FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT C	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*					2. Issuer Name and Ticker or Trading Symbol AMGEN INC [AMGN]									Check	all app	licable)			Issuer Owner er (specify	
(Last) (First) (Middle) ONE AMGEN CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/28/2013										X	belov	v) `	& CF	below)	
(Street) THOUSA OAKS	C.)1320-17	99	4. If	If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	2A. Deemed Execution Date,		3. Transa Code (3. 4. Securi Transaction Code (Instr. 8) 4. Securi		ties Acquired (A)		(A) 01	or 5. Am Secur Benef Owne Repor		ount of ties cially I Following	Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 01/2					01/28/2013				A		7,477	-	A	\$	_	109,950(2)(3)			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)	erivative Conversion Date Execution Date, Transact ecurity or Exercise (Month/Day/Year) if any Code (Ins		Instr.	5. Nun of Deriv: Secur Acqui (A) or Dispo of (D) (Instr. and 5	Date Expiration Date Expiration Date Expiration			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		o. wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

- 1. The Restricted Stock Units (RSUs) were granted pursuant to the Amgen Inc. Equity Incentive Plan and vest in three annual installments of 33%, 33% and 34% on 1/28/2015, 1/28/2016 and 1/28/2017, respectively.
- 2. These shares include the following RSUs granted under the Company's equity plans: 50,000 RSUs which vest in two equal annual installments of 25,000 each commencing 10/28/2013; 15,800 RSUs which vest in two equal installments of 5,214 each on 4/25/2013 and 4/25/2014 and one installment of 5,372 on 4/25/2015 and 4/27/2016, respectively; and 7,477 RSUs which vest in two equal installments of 2,543 on 1/28/2017. Vested RSUs will be paid in shares of the Company's common stock on a one-to-one basis.
- 3. These shares include 117 Dividend Equivalents (DEs) granted pursuant to the Amgen Inc. 2009 Equity Incentive Plan and subject to a qualifying dividend reinvestment plan. DEs are credited on the reporting person's unvested RSUs and are paid out in shares of the Company's common stock on a one-to-one basis according to the vesting schedule, along with a cash payment for any remaining fractional share amount.

/s/ Andrea Robinson, Attorney- 01/30/2013 in-Fact for Mr. Peacock

** 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.