



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



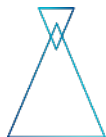
INNOVATIVE PLATFORM

- Stereopure oligonucleotides
- Novel backbone modifications (PN chemistry)
- Allele-selectivity
- Multiple modalities (silencing, splicing, ADAR editing)
- Strong IP position¹



FOUNDATION OF NEUROLOGY PROGRAMS

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



CLINICAL DEVELOPMENT EXPERTISE

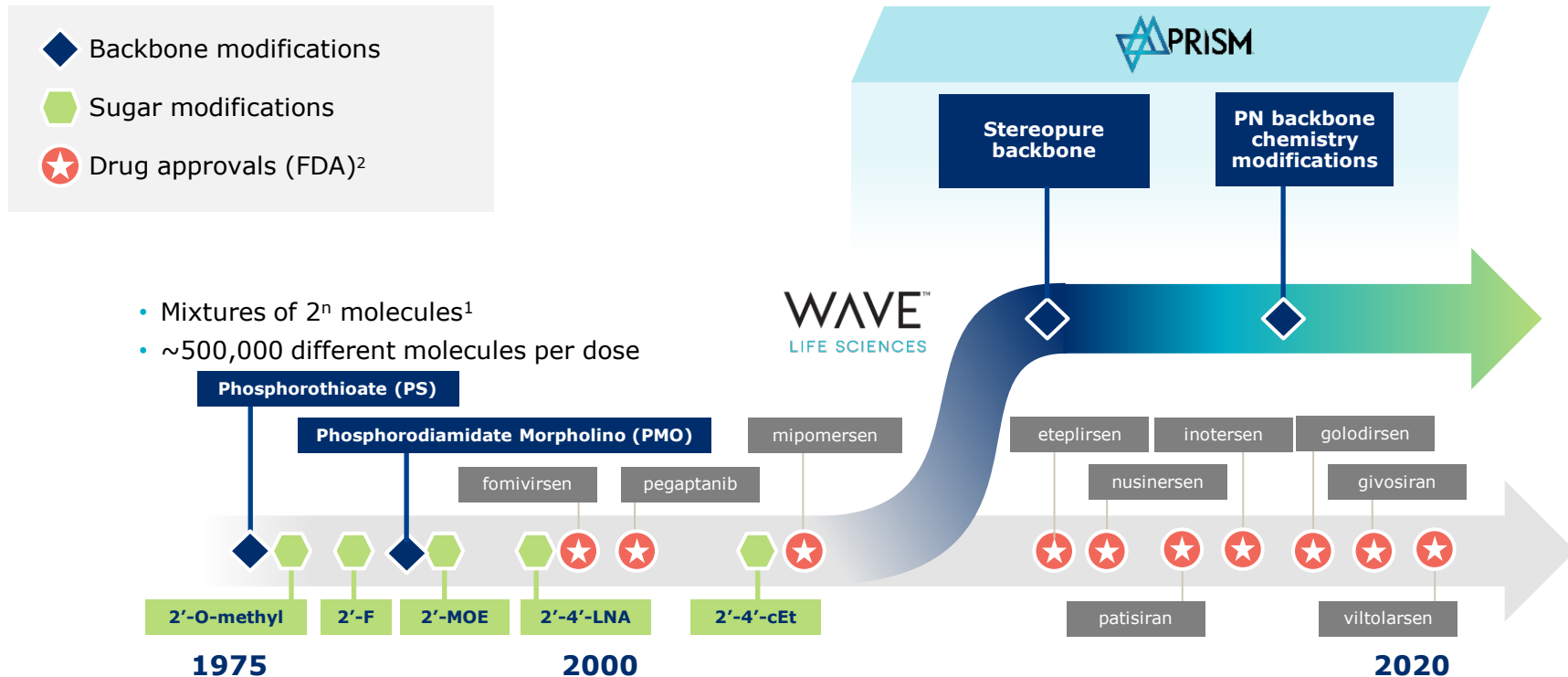
- Multiple global clinical trials
- Innovative trial designs



















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
Neurology						
ALS and FTD C9orf72			WVE-004			Takeda 50:50 option
Huntington's disease mHTT SNP3			WVE-003			
SCA3 ATXN3						
CNS diseases Multiple†						Takeda milestones & royalties
DMD Exon 53			WVE-N531			100% global
ADAR editing Multiple						
Hepatic						
AATD (ADAR editing) SERPINA1						100% global
Ophthalmology						
Retinal diseases USH2A and RhoP23H						100% global



 Stereopure

 PN chemistry

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

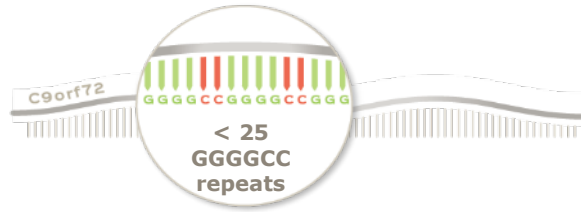
Exon skipping candidate in DMD

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

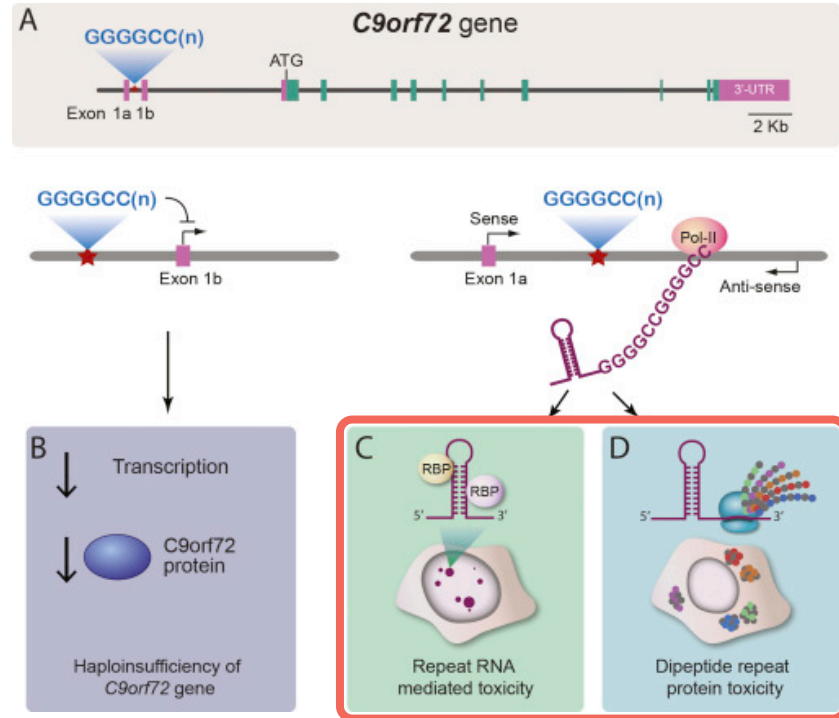
Disease		C9 specific US population	Mean disease duration	Standard of care
C9-ALS	<ul style="list-style-type: none"> Fatal neurodegenerative disease Progressive degeneration of motor neurons in brain and spinal cord 	~2,000	3.1 years	Significant unmet need despite two approved therapies in US
C9-FTD	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

Two devastating diseases with a shared genetic basis

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

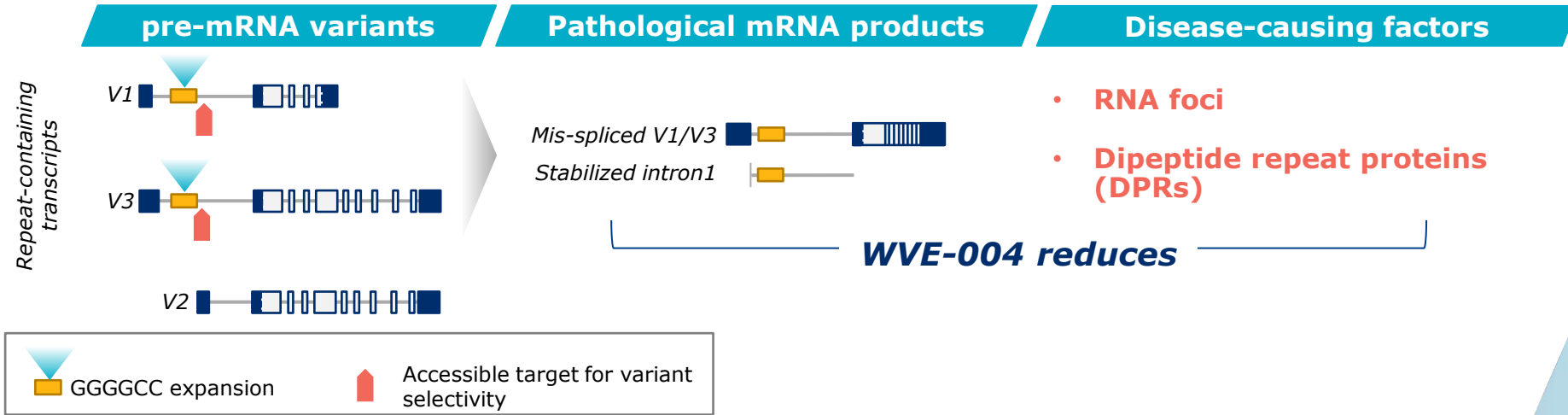
Variant-selective targeting could address multiple potential drivers of toxicity



Targeted by Wave ASOs

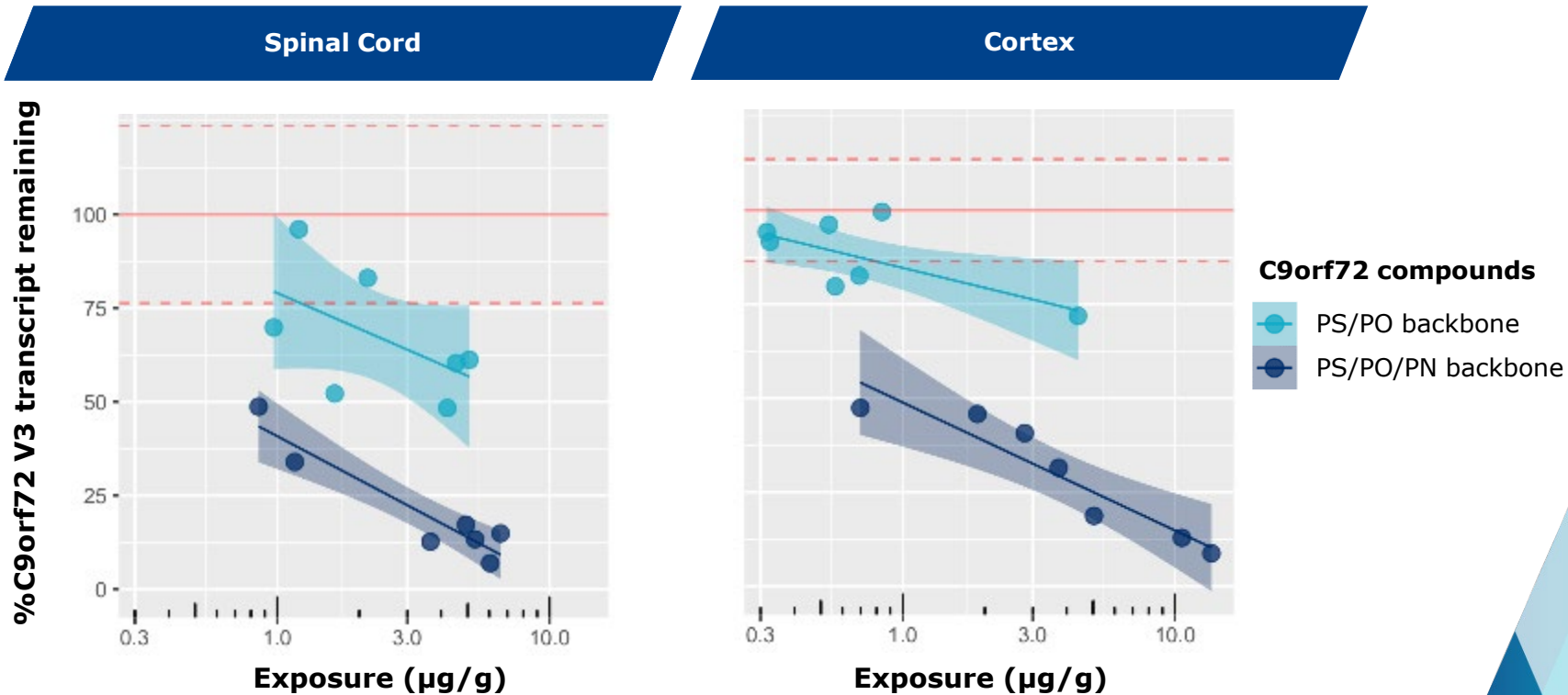
C9orf72 targeting strategy spares C9orf72 protein

