FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* Santos Esteban						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									all app Direc	licable) tor er (give title	Ü	erson(s) to Is 10% O Other (wner
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/01/2020									71	belov	v) EVP, O	pera	below) tions	
(Street) THOUSAND CA 91320-1			1799	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								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) (ž	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)						Execution Date,			3. Transa Code (8)		4. Securities Disposed O 5)			and Securi Benefi		cially I Following	Fori	m: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) o (D)	r Price		Transa	action(s) 3 and 4)			(111341.4)
Common Stock 08/01/20					.020)20			F		2,165	D	\$244	\$244.67		44,376(1)(2)		D	
Common Stock															760.634 ⁽³⁾		1 1	401K 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Der Sec	Price of ivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 1,171 RSUs which vest on 5/1/2021; 2,114 RSUs which vest in installments of 1,041 on 4/27/2021 and 1,073 on 4/27/2022; 3,947 RSUs which vest in installments of 1,302 on 5/3/2021, 1,303 on 5/3/2022 and 1,342 on 5/3/2023; and 3,384 RSUs which vest in installments of 1,116 on 5/5/2022, 1,117 on 5/5/2023 and 1,151 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 424 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.
- 3. These shares are acquired under the Company's 401(k) Plan and represent interests in the Company's stock fund as of this filing.

/s/ Andrea A. Robinson,

08/03/2020 Attorney-in-Fact for Mr.

Santos

** 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.