SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OWB APPRC	IVAL
OMB Number:	3235-0287
Estimated average burde	en
hours per response:	0.5

1. Name and Address of Reporting Person [*] <u>MCNAMEE BRIAN M</u>			2. Issuer Name and Ticker or Trading Symbol <u>AMGEN INC</u> [AMGN] _	(Check	ationship of Reporting Pe < all applicable) Director Officer (give title	erson(s) to Issuer 10% Owner Other (specify
(Last) ONE AMGEN	(First) CENTER DRIVI	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/27/2012		below) SVP, Human F	below) Resources
(Street) THOUSAND OAKS (City)	CA (State)	91320-1799 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person	porting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Table 1 Than bernative bebannes hequirea, bisposed of, of beneficiary owned											
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock	04/27/2012		A		4,466 ⁽¹⁾	A	\$ <mark>0</mark>	58,535	D		
Common Stock	04/28/2012		F		645	D	\$71.64	57,890	D		
Common Stock	04/29/2012		F		1,290	D	\$71.64	56,600 ⁽²⁾	D		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	Expiration Date (Month/Day/Year) irited r osed) . 3, 4		Expiration Date Amount (Month/Day/Year) Securitie Underlyin Derivativ			iration Date Amount of hth/Day/Year) Securities Underlying Derivative Security (Instr. 3			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

1. The Restricted Stock Units (RSUs) were granted pursuant to the Amgen Inc. 2009 Equity Incentive Plan and vest in three annual installments of 33%, 33% and 34% on 4/27/2014, 4/27/2015 and 4/27/2016, respectively.

2. These shares include the following RSUs granted under the Company's equity plans: 1,425 RSUs which fully vest on 4/28/2013; 2,900 RSUs which vest in two equal annual installments of 1,450 each commencing 4/26/2013; 22,081 RSUs which fully vest on 12/31/2014; 7,500 RSUs which vest in two equal installments of 2,475 each on 4/25/2013 and 4/25/2014 and one installment of 2,550 on 4/25/2015; and 4,466 RSUs which vest in three installments of 1,473, 1,474 and 1,519 on 4/27/2014, 4/27/2015 and 4/27/2016, respectively. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.

<u>/s/ Andrea Robinson, Attorney-</u> 05/01/2012 in-Fact for Mr. McNamee

Date

** Signature of Reporting Person

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.