Edgar Filing: REGENERON PHARMACEUTICALS INC - Form 4

REGENERON PHARMACEUTICALS INC

Form 4

December 26, 2013

December 20	5, 2015											
FORM 4 UNITED STATES SECURITIES AND EVCHANCE COMMISSION								OMB APPROVAL				
Washington, D.C. 20549							OMB Number:	3235-0287				
Check th if no long									Expires:	January 31, 2005		
subject to Section 16. Form 4 or			OF CHANGES IN BENEFICIAL OW: SECURITIES					NERSHIP OF	Estimated a			
									burden hou response	•		
Form 5	Filed purs	suant to S	Section 10	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	response	0.5		
obligation may cont				•	_	_		1935 or Section	n			
See Instru		30(h)	of the In	vestment	Compan	ıy Ac	t of 194	10				
1(b).												
(Print or Type I	Responses)											
			2. Issuer Name and Ticker or Trading				ng	5. Relationship of Reporting Person(s) to				
			Symbol REGENERON PHARMACEUTICALS INC [REGN]					Issuer				
								(Check all applicable)				
								Director 10% Owner				
(Last)	(First) (M	(Iiddle)	3. Date of	Earliest Tr	ansaction			_X_ Officer (give	titleOth	er (specify		
·			•	(Month/Day/Year)				below) SVP Clinica	below) al Development	& Reg		
777 OLD SA ROAD	AW MILL RIVEI	₹	12/24/20	013								
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year)			Applicable Line) _X_ Form filed by (One Reporting Pe	erson		
TARRYTO	WN, NY 10591							Form filed by M Person	Iore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deer Executio	1					5. Amount of Securities	6. Ownership			
(Instr. 3)	(Wolldin Day Tear)	any		Code	(Instr. 3,			Beneficially				
		(Month/I	Day/Year) (Instr. 8)					Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
						(A)		Reported	(IIIStr. +)	(IIIsu: +)		
						or		Transaction(s) (Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	(mour o una 1)				
Common Stock	12/24/2013			M	4,705	A	\$ 21.25	25,447	D			
Common								1,589	I	By 401(k)		
Stock								,		Plan		
Reminder: Rep	ort on a separate line	for each cl	lass of secu	rities benefi	cially owr	ned din	ectly or i	ndirectly.				
•	•				Perso	ns wl	no respo	ond to the collec		EC 1474		
								ned in this form d unless the forr		(9-02)		
								u uniess the ion				

displays a currently valid OMB control

number.

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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. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exer Expiration D (Month/Day/	ate	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
Incentive Stock Option (right to buy)	\$ 21.25	12/24/2013		M	4,705	<u>(1)</u>	12/18/2019	Common Stock	4,705

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Powchik Peter 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591			SVP Clinical Development & Reg				

Signatures

/s/**Peter
Powchik

**Signature of Reporting Person

12/24/2013

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).
- (1) The stock option award (combined incentive stock option and non-qualified stock option) vests in four equal annual installments, commencing one year after the date of grant.

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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