Edgar Filing: Akebia Therapeutics, Inc. - Form 4

Akebia Therapeutics, Inc. Form 4 November 14, 2014

November 14	4, 2014											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check the if no long	Ter	-							Expires:	January 31,		
subject to Section 1 Form 4 o	.6. STATE	STATEMENT OF CHANGES IN BENEFICIAL OWNERS SECURITIES								2005 verage s per 0.5		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17	(a) of the	response Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940									
Print or Type I	Responses)											
1. Name and Address of Reporting Person <u>2</u> . GOWEN MAXINE Syn				r Name and	Ticker or	Tradi		5. Relationship of Reporting Person(s) to Issuer				
	Akebia Therapeutics, Inc. [AKBA]					(Check all applicable)						
				ate of Earliest Transaction nth/Day/Year)				X Director 10% Owner				
	IA THERAPEU' IRST STREET,		11/13/2	014				Officer (give t below)	itleOthe below)	r (specify		
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CAMBRID	GE, MA 02142							Form filed by M Person	ore than One Rep	porting		
(City)	(State)	(Zip)	Tabl	le I - Non-D) erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
I.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8)	4. Securit n(A) or Di (Instr. 3,	sposed	1 of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	11/13/2014			Code V P	Amount 1,300	(D) A	Price \$ 11.819 (1)	1,300	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)

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. Transac Code (Instr. 8	Securities Acquired (A) or Disposed of (D)	(Month/Day/Year) tive ties ed		7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code	(Instr. 3, 4, and 5) V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner Officer		Other		
GOWEN MAXINE C/O AKEBIA THERAPEUTICS, INC. 245 FIRST STREET, SUITE 1100 CAMBRIDGE, MA 02142	Х					
Signatures						
Nicole R. Hadas, Attorney-in-Fact for M Gowen	11/14/2014					
**Signature of Reporting Person			Date			
Explanation of Respon	696.					

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) The price reported in this Column 4 is a weighted average price. The shares were purchased in multiple transactions at prices ranging from \$11.8188 to \$11.8191, inclusive. The reporting person undertakes to provide Issuer, any security holder of Issuer, or the staff of the Securities Exchange Commission, upon request, full information regarding the number of shares purchased at each price within the range set forth in this footnote.

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.