## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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)

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*  MOTT DAVID M  (Last) (First) (Middle)  1954 GREENSPRING DRIVE  SUITE 600					3. E 12/	2. Issuer Name and Ticker or Trading Symbol ARDELYX, INC. [ ARDX ]  3. Date of Earliest Transaction (Month/Day/Year) 12/09/2019  4. If Amendment, Date of Original Filed (Month/Day/Year)									5. Relationship of Reportin (Check all applicable) X Director Officer (give title below) 6. Individual or Joint/Group Line)			X 10% CO Other (below)		owner (specify pplicable
(Street) TIMONI  (City)			21093 Zip)												X	Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tabl	e I - Noi	n-Deriv	ative	Se	curitie	s Ac	guired.	Dis	posed o	f, o	Bene	fici	ally (	Owne	ed			
1. Title of Security (Instr. 3) 2. Tran				2. Trans	action	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,				) or 5. An 4 and Secu Bene		ount of ties cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		(A) or (D)	Pric	rico Tra		nsaction(s) tr. 3 and 4)			(1113411 4)
Common Stock 12/09				)/2019	/2019					400,00	00	A	\$6.25		3,482,186			I	See Note 1 <sup>(1)</sup>	
Common Stock															3,0	082,186		I	See Note 2 <sup>(2)</sup>	
Common Stock														87,566			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)			Date,	4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/E			e Am Sec Und Der		ount ount ober			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

1. The Reporting Person is a manager of NEA 15 GP, LLC, ("NEA 15 GP") which is the sole general partner of NEA Partners 15-OF, L.P. ("NEA Partners 15-OF"). NEA Partners 15-OF is the sole general partner of NEA 15 Opportunity Fund, L. P. ("NEA Opportunity 15"), 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 Opportunity 15 in which the Reporting Person has no pecuniary interest.

2. The Reporting Person is a manager of NEA 15 GP, which is the sole general partner of NEA Partners 15, L.P. ("NEA Partners 15"). NEA Partners 15 is the sole general partner of New Enterprise Associates 15, L. P. ("NEA 15"), 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 15 in which the Reporting Person has no pecuniary interest.

## Remarks:

/s/ Sasha Keough, attorney-in-

12/09/2019

fact

\*\* 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.