FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPROVAL								
	OMB Number:	3235-0287							
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l	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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Name and Address of Reporting Person* Veneman Ann M							2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN]								heck all	applicable) rector		Owner
(Last) (First) (Middle) ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE							3. Date of Earliest Transaction (Month/Day/Year) 12/12/2012									fficer (give title elow)	belov	
(Street) CHESHIRE CT 06410 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark> F	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - Non	-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	ficia	lly Ow	ned		
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da						Execution D			3. Transa Code (8)						nd Sed Ber Ow	amount of curities neficially ned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
							v	Amount		(A) or (D)	Price	Tra	oorted nsaction(s) str. 3 and 4)		(Instr. 4)			
Common Stock, par value \$.0001 per share 12/12/							/2012		S		4,579 I		D	\$9	5	6,562	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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			Date,	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)		str. 3	8. Price (Derivativ Security (Instr. 5)	e derivative	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	,	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Shai	ber				

Explanation of Responses:

/s/ Ann M. Veneman

12/14/2012

** 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.