FORM 4

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

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL				
OMB Number:	3235-0287				
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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

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	nd Address of		2. Issuer Name and Ticker or Trading Symbol Ultragenyx Pharmaceutical Inc. [ RARE ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)									
SULIMAN SHEHNAAZ															Director	or		10% O	vner		
(Last)	(First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024									(give title	Other (spe below)		specify		
C/O ULTRAGENYX PHARMACEUTICAL INC.							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
60 LEVERONI COURT					" "	1. Il 7 shonamont, Date of Original Fried (World Day/Tear)								Line	Line)						
																Form filed by One Reporting Person					
(Street)															Form f		re thai	n One Repo	rting		
NOVATO	) C.	A !	94949		Pelsull																
				.  Rι	Rule 10b5-1(c) Transaction Indication																
(City)	(S	tate)	(Zip)																		
(*****)					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.																
					ļ																
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	of, or l	3en	eficial	ly Owned	t					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution D ay/Year) if any			ate, Transa Code (		tion Disposed Of		ties Acquired (A) or d Of (D) (Instr. 3, 4 ar		5. Amou Securitie Benefici	s Form		m: Direct or Indirect	7. Nature of Indirect Beneficial		
						(Mo		Month/Day/Yea		ar) 8)		<u> </u>			Owned I Reporte				Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)		Price	Transac (Instr. 3	tion(s)			(		
Common Stock 06/18/							/2024		A		5,345 <sup>(1)</sup> A		\$0	20	20,200		D				
		Т	able II -	Deriva (e.g., p	tive s	Sec call	urities s, warr	Acq ants	uired, D s, optior	ispo	osed of onverti	, or Bo	enef cur	icially	Owned						
1. Title of	2.	3. Transaction	3A. Deeme	ad I	4.		5. Num	nher	6. Date Ex	ercisa	hle and	7. Title	and		8. Price of	9. Number	r of	10.	11. Nature		
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution if any (Month/Da	Date,	Transaci Code (In		ion of		Expiration (Month/Da	Date	Amount of		it of ies ying ive S		Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership tt (Instr. 4)		
														Amount							
									Data	_			N	lumber							
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		of Shares							
Stock Option (Right to Buy)	\$37.42	06/18/2024			A		9,900		(2)	0	6/18/2034	Comm		9,900	\$0	9,900		D			

## **Explanation of Responses:**

1. Award of Restricted Stock Units ("RSUs") under the Company's 2023 Incentive Plan. The RSUs shall vest in full on the earlier of (i) the Company's next Annual Meeting of Stockholders or (ii) June 18,

2. The option shall vest in full on the earlier of (i) the Company's next Annual Meeting of Stockholders or (ii) June 18, 2025.

/s/ Karah Parschauer, attorney-06/20/2024 in-fact

\*\* 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.