- 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



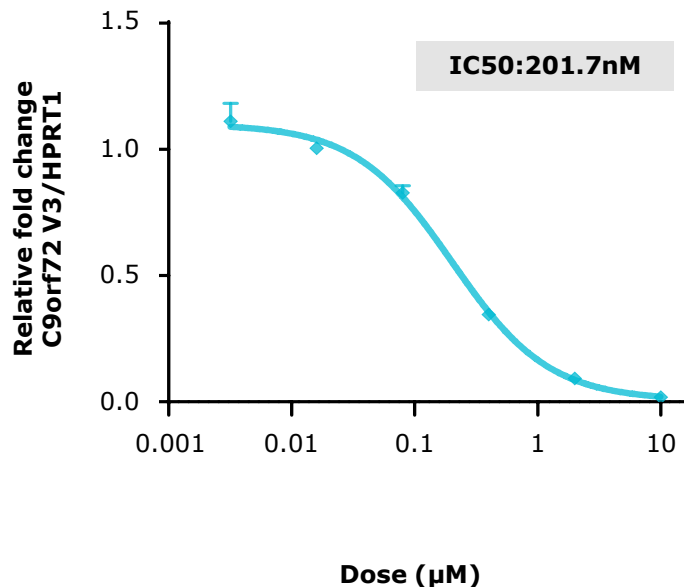
WVE-004 targets only V1 and V3 transcripts, sparing V2 transcripts and healthy C9orf72 protein

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

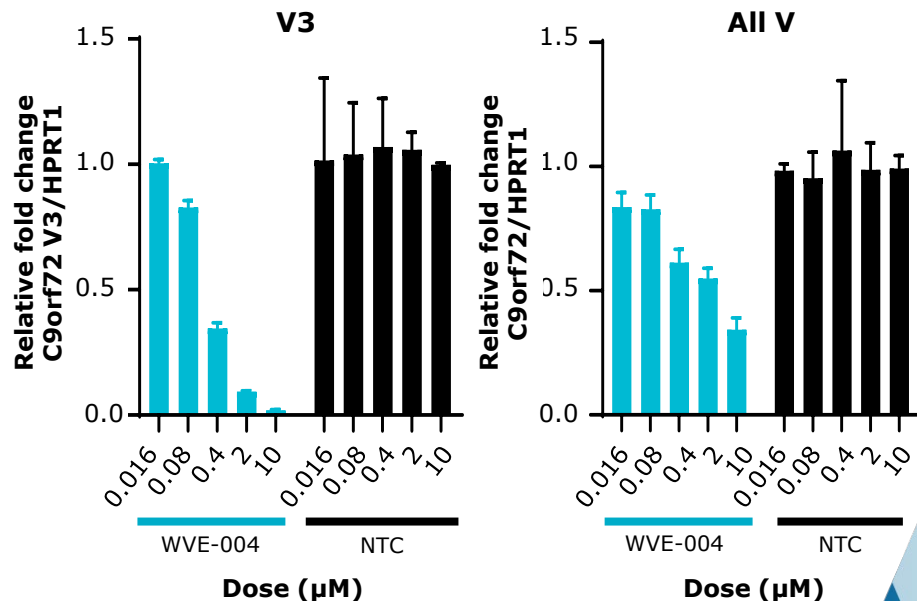


WVE-004: Potent and selective knockdown of repeat-containing transcripts *in vitro*

In vitro activity in C9 patient-derived neurons

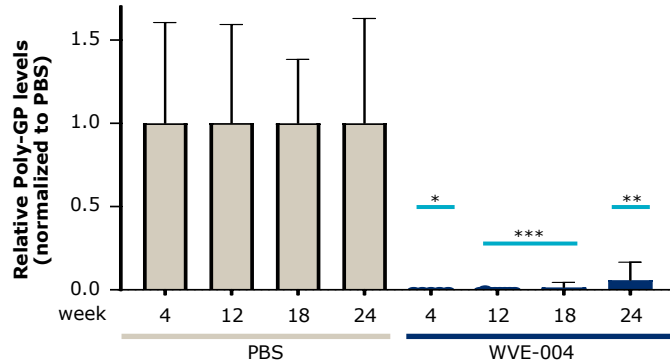


In vitro selectivity in C9 patient-derived neurons

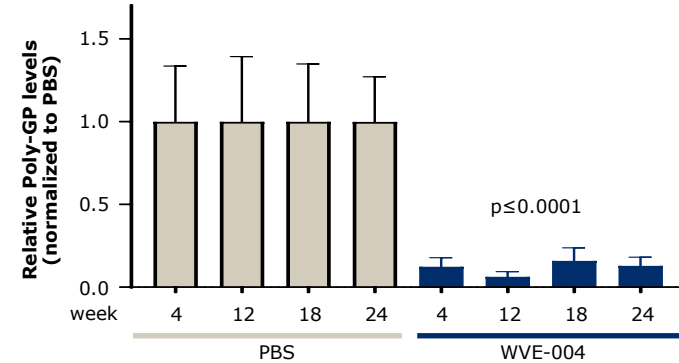


WVE-004 demonstrates durable reduction of DPRs in vivo after 6 months in spinal cord and cortex

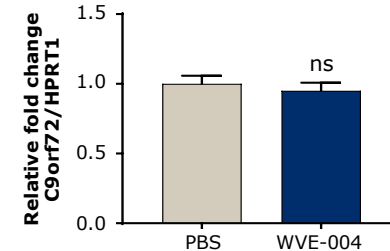
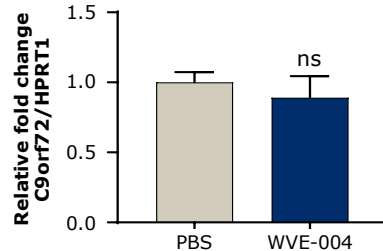
Spinal cord



Cortex



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



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

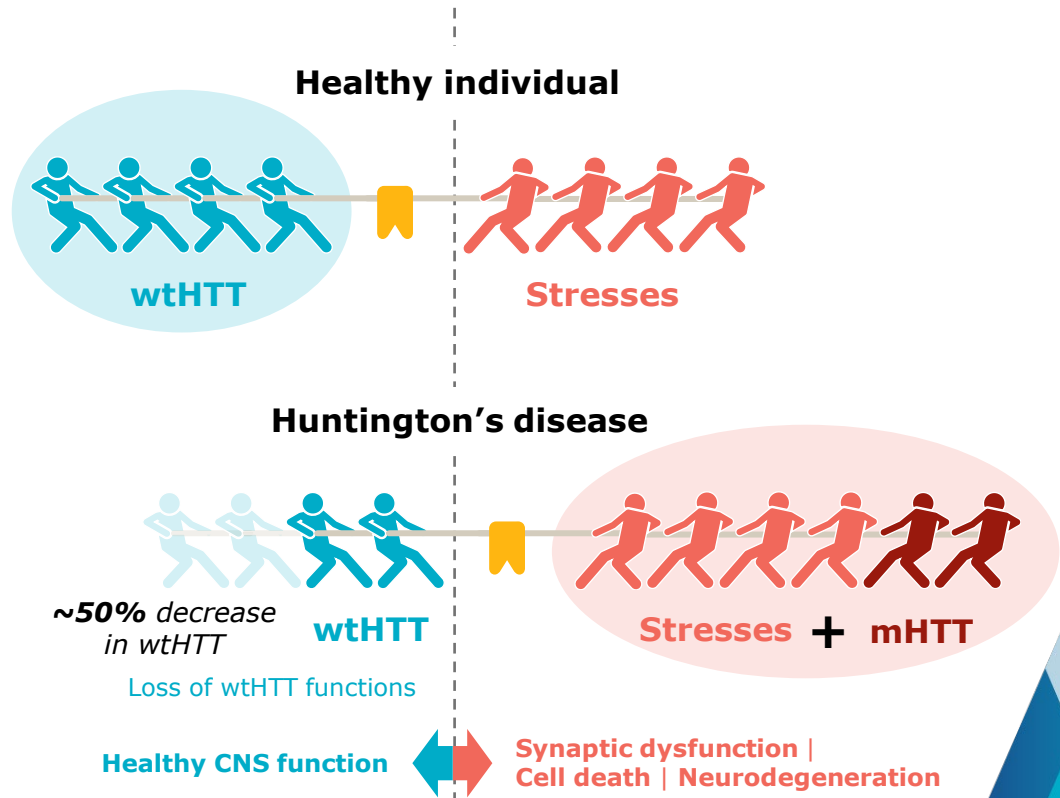
Dosing in Phase 1b/2a trial expected to initiate in 2021

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)¹⁻⁸

SYNAPSE



Plays an essential role in the transport of synaptic proteins—including neurotransmitters and receptors—to their correct location at synapses⁹⁻¹²

