### FORM 4

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

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	hours per response:
	or Section 30(h) of the Investment Company Act of 1940	
1. Name and Address of Reporting Person <sup>*</sup> Carmichael Clare (Last) (First) (Middle)	2. Issuer Name and Ticker or Trading Symbol <u>ALEXION PHARMACEUTICALS INC</u> [     ALXN ]     3. Date of Earliest Transaction (Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) SVP, Chief HR Officer
C/O ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE	02/03/2012	
(Street)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)
CHESHIRE CT 06410		X Form filed by One Reporting Person
		Form filed by More than One Reporting Person

,		
(City)	(State)	(Zip)

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

									7. Nature of Indirect	
	(Month/Day/Year)	if any (Month/Day/Year)	Code (	e (Instr.		Beneficially Owned Following Reported		(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
			Code	v	Amount (A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock, par value \$.0001 per share	02/03/2012		М		3,000 <sup>(1)</sup>	Α	\$ <mark>0</mark>	8,000	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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Option to Purchase Common Stock	\$78.88	02/03/2012		М		24,000 <sup>(2)</sup>		05/03/2012	02/03/2022	Common Stock, par value \$.0001 per share	24,000	\$0	24,000	D	

#### Explanation of Responses:

1. Award of Restricted Stock Units pursuant to 2004 Incentive Plan. 50% vests on two year anniversary of grant date and 1/8 vests every 6 months thereafter.

2. 1/16 vests every three months following grant date.



02/06/2012

Date

\*\* Signature of Reporting Person

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

 $^{\ast}$  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.