Edgar Filing: GIVEN BRUCE D - Form 4

GIVEN BRU Form 4	JCE D										
March 01, 20)19										
FORM	14								OMB AF	PROVAL	
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. Filed pur inue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> GIVEN BRUCE D			2. Issuer Name and Ticker or Trading Symbol ARROWHEAD PHARMACEUTICALS, INC. [ARWR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) (First) (Middle) 225 S. LAKE AVENUE, SUITE 1050			3. Date of Earliest Transaction (Month/Day/Year) 03/01/2019					XOfficer (give titleOther (specify below) below) Chief Operating Officer			
PASADEN	(Street) A, CA 91101	Filed(Mon			ate Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)				~ .		Person			
1.Title of Security (Instr. 3)	(State) 2. Transaction Dat (Month/Day/Year)	e 2A. Deer Execution any	ned	3. Transactic Code (Instr. 8)	4. Securit	ies Ac sposed	quired l of (D)	uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6.	7. Nature of Indirect	
Common Stock	03/01/2019			M	42,500	A		687,106	D		
Common Stock	03/01/2019			S <u>(1)</u>	42,500	D	\$ 19.99 (2)	644,606	D		

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

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 control

Edgar Filing: GIVEN BRUCE D - Form 4

number.

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date Under		7. Title and A Underlying S (Instr. 3 and 4	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Option (right to buy)	\$ 2.01	03/01/2019		М	42,500	06/01/2013 <u>(3)</u>	05/06/2023	Common Stock	42,500

Reporting Owners

Reporting Owner Name / Addres	SS	Relationships						
	Director	10% Owner	Officer	Other				
GIVEN BRUCE D 225 S. LAKE AVENUE SUITE 1050 PASADENA, CA 91101			Chief Operating Officer					
Signatures								
/s/ Bruce Given	03/01/2019							

Date

Explanation of Responses:

- * 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).
- (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 price reported on Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$19.98 to \$20.01, inclusive. The reporting person undertakes to provide to Arrowhead Pharmaceuticals, Inc., any security holder of

- (2) 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.
- (3) Represents first vesting date. Option vested over four years from date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

<u>**</u>Signature of Reporting Person