

**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): April 1, 2021

**WAVE LIFE SCIENCES LTD.**

(Exact name of registrant as specified in its charter)

**Singapore**  
(State or other jurisdiction  
of incorporation)

**001-37627**  
(Commission  
File Number)

**00-0000000**  
(IRS Employer  
Identification No.)

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

**018936**  
(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 (see General Instruction A.2. below):

- 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
<b>\$0 Par Value Ordinary Shares</b>	<b>WVE</b>	<b>The Nasdaq Global Market</b>

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, Wave Life Sciences Ltd. (the “Company”) presents and/or distributes slides and presentations to the investment community to provide updates and summaries of its business. On April 1, 2021, 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 is being furnished and 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 into any registration statement or other filing under the Securities Act of 1933, as amended, or the Exchange Act, except as shall be expressly set forth by specific reference in such filing.*

**Item 9.01 Financial Statements and Exhibits.**

(d) Exhibits

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

<b>Exhibit No.</b>	<b>Description</b>
99.1	<a href="#">Corporate Presentation of Wave Life Sciences Ltd. dated April 1, 2021</a>
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: April 1, 2021



Wave Life Sciences  
Corporate Presentation  
April 1, 2021



# 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.

# Building a leading genetic medicines company



## INNOVATIVE PLATFORM

- Stereopure oligonucleotides
- Novel backbone modifications (PN chemistry)
- Allele-selectivity
- Multiple modalities (silencing, splicing, ADAR editing)
- Strong IP position<sup>1</sup>



## FOUNDATION OF NEUROLOGY PROGRAMS

- Huntington's disease
- ALS / FTD
- Neuromuscular diseases
- Ataxias
- Parkinson's disease
- Alzheimer's disease



## CLINICAL DEVELOPMENT EXPERTISE

- Multiple global clinical trials
- Innovative trial designs



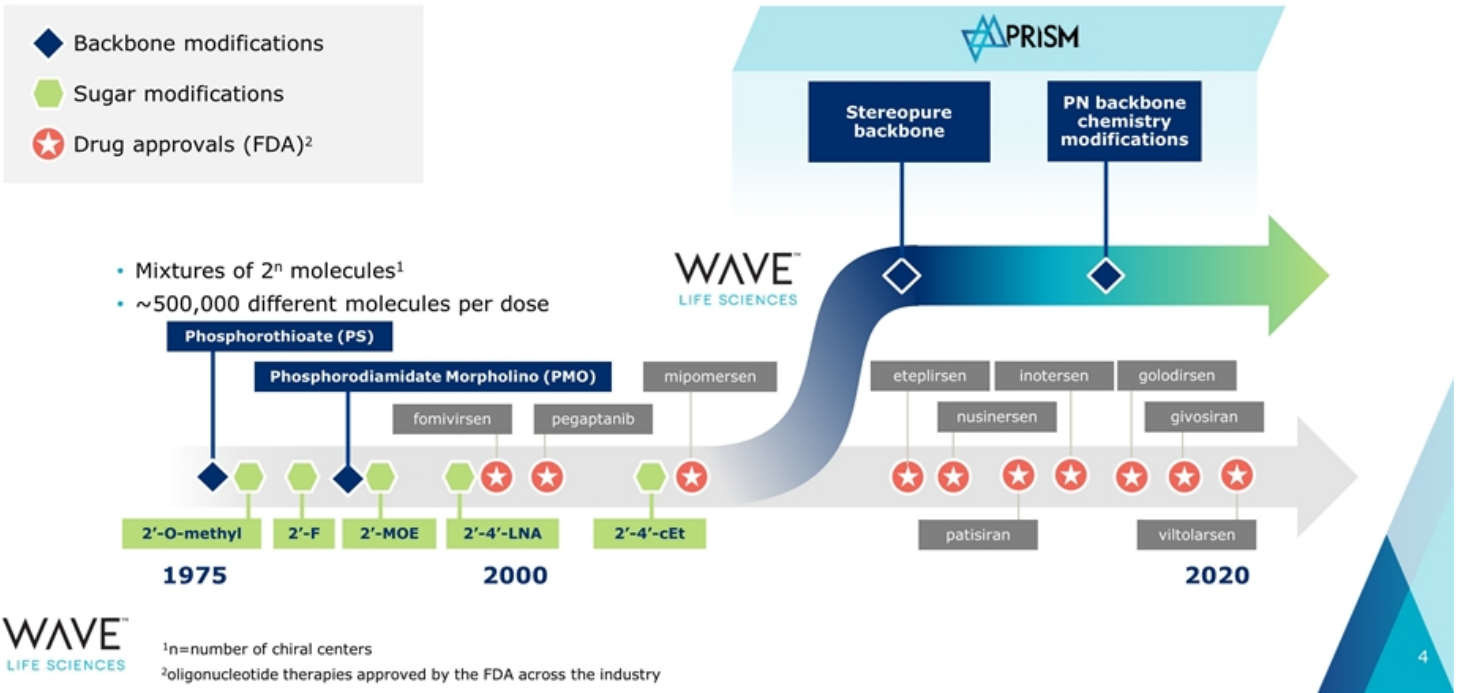
Wave's discovery and drug development platform



## MANUFACTURING

- Established internal manufacturing capabilities to produce oligonucleotides at scale

# PRISM has unlocked novel and proprietary advances in oligonucleotide design



# Innovative pipeline led by neurology programs

THERAPEUTIC AREA / TARGET	PRISM	DISCOVERY	PRECLINICAL	CLINICAL	PARTNER
<b>NEUROLOGY</b>					
<b>ALS and FTD</b> C9orf72	◆ ◆	WVE-004			Takeda 50:50 option
<b>Huntington's disease</b> mHTT SNP3	◆ ◆	WVE-003			
<b>SCA3</b> ATXN3	◆ ◆				
<b>CNS diseases</b> Multiple†	◆ ◆				Takeda milestones & royalties
<b>DMD</b> Exon 53	◆ ◆	WVE-N531			100% global
<b>ADAR editing</b> Multiple	◆ ◆				
<b>HEPATIC</b>					
<b>AATD (ADAR editing)</b> SERPINA1	◆ ◆				100% global
<b>OPHTHALMOLOGY</b>					
<b>Retinal diseases</b> USH2A and RhoP23H	◆ ◆				100% global

PRISM ◆ Stereopure ◆ PN chemistry

**WAVE™**  
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†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; SCA3: Spinocerebellar ataxia 3; CNS: Central nervous system;  
DMD: Duchenne muscular dystrophy; AATD: Alpha-1 antitrypsin deficiency





# Platform evolution reflected in three upcoming clinical trials to start in 2021

## ✓ **Oligonucleotide innovation and optimization**

- PN backbone chemistry modifications
- Interactions between sequence, chemistry and stereochemistry

## ✓ ***In vivo* models**

- Insight into PK / PD relationships
- Novel model generation

## ✓ **Leverage learnings of first generation programs**

- Translational pharmacology
- Adaptive clinical trial design

C9orf72

**WVE-004**

Variant-selective silencing candidate  
in ALS and FTD

SNP3

**WVE-003**

Allele-selective silencing candidate  
in HD

Exon 53

**WVE-N531**

Exon skipping candidate in DMD

**WAVE**  
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HD: Huntington's disease

ALS: amyotrophic lateral sclerosis

FTD: frontotemporal dementia

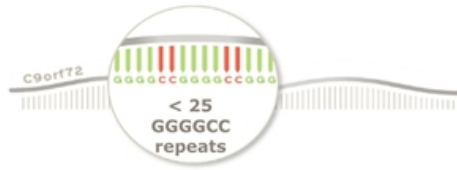
DMD: Duchenne muscular dystrophy

**WVE-004**

Amyotrophic Lateral Sclerosis (ALS)  
Frontotemporal Dementia (FTD)

# C9orf72 repeat expansions: A critical genetic driver of ALS and FTD

*Normal (non-expanded) Allele*



*Expanded Allele*



- C9orf72 hexanucleotide repeat expansions (GGGGCC) are one of the most common genetic causes of the sporadic and inherited forms of Amyotrophic Lateral Sclerosis (ALS) and Frontotemporal Dementia (FTD)
- The C9orf72 repeat expansions also lead to accumulation of repeat-containing transcripts, nuclear sequestration of RNA binding proteins and synthesis of toxic dipeptide-repeat (DPR) proteins
- The C9orf72 repeat expansions lead to reduced expression of wild-type C9orf72 and to cellular changes that reduce neuronal viability

# C9-ALS and C9-FTD: Manifestations of a clinical spectrum

	Disease	C9 specific US population	Mean disease duration	Standard of care
<b>C9-ALS</b>	<ul style="list-style-type: none"> <li>Fatal neurodegenerative disease</li> <li>Progressive degeneration of motor neurons in brain and spinal cord</li> </ul>	~2,000	3.1 years	Significant unmet need despite two approved therapies in US
<b>C9-FTD</b>	<ul style="list-style-type: none"> <li>Progressive neuronal atrophy in frontal/temporal cortices</li> <li>Personality and behavioral changes, gradual impairment of language skills</li> </ul>	~10,000	6.4 years	No approved disease modifying therapies

## Two devastating diseases with a shared genetic basis

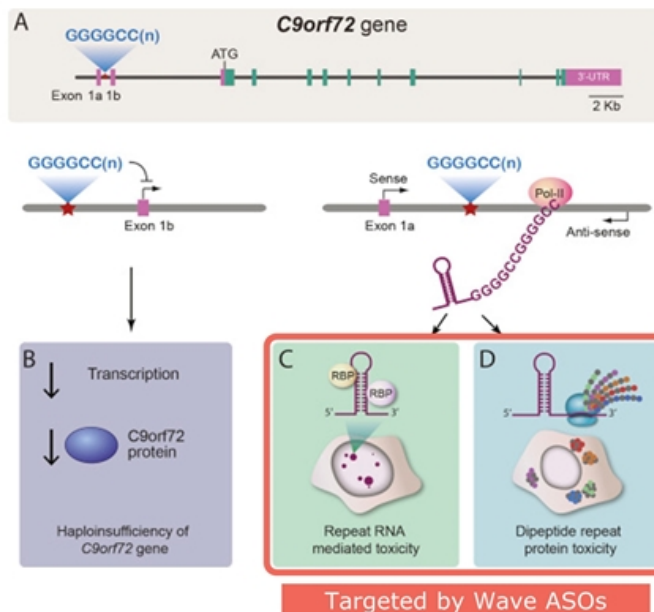


ALS: Amyotrophic lateral sclerosis; FTD: Frontotemporal dementia  
Sources: Cammack et al, Neurology, October 2019. Moore et al, Lancet Neurology, February 2020

