FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* <u>Such Annette Louise</u>					2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									Check all ap		ng Person(s) to I	wner		
(Last) ONE AM	`	irst) ((Middle)				of Earlies 2017	st Trans	action (N	/lonth	'Day/Year)				X belo	ow) T	below ce and CAO	(specify)	
(Street) THOUSA OAKS (City)			91320-17 (Zip)	799	4. If	Ame	endment	, Date o	f Origina	l Filed	d (Month/Da	ay/Ye	ear)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(5			n Doriv	otivo	Sa	ouritio	- Λο	unirod	Die	nocod o	.	r Bon	ofici	ally Own	and a			
Date				2. Transa	ction	2A. Deeme		ed Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			(A) or	5. An Secu Bene Own Repo	nount of rities ficially ed Following rited saction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	Stock			04/24	/2017	+			F	·	38		(D)	\$160	<u> </u>	8,103	D		
Common	Stock			04/24	/2017	\dagger			F		156	+	D	\$160	0.41 7	,947(1)(2)	D		
		Ta									osed of, onvertib				y Owned	I	,	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code (1 8)	nstr.	ı of	rities ired r osed) . 3, 4	Expiration (Month/E	Date Expiration Expired to the control of the cont			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of Title Shares		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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: 104 RSUs which vest on 4/26/2017; 195 RSUs which vest in one installment of 96 on 4/25/2017 and one installment of 99 on 4/25/2018; 1,334 RSUs which vest in one installment of 677 on 8/1/2017 and one installment of 97 on 8/1/2018; 191 RSUs which vest in one installment of 94 on 4/24/2018 and one installment of 97 on 4/24/2019; 798 RSUs which vest in one installment of 393 on 4/24/2018 and one installment of 405 on 4/24/2019; and 575 RSUs which vest in installments of 189 on 5/3/2018, 190 on 5/3/2019 and 196 on 5/3/2020. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. These shares include 171 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 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.

/s/ Annette L. Such 04/24/2017

** 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.