OUTPERFORM

Jason M. Gerberry, JD (617) 918-4549 Jason.Gerberry@Leerink.com

Derek C. Archila (617) 918-4851

Derek.Archila@Leerink.com



1,451.01

0.0%

Reason for report:

ESTIMATE CHANGE

ARDELYX, INC.

Tenapanor Ph. 2 Data Mixed & Likely Extend Time to Market; Lowering PT \$32/shr

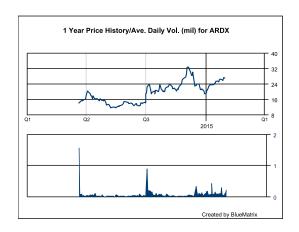
- Bottom Line: We are lowering our price target to \$32/share (from \$36/share) based on mixed Ph. 2 data for tenapanor in ESRD-Pi (hyperphosphatemia) which included statistically significant efficacy but higher-than-expected (undisclosed) rates of diarrhea. As a result, we are pushing out our timelines for the ESRD-Pi and CKD (chronic kidney disease) indications by 1 year (2019E) and 2 years (2021E), respectively. Going forward, for tenapanor, we see a drug that has now demonstrated efficacy in two high value indications which should motivate partner AZN's (MP) to continue investing behind the program. Next up in 2Q'15 ARDX will provide an update on Ph. 2 data for tenapanor in CKD (chronic kidney disease), after which we'd expect further updates on tenapanor clinical development plan. We remain OP-rated.
- We believe today's sell-off is overdone. We believe today's ARDX sell-off (-29%) was overdone for three reasons: (1) tenapanor established efficacy in ESRD--Pi pts, which was statistically significant and demonstrated a dose-related decrease in serum phosphate; (2) ARDX mgmt. indicated rates of diarrhea are not ideal, but remain optimistic about the viability of the program; (3) tenapanor has now demonstrated efficacy in two indications with large markets, irritable bowel syndrome (IBS) and end-stage renal disease (ESRD). Although the brevity of ARDX's press release raised investor concerns, we ultimately believe any "show stopping" rates of adverse event would have required greater specificity in the PR. Our updated view is that additional Ph. 2 work will be required to identify dosing strategy that can mitigate the rate of diarrhea in renal disease patients. We now forecast tenapanor time to market for ESRD-Pi and CKD in 2019 and 2021, respectively. We now value ESRD-Pi and CKD at ~\$5 and ~\$9, respectively, of our \$32/share price target.
- We expect AZN will determine the next steps for the tenapanor platform after the Ph. 2 CKD data read out in 2Q'15. At present, mgmt. believes it is too early to know whether material updates on the tenapanor program will be provided on the 4Q'14 CC. We believe AZN will likely assess the full set of Ph. 2 data across the three indications (ESRD-Pi, CKD, and IBS-C) to determine the path forward for each of the programs. Mgmt noted more detailed ESRD-Pi data may be presented later this year at a medical meeting, assuming AZN chooses to publish.
- Tenapanor's profile in IBS-C remains attractive and we view it as a pot'l competitor to Linzess. According to ARDX, AZN remains interested in the IBS-C indication for tenapanor and continues to perform diligence on this opportunity. We view IBS-C as a ~\$1.5b market opportunity for Linzess by '20E and see room for an additional market entrant with a differentiated profile and strong mktg presence.

Key Stats:	(NASDAQ:ARDX)

S&P 600 Health Care Index:

Dividend Yield:

Price:		\$19.25
Price Target:	\$	32.00 from \$36.00
Methodology:	Sum-of-the-parts D	OCF analysis, 15% discount rate
52 Week High:		\$35.48
52 Week Low:		\$11.37
Shares Outstandi	ng (mil):	18.8
Market Capitaliza	tion (mil):	\$361.9
Book Value/Share	e :	\$0.00
Cash Per Share:		\$5.80
Net Debt to Total	Capital:	0%
Dividend (ann):		\$0.00



Dec Yr	1Q	2Q	3Q	4Q	FY Rev	1Q	2Q	3Q	4Q	FY EPS	P/E
2013A					29.0					(0.65)	NM
2014E	8.6A	9.1A	7.6A	7.7	33.0	(0.23)A	0.18A	0.00A	(0.20)	(0.17)	NM
2015E	8.7	19.3	10.3	11.7	50.0	(0.17)	0.30	(0.10)	(0.20)	(0.12)	NM
2016E					60.0					0.45	42.8x

Source: Company Information and Leerink Partners LLC Research

Revenue in \$MM.



