FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruc	tion 1(b).			File							ies Exchan		1934			liouis	per res	ъринъе.	0.5	
					or	Secti	ion 30(h) (of the	Investme	nt Co	mpany Act	of 1940								
1. Name and Address of Reporting Person*							2. Issuer Name and Ticker or Trading Symbol REGENXBIO Inc. [RGNX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ENGLEMAN EDGAR														X	Directo	r		10% Ov	vner	
(Last) (First) (Middle) C/O REGENXBIO INC.						3. Date of Earliest Transaction (Month/Day/Year) 09/16/2015									Officer (give title Other (specify below) below)				specify	
9712 MEDICAL CENTER DRIVE, SUITE 100						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)														Line) X Form filed by One Reporting Person						
ROCKVILLE MD 20850			20850												Form filed by More than One Reporting Person					
(City)	City) (State) (Zip)																			
		Tak	le I - Nor	n-Deriv	ativ	e Se	curities	s Ac	quired	, Dis	posed o	f, or Be	enefi	icially	/ Owned					
Date				Transaction ite onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Transaction Dispose Code (Instr. 5)		Disposed	ities Acquired (A) or d Of (D) (Instr. 3, 4 a			5. Amour Securitie Beneficia Owned F	es Form ally (D) of Following (I) (II		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	mount (A) or (D)		Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
		-	Table II -								osed 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. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount mber ares						
Stock Option (Right to	\$22	09/16/2015			Α		25,000		(1)		09/16/2025	Common	25,	,000	\$0.00	25,000)	D		

Explanation of Responses:

1. The option will vest in equal monthly installments over the 12 months following September 16, 2015, with immediate full vesting in the event of a change in control.

Remarks:

/s/ Edgar Engleman

09/16/2015

** 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.