FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL				
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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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Vargeese Chandra						2. Issuer Name and Ticker or Trading Symbol Wave Life Sciences Ltd. [WVE]									ationship of Reporting all applicable) Director		10% Own		ner
	,	irst) CIENCES LTD., E.	(Middle)		01	3. Date of Earliest Transaction (Month/Day/Year) 01/23/2018								X	below)	(give title See Rem			
(Street) CAMBRIDGE MA 02138					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Tran							2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or 5. Amour Securitie Beneficia Owned F		s lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
						Code	v	Amount (A) or (D)		Price	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Ordinary	01/2	23/201	18			M ⁽¹⁾		2,000	A	\$2	.48	11,	800		D				
Ordinary Shares 01/.					23/201	18			S ⁽¹⁾		2,000	D	\$	40	9,800		D		
Ordinary Shares				01/2	23/2018				A		17,500 [©]	(3) A \$0.0		.00	27,300		D		
			Table II -								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)				6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v			Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er		Transaction(s (Instr. 4)			
Share Option (right to buy)	\$2.48	01/23/2018			M ⁽¹⁾			2,000	(2)		03/10/2025	Ordinary Shares	2,00	00	\$0.00	154,54	12	D	
Share Option (right to buy)	\$40.05	01/23/2018					35,000		(4)		01/23/2028	Ordinary Shares 35,0		00	\$0.00	\$0.00 35,000		D	

Explanation of Responses:

- 1. The option exercise and sale reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 11, 2017.
- 2. The incentive share option initially represented a right to purchase a total of 158,042 ordinary shares, 25% of which became exercisable on August 1, 2015, and the remaining shares vest in 36 equal monthly installments thereafter.
- 3. Consists of restricted share units (RSUs). The RSUs vest in four equal annual installments of 25% on February 15, 2019, through February 15, 2022.
- 4. The option vests as to 25% of the shares on February 15, 2019 and vests as to an additional 6.25% of the shares quarterly thereafter until February 15, 2022.

Remarks

Senior Vice President, Drug Discovery

<u>/s/ Chandra Vargeese</u> <u>01/25/2018</u>

** Signature of Reporting Person Date

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.