Image# 15951383362 PAGE 1 / 12

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		All Authorized				Office Use	Only
NAME OF COMMITTEE (in full)	PE OR PRINT ▼		mple: If typing the lines.	ng, type	12FE4M	15	
Regeneron Pharmaceuti	cals, Inc. PA	ιC					
ADDRESS (number and street)	777 Old Saw Mill I	River Road					
Check if different							
than previously reported. (ACC)	Tarrytown				NY	10591	
2. FEC IDENTIFICATION NUM	BER ▼	CITY 🛦		;	STATE 🛦	Z	IP CODE ▲
C C00562264		3. IS THIS REPORT		NEW N) OR		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	×	May 20 (M5)	Au	ıg 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Duo on	Mar 20 (M3)		Jun 20 (M6)	-	ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)	(c) 12-Day	Apr 20 (M4)		Jul 20 (M7)		ct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Ele Report		Primary (12F		-	al (12G) ıl (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)	Пороп	ior the.	Convention	120)	Ороска	(120)	
January 31 Year-End Report (YE)		Election on	M M /	D D /	YIYIYI	· '	n the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-E		General (300	G)	Runoff	(30R)	Special (30S)
Termination Report (TER)	Пероп	Election on	M = M /	D = D /	Y " Y " Y "		n the State of
5. Covering Period 04	/ D D / Y	2015	through	04	30	2015	
I certify that I have examined this	Report and to the	e best of my kno	wledge and	belief it is tru	ie, correct a	and complete	
Type or Print Name of Treasurer	Robert E. Landry						
Signature of Treasurer Robert E	E. Landry		[Electronicall	y Filed]	oate 05	M / D 18	2015
NOTE: Submission of false, erroneou	us, or incomplete i	nformation may su	bject the per	son signing th	nis Report to	the penalties	of 2 U.S.C. §437g.
Office Use Only							FORM 3X v. 12/2004

SHMMARY DAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		3
Regeneron Pharmaceuticals, Inc	. PAC	
· · ·		
Report Covering the Period: From:	04 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 04 30 / Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		22658.61
(b) Cash on Hand at Beginning of Reporting Period	40660.47	
(c) Total Receipts (from Line 19)	4537.69	23857.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45198.16	46515.61
7. Total Disbursements (from Line 31)	440.92	1758.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44757.24	44757.24
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mult	icandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530	

Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:	Total Tills I criod	Calcilaa Tear to Bate
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	3830.62	20007.14
(ii) Unitemized	266.15	2091.49
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	4096.77	22098.63
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	7	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4096.77	22098.63
Transfers From Affiliated/Other	7	
Party Committees	0.00	0.00
Tarty Committees	0.00	
All Loans Received	0.00	0.00
	7	
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	440.92	1758.37
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	4	7
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds	4	7
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(b) Levin Funds (from Schedule H5)		
2, 1., 10, 10, 11, 410 10(0))	1001.00	23857.00
Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	4537.69	23857.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
Operating Expenditures: (a) Allocated Federal/Non-Federal	10101 11113 1 61100	Calendar Year-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(") No 5 1 2 1 0 1 0 1	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	440.92	1758.37		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))▶	440.92	1758.37		
Transfers to Affiliated/Other Party	0.00	0.00		
CommitteesContributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures				
(use Schedule E)	0.00	0.00		
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	2.00		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other	0.00	0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees				
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
(434 21100 25(4), (5), 414 (6))				
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity (from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	0.00	0.00		
With Federal Funds(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
	7			
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	440.92	1758.37		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	440.92	1758.37		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4096.77	22098.63
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4096.77	22098.63
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	440.92	1758.37
7. Offsets to Operating Expenditures (from Line 15, page 3)	440.92	1758.37
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	FOR LINE NUMBER: PAGE 6 O	F 12
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16	☐ ₁₇

