

ENGINEERING MEDICINES
TO IMPROVE PATIENT CARE



VIRIDIAN

Lumvoa™ (veligrotug-vvze)
FDA Approval

June 29, 2026

Cautionary note regarding forward-looking statements

This presentation and the related teleconference contain forward-looking statements. These statements may be identified by the use of words such as, but not limited to, “anticipate,” “believe,” “become,” “continue,” “could,” “design,” “estimate,” “expect,” “intend,” “may,” “might,” “on track,” “plan,” “potential,” “predict,” “project,” “should,” “target,” “will,” or “would” or other similar terms or expressions that concern our expectations, plans and intentions. Forward-looking statements are neither historical facts nor assurances of future performance. Instead, they are based on our current beliefs, expectations, and assumptions. Forward-looking statements include, without limitation: that Lumvoa is launching into a large and attractive thyroid eye disease (“TED”) market; that the TED market is underpenetrated and has the potential to grow; that TED market dynamics allow for an efficient commercial model; that there will be an opportunity to prescribe Lumvoa each time a patient seeks treatment; that Viridian will be a trusted, long-term partner in TED; that Viridian will execute its launch priorities, including world-class patient services; that Lumvoa has the potential to redefine the treatment paradigm for TED patients; that the Company anticipates immediate access to Lumvoa at launch; that Viridian has the potential to provide multiple differentiated treatment solutions for TED patients; timing of the Company’s anticipated regulatory submissions, including a BLA for elegrobart in the first quarter of 2027; elegrobart’s potential to be the first subcutaneous autoinjector in TED; and the Company’s future business plans, including additional indications, programs and discovery and development of the Company’s pipeline.

New risks and uncertainties may emerge from time to time, and it is not possible to predict all risks and uncertainties. No representations or warranties (expressed or implied) are made about the accuracy of any such forward-looking statements. Such forward-looking statements are subject to a number of material risks and uncertainties including but not limited to: potential utility, efficacy, potency, safety, clinical benefits, clinical response, and convenience of Viridian’s product and product candidates; that results or data from completed or ongoing clinical trials may not be representative of the results of ongoing or future clinical trials; that preliminary data may not be representative of final data; expectations and changes regarding the timing for regulatory filings; regulatory interactions; uncertainty and potential delays related to clinical drug development; the timing of and our ability to obtain and maintain regulatory approvals for our therapeutic candidates; competition from other therapies or products; estimates of market size and opportunity; our future operating results and financial performance; Viridian’s intellectual property position; that our product and product candidates may not be commercially successful, if approved; and other risks described from time to time in the “Risk Factors” section of our filings with the Securities and Exchange Commission (SEC), including those described in our most recent Annual Report on Form 10-K or Quarterly Report on Form 10-Q, as applicable, and supplemented from time to time by our Current Reports on Form 8-K. Any forward-looking statement speaks only as of the date on which it was made. Neither the company, nor its affiliates, advisors, or representatives, undertake any obligation to publicly update or revise any forward-looking statement, whether as a result of new information, future events or otherwise, except as required by law. These forward-looking statements should not be relied upon as representing the company’s views as of any date subsequent to the date hereof.

Agenda

CEO Opening Remarks



Steve Mahoney
President & Chief Executive Officer

Lumvoa Labeling and Key Clinical Data



Radhika Tripuraneni, MD
Chief Medical Officer

Commercial Strategy and Launch



Tony Casciano
Chief Commercial Officer

Closing Remarks



Steve Mahoney
President & Chief Executive Officer

Analyst Q&A



Steve Mahoney, President & Chief Executive Officer
Radhika Tripuraneni, MD, Chief Medical Officer
Tony Casciano, Chief Commercial Officer
Shan Wu, Ph.D., Chief Business Officer



CEO Opening Remarks

Steve Mahoney

Lumvoa™ now FDA approved

Lumvoa™
veligrotug-vvze

**First approved treatment for TED with
both active and chronic TED data in label**

Approved under Priority Review

TED is an autoimmune condition characterized by inflammation, growth, and damage to tissues around and behind the eyes



Heterogeneous **autoimmune disease**^{1,2}



Signs and symptoms include **proptosis** (eye bulging), redness, swelling, **diplopia** (double vision), and lid retraction^{1,2}



Severe cases can cause **sight-threatening optic nerve compression**³

Lumvoa treatment showed rapid, consistent, and durable reductions of key symptoms in both active and chronic TED



Both THRIVE and THRIVE-2 met their primary and all secondary endpoints^{1,2}

- Consistently demonstrated statistically significant improvements across all of the key signs and symptoms of TED



Rapid onset of clinical benefit in both active and chronic TED^{1,2}

- Proptosis reductions observed at 3 weeks after 1 infusion



Statistically significant impact on diplopia in both active and chronic TED^{1,2}

- Statistically significant effects on both diplopia response and diplopia complete resolution in THRIVE and THRIVE-2



Short course of treatment

- Patient complete therapy in 12 weeks, 5 infusions



Granted **Breakthrough Therapy Designation** and **Priority Review** by the FDA

First approved treatment for TED with both active and chronic TED data in label



Lumvoa Labeling and Key Clinical Data

Radhika Tripuraneni, MD

Lumvoa's broad label supported by positive pivotal phase 3 trials in active and chronic TED

Highlights of Prescribing Information¹

HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use LUMVOA safely and effectively. See full prescribing information for LUMVOA.

