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McKenzie F Form 4	Paul										
February 20	, 2019										
FORM 4 UNITED STATES SECURITIES AND Washington, D.C.									OMB AF OMB Number:	PROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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							January 31 2009 Estimated average burden hours per response 0.5				
(Print or Type	Responses)										
McKenzie Paul Symbo			Symbol	uer Name and Ticker or Trading I EN INC. [BIIB]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction (Check					c all applicable)		
BIOGEN II	NC., 225 BINNEY	Y ST.	(Month/I 02/15/2	Day/Year) 019				Director X Officer (give below) EVP Pharma		Owner r (specify & Tech	
	(Street)			endment, Da nth/Day/Year	-	ıl		6. Individual or Joi Applicable Line) _X_ Form filed by O	ne Reporting Per	son	
CAMBRID	GE, MA 02142							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	3. Transactic Code (Instr. 8)	(Instr. 3,	(A) or	d of (D) 5)	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)	
Common Stock	02/15/2019			Code V M	1,448	(D) A	Price \$ 0	7,967.631	D		
Common Stock	02/15/2019			F	643	D	\$ 332.87	7,324.631	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	Transaction of Derivative Code Securities		cisable and Date /Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	\$ 0	02/15/2019		М	1,448	<u>(1)</u>	02/15/2020	Common Stock	1,448
Restricted Stock Unit	\$ 0	02/15/2019		J	888 (2)	<u>(1)</u>	02/15/2020	Common Stock	888

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director 10% Owner		Officer	Other			
McKenzie Paul BIOGEN INC. 225 BINNEY ST. CAMBRIDGE, MA 02142			EVP Pharmaceutical Oper & Tech				
Signatures							
/s/ Suzanne Murray, Attorney i McKenzie	n Fact for	r Paul	02/20/2019				

<u>**</u>Signature of Reporting Person

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.

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]).
- (2) This represents the difference between the maximum possible number of shares that were eligible for vesting and the actual number that vested.

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.

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