## Edgar Filing: Fenimore Christopher R. - Form 4

Fenimore Cl Form 4 April 18, 20	hristopher R.											
	ЛЛ									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB Number:	3235-0287				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. Statement of chain Filed pursuant to Section Section 17(a) of the Public U					<ul> <li>ashington, D.C. 20549</li> <li>NGES IN BENEFICIAL OWNERSHIP OF SECURITIES</li> <li>16(a) of the Securities Exchange Act of 1934, Jtility Holding Company Act of 1935 or Section nvestment Company Act of 1940</li> </ul>						January 31, 2005 iverage rs per 0.5	
1(b). (Print or Type	Responses)											
Fenimore Christopher R. Sym REG PHA				2. Issuer Name <b>and</b> Ticker or Trading ymbol EGENERON HARMACEUTICALS INC REGN]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) 777 OLD S ROAD	(First) AW MILL RIVE	(Middle) E <b>R</b>	3. Date of (Month/D 04/18/2	ay/Yea		ansaction			X Officer (give below)	title Other below) P Controller	er (specify	
TAPPVTO	(Street) WN, NY 10591		4. If Ame Filed(Mor			te Origina	I		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	One Reporting Pe	rson	
		(Zin)							Person			
(City)	(State)	(Zip)			on-D			-	uired, Disposed of		-	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	) Executio any		Code (Instr.	. 8)	4. Securi n(A) or D (Instr. 3, Amount	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	04/18/2019			Μ		350	A	\$ 21.25	7,446	D		
Common Stock	04/18/2019			G	V	350	D	\$0	7,096	D		
Common Stock	04/18/2019			G	V	350	А	\$ 0	1,897	Ι	By Trust	
Common Stock									1,387	I	By 401(k) Plan	
									1,424	Ι		

Common Stock			by 2017 GRAT
Common Stock	2,950	I	by 2018 GRAT

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 Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transactio	5. Number			7. Title and Amount of		8. Pr Deri
Security (Instr. 3)	or Exercise Price of Derivative Security	(Wonth Day Tear)	(Month/Day/Year)	Code (Instr. 8)	nof Expiration Date Derivative (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			(Instr. 3 and 4)		Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Incentive Stock Option (right to buy)	\$ 21.25	04/18/2019		М	350	(2)	12/18/2019	Common Stock	350	ç

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
	Director		Other					
Fenimore Christopher R. 777 OLD SAW MILL RIVER ROA TARRYTOWN, NY 10591	AD		VP Controller					
Signatures								
/s/**Christopher R. Fenimore	04/18/2019							

<u>\*\*</u>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) These shares are held in a trust for the benefit of the reporting person's spouse. The reporting person and the reporting person's spouse are trustees of the trust.
- (2) 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.

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.