LUMVOA (veligrotug-vvze) injection, for intravenous use
Initial U.S. Approval: 2026

INDICATIONS AND USAGE

LUMVOA is an insulin-like growth factor-1 receptor inhibitor indicated for the treatment of thyroid eye disease regardless of thyroid eye disease activity or duration. (1)

DOSAGE AND ADMINISTRATION

- 10 mg/kg every three weeks for a total of 5 infusions (2.1)
- Administer LUMVOA by intravenous infusion over 30 to 45 minutes (2.3)
- See full prescribing information for dose preparation and administration instructions (2.2, 2.3)

DOSAGE FORMS AND STRENGTHS

Injection: 500 mg/10 mL (50 mg/mL) solution in a single-dose vial (3)

CONTRAINDICATIONS

None (4)

WARNINGS AND PRECAUTIONS

- **Infusion Reactions:** If an infusion reaction occurs, interrupt or slow the rate of infusion and use appropriate medical management (5.1)
- **Inflammatory Bowel Disease (IBD):** Monitor patients for signs and symptoms of disease, including patients without a history of IBD; discontinue LUMVOA if IBD is suspected (5.2)

- **Hyperglycemia:** Assess patients for elevated blood glucose and symptoms of hyperglycemia prior to infusion and continue to monitor while on treatment with LUMVOA. Ensure patients with hyperglycemia or preexisting diabetes are under appropriate glycemic control before and while receiving LUMVOA. Continue monitoring after treatment for patients who experience hyperglycemia while on LUMVOA (5.3)
- **Hearing Impairment including Hearing Loss:** LUMVOA may cause severe hearing impairment including hearing loss, which in some cases may be permanent. Assess patient's hearing before, during, and after treatment with LUMVOA and consider the benefit-risk of treatment with patients (5.4)

ADVERSE REACTIONS

Most common adverse reactions (incidence of 5% or more) are muscle spasms, headache, hearing impairment, hyperglycemia, fatigue, diarrhea, ear discomfort, infusion-related reaction, nausea, nasopharyngitis, blood creatine phosphokinase increased, dry skin, and hypertension (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact Viridian Therapeutics, Inc. at 1-866-321-VRDN (1-866-321-8736) or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

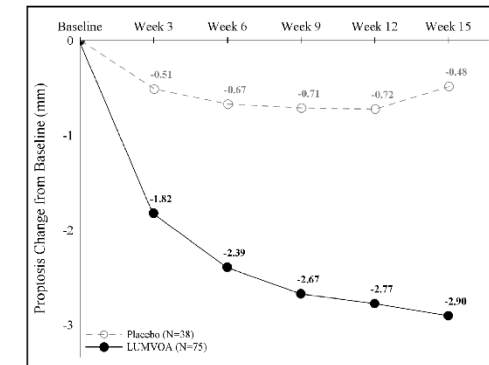
USE IN SPECIFIC POPULATIONS

Females of Reproductive Potential: Appropriate forms of contraception should be implemented prior to initiation, during treatment and for 6 months following the last dose of LUMVOA (8.3)

See 17 for PATIENT COUNSELING INFORMATION.

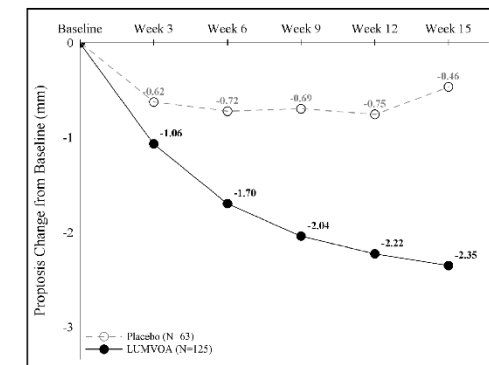
Revised: 06/2026

Figure 1: Change from Baseline in Proptosis by Exophthalmometer over 15 Weeks for Patients with Active Thyroid Eye Disease (Study 1)



P<0.01 at each timepoint.

Figure 2: Change from Baseline in Proptosis by Exophthalmometer over 15 Weeks for Patients with Chronic Thyroid Eye Disease (Study 2)



P<0.01 at each timepoint.

Lumvoa was studied in the largest and broadest population of TED patients in studies completed to date

Study Designs^{4,5}

Active TED (THRIVE)

Chronic TED (THRIVE-2)

THRIVE (N=113) Recent-onset active TED patients^{1,2}



Moderate-to-severe **active** TED with ≥ 3 mm excess proptosis

CAS ≥ 3
■■■■■■■

CAS ≥ 3 in study eye

≤ 15
MONTHS

Recent onset of TED signs and symptoms

12
WEEKS

IV infusion every 3 weeks for 5 infusions

THRIVE-2 (N=188) Chronic TED patients^{1,3}



Moderate-to-severe **chronic** TED with ≥ 3 mm excess proptosis

Any CAS
■■■■■■■

All CAS (0-7) in study eye

> 15
MONTHS

Chronic TED signs and symptoms

12
WEEKS

IV infusion every 3 weeks for 5 infusions

*Based on completed Phase 3 trials in Thyroid Eye Disease

1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026. 2. Yen MT, Cockerham K, Saeed P, et al. THRIVE: a phase 3 randomized, double-masked, placebo-controlled study of veligrotug for active thyroid eye disease. *Ophthalmology*. 2026. doi:10.1016/j.optha.2026.04.022. 3. Cockerham K, Abrams J, Mandeville J, et al. Chronic thyroid eye disease (TED) THRIVE-2 phase 3 trial of veligrotug (VRDN-001): efficacy, safety, and quality of life at 15 weeks. Presented at: American Academy of Ophthalmology Annual Meeting; Oct 18-20, 2025; Orlando, FL. 4. Tepezza® (teprotumumab-trbw) prescribing information. Amgen Inc. November 2025. 5. Data on file. TED trial combined search results. Feb 18, 2026. Viridian Therapeutics, Inc; 2026. CAS = clinical activity score, IV = intravenous, mm = millimeter, TED = thyroid eye disease.