INVESTMENT THESIS

We rate ARDX with an Outperform rating and a \$32 price target (from \$36) in 12 months. ARDX is partnered with AZN on its lead program, tenapanor, a small molecule inhibitor of NHE3, which is one of the main transporters of sodium in the GI tract. With emerging data suggesting maintenance of a low sodium diet can provide therapeutic benefit in kidney disease patients, tenapanor holds the promise of addressing an important unmet need in the multibillion dollar kidney disease market, as well as potential utility in constipation predominant irritable bowel syndrome (IBS-C). While AZN owns WW commercialization rights on tenapanor, ARDX may receive up to ~\$225m in development milestones and tiered royalties (in "teens"). Longer term, ARDX plans to invest in its proprietary drug discovery platform and develop wholly owned assets.

CHANGES TO OUR MODEL

EPS & Total Sales Forecasts (2014-20E) (\$MM, except per share data)

Total Sales Forecasts 2014-20E										
	2014E	2015E	2016E	2017E	2018E	2019E	2020E			
New	33	50	60	60	90	19	36			
Old	33	50	60	60	94	33	69			
Difference	-	-	-	-	(4)	(14)	(32)			
Total EPS Forecasts 2014-20E										
	2014E	2015E	2016E	2017E	2018E	2019E	2020E			
New	(0.17)	(0.12)	0.45	0.47	1.56	0.21	0.75			
Old	(0.17)	(0.12)	0.45	0.47	1.71	0.69	1.78			
Difference	-	-	-	-	(0.15)	(0.48)	(1.03)			
		Dilu	ted share c	ount 2014-2	20E					
	2014E	2015E	2016E	2017E	2018E	2019E	2020E			
New	18	21	21	24	24	25	25			
Old	18	21	21	24	24	25	<u>25</u>			
Difference	-	-	-	-	-	-	-			

Source: Leerink Partners, Company Information



PROBABILITY WEIGHTED NPV ANALYSIS OF TENAPANOR PROGRAMS

AZN Partnership	Base
Tenapanor ESRD Pi peak share	30%
Tenapanor launch price/day	\$15
2025 tenap ESRD global sales	860
ESRD % POS	35%
Risk adj NPV tenapanor ESRD	89
Tenapanor CKD peak share	40%
Tenapanor launch price/day	\$15
2025 tenap CKD global sales	3005
CKD % POS	25%
Risk adj NPV tenapanor CKD	164
Tenapanor IBS peak share	5%
Tenapanor launch price/day	\$15
2025 tenap IBS US sales	950
IBS % POS	60%
Risk adj NPV tenapanor IBS	186
Risk Adj AZN Milestones	
Ph 2 b data, \$20m, 50% POS	10
start Ph 3 ESRD, \$50m, 50% POS	25
Est. approval milestone, \$100m, 35% POS	25
NDA filing, \$50m	18
All other, \$2.5m	1
Discounted, risk adj AZN milestones	46
Total NPV of AZN partnership	486
Total NPV of SNY p/s milestones	26

Source: Company info., Leerink Research est.

DISCOUNTED CASH FLOW ANALYSIS

Shares Outstanding	18.8
Net cash	112
Discount Rate	15%

ARDX	Valuation	Pe	r shr	% of value
AZN p/s (risk adj royalties + m'stones)	486	\$	26	79%
SNY p/s (milestones)	26	\$	1	4%
Cash (less near-term burn)	100	\$	5	16%
Total	611	\$	32	100%

Current market price	\$ 19.25
Implied upside/downside	69%

Source: Company info., Leerink Research est.



VALUATION

Our ~\$32/shr price target (from \$36) on ARDX shares is based on our risk-adjusted, sum-of-the-parts DCF analysis through 2025E. We used a 15% discount rate, and we estimate tenapanor will achieve market shares of 30%, 40%, and 5% in the ESRD-Pi, sodium, and fluid overload chronic kidney disease (CKD) and IBS-C indications, respectively.

