FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-02									

l	OMB Number:	3235-0287
l	Estimated average bur	den
l	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* Islam Saqib					AI	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle)						ALXN]									X	belov	,	be	ner (specify ow)	
ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 04/27/2015									EVP, Chief Strat & Port. Off.					
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CHESHIRE CT 06410														X Form filed by One Reporting Person						
															Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Sec	uritie	s Acc	quired	, Dis	posed o	f, o	r Ben	efici	ally C	Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquire Disposed Of (D) (Inst					d 5)	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect			
									Code	v	Amount	((A) or (D)	Price	Tran		action(s) 3 and 4)		(iiisti. 4)	
Common Stock, par value \$.0001 per share 04/27/2					2015		S		6,032(1)		D	\$181.57		39,868		D				
		Та									osed of, onvertib				y Ow	ned		,	•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		of		6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			8. Prio Deriva Secur (Instr.	vative urity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	nount mber ares						

Explanation of Responses:

1. This sale was made to cover withholding taxes immediately following the vesting of previously granted Restricted Stock Units.

Remarks:

/s/ Michael Greco, Attorney-in-Fact 04/30/2015

** 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.