FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF (CHANGES	IN BENEFICIAL	OWNERSHIP

ı	OMB APPRO	JVAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
	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

1. Name and Address of Reporting Person* SQUINTO STEPHEN P				2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN]										Relationship of Reportise (Check all applicable) Director Officer (give title below)			10% (Owner (specify	
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 03/16/2009									EVP & Head of Research						
(Street) CHESHIRE CT 06410 (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 - Non	-Deriva	ative	Sec	curitie	s Ac	quirec	, Dis	posed o	f, or	Ben	efici	ally (Owne	ed		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Da		n Date,	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				and Secur Benef		cially I 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			action(s) 3 and 4)			
Common Stock, par value \$.0001 per share 03/16/2				2009				S		2,717	2,717 ⁽¹⁾ D \$		\$34	4.25 28,568		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 Security 3. Transaction Date (Month/Day/Year) Month/Day/Year) 3. Transaction Date (Month/Day/Year) Execution Date (Month/Day/Year) (Month/Day/Year)		Date, (4. Transaction Code (Instr. 8)			rative rities ired r osed)			Amount of		ount mber			9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. These sales were made to cover the withholding taxes immediately following the vesting of previously granted Restricted Stock

/s/ Stephen Squinto

03/18/2009

** 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.