FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

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

Name and Address of Reporting Person* <u>Drake Michael V</u>					2. Issuer Name and Ticker or Trading Symbol AMGEN INC [ AMGN ]									ck all app	,	ng Pers	on(s) to Is		
(Last)	(Fir	st) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/07/2024						/Day/Year)				Office below	er (give title		Other (s	specify
ONE AMGEN CENTER DRIVE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X		filed by One		•	- 1
THOUSA OAKS	AND CA	<b>A</b> 9	1320												Form Perso	filed by Mo	re than	One Repo	orting
					Rul	Rule 10b5-1(c) Transaction Indication													
(City)	(Sta	ate) (Z	Zip)						his box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							that is inter	nded to		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date			2. Transact Date (Month/Day	Execution [		ution D	tion Date, Transac Code (Ir							5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	Amount (A) or (D)		rice	Reported Transaction(s) (Instr. 3 and 4)				(IIIsti. 4)	
Common Stock 05/07/2					024	24 A 116.5501 A \$0 2,455.7662 <sup>(1)(2)</sup> 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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative crities cired r osed )	Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (Ir	Price of erivative ecurity 1str. 5)	tive derivative ity Securities		0. Iwnership orm: irect (D) r Indirect ) (Instr. 4)	Beneficial Ownership t (Instr. 4)				
					Code	v	(A)	(D)	Date Expiration Exercisable Date		Title	Amou or Numb of Share	oer						

## 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 and vested immediately. Vested RSUs are paid in shares of the Company's common stock on a one-to-one basis. Vested RSU's may be deferred by the director, in which case payment will occur according to the elected deferral schedule.
- 2. These shares include 92 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 Restricted Stock Units 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/ Michael V. Drake

05/08/2024

\*\* 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.