FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHANGES	IN	BENEFICIAL	OWNERSH	ΙP

OMB APPROVAL OMB Number: 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* Dorval Allison						2. Issuer Name and Ticker or Trading Symbol Voyager Therapeutics, Inc. [VYGR]									eck all applic	cable)	ing Person(s) to Iss 10% O e Other (wner
(Last) (First) (Middle) C/O VOYAGER THERAPEUTICS, INC., 75 SIDNEY STREET					Date 0 /10/2		Trans	action (Mo	nth/E	Day/Year)	7	below)	below) Chief Financial Officer			peony			
(Street) CAMBR (City)	IDGE M	1A	02139 (Zip)		4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	ndividual or Joint/Group Filing (Check Applicable b) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0.0)				Dorive	ative	0 50	ourition	. ^ ^	nuirod I	Dice	acced o	f or E	ono	ficiall	v Owned				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D				action	2A. Deemed Execution Date,		3. 4. Securi Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock 0.			02/10	0/2020				A		27,500	(D)		\$0	+	(Instr. 3 and 4) 52,022		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	ate, Transaction					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				c	Code	v	(A)		Date Exercisabl		xpiration ate	Title	or Nu of	ımber					
Stock Option (Right to	\$12.96	02/10/2020			A		55,000		(2)	0	2/10/2030	Commo Stock		5,000	\$0	55,000)	D	

Explanation of Responses:

- 1. Consists of shares of common stock issuable under an aggregate of 27,500 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, February 10, 2020. 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 Plan. The vesting commencement date of the option is the grant date, February 10, 2020. 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.

02/12/2020 /s/ Allison Dorval

** 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.