FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549	OMB APPROVAL				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02			
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87 Estimated average burden 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

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1. Name and Address of Reporting Person*  RASTETTER WILLIAM H					2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOGEN IDEC INC [ BIIB ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
RASII	LIIER W	/ILLIAM H									. 1			X	Directo	r		10% Ow	ner	
(Last)	ust) (First) (Middle) CAMBRIDGE CENTER					3. Date of Earliest Transaction (Month/Day/Year) 05/19/2004								X	below)	r (give title ) Executive Cl		Other (s below)	pecify	
14 CAM	BRIDGE C	ENIER														DACCULIVE	Cilci			
(Street) CAMBRIDGE MA 02142				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person							
CATIVIDIN	IDGL W		02142		_									Λ		,		One Repor		
(City)	(S	tate)	(Zip)												Person		e triair	Опе перы	ung	
		Tal	ole I - No	n-Deriv	vativ	e Se	curit	ties Ac	quired,	Dis	sposed o	f, or Be	neficia	ally	Owned					
D			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) of Disposed Of (D) (Instr. 3, 4			and 5) Securitie Benefici Owned F		es ally Following	Form:	: Direct Indirect str. 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			05/19	5/19/2004				M		25,000	) A	\$3.3	542	12 133,162			D			
Common Stock		05/19	05/19/2004				S		25,000	D	\$60	.03	3 108,162			D				
Common Stock														371,262				oy Γrust <sup>(1)</sup>		
Common Stock													50,367			D				
			Table II -	Deriva	ative	Seci	uritie	es Acq	uired, [	Disp	osed of,	or Ben	eficial	ly O	wned					
	<u> </u>			(e.g., p	puts,	call	s, wa	arrants			converti			_						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)				6. Date E Expiratio (Month/D	n Dat		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		D S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	mber						
Stock Option (right-to- buy) <sup>(2)</sup>	\$3.3542	05/19/2004			M			25,000	(3)		01/24/2006	Common Stock	25,00	0	(2)	108,16	i2	D		

## **Explanation of Responses:**

- 1. Shares are held in a trust of which the reporting person is the trustee. The reporting person disclaims beneficial ownership of the securities except to the extent of his pecuniary interest therein.
- 2. Granted under one of the Issuer's stock option plans, in an exempt transaction under SEC rule 16(b)-3(d).
- $3.\ Option\ becomes \ exercisable\ as\ to\ 25\%\ of\ the\ optioned\ shares\ on\ 1/01/97\ and\ as\ to\ the\ balance\ of\ the\ shares\ in\ 36\ equal\ monthly\ installments\ thereafter.$

## Remarks:

By: Benjamin S. Harshbarger For: Whilliam H. Rastetter

05/19/2004

\*\* 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.