FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response: 0.5									

	tion 1(b).			Filed							ities Exchang ompany Act o		f 1934			Liloui	rs per resp	UIISE.	0.5	
1. Name ar	2. Issuer Name and Ticker or Trading Symbol Akebia Therapeutics, Inc. [AKBA] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner																			
(Last) (First) (Middle) C/O AKEBIA THERAPEUTICS, INC. 245 FIRST STREET			02/2	3. Date of Earliest Transaction (Month/Day/Year) 02/29/2024 4. If Amandment, Date of Original Filed (Month/Day/Year)									X Officer (give title Other (specify below) CEO and President							
	JI SIKEE	4. 11 /	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicab Line)																	
(Street) CAMBRIDGE MA 02142						X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(City)	(St	ate) (2	Zip)		Ru	le 10)b5-	1(c)	Trar	ารลด	ction Indi	catio	on							
						Check the satisfy the	nis box ne affiri	to indi native	cate that defense	t a trar condi	nsaction was m tions of Rule 10	ade pur 0b5-1(c)	suant to). See In	a con	tract, instru on 10.	uction or wr	itten plan t	hat is inte	nded to	
		Table	I - No	on-Deriva	tive	Secur	rities	Acc	uired	l, Dis	sposed of	, or E	Benefi	iciall	y Own	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Securitie Benefici Owned F	eficially led Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	rect Ir lirect B 4) C	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) o (D)	r Pric	e e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common	Stock			02/29/20	024				S		46,570(1)	D	\$1	.58	2,04	4,580	D			
Common Stock													100,000		I	J E C	Held By ohn Butler GRAT Jovember 019			
Common Stock													59,	928	I	J E 2	Held by ohn Butler 019 GRAT			
Common Stock													100	,000	I	E C N	Jeld By Dorothy Butler GRAT November 019			
Common Stock													59,928		I	E 2	Held by Dorothy Butler 019 GRAT			
		Tal	ble II								oosed of, o				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ction 3A. Deemed 4. Execution Date, Tra		4. Transa	4. 5. Number of Code (Instr. Derivative		mber rative rities ired r osed)	6. Date Expira	Date Exercisable and xpiration Date		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownersh S Form: Direct (D or Indire (I) (Instr.		Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amour or Number of Shares	er	1 1					

Explanation of Responses:

Remarks:

^{1.} This sale was made automatically by the Issuer to cover tax withholding obligations in connection with the vesting and settlement of one-third of the reporting person's restricted stock units granted on February 28, 2022.

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.