FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* SCANGOS GEORGE A						2. Issuer Name and Ticker or Trading Symbol BIOGEN IDEC INC. [BIIB]											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
										_		_				X	Directo	r		10% Ov	vner		
(Last) (First) (Middle) BIOGEN IDEC INC. 225 BINNEY STREET						3. Date of Earliest Transaction (Month/Day/Year) 07/15/2014											X Officer (give title Other (specify below) Chief Executive Officer						
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
CAMBRIDGE MA 02142																X	Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)																	Person						
		Tab	le I - Noi	n-Deriv	ative	e Se	curit	ties Ad	cqu	uired,	Dis	posed o	of, o	r Ben	efici	ally	Owned						
I				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		·	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				4 and Securitie Beneficia Owned F		s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Ì	Code	v	Amount		(A) or (D)	Pric	e	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Common Stock 07/15						2014				M		21,33	9	A	\$	S <mark>O</mark>	44,874			D			
Common Stock 07/15					5/2014	4				F		10,06	2	D	\$312		34,812			D			
Common Stock																5,378			I	by Trust			
Common Stock																	5,3	378		I	by Trust		
		-	Table II -						•		•	osed of, onverti				•	wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution) if any (Month/Da	Date, T	4. Transaction Code (Instr. 8)				Ex	Date Ex xpiration Month/Da	n Date		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		es Securi	[3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)		ate xercisab		Expiration Date	Title		Amou or Numb of Share	er							
Restricted	(1)	07/15/2014			M			21,339		(2)	0	07/15/2014	Cor	mmon	21,33	39	\$0	0		D			

Explanation of Responses:

Stock Unit

- 1. There is no conversion or exercise price for this stock unit.
- 2. The number of RSUs reported represents the maximum possible number of shares that are eligible for vesting, which is 150% of the number of shares at target payout. One-fourth of these RSUs are eligible to vest on each of the first four 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 average 60 calendar-day closing stock price ending on the vesting date divided by the average 60 calendar-day closing stock price on the grant date]).

/s/ Matthew S. Gilman, 07/17/2014 Attorney in Fact for George A. <u>Scangos</u>

** 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.