Edgar Filing: REGENERON PHARMACEUTICALS INC - Form 4

REGENERON PHARMACEUTICALS INC

Form 4

Stock

Stock

Common

December 19, 2007

December 15	9, 2007									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287 January 31,		
if no long subject to Section 1 Form 4 o Form 5	6. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSH SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of						Expires: Estimated a burden hour response	2005 verage	
obligation may cont See Instru 1(b).	ns Section 17(a)	of the Public		lding Cor	npan	y Act of	1935 or Section	1		
(Print or Type I	Responses)									
SCHLEIFER LEONARD S REGEI PHARI			2. Issuer Name and Ticker or Trading ymbol EGENERON			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ DirectorX10% Owner				
			PHARMACEUTICALS INC [REGN]							
(Last)	(First) (Mic	ddle) 3. Da	3. Date of Earliest Transaction			X Officer (give title Other (specify below)				
777 OLD SA ROAD	AW MILL RIVER	•	8/2007				Chief Exec	: Officer & Pres	sident	
	(Street)	(Street) 4. If Amendment, Da Filed(Month/Day/Year)			ear) Applicable Lir			or Joint/Group Filing(Check b) by One Reporting Person		
TARRYTO	WN, NY 10591						Form filed by M. Person			
(City)	(State) (Z	iip)	Table I - Non-	Derivative	Secur	rities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)			Code	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)		d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	01/00/0007			Amount		Price	(Instr. 3 and 4)	Б		
Stock	01/08/2007		G	1,000	D	21.92	56,547	D		
Common							4.028	I	By 401(k)	

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

Persons who respond to the collection of information contained in this form are not (9-02)

Ι

4,028

900

Plan

By Son

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required to respond unless the form displays a currently valid OMB control number.

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 Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo Nun Shai
Non-qualified Stock Option (right to buy)	\$ 21.92	12/17/2007		A	250,000	<u>(1)</u>	12/17/2017	Common Stock	25
Class A Stock	(2)					(2)	(2)	Common Stock	1,7
Class A Stock	<u>(2)</u>					(2)	(2)	Common Stock	29

Reporting Owners

Reporting Owner Name / Address	Reporting Owner Name / Address				
	Director	10% Owner	Officer		Other
COLUETEED LEONADD C					

SCHLEIFER LEONARD S 777 OLD SAW MILL RIVER ROAD TARRYTOWN, NY 10591

X X Chief Exec Officer & President

Relationships

Signatures

/s/**Leonard S.
Schleifer

**Signature of Reporting
Date

Person

Explanation of Responses:

- * 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).
- (1) The stock option award vests in four equal annual installments, commencing one year after the date of grant.
- (2) Exercisable date, exercise date, exercise price, purchase price, sales price, and/or expiration date is not applicable in this case.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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