#### Edgar Filing: REGENERON PHARMACEUTICALS INC - Form 4

#### REGENERON PHARMACEUTICALS INC

Form 4

September 02, 2016

<b>FORM</b>	1 4							OMB AP	PROVAL	
_	Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287	
Check the	ger STATEM	STATEMENT OF CHANGES IN BENEFICIAL OWNER						Expires:	January 31, 2005	
subject to Section 1 Form 4 o Form 5	6. r		SECUR	RITIES				Estimated average burden hours per response		
Form 5 obligations may continue.  See Instruction 1(b).  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										
(Print or Type F	Responses)									
1. Name and Address of Reporting Person *  LAROSA JOSEPH J  2. Issuer Name and Ticker or Tradit Symbol REGENERON				0	5. Relationship of Reporting Person(s) to Issuer					
	PHARM	PHARMACEUTICALS INC [REGN]				(Check all applicable) Director 10% Owner				
(Last)	(First) (N	t) (Middle) 3. Date of Ear (Month/Day/					X_ Officer (give below)			
777 OLD SA ROAD	AW MILL RIVE		•				SVF Genera	i Courser and	Secret	
		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
TARRYTO	WN, NY 10591						Form filed by Mo Person	ore than One Rep	porting	
(City)	(State)	(Zip) Tab	le I - Non-D	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	09/01/2016		F	4,943	D	\$ 392.63	11,813	D		
Common Stock							141	I	By 401(k) Plan	

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control

number.

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	TC'41	or		
						Exercisable	Date	Title	Number		
				C 1 17	(A) (D)				of		
				Code V	(A) (D)				Shares		

### **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer 10% Owner Other Director

LAROSA JOSEPH J 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591

**SVP** General Counsel and Secret

## **Signatures**

/s/\*\*Joseph J.

LaRosa 09/02/2016

\*\*Signature of Date 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).

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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