Active TED (THRIVE): statistically significant results across all endpoints

Study Designs

Active TED (THRIVE)

Chronic TED (THRIVE-2)

		Lumvoa	Placebo	Pvalue
Proptosis ^{1,2}	Responder rate, week 15	70%	5%	$P < 0.0001$
	Mean reduction (CFB)	2.9 mm	0.5 mm	$P < 0.0001$
Diplopia ^{1,2}	Responder rate, week 15	59%	20%	$P < 0.0001$
	Complete resolution rate, week 15	49%	12%	$P < 0.0001$
CAS reduction ^{1,2}	Disease inactivation (CAS reduced to 0 or 1)	65%	18%	$P < 0.001$
	Mean reduction (CFB)	3.4	1.7	$P < 0.001$

Proptosis responder rate at week 15 was defined as the percentage of patients with a ≥ 2 -mm reduction in proptosis in the study eye from baseline, without deterioration in proptosis (≥ 2 -mm increase) in the non-study eye; Diplopia response was defined as having a diplopia score >0 at baseline and achieving a reduction of at least 1 point on the diplopia scale at week 15. Diplopia resolution was defined as having a diplopia score >0 at baseline and a score of 0 at week 15.

1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026. 2. Yen MT, Cockerham K, Saeed P, et al. THRIVE: a phase 3 randomized, double-masked, placebo-controlled study of veligrotug for active thyroid eye disease. *Ophthalmology*. 2026. doi:10.1016/j.optha.2026.04.022.

CAS = clinical activity score, CFB = change from baseline, TED = thyroid eye disease.



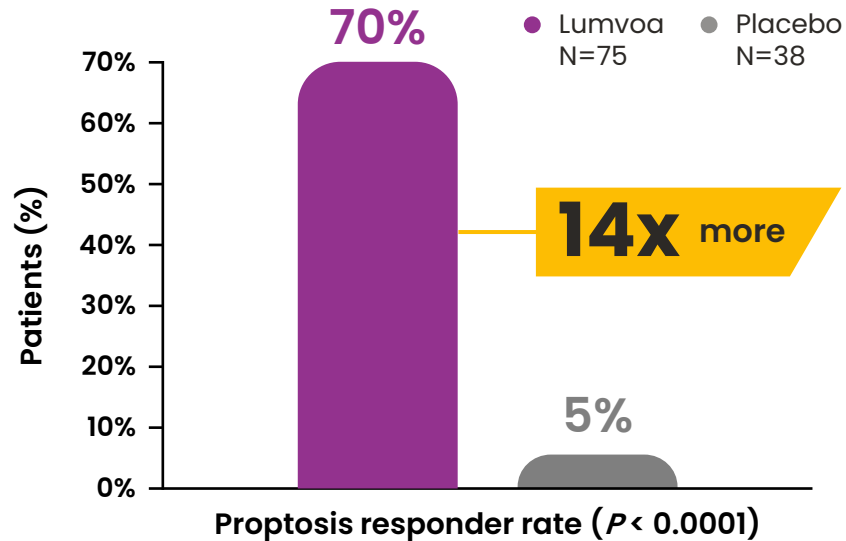
Lumvoa treatment led to rapid, robust, and durable reductions in proptosis for patients with active TED

Study Designs

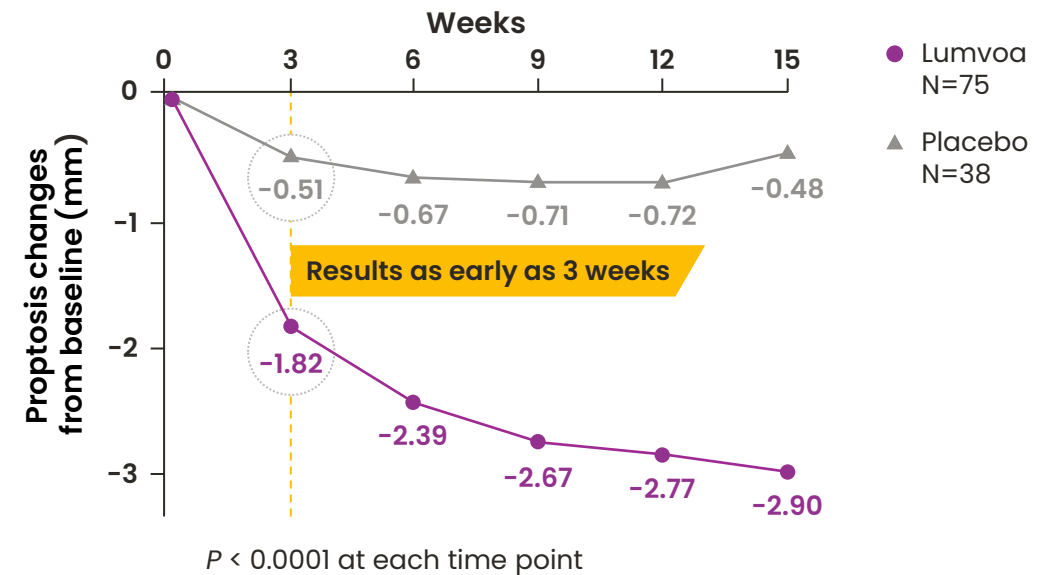
Active TED (THRIVE)

Chronic TED (THRIVE-2)

70% of patients had proptosis response at week 15^{1*}



Proptosis reduction of 2.90 mm at week 15[†]



71% of Lumvoa patients who were proptosis responders at week 15 maintained their response at week 52¹

*Proptosis responder rate at week 15 was defined as the percentage of patients with a ≥ 2 -mm reduction in proptosis in the study eye from baseline, without deterioration in proptosis (≥ 2 -mm increase) in the non-study eye. [†]Change in proptosis of -2 mm or greater was considered a clinically meaningful change.
 1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026.
 mm = millimeter. TED = thyroid eye disease.

