Edgar Filing: AMGEN INC - Form 4

AMOEN INC

Form 4 May 03, 2017											
FORM							OMB A	PPROVAL			
	UNITEI	O STATES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or	er STATE 5.		GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires:January 31 200Estimated averageburden hours per response0.			
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 1'	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							n		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Hassan Fred			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		AMGEN INC [AMGN]					(Check all applicable)				
(Mo			3. Date of Earliest Transaction (Month/Day/Year) 05/01/2017					_X_Director10% Owner Officer (give titleOther (specify below) below)			
				If Amendment, Date Original led(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
THOUSANI OAKS, CA 9									More than One Ro		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ate 2A. Deemed ar) Execution Date, if any (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			or))	SecuritiesIBeneficially(OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/01/2017			Code V A	Amount 1,230 (1)	or (D) A	Price \$ 0	(Instr. 3 and 4) 6,091	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transact Code (Instr. 8)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code N	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
Hassan Fred ONE AMGEN CENTER DF THOUSAND OAKS, CA 91	Х								
Signatures									
/s/ Fred Hassan	05/02/2017	7							
<u>**Signature of</u>	Date								

Reporting Person

Explanation of Responses:

* 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).

The Restricted Stock Units (RSUs) were granted pursuant to the Amgen Inc. 2009 Director Incentive Program, as amended, under the Amgen Inc. Amended and Restated 2009 Equity Incentive Plan and vested immediately. Vested RSUs are paid in shares of the

(1) Angen me. Amended and Restated 2009 Equity meentive ran and vested miniculately. Vested RSOs 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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.