FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
rusimigton,	D.O.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* WENDER JOSEPH H						2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC IONS										ionship of Reportir all applicable) Director		10% Ov	wner		
(Last) 2855 GA	(F AZELLE CO	•	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/17/2023										Officer (give title below)		Other (s below)	specify		
(Street) CARLSBAD CA 92010					4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Tabl	e I - No	n-Deriv	ative	Sec	uriti	es Ac	quired, I	Disp	osed	of, or E	Bene	eficial	lly Owne	ed					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Ex if a	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dis		Dispose	ecurities Acquired (A) posed Of (D) (Instr. 3,			Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
					Code	v	Amoun	nt (A) or (D)		Price	Report Transa (Instr. 3	ction(s)			(Instr. 4)						
Common Stock 07/17/					7/2023	2023		M ⁽¹⁾		1,777	7(1)	A \$0.		106,746			I	by Trust			
Common Stock 07/17/			7/2023	2023			M ⁽¹⁾		5,333	3 ⁽¹⁾	A	\$0.0) 11	112,079		I	by Trust				
		Ta							uired, Di , option						/ Owned	I					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	oate, Transact Code (In:				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownershi (Instr. 4)		
						v	(A)	(D)	Date Exercisable		xpiration ate	Title	or No	umber							
Restricted Stock Unit	\$0.0 ⁽²⁾	07/17/2023			M			1,777	(3)		(3)	Common Stock	1 1	,777	\$0.0	10,010)	D			
Restricted Stock Unit	\$0.0 ⁽²⁾	07/17/2023			M			5,333	(4)		(4)	Common	5	5,333	\$0.0	4,677		D			

Explanation of Responses:

- 1. Acquired pursuant to vesting and release of shares in accordance with a Restricted Stock Unit award.
- 2. Each Restricted Stock Unit represents a contingent right to receive one share of Ionis common stock, or its equivalent cash value.
- 3. Restricted Stock Units vest in four equal annual installments. Upon vesting, the restricted stock units will be paid out in whole shares of Ionis common stock or cash as may be determined by the Company.
- 4. Restricted Stock Units vest 100% on either the first anniversary of the date of grant or the next regularly scheduled annual meeting of stockholders of the Company, whichever occurs earlier, and are delivered to the reporting person on the July 15th following the vesting date. Upon vesting, the Restricted Stock Units will be paid in whole shares of Ionis common stock or cash as may be determined by the Company.

By: Patrick R. O'Neil, attorney-in-fact For: Joseph H. 07/19/2023 Wender

** 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.