FORM 4

## 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								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

1. Name and Address of Reporting Person*  Huang Dennis Karl  (Last) (First) (Middle)  C/O ULTRAGENYX PHARMACEUTICAL INC.  60 LEVERONI COURT						2. Issuer Name and Ticker or Trading Symbol  Ultragenyx Pharmaceutical Inc. [ RARE ]  3. Date of Earliest Transaction (Month/Day/Year)  03/01/2022  4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  See Remarks  6. Individual or Joint/Group Filing (Check Applicable)					
(Street) NOVATO			94949		-									X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																	
		Tab	le I - No	n-Deri	vativ	e Se	curities	s Ac	quired,	Dis	posed o	f, or Be	neficia	lly C	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,		Transaction Disposed (		ies Acquired (A) or Of (D) (Instr. 3, 4 and				s ally following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	V	Amount	(A) o	Price		Transact (Instr. 3 a	ion(s)			(1113411 4)	
Common Stock 03/					1/2022	/2022		S <sup>(1)</sup>		3,234 D		\$66	.62	36,914			D			
Common Stock 03/01/2				1/2022	/2022		A		14,000(2)		\$0.	00	51,040(3)(4)		<b>D</b> (3)(4) <b>D</b>					
	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/Yo	Date,	ate, Transa Code (		ı of l		Expiration	5. Date Exercisab Expiration Date (Month/Day/Year)		of Securities		Derivativ Security			e Ov s Fo dlly Dii or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amoun or Numbe of Shares							
Stock Option (Right to Buy)	\$67.37	03/01/2022			A		24,900		(5)	(	03/01/2032	Common Stock	24,90	) :	\$0.00	24,900	)	D		

## **Explanation of Responses:**

- 1. Represents shares sold to pay required tax withholdings due to the vesting of Restricted Stock Units ("RSUs").
- 2. Award of RSUs under the Company's 2014 Incentive Plan. The RSUs shall vest with respect to 1/4th of the underlying shares on each anniversary of the grant date, such that the RSUs are fully vested on the fourth anniversary of the grant date
- 3. Includes 126 shares acquired under the Company's 2014 Employee Stock Purchase Plan on October 29, 2021.
- 4. Includes previously reported shares of common stock underlying RSUs granted to the Reporting Person, which are subject to certain vesting conditions.
- 5. On the first anniversary of the grant date of the option (the "Option Anniversary Date"), 1/4th of the shares initially subject to the option shall vest; thereafter, 1/48th of the shares initially subject to the option shall vest on each month as measured from the Option Anniversary Date.

EVP, Chief Technical Operations Officer and Gene Therapy Operations

/s/ Karah Parschauer, attorney-03/03/2022 in-fact

\*\* Signature of Reporting Person

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.