FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-028									

37 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)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Franchini Indrani Lall						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN]							5. Relationship of Re (Check all applicable) Director X Officer (give			10%	Issuer Owner r (specify	
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC. 100 COLLEGE STREET						3. Date of Earliest Transaction (Month/Day/Year) 02/06/2018								Λ	below) EVP, Chief Complian			v) iicer
(Street) NEW HAVEN CT 06510 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	e I - N	lon-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Owne	ed		
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/V						2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			d 5) Secur Benet		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) or (D)	Price		Trans	action(s) 3 and 4)		(Instr. 4)				
Common Stock, par value \$.0001 per share 02/06/20							3		A		13,908(1)	A	\$	\$0		6,490	D	
Common Stock, par value \$.0001 per share 02/08/20						18		S		1,459(2)	D	\$116	\$116.31 ⁽³⁾		5,031	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 Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exel Expiration I (Month/Day		ate	7. Title Amour Securi Underl Deriva Securi and 4)	nt of ties ying tive ty (Instr. 3	f Deri Sec g (Ins		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. On February 6, 2018, the Leadership and Compensation Committee determined that the reporting person earned 13,908 Performance Share Units upon achievement of certain performance targets previously established by the Committee. 1/3 of such shares vested on February 6, 2018 and 1/3 vest on each subsequent anniversary
- 2. This sale was made to cover withholding taxes immediately following the vesting of previously granted Performance Stock Units.
- 3. This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$116.00 \$116.99. 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.

Remarks:

Michael V. Greco, Attorney-in-Fact for Indrani L. Franchini

** 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.