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 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

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Name and Address of Reporting Person*     Crombez Eric					2. Issuer Name and Ticker or Trading Symbol Ultragenyx Pharmaceutical Inc. [ RARE ]									k all appli Directo	cable) or	g Pers	son(s) to Iss	wner	
(Last)	,	rst) (X PHARMACE	(Middle)	INC.		3. Date of Earliest Transaction (Month/Day/Year) 05/01/2023								X	below)		Med	Other (s below) lical Offic	. ,
60 LEVERONI COURT				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	O C	A	94949											X		filed by Mor		orting Person One Repo	
(City) (State) (Zip)				Ru	Rule 10b5-1(c) Transaction Indication														
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Tab	le I - No	n-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	of, or Be	nefic	ially	Owned	t			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,			Code (I	Transaction Disposed Of (D) (Inst. Code (Instr. 5)			ed (A) str. 3, 4	S, 4 and Securiti Benefic Owned		es Fo ially (D) Following (I)		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)		се	Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Stock 05/01/2					/2023		A		4,658	658 <sup>(1)</sup> A		0.00	30,512(2)			D			
		T	able II -									, or Ben ble secu			Owned				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution or Exercise (Month/Day/Year) if any		Date, Transaction			on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		E	s. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amor or Numl of Share	ber					
Stock Option (Right to Buy)	\$44.03	05/01/2023			A		8,362		(3)	0	5/01/2033	Common Stock	8,30	52	\$0.00	8,362		D	

## Explanation of Responses:

- 1. Award of Restricted Stock Units ("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.
- 2. Includes previously reported shares of common stock underlying RSUs granted to the Reporting Person, which are subject to certain vesting conditions.
- 3. The option shall vest with respect to 1/4th of the shares on the first anniversary of the grant date of the option and 1/48th of the shares initially subject to the option shall continue to vest on each month such that the option will fully vest on the fourth anniversary of the grant date.

## Remarks:

/s/ Karah Parschauer, attorneyin-fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.