## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

## F 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*						2. Issuer Name <b>and</b> Ticker or Trading Symbol AMGEN INC [ AMGN ]									(Check all ap		olicable) ctor	10	Person(s) to Iss	
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 01/31/2016									X	belov	,	b	Other (spec below) I Resources	
(Street) THOUSA OAKS (City)	C		)1320-17 Zip)	799	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individue)	rvidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				on
(City)	(5)	, ,		n Doris	rative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				ction	tion 2A. Deemed Execution Date,		3. 4. Securitie			es Acquired (A) o Of (D) (Instr. 3, 4			or 5. Am and 5) Secur Benef		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A) or (D) Pri		Price	Transaction(s)		action(s)			(111311. 4)
Common Stock 01/31/2					/2016	2016		F		251	]	)	\$152.73		20,478(1)(2)		D			
Common Stock															593.142 <sup>(3)</sup>		I		401(k) Plan	
	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  2. Conversion Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)  3 (Month/Day/Year)  4. Transaction Date (Month/Day/Year)  5. Conversion or Exercise Price of Derivative Security					saction le (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Number of Title Shares		ount	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## Explanation of Responses:

- 1. These shares include 237 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 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.
- 2. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 449 RSUs which vest on 4/27/2016; 658 RSUs which vest in one installment of 324 on 4/26/2016 and one installment of 334 on 4/26/2017; 2,131 RSUs which vest in two installment of 1,049 on 10/25/2016 and one installment of 1,082 on 1/31/2017 and 1/31/2018, respectively; and 1,576 RSUs which vest in two equal installments of 520 on 1/30/2017 and 1/30/2018 and one installment of 536 on 1/30/2019. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 3. These are shares acquired under the Company's 401(k) Plan and represent interests in the Company's stock fund as of this filing.

02/01/2016 /s/ Stuart A. Tross

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.