SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject t | c |
|---------------------------------------|---|
| 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 APPRO | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
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| 1. Name and Addr MUTO FRE | 1 0 | | 2. Issuer Name and Ticker or Trading Symbol <u>ISIS PHARMACEUTICALS INC</u> [ISIS] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner |
|---|---|-------|---|---|
| | (First) (Middle) 5 PHARMACEUTICALS, INC. | | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2015 | Officer (give title Other (specify below) below) |
| 2855 GAZELLE COURT (Street) CARLSBAD CA 92010 | | 92010 | 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 |
| (City) | (State) | (Zip) | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|------------|---|---|--|---------------|----------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 06/01/2015 | 06/01/2015 | M ⁽¹⁾ | | 10,000(1) | A | \$3.95 | 11,095 | D | |
| Common Stock | 06/01/2015 | 06/01/2015 | S ⁽¹⁾ | | 10,000(1) | D | \$66.911 | 1,095 | D | |
| Common Stock | | | | | | | | 1,500 | Ι | By Cooley Godward Kronish LLP Sal Def & PSP U/A DTD 2/1/74 Pension Plan |

Table II Derivative Securities Acquired Dispessed of an Repoticially Owned

| (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
|---|--|-------------------------------|------|---|---|--|---------------------|--------------------|---|--|---|--|--|---|--|
| 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | e Execution Date, Transaction | | | of Deri Seci Acq (A) o Disp of (E | . Number f 6. Date Exercisable and Expiration Date (Month/Day/Year) isposed f (D) (Instr. , 4 and 5) | | | 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) | Ownership Form: Direct (D) or Indirect | 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:

\$3.95

1. Acquired as a result of exercising a stock option that was scheduled to expire on 6/30/2015. 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 5/5/2013.

07/01/2009

10,000

Remarks:

1. Title of Derivative

Security (Instr. 3)

Non Employee Director

stock

option . (right to buy)

> /s/B. Lynne Parshall, attorney-06/03/2015 in-fact

10,000

\$<mark>0</mark>

0

D

Commoi

Stock

06/30/2015

** Signature of Reporting Person Date

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

06/01/2015

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

06/01/2015

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.