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	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPR	OVAL						
OMB Number:	3235-028						
Estimated average burden							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* CROOKE STANLEY T						2. Issuer Name and Ticker or Trading Symbol ISIS PHARMACEUTICALS INC [ISIS]									ationship (k all applic Directo	cable)	orting Person(s) to Issuer 10% Owner				
(Last) (First) (Middle) C/O ISIS PHARMACEUTICALS, INC. 2855 GAZELLE COURT					3. Date of Earliest Transaction (Month/Day/Year) 04/07/2015										Officer (give title below) Chairman a			Other (s below)	specify		
(Street) CARLSI (City)	BAD C	A state)	92010 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										dividual or Joint/Group Filing (Check Applicable) Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transa Date (Month/L				action	action		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Se Disp		Oosed of, or Benefic 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amou Securitie Benefici Owned F	int of es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A) or (D)	Price	B		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock			04/07/2015		5	04/07/201		M ⁽¹⁾		20,343(1) A	\$11	.27	34,985		D					
Common Stock			04/07/2015		5	04/07/2015		S ⁽¹⁾		20,343(1) D	\$63	.071	14	,642	D					
Common Stock				04/07/2015		5	04/07/2015		M ⁽²⁾		2,034(2) A	\$9	.22	3,331		I		By wife		
Common Stock (04/07	04/07/2015		04/07/2015		S ⁽²⁾		2,034(2) D	\$63	.071	1,	,297		I	By wife		
Common Stock														725	25,391		I	By trust			
			Table II								osed of, converti				wned						
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/D	n Date,	4. Transactio Code (Ins 8)				6. Date Exerci Expiration Da (Month/Day/Y		te	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		5	B. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ily o	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	ode V		(D)	Date Exercisa	ıble	Expiration Date	Title	Amou or Numb of Share	ber							
Employee Stock Option (right to buy)	\$11.27	04/07/2015	04/07/	2015	M			20,343	01/04/20)14	01/03/2017	Common Stock	20,34	43	\$0	29,163	3	D			
Employee Stock Option	\$9.22	04/07/2015	04/07/	2015	M			2,034	07/19/20	014	07/18/2017	Common Stock	2,03	4	\$0	7,350		I	By wife		

Explanation of Responses:

- 1. Acquired as a result of exercising a stock option pursuant to Rule 10b5-1 Trading Plan. The purchase and sale reported on this Form 4 was effective pursuant to Rule 10b5-1 Trading Plan adopted by the reporting person on 8/6/2013.
- 2. Acquired as a result of exercising a stock option pursuant to 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 8/6/2013.

Remarks:

/s/B. Lynne Parshall, attorneyin-fact

04/08/2015

** 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.