FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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CTATEMENT	OF CHANGES	IN RENEEICIAL	OWNEDSH

-	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
1	hours por rosponso:	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*			2. Issuer Name and Ticker or Trading Symbol EXELIXIS INC [EXEL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
GREEN	JANE M	<u>l</u>			1	<u> </u>	17110 1	110	L DAKEL	, 1				Direct	or		10% Ow	/ner
(I pot)	/F:-	int) /	N 4: ddla)										_	X Officer below)	(give title		Other (s below)	pecify
(Last)	(Fir	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year)								VP, Corp Communications					
C/O EXE	LIXIS, INC				12/10/2003								ri, corp communications					
170 HARBOR WAY, PO BOX 511																		
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
SOUTH S	AN												"	,	filed by One	. Reno	ntina Persor	,
FRANCIS	X 1	. 9	94083-0511	L										X Form filed by One Reporting Person Form filed by More than One Reporting				
														Perso	,	e man	Опе Керог	uriy
(City)	(Sta	ate) (Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Se	1. Title of Security (Instr. 3) 2. Transa					action 2A. Deemed		ed	Code (Instr.		d (A) or	5. Amou	s Form		nership	7. Nature of		
Date				Exec Day/Year) if any		execution Date,		r. 3, 4 an			I 5) Securiti	: Direct I			ndirect Beneficial			
			(Monthin Day) Te		(Month/Day		y/Year)				Owned I	ollowing	(I) (Instr. 4)	Ownership				
								Carla	Τ _v	A	(A) or	Price	Transac	Reported Transaction(s)		- 1	Instr. 4)	
								Code	<u> </u>	Amount	(D)	Price	(Instr. 3	and 4)				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
(e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Conversion Date Execution Date Security or Exercise (Month/Day/Year) if any		ate, Ti	Code (Instr.		tion of nstr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am of Securities Underlying			ties 1g	Derivative Security	9. Number of derivative Securities		10. Ownership Form: Direct (D)	11. Nature of Indirect Beneficial			
(Instr. 3)	Price of Derivative				Securities Derivative Securities Acquired (Instr. 3 and 4							(Instr. 5)	Beneficia Owned	Beneficially Owned		Ownership (Instr. 4)		
	Security					(A) or				,		Following		or Indirect (I) (Instr. 4)	(,			
					Disposed of (D) (Instr. 3, 4 and 5)							Reported Transacti (Instr. 4)	Transaction(s)					
													Amour	t				
													or Numbe	r				
				c	ode	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	of Shares					
Option(right to buy)	\$6.15	12/10/2003			Α		40,000		12/10/20	03 ⁽¹⁾	12/10/2013	Common Stock	40,00	0 \$0	130,00	00	D	

Explanation of Responses:

1. Options granted pursuant to Issuer's 2000 Equity Incentive Plan. Twenty five percent (25%) of the shares vest on 12/10/2004, and the remaining shares shall vest in 36 equl monthly installments thereafter.

Remarks:

/s/ Jane M. Green

12/11/2003

** 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.