FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
hours per response:	0.5								

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

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* Frohlich Tom						2. Issuer Name and Ticker or Trading Symbol CHINOOK THERAPEUTICS, INC. [KDNY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify						
	(Last) (First) (Middle) C/O CHINOOK THERAPEUTICS, INC. 400 FAIRVIEW AVE. NO., 9TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 12/13/2022								Chief Operating Officer					
(Street) SEATTLE WA 98109 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	· /					
(9)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/You				tion	2A. Deemed Execution Date,		ed Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amou Securiti Benefic Owned		nt of es ally Following	Form (D) o	n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)		
Common Stock 12/13/202					2022	!2			M		10,000	Α	\$0 .	.42	153,907			D		
Common Stock 12/13/202				2022	22		S ⁽¹⁾		10,000	D	\$25.0	005(2)	143	143,907		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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)			Expir	te Exer ation D th/Day/		7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		D	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
		Code V (A) (D) Date Exercis						cisable	Expiration Date	Title	Amor or Numl of Share	ber								
Employee Stock Option (right to buy)	\$0.42	12/13/2022			М			10,000	((3)	03/17/2030	Common Stock	n 10,0	000	\$0.00	43,847	,	D		

Explanation of Responses:

- 1. The transactions reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$25.00 to \$25.015, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth herein.
- 3. The stock option vested as to 25% of the total shares on March 6, 2021, and thereafter vests as to 1/48 of the total shares monthly until fully vested, subject to the Reporting Person's provision of service to the Issuer on each vesting date.

Remarks:

/s/ Kirk Schumacher, Attorney-12/15/2022 in-Fact

** 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.