FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANG	ES IN BE	NEFICIAL	OWNERS	HIP

OMB APPROVAL								
OMB Number:	3235-0287							
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* LINK MAX (Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE				2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2009								neck all app	tor er (give title	ng Pen	son(s) to Iss 10% Ov Other (s below)	vner		
(Street) CHESHIRE CT 06410 (City) (State) (Zip)					If Amendment, Date of Original Filed (Month/Day/Year) tive Securities Acquired, Disposed of, or Benefi							Lir	Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	2A. Deemed Execution Date,			3. Transa Code (ction	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
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, Truity or Exercise (Month/Day/Year) if any Co		Transa Code (I	ransaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			f g Security	8. Price of Derivative Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)		Date Exercisabl		xpiration ate	Title	Amount or Number of Shares					
Option to Purchase Common Stock	\$33.66	05/13/2009			A		6,138		(1)	0	5/13/2019	Common Stock, par value \$.0001 per share	6,138	\$0	6,138	3	D	

Explanation of Responses:

1. These options will vest in four quarterly installments during the one year period commencing on May 13th, 2009 and ending on May 13th, 2010.

05/14/2009

** 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.