

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Frazier Life Sciences Public Fund, L.P.</u> <hr/> (Last) (First) (Middle) C/O FRAZIER HEALTHCARE PARTNERS 601 UNION STREET, SUITE 3200 <hr/> (Street) SEATTLE WA 98101 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Viridian Therapeutics, Inc. DE [VRDN]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 09/23/2021	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	
6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	09/23/2021		P		200,000	A	\$11	1,505,200 ⁽¹⁾	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person*
Frazier Life Sciences Public Fund, L.P.

 (Last) (First) (Middle)
 C/O FRAZIER HEALTHCARE PARTNERS
 601 UNION STREET, SUITE 3200

 (Street)
 SEATTLE WA 98101

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
FHMLSP, L.P.

 (Last) (First) (Middle)
 C/O FRAZIER HEALTHCARE PARTNERS
 601 UNION STREET, SUITE 3200

 (Street)
 SEATTLE WA 98101

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
FHMLSP, L.L.C.

 (Last) (First) (Middle)
 C/O FRAZIER HEALTHCARE PARTNERS
 601 UNION STREET, SUITE 3200

(Street)	SEATTLE	WA	98101
(City)	(State)	(Zip)	

Explanation of Responses:

1. These shares are held directly by Frazier Life Sciences Public Fund L.P. The general partner of Frazier Life Sciences Public Fund L.P. is FHMLSP, L.P. and the general partner of FHMLSP, L.P. is FHMLSP, L.L.C., and each may be deemed to have sole voting, investment and dispositive power with respect to the shares held by Frazier Life Sciences Public Fund L.P. FHMLSP, L.P. and FHMLSP, L.L.C. each disclaim Section 16 beneficial ownership of the securities held by Frazier Life Sciences Public Fund L.P., except to the extent of its pecuniary interest therein, if any.

Remarks:

Frazier Life Sciences Public Fund L.P., By: FHMLSP, L.P., its General Partner. By: FHMLSP, L.L.C., its General Partner, By: /s/ Steve R. Bailey, Chief Financial Officer 09/28/2021
FHMLSP, L.P., By: FHMLSP, L.L.C., its General Partner, By: /s/ Steve R. Bailey, Chief Financial Officer 09/28/2021
FHMLSP, L.L.C., By: /s/ Steve R. Bailey, Chief Financial Officer 09/28/2021

** 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.