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SQUINTO ST	FEPHEN P										
Form 4											
July 12, 2011	_										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							т	PPROVAL		
	Washington, D.C. 20549						OMB Number:	3235-0287			
Check this if no longe subject to Section 16 Form 4 or	er STATE 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							burden hou	Expires:January 31 2009Estimated average burden hours per response0.5	
Form 5 obligations may contin <i>See</i> Instruct 1(b).	s Section 1	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ection 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 R	esponses)										
1. Name and Address of Reporting Person <u>*</u> SQUINTO STEPHEN P			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			3. Date of Earliest Transaction (Month/Day/Year) 07/11/2011					Director 10% Owner Officer (give title Other (specify below) below) below) EVP, Research & Development			
CHESHIRE,	4. If Amendment, Date Original Filed(Month/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					
		(7:)						Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Aco	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Dec (Month/Day/Year) Executi any (Month			3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) o of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Stock, par value \$.0001 per share	07/11/2011			S	502 <u>(1)</u>	D	\$ 50 (2)	78,270 <u>(3)</u>	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. 3. Transaction Da Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber 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 Secu Bene Owna Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
R	Reporting Owner Name / Address				I	Relationships					

10% Owner

Officer

SQUINTO STEPHEN P C/O ALEXION PHARMACEUTICALS INC 352 KNOTTER DRIVE CHESHIRE, CT 06410

EVP, Research & Development

Other

Signatures

/s/ Stephen 07/12/2011 Squinto 07/12/2011 <u>**Signature of Date</u> 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 withholding taxes immediately following the vesting of previously granted Restricted Stock.

Director

This transaction was executed in multiple trades through a broker-dealer at prices ranging from \$50.00 - \$50.03. The price reported in this
 (2) column reflects the weighted average sales price. Upon request, the reporting person will provide to the SEC staff full information regarding the number of shares sold at each price.

(3) Reporting person's ownership reflects the 2 for 1 common stock split effected by Alexion in the form of a dividend on May 20, 2011.

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.