FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden
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*  BELL LEONARD					2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
BELL I	<u>LEUNAR</u>	<u>D</u>				XN									X	Direc	ctor		10% C	wner
(Last)	(Fi	rst) (	Middle)			2111	<u>,</u>								X	Office	er (give title v)		Other below)	(specify
C/O ALEXION PHARMACEUTICALS INC					3. Date of Earliest Transaction (Month/Day/Year) 01/10/2012											C	CEO			
352 KNOTTER DRIVE				U1/	01/10/2012															
				- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CHESHI	RE CI	Γ (	06410												X	Form	n filed by On	e Repo	orting Pers	on
																Form Pers	n filed by Mo on	re than	One Rep	orting
(City)	(St	ate) (	Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	ficia	lly (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Exection (Day/Year) if any		A. Deemed xecution Date, any Month/Day/Year)				Securities Acquired (A) sposed Of (D) (Instr. 3,			4 and Secu		cially I Following	Form: (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(1	A) or D)	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)
Common Stock, par value \$.0001 per share 01/10				)/2012				S		2,226	1) D \$		\$7	75 1,857,745		357,745		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 (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution D if any (Month/Day/				Date,	4. Transaction Code (Instr. 8)				Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			ative rity . 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	O Fo Di OI (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha	ber						

## **Explanation of Responses:**

1. These sales were made to cover withholding taxes immediately following the vesting of previously granted Restricted Stock.

/s/ Leonard Bell

01/11/2012

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.