SEC For	m 4 FORM	4	UNITE) ST/	ATE	S SI	ECUF	RITI	ES AND	ЕХСНА	NGE C	OMMI	SSION					
			Washington, D.C. 20549												OMB APPROVAL			
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 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 Number: 3235-0287 Estimated average burden hours per response: 0.5					
transac contrac the pur securiti to satis	chase or sale of ies of the issue ify the affirmativ ons of Rule 10b	pursuant to a r written plan for of equity r that is intended ve defense			O	or Sect	ion 30(n)	of th	e investment C	ompany Act	of 1940							
1. Name and Address of Reporting Person [*] Baroldi Joseph						IONIS PHARMACEUTICALS INC [IONS] (Check all applica Director									10% Owner			
(Last) (First) (Midd 2855 GAZELLE COURT						3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025							below)			Other (s below) ss Officer	респу	
(Street) CARLSBAD CA 92010					- 4.1	Line) Form fi Form fi									oint/Group Filing (Check Applicabl led by One Reporting Person led by More than One Reporting			
(City) (State) (Zip) Person																		
		Tal	ole I - Nor	n-Deri	vativ	'e Se	curitie	s Ao	cquired, Di	sposed o	f, or Ber	neficially	y Owned					
1. Title of Security (Instr. 3)				Date	Date (Month/Day/Year) i			ied n Date ay/Ye:	Code (Inst				5. Amount of Securities Beneficially Owned Following Reported		Form (D) or	: Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	tion(s)				
	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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	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 Ownershin (Instr. 4)	
					Code	v	(A)	(D)	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	22,000	D	D		
Non- Qualified Stock Option (right to buy)	\$34.69	01/02/2025			A		2,500		01/02/2026 ⁽²⁾	01/01/2035	Common Stock	2,500	\$0.0	2,500	,	Ι	by Spouse	

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. 55% 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.

2. Grant on 01/02/2025 to reporting person's spouse 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.

By: Patrick R. O'Neil, attorney-01/03/2025

in-fact For: Joseph T. Baroldi

** 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.