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KEISER DA	VID W									
Form 4 August 01, 2	007									
FORM	1 /								OMB AF	PPROVAL
	UNITEI) STATES		RITIES A Shington,			NGE C	OMMISSION	OMB Number:	3235-0287
Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	F CHAN Section 14 Public Ut	GES IN I SECUR 6(a) of the	BENEF ITIES e Securit ling Con	NERSHIP OF e Act of 1934, 1935 or Section 0	Estimated average burden hours per response 0.5					
(Print or Type I	Responses)									
1. Name and A KEISER DA	ddress of Reportin	g Person <u>*</u>	Symbol	[·] Name and ON PHAF LXN]				5. Relationship of Issuer (Check	Reporting Pers	
(Last) C/O ALEXI PHARMAC KNOTTER	EUTICALS IN	(Middle)	3. Date of (Month/D 07/30/20	-	ansaction			X Director X Officer (give below) Pres		Owner er (specify
CHESHIRE	(Street)			ndment, Da hth/Day/Year)	-	l		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M Person	One Reporting Pe	rson
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of	. or Beneficial	lv Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	med	3.	4. Securi	ties A spose 4 and (A)	cquired d of (D)	5. Amount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common Stock, par value \$.0001 per share	07/30/2007			Code V		or (D) A	Price \$ 10.5	(Instr. 3 and 4) 109,668	D	
Common Stock, par value \$.0001 per share	07/30/2007			S	1,850	D	\$ 58.7	107,818	D	

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Common Stock, par value \$.0001 per share	07/30/2007	S	100	D	\$ 58.83	107,718	D
Common Stock, par value \$.0001 per share	07/30/2007	S	100	D	\$ 58.81	107,618	D
Common Stock, par value \$.0001 per share	07/30/2007	S	400	D	\$ 58.79	107,218	D
Common Stock, par value \$.0001 per share	07/30/2007	S	100	D	\$ 58.78	107,118	D
Common Stock, par value \$.0001 per share	07/30/2007	S	200	D	\$ 58.77	106,918	D
Common Stock, par value \$.0001 per share	07/30/2007	S	1,300	D	\$ 58.76	105,618	D
Common Stock, par value \$.0001 per share	07/30/2007	S	200	D	\$ 58.75	105,418	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities I
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	(A) Disj (D)	posed of tr. 3, 4,				(
				Code N	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Stock, par value \$.0001 per share	\$ 10.5	07/30/2007		М		4,250	07/31/1997	07/31/2007	Common Stock, par value \$.0001 per share	4,250
Repor	ting Ow	/ners								

Reporting Owner Name / Address		Relationships							
Treporting of the Trans	Director	10% Owner	Officer	Other					
KEISER DAVID W C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE CHESHIRE, CT 06410		Х		President & COO					
Signatures									
/s/ David Keiser	08/01/2007								
<u>**</u> Signature of Reporting Person	Date								

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.