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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-028							
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* ISHRAK OMAR				2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
		<u>IX</u>			<u> </u>				_				X	Direc	tor		10% Ov	wner
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/19/2023							Office below	er (give title v)		Other (below)	specify			
ONE AMGEN CENTER DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)													X	Form	i filed by Or	ie Rej	porting Pers	on
THOUS OAKS	AND CA	A 9	1320											Form Pers		ore tha	an One Rep	orting
					Rule	e 10)b5-1(c)	Trans	sact	tion Ind	licati	ion						
(City)	(St	ate) (ž	Zip)		 Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. 													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				2. Transac Date (Month/Day	Execution Date,		Transaction Disposed C Code (Instr. and 5)			ties Acquired (A I Of (D) (Instr. 3,			4 Securities Beneficially Owned Following		Forr (D) c	n: Direct of or I rect (I) (7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)) ^{or} P	Price Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 05/19/2				2023		A		939		A	\$ <mark>0</mark>	3,400.635 ⁽¹⁾⁽²⁾			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Security or Exercise (Month/Day/Year) if any		emed tion Date, n/Day/Year)	Date, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		Der Sed (Ins	Price of rivative curity str. 5)	ative derivative ity Securities	Owners Form: y Direct (E or Indire (I) (Instr	Ownership	Beneficial Ownership t (Instr. 4)		
						Π						Amou or						

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 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.

Date

Exercisable

Expiration Date

2. These shares include 40 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/	S.	Omar	Ishral	<u>x 0</u>	5/19/2023
				_	

of

Shares

Title

** 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).

Code

(A) (D)

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.