FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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**OMB APPROVAL** 

OMB Number:	3235-0287								
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## 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

Name and Address of Reporting Person*     OLUKOTUN ADEOYE Y					2. Issuer Name and Ticker or Trading Symbol ARROWHEAD PHARMACEUTICALS, INC. [ ARWR ]								k all app Direc	tor	ig Persor	10% O	vner		
(Last) (First) (Middle) 177 E COLORADO BLVD STE 700					3. Date of Earliest Transaction (Month/Day/Year) 12/18/2024									below	er (give title v)		Other (s	specify	
(Street) PASADENA CA 91105 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Form filed by One Reporting Perso Form filed by More than One Reporterson				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					tion 2A. Deemed Execution Date,			uired, Disposed of, or Benef  3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			A) or	5. Amo Securi Benefi Owned	ount of ties cially I Following	Form: D (D) or In	Ownership orm: Direct 0) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
Common Stock 12/18/20						024			Code	v	Amount 16.733 <sup>(1)</sup>	(A) (D)		Price \$22.99	(Instr.	ed action(s) 3 and 4)	D		(Instr. 4)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Tal  3. Transaction Date (Month/Day/Year)	3A. Dee Execut	(e.g., pı		alls, v	5. Nu of Deriv Secu Acqu (A) o Dispo	ants, umber vative urities uired or osed )) r. 3, 4	optio	ns, o		7. Titl Amou Secur	e and int of rities rlying ative rity (In	8. F Del See (Ins	<u> </u>		Ow For Dire or I (I) (	nership	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

## **Explanation of Responses:**

1. Represents shares underlying restricted stock units, which shares will vest in one installment on the first anniversary date.

## Remarks:

/s/Adeoye Olukotun

12/20/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.