FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGE	S IN BENEFICI	AL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-02								
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).

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 Address of Reporting Person* PARSHALL B LYNNE				2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [IONS]								lationship of ck all applica Director	able)	()	o Issue % Owr		
(Last) 2855 GA	(F ZELLE CC	irst) DURT	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/01/2021							Officer (below)	give title	e Other (spe below)		ecify	
(Street) CARLSE (City)		tate)	92010 (Zip)	_	4. If Amendment, Date of Original Filed (Month/Day/Year) ative Securities Acquired, Disposed of, or Benefic						Line)	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Tran Date				action 2A. Deemed Execution Day/Year) if any (Month/Day/Y		n Da	Code (Ins	on Dispos		Acquired (D) (Instr.	(A) or 3, 4 and 5)	5. Amount Securities Beneficial Owned Fo Reported	ly	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	t In	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Code V Amount (A) or (D)								Price	Transaction(s) (Instr. 3 and 4)				,			
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)		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		l L	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own Form Director In (I) (Ir		Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date		Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$40.05	07/01/2021	07/01/2021	A		12,000		07/01/2022 ⁽¹⁾	06/30/203	1(1)	Common Stock	12,000	\$0.0	12,000))	
Restricted Stock Unit	\$0.0 ⁽²⁾	07/01/2021	07/01/2021	A		5,333		(3)	(3)		Common Stock	5,333	\$0.0	23,529)	

- 1. Grant of July 1, 2021 to reporting person of stock options under the Amended and Restated Ionis Pharmaceuticals, Inc. 2002 Non-Employee Directors' Stock Option Plan. 100% of the shares subject to the option vest and become exercisable on either the first anniversary of the date of grant or the next regularly scheduled annual meeting of stockholders of the Company, whichever occurs earlier. The option is exercisable to 0
- 2. Each Restricted Stock Unit represents a contingent right to receive one share of Ionis common stock, or its equivalent cash value.
- 3. Grant of July 1, 2021 to reporting person of Restricted Stock Unit award under the Amended and Restated Ionis Pharmaceuticals, Inc. 2002 Non-Employee Directors' Stock Option Plan. These Restricted Stock Units vest 100% on either the first anniversary of the date of grant or the next regularly scheduled annual meeting of stockholders of the Company, whichever occurs earlier, and will be delivered to the reporting person on the July 15th following the vesting date. The Restricted Stock Unit is vested as to 0 shares on July 1, 2021.

By: Patrick R. O'Neil, attorneyin-fact For: Lynne B. Parshall

07/06/2021

** 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.