## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

OMB APPROVAL OMB Number: Estimated average burden 0.5

hours per response: 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 ]									Check	all app	onship of Reporting P Il applicable) Director Officer (give title		erson(s) to Issuer  10% Owner  Other (specify	
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 03/16/2018									X	belov			below)	
(Street) THOUSA OAKS	C.	CA 91320-1		799	4. If Amendment, Date			Date o	of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(St		Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					Date (Month/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			and 5) Se		Securities I Beneficially (		nership Direct Indirect str. 4)	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 03/16/2					2018				S		1,525(1)	)	D	\$189.75		65,682(2)(3)			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. Deem Execution if any (Month/D	n Date, Transa Code (I					6. Date Exerci Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3		rative rity 7. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ov Fo Dii or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Codo	v	(0)		Date Exercis		Expiration	Title	Nu of	mber						

## **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; 4,477 RSUs which vest in two equal installments of 1,477 on 5/3/2018 and 5/3/2019 and one installment of 1,523 on 5/3/2020; and 4,551 RSUs which vest in installments of 1,501 on 5/1/2019, 1,502 on 5/1/2029 and 1,548 on 5/1/2021. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 3. These shares include 403 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/ Sean E. Harper 03/19/2018

\*\* 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.