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Form 4 August 04, 2												
								OMB APPROVAL				
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	Number:3235-0287Expires:January 31, 2005Estimated average burden hours per response0.5			
Check th if no lon subject t Section Form 4 of Form 5 obligation may con See Instr 1(b).	ger o 16. or ^{nns} tinue. Section 17											
(Print or Type	Responses)											
Meline David W Symbol				ssuer Name and Ticker or Trading bol GEN INC [AMGN]				5. Relationship of Reporting Person(s) to Issuer				
AMG								(Check all applicable)				
(Month/E 08/01/2 (Street) 4. If Ame				Date of Earliest Transaction Ionth/Day/Year) B/01/2015 If Amendment, Date Original ed(Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify below) below) EVP & CFO				
								 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
THOUSAN OAKS, CA	ID 91320-1799							Form filed by M Person				
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secur	ities Acqu	ired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Transaction Date 2A. Deemed		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Common	08/01/2015			Code V F	7,196	(D) D	Price \$	51,934 (<u>1</u>) (<u>2</u>)	D			

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

Stock

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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)

176.59

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Meline David W ONE AMGEN CENTER DRIVE THOUSAND OAKS, CA 91320-1799			EVP & CFO				
Signatures							
Andrea A. Robinson, Attorney-in-Fact Meline	for Mr.	0	08/04/2015				
**Signature of Reporting Person			Date				

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).

These shares include the following Restricted Stock Units (RSUs) granted under the Company's equity plans: 40,621 RSUs which vest in two equal installments of 13,540 on 8/1/2016 and 8/1/2017 and one installment of 13,541 on 8/1/2018; and 3,940 RSUs which vest in two

(1) equal installments of 1,300 on 1/30/2017 and 1/30/2018 and one installment of 1/340 on 1/30/2019. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.

These shares include 782 Dividend Equivalents (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 persons' unvested RSUs and are paid out in

(2) 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.

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.