GILEAD SCIENCES INC

Form 5

January 24, 2014

OMB APPROVAL FORM 5 **OMB**

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported 30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1(b).

1. Name and A Washington	ddress of Reporting F Robin L	Symbol	2. Issuer Name and Ticker or Trading Symbol GILEAD SCIENCES INC [GILD]			I	5. Relationship of Reporting Person(s) to Issuer			
(Last) GILEAD SO LAKESIDE	CIENCES, INC.,Â	(Month/ 12/31/2	nent for Issuer's Day/Year) 2013	Fiscal Year	r Ende	- -	Director _X Officer (give elow)		Owner er (specify	
	(Street)		endment, Date (onth/Day/Year)	Original		6	. Individual or Jo	oint/Group Repo	C	
	TY, CA 9440	4				_	X_ Form Filed by 0 Form Filed by 0 erson	One Reporting Pe More than One Re		
(City)	(State)	Zip) Tak	ole I - Non-Deri	ivative Secu	ırities	Acqui	red, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	(A) or Dis (D) (Instr. 3, 4	sposed	of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	01/30/2013	Â	A4	20,000 (1)	A	\$0	20,000	D	Â	

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.

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

SEC 2270

(9-02)

3235-0362

January 31,

2005

1.0

Number:

Expires:

response...

Estimated average

burden hours per

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	nt of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired						
					(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration		Number		
						Exercisable	Date		of		
					(A) (D)				Shares		
					(4) (1)				SHales		

Reporting Owners

Reporting Owner Name / Address	Relationships							
reporting o wher runne, runne os	Director	10% Owner	Officer	Other				
Washington Robin L								
GILEAD SCIENCES, INC. 333 LAKESIDE DRIVE	Â	Â	SVP, CFO	Â				
FOSTER CITY, CA 94404								

Signatures

/s/ John F. Milligan by Power of Attorney for Robin L.
Washington

01/24/2014

**Signature of Reporting Person

Date

of D

Is Fi

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).

Represents shares of the Issuer's common stock subject to a specific tranche of the performance share award made to the Reporting Person on January 26, 2012. Such tranche of shares was subject to both performance-vesting and service-vesting requirements. The performance vesting requirement was deemed satisfied on the date reported in Column 2 above upon certification of performance goal attainment by the Compensation Committee of the Issuer's Board of Directors. However, the shares will not be actually issued to the Reporting Person until such individual satisfies the applicable service-vesting requirement by continuing in the Issuer's employ through December 31, 2014.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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