FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if r
\square	to Section 16. For
\cup	obligations may c
	Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

	to Sect obligat	this box if no lo tion 16. Form 4 ions may conti tion 1(b).	or Form 5	STA		d pursua	ant to S	Sectio	n 16(a)	of the S	ecuriti	es Exchang	e Act o			SHIP	Est		ber: average burd esponse:	3235-0287 en 0.5	
		nd Address of SA JOSE	2. Issuer Name and Ticker or Trading Symbol <u>REGENERON PHARMACEUTICALS,</u> <u>INC.</u> [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) 03/10/2023									X Oncer (give the below) below) EVP General Counsel and Secret					
(Street) TARRYTOWN NY 10591 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person											on				
			Table	e I - Noi	ו-Deriva	ative \$	Secu	ritie	s Acq	uired,	Dis	posed of	, or B	Benef	icia	ly Own	ed				
			Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code 8)		4. Securities Acquired (Disposed Of (D) (Instr. 3 5)		, 4 and Securitie Benefici		ties cially I Following	For (D)	m: Direct or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
										Code	v	Amount	(A) (D)	or P	rice	Transa	ction(s) 3 and 4)			(1150.4)	
Common Stock 03				03/10/	/2023				G		1,006	Г)	\$ <mark>0.0</mark>	0 0			Ι	2021 GRAT		
Common Stock																24	4,213		D		
Common Stock																5	,320		Ι	2022 GRAT	
Common Stock																	335		I	By 401(k) Plan	
			Та									osed of, onvertib				/ Owne	d				
	1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		on Date,	4. Transaction Code (Instr. 8) Code V		n of C Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/ Date Exercis	on Da Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numt of Title Share		tr.	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/** Joseph LaRosa

03/14/2023

** Signature of Reporting Person Date

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

 \ast 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.