FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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]								(Che	5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director Officer (give title Other (spe						
(Last) ONE AN	st) (First) (Middle) TE AMGEN CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/02/2021									X below) below) EVP, Research and Development					
(Street) THOUS OAKS (City)		ate) (Z	Zip)		4. If A	Line)										dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Disp	osed of	, or E	Benef	ficiall	y Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date				Execution			Date,	Transaction Disposed Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3,		4 and Securi Benefi		ies cially Following	Form (D) o	n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) or (D)		rice	Transa	insaction(s) str. 3 and 4)			(1130.4)	
Common Stock 03/02/					/2021				A		2,803	A	A	\$ <mark>0</mark>	43,7	43,715(1)(2)		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. Deen Executio if any (Month/D	n Date,	4. Transa Code (8)			6. Date I Expiration (Month/II) Date Exercise	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Str. D. Str. Unit	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				

Explanation of Responses:

- 1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 1,673 RSUs which vest on 5/1/2021; 335 RSUs which vest on 5/1/2021; 680 RSUs which vest in installments of 335 on 4/27/2021 and 345 on 4/27/2022; 8,597 RSUs which vest in installments of 4,234 on 11/2/2021 and 4,363 on 11/2/2022; 4,511 RSUs which will vest in installments of 1,488 on 5/3/2021, 1,489 on 5/3/2022 and 1,534 on 5/3/2023; and 3,469 RSUs which vest in installments of 1,144 on 5/5/2022, 1,145 on 5/5/2023 and 1,180 on 5/5/2024. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. These shares include 1,152 Dividend Equivalents (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 03/03/2021

** Signature of Reporting Person

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.