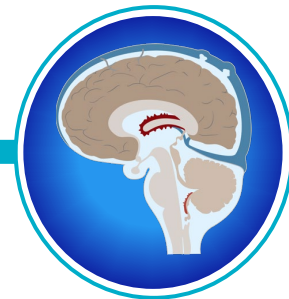
BRAIN CIRCUITS



Supplies BDNF to the striatum to ensure neuronal survival¹³⁻¹⁶

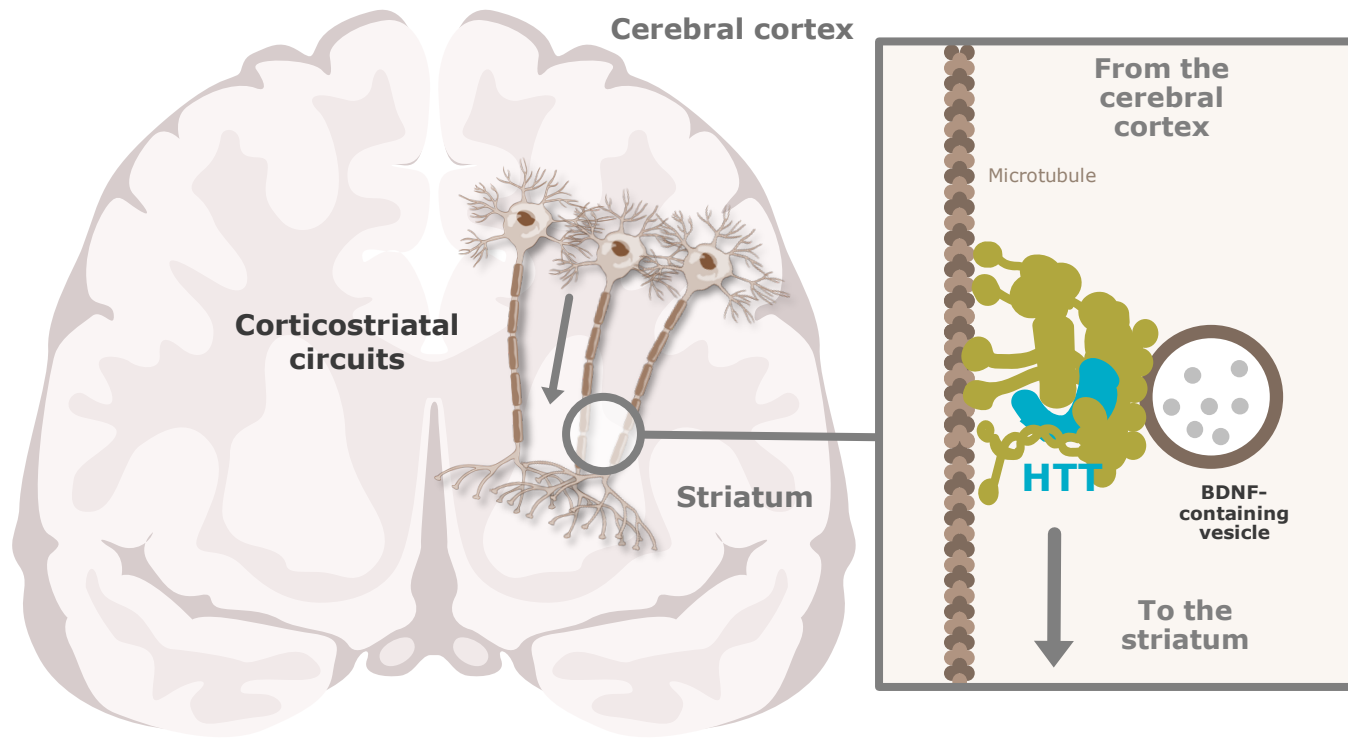
Regulates synaptic plasticity, which underlies learning and memory¹⁷⁻²²

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 homeostasis²³

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



Striatal neurons do not produce BDNF, but they need it to survive¹

HTT promotes the production of BDNF and transports BDNF from the **cortex** to the striatum^{2,3}

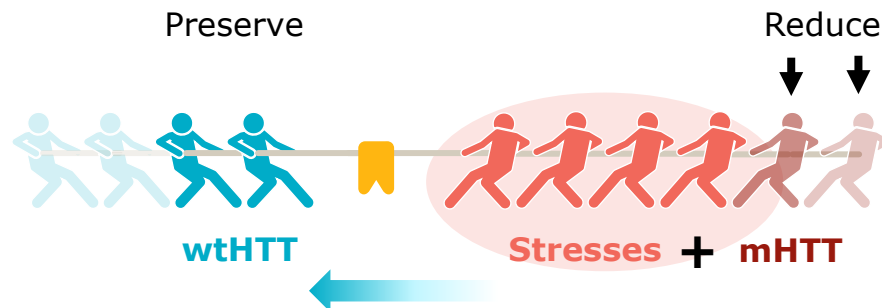
In HD, decreased levels of BDNF contribute to degeneration of corticostriatal circuits^{2,4,5}

Reduction of wtHTT may decrease the availability of BDNF and accelerate corticostriatal degeneration⁶

Allele-selective approach to treating HD

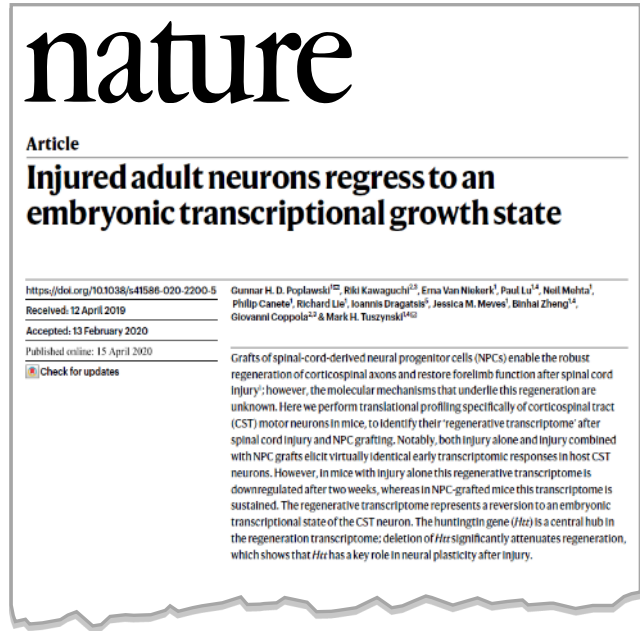
Wave has only allele-selective clinical program in Huntington's disease

- ✓ 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



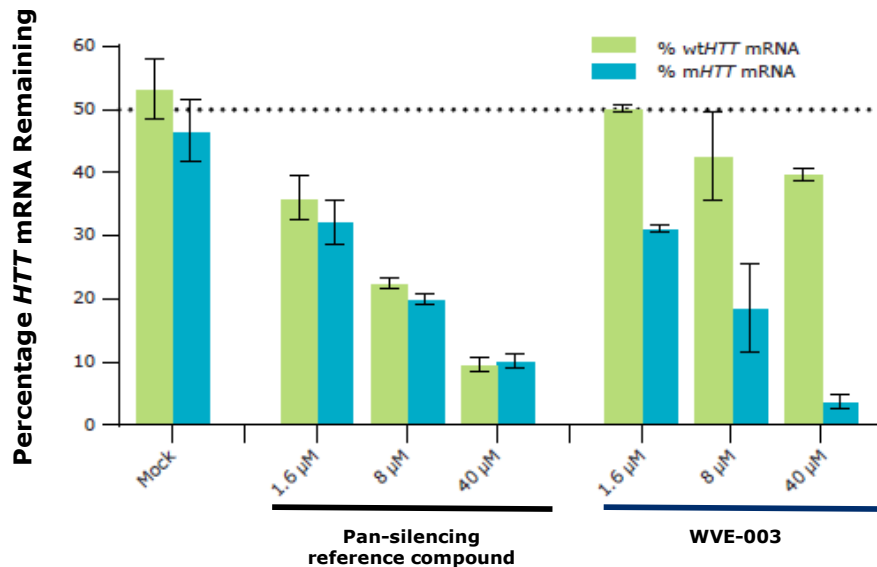
- Conditional knock-out of Htt in 4-month old mice (post-neuronal development)
- Results suggest that:
 - 1) Htt plays a central role in the regenerating transcriptome (potentially influencing genes such as NFkB, STAT3, BDNF)
 - 2) Htt is essential for regeneration

“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”

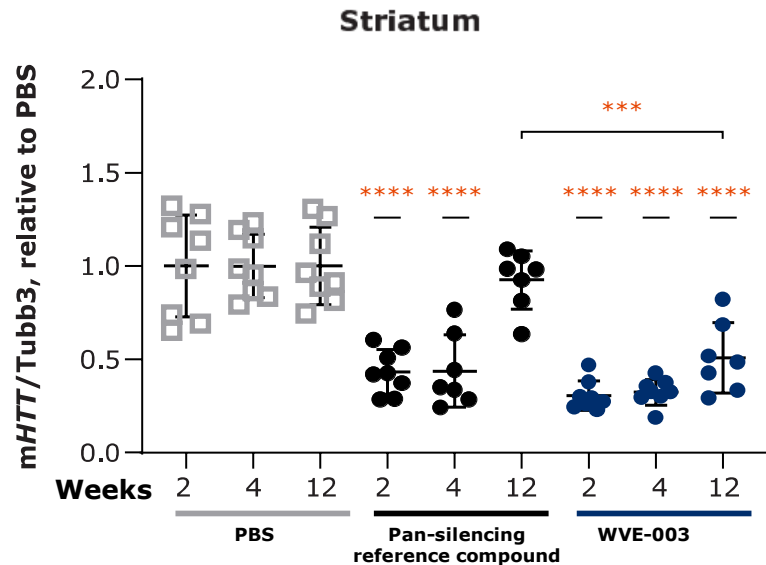
WVE-003 (SNP3) demonstrates selective, potent, and durable reduction of mHTT in preclinical models

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



PK-PD modeling to guide dosing in clinical trial

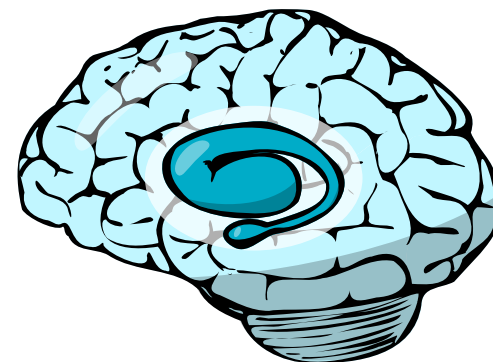


Ascending dose studies

- PK & mHTT knockdown data
- IC₅₀ determination



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



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

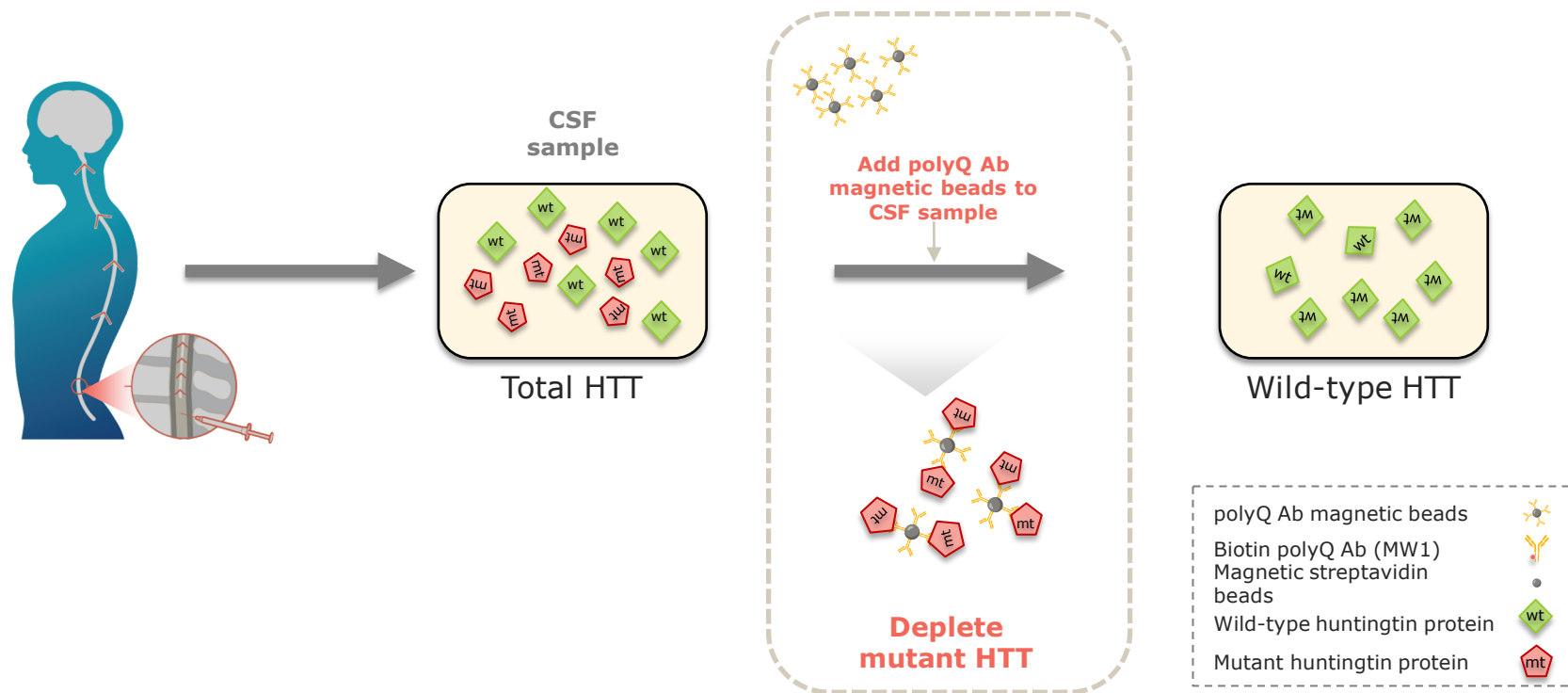
Adaptive SAD/MAD design

- 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



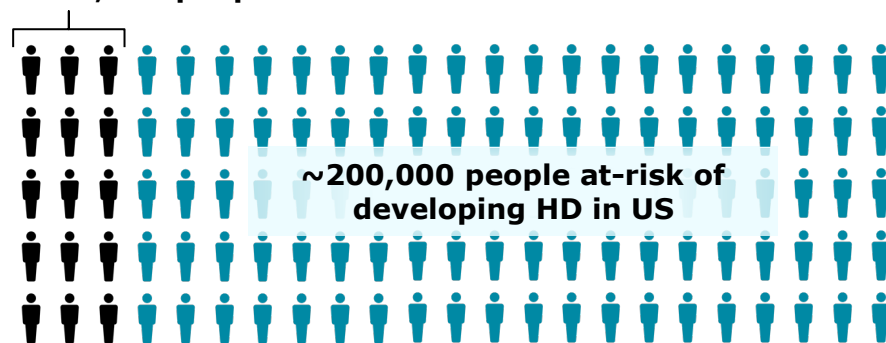
Wave approach: novel, allele-selective silencing

~40% of HD Patients Carry SNP3



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

~30,000 people with manifest HD in US



~200,000 people at-risk of developing HD in US

1 icon : 2000 patients

Personalized approach to wtHTT sparing opens possibility of early treatment



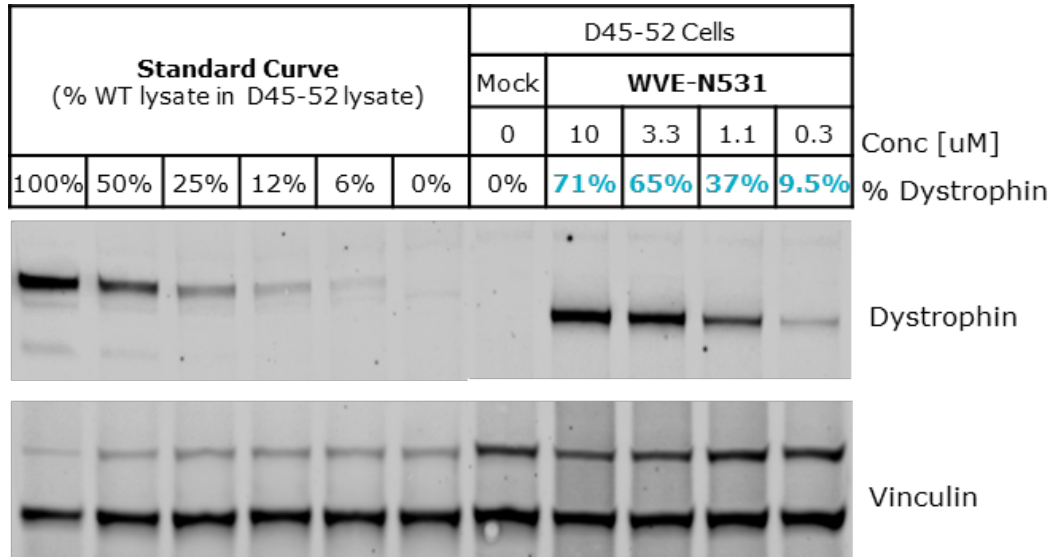
WVE-N531

Duchenne muscular dystrophy

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

Dystrophin protein restoration of up to 71%

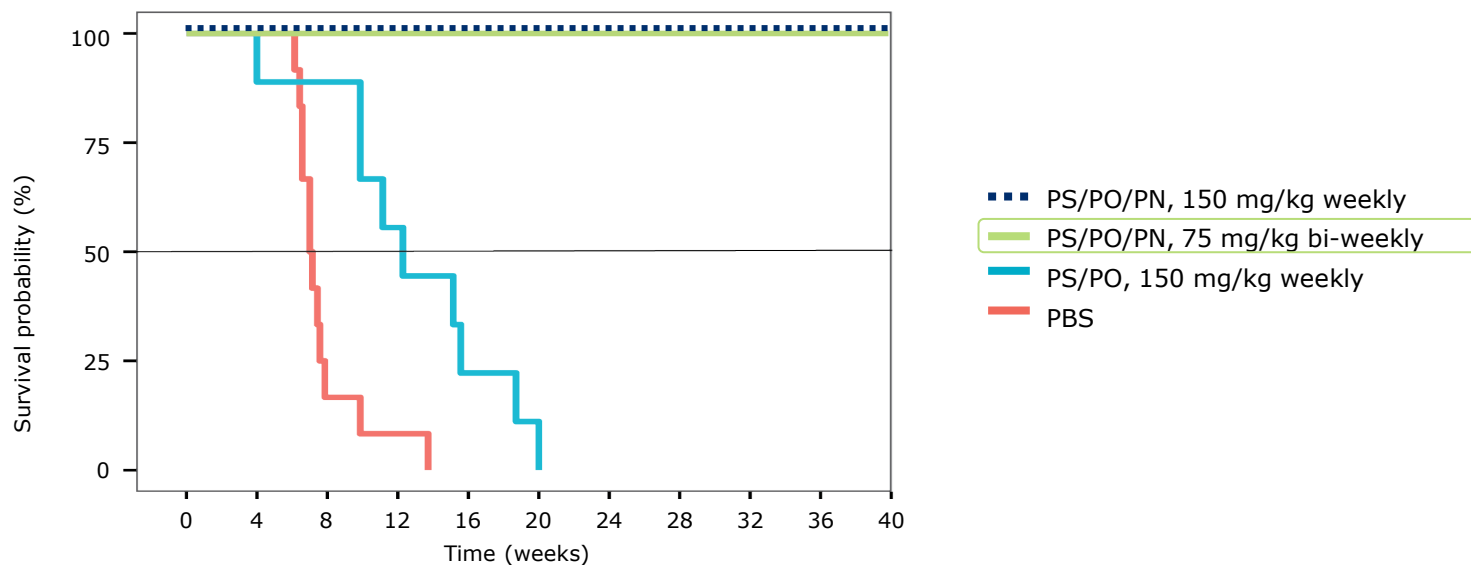
Western Blot normalized to
primary healthy human myoblast lysate



- 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

PN chemistry led to overall survival benefit in dKO model

PN-containing molecules led to 100% dKO survival at time of study termination



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



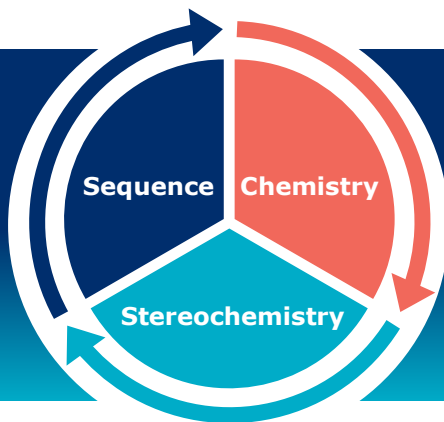
Wave's discovery and drug
development platform



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

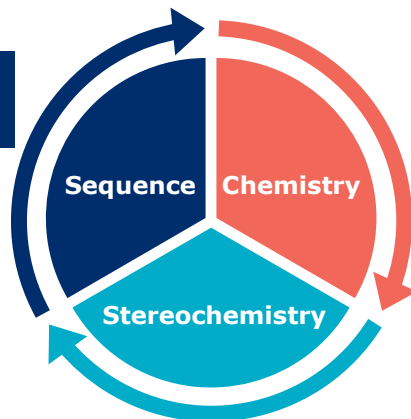
B: bases

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

Stereochemistry

Chiral control of
any stereocenter

5' modifications,
backbone modifications



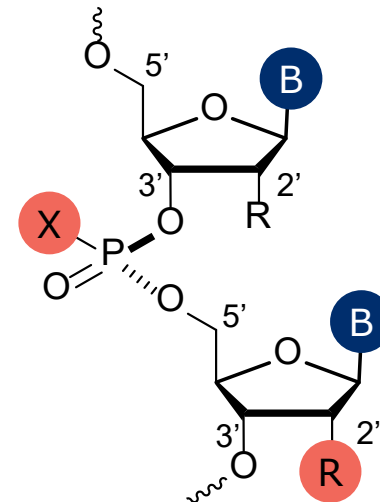
Chemistry

R: 2' modifications

OMe, MOE, F,
other modifications

X: backbone chemistry

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

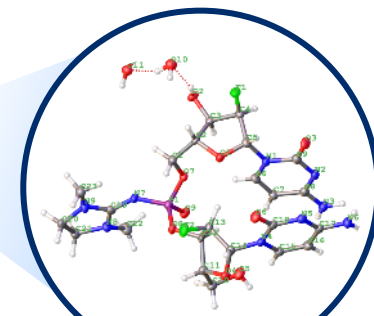


Expanding repertoire of backbone modifications with novel PN backbone chemistry



Backbone linkages

	PO	PS	PN
Backbone modification (X)	Phosphodiester 	Phosphorothioate 	Phosphoramidate diester
Stereochemistry	Not chiral	Chiral <div> ◇ Stereorandom ▲ PS backbone <i>Rp</i> ▼ PS backbone <i>Sp</i> </div>	Chiral <div> □ PN backbone Stereorandom ▲ PN backbone <i>Rp</i> ▼ PN backbone <i>Sp</i> </div>
Charge	Negative	Negative	Neutral
Depiction			
PRISM backbone modifications	PO/PS		PO/PS/PN

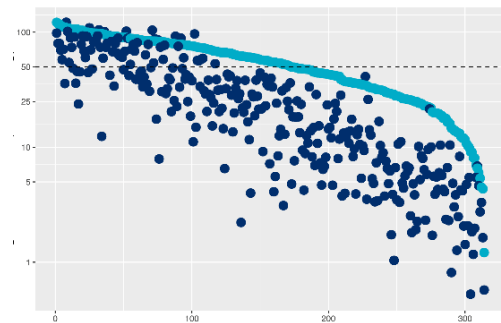


Phosphoryl guanidine x-ray structure

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

Silencing

Target knockdown (% remaining)

