FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Check this box if no longer subject to SIAIEWENT OF CHANGES IN BENEFICIAL OVVNERSE Section 16. Form 4 or Form 5	Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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					<u>A</u> 1	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last)	(Fi	rst)	(Middle)		_			Trans	action (Mon	th/D	av/Vear)		_		below)	(give title		Other (s below)	pecify	
C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 06/07/2006									Chief Executive Officer					
(Street)				4.1										Individual or Joint/Group Filing (Check Applicable Line)						
CHESHI	RE C	Γ	06410												X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(S	tate)	(Zip)												Person					
		Tab	le I - Non	-Deriv	ative	e Se	curities	Acc	quired, D	isp	osed o	f, or Be	neficial	ly Ov	wned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ear)	Execution if any	A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securiti Disposed 5)						s Ily ollowing	Form	: Direct · Indirect · Str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	,	Amount	(A) or (D)	Price	Tr	ransacti nstr. 3 a	on(s)			Instr. 4)	
	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 D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/	ate		7. Title and of Securiti Underlying Derivative (Instr. 3 and	ies g Security		vative urity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		xpiration ate	Title	Amount or Number of Shares							
Option to Purchase Common Stock, par value \$.0001	\$32.7	06/07/2006			A		24,500		(1)	06	5/07/2016	Common Stock, par value \$.0001	24,500	\$3	32.7	24,500	)	D		

## **Explanation of Responses:**

1. 1/16th vest every three months following the transaction date.

/s/ Dr. Leonard Bell 06/09/2006

Date

\*\* 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.