

# UNILIFE CORP

Filed by  
**AMGEN INC**

## **FORM SC 13G/A** (Amended Statement of Ownership)

Filed 08/02/17

Address	250 CROSS FARM LANE YORK, PA 17406
Telephone	(717) 384-3400
CIK	0001476170
Symbol	UNISQ
SIC Code	2836 - Biological Products, Except Diagnostic Substances
Industry	Biotechnology & Medical Research
Sector	Healthcare
Fiscal Year	06/30

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**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION**  
Washington, D.C. 20549

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**SCHEDULE 13G/A**

**Under the Securities Exchange Act of 1934  
(Amendment No. 2)\***

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**UNILIFE CORPORATION**  
(Name of Issuer)

**Common Stock, \$0.01 par value per share**  
(Title of Class of Securities)

**90478E103**  
(CUSIP Number)

**July 24, 2017**  
(Date of Event Which Requires Filing of this Statement)

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Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- Rule 13d-1(b)  
 Rule 13d-1(c)  
 Rule 13d-1(d)

\* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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1)	Names of reporting persons.  AMGEN INC.
2)	Check the appropriate box if a member of a group (see instructions) (a) <input type="checkbox"/> (b) <input type="checkbox"/>
3)	SEC use only
4)	Citizenship or place of organization  Delaware
Number of shares beneficially owned by each reporting person with:	5. Sole voting power  0
	6. Shared voting power  0
	7. Sole dispositive power  0
	8. Shared dispositive power  0
9)	Aggregate amount beneficially owned by each reporting person  0
10)	Check if the aggregate amount in Row (9) excludes certain shares (see instructions) <input type="checkbox"/>
11)	Percent of class represented by amount in Item 9  0%
12)	Type of reporting person (see instructions)  CO

ITEM 1.

(a) NAME OF ISSUER:

Unilife Corporation (the "Issuer")

(b) ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICE:

250 Cross Farm Lane, York, Pennsylvania 17406

ITEM 2.

(a) NAME OF PERSONS FILING:

Amgen Inc., a Delaware corporation

(b) ADDRESS OF PRINCIPAL BUSINESS OFFICE OR IF NONE, RESIDENCE:

Amgen Inc: One Amgen Center Drive, Thousand Oaks, California 91320-1799

(c) CITIZENSHIP:

Amgen Inc.: Delaware, U.S.A.

(d) TITLE OF CLASS OF SECURITIES:

Common Stock, \$0.01 par value

(e) CUSIP NUMBER:

90478E103

ITEM 3. STATEMENT FILED PURSUANT TO RULE 13D-1(B) OR 13D-2(B) OR (C)

Not applicable.

ITEM 4. OWNERSHIP.

(a), (b) and (c) — The information contained on the cover page to this Schedule 13G is incorporated herein by reference.

ITEM 5. OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than 5 percent of the class of securities, check the following

ITEM 6. OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON

Not applicable.

ITEM 7. IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON

Not applicable.

ITEM 8. IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP

Not applicable.

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ITEM 9. NOTICE OF DISSOLUTION OF GROUP

Not applicable.

ITEM 10. CERTIFICATION.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under § 240.14a-11.

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**Signature**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: August 1, 2017

**AMGEN INC.**

By: /s/ David A. Piacquad

Name: David A. Piacquad

Title: Senior Vice President, Business  
Development