FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* Vargeese Chandra						2. Issuer Name and Ticker or Trading Symbol Wave Life Sciences Ltd. [WVE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
											_					Direc			Owner		
-						-									\dashv	X	Office	er (give title	Other below	(specify	
(Last)		(Firs	st) (I	Middle)					st Trans	saction ((Month	/Day/Year)						,	rug Discover	,	
C/O WAY	VE LIFE	SC	IENCES LTD.,			02/	02/19/2019										50	.iiioi vi, D	rug Discover	y	
733 CONCORD AVE.																					
						4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6.	6. Individual or Joint/Group Filing (Check Applicable					
(Street)							and the second s									Line)					
CAMBR	IDGE	MA	۸ ۲	2138												X	Form	n filed by One	e Reporting Per	son	
CriviDic	IDGL	1411		2150															re than One Rep	oorting	
																	Pers	on			
(City)		(Sta	ite) (2	Zip)																	
			Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Dis	sposed o	f, or I	Ben	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,		Date,	Transaction Disposed Code (Instr.			ies Acquired (A) o Of (D) (Instr. 3, 4 a			and 5) Sec Ber Ow		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
											v	Amount	(A) or (D) Price		Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Ordinary Shares 02/19/2					2019	019			S ⁽¹⁾		2,055 D			\$ <mark>36.8</mark>	4(2)	⁽²⁾ 25,245		D			
			Та	ble II -								osed of, convertib				y Ow	/ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion Exerciprice of Derivativ	ercise of ative	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/I	on Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (II and 4)		Der Sec (Ins		Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	or Nur of	nount mber ares	er								

Explanation of Responses:

- 1. On February 19, 2019, the reporting person sold 2,055 ordinary shares solely to cover taxes associated with the vesting of restricted share units on February 15, 2019. These sales were made pursuant to a 10b5-1 Trading Plan.
- 2. The price reflected is the weighted-average sale price for shares sold. The shares were sold in multiple transactions and the range of sale prices for the transactions reported was \$36.83 to \$37.4865 per share. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price.

Remarks:

<u>/s/ Chandra Vargeese</u>

** Signature of Reporting Person Date

02/21/2019

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.