FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Christmas Patrick J.</u>						2. Issuer Name and Ticker or Trading Symbol REGENXBIO Inc. [RGNX]								eck all appli	cable) or	10% Owner		vner
(Last) (First) (Middle) C/O REGENXBIO INC. 9600 BLACKWELL ROAD, SUITE 210						3. Date of Earliest Transaction (Month/Day/Year) 06/30/2017								X Officer (give title below) Other (specify below) SVP, General Counsel				
(Street) ROCKVILLE MD 20850 (City) (State) (Zip)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - N	on-Deri	vativ	e Sec	curities	s Ac	quired	, Di	sposed o	f, or Be	neficial	y Owned	l			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/						Exec (Year) if any		Deemed cution Date, y nth/Day/Year)		tion 1str.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				es ially Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock ⁽¹⁾ 06/30/20						17			А		655	A	\$15.725	(2)	655		D	
Common Stock ⁽³⁾ 12/29/20					/2017	17		A		486	A	\$17.425	[4] 1,	141		D		
		-	Table II								posed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E		Code (Ir				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Co	Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		<u> </u>			
Stock Option	\$35.8	01/03/2018			A		43,000		(5)		01/03/2028	Common	43,000	\$0.00	43,00	0	D	

Explanation of Responses:

- 1. The reporting person is voluntarily reporting the acquisition of shares of the Issuer's common stock pursuant to the REGENXBIO Inc. Employee Stock Purchase Plan ("ESPP") for the ESPP purchase period of January 1, 2017 through June 30, 2017. This transaction is exempt under Rule 16b-3(c).
- 2. In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the Issuer's common stock on January 3, 2017.
- 3. The reporting person is voluntarily reporting the acquisition of shares of the Issuer's common stock pursuant to the ESPP for the ESPP purchase period of July 1, 2017 through December 31, 2017. This transaction is exempt under Rule 16b-3(c).
- 4. In accordance with the ESPP, these shares were purchased based on 85% of the closing price of the Issuer's common stock on July 3, 2017.
- 5. 25% of the shares subject to this option shall vest after 12 months of continuous service with the Issuer. The balance will vest in equal monthly installments over the 36 months following January 3, 2019 while the optionee provides continuous service to the Issuer.

Remarks:

01/05/2018 /s/ Patrick J. Christmas

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.