FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
Instruction 1(b).

	. ,				or Secti	on 30(h) of the	Invest	tmen	t Con	pany Act	of 19	940						
1. Name and Address of Reporting Person* MACKEY CATHERINE J				2. Issuer Name and Ticker or Trading Symbol Voyager Therapeutics, Inc. [VYGR]						(Che	eck all applic	ationship of Reportin all applicable)		ng Person(s) to Issue				
	(First) (Middle) YAGER THERAPEUTICS, INC., IEY STREET				3. Date of Earliest Transaction (Month/Day/Year) 08/15/2022								Officer (give title Other (s below) below)					
(Street) CAMBRIDGE MA 02139											Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)															
		Tak	ole I - Nor	n-Deriv	ative Se	curities Ac	quir	ed,	Disp	osed o	f, o	r Bene	ficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Date,			Code (Instr. 5)				5. Amour Securitie Beneficia Owned F	s ally ollowing	Form: (D) or	n: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership				
						Co	ode	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
						urities Acq s, warrants		,		,			•	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution I if any (Month/Day	Date, 1	I. Fransaction Code (Instr. 3)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisa Expiration Date (Month/Day/Yea			of Securities			ecurity	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)

Explanation of Responses:

\$6.02

Stock Option

Buy)

(Right to

1. This stock option was issued pursuant to the 2015 Stock Option and Incentive Plan of Voyager Therapeutics, Inc. in accordance with its director compensation policy. The vesting commencement date (the "Vesting Commencement Date") of the option is the grant date. The option vests over four years, with 1/16th of the shares of common stock underlying the option vesting upon the three-month anniversary of the Vesting Commencement Date and an additional 1/16th of the shares of common stock underlying at the end of each successive three-month period thereafter, subject to the Reporting Person's

Date Exercisable

(1)

Expiration Date

08/15/2032

/s/ Robert Hesslein, as

Attorney-in-Fact for Catherine

\$<mark>0</mark>

44,000

D

J. Mackey

Title

Common

Stock

** Signature of Reporting Person Date

Amount or Number

of Shares

44,000

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).

08/15/2022

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

Α

(A)

44,000

(D)

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.