FORM 4

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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	CTATEMENT OF CHANGES IN DENEELOIAL CHANEDOLUS
Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									Check	tionship of Reporti all applicable) Director Officer (give title		10% (
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/14/2018									X	belov	v) ``	& Deve	below) Development			
(Street) THOUSA OAKS	C.		91320-17	99	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) Y Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(51		Zip)		<u> </u>															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d 5)	Securities I Beneficially (6. Owne Form: D (D) or In (I) (Instr.	irect direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111501.4)
Common Stock 02/14				02/14/	/2018				S		1,525(1)		D	\$174	1.18	52,089(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) (Month/Day/Year) (Month/E		n Date,	4. Transaction Code (Instr. 8)		n of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/		Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3	Deriv Secu	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

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, respectively; 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 02/15/2018

** 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.