FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 AP	PROVAL
OMB Number:	3235-0287
Expires:	December 31, 2014
Estimated average	e burden
hours per response:	0.5

	Idress of Reporting F		2. Issuer Name and Ticker or Trading Symbol ISIS PHARMACEUTICALS INC [ISIS]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				X Director 10% Owner				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/08/2003	Officer (give title Other (specify below) below)				
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)				X Form filed by One Reporting Person				
(City)	(State)	(Zip)	-	Form filed by More than One Reporting Person				

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)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)		(1150.4)
Common Stock	07/08/2003	07/08/2003	S		33,38 4 ⁽¹⁾	D	5.5359	216,095 ⁽²⁾⁽³⁾⁽⁴⁾	Ι	See Footnotes 2 and 3
Common Stock	07/09/2003	07/09/2003	s		30,000 ⁽¹⁾	D	5.5982	186,095 ⁽²⁾⁽³⁾⁽⁴⁾	I	See Footnotes 2 and 3

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)		on of Ex		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 Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The shares sold were held by Bessemer Venture Partners III L.P. (" BVP III"). The reporting person is a General Partner of Deer III & amp; Co., the sole General Partner of BVP III. The reporting person disclaims beneficial ownership except to the extent of his partnership interest.

2. Owned by BVP III. The reporting person is a General Partner of Deer III & amp; Co., the sole General Partner of BVP III. The reporting person disclaims beneficial ownership except to the extent of his partnership interest.

3. 740 shares owned indirectly by the Gabrieli Family Foundation, a charitable foundation. The reporting person may be deemed to be a beneficial owner of such shares by viture of his position as Trustee, but disclaims beneficial ownership.

4. 155,431 shares owned directly

B. Lynne Parshall, by Power of 07/10/2003

<u>Attorney</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.