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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average	burden							
-	houre per reenonee	. 0.5							

Name and Address of Reporting Person* Louie Linda H.						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
						AMOEN INC [AMON]							Dire	ctor	1	10% O	wner		
(I ast)	/Fii	ret) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year)							X Office below	cer (give title w)		Other (specif below)				
					03/17/2023								VP, Finar	nce & CA	O				
ONE AMGEN CENTER DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)						6	6. Individual or Joint/Group Filing (Check Applicable							
(0)						The following state of original randa (montanglay, road,							Line)						
(Street) THOUS	AND														n filed by On	•	•		
OAKS	CA	A 9	91320											Forr Pers	n filed by Mo son	re than Or	e Rep	orting	
(City) (State) (Zip) Rule 10b5-1(c) Transaction Indication																			
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intensatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											nded to								
		Table	I - No	n-Deriva	ative S	Secur	ritie	s Acc	quired	, Dis	posed of	, or B	enefic	ially Owı	ned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) or str. 3, 4 a	nd Secur Bene Owne	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock 03/17/2					2023				F		96	D	\$234	.57 9,	606(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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		8. Price of Derivative Security (Instr. 5)		Own Forn Direc or In (I) (Ir	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
												Amount or							

Explanation of Responses:

1. These shares include the following RSUs granted under the Company's equity plans: 67 RSUs which will vest on 5/3/2023; 114 RSUs which will vest in installments of 56 on 5/5/2023 and 58 on 5/5/2024; 974 RSUs which will vest in one installment of 479 on 11/2/2023 and one installment of 495 on 11/2/2024; 300 RSUs which will vest in two installments of 99 on 4/30/2023 and 4/30/2024 and one installment of 102 on 4/30/2025; 175 RSUs which will vest on 11/5/2023; and 433 RSUs which will vest in installments of 142 on 5/2/2024, 143 on 5/2/2025, and 148 on 5/5/2026. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis

Date

Exercisable

(D)

Expiration

Date

2. These shares include 142 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 share amount.

/s/ Linda H. Louie

Number

03/20/2023

** 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.