FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
---------------	-----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response.									

	tion 1(b).	ide. See		Filed							es Exchang npany Act o		f 1934			nours	per res	sponse:	0.5
Name and Address of Reporting Person* Waddill William D.				2. Issuer Name and Ticker or Trading Symbol ARROWHEAD PHARMACEUTICALS, INC. [ARWR]										k all app Direc	licable) tor	ng Person(s) to Issuer 10% Owner Other (speci below)			
(Last) (First) (Middle) 177 E. COLORADO BLVD SUITE 700				3. Date of Earliest Transaction (Month/Day/Year) 01/07/2022										Office below	er (give title			specify	
(Street) PASADE (City)			1105 Zip)		4. If A	Amend	ment,	Date o	f Origina	al Filed	d (Month/Da	y/Year)		6. Indi Line) X	Form	filed by On filed by Mo filed by Mo	e Repo	orting Perso	on
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Exec y/Year) if any		Deemed cution Date, ny nth/Day/Year)				es Acquired (A Of (D) (Instr. 3,			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pri	се		action(s) 3 and 4)			(Instr. 4)
Common Stock 01/07				01/07/2	2022				A		6,400(1)	A	\$(0.00	32,150			D	
		Tal									osed of, o				Owne	t		,	
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution D curity or Exercise (Month/Day/Year) if any		ion Date,	Date, Transaction Code (Instr.		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Sei (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: y Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoun or Numbe of Shares	r					

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/ William Waddill

01/07/2022

** 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.