FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL						
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*					2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Hallal David					ALXN]									X	Direc	ctor	10% Owner		wner	
(Last)	(Fii	rst) (Middle)			1 mm. 1										X Officer (give title below)			Other (specify below)	
C/O ALEXION PHARMACEUTICALS, INC					3. Date of Earliest Transaction (Month/Day/Year) 08/04/2015									CEO						
352 KNOTTER DRIVE																				
(Street)				4. If	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						
(City)	(6+	oto) (Zin)												Form filed by More than One Reporting Person					
(City)	(51	ate) (.	Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ber	eficia	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					y/Year) Execu		Deemed ecution Date, any onth/Day/Year)		ction Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			and 5) Secur Benef Owne		cially d Following	6. Owner Form: D (D) or Ir (I) (Insti	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	(A (D) or)	Price		Reported Transaction(s) (Instr. 3 and 4)				(111501.4)
Common Stock, par value \$.0001 per share 08/04/				2015				S		612(1)		D \$19		6.52 143,5		43,516	Γ)		
	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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3	8. Price o Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Owr Fori Dire or Ir (I) (I	nership n: oct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	or Nu of	mber ares	1 1					

Explanation of Responses:

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

Remarks:

/s/ Michael Greco, Attorney-in-08/05/2015 Fact for David Hallal

** 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.