FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

| STATEMENT | OF CHANGES I | N BENEFICIAL | OWNERSHIP |
|-----------|--------------|--------------|-----------|
| | | | |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* HENDERSON REBECCA M | | | | | 2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|------------------------|-----------------------------|---|----------------------|--|---|--------|-----------------------------------|--|---|---------------------|----------------|--|---|---|---|--|--|--|
| (Last) ONE AN | , | irst) ITER DRIVE | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/10/2018 | | | | | | | | Office | Officer (give title below) | | Other (s below) | | |
| (Street) THOUS | THOUSAND CA 01320 1700 | | | | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable lee) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | le I - No | n-Deri | vative | Sec | curiti | ies Ac | quired, | Dis | sposed o | of, or Be | neficia | lly Owne | d | | | | |
| Date | | 2. Trans Date (Month/ | | Exe ay/Year) if a | | 2A. Deemed Execution Date, f any (Month/Day/Year) | | Transaction Disposed Code (Instr. | | ties Acquired (A) or d Of (D) (Instr. 3, 4 a | | Benefic | ies ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | Code V Amount | | (A) or (D) | Price | Transa (Instr. 3 | ction(s) | | | (Instr. 4) | |
| Common Stock 08/1 | | | 08/10 |)/2018 | 2018 | | М | | 3,000 | A | \$63.3 | 1 16,197 | | | D | | | | |
| Common Stock 08/10/2 | | |)/2018 | 2018 | | F | | 977 | D | \$193. | 97 15,2 | 7 15,220(1)(2) | | D | | | | | |
| | | Т | able II - | | | | | | | | osed of converti | | | / Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security | | se (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/ | n Date, | Date, Transac Code (I | | | | 6. Date Exercis Expiration Date (Month/Day/Yea | | e Amount of | | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transactic (Instr. 4) | s S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal: | | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Nqso (Right to | \$ 63.11 | 08/10/2018 | | | M | | | 3.000 | 07/30/201 | 10 (| 07/30/2019 | Common | 3,000 | \$0 | 0 | | D | | |

Explanation of Responses:

Buy)

- 1. Non-market exercise of 3,000 stock options expiring July 30, 2019 wherein 977 shares issuable pursuant to the exercise of these options were withheld by the Company to cover the option exercise price, with the remaining shares delivered to the reporting person.
- 2. These shares include 1,191 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. 2009 Director Incentive Program, as amended, under the Amgen Inc. 2009 Amended and Restated Equity Incentive Plan, and subject to a qualifying dividend reinvestment plan. DEs are credited on the director's vested but deferred RSUs and are paid out in shares of the Company's Common Stock on a one-to-one basis along with a cash payment for any remaining fractional share amount.

/s/ Andrea Robinson, Attorney- 08/14/2018 in-Fact for Dr. Henderson

** 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.