# C9orf72 repeat expansions: Mechanisms of cellular toxicity

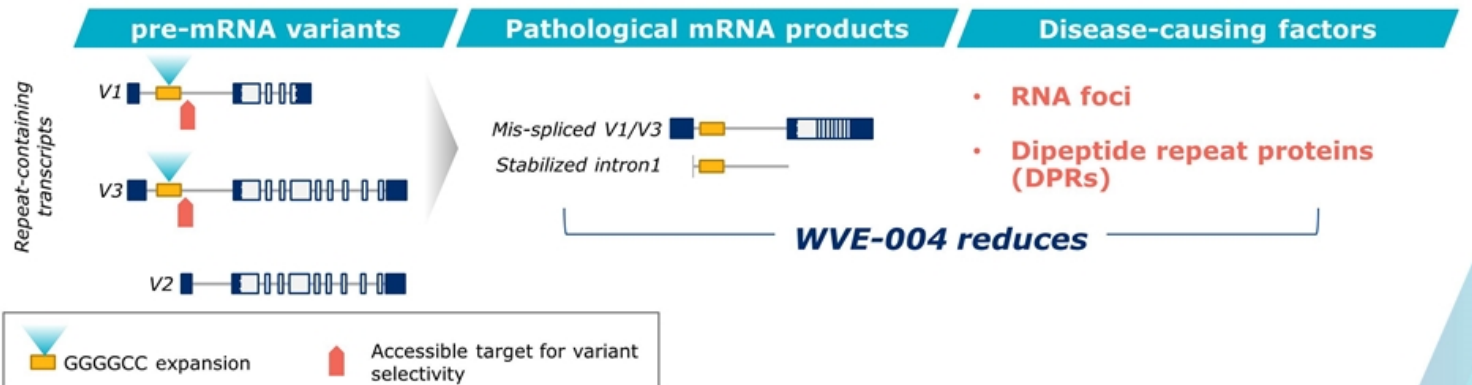
- C9-ALS and C9-FTD may be caused by multiple factors:
  - Insufficient levels of C9orf72 protein
  - Accumulation of repeat-containing RNA transcripts
  - Accumulation of aberrantly translated DPR proteins
- Recent evidence suggests lowering C9orf72 protein exacerbates DPR-dependent toxicity

**Variant-selective targeting could address multiple potential drivers of toxicity**



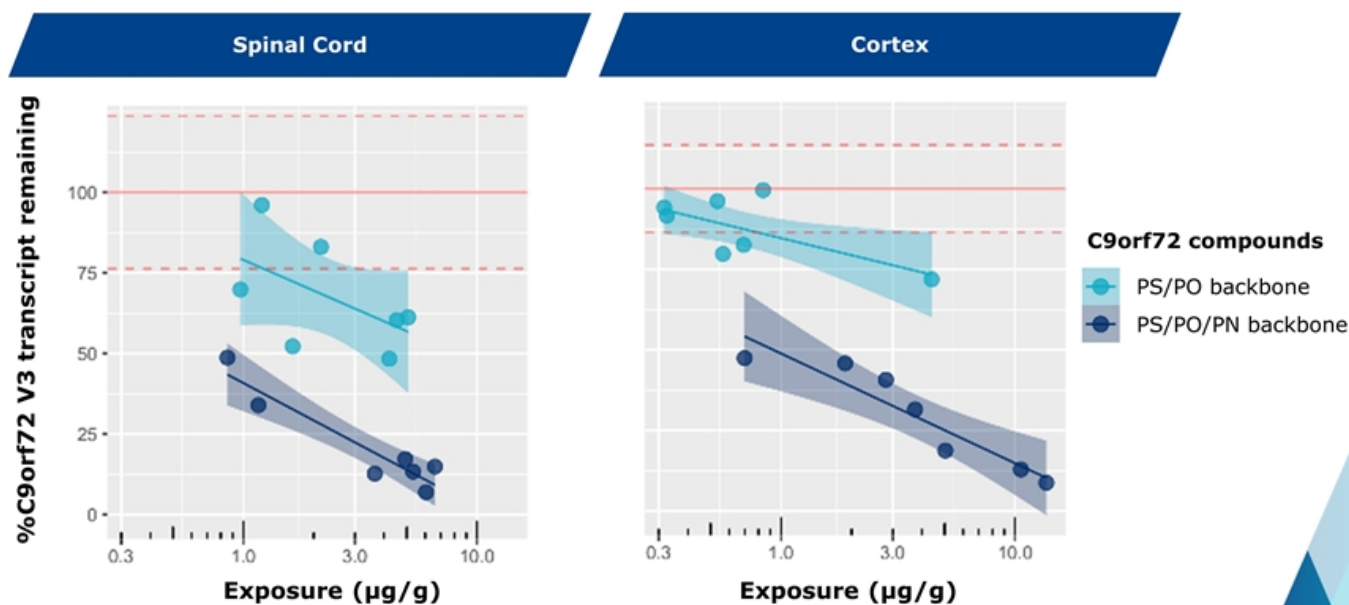
# C9orf72 targeting strategy spares C9orf72 protein

- Normal C9orf72 allele produces three mRNA transcripts (~80% are V2, ~20% are V1 and V3)
- **Pathological allele** with expanded repeat leads to **healthy V2** and **pathological V1 and V3** transcript by-products



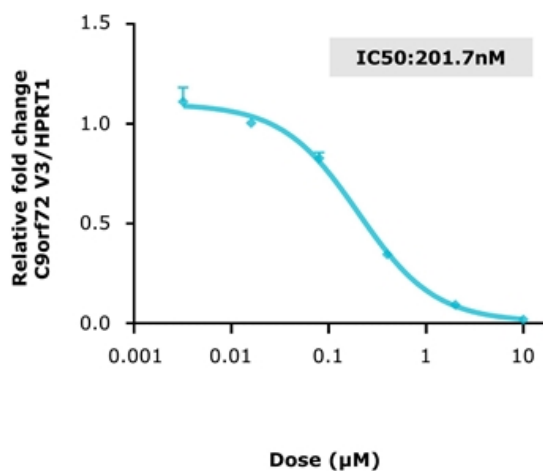
**WVE-004 targets only V1 and V3 transcripts, sparing V2 transcripts and healthy C9orf72 protein**

# PN backbone chemistry modifications: Improved potency among C9orf72-targeting oligonucleotides *in vivo*

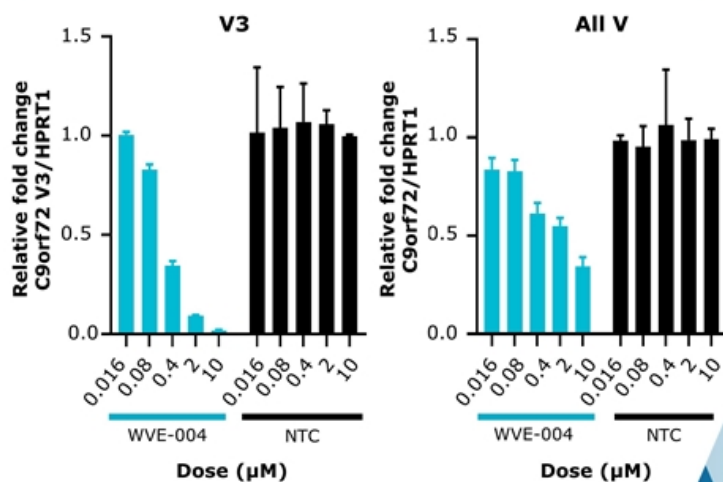


# WVE-004: Potent and selective knockdown of repeat-containing transcripts *in vitro*

## *In vitro* activity in C9 patient-derived neurons

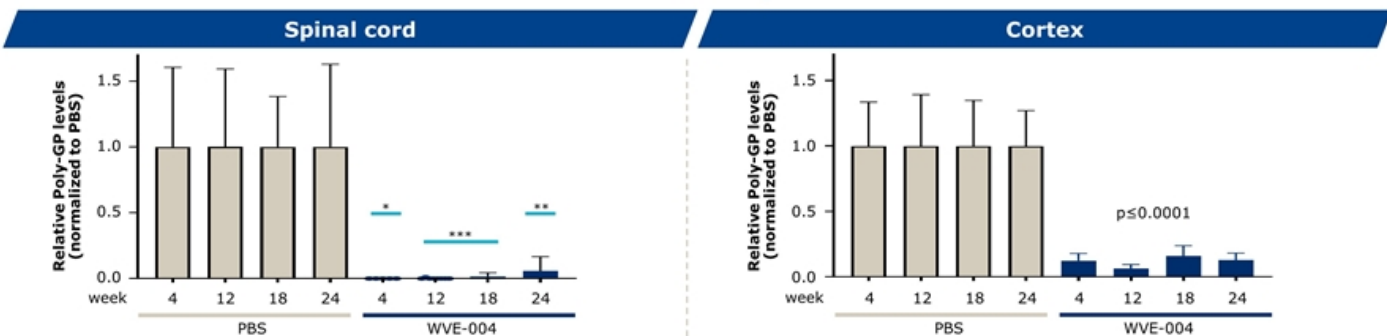


## *In vitro* selectivity in C9 patient-derived neurons

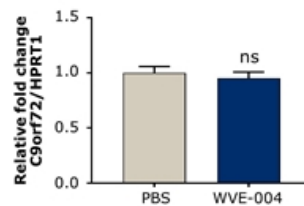
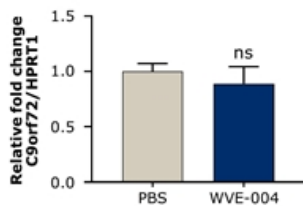




# WVE-004 demonstrates durable reduction of DPRs in vivo after 6 months in spinal cord and cortex



## Healthy C9orf72 protein relatively unchanged ~6 months after WVE-004 administration



Full results presented at the 31<sup>st</sup> International Symposium on ALS/ MND (December 2020)  
 Top: 2 x 50 ug (day 0, day 7) dosed ICV; DPRs measured by Poly-GP MSD assay. \*: p ≤ 0.05 \*\*: P ≤ 0.01, \*\*\*: P ≤ 0.001. ICV: Intracerebroventricular; DPR: Dipeptide repeat protein; Bottom: C9 BAC transgenic mice administered PBS or 50 ug WVE-004, ICV, (day 0, day 7). ns: not significant; PBS: phosphate-buffered saline



