FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**OMB APPROVAL** 

(Check all applicable)

	OMB Number:	3235-0287
	Estimated average bure	den
1	hours nor resnance:	0.5

5. Relationship of Reporting Person(s) to Issuer

### Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

1. Name and Address of Reporting Person

## 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

2. Issuer Name and Ticker or Trading Symbol

Karaboutis Adriana				BIOGEN INC. [ 1	BIIB]	Ü	,	(Chec	k all applicable) Director	10% (	O	
(Last) BIOGEN INC. 225 BINNEY S	(First)		Date of Earliest Transa 0/01/2015	ction (M	lonth/[	Day/Year)	x	Officer (give title below) EVP, Tech. an	Other below	(specify y)		
		4.	If Amendment, Date of	Original	l Filed	(Month/Day/\		6. Individual or Joint/Group Filing (Check Applicable				
(Street)  CAMBRIDGE	MA	02142						Line)	Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City) (State) (Zip)												
		Table I - No	n-Derivativ	ve Securities Acq	uired,	, Dis	posed of,	or Ber	eficially	Owned		
1. Title of Security	(Instr. 3)		2. Transaction Date (Month/Day/Ye	Execution Date,	3. Transa Code ( 8)		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
					Code V		Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock		10/01/201	15	М		1,939	A	\$0	10,446	D		

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

F

F

S

804

862

417(1)

D

D

\$287.3

\$287.3

\$283.38

9,642

8,780

8,363

D

D

D

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		Derivative		6. Date Exerc Expiration Da (Month/Day/)	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Restricted Stock Unit	\$0	10/01/2015		M			1,939	(2)	10/01/2017	Common Stock	1,939	\$0	10,851	D	
Restricted Stock Unit	\$0	10/01/2015		J			2,323 <sup>(3)</sup>	(2)	10/01/2017	Common Stock	2,323	\$0	8,528	D	

### **Explanation of Responses:**

Common Stock Common Stock

Common Stock

- 1. Sale pursuant to a trading plan intended to comply with Rule 10b5-1 of the Securities Exchange Act of 1934.
- 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 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 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 of shares that vested.

10/01/2015

10/01/2015

10/02/2015

/s/ Matthew S. Gilman,

10/05/2015 Attorney-in-fact for Adriana

**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.