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	OF (	CHANGES	IN BENEFICIA	AL.	OWNERSHIP
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	OMB APPROVAL										
	OMB Number:	3235-0287									
	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*     Hallal David				2. Issuer Name <b>and</b> Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC ALXN									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner							
(Last) (First) (Middle) C/O ALEXION PHARMACEUTICALS, INC 352 KNOTTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 08/07/2015										X	Office below	,		Other ( pelow)	specify
(Street) CHESHIRE CT 06410 (City) (State) (Zip)					4. If										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 - Non-	-Deriva	ative	Sec	uritie	s Acc	uired	, Dis	posed o	f, o	r Ben	eficia	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date,					es Acquired (A) o Of (D) (Instr. 3, 4 a			and 5) Secur Benef		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(11301.4)	
Common	Stock, par v	value \$.0001 per	share	08/07/2	/2015				S		329(1)		D \$190.		0.01 143,187		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution D if any (Month/Day)	Date, T	4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiratio Exercisable Date		te ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		nstr. 3 nount mber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **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-08/11/2015 Fact for David Hallal

\*\* 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.