FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

	1110 EX	
Machinaton	D C 20540	

wasnington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028	

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									
Estimated average burden										
hours per response:	0.5									

Check this box to indicate that a
transaction was made pursuant to a
contract, instruction or written plan
for the purchase or sale of equity
securities of the issuer that is
intended to satisfy the affirmative
defense conditions of Rule 10b5-
1(c). See Instruction 10.

Instruction 1(b).

Name and Address of Reporting Person*     Hayden Michael R				<u>IOI</u>	2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [ IONS ]								5. Relationship of Reporting (Check all applicable)  Director  Officer (give title				ng Person(s) to Issu 10% Own Other (sp		
(Last) (First) (Middle) 2855 GAZELLE COURT				3. Date of Earliest Transaction (Month/Day/Year) 12/23/2024									belov			below)			
(Street) CARLSE (City)			92010 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person								
		Table	l - N	on-Deriva	tive \$	Securi	ities	Acc	quire	d, Dis	sposed of	, or B	enefic	cially	Own	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			or 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		Transa	ied iction(s) 3 and 4)	on(s)		(111311.4)	
Common	Stock			12/23/20	)24	24			P	П	2,500	A	\$36.1	1983	32	32,719		D	
Common	Stock			12/23/20	)24				P		2,500	A	\$36.2	2332	2 35,219		]	D	
Common	Stock														2,000				by Spouse <sup>(1)</sup>
		Та	ble II	- Derivat (e.g., pu							osed of, convertib				Owne	d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Exec if any	Deemed 4. Transa Code (ith/Day/Year) 8)		action (Instr.	str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Benefici Ownersh t (Instr. 4)
						v			Date Exercisable		Expiration Date	Amou or Numb of Title Share							

## **Explanation of Responses:**

1. These securities are held by Genworks 2 Consulting, Inc. ("Genworks 2"). The Reporting Person's spouse has sole voting and investment power with respect to the shares held by Genworks 2.

By: Patrick R. O'Neil, attorney-in-fact For: Michael 12/23/2024 R. Hayden

\*\* 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.