FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average I	burden
hours por response:	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

Name and Address of Reporting Person* O'NEIL PATRICK R.						2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [IONS								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>OINEIL</u>	TATIM	<u> </u>			_ []										Officer	or (give title		10% Ov Other (s		
(Last) (First) (Middle)													_	X	below)			below)	` ´	
` ′	`	AACEUTICALS	` ,			3. Date of Earliest Transaction (Month/Day/Year)									SVP, Legal & General Co			ral Couns	ınsel	
2855 GAZELLE COURT				11/	11/01/2017															
2000 GAZELLE COURT					_ 4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)														ine)	Form f	iled by One	. Don	arting Darge	_	
CARLSE	BAD C	A	92010											X		•		orting Perso		
					-										Form filed by More than One Reporting Person				rung	
(City)	(S	itate)	(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Disposed O				Beneficially Owned Follow		es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 11/01/20				2017	017 11/01/2017		/2017	M ⁽¹⁾		1,000(1)) A	\$10	.82	11,433			D			
Common Stock 11/01/20			2017	017 11/01/2017		S ⁽¹⁾		1,000(1)) D	\$58.3	8.35 ⁽²⁾ 10,43		,433		D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
						calls	1							_						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		Code (In				6. Date Exercis Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amoun or Numbe of Shares	r						
Employee Stock Option (right to	\$10.82	11/01/2017	11/01	/2017	M			1,000	01/02/20)17	01/01/2020	Common Stock	1,000		\$0	1,700		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 6/30/2017.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$58.20 to \$58.50, inclusive. The reporting person undertakes to provide to Ionis Pharmaceuticals, Inc., any security holder of Ionis Pharmaceuticals, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) on this Form 4.

Remarks:

/s/B. Lynne Parshall, attorneyin-fact

11/03/2017

** 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.