RISKS TO VALUATION

Risks include: (1) tenapanor drives our valuation and clinical/regulatory failure would significantly impact our valuation; and (2) AZN may not commit to funding all the currently envisioned indications, depending on strength of future data.

ARDELYX, INC. February 2, 2015

ARDX Annual P&L Summary (Adj. Basis) (figures in \$m, except per share data)

	2012A	2013	1Q14	2Q14	3Q14	4Q14E	2014E	1Q15E	2Q15E	3Q15E	4Q15E	2015E	2016E	2017E	2018E	2019E	2020E	2021E	2022E	2023E	19-23E
Tenapanor ESRD	-	-	•	-	-	-	-	-	-	-	-	-	-	-	-	4	11	21	29	37	36%
Tenapanor CKD Tenapanor IBS	-	-	-	-	-	-		•	•	•	-	-	-	-	-	15	25	17 46	35 62	54 65	na 23%
Total tenapanor royalties		-				-	- 1				-	-	-		5	19	36	85	126	155	35%
Licensing revenue	2	8	3.2	0.5	4.8	4.5	19	1.2	4.0	1.3	1.2	5			•	• •					
Collaborative development revenue	2	21	5.3	6.5 2.6	2.8	4.5 3.2	14	7.5	1.3 8.0	9.0	10.5	35	35	35	35						na na
AZN milestones	-	-	-	-	-	-		-	10	-	-	10	25	25	50			-		-	na
Total Revenue (MM)	5	29	8.6	9.1	7.6	7.7	33	8.7	19.3	10.3	11.7	50	60	60	90	19	36	85	126	155	35%
% y/y growth	na	na	na	na	na	na	na	na	na	na	na	na	na	nm	50%	-79%	88%	132%	49%	24%	0070
COGS	-	-	-			-					-	-			-	-	-	-		-	na
% of sales	0	0%	na	na	na	na	0%	na	na	na	na	0%	0%	0%	0%	0%	0%	0%	0%	0%	na
Gross Income	5.4	28.9	8.6	9.1	7.6	7.7	33.0	8.7	19.3	10.3	11.7	50.0	60	60	90	19	36	85	126	155	35%
% of net sales	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Discovery research	6.3	7.7	2.4	2.6	2.5	2.0	9.4	2.3	2.4	2.4	2.4	9.5	9.5	8.0	8.0	8.0	8.0	8.0	8.0	8.0	0%
Clinical development expense - tenapanor	2.0	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-	-	na
AZN collaboration dev expense	1.9	20.3	5.3	2.6	3.2	6.9	18.0	8.6	8.8	8.6	9.0	35	35	35	35	-	-	-	-	-	na
Total R&D % of sales	10.2 188%	28.1 nm	7.6 89%	5.2 57%	5.7 75%	8.9 115%	27.4 83%	10.9 125%	11.2 58%	11.0 107%	11.4 97%	44.5 89%	44.5 74%	43.0 72%	43.0 48%	8.0 <i>41%</i>	8.0 22%	8.0 <i>9%</i>	8.0 <i>6%</i>	8.0 5%	0%
