Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden 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* <u>CROOKE STANLEY T</u>						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					vner	
(Last) (First) (Middle) C/O ISIS PHARMACEUTICALS, INC. 2855 GAZELLE COURT						3. Date of Earliest Transaction (Month/Day/Year) 08/01/2014								^ bel	ow) `	give title nan, Pres	siden	Other (s below) at and CEO		
(Street) CARLSBAD CA 92010 (City) (State) (Zip)					- 4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person 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. Transac Date (Month/Date)					action	2, E ur) if	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A)		d (A) or	5. Amou Securitie Benefici Owned F		s lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)	Price	Tran	Reported Transacti (Instr. 3 a				(Instr. 4)	
Common Stock					08/01/2014		08/01/2014		M ⁽¹⁾		15,000(1) A	\$14.	47	21,941		D			
Common Stock					08/01/2014		08/01/2014		S ⁽¹⁾		15,000(1) D	\$30.5	525	6,941		D			
Common Stock 0					01/2014		08/01/2014		M ⁽²⁾		1,000(2	() A	\$11.	27	1,627		I 1		By Wife	
Common Stock 08/01/					/2014	/2014 08		1/2014	S ⁽²⁾		1,000(2	D	\$30.5	525	627		I I		By Wife	
Common Stock														72		5,391		I	By Trust	
		-	Table II -								oosed of, converti			y Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed Date,	4. Transactio Code (Insti		5. Number of		6. Date Exercis Expiration Date (Month/Day/Ye		isable and te	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		Derivat Securit	ve /	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)	
					Code	V	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares	1						
Employee Stock Option (right to buy)	\$14.47	08/01/2014	08/01/	2014	М	Л		15,000	01/02/2013		01/01/2016	Common Stock	15,000	\$0		51,500		D		
Employee Stock Option (right to	\$11.27	08/01/2014	08/01/2	08/01/2014				1,000	01/04/20	014	01/03/2017	Common Stock	1,000	\$0		3,800		I	By Wife	

Explanation of Responses:

- 1. Acquired as a result of exercising a stock option pursuant to a Rule 10b5-1 Trading Plan. The purchase and sale reported on this Form 4 was effective pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person on 8/6/13.
- 2. Acquired as a result of exercising a stock option pursuant to a Rule 10b5-1 Trading Plan. The purchase and sale reported on this Form 4 was effective pursuant to a Rule 10b5-1 Trading Plan adopted by the reporting person's wife on 8/6/13.

Remarks:

/s/B. Lynne Parshall, Attorneyin-Fact

08/01/2014

** 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.