FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnii	ngton,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>Amello Jason</u>				2. Issuer Name and Ticker or Trading Symbol Akebia Therapeutics, Inc. [AKBA]								(Che	ck all applic	cable)	g Pers	on(s) to Issi 10% Ow Other (s	/ner		
	,	RAPEUTICS, IN	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/28/2020								_	below)		below) FO & Treasurer		pecity
(Street) CAMBRIDGE MA 02142			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	-	(Zip)											<u> </u>					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			saction	Execution Date,		3. 4. Secur Transaction Dispose Code (Instr. 5)		4. Securit	of, or Benefic ities Acquired (A) d Of (D) (Instr. 3, 4		(A) or	5. Amou Securitie Beneficia	nt of es ally Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)		Price	Transact (Instr. 3	ion(s)			(3 4)	
Common Stock 02/28			8/202	2020		A		30,000	(1)	A	\$0.00	151,618 ⁽²⁾			D				
Common Stock 02/2			02/2	8/202	2020		S		6,976	(3)	D	\$8.7	144	,642		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution [Date, Transactio Code (Inst		n of		6. Date Exercisable Expiration Date (Month/Day/Year)			e and 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	OI N Of	umber					
Stock Option (Right to	\$8.87	02/28/2020			A		45,000		(4)	0	2/28/2030	Comm Stock		5,000	\$0.00	45,00	0	D	

Explanation of Responses:

- 1. The restricted stock units were granted by the Issuer pursuant to its 2014 Incentive Plan, as amended. One third of the restricted stock units will vest on each of the first, second and third anniversaries of the grant date.
- 2. Includes 1,500 shares of the Issuer's common stock purchased on June 28, 2019 and 1,500 shares of the Issuer's common stock purchased on December 31, 2019, each under the Issuer's Amended and Restated 2014 Employee Stock Purchase Plan.
- 3. This sale was made 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, 2019.
- 4. The options were granted by the Issuer pursuant to its 2014 Incentive Plan, as amended. The options will vest over four years: 25% of the options will vest on the first anniversary of the grant date with the remaining 75% vesting in equal quarterly installments thereafter.

Remarks:

/s/ Nicole R. Hadas, attorneyin-fact for Jason A. Amello

03/02/2020

** 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.