# WVE-004: Adaptive SAD/MAD design to optimize dose level and frequency

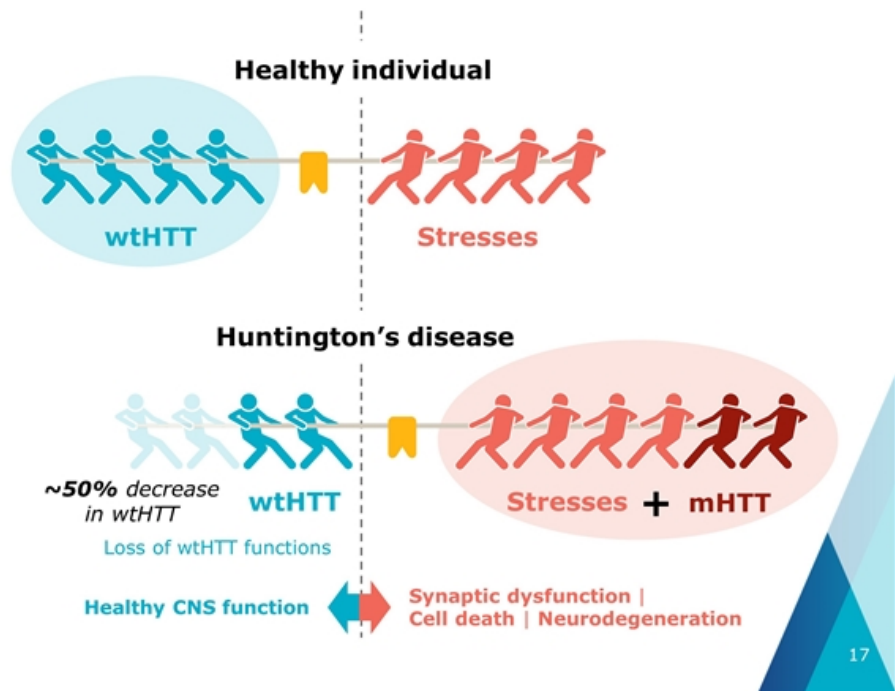
- Patients with documented C9orf72 expansion and confirmed ALS, FTD, or mixed phenotype (up to 50 patients planned)
- Starting dose informed by preclinical *in vivo* models
- Dose escalation and dosing interval guided by safety committee
- Key biomarkers of target engagement and neurodegeneration will be assessed
  - PolyGP
  - NFL
- Key exploratory clinical outcome measures
  - ALSFRS-R and CDR-FTLD
- Clinical trial site activation ongoing

**Dosing in Phase 1b/2a trial expected to initiate in 2021**

WVE-003  
Huntington's Disease

# mHTT toxic effects lead to neurodegeneration, loss of wtHTT functions may also contribute to HD

- Wild-type HTT is critical for normal neuronal function
- Expanded CAG triplet repeat in HTT gene results in production of mutant huntingtin protein
- Huntington's disease affects entire brain
- Monogenic autosomal dominant genetic disease; fully penetrant
- Characterized by cognitive decline, psychiatric illness, and chorea; fatal disease



# HD: Wild-type HTT is a critical protein for important functions in the central nervous system

## NEURON



Promotes neuronal survival by protecting against stress (e.g., excitotoxicity, oxidative stress, toxic mHTT aggregates)<sup>1-8</sup>

## SYNAPSE



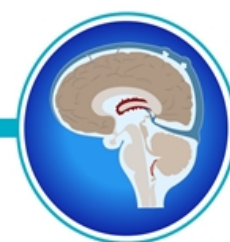
Plays an essential role in the transport of synaptic proteins—including neurotransmitters and receptors—to their correct location at synapses<sup>9-12</sup>

## BRAIN CIRCUITS



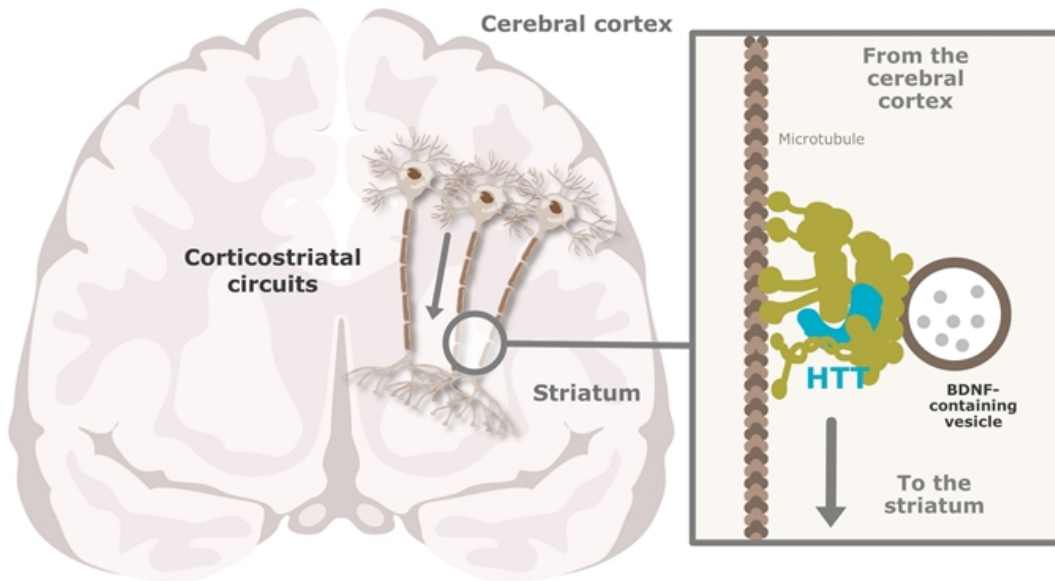
Supplies BDNF to the striatum to ensure neuronal survival<sup>13-16</sup>  
Regulates synaptic plasticity, which underlies learning and memory<sup>17-22</sup>

## CSF CIRCULATION



Plays a critical role in formation and function of cilia—sensory organelles that control the flow of CSF—which are needed to clear catabolites and maintain homeostasis<sup>23</sup>

# HTT provides BDNF, a growth factor critical for survival of striatal neurons



Striatal neurons do not produce BDNF, but they need it to survive<sup>1</sup>

HTT promotes the production of BDNF and transports BDNF from the **cortex** to the striatum<sup>2,3</sup>

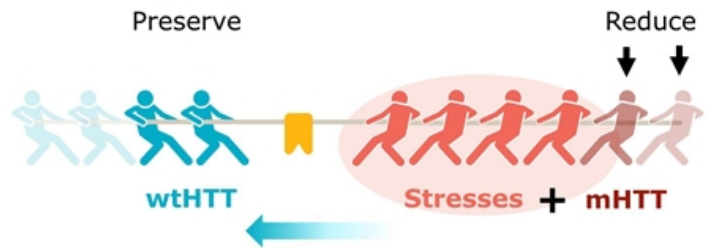
In HD, decreased levels of BDNF contribute to degeneration of corticostriatal circuits<sup>2,4,5</sup>

**Reduction of wtHTT may decrease the availability of BDNF and accelerate corticostriatal degeneration<sup>6</sup>**

# Allele-selective approach to treating HD

Wave has only allele-selective clinical program in Huntington's disease

- ✓ Target mutant mRNA HTT transcript to reduce mutant HTT protein
- ✓ Preserve wild-type HTT protein reservoir in brain



Only an allele-selective approach is designed to address both toxic gain of function and toxic loss of function drivers of HD

# Nature publication contributes to weight of evidence on importance of wild-type huntingtin

## nature

Article

### Injured adult neurons regress to an embryonic transcriptional growth state

<https://doi.org/10.1038/s41586-020-2200-5>

Received: 12 April 2019

Accepted: 13 February 2020

Published online: 15 April 2020

[Check for updates](#)

Gunnar H. D. Poplawski<sup>1,2</sup>, Riki Kawaguchi<sup>1,2</sup>, Erno Van Niekirk<sup>1</sup>, Paul Li<sup>1,2</sup>, Neil Mahata<sup>1</sup>, Philip Canine<sup>1</sup>, Richard Liu<sup>1</sup>, Ioannis Dragatsis<sup>1</sup>, Jessica M. Meiser<sup>1</sup>, Binhai Zhang<sup>1</sup>, Giovanni Coppola<sup>1,2</sup> & Mark H. Tuszynski<sup>1,2</sup>

Grafts of spinal-cord-derived neural progenitor cells (NPCs) enable the robust regeneration of corticospinal axons and restore forelimb function after spinal cord injury<sup>1</sup>; however, the molecular mechanisms that underlie this regeneration are unknown. Here we perform translational profiling specifically of corticospinal tract (CST) motor neurons in mice, to identify their regenerative transcriptome after spinal cord injury and NPC grafting. Notably, both injury alone and injury combined with NPC grafts elicit virtually identical early transcriptional responses in host CST neurons. However, in mice with injury alone this regenerative transcriptome is downregulated after two weeks, whereas in NPC-grafted mice this transcriptome is sustained. The regenerative transcriptome represents a reversion to an embryonic transcriptional state of the CST neurons. The huntingtin gene (*Htt*) is a central hub in the regenerative transcriptome; deletion of *Htt* significantly attenuates regeneration, which shows that *Htt* has a key role in neural plasticity after injury.

- Conditional knock-out of *Htt* in 4-month old mice (post-neuronal development)
- Results suggest that:
  - 1) *Htt* plays a central role in the regenerating transcriptome (potentially influencing genes such as NFKB, STAT3, BDNF)
  - 2) *Htt* is essential for regeneration

“Indeed, conditional gene deletion showed that *Htt* is required for neuronal repair. Throughout life, neuronal maintenance and repair are essential to support adequate cellular functioning”

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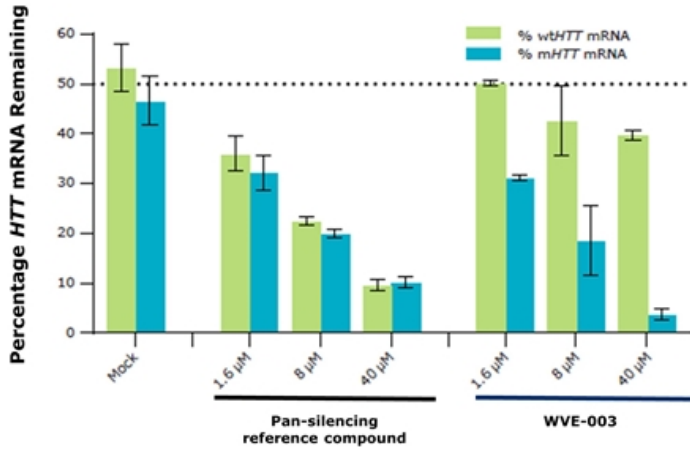
Source: Poplawski et al., *Nature*, April 2019  
*Htt*: Huntingtin protein



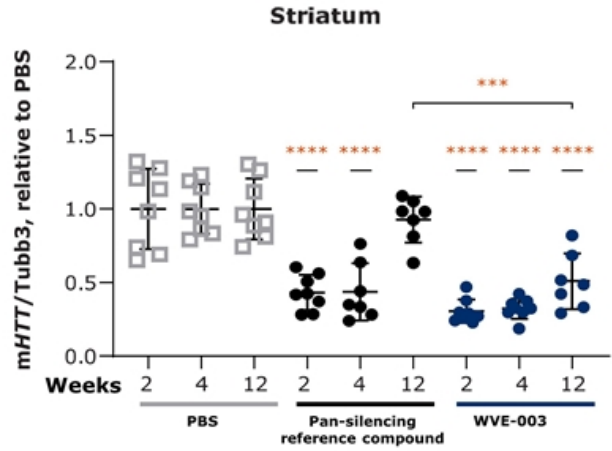
# WVE-003 (SNP3) demonstrates selective, potent, and durable reduction of mHTT in preclinical models

