FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* RAAB MICHAEL							2. Issuer Name and Ticker or Trading Symbol ARDELYX, INC. [ARDX]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O ARDELYX, INC. 34175 ARDENWOOD BLVD, SUITE 100						3. Date of Earliest Transaction (Month/Day/Year) 02/05/2020									Officer (give title below) Other (specify below) President & CEO				pecify
(Street) FREMONT CA 94555						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	Form filed by One Reporting Person Form filed by More than One Reporting				1
(City) (State) (Zip)													Person						
		Tab	le I - N	on-Deri	vativ	e Sec	curit	ies Ac	quire	d, Di	sposed o	f, or Be	enefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						Exe) if ar	A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			Benefici Owned F		es ally Following	Form:	: Direct 0 · Indirect E str. 4) 0	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	tion(s)		1	Instr. 4)
Common Stock 02/05/20						20			M ⁽¹⁾		25,000	A	\$1.	.08	231,8	328(2)(3)		D	
Common Stock 02/05/20					2020)20			S ⁽¹⁾		25,000	D	\$7.31	.71 ⁽⁴⁾ 206,828 ⁽²⁾⁽³⁾		328(2)(3)	D		
Common Stock															130	0,668			Family Γrust ⁽³⁾⁽⁵⁾
Common Stock														1,000			I 7	Γrust ⁽⁶⁾	
		-	Table II								posed of, convertil				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I	on Date,	ate, Transac Code (In				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		D S	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Ownership	Beneficial Ownership ect (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					
Stock Option (Right to	\$1.08	02/05/2020			M			25,000	(7))	10/26/2020	Common Stock	25,0	00	\$0.00	11,123	3	D	

Explanation of Responses:

- $1.\ Transaction\ made\ pursuant\ to\ a\ 10b5-1\ trading\ plan\ adopted\ by\ the\ Reporting\ Person\ on\ December\ 23,\ 2019.$
- 2. Reflects the adjusted total which includes the purchase of 2,310 shares under the Ardelyx Employee Stock Purchase Plan on August 31, 2019
- $3. \ Reflects the transfer of 49,837 \ shares \ previously \ held \ directly \ by \ the \ reporting \ person into \ a \ family \ trust.$
- 4. This transaction was executed in multiple trades in prices ranging from \$7.45, inclusive. The price reported in Column 4 above reflects the weighted average sales price. The Reporting Person hereby undertakes to provide to the Securities and Exchange Commission staff, the Issuer, or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.
- 5. The shares are directly held by Michael G. Raab, Trustee of the Michael G. Raab Living Trust dated July 25, 2012.
- 6. The shares are owned directly by trusts for the benefit of the Reporting Person's children.
- 7. Fully vested.

/s/ Elizabeth Grammer,

Attorney-in-Fact for Michael

02/07/2020

Raab

** 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.