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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden

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1. Name and Addre	JCE D		2. Issuer Name and Ticker or Trading Symbol <u>ARROWHEAD PHARMACEUTICALS</u> , <u>INC.</u> [ARWR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below)		
(Last) (First) (Middle) 225 S. LAKE AVENUE			3. Date of Earliest Transaction (Month/Day/Year)	Chief Operating Officer		
225 5. LAKE P	VENUE		01/14/2019			
SUITE 1050						
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable		
(Street)				Line)		
PASADENA	CA	91101		X Form filed by One Reporting Person		
		51101		Form filed by More than One Reporting Person		
(City)	(State)	(Zip)				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Of (D) (Instr. 3, 4 and 5) Code (Instr.			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	01/14/2019		М		11,666	Α	\$2.62	1,110,022	D	
Common Stock	01/14/2019		М		1,000	Α	\$ <mark>6.</mark> 2	1,111,022	D	
Common Stock	01/14/2019		S ⁽¹⁾		42,666	D	\$14.4 ⁽²⁾	1,068,356	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)		of Deri Sec Acq (A) (Disp of (I	umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exerci Expiration Dat (Month/Day/Ye	te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$2.62	01/14/2019		М			11,666	10/01/2012 ⁽³⁾	09/28/2022	Common Stock	11,666	\$0.00	544,334	D	
Stock Option (right to buy)	\$6.2	01/14/2019		М			1,000	09/28/2009	09/28/2019	Common Stock	1,000	\$0.00	543,334	D	

Explanation of Responses:

1. These shares were sold pursuant to a 10b5-1 plan adopted by the reporting person.

2. The price reported on Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$14.03 to \$14.57, inclusive. The reporting person undertakes to provide to Arrowhead Pharmaceuticals, Inc., 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 in this footnote of this Form 4.

3. Represents first vesting date. Option vested over four years from date of grant.

Remarks:

/s/ Bruce Given

01/16/2019

** 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.