	Statements may not be sold or used by any per he name and address of any political committee	
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, I	Inc. PAC	
Full Name (Last, First, Middle Initial) Ned Braunstein Mailing Address 777 Old Saw Mill River Roa City	d State Zip Code	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼	Occupation Sr. VP - Regulatory Affairs Aggregate Year-to-Date 1538.40	Amount of Each Receipt this Period 384.60 Bi-weekly payroll deduction: \$192.30
Full Name (Last, First, Middle Initial) Scott Carver Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NY 10591 C Occupation VP- Clinical Scale Mfg. & Sciences Aggregate Year-to-Date ▼ 769.20	Date of Receipt 04 17 2015 Transaction ID: SA11AI.4280 Amount of Each Receipt this Period 192.30 Bi-weekly payroll deduction: \$96.15
Full Name (Last, First, Middle Initial) Christopher Daly Mailing Address 777 Old Saw Mill River Roa City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary Other (specify)	d State Zip Code NY 10591 C Occupation Director - Oncology & Angiogenesis Aggregate Year-to-Date ▼ 769.20	Date of Receipt 04 17 2015 Transaction ID: SA11AI.4278 Amount of Each Receipt this Period 192.30 Bi-weekly payroll deduction: \$96.15
SUBTOTAL of Receipts This Page (optional)	>	769.20
TOTAL This Period (last page this line number	er only)	

	FOR LINE	NUMBER	: PAGE	E 7 O	F 1						
Use separate schedule(s)	(check only	(check only one)									
for each category of the Detailed Summary Page	X 11a	11b	11c	12							
zotanou oummury r ugo	13	14	15	16	□ 1						

Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any peg the name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals	s, Inc. PAC	
Full Name (Last, First, Middle Initial) Jeanette Fairhurst Mailing Address 777 Ctd See Mill Bires B		Date of Receipt
Mailing Address 777 Old Saw Mill River R	oad	04 17 2015 T
City	State Zip Code NY 10591	Transaction ID : SA11AI.4288
Tarrytown FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	100.00
Name of Employer	Occupation	Bi-weekly payroll deduction: \$50.00
Regeneron Pharmaceuticals Inc.	Senior Manager-Therapeutic Antibodies	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) 3. Chris Fenimore		Date of Receipt
Mailing Address 777 Old Saw Mill River Re	oad	M = M / D = D / Y = Y = Y
City	State Zip Code	04 17 2015
Tarrytown	NY 10591	Transaction ID : SA11AI.4286 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	192.30
Name of Employer	Occupation	Bi-weekly payroll deduction: \$96.15
Regeneron Pharmaceuticals Inc.	VP - Financial Planning	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	769.20	
Full Name (Last, First, Middle Initial) C. Gregory Geba		Date of Receipt
Mailing Address 777 Old Saw Mill River R		04 17 2015
City Tarrytown	State Zip Code NY 10591	Transaction ID : SA11AI.4294 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.92
Name of Employer	Occupation	Bi-weekly payroll deduction: \$38.46
Regeneron Pharmaceuticals Inc.	VP Deputy Head - Clinical Development	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	307.68	
SUBTOTAL of Receipts This Page (optional	ll)	369.22
IUIAL This Period (last page this line num	nber only)	

	FOF	R LINE	NU	IMBER	:	PAGE	Ξ	8 C)F	12
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Patrice Gilooly Date of Receipt Mailing Address 777 Old Saw Mill River Road 2015 City State Zip Code Transaction ID: SA11AI.4295 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation VP - QA & Operations Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 769.20 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph LaRosa Date of Receipt Mailing Address 777 Old Saw Mill River Road 04 17 2015 City State Zip Code Transaction ID: SA11AI.4282 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Sr. VP - General Counsel & Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 1538.40 Other (specify) Full Name (Last, First, Middle Initial) c. Scott Mellis Date of Receipt Mailing Address 777 Old Saw Mill River Road 04 17 2015 City State Zip Code Transaction ID: SA11AI.4277 NY Tarrytown 10591

SUBTOTAL of Receipts This Page (optional)		,	Ī	,	Ī		961	.50	
TOTAL This Period (last page this line number only)	_	 7	 	7		_			

1538.40

VP - Clinical Sciences Trans. Medicine

Aggregate Year-to-Date ▼

С

Occupation

384.60

Amount of Each Receipt this Period

Bi-weekly payroll deduction: \$192.30

FEC ID number of contributing

Regeneron Pharmaceuticals Inc.

Other (specify)

General

federal political committee.

