FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF C	HANGES	IN BENE	EFICIAL	OWNERS	HIP

	OMB APPROVAL									
OMB Number: 3235-0										
Estimated average burden										
	hours por rosponso:	0.5								

Check this box if no longer subject to 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

1. Name and Address of Reporting Person* Monia Brett P (Last) (First) (Middle) C/O IONIS PHARMACEUTICALS, INC. 2855 GAZELLE CT.					Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [IONS] Just of Earliest Transaction (Month/Day/Year) 01/15/2021] (Ched	relationship of Reporting Person(s) to Issuer eck all applicable) X Director 10% Owner X Officer (give title Other (specify below) Chief Executive Officer				ner		
(Street) CARLSBA	AD, CA	ate) (2010 Zip)	Dowin	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applical Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person															
1. Title of Security (Instr. 3) 2. Trans: Date					action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securities		or Beneficially s Acquired (A) or of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Following		Form: Direct I (D) or Indirect I (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and				(Instr. 4)			
Common S				01/15		+	01/15/2		M ⁽¹⁾		34,823 ⁽¹⁾ 14,927 ⁽²⁾	+	\$0 \$61.28	63,702 D 48,775 D						
Table II - Deriv. (e.g., 1. Title of Derivative Conversion Security or Exercise (Month/Day/Year) if any			Deriva: (e.g., p	ansaction Derivative Securities				or Beneficially			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
				c	ode V		(A)	(A) (D)		isable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)					
Restricted Stock Units	(3)(4)	01/15/2021	01/15/202	21	A		66,610		(5)		(5)		(5)	Common Stock	66,610	\$0	66,61	.0	D	
Performance Restricted Stock Units	(6)(7)	01/15/2021	01/15/202	21	A		77,447		(6)		(6)		(6)	Common Stock	77,447	\$0.0	77,44	17	D	
Restricted Stock Units	(4)	01/15/2021	01/15/202	21	М		34,823		3 (5)		(5)	Common Stock	34,823	\$0	77,24	13	D			

Explanation of Responses:

- 1. Acquired pursuant to vesting and release of shares in accordance with Restricted Stock Unit awards.
- 2. Shares withheld to cover the required tax withholding obligations pursuant to the Ionis Pharmaceuticals, Inc. Amended and Restated 2011 Equity Incentive Plan.
- 3. Grant to reporting person of Restricted Stock Units under the Ionis Pharmaceuticals, Inc. Amended and Restated 2011 Equity Incentive Plan.
- 4. Each Restricted Stock Unit represents a contingent right to receive one share of Ionis common stock, or its equivalent cash value.
- 5. Restricted Stock Units vest in four equal monthly 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 Ionis.
- 6. Represents an award of performance based restricted stock units ("PRSUs"). One-third of the PRSUs may vest at the end of three separate performance periods spread over the three years following the date of grant based on the Issuer's relative total shareholder return as compared to a peer group of companies. The number of PRSUs reported represents the maximum that may be earned, which is 150% of the target number. No number of PRSUs is guaranteed to vest and the actual number of PRSUs that will vest at the end of each performance period may be anywhere from zero to the amount stated.
- 7. Grant to reporting person of Performance Restricted Stock Units under the Ionis Pharmaceuticals, Inc. Amended and Restated 2011 Equity Incentive Plan.

Remarks:

/s/Patrick R. O'Neil, attorney-in-01/20/2021 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.