#### ALEXION PHARMACEUTICALS INC

05/14/2008

Form 4 May 15, 2008

FORM	1 4						OMB APPROVAL			
	RITIES AND EXCHANGE COMMISSION shington, D.C. 20549					OMB Number:	3235-0287			
Check th							Expires:	January 31,		
if no long subject to Section 1 Form 4 o	OF CHAN	GES IN		ICIA	L OW	NERSHIP OF	Estimated a burden hour response			
Form 5 obligations may continue.  See Instruction 1(b).  Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type I	Responses)									
1. Name and A	Address of Reporting Person ARRY	Symbol	r Name and				5. Relationship of Issuer	Reporting Pers	son(s) to	
		INC [A	ON PHAI LXN]	RMACE	UTIC	CALS	(Check all applicable)			
(Last)	(First) (Middle)	(Month/D	f Earliest Tr Day/Year)	ansaction			X Director Officer (give below)		Owner er (specify	
	FER DR, C/O ALEXIO EUTICALS INC	N 05/14/2	008				below)	ociow)		
	(Street)		endment, Da nth/Day/Year	_	1		6. Individual or Jo Applicable Line) _X_ Form filed by C		rson	
CHESHIRE							Person	iore man One Re	porting	
(City)	(State) (Zip)	Tabl	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any	eemed tion Date, if h/Day/Year)	3. Transactio Code (Instr. 8)	(Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock, par value \$.0001 per share	05/14/2008		S	63	D	\$ 70.98	6,937	D		
Common Stock, par value \$.0001 per share	05/14/2008		S	600	D	\$ 70.98	6,337	D		

S

137

D

6,200

D

### Edgar Filing: ALEXION PHARMACEUTICALS INC - Form 4

Common Stock, par value \$.0001 per share					\$ 71.01		
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71.01	6,100	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71.02	6,000	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71.02	5,900	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 70.99	5,800	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71.02	5,700	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71	5,600	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71.02	5,500	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 71.04	5,400	D
	05/14/2008	S	100	D		5,300	D

#### Edgar Filing: ALEXION PHARMACEUTICALS INC - Form 4

Common Stock, par value \$.0001 per share					\$ 71.04	
Common Stock, par value \$.0001 per share	05/14/2008	S	200	D	\$ 5,100	D
Common Stock, par value \$.0001 per share	05/14/2008	S	100	D	\$ 5,000 71.05	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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Da	ate	Amou	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or						]
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration	m: .1	or		
						Exercisable	Date	Title	Number		
									of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

MATHIS LARRY
352 KNOTTER DR
C/O ALEXION PHARMACEUTICALS INC
CHESHIRE, CT 06410

Reporting Owners 3

## **Signatures**

/s/ Larry Mathis 05/15/2008

\*\*Signature of Date
Reporting Person

# **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.

Signatures 4