Instruction 1(b)

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	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  BENNETT C FRANK  (Last) (First) (Middle)						2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [ IONS ]								neck all appl Direc	ationship of Reporting all applicable) Director Officer (give title below)		Person(s) to Issuer 10% Owner Other (speci below)			
(Last) (First) (Middle) C/O IONIS PHARMACEUTICALS, INC. 2855 GAZELLE COURT						3. Date of Earliest Transaction (Month/Day/Year) 11/09/2016								SVP, Antisense Research						
(Street) CARLSE			92010 (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tab	le I - No	on-Deriv	vativ	e Se	curit	ies Ac	quirec	l, Di	sposed o	f, or Be	neficia	ly Owne	d					
Date			Date	Date (Month/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock			11/09/	9/2016		11/09/2016		M <sup>(1)</sup>		5,000(1)	A	\$11.2	7 1	5,803		D				
Common Stock			11/09/	09/2016		11/09/2016		S <sup>(1)</sup>		5,000(1)	D	\$34.08	3(2) 1	0,803		D				
Common Stock			11/09/	9/2016		11/09/2016		M <sup>(1)</sup>		17,805 <sup>(1</sup>	) A	\$11.2	7 2	3,608		D				
Common Stock 11/09			11/09/	2016	2016 11/09/20		/2016	S <sup>(1)</sup> 1		17,805 <sup>(1)</sup> D \$		\$38.54	(3)	10,803		D				
		-	Table II								posed of, convertil			Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution h/Day/Year) if any			e (Instr. S		umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exercisable Expiration Date (Month/Day/Year)		ite	le and 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
						v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares							
Employee Stock Option (right to	\$11.27	11/09/2016	11/09/	/2016	М			22,805	01/04/2	014	01/03/2017	Common Stock	22,805	\$0	0		D			

## **Explanation of Responses:**

- 1. Acquired as a result of exercising a stock option that was scheduled to expire on 1/3/2017. The purchase and sale reported on this Form 4 was effective pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on 9/16/2016.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$34.00 to \$34.30, inclusive. The reporting person undertakes to provide to Ionis Pharmaceuticals, Inc., any security holder of Ionis 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 footnote (2) on this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$38.50 to \$38.60, inclusive. The reporting person undertakes to provide to Ionis Pharmaceuticals, Inc., any security holder of Ionis 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 footnote (3) on this Form 4.

## Remarks:

/s/B. Lynne Parshall, attorneyin-fact

11/11/2016

\*\* 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.