

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Regeneron Pharmaceuticals, Inc. PAC

ADDRESS (number and street) 777 Old Saw Mill River Road
Check if different than previously reported. (ACC) Tarrytown NY 10591

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00562264 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [04] / [01] / [2019] through [04] / [30] / [2019]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Landry, Robert, E., ,
Type or Print Name of Treasurer

Signature of Treasurer Landry, Robert, E., , [Electronically Filed] Date [05] / [20] / [2019]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="58571.32"/>	<input type="text" value="58571.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="83513.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6871.72"/>	<input type="text" value="32705.68"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="90385.09"/>	<input type="text" value="91277.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="284.54"/>	<input type="text" value="1176.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="90100.55"/>	<input type="text" value="90100.55"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate 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

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6741.72	27864.70
(ii) Unitemized	130.00	3642.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6871.72	31507.34
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6871.72	31507.34
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1198.34
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(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
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	6871.72	32705.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6871.72	32705.68

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	284.54	1176.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	284.54	1176.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other 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 (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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 With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	284.54	1176.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	284.54	1176.45

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6871.72	31507.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6871.72	31507.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	284.54	1176.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1198.34
38. Net Operating Expenditures (subtract Line 37 from Line 36)	284.54	- 21.89

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Anderson, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Staff Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6197
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$25 Bi-weekly payroll deduction

B. Bermingham, Maya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Gov. Affairs & Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6198
 Amount of Each Receipt this Period 384.00
 Memo Item
 \$192 Bi-weekly payroll deduction

C. Braunstein, Ned, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Regulatory Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6200
 Amount of Each Receipt this Period 384.00
 Memo Item
 \$192 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	818.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Carver, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) SVP- Clin. Scale Mfg. & Proc. Sciences
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
865.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2019

Transaction ID : SA11AI.6201

Amount of Each Receipt this Period
 192.30

Memo Item
 \$96.15 Bi-weekly payroll deduction

B. Chen, Gang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) VP - Protein Expression Sciences
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2019

Transaction ID : SA11AI.6202

Amount of Each Receipt this Period
 100.00

Memo Item
 \$50 Bi-weekly payroll deduction

C. Daly, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Sr. Director - Oncology & Angiogenesis
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
865.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2019

Transaction ID : SA11AI.6203

Amount of Each Receipt this Period
 192.30

Memo Item
 \$96.15 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	484.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Daly, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Preclin. Devt & Protein Chem
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6204
 Amount of Each Receipt this Period 384.00
 Memo Item
 \$192 Bi-weekly payroll deduction

B. Fairhurst, Jeanette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Assoc. Director Therapeutic Antibodies
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6205
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Bi-weekly payroll deduction

C. Fenimore, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Vice President, Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6206
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$96.15 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	676.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Geba, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Development Strategy & Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.14

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6207
 Amount of Each Receipt this Period 76.92
 Memo Item
 \$38.46 Bi-weekly payroll deduction

B. Gilooly, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - QA & Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6208
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$96.15 Bi-weekly payroll deduction

C. LaFond, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Director-Scale Up & Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6211
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$25 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	319.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. LaRosa, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Exec. VP - General Counsel & Secretar
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt **04 / 26 / 2019**
Transaction ID : SA11AI.6212
 Amount of Each Receipt this Period 384.60
 Memo Item
 \$192.30 Bi-weekly payroll deduction

B. Lebel, Delman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Director, State Affairs & State Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **04 / 26 / 2019**
Transaction ID : SA11AI.6213
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Bi-weekly payroll deduction

C. Levine, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Assoc. General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **04 / 26 / 2019**
Transaction ID : SA11AI.6214
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$50 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶	584.60
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Markowitz, Jay, , ,			Date of Receipt MM / DD / YYYY 04 / 26 / 2019
Mailing Address 777 Old Saw Mill River Road			Transaction ID : SA11AI.6216
City Tarrytown	State NY	Zip Code 10591	Amount of Each Receipt this Period 384.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item \$192 Bi-weekly payroll deduction
Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.		Occupation (for Individual) Senior Vice President - Portfolio Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1728.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mellis, Scott, , ,			Date of Receipt MM / DD / YYYY 04 / 26 / 2019
Mailing Address 777 Old Saw Mill River Road			Transaction ID : SA11AI.6217
City Tarrytown	State NY	Zip Code 10591	Amount of Each Receipt this Period 384.60
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item \$192.30 Bi-weekly payroll deduction
Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.		Occupation (for Individual) VP - Clinical Sciences Trans. Medicine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1730.70	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mirza, Hala, , ,			Date of Receipt MM / DD / YYYY 04 / 26 / 2019
Mailing Address 777 Old Saw Mill River Road			Transaction ID : SA11AI.6218
City Tarrytown	State NY	Zip Code 10591	Amount of Each Receipt this Period 384.60
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item \$192.30 Bi-weekly payroll deduction
Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.		Occupation (for Individual) Sr. VP - Corporate Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1730.70	

SUBTOTAL of Receipts This Page (optional).....	1153.20
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Murphy, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Executive VP, Research -Regeneron La
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6219
 Amount of Each Receipt this Period 384.60
 Memo Item
 \$192.30 Bi-weekly payroll deduction

B. Olson, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Research & Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6220
 Amount of Each Receipt this Period 384.60
 Memo Item
 \$192.30 Bi-weekly payroll deduction

C. Paull, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Vice President - Human Resources
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6221
 Amount of Each Receipt this Period 384.00
 Memo Item
 \$192 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶ 1153.20
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Ruddy, Marcella, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Early Clinical Devt & Experimenta
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6223
 Amount of Each Receipt this Period 384.00
 Memo Item
 \$192 Bi-weekly payroll deduction

B. Soo, Yuhwen, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Biostatistics and Data Mgmt, Clinic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6224
 Amount of Each Receipt this Period 384.00
 Memo Item
 \$192 Bi-weekly payroll deduction

C. Thurston, Olin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Oncology & Angiogenesis
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6225
 Amount of Each Receipt this Period 200.00
 Memo Item
 \$100 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	968.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

A. Vitti, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Clinical Sciences - Ophthalmology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6226
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$96.15 Bi-weekly payroll deduction

B. Volpe, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Vice President - Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6227
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$96.15 Bi-weekly payroll deduction

C. Zambrowicz, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) SVP - Functional Genomics and Chief V
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 04 / 26 / 2019
Transaction ID : SA11AI.6228
 Amount of Each Receipt this Period 200.00
 Memo Item
 \$100 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	584.60
TOTAL This Period (last page this line number only).....	6741.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Regeneron Pharmaceuticals, Inc. PAC

Full Name (Last, First, Middle Initial)

A. JP Morgan Chase Bank, NA

Mailing Address Two Corporate Drive

City Shelton State CT Zip Code 06484

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6230
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