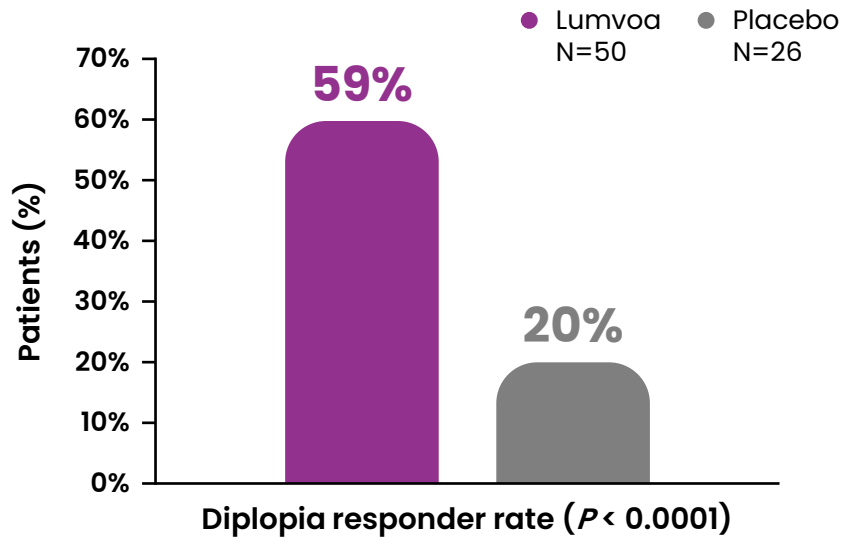
Lumvoa resulted in diplopia improvement for the majority of active TED patients; nearly half had complete resolution

Study Designs

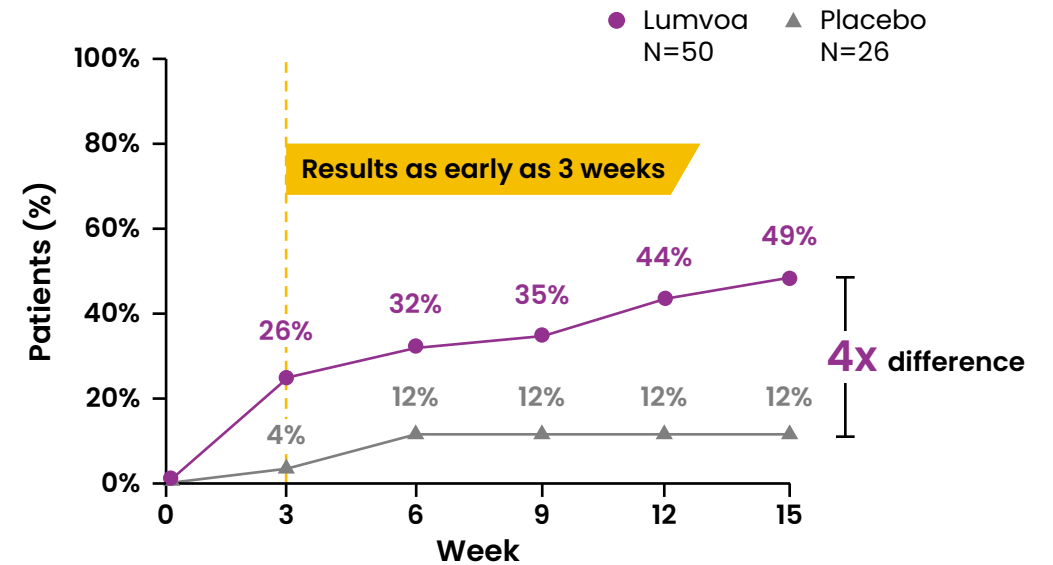
Active TED (THRIVE)

Chronic TED (THRIVE-2)

59% of patients had improvement in diplopia at week 15¹



49% had complete resolution of diplopia 4x more than placebo at week 15^{1,2}



50% of Lumvoa patients who achieved diplopia resolution at week 15 maintained resolution at week 52¹

Diplopia response in a patient was defined as having a diplopia score >0 at baseline and achieving a reduction of at least 1 point on the diplopia scale at Week 15.

Diplopia resolution in a patient was defined as having a diplopia score >0 at baseline and a score of 0 at Week 15.

1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026. 2. Yen MT, Cockerham K, Saeed P, et al. THRIVE: a phase 3 randomized, double-masked, placebo-controlled study of veligrotug for active thyroid eye disease. *Ophthalmology*. 2026. doi:10.1016/j.optha.2026.04.022.

TED = thyroid eye disease.



Chronic TED (THRIVE-2): statistically significant results across all endpoints

Study Designs

Active TED (THRIVE)

Chronic TED (THRIVE-2)

		Lumvoa	Placebo	P value
Proptosis ^{1,2}	Responder rate, week 15	57%	8%	$P < 0.0001$
	Mean reduction (CFB)	2.4 mm	0.5 mm	$P < 0.0001$
Diplopia ^{1,2}	Responder rate, week 15	56%	25%	$P = 0.0006$
	Complete resolution rate, week 15	32%	14%	$P = 0.0156$
CAS reduction ^{1,2*}	Disease inactivation (CAS reduced to 0 or 1) [†]	55%	24%	N/A
	Mean reduction (CFB)	3.0	1.2	N/A

*Predefined exploratory endpoints not adjusted for multiplicity. [†]Analyses in the subpopulation of patients with CAS ≥ 3 at baseline. Proptosis responder rate at week 15 was defined as the percentage of patients with a ≥ 2 -mm reduction in proptosis in the study eye from baseline, without deterioration in proptosis (≥ 2 -mm increase) in the non-study eye. Diplopia response in a patient was defined as having a diplopia score > 0 at baseline and achieving a reduction of at least 1 point on the diplopia scale at week 15. Diplopia resolution in a patient was defined as having a diplopia score > 0 at baseline and a score of 0 at week 15.

1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc; 2026. 2. Data on file. Clinical study report: THRIVE-2 (Protocol VRDN-001-301). Viridian Therapeutics, Inc; 2025.

CAS = clinical activity score, CFB = change from baseline, mm = millimeter, TED = thyroid eye disease.

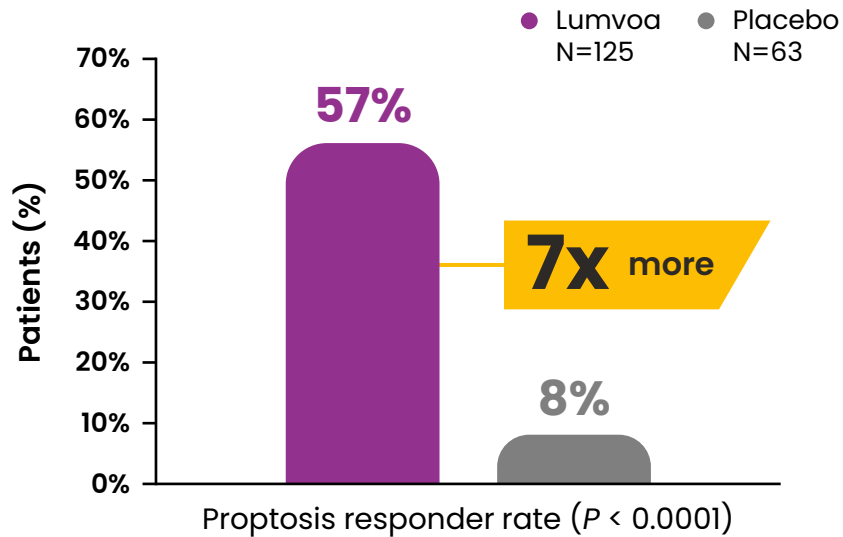
Lumvoa treatment led to rapid, robust, and durable reductions in proptosis for patients with chronic TED

Study Designs

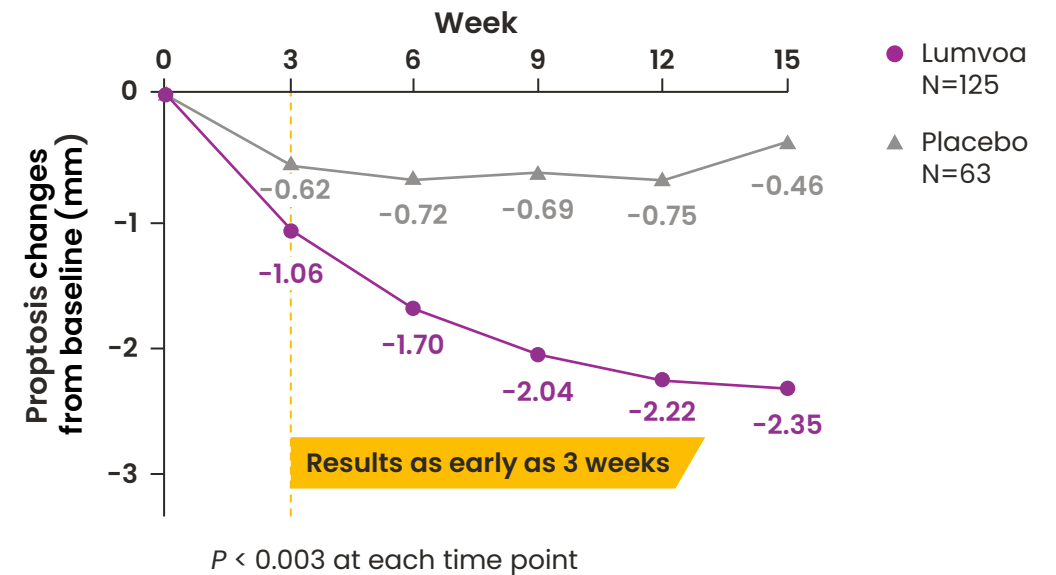
Active TED (THRIVE)

Chronic TED (THRIVE-2)

57% of patients had proptosis response at week 15^{1*}



Proptosis reduction of 2.35 mm at week 15[†]



57% of Lumvoa patients who were proptosis responders at week 15 maintained their response at week 52¹

