FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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					<u>R</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol REGENERON PHARMACEUTICALS,										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						INC. [ REGN ]									>				10% Ov			
(Last)	,	First) LL RIVER ROA	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/09/2020									_	X Officer (give title below)  President and Chief Scientific							
					$\vdash$																	
(Street)	Street) FARRYTOWN NY 10591						4. If Amendment, Date of Original Filed (Month/Day/Year)										·		(Check App rting Persor			
(City)	2)	State)	(Zip)													Form filed by More than One Reporting Person						
		Та	ıble I - Nor	ı-Deri\	ati\	/e Se	cur	ities Ac	equ	ired, I	Disp	osed o	of, or	Bene	eficially	Owned						
1. Title of Security (Instr. 3)  2. Trans Date (Month)				actio	on	2A. Deemed Execution Date if any (Month/Day/Yea		3. Transaction		ction	4. Securi	rities Acquired (A) ed Of (D) (Instr. 3, 4		(A) or	5. Amoun Securities Beneficia Owned Fo	s ally following	Form	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount	ınt (A) or (D)		Price	Reported Transacti (Instr. 3 a				(Instr. 4)		
Common	Stock															57,4	57,465		I by 2018 GRAT			
Common	mon Stock														500,	500,000			by 2019 GRAT			
			Table II -									sed of, onverti				Owned			,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\		ansaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye				7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				c	ode	ode V		(D)	Da Ex			xpiration ate			mount r umber f Shares		(Instr. 4)	ion(s)				
Non- Qualified Stock Option (right to buy)	\$30.63	03/09/2020		N	<b>1</b> <sup>(1)</sup>			96,736		(2)	1	2/14/2020	Comn		96,736	\$0.0	150,00	00	D			
Non- Qualified Stock Option (right to buy)	\$30.63	03/09/2020		N	<b>1</b> <sup>(1)</sup>			150,000		(2)	1	2/14/2020	Comn		50,000	\$0.0	0(3)		D			

## **Explanation of Responses:**

- $1.\ Disposition/acquisition\ made\ pursuant\ to\ a\ plan\ intended\ to\ comply\ with\ Rule\ 10b5-1(c).$
- 2. With respect to 96,736 underlying shares, the option award vested in four equal annual installments, commencing one year after the date of grant; and with respect to 150,000 underlying shares, the option became exercisable on December 31, 2013, based upon the satisfaction by the Company of certain performance criteria during the period ended December 31, 2013.

/s/\*\*George D. Yancopoulos

03/11/2020 \*\* 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.