Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* GIVEN DOUGLAS B						2. Issuer Name and Ticker or Trading Symbol ARROWHEAD PHARMACEUTICALS, INC. [ARWR]									tionship of Reporting all applicable) Director Officer (give title		10% Ow Other (s)		wner
(Last) (First) (Middle) 177 E. COLORADO BLVD SUITE 700					3. Date of Earliest Transaction (Month/Day/Year) 06/22/2021									below			below)		
(Street) PASADENA CA 91105 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									Line) X	Form filed by More than One Reporting Person				
Date				2. Transacti	on	2A. De Execu if any	eemed Ition Date,		3. Transaction Code (Instr. 8)		4. Securities Acquire Disposed Of (D) (Ins		ed (A) d	or -	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
Common Stock				06/22/2021				Code	v	Amount 4,500	(A) or (D)	Price).21 ⁽¹⁾	Transaction(s) (Instr. 3 and 4)			D	(Instr. 4)	
Common Stock											1,500		400			3,875		ı	By Trust ⁽³⁾
Common Stock															12,500				By Trust ⁽⁴⁾
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)	Execu	eemed Ition Date, h/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date		Amou or Numb of Share	er					

Explanation of Responses:

- 1. The price reported on Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$88.90 to \$89.38, 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.
- 2. Includes previously reported shares of common stock underlying Restricted Stock Units granted to the Reporting person which are subject to certain vesting conditions.
- 3. Represents securities owned directly by Anne Given Trust ("AG Trust"). Mr. Given, as co-trustee of AG Trust, may be deemed to beneficially own the securities owned directly by AG Trust.
- 4. Represents securities owned directly by Katherine Given Ligtenberg Trust ("KGL Trust"). Mr. Given, as co-trustee of KGL Trust, may be deemed to beneficially own the securities owned directly by KGL Trust.

Remarks:

/s/Douglass Given

** 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.