| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| Estimated average burde | en | |
|-------------------------|----|-----|
| hours per response: | | 0.5 |
| | | |

| 1. Name and Addre | ss of Reporting Person | n* | 2. Issuer Name and Ticker or Trading Symbol <u>AMGEN INC</u> [AMGN] | | tionship of Reporting Pers all applicable) Director | on(s) to Issuer 10% Owner | |
|------------------------------|-------------------------|------------|---|------------------------|---|------------------------------|--|
| (Last) ONE AMGEN (| (First) CENTER DRIVE | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2017 | | Officer (give title below) | Other (specify below) | |
| (Street) THOUSAND OAKS | CA | 91320-1799 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | | | |
| (City) | (State) | (Zip) | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | | | | Securities | (D) or Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|-----------------------------|---|-------------------------|---|------------------------------------|-----------------------|-----------------|---|
| | | | Code | v | Amount (A) or (D) Price | | Transaction(s) (Instr. 3 and 4) | | (| |
| Common Stock | 05/01/2017 | | Α | | 1,230(1) | Α | \$ <mark>0</mark> | 11,286 ⁽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. Transa Code (8) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed . 3, 4 | Expiration Date (Month/Day/Year) ed | | Expiration Date Amount of | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | rivative Ownership curities neficially Direct (D) med Or Indirect (D) ported Insaction(s) | Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|---|---|--------------------|---------------------------|--|--|--|--|---------------------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. The Restricted Stock Units (RSUs) were granted pursuant to the Amgen Inc. 2009 Director Incentive Program, as amended, under the Amgen Inc. 2009 Amended and Restated Equity Incentive Plan (the Director Program) and vested immediately. Vested RSUs are paid in shares of the Company's common stock on a one-to-one basis. Vested RSUs may be deferred by the director, in which case, payment will occur according to the elected deferral schedule.

2. These shares include 723 Dividend Equivalents (DEs) granted pursuant to the Director Program and subject to a qualifying dividend reinvestment plan. DEs are credited on the director's vested but deferred RSUs and are paid out in shares of the Company's common stock on a one-to-one basis along with a cash payment for any remaining fractional share amount.

/s/ Ronald D. Sugar

** Signature of Reporting Person

05/03/2017

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.