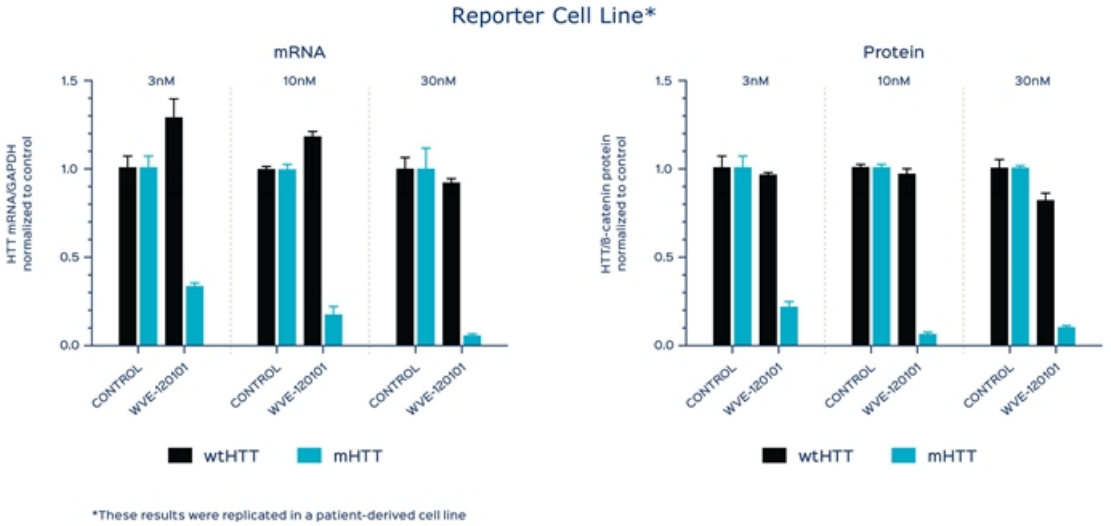
Source: Kay, et al. Personalized gene silencing therapeutics for Huntington disease. *Clin Genet*. 2014;86:29–36.

Selective reduction of mHTT mRNA & protein

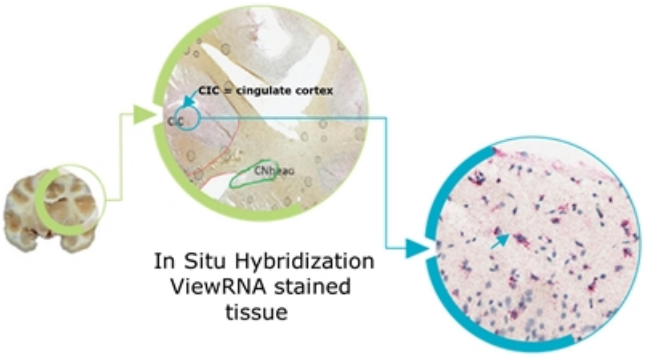


*These results were replicated in a patient-derived cell line

Source: Meena, Zboray L, Svrzikapa N, et al. Selectivity and biodistribution of WVE-120101, a potential antisense oligonucleotide therapy for the treatment of Huntington's disease. Paper presented at: 69th Annual Meeting of the American Academy of Neurology; April 28, 2017; Boston, MA.

Demonstrated delivery to brain tissue

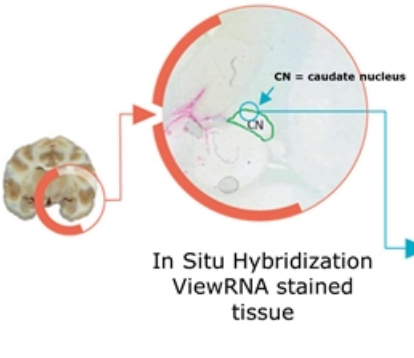
- WVE-120101 and WVE-120102 distribution in cynomolgus non-human primate brain following intrathecal bolus injection



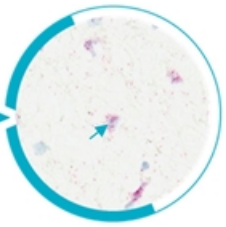
In Situ Hybridization ViewRNA stained tissue

Red dots are WVE-120101 oligonucleotide

Arrow points to nuclear and perinuclear distribution of WVE- 120101 in cingulate cortex



In Situ Hybridization ViewRNA stained tissue



Red dots are WVE-120102 oligonucleotide

Arrow points to nuclear and perinuclear distribution of WVE-120102 in caudate nucleus

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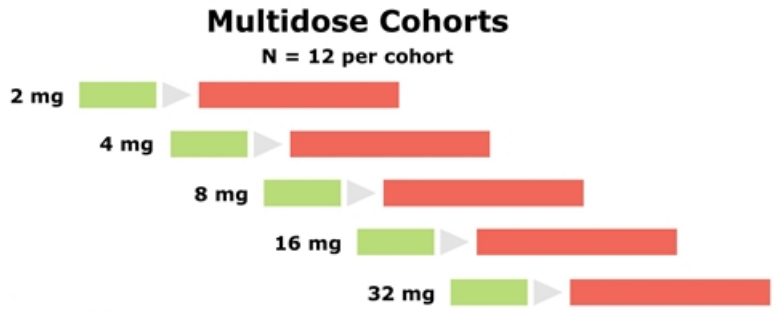
Source: Meena, Zboray L, Svrzikapa N, et al. Selectivity and biodistribution of WVE-120101, a potential antisense oligonucleotide therapy for the treatment of Huntington's disease. Paper presented at: 69th Annual Meeting of the American Academy of Neurology; April 28, 2017; Boston, MA.

PRECISION-HD clinical trial design

Two parallel, multicenter, double-blind, randomized, placebo-controlled Phase 1b/2a clinical trials for WVE-120101 and WVE-120102

PRECISION-HD2 OLE:
Initiated October 2019

PRECISION-HD1 OLE:
Expected to initiate in 2020



- PRECISION-HD2 data from 32 mg cohort in expected in 2H 2020
- PRECISION-HD1 topline data, including 32 mg cohort, in 2H 2020

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OLE: Open label extension; CSF: cerebrospinal fluid *Study day may be longer depending on patient washout period

PRECISION-HD2 topline results

Clinical trial ongoing

Doses	Safety	Biomarker Effects	
		mHTT	wtHTT
• **WVE-120102 2–16 mg (pooled)**	• **Generally safe and well tolerated**	• **Reduction in mHTT compared to placebo (-12.4%[1], p<0.05[2])** • **Analysis across groups suggests dose response at highest doses (p=0.03)[3]**	• **No change in tHTT compared to placebo** • **Ongoing evaluation**
• 32 mg cohort initiated • Assessing dose for next cohort	• Safety profile supports addition of higher dose cohorts	• Potential for greater mHTT reduction at higher doses	• Larger reductions of mHTT expected to result in discernible impact on tHTT

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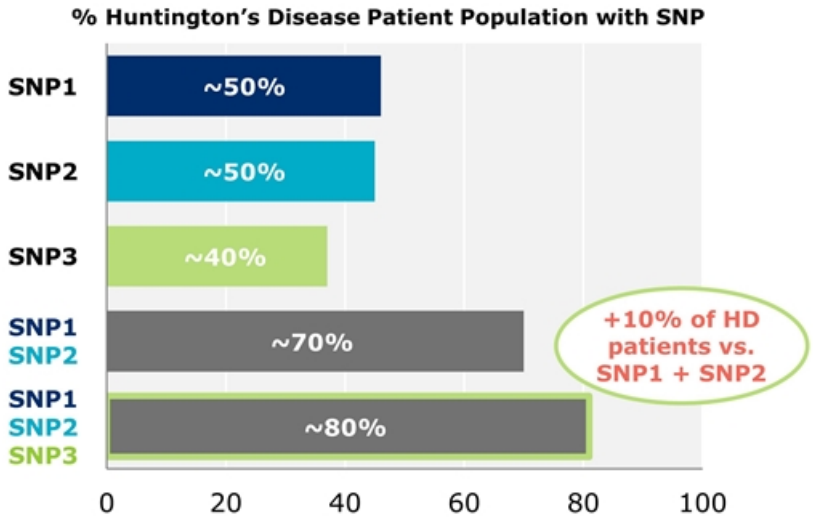
Topline results announced December 30. 2019; mHTT: mutant huntingtin wtHTT: wild-type HTT tHTT: total HTT
[1] Hodges-Lehmann non-parametric shift estimates of the difference between treatment and placebo; [2] Wilcoxon-Mann-Whitney non-parametric significance test; [3] Multiple Contrast Test (MCT)

Advancing allele-selective HD programs

Potential to address ~80% of HD patient population



Intend to explore efficacy in early manifest and pre-manifest HD patient populations

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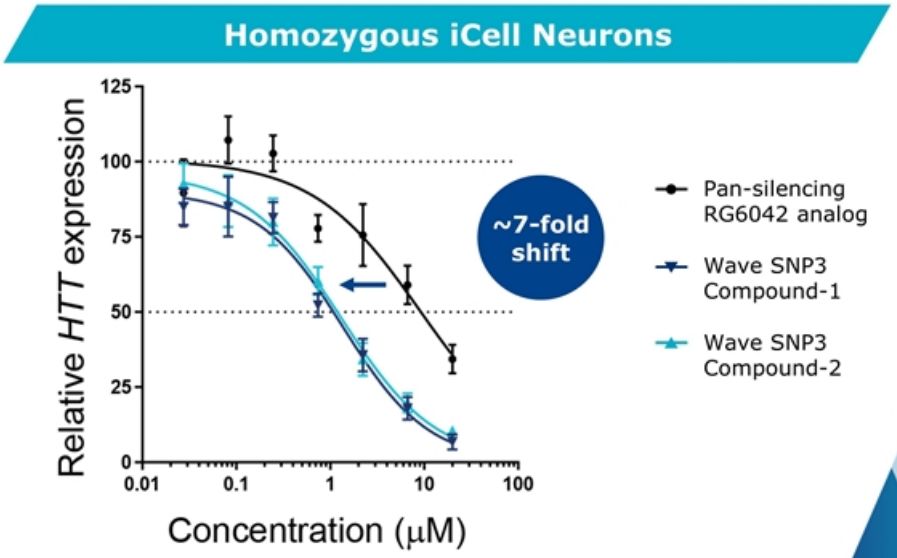
SNP3 Preclinical Program
Huntington's Disease

Potent mutant HTT knockdown activity

Wave allele-selective compounds are more potent than pan-silencing RG6042 analog in preclinical study involving patient-derived neurons

- Greater knockdown of mutant HTT as compared to pan-silencing compound



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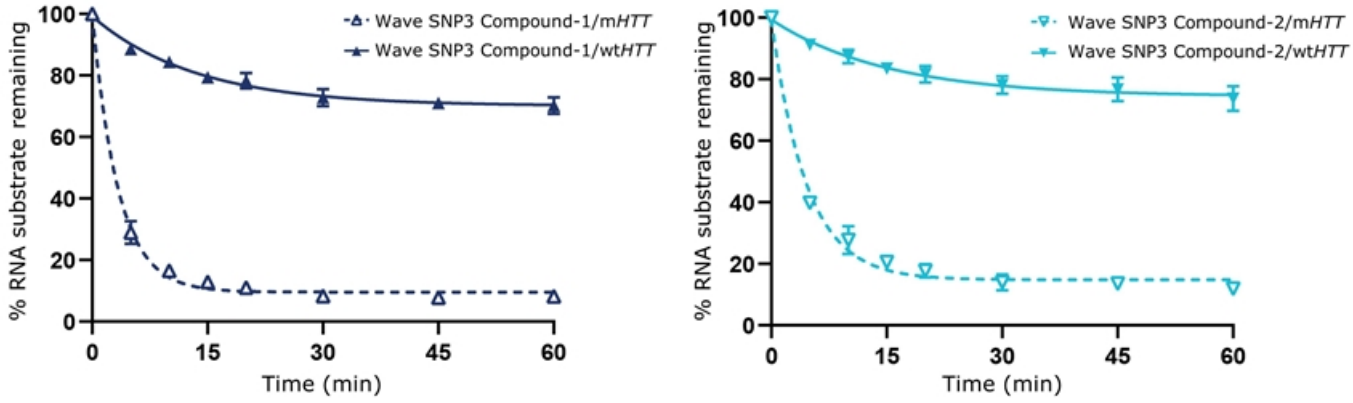
HTT mRNA remaining in iCell neurons (homozygous for SNP) incubated with the indicated ASO under free-uptake conditions. Data show mean ± sem (n=4).

