FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
KAAB	MICHAI	<u>EL</u>					<u> </u>	1110	<u>-</u> [· · · ·		J			X	Direc	tor		10% Ov	vner	
(Last)	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024								X	Office	er (give title v) Presider	Other (s below)	specify		
C/O ARDELYX, INC.														Tresident & CLO						
400 FIFTH AVENUE, SUITE 210					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X	X Form filed by One Reporting Person					
WALTH.	AM M	A 0	2451												Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication															
					X Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefic	cially	/ Own	ed				
1. Title of Security (Instr. 3) 2. Transa Date (Month/Di					Exec if an	Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 3, 5)			4 and Securit Benefic Owned		ies cially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Prio	e		ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 04					/2024				S ⁽¹⁾		1,518	I	\$7	7.31	1,3	1,318,433		D		
Common Stock														24	24,364			Family Trust ⁽²⁾		
Common Stock														1,000				Family Trust ⁽³⁾		
	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)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of	r osed (: 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)			Expiration Date	Amour or Number of Title Shares								

Explanation of Responses:

- 1. Transaction made pursuant to a 10b5-1 trading plan adopted by the Reporting Person on December 13, 2023.
- 2. The shares are directly held by Michael G. Raab, Trustee of the Michael G. Raab Living Trust dated July 25, 2012.
- 3. The shares are owned directly by trusts for the benefit of the Reporting Person's children.

/s/ Elizabeth Grammer,

04/02/2024 Attorney-in-Fact for Michael

Raab

** Signature of Reporting Person

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.