## 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:

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

FORM 4

Check this box if no longer subjec or Form 5 obligations may continu	t to Section 16. F e. See Instruction	Form 4 In 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									hours per re	esponse:	0.5
1. Name and Address of Reporting Person' <u>Chiniara Ellen</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>ALEXION PHARMACEUTICALS, INC.</u> [ ALXN ]							Il applicable) Director			
(Last) (F C/O ALEXION PHARMACI 121 SEAPORT BOULEVAR	3. Date of Earliest Transaction (Month/Day/Year) 02/28/2019							X	EVP & General Counsel							
(Street) BOSTON MA 02210 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)							hdividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)							Execution Date,		3. Transaction Code (Instr. 8) 4. Secu 3, 4 and		d (A) or Dispose	d Of (D) (Instr.	str. 5. Amount of Securiti Beneficially Owned F Reported Transaction		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr.
		(Month	h/Day/Year)	Code V	Amou	nt	(A) or (D)	Price	(Instr. 3 and 4)		( ··· )	4)				
Common Stock, par value \$.0001 per share						02/28/2019		F		633(1)	D	\$132.92 <sup>(2)</sup>	7,711		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	version Date xercise (Month/Day/Year) e of vative		4. Transa (Instr. 8)	ction Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Derivative S	Amount of Seci Security (Instr. 3	irities Underlying and 4)	8. Price of Derivative Security (Instr. 5)		er of 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisab	Expiratio Date	n Title		Amount or Number of Sha	ires	Reported Transactio (Instr. 4)		

Explanation of Responses:

1. This sale was made to cover withholding taxes immediately following the vesting of previously gran ed Restricted Stock Units.

2. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$132.90- \$134.74. The price reported in this column reflects the weighted average sales price. Upon request, the reporting person will provide to the SEC staff full information regarding the number of shares sold at each price.

Remarks:

/s/ Douglas Barry, Attorney-in-Fact for Ellen Chiniara \*\* Signature of Reporting Person

03/04/2019 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.

## POWER OF ATTORNEY

Known all by these presents, that the undersigned hereby constitutes and appoints William Wheeler and Douglas Barry, each signing singly, the undersigned's true and (1) Execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Alexion Pharmaceuticals, Inc. (the "Company"), Forms

(2) Do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Forms 3, 4, 5 (or any s

(3) Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best :

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary or This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, 5 (or any successor forms) and any ament IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 28th day of February, 2019.

/s/ Ellen Chiniara (signature) Ellen Chiniara