FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL |
|---|------------------------|-----------|
| | OMB Number: | 3235-0287 |
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| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

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* PANGIA ROBERT W | | | | | | 2. Issuer Name and Ticker or Trading Symbol BIOGEN IDEC INC. [BIIB] | | | | | | | | | | | of Reportin cable) | g Per | son(s) to Iss | |
|--|---|--|--|---------|---|--|--|--------|------------|--------------------------------------|------|--|---|-------------|---------|---|---|---|--|--|
| | (Fi N IDEC INC | 2. | (Middle) | | 09/ | 3. Date of Earliest Transaction (Month/Day/Year) 09/06/2012 | | | | | | | | | | Officer below) | (give title | Filing | Other (s | specify |
| (Street) WESTON MA 02493 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - No | n-Deriv | ative | e Se | curit | ies Ac | cau | ired. C | Disi | osed o | of. or | Bene | eficial | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | ar) i | A. Deemed Execution Date, f any Month/Day/Year) | | , ! | 3. Transact Code (In 8) | ion | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | (A) or | 5. Amou Securiti Benefici Owned | int of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | | Code | , | Amount | (A |) or | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) |
| Common | Stock | 5/2012 | 2 | | | | M ⁽¹⁾ | | 5,000 |) | A | \$66.2 | 9 23 | 23,598 | | D | | | | |
| Common Stock 09/06/ | | | | | | | | | \top | S ⁽¹⁾ | | 5,000 | D \$15 | | \$150 | 18,598 | | D | | |
| | | 7 | | | | | | | | | | sed of, onverti | | | | Owned | | | , | |
| 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) | | n of | | | Oate Exer Diration C Donth/Day | ate | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Dat Exe | e ercisable | | kpiration ate | Title | O N O | lumber | | | | | |
| Stock Option (Right to Buy) ⁽²⁾ | \$66.29 | 09/06/2012 | | | M ⁽¹⁾ | | | 5,000 | | (3) | 0: | 1/03/2015 | Comm | | 5,000 | \$0 | 7,500 | | D | |

Explanation of Responses:

- $1.\ Exercise/sale\ pursuant\ to\ a\ trading\ plan\ intended\ to\ comply\ with\ Rule\ 10b5-1\ of\ the\ Securities\ Exchange\ Act\ of\ 1934.$
- $2. \ Granted \ under \ one \ of \ the \ Issuer's \ stock \ option \ plans, \ in \ an \ exempt \ transaction \ under \ SEC \ rule \ 16(b)-3(d).$
- $3. \ Immediately \ exercisable \ for \ all \ the \ option \ shares \ on \ grant \ date \ of \ 01/03/2005 \ subject \ to \ Issuer's \ repurchase \ rights \ which \ lapse \ on \ 01/03/2006.$

<u>Aras Lapinskas, Attorney in</u> <u>Fact for Robert W. Pangia</u>

09/10/2012

** 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.