Edgar Filing: ALEXION PHARMACEUTICALS INC - Form 4

ALEXION PHARMACEUTICALS INC

Form 4

Common Stock, par

value \$.0001 09/02/2005

September 07, 2005

FORM	I 1								OMB AF	PROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi if no long subject to Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									January 31, 2005 verage rs per	
Form 4 or Form 5 obligation may cont See Instru 1(b).	Filed pur ns Section 17(response	0.5								
(Print or Type F	Responses)										
1. Name and Address of Reporting Person * KEISER DAVID W			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 ALEXI PHARMAC KNOTTER	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/02/2005					X Director 10% OwnerX Officer (give title Other (specify below) President & COO				
	(Street) 4. If Ame Filed(Mor				te Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CHESHIRE	, CT 06410							Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transaction Code (Instr. 8)	4. Securit or(A) or Dis (Instr. 3, 4	sposed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$.0001	09/02/2005			F	7,500 (1)	D	\$ 28.57	62,000	D		

\$ 10

83,427

D

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

M

OMB APPROVAL

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SEC 1474 (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. Transactic Code (Instr. 8)	5. Number of or 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Stock, par value \$.0001	\$ 10	09/02/2005		M	21,427	05/17/1999	05/17/2006	Common Stock, par value \$.0001	21,427

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

KEISER DAVID W C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE CHESHIRE, CT 06410

X

President & COO

Signatures

/s/ David W.
Keiser

**Signature of Date

**Signature of 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) As indicated, the 21,427 shares acquired upon exercise of incentive stock options and the exercise price was paid by surrendering 7,500 shares of common stock then owned by the reporting person to the issuer.

Remarks:

Reporting Owners 2

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The sales reported by this Form 4 are made pursuant to the terms of a Sales Plan designed to meet the requirements of Rule 10 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.