**Dunsire Deborah** Form 4 May 11, 2018

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* **Dunsire Deborah** 

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Officer (give title

Issuer

ALEXION PHARMACEUTICALS INC [ALXN]

(Check all applicable)

(Last)

(First)

05/09/2018

3. Date of Earliest Transaction (Month/Day/Year)

X\_ Director

10% Owner Other (specify

C/O ALEXION

PHARMACEUTICALS, INC., 100

COLLEGE STREET

4. If Amendment, Date Original

(Instr. 8)

6. Individual or Joint/Group Filing(Check

Applicable Line)

(Street)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

NEW HAVEN, CT 06510

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year)

(State)

(Zip)

Execution Date, if

(Month/Day/Year)

(Middle)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Indirect Form: Direct (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

(Instr. 3, 4 and 5)

Following Reported Transaction(s)

(Instr. 3 and 4)

Common

(City)

(Instr. 3)

Stock, par value \$.0001 per

share

05/09/2018

2,174 Α (1)

Code V Amount

\$0 4,259

Price

(D)

D

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

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(9-02)

### Edgar Filing: Dunsire Deborah - Form 4

#### number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

|  | 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.                               | 5.         | 6. Date Exerc    | cisable and | 7. Titl                     | e and        | 8. Price of | 9. Nu  |
|--|-------------|-------------|---------------------|--------------------|----------------------------------|------------|------------------|-------------|-----------------------------|--------------|-------------|--------|
|  | Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | TransactionNumber                |            | Expiration D     | ate         | Amou                        | nt of        | Derivative  | Deriv  |
|  | Security    | or Exercise |                     | any                | Code                             | of         | (Month/Day/      | Year)       | Under                       | lying        | Security    | Secui  |
|  | (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) Derivative Securities |            |                  |             | Securities (Instr. 3 and 4) |              | (Instr. 5)  | Bene   |
|  |             | Derivative  |                     |                    |                                  |            |                  |             |                             |              |             | Owne   |
|  |             | Security    |                     |                    |                                  | Acquired   |                  |             |                             |              |             | Follo  |
|  |             |             |                     |                    |                                  | (A) or     |                  |             |                             |              |             | Repo   |
|  |             |             |                     |                    |                                  | Disposed   |                  |             |                             |              |             | Trans  |
|  |             |             |                     |                    | of (D)                           |            |                  |             |                             |              |             | (Instr |
|  |             |             |                     |                    |                                  | (Instr. 3, |                  |             |                             |              |             |        |
|  |             |             |                     |                    | 4, and 5)                        |            |                  |             |                             |              |             |        |
|  |             |             |                     |                    |                                  |            |                  |             |                             | Amount       |             |        |
|  |             |             |                     |                    |                                  |            |                  |             |                             |              |             |        |
|  |             |             |                     |                    |                                  |            | Exercisable Date | Expiration  |                             | or<br>Number |             |        |
|  |             |             |                     |                    |                                  |            |                  | Date        |                             | of           |             |        |
|  |             |             |                     |                    | Code V                           | (A) (D)    |                  | Shares      |                             |              |             |        |
|  |             |             |                     |                    | Code V                           | (A) $(D)$  |                  |             |                             | Shares       |             |        |

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Dunsire Deborah C/O ALEXION PHARMACEUTICALS, INC. 100 COLLEGE STREET NEW HAVEN, CT 06510



## **Signatures**

/s/ Michael V. Greco, Attorney-in-Fact for Deborah Dunsire

05/11/2018

\*\*Signature of 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) Award of Restricted Stock Units under the 2017 Incentive Plan. Award vests on the anniversary of the grant date.

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.

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