FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to	STATEMENT OF C
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to

HANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* MCNAMEE BRIAN M					2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]										all app Dired	olicable)		Person(s) to Issue 10% Owne Other (spe		
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 04/27/2016										X	belov	w) ``		pelow)	
(Street) THOUS A OAKS	AND CA	A 9	91320-17	' 99	4. If	If Amendment, Date 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					on
(City)	(St	ate) (Zip)																	
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, o	or Ben	efici	ally	Owne	ed			
Date				2. Transa Date (Month/D		Exer) if a	ecution ny	Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			l and 5) S B C		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(11341. 4)
Common Stock 04/2			04/27/	/2016				F		818		D	\$162	2.85	88,408(1)(2)		D			
		Та									osed of, onvertib					wned				
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, T	4. Transa Code (8)	Instr.	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expiration (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) Amou or Numb of Title		nstr. 3	Deri Sec (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) irect	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: 1,510 RSUs which vest on 1/28/2017; 3,800 RSUs which vest in one installment on 10/25/2016; 3,154 RSUs which vest in one installment of 1,553 on 1/31/2017 and one installment of 1,601 on 1/31/2018; and 3,677 RSUs which vest in two equal installments of 1,213 on 1/30/2017 and 1/30/2018 and one installment of 1,251 on 1/30/2019. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. These shares include 538 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,

Attorney-in-Fact for Mr.

McNamee

** Signature of Reporting Person Date

04/28/2016

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.