FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL | | | | |
|------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burd | en | | | | |
| 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* Karaboutis Adriana | | | | | | | 2. Issuer Name and Ticker or Trading Symbol BIOGEN IDEC INC. [BIIB] | | | | | | | | | onship of Rep Il applicable) Director Officer (give t | Ü | Person(s) to Is | | |
|--|--|--------------------------|---|--|--|---|--|--------|--|-------------|--------------------|---|---|-------|--|---|---|---|--|--|
| (Last) (First) (Middle) BIOGEN IDEC INC. 225 BINNEY STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2014 | | | | | | | | | | below) (| | | | |
| (Street) CAMBRIDGE MA 02142 (City) (State) (Zip) | | | | | 4. 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 | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of S | Date | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, | | | nd S B C | . Amount of ecurities eneficially wned Followi | F | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | Code | v | Amount | () () | A) or O) | Price | | ransaction(s) nstr. 3 and 4) | | | , | | | | |
| Common | Stock | 12/01 | 12/01/2014 | | | | A | | 1,087 | 7 | A | \$0 | | 8,507 | | 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) | tive Conversion Date Execution or Exercise (Month/Day/Year) if any | | 3A. Deeme Execution if any (Month/Da | Date, Transac Code (In | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Pric Deriva Securi (Instr. | tive derivati ty Securiti | ve es ially ng d tion(s) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of Sha | | | | | | | |

Explanation of Responses:

/s/ Matthew S. Gilman,

Attorney-in-fact for Adriana 12/03/2014

Karaboutis

** 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.