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 burd	en								
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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* Hallal David (Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2011										Relationship of Reporting Person(s) to Issuer neck all applicable) Director 10% Owner X Officer (give title Other (specify below) below) SVP, Global Commercial Ops				vner specify		
(Street) CHESHIRE CT 06410 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of S	Security (Ins	action					3. Transa Code (I 8)	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			d (A) or r. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
	G. 1	1 # 0004		70011			4	Code	V	Amount	Amount		Price	(Instr. 3	(Instr. 3 and 4)		_					
		value \$.0001 per			5/2011	-			4	M		5,000		A	\$8.1	_	735	D				
Common	Stock, par	3/2011					M		5,000 A		\$8.1		39,735		D							
		Т	able II -	Derivat (e.g., p												Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)		5. Number 6				ercisa Date	ble and 7. Title and Amount o		tle and ount of urities erlying vative S	Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				,	Code	v	(A)	(D)	Dat Exe	e ercisabl		opiration	Title		Amount or Number of Shares							
Option to Purchase Common Stock	\$8.16	08/05/2011			М			5,000	09/	/19/2000	5 06	5/19/2016	Sto par v \$.0	nmon ock, value 001 share	0	\$0	29,024	4	D			
Option to Purchase Common Stock	\$8.16	08/08/2011			М			5,000	09/	/19/2000	5 06	5/19/2016	Sto par v \$.0	nmon ock, value 001	5,000	\$0	24,024	4	D			

Explanation of Responses:

/s/ David Hallal

08/09/2011

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).