G&A	4.0	3.7	1.4	1.2	1.8	1.6	6.0	1.4	1.2	1.3	3.1	7.0	7.5	7.5	7.5	7.5	7.5	7.5	7.5	7.5	0%
% of sales	75%	13%	na	na	na	na	18%	na	na	na	na.i	14%	12%	12%	7.5 8%	39%	21%	9%	6%	5%	076
Selling & Marketing		.070	-	-	-	-	.0,0	-	-	-	-		.270	.270	-	-		-	-	-	na
Total operating expenses	14.2	31.8	9.0	6.4	7.5	10.5	33.4	12.3	12.4	12.3	14.5	51.5	52.0	50.5	50.5	15.5	15.5	15.5	15.5	15.5	0%
Operating (loss)/gain	(8.8)	(2.9)	(0.5)	2.8	0.1	(2.8)	(0.4)	(3.6)	6.9	(2.0)	(2.8)	(1.5)	8.0	9.5	39.7	3.9	20.9	69.0	110.1	139.7	67%
% of sales	-163%	nm	na	na	na	na	-1%	na	na	na	na	-3%	13%	16%	44%	20%	57%	82%	88%	90%	01 /0
Other income	(1.0)	(3.6)	(2.6)	1	(0)	(1.0)	(2.6)	(0.25)	(0.25)	(0.25)	(0.25)	(1.0)									na
Intererest expense/income	(1.0)	(0.0)	(2.0)		-	(1.0)	(2.0)	0.02	0.02	0.02	0.05	0.1	1.3	1.5	2.1	2.3	2.6	3.4	4.3	5.3	23%
Net financial expense	(1.0)	(3.6)	(2.6)	1.0	(0)	(1.0)	(2.6)	(0.2)	(0.2)	(0.2)	(0.2)	(0.9)	1.3	1.5	2.1	2.3	2.6	3.4	4.3	5.3	13%
Pre-tax Income	(9.8)	(6.4)	(3.1)	3.8	0.1	(3.8)	(3.0)	(3.8)	6.7	(2.2)	(3.0)	(2.4)	9.3	11.0	41.8	6.1	23.6	72.4	114.5	145.0	57%
% Pre-tax Margin	nm	nm	nm	nm	nm	nm	nm	nm	nm	nm	nm	nm	nm	18.4%	46.4%	31.7%	64.7%	85.7%	91.1%	93.5%	31 /0
Taxes (benefit)	_	0.1		_	_	_					_	_	_		4.2	0.9	4.7	18.1	34.3	50.7	77%
% Tax rate	0.0%	0.0%				-	0.0%				-	0.0%	0.0%	0.0%	10.0%	15.0%	20.0%	25.0%	30.0%	35.0%	,0
Net Income/(loss) (MM)	(10)	(7)	(3.1)	3.8	0.1	(3.8)	(3.0)	(3.8)	6.7	(2.2)	(3.0)	(2)	9	11	38	5	19	54	80	94	51%
% of net sales	NM	NM	N/M	41%	N/M	N/M	NM	N/M	34%	N/M	N/M	nm	15.6%	18.4%	41.7%	26.9%	51.8%	64.3%	63.8%	60.7%	0.70
Diluted EPS	(\$1.26)	(\$0.65)	(\$0.23)	\$0.18	\$0.00	(\$0.20)	(\$0.17)	(\$0.17)	\$0.30	(\$0.10)	(\$0.20)	(\$0.12)	\$0.45	\$0.47	\$1.56	\$0.21	\$0.75	\$2.12	\$3.06	\$3.53	49%
Y/Y	NM	NM					NM					NM	NM	5%	234%	-86%	254%	182%	45%	15%	
Weighted Avg Diluted Shares (MM)	7.8	10.2	13.3	20.3	19.1	18.8	17.9	22.3	22.5	22.6	14.9	20.6	21.0	23.7	24.2	24.7	25.2	25.7	26.2	26.7	1%
% growth	NM	31%					76%					15%	2%	13%	2%	2%	2%	2%	2%	2%	

