Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI	Ρ

OMB APPROVAL

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

Dorval Allison					V	Voyager Therapeutics, Inc. [VYGR]									eck all applic	•		vner		
(Last) (First) (Middle) C/O VOYAGER THERAPEUTICS, 75 SIDNEY STREET						3. Date of Earliest Transaction (Month/Day/Year) 01/11/2019									below)	hief Finai		below) Officer		
(Street) CAMBRIDGE MA 02139					_ 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									Y Form f Form f	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(5	State)	(Zip)																	
		Tab	ole I - Noi	n-Deriv	vativ	e Se	curities	s Acq	Juired, [Disp	osed o	f, or	Bene	eficiall	y Owned	l .				
Date				e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transac Code (Ir 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amou Securitie Benefici Owned F Reporte	es Fo ally (D Following (I)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price	Transaci (Instr. 3	tion(s)			(msu. 4)	
Common Stock 01/11/				1/201	2019			A		25,000(1)		A	\$0	26,106(2)			D			
		-	Table II -				urities /								Owned				•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		of		6. Date Exe Expiration (Month/Day		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisable		xpiration ate	Title	N C	Amount or Number of Shares						
Stock Option	\$9.1	01/11/2019			A		50,000		(3)	0	1/11/2029	Comi	non [50,000	\$0	50,000)	D		

Explanation of Responses:

- 1. Consists of shares of common stock issuable under an aggregate of 25,000 restricted stock units ("RSUs") awarded to the Reporting Person pursuant to the Voyager Therapeutics, Inc. 2015 Stock Option and Incentive Plan (the "Plan"). Each RSU represents the right to receive one share of common stock upon vesting. The vesting commencement date of the RSU award is the grant date, January 11, 2019. 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. Includes 452 shares of common stock acquired under the Voyager Therapeutics, Inc. 2015 Employee Stock Purchase Plan (the "ESPP") on June 30, 2018 and 654 shares of common stock acquired under the ESPP on December 31, 2018.
- 3. This stock option was issued pursuant to the Plan. The vesting commencement date of the option is the grant date, January 11, 2019. 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 such 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/ Allison Dorval

** Signature of Reporting Person Date

01/17/2019

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.