

Biller Jonathan
 Form 3/A
 August 07, 2018

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Biller Jonathan		(Month/Day/Year)	CELGENE CORP /DE/ [CELG]	
(Last)	(First)	(Middle)	07/03/2018	
C/O CELGENE CORPORATION,Â 86 MORRIS AVENUE			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	07/12/2018
			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
			<input type="checkbox"/> Officer <input type="checkbox"/> Other	_X_ Form filed by One Reporting Person
			(give title below) (specify below)	___ Form filed by More than One Reporting Person
			EVP and General Counsel	
SUMMIT,Â NJÂ 07901				
(City)	(State)	(Zip)		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
---------------------------------	---	--	---

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable Expiration Date	Title Amount or Number of			

				Shares		or Indirect (I) (Instr. 5)	
Stock Option (right to buy)	Â (1)(2)	07/02/2028	Common Stock	19,646	\$ 79.51	D	Â
Restricted Stock Unit	Â (3)	Â (3)	Common Stock	6,288	\$ (4) (5)	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Biller Jonathan C/O CELGENE CORPORATION 86 MORRIS AVENUE SUMMIT,Â NJÂ 07901	Â	Â	Â EVP and General Counsel	Â

Signatures

/s/ Jonathan P. Biller 08/07/2018

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) The option was issued pursuant to the Company's 2017 Stock Incentive Plan.
- (2) The option is immediately exercisable and will vest in four equal annual installments beginning on July 2, 2019.
- (3) The restricted stock units will vest on July 2, 2021. Vested shares will be delivered to the reporting person on the vesting date.
- (4) Each restricted stock unit represents a contingent right to receive one share of the Company's common stock.
- (5) The restricted stock units were issued pursuant to the Company's 2017 Stock Incentive Plan.

Â

Remarks:

ThisÂ amendmentÂ toÂ theÂ InitialÂ StatementÂ ofÂ BeneficialÂ OwnershipÂ ofÂ SecuritiesÂ onÂ FormÂ 3,Â filedÂ with

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.