*Proptosis responder rate at week 15 was defined as the percentage of patients with a ≥ 2 mm reduction in proptosis in the study eye from baseline, without deterioration in proptosis (≥ 2 -mm increase) in the non-study eye. [†]Change in proptosis of ≥ 2 mm or greater was considered a clinically meaningful change.
 1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026.
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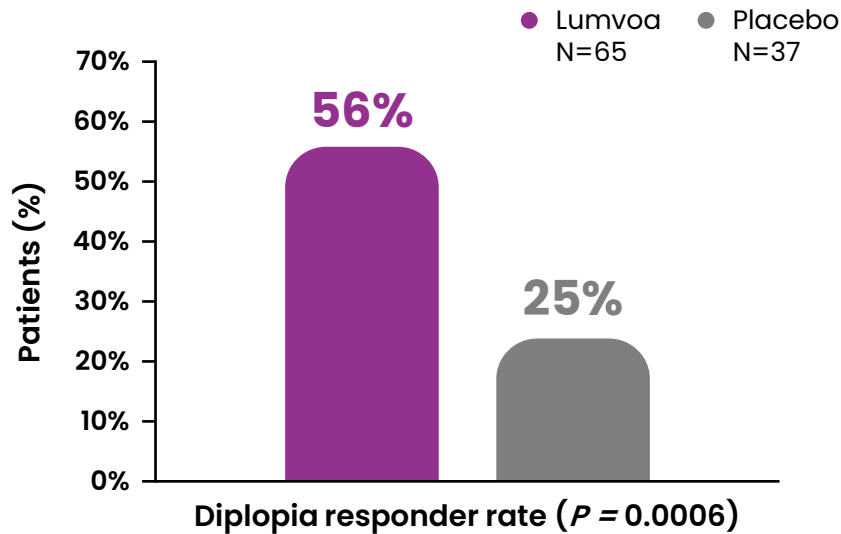
Lumvoa resulted in diplopia improvement for the majority of chronic TED patients; nearly a third had complete resolution

Study Designs

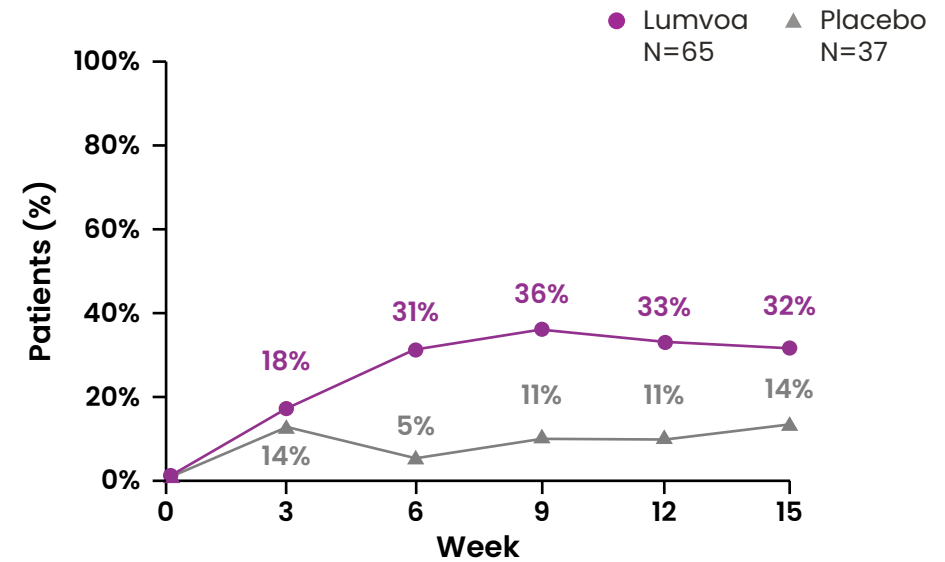
Active TED (THRIVE)

Chronic TED (THRIVE-2)

56% of patients had improvement in diplopia at week 15¹



32% had complete resolution of diplopia 2x more than placebo at week 15²



80% of Lumvoa patients who achieved diplopia resolution at week 15 maintained resolution at week 52¹

Diplopia response in a patient was defined as having a diplopia score >0 at baseline and achieving a reduction of at least 1 point on the diplopia scale at week 15. Diplopia resolution in a patient was defined as having a diplopia score >0 at baseline and a score of 0 at week 15.

1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026. 2. Cockerham K, Tang R, Mandeville J, et al. THRIVE and THRIVE-2 phase 3 trials; efficacy and safety of veligrotug (VRDN-001), a full antagonist antibody to IGF-1R, in thyroid eye disease (TED). Presented at: North American Neuro-Ophthalmology Society Annual Meeting; March 15-20, 2025; Tucson, AZ. TED = thyroid eye disease.

Lumvoa safety and tolerability profile in active and chronic TED

Adverse reactions occurring in 5% or more of patients with active or chronic TED¹

Adverse Reactions	Lumvoa N=200 N (%)	Placebo N=101 N (%)
Muscle spasms	79 (40%)	7 (7%)
Headache	34 (17%)	14 (14%)
Hearing impairment*	29 (15%)	6 (6%)
Hyperglycemia [†]	25 (13%)	5 (5%)
Fatigue [‡]	25 (13%)	11 (11%)
Diarrhea	22 (11%)	7 (7%)
Ear discomfort [§]	19 (10%)	3 (3%)
Infusion-related reaction	18 (9%)	2 (2%)
Nausea	15 (8%)	6 (6%)
Nasopharyngitis	14 (7%)	1 (1%)
Blood creatine phosphokinase increased	12 (6%)	1 (1%)
Dry skin	12 (6%)	2 (2%)
Hypertension	11 (6%)	5 (5%)

*Hearing impairment includes tinnitus, hypoacusis, deafness, and autophony. [†]Hyperglycemia includes blood glucose increased, glucose tolerance impaired, glycosylated hemoglobin increased, diabetes mellitus, glucose urine present, and impaired fasting glucose. [‡]Fatigue includes asthenia. [§]Ear discomfort includes ear feels clogged or blocked, ear plugging, sensation of ear pressure, and ear popping.

