FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number	2225 02							

OMB Number: 3235-0287 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* GOLDSTEIN JOSEPH L				2. Issuer Name and Ticker or Trading Symbol REGENERON PHARMACEUTICALS 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									suer							
					INC [REGN]									X	Direc	ctor		10% C	wner	
(Last) (First) (Middle)						_ : ,										Officer (give title below)			Other (specify below)	
(Last) (First) (Middle) 777 OLD SAW MILL RIVER ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/21/2011											,		,		
	011// 1/12																	/-		
(Street)					4. If	Ame	ndment,	Date o	of Original	Filed	(Month/Da	ay/Yea	ar)		Indiv ne)	ridual o	r Joint/Group	Filing (C	heck A	pplicable
TARRYT	OWN I	NY	10591												X	Form	n filed by One	e Reportir	g Pers	on
(City)	(State)	(Zip)											Form Pers	n filed by Moi on	re than Oi	ne Rep	orting		
		Tab	le I - Nor	n-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, oı	Ben	eficia	ally	Owne	ed			
2. Transa Date (Month/D.				Execution Date,		Code (Instr. 5)					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount		(A) or (D)	Price		Transa	action(s) 3 and 4)			(1130.4)
Common Stock 03/2				03/21	/2011			S ⁽¹⁾		11,505 D		D	\$4	0 0		D				
		Ta	able II - I								sed of, onvertib				/ Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis: Price of Derivative Security		3A. Deem Execution if any (Month/Da	ay/Year)	4. Transa Code (I 8)			ative rities ired osed	6. Date Expiration (Month/D	n Date	е	Amo Sec Und Deri	Amor or Nur of	ount nber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Inc (I) (In		11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

 $1.\ Disposition/acquisition\ made\ pursuant\ to\ a\ plan\ intended\ to\ comply\ with\ Rule\ 10b5-1(c).$

<u>/s/**Joseph L. Goldstein</u> 03/21/2011

Doto

** 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.