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Form 4	Brian											
October 23,	2018											
FORM	14 UNITED	STATES						GE CC	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check th if no lon subject to Section 2 Form 4 of Form 5 obligatio	ger o 16. or Filed pu	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									January 31, 2005 Iverage rs per 0.5	
may con <i>See</i> Instr 1(b).	tinue. Section 17			•		Company			935 or Section	L		
(Print or Type)	Responses)											
1. Name and A Leone Peter	Symbol					5. Relationship of Reporting Person(s) to Issuer						
	PHARMACEUTICALS, INC.					Director	ek all applicable)					
(]				below)					· · · · · · · · · · · · · · · · · · ·	e title Other (specify below) tegic Bus. Initiatives		
1050												
				(Month/Day/Year) Aj				A	b. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person			
PASADEN	A, CA 91101							Ē	Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - N	on-I	Derivative S	ecuriti	ies Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		action Date 2A. Deemed (Day/Year) Execution Date, if any (Month/Day/Year)			actic 8)	4. Securitie por Disposed (Instr. 3, 4 a)	d of (D		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6.7. Nature of OwnershipForm:BeneficialDirect (D)Ownership or Indirect(I)(Instr. 4)	Beneficial Ownership	
G				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	10/19/2018			М		30,000	А	\$ 2.79	160,000	D		
Common Stock	10/19/2018			М		34,375	А	\$ 6.15	194,375	D		
Common Stock	10/19/2018			М		66,762	A	\$ 7.75	261,137	D		
Common Stock	10/19/2018			S		131,137	D	\$ 13.49 (1)	130,000 (2)	D		

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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 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)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Options	\$ 2.79	10/19/2018		М	30,000	07/20/2013 <u>(3)</u>	07/20/2023	Common Stock	30,000
Stock Options	\$ 6.15	10/19/2018		М	34,375	01/01/2016(3)	01/01/2026	Common Stock	34,375
Stock Options	\$ 7.75	10/19/2018		М	66,762	03/06/2015(3)	03/06/2025	Common Stock	66,762

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Leone Peter Brian 225 S. LAKE AVENUE SUITE 1050 PASADENA, CA 91101			VP, Strategic Bus. Initiatives				
Signatures							
/s/ Peter Leone 1	0/23/2018						

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

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

shares sold at each separate price within the ranges set forth in this footnote of this Form 4.

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

The price reported on Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$13.10 to \$13.56, 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

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- (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 first vesting date. Option vests 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.