Stereopure oligonucleotides are selective *in vitro*

Stereopure isomers targeting a SNP variant promote RNase H-mediated degradation of mutant *HTT* while sparing wild-type *HTT*

Biochemical RNase H assays



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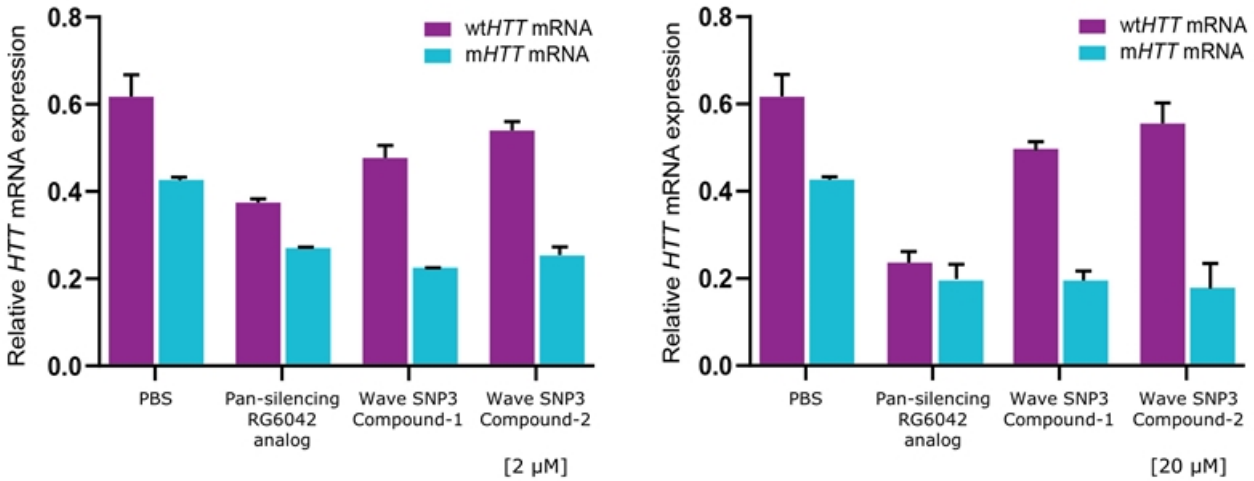
RNase H experiments performed with synthetic RNA substrates corresponding to m*HTT* and wt*HTT* variants (S:E = 100:1; n=2). Percentage of the indicated full-length RNA substrate remaining over time is plotted for the stereopure SNP3 Compound-1 (left) and stereopure SNP3 Compound-2 (right). Abbreviations: S, substrate; E, enzyme.

Demonstration of allele-selective silencing

Stereopure compounds selectively deplete mutant *HTT* mRNA

No loss of selectivity with increasing concentrations



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Neurons were derived from GM21756 patient-derived fibroblasts (heterozygous for SNP) and treated with 2.2 µM (left) or 20 µM (right) of the indicated ASO under gymnotic conditions for 7 days. RNA was quantified and normalized to *TUBB3*. Data are mean ± sem (n=3). Percentage of remaining wt*HTT* and m*HTT* mRNA is indicated.

In vivo model to assess target engagement and durability

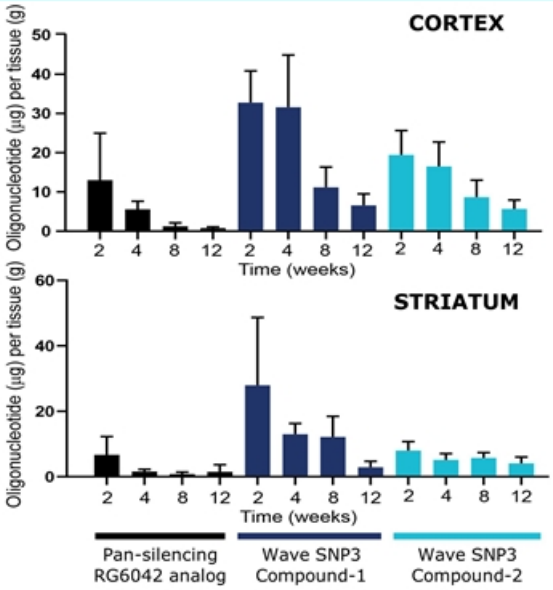
BACHD mouse model

- Expressed transcript includes SNP3 variant that Wave compounds are targeting
- Model is homozygous for mutant *HTT* with SNP3 (only has one type of *HTT*)
- Over-expresses m*HTT* (multiple gene copies)
- No ability to assess allele selectivity

Oligonucleotide concentration in tissues

- Achieved good tissue exposure over 12-weeks in BACHD cortex and striatum

Tissue exposure over time



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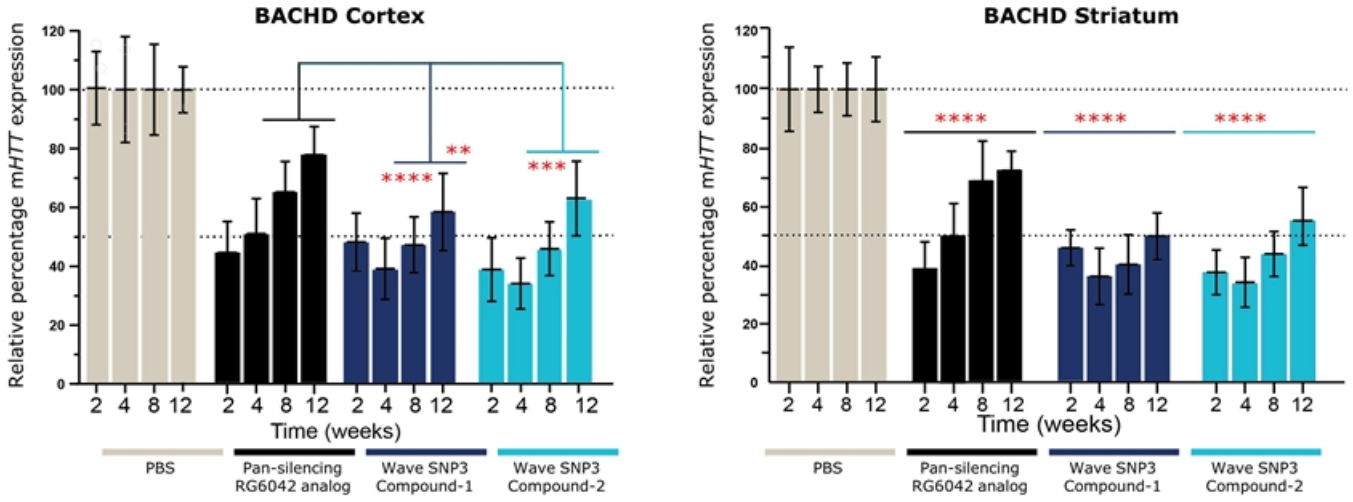
Oligonucleotide or PBS (3 x 100 µg ICV) was delivered to BACHD mice. Oligonucleotides were quantified by ELISA.

