## Edgar Filing: ARDELYX, INC. - Form 4

ADDEL VV INC

Form 4											
January 23, 2 FORM	Л									PPROVAL	
<b>CUNIVI 4</b> UNITED STATES SECURITIES AND EX Washington, D.C. 2									OMB Number:	3235-0287	
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	er STATE 5. Filed pr snue. Section 17	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							burden hou response	January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type R	esponses)										
Korner Paul Symbo			Symbol	Issuer Name <b>and</b> Ticker or Trading nbol RDELYX, INC. [ARDX]				5. Relationship of Reporting Person(s) to Issuer			
(Mo			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 01/19/2017				(Check all applicable) Director 10% Owner X Officer (give title Other (specify below) EVP, Chief Medical Officer			
			ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
FREMONT,	CA 94555							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Execution any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V		sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	01/19/2017			А	17,985 (1)	А	\$0	72,608	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

## Edgar Filing: ARDELYX, INC. - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number of Transactio-Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S ()
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 13.9	01/19/2017		А	74,233	(2)	01/19/2027	Common Stock	74,233	

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Korner Paul C/O ARDELYX, INC. 34175 ARDENWOOD BLVD, SUITE 100 FREMONT, CA 94555			EVP, Chief Medical Officer				
Signatures							
/s/ Elizabeth Grammer, Attorney-in-Fact for Pa Korner	aul	01/23/2017					
<b>**</b> Signature of Reporting Person		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).
- (1) Restricted stock units ("RSUs"). The Reporting Person is entitled to receive one (1) shares of Common Stock for each one (1) RSU upon the vesting thereof.
- The option becomes exercisable as it vests and the shares subject to the option vest in 48 successive, equal monthly installments on each monthly anniversary of January 19, 2017, subject to the Reporting Person's continued employment or service relationship with the Issuer
- on each such vesting date.

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.

E S