FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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* PARSHALL B LYNNE						2. Issuer Name and Ticker or Trading Symbol ISIS PHARMACEUTICALS INC [ISIS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						1010 1 111 11(1111 10 10 11 10 10								Directo	r		10% Ow	/ner		
(Last)	(F	irst)	(Middle)		3.	Date of Earliest Transaction (Month/Day/Year)								Officer below)	(give title		Other (s below)	pecify		
							01/01/2007							Ex	Executive Vice President					
1896 RUTHERFORD ROAD																				
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)					"									Line)						
CARLSI	BAD C	CA 92008												K Form fi	iled by One Reporting Person			1		
				-									Form filed by More than One Reporting Person				ting			
(City) (State) (Zip)																				
		Tal	ble I - No	n-Deri	ivativ	e Se	ecuritie	s Ac	quired,	Dis	posed o	f, or Ber	neficiall	y Owned						
1. Title of	Security (Ins	tr. 3)			saction		ed	3. 4. Securities Acquired (A)					5. Amou				7. Nature of			
Date (Month/					n/Day/Ye	eay/Year) Execution Date if any (Month/Day/Ye			Code (Instr.		Of (D) (Instr. 3, 4 and 5		Beneficia Owned F	ally following	Form: Direct (D) or Indirect (I) (Instr. 4)		Indirect Beneficial Ownership			
									Code	v	Amount	(A) or	Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)		
C	C+1-		1/200	/2007 01/01/2007			I (1)	3.7	1 220	- ' '	ΦE 1.45	+	·		<u> </u>					
Common	Stock)1/200	2007 01/01/2007		J ⁽¹⁾	V	1,338	A \$5.142		4,579			D						
			Table II -											Owned						
				(e.g.,	puts,	, cal	ls, warr	ants	, option	s, c	onvertik	le secu	rities)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				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 derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			
					Code	V (A) (D) Exerci	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares									
Employee Stock Option (right to	\$11.12	01/02/2007	01/02/2007		A		77,454		01/02/2008	(2)	01/01/2014	Common Stock	77,454	\$0	77,454	4	D			

Explanation of Responses:

- $1.\ Reporting\ 1,338\ shares\ acquired\ under\ the\ Isis\ Pharmaceuticals,\ Inc.\ 2000\ Employee\ Stock\ Purchase\ Plan\ on\ January\ 1,2007.$
- 2. Grant of 1-2-07 to reporting person of stock options under the Isis Pharmaceuticals, Inc. 1989 Stock Option Plan. 25% of the shares subject to the option will vest and become exercisable on 1-2-08. Thereafter, the remaining shares subject to the option vest and become exercisable in 36 equal monthly installments, at the rate of 19,364 shares per year. The option is exercisable as to 0 shares on 1-2-07.

Remarks:

/s/B. Lynne Parshall

01/03/2007

** 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.