FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BONANNI FABRIZIO						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									elationship o eck all applic Directo	able)	g Perso	on(s) to Issu 10% Ow Other (s	/ner
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 04/26/2010									X Officer (give title Other (specify below) EVP, Operations				
(Street) THOUSAND OAKS CA 91320-1799				99	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable 2) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	itate)	(Zip)												1 01001	•			
		Tal	ole I - No	n-Deri	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or I	Bene	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		ies Acq l Of (D)		(A) or 3, 4 and !	Beneficia Owned F	es ally Following	Form	: Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D) Pri		Price	Reported Transact (Instr. 3 a	ion(s)		1	Instr. 4)
Common Stock 04/26						2010			A		12,000	00 ⁽¹⁾ A		\$0	33,	3,000		D	
Common Stock 04/26/					26/201	/2010			A		40,000	40,000 ⁽²⁾ A		\$0	73,0	73,000 ⁽³⁾		D	
Common Stock														56,	56,493		I 1	By Family Frust	
			Table II -								osed of, convertil				Owned			·	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transa Code (8)				6. Date Ex Expiration (Month/Da	Date	of Securiti		curities rlying ative S	s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	1	Amount or Number of Shares					
Nqso (Right to Buy)	\$58.43	04/26/2010			A		84,000		04/26/2011	(4)	04/26/2020	Comn		84,000	\$58.43	84,000		D	

Explanation of Responses:

- 1. The Restricted Stock Units (RSUs) were granted pursuant to the Company's 2009 Equity Incentive Plan and vest in four equal annual installments of 25% each commencing April 26, 2011. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 2. The RSUs were granted pursuant to the Company's 2009 Equity Incentive Plan and fully vest on December 31, 2013. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 3. These shares include the following RSUs granted under the Company's equity plans: 9,000 RSUs which vest in three equal annual installments of 3,000 each commencing 4/29/2010; 12,000 RSUs which vest in four equal annual installments of 3,000 each commencing of 4/26/2011; and 40,000 RSUs which vest fully on 12/31/13. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 4. These options are exercisable in four equal annual installments of 25% each commencing 04/26/2011.

/s/ Fabrizio Bonanni 04/27/2010

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.