FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 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

| Name and Address of Reporting Person* Nader Francois | | 2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS, INC. [ALXN] | | | | | ck all app Direc | licable) tor | ing Person(s) to Issuer 10% Owner | | vner | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------|--------|---------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------|---------------------------------------------------------------------------------------------------|------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------|---------------------------------------|--|
| (Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, I 121 SEAPORT BOULEVARD | NC. | 3. Date of Earliest Transaction (Month/Day/Year) 05/20/2021 | | | | | | belov | er (give title | | Other (s | specify | | | | |
| (Street) BOSTON MA 02210 (City) (State) (Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Inc Line) | Form | or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son | | | | | |
| Table I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Bene | ficial | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | Execution Date, | | Date, | 3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (In | | | | Securit Benefic Owned | 5. Amount of Securities Beneficially Owned Following Reported | | irect direct . 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | Amount | (A) or (D) Pi | | Price | Transa | ction(s) 3 and 4) | | | | |
| Common Stock, par value \$.0001 per share | 05/20/ | 2021 | | | | A | | 1,962(1) | A | 1 | \$ <mark>0</mark> | 13 | 13,248 | | | |
| Common Stock, par value \$.0001 per share | 05/20/ | /2021 | | | | A | | 673 ⁽²⁾ | A | 1 | \$0 | 13,921 | | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | |
| Derivative Conversion Date Execut Security or Exercise (Month/Day/Year) if any | titve Conversion or Exercise (Month/Day/Year) Execution Date, if any Code (Month/Day/Year) Price of Derivative (Month/Day/Year) | | action of | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | Str. | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ow For Dire or I (I) (| nership m: ect (D) ndirect Instr. 4) | Beneficial Ownership (Instr. 4) | |
| Explanation of Decreases: | | Code | v | (A) | | Date Exercisa | able | Expiration Date | Title | or Num of Share | | | | | | |

- 1. Award of Restricted Stock Units under the 2017 Incentive Plan. Shares issuable pursuant to the Restricted Stock Units vest in their entirety on the first anniversary of the grant date.
- 2. Award of Restricted Stock Units under the 2017 Incentive Plan. Shares issuable pursuant to the Restricted Stock Units vest as to 25% on a quarterly basis. These Restricted Stock Units were issued in lieu of the annual cash retainer that the director was entitled to receive for service as a director.

Remarks:

/s/ Douglas Barry, Attorney-

05/24/2021

** 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.