FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

	OMB APPROVAL									
l	OMB Number:	3235-0287								
	Estimated average burden									
I	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

1. Name and Address of Reporting Person*  LEVIN MARK J					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Voyager Therapeutics, Inc. [ VYGR ]						(Ch	Relationship of Reporting Persor (Check all applicable)     X Director				ner	
C/O VOYAGER THERAPEUTICS,					3. Date of Earliest Transaction (Month/Day/Year) 06/13/2019							Officer below)	(give title		Other (specifically below)	pecify	
75 SIDNEY STREET  (Street)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person					
CAMBRIDGE MA 02139										Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			. Transaction ate Month/Day/Y	Execution Date,		Code (Inst	ransaction Disposed Of (D) (Instr. 3, 4 ode (Instr. 5)			5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form: (D) or	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)		(	instr. 4)			
	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 Dat if any (Month/Day/Ye	Code	Transaction of Code (Instr. Derivative		ve es d ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and A of Securities Underlying Derivative S (Instr. 3 and		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to Buy)	\$24.68	06/13/2019		A		15,000		(1)	06/13/2029	Common Stock	15,000	\$0	15,000		D		

## **Explanation of Responses:**

1. This stock option was issued pursuant to the 2015 Stock Option and Incentive Plan of Voyager Therapeutics, Inc. in accordance with its director compensation policy. The vesting commencement date (the "Vesting Commencement Date") of the option is the grant date. All of the shares of common stock underlying the option vest upon the one-year anniversary of the Vesting Commencement Date, subject to the Reporting Person's continued service.

/s/ Allison Dorval, as Attorney-06/17/2019 in-Fact for Mark J. Levin

\*\* 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.