Incorporates PN backbone chemistry modifications

## Selectively reduces mHTT mRNA in HD iPSC neurons in vitro



## Durable striatal mHTT knockdown for 12 weeks in BACHD mouse model



Results from ND50036 iPSC-derived medium spiny neurons. Total *HTT* knockdown quantified by qPCR and normalized to *HPRT1* Oligonucleotide or PBS [100 μg ICV injections through a cannula on days 1, 3, and 5] delivered to BACHD transgenic. Mean ± SD (n=8, \*P<0.0332, \*\*\*P<0.0002, \*\*\*\*P<0.0001 versus PBS unless otherwise noted).  
 HPRT1, hypoxanthine-guanine phosphoribosyl transferase; iPSC, induced pluripotent stem cell; ICV, intracerebroventricular; PBS, phosphate-buffered saline

# PK-PD modeling to guide dosing in clinical trial



## *Ascending dose studies*

- PK & mHTT knockdown data
- IC<sub>50</sub> determination

## **NHP**



Concentrations in **cortex** and **striatum** sufficient for target engagement

## **Human** (cortex, striatum)



Anticipated mHTT knockdown in **cortex** and **striatum**

# WVE-003: Clinical trial to leverage experience and learnings in HD

## Leveraging learnings from PRECISION-HD

- Starting dose informed by preclinical *in vivo* models
- Asuragen assay to improve efficiency of patient identification
- Drawing from experience of sites from PRECISION-HD1 and PRECISION-HD2 trials

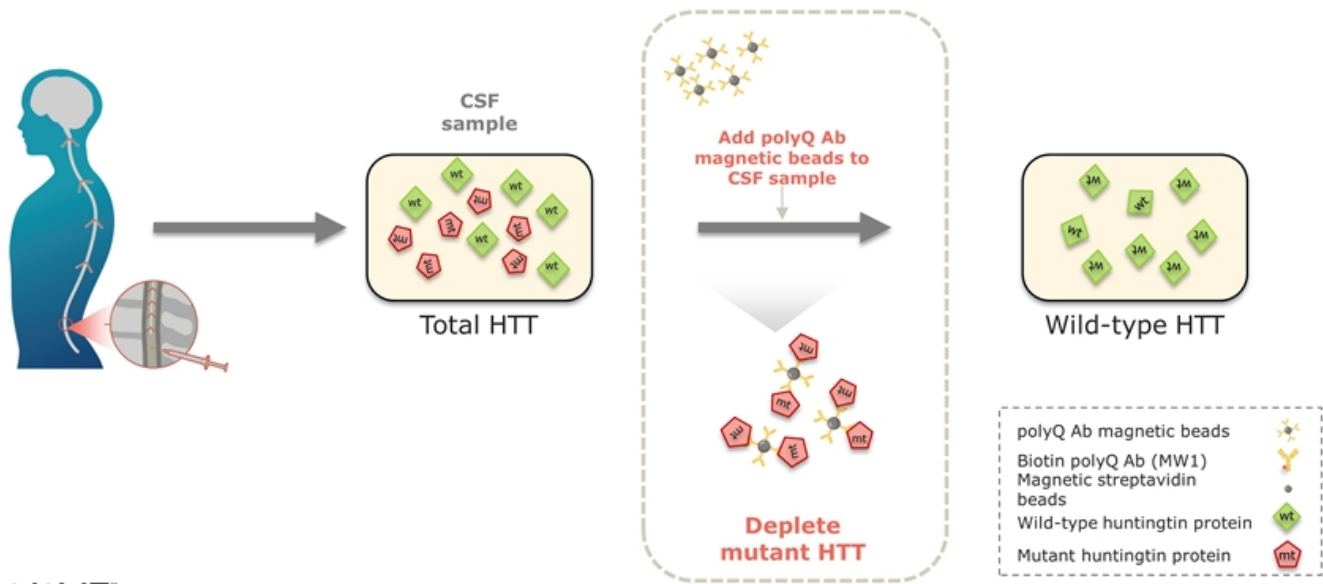
## Adaptive SAD/MAD design

- Patients with confirmed manifest HD diagnosis with SNP3 mutation (up to 40 patients planned)
- Dose escalation and dosing interval guided by independent DSMB
- Safety and tolerability
- Biomarkers
  - mHTT
  - NfL
  - wtHTT
- Clinical trial site activation ongoing

**Dosing in Phase 1b/2a trial expected to initiate in 2021**

# Assessment of wild-type protein in CSF

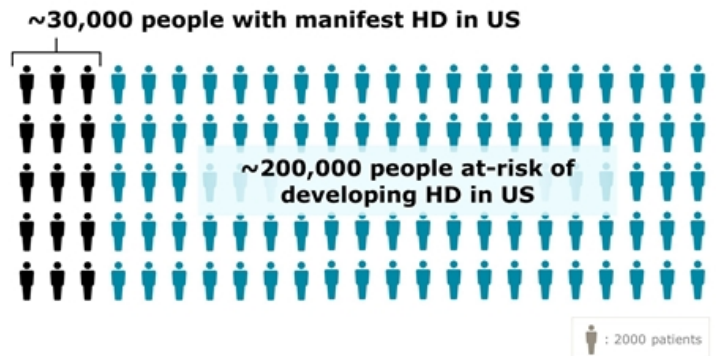
Depletion of mutant HTT key to ability to measure wild-type HTT protein



# Wave approach: novel, allele-selective silencing

~40% of HD Patients Carry SNP3

Allele-selective Treatments Have Potential to Benefit Many of Those At-risk of HD



Personalized approach to wtHTT sparing opens possibility of early treatment



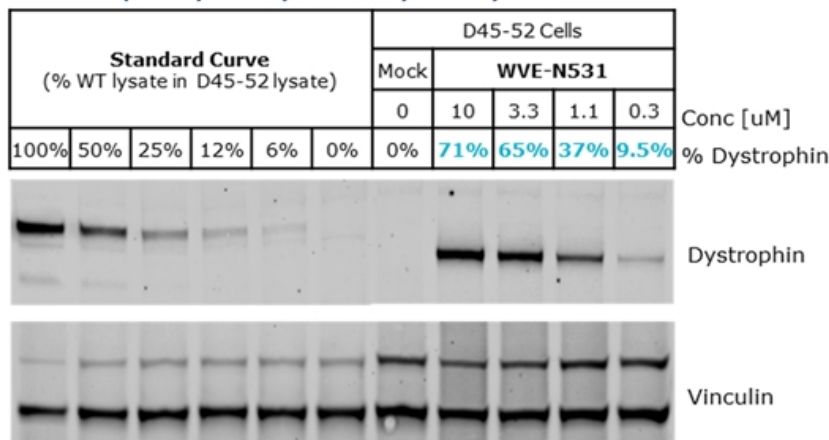
<sup>1</sup> Claassen et al. Neurol Genet Jun 2020; Carroll et al. Mol Ther. 2011 Dec; HDSA.org

WVE-N531  
Duchenne muscular dystrophy

# WVE-N531 *in vitro* dose-dependent dystrophin restoration

## Dystrophin protein restoration of up to 71%

Western Blot normalized to primary healthy human myoblast lysate

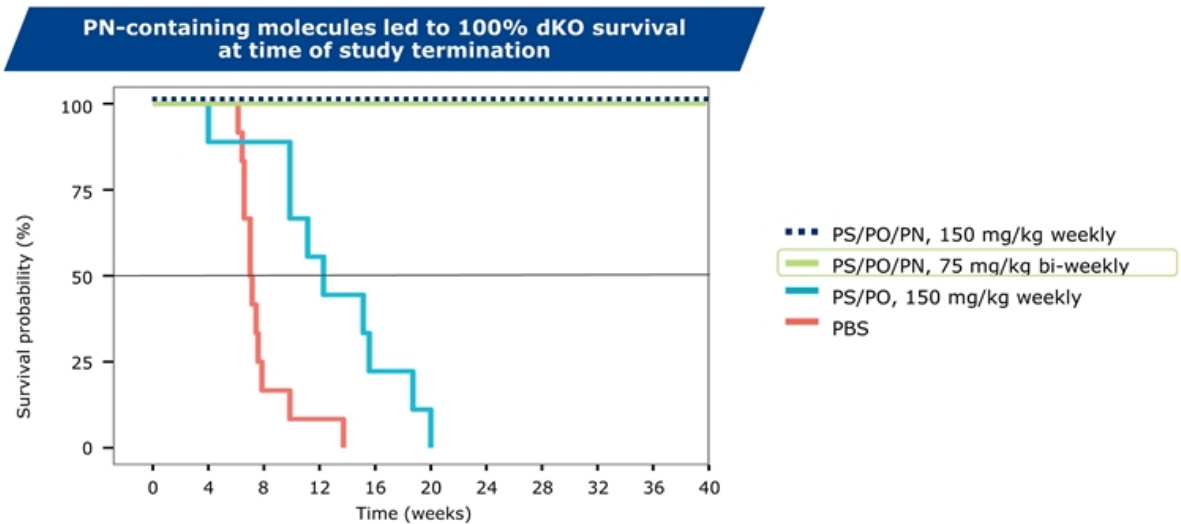


- WVE-N531 contains novel PN backbone chemistry modifications
- Free uptake for 6 days in differentiation media with no transfection agent and no peptide conjugated to the oligonucleotide
- Demonstrated a dose-dependent increase in dystrophin restoration in DMD patient-derived myoblasts



Experimental conditions: Δ45-52 (D45-52) patient myoblasts were treated with oligonucleotide for 6d under free-uptake conditions in differentiation media. Protein harvested in RIPA buffer and dystrophin restoration analyzed by Western Blot. Signal normalized to vinculin loading control and to primary healthy human myotube lysate (pooled from four donors) forming a standard curve in Δ45-52 cell lysate.

