FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
- 1										
	OMB Number:	3235-0287								
	Estimated average bu	ırden								
	hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

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Name and Address of Reporting Person*     Burek Julie					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Voyager Therapeutics, Inc. [ VYGR ]								(Che	eck all applic Directo	ionship of Reportin all applicable) Director Officer (give title		son(s) to Iss 10% Ov Other (s	wner		
(Last)	,	First) HERAPEUTICS,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/26/2021								7	below)			below)	вреспу 	
75 SIDNEY STREET																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBRIDGE MA 02139													2	X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(:	State)	(Zip)											Person						
		Tak	le I - Non	-Deriv	ative	e Se	curities	s Acc	quired,	Dis	posed o	f, or B	ene	ficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Da Day/Year) if any		Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4		A) or B, 4 and	5. Amou Securitie Beneficie Owned F Reported	es Formally (D) (I) (I		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D) P		Price	Transact	saction(s) r. 3 and 4)			(Instr. 4)		
Common Stock 11/26				5/2021		A		13,500	.3,500 <sup>(1)</sup> A		\$ <mark>0</mark>	46,522			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/Yea	ate, T	Code (In				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	i ily	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)		Date Exercisab		Expiration Date	Title	or Nu of	ımber						
Stock Option (Right to Buy)	\$3.06	11/26/2021			A		25,000		(2)	1	1/26/2031	Common Stock	25	5,000	\$0	25,000	)	D		

## **Explanation of Responses:**

- 1. Consists of shares of common stock issuable under restricted stock units ("RSUs") awarded to the Reporting Person pursuant to the Voyager Therapeutics, Inc. 2015 Stock Option and Incentive Plan (the "2015 Plan"). Each RSU represents the right to receive one share of common stock upon vesting. The vesting commencement date of the RSU award is January 1, 2022. The RSU award vests over three years, with 1/3rd of the shares of common stock underlying the RSU award vesting on the one-year anniversary of such vesting commencement date and an additional 1/3rd of the shares of common stock underlying the RSU award vesting at the end of each successive one-year period thereafter, subject to the Reporting Person's continued service.
- 2. This stock option was issued pursuant to the 2015 Plan. The vesting commencement date of the option is the grant date. The option vests over four years, with 1/48th of the shares of common stock underlying the option vesting upon the one-month anniversary of the option's vesting commencement date and an additional 1/48th of the shares of common stock underlying the option vesting at the end of each successive one-month period thereafter, subject to the Reporting Person's continued service.

/s/ Robert Hesslein, as

Attorney-in-Fact for Julie

11/30/2021

**Burek** 

\*\* 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.