Durable *in vivo* mutant *HTT* knockdown with stereopure SNP3 compounds

Knockdown persists for 12 weeks



Clinical development expected to initiate in 2H 2020

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Oligonucleotide or PBS (3 x 100 mg ICV) was delivered to BACHD mice. Relative percentage of HTT/TUBB3 mRNA in cortex with respect to levels in PBS-treated mice is shown at 2-12 weeks post-injection. Statistics: All oligo treatment groups are statistically significantly different from PBS; One-way ANOVA ****, P≤0.0001. Wave SNP3 Compound-1 and Compound-2 are also significantly different from RG6042 analog at 8 and 12 weeks ***, P<0.005; **P=0.001.

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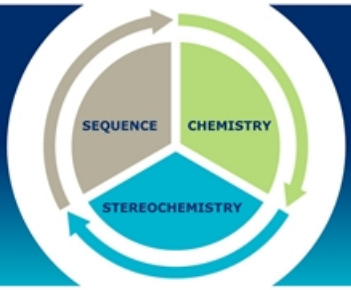
PRISM Platform

PRISM

Enables Wave to target genetically defined diseases with stereopure oligonucleotides across multiple therapeutic modalities

DESIGN

Unique ability to construct stereopure oligonucleotides with one defined and consistent profile



OPTIMIZE

A deep understanding of how the interplay among oligonucleotide sequence, chemistry, and backbone stereochemistry impacts key pharmacological properties

Through iterative analysis of *in vitro* and *in vivo* outcomes and artificial intelligence-driven predictive modeling, Wave continues to define design principles that are deployed across programs to rapidly develop and manufacture clinical candidates that meet pre-defined product profiles

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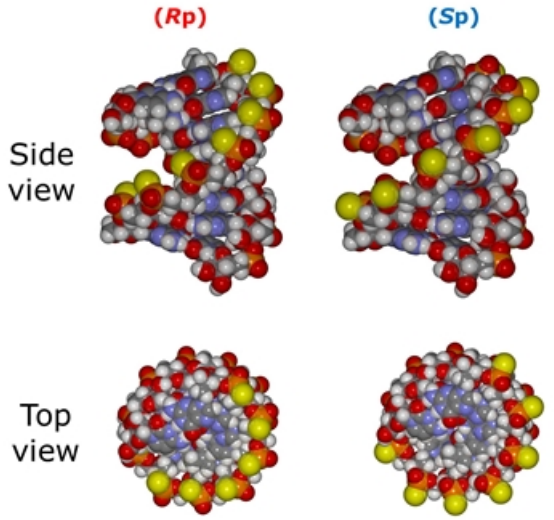
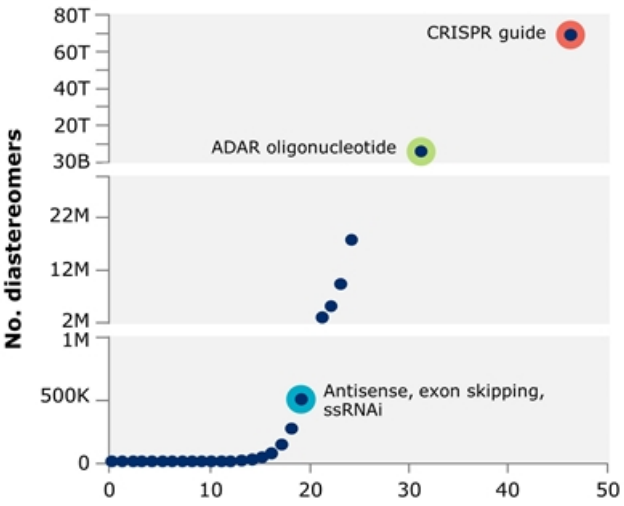
Importance of controlling stereochemistry

Stereochemical diversity



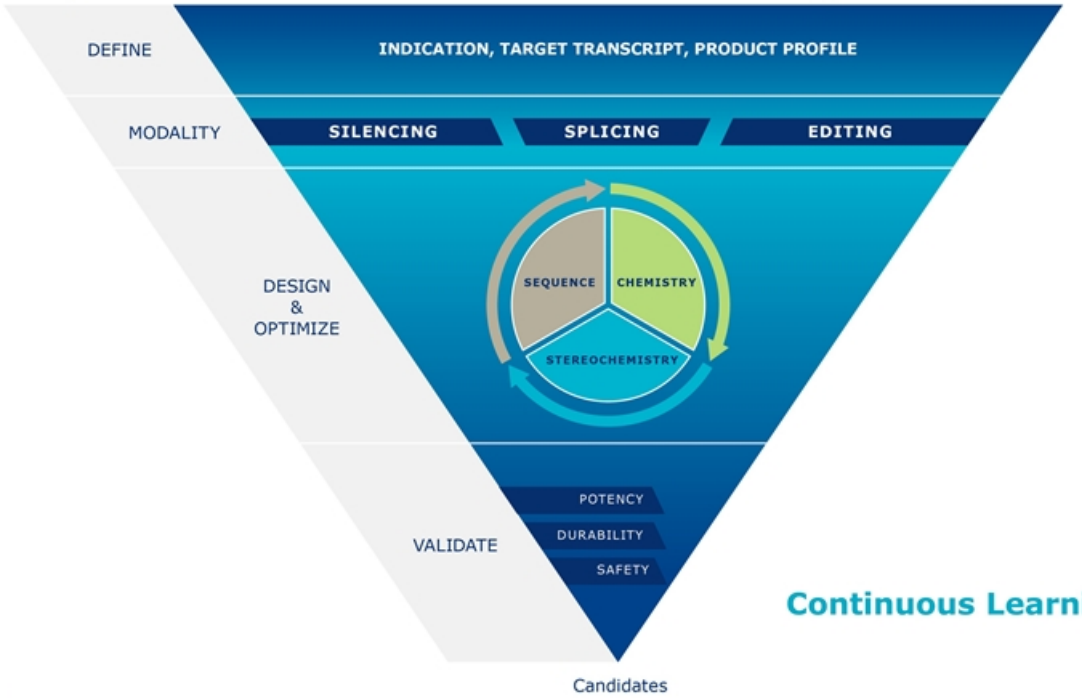
WAVE LIFE SCIENCES Yellow spheres represent 'S' atoms PS: Phosphorothioate

Exponential diversity arises from uncontrolled stereochemistry



Number of PS linkages in oligonucleotide backbone

PRISM platform enables rational drug design



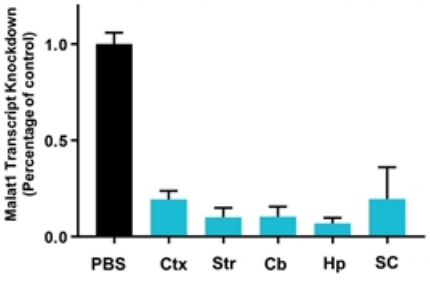
Continuous Learning

Source: Iwamoto N, et al. Control of phosphorothioate stereochemistry substantially increases the efficacy of antisense oligonucleotides. *Nat Biotechnol*. 2017;35:845-851.

