FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	D.C. 20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

Name and Address of Reporting Person* Rodriguez Susan					2. Issuer Name and Ticker or Trading Symbol ARDELYX, INC. [ARDX]										all app Direc	tionship of Reporti all applicable) Director		10% Ov	wner
(Last)	(Fii DELYX, IN	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/20/2023									Officer (give title below) Chief Comme		nercia	Other (s below) al Officer	эресіту ————————————————————————————————————
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) WALTHAM MA 02451														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rul	Rule 10b5-1(c) Transaction Indication													
						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	Secui	rities	Acc	quired	, Dis	posed of	, or E	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execu	eemed ution Date, th/Day/Year)					s Acquired (A) of f (D) (Instr. 3, 4		and Sed Bed Ow		Amount of ecurities eneficially wned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) o (D)	r Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 11/20/2				11/20/2	.023				S ⁽¹⁾		4,714	D	\$4.30	622 346		6,973(2)		D	
	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) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) if any (Month/Day/Year) (Month/Day/Year)			tion Date,	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) of Dispo of (D) (Instr	of EDerivative (PSecurities Acquired A) or Disposed		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

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 in August 2023.

Remarks:

/s/ Elizabeth Grammer.

11/22/2023 Attorney-in-Fact for Susan

Rodriguez

** 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.