Ultragenyx Pharmaceutical Inc. Form 5 F

Stock

Common

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| February 10, | , 2017 | | | | | | | | | |
|---|---|---|---|---|---------|--|---|---|---------------------|--|
| FORM | 15 | | | | | | | OMB AF | PROVAL | |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | OMB Number: | 3235-0362 | | | |
| no longer | subject | vv a | Washington, D.C. 20549 | | | | | Expires: | January 31, 2005 | |
| to Section Form 4 or 5 obligation may contin See Instruc- | Form ANN ons nue. ction | OWNE | ATEMENT OF CHANGES IN BENEFICIA OWNERSHIP OF SECURITIES | | | | | Estimated average burden hours per response 1.0 | | |
| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported Form 4 30(h) of the Investment Company Act of 1940 Transactions Reported | | | | | | | | | | |
| 1. Name and A KAKKIS E | Address of Reporting F MIL D | Symbol Ultrage | 2. Issuer Name and Ticker or Trading Symbol Ultragenyx Pharmaceutical Inc. [RARE] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (M | (Month/I | (Month/Day/Year) | | | _X Director _X Officer (give elow) | title Othe below) | Owner er (specify | | |
| C/O ULTRA PHARMAC LEVERON | CEUTICAL INC.,A | _ | .010 | | | | Pres | ident & CEO | | |
| | (Street) | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Reporting (check applicable line) | | | |
| NOVATO,Â | CA 94949 | | | | | _ | X_ Form Filed by 0 Form Filed by M erson | | | |
| (City) | (State) (| (Zip) Tab | le I - Non-Der | ivative Secu | urities | Acqui | red, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | (A) or Disposed of Securities (D) Beneficially (Instr. 3, 4 and 5) Owned at end | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| Common Stock | 12/22/2016 | Â | G | 27,500 | D | \$0 | 419,647 | D | Â | |

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2,552,241

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By Emil

and Jenny Soriano Living Trust,

Kakkis

| | | | | | | | dateo 18, 2 | 1 June 009 | |
|--|---|---|---|--|---------------------------------|---|---|---|--|
| Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. | | | tly. containe | Persons who respond to the collection of information contained in this form are not required to respond unles the form displays a currently valid OMB control number | | | | · / | |
| 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivativ | 6. Date Exercisable and Expiration Date (Month/Day/Year) e | 7. Title and Amount of Underlying Securities | 8. Price of Derivative Security (Instr. 5) | |

Securities

Acquired

Disposed

(Instr. 3,

4, and 5)

(A) (D)

Date

Exercisable

Expiration

Date

(A) or

of (D)

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| Reporting | Owners |
|-----------|---------------|
| | |

Derivative

Security

| Reporting Owner Name / Address | Relationships | | | | | |
|--|--------------------|---|-----------------|-------|--|--|
| | Director 10% Owner | | Officer | Other | | |
| KAKKIS EMIL D C/O ULTRAGENYX PHARMACEUTICAL INC. 60 LEVERONI COURT NOVATO, CA 94949 | X | Â | President & CEO | Â | | |
| Signatures | | | | | | |
| /s/ Ruben A Garcia | | | | | | |

02/10/2017 attorney-in-fact

**Signature of Reporting Person

Date

Explanation of Responses:

* 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).

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Remarks:

Exhibit List: Exhibit 24 - Limited Power of Attorney

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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(Instr. 3 and 4)

Amount or

Title Number

of

Shares