

ALEXION PHARMACEUTICALS INC  
 Form 4  
 January 11, 2007

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

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).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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 Responses)

1. Name and Address of Reporting Person \*  
 MADRI JOSEPH A

2. Issuer Name and Ticker or Trading Symbol  
 ALEXION PHARMACEUTICALS INC [ALXN]

5. Relationship of Reporting Person(s) to Issuer  
 (Check all applicable)

(Last) (First) (Middle)  
 C/O ALEXION PHARMACEUTICALS INC, 352 KNOTTER DRIVE  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 01/10/2007

Director  10% Owner  
 Officer (give title below)  Other (specify below)

CHESHIRE, CT 06410  
 (City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D)	Price		
Common Stock, par value \$.0001 per share	01/10/2007		D	100 <sup>(1)</sup>	D \$ 39.34	56,900	D
Common Stock, par value \$.0001 per share	01/10/2007		D	500	D \$ 39.39	56,400	D

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Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.36	56,300	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.35	56,200	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.34	56,100	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.35	56,000	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.35	55,900	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.36	55,800	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	200	D	\$ 39.36	55,600	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.36	55,500	D
Common Stock, par value \$\$.0001 per share	01/10/2007	D	100	D	\$ 39.35	55,400	D
	01/10/2007	D	100	D		55,300	D

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Common Stock, par value \$.0001 per share					\$			
					39.39			
Common Stock, par value \$.0001 per share	01/10/2007	D	100	D	\$	55,200	D	
					39.36			
Common Stock, par value \$.0001 per share	01/10/2007	D	100	D	\$	55,100	D	
					39.36			
Common Stock, par value \$.0001 per share	01/10/2007	D	100	D	\$	55,000	D	
					39.36			

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.**

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(9-02)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repor Trans (Instr
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

## Reporting Owners

Reporting Owner Name / Address

Relationships

Reporting Owners

Director 10% Owner Officer Other

MADRI JOSEPH A  
C/O ALEXION PHARMACEUTICALS INC X  
352 KNOTTER DRIVE  
CHESHIRE, CT 06410

## Signatures

/s/ Joseph Madri 01/11/2007

\*\*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).
- (1) These sales were made pursuant to orders intended to comply with Rule 10b5-1.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.  
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