Alton Gregg H Form 4 October 22, 2010

### 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 Form 5

obligations

may continue.

See Instruction

ES IN BENEFICIAL OWNERSHIP OF

Expires:

January 31,
2005

Estimated average burden hours per response...

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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).

(C:t-)

(Print or Type Responses)

(Ctata)

1. Name and Address of Reporting Person Alton Gregg H	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			
GILEAD SCIENCES, INC., 333 LAKESIDE DRIVE	(Month/Day/Year) 10/20/2010	Director 10% Owner _X Officer (give title Other (specify below)  EVP, Corp & Med Affairs		
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
FOSTER CITY, CA 94404	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tabl	le I - Non-D	<b>Derivative</b>	Secu	rities Acqu	ired, 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. Transaction Code (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ispose 4 and (A) or	ed 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)
Common Stock	10/20/2010		M	1,500	A	\$ 15.265	36,637	D	
Common Stock	10/20/2010		S	1,500	D	\$ 39	35,137	D	

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

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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. Transactio Code (Instr. 8)	5. Number of 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 Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shares
Non-Qualified Stock Option (rght to buy)	\$ 15.265	10/20/2010		M	1,500	(1)	01/28/2014	Common Stock	1,50

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

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

EVP, Corp & Med Affairs

### **Signatures**

/s/ Kristen Metza, by Power of Attorney for Gregg H.
Alton
10/22/2010

\*\*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 have a 5 year vesting schedule. 20% of the options vested on January 28, 2005, the first anniversary of the date of the grant. The balance vested 5% every three months thereafter until fully vested on January 28, 2009. The options expire on January 28, 2014.

#### **Remarks:**

The exercise and sale transactions reported in this Form 4 are made pursuant to a Rule 105b-1 trading plan established by Mr.

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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