SEC Form 4	
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

l	OMB Number: 3235-0									
l	Estimated average burden									
l	hours per response:	0.5								

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*	2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [ IONS	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
BENNETT C FRANK				·	Director	10% Owner		
(	(First)	(Middle)	1	X	Officer (give title below)	Other (specify below)		
(Last)	(First)	( )	3. Date of Earliest Transaction (Month/Day/Year)		Chief Scientifi	c Officer		
C/O IONIS PH	ARMACEUTI	CALS, INC.	12/04/2020					
2855 GAZELL	E CT.							
· · · · · · · · · · · · · · · · · · ·			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable				
(Street)				Line)				
CARLSBAD,	СА	92010		X	Form filed by One Re	porting Person		
		,2010			Form filed by More th Person	an One Reporting		
(City)	(State)	(Zip)						
		Table I - Non-De	rivative Securities Acquired. Disposed of. or Benefi	cially	Owned			

# 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)	3. Transa Code ( 8)		4. Securities / Disposed Of (			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)		
Common Stock	12/04/2020	12/04/2020	М		7,947(1)	Α	\$39.87	40,423	D	
Common Stock	12/04/2020	12/04/2020	S		7,947 <sup>(2)</sup>	D	\$51.04 <sup>(3)</sup>	32,476	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)		ı of ∣E∷		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$39.87	12/04/2020	12/04/2020	М			7,947	01/02/2015	01/01/2021	Common Stock	0.0	\$0.0	0	D	

#### **Explanation of Responses:**

1. Acquired as a result of exercising a stock option that was scheduled to expire on 1/1/21. The purchase reported on this Form 4 was effected pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on May 14, 2020.

2. Shares sold pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on May 14, 2020.

3. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$51.00-\$51.10, 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) of this Form 4.

**Remarks:** 

## /s/Patrick R. O'Neil, attorneyin-fact

12/08/2020

\*\* 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.