#### Edgar Filing: REGENERON PHARMACEUTICALS INC - Form 4

**REGENERON PHARMACEUTICALS INC** Form 4 January 05, 2005 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading GOLDBERG MURRAY A Issuer Symbol REGENERON (Check all applicable) PHARMACEUTICALS INC [REGN] Director 10% Owner X\_\_Officer (give title Other (specify (Last) (First) (Middle) 3. Date of Earliest Transaction below) below) (Month/Day/Year) SVP Fin & Admin, CFO, & Treas 777 OLD SAW MILL RIVER 01/03/2005 ROAD (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting TARRYTOWN, NY 10591 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of Form: Direct Indirect Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially (D) or Beneficial anv (Month/Day/Year) (Instr. 8) Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Common 01/03/2005 8.800 38,127 D M Α 5 625 Stock

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 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5. Number<br>prof Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                        | 8.<br>De<br>Se<br>(In |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------|---------------------------------------------------------------------|----------------------------------------|-----------------------|
|                                                     |                                                                       |                                         |                                                             | 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)   | \$ 5.625                                                              | 01/03/2005                              |                                                             | М                                      | 8,800                                                                                                             | <u>(1)</u>                                                     | 03/15/2005         | Common<br>Stock                                                     | 8,800                                  |                       |

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# **Reporting Owners**

| <b>Reporting Owner Name / Address</b> | Relationships |           |             |       |  |  |  |
|---------------------------------------|---------------|-----------|-------------|-------|--|--|--|
| r of the second                       | Director      | 10% Owner | Officer     | Other |  |  |  |
| GOLDBERG MURRAY A                     |               |           | SVP Fin &   | ٢     |  |  |  |
| 777 OLD SAW MILL RIVER ROAD           |               |           | Admin, CFO, |       |  |  |  |
| TARRYTOWN, NY 10591                   |               |           | & Treas     |       |  |  |  |
| <b>O</b> !                            |               |           |             |       |  |  |  |

## Signatures

/s/\*\*Murray A. 01/05/2005 Goldberg \*\*Signature of Reporting

Person

Date

### **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) An exercise date, exercise price, purchase price, sales price and expiration date are 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.