FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL									
OMB Number: 3235-0									
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).

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*  In the second				2. Issuer Name and Ticker or Trading Symbol Voyager Therapeutics, Inc. [ VYGR ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Higgins Michael J</u>				- 1	voyager incrapeaties, inc. [ viole ]								Director	r	10% O	vner
(Last)	(F	irst)	(Middle)		Date of Earliest Transaction (Month/Day/Year)						<del></del>	Officer below)	(give title	Other ( below)	specify	
C/O VOYAGER THERAPEUTICS, INC.,					06/03/2021						Inte					
75 SIDNEY STREET																
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) CAMBRI	DCE M	ΙA	02139									- 1	<b>'</b>	ed by One R	eporting Perso	n
————	DGE M	.A	02139		Form filed by More than One Reporting Person							rting				
(City)	(S	tate)	(Zip)		FEISUII											
		Ta	ble I - Non-	Derivat	ive S	ecurities	s Acc	quired,	Disp	posed o	f, or Be	neficially	Owned			
Date				2. Transact Date (Month/Day	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) (Disposed Of (D) (Instr. 3, 4)			Beneficia Owned Fo	Form ly (D) o	orm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o (D)	Price	Reported Transaction (Instr. 3 a	on(s)		(Instr. 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) of tive	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	Transaction Code (Instr.		Derivative E		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)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V (A) (D) Exercisable Date Title of Shares			(Instr. 4)										
Stock Option (Right to Buy)	\$4.23	06/03/2021		A		115,000		(1)	0	6/03/2031	Common Stock	115,000	\$0	115,000	D	

1. This stock option was issued pursuant to the 2015 Stock Option and Incentive Plan of Voyager Therapeutics, Inc. The vesting commencement date (the "Vesting Commencement Date") of the option is the grant date. The option vests over one year with 1/12th of the shares of common stock underlying the option vesting upon the one-month anniversary of the Vesting Commencement Date and an additional 1/12th of the shares of common stock underlying the option vesting at the end of each successive one-month period, subject to the Reporting Person's continued service.

/s/ Allison Dorval, as Attorneyin-Fact for Michael Higgins

06/04/2021

\*\* 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.