FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								
- 1										

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

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1. Name and Address of Reporting Person* RYAN ARTHUR F						RE	2. Issuer Name and Ticker or Trading Symbol REGENERON PHARMACEUTICALS INC [REGN]									Check all a	ship of Reporti applicable) rector		9 Person(s) to Issuer 10% Owner Other (specify below)	
(Last) (First) (Middle) 777 OLD SAW MILL RIVER ROAD						3. 🗅	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2016										ficer (give title low)			
(Street) TARRYT	TARRYTOWN NY 10591						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Table	e I - Noi	n-Deriv	/ative	Se	curitie	s Ac	quired	, Dis	posed o	f, or	Ben	efici	ally Ow	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Dat		Date,	3. Transa Code (8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				nd 5) Sec Ber Ow	mount of urities eficially ned Following orted	Form: Dir (D) or Ind	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
										Code	v	Amount	(A)) or)	Price	Tra	nsaction(s) tr. 3 and 4)			(Instr. 4)
Common Stock 11/15/2						/2016	2016			S		2,000		D	\$429	9.34	36,500			
Common Stock 11/15/2					/2016	2016				V	1,000		D	\$0	.0 35,500		D			
			Та									osed of, onvertib					d			
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security	on Da se (M	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)			8. Price of Derivativ Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Co	Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	nount mber ares					

Explanation of Responses:

/s/**Arthur F. Ryan

11/15/2016

** 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.