SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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hours per response:	0.5

*	2. Issuer Name and Ticker or Trading Symbol	
1. Name and Address of Reporting Person [*] Graham Jonathan P	AMGEN INC [AMGN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE	3. Date of Earliest Transaction (Month/Day/Year) 11/01/2022	EVP, Gen. Counsel & Secy.
(Street) THOUSAND OAKS CA 91320-	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) (State) (Zip)	n-Derivative Securities Acquired Disposed of or Ben	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	11/01/2022		F		1,644 ⁽¹⁾	D	\$270.35	33,963 ⁽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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/\	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. 1,644 shares issuable upon the vesting of Restricted Stock Units (RSUs) and related Dividend Equivalents (DEs) on 11/1/2022 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: 1,074 RSUs which will vest on 5/3/2023; 3,120 RSUs which will vest on 11/1/2023; 2,211 RSUs which will vest in installments of 1,089 on 5/5/2023 and 1,122 on 5/5/2024; 3,797 RSUs which will vest in two installments of 1,253 on 4/30/2023 and 4/30/2024 and one installment of 1,291 on 4/30/2025; and 3,377 RSUs which will vest in two installments of 1,114 on 5/2/2024 and 5/2/2025, and one installment of 1,149 on 5/2/2026. Vested RSUs will be paid in shares of the Company's common stock on a one-toone basis.

3. These shares include 825 DEs granted pursuant to the Amgen Inc. 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/ Jonathan P. Graham 11/01/2022

** 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See ſ

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP