FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB APPROVAL										
	OMB Number:	3235-0287									
l	Estimated average burden										

0.5

hours per response:

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

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* Michael A Kelly						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]								(Check	titionship of Reporting Person(s) to Issue all applicable) Director 10% Own Officer (give title Other (spe below) VP Finance & CAO		10% (Owner
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 05/27/2008								X					
(Street) THOUSAND OAKS CA 91320-1799 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	le I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or B	enefi	cially	Owne	ed		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			.nd 5)	Secur Benef Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)		(Instr. 4)
Common	Stock	2008				S		4,988	D	\$4	3.17	1	13,678	D				
Common Stock 05/27/20						008			S		12	D	\$43	.1701	1	13,666	D	
Common	Stock															50	I	Michael & Bonnie Kelly Family Trust
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security (Month/Day/Year) (Month/Day/Year)			4. Transa Code (I 8)				6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title Amoun Securit Underly Derivat Securit and 4)	t of ies /ing	t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

<u>/s/ Michael A. Kelly</u>
** Signature of Reporting Person

05/27/2008

Date

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

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.

 $^{^{\}star}$ 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).