FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OIVID APPROVAL								
OMB Number:	3235-0287							
Estimated average	e burden							

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(a). See Instruction 1

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

1(0). 0	e instruction i	0.																	
Name and Address of Reporting Person* Power Institute				2. Issuer Name and Ticker or Trading Symbol ARDELYX, INC. [ARDX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Renz Justin A										,				Direc	tor		10% Ov	vner	
-													1		er (give title		Other (s	specify	
(Last)	(Fir	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year)									pelow) below)		,			
C/O ARDELYX, INC.					08/20/2024							Chief Financial Officer							
400 FIFT	TH AVENU	E, SUITE 210																	
					4. If A	mendm	ent, Date	of Origin	al File	d (Month/Da	y/Year	ì	6. Indi	/idual o	r Joint/Group	o Filing	g (Check A	pplicable	
(Street)					,								Line)						
WALTH.	AM M	A 0	2451									1	Form filed by One Reporting Person						
														Form filed by More than One Reporting Person				orting	
(City)	(St	ate) (2	Zip)											1 6130	JII				
(Oity)	(00	(2	-iP)																
		Table	I - No	n-Deriva	tive S	Securit	ties Ac	quired	, Dis	posed of	, or E	Benefi	cially	Own	ed				
1. Title of	Security (Ins	tr. 3)		2. Transacti														7. Nature	
Date (Month/Day				/Year) Execution Da if any (Month/Day/Y		,	Transaction Code (Instr. r) 8)				ıstr. 3, 4	and	Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)	r Indirect nstr. 4)	of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) o	r Pric	e	Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 08/20/20					124			S ⁽¹⁾		5,289	D	\$5	8603	<u> </u>	05,257		D		
Common Stock 08/20/20					J2 4			3.7		3,267		Ψ3.	15.8003 295,257				D		
		Tal	ble II ·	- Derivati	ve Se	curitie	es Acq	uired,	Disp	osed of,	or Be	nefic	ally (Owne	d				
				(e.g., pu	ts, ca	ılls, wa	arrants	, optic	ns, d	convertib	le se	curitie	es)						
1. Title of Derivative	2. Conversion		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transac	ction	5. Number of	of Expiration D		ate	7. Title and Amount of		Der	vative derivativ	9. Number derivative	`	10. Ownership	11. Nature of Indirect	
Security (Instr. 3)	or Exercise Price of Derivative Security				Code (I 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	(Monti	n/Day/\	(ear)	Securities Underlying Derivative Security (Ins 3 and 4)		(Ins	str. 5)	Securities Beneficially Owned Following Reported Transaction (Instr. 4)	'	Form: Direct (D) or Indirect (I) (Instr. 4)		
		[Amour	ıt]								
								1		l		or	_		I			I	

Explanation of Responses:

1. Pursuant to an automatic sell-to-cover imposed by the terms of the initial grant of the restricted stock units ("RSUs") awards, the shares were sold upon the vesting of the RSUs solely to cover applicable withholding taxes.

(D)

Date Exercisable

Remarks:

/s/ Elizabeth Grammer,

Shares

Title

Attorney-in-Fact for Justin 08/22/2024

Renz

Expiration

Date

** 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).

Code

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.