FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
vvasi ii iytori,	D.C.	20349

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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*  Burek Julie  (Last) (First) (Middle)  C/O VOYAGER THERAPEUTICS, INC.							2. Issuer Name and Ticker or Trading Symbol     Voyager Therapeutics, Inc. [ VYGR ]  3. Date of Earliest Transaction (Month/Day/Year)     01/13/2022									of Reporting cable) or (give title VP, F	-	10% Ov Other (s below)	vner
75 SIDNEY STREET  (Street)  CAMBRIDGE MA 02139  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					saction	action 2A. Deemed Execution Date,		Juired, Disposed of, or Bei 3. Transaction Code (Instr. 8)  4. Securities Acquire Disposed Of (D) (Instruction of the control of the contr		red (A	5. Amou 4 and Securitie Benefici		ent of 6. Over Form (D) of Following (I) (In		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock (				01/13	3/202	3/2022			Code	V	Amount (A) or (D)  10,000(1) A		4	Price \$0	Transact (Instr. 3	ction(s)		D	(IIISU: 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 D if any (Month/Day/	oate,	4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	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)	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		expiration Pate	Title	or Nu of	nount imber ares					
Stock Option (Right to Buy)	\$2.85	01/13/2022			A		40,000		(2)	0	1/13/2032	Common Stock	40	),000	\$0	40,000	)	D	

## **Explanation of Responses:**

- 1. Consists of shares of common stock issuable under an aggregate of 10,000 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 13, 2022. The RSU award vests over three years, with 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, January 13, 2022. 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/ Robert Hesslein, as

Attorney-in-Fact for Julie

01/18/2022

Burek

\*\* 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.