# PN chemistry led to overall survival benefit in dKO model



Note: Untreated, age-matched mdx mice had 100% survival at study termination [not shown]



## Clinical trial of WVE-N531

- Unmet need in DMD remains high
- Planned clinical trial designed to evaluate change in dystrophin production, drug concentration in muscle, and initial safety
  - Open-label study; targeting every-other-week administration in up to 15 boys with DMD
- Potential to apply PN chemistry to other exons if successful

**Dosing in clinical trial expected to initiate in 2021**

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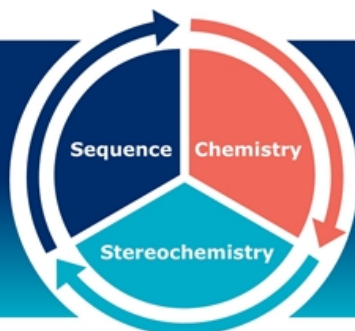
Wave's discovery and drug  
development platform



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 machine learning-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



Multiple modalities  
Silencing | Splicing | ADAR editing

# PRISM platform enables rational drug design

## Sequence

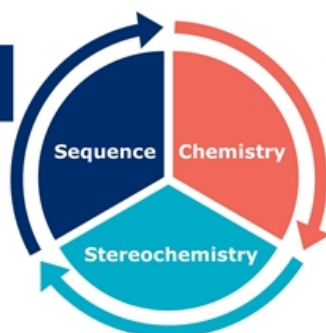
### B: bases

A, T, C, mC, G, U,  
other modified bases

## Stereochemistry

Chiral control of  
any stereocenter

5' modifications,  
backbone modifications



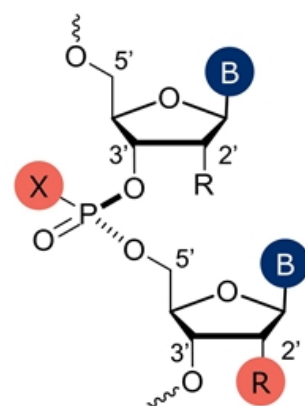
## Chemistry

### R: 2' modifications

OMe, MOE, F,  
other modifications

### X: backbone chemistry

Phosphodiester (PO),  
phosphorothioate (PS),  
Phosphoramidate diester  
(PN)

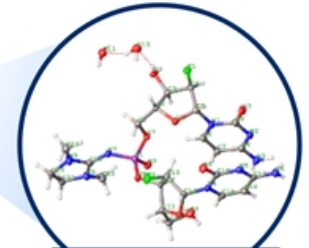


# Expanding repertoire of backbone modifications with novel PN backbone chemistry



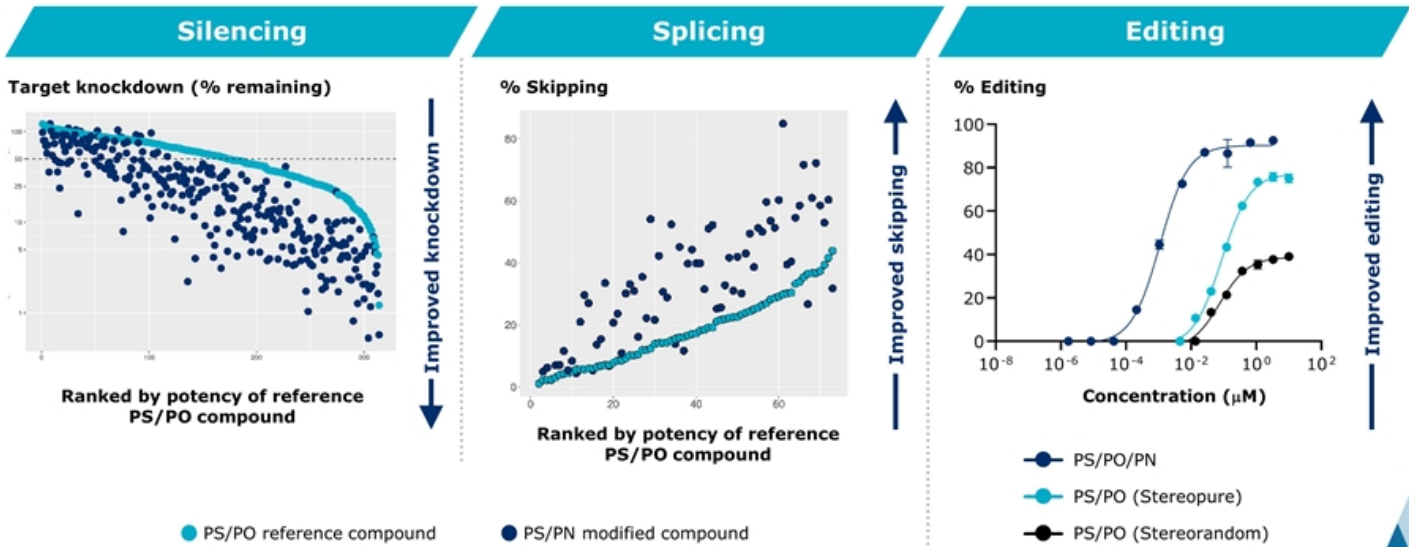
## Backbone linkages

	PO	PS	PN
<b>Backbone modification (X)</b>	Phosphodiester 	Phosphorothioate 	Phosphoramidate diester 
<b>Stereochemistry</b>	Not chiral	Chiral <ul style="list-style-type: none"> <li>◇ Stereorandom</li> <li>▲ PS backbone Rp</li> <li>▼ PS backbone Sp</li> </ul>	Chiral <ul style="list-style-type: none"> <li>□ PN backbone Stereorandom</li> <li>■ PN backbone Rp</li> <li>▢ PN backbone Sp</li> </ul>
<b>Charge</b>	Negative	Negative	Neutral
<b>Depiction</b>			
<b>PRISM backbone modifications</b>	PO/PS		PO/PS/PN



Phosphoryl guanidine x-ray structure

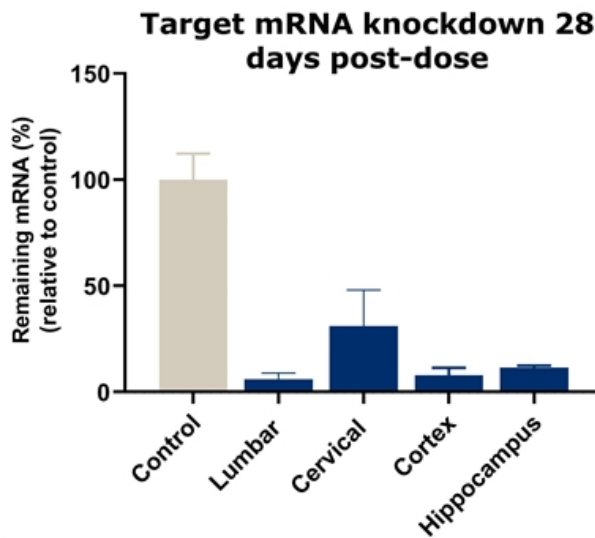
# PN chemistry increases potency in silencing, splicing, and editing preclinical studies



# Lead program in Takeda collaboration reinforces potential of PN chemistry in the CNS



Substantial and widespread target mRNA reduction following single intrathecal dose in NHPs



- Single IT dose of 12 mg (n=3)
- Therapeutic candidate widely distributed across brain and spinal cord
- ~90% mRNA knockdown one-month following single dose

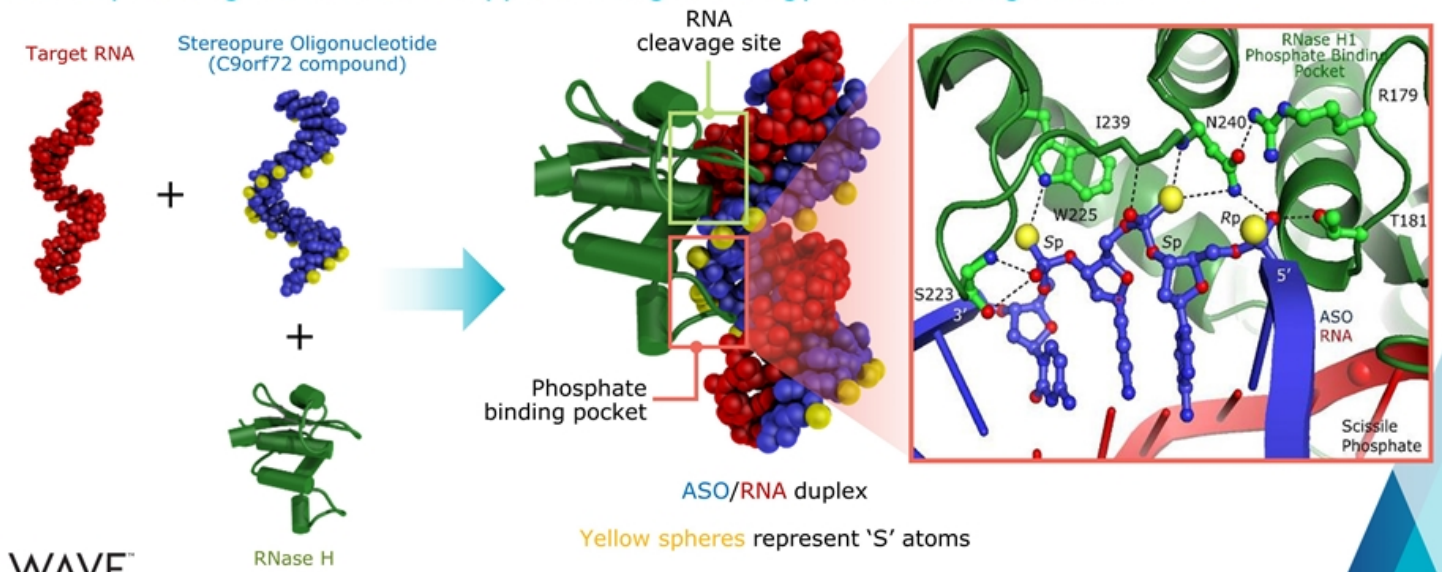


NHPs: Non-human primates; IT: intrathecal  
NHPs were administered 12 mg on day 1 via IT bolus injection; tissue samples were collected from 3 NHPs at 28 days post-dose.



# PRISM enables optimal placement of backbone stereochemistry

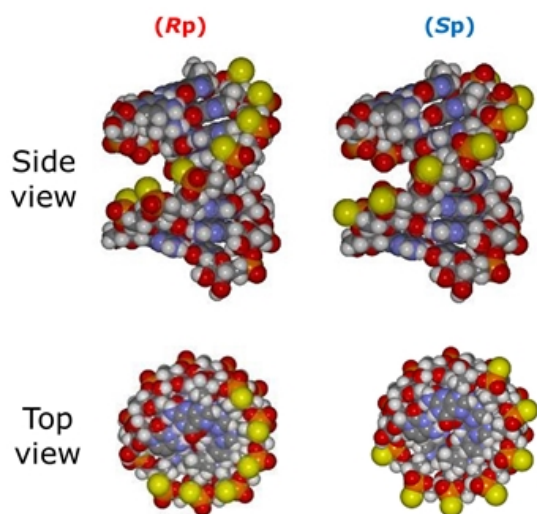
Crystal structure confirms phosphate-binding pocket of RNase H binds 3'-SSR-5' motif in stereopure oligonucleotide – supports design strategy for Wave oligonucleotides





