FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number:

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).

## 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

1. Name and Address of Reporting Person*  Holtzman Steven H						2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOGEN INC. [BIIB]								heck all a	ationship of Reporting all applicable) Director Officer (give title			son(s) to Iss 10% Ov Other (s	vner	
(Last) (First) (Middle) BIOGEN INC. 225 BINNEY STREET						3. Date of Earliest Transaction (Month/Day/Year) 02/23/2016								X Office (give title Other (specify below)  EVP Corporate Development						
(Street) CAMBRIDGE MA 02142  (City) (State) (Zip)					_   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Fo	′					
		Tab	le I - No	n-Deriv	ative	e Se	curiti	ies Ac	quired	, Dis	sposed o	of, or Be	neficia	lly Ow	ned	l				
Date				2. Transa Date (Month/D		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			and 5) Securition Benefici Owned I		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 02/23/2						2016			M		579	A	\$0		8,599			D		
Common Stock 02/23/2						5					273	D	\$258	.99	8,326			D		
		7	able II -								osed of converti				ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code ( 8)		n of		6. Date E Expiratio (Month/D	n Date		Amount of		Deriva	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly [	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares	1						
Restricted Stock Unit	\$0	02/23/2016			M			579	(1)		02/23/2018	Common Stock	579	\$0		4,611		D		
Restricted	\$0	02/23/2016			<b>J</b> (2)			1,149	(1)		02/23/2018	Common	1,149	\$0		3,462		D		

## **Explanation of Responses:**

1. The number of RSUs reported represents the maximum possible number of shares that are eligible for vesting, which is 200% of the number of shares at target payout. One-third of these RSUs are eligible to vest on each of the first three anniversaries of the grant date. The actual number of shares that will vest on each vesting date will be determined by comparing the price of Biogen Idec common stock on such vesting date to the price on the grant date (i.e., number of vested shares = number of shares at target payout times [the 30-day average closing stock price ending on the vesting date divided by the 30-day average closing stock price on the grant date]).

2. This represents the difference between the maximum possible number of shares that were eligible for vesting and the actual number that vested.

Matthew S. Gilman, Attorneyin-Fact for Steven H. Holtzman

02/25/2016

\*\* 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.