FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average	burden									

0.5

hours per response:

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* O'Neill Julie					<u>A</u>	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN							(Ch	eck all a Dii	pplica rector	Reporting Person(s) to Issuer ble) 10% Owner give title Other (specify		vner			
	,	First) IARMACEUTIC REET	(Middle)	` ′			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2017									X Officer (give title Other (specify below) EVP. Global Operations					
(Street) NEW HA		CT State)	06510 (Zip)		_	If Amo	endment, Di	ate of	f Original	l Filed	l (Month/Day	/Year)	Lin	e) <mark>X</mark> Fo	orm file	ed by One	Repoi	(Check App rting Persor One Repor	ı		
		Та	ble I - No	on-Der	ivativ	/e Se	ecurities	Acc	quired	, Dis	sposed of	, or Ben	eficial	y Owr	ned						
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,				4. Securities Disposed O			5. Amount Securities Beneficiall Owned Fol Reported		i Ily	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) or (D)	Price	Trai	nsactio	ted action(s) 3 and 4)			(Instr. 4)			
Common Stock, par value \$.0001 per share 02/27/2					7/201	2017			S		910(1)	D	\$131.2	31,2(2) 31,0		679		D			
Common Stock, par value \$.0001 per share 02/28/2				8/201	2017			S		664(1)	D	\$131.7	31.7 ⁽²⁾ 31,		.015		D				
Common Stock, par value \$.0001 per share 02/28/2				8/201	2017		A		7,500 ⁽³⁾	A	\$0	\$0 38		,515		D					
			Table II								osed of, convertib			Owne	ed						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g Security	8. Prio Deriva Secur (Instr.	ative ity 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares	er (Instr. 4)	Transaction (Instr. 4)	on(s)					
Option to Purchase Common Stock	\$131.25	02/28/2017			A		14,800 ⁽⁴⁾		02/28/2	2018	02/28/2027	Common Stock, par value \$.0001	14,800	\$(14,800		D			

Explanation of Responses:

- 1. This sale was made to cover withholding taxes immediately following the vesting of previously granted Restricted Stock Units.
- 2. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$131.00 \$131.99. The price reported in this column reflects the weighted average sales price. Upon request, the reporting person will provide to the SEC staff full information regarding the number of shares sold at each price.
- 3. Award of Restricted Stock Units under the 2004 Incentive Plan. 25% vests on each anniversary of the grant date.
- 4. Stock option award under 2004 Incentive Plan. 25% vest on the first anniversary of the grant date, 1/16 every three months thereafter until fully vested over 4 years.

Remarks:

<u>/s/ Michael Greco, Attorney-in-</u> Fact for Julie O'Neill

03/01/2017

** Signature of Reporting Person

per share

Date

 $\label{lem:Reminder:Report on a separate line for each class of securities beneficially owned directly or indirectly.$

- * 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.