FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

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

Washington, D.C. 20549

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OMB APPROVAL

OMB Number: 3235-0287

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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*  LUKE BARRY P						2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC [ alxn ]										all app	olicable)		Owner (specify
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 04/16/2004									Λ	belov VP	,	belov z Adminstrati	′
(Street) CHESHIRE CT 06410  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										. Indiv ine) X				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)					2A. Deemed Execution Da if any (Month/Day/Y			n Date,	3. Transaction Code (Instr. 8)						4 and Secur Bene		icially d Following	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	Price		action(s) 3 and 4)		(moan i)
Common Stock, par value \$.0001 04/16/					/2004						5,000		D	\$23.41		13,300		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. Deem Execution if any (Month/Da	Date, Trans Code			of Derive Secur Acque (A) or Disposof (D) (Instr	of		Exercis on Dat Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount			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 Exercisa		Expiration Date	Titl	of	mber					

**Explanation of Responses:** 

Barry P. Luke

04/20/2004

\*\* 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.