FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject

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

	tion 1(b).	nac. Gee		Filed							ties Exchang Impany Act o		1934		nours	per res	sponse:	0.5
Name and Address of Reporting Person* Van Plew Daniel P					2. Issuer Name and Ticker or Trading Symbol REGENERON PHARMACEUTICALS, INC. [REGN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) 777 OLD SAW MILL RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 12/09/2022									X Officer (give title Other (specify below) below) EVP & General Mgr, Industrial				ial
(Street) TARRY	ΓΟWN N		0591 Zip)		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Forr Forr	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Table	I - No	n-Deriva	ative S	Secu	rities	Acc	quired	l, Dis	sposed of	, or B	enefic	ally Owr	ned			
Date			2. Transact Date (Month/Day	Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)
Common	Stock			12/09/2	2022				F		492	D	\$753	.28	30,086 D			
Common	Common Stock													1,065		I	By 401(k) Plan	
		Tal	ble II -								osed of, convertib				d			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date (Month/Day/Year) if any		tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

/s/**Daniel P. Van Plew

12/11/2022

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).