

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
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1. Name and Address of Reporting Person* <u>Graham Jonathan P</u> (Last) (First) (Middle) ONE AMGEN CENTER DRIVE (Street) THOUSAND CA 91320-1799 OAKS (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>AMGEN INC [AMGN]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) <u>SVP, Gen. Counsel & Secy.</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>05/03/2016</u>	
		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person

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. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock	05/03/2016		A		2,942 ⁽¹⁾	A	\$0	52,982 ⁽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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of 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					
Nqso (Right to Buy)	\$156.35	05/03/2016		A		25,045		05/03/2018 ⁽⁴⁾	05/03/2026	Common Stock	\$0	25,045	D	

Explanation of Responses:

- The Restricted Stock Units (RSUs) were granted pursuant to the Amgen Inc. 2009 Amended and Restated Equity Incentive Plan and vest in three installments of 33%, 33% and 34% on 5/3/2018, 5/3/2019 and 5/3/2020, respectively.
- These shares include the following RSUs granted under the Company's equity plans: 49,199 RSUs which vest in one installment of 12,299 on 8/4/2016 and three equal installments of 12,300 on 8/4/2017, 8/4/2018 and 8/4/2019; and 2,942 RSUs which vest in three installments of 970 on 5/3/2018, 971 on 5/3/2019 and 1,001 on 5/3/2020.
- These shares include 841 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. Amended and Restated Equity Incentive Plan and subject to a qualifying dividend reinvestment plan. DEs are credit 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.
- These non-qualified stock options are exercisable in three installments of 33%, 33% and 34% on 5/3/2018, 5/3/2019 and 5/3/2020, respectively.

/s/ Jonathan P. Graham

05/05/2016

** 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.