FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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UIVID AF	PROVAL						
OMB Number:	3235-0287						
Estimated average burden							

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 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 Address of Reporting Person*  Monia Brett P					<u>101</u>	2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [ IONS ]							(Chec	k all app Direc	,		wner				
(Last) (First) (Middle) 2855 GAZELLE CT.						3. Date of Earliest Transaction (Month/Day/Year) 08/31/2020								X	below		utive (	below)	Specify		
(Street) CARLSE (City)		CA (State)		2010 iip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							)	6. Indi Line) X	Form	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson				
			Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or E	Benef	icially	/ Own	ed				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)						Execution Date,		3. 4. Securitie Disposed Code (Instr. 8)		s Acquired (A) or of (D) (Instr. 3, 4 and		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) o (D)	r Pri	се	Transa	ction(s) 3 and 4)				
Common Stock 08/31/2					020	)20		<b>J</b> <sup>(1)</sup>		236	A	\$4	4.455	29	9,193		D				
Common Stock 09/01/20					020 09/01/2020		)20	S <sup>(2)</sup>		314(2)	D	\$	\$53.7		28,879		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)	Derivative Conversion Date Execution Date Courity or Exercise (Month/Day/Year) if any		tion Date,	Code (Instr.		of Deriv Secu Acqu (A) o Dispe	r osed ) r. 3, 4	Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y C	IO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
						Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er						

## **Explanation of Responses:**

- 1. Reporting 236 shares acquired under the Ionis Pharmaceuticals, Inc. Amended and Restated 2000 Employee Stock Purchase Plan on August 31, 2020. These 236 shares may not be sold until February 28, 2021
- 2. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on 10/7/2019.

## Remarks:

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

09/02/2020

\*\* 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.