FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washing

wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02		

OMB Number:	3235-028									
Estimated average burden										
hours por rosponso:	0.1									

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

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>Hallal David</u>					<u>A</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC [ ALXN ]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title  Other (specify				
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC 352 KNOTTER DRIVE					10	3. Date of Earliest Transaction (Month/Day/Year) 10/24/2012										SVP.	Global C		below)	
(Street) CHESHIRE CT 06410				_	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	•	(Zip)	- Dori	vativ		curit	tios Ac	auire	ad Di	ien	nead o	f or B	nofi	 	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			saction	ction 2A. Deemed Execution Date,		3. Tra	Transaction Disposed Of (D) (Instr. 3, 4) Code (Instr. 5)			5. Amou 4 and Securiti Benefici Owned		nt of es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
								Co	ode V		Amount	mount (A) or Pr		rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, par value \$.0001 per share 10/24.				24/201	/2012			1	М		10,500 A		\$8.16	72,475			D			
		-	Fable II - I										or Ber ole sec			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	Date,	4. Transactior Code (Instr. 8)		of Deri Sec Acq (A) o Disp of (I	umber ivative urities uired or oosed O) (Instr. and 5)	6. Date Exercisable an Expiration Date (Month/Day/Year)				7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Ex <sub>I</sub>	piration te	Title	or Nui of	ount mber ares					
Option to Purchase Common Stock	\$8.16	10/24/2012			М			10,500	09/19	9/2006	06/	/19/2016	Commor Stock, par value \$.0001 per share	10	,500	\$0	524		D	

**Explanation of Responses:** 

/s/ David Hallal

10/26/2012

\*\* 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.