Name of Employer

Primary

Receipt For:

11	FOR LINE		PAGE	9 0	F_					
Use separate schedule(s) for each category of the	(check only	(check only one)								
Detailed Summary Page	X 11a	11b	11c	12						
,g	13	14	15	16						

12

ny information copied from such Reports or for commercial purposes, other than using	and Statements may not be sold or used by any peng the name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals	s, Inc. PAC		
Full Name (Last, First, Middle Initial) Hala Mirza Mailing Address 777 Old Saw Mill River Road		Date of Receipt	
0::	7.0	04 17 2015	
City Tarrytown	State Zip Code NY 10591	Transaction ID : SA11AI.4276	
· ·	10391	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	384.60	
Name of Employer	Occupation	Bi-weekly payroll deduction: \$192.30	
Regeneron Pharmaceuticals Inc.	VP - Corporate Communications		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1538.40		
Full Name (Last, First, Middle Initial) William Olson	Date of Receipt		
Mailing Address 777 Old Saw Mill River F	Road	M = M / D = D / Y = Y = Y	
City	State Zip Code	04 17 2015	
Tarrytown	NY 10591	Transaction ID : SA11AI.4281 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	384.60	
Name of Employer	Occupation	Bi-weekly payroll deduction: \$192.30	
Regeneron Pharmaceuticals Inc.	VP - Research & Development		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1538.40		
Full Name (Last, First, Middle Initial) Jeffrey Skulsky	1	Date of Receipt	
Mailing Address 777 Old Saw Mill River I	04 17 2015		
City	State Zip Code	Transaction ID : SA11AI.4290	
Tarrytown	NY 10591	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	384.60	
Name of Employer	Occupation	Bi-weekly payroll deduction: \$192.30	
Regeneron Pharmaceuticals Inc.	VP - Info Systems and Technologies		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1538.40		
SUBTOTAL of Receipts This Page (option	al)	1153.80	
TOTAL This Period (last page this line nu	mber only)	. 1	

FOR LINE NUMBER: PAGE 10 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Tor Smerland Date of Receipt Mailing Address 777 Old Saw Mill River Road 04 2015 City Zip Code State Transaction ID: SA11AI.4291 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing C 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Exec. Dir. - Assistant General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 1538.40 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Volpe Date of Receipt Mailing Address 777 Old Saw Mill River Road 04 2015 17 City State Zip Code Transaction ID: SA11AI.4283 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Executive Director - Tax Receipt For: Aggregate Year-to-Date ▼ Primary General 769.20 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 576.90 SUBTOTAL of Receipts This Page (optional)..... 3830.62 TOTAL This Period (last page this line number only).....

S 17

SCHEDULE A (FEC Form 3X	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 12 (check only one) 11a 11b 11c 12 13 14 X 15 16 17		
TEMIZED RECEIPTS	for each category of the Detailed Summary Page			
any information copied from such Reports and refor commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any the name and address of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee.		
Regeneron Pharmaceuticals,	Inc. PAC			
Full Name (Last, First, Middle Initial) Regeneron Pharmaceuticals, Inc. Mailing Address 777 Old Saw Mill River Road		Date of Receipt		
		04 29 2015		
City Tarrytown	State Zip Code NY 10591	Transaction ID : SA15.4299 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	440.92		
Name of Employer	Occupation	Reimbursement of previously paid admin. exper (i.e., bank fees)		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1758.37			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	A		
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period		
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
Full Name (Last, First, Middle Initial)	Date of Receipt			
Mailing Address	M = M / D = D / Y = Y = Y			
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	Autourit of East resorpt the Ferral		
Name of Employer	Occupation			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)		440.92		
	per only)	440.92		

SCHEDULE B (FEC Form 3X)	Llan congrete cohedula(a)	FOR LINE NUMBER: PAGE 12 OF 12			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	one) 22 23 28a 28		
Any information copied from such Reports and Statem	nents may not be sold or use				
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Regeneron Pharmaceuticals, Inc. F	PAC				
Full Name (Last, First, Middle Initial)					
A. JP Morgan Chase Bank, NA			Date of Disbursement		
Mailing Address Two Corporate Drive			04 15 / 2015		
City	State Zip Code		Transaction	ID - CD24D 4200	
Shelton	CT 06484		Transaction	ID : SB21B.4300	
Purpose of Disbursement Bank Fees		001	Amount of Ea	ch Disbursement this Period	
Candidate Name Category				440.92	
Office Sought: House Disbursen	nent For:	Туре			
	Primary General				
	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) B.			Date of Disbu	reamant	
5.			Mam / Dab / Yayayay		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type			
Office Sought: House Disbursem	nent For:	.,,,,,	,	,	
	Primary General				
State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C.			Date of Disbu	rsement	
			M = M /	D D / Y T Y T Y T Y	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
			Amount of Ea	ch Disbursement this Period	
Candidate Name		Category/			
Office Sought: House Disbursen	aont For:	Туре			
	Primary General				
	Other (specify) ▼				
State: District:					
				440.92	
SUBTOTAL of Disbursements This Page (optional)		·····•		440.92	
TOTAL This Period (last page this line number only).				440.92	
(