FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

hours per response:

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 7									
1. Name and Address of Reporting Person* GIVEN BRUCE D						2. Issuer Name and Ticker or Trading Symbol ARROWHEAD PHARMACEUTICALS,									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GIVEN	BRUCE	<u>. </u>														Direc	tor	10	% Owner	
(Local) (Circle) (Middle)					- 111	INC. [ARWR]													her (specify low)	
(Last) (First) (Middle)				3. D	3. Date of Earliest Transaction (Month/Day/Year)									Chief Operating Officer						
225 S. LAKE AVENUE					03/05/2018											F				
SUITE 1	050																			
,					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)															ine)					
PASADE	NA C	A 9	91101												X	Form	n filed by One	e Reporting	erson	
					-										Form filed by More than One Reporting Person					
(City)	(S	tate) (Zip)																	
		Tabl	e I - No	n-Deriv	<i>r</i> ative	Se	curitie	s Acc	quired,	Dis	posed o	f, oı	r Ben	efici	ally C	wne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution		Date,			ties Acquired (A) I Of (D) (Instr. 3, 4			4 and Sec Ben Owr		cially I Following	6. Ownersh Form: Direc (D) or Indir (I) (Instr. 4)	of Indirect ect Beneficia Ownersh	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	, ·	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	(instr. 4)
Common Stock 03/05/2					5/2018	/2018			S ⁽¹⁾		20,000	0	D \$6.7		73 ⁽²⁾ 908,356		D			
		Та									osed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	Code (Instr.		n of		6. Date E Expiratio (Month/E		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Prio Deriva Secur (Instr.	ative ity	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	hip of Indired Beneficia Ownersh ect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)		Date Exercisable		Expiration Date	Title	or Nui of	ount nber ires						

Explanation of Responses:

- 1. Open market sale pursuant to a 10b5-1 trading plan adopted by the Reporting Person in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934, as amended. The sale was made to generate proceeds to cover the tax liability incident to the vesting of restricted stock units on 03/05/2018.
- 2. The price reported on Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$6.65 to \$6.77, inclusive. The reporting person undertakes to provide to Arrowhead Pharmaceuticals, Inc., any security holder of 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.

Remarks:

/s/ Bruce Given

03/05/2018

** 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.