FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  Butler John P.					Ake	2. Issuer Name and Ticker or Trading Symbol Akebia Therapeutics, Inc. [ AKBA ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)	,	, i	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/11/2018								below)	,		Other (s below)	pecify	
C/O AKEBIA THERAPEUTICS, INC. 245 FIRST STREET														CEO and President					
	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street)														X Form filed by One Reporting Person					
CAMBRIDGE MA 02142														Form filed by More than One Reporting Person					
(City)	(S	tate) (																	
		Tab	le I - N	lon-Deriv	ative S	Sec	urit	ies Acc	quired,	Disp	osed o	f, or Be	neficial	ly Owned	I				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/						Exec if an	Deemed ution Date, y nth/Day/Year)		Transaction Disposed C		ties Acquired (A) of (D) (Instr. 3, 4		5. Amou Securiti Benefici Owned Followin	es ally	Form (D) o	: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership		
										v	Amount	int (A) or (D)		Reporte Transac			. 4)	Instr. 4)	
Common Stock 07/11/20						018		M		100,000		\$0.4	510,	510,314(1)		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	cise (Month/Day/Year) f ive	3A. Deemed Execution Da if any (Month/Day/	emed ion Date,	4. Transact	5. Number		umber ivative urities uired or posed D) tr. 3, 4	6. Date E: Expiratio (Month/D	xerci:	sable and 7. Title and te Amount of		nd of s ng e Security and 4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to buy)	\$0.47	07/11/2018			M			100,000	(2)		09/16/2023	Common Stock	100,000	\$0.00	287,00	)0	D		

## Explanation of Responses:

- 1. The total amount of beneficial securities owned includes 1,500 shares of stock purchased on June 29, 2018 at \$8.48 per share in connection with the Issuer's Employee Stock Purchase Plan.
- 2. On September 16, 2013, the Issuer granted the reporting person an option to purchase 612,500 shares of the Issuer's common stock (the "Option") under the Issuer's Amended and Restated 2008 Equity Incentive Plan. 25% of the shares underlying the Option vested on the first anniversary of the grant date, and the remaining 75% vested in equal monthly installments thereafter. Prior to July 11, 2018, the reporting person exercised the Option with respect to 225,500 shares. On July 11, 2018, the reporting person exercised the Option with respect to 100,000 shares, as reported on this Form 4.

## Remarks:

Nicole R. Hadas, attorney-infact for John P. Butler 07/12/2018

\*\* 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.