FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasiiiigton,	D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number:

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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* Guindo Chirfi					2. Issuer Name and Ticker or Trading Symbol BIOGEN INC. [BIIB]								ck all applica	ıble)	Person(s) to Issue 10% Own Other (sp		ner	
(Last) (First) (Middle) BIOGEN INC. 225 BINNEY ST.					3. Date of Earliest Transaction (Month/Day/Year) 02/12/2020								EVP Glob. Prod Strat and Comm					
(Street) CAMBR (City)		ЛА State)	02142 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind Line)	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Ta	able I - No	n-Derivat	tive S	ecuriti	es Acq	uired,	Dis	posed of,	or Bene	eficially	Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				s Acquired (A) or of (D) (Instr. 3, 4 and		5. Amoun Securities Beneficial Owned Fo	ly	Form:	Direct Endirect Etr. 4)	7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 ar	on(s) nd 4)			(Instr. 4)			
Common Stock			02/12/2	02/12/2020					1,680	A \$0		4,375			D			
Common Stock			02/12/2020				F 504		D	\$331.76	3,871			D				
										osed of, convertible			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if an (Month/Day/Year) if an (Month/Day/Year)			nsaction Derivativ de (Instr. Securitie Acquired Disposed				6. Date Exercisa Expiration Date (Month/Day/Year		ite of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)				
Restricted Stock Unit	\$0	02/12/2020		М			1,680	(1))	02/12/2022	Common Stock	1,680	\$0	9,280)	D		
Restricted Stock Unit	\$0	02/12/2020		J			1,972 ⁽²⁾	(1))	02/12/2022	Common Stock	1,972	\$0	7,308	В	D		
Restricted	\$0	02/12/2020		A		11,450		(1))	02/12/2023	Common	11,450	\$0	11,45	0	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 following and including 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 02/14/2020 Fact for Chirfi Guindo

** 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.