FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ı | OIVID AFFIC | VAL | | | | | |
|---|-------------------------|-----------|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | |
| l | Estimated average burde | en | | | | | |
| 1 | hours per response: | 0.5 | | | | | |

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* GRAMMER ELIZABETH A | | | | | 2. Issuer Name and Ticker or Trading Symbol ARDELYX, INC. [ARDX] | | | | | | | (Ch | Relationship o eck all applica Director | able) | g Perso | on(s) to Issu 10% Ow Other (s) | ner |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------|----------------------------------------------------|-----------------|-----------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|
| (Last) (First) (Middle) C/O ARDELYX, INC. 34175 ARDENWOOD BLVD, SUITE 200 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/09/2020 | | | | | | | | X Officer (give title Steller) See Remarks | | | | Scony |
| (Street) FREMONT CA 94555 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Lin | E) X Form fil Form fil Person | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transidate (Month/I | | | | ransactio | 1 | | 3. Transaction Code (Instr. | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | 5. Amount of | | Form | : Direct III Indirect Estr. 4) | . Nature of ndirect Beneficial Ownership Instr. 4) | | |
| 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. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | | piration ite | Title | Amount or Number of Shares | | (Instr. 4) | | | |
| Stock Option | \$7.6 | 01/09/2020 | | A | | 139,365 | | (1) | 01/ | /09/2030 | Common Stock | 139,365 | \$0.00 | 139,36 | 55 | D | |

Explanation of Responses:

1. The option becomes exercisable as it vests and the shares subject to the option vest in 48 successive, equal monthly installments on each monthly anniversary of January 9, 2020, subject to the Reporting Person's continued employment or service relationship with the Issuer on each such vesting date.

Remarks:

Chief Legal and Administrative Officer

/s/ Elizabeth Grammer 01/1

** Signature of Reporting Person

01/13/2020

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.