SEC For	rm 4																	
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COMMISSIC Washington, D.C. 20549												ON OMB APPROVAL			
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 OWNER Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934														3235-0287	
				i lieu				ne Investment (<u>. </u>				
1. Name and Address of Reporting Person [*] WENDER JOSEPH H				2. Issuer Name and Ticker or Trading Symbol <u>IONIS PHARMACEUTICALS INC</u> [IONS]] (Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below)				ner		
(Last) 2855 GA	`	(First) (Middle) ZELLE COURT			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2022											pecify		
(Street) CARLSBAD CA 92010 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Ta	ble I - Nor	-Deriva	tive S	ecuriti	οs Δ	cquired, D	isn	osed of	or Ben	eficially	Owned					
1. Title of Security (Instr. 3) Date				2. Transa	action 2A. Deemed Execution Da		te, Transaction Code (Instr.		4. Securities Acquired (A)		(A) or	5. Amount Securities Beneficial Owned Fo	5. Amount of 6. Ov Securities Form Beneficially (D) o		Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Ownership Instr. 4)		
						Code V	,	Amount	ount (A) or P		Transactio				iiisu. 4)			
								quired, Dis ts, options					Dwned			l		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Cod	saction e (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		e and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$38.06	07/01/2022		А		12,000		07/01/2023 ⁽¹⁾	06/	/30/2032 ⁽¹⁾	Common Stock	12,000	\$0.0	12,00	0	D		
Restricted Stock Unit	\$0.0 ⁽²⁾	07/01/2022		Α	Τ	5,333		(3)		(3)	Common Stock	5,333	\$0.0	15,10	8	D		

Explanation of Responses:

1. Grant on July 1, 2022 to reporting person of stock options under the Amended and Restated Ionis Pharmaceuticals, Inc. 2002 Non-Employee Directors' Stock Option Plan. 100% of the shares subject to the option vest and become exercisable 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. The option is exercisable to 0 shares on July 1, 2022.

2. Each Restricted Stock Unit represents a contingent right to receive one share of Ionis common stock, or its equivalent cash value.

3. Grant on July 1, 2022 to reporting person of Restricted Stock Unit award under the Amended and Restated Ionis Pharmaceuticals, Inc. 2002 Non-Employee Directors' Stock Option Plan. These 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 will be delivered to the reporting person on the July 15th following the vesting date. The Restricted Stock Unit is vested as to 0 shares on July 1, 2022.

By: Patrick R. O'Neil, attorney	07/05/2022
in-fact For: Joseph H. Wender	07/05/2022

** 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.