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ARDELYX,	, INC.										
Form 4 March 04, 20	015										
FORM	ΠΛ								OMB AF	PROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer CTLATED ADDAED CHANGES IN DEDUBLICIAL ON OF DESIDE								Expires:	January 31, 2005		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. Form 4 or						EKSHIP OF	Estimated average burden hours per response 0.				
Form 5 obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17(a) of the P	Public U	tility Ho	lding Co	mpan	-	Act of 1934, 1935 or Section)	·		
(Print or Type]	Responses)										
JUE GEORGE Sym			Symbol	r Name an LYX, IN			8	5. Relationship of Reporting Person(s) to Issuer			
				f Earliest T	-	-		(Check all applicable)			
(Mo			(Month/I	Month/Day/Year) 3/02/2015				Director 10% Owner X Officer (give title Other (specify below) VP, Operations			
(Street) 4. If Amo				nendment, Date Original				6. Individual or Joint/Group Filing(Check			
FREMONT	r, ca 94555		Filed(Mo	nth/Day/Yea	ar)			Applicable Line) _X_ Form filed by O Form filed by Mo Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu		ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deema Execution any (Month/Da	ed Date, if	3.		ties Ao sed of	cquired (A) (D)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/02/2015			Code V $\underline{S(1)}$	Amount 1,500 (2)	(D) D	Price \$ 15.8814 (3)		D		
Common Stock								69,444	I	See Footnote (5)	
Common Stock								4,055	I	See Footnote (6)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JUE GEORGE C/O ARDELYX, INC. 34175 ARDENWOOD BLVD, SUITE 200 FREMONT, CA 94555	VP, Operations						
Signatures							
/s/ Elizabeth Grammer, Attorney-in-Fact for George Jue	03/04/2015						
**Signature of Reporting Person		D	Date				

Explanation of Responses:

- * 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).
- Transaction made pursuant to a 10b5-1 trading plan adopted by the Reporting Person on December 15, 2014. (1)
- (2) Represents shares acquired under the Issuer's Employee Stock Purchase Plan on February 27, 2015.

This transaction was executed in multiple trades in prices ranging from \$15.52 to \$16.19, inclusive. The price reported in Column 4 above reflects the weighted average sales price. The Reporting Person hereby undertakes to provide to the Securities and Exchange Commission

- (3) staff, the Issuer, or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.
- Includes an additional 35 shares acquired under the Issuer's Employee Stock Purchase Plan on February 27, 2015, which shares were not (4) sold as part of the transactions reported herein.

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- (5) The shares are directly held by George Jue and Gwendolyn Lowe Revocable Living Trust.
- (6) The shares are directly held by the Reporting Person's daughter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.