FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| ton, D.C. 20549 | OMB APPROVAL |
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| STATEMENT | OF | CHANGES | IN BEI | NEFICIAL | OWNER | SHIP |
|-----------|----|---------|--------|----------|-------|------|
| | | | | | | |

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

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

| 1. Name and Address of Reporting Person* MCNAMEE BRIAN M | | | | | 2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN] | | | | | | | | | Check | ationship of Reportir all applicable) Director Officer (give title | | 10% | Issuer Owner er (specify | |
|--|--|--|--------------------------|-------|--|--|---|---|--------|--|--------|-----------------------|---|--|--|---|---------------------------------------|---|------------|
| (Last) (First) (Middle) ONE AMGEN CENTER DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/03/2008 | | | | | | | | | X | belov | below) Sr. V.P. Human Resource | | w) | |
| (Street) THOUSA OAKS | AND CA | Λ 9 | 91320-17 | 99 | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (St | | (Zip) | | | | | | | | | | | | | | | | |
| 1. Title of S | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature | | | | | | | | | | | | | | | | | | |
| Date | | | | | th/Day/Year) i | | Execution Date, if any (Month/Day/Year) | | Code (| Code (Instr. 5) | | d Of (D) (Instr. 3, 4 | | | Be | | ities icially d Following | Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common Stock 03/0 | | | | 03/03 | 3/2008 | /2008 | | F | | 2,169 | | D \$45. | | 5.59 44,726 ⁽¹⁾ | | 1, 726 ⁽¹⁾ | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execu Security or Exercise (Month/Day/Year) if any | | 3A. Deem Execution if any (Month/Da | Transaction Code (Instr. | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | e | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) Amou or Numb of Title Share | | ount | Deriv Secu | Price of erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. The amount of the Company's Common Stock beneficialy owned at the end of the month and held directly by the reporting person has been adjusted to reflect an acquisition of the Company's Common Stock under the 423(b) Plan in a transaction exempt (persuant to Rule 16a-3(f)(1)(k)(B)).

<u>/s/ Brian M. McNamee</u> <u>03/05/2008</u>

** 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.