FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB Number:	3235-0287
Estimated average	hurdon

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

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
hours per response:	0.5										

1. Name and Address of Reporting Person* <u>ALEXANDER SUSAN H</u>				2. Issuer Name and Ticker or Trading Symbol BIOGEN INC. [BIIB]								eck all applic	onship of Reporting all applicable) Director Officer (give title		on(s) to Issu 10% Ow Other (s	owner		
(Last) BIOGEN	INC.	,	(Middle)			Date of Earliest Transaction (Month/Day/Year) 2/15/2019							7	below)			below)	
225 BINNEY STREET (Street) CAMBRIDGE MA 02142				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person Person					
(City)	(S	tate)	(Zip)															
		Tal	ole I - Noi	n-Deri	ivativ	e Se	curi	ties Ac	quired,	Dis	posed of	f, or Ber	neficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Date,		Code (I	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr.				Beneficia Owned F	es ally Following	Form:	Direct Indirect Estr. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ction(s)		1	(Instr. 4)	
Common Stock 02/15/				5/201	2019		М		1,685	1,685 A		28,	28,776		D			
Common Stock 02/15/				5/201	2019		F		749	D	\$332.8	7 28,	027		D			
			Table II -								osed of, convertib			Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		se (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Date,	4. Transaction Code (Instr 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	ve es ially ng	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	5.1(5)		
Restricted Stock Unit	\$0	02/15/2019			M			1,685	(1)		02/15/2020	Common Stock	1,685	\$0	3,757	7	D	
Restricted Stock Unit	\$0	02/15/2019			J			1,033 ⁽²⁾	(1)		02/15/2020	Common Stock	1,033	\$0	2,724	4	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]).
- 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 Fact for Susan Alexander

02/20/2019

** 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.