FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.S. 200-10	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		
OTATION OF OTTATIONAL OWNER OF THE	Estimated average burden			

0287 Estimated average burden 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* <u>Aliski William</u>						2. Issuer Name and Ticker or Trading Symbol <u>Ultragenyx Pharmaceutical Inc.</u> [RARE]								5. Rela (Check X	tionshi all app Dired	olicable)	g Person(s) to 10%	ssuer Owner
(Last) (First) (Middle) C/O ULTRAGENYX PHARMACEUTICAL INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/04/2014									Office below	er (give title w)	Other below	(specify)	
60 LEVERONI COURT (Street) NOVATO CA 94949				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Zip)															
		Tabl	e I - 1	Non-Deriv	/ative	Sec	uritie	s Ac	quire	ed, Di	isposed o	f, or E	Benefic	ially (Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				Execution Date,				Acquired (A) or (D) (Instr. 3, 4 and		1 5) Securi Benefi		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(iiisti. 4)		
Common Stock 12/04/201				014	4			S		2,891	D	\$41.82	295(1)	6	53,119	D		
Common Stock 12/04/201			014	14		S		3,109	D	\$42.46	516 ⁽²⁾	6	50,010	D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Ex. Security or Exercise (Month/Day/Year) if a		Execu			action (Instr. 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 (Instr. and 4)		Deriv Secu (Insti		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$41.49 to \$42.27, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, 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 range.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$42.28 to \$42.97, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, 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 range.

Remarks:

/s/ Shalini Sharp by power of attorney for William Aliski ** Signature of Reporting Person

12/08/2014

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.