SEC Form 4
------------

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287								
Estimated average burden									
hours per 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).

## 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

1. Name and Addre	1 0	Person <sup>*</sup>		Issuer Name and T		ig Symbol ICALS INC [ IONS	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Schneider Eugene					<u> </u>			Director	10% 0	Owner		
(1 aat)	(First)	(Middle	、 [ ]				X	Officer (give title below)	Other below	(specify )		
(Last) 2855 GAZELL	(First) E COURT	(Middle	, J.	Date of Earliest Tra /17/2023	nsaction (Mor	th/Day/Year)		EVP, Chf Clinic	cal Develop C	)fcr		
(Street)				If Amendment, Date	e of Original F	led (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
CARLSBAD	CA	92010					X	Form filed by One	Reporting Pers	on		
(City)	(State)	(Zip)						Form filed by Mor Person	e than One Rep	orting		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1. Title of Security	/ (Instr. 3)		2. Transaction Date	2A. Deemed Execution Date.	3. Transaction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an	d 5)	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		

	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)		Disposed Of (	D) (Instr.	3, 4 and 5)	Beneficially Owned Following Reported	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	01/17/2023		M <sup>(1)</sup>		13,046(1)	A	\$0.0	27,078	D	
Common Stock	01/18/2023		<b>S</b> <sup>(2)</sup>		4,752 <sup>(2)</sup>	D	<b>\$</b> 39.5732 <sup>(3)</sup>	22,326	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)	Instr.	of Ex		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Unit	\$0.0 <sup>(4)</sup>	01/17/2023		М			13,046	(5)	(5)	Common Stock	13,046	\$0.0	40,070	D	

## Explanation of Responses:

1. Acquired pursuant to vesting and release of shares in accordance with Restricted Stock Unit awards.

2. The sale was made pursuant to an automatic sale to cover the required tax withholding obligations pursuant to the 2011 Equity Incentive Plan Restricted Stock Unit Agreement and Grant Notice.

3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$39.503 to \$39.66965 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 (3) on this Form 4.

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 annual 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 the Company.



\*\* 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.