FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* OMENN GILBERT S						2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]										eck all a	tionship of Reportin all applicable) Director			on(s) to Iss 10% Ov	
(Last) ONE AN	,	irst) ITER DRIVE	(Middle)													Other (s below)	specify				
(Street) THOUS	AND C.	A	91320-17	99	4. 1	If Ame	endme	nt, Date	of Oriç	ginal Fil	led	(Month/Da	Line	e) <mark>X</mark> Fo Fo					on		
(City)	(S	tate)	(Zip)																		
		Tab	le I - Noi	n-Deriv	vativ	e Se	curit	ties Ac	quir	ed, D	isp	osed o	f, or	Ben	eficiall	y Owr	ed				
Da			2. Transaction Date (Month/Day/Year)		ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Second Sec		Amount of ecurities eneficially wned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Co	ode V		Amount	(<i>t</i>	() or ()	Price	Tran	Reported Transaction(s) (Instr. 3 and 4)				(1130.4)	
Common Stock 12/				12/2	2/201	1			1	М		16,00	0	A	\$56.3	3	197,420		D		
Common	Stock			12/2	2/201	1				F		14,26	7	D	\$63.1	4	183,	,153		D	
		-	Table II -									sed of, onvertil				Owne	d				
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		ransaction ode (Instr.				ate Exerc ration D nth/Day/	ate		of Sec Under Deriva	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5	ive y	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable		xpiration ate	Title		Amount or Number of Shares						
Nqso (Right to	\$56.3	12/22/2011			M			16,000	01/2	28/2002	0	1/28/2012	Comn	non	16,000	\$0		0		D	

Explanation of Responses:

/s/ Andrea A. Robinson, Attorney-in-Fact for Dr. Omenn

12/22/2011

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.