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Sinha Vikas Form 4											
July 17, 200	9										
FORM				~~~			OMB AF	PPROVAL			
Washing States Second					ITIES AND EXCHANGE COMMISSION hington, D.C. 20549				OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 c	ger STATE 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES							Expires: January 20 Estimated average burden hours per response		
Form 5 obligatio may cont See Instr 1(b).	tinue. Section 1	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 <u>*</u> Sinha Vikas		2. Issuer Name and Ticker or Trading Symbol ALEXION PHARMACEUTICALS INC [ALXN]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) C/O ALEX PHARMAC KNOTTER	CUETICALS, II	(Middle) NC., 352	-	Earliest Tr Day/Year)	ansaction			Director X Officer (give below) S		o Owner er (specify	
CUEQUIDE	Filed(Mon			ndment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CHESHIRE	2, CI 06410							Person		1 0	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Executionany		3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	spose 4 and (A)	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock, par value \$.0001 per share	07/16/2009			Code V	Amount 397 <u>(1)</u>		Price \$ 38.96	(Instr. 3 and 4) 61,540	D		

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

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number.

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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amou Under Secur	tle and unt of vrlying rities \therefore 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
_			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
Sinha Vikas C/O ALEXION PHARMAO 352 KNOTTER DRIVE CHESHIRE, CT 06410	CUETICALS, INC.			SVP & CFO			
Signatures							
/a/ Wilson Cinha	07/17/2000						

/s/ Vikas Sinha 07/17/2009 <u>**</u>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 to cover the withholding taxes immediately following the vesting of previously granted Restricted Stock.

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.