Optimizing potency and durability across multiple tissues

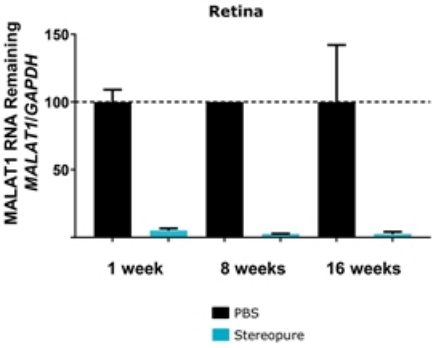
CNS

Malat1 Transcript Knockdown in Mice
10 Weeks after single 100 µg ICV injection



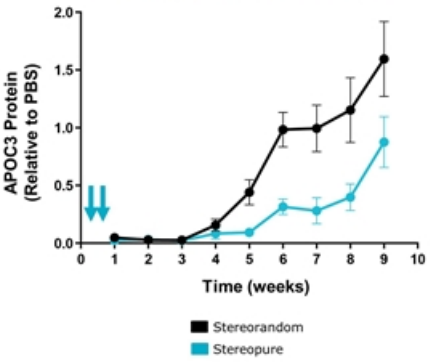
Eye

MALAT1 Knockdown in Non-Human Primates
Single 450 µg IVT injection



Liver

Knockdown of Serum APOC3 Protein Levels in Mice
Two 5 mg/kg SC injections on Days 1&3



Data represented in this slide from *in vivo* studies. CNS: PBS = phosphate buffered saline; Ctx = cortex; Str = striatum; Cb = cerebellum; Hp = hippocampus; SC = spinal cord. ICV = intracerebral; IVT = intravitreal; IV = intravenous; SC= subcutaneous.

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C9orf72 program

Amyotrophic Lateral Sclerosis (ALS)

Frontotemporal Dementia (FTD)

C9orf72: a critical genetic risk factor

- C9orf72 gene provides instructions for making protein found in various tissues, with abundance in nerve cells in the cerebral cortex and motor neurons
- C9orf72 genetic mutations are the strongest genetic risk factor found to date for the more common, non-inherited (sporadic) forms of Amyotrophic Lateral Sclerosis (ALS) and Frontotemporal Dementia (FTD); GGGGCC repeat drives the formation and accumulation of dipeptide repeat proteins that accumulate in brain tissue
- First pathogenic mechanism identified to be a genetic link between familial (inherited) ALS and FTD
- Most common mutation identified associated with familial ALS and FTD
- Availability of dipeptide biomarker in CSF has potential to accelerate drug development

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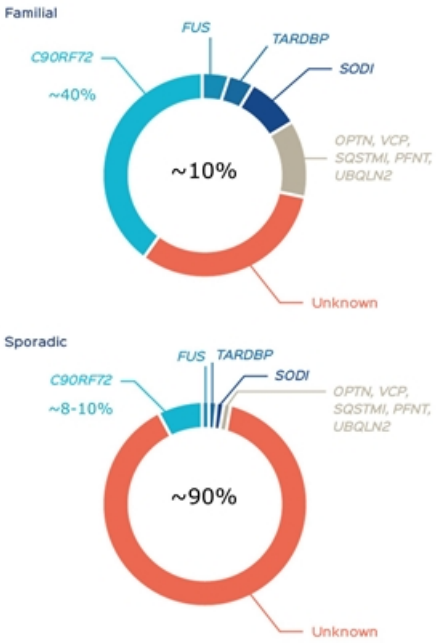
Source: DeJesus-Hernandez M, Mackenzie IR, Boeve BF, et al. *Neuron.* 2011;72:245-256. Renton AE, Majounie E, Waite A, et al. *Neuron.* 2011;72:257-268.

Amyotrophic lateral sclerosis

- Fatal neurodegenerative disease characterized by the progressive degeneration of motor neurons in the brain and spinal cord
- Affects approximately 15,000-20,000 people in the US with a median survival of three years
- C9orf72 is present in approximately 40% of familial ALS and 8-10% of sporadic ALS; currently the most common demonstrated mutation related to ALS, far more so than SOD1 or TDP-43
- Pathogenic transcripts of the C9orf72 gene contain hundreds to thousands of hexanucleotide repeats compared to 2-23 in wild-type transcripts; dominant trait with high penetrance



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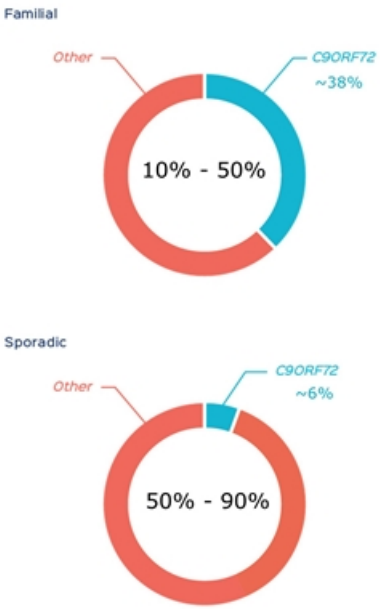
Source: Renton AE, Chiò A, Traynor BJ. State of play in amyotrophic lateral sclerosis genetics. *Nat Neurosci*. 2014;17:17–23.

Frontotemporal dementia

- Progressive neuronal atrophy with loss in the frontal and temporal cortices characterized by personality and behavioral changes, as well as gradual impairment of language skills
- Affects approximately 55,000 people in the US
- Second most common form of early-onset dementia after Alzheimer's disease in people under the age of 65
- Up to 50% of FTD patients have a family history of dementia, many inheriting FTD as an autosomal dominant trait with high penetrance
- Pathogenic transcripts of the C9orf72 gene contain hundreds to thousands of hexanucleotide repeats compared to 2-23 in wild-type transcripts



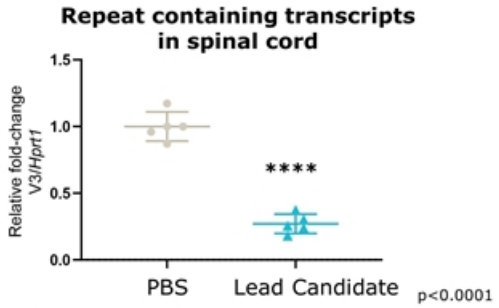
Sources: Stevens M, et al. Familial aggregation in frontotemporal dementia. *Neurology*. 1998;50:1541-1545. Majounie E, et al. Frequency of the C9orf72 hexanucleotide repeat expansion in patients with amyotrophic lateral sclerosis and frontotemporal dementia: a cross-sectional study. *Lancet Neurol.* 2012;11:323-330.

