## Edgar Filing: ALEXION PHARMACEUTICALS INC - Form 4

| ALEXION PHARMACEUTICALS IN<br>Form 4<br>May 07, 2007  | ĩC   |  |   |   |  |  |
|---|--|--|---|---|--|--|
|   |  |  | OMB A   | PPROVAL   |  |  |
| UNITED STATES   | OMB<br>Number:   | 3235-0287  |   |   |  |  |
| Subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continue<br>Section 17(a) of the             | F CHANGES IN BENEFICIAL OV<br>SECURITIES<br>Section 16(a) of the Securities Exchan<br>Public Utility Holding Company Act of<br>of the Investment Company Act of 19 | ge Act of 1934,<br>of 1935 or Section  | Expires:<br>Estimated a<br>burden hou<br>response | rs per  |  |  |
| (Print or Type Responses)   |  |  |   |   |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>LINK MAX  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>ALEXION PHARMACEUTICALS<br>INC [ALXN]   | <ul><li>5. Relationship of Reporting Person(s) to Issuer</li><li>S (Check all applicable)</li></ul>  |   |   |  |  |
| (Last) (First) (Middle)<br>C/O ALEXION<br>PHARMACEUTICALS INC., 352<br>KNOTTER DRIVE                                | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>05/03/2007  | X Director<br>Officer (give t<br>below)  |   | 9 Owner<br>er (specify  |  |  |
| (Street)  | 4. If Amendment, Date Original Filed(Month/Day/Year)   | <ol> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ol> |   |   |  |  |
| CHESHIRE, CT 06410  |  | Person   |   | porting   |  |  |
| (City) (State) (Zip)  | Table I - Non-Derivative Securities Additional Securities  | equired, Disposed of,  | , or Beneficial                                   | lly Owned   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)2. Transaction Date<br>(Month/Day/Year)2A. Deem<br>Execution<br>any<br>(Month/D | Date, if TransactionAcquired (A) or<br>Code Disposed of (D)<br>ay/Year) (Instr. 8) (Instr. 3, 4 and 5)<br>(A)<br>or  | SecuritiesForBeneficially(II)Owned(II)   | orm: Direct<br>D) or Indirect                     | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Reminder: Report on a separate line for each cl   |  | r indirectly.  |   |   |  |  |

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                            | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5. Number of<br>onDerivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) |     | erivative Expiration Date<br>ecurities (Month/Day/Year)<br>cquired (A)<br>Disposed of<br>D)<br>nstr. 3, 4, |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                     |
|--|---|---|---|---------------------------------------|--|-----|--|--------------------|---|-------------------------------------|
|  |   |   |   | Code V                                | (A) (  | (D) | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |
| Option to<br>Purchase<br>Common<br>Stock, par<br>value<br>\$.0001<br>per share | \$ 43.36  | 05/03/2007                              |   | A                                     | 10,000   |     | <u>(1)</u>   | 05/03/2017         | Common<br>Stock, par<br>value<br>\$.0001<br>per share               | 10,000                              |

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## **Reporting Owners**

| Reporting Owner Name / Address  |            | Relationships |           |         |       |  |  |
|---|------------|---------------|-----------|---------|-------|--|--|
|   |            | Director      | 10% Owner | Officer | Other |  |  |
| LINK MAX<br>C/O ALEXION PHARMACEUTICALS INC.<br>352 KNOTTER DRIVE<br>CHESHIRE, CT 06410 |            | Х             |           |         |       |  |  |
| Signatures  |            |               |           |         |       |  |  |
| /s/ Max Link  | 05/07/2007 |               |           |         |       |  |  |
| <u>**</u> Signature of<br>Reporting Person  | Date       |               |           |         |       |  |  |

## **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 options will vest quarterly in four equal installments of 2,500 options during the one year period commencing on May 3, 2007 and ending on May 3, 2008.

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.