FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHA	NGES IN	BENEFICIAL	OWNERSHIP
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l	OMB APPR	OVAL					
	OMB Number:	3235-0287					
	Estimated average burden						
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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* KARSEN PERRY A				2. Issuer Name and Ticker or Trading Symbol Voyager Therapeutics, Inc. [VYGR]					(Ch	5. Relationship of Reporting Person(s) to I (Check all applicable) X Director 10%				ner		
(Last) (First) (Middle) C/O VOYAGER THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/29/2017							Officer below)	(give title		Other (sp below)	pecify
75 SIDNEY STREET			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable						
(Street)	IDGE M	Ά	02139								Line	X Form f	led by One led by More	•	Ü	
(City)	(S	tate)	(Zip)													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)				Execution Date,		Code (Inst	ansaction Disposed Of (D) (Instr. 3, ode (Instr. 5)			Beneficia	s ally ollowing	Form: D	n: Direct cor Indirect Enstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)		"	nstr. 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)	re Conversion Date Execution Date, Tra		Transa Code (ansaction of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Oi Oi Oi (I)	D. wnership orm: irect (D) r Indirect (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)	\$9.06	06/29/2017		A		15,000		(1)	06/29/2027	Common Stock	15,000	\$0	15,000		D	

Explanation of Responses:

1. This stock option award was granted under Voyager Therapeutics, Inc.'s 2015 Stock Option and Incentive Plan pursuant to the Company's Amended and Restated Non-Employee Director Compensation Policy and will vest in full upon the first anniversary of the grant, subject to Mr. Karsen's continued service on the Board of Directors.

/s/ Shannyn Gaughan, As

Attorney-in-Fact for Perry

06/30/2017

Karsen

** 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.