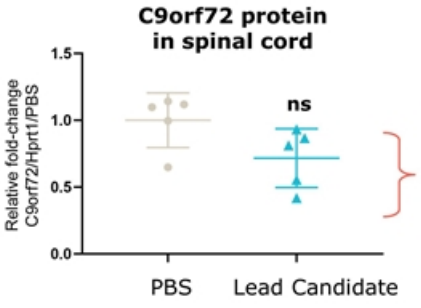
C9orf72 program: Allele-selective silencing *in vivo*

- C9orf72 genetic mutations are the strongest genetic risk factor found to date for the more common, non-inherited (sporadic) forms of Amyotrophic Lateral Sclerosis (ALS) and Frontotemporal Dementia (FTD); GGGGCC repeat drives the formation and accumulation of dipeptide repeat proteins that accumulate in brain tissue
- **Wave's approach:** Selectively silence the GGGGCC repeat containing transcript while minimizing the impact on normal C9orf72 protein

Selective silencing of C9orf72 *in vivo* (transgenic mouse)

Reduction of repeat containing transcripts





Protein preservation

Clinical development expected to initiate in 2H 2020

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Presented at Analyst and Investor Research Day October 7, 2019; Experimental description: 2 x 50 ug on day 1 and day 8; mRNA Samples were analyzed using quantitative PCR (Taqman assay), Protein samples were measured by Western Blot.

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Ophthalmology

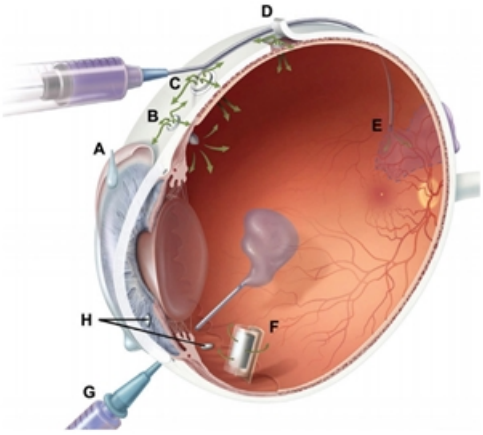
Stereopure oligonucleotides for inherited retinal diseases (IRDs)

Wave ophthalmology opportunity

- Oligonucleotides can be administered by intravitreal (IVT) injection; targeting twice per year dosing
- Stereopure oligonucleotides open novel strategies in both dominant and recessive IRDs; potential for potent and durable effect with low immune response

Successful targeting of *MALAT1* is a surrogate for an ASO mechanism of action

- Widely expressed in many different cell types
- Only expressed in the nucleus



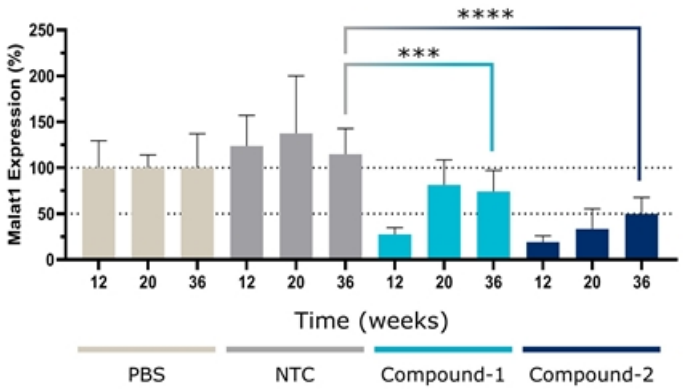
Intravitreal injection

Sources: Daiger S, et al. *Clin Genet*. 2013;84:132-141. Wong CH, et al. *Biostatistics*. 2018; DOI: 10.1093/biostatistics/kxx069. Athanasiou D, et al. *Prog Retin Eye Res*. 2018;62:1–23. Daiger S, et al. *Cold Spring Harb Perspect Med*. 2015;5:a017129. Verbakel S, et al. *Prog Retin Eye Res*. 2018:66:157-186.; Short, B.G.; *Toxicology Pathology*, Jan 2008.

Stereopure compound induces potent and durable *MALAT1* knockdown in the eye

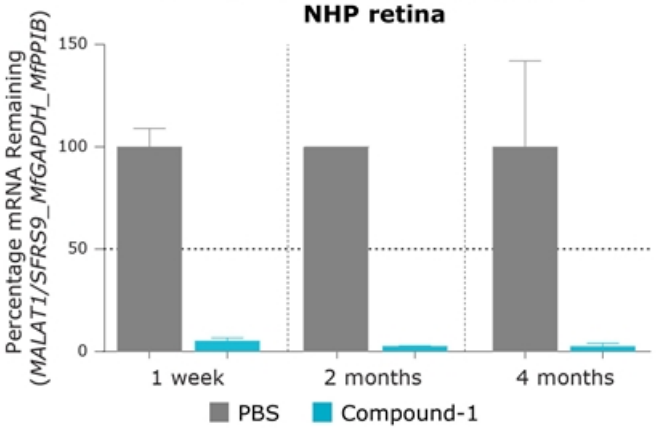
~50% *MALAT1* knockdown at 9 months

***In vivo* duration of effect in the mouse retina**



>90% knockdown of *MALAT1* maintained for 4 months

***In vivo* duration of effect in the NHP retina**



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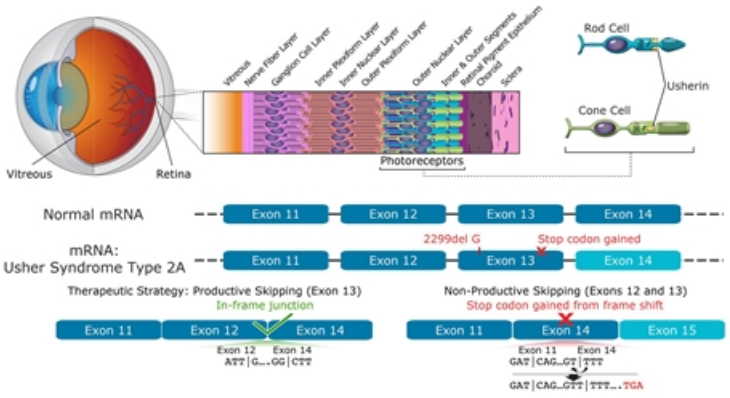
Mouse: Compound or PBS (1 x 50 mg IVT) was delivered to C57BL6 mice. Relative percentage of Malat1 RNA in the posterior of the eye (retina, choroid, sclera) to PBS-treated mice is shown at 12, 20 and 36 weeks post-single injection. Statistics: Compound-2 Malat1 levels are significantly different from NTC at 36 weeks ***, P<0.001; **** P<0.0001, respectively. PBS = phosphate buffered saline; NTC= chemistry matched non-targeting control; Compound-1 and Compound-2 are stereopure MALAT1-targeting antisense oligonucleotide. NHP: Oligonucleotide or PBS (1 x 450 µg IVT) was delivered to NHP. Relative percentage of *MALAT1* RNA in the retina to PBS-treated is shown at 1 week, 2 and 4 months, post-single injection. Compound-1 is a stereopure *MALAT1*-RNA-targeting antisense oligonucleotide.

