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Washingtor Form 4	n Robin L									
January 23,	2009									
FORM	ЛД								PPROVAL	
	UNITED	STATES		RITIES A Ashington			E COMMISSIO	N OMB Number:	3235-0287	
Check t if no lo subject Section Form 4	to STATEN 16.								January 31, 2005 average urs per . 0.5	
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17(Public U		ding Cor					
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Washington Robin L			Symbol	er Name and AD SCIEN			5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)		of Earliest T			(Check all applicable)			
GILEAD SCIENCES, INC., 333 LAKESIDE DRIVE				Day/Year)			Director 10% Owner X Officer (give title Other (specify below) SVP, CFO			
	(Street)			endment, D onth/Day/Yea	-	ıl	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
FOSTER C	CITY, CA 94404							More than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.			
							espond to the colle ntained in this forn		SEC 1474 (9-02)	

required to respond to the conection of (9-02) required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amour
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securit
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	o (1 (1		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Options (right to buy)	\$ 47.2	01/21/2009		Α		50,000		<u>(1)</u>	01/21/2019	Common Stock	50,0

Reporting Owners

Reporting Owner Name / Address		Relatio		
	Director	10% Owner	Officer	Other
Washington Robin L GILEAD SCIENCES, INC. 333 LAKESIDE DRIVE FOSTER CITY, CA 94404			SVP, CFO	
Signatures				
/s/ Kristen M. Metza by Power	01/23/2009			

Washington

**Signature of Reporting Person

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).
- (1) The options have a five year vesting schedule. 20% of the options will vest on January 21, 2010 the first anniversary date of the grant. The balance will vest 5% every three months thereafter until fully vested on January 21, 2014.

Date

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.