**EXELIXIS INC** Form 4/A March 29, 2005

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

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

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

(Last)

1. Name and Address of Reporting Person \* Garber Alan M

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

EXELIXIS INC [EXEL]

(First) (Middle) 3. Date of Earliest Transaction

X\_ Director 10% Owner Officer (give title Other (specify

(Check all applicable)

C/O EXELIXIS, INC., 170 HARBOR WAY, PO BOX 511

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year) 01/04/2005

(Month/Day/Year)

01/01/2005

6. Individual or Joint/Group Filing(Check

Applicable Line)

below)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

**SOUTH SAN** 

FRANCISCO, CA 94083-0511

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if anv (Month/Day/Year)

4. Securities TransactionAcquired (A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

(A) or

Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Month/Day/Year)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if

any

4. 5. Number of TransactionDerivative Code Securities

6. Date Exercisable and Expiration Date

7. Title and Amour **Underlying Securit** (Instr. 3 and 4)

## Edgar Filing: EXELIXIS INC - Form 4/A

(Instr. 3) Price of Derivative Security

(Month/Day/Year) (Instr. 8) Acquired (A)

or Disposed of (D)

(Instr. 3, 4, and 5)

Code V (A)

(D) Date Exercisable

Other

Expiration Date

Title

e Amo or

> Num of Sh

> > 25,0

Option

(right to \$ 9.5 buy)

01/01/2005

A 25,000

01/01/2005(1)(2) 12/31/2014

Common Stock

**Reporting Owners** 

Relationships

**Reporting Owner Name / Address** 

Director 10% Owner Officer

Garber Alan M C/O EXELIXIS, INC. 170 HARBOR WAY, PO BOX 511 SOUTH SAN FRANCISCO, CA 94083-0511

**Signatures** 

/s/ Christoph Pereira, Attorney In Fact

03/29/2005

X

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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).
- Options granted pursuant to Issuer's 2000 Non-employee Director's Plan. Twenty five percent (25%) of the shares vest on 1/1/06, and the remaining shares vest in 36 equal monthly installments thereafter.
- (2) The exercise date was incorrectly stated in the reporting person's original Form 4.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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