FORM 4

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

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  LINK MAX					<u>AI</u>	2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN ]										all app	olicable) ctor		Owner
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/09/2006										belov	er (give title w)	belov	r (specify v)	
(Street) CHESHI (City)			06410 Zip)		4. If	Ame	ndment,	Date o	f Origina	l Filed	I (Month/Da	ay/Ye	ear)		. Indivine)	Form	n filed by One n filed by Mor	o Filing (Check e Reporting Pe re than One Re	son
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Dat		Date,	3. Transaction Code (Instr. 8)						4 and Se Be		ount of ities icially d Following ted	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	•	Transaction(s) (Instr. 3 and 4)			(111341.4)
Common Stock, par value \$.0001 01/0				01/09/	/2006				A		2,000	1)	A	\$20.72		62,157		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution Date		4. Transaction Code (Instr. 8)		n of		6. Date Exercisable an Expiration Date (Month/Day/Year)		е	Amount of Securities Underlying Derivative Security (Instr. and 4)		ount		vative urity tr. 5)	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	Code V		(A) (D)			Expiration Date	Number of Shares							

## **Explanation of Responses:**

1. Award of Restricted Stock pursuant to the 2004 Incentive Plan. 100% vests one year from the date of grant.

01/11/2006 /s/ Max Link

\*\* 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.