FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
ı	Estimated average b	urden								

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

1. Name and Address of Reporting Person* <u>Carmichael Clare</u>						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN								eck all appli Direct V Office	cable) or (give title	10% Owner give title Other (specify		/ner
	ast) (First) (Middle) O ALEXION PHARMACEUTICALS, INC. O COLLEGE STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/26/2016								below	below) below) EVP, Chief HR Officer			
(Street) NEW HAVEN CT 06510 (City) (State) (Zip)				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. I Lin	E) X Form Form	ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(0.5)		•		on-Dei	rivativ	ve Se	ecurities	Ac	auire	d. Di	sposed of	. or Be	neficial	v Owned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					action	ion 2A. Deemed Execution Date,		e,	3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			5. Amo Securit Benefic Owned	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock, par value \$.0001 per share 02/26/2)16		A		7,000(1)	Α	\$0	4:	,054		D	
Common Stock, par value \$.0001 per share 02/29/2						016			S		1,312(2)	D	\$138.9	(3) 39	,742		D	
			Table II								oosed of, convertib			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye		of Sectorial Parties of Sector		. Title and Amount f Securities Inderlying erivative Security nstr. 3 and 4)		9. Numbe derivative Securitie Beneficia Owned Followine Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares	1	(Instr. 4)	ion(s)		
Option to Purchase Common Stock	\$140.16	02/26/2016			A		31,000 ⁽⁴⁾		02/26	5/2017	02/26/2026	Commor Stock, par value \$.0001 per share	31,000	\$140.16	31,00	00	D	

Explanation of Responses:

- 1. Award of Restricted Stock Units under the 2004 Incentive Plan. 25% vests on each anniversary of the grant date.
- 2. This sale was made to cover withholding taxes immediately following the vesting of previously granted Restricted Stock Units.
- 3. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$138.00 \$138.99. 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.
- 4.25% vests on the first anniversary of the grant date and 1/16 every three months thereafter.

Remarks:

/s/ Michael Greco, Attorney-in-Fact for Clare Carmichael 03/01/2016

** 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.