FORM 4

Check this box if no longer subject Section 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*     MADRI JOSEPH A						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN									(Check all ap		olicable) ctor	ng Person	erson(s) to Issuer 10% Owner		
	(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/15/2007										Office below	er (give title v)		Other below)	(specify	
(Street)	(Street) CHESHIRE CT 06410				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indivine)						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Dispo		rities Acquired (A) ed Of (D) (Instr. 3,			4 and Secu Bene Own Repo		cially I Following ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	or Price		Transaction(s) (Instr. 3 and 4)				, ,	
Common Stock, par value \$.0001 per share 01/15/						5/2007					2,000	(1) A \$		\$	57,000		7,000	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. Deeme Execution if any (Month/Da	Date,	4. Transa Code ( 8)		of Derive Securion (A) or Disposof (D) (Instr.)	of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			rative rity . 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Nun of Sha								

## **Explanation of Responses:**

1. Award of Restricted Stock pursuant to the 2004 Incentive Plan. 100% vests one year from the date of grant.

/s/ Joseph madri 01/18/2007

\*\* 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.