FORM 4

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

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-028								
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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).

## 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* <u>Ehlers Michael D</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOGEN INC. [BIIB]								eck all applic Directo	able)	g Person(s) to Iss			
(Last) BIOGEN	INC.	First)	(Middle)					iest Trans	Day/Year)	_	below)			below)	· · ·				
225 BINNEY ST.						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) CAMBRIDGE MA 02142													- 1	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(\$	State)	(Zip)											1 613011	•				
		Tal	ble I - No	n-Deri	ivativ	e Se	curi	ties Ac	quired	, Dis	posed o	f, or Ber	neficiall	y Owned					
1. Title of Security (Instr. 3)  2. Trans Date (Month/				Execution Day/Year) if any		emed tion Date, n/Day/Year)	Transaction Dispos			rities Acquired (A) o d Of (D) (Instr. 3, 4 a		Securitie Beneficia Owned F	neficially ned Following		n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Common Stock 02/15/				5/201	2018		M		1,712	A	\$0	5,407	7.359 <sup>(1)</sup>		D				
Common Stock 02/15/				5/201	/2018		F		509	D	\$299.3	8 4,898.359			D				
											osed of, convertib			Owned					
Derivative Security (Instr. 3) P	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea		Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(a)			
Restricted Stock Unit	\$0	02/15/2018			M			1,712	(2)		02/15/2020	Common Stock	1,712	\$0	6,448	3	D		
Restricted	\$0	02/15/2018			J		П	1,006 <sup>(3)</sup>	(2)		02/15/2020	Common	1,006	\$0	5,442	2	D		

## Explanation of Responses:

- 1. Includes 39.569 shares and 39.790 shares acquired under the Biogen Inc. employee stock purchase plan on 9/29/2017 and 12/29/2017, respectively.
- 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.

/s/ Suzanne Murray, Attorney in Fact for Michael D. Ehlers

02/20/2018

\*\* 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.