FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

STATEMENT	OF CHANGE	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
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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

	nd Address of O Gisela	Reporting Person*						er or Tradir <u>.</u> [EXEL		mbol				all applica Director Officer (ıble)	g Perso	on(s) to Issu 10% Ow Other (s	ner
	(F ELIXIS, INC RAND AV		(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/22/2016							pelow) Pres Prod Dev & Med			below) Aff & CN	10		
(Street) SOUTH FRANCI	SAN SCO		94080 (Zip)		4. If Am	endment,	Date o	of Original F	led (Month/Day	y/Year)		Indivi ne) X	Form file	ed by One	e Repoi	(Check Appl rting Person One Report	
		Та	ıble I - Non	-Deriva	tive S	ecuritie	s Ac	quired, [Disp	osed o	f, or Be	neficia	lly O	wned				
		2. Transa Date (Month/D		2A. Deemed Execution Date, if any (Month/Day/Yea		e, Transaction Disp Code (Instr.			curities Acquired (A) used Of (D) (Instr. 3, 4		and 5) Securitie Beneficia Owned F		ly	Form:	Direct I Indirect E str. 4) C	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) o	Price	- 1	Reported Transactio (Instr. 3 an				(Instr. 4)	
Common Stock ⁽¹⁾			09/22/2	/2016 ⁽²⁾		A		20,00	0 A	\$(156,441(3)		D				
Common Stock												13,806				3y 401(k) ⁽⁴⁾		
			Table II - I					uired, Di					/ Ow	ned				-
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security			3A. Deemed Execution Dat if any (Month/Day/Yo	Cod	Transaction Code (Instr.		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security		9. Number derivative Securitie Beneficial Owned Following Reported	e s ally g i	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Cod	e V	(A)	(D)	Date Exercisable		expiration Date	Title	Amount or Number of Share			Transaction(s) (Instr. 4)			
Option (right to buy)	\$14.74	09/22/2016		A		120,000 09		09/22/2017 ⁽⁵	5) 0	9/21/2024	Common Stock	120,00	00	\$0	120,000		D	

Explanation of Responses:

- 1. Represents shares of Exelixis, Inc. common stock that will be issued to the Reporting Person upon vesting of restricted stock units. Each restricted stock unit is the economic equivalent of one share of Exelixis, Inc. common stock.
- 2. The restricted stock units were granted to the Reporting Person on the Transaction Date pursuant to the Exelixis, Inc. 2014 Equity Incentive Plan. The restricted stock units will vest as to 1/4th of the original number of shares subject to the restricted stock unit award on November 15, 2017, and thereafter as to 1/4th of the original number of shares subject to the restricted stock unit award on each November 15th until
- 3. Includes 20,000 shares of Exelixis, Inc. common stock that will be issued to the Reporting Person upon vesting of restricted stock units.
- 4. Represents 13,806 shares of Exelixis, Inc. common stock under the Exelixis, Inc. 401(k) Plan, pursuant to a plan statement dated as of September 23, 2016.
- 5. Option granted pursuant to the Exelixis, Inc. 2014 Equity Incentive Plan. Option granted will vest as to 1/4th of the original number of shares subject to the option on the one-year anniversary of the Transaction Date, and thereafter as to 1/48th of the original number of shares subject to the option on each monthly anniversary of the Transaction Date.

Remarks:

/s/ Jeffrey J. Hessekiel, Attorney 09/26/2016

** 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.