# Importance of controlling stereochemistry

## Stereochemical diversity

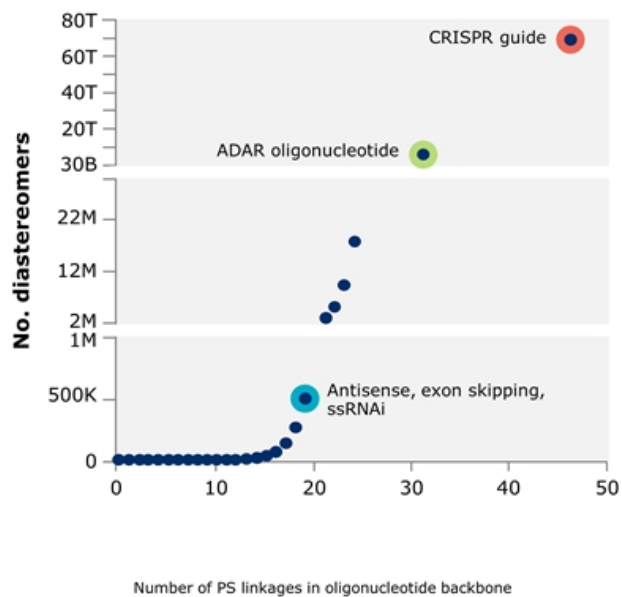


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LIFE SCIENCES Yellow spheres represent 'S' atoms

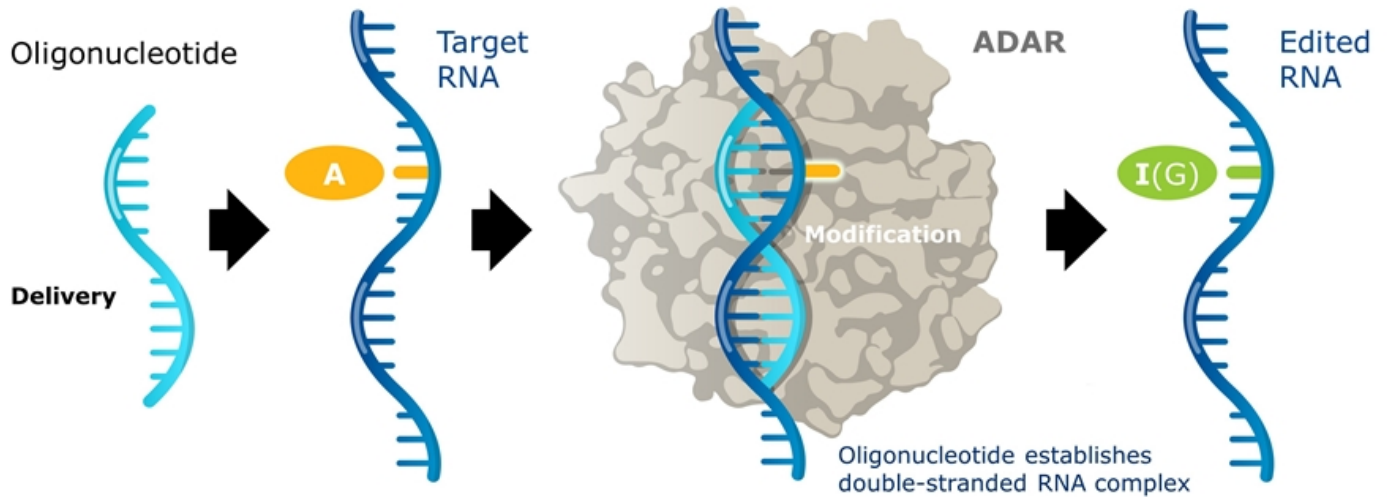
PS: Phosphorothioate

## Exponential diversity arises from uncontrolled stereochemistry



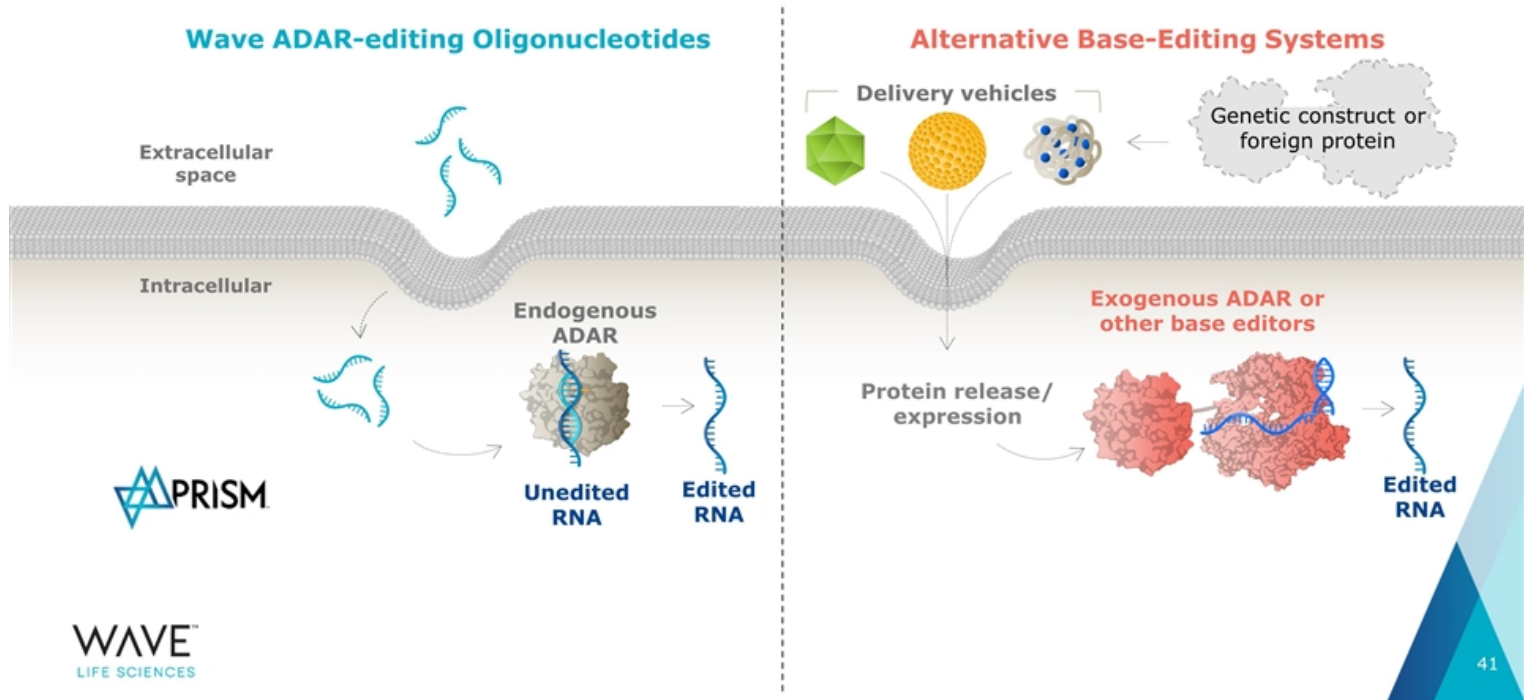
ADAR editing  
Platform capability and  
Alpha-1 antitrypsin deficiency

# PRISM platform has unlocked ADAR editing

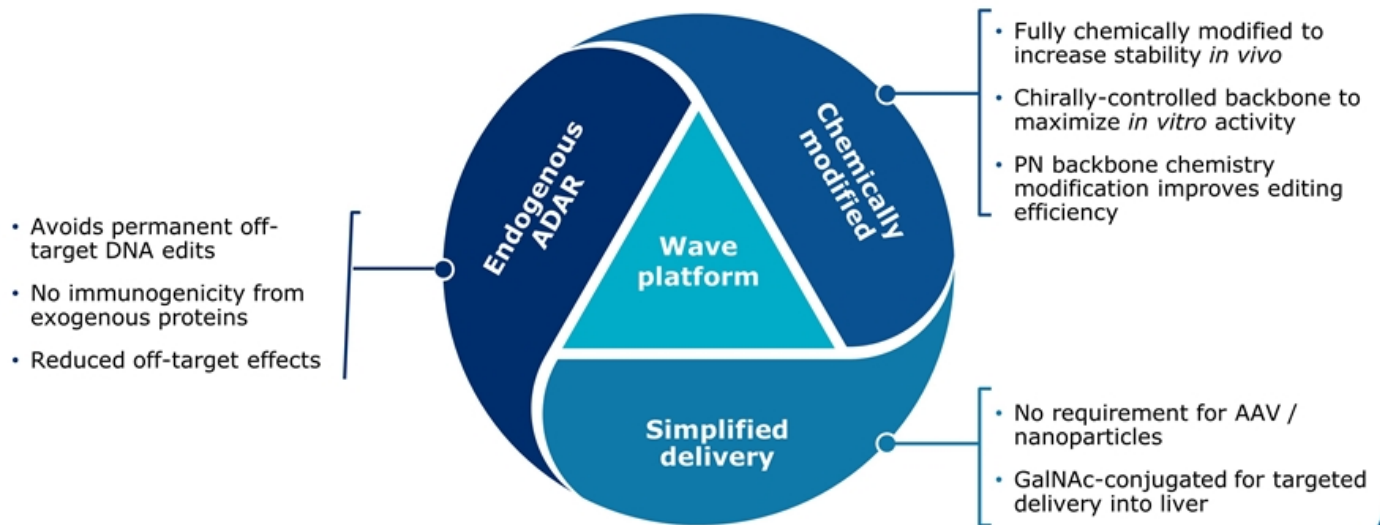


- **A-to-I** editing is one of most common post-transcriptional modifications
- ADAR is ubiquitously expressed across tissues, including liver and CNS

# PRISM enables practical approach to RNA editing without need for viruses or exogenous protein

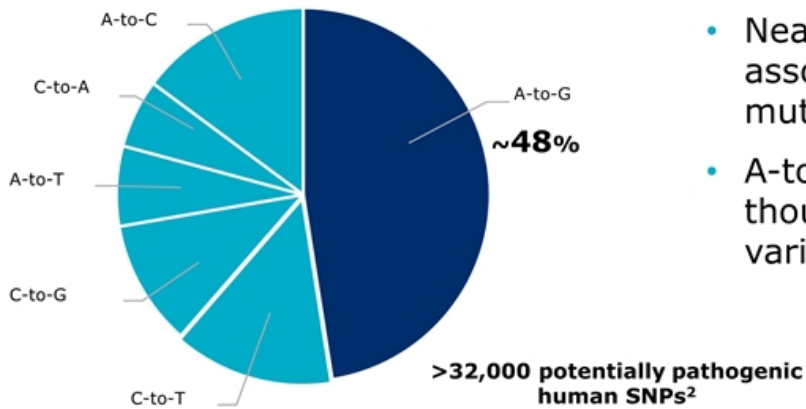


# Advantages of Wave ADAR editing platform



# ADAR amenable diseases represent a sizeable opportunity

## Potentially pathogenic human SNPs by base pair corrections



- Nearly half of known human SNPs associated with disease are G-to-A mutations
- A-to-I(G) editing could target tens of thousands of potential disease variants<sup>1</sup>

# RNA editing opens many new therapeutic applications

## Restore protein function

- Fix nonsense and missense mutations that cannot be splice-corrected
- Remove stop mutations
- Prevent protein misfolding and aggregation

Examples:

**Recessive or dominant genetically defined diseases**

## Modify protein function

- Alter protein processing (e.g. protease cleavage sites)
- Protein-protein interactions domains
- Modulate signaling pathways

Examples:

