FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AP	PROVAL
OMB Number:	3235-0287

0.5

Estimated average burden hours per response:

Check this box in 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

	. ,				ors	Sectio	n 30(h)	of the i	nvestme	nt Coı	mpany Act	of 194	10					
1. Name and Address of Reporting Person* <u>SARIN ARADHANA</u>				2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS, INC. [ALXN]									Check all ap Dire	pplicable) ector		Owner		
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC. 121 SEAPORT BOULEVARD				3. Date of Earliest Transaction (Month/Day/Year) 06/21/2019									X Officer (give title below) Other (specify below) Chief Strategy & Business Off					
(Street) BOSTON MA 02210 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Nor	-Deriva	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally Owr	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date, pay/Year) if any		Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A d Of (D) (Instr. 3,		(A) or 3, 4 a	nd Secu Bene	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount		(A) or (D)	Price	Trans	action(s) . 3 and 4)		(iiisti. 4)			
Common Stock, par value \$.0001 per share 06/21/				/2019			S		578(1)		D	\$1	32	30,201	D			
		Та									sed of, onvertib				y Owne	i		·
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. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber ires				

Explanation of Responses:

1. The transactions reported by this Form 4 are made pursuant to the terms of a sales plan designed to meet the requirements of Rule 10b5-1(c)(1) of the Securities Exchange Act.

Remarks:

/s/ Douglas Barry, Attorney-in-Fact for Aradhana Sarin

** 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.