## FORM 4

Instruction 1(b)

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	<b>OWNERSHIP</b>
Section 16. Form 4 or Form 5		
obligations may continue. See		

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*     Harper Sean E						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [ AMGN ]										all app	p of Reportin blicable) ctor er (give title	ng Pers	10% C		
(Last) ONE AM	(Fi IGEN CEN	rst) ( TER DRIVE	Middle)			ate of 16/20		t Trans	action (	Month	/Day/Year)				X	belov	P, Research & Development				
(Street) THOUSA OAKS	AND CA	A 9	91320-17	799	4. If	Amer	idment,	Date o	of Origin	al File	d (Month/Da	ay/Ye	ear)		. Indivine)	Form	Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting in				
(City)	(St	ate) (	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Inst	r. 3)		2. Transa Date (Month/D		Ex r) if a	. Deeme ecution iny onth/Da	Date,	3. Trans Code 8)	action (Instr.	4. Securiti Disposed	es Ad Of (D	cquired )) (Instr.	(A) or 3, 4 an	d 5)	Securi Benefi	cially d Following	Form: Direct of Indirect (D) or Indirect Benefic (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price		Transa	action(s) 3 and 4)			(11311. 4)	
Common	Stock			07/16/	/2018				S		1,525(1	)	D	\$195	5.71	56,	082(2)(3)		D		
		Та									osed of, convertib					vned					
Security or Ex (Instr. 3) Price Deriv	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date, Transa Code (I			of Deriva Secur Acqui (A) or Dispo of (D) (Instr.	of		Exercion Da /Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		ı		vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	wnership orm: irect (D) r Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Codo	,,	(A) (D)		Date	abla	Expiration	Tiel	or Nu of	mber	er						

## **Explanation of Responses:**

- 1. The transaction was made pursuant to a previously adopted plan complying with Rule 10b5-1.
- 2. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 1,340 RSUs which vest in one installment on 1/30/2019; 3,000 RSUs which vest in installments of 1,477 5/3/2019 and 1,523 on 5/3/2020; 4,551 RSUs which vest in installments of 1,487 on 1,4874/27/2020, 1,488 on 4/27/2021 and 1,533 on 4/27/2022. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 3. These shares include 495 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.

/s/ Andrea A. Robinson, 07/16/2018 Attorney-in-Fact for Dr. Harper

\*\* 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.