FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGE	S IN BENEFICIA	AL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* REESE DAVID M						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
(Last) ONE AM	(Fir	rst) (I ITER DRIVE	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/02/2022									EVP, Research and Development							
(Street) THOUS. OAKS (City)		ate) (.	Zip)		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	l - No	n-Deriva	tive S	Secui	rities	Acc	uired	l, Dis	posed of	, or E	enefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				Execution Date,		,	3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3 5)				4 and Secu Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) o (D)	r Price		Transa	action(s) 3 and 4)			(11150.4)	
Common Stock 11/02			11/02/20	022				F 2,440 ⁽¹		2,440(1)	D	\$272	2.06	48,136 ⁽²⁾⁽³⁾			D			
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)	if any	emed tion Date, n/Day/Year)	4. Transa Code (8)		of	ired r osed) : 3, 4	6. Date Expira (Month	ition Day/\		7. Titl Amou Secun Under Derivi Secun 3 and	nt of ities lying ative ity (Instr.	Der	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. 2,440 shares issuable upon the vesting of Restricted Stock Units (RSUs) and related Dividend Equivalents (DEs) on 11/2/2022 were withheld by the Company to cover related tax withholding obligations.
- 2. These shares include the following RSUs granted under the Company's equity plans: 1,534 RSUs which will vest on 5/3/2023; 2,325 RSUs which vest in installments of 1,145 on 5/5/2023 and 1,180 on 5/5/2024; 4,006 RSUs which vest in installments of 1,321 on 4/30/2023, 1,322 on 4/30/2024 and 1,363 on 4/30/2025; and 3,897 RSUs which will vest in two installments of 1,286 on 5/2/2024 and 5/2/2025, and one installment of 1,325 on 5/2/2026. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 3. These shares include 611 DEs granted pursuant to the Amgen Inc. Amended and Restated 2009 Equity Incentive Plan and subject to a qualifying dividend reinvestment plan. DEs are credited to the reporting person's unvested RSUs and are paid out in shares of the Company's common stock on a one-to-one basis according to the vesting schedule, along with a cash payment for any remaining fractional share amount.

/s/ David M. Reese

11/03/2022

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.