FORM 4

UNITE

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

D	S	ΓΑΤΙ	ES	SEC	URIT	TES	AND	EXC	HAN	IGE	COV	ИΜІ	SSI	10	1

OMB APP	PROVAL				
OMB Number:	3235-028				

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

Check this box to indicate that a

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

l	OMB Number:	3235-0287
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l	hours per response:	0.5

transac contrac the pur securiti to satis	chase or sale of es of the issue fy the affirmations of Rule 10b	pursuant to a written plan for fequity r that is intended we defense																
Name and Address of Reporting Person* O'NEIL PATRICK R.						2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [IONS]							S] (Ch	eck all applic Directo	,		on(s) to Issu 10% Ow Other (s	/ner
(Last) (First) (Middle) 2855 GAZELLE COURT					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025									below) below) EVP CLO & General Counsel				
(Street) CARLSBAD CA 92010				4. 1									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5		(Zip)									_						
		Tal	ole I - Nor	ı-Deriv	/ativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Be	neficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/E						action 2A. Deemed Execution Date, if any (Month/Day/Year)			Code (li	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				5. Amour Securitie Beneficia Owned F Reported	es Form ally (D) o Following (I) (In		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	٧	Amount	(A) or (D)	Price	Transact	Transaction(s) (Instr. 3 and 4)			, ,
			Table II - I						uired, Di					Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) Execution Date (Instr. 3) 3. Transaction Date (Month/Day/Year) if any (Month/Day/Year)			ate, T	I. Fransa Code (I		of E		6. Date Exercisal Expiration Date (Month/Day/Year)			of Securi Underlyir	g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)		Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$34.69	01/02/2025			A		22,000		01/02/2026	(1)	01/01/2035	Common Stock	22,000	\$0.0	22,00	0	D	

Explanation of Responses:

1. Grant on 01/02/2025 to reporting person of stock options under the Ionis Pharmaceuticals, Inc. Amended and Restated 2011 Equity Incentive Plan. Following this transaction, the option was exercisable as to 0 shares on 01/02/2025. 25% of the shares subject to the option will vest and become exercisable on 01/02/2026. Thereafter, the remaining shares subject to the option will vest and become exercisable in 36 equal monthly installments over the next 3 years.

Patrick R. O'Neil

01/03/2025

** 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.