Source: Leerink Partners, LLC estimates and company reports



Disclosures Appendix Analyst Certification

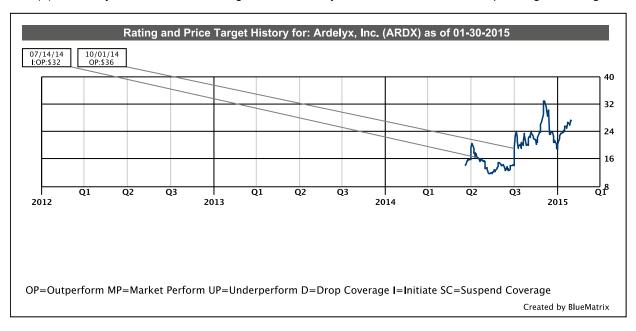
I, Jason M. Gerberry, JD, certify that the views expressed in this report accurately reflect my views and that no part of my compensation was, is, or will be directly related to the specific recommendation or views contained in this report.

Valuation

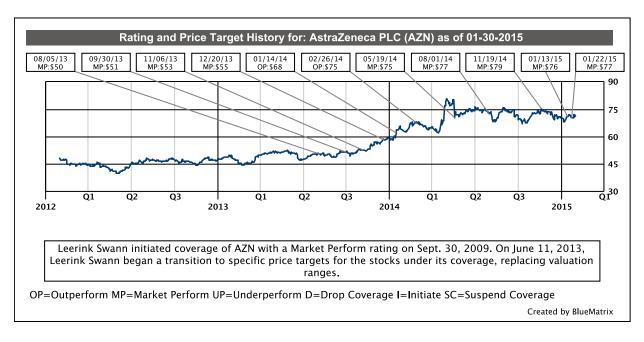
Our ~\$32/shr price target on ARDX shares is based on our risk-adjusted, sum-of-the-parts DCF analysis through 2025E. We used a 15% discount rate, and we estimate tenapanor will achieve market shares of 30%, 40%, and 5% in the ESRD-Pi, sodium, and fluid overload chronic kidney disease (CKD) and IBS-C indications, respectively.

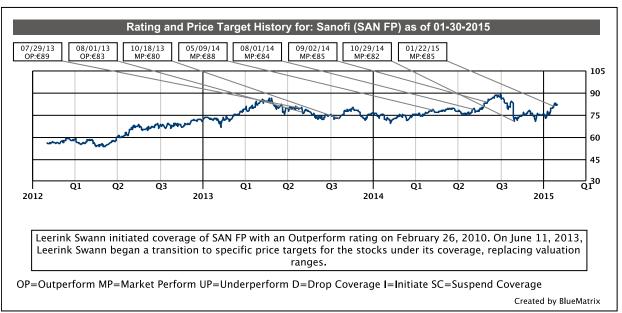
Risks to Valuation

Risks include: (1) tenapanor drives our valuation and clinical/regulatory failure would significantly impact our valuation; and (2) AZN may not commit to funding all the currently envisioned indications, depending on strength of future data.











Distribution of Ratings/Investment Banking Services (IB) as of 12/31/14 IB Serv./Past Mo							
Rating	Count	Percent	Count	Percent			
BUY [OP]	150	70.00	61	41.00			
HOLD [MP]	64	30.00	0	0.00			
SELL [UP]	0	0.00	0	0.00			

Explanation of Ratings

Outperform (Buy): We expect this stock to outperform its benchmark over the next 12 months.

<u>Market Perform (Hold/Neutral):</u> We expect this stock to perform in line with its benchmark over the next 12 months.

<u>Underperform (Sell):</u> We expect this stock to underperform its benchmark over the next 12 months. The degree of outperformance or underperformance required to warrant an Outperform or an Underperform rating should be commensurate with the risk profile of the company.

For the purposes of these definitions the relevant benchmark will be the S&P 600® Health Care Index for issuers with a market capitalization of less than \$2 billion and the S&P 500® Health Care Index for issuers with a market capitalization over \$2 billion.

Important Disclosures

This information (including, but not limited to, prices, quotes and statistics) has been obtained from sources that we believe reliable, but we do not represent that it is accurate or complete and it should not be relied upon as such. All information is subject to change without notice. This is provided for information purposes only and should not be regarded as an offer to sell or as a solicitation of an offer to buy any product to which this information relates. The Firm, its officers, directors, employees, proprietary accounts and affiliates may have a position, long or short, in the securities referred to in this report, and/or other related securities, and from time to time may increase or decrease the position or express a view that is contrary to that contained in this report. The Firm's salespeople, traders and other professionals may provide oral or written market commentary or trading strategies that are contrary to opinions expressed in this report. The Firm's proprietary accounts may make investment decisions that are inconsistent with the opinions expressed in this report. The past performance of securities does not guarantee or predict future performance. Transaction strategies described herein may not be suitable for all investors. Additional information is available upon request by contacting the Editorial Department at One Federal Street, 37th Floor, Boston, MA 02110.

Like all Firm employees, analysts receive compensation that is impacted by, among other factors, overall firm profitability, which includes revenues from, among other business units, Institutional Equities, and Investment Banking. Analysts, however, are not compensated for a specific investment banking services transaction. MEDACorp is a network of healthcare professionals, attorneys, physicians, key opinion leaders and other specialists accessed by Leerink and it provides information used by its analysts in preparing research.

In the past 12 months, the Firm has received compensation for providing investment banking services to Ardelyx, Inc. .

Leerink Partners LLC makes a market in Ardelyx, Inc.

