Instruction 1(b)

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL								
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0.5

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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* Artavanis-Tsakonas Spyridon					2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOGEN INC. [BIIB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
,	113-13aKU	<u>nas opymuun</u>														Direct Office	or r (give title		10% O\ Other (s	· I
(Last)	(Fi	irst)	(Middle)		3. [	Date of	f Earlies	t Tran	sactio	on (Mon	th/D	ay/Year)			7	helow	) ``		below)	` ´
BIOGEN	`	,	,		02/	02/22/2016									SVI	P, Chief So	cienti	fic Office	r	
225 BIN	NEY STRE	ET																		
					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															- 1	,	filed by One	e Repo	orting Perso	n
CAMBR	IDGE M	A	02142													_	,		n One Repo	
(0)			·-·												Perso	n				
(City)	(S	tate)	(Zip)																	
		Tab	le I - Non-	-Deriva	ative	Sec	curitie	s Ac	quir	red, D	isp	osed c	of, or	Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3)			action								5. Amou Securiti				7. Nature of Indirect					
Date (Month/Date				Day/Ye	ar) it	Execution Date if any (Month/Day/Yea		_   C	ode (Ins		5)	osea Of (D) (Instr.		. 3, 4 anu	Benefic		(D) o	or Indirect	Beneficial Ownership	
					(	(MOIIIII/Day/Te		Ė		+		(4) an		Т	Reporte	d " '		(Instr. 4)	(Instr. 4)	
									C	ode V		Amount	ount (A) or Pr			(Instr. 3				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
			(6	e.g., pı	uts,	calls	, warr	ants	s, op	tions	, co	onverti	ble s	secur	ities)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date, T	4. Transactio Code (Inst				6. Date Exercisal Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable		opiration	Title	1	Amount or Number of Shares					
Restricted Stock Unit	\$0	02/22/2016			A		6,800		(	(1)	02	2/22/2019	Com		6,800	\$0	6,800		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]).

Matthew S. Gilman, Attorney

in Fact for Spyros Artavanis-

\*\* Signature of Reporting Person

02/24/2016

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.