## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

## OF CHANGES 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* <u>Piacquad David</u>						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [ AMGN ]									Check	tionship of Reporting all applicable) Director Officer (give title		10%	Issuer Owner r (specify
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 03/23/2018										X	belov	v)	below s Developme	v)`	
(Street) THOUSA OAKS	AND CA	A 9	01320-17	<b>'</b> 99					nendment, 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				
(City)	(St	ate) (	Zip)																
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, o	r Ben	efici	ally	Owne	ed		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,		Date,	Transaction Disposed Of Code (Instr.			ies Acquired (A) o Of (D) (Instr. 3, 4			and 5) Secu		cially I Following	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)			(111341.4)
Common Stock 03/2				03/23/	3/2018				F		1,519		D	\$176	5.08	36,004(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. Deeme Execution if any (Month/Day	ed 4. n Date, Trans Code	Transa Code (		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3		vative urity tr. 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)
					Code	v			Date Exercisa	able	Expiration Date	Titl	of	ares					

## **Explanation of Responses:**

- 1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 397 RSUs which vest on 4/25/2018; 357 RSUs which vest in one installment on 1/30/2019; 1,023 RSUs with vest in 3 annual installments of 327, 338 and 348 on 5/3/2018, 5/3/2019 and 5/3/2020, respectively; and 984 RSUs which vest in installments of 324 on 5/1/2019, 325 on 5/1/2021. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. These shares include 150 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 amount.

/s/ David A. Piacquad 03/26/2018

\*\* Signature of Reporting Person

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.