SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL							
OMB Number:	3235-0287						
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hours per response:	0.5						

1. Name and Address of Reporting Person* CROOKE STANLEY T			2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [IONS	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
CROOKE S	STANLEY I	-]	X	Director	10% Owner		
(Last)	(First)	(Middle)	1	x	Officer (give title below)	Other (specify below)		
C/O IONIS PHARMACEUTICALS, INC.		()	3. Date of Earliest Transaction (Month/Day/Year) 10/05/2016	Chairman and CEO				
2855 GAZELI	LE COURT							
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Fili	ing (Check Applicable		
CARLSBAD	CA	92010		X	Form filed by One Re	eporting Person		
					Form filed by More th Person	nan One Reporting		
(City)	(State)	(Zip)		1				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11150.4)	
Common Stock	10/05/2016	10/05/2016	M ⁽¹⁾		10,000(1)	A	\$10.29	35,029	D		
Common Stock	10/05/2016	10/05/2016	S ⁽¹⁾		10,000(1)	D	\$36.61	25,029	D		
Common Stock	10/05/2016	10/05/2016	M ⁽²⁾		1,000(2)	A	\$10.29	3,170	I	By wife	
Common Stock	10/05/2016	10/05/2016	S ⁽²⁾		1,000(2)	D	\$36.61	2,170	Ι	By wife	
Common Stock								725,391	Ι	By trust	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3A. Deemed 6. Date Exercisable and 7. Title and Amount 8. Price of 9. Number of 10. 11. Nature 3. Transaction 5. Number Derivative Security (Instr. 3) of Securities Underlying of Indirect Conversion Execution Date, Transaction Expiration Date (Month/Day/Year) Derivative Ownership derivative (Month/Day/Year) Derivative or Exercise Security Securities Beneficial if any Code (Instr. Form: Price of Derivative Security (Month/Day/Year) 8) Securities Derivative Security (Instr. 5) Beneficially Direct (D) Ownership Acquired (A) or Disposed Owned Following or Indirect (I) (Instr. 4) (Instr. 3 and 4) (Instr. 4) Reported Transaction(s) of (D) (Instr. 3, 4 and 5) (Instr. 4) Amount Number Date Expiration of Title Code v (A) (D) Exercisable Date Shares Employee Commo

Stock Option \$10.29 10/05/2016 10/05/2016 10,000 01/03/2015 01/02/2018 10,000 16,259 D Μ \$<mark>0</mark> Stock (right to buy) Employee Stock Commor Option \$10.29 10/05/2016 10/05/2016 Μ 1,000 01/03/2015 01/02/2018 1,000 \$<mark>0</mark> 8,500 I By wife Stock (right to

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 a Rule 10b5-1 Trading Plan adopted by the reporting person on 9/21/2015.

2. 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 a Rule 10b5-1 Trading Plan adopted by the reporting person's wife on 9/21/2015.

Remarks:

buy)

/s/Stanley T. Crooke

** Signature of Reporting Person

bke <u>10/07/2016</u> rting 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.