**Ion channel permeability**

## Protein upregulation

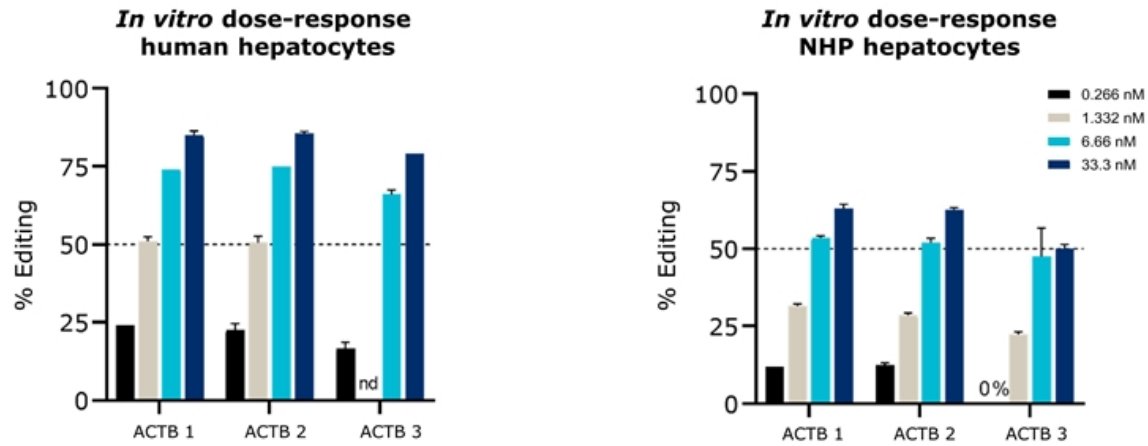
- miRNA target site modification
- Modifying upstream ORFs
- Modification of ubiquitination sites

Examples:

**Haploinsufficient diseases**

# Significant ADAR editing demonstrated *in vitro* in NHP and primary human hepatocytes

ACTB GalNAc-conjugated oligonucleotides with stereopure PN backbone chemistry modifications

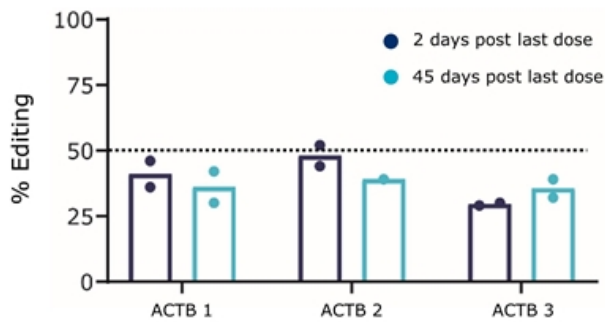




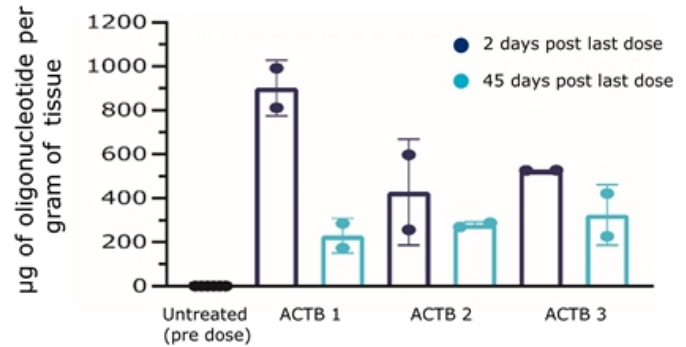
# Efficient ADAR editing translated *in vivo* in non-human primate study

- Up to 50% editing efficiency observed at Day 7, 2 days post last dose
- Substantial and durable editing out to at least Day 50, 45 days post last dose

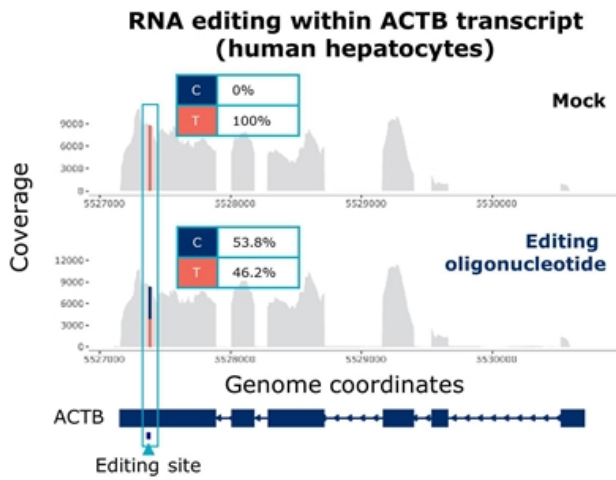
**In vivo editing in NHP following subcutaneous administration**



**Oligonucleotide quantification in NHP following subcutaneous administration**



# Wave ADAR editing oligonucleotides are highly specific



# Advancing Wave's first ADAR editing program in alpha-1 antitrypsin deficiency (AATD)

- Most common cause is a single G-to-A point mutation on the "Z" allele
- **~200K people in US and EU** with homozygous ZZ genotype, most common form of severe AATD
- Approved therapies modestly increase circulating levels of wild-type AAT in those with lung pathology; no therapies address liver pathology

## Wave's approach may simultaneously address lung and liver manifestations by using ADAR editing to correct mutation:

- Increase circulating levels of wild-type AAT protein
- Reduce aggregation of Z-AAT in liver
- Retain wild-type AAT physiological regulation

### Dual pathologies in AATD

#### Loss of function in lung

##### Lack of functional AAT in serum:

- Insufficient levels to counteract protease levels, e.g., neutrophil elastase
- Lung damage due to unchecked proteolytic activity and inflammation
- Other tissues may be affected (e.g., skin)



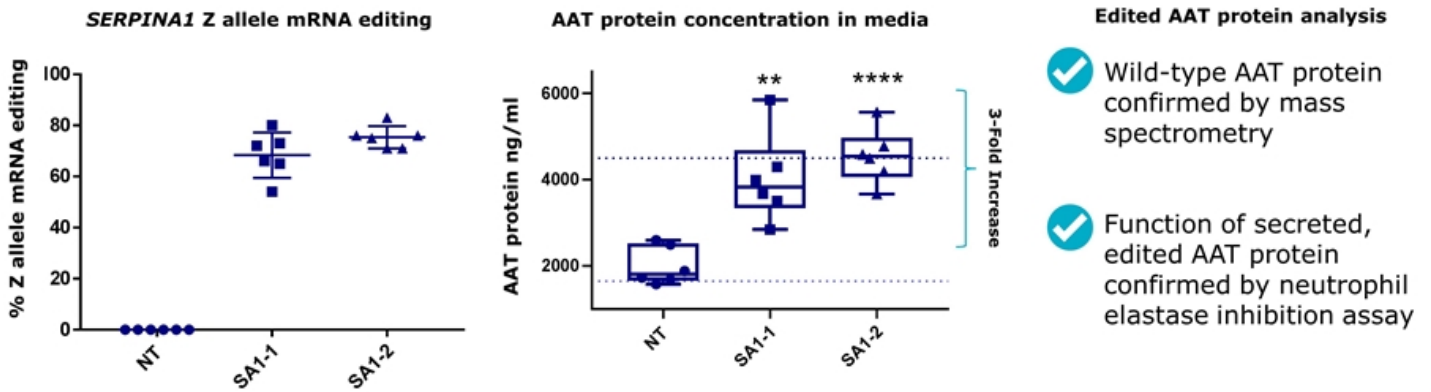
#### Gain of function in liver

##### Misfolding of AAT in hepatocytes:

- Inability to secrete AAT
- AAT polymerizes in liver
- Liver damage/cirrhosis

# *SERPINA1* Z allele mRNA editing increases edited AAT protein concentration *in vitro*

In primary hepatocyte *SERPINA1* Z cell model, editing the Z allele mRNA back to wild-type prevents protein misfolding and increases secretion of edited AAT protein from hepatocytes

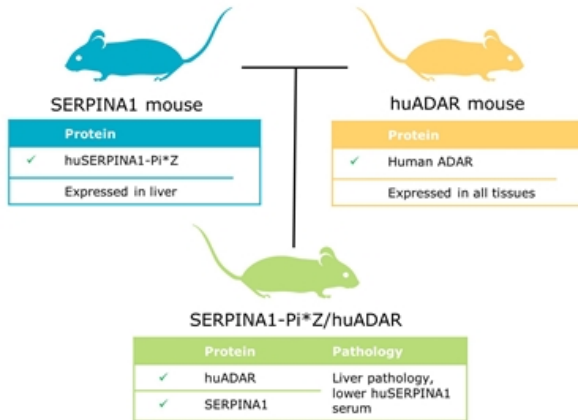


Model validation and *in vivo* data expected 1H 2021

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AAT (alpha-1 antitrypsin); Mouse primary hepatocytes that express *SERPINA1* Z allele mRNA were transfected with 25 nanomolar (nM) of *SERPINA1* (SA1-1 and SA1-2) targeting antisense oligonucleotides (ASOs) and a control non-targeting (NT) ASO. Media and RNA was collected at 5 days post transfection. AAT protein in media was quantified by Elisa Assay, RNA editing was quantified by RT/PCR/Sanger sequencing.

# Proprietary humanized mouse model developed to support ADAR platform

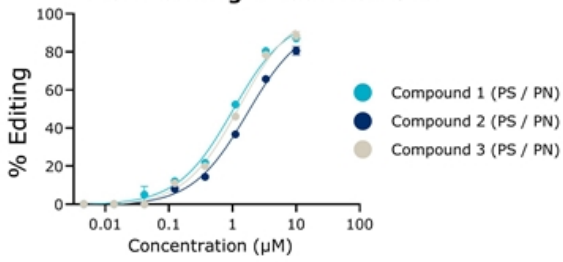


- Expression of huADAR in mouse is comparable to expression in human cells
- Expression of huADAR restores editing of endogenous targets in primary mouse cell types to levels seen in human primary cell types
- huADAR mouse model can be crossed with disease specific mouse models to provide model systems for use across Wave's ADAR editing programs

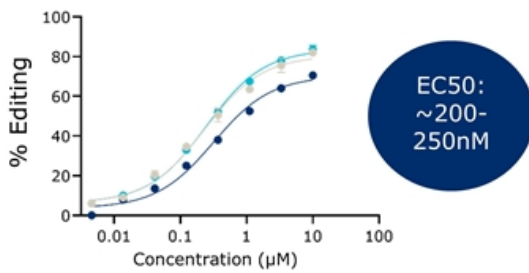
**Model validation and *in vivo* data expected 1H 2021**

# Multiple opportunities for ADAR editing in neurology

### ACTB editing in iCell Neurons



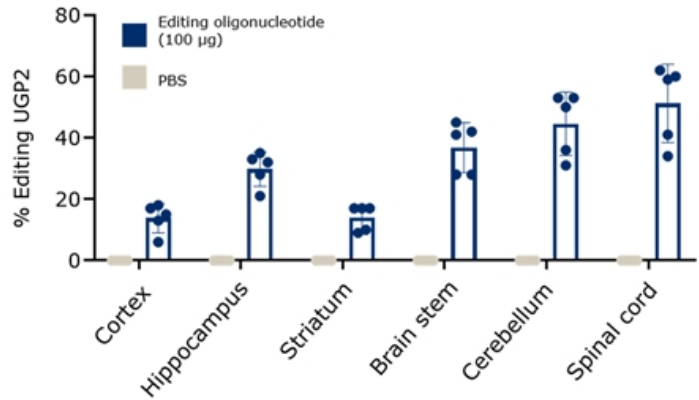
### ACTB editing in human iCell Astrocytes



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Gymnotic uptake; Total RNA was harvested, reverse transcribed to generate cDNA, and the editing target site was amplified by PCR and quantified by Sanger sequencing

### In vivo CNS editing in proprietary hADAR transgenic mouse (1 week)



hADAR: human ADAR; UGP2: Glucose Pyrophosphorylase 2; 5 mice in each group were injected with PBS or a single 100µg dose on day 0. Animals were necropsied on day 7. RNA was harvested and editing measured by Sanger sequencing.

