SEC Form 4

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	Number: 3235-0287							
Estimated average burden								
hours per response	: 0.5							

Obligations may continue. See Instruction 1(b).	Filed	pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response: 0.5							
	T lieu	or Section 30(h) of the Investment Company Act of 1940								
1. Name and Address of Reporting Person* <u>REESE DAVID M</u>		2. Issuer Name and Ticker or Trading Symbol <u>AMGEN INC</u> [AMGN]	(Check all applicab Director	10% Owner						
(Last) (First) (Mi	ddle)	3. Date of Earliest Transaction (Month/Day/Year)	X below)	below)						
ONE AMGEN CENTER DRIVE		03/18/2022	EVP, Rese	earch and Development						
(Street)		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)							
THOUSAND			l í	d by One Reporting Person						
OAKS				d by More than One Reporting						
(City) (State) (Zip	D)									
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										

curities Acquired, Disposed of, 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5. Amount of Securities Beneficially 6. Ownership Form: Direct 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 7. Nature Date Execution Date, Transaction of Indirect (Month/Day/Year) (D) or Indirect Beneficial if any Code (Instr. 5) Ownership (Month/Day/Year) 8) Owned Following (I) (Instr. 4) Reported (Instr. 4) (A) or (D) Transaction(s) (Instr. 3 and 4) Code v Amount Price 03/18/2022 F 4,995 D \$235.86 47,939(1)(2) D

Common	1 Stock		03/18/2	2022				F		4,995	D	\$235	6.86 47	,939 ⁽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. Transaction Code (Instr. Derivative		s. Number of de (Instr. (A) or Disposed of (D) (Instr. 3, 4		Deriv	unt of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. These shares include the following RSUs granted under the Company's equity plans: 345 RSUs which will vest on 4/27/2022; 4,363 RSUs which will vest on 11/2/2022; 3,023 RSUs which will vest in installments of 1,489 on 5/3/2022 and 1,534 on 5/3/2023; 3,469 RSUs which vest in installments of 1,144 on 5/5/2022, 1,145 on 5/5/2023 and 1,180 on 5/5/2024; and 4,006 RSUs which vest in installments of 1,321 on 4/30/2023, 1,322 on 4/30/2024 and 1,363 on 4/30/2025. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.

2. These shares include 1,148 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 to 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.



** Signature of Reporting Person Date

03/18/2022

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.