## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to exist, the officeative ald force to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	nd Address of	Reporting Person* $\overline{\underline{E}}$							er or Tradir					(Che	elationship of ck all applica Director	able)	g Perso	on(s) to Issu 10% Ow Other (s	/ner
(Last) (First) (Middle) C/O REGENXBIO INC. 9804 MEDICAL CENTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025									below)  Chief Medical Officer					
(Street) ROCKVILLE MD 20850 (City) (State) (Zip)			-	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Та	ble I - Nor	n-Deri	ivativ	ve Se	curitie	s Ac	quired, [	Dis	posed o	of, or E	enef	icially	Owned				
Da				Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		A) or , 4 and 5	5. Amount Securities Beneficia Owned For Reported	s Formally (D) (ollowing (I) (I		m: Direct I or Indirect I Instr. 4)	7. Nature of ndirect Beneficial Ownership Instr. 4)	
									Code	v	Amount	(A (D	) or )	Price	Transaction(s) (Instr. 3 and 4)				(moti. 4)
Common Stock 0				01/0	02/20	2/2025			F		13,891	(1)	D	\$7.73	151	151,687		D	
Common Stock				01/0	02/2025				A		64,293(2)		A	\$0.00	215,980			D	
			Table II -						uired, Di , options						Owned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate,	4. Transa Code (l 8)		Derivative I		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisable		xpiration ate	Title	or Nu	nount mber Shares		Transaction(s) (Instr. 4)			
Stock Options (Right to buy)	\$7.86	01/02/2025					103,698		(3)	0	1/02/2035	Commo	n 10	3,698	\$0.00	103,698		D	

## **Explanation of Responses:**

- 1. Represents shares of common stock withheld to pay taxes upon the vesting of restricted stock units originally granted to the reporting person on January 4, 2021, January 3, 2022, January 3, 2023 and January 2, 2024. The number of shares withheld was determined on January 2, 2025 based on the closing price of the issuer's common stock on December 31, 2024.
- 2. Represents shares of common stock underlying a time-based restricted stock unit award (RSU). 25% of the shares subject to this RSU will vest on each of January 1, 2026, January 1, 2027, January 1, 2028 and January 1, 2029 while the recipient provides continuous service to the Issuer.
- 3. 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 2, 2026 while the optionee provides continuous service to the Issuer.

## Remarks:

/s/ Patrick J. Christmas as attorney-in-fact

01/06/2025

\*\* 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.