Usher Syndrome Type 2A: a progressive vision loss disorder

- Autosomal recessive disease characterized by hearing loss at birth and progressive vision loss beginning in adolescence or adulthood
- Caused by mutations in USH2A gene (72 exons) that disrupt production of usherin protein in retina, leading to degeneration of the photoreceptors
- No approved disease-modifying therapies
- **~5,000 addressable patients in US**



Oligonucleotides that promote USH2A exon 13 skipping may restore production of functional usherin protein

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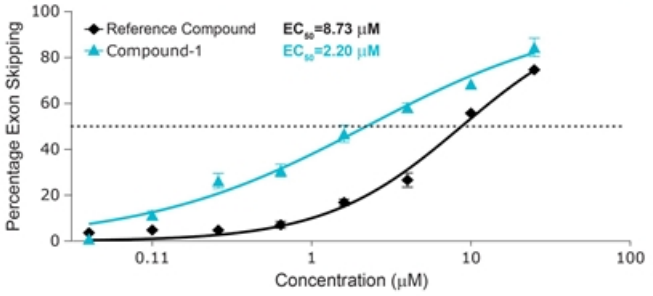
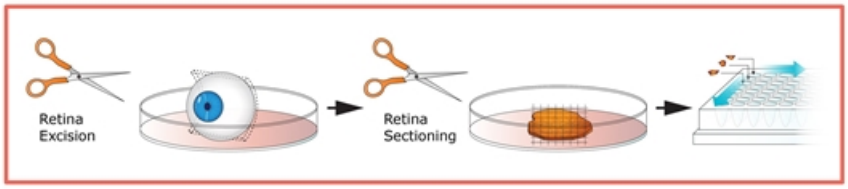
Sources: Boughman et al., 1983. *J Chron Dis.* 36:595-603; Seyedahmadi et al., 2004. *Exp Eye Res.* 79:167-173; Liu et al., 2007. *Proc Natl Acad Sci USA* 104:4413-4418.

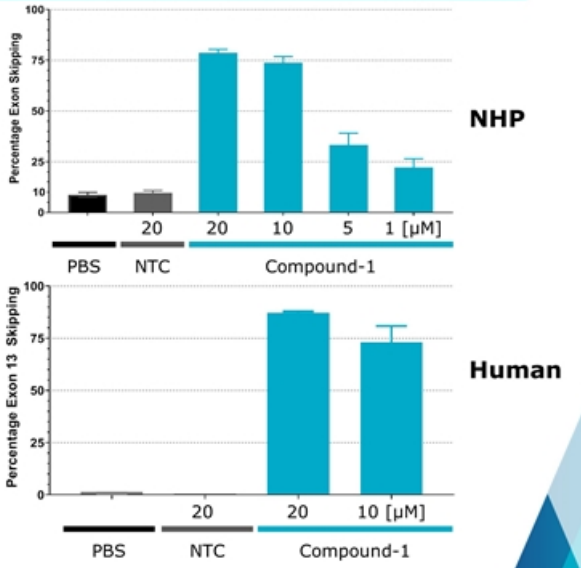
Potent USH2A exon 13 skipping with stereopure compound in *vitro* and *ex vivo*

Enhanced potency over a stereorandom reference compound (*in vitro*)





Target engagement in NHP and human retinas (*ex vivo*)



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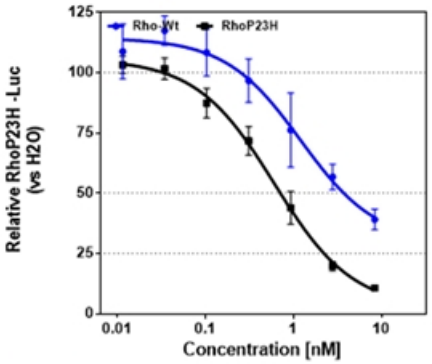
Left: Compounds were added to Y79 cells under free-uptake conditions. Exon skipping was evaluated by Taqman assays. *USH2A* transcripts were normalized to *SRSF9*. Data are mean±s.d., n=2. Reference Compound: van Diepen *et al.* 2018. Antisense oligonucleotides for the treatment of eye disease. W02018055134A1. Compound-1 is a stereopure antisense oligonucleotide. Right: Whole NHP and human eyes were enucleated (n=4 and n=2, respectively) and compounds (1–20 µM) were added to extracted retinas under free-uptake conditions. Exon skipping was evaluated by 48 hrs later by Taqman assays on RNA. USH2A transcript levels were normalized to SRSF9. Data presented are mean± s.e.m.

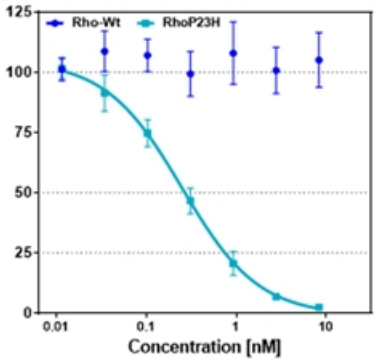
Allele-selective reduction of SNP-containing allele for adRP associated with Rhodopsin P23H mutation

- **Retinitis pigmentosa (RP)**: group of rare, genetic eye disorders resulting in progressive photoreceptor cell death and gradual functional loss; currently no cure
- ~10% of US autosomal dominant RP cases are caused by the P23H mutation in the rhodopsin gene (RHO)
- Mutant P23H rhodopsin protein is thought to misfold and co-aggregate with wild-type rhodopsin, resulting in a gain-of-function or dominant negative effect in rod photoreceptor cells

Stereorandom



Stereopure



In vivo

Collaborations in place for evaluation in transgenic human Rho P23H pig model

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Ferrari et al., *Current Genomics.* 2011;12:238-249.; Reporter assays on a Wave stereopure sequence as well as a sequence described in WO2016138353A1: ASO and luciferase reporter plasmids (wild-type and mutant rhodopsin) are transfected into Cos7 cells. 48-hours later, cells are harvested, and relative luminescence is measured.

