FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
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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* Vounatsos Michel						2. Issuer Name and Ticker or Trading Symbol BIOGEN INC. [BIIB]								elationship o ck all applic Director	able)	Person(s) to Iss		
	Last) (First) (Middle) BIOGEN INC. 225 BINNEY ST.						3. Date of Earliest Transaction (Month/Day/Year) 05/02/2017								Officer (give title Other (specification) Chief Executive Officer			
(Street) CAMBRIDGE MA 02142 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					saction	ction 2A. Deemed Execution Date, ay/Year) if any			quired, Disposed of, or Benef 3. Transaction Code (Instr. 3, 12)				d (A) or	or 5. Amount of Securities Beneficially			Direct Indirect	7. Nature of Indirect Beneficial
						(Month/Day/Year)		() (8) (Code	v	Amount	(A) or (D)	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)		(I) (Instr. 4)		Ownership (Instr. 4)	
Common Stock 0				05/0	2/201	/2017			М		1,736	A	\$0	4,663.458			D	
Common Stock 05/02/2					2/201	/2017		F		564	D	\$271.3	4,09	99.458		D		
			Table II -								osed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Date,	4. Transaction Code (Instr.) 8)				6. Date Expiratio (Month/D	n Dat	e of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Own Forn Director In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v		Date Exercisal		Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	ion(s)			
Restricted Stock Unit	\$0	05/02/2017			M			1,736 ⁽¹⁾	(2)		05/02/2019	Common Stock	1,736(1)	\$0	8,004 ⁰	(1)	D	
Restricted Stock Unit	\$0	05/02/2017			J			1,508 ⁽³⁾	(2)		05/02/2019	Common Stock	1,508	\$0	6,496	6	D	

Explanation of Responses:

- 1. This award was previously reported as covering 9,520 shares, but was adjusted pursuant to the anti-dilution provisions of the award in connection with the spin-off of Bioverativ, Inc. on February 1, 2017.
- 2. 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 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).
- 3. This represents the difference between the maximum possible number of shares that were eligible for vesting and the actual number that vested.

<u>Suzanne Murray, Attorney in</u> <u>Fact for Michel Vounatsos</u>

05/04/2017

** 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.