FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
to occiton 10.1 onn 4 or 1 onn 5		

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)						
IGHID	WITCHIA	<u></u>												X	Direc			10% O	
(Loot)	(5	irot) ((Aiddla)		2 Do	2. Date of Fauligat Transportion (Month/Day/Nos.)									X Officer (give title below)			Other (: below)	specify
` ′	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/20/2022									President & CEO				
C/O ARDELYX, INC.				33, 23, 2322									Trestació de GEO						
400 FIFTH AVENUE, SUITE 210				_															
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	436 30		0.451											X	Form	filed by One	e Rer	ortina Pers	on
WALTH	AM IV	IA C	2451													filed by Mo		•	
-															Perso				
(City)	(S	tate) (Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or B	Benefi	cially	own (ed			
Date			Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)						6. Ownersh Form: Direc (D) or Indirec (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
					(Month/Day/Year)		8)					Report	ted	(1) (11		(Instr. 4)			
									Code	۱v	Amount	(A) o (D)	r Pric	е	Transa (Instr. :	ction(s) 3 and 4)			
Common Stock			05/20/2022				S ⁽¹⁾		6,124	D	\$0.	6714	714 772,450 ⁽²⁾			D			
Common Stock														24,364				Family Trust ⁽³⁾	
											+	-		-					
Common Stock													1,000				Family Trust ⁽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)	rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any		tion Date,	4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	6. Date Expira (Month	tion D			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)	Date Exerci	sable	Expiration Date	Title	Amour or Number of Shares	er					

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.
- 2. Reflects the adjusted total which includes the purchase of 3,000 shares under the Ardelyx Employee Stock Purchase Plan on February 28, 2022.
- 3. The shares are directly held by Michael G. Raab, Trustee of the Michael G. Raab Living Trust dated July 25, 2012.
- 4. The shares are owned directly by trusts for the benefit of the Reporting Person's children.

/s/ Elizabeth Grammer, Attorney-in-Fact for Michael 05/23/2022

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.