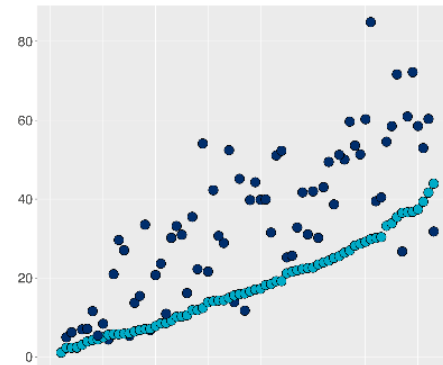


Ranked by potency of reference
PS/PO compound

● PS/PO reference compound

Splicing

% Skipping

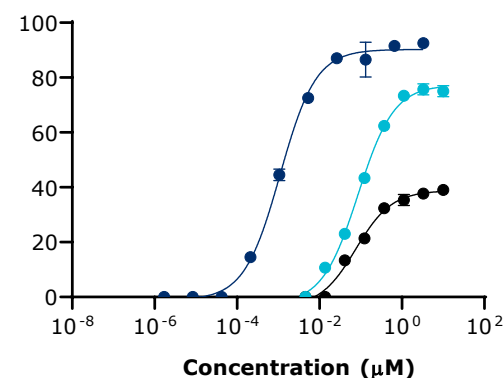


Ranked by potency of reference
PS/PO compound

● PS/PN modified compound

Editing

% Editing



● PS/PO/PN

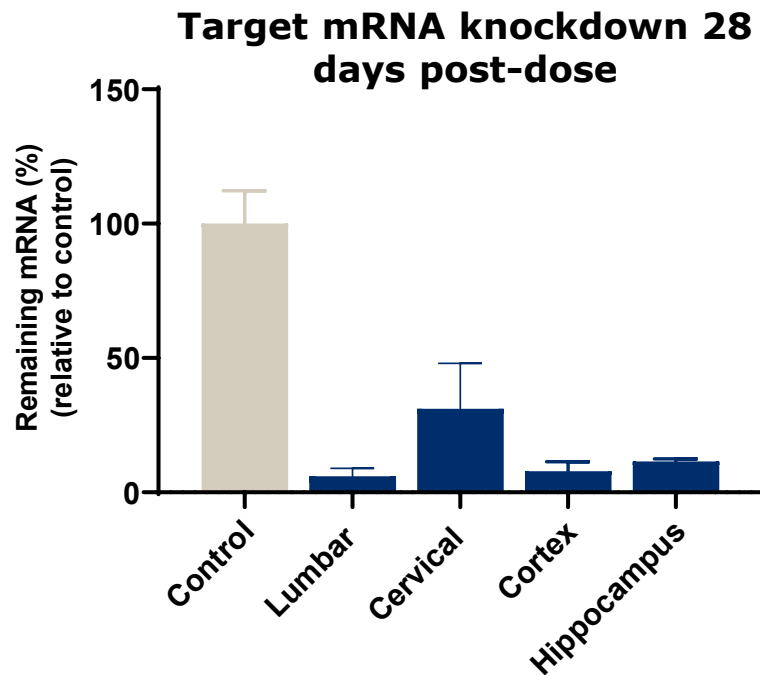
● PS/PO (Stereopure)

● PS/PO (Stereorandom)

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

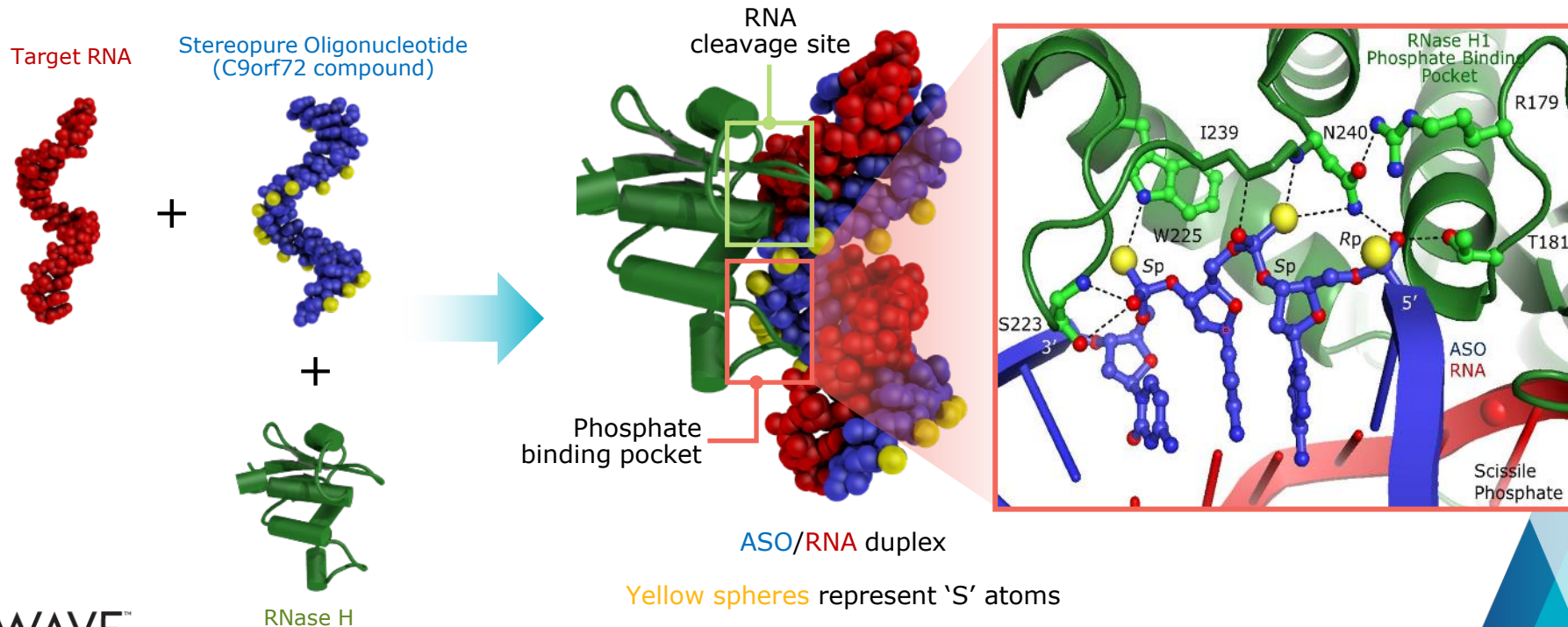


- Single IT dose of 12 mg (n=3)
- Therapeutic candidate widely distributed across brain and spinal cord
- ~90% mRNA knockdown one-month following single dose

PRISM enables optimal placement of backbone stereochemistry

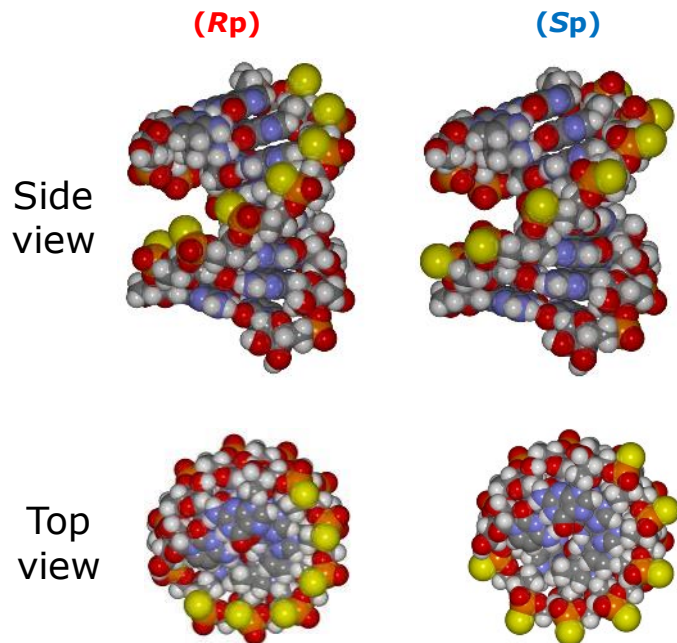


Crystal structure confirms phosphate-binding pocket of RNase H binds 3'-SSR-5' motif in stereopure oligonucleotide – supports design strategy for Wave oligonucleotides

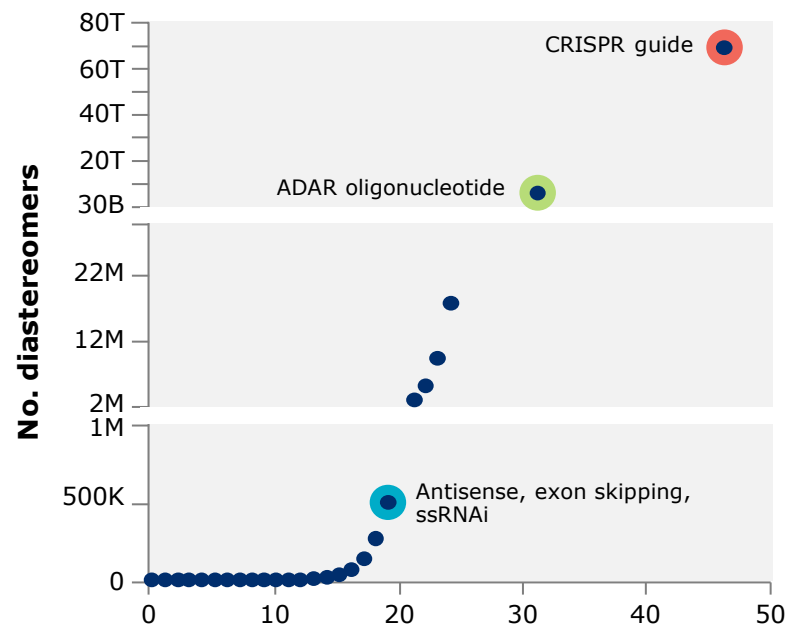


Importance of controlling stereochemistry

Stereochemical diversity



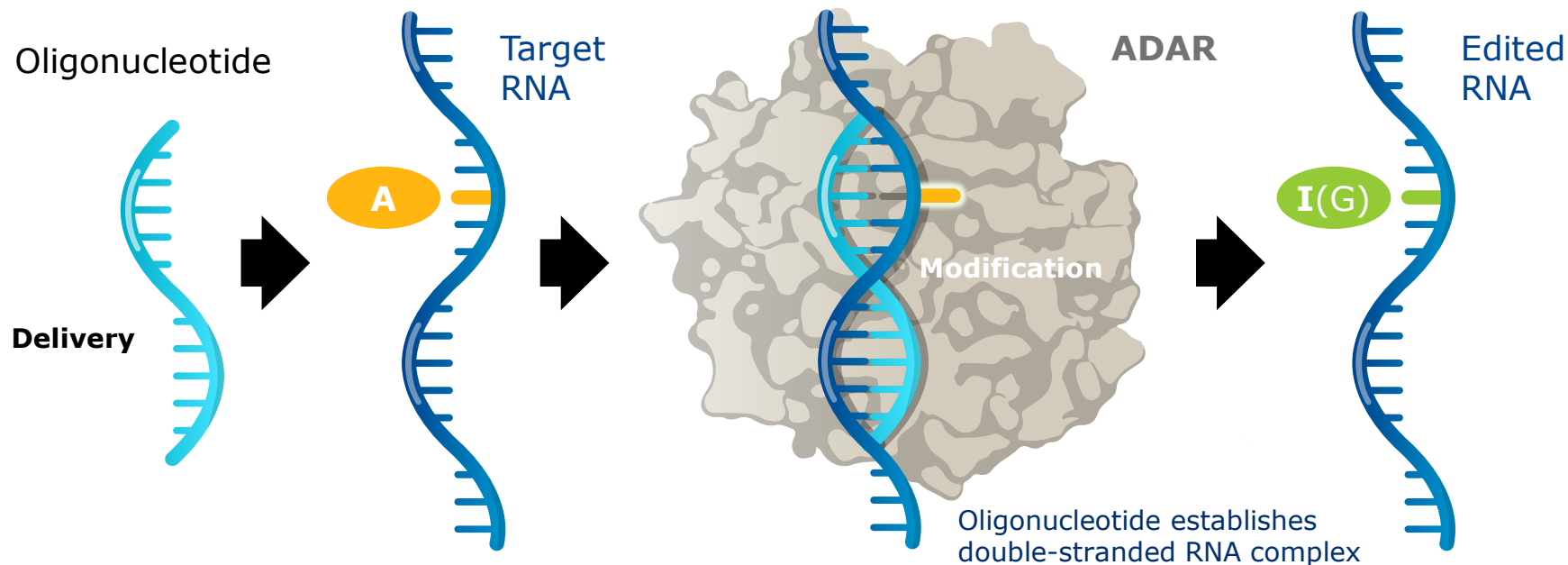
Exponential diversity arises from uncontrolled stereochemistry



