SCOTT DAVID J

Form 3

March 07, 20											
FORM	13 <sup>UN</sup>	ITED STAT		SECURITIES AND EXCHANGE COMMISS					OMB APPROVAL		
Washington, D.C. 20549									OMB Number:	3235-010	
	<b>POF</b>	Expires:	January 3 200								
		on 17(a) of	to Section 16(a) the Public Utility )(h) of the Investi	Holdir	Securities Ex ng Company	Act o	of 1935 of		Estimated burden hou response	average urs per	
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> SCOTT DAVID J			Statement (Month/Day/Year)	MICKOMET, INC. [1					ıbol		
(Last)	(First)	(Middle)	03/02/2012						Amendment, Date Original d(Month/Day/Year)		
ONE AMG	EN CENT	ER DRIVE			(Chaolz	allann	liashla)				
	(Street)				(Check all applicable)		6. Indi	6. Individual or Joint/Group			
THOUSAND OAKS, CA 91320-1799				OfficerOther (give title below) (specify below)			_X_Fo Person Fo	Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			Form: Direct or Ind (I)	Ownership Ownership Form: (Instr. 5) Direct (D) or Indirect				
Reminder: Rep owned directly			ch class of securities	benefici	ally SI	EC 147	3 (7-02)				
	infor requi	mation contaired to respo	oond to the collect ined in this form a nd unless the form AB control numbe	are not n displa	ays a						
]	fable II - De	erivative Secu	rities Beneficially Ov	wned (e.	g., puts, calls,	warra	nts, optio	ns, converti	ble securitie	s)	
1. Title of Der (Instr. 4)	vative Secur	Expir	ration Date Day/Year)	Securitie	and Amount of es Underlying ve Security	Co or Pi	onversion Exercise ice of erivative	5. Ownershi Form of Derivativ Security:	p Benefici (Instr. 5	re of Indirect ial Ownership )	
		D	E					Security.			

Date

Exercisable Date

Expiration

Title

Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

## **Reporting Owners**

Reporting Owner Nam	Relationships						
	Director	10% Owner	Officer	Other			
SCOTT DAVID J ONE AMGEN CENTER I THOUSAND OAKS, CA	ÂX	Â	Â	Â			
Signatures							
/s/ David J. Scott	03/06/2012						
<u>**</u> Signature of Reporting Person	Date						

# **Explanation of Responses:**

#### No securities are beneficially owned

\* 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).

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#### **Remarks:**

(1) No securities are beneficially owned.

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.