FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIA

OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02
	Estimated average burd	en

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Address of Reporting Person*  Ray Amrit						2. Issuer Name and Ticker or Trading Symbol <u>Ultragenyx Pharmaceutical Inc.</u> [ RARE ]								heck a	all application	cable) or	ng Per	son(s) to Is:	wner	
(Last)	,	rst) X PHARMACE	(Middle) UTICAL	INC.		3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)											specify			
60 LEVERONI						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NOVATO	) C	<b>A</b> :	94949											X Form filed by One Reporting Person Form filed by More than One Reporting Person					I	
(City)	(S	tate)	(Zip)		-	Person														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,			3. Transaction Code (Instr. 3, 4) 5) 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			red (A) or str. 3, 4 ar	id S B	es Formally (D) (in the collowing (in the collow		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	unt (A) or Pr		т	Reported Transaction(s) (Instr. 3 and 4)				(11150.4)	
Common Stock 04/19/				9/2022	)22 A 5,120 <sup>(1)</sup> A \$0.		00	5,120(2)			D									
	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. Deeme Execution if any (Month/Da	Date,	4. Transa Code ( 8)		n of l		6. Date E Expiratio (Month/D	n Date	•	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Deri Secu (Inst	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactio (Instr. 4)	e O s Fe lly oi (l)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares							
Stock Option (Right to Buy)	\$78.1	04/19/2022			A		9,525		(3)	(	04/19/2032	Commor Stock	9,525	\$(	0.00	9,525	5	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 1/3rd of the underlying shares on each anniversary of the grant date, such that the RSUs are fully vested on the third 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 1/36th of the shares monthly such that the option shall be fully vested on the third anniversary of the grant date.

## Remarks:

/s/ Karah Parschauer, attorneyin-fact

04/22/2022

Date

\*\* Signature of Reporting Person

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.