FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 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*  MORRISSEY MICHAEL  (Last) (First) (Middle)  249 EAST GRAND AVE.					Issuer Name and Ticker or Trading Symbol EXELIXIS INC [ EXEL ]  3. Date of Earliest Transaction (Month/Day/Year) 12/09/2009								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  President, R & D				
P.O. BOX 511  (Street) SOUTH SAN FRANCISO  (City) (State)			94083-0511 (Zip)	_	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person Person												
1. Title of Security (Instr. 3) 2. Tra			Transact	nsaction 2A. Exe h/Day/Year) if a		2A. Deemed Execution Date, f any (Month/Day/Year)		ction Instr.	4. Securit	ties Acquired (A) or 1 Of (D) (Instr. 3, 4 and 5)		5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Dwnership Instr. 4)	
1. Title of	2. Conversion	3. Transaction	Table II - De (e.	g., put		IIs, warı	rant er of	s, option	1S, C	convertib		rities)	<u> </u>	9. Numbe		10.	11. Nature
Derivative Security (Instr. 3)	or Exercise Price of Derivative Security		if any (Month/Day/Year)	Code	(Instr.	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year			Underlying Derivative (Instr. 3 ar	Security ad 4)	Security (Instr. 5)	Securitie Beneficia Owned Followin Reported Transact	s ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Incentive Stock Option (Right to Buy)	\$7.18	12/09/2009		A		14,591		12/09/2010	)(1)	12/08/2019	Common Stock	14,591	\$0	14,59	)1	D	
Non- Qualified Stock Option (Right to Buy)	\$7.18	12/09/2009		A		285,409		12/09/2010	)(1)	12/08/2019	Common Stock	285,409	\$0	285,40	09	D	
Restricted Stock	(2)	12/09/2009		A		50,000		(3)		(3)	Common Stock	50,000	\$0	50,00	00	D	

## **Explanation of Responses:**

- 1. Options granted pursuant to Issuer's 2000 Equity Incentive Plan. Twenty five percent (25%) of the shares vest one year from the grant date, and the remaining shares vest in 36 equal monthly installments
- 2. Each Restricted Stock Unit represents a contingent right to receive one share of EXEL common stock.
- 3. Restricted Stock Units granted pursuant to Issuer's 2000 Equity Incentive Plan. 1/4th of the original number of shares subject to the Restricted Stock Units will vest on February 15, 2011 and thereafter as to 1/16th of the original number of shares subject to the Restricted Stock Units on each succeeding May 15, August 15, November 15 and February 15. Vested shares will be delivered to the reporting person on the vesting date, provided that delivery may be delayed pursuant to the terms of the award agreement.

## Remarks:

/s/ James B. Bucher, Attorney in 12/11/2009 Fact

\*\* 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.