Alton Gregg H Form 4 March 03, 2009

### FORM 4

#### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Expires: January 31, 2005

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

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

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Alton Gregg H	Reporting Person *	2. Issuer Name and Ticker or Trading Symbol GILEAD SCIENCES INC [GILD]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First	) (Middle)	3. Date of Earliest Transaction	(Check an applicable)		
GILEAD SCIENCES, INC., 333 LAKESIDE DRIVE		(Month/Day/Year) 03/02/2009	Director 10% Owner Strong Other (specify below) SVP, General Counsel		
(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
FOSTER CITY, CA 94404		Filed(Month/Day/Year)			

(City)	(State)	(Zip) Tab	le I - Non-	Derivative Securities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities Acquired (A) oner Disposed of (D) (Instr. 3, 4 and 5)  (A) or Amount (D) Price	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)
Common	03/02/2009		M	3,000 A \$8.9425	57,696	D	

Common Stock D 3,000 D \$ 44.1307 54,696 D

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

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 control number.

SEC 1474

(9-02)

### Edgar Filing: Alton Gregg H - Form 4

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number conf Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non Qualified Stock Option (right to buy)	\$ 8.9425	03/02/2009		M	3,000	(1)	01/28/2013	Common Stock	3,000

## **Reporting Owners**

Reporting Owner Name / Address			Relationships	
	D:4	100/ 0	Off.	Othor

Director 10% Owner Officer Other

Alton Gregg H GILEAD SCIENCES, INC. 333 LAKESIDE DRIVE FOSTER CITY, CA 94404

SVP, General Counsel

### **Signatures**

/s/ Robin L. Washington by Power of Attorney for Gregg H.
Alton

03/03/2009

\*\*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).
- (1) The options had a five year vesting schedule. 20% of the options vested on January 29, 2004, the first anniversary date of the grant. The balance vested 5% every three months thereafter until fully vested January 29, 2008.

#### **Remarks:**

The exercise and sale transactions reported in this Form 4 made pursuant to a Rule 10b5-1 trading plan established by Mr. Alto 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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