## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	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*  Patton Cynthia M						2. Issuer Name <b>and</b> Ticker or Trading Symbol AMGEN INC [ AMGN ]									Check	ionship of Reportin all applicable) Director Officer (give title		10% C		Owner
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 03/25/2016									X	belov	v) ``		Other (specify below)	
(Street) THOUSA OAKS (City)	OUSAND CA 91320-1799 KS				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indivi ne) X	ividual or Joint/Group Filing (Check Applicable  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. Transact Date (Month/Day					Execution Date,		Transaction Dispose Code (Instr.		4. Securiti Disposed	ties Acquired (A) l Of (D) (Instr. 3, 4		A) or , 4 an	and 5) Secu Bene Own		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A)	or	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 03/25/2					/2016	2016		F		6,354		D S	\$149	9.24 21		108(1)(2)	D			
Common Stock											240.2152 <sup>(3)</sup>		I		401(k) Plan					
		Та									sed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	rative rity (Conversion or Exercise Price of Derivative Security		4. Transa Code ( 8)	Instr.		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 Numbe of		unt ber	ı		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct or India (I) (Inst	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

## Explanation of Responses:

- 1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 408 RSUs which vest on 4/27/2016; 1,843 RSUs which vest on 10/26/2016; 716 RSUs which vest on 1/28/2017; 732 RSUs which vest in one installment of 360 on 1/31/2017 and one installment of 372 on 1/31/2018; and 919 shares that vest in two equal installments of 303 on 1/30/2017 and 1/30/2018 and one installment of 313 on 1/30/2019. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. These shares include 268 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. 2009 Amended and Restated 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.
- 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.

/s/ Andrea A. Robinson,

Attorney-in-Fact for Ms.

03/28/2016

Patton

\*\* 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.