FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPRO	OVAL
OMB Number:	3235-0287
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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*     ORLOFF JOHN J					2. Issuer Name <b>and</b> Ticker or Trading Symbol ALEXION PHARMACEUTICALS, INC. [ ALXN ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify				
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC 121 SEAPORT BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2019										X Officer (give title Officer (specify below)  EVP, Research & Development				
(Street) BOSTON (City)			)2210 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tabl	e I - Nor	-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally C	wne	d		
Date					e I nth/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			4 and Secu Bene		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(1	A) or D)	Price			ction(s) 3 and 4)		, ,
Common Stock, par value \$.0001 per share 02/28					3/2019			A		9,428	(1)	A	\$0		40,577		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 Date (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)			Date,	4. Transaction Code (Instr. 8)			ative rities ired osed	Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				Code V		v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res					

## **Explanation of Responses:**

1. Award of Restricted Stock Units under the 2017 Incentive Plan. 25% vests on each anniversary of the grant date.

## Remarks:

/s/ Douglas Barry, Attorney-in-Fact for John Orloff

03/05/2019

Date

\*\* Signature of Reporting Person

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

- $^{\star}$  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.