SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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1. Name and Addres <u>Piacquad Dav</u>	ss of Reporting Person 7 <u>id</u>	n*	2. Issuer Name and Ticker or Trading Symbol <u>AMGEN INC</u> [AMGN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Confficer (give title Other (specify				
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/04/2015	X	below) SVP, Business De	below)		
(Street) THOUSAND OAKS	CA	91320-1799	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filir Form filed by One Rep Form filed by More tha Person	porting Person		
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Disposed Of 5)			Securities Beneficially	(D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	03/04/2015		A		9,459	Α	\$ <mark>0</mark>	36,321 ⁽¹⁾⁽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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/N	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 632 RSUs which fully vest on 4/25/2015; 1,005 RSUs which vest in two annual installments of 495 on 4/27/2015 and 510 on 4/27/2016; 840 RSUs which vest in two equal installments of 277 each on 4/26/2015 and 4/26/2016 and one installment of 286 on 4/26/2017; 9,226 RSUs which vest in two equal installments of 4,613 each on 4/26/2015 and 4/26/2017; 1,166 RSUs which vest in annual installments of 384, 385 and 397 on 4/25/2016, 4/25/2017 and 4/25/2018, respectively; and 1,050 RSUs which vest in three annual installments of 346, 347 and 357 on 1/30/2017, 1/30/2018 and 1/30/2019, respectively. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis

2. These shares include 386 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 amount.



** Signature of Reporting Person Date

03/06/2015

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.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP