Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:
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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								
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Balacha (Last)	me and Address of Reporting Person* achandran Madhavan) (First) (Middle) E AMGEN CENTER DRIVE						Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN] 3. Date of Earliest Transaction (Month/Day/Year) 03/05/2014								V Officer (give title Othe				10% C Other below	Owner (specify
(Street) THOUSA OAKS (City)	C.		91320-17 ⁰ (Zip)	99	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	le I - Nor	า-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally C	Dwne	ed			
Di			Date	Date (Month/Day/Year)		Executio f any	Ionth/Day/Year) 8)			5) (4) 01			l and Securities Beneficiall Owned Fol Reported Transactio		ties cially I Following ted action(s)	6. Owne Form: D (D) or In (I) (Instr	rect direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock				03/05/2014		+			A			11,043 A			(Instr. 3 and 4) 50 57.195(1)(2)			D		
Common Stock															34,851		I		By Family Trust	
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. Deem Execution if any (Month/Da	n Date, Pay/Year) Transac Code (In 8)			on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiratio (Month/D	Date Expiration Expiration Date Month/Day/Year) Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owr Forr Dire or In (I) (II	ership n: ct (D) direct nstr. 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: 875 RSUs which fully vest on 4/26/2014; 3,015 RSUs which vest in one installment of 1,485 on 4/25/2014 and one installment of 1,530 on 4/27/2015, z,512 RSUs which vest in two equal installments of 8,789 each on 7/31/2014 and 07/31/2015 and 4/27/2015 and 4/27/2015 and 1/28/2015 and 0.00 installments of 8,789 each on 7/31/2014 and 7/31/2015 and one installment of 9,056 on 7/31/2016; 7,477 RSUs which vest in two equal installments of 2,467 each on 1/28/2015 and 1/28/2016 and one installment of 2,543 on 1/28/2017; and 4,707 RSUs which vest in two equal installments of 1,553 each on 1/31/2016 and 1/31/2017 and one installment of 1,601 on 1/31/2018. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.

2. These shares include 932 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. 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 share amount.

> /s/ Madhavan Balachandran 03/06/2014

** 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.