ADAR editing

Platform capability and
Alpha-1 antitrypsin deficiency

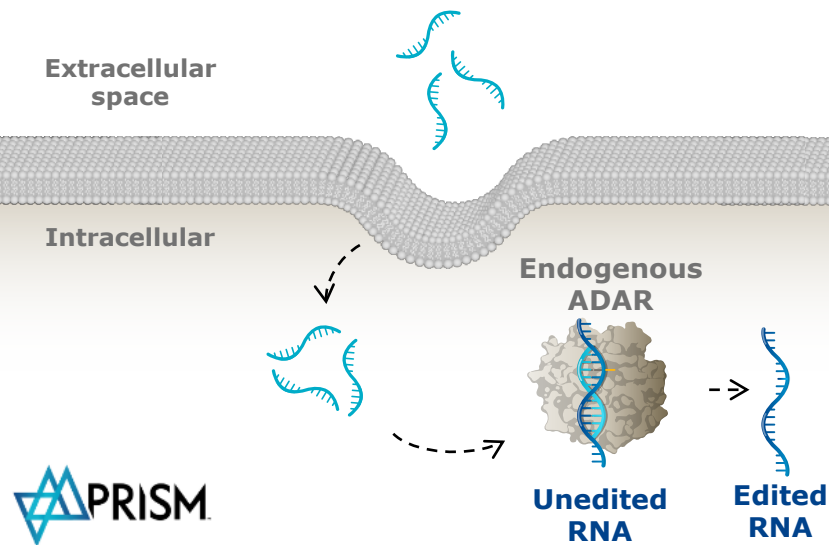
PRISM platform has unlocked ADAR editing



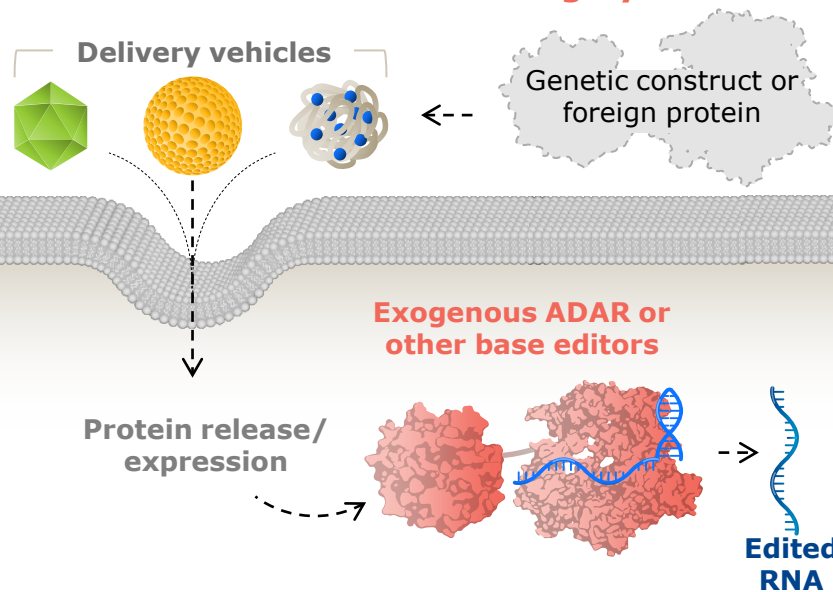
- **A**-to-**I** editing is one of most common post-transcriptional modifications
- ADAR is ubiquitously expressed across tissues, including liver and CNS

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

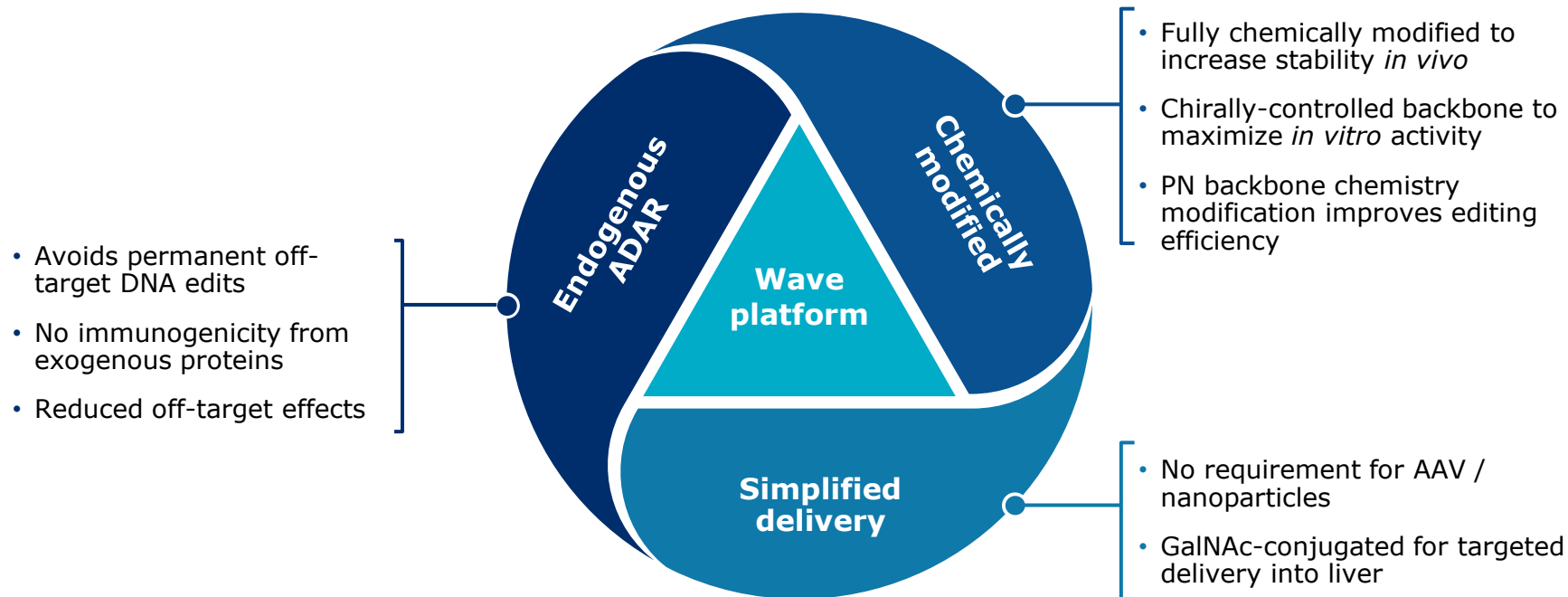
Wave ADAR-editing Oligonucleotides



Alternative Base-Editing Systems

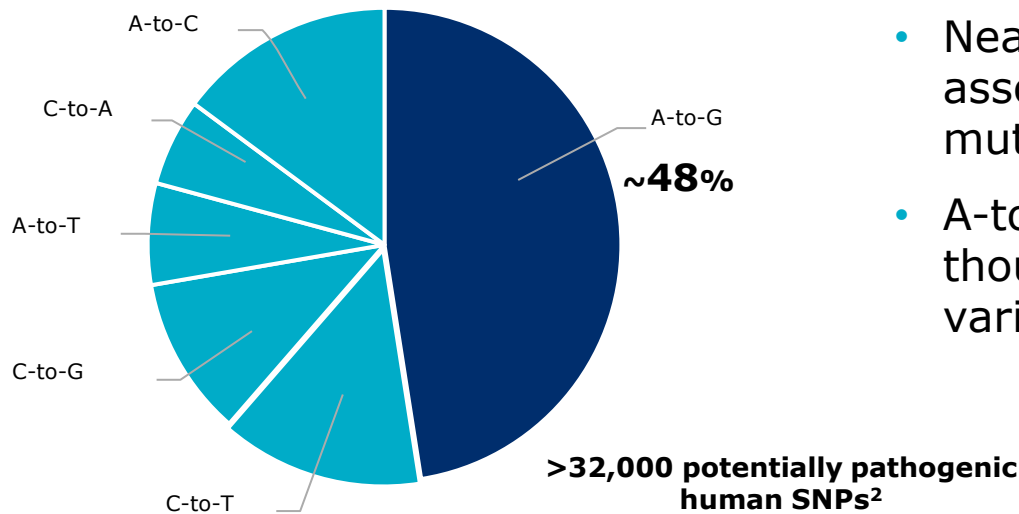


Advantages of Wave ADAR editing platform



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 variants¹

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

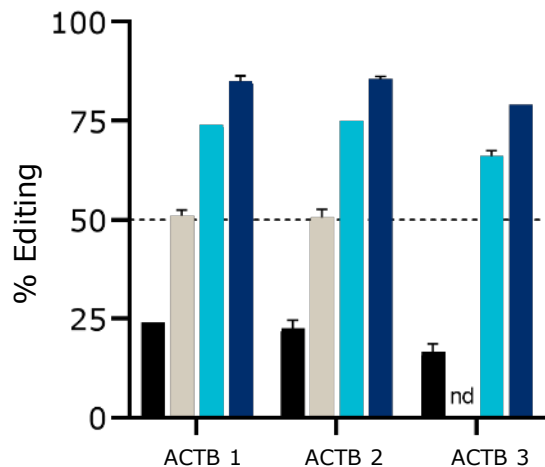
Examples:

Haploinsufficient diseases

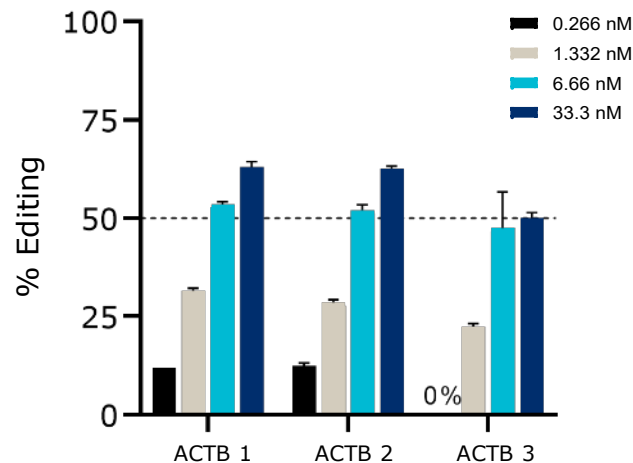
Significant ADAR editing demonstrated *in vitro* in NHP and primary human hepatocytes

