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DECENIVDIO

Form 4 June 02, 201											
FORM	_							OMB A	APPROVAL		
FURI	/ 4 UNITED	STATES					COMMISSION	OMB Number:	3235-0287		
Check th if no lon subject t Section Form 4 e Form 5 obligatio may con <i>See</i> Instr 1(b).	nger 50 16. 50 50 50 50 50 50 50 50 50 50	rsuant to So (a) of the P	Washington, D.C. 20549 CNT OF CHANGES IN BENEFICIAL OSECURITIES ant to Section 16(a) of the Securities Exch of the Public Utility Holding Company Act 30(h) of the Investment Company Act of				OWNERSHIP OFExpires:January 31, 2005Estimated average burden hours per responseEstimated average ourden hours per response0.5				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> STUMP DAVID C			2. Issuer Name and Ticker or Trading Symbol REGENXBIO Inc. [RGNX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (Middle)	3. Date c	of Earliest T	ransaction	L	(Chec	к ап аррпсао			
	NXBIO INC., 97 CENTER DRIV	12	(Month/I 06/01/2	Day/Year) 2016			X Director Officer (give below)		% Owner her (specify		
		4. If Amendment, Date Original Filed(Month/Day/Year)			al	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
ROCKVIL	LE, MD 20850						Form filed by M Person	Iore than One R	Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	e Securities A	cquired, Disposed of	f, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution I any (Month/Day	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) or l of (D)	SecuritiesFBeneficially(Owned(5. Ownership Form: Direct D) or Indirect I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Re	port on a separate line	e for each cla	ss of sec	urities benef	ficially ow	ned directly o	or indirectly.				
					inforı requi	nation cont red to respe ays a curre	spond to the collec tained in this form ond unless the forn ntly valid OMB con	are not m	SEC 1474 (9-02)		
	Tab					sposed of, or convertible	Beneficially Owned securities)				
		saction Date /Day/Year)			4. Transact	5. Number tiorDerivative			7. Title and Amount of Underlying Securities	8 I	

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)		S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 12.74	06/01/2016		А	12,500	<u>(1)</u>	06/01/2026	Common Stock	12,500	
Reporting Owners										
	Deletionshine									

Reporting Owner Name / Address		Relationships					
L O		Director	10% Owner	Officer	Other		
STUMP DAVID C C/O REGENXBIO INC. 9712 MEDICAL CENTER DRIVI ROCKVILLE, MD 20850	, SUITE 100	Х					
Signatures							
/s/ David C. 06/01 Stump	2016						

<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) The option will vest in twelve (12) equal monthly installments following June 1, 2016.

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.

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