FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average I	nurden							

0.5

hours per response:

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 Eychange Act of 1934

mon doc	.0.1 2(5).			1 110							mpany Act			<b>,</b> ,				
1. Name and Address of Reporting Person*  BELL LEONARD				<u>AI</u>	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN ]								Check all a	hip of Reportir pplicable) ector ficer (give title		Issuer Owner er (specify		
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 04/07/2006								Chief Executive Officer					
(Street) CHESHIRE CT 06410  (City) (State) (Zip)					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	ally Ow	ned		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date		Date,	, Transaction Dispose Code (Instr. 5)		Disposed	ities Acquired (A) d Of (D) (Instr. 3,		(A) or 3, 4 ar	nd Sec Ben Owr	mount of urities eficially led Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price	Trar	saction(s) r. 3 and 4)		
Common Stock, par value \$.0001 04/07/				7/2006	/2006		A		10,088 <sup>(1)</sup>		A	\$	0	321,599	D			
		Та									sed of, onvertib				y Owne	d		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/ <sup>1</sup>	n Date,	Date, Transaction Code (Ins				6. Date Exercisab Expiration Date (Month/Day/Year)		e	7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)			8. Price of Derivativ Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount nber ires				

## **Explanation of Responses:**

1. Award of Restricted Stock prusuant to the 2004 Incentive Plan. 100% vests on 2nd anniversary of the Food and Drug Administration's approval to market Soliris(TM) (Eculizumab) under a Biologics License Application.

/s/ Dr. Leonard Bell

04/11/2006

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.