

ARROWHEAD RESEARCH CORP  
Form 3  
January 06, 2014

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF 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

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Lewis David L.</p> <p>(Last) (First) (Middle)</p> <p>ARROWHEAD RESEARCH CORPORATION,Â 225 S. LAKE AVENUE, SUITE 1050</p> <p>(Street)</p> <p>PASADENA,Â CAÂ 91101</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>01/03/2014</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>ARROWHEAD RESEARCH CORP [ARWR]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other</p> <p>(give title below) (specify below)</p> <p>Chief Scientific Officer</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/> Form filed by More than One Reporting Person</p>
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**Table I - Non-Derivative Securities Beneficially Owned**

<p>1. Title of Security</p> <p>(Instr. 4)</p>	<p>2. Amount of Securities Beneficially Owned</p> <p>(Instr. 4)</p>	<p>3. Ownership Form:</p> <p>Direct (D) or Indirect (I)</p> <p>(Instr. 5)</p>	<p>4. Nature of Indirect Beneficial Ownership</p> <p>(Instr. 5)</p>
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

<p>1. Title of Derivative Security</p> <p>(Instr. 4)</p>	<p>2. Date Exercisable and Expiration Date</p> <p>(Month/Day/Year)</p> <p>Date Exercisable Expiration Date</p>	<p>3. Title and Amount of Securities Underlying Derivative Security</p> <p>(Instr. 4)</p> <p>Title Amount or Number of</p>	<p>4. Conversion or Exercise Price of Derivative Security</p>	<p>5. Ownership Form of Derivative Security: Direct (D)</p>	<p>6. Nature of Indirect Beneficial Ownership</p> <p>(Instr. 5)</p>
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				Shares		or Indirect (I) (Instr. 5)	
Stock Option dated 10/21/2011	04/21/2012 <sup>(1)</sup>	10/21/2021	Common Stock	27,500	\$ 4.6	D	Â
Stock Option dated 02/16/2012	03/01/2012 <sup>(2)</sup>	02/16/2022	Common Stock	27,000	\$ 5.19	D	Â
Stock Option dated 09/28/2012	10/01/2012 <sup>(2)</sup>	09/28/2022	Common Stock	25,000	\$ 2.62	D	Â
Stock Option dated 05/06/2013	06/01/2013 <sup>(2)</sup>	05/06/2023	Common Stock	105,000	\$ 2.01	D	Â
Stock Option dated 09/21/2013	10/01/2013 <sup>(2)</sup>	09/21/2023	Common Stock	28,000	\$ 4.75	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Lewis David L. ARROWHEAD RESEARCH CORPORATION 225 S. LAKE AVENUE, SUITE 1050 PASADENA, CA 91101	Â	Â	Â Chief Scientific Officer	Â

## Signatures

David L. Lewis                      01/03/2014  
 \*\*Signature of                      Date  
 Reporting Person

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) Vests 1/8 on six month cliff and balance equally over 42 months
- (2) Vests in 48 equal monthly installments

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.