FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 2004

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
l	Estimated average burde	en
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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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1. Name and Address of Reporting Person* KAKKIS EMIL D					2. Issuer Name and Ticker or Trading Symbol Ultragenyx Pharmaceutical Inc. [RARE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
KAKKIS EWIL D					.	-									X Director			10% Ow	
(Last) (First) (Middle) C/O ULTRAGENYX PHARMACEUTICAL INC. 60 LEVERONI COURT				INC.		3. Date of Earliest Transaction (Month/Day/Year) 06/01/2016								2	X Officer (give title below) President & CEO				pecify
(Street) NOVATO CA 94949 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Ch Line) X Form filed by One Reporting Form filed by More than One Person								ing Persor	1				
(City)	(3		(Zip)	- Dorin						Dia			Dono	ficially	. Ourse and				
1. Title of S	Security (Inst		ole I - Noi	2. Trans		1 2	2A. Deeme	ed	3.		4. Securit	ties Ac	quired (A) or	5. Amou	nt of	6. Own		7. Nature
				(Month/Day/Yea		ear) i	if any (Month/Day/Year)		Transaction Code (Instr.) 8)		Disposed Of (D) (Instr. 3, 4 5)			s, 4 and	Beneficia	Beneficially Owned Following		ndirect E tr. 4)	Beneficial Ownership
									Code	v	Amount	((A) or (D) Pri		Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common	Stock			06/01	1/201	.6			A		10,700)(1)	A	\$0.00	527,	147(2)	1	D	
Common Stock															2,55	2,241		I 3 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	By Emil Kakkis and Jenny Soriano Living Trust, dated June 18, 2009
		-	Table II -								sed of, onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	d Date,	4. Transa Code (ection	5. Number of		6. Date Ex Expiration (Month/Da	ercisa Date	able and	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		mount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab	le E	expiration Date	Title	O N O	umber					
Employee Stock Option (Right to	\$70.57	06/01/2016			A		63,700		(3)	0	6/01/2026	Comi		3,700	\$0.00	63,700)	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. 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.

Remarks:

/s/ Shalini Sharp by power of attorney for Emil D. Kakkis,

06/03/2016

M.D., Ph.D.

** 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.