FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

C. 20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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* Balachandran Madhavan (Last) (First) (Middle)																Check a	II apı Dire	er (give title w)		10% C Other (below)	wner (specify
ONE AM	IGEN CEN	03/	03/04/2015												EVP, O	pera	itions				
(Street) THOUSAND OAKS CA 91320-1799						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)			Feisui															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I					Execution I			•,	Transaction Dis		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Secu Bene		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount	(A) or (D)		Price	Trans		action(s) 3 and 4)			(111301.4)
Common Stock 03/04/					4/201	2015			A		15,84	5	A	\$	0	51,352(1)(2)			D		
Common Stock																	47,755			I	By Family Trust
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)	erivative Conversion Date Execution Date, Trecurity or Exercise (Month/Day/Year) if any					ransaction of ode (Instr. Derivati			Ex	Date Expiration	n Date	ar) Securities Underlying Derivative Security (Instr. and 4)			of es ng ve (Instr. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	(10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code		v	(A)	(D)		ate xercisal		Expiration Date	Title	0	or Number of Shares	r								

Explanation of Responses:

1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 1,530 RSUs which vest in one installment on 4/25/2015; 1,684 RSUs which vest in two installments of 829 and 855 on 4/27/2015 and 4/27/2016, respectively; 17,845 RSUs which vest in one installment of 8,789 on 7/31/2015 and one installment of 9,056 on 7/31/2016 and one installment of 2,543 on 1/28/2017; 4,707 RSUs which vest in two equal installments of 1,553 each on 1/31/2016 and 1/31/2017 and one installment of 1,601 on 1/31/2018; and 3,677 RSUs which vest in two equal installments of 1,213 on 1/30/2017 and 1/30/2018 and one installment of 1,251 on 1/30/2019. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.

2. These shares include 1,054 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. 2009 Amended and Restated Equity Incentive Plan and subject to a qualifying dividend reinvestment plan. DEs are credited on 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/ Madhavan Balachandran

03/06/2015

** 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.