1. Lumvoa™ (veligrotug-vvze) prescribing information. Viridian Therapeutics, Inc. 2026.



Commercial Strategy and Launch

Tony Casciano

Lumvoa is launching into a large and attractive TED market

Large and Established Market



\$2B

TED market with potential to grow

*Single digit penetration of current market; **significant demand** for new therapies*

Focused and Experienced Footprint



~2,000

core prescribers experienced with anti-IGF-1R infusions

*Experienced prescribers and mature referral pathways allow for **efficient commercial model***

Favorable Market Dynamics



New Start Market

enabling rapid uptake potential

***Opportunity to prescribe Lumvoa** each time a patient seeks treatment*

Lumvoa Launch Priorities



DRIVE Awareness

Rapid engagement of core Lumvoa customers: anti-IGF-1R prescribers and infusion centers



DIFFERENTIATE Lumvoa

Simple enrollment, strong clinical profile, and short treatment duration

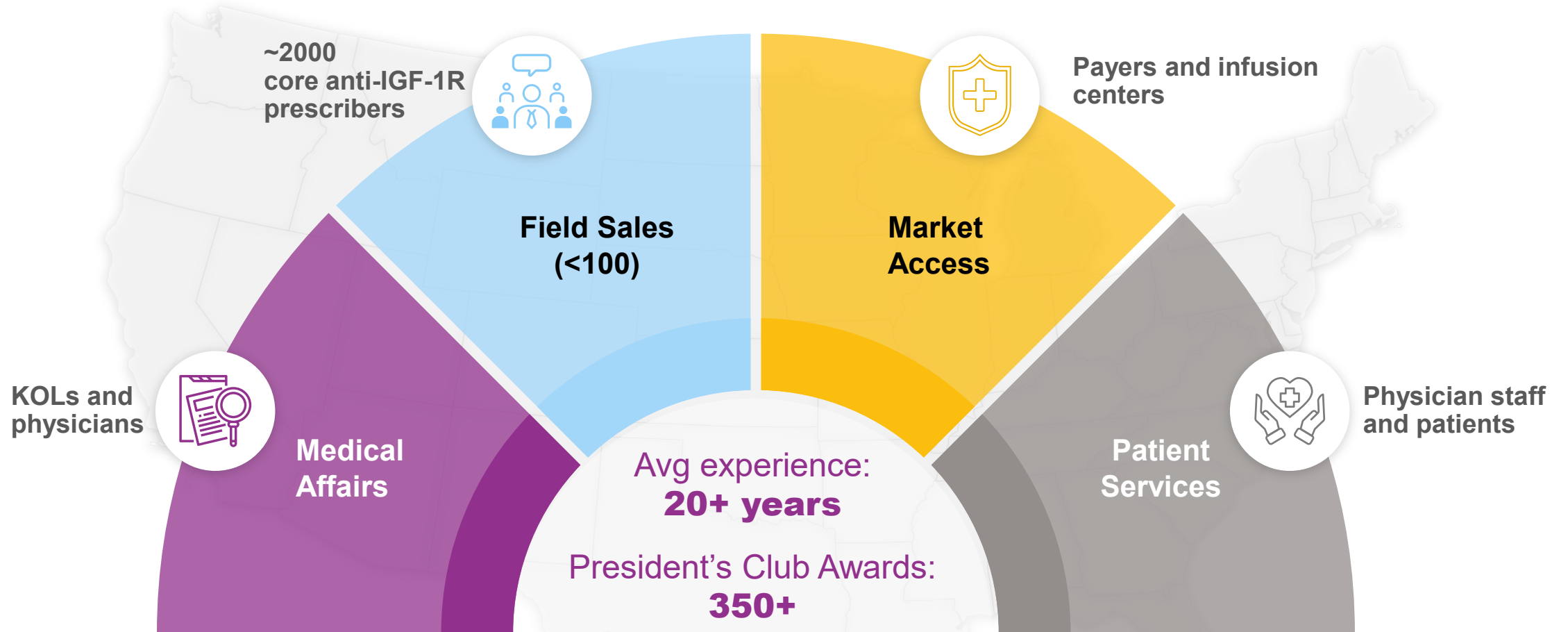


DELIVER Access

Broad payer coverage and world-class patient services

DEMONSTRATE Viridian to be a trusted, long-term partner in TED

DRIVE AWARENESS: Experienced and geographically-aligned field team targeting key U.S. stakeholders



Field teams in place since April



Geographically aligned



Designed to maximize speed and simplicity of launch operations

DIFFERENTIATE LUMVOA: Lumvoa has the potential to redefine the treatment paradigm for TED patients

Strong label allows us to focus on key points of differentiation



Demonstrated strong clinical data with robust improvements in proptosis and diplopia in both active and chronic TED



Rapid symptom relief in active and chronic TED, with proptosis reduction in as early as 3 weeks¹



Short course of treatment with a 12-week regimen

**Lumvoa approved under Priority Review from FDA;
received Breakthrough Therapy Designation in 2025**

1. Primary endpoint analyzed proptosis reduction at 15 weeks. Results at 3 weeks is a post-hoc analysis.
TED = thyroid eye disease.

DELIVER ACCESS: Market access readiness enables physicians to prescribe Lumvoa immediately

Pre-Launch Payer Engagements Facilitate Rapid Coverage and Access

80%

- **Pre-approval Information Exchange (PIE)** meetings with payers since January
- Meeting counterparties represent **80% of covered lives**

85%

- **85% coverage** for existing anti-IGF-1R today
- Payers recognize **strong Lumvoa value proposition**
- Expect to **cover Lumvoa** consistently with existing anti-IGF-1R

Anticipate Rapid Access at Launch



- ✓ **Majority** of anti-IGF-1R patients are **commercially covered**



- ✓ Anticipating most payer **coverage decisions** within **6-9 months** post-launch

VIRIDIAN™
cares

- ✓ **ViridianCares™** launched to enable seamless **patient access, affordability, and support**

DELIVER ACCESS: ViridianCares designed to support patients and physician offices throughout their journey

VIRIDIAN™
cares



For questions about enrollment in ViridianCares, call 1-866-VCARES1, Monday through Friday, 8 AM to 8 PM ET

* Patients must be enrolled in ViridianCares and meet all eligibility requirements. Terms and conditions will apply. See terms and conditions.

