Hallal David Form 3 March 05, 2009

### FORM 3

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

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

INITIAL STATEMENT OF 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 \*

Hallal David

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

02/23/2009

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ALEXION PHARMACEUTICALS INC [ALXN]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE

(Street)

(Check all applicable) Director

10% Owner

\_X\_\_ Officer Other (give title below) (specify below) SVP, Comm Opns, Americas 6. Individual or Joint/Group

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

CHESHIRE, CTÂ 06410

(City) (State) (Zip)

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security

(Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership Form:

4. Nature of Indirect Beneficial Ownership

(Instr. 5)

Direct (D) or Indirect (I)

(Instr. 5)

Common Stock, par value \$.0001 per share 12,230

Â D

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

SEC 1473 (7-02)

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

1. Title of Derivative Security 2. Date Exercisable and (Instr. 4)

**Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. Conversion or Exercise

5. Ownership Form of

6. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Price of Derivative Derivative Security:

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Option to Purchase Common Stock	06/19/2007	06/19/2016	Common Stock, par value \$.0001 per share	40,628	\$ 16.32	D	Â
Option to Purchase Common Stock	04/15/2007	01/15/2007	Common Stock, par value \$.0001 per share	14,062	\$ 20.58	D	Â
Option to Purchase Common Stock	10/11/2007	07/11/2017	Common Stock, par value \$.0001 per share	17,500	\$ 23.83	D	Â
Option to Purchase Common Stock	04/09/2008	01/09/2018	Common Stock, par value \$.0001 per share	18,750	\$ 35.3	D	Â
Option to Purchase Common Stock	04/26/2009	01/26/2019	Common Stock, par value \$.0001 per share	3,000	\$ 35.95	D	Â

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
coporting of the Finance France	Director	10% Owner	Officer	Other	
Hallal David C/O ALEXION PHARMACEUTICALS, INC 352 KNOTTER DRIVE CHESHIRE, CT 06410	Â	Â	SVP, Comm Opns, Americas	Â	

# **Signatures**

/s/ David Hallal	03/05/2009
**Signature of Reporting Person	Date

Reporting Owners 2

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### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.