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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to<br>Section 16. Form 4 or Form 5<br>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

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| hours per response:     | 0.5       |

| ,   | Kenneth Allen |                | 2. Issuer Name and Ticker or Trading Symbol<br><u>ARROWHEAD PHARMACEUTICALS</u> ,<br><u>INC.</u> [ ARWR ] |                        | tionship of Reporting Perso<br>all applicable)<br>Director<br>Officer (give title<br>below)     | on(s) to Issuer<br>10% Owner<br>Other (specify<br>below) |  |
|---|---------------|----------------|---|------------------------|---|--|--|
| (Last) (First) (Middle)<br>225 S. LAKE AVENUE<br>SUITE 1050 |               | (midule)       | 3. Date of Earliest Transaction (Month/Day/Year)<br>03/05/2018  |                        | Chief Financial Officer   |  |  |
| (Street)<br>PASADENA<br>(City)                              | CA<br>(State) | 91101<br>(Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year)  | 6. Indiv<br>Line)<br>X | idual or Joint/Group Filing (<br>Form filed by One Repor<br>Form filed by More than (<br>Person | ting Person  |  |

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

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Transaction<br>Code (Instr. |   |        |               |        | Securities<br>Beneficially         | (D) or Indirect | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|---------------------------------|--|---|-----------------------------|---|--------|---------------|--------|------------------------------------|-----------------|---|
|                                 |  |   | Code                        | v | Amount | (A) or<br>(D) | Price  | Transaction(s)<br>(Instr. 3 and 4) |                 | (Instr. 4)  |
| Common Stock                    | 03/05/2018                                 |   | <b>F</b> <sup>(1)</sup>     |   | 8,208  | D             | \$6.66 | 310,815                            | D               |   |

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|   |   |  |   |                              |   |  |   | -  |                    |           |  |  |  |  |  |
|---|---|--|---|------------------------------|---|--|---|--|--------------------|-----------|--|--|--|--|--|
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | 5. Nu<br>of<br>Deriv<br>Secu<br>Acqu<br>(A) or<br>Dispo<br>of (D)<br>(Instr<br>and 5 | ative<br>rities<br>ired<br>osed<br>. 3, 4 | Expiration Date<br>(Month/Day/Year)<br>sed<br>3, 4 |                    | Amount of |  |  | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |   |  |   | Code                         | v | (A)  | (D)                                       | Date<br>Exercisable                                | Expiration<br>Date | Title     | Amount<br>or<br>Number<br>of<br>Shares |  |  |  |  |

Explanation of Responses:

1. This transaction reflects the payment of the tax liability by withholding securities incident to the vesting of restricted stock units on 03/05/2018.

#### **Remarks:**

### /s/ Ken Myszkowski

03/05/2018 Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.