## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	. Name and Address of Reporting Person <sup>*</sup> BARRETT M JAMES					2. Issuer Name and Ticker or Trading Symbol ARDELYX, INC. [ARDX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 07/18/2016										ficer (give title low)		Other below)	(specify )
1954 GREENSPRING DRIVE SUITE 600					4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) TIMONIUM MD 21093													Fo	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transact Date (Month/Day	/Year) if any		Deemed cution Date, יץ nth/Day/Year)				ties Acquired (A) or d Of (D) (Instr. 3, 4			Secu Ben Owr		Form (D) or Indire	ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		A) or D)	Price	Following (Instr. 4) (Ins Reported Transaction(s) (Instr. 3 and 4)			(IIISU: 4)	
Common Stock			07/18/2016				<b>P</b> <sup>(1)</sup>		763,650		Α	\$8.7	3 8	,752,543		Ι	See Note 2 <sup>(2)</sup>		
		Та	ble II	- Derivat (e.g., pı							sed of, onvertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	3A. Deemed Execution Date, if any (Month/Day/Year)		tion nstr.	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)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)			8. Price of Derivativ Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Ov Fo Di or (l) 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount nber ares					

Explanation of Responses:

1. Acquired from the issuer pursuant to a Securities Purchase Agreement dated July 14, 2016, with a closing date of July 18, 2016.

2. The Reporting Person is a manager of NEA 12 GP, LLC, ("NEA 12 GP") which is the sole general partner of NEA Partners 12, Limited Partnership ("NEA Partners 12"). NEA Partners 12 is the sole general partner of New Enterprise Associates 12, Limited Partnership ("NEA 12"), the direct beneficial owner of the securities. The Reporting Person disclaims beneficial ownership within the meaning of Section 16 of the Securities Exchange Act of 1934, as amended, or otherwise of such portion of the securities held by NEA 12 in which the Reporting Person has no pecuniary interest.

Remarks:

/s/ Sasha Keough,	attorney-in-	07/	20/2016
		$\mathbf{U}$	20/2010

<u>fact</u>

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.