## Edgar Filing: BIOGEN INC. - Form 4

DIOCEN INC

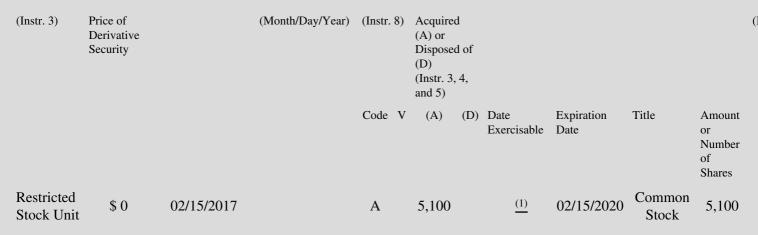
Form 4									
February 17, 2017 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 4, or Form 5 obligations may continue. See Instruction 1(b). February 17, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						N OMB Number: Expires: Estimated burden hou response	Number:3235-0287Expires:January 31, 2005Estimated average burden hours per response0.5		
(Print or Type Respon	nses)								
1. Name and Address of Reporting Person <u>*</u> Karaboutis Adriana			2. Issuer Name <b>and</b> Ticker or Trading Symbol <b>BIOGEN INC.</b> [ <b>BIIB</b> ]			5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) BIOGEN INC., 225 BINNEY STREET			3. Date of Earliest Transaction (Month/Day/Year) 02/15/2017			(Check all applicable) <u></u> Director 10% Owner <u>X</u> Officer (give title Other (specify below) EVP, Tech, Bus. Sol & Corp Aff			
Filed				. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>		
CAMBRIDGE, N		(7:e)					Person		
· • · · · ·	State)	(Zip)					Acquired, Disposed		-
1.Title of Security       2. Transaction Date       2A. Deemed         (Month/Day/Year)       Execution Date, any (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on	a separate lin	e for each cla	uss of secu						

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 control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Karaboutis Adriana BIOGEN INC. 225 BINNEY STREET CAMBRIDGE, MA 02142			EVP, Tech, Bus. Sol & Corp Aff				
Signatures							
Suzanne Murray, Attorney in F Karaboutis	Fact for A	driana	02/17/2017				
**Signature of Reportin	ng Person		Date				

## **Explanation of Responses:**

- \* 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).

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.

(1) 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]).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.