FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* KLEIN JOSEPH III					2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC I IONS								heck all app X Direc	licable)	ng Person(s) to Is: 10% O Other (wner	
	,	MACEUTICALS	(Middle)		02/	3. Date of Earliest Transaction (Month/Day/Year) 02/15/2018							belo			elow)	plicable	
(Street)	BAD C	A	92010		- 4. II -	nament,	Dale (of Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicatine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				n	
(City)	(S		(Zip)															
1. Title of Security (Instr. 3) 2. Transa Date			2. Transa	ction	tion 2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		d (A) or	5. Am Secur Benef Owne	ount of ities icially d Following	6. Owners Form: Dire (D) or Indii (I) (Instr. 4)	ct c ect E	'. Nature of Indirect Beneficial Dwnership		
								Code	v	Amount	(A) or (D)	Price	Report Trans (Instr.	ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 02			02/15/	/2018	2018 02/15/		018	M ⁽¹⁾		1,400(1)	A	\$35.5	53 1	1,339	D			
Common Stock			02/15/	5/2018		02/15/2018		S ⁽¹⁾		1,400(1)	D	\$48.7	5 ⁽²⁾	9,939	D			
Common Stock			02/15/	/15/2018		02/15/2018		M ⁽¹⁾		1,600(1)	A	\$35.5	53 1	1,539	539 D			
Common Stock 02			02/15/	2018	2018 02/15/2018		S ⁽¹⁾		1,600(1)	D	\$49.2	(3)	9,939					
Common Stock													100		I	By son		
		1	able II								oosed of			y Owned	I			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E	med on Date,	4. Transactio Code (Inst 8)		5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and te	7. Title and Amount of Securities Underlying Derivative (Instr. 3 ar	d f g Security	8. Price of Derivative Security (Instr. 5)		Owner Form Direct or Inc. (I) (In		Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to	\$35.53	02/15/2018	02/15	5/2018	M		3,000		07/01/20)18	06/30/2024	Common Stock	3,000	\$0	3,000		D	

Explanation of Responses:

- 1. Acquired as a result of exercising a stock option pursuant to Rule 10b5-1 Trading Plan. The purchase and sale reported on this Form 4 was effective pursuant to Rule 10b5-1 Trading Plan adopted by the reporting person on 10/11/2017.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$48.31 to \$49.02, 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 \$49.03 to \$49.37, 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/Patrick R. O'Neil, attorney-

02/15/2018

in-fact

** 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.