FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.5								

	tion 1(b).	iuc. See		Filed	pursua or Se	nt to Section 3	ection 80(h) o	16(a) of the Ir	of the Senvestmer	ecuriti nt Con	es Exchang npany Act o	e Act of f 1940	1934		nours	s per r	esponse:	0.5
Name and Address of Reporting Person*     Vickers Philip J.				2. Issuer Name <b>and</b> Ticker or Trading Symbol AVROBIO, Inc. [ AVRO ]								Check all ap	ector		10% O	wner		
(Last) (First) (Middle) C/O AVROBIO, INC. ONE KENDALL SQUARE, BLDG. 300, SUITE				3. Date of Earliest Transaction (Month/Day/Year) 07/07/2021								bel	cer (give title ow)		below)	specify		
201					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBR	IDGE M	A 0	2139										For	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)															
		Table	I - Non-	-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or Be	enefic	ially Ow	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)			Execution Date,		Date,			ies Acquired (A) Of (D) (Instr. 3,		and Secu Bene	nount of rities ficially ed Following	Fori	wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	(A) o (D)	Price	Trans	saction(s) r. 3 and 4)			(			
Common Stock 07/				07/07/2	2021		P		4,800	A	\$8.	.35 4,800			D			
		Tal									osed of, o				ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	n Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price o Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	l 1	Number of Shares						

**Explanation of Responses:** 

/s/ Christopher Gerry, Attorney in Fact for Philip J. 07/08/2021 **Vickers** 

\*\* 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.