FORM 4

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

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

Name and Address of Reporting Person*     Nader François					AI	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN											p of Reporting Person(s) to Issuer blicable)					
,					AL	XN	J									Office	er (give title	(	Other (specify			
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC. 100 COLLEGE STREET						3. Date of Earliest Transaction (Month/Day/Year)  11/29/2017																
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW HA	WEN CT		06510												X		n filed by One					
(City)	(St	ate) (2	Zip)		Person																	
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally (	Owne	ed					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and So		Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A (1	A) or D)	Price		Transa	Transaction(s) (Instr. 3 and 4)			(msu. 4)				
Common Stock, par value \$.0001 per share 11/29					9/2017			A		1,977	1) <b>A</b> §		\$	1,977		,977	D					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	on Date, Transact				ative rities ired osed	Expiration (Month/D	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

1. Award of Restricted Stock Units under the 2017 Incentive Plan. Award vests on the anniversary of the grant date.

## Remarks:

Michael V. Greco, Attorney-in-11/29/2017 Fact for Francois Nader, MD

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.