Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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STATEMENT OF	F CHANGES IN	BENEFICIAL	OWNERSHIP

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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* Griffith Peter H.			2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) ONE AN	`	rst) (MITER DRIVE	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/06/2024								X	Officer (give title below) EVP			Other (specify below)		
(Street) THOUS OAKS	AND CA	A 9	01320		4. If <i>A</i>	Amend	ment,	Date o	of Original Filed (Month/Day/Year)					6. Indi Line) X	Form	r Joint/Group Filing (Check Applicable n filed by One Reporting Person n filed by More than One Reporting on			
(City)	(St	ate) (2	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 - Noi	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	or B	enefic	cially	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execut ay/Year) if any		Deemed cution Date, ny nth/Day/Year)				es Acquired (A Of (D) (Instr. 3,			Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	Prio	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 0			03/06/	5/2024				A		10,338	A		\$ <mark>0</mark>	39,2	9,250(1)(2)		D		
		Tal								•	osed of, o			•	Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, (Day/Year)	4. Transaction Code (Instr. 8)		of	r osed) : 3, 4	6. Date Expirati (Month/	on Da Day/Y		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De See (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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: 1,151 RSUs which will vest on 5/5/2024; 2,237 RSUs which will vest in installments of 1,102 on 4/30/2024 and 1,135 on 4/30/2025; 3,897 RSUs which will vest in two installments of 1,286 each on 5/2/2024 and 5/2/2025, and one installment of 1,325 on 5/2/2026; and 3,814 RSUs which will vest in installments of 1,258 on 5/2/2025, 1,259 on 5/2/2026 and 1,297 on 5/2/2027. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. These shares include 683 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. Amended and Restated 2009 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 amount.

/s/ Peter H. Griffith

03/07/2024

** 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.