SEC For	m 4																	
FORM 4 UN				UNITE	JNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL		
Section 16. Form 4 or Form 5 obligations may continue. See						NT OF CHANGES IN BENEFICIAL OWNERSHI d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								SHIP				
1. Name and Address of Reporting Person* Lamb Peter (Last) (First) (Middle) C/O EXELIXIS, INC. 1851 HARBOR BAY PARKWAY					EXELIXIS, INC. [EXEL] (Check all applic Director Director X 3. Date of Earliest Transaction (Month/Day/Year) Officer below)											mer pecify		
(Street)	(Street) ALAMEDA CA 94502					Line) X Form file							oint/Group Filing (Check Applicable led by One Reporting Person led by More than One Reporting			1		
			Tat	ole I - No	n-Deriv	ative	Secu	rities A	cquired	, Dis	sposed o	f, or Be	eneficia	lly Owned	1			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					e Ex nth/Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		ction Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		d (A) or r. 3, 4 and	Benefic Owned	es ially Following	Form (D) or	: Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)
Common Stock 09/15					2021			М		47,500	A	\$ <u>6.2</u>	1 436	436 , 967 ⁽¹⁾		D		
Common Stock 09/15					09/15/	2021			S ⁽²⁾		47,500	D	\$20.4	5 ⁽³⁾ 38	³⁾ 389,467		D	
Common Stock													17,	105(4)			3y 401(k)	
				Table II -							oosed of, convertit			/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion	on Da	. Transaction ate Month/Day/Year)			ransacti ode (Ins	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4) Amou or Numb of		Derivative Security	9. Numbo derivativ Securitie Beneficia Owned	re es	10. Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

\$6.21

1. Includes 215,102 shares of Exelixis, Inc. common stock that will be issued to the Reporting Person upon vesting of restricted stock units.

2. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 18, 2021.

Μ

3. Represents the weighted average sales price. The shares were sold in multiple transactions at prices ranging from \$20.00 to \$20.62. Reporting Person undertakes to provide Exelixis, Inc., any security holder of Exelixis, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote 3 to this Form 4.

09/16/2016⁽⁵⁾

4. Represents shares of Exelixis, Inc. common stock under the Exelixis, Inc. 401(k) Plan, pursuant to a plan statement dated as of September 15, 2021.

5. The option, representing the right to purchase a total of 190,000 shares of Exelixis, Inc. common stock, became fully exercisable on September 16, 2019.

(A) (D)

47,500

Remarks:

Option

(right to buy)

/s/ Jennifer Drimmer Rokovich, 09/17/2021

Attorney in Fact

** Signature of Reporting Person Date

47,500

\$<mark>0</mark>

142,500

D

09/15/2022

Common

Stock

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).

09/15/2021

** 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.