FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

1	UIVIB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					JI OCCI	1011 30(11) 0	n the r	iivestiiieii	COI	ipariy Act t	31 1340								
1. Name and Address of Reporting Person* NORBY R DOUGLAS						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC [ALXN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
														Directo	•		10% Ov	ner	
(Last) (First) (Middle)					-									Officer below)	(give title		Other (s below)	pecify	
C/O ALEXION PHARMACEUTICALS						3. Date of Earliest Transaction (Month/Day/Year)													
352 KNOTTER DRIVE						05/06/2015													
332 KINC	JI IEK DK	IVE	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Ctroot)						(Line)					
(Street) CHESHIRE CT 06410		06410										X Form filed by One Reporting Per					ı		
CHESTIKE CI 00410			00410										Form filed by More than One Reporting Person					ting	
(City)	(S	tate)	(Zip)																
		Tal	ole I - Non-C	Derivativ	/e Se	curities	Acc	uired,	Disp	osed o	f, or Ber	nefici	ially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						action 2A. Deemed Execution Day/Year) if any (Month/Day		ate, Transaction Code (Instr.					, 4 and Securitie Benefici Owned F		es For ally (D) Following (I) (I		Direct Indirect Introduced Interest Int	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)		e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock, par value \$.0001 per share 05/06.						6/2015		A		700(1)	'00 ⁽¹⁾ A		\$ <mark>0</mark>	32,481			D		
			Table II - De (e.							sed of, onvertib				wned					
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/Yea	Code				6. Date Exercisable and Expiration Date (Month/Day/Year)		•	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amou or Numb of Share	oer		Transaction(s)	ii(S)			
Option to Purchase Common Stock	\$155.01	05/06/2015		A		2,343 ⁽²⁾		05/06/201	16	05/06/2025	Common Stock, par value \$.0001 per share	2,34	43	\$155.01	2,343		D		

Explanation of Responses:

- 1. Annual award of restricted stock units under 2004 Incentive Plan. 100% vests on the first anniversary of the grant date.
- $2.\ Annual\ award\ of\ stock\ options\ under\ 2004\ Incentive\ Plan.\ 100\%\ vests\ on\ the\ first\ anniversary\ of\ the\ grant\ date.$

Remarks:

/s/ Michael Greco, Attorney-in-Fact for R. Douglas Norby 05/08/2015

** 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.