FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washingtor | 1, D.C. | 20549 | |
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| STATEMENT | OF CHA | NGES IN BI | ENEFICIAL | OWNERSHIP |
|-----------|--------|------------|-----------|-----------|

| OMB APP | ROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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

| 1. Name and Address of Reporting Person* YANCOPOULOS GEORGE (Last) (First) (Middle) 777 OLD SAW MILL RIVER ROAD | | | | | | Issuer Name and Ticker or Trading Symbol REGENERON PHARMACEUTICALS INC [REGN] Date of Earliest Transaction (Month/Day/Year) 12/16/2015 | | | | | | | | Director Officer (g | ble) | Person(s) to Issuer 10% Own Other (spi below) neron Laboratori | | ner pecify |
|--|--|--|--|---------|---|---|---|--|--|--------------------|--------------------------|---------------------------------|--|---|------------------------------|---|---|---------------|
| (Street) TARRY (City) | | Y State) | 10591 (Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | i. Indiv ine) X | vidual or Joint/Group Filing (Check Applicabl Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Ta | able I - Nor | -Deriva | tive S | ecuritie | es Acc | quired, | Dis | posed of | f, or Be | neficia | ally (| Owned | | | | |
| Dat | | Date | 2. Transaction Date Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | Securities Beneficial | | | Direct I | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | (| (Month/Day/Tear) | | v | Amount (A) or (D) | | r Price | • | Reported Transaction(s) (Instr. 3 and 4) | | (i) (iiisai. 4) | | (Instr. 4) | |
| Common | Stock | | 12/16 | | 2015 | | М | | 1,921 | A | \$52 | 2.03 | 501,921 | | D | | | |
| Common Stock | | | | | | | | | | | 5,654 | | I 4 | | By 401(k) Plan | | | |
| Common Stock | | | | | | | | | | | | 567,976 | | | I I | y Trust | | |
| | 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 Dat if any (Month/Day/Ye | Code | saction Derivative Ex | | Expiration | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | ities ng e Securit | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securitie Beneficia Owned Following Reported | e s ally g | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amour or Number of Sha | er | | Transaction(s) (Instr. 4) | | | |
| Incentive Stock Option (right to buy) | \$52.03 | 12/16/2015 | | М | | | 1,921 | (1) | | 12/16/2021 | Common Stock | 1,92 | 21 | \$0.0 | 0 | | D | |
| Non- Qualified Stock Option (right to | \$555.67 | 12/16/2015 | | A | | 146,815 | | (2) | | 12/16/2025 | Common Stock | 146,8 | 315 | \$0.0 | 146,8 | 15 | D | |

Explanation of Responses:

- 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.
- 2. The stock option award vests in four equal annual installments, commencing one year after the date of grant.

12/18/2015 /s/**George D. Yancopoulos

** 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.