FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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heck this box if no longer subject
Section 16. Form 4 or Form 5
bligations may continue. See
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* Swartz Robin					2. Issuer Name and Ticker or Trading Symbol Voyager Therapeutics, Inc. [VYGR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last)	`	irst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/21/2024									X	Officer (give title below) Chief Oper		ating	below)	specify
75 HAYDEN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) LEXING	GTON M	IA 0	2421											X Form filed by One Reporting Perso Form filed by More than One Repo Person					
(City)	(\$	tate) (2	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	, Dis	posed of	or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execut y/Year) if any		ution Date,				es Acquired (A) Of (D) (Instr. 3, 4		4 and Second Sec		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	nt (A) or P			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			02/21/2	2024				s ⁽¹⁾ 3,966 ⁽¹⁾		D	\$7.4	15 ⁽²⁾ 11		8,361		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)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any			ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbe of Title Shares		unt ber				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

- 1. Represents shares of common stock sold, pursuant to a durable automatic sales instruction letter effecting the sell-to-cover election of the reporting person to satisfy tax withholding obligations, in connection with the vesting of restricted stock units on February 17, 2024. The sales do not represent a discretionary trade by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.36 to \$7.52, inclusive. The reporting person undertakes to provide to Voyager Therapeutics, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.

/s/ Scott MacDonald, as 02/22/2024 Attorney-in-Fact for Robin Swartz

** 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.