ViridianCares is a support program to help your patients start and stay on treatment.



Dedicated Patient Access Liaisons

- Personalized, one-on-one support to help your patients throughout their treatment journey



Insurance Coverage Support

- Assistance with benefits verification, prior authorization requirements, reimbursement, and required documentation



Financial Assistance Programs

- The ViridianCares Co-pay Program offers co-pay assistance for eligible patients. Commercially insured patients may pay as little as \$0* for both medication and infusion-related expenses
- If patients experience a change in coverage or have affordability concerns, ViridianCares will work closely with them to explore available financial assistance options



Closing Remarks

Steve Mahoney

Viridian has the potential to provide multiple differentiated treatment solutions for TED patients in one portfolio




Now Approved

Lumvoda™
veligrotug-vvze

Well-positioned to be a **meaningful treatment option** for TED patients

12-Week IV Regimen



BLA anticipated in Q1 2027

Elegrobart Q4W | **Elegrobart Q8W**

Potential to be the **first subcutaneous autoinjector** in TED, providing a simple, infrequent, at-home treatment option

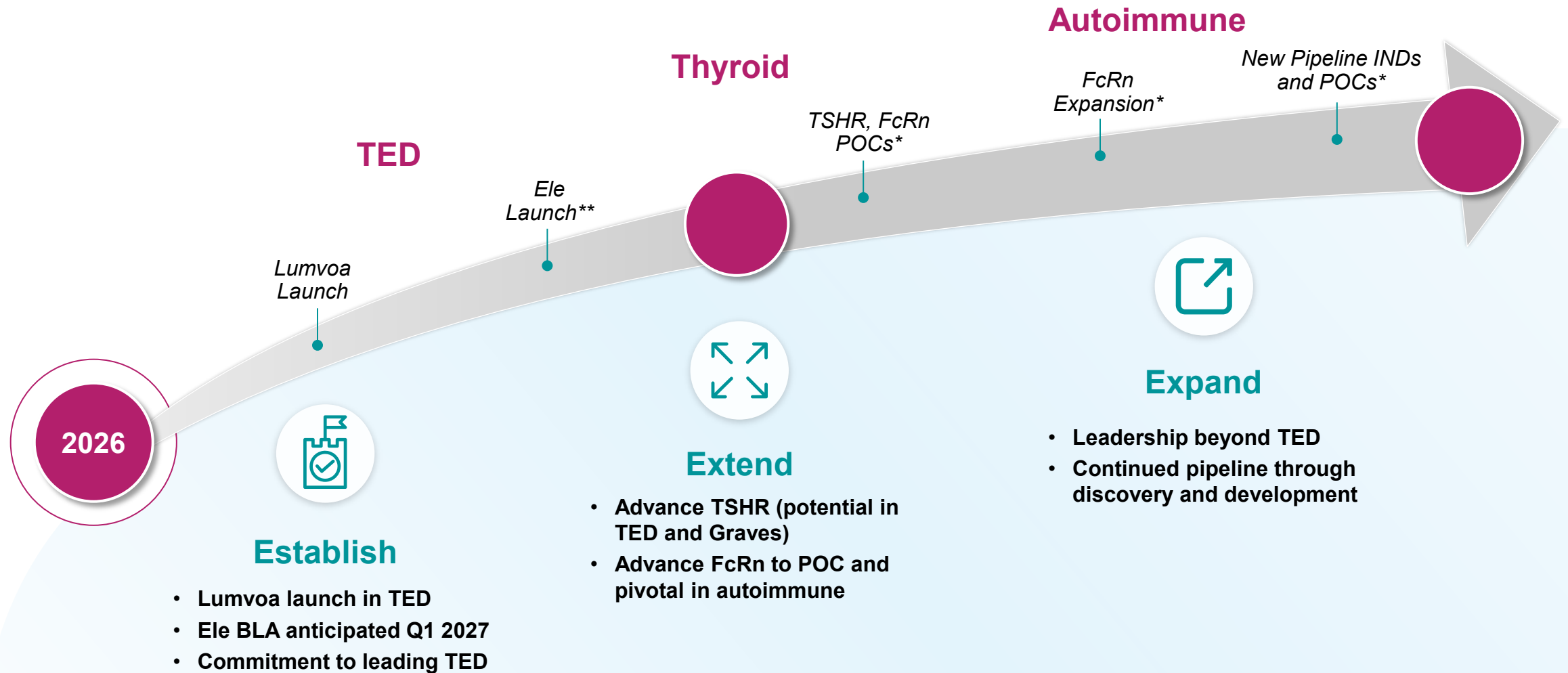
Self-Administered Autoinjector¹

Elegrobart is an investigational product that has not been approved by any regulatory authority; the safety and efficacy have not been established.

1. Planned product profile.

BLA = Biologics License Application, IV = intravenous, Q4W = every 4 weeks, Q8W = every 8 weeks, TED = thyroid eye disease

Viridian aspires to lead in TED and autoimmune diseases



* Planned. ** If approved

BLA = Biologics License Application, Ele = elegrobart, FcRn = neonatal Fc receptor, IGF-1R = insulin-like growth factor-1 receptor, IND = investigational new drug application, POC = proof of concept, TED = thyroid eye disease, TSHR = thyroid stimulating hormone receptor

Q&A