Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF
obligations may continue. See	

CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person					IONIS PHARMACEUTICALS INC [IONS									(Check all applicable)					
BENNETT C FRANK						10NS PHARMACEUTICALS INC IONS								Directo			Owner		
- ·			0 C L II S		- Ľ									X Officer below)	(give title	Othe belo	er (specify w)		
(Last) (First) (Middle) C/O IONIS PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year)								SV	SVP, Antisense Research					
			o, INC.		08	8/08/	2018												
2855 GAZELLE COURT					4.	If Am	endment.	Date o	of Original	Filed	d (Month/Da	6.1	6. Individual or Joint/Group Filing (Check Applicable						
(Street)					_ "		011011101114		or Grigina.		. (.y, . oa. ,	Line	e)		• • • • • • • • • • • • • • • • • • • •			
CARLSI	BAD C	A	92010												•	e Reporting Pe			
					-									Form f Persor		re than One Re	eporting		
(City)	(S	tate)	(Zip)																
		Tak	ole I - No	n-Deri	ivativ	e S	ecurities	s Ac	quired,	Dis	posed c	of, or Be	neficial	ly Owned					
1. Title of	Security (Ins	tr. 3)			saction				3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				d (A) or	5. Amou		6. Ownership Form: Direct	7. Nature of Indirect		
				Date (Month/Day/Yea		ear)	ar) Execution Date, if any (Month/Day/Year)		Code (Instr.		ır. 3, 4 anu) Securities Beneficially Owned Following	(D) or Indirect						
							•	,	Code	v	Amount	(A) oi (D)	Price	Reporter Transac (Instr. 3	d :ion(s)		(Instr. 4)		
Common	Stock			08/0	8/201	8	08/08/2	018	M ⁽¹⁾		13(1)	A	\$7.2	5 19	,409	D			
Common	Stock			08/0	8/201	8	08/08/2	018	S ⁽¹⁾		13(1)) D	\$45	19	,396	D			
Common	Common Stock			08/0	/08/2018		08/08/2018		M ⁽¹⁾		12,487	(1) A	\$14.6	9 31,883		D			
Common Stock (08/0	8/2018		08/08/2018		S ⁽¹⁾		12,487	(1) D	\$45	19,396		D				
			Table II -											Owned		,			
	1.	1	l	• • •		cal		_	-		converti	1		I	I	. 1			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	Execution Date, Code (Instr. Derivative Month/Day/Year) 8) Expiration Date (Month/Day/Year) Unde Derivative Securities		7. Title an of Securit Underlyin Derivative (Instr. 3 a	g Security	8. Price of Derivative derivat Security (Instr. 5) Benefic Owned Followin Report Transac (Instr. 4)		Owners Form: Direct (or Indir (I) (Instr	Beneficial Ownership ect (Instr. 4)								
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$7.25	08/08/2018	08/08/2	2018	M		13		01/03/20	16	01/02/2019	Common Stock	13	\$0	0	D			
Employee Stock Option (right to	\$14.69	08/08/2018	08/08/2	2018	M		12,487		01/02/20	17	01/29/2020	Common Stock	12,487	\$0	21,51	3 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 12/8/2017.

Remarks:

/s/Patrick R. O'Neil, attorney-<u>in-fact</u>

08/09/2018

** 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.