FORM 4

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

F CHANGES IN BENEFICIAL OWNERSHIP

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* Heller Frances K						2. Issuer Name and Ticker or Trading Symbol EXELIXIS INC [EXEL]										heck	all applic Directo	,		son(s) to Iss 10% Ov Other (s	vner	
	(F ELIXIS, IN RAND AV	C.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/15/2011										X	below) below) EVP, Business Development					
(Street) SOUTH FRANCE	sco C	C A 94080					4. If Amendment, Date of Original Filed (Month/Day/Year)										ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)																			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D			action	ction 2A. Deemed Execution Date			e,	Code (Instr. 5)				cquire	d (A) or	or 5. Amo 4 and Securit Benefic		nt of es ally collowing	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	- 1	Transaction(s) (Instr. 3 and 4)				(111341.4)	
Common Stock 05/15/					5/201	2011				M ⁽¹⁾		3,125 A		\$0		17,125		D				
Common Stock															129			I .	By 401(k) Plan ⁽²⁾			
		Т	able II - I									sed of onverti				y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transactior Code (Instr 8)				Ex	Date Exer piration I onth/Day	Date	Amount of			Der Sec	Price of ivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form Direc or Inc (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Da Ex	te ercisable		opiration ate	Title	1	Amount or Number of Shares							
Restricted Stock	(3)	05/15/2011			M			3,125		(4)		(4)	Com		3,125		(3)	34,375	5	D		

Explanation of Responses:

- 1. Represents the conversion upon vesting of restricted stock units into common stock. Such restricted stock units were granted on December 9, 2009 and were previously reported in Table II on a Form 4 filed with the Securities and Exchange Commission on December 11, 2009.
- 2. Represents 129 shares of Exelixis, Inc. common stock under the Exelixis, Inc. 401(k) Plan, pursuant to a plan statement dated as of May 16, 2011.
- 3. Each restricted stock unit is the economic equivalent of one share of Exelixis, Inc. common stock.
- 4. On December 9, 2009, the reporting person was granted 50,000 restricted stock units, of which 1/16th of the shares subject to the restricted stock units vested on May 15, 2011. The common stock into which such vested restricted stock units converted on May 15, 2011 is reported in Table I on this Form 4. The remaining unvested restricted stock units will continue to vest as to 1/16th of the original number of shares subject to the restricted stock units on each succeeding August 15, November 15, February 15 and May 15 until fully vested.

James B. Bucher, Attorney in **Fact**

05/17/2011

** 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.