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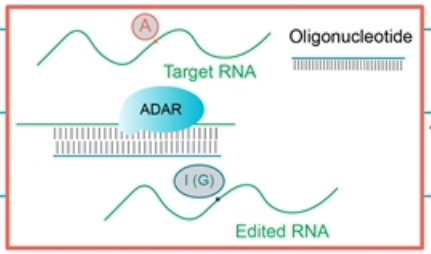
ADAR-mediated RNA editing

RNA-editing can be used for several therapeutic applications and supplement Wave's existing modalities

Strategy	Therapeutic Application	Treatment Modality: Silencing	Splicing	RNA Editing
Silence protein expression	Reduce levels of toxic mRNA/protein	✓		✓
Alter mRNA splicing	Exon skipping/inclusion/ restore frame		✓	✓
Fix nonsense mutations that cannot be splice-corrected	Restore protein expression			✓
Fix missense mutations that cannot be splice-corrected	Restore protein function			✓
Modify amino acid codons	Alter protein function			✓
Remove upstream ORF	Increase protein expression			✓



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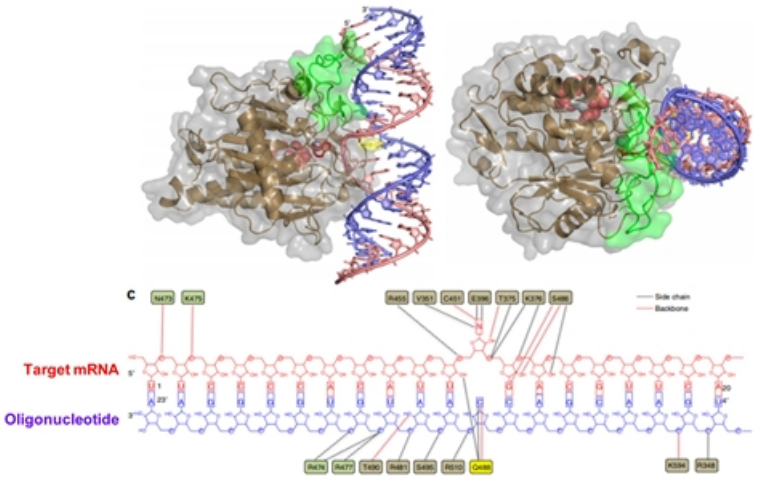
I (G): ADAR converts A>I, I is recognized as G by all cellular machinery; ADAR: Adenosine Deaminase Acting on RNA; ORF: Open reading frame

Using PRISM to unlock ADAR-mediated RNA editing

Structure of ADAR deaminase domain bound to dsRNA substrate



- ADAR makes multiple contacts with oligonucleotide backbone, sugar and bases
- Using PRISM platform, rationally designed and screened oligonucleotides to optimize:
  - 2' sugar chemistry
  - Backbone chemistry and stereochemistry
  - Size and structure
  - Modified nucleobases

~1,000 RNA editing oligonucleotides tested over the last year to develop SAR for editing format

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Structure adapted from Matthews et al., Nat Struct Mol Biol. (2016); SAR = structure-activity relationship; ADAR: Adenosine Deaminase Acting on RNA; dsRNA = double-stranded RNA

Wave's ADAR approach has several potential advantages over existing technologies

PRISM

Existing RNA editing technologies		Wave's RNA editing platform
Use unmodified RNA	Stability	Fully chemically-modified stereopure oligonucleotides ✓
Require AAV or lipid nano particle delivery	Delivery	Free uptake into tissues ✓
Require exogenous protein (e.g. CAS13 or chimeric ADAR)	Editing	Uses endogenous ADAR for editing ✓

Single oligonucleotide through free uptake is sufficient for editing

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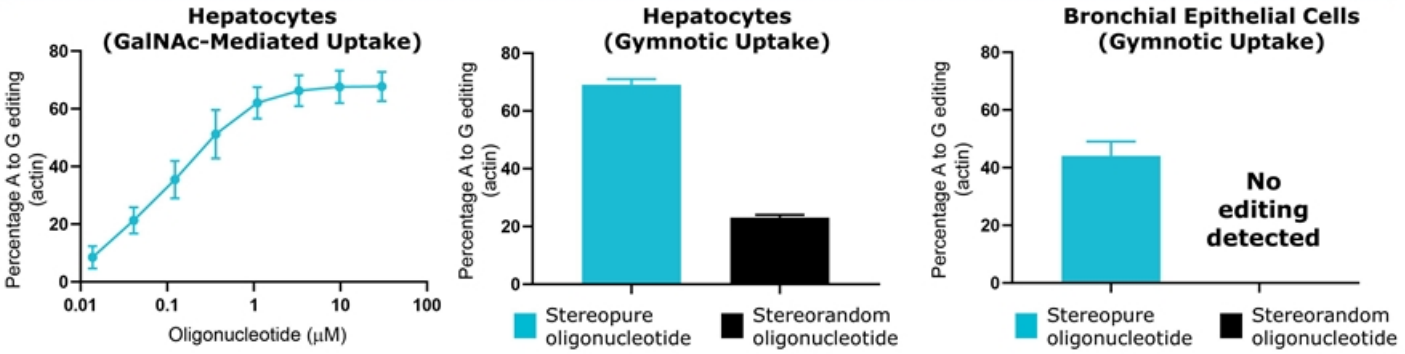
RNA editing with endogenous ADAR achieved across multiple primary human cell types

Editing UAG Site in Actin mRNA in Primary Human Cell Lines



- Stereochemistry significantly increases editing across all cell lines tested, especially for gymnotic delivery
- GalNAc-conjugated fully-modified stereopure oligonucleotide can be used for targeted editing in hepatocytes; *in vitro* experiments suggest an EC_{50} of ~100 nM in primary hepatocytes
- *In vivo* editing with fully modified stereopure oligonucleotide studies underway

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***In vivo* editing data expected in 2020**

Anticipated upcoming Wave milestones

CNS

- **2H 2020:** PRECISION-HD2 data from 32 mg cohort in Huntington's disease
- **2H 2020:** PRECISION-HD1 topline data, including 32 mg cohort, in Huntington's disease
- **2H 2020:** Initiate clinical development of SNP3 program in Huntington's disease
- **2H 2020:** Initiate clinical development of C9orf72 program in ALS and FTD

Ophthalmology

- **2020:** Advance USH2A exon-skipping program

RNA-editing

- **2020:** *In vivo* ADAR editing data

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Realizing the potential of genetic medicines

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