FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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).

# Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC [										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Reinsdorf Judith A						ALXN ]										X	Direc	tor		10% C	wner		
(Last)		/Eirc	t) (1	Middle)			[ [ ]											Office	er (give title		Other (below)	(specify	
							3. Date of Earliest Transaction (Month/Day/Year)												,		,		
C/O ALEXION PHARMACEUTICALS, INC.				05/	05/09/2018																		
100 COLLEGE STREET					4 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable							
						-   - "	4. If Americanient, Date of Original Filed (Month/Day/Year)											Line)					
(Street) NEW HAVEN CT 06510																	X Form filed by One Reporting Person						
INE W TIE	IV EIV	CI		70310														Form filed by More than One Reporting Person					
(City)		(Sta	to) (	Zip)														Pers	UII				
(City)		(Sia	(.	<u>Ζ</u> ιμ)																			
			Tabl	e I - Nor	n-Deriv	ative	Se	curit	ies Ac	qui	ired, C	Disp	osed o	f, o	r Ben	eficia	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ar)	Execut if any	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos Code (Instr. 5)		Disposed	rities Acquired (A ed Of (D) (Instr. 3,			nd	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										-	Code	v	Amount	(A) or (D)		Price	. 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock, par value \$.0001 per share 05/09/					9/2018	3				A		2,174(1)		A	\$	60 4,25		1,259		D			
			Та	ble II - D									sed of, onvertib				y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security	on I	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		Transaction Code (Instr.		of		6. Date Exercis. Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	(A) (D		Da Ex	ate kercisabl		Expiration Date	Title	or Nur of	ount nber res							

### **Explanation of Responses:**

1. Award of Restricted Stock Units under the 2017 Incentive Plan. Award vests on the anniversary of the grant date.

# Remarks:

Michael V. Greco, Attorney-in-Fact for Judy Reinsdorf 05/11/2018

\*\* 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.