FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

Name and Address of Reporting Person* de Carbonnel Francois						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									5. Relationshi (Check all app X Direct		icable)	,	o Issuer 6 Owner
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 05/01/2017										Office elow	r (give title)		er (specify ow)
(Street) THOUS A OAKS (City)	THOUSAND CA 91320-1799			799	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark> I	vidual 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,			3. 4. Securition			es Acquired (A) o Of (D) (Instr. 3, 4 a			and 5) Securi Benefi		ies cially Following	6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect Beneficial Ownership
									Code	v	Amount	(A (D) or)	Price	Co Tra		ction(s) and 4)		(Instr. 4)
Common Stock 05/01/2						017		A		1,230(1)		A	\$0		19,841		D		
Common Stock 05/01/2					2017	.017		F		343		D	\$163.32		19,498(2)		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) 3. Deemed Execution Date, if any (Month/Day/Year)		n Date, Day/Year) -	4. Transact Code (In: 8)	e (Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/L	on Dai	e Am. ar) Sec Unc Der Sec and		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Security Security Security Security (Instr. and 5)		8. Price Derivat Securit (Instr. 5	ive y)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersi Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ot (Instr. 4)		

Explanation of Responses:

1. The Restricted Stock Units (RSUs) were granted pursuant to the Amgen Inc. 2009 Director Incentive Program, as amended, under the Amgen Inc. 2009 Amended and Restated Equity Incentive Plan (the Director Program) and vested immediately. Vested RSUs are paid in shares of the Company's common stock on a one-to-one basis. Vested RSUs may be deferred by the director, in which case, payment will occur according to the elected deferral schedule.

2. These shares include 247 Dividend Equivalents (DEs) granted pursuant to the Director Program and subject to a qualifying dividend reinvestment plan. DEs are credited on the director's vested but deferred Restricted Stock Units 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 A. Robinson,

05/03/2017 Attorney-in-Fact for Mr. de

Carbonnel

** 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.