FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| W | ash | ington, | D.C. | 20549 |  |  |
|---|-----|---------|------|-------|--|--|
|   |     |         |      |       |  |  |

| Washington, D.C. 20049                       | OMB APPROVAL             |           |  |  |
|--|--------------------------|-----------|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number:              | 3235-0287 |  |  |
|  | Estimated average burden |           |  |  |

hours per response:

0.5

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

| Name and Address of Reporting Person* <u>Singhal Priya</u>   |   |  |           |         |                              | 2. Issuer Name and Ticker or Trading Symbol BIOGEN INC. [ BIIB ]   |   |       |   |          |  |  |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner |  |       |  | rner  |  |
|--|---|--|-----------|---------|------------------------------|--|---|-------|---|----------|--|--|---|---|--|-------|--|---|--|
| (Last)   | .ast) (First) (Middle)  |  |           |         |                              | 3. Date of Earliest Transaction (Month/Day/Year) 12/08/2023  |   |       |   |          |  |  |   | X Officer (give title Other (specify below)  Head of Development                            |  |       |  |   |  |
|  |   |  |           |         | 4. I                         | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |   |       |   |          |  |  |   | 6. Individual or Joint/Group Filing (Check Applicable Line)                                 |  |       |  |   |  |
| (Street) CAMBRIDGE MA 02142  |   |  |           |         |                              |  |   |       |   |          |  |  | X Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |  |       |  |   |  |
| (City) (State) (Zip)   |   |  |           |         |                              | Rule 10b5-1(c) Transaction Indication  |   |       |   |          |  |  |   |   |  |       |  |   |  |
|  |   |  |           |         | X                            | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |   |       |   |          |  |  |   |   |  |       |  |   |  |
|  |   | Tab  | le I - No | n-Deriv | ative                        | e Se   | curitie   | es Ac | quired                                  | , Dis    | posed  | of, or Be  | neficia   | lly Owne  | d  |       |  |   |  |
| Date   |   |  |           | Date    | ate E<br>lonth/Day/Year) if  |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |       | 3.<br>Transaction<br>Code (Instr.<br>8) |          | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4 |  | d (A) or<br>r. 3, 4 and   | Benefic<br>Owned  | es<br>ially<br>Following   | Form: | Direct C<br>Indirect E<br>str. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |
|  |   |  |           |         |                              |  |   |       | Code                                    | v        | Amount   | (A) or (D)   | Price   | Reporte<br>Transac<br>(Instr. 3   | tion(s)  |       |  | Instr. 4)   |  |
| Common   | Stock   |  |           | 12/08/  | /2023                        | 2023   |   | M     |   | 426      | A  | \$0  | 3,78  | 3,780.0915  |  | D     |  |   |  |
| Common Stock 12/08/  |   |  |           | /2023   | 2023                         |  |   | F     |   | 206 D \$ |  | \$239.   | 29 3,57   | 3,574.0915  |  | D     |  |   |  |
| Common Stock 12/11/2   |   |  |           | 2023    | 2023                         |  | S   |       | 110                                     | D        | \$248  | 3,46   | 3,464.0915  |   | D  |       |  |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |           |         |                              |  |   |       |   |          |  |  |   |   |  |       |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | Execution |         | 4.<br>Transa<br>Code (<br>8) |  |   |       | 6. Date E:<br>Expiratio<br>(Month/D     | n Date   | )  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>(Instr. 3 and | f<br>g<br>Security<br>nd 4)   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | i F   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)               |  |
|  |   |  |           |         |                              |  |   |       |   |          |  |  | Amount  |   |  |       |  |   |  |

Date Exercisable

(1)

## **Explanation of Responses:**

Restricted

1. This award was granted to the reporting person on December 8, 2021 and will vest in three equal installments on each anniversary of the grant date.

/s/ Wendell Taylor, attorney-in-12/12/2023 fact for Priya Singhal

\$<mark>0</mark>

426

D

\*\* Signature of Reporting Person Date

Number

Shares

426

Title

12/08/2024

Common

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).

12/08/2023

\*\* 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.

(D)

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