FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Powchik Peter (Last) (First) (Middle)						Issuer Name and Ticker or Trading Symbol REGENERON PHARMACEUTICALS INC [REGN] One of Earliest Transaction (Month/Day/Year)								Relationship of Reporting Person(s) to Issuer theck all applicable) Director 10% Owner X Officer (give title below) Other (specify below) SVP Clinical Development & Reg				ner pecify	
777 OLD SAW MILL RIVER ROAD						08/01/2012								. 0					
(Street) TARRYTOWN NY 10591					_ 4.	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					
(City)	City) (State) (Zip)													Person					
		Tab	le I - Noi	า-Deri\	/ative	e Se	curit	ties Ac	quired,	Dis	posed o	of, or Be	neficial	ly Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month						2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispo		ties Acquire I Of (D) (Ins	ed (A) or tr. 3, 4 and	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock					08/01/2012				M ⁽¹⁾		4,562	2 A	\$21.9	2 19	19,706		D		
Common Stock 08/				08/03	/2012				M ⁽¹⁾		10,42	8 A	\$15.6	30	30,134		D		
Common Stock														1,	1,532		I 4	By 401(k) Plan	
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 (Month/Day/Year) 33. Transaction Date (Month/Day/Year) 34. Deemed Execution Date, if any (Month/Day/Year)			Date,	4. Transactior Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e Ownershi s Form: ally Direct (D) or Indirect g (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares						
Incentive Stock Option (right to buy)	\$15.64	08/01/2012			M ⁽¹⁾			10,428	(2)	1	10/02/2016	Common Stock	10,428	(3)	0.0		D		
Incentive Stock Option (right to	\$21.92	08/01/2012			M ⁽¹⁾			4,562	(2)	1	12/17/2017	Common Stock	4,562	(3)	0.0		D		

Explanation of Responses:

- $1.\ Disposition/acquisition\ made\ pursuant\ to\ a\ plan\ intended\ to\ comply\ with\ Rule\ 10b5-1(c).$
- 2. 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.
- 3. Exercisable date, exercise date, exercise price, purchase price, sales price, and/or expiration date is/are not applicable in this case.

/S/**Peter Powchik

08/02/2012

** 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.