FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSH |
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| OMB APPRO | VAL | | | | | |
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| OMB Number: 3235 | | | | | | |
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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* PERRY MICHAEL S | | | | | AF | 2. Issuer Name and Ticker or Trading Symbol ARROWHEAD PHARMACEUTICALS, INC. [ARWR] | | | | | | | | | | all app | licable) | Person(s) to Issu 10% Ow Other (s) | | wner |
|--|---|--|------------------------------|--|---|--|--|-----|------|---|--------------------|--|--|---------------------|--|---|-----------------------|--|---|------|
| (Last) (First) (Middle) 225 S. LAKE AVE SUITE 1050 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2018 | | | | | | | | | | belov | | | elow) | | |
| (Street) PASADENA CA 91101 (City) (State) (Zip) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | Day/Year) Exe | | P.A. Deemed Execution Date, f any Month/Day/Year) | | | | Disposed | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | l and Sec Ben | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | | A) or D) | or Price | | Transa | action(s) 3 and 4) | | | |
| Common Stock 01/0: | | | | | /2018 | | | | A | | 30,000 | (1) | A | \$ <mark>0</mark> . | 0.00 185,000 | | | 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) | Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, or Exercise (Month/Day/Year) if any | | 4. Transa Code (8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ative rities ired osed | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | 8. Price of Derivative Security (Instr. 5) | | 9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | | | Expiration Date | Numbe of Title Shares | | | | | | | | |

Explanation of Responses:

1. Represents shares underlying a restricted stock unit, which shares will vest in one installment on the first anniversary of the grant date.

Remarks:

/s/Michael Perry

01/03/2018

** 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.