ARDELYX, INC. February 2, 2015



Leerink Partners LLC is willing to sell to, or buy from, clients the common stock of AstraZeneca PLC and Sanofi on a principal basis.

Leerink Partners LLC has acted as the manager for a public offering of Ardelyx, Inc. in the past 12 months.

©2015 Leerink Partners LLC. All rights reserved. This document may not be reproduced or circulated without our written authority.

	Leerink Partners L	LC Equity Researc	ch				
Director of Facility Become	John J. Cullivan CEA	(047) 040 4075	نمان المان والمان المان المان المان والمان والمان والمان والمان المان والمان والمان والمان والمان والمان والمان				
Director of Equity Research	John L. Sullivan, CFA	(617) 918-4875	john.sullivan@leerink.com				
Associate Director of Research	Alice C. Avanian, CFA	(617) 918-4544	alice.avanian@leerink.com				
Healthcare Strategy	John L. Sullivan, CFA	(617) 918-4875	john.sullivan@leerink.com				
	Alice C. Avanian, CFA	(617) 918-4544	alice.avanian@leerink.com				
Pietochnology	Howard Liona Dh D	(617) 010 4057	howard liang@laarink.com				
Biotechnology	Howard Liang, Ph.D.	(617) 918-4857	howard.liang@leerink.com				
	Joseph P. Schwartz	(617) 918-4575	joseph.schwartz@leerink.com				
	Michael Schmidt, Ph.D.	(617) 918-4588	michael.schmidt@leerink.com				
	Gena Wang, Ph.D., CFA	(212) 277-6073	gena.wang@leerink.com				
	Paul Matteis	(617) 918-4585	paul.matteis@leerink.com				
	Jonathan Chang, Ph.D.	(617) 918-4015	jonathan.chang@leerink.com				
	Richard Goss	(617) 918-4059	richard.goss@leerink.com				
Life Science Tools	Dan Leonard	(212) 277-6116	dan.leonard@leerink.com				
and Diagnostics	Justin Bowers, CFA	(212) 277-6066	justin.bowers@leerink.com				
		(0.17) 0.10 10.11	, , , , , , , , ,				
Pharmaceuticals/Major	Seamus Fernandez	(617) 918-4011	seamus.fernandez@leerink.com				
	Aneesh Kapur	(617) 918-4576	aneesh.kapur@leerink.com				
Specialty Pharmaceuticals	Jason M. Gerberry, JD	(617) 918-4549	jason.gerberry@leerink.com				
	Derek C. Archila	(617) 918-4851	derek.archila@leerink.com				
Medical Devices, Cardiology	Danielle Antalffy	(212) 277-6044	danielle.antalffy@leerink.com				
medical bevices, cardiology	Puneet Souda	(212) 277-6091	puneet.souda@leerink.com				
& Orthopedics	Richard Newitter	(212) 277-6088	richard.newitter@leerink.com				
a crinopoulos	Ravi Misra	(212) 277-6049	ravi.misra@leerink.com				
	ravi Miora	(212) 277 0040	Tavi.mora@iocimik.com				
Healthcare Services	Ana Gupte, Ph.D.	(212) 277-6040	ana.gupte@leerink.com				
Healthcare Technology	David Larsen, CFA	(617) 918-4502	david.larsen@leerink.com				
& Distribution	Christopher Abbott	(617) 918-4010	chris.abbott@leerink.com				
Digital Health	Steven Wardell	(617) 918-4097	steven.wardell@leerink.com				
Sr. Editor/Supervisory Analyst	Mary Ellen Eagan, CFA	(617) 918-4837	maryellen.eagan@leerink.com				
Supervisory Analysts	Robert Egan		bob.egan@leerink.com				
· · · · ·	Amy N. Sonne		amy.sonne@leerink.com				
Editorial	Cristina Diaz-Dickson	(617) 918-4548	cristina.diaz-dickson@leerink.com				
Research Associate	Carmen Augustine	(212) 277-6012	carmen.augustine@leerink.com				

New York 299 Park Avenue, 21st floor New York, NY 10171 (888) 778-1653 Boston One Federal Street, 37th Floor Boston, MA 02110 (800) 808-7525

San Francisco 201 Spear Street, 16th Floor San Francisco, CA 94105 (800) 778-1164