ACTB GalNAc-conjugated oligonucleotides with stereopure PN backbone chemistry modifications

***In vitro* dose-response
human hepatocytes**



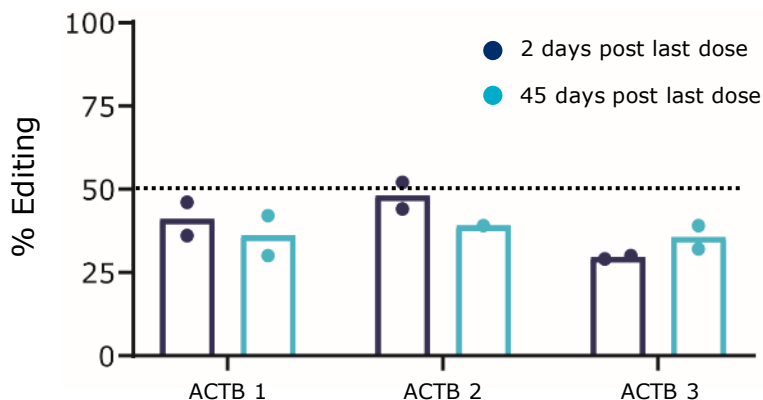
***In vitro* dose-response
NHP hepatocytes**



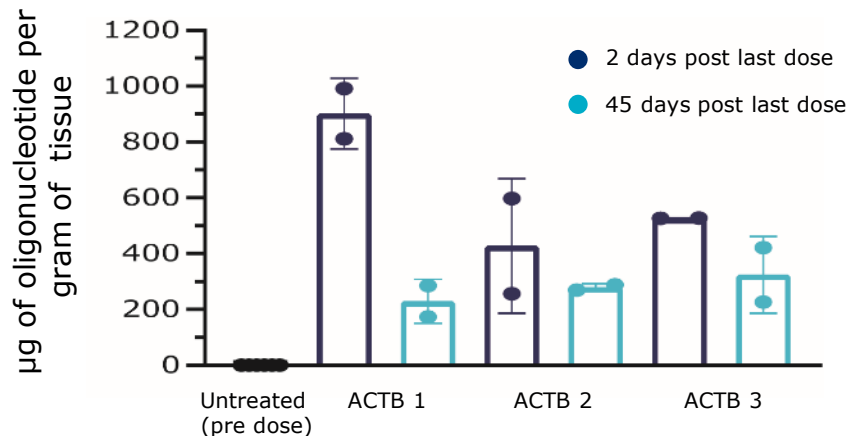
Efficient ADAR editing translated *in vivo* in non-human primate study

- 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**

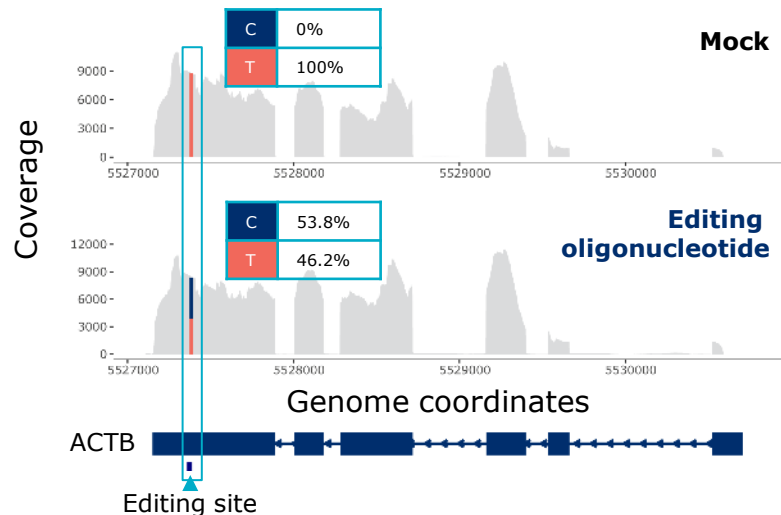


Oligonucleotide quantification in NHP following subcutaneous administration

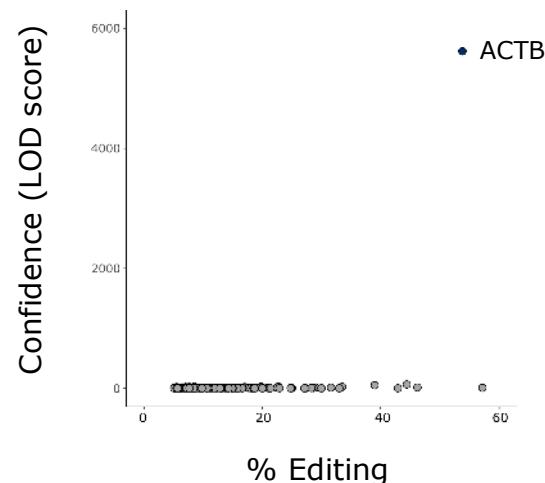


Wave ADAR editing oligonucleotides are highly specific

RNA editing within ACTB transcript (human hepatocytes)



RNA editing within transcriptome (human hepatocytes)



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:

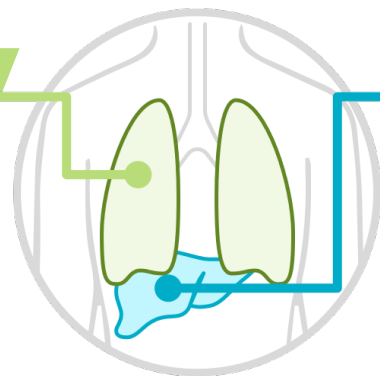
- Increase circulating levels of wild-type AAT protein
- Reduce aggregation of Z-AAT in liver
- Retain wild-type AAT physiological regulation

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)



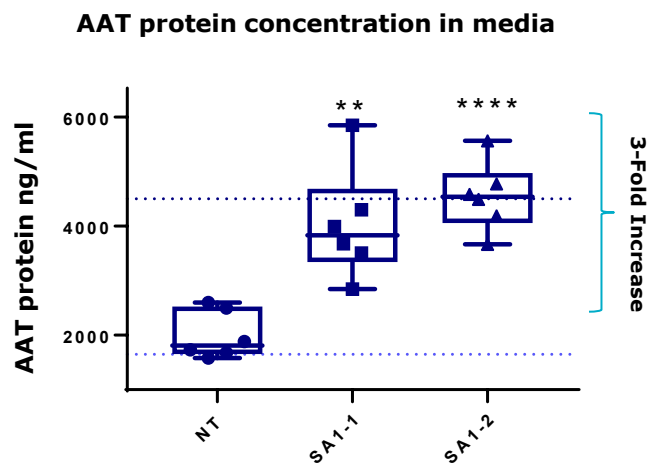
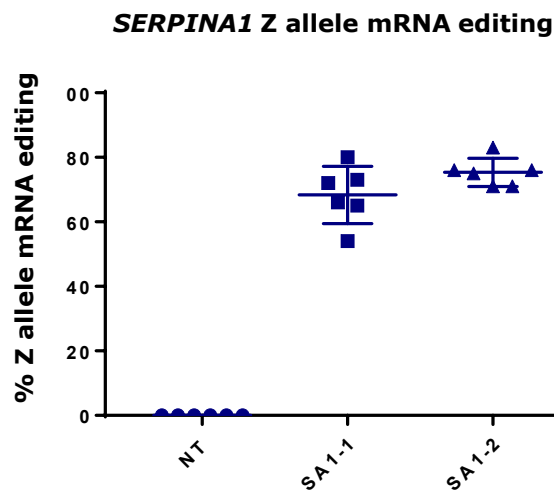
Gain of function in liver

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

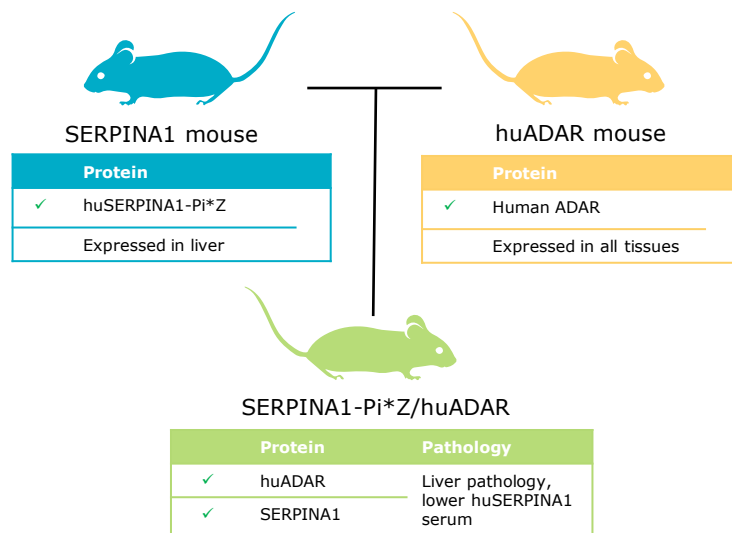


Edited AAT protein analysis

- ✓ Wild-type AAT protein confirmed by mass spectrometry
- ✓ Function of secreted, edited AAT protein confirmed by neutrophil elastase inhibition assay

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

Proprietary humanized mouse model developed to support ADAR platform

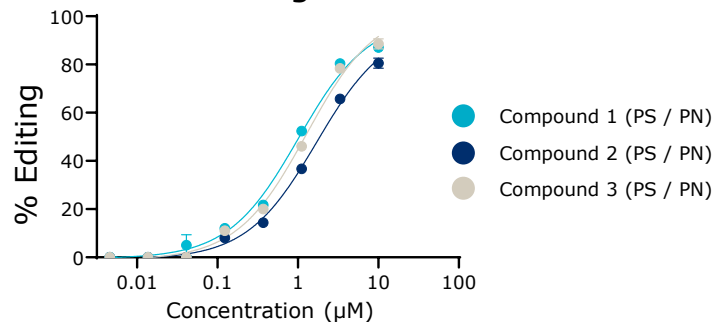


- Expression of huADAR in mouse is comparable to expression in human cells
- Expression of huADAR restores editing of endogenous targets in primary mouse cell types to levels seen in human primary cell types
- huADAR mouse model can be crossed with disease specific mouse models to provide model systems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

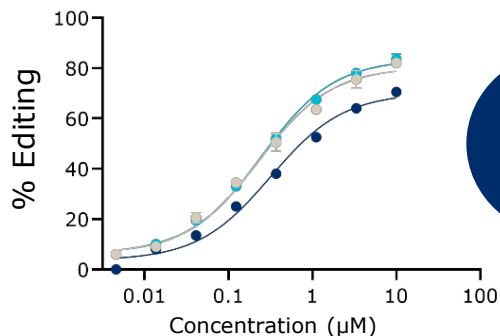
Model validation and *in vivo* data expected 1H 2021

