SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

Filing (Check Applicable

					• • • • •
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	-	T OF CHANGES IN BENEFICIAL OWN pursuant to Section 16(a) of the Securities Exchange Act of 193- or Section 30(h) of the Investment Company Act of 1940	_	OMB Number: Estimated average bu hours per response:	3235-0287 rden 0.5
1. Name and Address of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol	5. Relationship of R (Check all applicable)	Reporting Person(s) to	Issuer

Khosla Rac	<u>hna</u>		AMOLININC	ľ	Director	10% Owner
(Last) ONE AMGEN	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/02/2024	X	Officer (give title below) SVP, Business De	Other (specify below) evelopment
(Street) THOUSAND	СА	91320	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Fil Form filed by One Re Form filed by More th	eporting Person
OAKS (City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication		Person	
			Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See			lan that is intended to
	Ta	ble I - Non-Der	ivative Securities Acquired, Disposed of, or Bene	ficially	Owned	

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction					5. Amount of Securities Beneficially Owned Following Reported		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(111511: 4)
Common Stock	05/02/2024		F		74	D	\$277.37	8,068(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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of E		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 102 RSUs which will vest on 5/5/2024; 128 RSUs which will vest on 4/30/2025; 784 RSUs which will vest in installments of 386 on 11/5/2024 and 398 on 11/5/2025; 407 RSUs which will vest in installments of 200 on 5/2/2025, and 207 on 5/2/2026; and 593 RSUs which will vest in in installments of 195 on 5/2/2025, 196 on 5/2/2026 and 202 on 5/2/2027. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.

2. These shares include 144 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/ Rachna Khosla 05/06/2024

Date

** 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.