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ALEXION PHARMACEUTICALS INC

Form 3

October 08, 2015

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number:

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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 *

Wagner Heidi L

C/O ALEXION

(Last)

(First)

(Street)

(Middle)

Statement

(Month/Day/Year)

10/01/2015

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

Filed(Month/Day/Year)

PHARMACEUTICALS, INC. 352 KNOTTER DRIVE

Director

10% Owner

_X__ Officer Other (give title below) (specify below) SVP, Global Government Affairs

(Check all applicable)

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

5. If Amendment, Date Original

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

> (I) (Instr. 5)

4. Nature of Indirect Beneficial Ownership

Form:

(Instr. 5) Direct (D) or Indirect

Common Stock, par value \$.0001 per share 25,916

Â D

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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)

Securities Underlying Derivative Security (Instr. 4)

3. Title and Amount of

4. Conversion or Exercise

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Price of 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	05/02/2011	02/02/2021	Common Stock, par value \$.0001 per share	9,500	\$ 42.655	D	Â
Option to Purchase Common Stock	05/03/2012	02/03/2022	Common Stock, par value \$.0001 per share	14,000	\$ 78.88	D	Â
Option to Purchase Common Stock	02/12/2013	11/12/2022	Common Stock, par value \$.0001 per share	3,000	\$ 91.98	D	Â
Option to Purchase Common Stock	05/06/2013	02/06/2023	Common Stock, par value \$.0001 per share	18,807	\$ 93.83	D	Â
Option to Purchase Common Stock	02/28/2015	02/28/2024	Common Stock, par value \$.0001 per share	20,000	\$ 176.8	D	Â
Option to Purchase Common Stock	02/27/2016	02/27/2025	Common Stock, par value \$.0001 per share	15,000	\$ 180.37	D	Â
Option to Purchase Common Stock	10/01/2016	10/01/2025	Common Stock, par value \$.0001 per share	5,000	\$ 157.82	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Wagner Heidi L	Â	Â	SVP, Global Government Affairs	Â		
C/O ALEXION PHARMACEUTICALS, INC						

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352 KNOTTER DRIVE CHESHIRE, CTÂ 06410

Signatures

/s/ Michael V. Greco, Attorney-in-fact for Heidi L. Wagner

10/08/2015

**Signature of Reporting Person

Date

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.

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