Multiple opportunities for ADAR editing in neurology

ACTB editing in iCell Neurons

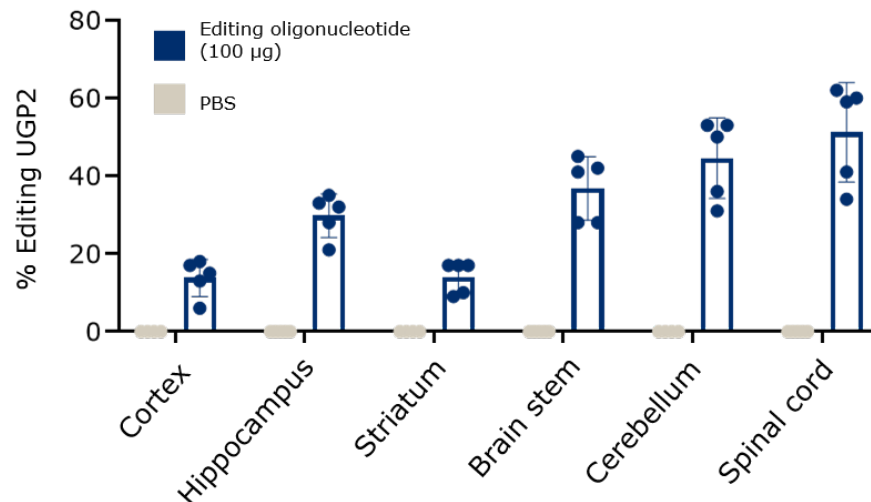


ACTB editing in human iCell Astrocytes



EC50:
~200-
250nM

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



Ophthalmology

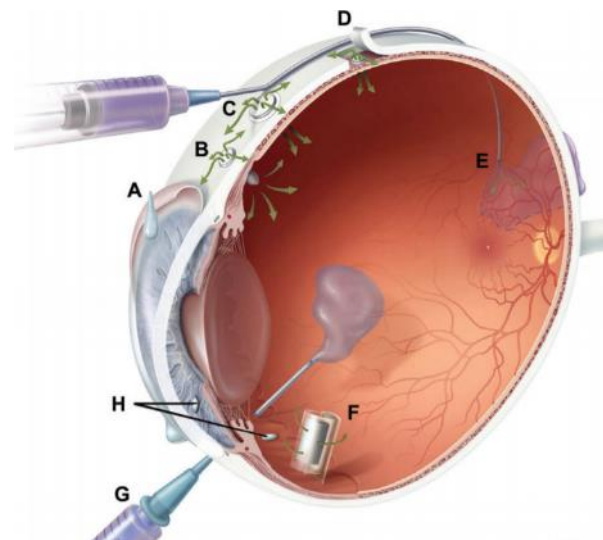
Stereopure oligonucleotides for inherited retinal diseases (IRDs)

Wave ophthalmology opportunity

- Oligonucleotides can be administered by intravitreal 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

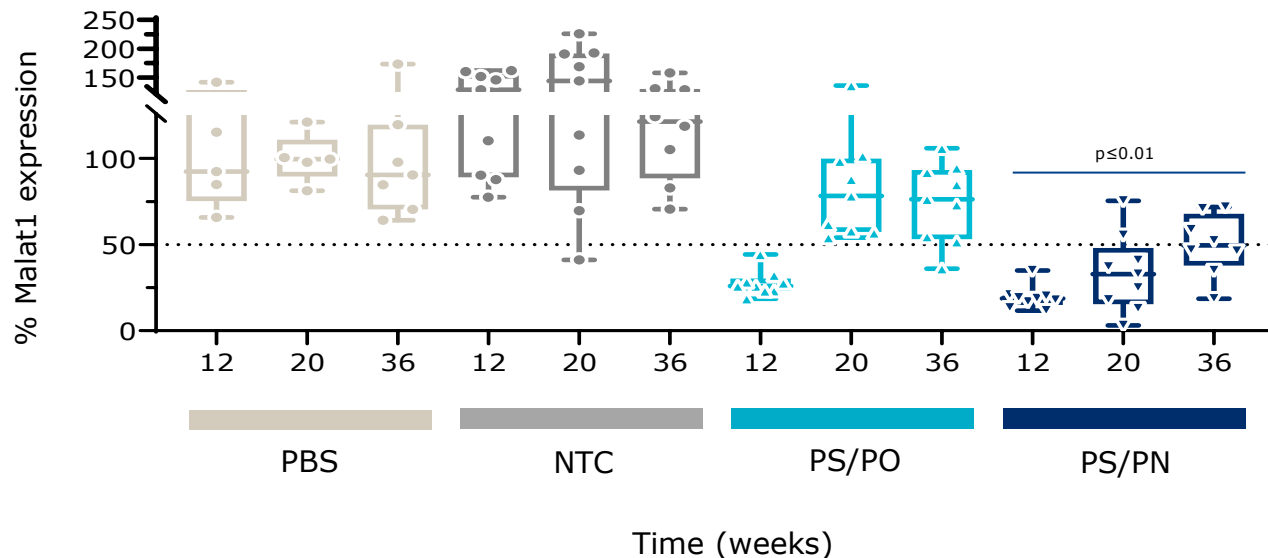
- Widely expressed in many different cell types
- Only expressed in the nucleus



Intravitreal injection

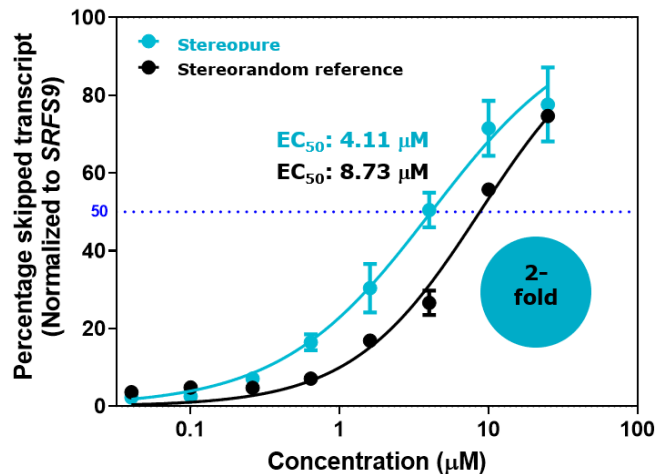
Durable Malat1 knockdown through 9 months with PN backbone chemistry modifications

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

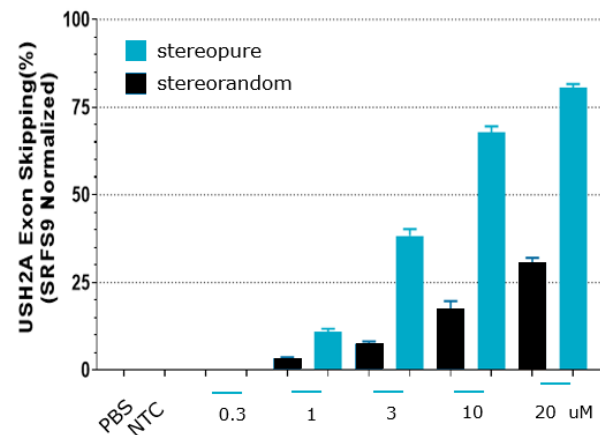


Potent USH2A exon 13 skipping with stereopure compound in *vitro* and *ex vivo*

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

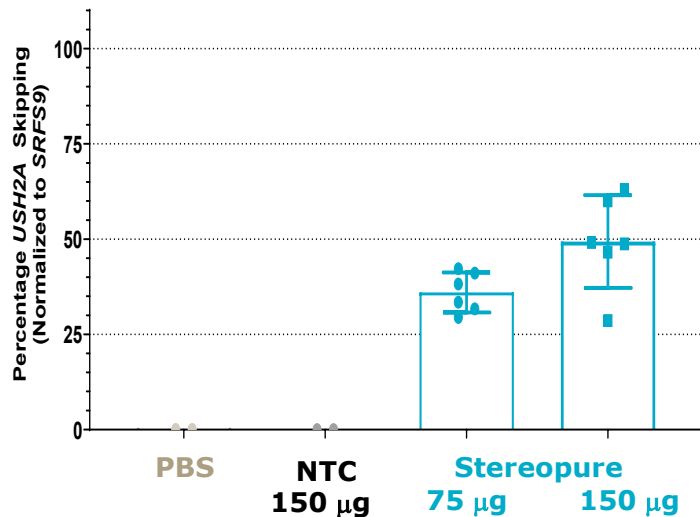


Target engagement in NHP retinas



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

Dose-dependent and specific exon skipping in NHP eye

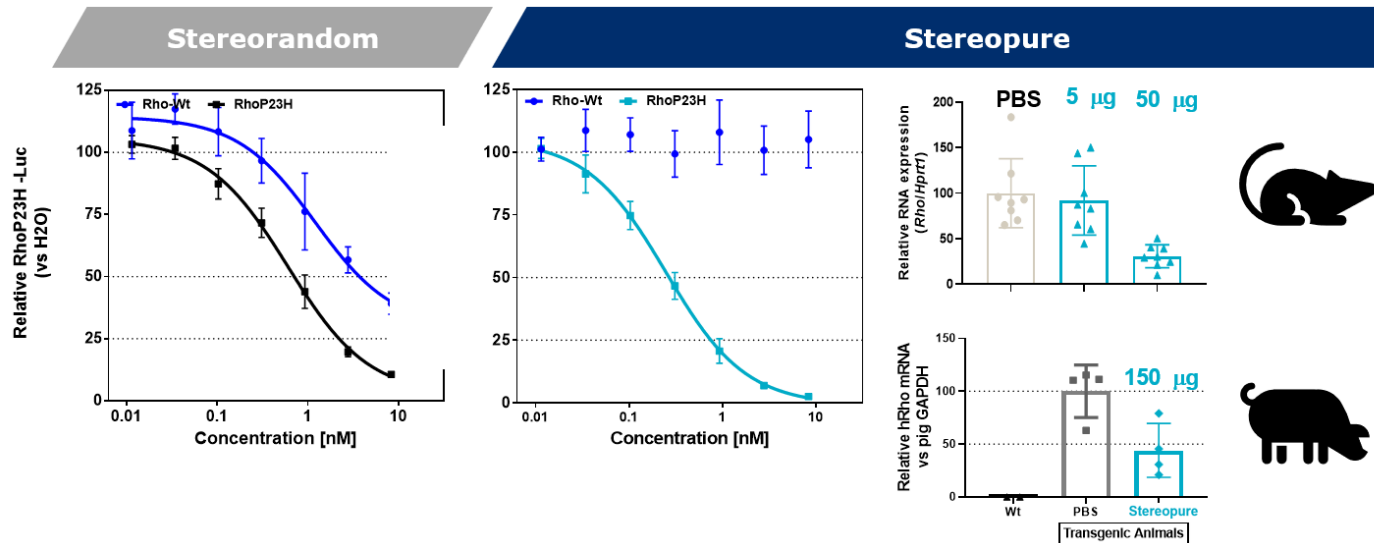


- Oligonucleotide is complementary to NHP *USH2A* exon 12*
- Evaluated 1-week post-single IVT injection
- Dose-dependent activity of **stereopure** oligonucleotides
- Substantial exposure in retina
- Exon-skipping integrity confirmed by RNA-seq at both doses

*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



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

Huntington's disease
mHTT SNP3



2021: Dosing of first patient in clinical trial of WVE-003

ALS and FTD
C9orf72



2021: Dosing of first patient in clinical trial of WVE-004

DMD
Exon 53



2021: Dosing of first patient in clinical trial of WVE-N531

ADAR editing
Multiple



1H 2021: Humanized mouse model validation

HEPATIC

AATD (ADAR editing)
SERPINA1



1H 2021: *in vivo* AATD data



Stereopure

PN chemistry



Realizing a brighter future for people affected by genetic diseases

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