FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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

1. Name and Address of Reporting Person* <u>Vounatsos Michel</u>						2. Issuer Name and Ticker or Trading Symbol BIOGEN INC. [BIIB]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own				
(Last) BIOGEN 225 BIN	INC.	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 02/15/2019								(give title	Other (specify below) utive Officer		pecify
(Street) CAMBRIDGE MA 02142 (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. In	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tak	ole I - No	n-Deri	ivativ	e Se	curi	ties Ac	quired,	Dis	posed of	, or Ber	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Dat			Code (Instr.					Beneficia Owned F	s ally following	Form:	Direct I Indirect E str. 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 02/15/2						2019		М		5,269	A	\$0	18,9	18,914.27		D		
Common Stock 02/15/2						2019		F		2,340	D	\$332.8	7 16,574.27			D		
		-	Table II -								osed of, onvertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				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. Number derivative Securities Beneficial Owned Following Reported Transactio	is Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	oii(ə)		
Restricted Stock Unit	\$0	02/15/2019			M			5,269	(1)		02/15/2020	Common Stock	5,269	\$0	11,733	3	D	
Restricted Stock Unit	\$0	02/15/2019		Ì	J			3,229 ⁽²⁾	(1)		02/15/2020	Common Stock	3,229	\$0	8,504		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 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.

/s/ Suzanne Murray, Attorney in Fact for Michel Vounatsos

02/20/2019

** 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.