FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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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

1. Name and Address of Reporting Person* Zelenkofske Steven						2. Issuer Name and Ticker or Trading Symbol uniQure N.V. [QURE]										all app	blicable) ctor		6 Owner
(Last) (First) (Middle) 113 HARTWELL AVENUE C/O UNIQURE N.V.					3. Date of Earliest Transaction (Month/Day/Year) 06/05/2017									X		Officer (give title below) Chief Medical Officer			
(Street) LEXINGTON MA 02421 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		1	able I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, oı	r Bene	eficia	ally	Owne	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ay/Year) Execut		A. Deemed Recution Date, any lonth/Day/Year)		Transaction Dispo		ecurities Acquired (A osed Of (D) (Instr. 3,				5. Amount of Securities Beneficially Owned Following Reported		6. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect	
									Code	v	Amount		(A) or (D)	Price	•	Transaction(s) (Instr. 3 and 4)			(111511.4)
Ordinary Shares 06/05/2				/2017			A		175,000 A		\$ <mark>0</mark> .	00	175,000		D				
			Table II -								sed of, onvertib				y Ov	vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		enth/Day/Year) Execution	n Date,		Transaction Code (Instr.		n of		Exercison Dat Day/Ye			str. 3		vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of						

Explanation of Responses:

Remarks:

/s/ Maiken Keson-Brookes, attorney-in-fact 06/07/2017

** 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.