**PRISM**

## Ophthalmology

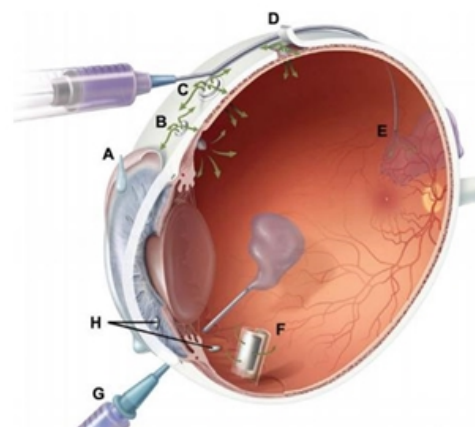
# Stereopure oligonucleotides for inherited retinal diseases (IRDs)

## 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

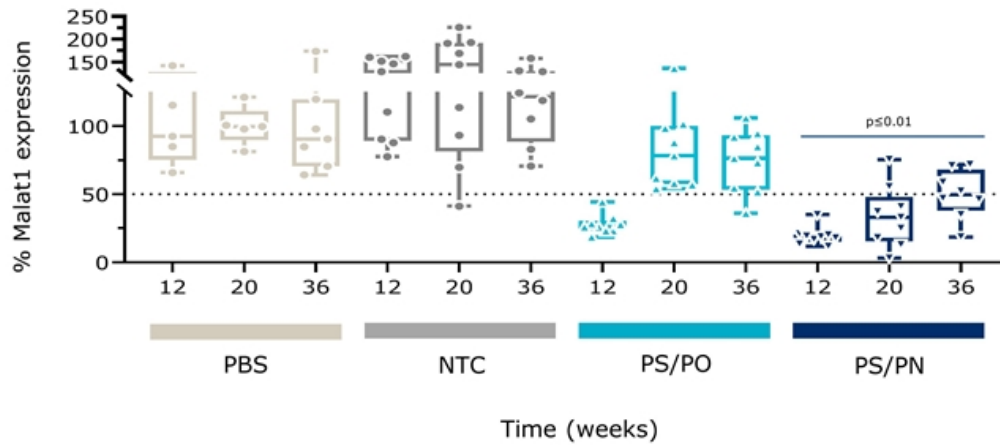


Intravitreal injection



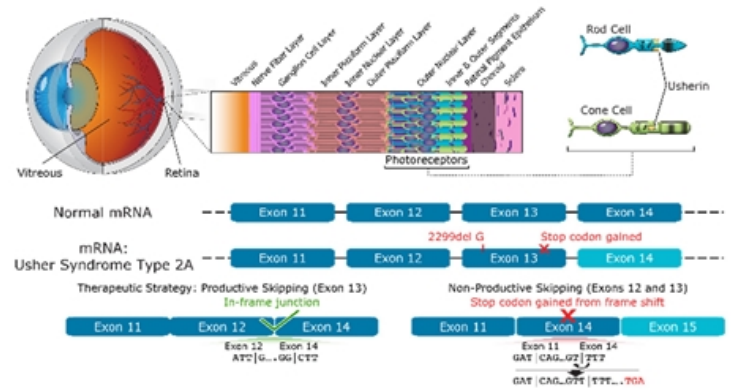
# Durable Malat1 knockdown through 9 months with PN backbone chemistry modifications

~50% Malat1 knockdown at 36 weeks in the posterior of the eye



# Usher Syndrome Type 2A: a progressive vision loss disorder

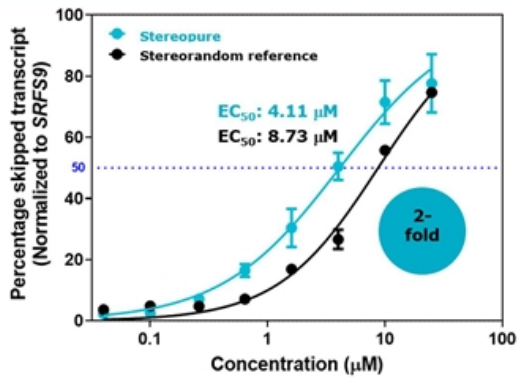
- Autosomal recessive disease characterized by hearing loss at birth and progressive vision loss beginning in adolescence or adulthood
- Caused by mutations in USH2A gene (72 exons) that disrupt production of usherin protein in retina, leading to degeneration of the photoreceptors
- No approved disease-modifying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



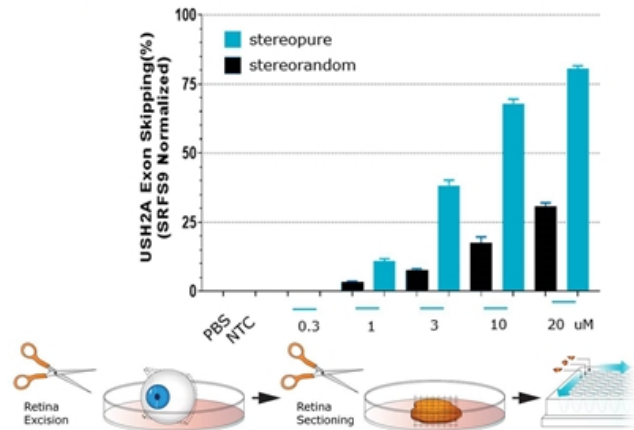
**Oligonucleotides that promote USH2A exon 13 skipping may restore production of functional usherin protein**

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

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

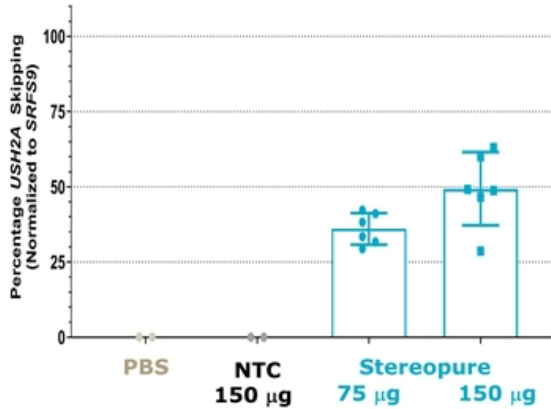


## Target engagement in NHP retinas



# Stereopure oligonucleotide elicits dose-dependent exon skipping in NHP eye *in vivo*

## Dose-dependent and specific exon skipping in NHP eye

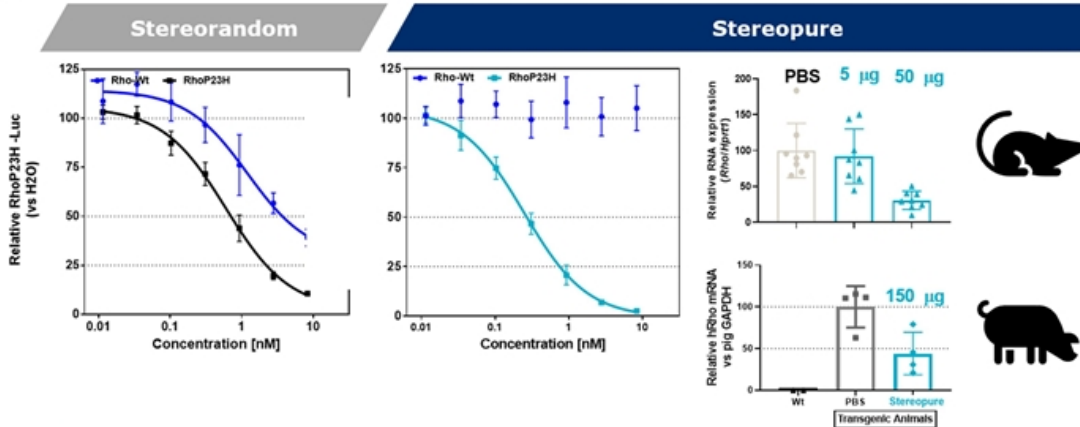


- Oligonucleotide is complementary to NHP *USH2A* exon 12\*
- Evaluated 1-week post-single IVT injection
- Dose-dependent activity of **stereopure** oligonucleotides
- Substantial exposure in retina
- Exon-skipping integrity confirmed by RNA-seq at both doses

\*NHP exon 12 = human exon 13

# 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



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Left: Reporter assays on a sequence described in WO2016138353A1. Oligonucleotide and luciferase reporter plasmids (wild-type and mutant RHO) are transfected into Cos7 cells. Cells are harvested after 48 hrs, and relative luminescence is measured. Right: Single IVT injection (1 mL) in mouse Rho P23H mouse model or (150 mL) in human P23H pig model. Eyes collected 1-week post injection for mouse or 2-weeks post injection for pig; RNA isolated; Rho, Hprt1, and Gapdh levels determined by qPCR.

# Expected upcoming milestones

THERAPEUTIC AREA / TARGET 




Milestone

## NEUROLOGY

<b>Huntington's disease</b> mHTT SNP3	 	<b>2021:</b> Dosing of first patient in clinical trial of WVE-003
<b>ALS and FTD</b> C9orf72	 	<b>2021:</b> Dosing of first patient in clinical trial of WVE-004
<b>DMD</b> Exon 53	 	<b>2021:</b> Dosing of first patient in clinical trial of WVE-N531
<b>ADAR editing</b> Multiple	 	<b>1H 2021:</b> Humanized mouse model validation

## HEPATIC

<b>AATD (ADAR editing)</b> SERPINA1	 	<b>1H 2021:</b> <i>in vivo</i> AATD data
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  Stereopure  PN chemistry

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ALS: Amyotrophic lateral sclerosis FTD: Frontotemporal dementia AATD: Alpha-1 antitrypsin deficiency

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Realizing a  
brighter future  
for people  
affected by  
genetic diseases

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