Edgar Filing: ALEXION PHARMACEUTICALS INC - Form 3

ALEXION PHARMACEUTICALS INC

Form 3

January 09, 2015

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

OMB APPROVAL

OMB Number:

3235-0104

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

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 *

O'Neill Julie

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

01/01/2015

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

(Check all applicable)

(give title below) (specify below)

EVP. Global Operations

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O ALEXION PHARMACEUTICALS,

INC., Â 352 KNOTTER DRIVE

(Street)

Director _X__ Officer

10% Owner Other

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 4. Nature of Indirect Beneficial Ownership

Form: Direct (D)

or Indirect

(Instr. 5)

(I) (Instr. 5)

Common Stock, par value \$.0001 per share

 $20,000^{(1)}$

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 (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

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

4. Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Derivative Security:

Edgar Filing: ALEXION PHARMACEUTICALS INC - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Option to Purchase Common Stock	03/01/2015(2)	03/01/2024	Common Stock	65,000	\$ 176.8	D	Â

Reporting Owners

Reporting Owner Name / Address		Keiationsnips					
,	Director	10% Owner	Officer	Other			
O'Neill Julie C/O ALEXION PHARMACEUTICALS, INC. 352 KNOTTER DRIVE CHESHIRE Â CTÂ 06410	Â	Â	EVP. Global Operations	Â			

Signatures

/s/ Michael Greco, Attorney-in-Fact for Julie O'Neill 01/09/2015

**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).
- (1) Restricted stock units awarded under Amended and Restated 2004 Incentive Plan. These restricted stock units vest 12,500 units on March 1, 2015, and 1,250 every 6 months thereafter until fully vested over 4 years from the grant date.
- (2) Stock options awarded under Amended and Restated 2004 Incentive Plan. These stock options vest 50,000 on March 1, 2015, and 1,250 every three months thereafter until fully vested over 4 years from 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.

Reporting Owners 2