FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Washington, D.C. 20045

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSH | ΗP |
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OMB APPROVAL

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Estimated average burden 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

| (Last) 777 OLD (Street)                                  | 777 OLD SAW MILL RIVER ROAD  Street)  TARRYTOWN NY 10591  (City) (State) (Zip) |  |  |             |  | 2. Issuer Name and Ticker or Trading Symbol REGENERON PHARMACEUTICALS INC [ REGN ]  3. Date of Earliest Transaction (Month/Day/Year) 12/18/2009  4. If Amendment, Date of Original Filed (Month/Day/Year) |  |  |  |   |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  VP Regul Devel & Med Safety  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person |   |   |                                       |
|--|--|--|--|-------------|--|---|--|--|--|---|---|--|---|---|---------------------------------------|
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D |  |  |  |             | 2A. Deemed Execution Date, if any (Month/Day/Year) |   | 3.<br>Transacti<br>Code (Ins<br>8)<br>Code V | 4. Secur<br>Dispose<br>5)  Amount  | ties Acquired (A) or of (D) (Instr. 3, 4 a |   | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) |  | 5. Ownership<br>Form: Direct<br>D) or Indirect<br>I) (Instr. 4)                                 | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security          | 3. Transaction<br>Date<br>(Month/Day/Year) | (e.g<br>3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year | 4.<br>Trans | saction<br>(Instr.                                 | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  |  | 6, Options, converti<br>6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |  | 7. Title and Amour<br>of Securities<br>Underlying<br>Derivative Securit<br>(Instr. 3 and 4) |   | 8. Price of Derivative Security  | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4  | Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |  |  | Code        | v  | (A)   | (D)  | Date<br>Exercisable  | Expiration<br>Date                         | Title   | Amount<br>or<br>Number<br>of<br>Shares  |  |   |   |                                       |
| Incentive<br>Stock<br>Option<br>(right to<br>buy)        | \$21.25  | 12/18/2009                                 |  | A           |  | 4,705   |  | (1)  | 12/18/2019                                 | Common<br>Stock   | 4,705   | (2)  | 4,705   | D   |                                       |
| Non-<br>Qualified<br>Stock<br>Option<br>(right to        | \$21.25  | 12/18/2009                                 |  | A           |  | 23,795  |  | (1)  | 12/18/2019                                 | Common<br>Stock   | 23,795  | (2)  | 23,795  | D   |                                       |

## **Explanation of Responses:**

- 1. 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.
- 2. Exercisable date, exercise date, exercise price, purchase price, sales price, and/or expiration date is not applicable in this case.

/s/\*\*William G. Roberts

12/21/2009

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.