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	
hours per response:	0.5

$\overline{}$	Check this box if no longer subject to Section 16. Form 4

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*     Brennan David R					2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS, INC. [ ALXN ]										ship of Reporting applicable) Director Officer (give ti	, ,	to Issuer	10% Own	er ecify below)		
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC 121 SEAPORT BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2019															
(Street)  BOSTON MA 02210  (City) (State) (Zip)					4. If Amer	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						
			Т	able I -	Non-Der	ivative S	ecurities A	Acquired,	Dispo	sed of	, or Bene	ficially Ow	ned								
1. Title of Security (Instr. 3)						/Year) Exe	Deemed ecution Date, ny	Code (Instr. 8) 3, 4 and		·		Beneficially C		d Following		ership Form: (D) or Indirect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr.				
Common Stock, par value \$.0001 per share						(Month/Day/Year) 05/15/2019		Code \	v	Amount 2,7	726 <sup>(1)</sup>	(A) or (D)			(Instr. 3 and 4) 9,733		1	D	4)		
Common Stock, par value \$.0	05/15/2	019		A		1,9	908(2)	A		\$0	11,64	41		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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		r Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Derivative Security (Instr. 3 and 4)			Underlying 8. Price Derivati Security 5)		e derivat	tive ties cially	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisal	ble Ex	piration ate				ount or nber of Shar	es	Report	ed ction(s)	,s)			
Explanation of Responses:  1. Award of Restricted Stock Units under 2. Award of Restricted Stock Units under											its were issued	l in lieu of the a	nnual c	ish retainer th	at the director was	entitled to re	eceive for	service as a directo	r.		

## Remarks:

\*\* Signature of Reporting Person

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.

## POWER OF ATTORNEY

Known all by these presents, that the undersigned hereby constitutes and appoints William Wheeler and Douglas Barry, each signing singly, the undersigned's true

- (1) Execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Alexion Pharmaceuticals, Inc. (the "Company"), Forms
- (2) Do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Forms 3, 4, 5 (or any 5
- (3) Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best:

  The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necess

  This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, 5 (or any successor forms) and any

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 13th day of September, 2018.

/s/ David Brennan (signature)

David Brennan