## Edgar Filing: Ultragenyx Pharmaceutical Inc. - Form 4/A

Ultragenyx Pharmaceutical Inc. Form 4/A November 18, 2016

November 18	3, 2016										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL				
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005	
subject to Section 16. Form 4 or						NERSHIP OF	Estimated average burden hours per response 0.				
Form 5 obligatior may conti <i>See</i> Instru 1(b).	Filed purs sinue. Section 17(a	) of the P	ublic Uti		ing Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40		0.5	
(Print or Type R	Responses)										
Huizenga Theodore Alan Symbol			Symbol	suer Name <b>and</b> Ticker or Trading ol agenyx Pharmaceutical Inc.				5. Relationship of Reporting Person(s) to Issuer			
[RARE]				yx Filain.	laceutica		•	(Check all applicable)			
			3. Date of ( (Month/Da	f Earliest Transaction Day/Year)				Director 10% Owner Officer (give title Other (specify			
C/O ULTRA PHARMAC LEVERONI	EUTICAL INC.,	(	06/17/20	-				below) Cont	below) roller and PAC		
			endment, Date Original nth/Day/Year) 015				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
NOVATO, O	CA 94949							Form filed by N Person	Iore than One Re	porting	
(City)	(State) (	Zip)	Table	I - Non-Do	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	. Transaction Date 2A. Deeme Month/Day/Year) Execution I any (Month/Da		n Date, if Transaction(A) Code (D)			d of	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	06/17/2015			М	1,500	А	\$ 21	5,800 <u>(1)</u>	D		
Common Stock	06/17/2015			S	1,500	D	\$ 94.8 (2)	4,300 <u>(1)</u>	D		

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

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 control

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#### 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 Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Huizenga Theodore Alan						
C/O ULTRAGENYX PHARMACEUTICAL INC.			Controller			
60 LEVERONI COURT			and PAO			
NOVATO, CA 94949						
Signatures						

# . . .....

11/18/2016			
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).
- Due to a clerical error, the number of shares beneficially owned following the reported transaction mistakenly excluded 1,800 shares (1) owned by the Reporting Person. These 1,800 shares were also omitted from five Forms 4 filed by the Reporting Person after this Form 4 was filed.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$94.76 to \$94.88 inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the

(2)Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

Note: File three copies of this Form, one of which must be manually signed. If space 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.